

05-391989

Approved 2/10/86

Stamps

P 35796

A 27470

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH

992-2330

ELLICOTT CITY

DISTRICT 5th

DATE 7/22/85

Tomorrow PM

INDEXED

Andy Snow

IS PERMITTED TO INSTALL ☒ ALTER

ADDRESS 14196 Frederick Road, Cooksville, Maryland 21723 PHONE 854-6190

SUBDIVISION Kalmia Farms ROAD 14671 Vixburnum Drive LOT 20, Sec. 2

PROPERTY OWNER Joel and Kathy Goldberg

ADDRESS 4265 Coattail Court, Ellicott City, Md. 21043 Phone: 992-8822

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

GARBAGE GRINDER? YES ☒ NOSEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4
(with garbage grinder)

TRENCHES - 158 sq. ft. per bedroom. With garbage grinder - 200 sq. ft. per bedroom.

Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 7 feet below original grade. Effective area begins at 3 feet below original grade. 4 feet of

stone below distribution pipe. LOCATION: Place distribution box 100 feet from the 681' lot line and 280 feet from the intersection of the 681' and 747' lot lines.

Run trenches along contour toward the 681' lot line. NOTE: SEPTIC TANK AND TRENCHES MUST BE AT LEAST 100 FEET FROM WELL.

NOTE: NO trench to exceed 100 feet in length. If more than one trench used, a distribution box is required. Call for inspection of trench(s) before and after gravel is installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

9/3/85 Changes O.S. & by P.F.

PLANS APPROVED BY C. Williams DATE 8/8/85

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.

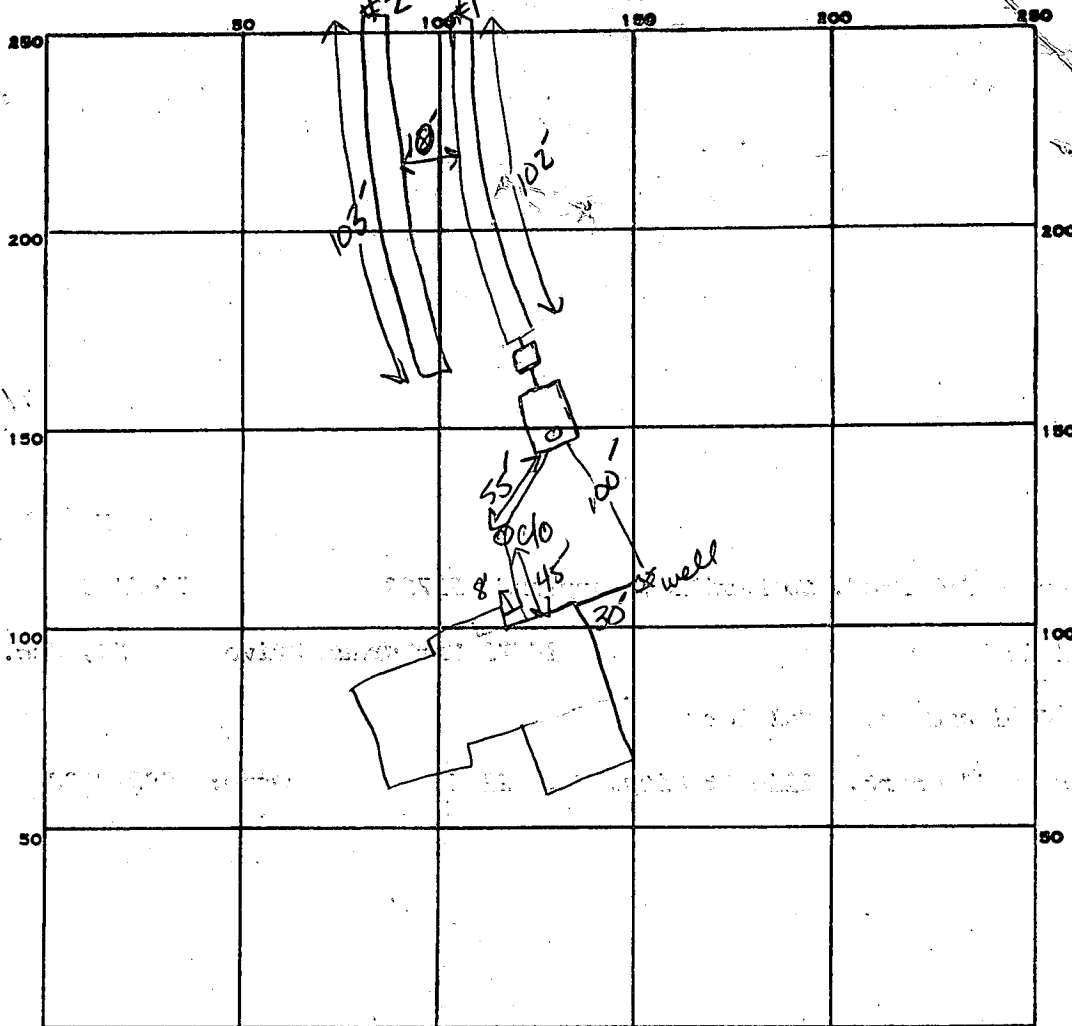
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

