

MR. 1/16/92  
1:00 - P.M.

1/12/92 11:00

# PERMIT

## SEWAGE DISPOSAL SYSTEM

### DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

461-9933

05-398428  
**INDEXED**

P 47918

A 33504

DISTRICT 5th

DATE 8/18/92

DATE SYSTEM APPROVED 1/12/92

INSPECTOR M. R. K. K.

Jack Fyock Septic Service IS PERMITTED TO INSTALL  ALTER

ADDRESS 13775 Triadelphia Road, Glenelg, Maryland 21737 PHONE 988-9270

SUBDIVISION Brighton Pines II LOT 5 ROAD 13705 Loria Court

PROPERTY OWNER Mr. Skip E. Tovernik

ADDRESS \_\_\_\_\_

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 144

TRENCHES - Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 3 feet below original grade. 5 feet of stone below distribution pipe.

LOCATION - Place the distribution box 240 feet from the front lot line (189.41') and 100 feet off the left lot line (399.26') as seen when facing the property from Lakeside Drive. Extend trenches on contour toward the left 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. OK 7/10/91 RH

PLANS APPROVED BY Jane E. Nadeau cm DATE 09/23/87

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

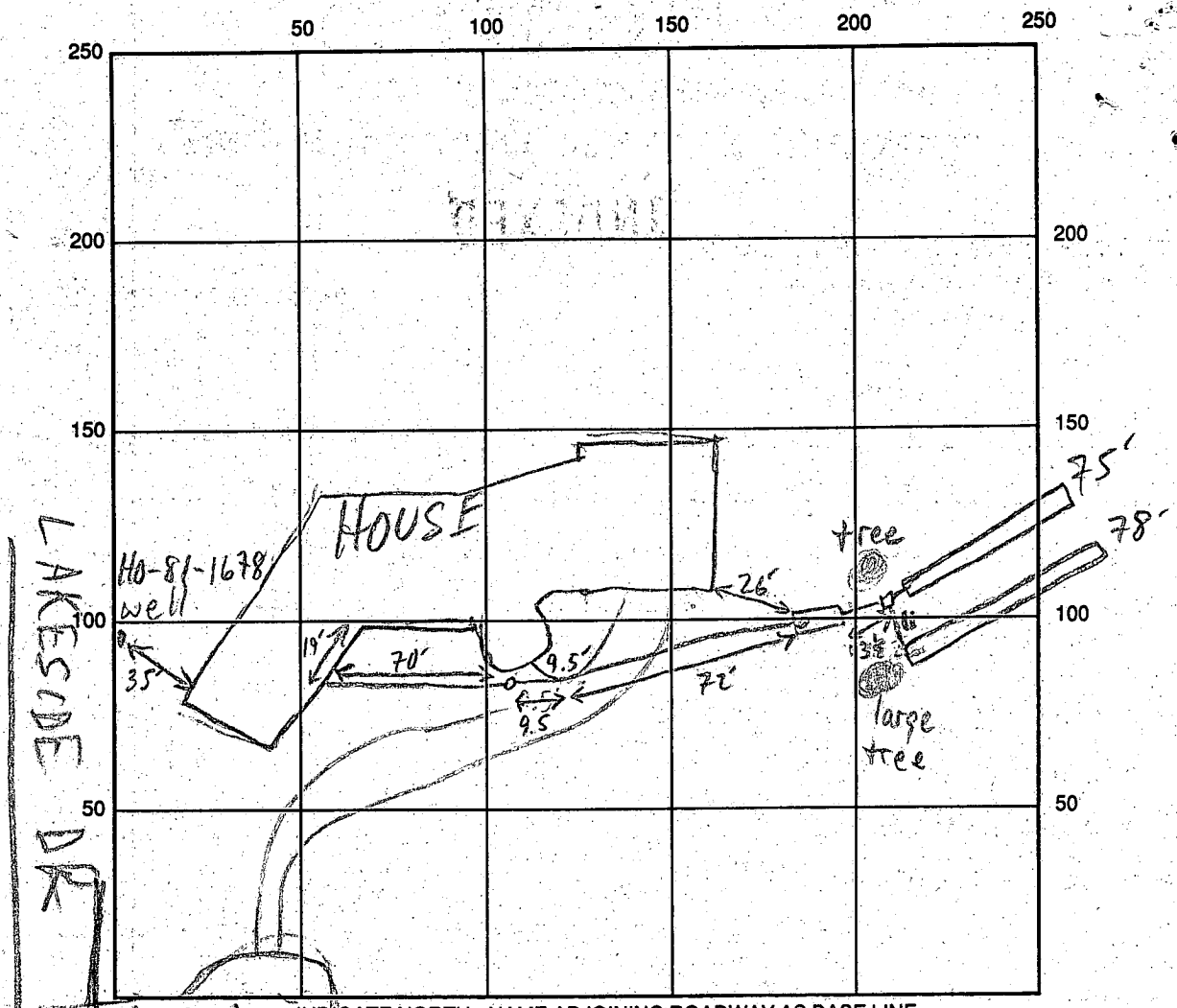
PERMIT VOID AFTER TWO YEARS

