

Monday
9-14-87
ans

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED

P 39986

A 24065

DISTRICT 5th

DATE 8/31/87

DATE SYSTEM APPROVED 9-14-87

INSPECTOR JEN

Zabel IS PERMITTED TO INSTALL ALTER

ADDRESS _____ PHONE _____

SUBDIVISION Highland Lakes ROAD 6603 Isle of Skye Dr LOT 83

PROPERTY OWNER Oskar Schulz

ADDRESS _____

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

GARBAGE GRINDER? YES NO

195
4
5.5
780
141.8
55
230
220
100
55
450
44.0
70

SEPTIC TANK CAPACITY 2000 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 195 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 3.5 feet below original grade. Bottom maximum depth 9 feet below original grade. Effective area begins at 3.5 feet below original grade. 5.5 feet of stone below distribution pipe.

LOCATION - Place the distribution box approximately 165 feet from the N80.03.57E (367.99) lot line and 275 ft. from the corner of the 367.99 and 379.98 ft. lot lines. Run trenches on contour.

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

PLANS APPROVED BY S. Abel DATE 8/31/87

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 TRENCH(IES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(IES).

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.

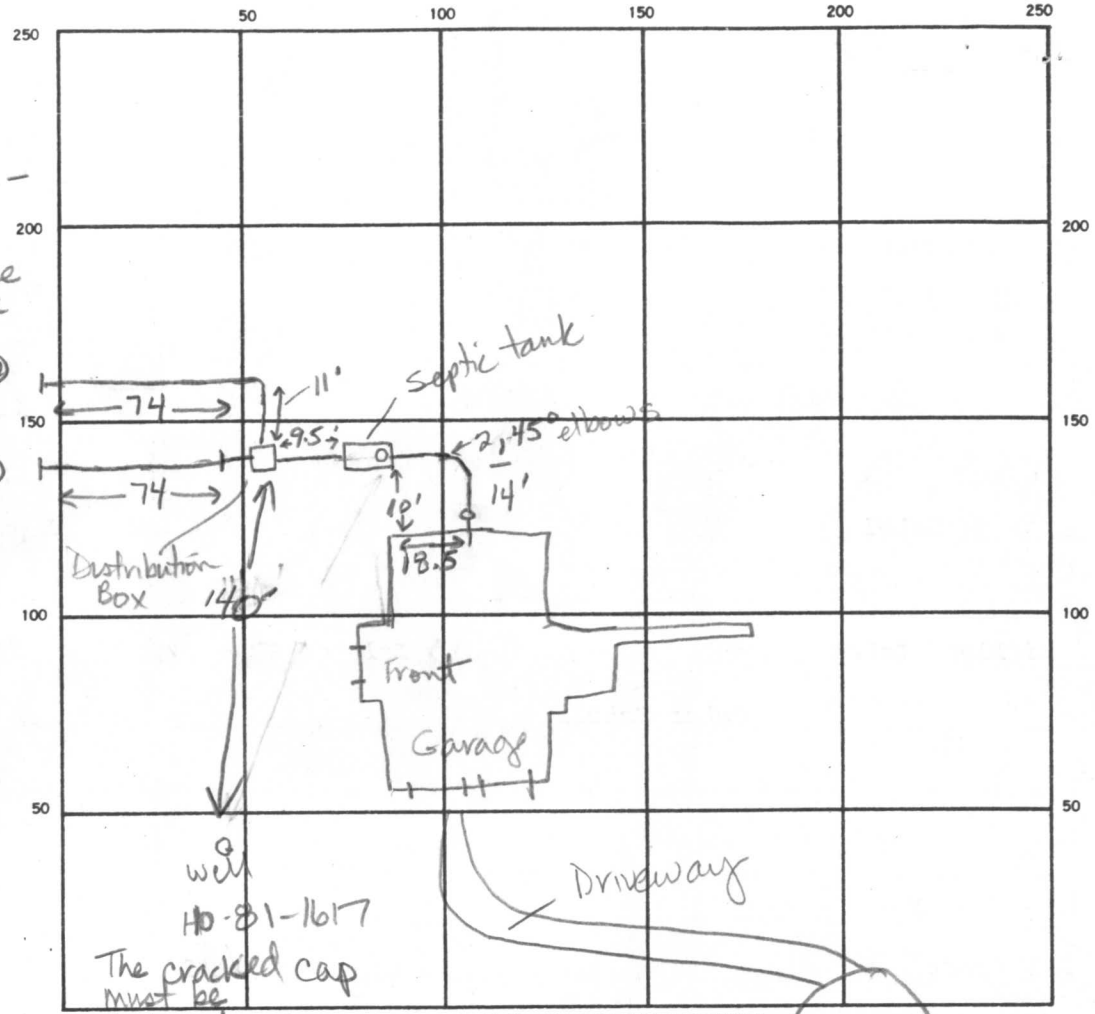
***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1186

