

12-6-95
clo 12:00
later

Tax ID - 02-339803

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 50997F

A 39754

DISTRICT _____

DATE 11-28-95

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

DATE SYSTEM APPROVED 12/7/95

INSPECTOR DKS

INDEXED

_____ South Carroll Backhoe, Inc. _____ IS PERMITTED TO INSTALL X ALTER _____

ADDRESS 4410 Salem Bottom Road, Westminster, MD 21157 PHONE 875-4197

SUBDIVISION Burleigh Manor LOT 692 ROAD 10364 Kingsbridge Road

PROPERTY OWNER Altieri Homes, Inc. Richard Millhouser

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 160

TRENCHES - Trench to be 2 feet wide. Inlet 3.5 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 3.5 feet below original grade. 4.5 feet of stone below distribution pipe.

LOCATION - Starting from front left lot corner start first trench 105' down left lot line and 100' off this same lot line. Run trenches on contour toward left side 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 6/19/95 DKS

PLANS APPROVED BY Mark Rifkin DATE 8/21/88

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

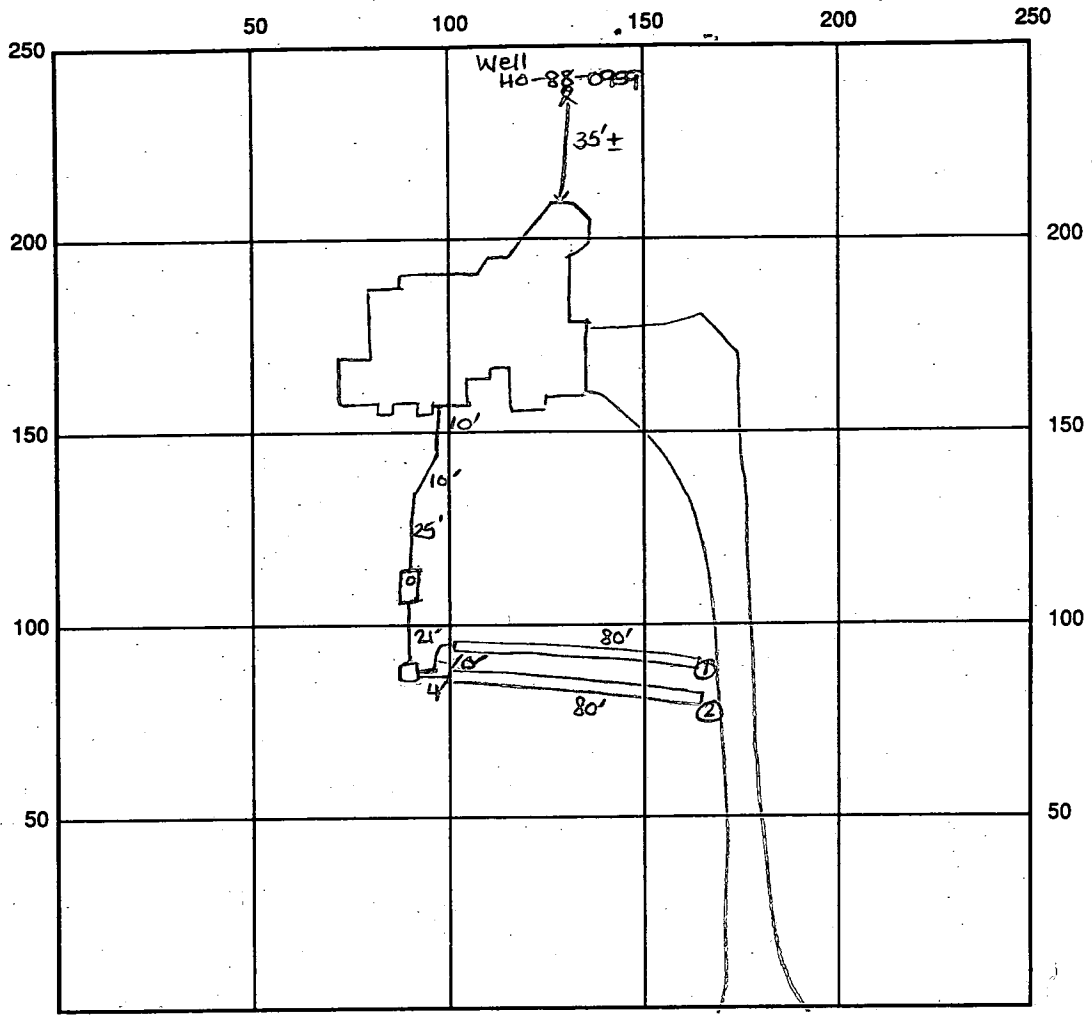
PERMIT VOID AFTER TWO YEARS

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
39754



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

Kingsbridge Road

SEPTIC TANK LEVEL OK - 1250 gal CLEANOUTS one on s.t.

