

3/7/00
Septic C.O.
Late A.M.

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXX~~ 410-313-2640

P 513221

A 50368-A

DISTRICT _____

DATE 1/11/2000

DATE SYSTEM APPROVED 3/7/00

INSPECTOR DKS

RPS - NOT EXIST
INDEXED

Walter W. King Plumbing & Heating

IS PERMITTED TO INSTALL ☒ ALTER _____

ADDRESS 5305 King's Court, Frederick, MD 21703

PHONE 301-662-6990

SUBDIVISION Riggs Property

LOT 6

ROAD 14615 Riggs Meadow Drive

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 4.0 feet below original grade. Bottom maximum depth 6.0 feet below original grade. Effective area begins at 4.0 feet below original grade. 2.0 feet of stone below distribution pipe.

LOCATION - Place the distribution box 130 feet off the 217.73' lot line and 105 feet off the 249.86' lot line as seen from the pipestem off Riggs Meadow Drive. Run trenches along contour towards the 249.86' lot line.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 3/00 DKS

PLANS APPROVED BY Donna K. Soe

DATE 12/21/99

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

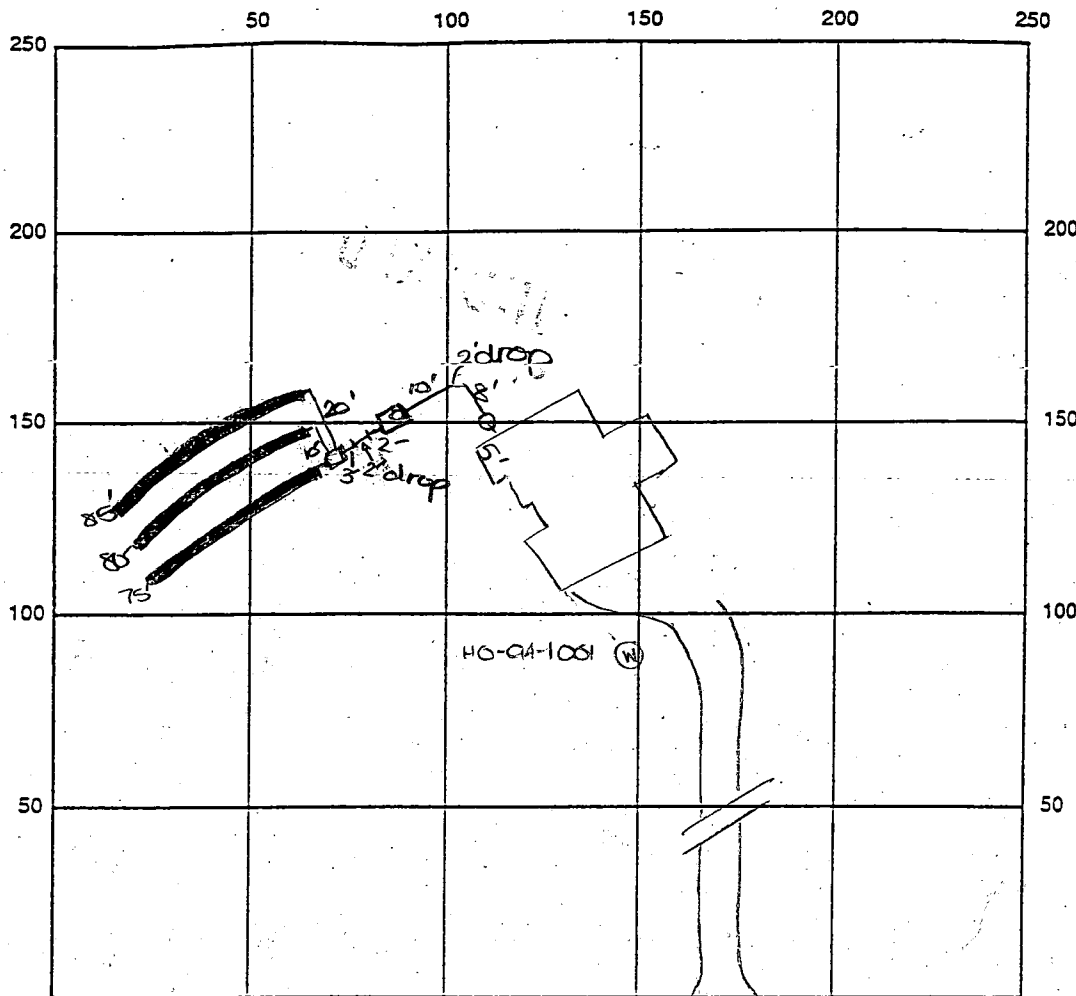
*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

HD-260(6-90)

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

A 50368 A

NOT TO SCALE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

Riggs Meadow Drive

SEPTIC TANK LEVEL OK-1250 gvu CLEANOUTS one at house, one on s.t.

