

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

05-398460

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

461-9933

2/5/92 P.C.O. C. Beck

P 47682

A 33508

DISTRICT 5th

DATE 12/17/91

DATE SYSTEM APPROVED 2/7/92

INSPECTOR M. Beckin

INDEXED

Custom Excavating IS PERMITTED TO INSTALL ALTER

ADDRESS 12789 Folly Quarter Road, Ellicott City, MD PHONE 531-2876

SUBDIVISION Brighton Pines, Sec. 1 LOT 9, Area II ROAD 13804 (4/29/94) per 13750 Lakeside Drive

PROPERTY OWNER (per Mrs Joe Aluise) Clarksville

ADDRESS Builder's Phone on-site: 596-9540

SEPTIC TANK CAPACITY 1500 GALLONS

NUMBER OF BEDROOMS 5

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 200-225

TRENCHES - Trench to be 2 feet wide. Inlet 3/4 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 3/4 feet below original grade. 4 1/2 feet of stone below distribution pipe.

LOCATION - Beginning from right front lot corner, place 1st trench 145 feet down the right (508.13') lot line and 140 feet off the right (508.13') lot line as seen when facing property from Lakeside Drive. Run trenches along contour back towards the right 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.

REVISED 1/31/92 FOR TIGHT ELEVATIONS

PLANS APPROVED BY Bert Nixon DATE 11/07/91

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

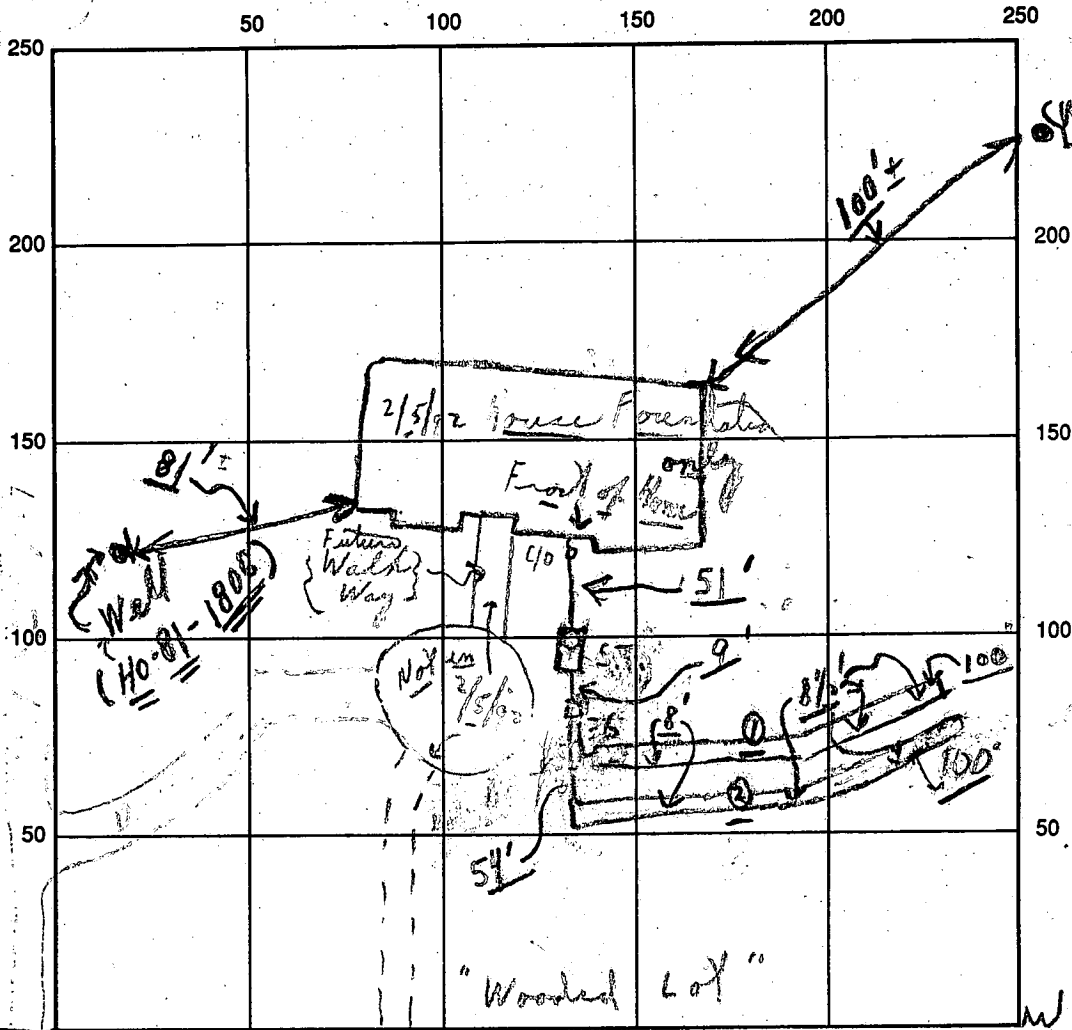
PERMIT VOID AFTER TWO YEARS

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 33508



cut be see

