

11-13-98
#1000.0.
11/10/98
A.M.

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 510676

A 58538

DISTRICT 4th

DATE 9-10-98

DATE SYSTEM APPROVED 11-18-98

INSPECTOR [Signature]

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
~~XXXXXX~~ 410-313-2640

INDEXED

Eric & Kristy Deblase IS PERMITTED TO INSTALL ALTER

ADDRESS 5 West 9th Avenue Baltimore, Maryland 21225 PHONE 410-795-3095

SUBDIVISION Watkins Property LOT 2 ROAD 675 Long Corner Road

PROPERTY OWNER Eric & Kristy DeBlase

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS TOP SEAMED TANK REQUIRED

NUMBER OF BEDROOMS 4

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 280

330706

TRENCHES - Trench to be 3 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 6 feet below original grade. Effective area begins at 4 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Place the distribution box 125 feet off the 250.47' (right) lot line and 145 feet off the 200.48' (rear) lot line as seen from Long Corner Road, Run trenches along contour towards the 250.47' (right) lot line.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. 8/20/98 OKAM

PLANS APPROVED BY Donna K. Soe DATE 8/18/98

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

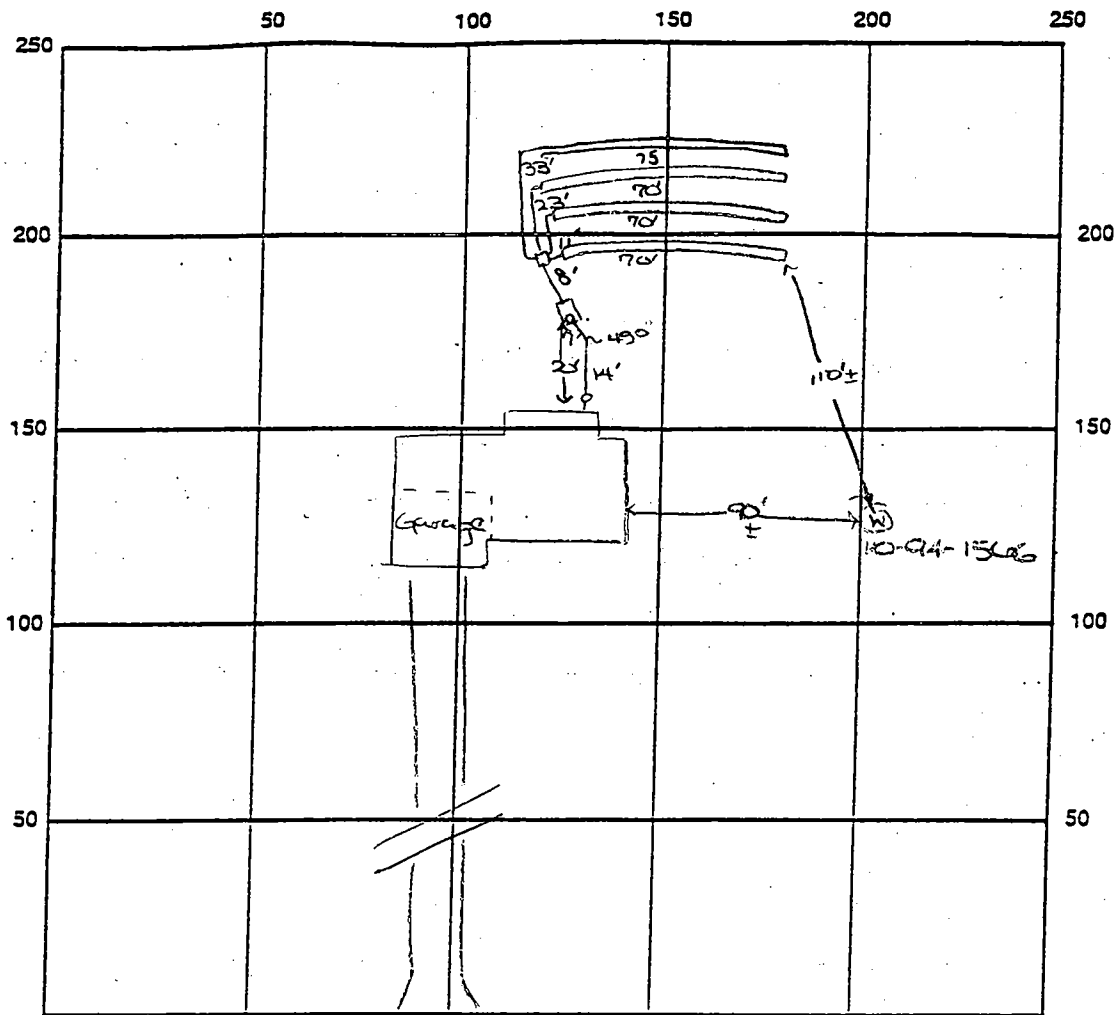
PERMIT VOID AFTER TWO YEARS

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**

1
58538



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