DISTRIBUTION BOX LEVEL OK

DRAIN FIELD/TITLE DEPTH 6 FT. TRENCH WIDTH 3 FT. INLET DEPTH 4 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 240 FT.

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 720 SQ. FT.

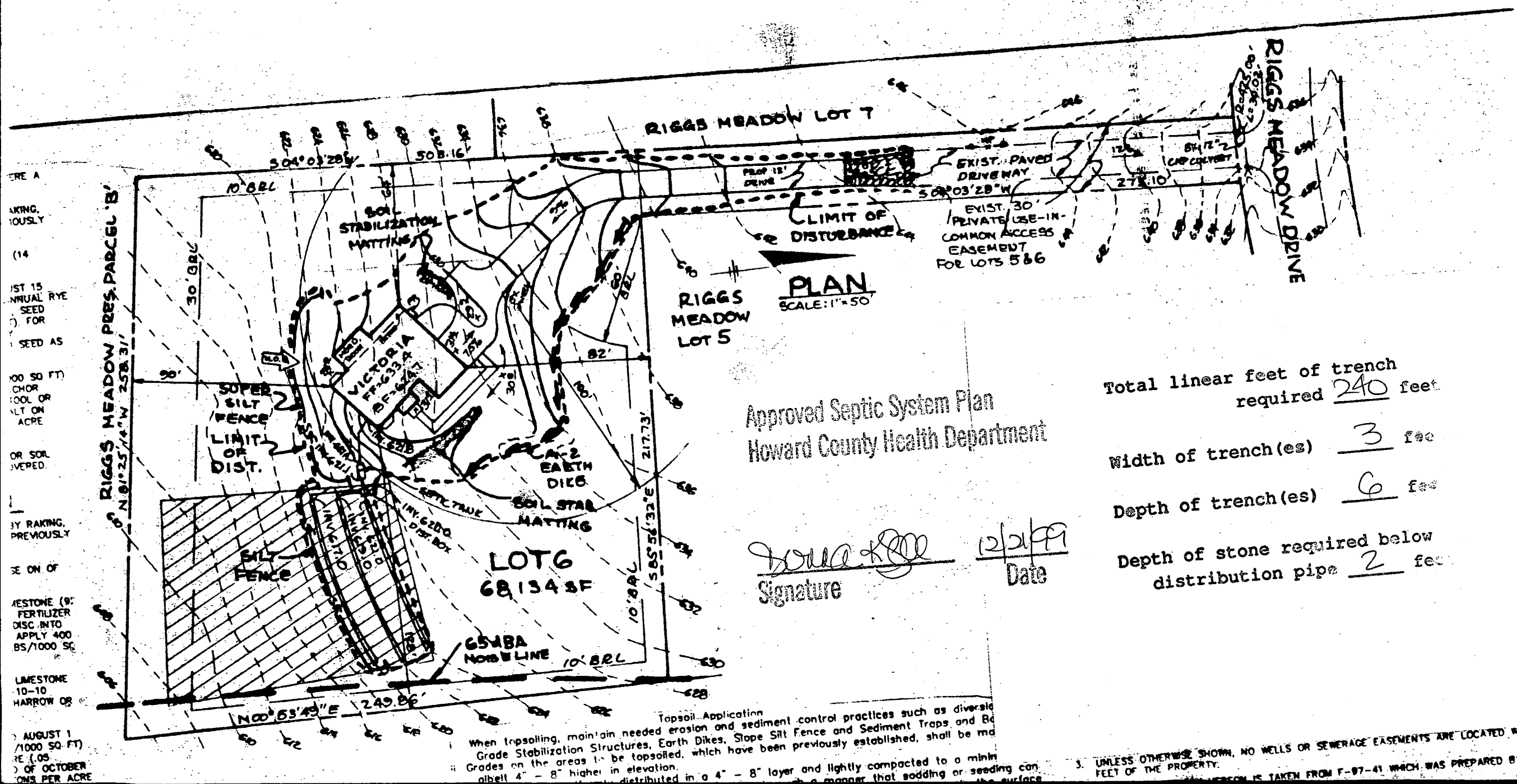
DRYWALL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA SQ. FT.

