

10/29/85

APPROVED  
11/1/85 RH

P 35875

A 26357

# PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY  
BUREAU OF ENVIRONMENTAL HEALTH  
992-2330

ELLICOTT CITY  
DISTRICT 5th

INDEXED

05-386578

DATE 8/12/85

Randy Ayersman IS PERMITTED TO INSTALL  ALTER

ADDRESS 13101 Lutes Drive, Silver Spring, MD 20906 PHONE \_\_\_\_\_

SUBDIVISION Kalmia ~~Drive~~ Farms ROAD 5233 Kalmia Drive LOT 9, Section 1

PROPERTY OWNER Randy Ayersman Russell Geist

ADDRESS \_\_\_\_\_

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

GARBAGE GRINDER? YES \_\_\_\_\_ NO

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 158 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 3 1/2 feet below original grade. Bottom maximum depth 9 feet below original grade. Effective area begins at 3 1/2 feet below original grade. 5 1/2 feet of stone below distribution pipe. LOCATION: Start first trench 240 feet from the front lot line and 50 feet from the right lot line as seen when facing the property from Kalmia Drive. Run trench(s) along level ground toward left side of lot.

NOTE: No trench to exceed 100 feet in length. If more than one trench used, a distribution box is required. Call for inspection of trench(s) before and after gravel is installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

SEPTIC PERMIT SIGNED

AND RETURNED 7-15-85

Serial # BR119398  
extend existing, sealed

PLANS APPROVED BY C. Williams DATE 7/24/85

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 AND AFTER PLACING GRAVEL IN TRENCH.

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 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, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

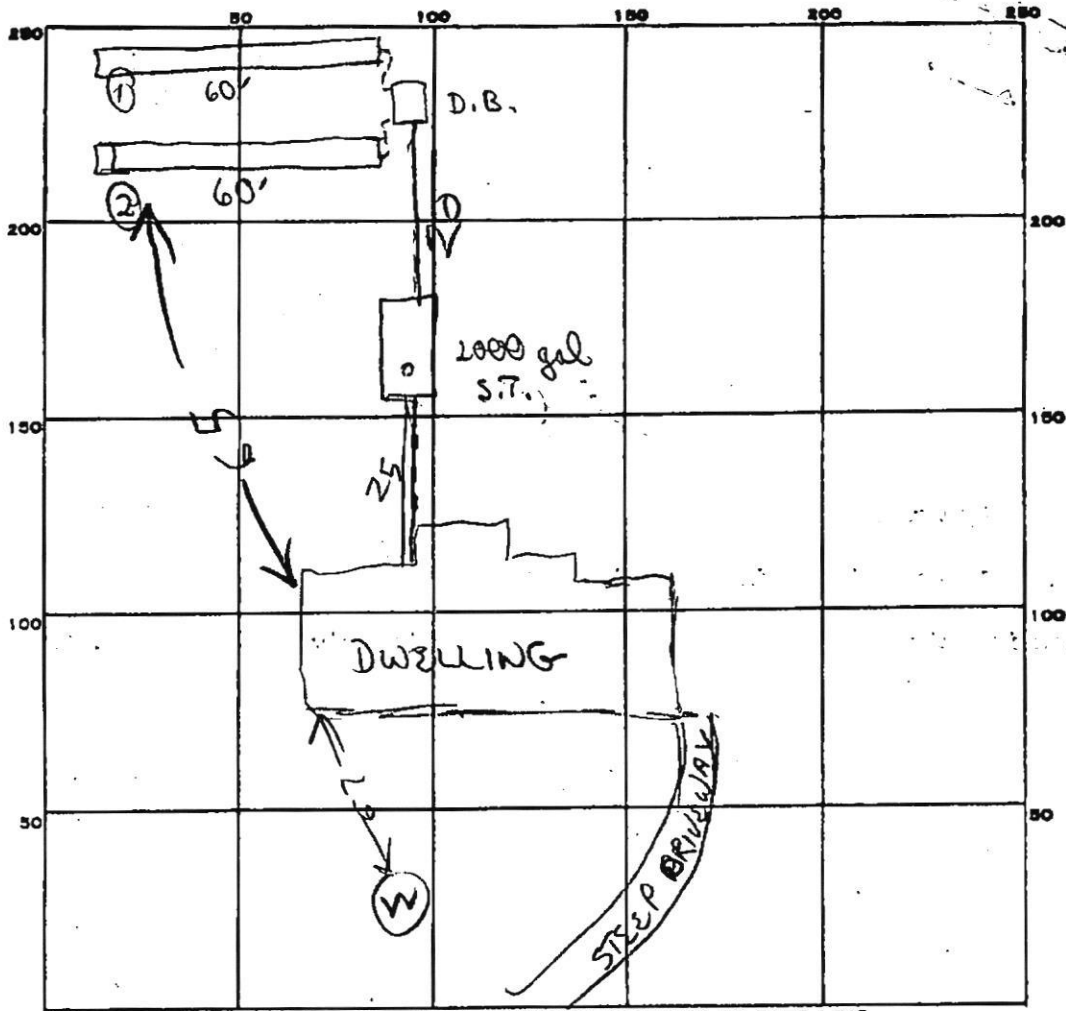
**\*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

