

11/2/80

Approved: 11/20/80
Stephen Keil

PERMIT

P 30889
A 29975

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

INDEXED

DISTRICT 5th

05-350557

DATE 9/2/80

Garland L. Brian, Sr. IS PERMITTED TO INSTALL ALTER

ADDRESS 13187 Highland Road, Highland, Md. 20777 PHONE 286-2794

SUBDIVISION ROAD 13193 Highland Road LOT

PROPERTY OWNER Garland L. & Sandra D. Brian Gary & Eileen Townsend

ADDRESS same as above

SPECIFICATIONS 3 bedrooms

SEPTIC TANK CAPACITY 1000 GALLONS

DRAIN FIELD DEPTH FEET, BOTTOM AREA SQ. FT.

DEEP TRENCH DEPTH FEET, BOTTOM AREA SQ. FT.

SEEPAGE PITS ABSORBENT SIDE-WALL AREA 156 SQ. FT. per bedroom in dry well.

INLET PIPE 4 FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH 12 FT. BELOW ORIGINAL GRADE

EFFECTIVE DEPTH AT FT. BELOW ORIGINAL GRADE.

LOCATE DISPOSAL AREA 237 FT. FROM front LOT LINE AND 146 FT. FROM right LOT LINE AS SEEN WHEN FACING LOT FROM the road.

Okay to add a trench off the dry well if needed, 12 ft. deep, with 7 ft. of stone under pipe. Trench to follow the contour of the ground. CALL FOR INSPECTION OF TRENCH BEFORE PLACING GRAVEL IN TRENCH. Leave 5 ft. earth buffer between trench and dry well.

PLANS APPROVED BY Raymond Hodges DATE 10/16/79

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.

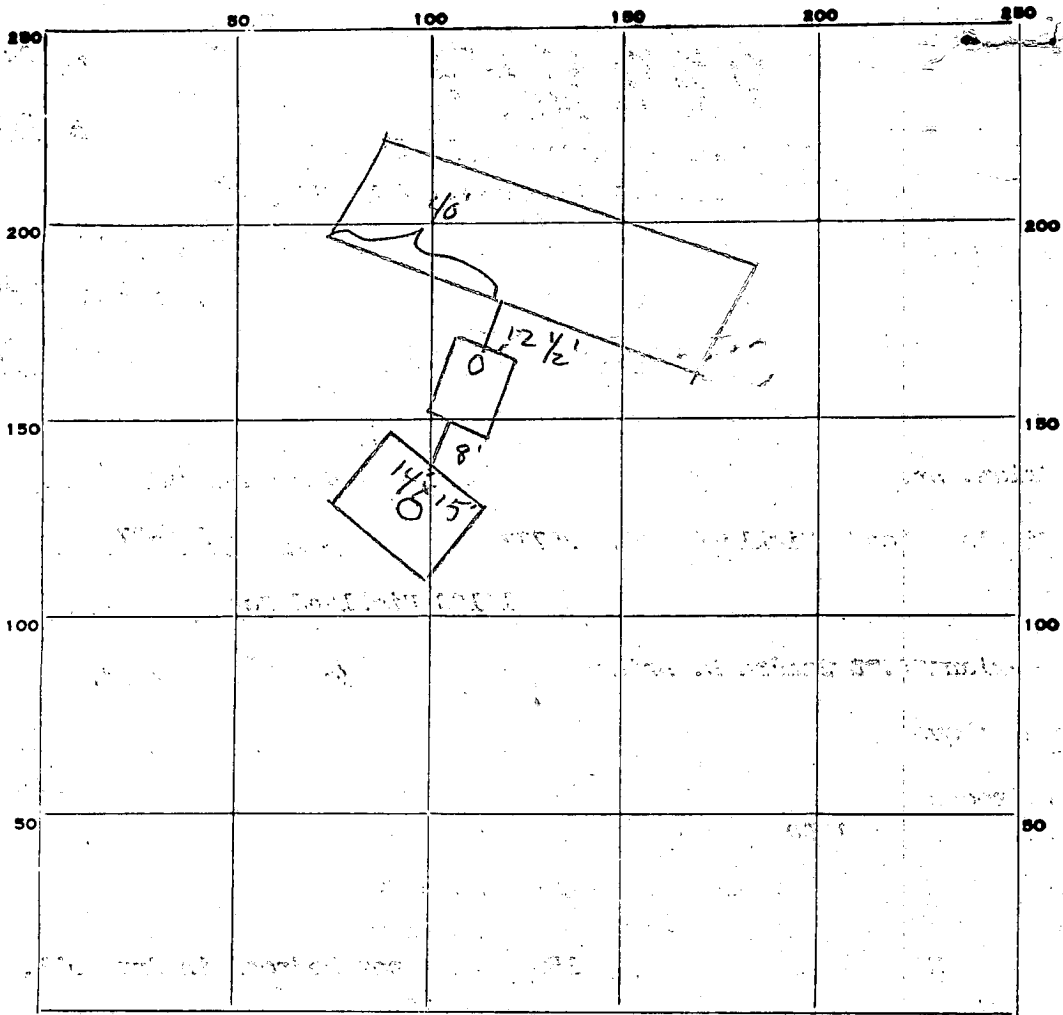
PERMIT VOID AFTER THREE YEARS.

