SEWAGE DISPOSAL SYSTEM

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DEPARTMENT OF HEALTH AND MENTAL HYGIENE

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A	50560-т	

HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH XXXXXXXX 410-313-2640

INDEXED

DATE 1/5/99 DATE SYSTEM APPROVED

DISTRICT

J. Joseph Gartland. Inc.	IS PERMITTED TO INSTALL X ALTER
ADDRESS 1835 West Old Liberty Road, Westminster, MD 211	57 PHONE 410-875-2400
SUBDIVISION Lyndonbrook LOT 13	ROAD 2099 St. James Road
PROPERTY OWNER Dorsey Family Homes	
ADDRESS	
SEPTIC TANK CAPACITY 1250 GALLONS	
NUMBER OF BEDROOMS 4 BUILDING PERMIT SIG	NED
180 SQUARE FEET PER BEDROOM  LINEAR FEET OF TRENCH REQUIRED 240  AND RETURNED BOD 13617 (-TG)	5-15-02
TRENCHES - Trench to be 2 feet wide. Inlet 2.0 feet be 5.0 feet below original grade. Effective are grade. 3.0 feet of stone below distribution	ea begins at 3.0 feet below original pipe.
LOCATION - Place the distribution box 110 feet from the from the right (294.65') lot line as viewed	rear (167.15') lot line and 70 feet
on contour toward the rear lot line.  NOTES - No trench to exceed 100 feet in length. Provoto grade or above on septic tank.	vide 6" - 8" diameter cleanout and cap
PLANS APROVED BY Ronald J. Pinkley	DATE 9-08-1999
COVER NO WORK WAS INCOMED AND ADDRESS.	

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 SEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

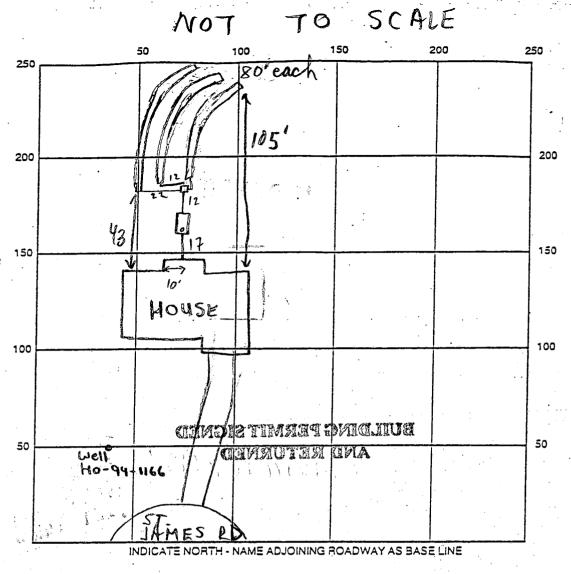
NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH

NOTE: ALL PIPE FROM HOUSE TO REPTIC 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 1250 GAL CLEANOUTS S. TOK	
DISTRIBUTION BOX LEVEL OK - BAFFLE IN	
DRAIN FIELD/ <del>TITLE</del> DEPTH 5 FT. TRENCH WIDTH 2 FT. INLET DEPTH Z FT.	
EFFECTIVE GRAVEL DEPTH 3 FT. TOTAL LENGTH 240 FT.	
NUMBER OF TRENCHES 3 ONE SIDEWALL BOTTOMAREA 720 SQ. FT.	
DRYWALL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.	
ABSORBENT AREASQ. FT.	
REMARKS: 11/10/99 Pre-construction insp- OK to start of	
11/12/99 OK TO COVER ALL MED	
DATE SYSTEM APPROVED 11/12/99 INSPECTOR McRiffin	

Stand pool of HOT Dian



### SHOWARD COUNTY HEALTH DEPARTMENT

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

November 12, 1999

Dorsey Family Homes 9926 Cypressmede Drive Ellicott City, MD 21042

RE:

Lyndonbrook, Lot 13 2083 St. James Road

Well Permit HO-94-1166

Dear Sir:

On November 12, 1999, a septic system inspection was conducted at the referenced property. On that date, I observed that the well reported to be on the lot was not visible. The septic system contractor reports that the well is believed to be buried under three or four feet of fill.

