

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

INDEXED

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

313-2640

12/10/98 Needs have
cert. DCS

P 510192

A REPAIR

DISTRICT _____

DATE 6/9/98

DATE SYSTEM APPROVED 12/21/98

INSPECTOR KM

03-294048

K & K Excavating

IS PERMITTED TO INSTALL _____ ALTER ☒

ADDRESS 14960 Route 144 Woodbine, MD 21797 PHONE (410) 442-1336

SUBDIVISION _____ Tax Map 22
LOT Parcel 11 ROAD 13205 Triadelphia Road

PROPERTY OWNER Doughoregan Homes, Inc.

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 180

REPAIR - PURPOSE - In support of proposed addition.

Call for inspection when ground is opened so sanitarian can recommend repair. 06/10/98

Existing septic system to be properly abandoned
Replacement system to be installed in highest portion
of newly established septic area (see attached)
Trenches to be 2' wide, inlet 4', bottom 8', stone 4'.

PLANS APPROVED BY John K. Goe DATE 6/19/98

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.

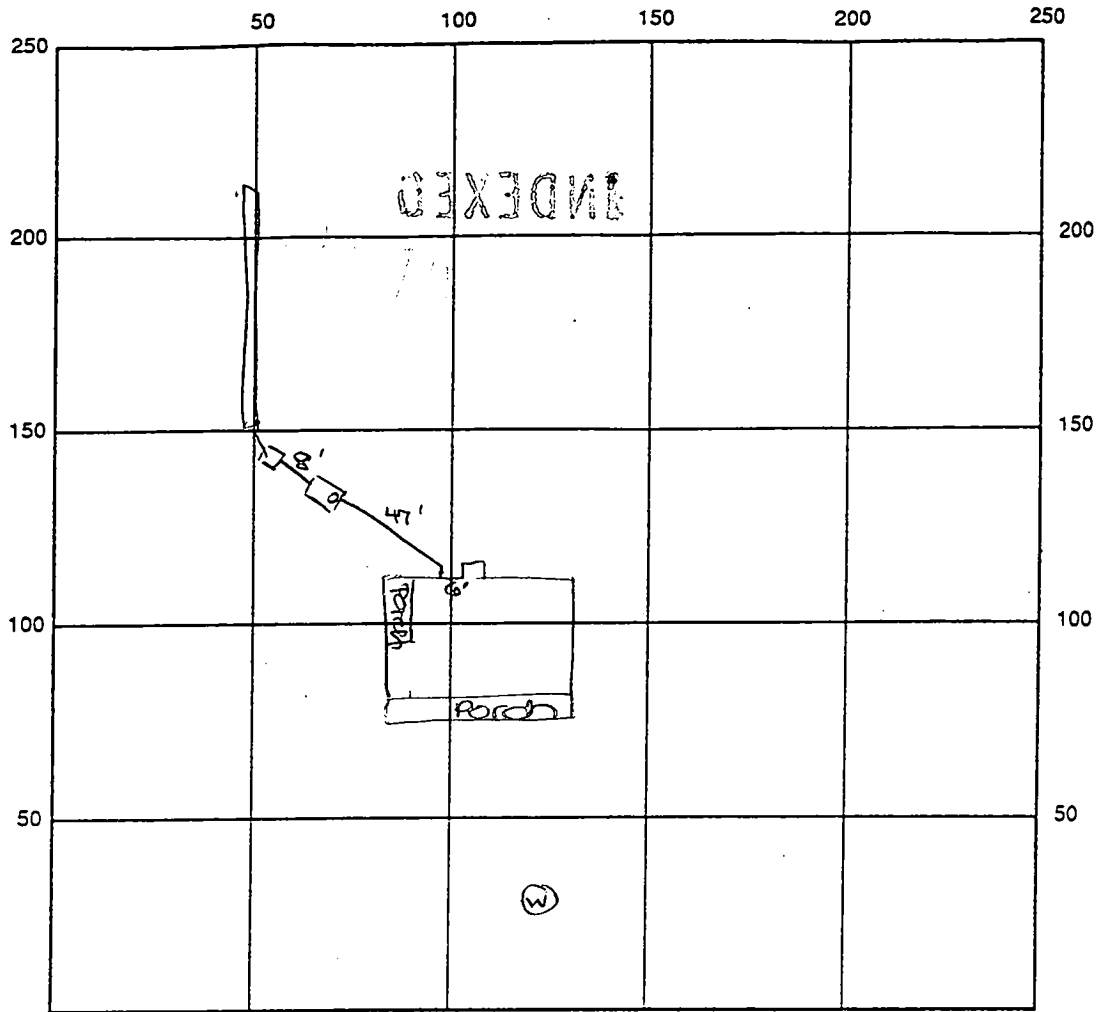
SEWER PERMIT SIGNED

DATE 6-19-98

Serial # B7112452

detached garage
2-story addition

A 510192



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

Triadelphia Road

SEPTIC TANK LEVEL OK - 1500 gal CLEANOUTS one on s.t.

