

7/2/85
P.M.
7-5-85 approved
Shel

PERMIT

P 35-7/5
A 34930

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
992-2330

03-305619

ELLICOTT CITY

DISTRICT 3rd

INDEXED

DATE 6/25/85

Pat Lendrim IS PERMITTED TO INSTALL ALTER

ADDRESS 14010 Forsythe Road, Sykesville, Maryland 21784 PHONE 442-2416

SUBDIVISION Friendship Manor ROAD 2645 Wellworth Way LOT 46

PROPERTY OWNER Joel Nupp

ADDRESS _____

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

GARBAGE GRINDER? YES _____ NO

SEPTIC TANK CAPACITY 1000 GALLONS NUMBER OF BEDROOMS 3

TRENCHES - 200 sq. ft. per bedroom. Trench to be 3 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 4½ feet below original grade. Effective area begins at 3 feet below original grade. 1½ feet of stone below distribution pipe. LOCATION: Start the first trench 240 feet from the rear lot line and 20 feet from the right lot line as seen when facing the property from Wellworth Way. NOTE: No trench to exceed 100 feet in length. If more than one trench used, a distribution box is required. Call for inspection of trench(s) before gravel is installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

BLDG. PERMIT SIGNED
AND RETURNED 12/23/87
Serial # 15790. Storage

PLANS APPROVED BY C. Williams DATE 6/24/85

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. Wood Stom

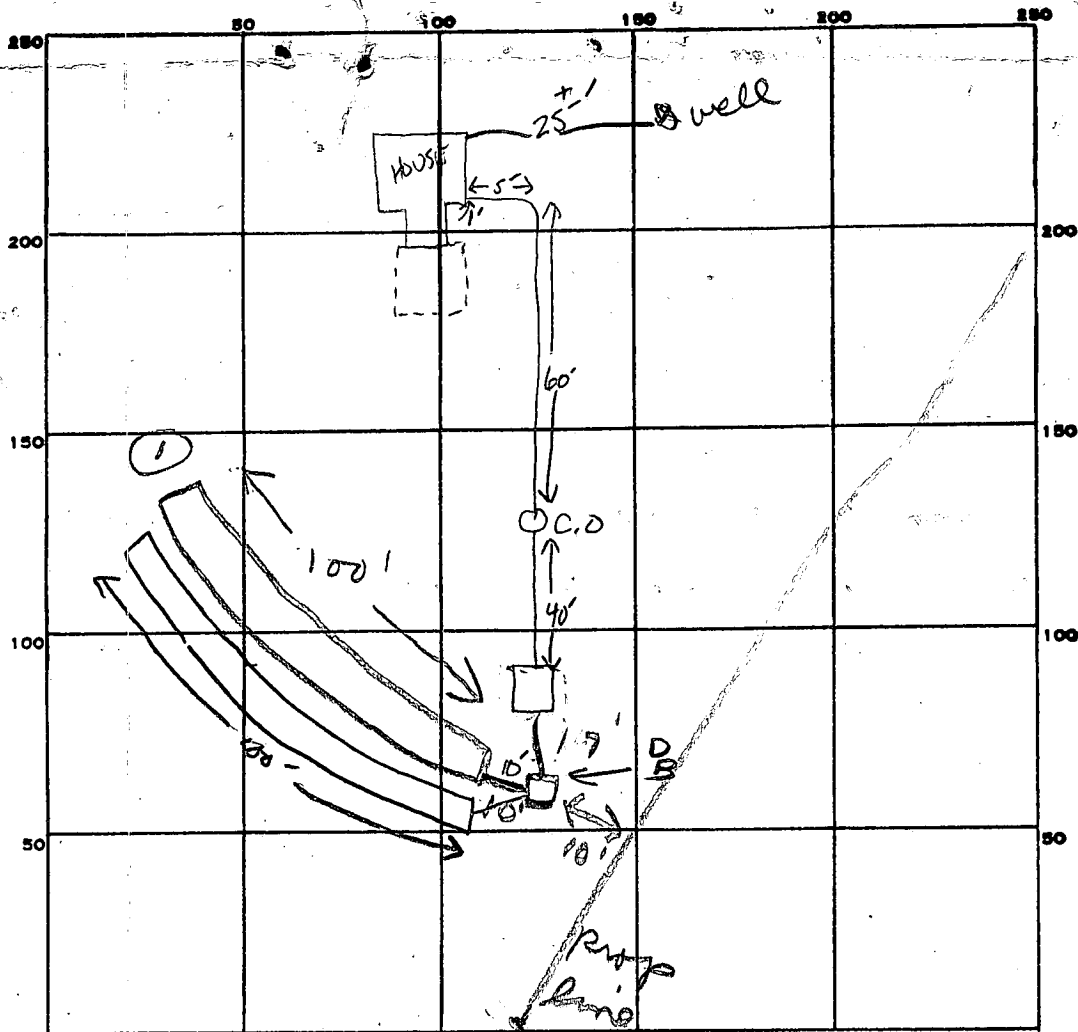
BLDG. PERMIT SIGNED
AND RETURNED 4/7/86
Serial # 69980

