

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH
461-9933

03-304663

INDEXED

P 21880
REPAIR
A A23895

DISTRICT 3rd

DATE 4/4/88

DATE SYSTEM APPROVED 3-22-88

INSPECTOR S. Abu

Jack Fyock

IS PERMITTED TO INSTALL _____ ALTER X

ADDRESS _____ PHONE 988-9270

SUBDIVISION Wayside Estates ROAD 3620 Lynway Court LOT 5, Sec.3

PROPERTY OWNER Robert J. & Florence Marchetti
3620 Lynway Court

ADDRESS Ellicott City, Maryland 21043

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

GARBAGE GRINDER? YES _____ NO _____

SEPTIC TANK CAPACITY _____ GALLONS NUMBER OF BEDROOMS _____

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

126 x 6 = 753

63' TRENCH 10' DEEP 6' STONE

BLDG. PERMIT SIGNED
AND RETURNED 3/23/88
Serial #17092 -
1 story slab - 2000 gwp
attached

PLANS APPROVED BY C. Williams DATE 3/14/88

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.

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.

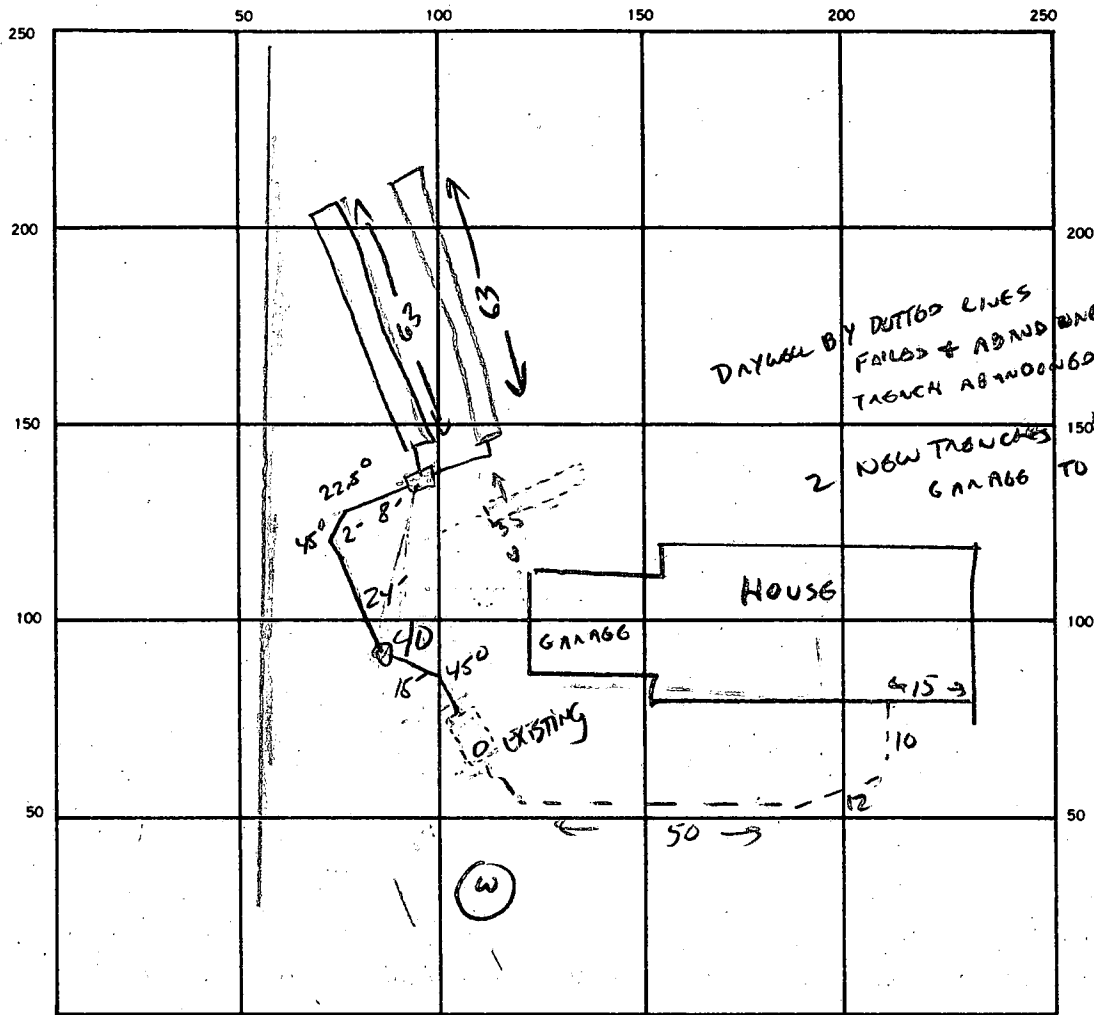
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES.

