

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXX~~

410-313-2640

INDEXED

3/24/99 NEEDS HOUSE
CONN 618

P 511468

A 46864

DISTRICT 5th

DATE 3/19/99

DATE SYSTEM APPROVED 5/24/99

INSPECTOR B. B.

Fogle's Septic Clean, Inc.

IS PERMITTED TO INSTALL ☒ ALTER ☐

ADDRESS 580 Obrecht Road, Sykesville, Maryland 21784 PHONE 410-795-5674

SUBDIVISION Sanborn Property LOT 3 ROAD 4963 Ten Oaks Road

PROPERTY OWNER Thomas & Cathy Bittner

ADDRESS

SEPTIC TANK CAPACITY 1250 GALLONS TOP-SEAMED

***INSTALL 1-1250 GALLON PUMP CHAMBER
TO BE ~~REPAIRED~~ NOW FOR FUTURE USE.***
INSTALLED

NUMBER OF BEDROOMS 4

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 280

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 the distribution box 250 feet down the left (410.65') lot line and 55 feet off that same lot line as seen when facing the lot from Ten Oaks Road. Run trenches along contour towards the left lot line.

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

PLANS APPROVED BY Kim Maiste/Glen Savage

REVISED DATE 10-16-98

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

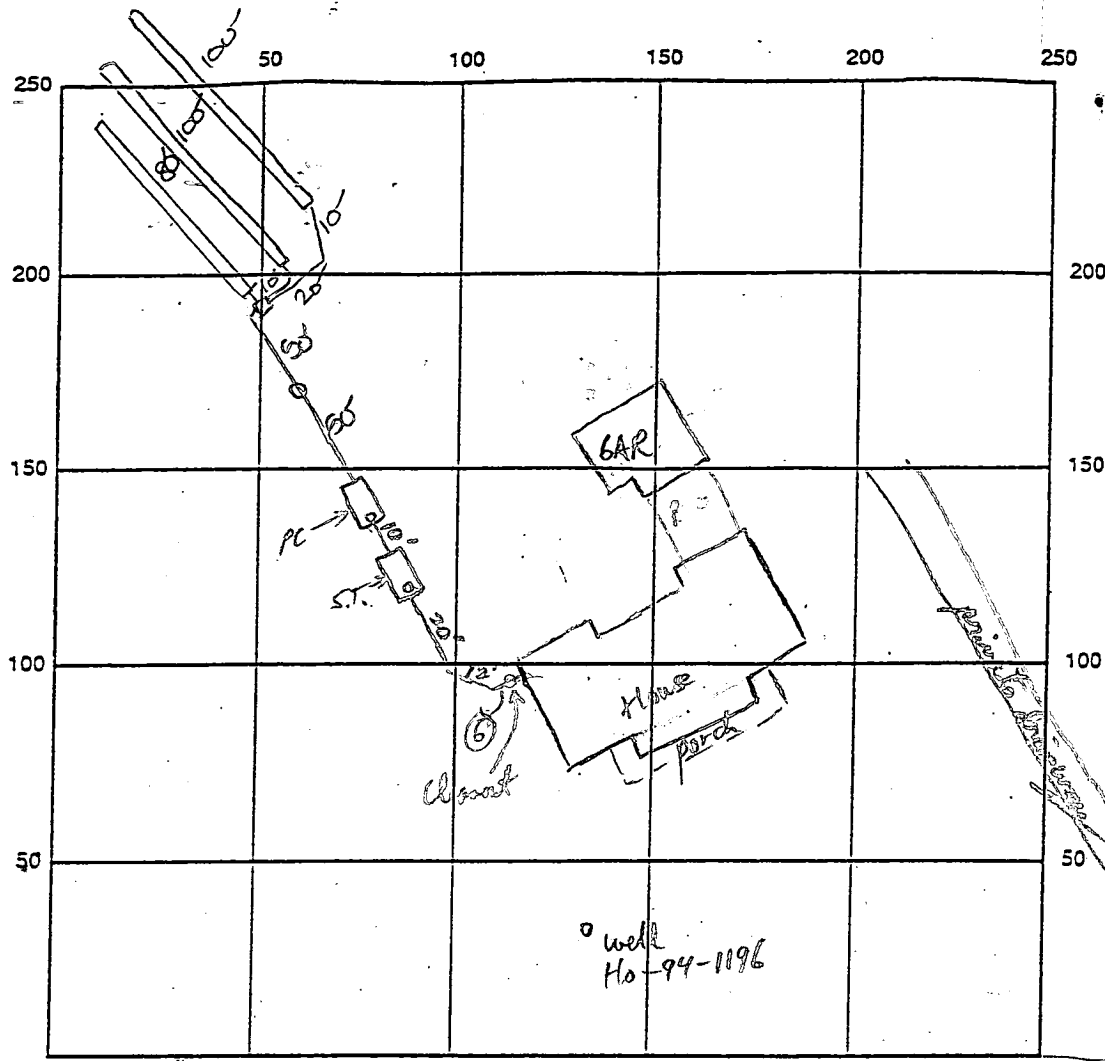
NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

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



Ten Oaks Rd. INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

(Filling Chamber) 1250 Top Ground
 SEPTIC TANK LEVEL 1250 Top

CLEANOUTS 2 in line, one on each yard

DISTRIBUTION BOX LEVEL OK

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

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 1 x 80 FT. → 280

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 840 SQ. FT.

DRYWALL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA SQ. FT.

REMARKS: House Connection Needed w/ S.T. + P.C. set OK to cover Tanks + supply line as per as get today. 3/23/99 R/B

3/25/99 OK to order all septic work - needs house connection. DKS Septic house connection O.K.

Approved 5/24/99 (B.B.)