Long Corner Road

SEPTIC TANK LEVEL OK - 1500 gal top sealed CLEANOUTS one on s.t.

DISTRIBUTION BOX LEVEL OK

DRAIN FIELD/TITLE DEPTH 6 FT. TRENCH WIDTH 3 FT. INLET DEPTH 4 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 4 x 70 FT. → 280

NUMBER OF TRENCHES 4 ONE SIDEWALL/BOTTOM AREA 855 SQ. FT.

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

ABSORBENT AREA — SQ. FT.

REMARKS: 11/13/98 OK to cover from house to dist box and
first three trenches. OK to continue. DKS

11/16/98 FINAC - COVER ALL WORK

DATE SYSTEM APPROVED 11-18-98 INSPECTOR [Signature]

7/10/97
10:00 a.m.

EXISTING LOT OF RECORD - NO PERC.

APPLICATION

PERCOLATION TESTING

A 58538

P _____

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

6/26/97
Preview of
Existing Lot of
Record
ALM

DISTRICT _____

DATE 6/26/97

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 Albert + Dorothy Watkins Eric + Kristy DeBlase

ADDRESS P.O. Box 376 Mt Airy Md. 21771 PHONE 301-829-0682

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION ~~675 Long Corner Rd.~~ LOT NO. _____

ROAD AND DESCRIPTION 675 Long Corner Rd

TAX MAP 1 PARCEL # 32

SIZE OF LOT 1.512 Acres TYPE BLDG. Single Family - 4 Br
(SINGLE FAMILY DWELLING OR COMMERCIAL)

BLDG. PERMIT SIGNED
AND RETURNED 8-18-98
Serial # 21734435

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. Albert + Dorothy Watkins
(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

