

# PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH\*

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 3rd

DATE 5/8/78

**INDEXED**  
03-304876

P 28019

A 25091

*4/14/78  
late afternoon  
please*

*File*

*6/14/78 Partial  
C.B.D.*

Jim Brittingham

IS PERMITTED TO INSTALL X ALTER

ADDRESS Ellicott City, Md.

PHONE \_\_\_\_\_

SUBDIVISION Woodmark

ROAD <sup>12408</sup> Benson Branch Road

LOT 4, sec 12

PROPERTY OWNER Thomas Associates

*Mr. & Mrs. George Collins*

ADDRESS 2000 Century Plaza, Suite 302, Columbia, Md.

SPECIFICATIONS 4 bedrooms

BLDG. PERMIT SIGNED  
AND RETURNED 8/31/83

*Serial No. 55372*

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 125 SQ. FT. *per bedroom*

INLET PIPE 3 FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH 12 FT. BELOW ORIGINAL GRADE

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

LOCATE DISPOSAL AREA 165 FT. FROM \_\_\_\_\_ LOT LINE AND \_\_\_\_\_ FT. FROM \_\_\_\_\_ LOT LINE AS SEEN WHEN  
FACING LOT FROM

*Locate the dry well 165 ft. from line 460' in length and 150 ft. in from line 595' in  
length. Cleanout-manhole and cover to grade on septic tank if below 3 ft. of surface.  
If dry well and trench are used, need a 5 ft. earth buffer.*

*6/14/78 Water well HO-73 2732*

PLANS APPROVED BY Charles B. Straker

DATE 11/7/77

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.

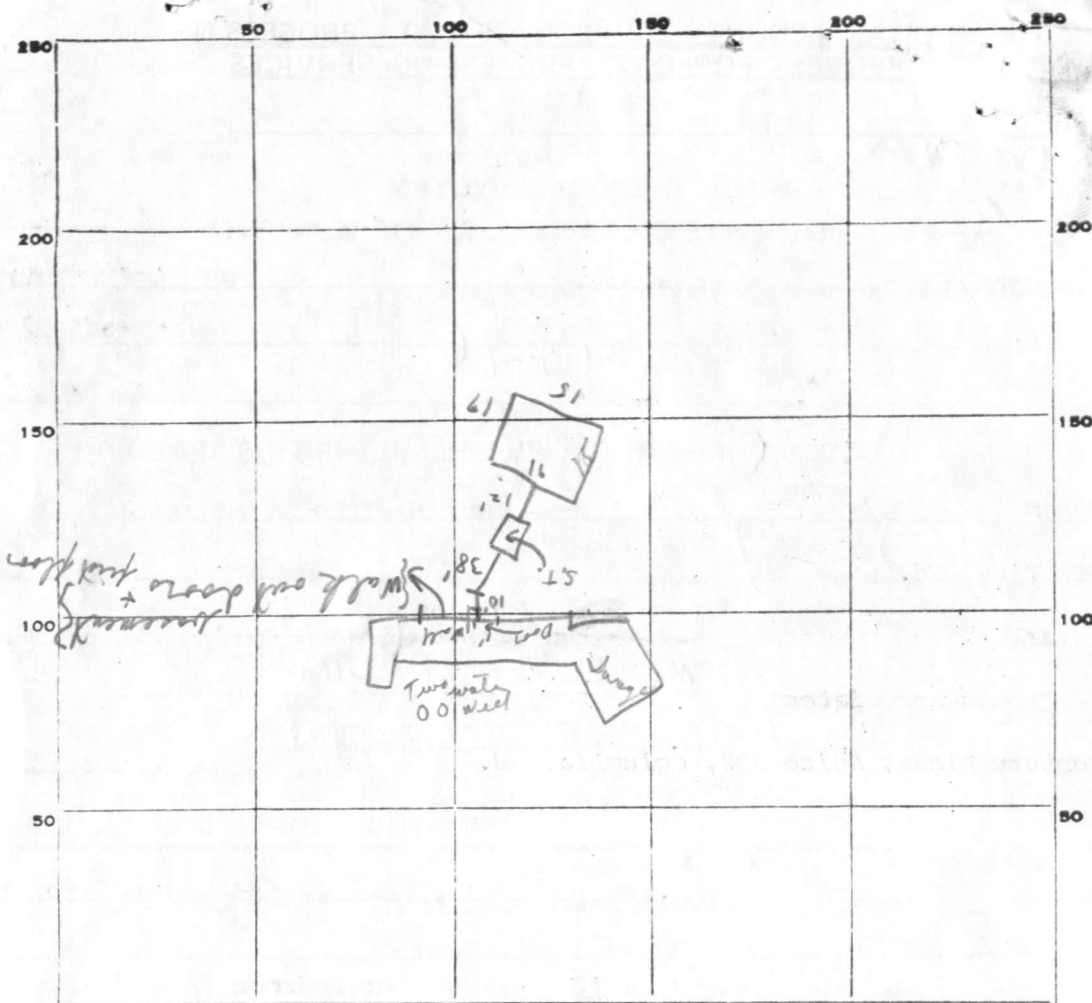
NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