A 27470



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

PRIVATE DRIVE OFF VIBURNUM DR.

PERMIT CARD ☒

SEPTIC TANK, LEVEL ☒ 1500 GAL

CLEANOUTS ST

DISTRIBUTION BOX, LEVEL ☒

TILE FIELD, DEPTH 7 7 FT. TRENCH WIDTH 2 FT. INLET 3FE

GRAVEL DEPTH 4FE TOTAL LENGTH 102 103 FT. TOTAL 205

NUMBER OF TRENCHES 2 ONE SIDE WALL TOTAL BOTTOM AREA 820

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

ABSORBENT AREA 820 SQ. FT.

REMARKS 9-4-85 OK TO ADD STONE TO TRENCHES; SA; 9-4-85 OK TO COVER TANK &
TRENCHES; NEED LINE FROM HOUSE TO TANK; OK TO COVER LINE WHEN INSTALLED EXCEPT
AT TANK AND AT HOUSE; NEED 1/2" G/P FROM HOUSE TO TANK LABEL
9-5-85 OK TO COVER ALL WORK; NEED HOUSE CONNECTION BEFORE FINAL
APPROVAL. SAME

1 House Connection - 2/10/86

DATE SYSTEM APPROVED 2/10/86 INSPECTOR Stanger

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

8/19/83
A 27470

P _____

DISTRICT 5th

DATE _____

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

Kimberly Hill, Inc, t/a Kalmia Farms Nursery Joel Goldberg

ADDRESS

2901 Olney - Sandy Spring Rd, Olney, Md. PHONE 924-3668

PROPERTY LOCATION:

SUBDIVISION

KALMIA FARMS SECTION 2

LOT NO.

Final # 20

ROAD AND DESCRIPTION

Triadelphia Mill Road
14671 Viburnum Dr.

SIZE OF LOT

TYPE BLDG.

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

Raymond J. Dodge

FOR

Dry Well + Ditch

DATE

9/22/83

REJECTED BY

FOR

DATE

HOLD PENDING FURTHER TESTS

DATE

REASONS FOR REJECTION OR HOLDING

3/180 Reaccomplished @ office.
C.R.D.

