

4/27/85
H.S.A.P. 1 PM

PERMIT

8-2785
approved
Shel

P 35911
A 35502
35220

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

05-391342

ELLICOTT CITY

DISTRICT _____

DATE 8/26/85

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH

INDEXED

Fogle Septic Cleaners

IS PERMITTED TO INSTALL ☒ ALTER _____

ADDRESS 1115 Streaker Road, Sykesville, Maryland 21784 PHONE 795-5670

SUBDIVISION Ken Warfield Property ROAD 4150 Ten Oaks Road LOT 7

PROPERTY OWNER Sullivan

ADDRESS _____

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%. 531-2721

GARBAGE GRINDER? YES _____ NO ☒

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 3 3/4

TRENCHES - 158 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet ☒ feet below original grade. Bottom maximum depth ☒ feet below original grade. Effective area begins at ☒ feet below original grade. 5 feet of stone below distribution pipe.

LOCATION: Start first trench 385 feet from EAST (494.7') lot line and 160 feet from SOUTH (604.2') lot line. Run trench along level ground toward South lot line. NOTE: No trench to exceed 100 feet in length. If more than one trench used, a distribution box is needed. Call for inspection of trench(s) before and after gravel is installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

OK TO BRING INLET IN AT 4' AND BOTTOM AT 9' TO AVOID STARTING SYSTEM IN LOWER

END OF SEPTIC RESERVE AREA. Sabel

8-2785 - NO GROUT IN WELL LOCATED AT HOUSE

PLANS APPROVED BY C. Williams DATE 8/26/85

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: IF TRENCH IS USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH.

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 THREE 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.

BLDG. PERMIT SIGNED
AND RETURNED 9/23/85

Shel 46 5752

Garage

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

*CALL [REDACTED] FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

A 35220

Permit 4/18/85 9:30 A.M.

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 35220

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT _____

DATE 4/01/85

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.
14663 Triadelphia Road
ADDRESS Glenelg, Maryland 21737 PHONE 489-7132

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 7

ROAD AND DESCRIPTION 4150 Ten Oaks Road

SIZE OF LOT 20.000 acres TYPE BLDG. 3 or 4 Bedrooms
(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. /s/ Olen Ketterman
(SIGNATURE OF APPLICANT)