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

Lacades Drive

Nichols Drive

SEPTIC TANK LEVEL OK CLEANOUTS MANHOLE AT HOUSE END OF S.T OK

DISTRIBUTION BOX LEVEL OK - BAFFLE IN OK

DRAIN FIELD/TITLE DEPTH 8 + average FT. TRENCH WIDTH 2 FT. INLET DEPTH 3.5/3.5 FT.

EFFECTIVE GRAVEL DEPTH 4.5/4.5 FT. TOTAL LENGTH 100 FT. } 200

NUMBER OF TRENCHES 2 ONE SIDEWALL/COMMON AREA 450 SQ. FT.

DRYWALL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA SQ. FT.

REMARKS: Parted P.M. 2/5/92 trench only - ok for stone - C.R.R. back to regular
 No dist box or tank yet; 2/5/92 Ltr. - looks stone in (2) 90" of
 second to back; partial ok to continue; C.R.R. - 2/5/92
 On 2/6/92 Need to see - all pipes from house to septic tank
 and to dist box and to trenches. stone depth in trenches
 also; call; 2/6/92 OK TO FINISH STONE; NEED MANHOLE ON ST MR
 DATE SYSTEM APPROVED 2/7/92 INSPECTOR M. Rifkin
 2/7/92 ALL OK TO COVER MR

Prep

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 33508

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 992-2330

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 MAC GADY Metro Truck & Tractor Leasing, Inc

ADDRESS 4100 Cathedral Ave DC 20016 PHONE 202-363-2725
301-737-1910

PROPERTY LOCATION: BRIGHTON PINES II LOT 9

SUBDIVISION Propert prop sec I LOT NO. 19

ROAD AND DESCRIPTION Nicholas Dr. Area II (13750 Lakeside Drive)

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 Memmitt 465-0842
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

