11/9/94 J 2:00 P.M. 11/10/94 C-PMT

PERMIT

File

P 50427J
A 11740
A REPAIR

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT

DATE 12/5/94

HOWARD COUNTY HEALTH DEPARTMENT #361877

BUREAU OF ENVIRONMENTAL HEALTH

~~XXX-XXXX~~ 313-2640 INDEXED

DATE SYSTEM APPROVED 11/9/94

INSPECTOR C.B.

Jack Fyock Septic Service IS PERMITTED TO INSTALL ____ ALTER X

ADDRESS ____ PHONE 988-9270

SUBDIVISION Linden Chapel Woods LOT 2 ROAD 5196 Ten Oaks Road

PROPERTY OWNER Jim Wilson

ADDRESS ____

SEPTIC TANK CAPACITY (Existing) ____ GALLONS

NUMBER OF BEDROOMS 3+

125+ SQUARE FEET PER BEDROOM (plus old system)

LINEAR FEET OF TRENCH REQUIRED 65'

REPAIR - PURPOSE - SEPTIC SYSTEM HAS FAILED.
Call for inspection when ground is opened so sanitarian can recommend approval.
11/07/94

11/9/94 Trench to come off existing dry well; 2' wide 8½ deep; 3± inlet; 65' long; 520 sq. ft. effective area and old septic system;

PLANS APROVED BY C.B. @ site for Mr. "C" Wellson DATE 11/9/94

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: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS, 90° **ELBOWS** NOT ACCEPTABLE.

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

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 35/40 PVC OR ABS

PERMIT VOID AFTER TWO 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 PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

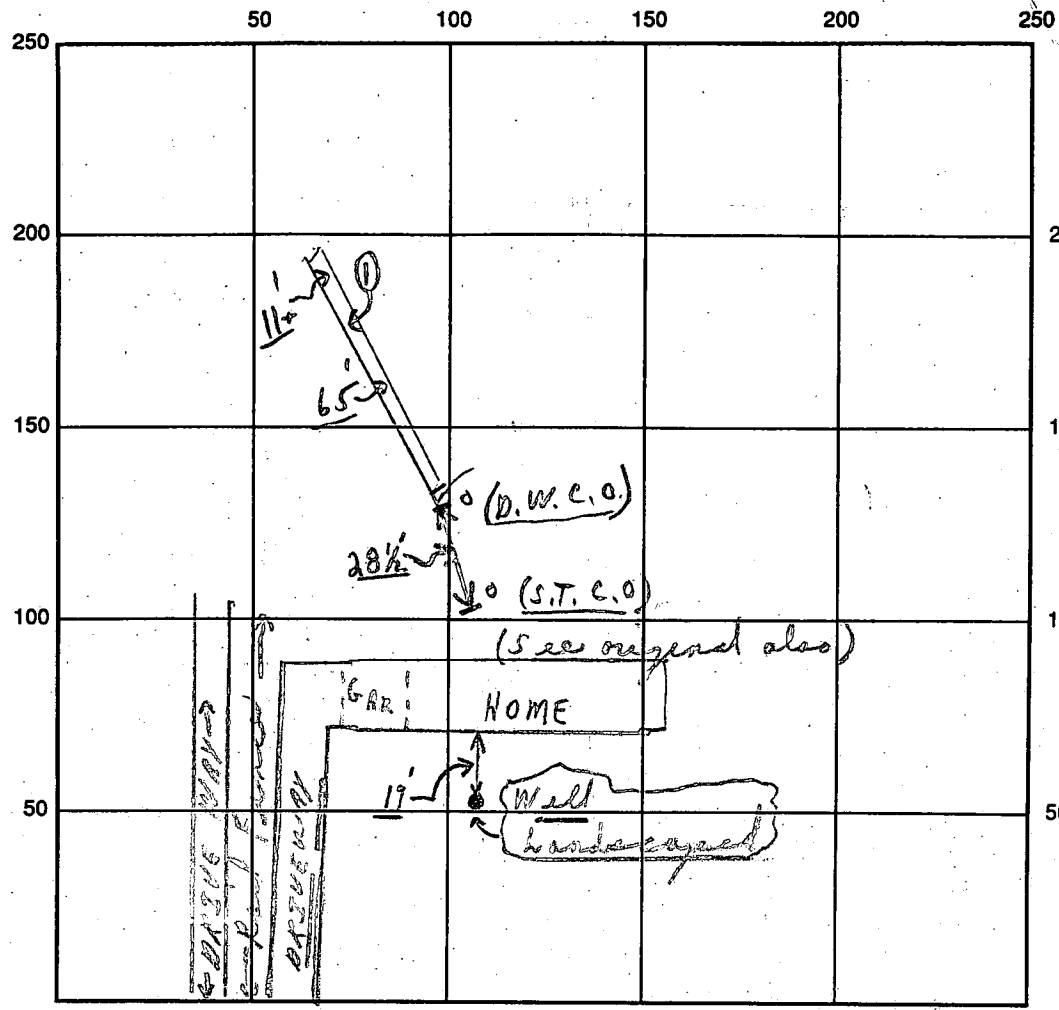
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

***CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.**

HD-260(6-90)

R 50427J



To Clarksville ← Ten Oaks Road → To Dayton

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL Existing CLEANOUTS (Existing @ S.T. + D.W.)

DISTRIBUTION BOX LEVEL Using - old dry well

DRAIN FIELD/TITLE DEPTH 11+ average FT. TRENCH WIDTH 02 FT. INLET DEPTH 3' FT.

EFFECTIVE GRAVEL DEPTH 8 FT. TOTAL LENGTH 65 FT.

NUMBER OF TRENCHES 1 ONE SIDEWALL/BOTTOM AREA 520 SQ. FT. {Plus old Dry Well}

DRYWALL INSIDE DIAMETER ~ FT. EFFECTIVE DEPTH BELOW INLET ~ FT.

ABSORBENT AREA 520+ SQ. FT. (Plus old dry well)

REMARKS: 11/9/94 Final (1 stage) - saw for end of trench - ok to cover as finish material on site; CBS

DATE SYSTEM APPROVED 11/9/94 INSPECTOR Charles B. Streeter

app - 9-25-68 alw

9/25/68

PERMIT

SEWAGE DISPOSAL SYSTEM

P 13945

A 11740

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 5

INDEXED

DATE 9-10-68

Elwood Scaggs IS PERMITTED TO INSTALL X ALTER

ADDRESS Rfd. Murphy Rd., Laurel, Md. 20810 PHONE 725-0324

A SEWAGE DISPOSAL-SYSTEM LOCATED AT

SUBDIVISION Linden Chapel Woods ROAD 5796 Ten Oaks Road LOT 2

PROPERTY OWNER Erich Nederlener

ADDRESS

SPECIFICATIONS 3 - bedrooms

DRAIN FIELD _____ DEPTH _____ FEET, BOTTOM AREA _____ SQ. FT.

SEEPAGE PITS _____ ABSORBENT SIDE-WALL AREA _____ SQ. FT.

SEPTIC TANK CAPACITY 750 GALLONS

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 22% & TANK CAPACITY 50%.

OTHER Drywell 12 ft. in dia. by 9 ft. deep below the inlet located 150 ft. from the front property line and 61 ft. off the right side property line as seen when facing the lot from Ten Oaks Rd. Place inlet pipe 3 ft. below original grade.

PERMIT VOID AFTER THREE YEARS.