58538
COUNTY #

SOIL PROFILE

30%
Rocky
SANDY
Loam

50%
Rock

HARD

ORANGE
CLAY

TAN
FINE POWDERY
SANDY
Loam

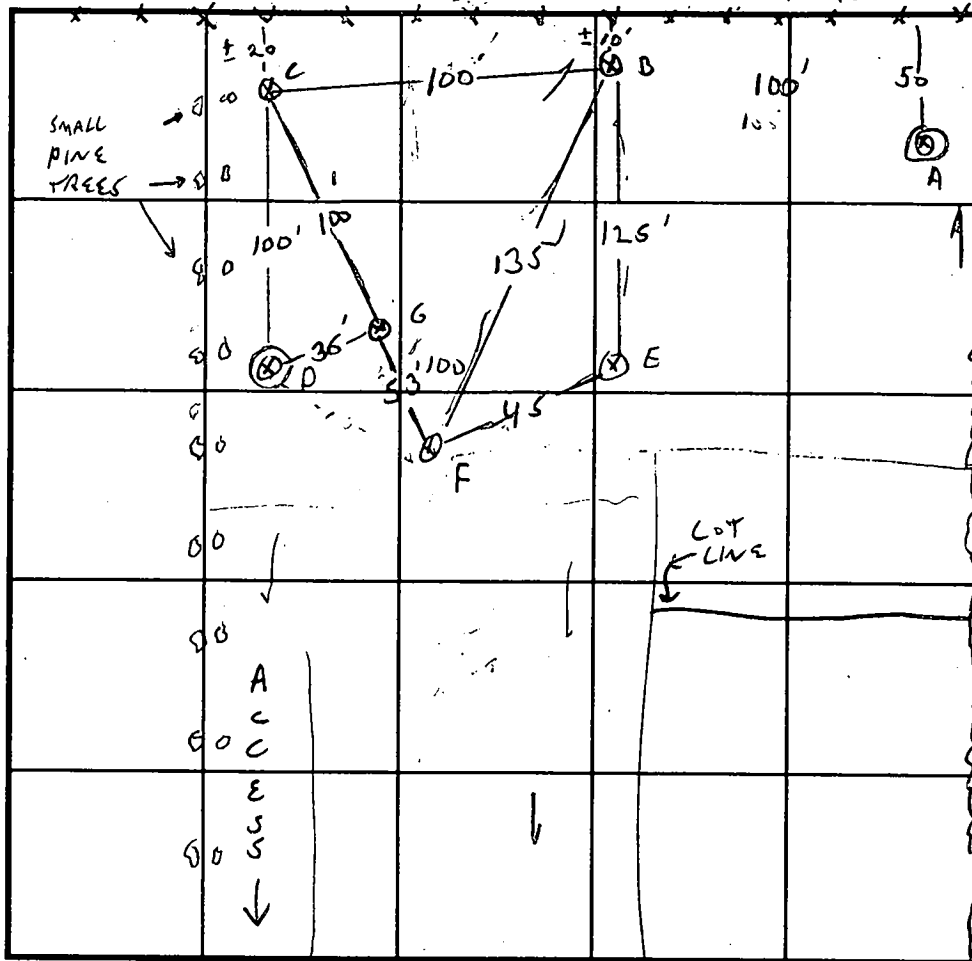
40%
Rock
in bottom
of hole

CLAY

Rock

PROP CORNER

PASTURE



SOIL PROFILE

ORANGE
CLAY

TAN
FINE
SANDY
Loam
30%
PLATY
Rock

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.
TO LONG CORNER ROAD

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
7/10/97	B ok	4.5 / 9V	10:13	10:30	11:12	11:24	5 MIN
		6 OK	10:40	10:49	10:49	11:03	14 MIN
	C ok	7 / ok	10:32	10:34	10:34	10:42	8 MIN
	X A	CLAY/ Rock					FAIL
	X D	6.5 /	11:29	12:14	12:14	12:36	FAIL
	E ok	6.5 / 10.4"	11:38	11:44	11:44	11:56	12 MIN
	F	10.6 V ok					

REMARKS D.SLOW @ 15.5", PAGE 1062

TYPE OF SOIL

TESTED BY G. SAVAGE

ALSO PRESENT OWNER, SIKK & CREW

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 14 MIN TRENCH WIDTH 3

INLET DEPTH 4 MAXIMUM BOTTOM DEPTH 6 SQ. FT./BEDROOM 210

APPLICATION

PERCOLATION TESTING

A 58538

P _____

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

DISTRICT _____

DATE 6/26/97

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 ALBERT & DOROTHY WATKINS

ADDRESS P.O. BOX 376 AT AINY RD 21711 PHONE 301-829-0682

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. _____

ROAD AND DESCRIPTION 675 LONG CORNER ROAD

TAX MAP 1 PARCEL # 32

SIZE OF LOT 1.512 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 _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

