

7130196  
12-00 C.D.

# PERMIT

## SEWAGE DISPOSAL SYSTEM

### DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 57024C

A REPAIR

DISTRICT \_\_\_\_\_

DATE 7-12-96

#### HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~461-8933~~ 313-2640

DATE SYSTEM APPROVED 8-2-96

INSPECTOR ES

*No record found*

INDEXED

Jack Fyock Septic Service \_\_\_\_\_ IS PERMITTED TO INSTALL \_\_\_\_\_ ALTER X

ADDRESS 13775 Triadelphia Road Glenelg, MD 21737 PHONE 988-9270

SUBDIVISION The Chase LOT 25 ROAD 11605 Log Jump Trail

PROPERTY OWNER Carol and Wilson Bradley

ADDRESS \_\_\_\_\_

SEPTIC TANK CAPACITY 2000 GALLONS

NUMBER OF BEDROOMS 8

180 SQUARE FEET PER BEDROOM

*\* TRENCH LOCATION TO BE AS SPECIFIED,  
OK FOR ALTERNATE METHOD OF  
DISTRIBUTION AT INSTALLER'S DISCRETION.*

CW

LINEAR FEET OF TRENCH REQUIRED 250 (50 feet to be added to each of five trenches)

REPAIR - PURPOSE - IN SUPPORT OF BP# 64357

Call for inspection when ground is opened so sanitarian can recommend repairs.

(Per Building Permit drawing signed by this office 04/24/96 with C. Stewart's knowledge) vr/

Existing septic tank to be relocated/replaced according to signed BP drawing.

Each of the first 5 existing trenches to be extended 50 feet on contour.

Trenches to be 3 feet wide, inlet 3', bottom 4.5', 1.5' stone.

OK/CW

PLANS APPROVED BY Donna K. Soe DATE 05/03/96

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

BLDG. PERMIT SIGNED  
AND RETURNED 7/24/96

*Serial # B70117010*

PERMIT VOID AFTER TWO YEARS

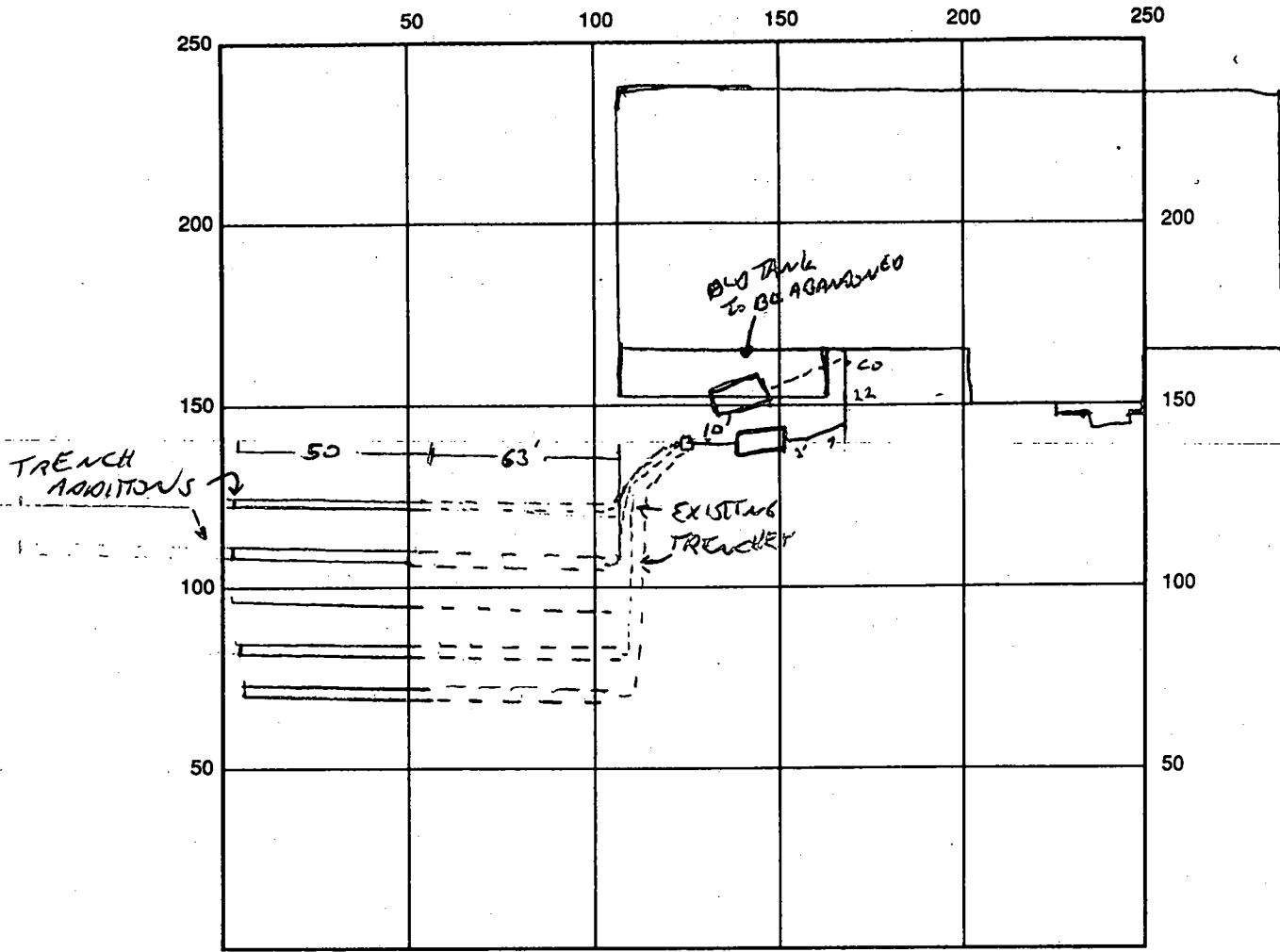
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON, CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED.

*13 Bedroom Addition*

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

P 57024C



SEPTIC TANK LEVEL \_\_\_\_\_ CLEANOUTS \_\_\_\_\_

DISTRIBUTION BOX LEVEL NA

DRAIN FIELD/TITLE DEPTH 4.5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 1.5 FT. TOTAL LENGTH 5 x 50 FT. = 250'

NUMBER OF TRENCHES 5 ONE SIDEWALL/BOTTOM AREA \_\_\_\_\_ SQ. FT.

