

11/4/81
2 noon

PERMIT

Approved 11/4/81
Steyer
P 31680
A Repair

SEWAGE DISPOSAL SYSTEM
MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

TAXID# 04-368441

ELLCOTT CITY

DISTRICT 4th

DATE 10/26/81

INDEX

Jack Fyock

IS PERMITTED TO INSTALL ALTER X

ADDRESS 13775 Triadelphia Road, Glenelg, Md. 21737 PHONE 988-9270

SUBDIVISION _____ ROAD 18452 Roxbury Road LOT _____

PROPERTY OWNER James R. Abe Laura Clark 15452

ADDRESS 15452 Roxbury Road, Glenwood, Md. 21738 Phone: 489-7134

SPECIFICATIONS

SEPTIC TANK CAPACITY _____ GALLONS
DRAIN FIELD _____ DEPTH _____ FEET, BOTTOM AREA _____ SQ. FT.
DEEP TRENCH _____ DEPTH _____ FEET, BOTTOM AREA _____ SQ. FT.
SEEPAGE PITS _____ ABSORBENT SIDE-WALL AREA _____ SQ. FT.
INLET PIPE _____ FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH _____ FT. BELOW ORIGINAL GRADE
EFFECTIVE DEPTH AT _____ FT. BELOW ORIGINAL GRADE.
LOCATE DISPOSAL AREA _____ FT. FROM _____ LOT LINE AND _____ FT. FROM _____ LOT LINE AS SEEN WHEN
FACING LOT FROM

REPAIR - Replace existing tank (metal) that has collapsed with new 1000 gallon
tank.

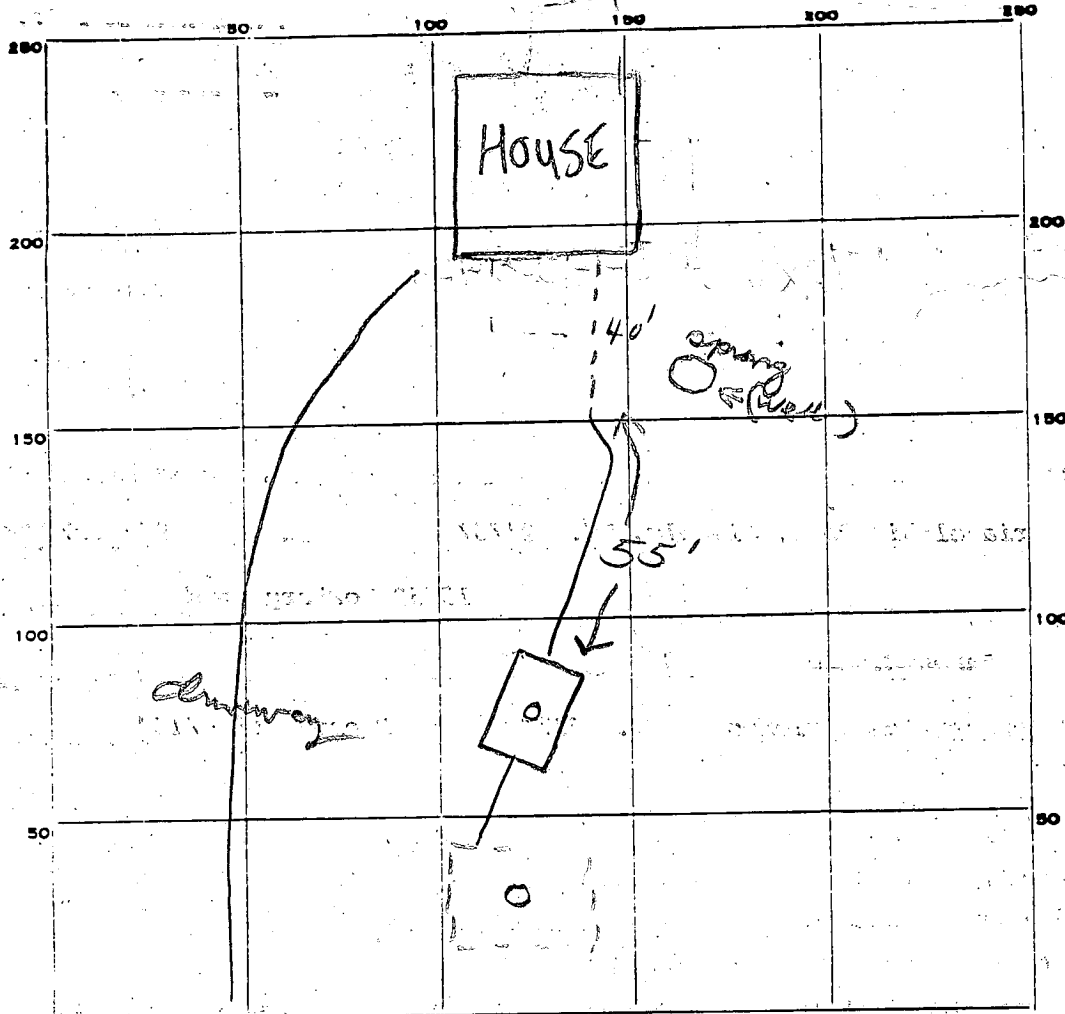
PLANS APPROVED BY Palmer F. Wine DATE 10/26/81

