PERMIT

SEWAGE DISPOSAL SYSTEM

	 _	

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

360419

BUREAU OF ENVIRONMENTAL HEALTH XXCOXCOXX 410-313-2640

HOWARD COUNTY HEALTH DEPARTMENT

DATE SYSTEM APPROVED

DISTRICT

ADDRESS 5305 King's Court, Frederi	ck, Maryland	21703-6981	PHONE	301-831-4070
SUBDIVISION Riggs Property	LOT24	ROA	o 1933 Sycamor	e Spring Court
PROPERTY OWNER	Ryan Homes			
ADDRESS				
SEPTIC TANK CAPACITY 1250 GALLONS		• .	;	
NUMBER OF BEDROOMS 4				
180 SQUARE FEET PER BEDROOM	, <i>.</i>			
INEAR FEET OF TRENCH REQUIRED 240	<u> </u>			•
RENCHES - Trench to be 3 feet wide -5 feet below original gr 2 feet of stone below di	ade. Effecti stribution pi	ve area begir pe.	s at 3 feet be	low original grade.
OCATION - Begin the first trench l line as seen when facing contour towards the left	58 feet down the lot from side of the	the left lot Sycamore Spr lot.	line and 70 fe ing Court. Ru	et off that same lo n trenches on
OTES - No trench to exceed 100 to grade or above on sep	tic tank	h. Provide 6	<u>" - 8" diamete</u>	r cleanout and cap
ANS APROVED BY K. Maiste/Amy McMil	1	`	DEUTCED	DATE 10-07-98

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 SEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

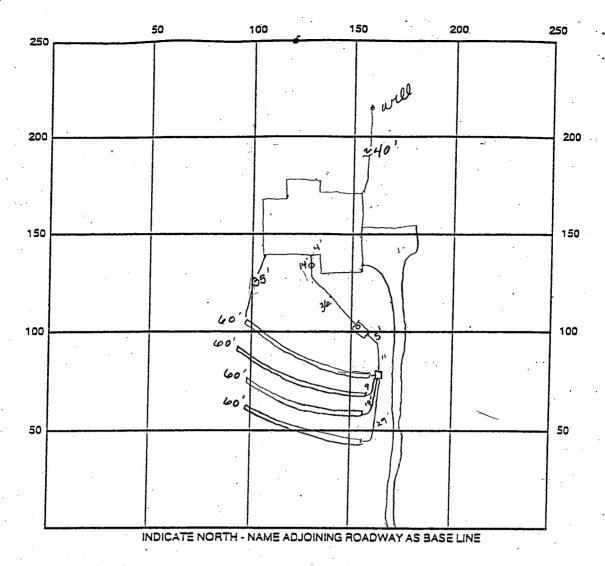
NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH

