

Jan ID - 05 - 342775

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P _____

A 47867

DISTRICT _____

DATE _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

DATE SYSTEM APPROVED _____

INSPECTOR _____

INDEXED

_____ IS PERMITTED TO INSTALL _____ ALTER _____

ADDRESS _____ PHONE _____

SUBDIVISION _____ LOT Pcl. 24 ROAD _____

PROPERTY OWNER Johannes Welsch

ADDRESS 12402 Lime Kiln Road - Existing house & tenant house

SEPTIC TANK CAPACITY _____ GALLONS

NUMBER OF BEDROOMS _____

_____ SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED _____

Repair perc for subdivision performed on existing house
& tenant house - no actual repair

No record for 10/17/91 Repair found at this time ALM

PLANS APPROVED BY _____ DATE _____

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

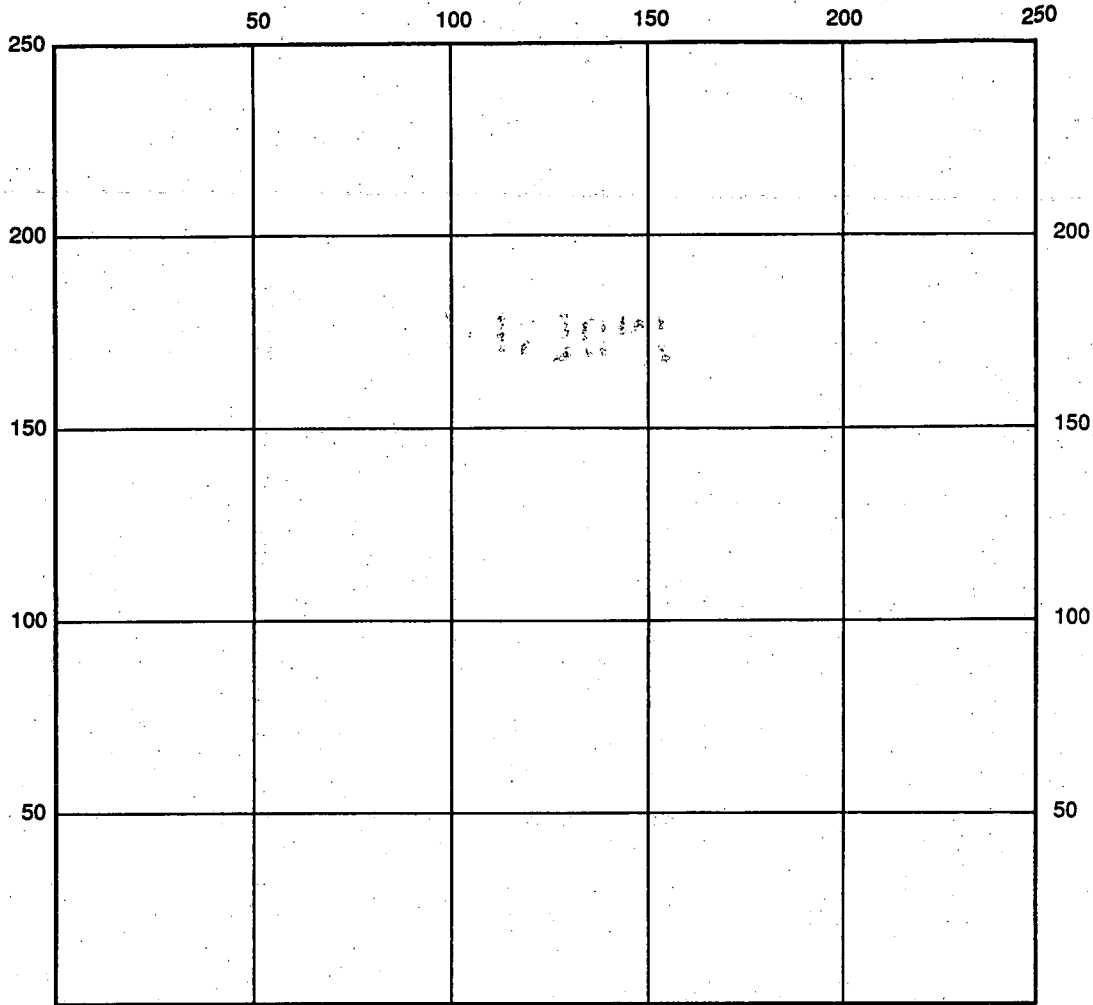
PERMIT VOID AFTER TWO YEARS

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
47867



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL _____ CLEANOUTS _____

DISTRIBUTION BOX LEVEL _____

DRAIN FIELD/TITLE DEPTH _____ FT. TRENCH WIDTH _____ FT. INLET DEPTH _____ FT.

