

W.P.T. - 10/16/84
anytime

APPROVED

10/9/84

RH P 34412

A 24595

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH

992-2330

03-304299

INDEXED

ELLICOTT CITY

DISTRICT 3rd

DATE 9/28/84

Fogle's Septic Cleaning

IS PERMITTED TO INSTALL ☒ ALTER ☐

ADDRESS 6430 Woodbine Road, Woodbine, MD 21797 PHONE 795-5670

SUBDIVISION Annandale ROAD 1719 Underwood Road LOT 6, Sec. 1

PROPERTY OWNER David L. Kasakitis

ADDRESS

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES ☐ NO ☒

SEPTIC TANK CAPACITY 1000 GALLONS NUMBER OF BEDROOMS 2

TRENCHES - 225 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet maximum 4 1/2 feet below original grade. Bottom maximum depth 9 1/2 feet below original grade. Effective area begins at 4 1/2 feet below original grade. 5 feet of stone below distribution pipe. LOCATION: Start first trench 120 feet from the front lot line and 40 feet from the left lot line as seen when facing the lot from Underwood Road. Run trenches along level ground toward left rear side of lot. NOTE: No trench to exceed 100 feet in length. If more than one trench used, a distribution box is required. Trenches to be installed on level ground. Call for inspection of trench before and after gravel is installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

PLANS APPROVED BY Craig Williams DATE 9/28/84

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: IF TRENCH IS USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH.

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 40 PVC OR ABS.

PERMIT VOID AFTER THREE 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 PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED

