

2/17/89 AM
HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

PERMIT
SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

DISTRICT 3rd

DATE 4/30/87

DATE SYSTEM APPROVED 2/17/89

INSPECTOR CW

INDEXED
03-289494

Lendrim Contracting, Inc.

IS PERMITTED TO INSTALL X ALTER

ADDRESS 14010 Forsythe Road, Sykesville, MD 21784 PHONE 442-2416

SUBDIVISION Berndell Estates ROAD 820 WINDRIVER Drive LOT 16

PROPERTY OWNER Henry R. STIRN

ADDRESS

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

GARBAGE GRINDER? YES NO X

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 200 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 9 feet below original grade. Effective area begins at 4 feet below original grade. 5 feet of stone below distribution pipe.

LOCATION - Start the first trench 200 feet from the center of the front access easement and 100 feet from the right lot line which borders Lot 2. Run trenches along contour toward the access easement.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. off/88

PLANS APPROVED BY C. Williams

DATE 4/28/87

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.

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 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 PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED.

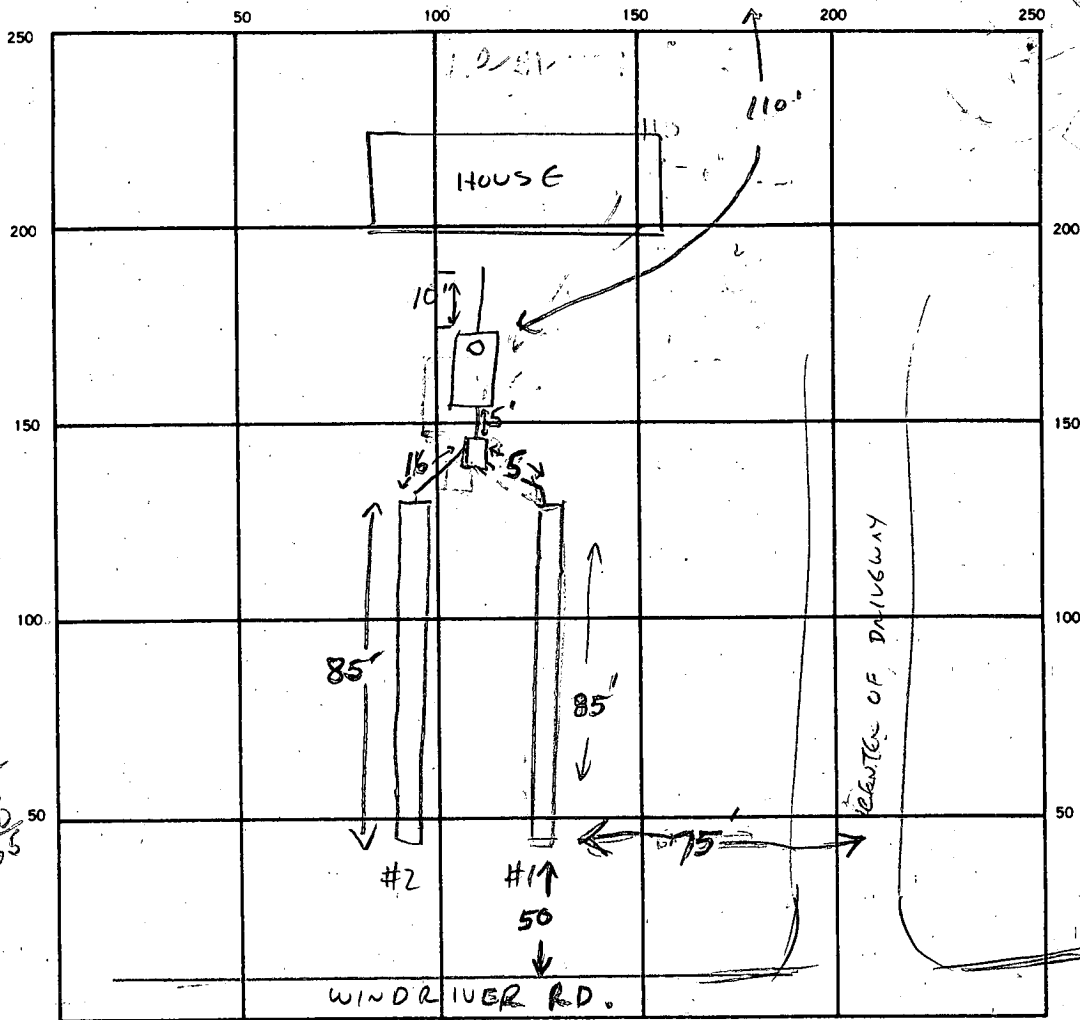
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES.

***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT**

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1186

A 30519



INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.

SEPTIC TANK. LEVEL ✓ 1500 gal CLEANOUTS 1ST

DISTRIBUTION BOX. LEVEL ✓

DRAIN FIELD TILE FIELD. DEPTH 9 10 FT. TRENCH WIDTH 2 FT. INLET DEPTH 5 4 FT.