REMARKS: 3/7/00 FINAL INSP - OK to cover all septic work. JAS

3/7/00 WPI - well line, R.A. 3' below grade, well casing 1' above grade, 2-pc cap ok, PVC conduit ok, OK TO COVER. JAS

DATE SYSTEM APPROVED 3/7/00 INSPECTOR JAS



Approved Septic System Plan
Howard County Health Department

Wanda K. Lee
Signature

12/21/99
Date

Total linear feet of trench
required 240 feet

Width of trench(es) 3 feet

Depth of trench(es) 6 feet

Depth of stone required below
distribution pipe 2 feet

APPLICATION

PERCOLATION TESTING

A 50368A

P _____

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2840

DISTRICT _____

DATE 11-1-94
12-30-94

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER RYAN HOMES
AMALIA RIGGS C/O SECURITY DEVELOPMENT CORP.

ADDRESS P.O. Box 417, ELLICOTT CITY, MD 21041 PHONE (410) 465-4244

AGENT OR PROSPECTIVE BUYER COOKSVILLE LIMITED PARTNERSHIP

ADDRESS P.O. Box 417, ELLICOTT CITY, MD 21041 PHONE (410) 465-4244

PROPERTY LOCATION: RIGGS MEADOWS

SUBDIVISION RIGGS PROPERTY LOT NO. 856

ROAD AND DESCRIPTION ROXBURY MILLS ROAD (RTE. 97) 1/2 MD. RTE 144
14615 RIGGS MEADOW DRIVE

TAX MAP 8 & 14 PARCEL # 96

SIZE OF LOT 1 AC. ±

TYPE BLDG.

PERMIT SIGNED

AND RETURNED

B00121759

12/22/99

SINGLE FAMILY - 4 BRMS
(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.

(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

COUNTY #

SOIL PROFILE

0' 613 | 614

Yellow
tan
C

4'

Pink
SL
25%
rock
Same
to
11'

11'

615 | 616

Red. brn
C

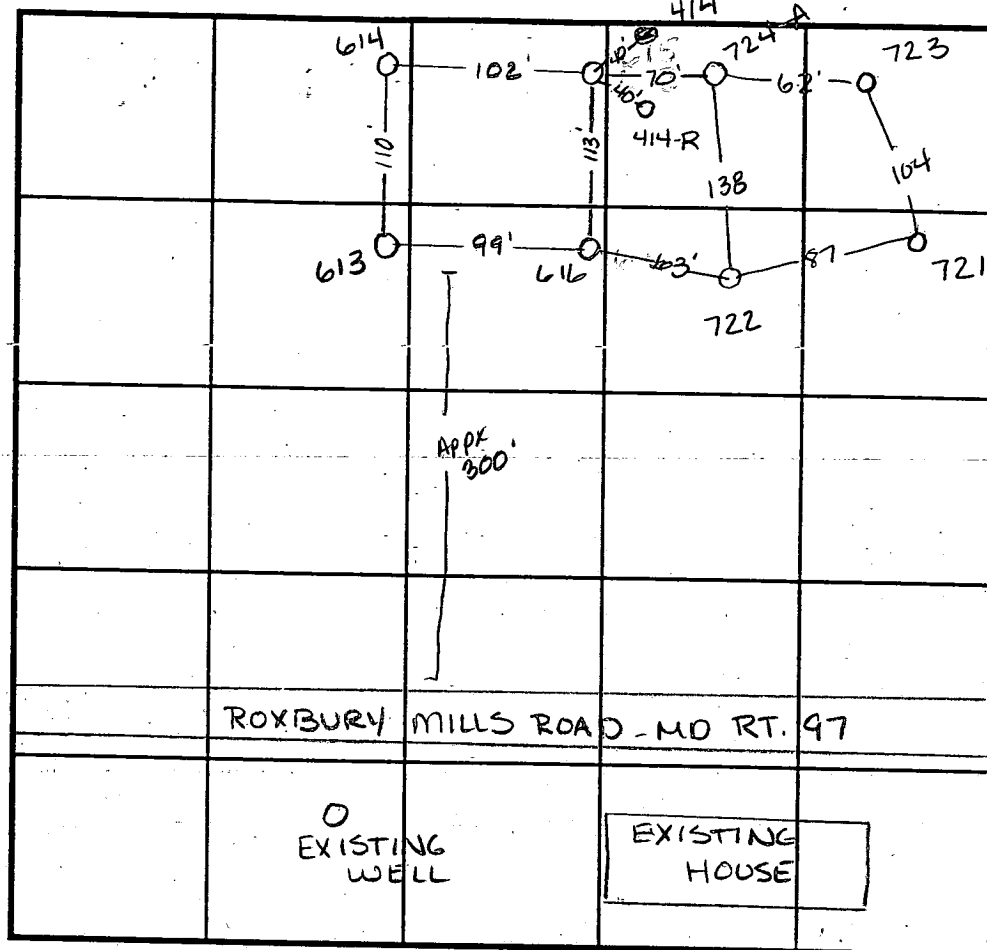
4.5'

orange
red
sil
20%
rock

11'

