

# PERMIT

SYSTEM TO BE INSTALLED FIRST  
BEFORE BUILDING PERMIT IS  
SIGNED.

SEWAGE DISPOSAL SYSTEM

A 25338

MARYLAND STATE DEPARTMENT OF HEALTH

10/3/77  
9/30/77  
afternoon please  
HOWARD COUNTY

See letter ELICOTT CITY  
attached.

DISTRICT 3rd

INDEXED

DATE 9/26/77

Westminster Lawn Service

IS PERMITTED TO INSTALL ☒ ALTER ☐

ADDRESS Westminster, Md.

PHONE

A SEWAGE DISPOSAL SYSTEM LOCATED AT

SUBDIVISION

ROAD 11770 Triadelphia Road

LOT 2

PROPERTY OWNER Hugh & Martha Hopkins

\$144

ADDRESS 2675 Pfefferkorn Road

SPECIFICATIONS 3 bedrooms

DRAIN FIELD DEPTH FEET, BOTTOM AREA SQ. FT.

SEEPAGE PITS ABSORBENT SIDE-WALL AREA SQ. FT.

SEPTIC TANK CAPACITY 1000 GALLONS

BLDG. PERMIT SIGNED  
AND RETURNED 10/4/77  
Serial # 33395

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 22% & TANK CAPACITY 50%.

OTHER DRY WELL-To have 125 sq. ft. effective absorbent sidewall area per bedroom below inlet. Inlet to be 4 ft. below original grade and maximum total depth 12 ft. Locate per surveyor-120 ft. from right property line and 18 ft. from front property line when facing lot from road. (Perc hole 1 & 2). If dry well and trench used need: 5 ft. earth buffer between trench and dry well, and 2 inspections of trench before and after gravel is installed.

NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON. PERMIT VOID AFTER 3 YEARS.

NOTE: INSTALL STAND PIPES ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA ACCEPTED.

