HOWARD COUNTY

PERMIT

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P 439/8

MARYLAND STATE DEPARTMENT OF HEALTH

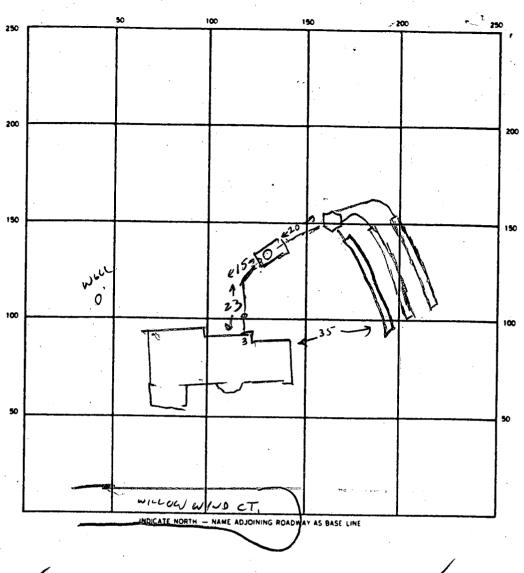
BUREAU OF ENVIRONMENTAL HEALTH 461-9933

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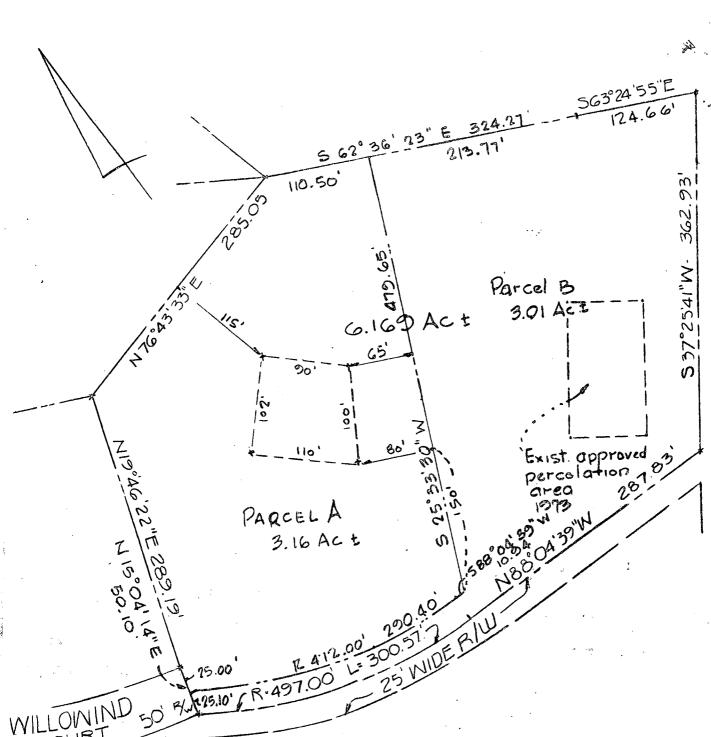
C11 Ungs		•		
Gil Hoff / Catonsville Pl				
ADDRESS 5807 Hanna Road, Sy	kesville, Maryland	21784 PHO	NF 795-956	5
DR SMAO HAWN	a Chib			
SUBDIVISION DULGAS HILL Propos	ROAD 121	1/5 Willowind Co	urt LOTl	
PROPERTY OWNER	Albert Snyder	PHONE:	795-0763	1
DORESS				
F GARBAGE GRINDER IS USED INCREASE SE	PTIC TANK CAPACITY BY 50%	AND ABSORPTION AREA	BY 22%.	
ARBAGE GRINDER? YES X	NO			**************************************
EPTIC TANK CAPACITY 2000 GALL	ONS NUMBER OF BED	PROOMS4_	•	
TRENCHES - 220 sq. ft. per be	ow offginal grade.	Kottom mayimum	'donah 0 e	
stone below distri	ibution nine	feet below origi	lnal grade. 4	feet of
OCATION - Beginning from the	e front left corner	(Intersection o	of the 289.19'	line and
ropeop true, brac	ce the distribution	hox 65 feet dow	m the front /	300 1011 1
towards left and 1	orr the same lot 1	ine. Run trench	(s) along leve	el ground
