4/22/ple

## PERMIT

SEWAGE DISPOSAL SYSTEM

7 123 | 86 RH **363/4** 

<u>28400</u>

### MARYLAND STATE DEPARTMENT OF HEALTH'

#### HOWARD COUNTY

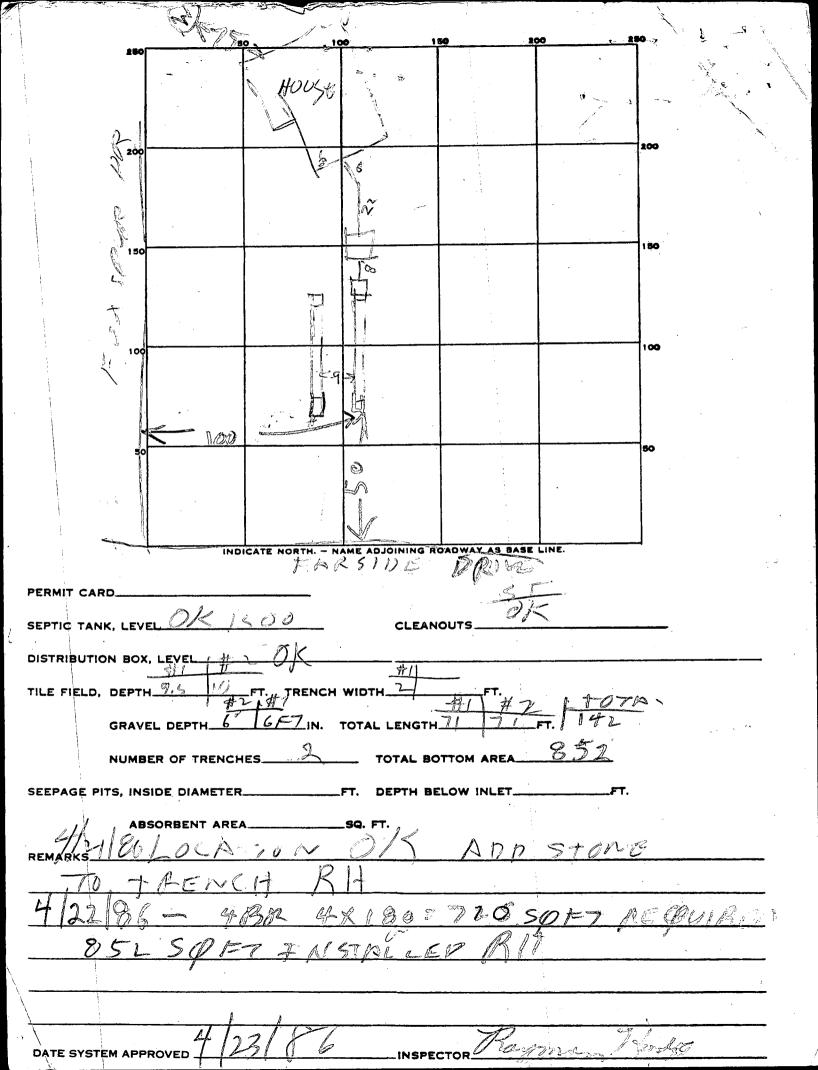
BUREAU OF ENVIRONMENTAL HEALTH
\$922,2330
461-9933

