

03-308231

10-15-85

approved

S. Abel

P 36105

A 30315

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH

992-2330

INDEXED

ELLICOTT CITY

DISTRICT 3rd

DATE 10/17/85

{ I.C.O.P.
Time expired }

Fogel Septic Service

IS PERMITTED TO INSTALL ☒ ALTER ☐

ADDRESS 1115 Streaker Road, Sykesville, Maryland 21784 PHONE 795-5670

SUBDIVISION Wynfield ROAD 2621 Wynfield Road LOT 10, Section 1

PROPERTY OWNER Guy Marasa

ADDRESS

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

GARBAGE GRINDER? YES ☐ NO ☒

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

DRYWELL OR DRYWELL AND TRENCH. - 125 sq. ft. per bedroom. Inlet 4 feet below original grade. Bottom maximum depth 10 feet below original grade. Effective area begins at 4 feet below original grade. NOTE: If trench is used to make up absorbent area, run the trench on level ground and leave a 5 foot earth buffer between drywell and trench. No trench is to exceed 100 feet in length. Trench inlet to be same as drywell, with 6 feet of stone below distribution pipe. LOCATION: Place the drywell 160 feet from the left lot line and 75 feet from the back lot line as seen when facing lot from the front of lot along Wynfield Road. Run trench from drywell after 5 ft. buffer on contour toward back lot line as seen from Wynfield Road. Drywell to be 15' x 15' square with 6 ft. of stone.

PLANS APPROVED BY S. Abel DATE 10/14/85

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.

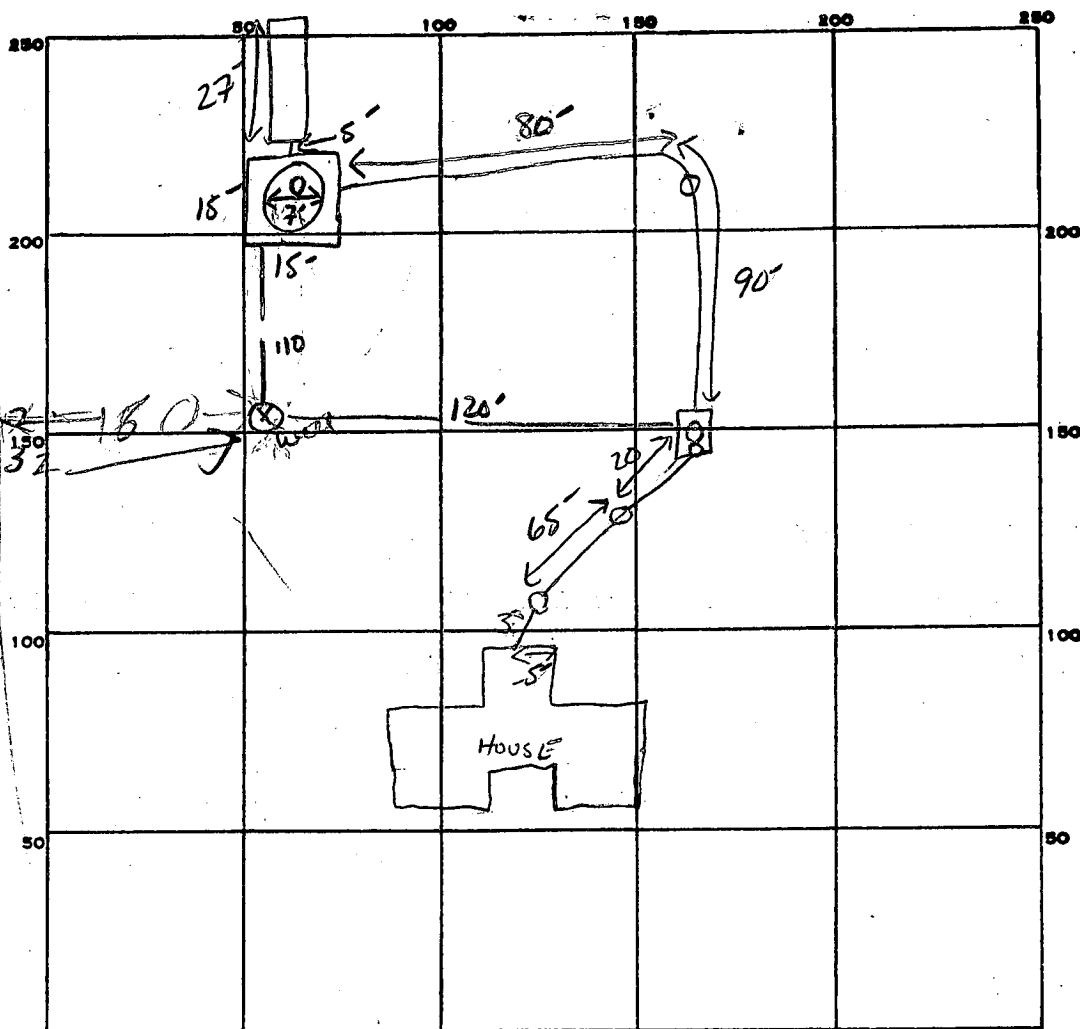
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

