

11-18-97 AM

# PERMIT

05-405572

## SEWAGE DISPOSAL SYSTEM

### DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 58577

A 37285

DISTRICT 5th

DATE 7-22-97

# INDEXED

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXXX~~ 410-313-2640

DATE SYSTEM APPROVED 11/18/97

INSPECTOR ALM

Tolley Enterprises IS PERMITTED TO INSTALL X ALTER

ADDRESS Frederick, MD PHONE (301) 831-6037

SUBDIVISION Wm Contrivance Estates LOT 19 ROAD 9454 Lovat Road

PROPERTY OWNER Matthew Ganim

ADDRESS \_\_\_\_\_

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

TRENCHES - Trench to be 3 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 5 feet below original grade. Effective area begins at 3 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Beginning from the right rear lot line, place the distribution box 130 feet down the 179.45' lot line and 200 feet off this same lot line as seen when facing the lot from Lovat Road. Run trenches on contour in both directions.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 7/1/97 DLS

PLANS APPROVED BY Donna K. Soe DATE 06/26/97

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

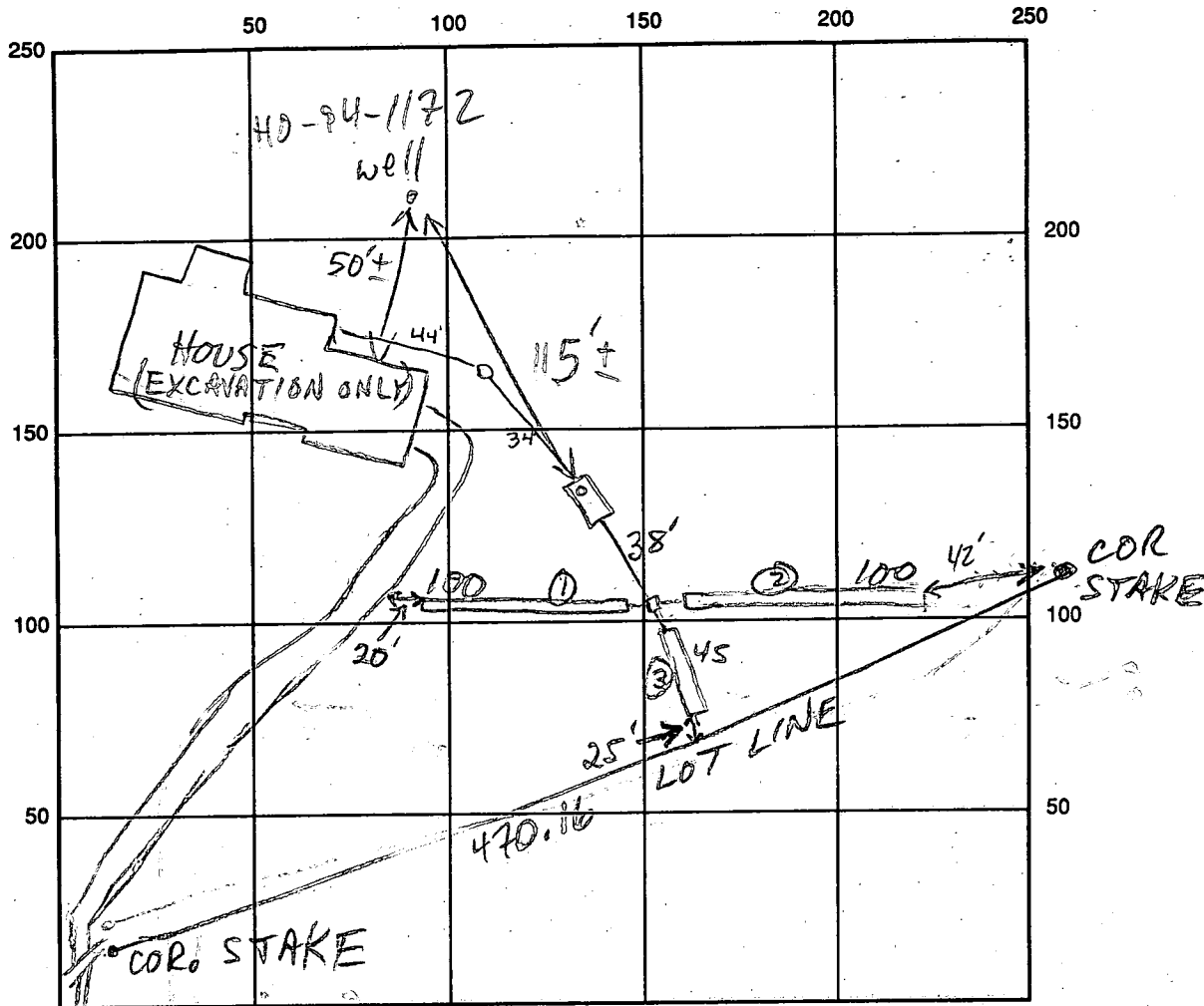
PERMIT VOID AFTER TWO YEARS

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**

A 37285



LOVAT RD INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1500 GAL CLEANOUTS S.O.T. - OK

