

APPROVED
5/1/86
RH
P 36887
A REPAIR

5/1/86
1 PM

PERMIT

SEWAGE DISPOSAL SYSTEM
MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
~~XXXXXXXXXX~~
461-9933

ELLICOTT CITY
DISTRICT _____
DATE 5/5/86

INDEXED

Jack Fyock IS PERMITTED TO INSTALL _____ ALTER X

ADDRESS _____ PHONE 988-9270

SUBDIVISION Braeburn ROAD 6437 Lockridge LOT 33

PROPERTY OWNER Pancer
6437 Lockridge Road

ADDRESS _____

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES _____ NO

SEPTIC TANK CAPACITY _____ GALLONS NUMBER OF BEDROOMS 3

65
6
390

REPAIR - CALL FOR INSPECTION WHEN GROUND IS OPENED UP SO SANITARIAN CAN RECOMMEND REPAIR.

TRENCH OFF OLD DRY WELL 10 1/2 - 13 1/2
FT DEEP 6 FT OF STONE, 2 FT WIDE 65
FT LONG RIL

PLANS APPROVED BY C. Williams DATE 5/01/86

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: IF TRENCH IS USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH.

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 40 PVC OR ABS.

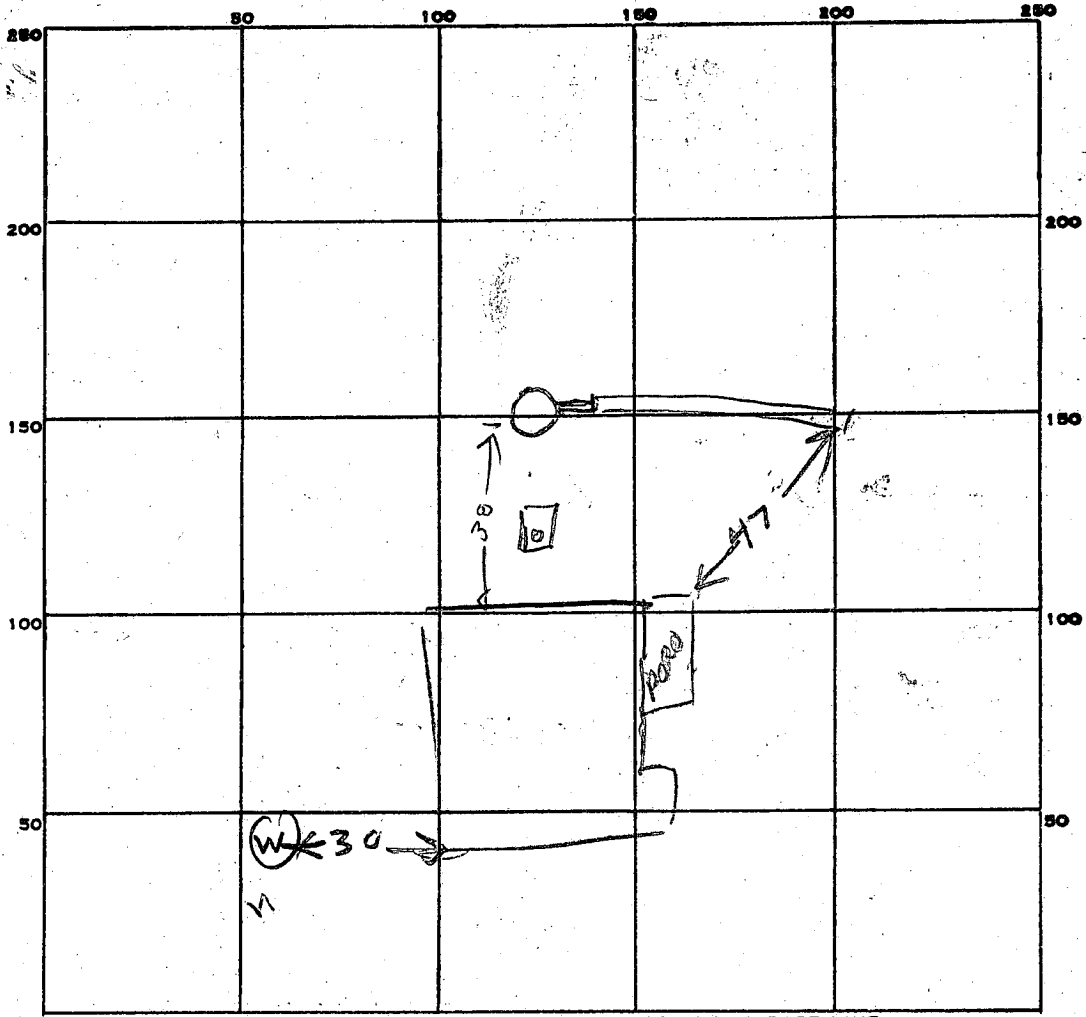
PERMIT VOID AFTER THREE YEARS.