DISTRIBUTION BOX LEVEL OK

DRAIN FIELD/TITLE DEPTH 8 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3.5 FT.

EFFECTIVE GRAVEL DEPTH 4.5 FT. TOTAL LENGTH ① 80', ② 80' FT. → 160' total

NUMBER OF TRENCHES 2 ONE SIDEWALL ~~AREA~~ AREA 720 SQ. FT.

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

ABSORBENT AREA 720 SQ. FT.

REMARKS: 12/6/95 A.M. septic tank set. OK to cover from house to s.t. and continue. DKS

12/6/95 P.M. OK to cover s.t. to d.b. OK to stone lat trench. DKS

12/7/95 FINAL - OK to cover all work. DKS

DATE SYSTEM APPROVED 12/7/95 INSPECTOR [Signature]

APPLICATION

PERCOLATION TESTING

A 39754
P _____

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

DISTRICT _____
DATE 4/23/82

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 ^{Altieri Homes, Inc} Gerald M. Katz, Trustee c/o Whitman, Regardt and Associates

ADDRESS 2315 St. Paul Street, Balto., Md. 21218 PHONE (301) 235-3450

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Burleigh Manor Section 2 LOT NO. 66

ROAD AND DESCRIPTION West of the intersection of Centennial Lane & Old Annapolis Road
(10364 Kingsbridge Road)

TAX MAP 23, 24 PARCEL # 290

SIZE OF LOT 3 AC. TYPE BLDG. _____

BLDG. PERMIT SIGNED
AND RETURNED 4/6/82
Serial # 60029-570-900
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. _____ (301) 484-8400
(SIGNATURE OF APPLICANT)