\*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

A 26357

50



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

KAMIA

PERMIT CARD \_\_\_\_\_

SEPTIC TANK, LEVEL \_\_\_\_\_

✓ 2000

CLEANOUTS \_\_\_\_\_

ST  
OK

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

✓ (Patch extra hole)

HOLE PATCHED

TILE FIELD, DEPTH \_\_\_\_\_ FT.

9

TRENCH WIDTH \_\_\_\_\_ FT.

2

GRAVEL DEPTH \_\_\_\_\_ IN.

6

TOTAL LENGTH \_\_\_\_\_ FT.

120

NUMBER OF TRENCHES \_\_\_\_\_

2

TOTAL BOTTOM AREA \_\_\_\_\_

ONE SIDE  
660 Below Top 3 1/2 ft

SEEPAGE PITS, INSIDE DIAMETER \_\_\_\_\_ FT.

\_\_\_\_\_

DEPTH BELOW INLET \_\_\_\_\_ FT.

\_\_\_\_\_

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

\_\_\_\_\_

REMARKS \_\_\_\_\_

10/29/85

OK TO add stone, pipe & paper to both trenches

11/1/85 - STONE ADDED OK TO COVER SYSTEM RH

DATE SYSTEM APPROVED 11/1/85 \_\_\_\_\_  
Raymond J. Hodges

100' open trench  
1/16/95  
12 NOON  
6-16-95  
MPI

# PERMIT

## SEWAGE DISPOSAL SYSTEM

### DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 50579A

A 26345

DISTRICT 5th

DATE 2/13/95

DATE SYSTEM APPROVED 2/16/95

INSPECTOR G. SAVAGE

INDEXED  
05-386586

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXXXX~~ 313-2640

Olen Ketterman IS PERMITTED TO INSTALL  ALTER

ADDRESS 14960 Route 144, Woodbine, Maryland 21797 PHONE 442-1336

SUBDIVISION Kalmia Farms I LOT 10 ROAD 5237 Kalmia Drive

PROPERTY OWNER Richard C. Kohler

ADDRESS \_\_\_\_\_

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

200 SQUARE FEET PER BEDROOM

200  
800  
5/200  
16/30

800 SPEC ABSORPTIVE  
AREA REQ

LINEAR FEET OF TRENCH REQUIRED 160

TRENCHES - Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 3 feet below original grade. 5 feet of stone below distribution pipe.

