

PUB. SEWER STATUS VERIFIED BY _____

ISSUE DATE: 1/25/79

P 29441

APPROVAL DATE: _____

A 511653

PERMIT

INDEXED

RPS#
349559

ON-SITE SEWAGE DISPOSAL SYSTEM HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH

IS PERMITTED TO INSTALL ALTER

ADDRESS: _____ PHONE NUMBER: _____

SUBDIVISION: Aintree Estates LOT NUMBER: 6, Sec. 1

ADDRESS: 6280 Linkythorn Lane PROPERTY OWNER: _____

SEPTIC TANK CAPACITY (GALLONS): _____

PUMP CHAMBER CAPACITY (GALLONS): _____

NUMBER OF BEDROOMS: _____

SQUARE FEET PER BEDROOM: _____

LINEAR FEET OF TRENCH REQUIRED: _____

TRENCHES:	Trench to be _____ feet wide. Inlet _____ feet below original grade. Bottom maximum depth _____ feet below original grade. Effective area begins at _____ feet below original grade. _____ feet of stone below distribution pipe.
LOCATION:	_____
PURPOSE:	_____

PLANS APPROVED: _____ DATE: 3/13/1979

- NOTE: PERMIT VOID AFTER 2 YEARS
- NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
- NOTE: WATERTIGHT SEPTIC TANKS REQUIRED
- NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL
- NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

A-511653

3/13/79

3/13/79

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLCOTT CITY

DISTRICT 5th

DATE 1/25/79

INDEXED

Faul Schuler

James Pare

IS PERMITTED TO INSTALL ALTER

ADDRESS 10300 Cherry Tree Lane, Silver Spring, Md. 20901 PHONE 893-6742

SUBDIVISION Alexton Estates ROAD 6280 Linkytora Lane LOT 6, Sec. 1

PROPERTY OWNER James Pare

ADDRESS SEE ABOVE

SPECIFICATIONS 3 bedrooms (2 bedrooms only in house)

SEPTIC TANK CAPACITY 1000 GALLONS

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

DEEP TRENCH _____ DEPTH _____ FEET. BOTTOM AREA _____ SQ. FT.

BEDPAGE PITS ABSORBENT SIDE-WALL AREA 300 SQ. FT. total sidewall area in dry well.

INLET PIPE 3 FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH _____ FT. BELOW ORIGINAL GRADE

EJECTIVE DEPTH AT _____ FT. BELOW ORIGINAL GRADE.

LOCATE DISPOSAL AREA 150 FT. FROM rear LOT LINE AND 105 FT. FROM right LOT LINE AS SEEN WHEN FACING LOT FROM the front.

Rest of system to be in trench after 5 ft. earth buffer off dry well. Trench to be 20 ft. long, 9 ft. deep, with 3 ft. of stone and follow contour of the ground. TRENCH TO BE INSPECTED BEFORE GRAVEL IS INSTALLED.

PLANS APPROVED BY Donald W. Monaghan DATE 6/15/78

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 16 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.

*BOG. PERMIT SIGNED
AND RETURNED 4/2/79
Luiz #27536 post*

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

AL1553

5/10/79 if possible
if not 3/13/79

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 5th

DATE 1/25/79

P 29441
A 11653

INDEXED

Paul Schicker
James Faro

IS PERMITTED TO INSTALL ALTER

ADDRESS 10300 Cherry Tree Lane, Silver Spring, Md. 20901 PHONE 593-6742

SUBDIVISION Aintree Estates ROAD 6280 Linkythorn Lane LOT 3, Sec. 1

PROPERTY OWNER James Faro

ADDRESS same as above

SPECIFICATIONS 3 bedrooms (2 bedrooms only in house)

SEPTIC TANK CAPACITY 1000 GALLONS

DRAIN FIELD DEPTH FEET BOTTOM AREA SQ. FT.

DEEP TRENCH DEPTH FEET BOTTOM AREA SQ. FT.

