

04-347684

Filed

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

INDEXED

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH
461-9933

P 44598

A 38739

DISTRICT 4th

DATE 6/27/89

DATE SYSTEM APPROVED 7/14/89

INSPECTOR C.B.S.

Paul Schissler/South Carroll Backhoe, Inc.

IS PERMITTED TO INSTALL ☒ ALTER

ADDRESS 4410 Salem Bottom Road, Westminster, Maryland PHONE 875-4197

SUBDIVISION Morgan Station ROAD 870 The Old Station Ct LOT 30

PROPERTY OWNER John Valmus
870 The Old Station Court

ADDRESS

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

GARBAGE GRINDER? YES NO ☒

SEPTIC TANK CAPACITY 1500 GALLONS NUMBER OF BEDROOMS 5

TRENCHES - 210 sq. ft. per bedroom. Trench to be 3 feet wide. Inlet 4 1/2 feet below original grade. Bottom maximum depth 6 1/2 feet below original grade. Effective area begins at 4 1/2 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - SHALLOW SYSTEM ONLY. Beginning from the right front lot corner, place the distribution box 130 feet down the right (470') lot line and 105 feet off the right line as seen when facing property from The Old Station Court. Run trenches towards the right and left lot lines.
MAINTAIN MINIMUM 100 FEET FROM WELL TO SEPTIC. TRENCHES NOT TO EXCEED 75 FEET IN LENGTH.

NOTE - Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK/CW

PLANS APPROVED BY Bert Nixon DATE 5/09/88

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

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 TRENCHES ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCHES

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 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 PVC 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

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

APPLICATION

PERCOLATION TESTING

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH

P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

DISTRICT

DATE

P

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

ADDRESS

PROSPECTIVE BUYER

ADDRESS

PROPERTY LOCATION:

SUBDIVISION

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

REJECTED BY

FOR

DATE

HOLD PENDING FURTHER TESTS

DATE

REASONS FOR REJECTION OR HOLDING

BLDG. PERMIT SIGNED
AND RETURNED

BP 20234 Sclbl

THIS IS NOT A PERMIT

Lot 37

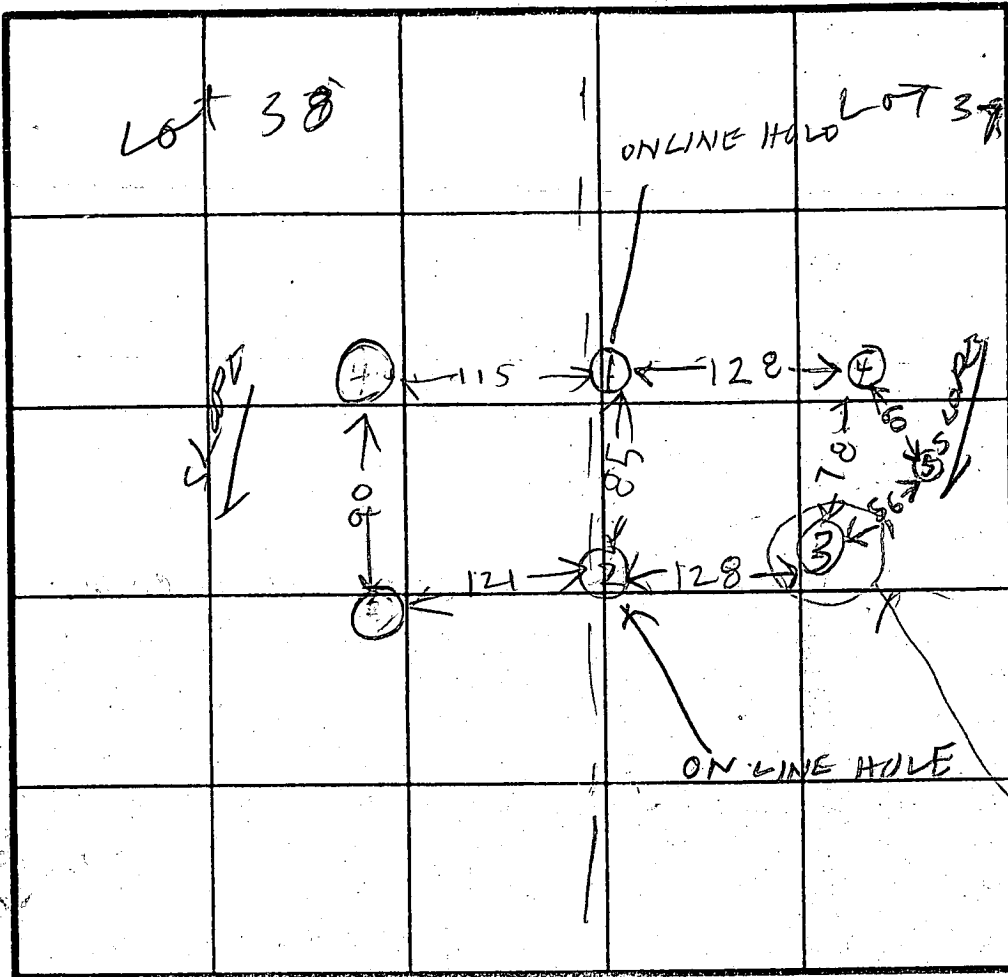
Lot 38

ONLINE HOLE LOT 38

SOIL PROFILE

BROWN CLAY

BROWN SAND SILT LOAM



HOLE ELEVATIONS

①④ = HIGH

②③ = LOW

⑤ MEDIUM

Barber

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

CLAY

BROWN SAND LOAM 10% SAPROLITE

②

BROWN SAND LOAM 15% SAPROLITE

⑤

BROWN SAND LOAM 15% SAPROLITE

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/30/87	3S	6.5	1112	1136	little per SLOW		
	3V	12.5	1043	1047	LOW		
	4V	11	OK				
	1S	4	1043	1042	1047	1058	11
	1D	8	1043	1045	1045	1049	
	1V	11	OK				
	2S	5	1050	1105	1105	1127	22
	2V	11	OK				
	X3ES	6.5	1234	1524	little per SLOW		
	5S	4	402	406	406	415	8
	5V	10	OK		BOTTOM	ROCK	

XPERC

15 min

210 #/BR

Inlet 4"

Bottom 6"

