

232058

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

INDEXED

ELLICOTT CITY

DISTRICT 3

DATE 10/15/64

approved
10/27/64
P 09211
40077B
A 86292

Hudson Construction Co.

IS PERMITTED TO INSTALL ☒ ALTER

ADDRESS 363 Chapel Avenue, Ellicott City, Md.

PHONE HO 5-2205

A SEWAGE DISPOSAL SYSTEM LOCATED AT

SUBDIVISION Evergreen Valley

ROAD 11905 Triadelphia Road

LOT 2, Sec. 2

PROPERTY OWNER same as above

ADDRESS

SPECIFICATIONS 4
3 bedrooms

DRAIN FIELD DEPTH FEET, BOTTOM AREA SQ. FT.

SEEPAGE PITS ABSORBENT SIDE-WALL AREA SQ. FT.

SEPTIC TANK CAPACITY 1000 GALLONS

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

OTHER Leaching bed - 300 sq. ft. of bottom area for 3 bedrooms and 400 sq. ft. for four. Locate bed 30 ft. from rear property line and 30 ft. off left side property line. Depth of shallow side of bed 5 ft.

PLANS APPROVED BY James E. Hennigan

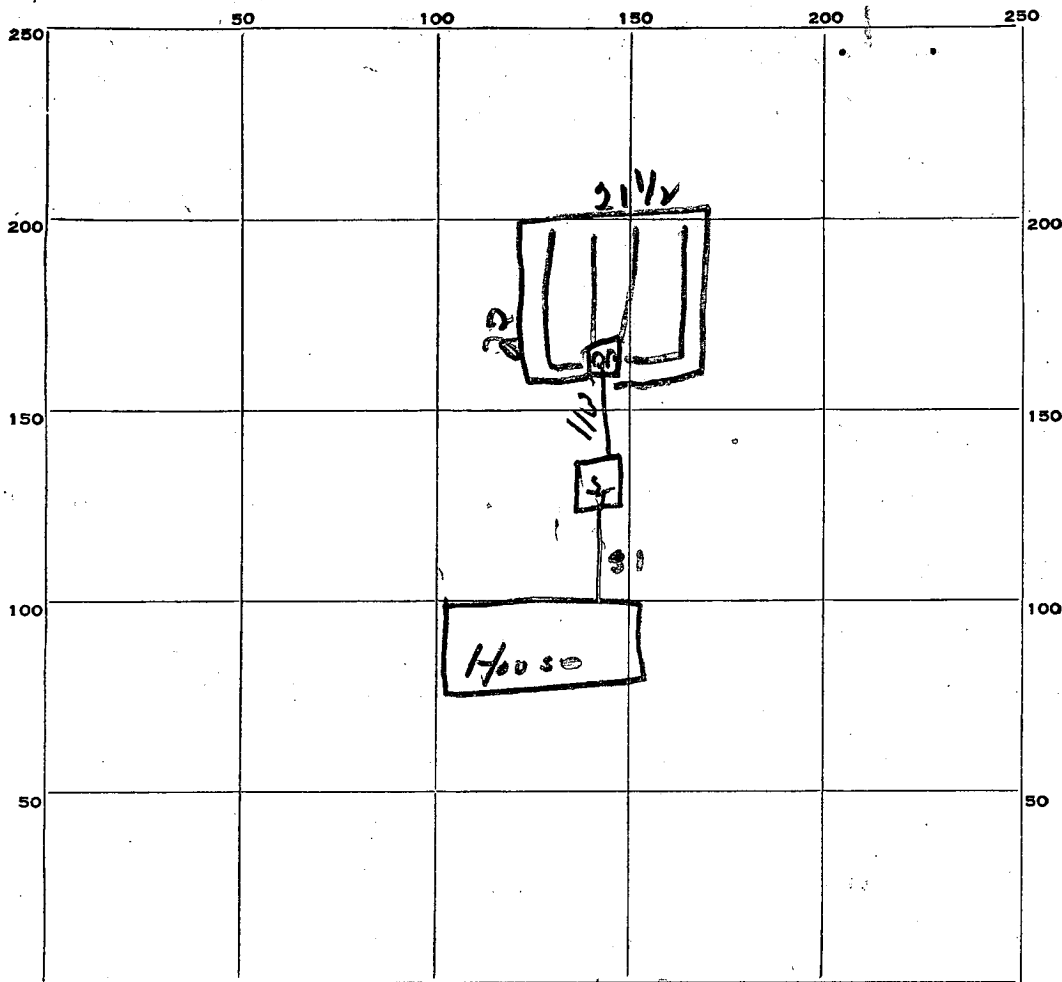
DATE 1/23/63

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 40077B
86292

$$\begin{array}{r}
 22 \\
 21\frac{1}{2} \\
 \hline
 11 \\
 22 \\
 \hline
 44 \\
 473
 \end{array}$$



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD not paid

SEPTIC TANK, LEVEL OK

CLEANOUTS OK

DISTRIBUTION BOX, LEVEL OK

TILE FIELD, DEPTH 4 ft 6 in FT. TRENCH WIDTH 21 1/2 FT.