A 24065

9-14-87 WPI -
 Pitless at 40
 inches, House
 connection ok
 on inside.
 Trench
 covered up.
 JENadeau



well
 HO-81-1617
 The cracked cap
 must be
 replaced.
 Notified Oskar Shultz on 9-14-87

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Isle of
 Skye
 Allnut Farms Rd
 To

SEPTIC TANK. LEVEL 2000 CLEANOUTS one at house, one on tank

DISTRIBUTION BOX. LEVEL ok

DRAIN FIELD/TILE FIELD. DEPTH 9 9 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3.5 3.0 FT.

EFFECTIVE GRAVEL DEPTH 5.5 6.0 FT. TOTAL LENGTH 74 74 FT.

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 407 444 SQ. FT.

DRYWELL INSIDE DIAMETER _____ FT. EFFECTIVE DEPTH BELOW INLET _____ FT.

ABSORBENT AREA 851 SQ. FT.

2
 74
 6
 444
 36
 78
 42

REMARKS 9-10-87 OK to add stone, pipe & paper to both
trenches. Call for final JEN. 9-14-87 OK to cover
all work. Cracked well cap. Notified Oskar Schulz of this.
JEN

DATE SYSTEM APPROVED 9-14-87 INSPECTOR JENadeau

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 29065

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT 5th

DATE 8/8/85

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 Oskar Schulz
6610 Blackwatch Lane
ADDRESS Highland, Maryland 20777 PHONE _____

PROPERTY LOCATION:

SUBDIVISION Highland Lakes LOT NO. 83

ROAD AND DESCRIPTION Isle of Skye Drive

SIZE OF LOT 6.5160.2 Acres TYPE BLDG. 3 or 4 Bedrooms
(NUMBER OF BEDROOMS)

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. /s/ Oskar Schulz
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

