

LAYOUT 12/10/03 12:30 INSP 4 3/26/04 11:00  
 INSP 2 1/7/04 PM INSP 5 \_\_\_\_\_  
 INSP 3 1/8/04 - AM INSP 6 \_\_\_\_\_

1  
 65  
 .83  
 .71  
 .62

ISSUE DATE: 6/10/2003  
 APPROVAL DATE: 3/26/04

P 519004  
 A 513303-A

**PERMIT INDEXED**

TAX ID #05-436370

**ON-SITE SEWAGE DISPOSAL SYSTEM  
 HOWARD COUNTY HEALTH DEPARTMENT  
 BUREAU OF ENVIRONMENTAL HEALTH  
 3525-H ELLICOTT MILLS DRIVE, ELLICOTT CITY, MD 21043**

Freedom Septic IS PERMITTED TO INSTALL  ALTER

ADDRESS: 239 W. Old Liberty Road, 21784 PHONE NUMBER: 410-795-2947

SUBDIVISION: Livmar Estates LOT NUMBER: 2

ADDRESS: 12215 Lime Kiln Road PROPERTY OWNER: Todd McDonald

SEPTIC TANK CAPACITY (GALLONS): 1000 OUTLET BAFFLE FILTER REQUIRED

PUMP CHAMBER CAPACITY (GALLONS): 1000 COMPARTMENTED TANK REQUIRED

NUMBER OF BEDROOMS: 3

SQUARE FEET PER BEDROOM: 210

LINEAR FEET OF TRENCH REQUIRED: 210 HOUSE SERVED BY PUBLIC WATER

TRENCHES:	Trench to be 3.0 feet wide. Inlet <u>5.5</u> feet below original grade. Bottom maximum depth <u>7.5</u> feet below original grade. Effective area begins at <u>7</u> feet below original grade. <u>2</u> feet of stone below distribution pipe.
LOCATION:	Place distribution box in the center of the high edge of the sewage easement, which is approximately 70' from the left lot line and 20' from the front lot line. Run a total of (4) 53' trenches on contour in either direction.
NOTES:	Design depth to be determined in field upon excavation of confirmation test hole at distribution box location. <u>LAYOUT INSP. PRIOR TO TANK INSTALLATION.</u>

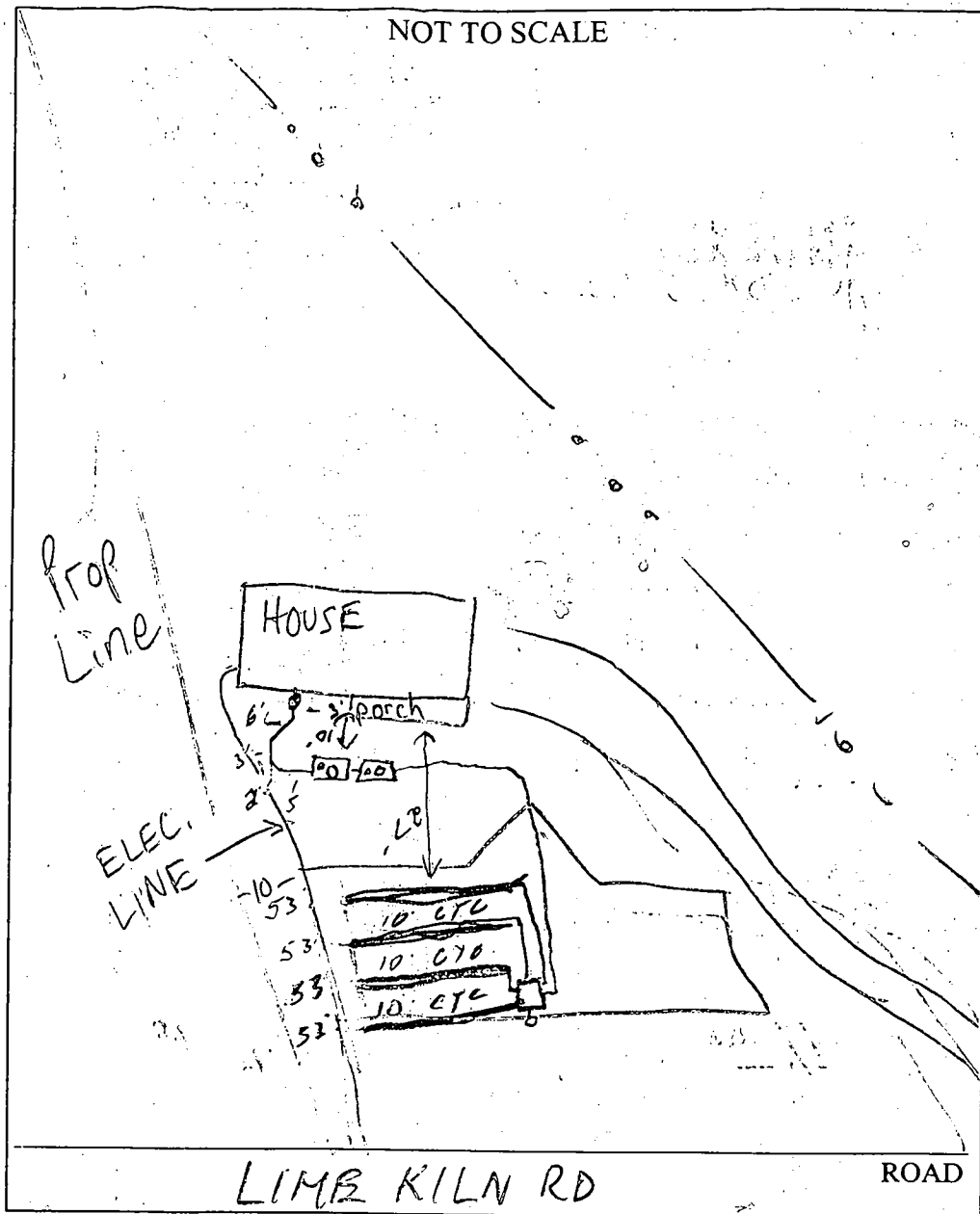
PLANS APPROVED: MER DATE: 2/12/03

NOTES: PERMIT VOID AFTER 2 YEARS  
 CONTRACTOR IS RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS  
 WATERTIGHT SEPTIC TANKS REQUIRED  
 ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL UNLESS SPECIFICALLY AUTHORIZED  
 MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS UNLESS SPECIFICALLY AUTHORIZED  
 CONTRACTOR RESPONSIBLE FOR COMPLIANCE WITH APPLICABLE REGULATIONS, GUIDELINES AND THE TERMS OF THIS PERMIT

**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 DO NOT LEAVE ANY REQUEST FOR INSPECTION ON VOICEMAIL**

A513303-A

NOT TO SCALE



TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
3'	5.5'	2.5'
NUMBER OF TRENCHES		4
TOTAL LENGTH		212'
ABSORPTION AREA		6364
DISTRIBUTION BOX LEVEL		✓
DISTRIBUTION BOX BAFFLE		✓
DISTRIBUTION BOX PORT		✓

SEPTIC TANK DATA	
SEPTIC TANK 1 LEVEL	✓
CAPACITY	1250 GAL
SEAM LOC	Top
TANK LID DEPTH	1'
BAFFLES	✓
BAFFLE FILTER	—
MANHOLE LOC	Center
6" PORT LOC	Front
WATERTIGHT TEST	—
SEPTIC TANK 2 LEVEL	✓
CAPACITY	1250 GAL
SEAM LOC	Top
TANK LID DEPTH	1'
BAFFLES	✓
BAFFLE FILTER	—
MANHOLE LOC	Center
6" PORT LOC	Front
WATERTIGHT TEST	✓

PRE-CONSTRUCTION 12/10/03 SDA STAKES NOT VISIBLE DUE TO SNOW, BCE LINE

AND HOUSE PLUMBING LOC → REVERSE TANK LAYOUT SHOWN ON PLAN, OK TO START (MD)

INSTALLATION 1/8/04 - DK to cover all work. Pump &

Alarm tests needed (SO)

3/26/04 - Pump & Alarm OK (SO)

FINAL INSPECTOR

DATE OF APPROVAL

3/26/04



Howard County  
Health Department

3525 H Ellicott Mills Drive, Ellicott City, MD 21043  
(410) 313-1771 Fax (410) 313-2648  
TDD (410) 313-2323 Toll Free 1-866-313-6300  
website: www.hchealth.org

Pennv E. Borenstein, M.D., M.P.H., Health Officer

April 13, 2004

Todd McDonald  
12259 Lime Kiln Road  
Fulton, MD 20759

**FAXED VIA FACSIMILE 301-604-2065**

RE: Livmar Estates, Lot 2  
12215 Lime Kiln Road  
BP # B00139387  
Well Permit # HO-94-3411

Dear Sirs:

This is to advise you that the septic system for the above referenced property has been installed and inspected. Final approval of the septic system was granted on **3/26/2004**.

