

294811

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

P 4000
A REPAIR

DISTRICT _____

DATE 9/02/87

DATE SYSTEM APPROVED 9/4/87

INSPECTOR RH

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH

461-9933

INDEXED

Fred Neighoff IS PERMITTED TO INSTALL _____ ALTER X

ADDRESS 3529 Lakeway Drive PHONE _____

SUBDIVISION Benson ROAD 3529 Lakeway Drive LOT _____

PROPERTY OWNER Fred Neighoff

ADDRESS _____

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

GARBAGE GRINDER? YES _____ NO X

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4 AFTER ADDITION DONE

REPAIR - CALL FOR INSPECTION WHEN GROUND IS OPENED UP SO SANITARIAN CAN RECOMMEND REPAIR.

PURPOSE OF REPAIR JOB IS TO ENLARGE SYSTEM,
NOT OVERFLOWING TODAY A BEDROOM IS TO BE
ADDED. INSTALL A TRENCH 10 FT DEEP
6 FT STONE INLET AT 4 FT 50 FT LONG
OFF OLD TRENCH

PLANS APPROVED BY C. Williams DATE 9/02/87

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 TRENCHES ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCHES).

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 APROVAL ON THIS PERMIT**

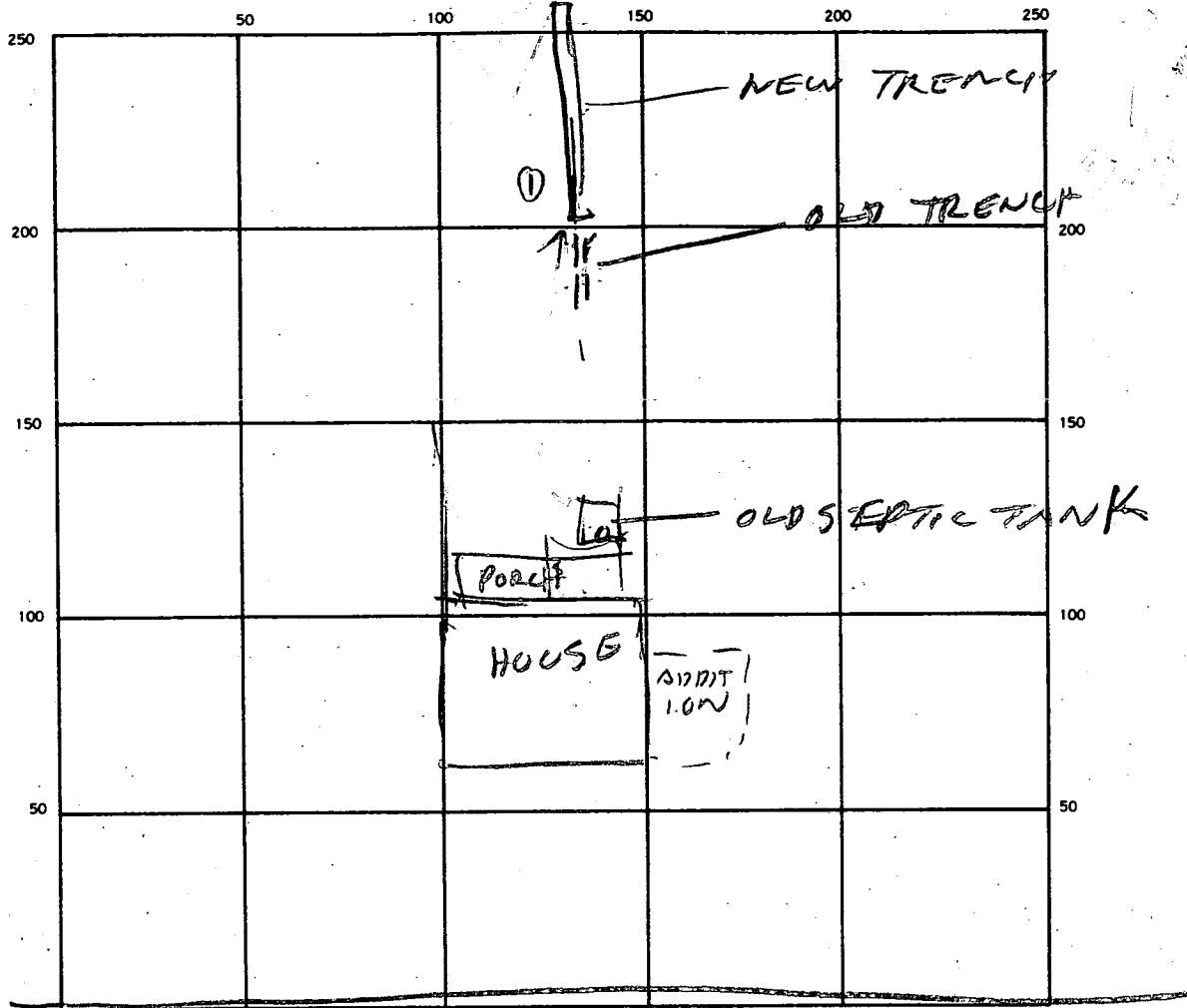
*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1186

