

4/14/97
8/18/97
ASAP HSC Conn + WPI
(as late as possible)

Tax ID-03-315592

House connection needed

PERMIT

8/18/97 house Conn KM
P 58060

SEWAGE DISPOSAL SYSTEM

A 42201

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT _____

INDEXED

DATE 4/1/97

HOWARD COUNTY HEALTH DEPARTMENT

DATE SYSTEM APPROVED 8-8-97

BUREAU OF ENVIRONMENTAL HEALTH

INSPECTOR KM

313-2640

Olen Ketterman IS PERMITTED TO INSTALL X ALTER _____

ADDRESS 14960 Route 144 Woodbine, MD 21797 PHONE 465-6878

SUBDIVISION Second Discovery LOT 11 ROAD 12737 Maryvale Court

PROPERTY OWNER Selfridge Builders (Dennis Bamber)

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS **TOP SEAMED**

NUMBER OF BEDROOMS 4 (APPROVED FOR 5TH BEDROOM 7/2/97)

180 SQUARE FEET PER BEDROOM (BASED ON INSTALLED 1500 G TANK)

LINEAR FEET OF TRENCH REQUIRED 240 (WITHOUT ADDITIONAL TRENCH CAPACITY) EW

TRENCHES - Trench to be 3 feet wide. Inlet 2 feet below original grade. Bottom maximum depth 4 feet below original grade. Effective area begins at 2 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Place the distribution box 310 feet from the front lot line and 45 feet from the left lot line. Run first two trenches to the left, then run trenches in both directions, as shown on BP plan.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OR 3/25/97 DKS

PLANS APPROVED BY Donna K. Soe REVISED DATE 03/25/97

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**

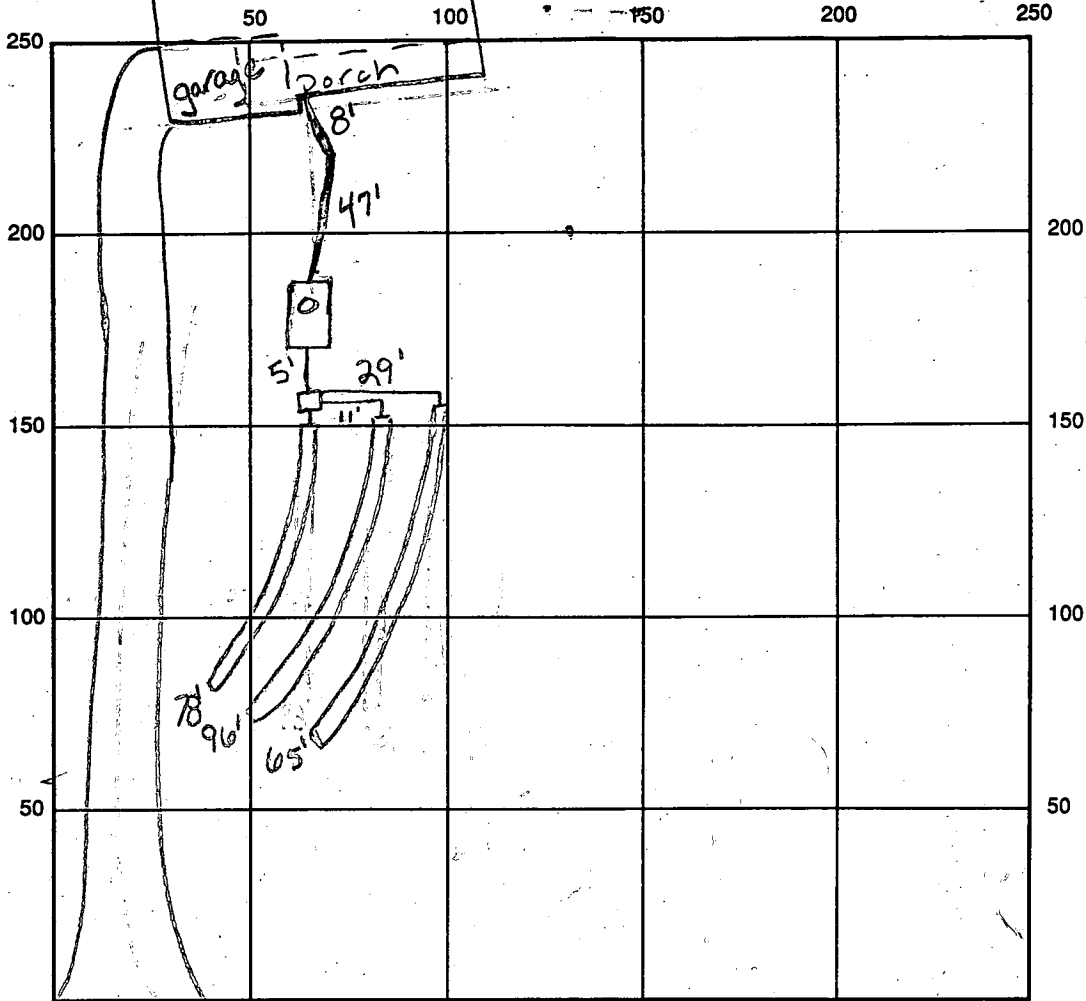
HD-260(6-90)