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

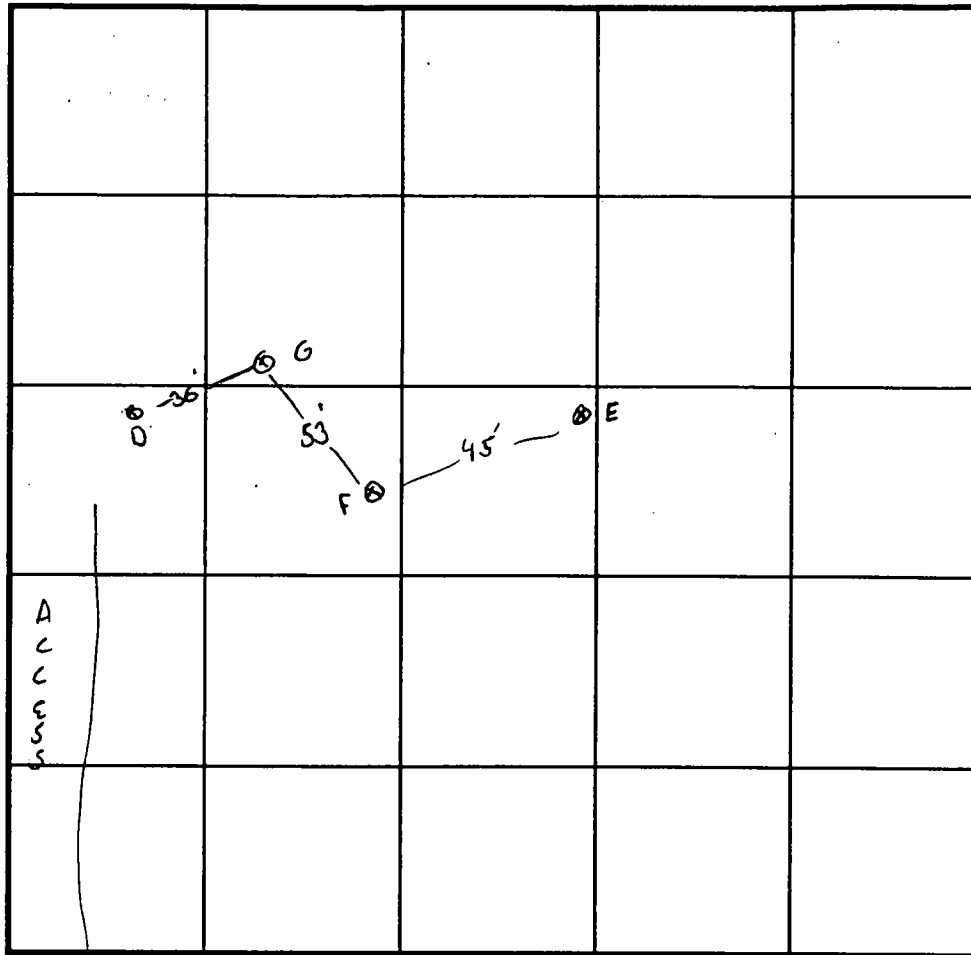
SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

A58538
COUNTY #

SOIL PROFILE

0'



SOIL PROFILE

0'

ORANGE CLAY

4

LIGHT BROWN SANDY SILT LOAM
5-30% SOFT ROCK FRAGS

10

50% ROCK

11.5'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

↓ TO LONG CORNER ROAD ↓

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
7/10/97	G ok	6.5/11.5	11:44	11:50	11:50	2:00	10AW
		12'	2:09	2:15	2:15	2:30	15MW
	F ok	6/10.5	11:55	2:02	2:02	2:20	18AW

