

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 512744

A 50358-L

DISTRICT _____

DATE 9-30-1999

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH~~XXXXXXX~~ 410-313-2640

DATE SYSTEM APPROVED 11/8/99

INSPECTOR B.B.

360340
INDEXEDWalter King Plumbing & Heating, Inc. IS PERMITTED TO INSTALL ☒ ALTER _____

ADDRESS 5305 King's Court, Frederick, Maryland PHONE 310-662-6990

SUBDIVISION Riggs Meadow LOT 17 ROAD 1940 Sycamore Spring Court

PROPERTY OWNER Ryan Homes

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

TRENCHES - Trench to be 3 feet wide. Inlet 2.0 feet below original grade. Bottom maximum depth 4.0 feet below original grade. Effective area begins at 3.0 feet below original grade. 2.0 feet of stone below distribution pipe.

LOCATION - Starting at the intersection of the left (N14°32'48"W) and left front (330.93'-N75°04'26"W) lot lines, go to a point 80 feet up the left front (330.93') lot line. Place the distribution box 15 feet off that point. Install trenches on contour toward the Rear (393.71') lot line as viewed from Sycamore Spring Court.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 9/13/99 DKS

PLANS APPROVED BY Ronald J. Pinkley DATE 8-27-1999

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: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS. 90° ELBOWS NOT ACCEPTABLE.

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

PERMIT VOID AFTER TWO YEARS

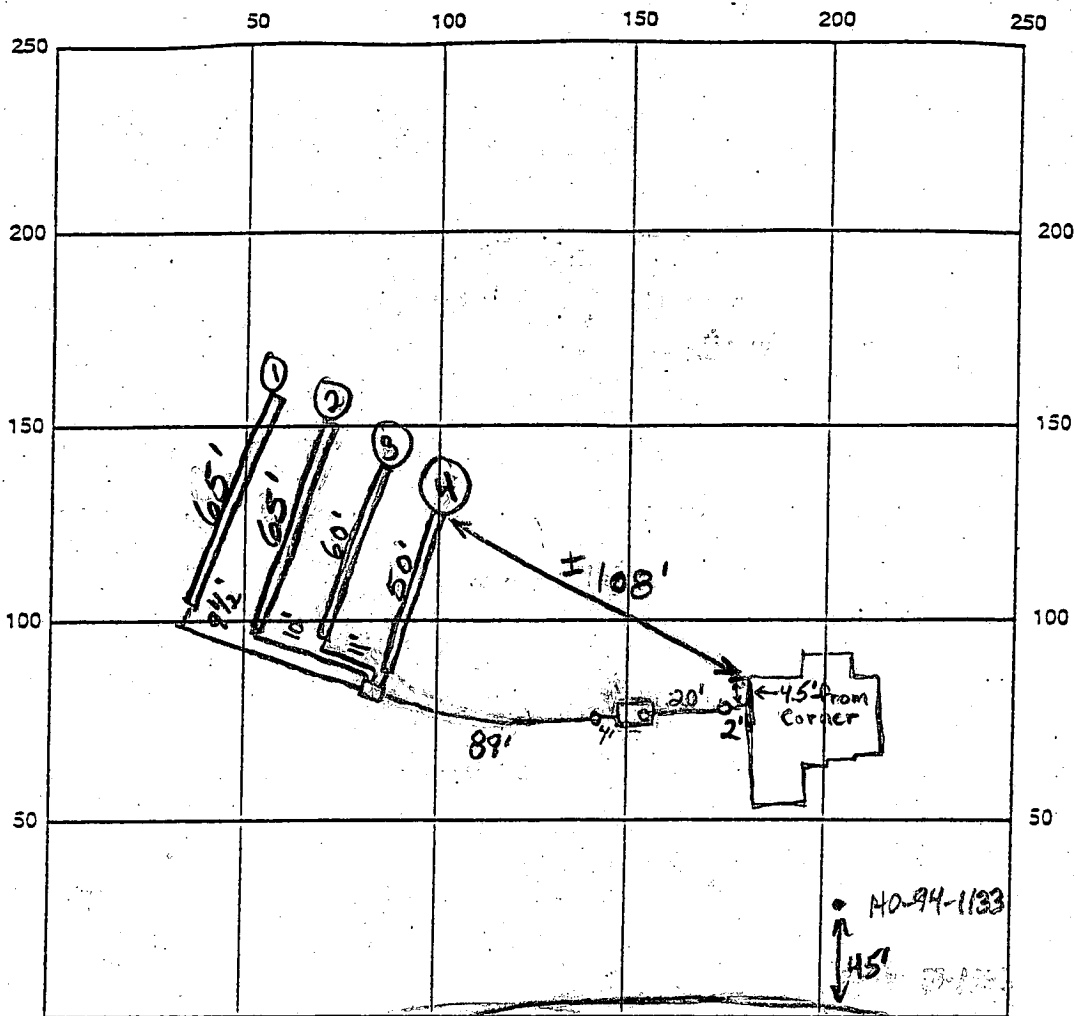
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON. CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

800119838
8/27/99 SFB

50358 L



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

End of Sycamore Springs Ct.

