

7/19/85
3 PM

7/19/85
A.M.

WPT - 7/18/85

7-19-85
approved
S Abel

PERMIT

P 35324
A 33495

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
992-2330

05-396 047

ELLICOTT CITY

DISTRICT 5th

INDEXED

DATE 5/2/85

William H. Smith, Jr. IS PERMITTED TO INSTALL ALTER

ADDRESS P. O. Box 38, Darlington, MD 21034 PHONE 457-5570

SUBDIVISION Brighton Pines ROAD 13738 Lakeside Drive LOT 7

PROPERTY OWNER Brian Gentill

ADDRESS _____

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

GARBAGE GRINDER? YES NO

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 160 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 9 feet below original grade. Effective area begins at 4 feet below original grade. 5 feet of stone below distribution pipe. LOCATION: Locate trench 110 feet from the rear lot line (275 ft lot line) and 150 feet from the right lot line (561.19 ft lot line). Run trench(s) on level ground towards right lot line (561.19 ft. lot line). NOTE: 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 grade or above on septic tank.

340
1784
51640
14
140

65(2)

BLDG. PERMIT SIGNED
AND RETURNED 5/1/85
Sewal # 11766 - deck.

PLANS APPROVED BY Sid Abel DATE 5/1/85

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.

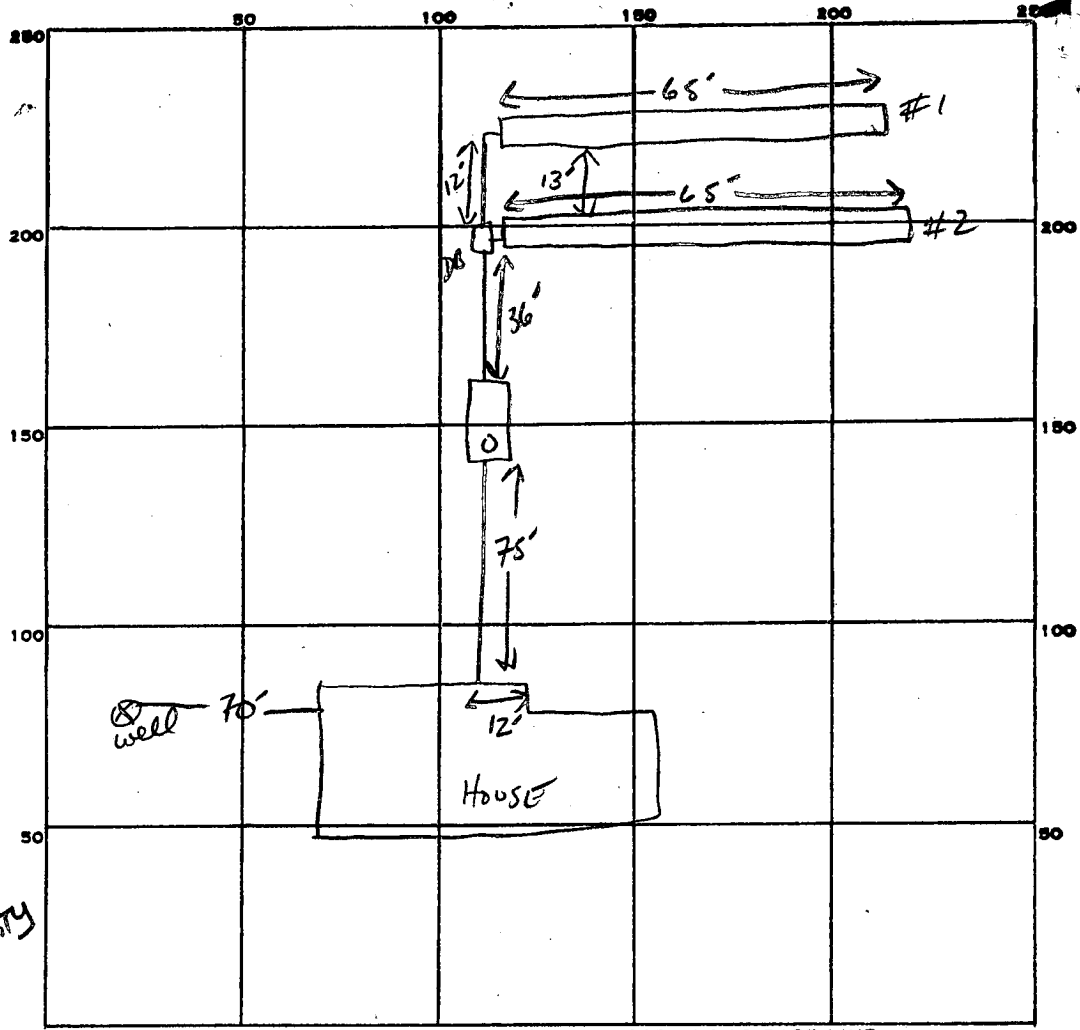
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

