

41812 A

APPLICATION

PERCOLATION TESTING

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

A 41812

P _____

DISTRICT 3RD

DATE 3/10/88

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 PRISCILLA CLAGETT AND AUIS PFEFFELKORN Trinity Custom Homes
C/O
ADDRESS 14000 CASTLE BOULEVARD SILVER SPRING PHONE 202-890-6077
MARYLAND 20904

PROSPECTIVE BUYER _____
ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION BUENA VISTA FARM ESTATES LOT NO. 19 Prelim 9 73
Sec 1

ROAD AND DESCRIPTION EAST SIDE OF PFEFFELKORN ROAD, NORTHWEST
OF MD ROUTE 32 (3325 VELVET VALLEY DRIVE)

TAX MAP 22 PARCEL # 8

SIZE OF LOT 3.5 AC. TYPE BLDG. SFD - 4 Bm
(SINGLE FAMILY DWELLING OR COMMERCIAL)

BLDG. PERMIT SIGNED
AND RETURNED 10-21-97
Serial # BTH105298

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. Priscilla S. Clagett
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

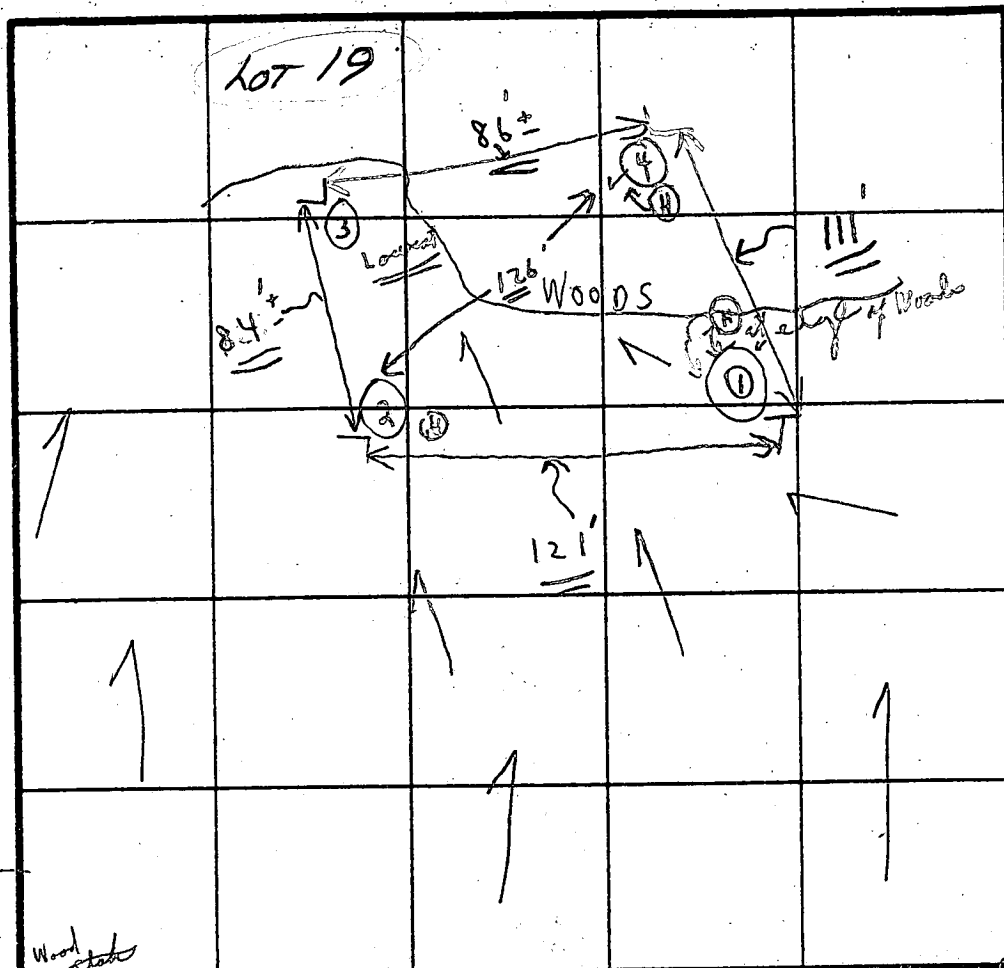
REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