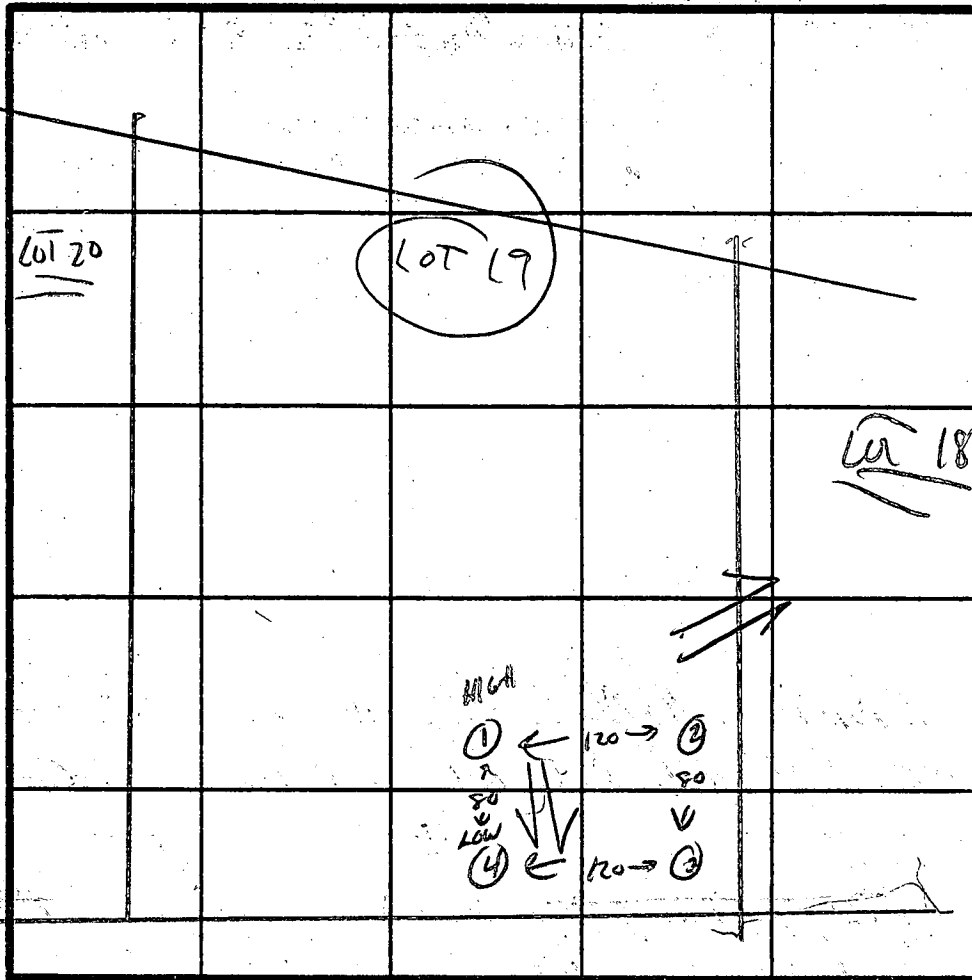
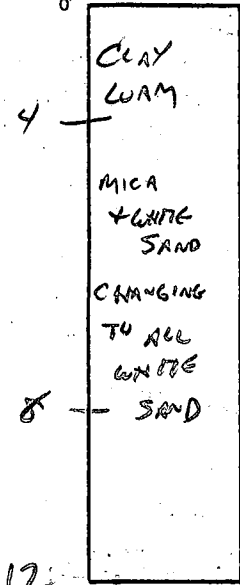
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

BLDG. PERMIT SIGNED
AND RETURNED 1/17/84
Serial # 40214-SFD

THIS IS NOT A PERMIT

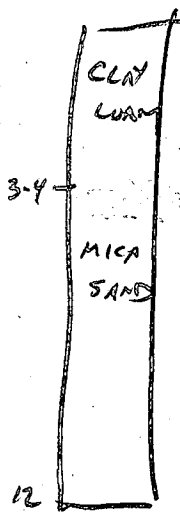
#1 SOIL PROFILE



#2-3-4

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2-21-84	1 MICA	4	1:39	1:41	1:41	1:43	2 MIN
		8					
		12					
2-21-84	2 2ND MICA	4	1:40	1:42	1:42	1:44	2 MIN
		8					
		12					
2-21-84	3	4	1:42	1:44	1:44	1:46	2 MIN
		8					
		12					
2-21-84	4 LOW	4	1:41	1:43	1:43	1:45	2 MIN
		8					
		12					



REMARKS _____

TYPE OF SOIL MICA - SAND

TESTED BY C. Williams

ALSO PRESENT DEMMEY, PHIL

DATE Received [] [] [] [] [] [] DATE WELL COMPLETED **02/1/87** Depth of Well **365** FROM "PERMIT TO DRILL WELL" **HO-81-1806**