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

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

A 33495



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

40-81-0924
 well
 next
 property

PERMIT CARD

SEPTIC TANK, LEVEL 1500 GAL CLEANOUTS

DISTRIBUTION BOX, LEVEL

TILE FIELD, DEPTH ^① 9' ^② 9' FT. TRENCH WIDTH 2 FT. INLET 4'

GRAVEL DEPTH ^① 5' ^② 5' IN. TOTAL LENGTH ^① 65' ^② 65' TOTAL 130' FT.

NUMBER OF TRENCHES 2 TOTAL BOTTOM AREA 650 \square

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

ABSORBENT AREA 650 SQ. FT.

REMARKS

7-19-85 OK TO COVER ALL WORK

DATE SYSTEM APPROVED 7-19-85 INSPECTOR S. Abel

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 33495

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

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

SEPTIC TANK 1000 GAL. - 3 BED ROOM
1750 GAL. - 4 BED ROOM

DISTRICT 5

DATE 1-30-84

INLET MAX. 4'
MAX. DEPTH. 9' MAX.

1 TRENCH - 96 ft. LONG WITH 5' STONE
2' WIDE

LOCATED - 110' FROM REAR
150' FROM RIGHT

160# / B.R. figured 4 B R house

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 ANNA MacCarthy Brian Gentill
ADDRESS 4100 Colledale Ave DC 20016 PHONE 202-363-2725

PROPERTY LOCATION:

SUBDIVISION Propriet prop. LOT NO. 7
ROAD AND DESCRIPTION Nicholas A. 13738 Lakeside Dr.

SIZE OF LOT 3A TYPE BLDG. SFD
(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.

Richard W. Smith 465-0842
(SIGNATURE OF APPLICANT)

APPROVED BY C. Williams FOR TRENCHES DATE 12-3-84

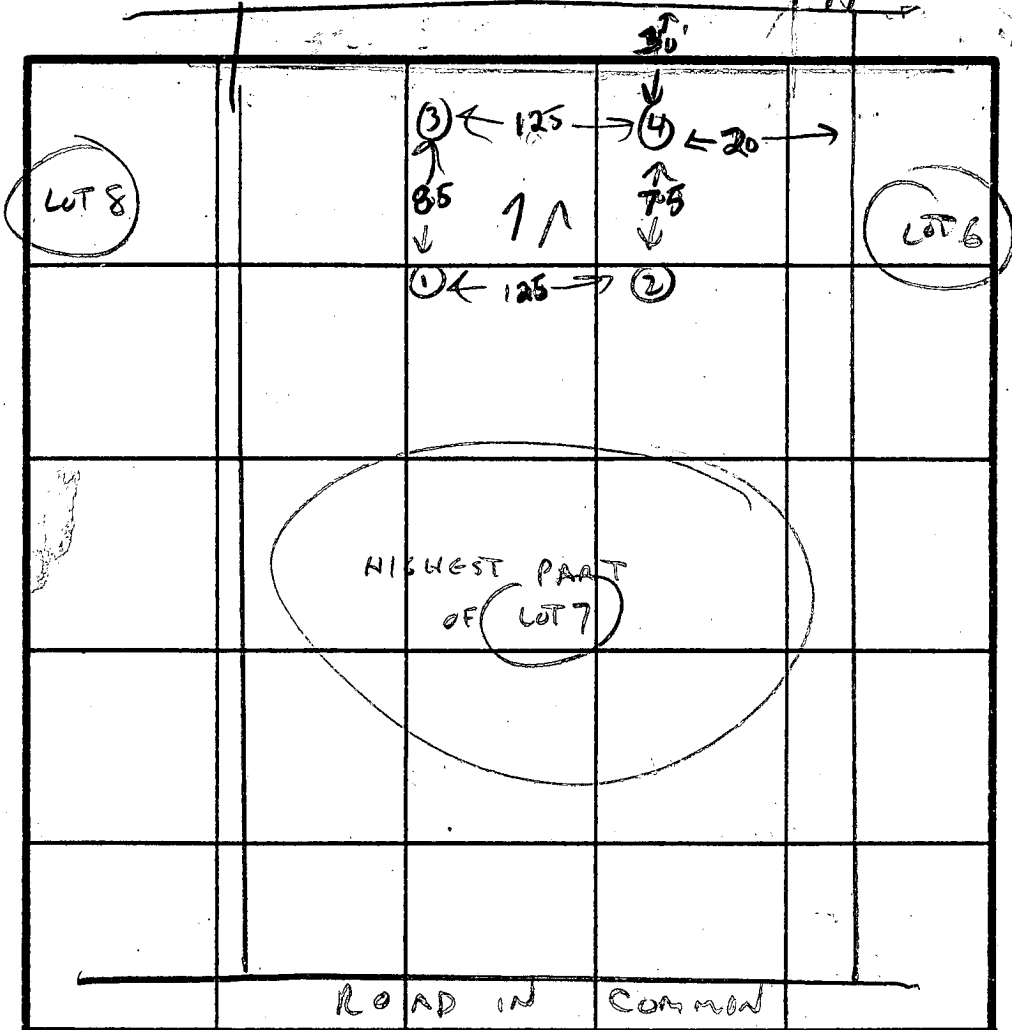
REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE B.P.# 63484

