PERMIT

SEWAGE DISPOSAL SYSTEM

A 57278

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT 3rd

INDEXED

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

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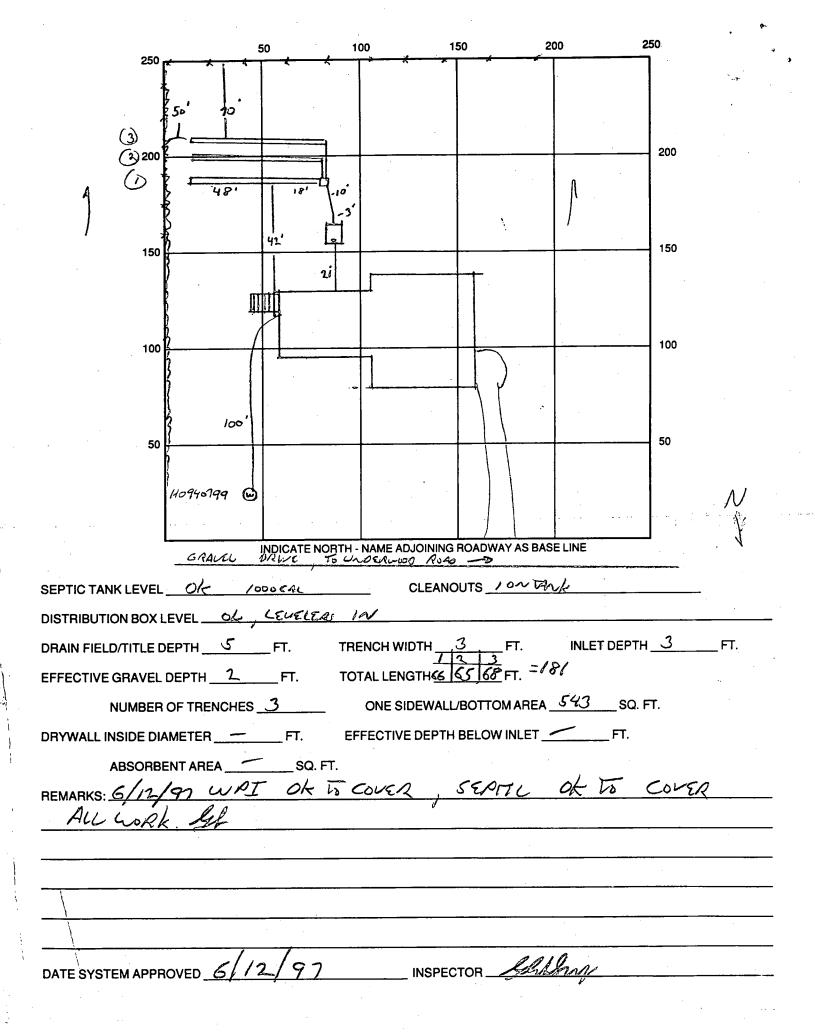
03-293041

INSPECTOR #

•	
C & C Utility Service	IS PERMITTED TO INSTALL XALTER
ADDRESS 7398 Gaither Road Sykesville, MD 2	21784 PHONE (410) 549-4987
SUBDIVISIONLOT	ROAD 1093 Underwood Road
PROPERTY OWNER Craig Hardin	ng
ADDRESS	
SEPTIC TANK CAPACITY 1000 GALLONS	
NUMBER OF BEDROOMS 3	
180 SQUARE FEET PER BEDROOM	
LINEAR FEET OF TRENCH REQUIRED 180	
directions.	Run trenches along contour in both eth. Provide 6" - 8" diameter cleanout and
PLANS APROVED BY Glen Savage	DATE 04/04/97
COVER NO WORK UNTIL INSPECTED AND APPROVED	
NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RE	SPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM
NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 9 ACCEPTABLE.	0° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS, 90° ELBOWS NOT
NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX TREN AUTHORIZED)	CHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY
NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFT	ER PLACING GRAVEL IN TRENCH(ES)
NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO ABSORPTION TR	ENCH TO EXCEED 100 FEET IN LENGTH
NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDU	JLE 35/40 PVC OR ABS
PERMIT VOID AFTER TWO YEARS	•
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MU	ST 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