SEPTIC TANK LEVEL 1250 gallons

CLEANOUTS 2-4" line, 1-6" tank

DISTRIBUTION BOX LEVEL O.K.

DRAIN FIELD/TITLE DEPTH 4 FT.

TRENCH WIDTH 3 FT.

INLET DEPTH 2 FT.

EFFECTIVE GRAVEL DEPTH 2 FT.

TOTAL LENGTH 240 FT.

① ② ③ ④
65' 65' 60' 50'

NUMBER OF TRENCHES 4

ONE SIDEWALL/BOTTOM AREA 720 SQ. FT.

DRYWALL INSIDE DIAMETER — FT.

EFFECTIVE DEPTH BELOW INLET — FT.

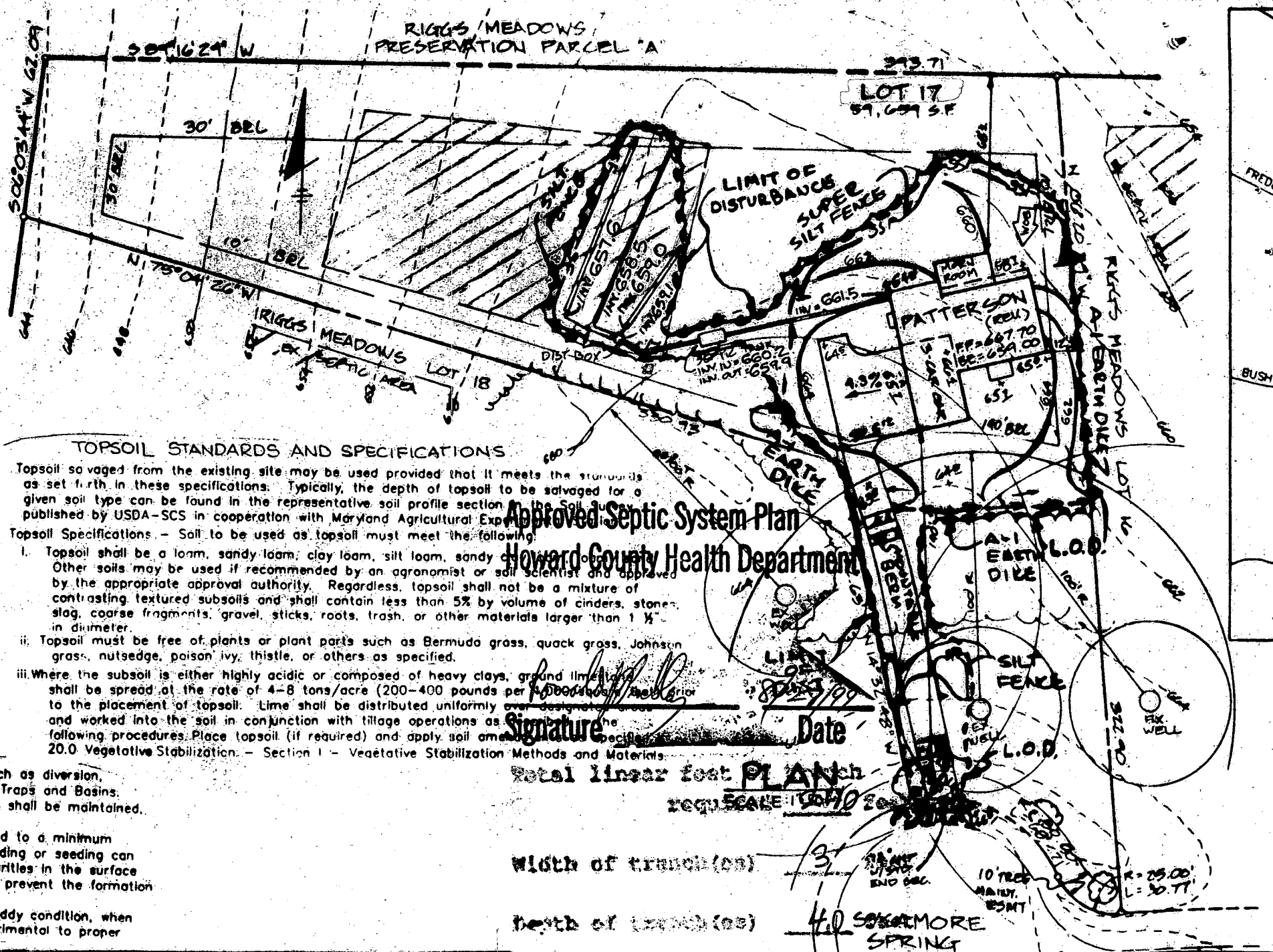
ABSORBENT AREA — SQ. FT.