BLDG. PERMIT SIGNED
AND RETURNED 9/10/86

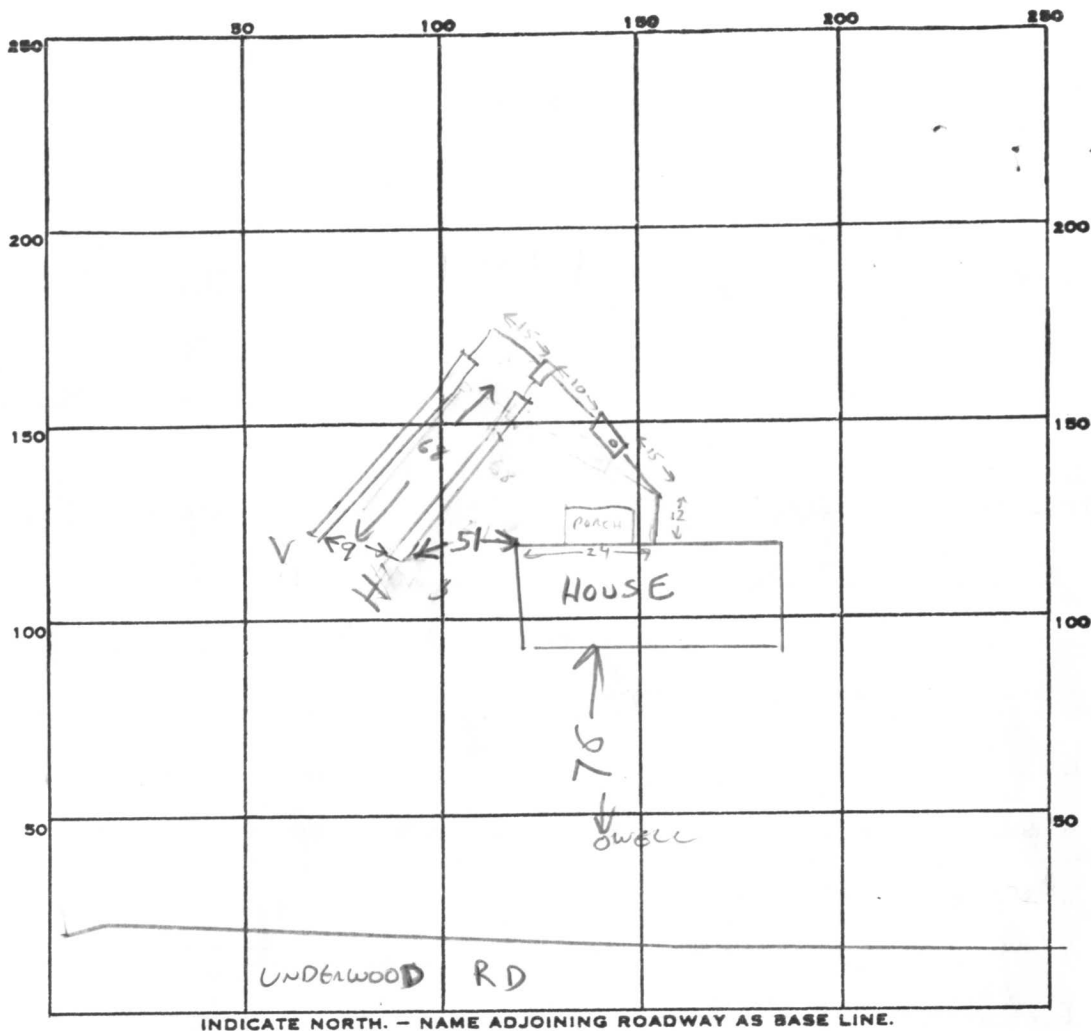
Seal # 69628

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

A 24595



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD _____

SEPTIC TANK, LEVEL _____

CLEANOUTS ST
OK

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH 9 1/2 FT. TRENCH WIDTH 2 FT.

GRAVEL DEPTH 5 FT IN. TOTAL LENGTH 136 FT.

NUMBER OF TRENCHES 2 (68+68) TOTAL BOTTOM AREA 680

SEEPAGE PITS, INSIDE DIAMETER _____ FT. DEPTH BELOW INLET _____ FT.

ABSORBENT AREA 680 SQ. FT.

REMARKS HOUSE SET TOO FAR BACK. SALVAGED AS MUCH OF PERM AREA

AS POSSIBLE WITH ADJUSTED LAYOUT. 10/9/84 CWL

10/9/84 - LOWER TRENCH OK TO COVER, UPPER TRENCH OK TO ADD GRAVEL. HOUSE SEWER LINE NEEDED. C.W.

10/9/84 - STONE ADDED TO HIGHER TRENCH PIPES INSTALLED
CLEANOUT INSTALLED

DATE SYSTEM APPROVED 10/9/84

INSPECTOR Raymond Hood

Preliminary
4-13-76
for 10,000
47

APPLICATION

A 24595

SEWAGE DISPOSAL TESTING

P _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DISTRICT 3rd

DATE 9/24/76

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

B.P. App. # 59950

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Fred James Pipes David L. Kasakitis

ADDRESS 13555 Old Frederick Rd. Sykesville, Md. 21784 PHONE _____

PROPERTY LOCATION:

SUBDIVISION Pipes Annandale LOT NO. 30 ⁶
~~30~~

ROAD AND DESCRIPTION 1719 Underwood Road

SIZE OF LOT 40,000 sq. ft. TYPE BLDG. 3 or 4

IF NOT SINGLE RESIDENCE DESCRIBE _____
NUMBER OF BEDROOMS
single family dwelling

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ Fred James Pipes

APPROVED BY R J O'Neil FOR DW-1 Tank DATE 8/16/76
(KIND OF SYSTEM)