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

ABSORBENT AREA ✓ SQ. FT.

REMARKS: 2/30/96 TRENCH ADDITIONS OK TO COVER. 8-2-96  
EXISTING TANK COLLAPSED + FILLED IN (PUMPED OUT OK). NEW TANK  
OK TO COVER

DATE SYSTEM APPROVED 8/2/96 INSPECTOR [Signature]



**HOWARD COUNTY HEALTH DEPARTMENT**

*Joyce M. Boyd, M.D., County Health Officer*

April 19, 1996

Mr. and Mrs. Wilson Bradley  
3813 Plum Spring Lane  
Ellicott City, Maryland 21042

RE: Building Permit #64351  
Additions to Existing House  
11605 Log Jump Trail

Dear Mr. and Mrs. Bradley:

This office has recently received the above referenced building permit application; however, there are conditions to be resolved prior to approval of the building permit.

The percolation testing conducted April 3, 1996, in support of the proposed additions, indicated limited satisfactory soil conditions. These tests were necessary to expand the septic reserve area to serve the existing house and the proposed addition. Before the building permit will be approved, an accurate site plan showing these test holes field located should be submitted to this office.

Installation of additional septic trench capacity should be considered as recommended, but not required by this office. The originally installed septic system is somewhat oversized for the existing house. Thus, installation of additional trenches or septic tank capacity is not required for building permit approval.

Once the requested site plan is received by this office, the building permit application will be approved. Thank you in advance for your time and cooperation.

Sincerely;

*Donna K. Soe* (CW)  
Donna K. Soe, Sanitarian  
Water and Sewerage Program

cc: Stewart/McCready Architects  
file

"IMPROVED" SITE PLAN & BP APPLICATION  
SIGNED 4/24/96

C.A.M.C STEWART INDICATES OWNER INTENDS TO  
RELOCATE TANK (2000 GAL OK) AND EXTEND EACH TRENCH 50'

Bureau of Environmental Health  
3525-H Ellicott Mills Drive Ellicott City, Maryland 21043-4544  
Water and Sewerage, Permits (410) 313-2640 Community Environmental Health (410) 313-2644  
Food Protection Program (410) 313-2642 TDD (410) 313-2323

- ACCEPTED

4/24/96  
(CW)

# APPLICATION

4/3/95  
1130  
Plans  
Letter

## PERCOLATION TESTING

1180  
608  
480  
56517  
P \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 313-2640

PROVISION OK  
PROPOSAL IS TO  
ADD 3 BAS  
TO EXISTING 5 BR HOME.

DISTRICT \_\_\_\_\_  
DATE 3-22-96

TO: THE COUNTY HEALTH OFFICER  
ELLICOTT CITY, MARYLAND

WGT. SEASON TESTING REQ'D  
APPROX 5,000 SQ FT ADDITIONAL  
AREA NEEDS TO BE ESTABLISHED. (CW)

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

PROPERTY OWNER WILSON BRADLEY

ADDRESS 3813 Plum Spring Ln, E.C., MD 21042 PHONE \_\_\_\_\_

AGENT OR PROSPECTIVE BUYER TICO MCCREADY - STEWART/MCCREADY ARCHITECTS

ADDRESS 8329 MAIN ST., ELLICOTT CITY PHONE 465-7687

### PROPERTY LOCATION:

SUBDIVISION THE CHASE LOT NO. 25

ROAD AND DESCRIPTION 11605 LOG JUMP TRAIL

TAX MAP \_\_\_\_\_ PARCEL # \_\_\_\_\_

SIZE OF LOT \_\_\_\_\_ TYPE BLDG. SINGLE FAMILY DWELLING  
(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.