EFFECTIVE GRAVEL DEPTH 4 6 FT. TOTAL LENGTH 85 85 FT.

NUMBER OF TRENCHES 2 ONE SIDEWALL BOTTOM AREA 340 510 SQ. FT.

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

ABSORBENT AREA 850 SQ. FT.

REMARKS 6/18/87 1ST TRENCH OK TO ADD G. & V. C.W. 6/18/87 not ready JS

6/18/87 OK TO ADD STONE TO BOTH TRENCHES SA. 6-22-87 OK to cover all trenches with paper and backfill JEN. 6-22-87 Needs house & house connection. OK to backfill trenches JEN

7/20/88 NOT CONNECTED RIX 2/17/89 HOUSE CONNECTION VERIFIED BY FLUSHING,

SEPTIC CLEANOUT WAS BURIED, OWNER TO CONTACT FOR INSP. WHEN CLEANOUT IS EXTENDED. C.W.

DATE SYSTEM APPROVED 2/17/89 INSPECTOR C. Williams

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

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

A 30519

P _____

DISTRICT 3rd

DATE Feb. 5, 1980

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 Henry R. & Lillian C. Stirn

ADDRESS 3503 Templar Road, Randallstown, Md. 21133 PHONE 655-7112

PROPERTY LOCATION:

SUBDIVISION Berndell Estates LOT NO. 16

ROAD AND DESCRIPTION Off River Road & Route 32

SIZE OF LOT 5.005 acres 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 _____

APPROVED BY C.B. Starker FOR Per. Well & for DATE 7/25/80
Per. Well + Trench

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING Approved in new areas of tests.

Send example of house plans to Mrs. & Mr. Stirn

@ above address.