APPROVED BY Craig Williams FOR TABUCHES DATE 5/9/85

REJECTED BY _____ FOR _____ DATE _____

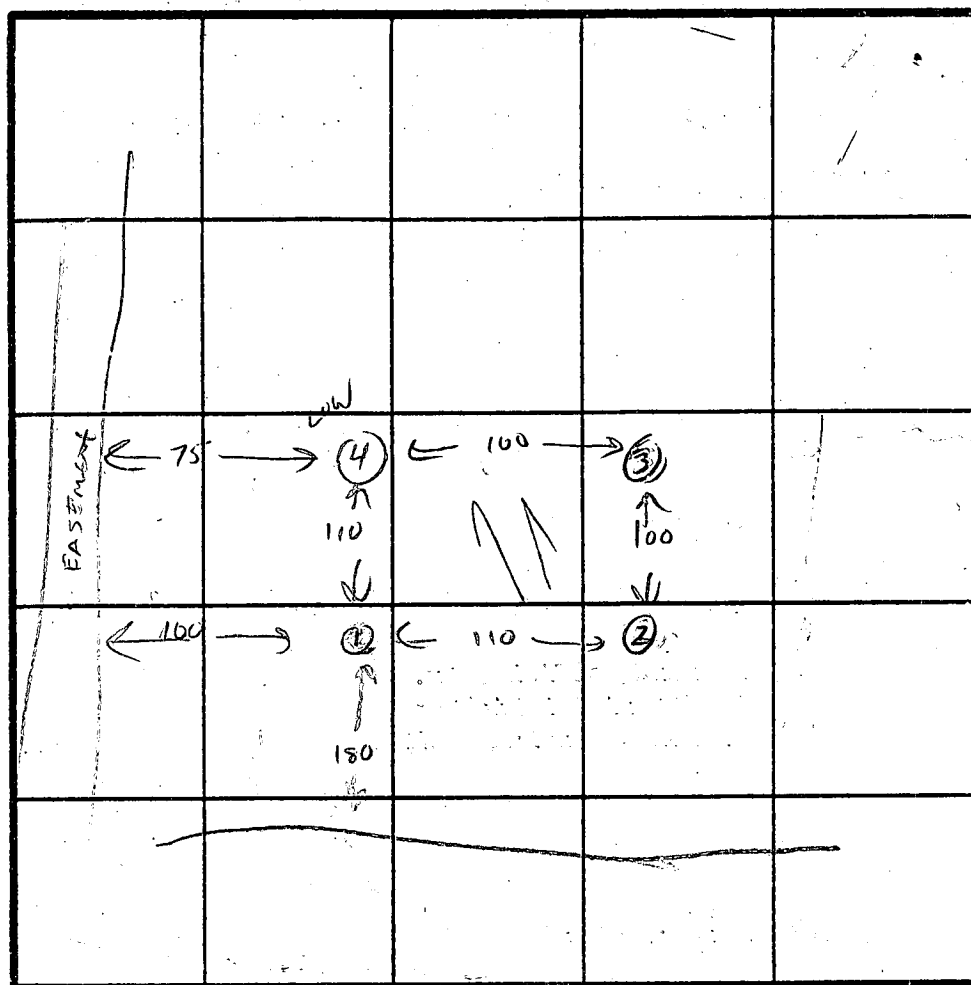
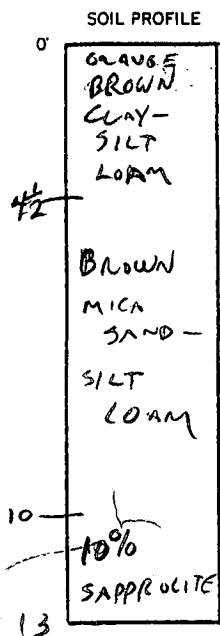
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

BLDG. PERMIT GRANTED
AND RETURNED 9/18/85

Serial # 05323
SPD

THIS IS NOT A PERMIT



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

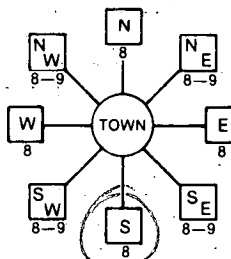

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/18/85	1 HIGH	5 9	1:27 SANDY	1:30	1:30	1:35	4 MIN
		13	VIS. OK				
1/	2 2ND HIGH	5 9	1:28 SANDY	1:30	1:30	1:34	4 MIN
		13	VIS. OK				
1/	3	5 9	1:29 SANDY	1:31	1:31	1:34	3 MIN
		13	VIS. OK				
1/	4 LOW	5 9	1:30 SANDY	1:36	1:36	1:42	7 MIN
		13	VIS. OK				

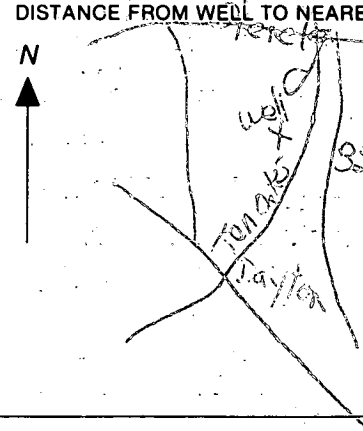
REMARKS CERTIFIED LOCATIONS REG'D.