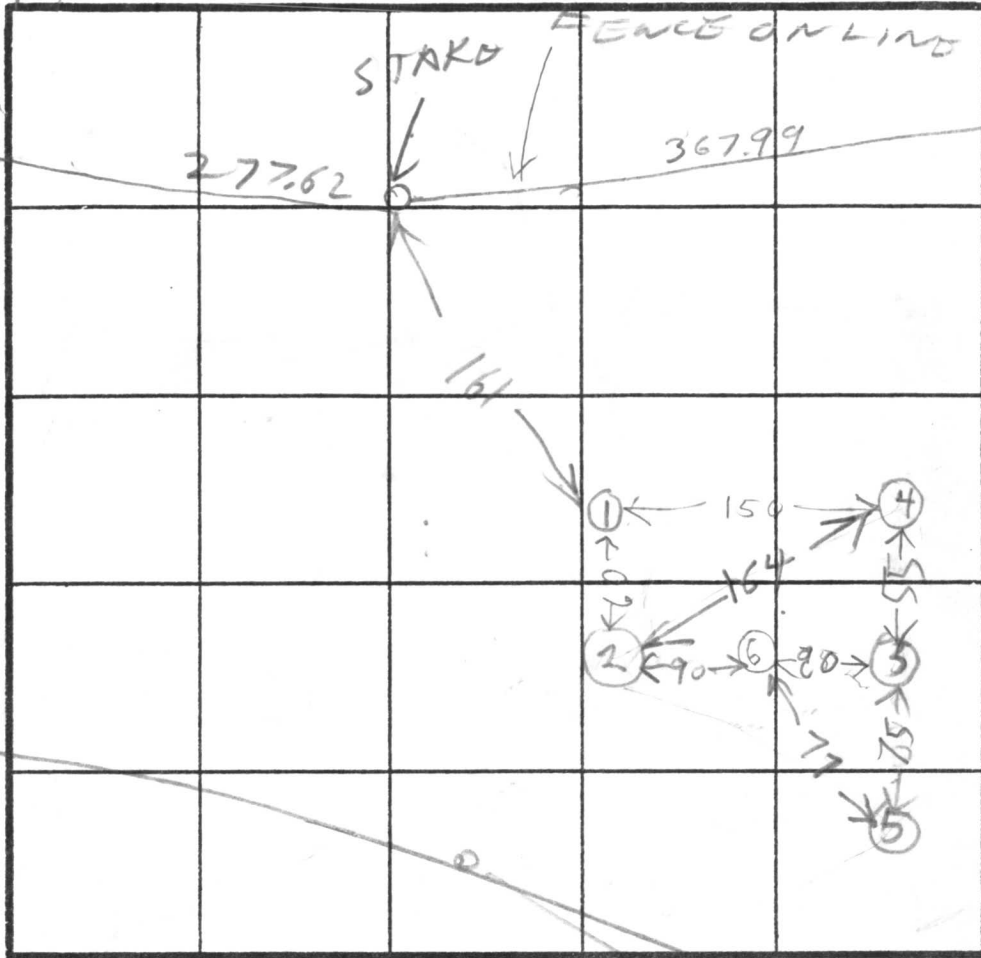
REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

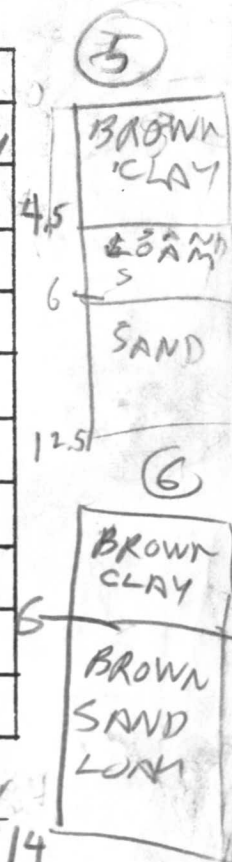
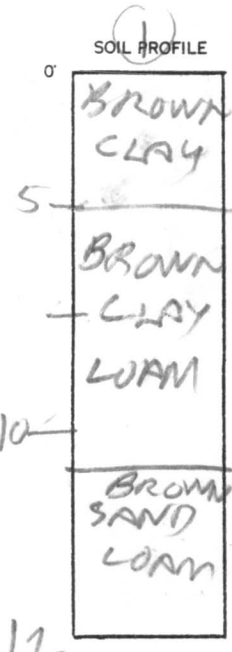
REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

SECRET



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.



