

Partial 6/2/78 MS Final 6/5/78
P 27507 MS
A 26966 502940

6/2/78

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 3rd

DATE 1/30/78

INDEXED

Howard Edwards

IS PERMITTED TO INSTALL X ALTER

ADDRESS

PHONE

SUBDIVISION

ROAD Triadelphia Road

LOT B

PROPERTY OWNER Mary & Robert Brandt

ADDRESS 13071 Triadelphia Road, Ellicott City, Md.

SPECIFICATIONS 3 bedroomss

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 120 SQ. FT. per bedroom

INLET PIPE 4 FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH 12 FT. BELOW ORIGINAL GRADE

EFFECTIVE DEPTH AT FT. BELOW ORIGINAL GRADE.

LOCATE DISPOSAL AREA 215 FT. FROM front LOT LINE AND 25 FT. FROM left LOT LINE AS SEEN WHEN
FACING LOT FROM Triadelphia Road.

NOTE: The left lot line is 923.69 feet long and has a bearing of 515.

PLANS APPROVED BY Raymond Hodges

DATE 11/21/77

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.

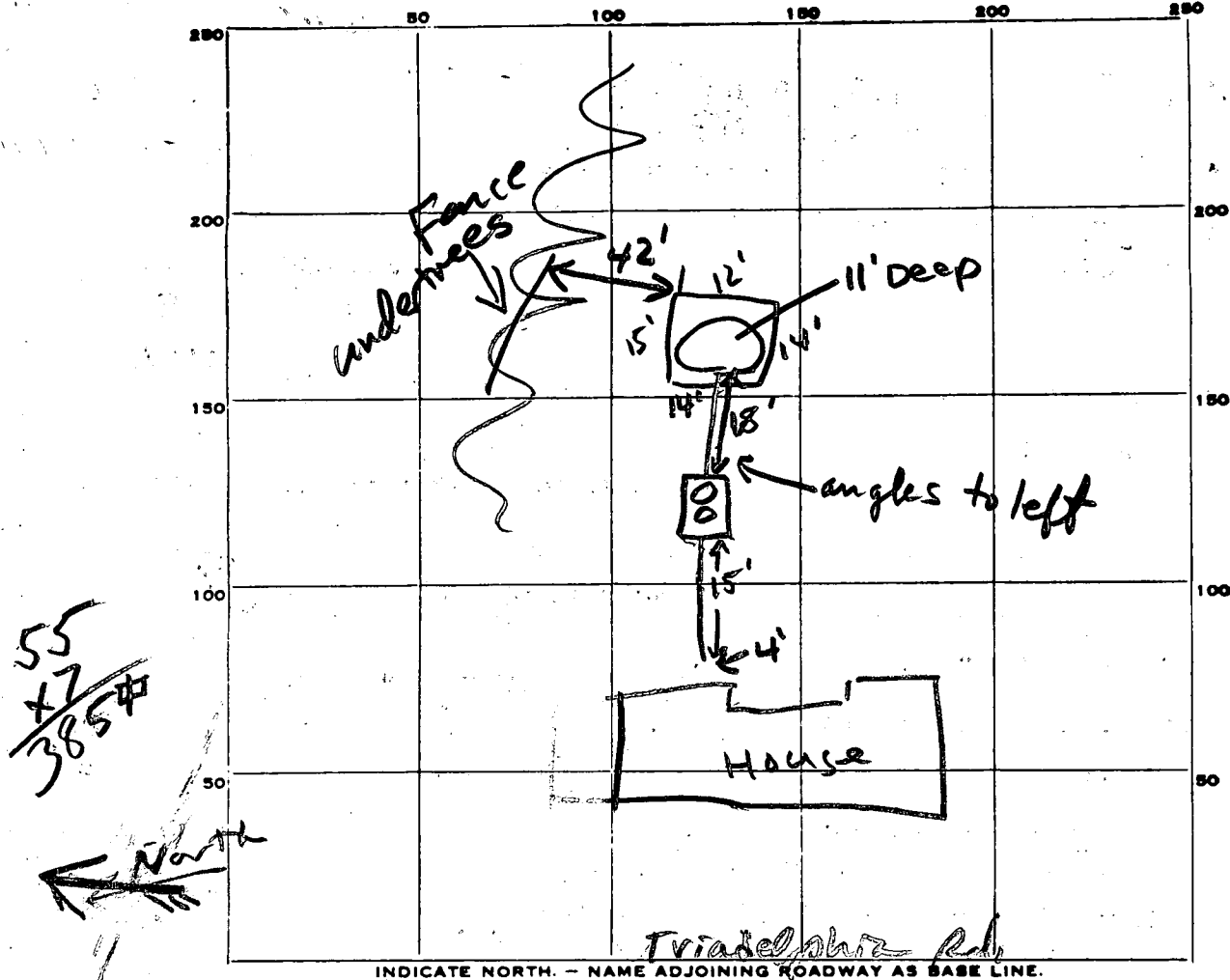
NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

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.

A 26966 502940



PERMIT CARD yes

SEPTIC TANK, LEVEL yes

CLEANOUTS terra cotta

DISTRIBUTION BOX, LEVEL N/A

TILE FIELD, DEPTH N/A FT. TRENCH WIDTH _____ FT.

GRAVEL DEPTH _____ IN. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ TOTAL sidewall BOTTOM AREA _____

SEEPAGE PITS, INSIDE DIAMETER Perim. 55 FT. DEPTH BELOW INLET 7 FT.

ABSORBENT AREA 385 SQ. FT.

REMARKS Reconnect pipe outlet from septic tank.
Stop work, call office system may be in wrong location.
No lot lines staked out. J/S 6/2/78
Location OK, Pipe reset in cement per Mr.
Edwards today 6/5/78 J/S

DATE SYSTEM APPROVED 6/5/78

INSPECTOR J/S J/S

APPLICATION

A 26966

P

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

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

DISTRICT 3rd

DATE 9/28/77

*See separate sheet for specs*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 Mary C. & Robert C. BrandtADDRESS 13071 Triadelphia Road, Ellicott City, Maryland PHONE

PROPERTY LOCATION:

SUBDIVISION LOT NO. Parcel BROAD AND DESCRIPTION next to 13071 Triadelphia RoadSIZE OF LOT ? 6.288 Ac 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.