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

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

A 34930



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

Wellworth Way

PERMIT CARD _____

SEPTIC TANK, LEVEL ✓ 1000 GAL.

CLEANOUTS _____

DISTRIBUTION BOX, LEVEL ✓

TILE FIELD, DEPTH ① 4 FT. TRENCH WIDTH ① 3 ② 3 FT.

GRAVEL DEPTH 12 IN. TOTAL LENGTH ① 100 ② 100 FT.

NUMBER OF TRENCHES 2 TOTAL BOTTOM AREA 600 SQ. FT.

SEEPAGE PITS, INSIDE DIAMETER _____ FT. DEPTH BELOW INLET _____ FT.

ABSORBENT AREA 600 SQ. FT.

REMARKS 7-1-85 CONTINUE WORK - CALL WHEN TRENCH COMPLETE

7/2/85 OK to add stone in #1 trench, fl

DATE SYSTEM APPROVED 7-5-85

INSPECTOR S. Abel

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 34930

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

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

DISTRICT _____

DATE 2/5/85

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 Joel T. & Maura Jo NURPP

ADDRESS 37 Meadow Lane, Laurel, Md 20707 PHONE 490-7948

PROPERTY LOCATION:

SUBDIVISION Friendship Manor LOT NO. 46

ROAD AND DESCRIPTION Wellworth Way

SIZE OF LOT 2.53 acres TYPE BLDG. single family dwelling
(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.

Joel T. Nurpp
(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

C1 **9586** 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 34930**

DATE Received [] DATE WELL COMPLETED **042485** Depth of Well **300** (TO NEAREST FOOT) PERMIT NO. FROM "PERMIT TO DRILL WELL" **HO-81-0931**

OWNER **LENORIM CONTRACTING**
 STREET OR RFD **WELL WORTH WAY** first name TOWN **WEST FRIENDSHIP**
 SUBDIVISION **FRIENDSHIP MANOR** SECTION LOT **46**

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	
Top Soil	0	2	
Clay	2	5	
Shaley	5	12	
Sand Stone	12	38	
Mica	38	50	
Sand Stone	50	55	✓
Mica	55	140	
Flint	140	145	✓
Mica	145	300	

GROUTING RECORD
 WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**
 TYPE OF GROUTING MATERIAL
 CEMENT **CM** BENTONITE CLAY **BC**
 NO. OF BAGS **8** NO. OF POUNDS **300**
 GALLONS OF WATER **45**
 DEPTH OF GROUT SEAL (to nearest foot)
 from **0** ft. to **39** ft.
 (enter 0 if from surface)