03-307085 INDEXED

DISTRICT 3rd

PROPERTY OWNER	ADDRESS		PHONE _	526-7077	
ADDRESS  GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.  GARBAGE GRINDER? YES NOX	Farcide	no. 11	650 Farcide Poad		
ADDRESS  GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.  GARBAGE GRINDER? YES	SUBDIVISION	ROAD	DOU TAISIUE ROAD	_LOI	······
GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.  GARBAGE GRINDER? YES	PROPERTY OWNER	Injong Choe		14	
GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.  GARBAGE GRINDER? YES	ADDRESS				
SARBAGE GRINDER? YES				,	
SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4  ENCHES - 180 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 4 feet below original ade. Bottom maximum depth 9 feet below original grade. Effective area begins at 4 feet low original grade. 5 feet of stone below distribution pipe. LOCATION: Start first tr. of feet from the lot line that borders Foxspur Court and 130 feet from the lot line that orders Foxspur Court and 130 feet from the lot line that reders Farside Drive. Run trenches along contour toward Farside Drive.  TE: 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 instated Provide 6" - 3" diameter cleanout and cap to grade or above on septic tank. OK/CUS  PLANS APPROVED BY C. Williams DATE 12/05/85  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.  SAND PETITIONED (124/14).  AND PETITIONED (124/14).  AND PETITIONED (124/14).	F GARBAGE GRINDER IS USED INC	CREASE SEPTIC TANK CAPACITY BY 50%	6 AND ABSORPTION AREA BY	2%.	
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OTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 40 PVC OR ABS.  AND DETURNED (124/8)	LANS APPROVED BY  DVER NO WORK UNTIL INSPECTED AN	iameter cleanout and cap and c	to grade or above on нОхія	Septic tank. OK  FOR DEPOSIT OR  RECORD AND AND AND AND AND AND AND AND AND AN	lcus N. V
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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	PLANS APPROVED BY  COVER NO WORK UNTIL INSPECTED AN NEITHER THE HOWARD COUNTY COUNC NOTE: IF TRENCH IS USED CALL FOR NOTE: NO DRY WELL SHALL EXCEED NOTE: ALL PIPE FROM HOUSE TO SER PERMIT VOID AFTER THREE YEARS.	iameter cleanout and cap and cap and cap and cap and cap and approved.  CIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE. THE PLACING GO TO THE HEALTH DEPARTMENT IS RESPONSIBLE. THE PLACING GO TO	DINSIBLE FOR THE SUCCESSFUL OP RAVEL IN TRENCH ENCH TO EXCEED 100 FEET IN LENCE LE 40 PVC OR ABS.	Septic tank. OK  FOR DEPOSIT OF  RECORD AND AND STEM.  STH.  PERIVITE SIGNES	lcus N. V

PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.



LOT NUMBER: 32

## DRY WELL OR DRY WELL AND TRENCH

		sq. ft./bedroom
,	Septic Tank	Minimum Total square Feet
3 bedroom	1000 gallon	
4 bedroom	1250 gallon	
5 bedroom	1500 gallon	
	feet below original grad	
Bottom maximum	n depth feet below	w original grade.
Effective area	a begins at feet	below original grade.
ground No tre	and leave a 5 foot earth bufi nch is to exceed 100 feet in	rbent area, run the trench on level fer between dry well and trench. n length. Trench inlet to be same of stone below distribution pipe.
	TRI	ENCHES
	•	sq. ft./bedroom
Trench to be	2 wide.	
Inlet 4	feet below original grade	e.
	depth 9 feet below	· · · · · · · · · · · · · · · · · · ·
	begins at 4 feet b	
	of stone below distribution	i i
	trench to exceed 100 feet	
(2) If (3) Tr	more than one trench used, enches to be installed on l	, a distribution box is required.
• •		h before gravel is installed.
(5) Pr	ovide 6"-8" diameter cleand	out and cap to grade or above on septic
(6) If	nk and drywell. a Garbage disposal is used d increase absorbant sidewa	d, increase septic tank capacity by 50%
	:	H 140' FROM THE COT LINE
		ND 130 FROM THE LOT LINE
THAT BO	ROERS FARSIDE DR.	RUN TRENCHES ALONG CONTOUR
TOWARD	FARSIDE DRIVE.	
	12/5/8	5 carllai
	1 3/3	

TRENCH SYSTEM START 1 ST TRENCH 35 FROM MID POINT OF END OF HOUSE ( 10' HIGHER THAN SHOWN ON SUB-MITTED PLAN) ELIMINATE LOWER TRENCH, GIVE COPY OF PLAN, GRADE 417 MAX INLET DEPTH413 TOTAL DEPTH MAX. 91 INLET DEPTH 4 MAX, & EFFECTIVE AREA STARTS 5 CHOE LOT. 32 FARSIDE B.P # 69426 799-3533.