DISTRIBUTION BOX LEVEL OK - BAFFLE IN

DRAIN FIELD/TITLE DEPTH 5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH ①100 ②100 ③45 FT.

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 0300 ②300 ③135 SQ. FT.

DRYWALL INSIDE DIAMETER      FT. EFFECTIVE DEPTH BELOW INLET      FT.

ABSORBENT AREA 735 SQ. FT. D.B. 20' HIGHER THAN SEPTIC AREA

REMARKS: 7/29/97 TRENCH ③ RUNNING DOWNHILL (L'ED) DUE TO  
INSTALLER UNCERTAINTY; OK TO MAINTAIN SINCE TRENCH  
SHORT, GROUND NEARLY FLAT; ALSO ADVISED INSTALLER OF  
GENERAL HO CO PREFERENCES ON DESIGN, INSPECTIONS ETC.  
OK TO COVER S.T. & TRENCHES, CALL FOR HOUSE CONN INSP. (MR)

11/8/97 House connection made - OK to cover ACM

DATE SYSTEM APPROVED 11/8/97 INSPECTOR A McMillen

# APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SERVICES

P. O. BOX 473 ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 992-2330

A 37285

P \_\_\_\_\_

DISTRICT 5th

DATE 6/26/86

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 C. Ellsworth Iager

ADDRESS 11788 Route 216 Fulton, Maryland 20759 PHONE 725-2075

PROPERTY LOCATION:

SUBDIVISION Williams Contrivance LOT NO. NEW 2 19

ROAD AND DESCRIPTION End of Lovet Road

SIZE OF LOT 3.0 acres TYPE BLDG. residential  
(NUMBER OF BEDROOMS)

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.