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

BLDG. PERMIT SIGNED AND RETURNED 8/2/80
Serial # 53723
2 car garage

A 29975

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



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD _____

SEPTIC TANK, LEVEL _____

CLEANOUTS _____

~~ST/DW~~ NEED CAP
OK 11/20/80 SK

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH _____ FT. TRENCH WIDTH _____ FT.

GRAVEL DEPTH _____ IN. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA _____

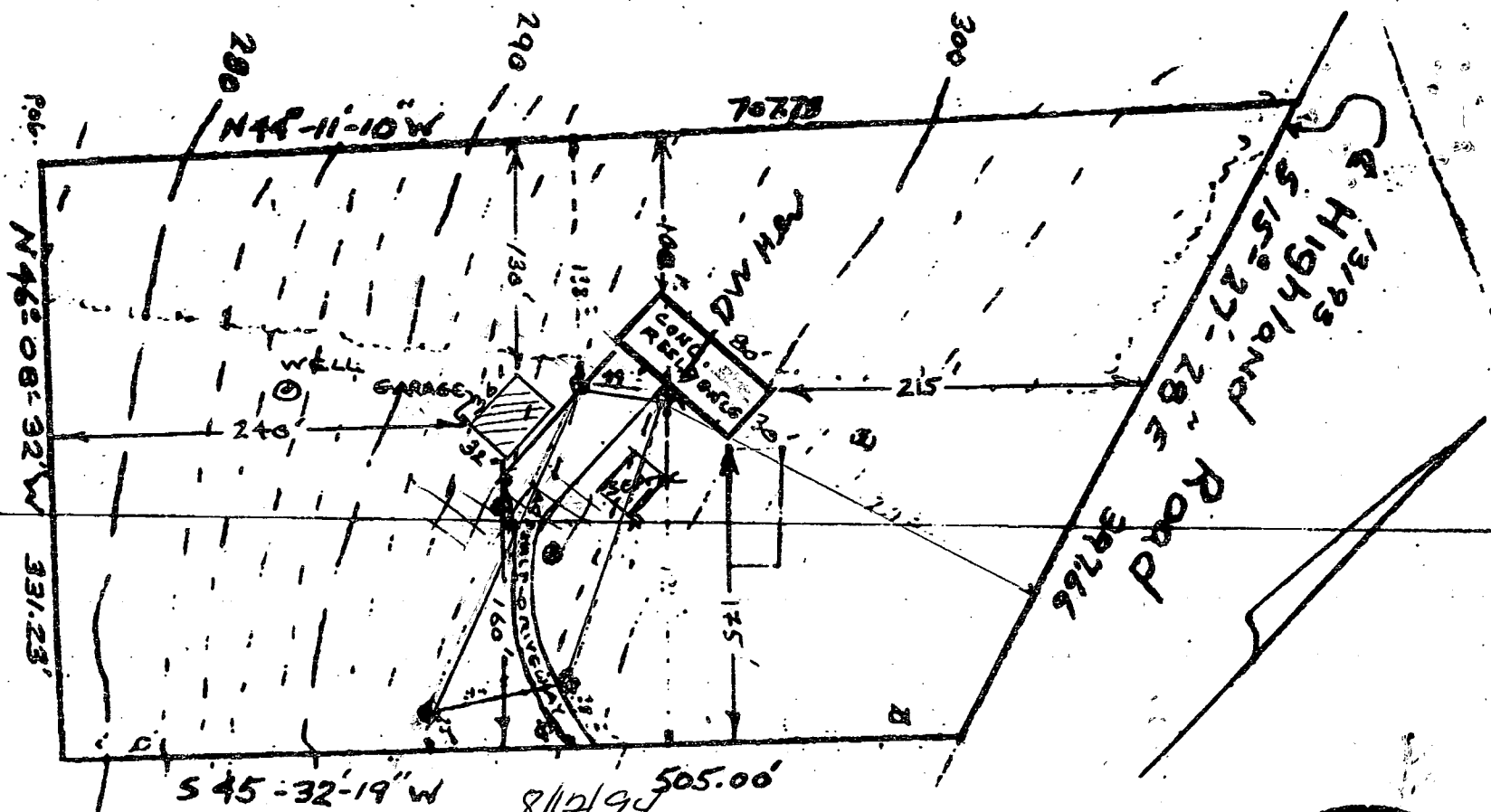
SEEPAGE PITS, INSIDE DIAMETER ^{Perimeter} 58' FT. DEPTH BELOW INLET 8 FT.