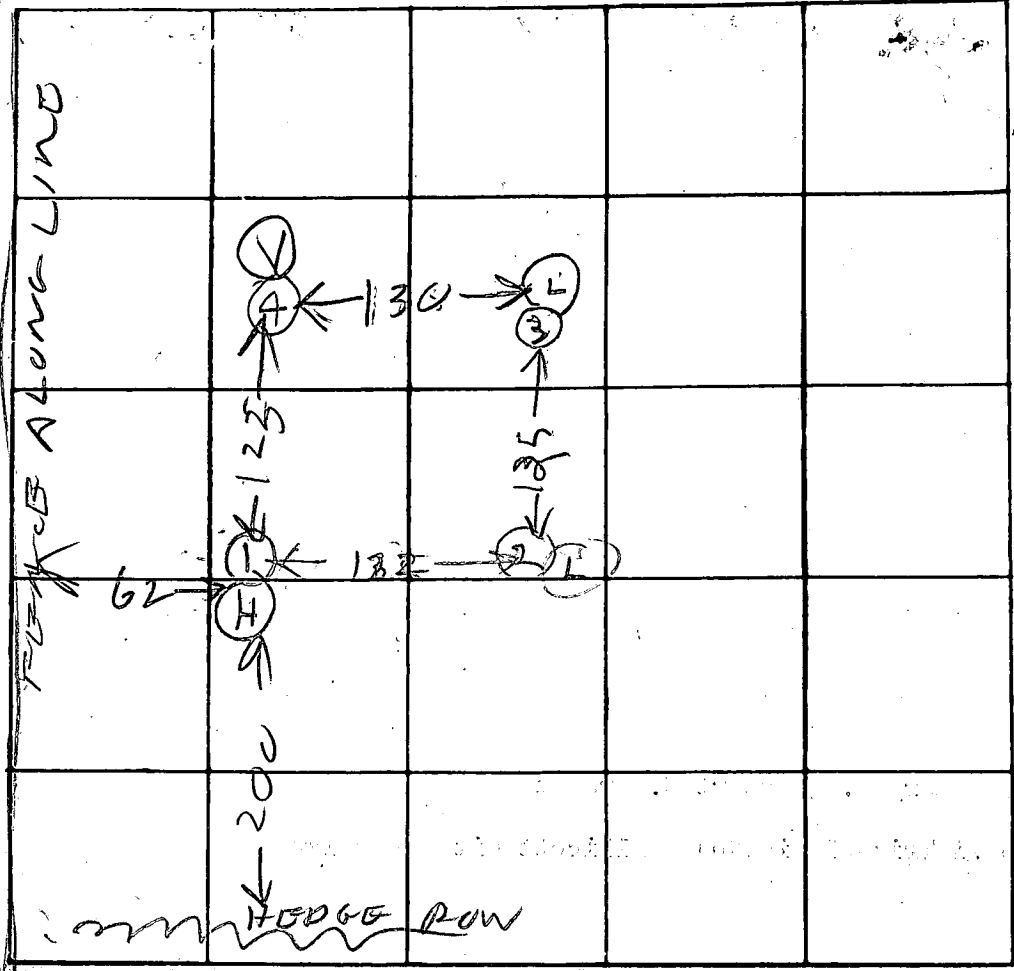
SIGNATURE OF APPLICANT Howard H. Edwards BLDG. PERMIT SIGNED AND RETURNED 11/4/78APPROVED BY Raymond Hodge FOR Dry Well DATE 11/21/77
(KIND OF SYSTEM)REJECTED BY FOR DATE
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS DATE

REASONS FOR REJECTION OR HOLDING 10/13/77 Perc D/K Hold for
Plat R.H. 10/27/77 Final Plat OK by R.H. 11/21/77
Signed Plat Returned

THIS IS NOT A PERMIT

TO TRIDEMOUNTAIN DRIVE WAY



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE

45

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
10/13/77	1 S	4 1/2	1025	1029	1029	1035	6
	1 D	12 1/2	1026	1029	1029	1030	1
	2 S	5 1/2	1034	1100	1100	1012	12
	2 D	13	1034	1040	1040	1046	6
	3 S	4	1044	1045	1045	1048	3
	3 D	14 1/2	1051	1100	1100	1128	28
10/13/77	4 V	13	TOP OF	3F7 OF 2 SAND	CLAY		

HOLE LEVELS
HIGHEST
NEXT LOW
LOWEST
NEXT
11/6/72

REMARKS

Per O/K Certify Holes & Submit Plan

TYPE OF SOIL

TESTED BY

B. J. Fudge

ALSO PRESENT:

H. Edwards

* 12-6-94 No final plat required -
subdivision done by
deed (adjoiner transfer)

A 50294D

SUBDIVISION: Brandt Property

LOT NUMBER: 7

DRY WELL OR DRY WELL AND TRENCH

Existing House

_____ sq. ft./bedroom

	<u>Septic Tank</u>
3 bedroom	1000 gallon
4 bedroom	1250 gallon
5 bedroom	1500 gallon

Minimum Total Square Feet

Inlet _____ feet below original grade.

Bottom maximum depth _____ feet below original grade.

Effective area begins at _____ feet below original grade.

NOTE: If trench is used to make up absorbent area, run the trench on level ground and leave a 5-foot earth buffer between dry well and trench. No trench is to exceed 100 feet in length. Trench inlet to be same as dry well, with _____ feet of stone below distribution pipe.

TRENCHES

180 sq. ft./bedroom

Trench to be 2 wide.

Inlet 3' feet below original grade.

Bottom maximum depth 7' feet below original grade.

Effective area begins at 3' feet below original grade.

4 feet of stone below distribution pipe.

- NOTE:
- (1) No trench to exceed 100 feet in length.
 - (2) If more than one trench used, a distribution box is required.
 - (3) Trenches to be installed on level ground.
 - (4) Call for inspection of trench before gravel is installed.
 - (5) Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank and drywell.
 - (6) If a garbage disposal is used, increase septic tank capacity by 50% and increase absorbent sidewall area by 22%.

LOCATION: 1/3/94 FOR FUTURE REPAIRS - RUN TRENCHES OFF EXISTING
SYSTEM. BEGINNING FROM THE BACK LEFT LOT CORNER START
FIRST REPAIR TRENCH 35 FEET UP THE BACK LOT LINE AND
200 FEET OFF THAT SAME LOT LINE WHEN FACING THE LOT
FROM TRIADELPHIA ROAD. RUN TRENCHES ON CONTOUR TOWARD
THE FRONT LOT LINE ALUM

APPLICATION

PERCOLATION TESTING

A 502940

P _____

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

DISTRICT _____

DATE 9/23/94

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER _____

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. LOT 7
EXISTING HOUSE

ROAD AND DESCRIPTION _____

TAX MAP _____ PARCEL # _____

SIZE OF LOT _____ TYPE BLDG. _____
(SINGLE FAMILY DWELLING OR COMMERCIAL)