DATE SYSTEM APPROVED 5/24/99 INSPECTOR B. Baker

SUBDIVISION: Sawborn Prop LOT NUMBER 3
STREET NAME: Ten Oaks Road

AVERAGE PERCOLATION RATE: 10 min SQUARE FEET PER BEDROOM: 210

NUMBER OF BEDROOMS: 4 LINEAR FEET OF TRENCH PER BEDROOM: 20

TOTAL LINEAR FEET OF TRENCH: 280 4 BEDROOMS PER DAN SUMNER AT
PERMITS DEPT. RELAYED BY DIANA LORAN
ON 10-2-98 BY

SEPTIC TANK CAPACITY: 1250 GALLONS

1250 GALLON PUMP CHAMBER TO BE INSTALLED NOW
FUTURE

TRENCH DIMENSIONS

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.

PUMPED SYSTEM PROPOSED: YES NO

PUMPED SEPTIC SYSTEM DETAIL

_____ Gallon pump chamber: top seamed center seamed

BLDG. PERMIT SIGNED

AND RETURNED 10-16-98

Serial # BR 113P32

Note 1: Septic pump detail to be provided by installer prior to issuance of
septic permit.

Note 2: Pump performance test is necessary prior to Health Department
approval of pumped septic system

LOCATION: Place the distribution box 250' down the left (410.65')

lot line and 55' off that same lot line as seen when
facing the lot from Ten Oaks Rd. KM 6-2-97

RUN TRENCHES ALONG CONTOUR TOWARDS THE EAST LOT LINE
REV 10-16-98 BS

ADDITIONAL NOTES: _____

Reviewer: _____ Date: _____

(HD-192)

KEEP in Property File

APPLICATION

HOWARD COUNTY

PERMIT APPLICATION

DEPARTMENT OF INSPECTIONS, LICENSES & PERMIT
3430 COURT HOUSE DRIVE, ELLICOTT CITY, MARYLAND 21043

SERIAL NUMBER

B00113832

BUILDING ADDRESS (HOUSE NO., STREET, TOWN OR AREA)

4963 Ten Oaks Rd.
Dayton, MD 21029 21030 37463GRADING/SEDIMENT CONTROL ☐ YES ☐ NO

SDP #

DESCRIPTION OF WORK AUTHORIZED

2 Story Dwelling
20'x22' 2 car garage
w/8'x70' of Front Porch
Rear deck approx. 362 sq. ft.
13 course conc. Block Foundation

LOT NO. 3 PARCEL NO. 43 SEC. - AREA - BLOCK NO. 8 LIBER - FOLIO -

SUB DIVISION Sanborn ZONE 28 ZONE MAP 28 ELEC. DIST. 5TH CENSUS TR. 6051.01

OWNER NAME AND ADDRESS PHONE NO.

Thom & Cathy Bittner
16395 Camalo DR.
MT. AIRY, MD 21771 410-245-5369 442-2788

OCCUPANT'S NAME AND ADDRESS PHONE NO.

SAME

ARCHITECT OR ENGINEER'S NAME AND ADDRESS PHONE NO.

Site Plan - Frank Steadman Asso.
301 552 2115

CONTRACTOR'S NAME AND ADDRESS PHONE NO.

MALAT CUSTOM BLDGS, INC. 410-374-9165
Stephen Malat
4748 Kridlers Schoolhouse Rd Manchester, MD 21102

EXISTING USE PROPOSED USE

Vacant Lot Single Fam. Dwelling

EST. CONSTRUCTION COST LICENSE NUMBER PERMIT FEE

\$260,000 45114

W/S CODE FOR OFFICE USE ONLY

DISTANCE IN FEET FROM R/W LINE TO FRONT BUILDING LINE

SIDE YARD

(DISTANCE IN FEET FROM SIDE BLDG. LINE TO SIDE PROPERTY LINE)

TO SIDE BUILDING LINE

DISTANCE IN FEET, REAR YD. REQUIRING SET

BACK (CORNER LOT ONLY)

SDP #

Check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

CAUTION

To begin construction before a permit placard has been issued and displayed on the job is a violation of the law.

Use and occupancy permit must be applied for two weeks before it will be issued.

IMPORTANT: PLEASE SHOW ZIP CODES AND AREA CODES WHEREVER REQUIRED.

LP-69-591

SIZE OF BLDG. FRONT DEPTH HEIGHT

TYPE OF BLDG. AREA VOLUME ROOF

B. ROOMS 4
ROOMS
BATHS 2 1/2
FIREPLACES

FOOTINGS FOUNDATION S. WALLS

2'x20" poured CONC. 13 course Block 2x6 @ 16" o.c.

UTILITIES

WATER/WELL SEWER/SEPTIC GAS ELECTRICITY TYPE OF HEAT AC

Well Septic YES 300 Amp GALS YES
I have carefully examined and read this application and know the same is true and correct, and that in doing this work, all provisions of Howard County Ordinances and the State Laws of Maryland will be complied with, whether specified or not; and I will notify the Department of Inspections, and Permits twenty-four hours in advance when I am ready for the inspections called for elsewhere in the application; and that no work will be covered up until such inspections have been complied with.

Signature: Stephen N. Malat

TITLE: Builder SIGNATURE: DATE: Aug. 26, 1998

FUNCTION DATE SIGNATURE APPROVAL

ZONING/PLANNING

SHA

SEDIMENT/GRADING

BUILDING OFFICIAL

WATER & SEWER

HEALTH DEPT. 10/16/98

FIRE PROTECTION

STORM WATER MGM.

