

6-16-86
ASAP
6/18/86

6/18/86
approved
S. Axel

PERMIT

P 37153
A 34869

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
X382-2330
461-9933

INDEXED

04-344111

ELLICOTT CITY
DISTRICT 4th
DATE 6/13/86

Bud Arnold IS PERMITTED TO INSTALL X ALTER

ADDRESS _____ PHONE 795-1285 / 795-7818

SUBDIVISION Warfield Estates ROAD 14576 MacClintock Drive LOT 37, Sec. 7

PROPERTY OWNER Mr. & Mrs. Robert Coe

ADDRESS _____

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

GARBAGE GRINDER? YES _____ NO X

SEPTIC TANK CAPACITY 1000 GALLONS NUMBER OF BEDROOMS 3

TRENCHES - 200 sq. ft. per bedroom. Trench to be 3 feet wide. Inlet 3 1/2 feet below original grade. Bottom maximum depth 5 feet below original grade. Effective area begins at 3 1/2 feet below original grade. 1 1/2 feet of stone below distribution pipe.

LOCATION - Place the distribution box 40 feet from the front lot line and 115 feet from the right lot line as seen when facing the property from MacClintock Drive. Run trench(s) along contour toward right lot line.

NOTE * BE CERTAIN ALL PARTS OF SEPTIC SYSTEM AREA AT LEAST 100 FEET FROM ANY WELL.
- No trench to exceed 100 feet in length. If more than one trench used, a distribution box is required. Call for inspection of trench(s) before and after gravel is installed. Provide 6" - 8" diameter cleanout and cap to ground or above on septic tank. ok/cw

BLDG. PERMIT SIGNED
AND RETURNED 7/9/86
Serial # 44345-2 deck

PLANS APPROVED BY C. Williams DATE 6/12/86

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.

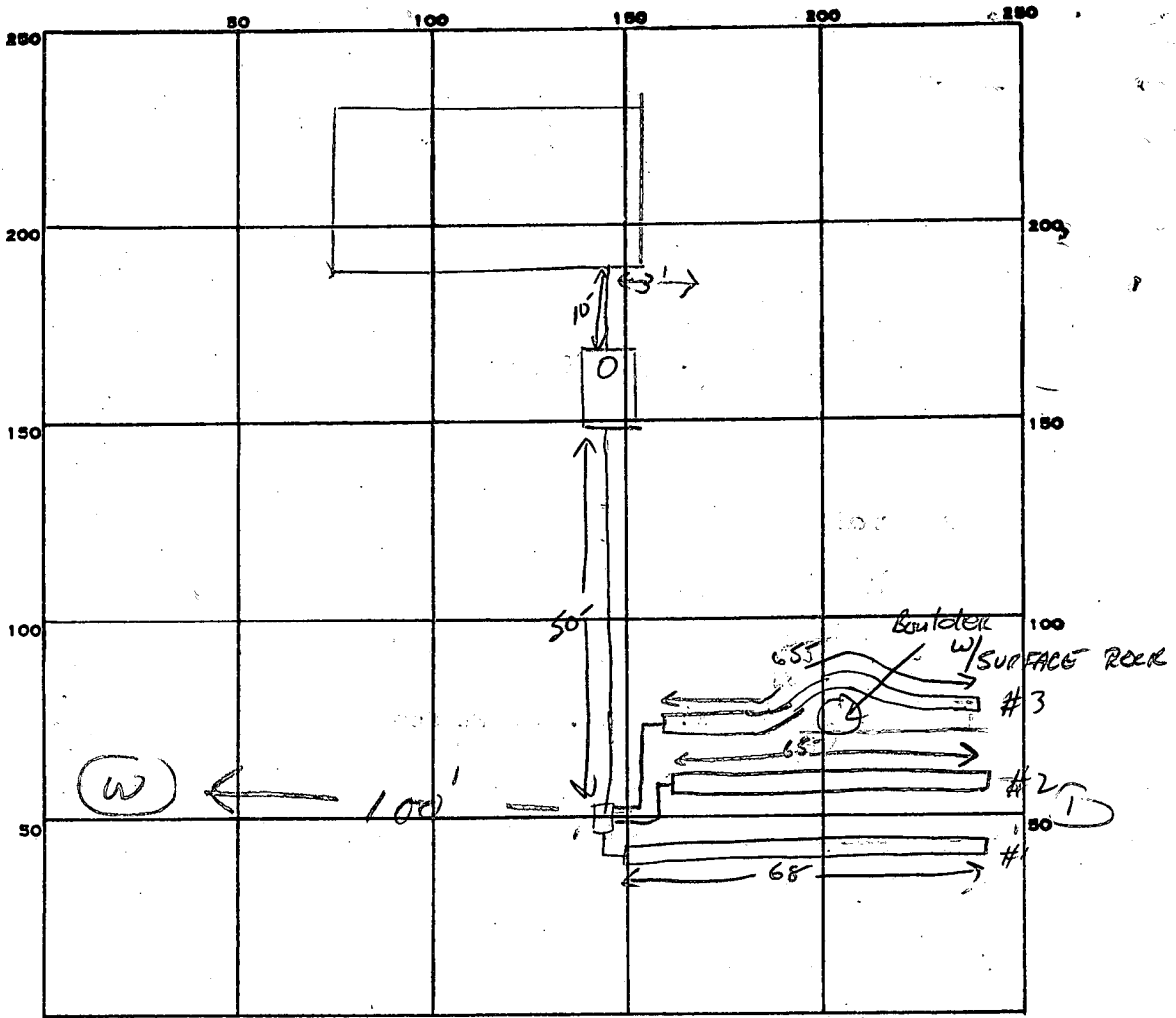
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA. OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