ABSORBENT AREA 46.4 SQ. FT.

REMARKS: OK To cover to Day well, need pump on Day well.
+ ran on clean out SK - 11/20/80 OK To cover all work SK & JS

DATE SYSTEM APPROVED 11/20/80

INSPECTOR Stephen G. Hill



- = Percs field located
- = proposed water well
-  This designates a private sewage easement as required by Maryland State Department of Health & Mental Hygiene upon which permanent construction is prohibited.

8/15/94
 proposed garage location
 has no impact to
 existing well
 or septic. Ok
 to proceed

PERC LOCATION PLAT
 Property of
 Ann GARLAND L. & SANDRA D. BRIAN



The lot shown hereon complies with the minimum ownership and lot areas as required by the Maryland State Dept. of Health and Mental Hygiene.

Situated in the
 th. Election district

APPROVED: Private Water & Private Sewer.
James H. Boyd, M.D., M.P.H., 9-21-79
 Howard County Health Officer

HOWARD COUNTY MARYLAND
J. Carl Hughes
 J. Carl Hughes, Clerk

PLS 796

need boundary plat

APPLICATION

7/10/79
9:30 a.m.

✓ A 29975

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

✓ DISTRICT 5TH

✓ DATE JULY 6 '79

7/27/79
9:30 a.m.

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 GARLAND + SANDY BRIAN

✓ ADDRESS 13187 HIGHLAND RD. PHONE 286-2794

HIGHLAND 20777

PROPERTY LOCATION:

✓ SUBDIVISION NA ✓ LOT NO. NA

✓ ROAD AND DESCRIPTION directions 13193 HIGHLAND RD. 1 MI. WEST OF HIGHLAND. 2ND

DRIVEWAY PAST WHITEOAK ESTATES ON LEFT. LOT ON RIGHT

✓ SIZE OF LOT 4.707 ACRES ✓ TYPE BLDG. 300 4 bedrooms SINGLE FAMILY

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 Garland L. Brian

APPROVED BY Raymond Hodges FOR Dry Well DATE 10/16/79

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS try perc at 7 + 15 ft - per DM DATE 7/11/79

