

9/30/99 1:30 PM

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

INDEXED

P 512696

A 50388-P

DISTRICT _____

DATE 9/3/1999

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXXX~~ 410-313-2640

DATE SYSTEM APPROVED 9/30/99

INSPECTOR H. R. H. Kin

#360745

K & K Excavating IS PERMITTED TO INSTALL ☒ ALTER ☐

ADDRESS 14960 Frederick Road, Woodbine, MD 21797 PHONE 410-442-1336

SUBDIVISION Ridge View Hunt LOT 6 ROAD 15275 Ridge Hunt Drive

PROPERTY OWNER Selfridge Builders JEFF VAN BLARCOM

ADDRESS _____

SEPTIC TANK CAPACITY 1500 GALLONS

NUMBER OF BEDROOMS 5

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 350

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 5.0 feet below original grade. 2.0 feet of stone below distribution pipe.

LOCATION - Place the distribution box 50 feet off the left (381.74') lot line and 70 feet off the rear (223.87') lot line as seen from Ridge Hunt Drive. Run trenches along contour in both directions.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 7/29/99 DS

PLANS APPROVED BY Donna K. Soe DATE 7-12-1999

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

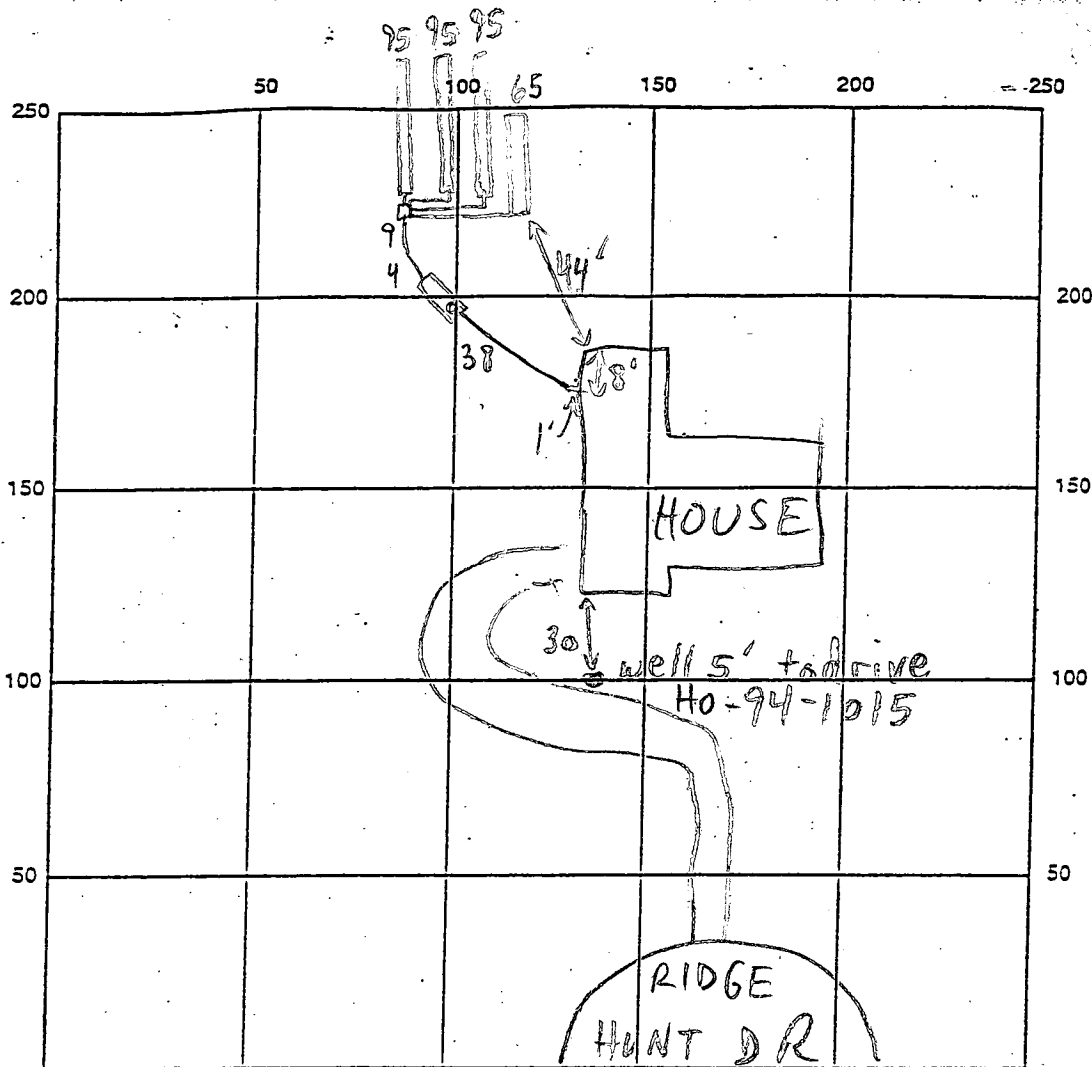
*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