OTE - No trench to excee	ed 100 feet in leng	th Provide 6"	Oll ddamaa	
and cap to grade of	or above on septic	tank. 01(/C4)	- o diameter	Cleanout
ANS APPROVED BY	C. Williams	<u> </u>	7/15/	
	· · · · · · · · · · · · · · · · · · ·	·	DATE	33
VER NO WORK UNTIL INSPECTED AND APPROVED				
THER THE HOWARD COUNTY COUNCIL NOR THE HEA	LTH DEPARTMENT IS RESPONSIBLE	FOR THE SUCCESSFUL OPERAT	ION OF ANY SYSTEM	•
TE. CLEANOUT REQUIRED EVERY 70 FEET OF SEWE	R LINE AND/OR AT 90° SWEEPS IN L	INES FROM HOUSE TO DRAIN.	UILDING PE	PMIT SIGNE
			AND RE	
TE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPE	CTION BEFORE AND AFTER PLACING	GRAVEL IN TRENCHIES	INJO RANIUS	OKNED
E: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAME	ETER NO ABSURPTION TRENCH TO E	XCEED 100 FEET IN LENGTH	אוטטטיכטון וי	NOP TOUL CE
E: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST B	E CAST IRON OR SCHEDULE 40 PVC	OR ABS		
MIT VOID AFTER TWO YEARS		•		>
TE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY W ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER T	VELL STAND PIPES MUST BE 6 INCHE 'HAN 3 FEET, MANHOLE TO GRADE R	S IN DIAMETER. CAST IRON, COI	NCRETE OR TERRA COTTA O	
TE DISTRIBUTION BOXES MUST HAVE BAFFLES	•		PERMIT SIGNED	2 ×