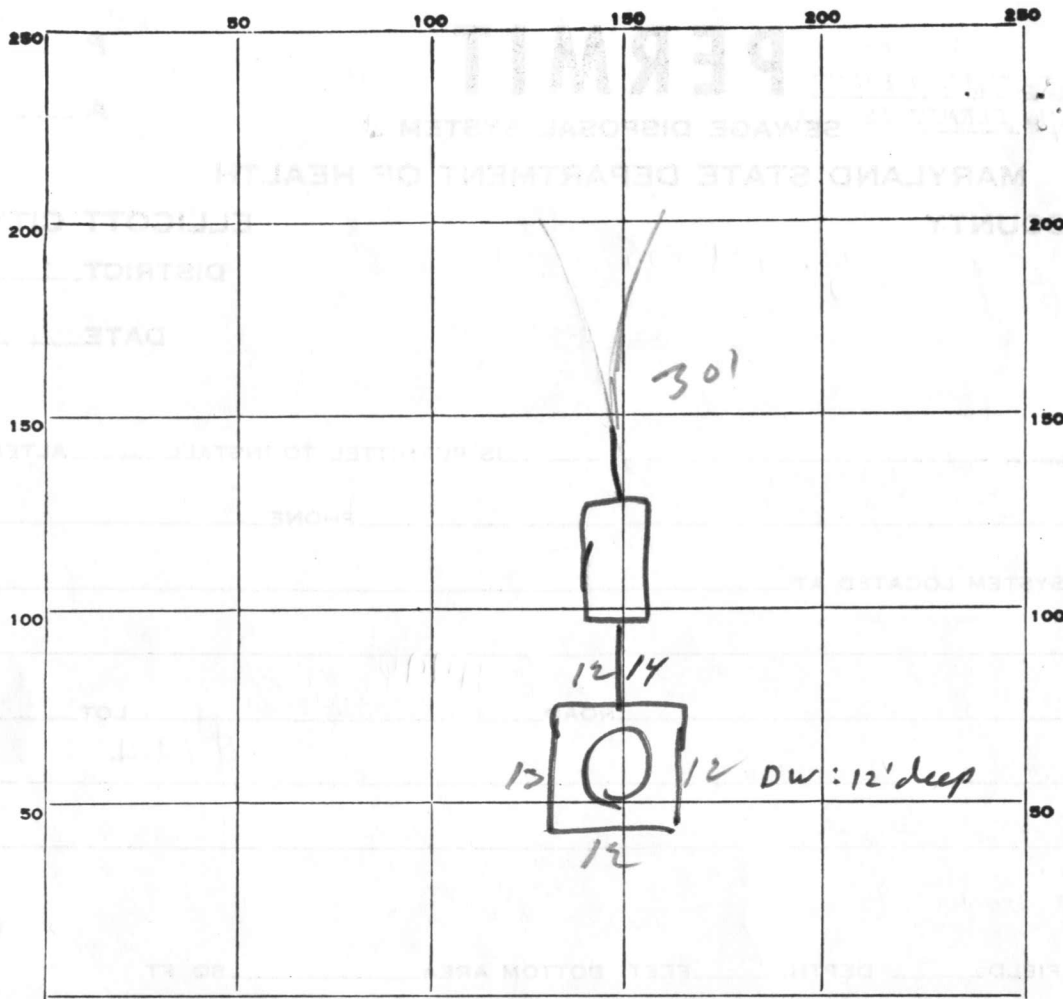
PLANS APPROVED BY Charles B. Streaker

DATE 9/19/77

FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

NEITHER THE HOWARD COUNTY COMMISSIONERS NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

A 25338



INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD ☒

SEPTIC TANK, LEVEL ☒ 1500'

CLEANOUTS ☒ ☒

DISTRIBUTION BOX, LEVEL ☒ 11 A

TILE FIELD, DEPTH ☒ NA

FT.

TRENCH WIDTH

FT.

GRAVEL DEPTH

IN.

TOTAL LENGTH

FT.

NUMBER OF TRENCHES

TOTAL BOTTOM AREA

SEEPAGE PITS, INSIDE DIAMETER ☒ 49'

FT.

DEPTH BELOW INLET ☒ 8

FT.

ABSORBENT AREA ☒ 392 +

SQ. FT.

REMARKS

O.K. for 3 Bedrooms. DPOH

This system left uncovered ~ 2 months

DATE SYSTEM APPROVED

2/1/98

INSPECTOR

DPOH

# APPLICATION

A 25338

## 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 10000 gallons  
DATE 3/2/77

*System first D.W.M. + C.B.S. 9/19/77*

*1-3 Bedrooms*  
*4 Bedrooms*  
*125 sq. ft. effective*  
*absorbent side wall area per bedroom below inlet.*  
*Inlet to be 4' max below original grade and maximum*  
*total depth 12' location per surveyor - 120' from right*  
*property line and 18' from front property line when facing*  
*road from Road (see hole #2)*  
*dry well and trench used -*  
*need:* ① 5' earth buffer between trench and dry well  
② 2 inspections of trench before and after gravel installed

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 HUGH F. & MARTHA F. HOPKINS

ADDRESS 2675 PEEFFERKORN RD.

PHONE 489-4825

PROPERTY LOCATION:

SUBDIVISION

LOT NO. 6-B

ROAD AND DESCRIPTION TRIDELPHIA RD. & Route 144

Closest to  
Rt 144

SIZE OF LOT 3.294 ACRES

TYPE BLDG. 3

NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE SINGLE RESIDENCE

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

SIGNATURE OF APPLICANT Dominic J. Summinello

APPROVED BY C.B. Theaker

FOR

dry well & trench  
(KIND OF SYSTEM)