SOIL PROFILE

0'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11-5-95	613	2.5 VII	5:50	>30	min	—	Slow
	613	5.5' VII	5:50 ³⁰	5:52	5:52	5:55 ³⁰	3 1/2 min
	616	5' VII	5:57	5:58	5:58	6:00	2 min
	615	5' VII.5'	6:00 ¹⁵	6:02	6:02	6:04	2 min
	614	5.5' VII	6:04	6:06 ¹⁵	6:06 ¹⁵	6:10 ¹⁵	4 min
11-2-94	414	Visual to 10'	>50% rock		—	—	F
2							

REMARKS

TYPE OF SOIL

TESTED BY Amy McMillan

ALSO PRESENT Clark Sperry

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

TRENCH WIDTH

INLET DEPTH

MAXIMUM BOTTOM DEPTH

SQ. FT./BEDROOM

APPLICATION

PERCOLATION TESTING

A 50368K

P _____

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2840

DISTRICT _____

DATE 11-1-94
12-30-94

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER AMALIA RIGGS c/o SECURITY DEVELOPMENT CORP.

ADDRESS P.O. Box 417, ELLICOTT CITY, MD 21041 PHONE (410) 465-4244

AGENT OR PROSPECTIVE BUYER COOKSVILLE Limited Partnership

ADDRESS P.O. Box 417, ELLICOTT CITY, MD 21041 PHONE (410) 465-4244

PROPERTY LOCATION:

SUBDIVISION RIGGS PROPERTY LOT NO. 5

ROAD AND DESCRIPTION ROXBURY MILLS ROAD (RTE. 97) 1/2 MD. RTE 144

TAX MAP 8 & 14 PARCEL # 26

SIZE OF LOT 1 AC. ± TYPE BLDG. SINGLE FAMILY
(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.

(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

COUNTY #

SOIL PROFILE

0' 613
yellow
tan
C

4' pink
SL
25%
rock
continuous
to

11'