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT

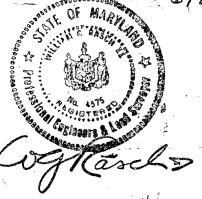


DISTRIBUTION BOX. LEV	EL		TS ST MANHOLD	 _
EFFECTIVE GRAVEL DEF	TH 42	FT TOTAL LENGTH	195	185 4: 92
amaid adieni llawynd PERNIT SIGNI RETURNED	DVIGITUS REEN AREA 830	FT EFFECTIVE DEPT	H BELOW INLET	7 <u>70</u>
		COUGL ALL.		
				

570°20'23"E 110,50 7/22/97_or to totate pop! answhere within Harple Shadefrace 65 140 503.5 N 12.02 22"E 129: 50 478.0 L 270.40' K 472.00'



Field Location percholes
6/22/83



PURDUM ÉJESCHKE ENGINEERS & LAND SURVEYORS 1029 N. CALVERT STREET BALTIMORE, MARYLAND NOTE: The lot shown hereon complies with minimum ownership width and lot area as required by the Maryland State Department of Health Regulations.

APPROVED: For Private Water and Private Sewerage Systems, Howard County Health Department

County Health Officer F.S. Date

PROPERTY OF
DR. SHAO. HAUNG CHIU
3rd ELEC. DISTRICT HO.CO., MD.
MAY 24, 1983 SCALE. 11=1001

APPLICATION

TELEPHONE: 992-2330

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 32802

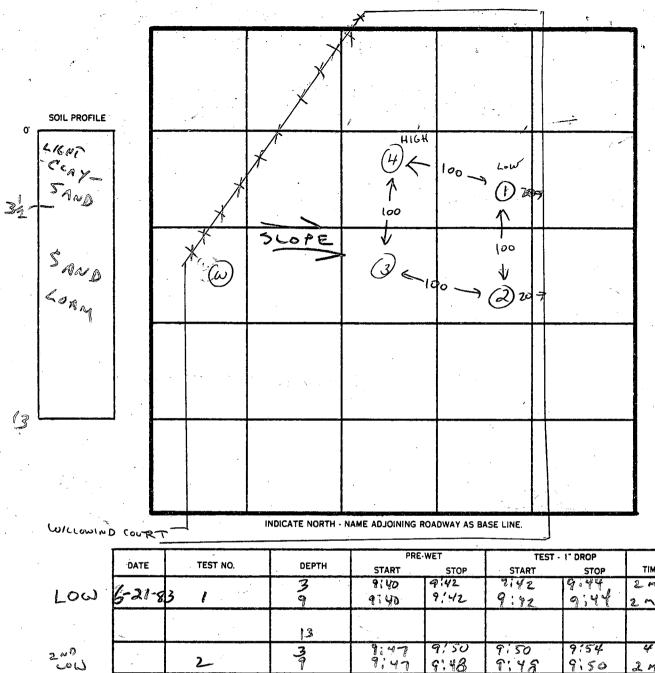
HOWARD COUNTY HEALTH DEPARTMENT **ENVIRONMENTAL HEALTH SERVICES** P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043

Third

DATE May 23, 1983

•		
TO: THE COUNTY HEALTH OFFICER		
ELLICOTT CITY, MARYLAND		a
I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CO	ONSTRUCT (OR RECONSTRUCT) A SEWAGE D	ISPOSAL SYSTEM
PROPERTY OWNER Dr. Shao-Haung Chiu	Albert Snyder -	795-0763
ADDRESS JO DIGITY Hane	229	PHONE 624-0479
PROPERTY LOCATION:		
SUBDIVISIONWoodmark DULMNYH	ILL Property LOT	N/A Pav. A.
ROAD AND DESCRIPTION	d Court	
		,
SIZE OF LOT 6.169 Acres - 2 Parcels Parcel A t	to be created TYPE E to have percolation tes	
THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCE	PTABLE ONLY UNTIL PUBLIC FACILITIE	S BECOME AVAILABLE. I FULLY UNDERSTAND THE
FEE CONNECTED WITH THE FILING OF THIS PERC TEST APP	LICATION IS NON-REFUNDABLE UNDE	ANY CIRCUMSTANCES LALSO AGREE TO COMPLY
WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LO		SOLO PURDUME JESCHILL JRE OF APPLICANTI
APPROVED BY Sid all	\mathcal{O}	DATE 10/18/88
REJECTED BY	FOR	. DATE
HOLD PENDING FURTHER TESTS C William		DATE 6-21-83
REASONS FOR REJECTION OR HOLDING HOLD FOR C	ERTIFIED COCATIONS, C	ow 6.21-83
		. PERMIT SIGNED
	AND	RETURNED 10/19/88
•		いもつのとり