APPLICATION

PERCOLATION TESTING PAGULEW OK EXISTING LOT OF NEGOND DISTRICT

HOWARD COUNTY HEALTH DEPARTMENT **BUREAU OF ENVIRONMENTAL HEALTH**

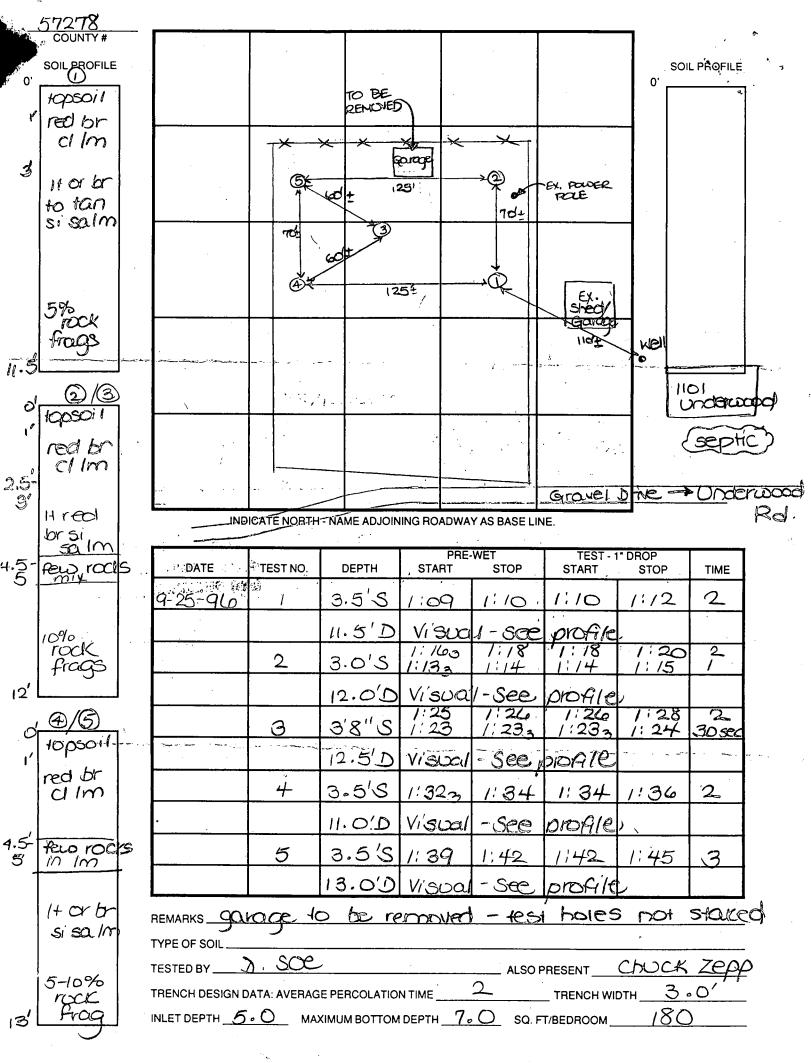
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043

TELEPHONE: 313-2640

TO: THE COUNTY HEALTH OFFICER ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FO	R PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.
PROPERTY OWNER James + Pales Posterson (RAIG HARding
ADDRESS 8106 Bernard Da Ft. Washing	on MD PHONE 301-248-9183
AGENT OR PROSPECTIVE BUYER Craig Harding	20744-1837
ADDRESS 14 Ggither Manor Drive 103	PHONE (410) 795-2174
PROPERTY LOCATION: Sy Kesuille Maryland 21784	
SUBDIVISIONNONE	LOT NO.
ROAD AND DESCRIPTION 1093 Underwood	32 (D) on R+ 99 (R)
on underwood common gravel o	trive on R PERMIT SIGNED
TAX MAP 9 grid 8 PARCEL# 114	Seval # B10/0 4527
SIZE OF LOT 1, 25 AC.	TYPE BLDG. SINGLE FAMILY DWLLLING— (SINGLE FAMILY DWELLING OR COMMERCIAL)
THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ON	LY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE
FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION	N IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO
COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT	(NU STATURE OF APPLICANT)
APPROVED BY FO	P DATE
DISAPPROVED BYF	ORDATE
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