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

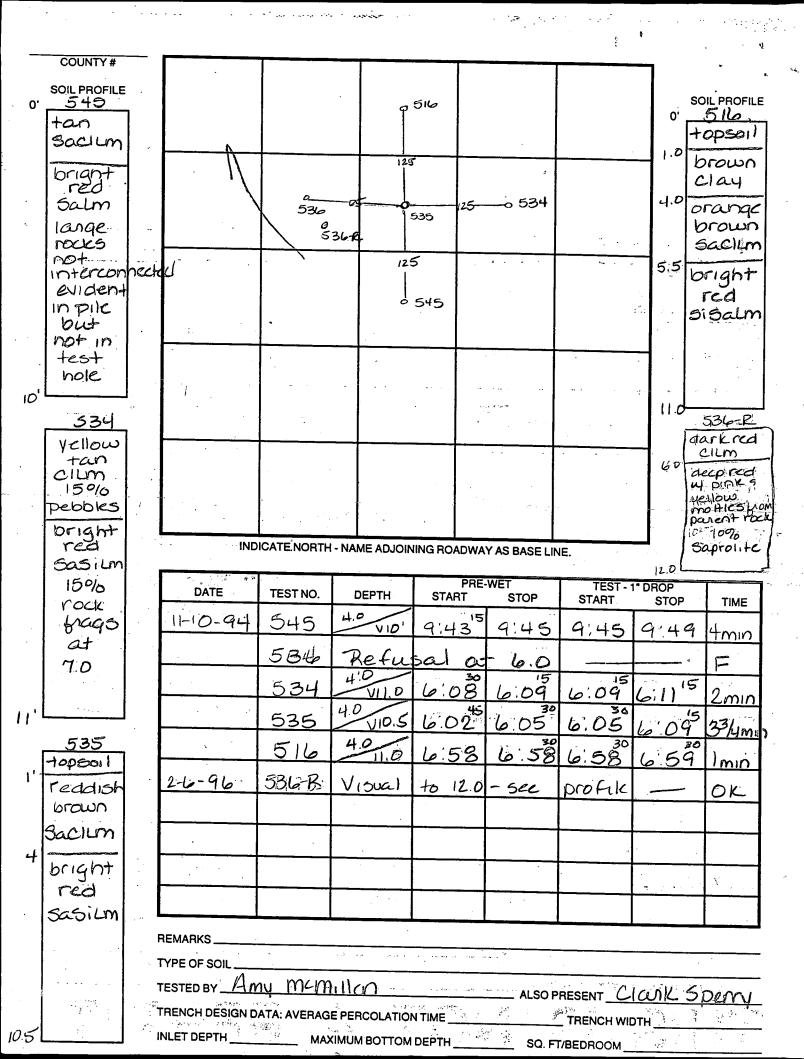


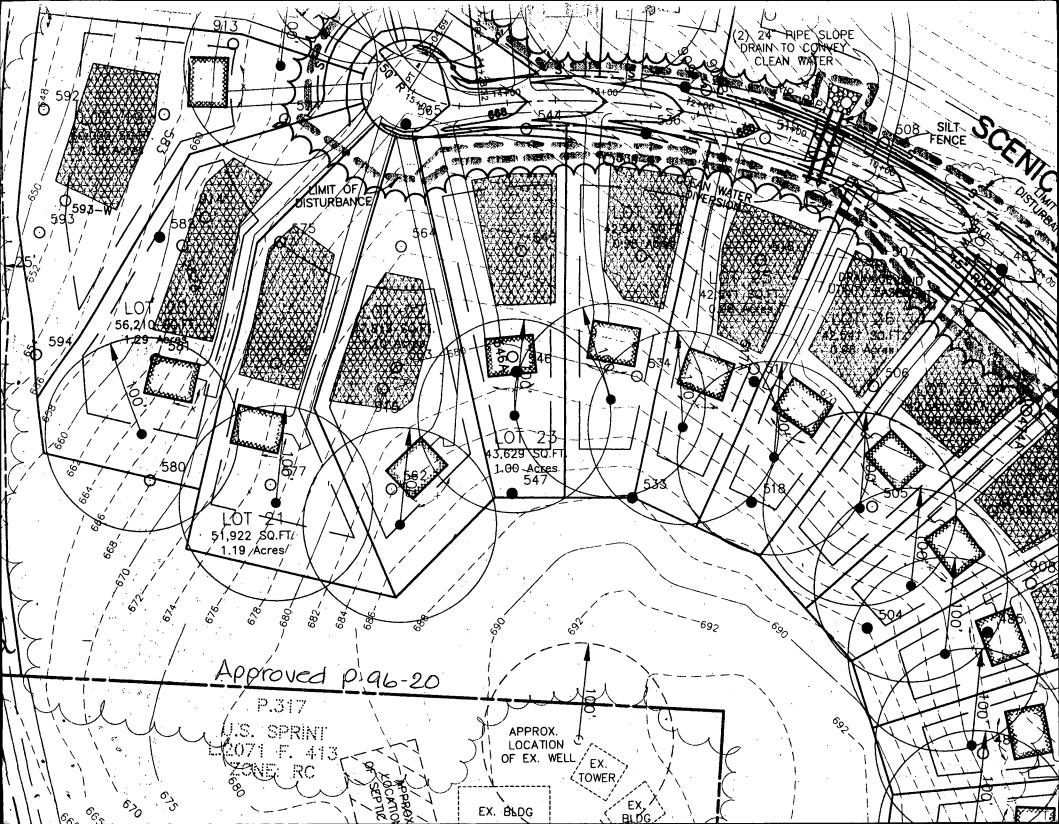
SEPTIC TANK LEVEL OK 1250 gal CLEANOUTS one @ house of one on tank
DISTRIBUTION BOX LEVEL OK baffe 15 10
DRAIN FIELD/THREEDEPTH 5.0 FT. TRENCH WIDTH 30 FT. INLET DEPTH 3.0 FT.
EFFECTIVE GRAVEL DEPTH 2.0 FT. TOTAL LENGTH 240 FT.
NUMBER OF TRENCHES ONE SIDEWALL/BOTTOM AREA SQ. FT.
DRYWALL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.
ABSORBENT AREASQ. FT. REMARKS: 2/8/99 OK to COUES ALL WOSK. Anal ALL
DATE SYSTEM APPROVED 2/8/99 INSPECTOR Smy MCMCOL