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

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

A
34869



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

Mac Clintock Dr.

PERMIT CARD

SEPTIC TANK, LEVEL 1500 gal CLEANOUTS 5

DISTRIBUTION BOX, LEVEL

TILE FIELD, DEPTH 5' FT. TRENCH WIDTH 3 FT. INLET 3.5"

GRAVEL DEPTH 7 1/2 IN. TOTAL LENGTH 68' 66' 66' TOTAL 200'

NUMBER OF TRENCHES 3 TOTAL BOTTOM AREA 600 sq ft

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

ABSORBENT AREA 600 SQ. FT.

REMARKS Work OK 6-16-86

4/18/86 - TRENCH #1 + 2 OR TRENCH #3 BANDS AROUND AREA OF BOULDER - SOIL IN THAT AREA LESS ROCKY THAN AREA OF BOULDER; ROCK WELL WEATHERED HOWEVER STRUCTURED AT 70-75° ANGLE; SURFACE PHENOMENON THAT APPEARS ONLY IN THAT AREA OF TRENCH; SOIL BELOW SIGNIFICANTLY LESS ROCKY W/ NO STRUCTURE. SATUR.

DATE SYSTEM APPROVED 6/18/86 INSPECTOR J. A. [Signature]

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

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

A 34869

P _____

DISTRICT 4th

DATE 1/25/85

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 _____

ADDRESS _____ PHONE Olen Ketterman 442-1336

PROPERTY LOCATION:

SUBDIVISION Warfield Estates LOT NO. 7 Parcel C2

ROAD AND DESCRIPTION MacClintock Drive & Stapleton Drive

SIZE OF LOT _____ TYPE BLDG. 3 or 4 Bedrooms
(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. /s/ Olen Ketterman

(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

3 4869

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

Howard County Health Department
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Court House Square
Ellicott City, Md. 21043
461-9933

New Installation Replacement
 Receipt # 36878
 Date 5/1/86
 Name of Installer C. R. GIDDINGS & SON Telephone 776-7623
 License number 4245
 Certified Well Pump Installer Well Driller Registered Plumber
 Name of Property Owner Robt Coc Telephone 937-3554
 Subdivision Warfield Est. Lot # 37 Well tag # - - -
 Site Address 14576 Mac Clinton Drive
Glenwood md. 21738

Pump
 1. Type
 a. Deep well jet
 b. Shallow well jet
 c. Submersible
 2. Make Gould
 3. Model # 7ES0422
 4. Capacity 7 GPM
 5. Pump exceeds well capacity Yes No
 6. If Yes, is low pressure cutoff switch installed? Yes No
 7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors Cable guards Other

Motor
 1. Horsepower 3/4
 2. RPM
 3. Voltage
 a. 110
 b. 220

Pitless Adapter
 1. Make Am. GRANBY
 2. Model # 800
 3. Depth 3 1/2 ft

Tank
 1. Capacity 80 gal
 2. Pressure relief valve? yes

Piping
 1. Type 160 LBS Polyethylene
 2. Size 1"
 3. NSF and/or BOCA Code approved
 4. Depth of supply line 3 1/2 ft

Well data
 1. Depth 165 ft.
 2. Yield 20 GPM
 3. Static water level ft.
 4. Will water supply be disinfected by installer? no

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: Charles A. Kelly
Date: 5-1-86