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 PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

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

~~CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.~~

36887
A REPAIR



INDICATE NORTH NAME ADJOINING ROADWAY AS BASE LINE

WOLK RIDE RD

PERMIT CARD _____

SEPTIC TANK, LEVEL _____

CLEANOUTS _____

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH 10 1/2 - 13 1/2 FT. TRENCH WIDTH 2 FT.

GRAVEL DEPTH 6 IN. TOTAL LENGTH 50 FT.

NUMBER OF TRENCHES 1 TOTAL ^{ONE SIDE} BOTTOM AREA 360

62
5
57

SEEPAGE PITS, INSIDE DIAMETER _____ FT. DEPTH BELOW INLET _____ FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS 5/1/86^{R11} - TRENCH STARTED 10 1/2 - 13 1/2 FT DEEP ALL SANDY R11

5/1/86 - STONE ADDED.

DATE SYSTEM APPROVED 5/1/86

INSPECTOR Raymond Hood

62
52

3/30/73

after 11/11/72

File Final

PERMIT

SEWAGE DISPOSAL SYSTEM

P 17807

A 17665

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 5

INDEXED

DATE 12/18/72

M. W. Developers Assoc. IS PERMITTED TO INSTALL ALTER

(Wildes)

ADDRESS 6429 Lochridge Road, Clarksville, Md. PHONE 531-6661

A SEWAGE DISPOSAL SYSTEM LOCATED AT

SUBDIVISION Braeburn ROAD Lochridge LOT 33

PROPERTY OWNER Morton Pancer

ADDRESS

SPECIFICATIONS - 3 bedrooms

DRAIN FIELD DEPTH FEET, BOTTOM AREA SQ. FT.

SEEPAGE PITS ABSORBENT SIDE-WALL AREA SQ. FT.

SEPTIC TANK CAPACITY 1,000 GALLONS

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 22% & TANK CAPACITY 50%.

OTHER Dry well - 300 sq. ft. sidewall area below the inlet with the inlet

no deeper than 4 ft. and the bottom of the dry well no deeper than 12 ft. Place the

dry well 91 ft. from the back lot line and 21 ft. from the left side of the lot as seen

when facing the lot from Lochridge Road.

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON.

PERMIT VOID AFTER THREE YEARS.