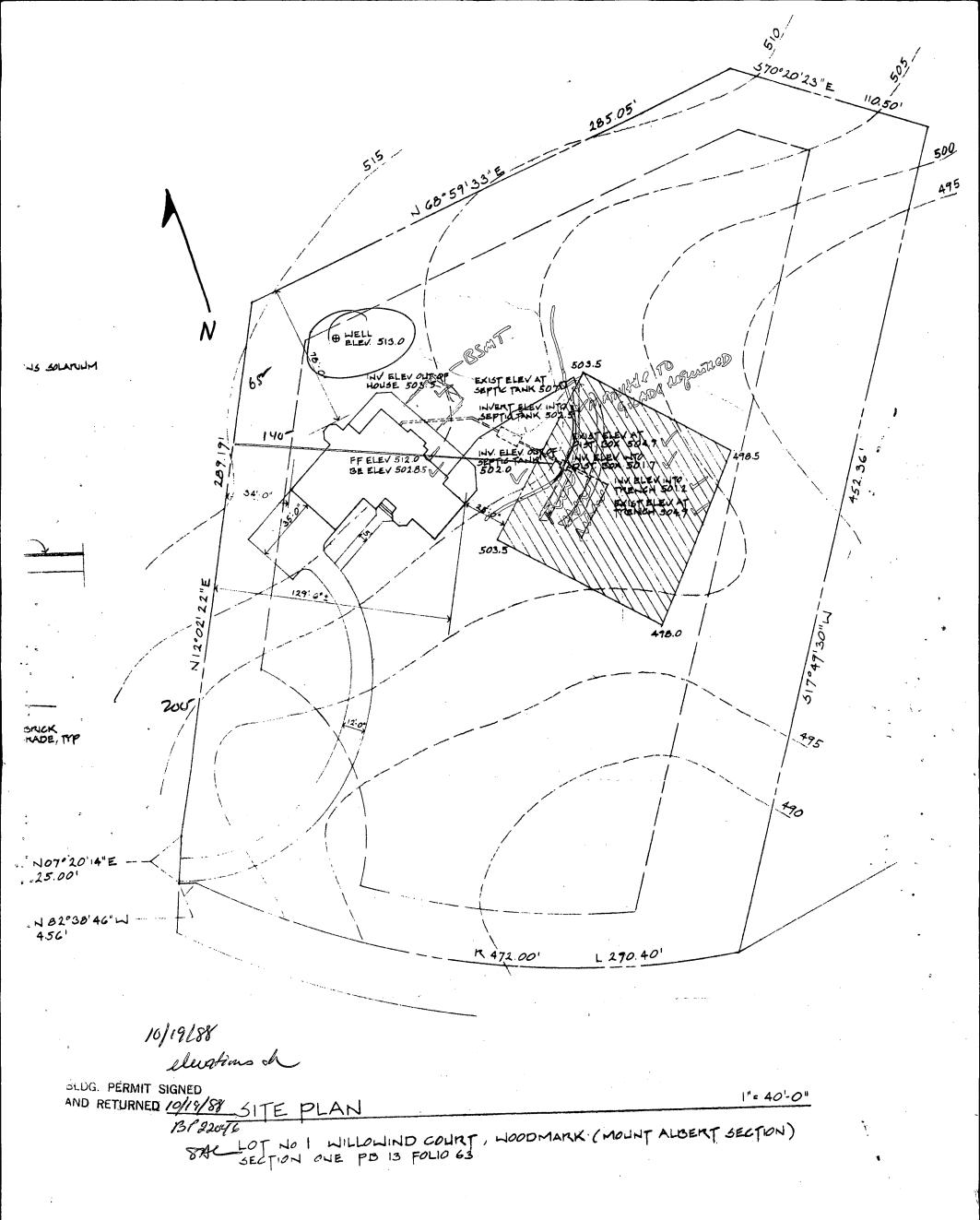
THIS IS NOT A PERMIT



•	T		· · · · · · · · · · · · · · · · · · ·	I PRÉ	-WET	TEST	· 1" DROP	
	DATE	TEST NO.	DEPTH	START	STOP	START	STOP	TIME
	1 21	>	3	8140	9:42	2145	9.44.	2 Min
LOW	5-28-8	3 1	9	9:49	9:42	9:42	9:44	2 712
	4		13					
2 ~ 0			39	9:47	9/50	9:50	9:54	4 MIN
2000	-	2	9	9:47	9:48	9:48	9:50	2 Mind
			13					
•		3	3	VIS	SAND			
·			IJ					
		. 1	3	9:51	9:55	P. 55	10:01	GMIN
1416H		ef	39	9:51	9:53	9:53	9:55	2414
		,			·			
			13					

REMARKS LOCATION UNCERTAIN - HO	LD FOR CERTIFIED LOCATIONS	•
TYPE OF SOIL SAND LOAM		
	SAIP	
TESTED BY Calling	ALSO PRESENT WAR	asch

