

6/23/92 wood
6/24/92 11 K. ATOR

03-314405

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 48217

A 39566

DISTRICT 3rd

DATE 6/10/92

DATE SYSTEM APPROVED 6/24/92

INSPECTOR R. Priddy

HOWARD COUNTY HEALTH DEPARTMENT **INDEXED**
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

Paul Schissler/South Carrol Backhoe IS PERMITTED TO INSTALL ALTER

ADDRESS 4410 Salem Bottom Road, Westminster, Maryland PHONE 875-4197

SUBDIVISION Crystal Clear LOT 9 ROAD 13880 Kennard Drive

PROPERTY OWNER John & Christine Dodd

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 210

TRENCHES - Trench to be 2 feet wide. Inlet 3½ feet below original grade. Bottom maximum depth 7½ feet below original grade. Effective area begins at 3½ feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Start first trench 225 feet down the right lot line and 10 feet off that lot line. Run trenches along contour toward center of lot.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 5/21/92 RH

PLANS APPROVED BY C. Williams DATE 7/06/89

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

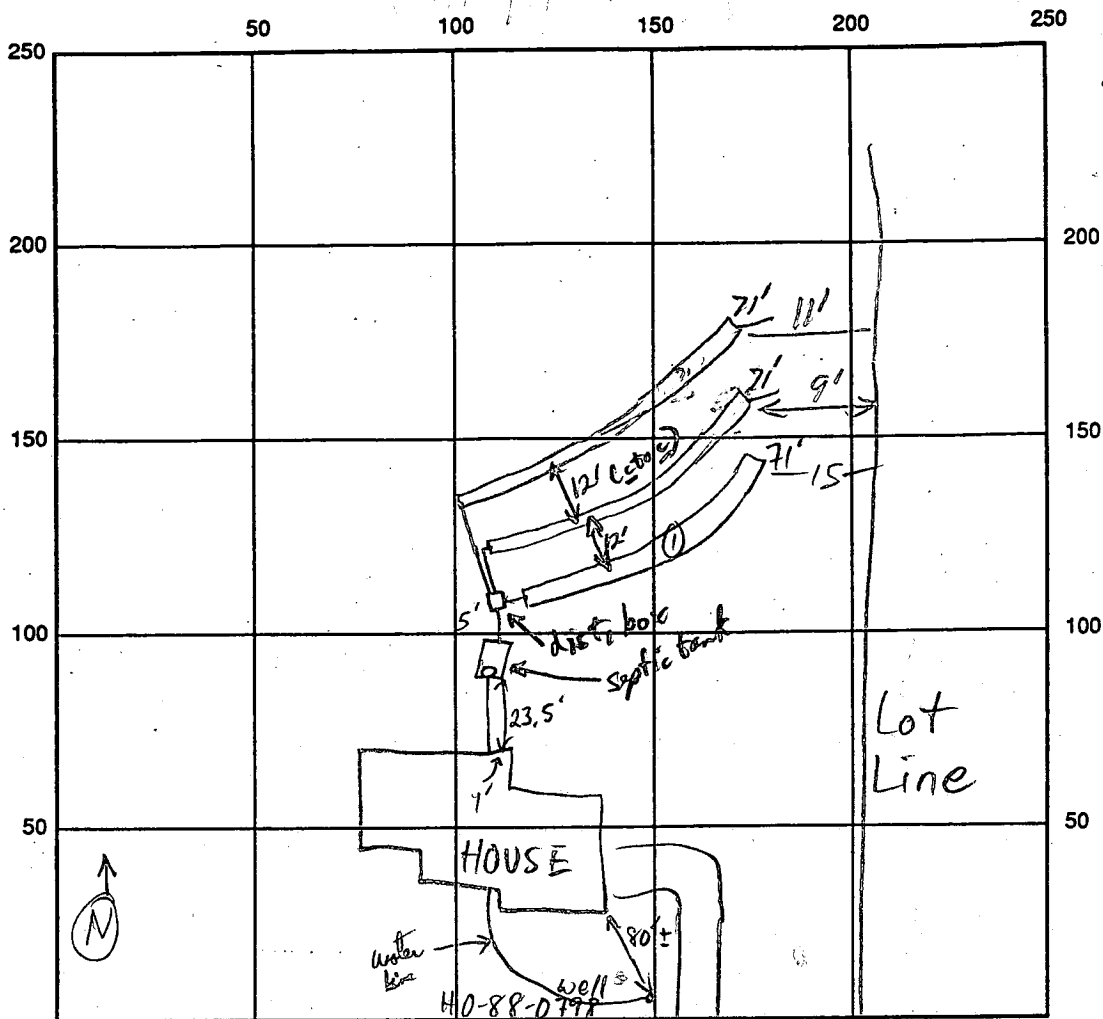
PERMIT VOID AFTER TWO YEARS

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**

A 39566



Kennard Dr INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1500 GAL - OK CLEANOUTS ✓ S.T.

DISTRIBUTION BOX LEVEL ✓

DRAIN FIELD/TITLE DEPTH $\frac{1}{5} \frac{2}{2.5} \frac{3}{9.5}$ FT. TRENCH WIDTH 2 FT. INLET DEPTH $\frac{1}{3.5} \frac{2}{3.5} \frac{3}{3.5}$ FT.

