

7/12/99
Aspp -
Layout
11/20
7/13/99
11:00

PERMIT ^{TAX#} 05365848

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 511945

A 44426

DISTRICT _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXX~~ 410-313-2640

DATE 6-11-99

DATE SYSTEM APPROVED 9/1/99

INSPECTOR M. Ritkin

INDEXED

Jack Fyock Septic Service IS PERMITTED TO INSTALL ALTER

ADDRESS P.O. Box 89, Triadelphia Road, Glenelg, Maryland 21737 PHONE 410-988-9270

SUBDIVISION Hopkins Meade LOT 3 ROAD 11613 Johns Hopkins Road

PROPERTY OWNER John Propts → 301-688-2304

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

*****CONTRACTOR TO REQUEST LAYOUT INSPECTION PRIOR TO BEGINNING TRENCH EXCAVATION.*****

NUMBER OF BEDROOMS 4

210 180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 280 180

TRENCHES - Trench to be 3 feet wide. Inlet 2.5 feet below original grade. Bottom maximum depth 6.5 feet below original grade. Effective area begins at 3 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Place distribution box 100 feet from neighboring well, approximately 135 feet up right lot line and 35 feet off that lot line. 6/10/99 OK AM

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

PLANS APPROVED BY C. Williams DATE 5-20-1999

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

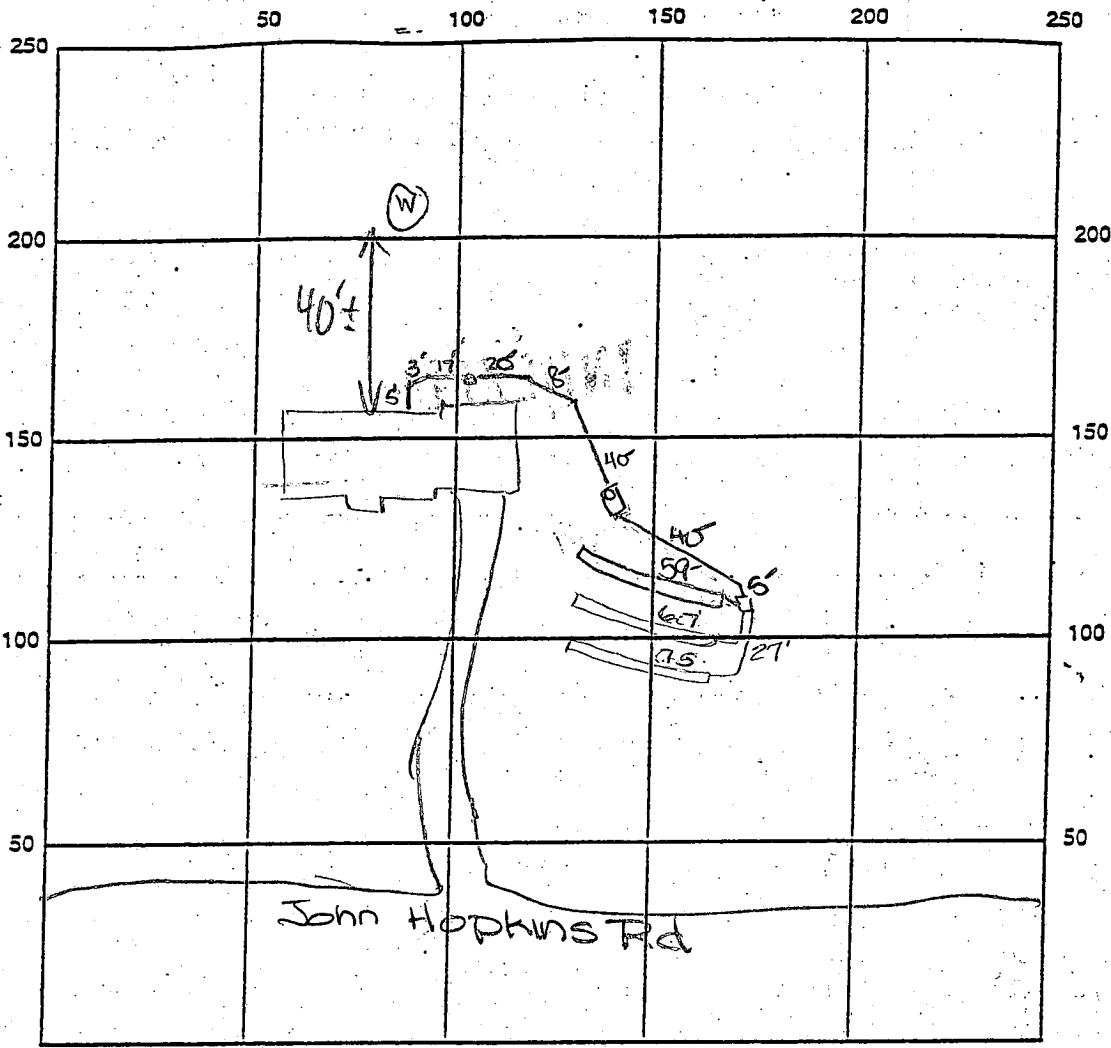
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON, CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