GRAVEL DEPTH 36 IN. TOTAL LENGTH 22 FT.

NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA 473 sq ft

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

ABSORBENT AREA _____ SQ. FT.

REMARKS _____

DATE SYSTEM APPROVED 10/27/64

INSPECTOR Lee Monaghan

APPLICATION

SEWAGE DISPOSAL TESTING

A 06292

P _____

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 3

DATE 1-21-63

*Leaching bed 300 sq. FT. of bottom area
for 3 bedrooms and 400 sq. FT. for four. Total
bed 30 ft. from rear property line and 30 ft. off left side
property line. Depth of shallow side of bed 3 ft.*

*3 bedrooms - 750 gal. septic tank
4 " - 1000 " " "*

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 Hudson Con. Co.

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Evergreen Valley LOT NO. 2, Sec 2

ROAD AND DESCRIPTION Philadelphia Rd.

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 125' X 340' TYPE BLDG. 3

NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

SIGNATURE OF APPLICANT Italo Leonardi

APPROVED BY James E. Hennigan FOR Leaching Bed DATE 1-23-63

(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

A 6292

HOWARD COUNTY
MARYLAND STATE DEPARTMENT OF HEALTH
8 Church Road
ELLICOTT CITY, MARYLAND

WELL COMPLETION REPORT

This report must be submitted within 10 days after completion of the well

This is to certify that the well which has been completed on the below property has been constructed and disinfected in compliance with the regulations and specifications of the State Board of Health.

The following construction and performance characteristics were noted:

1. Type, diameter and length of casing 6" O.D. Well casing 30 ft.
2. Total depth of well 73
3. Type, diameter and length of strainer None Size of screen openings _____
4. Method of sealing top and bottom of screen _____
5. Method of grouting Cement . Quantity, cement used 188 lbs.
Gals. water 10
6. Standing water level (depth below ground surface when not pumping) 28 ft.
7. Yield of well in gallons per minute 3 ; elevation of water surface when pumped at the designated rate _____.
8. Number of hours pump operated at stipulated rate during pumping test 2
9. Record of any other pumping performance None 26 ft. Sand
10. Log of materials encountered during drilling 4 ft. Clay
+ gravel 43 ft. gray granite Rock
11. Physical appearance of water at end of final pumping test _____
12. Variation in vertical alignment (how much the well casing varies from a truly plumb line) throughout its depth X
13. Disinfected by 1 ounces of Quat % Chlorine (Brand name Clorox)

Property Owner Hudson Construction Co. Address Ellicott City Md.
Location of property R. 99

Health Department Number _____ Dept. of Water Resources Permit No. Ho-65-W-119

Date: 9/18/64, 1964

Edward Brown
Signature of Well Driller

INSTRUCTIONS: This form is to be completed in triplicate and certified by the well driller upon completion of each drilled well. One copy will be forwarded to the Department of Water Resources. One copy will be forwarded to the property owner by the Health Department along with the final approval of the well.

File 8/9/79 app'd C.H.

8/8/79 about
be ready to
1:00 p.m.
8/9/79 - ready now

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

P 30071

A Repair

ELLICOTT CITY

DISTRICT 3rd

DATE 8/7/79

INDEXED

Jack Fyock

IS PERMITTED TO INSTALL ALTER X

ADDRESS 13775 Triadelphia Road, ELICOTT Glenelg, Md.

PHONE 988-9270

SUBDIVISION ROAD 11905 Triadelphia Road LOT

PROPERTY OWNER Mrs. Mejia

ADDRESS 11905 Triadelphia Road, Ellicott City, Md.

Phone: 988-9345

SPECIFICATIONS

SEPTIC TANK CAPACITY GALLONS

DRAIN FIELD DEPTH FEET, BOTTOM AREA SQ. FT.

DEEP TRENCH DEPTH FEET, BOTTOM AREA SQ. FT.

SEEPAGE PITS ABSORBENT SIDE-WALL AREA SQ. FT.

INLET PIPE FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH FT. BELOW ORIGINAL GRADE

EFFECTIVE DEPTH AT FT. BELOW ORIGINAL GRADE.

LOCATE DISPOSAL AREA FT. FROM LOT LINE AND FT. FROM LOT LINE AS SEEN WHEN
FACING LOT FROM

REPAIR - Call for an appointment when ground is opened up and Sanitarian will
recommend the repair system.

PLANS APPROVED BY Palmer F. Wine

DATE 8/7/79

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 PLACING GRAVEL IN TRENCH.

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER.

