

SEPTIC SYSTEM FIRST BEFORE BUILDING PERMIT

# PERMIT

P 29610

A 29029

*3/28/79  
a.m. if possible*

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH\*

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 5th 3rd

## INDEXED

DATE 3/21/79

Liberty Backhoe Service

IS PERMITTED TO INSTALL  ALTER

ADDRESS 7311 Brangles Rd. Marriottsville, Md. 21104 PHONE 795-2642

SUBDIVISION Friendship Manor ROAD 2637 Wellwood Way LOT 10  
*Route 144 and 32*

PROPERTY OWNER Chateau Builders, Inc.

ADDRESS 9051 8654 Balto. National Pike Ellicott City, Md. 21043

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 130 SQ. FT. per bedroom

INLET PIPE 2 FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH 12 FT. BELOW ORIGINAL GRADE

EFFECTIVE DEPTH AT \_\_\_\_\_ FT. BELOW ORIGINAL GRADE.

LOCATE DISPOSAL AREA \_\_\_\_\_ FT. FROM \_\_\_\_\_ LOT LINE AND \_\_\_\_\_ FT. FROM \_\_\_\_\_ LOT LINE AS SEEN WHEN FACING LOT FROM

BLDG. PERMIT SIGNED  
AND RETURNED 3/30/79  
*Serial No. 37004*

Dry well to have 130 sq. ft. absorbent sidewall area. Locate dry well 15 feet from the front lot line and 56 feet from the right lot line as seen when facing the lot from road.

OK to have a short ditch off Dry well if needed - 12 ft. deep with 8 ft. of stone.

PLANS APPROVED BY Raymond Hodges DATE 1/2/79

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.

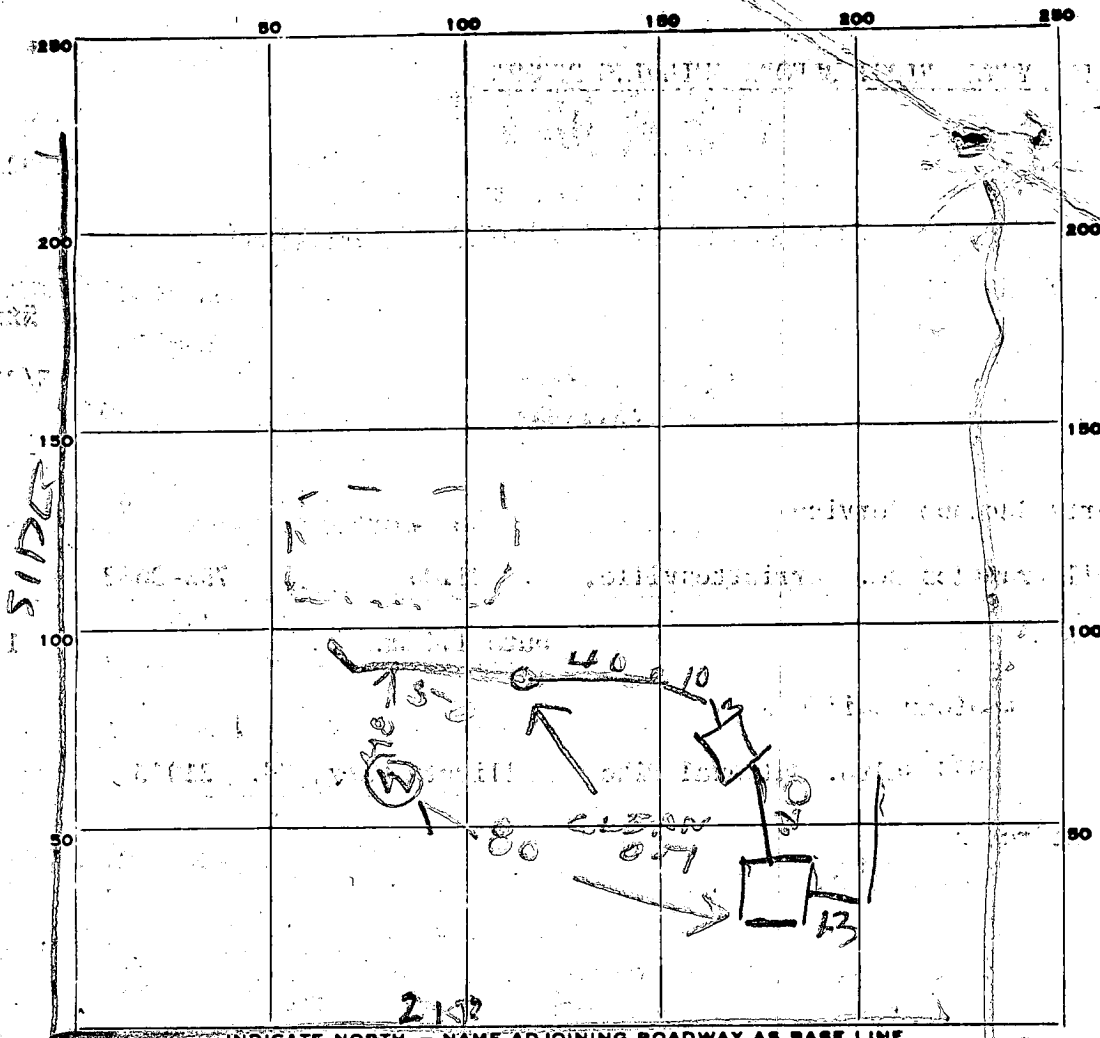
PERMIT VOID AFTER THREE YEARS.