***CALL 451-9933 FOR INSPECTION OF SEPTIC SYSTEM.**

44426



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

Johns Hopkins Road

SEPTIC TANK LEVEL OK CLEANOUTS one on s.t.

DISTRIBUTION BOX LEVEL OK

DRAIN FIELD/TITLE DEPTH 6.5 FT. TRENCH WIDTH 2 FT. INLET DEPTH 2.5 FT.

EFFECTIVE GRAVEL DEPTH 4 FT. TOTAL LENGTH $\textcircled{159} \textcircled{75} = 201$ FT. $\frac{179}{4} = 201$

NUMBER OF TRENCHES 3 ONE SIDEWALL BOTTOM AREA 804 SQ. FT. $\frac{201}{4} = 804$

DRYWALL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA SQ. FT.

REMARKS: 7/12/99 A.M. OK to begin installation as specified
7/12/99 P.M. OK to cover from 2' off house to dist box $\textcircled{20}$
and first trench. Needs house connection. NO
7/13/99 OK to cover work needs hse connection
9/1/99 HOUSE CONN OK \textcircled{MR}

DATE SYSTEM APPROVED 9/1/99 INSPECTOR M. Ritkin

APPLICATION

PERCOLATION TESTING

A 44426
P _____

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

DISTRICT 5th
DATE May 22, 1989

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 Propts

PROPERTY OWNER Edith B. Schmincke (wife of Rodger A. Schmincke, Sr. [deceased])

ADDRESS 7323 Pindell School Road, Clarksville, MD. 21029 PHONE (301) 725-5944

PROSPECTIVE BUYER Unknown

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Hopkins Meade LOT NO. 3

ROAD AND DESCRIPTION 11613 Johns Hopkins Road

BLDG. PERMIT SIGNED
AND RETURNED 4-23-89
Serial # B0117079

TAX MAP 41 PARCEL # 195

SIZE OF LOT 1 acre TYPE BLDG. Single family dwelling - 4 Bm
(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. Edith B. Schmincke
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 6/20/89 Perc OK Hold for CONTINUED PLAT, R.H.

