

10/18/89 AFTER 2

05-397790

PERMIT

P 43797

SEWAGE DISPOSAL SYSTEM

A 34758

MARYLAND STATE DEPARTMENT OF HEALTH DISTRICT 5th

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED

DATE _____

DATE SYSTEM APPROVED 11/3/89

INSPECTOR M. Riffkin

William Kimmel

IS PERMITTED TO INSTALL ALTER _____

ADDRESS _____ PHONE _____

SUBDIVISION Campbell Property ROAD 12850 Linden Church rd LOT 4

PROPERTY OWNER William Kimmel

ADDRESS _____

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

GARBAGE GRINDER? YES NO _____

SEPTIC TANK CAPACITY 1500 GALLONS NUMBER OF BEDROOMS 3

TRENCHES - 193 sq. ft. per bedroom with garbage disposal. Trench to be 2 feet wide. Inlet 5 feet below original grade. Bottom maximum depth 9 feet below original grade. Effective area begins at 5 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Start the trench 100 feet from the right lot line (355' lot line) and 230 feet from the 582.52 ft front lot line. as seen when facing the lot from Linden Church Road. Run trench(s) on level ground toward the rear lot line (675' lot line).

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

PLANS APPROVED BY Sid Abel DATE 3/10/88

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

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 TRENCHES ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCHES)

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

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

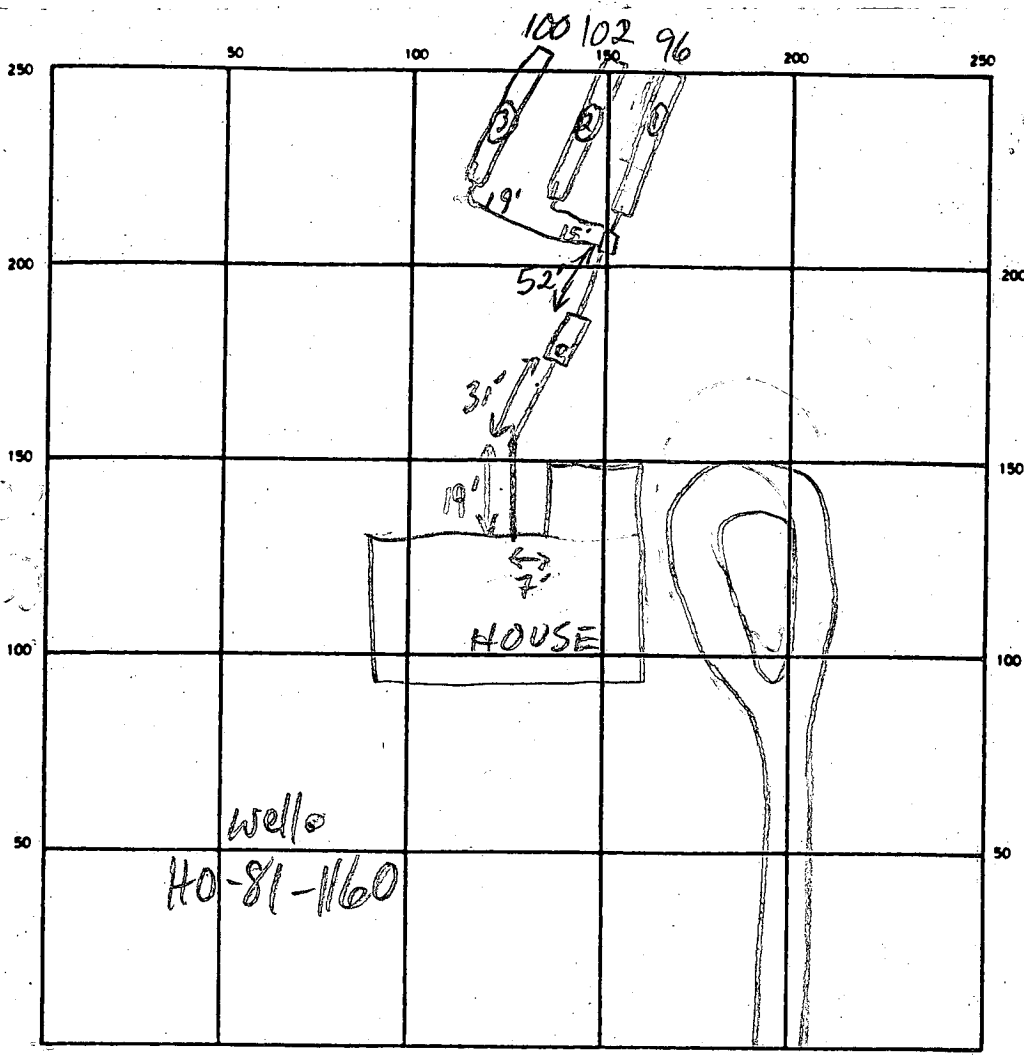
***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