C. Ellsworth Iager  
(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING 4 AUG 86 PERC OK Hold for Plat

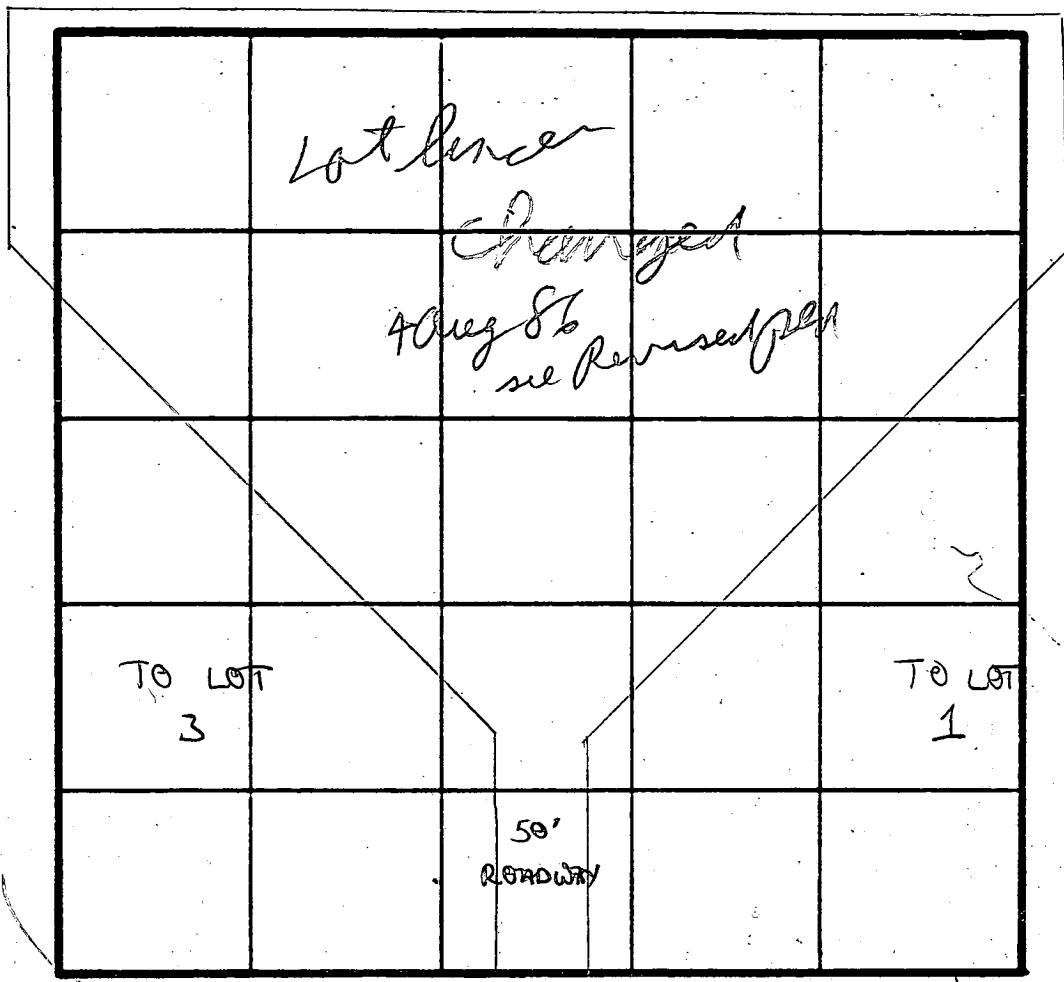
# THIS IS NOT A PERMIT

SOIL PROFILE

0  
CLAY  
FILL

3  
PINK  
BROWN  
SAND  
LOAM  
MICA

12 1/2



② ③ ⑤

CLAY

PINK  
BROWN  
SAND  
MICA  
LOAM

12 1/2

④

CLAY

BROWN  
SAND  
MICA  
LOAM  
& SMALL  
pebbles

11

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

TO RESERVOIR RD →

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8/4/86	1S	5.5	1134	1135	1135	1138	3
	1V	12.05	LOO15	5 01-			
	2S	3	1137	1140	1140	1141	1
	2V	12.25	LOO14	5 01K			
	3S	2.9	1145	1146	1146	1147	3
	3D	6.5	1144	1145	1145	1147	2
	3V	12					
	4S	3	1153	1154	1154	1155	2
	4V	11	LOO2	5 01K			
8/4/86	5V	11	LOO5	0 K			

REMARKS Holes dug per Reversed Plat of 4 AUG 86

TYPE OF SOIL \_\_\_\_\_

TESTED BY B. J. Hoop

ALSO PRESENT ROCKY SKIP & ROY

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ENVIRONMENTAL HEALTH SERVICES

P. O. BOX 473 ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 992-2330

A 37285

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DISTRICT 5th

DATE 6/26/86

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 C. Ellsworth Iager

ADDRESS 11788 Route 216 Fulton, Maryland 20759 PHONE 725-2075

PROPERTY LOCATION:

SUBDIVISION Williams Contrivance LOT NO. 219

ROAD AND DESCRIPTION End of Lovet Road

SIZE OF LOT 3.0 acres TYPE BLDG. residential  
(NUMBER OF BEDROOMS)

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.