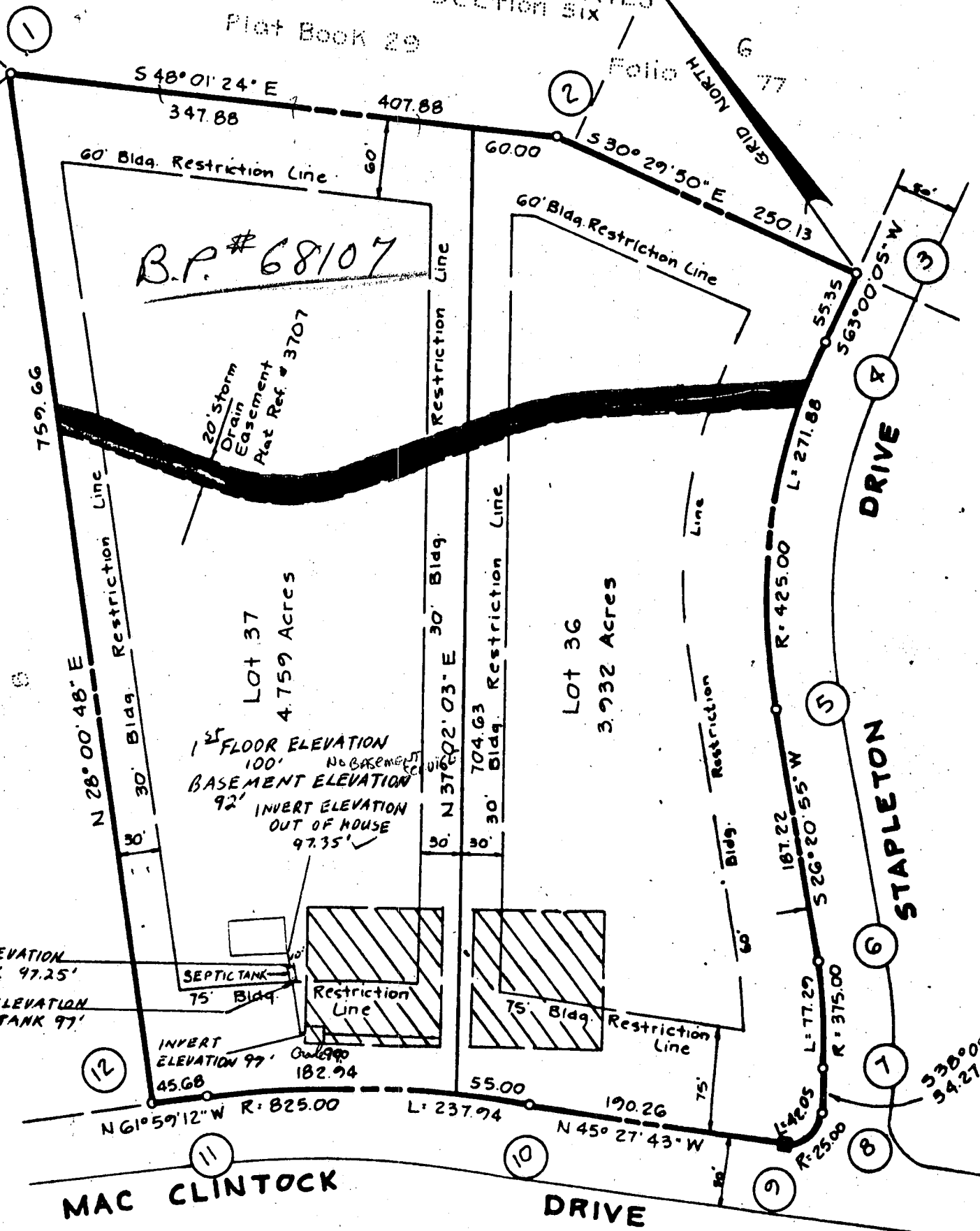
Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.

Sept 25th 12-18
4

WARFIELD ESTATES
SECTION SIX

Plat Book 29

WARFIELD ESTATES
SECTION SEVEN
PLAT NO. 3709



B.P. # 68107

20' Storm
Drain
Easement
Plat Ref. # 3707

LOT 37
4.759 Acres

1st FLOOR ELEVATION
100' No BASEMENT
BASEMENT ELEVATION
92'
INVERT ELEVATION
OUT OF HOUSE
97.35'

LOT 36
3.932 Acres

INVERT ELEVATION
INTO TANK 97.25'
INVERT ELEVATION
OUT OF TANK 97'

SEPTIC TANK
75' Bldg.