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 33504



LORIAN CT INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1250 GAL - OK CLEANOUTS INLINE & S.T. - OK  
 DISTRIBUTION BOX LEVEL OK - BAFFLE IN  
 DRAIN FIELD/TITLE DEPTH 8 1/8 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3 1/3 FT.  
 EFFECTIVE GRAVEL DEPTH 5 1/5 FT. TOTAL LENGTH ①78 ②75± FT.  
 NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA ①390 ②375 SQ. FT.  
 DRYWALL INSIDE DIAMETER      FT. EFFECTIVE DEPTH BELOW INLET      FT.  
 ABSORBENT AREA 765 SQ. FT.

REMARKS: 1/16/92 OK TO COVER HOUSE TO S.T. - PIPE UNDER DRIVEWAY COVERED WITH STONE TO TAP MR  
1/17/92 OK TO STONE & COVER ALL WHEN READY MR

DATE SYSTEM APPROVED 1/17/92 INSPECTOR M. Rifkin

# 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 33504

P \_\_\_\_\_

DISTRICT 5

DATE 1-30-84

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 M. AL. COSTLEY Clay C. Ewell

ADDRESS 4100 Colliard Ave DC 20016 PHONE 301-363-2725

PROPERTY LOCATION: BRIGHTON PINES II LOT 5

SUBDIVISION Proposed prop LOT NO. 15

ROAD AND DESCRIPTION Nicholas Dr. 13705 LORIG Court

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 J. Blum 445-0842  
(SIGNATURE OF APPLICANT)