## APPLICATION

A 28400

BLDG. PERMIT SIGNED

AND RETURNED

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 I HEREBY APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) INJONG CHOE PROPERTY LOCATION SIZE OF LOT \_ 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.

## THIS IS NOT A PERMI

REASONS FOR REJECTION OR HOLDING

# APPLICATION

A 28400

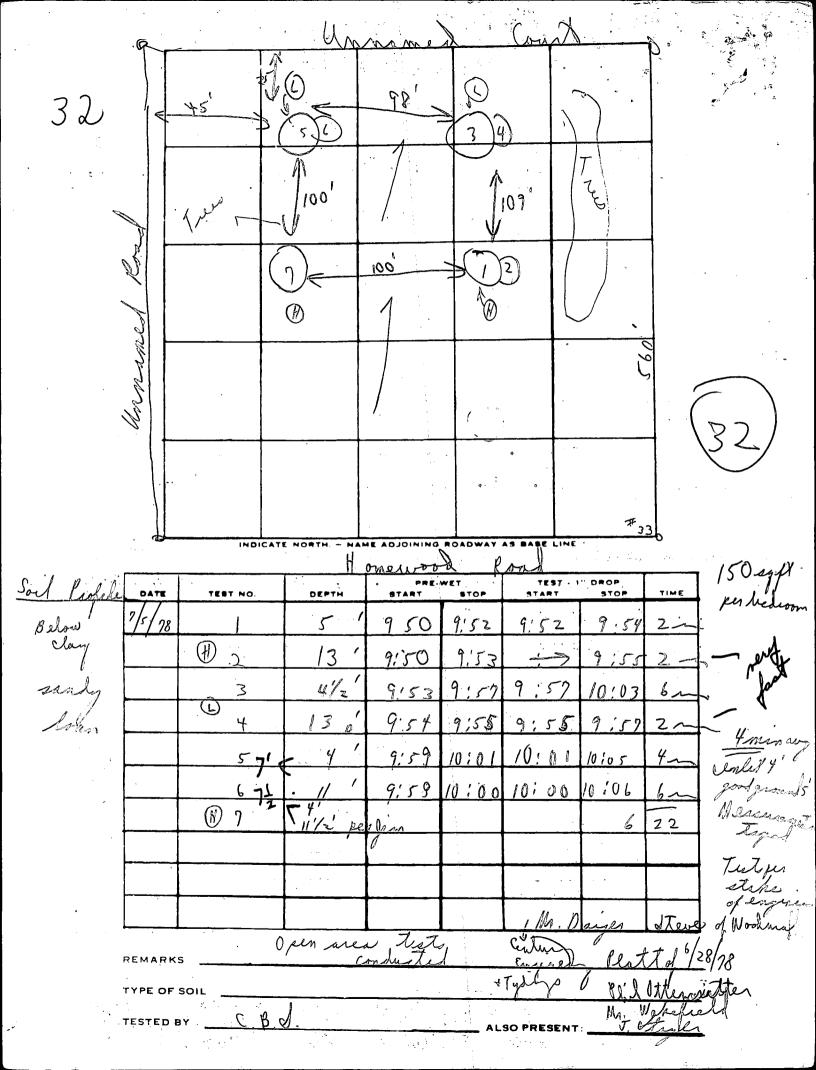
Prel:

SEWAGE DISPOSAL TESTING

	Quality		
STATE OF MARYLAND	- DEPARTMENT OF	HEALTH AND MENT	AL HYGIENE 1000 gallons
STATE OF MARYLAND HOWARD COUNTY HEALTH DEI ENVIRONMENTAL HEALTH SER P. O. BOX 476, ELLICOTT CITY. MAR TELEPHONE: 465-5000, EXT. 356	PARTMENT	T 18 1-3 %	BISTRICT3 gallons
ENVIRONMENTAL HEALTH SER	ivices Sept	colank)	DATE May 12, 1978
P. O. BOX 476, ELLICOTT CITY, MAR	YLAND 21043	4 Bed	como 1250 gallons
TELEPHONE: 465-5000, EXT. 356			
•			