EFFECTIVE GRAVEL DEPTH _____ FT. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ ONE SIDEWALL/BOTTOM AREA _____ SQ. FT.

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

ABSORBENT AREA _____ SQ. FT.

REMARKS: _____

DATE SYSTEM APPROVED _____ INSPECTOR _____

WELSCHE, JOHANNES

APPLICATION

PERCOLATION TESTING

A 47867

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

\$15 REPAIR FEE

P _____

PARCEL 1B

DISTRICT _____

EXISTING HOUSE

SEPTIC 2 200' TO STREET/POND.

DATE 2/18/92

DIG: 1 TEST HOLE IN VICINITY OF SEPTIC SYSTEM
1 TEST HOLE NEAR DRIVEWAY IN A POSITION
THAT ALLOWS 10,000 SQ FT BASEMENT TO BE PLATTED
AT CORRECT DISTANCE FROM POND.

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.

CW,

PROPERTY OWNER KENNETH W & DIANA W. CARLSON

ADDRESS 12402 LIME KILN RD. PHONE 410-792-8006

PROSPECTIVE BUYER ENG. CLARK, FINEFROCK & SACKETT ATT: WIGAND

ADDRESS 7135 MINSTRAL WAY COL MD. PHONE 301-7500
21045

PROPERTY LOCATION:

SUBDIVISION BROOKWOOD FARMS LOT NO. 1B

ROAD AND DESCRIPTION LIME KILN RD. OFF RT. 216

85± ACRES

TAX MAP 45 PARCEL # 1

SIZE OF LOT 14.5± AC. TYPE BLDG. S.F.D. - EXISTING
(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.