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

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

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

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

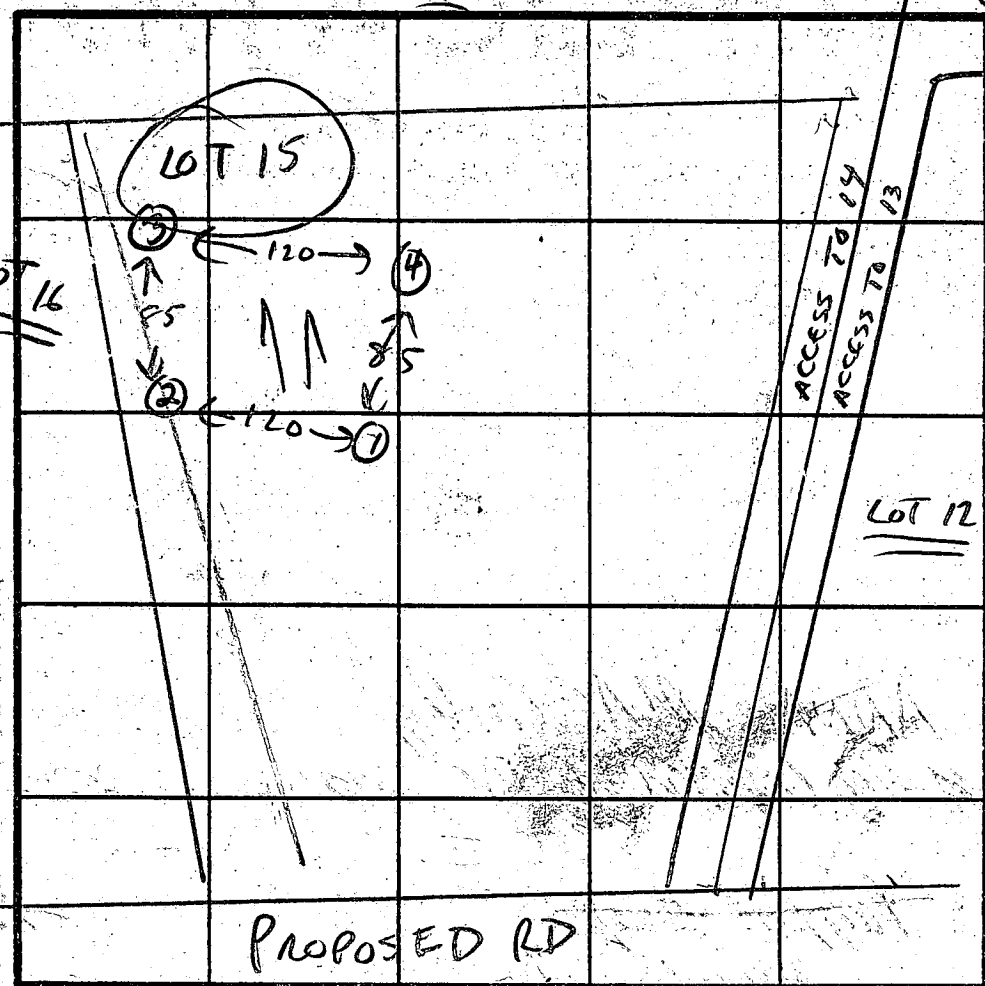
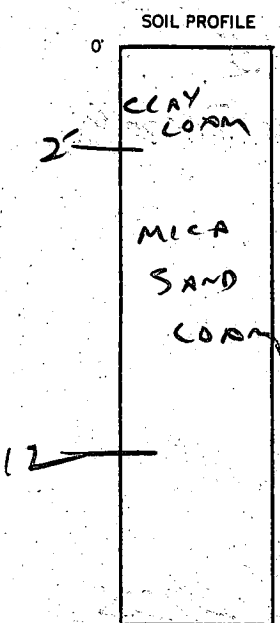
BLDG. PERMIT SIGNED AND RETURNED 1/13/91  
Serial # 40273  
Install - 1-1000 gal  
propose land

BLDG. PERMIT SIGNED AND RETURNED 1/13/91  
Serial # 38460 - SFD

# THIS IS NOT A PERMIT

Lot 14

Lot 13



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2-22-84	1)	3' 8	1:35	1:37	1:37	1:39	2min
	} HIGH	12		SANDY			
2-22-84		2)	3' 8	1:31	1:33	1:33	1:35
	} LOW	12		SANDY			
2-22-84		3)	3' 8	1:33	1:35	1:35	1:37
	} LOW	12		SANDY			
2-22-84		4)	3' 8	1:34	1:36	1:36	1:38
	}	12		SANDY			