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.**

A  
25091



3-12  
500

PERMIT CARD NOT seen S.T. D.W.

SEPTIC TANK, LEVEL ok CLEANOUTS ok / ok

DISTRIBUTION BOX, LEVEL N/A

Trench  
TRENCH FIELD, DEPTH \_\_\_\_\_ FT. TRENCH WIDTH \_\_\_\_\_ FT.

GRAVEL DEPTH \_\_\_\_\_ IN. TOTAL LENGTH \_\_\_\_\_ FT.

NUMBER OF TRENCHES \_\_\_\_\_ TOTAL BOTTOM AREA \_\_\_\_\_

SEEPAGE PITS, INSIDE DIAMETER outside perimeter 12 FT. DEPTH BELOW INLET 8 1/2 FT. 496  
31

ABSORBENT AREA 529 ± SQ. FT.

REMARKS 6/14/78 Not ready - no cleanouts, not all gravel in dr well  
To call for final. No sand seen - saw 2 of 8 ft. fine mesh c.s.

DATE SYSTEM APPROVED 6/15/78 as per above INSPECTOR C. B. Street

DNR-214 (7-77)

C 1 **8588** SEQUENCE NO. (WRA USE ONLY)

1 2 3 (SEQ. NO.) 6  
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

DATE RECEIVED (WRA USE ONLY)

DATE WELL COMPLETED September 28 1977

1 2 3 7 7

8-13 15 20

**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 W27229

DEPTH OF WELL 127

22 (TO NEAREST FOOT) 26

PERMIT NO. FROM "PERMIT TO DRILL WELL" H0-73-2990

28 29 30 31 32 33 34 35 36 37

DRILLERS IDENTIFICATION NO. 296

OWNER Thomas Associates, Inc. LAST NAME FIRST NAME

STREET OR RFD Suite #302, 2000 Century Plaza POST OFFICE Columbia, Md. 21044

**WELL LOG**

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET		CHECK IF WATER BEARING
	FROM	TO	
Dirt	0	2	
Brown Mica & Red Clay	2	10	
Brown Mica	10	16	
Brown sand	16	30	X
Brown & Blue Mica	30	39	
Black Sandstone	39	44	
Brown Sandstone	44	45	X
Black Sandstone	45	49	
Brown Sandstone	49	51	X
Black Sandstone	51	52	
Brown Sandstone with some Blue mixed	52	59	X
Black Sandstone	59	76	
White & Brown Sandstone	76	78	X
Black & White Sandstone	78	127	

**GROUTING RECORD**

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) YES  NO

TYPE OF GROUTING MATERIAL (CIRCLE BOX):  
 CEMENT  BENTONITE CLAY

NO. OF BAGS 25 NO. OF POUNDS 2,350

GALLONS OF WATER 150

DEPTH OF GROUT SEAL (TO NEAREST FOOT)  
 FROM 0 FT. TO 38 FT.  
 (ENTER 0 IF FROM SURFACE)

**CASING RECORD**

INSERT APPROPRIATE CODE BELOW

STEEL  CONCRETE   
 PLASTIC  OTHER

MAIN CASING TYPE  NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) 6 TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) 40

**OTHER CASING (IF USED)**

EACH CASING	DIAMETER (INCH)		DEPTH (FEET)	
	FROM	TO	FROM	TO
<input type="checkbox"/>				
<input type="checkbox"/>				