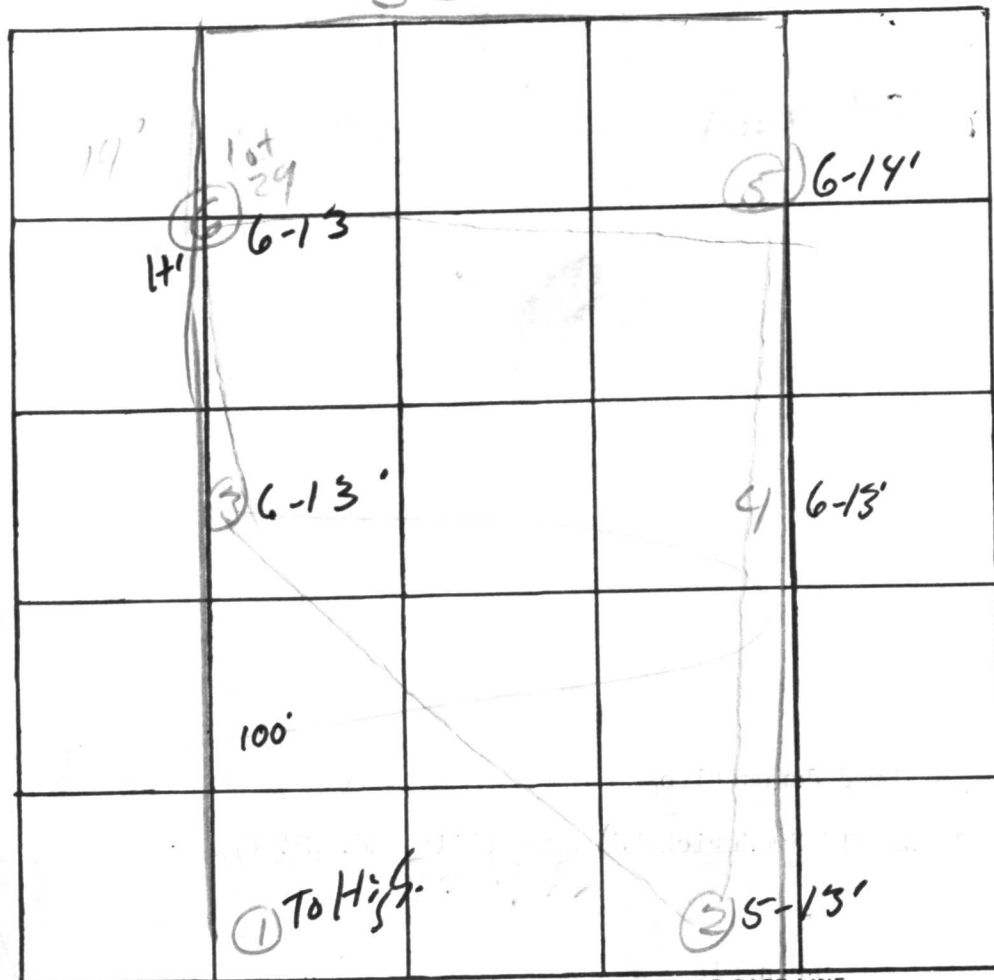
REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

BLDG. PERMIT SIGNED
AND RETURNED 7-5-84

THIS IS NOT A PERMIT



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

Underwood Rd

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
7/9/20	1	0.5'	6'	12'	6:00	50	
	2	5'	236	245	2:45	3:00	15
	d	13'	236	240	2:40	2:47	7
	3	6'	150	200	2:00	2:12	12
	d	13'	150	1:58	1:58	2:01	9
	5	6'	209	214	2:14	2:20	6
	d	14'	212	2:20	2:20	2:32	12
	d	0.500	13'	6:45	5:00	5:00	

REMARKS _____

TYPE OF SOIL _____

TESTED BY _____ ALSO PRESENT: _____

C1 7696	SEQUENCE NO. (OEP 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.	
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)				COUNTY NUMBER	A 24595
Date Received (OEP use only)	DATE WELL COMPLETED 042189	Depth of Well 85' (TO NEAREST FOOT)		PERMIT NO. FROM "PERMIT TO DRILL WELL" H0-81-0058	

OWNER last name Pipes	first name Fred	
STREET OR RFD Underwood Road		TOWN Sykesville
SUBDIVISION Annandale	SECTION 1	LOT 6

DESCRIPTION (Use additional sheets if needed)	FEET		Check if water bearing
	FROM	TO	
Top Soil	0	2	
Brown Shale	2	8	
Brown Sandstone	8	24	
GUANITE	24	56	
GUANITE	56	60	J30
GUANITE	60	85	

GROUTING RECORD	
WELL HAS BEEN GROUTED (Circle Appropriate Box)	
YES <input checked="" type="checkbox"/> Y	NO <input type="checkbox"/> N
TYPE OF GROUTING MATERIAL	
CEMENT <input checked="" type="checkbox"/> CM	BENTONITE CLAY <input type="checkbox"/> BC
NO. OF BAGS 5	NO. OF POUNDS 470
GALLONS OF WATER 30	
DEPTH OF GROUT SEAL (to nearest foot)	
from 0 ft. to 24 ft.	(enter 0 if from surface)

