

Tax ID - 03-288765

PERMIT**SEWAGE DISPOSAL SYSTEM****DEPARTMENT OF HEALTH AND MENTAL HYGIENE**

P 47786

A 20341

DISTRICT 3rd

DATE 1/31/92

DATE SYSTEM APPROVED 2/6/92

INSPECTOR M. Rittke

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
401-6833**INDEXED**

Cornwell Plumbing & Heating

IS PERMITTED TO INSTALL ☒ ALTER

ADDRESS 12196 Triadelphia Road, Ellicott City, Maryland 21042 PHONE 988-9221

SUBDIVISION LOT 5 ROAD 11830 Triadelphia Road

PROPERTY OWNER Steve Weinstein (Maggio Homes)

ADDRESS

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 210

AND RETURNED 10/6/96

Serial # B00102500
ducks**TRENCHES** - Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 4 feet below original grade. Minimum of 4 feet of stone below distribution pipe.**LOCATION** - Place distribution box 200 feet from front property line and 20 feet from right property line. Run trenches along contour toward left property line. **NOTE:** FIRST TRENCH SHOULD BE SITED AS CLOSE TO, BUT NO CLOSER THAN, A 100 FOOT RADIUS MEASURED FROM WELL (Tag Number: HO-88-1953) ON THIS PROPERTY.**NOTE** - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanser and cap to grade or above on septic tank. 11/22/92 RV

PLANS APPROVED BY Ronald J. Pinkley, R. S.

DATE 8/30/91

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 3540 PVC OR ABS

PERMIT VOID AFTER TWO YEARS

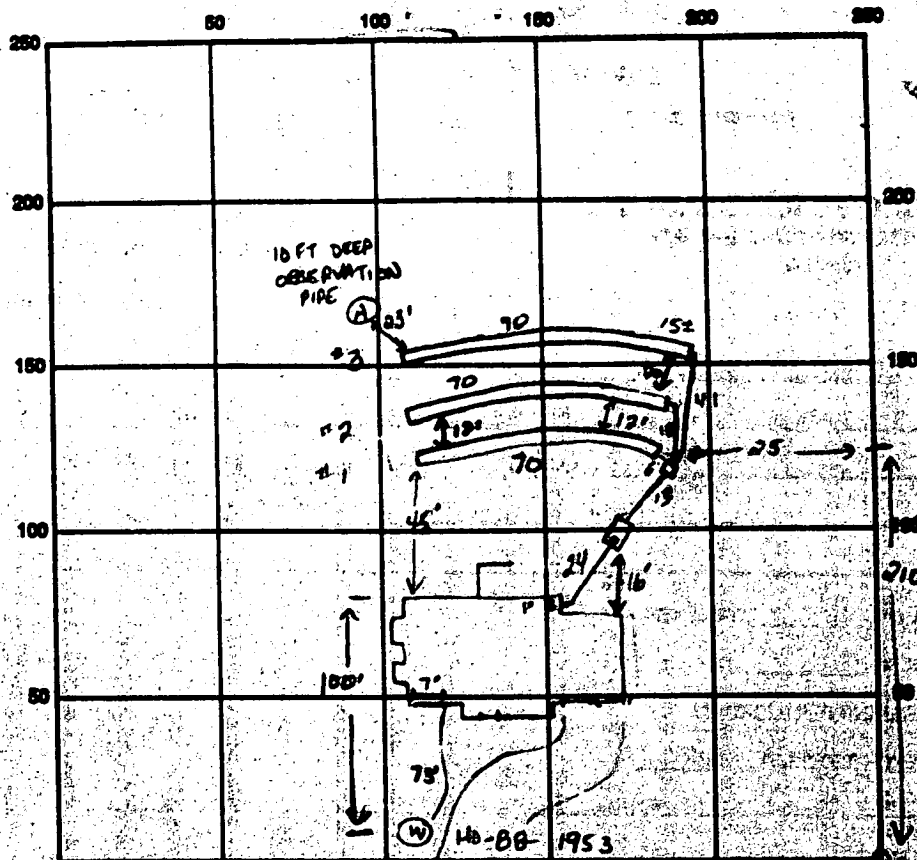
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON, CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED.**NOTE:** DISTRIBUTION BOXES MUST HAVE BAFFLES***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

HD-280(5-87)