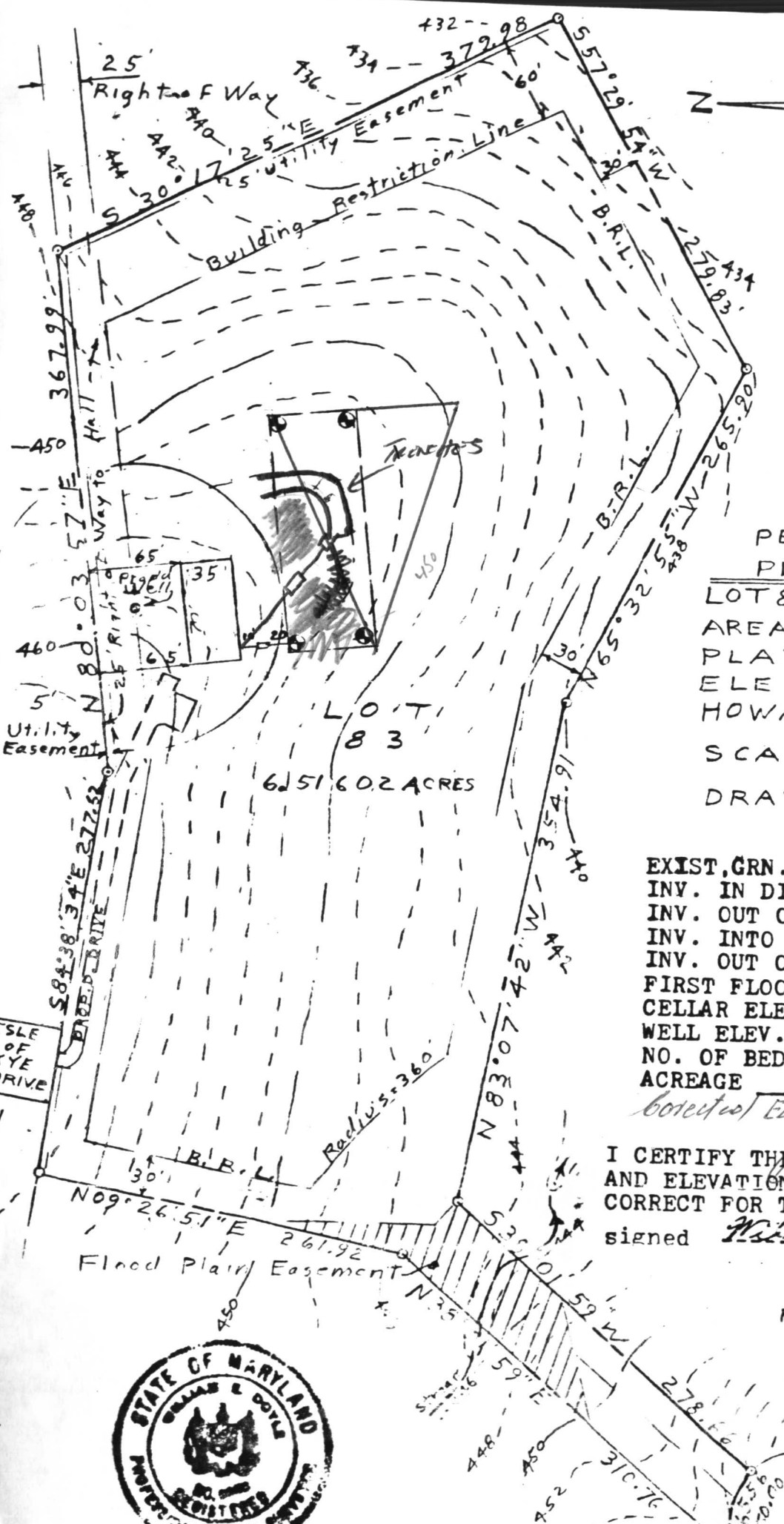
DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8/9/85	1S	4.5	1125	1154	little perc		
	1V	12.5	LOOKS UNSAT		TOO MUCH CLAY		
	M	6.5	1205	1215	little perc		
	2S	4 1/2	123	128	128	132	4
	2V	14	LOOKS OK				
	3S	5.5	259	200	200	202	2
	3V	12	LOOKS OK				
	4S	15	218	219	219	221	2
	4V	12	LOOKS OK				
	5S	6	255	306	DIRT FELL IN IT		
	5V	6	309	319	319	329	10
8/9/85	5V	12.5	LOOKS OK				
8/9/85	6V	14	LOOKS OK				

8/9/85 REMARKS LATE START HAD TO REPAIR BACK HOE!