616
red brn.
C

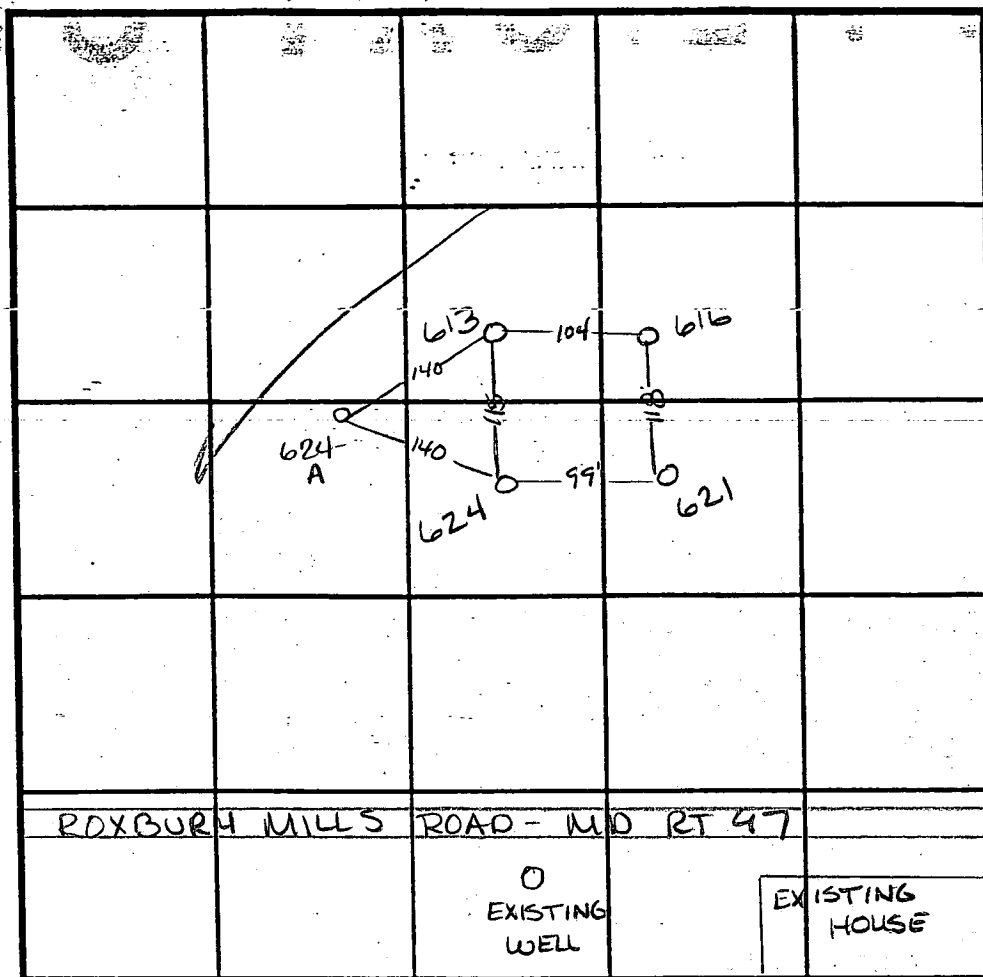
4.5' orange
red
sil
20%
rock

11'

624
orange
brn
C

3' pink SL
5% stones
yellow
mottle-
like splashes
from
parent
rock

12'



SOIL PROFILE

0' 621
tan
yellow
C

3.5' 1st brn
w
grey
spots
from
50% 2"
dia
rocks
(grey)

11'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
1-5-95	613	2.5' VII'	5:50	7:30 min	—	—	slow
	613	5.5' VII'	5:50 ³⁰	5:52	5:52	5:55 ³⁰	3 1/2 min
	616	5' VII'	5:57	5:58	5:58	6:00	2 min
	624	4' XII'	5:35 ¹⁵	5:36	5:36	5:38	2 min
	621	4' XII'	5:39	5:41	5:41	5:44	3 min
11-29-95	624-A	Evidence of H ₂ O at	10'	—	—	—	WET SEAS