*copy to
early AM
9/4/87*

P 40000

①
 4
 BROWN
 SAND
 MICA
 LONNA
 10



INDICATE NORTH — NAME ADJOINING ROADWAY AS BASE LINE
 BLAKEWAY DRIVE

SEPTIC TANK. LEVEL _____ CLEANOUTS _____

DISTRIBUTION BOX. LEVEL _____

DRAIN FIELD/TILE FIELD. DEPTH 10 FT. TRENCH WIDTH 2 FT. INLET DEPTH _____ FT.

EFFECTIVE GRAVEL DEPTH 6 FT. TOTAL LENGTH 52 FT.

NUMBER OF TRENCHES 1 ONE SIDEWALL/BOTTOM AREA 312 SQ. FT.

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

ABSORBENT AREA _____ SQ. FT.

REMARKS 9/4/87-AM ADD STONE TO TRENCH & CALL
9/4/87-AM STONE ADDED

DATE SYSTEM APPROVED 9/4/87 INSPECTOR Raymond Hodge

HOWARD COUNTY HEALTH DEPARTMENT

JOYCE M. BOYD, M.D., M.P.H.
COUNTY HEALTH OFFICER



Bureau of Environmental Health
3525 Ellicott Mills Drive
Ellicott City, Maryland 21043

Director - 461-9956
Water & Sewerage, Permits - 461-9933
Community Environmental Health - 461-9944
Technical Services - 461-9955

August 4, 1987

BP OK
8/10/87 CW

Mr. Fred Neighoff
3529 Lakeway Drive
Ellicott City, Maryland 21043

RE: Building Permit #13642
3529 Lakeway Drive

Dear Mr. Neighoff:

In order for this department to recommend approval of the above referenced building permit, additional capacity must be added to the septic system. The present septic system was installed to handle the anticipated wastewater flow for a much smaller house and is near the end of its projected life expectancy.

The fee for a septic repair permit is \$10.00; please contact this office to secure this permit. If you have any additional questions, please call this office at 461-9933.

Respectfully,

Craig Williams

Craig Williams, Director
Water and Sewerage Program

CW:JR

cc: Avis Corbin, Chief
Licenses and Permits

MR NEIGHOFF
INDICATES HE BELIEVES SYSTEM
NEEDS NO ADJUSTMENT,

INSP TO CONFIRM
8/7/87 CW

NO EVIDENCE OF PROBLEM AT THIS TIME.

APPLICANT IS ADVISED THAT THIS MAY BE
AN APPROPRIATE TIME TO ADD CAPACITY
BUT NOT REQ'D. OK TO RELEASE BP. CW

PERMIT

2/21/73
Final OK.
R. Toner

SEWAGE DISPOSAL SYSTEM

P 17942
A 14438

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 3

INDEXED

File

DATE 2/15/73

Jack Fyock IS PERMITTED TO INSTALL ALTER

ADDRESS Ten Oaks Road, Glenelg, Md. PHONE 286-2939

A SEWAGE DISPOSAL SYSTEM LOCATED AT

SUBDIVISION Benson ROAD 3529 Lakeway Drive LOT 8, Blk. A

PROPERTY OWNER Howard W. Rush, Jr. & wife Fred & Louetta Neighoff

ADDRESS

SPECIFICATIONS - 3 4 bedrooms

DRAIN FIELD DEPTH FEET, BOTTOM AREA SQ. FT.

SEEPAGE PITS ABSORBENT SIDE-WALL AREA SQ. FT.

SEPTIC TANK CAPACITY 1000 1200 GALLONS

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 22% & TANK CAPACITY 50%.

OTHER Dry well to be 110 sq. ft. of absorbent sidewall area below the inlet pipe

per bedroom. Inlet pipe to begin 3 1/2 ft. below original grade. Maximum depth of dry well to be 8 ft. below original grade. Locate dry well 84 ft. from rear lot line and 17 ft. from right side line as lot is seen standing on new road facing lot.

NOTE: ALL PIPE FROM HOUSE TO TANK MUST BE CAST IRON.

PERMIT VOID AFTER THREE YEARS.

NOTE: INSTALL STND PIPE ON SEPTIC TANK AND DRY WELL.