COVER NO WORK UNTIL INSPECTED AND APPROVED.
NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.
NOTE: IF TRENCH IS USED CALL FOR INSPECTION BEFORE PLACING GRAVEL IN TRENCH.
NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER.
NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.
PERMIT VOID AFTER THREE YEARS.
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA

BUILDING PERMIT SIGNED
INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT.
AND RETURNED

10-22-81 860150791 - Fam Room & Study

P. 31680



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

✓ Roxbury Rd

PERMIT CARD _____

SEPTIC TANK, LEVEL _____ ✓

CLEANOUTS 5T

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH _____ FT. TRENCH WIDTH _____ FT.

GRAVEL DEPTH _____ IN. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA _____

SEEPAGE PITS, INSIDE DIAMETER _____ FT. DEPTH BELOW INLET _____ FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS 11/4/81 OK to cover work. Replaced
septic tank (1000 gal) fl

BUILDING PERMIT SIGNED
 AND RETURNED

DATE SYSTEM APPROVED 11/4/81 INSPECTOR Stagers

C 1		1902		SEQUENCE NO. (MDE USE ONLY)		STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE TYPE		THIS REPORT MUST BE SUBMITTED AFTER WELL IS COMPLETED. OK 9/8/94 MSRK	
ST/CO USE ONLY DATE Received MM DD YY 8 13		DATE WELL COMPLETED MM DD YY 8 24 99		Depth of Well 22 220 26 (TO NEAREST FOOT)		PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-94-2368		COUNTY NUMBER P31680	
OWNER Carroll		STREET OR RFD 15452 Roxbury Road		TOWN Glenwood		SECTION		LOT	
WELL LOG Not required for driven wells		GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL (Circle one) CEMENT <input checked="" type="checkbox"/> BENTONITE CLAY <input checked="" type="checkbox"/> NO. OF BAGS 15 NO. OF POUNDS 1410 GALLONS OF WATER 90 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 39 ft. (enter 0 if from surface)		PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 9 METHOD USED TO MEASURE PUMPING RATE Air WATER LEVEL (distance from land surface) BEFORE PUMPING 45 ft. WHEN PUMPING 190 ft. TYPE OF PUMP USED (for test) <input checked="" type="checkbox"/> air <input type="checkbox"/> piston <input type="checkbox"/> turbine <input type="checkbox"/> centrifugal <input type="checkbox"/> rotary <input type="checkbox"/> other (describe below) <input type="checkbox"/> jet <input type="checkbox"/> submersible		C 3			
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING		Casing types: insert appropriate code below MAIN CASING TYPE St Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 43		C 2		DEPTH (nearest ft.) 41 220			
DESCRIPTION (Use additional sheets if needed)		FEET FROM TO Sand 0 39 Gray mica 39 220 Rock 220		OTHER CASING (if used) diameter depth (feet) inch from to		SCREEN RECORD screen type or open hole insert appropriate code below ST BR HO STEEL BRASS OPEN BRONZE HOLE PL PL OT PLASTIC OTHER		PUMP INSTALLED DRILLER INSTALLED PUMP (CIRCLE) (YES or NO) IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS. TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29 CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 35 PUMP HORSE POWER 37 41 PUMP COLUMN LENGTH (nearest ft.) 43 47 CASING HEIGHT (circle appropriate box and enter casing height) + above - below LAND SURFACE 2 (nearest foot)	
NUMBER OF UNSUCCESSFUL WELLS: 0		WELL HYDROFRACTURED yes <input checked="" type="checkbox"/> no <input type="checkbox"/>		C 2		DEPTH (nearest ft.) 41 220			
CIRCLE APPROPRIATE LETTER A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED E ELECTRIC LOG OBTAINED P TEST WELL CONVERTED TO PRODUCTION WELL		I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.		SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH) 56 60 from to		GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68 68		LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURES AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)	
DRILLERS LIC. NO. 1 MS D024 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. 1 D		MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q		70 72 74 75 76		TELESCOPE CASING LOG INDICATOR OTHER DATA		See Attached Location	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)									

465-6105

Chen at benchmark
led the engineering on
this.

