

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 5th

DATE 3/24/82

INDEX

Jack Fyock, Jr.

IS PERMITTED TO INSTALL ☒ ALTER

ADDRESS 13775 Triadelphia Road, Glenelg, Md. 21737 PHONE 988-9270

SUBDIVISION ROAD 15145 Triadelphia Mill Rd LOT

PROPERTY OWNER James Franklin Brown

ADDRESS 15165 Triadelphia Mill Rd., Glenelg, Md.

SPECIFICATIONS 3 Bedrooms

SEPTIC TANK CAPACITY 1000 GALLONS

DRAIN FIELD DEPTH FEET, BOTTOM AREA SQ. FT.

DEEP TRENCH DEPTH FEET, BOTTOM AREA SQ. FT.

SEEPAGE PITS ABSORBENT SIDE-WALL AREA SQ. FT.

INLET PIPE FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH FT. BELOW ORIGINAL GRADE

EFFECTIVE DEPTH AT FT. BELOW ORIGINAL GRADE.

LOCATE DISPOSAL AREA FT. FROM LOT LINE AND FT. FROM LOT LINE AS SEEN WHEN

FACING LOT FROM

Drywell and trench system to contain 135 sq.ft. effective sidewall absorption area per bedroom to begin below the first 4 foot of non-porous soil. Maximum depth for drywell or trench bottom is 10 ft. below original grade. Place the drywell 80 ft. from the front lot line and 110 ft. from the right side line as seen when facing the property from Clarksville, Triadelphia Road. Start the trench after a 5 foot earth buffer with the drywell and proceed to dig it on level ground the necessary distance. Call for inspection of trench before placing gravel in trench.

PLANS APPROVED BY Frank Skinner DATE 3/32/82

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 PLACING GRAVEL IN TRENCH.

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER.

NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

PERMIT VOID AFTER THREE YEARS.

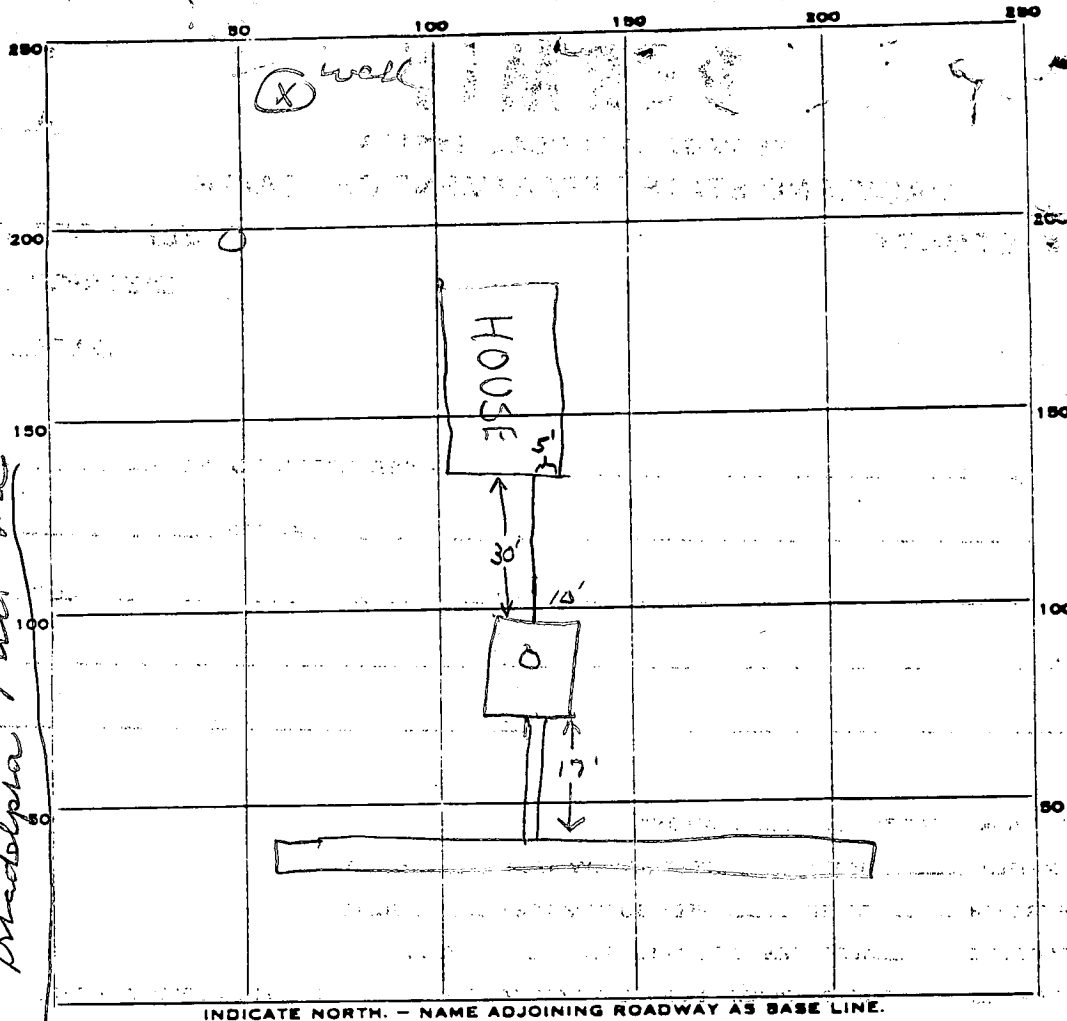
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA ACCEPTED.