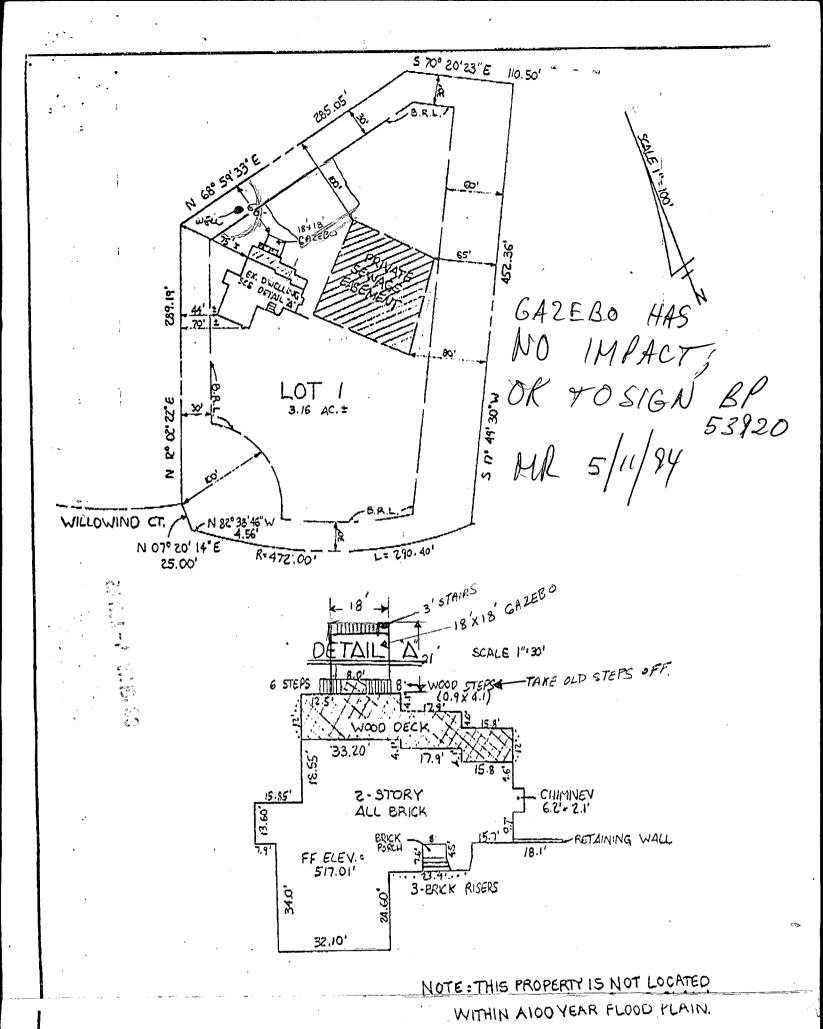
EH-12-1079



STRUCTURAL ENGINEERING IS PROVIDED BY THE WATKINS PARTHERSHIP (301) 721-1522 ME CROFTON BLY CROFTON, MD. 21114

PROPOSED RESIDENCE OF ALBERT A. & CYNTHIA M. SUYDER PROPERTY ADDRESS: 12175 WILLOWIND CT. ELLICOTT CITY, MD. 21043 5010 WESTCHESTER HILLS CT. PRESENT HOME:

ELDERSBURG MD. 2178 K



LIBER 1803 This is to certify that I have surveyed the property known as: LOT 1 OR 12175 WILLOWIND CT. OF "WOODMARK" SECTION I PART C RECORDED AMONG THE LAND RECORDS OF HOUMED COUNTY, MD. AS PLAT NO. 52