DISTRIBUTION BOX LEVEL OK

DRAIN FIELD/TITLE DEPTH 8 FT. TRENCH WIDTH 2 FT. INLET DEPTH 4 FT.

EFFECTIVE GRAVEL DEPTH 4 FT. TOTAL LENGTH 2 x 90 FT. → 180'

NUMBER OF TRENCHES 2 ONE SIDEWALL BOTTOM AREA 720 SQ. FT.

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

ABSORBENT AREA — SQ. FT.

REMARKS: 12/10/98 OK to continue. DKS

12/10/98 P.M. OK to cover all septic work.

Needs house connection. DKS

12/21/98 house connection verified. KM

DATE SYSTEM APPROVED 12/21/98 INSPECTOR Kimberly Maister

12/21/98
WPI anytime

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043
461-9933

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation ☒
Replacement ☐

Receipt # _____
Date _____

Name of Installer Michael Hoffman

Telephone 301-898-5170

License Number _____
Certified Well Pump Installer _____ Well Driller _____ Registered Plumber 7383

Name of Property Owner _____ Telephone _____
Subdivision _____ Lot # _____ Well Tag # 110-94-1598
Site Address 13205 Teidelphia Rd.

Pump Motor Pitless Adapter
1. Type 1. Horsepower 1 1/2 1. Make Campbell
a. Deep well jet 2. RPM _____ 2. Model # 810-BX
b. Shallow well jet 3. Voltage _____ 3. Depth 42"
c. Submersible ☒ a. 110 _____
2. Make Goulds b. 220 ☒
3. Model # _____
4. Capacity 5 GPM
5. Pump exceeds well capacity Yes _____ No _____
6. If Yes, is low pressure cutoff switch installed? Yes _____ No _____
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors _____ Cable guards _____ Other _____

Tank Piping Well data
1. Capacity V-100 AD. Smith 1. Type 5/8" Black plastic 1. Depth 650 ft.
2. Pressure relief valve? yes 2. Size 1" 2. Yield 10 GPM
3. NSF and/or BOCA Code approved ☒ 3. Static water level _____ ft.
4. Depth of supply line 42" 4. Will water supply be disinfected by installer? No
well line p.a. 3.5' b.g.
well casing 1'a.g.
2pc cap in hand
pvc conduit pipe OK - OK to cover - KM

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

Signature of Applicant: Michael Hoffman

Date: 12-21-98

Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.

C 1	03522	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.	
1 2 3 4 5 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)				COUNTY NUMBER <u>P510192</u>		
DATE RECEIVED MM DD YY 8 13		DATE WELL COMPLETED MM DD YY 7 9 98		Depth of Well 22 <u>650</u> 26 (TO NEAREST FOOT)		
ST/CO USE ONLY		PERMIT NO. FROM "PERMIT TO DRILL WELL" <u>HO-94-1598</u>		28 29 30 31 32 33 34 35 36 37		

OWNER <u>Cummingas Tony</u>	first name	TOWN <u>Baltimore</u>	21229
STREET OR RFD <u>13205 VICTORIA PARK ROAD</u>			
SUBDIVISION <u>Ridgely Property</u>	SECTION <u>204</u>	LOT	

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	
Dirt	0	45	
Micha	45	50	
Dirt & sand	50	53	
Micha	53	68	
Micha	68	650	
Hit Water 610			

GROUTING RECORD	
yes	no
<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N
WELL HAS BEEN GROUTED (Circle Appropriate Box)	
TYPE OF GROUTING MATERIAL (Circle one)	
CEMENT <input checked="" type="checkbox"/> CM	BENTONITE CLAY <input type="checkbox"/> BC
NO. OF BAGS <u>7</u>	NO. OF POUNDS <u>658</u>
GALLONS OF WATER <u>42</u>	
DEPTH OF GROUT SEAL (to nearest foot)	
from <u>0</u> ft. to <u>68</u> ft.	
(enter 0 if from surface)	