	•		•			:"
TO: THE COUNTY	Y MARYLAND		4 Å		•	
	PPLY FOR THE NECES	SARY TEST IN ORDE	R TO CONSTRU	CT (OR RECONS	STRUCT) A SEW	/AGE
DISPOSAL SYSTEM	The second secon					
PPOPERTY OWNER	- Woodmark, Inc.	INSONG	CHOE			
ADDRESS	9267 Bal to . Nat	1. Pike	Р	HONE	889	<del>-,</del>
PROPERTY LOCAT	IOŃ:					
SUBDIVISION	Farside		on the second section of the section of the second section of the section o	OT NO.	25 32	
	Rt. 40 Wes	A,				
Homewood, 1 m	nile to property on	left				
SIZE OF LOT	3 plus acres		TYPE	BLDG.	ER OF BEDROOM	<u> </u>
IF NOT SINGLE RES	SIDENCE DESCRIBE					
	M INSTALLED UND	ER THIS APPLICA	TION IS ACC	EPTABLE ON	LY UNTIL PU	BLIC
APPROVED BY		FOR	(KIND OF SYS	DATE	//	
REJECTED BY		FOR	(KIND OF SYST	DATE _		
HOLD PENDING FU	IRTHER TESTS			DATE		<del></del>
PEASONS FOR REJ	ECTION OR HOLDING			·		
					•	
	<del></del>	<del></del>	····		<del></del>	

# THIS IS NOT A PERMIT



Jaiside #32 Health &123/Es Choe

11650 Farside Road Ellicott City, MD 21043 August 21, 1985

Department of Public Works
Bureau of Inspections Licenses & Permits
3430 Court House Drive
Edicott City, MD 21043

Dear Sir:

The site plan with serial number 64426 is being resubmitted because there has been some changes made. The floor plan of the house is being reversed and the entire house is being moved sixty feet north of the original plan.

