

11/21/89
11/21/89 AM
11/22/89 P.S.R.P. P.M.

05-404797

11/21/89 P.C.O.'s
C.B.C.

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

P 457P2

A 37245

DISTRICT 5th

DATE 11/6/89

DATE SYSTEM APPROVED 11/22/89

INSPECTOR C.B.C.

INDEXED

Jack Fyock

IS PERMITTED TO INSTALL ALTER

ADDRESS _____ PHONE 988-9270

SUBDIVISION Thistledown ROAD 7017 Woodscape Drive LOT 4

PROPERTY OWNER Dr. Tadikonda Ramamurthy

ADDRESS _____

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES NO

SEPTIC TANK CAPACITY 2000 GALLONS NUMBER OF BEDROOMS 5

TRENCHES - 220 sq. ft. per bedroom with garbage disposal. Trench to be ² feet wide. Inlet 3.0 feet below original grade. Bottom maximum depth 8.5 feet below original grade. Effective area begins at 3.0 feet below original grade. 5.5 feet of stone below distribution pipe. C.B.C.

LOCATION - Place the distribution box 220 feet down the front (272') lot line and 70 feet off the front lot line as seen when facing the lot from the right-of-way off Woodscape Drive. Run trenches on contour toward the front left lot corner.

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

11/21/89 Visual hole 13" - D.T.F. - Dry at lowest point of S. System in area of #3 Trench. C.B.C.

PLANS APPROVED BY Sid Abel DATE 1/09/87

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

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 TRENCHES ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCHES)

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 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 PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED

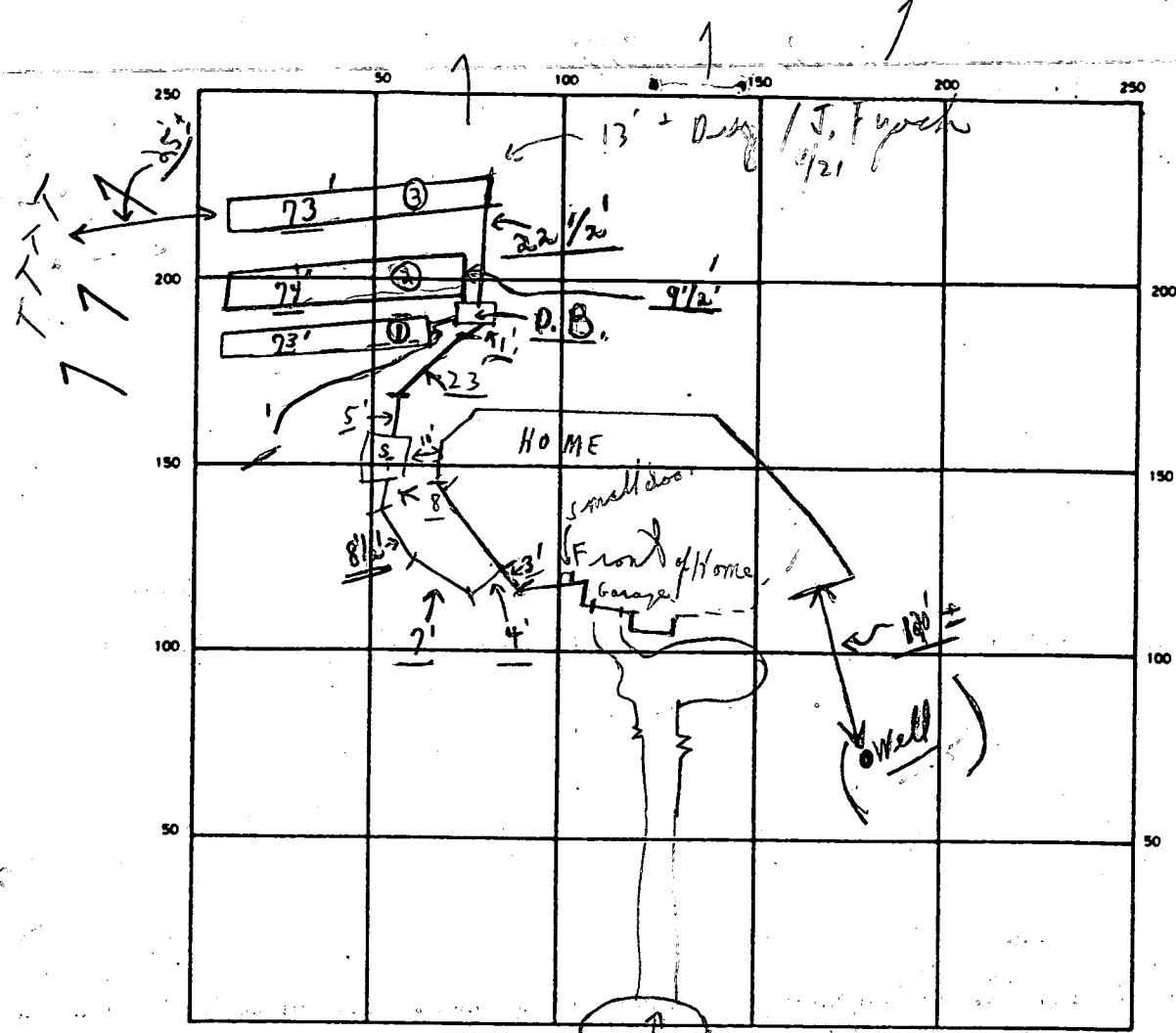
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