SEWERAGE PITS ABSORBENT SIDE WALL AREA 300 SQ. FT. total sidewall area in dry well.

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EFFECTIVE DEPTH AT FT. BELOW ORIGINAL GRADE

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FACING LOT FROM the front.

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PLANS APPROVED BY Donald W. Nonaghan DATE 6/15/78

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

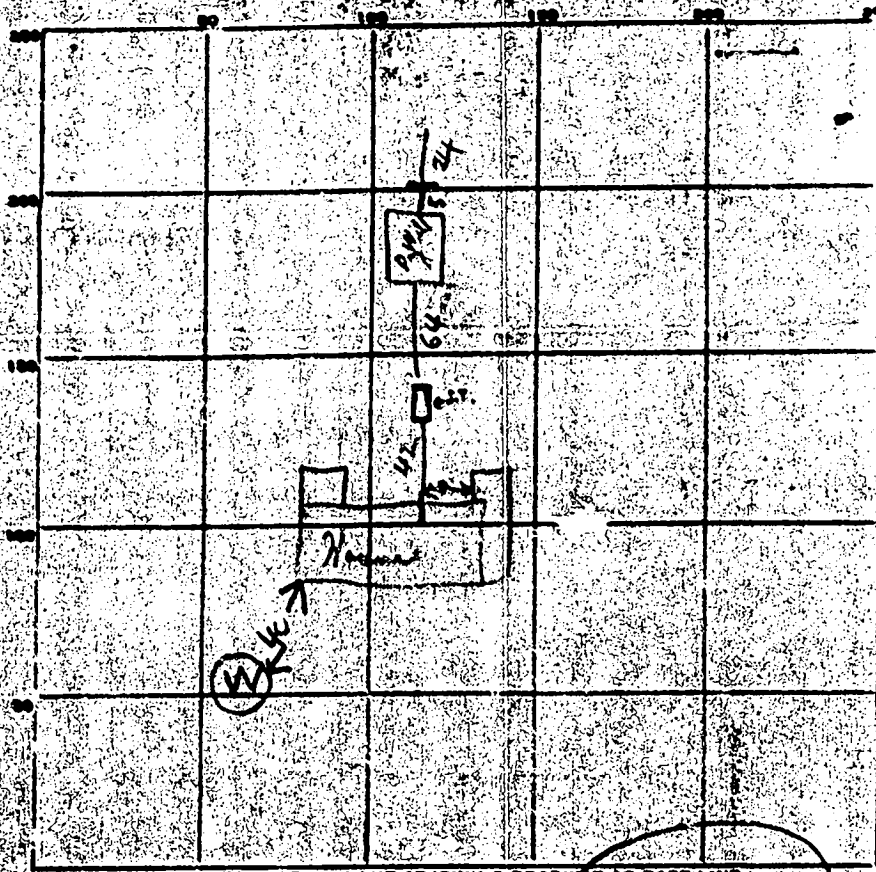
NOTE ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

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

COG. PERMIT SIGNED
AND RETURNED 6/21/78
Local Health Dept.

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



PERMITS CARD Rd ST. RW

SEPTIC TANK LEVEL OK 1100 CLEANOUTS YES

DISTRIBUTION BOX LEVEL OK

TRENCH DEPTH 9 FT. TRENCH WIDTH 2 FT.