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. _____

(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

COUNTY #

SOIL PROFILE

0' A B
dark
orange
brn
SiCL

3.5' pink
SiL
50%
shale
OR
↓
diggable
hard bottom

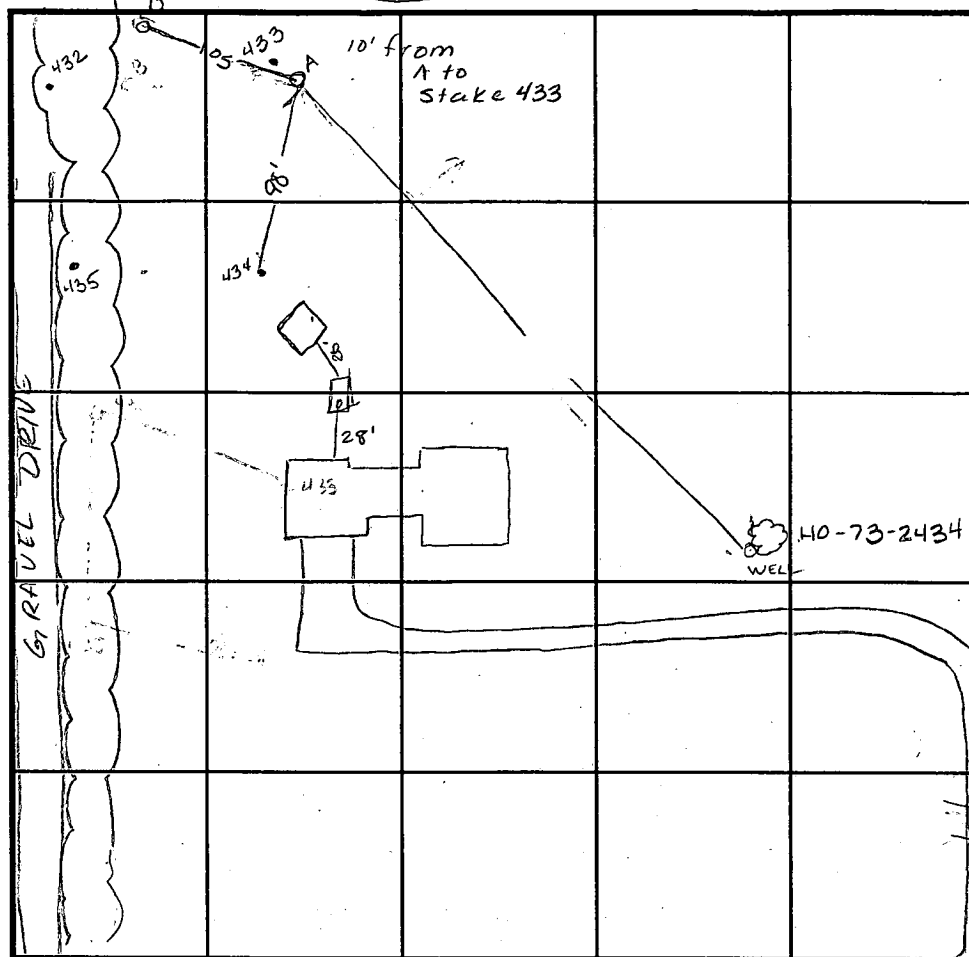
12.5'

A
dark
orange

22' ———
lgt brn
SiL

4.5' reddish
brn
SSiL
15%
shale
hard
diggable
bottom

10'



SOIL PROFILE

0'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE. TRIADELPHIA RD

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8-19-94	B	3.5' / V125	5:48	5:48 ⁴⁵	5:48 ⁴⁵	5:49 ¹⁵	30sec
	B	repour	5:50	5:51	5:51	5:52 ¹⁵	1 1/4 min
	A	3.5' / V10'	5:56	5:56 ³⁰	5:56 ³⁰	5:57	30sec
	A	repour	5:57	5:58	5:58	5:59 ¹⁵	1 1/4 min
	A	repour	5:59 ³⁰	6:02	6:02	6:04	2min