Robert D. McCreedy  
(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

56517

COUNTY #

SOIL PROFILE

0' topsoil  
 or red  
 br cl lm

2' 11 or br  
 sa cl lm

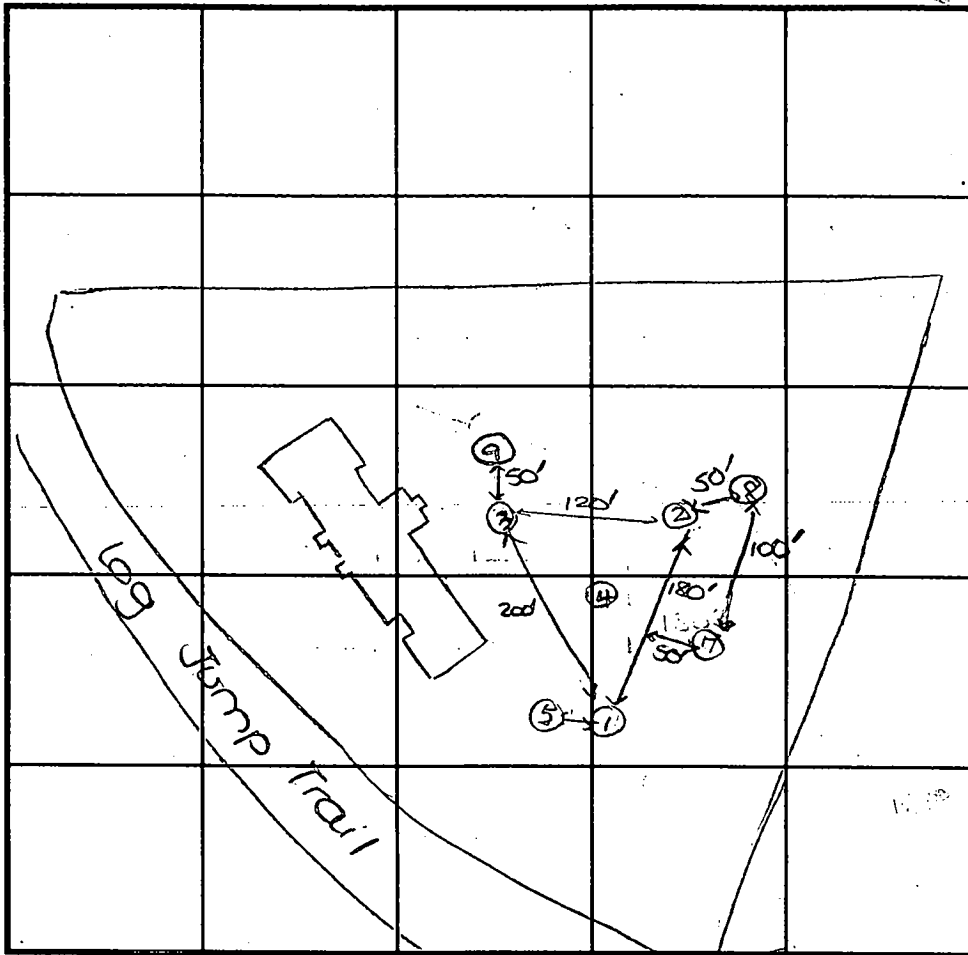
w/wh  
 crum rock  
 mixed  
 in

11' seepage

13' water

SOIL PROFILE

0'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

0' ⑧  
 1' topsoil  
 or red  
 br cl  
 lm

3' dk or br  
 sa lm

sm wh  
 str crum  
 rock

10.5' seepage

11' seepage

12' WATER

0' ⑨  
 1' topsoil  
 red br  
 cl lm

3' or br  
 sa lm

w/white  
 crum  
 rock

10' seepage

11.5' WATER

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4-3-96	7	4' 8" S	1:37 <sub>30</sub>	1:41	1:41	1:48	7
		13.0' D	Water - See profile				
	8	3' 8" S	2:02 <sub>30</sub>	2:04	2:04	2:06	2
		12.0' D	Water - See profile				
	9	3.5' S	2:29	2:31 <sub>30</sub>	2:31 <sub>30</sub>	2:37	6
		11.5' D	Water - See profile				

REMARKS SHALLOW SYSTEM ONLY! Holes 1-5 original tests  
 (final plan approved 2/20/00)

TYPE OF SOIL \_\_\_\_\_

TESTED BY D. See ALSO PRESENT architect

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 5 TRENCH WIDTH 3

INLET DEPTH 3.0 MAXIMUM BOTTOM DEPTH 4.5 SQ. FT./BEDROOM 180

RECEIVED

APR 24 1996

SEPTIC EASEMENT HAS BEEN EXPANDED TO ACCOMODATE THE INCREASED SIZE OF HOME,

HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
EXPANDED SEPTIC EASEMENT

Approved Septic System Plan  
Howard County Health Department

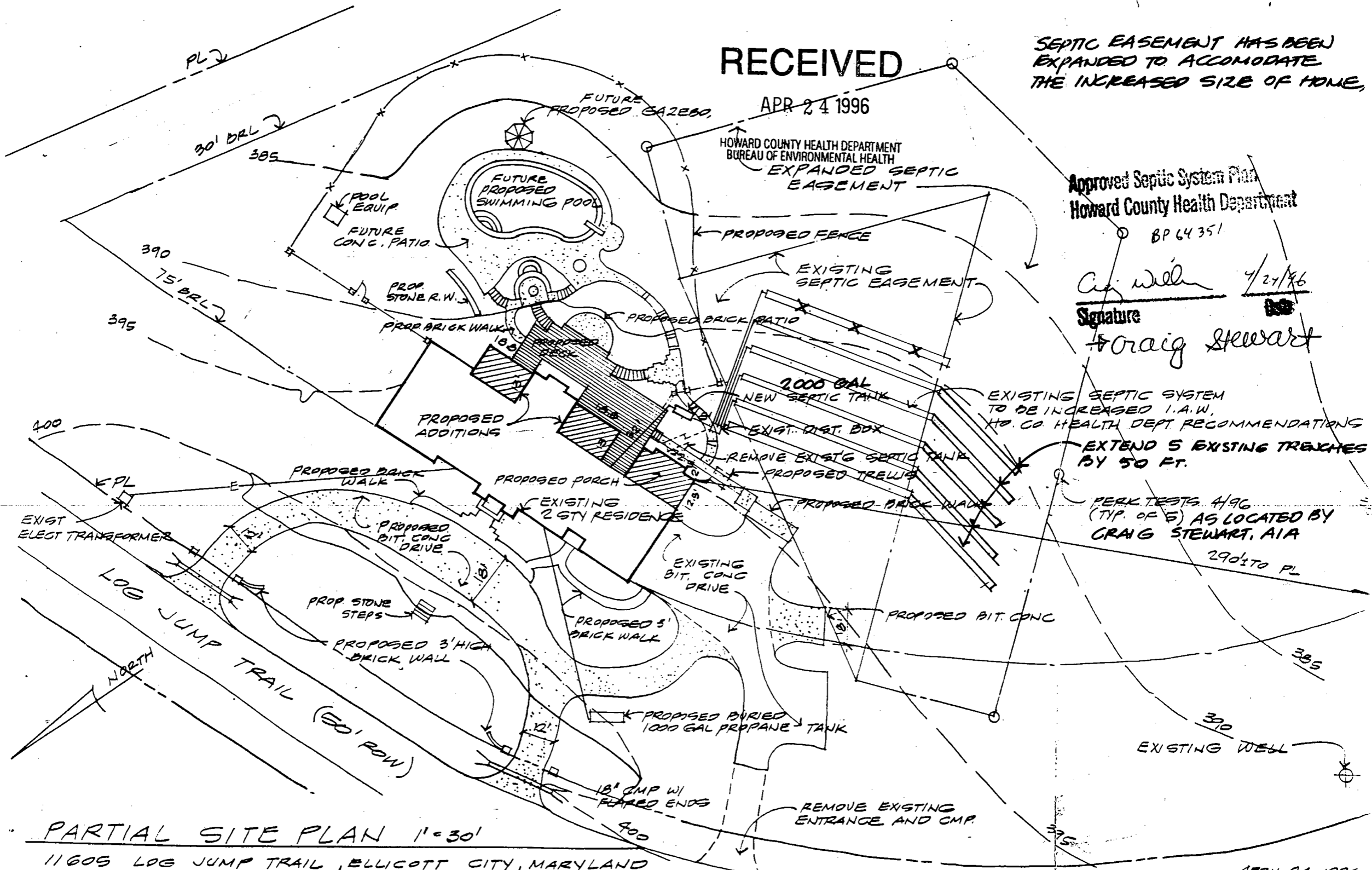
BP 64351

*Craig Will* 4/24/96

Signature  
*Craig Stewart*

EXISTING SEPTIC SYSTEM TO BE INCREASED I.A.W. HO. CO. HEALTH DEPT. RECOMMENDATIONS  
EXTEND 5 EXISTING TRENCHES BY 50 FT.