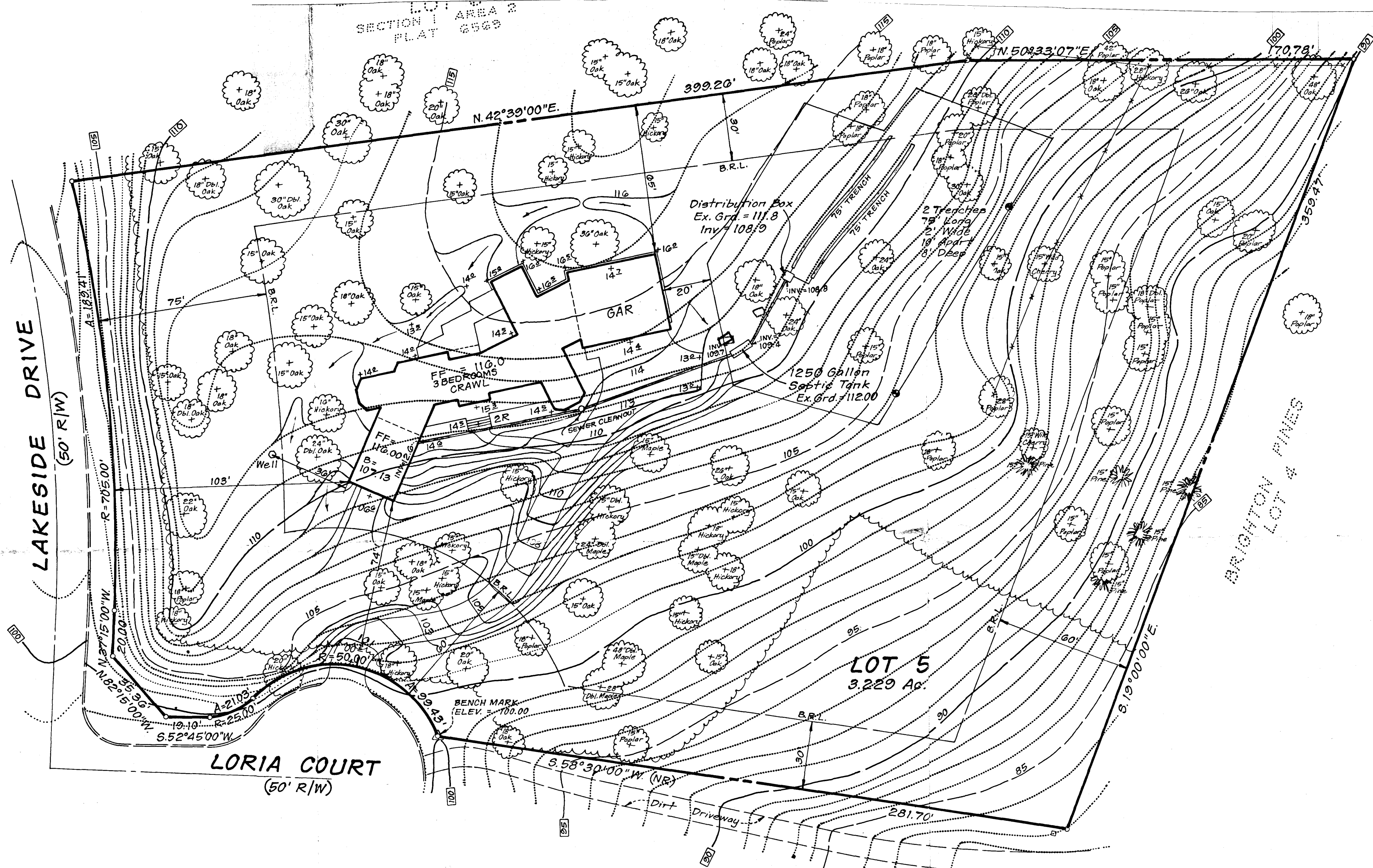
REMARKS \_\_\_\_\_

TYPE OF SOIL MICA SAND LOAM

TESTED BY C. Williams ALSO PRESENT P. Hill

EH-12-1079

SECTION 1 AREA 2  
PLAT 6669



LAKESIDE DRIVE  
(50' R/W)

BRIGHTON PINES  
LOT 4

LORIAM COURT  
(50' R/W)

LOT 5  
3.229 Ac.

Distribution Box  
Ex. Grd. = 111.8  
Inv. = 108.9

1250 Gallon  
Septic Tank  
Ex. Grd. = 112.00

BENCH MARK  
ELEV. = 100.00

Dirt Driveway

A=189.41  
R=705.00  
N 37° 15' 00" W  
N 82° 15' 00" W  
20.00

A-2103  
R=25.00  
10.10  
N 52° 45' 00" W  
5.52° 45' 00" W

N 42° 39' 00" E  
399.20'

N 50° 33' 07" E  
170.78'

S 58° 30' 00" W (NR)  
281.70'

S 19° 00' 00" E  
359.47'



B 1 5255 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 PERMIT TO DRILL WELL

please print or type

OEP PERMIT NUMBER

NO-91-1678  
70 fill in this form completely 79

Date Received

2 1 1 8 6

OWNER INFORMATION

15 Last Name: HIGHLAND  
Owner: DEVELOPER  
34 First Name: [ ]  
36 Street or RFD: 13690 NICHOLS RD  
55  
57 Town: CLARKSVILLE MD 21029  
70 State 72 Zip 76

DRILLER INFORMATION

Driller's Name: JOSEPH L. MAYNE 77 License No. 80 938  
Firm Name: JOSEPH L. MAYNE WELL DRILLING  
Address: 5512 RIDGE RD. MT. AIRY 21771  
Signature: [ ] Date: 9/2/86

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) [ ] [ ] [ ] [ ]  
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)

APPROXIMATE DEPTH OF WELL 310 [ ] [ ] FEET

APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST

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)

APPROP. PERMIT NUMBER [ ] [ ] [ ] [ ] G A P [ ] [ ]