REMARKS: 11/8/99 House connection made. O.K. to cover everything.

WPI O.K. BB

DATE SYSTEM APPROVED 11/8/99

INSPECTOR B. Baker



C16035

SEQUENCE NO.
(MDE USE ONLY)

STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPE

THIS REPORT MUST BE SUBMITTED WITHIN
45 DAYS AFTER WELL IS COMPLETED.

COUNTY
NUMBER

1 2 3 6
(THIS NUMBER IS TO BE PUNCHED
IN COLS. 3-6 ON ALL CARDS)

ST/CO USE ONLY
DATE Received
MM DD YY
8 13

DATE WELL COMPLETED
MM DD YY
5 28 97

Depth of Well
22 300' 26
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
140-94-1133
28 29 30 31 32 33 34 35 36 37

OWNER SJC
STREET OR RFD last name Scenic Drive first name
SUBDIVISION Kings Property SECTION TOWN Cooksville LOT 17

WELL LOG
Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR
COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (Use additional sheets if needed)	FEET		check if water bearing
	FROM	TO	
Brown Shale	0	14	
Gray Mica Rock	14	300	✓

1 Dry well 400'
Filled in with cement
& drilling materials

GROUTING RECORD
WELL HAS BEEN GROUTED
(Circle Appropriate Box) YES (Y) NO (N)
TYPE OF GROUTING MATERIAL (Circle one) CEMENT (CM) BENTONITE CLAY (BC)
NO. OF BAGS 6 NO. OF POUNDS 564
GALLONS OF WATER 36
DEPTH OF GROUT SEAL (to nearest foot)
from 0 ft. to 19 ft.
(enter 0 if from surface)

CASING RECORD
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) 21
OTHER CASING (if used) diameter inch depth (feet) from to

SCREEN RECORD
screen type or open hole insert appropriate code below
ST STEEL BR BRASS HO OPEN HOLE
PL PLASTIC OT OTHER

C3
PUMPING TEST
HOURS PUMPED (nearest hour) 3
PUMPING RATE (gal. per min.) 8.5
METHOD USED TO MEASURE PUMPING RATE Bucket
WATER LEVEL (distance from land surface)
BEFORE PUMPING 39 ft.
WHEN PUMPING 140 ft.
TYPE OF PUMP USED (for test)
A air P piston T turbine
C centrifugal R rotary O other (describe below)
J jet S submersible

NUMBER OF UNSUCCESSFUL WELLS: 1

WELL HYDROFRACTURED YES (Y) NO (N)

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.