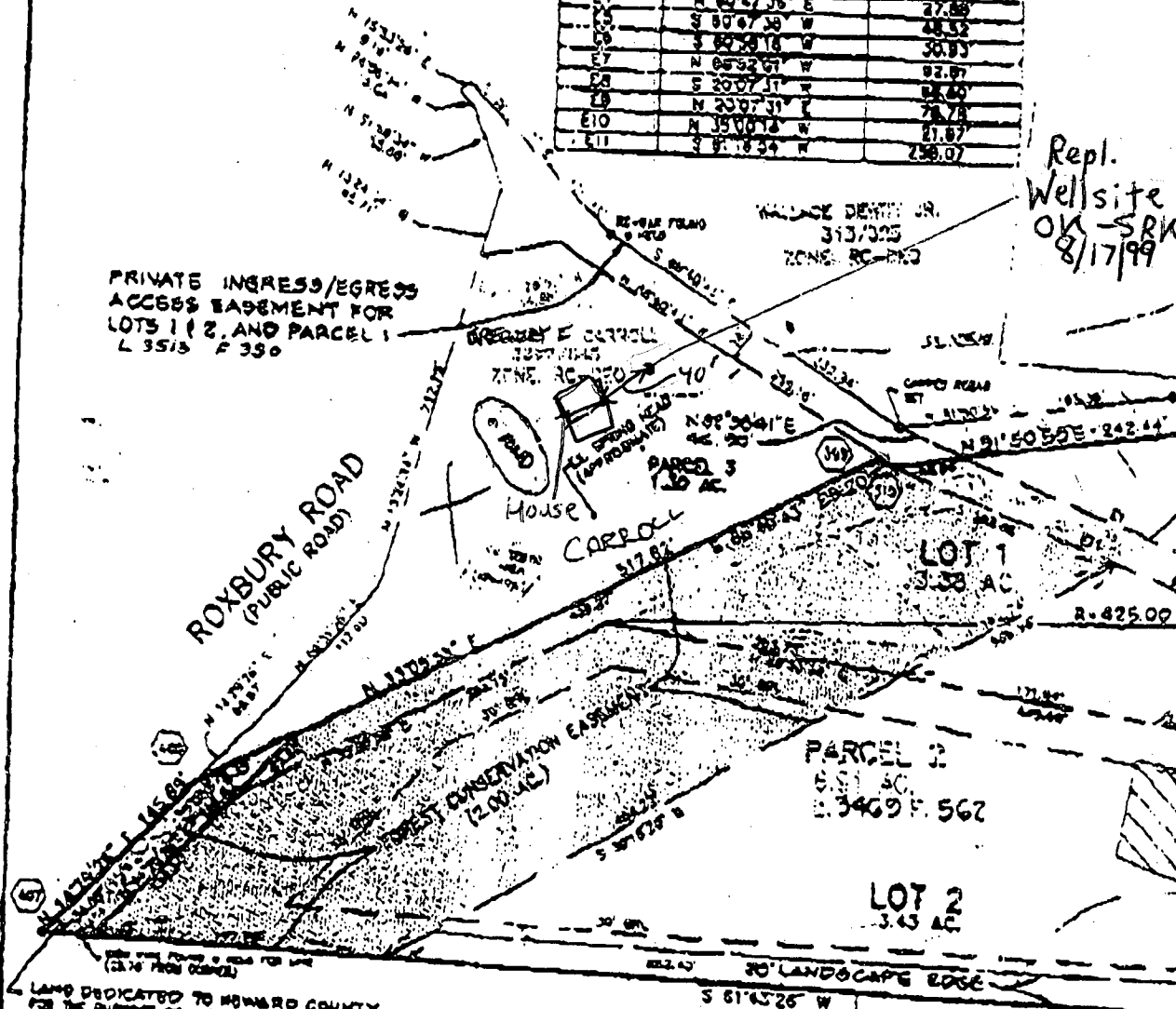
COORDINATE LIST (NAD 83)		
NO.	NORTH	EAST
296	582403.953	1301983.8892
427	581787.4344	1308833.8782
400	581928.419	1308875.1343
399	582362	1301154.8152
313	582361	1301164.8128
516	582311.6	1301334.5980
517	582374	1301625.0389
518	582350.2183	1301896.1050

ACCESS EASEMENT DATA		
LINE NO.	DIRECTION	DISTANCE
1	N 81°10'32" E	221.22
2	S 88°32'01" E	134.90
3	N 85°36'10" E	20.15
4	N 89°47'36" E	27.88
5	S 89°47'36" W	48.32
6	S 85°36'10" W	30.93
7	N 88°32'01" W	92.97
8	S 20°07'31" W	84.60
9	N 20°07'31" E	78.78
10	N 35°00'12" W	21.87
11	S 81°16'34" W	298.07

LOT NO.	
1	
2	

Repl.
Well site
OK - SRK
8/17/99

PRIVATE INGRESS/EGRESS
ACCESS EASEMENT FOR
LOTS 1 & 2, AND PARCEL 1
L 3513 F 330



JS
6-17-99
4/17/99
OK

9/3/99 Early AM

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043

Fax 313-2648 • 313-2640

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation ☒~~Replacement~~

Receipt # _____

Date _____

Name of Installer

ROBERT L. FEEZER Co. Inc. Telephone 781-4655

License Number

2122

Certified Well Pump Installer _____

Well Driller _____

Registered Plumber ☒

Name of Property Owner

UNION - EXISTING HOME

Telephone _____

Subdivision _____

Lot # _____

Well Tag #

HO-94-2368

Site Address

15452 ROXBURY RD., GLENWOOD, MD. 21738

(JOE MAYNE)

