

8/31/84 please
a.m.
4/30/84
ditch map.

APPROVED
8/31/84
P. 33051
A. 19818 RH

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
992-2330

INDEX

ELLCOTT CITY
DISTRICT 5th.

DATE 8/17/83

Oskar Schulz, Inc. IS PERMITTED TO INSTALL ALTER

ADDRESS 6610 Blackwatch Lane, Highland, Maryland 20777 PHONE 531-2000

SUBDIVISION Highland Lakes ROAD 6608 Isle of Skye Drive LOT 80, Sec. 3, Area 2

PROPERTY OWNER Oskar Schulz, Inc. Michael & Linda Redford Remad

ADDRESS _____

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES _____ NO ✓

SEPTIC TANK CAPACITY 1250 ~~2500~~ GALLONS NUMBER OF BEDROOMS 4 632

Trenches - 150 sq. ft. per bedroom. Trench to be 2 ft. wide, 18 in. 3 feet below original grade. Bottom maximum depth 9 feet below original grade. Effective area begins at 3 feet below original grade, with 6 feet of stone below distribution pipe. LOCATION: Start the trench 175 feet from the front lot line and 100 feet from the right sideline as seen when facing the lot from Isle of Skye Drive. Continue to dig the trench on level ground running towards the lot line that is 469.06 ft. long. NOTE: (1) No trench to exceed 100 feet in length. (2) If more than one trench used, a distribution box is required. (3) Trenches to be installed on level ground. (4) Call for inspection of trench before gravel is installed. (5) Provide 6"-8" diameter cleanout and cap to grade or above on septic tank and drywall.

8/20/84 OK TO HAVE COMBINATION
DRY WELL + TRENCH SYSTEM ON THIS
PROPERTY IF DESIRED RH

PLANS APPROVED BY Frank Skinner DATE 6/02/83

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.

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 40 PVC OR ABS.

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

BLDG. PERMIT SIGNED
AND RETURNED 8/13/84
SPECIAL AGENT SFD

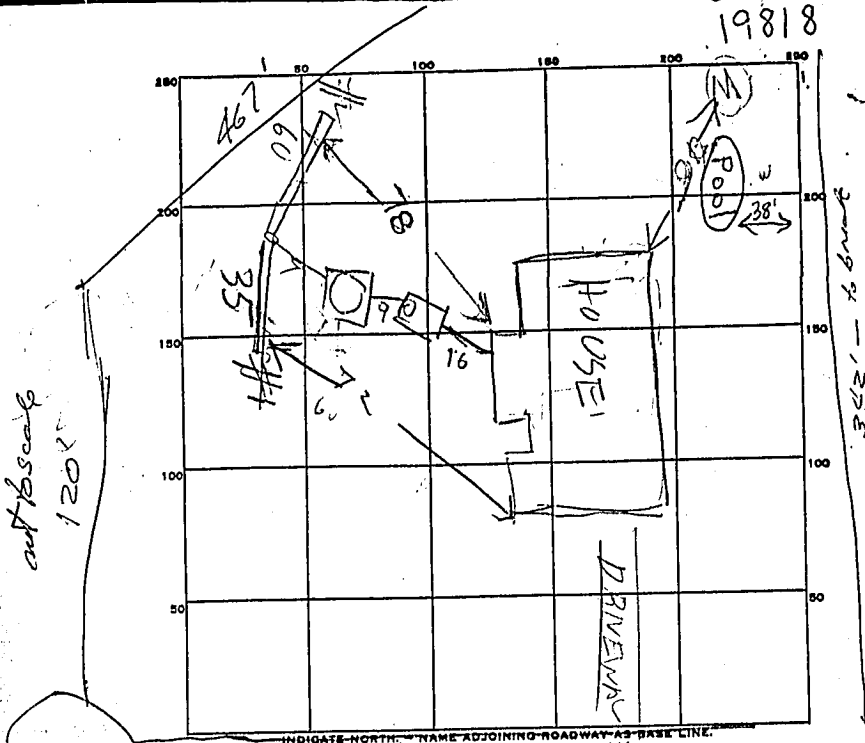
A 19818

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

19818



PERMIT CARD _____

SEPTIC TANK, LEVEL OK 1500

CLEANOUTS OK

ST	DW
OK	OK

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH 10 FT.