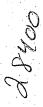
Thank you,

Injong Choe

7051 Waterloo Road Baltimore, MD 21227

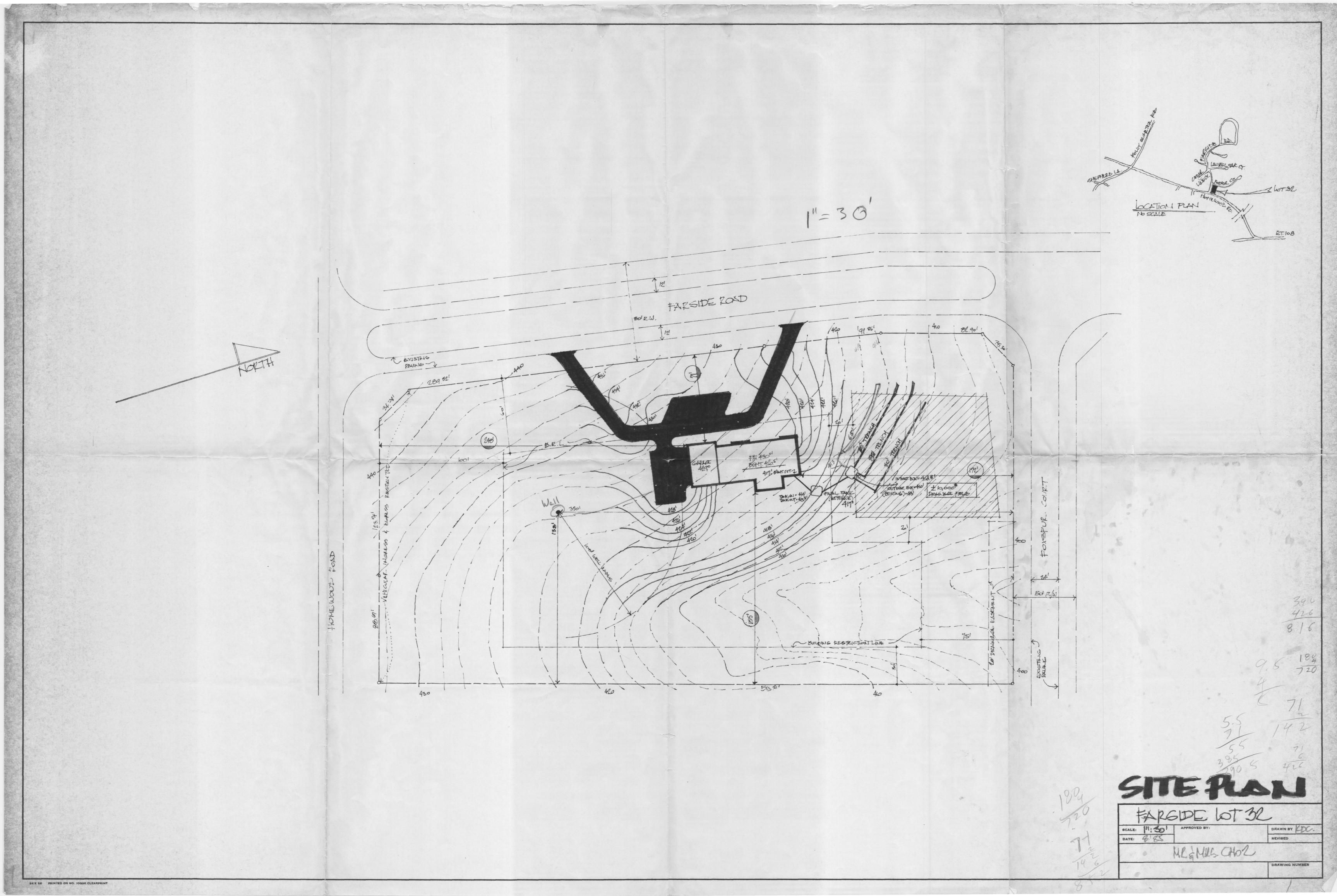
## APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

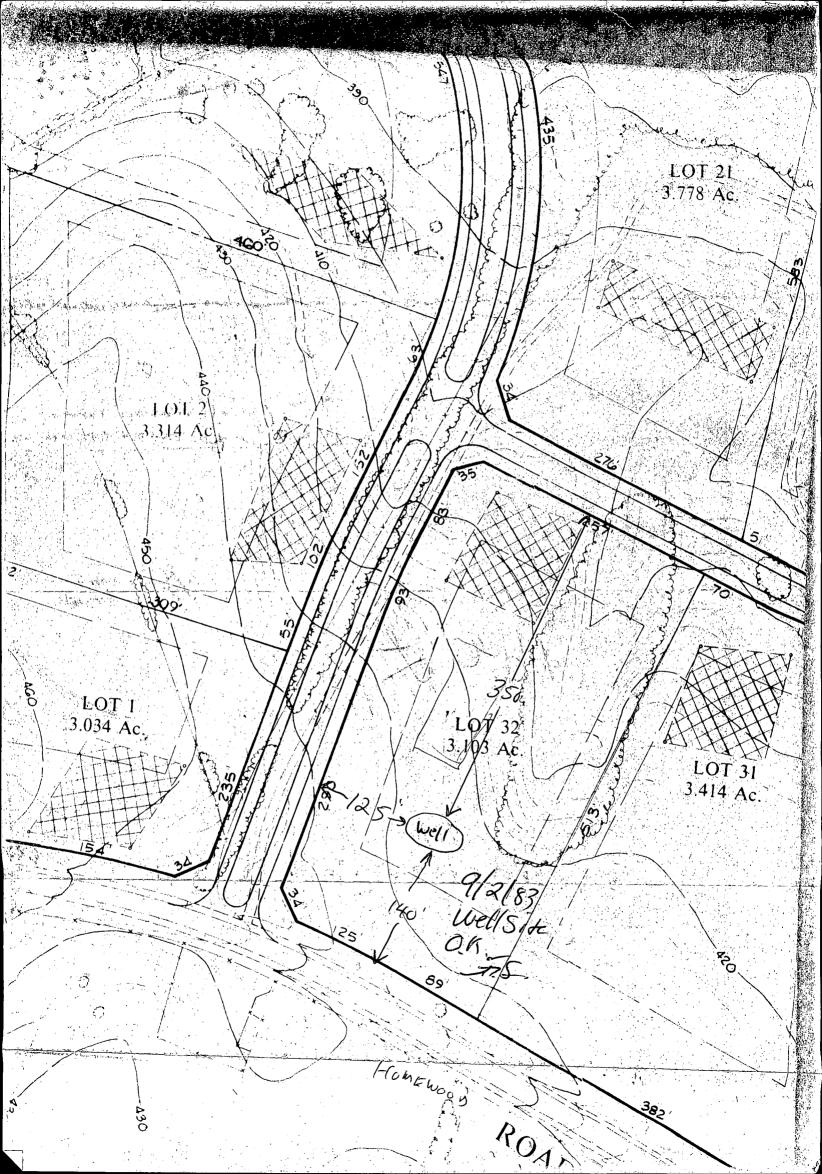
Howard County Health Department Bureau of Environmental Health 3525-H Ellicott Mills Drive Court House Square Ellicott City, Md. 21043 461-9933