LOTTING CHANGED FROM ORIGINAL TEST PLAT

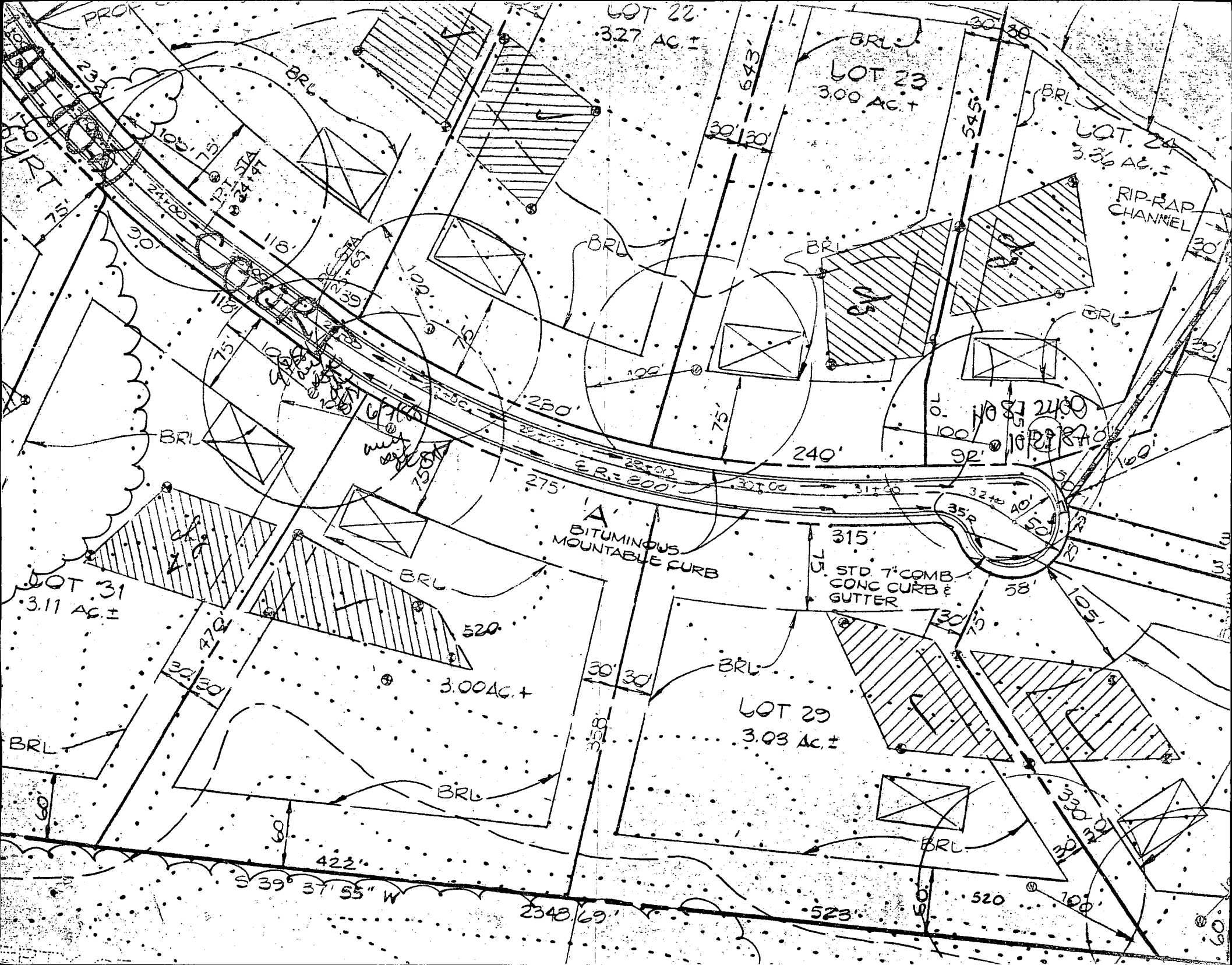
REMARKS HOLES DUG DIFFERENTLY FROM SURVEYOR PLAT

TYPE OF SOIL

TESTED BY

R. HODGES

ALSO PRESENT DAVE M. MILLER



U
COPY

PERCOLATION TEST DATA

LOT NO.	PREVIOUS LOT NO.	AVERAGE PERC. TIME IN MINUTES PER SECOND INCH.	MAX. DEPTH PERMITTED FOR EFFLUENT PIPE TO ENTER SEWAGE DISPOSAL AREA AT ITS HIGHEST ELEV. WITH REFERENCE TO EXISTING GRADE AT TIME OF PERCOLATION TEST.	
			INLET	BOTTOM
14	19	10	3.0	5.0
15	20	12	3.0	5.0
16	21	5	3.0	5.0
17	21A	5	3.0	5.0
20	26	12	3.5	5.5
21	28	6	3.0	5.0
22	29	5	3.0	5.0
23	30	5	3.0	5.0
24	31	5	3.0	5.0
25	32	7	3.0	5.0
26	33	8	3.0	5.0
27	34	8	3.0	5.0
28	35	12	3.0	5.0
29	36	11	3.0	5.0
30	38	15	4.0	6.0
31	37	11	4.0	6.0
32	38	9	3.0	5.0
33	40	10	3.0	5.0
34	41	8	3.0	5.0
35	43	13	4.0	6.0
36	44	12	3.0	5.0
37	45			

APPROVED FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS, HOWARD COUNTY HEALTH DEPT.