BLDG. PERMIT SIGNED
AND RETURNED 10/8/80
BP 14976

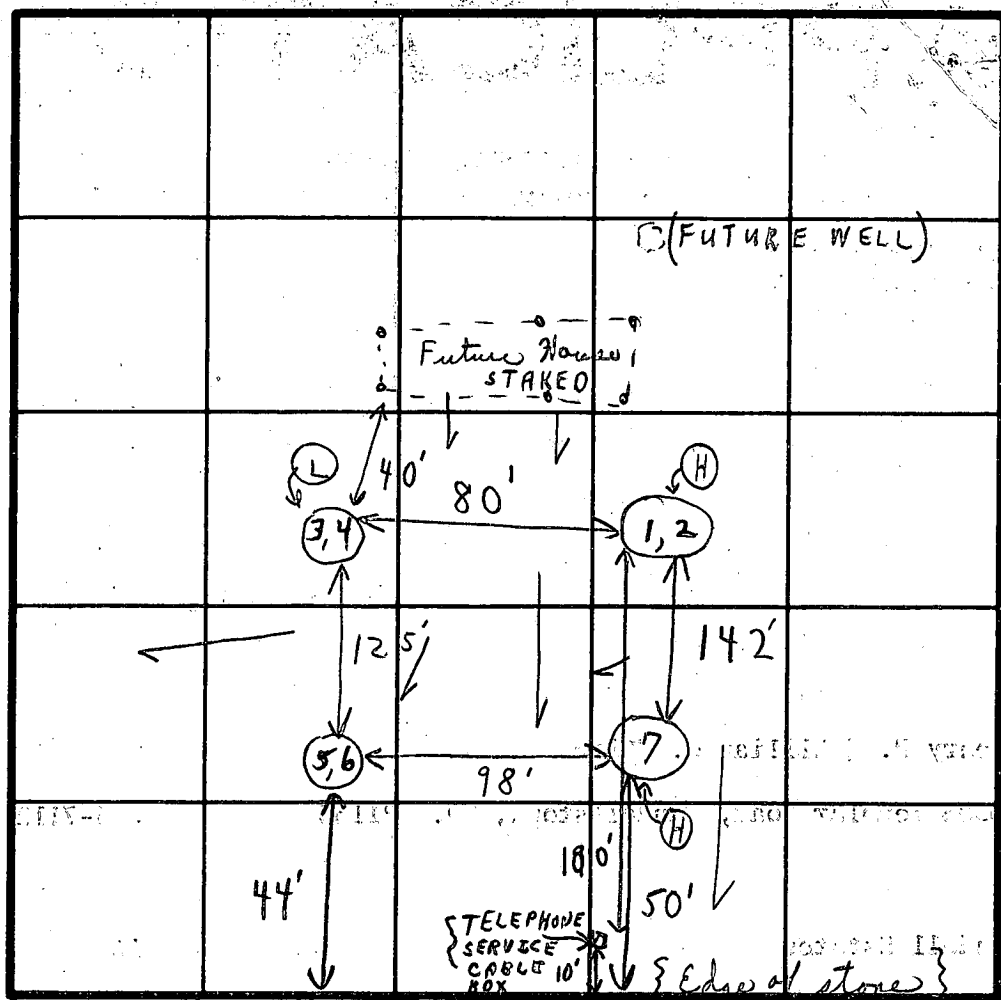
THIS IS NOT A PERMIT 84

#16

Q

SEE
EACH
HOLE
BELOW

{ FIELD
SHEET }



common R/w

SOIL PROFILE

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
7/25/80	1	4'	10:00	10:09	10:09	10:30	21 min
	(H) 2	12'-10"	10:00	10:04	10:04	10:08	4 min
	3	4 1/2'	10:13	10:24	10:24	10:46	22 min
	(L) 4	14'	10:13	10:16	10:16	10:19	3 min
	5 A	5'	10:47	10: X	11:12 little piece X: X	1: X	XX
	(L) 6	14'	10:47	10:52	10:52	11:02	10 min
	7		Visual		5 1/2' - 6' 5 6" - 13'	LOAM	
	5B	6'	11:20	11:22	11:22	11:26	4 min
						6	64
					(COPY	GIVEN	MRS.

11m
145 sq. ft.
per bedroom
STERN)

REMARKS

TESTS IN OPEN FIELD

TYPE OF SOIL

TESTED BY

C. B. S.

ALSO PRESENT

LENDRIM

MRS. STIRM & REL