DRILLERS LIC. NO. 1 MSD024
DRILLERS SIGNATURE Joseph J. Mayne
(MUST MATCH SIGNATURE ON APPLICATION)
LIC. NO. 1 M D

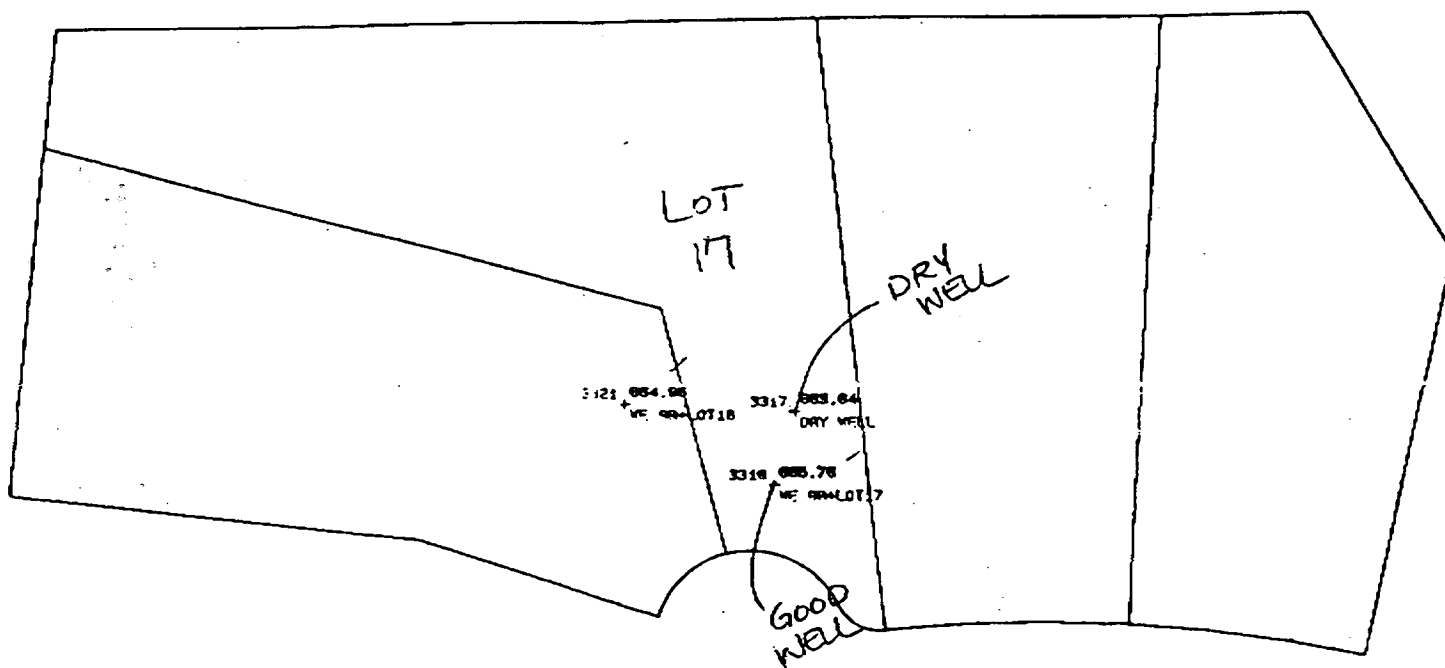
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

C2 DEPTH (nearest ft.)
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76
1 H0 20 300
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

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

PUMP INSTALLED
DRILLER WILL INSTALL PUMP (CIRCLE) (YES or NO) YES 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 LAND SURFACE
- below (nearest foot) 1
LOCATION OF WELL ON LOT
SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND /OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)
See attached locations



Riggs 0533
1"=100'

EMERGENCY/TEMP NO. IF ANY

B 1 7455		SEQUENCE NO. (MDE USE ONLY)		STATE OF MARYLAND PERMIT TO DRILL WELL please print or type		STATE PERMIT NUMBER H0-94-1133 <small>70 fill in this form completely 78</small>	
Date Received (APA) 033197				OWNER INFORMATION			
8 033197				13 OWNER INFORMATION			
15 Last Name: SDC				34 First Name: []			
36 Street or RFD: PO BOX 417				55 []			
57 Town: ELLICOTT				76 Zip: CITYMD21041			
DRILLER INFORMATION				CIRCLE: MSD / MGD / MWD			
Driller's Name: Joseph R. Mayne				77 License No. 80: 929			
Firm Name: Joseph R. Mayne Well Drilling							
Address: 5512 Ridge Rd. Mt. Airy MD. 21771							
Signature: Joseph R. Mayne				Date: 3/31/97			
B 2		WELL INFORMATION					
APPROX. PUMPING RATE (GAL. PER MIN.)		8 5 12 []					
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY)		14 500 20 []					
USE FOR WATER (CIRCLE APPROPRIATE BOX)							
<input checked="" type="checkbox"/> D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)							
<input type="checkbox"/> F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)							
<input type="checkbox"/> I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)							
<input type="checkbox"/> P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)							
<input type="checkbox"/> T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)							
APPROXIMATE DEPTH OF WELL 240 28 FEET							
APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH							
METHOD OF DRILLING (circle one)							
<input checked="" type="checkbox"/> BORED (or Augered) <input type="checkbox"/> JETTED <input type="checkbox"/> Jettied & DRIVEN							
<input checked="" type="checkbox"/> AIR-ROTARY <input type="checkbox"/> AIR-PERCussion <input type="checkbox"/> ROTARY (Hydraulic Rotary)							
<input type="checkbox"/> CABLE <input type="checkbox"/> REverse-ROTary <input type="checkbox"/> DRive-POINT							
other []							
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)							
<input checked="" type="checkbox"/> N THIS WELL WILL NOT REPLACE AN EXISTING WELL							
<input type="checkbox"/> Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED							
<input type="checkbox"/> S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS							
<input type="checkbox"/> D THIS WELL WILL DEEPMEN AN EXISTING WELL							
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 [] 52 []							
Not to be filled in by driller (MDE OR COUNTY USE ONLY)							
APPROX. PERMIT NUMBER [] [] [] G A P [] [] 54 63							
FORCE <input checked="" type="checkbox"/> WRITE INITIALS IN BOX PERMIT No. H0-94-1133 70 71 72 73 74 75 76 77 78 79							
SPECIAL CONDITIONS <small>NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -</small>							