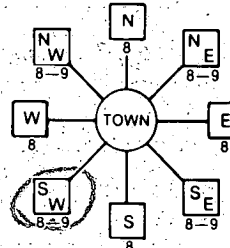
FORCE BA WRITE INITIALS IN BOX PERMIT No. NO-91-1678

SPECIAL CONDITIONS

LOCATION OF WELL

8 COUNTY: HOWARD  
23 SUBDIVISION: BRIGHTON PINES  
SECTION 1 LOT 5 Area 2  
52 NEAREST TOWN: DAYTON  
MILES FROM TOWN (enter 0 if in town) 2.3 MI

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



NEAR WHAT ROAD: LORIA Ct.

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



DISTANCE FROM ROAD 90 FT ENTER FT or MI

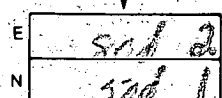
NOT TO BE FILLED IN BY DRILLER. HEALTH DEPARTMENT APPROVAL

COUNTY NAME: HOWARD COUNTY NO. A-33504  
OEP SIGNATURE: B Nelson DATE ISSUED: 09/18/86  
CO SIGNATURE: [ ] EXP. DATE: 03/18/87  
NORTH GRID: 501000 EAST GRID: 0802000

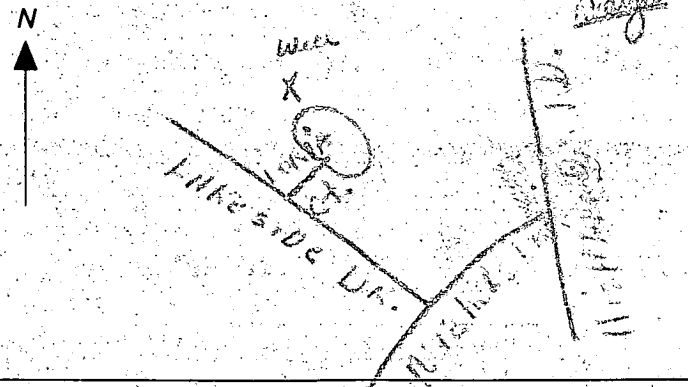
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

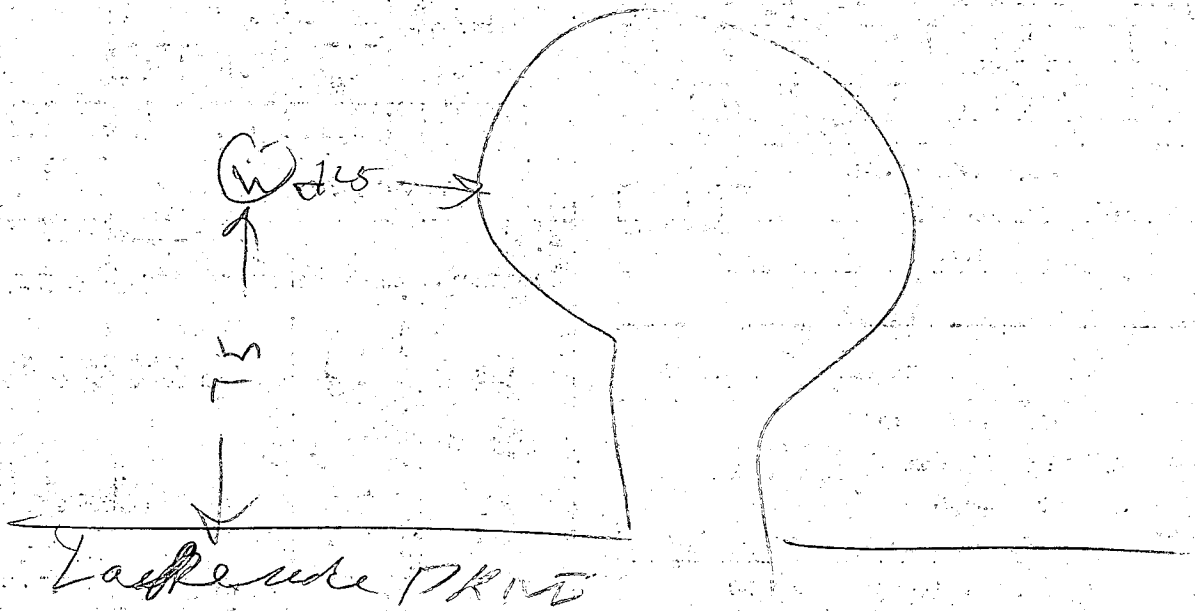
SOURCES OF DRILLING WATER  
1. WELL  
2.  
3.

