

## Search Result for HOWARD COUNTY

<https://sdat.dat.maryland.gov/RealProperty/Pages/viewdetails.aspx?County=14&SearchTyp...> 6/4/2019

Date Received (WRA use only)4/6/81DATE WELL COMPLETED15202226Depth of Well200(TO NEAREST FOOT)2837PERMIT NO. FROM "PERMIT TO DRILL WELL" H0-73-3835

OWNER ROUZER DEBRAlast namefirst nameSTREET OR RFD694 E. Watersville RdTOWNPoplar SpringsSUBDIVISIONSECTIONLOT

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	Check if water bearing
	FROM	TO
Top soil	0	3
Brown shale	3	30
Blue slate	30	30
Brown slate	30	45
Flint	45	56
Blue slate	56	108
Brown slate	108	115
Blue slate	115	200

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) Y N

TYPE OF GROUTING MATERIAL CEMENT BENTONITE CLAY

CEMENT NO. OF BAGS6 NO. OF POUNDS400

GALLONS OF WATER30

DEPTH OF GROUT SEAL (to nearest foot) from0 ft. to18 ft.

CASING RECORD

casing types 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)21

PUMPING TEST

HOURS PUMPED (nearest hour)4

PUMPING RATE (gal. per min. to nearest gal.)2

METHOD USED TO MEASURE PUMPING RATEBucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING35

WHEN PUMPING200

TYPE OF PUMP USED (for test) A air P piston T turbine C centrifugal R rotary O other (describe below) J jet S submersible

OTHER CASING (if used)

Each casing diameter inch depth (feet) from to

SCREEN RECORD

screen type or open hole

STEEL BRASS BRONZE OPEN HOLE PLASTIC OTHER

PUMP INSTALLED

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) Y N

IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE

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

CAPACITY: GALLONS PER MINUTE (to nearest gallon)31

PUMP HORSE POWER37

PUMP COLUMN LENGTH (nearest ft.)43

CIRCLE APPROPRIATE BOX

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 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.

DEPTH (nearest ft.)

Each screen slot size123

DIAMETER OF SCREEN (NEAREST INCH)56

GRAVEL PACK

IF WELL DRILLED WAS FLOWING WELL CIRCLE BOX F

CASING HEIGHT (circle appropriate box and enter casing height)

above

LAND SURFACE

below2 (nearest foot)

DRILLERS IDENT. NO.40

DRILLERS SIGNATURE

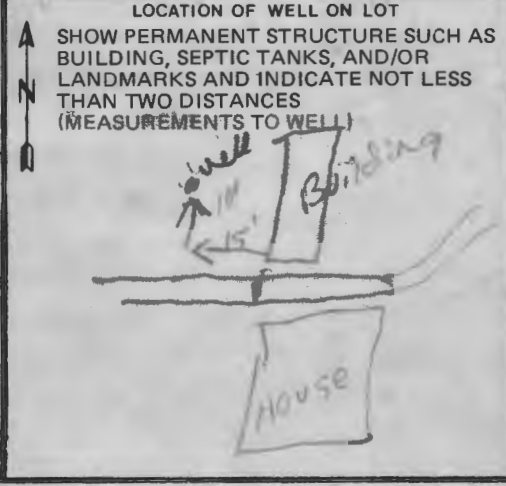
SITE SUPERVISOR (sign of driller or journeyman responsible for sitework if different from permittee)

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

T (E.R.O.S.)

W Q

TELESCOPE CASING LOG INDICATOR OTHER DATA



B 1 0364 SEQUENCE NO. WRA USE ONLY

## STATE OF MARYLAND

## APPLICATION FOR PERMIT TO DRILL WELL

WRA PERMIT NUMBER

NO-73-3835

please print or type

fill in this form completely

DATE RECEIVED

8 (WRA USE ONLY) 13

## OWNER INFORMATION

LAST NAME

OWNER

FIRST NAME

Rouzer, Debra

STREET OR RFD

8766 Apt A, Town & Country Club  
Ellicott City, Md. 21043

TOWN

STATE

ZIP

B 1 CONTINUED

## DRILLER INFORMATION

DRILLER'S NAME

77 LICENSE NO. 80

George Easterday 40  
George Easterday 2-18-81

SIGNATURE

DATE

B 2

## WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN)

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY)

## USE FOR WATER (CIRCLE APPROPRIATE BOX)

☒ D

HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)

☐ F

FARMING (LIVESTOCK WATERING &amp; AGRICULTURAL IRRIGATION)

☐ I

INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)

☐ P

PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)

☐ T

TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

APPROXIMATE DEPTH OF WELL

150

FEET

APPROXIMATE DIAMETER OF WELL

6"

NEAREST INCH

## Method of Drilling (circle one)

☒ BORED (OR AUGERED)☐ JETTED☐ JETTED & DRIVEN☒ AIR ROTARY☐ AIR PERCUSSION☐ ROTARY (HYDRAULIC)☐ CABLE☐ REVERSE ROTARY☐ DRIVE POINT☐ ROTARY

other

## REPLACEMENT OR DEEPEMED 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 DEEPEN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)

Not to be filled in by driller (WRA USE ONLY)

APPROX. PERMIT NUMBER

GAP

WRITE INITIALS

IN BOX

CONDITIONS

A E N S G W Q C U

B 5

SPECIAL CONDITIONS

8-63

(WRA USE ONLY)

B 3

## LOCATION OF WELL

COUNTY

Howard

SUBDIVISION

SECTION

LOT

NEAREST TOWN

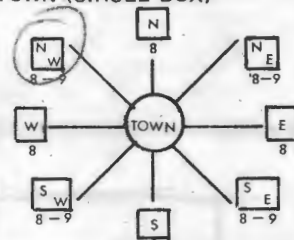
Fowler Springs

MILES FROM TOWN (enter 0 if in town)

2

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



E Watersville Rd

NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



DISTANCE FROM ROAD (CIRCLE APPROPRIATE BOX)

250

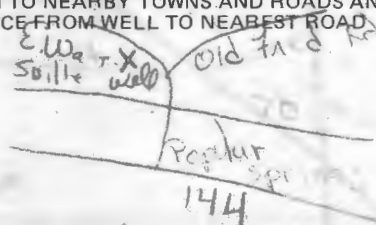
SHOW LOCATION OF WELL WITH AN "X" IN THIS BOX

WRITE THE BOX NUMBER FROM THE MAP HERE

E	770	2
N	550	2

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION

N



See attached sheet also.

[Casey above ground 2 1/2' @ time of ground]

B 4

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

EHA

SIGNATURE

STATE HEALTH

CIRCLE BOX

MO DAY YR

03 7 3 8 7

NORTH

552

EAST

0772

ELEV. (FT.)