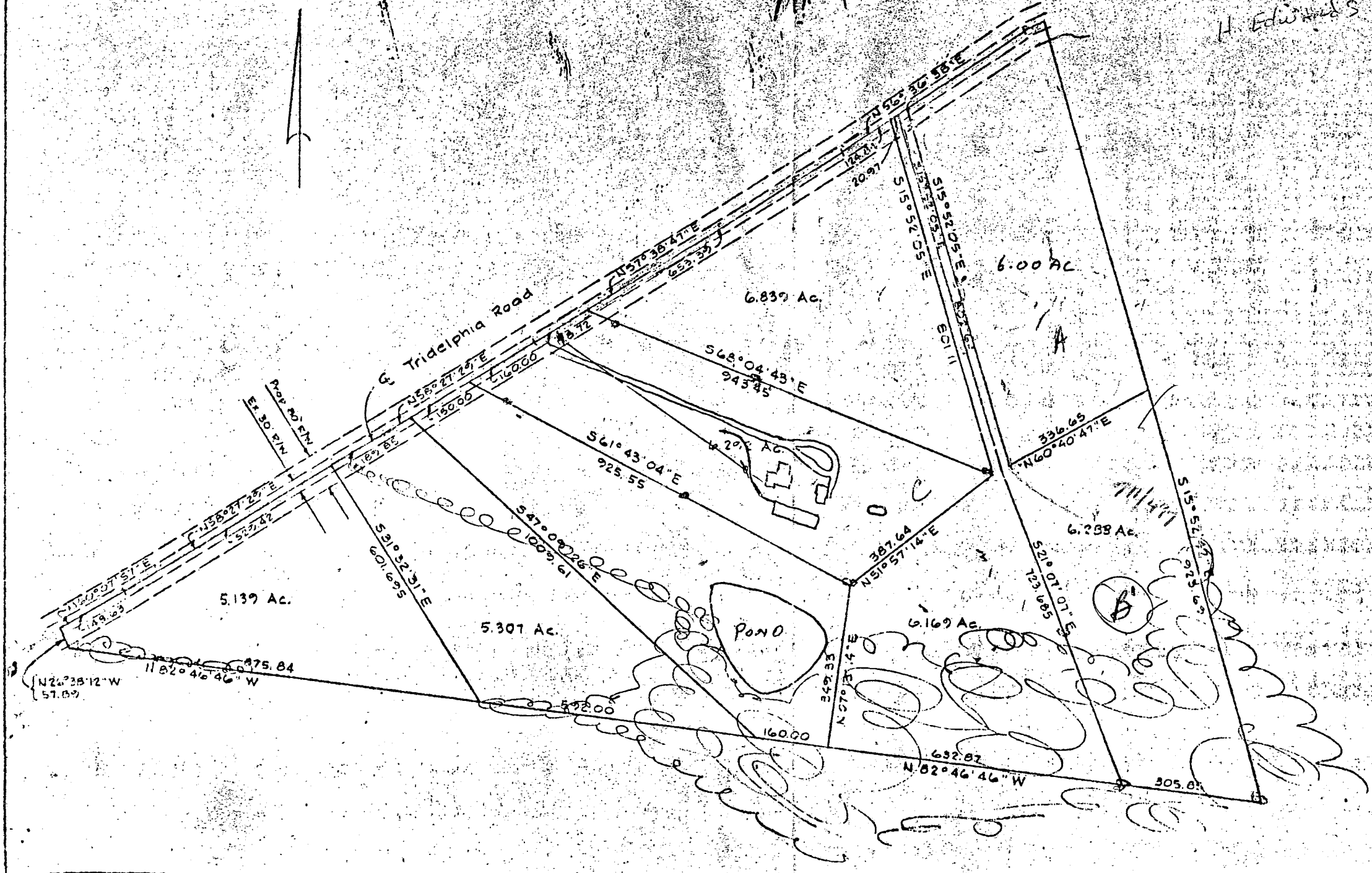
REMARKS shallow system only

TYPE OF SOIL _____

TESTED BY Amy McMillen ALSO PRESENT OLAN KETTERMANTRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 2 min TRENCH WIDTH 3'INLET DEPTH 3 MAXIMUM BOTTOM DEPTH 5 SQ. FT./BEDROOM 180Lot 7
EXISTING
HOUSE

Mary C Brandt

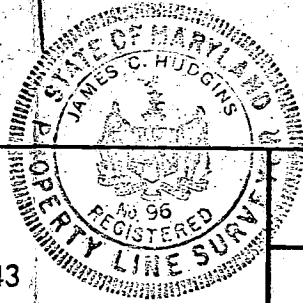
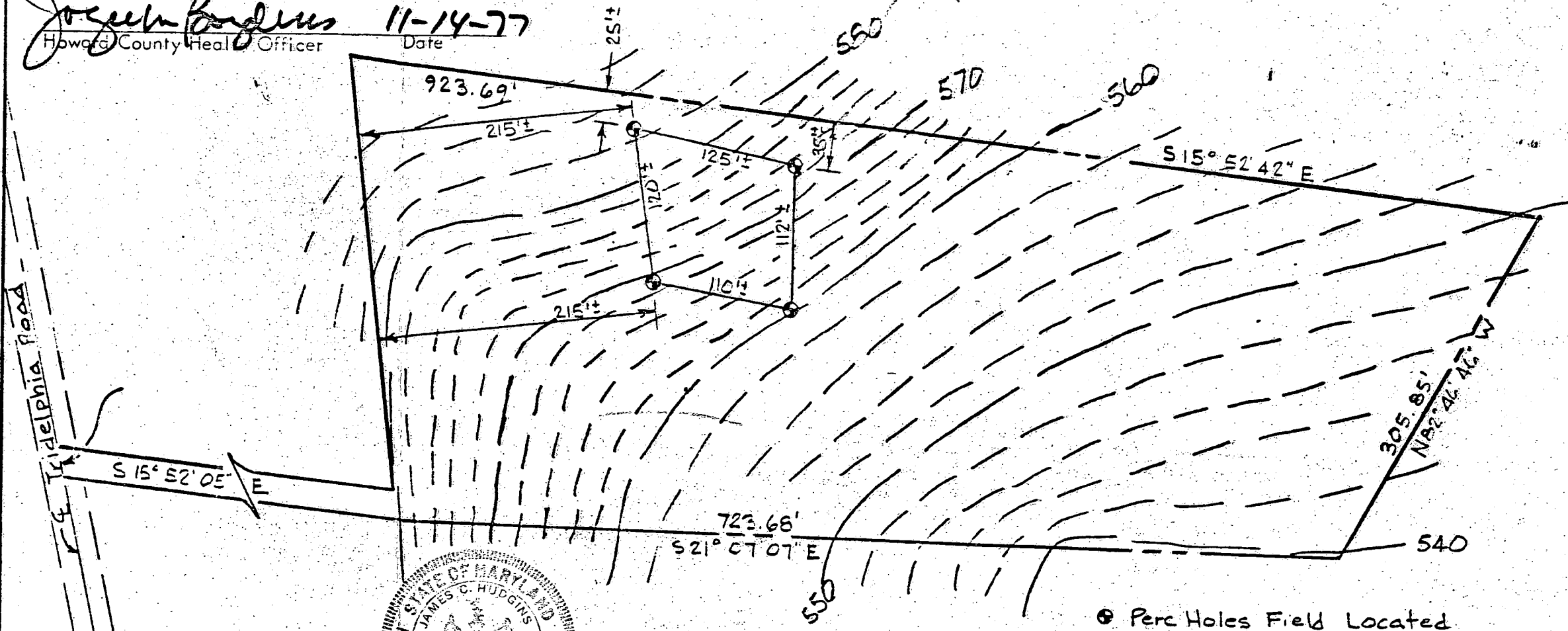
H. Edwards



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

APPROVED: Private Water and Private Sewer

Joseph P. Higgins 11-14-77
Howard County Health Officer Date

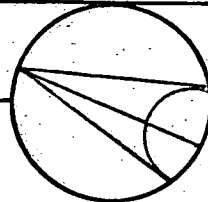


Owner: Mrs. Mary C. Brandt
13071 Tridelpia Road
Ellicott City, Maryland 21043

J. Carl Hudgins
J. CARL HUDGINS

No. 96

REFERENCE



MERIDIAN

RICHARD P. BROWNE ASSOCIATES
CONSULTING ENGINEERS, PLANNERS
WAYNE, N.J. COLUMBIA, MD.

MAP OF PROPERTY OF
MARY C. BRANDT

SITUATED IN
3rd Election District Howard County, Md.

SCALE: 1"=100'