TYPE OF SOIL _____ TESTED BY RAYMOND HODGES

BACKHOE OF CAR SCHULTZ & JIMM

EH-12-1079



INLET 3.5
 BOTTOM 9'
 160 #188
 117' TRENCH NEEDED

PERCOLATION TEST
 AND
 PLOT PLAN
 LOT 83, OUTLOT 3, SECTION 3
 AREA 2, HIGHLAND LAKE
 PLAT NO. 4381
 ELECTION DISTRICT 5
 HOWARD COUNTY MD
 SCALE: 1" = 100'
 DRAWN: JULY 1, 1985

EXIST. GRN. AT DISTR. BOX	454.50
INV. IN DISTR. BOX	451.50
INV. OUT OF SEPTIC TANK	448.00 451.0
INV. INTO SEPTIC TANK	448.40 451.4
INV. OUT OF DWELLING	448.80 451.8
FIRST FLOOR ELEV.	449.00 452
CELLAR ELEV.	464.00
WELL ELEV.	455.00
NO. OF BEDROOMS	4
ACREAGE	6.51602 Ac's

Corrected Elevation 0.16.

I CERTIFY THE ABOVE MEASUREMENTS
 AND ELEVATIONS ARE ACTUAL AND
 CORRECT FOR THIS PROPERTY
 signed *William E. Dyle*

REVISED; JULY 22, 1985



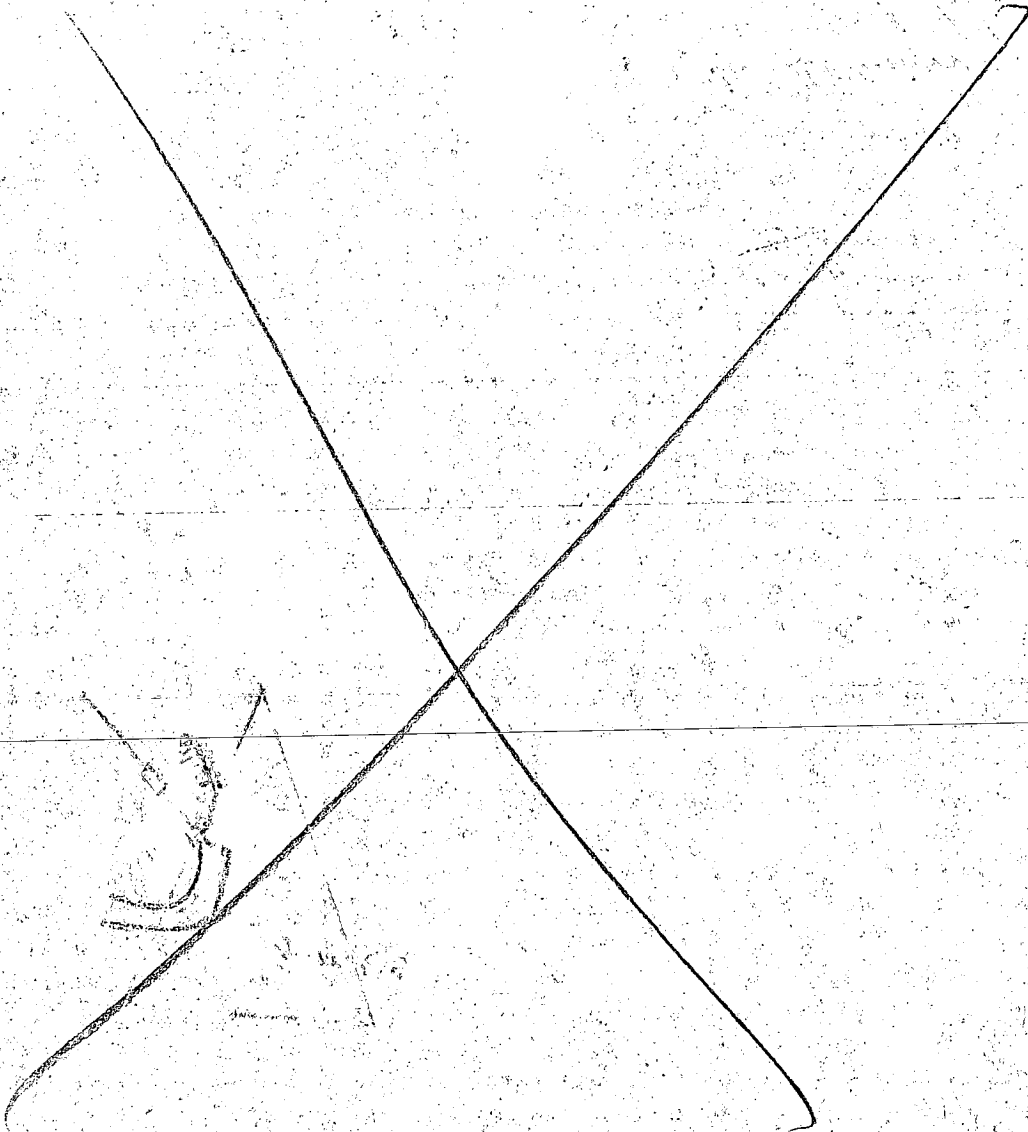
BLDG. PERMIT SIGNED
 AND RETURNED 8/28/86 *SBGA*