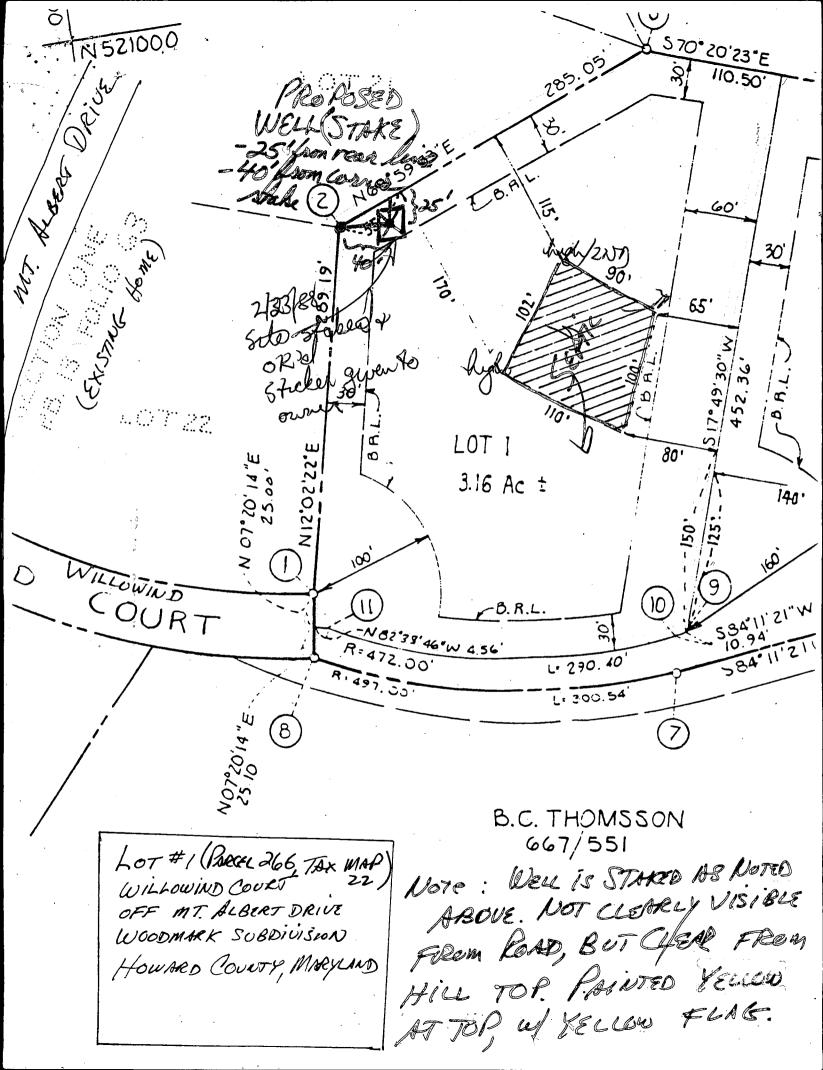
for the purpose of locating the improvements thereon, and the improvements are located as shown.