LOG. PERMIT SIGNED
AND RETURNED 11/27/89
Serial # 30643 - purple

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

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

A 37245



SEPTIC TANK LEVEL OK CLEANOUTS S.T. OK

DISTRIBUTION BOX LEVEL OK (Baffle is in)

DRAIN FIELD/TILE FIELD DEPTH 8 1/2 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 5 1/2 + FT. TOTAL LENGTH 73' + 74' + 73' = 220 FT.

NUMBER OF TRENCHES 3 ONE SIDEWALL AREA 1,210 + SQ. FT.

DRYWELL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA 1210 + SQ. FT.

REMARKS 11/21/89 A.M. Partial - ok to cover from house to 1' of distribution box - only. Trench #3 dug - 39' + 8 1/2' deep average. C.B.S. 11/21/89 P.M. Part #2 Trench 74' OK TO COVER #2 + #3 completely and back from #3 to dist. box. Need to see #1 Trench 73' long and at dist. box. Hold for call 11/22/89; 11/21/89 OK to finish or cover trench #1 as they finish. Final.

DATE SYSTEM APPROVED 11/22/89 INSPECTOR Charles Bryan Street

C1 **0325**
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 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 37245**

DATE Received [] [] [] [] [] [] [] []
 DATE WELL COMPLETED **082587**
 Depth of Well **300** (TO NEAREST FOOT)
 PERMIT NO. FROM "PERMIT TO DRILL WELL" **HC-81-0229**

OWNER **ASSOCIATES LILLEY**
 STREET OR RFD **WOODSCAPES DRIVE** TOWN **CLARKSVILLE**
 SUBDIVISION **THISTLE DOWN** SECTION [] LOT **4**

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		Check if water bearing
	FROM	TO	
Topsoil	0	2	
Soft Yellow Mica	2	65	
Hard Brown Mica	65	110	✓
Broken Quartz	110	115	✓
Grey Mica	115	182	✓
Dark Green Mica	182	300	✓

GROUTING RECORD
 WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**
 TYPE OF GROUTING MATERIAL
 CEMENT **CM** BENTONITE CLAY **BC**
 NO. OF BAGS **15** NO. OF POUNDS **1500**
 GALLONS OF WATER **75**
 DEPTH OF GROUT SEAL (to nearest foot)
 from **0** ft. to **44** ft.
 (enter 0 if from surface)

CASING RECORD
 casing types insert appropriate code below
ST CO STEEL CONCRETE
PL OT PLASTIC OTHER
 MAIN Nominal diameter. Total depth
 CASING top (main) casing of main casing
 TYPE (nearest inch) (nearest foot)
ST **1** **73**

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

screen type or open hole insert appropriate code below
ST BR HO STEEL BRASS OPEN HOLE
PL OT PLASTIC OTHER

C 2
 DEPTH (nearest ft.)
 EACH SCREEN
 1 **H O** **71** **300**
 2 [] [] [] [] [] []
 3 [] [] [] [] [] []
 SLOT SIZE 1 2 3
 DIAMETER OF SCREEN [] (NEAREST INCH)
 from [] to []

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 10.17.13 "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.