EFFECTIVE GRAVEL DEPTH $\frac{1}{4} \frac{2}{4} \frac{3}{4}$ FT. TOTAL LENGTH $\frac{1}{71} \frac{2}{71} \frac{3}{71}$ FT.

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA $\frac{1}{284} \frac{2}{213} \frac{3}{213}$ SQ. FT.

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

ABSORBENT AREA 832 SQ. FT.

REMARKS: 6/23/92 OK TO COVER TRENCH ①, DIG ② + ③ MR
Trench #2 OK to fill with Stone, S.T. + House Connections Finished OK - 6/24/92
OK to cover finished system 6/24/92 RJP

6/23/92 Pitless Adaptor OK @ 4 1/2' B.G. MR

DATE SYSTEM APPROVED 6/24/92 INSPECTOR RJP

APPLICATION

PERCOLATION TESTING

A 34566

P _____

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

7-23-87
Percolation pending
plat approval. JEN

DISTRICT 5TH

DATE 6-12-87

Check well site - ok

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.

John & Christine Dodd

PROPERTY OWNER Kenward Warfield Jr Capital Clear General Partnership

ADDRESS 14663 Tridelphia Rd Glenely 21737 PHONE 670-9114
442-2337

PROSPECTIVE BUYER N/A

ADDRESS _____ PHONE 73

PROPERTY LOCATION:

SUBDIVISION Crystal Clear LOT NO. LOT 9 Preliminary

ROAD AND DESCRIPTION West side Ivory Rd North side Tridelphia Rd
(13880 Kenward Drive)

TAX MAP 22 PARCEL # 533 BLDG. PERMIT SIGNED AND RETURNED 9/1/89
Serial # 42942 - 570 (4Bd)
Serial # 28928 - 5 Bedroom with 9.0

SIZE OF LOT 3 1/2 acres TYPE BLDG. SFD
(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.

M. S. Reiv
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 7-23-87
for perc location and subdivision plat approval.