DATE 9/19/77

REJECTED BY \_\_\_\_\_

FOR \_\_\_\_\_

DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS

REASONS FOR REJECTION OR HOLDING

C.B. Theaker DATE 4/13/77

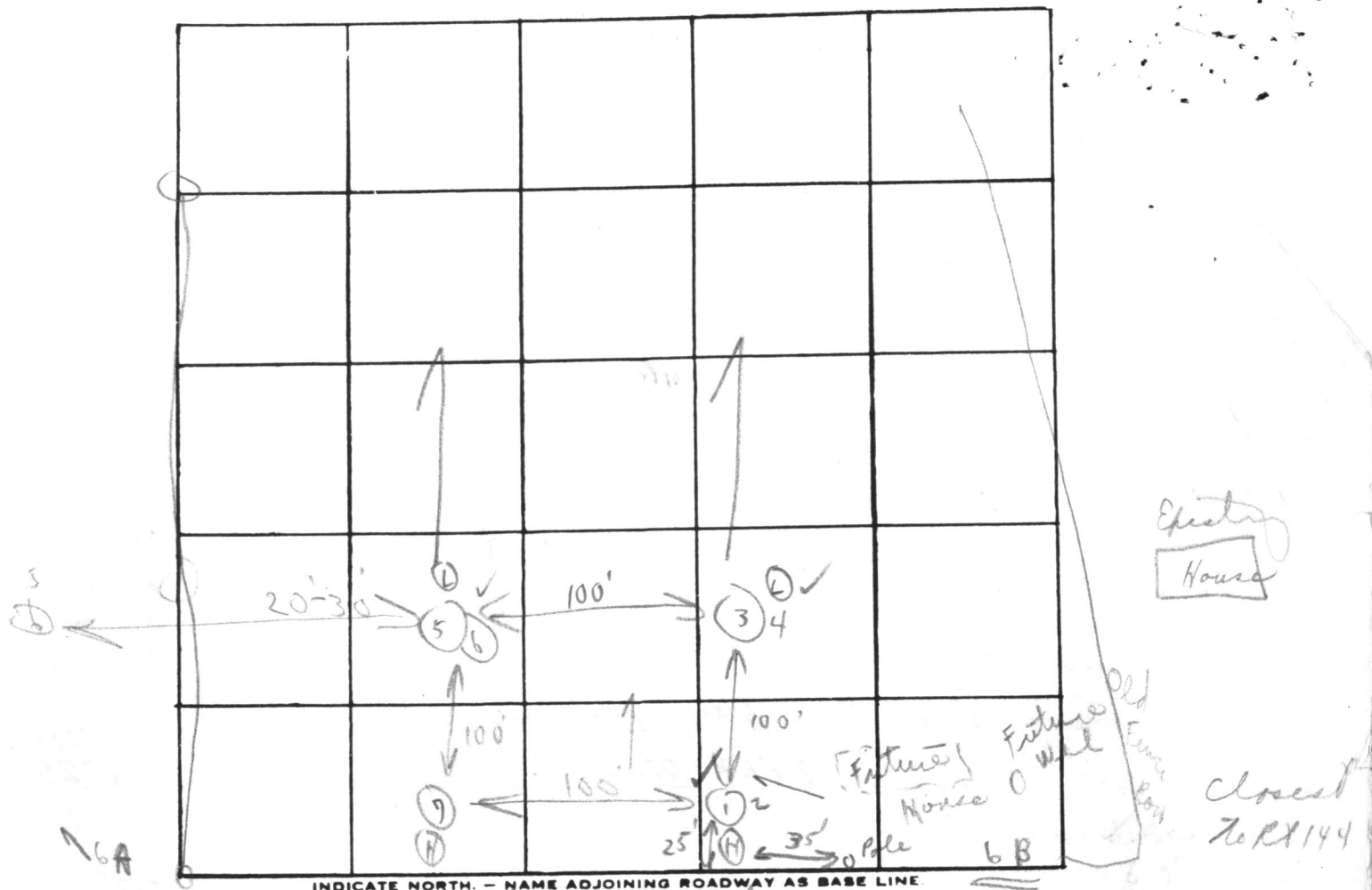
4/15/77 see 6A Hold

Water problem to rear of lot

5/12/77 Tested in different area - hold for certified  
holes. C.B.S.