CASING RECORD
 casing types insert appropriate code below
ST CO PL OT
 STEEL CONCRETE PLASTIC OTHER
 MAIN CASING TYPE **ST** Nominal diameter top (main) casing (nearest inch) **6** Total depth of main casing (nearest foot) **42**

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

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

C 2
 DEPTH (nearest ft.)
 EACH SCREEN
 1 **HO** **40** **300**
 2
 3
 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

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

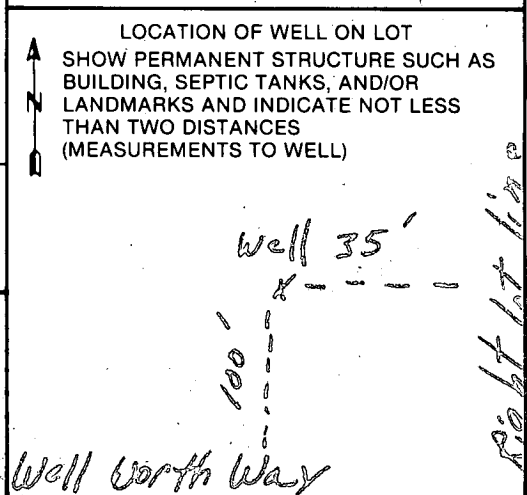
C 3
PUMPING TEST
 HOURS PUMPED (nearest hour) **3**
 PUMPING RATE (gal. per min. to nearest gal.) **4**
 METHOD USED TO MEASURE PUMPING RATE **Bucket**
 WATER LEVEL (distance from land surface) BEFORE PUMPING **31** WHEN PUMPING **126**
 TYPE OF PUMP USED (for test)
A air **P** piston **T** turbine
C 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) PUMP HORSE POWER PUMP COLUMN LENGTH (nearest ft.)
 CASING HEIGHT (circle appropriate box and enter casing height)
 + above } LAND SURFACE (nearest foot)
 - below }

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. **41**
 DRILLERS SIGNATURE **Charles R. Estuday**
 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)



B 7 **6916** SEQUENCE NO. (OEP USE ONLY)
 1 2 3
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3 ON ALL CARDS)

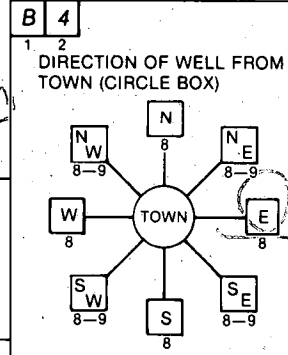
STATE OF MARYLAND
 PERMIT TO DRILL WELL
 please print or type

OEP PERMIT NUMBER
HO-81-0931
 70 fill in this form completely 79

Date Received **4/23/85 - 10:10 AM**
 8 13
 OWNER INFORMATION
LEADRIM CONTRACTING, INC.
 15 Last Name Owner First Name 34
LEADRIM FORSUTHE, JR.
 36 Street or RFD 55
SYKESVILLE MD 21784
 57 Town 70 State 72 Zip 76

B 3 LOCATION OF WELL **R-35726 \$ 40.00**
 1 2
HOWARD 8 COUNTY 21
FRIENDSHIP MANOR 23 SUBDIVISION 42
 SECTION **44** 46 LOT **416** (old Lot 12) 48 50
WEST FRIENDSHIP 52 NEAREST TOWN 71
 MILES FROM TOWN (enter 0 if in town) **1** 73 76 77 78

DRILLER INFORMATION
L. Daniel Easterday 77 License No. 80
L. Franklin Easterday, Inc.
 Firm Name
9205 Brown Church Rd Mt Airy, Md 21784
 Address
L. Daniel Easterday 3/8/85
 Signature Date



West Water Way 11 NEAR WHAT ROAD 30
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