Note:

THIS IS

Pump

1. Type

a. Deep well jet

b. Shallow well jet

c. Submersible ☒

2. Make

S.P. RITE

3. Model

204602 HL-03

4. Capacity

7 GPM

5. Pump exceeds well capacity Yes _____ No ☒6. If Yes, is low pressure cutoff switch installed? Yes _____ No ☒7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors _____ Cable guards ☒ Other _____

Motor

1. Horsepower $\frac{1}{2}$

2. RPM

3450

3. Voltage _____

a. 110

b. 220 ☒

Pitless Adapter

1. Make

PITLESS

2. Model

PT-100

3. Depth

42 ft

Tank

1. Capacity

40-200 Gallons

2. Pressure relief valve? ☒

Piping

1. Type

POLYETHYLENE

2. Size

1" 160 PSI

3. NSF and/or BOCA

Code approved _____

4. Depth of supply

line 42 ft +

Well data

1. Depth 220 ft.

2. Yield 9 GPM

3. Static water

level 12 ft.

4. Will water supply be disinfected by installer? ☒

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

9/3/99 - OK TO COVER

WPI OK - SRU Signature of Applicant:

Date:

9/2/99

Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.

B 1 14394 <small>1 2 3 4 5 6</small>	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER HO-94-2368 <small>70 fill in this form completely 79</small>
Date Received (APA) 8/17/99 <small>8 MM DD YY 13</small> Carroll Greg <small>15 Last Name Owner First Name 34</small> 6707 Democracy Boulevard <small>36 Street or RFD 55</small> Bethesda Md. 20817 <small>57 Town 70 State 72 Zip 76</small>		B 3 Howard LOCATION OF WELL <small>8 COUNTY 21</small> 23 SUBDIVISION 42 SECTION 44 46 LOT 48 50 Glenwood <small>52 NEAREST TOWN 71</small> MILES FROM TOWN (enter 0 if in town) 2 <small>73 76 77 78</small>	
DRILLER INFORMATION Joseph L. Mayne MSD 24 <small>Driller's Name 76 License No. 81</small> Joseph L. Mayne Well Drilling <small>Firm Name</small> 5512 Ridge Rd. Int. Hwy, Md. 21771 <small>Address</small> Joseph L. Mayne 8/16/99 <small>Signature Date</small>		B 4 15452 Roxbury Road <small>11 NEAR WHAT ROAD 30</small> ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) <div style="display: flex; align-items: center;"> <div style="margin-right: 20px;"> 34 160 37 DISTANCE FROM ROAD ENTER FT. OR MI FT </div> <div style="text-align: center;"> </div> </div> TAX MAP: 21 BLK: 15 PARCEL 223	
B 2 WELL INFORMATION <small>1 2</small> APPROX. PUMPING RATE (GAL. PER MIN.) 5 <small>8 12</small> AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500 <small>14 20</small>		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL Howard P31680 <small>COUNTY NAME COUNTY NO.</small> STATE SIGNATURE Steven R. Krieg 081800 <small>DATE ISSUED CO SIGNATURE EXP. DATE</small> NORTH GRID 520 000 EAST GRID 788 000 <small>50 55 57 63</small>	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) 22 <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, DEWATERING <input type="checkbox"/> PUBLIC WATER SUPPLY WELL <input type="checkbox"/> TEST, OBSERVATION, MONITORING <input type="checkbox"/> GEO-THERMAL		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. well 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE E 788 N 520	
APPROXIMATE DEPTH OF WELL 160 FEET <small>24 28</small> APPROXIMATE DIAMETER OF WELL 6 INCH <small>NEAREST INCH</small>		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
METHOD OF DRILLING (circle one) BORED (or Augered) <u>JETTED</u> Jetted & DRIVEN 30 <u>AIR-ROTARY</u> AIR-PERCussion ROTARY (Hydraulic Rotary) 37 <u>CABLE</u> REVerse-ROTary DRive-POINT other _____			
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input checked="" type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS 3 <input type="checkbox"/> THIS WELL WILL DEEPEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52		SPECIAL CONDITIONS NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -	
Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER HO-94-2368 <small>54 G A P 63</small> PERMIT No. HO-94-2368 <small>70 71 72 73 74 75 76 77 78 79</small>			

FILE INQUIRY FORM


Property Address: 15452 Roxbury Road


4/8/04 Ms. Clark came to our office and inquired about adding a 2 bedroom addition to her currently 2 bedroom house. Mark and I told her to submit a plan showing the proposed addition and all the relevant features of her parcel. We told her to draw the plan as best she could to a usable scale and submit it to start the permit process.


Ms. Clark's lot is only about 1.4 acres and has a stream, pond, spring and poor soil types i.e. Colnville and MIE. We will need enough good area to enlarge her existing system and still have room for 1 full repair. This will have to be ascertained by backhoe and site inspection. She was told she would need to pay the \$225 perc. test fee. She was also made aware there is a good possibility that this repair area might not exist. She said she was going to provide a plan and hire Fyock's to dig test holes.