Replacement	0	Receipt # 3657 Date 2/257/
Name of Installer Crouse	P+H Suc	Telephone 997-410
License number <u>2356</u> Certified Well Pump Installe	r Well Driller	Registered Plumber
Name of Property Owner <u>Injo</u> Subdivision <u>Fansiel</u> Site Address <u>//650 Fansie</u> l	rig Chol Lot # 32 Wel	Telephone <u>799-3535</u> 11 tag #
Pump 1. Type	Motor 1. Horsepower	Pitless Adapter 1. Make
a. Deep well jet	2. RPM	2. Model #
b. Shallow well jet	3. Voltage	3. Depth
c. Submersible	a. 110	
2. Make Soulds	b. 220	
3. Model #GPM		
5. Pump exceeds well capacit	V V = N =	
6. If Yes, is low pressure c	y resNo	
7. What methods are used to	protect the numb and aloc	+pical No
vibrations? Torque arrestor	S Cable quards	Other
Fank ( )	Piping	Well data
1. Capacity	1. Type	1. Depth ft.
2. Pressure relief	2. Size ///	2. YieldGPM
valve?	3. NSF and/or BOCA	3. Static water
	Code approved	level ft.
	4. Depth of supply	4. Will water supply
	4. Debru of Subbia	I WILL WELL SUBDIY
	line	
		be disenfected b

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





Review # 93 9 2

#### FIELD DATA SHEET HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 8/-0250 Location of property (road) Fartageme	E.		
Subdivision Subdivision	Lot 2 2 Block	Plat	Sec.
Well Driller Jas. Manne	Owner Towns	troe	
Depth of well 260 Distance of measuring point (M.P.) above Static water level (S.W.L.) below M.P.	ve ground 12		
I. High rate pumping reservoir drawdown  Time pump started 145  Total time 15 min to reach pumping w	Pumping rate water level	10 GP	<u>M.P.</u>

Recovery pump test data - observations to be recorded every 15 minutes

TIME (in 15	WATER LEVEL	PUMPING RATE	FLOW METER READING	CALCULATED FLOW
minute in-	below M.P.	time to fill \$\beta\$ gallon bucket	(if used)	(gallons per
tervals	459.04 /	gallon bucket		minute)
2,00	39	6 000		10
2:15	54'	6		S O
2:00 2:15 2:30	54' 54'	6		10
			γ'	
·				
	·			
	<u> </u>	,	•	
	1-11			