CASING RECORD		
casing types insert appropriate code below	<input checked="" type="checkbox"/> ST STEEL	<input type="checkbox"/> CO CONCRETE
	<input type="checkbox"/> PL PLASTIC	<input type="checkbox"/> OT OTHER
MAIN CASING TYPE <u>ST</u>	Nominal diameter top (main) casing (nearest inch) <u>6</u>	Total depth of main casing (nearest foot) <u>608</u>
	60 61	63 64 66 70

OTHER CASING (if used)	
diameter inch	depth (feet) from to

SCREEN RECORD			
screen type or open hole	<input checked="" type="checkbox"/> ST STEEL	<input type="checkbox"/> BR BRASS	<input type="checkbox"/> HO OPEN HOLE
(insert appropriate code below)	<input type="checkbox"/> PL PLASTIC	<input type="checkbox"/> OT OTHER	

NUMBER OF UNSUCCESSFUL WELLS: _____
WELL HYDROFRACTURED <input checked="" type="checkbox"/> Y <input type="checkbox"/> N

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. <u>MSD101</u>
DRILLERS SIGNATURE <u>Lee K. Holland</u>
(MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. <u>MSD009</u>
SUPERVISOR SIGNATURE <u>Franklin E. Phillips</u>

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

DEPTH (nearest ft.)		
1 <u>HO</u>	2 <u>68</u>	3 <u>650</u>
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) <u>56</u> <u>60</u>		
from _____ to _____		

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68
_____ 68 _____

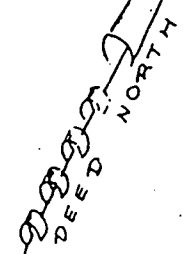
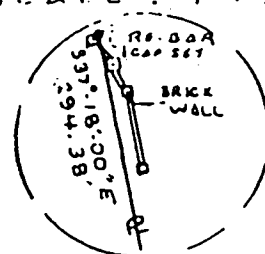
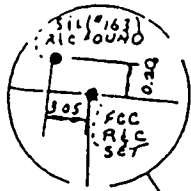
MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)	
T. (E.R.O.S.)	W Q
70 _____	72 _____
TELESCOPE CASING	LOG INDICATOR
74 75 76	OTHER DATA

PUMPING TEST		
HOURS PUMPED (nearest hour)	<u>1</u>	
PUMPING RATE (gal. per min.)	<u>10</u>	
METHOD USED TO MEASURE PUMPING RATE	<u>air</u>	
WATER LEVEL (distance from land surface)		
BEFORE PUMPING <u>50</u> ft.		
WHEN PUMPING <u>650</u> ft.		
TYPE OF PUMP USED (for test)		
<input checked="" type="checkbox"/> A air	<input type="checkbox"/> P piston	<input type="checkbox"/> T turbine
<input type="checkbox"/> C centrifugal	<input type="checkbox"/> R rotary	<input type="checkbox"/> O other (describe below)
<input type="checkbox"/> J jet	<input type="checkbox"/> S submersible	

PUMP INSTALLED	
DRILLER WILL INSTALL PUMP (CIRCLE) (YES or NO)	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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. <u>29</u>	
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)	
<input checked="" type="checkbox"/> + above	LAND SURFACE
<input type="checkbox"/> - below	(nearest foot) <u>1</u>

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)	
<u>HOUSE</u>	
<u>WELL</u>	
<u>ROAD TRIADOLPHIA</u>	

DETAIL
SCALE: 1" = 30'



TRIADELPHIA ROAD

REBAR CAP SET
(F.C.C. 106)

N69°59'58"E 159.00'

Well
88°±

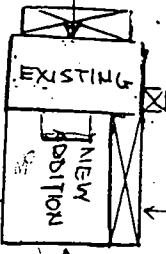
REBAR CAP SET
(F.C.C. 106)

NOTE: BRICK WALL
ENCROACHES ONTO
SUBJECT PROPERTY.

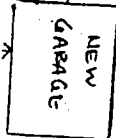
6/12/98
Well site as
marked
(18)

133±

20°±



35°±



76°±

294.38'

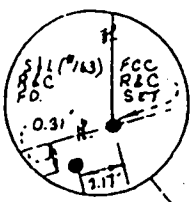
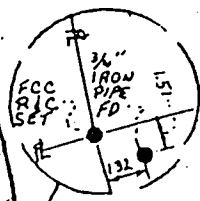
PROPERTY OF
STEVEN L.E
ANNE TOWNE
L.3387 F.172

TOTAL AREA
1.436 AC±

218°±

180°±

SEPTIC



907.10' TO A
STONE FOUND
(HELD FOR LINE
DIST.)