*CALL 401-6833 FOR INSPECTION OF SEPTIC SYSTEM

P 47786

20341



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

Triadelphia Road

Property Corner

SEPTIC TANK LEVEL 1520 galCLEANOUTS 1 on septic tankDISTRIBUTION BOX LEVEL OK - BAFFLE INDRAIN FIELD TITLE DEPTH 85 80 85 FT.TRENCH WIDTH 2 FT.INLET DEPTH 4 4 25 FT.EFFECTIVE GRAVEL DEPTH 4 4 4 FT.TOTAL LENGTH 10' 10' 10 FT.NUMBER OF TRENCHES 3ONE SIDEWALL BOTTOM AREA 280 280 280 SQ. FT.DRYWALL INSIDE DIAMETER FT.EFFECTIVE DEPTH BELOW INLET FT.ABSORBENT AREA 560 SQ. FT.

REMARKS: 2-4-92 OK to stone trench #1 leaving ends open for inspection. JEN
2-4-92 OK to stone trench #1 & first 24 ft of #2. JEN. 2-5-92 OK to stone
trench #2. Leave observation pipe in test pit A for future monitoring. JEN/CW
2-4-92 OK to stone all trenches JEN 2/6/92 #1 OK TO COVER TRENCH (1)
FINISH STONE + PIPE ON (2) + (3) MR 2/6/92 #2 OK TO COVER
ALL MR

DATE SYSTEM APPROVED

2/6/92

INSPECTOR

M. Rifkin

APPLICATION

PRELIMINARY

A 20341

SEWAGE DISPOSAL TESTING

P _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 469-3000, EXT. 336

DISTRICT 301

DATE 7/12/74

*3 bedrooms - 600 gallons
4 bedrooms - 1250 gallons
Dry well to have 120 square feet effective
about sidewalk area for bedroom below inlet. Inlet to be
4 feet below original grade and 9 ft. depth 12 feet.
Location: 24 ft from left property line and 196 ft from
rear property line when facing lot from Triadelphia*

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 ~~Ferdinand Kelly property~~ Steve Weinstein

ADDRESS 415 Oak Forest Avenue, Baltimore, Md. 21228 PHONE 577-5436
889-2613 (office)

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. S

ROAD AND DESCRIPTION 11P80 Triadelphia Road off Route 144 - almost across from Evergreen
Valley Estates

SIZE OF LOT 1.248 acres ± TYPE BLDG. 3 or 4 bedrooms

IF NOT SINGLE RESIDENCE DESCRIBE _____ NUMBER OF BEDROOMS

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC
FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ Ferdinand Kelly