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

BLDG. PERMIT SIGNED
AND RETURNED 3/24/82

Serial # 49031

EH-2-1079



PERMIT CARD

SEPTIC TANK, LEVEL ✓

CLEANOUTS 57

DISTRIBUTION BOX, LEVEL ✓

TILE FIELD, DEPTH 10 FT. TRENCH WIDTH 2 FT.

GRAVEL DEPTH 6 IN. TOTAL LENGTH 85 FT.

NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA 510

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

ABSORBENT AREA 510 SQ. FT.

REMARKS 3/26/82 OK to cover work to septic tank

Must see house connection call when ready for
5/5/82 OK to cover all work & S.

DATE SYSTEM APPROVED 5/5/82

INSPECTOR Fr. Skinner

C1 3125	SEQUENCE NO. (OEP USE ONLY)	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.
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)				
Date Received (OEP use only)	DATE WELL COMPLETED <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 8 15 20 1 16 21 2 17 22 </div>	Depth of Well <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 22 24 26 145 (TO NEAREST FOOT) </div>	PERMIT NO. FROM "PERMIT TO DRILL WELL" <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 28 29 30 31 32 33 34 35 36 37 10-73-4130 </div>	
OWNER <u>Brown</u> <small>last name</small>		<u>James F.</u> <small>first name</small>		
STREET OR RFD <u>Triadelphia Road</u>		TOWN <u>Glenn</u>		
SUBDIVISION _____		SECTION _____		LOT _____

WELL LOG <small>Not required for driven wells</small> STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING			GROUTING RECORD WELL HAS BEEN GROUTED Y N <small>(Circle Appropriate Box)</small> TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE CLAY BC NO. OF BAGS <u>11</u> NO. OF POUNDS <u>1134</u> GALLONS OF WATER <u>1.6</u> DEPTH OF GROUT SEAL (to nearest foot) from <u>0</u> ft. to <u>145</u> ft. <small>48 TOP (enter 0 if from surface) 52 54 56 58 BOTTOM</small>			C 3 3 <small>(seq. no.)</small> PUMPING TEST HOURS PUMPED (nearest hour) <u>3</u> PUMPING RATE (gal. per min. to nearest gal.) <u>10</u> METHOD USED TO MEASURE PUMPING RATE <u>submersible</u> WATER LEVEL (distance from land surface) BEFORE PUMPING <u>30</u> WHEN PUMPING <u>30</u> TYPE OF PUMP USED (for test) A air P piston T turbine C centrifugal R rotary O other (describe below) J jet S submersible								
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:30%;">DESCRIPTION (Use additional sheets if needed)</th> <th style="width:20%;">FEET</th> <th style="width:50%;">Check if water bearing</th> </tr> <tr> <th></th> <th>FROM</th> <th>TO</th> </tr> </thead> <tbody> <tr> <td style="height: 100px; vertical-align: top;"> <u>Sand</u> <u>gray micaceous rock</u> </td> <td style="vertical-align: top;"> <u>0</u> <u>46</u> <u>46</u> </td> <td style="vertical-align: top;"> <u>46</u> <u>145</u> </td> </tr> </tbody> </table>			DESCRIPTION (Use additional sheets if needed)	FEET	Check if water bearing		FROM	TO	<u>Sand</u> <u>gray micaceous rock</u>	<u>0</u> <u>46</u> <u>46</u>	<u>46</u> <u>145</u>	CASING RECORD casing types insert appropriate code below <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 5px; text-align: center;"> ST STEEL PL PLASTIC </div> <div style="border: 1px solid black; padding: 5px; text-align: center;"> CO CONCRETE OT OTHER </div> </div> MAIN CASING TYPE ST 6 58 <small>60 61 62 64 66 70</small> Nominal diameter top(main) casing (nearest inch) Total depth of main casing (nearest foot)		
DESCRIPTION (Use additional sheets if needed)	FEET	Check if water bearing												
	FROM	TO												
<u>Sand</u> <u>gray micaceous rock</u>	<u>0</u> <u>46</u> <u>46</u>	<u>46</u> <u>145</u>												
OTHER CASING (if used) diameter inch depth (feet) from to EACH CASING 			PUMP INSTALLED YES Y NO N DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: (A, C, J, P, R, S, T, O)) 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 - below 2 (nearest foot)											
C 2 2 <small>(seq. no.)</small> DEPTH (nearest ft.) 140 56 145 <small>8 9 11 13 15 17 21 23 24 26 30 32 36 38 39 41 45 47 51</small> SLOTTED SCREEN SLOT SIZE <u>2</u> DIAMETER OF SCREEN (NEAREST INCH) <small>56 60</small> GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL CIRCLE BOX F OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q TELESCOPE CASING LOG INDICATOR OTHER DATA 			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) <div style="border: 1px solid black; padding: 10px; height: 100px; text-align: center;"> </div>											