APPROVED

DATE

Distribution of Copies:

White - Building Official
Green - Planning & Zoning

Yellow - Engineering

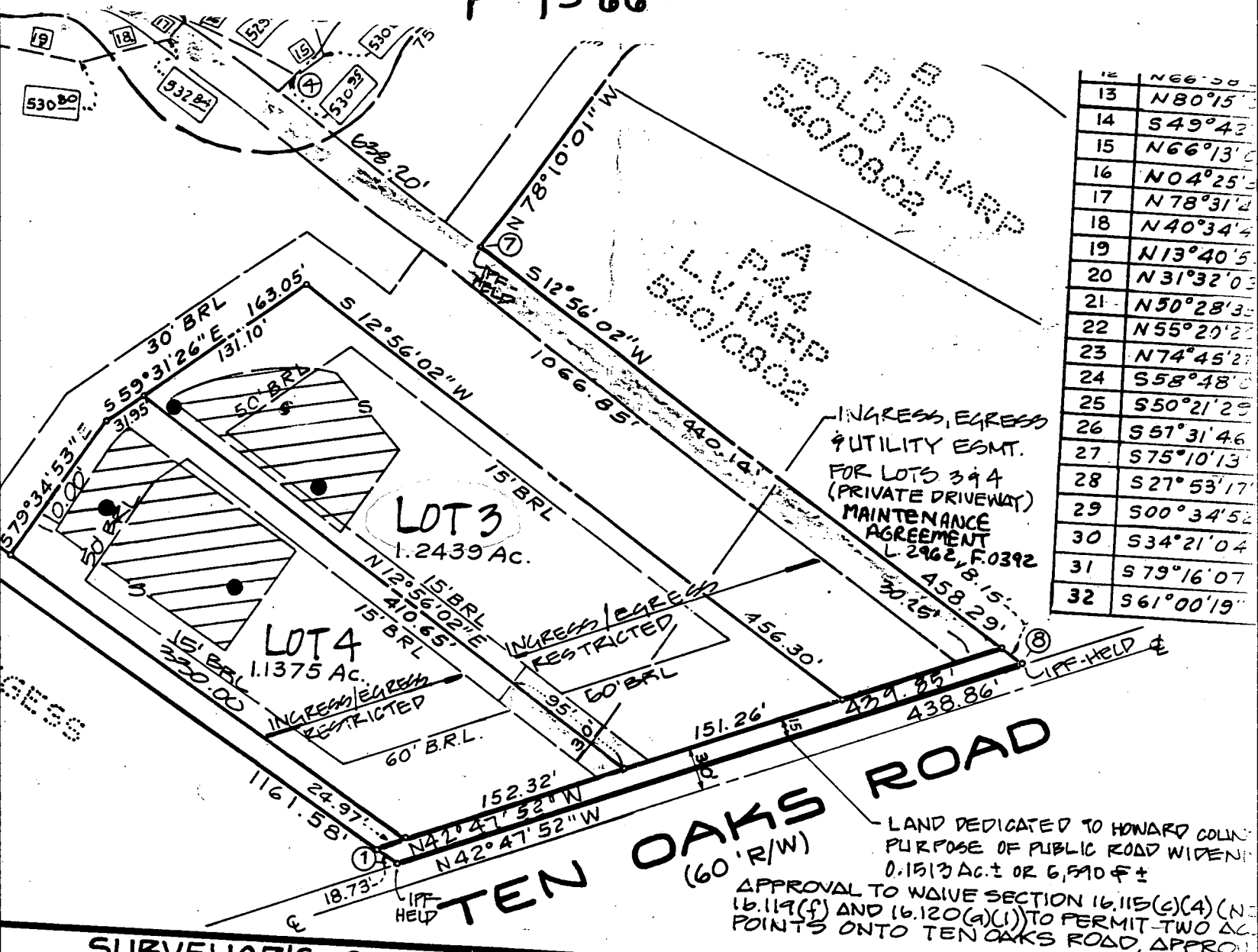
Pink - Health Dept.

Gold - S.H.A.

KEEP in Property File

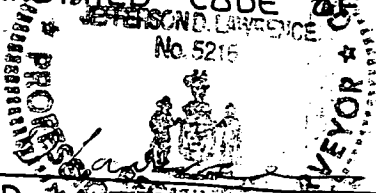
Mr. Sanborn
Richard Demmitt
Mr Allen

F-93-66



SURVEYOR'S CERTIFICATE

I HEREBY CERTIFY THAT THE FINAL PLAT SHOWN HEREON IS CORRECT; THAT IT IS A SUBDIVISION OF ALL THE LAND CONVEYED BY HENRY C. MARSHALL AND ELIZABETH EMERSON MARSHALL TO JAMES M. SANBORN AND EMILIE S. SANBORN BY DEED DATED JANUARY 1957 AND RECORDED AMONG THE LAND RECORDS OF HOWARD COUNTY, MARYLAND IN LIBER 22 AT FOLIO 411 AND THAT ALL MONUMENTS ARE IN PLACE PRIOR TO THE ACCEPTANCE OF THE STREETS. THE SUBDIVISION BY HOWARD COUNTY AS SHOWN, ACCORDANCE WITH THE ANNOTATED CODE OF MARYLAND, AS AMENDED.



JEFFERSON D. LAWRENCE
REG. PROF. LAND SURVEYOR #5216

1/3/93
DATE

RECORDED AMONG THE LAND RECORDS OF HOWARD COUNTY, MARYLAND ON AS PLAT NUMBER 10935

SANBORN PROPERTY

LOTS 1-4
TAX MAP: 28 PARCEL: 43
FIFTH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
MARCH 1993 SCALE: 1"=100'
ZONED: R-R D.C.G. #21-810

OWNER:

JAMES SANBORN
4967 TEN OAKS RD.
DAYTON, MD. 21036
410-531-5444



DEVELOPMENT
CONSULTANTS
GROUP
17904 GEORGIA
SUITE 102
OLNEY, MD. 2
(301) 924-45

NO ANSWER 10/6/98 10AM

10/7/98 ENGINEER WILL REVISE - SEE FAX

FRANK M STEADMAN ASSOCIATES

6506 Fairbanks Street
New Carrollton, Maryland 20784-3314
(301) 552-2116 FAX (301) 552-2679

ENGINEERS

PLANNERS

SURVEYORS

Monday, October 5, 1998

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, Maryland 21043-2648

Attn: Glen Savage

Via Facsimile (410) 313-2648

2 systems by
GRAVITY -
STRAIGHTEN LINES
OUT, Pump
220 tank now
GJ

Re: Septic System Design for Lot 3
Sanborn Property, Ten Oaks Road
Clarksville, Maryland

Dear Mr. Savage:

We spoke last Friday on the telephone about the above referenced project. You allowed that I could make a revision and FAX it to you today. You said that you would be out of the office today, but that you would return tomorrow.