DATE: 10-25-77

DRAWN _____ CHECKED _____

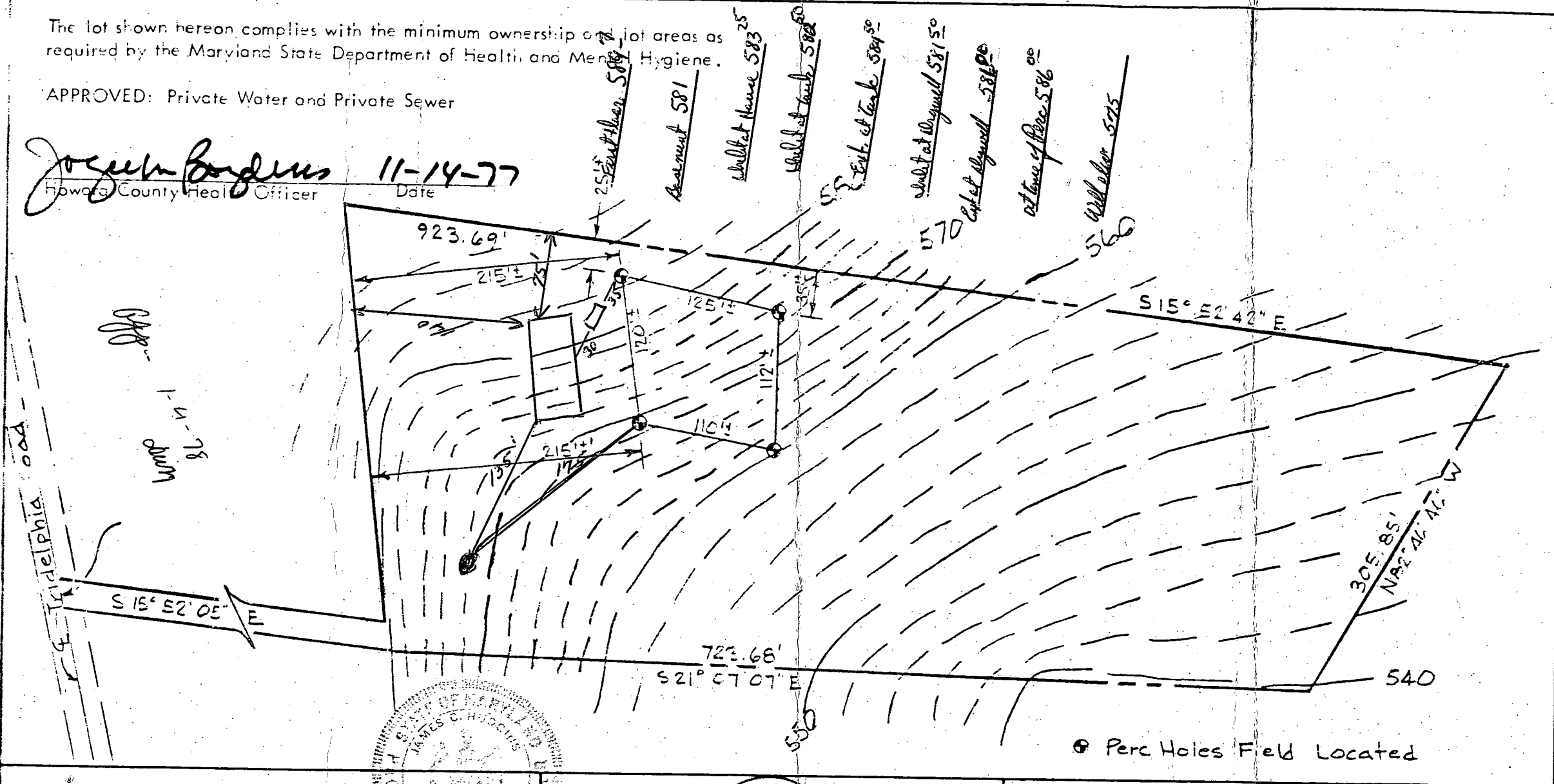
PROJECT No. 3591 W. O. No. _____

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

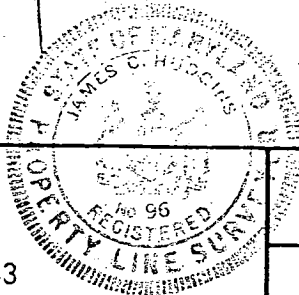
APPROVED: Private Water and Private Sewer

Joseph Borders
Howard County Health Officer

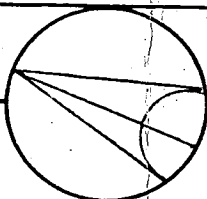
11-14-77
Date



Owner: Mrs. Mary C. Brandt
13071 Tridelphia Road
Ellicott City, Maryland 21043



REFERENCE



MERIDIAN

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MAP OF PROPERTY OF
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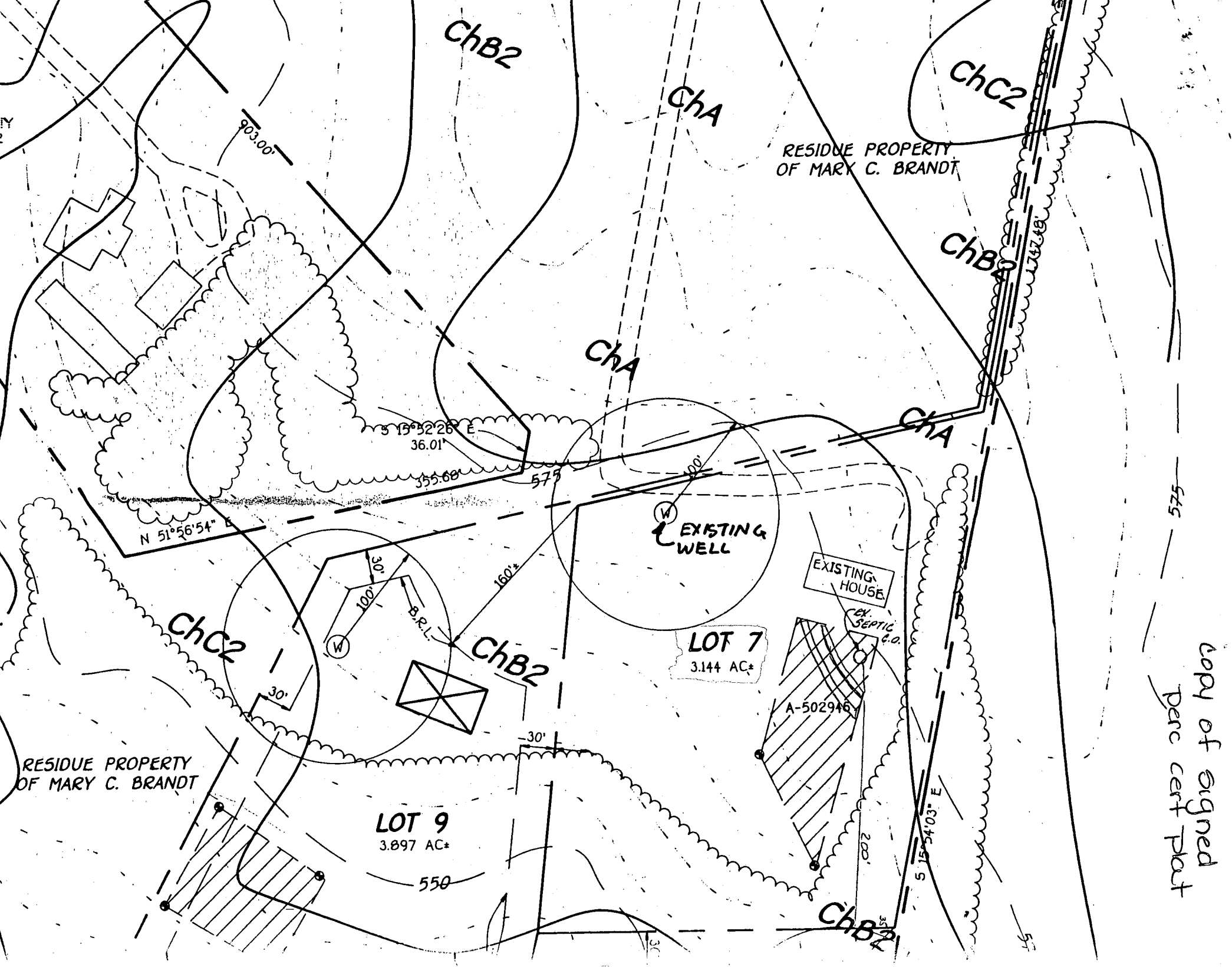
SITUATED IN
3rd Election District Howard County, Md.