WRITE THE BOX NUMBER FROM THE MAP HERE



DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION





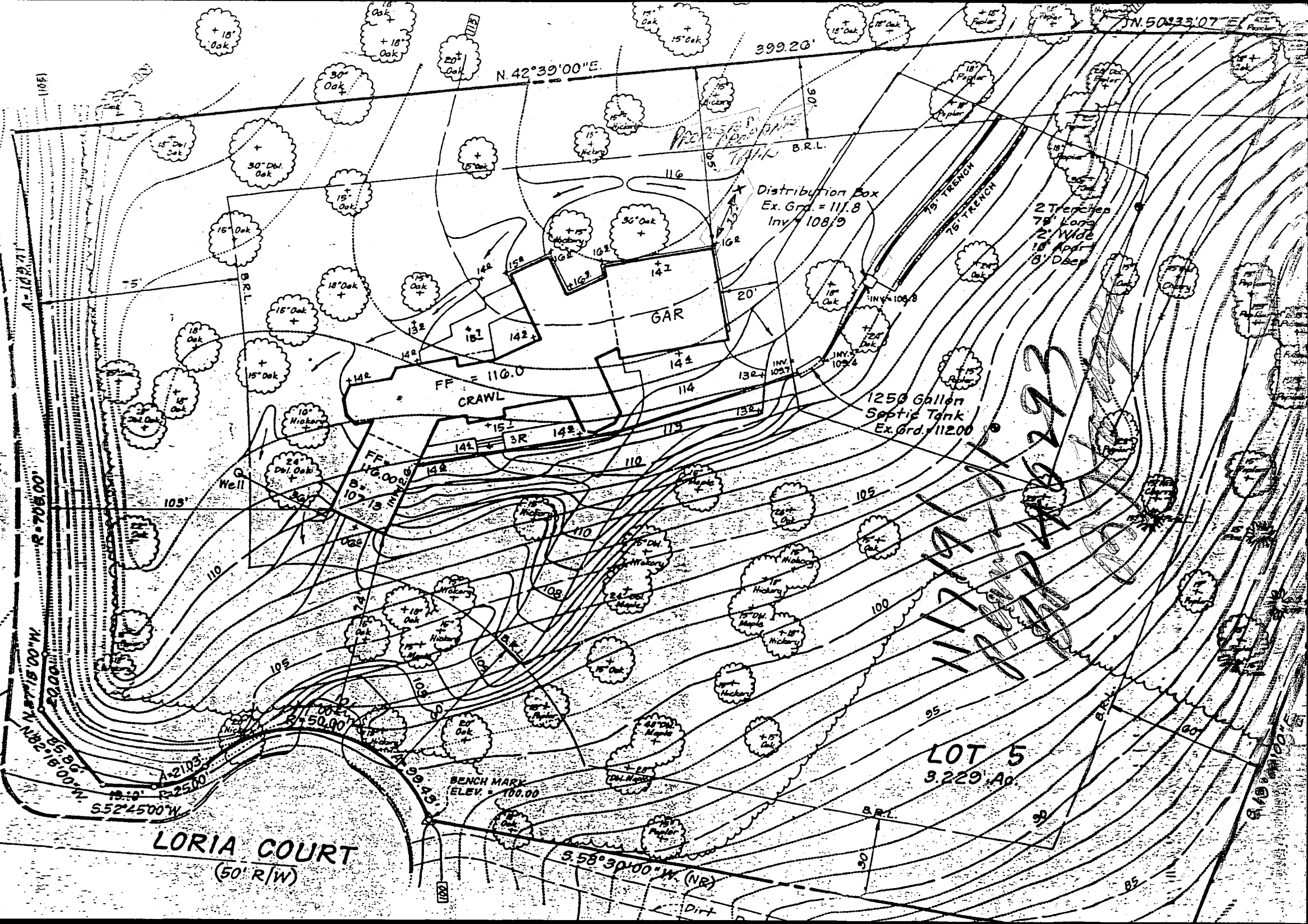
10/23/86 HANA

- ① Arrived Late (left office late after grout)
- ② 74 ft pipe
- ③ 50 ft open hole
- ④ 17 bags ~~at least~~
- ⑤ Location of
- ⑥ Well Grout Oil

B. Hodger

grout - 1/2 gal per ft

LAKESIDE DRIVE  
(50' R/W)



LORIA COURT  
(50' R/W)

LOT 5  
3,229.40

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399.20'

N. 42° 39' 00" E.

B.R.L.