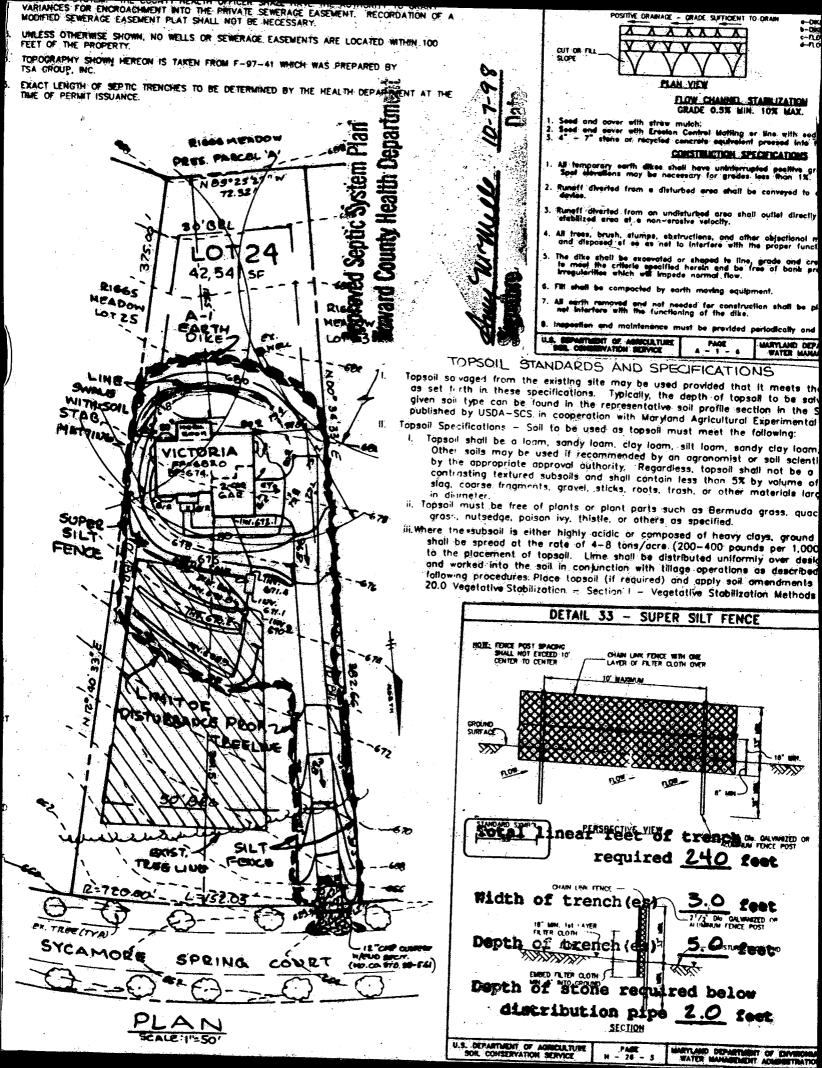
APPLICATION

PERCOLATION TESTING DISTRICT BUREAU OF ENVIRONMENTAL HEALTH THE COUNTY HEALTH OFFICER ELLICOTT CITY, MARYLAND PROSPECTIVE BUYE ADDRESS . ROPERTY LOCATION: NO RETURNED 10-7-90 REASONS FOR REJECTION OR HOLDING