APPLICATION

A 20477

SEWAGE DISPOSAL TESTING

P _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

DISTRICT 3

P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DATE 8/8/74

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 L. A. M. INC.

ADDRESS (Mrs. Lillian E. Podell) PHONE Any questions call:

Joan Olson
465-7700, Ext. 26

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 16

ROAD AND DESCRIPTION Route 32 & River Road

SIZE OF LOT 5.005 acres TYPE BLDG. 3 or 4

IF NOT SINGLE RESIDENCE DESCRIBE _____
NUMBER OF BEDROOMS
(Single Fmly. Dwllg.)

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

SIGNATURE OF APPLICANT /s/ Mrs. Lillian E. Podell

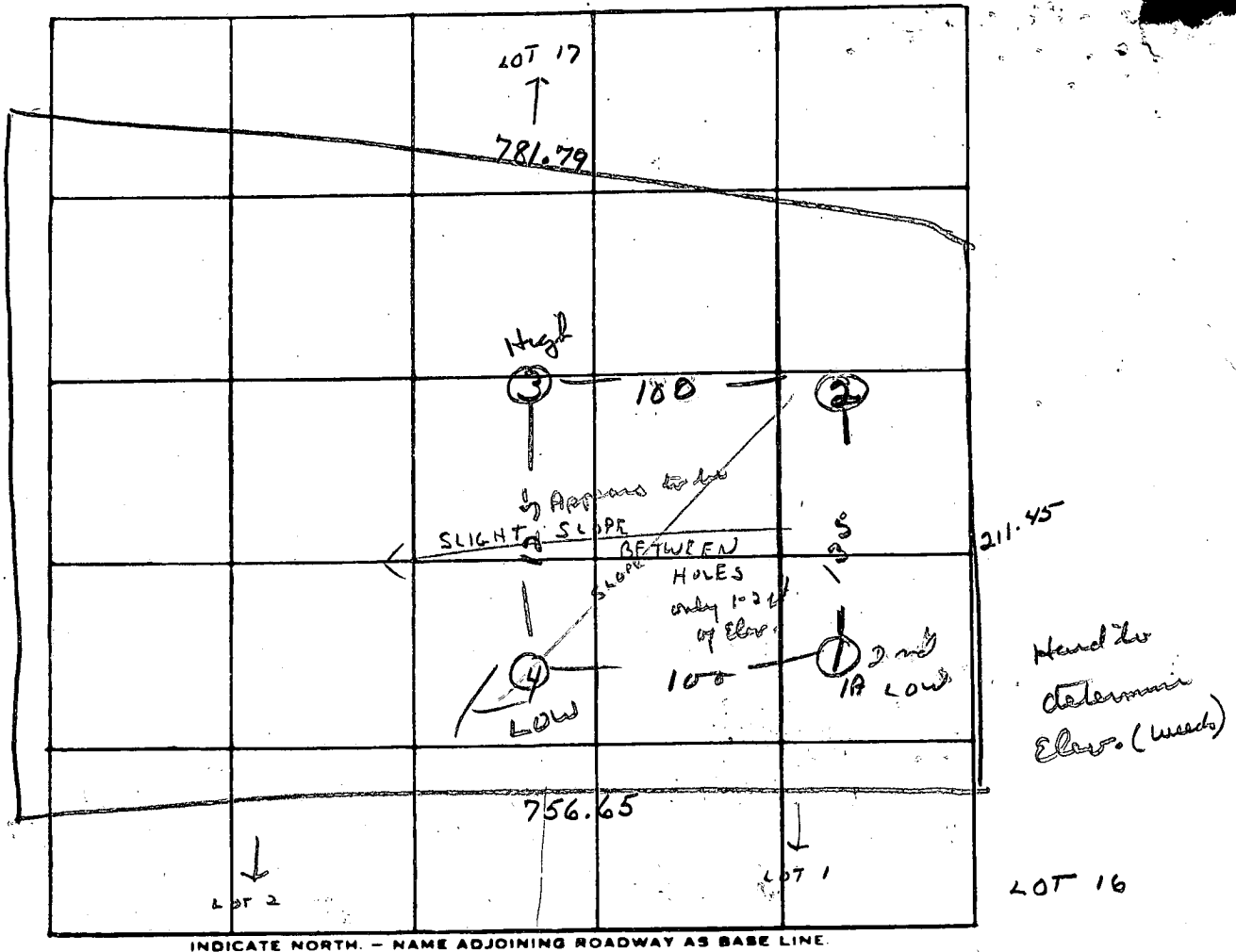
APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