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

BLIND PERMIT Slit. AND RETURNED 8-21-97
Serial # B 1010 7568
check

119201

H0-88-1169 (W) ← 40 →



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE *Maryvale Court*

SEPTIC TANK LEVEL OK, 1500 gallons (top seamed) CLEANOUTS 1 on tank

DISTRIBUTION BOX LEVEL OK, baffle in

DRAIN FIELD/TITLE DEPTH 4 FT. TRENCH WIDTH 3 FT. INLET DEPTH 2 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH $\begin{matrix} 1 \times 96 \\ 1 \times 66 \\ 1 \times 78 \end{matrix}$ FT. → 240

NUMBER OF TRENCHES 3 ONE SIDEWALL BOTTOM AREA 900 SQ. FT.

DRYWALL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA SQ. FT.

REMARKS: 4-14-97/km ok to cover 1st trench, leave ends of 2nd trench open (km)

4-14-97/noon ok to continue km

8/8/97 has house connection, ok to cover all work (km)

WPI ok to cover well line, P.A. 3.0' below grade, casing 1.5' above grade, needs 2 piece cap (km)

DATE SYSTEM APPROVED 8/8/97

INSPECTOR Kim Maister

APPLICATION

PERCOLATION TESTING

A 42201

P _____

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

DISTRICT Third

DATE Feb. 26, 1988

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 William W. Aitcheson - Selfridge Builders

ADDRESS 12706 Folly Quarter Rd. Clarksville, Md. 21029 PHONE 301 596 9208

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Aitcheson Property "Second Discovery" LOT NO. 11

ROAD AND DESCRIPTION End of Court 'A' (12737 Maryvale Court)