The water sample results indicate that the water samples submitted for testing were free of coliform and fecal coliform bacteria at the time of sampling and are bacteriologically safe for drinking. The water sample results were found to be in compliance with COMAR water quality standards.

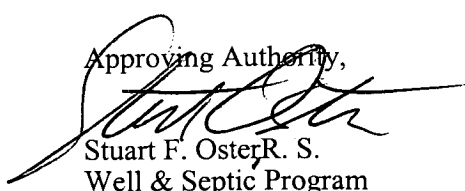
#### **INTERIM CERTIFICATE OF POTABILITY**

This certifies that the initial sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under well permit #HO-94-3411. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies. Based upon satisfactory investigation and evaluation, the Howard County Health Department as authorized by the Maryland Department of the Environment accepts this well system as required by COMAR 26.04.04.

This certificate may become final upon completion of the second bacteriological test, which is to be taken by the county health department within six months of receipt of this letter. **Please contact (410) 313-1773 to schedule a final water sample appointment. Currently, there is no charge for this final sampling.**

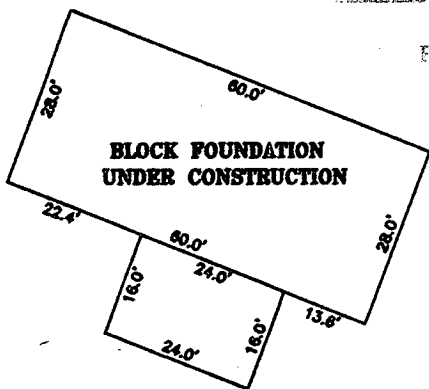
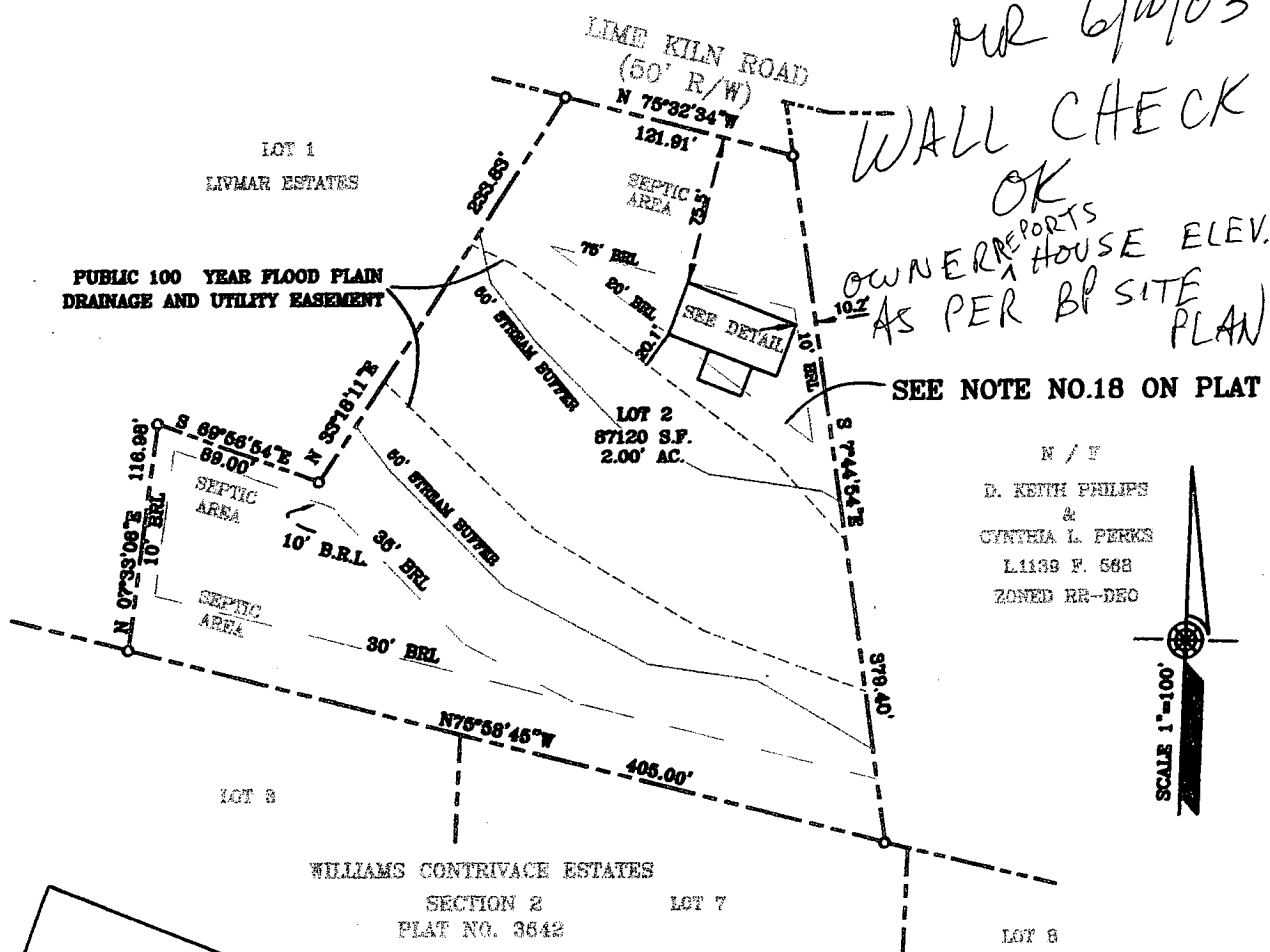
Date of Water Samples: 4/01/2004 & 4/8/2004  
Date of Well Completion: 8/07/2002

Approving Authority,

  
Stuart F. Oster, R. S.  
Well & Septic Program

sjn  
cc: Building Inspector's Office  
Community Health Services  
File

**HOUSE LOCATION DRAWING**  
**LOT 2**  
**AS SHOWN ON A PLAT ENTITLED**  
**LIVMAR ESTATES**  
**LOTS 1 AND 2**  
**ZONED RR-DEO**  
**TAX MAP NO. 45 BLOCK 6 PARCEL 25**  
**FIFTH ELECTION DISTRICT**  
**HOWARD COUNTY, MARYLAND**  
**PLAT NO. 15599**



**HOUSE DETAIL**  
**SCALE 1" = 30'**

**SURVEYOR'S CERTIFICATION**

I hereby certify that the property delineated hereon is in accordance with the plat of subdivision and/or deed of record; that the improvements were located by accepted field practices and includes permanent visible structures and encroachments if any. This plat is prepared for the exclusive use of the present owners of the property and also those who purchase, mortgage or guarantee the title thereto and as to them I warrant the accuracy of this plat.

5/6/03 *Mitchell E. Goode*

Date Mitchell E. Goode, property line Surveyor, Md.#444

**NOTE TO CONSUMER**

THIS PLAT IS OF BENEFIT TO CONSUMER ONLY INsofar as it is required BY A LEADER OR TITLE INSURANCE COMPANY OR ITS AGENT IN CONNECTION WITH CONTEMPLATED TRANSFER, FINANCING OR REFINANCING, AND IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATION OF FENCES, GARAGES, BUILDINGS, OR OTHER EXISTING OR FUTURE IMPROVEMENTS, AND DOES NOT PROVIDE FOR THE ACCURATE IDENTIFICATION OF PROPERTY BOUNDARY LINES, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING OR REFINANCING.