REMARKS PAGE 2 OF 2

TYPE OF SOIL _____

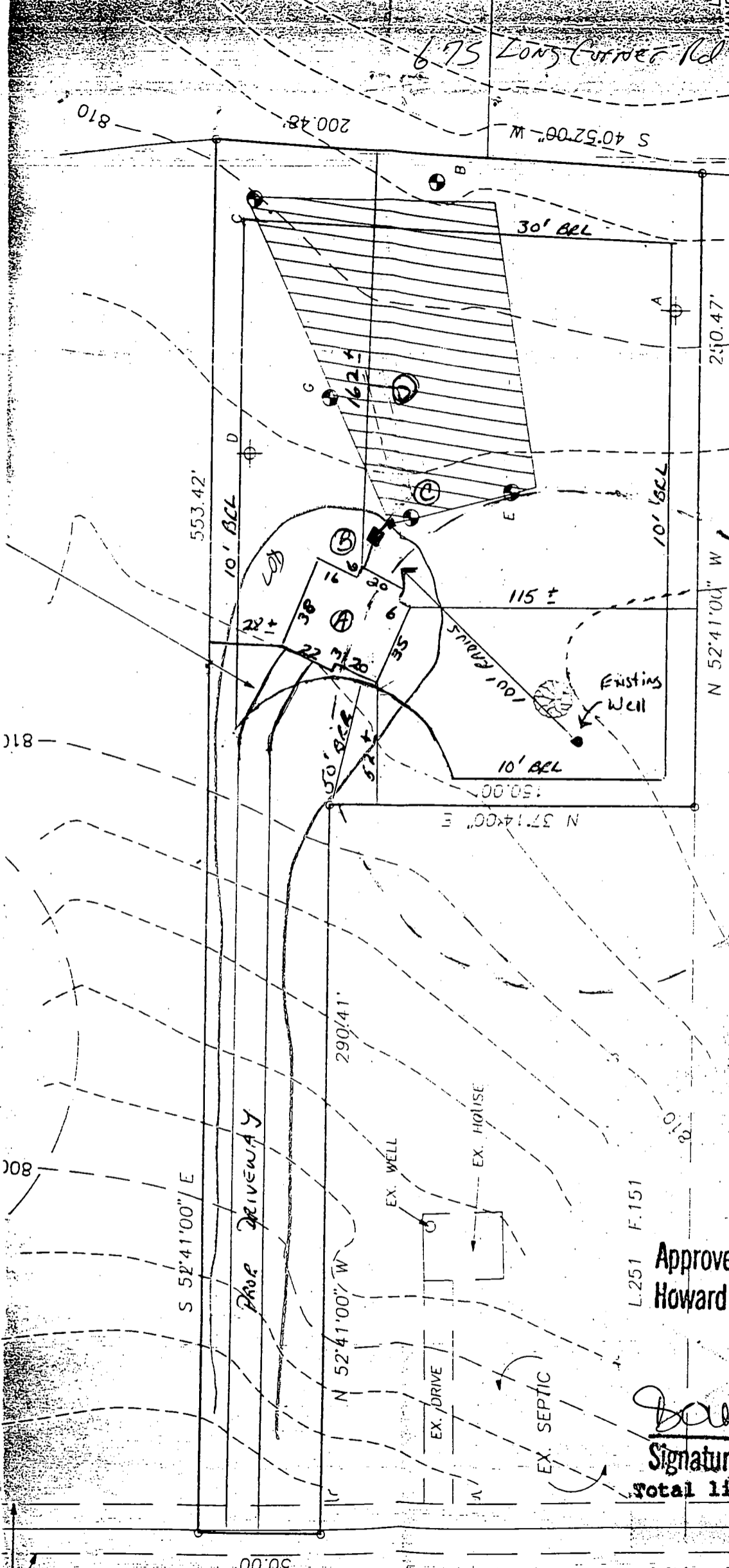
TESTED BY G. SAVAGE ALSO PRESENT OWNER, SARK & CREW

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 14 MW TRENCH WIDTH 3

INLET DEPTH 4 MAXIMUM BOTTOM DEPTH 6 SQ. FT./BEDROOM 210

675 Long Corner Rd

PLAT PLAN
 L. 394 F. 53
 SITUATED ON LONG
 CORNER RD
 FOURTH ELECTION
 DISTRICT
 HOWARD COUNTY
 SCALE 1" = 50'
 AUGUST, 1998



(A) = Prop. 4 Bed. House
 F.F. Elev. = 813.5
 Bsmt Elev. = 804.5
 INV. Elev. = 809.0

(B) = Prop. Septic Tank
 EX. Elev. = 812.7
 INV. IN. = 808.9
 INV. OUT. = 808.6

(C) = Prop. Dist. Box
 EX. Elev. = 812.5
 INV. Elev. = 808.5

(D) = Prop. Trenched
 INV. Elev. = 808.5
 2' Stone, 1" Bot. Min.,
 Length to be determined
 at time of Septic
 Permit Issuance.