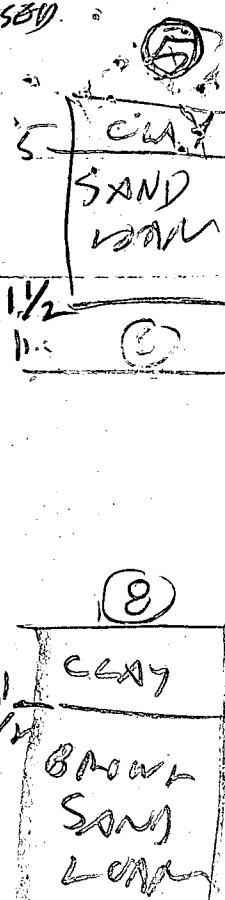
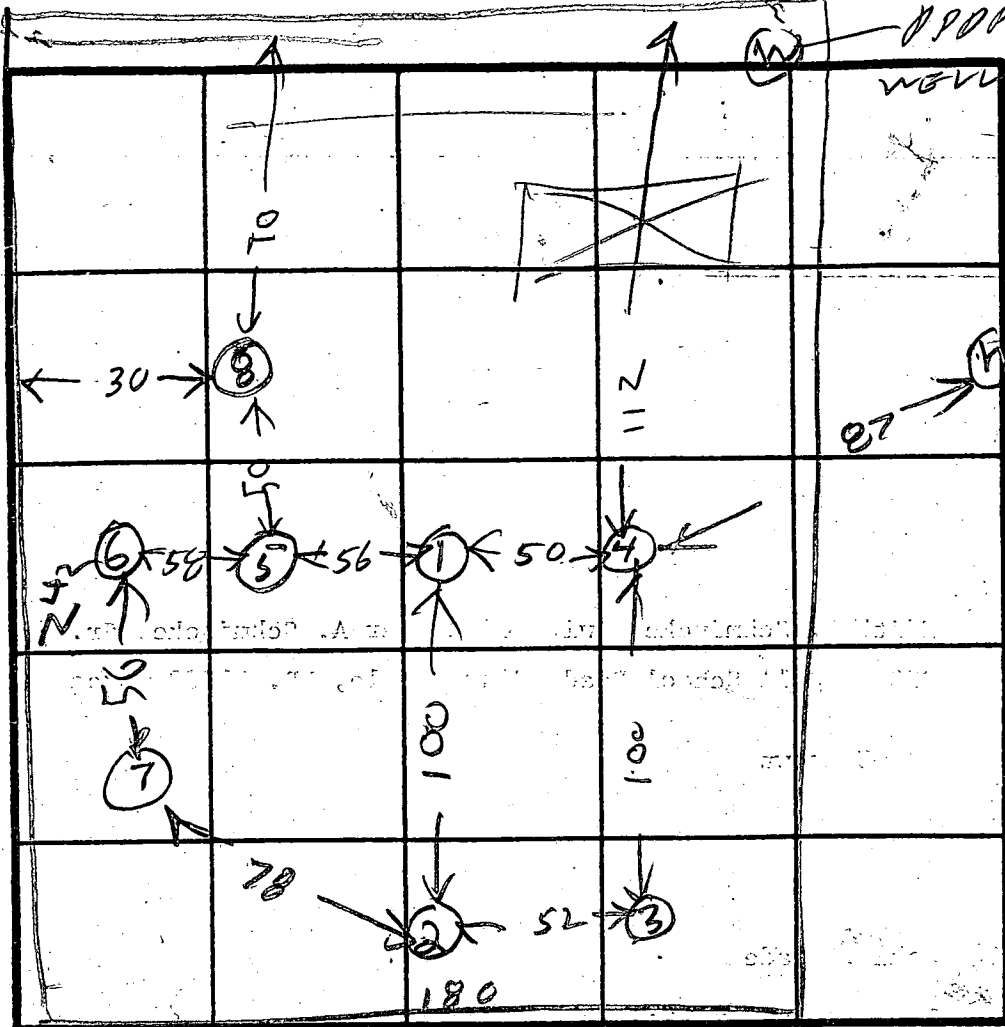
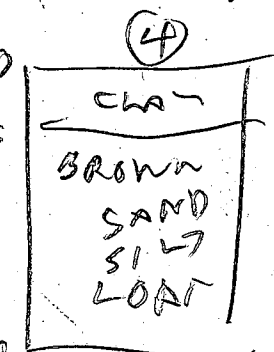
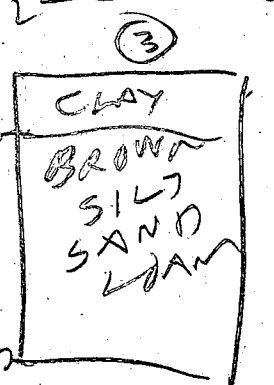
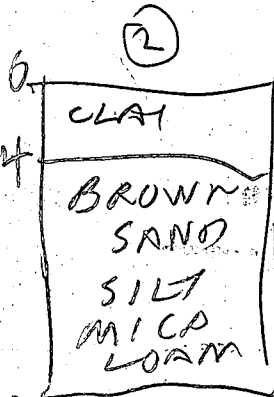
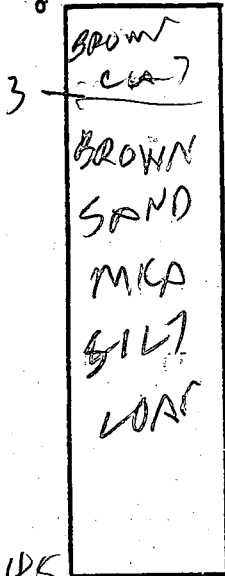
BLDG. PERMIT SIGNED
AND RETURNED 6/20/89
[Signature]

HD-216

THIS IS NOT A PERMIT

LOT 3
HOPKINS MGADE
J.H.R.D.

SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

JOHNS HOPKINS ROAD

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
6/19/89	1S	4.5	1125	1128	1126	1128	2
	1D	7.5	1225	1127	1127	1132	4
	1V	14.5	OK				
	2S	4.5	1127	1134	1139		
	2V	12					
	3S	3.5	1139	1141	1141	1145	4
	3V	13					
	4S	8	1206	1210	1210	1215	5
	4V	13	OK				
	5V	11.5	OK				
	6V	11	TOP 5 FT CLAY WATER		1257		FAIL
	7V	13	TOP 5 FT CLAY WATER		1257		FAIL
6/19/89	8V	14 1/2	OK				

REMARKS _____

TYPE OF SOIL _____

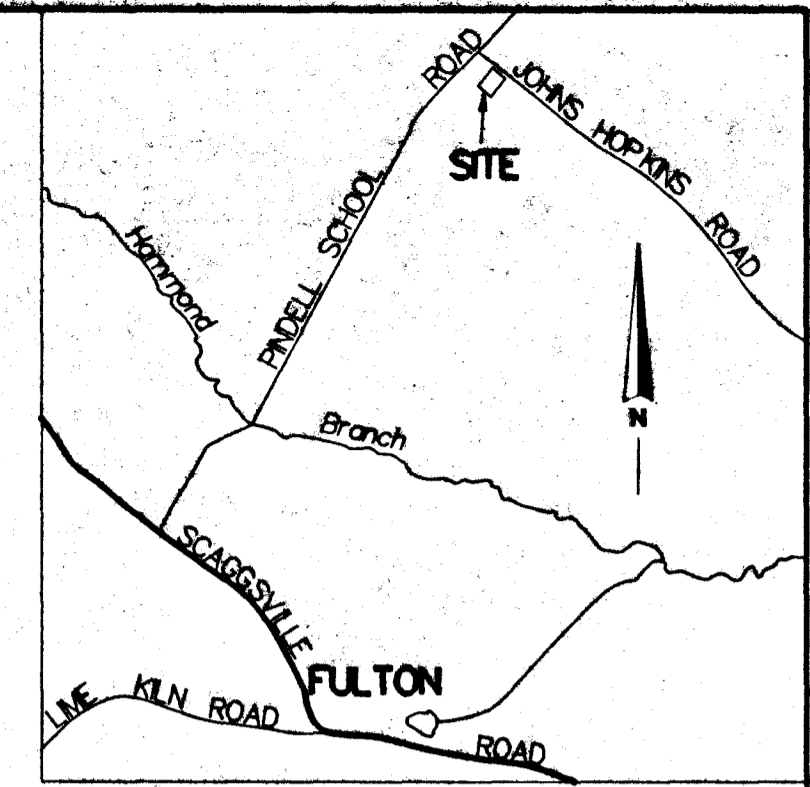
TESTED BY R HODGGS ALSO PRESENT J. BRITTINGHAM