My concerns about this project from the beginning had been that I felt that the Lot had too small a 'septic recovery area'. It is scaled and plotted from the Record Plat. Anyway, be that as it may, my main problem with this site in laying out the septic system had been the fact that I had to cross a swell with the effluent pipe in order to carry the effluent to the septic recovery area. Grades on the pipe dictated the invert of pipe grades that I would have at the distribution box. Several weeks ago, when you told Steve Malat, the Contractor that you would accept gravity to the first S.R.A. I felt that the problem had been solved. Now, however, after Steve met with you last week, and found out that I had to account for two of the recovery areas by gravity flow, and not just the one, I thought I was committed to the pump system at this time. Your help last Friday is much appreciated.

I submit two pages, one a copy of the center of the newly revised Site Plan, with the pipe system laid out with a minimum of 280 lin. ft. of recovery area for each use; and the other, a profile of the new layout showing the pipe system from the house back to the point where the distribution box delivers the effluent to the drain fields. You will note that the 'tertiary recovery' area is too small. I do not know what to do about that. All I can do is show it.

Now, also in our conversation, last Friday, you warned that you wanted 24 hours storage for the future pump, when it was in place. This required that the 'wet well' be another Septic Tank. I have shown it thus. I would like to make a suggestion about this 'wet well'. The present 4" pipe should flow through it from end to end, and remain as just a pipe through the future wet well til such time that the effluent pump has to be installed. In that way, when the time comes, the plumber will be able to make his installation of pump and controls, with conduit over to the house for wiring into the house electrical panel, as he is about to cut the 4" dia pipe and set the new effluent pump in service to convey the effluent to the remaining recovery area through a newly installed 1 1/2" force main.

NO - CORRECT
NOW,

I await your comments on this design. I realize that I scrimped and saved with perforated pipes not exactly 3' below the existing grade above; but it was to try to maximize the use of space, to economize the remaining recovery area.

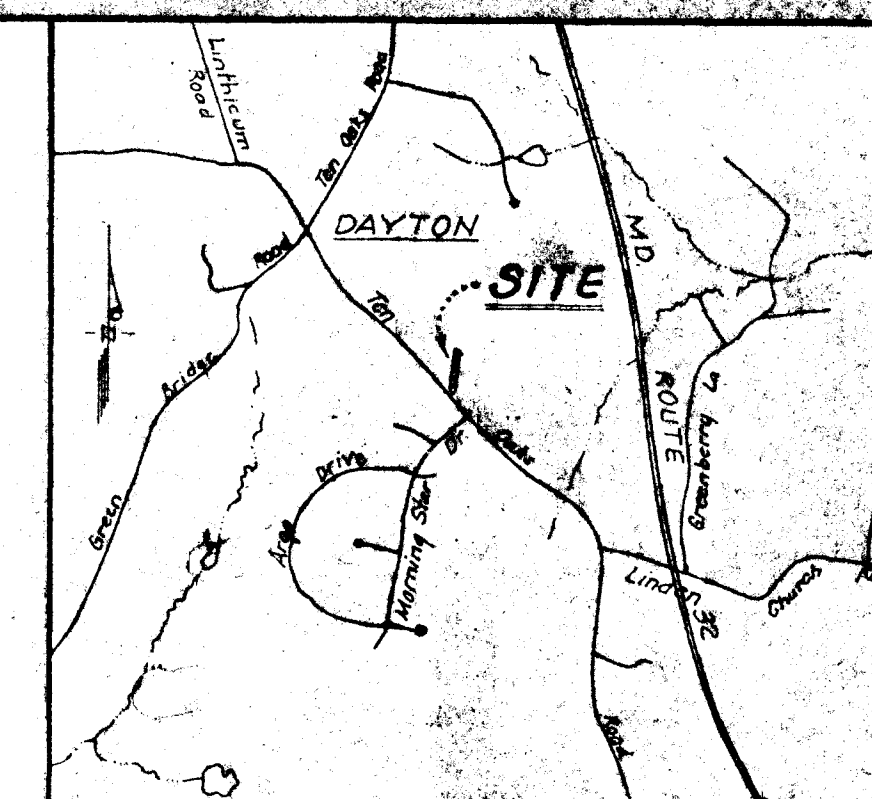
I look forward to your comments.

Very truly yours,



Frank M. Steadman, Jr., P.E.