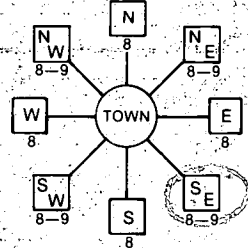
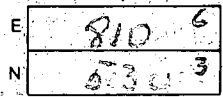
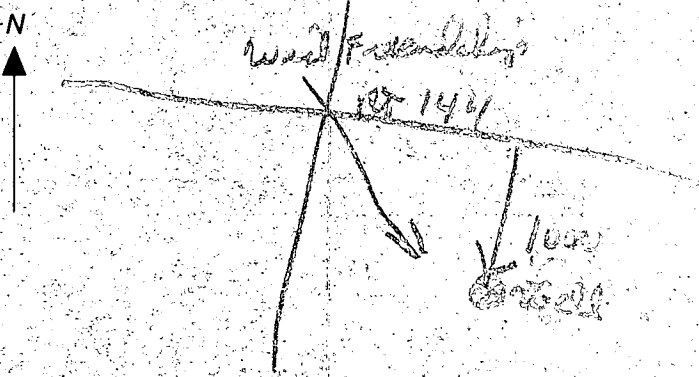
EH - 2-1082

A 30315



PERMIT CARD ✓

S. Aul

B 1 5177 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)	SEQUENCE NO. (OEP USE ONLY) 5/10/85 10:30 AM 4/17/85 7:00 PM please print or type.	STATE OF MARYLAND PERMIT TO DRILL WELL OEP PERMIT NUMBER 40-81-0939 fill in this form completely
Date Received 032285 OWNER INFORMATION MARASA GUY 15 Last Name 8 Owner 34 First Name 2401 VILLAGE RD 36 Street or RFD 55 54KFSVILLE 57 Town 70 State 72 Zip 76 MD 21784		B 3 LOCATION OF WELL R-35235 4000 8 COUNTY 21 WYNNFIELD 23 SUBDIVISION 42 SECTION 1 44 46 LOT 110 48 50 WYNNFIELD 52 NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) 2 73 76 77 78 MI
DRILLER INFORMATION Austin Garver Driller's Name 77 License No. 80 144 Keyser-Garver Well Drilling Inc. Firm Name 9125-B Bethel Rd. Fred. Address Austin Garver Signature 3-20-85 Date		B 4 1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  11 30 NEAR WHAT ROAD 144 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  34 37 DISTANCE FROM ROAD 1000 ENTER FT or MI FT 38 39
B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 2 8 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 800 14 20		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL Howard COUNTY NAME OEP SIGNATURE DATE ISSUED 032885 CO SIGNATURE Chris Wilson 9/28/85 EXP. DATE NORTH GRID 533000 50 55 EAST GRID 0816000 57 63
USE FOR WATER (CIRCLE APPROPRIATE BOX) ☒ HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) ☐ FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) ☐ INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) ☐ PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) ☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. Well 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE  DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 
APPROXIMATE DEPTH OF WELL 400 24 28 FEET APPROXIMATE DIAMETER OF WELL 6 30 32 INCH NEAREST INCH		METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jetted & DRIVEN 30 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary) 37 CABLE REVERSE-ROTARY Drive-POINT other
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) ☒ THIS WELL WILL NOT REPLACE AN EXISTING WELL ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY ☐ 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 (OEP USE ONLY) APPROP. PERMIT NUMBER 40-81-0939 FORCE CW WRITE INITIALS IN BOX PERMIT NO. 40-81-0939 67 68 69 70 71 72 73 74 75 76 77 78 79
SPECIAL CONDITIONS		