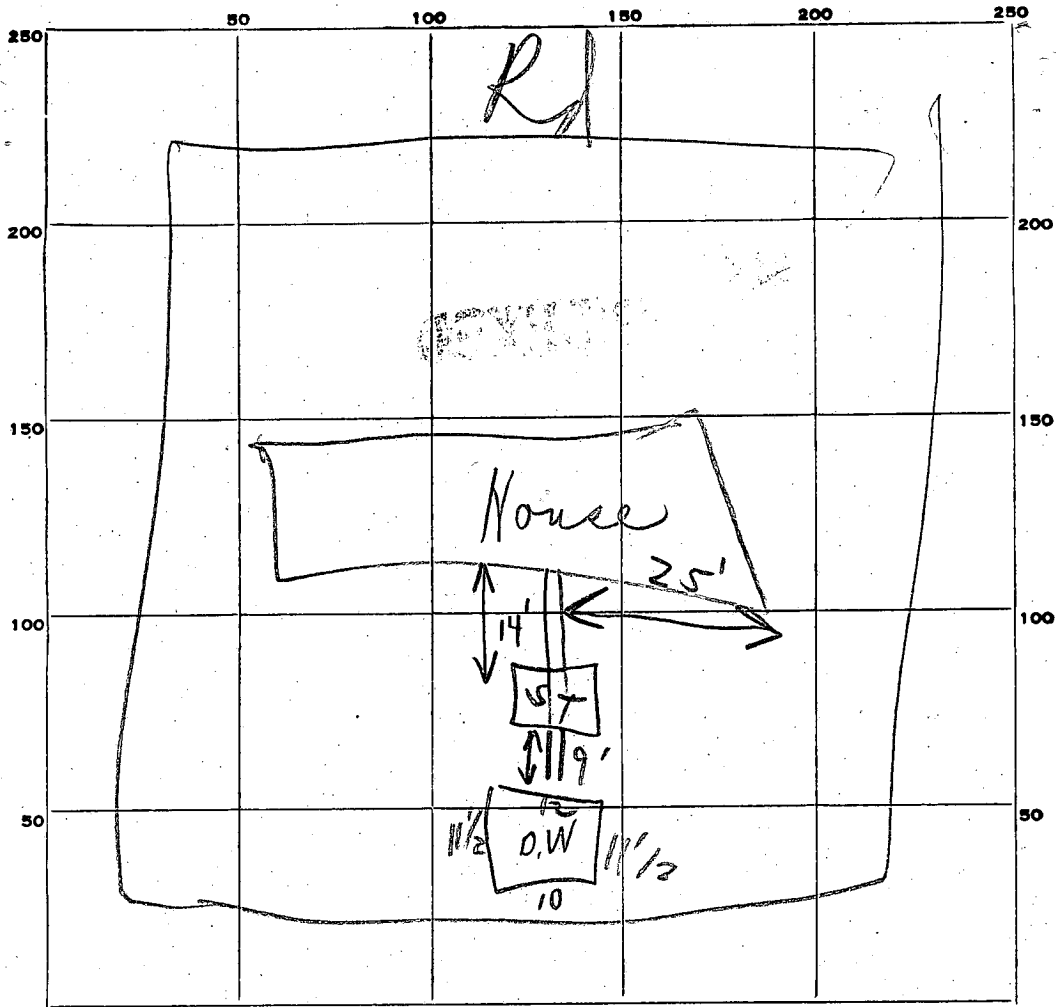
PLANS APPROVED BY Raymond Hodges DATE 11/29/72

NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL.

FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

NEITHER THE HOWARD COUNTY COMMISSIONERS NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

A 17665



11
2/2
8 1/2

PERMIT CARD Signed ST- | D.W.
 SEPTIC TANK, LEVEL OK CLEANOUTS OK | OK
 DISTRIBUTION BOX, LEVEL _____
 TILE FIELD, DEPTH _____ FT. TRENCH WIDTH _____ FT.
 GRAVEL DEPTH _____ IN. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA _____
 SEEPAGE PITS, INSIDE DIAMETER outside peris 45 FT. DEPTH BELOW INLET 8 1/2 FT.

