

1/11/80 Files approved  
C.B.D.

# PERMIT

P 30114  
30114  
A 18980

1/11/80

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH\*

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 4th

INDEXED

DATE 8/23/79

~~Harry Hosford~~ Van Sant Plumbing IS PERMITTED TO INSTALL  ALTER

ADDRESS 18062 Cactus Court, Gaithersburg, Md. 20760 PHONE \_\_\_\_\_

SUBDIVISION Florence Farms ROAD 3107 5127 Route 04 LOT Parcel 13

PROPERTY OWNER Harry Hosford Cabin Run 255

ADDRESS same as above

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 125 SQ. FT. per bedroom.

INLET PIPE 4 1/2 FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH 11 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

Locate dry well 192 ft. in from front of lot and 130 ft. off right property line.

(Perc hole 1 & 2 when facing lot from common road.)

PLANS APPROVED BY Charles B. Streaker DATE 8/13/75

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.

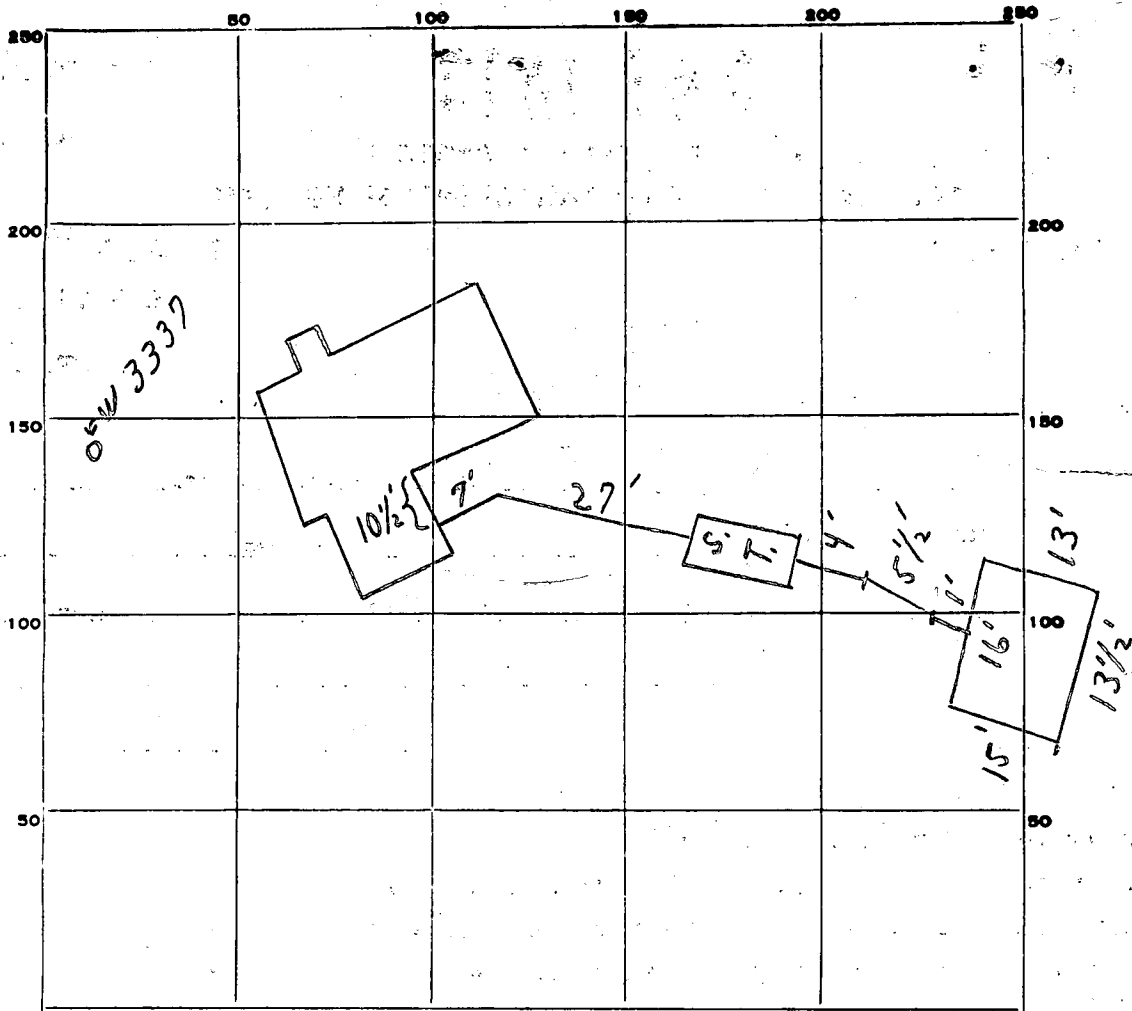
PERMIT VOID AFTER THREE YEARS.