Owner occupies a house on this Lot since 1975

BLDG. PERMIT SIGNED

AND RETURNED 4/5/87

Serial # B1010 4465
SFD-4 Bedford

TAX MAP 22B1k 23 PARCEL # 45

SIZE OF LOT 4.18 acres TYPE BLDG Single Family Dwg

(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. W^u W. Aitcheson

(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

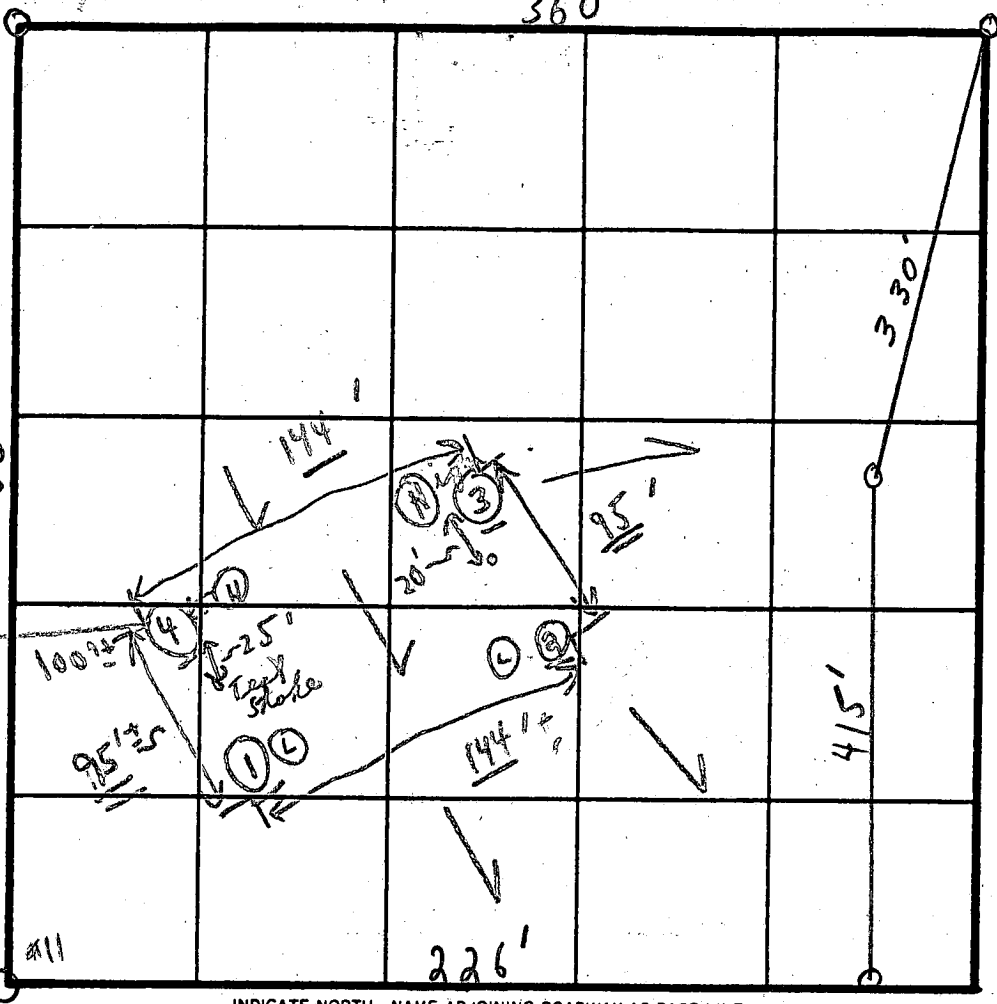
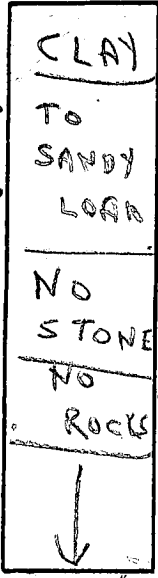
HD-216

THIS IS NOT A PERMIT

42201

360°

SOIL PROFILE



INLET 2 1/2
BOTTOM 4
X 3 MIN
180
CU

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

COURT "A"

SOIL PROFILE	DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
				START	STOP	START	STOP	
1" See above	8/4/88	1A	3 1/2'	10:29	10:31	10:31	10:33	2 in
	3rd L2	(L) 1B	11'	:	L:00	3 1/2' - 11'	:	
1" Sand		2A	3'	10:35	10:36	10:36	10:38	2 min
[Sandstone 3 1/2' to 5'		(A) 2B	12 1/2'	10:	Visual	Sandy loam	to bottom	
1" 2" Toy Sand		3A	2'	10:43	10:44	10:44	10:46	2
2' Sand & sand stone 9 1/2'		(H) 3B	5 1/2'	10:48	10:50	10:50	10:54	4 in
1" See above		4A	'	:	all sandy loam	high		
		(H) 4B	12'	:	Visual	similar to (1)		
			'	:				
			'	:				