CIRCLE APPROPRIATE BOX 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. <u>228</u> <u>James F. Brown</u> DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) SITE SUPERVISOR (sign of driller or journeyman responsible for sitework if different from permittee)
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Prat
2/26/82
9:30 A.M.

APPLICATION

A 31809

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

3 B.R. 1000 gallon septic tank
4 B.R. 1250 gallon septic tank

DISTRICT 5th

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

Drywell and trench system to DATE 2-19-82

contain 135 SQ. FT. effective subsurface absorption area per bedroom to begin below the first 4 feet of non-porous soil. Maximum depth for drywell or trench bottom is 10 feet below original grade. Place the drywell 80 feet from the front lot line and 110 ft. from the right side line as seen when facing the property from Clarksville Triadelphia Road. Start the trench after a 5 foot earth buffer with the drywell and proceed to dig it on level ground the necessary distance. Call for inspection of trench before placing gravel in trench.

PROPERTY OWNER James Franklin Brown

ADDRESS 15165 Triadelphia Mill Rd. Glenelg, Md. 21737 PHONE (301) 489-4460

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. _____

ROAD AND DESCRIPTION west side of Triadelphia Mill Rd, at intersection of Triadelphia and Triadelphia Mill Rd, in Glenelg, Md.

SIZE OF LOT 1 acre TYPE BLDG. 3 bedroom rancher
(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. James Franklin Brown
(SIGNATURE OF APPLICANT)