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.

BLDG. PERMIT SIGNED  
AND RETURNED 5/10/94  
Serial # 54135  
Interior allocation

A  
18980  
30114

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



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.  
COMMON ROAD

PERMIT CARD

SEPTIC TANK, LEVEL  CLEANOUTS  S.T. | D.W.

DISTRIBUTION BOX, LEVEL \_\_\_\_\_

TILE FIELD, DEPTH \_\_\_\_\_ FT. TRENCH WIDTH \_\_\_\_\_ FT.

GRAVEL DEPTH \_\_\_\_\_ IN. TOTAL LENGTH \_\_\_\_\_ FT.

NUMBER OF TRENCHES \_\_\_\_\_ TOTAL BOTTOM AREA \_\_\_\_\_

SEEPAGE PITS, INSIDE DIAMETER 57 1/2 FT. DEPTH BELOW INLET 6.5<sup>+</sup> FT.

ABSORBENT AREA 374<sup>+</sup> SQ. FT.

REMARKS 1/11/80 OK TO COVER SYSTEM EXCEPT FOR AREA AROUND CLEAN-  
OUTS AT SEPTIC TANK AND DRY WELL. 1/11/80 SYSTEM COMPLETE  
C.B.S. C.B.V.

DATE SYSTEM APPROVED 1/11/80 above INSPECTOR C. B. V. Stecker



PRELIMINARY

# APPLICATION

A 18980

## SEWAGE DISPOSAL TESTING

P \_\_\_\_\_

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SERVICES  
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 465-5000, EXT. 356

DISTRICT 4th

DATE 9/14/73

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 Florence Farms, Ltd.

ADDRESS Suite 200, Md. National Center, Rockville 20850 PHONE 424-2900

PROPERTY LOCATION:

SUBDIVISION \_\_\_\_\_ LOT NO. Parcel 13

ROAD AND DESCRIPTION ~~Route 94~~ 3107 Cabin Run

SIZE OF LOT 5 acres TYPE BLDG. 3 or 4 bedrooms

NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE \_\_\_\_\_

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ Hansen Watkins

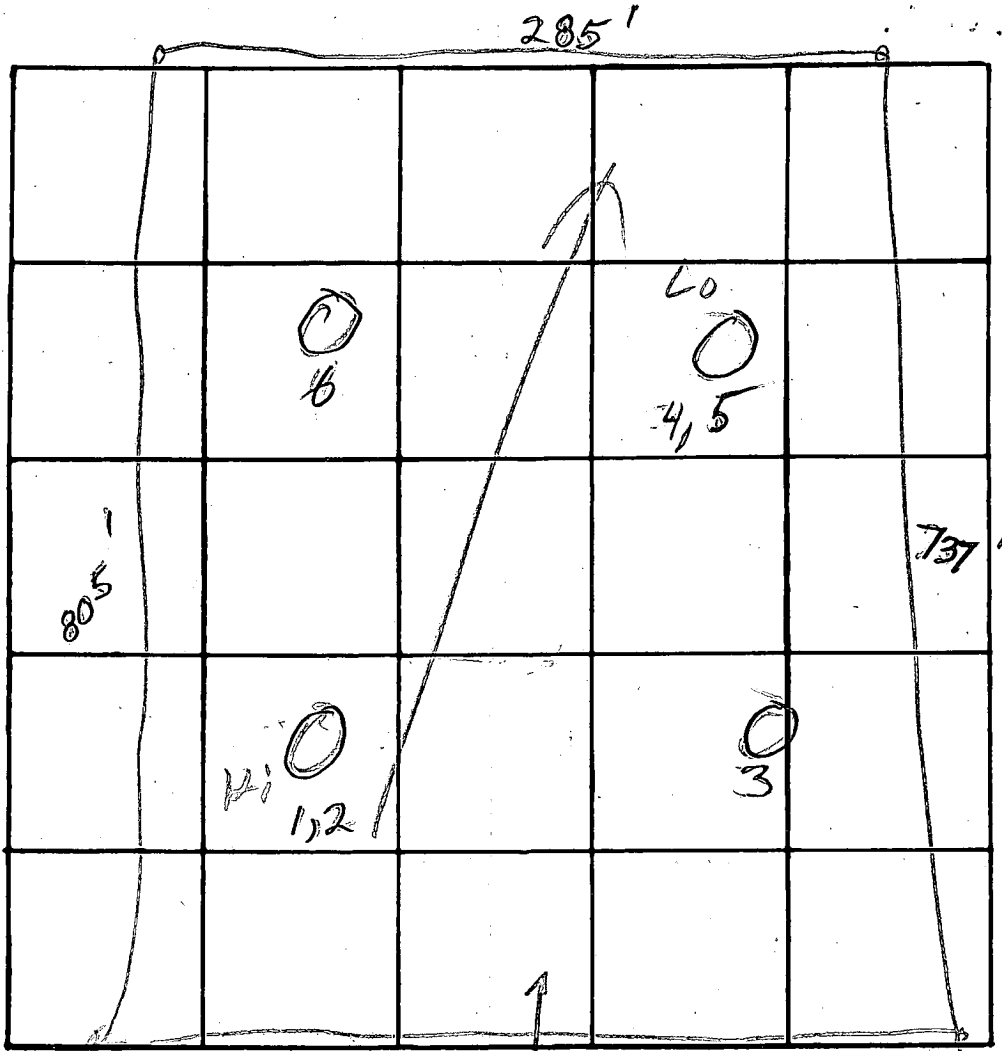
APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_  
(KIND OF SYSTEM)

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_  
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING \_\_\_\_\_

# THIS IS NOT A PERMIT



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE

Lot 13

Rd

Edge of road <sup>new</sup>

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
10/10	1	11 s	2:00	2:04	2:04	2:10	6	
	2	4 1/2 o	2:01	2:09	2:09	2:21	12	
	3	10 1/2	V. s. wh. similar to					
	4	10 1/2 s	2:38	2:39	2:39	2:40	1	
	5	4 1/2 o	2:39	2:41	2:41	2:49	8	
	6	10	V. s. wh. similar to #1, 2					
						4/	27	

7 min

REMARKS certify holes Rm / ©  
 TYPE OF SOIL all woods



**B 1** 0903 SEQUENCE NO. (WRA USE ONLY)

1 2 3 (SEQ. NO.) 6  
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

**STATE OF MARYLAND**  
**WATER RESOURCES ADMINISTRATION**  
**TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401**  
**APPLICATION FOR PERMIT TO DRILL WELL**

**WRA PERMIT NUMBER**  
 HC-73-3337

**FILL IN THIS FORM COMPLETELY**

**DATE RECEIVED (WRA USE ONLY)**  
 8/1/79  
 9:30 A.M.

**OWNER** Howard  
 COL 15 LAST NAME FIRST NAME COL 34

**STREET OR RFD** 17062 Dr. Hanes e St. Md  
 COL 36 COL 55

**POST OFFICE** Baltimore Md 21284  
 COL 57 COL 76

**B 1 CONTINUED DRILLER INFORMATION**

1 2 3 (SEQ. NO.) 6

**DATE** 8-12-79 **LICENSE NUMBER** 40  
 77 80

**FIRST NAME** George **DRILLER** Easterday **LAST NAME**

**SIGNATURE** George Easterday

**B 3 LOCATION OF WELL**

1 2 3 (SEQ. NO.) 6 Howard

**COUNTY** 8 (DO NOT ABBREVIATE COUNTY NAME) 21

**SUBDIVISION** 23 42

**SECTION** 44 46 **LOT** 48 50

**NEAREST TOWN** Thermans 71

**MILES FROM TOWN (ENTER 0 IF IN TOWN)** 1 M 76 77 78

**B 2 WELL INFORMATION**

1 2 3 (SEQ. NO.) 6

**MAXIMUM PUMPING RATE (GALLONS PER MINUTE)** 5 8 12

**AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY)** 600 14 20

**USE FOR WATER (CIRCLE APPROPRIATE BOX)**

D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)

F FARMING, AGRICULTURE, IRRIGATION

I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT.