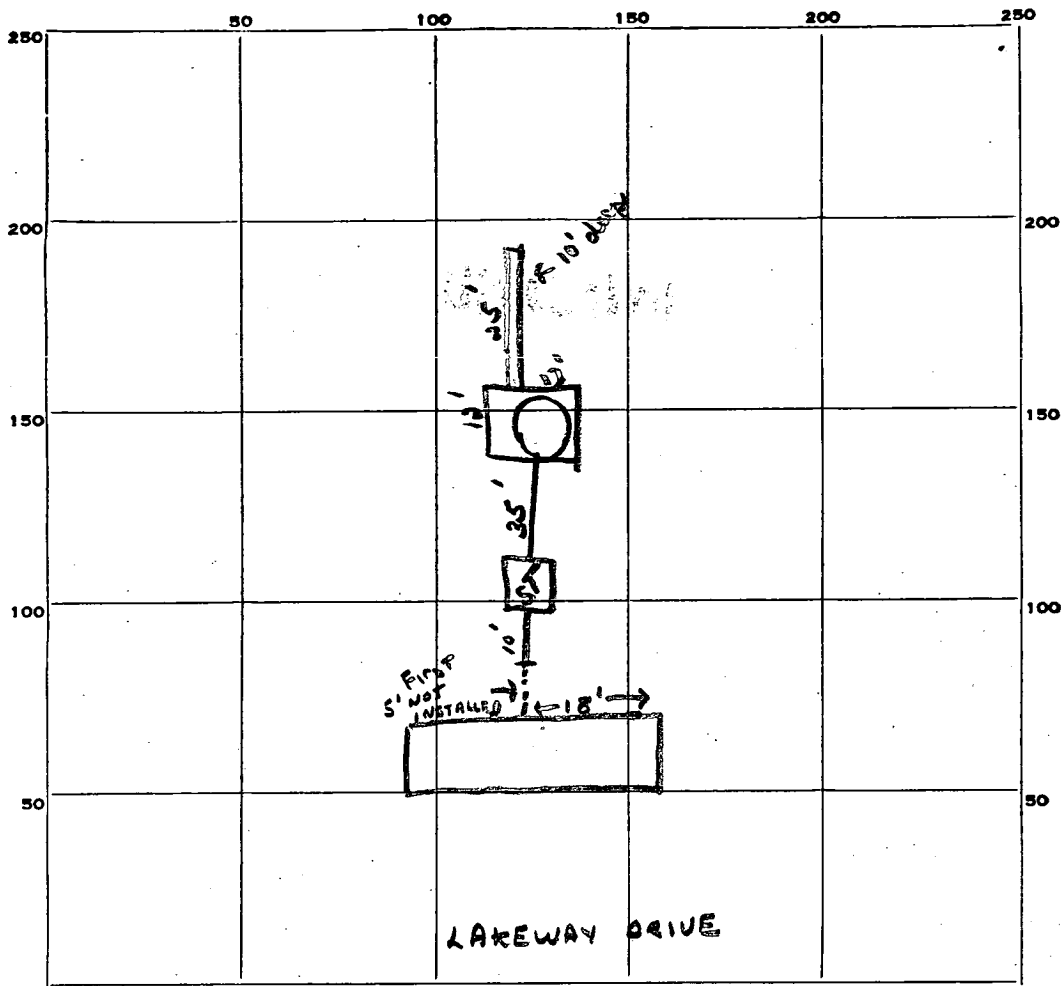
PLANS APPROVED BY James T. Wright DATE 1/15/71

FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

NEITHER THE HOWARD COUNTY COMMISSIONERS NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

BLDG. PERMIT SIGNED AND RETURNED 8/10/82
Serial # 13642
2-Story addition

A 14438



4/22/73
 4/26/73
 5/1/73
 5/15/73
 5/22/73

INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD _____

SEPTIC TANK, LEVEL 1000 gal - CLEANOUTS OK

DISTRIBUTION BOX, LEVEL _____

DEEP TRENCH

TILE FIELD, DEPTH 10 FT. TRENCH WIDTH 2 FT.

GRAVEL DEPTH 6 ft IN. TOTAL LENGTH 25 FT.

NUMBER OF TRENCHES 1 Sidewalk TOTAL BOTTOM AREA _____

SEEPAGE PITS, outside perimeter INSIDE DIAMETER 12 x 12 FT. DEPTH BELOW INLET 6 1/2 FT.

Total ABSORBENT AREA 462 SQ. FT.

REMARKS _____

DATE SYSTEM APPROVED 2/21/73 INSPECTOR R. Ture

APPLICATION

A 14438

SEWAGE DISPOSAL TESTING

F _____

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

Septic tank to be for 3 bedrooms 1000 gals

ELLICOTT CITY

DISTRICT 3

DATE 4/21/69

Dry well to be 100 sq ft of absorption sidewalk area below the inlet pipe per bedroom. Inlet pipe to be 3 1/2 ft below original grade. Maximum depth of dry well to be 9 ft below original. Locate dry well 6 ft from rear lot line and 10 ft from right side line, as lot is seen standing on new road facing lot.

