

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~461-9933~~ 313-2640

INDEXED

05-413354

P 50073

A 40781

DISTRICT 3rd

DATE 6/9/94

DATE SYSTEM APPROVED 7/19/94

INSPECTOR M. Rifkin

Will Hopkins

IS PERMITTED TO INSTALL ☒ ALTER

ADDRESS 17540 Old Frederick Road, Mt. Airy, Maryland 21771 PHONE 831-5788

SUBDIVISION The Warfields LOT 17 ROAD 14800 View Way Court

PROPERTY OWNER Jeffrey Neuman

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 280

OK TO DROP TRENCH
INLET/BOTTOM 1/2-1' (EW)

TRENCHES - Trench to be 3 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 5 feet below original grade. Effective area begins at 3 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Place distribution box 100 feet off the right lot line (288.97') and 105 feet off the front lot line (219.23') as seen when facing the lot from View Way Court. Run trenches on contour toward the front lot line (219.23').

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 6/2/94 DKS

PLANS APPROVED BY Mark Rifkin

REVISED _____ DATE 05/04/94

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, 90° ELBOWS NOT ACCEPTABLE.

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 TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH

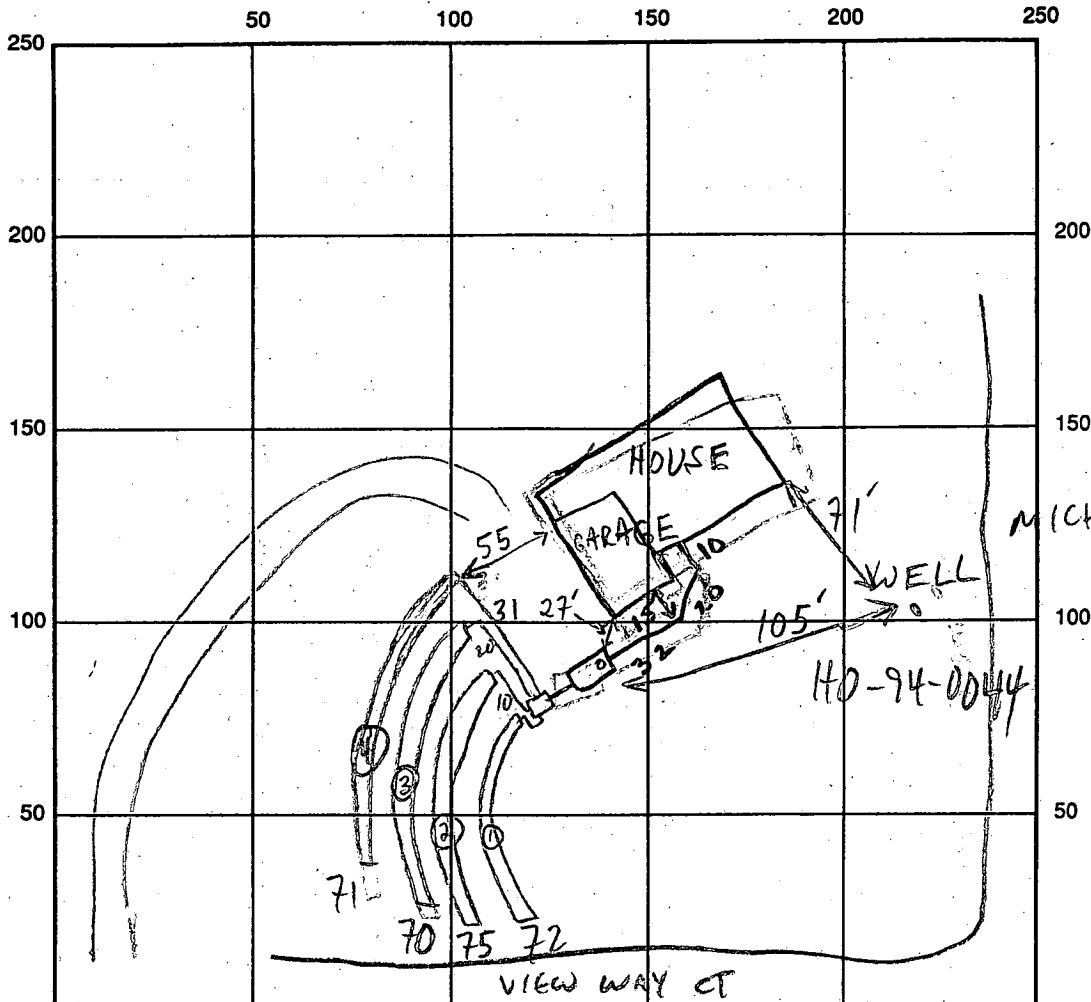
NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

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 PVA 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**



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL ✓ 1250 GAL CLEANOUTS S.T. - OK

DISTRIBUTION BOX LEVEL OK BAFFLE IN

DRAIN FIELD/TITLE DEPTH 5 1/2 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 1/2 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH ① 72 ② 75 ③ 70 ④ 71 FT.