APPROVED BY B.W. Upton FOR deep system DATE 2/8/88

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

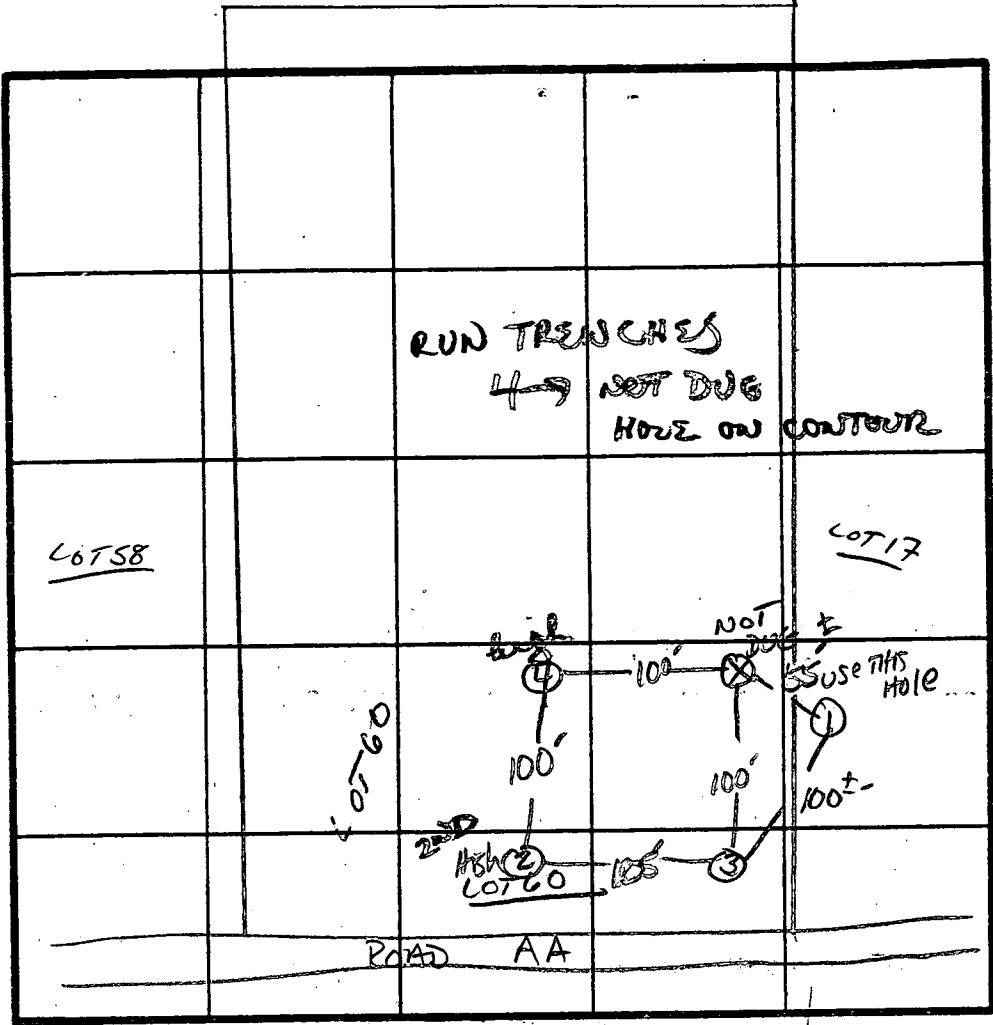
REASONS FOR REJECTION OR HOLDING 7/14/87 PERC SATISFACTORY - hold for subdivision Plat 66

THIS IS NOT A PERMIT

L.O.S.

① → ④
SOIL PROFILE

AD
8"
Yellow Br
Silty CLAY
LOAM
210% frags
BROWN →
yellow
BR.
LOAM
yellow LED
veins
throughout
12"



X PERC 3 min
180 #/BR
INLET - 3 1/2
BOTTOM - 8'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1' DROP		TIME
			START	STOP	START	STOP	
3/2/87	Hole #1 LOT 17	3.5'	7 min	12'	OK below	3'	
		6.5'	2 min				
7/14/87	2 S	4'	11:21	11:23	11:23	11:25	2 min
	M	7.5'	11:21	11:23	11:23	11:25	2 min
	2V	13'	UNIFORM SOIL below		3'		
	3 S	4'	11:12	11:13	11:13	11:15	2 min
	V	12.5'	UNIFORM SOIL below		3'		
	4V	13'	UNIFORM SOIL below		3.5'		

REMARKS HOLES PER PLAT

TYPE OF SOIL CHESTER

TESTED BY S. Blund ALSO PRESENT Rocky, CRISS

EH:12-1079

LOT 63

692
2.72 Ac

NOTE: Basement will not sewer by gravity.