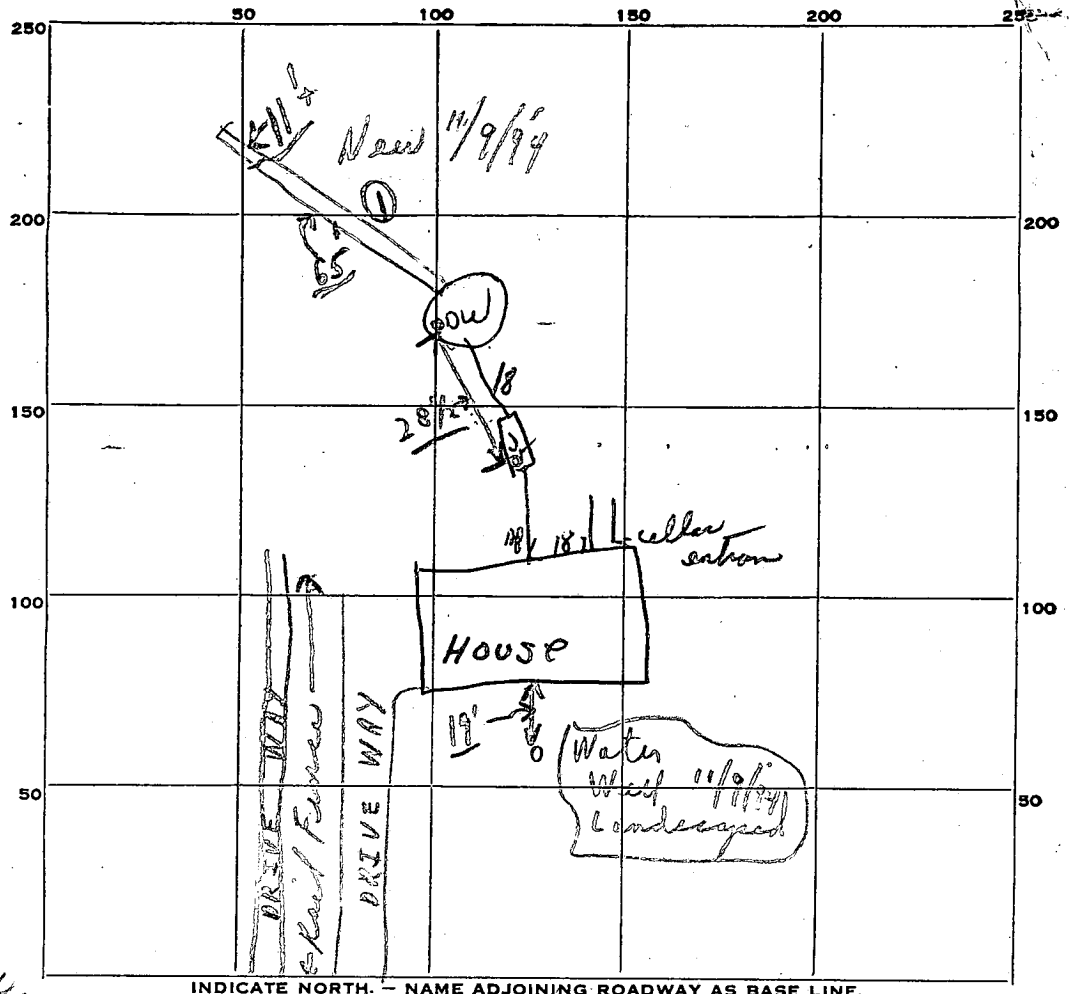
PLANS APPROVED BY R. Hodges DATE 6-7-68

FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

NEITHER THE HOWARD COUNTY COMMISSIONERS NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

NOTIFY THE HEALTH DEPARTMENT 48 HOURS BEFORE EXCAVATIONS ARE TO BE BACK FILLED.

A 11740



INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.

Clarksville ← Ten Oaks Rd → Dayton

PERMIT CARD _____

SEPTIC TANK, LEVEL ok CLEANOUTS ok

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~~ outside DIAMETER 13 1/2 FT. DEPTH BELOW INLET 8 1/4 FT.

ABSORBENT AREA 349 + SQ. FT.