Also, any installed system would most likely not meet the current 100' to stream setback. We told her that a variance from MDE would probably be required. In after thought, this should probably be inquired about first (Barry). Will attempt to pose this question to Barry on 4/13/04. (BB) + M.R


4/13/04 Barry said that he would probably agree to a variance to allow a 75' setback to the stream and pond for any possible septic system. Will need 1 system and 1 repair for a 4 bedroom house to allow the addition. Sand mounds don't look possible. Conventional and alternative systems besides mounds should be explored if issue is pursued by Ms. Clark. (BB)

Help Me 

Map Reset 

Zoom Fit 

Find Location 

Remove Pin 







Layer Control 


Image Control 

Theme Map 

Local Print 

Print Layout 

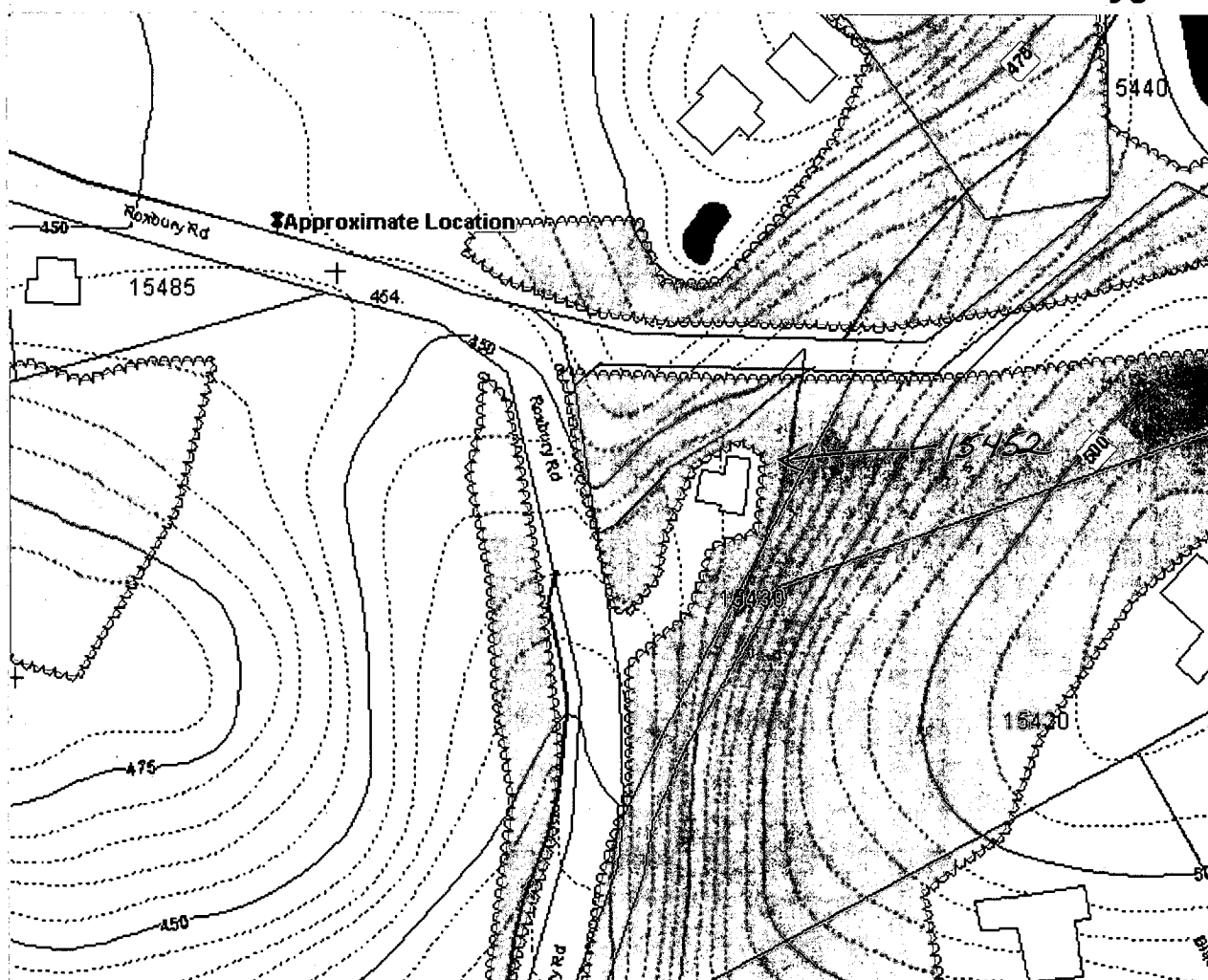
Email Map 

Map Exit 



Distance: 99.6

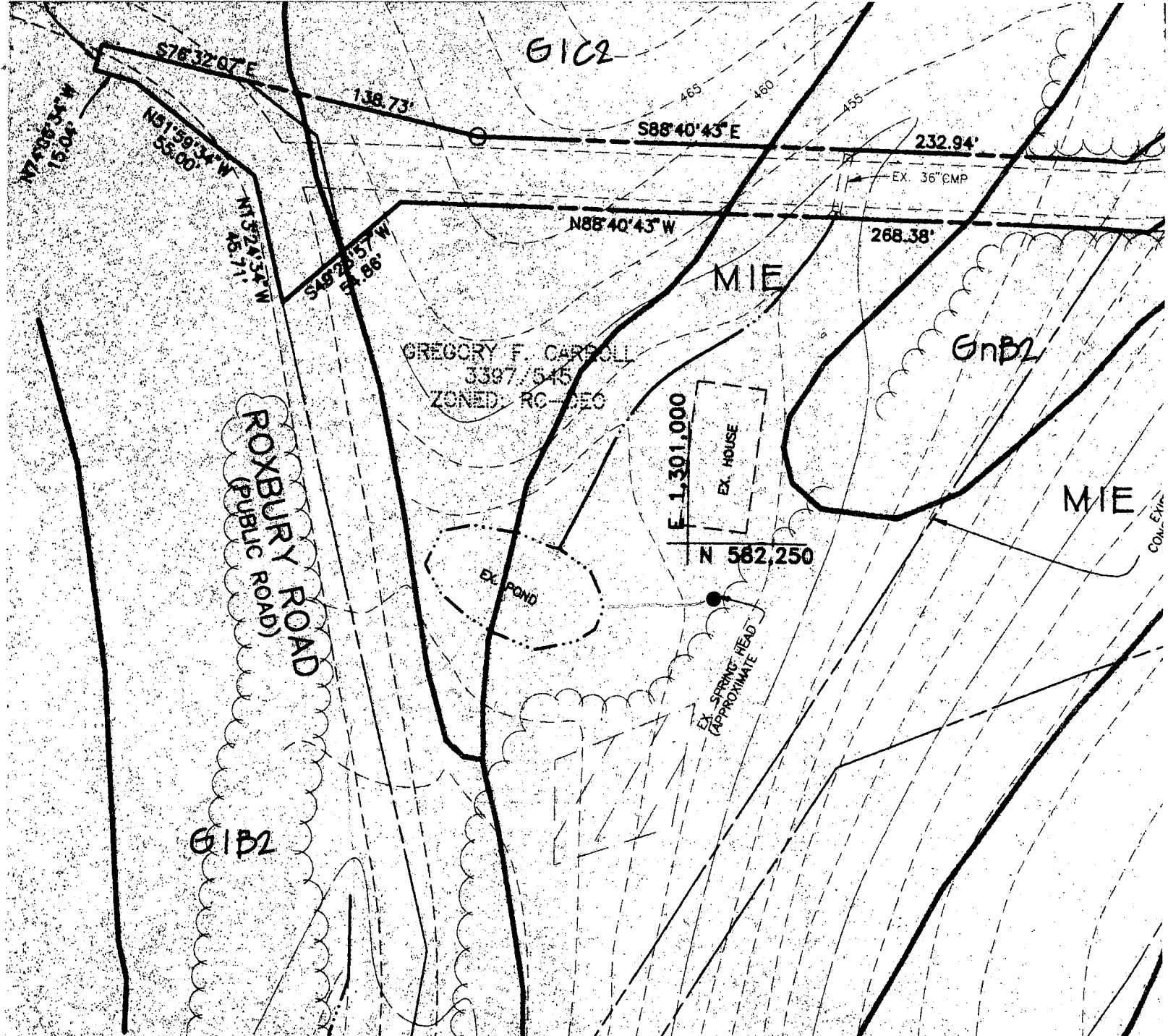
Zoom: 1070.0 ft



Disclaimer: Howard County, Maryland assumes no responsibility for the accuracy map or the information contained herein or derived therefrom. The buyer and/o assumes all risks and liabilities whatsoever resulting from or arising out of the use of this map. There are no oral agreements or warranties relating to this sale and/or use of this map.

Thursday, April 08 2004 | 2:44:41 PM | @822

Contacts: John Bussiere (x3044) Virginia Peterman (x3659) Yut Phasukyued (x3093) Robert Slivinsky (x3094)



75'

System +
1 repair for
4 Bedrooms

Alternative
Possible up to
60 min
Looks Like Best
Possibility Would Be
For Shallow
Trench Systems

SOILS LEGEND

SOL	SOIL GROUP	SOIL TYPE
B	GLENELG LOAM	3 TO 8 PERCENT SLOPES MODERATELY ERODED
B	GLENELG LOAM	8 TO 15 PERCENT SLOPES SEVERELY ERODED
C	GLENVILLE SILT LOAM	3 TO 8 PERCENT SLOPES MODERATELY ERODED
B	MANOR LOAM	8 TO 15 PERCENT SLOPES MODERATELY ERODED
B	MANOR LOAM	15 TO 25 PERCENT SLOPES MODERATELY ERODED