DATE

GRID

55

GRID

57

63

65

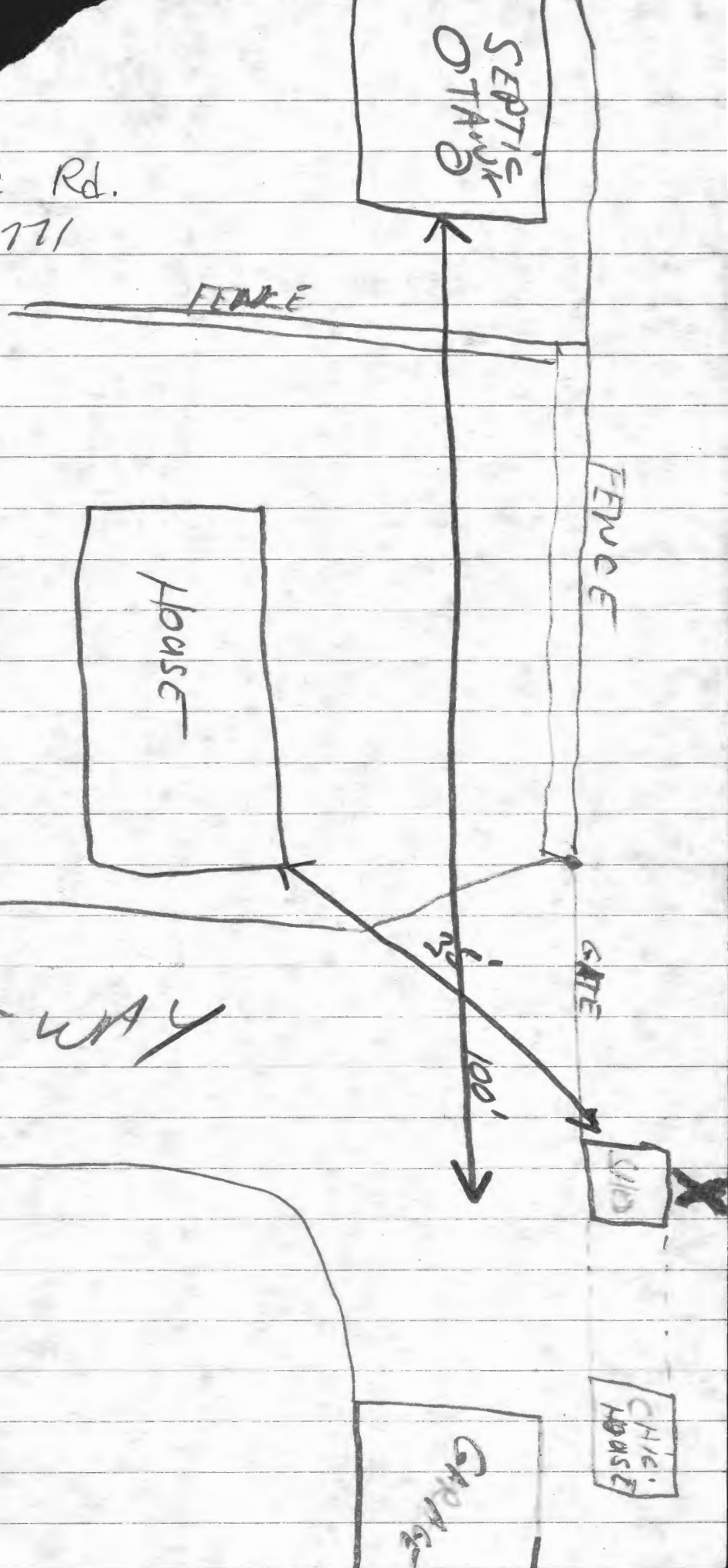
68

HEALTH

DEBRA  
ROUZER

694 E. Watersville Rd.  
Mt. Airy, MD 21771

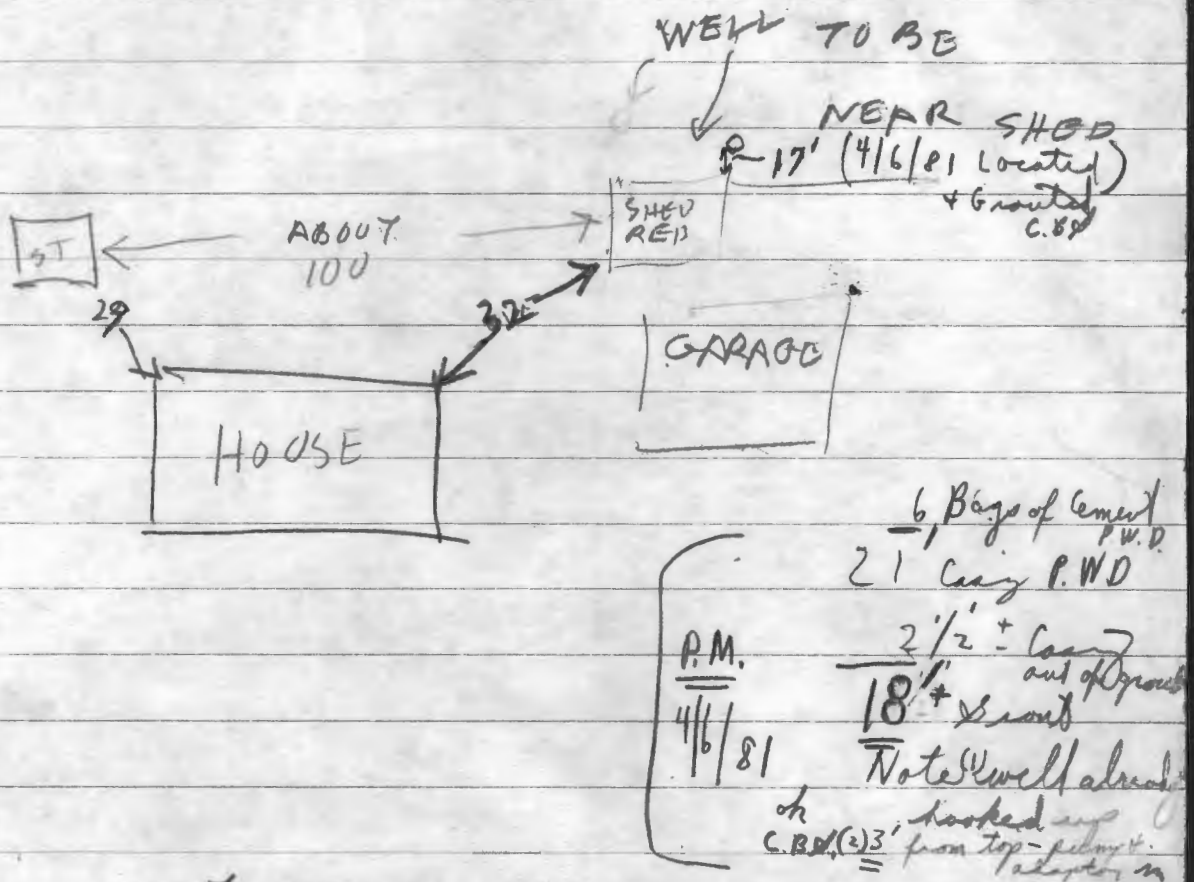
Drilling by  
Easterday Co.