REMARKS _____

DATE SYSTEM APPROVED 9/25/68 INSPECTOR Dew. Mongle

11/9/94
Length 65'
Width 2'
Depth 4'
Store 8'
Only 2 1/2' to 3'

5204
3 375

Preliminary

APPLICATION

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

A 11740

P

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 5

DATE 4/20/66

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TESTS IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Frank F. Willson

ADDRESS 14701 Layhill Rd., Silver Spring, Md. PHONE 384-1732

PROPERTY LOCATION:

SUBDIVISION Linden Chapel Woods LOT NO. 2

ROAD AND DESCRIPTION Ten Oaks Road

OCCUPANT PHONE

PERSON TO CONSTRUCT SYSTEM

ADDRESS PHONE

SIZE OF LOT 1.045 acres TYPE BLDG. 3 (NUMBER OF BEDROOMS)

IF NOT SINGLE RESIDENCE DESCRIBE

SIGNATURE OF APPLICANT /s/ Bob Johnsen

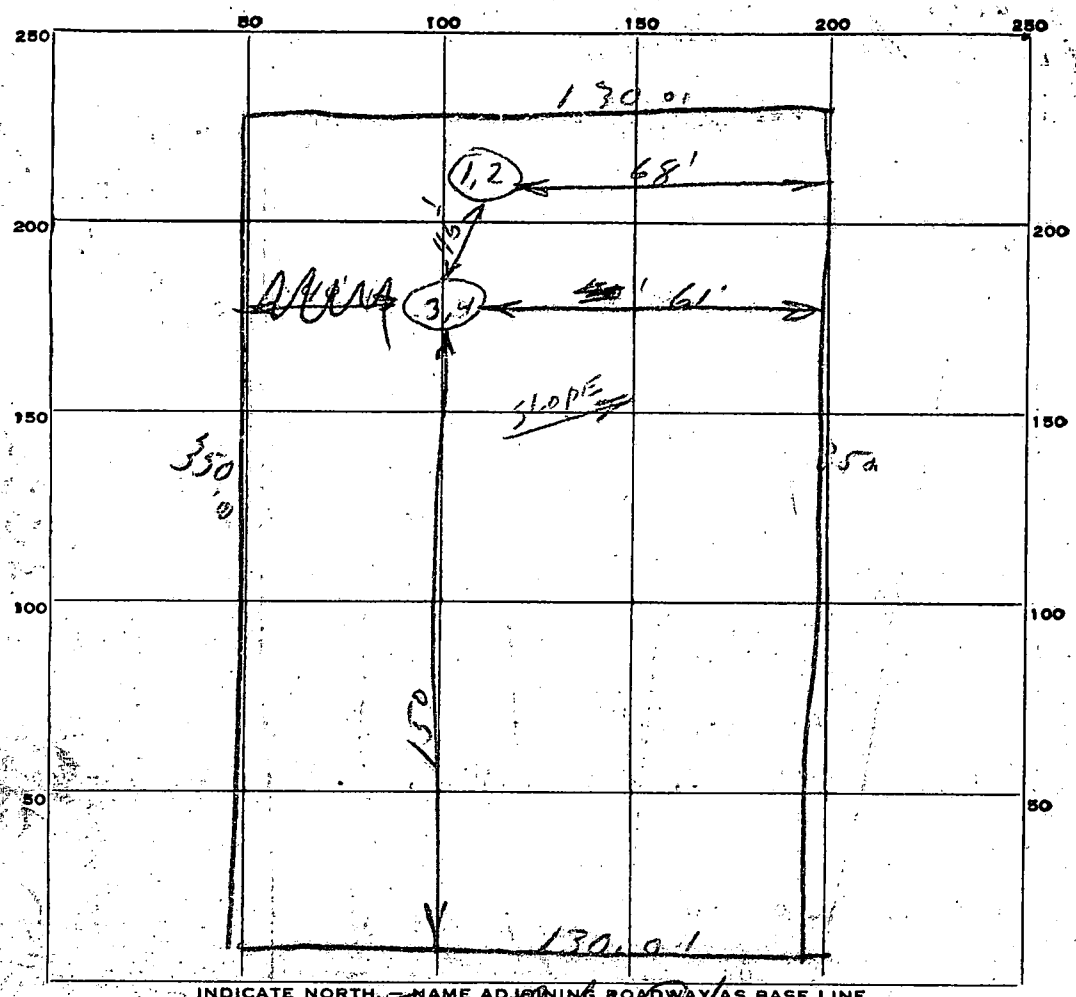
APPROVED BY R. Rodger FOR Drywell (KIND OF SYSTEM) DATE 7 June 68