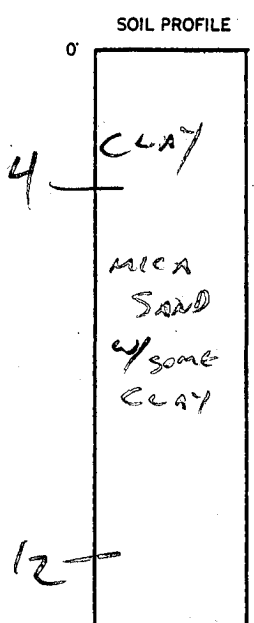
REASONS FOR REJECTION OR HOLDING _____
BLDG. PERMIT SIGNED
AND RETURNED 3-28-85

THIS IS NOT A PERMIT

STEEP SLOPE AT PROPLINE, 4A



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.



DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2-8-84	1	4	12:51	1:05	1:05	1:17	12 MIN
		8	12:51	12:54	12:54	12:58	4 MIN
		12					
2-8-84	2	4	12:53	12:56	12:56	1:01	5 MIN
		8	12:53	12:55	12:55	12:57	2 MIN
		12					
2-8-84	3	4	12:58	1:20	1:20	slow	
		8	12:58	1:00	1:00	1:02	2 MIN
		12	(GOOD SOIL STARTS AT 9 FT)				
2-8-84	4	4	12:54	1:01	1:01	1:12	10 MIN
		8	12:54	12:56	12:56	12:59	3 MIN
		12					

REMARKS LAYOUT DIFFERS SLIGHTLY FROM PRELIMINARY PLAT - CERTIFIED HONGS NEEDED

TYPE OF SOIL 4' CLAY THEN MICA-SAND MIXED W CLAY

TESTED BY C. Williams ALSO PRESENT DEMAIPT, PHIL

EH-12-1079

C1 **2959**
 (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 RETURNED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
 COUNTY NUMBER **A 33496**

DATE RECEIVED: [] [] [] [] [] [] [] []
 DATE WELL COMPLETED: **10/18/89** 9:30
 DEPTH OF WELL (TO NEAREST FOOT): 22 **185** 26
 PERMIT NO. FROM "PERMIT TO DRILL WELL": **HO-81-0758**

OWNER: **DEM MITT** **RICHARD**
 last name first name
 STREET OR RFD: **LAKESIDE DRIVE** TOWN **DAYTON**
 SUBDIVISION: **BRIGHTON PINES** SECTION **1** LOT **17**

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	
<i>Brown Shale</i>	0	21	
<i>Gray Micaceous</i>	21	185	