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TESTS IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Carl C. Hall & wife

Mr. Carter

ADDRESS Chatham Rd., Ellicott City, Md. PHONE HO 5-1635

PROPERTY LOCATION:

SUBDIVISION Benson LOT NO. 8

ROAD AND DESCRIPTION Unnamed Road

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 128' x 316' x 128' x 316' TYPE BLDG. 3 or 4

NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

SIGNATURE OF APPLICANT /s/ Carl C. Hall

APPROVED BY James T. Wright FOR Dry well DATE 1/15/71

(KIND OF SYSTEM)

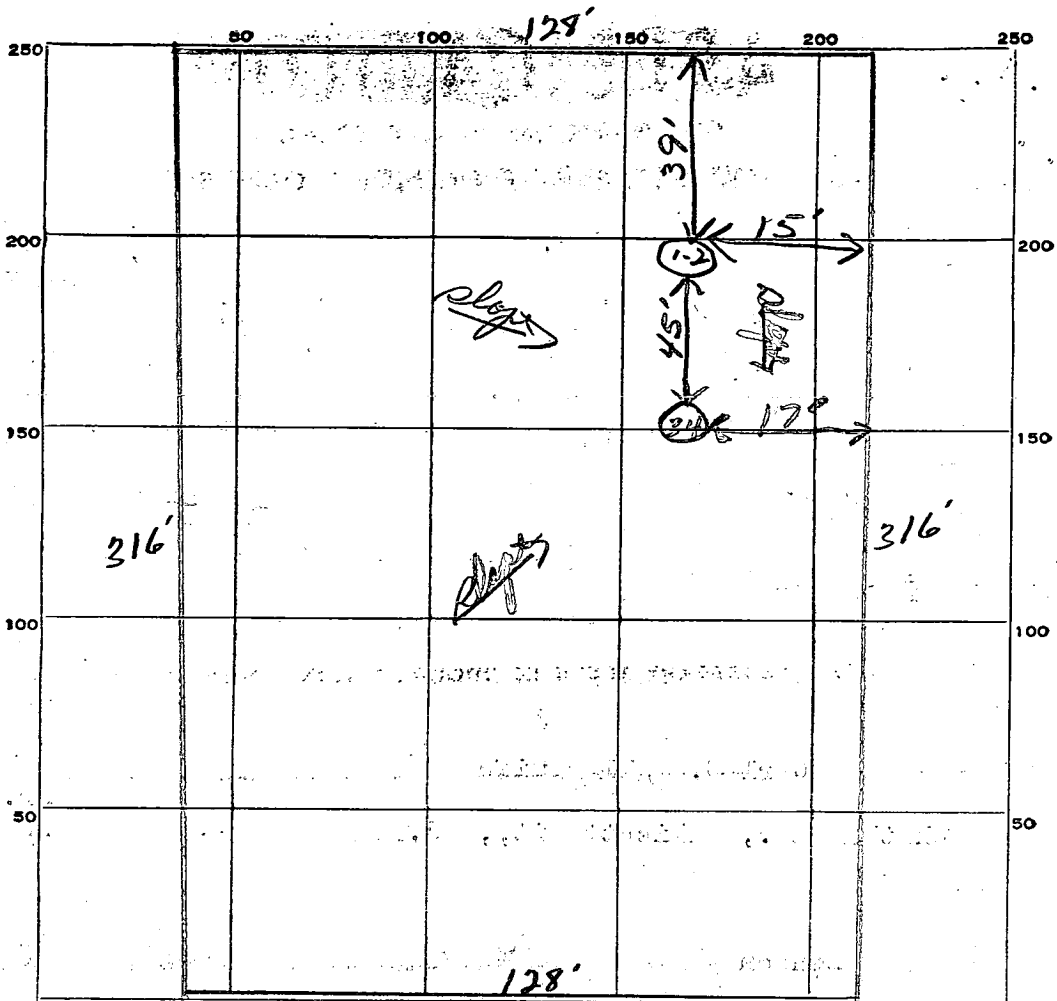
REJECTED BY _____ FOR _____ DATE _____

(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

New Rd.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
<i>11/22/69</i>	<i>1</i>	<i>9'</i>	<i>10 19</i>	<i>10 20</i>	<i>10 20</i>	<i>10 23</i>	<i>3 min</i>
	<i>2</i>	<i>4'</i>	<i>10 20</i>	<i>10 25</i>	<i>10 25</i>	<i>10 33</i>	<i>8 min</i>
	<i>3</i>	<i>9'</i>	<i>10 25</i>	<i>10 31</i>	<i>10 31</i>	<i>10 40</i>	<i>9 min</i>
	<i>4</i>	<i>4'</i>	<i>10 26</i>	<i>10 32</i>	<i>10 32</i>	<i>10 43</i>	<i>11 min</i>

Orig.
9 min.
A-8
hole 1/2" ?
to far back?