EMERGENC	CY/TEMP NO. IF ANY	STATE USE BOUSTRES JESSUP ND 20794
B 1 4940 SEQUENCE NO.	STATE OF MARYLAND	STATE PERMIT NUMBER
(MDE USE ONLY)	PERMIT TO DRILL WELL	HO-94-0179
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)	please print or type	⁷⁰ fill in this form completely ⁷⁹
Date Received (APA)	B 3	LOCATION OF WELL
B ON 13 OWNER INFORMATION	# OWAV	
15 Lest Name Owner First Name	1093UA	4 de v wood Rd
13735 FORSYTHER	23 SUBDIVISION SECTION	Lor []
5, Keruille M/2	1/784 Zo 76 Syk=50	6 48 50 ∅, ((e
	MSD/MGD/MWD 52 MEAREST TOWN	71 MI
Stanley W. Billinger	MILES FROM TOWN 77 License No. 80 B 4	(enter 0 ir in town) 73 76 77 78
Firm Name	DIRECTION OF WELL FE	ROM 11 NEAR WHAT ROAD 30
Address.		NORTH
Signature Signature	<u>4/96</u> NW 8 8 8 8	ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) WEE
B 2 WELL INFORMATION	TOWN)	34 400 37 SOUTH
APPROX. PUMPING RATE (GAL. PER MIN.)		DISTANCE FROM ROAD ENTER FT OR MI
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY)		38 39
USE FOR WATER (CIRCLE APPROPRIATE)		NOT TO BE FILLED IN BY DRILLER
DE OME (SINGLE OR DOUBLE HOUSEHOLD UNIT		HEALTH DEPARTMENT APPROVAL
F FARMING (LIVESTOCK WATERING & AGRICULTU	JRAL HOUGIO COUNTY NAME	COUNTY NO.
INDUSTRIAL, COMMERCIAL, STATE AND FEDER. 22 OTHER (REQUIRES APPROPRIATION PERMIT)	SIGNATURE	INSERT S
PUBLIC OR PRIVATE WATER COMPANY (REQUII	RES DATE ISSUED DEPARTMENT DATE ISSUED	a nouce x Sec 11/5/97
APPROVAL) TEST, OBSERVATION, MONITORING (MAY REQU	NORTH STATOL	48 CO-SIGNATURE EXP. DATE 0 0 0 GRID O O O O
APPROPRIATION PERMIT)	GRID 50 SHOW MAJOR FEA	55 57 63
APPROXIMATE DEPTH OF WELL 25 FEE	ROY & LOCATE WE	
	NEAREST 1. Well	LLING WATER I
APPROXIMATE DIAMETER OF WELL	INCH 2.	NO INSP
METHOD OF DRILLING (circle one) BORED (or Augered) JETTED	Jetted & DRIVEN # WRITE THE BOX N	UI IMPER
30 AIR-ROTary AIR-PERcussion ROTARY	(Hydraulic Rotary) FROM THE MAP H	
CABLE REVerse-ROTary other	DRive-POINT E 800	74
REPLACEMENT OR DEEPENED WELL	LS N 54	09 - 000
(CIRCLE APPROPRIATE BOX)		BELOW SHOWING LOCATION OF WELL IN RBY TOWNS AND ROADS AND GIVE
THIS WELL WILL NOT REPLACE AN EXISTING WE THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED		VELL TO NEAREST ROAD JUNCTION
39 S THIS WELL WILL REPLACE A WELL THAT WILL BE A STANDBY-CONTACT LOCAL APPROVING AUTHOR	E USED AS ORITY FOR	Forsythe Rd -400' -> x wea
POLICY ON STANDBY WELLS THIS WELL WILL DEEPEN AN EXISTING WELL	* -	440 +x wea
PERMIT NUMBER OF WELL TO BE REPLACED OR DEE	PENED	Le undouvood Rd.
(IF AVAILABLE) 41	52	Le undowwood kd.
Not to be filled in by driller (MDE OR COUNTY L	JSE ONLY)	
APPROP PERMIT NUMBER GAP	63	-Md70 Cold Frederick Rd.
FORCE WRITE PERMIT No	- 0 9 7 9 5 76 77 78 79	Fra 10
SPECIAL CONDITIONS NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -		⊗