A4/812
#19

SOIL PROFILE

T. S.
CLAY
LIGHT
LOAM
NO STONE
↓
TO
BOTTOM
↓



210 ft²/lot
Inlet = 4'
max bottom = 8'

① 13' ; ② 13' 10"
③ 14' ; ④ 13'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Soil Des
T. Soil
clay to 5'

T. Soil
clay to 5'

T. Soil
clay to 4 1/2'

T. Soil
clay to 4 1/2'

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8/18/88	1A	5'	7:52	7:54	7:54	8:01	2in
12/88	1B 19C	8'	7:52	7:54	7:54	8:02	8in
	2A	5'	7:22	7:30	7:30	7:43	13in
	2B 19D	13' 10"	Visual	loam			
	3A	4 1/2'	7:40	7:44	7:44	7:49	5in
	(L) 3B 19A	9 1/2'	7:32	7:34	7:34	7:36	2in
	4A	4 1/2'	7:28	7:33	7:33	7:39	6in
	4B 19B	13'	Visual	loam			

Loam
13' deep

14' deep

REMARKS

TYPE OF SOIL

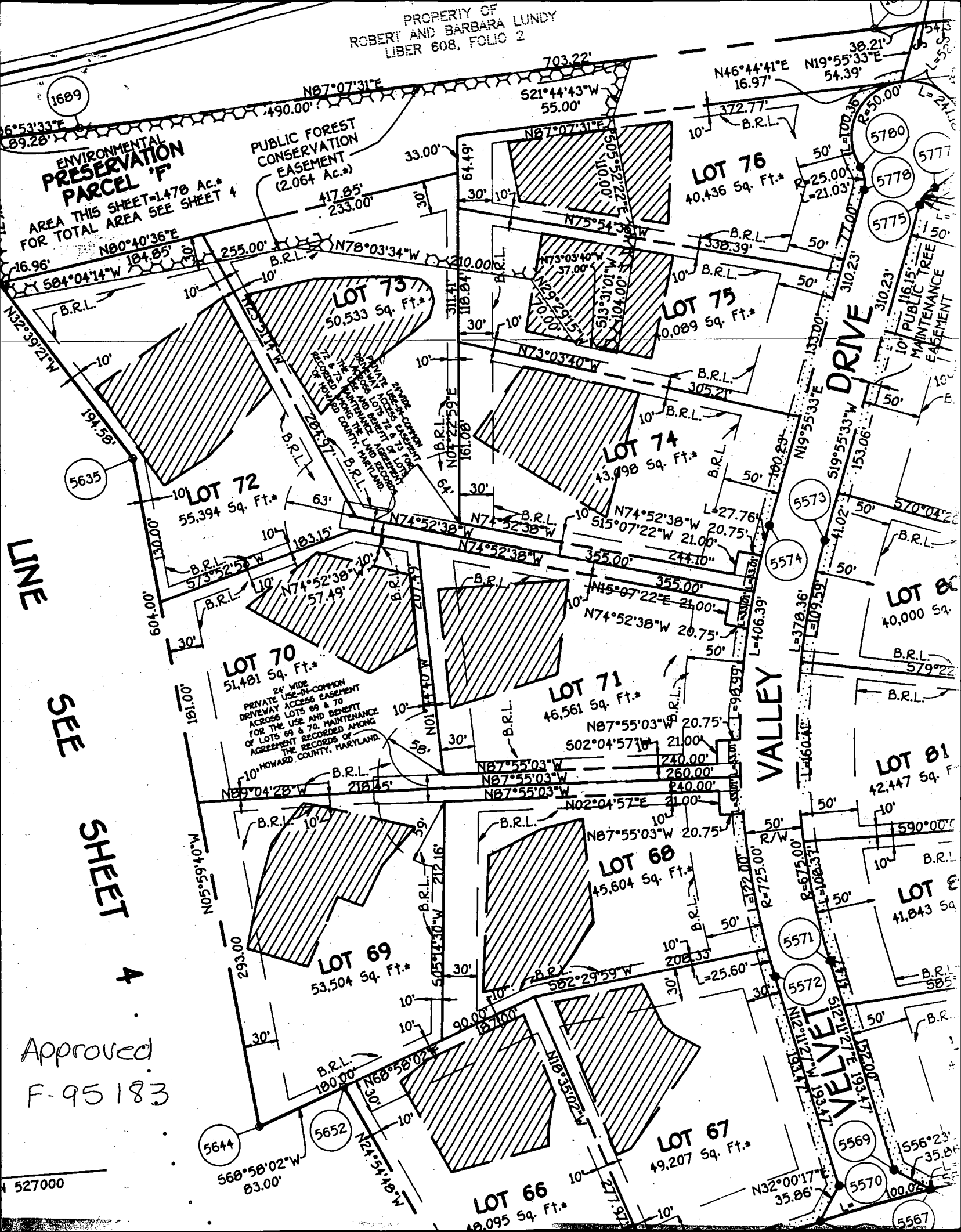
TESTED BY

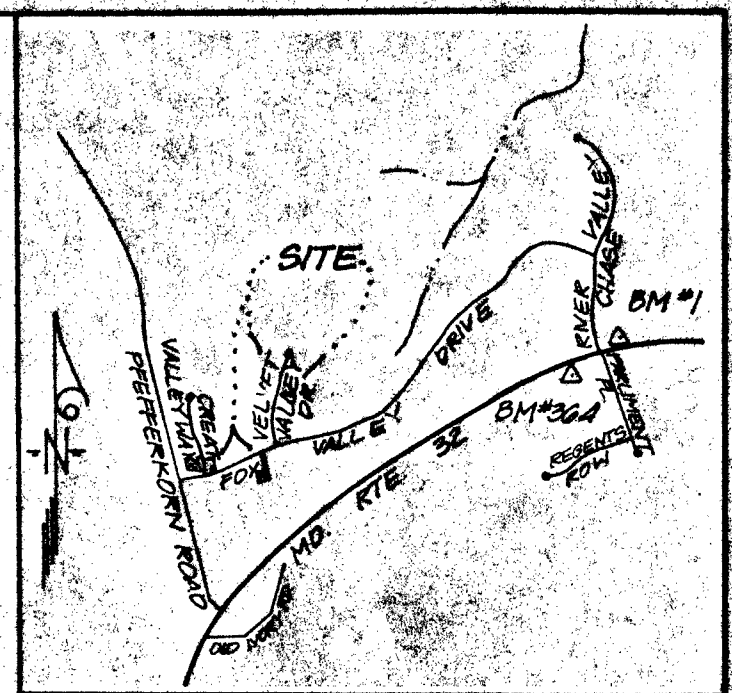
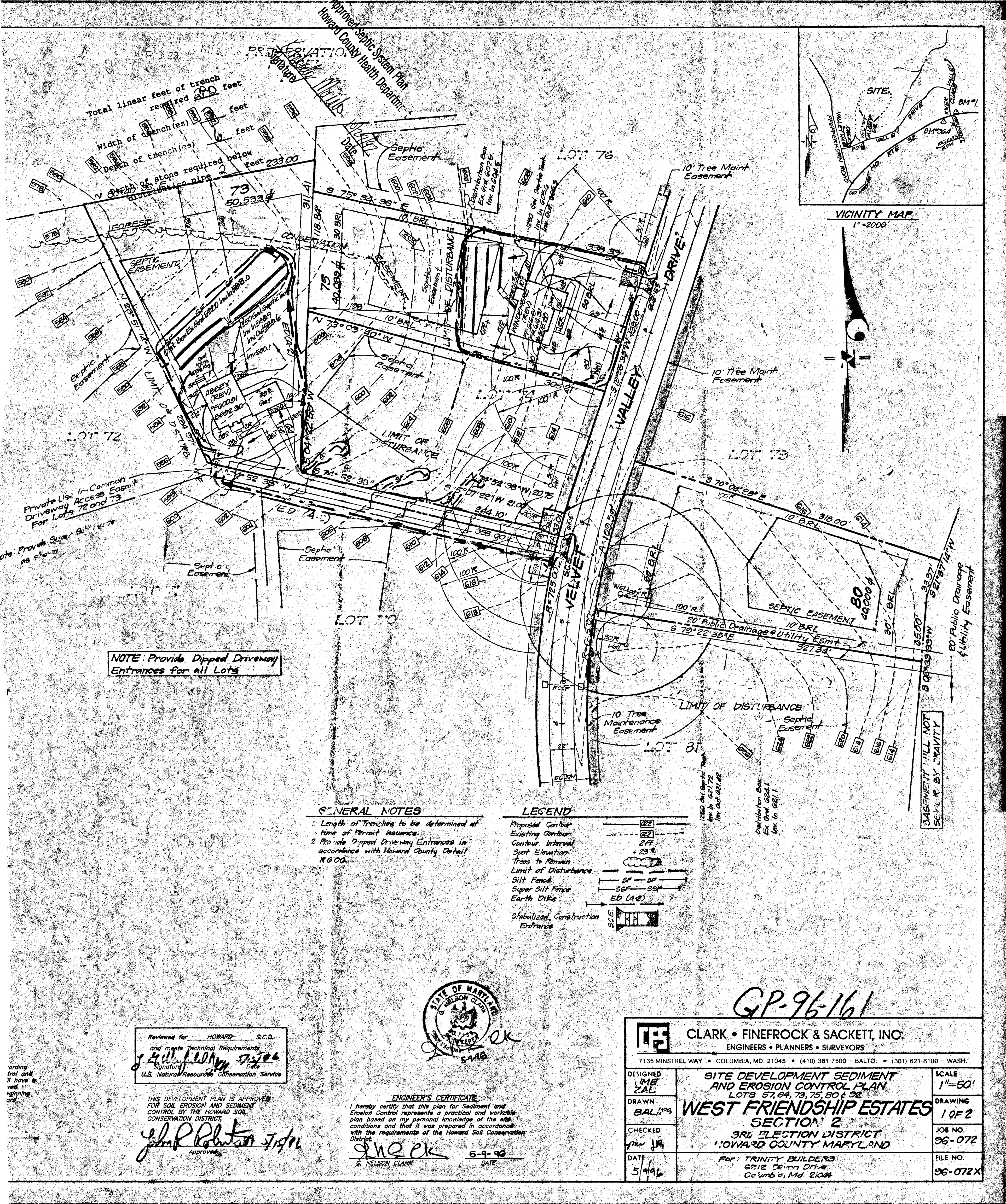
C. B. D.