OWNER **DEVELOPMENT HIGHLAND** STREET OR RFD **LAKESIDE DR.** TOWN **DAYTON** SUBDIVISION **BRIGHTON PINES** SECTION **I AREA II** LOT **9**

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	
SAND	0	93	
CONCRETE BLOCK	93	365	

GROUTING RECORD
WELL HAS BEEN GROUTED (Circle appropriate box) **Y** **N**

TYPE OF GROUTING MATERIAL
CEMENT **CM** BENTONITE CLAY **BC**

NO. OF BAGS **22** NO. OF POUNDS **2628**

GALLONS OF WATER **139**

DEPTH OF GROUT SEAL (to nearest foot)
from **0** ft. to **50** ft.

CASING RECORD
casing types insert appropriate code below

ST **CO**
STEEL CONCRETE
PL **OT**
PLASTIC OTHER

MAIN CASING TYPE **ST** Nominal diameter top (main) casing (nearest inch) **6** Total depth of main casing (nearest foot) **100**

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

DEPTH (nearest ft.)

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	

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**

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

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.) 70 [] 72 [] WQ 74 [] 75 [] 76 []

TELESCOPE CASING LOG INDICATOR OTHER DATA

C3

PUMPING TEST
HOURS PUMPED (nearest hour) **3**

PUMPING RATE (gal. per min. to nearest gal.) **4**

METHOD USED TO MEASURE PUMPING RATE **bucket**

WATER LEVEL (distance from land surface)
BEFORE PUMPING **47**
WHEN PUMPING **220**

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) [] [] [] [] [] []

PUMP HORSE POWER [] [] [] [] [] []

PUMP COLUMN LENGTH (nearest ft.) [] [] [] [] [] []

CASING HEIGHT (circle appropriate box and enter casing height)
+ above } LAND SURFACE (nearest foot) **2**
- below }

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)