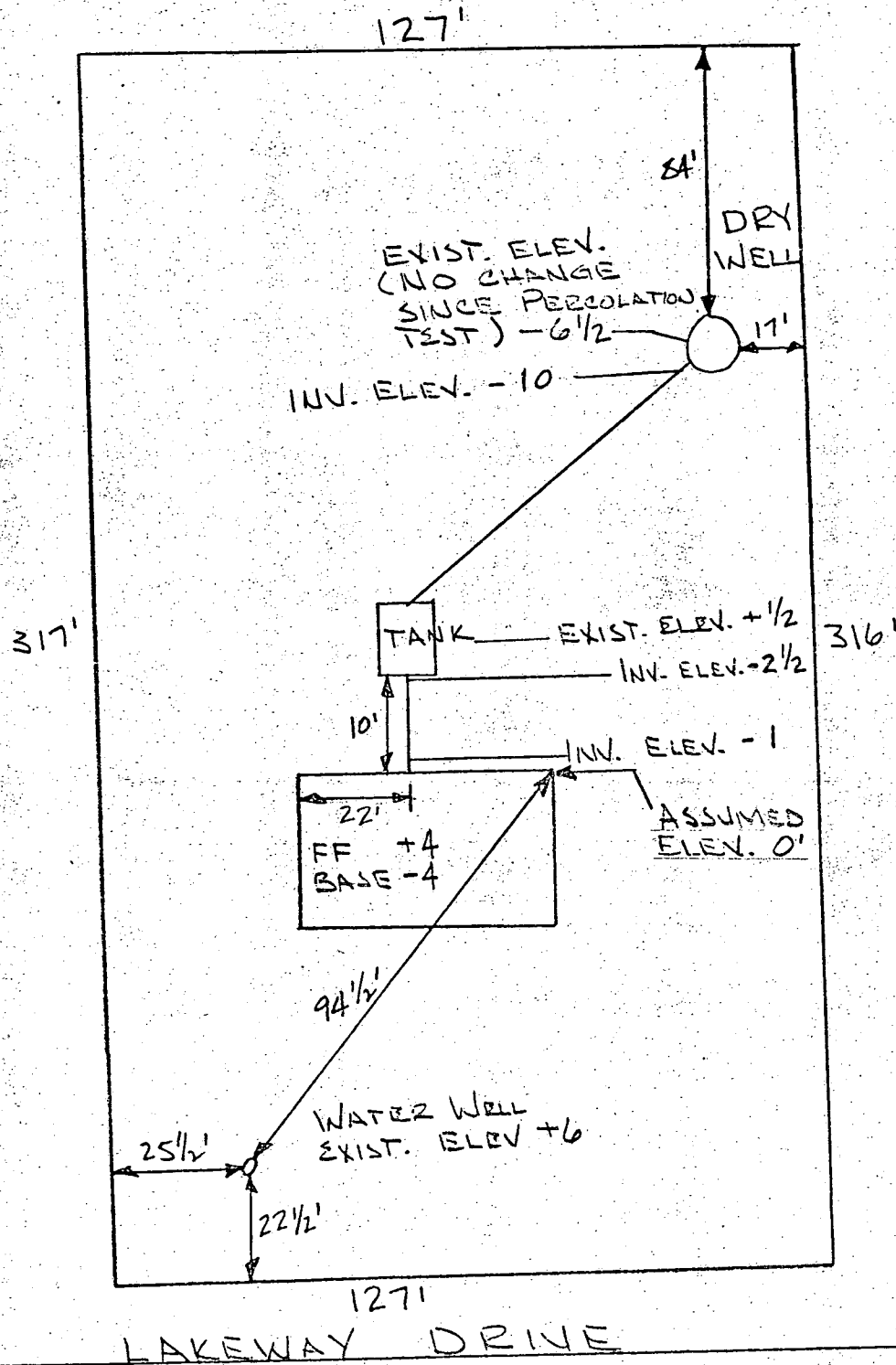
SOIL AUGER FINDING

TESTED BY

[Signature]

LOT 8A - BENSON SUBDIVISION
OWNER - H.W. RUSH, JR & WIFE

NO SCALE
ELEVATIONS ASSUMED



11/9/12
Approved
R. Rush

THE ABOVE MEASUREMENTS AND ELEVATION DIFFERENCES ARE ACTUAL AND CORRECT FOR THIS PROPERTY TO THE BEST OF MY KNOWLEDGE.