45
8.5
22.5
360
382.5

ABSORBENT AREA 382.5 SQ. FT.
 REMARKS 3/30/73 Cast iron all the way
P. Well in area called for on spec

DATE SYSTEM APPROVED 3/30/73 INSPECTOR C. Stecker

Retest
11/29/72
9:30

APPLICATION

A 17665

P _____

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY 1000 Gal Tank

ELLICOTT CITY

DISTRICT 5th

DATE 11/21/72

2-1/2' Leds
50 ft pipe
1st Dry Well - 300 sq ft sidewalk
area below the inlet with the inlet
no deeper than 4 FT and the bottom of the
dry well no deeper than 12 FT
Place the dry well 9 FT from the back lot line
and 2 FT from the left side of the lot
as seen when facing the lot
from Lockridge Pk

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TESTS IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Morton Pancer

ADDRESS 10051 Windstream Dr., Columbia, Md. PHONE 730-5296

PROPERTY LOCATION:

SUBDIVISION Braeburn LOT NO. 33

ROAD AND DESCRIPTION Lochridge Road

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 1 acre TYPE BLDG. 3 bedrooms
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

SIGNATURE OF APPLICANT Walter D. Wilder

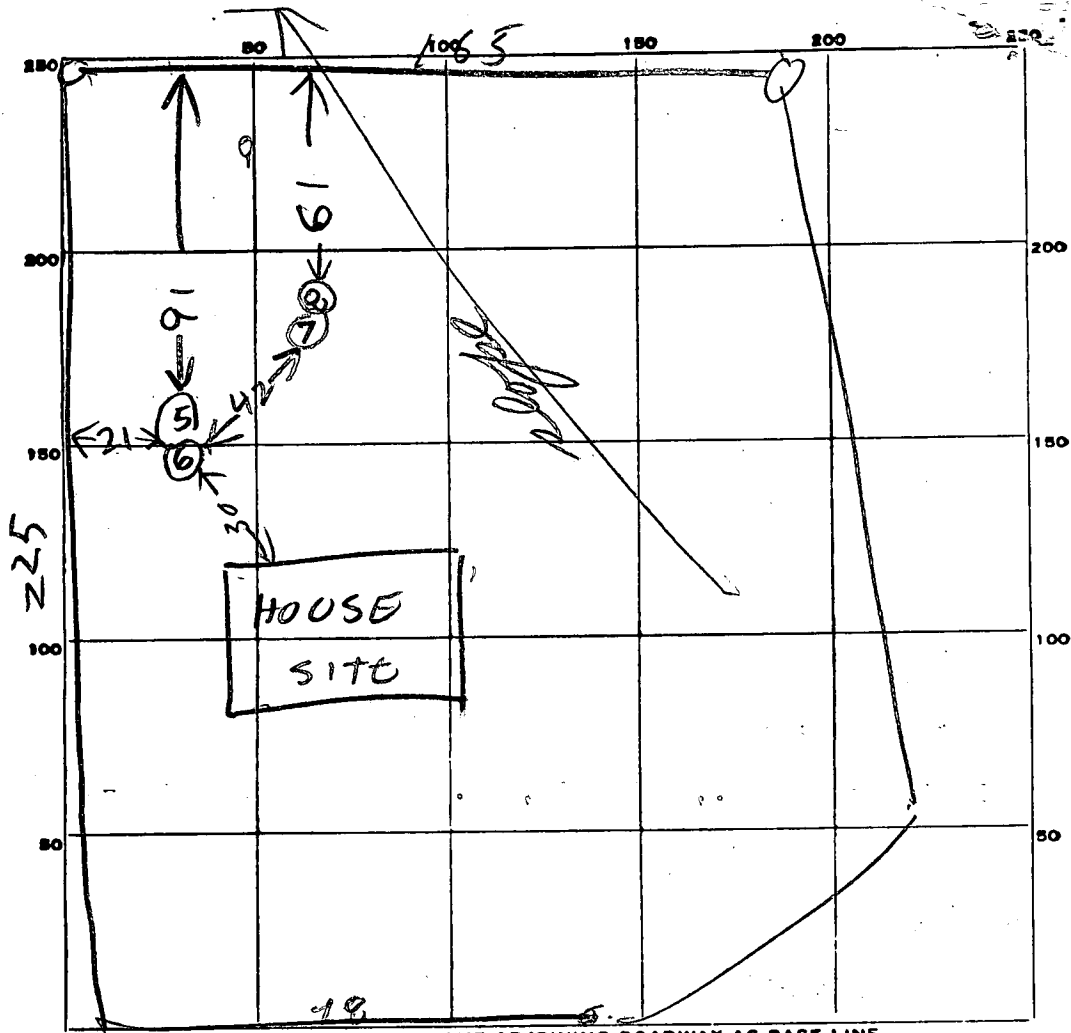
APPROVED BY Raymond Hodges FOR Thywell DATE 11/29/72
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

