

PERMIT

P 49492

A 47023

SEWAGE DISPOSAL SYSTEM
DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT 1st

DATE 8/3/93

DATE SYSTEM APPROVED 8/11/93

INSPECTOR RH

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

313-2640

251030
INDEXED

* Time Expired for F.C.O.P. Compliance
K + K Excavating

IS PERMITTED TO INSTALL ALTER

ADDRESS _____ PHONE _____

SUBDIVISION Welsh Property LOT 1 ROAD 4700 Ilchester Road

PROPERTY OWNER Stephen B. Welsh

ADDRESS _____

SEPTIC TANK CAPACITY 1000 GALLONS

NUMBER OF BEDROOMS 3

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 120

TRENCHES - Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 7.5 feet below original grade. Effective area begins at 3.0 feet below original grade. 4.5 feet of stone below distribution pipe.

LOCATION - Place the first trench 125 feet down the 330.00' lot line and 65 feet off the same lot line as seen when facing the lot from the pipestem. Run trenches on contour toward the left front lot line (218.32'). First trench to be a maximum of 40 feet long. Second trench to be a maximum of 60 feet long. Third trench to be a maximum of 70 feet long. MAINTAIN A MINIMUM OF 100 FEET TO ALL WELLS.

NOTE - Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

OK 3/17/93 RH 8/3/93 REVISED LOCATION
AT SITE TO KEEP SEPTIC TANK AT LEAST 100 FT FROM THE WELL RH

PLANS APPROVED BY Jane Nadeau DATE 10/31/91

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

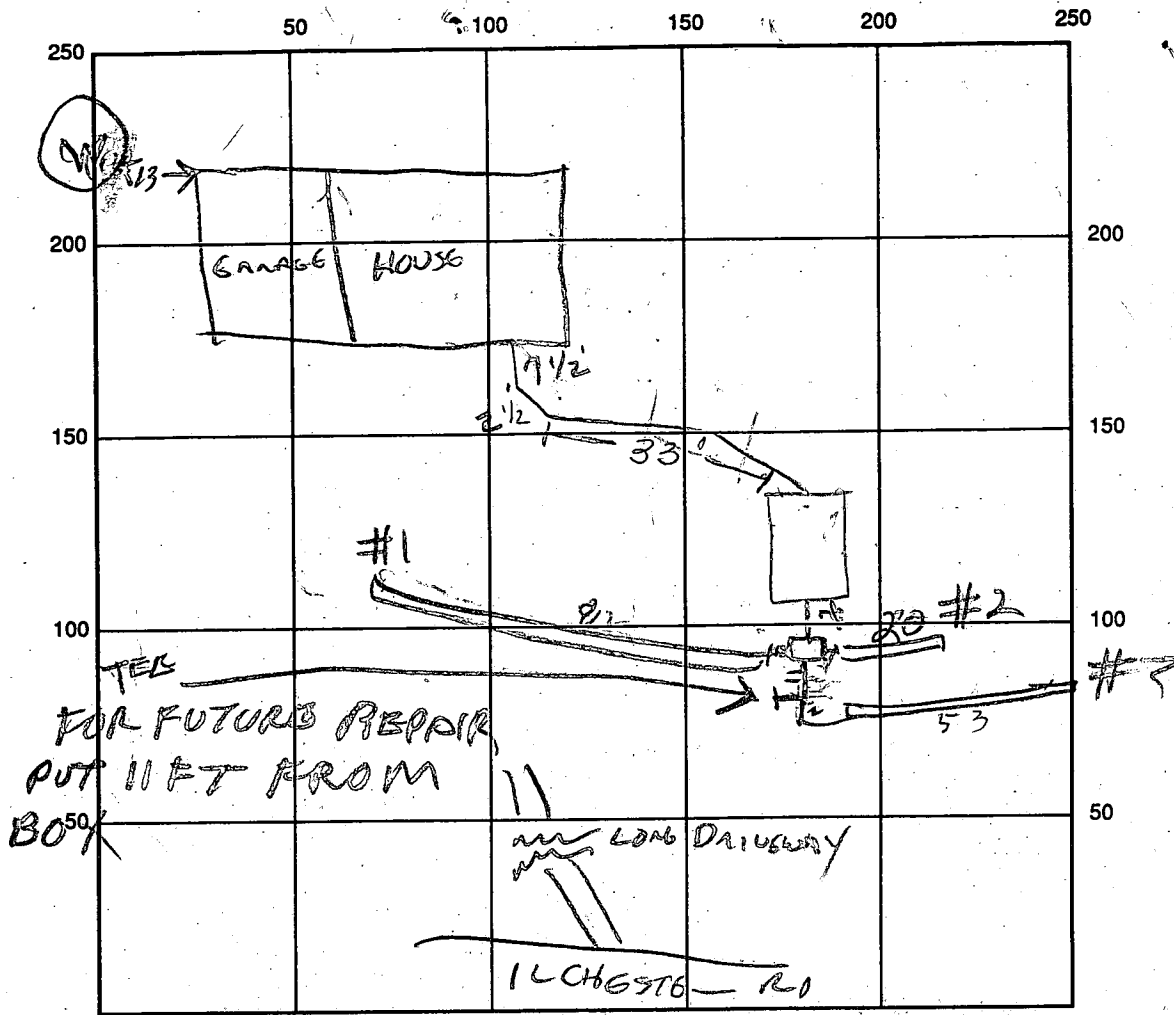
PERMIT VOID AFTER TWO YEARS

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 47023



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1500 TOPSEAM CLEANOUTS MANIFOLD