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

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1186

241880



INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.

SEPTIC TANK LEVEL EXISTING CLEANOUTS INLINE - EXISTING

DISTRIBUTION BOX LEVEL _____

DRAIN FIELD/TILE FIELD. DEPTH 10 FT. TRENCH WIDTH 2 FT. INLET DEPTH 4 FT.

EFFECTIVE GRAVEL DEPTH 6 FT. TOTAL LENGTH 126 FT.

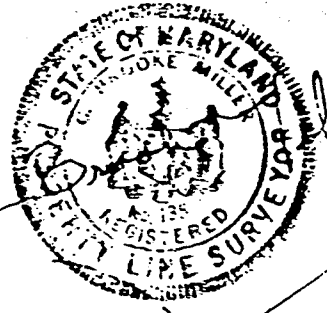
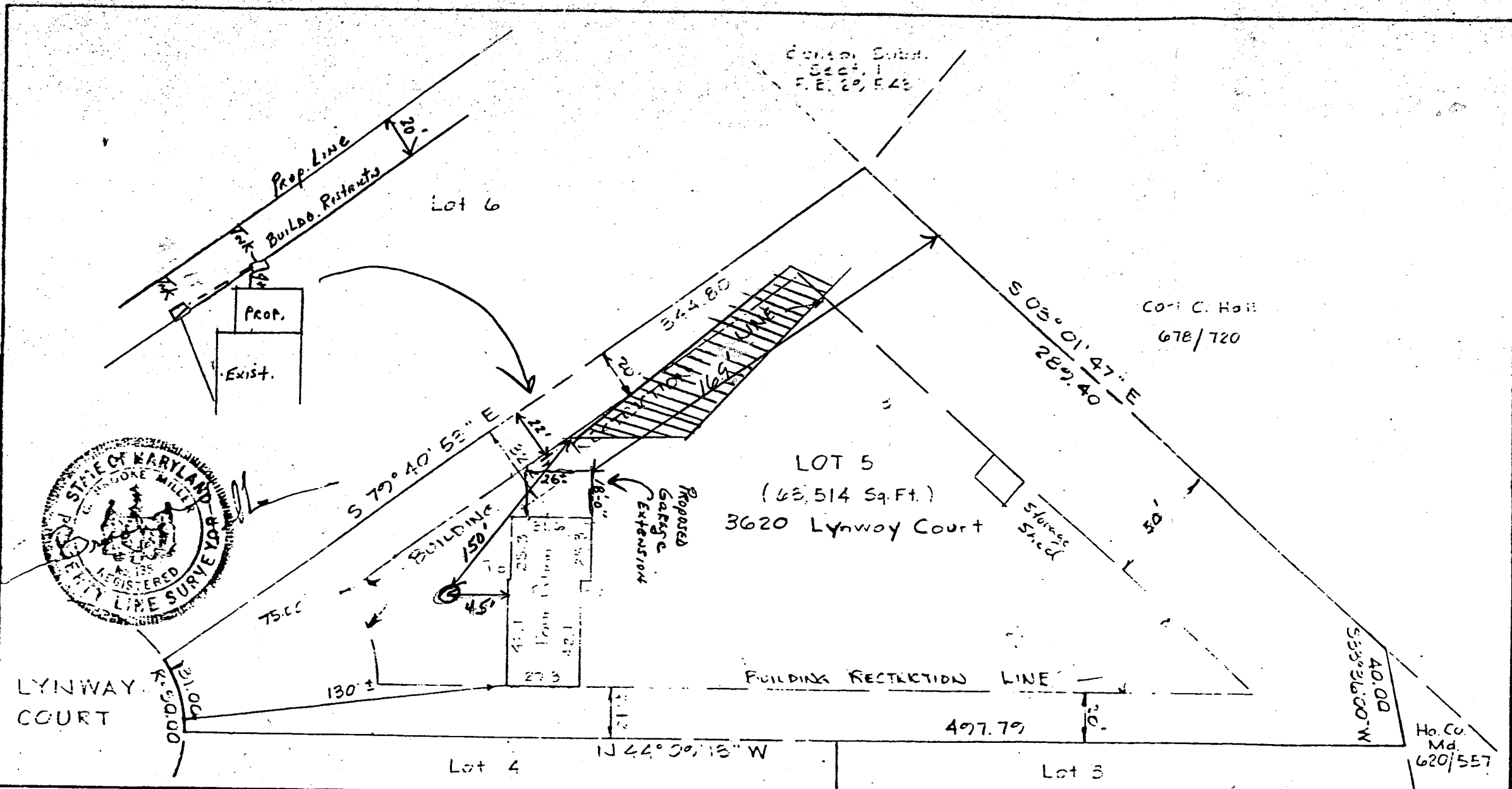
NUMBER OF TRENCHES 2 (63+63) ONE SIDEWALL/BOTTOM AREA 756 SQ. FT.