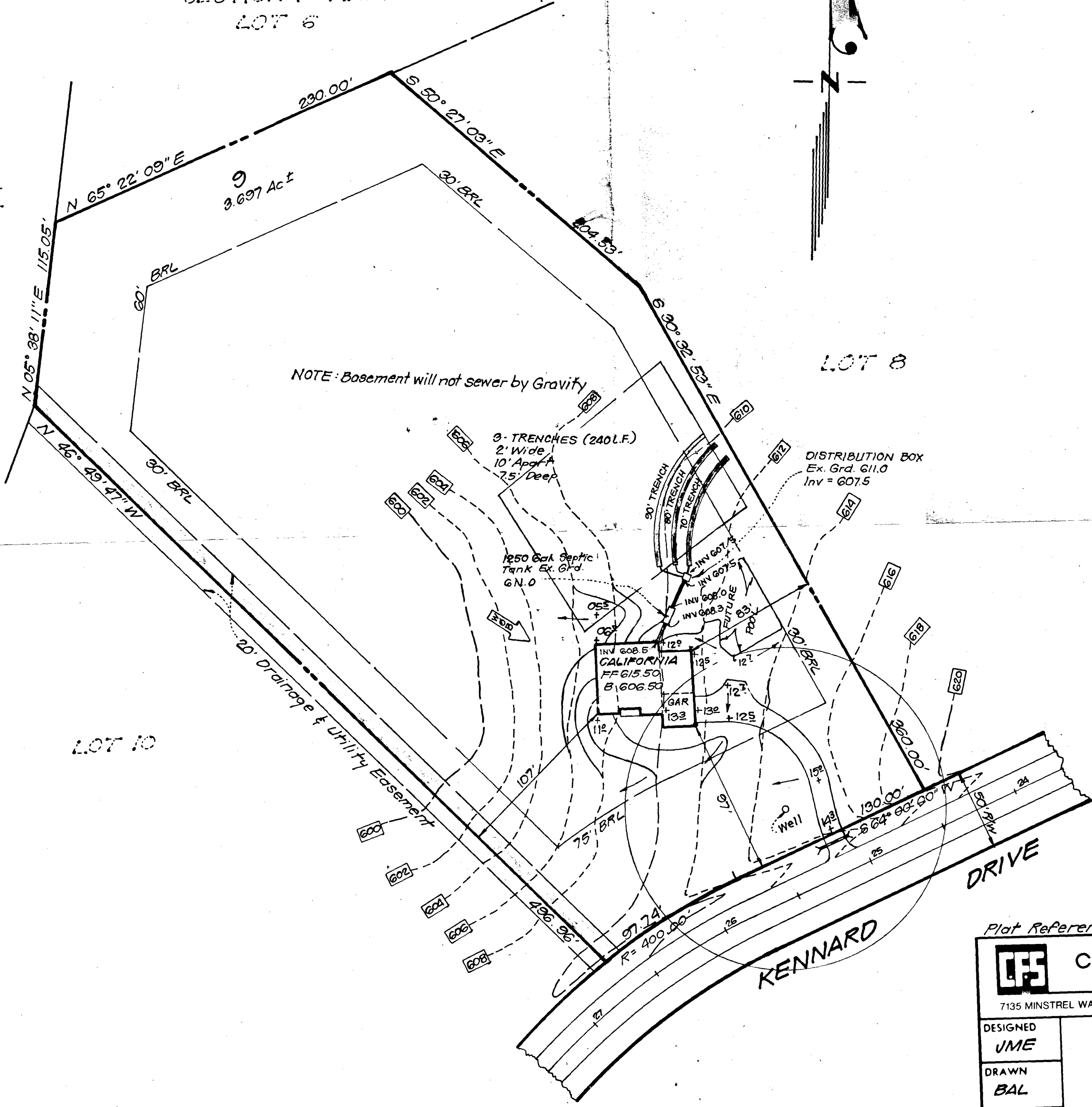
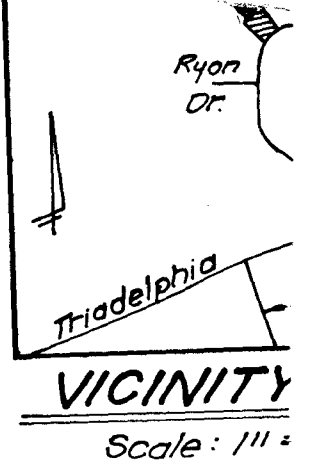
Check for well site at high point is 180 ft from septic.
May not have 10,000 sq ft. Can move (2) (3) 20' max down slope. JEN.