B.P.# 65438

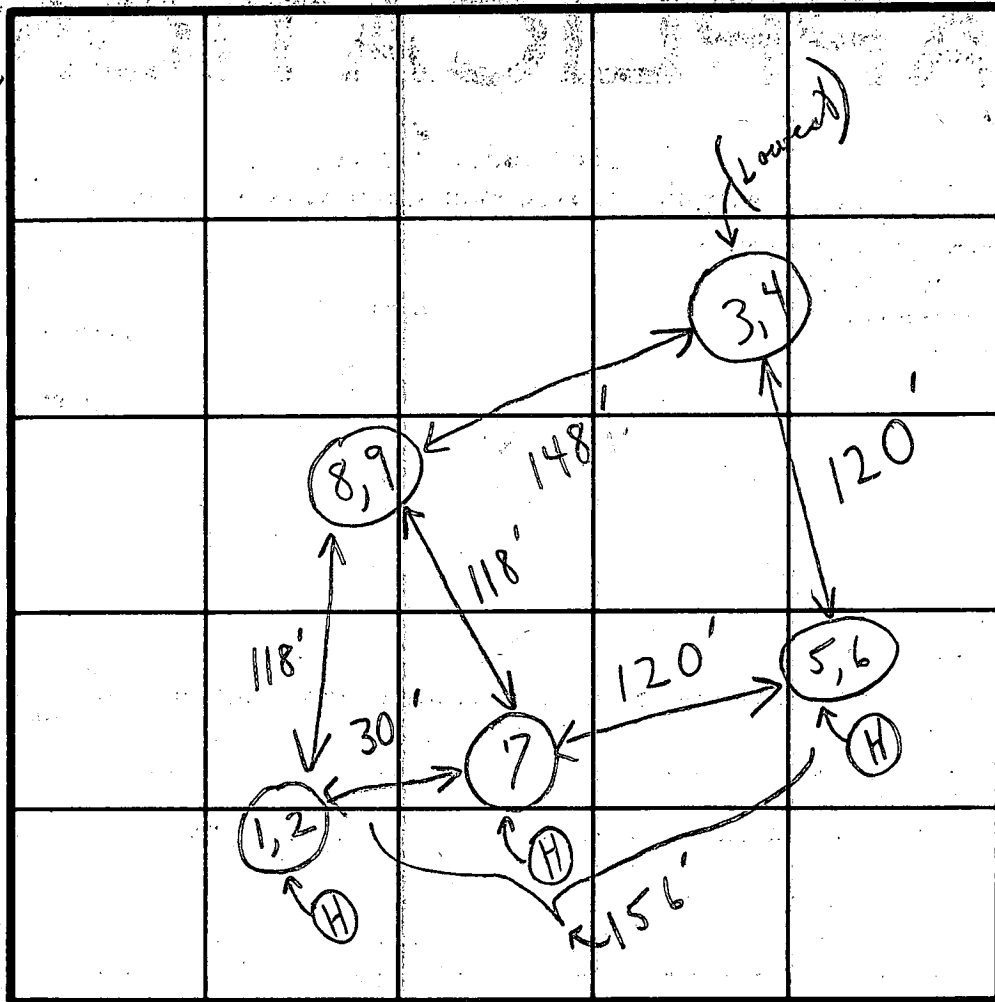
7-985

THIS IS NOT A PERMIT

#20 Sec. 2

SOIL PROFILE

Below
clay
↓
LOAM



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
3/20/79	1	3'	2:27	2:29	2:29	2:36	7 min
	(H) 2	7 1/2'	2:27	2:29	2:29	2:36	7 min
	3	3'	2:03	2:11	2:11	2:22	11 min
	4	7 1/2'	2:03	2:06	2:06	2:11	5 min
	5	3'	2:01	2:04	2:04	2:07	3 min
	(H) 6	7 1/2'	2:01	2:07	2:07	2:13	6 min
	(H) 7	10'	Use for system (i.e. similar to others)				
	8	3'	2:30	2:33	2:33	2:38	5 min
	9	7 1/2'	2:30	2:32	2:32	2:34	2 min
						8	46

Inlet
3'

6 min
avg

2/19/80
{ Dry to 8' }

2/19/80
{ Sandy 3' - 7 1/2' }

2/17/80
{ Dry to 8' }

REMARKS Tests in open field

TYPE OF SOIL

TESTED BY

C. B. ✓

ALSO PRESENT

{ Dixon
K. Allen

APPLICATION

Now #20 10/29/79
A _____
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 _____

DATE _____

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

Platt
Nonbuildable per review 1/3/80

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

PROPERTY OWNER _____

ADDRESS _____ PHONE _____

Now #20 10/29/79
7/13/79
Now #20

PROPERTY LOCATION:

SUBDIVISION Kalmar Farm Sec 2 LOT NO. 23

ROAD AND DESCRIPTION _____

SIZE OF LOT _____ TYPE BLDG. _____

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 _____

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

---MATCH LINE SEE SHEET 4 OF 8

N15°34'49"E 681.23

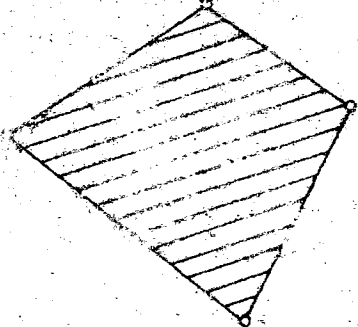
30

60'

580'

160'

150'
WELL SET OK
10/30/84 CWJ/ham



SIGNED
FINAL

1-1/2

LOT 20
18126 AC.

E11.000
N8.600

N 60°11'52"E 747.43

15 18

MATCH

LINE 2.580.00 S.E.