Prior to any recommendation for occupancy, the following should be completed:

- 1) excavation of the well to a depth at least three feet below the top of the casing to verify that the casing is intact and undamaged;
- 2) installation of sufficient casing to extend the casing height at least eight inches above finished grade; this work can only be completed by the well driller, and would include proper care to ensure that the well tag is visible above finished grade;
- 3) installation of a standard pitless adaptor and well line, and the plumber's submission of the standard well line form;
- 4) request that a Health Department inspection be conducted to approve each of the above referenced items.

Once the referenced work has been completed, a recommendation for occupany can proceed. Please call me at (410) 313-2640 if you have any questions. Thank you for your attention to this matter.

Very truly yours,

Mark E.Rifkin, R.S.

Water and Sewerage Program

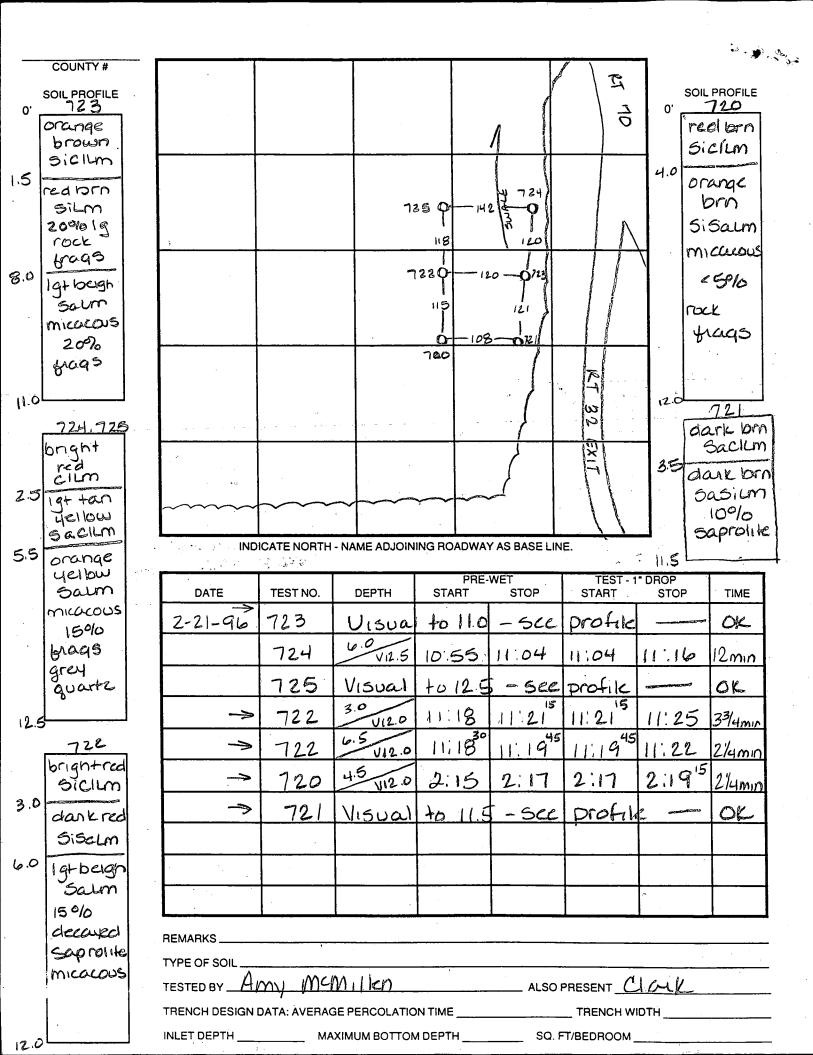
MR

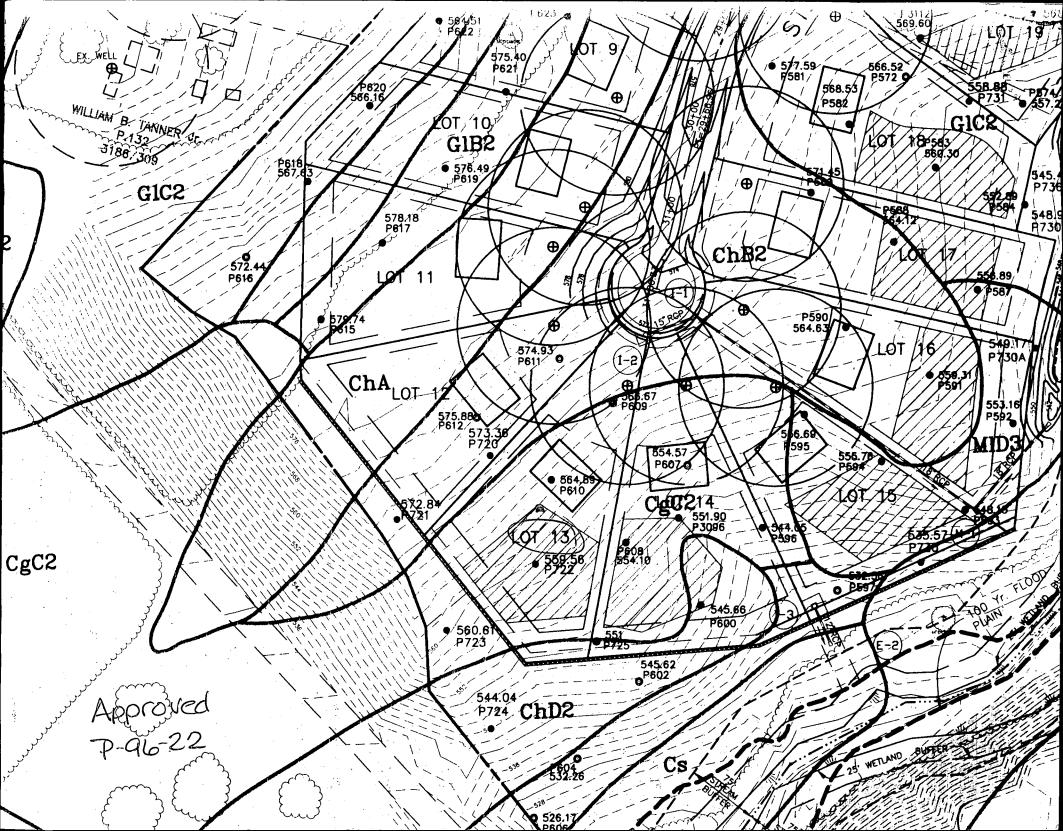
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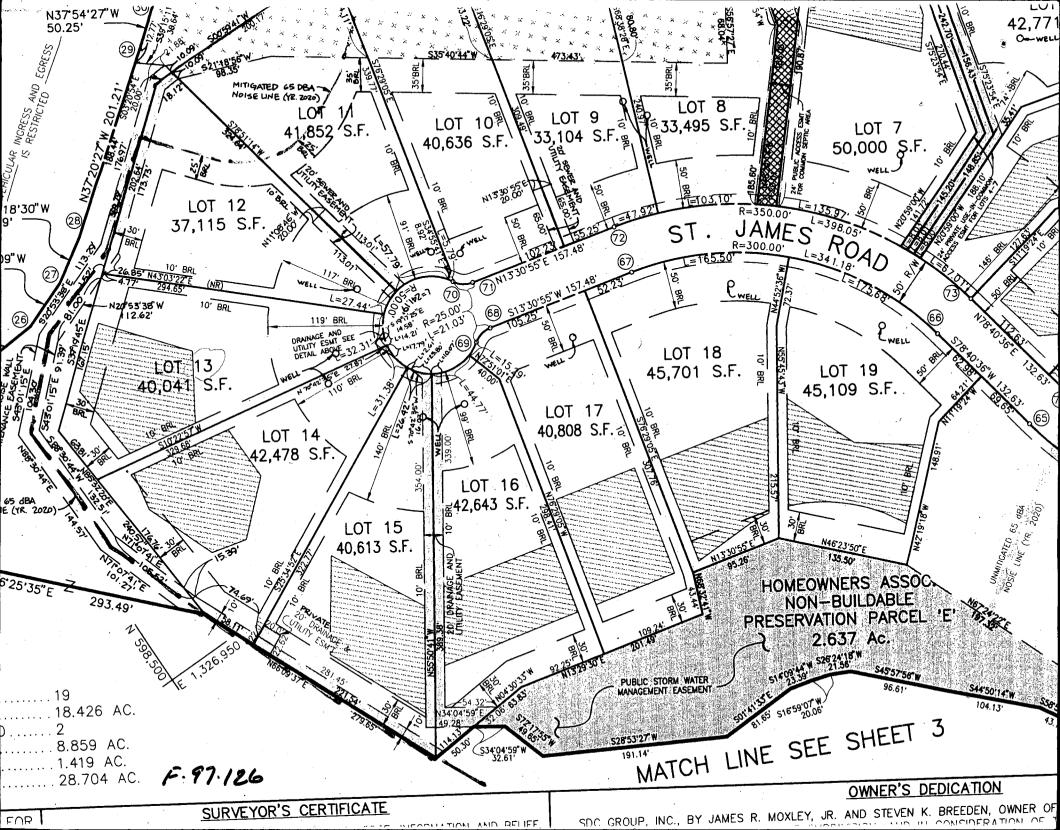
# APPLICATION

