

SEPTIC SYSTEM TO BE INSTALLED
FIRST BEFORE BUILDING PERMIT
CAN BE SIGNED:

PERMIT

SEWAGE DISPOSAL SYSTEM

P.M. 10/24/77 P.C.O.
P 27016
A 19883

10/24/77
10/25/77
Howard County
after 10/20/77

MARYLAND STATE DEPARTMENT OF HEALTH

ELLICOTT CITY

DISTRICT 3rd

DATE 10/10/77

RECEIVED

Suburban Contracting IS PERMITTED TO INSTALL ALTER

ADDRESS Shipley Lane, Kingsville, Maryland PHONE 592-8350

A SEWAGE DISPOSAL SYSTEM LOCATED AT _____

SUBDIVISION Driver ROAD 1271 Sugar Maple Drive LOT 7

PROPERTY OWNER Guy D. & Julie Boston

ADDRESS 8822F Town & Country Blvd., Ellicott City, Md. 21043 Phone: 461-9407

SPECIFICATIONS 3 bedrooms

DRAIN FIELD _____ DEPTH _____ FEET, BOTTOM AREA _____ SQ. FT.

SEEPAGE PITS _____ ABSORBENT SIDE-WALL AREA _____ SQ. FT.

SEPTIC TANK CAPACITY 1000 GALLONS

BLDG. PERMIT SIGNED
AND RETURNED 10/28/77
Serial No. 33551

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 22% & TANK CAPACITY 50%.

OTHER DRY WELL - 500 sq. ft. absorbent sidewall area to begin at 3 ft. below original grade. Maximum depth permitted for dry well is 10 ft. below original grade. Locate dry well 77 ft. from front lot line and 20 ft. from left side line as seen from Sugar Maple Drive. If trench is needed, leave 5 ft. earth buffer between trench and dry well, and run the necessary distance to make up total sidewall area. Trench to follow contour of the ground. NOTE: THERE CAN BE NO BASEMENT FIXTURES IN THIS HOUSE. NOTE: CALL FOR INSPECTION OF TRENCH BEFORE PLACING STONE IN TRENCH. 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.

PLANS APPROVED BY Donald W. Monaghan DATE 6/9/75

FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

NEITHER THE HOWARD COUNTY COMMISSIONERS NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

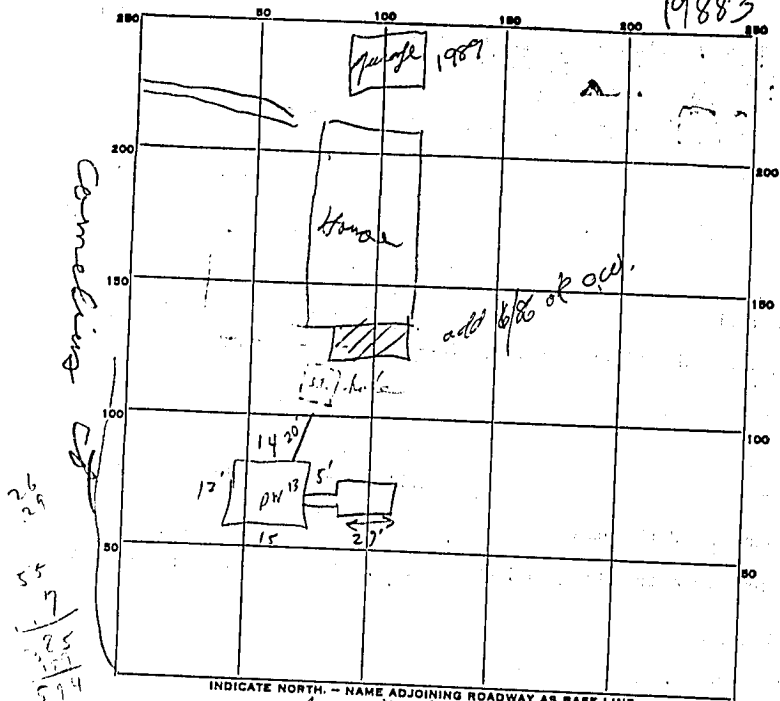
BLDG. PERMIT SIGNED
AND RETURNED 7/25/79
Serial # 20070
2-car garage

BLDG. PERMIT SIGNED
AND RETURNED 6/3/86
Serial # 71048
addition

BLDG. PERMIT SIGNED
AND RETURNED 7/30/82
Serial # 50417
shed

19883

19883



connecting

26
29
55
7
25
1
54

INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD Not Slayer Maple Dr. S.T. No. P.W. No.