Some sandstone

Some Sandstone

REMARKS

Shallow system in (3) need as higher

TYPE OF SOIL

Hole 3 Falls - EXCESS ROCK SEE NEXT SHEET FOR HOLES 5+6 Cwells

TESTED BY

C. B. D.

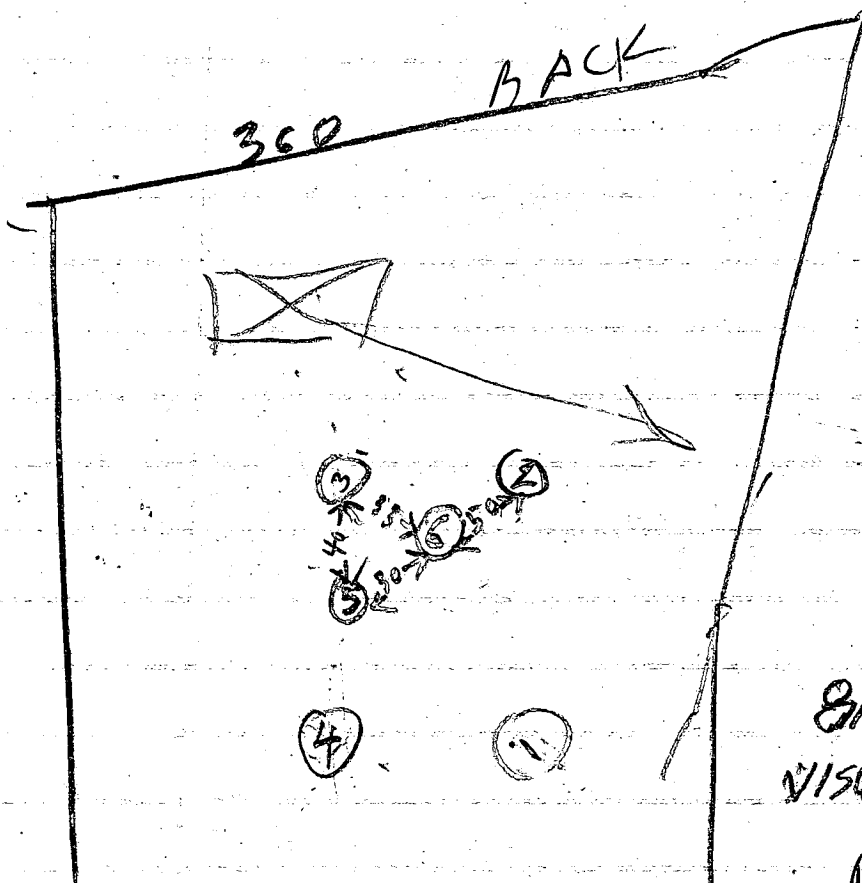
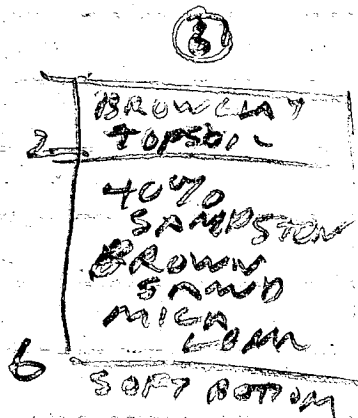
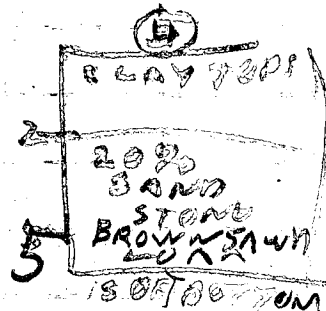
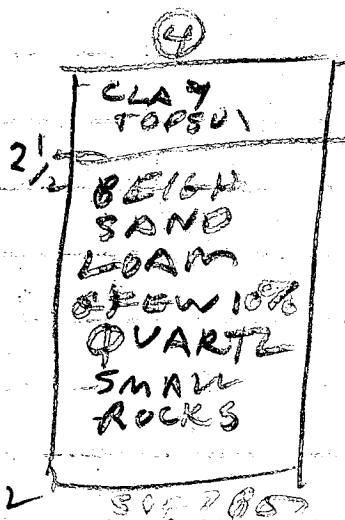
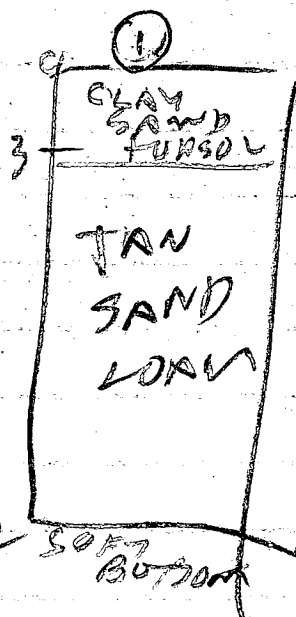
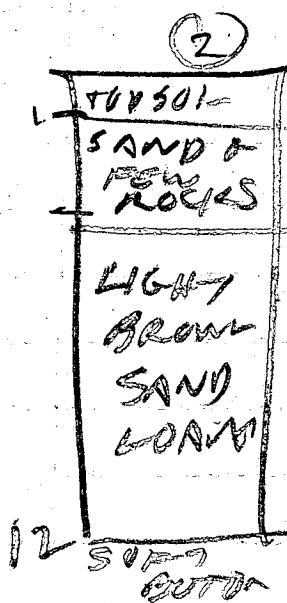
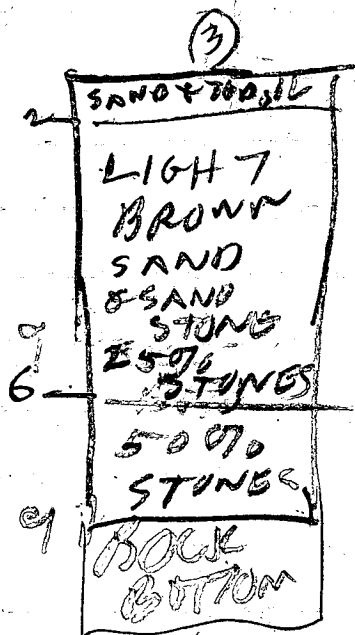
ALSO PRESENT