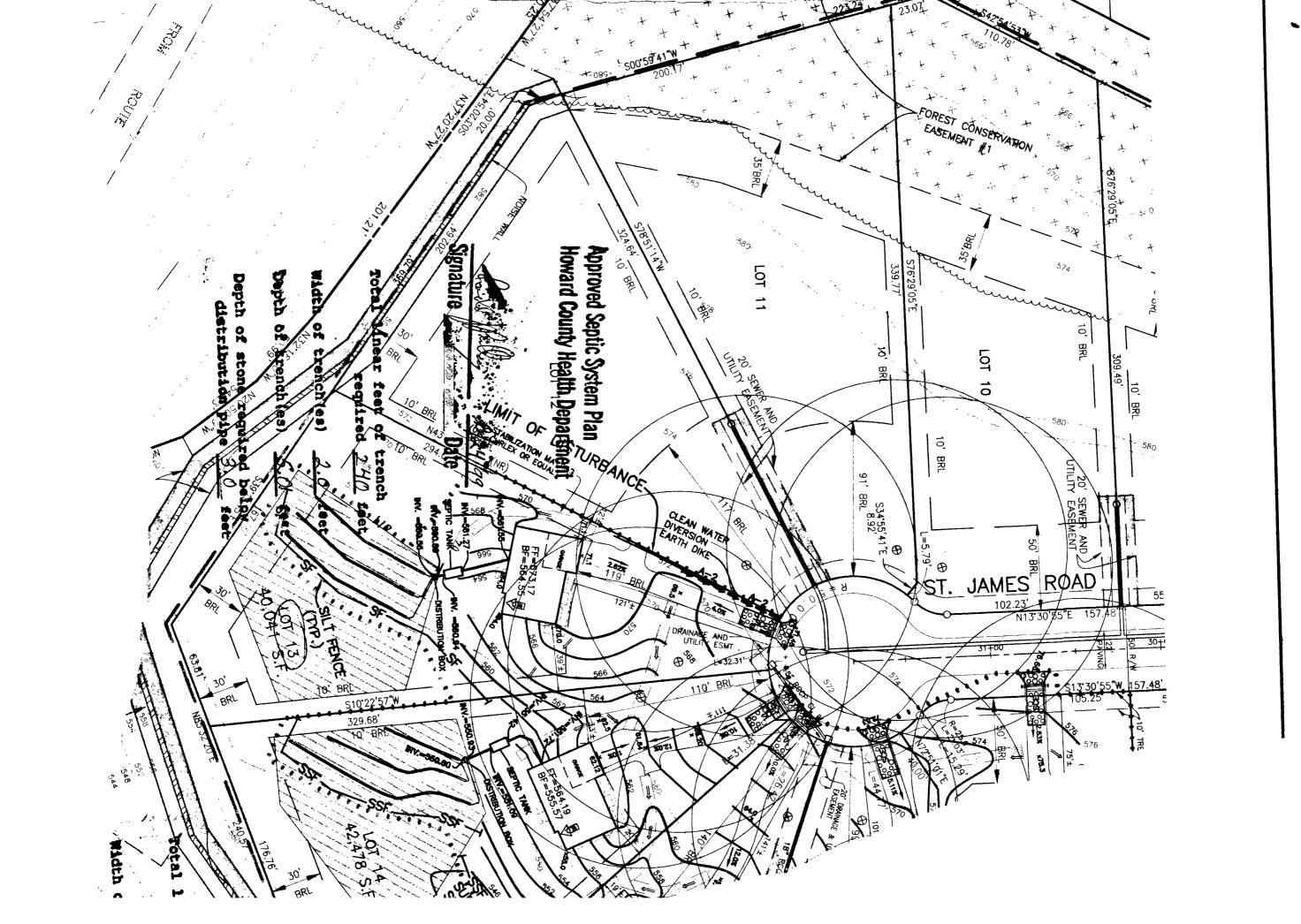
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•			P	
HOWARD COUNTY HEALTH DEPARTMENT			DISTRICT	
BUREAU OF ENVIRONMENTAL HEALTH	:		DISTRICT	<i>al</i> /
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, N	MARYLAND 21043	· ·	DATE	3/3/95
TELEPHONE: 313-2840			· •	
	•			
TO: THE COUNTY HEALTH OFFICER ELLICOTT CITY, MARYLAND		: · · · · · · · · · · · · · · · · · · ·		
I HEREBY APPLY FOR THE NECESSARY TEST PI	RIOR TO APPLICATION FOR PERMIT	TO CONSTRUCT (OR RECO	ONSTRUCT) A SEWAGE D	SPOSAL SYSTEM.
PROPERTY OWNER Annelore Stie	-g-re-i	FY I MILLY	70 11/20	
ADDRESS Sykesville, Mary	rland 21784	PHONE	<u> </u>	<u></u>
AGENT OR PROSPECTIVE BUYER SDC Gro	oup, Inc.			
P.O. Box 417				
ADDRESS Ellicott City, M	laryland 21041	PHONE(41()	) 465-4244	
PROPERTY LOCATION:				
PHOPERIT LOCATION.			of. 1-2	
SUBDIVISION Stiegler Propert	t y	LOT NO	<i>7</i>	<u> </u>
ROAD AND DESCRIPTION 2100 block	Maryland Route 32;	northeast q	uadrant I-70	
	White and the same is the same of the same	· \	and the second of the second o	1