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

ABSORBENT AREA 756 SQ. FT.

REMARKS 2 TRENCHES OK TO ADD GRAVEL & COVER 3/21/87 CW.
MUST SEE DIST BOX CW.

DATE SYSTEM APPROVED S. Adel INSPECTOR 3/22/88

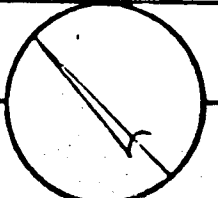


BRUNING 40-105 11334

This is to certify that I have surveyed the property known as Lot 5, Wayside Estates, Section 3, recorded on Plat CMP No. 3774 among the Land Records of Howard Co., Md. for the purpose of locating the improvements thereon.
FOOTINGS AND FOUNDATIONS ARE IN.

C. Eropke Miller No. 155

PROJECT No. 4419 W. O. No. 7040

REFERENCE		MERIDIAN
RICHARD P. BROWNE ASSOCIATES CONSULTING ENGINEERS, PLANNERS WAYNE, N.J. COLUMBIA, MD.		

MAP OF PROPERTY OF
Robert J. MARCHETTI

SITUATED IN
 Wayside Estates
 Section 3
 3rd Election District, Howard Co., Md.
 SCALE: 1" = 50' DATE: 9.3.80

DRAWN IMK CHECKED _____

SYSTEM TO BE INSTALLED FIRST
BEFORE BUILDING PERMIT CAN
BE SIGNED.

PERMIT

Approved: 12/2/80
Stephen Kuel P 30728

SEWAGE DISPOSAL SYSTEM

A 23895

MARYLAND STATE DEPARTMENT OF HEALTH

6/25/80
as if possible
12/2/80
house connection

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 3rd

INDEXED

DATE 6/12/80

Jack Fyock

IS PERMITTED TO INSTALL ALTER

ADDRESS 13775 Traadelphia Road, Glenelg, Md. 21737

PHONE 988-9270

SUBDIVISION Wayside Estates

ROAD Lynway Court

LOT 5, Sec. 3

PROPERTY OWNER Robert Marchetti

ADDRESS 703 Edmonston Drive, Rockville, Md. 20851

SPECIFICATIONS 4 bedrooms

SEPTIC TANK CAPACITY 1250 GALLONS

DRAIN FIELD DEPTH FEET, BOTTOM AREA SQ. FT.