**SCREEN RECORD**

SCREEN TYPE OR OPEN HOLE

INSERT APPROPRIATE CODE BELOW

STEEL  BRASS OR BRONZE  OPEN HOLE   
 PLASTIC  OTHER

**SCREEN**

1 2 3 (SEQ. NO.) 6

DEPTH (NEAREST WHOLE FOOT)  
 FROM 40 TO 127

1	<input checked="" type="checkbox"/>	8 9 11 15 17 21
2	<input type="checkbox"/>	
3	<input type="checkbox"/>	23 24 26 30 32 36
		38 39 41 45 47 51

SLOT SIZE 1, \_\_\_\_\_ 2, \_\_\_\_\_ 3, \_\_\_\_\_

DIAMETER OF SCREEN 56 (NEAREST INCH)  
 FROM \_\_\_\_\_ TO \_\_\_\_\_

GRAVEL PACK \_\_\_\_\_

IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX 68

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

TELESCOPE CASING  LOG INDICATOR  OTHER DATA AVAILABLE

**PUMPING TEST**

HOURS PUMPED (TO NEAREST HOUR) 6

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 8

METHOD USED TO MEASURE PUMPING RATE Flowmeter

WATER LEVEL: (DISTANCE FROM LAND SURFACE)  
 BEFORE PUMPING 45 (NEAREST FOOT)  
 WHEN PUMPING 78 (NEAREST FOOT)

TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX)  
 AIR  PISTON  TURBINE  
 CENTRIFUGAL  ROTARY  OTHER (DESCRIBE BELOW)  
 JET  SUBMERSIBLE

**PUMP INSTALLED**

TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: A, C, J, P, R, S, T, O) 29

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) YES  NO

CAPACITY:  
 GALLONS PER MINUTE (TO NEAREST GALLON) 31 35

PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH (NEAREST FOOT) 43 47

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)  
 ABOVE } LAND SURFACE (NEAREST FOOT)  
 BELOW } 27 (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).

**CIRCLE APPROPRIATE BOXES**

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.

DRILLERS NAME

(PLEASE PRINT) Ronald L. Kyker

SIGNATURE Ronald L. Kyker

RECEIVED

DEC 31 9 08 AM '77

HOWARD COUNTY  
HEALTH DEPT.  
ELLCOTT CITY, MD.

**B 1** **5637** SEQUENCE NO. (WRA USE ONLY)

1 2 3 (SEQ. NO.) 6  
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

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

WRA PERMIT NUMBER  
**HO-73-2446**  
 FILL IN THIS FORM COMPLETELY

DATE RECEIVED (WRA USE ONLY)  
**12/28/77**  
**1:00 P.M.**

OWNER Thomas Associates, Inc.  
 COL 15 LAST NAME FIRST NAME COL. 34

STREET OR RFD Suite #302, 2000 Century Plaza  
 COL 36 COL. 55

POST OFFICE Columbia, Maryland MD 21044  
 COL 57 COL. 76

**B 1** CONTINUED **DRILLER INFORMATION**

1 2 3 (SEQ. NO.) 6

DATE November 14, 1977 LICENSE NUMBER 296  
 77 80

Ronald L. Kyker  
 FIRST NAME DRILLER LAST NAME

SIGNATURE Ronald L. Kyker

**B 3** **LOCATION OF WELL**

1 2 3 (SEQ. NO.) 6

COUNTY Howard (DO NOT ABBREVIATE COUNTY NAME) 21

SUBDIVISION "Woodmark" 42

SECTION 44 46 LOT 4 50

NEAREST TOWN Glenelg 71

MILES FROM TOWN (ENTER 0 IF IN TOWN) 4 MI 76 77 78

**B 2** **WELL INFORMATION**

1 2 3 (SEQ. NO.) 6

MAXIMUM PUMPING RATE (GALLONS PER MINUTE) 5 12

AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) 500 20

**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 } MUST HAVE STATE HEALTH DEPT. APPROVAL

P PRIVATE WATER COMPANY }

T TEST

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

1 2 3 (SEQ. NO.) 6

N NORTH  E EAST  NE NORTHEAST  SE SOUTHEAST

S SOUTH  W WEST  NW NORTHWEST  SW SOUTHWEST

NEAR WHAT ROAD Benson Branch Road

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

DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) 34 100 37 MI 38 39

APPROXIMATE DEPTH OF WELL 110' FEET

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)**

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)