INVERT
ELEVATION 99' Out of
45.68 182.94

MAC CLINTOCK
DRIVE

STAPLETON
DRIVE

SCALE 1" = 100'

B 1 **1651** 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
 please print or type

OEP PERMIT NUMBER
40-81-1212
 fill in this form completely

Date Received **11/14/85**
0927FS OWNER INFORMATION
COE ROBERTY
4300 MAPLE PLACE
BELTSVILLE MD 20705

B 3 LOCATION OF WELL
HOWARD COUNTY
LARFIELD EST. SUBDIVISION
 SECTION **7** LOT **37**
GLENDWOOD NEAREST TOWN
 MILES FROM TOWN **1** MI

DRILLER INFORMATION
Ralph MAYNE License No. **273**
Ralph Mayne (well Drilling)
9120 Brown Church Rd. Mt. Airy
Ralph Mayne 9/23/85

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
 NEAR WHAT ROAD **McCLINTOCK DR.**
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 DISTANCE FROM ROAD **25** FT
 ENTER FT or MI **FT**

B 2 WELL INFORMATION
 APPROX. PUMPING RATE (GAL. PER MIN.) **5**
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **500**

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
HOWARD COUNTY NAME
A-34869 COUNTY NO.
 OEP SIGNATURE **Sid Apple** STATE HEALTH INSERT S
 DATE ISSUED **102185** EXP. DATE **4/21/86**
 NORTH GRID **525000** EAST GRID **0792000**

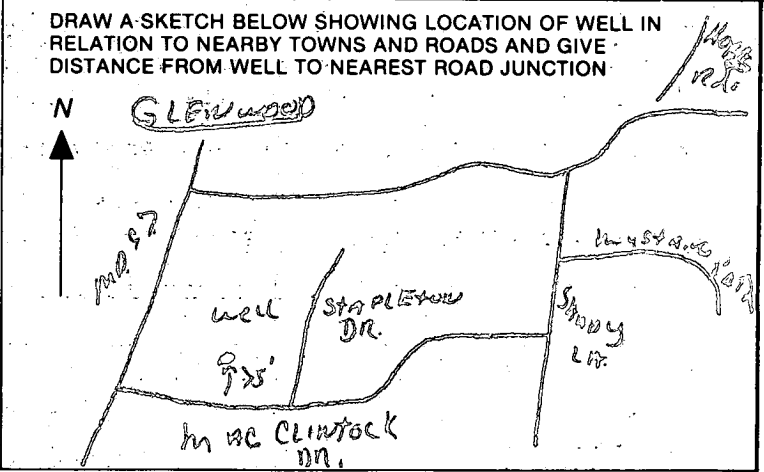
USE FOR WATER (CIRCLE APPROPRIATE BOX)
 HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
 INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
 PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
 TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

APPROXIMATE DEPTH OF WELL **150** FEET
 APPROXIMATE DIAMETER OF WELL **6"** NEAREST INCH

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
 SOURCES OF DRILLING WATER
 1. well
 WRITE THE BOX NUMBER FROM THE MAP HERE
E 790 2
N 520 5

METHOD OF DRILLING (circle one)
 BORED (or Augered) JETTED Jetted & DRIVEN
 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)
 CABLE REVERSE-ROTARY DRIVE-POINT
 other _____

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 DEEPEM 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 **G A P**
 FORCE **SA** WRITE INITIALS IN BOX PERMIT No. **40-81-1212**

SPECIAL CONDITIONS

C1 2469 SEQUENCE NO. (OEP USE ONLY)
 1 2 3 4 5 6
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
 WELL COMPLETION REPORT
 FILL IN THIS FORM COMPLETELY
 PLEASE PRINT OR TYPE

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
 COUNTY NUMBER A-34869

DATE RECEIVED [] DATE WELL COMPLETED 11/19/85 Depth of Well 1160 TO NEAREST FOOT PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-81-1212

OWNER COE last name ROBERT first name TOWN Glenwood
 STREET OR RFD McINTOCK DR. SUBDIVISION WARRIEN EST SECTION 7 LOT 39

WELL LOG
 Not required for driven wells

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

DESCRIPTION (Use additional sheets if needed)	FEET		Check if water bearing
	FROM	TO	
Top So. L	0	2	
Sandy	2	11	
Sand Stone	11	25	✓
Micka	25	50	
Sand Stone	50	55	✓
Micka	55	160	

GROUTING RECORD
 WELL HAS BEEN GROUTED (Circle Appropriate Box) YES Y NO N
 TYPE OF GROUTING MATERIAL
 CEMENT CM BENTONITE CLAY BC
 NO. OF BAGS 60 NO. OF POUNDS 600
 GALLONS OF WATER 36
 DEPTH OF GROUT SEAL (to nearest foot) from 0 to 22 ft.