B 3 **LOCATION OF WELL**

1 **2** HOWARD

8 COUNTY: RIGGS **21** PROPERTY

23 SUBDIVISION [] **42**

SECTION [] **LOT** 17 **44** **46** **48** **50**

52 NEAREST TOWN: COOKSVILLE **71**

70 MILES FROM TOWN (enter 0 if in town) 1 **73** **76** **77** **78** M I

B 4

1 **2** DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

TOWN

11 **30** Scenic Dr. NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

WEST S EAST

34 80 **37** DISTANCE FROM ROAD

ENTER FT OR MI 77 **38** **39**

TAX MAP: [] **BLK:** [] **PARCEL:** []

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard

COUNTY NAME Howard **COUNTY NO.** 13

STATE SIGNATURE [] **DATE ISSUED** 050997 **INSERT S** 5/9/98 **41**

43 **48** **CO SIGNATURE** Kimberly Maisto **EXP. DATE** 5/9/98

NORTH GRID 542000 **EAST GRID** 0792000 **50** **55** **57** **63**

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

7902

53042

9:30 AM 5/28/97

5-28-97

grout ok

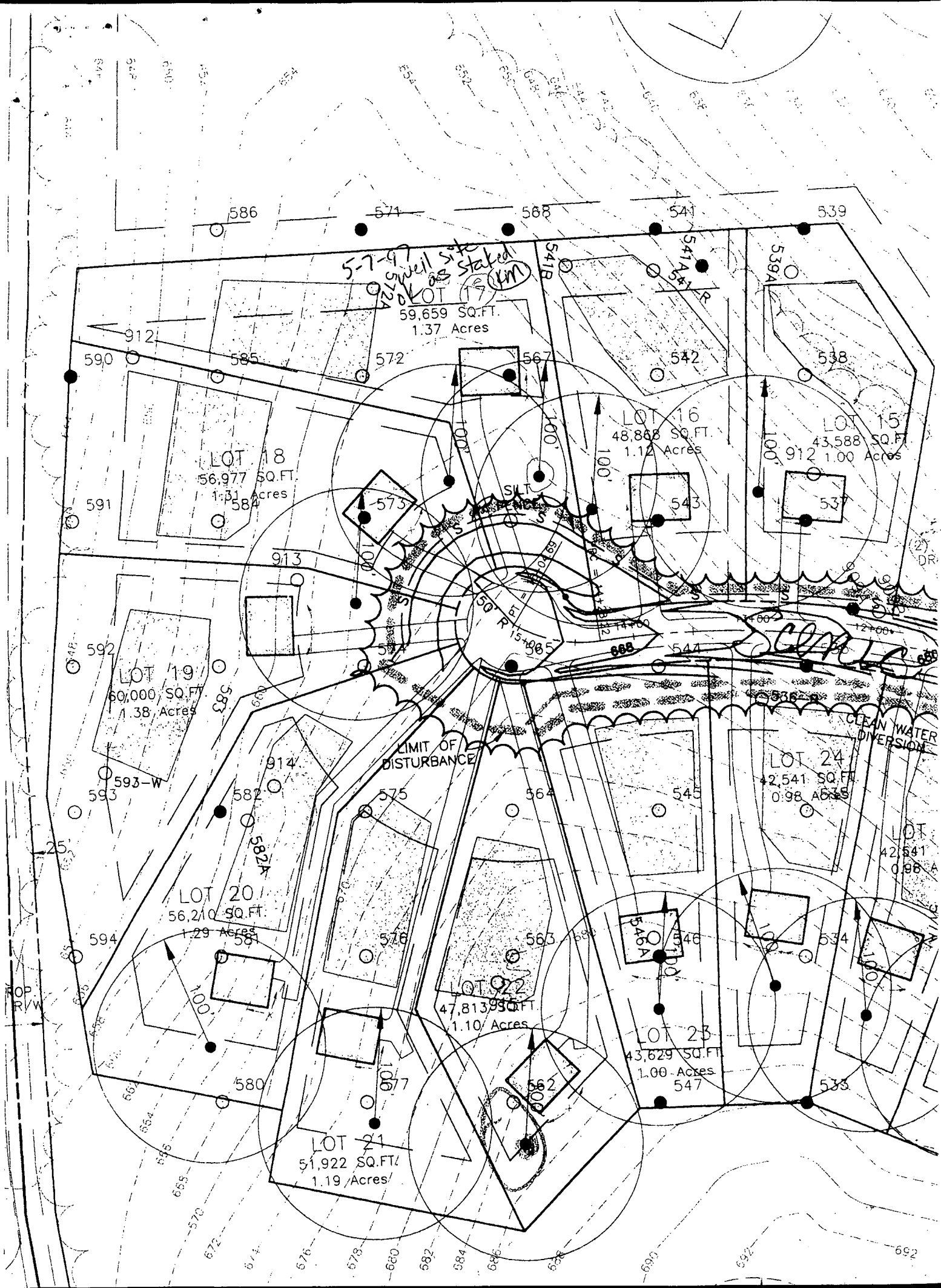
location ok

21' casing

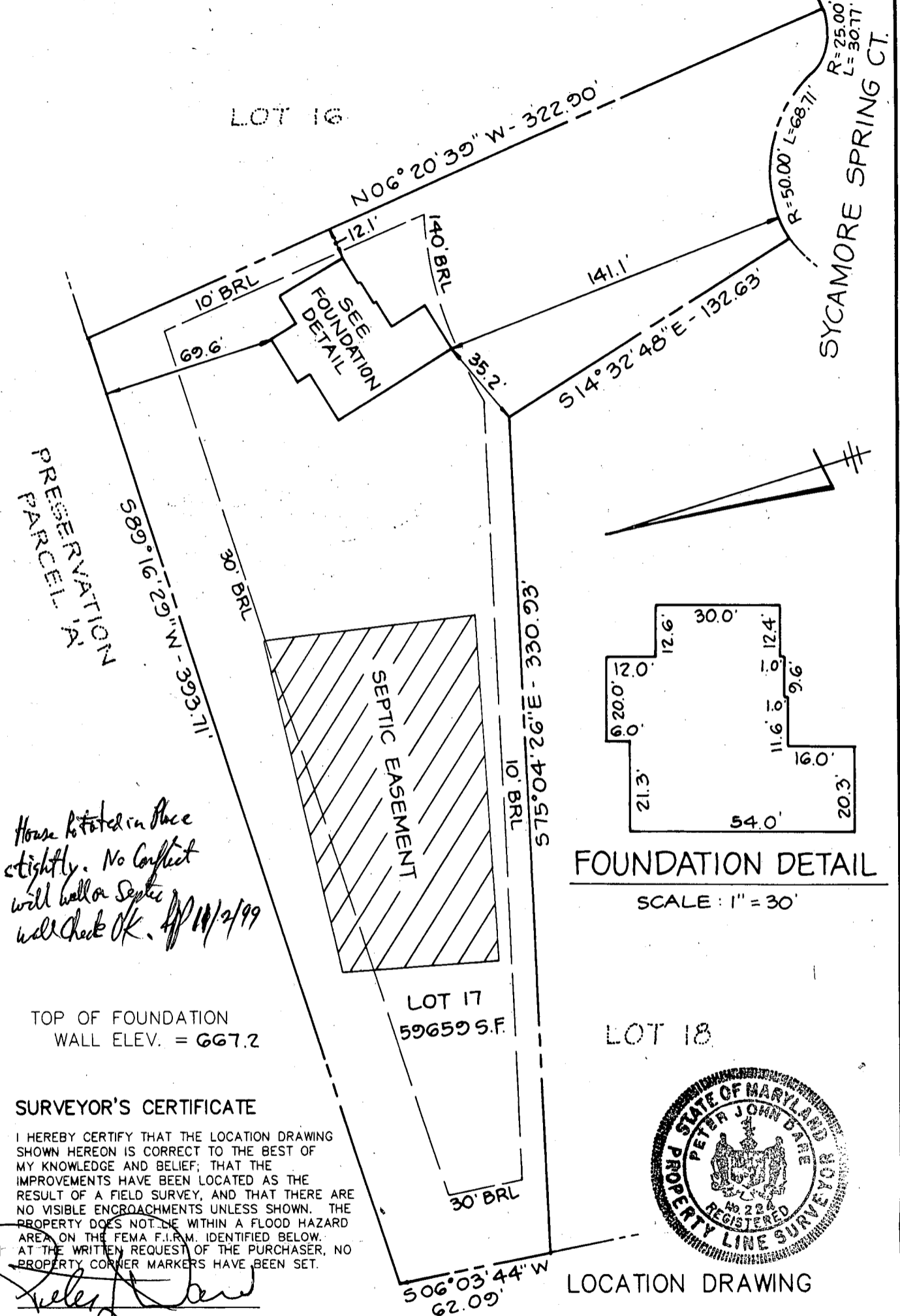
19' open

6 bags (km)