SITE INSPECTION SHEET

OWNER: Mae

DATE REQUESTED: 8/17/99 11:00

ADDRESS: 15452 Roxbury Rd.
Glenwood, MD

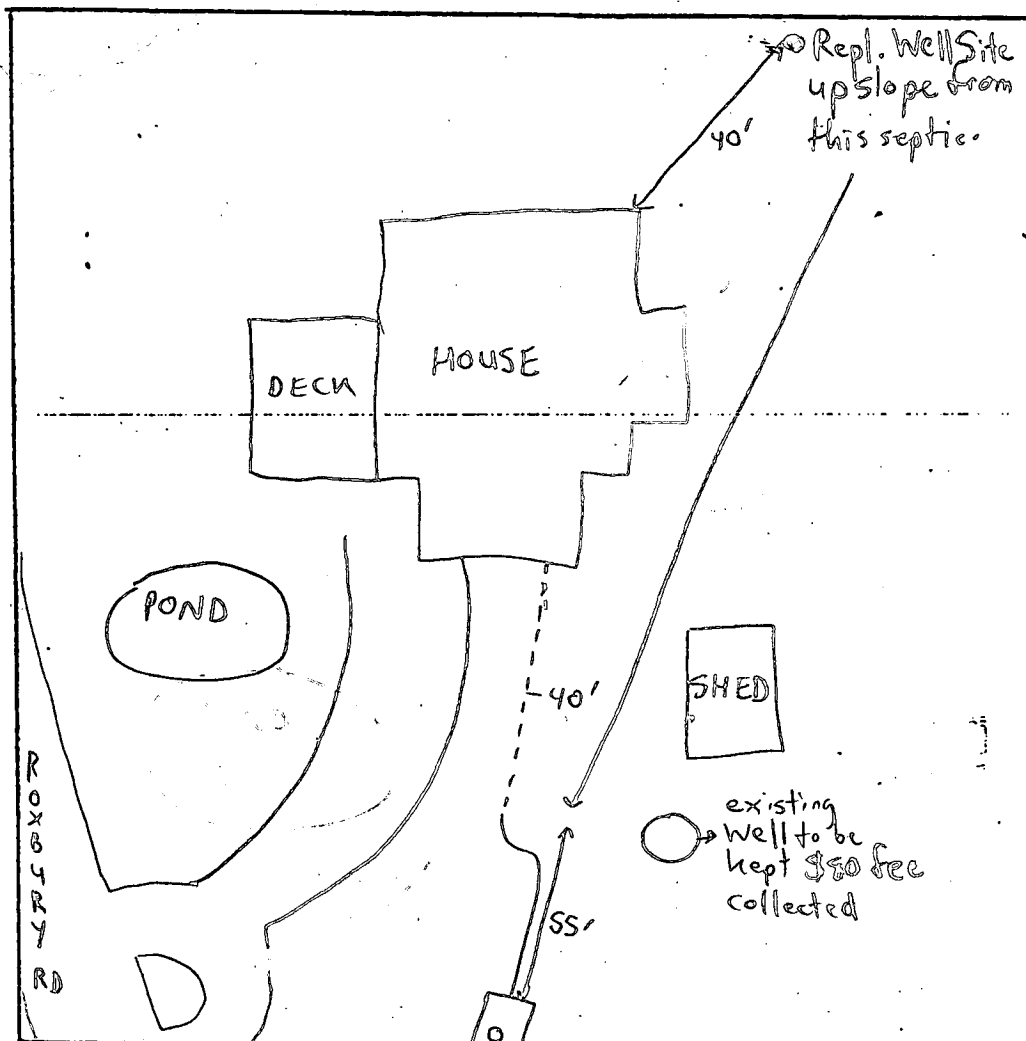
DRILLER: J. Mayne

WELL TAG # _____

COUNTY # P 31680

PROPOSAL: requests inspection to determine suitable site for repl. well

LOCATION DIAGRAM



★ 10/22/04
Septic tank:
Depth to Solids = 2 1/2'
Depth to Lid = 11"
Drywell:
Liquid depth = 5 1/2'