DEEP TRENCH DEPTH FEET, BOTTOM AREA SQ. FT.

SEEPAGE PITS ABSORBENT SIDE-WALL AREA 120 SQ. FT. per bedroom

INLET PIPE 5 FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH 12 FT. BELOW ORIGINAL GRADE

EFFECTIVE DEPTH AT FT. BELOW ORIGINAL GRADE.

LOCATE DISPOSAL AREA 150 FT. FROM front LOT LINE AND 20 FT. FROM left LOT LINE AS SEEN WHEN FACING LOT FROM Lynway Court.

PLANS APPROVED BY Raymond Hodges

DATE 10/7/77

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 PLACING GRAVEL IN TRENCH.

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER.

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

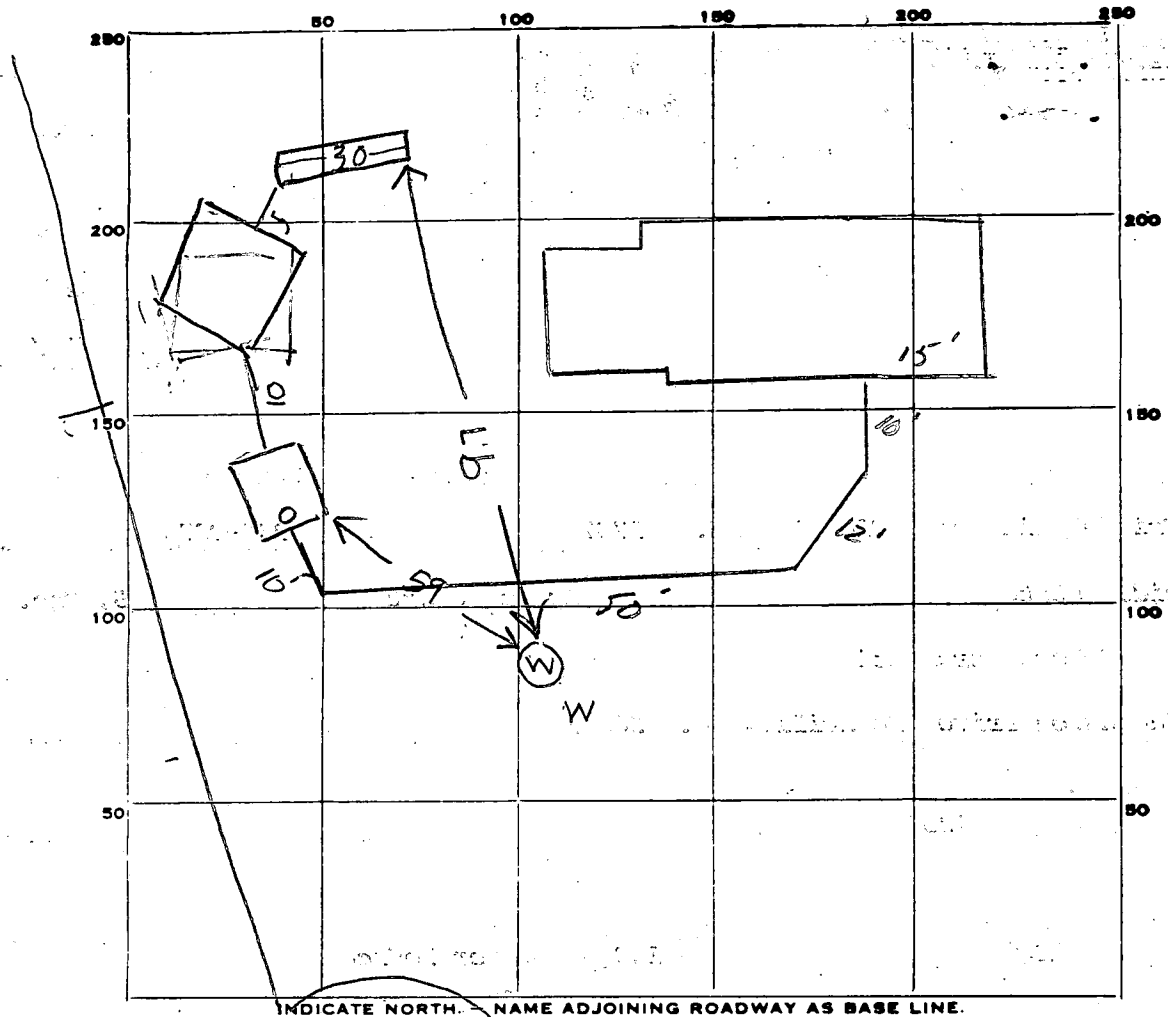
PERMIT VOID AFTER THREE YEARS.

NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA ACCEPTED.

BLDG. PERMIT SIGNED
AND RETURNED 7/23/80
Serial # 43766

A 23895

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



PERMIT CARD _____ ST DW

SEPTIC TANK, LEVEL OK 1500. TO 1/2 FT DEEP CLEANOUTS OK OK

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH 11 FT. TRENCH WIDTH 2 FT.

GRAVEL DEPTH 7 FT IN. TOTAL LENGTH 30 FT.

NUMBER OF TRENCHES 1 TOTAL ONE BOTTOM AREA 180 B

SEEPAGE PITS, INSIDE DIAMETER 44 FT. DEPTH BELOW INLET 7 1/2 FT.

ABSORBENT AREA 330 SQ. FT.

REMARKS 6/25/80¹¹⁶⁰ DW INLET 5 FT DEEP BELOW O.G.
DITCH INLET 4 FT DEEP BELOW O.G. OK TO COVER
TANK & DW ADD STONE & PIPE TO DITCH RH
6/25/80 1130 - STONE & PIPE ADDED 7 FT OF STONE,
6 FT OF STONE BELOW TOP 5 FT OF CLAY. CALL
FOR INSPECTION OF HOUSE CONNECTION, RH. OR Town all work

DATE SYSTEM APPROVED 12/2/80 INSPECTOR Stephen Hill

APPLICATION

A 23895

SEWAGE DISPOSAL TESTING

P _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DISTRICT Third

DATE 9/9/76

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 S. Elwood Anderson
12,799 Triadelphia Road
ADDRESS Howard County, Maryland PHONE Boender - 465-7777
Any questions call:

PROPERTY LOCATION:
SUBDIVISION Wayside Estates LOT NO. 5, Section 3

ROAD AND DESCRIPTION Scheel Ct. *Lynnway Court*

SIZE OF LOT 50,000 sp. ft. TYPE BLDG. 3 or 4 bedroom
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ G. Albert Scheel, Jr.