Howard Rush, Jr.

B 1 **2320** SEQUENCE NO. (DWR USE ONLY)
 1 2 3 (SEQ. NO.) 6
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
 DEPARTMENT OF WATER RESOURCES
 STATE OF OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL

DWR PERMIT NUMBER
Ho-73-0131
 FILL IN THIS FORM COMPLETELY

DATE RECEIVED (DWR USE ONLY)
2/23/73
11:30-12:30

OWNER **A. Rush Howard**
 COL 15 LAST NAME FIRST NAME COL. 34
 STREET OR RFD **10 - F. Saddletop Court** COL. 55
 POST OFFICE **Cockeysville Md.** COL. 76

B 1 CONTINUED DRILLER INFORMATION
 1 2 3 (SEQ. NO.) 6
 DATE **Nov 29-72** LICENSE NUMBER **42**
S. J. Eastaway DRILLER LAST NAME
 SIGNATURE **S. J. Eastaway**

B 3 LOCATION OF WELL
 1 2 3 (SEQ. NO.) 6
 COUNTY **Howard** (DO NOT ABBREVIATE COUNTY NAME) 21
 SUBDIVISION **Benson** 42
 SECTION **A** LOT **8** 50
 NEAREST TOWN **Maryfield** 71
 MILES FROM TOWN (ENTER 0 IF IN TOWN) **3** 76 77 78

B 2 WELL INFORMATION
 1 2 3 (SEQ. NO.) 6
 MAXIMUM PUMPING RATE (GALLONS PER MINUTE) **5**
 AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) **600**

B 4 DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)
 1 2 3 (SEQ. NO.) 6
 N NORTH E EAST NE NORTHEAST SE SOUTHEAST
 S SOUTH W WEST NW NORTHWEST SW SOUTHWEST
 NEAR WHAT ROAD **Triadell Rd**
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) N 32 S 32 E 32 W 32
 DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) **400**

USE FOR WATER (CIRCLE APPROPRIATE BOX)
 D DOMESTIC, HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
 F FARMING, AGRICULTURE, IRRIGATION
 I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT.
 M MUNICIPAL WATER SUPPLY } MUST HAVE STATE HEALTH DEPT. APPROVAL
 P PRIVATE WATER COMPANY }
 T TEST

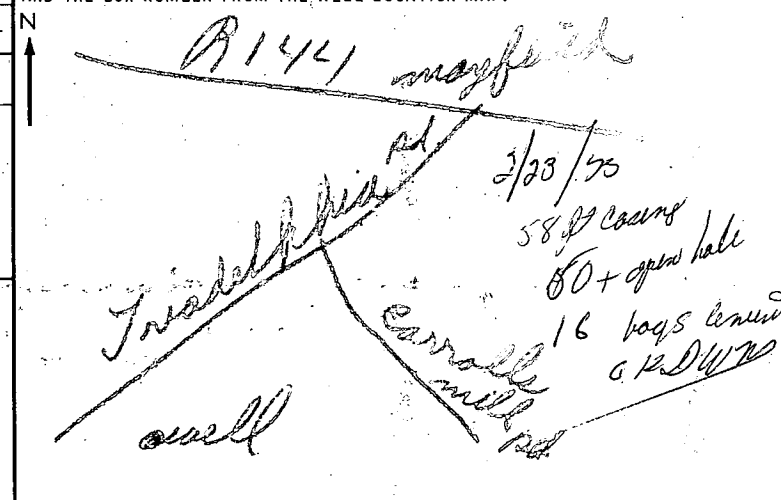
DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS, ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON THE SKETCH, ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX BELOW, AND THE BOX NUMBER FROM THE WELL LOCATION MAP.

APPROXIMATE DEPTH OF WELL **100** FEET

APPROXIMATE DIAMETER OF WELL **6** (NEAREST INCH)

METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)
 BORED (OR AUGERED): JETTED DRIVEN
 30-37 AIR-ROTARY AIR-PERCUSSION ROTARY (HYDRAULIC ROTARY)
 CABLE REVERSE-ROTARY DRIVE-POINT
 OTHER (DESCRIBE)

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 (DWR USE ONLY)
 APPROPRIATION PERMIT NUMBER **54** ENGINEER REVIEW DISTRICT NO. **C1**
 FORCE **WRITE INITIALS IN BOX** CONDITIONS **W**

BOX NUMBER **E 810**
N 520
 NORTH COORDINATE **520000**
 EAST COORDINATE **0410000**
 ELEVATION AT WELL HEAD (FEET) **65 66 67 68**

