

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXXX~~ 410-313-2640

P 513373

A 57610-B

DISTRICT _____

DATE 4-6-2000

DATE SYSTEM APPROVED 1/4/01

INSPECTOR H. Ritkin

INDEXED

WTC III Plumbing & Heating

IS PERMITTED TO INSTALL ☒ ALTER _____

ADDRESS 1820 Gillis Falls Road, Woodbine, MD 21797 PHONE 410-489-4457

SUBDIVISION Spring Hollow LOT 2 ROAD 17105 Spring Hollow Court

PROPERTY OWNER Vance Merson ANNE LINN

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 280

Pumped Septic System Proposed

INSTALL: 1-1250 Gallon Pump Chamber

NOTES: - Septic pump detail to be provided by installer prior to issuance of septic permit.
- Pump performance test is necessary prior to Health Department approval of pumped septic system.

TRENCHES - Trench to be 3 feet wide. Inlet 3.0 feet below original grade. Bottom maximum depth 5.0 feet below original grade. Effective area begins at 3.0 feet below original grade. 2.0 feet of stone below distribution pipe.

LOCATION - Begin trenches 25 feet off the front lot line and 10 feet off the left lot line as seen when facing the lot from Spring Hollow Court. Run trenches on contour as shown on approved septic plan.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. 12/24/99 O.K. (BB)

PLANS APPROVED BY Amy McMillen DATE 11-24-1999

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

OLD PERMIT SIGNED
AND RETURNED 6/14/01

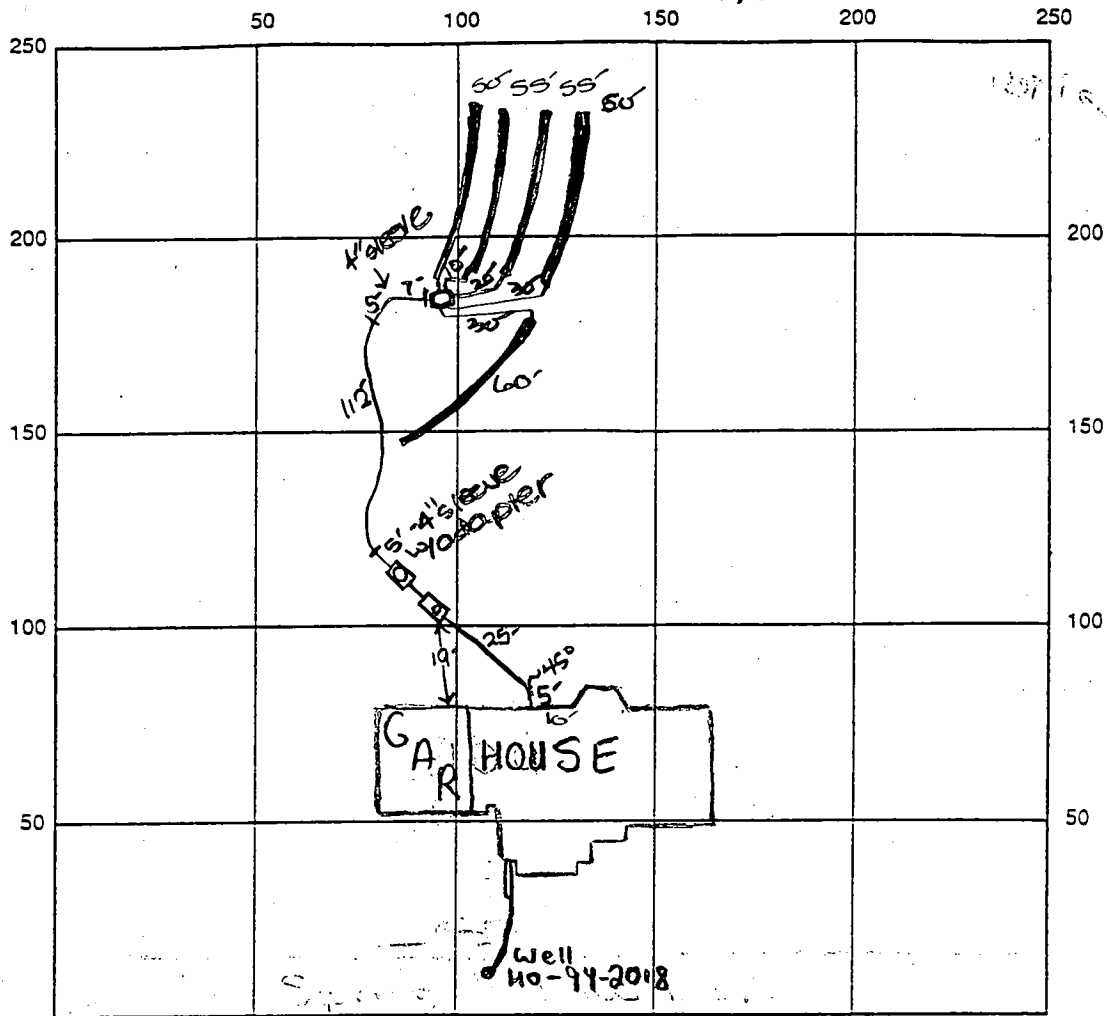
B00130849 - deck

OLD PERMIT SIGNED

AND RETURNED 6/27/01
B00131174 - inground pool

57610B

NOT TO SCALE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
SPRING HOLLOW COURT