M MUNICIPAL WATER SUPPLY } MUST HAVE STATE HEALTH DEPT. APPROVAL

P PRIVATE WATER COMPANY }

T TEST

**B 4 DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)**

1 2 3 (SEQ. NO.) 6

S SOUTH  W WEST  N NORTH  E EAST  NE NORTHEAST  SE SOUTHEAST  NW NORTHWEST  SW SOUTHWEST

**NEAR WHAT ROAD** Dr 94

**ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)**  N NORTH  S SOUTH  E EAST  W WEST

**DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX)** 34 37 38 39 FT MI

**APPROXIMATE DEPTH OF WELL** 150 FEET 24 26

**APPROXIMATE DIAMETER OF WELL** 6" (NEAREST INCH)

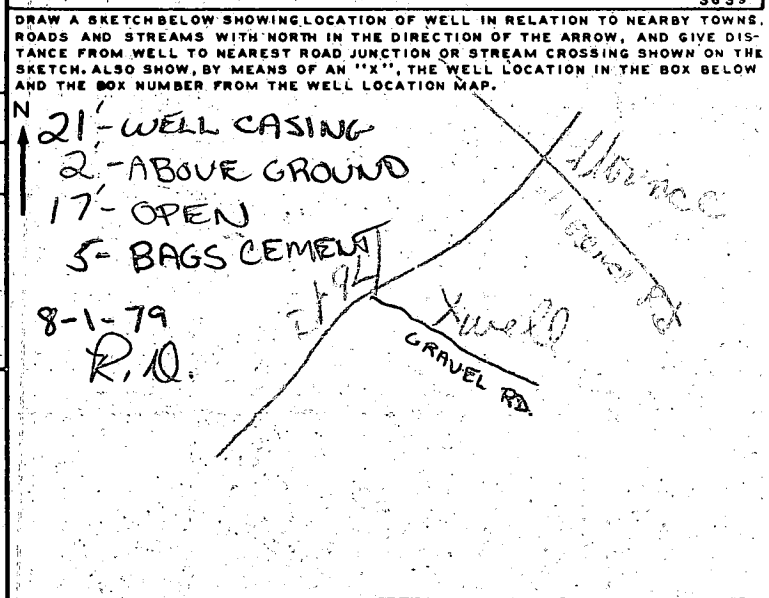
**METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)**

BORED (OR AUGERED)  JETTED  DRIVEN

AIR-ROTARY  AIR-PERCUSSION  ROTARY (HYDRAULIC ROTARY)

CABLE  REVERSE-ROTARY  DRIVE-POINT

**OTHER (DESCRIBE)**



**REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)**

N THIS WELL WILL NOT REPLACE AN EXISTING WELL

Y 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 DEEPEIN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE)

**NOT TO BE FILLED IN BY DRILLER (WRA USE ONLY)**

**APPROPRIATION PERMIT NUMBER** 54 **ENGINEER REVIEW DISTRICT NO.** 63

**FORCE** 67 **WRITE INITIALS IN BOX** 68 **CONDITIONS** 70 71 72 73 74 75 76 77 78 79

**BOX NUMBER** 760 538

**NORTH COORDINATE** 50 51 52 53 54 55

**EAST COORDINATE** 57 58 59 60 61 62 63

**ELEVATION AT WELL HEAD (FEET)** 65 66 67 68

**B 4 CONTINUED HEALTH DEPARTMENT APPROVAL**

1 2 3 (SEQ. NO.) 6

**STATE HEALTH (CIRCLE BOX)** S **COUNTY NAME** Howard **COUNTY NO.** 21400

**DATE** 8 1 79 **APPROVED BY** Donald B. Monaghan

**B 5 SPECIAL CONDITIONS 8-63 (WRA USE ONLY)**

1 2 3 (SEQ. NO.) 6

**HEALTH**

805.75'

Florence Farms  
Lot 13  
3127 Route 94

737.19'

SEPTIC S  
DRY W  
DR

410

WATER WELL ELEVATION 580.0'

SEPTIC AREA

DRY WELL

EXISTING BARN

RIGHT OF WAY

Scale: 1" = 60'

13'

50'

100'

40'

130'

259'

189'

192'

50'