2 of Fyochs men

1 owner

A42201

ROCK HOLES ON LOT 11 SECOND DISCOVERY



8/5/88
VISUAL HOLES
RAY HODGES

APPLICATION

PERCOLATION TESTING

A _____

P _____

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

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 _____

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Aitcheson Property LOT NO. 11

ROAD AND DESCRIPTION Folly Quarter Rd (12070?)

TAX MAP _____ PARCEL # _____

SIZE OF LOT _____ TYPE BLDG _____
(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.

(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 8-5-88 Relocate hole away from 2nd

highest (#1) to get away from localized sandstone. JEN

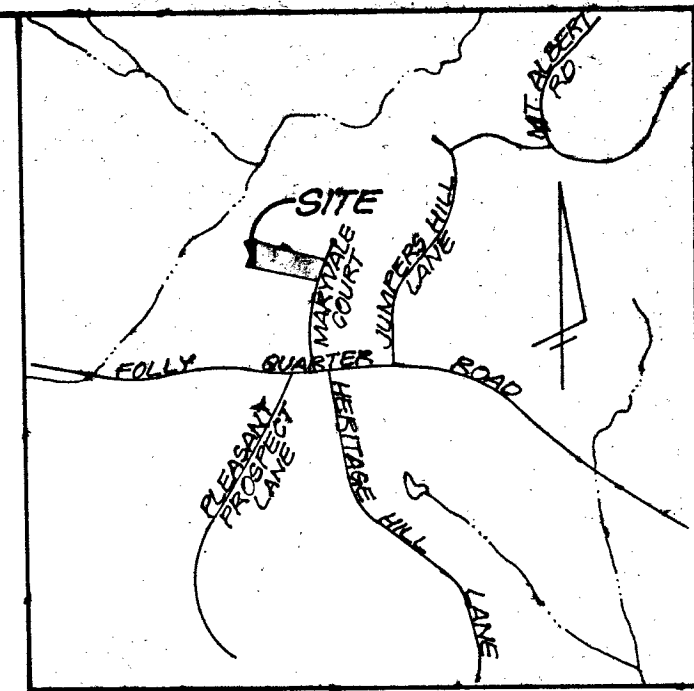
HD-216

THIS IS NOT A PERMIT

162
240

LEGEND

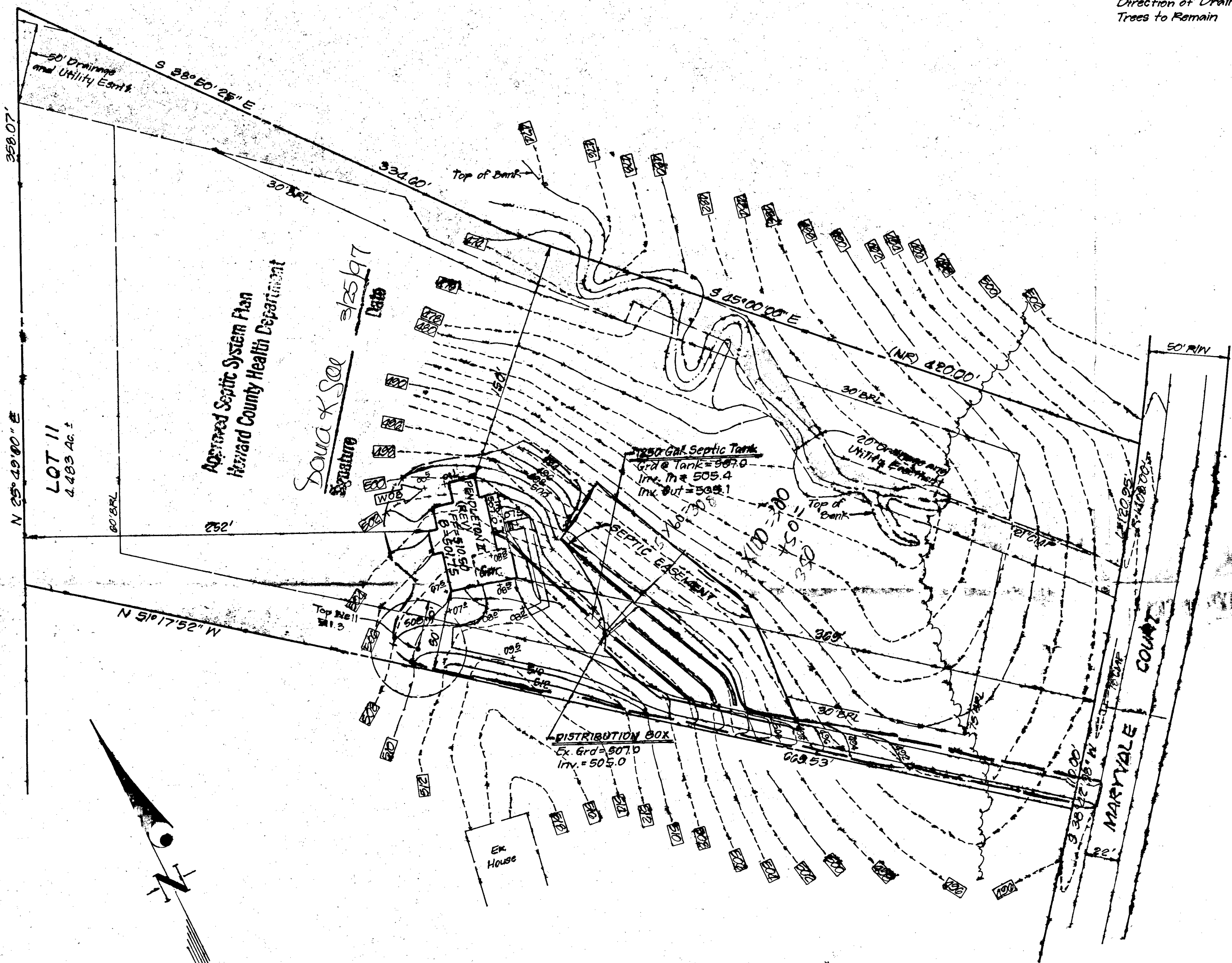
- Contour Interval 2ft.
- Existing Contour 2ft.
- Proposed Contour 10ft.
- Spot Elevation +922
- Direction of Drainage
- Trees to Remain



VICINITY MAP
1" = 2000'

GENERAL NOTES

1. Existing Topography was field run by Clark, Finerock & Sackett on 12-21-97.
2. Reference Plat No. 9143
3. Length of Trenches to be determined at time of Permit Issuance.
4. Total Area Disturbed: 20,250 sq ft