THIS IS NOT A PERMIT

Contour $\frac{100}{602}$
 tion $+021$
 P Drainage \rightarrow

W.B. PROPERTY SECTION 1 AREA
LOT 6

VES W. MOORE
 ERINE L. MOORE



NOTE: Basement will not sewer by Gravity

3 TRENCHES (240 L.F.)
 2' Wide
 10' Apart
 7.5' Deep

DISTRIBUTION BOX
 Ex. Grd. 611.0
 Inv = 607.5

1250 Gal. Septic Tank
 Ex. Grd. G.N.O.

NOTE: Building Permit pending on final approval of trench locations

5/8/92
 REVISED PLAN
 BP 42442
 RH

NOTE: Topography was taken from E Plan prepared by N and Witmer P.A.

Plat Reference N^o 8444

4 Bedroom



CLARK • FINEFROCK & SACKETT, INC
 ENGINEERS • PLANNERS • SURVEYORS

7135 MINSTREL WAY • COLUMBIA, MD. 21045 • (301) 381-7500 - BALTO. • (3

DESIGNED
JME
 DRAWN
BAL
 CHECKED

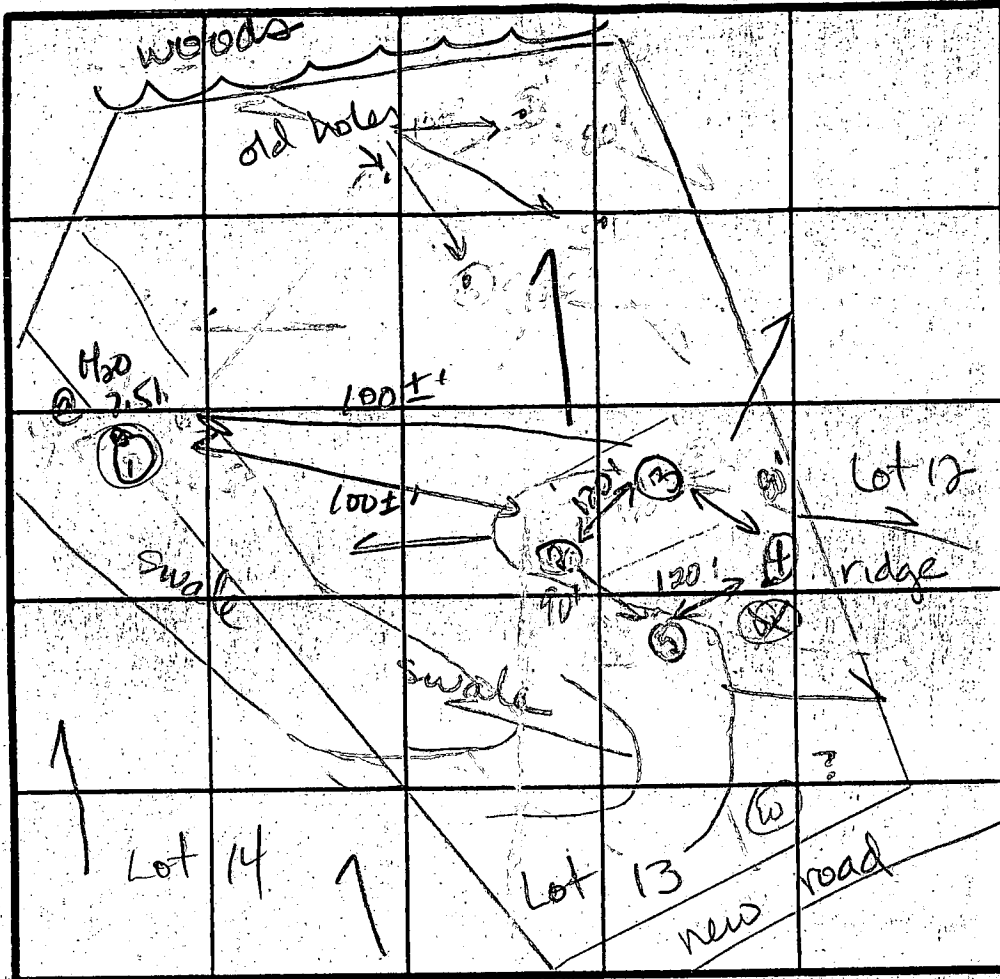
SITE DEVELOPMENT PLAN
LOT 9
CRYSTAL CLEAR
 3RD ELECTION DISTRICT
 HOWARD COUNTY MARYLAND