 34 **100** 37 DISTANCE FROM ROAD
 ENTER FT or MI **FT** 38 39

B 2 WELL INFORMATION
 1 APPROX. PUMPING RATE (GAL. PER MIN.) **3** 8 12
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **500** 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)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
HOWARD COUNTY NAME **A 34930** COUNTY NO.
 OEP SIGNATURE _____ STATE HEALTH INSERT S _____ 41
 DATE ISSUED **032085** **J. Stayer** 9/20/85
 43 48 CO SIGNATURE EXP. DATE
 NORTH GRID **531000** EAST GRID **0814000**
 50 55 57 63

APPROXIMATE DEPTH OF WELL **200** FEET 24 28

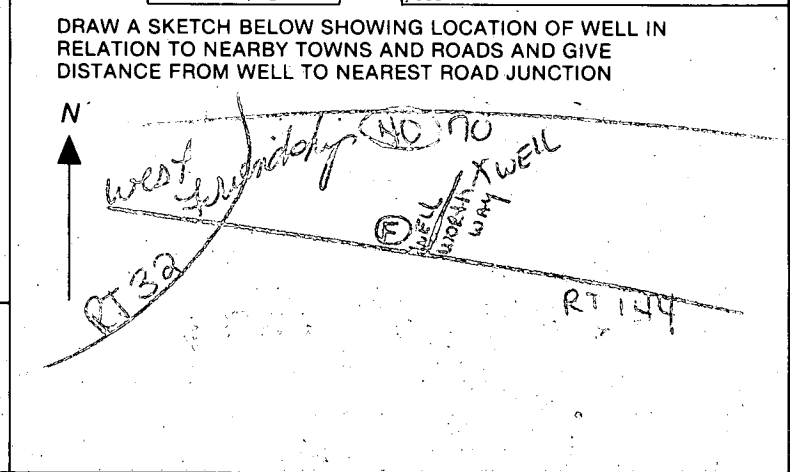
APPROXIMATE DIAMETER OF WELL **6** INCH NEAREST INCH

METHOD OF DRILLING (circle one)
 BORED (or Augered) JETTED Jetted & DRIVEN
 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)
 CABLE REVERSE-ROTARY DRIVE-POINT
 other _____

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

 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
 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
 THIS WELL WILL DEEPEM AN EXISTING WELL
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) _____ 41 _____ 52