and Maryland Route 32 (20	099 21. JAMES 200	d) NO D	EKURNED 8-23	90
TAX MAP 15 PARCEL# 40		. 71	1 # B10 /200	
SIZE OF LOT 60,000 SF	TYPE	BLDG. SINGLE	ingle Family	- 4Blow OMMERCIAL)
THE SYSTEM INSTALLED UNDER THIS APPLICAT	TION IS "ACCEPTABLE ONLY UNTIL	PUBLIC FACILITIES BEC	OME AVAILABLE. I FUL	LY UNDERSTAND THE
FEE CONNECTED WITH THE FILING OF THIS	PERC TEST APPLICATION IS NO	N-REFUNDABLE" UNDER	ANY CIRCUMSTANCES.	I ALSO AGREE TO
COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS II	N TESTING THIS LOT		Josephile,	) <u>D</u>
	N TESTING THIS, LOT.	(SIGNAT	URÉ OF APPLICANT)	
APPROVED BY	FOR	The state of the s	DATE	
DISAPPROVED BY	FOR	g, germanisma status ( ) — Esta palgo delente a gradiga i van sucapa estas ( )	DATE	
HOLD PENDING FURTHER TESTS	Anno de la companya d La companya de la co			
REASONS FOR REJECTION OR HOLDING		• • • • • • • • • •		
PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITL	*	The state of the s	DATE	
SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D	). #		DATE	·