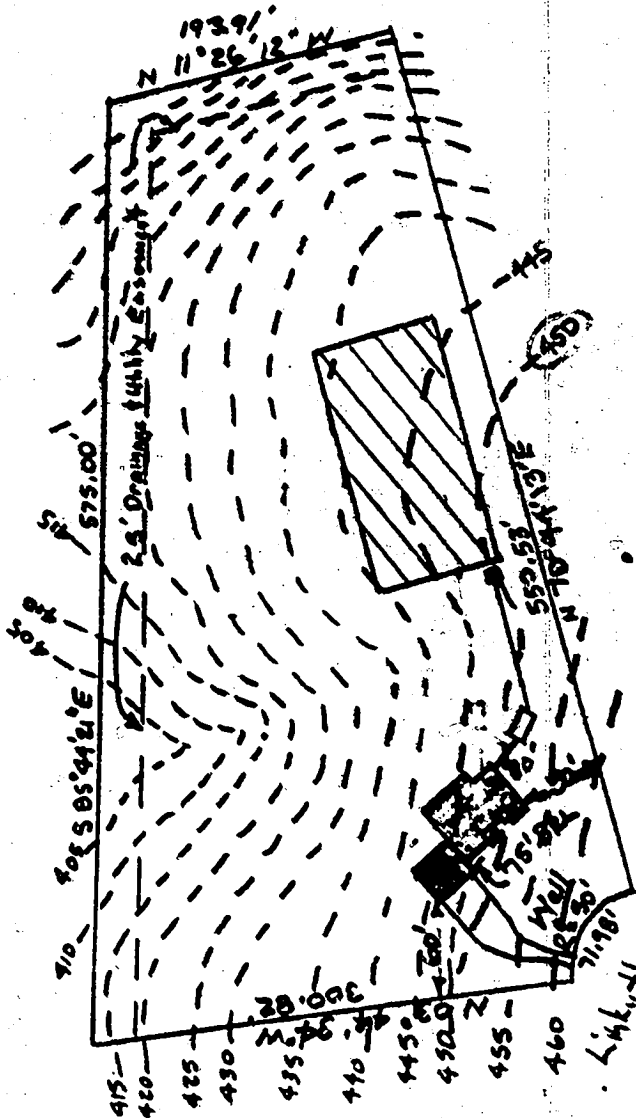
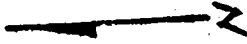
GRAVEL DEPTH 6 FT. TOTAL LENGTH 24 FT.

NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA 144

SEEPTAGE PITS: INSIDE DIAMETER 50 FT. DEPTH BELOW INLET 6 1/2 FT.

ABSORBENT AREA 3 SQ. FT.

REMARKS 3/12/79 @ Tank in the ground not dug
not installed. gravel in the trench - call
the edge and 3/13/79 - DW INLET 3 FT
BELOW GRADE. PERMITS FOR DW 50 FT INLET
DITCH IS 3 FT BELOW GRADE. LOCATION
PER PLANS. STONE ADDED TO DITCH AT TIME OF INSPE.
 DATE SYSTEM APPROVED 3/13/79 INSPECTOR Raymond Hodges



Scale 1"=100'
 Contour Interval = 5'
 Lot B
 Linky Thom Lane
 Airtree Estates
 Section One
 5th Election District

First Fin. Elev.	452.0
Bas't Elev.	443.0
Outflow	448.0
Into Tank	448.0
Out of Tank	448.5
Into Field	447.0

3 Bedrooms
 with garbage disposal

7/5/87
 Eduardo S. Mel

BLDG. PERMIT SIGNED
 AND RETURNED 7/9/87
 SP/301
 S.M.

STATE OF MARYLAND WATER RESOURCE ADMINISTRATION TOWNS STATE OFFICIALS, ANNAPOLIS, MD. 21404 WELL COMPLETION REPORT

FILL IN THIS FORM COMPLETELY COUNTY NUMBER 24237

DATE RECEIVED June 22, 1973 DEPTH OF WELL 355 FEET

OWNER FREC. 30300 Chestnut Lane SILVER SPRING, MD. 20901

WELL LOG table with columns: DESCRIPTION, FEET, and other well details. Includes entries like 'Blue mica', 'Brown mica', 'Blue mica', 'Opening', 'Blue mica'.

GRouting RECORD section with checkboxes for cement, grout seal, and other materials.

CASING RECORD section with checkboxes for casing types and diameters.

SCREEN RECORD section with checkboxes for screen types and materials.

DEPTH NEAREST WHOLE FEET section with a grid for recording depth measurements.

