

3/3/67
[Signature]

off 3-17-67
[Signature]

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLCOTT CITY

DISTRICT 5

DATE 6/9/66

P 11888

A 11703

INDEXED

Howard D. Edwards IS PERMITTED TO INSTALL ALTER

ADDRESS 14204 Old Columbia Pike, Burtonsville, Md. PHONE 384-6341

A SEWAGE DISPOSAL SYSTEM LOCATED AT _____

SUBDIVISION Haviland Hills ROAD Wayside Dr. LOT 16, Plat one

PROPERTY OWNER same as above

ADDRESS _____

SPECIFICATIONS - 3 bedrooms

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

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

SEPTIC TANK CAPACITY 750 GALLONS

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

OTHER Dry well - 324 sq. ft. absorbent sidewall area below the inlet pipe
located 252 ft. from front lot line and 61 ft. from left side line as seen
when facing lot from Wayside Drive.

PLANS APPROVED BY J. H. Kilmore DATE 4/15/66

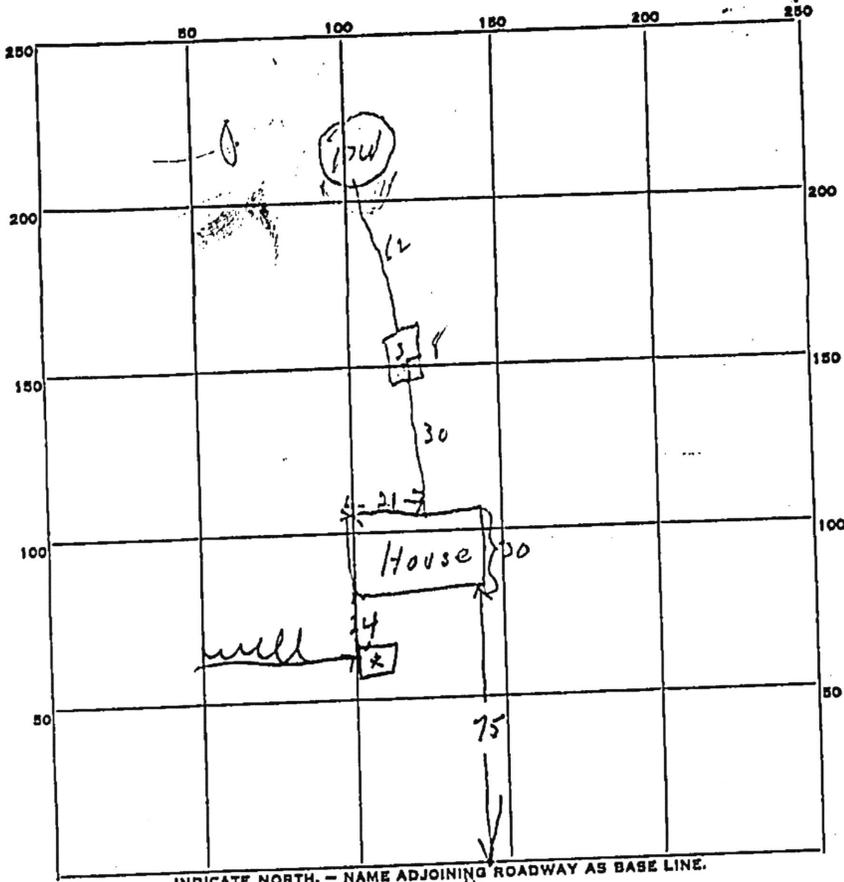
FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

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

A 11703

$$\begin{array}{r} 3.14 \\ \times 57.6 \\ \hline 181 \\ 3008 \end{array}$$

$$\begin{array}{r} 4 \\ 25 \\ 30 \\ 30 \\ \hline 62 \\ 205 \end{array}$$



PERMIT CARD 016
 SEPTIC TANK, LEVEL OK CLEANOUTS marked
 DISTRIBUTION BOX, LEVEL _____
 TILE FIELD, DEPTH _____ FT. TRENCH WIDTH _____ FT.
 GRAVEL DEPTH _____ IN. TOTAL LENGTH _____ FT.
 NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA _____
 SEEPAGE PITS, INSIDE DIAMETER 12 FT. DEPTH BELOW INLET 9 FT.
 ABSORBENT AREA 3384 SQ. FT.

REMARKS 3/13/67 - not enough gravel - must be gravel up to inlet pipe depth all around dry well - there is no gravel at least 5ft below inlet pipe unless it enters dry well. no gravel at 9 ft below dry well top at right rear of Dry Well - evidence much dirt has fallen from dry well construction that gravel has not been scattered around the top of dry well
Location of ~~dry well~~ questionable

DATE SYSTEM APPROVED 3/17/67 INSPECTOR DW M. Sprackman

APPLICATION

A 11703

P _____

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

Septic Tank - 750 gallons

DISTRICT 5

*Dry well - 324 sq. ft. absorbent sidewall area
below the inlet pipe located 252 from front
lot line and 61 ft from left side lot line as
seen when facing lot from Wayside Dr.*

DATE 4/12/66

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TESTS IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Howard D. & Shirley J. Edwards

ADDRESS 14204 Old Columbia Pike, Burtonsville, Md. PHONE 384-6347

PROPERTY LOCATION:

SUBDIVISION Haviland Hills LOT NO. 16, Plat one

ROAD AND DESCRIPTION Wayside Drive

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 77,917 sq. ft. TYPE BLDG. 3
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