NUMBER OF TRENCHES 4 ONE SIDEWALL/BOTTOM AREA ① 216 ② 225 ③ 210 ④ 213 SQ. FT.

DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA 864 SQ. FT.

REMARKS: 6/8/94 DRIVEWAY APPEARS TO BE OVER SDA - CALL BLDG MR

7/13/94 HOUSE CONNECTIONS TO TANK OK. (w)

7/19/94 OK TO COVER ALL DRIVEWAY IMPACT MINIMAL) MUR

DATE SYSTEM APPROVED

7/19/94

INSPECTOR

M. Ripkin

APPLICATION

PERCOLATION TESTING

A 40781

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

DISTRICT 5th

DATE 12/1/87

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 Kennard Warfield Jr. Jeffrey NEUMAN

ADDRESS 14663 Triadelphia Rd PHONE 410-560-0861
442-2337

PROSPECTIVE BUYER N/A

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION THE WARFIELDS LOT NO. LOT 17 Preliminary
Sapling Range 1/6

ROAD AND DESCRIPTION 14600 Triadelphia Rd just west of Howard Rd
14000 View Way Court

TAX MAP 27 PARCEL # 56

SIZE OF LOT 3 acres TYPE BLDG. SFD
(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.

Myard A. Reil
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 2-3-89 PERC SATISFACTORY - HOLD FOR SUBDIVISION PLAT SMO

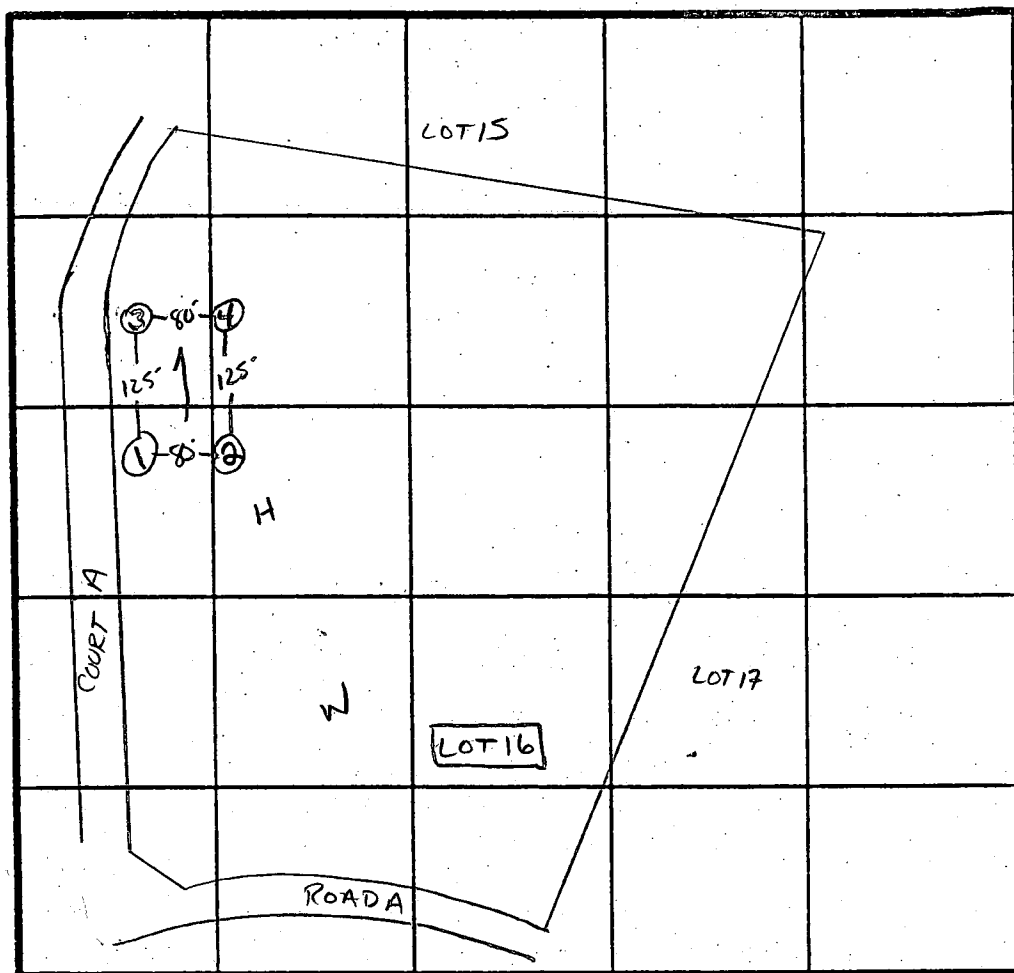
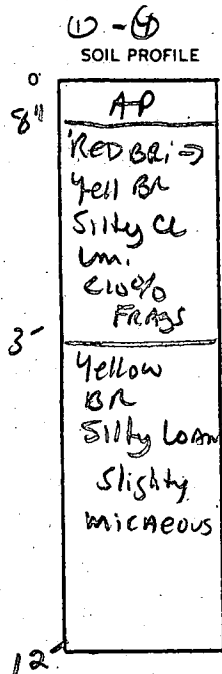
BLDG. PERMIT SIGNED