TRENCH WIDTH 11 FT.

GRAVEL DEPTH 7 IN.

TOTAL LENGTH 20 FT.

NUMBER OF TRENCHES 2

TOTAL BOTTOM AREA 660

about 95 20 ft of trench don't count

SEEPAGE PITS, INSIDE DIAMETER 62 FT.

DEPTH BELOW INLET 6 1/2 FT.

ABSORBENT AREA 360 SQ. FT.

REMARKS

8/30/84 OK TO COVER TANK & DRY WELL
MIDDLE OF TRENCH NEAR DRY WELL CAVED IN BUT
TRENCH EXTRA BIG. OK TO FILL TRENCH WITH STONE
AS IS R.H. 8

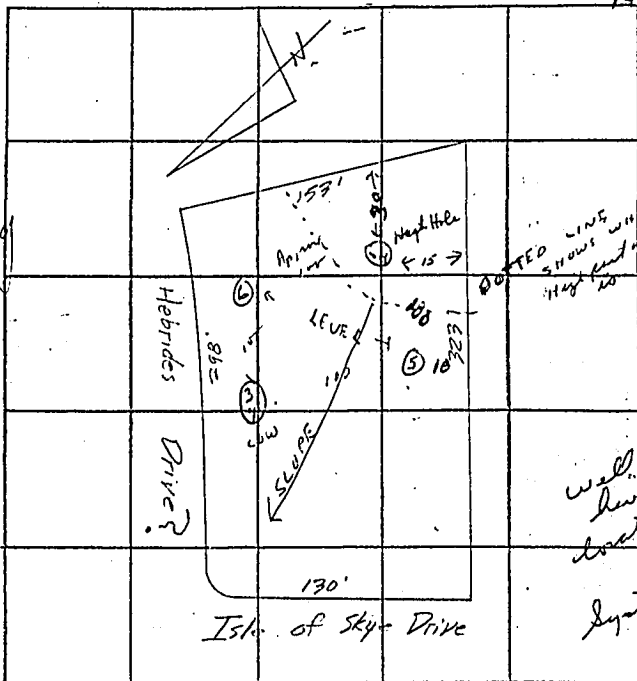
8/31/84 - STONE ADDED - 632 SQ FT
REQUIRED TOTAL. EXTRAMOUNT INSTALLED

DATE SYSTEM APPROVED 8/31/84

INSPECTOR Raymond Hodges

A 19818

lot ~~74~~
~~84~~
 80
 Surveyor's drawing
 of corner lot at end
 of Sky Dr.



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

Well will
 have to be
 located on low
 side of lot.
 System will have
 to be installed
 first in hole no. 5
 inlet at 3 ft.
 (Hold for approval)
 R. T.

B.P.
 # 54786

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
5/1/74	1	4 ft.	12 ⁰⁶	12 ²²	12 ²²	12 ⁵⁰	28 min
	2	12 ft.	12 ⁰⁸	12 ¹⁰	12 ¹⁰	12 ¹²	2 min
	3	12 ft.	12 ³⁸	12 ⁴⁰	12 ⁴⁰	12 ⁴³	3 min
	4	4 1/2 ft.	12 ⁴⁰	12 ⁴²	12 ⁴²	12 ⁴⁸	6 min
	5	10 1/2 ft.	hardy	soil	- Use this hole if approved		

REMARKS

Best and starts at 5 ft in hole no. 1

TYPE OF SOIL

TESTED BY

R. T. B. Zapp

ALSO PRESENT:

*Preliminary
4-12-78
4-10, 000 ft.*

APPLICATION

A 1988

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: 463-3000, EXT. 398

DISTRICT 5th

DATE 4-5-74

Hold

84

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 Oskar Schute, Inc
Anno Development Company, Inc.
6610 Blackwatch Lane
ADDRESS Box 145-A-RFD #1, Flemsville, Maryland PHONE (301) 874-2035
Highland, Md 20777

PROPERTY LOCATION: III (84) 80
Sec 3 area 2

SUBDIVISION Henry K. Owings Property LOT NO. Lot 74-Phase 2

ROAD AND DESCRIPTION 6608
Copper Isle of Pkys Drive & Hebrides Drive

SIZE OF LOT 40000 sq ft TYPE BLDG. 3-4 B.R.