HD-260

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

BOG. PERMIT SIGNED
AND RETURNED 4/22/90
Serial #33615 *prol*

A 34758



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

LINDEN CHURCH RD

SEPTIC TANK LEVEL 1500 GAL CLEANOUTS OK

DISTRIBUTION BOX LEVEL OK Baffle in

DRAIN FIELD/TILE FIELD DEPTH 9 FT TRENCH WIDTH 2 FT INLET DEPTH 4 1/2 AVG FT

EFFECTIVE GRAVEL DEPTH 4 1/2 AVG FT TOTAL LENGTH 96 102 100 298 FT

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 1350 SQ FT

DRYWELL INSIDE DIAMETER — FT EFFECTIVE DEPTH BELOW INLET — FT

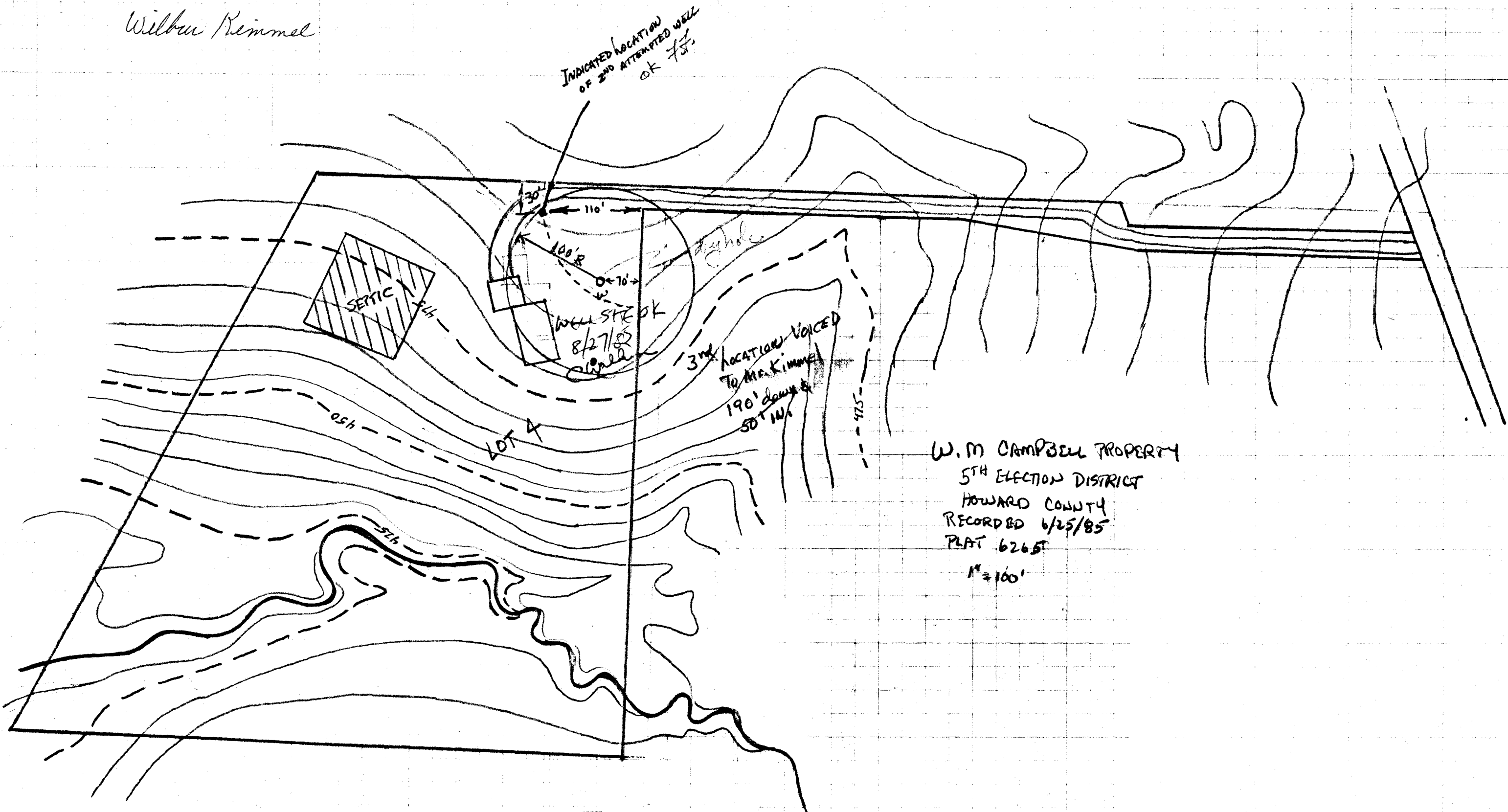
ABSORBENT AREA — SQ FT

REMARKS 10/18/89 OK TO STONE TRENCHES MR

11/3/89 OK TO COVER ALL WORK MR

DATE SYSTEM APPROVED 11/3/89 INSPECTOR M. Rittin

Wilbur Kimmel



W. M. CAMPBELL PROPERTY
 5TH ELECTION DISTRICT
 HOWARD COUNTY
 RECORDED 6/25/85
 PLAT 6265
 1" = 100'

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 34758

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT 5

DATE 1/8/85

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 Wendell Campbell

ADDRESS Adelphi Road, Adelphi, Md. PHONE 434-4416

PROPERTY LOCATION:

SUBDIVISION Campbell Property LOT NO. 4

ROAD AND DESCRIPTION Linden Church Road, Clarksville, Maryland
County Road

SIZE OF LOT 7.4 Acres TYPE BLDG. Single Family 4
(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. Donald J. Oliver - Agent
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