C. Ellsworth Iager  
(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

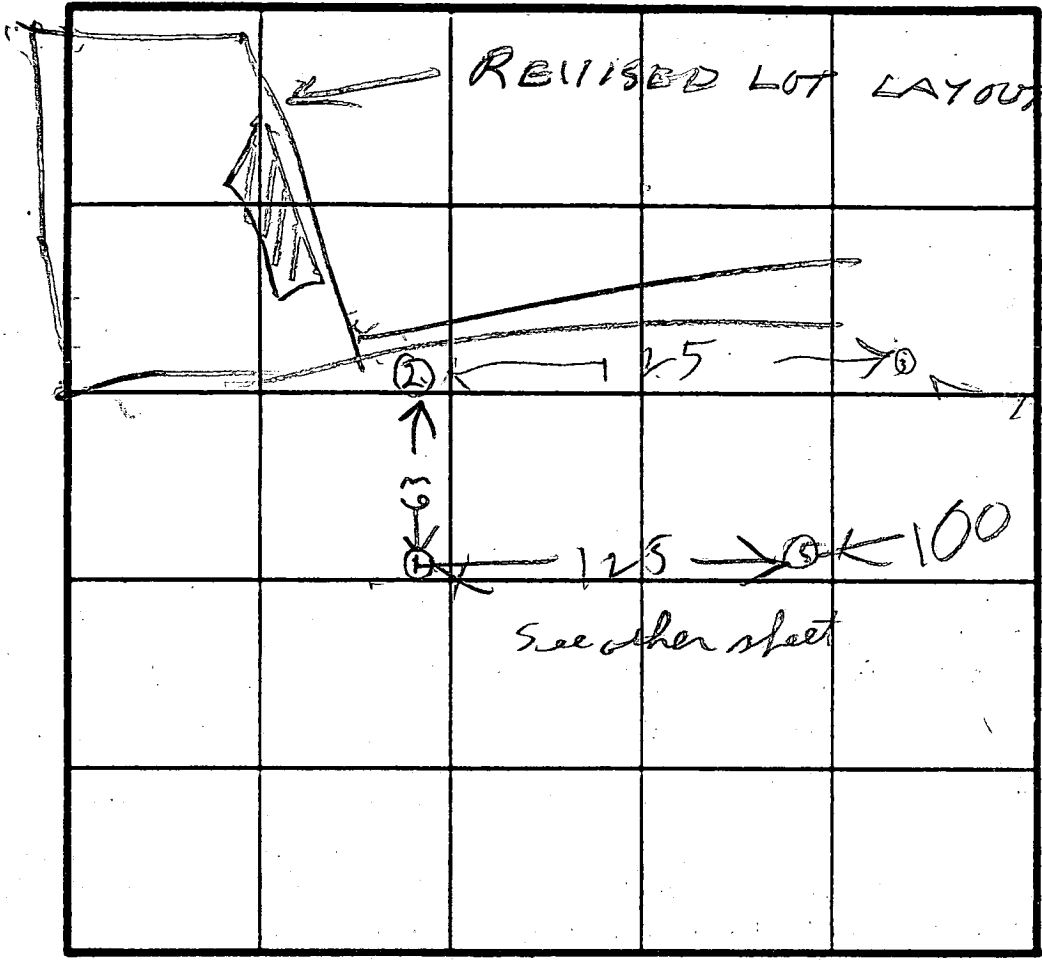
REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING \_\_\_\_\_

# THIS IS NOT A PERMIT

SOIL PROFILE  
0



Stake  
lot 102

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	

REMARKS \_\_\_\_\_

TYPE OF SOIL \_\_\_\_\_

TESTED BY \_\_\_\_\_ ALSO PRESENT \_\_\_\_\_

EM-12 1079

C1 9781 SEQUENCE NO. (MDE 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)

FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE

COUNTY NUMBER

ST/CO USE ONLY DATE RECEIVED MM DD YY

DATE WELL COMPLETED MM DD YY

Depth of Well 22 600' 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-1172

OWNER GANIM Matthew STREET OR RFD LCVAT ROAD TOWN FULTON SUBDIVISION WILLIAM CONTRIVANCE SECTION LOT 19

WELL LOG Table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes handwritten entries: SAND, GRAY MICA Rock, 0 55, 55 600.

GROUTING RECORD Form: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL (CM, BC), NO. OF BAGS (16), NO. OF POUNDS (4504), GALLONS OF WATER (96), DEPTH OF GROUT SEAL (0 to 52 ft).