LOCATION - Place the distribution box 320 feet from the front lot line and 50 feet from the right lot line as seen when facing the property from Kalmia Drive. Run trenches along contour toward left 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. OK 5/20/94 DCS

PLANS APPROVED BY C. Williams/Raymond Hodges/Mark Rifkin REVISED DATE 12/29/93

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

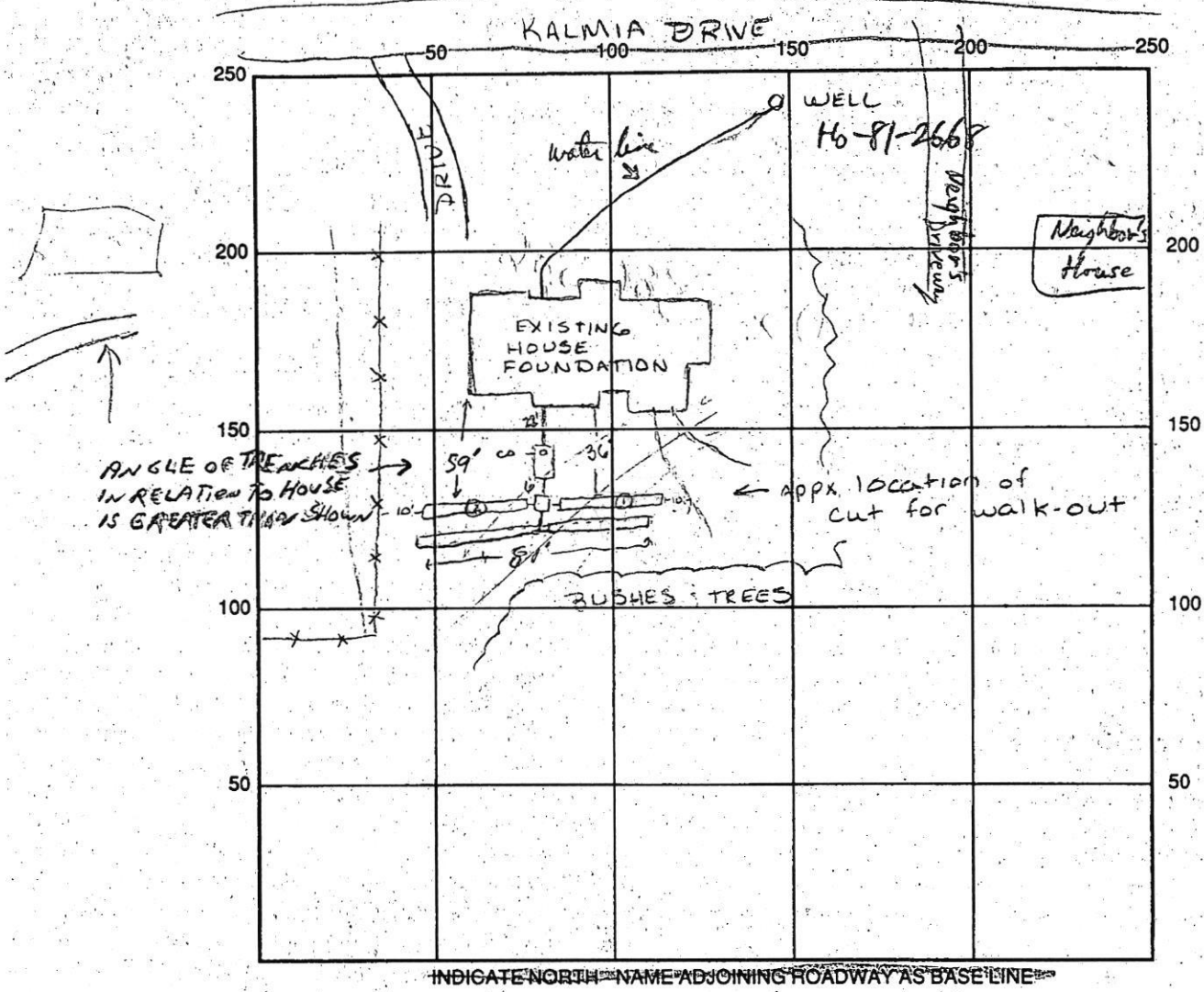
NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