SIGNATURE OF APPLICANT Shirley J. Edwards

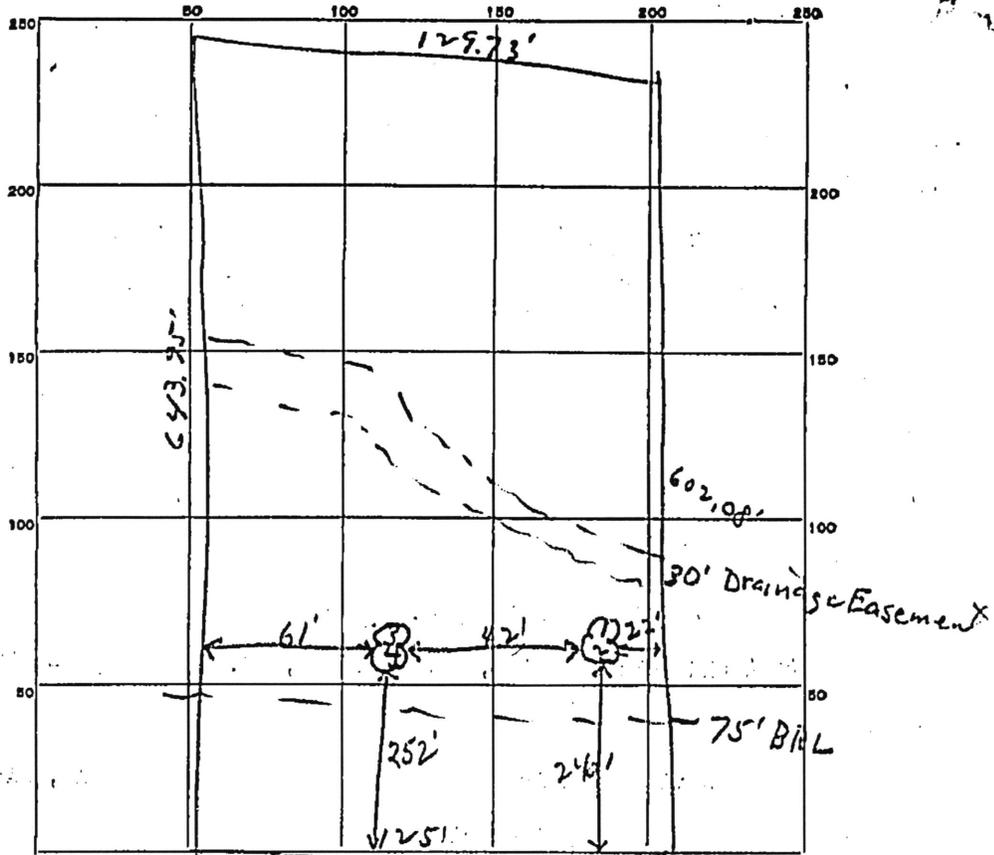
✓ APPROVED BY J.H. K... .. FOR Dry well DATE 4/15/66
(KIND OF SYSTEM)

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

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH - NAME ADJOINING ROADWAY AS 'BASE LINE.

Wayside Dr.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/15/66	1	9'	1:32	1:33	1:33	1:35	2 min
	2	5'	1:32	Overtime			
	3	9'	1:35	1:36	1:36	1:37	1 min
	4	5'	1:35	1:36	1:36	1:38	2 min 9 min

RECEIVED
 HOWARD COUNTY
 HEALTH DEPT.
 DIVISION OF
 ENVIRONMENTAL
 HEALTH
 MAR 10 2 00 PM '87

SOIL AUGER FINDING _____

TESTED BY JHC

REMARKS [Signature]

WR-W-4*
2-65

State Office Building
ANNAPOLIS, MARYLAND 21401

STATE OF MARYLAND
DEPARTMENT OF
WATER RESOURCES

THIS REPORT
MUST BE SUBMITTED
WITHIN 30 DAYS
AFTER COMPLETION
OF THE WELL

WELL COMPLETION REPORT

WELL DESCRIPTION

WELL LOG
State the kind of formations penetrated, their color, their depth, their thickness, and if water-bearing

CASING AND SCREEN RECORD
State the kind and size and position of casing, liner, shoe, screen, and other accessories (if no casing used, give diameter of well).

	F E E T from ___ to ___
Top Soil	0-3
Shaley	3-25
Sand Rock	25-60
Water	60-420
Water	40

	D I A M. (Inches)	F E E T from ___ to ___
Steel	6 1/4	0-30

Permit Number Ho 67-14-105
Own Frederic Edwards
Address Reston, Va 20190
Subdivision Map 20 60 41 27 02
Section _____ Lot 16

PUMPING TEST
Hours Pumped 1 1/2
Type of Pump Used air
Pumping Rate _____
Gallons per Minute 2

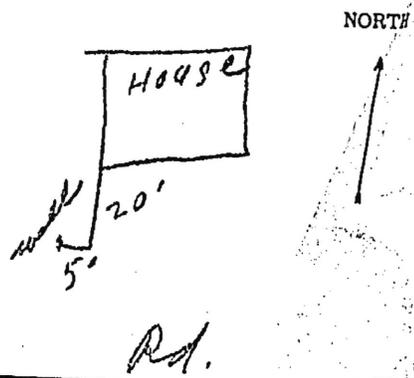
WATER LEVEL
Distance from land surface to water: _____
Before Pumping 40 Ft.
When Pumping 420 Ft.

APPEARANCE OF WATER
Clear _____ Cloudy _____
Taste _____
Odor _____

Height of Casing Above Land Surface 1 Ft.

PUMP INSTALLED
Type _____
Capacity _____
Gallons per Minute _____
Gallons per Hour _____
Pump Column Length _____ Ft.

LOCATION OF WELL ON LOT
Show permanent structures such as building(s), septic tank, and/or other landmarks and indicate not less than 2 distances (measurements) to well.



Date Well Was Completed Oct 8-66

Well Driller [Signature]
Signature [Signature]

TRIPPLICATE