Approved Septic System Plan
 Howard County Health Department

[Signature] 8/18/98
 Signature Date

Total linear feet of trench required 280 feet

Width of trench(es) 3 feet

Depth of trench(es) 6 feet

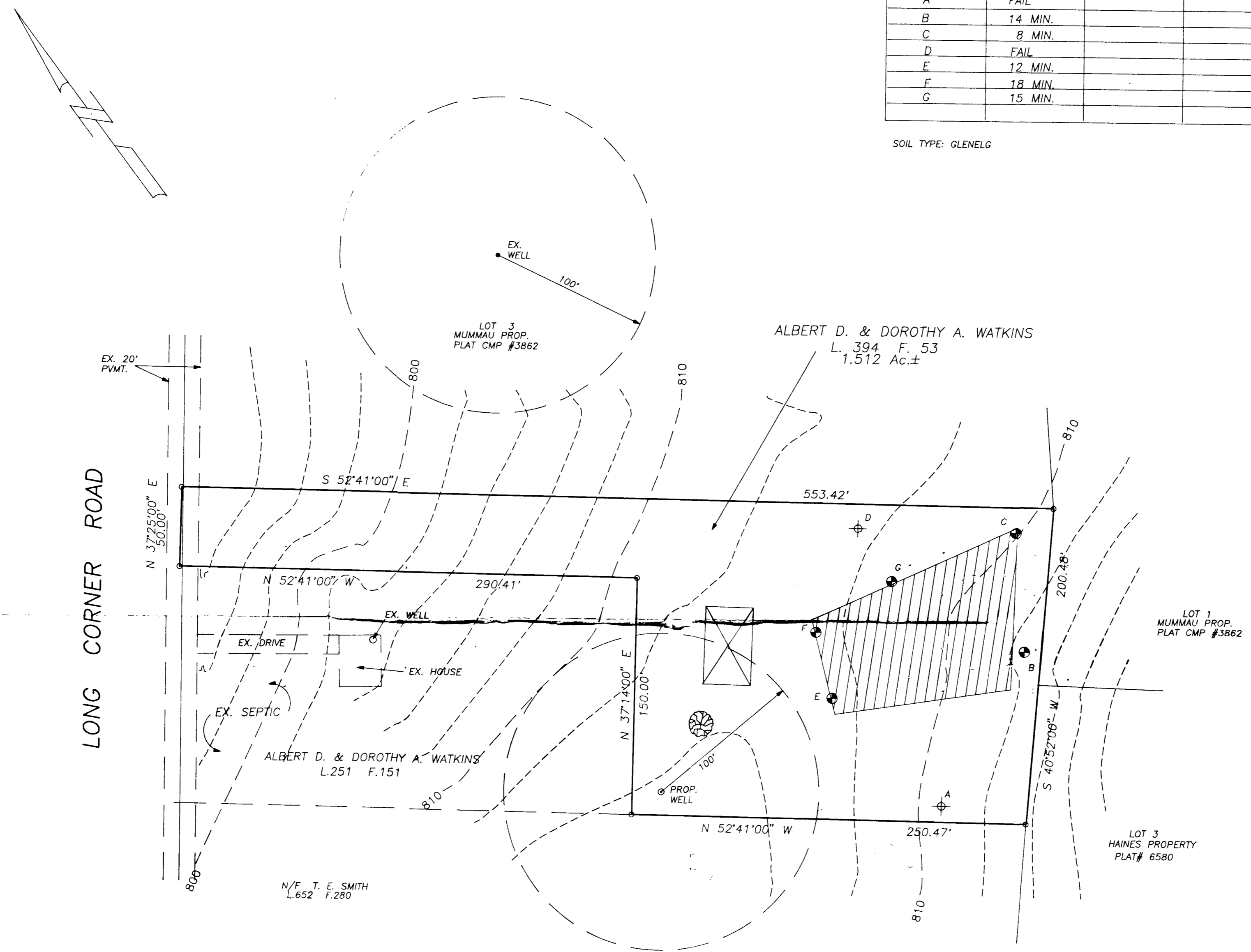
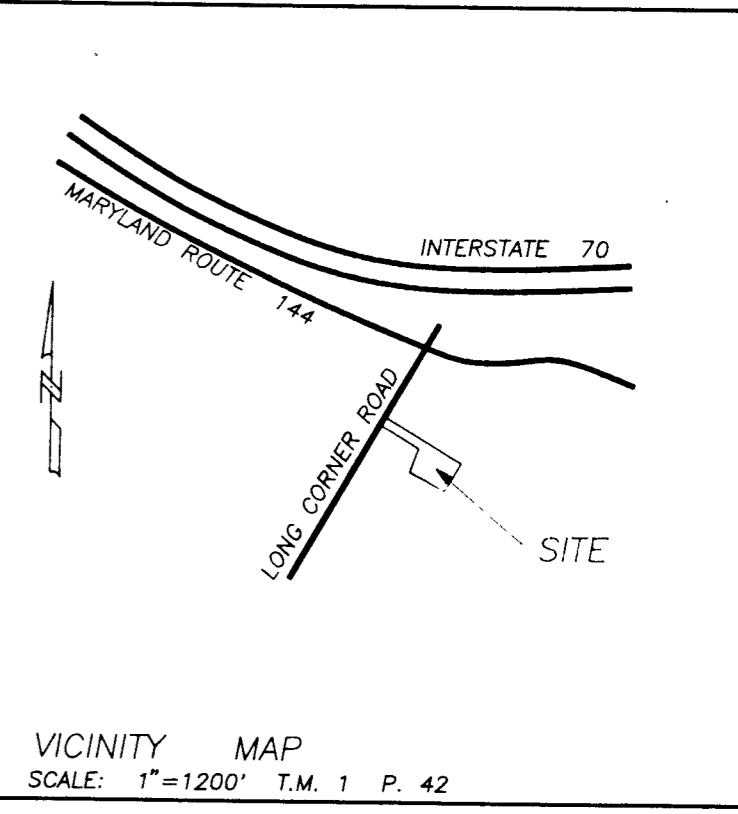
Depth of stone required below distribution pipe 2 feet

