

6/1/78

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 4th

DATE 2/27/78

INDEXED

Hobson & Sons, Inc.

IS PERMITTED TO INSTALL ☒ ALTER

ADDRESS 3606 Oxwed Court, Westminster, Md. 21157

PHONE

SUBDIVISION Westcliffe Manor

ROAD Off Underwood Rd.

LOT New Lot 17

PROPERTY OWNER Hobson & Sons, Inc.

ADDRESS Same as above

SPECIFICATIONS 4 bedrooms

SEPTIC TANK CAPACITY 1250 GALLONS

DRAIN FIELD DEPTH FEET, BOTTOM AREA SQ. FT.

DEEP TRENCH DEPTH FEET, BOTTOM AREA SQ. FT.

SEEPAGE PITS ABSORBENT SIDE-WALL AREA 288 SQ. FT. Total sidewall area in the drywell

INLET PIPE 3 FT. BELOW ORIGINAL GRADE, MAXIMUM DEPTH 9 FT. BELOW ORIGINAL GRADE

EFFECTIVE DEPTH AT FT. BELOW ORIGINAL GRADE

LOCATE DISPOSAL AREA 100 FT. FROM Barberry Way LOT LINE AND 50 FT. FROM left LOT LINE AS SEEN WHEN

FACING LOT FROM

TRENCH: Inlet 3 ft. and Maximum depth 9 ft.. Trench to be 65 ft. long and to run on contour towards right property line.

PLANS APPROVED BY D. J. O'Neill

DATE 10-10-77

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 PLACING GRAVEL IN TRENCH.

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER.

NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

PERMIT VOID AFTER THREE YEARS.

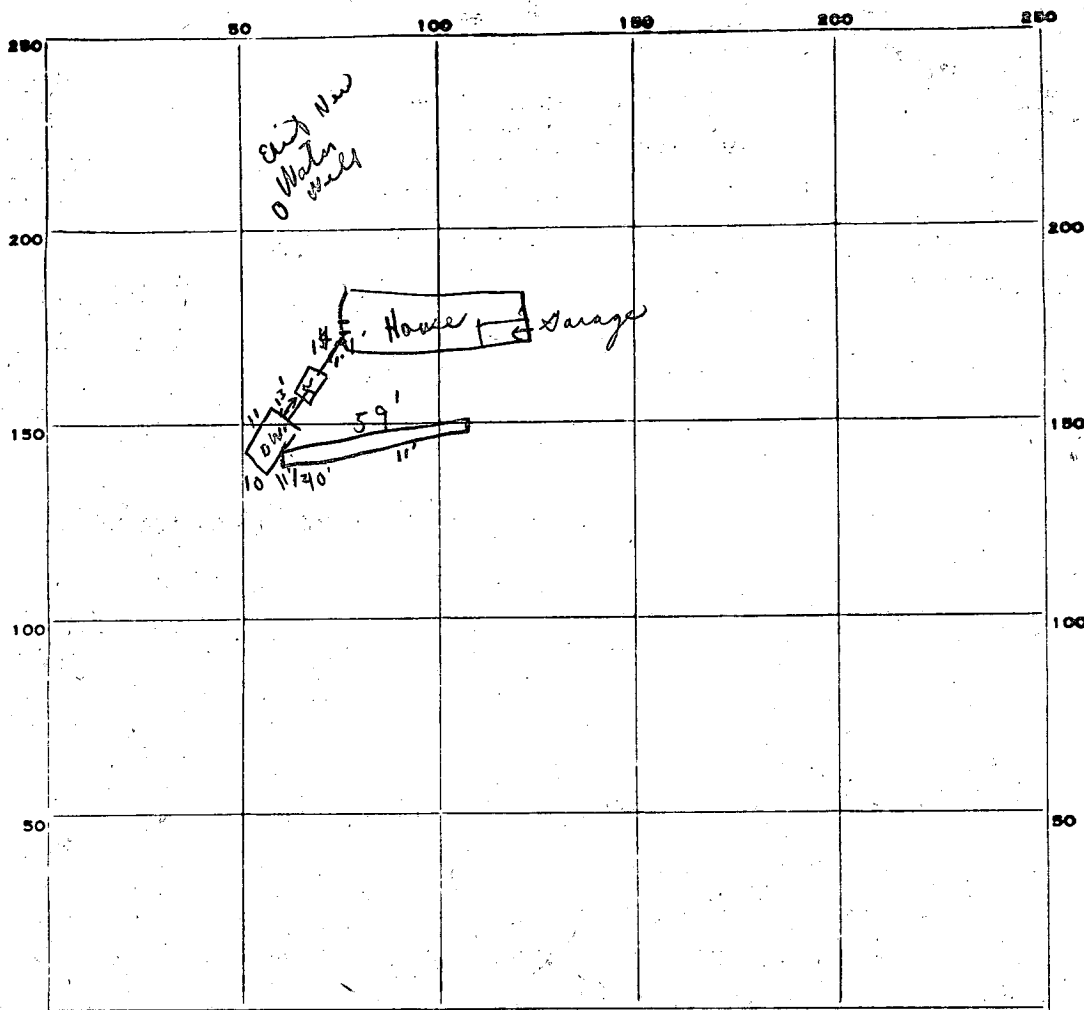
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA ACCEPTED.