HO. CO. Environmental Health Co.

H073-3835



- ① WELL SITE NOT NEAR PROPERTY LINES OR ROAD
- ② WELL SITE TO BE OVER 100 FT & ON HIGHER GROUND THAN SEPTIC TANK
- ③ EXISTING SPRING DOWN HILL FROM SEPTIC TANK TO BE ABANDONED

2/18/81 RH

TALKED WITH D. KOUZER

WELL DRILLER MUST PUT WELL IN AREA SHOWN

12608 FAWN RUN CT  
TR WOODS

---

RUN -

ST6V6 JACKSON  
410-795-5388

Make Copies of fac sheets  
Will pickup in a day or two

ROUZER

# 3835

finished Thur.

great track down Fri.

20 ft. casing

330-345

694 E. watersville Rd.

46 St.

F.F.

Swen out

on 4/6/81 ✓

@ 3:15-

Pipe down in a }  
complex area }



EH -24

HOWARD COUNTY HEALTH DEPARTMENT

Bureau of Environmental Health

Ellicott City, Maryland 21043

Phone: 992-2330

To: \_\_\_\_\_

Debbie Rouzer

20 acres

694 E. Watersville Rd.

Moore on mailbox

3rd driveway on left after

North of 70

From: \_\_\_\_\_

Date: \_\_\_\_\_

10-1-92  
10:00 am

# APPLICATION

PERCOLATION TESTING

A 48489

P \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043

TELEPHONE: 313-2640

DISTRICT \_\_\_\_\_

DATE 9/10/92

AFTER 15 OCT SEND TO:  
1551 DOLPHIN RD TEL. 904-626-4906  
MILTON, FL 32583

TO: THE COUNTY HEALTH OFFICER  
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER FRANCIS N. + ANNE M. BOWEN

ADDRESS 694 E. WATERSVILLE RD, MT. AIRY, MD PHONE 410-489-5179

(AGENT) OR PROSPECTIVE BUYER VAN MAR ASSOCIATES

ADDRESS 310 SO. MAID ST. MT. AIRY, MD. PHONE 301-829-2890

PROPERTY LOCATION:

SUBDIVISION BOWEN PROPERTY LOT NO. 3

ROAD AND DESCRIPTION \_\_\_\_\_

TAX MAP 2 PARCEL # 21

SIZE OF LOT 4.5 acres TYPE BLDG. ~~EXISTING~~ SINGLE FAMILY  
(SINGLE FAMILY DWELLING OR COMMERCIAL)

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. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT. Anne M. Bowen  
(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

DISAPPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

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

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

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # \_\_\_\_\_ DATE \_\_\_\_\_

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # \_\_\_\_\_ DATE \_\_\_\_\_

## THIS IS NOT A PERMIT

INLET DEPTH \_\_\_\_\_ MAXIMUM BOTTOM DEPTH \_\_\_\_\_ SQ. FT./BEDROOM \_\_\_\_\_

# APPLICATION

PERCOLATION TESTING

A 48490

P \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043

TELEPHONE: 313-2640

DISTRICT \_\_\_\_\_

DATE 9/10/92

TO: THE COUNTY HEALTH OFFICER  
ELLICOTT CITY, MARYLAND

AFTER OCT. 15 SEND TO:

1557 DOLPHIN RD

MILTON, FL 32583

TEL 904-426-4906

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER FRANCIS N. & ANNE M. BOWEN

ADDRESS 694 E. WATERSVILLE RD, MT. AIRY, MD PHONE 410-489-5179

AGENT OR PROSPECTIVE BUYER VAN MAR ASSOCIATES

ADDRESS 310 SO. MAIN ST. MT. AIRY MD PHONE 301-829-2890

PROPERTY LOCATION:

SUBDIVISION BOWEN PROPERTY LOT NO. 32

ROAD AND DESCRIPTION \_\_\_\_\_

TAX MAP 2 PARCEL # 21

SIZE OF LOT 11.51 ACRES TYPE BLDG. EXISTING SINGLE FAMILY  
(SINGLE FAMILY DWELLING OR COMMERCIAL)

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. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

Anne M. Bowen

(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

DISAPPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

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

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

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # \_\_\_\_\_ DATE \_\_\_\_\_

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # \_\_\_\_\_ DATE \_\_\_\_\_

## THIS IS NOT A PERMIT



COUNTY #

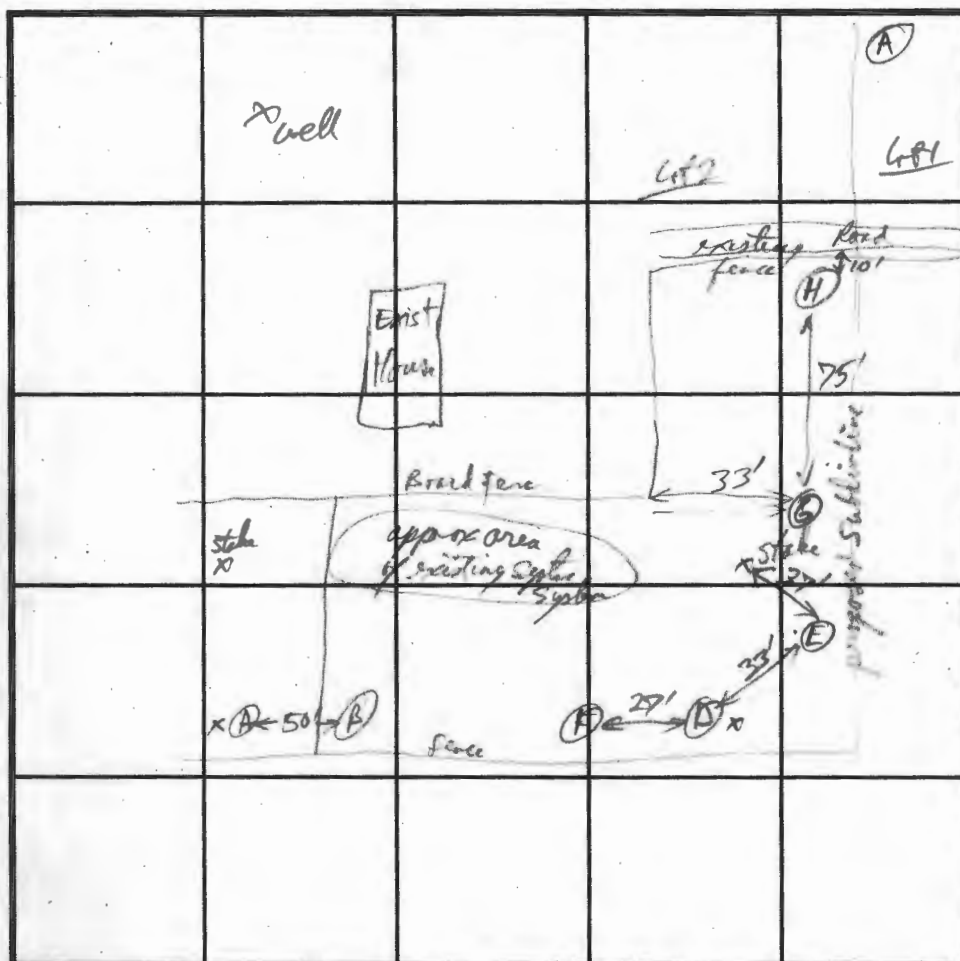
O'neal test

1	Rocky sand	Brn loam	1
	vch red Brn loam	bed clay	
3	Rocky washed ch loam		4
		Red ch loam	
6'	70-90% Rock frag caving		6
7	Rhyolite		