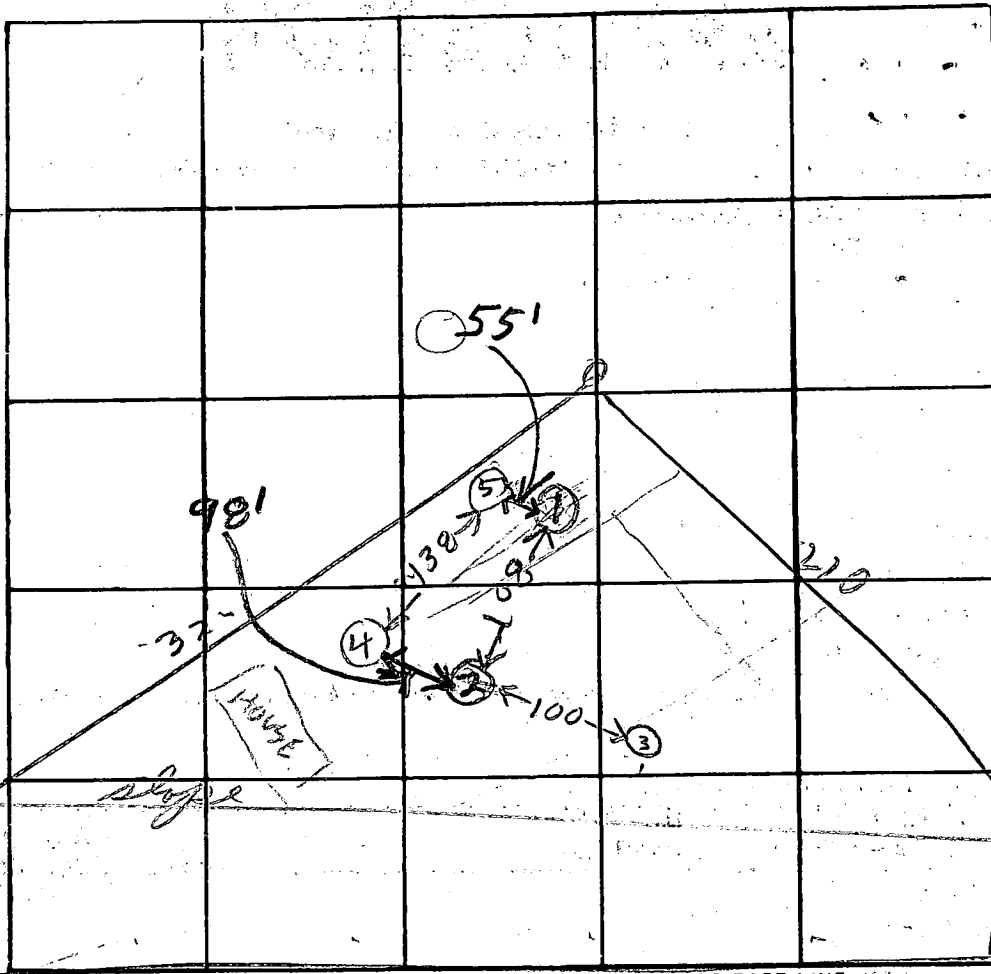
APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

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.

Scale
1" = 100'

SCHOOL
C7

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	HOLE ELEVATIONS	
			START	STOP	START	STOP			
9/21/76	1D	13	346	347	347	349	9	LOW	
	2D	13½	355	410	410	429	19		
	2S	4½	354	356	356	358	2	LOW	
	1S	5	402	406	406	420	14		
	3V	11½	TOP 5 FT CLAY SANDY WATER 1 FT				BOTTOM CL SANDY		LOWEST
	4D	14	1140	1143	1143	1150	7	HIGH USB FORK	
	4S	5½	1141	1146	1146	1150	4		
	5V	13	TOP 4 FT CLAY BOT 9 FT SAND DRY						NEXT HIGHEST

REMARKS Max Depth 5 ft Air Time 9 min

TYPE OF SOIL _____

TESTED BY B. Hodges

ALSO PRESENT: SCHOOL SAUNDER Lot 5

B 1 7845 SEQUENCE NO. (WRA USE ONLY)

1 2 3 (SEQ. NO.) 6
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

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

WRA PERMIT NUMBER
110-73-3513
FILL IN THIS FORM COMPLETELY

DATE RECEIVED (WRA USE ONLY)
3/20/80
9:30 AM

OWNER MARCHETTI, ROBERT
 COL 15 LAST NAME COL 16 FIRST NAME COL. 34

STREET OR RFD 703 EDWINSTON DRIVE
 COL 36 COL. 55

POST OFFICE ROCKVILLE, MD. 20857
 COL 57 COL. 76

B 1 CONTINUED **DRILLER INFORMATION**

1 2 3 (SEQ. NO.) 6

DATE 2/15/80 **LICENSE NUMBER** 040
 77 80

FIRST NAME George F. Eastman **DRILLER** Eastman **LAST NAME**

SIGNATURE George F. Eastman

B 3 **LOCATION OF WELL**

1 2 3 (SEQ. NO.) 6

COUNTY HOWARD (DO NOT ABBREVIATE COUNTY NAME) 21

SUBDIVISION WAYSIDE EST. 23 42

SECTION 44 **LOT** 5 48 50

NEAREST TOWN WINDY 52 71

MILES FROM TOWN (ENTER 0 IF IN TOWN) 2 M I 76 77 78

B 2 **WELL INFORMATION**

1 2 3 (SEQ. NO.) 6

MAXIMUM PUMPING RATE (GALLONS PER MINUTE) 5 8 12

AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) 600 14 20

B 4 **DIRECTION FROM TOWN**
(CIRCLE APPROPRIATE BOX)