DISTRIBUTION BOX LEVEL OK

DRAIN FIELD/TITLE DEPTH 6.5-7.5 FT. TRENCH WIDTH 2 FT. INLET DEPTH 2-3 FT.

EFFECTIVE GRAVEL DEPTH 4-5 FT. TOTAL LENGTH 2220 FT. 53 TOTAL 155

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 65-75 SQ. FT.

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

ABSORBENT AREA _____ SQ. FT.

REMARKS: 1301 tank - sewer line OK to cover 8/5 Am

8/11/93 - TRENCH #1 & 2 OK TO COVER FINISH TRENCH #3 R/H

8/11/93 300PM TRENCH #3 OK TEE FOR FUTURE REPAIR

INSTALLED BETWEEN BOX & TRENCH #3

DATE SYSTEM APPROVED 8/11/93 INSPECTOR Raymond Hodges

5/16/91
10 AM

APPLICATION

PERCOLATION TESTING

A 47023

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

PREVIOUS OK.
APPLICANT CONFIRMS
PUBLIC SEWER & WATER REMOTE.
WE WILL REQUEST CONFIRMATION
FROM BUREAU OF ENGINEERING.

P _____

DISTRICT #1

DATE 4/30/91

FARM HOUSE 600 FT REMOVED
FROM TEST AREA. EXEMPTION GRANTED RE:
ESTABLISHMENT OF 10,000 SQ FT EASEMENT
FOR RESIDUE well

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 Robert & Rosalie Welsh Stephen B. Welsh 1/2

ADDRESS 4738 /Lchester Rd PHONE 788-2108

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Welsh Property LOT NO. #1

ROAD AND DESCRIPTION 4710 /Lchester Road

TAX MAP 31 blk 10 PARCEL # 122

BLDG. PERMIT SIGNED
AND RETURNED 12/21/90
Sewer # 46474 - SFD 30mm
TYPE BLDG. _____
(SINGLE FAMILY DWELLING OR COMMERCIAL)

SIZE OF LOT 1 acre

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. Stephen B. Welsh
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 5-16-91 Recommend rejection due to
unsuitable soils. May be combined with Lot-2, JEN
9/6/91 RETEST /LOT LINE ADJUSTMENT - OK PENDING WELL TO BE DRILLED. C.W.