25	Red Ox h steel
4 1/2	Big Rock Red Red Ox CL 50-60% chromium Revised

Hole 6

West	East
Red HSiCL	Red HSiCL
	4 1/2 SiCL
4 1/2	Fragment of Red
	Reddish yellow + Red Brown v ch Loran
7	Big Fragments Region
	Reposed



7. HGH  
SOIL PROFILE

0'	Red Brn - Brn v ch lown 30% Frags
3'	Red Brn Ver. 2 yd. hL 4 lown ch 35% Frags
18'	gray slate Frags 60%
8'	Referred

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
10-1-92	A	1' 2'	Rock				Fail
	B	1' 9'	Rock @ 7'	Not Tested			
	C	old excavation	50+ % Rock Fragments at Surface				
	D	1' 4 1/2'	Rock @ 2 1/2'				Fail
	E	Rock 2'					Fail
	F	1' 4 1/2'					
	G	3 1/2'	2:47:10	2:55:20	2:55:20	3:12:20	17 min
		7'	1' 4 1/2' Rock				
	H	East Side 8 1/2'	2:53:30	3:05:00	3:05:00	3:33	28 min
		8'	Rock @ 7'				

REMARKS

TYPE OF SOIL

TESTED BY

## ALSO PRESENT

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

### TRENCH WIDTH

INLET DEPTH

MAXIMUM BOTTOM DEPTH

**SQ. FT./BEDROOM**

# APPLICATION

## PERCOLATION TESTING

HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 313-2640

Preview note: require several holes for  
existing house. 75 yrs old, no known  
septic history prior to 1991, DISTRICT

JENadeau

DATE

A 48488

P \_\_\_\_\_

9/10/92

AFTER OCT 15 SEND TO:

1537 DOLPHIN RD.

MILTON, FL 32583

TEL. 904-626-4906

TO: THE COUNTY HEALTH OFFICER  
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER FRANCIS N. + ANNE M. BOWEN

ADDRESS 1094 E. WATERSVILLE RD. MT. AIRY, MD (310) PHONE 489-5179

(AGENT OR PROSPECTIVE BUYER) VAN MAR ASSOCIATES Contact after Oct. 15, 1992

ADDRESS 310 So. Main St. Mt. Airy, MD PHONE 301-829-2890

### PROPERTY LOCATION:

SUBDIVISION BOWEN PROPERTY LOT NO. 1

ROAD AND DESCRIPTION \_\_\_\_\_

TAX MAP 2 PARCEL # 21

SIZE OF LOT 3.0 Acres TYPE BLDG. SINGLE FAMILY  
(SINGLE FAMILY DWELLING OR COMMERCIAL)

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. I ALSO AGREE TO

COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT. Anne M. Bowen  
(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

DISAPPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

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

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

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # \_\_\_\_\_ DATE \_\_\_\_\_

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # \_\_\_\_\_ DATE \_\_\_\_\_

# THIS IS NOT A PERMIT

Lot 1 48488

COUNTY #

## SOIL PROFILE

0'

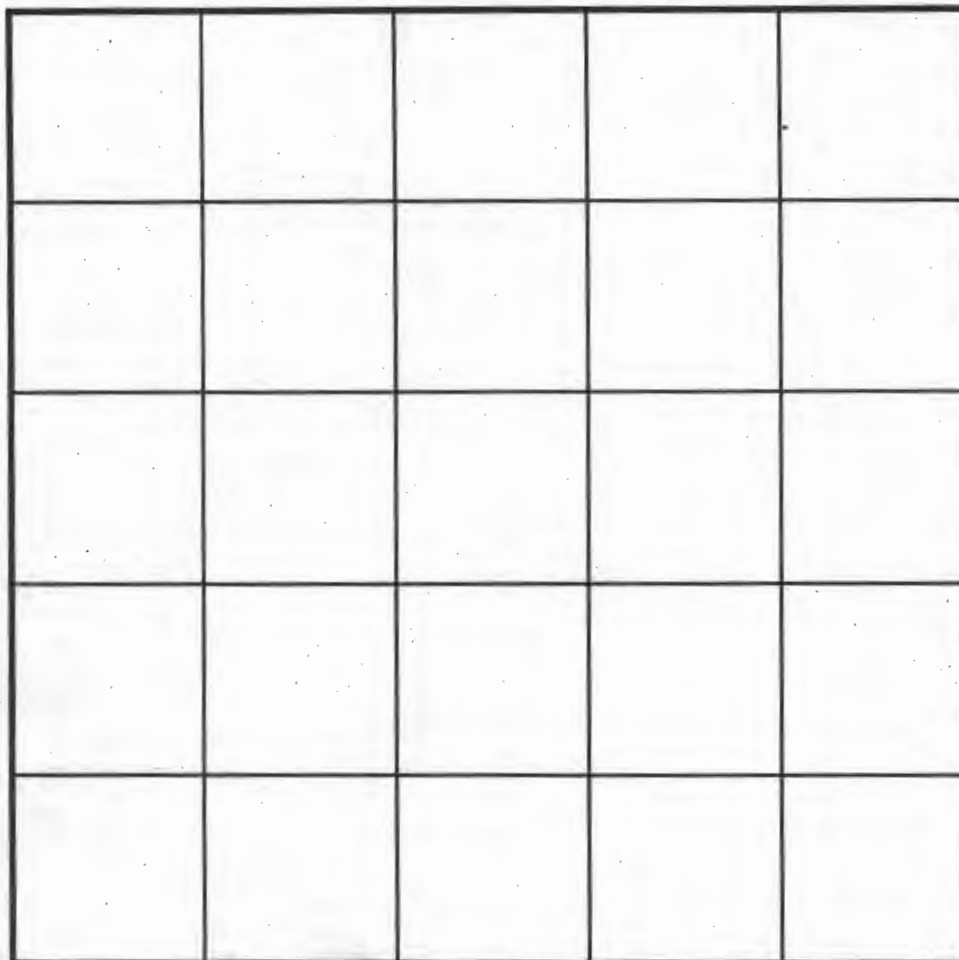
Hole A  
 1' Yellow CL Typ soil  
 2' Red Brn C-ACL  
 Channery 20%  
 3' ch variegated  
 red/brn loam  
 4-4 1/2' loam 30% ch  
 Tan & red brn  
 s loam  
 60-70%  
 large channels  
 of rotten schist  
 rock  
 Fine-thin plates  
 11' Refusal