Kenneth W. Carlson
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

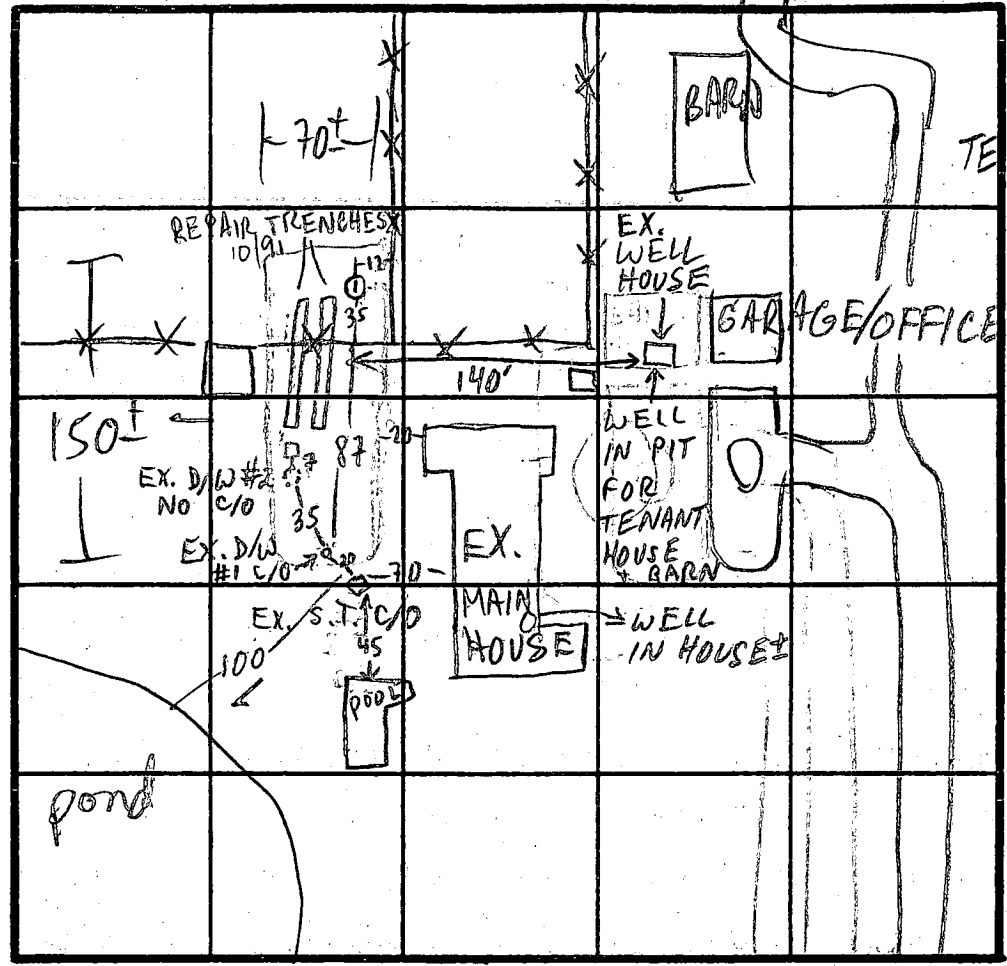
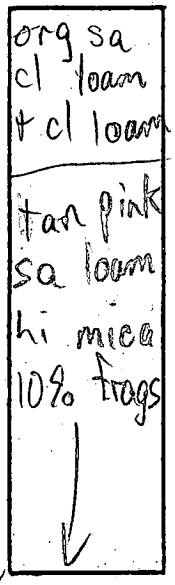
REASONS FOR REJECTION OR HOLDING REPAIR PERC OK, HOLD FOR PLAT MR 5/18/92