PUMPING TEST section with checkboxes for pump types and test results.

PUMP INSTALLED section with checkboxes for pump specifications and details.

CASING HEIGHT section with checkboxes for casing height measurements.

LOCATION OF WELL ON LOT section with a diagram area for well placement.

CIRCLE APPROPRIATE BOXES section with checkboxes for well completion status and other notes.

DIAMETER OF SCREEN and SPACEL PACK sections with checkboxes for screen and pack details.

TELEPHONE CORDING section with checkboxes for cording details.

5912 SEQUENCE NO. (KEEP USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 38 ON ALL CARDS)

STATE OF MARYLAND
WELL COMPLETION REPORT
 FILL IN THIS FORM COMPLETELY
 PLEASE PRINT OR TYPE

THIS REPORT MUST BE SUBMITTED WITHIN
 45 DAYS AFTER WELL IS COMPLETED
 COUNTY NUMBER **A-11655**

DATE RECEIVED [] [] [] [] [] []
 DATE WELL COMPLETED **041982**

Depth of Well **265**
 TO NEAREST FOOT

PERMIT NO. **HIC-51-21111**
 FROM PERMIT TO DRILL WELL

OWNER **COOPERATION**
 STREET OR RFD **FRANKLIN DRIVE**
 SUBDIVISION **ANDRES STATES** SECTION **PCM** TOWN **HIGHLAND** LOT **8**

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

DESCRIPTION (use additional sheets if needed)	FEET		Check if water bearing
	FROM	TO	
Top Soil	0	2	
Sandy	2	50	✓
Sandstone	50	60	
MCHA	60	80	
Sandstone	80	85	✓
MCHA	85	265	

ROUTING RECORD
 WELL HAS BEEN GROUTED (Circle appropriate box)
 TYPE OF GROUTING MATERIAL
 CEMENT **CM** BENTONITE CLAY **BC**

NO. OF BAGS **14** NO. OF POUNDS **89**
 GALLONS OF WATER
 DEPTH OF GROUT SEAL (to nearest foot)
 from **0** ft. to **20** ft.
 Enter 0 if from surface

CASING RECORD
 Casing types (insert appropriate code below)
ST STEEL **CO** CONCRETE
PL PLASTIC **OT** OTHER

MANN CASING TYPE
 NOMINAL diameter (top diameter) (nearest inch) **4**
 Total depth of casing (nearest foot) **41**

OTHER CASING if used:
 diameter inch from to

SCREEN RECORD
 Screen type of open hole (insert appropriate code below)
ST STEEL **BR** BRASS **HO** HOLE OVER HOLE
PL PLASTIC **OT** OTHER

C2

DEPTH (nearest ft.)	DEPTH (nearest ft.)	DEPTH (nearest ft.)	DEPTH (nearest ft.)
0	2	50	265

CIRCLE APPROPRIATE LETTER
A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED
E ELECTRIC LOG OBTAINED
P TEST WELL CONVERTED TO PRODUCTION WELL

THE DRILLER CERTIFIES THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 17.13. WELL CONSTRUCTION AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT AND THAT THE INFORMATION PRESENTED HEREON IS ACCURATE AND COMPLETE TO THE BEST OF HIS KNOWLEDGE

DRILLERS IDENT NO. **22**
 DRILLERS SIGNATURE: *[Signature]*
 (MUST MATCH SIGNATURE ON APPLICATION)
 SITE SUPERVISOR (signature of driller's journeyman responsible for accuracy if different from permittee)

SLOT SIZE
 DIAMETER OF SCREEN (NEAREST INCH)
 from to

GRAVEL PACK
 IF WELL DRILLED WAS FLOWING WELL INSERT IN BOX 63

KEEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)
 TELESCOPE CASING LOG INDICATOR OTHER DATA

C3

PUMPING TEST
 HOURS PUMPED (nearest hour) **3**
 PUMPING RATE (gpm per min to nearest gal.) **4**
 METHOD USED TO MEASURE PUMPING RATE *[Handwritten]*
 WATER LEVEL (measure from land surface) BEFORE PUMPING **42**
 WHEN PUMPING **142**