SEPTIC TANK LEVEL OK-1250 gal p.p.s.t. CLEANOUTS one on s.t., manhole on PP

DISTRIBUTION BOX LEVEL OK

DRAIN FIELD/TILE DEPTH 5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 280 FT.

NUMBER OF TRENCHES 5 ~~ONE SIDEWALL~~ BOTTOM AREA 840 SQ. FT.

DRYWELL INSIDE DIAMETER N/A FT. EFFECTIVE DEPTH BELOW INLET N/A FT.

ABSORBENT AREA N/A SQ. FT.

REMARKS: 4/20/00 OK to cover all septic work. Need pump performance test for final approval. DKS

1/4/01 PUMP/ALARM OK (MR)

DATE SYSTEM APPROVED 1/4/01 INSPECTOR M. R. Skin

4/20/00 late pm

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

~~461-0032~~
410-313-2640

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation ☒
Replacement ☐

Receipt # _____
Date _____

Name of Installer WTC III P+H

Telephone _____

License Number 7979

Certified Well Pump Installer _____ Well Driller _____ Registered Plumber ☒

Name of Property Owner Vance Merson

Telephone 829-3024

Subdivision Spring Hollow Lot # 2

Well Tag # HO-94-2018

Site Address 1705 Spring Hollow

Pump

1. Type
a. Deep well jet _____
b. Shallow well jet _____
c. Submersible ☒

2. Make _____

3. Model # _____

4. Capacity _____ 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 _____
2. RPM _____
3. Voltage _____
a. 110 _____
b. 220 ☒

Pitless Adapter

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

Tank

1. Capacity 40
2. Pressure relief valve? yes

Piping

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

Well data

1. Depth 205 ft.
2. Yield 10 GPM
3. Static water level 49 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: [Signature]

Date: 4/20/00

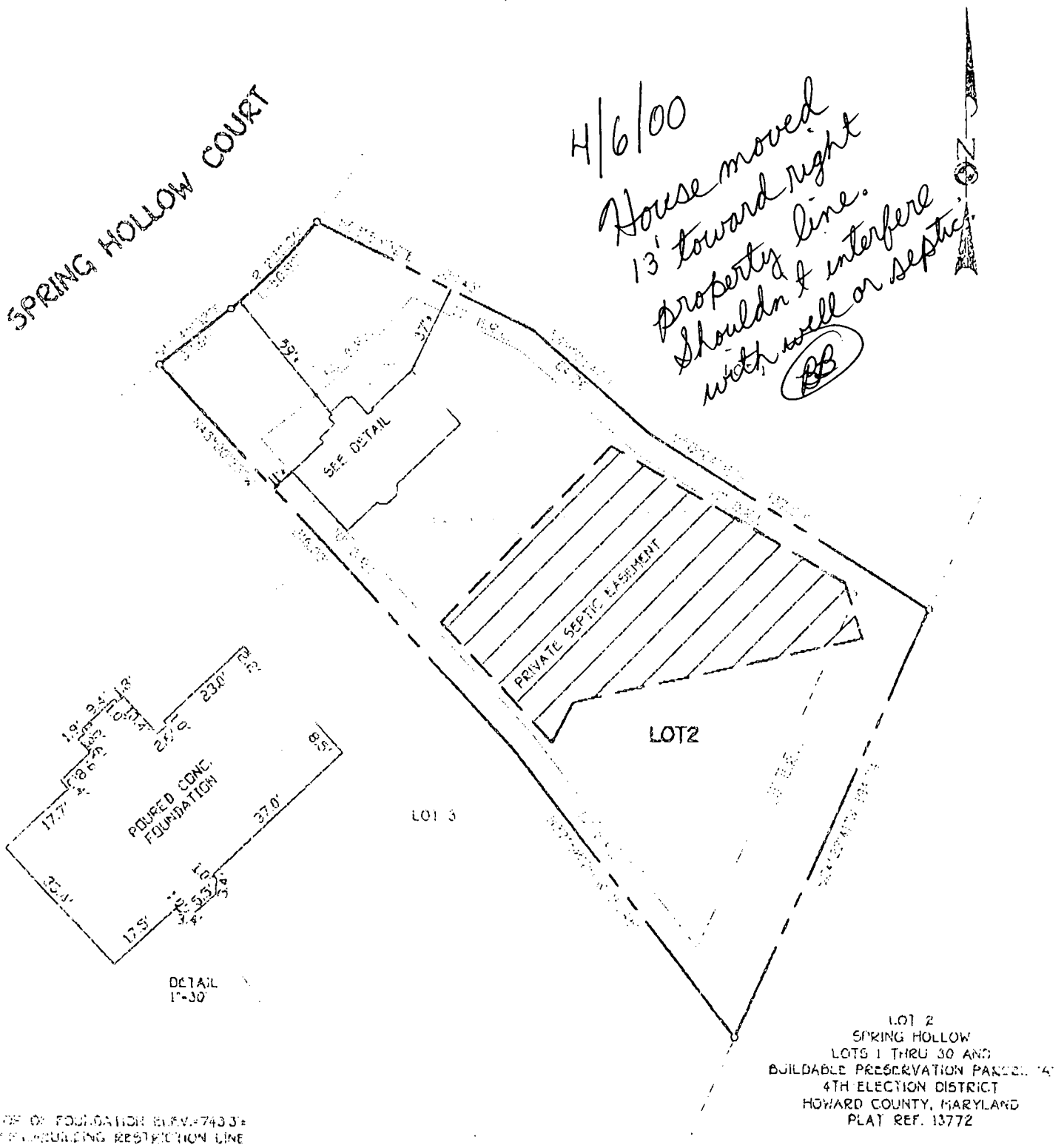
Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.