HD-216

THIS IS NOT A PERMIT

Lot 1B
A47862

SOIL PROFILE



TENANT HOUSE

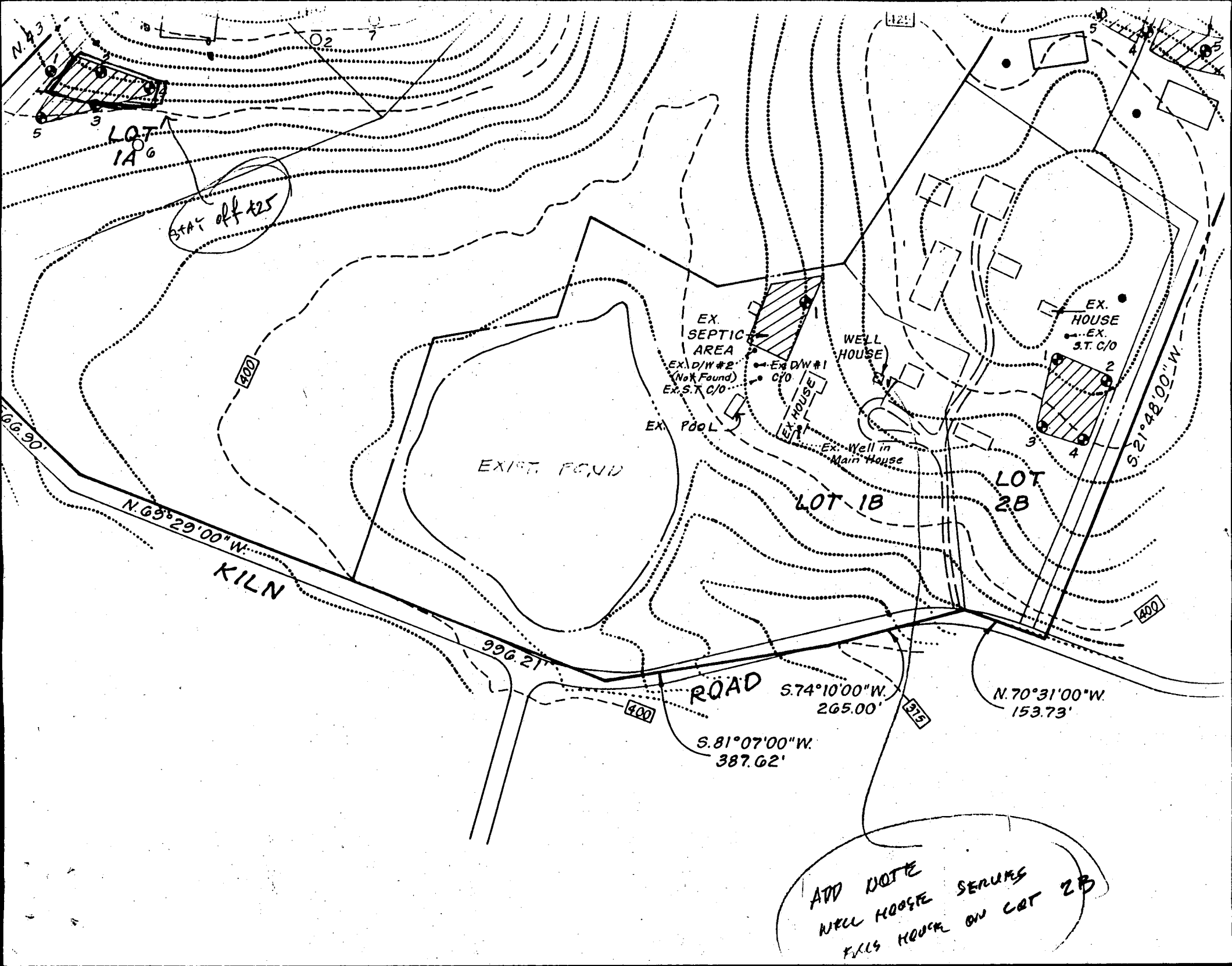
LIME KILN RD INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
5/6/92	1 V	12	see profile				

REMARKS HOLE OK, NOT PER PLAN

TYPE OF SOIL

TESTED BY M. R. Fickin ALSO PRESENT Fyock & Co.



ADD NOTE
 WELL HOUSE SERUMS
 FULL HOUSE ON LOT 2B

APPLICATION

PERCOLATION TESTING

A 47866
P _____

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

DISTRICT _____
DATE 2/18/92

PARCEL 2B
EXISTING TOWN HOUSE
LOT HAS POTENTIAL FOR REPLACEMENT DWELLING
FULL PERMITS REQUIRED.
CURRENT WATER SUPPLY OFF-LOT,
TO BE RESOLVED PRIOR TO
SIGNATURE OF FINAL PLAT.
2/18/92 *William*

4/12/92
10:00
4/29/92
10:00

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 KENNETH W. CARLSON & DIANA W.
ADDRESS 12402 LIME KILN RD. FULTON, MD 20759-0131 PHONE 410-792-8006

PROSPECTIVE BUYER ENG. CLARIL FINEFROCK & SACKETT: ATT: WIGAND
ADDRESS 7135 MINSTRAL WAY, COL. MD 21045 PHONE 381-7500

PROPERTY LOCATION:

SUBDIVISION BROOKWOOD FARMS LOT NO. 2B
ROAD AND DESCRIPTION LIMEKILN RD OFF ROUTE 216
85± ACRES

TAX MAP 45 PARCEL # 1

SIZE OF LOT 6.5± AC. TYPE BLDG. S.F.D. - EXIST.
(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.