REASONS FOR REJECTION OR HOLDING 10/16/79 FINAL PLAT SIGNED RHD

B.P. Appl. # 42077 Spcl 12-10-79 JH

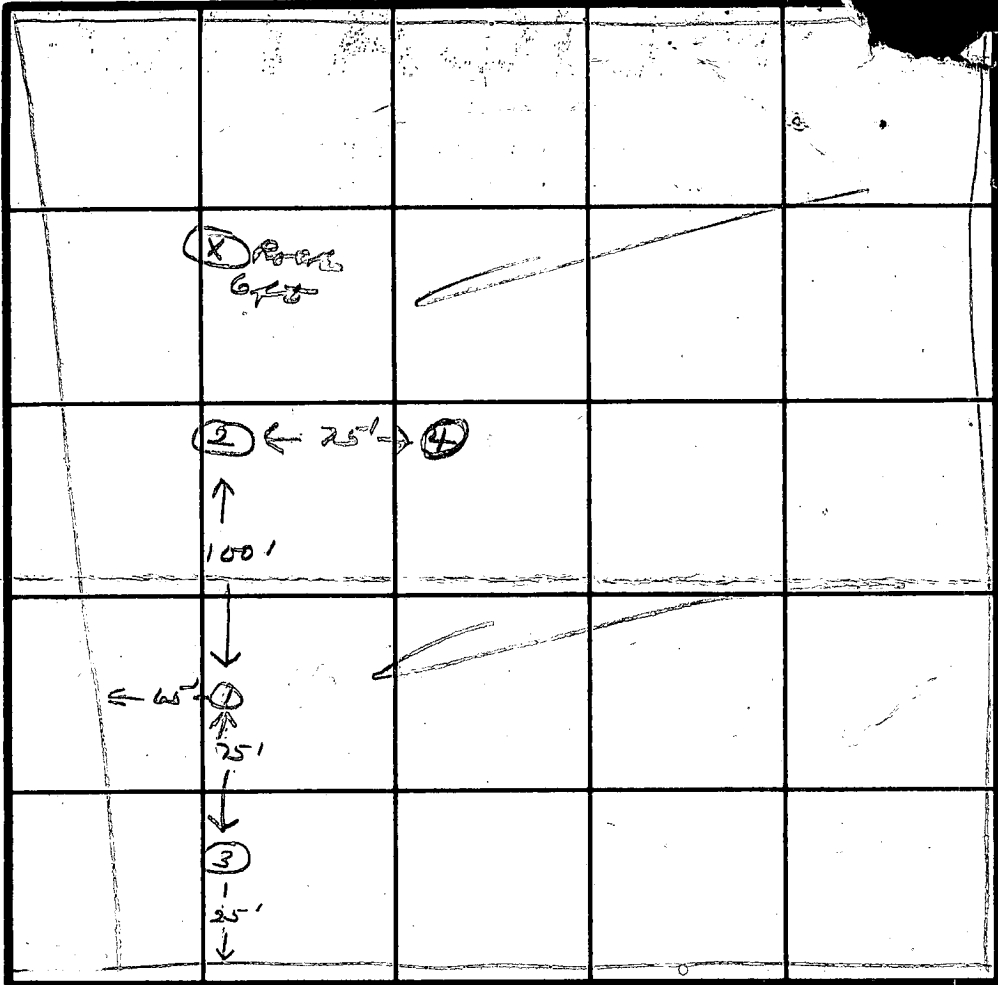
THIS IS NOT A PERMIT

RECEIVED
 HOWARD COUNTY
 HEALTH DEPT.
 ELLICOTT CITY, MD.
 JUL 9 9 10 AM '79

HIGHWAY RD

① ②
 SOIL PROFILE

5-6 ft
 clay
 6-13 ft
 clay, sand
 slate stones



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Unnamed Rd.

| DATE | TEST NO. | DEPTH | PRE-WET | | TEST - 1" DROP | | TIME |
|---------|----------|--------|--------------------------------|-------------|----------------|-------|------|
| | | | START | STOP | START | STOP | |
| 7/10/79 | ① ② | 5 | 9:50 | failed | 10:02 | 10:26 | 24 |
| | 1D | 13 | 9:52 | | | | |
| | ① M | 6 | 10:55 | failed | | | |
| | 2S | 4 | 11:00 | | | | |
| | 2D | 12 | 11:10 | 11:15 | 11:15 | 11:25 | 10 |
| | ① ② | 3 | 11:30 | failed | | | |
| | ① ② | 9 | Hard resources drill with pne. | | | | |
| | 4 | 9 | same as test 3 | | | | |
| 7/27/79 | 5D | 14 | 1035 | 1040 | 1040 | 1044 | 4 |
| | 5S | 5 | 1035 | 1052 | 1052 | 1015 | 23 |
| | 6S | 4 1/2 | 1047 | 1054 | 1054 | 1103 | 9 |
| | 6D | 12 1/2 | 1047 | 1054 | 1054 | 1110 | 16 |
| | 7V | 12 | TOP 4 FT CLAY | 12 FT SANDY | | | |

REMARKS Very heavy clay could not pierce shales.

TYPE OF SOIL

TESTED BY R. HODGES

ALSO PRESENT Pat L... SANDY BR... JOHN BR...

50

Permit

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 29975

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P.O. BOX 476 ELLICOTT, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT 5th

DATE 7/6/79

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 Garland & Sandy D. Brian

ADDRESS 13187 Highland Road PHONE 286-2794

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. _____

ROAD AND DESCRIPTION: Highland Road - 1 mile west of Highland, 2nd driveway past White Oak
Estates on left. Lot on right.

SIZE OF LOT 4.707 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 /s/ Garland L. Brian