Lot 14 to
 ① 5' drop
 in elevation

3-5 High
 2
 4 ↓
 1 Low

SOIL PROFILE

①
 0-2.5 Rd-br
 si cl lm
 2.5-8.5 Br si
 cl sa
 lm, trc
 broken
 rock
 frag
 < 15%
 8.5 Bottom
 water
 at 1.5'



④ ④
 0-1.0 Br si cl
 lm
 1.0-3.5 Pink cl
 sa si
 lm
 3.5-11 Br mica
 sa si lm
 11.0 Bottom

⑤
 0-4.0 Br si
 cl lm
 4-12 Rd-pink
 cl sa
 si lm
 12 Bottom

②
 0-4.0 Rd-br si
 cl lm
 4-12 Br si
 sa lm
 12 Bottom

③
 0-3 Rd si cl
 lm
 3-12 Br sa
 si lm
 trc gul
 12 Bottom

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

DATE	TEST NO.	DEPTH	PRE-WET		TEST 1" DROP		TIME
			START	STOP	START	STOP	
7-23-87	2	3.0 S	2:13	2:15	2:15	2:17	2
		12.0 D	Bottom (see profile)				
	3	4.5 S	2:15	2:18	2:18	2:22	4
		12.0 D	Bottom (see profile)				
	4	3.5 S	2:27	2:29	2:29	2:32	3
		6.5 M	2:27	2:29	2:29	2:35	6
		11.0 D	Bottom (see profile)				
	5	12± V	(see profile)			ok	

Speed
 invert @
 * 3.5
 * - 8 stone?
 3.5 80
 12 ft/min
 X Perc
 4 min

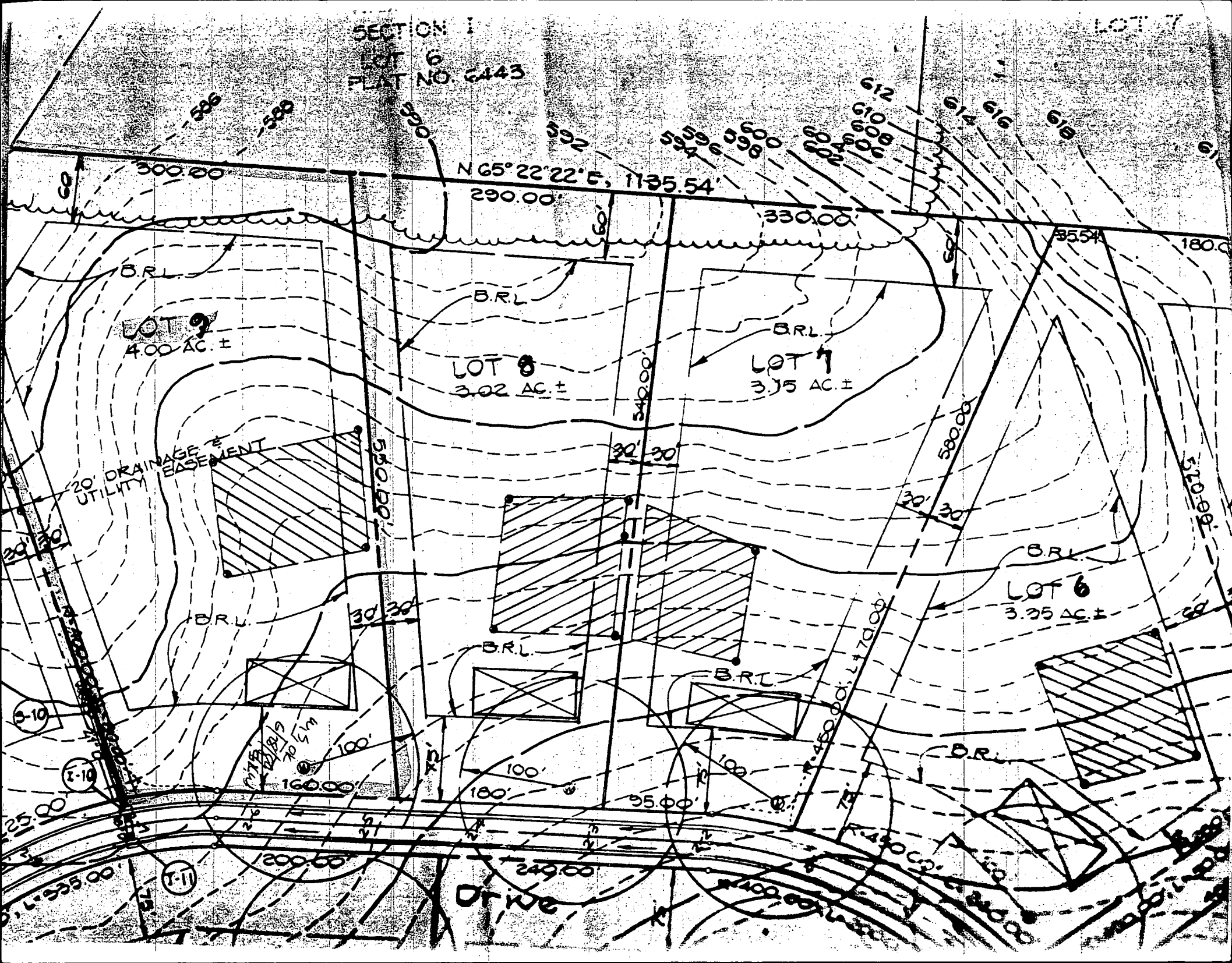
REMARKS Make sure well site is 100' from septic & upgrade
 All holes moved from original plat. Can move ② down slope 20' max