CASING RECORD Form: casing types insert appropriate code below (ST, CO, PL, OT), MAIN CASING TYPE (ST), Nominal diameter top (main) casing (6), Total depth of main casing (60).

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

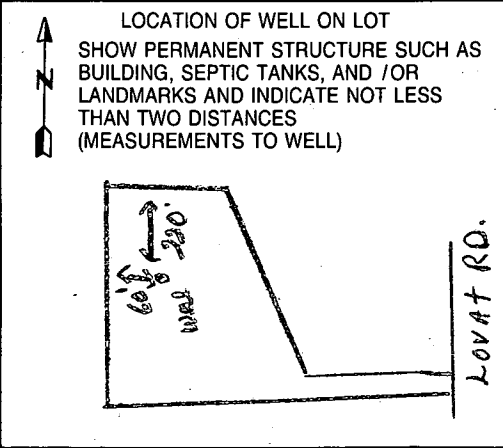
SCREEN RECORD Form: screen type or open hole (ST, BR, HO, PL, OT), insert appropriate code below.

PUMPING TEST Form: HOURS PUMPED (6), PUMPING RATE (1), METHOD USED TO MEASURE PUMPING RATE (Bucket), WATER LEVEL (65 ft before, 402 ft when), TYPE OF PUMP USED (S - submersible).

PUMP INSTALLED Form: DRILLER WILL INSTALL PUMP (NO), TYPE OF PUMP INSTALLED (S), CAPACITY: GALLONS PER MINUTE (31), PUMP HORSE POWER (37), PUMP COLUMN LENGTH (43), CASING HEIGHT (2).

WELL HYDROFRACTURED (Y), CIRCLE APPROPRIATE LETTER (A, E, P), I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04.

DEPTH (nearest ft.) Table with columns: A, C, H, S, R, E, N and rows for slot size and diameter of screen.



DRILLERS LIC. NO. 1 MS DO 24, DRILLER'S SIGNATURE Joseph L. Mayne, LIC. NO. 1 M D, SITE SUPERVISOR responsible for sitework if different from permittee.

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68, MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q, TELESCOPE CASING LOG INDICATOR OTHER DATA.

**FIELD DATA SHEET**  
**HOWARD COUNTY WELL YIELD TEST**

Well Permit No. HO - 94-1172  
 Location of property (road) LOVAT RD.  
 Subdivision WILLIAM CONTRIVANCE Lot 19 Block      Plat      Sec.       
 Well Driller Joseph Mayne Owner Matthew Ganim

Depth of well 600'  
 Distance of measuring point (M.P.) above ground 2'  
 Static water level (S.W.L.) below M.P. 65'

**I. High rate pumping -- reservoir drawdown**

Time pump started 7:00 Pumping rate 200 gpm  
 Total time 45 minutes to reach pumping water level 402' ~~ft~~ below M.P.

**II. Recovery pump test data - observations to be recorded every 15 minutes**

TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE time to fill 5/1 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
7:15	186'	3 sec.	N/A	20 gpm.
7:30	298	4		150'
7:45	402	5		12
8:00	400	60		1
8:15	399	60		1
8:30	398	60		1
8:45	398	60		1
9:00	397	60		1
9:15	397	60		1
9:30	397	60		1
9:45	397	60		1
10:00	397	60		1
10:15	397	60		1
10:30	397	60		1
10:45	397	60		1
11:00	396	60		1
11:15	396	60		1
11:30	396	60		1
11:45	396	60		1
12:00	396	60		1
12:15	396	60		1
12:30	396	60		1
12:45	396	60		1
1:00	396	60		1
HD-224 1:15	396	60		1
1:30	396	60		1
1:45	396	60		1



B 1	<b>9419</b>	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND <b>PERMIT TO DRILL WELL</b> please print or type	STATE PERMIT NUMBER <b>HO-94-1172</b> <small>fill in this form completely</small>
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**OWNER INFORMATION**