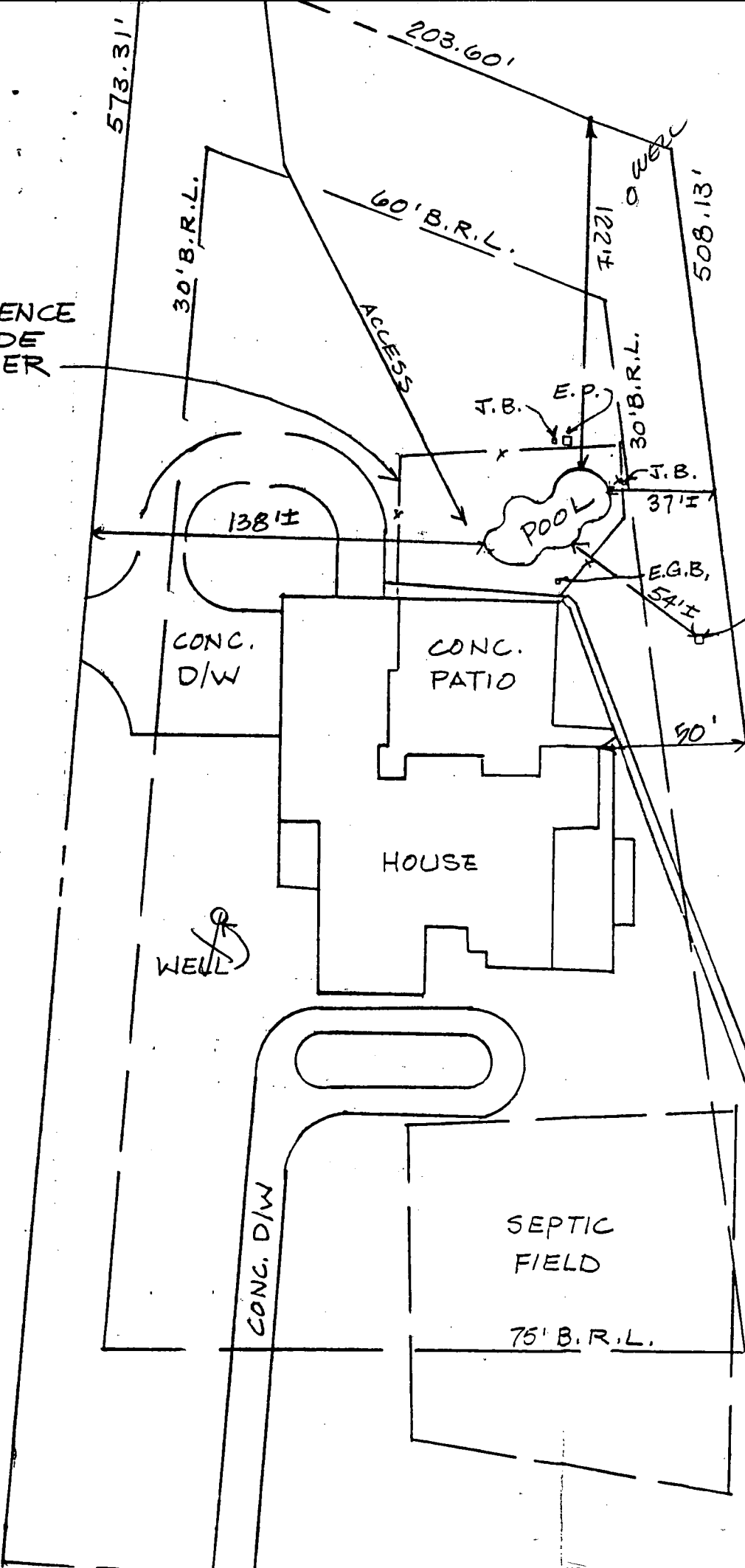


1 HOURS OF GRAD
ANY ADDITIONAL HOURS A

IRON FENCE
PER CODE
BY OWNER

7/18/96
The proposed
pool location
will have no
impact to existing
well or septic.
OK to proceed
All