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

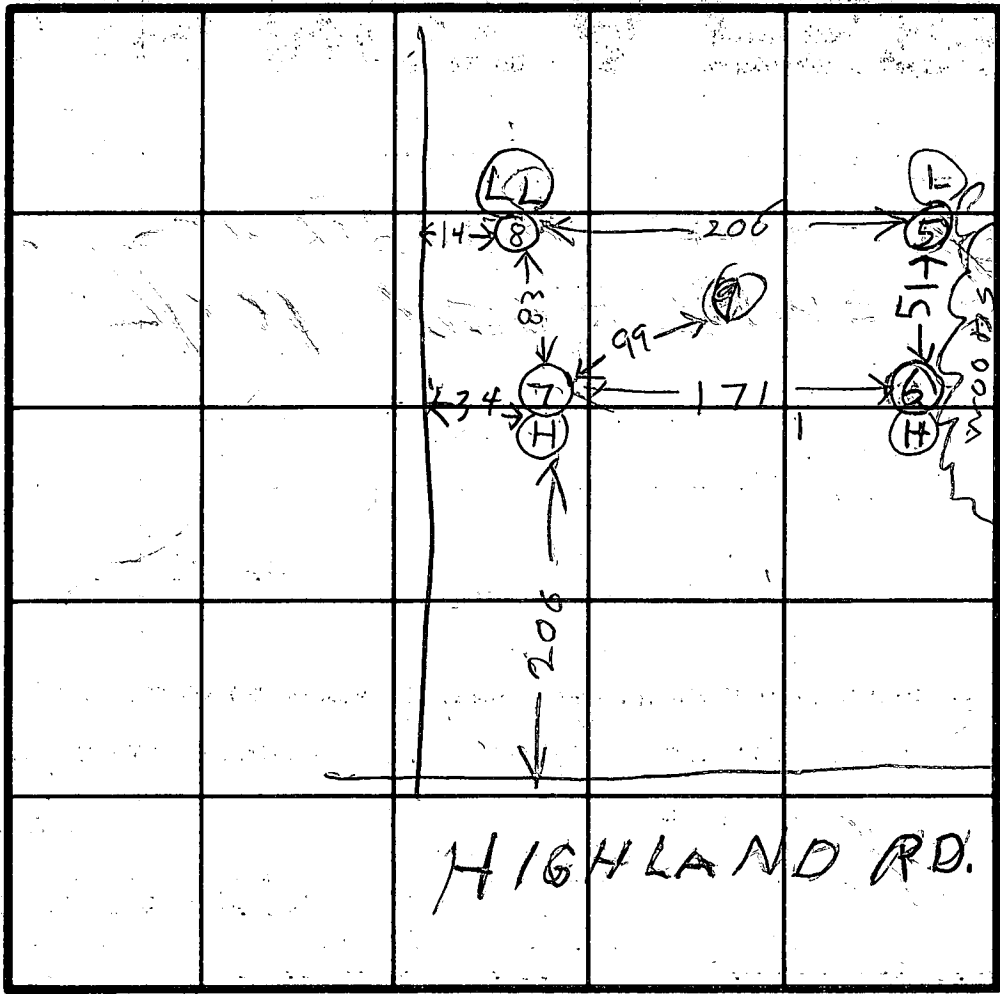
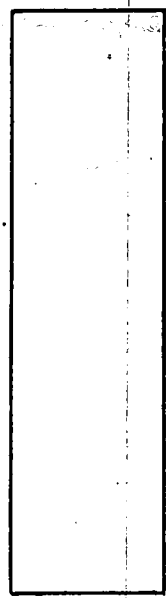
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 7/29/79 PERC TIME OK
NOT FOR UNBENTIFIED HOLES PLAT RA

THIS IS NOT A PERMIT

205

SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

HIGHLAND RD

| DATE | TEST NO. | DEPTH | PRE-WET | | TEST - 1" DROP | | TIME | |
|---------|----------|--------|--------------------------------------|------|----------------|------|------|--|
| | | | START | STOP | START | STOP | | |
| 7/27/74 | 8D | 12 1/2 | 1142 | 1208 | 1208 | 1231 | 22 | |
| 7/27/74 | 8S | 4 | 1144 | 1208 | 1208 | 1231 | 22 | |
| | 9V | 12 | TOP 4 FT - CLAY 36 - 2 FT - SANDY | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

REMARKS _____

TYPE OF SOIL _____

TESTED BY _____ ALSO PRESENT _____

B 1 4606 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-93-3432
 FILL IN THIS FORM COMPLETELY.

DATE RECEIVED (WRA USE ONLY)
9/30
11/16/79

OWNER
 COL 15 LAST NAME: **BRIAN** COL 34: **GARIAND**
 COL 36: **13187 HIGHWAY 932** COL 55: **RD**
 COL 57: **HIGHLAND MD 20777** COL 76: **20777**

B 1 CONTINUED. **DRILLER INFORMATION**

DATE: **8/31/79** LICENSE NUMBER: **209**
 COL 80: **77**

FIRST NAME: **Howard** DRILLER LAST NAME: **Dillon**

SIGNATURE: *Howard Dillon*

B 3 LOCATION OF WELL

COUNTY: **HOWARD** COL 21: **21**
 (DO NOT ABBREVIATE COUNTY NAME)

SUBDIVISION: **23** COL 42: **42**

SECTION: **44** COL 46: **46** LOT: **ACRES** COL 50: **50**

NEAREST TOWN: **HIGHLAND** COL 71: **71**

MILES FROM TOWN (ENTER 0 IF IN TOWN): **1** COL 76: **76** COL 77: **77** COL 78: **78**

B 2 WELL INFORMATION

MAXIMUM PUMPING RATE (GALLONS PER MINUTE): **5** COL 12: **12**

AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY): **200** COL 14: **14** COL 20: **20**

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

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: **HIGHLAND**

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): N NORTH S SOUTH E EAST W WEST