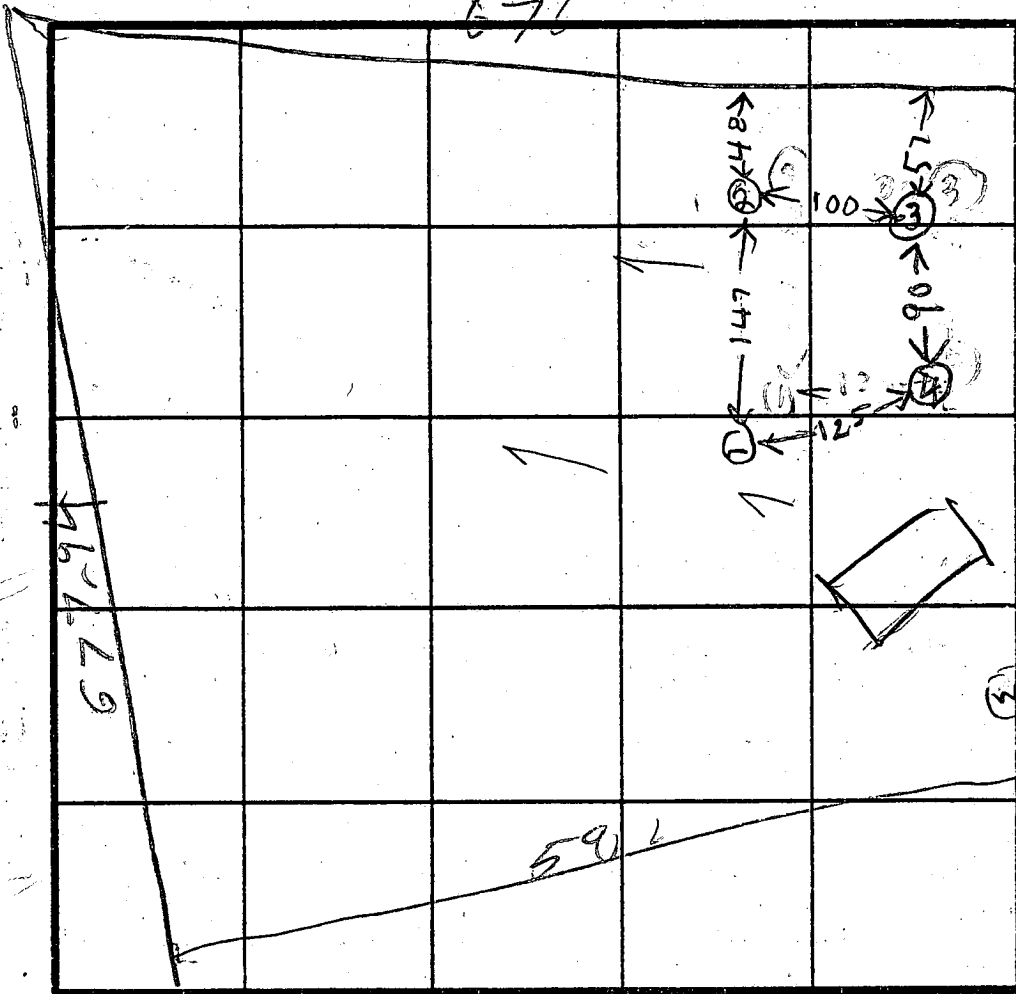
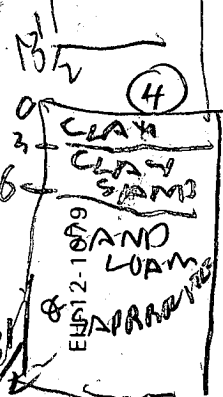
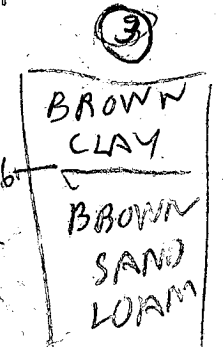
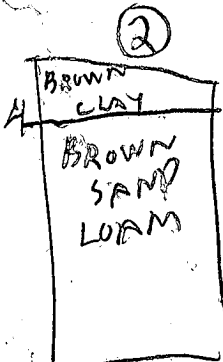
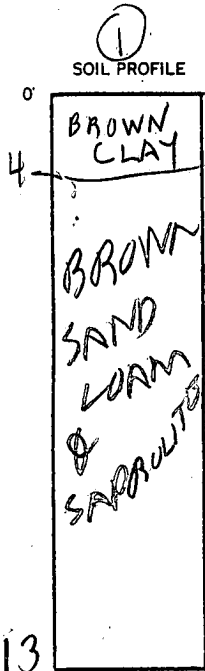
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

lot #4

676



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

See attached plat

HOLE ELEVATION
② = HIGH
③ = LOW

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2/7/85	1V	5	216	217	217	218	1
	2S	13	LOOKS OK				
	2V	5	237	238	238	246	2
	3M	12	LOOKS OK				
2/7/85	3S	4 1/2	320	352	little pen		
	3M	2 1/2	329	330	330	332	2
	3V	13 1/2	LOOKS OK		BELOW 6 FT		
2/7/85	4S	5	406	436	little pen		
	4V	18 1/2	416	417	417	420	3
2/7/85	4V	13 1/2	LOOKS OK		BELOW 6 FT		