TITLE REPORT NOT FURNISHED



SCALE:

1"=100'

Wall Check:

05-02-03

Final:

Rectified:

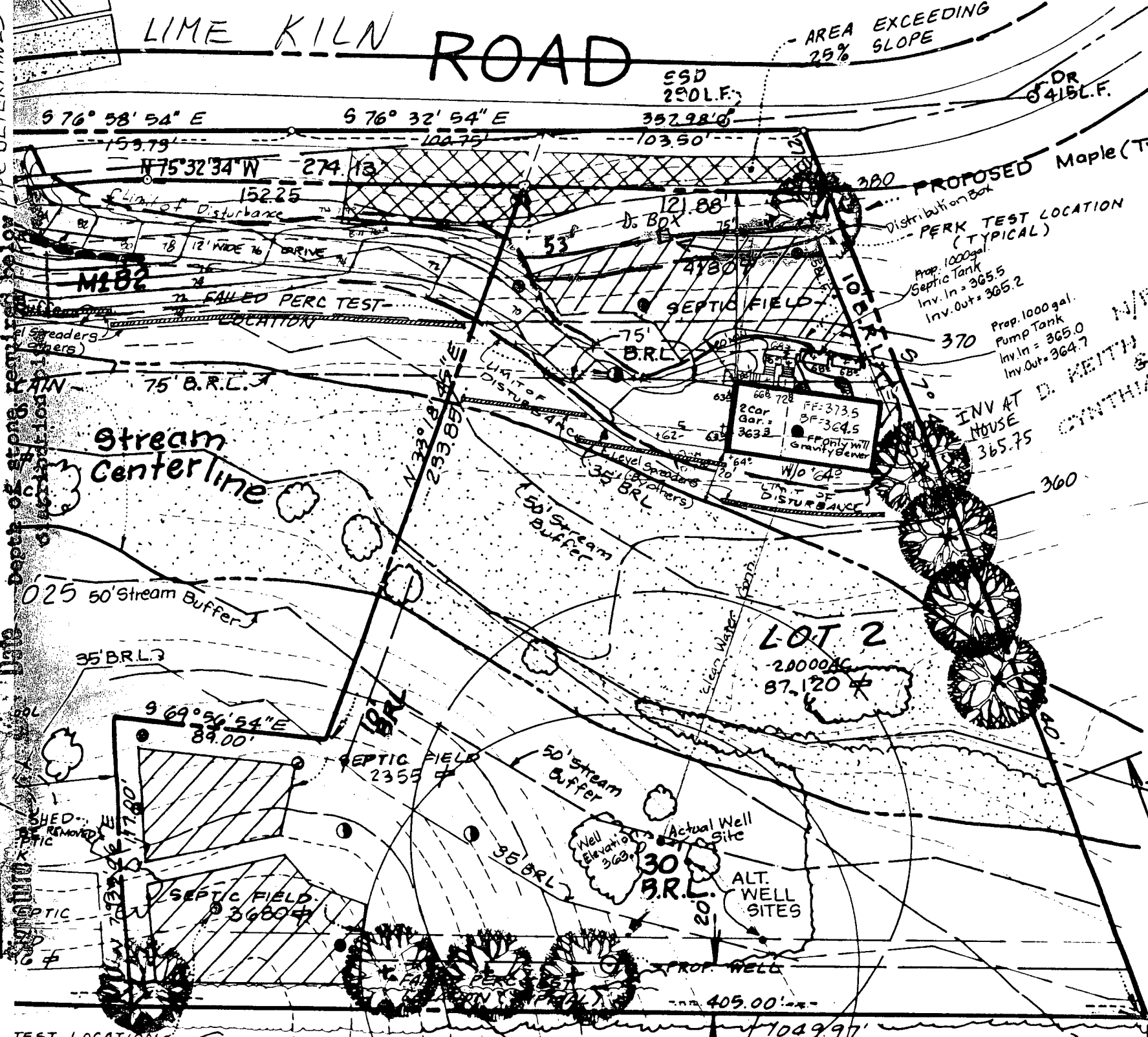
**FLOOD CERTIFICATION**  
 This property does not lie within the limits of a flood hazard area as delineated on the maps of the National Flood Insurance program.

GOODE SURVEYS, LLC  
 LAND SURVEYORS  
 P.O. BOX 599  
 DAMASCUS, MARYLAND 20872  
 PHONE: (301) 368-3700  
 FAX: (301) 368-3703

Approved Septic System Plan  
 Howard County Health Department

total linear feet of trench required **210** feet  
 width of trench(es) **3** feet  
 depth of trench(es) **TO BE DETERMINED** feet  
 depth of stone trench **TO BE DETERMINED** feet  
 depth of trench **TO BE DETERMINED** feet

Mark P. [Signature] 11/2003



TEST LOCATION

**HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
WATER AND SEWERAGE PROGRAM  
TEL: (410)313-2640 FAX: (410)313-2648**

**Information Form for the Installation of the Well Pump, Pitless Adapter, and Supply Piping**

**NOTE:** The installer is responsible for requesting an inspection prior to 9 am on the day of the desired inspection. No work is to be covered until approved by the Health Department. All installations must comply with the National Standard Plumbing Code (NSPC, as amended locally) and COMAR 26.04.04 (MD Well Construction Regulations). Submission of a complete form is required prior to Use and Occupancy approval.

Company Name: GRINNAN Plumbing & Heating Telephone #: (301) 570-4602  
Address: 3028 Quail Hollow Terr. LLC  
Brookw. 16 MD. 20833

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer  
License # and name of individual responsible for the field installation:  
Name (Print): STEVEN GRINNAN License# 69955

\*A licensed individual must perform the actual installation. Apprentices must be under the supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification. Unlicensed individuals may be reported to the appropriate licensing agency.

Name of Property Owner: TODD McDONALD Telephone #: 301-725-6420  
Subdivision: LIVMAR ESTATES Lot #: 2 Well Tag #: HO-94-3411  
Site Address: 12215 Limekiln Rd, Fulton MD 20759

**Submersible Pump Data**

Make: WATER ACE-Myers  
Model #: R3067A  
Pump Capacity 4 GPM  
Well Yield: 4 GPM

**Pitless Adapter**

Make: WATER ACE-Myers  
Model #: RC PA-1  
Depth: 40" (36" min)  
NSF/WSC approved:

**Well Cap and Electric Conduit**

Two piece watertight cap:   
Screened, vented well cap:   
Cap secured to casing:   
Conduit min 18" B.G.:   
Conduit secured to well cap:

Depth of well encountered at time of pump installation: 400 (feet)

If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4

Torque arrestors, Cable guards, or other acceptable method used- Must circle one

Safety rope, if used, attached to brass rope adapter or other acceptable method inside of well casing

**Piping to house**

Type: well-1"  
PSI: 200 (160 psi min)  
Depth of supply line: 42" (36" min)

**House Connection**

PVC sleeve to undisturbed soil at wall penetration:   
Approximate length of sleeve: 6"  
Sleeve caulked and sealed properly:

The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Steve P. Grinnan  
Signature of company representative responsible for installation

3/25/04  
date

**For Health Department Use Only - Not to be completed by Installer**

Date Insp. Requested: \_\_\_\_\_ Date Insp. Approved: 3/26/04 Inspector: (SO)  
Inspection Data: Pitless adapter watertight & water supply line at least 36" below grade   
Two piece cap installed and attached to casing securely   
Elec. conduit extends at least 18" below grade/attached to cap properly   
Safety rope not seen outside of well cap/casing   
Correct well tag attached properly and casing 8" above finished grade   
Water supply line sleeved adequately at house connection   
Adequate grout observed below pitless adapter

301-846-0210

Julie

**DRILLER: REMOVE COPY AND RETAIN FOR YOUR RECORDS. RETURN COUNTY COPY TO COUNTY ENVIRONMENTAL AGENCY. SUBMIT COPY TO OWNER. RETURN ALL OTHER PARTS TO DEPARTMENT OF ENVIRONMENT, 2500 BROENING HIGHWAY, BALTIMORE, MARYLAND 21224.**