REBAR CAP SET
(F.C.C. 106)

S48°52'00"W 229.09'

REBAR CAP SET
(F.C.C. 106)

3/4" PIPE FD.
(HELD FOR
LINE DIST.)

LOT 21
SHEPHERD'S GLEN
P.B. 10 F.37

PLAT OF SURVEY
FOR
PROPERTY
3RD ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
#13205 TRIADELPHIA ROAD

448/98
2:30

APPLICATION

PERCOLATION TESTING

A _____

P 510192

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

DISTRICT _____

DATE 6/9/98

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 Tony Cummings

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION N/A LOT NO. _____

ROAD AND DESCRIPTION 13205 Triadelphia Road

TAX MAP 22 PARCEL # 11

SIZE OF LOT _____ TYPE BLDG. SFD
(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 #

Property stake

SOIL PROFILE

SOIL PROFILE

W
Neighbor's
Well

①/②/③/④

topsoil

read org
brn
cl inv

14 org
tar
si 1m
w/some
mica
flec
15% RY

Wheat - 000 / Drive

Ex. hand
dig well

REDCU

W Well Site

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

Triadelphia Road

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
6-18-98	1	5.0'S	2:46	2:49	2:49	2:52	3
		11.5'D	Visual	—	—	—	OK
	2	5.0'S	2:52	2:57	2:57	3:03	5
		11.5'D	Visual	—	—	—	OK
	3	12.0'D	Visual	—	—	—	OK
	4	5.0'S	3:08	3:11	3:11	3:15	4
		11.5'D	Visual	—	—	—	OK