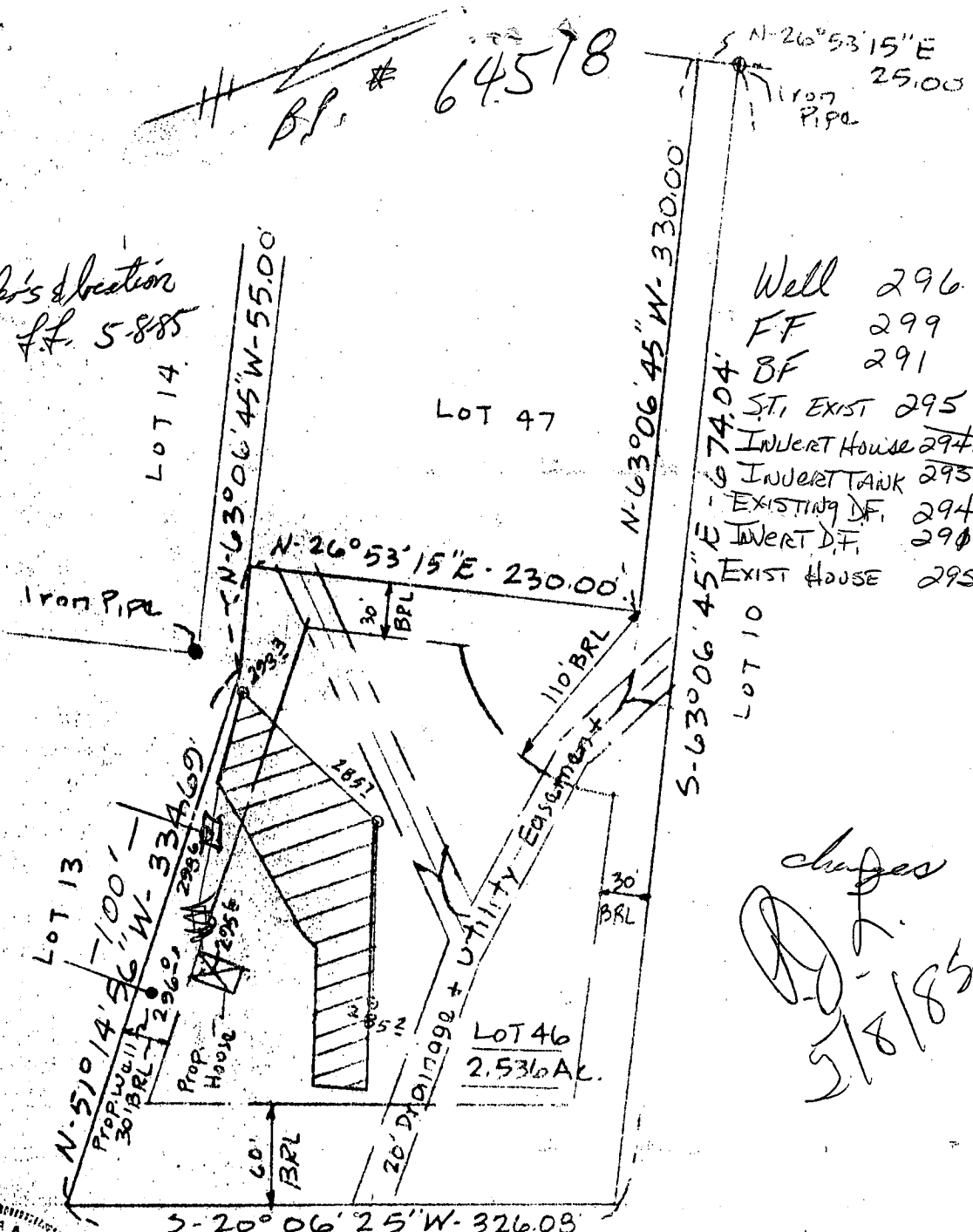


Not to be filled in by driller (OEP USE ONLY)
 APPROP. PERMIT NUMBER _____ 54 GAP _____ 63
 FORCE **JS** WRITE INITIALS IN BOX PERMIT No. **HO-81-0931**
 67 68 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS

BL # 64518

Septic tank location
at L.F. 5-885



- Well 296
- FF 299
- BF 291
- ST, EXIST 295
- INVERT HOUSE 294.5 - 293.75
- INVERT TANK 293.5 in 292.25
- EXISTING D.F. 294 (out 292.0)
- INVERT D.F. 290
- EXIST HOUSE 295

changes
[Signature]
5/8/85



APPROVED: FOR PRIVATE WATER AND
PRIVATE SEWAGE SYSTEMS.
HOWARD COUNTY HEALTH DEPARTMENT

COUNTY HEALTH OFFICER _____ DATE _____

3/12/85 SEWER AREA REVISED PER HEALTH DEPT. RGA

TITLE: PERCOLATION CERTIFICATION				
PROJECT: LOT 46 - SECTION 2 - FRIENDSHIP MANOR				
LOCATION: 3RD ELECTION DISTRICT HOWARD CO., MD.				
SCALE: 1"=100'	DESIGNED BY: —	DRAWN BY: BH	CHECKED BY: [Signature]	DATE: 3-4-85
BOOK: _____	PAGE NO.: _____	JOB NO.: _____	DRAWING NO.: _____	

boender associates
inc.
consulting engineers
land surveyors
land planners

COURTHOUSE SQUARE
3565 ELLICOTT MILLS DRIVE
BETHESDA, MD 20814

WELLWORTH WAY 50' R/W

N 26° 53' 15" E
25.00'

LOT 10

S 63° 06' 45" E

674.04'

S 63° 06' 45" E 330.00'

30' 3RL

20' DRAINAGE & UTILITY
EASEMENT PLAT 3889

LOT 47

S 26° 53' 15" W 230.00'

GRAVEL DRIVE

110'

LOT 46
2.536 AC.