LOCKRIDGE RD

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11/29/62	5	12	1012	1013	1013	1016	3
1	6	4	1012	1013	1013	1016	5
1	7	12 1/2	1025	1026	1026	1027	1
1	8	4 1/2	1026	1029	1029	1040	11

SOIL AUGER FINDING _____
 TESTED BY *S. Hodge*
 REMARKS _____

2-121 Visual Hole

APPLICATION

A 09449

SEWAGE DISPOSAL TESTING

P _____

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

Septic Tank - 1000 gal

DISTRICT 5

Dry Well - 555 sq ft sidewall area below inlet pipe. Inlet pipe must be 4 ft below grade.

DATE 11/30/64

Locally Dry Well 42 ft from front lot line and 33 ft from left sideline as seen when facing lot from Lochridge Road

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TESTS IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER A. H. Young, Jr., Inc.

ADDRESS Ashton, Maryland PHONE WA 4-4103

PROPERTY LOCATION:

SUBDIVISION Braeburn LOT NO. 33

ROAD AND DESCRIPTION Lochridge Road

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

THE SYSTEM UNDER THIS PERMIT IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

ADDRESS _____ PHONE _____

SIZE OF LOT 1 acre TYPE BLDG. 4
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

SIGNATURE OF APPLICANT /s/ A. H. Young, Jr.

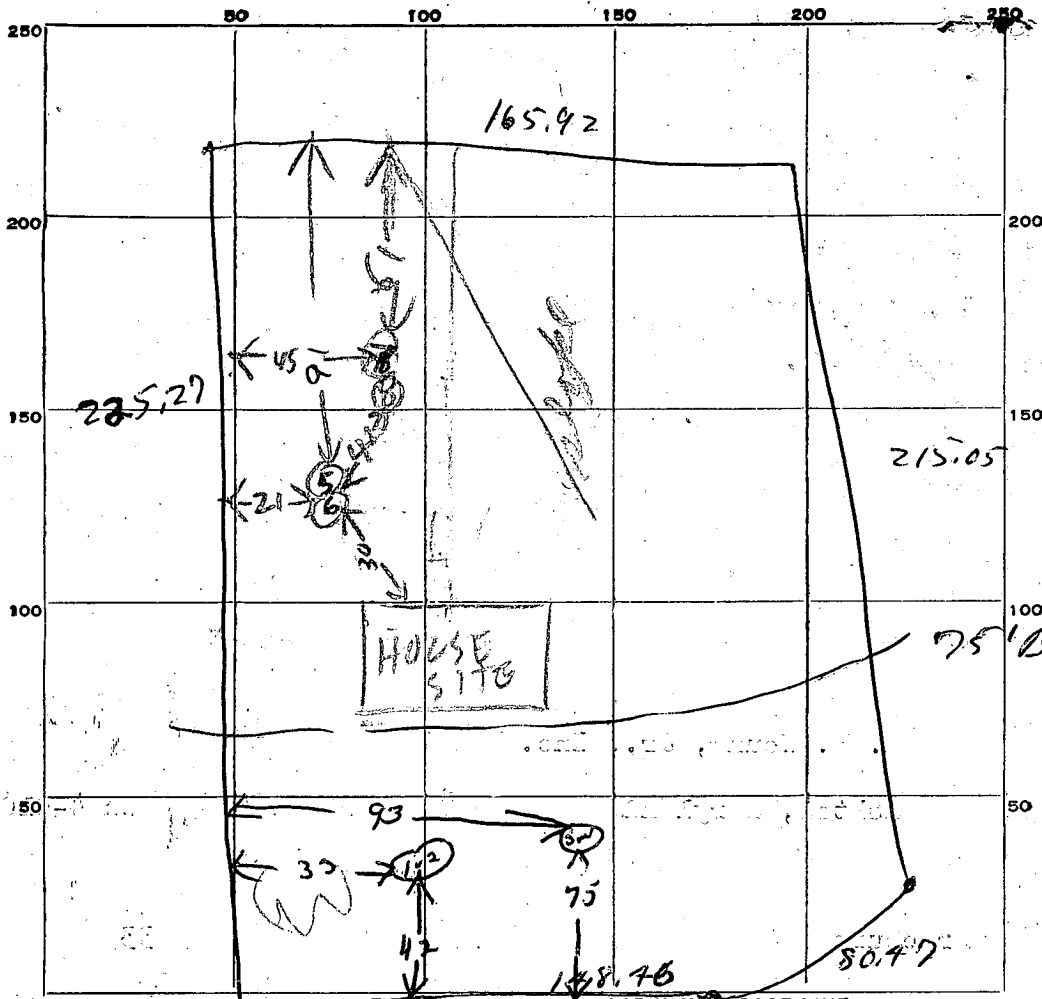
APPROVED BY DW. Monaghan FOR Dry Well DATE 12/8/64
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
12/8/64	1	10 1/2 ft	1130	1134	1134	1146	12 min
	2	4 ft	1130	1137	1137	1151	14 min
	3	4 1/2 ft	1133	1136	1136	1145	9 min
	4	10 1/2 ft	1132	1134	1134	1140	6 min
11/21/70	5	12	1012	1013	1013	1016	3
11/29/70	6	4	1013	1017	1017	1022	5
11/29/70	7	12 1/2	1025	1026	1026	1027	1
11/29/70	8	4 1/2	1026	1029	1029	1040	11