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.**

*serial 40969  
pool permit  
signed 8/21/79*

*A 29029*



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

WELL WORTH WAY

PERMIT CARD \_\_\_\_\_

SEPTIC TANK, LEVEL OK 1250

CLEANOUTS ST / DW  
OK / OK

DISTRIBUTION BOX, LEVEL TOP 1 1/2 FT. BELOW GRADE

TILE FIELD, DEPTH 10 1/2 FT.

TRENCH WIDTH 2 FT.

GRAVEL DEPTH 18 IN.

TOTAL LENGTH 17 FT.

NUMBER OF TRENCHES \_\_\_\_\_

TOTAL BOTTOM AREA 136

SEEPAGE PITS, INSIDE DIAMETER PERIMETER 45 FT.

DEPTH BELOW INLET 9.5 FT.

ABSORBENT AREA \_\_\_\_\_

SQ. FT.

REMARKS

3/28/79 AM INLET 2 1/2 FT BELOW GRADE

INLET TO DITCH 2 1/2 FT BELOW GRADE

BACK FILL EVERYTHING EXCEPT DITCH. FILL

DITCH WITH PIPE & STONE

3/29/79 PM STONE ADDED. CONNECT

HOUSE TO SYSTEM & CALL RH

DATE SYSTEM APPROVED 3/28/79

INSPECTOR D.K.W.

FRIENDSHIP MANOR LOT 10

SEPTIC TANK 3 BEDROOM, 1000 GALLON

Rt 144 & Rt 32

4 BEDROOM, 1250 GALLON

DRY WELL TO HAVE 130 SQUARE FEET OF SIDEWALL AREA PER BEDROOM

DRY WELL INLET TO BE MAX. 2 FEET BELOW ORIGINAL GRADE.

DRY WELL BOTTOM (MAXIMUM DEPTH) TO BE 12 FEET BELOW ORIGINAL GRADE.

PLACE THE DRY WELL 15 FEET FROM THE FRONT LOT LINE AND 56 FEET FROM THE RIGHT LOT LINE AS SEEN WHEN FACING THE LOT FROM ROAD.

OK TO HAVE A SHORT DITCH OFF DW IF NEEDED 12" DEEP WITH 8" OF STONE SYSTEM FIRST PER FE BEFORE BUILDING PERMIT

*Retest*

# APPLICATION

*Application not used on Vetic property - transferred over to this lot for retesting.*

*11/6/78  
1:30 p.m. Cancellation machine broke down*

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

*SYSTEM FIRST*

DISTRICT *5th 3rd*  
DATE *10/16/78*

*See separate sheet for new specs*

*11/20/78  
1:30 p.m.  
2ND*

*465-3000*

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 William B. Ridgely

*1024*

ADDRESS Spring Meadow Farm, Cooksville, Md. 21728 PHONE Boender - 465-7777

PROPERTY LOCATION

SUBDIVISION Friendship Manor LOT NO. 10

ROAD AND DESCRIPTION Route 144 and Route 32

SIZE OF LOT ? 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/ Jack Boender