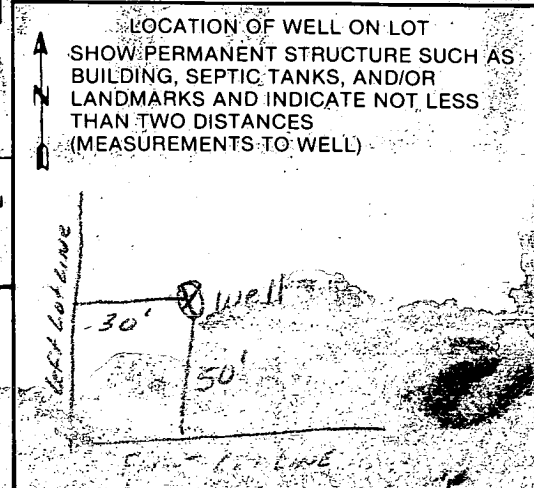
DRILLERS IDENT. NO. **40**
 DRILLERS SIGNATURE *Henry J. G... [Signature]*
 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee) *[Signature]*

GRAVEL PACK
 IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)
 T (E.R.O.S.) WQ
 70 [] 72 [] 74 [] 75 [] 76 []
 TELESCOPE LOG OTHER DATA
 CASING INDICATOR

C 3
PUMPING TEST
 HOURS PUMPED (nearest hour) **3**
 PUMPING RATE (gal. per min. to nearest gal.) **15**
 METHOD USED TO MEASURE PUMPING RATE **Bucket**
 WATER LEVEL (distance from land surface)
 BEFORE PUMPING **35**
 WHEN PUMPING **77**
 TYPE OF PUMP USED (for test)
A air **P** piston **T** turbine
C centrifugal **R** rotary **O** other (describe below)
J jet **S** submersible

PUMP INSTALLED
 DRILLER WILL INSTALL PUMP YES **NO**
 (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,J,P,R,S,T,O) IN BOX - SEE ABOVE: **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 (nearest foot)
- below } **2** (nearest foot)



B 1 2279 SEQUENCE NO. (OEP USE ONLY)
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND PERMIT TO DRILL WELL

please print or type

OEP PERMIT NUMBER

40-81-2225 fill in this form completely

Date Received

8 13

OWNER INFORMATION

LILLY ASSOCIATES

9502 WINNANTS RD

DIKESVILLE MD 21208

DRILLER INFORMATION

George F. Easterday Driller's Name AD 77 License No. 80

L. Franklin Easterday, Inc. Firm Name
9265 Br. Ch. Rd., Mt. Airy, Md. 21771

Henry F. Easterday Signature 7/1/87 Date

B 3

LOCATION OF WELL R-39667

HOWARD COUNTY

THISTLE DOWN SUBDIVISION

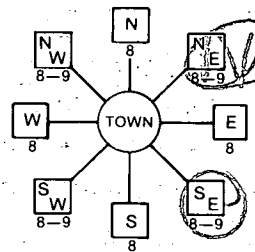
SECTION 44 46 LOT 48 50

CLARKSVILLE NEAREST TOWN

MILES FROM TOWN (enter 0 if in town) 4 MI

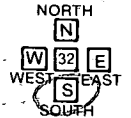
B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



WOODSAGE DR NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



100 DISTANCE FROM ROAD

ENTER FT or MI FT

B 2

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 5

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- [D] HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
[F] FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
[T] INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
[P] PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
[T] TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard COUNTY NAME A37245 COUNTY NO.

OEP SIGNATURE DATE ISSUED STATE HEALTH INSERT S

081087 B. Nixen 02/10/88

NORTH GRID 491000 EAST GRID 0823000

APPROXIMATE DEPTH OF WELL 200 FEET

APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH

METHOD OF DRILLING (circle one)

- BORED (or Augered) JETTED Jetted & DRIVEN
AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)
CABLE REVERSE-ROTARY DRIVE-POINT
other

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

- [N] THIS WELL WILL NOT REPLACE AN EXISTING WELL
[S] THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
[S] THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
[D] THIS WELL WILL DEEPEN AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)

Not to be filled in by driller (OEP USE ONLY)