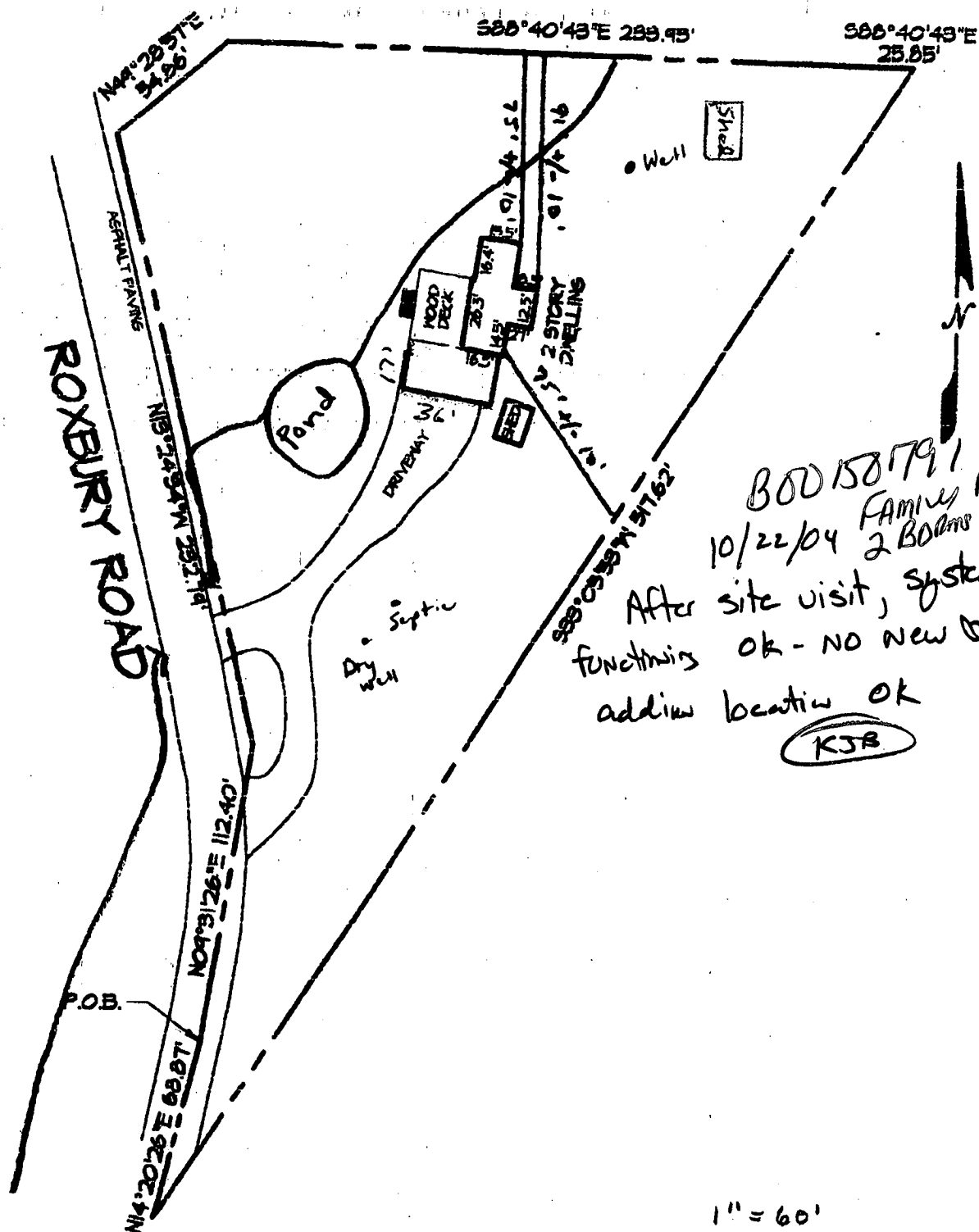
COMMENTS: 8/17/99 - Met Driller & Applicant to discuss suitable replacement well site. Original well is reduced in its yield and contaminated by bacteria. Repl. Well site is 100' from all surrounding septic, however it is in a lower landscape position than surrounding lots. It is the best practical site for this lot.

DATE: 8/17/99

INSPECTOR: Steven R. Krieg

NOTES

1. THIS DRAWING IS OF BENEFIT TO A CONSUMER ONLY INsofar AS IT IS REQUIRED BY A LENDER OR A TITLE INSURANCE COMPANY OR ITS AGENT IN CONNECTION WITH CONTEMPLATED TRANSFER, FINANCING OR REFINANCING.
2. THE DRAWING IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATION OF FENCES, GARAGES, BUILDINGS, OR OTHER EXISTING OR FUTURE IMPROVEMENTS.
3. THE DRAWING DOES NOT PROVIDE FOR THE ACCURATE IDENTIFICATION OF PROPERTY BOUNDARY LINES, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING OR REFINANCING.
4. ALL BUILDINGS, STRUCTURES AND OTHER IMPROVEMENTS SHOWN HEREON ARE IN APPROXIMATE RELATION TO THE APPARENT BOUNDARY LINES.
5. THE PROPERTY SHOWN HEREON IS SUBJECT TO ANY EASEMENTS, RIGHTS OF WAY AND/OR COVENANTS OF RECORD.
6. LEVEL OF ACCURACY OF APPARENT SETBACK DISTANCES = +/- 10'



BOD 158791
10/22/04 Family Room, 2 BDRMS + CHB 2 BDRMS
site visit, system
OK - NO new bedrooms
location OK
KJB

$$1'' = 60'$$

SURVEYORS CERTIFICATE

THIS LOCATION DRAWING HAS BEEN PREPARED IN ACCORDANCE
WITH THE MINIMUM STANDARDS OF PRACTICE FOR PROFESSIONAL

1. BEING TAHT PARCEL OF LAND DESCRIBED IN
DEED LIBER 4410, FOLIO 329, RECORDED AMONG
THE LAND RECORDS OF HOWARD COUNTY MD.