# THIS IS NOT A PERMIT





Triadelphia Rd

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
<del>4/15/77</del>	1	4 1/2'	4:53	4:55	4:55	5:00	5 min
5/12/77	(H) 2	12 1/2'	4:56	4:58	4:58	5:06	8 min
	3	4 1/2'	3:46	3:48	3:48	3:56	8 min
	(L) 4	12 1/2'	4:22	4:25	4:25	4:31	6 min
	(L) 5	4 1/2'	3:41	3:45	3:45	3:55	10 min
	6	12'	Water stayed at 12' 1 hr				little seepage
	(H) 7	12'	Visual inspection to 142				8 min
						5:30	

REMARKS

TYPE OF SOIL

TESTED BY

4/15 No Tests; 5/12 No holes dug at time of arrival  
 4/15 L, shales  
 5/12 and new digger  
 plus Hopkins

ALSO PRESENT:

Mr. Tammimello

plus Hopkins

Soil Profile

Yandy  
Team  
below  
clay

Unlet  
4 1/2'

8 min

over 200

761.771

418.55'

LOT NO. 6-0  
1.175A

1000

101

No 6 B 23

3.294 AU  
PASSED  
3.294 AU

REV.

0

10

347.53

4.47" W.

1

1

BENHUFF

SOLD  
BENHOFF

COZ-100

WOLF PENN.