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT.

BLDG. PERMIT SIGNED
AND RETURNED 2/27/78

Serial No. 34758

26606



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD

SEPTIC TANK, LEVEL

DISTRIBUTION BOX, LEVEL

TILE FIELD, DEPTH 10' avg. FT. TRENCH WIDTH - FT.

GRAVEL DEPTH 6 1/2' avg. FT. TOTAL LENGTH 59 FT.

NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA -

SEEPAGE PITS, INSIDE DIAMETER 43 1/2 FT. DEPTH BELOW INLET 7 FT.

ABSORBENT AREA 688 ± SQ. FT.

REMARKS

5/23/78 P.C.O. ok for gravel in trench only Front window of house (⊗ Note Trench 1' deeper than spec - soil good)
6/1/78 C.P.O. Paper on trenches at time of check

DATE SYSTEM APPROVED

6/1/78 Inspector C. B. Throck

PRELIMINARY

APPLICATION

O'Neill

A 26606

P _____

SEWAGE DISPOSAL TESTING

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 4th
DATE 8/16/77

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 J & B Partnership

ADDRESS 5632 Stevens Forest Rd., Apt. 254, Columbia 21045 PHONE Any questions call Ron Carter - 837-0194

PROPERTY LOCATION:

SUBDIVISION Westcliffe Manor LOT NO. ~~XX~~

ROAD AND DESCRIPTION off Underwood Road

SIZE OF LOT 40,500 sq. ft. TYPE BLDG. 3 or (4) bedrooms
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

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

SIGNATURE OF APPLICANT /s/ Ron Carter

BLDG. PERMIT SIGNED
AND RETURNED 2/27/78
Serial No. 34758

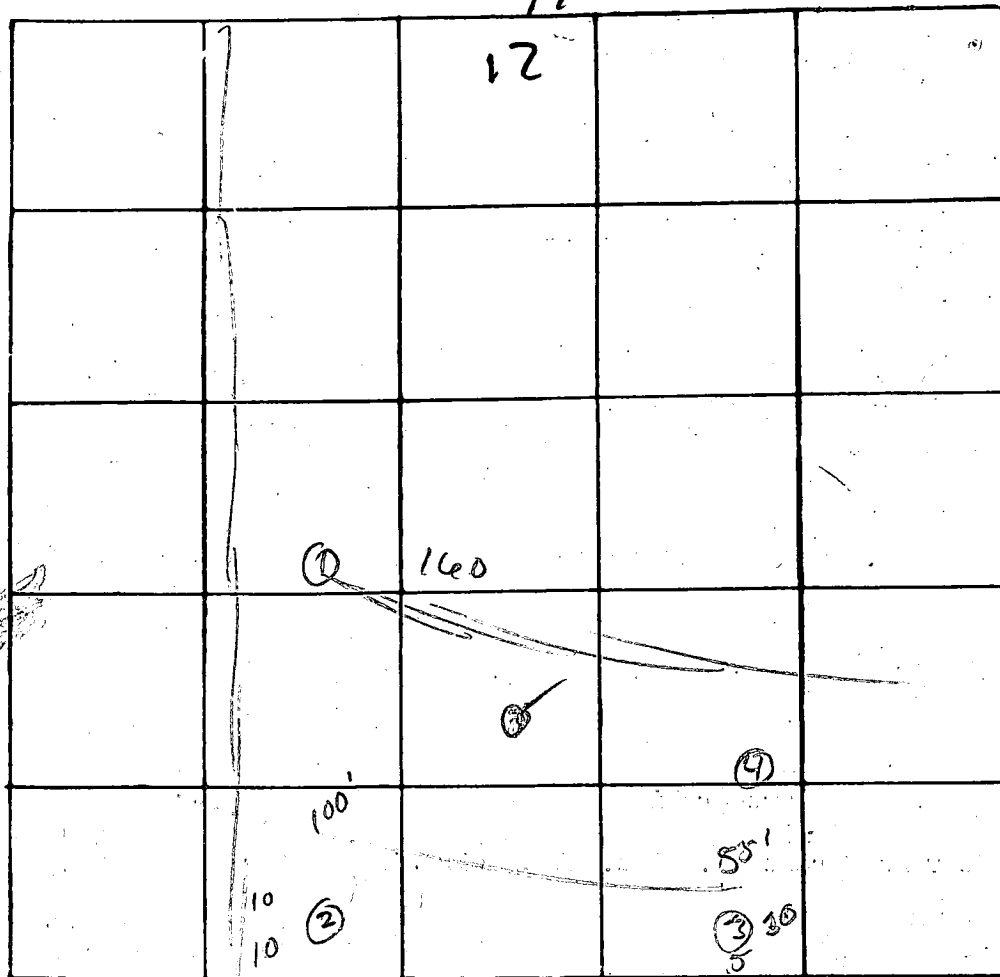
APPROVED BY [Signature] FOR Day Will-Hy DATE 7/10/77
(KIND OF SYSTEM)