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**



SEPTIC TANK LEVEL 1500 gal CLEANOUTS 40 #1 OK

DISTRIBUTION BOX LEVEL OK

DRAIN FIELD/TITLE DEPTH <u>8'</u> FT.	TRENCH WIDTH <u>2'</u> FT.	INLET DEPTH <u>3'</u> FT.	
EFFECTIVE GRAVEL DEPTH <u>5'</u> FT.	TOTAL LENGTH <u>781</u> FT.		
NUMBER OF TRENCHES <u>3</u>	ONE SIDEWALL/BOTTOM AREA <u>830</u> SQ. FT.		<u>39</u>
DRYWALL INSIDE DIAMETER <u>X</u> FT.	EFFECTIVE DEPTH BELOW INLET <u>5</u> FT.		<u>46</u>
ABSORBENT AREA <u>X</u> SQ. FT.			<u>81</u>
			<u>166</u> FT TRENCH TOTAL

REMARKS: 2/14/95 OK to cover trenches 1-2 PLANS changed due to walk-out grading  
Trenches to be run in both directions. AUM CALL TRENCHES COMPLETE W/STONE  
& PAPER. OK TO COVER ALL WORK 2/16/95 - FINAL

WPI - Pitless adapter + water line OK to cover PIP 6/16/95 -  
 DATE SYSTEM APPROVED 2/16/95 INSPECTOR [Signature]

# APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A \_\_\_\_\_

P \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SERVICES

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

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 \_\_\_\_\_

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

PROPERTY LOCATION:

SUBDIVISION KALMIA FARMS SEC. I LOT NO. 10

ROAD AND DESCRIPTION \_\_\_\_\_

SIZE OF LOT \_\_\_\_\_ TYPE BLDG. \_\_\_\_\_

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.

SIGNATURE OF APPLICANT \_\_\_\_\_

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

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

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

REASONS FOR REJECTION OR HOLDING 10/23/78 Reaccomplished at office  
C. B. S.

# THIS IS NOT A PERMIT



B 1 **1580** SEQUENCE NO. (DP-USE ONLY)  
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND  
 PERMIT TO DRILL WELL  
 please print or type

STATE PERMIT NUMBER  
**140-81-2008**  
 fill in this form completely

Date Received (APA) **030388**  
**OWNER INFORMATION**  
 15-Last Name **Pittman** Owner **Doris** First Name **Sensory**  
 36 **2520 Forest Glen Rd** Street or RFD  
 57 **5116c Spacing MD 20910** Town State Zip

B 3 LOCATION OF WELL **R 41104 3/2/88 #40.10**  
 8 COUNTY **Howard**  
 23 SUBDIVISION **Kalmia Farms**  
 SECTION **1** LOT **10**  
 52 NEAREST TOWN **Dayton**  
 MILES FROM TOWN (enter 0 if in town) **5** MI

**DRILLER INFORMATION**  
 Driller's Name **George F. Easterday** License No. **40**  
 Firm Name **L.F. Easterday, INC**  
 Address **9265 Brown Church Rd., Mt. Airy, MD. 21771**  
 Signature *George F. Easterday* Date **2-23-88**

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  
  
 NEAR WHAT ROAD **Kalmia Ln.**  
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
  
 DISTANCE FROM ROAD **125** ENTER FT or MI **FT**

B 2 WELL INFORMATION  
 APPROX. PUMPING RATE (GAL. PER MIN.) **5**  
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **500**

USE FOR WATER (CIRCLE APPROPRIATE BOX)  
 HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)  
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)  
 INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)  
 PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)  
 TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL  
 COUNTY NAME **HOWARD** COUNTY NO. **A26345**  
 STATE SIGNATURE \_\_\_\_\_ INSERT S   
 DATE ISSUED **041388** CO SIGNATURE **R. Dupon** EXP. DATE **10/13/88**  
 NORTH GRID **506000** EAST GRID **0796000**

APPROXIMATE DEPTH OF WELL **200** FEET  
 APPROXIMATE DIAMETER OF WELL **6** INCH NEAREST

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X **4/2/88 m 10 DAY**  
 SOURCES OF DRILLING WATER  
 1. **well**  
 2.  
 3.  
 WRITE THE BOX NUMBER FROM THE MAP HERE  
  