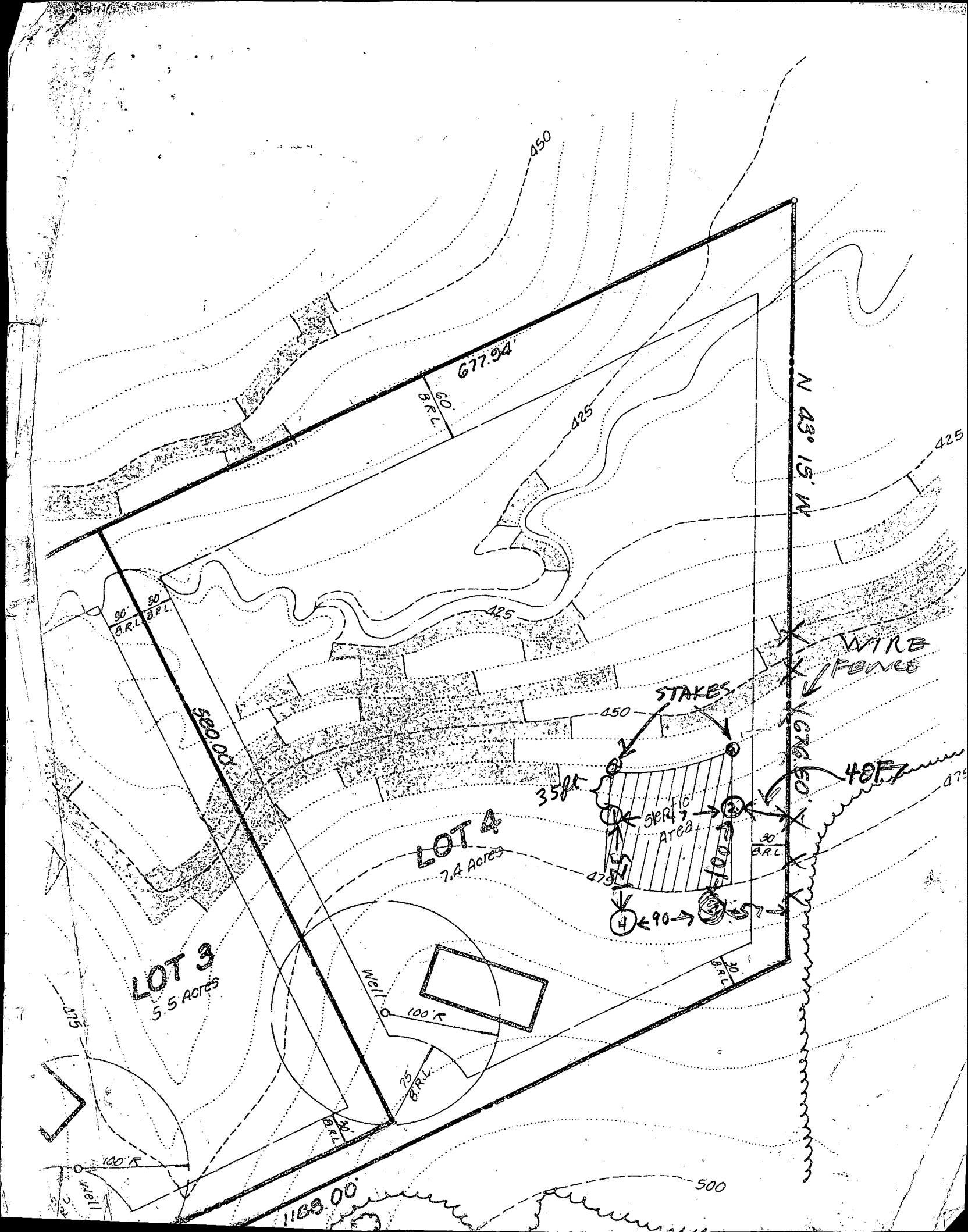
HOLE ELEVATION
② = HIGH
③ = LOW
X TIME 2'
TWT 5'
BOTTOM MAX 9'