APPROVED BY Frank Skinner FOR Drywell & trench DATE 3/22/82

REJECTED BY _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

① thru ⑤

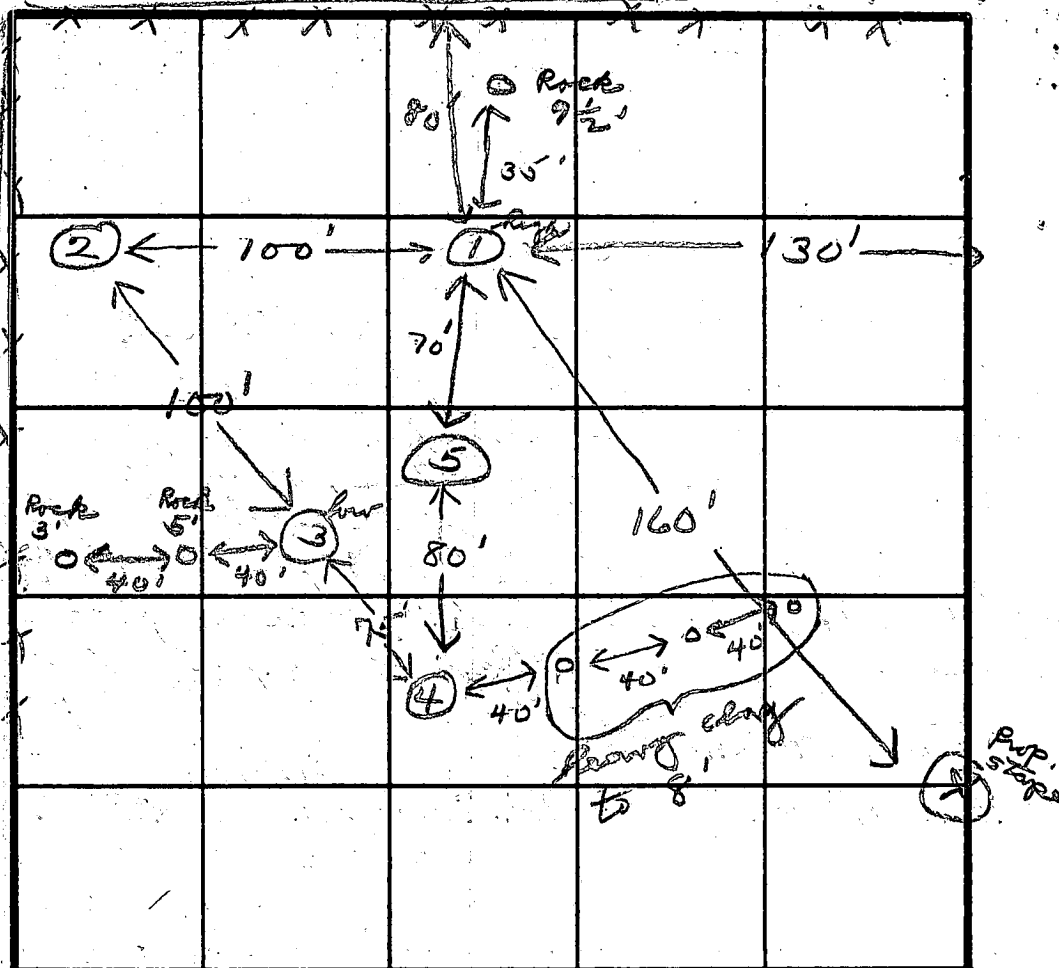
SOIL PROFILE

clay

4

sand,
mud - fan

12.



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

[illegible]

REMARKS

TYPE OF SOIL

TESTED BY

ALSO PRESENT

ALSO PRESENT: Lyck

B 1 7368

SEQUENCE NO.
WRA USE ONLYSTATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL

WRA PERMIT NUMBER

40-73-4130

(THIS NUMBER IS TO BE PUNCHED
IN COLS. 3-6 ON ALL CARDS)

please print or type

fill in this form completely

DATE RECEIVED

03/05/82

3/16/82 A.M.
9:308 (WRA USE ONLY) 13
OWNER INFORMATION

LAST NAME Brown OWNER F. James FIRST NAME James

15 15165 Treadelphia Mill Rd 34

36 Stlenely Md. 55

TOWN 57 Stlenely STATE Md. 76 ZIP

B 1 CONTINUED

DRILLER INFORMATION

DRILLER'S NAME Joseph L. Mayne 338 77 LICENSE NO. 80

SIGNATURE Joseph L. Mayne Mar 5, 82 DATE

B 2

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN) 5

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 750

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)

APPROXIMATE DEPTH OF WELL 160 FEETAPPROXIMATE DIAMETER OF WELL 6 INCH

Method of Drilling (circle one)

BORED (OR AUGERED) JETTED JETTED & DRIVEN

30- AIR ROTARY AIR PERCUSSION ROTARY (HYDRAULIC)

37 CABLE REVERSE ROTARY DRIVE POINT ROTARY

other _____

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 DEEPEMED AN EXISTING WELL
- PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52

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

APPROX. PERMIT NUMBER GAP

WRITE INITIALS CONDITIONS 40-73-4130

FORCE ES IN BOX 57 68

A E N S G W Q C L U

B 5

SPECIAL CONDITIONS (WRA USE ONLY)