SCALE: 1"=100'

DATE: 10-25-77

PROJECT No. 3591 W. O. No. _____

DRAWN _____ CHECKED _____



copy of signed
perc cent plat

DRILLER: OBTAIN HEALTH DEPT. APPROVAL AND RETURN ALL PARTS OF THIS FORM INTACT TO THE WATER RESOURCES ADMINISTRATION.

EMERGENCY NO. (If any) -

B 1		8.802		SEQUENCE NO. (WRA USE ONLY)		STATE OF MARYLAND WATER RESOURCES ADMINISTRATION TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401 APPLICATION FOR PERMIT TO DRILL WELL		WRA PERMIT NUMBER	
1 2 3 (SEQ. NO.) 6		(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)						FILL IN THIS FORM COMPLETELY	

DATE RECEIVED (WRA USE ONLY) 12/20/77 10:00 AM		OWNER Baendt (BRANDT) Mary	
STREET OR RFD Elliott City Md -		FIRST NAME COL. 34	
POST OFFICE		COL. 55	
COL. 57		COL. 76	

B 1		CONTINUED		DRILLER INFORMATION	
1 2 3 (SEQ. NO.) 6					
DATE		12/3, 1977		LICENSE NUMBER 238	
FIRST NAME		Joseph L. Mayne		LAST NAME	
SIGNATURE		Joseph L. Mayne			

B 2		WELL INFORMATION	
1 2 3 (SEQ. NO.) 6			
MAXIMUM PUMPING RATE (GALLONS PER MINUTE)		5	
AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY)		250	

USE FOR WATER (CIRCLE APPROPRIATE BOX)	
☒ HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)	
☐ FARMING, AGRICULTURE, IRRIGATION	
☐ INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT.	
☐ MUNICIPAL WATER SUPPLY	
☐ PRIVATE WATER COMPANY	
☐ TEST	

APPROXIMATE DEPTH OF WELL		200		FEET	
APPROXIMATE DIAMETER OF WELL		6		(NEAREST INCH)	

METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)	
☒ BORED (OR AUGERED) ☐ JETTED ☐ DRIVEN	
80-87 ☒ AIR-ROTARY ☐ AIR-PERCUSSION ☐ ROTARY (HYDRAULIC ROTARY)	
☐ CABLE ☐ REVERSE-ROTARY ☐ DRIVE-POINT	
OTHER (DESCRIBE)	

REPLACEMENT OR DEEPEINED 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 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	
ENGINEER REVIEW DISTRICT NO.	
FORCE	
WRITE INITIALS IN BOX	
CONDITIONS	

B 4		CONTINUED		HEALTH DEPARTMENT APPROVAL	
1 2 3 (SEQ. NO.) 6					
STATE HEALTH (CIRCLE BOX)		Howard		W27189	
MO. DAY YR.		COUNTY NAME		COUNTY NO.	
DATE		APPROVED BY			

B 3		LOCATION OF WELL	
1 2 3 (SEQ. NO.) 6			
COUNTY		Howard	
SUBDIVISION		21	
SECTION		42	
NEAREST TOWN		48	
MILES FROM TOWN (ENTER 0 IF IN TOWN)		2 1/2	

B 4		DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)	
1 2 3 (SEQ. NO.) 6			
☐ NORTH ☒ EAST ☐ NORTHWEST ☐ SOUTHWEST			
☐ SOUTH ☐ WEST ☐ NORTHWEST ☐ SOUTHWEST			
NEAR WHAT ROAD		Philadelphia Rd.	
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)		☒ SOUTH ☐ NORTH	
DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX)		60	

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWN, ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON THE SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX BELOW AND THE BOX NUMBER FROM THE WELL LOCATION MAP.

12/20/77
Well OK
See other side
Philadelphia Rd.
will be 3 miles
Rose Mary Lane

BOX NUMBER		E 810		N 520	
NORTH COORDINATE		50 51 52 53 54 55		EAST COORDINATE	
ELEVATION AT		57 58 59 60 61 62 63			

TO TRUCKS OR SHEDS AT
↓
RIVER W/7

(P9)

(P7)

(P7) = PERC HOLES

(D17) = DRY HOLES

(W) = Well

(P7)

(P7)

136

(P17)

(D17)

(W)

12/20/77 950 AM

- ① Well has 45 ft casing with 2 ft out of ground
- ② 39 ft of depth of open hole measured with a string
- ③ Location of well OK
- ④ Truck stuck so we had to wait till after lunch to go out
- ⑤ 13 bags used well OK

R. Hodger

C 1 9195

SEQUENCE NO.
(WRA USE ONLY)

STATE OF MARYLAND

WATER RESOURCES ADMINISTRATION

TAWES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401

WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION

FILL IN THIS FORM COMPLETELY

COUNTY
NUMBERDATE RECEIVED
(WRA USE ONLY)

DATE WELL COMPLETED

DEPTH OF WELL

22 (TO NEAREST FOOT) 26

PERMIT NO. FROM "PERMIT TO DRILL WELL"

40-173-9934

28 29 30 31 32 33 34 35 36 37

DRILLERS IDENTIFICATION NO.