12,752.70



B 1 <b>2029</b>		SEQUENCE NO. (WRA USE ONLY)		<b>STATE OF MARYLAND</b> WATER RESOURCES ADMINISTRATION TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401 <b>APPLICATION FOR PERMIT TO DRILL WELL</b>		A25338 WRA PERMIT NUMBER <b>H0-73-2292</b> FILL IN THIS FORM COMPLETELY	
DATE RECEIVED (WRA USE ONLY) <b>9/13/77 14</b> <b>2:00 p.m.</b> <b>130</b>		OWNER COL 15 LAST NAME <b>Hopkins</b> FIRST NAME <b>Milborne</b> COL. 34		STREET OR RFD COL 36 <b>2325 Thomson Drive</b> COL. 55		POST OFFICE COL 57 <b>Marriottsville, MD 21104</b> COL. 76	
B 1 CONTINUED 1 2 3 (SEQ. NO.) 6		DRILLER INFORMATION		B 3 LOCATION OF WELL		B 4 DIRECTION FROM TOWN	
DATE <b>Aug. 23, 1977</b> LICENSE NUMBER <b>290</b> <b>77</b> <b>80</b> <b>C. C. Campbell &amp; Co., Inc.</b> FIRST NAME DRILLER LAST NAME SIGNATURE <b>Charles C. Campbell</b>		MAXIMUM PUMPING RATE (GALLONS PER MINUTE) <b>5</b> AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) <b>500</b> <b>14</b> <b>20</b> <b>USE FOR WATER (CIRCLE APPROPRIATE BOX)</b> <input checked="" type="checkbox"/> D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> F FARMING, AGRICULTURE, IRRIGATION <input type="checkbox"/> I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT. <input type="checkbox"/> M MUNICIPAL WATER SUPPLY <input type="checkbox"/> P PRIVATE WATER COMPANY <input type="checkbox"/> T TEST MUST HAVE STATE HEALTH DEPT. APPROVAL		COUNTY <b>Howard</b> (DO NOT ABBREVIATE COUNTY NAME) SUBDIVISION <b>23</b> SECTION <b>44</b> <b>46</b> LOT <b>2</b> NEAREST TOWN <b>Mayfield</b> MILES FROM TOWN (ENTER 0 IF IN TOWN) <b>1/2</b> M I 73 76 77 78		1 2 3 (SEQ. NO.) 6 <input checked="" type="checkbox"/> N NORTH <input type="checkbox"/> E EAST <input type="checkbox"/> NE NORTHEAST <input type="checkbox"/> SE SOUTHEAST <input type="checkbox"/> S SOUTH <input type="checkbox"/> W WEST <input type="checkbox"/> NW NORTHWEST <input type="checkbox"/> SW SOUTHWEST NEAR WHAT <b>Triadelphia Road</b> ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) <b>90'</b> F T 34 37 38 39	
APPROXIMATE DEPTH OF WELL <b>200'</b> APPROXIMATE DIAMETER OF WELL <b>6"</b> (NEAREST INCH) METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD) <input checked="" type="checkbox"/> BORED (OR AUGERED) <input type="checkbox"/> JETTED <input type="checkbox"/> DRIVEN 30-37 <input checked="" type="checkbox"/> AIR-ROTARY <input type="checkbox"/> AIR-PERCUSSION <input type="checkbox"/> ROTARY (HYDRAULIC ROTARY) <input type="checkbox"/> CABLE <input type="checkbox"/> REVERSE-ROTARY <input type="checkbox"/> DRIVE-POINT OTHER (DESCRIBE) _____ REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX) <input type="checkbox"/> N THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <input type="checkbox"/> S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY <input type="checkbox"/> D THIS WELL WILL DEEPEIN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) _____ 41 52		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS, ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON THE SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX BELOW AND THE BOX NUMBER FROM THE WELL LOCATION MAP. <b>9/13/77</b> <b>34' Open</b> <b>35' casing</b> <b>26' open hole; could not get</b> <b>grout pipe past 22' (coupling)</b> <b>NOT GROUTED</b> <b>Check!!</b> <b>* Note: House appears to be staked on perc area ~20-25'</b> <b>* Note: Well is ~62' away fr high perc near road. Close but should be OK.</b>		NOT TO BE FILLED IN BY DRILLER (WRA USE ONLY) APPROPRIATION PERMIT NUMBER <b>54</b> <b>63</b> <b>65</b> ENGINEER REVIEW DISTRICT NO. _____ FORCE <b>67</b> <b>68</b> WRITE INITIALS IN BOX CONDITIONS <b>70</b> <b>71</b> <b>72</b> <b>73</b> <b>74</b> <b>75</b> <b>76</b> <b>77</b> <b>78</b> <b>79</b> B 4 CONTINUED 1 2 3 (SEQ. NO.) 6 41 <input checked="" type="checkbox"/> S STATE HEALTH (CIRCLE BOX) MD. DAY YR. <b>08 24 77</b> DATE <b>43</b> <b>48</b> <b>Donald W. Monaghan, Sanitarian</b> APPROVED BY SPECIAL CONDITIONS 8-63 (WRA USE ONLY)		BOX NUMBER <b>820</b> <b>530</b> NORTH COORDINATE <b>50</b> <b>51</b> <b>52</b> <b>53</b> <b>54</b> <b>55</b> EAST COORDINATE <b>57</b> <b>58</b> <b>59</b> <b>60</b> <b>61</b> <b>62</b> <b>63</b> ELEVATION AT WELL HEAD (FEET) <b>65</b> <b>66</b> <b>67</b> <b>68</b> 0/5 5/5 0/0 5/0	
B 5 1 2 3 (SEQ. NO.) 6		HEALTH DEPARTMENT APPROVAL		B 5 1 2 3 (SEQ. NO.) 6		B 5 1 2 3 (SEQ. NO.) 6	

C 1	1399	SEQUENCE NO. (WRA USE ONLY)	<b>STATE OF MARYLAND</b> <b>WATER RESOURCES ADMINISTRATION</b> <b>TAWES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401</b> <b>WELL COMPLETION REPORT</b>	THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION FILL IN THIS FORM COMPLETELY COUNTY NUMBER <u>W26800</u>
1 2 3 (SEQ. NO.) 6 (THIS NUMBER IS TO BE PUNCHED IN COLUMNS 3-6 ON ALL CARDS)		DEPTH OF WELL <u>285'</u> 22 (TO NEAREST FOOT) 26		
DATE RECEIVED (WRA USE ONLY) <u>Sept. 13, 1977</u> DATE WELL COMPLETED <div style="display: flex; justify-content: space-around; width: 100px;"> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> </div>		PERMIT NO. FROM "PERMIT TO DRILL WELL" <u>HO-73-2292</u> 28 29 30 31 32 33 34 35 36 37		
OWNER <u>Hopkins Milborne</u> LAST NAME FIRST NAME STREET OR RFD <u>2325 Thomson Drive</u> POST OFFICE <u>Marriottsville, MD</u>		DRILLERS IDENTIFICATION NO. <u>290</u>		