CASING RECORD		
casing types insert appropriate code below	<input checked="" type="checkbox"/> ST	<input type="checkbox"/> CO
	STEEL	CONCRETE
	<input type="checkbox"/> PL	<input type="checkbox"/> OT
	PLASTIC	OTHER
MAIN CASING TYPE	Nominal diameter top(main) casing (nearest inch)	Total depth of main casing (nearest foot)
<input checked="" type="checkbox"/> ST	6	28

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

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

EACH SCREEN	DEPTH (nearest ft.)	
	1	2
	H0	26
	85	

CIRCLE APPROPRIATE BOX	
<input checked="" type="checkbox"/> A	A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED
<input type="checkbox"/> E	ELECTRIC LOG OBTAINED
<input type="checkbox"/> P	TEST WELL CONVERTED TO PRODUCTION WELL

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED
IN ACCORDANCE WITH COMAR 10.17.13 "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 IDENT. NO.	308
DRILLERS SIGNATURE	<i>Stanley A. Bellinger</i>
(MUST MATCH SIGNATURE ON APPLICATION)	

SITE SUPERVISOR (sign of driller or journeyman responsible for sitework if different from permittee)	
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SLOT SIZE 1 2 3	
DIAMETER OF SCREEN	(NEAREST INCH)
from	to

GRAVEL PACK	
IF WELL DRILLED WAS FLOWING WELL CIRCLE BOX	<input type="checkbox"/> F

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)	
T	(E.R.O.S.)
70 <input type="checkbox"/>	72 <input type="checkbox"/>
TELESCOPE CASING	LOG INDICATOR
W Q 74 75 76 OTHER DATA	

C 3		
PUMPING TEST		
HOURS PUMPED (nearest hour)	3	
PUMPING RATE (gal. per min. to nearest gal.)	12	
METHOD USED TO MEASURE PUMPING RATE Bucket		
WATER LEVEL (distance from land surface)		
BEFORE PUMPING	30	
WHEN PUMPING	31	
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 checked="" type="checkbox"/> S submersible	

PUMP INSTALLED	
DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX)	YES <input checked="" type="checkbox"/> Y NO <input type="checkbox"/> N
IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE	
TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: (A, C, J, P, R, S, T, O))	
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	1 (nearest foot)

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)	

X well 110 30'	
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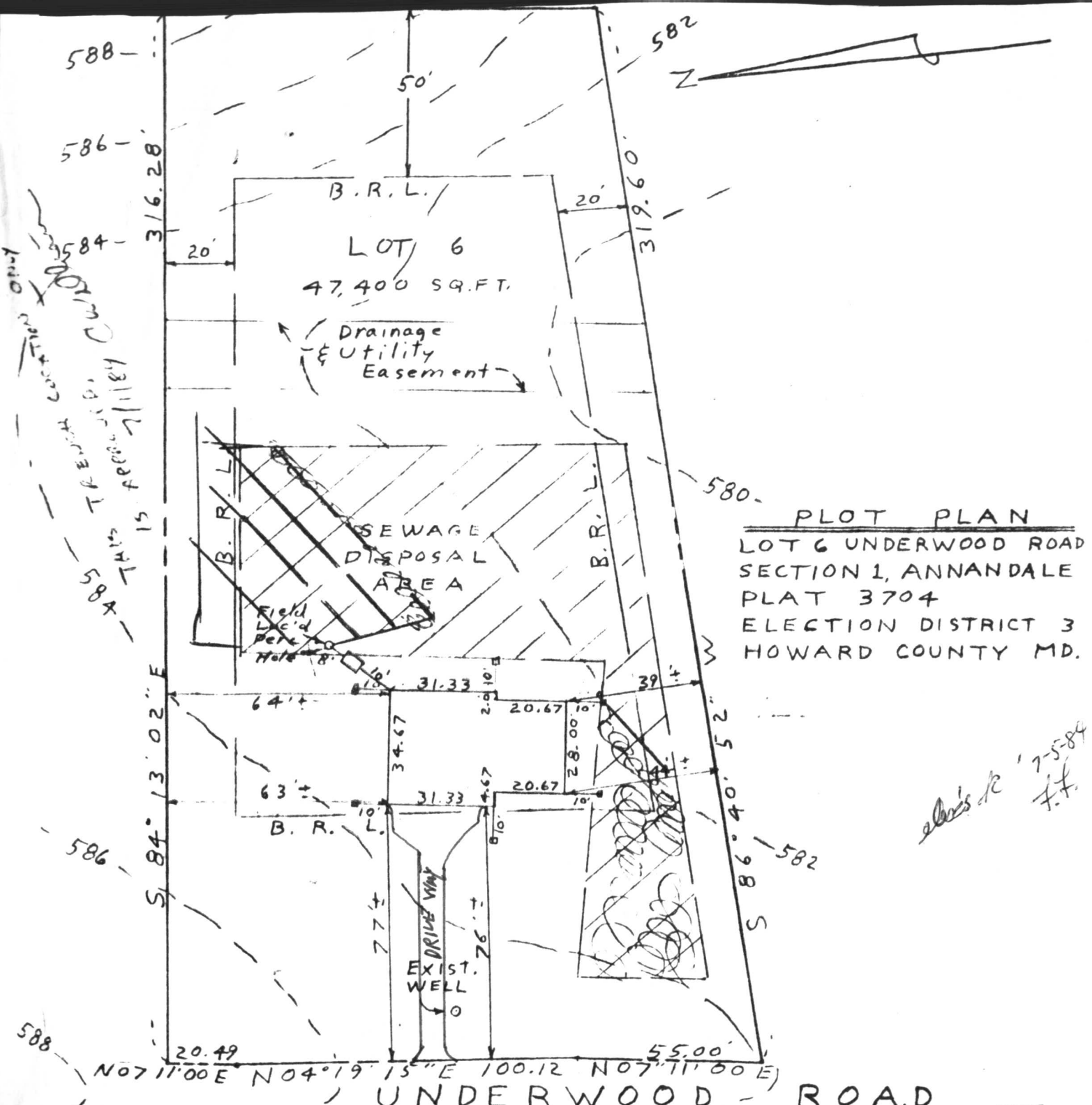
RECEIVED
HOWARD COUNTY
HEALTH DEPT.
MAY 31 11 41 AM '83
DIVISION OF
ENVIRONMENTAL
HEALTH