 000  
 000

METHOD OF DRILLING (circle one)  
 BORED (or Augered)  JETTED  Jetted & DRIVEN  
 AIR-ROTARY  AIR-PERCussion  ROTARY (Hydraulic Rotary)  
 CABLE  REVerse-ROTary  Drive-POINT  
 other \_\_\_\_\_

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)  
 THIS WELL WILL NOT REPLACE AN EXISTING WELL  
 THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED  
 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY  
 THIS WELL WILL DEEPEM 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 **Ba** WRITE INITIALS IN BOX PERMIT No. **140-81-2119**

SPECIAL CONDITIONS



4-28-88  
4:00

Review of 8/25/88 CW

Page \_\_\_\_\_ of \_\_\_\_\_  
Date \_\_\_\_\_

FIELD DATA SHEET  
HOWARD COUNTY WELL YIELD TEST

13-D-4

Well Permit No. HO - 81-2668  
Location of property (road) KALMIA DRIVE  
Subdivision KALMIA FARMS Lot 10 Block \_\_\_\_\_ Plat \_\_\_\_\_ Sec. 1  
Well Driller GEORGE EASTERDAY Owner PITTMAN, DORIS

Depth of well 85 ft 10 gpm Don't set pump below 75'  
Distance of measuring point (M.P.) above ground 1 1/2 ft.  
Static water level (S.W.L.) below M.P. 29 ft

I. High rate pumping -- reservoir drawdown

Time pump started 3:30 Pumping rate 12 gpm  
Total time 15 min to reach pumping water level 57' ft. below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes

TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE time to fill X1 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
3:45	57'	6 sec	N/A	10 gpm
4:00	58'	7	pump at 75' R. Hanner	8
4:15	58'	7		8
4:30	58'	7		8
4:45	58'	7		8
5:00	59'	7		8
5:15	58'	7		8
5:30	58'	7		8
5:45	58'	7		8
6:00	58'	7		8
6:15	58'	7		8
6:30	58'	7		8
6:45	58'	7		8

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 \_\_\_\_\_ Receipt # \_\_\_\_\_  
 Replacement \_\_\_\_\_ Date \_\_\_\_\_

Name of Installer Thomas Eckert (Fireside Plumbing) Telephone \_\_\_\_\_

License Number 20088  
 Certified Well Pump Installer \_\_\_\_\_ Well Driller \_\_\_\_\_ Registered Plumber 20

Name of Property Owner Richard Kohler Telephone 650-6479  
 Subdivision Kalmia Farms Lot # 10 Well Tag # HO-81-2668  
 Site Address 5237 Kalmia Drive

Pump	Motor	Pitless Adapter
1. Type	1. Horsepower _____	1. Make _____
a. Deep well jet _____	2. RPM _____	2. Model # _____
b. Shallow well jet _____	3. Voltage _____	3. Depth _____
c. Submersible _____	a. 110 _____	
2. Make _____	b. 220 _____	
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	Piping	Well data
1. Capacity _____	1. Type _____	1. Depth _____ ft.
2. Pressure relief valve? _____	2. Size _____	2. Yield _____ GPM
	3. NSF and/or BOCA Code approved _____	3. Static water level _____ ft.
	4. Depth of supply line _____	4. Will water supply be disinfected by installer? _____