140'

BUILDING RESTRICTION LINE

100YR FLOODPLAIN AND
DRAINAGE EASEMENT

25' DRAINAGE AND
UTILITY EASEMENT

385.0

N29°03'41"E
100.77'

384.6

N 46°27'37"E 223.81'

384.5

S63°26'05"E 20.00'

532°28'56"W 30.00'

SEE SHEET 6 OF 8

---MATCH LINE

N04°51'24"E 193.55'

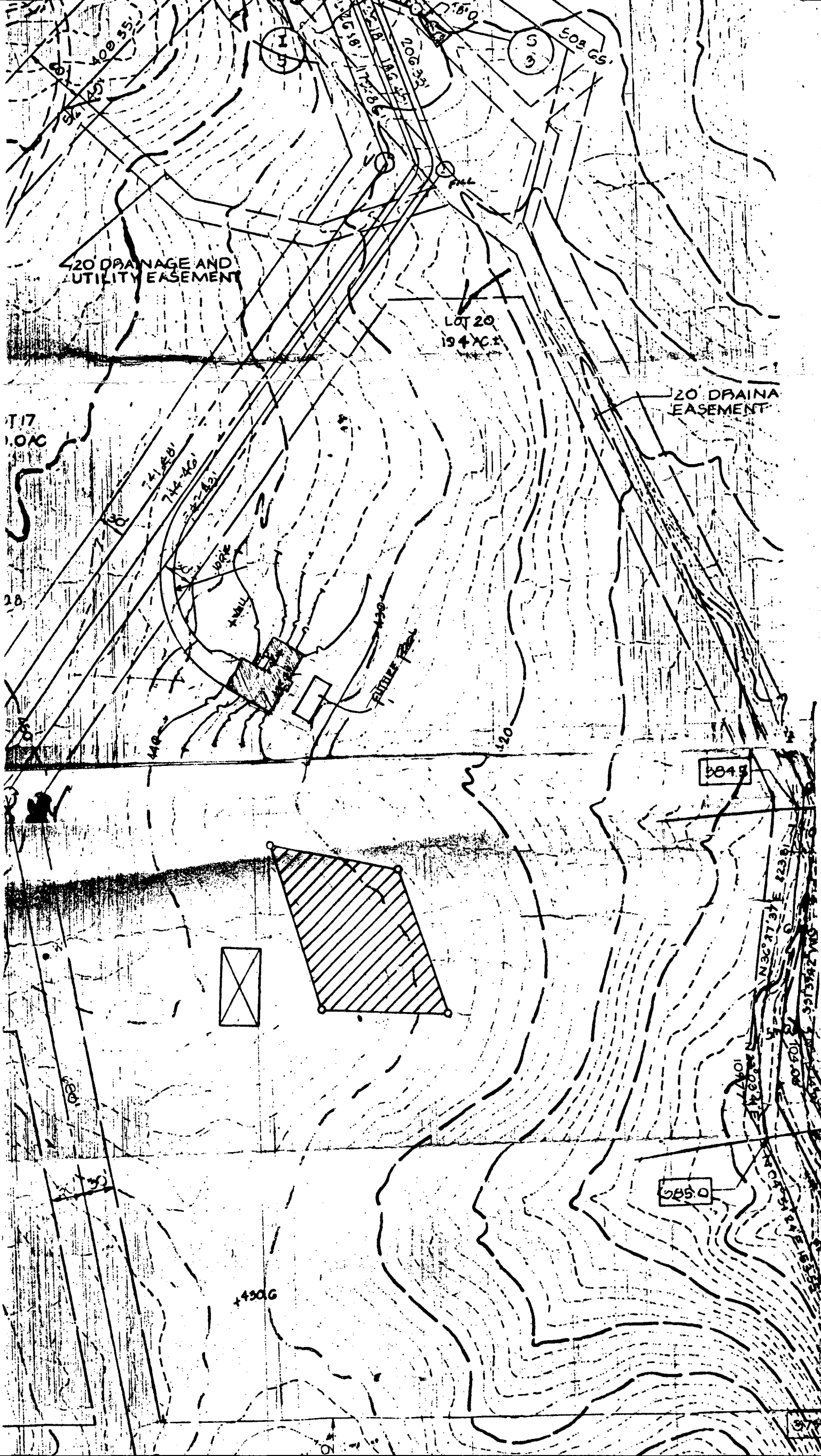
500' 00" E 410.00'

N 63°13'00"W 763.12'

R0512'

43.00'