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

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE

11 1/2
New #17

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8/31/01	15	3'	10 42	10 48	10 48	10 51	6
	a	12'	10 42	10 45	10 45	10 48	3
	25	4	10 45	10 49	10 49	10 51	17
	9	12	10 45	10 51	10 51	10 57	6
	35	3	10 50	11 00	11 00	11 22	22
	a	11	10 51	10 55	10 55	11 05	10
	4 v. 13	04 3-12	04				
	5 v. 13	4-13'	04				

REMARKS

TYPE OF SOIL

TESTED BY

ALSO PRESENT:

041184

Donnell 2/2/78
prepared by

SEPTIC TANK	1000 gal	1250 gal	1500 gal
	3 bdrms	4 bdrms	5 bdrms

3'
inlet

9'
Max. depth

285
Abs. Area

Located 100' From Barbary Way 50' From left lot line

3'
Inlet

9'

max. depth

bedrooms Length Abs. Area

~~3~~
(4)

$$\begin{array}{r} 30 \\ \hline 65 \end{array}$$

To Run on contour towards left property line.
Right "

If dry well and trench are used leave a 5' earth buffer between them.
If septic tank is 3' or more below grade, use manhole type cleanout to grade.
If more than one trench is used space them parallel, twice their depth apart.
Call office for inspection of trench before placing stone in trench.
All pipe from house to disposal area cast iron.
Install standpipe (6" min.) on septic tank and dry well. Cast iron, concrete, terra cotta ok. Trench distribution lines may be clay, asbestos cement, orangeburg type, open joint cast iron or heavy duty plastic. (Commercial standard Cs228-61).