REMARKS PERC HOLES SHIFTER 30 FT UP HILL FROM ENGINEERS PLAT

TYPE OF SOIL

TESTED BY B HODGES

ARCHIBALD BRYANT VANDERVALE
REAL ESTATE BROKER
ALSO PRESENT

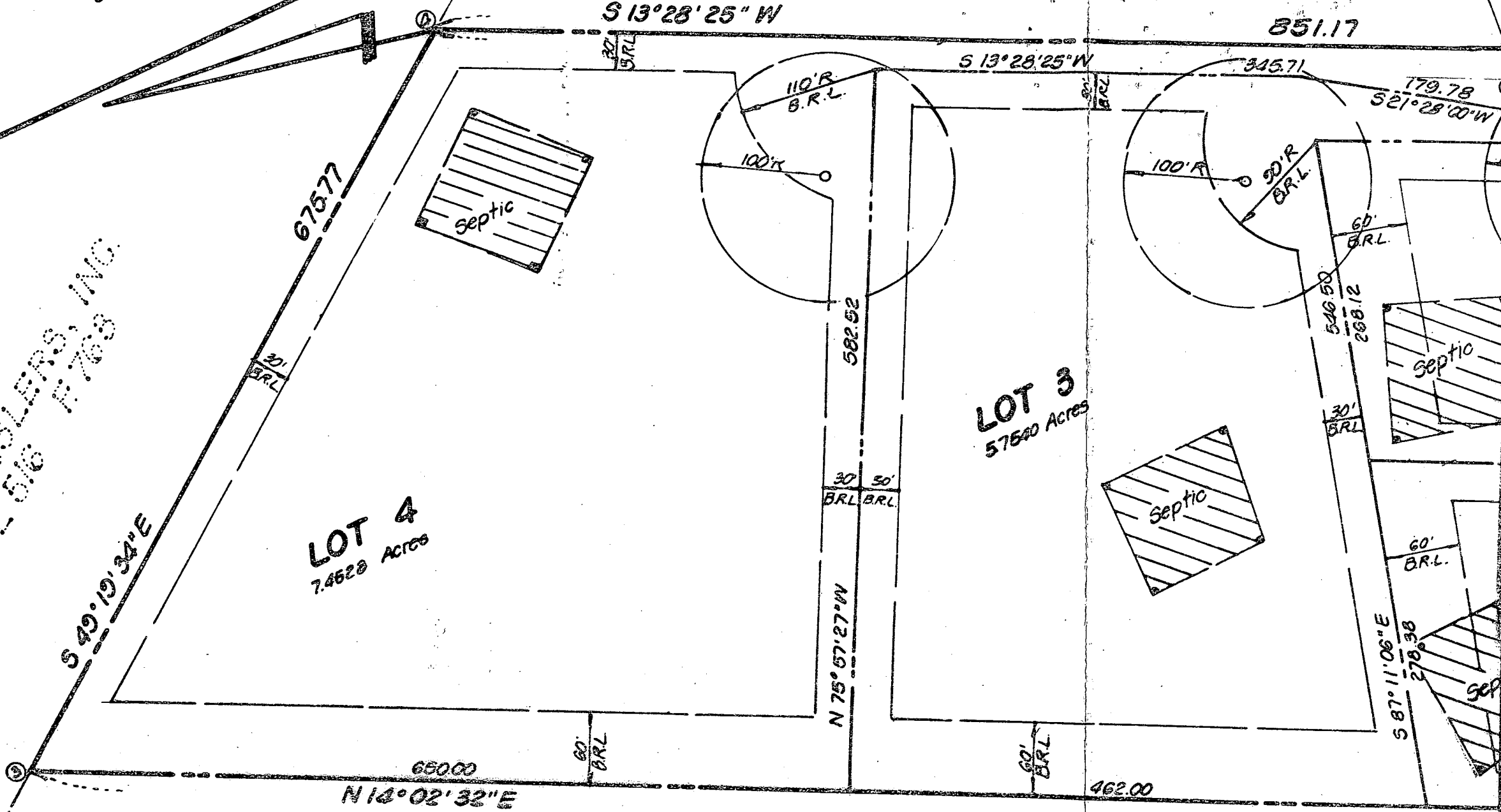


6/20/85
as signed
J.S.

ADDITION TO LINDEN

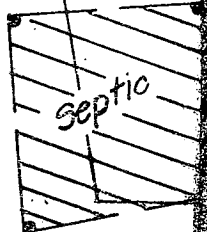
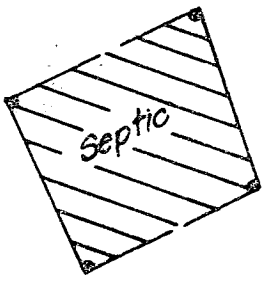
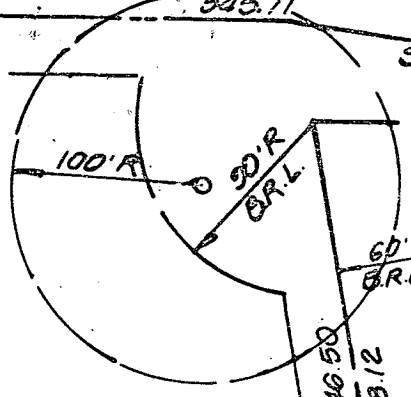
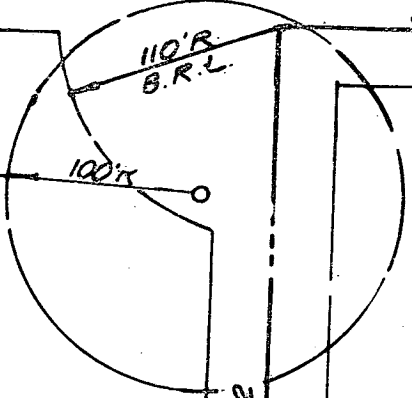
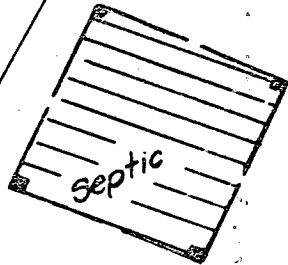
PLAT # 3503