APPROVED BY *Raymond Hodger* FOR *Dry Well* DATE *1/21/79*

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

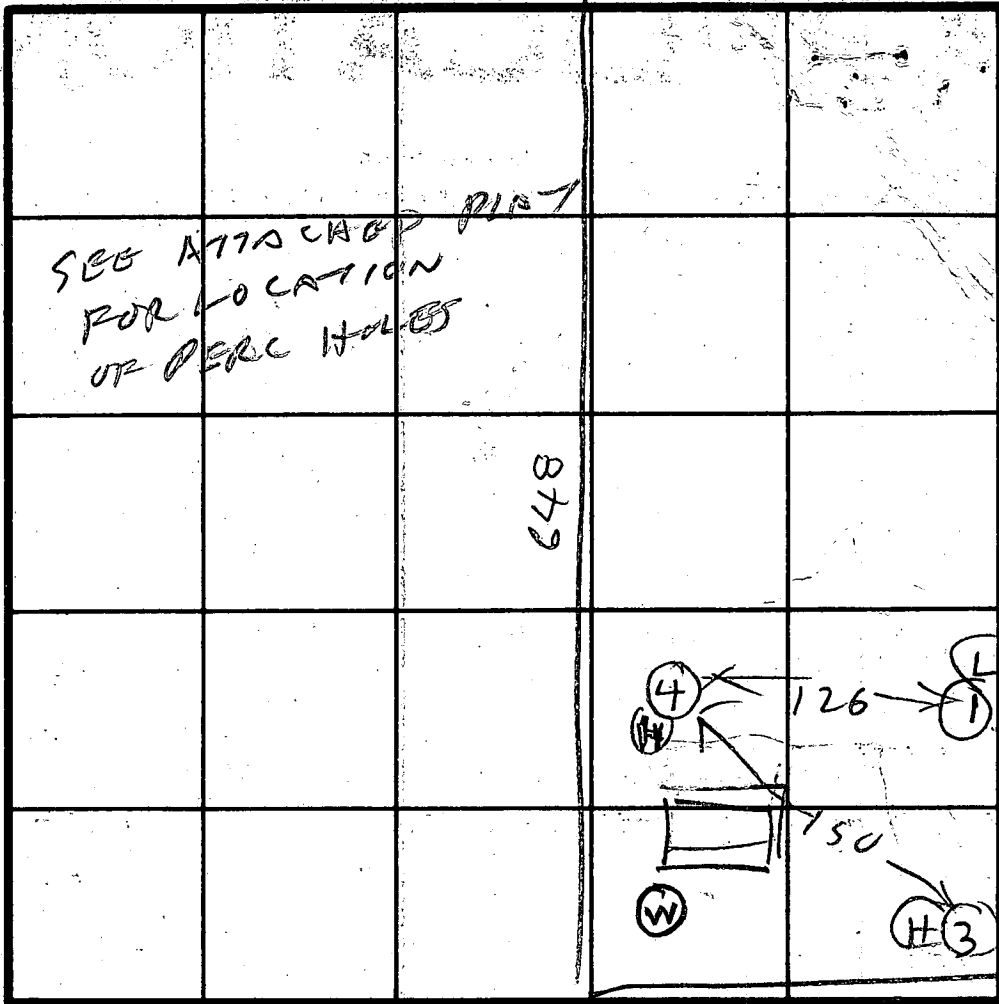
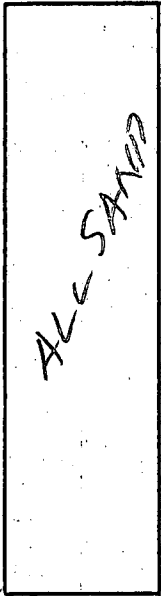
REASONS FOR REJECTION OR HOLDING *11/21/78 - PERC OK BUT PLAT*

*SHOW LOCATION & ELEVATIONS OF HOLES, WELL &*

*HOUSE SITE NEEDED - PLANS MUST SHOW HOUSE SITE HIGHER THAN SEWAGE DISPOSAL AREA R14*  
*1/29/78 NEW PERC PLAT*  
*APPROVED BY H.O.*

# THIS IS NOT A PERMIT

3  
SOIL PROFILE



674

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

WELL WORTH RD

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
11/20/78	1D	14	313	315	315	318	3	
	1S	3	313	314	314	315	1	
	2S	3	319	320	320	325	5	
	2D	13	319	320	320	322	2	
	3S	3	324	325	325	327	2	
	3D	14	324	327	327	332	5	
11/20/78	4V	12	ALL SAND					