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

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



RIVER Rd

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
9/5/74	1	12 1/2'	1 58	—	2 01	3 min	
	1A	4 1/2'	1 58	2 00	2 00	2 02	2 min
	2	11 1/2'	Sandy soil after 4 1/2 ft.				
	3	12 1/2'	2 12	2 19	2 19	2 27	8 min
	3A	4 1/2'	2 12	—	—	2 16	4 min
	4	12 1/2'	2 30	2 34	2 34	2 42	8 min
	4	3 1/2'	2 30	2 32	2 32	2 36	4 min

REMARKS

Any hole can be used for system 3 appears to be best

hard soil

TYPE OF SOIL

TESTED BY

R. Torre

ALSO PRESENT:

0772

SEQUENCE NO.
(OEP USE ONLY)STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPETHIS REPORT MUST BE SUBMITTED WITHIN
45 DAYS AFTER WELL IS COMPLETED.COUNTY
NUMBER

A30519

DATE RECEIVED

DATE WELL COMPLETED

8 13

071383

Depth of Well

22 180 26
(TO NEAREST FOOT)PERMIT NO.
FROM "PERMIT TO DRILL WELL"40-81-0157
28 29 30 31 32 33 34 35 36 37

OWNER

Stirn

Henry R

STREET OR RFD

last name River Road

TOWN

Sykesville

SUBDIVISION

Berndell Estates

SECTION

LOT

16

WELL LOG

Not required for driven wells

STATE THE KIND OF FORMATIONS
PENETRATED, THEIR COLOR, DEPTH,
THICKNESS AND IF WATER BEARINGDESCRIPTION (Use
additional sheets if needed)FEET
FROM TOCheck
if water
bearing

TOP SOIL

0 2

SHALE

2 10

MICA

10 30

SAND STONE

30 40

MICA

40 50

FLINT

50 55

MICA

55 75

MICA QUARTZ

75 80

MICA

80 180

GROUTING RECORD

WELL HAS BEEN GROUTED

(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL

CEMENT ☒ MBENTONITE CLAY ☒ B C

NO. OF BAGS 13

NO. OF POUNDS 1300

GALLONS OF WATER 70

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 30 ft.
(enter 0 if from surface)casing
types
insert
appropriate
code
below

CASING RECORD

ST CO
STEEL CONCRETE
PL OT
PLASTIC OTHERMAIN Nominal diameter Total depth
CASING top (main) casing of main casing
TYPE (nearest inch) (nearest foot)

5 7 6 50 60 61 63 64 66 70

OTHER CASING (if used)

diameter depth (feet)
inch from toscreen type
or open holeinsert
appropriate
code
below

SCREEN RECORD

ST BR HO
STEEL BRASS OPEN
PL BRONZE HOLE
PLASTIC OTHER

C 2

DEPTH (nearest ft.)
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21
H O 4 8 1 9 0SLOT SIZE 1 2 3
DIAMETER OF SCREEN (NEAREST INCH)
56 60GRAVEL PACK
IF WELL DRILLED WAS
FLOWING WELL INSERT
F IN BOX 68OEP USE ONLY
(NOT TO BE FILLED IN BY DRILLER)T (E.R.O.S.) WQ
70 72 74 75 76
TELESCOPE LOG OTHER DATA
CASING INDICATOR

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min. to nearest gal.) 6

METHOD USED TO MEASURE PUMPING RATE BUCKET

WATER LEVEL (distance from land surface)

BEFORE PUMPING 42

WHEN PUMPING 76

TYPE OF PUMP USED (for test)

A air P piston T turbine
C centrifugal R rotary O other (describe below)
J jet S submersible