REMARKS

TYPE OF SOIL

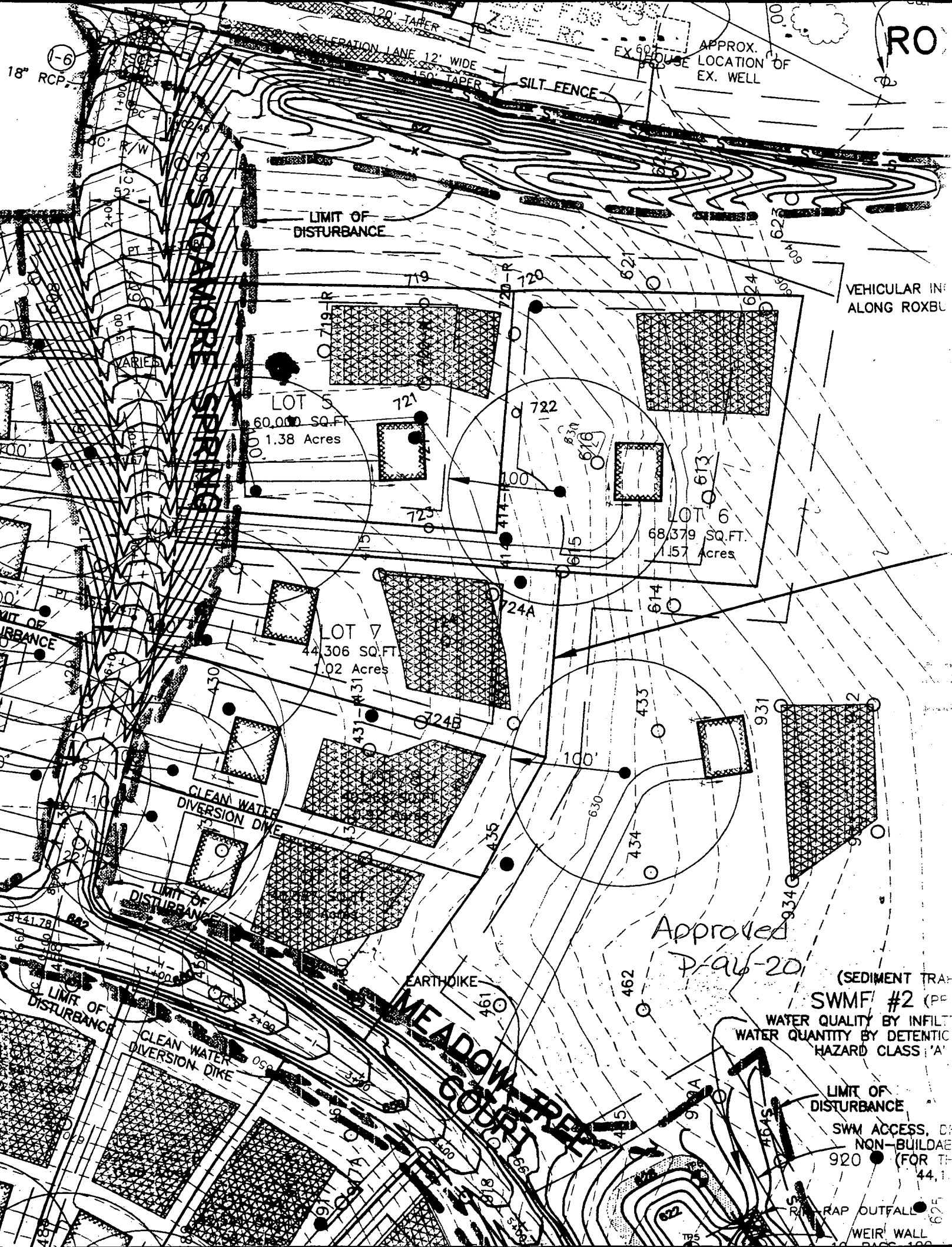
TESTED BY Amy McMullen

ALSO PRESENT Clark Sperry

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

TRENCH WIDTH

RO



Approved
7-96-20

(SEDIMENT TRA-
SWMF #2 (PE
WATER QUALITY BY INFILT
WATER QUANTITY BY DETENTIC
HAZARD CLASS 'A'

LIMIT OF
DISTURBANCE
SWM ACCESS, OF
NON-BUILDAE
920 (FOR TH
44.1

RAIR RAP OUTFALL
WEIR WALL

C1 1312

SEQUENCE NO.
(DENY USE ONLY)STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPETHIS REPORT MUST BE SUBMITTED WITHIN
45 DAYS AFTER WELL IS COMPLETED.COUNTY
NUMBER 50368 LST/CO USE ONLY
DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO.
FROM "PERMIT TO DRILL WELL"

1	2	3	4	5	6
8					13

121696

22 245 26
(TO NEAREST FOOT)

40-94-1001

OWNER

STREET OR RFD

first name

TOWN

LOT

SUBDIVISION

SECTION

WELL LOG

Not required for driven wells

STATE THE KIND OF FORMATIONS
PENETRATED, THEIR COLOR, DEPTH,
THICKNESS AND IF WATER BEARINGDESCRIPTION (Use
additional sheets if needed)

FEET

FROM TO

Check
if water
bearingSand
Gray mica
rock

0 35

35 245 ✓

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL

CEMENT ☒ CMBENTONITE CLAY ☐ BC

NO. OF BAGS 15

NO. OF POUNDS 1470

GALLONS OF WATER 90

DEPTH OF GROUT SEAL: (to nearest foot)

from 0 ft. to 36 ft.
48 TOP 52 54 BOTTOM 58
(enter 0 if from surface)

CASING RECORD

casing
types
insert
appropriate
code
below☒ ST ☐ CO
STEEL CONCRETE
☐ PL ☐ OT
PLASTIC OTHERMAIN
CASING
TYPENominal diameter
top (main) casing
(nearest inch)Total depth
of main casing
(nearest foot)☒ ST

6

40

E
A
C
H
C
A
S
I
N
G

OTHER CASING (if used)

diameter depth (feet)
inch from to

screen type
or open hole
insert
appropriate
code
below

SCREEN RECORD

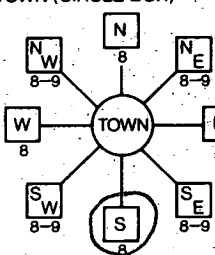
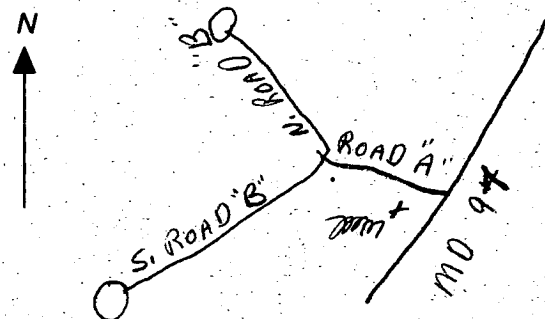
☒ ST ☐ BR ☐ HO
STEEL BRASS OPEN
HOLE
☐ PL ☐ OT
PLASTIC OTHER