TYPE OF SOIL 0-4' Rd-br si cl lm, 4'-12' Br si sa lm

TESTED BY JF Nadeau ALSO PRESENT Marie R. Olen Jr.

SECTION 1
T1T 6
FLAT NO. 6443

LOT 7



B 1 9166

SEQUENCE NO. (DP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

STATE PERMIT NUMBER

40-88-0798

please print or type

fill in this form completely

Date Received (APA)

05 13 89

OWNER INFORMATION

GOSHEN LAND CO

21006 BRINK CT

BALTHEASBURG MD 20879

DRILLER INFORMATION

George F. Easterday

40

Driller's Name

77 License No. 80

L. Franklin Easterday, Inc.

Firm Name

9265 Brown Church Rd., Mt. Airy, Md. 21771;

George F. Easterday 5-24-89

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)

APPROXIMATE DEPTH OF WELL 300 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 DEEPEM AN EXISTING WELL

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

APPROP. PERMIT NUMBER GAP

FORCE CW PERMIT No. 40-88-0798

SPECIAL CONDITIONS

B 3

LOCATION OF WELL R 44395

HOWARD COUNTY

CRYSTAL CLEAR

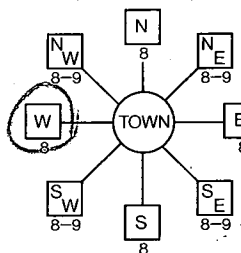
SECTION LOT 9

CLEVELAND

MILES FROM TOWN (enter 0 if in town) 1 MI

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



13880 KENNARD DR. NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



DISTANCE FROM ROAD 30

ENTER FT OR MI FT

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard COUNTY NAME A 39566 COUNTY NO.