Hole B

Red Brn  
 Clay-ACL  
 4' Variegated  
 ch loam  
 4 1/2' (pocket rock  
 65% ch  
 on north side)  
 8 1/2' large channels  
 8 1/2' ch red brn  
 loam  
 small channels  
 30-40%

## SOIL PROFILE

0'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

@ 4 1/2' north 12:51:00 to 12:53:30 → 3% 1:07:00

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
10-1-92	A	3 1/2 - 4'	11:19:15	11:35:55	11:36:00	12:14	3P min Fail
	(see profile)	7'	11:17:41	11:21:00	11:24:00	11:26:10	5 min
		11'	11:13:58	11:15:02	11:15:02	11:17:02	2 min
	B	4'	Pocket Rock at 4 1/2' - 8 1/2'				
		6 1/2'	12:16:00	12:24:00	12:24:00	12:47:00	23 min
		14'	12:16:30	12:24(25')	12:24:50	12:29:40	5 min
	C	Refusal 9 1/2'	Pocket Rock at 5 1/2' Bottom				Fail
	D	Rock @ 5 1/2'					Fail
	E	Rock @ 5 1/2' Refusal @ 8 1/2'					Fail
	F	Rock @ 5'					Fail
	G	6	Rock @ 2 1/2' + 5 1/2'				Fail
	H	H	Rock @ 6-7'				Fail

REMARKS

TYPE OF SOIL

TESTED BY

RJ Rinkley

ALSO PRESENT

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

TRENCH WIDTH

INLET DEPTH

MAXIMUM BOTTOM DEPTH

SQ. FT./BEDROOM

# APPLICATION

PERCOLATION TESTING

A 48488

P \_\_\_\_\_

*Page 2*

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 313-2640

DISTRICT \_\_\_\_\_

DATE 9/10/92

TO: THE COUNTY HEALTH OFFICER  
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Francis N & Anne M Bowen

ADDRESS 694 E. Waterville Rd, Mt Airy, MD PHONE 410-489-5129

AGENT OR PROSPECTIVE BUYER Vpn Mar Associates

ADDRESS 310 S. Main St, Mt Airy MD PHONE 301-829-2890

PROPERTY LOCATION:

SUBDIVISION \_\_\_\_\_ LOT NO. 1

ROAD AND DESCRIPTION \_\_\_\_\_

TAX MAP 2 PARCEL # 21

SIZE OF LOT 11.51 Acres TYPE BLDG. Single Family  
(SINGLE FAMILY DWELLING OR COMMERCIAL)

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. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

DISAPPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

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

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # \_\_\_\_\_ DATE \_\_\_\_\_

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # \_\_\_\_\_ DATE \_\_\_\_\_

## THIS IS NOT A PERMIT



Lot 1 ~~48488~~ 48488  
COUNTY #

Hole N SOIL PROFILE

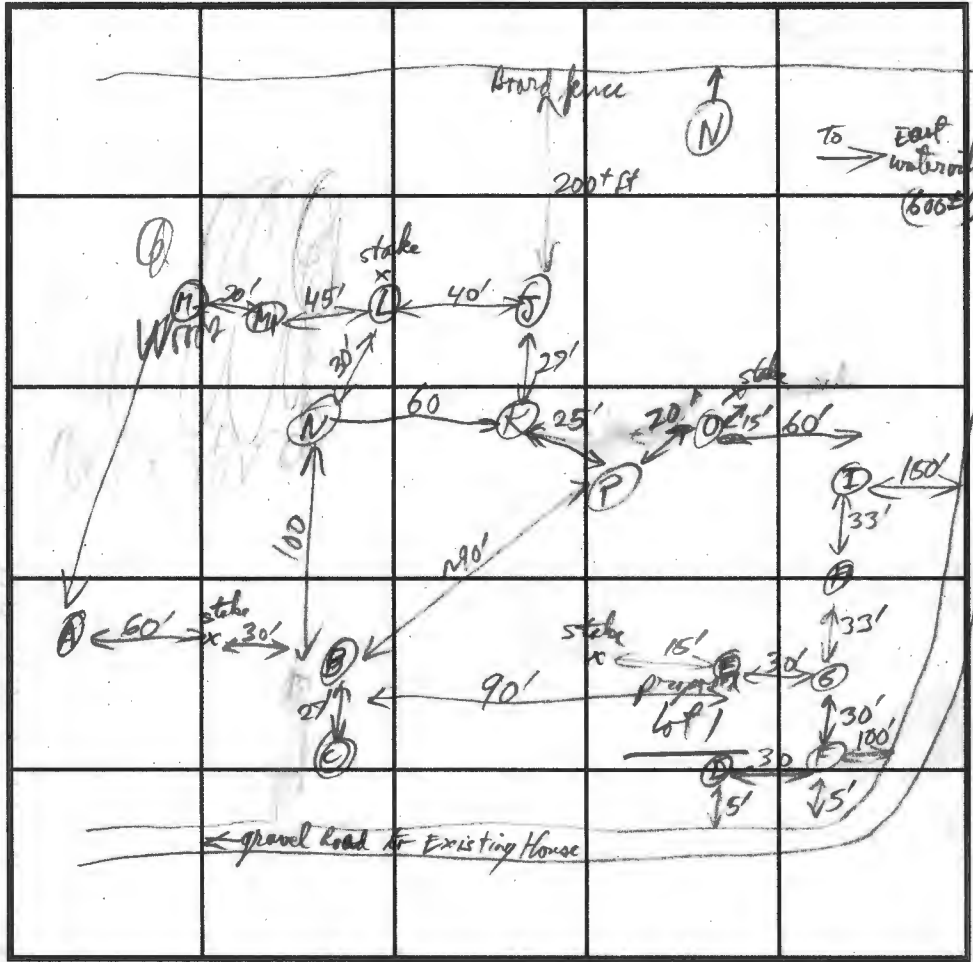
similar to Hole P+A

Hole P

CH RICE-ACL  
4' yel + Red Brn Mix v. ch. loam 20-30%  
6 1/2' Red Brn v. ch. loam  
denser are fewer bit layers  
~40% Red 30% Sfr 30% fine loam

Hole K

Red Brn Clay loam  
4' Reddish yellow - Red Brn fine ch. loam 20-25% weathered chertony (beds + gravel)