WELL LOG			WELL DESCRIPTION		
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING			GROUTING RECORD		
DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY) <u>Over Burden</u> <u>Hard grey rock</u>			YES NO WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> Y <input type="checkbox"/> N TYPE OF GROUTING MATERIAL (CIRCLE BOX) CEMENT <input checked="" type="checkbox"/> M BENTONITE CLAY <input type="checkbox"/> C NO. OF BAGS <u>11</u> NO. OF POUNDS <u>1034</u> GALLONS OF WATER <u>66</u> DEPTH OF GROUT SEAL (TO NEAREST FOOT) FROM <u>0</u> FT. TO <u>34'</u> FT. (ENTER 0 IF FROM SURFACE)		
FEET FROM TO <u>0</u> <u>34'</u> <u>34'</u> <u>285'</u>			CHECK IF WATER BEARING <input checked="" type="checkbox"/>		
Casing Types INSERT APPROPRIATE CODE BELOW MAIN CASING TYPE <input checked="" type="checkbox"/> S <input type="checkbox"/> T NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) <u>6"</u> TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) <u>36'</u>			CASING RECORD STEEL <input checked="" type="checkbox"/> S CONCRETE <input type="checkbox"/> C PLASTIC <input type="checkbox"/> P OTHER <input type="checkbox"/> O		
OTHER CASING (IF USED) DIAMETER (INCH) FROM TO DEPTH (FEET) FROM TO			SCREEN RECORD INSERT APPROPRIATE CODE BELOW STEEL <input type="checkbox"/> S BRASS OR BRONZE <input type="checkbox"/> B OPEN HOLE <input type="checkbox"/> H PLASTIC <input type="checkbox"/> P OTHER <input type="checkbox"/> O		
CIRCLE APPROPRIATE BOXES <input 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			PUMPING TEST HOURS PUMPED (TO NEAREST HOUR) <u>6</u> PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) <u>15</u> METHOD USED TO MEASURE PUMPING RATE <u>1 gal. bucket</u> WATER LEVEL: (DISTANCE FROM LAND SURFACE) BEFORE PUMPING <u>40'</u> (NEAREST FOOT) WHEN PUMPING <u>65'</u> (NEAREST FOOT) TYPE OF PUMP USED (CIRCLE APPROPRIATE BOX) <input 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		
I HEREBY CERTIFY THAT I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CAPTIONED "PERMIT TO DRILL WELL", AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.			PUMP INSTALLED TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: A, C, J, P, R, S, T, O) <input type="checkbox"/> 29 DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> Y <input type="checkbox"/> N CAPACITY: GALLONS PER MINUTE (TO NEAREST GALLON) <u>31</u> <u>35</u> PUMP HORSE POWER <u>37</u> <u>41</u> PUMP COLUMN LENGTH (NEAREST FOOT) <u>43</u> <u>47</u>		
DRILLERS NAME (PLEASE PRINT) <u>C.C. Campbell &amp; Co., Inc</u> SIGNATURE <u>Charles C. Campbell</u>			Casing Height (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT) <input checked="" type="checkbox"/> + ABOVE <input type="checkbox"/> - BELOW LAND SURFACE <u>2'</u> (NEAREST FOOT)		
LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS BUILDINGS, SEPTIC TANKS, AND/OR OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL).			LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS BUILDINGS, SEPTIC TANKS, AND/OR OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL).		
WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER) TELESCOPE CASING <input type="checkbox"/> T LOG INDICATOR <input type="checkbox"/> L OTHER DATA AVAILABLE <input type="checkbox"/> W <input type="checkbox"/> Q			LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS BUILDINGS, SEPTIC TANKS, AND/OR OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL).		