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

APPROPRIATION PERMIT NUMBER 54 ENGINEER REVIEW DISTRICT NO. 63

FORCE 67 WRITE INITIALS IN BOX CONDITIONS 77

**B 4** CONTINUED **HEALTH DEPARTMENT APPROVAL**

1 2 3 (SEQ. NO.) 6

41  STATE HEALTH (CIRCLE BOX) Howard COUNTY NAME W27229 COUNTY NO.

MO. DAY YR. DATE 11 16 77

APPROVED BY Fred Frommelt, Sanitarian

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.

N 40ft casing  
 39 Foot open hole rd.  
 25 Bags  
 12/28/77  
 AMB

TRIP  
 could be SAC  
 (two)

Benson Branch rd.

BOX NUMBER E 810  
N 520

NORTH COORDINATE 55 50 51 52 53 54 55

EAST COORDINATE 61 57 58 59 60 61 62 63

ELEVATION AT WELL HEAD (FEET) 65 65 66 67 68

**B 5** SPECIAL CONDITIONS 8-83 (WRA USE ONLY)

1 2 3 (SEQ. NO.) 6

RECEIVED

Nov 28 11 19 AM '77

HOWARD COUNTY  
HEALTH DEPT.  
ELLICOTT CITY, MD.

*[Handwritten scribbles]*

*[Dark smudges and ink marks at the bottom left corner]*

**B 1** 1145 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**  
 A10 73 2732  
**FILL IN THIS FORM COMPLETELY**

**DATE RECEIVED (WRA USE ONLY)**  
 5/24/78  
 1:30 P.M.

**OWNER** Thomas Associates, Inc.  
COL 15 LAST NAME FIRST NAME COL. 34

**STREET OR RFD** 2000 Century Plaza, Suite #302  
COL 36 COL. 55

**POST OFFICE** Columbia, Maryland 21044  
COL 57 COL. 76

**B 1** CONTINUED **DRILLER INFORMATION**

1 2 3 (SEQ. NO.) 6  
 DATE April 12, 1978 LICENSE NUMBER 296  
77 80

Ronald L. Kyker  
FIRST NAME DRILLER LAST NAME

SIGNATURE *Ronald L. Kyker*

**B 3** LOCATION OF WELL

1 2 3 (SEQ. NO.) 6  
 COUNTY Howard  
8 (DO NOT ABBREVIATE COUNTY NAME) 21

SUBDIVISION "Woodmark"  
23 42

SECTION LOT 4  
44 46 48 50

NEAREST TOWN Glenelg  
52 71

MILES FROM TOWN (ENTER 0 IF IN TOWN) 4  
73 76 77 78

**B 2** WELL INFORMATION

1 2 3 (SEQ. NO.) 6  
 MAXIMUM PUMPING RATE (GALLONS PER MINUTE) 5  
8 12

AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) 500  
14 20

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

1 2 3 (SEQ. NO.) 6

N NORTH  E EAST  NE NORTHEAST  SE SOUTHEAST  
 S SOUTH  W WEST  NW NORTHWEST  SW SOUTHWEST  
8 8 8 9 8 9

NEAR WHAT ROAD Benson Branch Road  
11 NORTH SOUTH EAST WEST 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  N  S  E  W  
32 32 32 32

DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) 100  
34 37 38 39

**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 } MUST HAVE STATE HEALTH DEPT. APPROVAL

P PRIVATE WATER COMPANY }

T 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 125' 24 28 FEET

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)