	C 1 4434 SEQUENCE NO. (OEP USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
	1 23 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-8 ON ALL CARDS)	FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE	COUNTY A 28400
	DATE Received  DAJE WELL COMPLETED  8  DAJE WELL COMPLETED  15  DAJE WELL COMPLETED  15  DAJE WELL COMPLETED  20  20  20  20  20  20  20  20  20  2	22 <b>2 6 0</b> 26 (TO NEAREST FOOT)	PERMIT NO. FROM "PERMIT TO DRILL WELL"    H
۱	OWNER Choe	Latona	
- 1	STREET OR RFD last name FOX SPUF		Elicak
L	SUBDIVISION Farside	SECTION	LOT3'&
-	WELL LOG  Not required for driven wells  STATE THE KIND OF FORMATIONS	WELL HAS BEEN GROUTED (Circle Appropriate Box)	C 3 PUMPING TEST
1	PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING	TYPE OF GROUTING MATERIAL	HOURS PUMPED (nearest hour)
	DESCRIPTION (Use FEET Check if water	CEMENT C M BENTONITE CLAY B C	PUMPING RATE (gal. per min.
-	additional sheets if needed) FROM TO bearing	NO. OF BAGS NO. OF POUNDS 846	to nearest gal.)
-	Brown Shale 0 37 Graymica nock 37 260 v	GALLONS OF WATER  DEPTH OF GROUT SEAL (to nearest foot)  from from ft: to 3 8 ft.	METHOD USED TO MEASURE PUMPING RATE BUCKET WATER LEVEL (distance from land surface)
	37 260 0	48 TOP 52 54 BOTTOM 58 (enter 0 if from surface)  Casing CASING RECORD	BEFORE PUMPING 17 20
· 2	Oray meca nock	types' insert appropriate  STEEL CONCRETE	WHEN PUMPING  22  25  TYPE OF PUMP USED (for test)
		appropriate code below PLASTIC OTHER	A air P piston T turbine
		MAIN Nominal diameter Total depth CASING top (main) casing of main casing TYPE (nearest inch) (nearest foot)	C centrifugal R rotary Other (describe below)
	The second secon	(Hearest Hoti)  (Hearest Hoti)  (Hearest Hoti)	J jet S submersible
١		E OTHER CASING (if used)	
		diameter depth (feet) H inch from to	PUMP INSTALLED
		C A	DRILLER WILL INSTALL PUMP (CIRCLE) (YES or NO)
		- Z G	IF DRILLER INSTALLS PUMP, AND SECTION MUST BE COMPLETED FOR A L WELLS
		screen type SCREEN RECORD or open hole STBRHO	EXCEPT HOME USE  TYPE OF PUMP INSTALLED  PLACE (A,C,J,P,R,S,T,O)
		appropriate STEEL BRASS OPEN BRONZE HOLE	IN BOX-SEE ABOVE:
		code below PLASTIC OTHER	(to nearest gallon)
		C 2	PUMP HORSE POWER PUMP COLUMN LENGTH
		DEPTH (nearest ft.)	(nearest ft.)  CASING HEIGHT (circle appropriate box
		A 8 9 H 15 17 21	and enter casing height)  LAND SURFACE
.	CIRCLE APPROPRIATE LETTER	S 23 24 26 30 32 36 R 3	below learnest foot)
	A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED	E 3 38 39 41 45 47 51	LOCATION OF WELL ON LOT  SHOW PERMANENT STRUCTURE SUCH AS
	E ELECTRIC LOG OBTAINED  TEST WELL CONVERTED TO PRODUCTION	SLOT SIZE 1 2 3 (NEAREST	BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS
}	WELL I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN	OF SCREEN 56 INCH)	THAN TWO DISTANCES (MEASUREMENTS TO WELL)
	ACCORDANCE WITH COMAR 10.17.13 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION	GRAVEL PACK I I I I I I I I I I I I I I I I I I I	Foxsour Ct.
ļ	PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST. OF MY KNOWLEDGE.	FLOWING WELL INSERT F IN BOX 68 68	7 6
	DRILLERS IDENT. NO. 238	OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)	615
	DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)	T (E.R.O.S.) W Q	4 125 weel
	SITE SUPERVISOR (Size of Asile	70 72 TELESCOPE LOG OTHER DATA	
	SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)	CASING INDICATOR	