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION



THIS LOCATION DRAWING IS OF BENEFIT TO A CONSUMER ONLY INsofar AS IT IS REQUIRED BY A LENDER OR TITLE INSURANCE COMPANY, OR ITS AGENTS, IN CONNECTION WITH FINANCING THE PROPERTY SHOWN HEREON. THIS DRAWING IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OF PROPERTY LINES OR THE CONSTRUCTION OF IMPROVEMENTS SUCH AS FENCES, GARAGES, OR BUILDING ADDITIONS. THIS DRAWING SHOWS THE CONFIGURATION AS CURRENTLY RECORDED, BEING SUFFICIENT FOR SETTLEMENT PURPOSES, BUT BEING INSUFFICIENT FOR THE SETTING OF PROPERTY CORNER PINS ON THE GROUND.



House to be placed in place slightly. No conflict with wall or Septic well check OK. 11/2/99

TOP OF FOUNDATION WALL ELEV. = 667.2

SURVEYOR'S CERTIFICATE

I HEREBY CERTIFY THAT THE LOCATION DRAWING SHOWN HEREON IS CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF; THAT THE IMPROVEMENTS HAVE BEEN LOCATED AS THE RESULT OF A FIELD SURVEY, AND THAT THERE ARE NO VISIBLE ENCROACHMENTS UNLESS SHOWN. THE PROPERTY DOES NOT LIE WITHIN A FLOOD HAZARD AREA ON THE FEMA F.I.R.M. IDENTIFIED BELOW. AT THE WRITTEN REQUEST OF THE PURCHASER, NO PROPERTY CORNER MARKERS HAVE BEEN SET.

PETER J. DARE
MD. PROPERTY LINE SURVEYOR #224

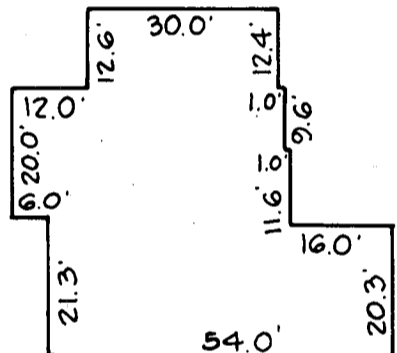
RECORD PLAT No. 12960
FEMA FIRM No. 240044-008 B
DATED 12-4-86



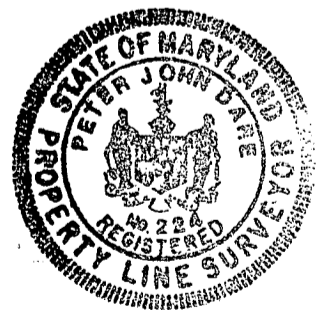
8480 BALTIMORE NATIONAL PIKE • SUITE 418 • ELLICOTT CITY, MD 21043
PHONE: 410-465-6105 FAX: 410-465-6644

FOUNDATION DETAIL

SCALE: 1" = 30'



LOT 18



LOCATION DRAWING

RIGGS MEADOW
LOT 17

1940 SYCAMORE SPRING COURT

ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
SCALE: 1" = 50' DATE: 10-26-99

APPLICATION

PERCOLATION TESTING

A 50368

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
PO BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE 461-9933

DISTRICT

4th

DATE

9/30/94

P

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT OR RECONSTRUCT A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER

Amalia Riggs, c/o SDC Group, Inc. RYAN HOMES
8480 Baltimore - National Pk

ADDRESS

PO BOX 417, Ellicott City, MD 21041 PHONE (410) 465-6105

PROSPECTIVE BUYER

ADDRESS

PHONE

PROPERTY LOCATION:

SUBDIVISION

Riggs Property

LOT NO

Grd. 1 17

ROAD AND DESCRIPTION

(1940 Sycamore Spring Court)
Located @ SW Corner of the intersection of
Roxbury Mill (Rte. 97) & Frederick Rd (Rte 144)

TAX MAP

8814

PARCEL #

96

SIZE OF LOT

55000 ± S.F.