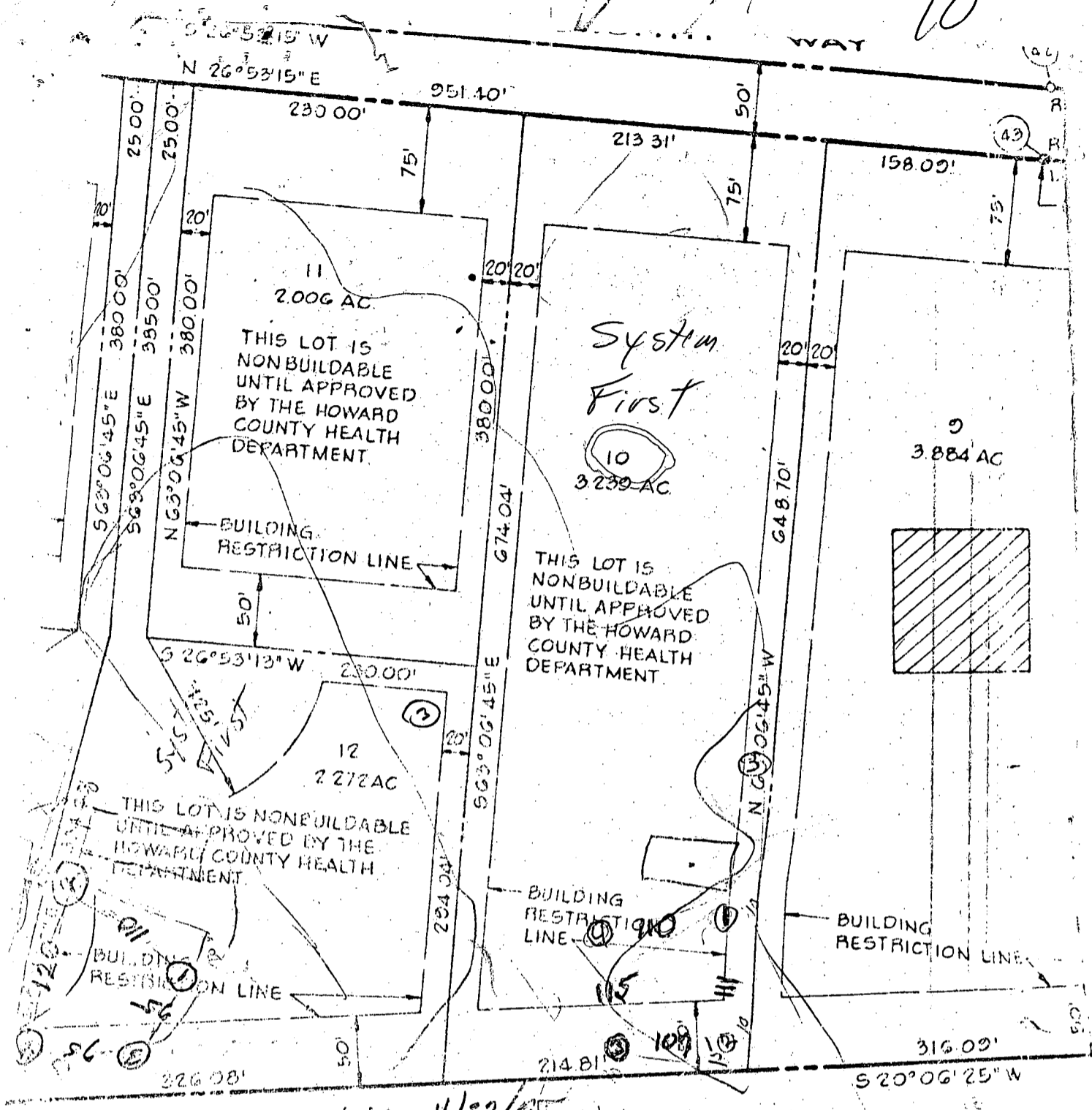
130# / BR

inlet 21" max. 12"



REMARKS Certify Location of Hole System First  
Well Already Drilled  
 TYPE OF SOIL \_\_\_\_\_  
 TESTED BY RB ALSO PRESENT DEVIRDA