REMARKS Well site OK as stated; ex. septic system to be abandoned

TYPE OF SOIL

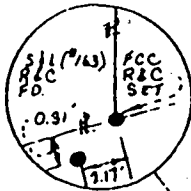
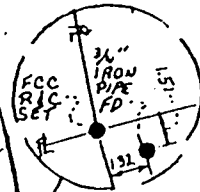
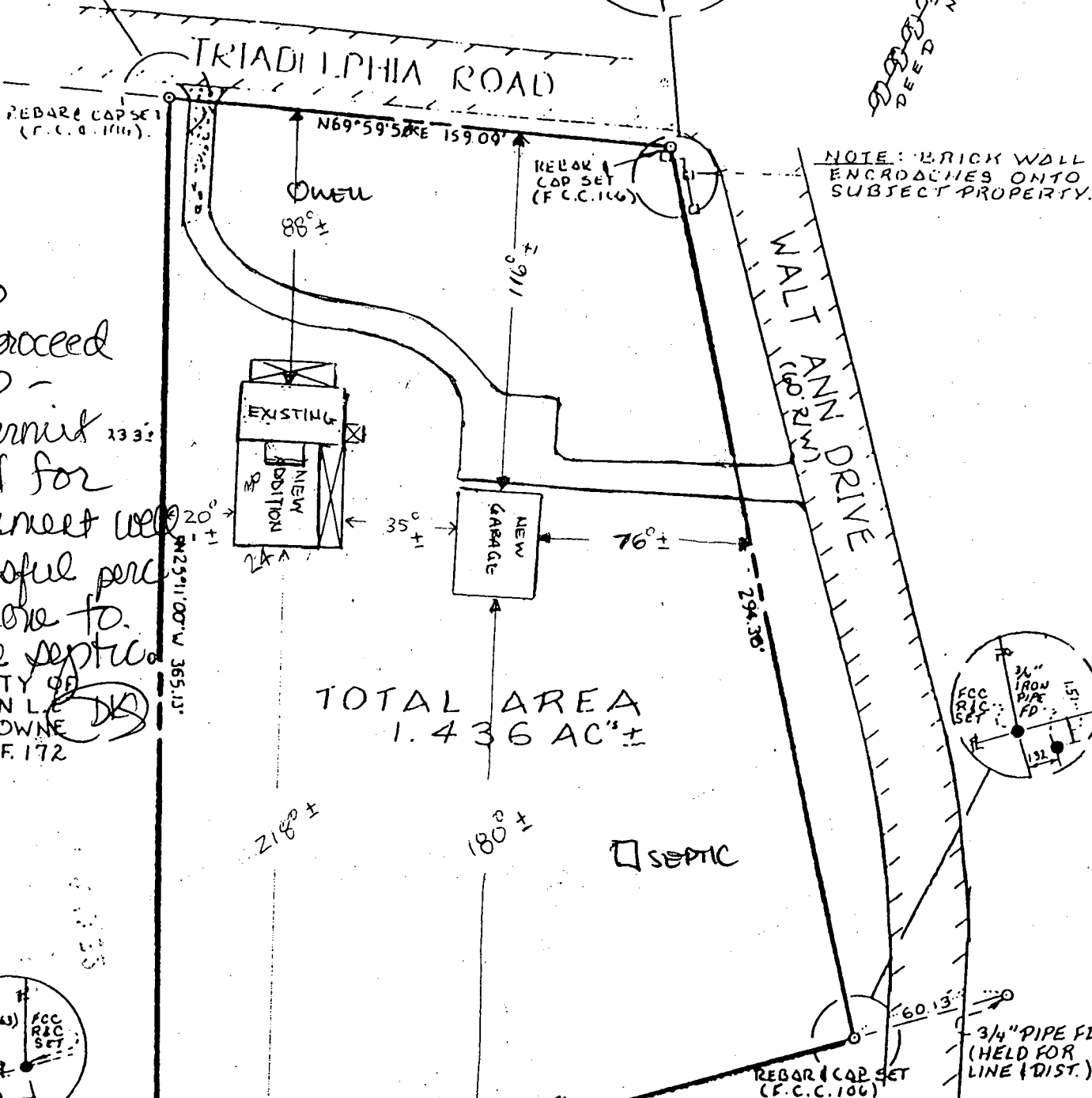
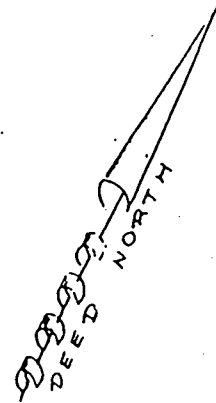
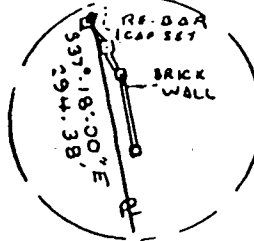
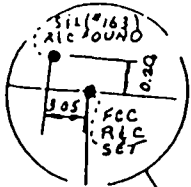
TESTED BY D. Soe

ALSO PRESENT T. Cummings, S. Carney

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 4 TRENCH WIDTH 2

INLET DEPTH 4.0 MAXIMUM BOTTOM DEPTH 8.0 SQ. FT./BEDROOM 180

DETAIL
SCALE: 1" = 30'