238

OWNER *Born*

LAST NAME

FIRST NAME

STREET OR RFD *Clinton St*POST OFFICE *7th*

WELL LOG

WELL DESCRIPTION

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION
(USE ADDITIONAL SHEETS IF NECESSARY)

FEET

FROM

TO

CHECK IF
WATER BEARING*Sand**C 43**Micro Rock**43 205*

GROUTING RECORD

WELL HAS BEEN GROUTED
(CIRCLE APPROPRIATE BOX)

YES

NO

☒ Y☐ N

TYPE OF GROUTING MATERIAL (CIRCLE BOX)

CEMENT

☒ C M

BENTONITE CLAY

☐ B CNO. OF BAGS *13* NO. OF POUNDS *1722*GALLONS OF WATER *78*

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM *0* FT. TO *39* FT.
(ENTER 0 IF FROM SURFACE)

CASING TYPES

CASING RECORD

INSERT
APPROPRIATE
CODE
BELOW

S T

C O

STEEL

CONCRETE

P L

O T

PLASTIC

OTHER

MAIN CASING TYPE

NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH)

TOTAL DEPTH OF MAIN CASING (NEAREST FOOT)

☒ S T*1**45*

EACH CASING

OTHER CASING (IF USED)

DIAMETER (INCH)

DEPTH (FEET)

FROM

TO

SCREEN TYPE OR OPEN HOLE

SCREEN RECORD

INSERT
APPROPRIATE
CODE
BELOW

S T

B R

H O

STEEL

BRASS - OPEN HOLE OR BRONZE

P L

O T

PLASTIC

OTHER

C 2

1 2 3 (SEQ. NO.) 6

EACH SCREEN

DEPTH (NEAREST WHOLE FOOT)

FROM

TO

1 *4* *0* *43* *0* *205*

2

3

23 24 26 30 32 36

38 39 41 45 47 51

SLOT SIZE 1, 2, 3,

DIAMETER OF SCREEN *56* (NEAREST INCH)

FROM

TO

GRAVEL PACK

IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX

☒ F

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

T

(E.R.O.S.)

W Q

70

72

74 75 76

TELESCOPE CASING

LOG INDICATOR

OTHER DATA AVAILABLE

CIRCLE APPROPRIATE BOXES

☐ 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 I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CAPTIONED "PERMIT TO DRILL WELL", AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

DRILLERS NAME

(PLEASE PRINT)

*Joseph L. Mayne*SIGNATURE *Joseph L. Mayne*

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) *6*PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) *3*METHOD USED TO MEASURE PUMPING RATE *air*

WATER LEVEL: (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING *55* (NEAREST FOOT)WHEN PUMPING *80* (NEAREST FOOT)

TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST)

☒ A AIR☐ P PISTON☐ T TURBINE☐ C CENTRIFUGAL☐ R ROTARY☐ O OTHER (DESCRIBE BELOW)☐ J JET☐ S SUBMERSIBLE

PUMP INSTALLED

TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: A, C, J, P, R, S, T, O)

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX)

YES

NO

☒ Y☐ N

CAPACITY:

GALLONS PER MINUTE (TO NEAREST GALLON) *31* *35*PUMP HORSE POWER *37* *41*PUMP COLUMN LENGTH (NEAREST FOOT) *43* *47*

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)

☒ + ABOVE☐ - BELOW

LAND SURFACE

(NEAREST FOOT)

*49**2**51*

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURE SUCH AS BUILDINGS, SEPTIC TANKS, AND/OR OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)

front lot line

245 ft

any well

160 ft

245 ft

any well

50 ft

front lot line

APPLICATION

PERCOLATION TESTING

A 45281

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH

P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

DISTRICT _____

DATE 11/28/89

PERC OK
11/28/89 CW
Engro

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 GEORGE F. KIELMAN C/O LAND DESIGN & DEVELOPMENT, INC.

ADDRESS 8307 MAIN ST. ELLICOTT CITY 21043 PHONE 461-4600
JOHN REUWER

PROSPECTIVE BUYER N/A

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION KIELMAN PROPERTY LOT NO. EXIST HOUSE

ROAD AND DESCRIPTION 13071 TRIADELPHIA RD
ELLICOTT CITY MD. 21043

TAX MAP 22 PARCEL # 400

SIZE OF LOT 3 ACRES +/- TYPE BLDG. SFD
(SINGLE FAMILY DWELLING OR COMMERCIAL)

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. John C. Run 11/28/89
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 12/9/89 PERC OK HOLD FOR