HD-216

THIS IS NOT A PERMIT

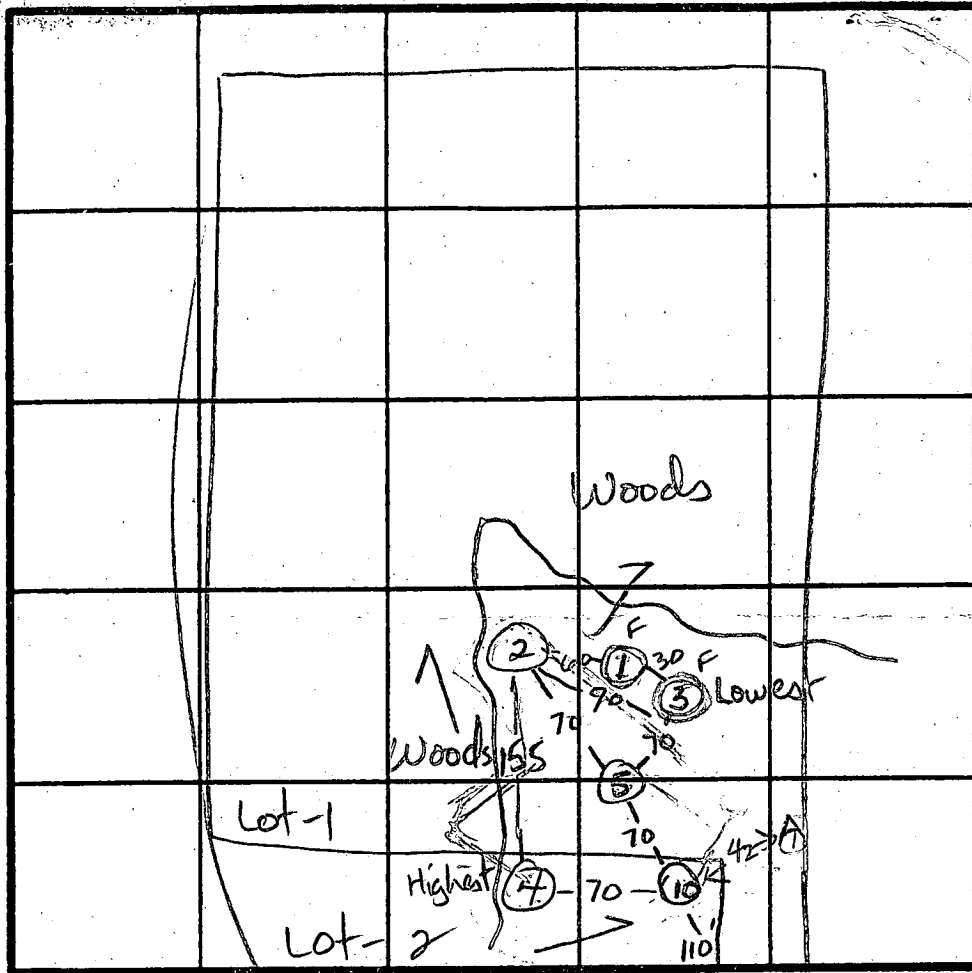
Lot-1
A47023

② SOIL PROFILE

0-1.0	Dk-br si cl
1.0-5.0	Br si cl
5.0-11.0	Br si Bottom
④	
0-1.0	Br si cl
1.0-3.5	Br si, <5% broken rock frags
3.5-11.5	Tan si s l
11.5	Bottom

⑤
0-3.5 Br si
3.5-11.5 Br si
11.5 Bottom

$\bar{x} = 5$ min
Inlet = 3.0
Bottom = 7.5
180 sq ft/bedrm



③

0-3.0 Red-br si
cl
3.0-10.0 Red-br
si l, large
rocks
<40%
structured
at 6.0 ft.
10.0 Refusal

⑩

0-3.0 Dk-br
si cl
3.0-5.5 Red-br
si cl
5.5-11.5 Red-br
si l
11.5 Bottom

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1' DROP		TIME
			START	STOP	START	STOP	
5-16-91	2	4.5 S	3:00:35	3:04:10	3:04	3:09	5min
		11.0 D	Bottom				ok
	3	4.5 S	3:07:10	3:17	No movement		
		10.0 R	Refusal at 10.0 ft, struct at 6.0				Fail
	1	Rock	at 8.0 ft - contractor covered				Fail
	10	5.5 S	3:16	3:19	3:19	3:22	3min
		11.5 D	Bottom				ok
	5	4.5 S	3:19:00	3:20	3:20	3:22	2min
		11.5 D	Bottom				ok
	4	5.0 S	2:43	2:50	2:50	2:55	5min
		7.5 M	2:42	2:50	2:50	2:57	7min
		11.5 D	Bottom				ok

REMARKS About 5500 sq ft of useable soils. Holes not as shown on plan.