NO. DO. PERMIT 3000131226
NO RETURN 6/28/01

deck
11-1604 BOU 150 991-DECK

50388-7



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1500 GAL CLEANOUTS 8" @ S.T.

DISTRIBUTION BOX LEVEL OK BAFLE IN

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

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 350 FT.

NUMBER OF TRENCHES 4 ONE SIDEWALL/BOTTOM AREA 1050 SQ. FT.

DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA — SQ. FT.

REMARKS: 9/30/99 OK TO COVER ALL (MRA)

DATE SYSTEM APPROVED

9/30/99

INSPECTOR

M. R. R. R.



HOWARD COUNTY HEALTH DEPARTMENT

Diane L. Matuszak, M.D., M.P.H., County Health Officer

October 1, 1999

Selfridge Builders
14045 Gared Drive
Glenwood, MD 21738

RE: Ridge View Hunt, Lot 6
15275 Ridge Hunt Drive
Well Permit HO-94-1015

Dear Mr. Selfridge:

On September 30, 1999, during the septic system inspection for the referenced property, the driveway was observed to be located five feet from the existing well. This driveway layout is not consistent with the approved building permit site plan.

The minimum required separation distance of 15 feet should be provided between the driveway and the well. In the event such an adjustment is not possible, some form of wellhead protection should be provided. This can include concrete bollards, railroad ties stacked high enough to block a car's bumper, or other such measures suitably placed to prevent vehicular damage to the well.

When appropriate remediation measures have been completed, please call this office at (410) 313-2640 to request a re-inspection. No Certificate of Potability will be issued for this lot until this issue is resolved.

If you have any questions, please call me at (410) 313-2640.

12/1/99 BOLLARD INSTALLATION
CONFIRMED BY TIM RAGEN
OR (MR)

Very truly yours,

Mark E. Rifkin
Mark E. Rifkin

Water and Sewerage Program

MR

cc: File

Bureau of Environmental Health

3525-H Ellicott Mills Drive Ellicott City, Maryland 21043-4544

Water and Sewage Program Community Environmental Health Program Food Protection Program
Phone: 410-313-2640 FAX: 410-313-2648 TTD: 410-313-2323 TOLL FREE: 1-877-4MD-DHMH

APPLICATION

PERCOLATION TESTING

A 50388 P

P _____

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043

TELEPHONE: 313-2640

DISTRICT _____

DATE 11/10/94

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 Richard Hoenes SELFridge Builders

ADDRESS 8668 Baltimore National Pike
Ellicott City, Maryland 21043 PHONE (410) 465-2321

AGENT OR PROSPECTIVE BUYER Same

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION White Property LOT NO. 16 1517 7/8

ROAD AND DESCRIPTION 15275 Ridge Hunt Drive
South side 15000 block of Carrs Mill Road; 1 mile +/- west
of Roxbury Mills Road intersection.

TAX MAP 14 PARCEL # 14

SIZE OF LOT 60,000 SF TYPE BLDG. Single Family - 5 Bmn
(SINGLE FAMILY DWELLING OR COMMERCIAL)

NO. PERMIT SIGNED

AND RETURNED 7-12-99

Serial # B7119099

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.