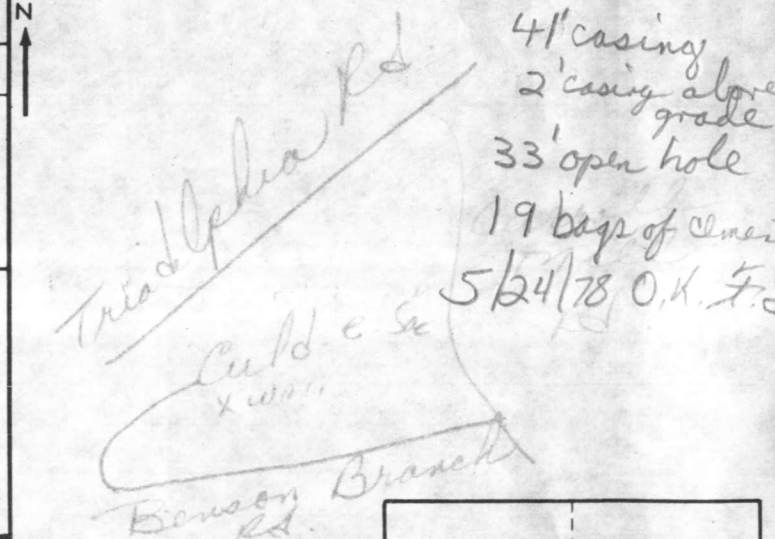
**REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)**

N THIS WELL WILL NOT REPLACE AN EXISTING WELL

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D 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 ENGINEER REVIEW DISTRICT NO. 63 65

FORCE WRITE INITIALS IN BOX CONDITIONS A E N S G W Q C L U

BOX NUMBER E 310 N 520

NORTH COORDINATE 520000 50 51 52 53 54 55

EAST COORDINATE 000000 57 58 59 60 61 62 63

ELEVATION AT WELL HEAD (FEET) 0/0 5/0

**B 4** CONTINUED **HEALTH DEPARTMENT APPROVAL**

1 2 3 (SEQ. NO.) 6  
 41  STATE HEALTH (CIRCLE BOX) COUNTY NAME Howard COUNTY NO. W27851

DATE 04/18/78 APPROVED BY Palmer F. Wine

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

2 3 (SEQ. NO.) 6

8 HEALTH 83

2/3/77  
1300 a.m.

# APPLICATION

A 25091

## 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

Septic Tank { 1-3 Bedrooms 1000 gallons  
4 Bedrooms 3rd 1250 gallons  
DATE 1/3/77

⊗ Dry well to have 125 sq ft. effective  
abovant sidewalk area per bedroom below inlet. Inlet  
to be 3' and maximum depth 12' <sup>at least</sup> to <sup>at least</sup> grade  
from line 460' in length + 150' in from line 595' in  
length. ~~\_\_\_\_\_~~  
Cleanout - Manhole + cover to grade on septic tank  
if below 3' of surface. ⊗ If dry well + trench used -

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 Woodmark, Inc. Thomas Associates  
ADDRESS Route 2, Garroll Mill Road PHONE \_\_\_\_\_  
PROPERTY LOCATION: 2000 Century Plaza, Suite 302  
Columbia, Md. 21044  
SUBDIVISION Woodmark LOT NO. 4  
ROAD AND DESCRIPTION end of Bensen Branch Road

SIZE OF LOT 2.8 acres TYPE BLDG. 3 of 4  
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/ Mark Wakefield