TYPE OF PUMP USED (see list)
A Air **P** Piston **T** Turbine
G Gear **R** Rotary **O** Other (describe below)
J Jet **(S)** Submersible

PUMP INSTALLED

DRILLER WILL INSTALL PUMP (CIRCLE YES OR NO)
 YES NO
 IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE
 TYPE OF PUMP INSTALLED
 PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE

CAPACITY: GALLONS PER MINUTE (to nearest gallon) [] [] [] []
 PUMP HORSE POWER [] [] [] []
 PUMP COLUMN LENGTH (nearest ft.) [] [] [] []

CASING HEIGHT (circle appropriate box and enter casing height)
 above below
 LAND SURFACE **2** (nearest foot)

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



APPLICATION

A 11653

P _____

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 5

DATE 3/30/66

1000
 3 bedrms - 700 gal. septic tank
 Dry well 10 ft. in dia by 10 ft. deep below
 the inlet located 150 ft. from the rear property
 line and 105 ft. off the right side property line as
 seen when from the lot from road A. vertical
 pipe 3 ft. below original grade.
 4 bedrms - 1100 gal. septic tank
 Dry well 12 ft. in dia by 11 ft. deep below the
 inlet with footing and other specifications the
 same as for 3 bedrms.

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 Aintree Estates, Inc. *Carma Fure*

ADDRESS 301 Cedar St., N. W. Washington, D. C. PHONE 202-5-1635

PROPERTY LOCATION 10300 Cherry Tree Lane Silver Spring Md. 20901 (work) 299-3151

SUBDIVISION Aintree Estates, Inc. LOT NO. 6, Sec. 1

ROAD AND DESCRIPTION Road on 6250 Lickytown Lane

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____ PHONE _____

ADDRESS _____

SIZE OF LOT 2.0 ACRES ± TYPE BLDG. Single Det. Residence

IF NOT SINGLE RESIDENCE DESCRIBE _____

BLDG. PERMIT SIGNED AND RETURNED 7/13/78
Serial No. 36355

SIGNATURE OF APPLICANT Ed. W. Brincefield per Mr. Butherford

APPROVED BY D. Jennings FOR Dry well DATE 4-29-66

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

1/13/88 pm
1/14/88 1st AM

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

P. 39870

A. 11655

DISTRICT 5th

DATE 8-17-87

DATE SYSTEM APPROVED 1-14-88

INSPECTOR LEN

WILLOWAY IS PERMITTED TO INSTALL _____ ALTER _____

ADDRESS _____ PHONE 854-2513

SUBDIVISION AINTAGE Estates ROAD 6277 CORKYTHORNE LA. LOT 8

PROPERTY OWNER Murzy Jhabvala

ADDRESS _____

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 25%

GARBAGE GRINDER? YES _____ NO _____

SEPTIC TANK CAPACITY 1500 GALLONS NUMBER OF BEDROOMS _____
220 / BDRM 2 Inlet at 4', bottom at 8' CW