No. 75-2523

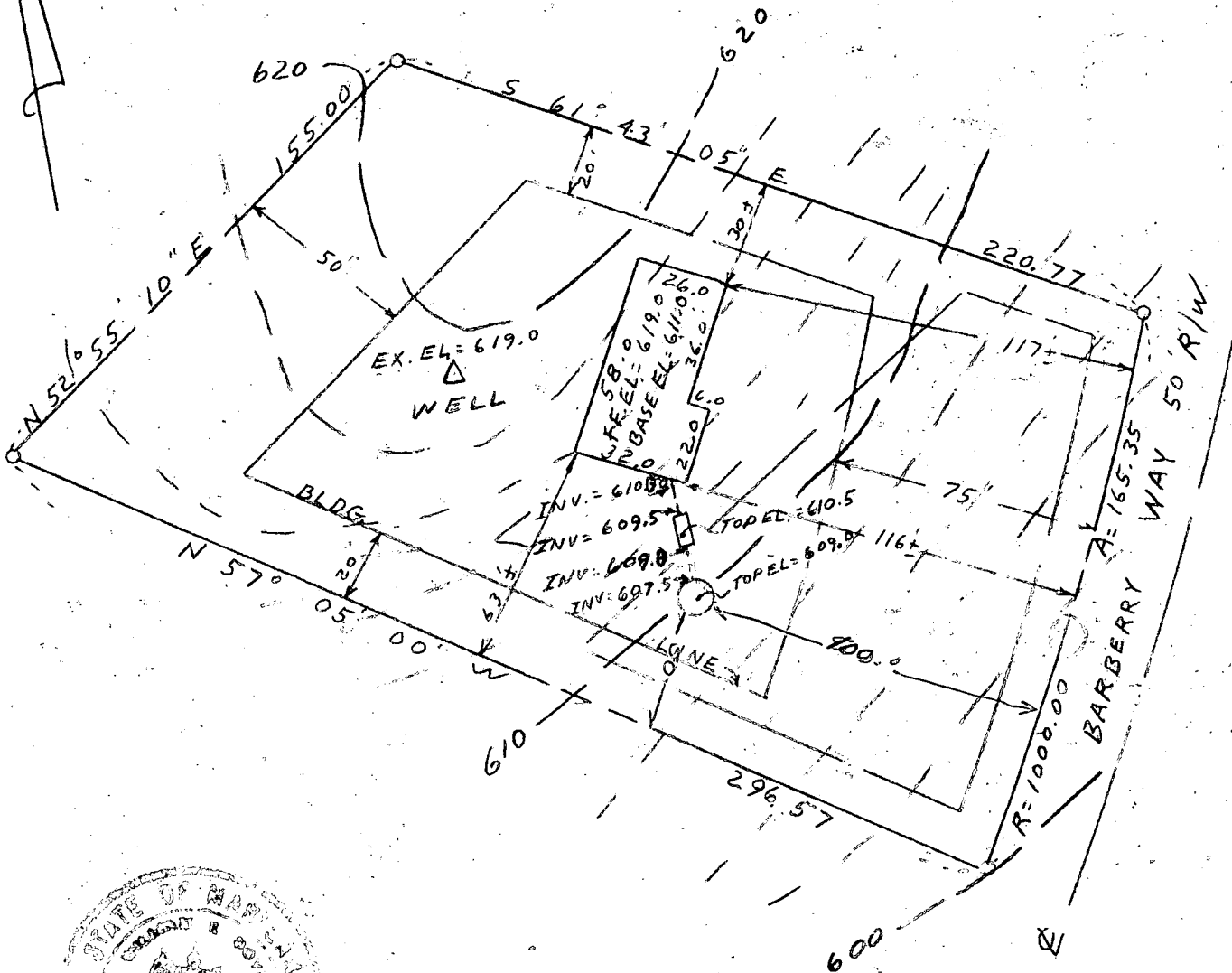
5312 EMERALD DRIVE

SYKESVILLE, MARYLAND 21784

PHONE (301) 795-2210

No. 75-2523

Loel Wab
2/27/78



William E. Doyle

HOUSE STAKEOUT
LOT 17, SECTION 1
WESTCLIFFE MANOR
4TH ELECTION DISTRICT

HOWARD COUNTY MARYLAND

SCALE: 1" = 50' DRAWN: FEB 27, 1978

STATE OF MARYLAND WATER RESOURCES ADMINISTRATION TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401 APPLICATION FOR PERMIT TO DRILL WELL		WRA PERMIT NUMBER HO-732523	
1 2 3 (SEQ. NO.) 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)		8220	
DATE RECEIVED (WRA USE ONLY) 2/15/78		OWNER Hobson + Sons Inc	
STREET OR RFD 3606 Oxwed CT		FIRST NAME Westminster	
POST OFFICE Westminster		COL 76	
B 1 CONTINUED		B 3 LOCATION OF WELL	
1 2 3 (SEQ. NO.) 6 DATE Jan 3-78		1 2 3 (SEQ. NO.) 6 COUNTY Howard	
LICENSE NUMBER 201		8 (DO NOT ABBREVIATE COUNTY NAME) West	
FIRST NAME John A		SUBDIVISION 1	
DRILLER Greene		SECTION 1	
LAST NAME Greene		LOT 17	
SIGNATURE John A. Greene		NEAREST TOWN Sykesville	
WELL INFORMATION		MILES FROM TOWN (ENTER OFF IN TOWN) 3	
1 2 3 (SEQ. NO.) 6 MAXIMUM PUMPING RATE (GALLONS PER MINUTE) 5		B 4 DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)	
AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) 500		1 2 3 (SEQ. NO.) 6 ☒ N NORTH ☐ E EAST ☐ NE NORTHEAST ☐ SE SOUTHEAST ☐ S SOUTH ☒ W WEST ☐ NW NORTHWEST ☐ SW SOUTHWEST	
USE FOR WATER (CIRCLE APPROPRIATE BOX) ☒ D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) ☐ F FARMING, AGRICULTURE, IRRIGATION ☐ I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT. ☐ M MUNICIPAL WATER SUPPLY ☐ P PRIVATE WATER COMPANY ☐ T TEST		NEAR WHAT Barberry Way ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) ☒ N ☐ S ☐ E ☐ W DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) 225	
APPROXIMATE DEPTH OF WELL 100 FEET		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.	
APPROXIMATE DIAMETER OF WELL 6 (NEAREST INCH)		X Barberry way Waterwood 44' casing 40' open hole (solid at 40') 2' above ground 11 bags cement 2/14/78 T.B.O.	
METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD) ☒ BORED (OR AUGERED) ☐ JETTED ☐ DRIVEN ☒ AIR-ROTARY ☐ AIR-PERCUSSION ☐ ROTARY (HYDRAULIC ROTARY) ☒ CABLE ☐ REVERSE-ROTARY ☐ DRIVE-POINT OTHER (DESCRIBE)		X 545000 50 51 52 53 54 55 57 58 59 60 61 62 63 ELEVATION AT WELL HEAD (FEET)	
REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX) ☒ N THIS WELL WILL NOT REPLACE AN EXISTING WELL ☐ Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED ☐ S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY ☐ D THIS WELL WILL DEEPEIN AN EXISTING WELL. PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE)		BOX NUMBER E 800 N 540	
NOT TO BE FILLED IN BY DRILLER (WRA USE ONLY) APPROPRIATION PERMIT NUMBER 54		ENGINEER REVIEW DISTRICT NO. 63	
FORCE CA WRITE INITIALS IN BOX		CONDITIONS 70 71 72 73 74 75 76 77 78 79	
B 4 CONTINUED		HEALTH DEPARTMENT APPROVAL	
1 2 3 (SEQ. NO.) 6 41 ☒ STATE HEALTH (CIRCLE BOX)		COUNTY NAME Howard COUNTY NO. 027400	
DATE 1 05 78		APPROVED BY Donald Monahan, Sanitarian	
B 5 SPECIAL CONDITIONS 8-63 (WRA USE ONLY)		0/0	