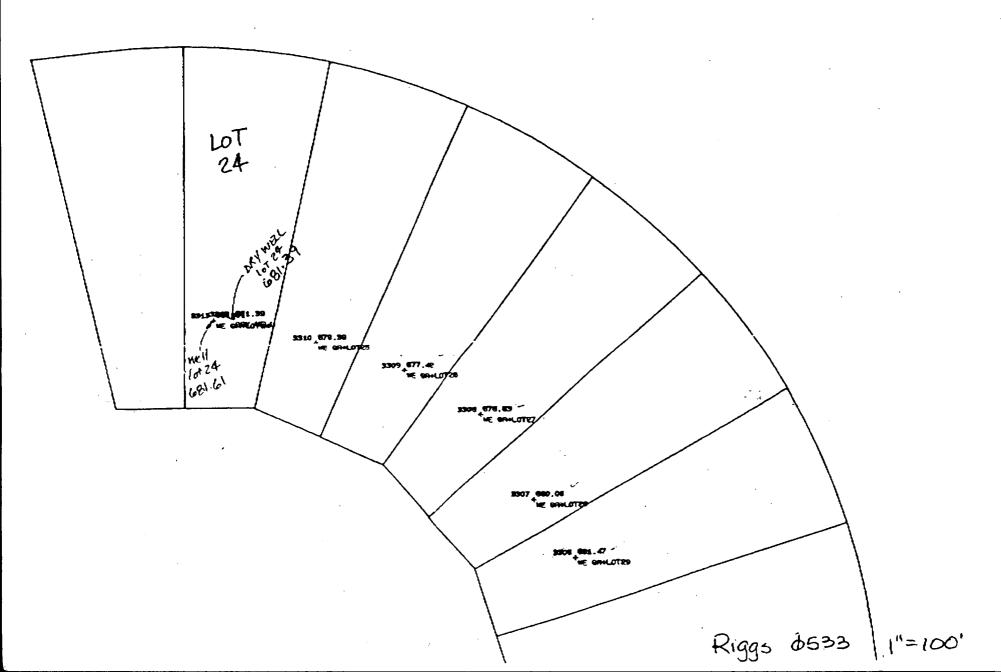
THIS IS NOT A PERMIT







C 1 SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
1 2 3 6 (THIS NUMBER IS TO BE PUNCHED	FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE	COUNTY A50368
IN COLS. 3-6 ON ALL CARDS) ST/CO USE ONLY DATE Received DATE WELL COMPL	ETED Depth of Well	PERMIT NO. FROM "PERMIT TO DRILL WELL"
MM DD YY	22 360 26 (TO NEAREST FOOT)	#0 - 94 - 1/50 28 29 30 31 32 33 34 35 36 37
8 13 15 S/)(0	20 (TO NEAREST FOOT)	28 29 30 31 32 33 34 35 36 37
STREET OR RFD	DRIVE first name TOWN	Cooksville
	perty section	LOT <u>24</u>
WELL LOG Not required for driven wells	GROUTING RECORD WELL HAS BEEN GROUTED WELL HAS BEEN GROUTED	
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING	TYPE OF GROWTING MATERIAL (Circle one)	PUMPING TEST HOURS PUMPED (nearest hour)
DESCRIPTION (Use additional sheets if needed) FROM TO bearing	CEMENT C M BENTONITE CLAY B C	8 9
	NO. OF BAGS 46 9 NO. OF POUNDS 48 496 ALLONS OF WATER 54	PUMPING RATE (gal. per min.)
Brown Shale 0 25 Gray Mica 25 360 v Rock	DEPTH OF GROUT SEAL (to nearest foot)	METHOD USED TO MEASURE PUMPING RATE Bucket
0 5 360 4	from ft. to ft. to ft. to ft. to ft. ft. ft. ft. from surface)	WATER LEVEL (distance from land surface)
Cray Mica	casing CASING RECORD	BEFORE PUMPING $\frac{58}{17}$ ft.
Rock	types insert appropriate STEEL CONCRETE	WHEN PUMPINGft.
	appropriate code below PL OT	TYPE OF PUMP USED (for test)
	PLASTIC OTHER	A air: P piston T turbine
	MAIN Nominal diameter Total depth CASING top (main) casing of main casing TYPE (nearest inch)! (nearest foot)	C centrifugal R rotary (describe
	TYPE (nearest inch)! (nearest foot) 5+ 6 29	centrifugal R rotary (describe below)
	60 61 63 64 66 70	J jet (S)submersible