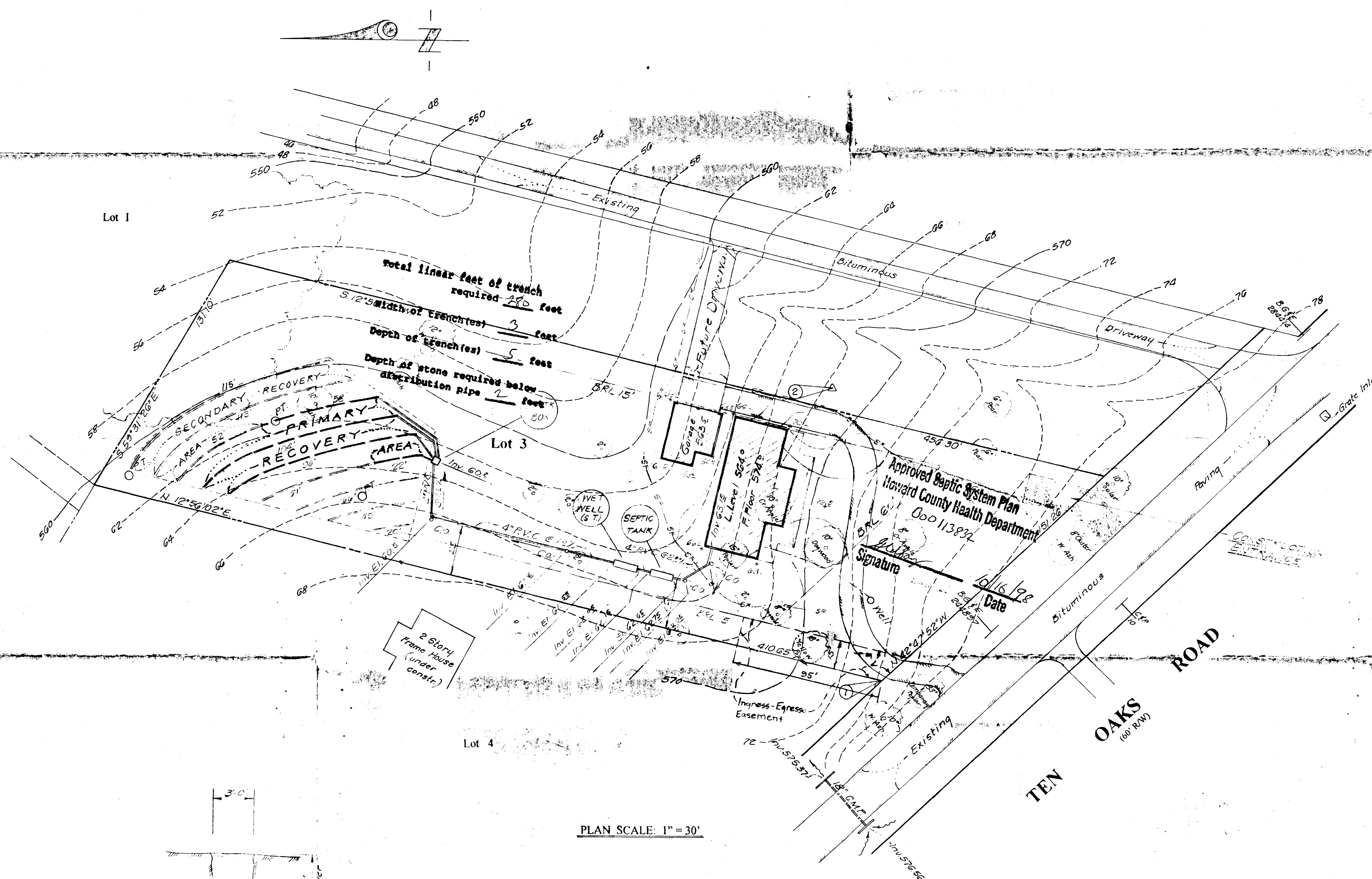
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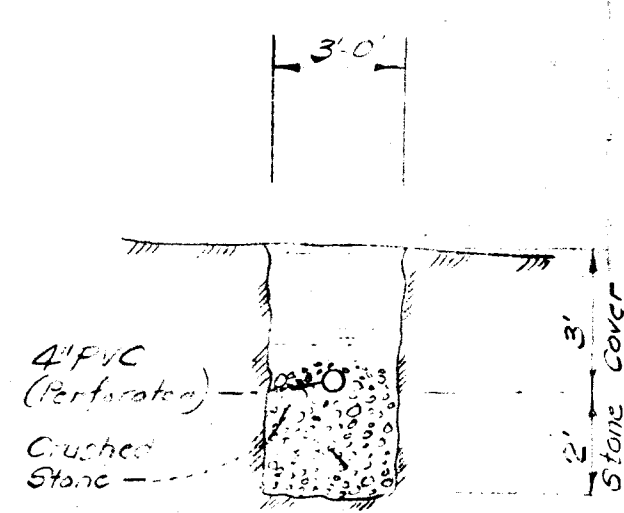
VICINITY MAP
Scale: 1" = 2000'

BENCH MARKS:

N°	Description	Elevation
1	Rebar and Cap (Left Front Property Corner)	574.81
2	Rebar (Traverse Station)	568.16



PLAN SCALE: 1" = 30'



TYPICAL SECTION
SEPTIC TRENCH
1/4" = 1'-0"

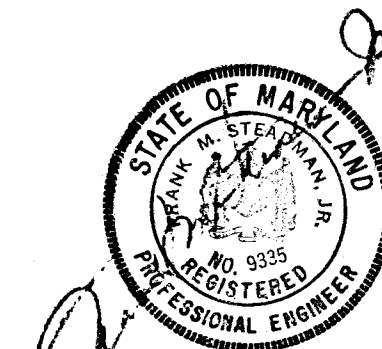
GENERAL NOTES

- This Site is classified as follows:
 - Recorded Plat, #10935, (dated 9-3-93)
 - Property Zoned R-R (9-18-92)
 - Water & Sewer Service by Well & Septic System
 - Site Vegetation, meadow, (former orchard)
 - Site Slopes: SW to NE @ 8%
 - Total Lot Area: 1.2439 Ac.
 - Total Disturbed Area: 15,000 s.f.
 - Proposed Use: Single Family House
- The Topography was field shot in Howard County Datum August 1, 1998.
- No construction may begin until proper permits have been issued.
- Septic System: 4 Bedroom House
1,500 gal. Septic Tank
280 lin. ft. septic recovery trench
- Well 'in place' tested and developed.
- All water service piping to be PVC, Schedule 40.
- All sewer piping to be PVC.

Owner:
Mr. & Mrs. Frederick-Bittner
P.O. Box 27
Dayton, Maryland 21036
(410) 442-2788

LEGEND

- 572--- Existing Contour
- Proposed Contour
- +68.2 Prop Spot Elevation
- 5'-10" Site Fence
- Rebar Mark
- 50.0' Clearcut on Seep/Septic