APPROX. PERMIT NUMBER GAP

FORCE INITIALS PERMIT No. 40-81-2225

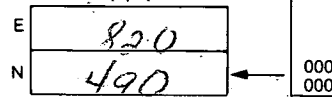
SPECIAL CONDITIONS

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

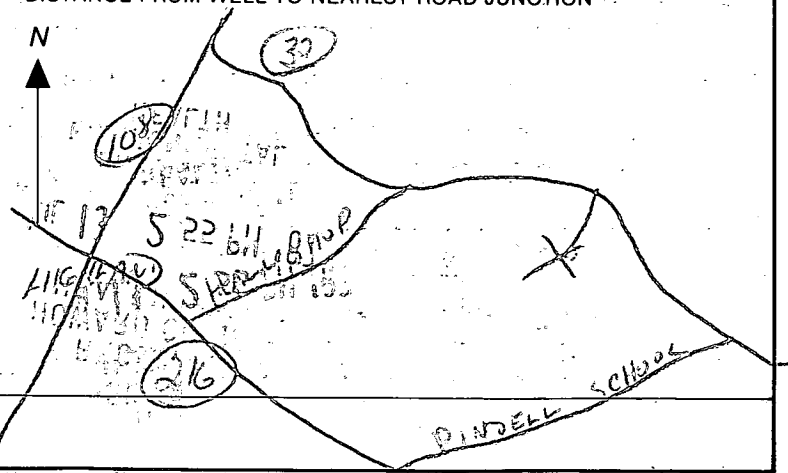
SOURCES OF DRILLING WATER

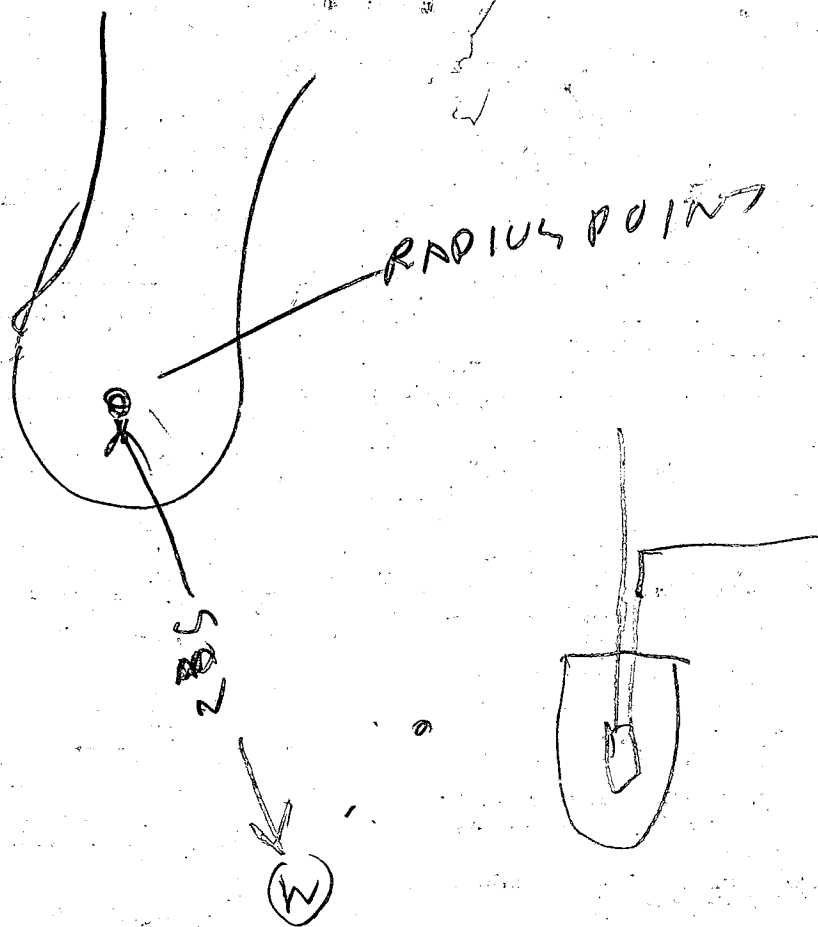
- 1. WELL
2.
3.