PERK TESTS 4/96 (TYP. OF 5) AS LOCATED BY CRAIG STEWART, AIA



PARTIAL SITE PLAN 1"=30'  
11605 LOG JUMP TRAIL, ELLICOTT CITY, MARYLAND

APRIL 24, 1996

12-21-88

12/21 ① P.C.O. c.e.s.  
② P.C.O. c.e.s.

# PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

**HOWARD COUNTY**  
BUREAU OF ENVIRONMENTAL HEALTH  
461-9933

## INDEXED

P 43179  
A 37019  
DISTRICT 5th  
DATE 12/8/88  
DATE SYSTEM APPROVED 12/21/88  
INSPECTOR BH

Frall Septic Service

IS PERMITTED TO INSTALL  ALTER

ADDRESS P. O. Box 659, Mt. Airry, Maryland 21771 PHONE 795-5674

SUBDIVISION The Chase ROAD 11605 Log Jump Trail LOT 25

PROPERTY OWNER Kerwin Miller Communities James Lincoln

ADDRESS \_\_\_\_\_

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%

GARBAGE GRINDER? YES  NO

SEPTIC TANK CAPACITY 2000 GALLONS NUMBER OF BEDROOMS 5

*82 linear  
3000 per  
363 linear feet  
283  
425*

TRENCHES - 256 sq. ft. per bedroom with garbage disposal. Trench to be 3 feet wide. Inlet 3.0 feet below original grade. Bottom maximum depth 4.5 feet below original grade. Effective area begins at 3.0 feet below original grade. 1.5 feet of stone below distribution pipe.

LOCATION - Place the first trench 270 feet up the left (661.80') lot line and 230 feet off the same lot line as seen when facing the lot from the corner of Masters Run and Log Jump Trail. Run trenches on contour toward the right front corner near well. NOTE: MAINTAIN 150 FEET FROM WELL WITH TRENCHES. ADDENDUM: NOTE: CALL FOR FIELD VERIFICATION PRIOR TO ANY WORK BEGINNING.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

PLANS APPROVED BY Sid Abel *01/4* DATE 12/06/88

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

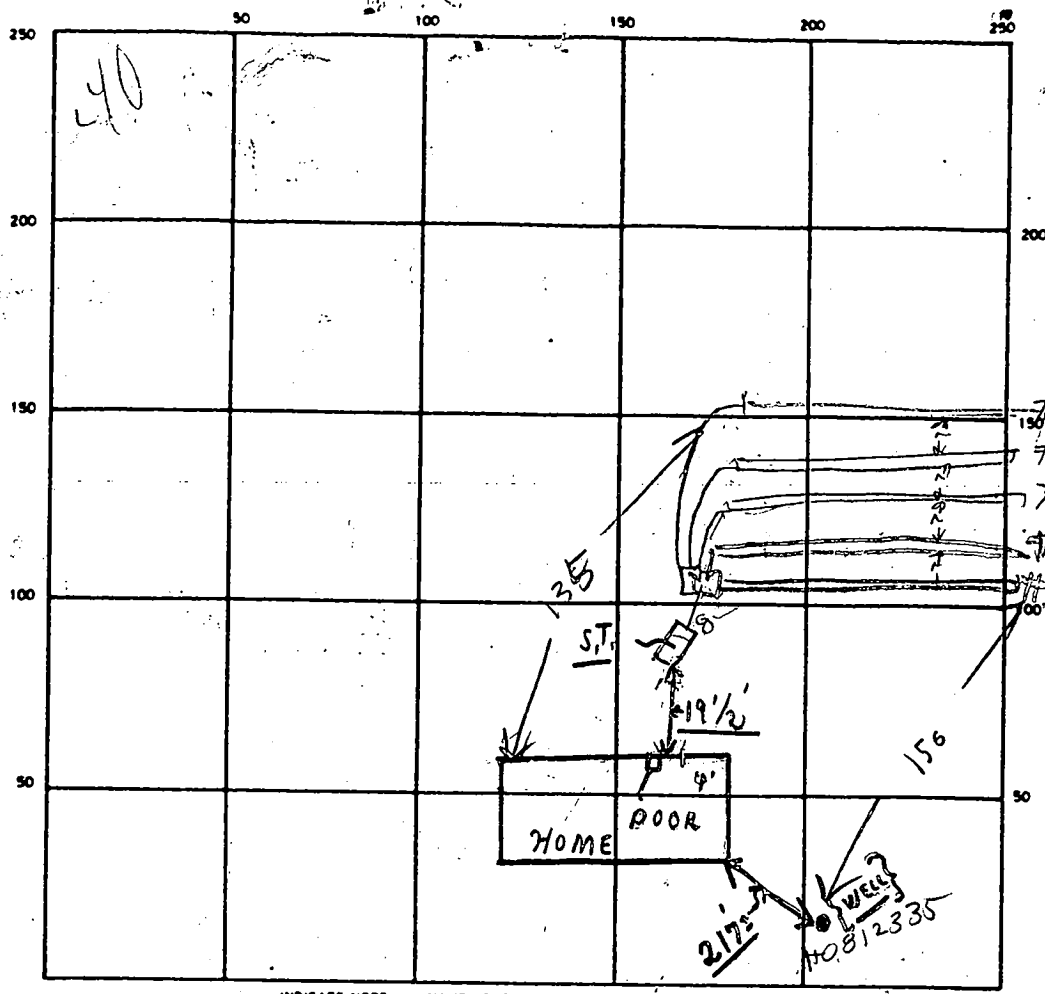
- NOTE CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS
- NOTE ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK DISTRIBUTION BOX TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)
- NOTE IF DEEP TRENCHES ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCHES
- 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 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 PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED
- NOTE DISTRIBUTION BOXES MUST HAVE BAFFLES