REJECTED BY FOR (KIND OF SYSTEM) DATE

HOLD PENDING FURTHER TESTS DATE

REASONS FOR REJECTION OR HOLDING 7 June 68 + Final Plat Approved
Apr 67

THIS IS NOT A PERMIT



INDICATE NORTH — NAME ADJOINING ROADWAY AS BASE LINE.

Fern Lake Rd

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
4-21-66	1, Same	10	10.11	10.15	10.15	10:22	7 Min
	2, Pit	5'	10.11	10:26	10:26	10:33	12 Min
	3, Same	10'	10.13	10.21	10.21	10:26	5 Min.
	4, Pit	4½'	10.15	10.16	10.16	10:19	3 Min.

SOIL AUGER FINDING 11'

TESTED BY

REMARKS

4-21-66

Tot 2

Wait till preliminary OK'd before approval.

APPLICATION

A 11740

P

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY ELLICOTT CITY

DISTRICT 5

DATE 4/20/66

3 bedrooms - 750 gal. septic Tank.
Dry well 12 ft in dia by 9 Ft. deep below
the Inlet located 150 ft. from the front property
line and 61 ft. off the right side property line as
seen when facing the lot from Ten Oaks Road
Place inlet pipe 3 Ft. below original grade.

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TESTS IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Frank F. Willson

ADDRESS 14701 Layhill Rd., Silver Spring, Md. PHONE 384-1732

PROPERTY LOCATION:

SUBDIVISION Linden Chapel Woods LOT NO. 2

ROAD AND DESCRIPTION Ten Oaks Road

OCCUPANT PHONE

PERSON TO CONSTRUCT SYSTEM

ADDRESS PHONE

SIZE OF LOT 1.045 acres TYPE BLDG. 3 (NUMBER OF BEDROOMS)