Kenneth W. Carlson
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

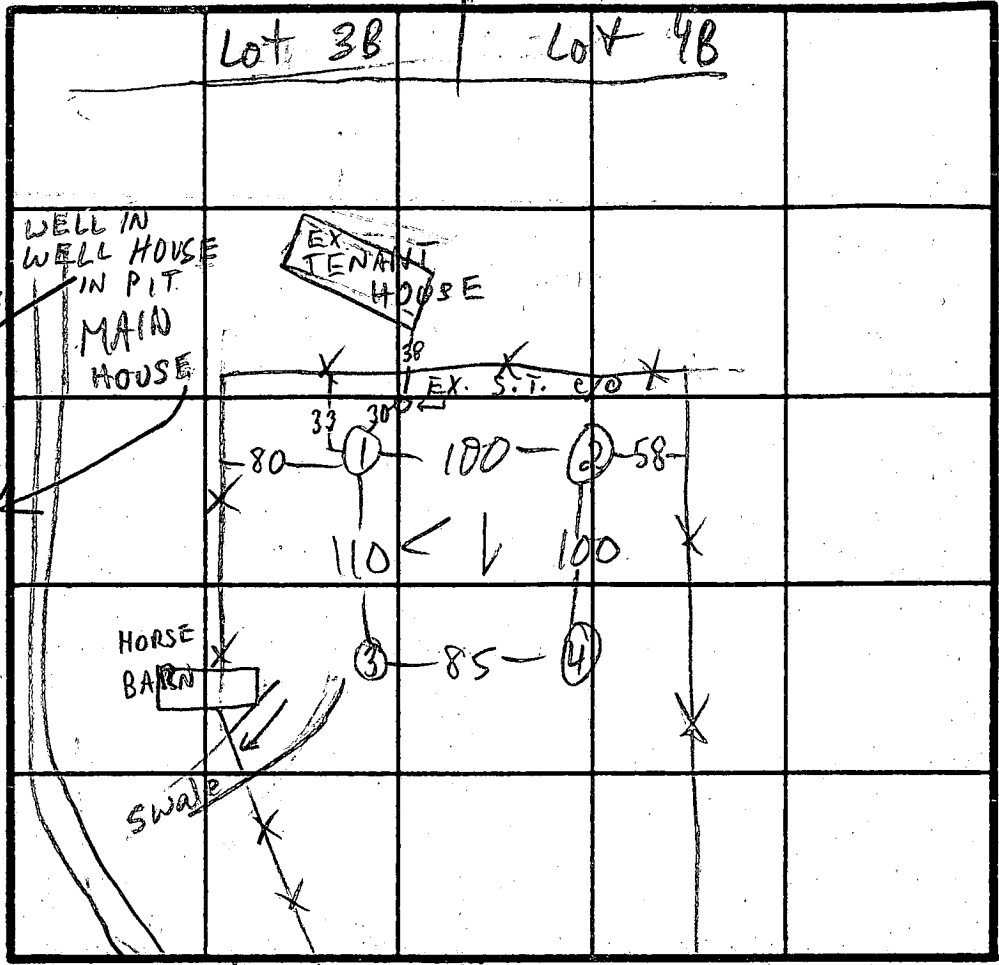
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING PERC OK, HOLD FOR PLAT MR 5/11/92

HD-216

THIS IS NOT A PERMIT

Lot 2B
A 47866



SOIL PROFILE

0
dk org
red
sa cl
lm

2 1/2 - 4

tan
pink
sa lm

10-15% hard
shale/saprolite
frags
bi mica

1/2 - 13

X = 8
180 # BR
Inlet 5'
Bottom 8'