BLDG. PERMIT SIGNED AND RETURNED 4/11/91  
*Serial # 36279 - deck*  
BLDG. PERMIT SIGNED AND RETURNED 10/12/89  
*Serial # 30273*

37019

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

CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS. *Intervis Alternatives*



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE  
LOG JUMP TRAIL

SEPTIC TANK LEVEL OK CLEANOUTS S.T. NO. 12/21

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

DRAIN FIELD/TILE FIELD. DEPTH 4.5 FT TRENCH WIDTH 3 FT INLET DEPTH .3 FT

EFFECTIVE GRAVEL DEPTH 1 1/2 FT TOTAL LENGTH 70 73 74 74 TOTAL 363

NUMBER OF TRENCHES 5 ONE SIDEWALL/BOTTOM AREA 1099 1080 99

DRYWELL INSIDE DIAMETER \_\_\_\_\_ FT EFFECTIVE DEPTH BELOW INLET \_\_\_\_\_ FT

ABSORBENT AREA \_\_\_\_\_ SQ. FT.

REMARKS 12/21/88 ① Partial; ② no change. (Septic tanks only - RAIN)  
C.B. &

12/27/88 - SYSTEM OK TO COVER

1/9/89 SS Complete + COVERED - SS SHORT FOR HOUSE. SOL

DATE SYSTEM APPROVED 12/27/88 INSPECTOR Raymond J. Hodges

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# APPLICATION

PERCOLATION TESTING

HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 461-9933

A 37019

P \_\_\_\_\_

DISTRICT 5

DATE 5/15/86

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 Wayback Corporation Kerwin Miller Communities

ADDRESS P.O. Box 1018, Columbia, MD. 21044 PHONE 997-8800

PROSPECTIVE BUYER NONE

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

PROPERTY LOCATION:

SUBDIVISION The Chase - formerly The Paddock LOT NO. 25 ON FINAL 2T (47)

ROAD AND DESCRIPTION Homewood Road 11605 Log Jump Trail

TAX MAP 29 PARCEL # 24

SIZE OF LOT 3 acres TYPE BLDG. S.F.D.  
(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 \_\_\_\_\_

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

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

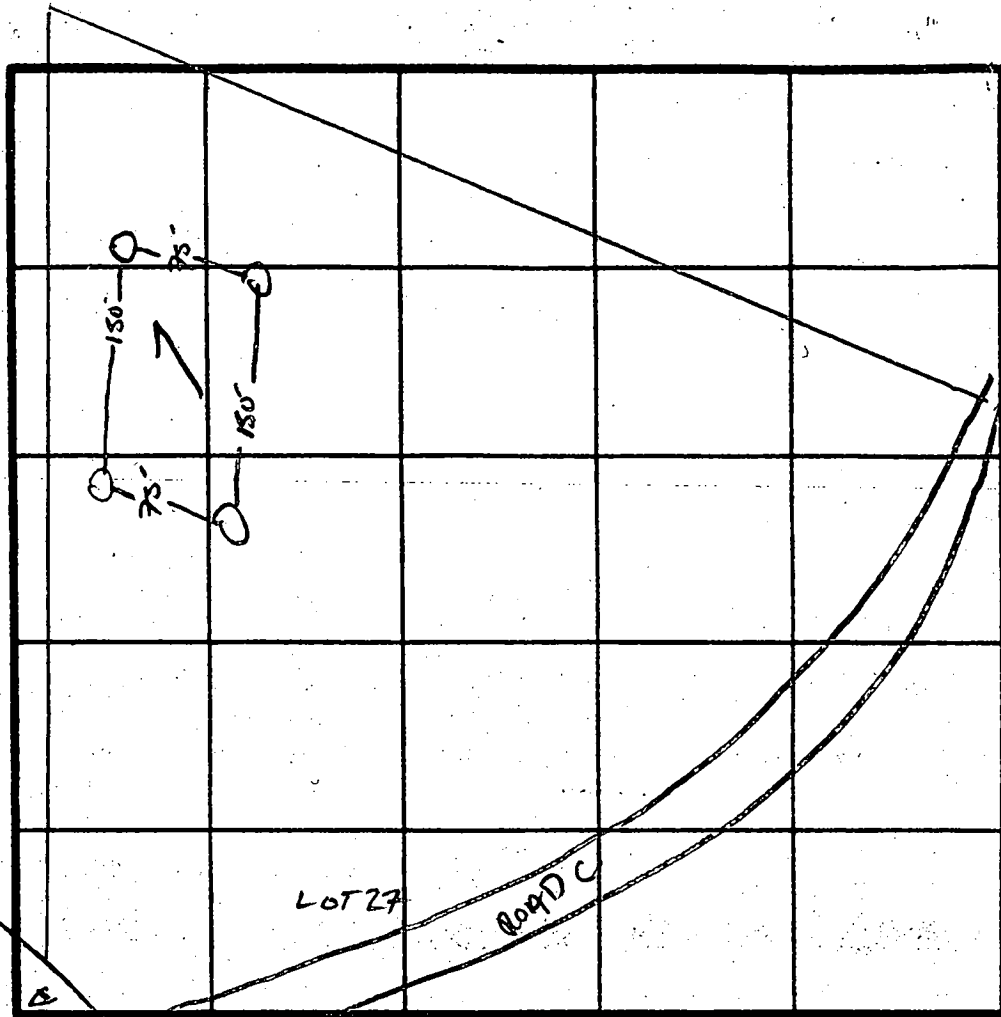
REASONS FOR REJECTION OR HOLDING 3-3-87 Perc Satisfactory - Hold for Resub. Permt. SAH-P

BLDG. PERMIT SIGNED  
AND RETURNED 8-9-88

BP 20558 SOL

# THIS IS NOT A PERMIT

SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

*Homewood rd.*

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	

REMARKS \_\_\_\_\_

TYPE OF SOIL \_\_\_\_\_

EH-12-1079

# APPLICATION

PERCOLATION TESTING

A 37019

P \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 461-9933

DISTRICT 5

DATE 5/15/86

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 Wayback Corporation

ADDRESS P.O. Box 1018, Columbia, MD. 21044 PHONE 997-8800

PROSPECTIVE BUYER NONE

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

PROPERTY LOCATION:

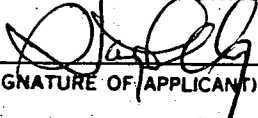
SUBDIVISION The Chase - formerly The Paddock LOT NO. 2725

ROAD AND DESCRIPTION Homewood Road

TAX MAP 29 PARCEL # 24

SIZE OF LOT 3 acres TYPE BLDG. S.F.D.  
(SINGLE FAMILY DWELLING OR COMMERCIAL)

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(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

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

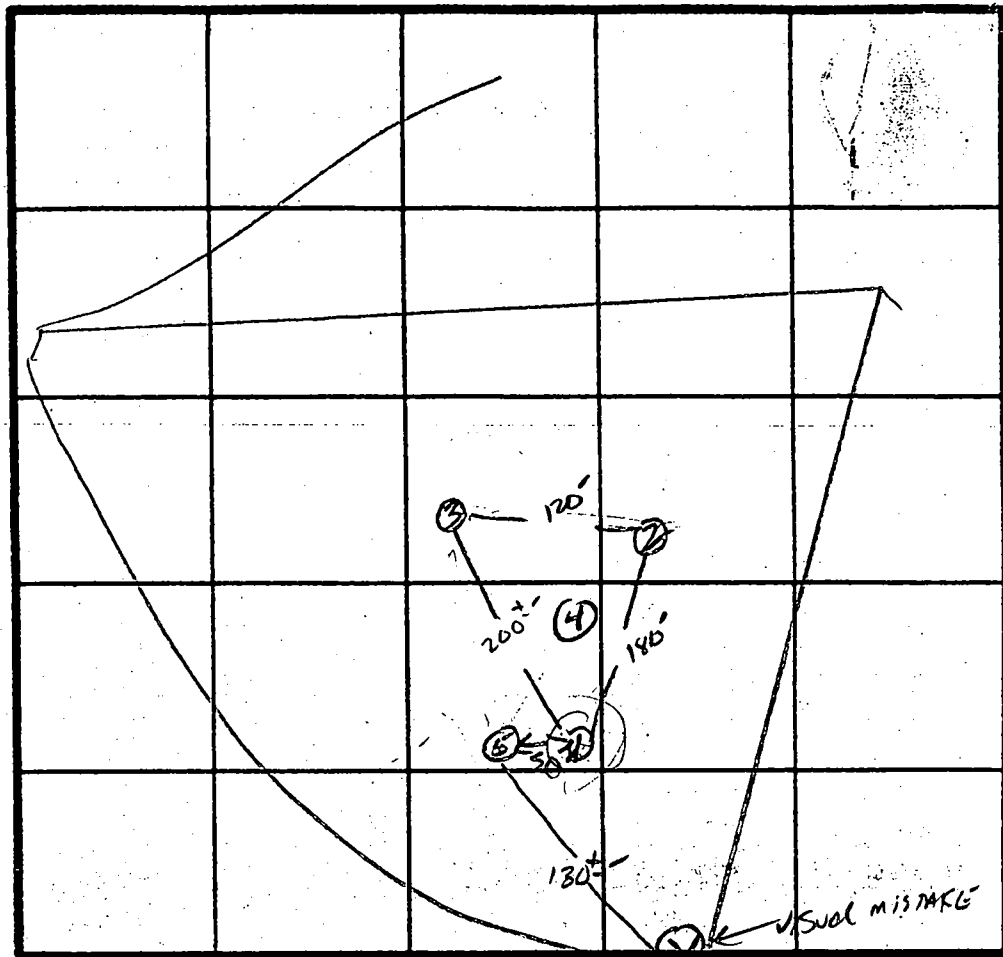
REASONS FOR REJECTION OR HOLDING \_\_\_\_\_

# THIS IS NOT A PERMIT

SOIL PROFILE

0"	AD
10"	Strong BK Silt loam q=12% clay L100% FRASS
38"	Yellow BK Silty SAND Loam 10-15% FRASS

see  
GRAPH



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Prop Lock

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
3/2/87	(1) V	WATER AT 2"					
	2 S V	44" 11' 9"	1:55 UNIFORM	1:58 Soil below	1:58 38"	2:04	6min
	3 S V	36" WATER AT 10' 3"	2:00	2:20	2:20	2:51	31min
	4 V	12" UNIFORM soil below					
	5 S V	47" 12.5' WATER AT 11.5'	2:24	2:40	2:40	3:04	24min
	✓	WATER AT 47"					

REMARKS

TYPE OF SOIL

S. Abel

# APPLICATION

PERCOLATION TESTING

A 37020

P \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 461-9933

DISTRICT 5

DATE 5/15/86

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 Wayback Corporation

ADDRESS P.O. Box 1018, Columbia, MD. 21044 PHONE 997-8800

PROSPECTIVE BUYER NONE

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

PROPERTY LOCATION:

SUBDIVISION The Chase - formerly The Paddock LOT NO. 2825

ROAD AND DESCRIPTION Homewood Road

TAX MAP 29 PARCEL # 24

SIZE OF LOT 3 acres TYPE BLDG. S.F.D.  
(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.