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

PUMP INSTALLATION

THE FOLLOWING STATEMENT MUST BE COMPLETED BY THE HOME OWNER
WHEN A PUMP IS INSTALLED BY A PERSON OTHER THAN THE WELL
DRILLER:

My well driller is not to install the pump for my water well, and I
hereby certify that it will be my responsibility to have a Pump Permit
taken out by a registered master plumber or certified pump installer.
It will be my responsibility to notify the Health Department before
and during the installation so that inspections can be made by their
representative. (Pursuant to Chapter XVII, of the Plumbing Code of
Howard County.)

Denton D Myerson
(Name)

~~7101~~ - Lot 10 Wynfield 1 Sec
(Address)

H0-81-0939
(OEP Well Permit Number)

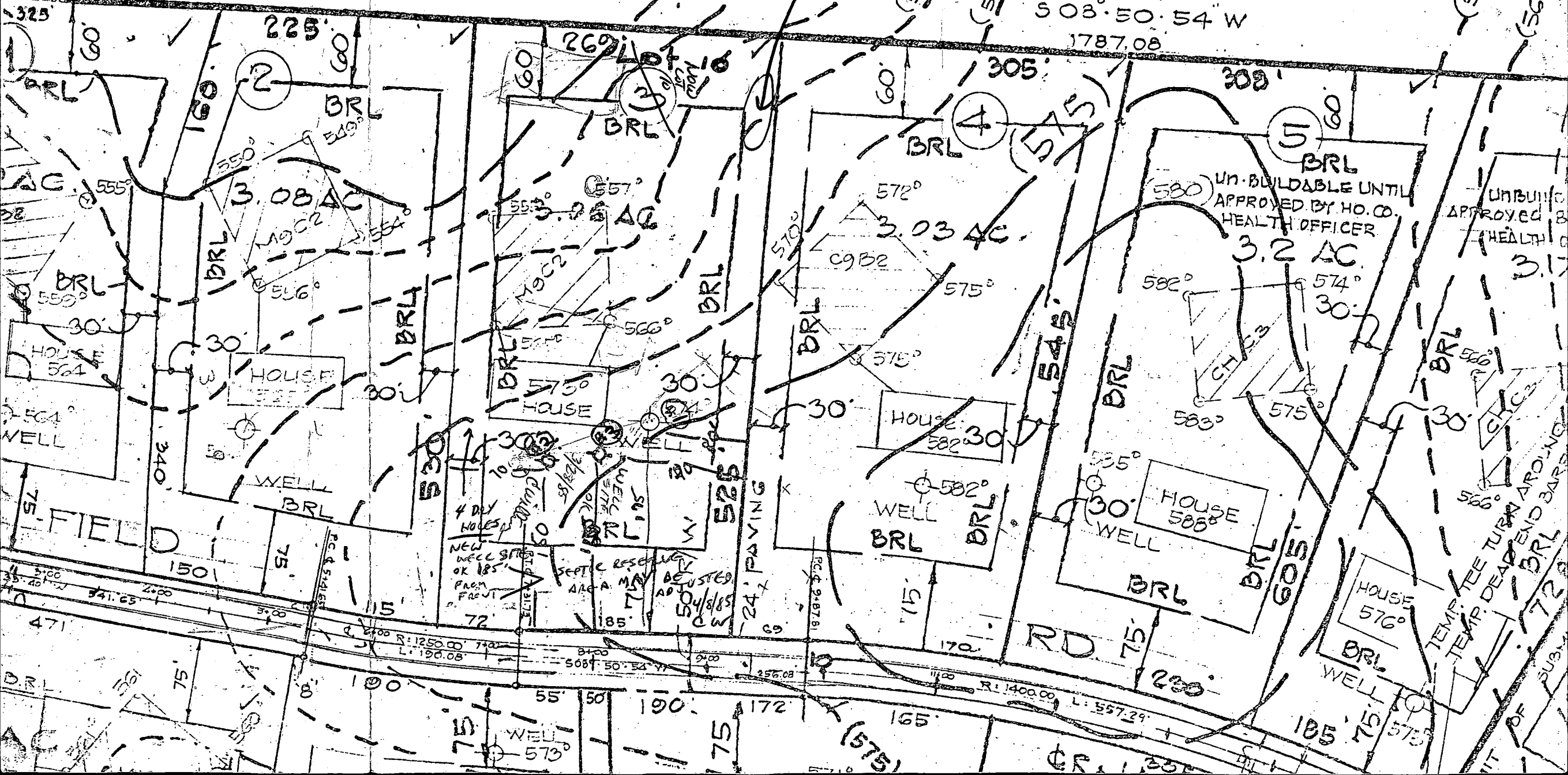
3-14-85
(Date)