Distribution Box  
Ex. Grd. = 111.8  
Inv. = 108.9

1250 Gallon  
Septic Tank  
Ex. Grd. = 112.00

BENCH MARK  
ELEV. = 100.00

S. 58° 30' 00" W. (NR)

Dirt

85

95

100

105

110

115

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125

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C1 5309

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)

FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE

COUNTY NUMBER A-33504

DATE RECEIVED

DATE WELL COMPLETED

DEPTH OF WELL

PERMIT NO. FROM "PERMIT TO DRILL WELL"

Grid for date received

10 23 86

225 (TO NEAREST FOOT)

NO-81-1678

OWNER DEVELOPER HIGHLAND STREET OR RFD LAST NAME CT. first name TOWN DAYTON SUBDIVISION BRIGHTON PASSES SECTION I AREA TR LOT 5

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. Includes handwritten entries: SAND, 0 65, Garry Mason rock, 65 225 ✓

GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 17 NO. OF POUNDS 1528 GALLONS OF WATER 42 DEPTH OF GROUT SEAL (to nearest foot) from 0 to 50 ft.

CASING RECORD casing types insert appropriate code below ST CO STEEL CONCRETE PL OT PLASTIC OTHER

MAIN CASING TYPE Nominal diameter (nearest inch) Total depth (nearest foot) of main casing 57 6 66 70

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

Table for screen depth (nearest ft.) with handwritten entries: 1 10 23 225

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...

DRILLERS IDENT. NO. 238 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

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.) W.Q. TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min. to nearest gal.) 12 METHOD USED TO MEASURE PUMPING RATE hand

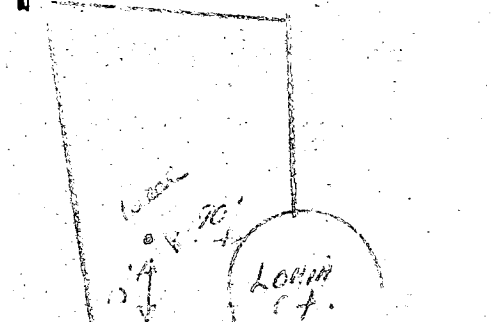
WATER LEVEL (distance from land surface) BEFORE PUMPING 66 WHEN PUMPING 89

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

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 (nearest foot)

LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)



DRILLER

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

2:00 P.M.  
3/2/92  
OK - F.I.R. #  
= C.B.D.

3/2/92  
A.S.M. P.M.  
(1:30 Work over)

APPLICATION FOR PITLESS ADAPTER WELL LINE PUMP AND PRESSURE TANK INSTALLATION

New Installation  Replacement   
Receipt # 47852 Date 2/27/92  
Name of Installer Klipp & Sons, Inc Telephone 442-1914  
License Number 634  
Certified Well Pump Installer  Well Driller  Registered Plumber   
Name of Property Owner Clay Ewell Telephone             
Subdivision            Lot # 5 Well Tag # HO-81-1678  
Site Address 13705 Loria Court HO-81 1678 *Bought from*

Pump Motor Pitless Adapter  
1. Type 1. Horsepower 3/4 1. Make Campbell  
a. Deep well jet            2. RPM            2. Model # B10X  
b. Shallow well jet            3. Voltage 230 3. Depth 240  
c. Submersible  a. 110             
2. Make Goulds b. 220             
3. Model # 78H07412  
4. Capacity 2 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           

Tank Piping Well data  
1. Capacity 40 gallon 1. Type 1601b 1. Depth 240 ft.  
2. Pressure relief valve?  2. Size 1" 2. Yield            GPM  
3. NSF and/or BOCA Code approved            3. Static water level            ft.  
4. Depth of supply line 200' 4. Will water supply be disinfected by installer? Driller

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: [Signature]  
Date: 2/25/92

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

Note: 3/2/92 Well line thru wall in basement.  
(2) OK to cover water line & pitless adapter, c.b.d.