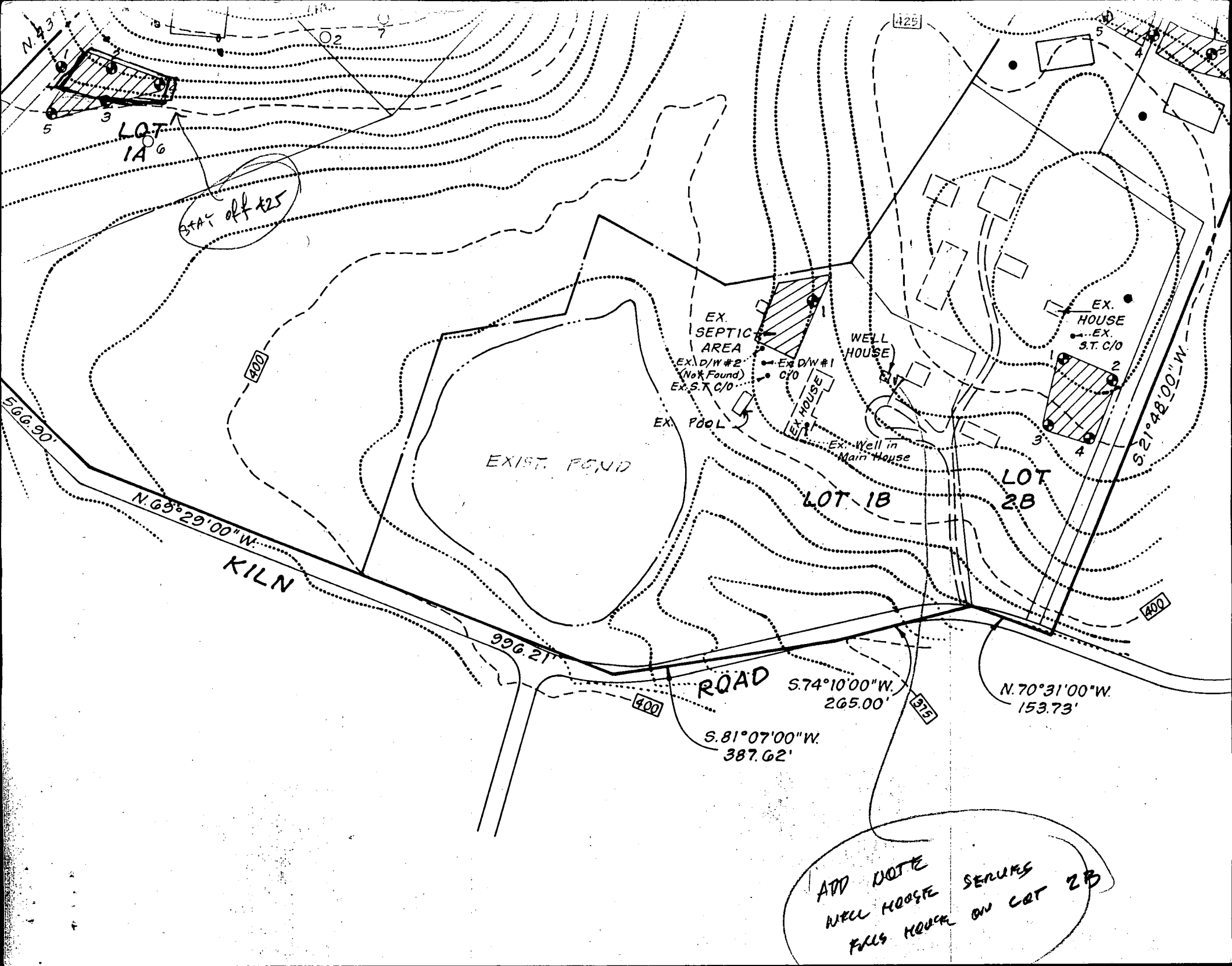
LIMEKILN RD INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
5/6/92	1 S	4 1/2	11:42:30	11:52	11:52	12:17	25	
	1 V	12 9"	see profile					
	2 S M	5	11:44	11:45	11:45	11:47	2	
	2 V	11 1/2	see profile					
	3 S	3 1/2	11:52 11:54	11:55	11:55	11:53:30 11:57	FAST 2	
	3 V	12	see profile					
	4 S	4	11:55 11:57	11:56 12:00	11:56 12:00	11:57 12:02	1 2	
	4 V	13	see profile					