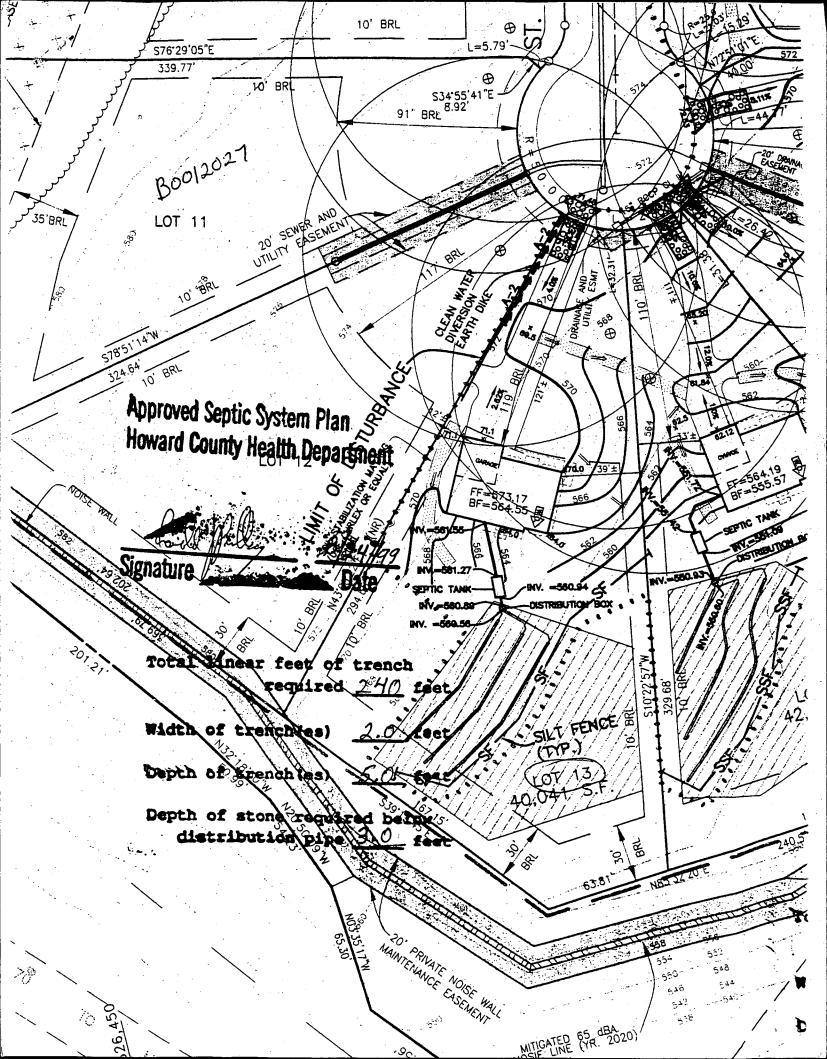
## THIS IS NOT A PERMIT











C 1 6065 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 (THIS NUMBER IS TO BE PUNCHED IN COMES 3-6 ON ALL CARDS)	FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE	COUNTY A50560-J
ST/CO USE ONLY DATE WELL COMPL	v	PERMIT NO. FROM "PERMIT TO DRILL WELL"
8 97   MM 7 7 6	22 <b>200</b> 26 20 (TO NEAREST FOOT)	HO-94 - 1166 28 29 30 31 32 33 34 35 36 37
OWNER SIL	1,	
STREET OR RFD Tast name St. James St. Subdivision Street Property		ex Friendship
WELL LOG	GROUTING RECORD (yes) no	C 3
Not required for driven wells	WELL HAS BEEN GROUTED (Circle Appropriate Box)	1 2 PUMPING TEST
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING	TYPE OF GROUTING MATERIAL (Circle one)  CEMENT (CM) BENTONITE CLAY BC	HOURS PUMPED (nearest hour)
DESCRIPTION (Use additional sheets if needed) FROM TO check if water bearing	NO. OF BAGS 46/0 NO. OF POUNDS 459490	PUMPING RATE (gal. per min.)
Sand Stone @ 36	GALLONS OF WATER 60	METHOD USED TO
	DEPTH OF GROUT SEAL (to nearest foot) fromOft. to3_7 ft.	MEASURE PUMPING RATE BUILD
Can Mica 36 200 V	fromft. toft. 48TOP5254BOTTOM58 (enter 0 if from surface)	WATER-LEVEL (distance from land surface)
Coragnica 36 200 v	casing CASING RECORD types	BEFORE PUMPING 17 20 ft.
Rock	insert STEEL CONCRETE	WHEN PUMPING $\frac{19}{22}$ ft.
	code below PLASTIC OTHER	TYPE OF PUMP USED (for test)
	MAIN Nominal diameter Total depth	A air P piston T turbine
	CASING top (main) casing of main casing TYPF (nearest inch)! (nearest foot)	C centrifugal R rotary O other (describe
	$\frac{5+}{60}$ $\frac{6}{61}$ $\frac{63}{63}$ $\frac{40}{66}$ $\frac{70}{70}$	27 below)
	E OTHER CASING (if used)	J jet S submersible