<b>C1</b> 9603	SEQUENCE NO. (MDE USE ONLY)	<b>STATE OF MARYLAND WELL COMPLETION REPORT</b> FILL IN THIS FORM COMPLETELY PLEASE TYPE	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
1 2 3 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)			COUNTY NUMBER <b>A 513303A</b>

ST/CO-USE ONLY DATE Received MM DD YY 8 13	DATE WELL COMPLETED <b>8/7/02</b>	Depth of Well 22 <b>400</b> 26 (TO NEAREST FOOT)	PERMIT NO. FROM "PERMIT TO DRILL WELL" <b>HO-94-3411</b> 28 29 30 31 32 33 34 35 36 37
---	--------------------------------------	--	---

OWNER **McDONALD, TODD**  
 STREET OR RFD **12259 LIME KILN** TOWN **FULTON**  
 SUBDIVISION **LIVMAR EST** SECTION \_\_\_\_\_ LOT **2**

WELL LOG			
Not required for driven 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	
shale	2	22	
Brown mica	22	30	
gray mica	30	185	✓
gray mica	185	320	
Quartz			
gray mica	320	400	

**GROUTING RECORD**

WELL HAS BEEN GROUTED (Circle Appropriate Box)  YES  NO

TYPE OF GROUTING MATERIAL (Circle one)  
 CEMENT  BENTONITE CLAY

NO. OF BAGS **22** NO. OF POUNDS **2200**

GALLONS OF WATER **132**

DEPTH OF GROUT SEAL (to nearest foot)  
 from **0** ft. to **38** ft.  
 48 TOP 52 54 BOTTOM 58  
 (enter 0 if from surface)

**CASING RECORD**

casing types insert appropriate code below

ST STEEL  CO CONCRETE  
 PL PLASTIC  OT OTHER

MAIN CASING TYPE **ST** Nominal diameter top (main) casing (nearest inch) **6** Total depth of main casing (nearest foot) **40**

60 61 63 64 66 70

**OTHER CASING (if used)**

diameter inch depth (feet) from to

A C H C A S I N G

**SCREEN RECORD**

screen type or open hole insert appropriate code below

ST STEEL  BR BRASS  HO OPEN HOLE  
 PL PLASTIC  OT OTHER

**DEPTH (nearest ft.)**

1 **40** 2 **38** 3 **400**

E	8	9	11	15	17	21
A						
C	23	24	26	30	32	36
H						
S						
C	38	39	41	45	47	51
R						
E						
N						

SLOT SIZE 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_

DIAMETER OF SCREEN \_\_\_\_\_ (NEAREST INCH)  
 56 60  
 from to

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

MDE 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

**C 3**

**PUMPING TEST**

HOURS PUMPED (nearest hour) **3**  
8 9

PUMPING RATE (gal. per min.) **4**  
11 15

METHOD USED TO MEASURE PUMPING RATE **Bucket**

WATER LEVEL (distance from land surface)

BEFORE PUMPING **7** ft.  
17 20

WHEN PUMPING **182** ft.  
22 25

TYPE OF PUMP USED (for test)

A air  P piston  T turbine  
 C centrifugal  R rotary  O other (describe below)  
 J jet  S submersible

**PUMP INSTALLED**

DRILLER INSTALLED PUMP (CIRCLE) (YES or NO) YES  NO

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

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

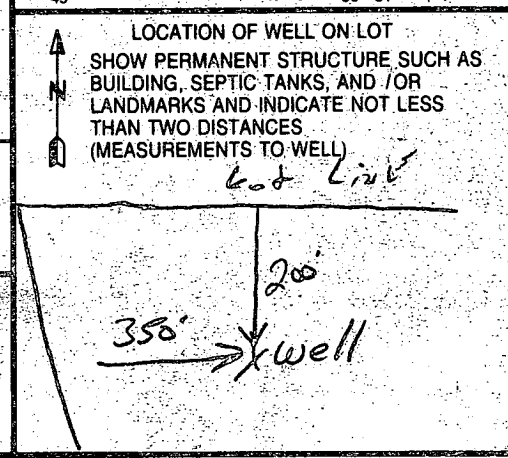
CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 \_\_\_\_\_ 35 \_\_\_\_\_

PUMP HORSE POWER 37 \_\_\_\_\_ 41 \_\_\_\_\_

PUMP COLUMN LENGTH (nearest ft.) 43 \_\_\_\_\_ 47 \_\_\_\_\_

CASING HEIGHT (circle appropriate box and enter casing height)

above } LAND SURFACE  
 below } **2** (nearest foot)  
 49 50 51



NUMBER OF UNSUCCESSFUL WELLS: **0**

WELL HYDROFRACTURED  YES  NO

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 26.04.04 "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 LIC. NO. **MW 0040**  
**Henry Z. Fustenberg**  
 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. **MW 481**

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





B 1 2517 SEQUENCE NO. (MDE USE ONLY)

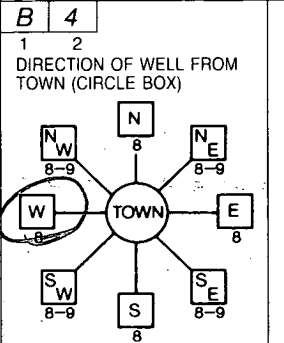
STATE OF MARYLAND PERMIT TO DRILL WELL please print or type

STATE PERMIT NUMBER HO-94-3411 fill in this form completely

Date Received (APA) 040402 OWNER INFORMATION MCDONALD TODD P. O. BOX 107 FULTON, MD 20758

LOCATION OF WELL HOWARD COUNTY Livmar Estates Fulton NEAREST TOWN MILES FROM TOWN 1

DRILLER INFORMATION George F. Easterday MW D 040 L. Franklin Easterday, Inc. 9265 Brown Church Rd., Mt. Airy, Md. 21774



12259 Lime Kiln Rd NEAR WHAT ROAD ON WHICH SIDE OF ROAD DISTANCE FROM ROAD FT. 300 ENTER FT OR MI TAX MAP: 45 BLK: 6 PARCEL 25

WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 5 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL HOWARD COUNTY NAME AS13303-A COUNTY NO. DATE ISSUED 062102 Mark E. Rifkin 6/21/02

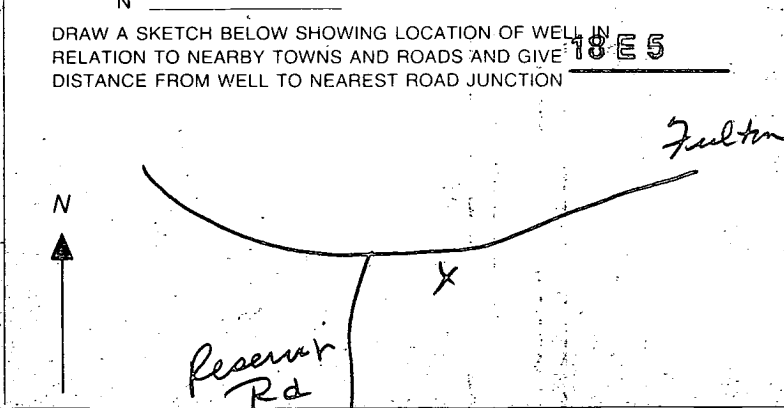
USE FOR WATER (CIRCLE APPROPRIATE BOX) D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)

APPROXIMATE DEPTH OF WELL 300 FEET APPROXIMATE DIAMETER OF WELL 6 INCH

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER wells WRITE THE BOX NUMBER FROM THE MAP HERE E 81A8 N 47B9

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-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS D THIS WELL WILL DEEPEM AN EXISTING WELL



Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER G PERMIT No. HO-94-3411

SPECIAL CONDITIONS NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

# APPLICATION

PERCOLATION TESTING

A \_\_\_\_\_

P \_\_\_\_\_

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

DISTRICT \_\_\_\_\_

DATE \_\_\_\_\_

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. \_\_\_\_\_

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' (5)  
brn  
s mica  
lm

2' brn  
tan sa  
mica lm  
15% frags

6 1/2' gray  
tan  
sa mica  
25% frags

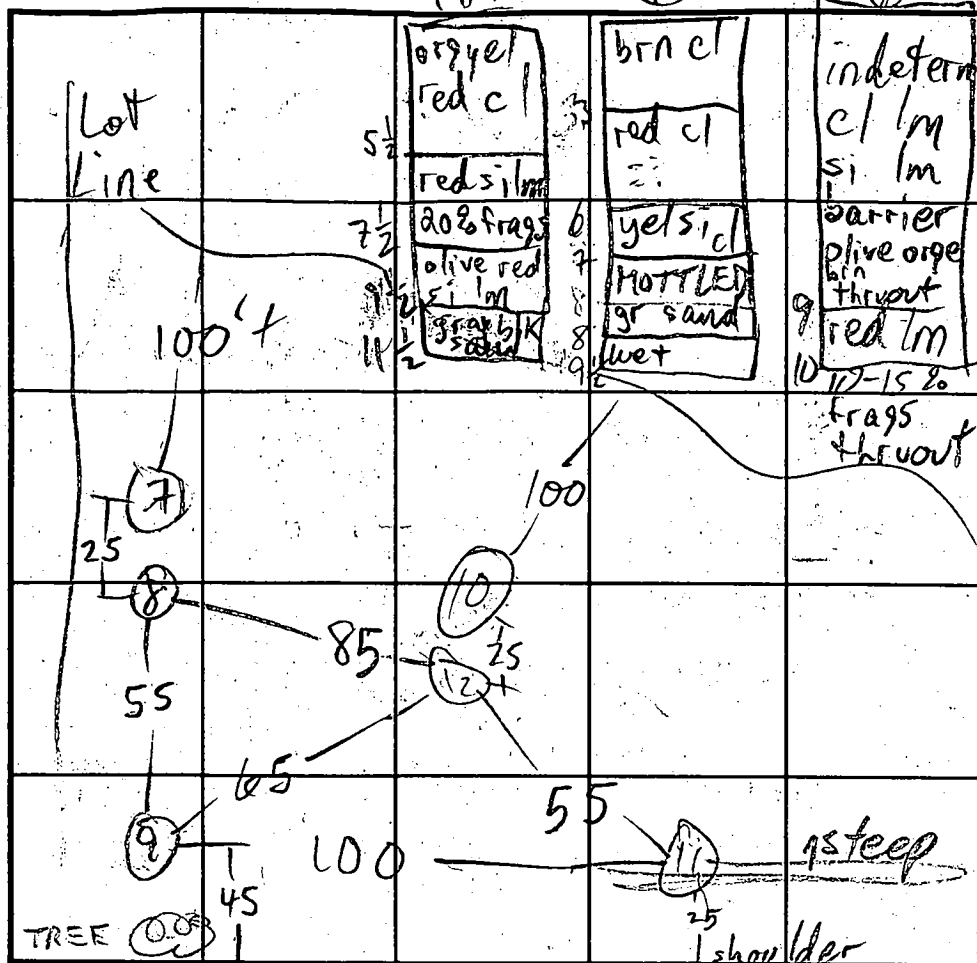
10 1/2' HARD

brn  
red  
cl lm  
30-50% Rx

brn  
sa mica  
lm  
40-60%  
frags

10  
brn tan  
sacl lm

3' yel  
tan orge  
brn  
mica sa lm  
10% frags  
H<sub>2</sub>O vein  
@ 7' 3"  
in blk mica



SOIL PROFILE # (11)  
0' FILL

2 1/2' red  
si lm

5 1/2' gray  
sa mica  
15-20%  
frags  
↑ w/ depth  
HARD

road side (12) side

orge yel cl  
w/ blk frags 3-4'  
yellow tan mica lm  
15-20% frags  
yel tan red mica  
30-40% frags

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

L. K. RD HARD

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
5/12/00	7 S	8'	MOTTLED @ 7'				
	8 S	6' 9"	12:07	12:20	12:20	12:38	18
	8 V	11 1/2'					
	9 S	7' 2"	12:20	12:23	12:23	12:28	6
	9 V	8' 1/2"	12:50	12:55	12:55	3:05	10
	10 S	3 1/2'	12:47	12:52	12:52	1:00	8
	10 M	7' 3"	12:49	1:05	FAIL	4 1/2'	
	10 V	-					
	11 S	3 1/2'	1:13	1:21	1:21	1:30	9
	11 V	7'	2:00 HARD	2:03 @ BOT	2:03	2:09	6
	12 S	6'	1:21	1:28	1:28	1:56	28

REMARKS 12 V 10 HARD DRY

TYPE OF SOIL

TESTED BY M. Ripkin ALSO PRESENT

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 15.5 min TRENCH WIDTH 3

INLET DEPTH 5 1/2' MAXIMUM BOTTOM DEPTH 7 1/2' SQ. FT./BEDROOM 225

# APPLICATION

PERCOLATION TESTING

A 513303-A

P \_\_\_\_\_

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

DISTRICT \_\_\_\_\_

DATE 3/8/2000

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 Michael C. McDonald

ADDRESS 12259 Lime Kiln Rd. Fulton, MD 20759 PHONE (301)725-8920 or (301)470-3530

AGENT OR PROSPECTIVE BUYER Todd & Pamela McDonald

ADDRESS PO Box 107 Fulton, MD 20759 PHONE (240)687-1756

PROPERTY LOCATION:

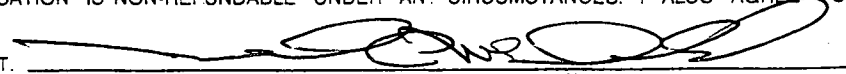
SUBDIVISION ~~none~~ THE McDONALD PROPERTY LOT NO. ~~none~~ 2

ROAD AND DESCRIPTION 12259 Lime Kiln Rd. Fulton, MD 20759

TAX MAP 45 PARCEL # 25

SIZE OF LOT 2.00 acres 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.