REMARKS HOLES OK, NOT PER PLAN

TYPE OF SOIL

TESTED BY M. Ripkin ALSO PRESENT Fyock's crew



LOT 1A

STAY off 425

EXIST. POND

EX. SEPTIC AREA

EX. D/W #2 (Not Found)
EX. S.T. C/O

WELL HOUSE

EX. HOUSE

EX. HOUSE
EX. S.T. C/O

LOT 1B

LOT 2B

N. 69° 29' 00" W
KILN

ROAD
S. 74° 10' 00" W. 265.00'

N. 70° 31' 00" W. 153.73'

S. 81° 07' 00" W. 387.62'

ADD NOTE
WELL HOUSE
FALLS UNDER ON LOT 2B

C 1 **6025** 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, MD. 21401
WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER

DATE RECEIVED (WRA USE ONLY) 3/26/80 DATE WELL COMPLETED

DEPTH OF WELL 40 PERMIT NO. FROM "PERMIT TO DRILL WELL" H0-73-3585

22 (TO NEAREST FOOT) 26 21 00A 28 29 30 31 32 33 34 35 36 37

8-13 15 20 DRILLERS IDENTIFICATION NO. 40

OWNER BECK, WALTER LAST NAME FIRST NAME

STREET OR RFD 12402 LIME HILL RD. POST OFFICE FULTON MD.

WELL DESCRIPTION

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	
<i>MICK</i>	<u>260</u>	<u>400</u>	<input checked="" type="checkbox"/>

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) Y N

TYPE OF GROUTING MATERIAL (CIRCLE BOX)

CEMENT C M BENTONITE CLAY B C

NO. OF BAGS NO. OF POUNDS

GALLONS OF WATER

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM 48 FT. TO 52 FT.

CASING RECORD

CASING TYPES (INSERT APPROPRIATE CODE BELOW)

S T STEEL C O CONCRETE

P L PLASTIC O T OTHER

MAIN CASING TYPE

NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH)

TOTAL DEPTH OF MAIN CASING (NEAREST FOOT)

OTHER CASING (IF USED)

EACH CASING

DIAMETER (INCH) DEPTH (FEET) FROM TO

SCREEN RECORD

SCREEN TYPE OR OPEN HOLE (INSERT APPROPRIATE CODE BELOW)

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

P L PLASTIC O T OTHER

C 2

1 2 3 (SEQ. NO.) 6

DEPTH (NEAREST WHOLE FOOT) FROM TO

EACH SCREEN

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.

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) 3

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 3

METHOD USED TO MEASURE PUMPING RATE bucket

WATER LEVEL: (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING 50 (NEAREST FOOT)

WHEN PUMPING 400 (NEAREST FOOT)

TYPE OF PUMP 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)

PUMP HORSE-POWER

PUMP COLUMN LENGTH (NEAREST FOOT)

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)

ABOVE } LAND SURFACE (NEAREST FOOT)

BELOW } 50 (NEAREST FOOT)

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURE SUCH AS BUILDINGS, SEPTIC TANKS, AND/OR OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL).

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 GEORGE F. EASTERDAY

(PLEASE PRINT) George A. Easterday

SIGNATURE

DIAMETER OF SCREEN 56 (NEAREST INCH) FROM 60

GRAVEL PACK

IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX F

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

TELESCOPE CASING 70 72

LOG INDICATOR 74 75 76

OTHER DATA AVAILABLE