COUNTY HEALTH OFFICER

DATE

Signatures

12-8-87

485

490

495

500

505

500

495

490

485

N 553 500

70.0

0.000

BLDG. PERMIT SIGNED
AND RETURNED 9-29-88

BP 20324 JAW

SEPTIC SYSTEM INFORMATION

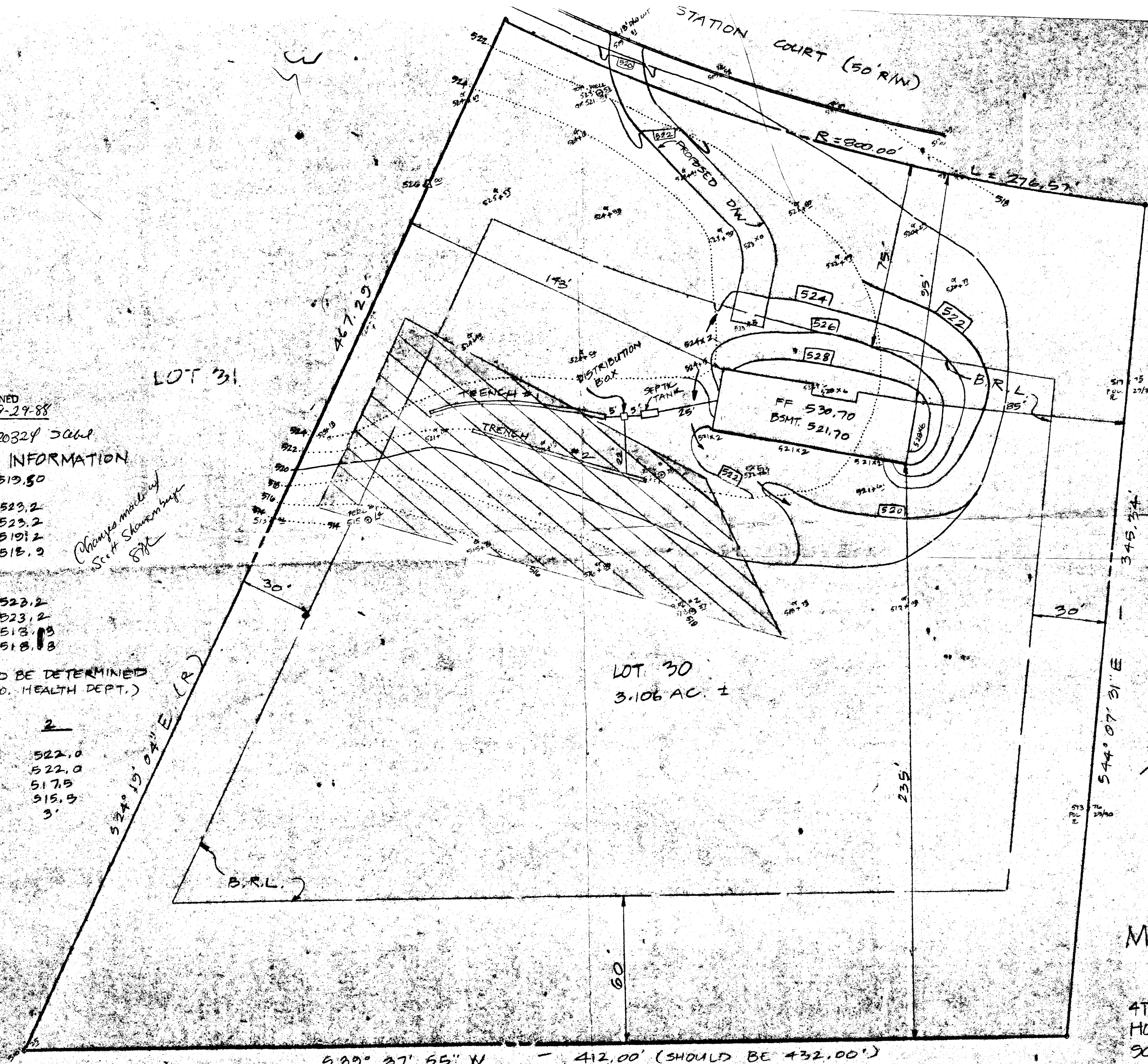
INVERT AT HOUSE 519.80
SEPTIC TANK
EX. GRADE 523.2
FIN. GRADE 523.2
INV. IN 519.2
INV. OUT 518.9

DISTRIBUTION BOX
EX. GRADE 523.2
FIN. GRADE 523.2
INV. IN 518.13
INV. OUT 518.13

TRENCHES (NO. & LENGTH TO BE DETERMINED
BY HOWARD CO. HEALTH DEPT.)

	1	2
EX. GRADE	523.2	522.0
FIN. GRADE	523.2	522.0
INV. IN	518.7	517.5
BOTTOM	516.7	515.5
WIDTH	3'	3'