*[Handwritten Signature]*  
(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

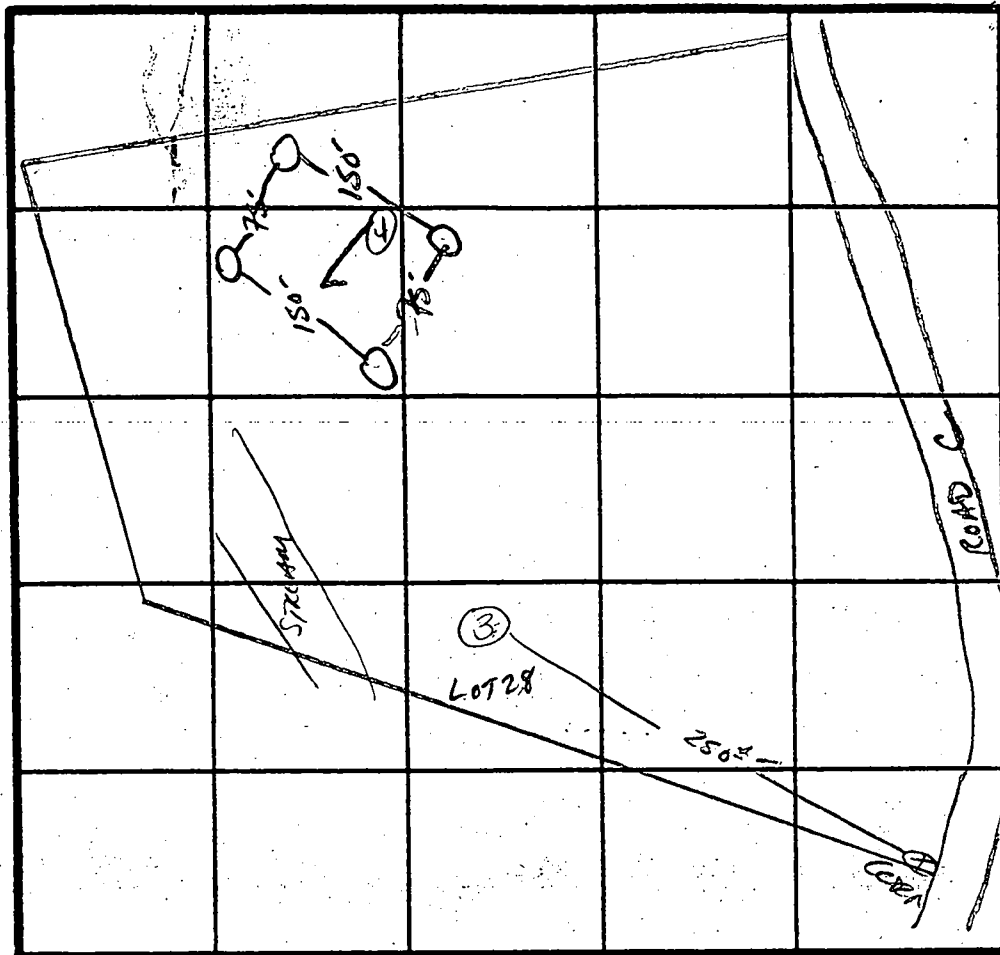
HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING 7/13/86 Redesign of wet season test. S. Abm

3/3/87 Per. Unconspicuous to be continued S. Abm

# THIS IS NOT A PERMIT

SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

↓ HORNWOOD Rd.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
7/3/86	1V	WATER AT 10'					
	2V	ROCK AT 4'					
7/3/87	3V	WATER AT 4 1/2' MOTTLES AT 34"					
	4V	ROCK AT 6'					

REMARKS \_\_\_\_\_

TYPE OF SOIL \_\_\_\_\_

C1 1941 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

COUNTY NUMBER A-37019

DATE RECEIVED, DATE WELL COMPLETED (102187), DEPTH OF WELL (300), PERMIT NO. (AC-81-2335)

OWNER (HOWARD ESTATE DEVELOPMENT), STREET OR RFD (LOB JUMP TRAIL), TOWN, SUBDIVISION (THE CHASE), SECTION, LOT (25)

WELL LOG Not required for driven wells STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

Table with columns: DESCRIPTION, FEET (FROM, TO), Check if water bearing. Rows include Top Soil, On Shale, Sand Stone, Gray Mica, Sand Stone, Gray Mica, Sand Stone, Gray Mica, Sand Stone, Gray Mica, Sand Stone, Gray Mica, opening, Gray Mica, opening, Gray Mica.

GROUTING RECORD WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL (CM, BC), NO. OF BAGS (13), NO. OF POUNDS (1300), GALLONS OF WATER (70), DEPTH OF GROUT SEAL (30)

CASING RECORD MAIN Nominal diameter, Total depth, CASING top (main) casing of main casing TYPE (SF), diameter (6), depth (38)

OTHER CASING (if used) diameter, depth (feet) from to

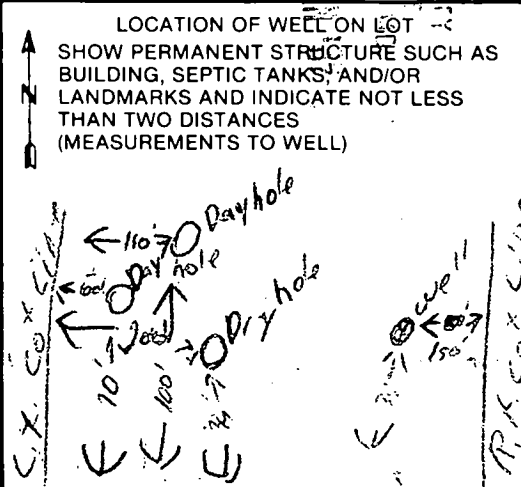
SCREEN RECORD screen type or open hole (HO), diameter, depth (feet) from to

SLOT SIZE, DIAMETER OF SCREEN (NEAREST INCH)

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

PUMPING TEST HOURS PUMPED (3), PUMPING RATE (12), METHOD USED TO MEASURE PUMPING RATE (Bucket), WATER LEVEL (25), WHEN PUMPING (27), TYPE OF PUMP USED (S)

PUMP INSTALLED DRILLER WILL INSTALL PUMP (NO), TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O), CAPACITY: GALLONS PER MINUTE, PUMP HORSE POWER, PUMP COLUMN LENGTH (2), CASING HEIGHT (2)



CIRCLE APPROPRIATE LETTER 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. (40), DRILLERS SIGNATURE (Bruce Thompson), SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.), WQ, TELESCOPE CASING, LOG INDICATOR, OTHER DATA

1/6/88 P.M.