326.08'

S 20° 06' 25" W

N 63° 06' 45" W
55.00'

N 51° 14' 56" W

334.69'

LOT 14

LOT 13

*B lock chimney
75'*

LOCATION SURVEY

2645 WELLWORTH WAY
3RD ELECTION DISTRICT
HOWARD COUNTY, MD

THIS PLAT SHOWS ONLY THAT THE IMPROVEMENTS ARE
CONTAINED WITHIN THE OUTLINES OF THE LOT AND
IS NOT TO BE USED TO ESTABLISH PROPERTY LINES.

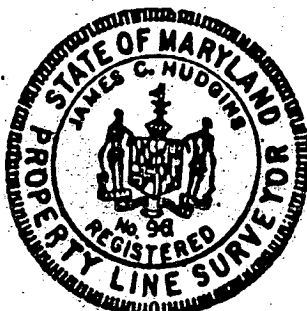
NTT ASSOCIATES INC. 16205 OLD FREDERICK ROAD
MT. AIRY, MARYLAND PHONE 646-5521 or 442-2031

SCALE 1" = 100'
DATE 9/29/85

FIELD BY RIK
DRAWN BY RIK

DRAWING NUMBER
F-101

This is to certify that I have surveyed the property known as lot #46
FRIENDSHIP MANOR SECTION II Resubdivision of Lots 11 & 12
sheet 1 of 1 recorded as PLAT 5354 among the
land records of Howard County, Maryland for the purpose
of locating the improvements thereon.



James Carl Hudgins
James Carl Hudgins PLS #96

14 4/26/79 p 70

lot 13

lot 12

2 5' 3" 123 128 (3)
 d 13' 123 129 13' (4)
 3 5' 3" 125 128 134 (6)
 d 14' 1 25 139 204 (25)
 4 5' 3" 134 146 204 13
 d 15 1/2 134 138 146 (8)

1 3 207 208 210 (2)
 13 207 211 222 (17)
 4 3' 24 222 225 (3)
 13 24 240 306 (26) - 1M
 3 3' 232 233 254 (7) silt
 14 1/2 235 244 254 (15) Rock
 2 045-13' 0100

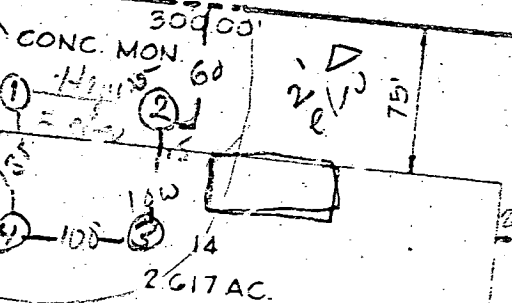
4 5 320 322 3
 9 320 322 3
 3 2-10' silt 100M
 1 5 2' 339 339 340
 d 12' 339 350 401
 2 5 1' 330 - 330
 d 12 1/2 330 336 342

CHARLES V. WILLIAMSON
440/716

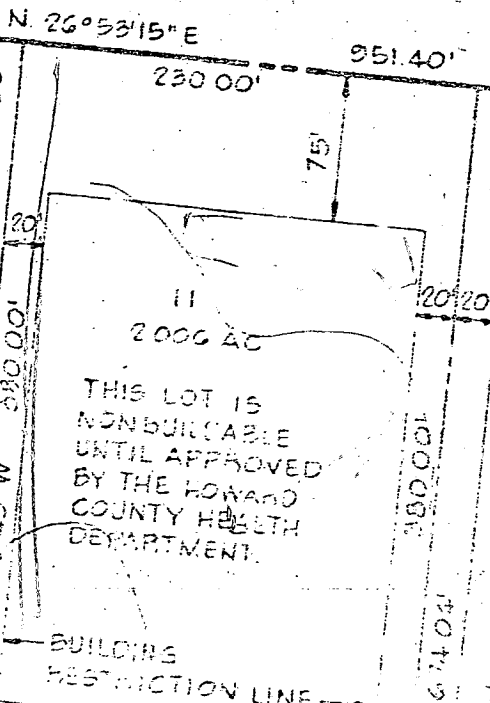
Ca Solist
5 1/2' x 1810 1/2'