Richard Hoenes
(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

A50388P

COUNTY #

SOIL PROFILE

1166 1169

beigh
C

reddish
brn
SCL

yellow
brn
SIL
good
structure
some
decayed
white
stone
throughout

1168 1167

orange
yellow
CL

red
SIL

tan
yellow
SIL
50%
shale/
saprolite

1165

yellow
brown
CL

orange
yellow
SIL
50%
shale

SOIL PROFILE

1167

red
brn
CSIL

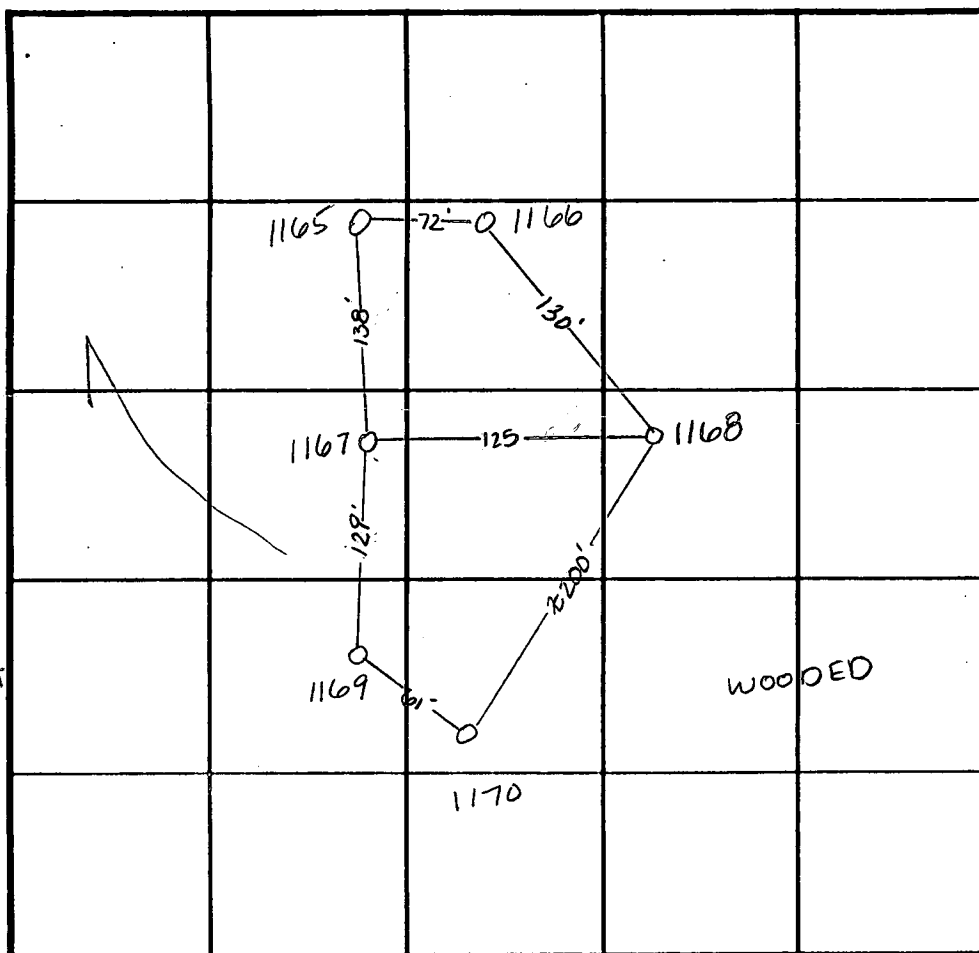
beigh
SIL

w/
white
SIL
pockets
throughout
(decayed
quartz grains
still
evident)

1170

redbrn
CSIL

pink
SIL
very
powdery
angular
structure



INDICATE NORTH NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
12-16-94	1166	5.5' V12	7:03 ³⁰	7:14	7:14	7:38	24min
	1168	3.5' V11.5	8:40	8:41 ¹⁵	8:41 ¹⁵	8:44	23 3/4 min
	1169	5.5' V11	9:13 ⁴⁵	9:30	9:30	9:57	27min
	1165	4.5' V12'	5:55	5:57 ¹⁵	5:57 ¹⁵	6:02 ³⁰	5 1/4 min
	1167	5.5' V12'	6:30 ³⁰	6:32 ¹⁵	6:32 ¹⁵	6:37	4 3/4 min
	1170	4.5' V12'	9:04 ⁴⁵	> 30 min			slow
	1170	6' V12'	9:27 ¹⁵	9:30 ³⁰	9:30 ³⁰	9:36 ⁴⁵	6 1/4 min

REMARKS

TYPE OF SOIL

TESTED BY Amy McMillen

ALSO PRESENT

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

TRENCH WIDTH

INLET DEPTH

MAXIMUM BOTTOM DEPTH

SQ. FT./BEDROOM

C1

6518

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.