GROUTING RECORD
 WELL HAS BEEN GROUTED: Y N
 (Circle Appropriate Box)
 TYPE OF GROUTING MATERIAL:
 CEMENT CM BENTONITE CLAY BC
 NO. OF BAGS **5** NO. OF POUNDS **470**
 GALLONS OF WATER **30**
 DEPTH OF GROUT SEAL (to nearest foot)
 from **0** ft. to **20** ft.
 (enter 0 if from surface)

CASING RECORD
 casing types insert appropriate code below
 ST CO
 STEEL CONCRETE
 PL OT
 PLASTIC OTHER
 MAIN CASING TYPE: S T
 Nominal diameter top (main) casing (nearest inch): **6**
 Total depth of main casing (nearest foot): **20**

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

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

C2

EACH SCREEN	DEPTH (nearest ft.)	
	1	2
1	40	25
2	[]	[]
3	[]	[]

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

CIRCLE APPROPRIATE LETTER
 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 P. Mays
 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

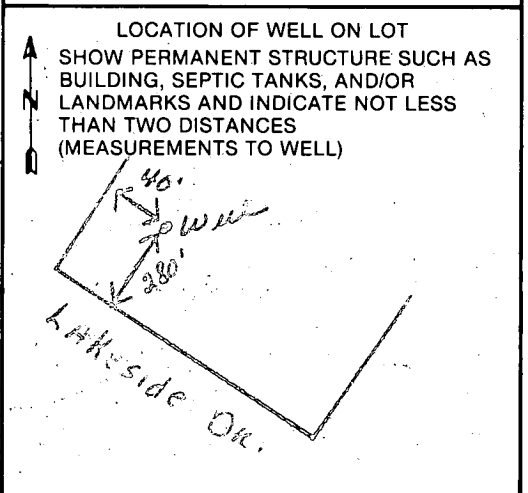
GRAVEL PACK _____
 IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

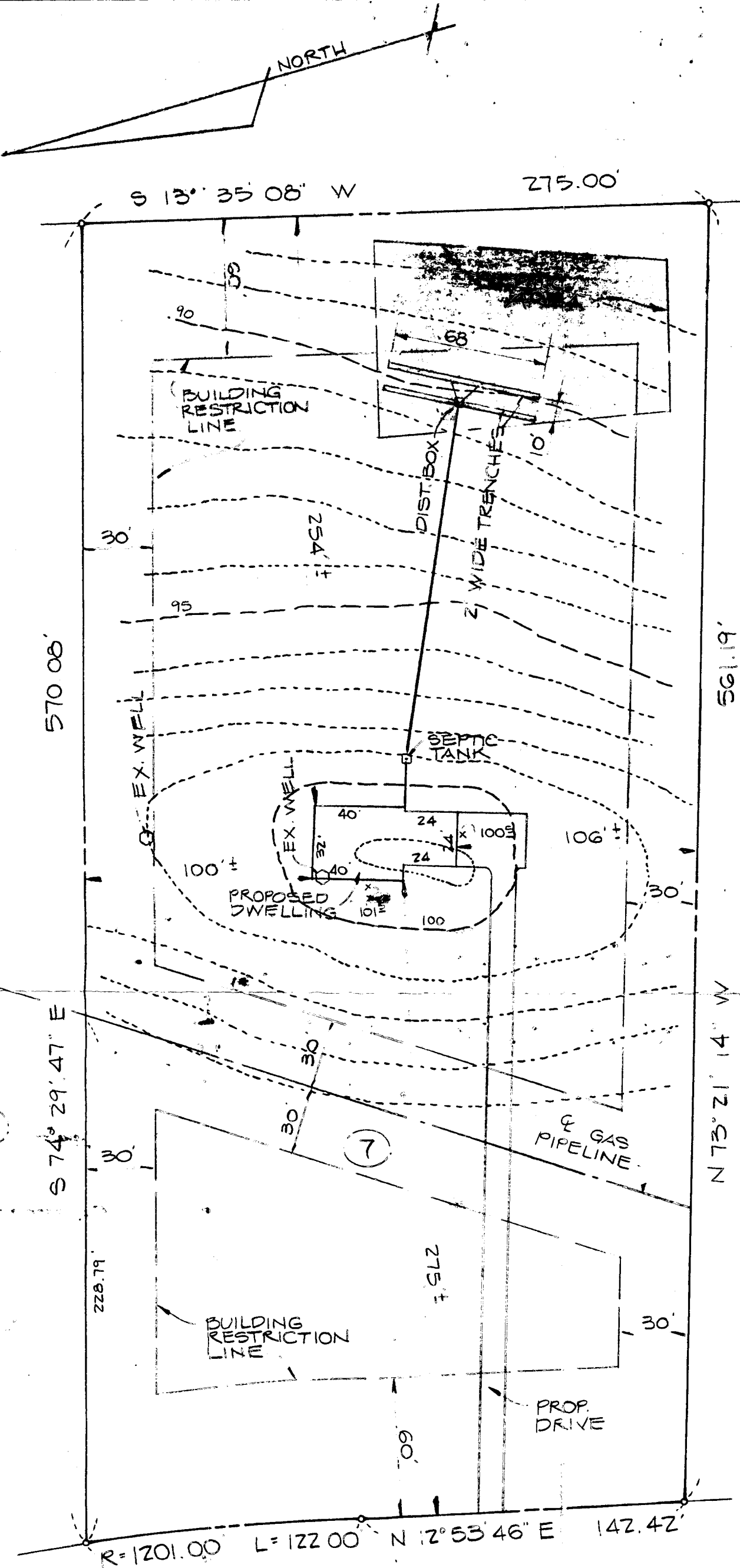
OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)
 T (E.R.O.S.) WQ
 TELESCOPE CASING LOG INDICATOR OTHER DATA