LONG CORNER ROAD

N 37°25'00" E 50.00'

PERCOLATION TEST RESULTS			
TEST No.	TITLE FEILD	DEEP TRENCH	SEEPAGE PIT
A	FAIL		
B	14 MIN.		
C	8 MIN.		
D	FAIL		
E	12 MIN.		
F	18 MIN.		
G	15 MIN.		

SOIL TYPE: GLENELG



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

Joseph B. ... 9-9-97
DATE

I CERTIFY THAT THE PERCOLATION TEST HOLE LOCATIONS SHOWN
HEREON HAVE BEEN ACCURATELY STAKED OUT ACCORDING TO
THIS PLAN, IF PROPOSED, OR HAVE BEEN ACCURATELY FIELD
LOCATED IF EXISTING, UNLESS OTHERWISE STATED HEREON.

Sourabh G. Munshi 8/29/97
DATE

SOURABH G. MUNSHI, PROFESSIONAL
LAND SURVEYOR, MD. REG. No. 10770

THIS AREA DESIGNATES A PRIVATE SEWERAGE
EASEMENT OF 10,000 SQUARE FEET AS REQUIRED BY
MARYLAND STATE DEPARTMENT OF ENVIRONMENT FOR
INDIVIDUAL SEWERAGE DISPOSAL.
IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL
PUBLIC SEWERAGE IS AVAILABLE. THESE EASEMENTS SHALL BECOME
NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM.
THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT
VARIANCES FOR ENCROACHMENTS. RECORDATION OF A MODIFIED
SEWERAGE EASEMENT SHALL NOT BE NECESSARY.

PROPOSED PERCOLATION TEST SITE PASSED FAILED

PROPOSED WELL PASSED FAILED

PROPOSED HOUSE SITE PASSED FAILED

NOTE: THERE ARE NO EXISTING WELLS OR SEPTIC
SYSTEMS WITHIN 100' OF ANY PROPERTY
BOUNDARIES UNLESS OTHERWISE SHOWN HEREON.

DATE	REVISIONS

PERCOLATION CERTIFICATION PLAT

WATKINS PROPERTY
L. 394 F. 53

SITUATED ON LONG CORNER ROAD
FOURTH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND

SCALE: 1" = 50' AUGUST, 1997

VANMAR ASSOCIATES, INC.
Engineers Surveyors Planners
310 South Main Street P.O. box 328 Mount Airy, Maryland 21771
(301) 829 2890 (301) 831 5015 (410) 549 2751

C1 05020 SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

COUNTY NUMBER A-58538

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

ST/USE ONLY DATE RECEIVED DATE WELL COMPLETED

Depth of Well 360 (TO NEAREST FOOT)

PERMIT NO. FROM 'PERMIT TO DRILL WELL' HO-94-1566

OWNER DEBLASE ERIC STREET OR RFD LONG COR. RD. TOWN MT AIRY SUBDIVISION WA-KINS PROP. SECTION LOT

WELL LOG

GROUTING RECORD

C 3 PUMPING TEST

Not required for driven wells

WELL HAS BEEN GROUTED (Circle Appropriate Box) YES [Y] NO [N]

HOURS PUMPED (nearest hour) 6

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

TYPE OF GROUTING MATERIAL (Circle one) CEMENT [CM] BENTONITE CLAY [BC]

PUMPING RATE (gal. per min.) 3

DESCRIPTION (Use additional sheets if needed)

NO. OF BAGS 10 NO. OF ROUNDS 150

METHOD USED TO MEASURE PUMPING RATE Bucket

FEET FROM TO

DEPTH OF GROUT SEAL (to nearest foot)

WATER LEVEL (distance from land surface)

Top Soil 0 2

from TOP to BOTTOM (enter 0 if from surface)

BEFORE PUMPING 52 ft.