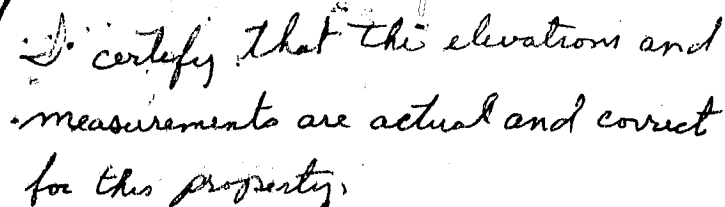
TYPE OF SOIL SANDY LOAM

TESTED BY C. W. L. ALSO PRESENT STANLEY KOTTELMAN

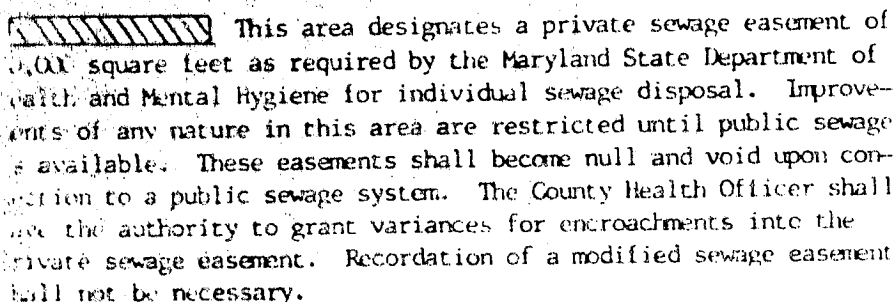
[illegible]

B 1 7051 (THIS NUMBER IS TO BE PUNCHED IN COLUMNS 3-6 ON ALL CARDS)	SEQUENCE NO. (OEP USE ONLY) STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	OEP PERMIT NUMBER HO-81-1027 fill in this form
Date Received 09/22/85 OWNER INFORMATION Sullivan, Stanley Last Name Owner First Name Burnt Woods Rd Street or RFD Glenwood Md 21738 Town State Zip	B 3 LOCATION OF WELL Howard COUNTY Linticum Prop SUBDIVISION SECTION 44 46 LOT 7 48 50 Glenela NEAREST TOWN MILES FROM TOWN (enter 0 if in town) 2 MI 73 76 77 78	
DRILLER INFORMATION George Eastday Driller's Name 40 License No. 80 9265 Brown Church Rd Mt. Airy Md Firm Name Address George Eastday Signature 5-21-85 Date	B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  NEAR WHAT ROAD Ten Oaks Rd ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  DISTANCE FROM ROAD 1800 ENTER FT or MI 54 38 39	
B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 5 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 600 14 20		
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) <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 HEALTH DEPARTMENT APPROVAL) <input type="checkbox"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL Howard COUNTY NAME A35520 COUNTY NO. OEP SIGNATURE DATE ISSUED 052085 CO SIGNATURE NORTH GRID 517000 EAST GRID 080400 43 48 50 55 57 63		
APPROXIMATE DEPTH OF WELL 150 FEET. APPROXIMATE DIAMETER OF WELL 6 INCH METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jettied & DRIVEN AIR-ROTARY AIR-Percussion ROTARY (Hydraulic Rotary) CABLE REVERSE-ROTARY Drive-POINT other		
REPLACEMENT OR DEEPEMED 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 <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY <input type="checkbox"/> THIS WELL WILL DEEPEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52		
Not to be filled in by driller (OEP USE ONLY) APPROP. PERMIT NUMBER 54 GAP 63 FORCE 64 WRITE INITIALS IN BOX PERMIT NO. HO-81-1027 67 68 70 71 72 73 74 75 76 77 78 79		
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 6/18/85
 E 800
 N 510 7
 000 000
 DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION




George W. Richardson



Percolation test holes shown hereon have been field located and shown as "A".

lots shown hereon comply with the minimum ownership width and area as required by the Maryland State Department of Health and Mental Hygiene.

Percolation areas and water wells for adjoining lots have been shown where pertinent.

APPROVED: For Private Water and Private Sewage Systems

County Health Officer

late

Sketch OK
lot re-per'd due
TEST PLAT to well
placement
J.S.