SITE DEVELOPMENT PLAN
Lot 3
SANBORN PROPERTY
Fifth Election District

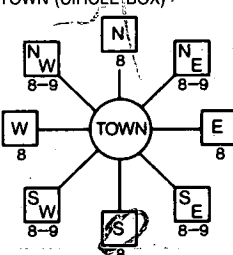

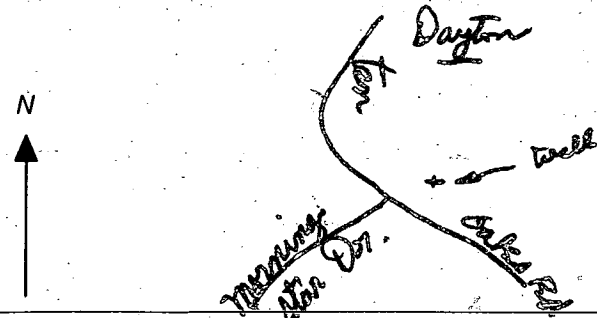
FRANK M STEADMAN ASSOCIATES
ENGINEERS PLANNERS SURVEYORS
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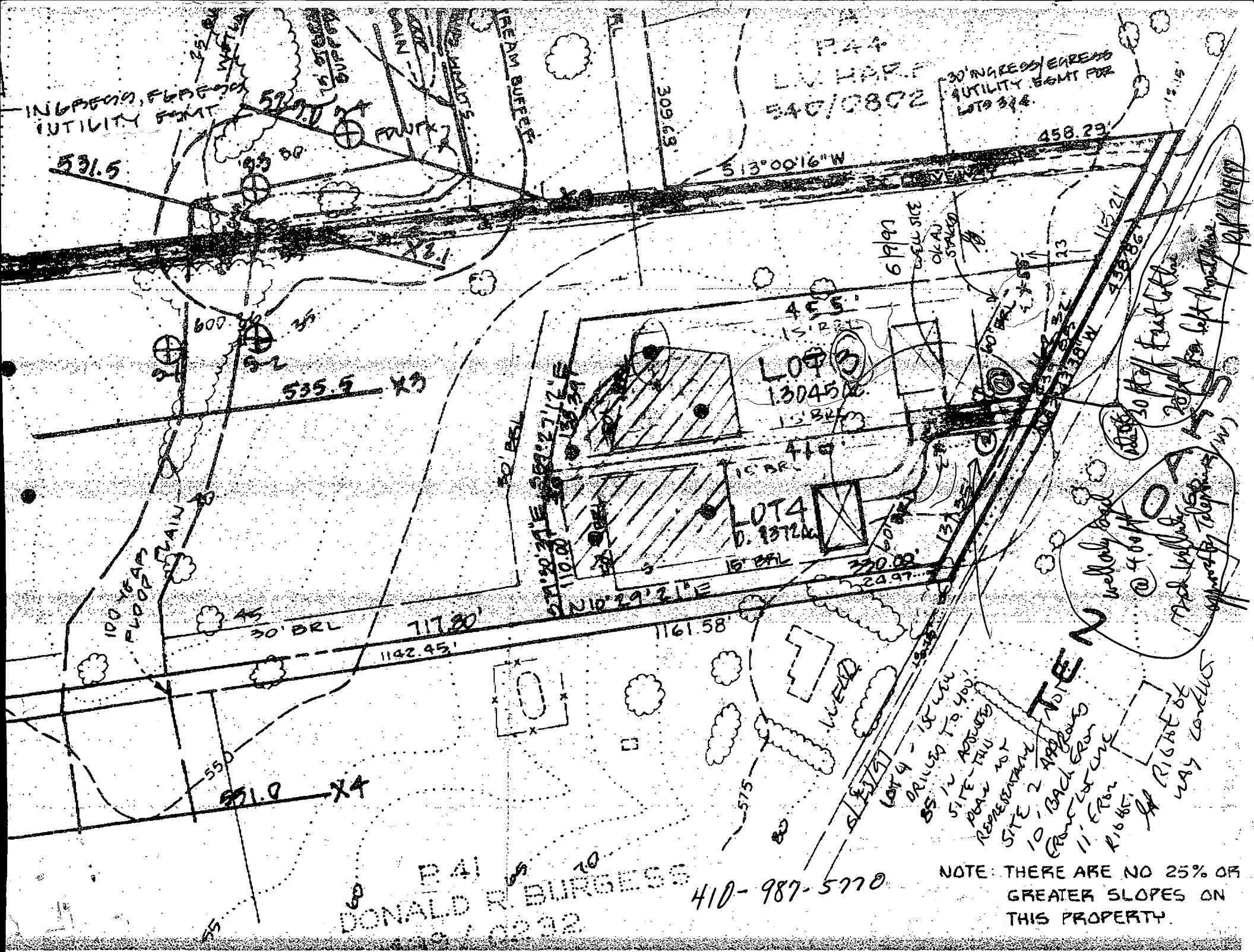
9.22.98