ALSO PRESENT

Same as
yesterday

Tentative of
[Tests per stakes
" per dug hole nearby]





NOTE: Provide Dipped Driveway Entrances for all Lots

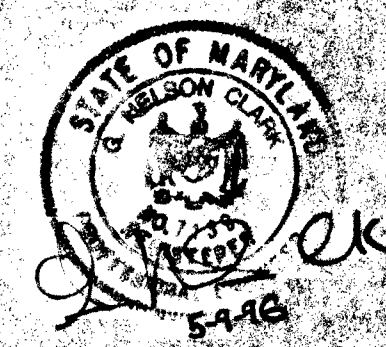
GENERAL NOTES

- 1. Length of Trenches to be determined at time of Permit Issuance.
- 2. Provide Dipped Driveway Entrances in accordance with Howard County Detail R.G.O.

LEGEND

- Proposed Contour
- Existing Contour
- Contour Interval
- Spot Elevation
- Trees to Remain
- Limit of Disturbance
- Silt Fence
- Super Silt Fence
- Earth Dike
- Stabilized Construction Entrance

Reviewed for HOWARD S.C.D. and meets Technical Requirements
Signature: [Signature]
U.S. Natural Resources Conservation Service



ENGINEER'S CERTIFICATE

I hereby certify that this plan for Sediment and Erosion Control represents a practical and workable plan based on my personal knowledge of the site conditions and that it was prepared in accordance with the requirements of the Howard Soil Conservation District.