TYPE OF SOIL _____

TESTED BY J.E. Naderu ALSO PRESENT Dave

APPLICATION

PERCOLATION TESTING

A 47023

P _____

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

DISTRICT #1

DATE 4/30/91

2/2

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 ROBERT & ROSALIE WELSH

ADDRESS 4730 ILCHESTER RD PHONE 788 2100

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION WELSH PROPERTY ILCHESTER RD LOT NO. 1

ROAD AND DESCRIPTION Ilchester Rd

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 WELL CONSTRUCTION DATE 9/6/91

REASONS FOR REJECTION OR HOLDING 5/22/91 MAY BE OK NOW BUT LINES MUST BE CHANGED FH. WELL TO BE PAID PRIOR TO FINAL PLAT

HD-216

THIS IS NOT A PERMIT

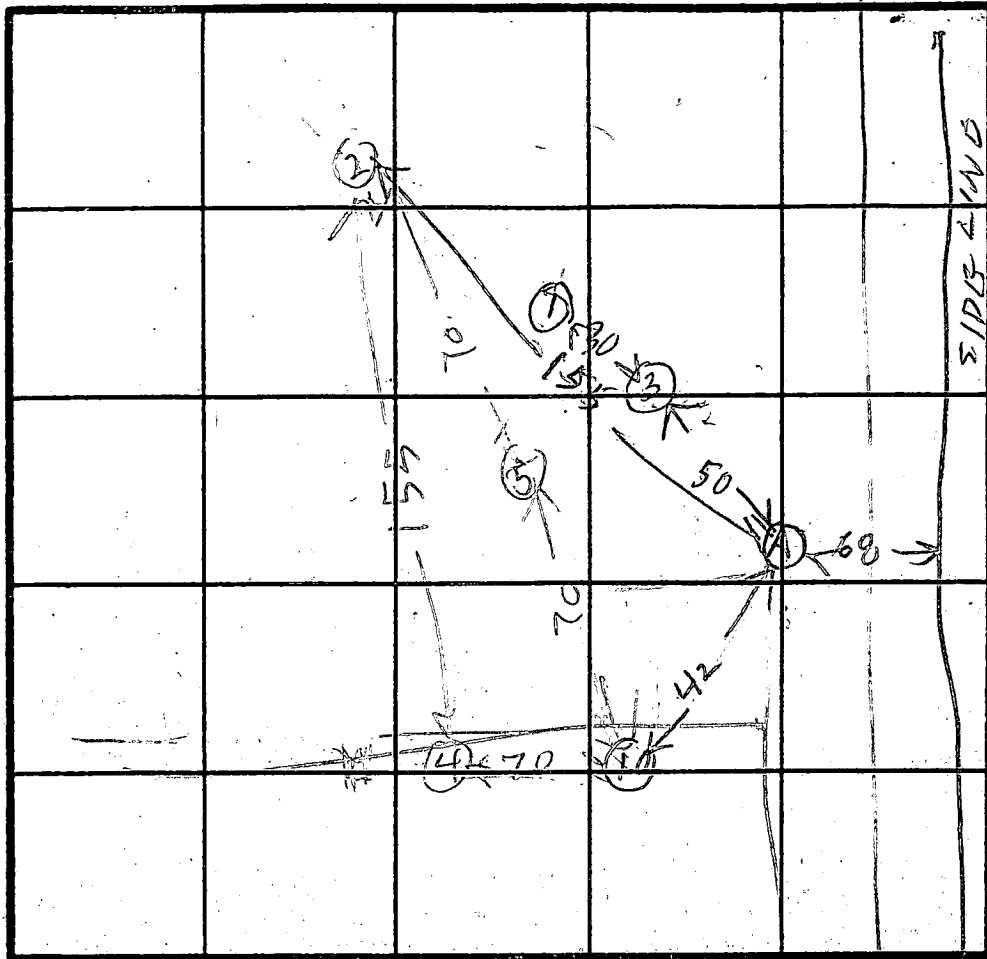
Lot 1

A47003

SOIL PROFILE

BROWN CLAY

BROWN GRITTY SAND LOAM



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
5/23/91	AV	12	OIL	DEEP			

REMARKS 5/23

TYPE OF SOIL

TESTED BY B. HODGES

ALSO PRESENT O/CB T/BALMAN

C1 4630 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 47023

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

8 13

15 20 100291

22 26 420 (TO NEAREST FOOT)

28 37 H0-84-19168

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, GRAY CLAY, 0, 32, 32, 420.

GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) 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: ST CO STEEL CONCRETE, PL OT PLASTIC OTHER

MAIN CASING TYPE Nominal diameter top (main) casing (nearest inch), Total depth of main casing (nearest foot)

OTHER CASING (if used) diameter inch, depth (feet) from to

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

DEPTH (nearest ft.) EACH SCREEN 1 2 3, SLOT SIZE 1 2 3, DIAMETER OF SCREEN (NEAREST INCH)

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 (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

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

RECEIVED HOWARD COUNTY HEALTH DEPT. 91 OCT 11 AM 10:48

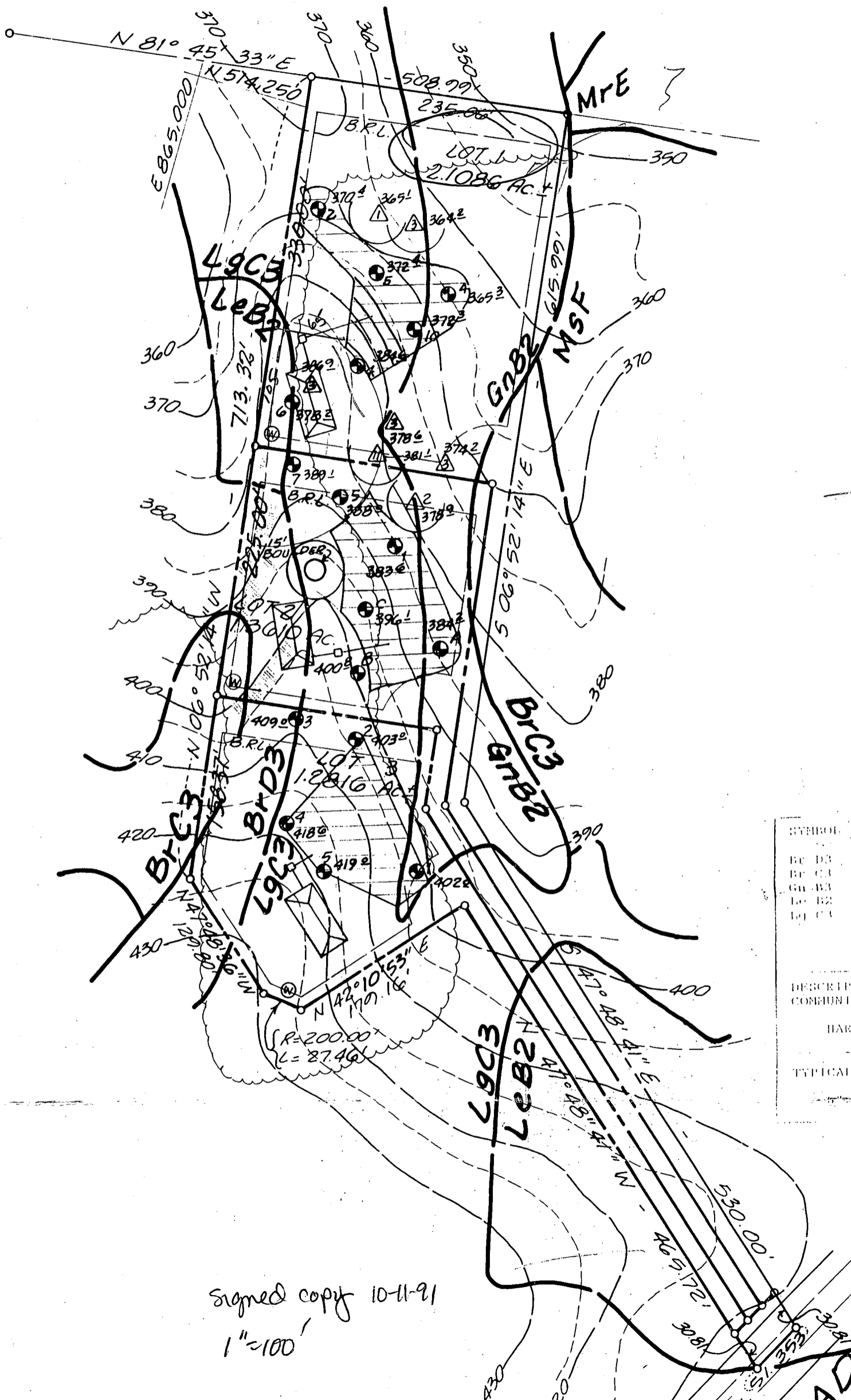
CIRCLE APPROPRIATE LETTER A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED E ELECTRIC LOG OBTAINED P TEST WELL CONVERTED TO PRODUCTION WELL

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. 238

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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



SYMBOL	DESCRIPTION
BC D3	COMMUNITIES
BC C3	
GA B3	
LO B2	
LO C3	
	HARDWOOD
	TYPICAL CALL

Signed copy 10-11-91
 1"=100'

SH
 DF

ROAD