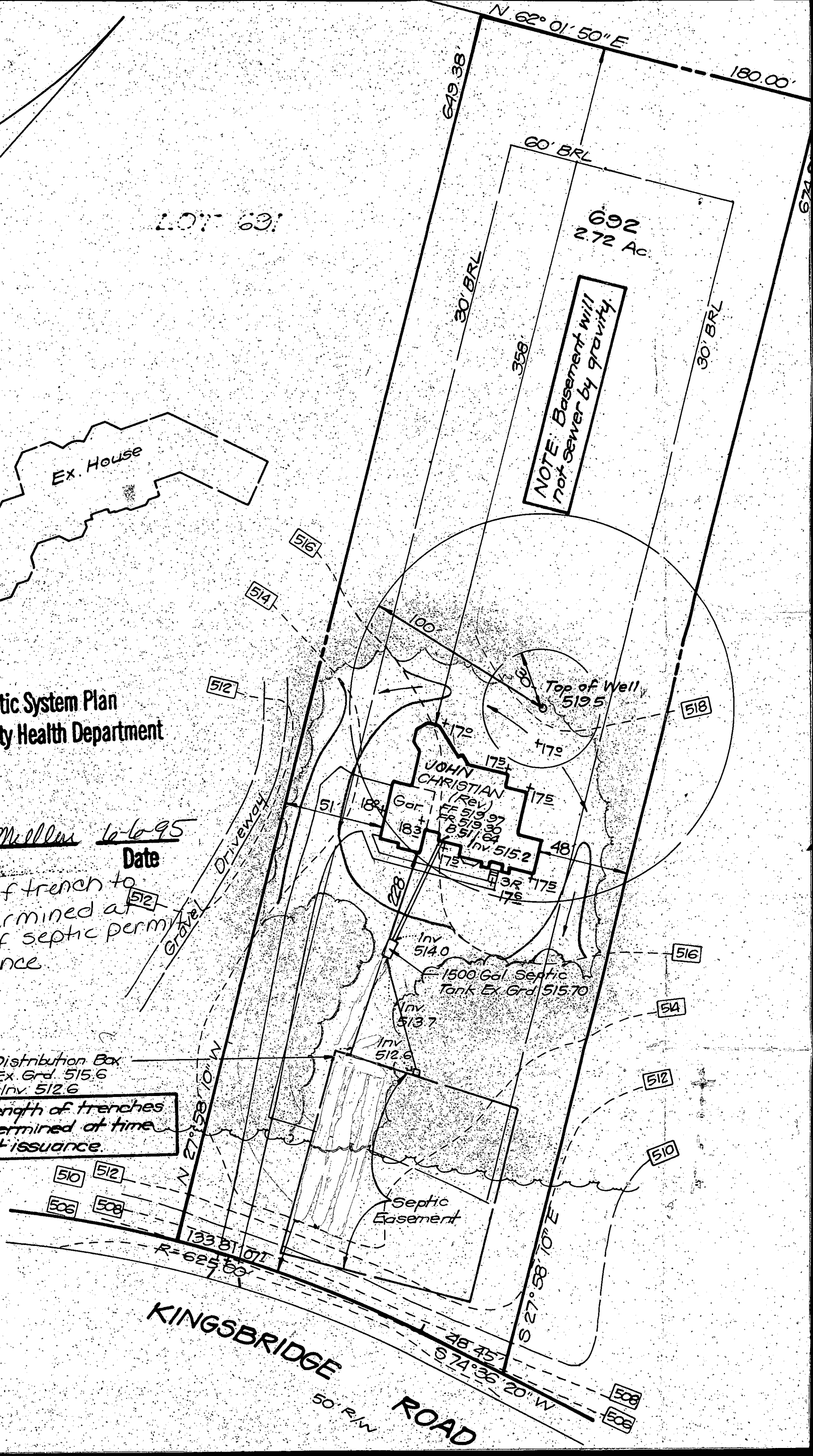
Approved Septic System Plan
Howard County Health Department

Amy McMullen 6-6-95
Signature Date

Length of trench to be determined at time of septic permit issuance.