SEPTIC TANK

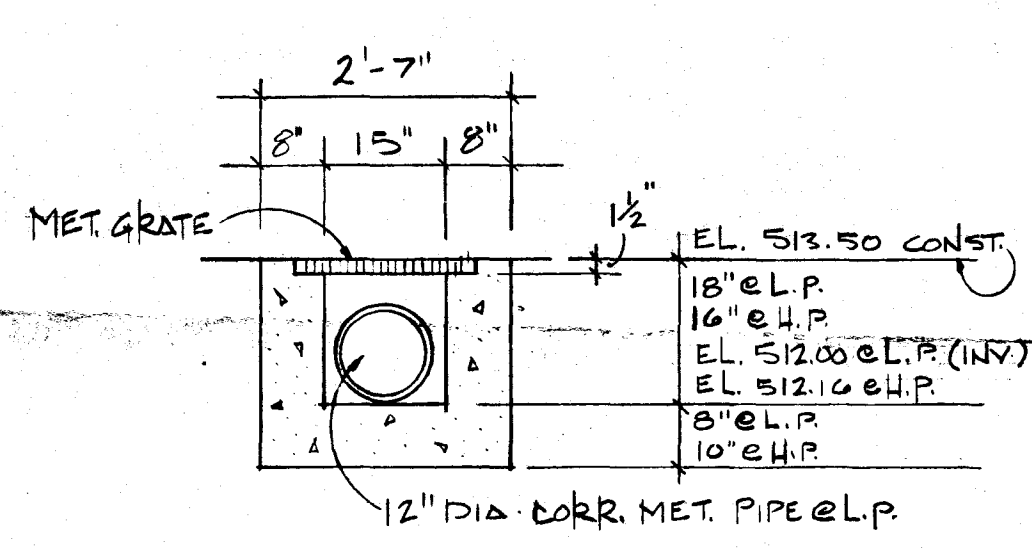
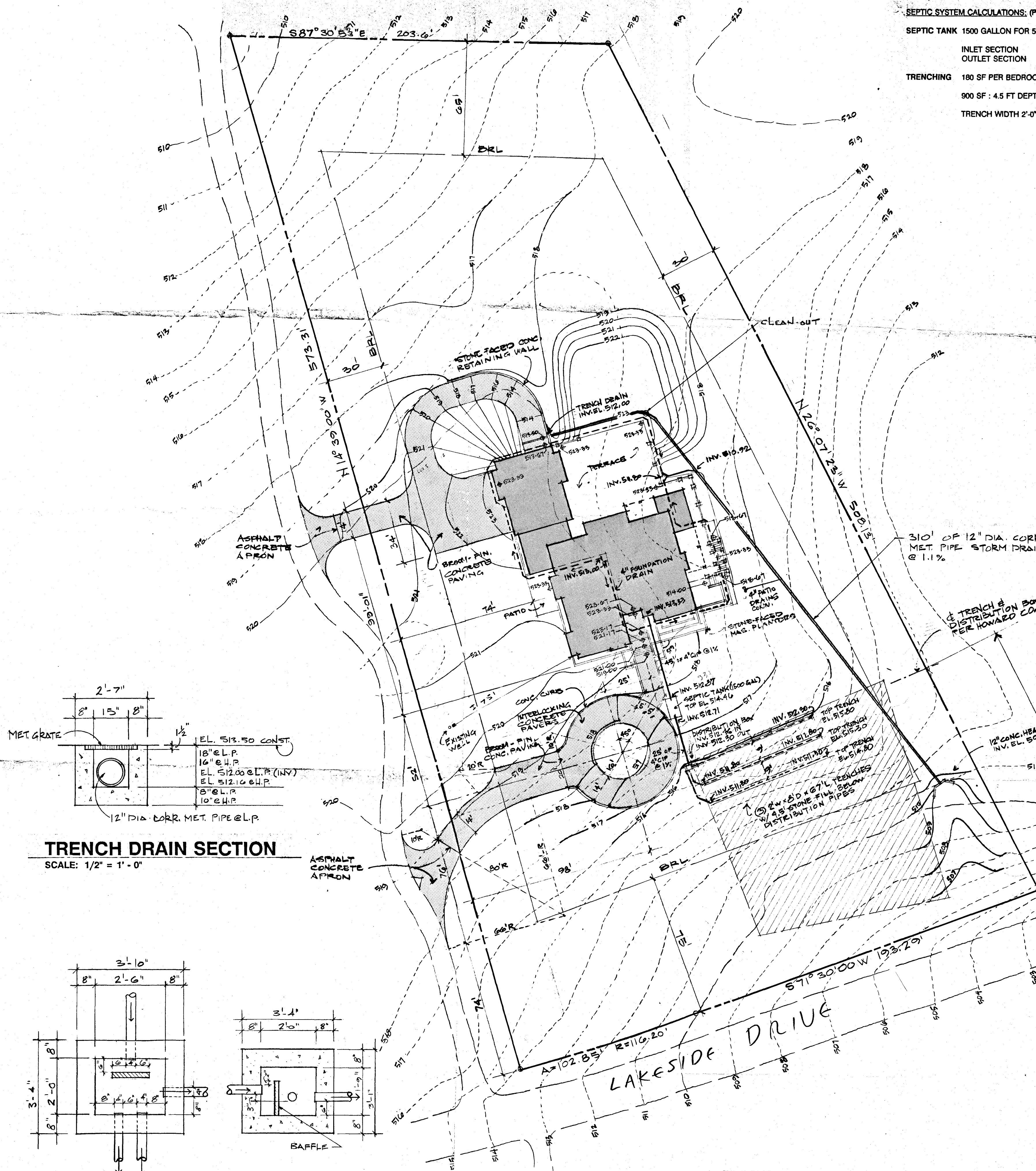