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
5739 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)										SEQUENCE NO. (WRA USE ONLY)										STATE OF MARYLAND WATER RESOURCES ADMINISTRATION TAWES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401 WELL COMPLETION REPORT										THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION FILL IN THIS FORM COMPLETELY COUNTY NUMBER 227409																																																																					
DATE RECEIVED (WRA USE ONLY)										DEPTH OF WELL 105 (TO NEAREST FOOT)										PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-75-2523																																																																															
OWNER Hobson LAST NAME										STREET OR RFD 3606 Oxford Ct										POST OFFICE 108TH WATER WHEEL																																																																															
WELL LOG STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING.										GROUTING RECORD WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) Y TYPE OF GROUTING MATERIAL (CIRCLE BOX) C M NO. OF BAGS 13 NO. OF POUNDS 1222 GALLONS OF WATER 75 DEPTH OF GROUT SEAL (TO NEAREST FOOT) FROM 0 FT. TO 37 FT. (ENTER 0, IF FROM SURFACE)										PUMPING TEST HOURS PUMPED (TO NEAREST HOUR) 6 PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 9 METHOD USED TO MEASURE PUMPING RATE 10 gal/min WATER LEVEL (DISTANCE FROM LAND SURFACE) BEFORE PUMPING 45 (NEAREST FOOT) WHEN PUMPING 65 (NEAREST FOOT) TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX) A AIR P PISTON T TURBINE C CENTRIFUGAL R ROTARY O OTHER (DESCRIBE BELOW) J JET S SUBMERSIBLE																																																																															
DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)										FEET FROM TO CHECK IF WATER BEARING Overburden 0-28 fine gray 28-75 dark gray 75-105										CASING RECORD INSERT APPROPRIATE CODE BELOW ST STEEL CO CONCRETE PL PLASTIC OT OTHER MAIN CASING TYPE ST NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) 42 TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) 105																																																																															
OTHER CASING (IF USED) DIAMETER (INCH) FROM TO 1										SCREEN RECORD INSERT APPROPRIATE CODE BELOW ST STEEL BR BRASS OR BRONZE HO OPEN HOLE PL PLASTIC OT OTHER C 2 (SEQ. NO.)										PUMP INSTALLED TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: A, C, J, P, R, S, T, O) 3 DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) Y CAPACITY: GALLONS PER MINUTE (TO NEAREST GALLON) 3 PUMP HORSE POWER 37 PUMP COLUMN LENGTH (NEAREST FOOT) 43																																																																															
CIRCLE APPROPRIATE BOXES 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 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.										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) T TELESCOPE CASING E.R.O.S. LOG INDICATOR W.O. OTHER DATA AVAILABLE 70 72 74 75 76																																																																															
DRILLERS NAME Bernard Frezer (PLEASE PRINT)										SIGNATURE Bernard Frezer										HEALTH																																																																															