  
(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

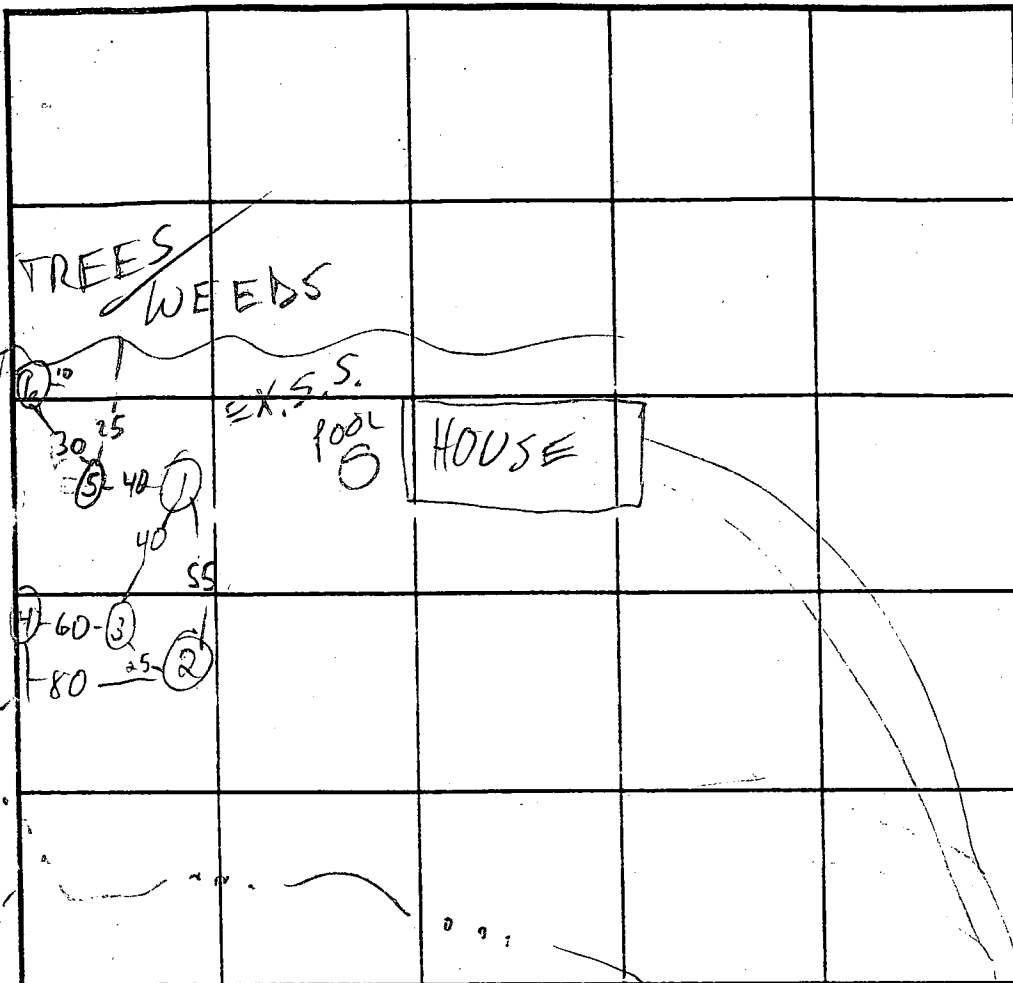
COUNTY #

SOIL PROFILE

①  
 orge tan  
 sa c l / m  
 15% frags  
 2 1/2  
 orge tan  
 gray  
 sa l / m  
 25% frags  
 7 1/2  
 gray orge  
 sand  
 35% frags  
 10 1/2  
 HARD

②  
 orge  
 sa c l / m  
 15% frags  
 2 1/2  
 gray  
 sand  
 30-40% frags  
 10  
 ROCK

③  
 orge  
 sa c l / m  
 20% frags  
 2 1/2  
 brn gray  
 35-40% frags  
 5 1/2  
 ROCK



SOIL PROFILE

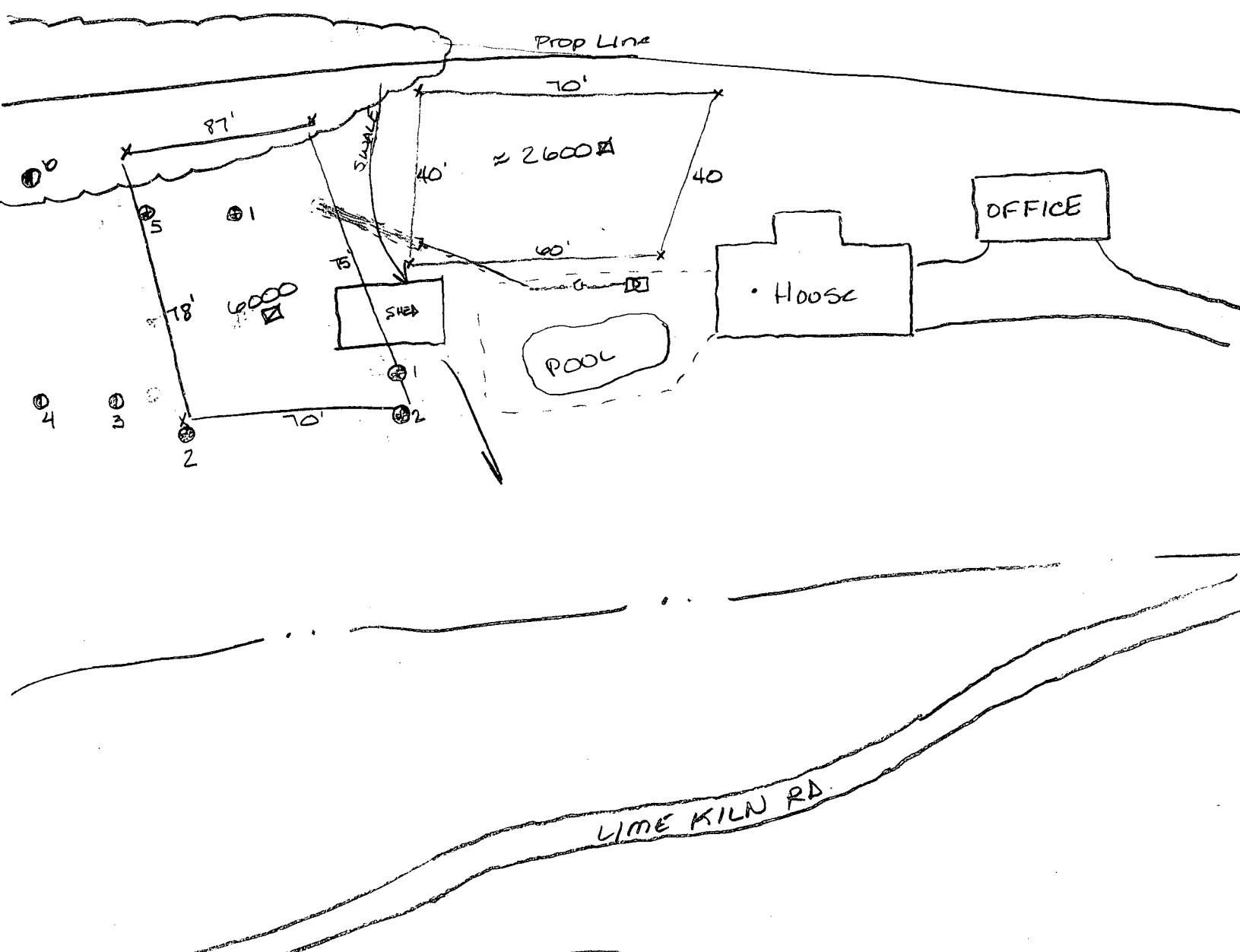
④  
 deep  
 orge c l  
 50% shale  
 3  
 gray  
 sand  
 30% frags

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

LIMEX RD

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
4/27/00	1 S	3 1/2	10:26	10:28	10:28	10:38	10	
	1 V	10 1/2	HARD					
	2 S	7 1/2 - 10	11:13:00	11:13:30	11:13:30	11:14:15	45 sec	
	2 V	7 1/2 - 10	HARD					
	3 V	5 1/2	HARD					
	4 V	8	STOPPED - NO PERC ZONE					
5/12/00	5 S	2'9"	11:19:00	11:21	11:21	11:23	2 min?	
	5 M	6'9"	11:22:15	11:23:00	11:23	11:24:15	75 sec	
	5 V	10 1/2	11:27:20	11:28:35	11:28:35	11:30:25	1 min 50 sec	
	6 V	11 1/2	FAIL	>50% R <sub>x</sub>				

REMARKS \_\_\_\_\_  
 TYPE OF SOIL \_\_\_\_\_  
 TESTED BY \_\_\_\_\_ ALSO PRESENT \_\_\_\_\_  
 TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME \_\_\_\_\_ TRENCH WIDTH \_\_\_\_\_  
 INLET DEPTH \_\_\_\_\_ MAXIMUM BOTTOM DEPTH \_\_\_\_\_ SQ. FT./BEDROOM \_\_\_\_\_