MATCH LINE SEE SHT 3 OF 4
1 1/2 3-12' 9000 silt 100M
129'

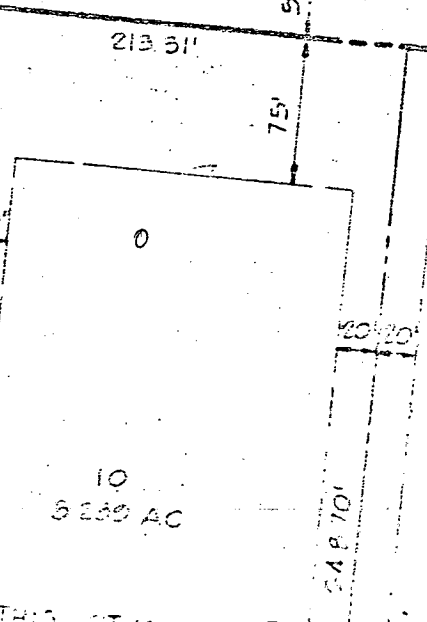
WELLWORTH WAY



THIS LOT IS NONBUILDABLE
UNTIL APPROVED BY THE
HOWARD COUNTY HEALTH
DEPARTMENT



THIS LOT IS
NONBUILDABLE
UNTIL APPROVED
BY THE HOWARD
COUNTY HEALTH
DEPARTMENT.