B 4 CONTINUED HEALTH DEPARTMENT APPROVAL
 1 2 3 (SEQ. NO.) 6
Howard COUNTY NAME COUNTY NO. **3072**
 DATE **113072**
Palmer F. Wine, Director

B 5 SPECIAL CONDITIONS 8-63 (DWR USE ONLY)
 1 2 3 (SEQ. NO.) 6

C 1 01737 SEQUENCE NO. (DWR USE ONLY)

1 2 3 (SEQ. NO.) 6

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

STATE OF MARYLAND
DEPARTMENT OF WATER RESOURCES
STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER

DATE RECEIVED (DWR USE ONLY) Feb. 21 '73

DEPTH OF WELL 160 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" H1073-0V3V

DRILLERS IDENTIFICATION NO. 42

OWNER Rusk, Howard

STREET OR RFD 107 Saddletop Ct POST OFFICE Cockeysville, Md

WELL LOG

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET		CHECK IF WATER BEARING
	FROM	TO	
Gravel	0	2	
Sandy sandstone	2	46	
Sandstone	46	80	✓
Mudstone	80	160	

WELL DESCRIPTION

GROUTING RECORD YES NO

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) Y N

TYPE OF GROUTING MATERIAL (CIRCLE BOX) C M B C

CEMENT: 45 46 BENTONITE CLAY 45 46

NO. OF BAGS 16 NO. OF POUNDS 1600

GALLONS OF WATER 100

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM 0 FT. TO 56 FT.

CASING RECORD

INSERT APPROPRIATE CODE BELOW

STEEL S T CONCRETE C O

PLASTIC P L OTHER O T

MAIN CASING TYPE S T

NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) 16

TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) 56

OTHER CASING (IF USED)

DIAMETER (INCH) DEPTH (FEET)

FROM TO

SCREEN RECORD

INSERT APPROPRIATE CODE BELOW

STEEL S T BRASS OR BRONZE B R OPEN HOLE H O

PLASTIC P L OTHER O T

DEPTH (NEAREST WHOLE FOOT)

FROM TO

1	8	9	11	15	17	21
2	23	24	26	30	32	36
3	38	39	41	45	47	51

SLOT SIZE 1, 2, 3

DIAMETER OF SCREEN 56 60 (NEAREST INCH)

FROM TO

GRAVEL PACK

IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX 68 F

DWR USE ONLY (NOT TO BE FILLED IN BY DRILLER)

TELESCOPE CASING T 70

LOG INDICATOR L 72

OTHER DATA AVAILABLE W Q 74 75 76

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) 2

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 5

METHOD USED TO MEASURE PUMPING RATE

WATER LEVEL: (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING 50 (NEAREST FOOT)

WHEN PUMPING 160 (NEAREST FOOT)

TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST)

A AIR P PISTON T TURBINE

C CENTRIFUGAL R ROTARY O OTHER (DESCRIBE BELOW)

J JET S SUBMERSIBLE

PUMP INSTALLED

TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: A, C, J, P, R, S, T, O)

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) Y N

CAPACITY:

GALLONS PER MINUTE (TO NEAREST GALLON) 31 35

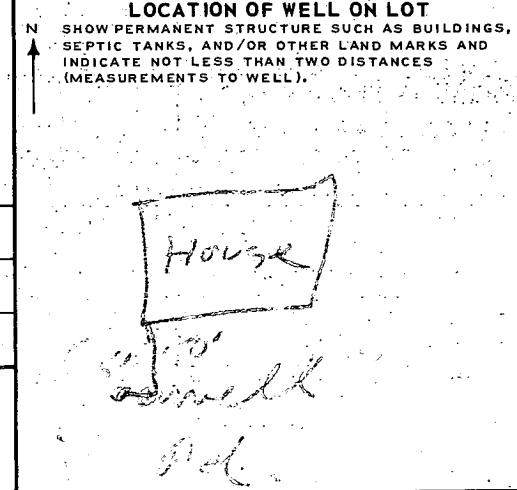
PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH (NEAREST FOOT) 43 47

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)

ABOVE } LAND SURFACE (NEAREST FOOT)

BELOW } 2



CIRCLE APPROPRIATE BOXES

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 I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CAPTIONED "PERMIT TO DRILL WELL", AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