SPECS  
 inlet @ 1.5  
 bottom @ 3.0  
 stone 1.5  
 180 # per bdrm

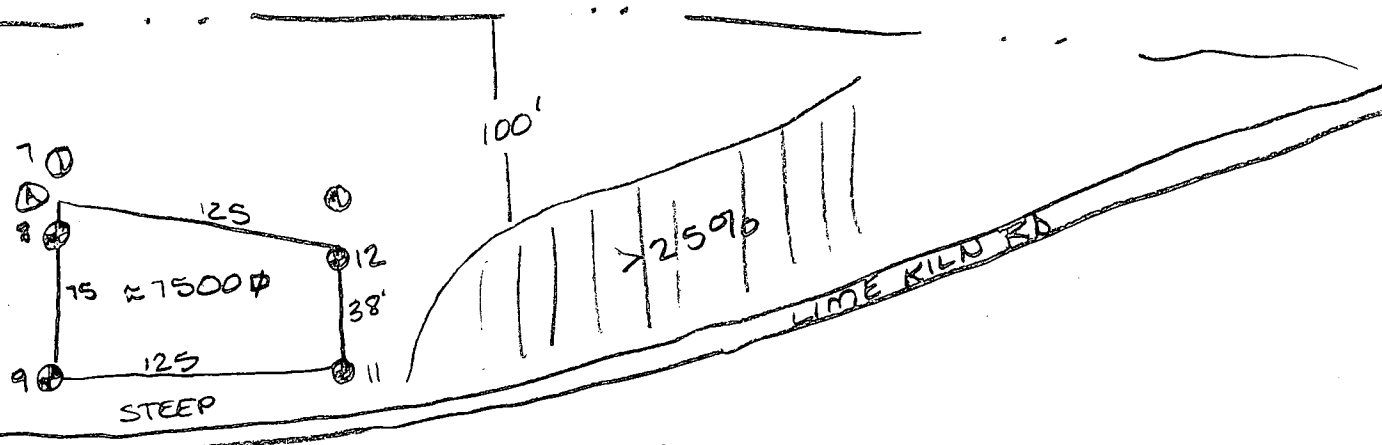
6/7/00  
 Re-inspection  
 measurements  
 No test holes  
 dug

4, 3 & 6 Failed per 4/27 & 5/12/00  
 Test notes

6/7/00 Amy McMill

(MR)

HOUSE

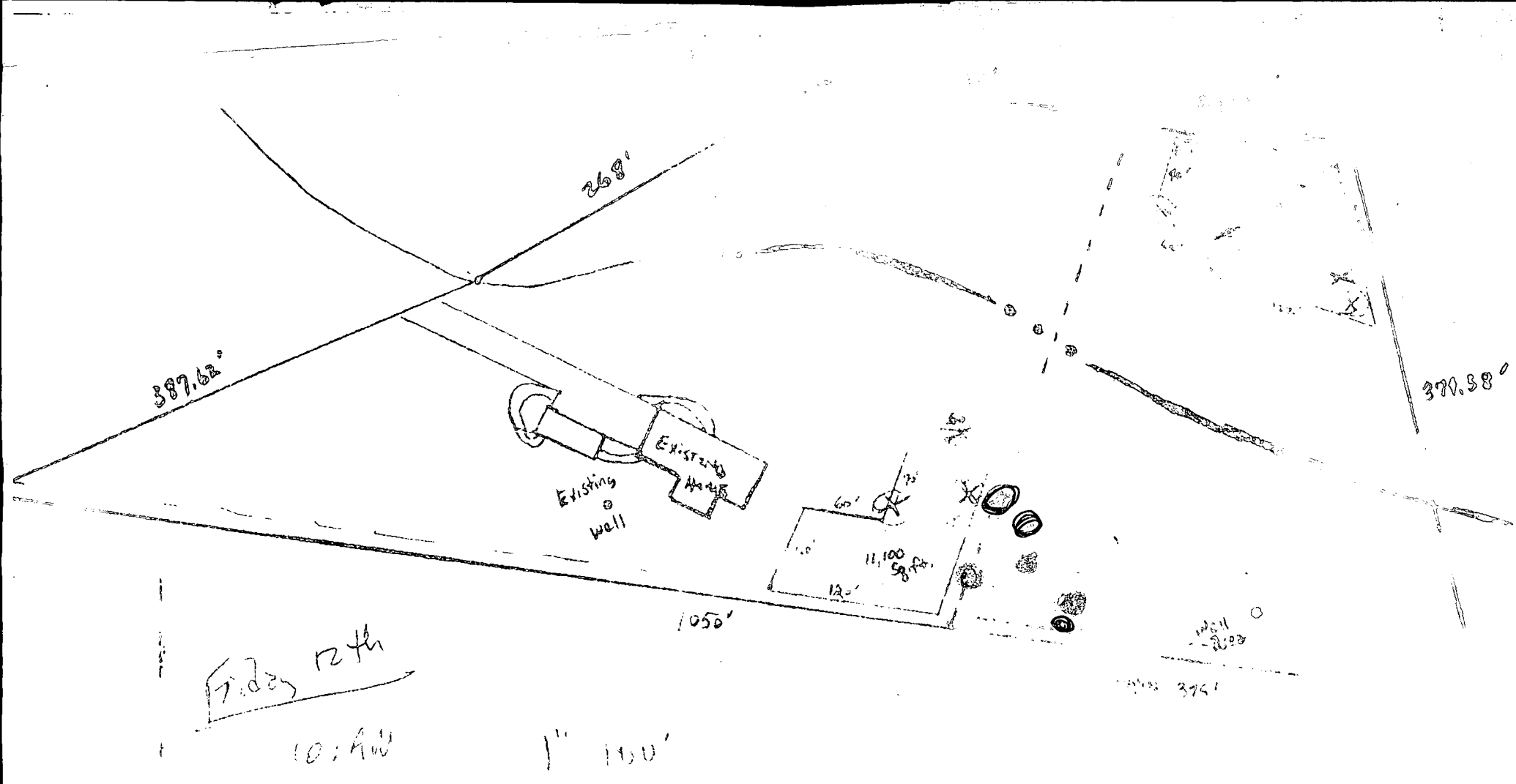


Ⓐ  
no distinct  
clay layer  
2 minute perc  
Ⓢ 2.0  
Potential H<sub>2</sub>O Ⓢ  
7.5' highest

SPECS  
Inlet 1.5  
bottom 3.0  
stone 1.5  
180 φ

6/7/00  
measurements for  
reinspection & area  
between test hole 7 & 8  
re-opened on appeal