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 # 42301  
Date 8/1/88

Name of Installer R.A. KELLY

Telephone \_\_\_\_\_

License Number 10757 MD

Certified Well Pump Installer \_\_\_\_\_ Well Driller \_\_\_\_\_ Registered Plumber

Name of Property Owner KERWIN MILLER COMMUNITIES Telephone 924-5944

Subdivision THE CHASE Lot # 25 Well Tag # HD-81-2335

Site Address 11605 LDG JUMP TRAIL

Pump

- 1. Type
  - a. Deep well jet \_\_\_\_\_
  - b. Shallow well jet \_\_\_\_\_
  - c. Submersible \_\_\_\_\_

Motor

- 1. Horsepower \_\_\_\_\_
- 2. RPM \_\_\_\_\_
- 3. Voltage \_\_\_\_\_
  - a. 110 \_\_\_\_\_
  - b. 220 \_\_\_\_\_

Pitless Adapter

- 1. Make \_\_\_\_\_
- 2. Model # \_\_\_\_\_
- 3. Depth \_\_\_\_\_

2. Make \_\_\_\_\_  
3. Model # \_\_\_\_\_

4. Capacity \_\_\_\_\_ GPM

5. Pump exceeds well capacity Yes \_\_\_\_\_ No \_\_\_\_\_

6. If Yes, is low pressure cutoff switch installed? Yes \_\_\_\_\_ No \_\_\_\_\_

7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors \_\_\_\_\_ Cable guards \_\_\_\_\_ Other \_\_\_\_\_

Tank

- 1. Capacity \_\_\_\_\_
- 2. Pressure relief valve? \_\_\_\_\_

Piping

- 1. Type \_\_\_\_\_
- 2. Size \_\_\_\_\_
- 3. NSF and/or BOCA Code approved \_\_\_\_\_
- 4. Depth of supply line \_\_\_\_\_

Well data

- 1. Depth 300 ft.
- 2. Yield 50 GPM
- 3. Static water level 25 ft.
- 4. Will water supply be disinfected by installer? YES

1/9/89 Pitless via inside casing, approx 4.5' below DP. Tank w/ cover. NO PUMP INSTALLATION SEEN. O.K. TO COVER. NO INSPECTION DONE. NO PUMP INSTALLATION SEEN. O.K. TO COVER. NO INSPECTION DONE.

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

Signature of Applicant: X Doug D'Usch

Date: 8-3-88

Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.

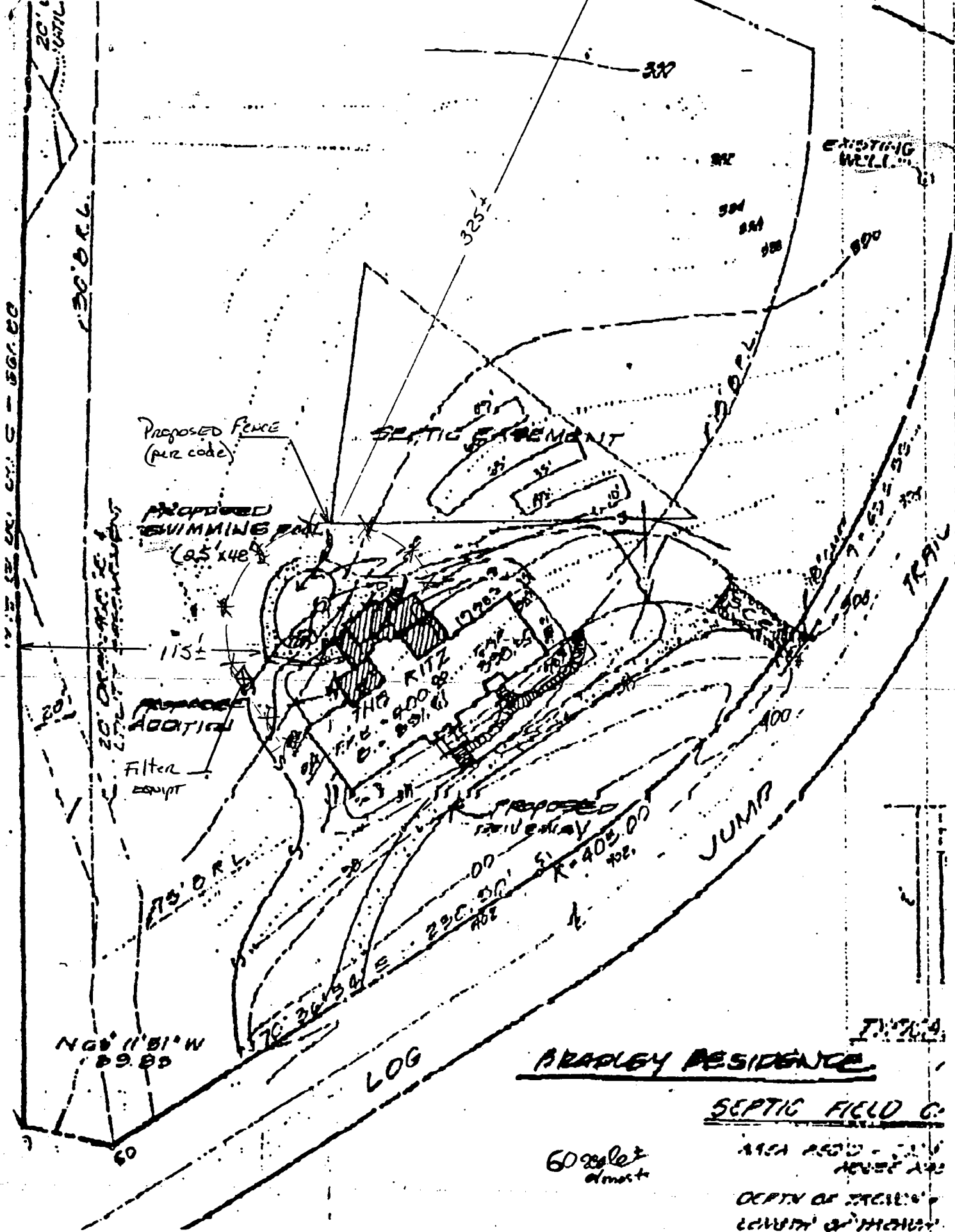


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STATIONING/REFLECTIVITY DATA

FOOTING DATA



BRADLEY RESIDENCE

SEPTIC FIELD C

60'±  
diagonal

AREA 1500' ±  
AREA 1500' ±

DEPTH OF TRENCH  
LENGTH OF TRENCH