SOIL AUGER FINDING

TESTED BY Sum 12/8/64

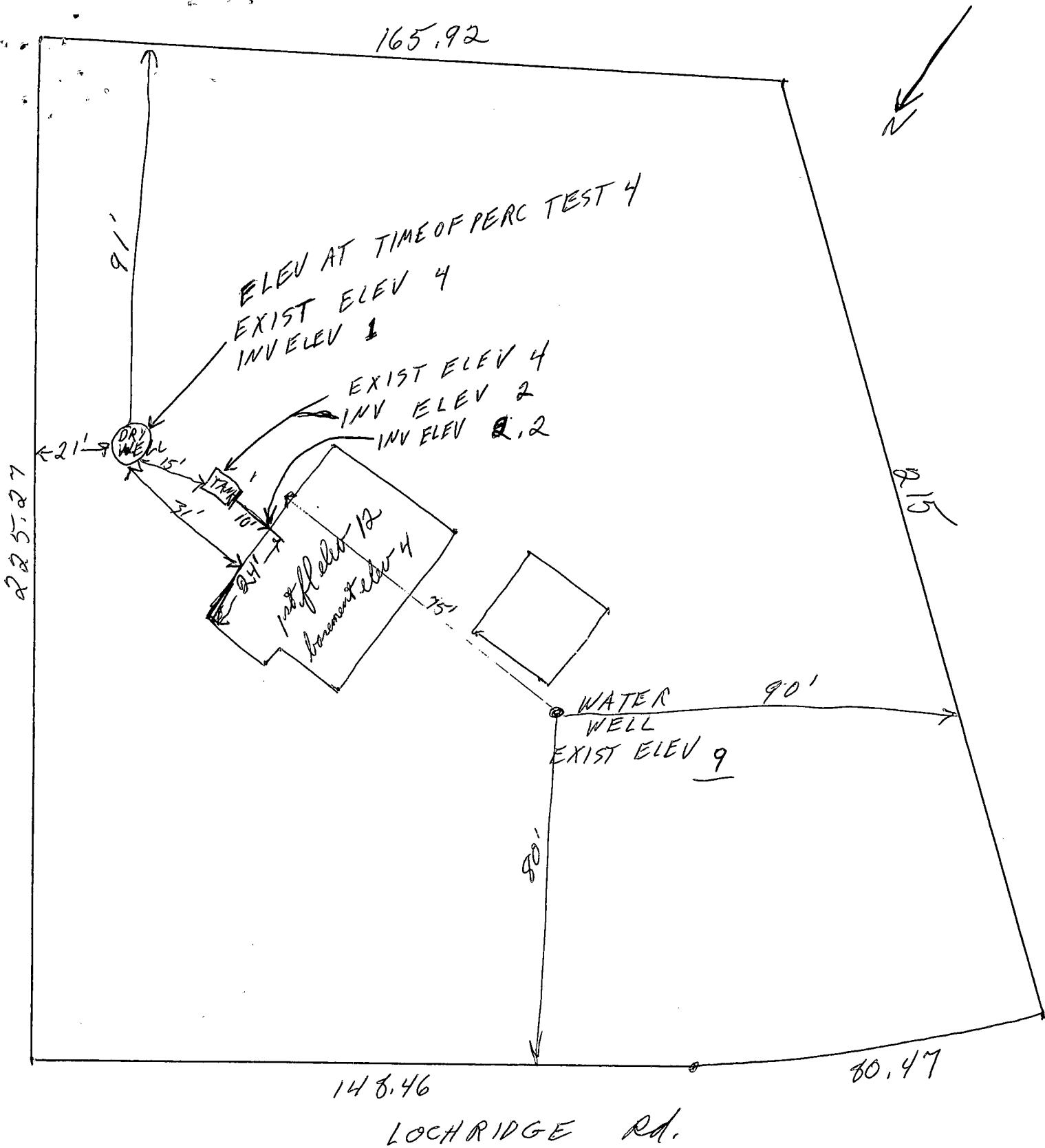
REMARKS

ALSO PRESENT 12/8/64 Proter/Sum

LOT NO. 33, Plat 3

Return

21
45



MORTON PANCER OWNER
 LOT 33 BLOCK 3
 BRAEBURN SUBDIVISION

WAYNE D. WILDES
 W. DEVELOPERS ASSOC.
 CONTRACTOR
 PHONE 531-6661

Plans of
 30 NOV 22
 R. Hooper

STATE OF MARYLAND DEPARTMENT OF WATER RESOURCES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401 APPLICATION FOR PERMIT TO DRILL WELL

DWR PERMIT NUMBER

16 B-1172 FILL IN THIS FORM COMPLETELY

B 1 1078 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

SEQUENCE NO. (DWR USE ONLY)

DATE RECEIVED (DWR USE ONLY) 4/18/73

OWNER Panzer morton FIRST NAME W. LAST NAME J. STREET OR RFD 6437 Lockridge Rd. POST OFFICE Clarksville md.

B 1 CONTINUED DRILLER INFORMATION DATE July 23 73 LICENSE NUMBER 42 DRILLER J F Eastwood

B 3 LOCATION OF WELL COUNTY Howard SUBDIVISION Bransborn SECTION 44 LOT 33 NEAREST TOWN Simpsonville MILES FROM TOWN 2

B 2 WELL INFORMATION MAXIMUM PUMPING RATE 5 AVERAGE DAILY QUANTITY NEEDED 600 USE FOR WATER DOMESTIC, HOME

B 4 DIRECTION FROM TOWN NEAR WHAT ROAD Cedar Lane ON WHICH SIDE OF ROAD WEST DISTANCE FROM ROAD 100

APPROXIMATE DEPTH OF WELL 100 FEET APPROXIMATE DIAMETER OF WELL 6 (NEAREST INCH) METHOD OF DRILLING USED AIR-ROTARY

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS, ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW... well 320 ft casing 70 ft sand 35 ft 9 pushed in with rods could only measure 25 ft with tape cement 30 bags