MATCH



420 DRAINAGE AND
UTILITY EASEMENT

LOT 20
194 AC

20' DRAINAGE
EASEMENT

T17
1.0 AC

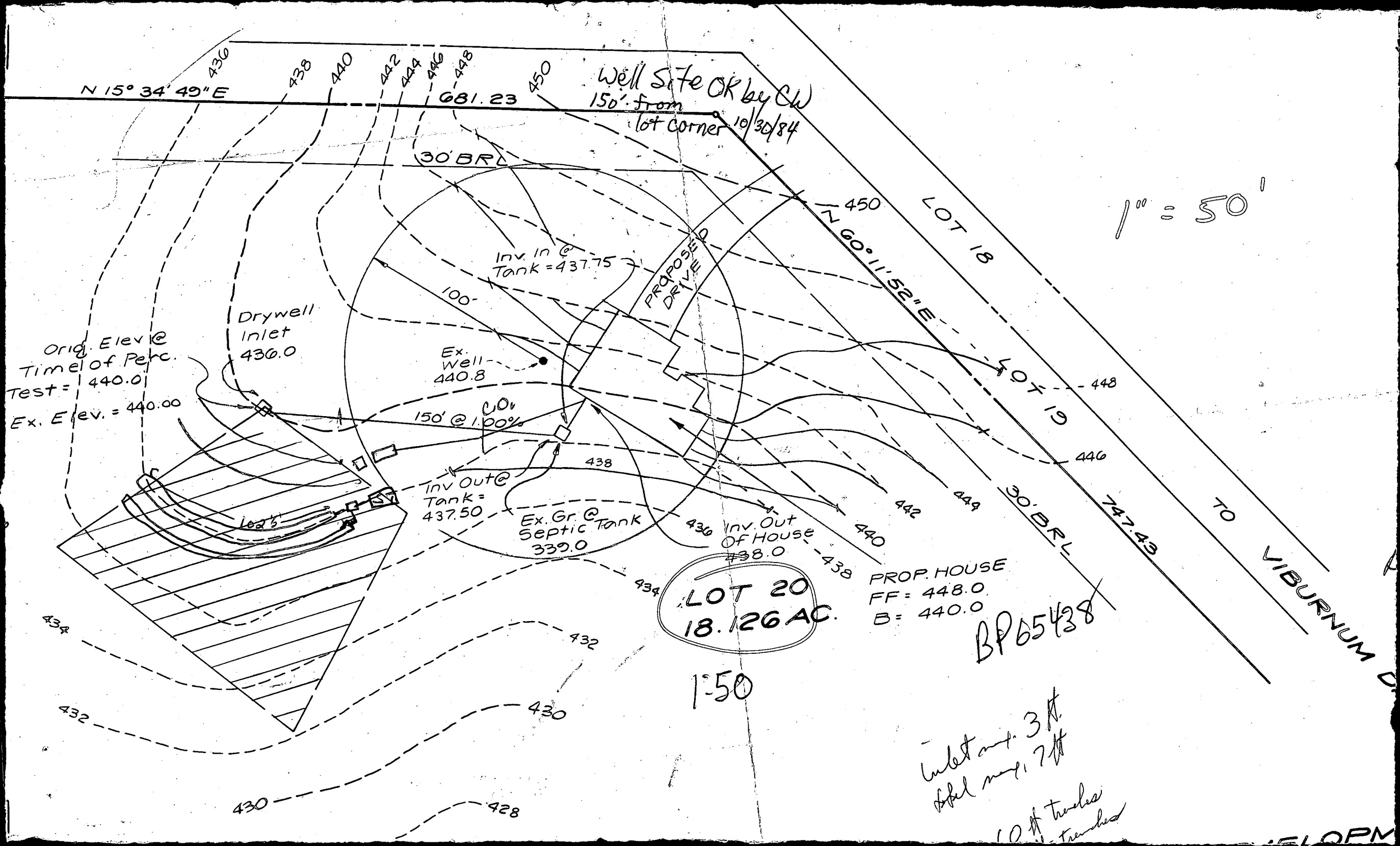
28

5849

5850

4906

5851



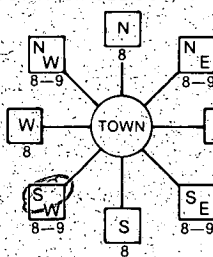
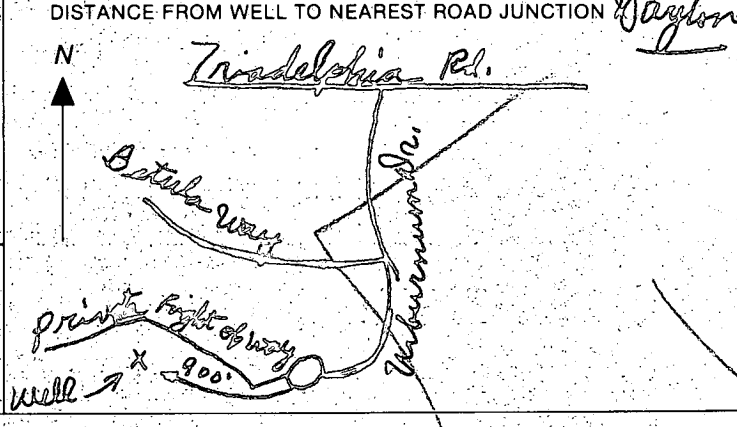
1" = 50'

LOT 20
18.126 AC.

BP 65438

Inlet out 3 ft.
Sewer man 7 ft.
10 ft trenches
Trenches

ELOPN

B 1 8549 <small>THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS</small>	SEQUENCE NO. (OEP USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	OEP PERMIT NUMBER HO-81-0775 <small>fill in this form completely</small>
Date Received 11/5/84 - 1:10 PM 103589 OWNER INFORMATION GOLDBERG JOHN 15 Last Name 34 First Name 7265 COAT FAIR CT 36 Street or RFD 55 ELLICOTT CITY MD 21045 57 Town 70 State 72 Zip 76		B 3 LOCATION OF WELL HOWARD 8 COUNTY 21 KALMIA FARMS 23 SUBDIVISION 42 SECTION 2 LOT 20 DAYTON 52 NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) 3 1/2 MI 73 76 77 78	
DRILLER INFORMATION Joseph C. Mayne 238 Driller's Name 77 License No. 80 Joseph C. Mayne Firm Name 5512 Ridge Rd. Mt. Airy, Md. Address Joseph C. Mayne 10/25/84 Signature Date		B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  11 NEAR WHAT ROAD 30 Wilburna Drive ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH <input checked="" type="radio"/> WEST <input type="radio"/> EAST <input type="radio"/> SOUTH <input type="radio"/> 34 900 37 DISTANCE FROM ROAD ENTER FT or MI FT 38 39	
B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 5 8 12 AVERAGE DAILY QUANTITY NEEDED 500 (GAL. PER DAY) 14 20		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL HOWARD A27470 COUNTY NAME COUNTY NO. OEP SIGNATURE STATE HEALTH INSERT S <input type="checkbox"/> 41 DATE ISSUED 4/30/85 103087 C. Wilbur 43 48 CO SIGNATURE EXP. DATE NORTH GRID 506000 EAST GRID 0792000 50 55 57 63	