IF NOT SINGLE RESIDENCE DESCRIBE

SIGNATURE OF APPLICANT /s/ Bob Johnsen

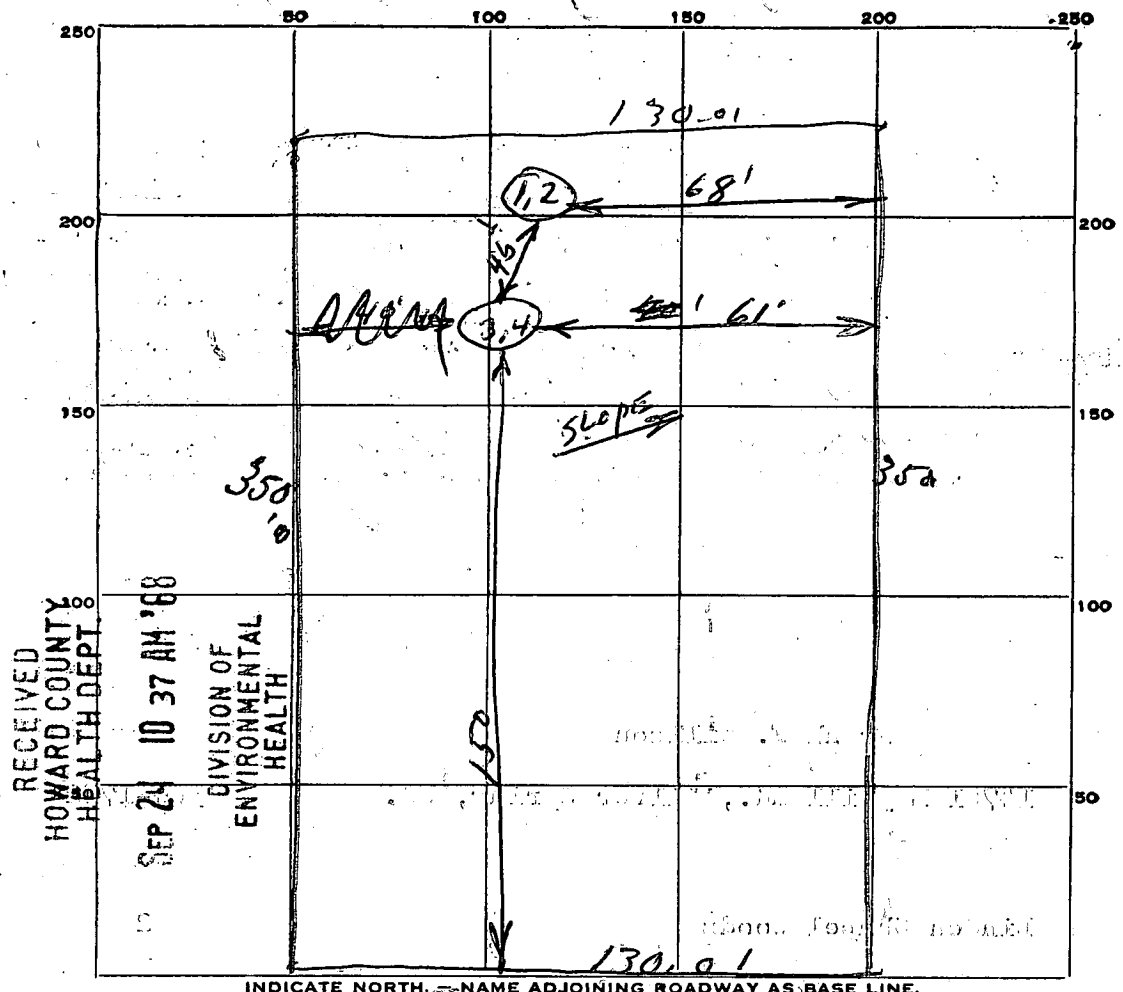
APPROVED BY L. Hodges Jr. FOR dry well (KIND OF SYSTEM) DATE 6/7/68

REJECTED BY FOR (KIND OF SYSTEM) DATE

HOLD PENDING FURTHER TESTS DATE

REASONS FOR REJECTION OR HOLDING 7 June 68 - Final Plat approved after 6/7

THIS IS NOT A PERMIT



INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.

Ten Oaks Rd

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
4-21-66	1, Same	10'	10:11	10:15	10:15	10:22	7 Min.
	2, Perk	5'	10:11	10:24	10:24	10:33	12 Min.
	3, Same	10'	10:13	10:21	10:21	10:26	5 Min.
	4, Perk	4½'	10:15	10:16	10:16	10:19	3 Min.

av. perc. Time 7 Min.

SOIL AUGER FINDING

TESTED BY

REMARKS

4-21-66

Lot 2

WR-W-3
4-66

STATE OF MARYLAND
DEPARTMENT OF
WATER RESOURCES

State Office Building
ANNAPOLIS, MARYLAND 21401

RECEIVED
JUL 9 AM 8 20
WATER RESOURCES

APPLICATION MUST BE SUBMITTED AND PERMIT RECEIVED BEFORE DRILLING IS STARTED.

A11748

APPLICATION FOR PERMIT TO DRILL WELL

No. 7145

Owner Erich Niederlehner

Street or R. F. D.