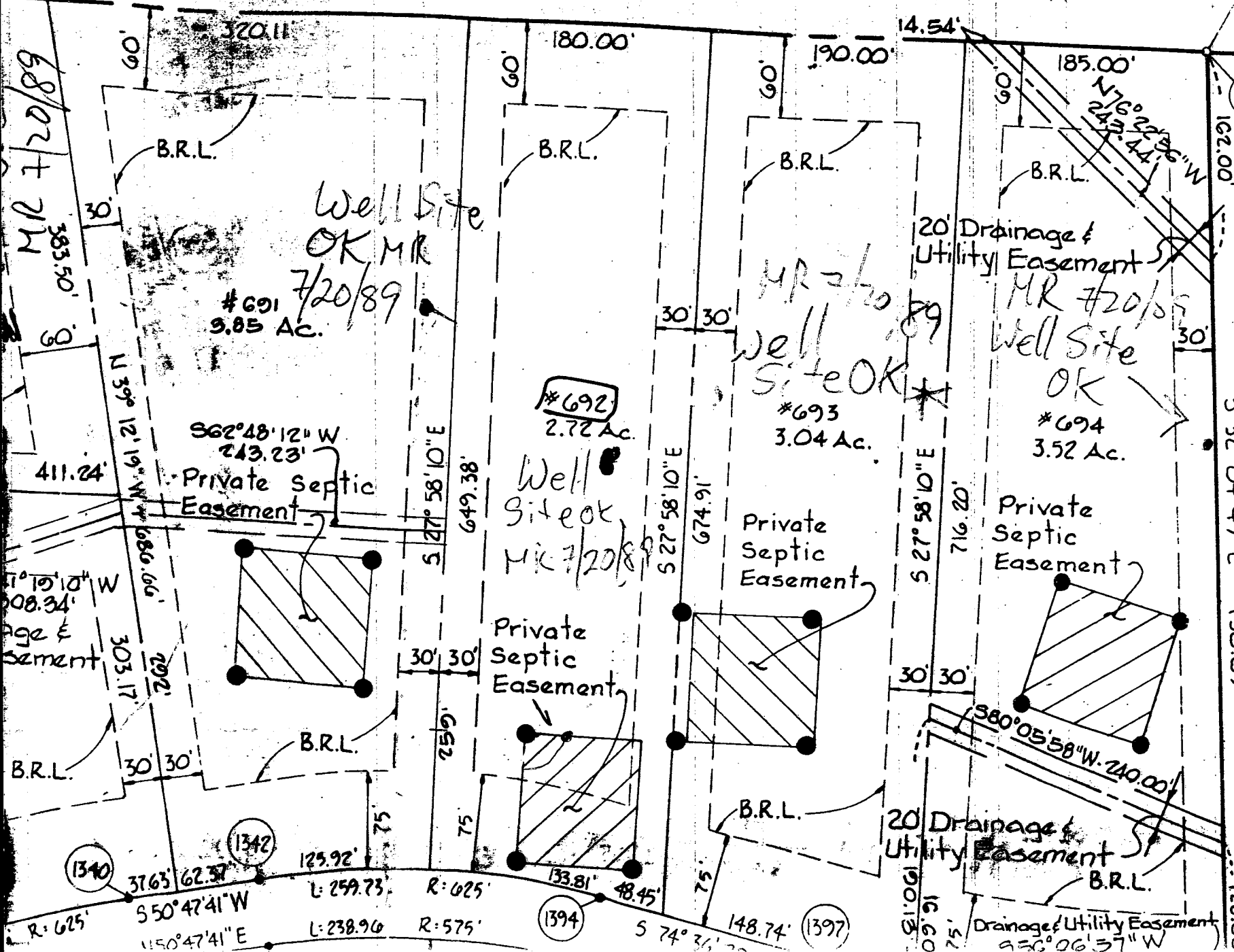
Distribution Box
Ex. Grd. 515.6
Inv. 512.6

NOTE: Length of trenches to be determined at time of permit issuance.