BLDG. PERMIT SIGNED  
AND RETURNED 1/17/78  
Serial No. 34574

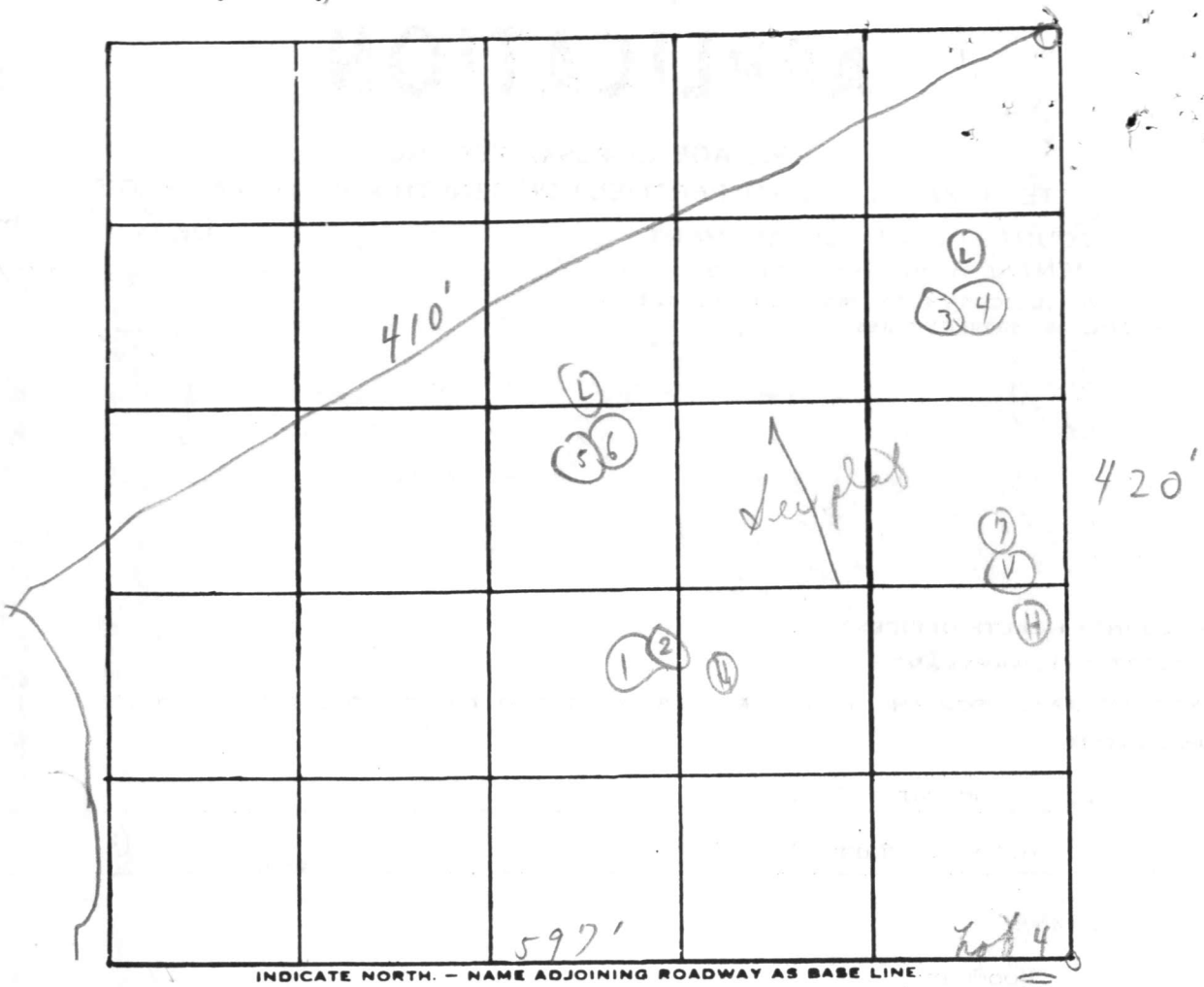
APPROVED BY C. B. Shaker FOR ⊗ Dry well; +/ov DATE 1/17/77  
(KIND OF SYSTEM)