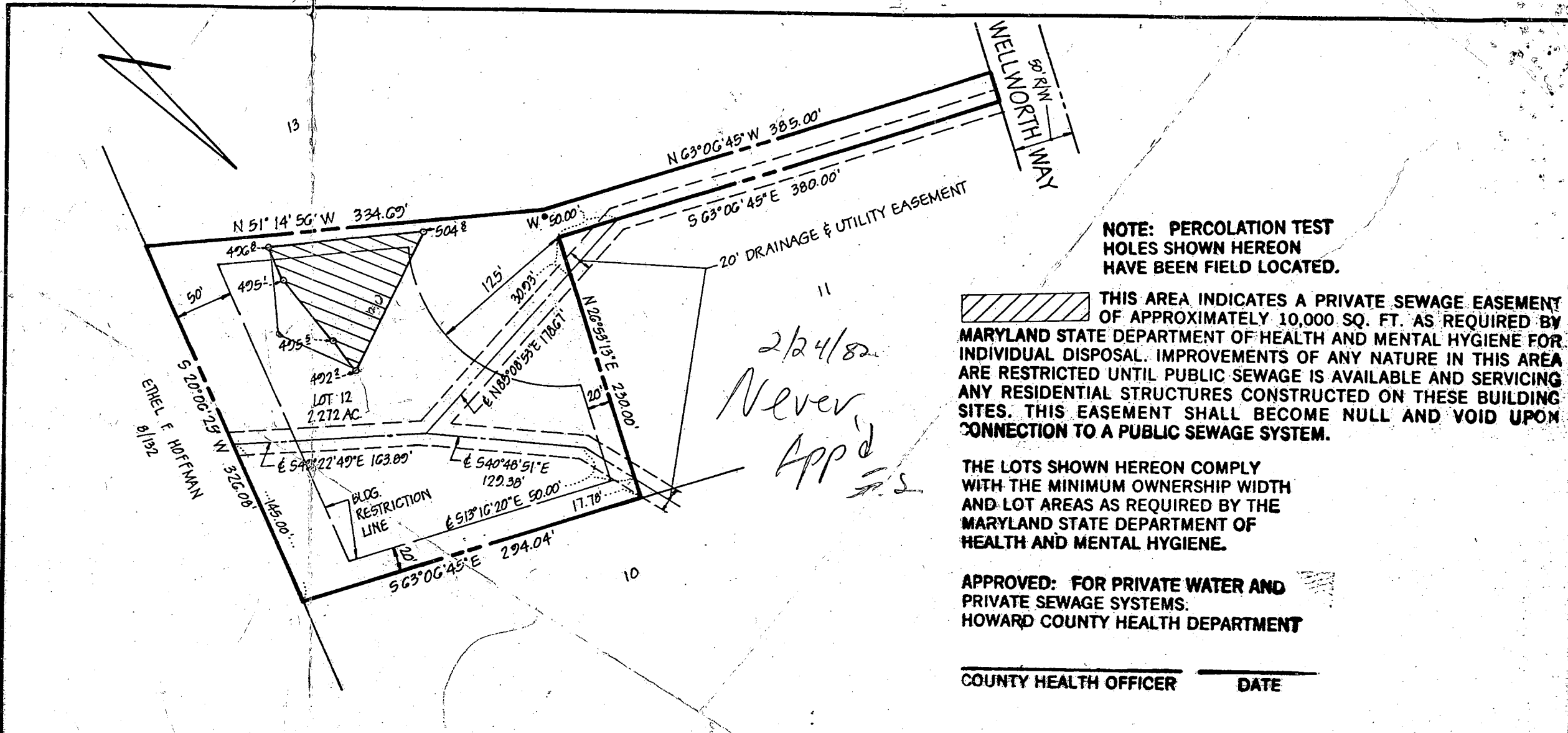
THIS LOT IS

Friendship Manor lot 12

11/3/81 The perc holes test by DJO on 7/78 are shown on the attached plat. Hole locations 2+4 are exact, locations 1+3 may be skewed. With the existing set back line at 125' there appears to be no house site. This lot should be retitled to none area or to completely establish a new easement. Dave has some ideas on this.

SK

11/4/81 Of. Inq. John Bankard of Boender Assoc re. this lot having no house site, I recommend combining lots 11 & 12 or changing lot line. J.S.



2/24/82
Never
App'd
J.S.

NOTE: PERCOLATION TEST HOLES SHOWN HEREON HAVE BEEN FIELD LOCATED.

THIS AREA INDICATES A PRIVATE SEWAGE EASEMENT OF APPROXIMATELY 10,000 SQ. FT. AS REQUIRED BY MARYLAND STATE DEPARTMENT OF HEALTH AND MENTAL HYGIENE FOR INDIVIDUAL DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWAGE IS AVAILABLE AND SERVICING ANY RESIDENTIAL STRUCTURES CONSTRUCTED ON THESE BUILDING SITES. THIS EASEMENT SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWAGE SYSTEM.

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.

**APPROVED: FOR PRIVATE WATER AND PRIVATE SEWAGE SYSTEMS.
HOWARD COUNTY HEALTH DEPARTMENT**

COUNTY HEALTH OFFICER _____ DATE _____

PLAT REFERENCE: FRIENDSHIP MANOR - SECTION 2 - PLAT 3880

TITLE	PERC TEST PLAT		DATE:	MAY, 1981
PROJECT	LOT 12 - FRIENDSHIP MANOR - SECT. 2		SCALE:	1" = 100'
LOCATION	3RD ELECT. DISTRICT	HOWARD CO., MD.	JOB NO.:	81056
			DRAWN BY:	J. B.

boender associates

SUITE 102-107 TOWN & COUNTRY PROFESSIONAL BUILDING
ELLICOTT CITY, MARYLAND 21043
301-465-7777

engineers
surveyors
planners