Post Office Dayton

Quantity of Water to be Produced 3 Gallons Per Minute

Total Quantity Needed For Use 1000 Gallons Per Day

Use for Water House

Approximate Depth of Well (feet) 100

Method of Drilling to be used Cable

Is this a Replacement Well? Yes – (No)

If YES, indicate date abandoned well is to be sealed:

and by whom:

Driller Denny Brown License Number 113

Street or R. F. D.
Post Office Int airy Md.

Date July 5 1968

Location of Well County Howard

Subdivision Linden Chapel woods

Section Lot 2

Nearest Town Dayton

Distance from Town 1/2 mile

Direction from Town South

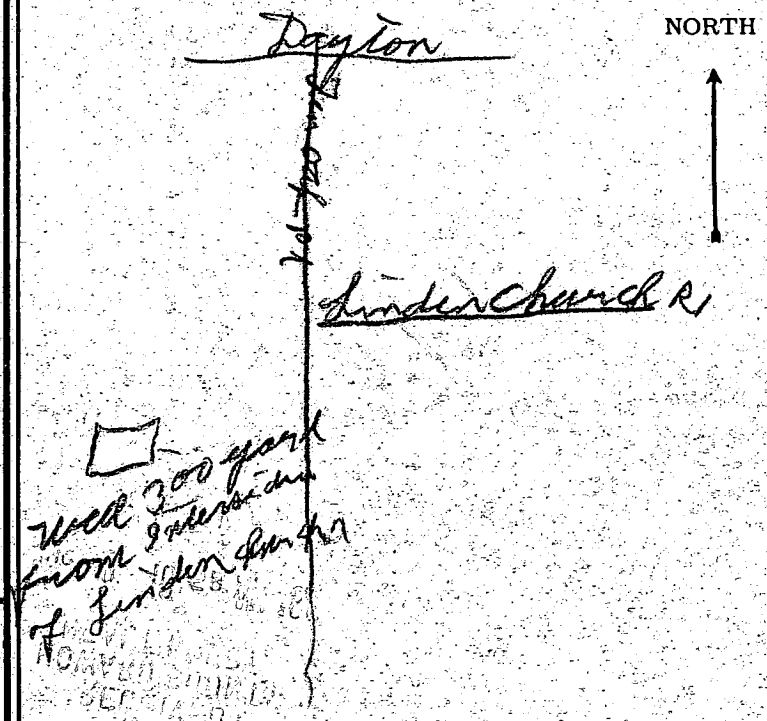
Description of Location of Well
(This information MUST BE ACCURATE, and should be definite enough to permit locating well on a county map).

Near what road Ten oak Rd

On which side of road West
(North, East, South, West)

Distance from road 300 yards

Draw a sketch below showing location of well in relation to nearby towns, 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. **Distances may be approximate, but must be indicated.**



PERMIT TO DRILL WELL
(Not To Be Filled In By Driller)

Well Permit No. HO-69-W-10

Samples of Cuttings Required by Department:	Yes	No
Owner Requires Permit to Appropriate Water:	Yes	No
Owner Has Permit to Appropriate Water:	Yes	No

Appropriation Permit No.

The applicant is herewith granted a permit to drill this well subject to the conditions stipulated.

Paul W. McKee Director — Date 7-9-68

THIS PERMIT IS NOT TRANSFERRABLE
WITHOUT WRITTEN PERMISSION FROM THE DEPARTMENT

Special conditions that must be observed:

County Permit No.

Health Department Approval of Application

Howard County Department of Health

or ☐ State Department of Health

Approved by Palmer F. Wine

Title Director, Environmental Health

Date 7/8/68

HEALTH

WR-WI-4
0-66

State Office Building
ANNAPOLIS, MARYLAND 21401

RECEIVED
STATE OF MARYLAND
DEPARTMENT OF
'68 OCT 21 AM 10:58
WATER RESOURCES

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER COMPLETION OF THE WELL

WELL COMPLETION REPORT

WATER RESOURCES

WELL DESCRIPTION

Permit Number 3-69 W 10
Owner Enoch Niederlehner
Address Dayton
Subdivision Linden Chapel road
Section _____ Lot 2

WELL LOG
State the kind of formations penetrated, their color, their depth, their thickness, and if water-bearing

	FEET from	to
Top Soil	0	5
Sand	5	50
1 Stream	50	45
2 Stream	45	102
Dept of well	102	

CASING AND SCREEN RECORD
State the kind and size and position of casing, liner, shoe, screen, and other accessories (if no casing used, give diameter of well).