REPLACEMENT OR DEEPEMED WELLS THIS WELL WILL NOT REPLACE AN EXISTING WELL

NOT TO BE FILLED IN BY DRILLER (DWR USE ONLY) APPROPRIATION PERMIT NUMBER 54 ENGINEER REVIEW DISTRICT NO. 63

B 4 CONTINUED HEALTH DEPARTMENT APPROVAL STATE HEALTH COUNTY NAME Howard COUNTY NO. 3131 DATE 022673 APPROVED BY Palmer F. Wine Director

BOX NUMBER E 830 N 490 NORTH COORDINATE 50 51 52 53 54 55 EAST COORDINATE 57 58 59 60 61 62 63 ELEVATION AT WELL HEAD (FEET) 0/0 5/0

B 5 SPECIAL CONDITIONS 8-63 (DWR USE ONLY)

STATE OF MARYLAND DEPARTMENT OF WATER RESOURCES STATE OFFICE BLDG. ANNAPOLIS, MARYLAND 21401

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION

WELL COMPLETION REPORT

FILL IN THIS FORM COMPLETELY

SEQUENCE NO. (DWR USE ONLY) 6250 DATE RECEIVED (DWR USE ONLY) 4/13-73 DATE WELL COMPLETED 320

DEPTH OF WELL 320 (TO NEAREST FOOT) PERMIT NO. FROM "PERMIT TO DRILL WELL" 10-13-0192

DRILLERS IDENTIFICATION NO. 42

OWNER: Pancer, Houston STREET OR RFD: POST OFFICE: Clarksville, Md

WELL LOG

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

Table with columns: DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY), FEET (FROM, TO), CHECK IF WATER BEARING. Includes handwritten entries: Top soil 0-2, Sandy granite 2-62, Granite 62-320.

WELL DESCRIPTION

GROUTING RECORD: WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) YES [Y] NO [N]

TYPE OF GROUTING MATERIAL (CIRCLE BOX): CEMENT [CM] BENTONITE CLAY [BC] NO. OF BAGS 30 NO. OF POUNDS 3000 GALLONS OF WATER 150 DEPTH OF GROUT SEAL (TO NEAREST FOOT) FROM 0 TO 30 FT.

CASING RECORD

CASING TYPES: INSERT APPROPRIATE CODE BELOW. MAIN CASING TYPE: [ST] NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) 6 TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) 70

OTHER CASING (IF USED)

DIAMETER (INCH) DEPTH (FEET) FROM TO

SCREEN RECORD

SCREEN TYPE OR OPEN HOLE: INSERT APPROPRIATE CODE BELOW. STEEL [ST] BRASS OR BRONZE [BR] OPEN HOLE [HO] PLASTIC [PL] OTHER [OT]

DEPTH (NEAREST WHOLE FOOT)

Table for screen depth with columns 1-6 and rows 1-3. Includes handwritten entries: 11-15, 23-24, 38-39.

CIRCLE APPROPRIATE BOXES: [A] A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED [E] ELECTRIC LOG OBTAINED [C] COPY OF ELECTRIC LOG ATTACHED

I HEREBY CERTIFY THAT I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CAPTIONED "PERMIT TO DRILL WELL"...

DRILLERS NAME: (PLEASE PRINT) Signature: S. J. St. ...

DIAMETER OF SCREEN 56 (NEAREST INCH) FROM TO

GRAVEL PACK IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX 68 [F]

DWR USE ONLY (NOT TO BE FILLED IN BY DRILLER) (E.R.O.S.) TELESCOPE CASING LOG INDICATOR

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) 2 PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 1 METHOD USED TO MEASURE PUMPING RATE bucket WATER LEVEL: (DISTANCE FROM LAND SURFACE) BEFORE PUMPING 40 WHEN PUMPING 300 TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX): [A] AIR [P] PISTON [T] TURBINE [C] CENTRIFUGAL [R] ROTARY [O] OTHER [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) YES [Y] NO [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)

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).