WRITE THE BOX NUMBER FROM THE MAP HERE



DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION





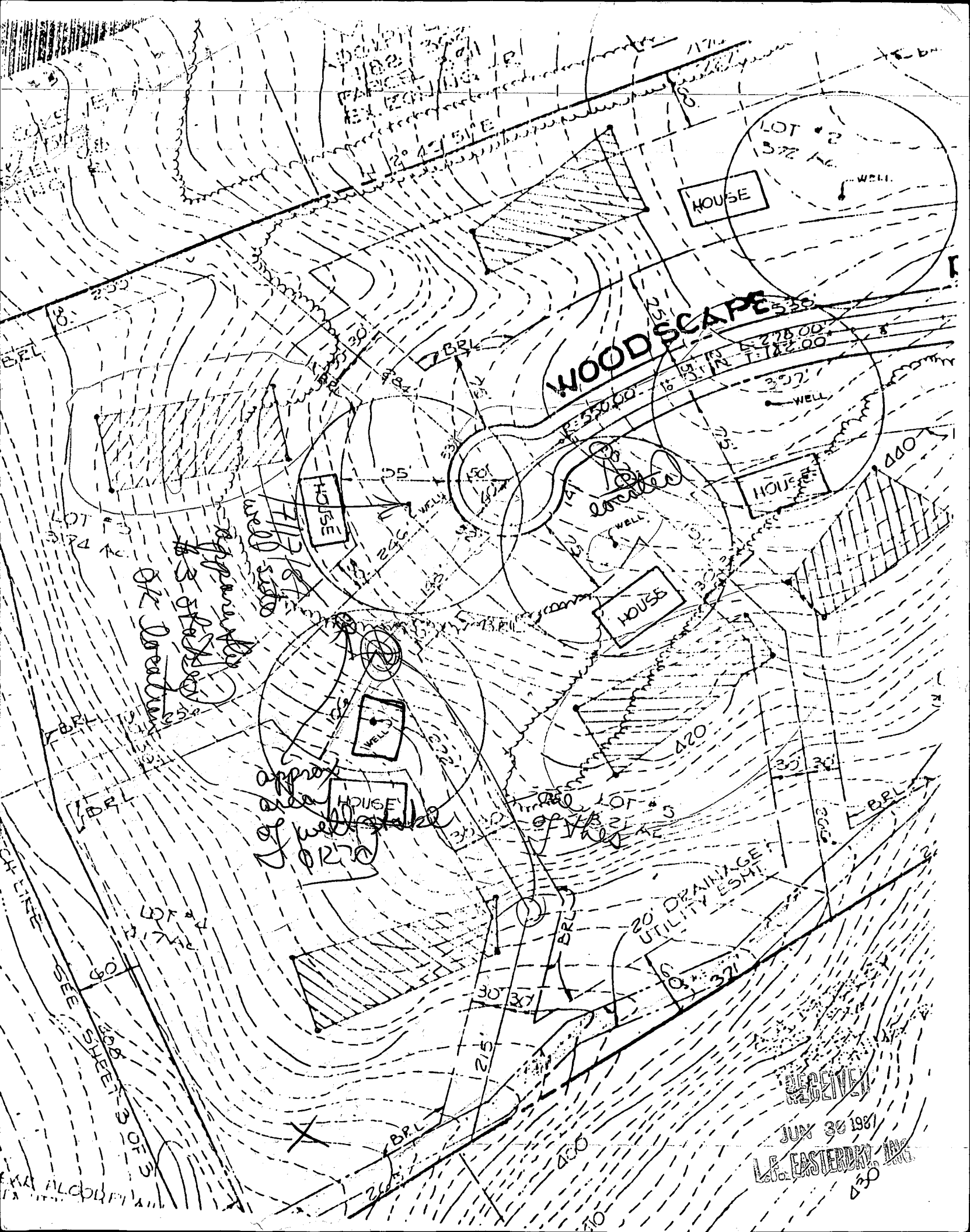
2/25/87 10:35 PM

- ① LOCATION OK
- ② GROUT TRUCK NOT HERE
- ③ 46 1/2 FT OPEN HOLE
- ④ 75 FT CASING

RECEIVED
 HOWARD COUNTY
 HEALTH DEPT.
 APR 13 2 55 PM '87

RECEIVED
 HOWARD COUNTY
 HEALTH DEPT.

Mr. Lilly Engineer
 & Basterday Grouter
 also present



1882
PARCEL
1714
20 45 51 E

HOUSE

LOT #2
372 AC
WELL

WOOD SCAPE

275.00
172.00

HOUSE

HOUSE

HOUSE

HOUSE

approx area of well
DR 270

approx area of well
DR 270

20' DRAINAGE UTILITY ESMT

RECEIVED

JUN 30 1981

L.P. EASTBERRY

830

SEE SHEET 3 OF 3

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 37245

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

P. O. BOX 473 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT _____

DATE 6/25/86

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 Estate of Grace E. Iager DR. PADIKONDA RAMAMURTHY - 847-1229
c/o Tom Lloyd
ADDRESS Lloyd, Kane and Wieder 2716 Court Place PHONE _____
Ellicott City, Maryland 21043

PROPERTY LOCATION:

SUBDIVISION Thistledown LOT NO. 4 on Prelim.
7 Combined w/ 4

ROAD AND DESCRIPTION South Guilford Road between Hall Shop and Pindell School Road
7017 WOODSCAPE DRIVE

SIZE OF LOT 3.2 acres TYPE BLDG. residential
(NUMBER OF BEDROOMS)

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.