C3

PUMPING TEST
 HOURS PUMPED (nearest hour) **3**
 PUMPING RATE (gal. per min. to nearest gal.) **14**
 METHOD USED TO MEASURE PUMPING RATE *check*
 WATER LEVEL (distance from land surface) BEFORE PUMPING **44**
 WHEN PUMPING **62**
 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: 29
 CAPACITY: GALLONS PER MINUTE (to nearest gallon) [] [] [] [] 35
 PUMP HORSE POWER [] [] [] [] 41
 PUMP COLUMN LENGTH (nearest ft.) [] [] [] [] 47
 CASING HEIGHT (circle appropriate box and enter casing height)
 + above } LAND SURFACE
 - below } **1** (nearest foot)





P.L. # 63484
Original [unclear]

PROPOSED ELEVATIONS

FIRST FLOOR	102.0
GARAGE FLOOR	100.5
BASEMENT FLOOR	93.0
GRADE @ FRONT OF DWLG.	101.5
INV. OUT OF DWLG.	91.5
INV. INTO SEPTIC TANK	91.1
INV. OUT OF SEPTIC TANK	90.9
INV. INTO DIST. BOX	87.8
INV. OUT OF DIST. BOX	87.6
EX. GRADE @ TRENCH	90.5
FIN. GRADE @ TRENCH	90.5

LAKESIDE DRIVE (50' R/W)

SITE PLAN
 LOT 7 SECT. 1 AREA 1
 "BRIGHTON PINES"
 C.M.P. No 6012

C1 **2960** SEQUENCE NO. (OEP USE ONLY)
 (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 **A33495**

DATE RECEIVED: [] [] [] [] [] [] [] []
 DATE WELL COMPLETED: **10/8/84**
 DEPTH OF WELL: **205** (TO NEAREST FOOT)
 PERMIT NO. FROM "PERMIT TO DRILL WELL": **HQ-81-0759**

OWNER: **GENTILE BRIAN**
 STREET OR RFD: **LAKE SIDE DRIVE** TOWN: **DAYTON**
 SUBDIVISION: **BRIGHTON PINES** SECTION: **E** LOT: **7**

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	
<i>Brown Shale</i>	0	34	
<i>Gray Mic. Sand</i>	34	205	

GROUTING RECORD
 WELL HAS BEEN GROUTED (Circle appropriate box) **Y**
 TYPE OF GROUTING MATERIAL: CEMENT **CM** BENTONITE CLAY **BC**
 NO. OF BAGS: **9** NO. OF POUNDS: **876**
 GALLONS OF WATER: **34**
 DEPTH OF GROUT SEAL (to nearest foot) from **0** ft. to **34** ft.
 (enter 0 if from surface)