PERCOLATION TEST PLAT

LOT 7

KENNARD WARFIELD Jr.
PROPERTY

5th Election District
Howard County, Maryland
Scale 1"=200'
Date 5/07/85

NTT Associates
101 Sterrett Place
Columbia, MD 21044
442 7031

C1 3077
SEQUENCE NO. (OEP USE ONLY)
(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 35

DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT
FROM "PERMIT TO DRILL WELL"

8 13

25 31 35

22 26
(TO NEAREST FOOT)

40 - 81 - 1027
28 29 30 31 32 33 34 35 36 37

OWNER Sullivan last name Stanley first name
STREET OR RFD Ten Oaks Rd. TOWN
SUBDIVISION Linthicum Prop. SECTION LOT 7

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

Topsoil 0 2
Br. Mica 2 39
Tan Mica 39 50
Gray Mica 50 63
Tan Mica 63 66
Gray Mica 66 160

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box)

yes no
Y N
44 44

TYPE OF GROUTING MATERIAL

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 36 NO. OF ROUNDS 1000

GALLONS OF WATER 60

DEPTH OF GROUT SEAL (to nearest foot)

from 3 ft. to 36 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 6 43
60 61 63 64 66 70

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

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

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 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

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 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
(MUST MATCH SIGNATURE ON APPLICATION)
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

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 CASING LOG INDICATOR OTHER DATA

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min. to nearest gal.) 8

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 35

WHEN PUMPING 40

TYPE OF PUMP USED (for test)

A air P piston T turbine
C centrifugal R rotary O other (describe below)
J jet S submersible