[Signature]
(SIGNATURE OF APPLICANT)

APPROVED BY Sidney Abel FOR Bellow tele field DATE 1-9-87

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 7/10/86 PERC SATISFACTORY; SHALLOW S.S.; HOLD FOR SUBDIVISION
PLAT. S. Abel

BLDG. PERMIT SIGNED
AND RETURNED 12-19-88

BP 23041
SA

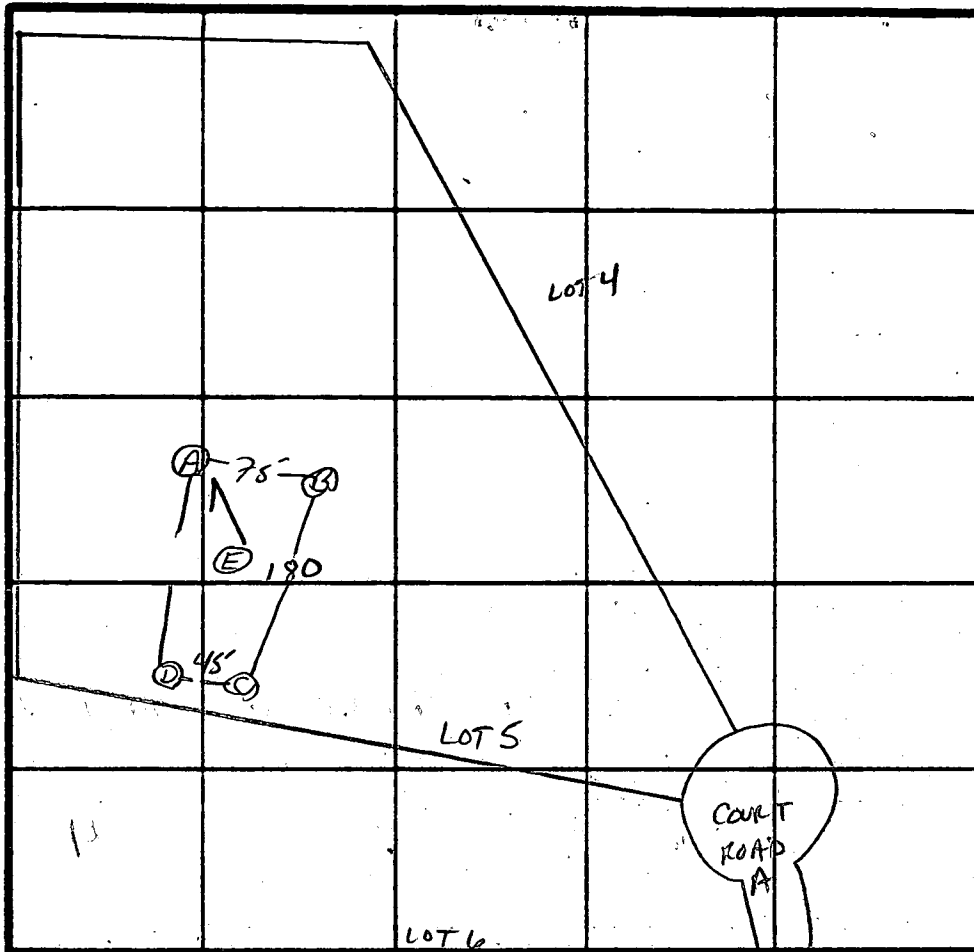
THIS IS NOT A PERMIT

SOIL PROFILE

0
4"
3'
12.5'

A1-3
YELLOW BK
SANDSILT
LOAM 49%
CLAY, 11%
FRAGMENTS

YELLOW BK
SILTY SAND
10%
FRAGMENTS



X Perc
3min
180 A/BR
INLET 3.5
BOTTOM 5.0'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

RE 32

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
7/18/86	C M	3.5	10:30	10:31	10:31	10:32	1min
		9	10:30	10:31	10:31	10:32	1min
	C V	12.5'	uniform soil below 3'				
	A S	4' 13'	10:37	10:38	10:38	10:39	1min
	B S	3.5' 13'	10:45	10:48	10:48	10:56	8min
	D S	4' 13'	10:33	10:34	10:34	10:35	1min
	E V	13'	SAME AS HOLE C				

REMARKS Holes Dog Perc PLAT

TYPE OF SOIL Glenelg LOAM

TESTED BY S. Abel

ALSO PRESENT MARK, Allan BULLOCKE

EIM 12 10/8

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 37245

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

P. O. BOX 473 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT _____

DATE 6/25/86

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 Estate of Grace E. Iager

c/o Tom Lloyd

ADDRESS Lloyd, Kane and Wieder 2716 Court Place PHONE _____
Ellicott City, Maryland 21043

PROPERTY LOCATION:

SUBDIVISION Thistledown LOT NO. 4 on Parcel
7

ROAD AND DESCRIPTION South Guilford Road between Hall Shop and Pindell School Road.