DIAM. (inches)	FEET from	to
6 inch	0	30

PUMPING TEST
Hours Pumped _____
Type of Pump Used Bayler
Pumping Rate Gallons per Minute 2

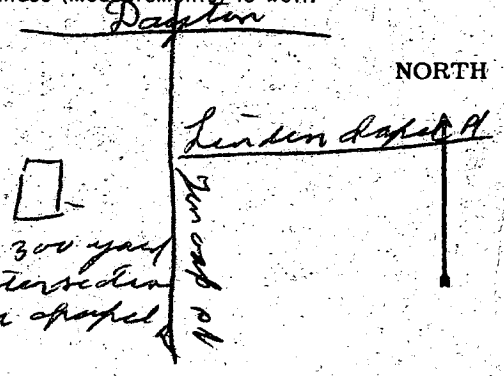
WATER LEVEL
(Distance from land surface to water)
Before Pumping 40 Ft.
When Pumping 75 Ft.

APPEARANCE OF WATER
Clear Partly Cloudy _____
Taste None
Odor None

Height of Casing Above Land Surface 2 Ft.

PUMP INSTALLED
Type _____
Capacity
Gallons per Minute _____
Gallons per Hour _____
Pump Column Length _____ Ft.

LOCATION OF WELL ON LOT
Show permanent structures such as building(s), septic tank, and/or other landmarks and indicate not less than 2 distances (measurements) to well.



DATE WELL WAS COMPLETED
oct 2 1968

I hereby affirm that this report contains no willful misrepresentations or falsifications and that information given in this report is true, accurate and complete to the best of my knowledge and belief.

Danny Brown, Well Driller

Well Driller License No.: 113

HEALTH

HOWARD COUNTY
MARYLAND STATE DEPARTMENT OF HEALTH
199 COURT HOUSE DRIVE
ELLICOTT CITY, MARYLAND 21043

WELL COMPLETION REPORT

This report must be submitted within 10 days after completion of the well.

This is to certify that the well which has been completed on the below property has been constructed and disinfected in compliance with the regulations and specifications of the State Board of Health.

The following construction and performance characteristics were noted:

1. Type, diameter and length of casing 6 In o.D. 55 ft
2. Total depth of well 102 ft
3. Type, diameter and length of strainer _____. Size of screen openings _____
4. Method of sealing top and bottom of screen _____
5. Method of grouting Cement. Quantity, cement used 2 Bags lbs. Gallons water 10.
6. Standing water level (depth below ground surface when not pumping) 40
7. Yield of well in gallons per minute 5; elevation of water surface when pumped at the designated rate 76 ft.
8. Number of hours pump operated at stipulated rate during pumping test 1.
9. Record of any other pumping performance None.
10. Log of materials encountered during drilling Rock from 52 ft.
11. Physical appearance of water at end of final pumping test Partly Clear
12. Variation in vertical alignment (how much the well casing varies from a truly plumb line) throughout its depth None.
13. Disinfected by 12 ounces of Clorox % Chlorine (Brand name _____).

Property Owner Erich Riederlithner Address Dayton Lot 2
Location of Property Linden Chapel wood Sub
Health Department Number _____ Dept. of Water Resources Permit No. Ho 69 W 10

Date: Oct 2, 1968. Denny Brown
Signature of Well Driller

INSTRUCTIONS: This form is to be completed in duplicate and certified by the Well Driller upon completion of each drilled well. One copy will be forwarded to the property owner by the Health Department along with the final approval of the well.