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

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

REASONS FOR REJECTION OR HOLDING \_\_\_\_\_

# THIS IS NOT A PERMIT

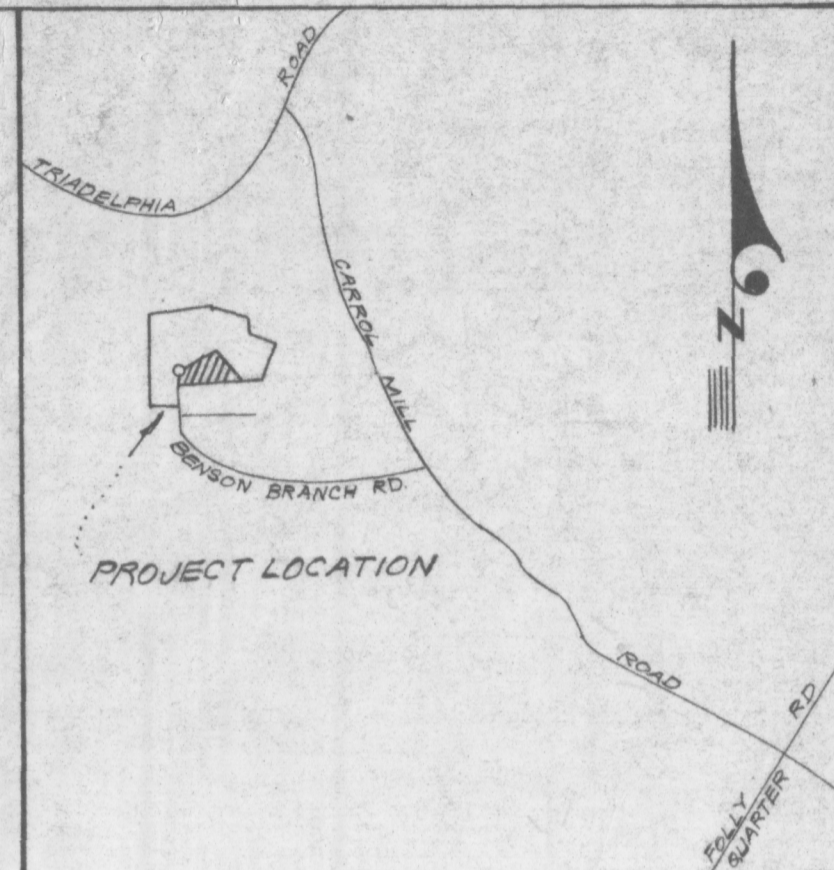


Existing House

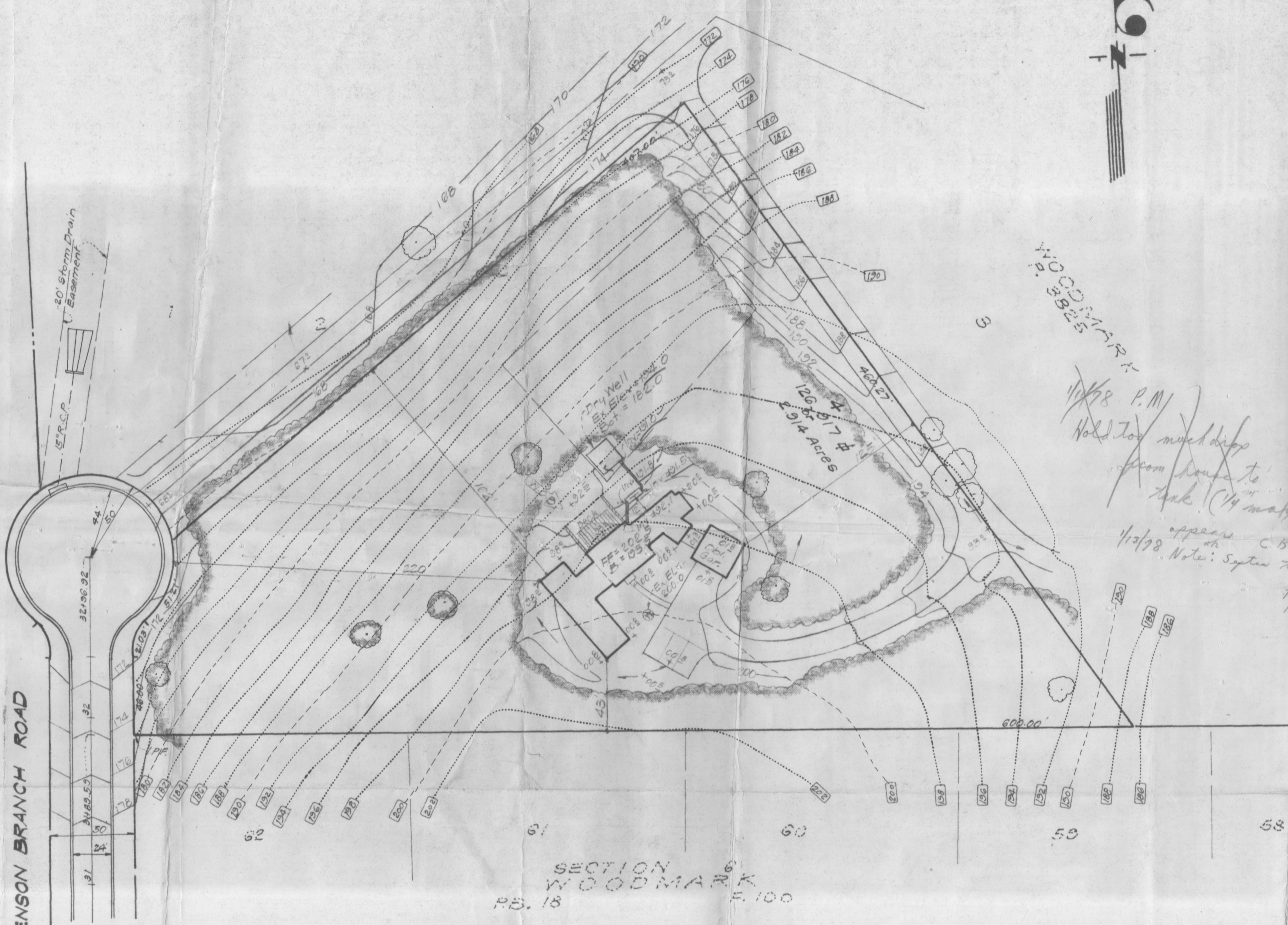
Soil Profile

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
3/19/97	1	3'	10:47	10:51	10:51	10:58	7m
	(H) 2	12 1/2'	10:48	10:51	10:51	10:57	6m
	3	3 1/2'	10:32	10:33	10:33	10:36	3m
	(L) 4	12 1/2'	10:32	10:34	10:34	10:37	3m
	5	5'	10:39	10:41	10:41	10:46	5m
	(L) 6	12'	10:39	10:43	10:43	10:50	7m
	(H) 7	3 1/2' sandy loam 12 1/2' below clay	sandy loam starts similar		to other		6:31
							6m

REMARKS Wooded lot - center holes  
 TYPE OF SOIL See plot for approx - hole distance  
 TESTED BY C. B. A. ALSO PRESENT: Mr. Wakefield



VICINITY MAP  
Scale: 1"=2000'



**LEGEND**

- 1 Contour Interval 2 Ft.
- 2 Exist. Contour - - - - - 100'
- 3 Proposed Contour - - - - - 130'
- 4 Spot Elevation +90.5
- 5 Direction of Drainage →
- 6 Exist. Trees to be Retained (tree symbol)
- 7 Prop. Well (W symbol)
- 8 Walk-Out Basement (W.O.B. symbol)

1/12/78 P.M.  
Hold top much dips from house to tank (14 maximum required)  
appears C.B.S.  
1/12/78 Note: Septic tank to be 14' from house & 14' of pipe from house to septic tank per drawing per Mr. Sackett over phone re-shown on further review. C.B.S.  
OK  
1/17/77  
S.W.M.  
34574  
sett

WOODMARK  
P. 3825

SENSON BRANCH ROAD

SECTION  
WOODMARK  