	E OTHER CASING (if used) A diameter depth (feet) C inch from to	27 27
		PUMP INSTALLED DRILLER WILL INSTALL PUMP YES (NO)
1 Ory well 400'	S 	(CIRCLE) (YES or NO) IF DRILLER INSTALLS PUMP, THIS SECTION
Sieled in with	screen type SCREEN RECORD	MUST BE COMPLETED FOR ALL WELLS. TYPE OF PUMP INSTALLED
1 - 1	or open hole ST BR HO	PLACE (A,C,J,P,R,S,T,O) 29 IN BOX 29.
materials.	insert STEEL BRASS OPEN Appropriate BRONZE HOLE	CAPACITY: GALLONS PER MINUTE
malerals-	below PLASTIC OTHER	(to nearest gallon) 31 35 PUMP HORSE POWER
	C 2 DEPTH (nearest ft.)	PUMP COLUMN LENGTH
NUMBER OF UNSUCCESSFUL WELLS:	HO 27 360	(nearest ft.) 43 47
WELL HYDROFRACTURED Yes N	A 8 9 11 15 17 21	ASING HEIGHT (circle appropriate box and enter casing height)
CIRCLE APPROPRIATE LETTER	C 2	49 LAND SURFACE
A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED	S C 3	below (nearest).
E ELECTRIC LOG OBTAINED TEST WELL CONVERTED TO PRODUCTION	R 38 39 41 45 47 51 E	49 50 51 A LOCATION OF WELL ON LOT
WELL I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION" AND	E SLOT SIZE 1 2 3 N DIAMETER (NEAREST	SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND /OR
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	OF SCREEN INCH)	LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES
KNOWLEDGE.	from to	(MEASUREMENTS TO WELL)
DRILLERS LIC. NO. 1 M S D Q & 4 1	GRAVEL PACK	att 10
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)	INSERT F IN BOX 68 68 MDE USE ONLY	see unacrea
LIC. NO. 1 M D 1	(NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q	See attacked weel locations.
	, , , , , , , , , , , , , , , , , , ,	:
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)	TELESCOPE LOG 74 75 76	• • • • • • • • • • • • • • • • • • •
	CASING INDICATOR OTHER DATA COUNTY	₩