6/7/00 Amy McMill




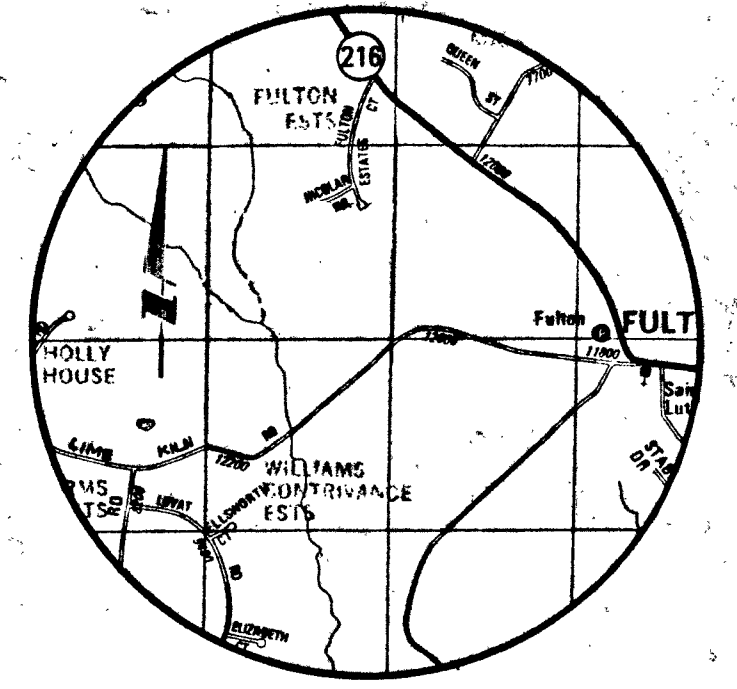
PROTECT... IS  
 00-07V  
 3/30/12



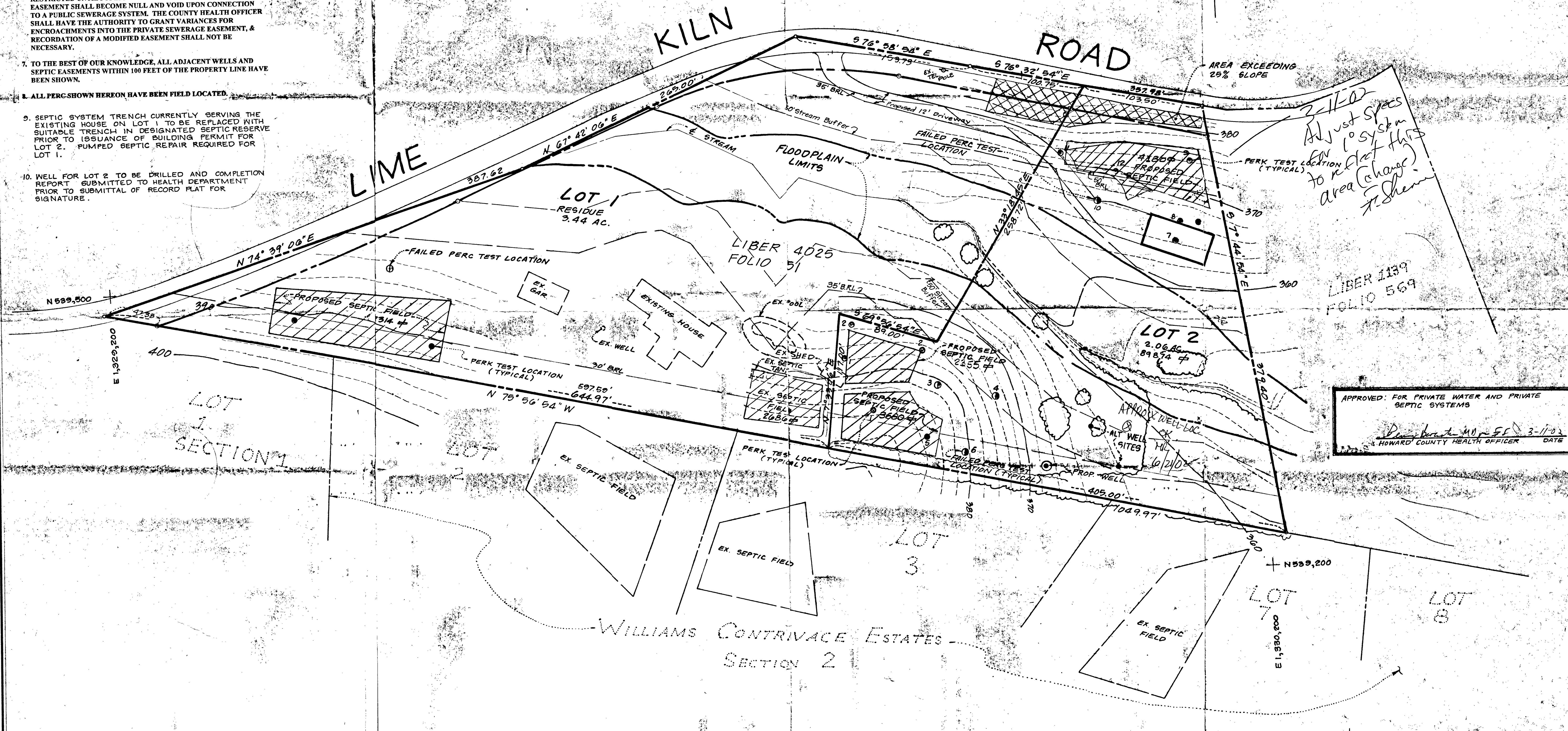


**GENERAL NOTES:**

1. SITE DATA:  
TAX MAP: 45 PARCEL: 25  
AREA OF SITE: 5.5 ACRES  
DEED REFERENCE: 4025/51  
ZONED: RR - DEO
2. TOPOGRAPHIC DATA BASED ON FIELD RUN AND HOWARD COUNTY 2000 SCALE TOPOGRAPHY.
3. BASED ON AVAILABLE COUNTY DATA, NO HISTORIC STRUCTURES OR BURIAL GROUNDS EXIST ON SITE.
4. SOILS DATA BASED ON HOWARD COUNTY SOIL SURVEY DATED 1968.
5. PRIVATE WATER AND PRIVATE SEWERAGE WILL BE UTILIZED.
6.  THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF AT LEAST 10,000 SQ. FT. 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. THIS EASEMENT 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 INTO THE PRIVATE SEWERAGE EASEMENT, & RECORDATION OF A MODIFIED EASEMENT SHALL NOT BE NECESSARY.
7. TO THE BEST OF OUR KNOWLEDGE, ALL ADJACENT WELLS AND SEPTIC EASEMENTS WITHIN 100 FEET OF THE PROPERTY LINE HAVE BEEN SHOWN.
8. ALL PERC-SHOWN HEREON HAVE BEEN FIELD LOCATED.
9. SEPTIC SYSTEM TRENCH CURRENTLY SERVING THE EXISTING HOUSE ON LOT 1 TO BE REPLACED WITH SUITABLE TRENCH IN DESIGNATED SEPTIC RESERVE PRIOR TO ISSUANCE OF BUILDING PERMIT FOR LOT 2. PUMPED SEPTIC REPAIR REQUIRED FOR LOT 1.
10. WELL FOR LOT 2 TO BE DRILLED AND COMPLETION REPORT SUBMITTED TO HEALTH DEPARTMENT PRIOR TO SUBMITTAL OF RECORD PLAT FOR SIGNATURE.



ADC PERMITTED USE #21100823  
VICINITY MAP  
SCALE: 1" = 2000'



APPROVED: FOR PRIVATE WATER AND PRIVATE SEPTIC SYSTEMS  
*Dennis...* 3-11-03  
HOWARD COUNTY HEALTH OFFICER DATE

Signed PC 513303A

**OWNER/APPLICANT:**  
MICHAEL C. McDONALD  
12259 LIME KILN ROAD  
FULTON, MARYLAND 20789


REVISIONS
Feb 7, 02 - Rev House & Drive-way Locations

**BATTA, GOODE & ASSOCIATES, INC.**  
ENGINEERS \* LAND PLANNERS \* SURVEYORS  
818 WEST DIAMOND AVENUE, SUITE 100  
GAITHERSBURG, MARYLAND, 20878  
PHONE: (301) 417-0344  
FAX: (301) 417-0329



**PERCOLATION CERTIFICATION PLAN**  
**MCDONALD PROPERTY**  
12259 LIME KILN ROAD  
FULTON, MARYLAND  
FIFTH ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND

DESIGN BY: A. BOYKIN	DRAWN BY: D. CHIN
CHECKED BY: M. GOODE	DATE: <del>10-1-00</del>
SCALE: 1" = 40'	SHEET: 1 OF 1

 CALL "MISS UTILITY" AT  
1-800-257-7777  
48 Hours Before Start Of Construction

LIME

(MINOR COLLECTOR 50' 3/4" W)  
LAND DEDICATED TO HOWARD  
COUNTY, MD FOR THE PURPOSE  
OF A PUBLIC ROAD  
18188 S.F. OR 0.4104 AC  
C/L EXISTING PAVEMENT

KILL

ROAD

N 539500

R=2600.00'

A=285.71'

N 74°39'08" E 377.59'  
N 38°26'59" E 192.31'  
N 67°42'08" E

R=340.00'

A=213.67'  
A=22.00'

153.78'

S 76°32'54" E  
204.25'

C/L EXISTING PAVEMENT

N 71°17'09" W 152.22'  
N 75°32'34" W 152.22'  
N 71°17'09" W 164.61'  
N 75°32'34" W 187.00'

274.13'  
121.97'

(218)

47.38'

(268)

LOT 1  
SECTION 1

LOT 36

SEPTIC AREA 7314 SF

LOT 1  
136398 S.F.  
3.1312 AC.

35' B.R.L.

30' B.R.L.

597.1'

NEW SEPTIC FIELD

NEW SEPTIC FIELD

N 75°58'45" W

1049.80'

WILLIAMS CONTRIVACE ESTATES

SECTION 2

PLAT NO. 3642  
PLAT NO. 12315

LOT 3

PUBLIC  
DRAINAGE AND

405.00'

PUBLIC DRAINAGE AND UTILITY BASEMENT  
50' STREAM BUFFER  
60' STREAM BUFFER  
50' STREAM BUFFER  
C/L STREAM

LOT 2  
87130 S.F.  
2.00' AC.

PROPOSED WELL

(219)

(220)

(221)

(222)

(223)

(224)

(225)