N NORTH E EAST NE NORTHEAST SE SOUTHEAST

S SOUTH W WEST NW NORTHWEST SW SOUTHWEST

NEAR WHAT ROAD 7. Independence Ave. 8 9

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) N S E W 32 32 32 32

DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) 300 34 37 38 39

USE FOR WATER (CIRCLE APPROPRIATE BOX)

D 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 150 FEET
 24 28

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

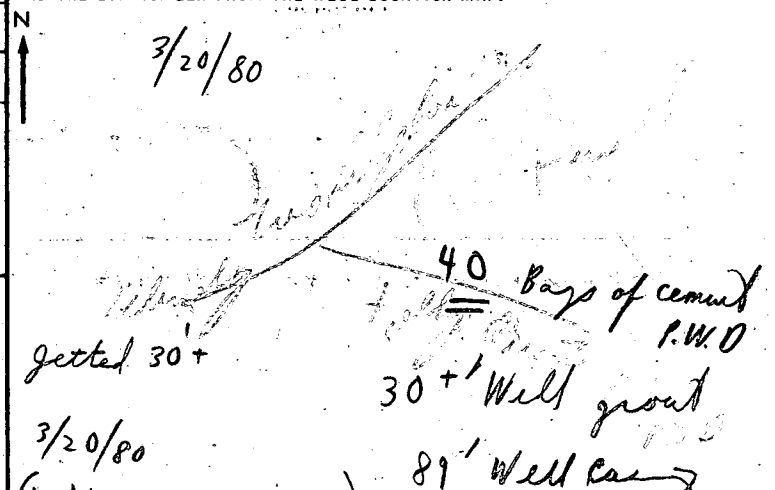
S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY

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 (WRA USE ONLY)

APPROPRIATION PERMIT NUMBER 54 **ENGINEER REVIEW DISTRICT NO.** 65

FORCE 67 **WRITE INITIALS IN BOX** W **CONDITIONS** 70 71 72 73 74 75 76 77 78 79



B 4 CONTINUED **HEALTH DEPARTMENT APPROVAL**

1 2 3 (SEQ. NO.) 6

STATE HEALTH (CIRCLE BOX) S **COUNTY NAME** Howard **COUNTY NO.** 22205

DATE 022180 **APPROVED BY** Donald W. Monaghan, Sanitarian

BOX NUMBER 910

NORTH COORDINATE 50 51 52 53 54 55

EAST COORDINATE 57 58 59 60 61 62 63

ELEVATION AT WELL HEAD (FEET) 0/0 65 66 67 68 0/0 8/0

B 5 **SPECIAL CONDITIONS 8-63 (WRA USE ONLY)**

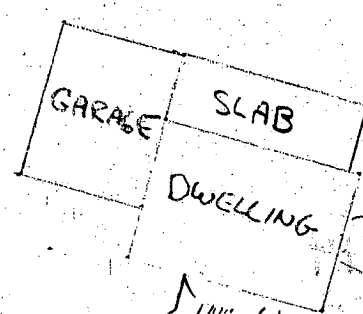
1 2 3 (SEQ. NO.) 6

LOT 5
WAYSIDE ESTATES

DRYWELL
GRADE +8.2'
GRADE +8.2'
GRADE +4.0'
+3.2'

TANK
FINISH GRADE 9.5'
INV. GRADE 5.0'

6-12-80
elevation
& location
OK
DMM



BASMENT GRADE "0"

FIRST FLOOR +9.0
INV. ELEV 6.0'

WELL (EXISTING) +12'

21' TRENCH

<20'

55' ±

INV. 6'

35'

150'

100'

140'

LYNWAY CT.

62