✓ APPROVED BY *Harry Jay Zhan* FOR *Dry well* DATE 8/7/74

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

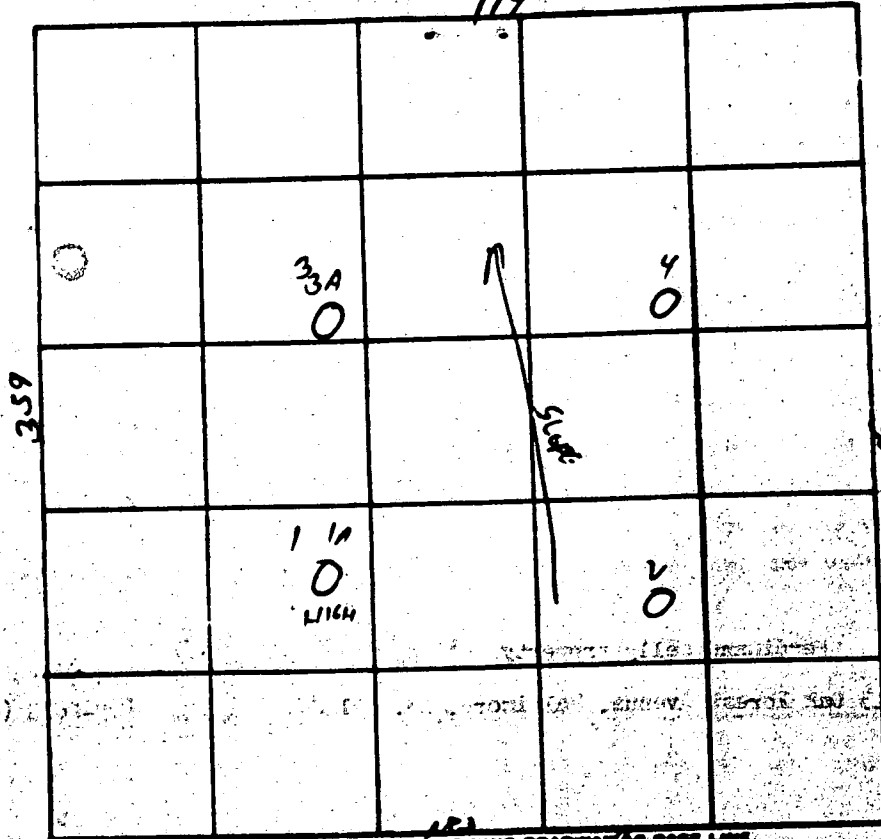
REASONS FOR REJECTION OR HOLDING _____

BLDG. PERMIT SIGNED
AND RETURNED 12/12/74
Shula 4037 - SFD
SFD - 4 Bedrooms

THIS IS NOT A PERMIT

174

20341



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2/17/74	1	12'	135	137	137	148	5
↑	1A	4'	135	137	137	144	7
	4	12'	130	133	133	139	6
	3	12'	115	120	120	127	7
	3A	4'	115	121	121	130	9
2/18/74	2	12'	LSUA	SAVE			