CASING RECORD
 casing types insert appropriate code below: **ST CO PL OT**
 Nominal diameter (nearest inch): **6** Total depth of main casing (nearest foot): **38**
 MAIN CASING TYPE: **ST**

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

SCREEN RECORD
 screen type or open hole insert appropriate code below: **ST BR HO PL OT**
C2

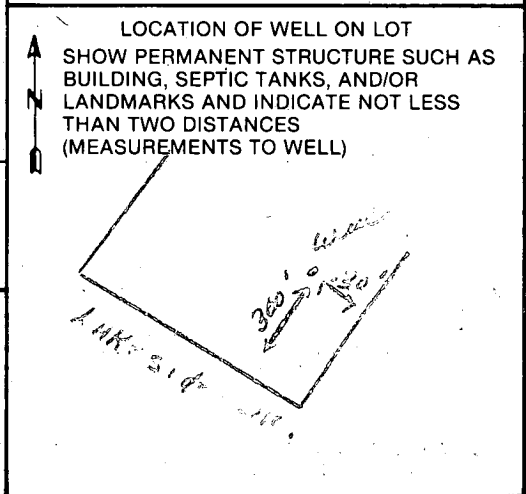
EACH SCREEN
 DEPTH (nearest ft.)
 1 **H0** **37** **205**
 2 [] [] [] [] [] []
 3 [] [] [] [] [] []
 SLOT SIZE 1 [] 2 [] 3 []
 DIAMETER OF SCREEN [] (NEAREST INCH)

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
 TELESCOPE CASING LOG INDICATOR OTHER DATA

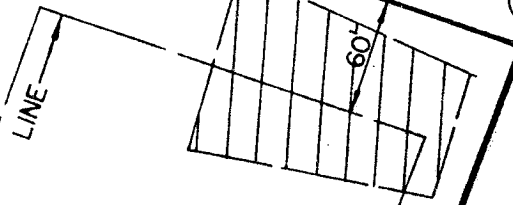
C3
PUMPING TEST
 HOURS PUMPED (nearest hour) **3**
 PUMPING RATE (gal. per min. to nearest gal.) **10**
 METHOD USED TO MEASURE PUMPING RATE: **bucket**
 WATER LEVEL (distance from land surface) BEFORE PUMPING **35** WHEN PUMPING **58**
 TYPE OF PUMP USED (for test): **S** submersible

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) above } LAND SURFACE (nearest foot) below }



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**
 DRILLERS SIGNATURE: *Joseph L. Morgan*
 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

S 13° 35' 08" W
273.60'

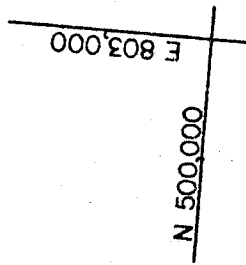


WELL SITE OK
10/9/84 CW/William

LOT 7
3481 Ac±

2 OF 3

803



RESTRICTION
4-67008'

BUILDING

122.00'

75'

142.42'

LAKESIDE
N 12° 53' 46" E 282.05'

135.78'

50.15'

75'

2000'

RESTRICTION
N 80° 56' 00" W 535.77'

LINE

LOT 15
3,006 Ac±

LOT 16
3,000 Ac±

RESTRICTION
N 81° 30' 35" W 493.61'

SEE SHEET
N 81° 30' 35" W 398.00'

2507'

2507'

50.15'

BUILDING

60'