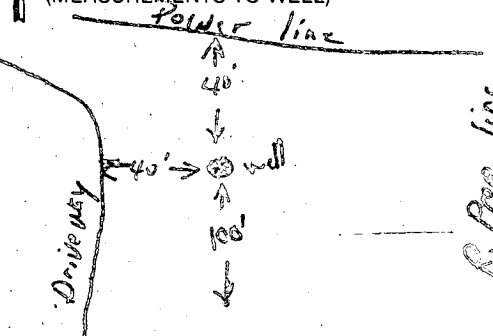
PUMP INSTALLED

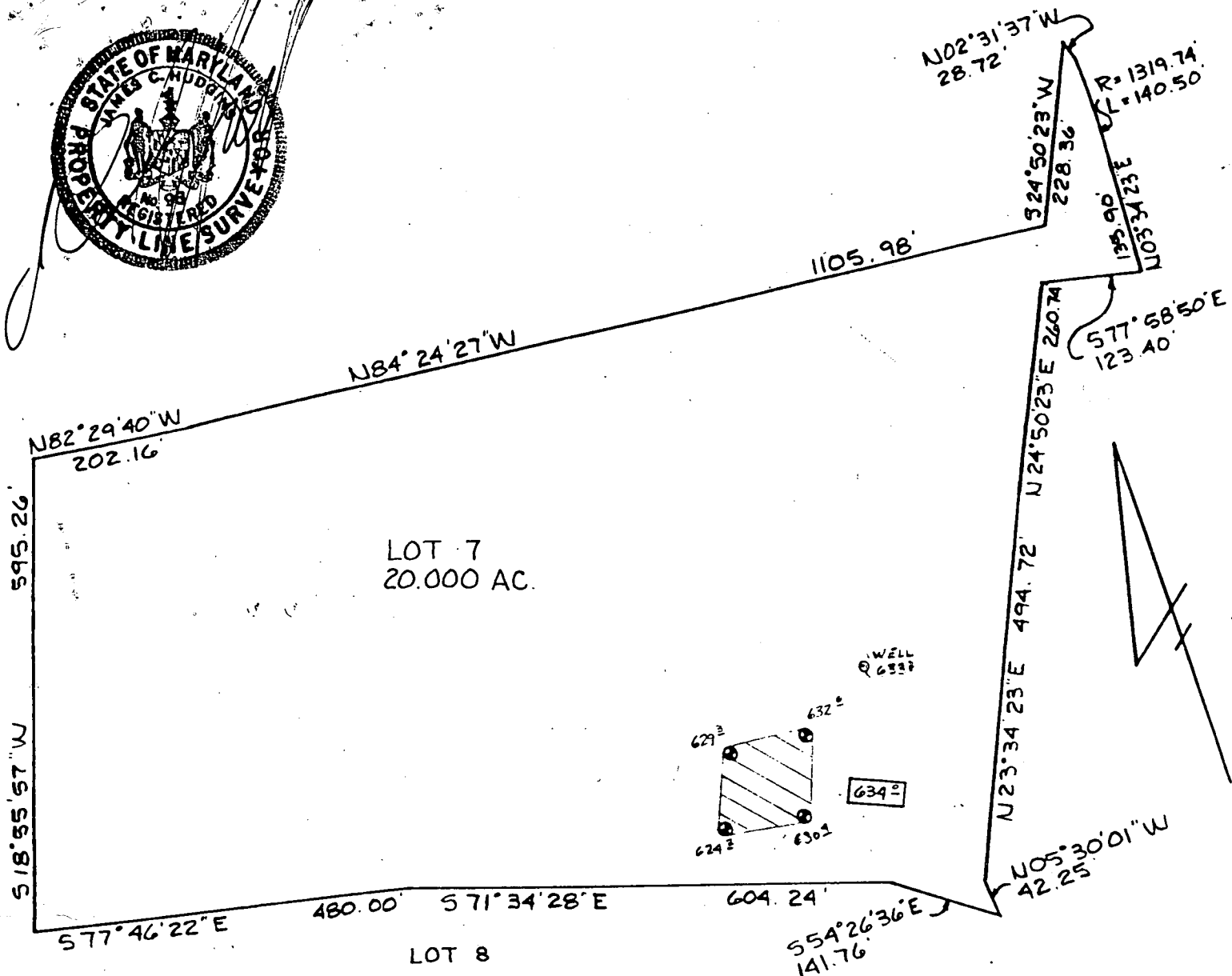
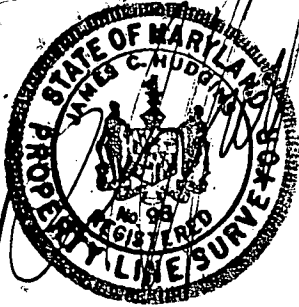
DRILLER WILL INSTALL PUMP YES NO
IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE
TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE:


CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 35
PUMP HORSE POWER 37 41
PUMP COLUMN LENGTH (nearest ft.) 43 47
CASING HEIGHT (circle appropriate box and enter casing height)

+ above
- below
LAND SURFACE 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)





 This area designates a private sewage easement of 10,000 square feet as required by the Maryland State Department of Health and Mental Hygiene for individual sewage disposal. Improvements of any nature in this area are restricted until public sewage is available. These easements shall become null and void upon connection to a public sewage system. The County Health Officer shall have the authority to grant variances for encroachments into the private sewage easement. Recordation of a modified sewage easement shall not be necessary.

Percolation test holes shown hereon have been field located and shown as "⊕".

The lots shown hereon comply with the minimum ownership width and lot areas as required by the Maryland State Department of Health and Mental Hygiene.

Percolation areas and water wells for adjoining lots have been shown where pertinent.

APPROVED: For Private Water and Private Sewage Systems

SENT FOR SIGNATURE 4/10/85 CWS
County Health Officer

Date

PERCOLATION TEST PLAT

LOT 7

KENNARD WARFIELD Jr.
PROPERTY

5th Election District
Howard County, Maryland
Scale 1"=200'
Date 5/07/85

NTT Associates
101 Sterrett Place
Columbia, MD 21044
442 7031