R. 35735
\$ 40.00

DENING LINE

ALTERNATE WELL SITE OR
IF NO WATER AT
FRONT OF PROPERTY
14/85 PW
ZONED 'R'

508° 50' 54" W
1787.08



RELIMINARY

APPLICATION

ET

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 30315

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

P.O. BOX 476 ELLICOTT, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT 3rd.

DATE 10/31/79

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

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

PROPERTY OWNER Land Associates Guy Marasa

ADDRESS 3450 Ft. Meade Rd., No. 206, Laurel, Md. 20810 PHONE Tom Munz - 792-2242
or Ted Snovell - 265-6543

PROPERTY LOCATION:

SUBDIVISION Hoffman Property LOT NO. 3 10 sect 1 on FINAL

ROAD AND DESCRIPTION Route 144 2621 Wynfield Rd.

SIZE OF LOT 3 acres plus TYPE BLDG. 3 or 4 Bedrooms

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.

SIGNATURE OF APPLICANT /s/ Ted Snovell for Land Associates

APPROVED BY B.H. & D.W.M. FOR DRYWELL DATE 12/27/79

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING OK 11/6/79 RH B.P. # 64890

Copy given to Jim L

signed 5-31-85

AND RETURNED

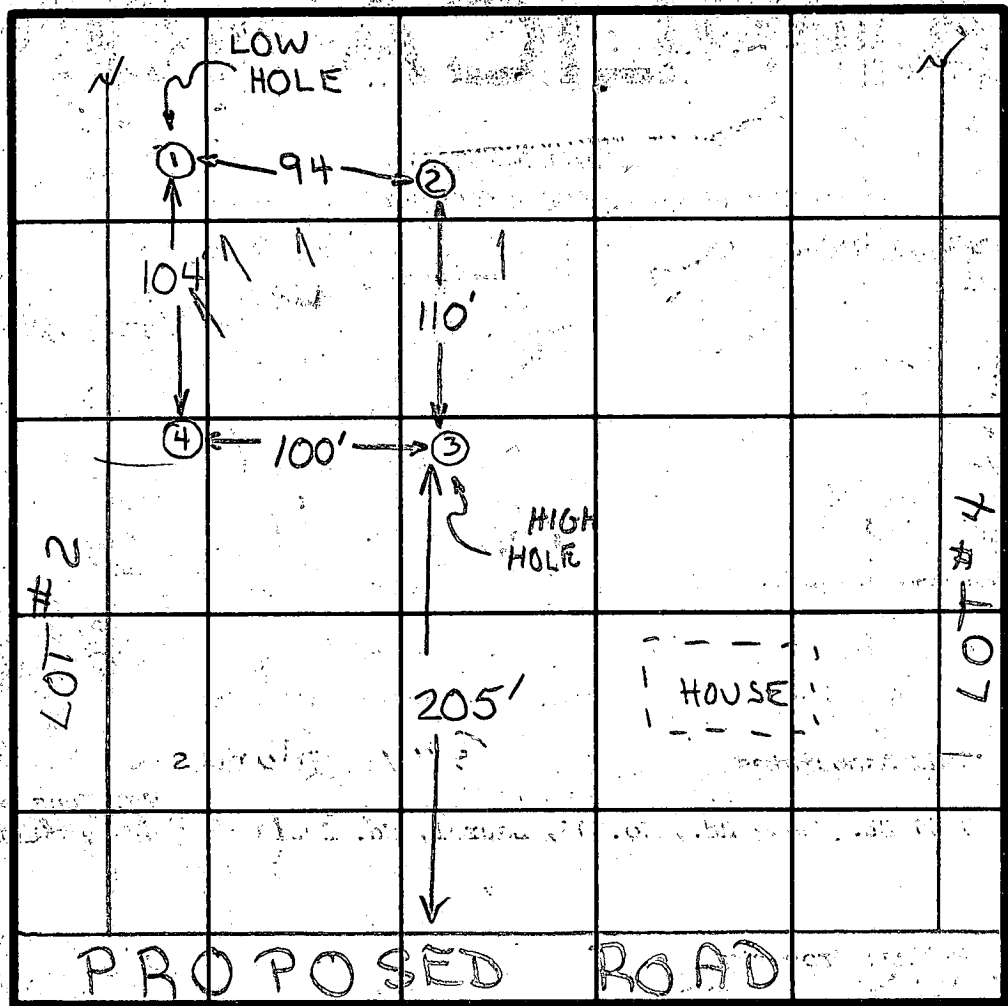
THIS IS NOT A PERMIT

3

LOT 3

SLOPE BETWEEN H1 & L0 APPROX 5%

SOIL PROFILE
0
3'
SANDY CLAY
SANDY MICA SMALL ROCK



TO RT #114

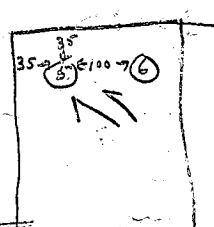
PROPOSED ROAD

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

5+6

SANDY CLAY
4'
MICA SANDY LOAM
SCATTERED
SMALL ROCK
13'

LOCATION



DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11/6/79	1S	4'	1:12	1:15	1:15	1:19	4
	1D	14'	1:10	1:13	1:13	1:16	3
	2S	4 1/2	1:25	1:28	1:28	1:33	5
	2D	15 1/2	1:26	1:41	1:41	1:57	16
	3S	4 1/2	1:41	1:43	1:43	1:47	4
	3D	14 1/2	1:40	1:45	1:45	1:52	7
	4V	14	ALL	SANDY			✓
ADDITIONAL TESTS		TO PROVE PERC AREA TO LEFT REAR OF LOT		TO CREATE ADDITIONAL		ROOM FOR WELL	
5/2/85	5	4/13	VISUAL SAND LOAM BELOW 4'				
5/2/85	6	4/13	VISUAL SAND LOAM BELOW 4'				

inlet 4'

7 MIN AVG

REMARKS RETEST 5/2/85 BY CWILLIAM - EXCAVATION - SKIP

TYPE OF SOIL HOLE #3 & 4 ALL SANDY LOAM

TESTED BY R.D. & R.H.

ALSO PRESENT JIM DUSZYNSKI

WYNFIELD RD

W. S. HERB
392-569
ZONED