PUMP INSTALLED

DRILLER WILL INSTALL PUMP YES NO
(CIRCLE) (YES or NO)
IF DRILLER INSTALLS PUMP, THIS SECTION
MUST BE COMPLETED FOR ALL WELLS
EXCEPT HOME USE
TYPE OF PUMP INSTALLED
PLACE (A,C,J,P,R,S,T,O)
IN BOX - SEE ABOVE:CAPACITY:
GALLONS PER MINUTE (to nearest gallon) 31 35
PUMP HORSE POWER 37 41
PUMP COLUMN LENGTH (nearest ft.) 43 47CASING HEIGHT (circle appropriate box
and enter casing height)
+ above } LAND SURFACE
- below } (nearest foot)
49 50 51LOCATION 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)WELL 60'
RIVER RD.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
WELLI 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. 40

DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)SITE SUPERVISOR (sign. of driller or journeyman
responsible for sitework if different from permittee)

FIELD DATA SHEET

HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-0157

River Road

Lot 16 Block — Plat — Sec. —

Owner Henry R. Stiry

Distance of measuring point (M.P.) above ground 18"

Distance of measuring point (M.P.) above ground 18"

Static water level (S.W.L.) below M.P. 4/27

1. High rate pumping -- reservoir drawdown

Pumping rate 10. G.P.M

Total time 5:50 to reach pumping water level 76' ft. below M.P.

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

[illegible]

0622

SEQUENCE NO.
(OEP USE ONLY)pump test
3 hrs
6:00 am
7/13/83STATE OF MARYLAND
PERMIT TO DRILL WELL

please print or type

OEP PERMIT NUMBER

HO-81-0157

fill in this form completely

Date Received

7/13/83 10:00

(OEP Use Only)

OWNER INFORMATION

STIRN HENRY R

Last Name 15

Owner

34 Name

35103 TEMPLAR ROAD

36

Street or RFD

55

RANDALLS TOWN MD 21133

Town 57

State

76 Zip

B 1 Continued

DRILLER INFORMATION

GEORGE F. EASTERDAY

40

Driller's Name

77 License No. 80

L.F. EASTERDAY, INC.

Firm Name

6205 BROWN CHURCH RD., MT. AIRY, MD.

Address

George F. Easterday

Signature

4/20/83

Date

B 2 WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.)

5

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY)

500

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)

APPROXIMATE DEPTH OF WELL 150 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH

METHOD OF DRILLING (circle one)

- BORED (OR AUGERED) JETTED JETTED & DRIVEN
- ☒ AIR ROTARY AIR PERCUSSION ROTARY (HYDRAULIC ROTARY)
- ☐ CABLE REVERSE ROTARY DRIVE POINT
- other

REPLACEMENT OR DEEPEINED WELLS
(CIRCLE APPROPRIATE BOX)

- ☒ THIS WELL WILL NOT REPLACE AN EXISTING WELL
THIS WELL WILL REPLACE A WELL THAT WILL BE
ABANDONED AND SEALED
- ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE USED
AS A STANDBY
- ☐ THIS WELL WILL DEEPEIN AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED
(IF AVAILABLE) 41

Not to be filled in by driller (OEP USE ONLY)

APPROX. PERMIT NUMBER

GAP

FORCE ☒ INITIALS
IN BOX

PERMIT No. HO-81-0157

B 5 SPECIAL CONDITIONS 8-63

B 3 LOCATION OF WELL

COUNTY HOWARD

SUBDIVISION BERNDEN EST.

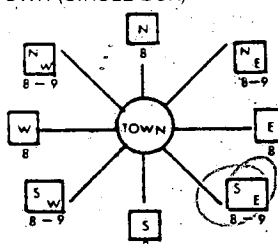
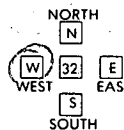
SECTION

LOT

NEAREST TOWN SYKEVILLE

MILES FROM TOWN (enter 0 if in town)

3

B 4 DIRECTION OF WELL FROM
TOWN (CIRCLE BOX)River Rd.
NEAR WHAT ROADON WHICH SIDE OF ROAD
(CIRCLE APPROPRIATE BOX)DISTANCE FROM ROAD
(CIRCLE APPROPRIATE BOX)SHOW MAJOR FEATURES OF
BOX & LOCATE WELL
WITH AN X

SOURCES OF DRILLING WATER

-
-
-

WRITE THE BOX NUMBER
FROM THE MAP HERE

E	810 4
N	550 2

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN
RELATION TO NEARBY TOWNS AND ROADS AND GIVE
DISTANCE FROM WELL TO NEAREST ROAD JUNCTION