B 3

LOCATION OF WELL

COUNTY Howard

SUBDIVISION _____

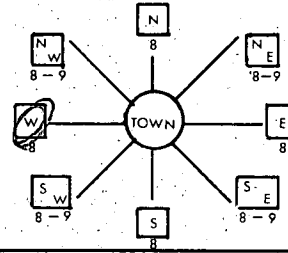
SECTION 44 LOT 48

NEAREST TOWN Stlenely

MILES FROM TOWN (enter 0 if in town) 3 3/10 M I

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

30

34 DISTANCE FROM ROAD (CIRCLE APPROPRIATE BOX)

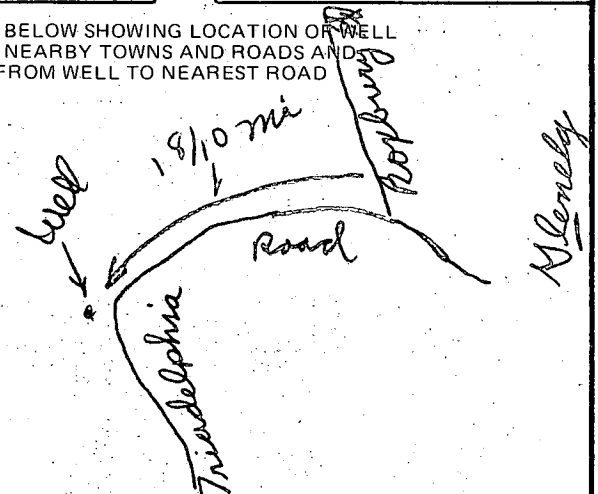
SHOW LOCATION OF WELL WITH AN "X" IN THIS BOX

790

510

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



B 4

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVALCOUNTY NAME HOWARDCOUNTY NO. A31809

EHA SIGNATURE

STATE HEALTH CIRCLE BOX

MO. DAY YR

03/12/82

NORTH 511 EAST 0790

GRID 50 55 GRID 57 63

ELEV. (FT.)