TYPE BLDG

Single Family Dwelling
(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

James R. Morley, III V. Pos.
(SIGNATURE OF APPLICANT)

APPROVED BY

FOR

DATE

REJECTED BY

FOR

DATE

HOLD PENDING FURTHER TESTS

DATE

REASONS FOR REJECTION OR HOLDING

DECL. PERM. SIGN'D

RECEIVED 5-28-99

Serial # B. N. 11 9838

THIS IS NOT A PERMIT

SFD-4Bm-

COUNTY #

SOIL PROFILE

0' 572

reddish
brn
cl silm3' yellow
red
gravelly
loam8' 30%
rock
Pocket
not
continuous

10.5' Refusal

586

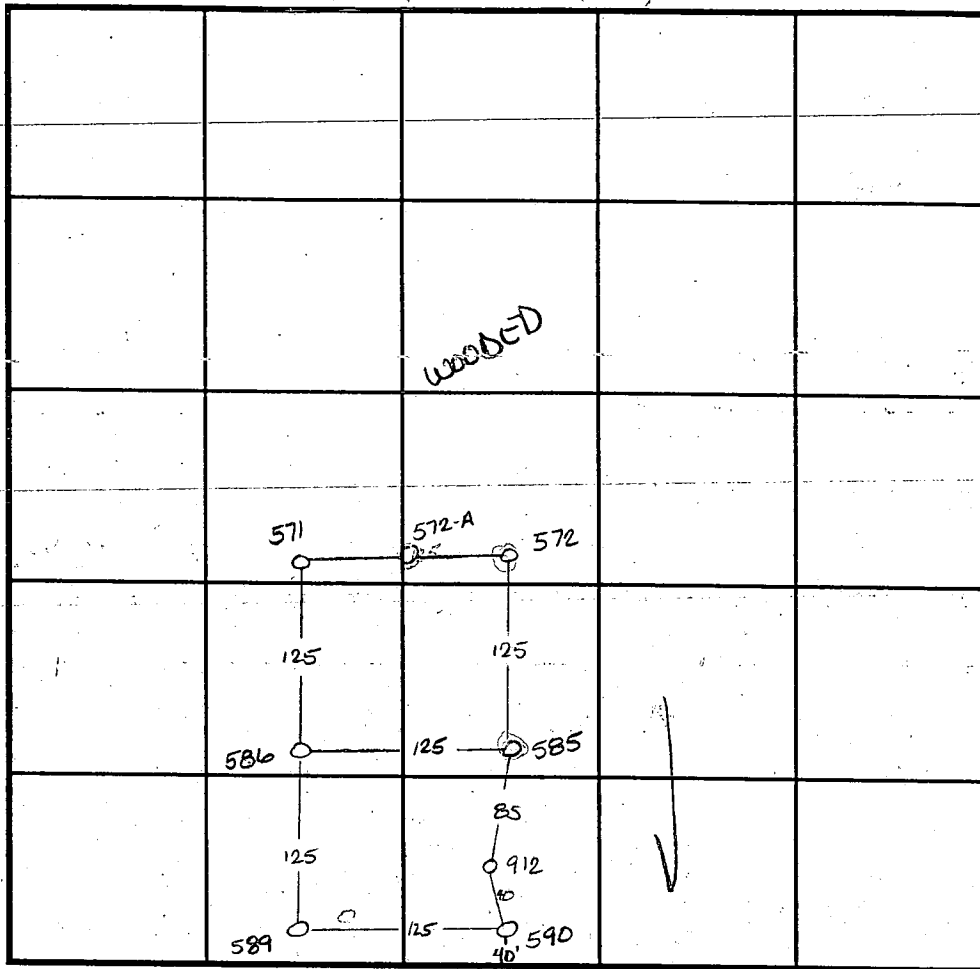
bright red
cl silm3.5' red's
yellow
spotty
silm
from
parent
rock8' greyish
brown
silm
20%
(loam)
grey
rock

10.5'

589

orange
red
cl silm4' orange
red
sasilum7' lgt yellow
sasilum50%
rock
flags

12'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

BUSHY PARK RD

SOIL PROFILE

0' 585

orange
brn
cl silm2.5' bright
red
gravelly
silm
< 50%
saprolite

12' 590

5' tan
cl silm
bright red
sasilum
gravelly
8' orange
red silm
9.5' refusal

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11-17-94	571	Refusal at 8'					F
	572	3' V10.5	5:41	5:41 ³⁰	5:41 ³⁰	5:43 ³⁰	2min
	586	4' V10.5	4:54	4:55	4:55	4:56	1min
	585	3.5' V12	6:13	6:14	6:14	6:17	3min
	590	3.0' V9.5	6:04	6:12	> 30	min -	slow F
	589	4.5' V12	4:58 ⁴⁵	5:00	5:00	5:02	2min

REMARKS

TYPE OF SOIL

TESTED BY Amy McMillen

ALSO PRESENT

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

2 min

TRENCH WIDTH

3'

INLET DEPTH

2.0

MAXIMUM BOTTOM DEPTH

4.0

SQ. FT/BEDROOM

180