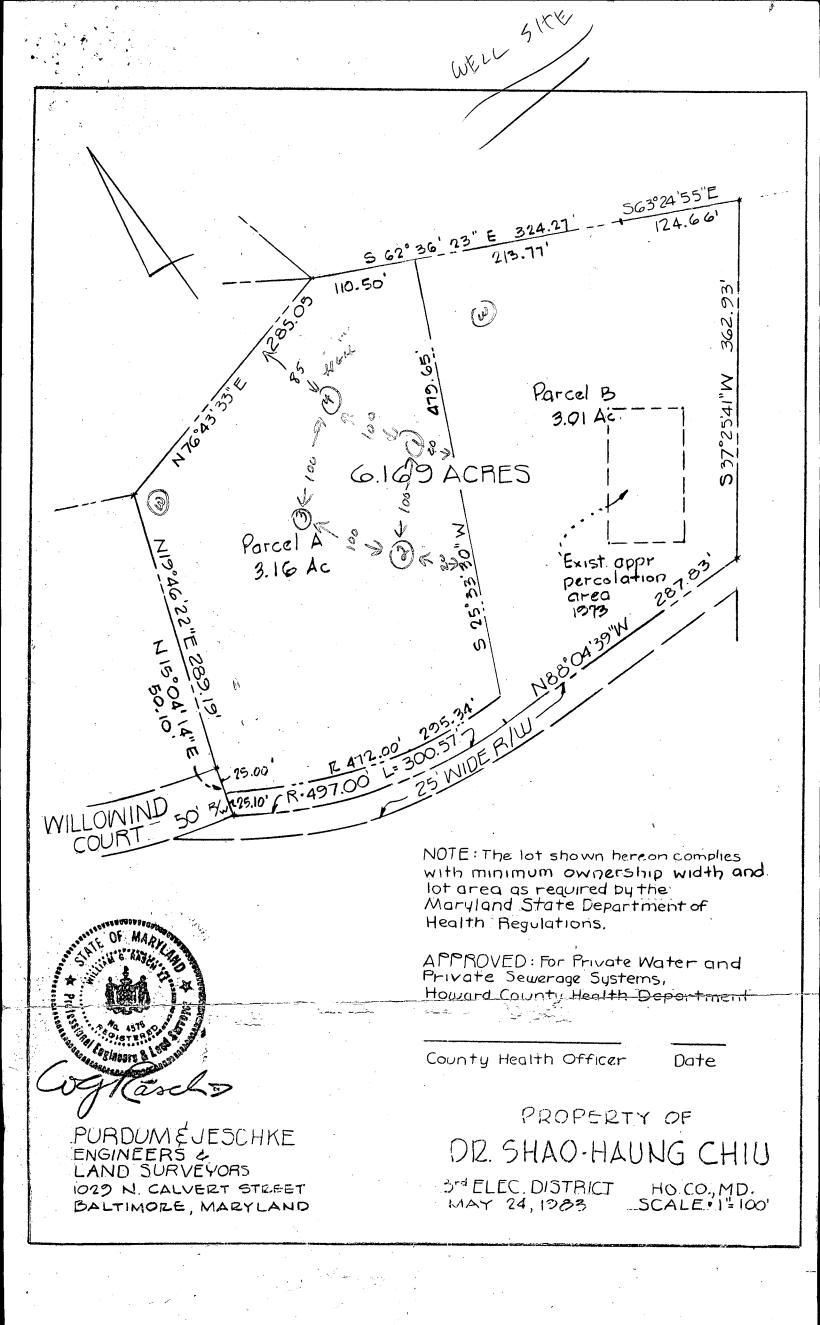
Signed this 19th day of in the factor of