*Changes made by
Scott Shaver*



SITE PLAN
MORGAN STATION
LOT 30
PLAT #7826
4TH ELECTION DISTRICT
HOWARD COUNTY MD.
SCALE 1"=30' 9/26/88

SHANABERGER & LANE
8726 TOWN & COUNTRY BLVD. SUITE 107
ELLCOTT CITY, MD. 21043
301-461-9563

B 1 <div style="border: 1px solid black; padding: 2px; display: inline-block;">7096</div>	SEQUENCE NO. (DP USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;">HQ-81-2687</div>
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)			
Date Received (APA) <div style="border: 1px solid black; padding: 2px; display: inline-block;">041288</div>		B 3 LOCATION OF WELL	
OWNER INFORMATION <div style="border: 1px solid black; padding: 2px; display: inline-block;">CAMPAS ARTHUR</div>		<div style="border: 1px solid black; padding: 2px; display: inline-block;">HOWARD</div>	
15 Last Name Owner First Name 34		8 COUNTY 21	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">1427 HALLWOOD RD</div>		<div style="border: 1px solid black; padding: 2px; display: inline-block;">MORSAW STATION</div>	
36 Street or RFD 55		23 SUBDIVISION 42	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">BALTIMORE MD 21228</div>		SECTION <div style="border: 1px solid black; padding: 2px; display: inline-block;">4</div> LOT <div style="border: 1px solid black; padding: 2px; display: inline-block;">30</div>	
57 Town 70 State 76 Zip 76		44 46 48 50	
DRILLER INFORMATION Driller's Name <u>Ralph Mayne</u> License No. <u>223</u>		52 NEAREST TOWN <u>WOODSIDE</u>	
77 License No. 80		71	
Firm Name <u>Ralph Mayne Well Drilling</u>		MILES FROM TOWN (enter 0 if in town) <u>2</u> MI	
Address <u>9120 Knowlton Church Rd Mt Airy</u>		THE OLD STATION COURT <u>MORSAW STATION RD.</u>	
Signature <u>Ralph Mayne</u> Date <u>3/22/88</u>		11 NEAR WHAT ROAD 30	
31 Date		32	
B 2 WELL INFORMATION		B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)	
APPROX. PUMPING RATE (GAL. PER MIN.) <u>5</u>			
8 12		ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)	
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <u>500</u>			
14 20		34 DISTANCE FROM ROAD 37	
		ENTER FT or MI <u>FT</u>	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="radio"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="radio"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="radio"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="radio"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input type="radio"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL <u>HOWARD</u> COUNTY NAME <u>A38739</u> COUNTY NO. STATE SIGNATURE _____ INSERT S _____ DATE ISSUED <u>04/12/88</u> BY <u>R. Nylor</u> 10/12/88 NORTH GRID <u>552000</u> EAST GRID <u>0789000</u> 50 55 57 63	
APPROXIMATE DEPTH OF WELL <u>150</u> FEET		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X	
APPROXIMATE DIAMETER OF WELL <u>6"</u> NEAREST INCH		SOURCES OF DRILLING WATER 1. <u>well</u> 2. _____ 3. _____	
METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jetted & DRIVEN <input checked="" type="radio"/> AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary) <input type="radio"/> CABLE REVERSE-ROTARY Drive-POINT other _____		WRITE THE BOX NUMBER FROM THE MAP HERE <div style="border: 1px solid black; padding: 2px; display: inline-block;"> E > 80 9 N 550 2 </div>	
REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="radio"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <input type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY <input type="radio"/> THIS WELL WILL DEEPEIN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) _____		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
Not to be filled in by driller (OEP USE ONLY) APPROP. PERMIT NUMBER _____		FORCE <u>100</u> INITIALS <u>IN BOX</u> PERMIT NO. <u>HQ-81-2687</u>	
54 63		67-68	
SPECIAL CONDITIONS <u>A.P. CIRCUIT</u> <u>IT HAS 992-0922</u>			

C17795SEQUENCE NO. (OEP USE ONLY)

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
NUMBERA 38 739

DATE Received
DATE WELL COMPLETED06/19/18

Depth of Well
(TO NEAREST FOOT)185

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
HC-81-2687

OWNERlast namefirst nameCAMPBELLARTHER

STREET OR RFDT2 OLD STATION COURT

TOWNWOODBINE

SUBDIVISIONMORGAN STATIONSECTIONLOT30

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	
	FROM	TO
Top Soil	0	2
Brown Shale	2	20
Brown Slate	20	25
Blue Slate	25	35
Brown Slate	35	40
Blue Slate	40	85
Brown Slate	85	90
Blue Slate	90	185

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box)

yesnoYNY

TYPE OF GROUTING MATERIAL

CEMENTCMBENTONITE CLAYBC

NO. OF BAGSNO. OF POUNDS

GALLONS OF WATER

DEPTH OF GROUT SEAL (to nearest foot)
fromft. toft.
(enter 0 if from surface)

CASING RECORD

casing types insert appropriate code below

STEELCONCRETE
PLASTICOTHER

MAIN CASING TYPE

Nominal diameter top (main) casing (nearest inch)

Total depth of main casing (nearest foot)

OTHER CASING (if used)
diameter inchdepth (feet) fromto

SCREEN RECORD

screen type or open hole insert appropriate code below

STEELBRASSHOLE
BRONZE
PLASTICOTHER

DEPTH (nearest ft.)