10



old plat 404 lot 10 4/27/45  
 15 3 1015 1015 1025 8  
 4 13 1015 1017 1019 2  
 2 13  
 35 3 1007 1009 1013 4  
 2 13 1007 1010 1014 4  
 4 5 3 1005 1010 1014 4  
 4 19 1005 — 48 min 2/10/45

ETHEL F. HOFFMAN  
 8/132

11 AC.  
 12 AC.  
 IN THIS SHEET 2.039 AC. (PARCEL 'A')

### OWNERS STATEMENT

WE, HAYFIELD FARMS, INCORPORATED, A MARYLAND CORPORATION BY G. ALBERT SCHEEL, PRESIDENT, EVELYN L. SCHEEL, SECRETARY, OWNERS OF THE PROPERTY SHOWN AND DESCRIBED HEREON, HEREBY APPROVE THIS PLAN OF SUBDIVISION AND IN CONSIDERATION OF THE APPROVAL OF THIS PLAT BY THE BOARD OF PLANNING AND ZONING, ESTABLISH THE MINIMUM BUILDING RESTRICTION LINES AND GRANT TO THE COUNTY, MARYLAND, ITS SUCCESSORS AND ASSIGNS, 1) THE RIGHT TO LAY, CONSTRUCT AND MAINTAIN WATER MAINS AND SERVICES IN AND ABOUT THE PROPERTY SHOWN AND DESCRIBED HEREON.

HEREBY  
 THAT IT  
 CATHER  
 FACT TO  
 27, 1977

# APPLICATION

A 26033

## 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 3rd

DATE 6/7/77

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 William B. Ridgely

ADDRESS Spring Meadow Farm Cooksville, Md. 21728 PHONE Carol Clark  
531-5115

PROPERTY LOCATION:

SUBDIVISION Ridgely Property (Friendship Manor) LOT NO. 10

ROAD AND DESCRIPTION Rte. 144 - Rte. 32

SIZE OF LOT ? TYPE BLDG. 3 or 4 bedroom  
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/ Albert Scheel

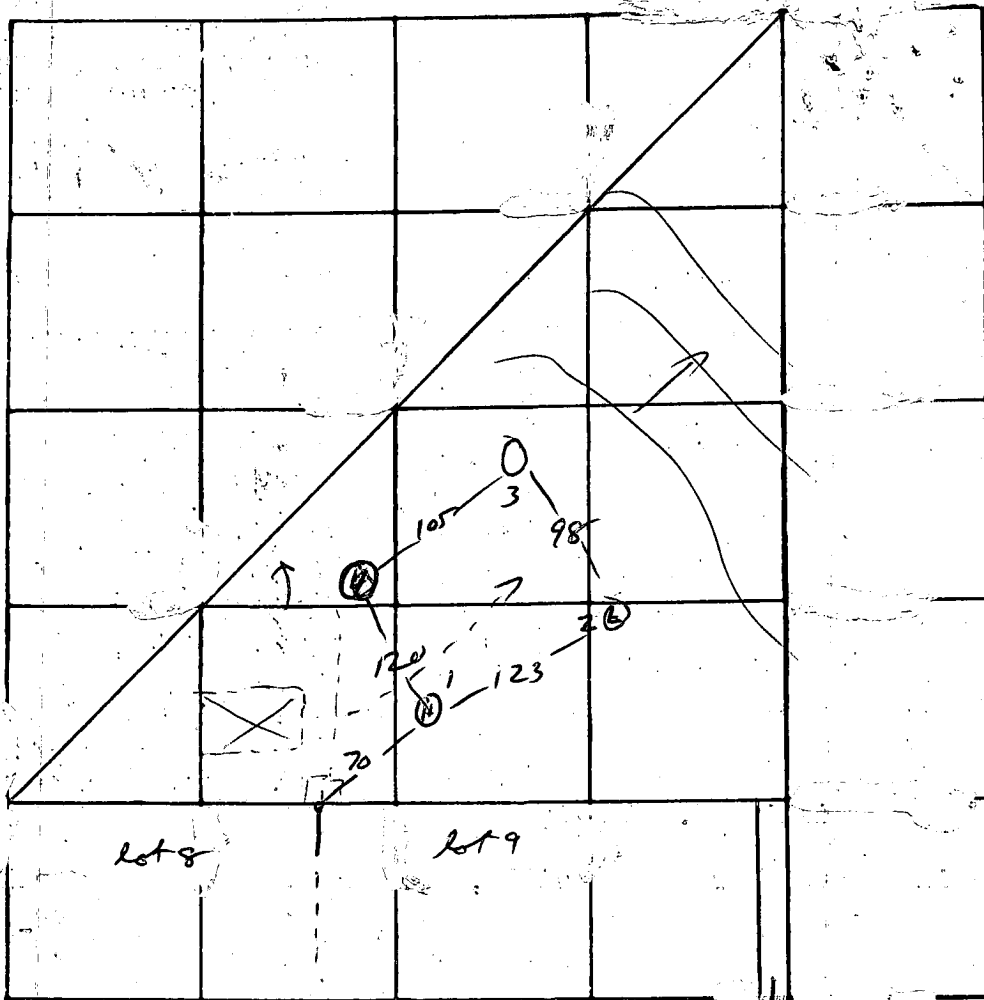
APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_  
(KIND OF SYSTEM)