7017 Woodscape Dr.

SIZE OF LOT 3.2 acres TYPE BLDG. residential
(NUMBER OF BEDROOMS)

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.

[Signature]
(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

SOIL PROFILE

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	

REMARKS _____

TYPE OF SOIL _____

TESTED BY _____ ALSO PRESENT _____

EH-12 10/9

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 37244
P _____

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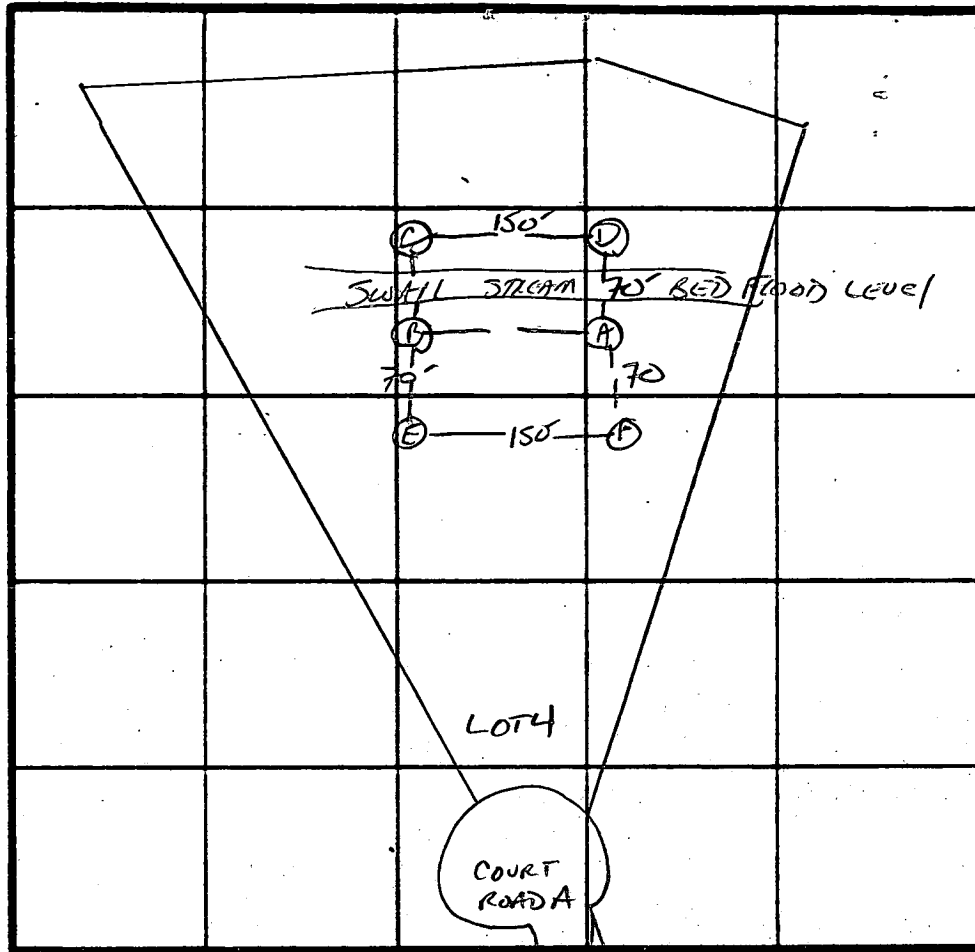
REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 7-18-86 Rec. Unsatisfactory, insufficient area remaining to test. S. Abel

THIS IS NOT A PERMIT

SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Rt 32

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
7/18/86	BV	WATER TABLE AT 6' PL	GROSS MOTTLING AT 3.5'					
	FV	NO WATER; SOIL WET AT BOTTOM-						

REMARKS NO AREA UPHILL WITHOUT ELIMINATING HOUSE SITE

TYPE OF SOIL COMOS / SANDY CLAY

TESTED BY S. ADW ALSO PRESENT MARK ALLEN BODINHOE

EH-12 10/9

APPLICATION

SEWAGE DISPOSAL TESTING

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(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