BP # 71646

RECEIVED
HOWARD COUNTY
HEALTH DEPT.

6 11 9 15 AM '86

DIVISION OF
ENVIRONMENTAL
HEALTH



11/11/86
11/11/86
11/11/86

11/11/86

C1 4758

SEQUENCE NO. (OEP USE ONLY)

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 24065

DATE RECEIVED

DATE WELL COMPLETED 082286

DEPTH OF WELL 200 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-81-1617

OWNER Saultz Inc. Oskar last name first name TOWN Clarksville SUBDIVISION Highland Lake SECTION LOT 83

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 (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Rows include Rolling ground, Gray schist, Water, Gray schist, Water, Gray schist, Water, Gray schist.

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

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...

DRILLERS IDENT. NO. 353 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

GROUTING RECORD

WELL HAS BEEN GROUTED (Y/N) TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE CLAY BC NO. OF BAGS 19 NO. OF POUNDS 1786 GALLONS OF WATER 133 DEPTH OF GROUT SEAL 518 TO 40 ft.

CASING RECORD ST CO PL OT STEEL CONCRETE PLASTIC OTHER

MAIN CASING TYPE S T Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 62

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

SCREEN RECORD ST BR HO PL OT STEEL BRASS BRONZE PLASTIC OPEN HOLE OTHER

DEPTH (nearest ft.) H O C I 200

SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH) 56 60

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

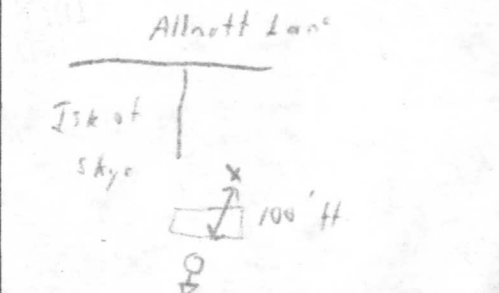
OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) WQ 70 72 74 75 76 TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3

PUMPING TEST HOURS PUMPED 4 PUMPING RATE 5 gal. per min. METHOD USED TO MEASURE PUMPING RATE watch + bucket WATER LEVEL BEFORE PUMPING 14 WHEN PUMPING 150 TYPE OF PUMP USED air piston turbine centrifugal rotary other jet submersible

PUMP INSTALLED DRILLER WILL INSTALL PUMP YES (NO) TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX CAPACITY: GALLONS PER MINUTE PUMP HORSE POWER PUMP COLUMN LENGTH CASING HEIGHT above below LAND SURFACE

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)



RECEIVED
HOWARD COUNTY
HEALTH DEPT.

AUG 25 4 45 PM '86

DIVISION OF
ENVIRONMENTAL
HEALTH