EACH SCREEN

SLOT SIZE 1-2-3

DIAMETER OF SCREEN (NEAREST INCH)

GRAVEL PACK

IF WELL DRILLED WAS FLOWING, WELL INSERTED IN BOX 68

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

T(E.R.O.S.)WQ

TELESCOPE CASINGLOG INDICATOROTHER DATA

C3

PUMPING TEST

HOURS PUMPED (nearest hour)

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

METHOD USED TO MEASURE PUMPING RATE

WATER LEVEL (distance from land surface)
BEFORE PUMPING
WHEN PUMPING

TYPE OF PUMP USED (for test)
AairPpistonTturbine
CcentrifugalRrotaryOother (describe below)
JjetSsubmersible

PUMP INSTALLED

DRILLER WILL INSTALL PUMP YESNO

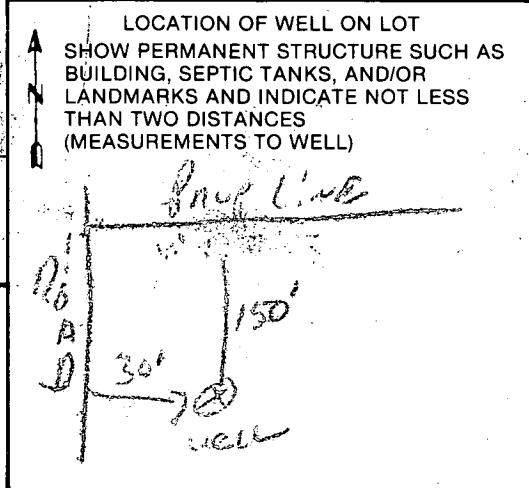
IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE:

CAPACITY: GALLONS PER MINUTE (to nearest gallon)

PUMP HORSE POWER

PUMP COLUMN LENGTH (nearest ft.)

CASING HEIGHT (circle appropriate box and enter casing height)
abovebelow
LAND SURFACE (nearest foot)



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

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.

DRILLERS IDENT. NO. 273

DRILLERS SIGNATURE

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

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-2687
Location of property (road) The Glen Station Road
Subdivision MORGAN STATION Lot 30 Block Plat Sec.
Well Driller RALPH MAYNE Owner CAMPAS, ARTHUR

Depth of well 185'
Distance of measuring point (M.P.) above ground 2'
Static water level (S.W.L.) below M.P. 35'

I. High rate pumping -- reservoir drawdown

Time pump started 9:00 Pumping rate 10 GPM
Total time 15 min to reach pumping water level 38 ft. below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes

[illegible]

7/18/89

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043
461-9933

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation ☒
Replacement ☐

Receipt # 44754
Date 7/17/89

Name of Installer ROBERT F. FEEZER CO., INC.

Telephone 981-4655

License Number 2122

Certified Well Pump Installer ☒ Well Driller ☐ Registered Plumber ☒

Name of Property Owner CAPT CONSTRUCTION

Telephone 335-4200

Subdivision MCCAN STATION Lot # 30

Well Tag # 40-81-2687

Site Address 878 OLD STATION COURT

Pump

- Type
 - Deep well jet ☐
 - Shallow well jet ☐
 - Submersible ☒
- Make JANING (GERMANY)
- Model # 4440
- Capacity 8 GPM
- Pump exceeds well capacity Yes ☐ No ☐
- If Yes, is low pressure cutoff switch installed? Yes ☐ No ☒
- What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors ☐ Cable guards ☒ Other ☐

Motor

- Horsepower 3/4
- RPM 3450
- Voltage ☐
 - 110 ☐
 - 220 ☒

Pitless Adapter

- Make FLAMATIC
- Model # ☐
- Depth 42" ±

Tank CAPTIVE AIR

- Capacity 44-203
- Pressure relief valve? 1/2

Pitless Adapter OK
4' B.G. MR 7/18/89

Piping

- Type POLY.
- Size 1"
- NSF and/or BOCA Code approved YES
- Depth of supply line 42" ±

Well data

- Depth 185 ft.
- Yield ? GPM
- Static water level 27' ft.
- Will water supply be disinfected by installer? YES

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

Signature of Applicant: [Signature] B.F.F. Co., Inc.

Date: 7/18/89

Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.