STATE SIGNATURE DATE ISSUED INSERT S

063089 Chain in drawing 12/30/89

NORTH GRID 523000 EAST GRID 08000000

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

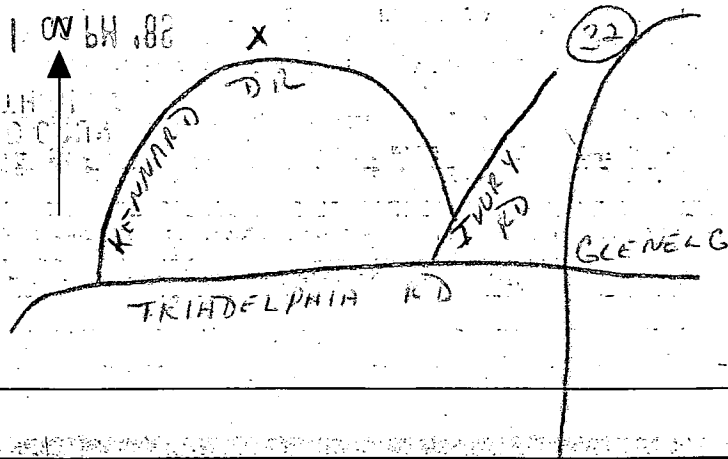
SOURCES OF DRILLING WATER

- 1. well
2.
3.

WRITE THE BOX NUMBER FROM THE MAP HERE

Box number 2000

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION.



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
Replacement

Receipt # 48253
Date 6/18/92

Name of Installer CLARKE P+H INC

Telephone 489-4029

License Number _____
Certified Well Pump Installer _____ Well Driller _____ Registered Plumber 3808

Name of Property Owner John Dobb Telephone 381-1414
Subdivision Crystal Clear Lot # 9 Well Tag # H-58-0798
Site Address 13880 Kennard Dr.

Pump
1. Type
a. Deep well jet _____
b. Shallow well jet _____
c. Submersible
2. Make Grundfos
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 _____

Motor
1. Horsepower _____
2. RPM _____
3. Voltage _____
a. 110 _____
b. 220

Pitless Adapter
1. Make PT 800
2. Model # _____
3. Depth 42"

Tank
1. Capacity 42 gal
2. Pressure relief valve? 75/14

Piping
1. Type Plastic
2. Size 1"
3. NSF and/or BOCA Code approved _____
4. Depth of supply line 42"

Well data
1. Depth _____ ft.
2. Yield _____ GPM
3. Static water level _____ ft.
4. Will water supply be disinfected by installer? NO

OK 6/23/92 366 SEATTLE INSPECTION SHEET

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: Kenneth C. Clarke

Date: 6-17-92

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

C1 9969

SEQUENCE NO. (DENV USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

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

COUNTY NUMBER A 39566

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

8 13

15 20

22 26 (TO NEAREST FOOT)

28 37

OWNER last name first name TOWN SUBDIVISION SECTION LOT

WELL LOG table with columns: DESCRIPTION, FEET FROM, FEET TO, Check if water bearing

GROUTING RECORD: WELL HAS BEEN GROUTED, TYPE OF GROUTING MATERIAL, NO. OF BAGS, NO. OF POUNDS

CASING RECORD: casing types insert appropriate code below, STEEL, CONCRETE, PLASTIC, OTHER

MAIN CASING TYPE, Nominal diameter top (main) casing, Total depth of main casing

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

SCREEN RECORD: screen type or open hole, insert appropriate code below, STEEL, BRASS, OPEN HOLE, PLASTIC, OTHER

DEPTH (nearest ft.) table with columns for each casing and screen

PUMPING TEST: HOURS PUMPED, PUMPING RATE, METHOD USED TO MEASURE PUMPING RATE, WATER LEVEL, TYPE OF PUMP USED

PUMP INSTALLED: DRILLER WILL INSTALL PUMP, TYPE OF PUMP INSTALLED, CAPACITY, PUMP HORSE POWER, PUMP COLUMN LENGTH, CASING HEIGHT

CIRCLE APPROPRIATE LETTER: A A WELL WAS ABANDONED AND SEALED, 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"

DRILLERS IDENT. NO.

DRILLERS SIGNATURE

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

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

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.), W Q, TELESCOPE CASING, LOG INDICATOR, OTHER DATA

LOCATION OF WELL ON LOT: SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS

COUNTY