SOIL PROFILE

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
10-1-92	N	4'	11:53:10	11:55:40	11:55:40	12:03:40	8 min
		6 1/2'	11:51:10	11:52:58	11:52:58	11:56:10	3 min
		13'					
	I	Rock @ 5 1/2'					Fail
	J	Refusal @ 9'	Rock @ 7'				
	K	14'					
	L	10' rocky starting @ 6'					
	M	Refusal @ 6 1/2'	1 1/2' Rock Refusal @ 6 1/2'				Fail
	O	Rock @ 5 1/2' ft					Fail
	P	4 1/2'	12:40:00	12:42:40	12:42:40	12:45:16	2 1/2 min
		6 1/2'	12:32:14.5	12:34:36	12:34:36	12:37:30	3 min
		14' 9 1/2'	12:32:09	12:34:19	12:34:19	12:38:40	4 min

REMARKS Shallow system only (Trench Bottom below 4 1/2 ft)  
TYPE OF SOIL chertony chert or El liok  
TESTED BY RS Pinkley ALSO PRESENT Ammoniated / Arnold's Backhoe  
TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 2-5 min/in TRENCH WIDTH 3'  
INLET DEPTH 4 1/2' MAXIMUM BOTTOM DEPTH 5 1/2' SQ. FT/BEDROOM 180 ft

# APPLICATION

## PERCOLATION TESTING

A \_\_\_\_\_

P \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 313-2640

DISTRICT \_\_\_\_\_

DATE \_\_\_\_\_

TO: THE COUNTY HEALTH OFFICER  
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

AGENT OR PROSPECTIVE BUYER \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

PROPERTY LOCATION:

SUBDIVISION \_\_\_\_\_ LOT NO. \_\_\_\_\_

ROAD AND DESCRIPTION \_\_\_\_\_

TAX MAP \_\_\_\_\_ PARCEL # \_\_\_\_\_

SIZE OF LOT \_\_\_\_\_ TYPE BLDG. \_\_\_\_\_  
(SINGLE FAMILY DWELLING OR COMMERCIAL)

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. I ALSO AGREE TO  
COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT. \_\_\_\_\_

(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

DISAPPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

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

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

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # \_\_\_\_\_ DATE \_\_\_\_\_

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # \_\_\_\_\_ DATE \_\_\_\_\_

# THIS IS NOT A PERMIT

COUNTY # \_\_\_\_\_

SOIL PROFILE

0'


SOIL PROFILE

0'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	

REMARKS \_\_\_\_\_

TYPE OF SOIL \_\_\_\_\_

TESTED BY \_\_\_\_\_ ALSO PRESENT \_\_\_\_\_

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME \_\_\_\_\_ TRENCH WIDTH \_\_\_\_\_

INLET DEPTH \_\_\_\_\_ MAXIMUM BOTTOM DEPTH \_\_\_\_\_ SQ. FT/BEDROOM \_\_\_\_\_



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## HOWARD COUNTY HEALTH DEPARTMENT

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*Joyce M. Boyd, M.D., County Health Officer*

October 9, 1992

*Reply to:*

Mr. and Mrs. Francis N. Bowen  
69 East Watersville Road  
Mt. Airy, Maryland 21771

RE: Percolation Test Results  
Application Numbers: A48488, A48489, A48490  
Proposed Use: Subdivision  
Property ID: Bowen Property - Lots 1, 2 & 3

Dear Mr. and Mrs. Bowen:

Percolation testing conducted October 1, 1992 on the above referenced property indicated limited satisfactory soil conditions. Limiting soil conditions encountered were shallow depth to bedrock in a number of test holes and slow percolation rates in soils within 3 to 4 feet of the ground surface. Copies of the test results are enclosed.

Further review is contingent upon submission by a registered engineer of a percolation certification plat showing actual locations and elevations of all excavated test holes and a suitable house and well site. The plat should also include the location of all existing wells and septic systems on the property as well as the location of any other relevant features such as streams, swales, or existing structures. A note must be included certifying that all wells and septic systems within 100 feet of property boundaries have been shown. Reconfiguration of sewage disposal areas on proposed lots 1 and 2 and possible lot line adjustments may be necessary. Test for lot 3 failed to establish the required sewage disposal area for in ground sewage disposal system. Please provide a preliminary site sketch if additional conventional or sand mound sewage disposal testing is requested.

This should be submitted within sixty(60) days to allow field verification if necessary.

If you have any questions regarding this matter, please feel free to contact me at the above address or by calling 313-2640.

Very truly yours,

Ronald J. Pinkley, R. S.  
Water and Sewerage Program

RJP:jr  
Enclosures  
cc: VanMar Associates  
File

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**Bureau of Environmental Health**  
3525-H Ellicott Mills Drive Ellicott City, Maryland 21043-4544  
Water and Sewerage, Permits 313-2640 Community Environmental Health 313-2642  
Technical Services 313-2644 Director 313-2645 TDD 313-2323



owner  
Confirms Test Date etc  
9/28/92



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## HOWARD COUNTY HEALTH DEPARTMENT

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*Joyce M. Boyd, M.D., County Health Officer*

September 11, 1992

*Reply to:*

Mr. and Mrs. Francis N. Bowen  
694 E. Watersville Road  
Mt. Airy, Maryland 21771

RE: Percolation Testing  
Bowman Property  
East Watersville Road  
Tax Map: 2 Parcel: 21

Dear Mr. & Mrs. Bowen:

A percolation test date has been reserved for 10:00 a.m., Thursday, October 1, 1992.

You will be responsible for having a contractor on-site to excavate test holes at the corners of proposed percolation areas.

The proposal is to subdivide a two lots from a larger property containing one existing house. Part of the subdivision review process is to ensure that any remainder existing parcel has adequate provision for its water supply and waste disposal requirements.

To this end, percolation testing should be conducted to confirm that adequate area is preserved with the residue parcel to declare an acceptable 10,000 square feet sewage disposal easement to serve the existing structure. The well would also be subject to construction inspection to ensure that it is properly protected.

Please call to confirm test date and to discuss testing requirements for existing house.

Very truly yours,

Craig Williams, Program Director  
Water and Sewerage Program

CW:jr

cc: Vanmar Associates, Inc.  
File

# PERMIT

## SEWAGE DISPOSAL SYSTEM

### DEPARTMENT OF HEALTH AND MENTAL HYGIENE

#### HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

461-9933

INDEXED

P 47424

A REPAIR

DISTRICT \_\_\_\_\_

DATE 8/23/91

DATE SYSTEM APPROVED 8/29/91

INSPECTOR C.B.A.

Arnolds Backhoe & Septic Service, Inc. IS PERMITTED TO INSTALL \_\_\_\_\_ ALTER X

ADDRESS 7110 Woodbine Road, Woodbine, Maryland 21797 PHONE 795-7873

SUBDIVISION \_\_\_\_\_ LOT \_\_\_\_\_ ROAD 694 East Watersville Road

PROPERTY OWNER Francis Bowen PHONE: 489-5179

ADDRESS 694 East Watersville Road  
Mt. Airy, Maryland

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

\_\_\_\_\_ SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED \_\_\_\_\_

REPAIR - PURPOSE - Replace collapsed septic tank with a new 1250 concrete tank.