-	C 1 7890 SEQUENCE NO.	STATE OF MARYLAND WELL COMPLETION REPORT	THIS REPORT MUST BE SUBMITTED WITHIN 45-DAYS AFTER WELL IS COMPLETED.
*	(MDE USE ONLY) (THIS NUMBER IS TO BE PUNCHED (NO COLS. 3-6 ON ALL CARDS)	FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE	COUNTY A 57278
	DATE Received DATE WELL COMPLE	22 205 26	PERMIT NO. FROM "PERMIT TO DRILL WELL" O - 94 - 0979
	OWNER WOULDE STREET OR RFD last name 1093	nderwood Feet Town 5	28 29 30 31 32 33 34 35 36 37
188	SUBDIVISION	SECTION GROUTING RECORD yes no	LOT
	Not required for driven wells	WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL (Circle one)	PUMPING TEST
	PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING	CEMENT BENTONITE CLAY BC	HOURS PUMPED (nearest hour)
	additional streets in needed) Thom; To bearing	NO. OF BAGS NO. OF POUNDS 222 GALLONS OF WATER DEPTH OF GROUT SEAL (to nearest foot)	PUMPING RATE (gal. per min.) 10 15 METHOD USED TO Bucket
	Brown State 0 36 Brown State 46 61 V	from O TOP 52 54 BOTTOM 58 (enter 0 if from surface)	WATER LEVEL (distance from land surface)
(Olu- States 61 120	casing CASING RECORD.	BEFORE PUMPING 7 7 1 ft.
	Blue Slate 120 123 V Blue Slate 123 160	insert appropriate code below SIEEL CONCRETE OT	WHEN PUMPING S /
	Rue Slatemined	PLASTIC OTHER MAIN Nominal diameter Total depth	A air P piston T turbine
- 10 180	with Flint 160 205 V	CASING top (main) casing of main casing TYPE (nearest inch)! (nearest foot)	C centrifugal R rotary O other (describe below)
		60 61 63 64 66 70	jet submersible
Maria National		OTHER CASING (if used) C depth (feet) C inch from to	PUMP INSTAULED DRILLER WILL INSTALL PUMP (CIRCLE) (YES or NO)
the state of		Screen type SCREEN RECORD	IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.
Section Service		or open hole ST BR STEEL BRASS OPEN	TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29 CAPACITY:
	NUMBER OF UNSUCCESSFUL WELLS:	Scode below PLASTIC OTHER	GALLONS PER MINUTE (to nearest gallon) 31 35 PUMP HORSE POWER
	WELL HYDROFRACTURED Yes	C 2 DEPTH (nearest ft.)	PUMP COLUMN LENGTH (nearest ft.)
7	CIRCLE APPROPRIATE LETTER A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	CASING HEIGHT (circle appropriate box and enter casing height)
a a security of the	E ELECTRIC LOG OBTAINED TEST WELL CONVERTED TO PRODUCTION WELL	H S 2 2 2 3 24 26 30 32 36 R	49 LAND SURFACE (nearest) foot)
فقيقا للزفرد فاختاس	I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 28.04 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.	E 3	LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND /OR / LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES
A STATE OF	TYPE: MWD/MSD/MGD DRILLERS LIC. NO	56 60 from to GRAVEL PACK	(MEASUREMENTS TO WELL) wea
	DRILLERS SIGNATURE	FLOWING WELL INSERT FIN BOX 68 68	110-160'
Mark Con-	(MUST MATCH SIGNATURE ON APPLICATION) LIC. NO.	MDE USE ONLY. (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q	House
		70 72 75 76	
·	SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)	TELESCOPE LOG OTHER DATA CASING INDICATOR	
		COUNTY	❸