Brown Shale 2 30

CASING RECORD

WHEN PUMPING 165 ft.

Brown Sand 30 35

types insert appropriate code below

TYPE OF PUMP USED (for test)

Blue Slate 35 50

MAIN CASING TYPE PL

A air P piston T turbine

Brown Sand 50 55

Nominal diameter top (main) casing (nearest inch) 6

C centrifugal R rotary O other (describe below)

Blue Slate 55 360

Total depth of main casing (nearest foot) 40

J jet S submersible

check if water bearing

OTHER CASING (if used) diameter depth (feet)

PUMP INSTALLED DRILLER WILL INSTALL PUMP YES [NO]

check if water bearing

screen type or open hole

IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.

check if water bearing

SCREEN RECORD

TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29

check if water bearing

DEPTH (nearest ft.)

CAPACITY: GALLONS PER MINUTE (to nearest gallon)

check if water bearing

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

PUMP HORSE POWER

check if water bearing

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

PUMP COLUMN LENGTH (nearest ft.)

check if water bearing

DIAMETER OF SCREEN (NEAREST INCH)

CASING HEIGHT (circle appropriate box and enter casing height)

check if water bearing

DRILLERS LIC. NO. MS D 116

LAND SURFACE 2 (nearest foot)

check if water bearing

DRILLERS SIGNATURE

LOCATION OF WELL ON LOT

check if water bearing

LIC. NO. MS D 116

SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND /OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)

check if water bearing

SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

Diagram showing well location on lot with distances 550' and 35'

check if water bearing

TELESCOPE CASING LOG INDICATOR OTHER DATA

Diagram showing well location on lot with distances 550' and 35'

check if water bearing

COUNTY

Diagram showing well location on lot with distances 550' and 35'

B 1 07312

SEQUENCE NO. (DP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL please print or type

STATE PERMIT NUMBER

40-94-1566 fill in this form completely

(THIS NUMBER IS TO BE PUNCHED IN COLS. 8-8 ON ALL CARDS)

Date Received (APA)

052798

OWNER INFORMATION

00BLASE ERIC

5 West 9th Avenue

Baltimore MD 21225

DRILLER INFORMATION

Ralph Mayne 116

Ralph Mayne Well Drilling

9120 Brown Church Rd Mt Airy

Ralph Mayne 5726-98

LOCATION OF WELL

HOWARD

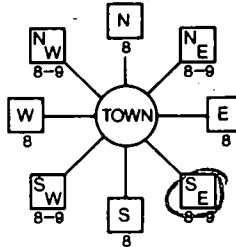
23 SUBDIVISION NONE

SECTION 44-46 LOT 48-50

Mt Airy

3 MILES FROM TOWN

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Long Cornor Rd

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



550 DISTANCE FROM ROAD ENTER FT or MI

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

HOWARD A58538 COUNTY NAME COUNTY NO.

STATE SIGNATURE DATE ISSUED

070398 CO SIGNATURE EXP. DATE

NORTH GRID 550000 EAST GRID 760000

APPROXIMATE DEPTH OF WELL 150 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN AIR-ROTary AIR-PERcussion ROTARY (Hydraulic Rotary) CABLE REVerse-ROTary DRive-POINT

REPLACEMENT OR DEEPEMED 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 DEEPEMED AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)

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

APPROP. PERMIT NUMBER GAP

FORCE 5.5 PERMIT No. 40-94-1566

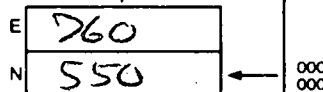
SPECIAL CONDITIONS 795-3095 - 304 831-7436

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

- 1. well
2.
3.

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