SOIL PROFILE

0

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

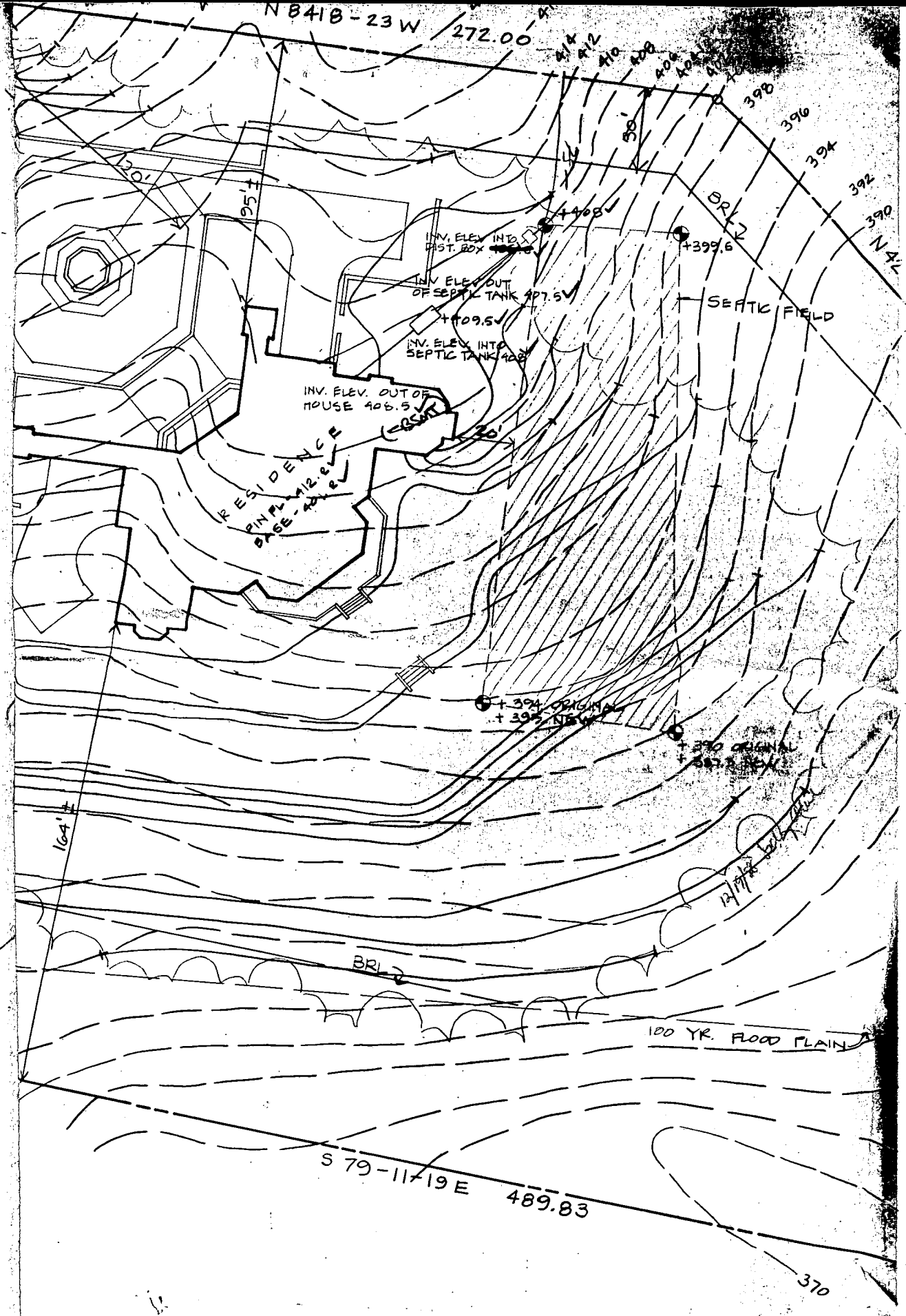
DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	

REMARKS _____

TYPE OF SOIL _____

TESTED BY _____ ALSO PRESENT _____

EP-12 10/9



N 84 1/2 - 23 W

272.00

SEPTIC FIELD

RESIDENCE
DRIVE

INV. ELEV. OUT OF
HOUSE 406.5

INV. ELEV. INTO
PAST. BOX 405.0

INV. ELEV. OUT
OF SEPTIC TANK 407.5

INV. ELEV. INTO
SEPTIC TANK 408

100 YR. FLOOD PLAIN

S 79 - 11 1/2 E

489.83

370

164'

95'

120'

BR 12

12/17/78 J. L. [Signature]