TAX MAP 28

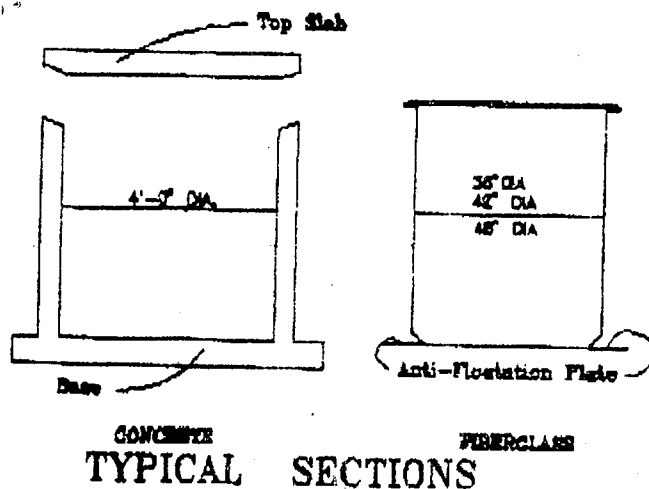
OCT 09 1998

C 1		9789		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.							
1 2 3 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)		DATE WELL COMPLETED MM DD YY 07 14 97				Depth of Well 22 340 26 (TO NEAREST FOOT)				PERMIT NO. FROM "PERMIT TO DRILL WELL" Ho 94 1196							
ST/CO USE ONLY DATE RECEIVED 07-14-97										COUNTY NUMBER A-46863							
OWNER Bittner		Frederick															
STREET OR RFD TEN OAKS RD		TOWN DAYTON															
SUBDIVISION SAND BORN PROPERTY		SECTION				LOT 3											
WELL LOG Not required for driven wells		GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL (Circle one) CEMENT CM BENTONITE CLAY BC NO. OF BAGS 10 NO. OF POUNDS 940 GALLONS OF WATER 60 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 37 ft. (enter 0 if from surface)				C 3 PUMPING TEST HOURS PUMPED (nearest hour) 6 PUMPING RATE (gal. per min.) 2 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 38 ft. WHEN PUMPING 306 ft. TYPE OF PUMP USED (for test) A air P piston T turbine C centrifugal R rotary O other (describe below) J jet S submersible											
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING.		C 2 DEPTH (nearest ft.) 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 110 41 340				PUMP INSTALLED DRILLER WILL INSTALL PUMP (CIRCLE) (YES or NO) YES 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) 31 35 PUMP HORSE POWER 37 41 PUMP COLUMN LENGTH (nearest ft.) 43 47 C 3 C 2 C 1 C 0 C -1 C -2 C -3 C -4 C -5 C -6 C -7 C -8 C -9 C -10 C -11 C -12 C -13 C -14 C -15 C -16 C -17 C -18 C -19 C -20 C -21 C -22 C -23 C -24 C -25 C -26 C -27 C -28 C -29 C -30 C -31 C -32 C -33 C -34 C -35 C -36 C -37 C -38 C -39 C -40 C -41 C -42 C -43 C -44 C -45 C -46 C -47 C -48 C -49 C -50 C -51 C -52 C -53 C -54 C -55 C -56 C -57 C -58 C -59 C -60 C -61 C -62 C -63 C -64 C -65 C -66 C -67 C -68 C -69 C -70 C -71 C -72 C -73 C -74 C -75 C -76 C -77 C -78 C -79 C -80 C -81 C -82 C -83 C -84 C -85 C -86 C -87 C -88 C -89 C -90 C -91 C -92 C -93 C -94 C -95 C -96 C -97 C -98 C -99 C -100											
DESCRIPTION (Use additional sheets if needed)		FEET FROM TO Sand 0 38 Gray Mica Rock 38 340 Dry well 400 ft. Filled in with Cement & drilling materials				C 2 DEPTH (nearest ft.) 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 110 41 340				PUMP INSTALLED DRILLER WILL INSTALL PUMP (CIRCLE) (YES or NO) YES 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) 31 35 PUMP HORSE POWER 37 41 PUMP COLUMN LENGTH (nearest ft.) 43 47 C 3 C 2 C 1 C 0 C -1 C -2 C -3 C -4 C -5 C -6 C -7 C -8 C -9 C -10 C -11 C -12 C -13 C -14 C -15 C -16 C -17 C -18 C -19 C -20 C -21 C -22 C -23 C -24 C -25 C -26 C -27 C -28 C -29 C -30 C -31 C -32 C -33 C -34 C -35 C -36 C -37 C -38 C -39 C -40 C -41 C -42 C -43 C -44 C -45 C -46 C -47 C -48 C -49 C -50 C -51 C -52 C -53 C -54 C -55 C -56 C -57 C -58 C -59 C -60 C -61 C -62 C -63 C -64 C -65 C -66 C -67 C -68 C -69 C -70 C -71 C -72 C -73 C -74 C -75 C -76 C -77 C -78 C -79 C -80 C -81 C -82 C -83 C -84 C -85 C -86 C -87 C -88 C -89 C -90 C -91 C -92 C -93 C -94 C -95 C -96 C -97 C -98 C -99 C -100							
NUMBER OF UNSUCCESSFUL WELLS: 1		WELL HYDROFRACTURED yes Y no N				C 2 DEPTH (nearest ft.) 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 110 41 340				PUMP INSTALLED DRILLER WILL INSTALL PUMP (CIRCLE) (YES or NO) YES 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) 31 35 PUMP HORSE POWER 37 41 PUMP COLUMN LENGTH (nearest ft.) 43 47 C 3 C 2 C 1 C 0 C -1 C -2 C -3 C -4 C -5 C -6 C -7 C -8 C -9 C -10 C -11 C -12 C -13 C -14 C -15 C -16 C -17 C -18 C -19 C -20 C -21 C -22 C -23 C -24 C -25 C -26 C -27 C -28 C -29 C -30 C -31 C -32 C -33 C -34 C -35 C -36 C -37 C -38 C -39 C -40 C -41 C -42 C -43 C -44 C -45 C -46 C -47 C -48 C -49 C -50 C -51 C -52 C -53 C -54 C -55 C -56 C -57 C -58 C -59 C -60 C -61 C -62 C -63 C -64 C -65 C -66 C -67 C -68 C -69 C -70 C -71 C -72 C -73 C -74 C -75 C -76 C -77 C -78 C -79 C -80 C -81 C -82 C -83 C -84 C -85 C -86 C -87 C -88 C -89 C -90 C -91 C -92 C -93 C -94 C -95 C -96 C -97 C -98 C -99 C -100							
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.				C 2 DEPTH (nearest ft.) 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 110 41 340				PUMP INSTALLED DRILLER WILL INSTALL PUMP (CIRCLE) (YES or NO) YES 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) 31 35 PUMP HORSE POWER 37 41 PUMP COLUMN LENGTH (nearest ft.) 43 47 C 3 C 2 C 1 C 0 C -1 C -2 C -3 C -4 C -5 C -6 C -7 C -8 C -9 C -10 C -11 C -12 C -13 C -14 C -15 C -16 C -17 C -18 C -19 C -20 C -21 C -22 C -23 C -24 C -25 C -26 C -27 C -28 C -29 C -30 C -31 C -32 C -33 C -34 C -35 C -36 C -37 C -38 C -39 C -40 C -41 C -42 C -43 C -44 C -45 C -46 C -47 C -48 C -49 C -50 C -51 C -52 C -53 C -54 C -55 C -56 C -57 C -58 C -59 C -60 C -61 C -62 C -63 C -64 C -65 C -66 C -67 C -68 C -69 C -70 C -71 C -72 C -73 C -74 C -75 C -76 C -77 C -78 C -79 C -80 C -81 C -82 C -83 C -84 C -85 C -86 C -87 C -88 C -89 C -90 C -91 C -92 C -93 C -94 C -95 C -96 C -97 C -98 C -99 C -100							
DRILLERS LIC. NO. 1 M-SD024		DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)				LIC. NO. 1 M-D				C 2 DEPTH (nearest ft.) 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 110 41 340				PUMP INSTALLED DRILLER WILL INSTALL PUMP (CIRCLE) (YES or NO) YES 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) 31 35 PUMP HORSE POWER 37 41 PUMP COLUMN LENGTH (nearest ft.) 43 47 C 3 C 2 C 1 C 0 C -1 C -2 C -3 C -4 C -5 C -6 C -7 C -8 C -9 C -10 C -11 C -12 C -13 C -14 C -15 C -16 C -17 C -18 C -19 C -20 C -21 C -22 C -23 C -24 C -25 C -26 C -27 C -28 C -29 C -30 C -31 C -32 C -33 C -34 C -35 C -36 C -37 C -38 C -39 C -40 C -41 C -42 C -43 C -44 C -45 C -46 C -47 C -48 C -49 C -50 C -51 C -52 C -53 C -54 C -55 C -56 C -57 C -58 C -59 C -60 C -61 C -62 C -63 C -64 C -65 C -66 C -67 C -68 C -69 C -70 C -71 C -72 C -73 C -74 C -75 C -76 C -77 C -78 C -79 C -80 C -81 C -82 C -83 C -84 C -85 C -86 C -87 C -88 C -89 C -90 C -91 C -92 C -93 C -94 C -95 C -96 C -97 C -98 C -99 C -100			
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		TELESCOPE CASING				LOG INDICATOR				OTHER DATA							