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="radio"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="radio"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) 22 <input type="radio"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="radio"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input type="radio"/> 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 E 790 N 500 000 000	
APPROXIMATE DEPTH OF WELL 300 FEET 24 28 APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST INCH		METHOD OF DRILLING (circle one) BORED (or Augered) <input checked="" type="radio"/> JETTED <input type="radio"/> Jetted & DRIVEN 30 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary) 37 CABLE REVERSE-ROTary DRIVE-POINT other	
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="radio"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 <input type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY <input type="radio"/> THIS WELL WILL DEEPM AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
Not to be filled in by driller (OEP USE ONLY) APPROP. PERMIT NUMBER GAP 54 63 FORCE CW WRITE INITIALS PERMIT NO. HO-81-0775 67 68 IN BOX 70 71 72 73 74 75 76 77 78 79 SPECIAL CONDITIONS			

Page 1 of 1
Date November 5 1984

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-0275
Location of property (road) Viburman Drive
Subdivision Kalmia Farms Lot 20 Block Plat Sec. 2
Well Driller Joseph Mayne Owner John Goldberg

Depth of well 225
Distance of measuring point (M.P.) above ground 1
Static water level (S.W.L.) below M.P. 3

Time pump started 12:10 Pumping rate 126 PM
Total time 15 m to reach pumping water level 23 ft. below M.P.

[illegible]

C1 3004 SEQUENCE NO. (OEP USE ONLY)
1 2 3 4 5 6
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

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.