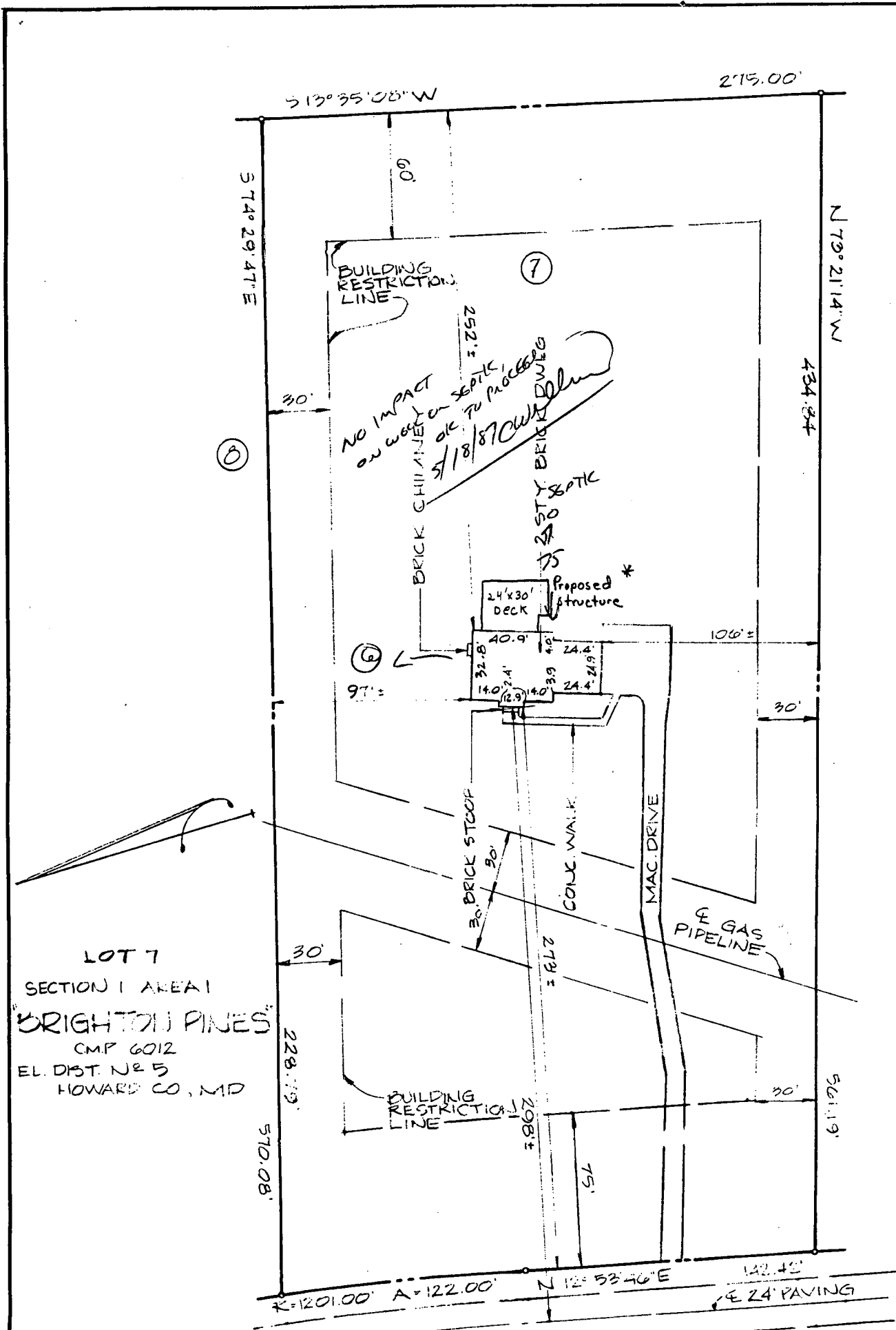
323.39'

250.41'

61'

Brian Gentile
9710 Hillsmere Rd
Ellicott City MD 21043
465-0598

POST OFFICE
ELICOTT CITY
HEALTH DEPT.
APR 26 2 40 PM '88
ELICOTT CITY
HEALTH DEPT.

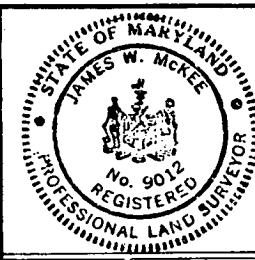


I hereby certify that I have made a survey of this lot for the purpose of locating the improvements thereon and that they are located as shown.

This plat is not intended for use in establishing property lines.

J. W. McKee
 JAMES W. MCKEE Reg. #9012

11-12
 Date



drawn by DFD.
 checked by 71

LOCATION SURVEY
 No 13738 LAKE SIDE DRIVE

MCKEE & ASSOCIATES, INC.

CIVIL ENGINEERS • LAND SURVEYORS
 1717 YORK RD. LUTHERVILLE, MD 21093
 252-5820

scale: 1"=50'
 date: 11-13-83
 job no: MISC 78