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_  
(KIND OF SYSTEM)

HOLD/PENDING FURTHER TESTS Hold - DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING Re numbering of lots. This test does not correspond to existing lot

# THIS IS NOT A PERMIT



INDICATE NORTH - NAME ADJOINING ROADWAY AS

← RW →

DATE	TEST NO.	DEPTH	PRE-WET		TEST 1" DROP		TIME
			START	STOP	START	STOP	
1/24/77	1	2	10 <sup>34</sup>	10 <sup>35</sup>	10 <sup>35</sup>	10 <sup>37</sup>	2
	1A	13	10 <sup>34</sup>	10 <sup>39</sup>	10 <sup>39</sup>	10 <sup>47</sup>	8
	2	2 1/2	10 <sup>36</sup>	10 <sup>38</sup>	10 <sup>38</sup>	10 <sup>42</sup>	4
	2A	13	10 <sup>36</sup>	10 <sup>38</sup>	10 <sup>38</sup>	10 <sup>43</sup>	5
	3	2	10 <sup>37</sup>	10 <sup>38</sup>	10 <sup>38</sup>	10 <sup>40</sup>	2
	3A	13	10 <sup>32</sup>	10 <sup>39</sup>	10 <sup>39</sup>	10 <sup>42</sup>	3
	4	12	vis				