NAME: [REDACTED]
AGE: [REDACTED]
SEX: [REDACTED]
RACE: [REDACTED]
DOB: [REDACTED]
ADDRESS: [REDACTED]
CITY: [REDACTED]
STATE: [REDACTED]
ZIP: [REDACTED]

DATE OF VISIT: [REDACTED]
TIME OF VISIT: [REDACTED]
VISIT TYPE: [REDACTED]
VISIT PURPOSE: [REDACTED]
VISIT RESULT: [REDACTED]
VISIT COMMENTS: [REDACTED]

PHYSICIAN: [REDACTED]
NURSE: [REDACTED]
ASSISTANT: [REDACTED]
RECEIVED: [REDACTED]
DATE: [REDACTED]
TIME: [REDACTED]

NO. 81-0028
NO. 81-0028
NO. 81-0028



PLOT PLAN
 LOT 6 UNDERWOOD ROAD
 SECTION 1, ANNANDALE
 PLAT 3704
 ELECTION DISTRICT 3
 HOWARD COUNTY MD.

UNDERWOOD ROAD

EXIST. GRN AT DISTR. BOX
 INV. IN DISTR. BOX
 INV. OUT SEPTIC TANK
 INV. IN SEPTIC TANK
 INV. OUT DWELLING
 FIRST FLOOR ELEV.
 CELLAR ELEV.
 WELL ELEV.
 NO. OF BEDROOMS
 ACREAGE 47,400 SQ. FT.