G. NELSON CLARK
DATE: 5-9-96

THIS DEVELOPMENT PLAN IS APPROVED FOR SOIL EROSION AND SEDIMENT CONTROL BY THE HOWARD SOIL CONSERVATION DISTRICT.
Signature: [Signature]
Approved

GP-96-161

CLARK • FINEROCK & SACKETT, INC.
ENGINEERS • PLANNERS • SURVEYORS
7135 MINSTREL WAY • COLUMBIA, MD. 21045 • (410) 381-7500 - BALTO. • (301) 621-8100 - WASH.

DESIGNED LME ZAL	SITE DEVELOPMENT SEDIMENT AND EROSION CONTROL PLAN LOTS 57, 64, 73, 75, 80 & 92 WEST FRIENDSHIP ESTATES SECTION 2 3RD ELECTION DISTRICT HOWARD COUNTY MARYLAND For: TRINITY BUILDERS 6212 Deann Drive Columbia, Md. 21044	SCALE 1"=50'
DRAWN BAL/PS		DRAWING 1 OF 2
CHECKED JRM/PS		JOB NO. 96-072
DATE 5/9/96		FILE NO. 96-072X

C1	7963	SEQUENCE NO. (MDE 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.	
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)			COUNTY NUMBER A 41812		PERMIT NO. FROM "PERMIT TO DRILL WELL"	
ST/CO USE ONLY DATE RECEIVED 090996		DATE WELL COMPLETED 082196		Depth of Well 22 100 26 (TO NEAREST FOOT)		H0-94-0865

OWNER CSO	last name Rt. 32	first name	TOWN W. FRIENDSHIP EST
STREET OR RFD		SECTION 2	LOT 73
SUBDIVISION W. FRIENDSHIP EST			

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	check if water bearing
TOP SOIL	0 5	
BROWN SHILL	6 30	
MICA ROCK		
SANDSTONE	31 100	
+ BLUE ROCK		
GOT WATER		75
		95

GROUTING RECORD	
yes no	
WELL HAS BEEN GROUTED (Circle Appropriate Box)	
TYPE OF GROUTING MATERIAL (Circle one)	
CEMENT CM	BENTONITE CLAY BC
NO. OF BAGS 9 NO. OF ROUNDS 846	
GALLONS OF WATER 54	
DEPTH OF GROUT SEAL (to nearest foot)	
from 0 ft. to 40 ft.	
(enter 0 if from surface)	

CASING RECORD	
casing types insert appropriate code below	
ST STEEL	CO CONCRETE
PL PLASTIC	OT OTHER
MAIN CASING TYPE	
PL	
Nominal diameter top (main) casing (nearest inch)	Total depth of main casing (nearest foot)
64	45

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

SCREEN-RECORD	
screen type or open hole insert appropriate code below	
ST STEEL	BR BRASS BRONZE
PL PLASTIC	OT OTHER
HOLE	

NUMBER OF UNSUCCESSFUL WELLS: 0
WELL HYDROFRACTURED Y N

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 26.04.04 "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.

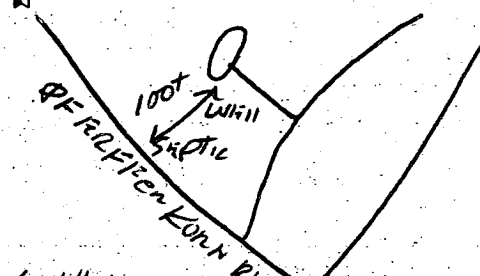
TYPE: MWD/MSD/MGD
DRILLERS LIC. NO. 043
Wayne Harley
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)
LIC. NO. 550-062
Dennis Harley
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

DEPTH (nearest ft.)	
1 40	2 42
3 100	
SLOT SIZE 1 2 3	
DIAMETER OF SCREEN (NEAREST INCH)	
from to	
GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68	