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

APPROXIMATE DEPTH OF WELL: **300** FEET COL 24: **24** COL 28: **28**

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

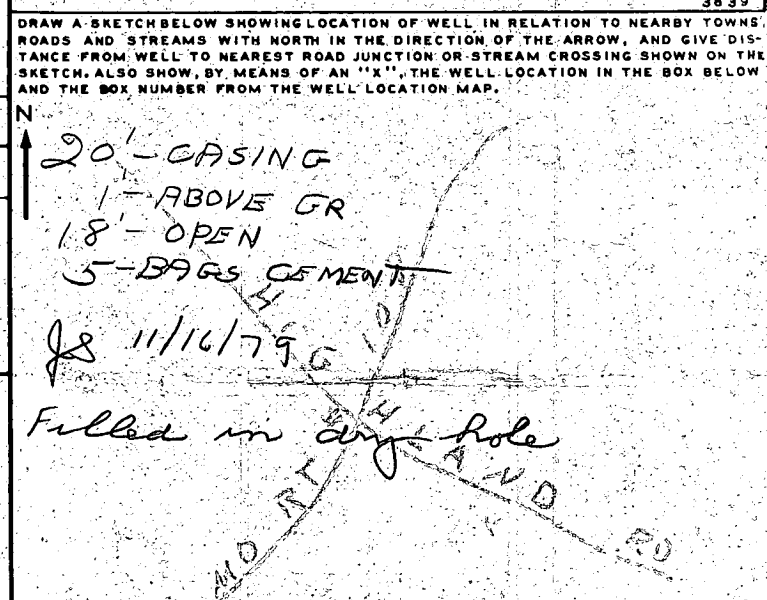
METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)

BORED (OR AUGERED) JETTED DRIVEN

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

CABLE REVERSE-ROTARY DRIVE-POINT

OTHER (DESCRIBE):



REPLACEMENT OR 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):

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

APPROPRIATION PERMIT NUMBER: **54** COL 54: **54** COL 55: **55** COL 56: **56** COL 57: **57** COL 58: **58** COL 59: **59** COL 60: **60** COL 61: **61** COL 62: **62** COL 63: **63** COL 64: **64** COL 65: **65** COL 66: **66** COL 67: **67** COL 68: **68**

ENGINEER REVIEW DISTRICT NO. **69** COL 69: **69** COL 70: **70** COL 71: **71** COL 72: **72** COL 73: **73** COL 74: **74** COL 75: **75** COL 76: **76** COL 77: **77** COL 78: **78** COL 79: **79**

FORCE: WRITE INITIALS IN BOX

CONDITIONS: **A** **E** **N** **S** **G** **W** **Q** **C** **L** **U**

BOX NUMBER: **E 940** COL 50: **50** COL 51: **51** COL 52: **52** COL 53: **53** COL 54: **54** COL 55: **55**

N 450 COL 56: **56** COL 57: **57** COL 58: **58** COL 59: **59** COL 60: **60** COL 61: **61** COL 62: **62** COL 63: **63**

ELEVATION AT WELL HEAD (FEET): **65** COL 65: **65** COL 66: **66** COL 67: **67** COL 68: **68**

B 4 CONTINUED. **HEALTH DEPARTMENT APPROVAL**

STATE HEALTH (CIRCLE BOX) **S**

COUNTY NAME: **HOWARD** COUNTY NO. **24**

DATE: **090179**

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

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

1 2 3 (SEQ. NO.) 6

Brian Garland

11/6/79 Plans Rejected

① Plans must show dist from house to tank & tank to Dry Well

② Recommendation Inlet to DW come in at 4ft instead of 2 1/2 ft

Called Mr Brian 286 2794
busy 4:15 PM

11/29 Busy 9:00 AM

11/8/79 - Wrote note to owners asking them to call.

11/9 TC from Mrs Brian explained above 12:00

11/13/79 - Discussed above & G. B. Agree to fix plans

DM Call 286 2161 all Day

Garland Brian said that DM & FF visited site & FF said it was all right to drill a well on lower ground than the Dry Well, if no water could be found on the ground higher than the DW. He said they drilled a dry hole on the high ground but found water on low ground well ready for grouting over

Bruce Garland

11/13/79 - Discussed with DM

He remembers property & wants
to see plan showing new
well site & will need form
Garland to call, RP

11/29/79

① Plans must show DW in
~~the~~ right location per spec

② Elevation shown are in the
400 range but Contour Map
shows a 280 to 300 ft range