	A diameter depth (feet) C inch from to	PUMP INSTALLED
	C	DRILLER WILL INSTALL PUMP YES (CIRCLE) (YES or NO)
	I N C C C C C C C C C C C C C C C C C C	IF DRILLER INSTALLS PUMP, THIS SECTION
	screen type SCREEN RECORD	MUST BE COMPLETED FOR ALL WELLS.  TYPE OF PUMP INSTALLED
	or open hole ST BR HO	PLACE (A,C,J,P,R,S,T,O) 29 IN BOX 29.
	insert STEEL BRASS OPEN BRONZE HOLE Code	CAPACITY: GALLONS PER MINUTE
	below PLASTIC OTHER	(to nearest gallon) 31 35
	C O DEPTH (account to)	PUMP HORSE POWER  37  41
NUMBER OF UNSUCCESSFUL WELLS:	1 2	PUMP COLUMN LENGTH (nearest ft.)
WELL HYDROFRACTURED yes NO N	$\begin{bmatrix} 1 & H & 0 \\ A & 8 & 9 \end{bmatrix} \xrightarrow{11} \frac{3 & 8}{15} \frac{300}{17} = \begin{bmatrix} 3 & 8 & 300 \\ 17 & 21 & 21 \end{bmatrix}$	CASING HEIGHT (circle appropriate box
CIRCLE APPROPRIATE LETTER	C 2	above 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	49 50 51
WELL  HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN	E SLOT SIZE 1 2 3	LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS
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	DIAMETER         (NEAREST           OF SCREEN	BUILDING, SEPTIC TANKS, AND /OR LANDMARKS AND INDICATE NOT LESS
HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.	from to	THAN TWO DISTANCES (MEASUREMENTS TO WELL)
DRILLERS LIC. NO. 1 M S D D 2 4 1	GRAVEL PACK	Stones
DRILLERS SIGNATURE TRANSPORT	WAS FLOWING WELL INSERT F IN BOX 68 68	
(MUST MATCH SIGNATURE ON APPLICATION)	MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)	
LIC. NO.1 M D 1	T (E.R.O.S.) W Q	WIN THE
SITE SUPERVISOR (sign. of driller or journeyman	70 72 74 75 76	
responsible for sitework if different from permittee)	TELESCOPE LOG CASING INDICATOR OTHER DATA	
	COUNTY	●