DRILLERS NAME L. F. Eusterday

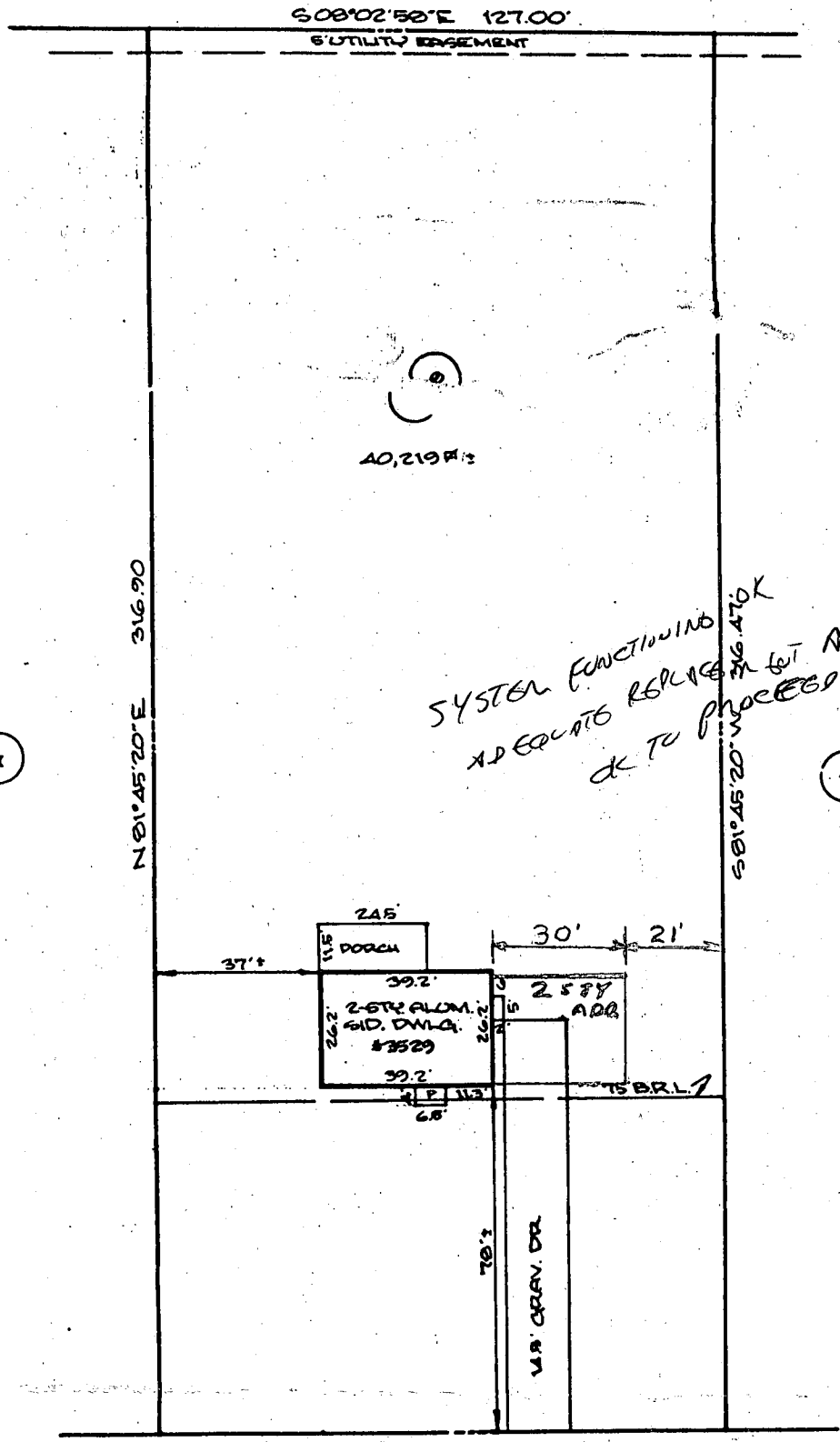
(PLEASE PRINT) L. F. Eusterday

SIGNATURE L. F. Eusterday

Property known as:
 3529 LAKEWAY DR.
 HOWARD COUNTY, MD.

LOT 8, BLK. 'A', SECT. 1
 "BENSON" PLAT BK. 18, FOL. 79
 3RD ELECTION DISTRICT

THIS PLAT CAN NOT BE USED TO ESTABLISH PROPERTY LINES OR CORNERS.



*SYSTEM FUNCTIONING
 ADEQUATE REPLACEMENT ALSO.
 OK TO PROCEED 8/10/87 CW*

7

7

CERTIFICATION	SEAL	SCALE: 1" = 40' DATE: 5/8/1979
<p>This is to certify that I have surveyed the property known as: _____ 3529 LAKEWAY DR.</p> <p>for the purpose of locating the improvements thereon, and the improvements are located as shown.</p>	<p><i>Axel F. Loen</i></p>	<p>AXEL F. LOEN</p> <p>PROFESSIONAL LAND SURVEYOR</p> <p>730 - 0967</p> <p>10754 FAULKNER RIDGE CIRCLE</p> <p>COLUMBIA, MD. 21044</p>