*Pitless adapter & water line  
 OK @ 4 PM RP 6/16/95*

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: \_\_\_\_\_

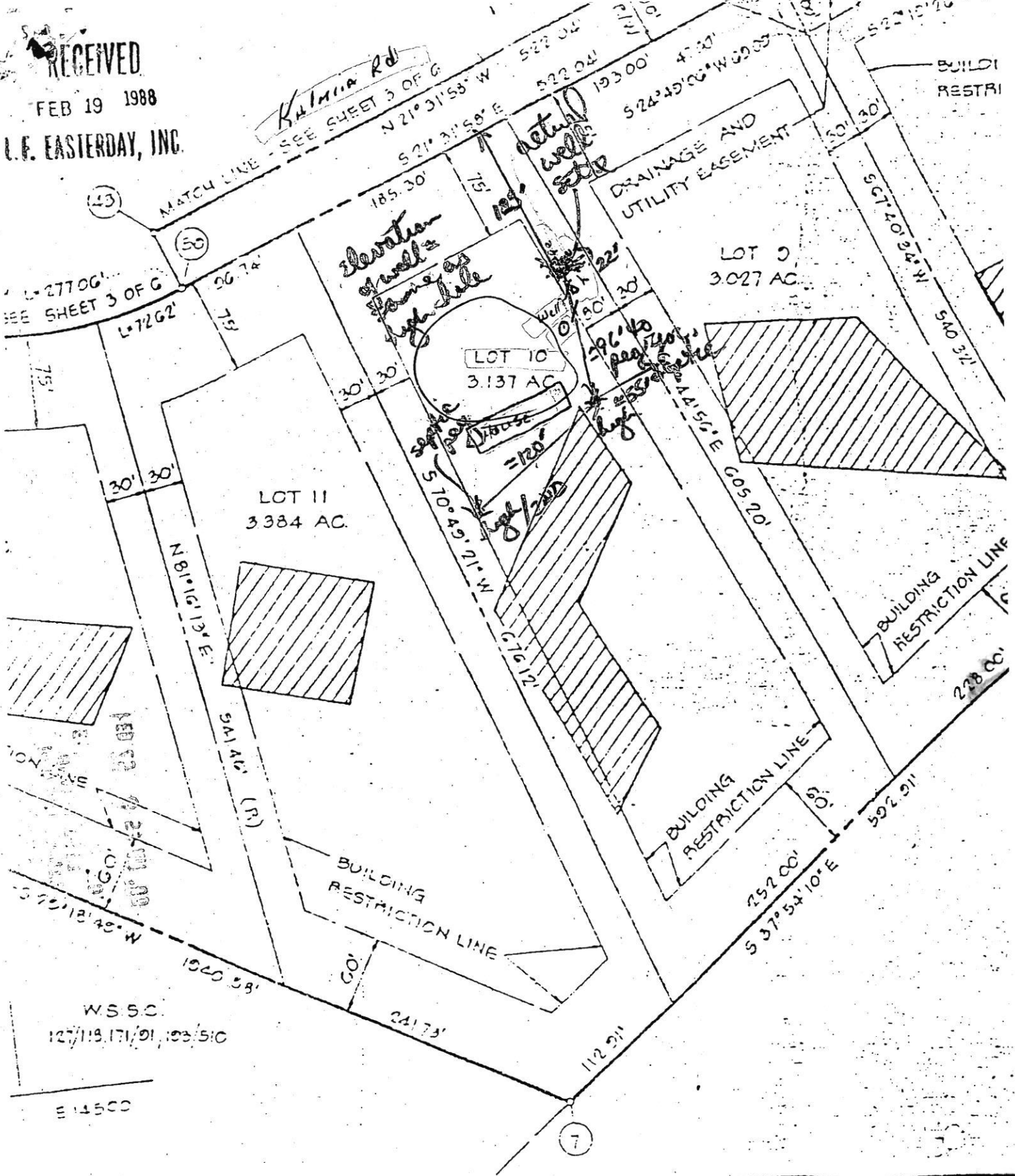
Date: \_\_\_\_\_

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

RECEIVED

FEB 19 1988

L.F. EASTERDAY, INC.



# OWNERS STATEMENT

WE HEREBY CERTIFYING A MARYLAND CORPORATION BY CARL L. BRINDORFF,  
 AS DEPT. STERLING RADOLPH, SECRETARY, OWNERS OF THE  
 TRACT SHOWN AND DESCRIBED HEREIN, HEREBY STATE THAT THE  
 INFORMATION CONTAINED IN THIS STATEMENT IS TRUE AND CORRECT  
 TO THE BEST OF OUR KNOWLEDGE AND BELIEF.

SL  
 LHER  
 CORP