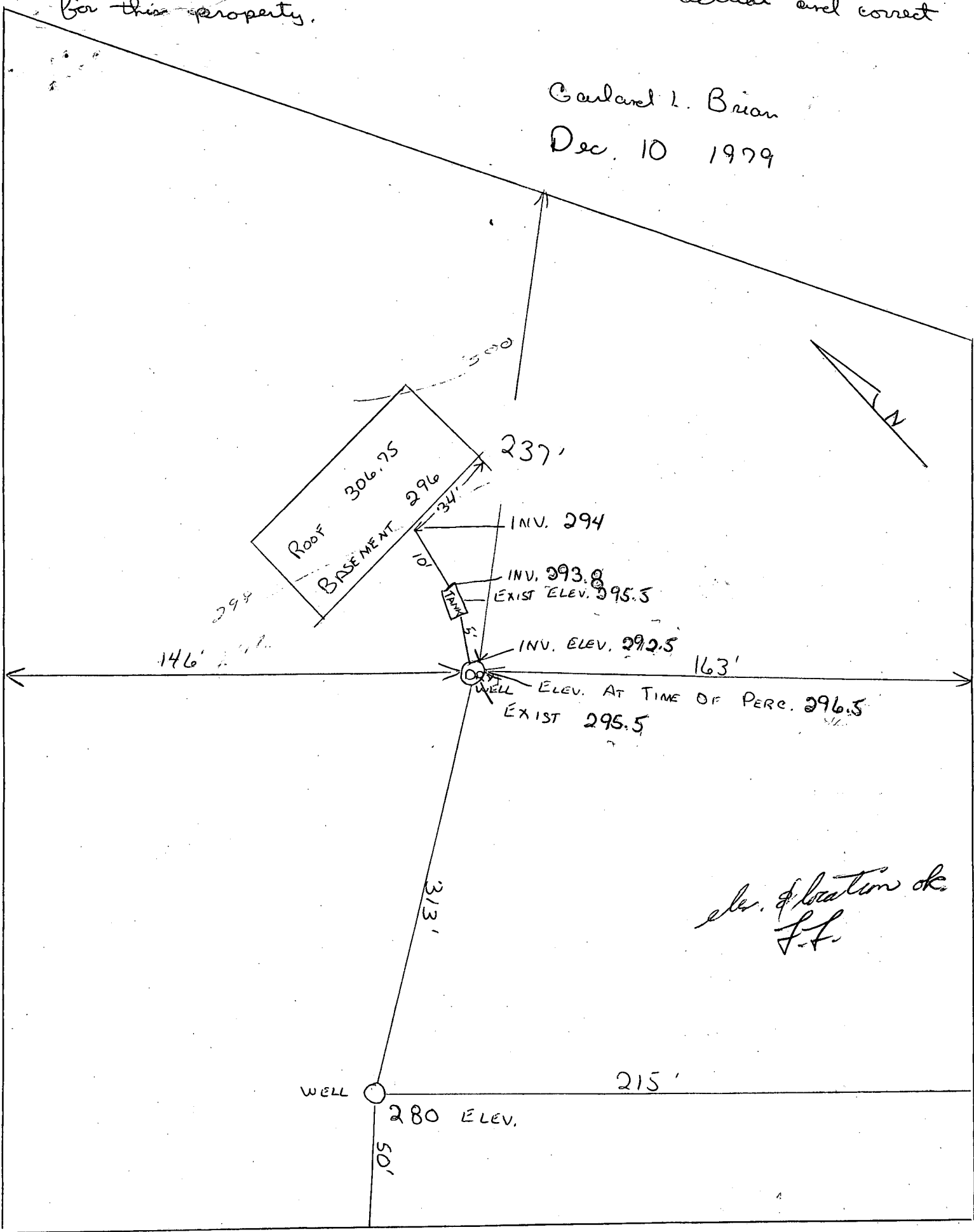
③ Dry Well inlet is too deep
in the ground & it should
be 4 ft but plans show
a 7 ft depth below
original grade

Called Bruce Garland 286 2794

11/29/79 Discussed with her wife
Must mail spec

I certify the measurement and elev. are actual and correct for this property.

Carlisle L. Brian
Dec. 10 1979



*elev. & location ok
J.L.*

I. ON SITE IMPROVEMENT SURVEY:

1. Upon completion of construction, the Contractor shall furnish to the Owner a survey showing the location on the site of all improvements constructed thereon, and showing the location of all water, sewer, gas, and electric lines and mains, and of all existing utility easements. Such survey shall be prepared by a licensed surveyor who shall certify that the work is installed and erected entirely upon the land covered by the mortgage and within any building restriction lines on said land, and does not overhang or otherwise encroach upon any easement or right-of-way of others. In addition, if the Owner shall so require, the Contractor shall furnish a survey with each application for payment for any improvements, including structures and utilities, not theretofore located on a survey. The Contractor shall furnish copies of each survey required hereunder for the Lender and the Commissioner.