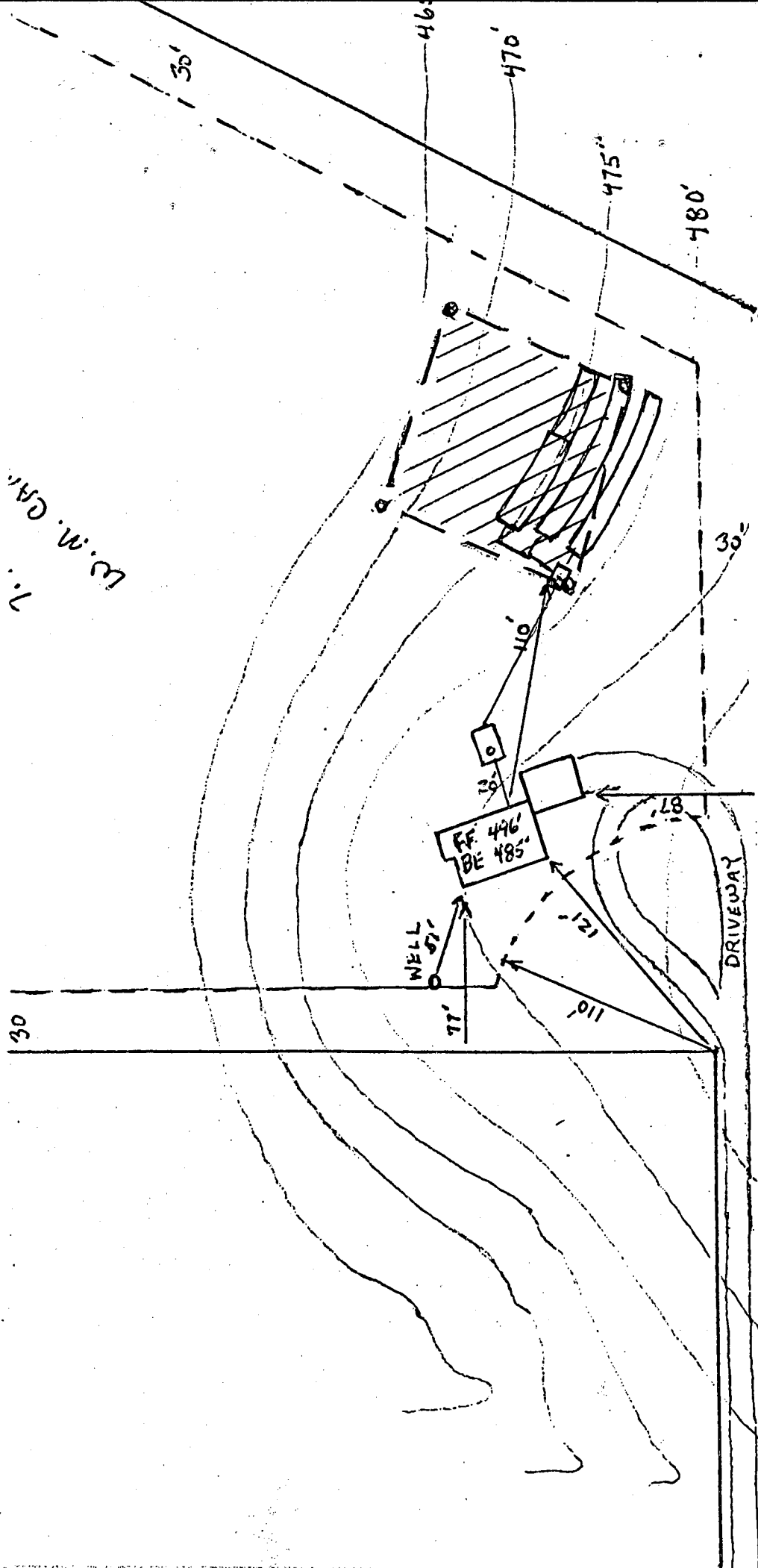
BASSIERS, INC.
L 516
P. 703



LOT 4
7.4628 Acres

LOT 3
57500 Acres





W.M. G.M.

- EXIST. ELEV. AT TRENCH ✓ 479'
- EXIST. ELEV. AT DIST. BOX ✓ 479'
- INV. ELEV (INTO) BOX ✓ 475'
- INV. ELEV (INTO) TRENCH ✓ 474.6"
- INV. ELEV (OUT OF) SEPTIC ✓ 481.4"
- TANK
- INV. ELEV. (INTO) SEPTIC TANK ✓ 481.7"
- EXIST. ELEV. AT SEPTIC TANK ✓ 483'
- INV. ELEV. (OUT OF) HOUSE ✓ 482.6"
- FIRST FLOOR ELEV. ✓ 496'
- BASEMENT FLOOR ELEV. ✓ 485'
- WELL ELEVATION ✓ 482.6"