KINGSBRIDGE ROAD
50' R/W

0" E ~ 1211.63'



MATCH LINE SHEET 7 OF 9

(1408)

(1340)

(1342)

(1394)

(1397)

(128.00)

R: 625' 550°47'41" W L: 259.73 R: 625' 125.92'
 R: 625' 1150°47'41" E L: 238.96 R: 575' 133.81' 48.45'
 148.74' (1397)
 380°05'58" W 240.00'
 950°06'37" W

B 1 5640 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
HO-88-0959
fill in this form completely

Date Received (APA) 052389
OWNER INFORMATION
Greenebaum Rose Ass.
1777 Webster St. N.W.
Baltimore MD 21208

B 3 LOCATION OF WELL
HOWARD COUNTY
BURLICH WADCE SUBDIVISION
SECTION 2 LOT 692
ELLICOTT CITY
MILES FROM TOWN 3.2 MI

DRILLER INFORMATION
Joseph L. Mayne 238
Joseph L. Mayne Well Drilling
5512 Ridgely Rd. Mt. Airy 21771
Joseph L. Mayne 5/22/89

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
Kingbridge Rd.
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
DISTANCE FROM ROAD 300 FT

B 2 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 A39754
STATE SIGNATURE Mark E. Kilkin 2/3/90
DATE ISSUED 080389
NORTH GRID 520000 EAST GRID 0835000

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

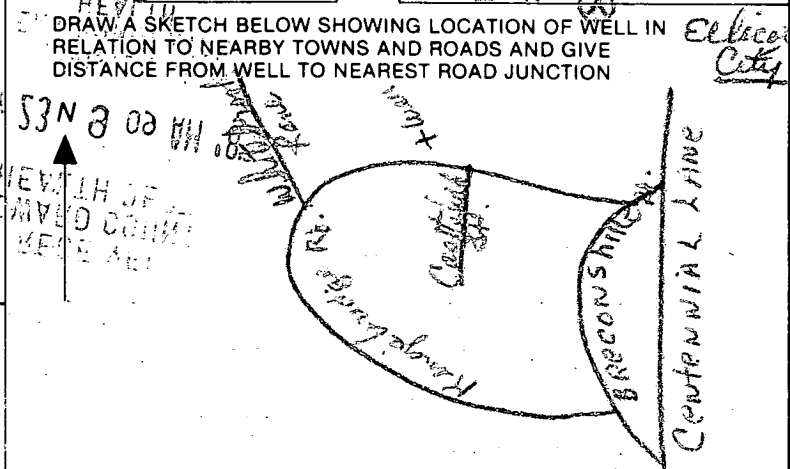
APPROXIMATE DEPTH OF WELL 300 FEET

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

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
SOURCES OF DRILLING WATER
1. WELL
WRITE THE BOX NUMBER FROM THE MAP HERE
8385
530 well

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
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 MR PERMIT No. HO-88-0959

SPECIAL CONDITIONS
COUNTY

C1 1079 SEQUENCE NO. (DENV USE ONLY)

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

STATE OF MARYLAND WELL COMPLETION REPORT

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

COUNTY NUMBER A39754

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED

Depth of Well 245 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-88-0059

OWNER: last name first name STREET OR RFD TOWN SUBDIVISION SECTION LOT

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. Includes handwritten entries: SAND STONE, 0-44; Clay like rock, 44-245.

GROUTING RECORD WELL HAS BEEN GROUTED (Y/N) TYPE OF GROUTING MATERIAL CEMENT BENTONITE CLAY NO. OF BAGS NO. OF POUNDS GALLONS OF WATER DEPTH OF GROUT SEAL

CASING RECORD casing types insert appropriate code below 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

Table for SCREEN RECORD with columns for DEPTH (nearest ft.) and rows for EACH SCREEN. Includes handwritten entries: 110, 47, 445.

CIRCLE APPROPRIATE LETTER A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED ELECTRIC LOG OBTAINED 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 IDENT. NO. 123

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

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

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

PUMPING TEST HOURS PUMPED (nearest hour) PUMPING RATE (gal. per min. to nearest gal.) METHOD USED TO MEASURE PUMPING RATE WATER LEVEL (distance from land surface) BEFORE PUMPING WHEN PUMPING TYPE OF PUMP USED (for test)

PUMP INSTALLED DRILLER WILL INSTALL PUMP (CIRCLE) (YES or 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) LAND SURFACE (nearest foot)