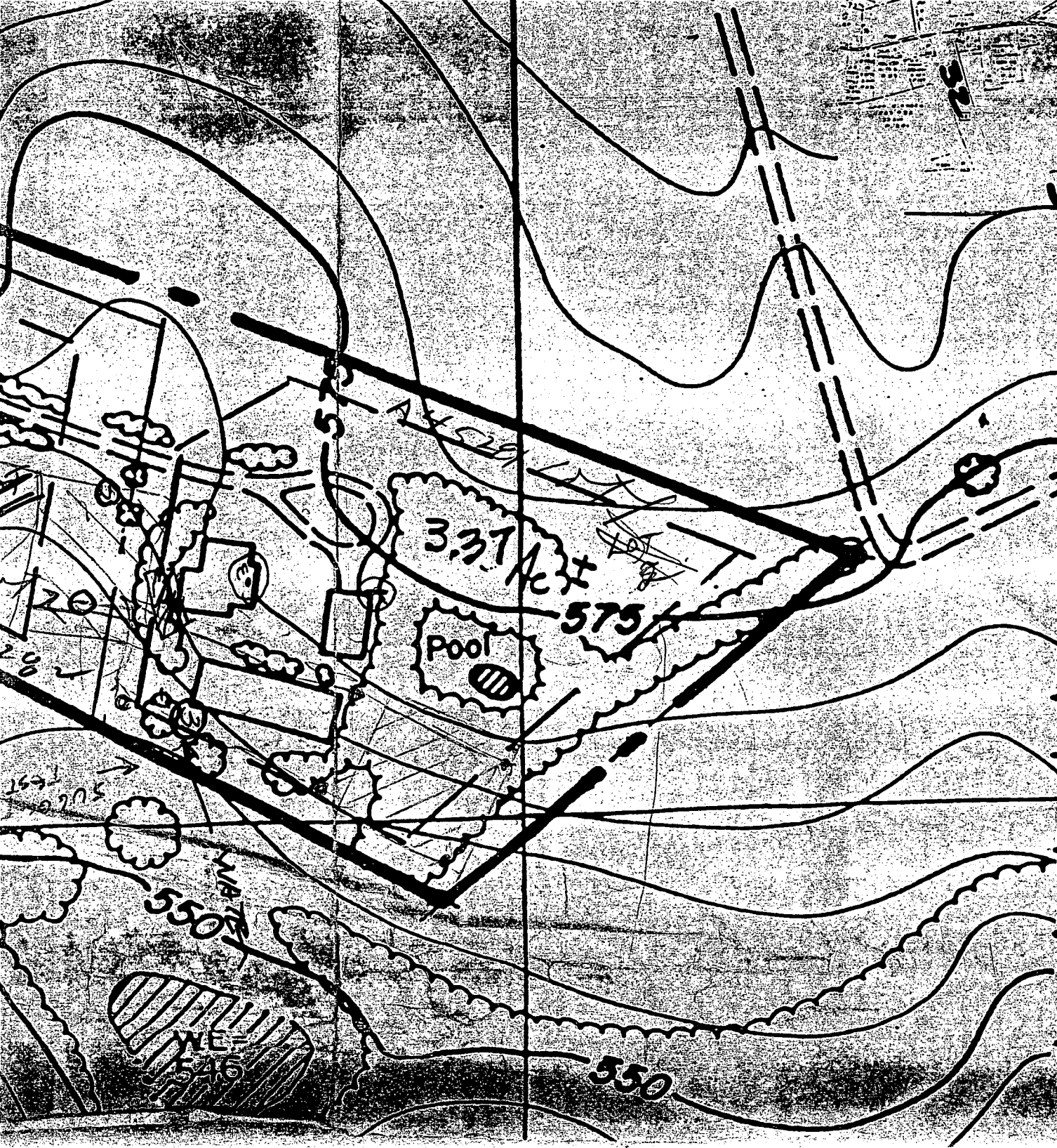
PLAT LOT LINES MUST BE CHANGED

TO FIT REPAIR WERC AREA

3/13/90 PERC CONT PLAT OK PER RP

THIS IS NOT A PERMIT

ALSO PRESENT John R. Rewe
Kellerman Jr
Lee R. Trautman



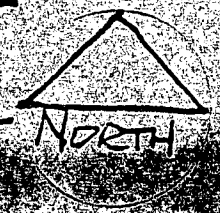
VICINITY MAP

**LAND ♦ DESIGN
& DEVELOPMENT
INCORPORATED**

8307 Main Street, Ellicott City, MD 21043

**KIELMAN
PROPERTY**

PERC PLAN
SCALE 1" = 100'



NOV 27, 1989

ED-
NTY.

ChB2

GnB2

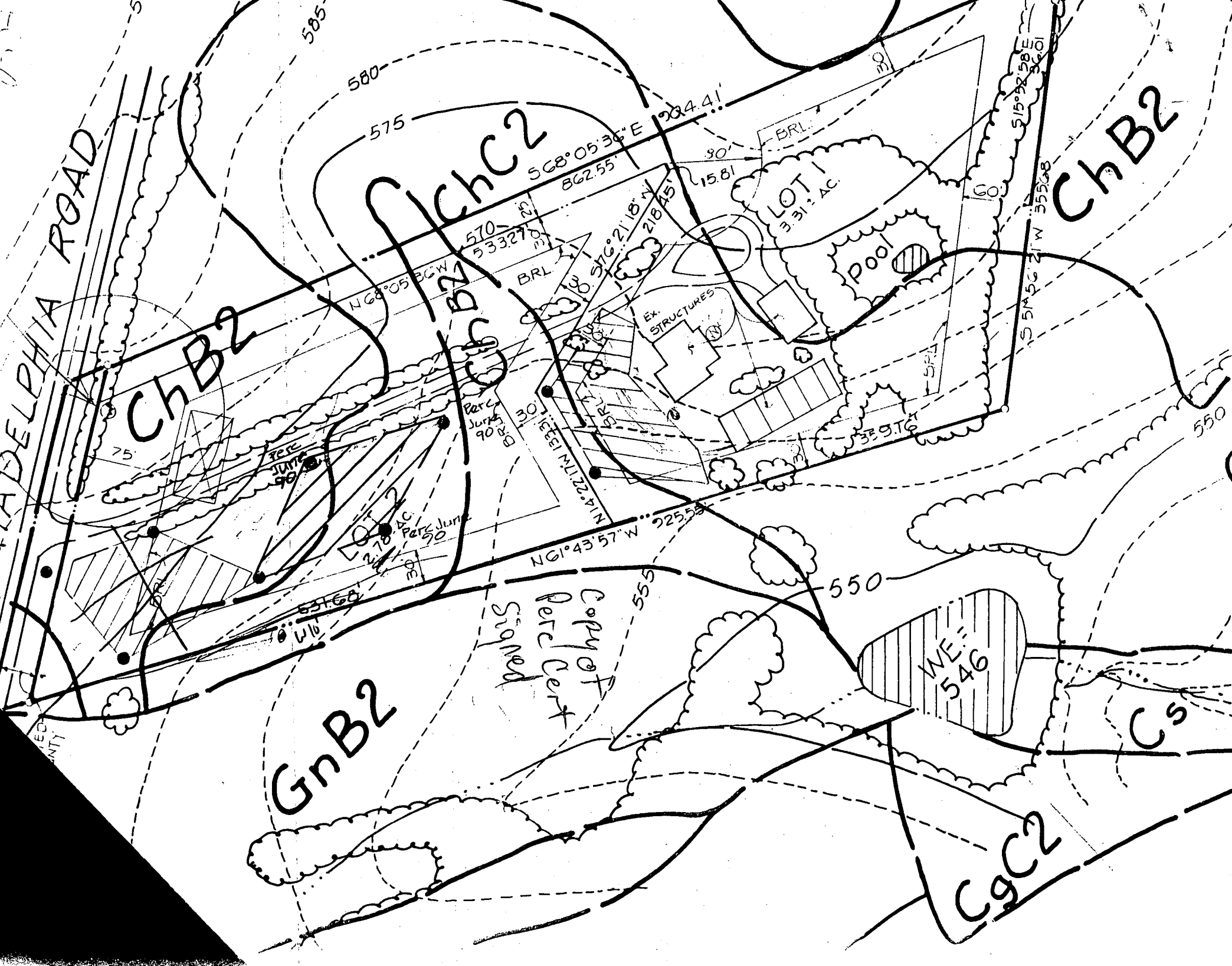
CHC2

6W
BZ
C

ChB2

CS2

CS



ROAD

PRIVATE 25' USE-IN-COMMON
ACCESS EASEMENT FOR THE
BENEFIT OF LOTS 1 AND 2.
LIBER 2314 FOLIO 685

VEHICULAR WIGRESS
AND EGRESS IS RESTRICTED

NG1°43'57"W
LAND DEDICATED TO HOWARD COUNTY, MD.
FOR THE PURPOSE OF A PUBLIC ROAD. (0.21 AC. ±)
9147.00 ±

PROPERTY OF
MARY C. BRANDT
G10 308

LOT 1
3.30 AC. ±

LOT 2
2.77 AC. ±

LOT 3
1.15 AC. ±

GENERAL NOTES CONTINUED:
DRIVEWAYS SHALL BE PROVIDED PRIOR TO RESIDENTIAL OCCUPANCY TO INSURE SAFE
ACCESS FOR FIRE AND EMERGENCY VEHICLES PER THE FOLLOWING (MINIMUM)
DIMENSIONS:
16 FEET;
18" (6") INCHES OF COMPACTED CRUSHER RUN BASE WITH TAR AND
AGENT TO INSURE ALL WEATHER USE.

ATTIFICATE
SHOWN AND DESCRIBED HEREON. H
PLAT BY THE DEPARTMENT
AND COUNTY, MARYLAND.
AREAS AND OTHER HUNTI
GOOD OPTIC

OWN
GEORGE
ELAIN
1307
ELUCOT

Final
Copy