J. CLEAN UP:

1. Each contractor and subcontractor shall maintain the project free of debris and unusable material and immediately upon completion of each phase of the work, remove all debris, unusable material and equipment (resulting from this work) away from the site.

2. Each contractor and subcontractor shall be solely responsible for any damage to the work on the project by equipment, spillage, spatters, staining, discoloration, or any other damage, as a result of their activities on the project.

3. Properly clean all windows and window frames.

K. SHOP DRAWINGS:

1. Submit 1 sepia print and 2 black line prints of shop drawings for the Architect's review. Reviewed sepia will be returned for printing and distribution.

2. Submit 6 copies of catalog cuts of all items and equipment.

3. Submit, if and when requested, 2 physical samples of materials proposed for use.

4. Submit complete color line for selection of colors.

L. SAFETY:

1. Comply with the provisions of the "Manual of Accident Prevention in Construction" of the Associated General Contractors of America.

END OF SECTION

APPLICATION

HOWARD COUNTY

PERMIT APPLICATION

SERIAL NUMBER

55823

DEPARTMENT OF INSPECTIONS, LICENSES & PERMITS
3430 COURT HOUSE DRIVE, ELLICOTT CITY, MARYLAND 21043

BUILDING ADDRESS (HOUSE NO., STREET, TOWN OR AREA)

13193 Highland Rd.
Highland, MD 20777

GRADING/SEDIMENT CONTROL YES NO

DESCRIPTION OF WORK AUTHORIZED

~~Detached~~ 3 car garage
Detached
36'0" x 32'0"

LOT NO. PARCEL NO. SEC. AREA BLOCK NO. LIBER FOLIO

SUB DIVISION ZONE ZONE MAP ELEC. DIST. CENSUS TR.

OWNER'S NAME AND ADDRESS PHONE NO.

Gary + Eileen Townsend 854-3403
same as above

SIZE OF BLDG. FRONT DEPTH HEIGHT

14'0" x 32'0"

OCCUPANT'S NAME AND ADDRESS PHONE NO.

owner

TYPE OF BLDG. AREA VOLUME ROOF

B. ROOMS
ROOMS
BATHS
FIREPLACES

ARCHITECT OR ENGINEER'S NAME AND ADDRESS PHONE NO.

N/A

FOOTINGS FOUNDATION S. WALLS

CONTRACTOR'S NAME AND ADDRESS PHONE NO.

ARCH Contracting 781-7527
1737 Morgan Rd.
Cockeville TN 37797

UTILITIES WATER/WELD SEWER/SEPTIC GAS ELECTRICITY TYPE OF HEAT AC

I have carefully examined and read this application and know the same is true and correct, and that in doing this work, all provisions of Howard County Ordinances and the State Laws of Maryland will be complied with, whether specified or not; and I will notify the Bureau of Inspections, and Permits twenty-four hours in advance when I am ready for the inspections called for elsewhere in this application; and that no work will be covered up until such inspections have been completed with.

EXISTING USE PROPOSED USE

SF Home Same w/ garage

J. McMillen
SIGNATURE
TITLE DATE 8/15/94

EST. CONSTRUCTION COST LICENSE NUMBER PERMIT FEE

\$18,000.00 27808

W/S CODE FOR OFFICE USE ONLY

DISTANCE IN FEET FROM R/W LINE TO FRONT BUILDING LINE

SIDE YARD (DISTANCE IN FEET FROM SIDE BLDG. LINE TO SIDE PROPERTY LINE)

DISTANCE IN FEET FROM SIDE STREET R/W LINE

TO SIDE BUILDING LINE

DISTANCE IN FEET, REAR YD. REQUIRING SET

BACK (CORNER LOT ONLY)

CONDITIONS (IF ANY) SDP #

Checks payable to DIRECTOR OF FINANCE OF HOWARD COUNTY

CAUTION
To begin construction before a permit placard has been issued and displayed on the job is a violation of the law.
Use and occupancy permit must be applied for two weeks before it will be issued.

IMPORTANT: PLEASE SHOW ZIP CODES AND AREA CODES WHEREVER REQUIRED.

LP-69 Revised

| FUNCTION | DATE | SIGNATURE APPROVAL |
|-------------------|---------|--------------------|
| ZONING/PLANNING | | |
| SHA | | |
| SEDIMENT/GRADING | | |
| BUILDING OFFICIAL | | |
| WATER & SEWER | | |
| HEALTH DEPT. | 8/12/94 | Amy McMillen |
| FIRE PROTECTION | | |
| STORM WATER MGMT. | | |

APPROVED DATE
Distribution of Copies:
White - Building Official
Green - Planning & Zoning
Yellow - Engineering
Pink - Health Dept.
Gold - S.H.A.