PLANS APPROVED BY _____ DATE _____

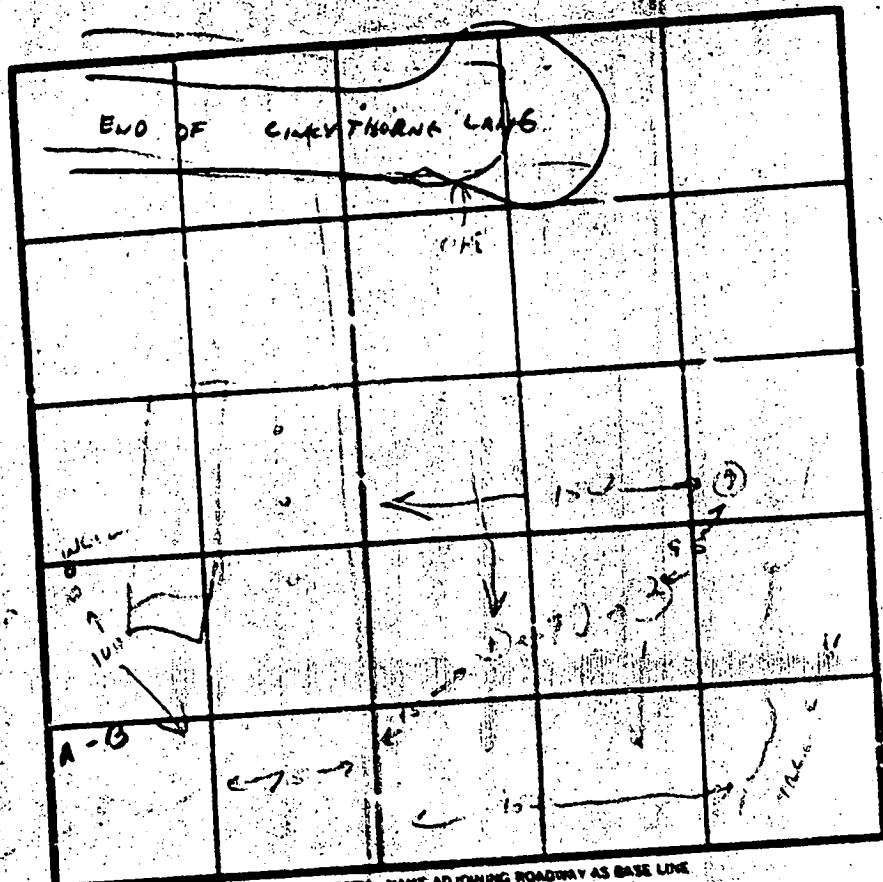
COVER NO WORK UNTIL INSPECTED AND APPROVED

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 BOARDS MUST HAVE MAFFLES

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

CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS



ALL Holes
SOIL PROFILE

0
MICA
SILT
CLAY

3
MICA
LOAM

5
Silt
WEATHERED
MIC-SEN

13
SAND

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2/1/87	1	4	1:30	1:38	1:52	1:59	2
		13					
	2	4					
		13					
	3	4					
		13					
	A+B						

JUN 33 1 43 PM '87

DEPARTMENT OF ENVIRONMENTAL HEALTH

EH 12-1079

REMARKS: SUFFICIENT SEPTIC AREA EST. FOR IF EMERGENCY RESULTS 76000 - 15704
 TYPE OF SOIL: MICA LOAM
 TESTED BY: [Signature]
 ALSO PRESENT: [Signature]

FEB 14, 1987
NOON

APPLICATION

A 11655
P _____

PERCOLATION TESTING

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

DISTRICT _____
DATE _____

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 Mr & Mrs. Richard & Frances (804-220-1969)
23185
ADDRESS 104 Birnwell Ct., Williamsburg, VA PHONE 730-2900 (ERA-Urban)

RESPECTIVE BUYER Murray Jhabrala / Kathryn Stoner
ADDRESS 9328 Washington Blvd., Sewbrook, MD PHONE H-459-1389
20706 PHONE W-286-5232
Reason same value 730-2900

PROPERTY LOCATION
SUBDIVISION Qintree Estates (6277 Linky Thorn Rd.) LOT NO. 8

ROAD AND DESCRIPTION County

TAX MAP 34 PARCEL 247
SIZE OF LOT 156,303 TYPE BLDG Single family
(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.

Murray Jhabrala / Kathryn A Stoner
(SIGNATURE OF APPLICANT) 1/31/87

APPROVED BY Curelin FOR TREVCHES DATE 2/9/87

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

IS D.C. PERMIT SIGNED
AND RETURNED 2/11/87
671388

THIS IS NOT A PERMIT

