

5/25/76
5/25/76
d. m. s. p. m.
please
inspect

off 5-

PERMIT

P 23276
A 21547

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY
DISTRICT 4th

INDEXED

5/27/76

DATE 5/17/76

Arnold Septic Tank Service

IS PERMITTED TO INSTALL ALTER

ADDRESS Woodbine, Maryland

PHONE 795-1285

A SEWAGE DISPOSAL SYSTEM LOCATED AT

SUBDIVISION Poplar Heights

ROAD 17018 Hardy Road

LOT 35 & 36

PROPERTY OWNER William L. & Barbara J. Reed

ADDRESS Hardy Road, RFD 3, Mt. Airy, Maryland

SPECIFICATIONS 4 bedrooms

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

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

SEPTIC TANK CAPACITY 1250 GALLONS

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 22% & TANK CAPACITY 80%.

OTHER DEEP TRENCHES - The drainfield will consist of 2 parallel trenches, 1072 sq. ft. needed, each 75 ft. long, 12 ft. deep, 2 ft. wide, and a minimum of stone of 3 ft. The trenches will be spaced no closer together than 20 ft. edge-to-edge. The first trench will begin at a point 140 ft. ~~back~~ back from the road edge and 10 ft. in from the right property line and run in a direction toward the left property line. The second trench will be placed alongside the first. CALL FOR INSPECTION OF TRENCH BEFORE PLACING GRAVEL 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. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA ACCEPTED.

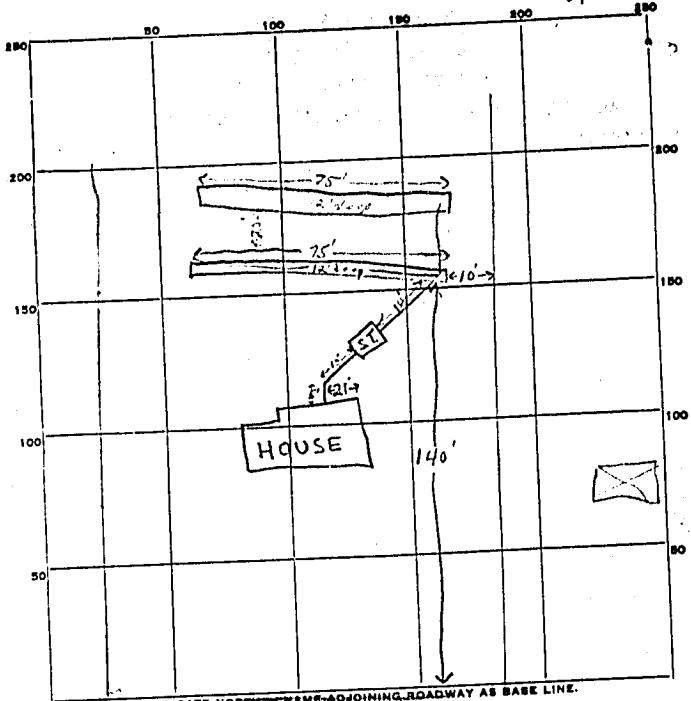
PLANS APPROVED BY Robert T. Moorfield DATE 7/31/75

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.

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7/31/76

A 21547



INDICATE NORTH. NAME ADJOINING ROADWAY AS BASE LINE.

Hardy Road

PERMIT CARD signed, work sat. end 5/5/76

SEPTIC TANK, LEVEL

CLEANOUTS S.T. 1

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH 12 FT. TRENCH WIDTH 2 FT.

GRAVEL DEPTH 8-9' IN. TOTAL LENGTH 150 FT.

NUMBER OF TRENCHES 2 1/2 SIDEWALL TOTAL BOTTOM AREA _____

SEEPAGE PITS, INSIDE DIAMETER _____ FT. DEPTH BELOW INLET _____ FT.