REMARKS \_\_\_\_\_

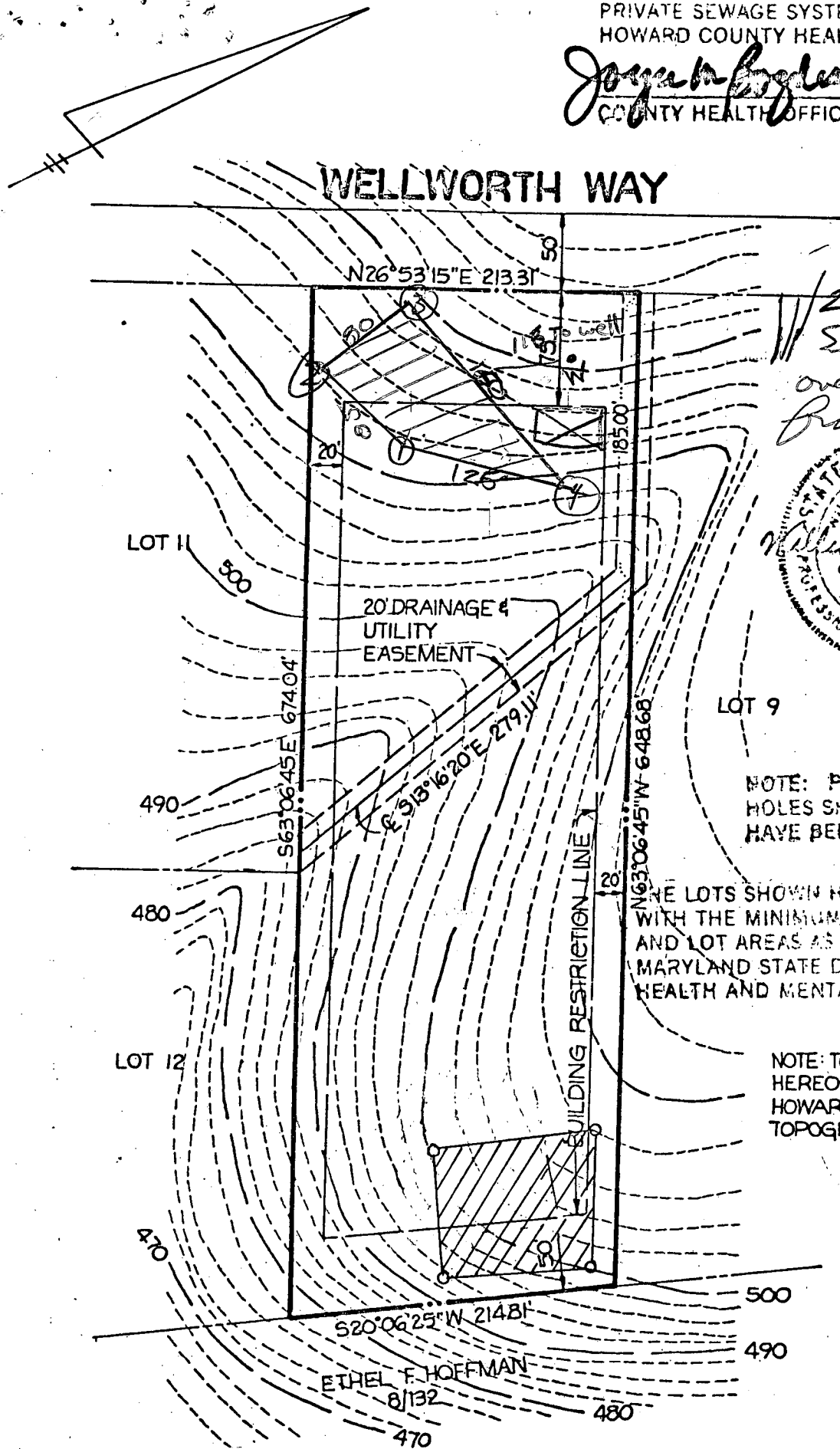
TYPE OF SOIL sandy loam

TESTED BY M ALSO PRESENT: Scheel



APPROVED: FOR PRIVATE WATER AND  
PRIVATE SEWAGE SYSTEMS.  
HOWARD COUNTY HEALTH DEPARTMENT

*Joyce M. Byler* 9-15-78  
COUNTY HEALTH OFFICER DATE



*20' 70'*  
*Sewage Area*  
*over 100 ft*  
*from existing well*

STATE OF MARYLAND  
WILLIAM G. HARTLEY  
REGISTERED PROFESSIONAL LAND SURVEYOR  
9/14/78

NOTE: PERCOLATION TEST HOLES SHOWN HEREON HAVE BEEN FIELD LOCATED.

THE LOTS SHOWN HEREON COMPLY WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREAS AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF HEALTH AND MENTAL HYGIENE.

NOTE: TOPOGRAPHY SHOWN HEREON IS BASED ON HOWARD COUNTY AERIAL TOPOGRAPHY MAPS.

TITLE			
<b>PERCOLATION TEST PLAT</b>			
PROJECT			
<b>FRIENDSHIP MANOR · SECTION 2 · LOT 10</b>			
LOCATION			
3 RD ELECTION DISTRICT		HOWARD COUNTY, MARYLAND	
DATE:	DESIGN BY:	DRAWN BY:	CHECKED BY:
SEPTEMBER, 1978		DLC	W.G.H.
SCALE:	JOB NO.:	DRAWING NO.:	
1" = 100'	7768		

boender associates

engineers  
surveyors  
planners

**B 1** 4430 SEQUENCE NO. (WRA USE ONLY)

**STATE OF MARYLAND**  
**WATER RESOURCES ADMINISTRATION**  
**TAWES STATE OFFICE, BLDG., ANNAPOLIS, MARYLAND 21401**  
**APPLICATION FOR PERMIT TO DRILL WELL**