8/29/91 Please see back.

C.B.A.

PLANS APPROVED BY Craig Williams DATE 8/23/91

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: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS, 90° ELBOWS NOT ACCEPTABLE.

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

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 35/40 PVC OR ABS

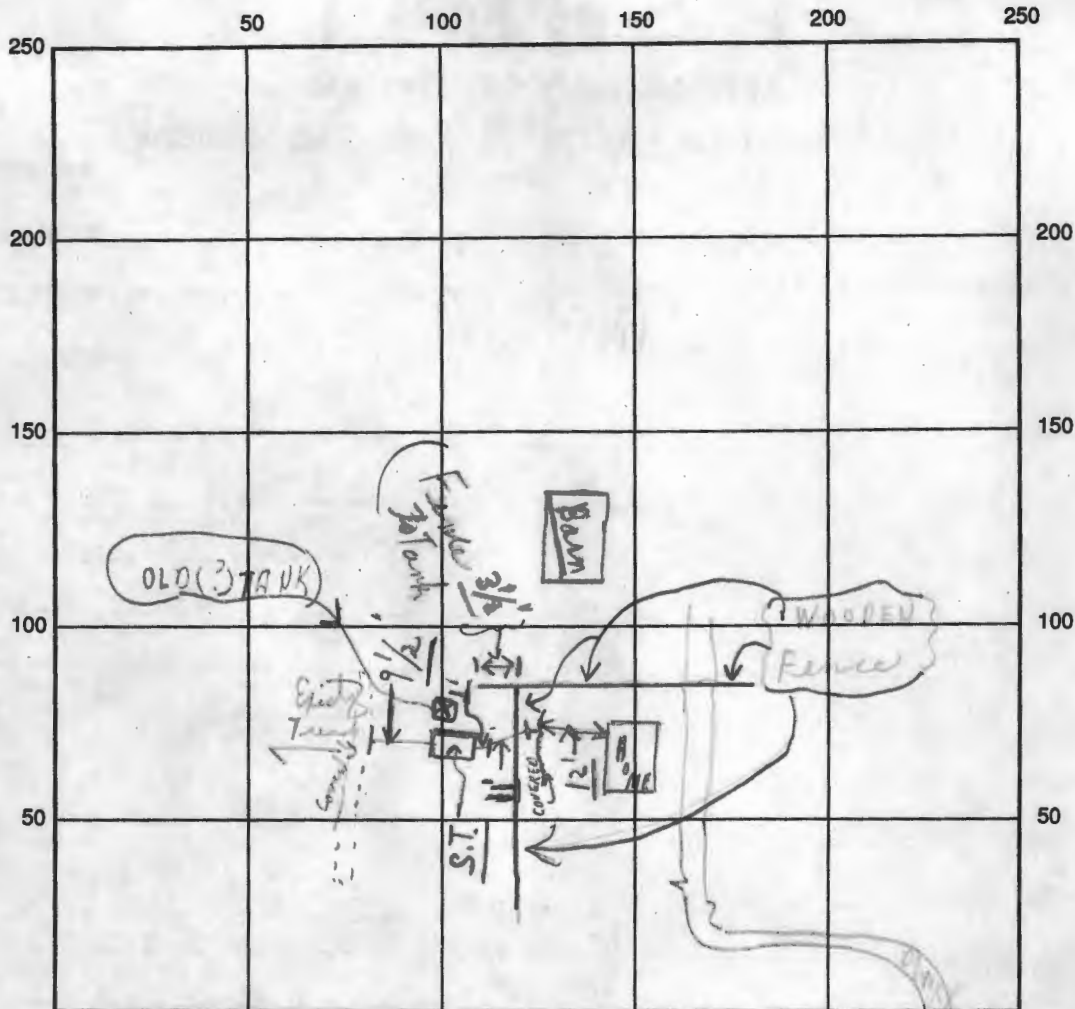
PERMIT VOID AFTER TWO YEARS

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

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

47424



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

E. WATERVILLE RD

SEPTIC TANK LEVEL OK CLEANOUTS OK

DISTRIBUTION BOX LEVEL (N/A)

DRAIN FIELD/TITLE DEPTH — FT. TRENCH WIDTH — FT. INLET DEPTH 1 1/2 FT.

EFFECTIVE GRAVEL DEPTH — FT. TOTAL LENGTH — FT.

NUMBER OF TRENCHES — ONE SIDEWALL/BOTTOM AREA — SQ. FT.

DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA — SQ. FT.

REMARKS: 8/29/91 concrete tank only + adjacent pipe  
ok to cover all work. New Tank edge almost on line with  
side of house this date;

DATE SYSTEM APPROVED 8/29/91 INSPECTOR Charles Bryan Hester

Howard County Health Department

To:

JANE

- PLG PLAT

JUST CAME IN

BOWEN PROPERTY

PLGSS LOCATE LOT

JUST PER'D BY ROAD

PLEASE HAVE HIM REVIEW &  
COMMENT TO ME.

IF YOU CANT FIND LOT FILE,  
ITS PROBABLY IN  
MY OFFICE.

From:

Date:

10/20

HD-170

THE QUESTION IS  
ARE WE OK WITH TESTING  
ON LOT 3  
OR IS MORE TESTING  
NEEDED

THEY SAID NO  
ON LOT 3  
WANT MORE  
TESTING  
PLEASE GIVE  
CABAL REVIEW  
A  
FOR

1/2/02

Brown Property TH 2/21

Lot #1 - OK as tested  
has a 10,000

Lot #2 - Enough area for horses  
estimated based on 2 good holes only  
and associated good holes on bordering lot 1)

Lot 3 Entire Area Needs  
S.M. Testing

11/5/92

Bud Arnold said

Owner "cancelled" ~~the~~ He'll

permanently for 2 lots only

SM test

about plot revision

10/28

~~APD~~ D

6th

ARNOLD

many HOLE5?

where?