B 4

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVALHOWARD
COUNTY NAMEA30519
COUNTY NO.OEP
SIGNATURE

DATE ISSUED

061383

CO SIGNATURE

STATE HEALTH
CIRCLE BOX☒NORTH
GRID

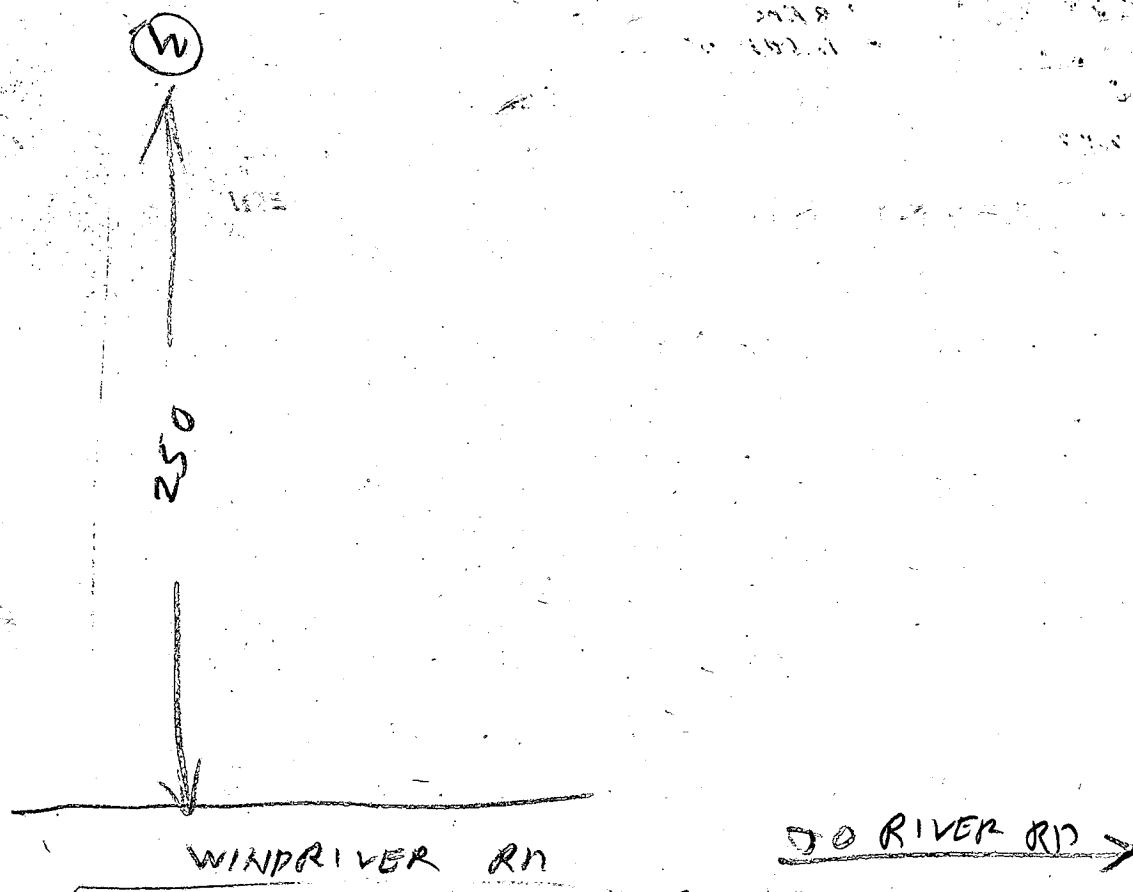
552

EAST
GRID

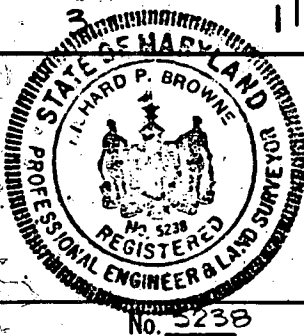
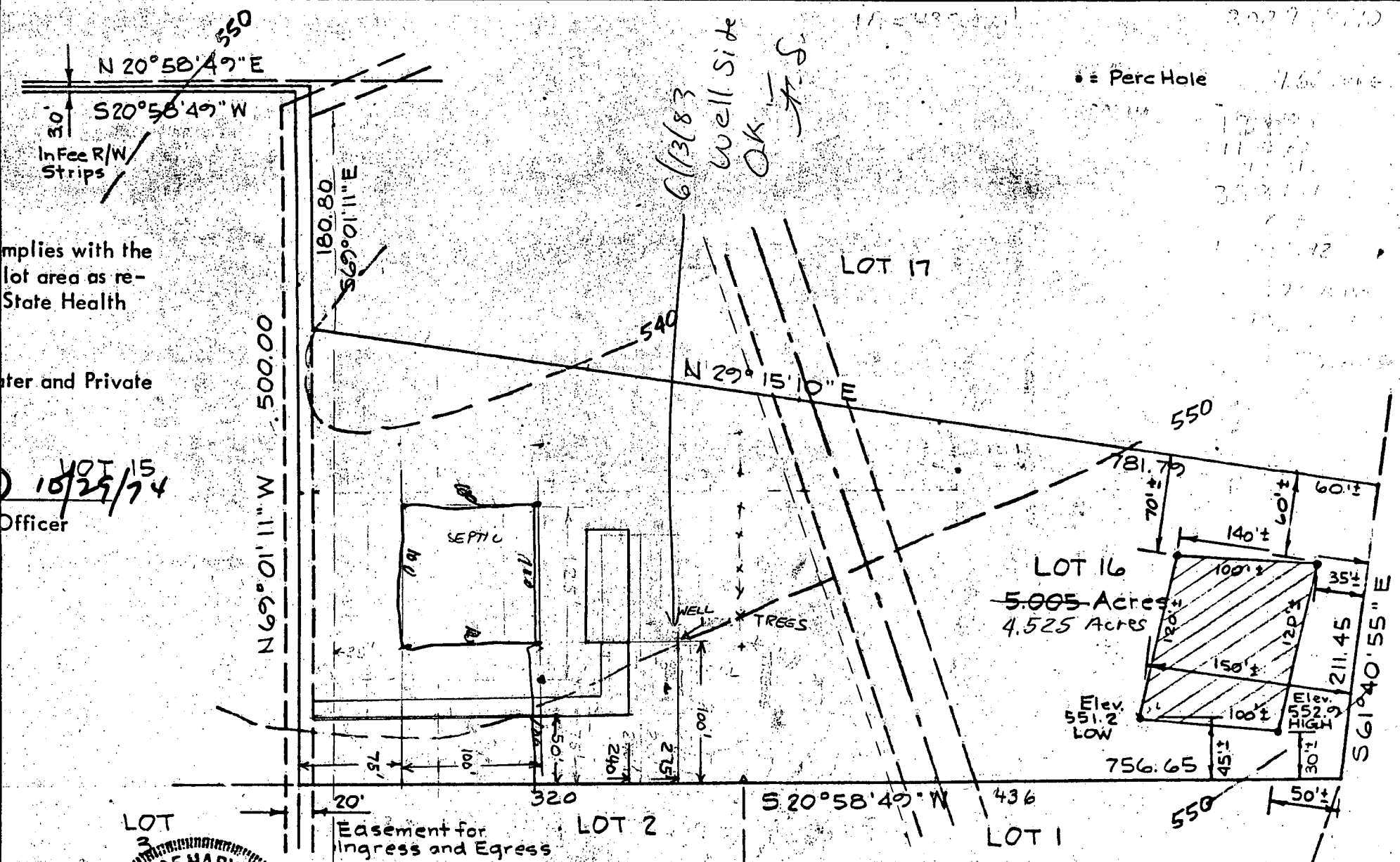
0814

EXPIRES

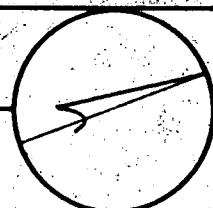
121383



- an 11010 AM
- ① 50 FT CASING 1 FT OUT OF GROUND
 - ② 21 FT OPEN HOLE MEASURED WITH A STRING
 - ③ LOCATION OK
 - ④ PIPE JETTED DOWN OPEN HOLE 30 FT
 - ⑤ GENERATOR BROKE BUT WAS FIXED
 - ⑥ YIELD TEST ALREADY RUN EARLY THIS MORNING 950 AM
 - ⑦ 13 BAGS
 - ⑧ WELL OK



REFERENCE



MERIDIAN

RICHARD P. BROWNE ASSOCIATES

CONSULTING ENGINEERS, PLANNERS
WAYNE, N.J. COLUMBIA, MD.

MAP OF PROPERTY OF
L.A.M. Inc.

SITUATED IN
3rd Election District Howard County, Md.