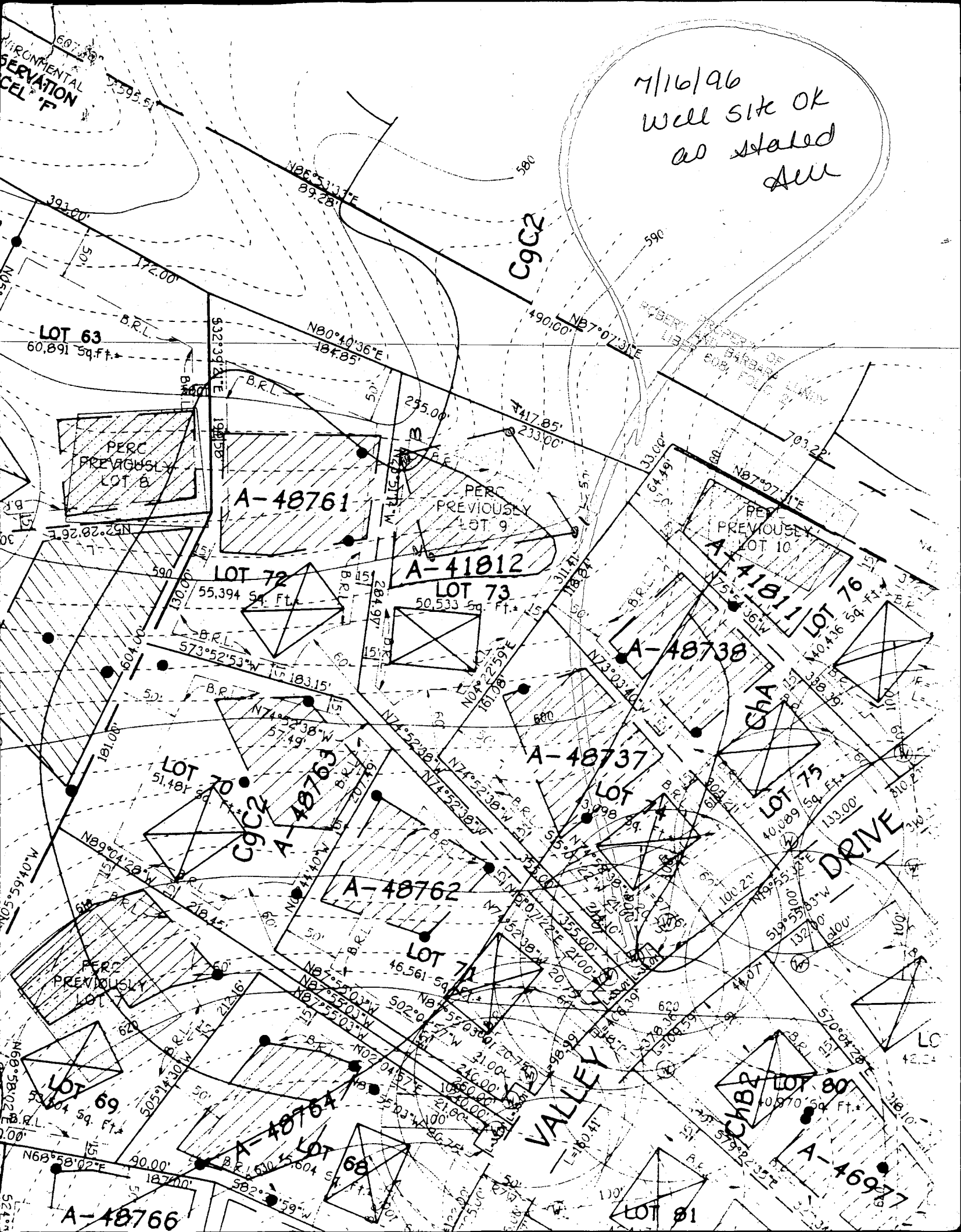
MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)	
T	(E.R.O.S.)
70	72
TELESCOPE CASING	LOG INDICATOR
OTHER DATA	

PUMPING TEST	
HOURS PUMPED (nearest hour)	3
PUMPING RATE (gal. per min.)	15
METHOD USED TO MEASURE PUMPING RATE Submersible	
WATER LEVEL (distance from land surface)	
BEFORE PUMPING	25 ft.
WHEN PUMPING	42 ft.
TYPE OF PUMP USED (for test)	
A air	P piston
C centrifugal	R rotary
J jet	S submersible

PUMP INSTALLED	
DRILLER WILL INSTALL PUMP (CIRCLE) (YES or NO)	NO
IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.	
TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29	
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
- below	2 (nearest foot)

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)	
	