Approved Septic System Plan
 Howard County Health Department
 B00117074-48R

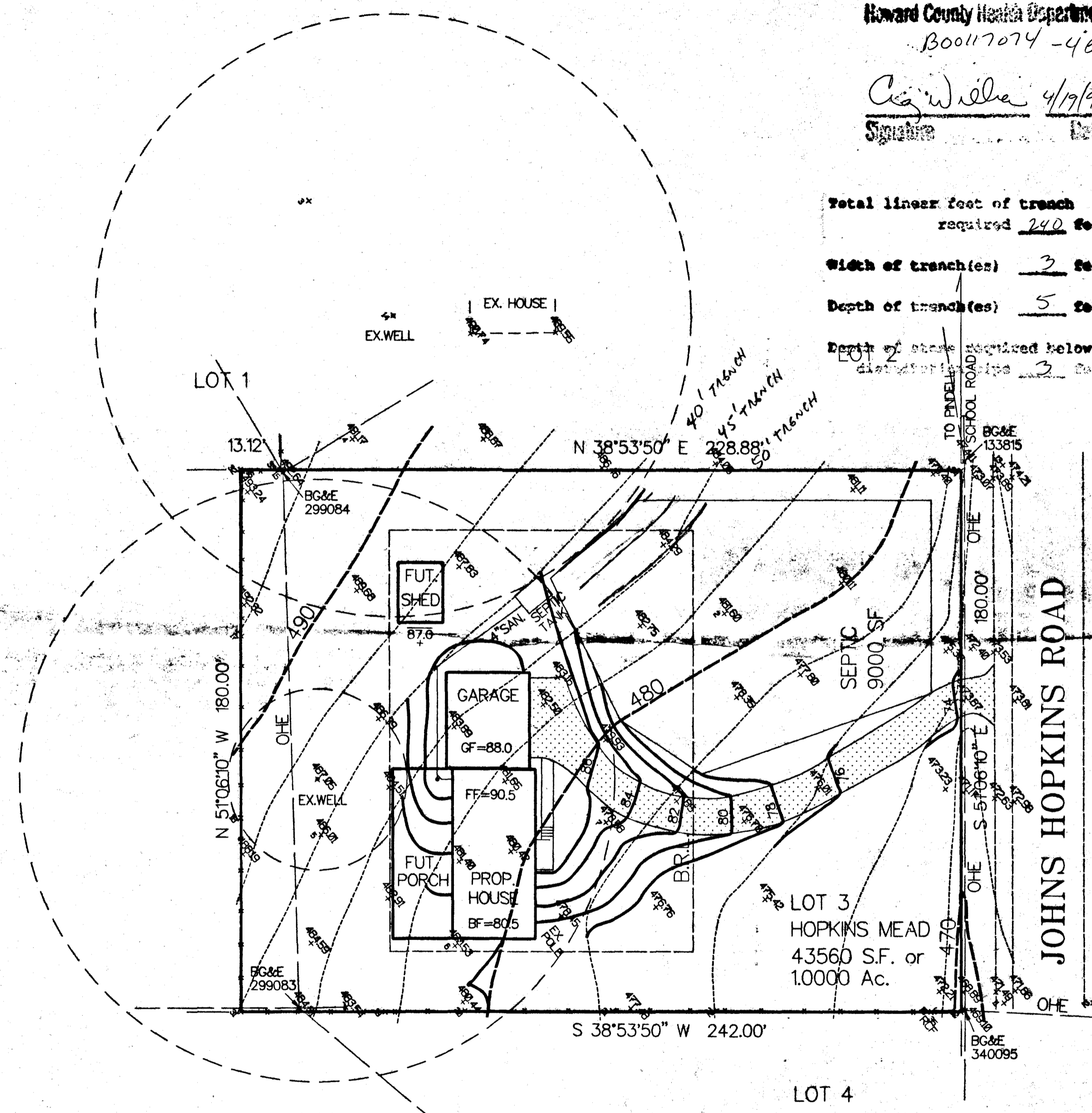
C. W. Wille 4/19/99
 Signature Date

ABBREVIATIONS

- BF BASEMENT FLOOR
- BSMT. BASEMENT
- ENT. ENTRANCE
- EX. EXISTING
- FF FIRST FLOOR
- FUT. FUTURE
- GF GARAGE FLOOR
- INV. INVERT
- IPF IRON PIPE FOUND
- OHE OVERHEAD ELECTRIC
- PROP. PROPOSED
- R/W RIGHT OF WAY
- RCF REBAR AND CAP FOUND
- SAN. SANITARY SEWER
- S.F. SQUARE FEET



VICINITY MAP
 SCALE: 1"=2000'
 MONTGOMERY COUNTY, MARYLAND

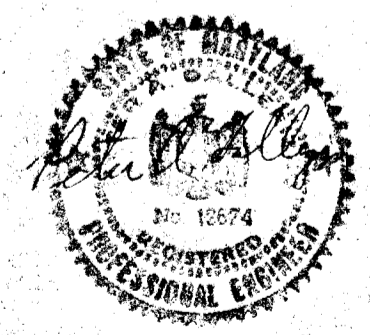


Total linear feet of trench required 240 feet
 Width of trench(es) 3 feet
 Depth of trench(es) 5 feet
 Depth of stone required below distribution pipe 3 feet

NOTES

1. LOT RECORDED IN PLAT BOOK 6, PLAT No. 77 TITLED "SECTION 1 HOPKINS MEAD WALTER C. HULBERT".
2. ZONE RRD00 SETBACKS FRONT: 90' (FROM PLAT) SIDE: 20' REAR: 50'
3. EXISTING CONDITIONS AND 30 SCALE TOPOGRAPHY ARE BASED ON A FIELD RUN SURVEY BY CIVIL DESIGN SYSTEMS DURING MARCH 1999.
4. VERTICAL DATUM IS BASED ON HOWARD COUNTY GEODETIC SURVEY CONTROL MONUMENT # 4EB ELEV. = 464.502 ft.