ST/CO USE ONLY
DATE Received
03 06 98

DATE WELL COMPLETED
02 11 97

Depth of Well
22 200 26
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
HO-94-1015

OWNER RH Development

STREET OR RFD Glen View DR first name TOWN Glenwood

SUBDIVISION Glen View SECTION LOT A 6

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	
top soil	0	2	
shale	2	45	-
Brown mica	45	50	
shale	50	62	
Brown mica	62	95	-
granite	95	104	
Brown mica	104	105	-
granite	105	200	

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 23 NO. OF POUNDS 2300

GALLONS OF WATER 115

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 40 ft.

48 TOP 52 54 BOTTOM 58

(enter 0 if from surface)

CASING RECORD

casing
types
insert
appropriate
code
below

ST STEEL CO CONCRETE

PL PLASTIC OT OTHER

MAIN CASING TYPE ST

Nominal diameter top (main) casing (nearest inch) 6

Total depth of main casing (nearest foot) 73

60 61 63 64 66 70

OTHER CASING (if used)

diameter inch depth (feet) from to

EACH CASING

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.) 15

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 51 20 ft.

WHEN PUMPING 195 51 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: 0

WELL HYDROFRACTURED

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. MW BD 040

DRILLERS SIGNATURE George F. Easterday

LIC. NO. MW DD 481

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

C2

DEPTH (nearest ft.)

HO 71 200

8 9 11 15 17 21

23 24 26 30 32 36

38 39 41 45 47 51

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

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)

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

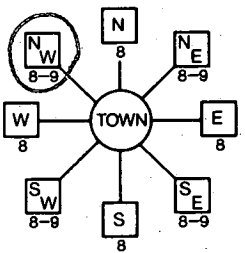
2 (nearest foot)

49 50 51

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)

15 20 150

B 1	6290	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER <u>HO-94-1015</u> <small>fill in this form completely</small>
Date Received (APA) <u>11/27/96</u> <small>1 2 3 4 5 6</small> <small>(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)</small>		OWNER INFORMATION RN 6942 Howard 8 COUNTY 21 Glen View Ridge View Hunt 23 SUBDIVISION 42 SECTION <u>44</u> <u>46</u> LOT <u>7</u> <u>4</u> Glenwood 52 NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) <u>1</u> M <u>1</u> I 73 76 77 78		
15 Last Name R. H. Development L L C 36 Street or RFD 8668 Baltimore National Pike 57 Town Ellicott City, Md. 21043 70 State MD 72 Zip 21043 76		DRILLER INFORMATION George F. Easterday M VD 040 Driller's Name 76 License No. 81 L. Franklin Easterday, Inc. Firm Name 9265 Brown Church Rd., MT. Airy, Md. 21771 Address <u>George F. Easterday</u> 11/26/96 Signature Date		
B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) <u>5</u> 8 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <u>500</u> 14 20		B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 11 NEAR WHAT ROAD <u>Glen View Dr</u> 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 34 <u>175</u> 37 DISTANCE FROM ROAD ENTER FT OR MI <u>38</u> <u>39</u> Ft. TAX MAP: _____ BLK: _____ PARCEL: _____		
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="checkbox"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE APPROVAL) <input type="checkbox"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL <u>Howard County</u> <u>A50388P</u> COUNTY NAME COUNTY NO. STATE SIGNATURE _____ INSERT S _____ 41 DATE ISSUED <u>12/20/96</u> <u>A McMillen</u> <u>12/20/97</u> 43 MM DD YY 48 CO SIGNATURE EXP. DATE NORTH GRID <u>536</u> <u>000</u> EAST GRID <u>788</u> <u>000</u> 50 55 57 63		
APPROXIMATE DEPTH OF WELL <u>300</u> FEET 24 28 APPROXIMATE DIAMETER OF WELL <u>6</u> INCH NEAREST INCH		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. <u>wells</u> 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE E <u>780B</u> N <u>5306</u> 000 000 2/11/97 GROUT 12:00 No inop		
METHOD OF DRILLING (circle one) BORED (or Augered) <u>AIR-ROTARY</u> JETTED <u>ROTARY</u> (Hydraulic Rotary) 30 <u>CABLE</u> <u>REVERSE-ROTARY</u> <u>Drive-POINT</u> 97 other		REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 <input type="checkbox"/> 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"/> THIS WELL WILL DEEPEMED 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) APPROP. PERMIT NUMBER <u>54</u> G A P _____ 63 FORCE <u>AM</u> WRITE INITIALS IN BOX PERMIT No. <u>HO-94-1015</u> 67 68 70 71 72 73 74 75 76 77 78 79				
SPECIAL CONDITIONS NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -				

12-20-96

Well site O.K. as shown. No site inspection made. Several previous site inspections were made by ALM, CM and Dave Kerr

of M. McLean

LIMIT 5550.575

SUBMIS

WOODS TO REMAIN

WOODS TO REMAIN

LOT 10
44,688 sq. ft.