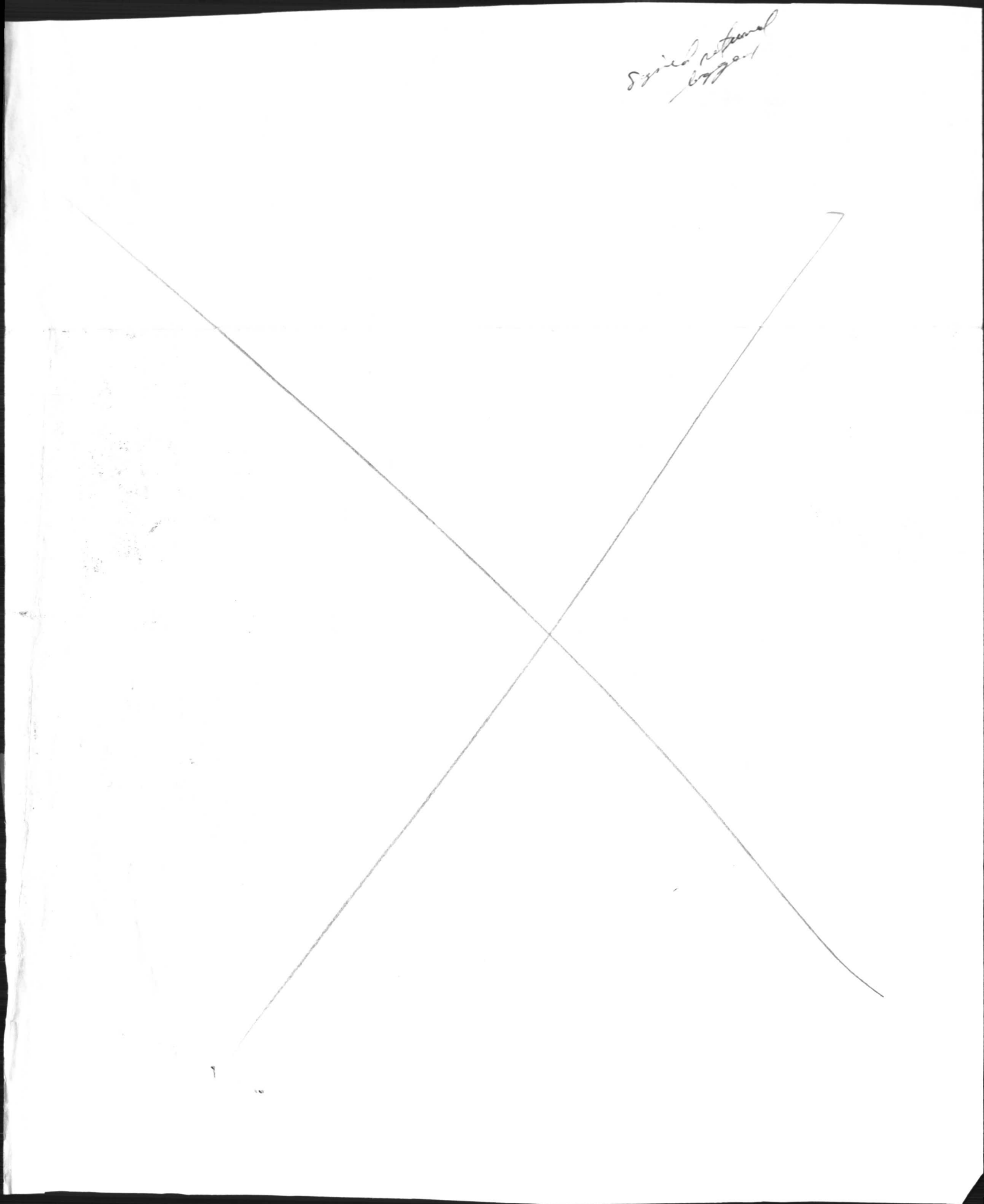
582.10
 578.60
 578.76
 579.16
 579.26
 587.00
 578.00
 584.90
 3