IF NOT SINGLE RESIDENCE DESCRIBE N/A NUMBER OF BEDROOMS _____

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT Paul Robert H. Zuehl

APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING F78-145

BLDG. PERMIT SIGNED
AND RETURNED 4/10/74
Serial # 59786 SF 20

THIS IS NOT A PERMIT

C1 0727
 SEQUENCE NO. (OEP USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
 WELL COMPLETION REPORT
 FILL IN THIS FORM COMPLETELY
 PLEASE PRINT OR TYPE

THIS REPORT MUST BE SUBMITTED WITHIN
 45 DAYS AFTER WELL IS COMPLETED.
 COUNTY NUMBER A-19818
 PERMIT NO. FROM "PERMIT TO DRILL WELL" H-2-87-0736

DATE RECEIVED
 DATE WELL COMPLETED
 07 27 1987

OWNER Oskar Schulz Inc.
 STREET OR RFD Isle of Skye Drive
 SUBDIVISION Highland Lake SECTION 3 TOWN Highland LOT 80

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	
rolling ground gravel	0	31'	
brown schist	31'	65'	
gray schist	65'	123'	
water			
gray schist	123'	300'	

4 1/2" casing
 15' above
 32' above
 13' improvement
 6-28-83 C.W.
 2 1/4" RH/3 reading
 1 gpm / str. pump
 Nitrate 1.5

GROUTING RECORD
 WELL HAS BEEN GROUTED (Circle Appropriate Box)
 TYPE OF GROUTING MATERIAL
 CEMENT (CM) BENTONITE CLAY (BC)
 NO. OF BAGS 13 NO. OF POUNDS 248
 GALLONS OF WATER 91
 DEPTH OF GROUT SEAL (to nearest foot)
 from 0 ft. to 39 ft.
 (enter 0 if from surface)

CASING RECORD
 casing types insert appropriate code below
 (ST) CO STEEL CONCRETE
 (PL) OT PLASTIC OTHER
 MAIN CASING TYPE (S7)
 Nominal diameter top (main) casing (nearest inch) 4
 Total depth of main casing (nearest foot) 47

OTHER CASING (if used)
 diameter inch depth (feet) from to

SCREEN RECORD
 screen type or open hole insert appropriate code below
 (ST) BR HO STEEL BRASS OPEN HOLE
 (PL) OT PLASTIC OTHER

DEPTH (nearest ft.)
 40 47 390

CIRCLE APPROPRIATE LETTER
 A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED
 E ELECTRIC LOG OBTAINED
 P TEST WELL CONVERTED TO PRODUCTION WELL

SLOT SIZE 2 3
 DIAMETER OF SCREEN (NEAREST INCH)
 from to

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 10.17.13 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

GRAVEL PACK
 IF WELL DRILLED WAS FLOWING WELL INSERT IN BOX 68

DRILLERS IDENT. NO. 064
 DRILLERS SIGNATURE
 (MUST MATCH SIGNATURE ON APPLICATION)
 SITE SUPERVISOR (Sign of driller or journeyman responsible for sitework if different from permittee)

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)
 T (E.R.O.S.)
 TELESCOPE CASING LOG INDICATOR
 OTHER DATA

PUMPING TEST
 HOURS PUMPED (nearest hour) 7 1/2
 PUMPING RATE (gal. per min. to nearest gal.)
 METHOD USED TO MEASURE PUMPING RATE watch bucket
 WATER LEVEL (distance from land surface) BEFORE PUMPING 25
 WHEN PUMPING 270
 TYPE OF PUMP USED (for test)
 (A) air (P) piston (T) turbine
 (C) centrifugal (R) rotary (O) other (describe below)
 (J) jet (S) submersible

PUMP INSTALLED
 DRILLER WILL INSTALL PUMP YES (NO)
 (CIRCLE) (YES or NO)
 IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE
 TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX-SEE ABOVE:
 CAPACITY: GALLONS PER MINUTE (to nearest gallon)
 PUMP HORSE POWER
 PUMP COLUMN LENGTH (nearest ft.)
 CASING HEIGHT (circle appropriate box and enter casing height)
 (+) above LAND SURFACE (nearest foot)
 (-) below

LOCATION OF WELL ON LOT-
 SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)
 (Measurements to well)
 Isle of Skye