COUNTY
NUMBER A27470

DATE Received
8 13

DATE WELL COMPLETED
11 10 58 4

Depth of Well
22 22 5 26
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
H0-81-0775
28 29 30 31 32 33 34 35 36 37

OWNER GOLDBERG JOHN
STREET OR RFD last name VIBURNUM DRIVE first name TOWN DAYTON
SUBDIVISION KALMA FARMS SECTION 2 LOT 20

WELL LOG
Not required for driven wells
STATE THE KIND OF FORMATIONS
PENETRATED, THEIR COLOR, DEPTH,
THICKNESS AND IF WATER BEARING
DESCRIPTION (Use additional sheets if needed) FEET FROM TO Check if water bearing
Brown Shale 0-15
Sand 15-43
Brown Shale 43-46
Gray Mica Rock 46-225

GROUTING RECORD
WELL HAS BEEN GROUTED (Circle Appropriate Box) YES Y NO N
TYPE OF GROUTING MATERIAL
CEMENT CM BENTONITE CLAY BC
NO. OF BAGS 11 NO. OF POUNDS 1034
GALLONS OF WATER 66
DEPTH OF GROUT SEAL (to nearest foot)
from 0 ft. to 45 ft.
(enter 0 if from surface)

CASING RECORD
casing types insert appropriate code below
STEEL ST CONCRETE CO
PLASTIC PL OTHER OT
MAIN CASING TYPE Nominal diameter top (main) casing (nearest inch) Total depth of main casing (nearest foot)
S 7 6 49
60 61 63 64 66 70

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

SCREEN RECORD
screen type or open hole insert appropriate code below
STEEL ST BRASS BR OPEN HOLE HO
PLASTIC PL OTHER OT

DEPTH (nearest ft.)
H0 48 225
EACH SCREEN
1 8 9 11 15 17 21
2 23 24 26 30 32 36
3 38 39 41 45 47 51
SLOT SIZE 1 2 3
DIAMETER OF SCREEN (NEAREST INCH)
56 60

GRAVEL PACK
IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)
T (E.R.O.S.) WQ
70 72 74 75 76
TELESCOPE CASING LOG INDICATOR OTHER DATA

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 13
WHEN PUMPING 23
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
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 47
CASING HEIGHT (circle appropriate box and enter casing height)
+ above - below LAND SURFACE (nearest foot) 50 51

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)
580' 450'

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 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. 238
DRILLERS SIGNATURE Joseph L. Marpe
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

Well Permit No. HO - 81-0775
Location of property (road) VIBURNUM DRIVE
Subdivision KALMA FARMS Lot 20 Block Plat Sec. II
Well Driller J. MAYNE Owner JOHN GOLDBERG

Depth of well 225
Distance of measuring point (M.P.) above ground 1
Static water level (S.W.L.) below M.P. 13

- Time pump started 12/10 Pumping rate 12
Total time 15 min to reach pumping water level 23' ft. below M.P.

- [illegible]

27470

8/15/86 AM

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

Howard County Health Department
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Court House Square
Ellicott City, Md. 21043
461-9933

New Installation ☒
Replacement ☐

Receipt # 36433
Date 1/20/86
Telephone 301 421-9279

Name of Installer ROBERT S. BECK

License number 2163
Certified Well Pump Installer ☐ Well Driller ☐ Registered Plumber ☒

Name of Property Owner JOEL GOLDBERG Telephone 992 8822
Subdivision KALMIA FARMS Lot # 20 Well tag # - - -
Site Address 14671 VIBURNUM DRIVE
DAYTON, MD 21036

Pump Motor Pitless Adapter
1. Type 1. Horsepower 1/2 1. Make MARTINSON
a. Deep well jet 2. RPM 2. Model #
b. Shallow well jet 3. Voltage 3. Depth
c. Submersible ☒ a. 110
2. Make GOULDS b. 220 ☒
3. Model #
4. Capacity GPM
5. Pump exceeds well capacity Yes ☐ No ☐
6. If Yes, is low pressure cutoff switch installed? Yes ☐ No ☐
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors ☒ Cable guards ☒ Other ☐

Tank Piping Well data
1. Capacity 42 1. Type PLASTIC 1. Depth ft.
2. Pressure relief 2. Size 1" 2. Yield GPM
valve? ☒ 3. NSF and/or BOCA 3. Static water
Code approved ☒ level ft.
4. Depth of supply 4. Will water supply
line 48" be disinfected by
installer? ☐

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

Signature of Applicant: Robert S. Beck
Date: 1/20/86

Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.