B 1 3036 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)	SEQUENCE NO. (DP USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER 40-94-0865 fill in this form completely
OWNER INFORMATION Date Received (APA) 053196 LAW DESIGN + DEVELOP 15 Last Name 21 Owner 27 First Name 34 10805 ALCKORY RIDGE 36 Street or RFD 42 COLUMBIA MD 21044 57 Town 70 State 72 Zip 76		LOCATION OF WELL HOWARD 8 COUNTY 21 WEST FRIENDSHIP 23 SUBDIVISION 42 SECTION 2 LOT 73 44 46 48 50 WEST FRIENDSHIP 52 NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) 2 M I 73 76 77 78	
DRILLER INFORMATION GARY W SHAFF Driller's Name 77 License No. 80 HARLEY DRILLING & PUMP SYSTEMS Firm Name Box 160 WALKERSVILLE, MD Address Gary W Shaff 5-27-96 Signature Date		WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 3 8 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 800 14 20 USE FOR WATER (CIRCLE APPROPRIATE BOX) ☒ HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) ☐ FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) ☐ INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) ☐ PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) ☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)	
APPROXIMATE DEPTH OF WELL 200 FEET 24 28 APPROXIMATE DIAMETER OF WELL 6" NEAREST INCH		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL HOWARD CO. A41812 COUNTY NAME COUNTY NO. STATE SIGNATURE _____ INSERT S ☐ DATE ISSUED 07/16/96 A. McMillen 7/16/97 43 48 CO SIGNATURE EXP. DATE NORTH GRID 528000 EAST GRID 0804000 50 55 57 63	
METHOD OF DRILLING (circle one) BORED (or Augered) ☒ JETTED ☐ Jetted & DRIVEN 30 37 AIR-ROTARY ☒ AIR-PERCussion ☐ ROTARY (Hydraulic Rotary) CABLE ☐ REVERSE-ROTARY ☐ DRIVE-POINT other _____		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. well 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE E 8004 N 5208 000 000	
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) ☒ THIS WELL WILL NOT REPLACE AN EXISTING WELL ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED. 39 ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY - CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS ☐ THIS WELL WILL DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) _____ 52		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)			
APPROX. PERMIT NUMBER _____ 54 63 FORCE AM WRITE INITIALS IN BOX 40-94-0865 PERMIT No. 40-94-0865 67 68 70 71 72 73 74 75 76 77 78 79			
SPECIAL CONDITIONS NOTE = APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED =			



7/16/96
Well site OK
as stated
AUC

VALLEY DRIVE

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3430 COURT HOUSE DRIVE ELLCOTT CITY, MD 21043 PERMITS (410) 313-2466 INSPECTIONS (410) 313-1810 AUTOMATED INFORMATION (410) 313-3800	HOWARD COUNTY PERMIT APPLICATION	PERMIT NUMBER <u>3001179411</u>
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Building Address <u>3325 Velvet Valley Drive</u>	Property Owner's Name <u>Vernon + Bob Home Imp</u>
Suite/Apt. #: _____ SDP/WP/Petition #: _____	Address <u>3325 Velvet Valley Dr</u>
Census Tract <u>6030</u> Subdivision <u>West Friendship</u>	City _____ State _____ Zip Code _____
Section _____ Area _____ Lot <u>73</u>	Home Phone _____ Work Phone _____
Tax Map _____ Parcel _____ Grid _____	Applicant's Name & Mailing Address, (if other than stated hereon): _____
Zoning _____ Map Coordinates <u>9D7</u> Lot size _____	Phone _____ Fax _____
Existing Use _____	Contractor Company <u>Vernon + Bob Home Imp</u>
Proposed Use _____	Contact Person <u>Vernon B. Iler</u>
Estimated Construction Cost \$ <u>212,000</u>	Address <u>5 Shepton Rd</u>
Description of Work <u>Construct 1000 SF</u> <u>Decked wood deck + Gazebo</u>	City <u>Randallstown</u> State <u>Md</u> Zip Code <u>21133</u>
Occupant or Tenant _____	License No. _____
Contact Name _____	Phone <u>410-5214738</u> Fax _____
Address _____	Engineer or Architect Company _____
City _____ State _____ Zip Code _____	Contact Person _____
Phone _____ Fax _____	Address _____
	City _____ State _____ Zip Code _____
	Phone _____ Fax _____