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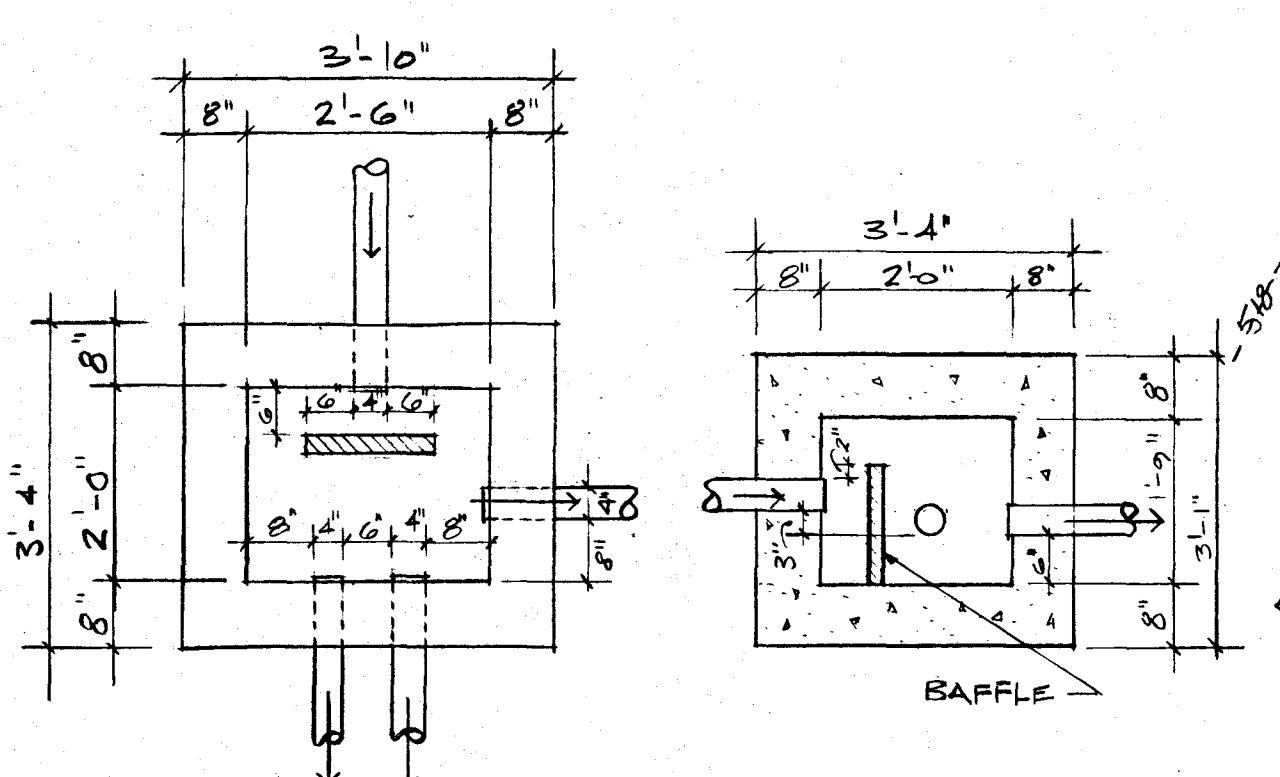
RESIDENCE

RECEIVED
HOWARD COUNTY
HEALTH DEPT.
91 OCT 29 PM 4:53

SEPTIC SYSTEM CALCULATIONS: (PER
SEPTIC TANK 1500 GALLON FOR 5 BE
INLET SECTION
OUTLET SECTION
TRENCHING 180 SF PER BEDROOM
900 SF : 4.5 FT DEPTH C
TRENCH WIDTH 2'-0"



TRENCH DRAIN SECTION
SCALE: 1/2" = 1'-0"



DISTRIBUTION BOX PLAN AND SECTION
SCALE: 1/2" = 1'-0"

LAKESIDE DRIVE
S71°30'00"W 193.29'
A=102.85' R=116.20'

SITE PLAN
SCALE: 1" = 30' - 0"