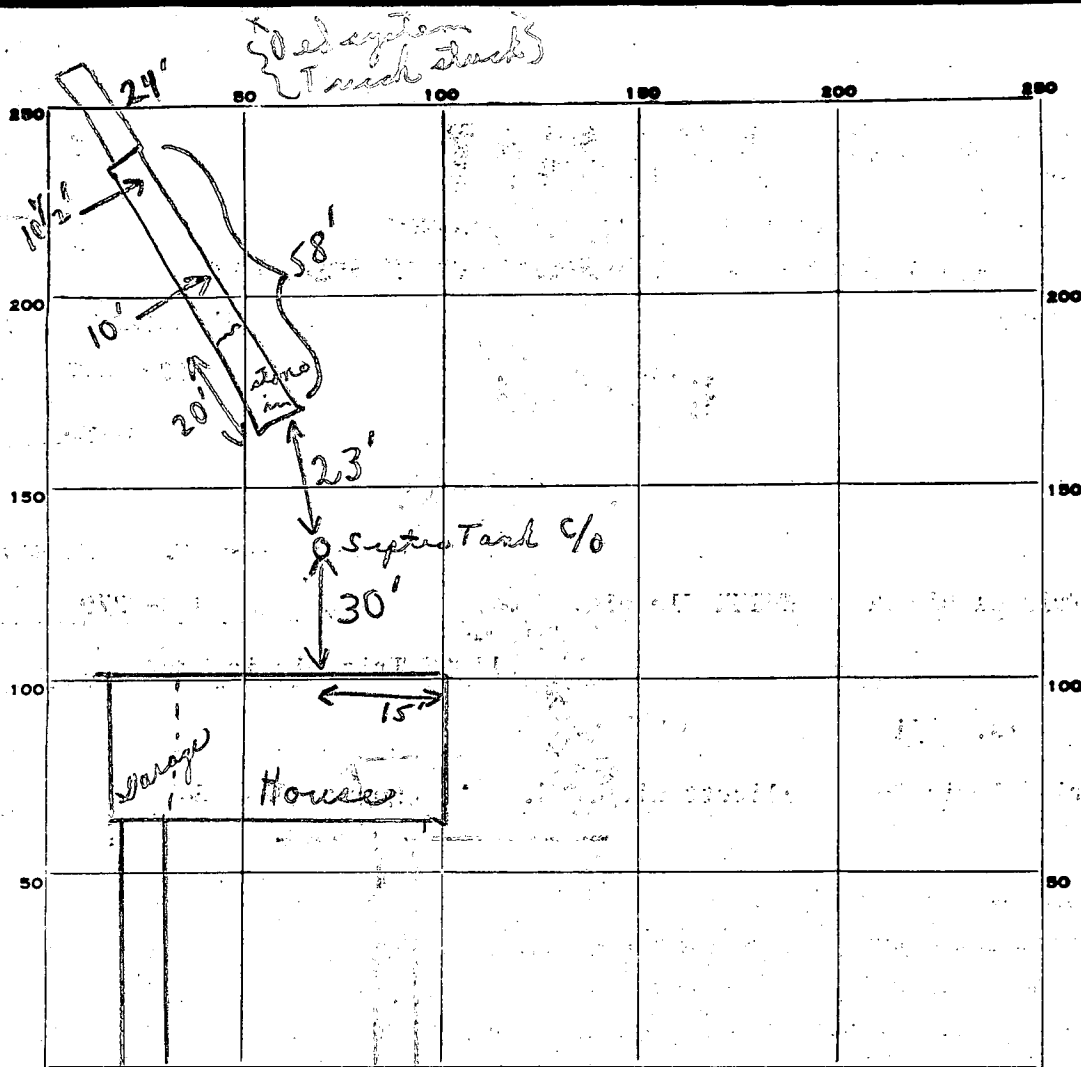
NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

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.

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT.

P 30071



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

EC. ←

Philadelphia Rd → Blending

PERMIT CARD Yes

SEPTIC TANK, LEVEL N/A

CLEANOUTS N/A

DISTRIBUTION BOX, LEVEL N/A {Tied into pipe off septic tank}

TILE FIELD, DEPTH 10'-10 1/2' FT. TRENCH WIDTH 2' + FT.

GRAVEL DEPTH 7' + IN. TOTAL LENGTH 58' + 24' FT.

NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA 82'

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

ABSORBENT AREA 574 + SQ. FT.

REMARKS 8/8/79 stone in 20' of trench to 3' of grade from placed home. Time of stop - Partial to call for finish.
8/17/79 Paper on trench to 2'-3' of surface. trench now 82' long. Saw connection of trench to old system spoke to Mrs. Meigs confirmed depth of trench at home site.

DATE SYSTEM APPROVED

8/9/79 as per above

INSPECTOR

C. B. Streaks