REMARKS

certify all holes

TYPE OF SOIL

Sandy Loam

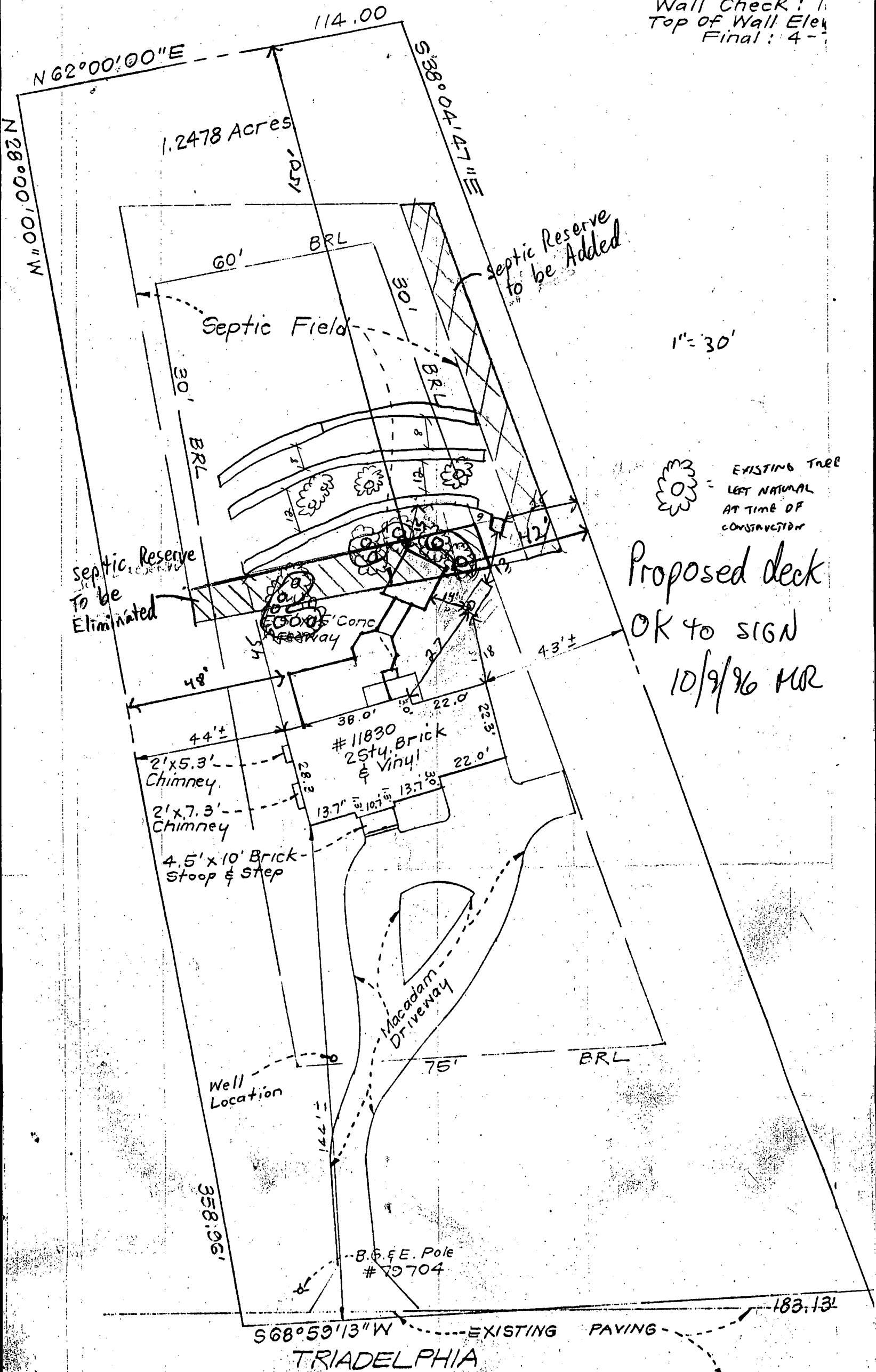
TESTED BY

H. J. [Signature]

ALSO PRESENT:

[Signature]

Wall Check: 1/
Top of Wall Elev
Final: 4-



TRIADDELPHIA

C1 4615 SEQUENCE NO. (DENY USE ONLY)

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-8 ON ALL CARDS)

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 NUMBER A 20341

ST/CO USE ONLY
DATE RECEIVED

DATE WELL COMPLETED

Depth of Well

PERMIT NO.
FROM "PERMIT TO DRILL WELL"

OWNER Kelly Mack

STREET OR RFD

SUBDIVISION FERDINAND KELLY PROP SECTION

TOWN Mayfield

LOT

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 2
Sandy 2 45
SANDSTONE 45 50
MICKA 50 65
SANDSTONE 65 70
MICKA 70 85

Case 58
open 40'
Count 16 bags
RPB 27-91
8.5 gpm / 34 psi test

GROUTING RECORD

WELL HAS BEEN GROUTED

(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL

CEMENT

BENTONITE CLAY

NO. OF BAGS

NO. OF POUNDS

GALLONS OF WATER

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 10 ft.

Casing types insert appropriate code below

CASING RECORD

ST CO
STEEL CONCRETE
PL OT
PLASTIC OTHER

MAIN CASING TYPE

Nominal diameter top (main) casing (nearest inch)

Total depth of main casing (nearest foot)

PL

4

58

OTHER CASING (if used)

diameter (nearest inch) depth (feet) from to

screen type or open hole insert appropriate code below

SCREEN RECORD

ST BR HO
STEEL BRASS OPEN HOLE
PL PL OT
PLASTIC OTHER

C2 EACH SCREEN

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

SLOT SIZE

DIAMETER OF SCREEN (NEAREST INCH)

GRAVEL PACK

IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

O&P USE ONLY (NOT TO BE FILLED IN BY DRILLER)

T (E.R.O.S.) W O
70 72 74 75 76
TELESCOPE CASING LOG INDICATOR OTHER DATA

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)

A P T
Diaphragm Plunger Turbine

C R O
Centrifugal Rotary Other (describe below)

J S
Jet Submersible

DRILLER WILL INSTALL PUMP

(CIRCLE) (YES OR NO)

IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE

TYPE OF PUMP INSTALLED

PLACE (A.C./P.R./S.T.O.)

IN BOX - SEE ABOVE

CAPACITY:

GALLONS PER MINUTE

(to nearest gallon)

PUMP HORSE POWER

PUMP COLUMN LEAK 3TH

(nearest ft.)

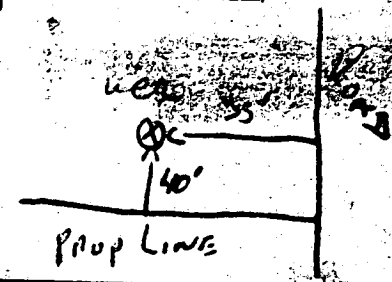
CASING HEIGHT (circle appropriate box and enter casing height)

LAND SURFACE

(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)



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.

DRILLERS IDENT. NO. 273
DRILLERS SIGNATURE Kelly Mack

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

COUNTY