Date Received (APA) 5/12/97

8 MM DD YY 13

15 Last Name Coanin Owner Matthew First Name 34

36 9458 Looat Rd. Street or RFD 55

57 Fulton Town 70 md. State 72 20759 Zip 76

**LOCATION OF WELL**

B 3

8 COUNTY Howard 21

23 SUBDIVISION William Contrivance 42

SECTION 3 LOT 19

44 46 48 50

52 NEAREST TOWN Fulton 71

MILES FROM TOWN (enter 0 if in town) 1 M I 73 76 77 78

**DRILLER INFORMATION**

Driller's Name Joseph L. Mayne License No. M S D 024

76 81

Firm Name Joseph L. Mayne Well Drilling

Address 5512 Ridge Rd. Mt Airy Md 21779

Signature Joseph L. Mayne Date 5/12/97

**DIRECTION OF WELL FROM TOWN (CIRCLE BOX)**

B 4

1 2

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

11 Looat Road 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

34 645 37

DISTANCE FROM ROAD FT

ENTER FT OR MI 38 39

TAX MAP: 45 BLK: \_\_\_\_\_ PARCEL \_\_\_\_\_

**WELL INFORMATION**

APPROX. PUMPING RATE (GAL. PER MIN.) 5

8 12

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

14 20

**USE FOR WATER (CIRCLE APPROPRIATE BOX)**

HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)

FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)

22  INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)

PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE APPROVAL)

TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

**NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL**

Howard COUNTY NAME 13 COUNTY NO.

STATE SIGNATURE \_\_\_\_\_ INSERT S → 41

DATE ISSUED 05/29/97

43 MM DD YY 48 CO SIGNATURE Joseph L. Mayne EXP. DATE \_\_\_\_\_

NORTH GRID 477 000 EAST GRID 0817 000

50 55 57 63

APPROXIMATE DEPTH OF WELL 200 FEET

24 28

APPROXIMATE DIAMETER OF WELL 6 NEAREST 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 DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)**

THIS WELL WILL NOT REPLACE AN EXISTING WELL

THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED

39  THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS

THIS WELL WILL DEEPEIN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) 41 \_\_\_\_\_ 52