OSCUENCE NO	OTATE OF	MADY AND	STATE PERMIT NUMBER
B 1 7460 SEQUENCE NO. (MDE USE ONLY)	STATE OF I	MARYLAND DRILL WELL	WA-11/50
1 2 3 3 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-8 ON ALL CARDS)		int or type	70 fill in this form completely 79
Date Received (APA)		B 3	LOCATION OF WELL
ONER INFORMATION	I	HOWARD	
SAC	34	8 COUNTY BICAC P	TRIOPERTUIT
15 East Name Owner First Nam	ne 34	23 SUBDIVISION	
Street or RFD Street or RFD	55	SECTION 44 46	LOT 48 50
57 Town 70 State 7		COOKSVI 52 NEAREST TOWN	<u> </u>
DRILLER INFORMATION CIRCLI	E/MSD/MGD/MWD	MILES FROM TOWN (enter	er 0 if in town) 73 76 77 78
Driller shame for the Marie Well	Dillin 5	B 4	Scenie Dr.
Firm Name SS12 Ridge Rd Mt. C	Tim 2/1/	DIRECTION OF WELL FROM TOWN (CIRCLE BOX)	11 NEAR WHAT ROAD 30
Address Sough & Maine	3/31/97	NW 8 NE	ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) W 22 E
Signature B 2 WELL INFORMATION	Date	8-9	(CIRCLE APPROPRIATE BOX) WEST STEAST 34 2 70 37 SOUTH
APPROX. PUMPING RATE (GAL. PER MIN.)		TOWN E	DISTANCE FROM ROAD
AVERAGE DAILY QUANTITY NEEDED 6	12	SW S 8-9	ENTER FT OR MI \[\frac{F T}{38 39} \]
(GAL PER DAY)	20	-	TAX MAP: BLK: PARCEL
USE FOR WATER (CIRCLE APPROPRIAT			NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
D HOME (SINGLE OR DOUBLE HOUSEHOLD UP F FARMING (LIVESTOCK WATERING & AGRICUL		Howard Co	A 50368
INDUSTRIAL, COMMERCIAL, STATE AND FEDE		COUNTY NAME STATE SIGNATURE	COUNTY NO.
22 OTHER (REQUIRES APPROPRIATION PERMIT PUBLIC OR PRIVATE WATER COMPANY (REQ	UIRES	DATE ISSUED	AMM 1000 5/15/98
P APPROPRIATION PERMIT AND STATE HEALTH APPROVAL)		NOOTH -EAC -	O SIGNATURE EXP. DATE
TEST, OBSERVATION, MONITORING (MAY REC APPROPRIATION PERMIT)	JUIRE	GRID 50	55 57 63
APPROXIMATE DEPTH OF WELL	FEET	SHOW MAJOR FEATURE BOX & LOCATE WELL	ES OF 6-6-96-9:30
24 28		WITH AN X SOURCES OF DRILLING	WATER (0-6-97 no insplan)
APPROXIMATE DIAMETER OF WELL	NEAREST INCH	1. Wehh	
METHOD OF DRILLING (circle on		3.	
BORED (or Augered) 30 AIR-ROTary AIR-PERcussion ROTAR	Jetted & <u>DRIVEN</u> Y (Hydraulic Rotary)	WRITE THE BOX NUMB FROM THE MAP HERE	ÆR ¹
CABLE REVerse_ROTary	DRive-POINT	<u> </u>	
other		E 799	
REPLACEMENT OR DEEPENED WE (CIRCLE APPROPRIATE BOX)	ELLS	N 5 5 0	OWN SHOWING LOCATION OF WELL IN
N THIS WELL WILL NOT REPLACE AN EXISTING V	WELL	RELATION TO NEARBY	IW SHOWING LOCATION OF WELL IN TOWNS AND ROADS AND GIVE TO NEAREST ROAD JUNCTION
THIS WELL WILL REPLACE A WELL THAT WILL ABANDONED AND SEALED	•	N. N.	Cooksville
39 S THIS WELL WILL REPLACE A WELL THAT WILL A STANDBY CONTACT LOCAL APPROVING AU POLICY ON STANDBY WELLS	BE USED AS THORITY FOR		Scenica
THIS WELL WILL DEEPEN AN EXISTING WELL			werl Ke.
PERMIT NUMBER OF WELL TO BE REPLACED OR DI (IF AVAILABLE) 41 41	EEPENED 52		
Not to be filled in by driller (MDE OR COUNTY	/ USE ONLY)		XISycam /
APPROP. PERMIT NUMBER GAF	2		SPRING 2
FORCE A MINITALS PERMIT No. HO - 94	<u>√</u> -1/150		endouties / s
67 68 70 71 72 73 74 SPECIAL CONDITIONS NOTE = APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED =	75 76 77 78 79		ob /