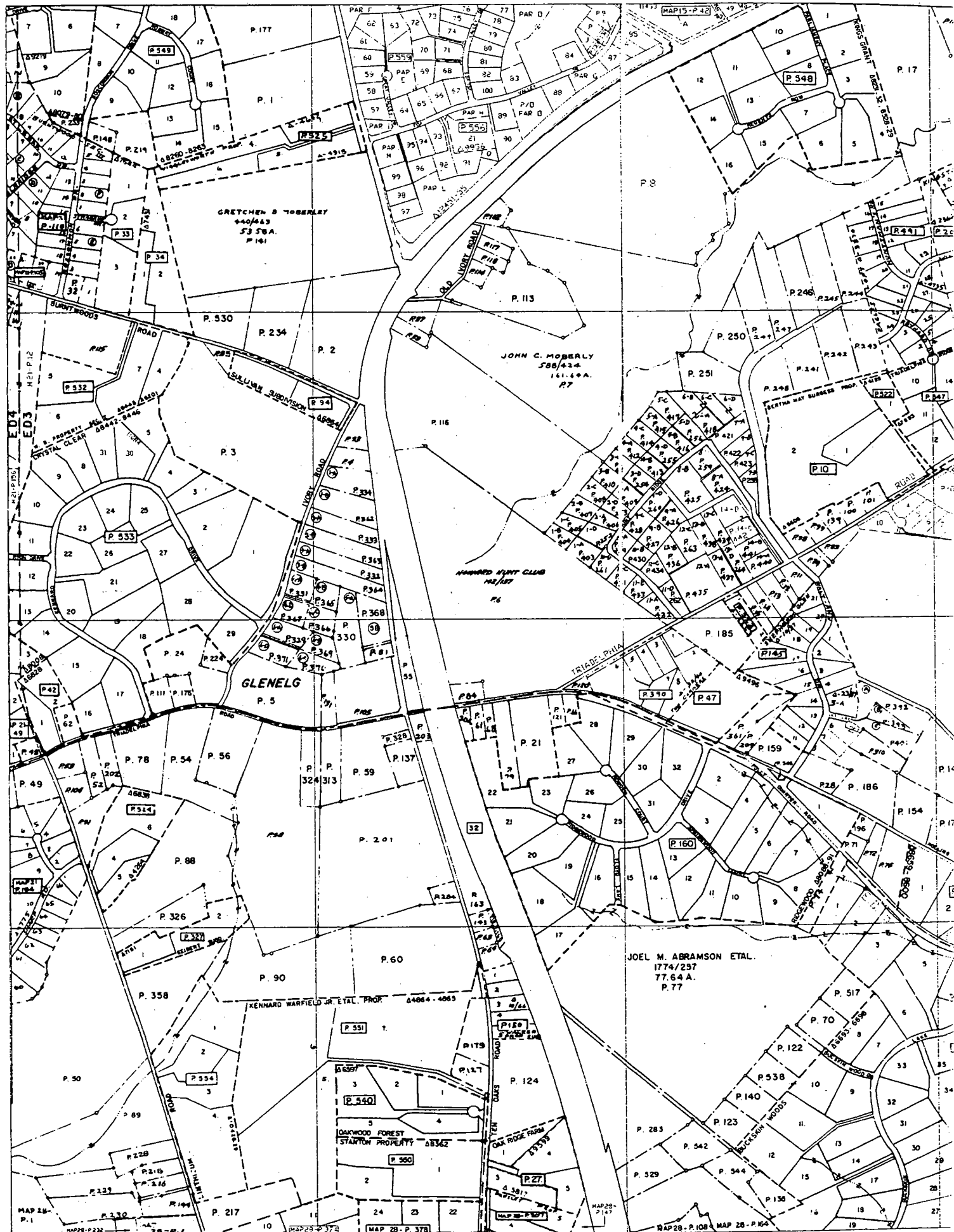


907.10' TO A
STONE FOUND
(HELD FOR LINE
DIST.)

LOT 21
SHEPERDS GLEN
P.B. 10 F. 37

PLAT OF SURVEY
FOR
PROPERTY
3RD ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
#13205 TRIADELPHIA ROAD

4/14/08
OK to proceed
w/ BP -
well permit
Graded for
replacement well
Successful perc
test done to
replace septic
PROPERTY OF
STEVEN L.
ANNE TOWNE
L.3387 F.172



page ①

To: The file - 13205 Philadelphia Rd
From: JKS

- I met w/ the builder, Sean Carney, 6/9/98.
 - He is proposing a considerable addition (incl. one bedroom).
 - No Health Department records for the property.
 - Reportedly hard dug well serves the property which Carney proposes to replace (appl. rec'd)
 - Carney paid for septic repair permit to upgrade the septic system.
 - Repair perc scheduled 6/18/98 10:00
- Per CONTRACTOR'S REQUEST, CHANGED TO 1130 (CD)

6/19/98 Well permit issued

POP signed

septic info faxed to K.S.K. Excavating

- ex septic system to be abandoned upon installation of replacement system.
- ex hard dug well to be abandoned at start of excavation by POP

* Mr. Carney is fully aware that no guarantee has been made ~~that~~ regarding the proposed addition (DK)

page ②

9/8/98 10:30± Received phone call from Sean Carney. He explained that they would probably be abandoning the hand dug well 9/8/98 or 9/9/98. I agreed to inspect 9/8/98.

Inspection made 9/8/98 @ 10:00 - it appeared to be a drilled case well within a 36" diameter well ring. I explained proper well abandonment - Mr. Cummings agreed to call when ready for inspection.

9/8/98 @ 8:00 pm ± Mr. Cummings called to inform me that they would not be ready 9/8/98 and that he would call when ready to abandon the well. ~~(S)~~

9/21/98 left message for Mr. Cummings ~~(S)~~

9/21/98 5:30 pm - Mr. Cummings left message - well not yet abandoned. He spoke to someone in our office week of 9/14/98 about potentially keeping the well. He said he will probably call back 9/23/98. ~~(S)~~