AND RETURNED 5/9/88

Serial # 53674

SFD - 4 Bms

THIS IS NOT A PERMIT



X Perc 9 min
210 D/B
Inlet 3"
Bottom 45"
50'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

↓ TO TRIADELPHIA Rd.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2/3/88	1V	12.5"	UNIFORM Soil below 3.0"				
	2S	3"	2:26	2:32	2:32	2:38	6 min
	2M	7"	2:26	2:32	2:32	2:38	6 min
	2V	12"	UNIFORM soil below 3.0"				
	3S	3.5"	2:36	2:42	2:42	2:52	10 min
	3V	12"	UNIFORM soil below 3.0"				
	4S	3"	2:38	2:43	2:43	2:56	13 min
	4V	12"	UNIFORM soil below 3.0"				

REMARKS

1 Holes APPROX TO PEAT

TYPE OF SOIL

Glenelg loam

TESTED BY

S. Abel

ALSO PRESENT

D-Kerraman & Co.
MARKER.

COUNTY

6/8/94 3:00pm

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 # 0

Date 5/23/94

Name of Installer K.H. Plumbing

Telephone 410-857-0255

License Number 8300

Certified Well Pump Installer ☐

Well Driller ☐

Registered Plumber ☒

Name of Property Owner Jeffery Neuman

Telephone

Subdivision The Warfields

Lot # 17

Well Tag #

Site Address 14800 View Way Ct.

Pump

1. Type

- a. Deep well jet ☐
b. Shallow well jet ☐
c. Submersible ☒

2. Make

3. Model #

4. Capacity GPM

5. Pump exceeds well capacity Yes ☐ No ☒

6. If Yes, is low pressure cutoff switch installed? Yes ☐ No ☐

7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors ☐ Cable guards ☐ Other ☐

Motor

1. Horsepower

2. RPM

3. Voltage

a. 110

b. 220

Pitless Adapter

1. Make

2. Model #

3. Depth

Tank

1. Capacity

2. Pressure relief valve? ☒

Piping

1. Type 1"

2. Size

3. NSF and/or BOCA Code approved ☐

4. Depth of supply line

Well data

1. Depth ft.

2. Yield GPM

3. Static water level ft.

4. Will water supply be disinfected by installer? ☐

P.A. OK 6/8/94
4' + B.G.

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: K.H. Plumbing

Date: 5-16-94

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

- (A) = PROP. 4 BED. HOUSE
F.F. ELEV. = 516.0
BSMT. ELEV. = 507.5
INV. ELEV. = 514.5
- (B) = PROP. SEPTIC TANK
EX. ELEV. = 515.8
INV. IN = 513.3
INV. OUT = 513.0