### FIELD DATA SHEET HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 8/-0250				
Location of property (road) Foxser	R Court			
Subdivision FARSide	Lot 30 Block	Plat	Sec.	
Well Driller Joseph 2. MAYNE	Owner Inland	CHOE		
		•	•	
Depth of well $260$				
Distance of measuring point (M.P.	) above ground 18			
Static water level (S.W.L.) below	M.P. 48'			-
I. High rate pumping reservoir draw	down			
Time pump started //.45	Pumping rate	10		
Total time ISmin, to reach pur		ft. belo	w M.P.	
المنتهار المعطيين المرابي والمناف التهامية المعطوف المنتهارين والمعطوب المرابي والمتعارب والمتعارب والمتعارب والمتعارب			San an	

TIME (in 15	WATER LEVEL	PUMPING RATE	FLOW METER READING	CALCULATED FLOW
minute in-	below M.P.	time to fill \$	(if used)	(gallons per
tervals		gallon bucket	,	minute)
12:00	54	6 su.		10
12:15	54	Č		10
12:30	54	6		10
12:45	54	4		10
1:00	54	4		10
1:15	54	6		10
1:30	54	4		10
1:45	54	6	'	10
2:00	54	6		10
2:15	54	6		10
2:30	54	6		10
2:45	54	4		10
			•	

## HOWARD COUNTY HEALTH DEPARTMENT

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



Bureau of Environmental Health 3525 Ellicott Mills Drive Ellicott City, Maryland 21043

Director - 461-9956 Water & Sewerage, Permits - 461-9933 Community Environmental Health - 461-9944 Technical Services - 461-9955

December 9, 1986

Mr. Injong Choe 7051 Waterloo Road Baltimore, Maryland 21227

RE:

Farside - Lot 32 11650 Farside Road

Dear Mr. Choe:

This is to advise that the septic system was installed, inspected and approved on April 23, 1986.

The water sample recently sumbitted for testing was free of coliform and fecal coliform bacteria at the time of sampling and is bacteriologically safe for drinking.

#### INTERIM CERTIFICATE OF POTABILITY

This certifies that the initial sampling requirements of COMAR 10.17.13 "Well Regulations" have been met for the water supply system installed under permit(s) <u>HO-81-0250</u>. No guarantee can be given for health protection beyond this date of issue. Based upon a satisfactory investigation and evaluation by the Howard County Health Department, the Department of Health and Mental Hygiene accepts this well system as required by COMAR 10.17.13.09.

This certificate may become final upon completion of the final bacteriological test which is to be taken by the county health department within six months. The well owner accepts his responsibilities under COMAR 10.17.13.10.

December 1, 1986 Date of Water Sample:

September 7, 1983 Date Well Approved:

Craig Williams

Approving Authority Craig Williams, Director Water and Sewerage Program

## HOWARD COUNTY HEALTH DEPARTMENT

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



Bureau of Environmental Health 3525 Ellicott Mills Drive Ellicott City, Maryland 21043

Director - 461-9956 Water & Sewerage, Permits - 461-9933 Community Environmental Health - 461-9944 Technical Services - 461-9955

April 15, 1988

Mr. Injong Choe 11650 Farside Road Ellicott City, Maryland 21043

> RE: Farside, Lot 32 11650 Farside Road Well Permit #H0-81-0250

Dear Mr. Choe:

This is to advise you that the septic system was installed, inspected and approved on April 23, 1986.

The water sample recently submitted for testing was free of coliform and fecal coliform bacteria at the time of sampling and is bacteriologically safe for drinking.

#### FINAL CERTIFICATE OF POTABILITY

This certifies that all sampling requirements of COMAR 10.17.13 "Well Regulations" have been met for the water supply system installed under permit(s) HO-81-0250.

Date of Final Sampling February 25, 1988 Date of Acceptance April 13, 1988

Jane E. Nadeau, Sanitarian Water and Sewerage Program

Water Sample Dates:

12/1/86 2/25/88

JEN:hs