WRA PERMIT NUMBER **HO-715-2958**  
 FILL IN THIS FORM COMPLETELY

**DATE RECEIVED (WRA USE ONLY)** 9/27/78 9:30 A.M.

**OWNER** *Chateau Builders*  
 COL 15 LAST NAME FIRST NAME COL 34

**STREET OR RFD** *8651 Belt Rd. Sike*  
 COL 36 COL 55

**POST OFFICE** *Ellicott City Md.*  
 COL 57 COL 76

**B 1 CONTINUED DRILLER INFORMATION**

**DATE** *8/25/78* **LICENSE NUMBER** *40*  
 77 80

**FIRST NAME** *H. F. Ector* **DRILLER** **LAST NAME**

**SIGNATURE** *H. F. Ector*

**B 3 LOCATION OF WELL**

**COUNTY** *Howard* (DO NOT ABBREVIATE COUNTY NAME) 21

**SUBDIVISION** *Fremont Manor* 23 42

**SECTION** *10* 44 46 48 50

**NEAREST TOWN** *Wheaton Friendsville* 52 71

**MILES FROM TOWN (ENTER 0 IF IN TOWN)** *7.3* 76 77 78

**B 2 WELL INFORMATION**

**MAXIMUM PUMPING RATE (GALLONS PER MINUTE)** *5* 8 12

**AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY)** *600* 14 20

**B 4 DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)**

N NORTH  E EAST  NE NORTHEAST  SE SOUTHEAST  
 S SOUTH  W WEST  NW NORTHWEST  SW SOUTHWEST

**NEAR WHAT ROAD** *RT 144*

**ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)**  N  S  E  W

**DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX)** *400* 34 37 38 39

**USE FOR WATER (CIRCLE APPROPRIATE BOX)**

HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)

FARMING, AGRICULTURE, IRRIGATION

INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT

MUNICIPAL WATER SUPPLY } MUST HAVE STATE HEALTH DEPT. APPROVAL

PRIVATE WATER COMPANY

TEST

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 DEPTH OF WELL** *150* FEET  
 24 28

**APPROXIMATE DIAMETER OF WELL** *6* (NEAREST INCH)

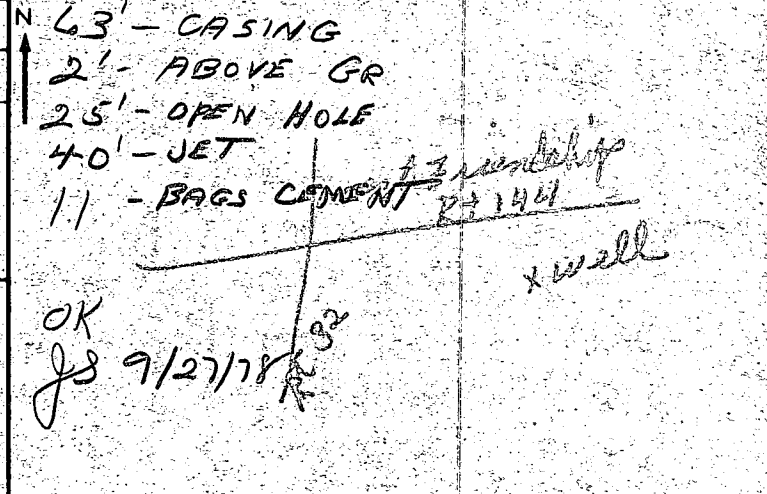
**METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)**

BORED (OR AUGERED)  JETTED  DRIVEN

30-37  AIR-ROTARY  AIR-PERCUSSION  ROTARY (HYDRAULIC ROTARY)

CABLE  REVERSE-ROTARY  DRIVE-POINT

**OTHER (DESCRIBE)**



**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

THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY

THIS WELL WILL DEEPEM AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)

**NOT TO BE FILLED IN BY DRILLER (WRA USE ONLY)**

**APPROPRIATION PERMIT NUMBER**  **ENGINEER REVIEW DISTRICT NO.**

**FORCE**  **CONDITIONS**

**BOX NUMBER** E *810*  
 N *530*

**NORTH COORDINATE** 50 51 52 53 54 55

**EAST COORDINATE** 57 58 59 60 61 62 63

**ELEVATION AT WELL HEAD (FEET)**  65 66 67 68 70/0 5/0

**B 4 CONTINUED HEALTH DEPARTMENT APPROVAL**

**COUNTY NAME** *Howard* **COUNTY NO.** *W28763*

**DATE** *082878*

**APPROVED BY** *Donald W. Monaghan, Sanitarian*

**B 5 SPECIAL CONDITIONS 8-63 (WRA USE ONLY)**

1 2 3 (SEQ. NO.) 6