**Not to be filled in by driller (MDE OR COUNTY USE ONLY)**

APPROP. PERMIT NUMBER \_\_\_\_\_ G A P \_\_\_\_\_ 63

WRITE INITIALS IN BOX PERMIT No. 10-94-1172

FORCE DS 67 68 70 71 72 73 74 75 76 77 78 79

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

1. WELL

2. \_\_\_\_\_

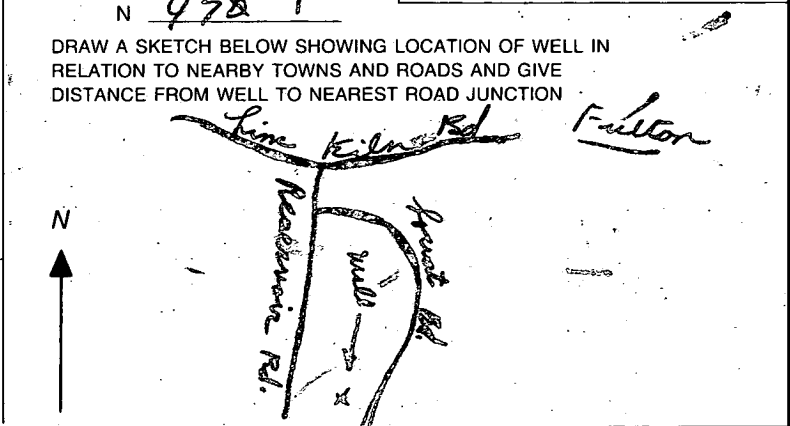
3. \_\_\_\_\_

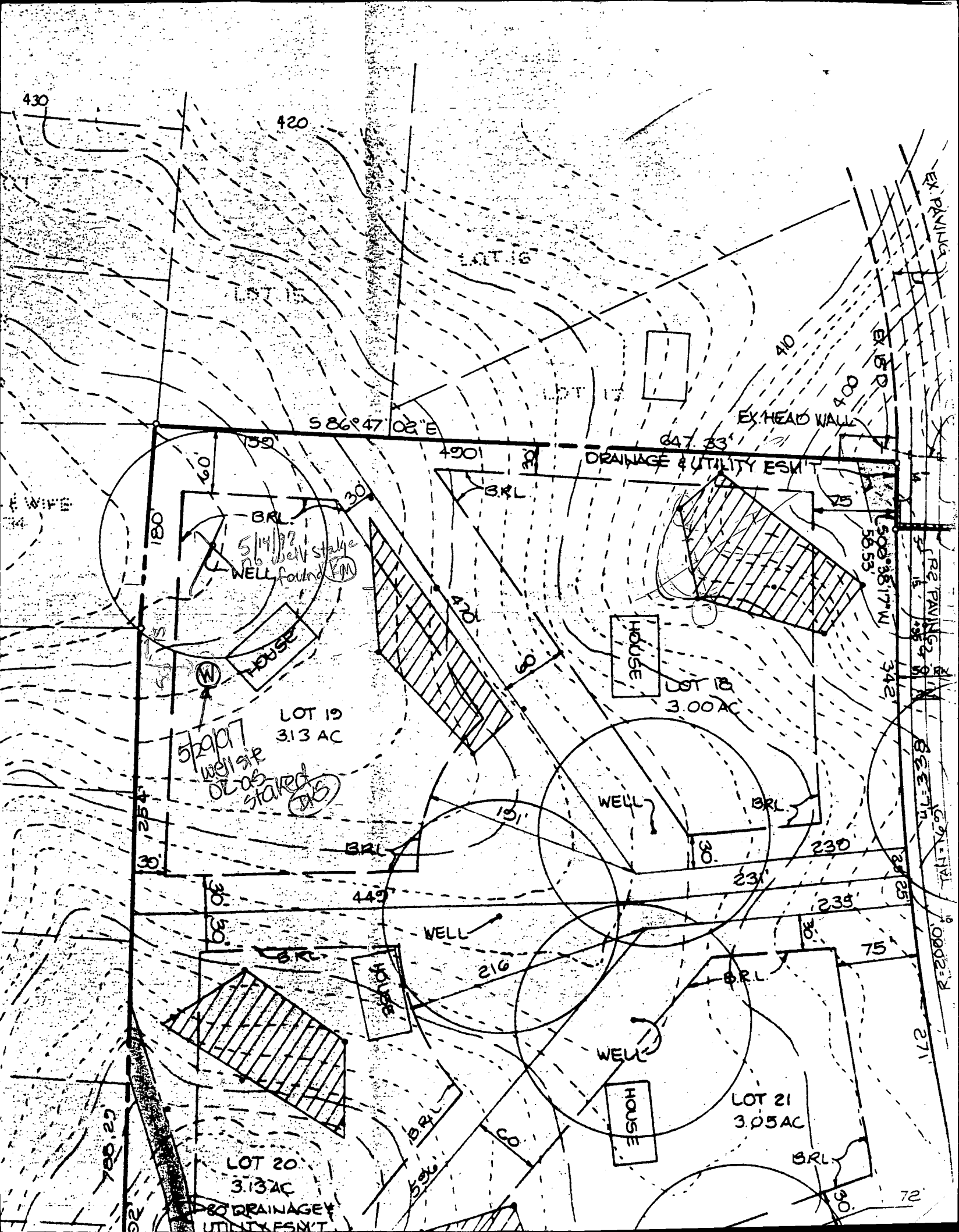
WRITE THE BOX NUMBER FROM THE MAP HERE

E 8107

N 4707

000  
000







Lot 8

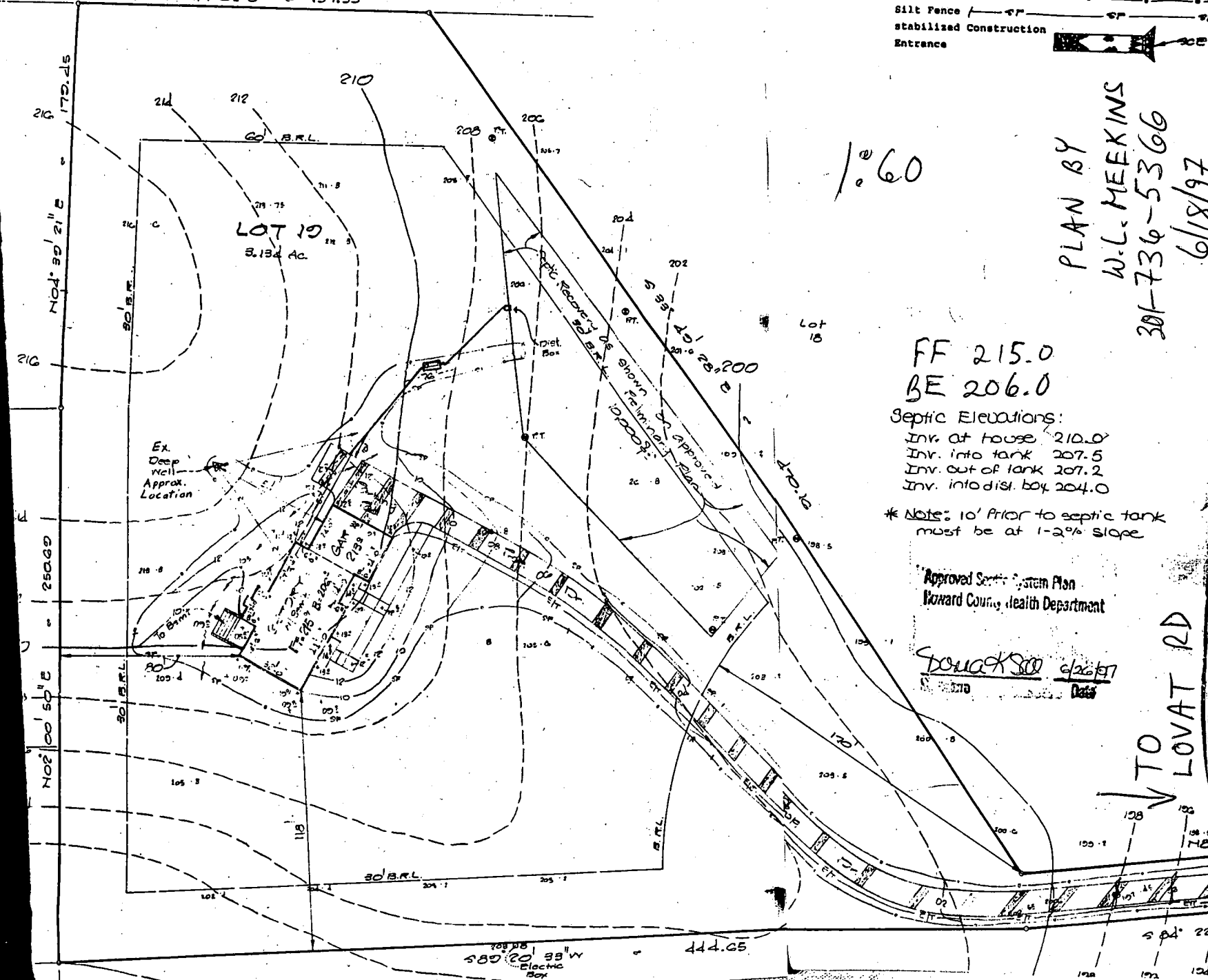
Lot 15

Williams Contingent Estates

F.B. 28 F. 21

586° 47' 02" E = 157.33

Proposed contours ——— 20  
 Ex. Spot Elevations 200.4  
 Prop. Spot Elevations + 00.5  
 Contour Intervals ——— 2 Ft.  
 Limit of Disturbance ———  
 Silt Fence ———  
 stabilized Construction Entrance



1° 60

PLAN BY  
 W.L. MEEKINS  
 301-736-5366  
 6/18/97

FF 215.0  
 BE 206.0

Septic Elevations:  
 Inv. at house 210.0  
 Inv. into tank 207.5  
 Inv. out of tank 207.2  
 Inv. into dist. box 204.0

\* Note: 10' Prior to septic tank must be at 1-2% slope

Approved Septic System Plan  
 Howard County Health Department

Donna K. [Signature] 6/26/97

TO LOVAT RD

589° 20' 33" W  
 Electric Box

444.65

584° 22'