995-9893

TEST DATE

NOV 5

BOWMAN

WATERVILLE

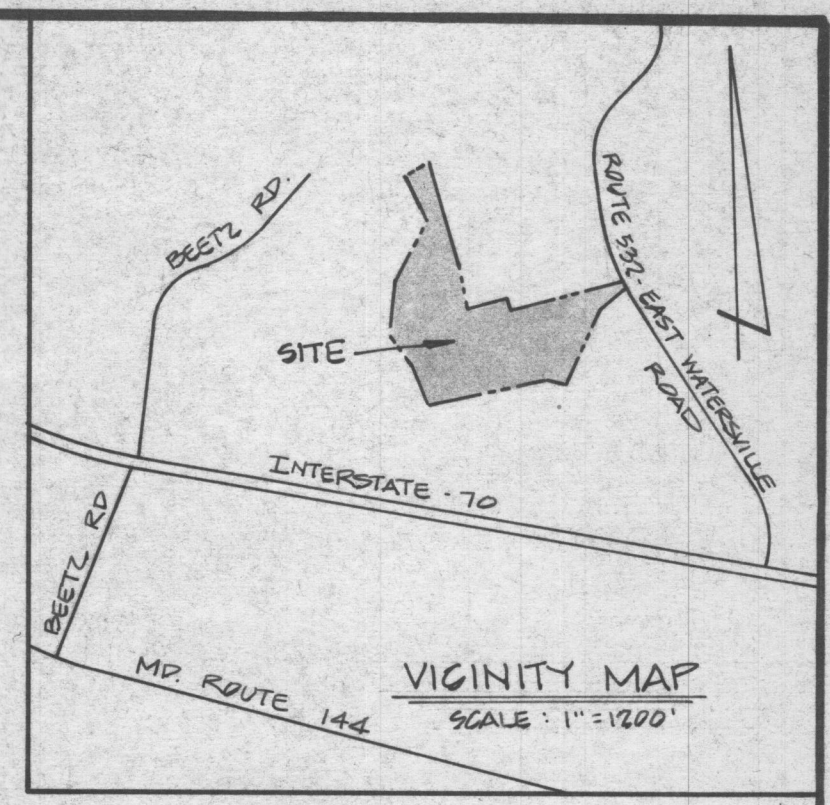
RD 1  
CROSS



ORIGINAL AREA - FRANCES N. & ANN BOWEN  
L. 1188, P. 244

AREA LOT 1, BOWEN PROPERTY	3.00 AC ±
AREA LOT 2, BOWEN PROPERTY	4.50 AC ±
AREA LOT 3, BOWEN PROPERTY	11.51 AC ±
TOTAL AREA, BOWEN PROPERTY	19.01 AC ±

OWNERS:  
FRANCES N. AND ANN BOWEN  
694 EAST WATERSVILLE ROAD  
MOUNT AIRY, MARYLAND 21771  
(301) 489-5179



THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF 10,000 SQUARE FEET AS REQUIRED BY MARYLAND STATE DEPARTMENT OF HEALTH AND MENTAL HYGIENE FOR INDIVIDUAL SEWERAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWERAGE IS AVAILABLE. THESE EASEMENTS SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENTS. RECORDATION OF A MODIFIED SEWERAGE EASEMENT SHALL NOT BE NECESSARY.

THERE ARE NO EXISTING WELLS OR SEPTIC SYSTEMS WITHIN 100' OF ANY PROPERTY BOUNDARIES UNLESS OTHERWISE SHOWN HEREON.

RECEIVED  
HOWARD COUNTY  
HEALTH DEPT.  
92 OCT 20 PM 2:01

Test Hole Location  
Bowl Area  
10/20/92

- PROPOSED PERCOLATION TEST SITE
- PROPOSED WELL SITE
- SUCCESSFUL PERCOLATION TEST SITE
- EXISTING PERCOLATION TEST SITE

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

HOWARD COUNTY HEALTH OFFICER \_\_\_\_\_ DATE \_\_\_\_\_

# PERCOLATION TEST FLAT BOWEN PROPERTY

TAX MAP: 2 PARCEL: 21  
SITUATED ON EAST WATERSVILLE ROAD  
FOURTH ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND  
SCALE: 1"=100' SEPTEMBER, 1992

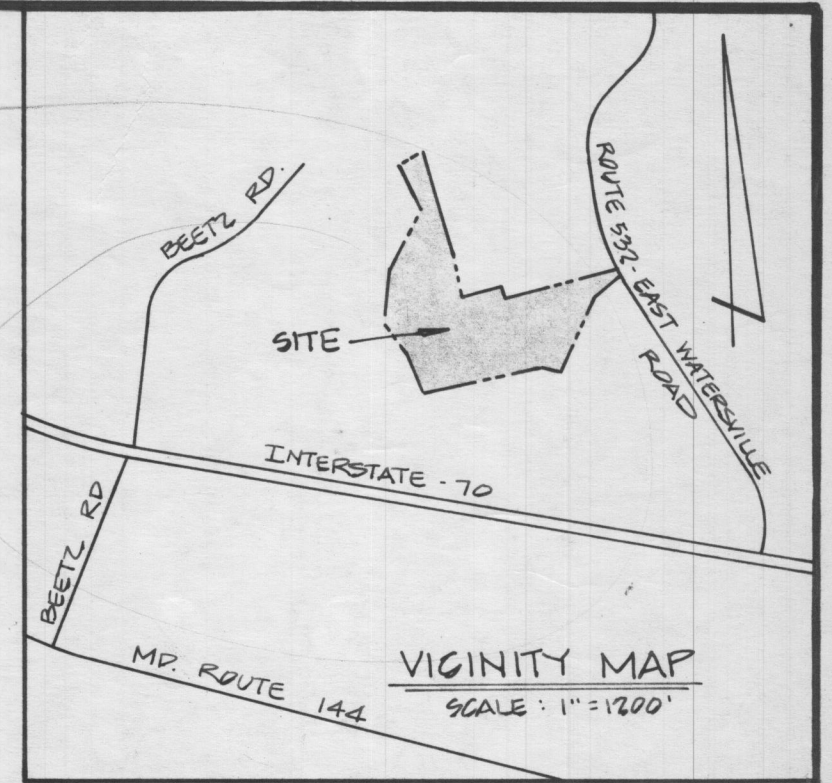
**VANMAR ASSOCIATES INC.**  
Engineers • Surveyors • Planners  
310 South Main Street, P.O. Box 328, Mount Airy, Maryland 21771  
(301) 829-2890 (301) 831-5015 (410) 549-2751 Fax (301) 831-5603



ORIGINAL AREA: FRANCES N. & ANN BOWEN  
L. 1188, F. 244

AREA LOT 1, BOWEN PROPERTY 3.00 AC. ±  
AREA LOT 2, BOWEN PROPERTY 4.50 AC. ±  
AREA LOT 3, BOWEN PROPERTY 11.51 AC. ±  
TOTAL AREA, BOWEN PROPERTY 19.01 AC. ±

OWNERS:  
FRANCES H. AND ANN BOWEN  
692 EAST WATERSVILLE ROAD  
MOUNT AIRY, MARYLAND 21771  
(301) 489-5179



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THERE ARE NO EXISTING WELLS OR SEPTIC SYSTEMS WITHIN 100' OF ANY PROPERTY BOUNDARIES UNLESS OTHERWISE SHOWN HEREON.

- PROPOSED PERCOLATION TEST SITE
- PROPOSED WELL SITE
- SUCCESSFUL PERCOLATION TEST SITE
- EXISTING PERCOLATION TEST SITE

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

HOWARD COUNTY HEALTH OFFICER

DATE

## PERCOLATION TEST PLAT BOWEN PROPERTY

TAX MAP: 2 PARCEL: 21  
SITUATED ON EAST WATERSVILLE ROAD  
FOURTH ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND  
SCALE: 1" = 100' SEPTEMBER, 1992



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