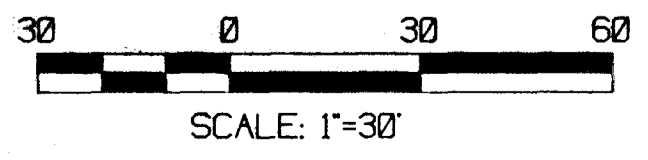
NOTE
 FOR LOCATION OF UTILITIES CALL "MISS UTILITY" 24 HOURS A DAY 1-800-257-7777 48 HOURS IN ADVANCE OF ANY WORK IN THIS VICINITY.



PLAN
 SCALE: 1"=30'

PREMISES ADDRESS: JOHN HOPKINS ROAD
 CLARKSVILLE, MARYLAND 21029

BUILDER: DAVID A. SWANN
 14751 ADDISON WAY
 WOODBINE, MD 21797
 410-442-5937



PROJECT: TAX MAP 41 GRID 5 PARCEL 195 LOT 3 SECTION 1 HOPKINS MEAD PROPTS RESIDENCE JOHN HOPKINS ROAD CLARKSVILLE, MARYLAND 21029	DATE: 03/31/99	CDS (301) 921-9109 CIVIL DESIGN SYSTEMS CIVIL ENGINEERING & LAND SURVEYING 19645 MUNCASTER ROAD ROCKVILLE, MARYLAND 20855	SHEET: C-1
	JOB: JJP99002		PAGE: 1 OF 1
TITLE: SITE PLAN	DWG: 991004	SCALE: 1"=30'	

C-1 1152 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 44426

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED

Depth of Well (TO, NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL"

OWNER STREET OR RFD 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, FEET (FROM, TO), Check if water bearing. Rows include Top Soil, Clay, Shaley, Sand Stone, Mica, Sand Stone, Mica, Sand Stone, Mica.

GROUTING RECORD WELL HAS BEEN GROUTED TYPE OF GROUTING MATERIAL CEMENT BENTONITE CLAY NO. OF BAGS NO. OF POUNDS

CASING RECORD casing types insert appropriate code below MAIN CASING TYPE Nominal diameter Total depth

OTHER CASING (if used) diameter depth from to

SCREEN RECORD screen type or open hole insert appropriate code below

DEPTH (nearest ft.)

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

CIRCLE APPROPRIATE LETTER A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED

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

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

PUMPING TEST HOURS PUMPED PUMPING RATE METHOD USED TO MEASURE PUMPING RATE WATER LEVEL BEFORE PUMPING WHEN PUMPING TYPE OF PUMP USED

PUMP INSTALLED DRILLER WILL INSTALL PUMP YES NO IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE

LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES

B 1 4709

SEQUENCE NO. (DP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

STATE PERMIT NUMBER

40-99-1042

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

please print or type

fill in this form completely

Date Received (APA)

582127

OWNER INFORMATION

MURPHY JAMES D

329 OLD HOPKINS RD

ARKSVILLE MD 21029

B 3

LOCATION OF WELL

HOWARD

HOPKINS MEADE

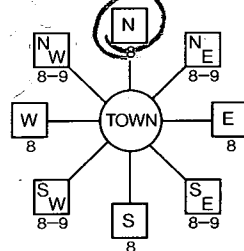
SECTION LOT 3

FULTON

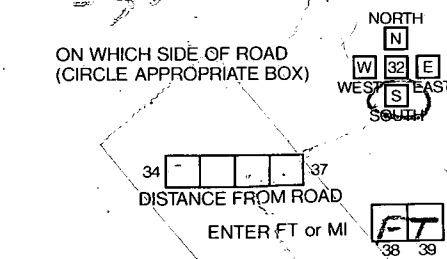
MILES FROM TOWN (enter 0 if in town) 1 MI

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



JOHNS HOPKINS



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) - circled
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)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

HOWARD

COUNTY NAME COUNTY NO.

STATE SIGNATURE DATE ISSUED

091189 Raymond Hodgen 211

NORTH GRID 486000 EAST GRID 0823000

APPROXIMATE DEPTH OF WELL 200 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
2.
3.

WRITE THE BOX NUMBER FROM THE MAP HERE

820 3
480 6

Handwritten notes: 11/2/90 12:00 DOUBLE CHECKED WELL SITE AT 11 AM WELL SITE OK GROUT TRUCK NOT YET PRESENT

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 DEEPEMED AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)

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

APPROX. PERMIT NUMBER GAP

FORCE RW PERMIT No. 40-99-1042

SPECIAL CONDITIONS