LOT 9
597 sq. ft.

LOT 8
13,012 sq. ft.

LOT 7
42,847 sq. ft.

LOT 6
41,555 sq. ft.

LOT 5
40,738 sq. ft.

LOT 4
56,000 sq. ft.

LOT 3
48,441 sq. ft.

LOT 1
17,399 sq. ft.

PHILIP'S TREE
MAINTENANCE
EASEMENT

1

2

7

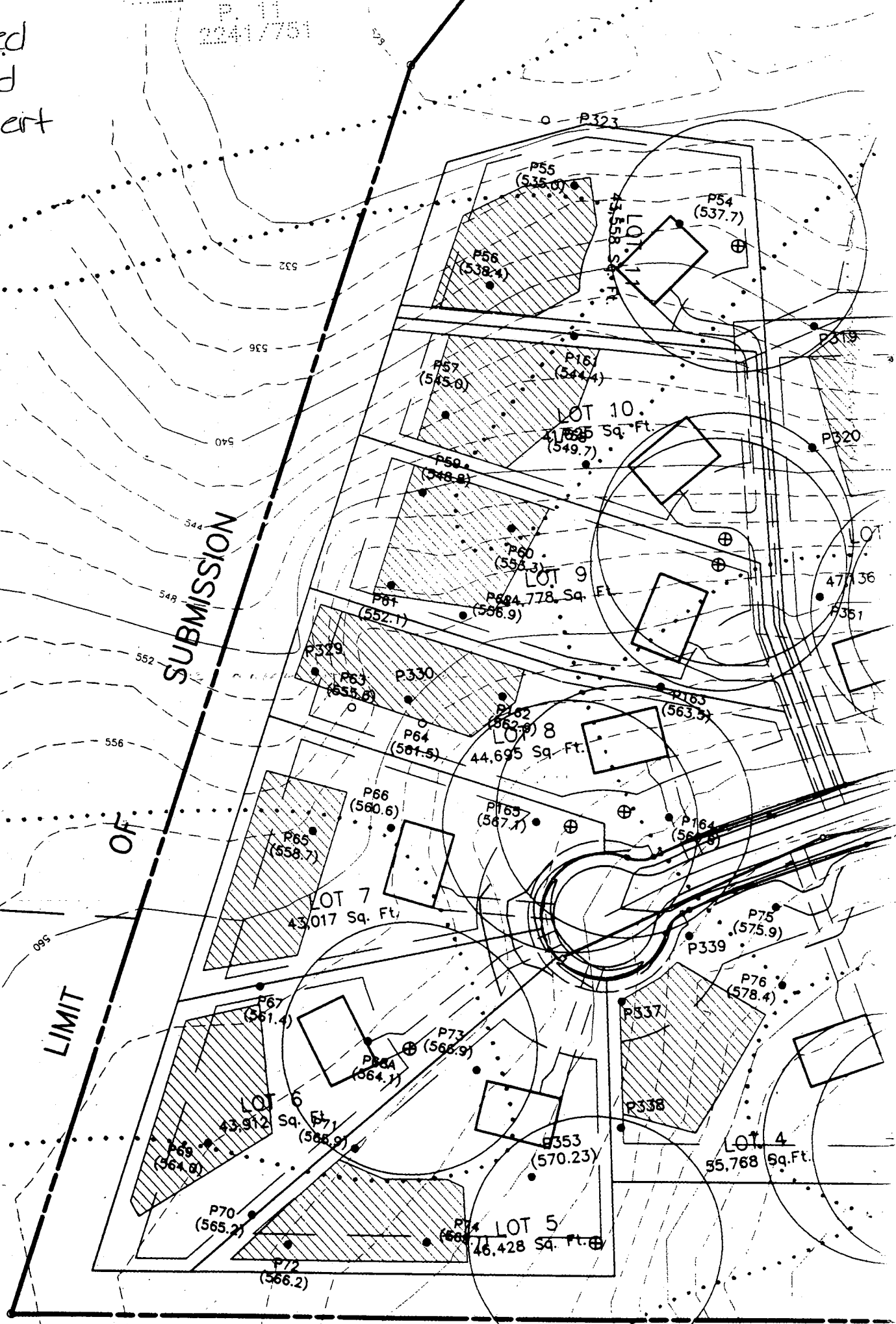
243

NOT 20' W

LIMIT

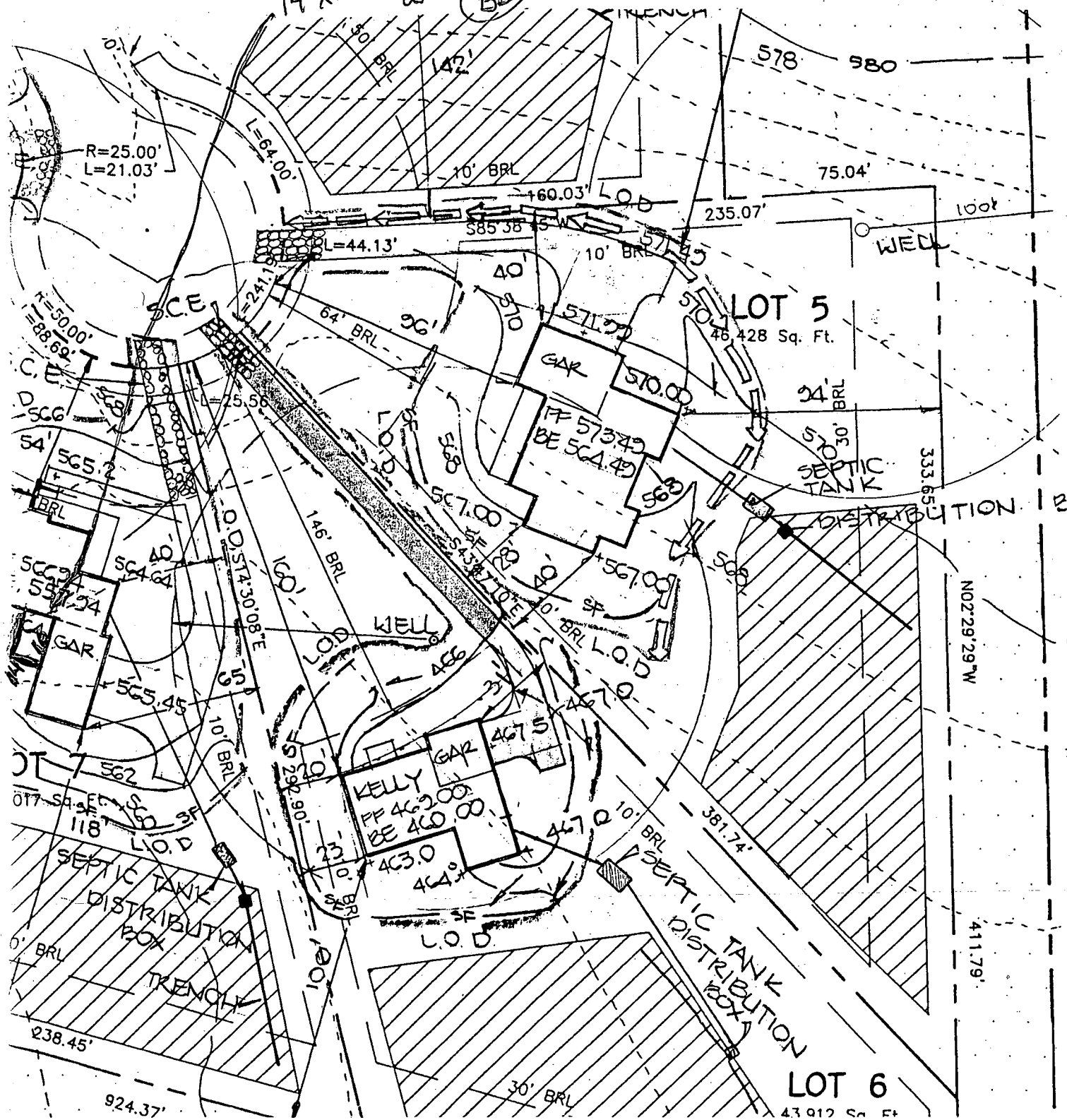
Approved
Revised
Parc. Cert
1-97

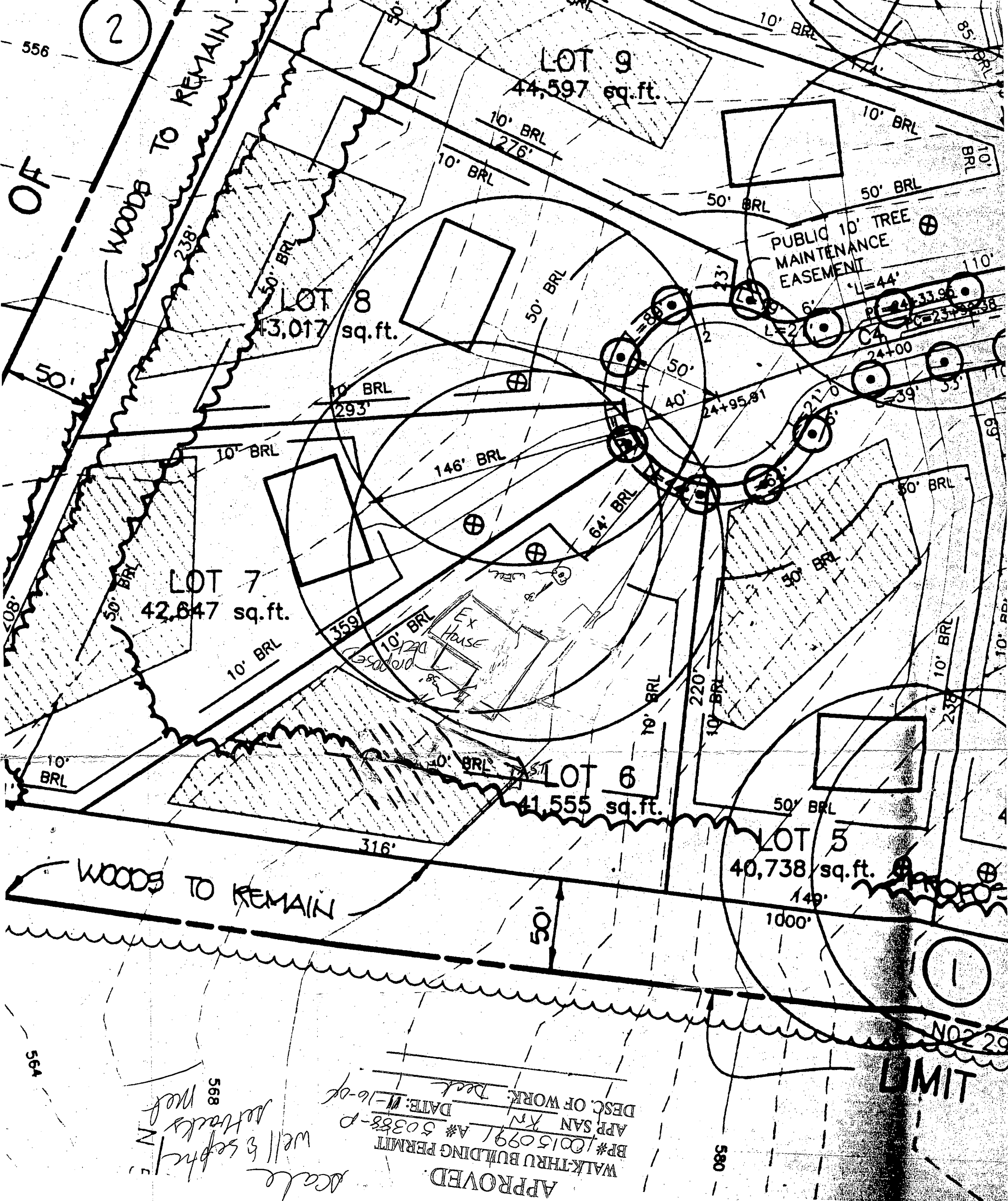
2241/751



Depth of stone required below
distribution pipe 2 feet.

6/28/01
14' x 16' Deck OK
as shown (BB)





13 Sept
Jethro
568
N

1:50
scale
well 3

APPROVED
WALK-THRU BUILDING PERMIT
BP# 100150991 APP SAN 8N
DATE: 11-16-06 DESC. OF WORK: Deck