* APPROVED BP PLAN

CLARK • FINEROCK & SACKETT, INC. ENGINEERS • PLANNERS • SURVEYORS <small>7135 MINSTREL WAY • COLUMBIA MD 21045 • (410) 381-7500 • BALTO • (301) 621-8100 - WASH</small>		
DESIGNED <i>th</i>	SITE DEVELOPMENT PLAN LOT 11 SECOND DISCOVERY TAX MAP 22 P/O PARCELS 44 & 45 THIRD ELECTION DISTRICT HOWARD COUNTY, MARYLAND	SCALE 1" = 50'
DRAWN <i>PS</i>		DRAWING 10/1
CHECKED <i>th</i>		JOB NO. 07-04B
DATE 3-17-97	For: JAMES H. SELFRIDGE BUILDERS, Inc. 14045 Gared Drive Glenwood, Md. 21738	FILE NO. 97-04B

B 1 6372 SEQUENCE NO. (DP USE ONLY)
1 2 3 4 5 6
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

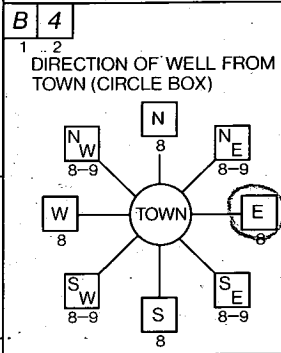
STATE OF MARYLAND
PERMIT TO DRILL WELL
please print or type

STATE PERMIT NUMBER
HO-88-1169
70 fill in this form completely 79

Date Received (APA) 122889
OWNER INFORMATION
SEC DIS LTD PARTNER
8307 MAIN STREET
ELLICOTT CITY MD 21043

B 3 LOCATION OF WELL
1 2 HOWARD
8 COUNTY 21
3 SECOND DISCOVERY
23 SUBDIVISION 42
SECTION 44 46 LOT 48 50
4 GLENFIELD
52 NEAREST TOWN 71
MILES FROM TOWN (enter 0 if in town) 1 M I
73 76 77 78

DRILLER INFORMATION
FRANK DELPH 453
Driller's Name 77 License No. 80
FRANK DELPH WELL DRILLERS INC
Firm Name
18334 PENN SHOP RD MT AIRY MD
Address
Signature Date 12/19/89



B 4 MARYLOUE COURT
11 NEAR WHAT ROAD 30
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) WEST EAST
34 400 37
DISTANCE FROM ROAD
ENTER FT or MI ET
38 39

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

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)

Howard COUNTY NAME
A42201 COUNTY NO.
STATE SIGNATURE DATE ISSUED INSERT S
012590 Mark E. R. R. Kin 7/25/90
43 48 CO SIGNATURE EXP. DATE
NORTH GRID 520000 EAST GRID 0813000
50 55 57 63

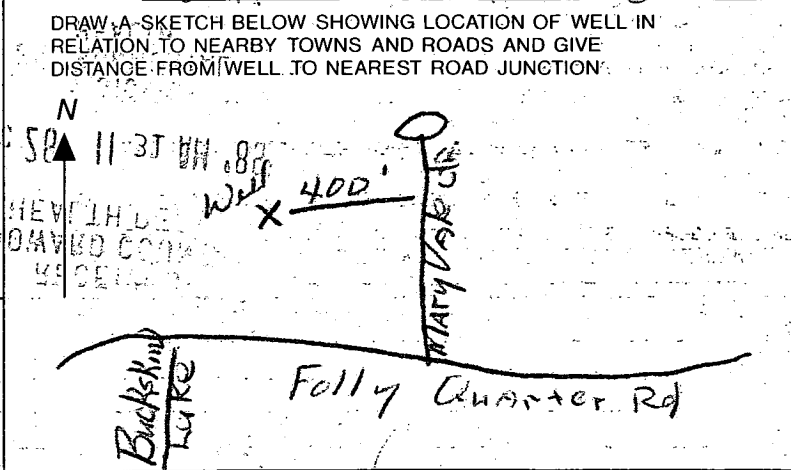
APPROXIMATE DEPTH OF WELL 200 FEET

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
E 813
N 520
21' CASING MR
19' OPEN 2/15/90
6 BAGS
1' CASING A.C.
GROUT NOT OBS'D
WELL TAG OK