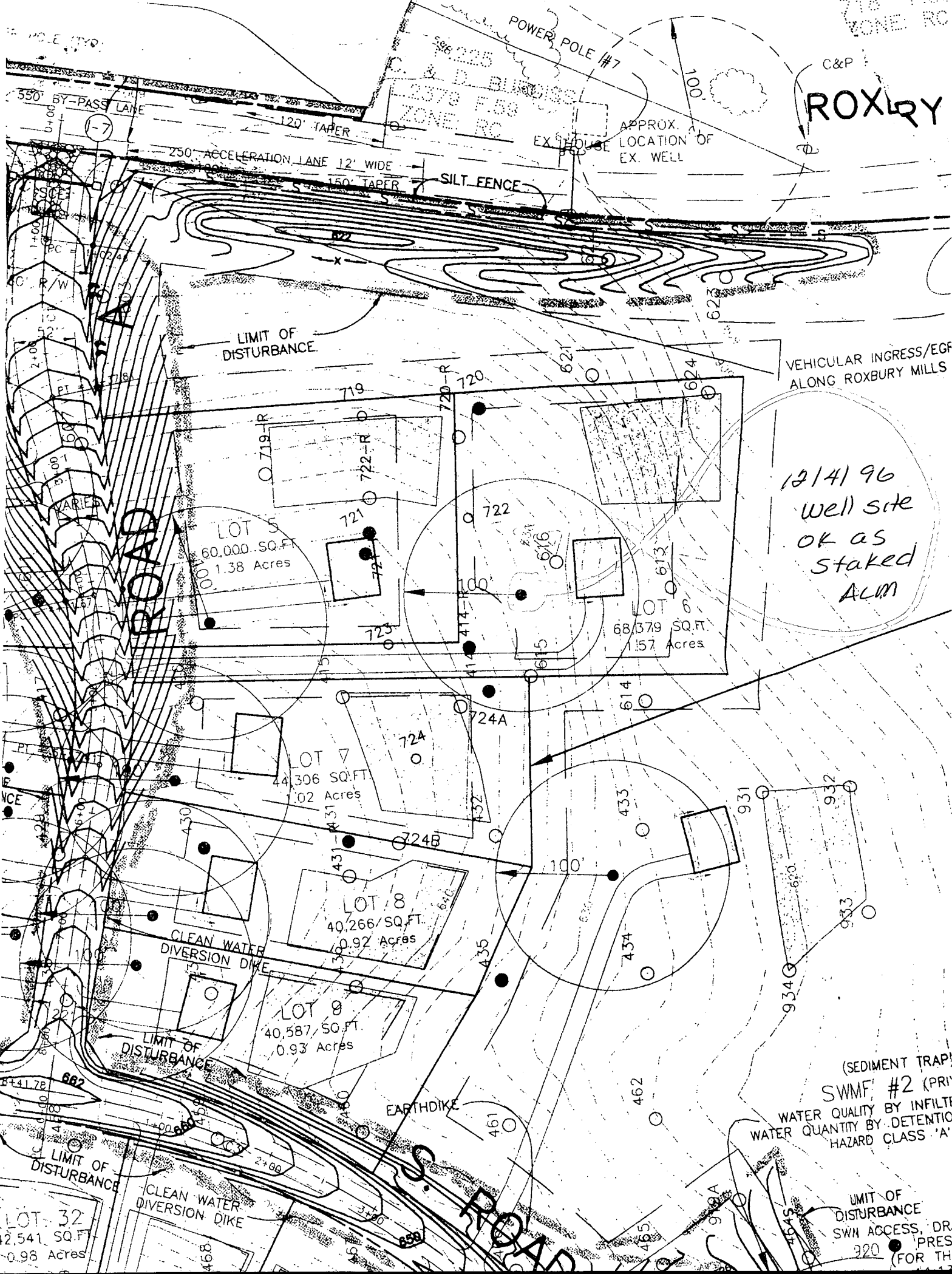
C2

1 2

DEPTH (nearest ft.)