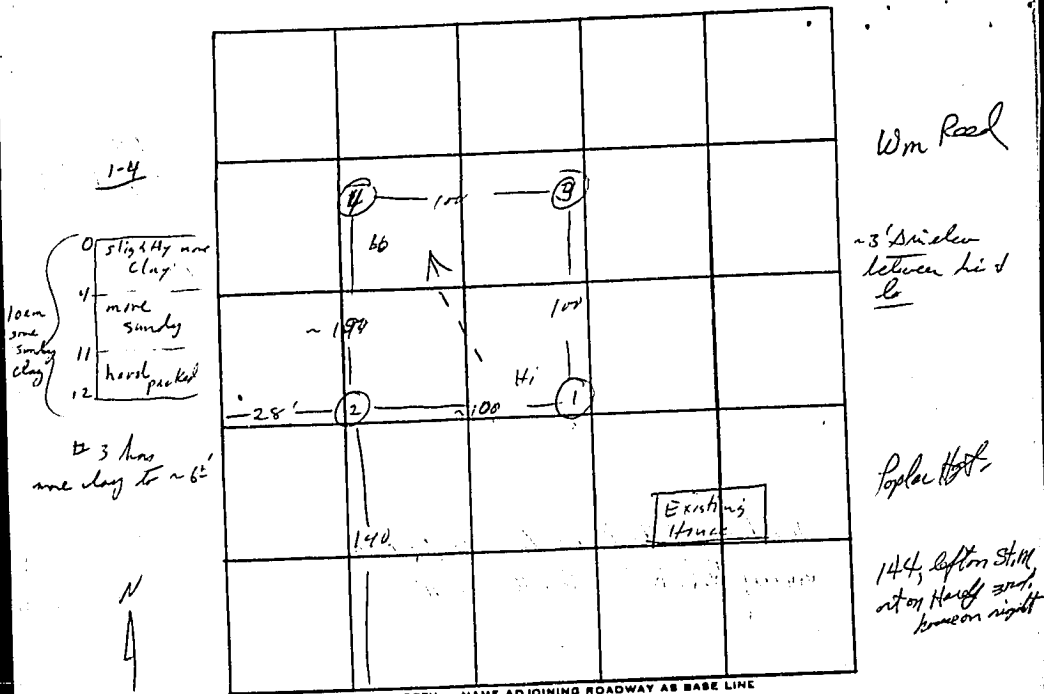
ABSORBENT AREA _____ SQ. FT.

REMARKS 5/25/76 First trench is 75' long x 2' deep with gravel bottom trench 5' d.
 5/22/76 OK to cover trench closed to home. OK to add gravel to all trench.
 2nd trench 75' x 2' x 12' F.S.

DATE SYSTEM APPROVED 5-27-76

INSPECTOR *DW Murray*

A 21547



DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
6/10	1	12	10 ³²	10 ³⁶	10 ³⁶	10 ⁴⁹	13
	1A	4	10 ³³	10 ³⁶	10 ³⁶	11 ⁰³	28
	2	12	V&S	dry	same		
	3	12	10 ³⁵	10 ³⁸	10 ³⁸	11 ⁰⁵	27
	3A	4	10 ³⁴	>	30		
	4	12	10 ³²	10 ⁴⁴	10 ⁴⁴	11 ⁰⁶	20
	4A	4	10 ³⁷	10 ³⁸	10 ³⁵	10 ⁴⁴	6
	3B	4	10 ⁴⁶	10 ⁴²	10 ⁴⁸	10 ⁵⁴	6
	2A	4	10 ⁵⁵	10 ⁵⁷	10 ⁵²	11 ⁰²	6
	2B	12	10 ⁵²	11 ¹⁵	11 ¹⁶	11 ³²	26

REMARKS _____

TYPE OF SOIL _____

TESTED BY R. Moorefield ALSO PRESENT: H. P. ...

APPLICATION

A 21549

SEWAGE DISPOSAL TESTING
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. 358

P _____
DISTRICT 4th
DATE May 21, 1975

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 William L. Reed and Barbara J. Reed

ADDRESS Handy Rd. R. F. D. 3 Mt. Airy Md PHONE _____

PROPERTY LOCATION:

SUBDIVISION no Poplar Heights LOT NO. 35 + 36

ROAD AND DESCRIPTION 144 left on ^{Paint} ~~State~~ Michaels right on Hwy Rd
third house on right.

SIZE OF LOT _____ TYPE BLDG. 4 bedroom house
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 William L. Reed

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