FISHER, COLLINS AND CARTER, INC. CIVIL ENGINEERS AND LAND SURVEYORS 8388 COURT AVENUE ELLICOTT CITY, MARYLAND 21043

(301) 461-2855

This play of the property lines,





c 1 2167	SEQUENCE NO. (OEP USE ONLY)	STATE OF MARYLAND	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
1 23 6 (THIS NUMBER IS TO BE F IN COLS 3 6 ON ALL CAR	UNCHED	WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE	COUNTY A 32802
DATE Received	DATE WELL COMPLETE	* a (2)	PERMIT NO. FROM "PERMIT TO DRILL WELL" 28 29 30 31 32 33 34 35 36 37
	DER, AL	Cerror first name	CLARKSVILLE
STREET OR RFD		D, HILL PARSECTION MAP 22 R18	PA P.266T 4
WELL Not required fo	LOG r driven wells	GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box)	C 3
STATE THE KIND OF PENETRATED, THEI	R COLOR, DEPTH,	TYPE OF GROUTING MATERIAL	PUMPING TEST
THICKNESS AND IF DESCRIPTION (Use	FFFT Check	CEMENT CM BENTONITE CLAY BC	HOURS PUMPED (nearest hour)
additional sheets if needed)		NO. OF BAGSNO. OF POUNDS	PUMPING RATE (gal. per min. 11 15
100 Soil		GALLONS OF WATER	METHOD USED TO MEASURE PUMPING RATE Bucket WATER UEVEL (distance from land surface)
BR. Mila	3 96	48 TOP 52 54 ΒΟΤΤΟΜ 58 (enter 0 if from surface)	BEFORE PUMPING 6 17 20
Blue Mien	26 100	casing types types insert ST CO	WHEN PUMPING
CERTUMIER	100 140	appropriate code below PLASTIC OTHER	TYPE OF PUMP USED (for test).
GREWMINA	140 200	MAIN Nominal diameter Total depth CASING top (main) casing of main casing	C centrifugal R rotary O other (describe 27 below)
White Mien	000 205	TYPE (nearest inch) (nearest foot)	J jet S submersible
Blux Mica	905 300	60 61 63 64 66. 70	
	VII. 1	OTHER CASING (if used) A diameter depth (feet) H inch from to	PUMP INSTALLED
		C A S	DRILLER WILL INSTALL PUMP YES NO (CIRCLE) (YES or NO)
	4.	screen type SCREEN RECORD	IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE
		or open hole ST BR HO	TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX-SEE ABOVE: 29
		appropriate code below BRONZE HOLE PL OT	CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 35
<u>4</u> .	1	PLASTIC OTHER	PUMP HORSE POWER 37, 41
		DEPTH (nearest ft.) E 1	(nearest ft.) CASING HEIGHT (circle appropriate box
		A 8 9 11 15 17 21 H2 1 15 17 21	and enter casing height) LAND SURFACE
	PRIATE LETTER	S 23 24 26 30 32 36 R 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	below foot)
WHEN THIS WELL W		E 38 39 41 45 47 51	LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS
E ELECTRIC LOG OBTA	AINED TËD TO PRODUCTION	SLOT SIZE 123(NEAREST	BUILDING, SEPTIC TANKS, AND/OR N LANDMARKS AND INDICATE NOT LESS
WELL THEREBY CERTIFY THAT THIS WEL	L HAS BEEN CONSTRUCTED IN	OF SCREEN 56 60 INCH)	THAN TWO DISTANCES (MEASUREMENTS TO WELL) (MEASUREMENTS TO WELL)
ACCORDANCE WITH COMAR 10. AND IN CONFORMANCE WITH AL ABOVE CAPTIONED PERMIT, AN PRESENTED HEREIN IS ACCURATE	L CONDITIONS STATED IN THE	GRAVEL PACK to IF WELL DRILLED WAS FLOWING WELL INSERT	THAN TWO DISTANCES (MEASUREMENTS TO WELL) BACK LUT NO.
OF MY KNOWLEDGE.	40	FIN BOX 68 68	1.3
DRILLERS IDENT. NO. 4	Es la la	OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)	In the
DRILLERS SIGNATURE (MUST MATCH SIGNATUR	F ON APPLICATION	T (E.R.O.S.) W Q	Lo
Slane Fu	Shome	70 72	
SITE SUPERVISOR (sign. or responsible for sitework if	of driller or journeyman	TELESCOPE LOG OTHER DATA CASING INDICATOR	

HOWARD COUNTY HEALTH DEPARTMENT Bureau of Environmental Health 3525-H Ellicott Mills Drive Ellicott City, MD 21043 461-9933

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation Replacement	Receipt # 40994 Date 2/17/89
Name of Installer Robi. L. FEEZER Lo., INC.	Telephone 781-4855
License Number 2/22 Certified Well Pump Installer Well Driller	Registered Plumber
Name of Property Owner ALEN SYNDER Subdivision WOODMACK Lot # / W Site Address WICLOW WIND CTI	Telephone 785-2957 Well Tag # <u>Ho-81-2562</u>
Pump 1. Type 2. RPM 3/5 b. Shallow well jet 3. Voltage c. Submersible 3. Model 4. Capacity 4. Capacity 5. Pump exceeds well capacity 6. If Yes, is low pressure cutoff switch installed? 7. What methods are used to protect the pump and elect vibrations? Torque arrestors Cable guard	ctrical wiring from
Tank caprive Air wx-250 1. Capacity = to 220 convention 1 2. Pressure relief valve? 1. Type 2. Size 3. NSF and/or BOCA Code approved 4. Depth of supply line Pressure Recept Valve ox 5/25/57 CW I understand that it is my responsibility to notify	
Department when the installation is ready for inspect is null and void). All information given above is true to the best of my	
Signature of Applicant:	Left 2 NOUN & L. F. CO.T.

on the well casing at the time of the inspection.