(EXISTING GRADE AT TRENCH 582)
 TRENCH INLET ELEVATION 577.5

ELEVATIONS
 ACTUAL + COLLECT
 E. Monaghan

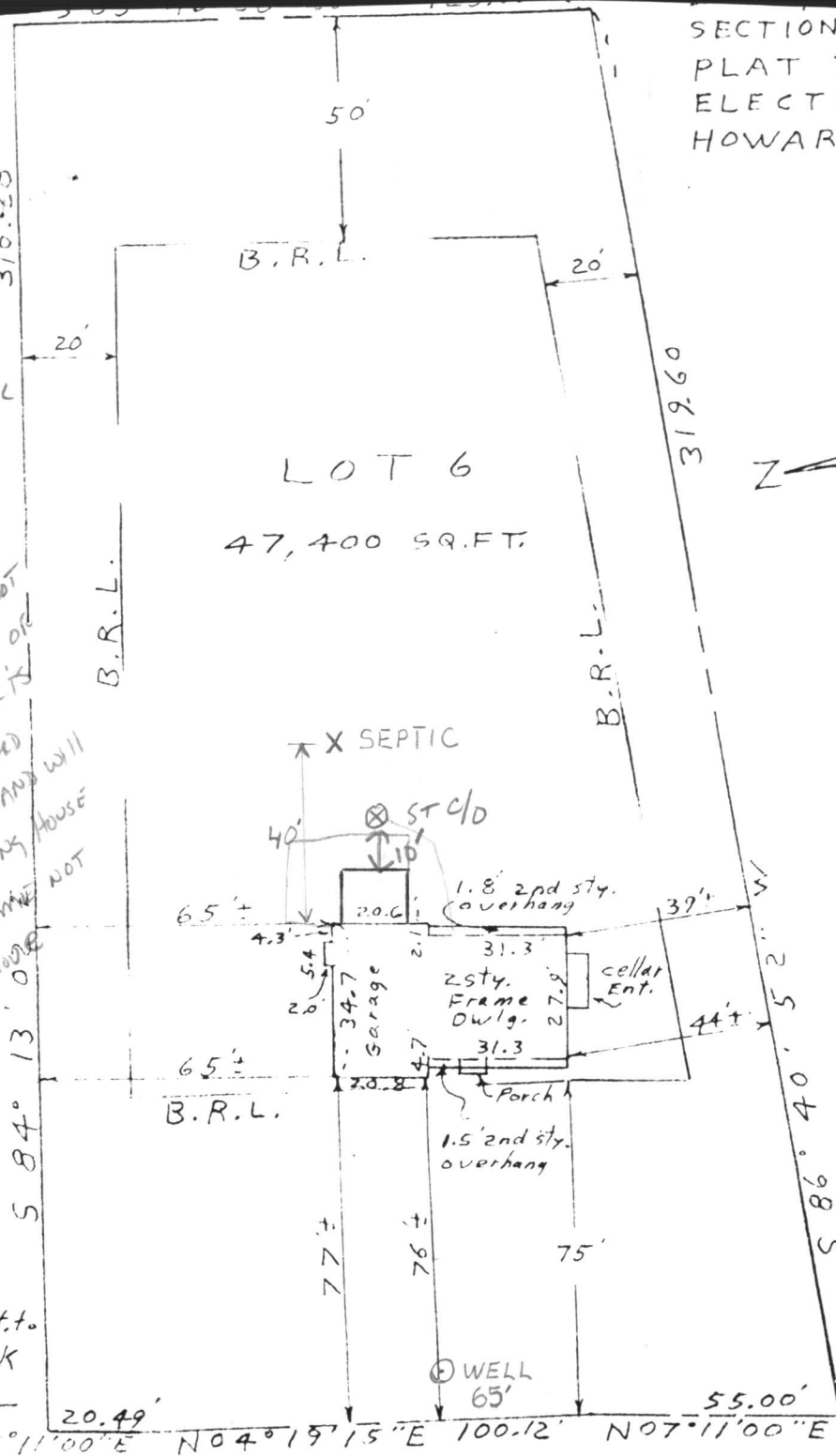


Spinal column
6792-1



SECTION 1, ANNANDALE
PLAT 3704
ELECTION DISTRICT 3
HOWARD COUNTY MD.

4-9-80
NO IMPACT ON WELL
NO IMPACT ON SEPTIC
FIELDS. TALK TO MR.
KASAKITS ON PHONE
DECK IS TO EXTEND TO
UPIN 2' OF C/O BUT NOT
OVER IT. HE IS AWARE OF
POTENTIAL PROBLEMS. DECK IS
ALSO TO EXTEND TOWARD
LEFT SIDE OF HOUSE AND WILL
NOT COVER PIPE LEAVING HOUSE
DECK TO BE WOOD FRAME NOT
CEMENT. OK TO APPROX
AS IS. S.A.M.



UNDERWOOD ROAD



THIS IS TO CERTIFY THAT WE HAVE MADE A
LOCATION SURVEY OF THE IMPROVEMENTS, AND
THAT THEY ARE LOCATED ON THE LOT AS SHOWN
HEREON.

RECEIVED
HOWARD COUNTY
HEALTH DEPT.

7 9 04 AM '87

DEPARTMENT OF
ENVIRONMENTAL
HEALTH