APPROVED FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS HOWARD COUNTY HEALTH DEPARTMENT

James Brown
COUNTY HEALTH OFFICER
DATE **3-4-82**

- LEGEND
- DENOTES LOCATION OF DWELLING
 - DENOTES PROPOSED WELL
 - DENOTES FIELD LOCATION OF PERC HOLES

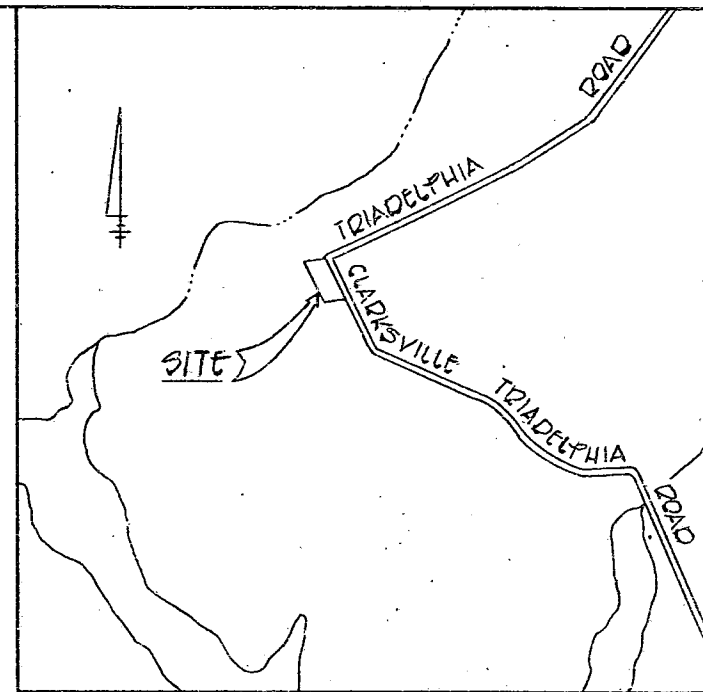
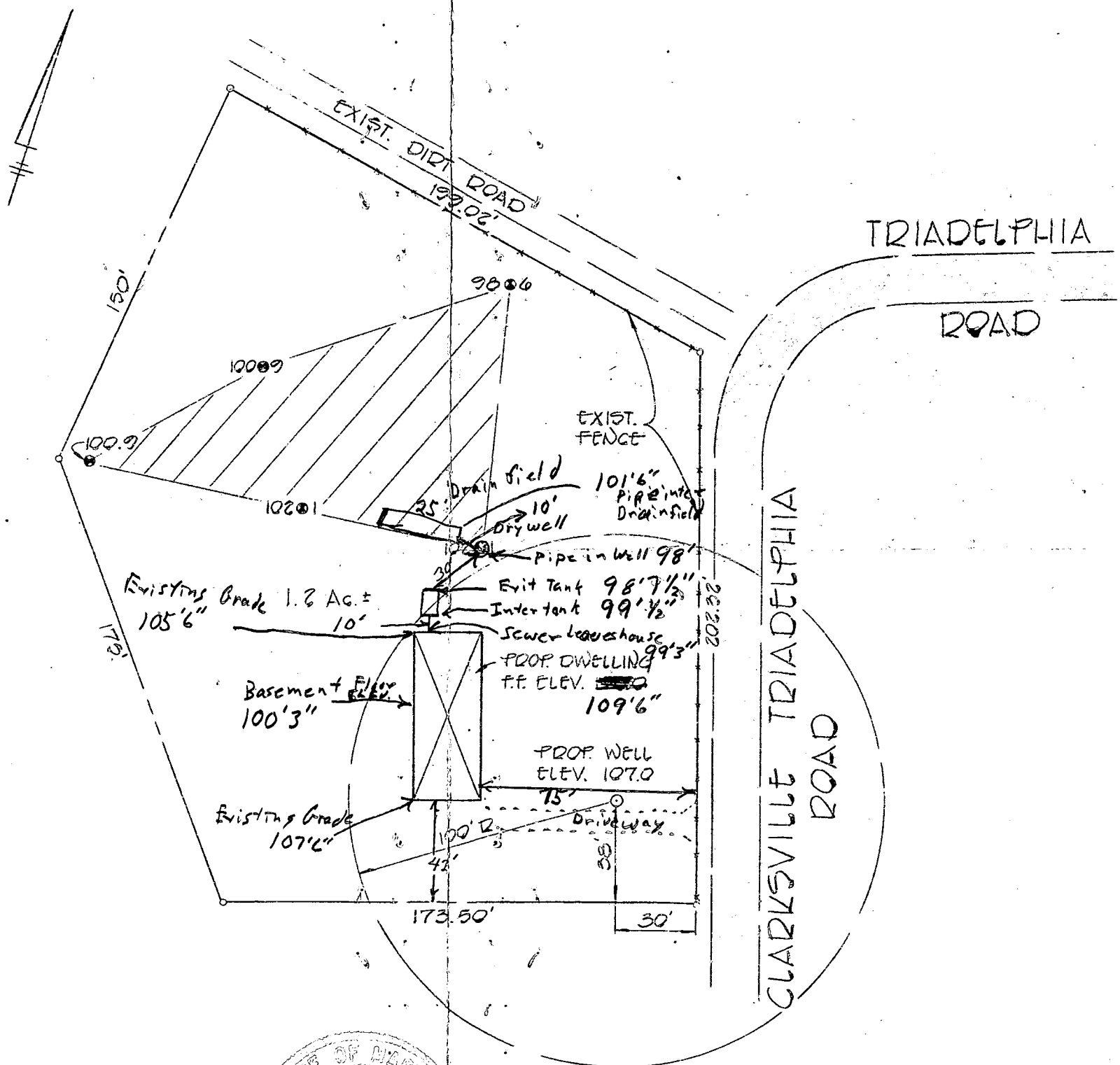
EXIST. SOIL TYPE - MIBZ

NOTES:

THE LOT SHOWN HEREON COMPLIES WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREA AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF HEALTH AND MENTAL HYGIENE.

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.

DENOTES FIELD LOCATION OF PERC TEST HOLE. PERCOLATION AREAS AND WATER WELLS FOR ADJOINING LOTS WILL BE SHOWN WHERE PERTINENT.



VICINITY MAP
SCALE: 1" = 1,200'

ok 3-24-82
JF
plan & location

992-2330

FISHER, COLLINS AND CARTER, INC.
CONSULTING ENGINEERS AND LAND SURVEYORS
18 COURT AVENUE
BETHESDA CITY, MARYLAND 20814
PHONE: (301) 461-2855

Terrell A. Fisher
TERRELL A. FISHER
DATE **3/4/82**

Fred Formelt
PERC. TEST CERTIFICATION
PROPERTY OF
JAMES F. BROWN
5TH ELECTION DISTRICT
SCALE: 1" = 50'
HOWARD COUNTY, MARYLAND
FEBRUARY 18, 1982

Depth of well 145
Distance of measuring point (M.P.) above ground 1 1/2
Static water level (S.W.L.) below M.P. 30

[illegible]