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21
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	77	78	79	80	81	82	83	84	85
86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	101	102	103	104	105	106
107	108	109	110	111	112	113	114	115	116	117	118	119	120	121	122	123	124	125	126	127
128	129	130	131	132	133	134	135	136	137	138	139	140	141	142	143	144	145	146	147	148
149	150	151	152	153	154	155	156	157	158	159	160	161	162	163	164	165	166	167	168	169
170	171	172	173	174	175	176	177	178	179	180	181	182	183	184	185	186	187	188	189	190
191	192	193	194	195	196	197	198	199	200	201	202	203	204	205	206	207	208	209	210	211
212	213	214	215	216	217	218	219	220	221	222	223	224	225	226	227	228	229	230	231	232
233	234	235	236	237	238	239	240	241	242	243	244	245	246	247	248	249	250	251	252	253
254	255	256	257	258	259	260	261	262	263	264	265	266	267	268	269	270	271	272	273	274
275	276	277	278	279	280	281	282	283	284	285	286	287	288	289	290	291	292	293	294	295
296	297	298	299	300	301	302	303	304	305	306	307	308	309	310	311	312	313	314	315	316
317	318	319	320	321	322	323	324	325	326	327	328	329	330	331	332	333	334	335	336	337
338	339	340	341	342	343	344	345	346	347	348	349	350	351	352	353	354	355	356	357	358
359	360	361	362	363	364	365	366	367	368	369	370	371	372	373	374	375	376	377	378	379
380	381	382	383	384	385	386	387	388	389	390	391	392	393	394	395	396	397	398	399	400
401	402	403	404	405	406	407	408	409	410	411	412	413	414	415	416	417	418	419	420	421
422	423	424	425	426	427	428	429	430	431	432	433	434	435	436	437	438	439	440	441	442
443	444	445	446	447	448	449	450	451	452	453	454	455	456	457	458	459	460	461	462	463
464	465	466	467	468	469	470	471	472	473	474	475	476	477	478	479	480	481	482	483	484
485	486	487	488	489	490	491	492	493	494	495	496	497	498	499	500	501	502	503	504	505
506	507	508	509	510	511	512	513	514	515	516	517	518	519	520	521	522	523	524	525	526
527	528	529	530	531	532	533	534	535	536	537	538	539	540	541	542	543	544	545	546	547
548	549	550	551	552	553	554	555	556	557	558	559	560	561	562	563	564	565	566	567	568
569	570	571	572	573	574	575	576	577	578	579	580	581	582	583	584	585	586	587	588	589
590	591	592	593	594	595	596	597	598	599	600	601	602	603	604	605	606	607	608	609	610
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653	654	655	656	657	658	659	660	661	662	663	664	665	666	667	668	669	670	671	672	673
674	675	676	677	678	679	680	681	682	683	684	685	686	687	688	689	690	691	692	693	694
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758	759	760	761	762	763	764	765	766	767	768	769	770	771	772	773	774	775	776	777	778
779	780	781	782	783	784	785	786	787	788	789	790	791	792	793	794	795	796	797	798	799
800	801	802	803	804	805	806	807	808	809	810	811	812	813	814	815	816	817	818	819	820

B 1 7480 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER 10-94-11001 fill in this form completely
OWNER INFORMATION Date Received (APA) 1/1/96 SUC 15 Last Name Owner First Name BOX 417 Street or RFD EL L C O T A C I T Y M O D 2 1 0 4 1 Town 70 State 72 Zip 76		B 3 LOCATION OF WELL HOWARD 8 COUNTY RIGGS PROPERTY 23 SUBDIVISION SECTION 44 46 LOT 6 48 50 COOKSVILLE 52 NEAREST TOWN MILES FROM TOWN (enter 0 if in town) 1 M I 73 76 77 78	
DRILLER INFORMATION Joseph L. Mayne Driller's Name Joseph L. Mayne Well Drilling Firm Name 5512 Ridge Rd. Mt. Airy Md. 21771 Address Joseph L. Mayne 11/18/96 Signature Date CIRCLE: MSD/MGD/MWD 24 77 License No. 80		B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  NEAR WHAT ROAD Road A Sycamore Spring ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 34 280 37 DISTANCE FROM ROAD ENTER FT OR MI F T 38 39 TAX MAP: 14 BLK: PARCEL 96	
B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 5 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500 14 20 USE FOR WATER (CIRCLE APPROPRIATE BOX) ☒ HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) ☐ FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) ☐ INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) ☐ PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) ☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL Howard Co. 50368L COUNTY NAME COUNTY NO. STATE SIGNATURE DATE ISSUED 120496 Amy M. Miller 12/4/97 43 NORTH GRID 540000 48 CO SIGNATURE 0780000 55 EAST GRID 57 83 EXP. DATE	
APPROXIMATE DEPTH OF WELL 280 FEET 24 28 APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST INCH		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 790 N 530 504 000 000 DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION  Cooksville	
METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jetted & DRIVEN 30 AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary) 37 CABLE REVerse-ROTary DRIVE-POINT other		REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) ☒ THIS WELL WILL NOT REPLACE AN EXISTING WELL ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS ☐ THIS WELL WILL DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROX. PERMIT NUMBER 969 GAP 015 54 63 FORCE AM WRITE INITIALS IN BOX PERMIT No. 10-94-11001 67 68 70 71 72 73 74 75 76 77 78 79	
SPECIAL CONDITIONS NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -			



ROXBURY

VEHICULAR INGRESS/EGRESS
ALONG ROXBURY MILLS

12/4/96
Well site
OK as
staked
ALM

(SEDIMENT TRAP)
SWMF #2 (PRI)
WATER QUALITY BY INFILT
WATER QUANTITY BY DETENTIO
HAZARD CLASS 'A'

UNIT OF
DISTURBANCE
SW ACCESS, DR
PRES
920 (FOR TH