SEPTIC TANK, LEVEL Not CLEANOUTS

DISTRIBUTION BOX, LEVEL N/A

FILE FIELD, DEPTH 10' ± FT. TRENCH WIDTH FT.

GRAVEL DEPTH 7 IN. TOTAL LENGTH 27 FT. ① 189

NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA 189

SEEAGE PITS, INSIDE DIAMETER 35 FT. DEPTH BELOW INLET 7 FT. ②

ABSORBENT AREA 385 SQ. FT. + 189 in trench

REMARKS 10/24/77 Trench - 27' long ok for gravel; No paper in trench; no connection of pipe to septic tank.

RAB need to see connection to house 25 Oct 77 C.W.

DATE SYSTEM APPROVED 12-20-78 INSPECTOR DWM

APPLICATION

A 1983

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 3

DATE 5/1/74

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 Allan C. Driver and wife

ADDRESS 1340 Driver Road Marriottsville, Md. PHONE 442-2233

PROPERTY LOCATION:

SUBDIVISION Driver S/D LOT NO. ?

ROAD AND DESCRIPTION Road A

SIZE OF LOT ? TYPE BLDG. 3 or 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/ Allan C. Driver

APPROVED BY _____ FOR _____ DATE _____
(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

C 1 0708
SEQUENCE NO. (WRA USE ONLY)
1 2 3 (SEQ. NO.) 4
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

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 19883

DATE RECEIVED (WRA USE ONLY) 12-11-77
DATE WELL COMPLETED
8-13

DEPTH OF WELL 138
22 (TO NEAREST FOOT) 26

PERMIT NO. FROM "PERMIT TO DRILL WELL" 13-2373
28 29 30 31 32 33 34 35 36 37
DRILLERS IDENTIFICATION NO. 277

OWNER
LAST NAME
STREET OR RFD
POST OFFICE

WELL LOG		
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING		
DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET FROM	TO
BROWN SAND	0	20
GRAY SAND STONE	20	138

well 138 ft

2 1/2" open 30' case 8' long RRB 10-4-77

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) Y N

TYPE OF GROUTING MATERIAL (CIRCLE BOX) CEMENT M BENTONITE CLAY BC

NO. OF BAGS 4 NO. OF POUNDS 846

GALLONS OF WATER 55

DEPTH OF GROUT SEAL (TO NEAREST FOOT) FROM 0 TO 30 FT.

CASING RECORD

INSERT APPROPRIATE CODE BELOW

STEEL S CONCRETE C
PLASTIC P OTHER O

MAIN CASING TYPE S T

NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) 6

TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) 31

OTHER CASING (IF USED)

DIAMETER (INCH) DEPTH (FEET) FROM TO

SCREEN RECORD

INSERT APPROPRIATE CODE BELOW

STEEL S BRASS B OPEN HOLE H
PLASTIC P OTHER O

DEPTH MEASUREMENT

DEPTH (NEAREST WHOLE FOOT) FROM 0 TO 138

SLOT SIZE 1, 2, 3

DIAMETER OF SCREEN 55 (NEAREST INCH) FROM TO

GRAVEL PACK

IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX F

WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER) TELESCOPE CASING LOG INDICATOR OTHER DATA AVAILABLE

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) 2

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 10

METHOD USED TO MEASURE PUMPING RATE ROTARY

WATER LEVEL (DISTANCE FROM LAND SURFACE) BEFORE PUMPING 20 (NEAREST FOOT) WHEN PUMPING 130 (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

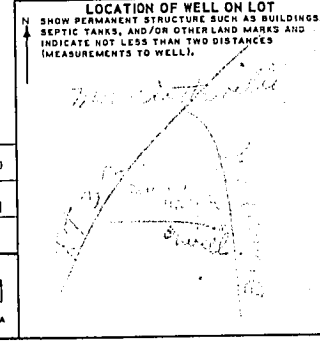
DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) YES Y NO N

CAPACITY: GALLONS PER MINUTE (TO NEAREST GALLON) 31 38

PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH (NEAREST FOOT) 23 47

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT) ABOVE LAND SURFACE 1 (NEAREST FOOT) BELOW 49 51



CIRCLE APPROPRIATE BOXES

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.

DRILLERS NAME
PLEASE PRINT RAY KEYSER
SIGNATURE Ray Keyser