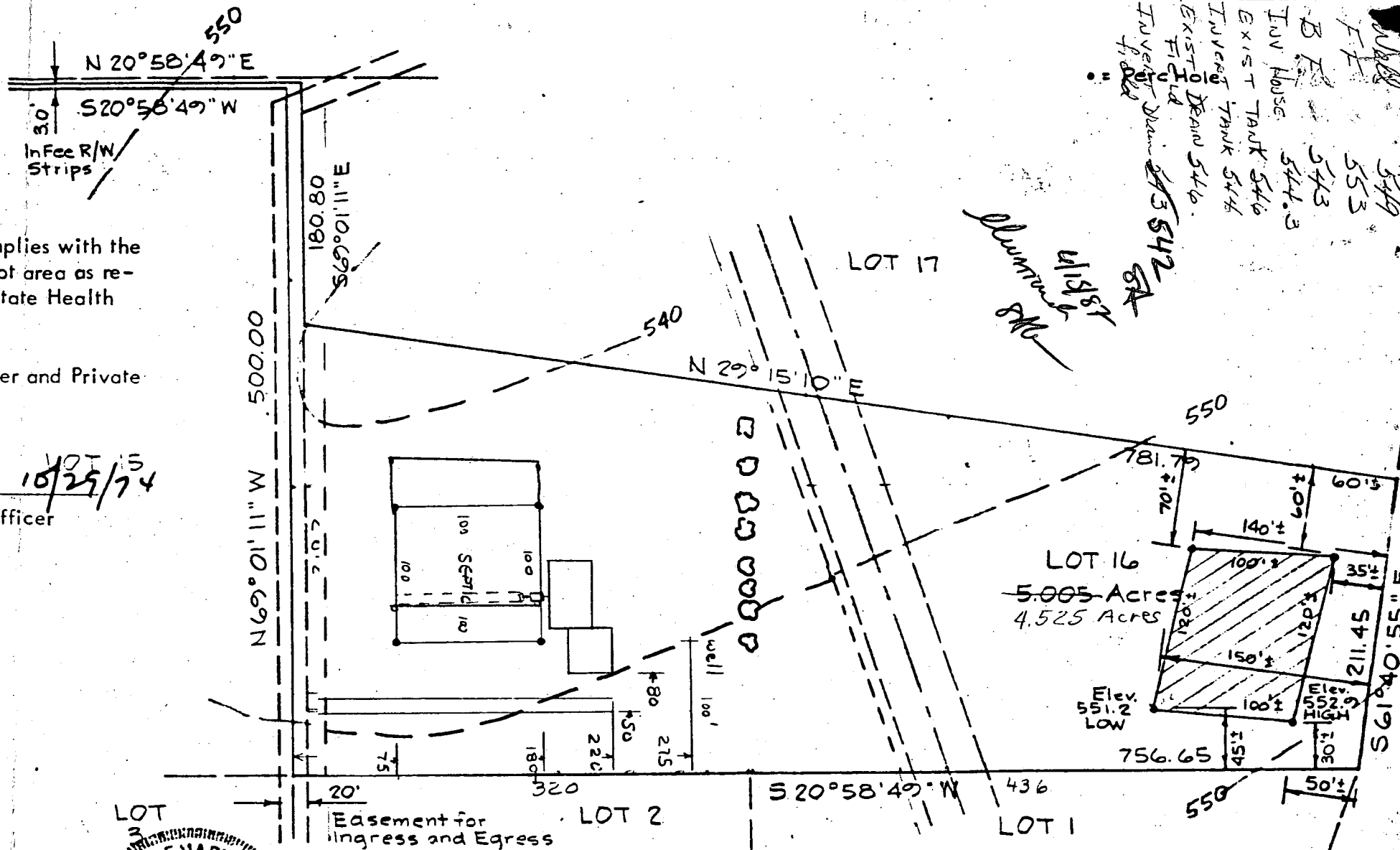
SCALE: 1" = 100'

DATE: 10-1-74

DRAWN MK CHECKED

APPROVED: Private Water and Private Sewer

Owner:
L.A.M. Inc.
4615 Old Court Road
Pikesville, Md.

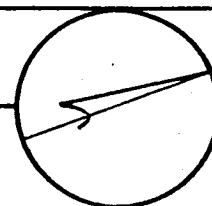


BRUNING 40-105 11334

Richard P Browne



MERIDIAN



RICHARD P. BROWNE ASSOCIATES
CONSULTING ENGINEERS, PLANNERS
WAYNE, N.J. COLUMBIA, MD.

MAP OF PROPERTY OF
L.A.M. Inc.

SITUATED IN
3rd Election District Howard County, Md.

REV 6-9-86 HRS

SCALE: 1" = 100'

DATE: 10-1-74

PROJECT No. 2579 W. O. No.

DRAWN MK CHECKED MC

HOWARD COUNTY HEALTH DEPARTMENT

JOYCE M. BOYD, M.D., M.P.H.
COUNTY HEALTH OFFICER



Bureau of Environmental Health
3525 Ellicott Mills Drive
Ellicott City, Maryland 21043

Director - 461-9956
Water & Sewerage, Permits - 461-9933
Community Environmental Health - 461-9944
Technical Services - 461-9955

February 16, 1989

Mr. and Mrs. Henry R. Stirn
820 Windriver Drive
Sykesville, Maryland 21784

RE: Berndell Estates - Lot 16
820 Windriver Drive

Dear Mr. and Mrs. Stirn:

This is to advise you that the septic system was installed, inspected and approved on February 17, 1989.

The water sample recently submitted for testing was free of coliform and fecal coliform bacteria at the time of sampling and is bacteriologically safe for drinking.

INTERIM CERTIFICATE OF POTABILITY

This certifies that the initial sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under permit(s) H0-81-0157. No guarantee can be given for health protection beyond this date of issue. Based upon a satisfactory investigation and evaluation by the Howard County Health Department, the Department of Health and Mental Hygiene accepts this well system as required by COMAR 26.04.04.09.

This certificate may become final upon completion of the final bacteriological test which is to be taken and the results submitted to the Howard County Health Department within six months. The well owner accepts his responsibilities under COMAR 26.04.04.10.

July 13, 1983
Date Well Approved

February 13, 1989
Date of Water Sample

Jane Nadeau CW
Approving Authority JEN
Jane Nadeau, Sanitarian
Water and Sewerage Program