Page	
Date	. 7/1/97

### FIELD DATA SHEET HOWARD COUNTY WELL YIELD TEST

Location of property (road)  Subdivision Sheder Roperty Lot 13 Block Plat Sec.	
Well Driller Joseph Mayne Owner SOC	
Depth of well $200'$ Distance of measuring point (M.P.) above ground $1/2$ Static water level (S.W.L.) below M.P. $42$	
I. High rate pumping reservoir drawdown	
Time pump started 10.30 Pumping rate 20 gent. Total time Samin to reach pumping water level 19 ft. below M.P.	

### II. Recovery pump test data - observations to be recorded every 15 minutes

TIME (in 15 minute in- tervals	WATER LEVEL below M.P.	PUMPING RATE time to fill \5/ gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
10:45	79.	Bala.	N/A	La a grain,
11:00	75	(0	79/77	10 mass.
11:15	75	10		10
//: 3a	75	6		10
11:45	75	6		İ
10:60	75	6		10
12:15	75	6		10
12:30	75	6		10
19:90	75	6		10
1:00	57 S.s.	6		10
1:15	75	6		/0
1:30	75	6		<u>lo</u>
1:45	95	6		10
	1.2		·	10
<del></del>				·
				· · · · · · · · · · · · · · · · · · ·

	EMERGENCY/T	MP NO. IF ANY		
B 1 SEQUENCE NO.	STATE OF	MARYLAND	STATE PERMIT N	NUMBER
(WIDE USE CINET)	PERMIT TO	and the second of the second o	Ho ou	111 /
(THIS NUMBER IS TO BE-PUNCHED		nt or type	HU - 44 -	1100
ÎN COLS. 3-6 ON ALL CARDS)	picase pri	The or type	fill in this form c	ompletely <sup>79</sup>
Date Received (APA)		$B \mid 3$	LOCATION OF WELL	
OWNER INFORMATION		B COUNTY	<u>D</u>	
			. /2 - 2/1	
15 Last Name Owner First Name	34	23 SUBDIVISION	2 PROPERTY	J 42
1 1 Rox 4/7		20 0000,110,011	/2	42
36 Street or RFD	55	SECTION L44 46	LOT [	-,
Ellicott City MA 2/16	11 .	111-1-1-1	ienDShip	
57 Town 70 State 72 Zip	76	52 NEAREST TOWN	16/01/3/1/10	71
DRILLER INFORMATION				
Joseph L. Maine MSDO	24	MILES FROM TOWN (en	er 0 if in town) 2 73 76	M     77 78
Driller's Name 76 License N	····	B 4	Λ.	STAN-SECUL
Joseph L. Marine Well Shell	erio,	1 2 DIRECTION OF WELL FROM	St. TAMOS R	in.
Firm Name		TOWN (CIRCLE BOX)	11 NEAR WHAT R	OAD 30
5512 Kickeld Mt (Jun Md.	. 2177/		ON WHICH OIDE OF DO	NORTH
Address			ON WHICH SIDE OF RO (CIRCLE APPROPRIATE	MD . [37]
Grant & Mayre 4/21	1/97	8-9		WEST BAST
Signature / Date		W(TOWN)E	34 50	37 SOUTH
B 2 WELL INFORMATION 1 2 APPROX. PUMPING RATE		* <b>/</b>	DISTANCE FROM	VI ROAD EL
(GAL. PER MIN.) 8	12	S.   S.	ENTER	FT OR MI 38 39
AVERAGE DAILY QUANTITY NEEDED560		8-9 S 8-9	TAX MAP: BLK:	PARCEL
(GAL PER DAY) 14	20	8		
USE FOR WATER (CIRCLE APPROPRIATE BO	2×1<-97 ,		O BE FILLED IN BY DRILL H DEPARTMENT APPRO\	
HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)	The class	F 11	H DEFARIMENT APPROV	/AL
F FARMING (LIVESTOCK WATERING & AGRICULTURAL	We ctat?	1 MTOWARD	F1 5056	0-1
IRRIGATION	CIS STATION	STATE	C	COUNTY NO.
22 INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)	*	SIGNATURE	INSEF	
	·	DATE ISSUED	1. Moto	5-210041
PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE APPROVAL		43 MM DD YY 48-	CO SIGNATURE	2-21-90
<u></u>		NORTH 530	EAST Q III	EXP. DATE
TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		GRID 50	0 0 0 GRID 019 55 57	0 0 0
			(/2-/00	
APPROXIMATE DEPTH OF WELL 1 300		SHOW MAJOR FEATURE BOX & LOCATE WELL	S OF 6/30/9/	
APPROXIMATE DEPTH OF WELL 24 28		WITH AN X		
APPROXIMATE DIAMETER OF WELL 6	NEAREST	SOURCES OF DRILLING	WATER 100 / 100	o ff
AT THOMINATE DIAMETER OF WELL (S)	— INCH	1 WerL		
METHOD OF DRILLING (circle one)		2. 3.		• <del>F</del> e
BORED (or Augered) JETTED Jetted	d & DRIVEN	<b>J.</b>		
AIR-ROTary AIR-PERcussion ROTARY (Hydr	raulic Rotary)	WRITE THE BOX NUMBE	B	
37 CABLE REVerse-ROTary	DRive-POINT	FROM THE MAP HERE		
other		/ I TIOM 1112 MAIN 11216	,	
REPLACEMENT OR DEEPENED WELLS		E 8104		
(CIRCLE APPROPRIATE BOX)	3	F.16.20	000	
THIS WELL WILL NOT REPLACE AN EXISTING WELL		N 54038		
THIS WELL WILL REPLACE A WELL THAT WILL BE		DRAW A SKETCH BELOV	V SHOWING LOCATION OF WEL	LIN
ABANDONED AND SEALED			OWNS AND ROADS AND GIVE	
THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORIT		DISTANCE FROM WELL	TO NEAREST ROAD JUNCTION	
FOR POLICY ON STANDBY WELLS	` ·	· ·		
D THIS WELL WILL DEEPEN AN EXISTING WELL			SE .	
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENED (IF AVAILABLE) 41		N	of It	
(IF AVAILABLE) 41	52	A	NE NE	- <sup>*</sup> 語》 -
Not to be filled in by driller (MDE OR COUNTY USE	ONLY)	<b>A</b>	A B	•
ADDDOD DEDMIT WITHOUT	· · · ·		l la	-
APPROP. PERMIT NUMBER  GAP  WRITE  GAP	63		, <u>(</u> )	
I KM INITIALS UN_QU	111010			•
67 160	6 77 78 79			
SPECIAL CONDITIONS		W		<b>A</b>

COUNTY

West Friendship