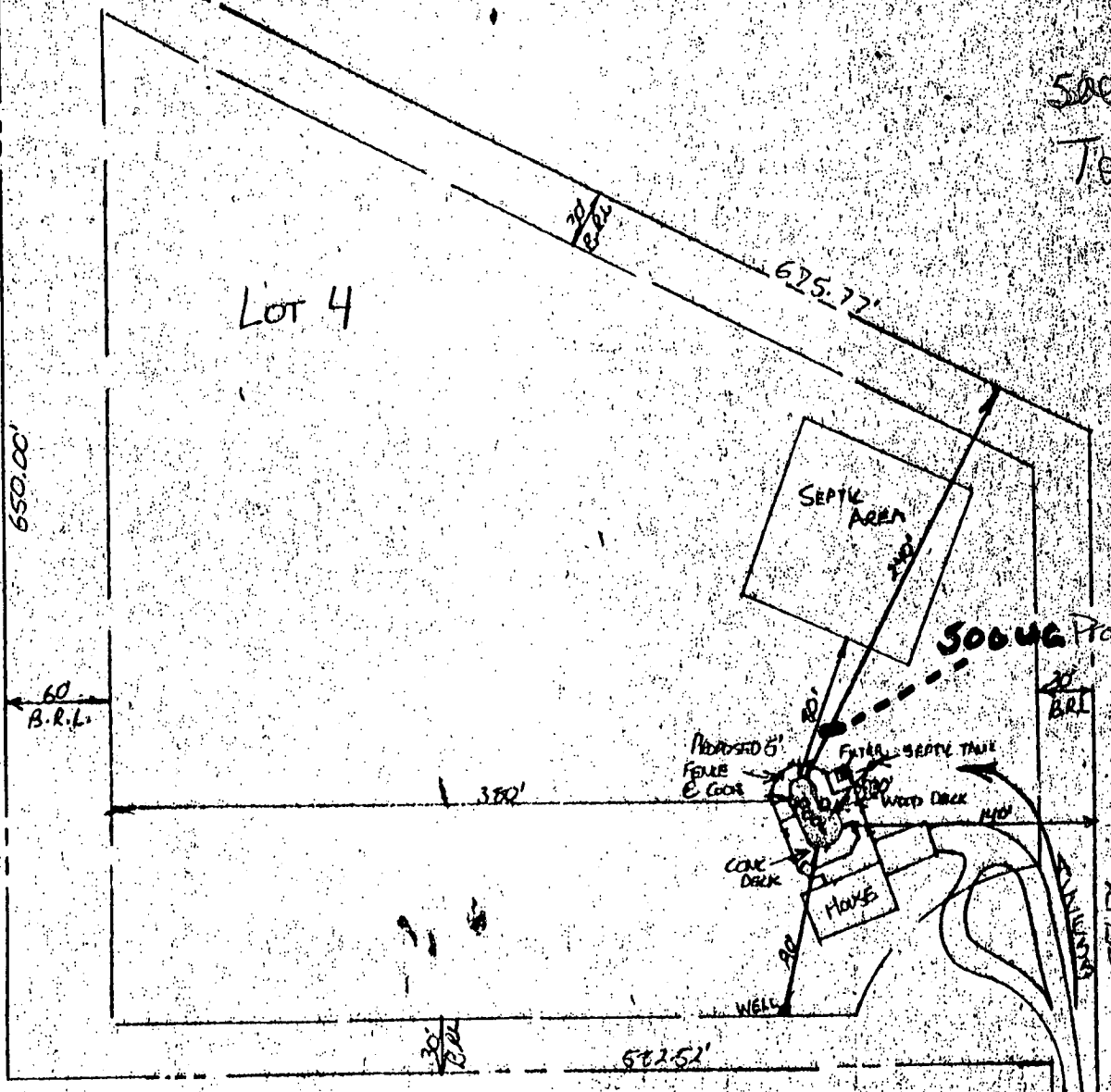
ELEVATIONS of 8/8

BLDG. PERMIT SIGNED AND RETURNED 3/10/88

BP 17106
8/8

ELEVATIONS TRULY AND CORRECT FOR THE PROPERTY
W. B. R. [Signature]

BP 38819
500 gal propane
Tank
OK'd
7/8/19
(180)



Lot 4
W. M. CAMPBELL PROPERTY

SCALE 1" = 100'

LINDEN CHURCH ROAD

11/3/89 pm

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043
461-9933

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation X Replacement _____
Receipt # 45724 Date 10/30/89
Name of Installer FEAGA P/bgr Htg Telephone 442-5729
License Number 6318
Certified Well Pump Installer _____ Well Driller _____ Registered Plumber X
Name of Property Owner William Himmel Telephone 997-8648
Subdivision W.M. Campbell Lot # 4 Well Tag # HD - 88-1160
Site Address 12820 Linden Chapel

Pump
1. Type
a. Deep well jet _____
b. Shallow well jet _____
c. Submersible X
2. Make Goulds
3. Model # _____
4. Capacity _____ GPM
5. Pump exceeds well capacity Yes _____ No X
6. If Yes, is low pressure cutoff switch installed? Yes _____ No X
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors _____ Cable guards _____ Other X

Motor
1. Horsepower 1/2
2. RPM _____
3. Voltage _____
a. 110 _____
b. 220 X

Pitless Adapter
1. Make _____
2. Model # _____
3. Depth _____

Tank
1. Capacity 42 gal
2. Pressure relief valve? yes

Piping
1. Type plastic
2. Size 1/2
3. NSF and/or BOCA Code approved _____
4. Depth of supply line _____

Well data
1. Depth _____ ft.
2. Yield _____ GPM
3. Static water level _____ ft.
4. Will water supply be disinfected by installer? yes

P.A. OK @ 3' B.C.
MR 11/3/89

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

Signature of Applicant: Kenny Seay
Date: 10/30/89

Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.