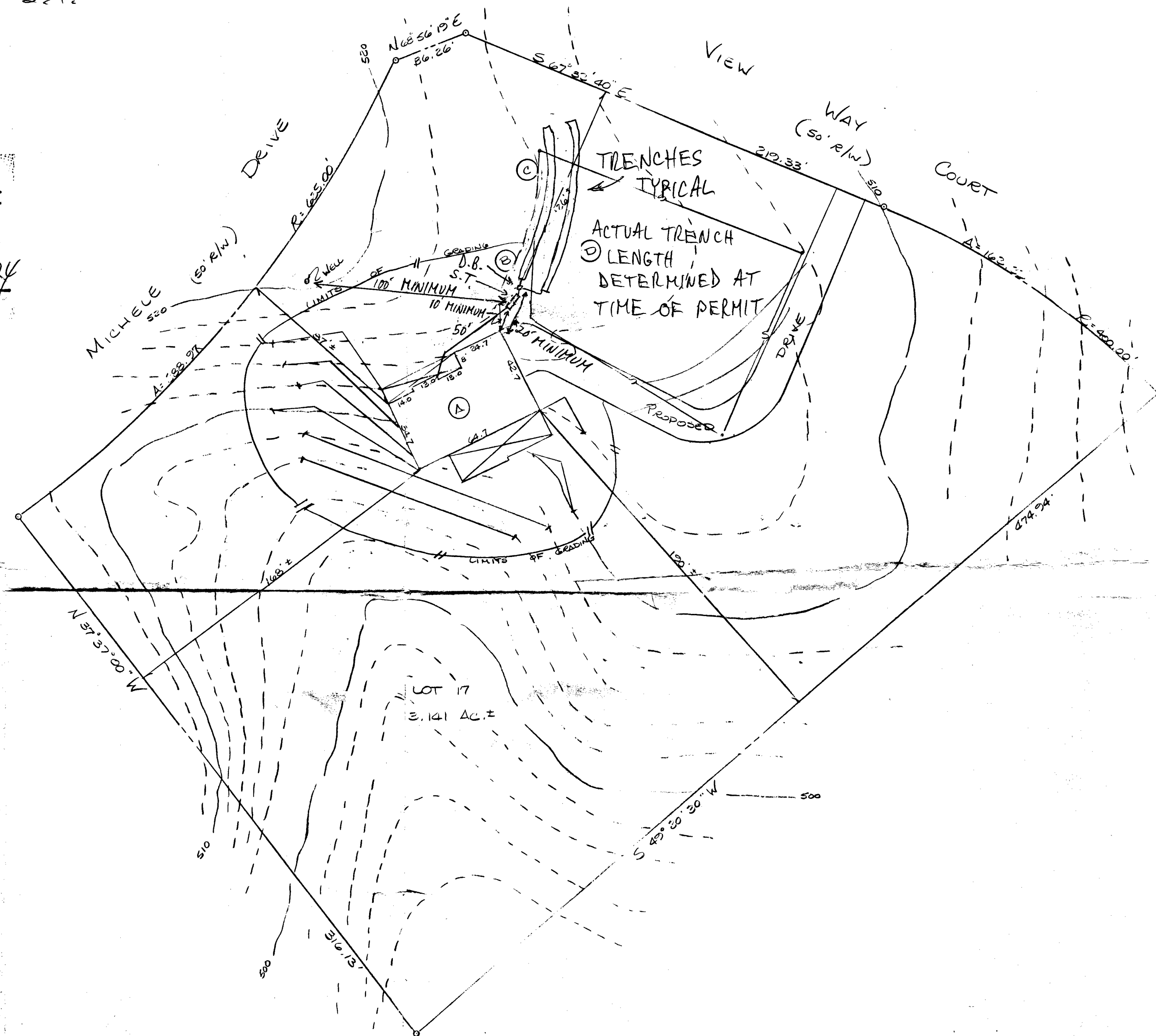
18" MINIMUM COVER
OVER S.T.

- (C) = PROP. DIST. EOK
EX. ELEV. = 515.8
INV. ELEV. = 512.9
- (D) = PROP. TRENCHES
INV. ELEV. = 512.8
LENGTH TO BE DETERMINED AT
TIME OF SEPTIC PERMIT ISSUANCE.

Approved Septic System Plan
Howard County Health Department

Mark E. Reppin 5/4/84
Signature Date

PLOT PLAN
LOT 17
THE WARFIELDS
14000 VIEW WAY COURT
ELECTION DISTRICT N-5
HOWARD COUNTY, MARYLAND
SCALE: 1"=40' APRIL 1984



514880 N
840
800
760
720
514680 N
640
514480 N
500
520
514480 N
440
400
360
514320 N

705100

140

180

220

705200 E

300

340

380

420

460 E

500

705300 E

580

620

660

700

705400 E