B 1 9422 1 2 3 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER H0 - 94 - 1196 <small>70 fill in this form completely 79</small>
Date Received (APA) 5/23/97 8 MM DD YY 13 15 <u>Bittner</u> Last Name Owner <u>Frederick</u> First Name 34 36 <u>615 Soplard Dr.</u> Street or RFD 55 57 <u>Crownsville Md.</u> Town 70 <u>21032</u> State 72 Zip 76		B 3 LOCATION OF WELL 8 <u>Howard</u> COUNTY 21 23 <u>Sanborn Property</u> SUBDIVISION 42 SECTION <u>44</u> LOT <u>3</u> 44 46 48 50 52 <u>Dayton</u> NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) <u>0</u> M I 73 76 77 78	
DRILLER INFORMATION 76 <u>Joseph L. Mayne</u> Driller's Name License No. 81 <u>MSD 024</u> 76 <u>Joseph L. Mayne</u> Firm Name <u>Will Drilling</u> 76 <u>5512 Ridge Rd. Mt. Airy Md. 21771</u> Address 76 <u>Joseph L. Mayne</u> Signature Date <u>5/23/97</u>		B 4 1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  11 <u>Ten Oaks Road</u> NEAR WHAT ROAD 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  34 <u>50</u> DISTANCE FROM ROAD ENTER FT OR MI 38 39 <u>FT</u> TAX MAP: _____ BLK: _____ PARCEL: _____	
B 2 WELL INFORMATION 1 2 APPROX. PUMPING RATE <u>5</u> (GAL. PER MIN.) 8 12 AVERAGE DAILY QUANTITY NEEDED <u>500</u> (GAL. PER DAY) 14 20		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL <u>HOWARD</u> COUNTY NAME <u>A-46863</u> COUNTY NO. STATE SIGNATURE _____ INSERT S → 41 DATE ISSUED <u>6/10/97</u> <u>Ed. J. [Signature]</u> CO SIGNATURE <u>6/10/97</u> EXP. DATE 43 MM DD YY 48 NORTH GRID <u>510 000</u> EAST GRID <u>805 000</u> 50 55 57 63	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) 22 <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="checkbox"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE APPROVAL) <input type="checkbox"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X <u>6/23/97</u> SOURCES OF DRILLING WATER 1. <u>WELL</u> 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE E <u>805</u> N <u>510</u> 000 000 X DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
APPROXIMATE DEPTH OF WELL <u>300</u> FEET 24 28 APPROXIMATE DIAMETER OF WELL <u>6</u> INCH 30 37 METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jetted & DRIVEN 30 <u>AIR-ROTARY</u> AIR-PERCussion ROTARY (Hydraulic Rotary) 37 <u>CABLE</u> REVERSE-ROTARY DRIVE-POINT other _____		REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="checkbox"/> THIS WELL WILL DEEPEIN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) 41 _____ 52	
Not to be filled in by driller (MDE OR COUNTY USE ONLY)			
APPROX. PERMIT NUMBER <u>65</u> G A P <u>63</u> 54 63 FORCE <u>65</u> WRITE INITIALS IN BOX PERMIT No. <u>H0 - 94 - 1196</u> 67 68 70 71 72 73 74 75 76 77 78 79			
SPECIAL CONDITIONS NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -			



FUTURE WET WELL



Saturday, September 26, 1998

Stephen Melat,

The above is a quick detail for the "FUTURE WET WELL" that is shown on the Site Plan for the Bittner Site (Lot 3, Sanborn Property). I suspect that the Howard County Health Department will want to have some idea as to how we are going to install **NOW**, the new well and still pass the effluent pipe from the Septic Tank to the Distribution Box at the drain field.

The smallest that the Concrete Wet Wells are made, is 48" in dia. The Fiberglass wells (provided by these pump manufacturers) come in sizes from 36" dia., to 42" dia., to 48" dia. See Typical Sections above.

As I envision it, the 4" dia. PVC pipe will pass through the wet well, from side to side, (utilizing the invert elevations shown on the plan). It will be just a little bit of drilling in the wet well walls, to accommodate the installation.

If they want the pump system designed for this approval, I would be happy to do the design. I only showed the fundamental items for each type. The Concrete is the Pre-cast 4' deep manhole, manufactured and supplied by many local concrete pipe manufacturers. It comes with its own concrete top slab. The Fiberglass would require that a concrete **Anti-Floatation** slab of concrete be poured around the base. AND, I would specify a certain supplier and size for you.

Please let me know if there are any questions or serious comments when you meet with that Health Department People. I will revise as necessary.