P.B. 18 F. 100

NOTE For Bearings & Distances of Individual Lot Line See Record Plat recorded as Plat 3825.

<b>CLARK • FINEFROCK &amp; SACKETT</b> ENGINEERS • PLANNERS • SURVEYORS 11315 LOCKWOOD DRIVE • SILVER SPRING, MARYLAND 20904 • (301) 593-3400		
DESIGNED W.R.M.E.	<b>SITE DEVELOPMENT PLAN</b> LOT 4 <b>WOODMARK</b> 3 <sup>RD</sup> ELECTION DISTRICT HOWARD COUNTY, MARYLAND FOR: THOMAS ASSOCIATES 2000 Century Plaza Bldg., Suite 302 Columbia, Md. 21044	SCALE 1"=50'
DRAWN K.I.W.		DRAWING 1 of 1
CHECKED W.R.M.E.		JOB NO.
DATE Nov, 1977		FILE NO. 1303-X

# HOWARD COUNTY HEALTH DEPARTMENT

JOYCE M. BOYD, M.D., M.P.H.  
COUNTY HEALTH OFFICER



BUREAU OF ENVIRONMENTAL HEALTH  
TIBER PLACE  
8306B FORREST STREET  
ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 992-2330

September 1, 1983

Mr. George Collins  
12408 Benson Branch Road  
Ellicott City, Maryland 21043

RE: Building Permit Serial #55372  
File - A-25091

Dear Mr. Collins:

This is to advise you that this office has signed off on the above referenced building permit application.

However, as the proposed additions and alterations to the existing house will increase the amount of waste water generated, this office will require you to expand your septic system.

Information regarding repair or alteration to your septic system can be obtained from Craig Williams or myself at 992-2330.

Very truly yours,

Frank A. Skinner, Director  
Water and Sewerage Program

FAS:hs

cc: Licenses and Permits