BUILDING DESCRIPTION - <u>COMMERCIAL</u>		BUILDING DESCRIPTION - <u>RESIDENTIAL</u>	
Building Characteristics	Utilities	Building Characteristics	Utilities
Height: _____	Water Supply: _____	SF Dwelling ☐ SF Townhouse ☐	Water Supply: _____
No. of stories: _____	Public _____	Depth _____ Width _____	Public _____
Gross area, sq. ft. per floor: _____	Private _____	1st floor: _____	Private _____
Use group: _____	Sewage Disposal: _____	2nd floor: _____	Sewage Disposal: _____
Construction type: _____	Public _____	Basement: _____	Public _____
Reinforced Concrete _____	Private _____	Finished Basement ☐ Unfinished Basement ☐	Private _____
Structural Steel _____	Electric Yes ☐ No ☐	Crawl space ☐ Slab on Grade ☐	Electric Yes ☐ No ☐
Masonry _____	Gas Yes ☐ No ☐	No. of Bedrooms _____	Gas Yes ☐ No ☐
☒ Wood Frame	Heating System: _____	Multi-family dwellings:	Heating System: _____
State Certified Modular _____	Electric ☐ Oil ☐	No. of efficiency units: _____	Electric ☐ Oil ☐
	Natural Gas ☐	No. of 1 BR units: _____	Natural Gas ☐
	Propane Gas ☐	No. of 2 BR units: _____	Propane Gas ☐
	Sprinkler system: N/A ☐	No. of 3 BR units: _____	Sprinkler system: N/A ☐
	Full _____	Other Structure: _____	NFPA #13D _____
	Partial _____	Dimensions: _____	NFPA #13R _____
	Other Suppression _____	Footings: _____	Other: _____
	# of Heads _____	Roof: _____	
		State Certified Modular _____	
		Manufactured Home _____	

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature <u>Vernon B. Iler</u>	Print Name <u>Vernon B. Iler</u>
Title/Company _____	Date <u>5-12-99</u>

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**

**** PLEASE WRITE NEATLY AND LEGIBLY. ****

FOR OFFICE USE ONLY

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#
☒ Land Development DPZ			Front: _____	32475
☒ State Highways			Rear: _____	Filing fee \$ _____
☒ Building Official			Side: _____	Permit fee \$ _____
☒ Dev. Engineering DPZ	<u>5/13/99</u>	<u>Mark E. Liller</u>	Side St: _____	Excise tax \$ _____
☒ Health			All minimum setbacks met? YES ☐ NO ☐	Sub-total paid \$ _____
☒ Fire Protection			Is Entrance Permit required? YES ☐ NO ☐	Add'l permit fee \$ _____
Is Sediment Control approval required prior to issuance? YES ☐ NO ☐			Historic District? YES ☐ NO ☐	TOTAL FEES \$ _____
CONTINGENCY CONSTRUCTION START: ☐			Lot Coverage for New Town Zone _____	Balance due \$ _____
ONE STOP SHOP: ☐			SDP/Red-line approval date _____	Check # <u>14964</u>
			Accepted by _____	Validation # _____

Distribution of Copies: White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA

EST CONSERVATION EASEMENT

General Note No. 25, Plat No. 12451

N80°40'36"E

LOT 73
50,533 ±

233.00'

LOT 76

BRL

10' BRL

LOT 76
LOT 75

LOT 75
LOT 74

age--
see
No. 1
451

S.T. 90

10'
FROM
DECK

OK FOR
S16 M12

5/13/99

Common Driveway
as Lots 72 & 73 For
Lots 72 & 73.
Recorded Among
Card Co., Md.

Gravel
Driveway

Magadam Driveway

S74°52'38"E
20.75'
N15°07'22"W
21.00'
244.10'

P.K. Nail

NOTE: 10' Wide Public Tree--
Maintenance Easement, see
General Note No. 16 Plat No
12451

MAY 13 1999

RECEIVED

ICATE

of this property
for the purpose
thereon, and that

NOTES:

1.
2.