C1 2416 SEQUENCE NO. (OEP 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 A34758

DATE Received

DATE WELL COMPLETED 092583

Depth of Well 300 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-81-1160

OWNER: KIMMEL WILBUR last name first name STREET OR RFD: LINDEN CHURCH RD TOWN: DAYTON SUBDIVISION: WM CAMPBELL PROP SECTION: LOT 4

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. Entries: BROWN SHALE 0 36, Craymich Rock 36 300, DRYWELL 320' Filled in with cement & drilling materials

GROUTING RECORD WELL HAS BEEN GROUTED (YES Y NO N) TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 59 NO. OF POUNDS 846 GALLONS OF WATER 34 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 17 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) 42

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

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

DEPTH (nearest ft.) HO 40 300

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

C 3

PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min. to nearest gal.) 7 METHOD USED TO MEASURE PUMPING RATE bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 19

WHEN PUMPING 123 TYPE OF PUMP USED (for test) S submersible

PUMP INSTALLED

DRILLER WILL INSTALL PUMP YES 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 2 (nearest foot)

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 10.17.13 "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.

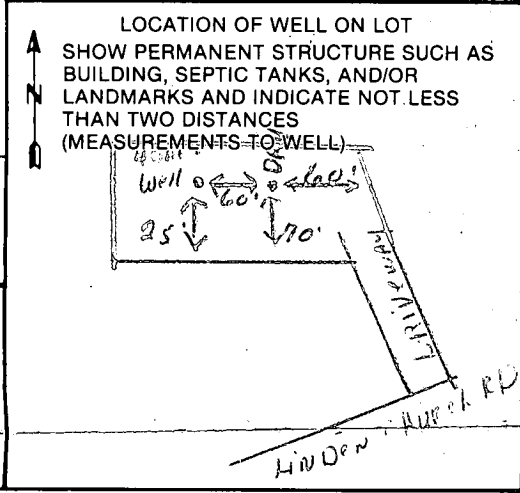
DRILLERS IDENT. NO. 238 Joseph T. Mays

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

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.) WQ TELESCOPE CASING LOG INDICATOR OTHER DATA



B 1 **8634** SEQUENCE NO. (OEP USE ONLY)

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

STATE OF MARYLAND
PERMIT TO DRILL WELL *6 root 9/30/85*

please print or type

OEP PERMIT NUMBER
HO-81-1160
 fill in this form completely

OWNER INFORMATION

Date Received **8/26/85**

Kimberly Wilbur
 Last Name Owner First Name

6345 Beechwood Dr.
 Street or RFD

Columbia MD 21046
 Town State Zip

LOCATION OF WELL

HOWARD COUNTY

WMCAMPBELL PROP SUBDIVISION

SECTION **44** LOT **4**

DAYTON NEAREST TOWN

MILES FROM TOWN (enter 0 if in town) **2 1/2** MI

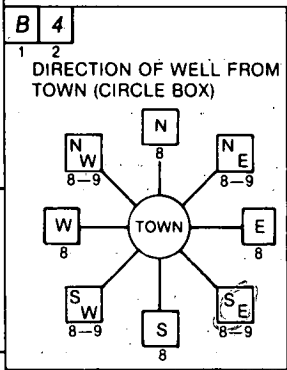
DRILLER INFORMATION

Joseph C. Wagner
 Driller's Name 238 License No. 80

Joseph C. Wagner Well Drilling
 Firm Name

5512 Ridge Rd. Mt. Airy, Md 21111
 Address

Joseph C. Wagner 8/15/85
 Signature Date



Finster Church Road NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

NORTH
 WEST
 EAST
 SOUTH

DISTANCE FROM ROAD **850** FT

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)

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 **A 34758** COUNTY NO.

OEP SIGNATURE _____ STATE HEALTH INSERT S _____

DATE ISSUED **082785** *Cian Williams* 2/27/86
 CO SIGNATURE EXP. DATE

NORTH GRID **509000** EAST GRID **0812000**

APPROXIMATE DEPTH OF WELL **300** 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

other _____

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

- WELL
-
-

WRITE THE BOX NUMBER FROM THE MAP HERE

810 2
500 9

Not present at time of ground 9/30/85

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

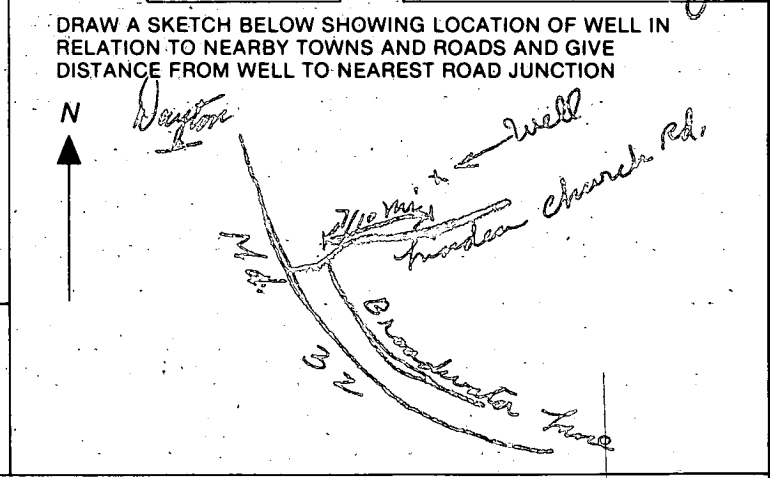
THIS WELL WILL NOT REPLACE AN EXISTING WELL

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

THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY

THIS WELL WILL DEEPEN 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 **CU** WRITE INITIALS IN BOX PERMIT No. **HO-81-1160**