CASING RECORD
 casing types insert appropriate code below
 ST STEEL CO CONCRETE
 PL PLASTIC OT OTHER
 MAIN CASING TYPE Nominal diameter top (main) casing (nearest inch) Total depth of main casing (nearest foot)
 PL 6 43

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 HO OPEN HOLE
 PL PLASTIC OT OTHER

DEPTH (nearest ft.)
 EACH SCREEN 1 HO 21 160
 2 [] [] [] [] [] []
 3 [] [] [] [] [] []

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. 273
 DRILLERS SIGNATURE Ralph Wayne
 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) Ralph S. Wayne
 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

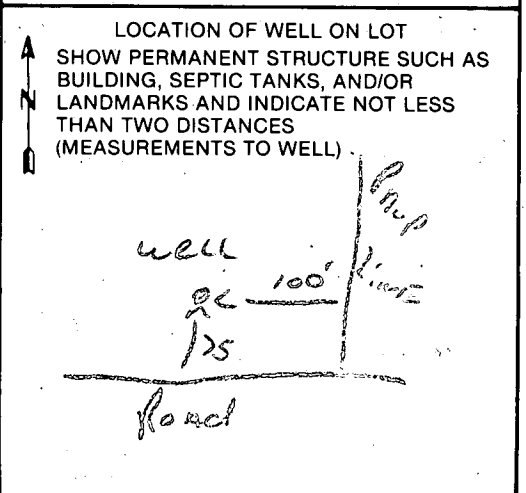
SLOT SIZE 1 2 3
 DIAMETER OF SCREEN [] (NEAREST INCH)
 GRAVEL PACK from to
 IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)
 T (E.R.O.S.) WQ
 70 [] 72 [] 74 [] 75 [] 76 []

TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST
 HOURS PUMPED (nearest hour) 3
 PUMPING RATE (gal. per min to nearest gal.) 17
 METHOD USED TO MEASURE PUMPING RATE Bucket
 WATER LEVEL (distance from land surface) BEFORE PUMPING 29 WHEN PUMPING 29
 TYPE OF PUMP USED (for test) A air P piston T turbine C centrifugal R rotary O other (describe below) J jet 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) + above } LAND SURFACE 2 (nearest foot) - below }



WARFIELD ESTATES
SECTION SIX
PB 29 F 77
LOT 4

LOT 15

S. 48° 01' 24" E. 347.88'

60' B.R.L.

Lot 37
4.759 ACRES

20' STORM DRAIN EASEMENT
PLAT REF # 3707

LOT 36

WARFIELD ESTATES
SECTION SEVEN
PB 29 F 77
PLAT # 3708
LOT 8

759.66'

N. 28° 00' 48" E. 30' B.R.L.

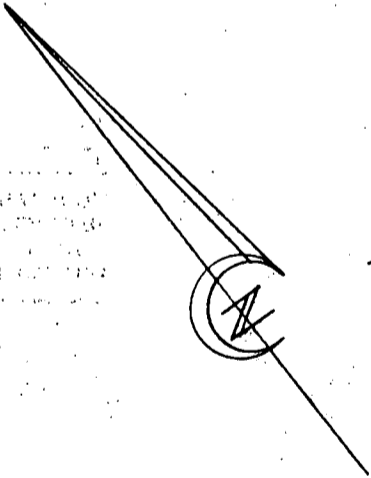
704.63'

N. 37° 02' 03" E. 30' B.R.L.

2 STORY FRAME HOUSE
W/BSM'T.
1ST FLOOR ELEVATION 104.15'

1 STORY FRAME

BP 44345
OK TO SIGN
7/9/92
Rgt



45.68' A. = 182.94'
N. 61° 59' 12" W R. = 825.00'

MACCLINTOCK DRIVE

HOUSE LOCATION SURVEY

LOT 37 SECTION SEVEN

WARFIELD ESTATES

RESUBDIVISION OF LOT 7 BLOCK C

PLAT No. 3707

4th ELECTION DISTRICT

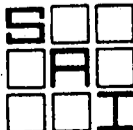
HOWARD COUNTY, MARYLAND

SCALE: 1" = 100' AUGUST, 1986



8/29/86

I CERTIFY THIS PLAT TO BE CORRECT; IT IS THE RESULT OF AN ACTUAL FIELD SURVEY, BASED ON DATA FOUND AMONG THE LAND RECORDS OF HOWARD COUNTY, MARYLAND, AS REFERENCED HEREON.



SHELADIA Associates, Inc.
CONSULTING ENGINEERS
310 A South Main Street, Mt. Airy MD. 21771
(301) 829-2890

REFERENCE

JOB NO.

PB 6478

86-1149