APPROXIMATE DIAMETER OF WELL 10 INCH

METHOD OF DRILLING (circle one)
BORED (or Augered) JETTED Jetted & DRIVEN
30 AIR-ROtary AIR-PERcussion ROTARY (Hydraulic Rotary)
37 CABLE REVERSE-ROtary Drive-POINT
other

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
39 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) 41 52



Not to be filled in by driller (OEP USE ONLY)
APPROP. PERMIT NUMBER GAP
FORCE MR PERMIT No. HO-88-1169
67 68 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS

C1 **1311** SEQUENCE NO. (DENV USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
WELL COMPLETION REPORT
 FILL IN THIS FORM COMPLETELY
 PLEASE PRINT OR TYPE

THIS REPORT MUST BE SUBMITTED WITHIN
 45 DAYS AFTER WELL IS COMPLETED.
 COUNTY NUMBER **A42201**

ST/CO. USE ONLY
 DATE RECEIVED

DATE WELL COMPLETED.
4 12 29 0

Depth of Well
22 325 26
 (TO NEAREST FOOT)

PERMIT NO.
 FROM "PERMIT TO DRILL WELL"
40-80-1169

OWNER **SECOND DISCOVERY LTD PARTNERSHIP**
 STREET OR RFD. **Marquale Ct** TOWN **Greenleaf**
 SUBDIVISION **SECOND DISCOVERY I** SECTION **LOT 110**

WELL LOG
 Not required for driven wells

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

DESCRIPTION (Use additional sheets if needed)	FEET		Check if water bearing
	FROM	TO	
Top Soil	0	2	
Shale	2	10	
Mika	10	30	
Sandstone	30	35	✓
Mika	35	290	
Sandstone	290	295	✓
Mika	295	325	

GROUTING RECORD
 WELL HAS BEEN GROUTED YES NO
 (Circle Appropriate Box)
 TYPE OF GROUTING MATERIAL
 CEMENT CM BC
 BENTONITE CLAY
 NO. OF BAGS **6** NO. OF POUNDS **600**
 GALLONS OF WATER **36**
 DEPTH OF GROUT SEAL (to nearest foot)
 from **1** ft. to **7** ft.
 (enter 0 if from surface)

CASING RECORD
 casing types insert appropriate code below
 ST STEEL CO CONCRETE
 PL PLASTIC OT OTHER
 MAIN CASING TYPE F1
 Nominal diameter top (main) casing (nearest inch) **1**
 Total depth of main casing (nearest foot) **7**

OTHER CASING (if used)
 diameter inch **1** depth (feet) from **7** to **7**

SCREEN RECORD
 screen type or open hole insert appropriate code below
 ST STEEL BR BRASS HO OPEN HOLE
 PL PLASTIC OT OTHER

C2

EACH SCREEN	DEPTH (nearest ft.)	
	1	2
1	1	7
2		
3		

CIRCLE APPROPRIATE LETTER
A 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 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. **453**
 DRILLERS SIGNATURE *[Signature]*
 (MUST MATCH SIGNATURE ON APPLICATION)

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

SLOT SIZE 1 **2** 3
 DIAMETER OF SCREEN **1** (NEAREST INCH)
 from **7** to **7**

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.) **70** **72** **74** **75** **76**
 W Q
 TELESCOPE CASING LOG INDICATOR OTHER DATA

C3

PUMPING TEST
 HOURS PUMPED (nearest hour) **3**
 PUMPING RATE (gal. per min. to nearest gal.) **4**
 METHOD USED TO MEASURE PUMPING RATE **Bucket**
 WATER LEVEL (distance from land surface) BEFORE PUMPING **25** WHEN PUMPING **25**
 TYPE OF PUMP USED (for test)
 A air P piston T turbine
 C centrifugal R rotary O other (describe below)
 J jet S submersible

PUMP INSTALLED
 DRILLER WILL INSTALL PUMP YES 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: **29**
 CAPACITY: GALLONS PER MINUTE (to nearest gallon) **31** **35**
 PUMP HORSE POWER **37** **41**
 PUMP COLUMN LENGTH (nearest ft.) **43** **47**
 CASING HEIGHT (circle appropriate box and enter casing height) **49** above } LAND SURFACE **1** (nearest foot) below }