GENERAL NOTES:

1) THIS PLAT IS PREPARED FOR THE BENEFIT OF THE CLIENT SIGNING THE HOUSE LOCATION SURVEY APPROVAL FORM. INsofar AS IT IS REQUIRED BY A LENDER OR TITLE INSURANCE COMPANY OR ITS AGENTS IN CONNECTION WITH THE CONTINGENT TRANSFER, FINANCING OR RE-FINANCING. UNLESS INDICATED AS BEING A BOUNDARY SURVEY, THIS PLAT IS NOT INTENDED FOR USE IN THE ESTABLISHMENT OF PROPERTY LINES AND IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OF LINES, GARAGES, BUILDINGS OR OTHER EXISTING OR FUTURE IMPROVEMENTS. AS A RESULT, THIS PLAT DOES NOT PROVIDE FOR ACCURATE IDENTIFICATION OF PROPERTY LINE, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING OR RE-FINANCING.

2) SUBJECT PROPERTY IS SHOWN IN ZONE "C" ON THE NATIONAL FLOOD INSURANCE PROGRAM FLOOD INSURANCE RATE MAP OF HOWARD COUNTY, MARYLAND, COMMUNITY PANEL No. 240044 0002, EFFECTIVE DATE DEC. 4, 1996.

3) THE OFFSETS FROM BUILDING LINE TO PROPERTY LINE AS SHOWN ON THE PLAT HEREON ARE TO AN ACCURACY OF 0.5' PLUS OR MINUS (±).



HOUSE LOCATION DRAWING

FOUNDATION LOCATION: 127700
FINAL LOCATION: _____
BOUNDARY SURVEY: _____

SCALE: 1"=60'
DATE: 1/18/00
DRAWN BY: LPL
CHECKED BY: CC
PROJECT No. 61434

PROFESSIONAL LAND SURVEYOR
REG. 10703

DATE

APPLICATION

PERCOLATION TESTING

A _____

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
PO BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE 461-9933

DISTRICT _____

DATE _____

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 Lambert Cissel VANCE MEKSON

ADDRESS 3425 Hipsley Mill Road, Woodbine, MD 21797 PHONE (410) 442-5671

PROSPECTIVE BUYER Developer, Land Marketing Consultants, Inc., Timothy W. Feaga

ADDRESS 3243 Bethany Lane, Ellicott City, MD 21042 PHONE (410) 313-8808

PROPERTY LOCATION:

SUBDIVISION Cissel Property LOT NO 1

ROAD AND DESCRIPTION Intersection of Hardy & St. Michael's Road

(17105 Spring Hollow Court)

TAX MAP 7 PARCEL # 394, 4, 341, 144

SIZE OF LOT 1 Acre TYPE BLDG SFD - 4 Br
(SINGLE FAMILY DWELLING OR COMMERCIAL)

COOL PERMIT SIGNED

AND RETURNED 11-24-99

Serial # B00121440

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. Willis Lambert Cissel JR

(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

APPLICATION

PERCOLATION TESTING

A _____

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
PO BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE 461-9933

DISTRICT _____

DATE _____

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 Lambert Cissel

ADDRESS 3425 Hipsley Mill Road, Woodbine, MD 21797 PHONE (410) 442-5671

PROSPECTIVE BUYER Developer, Land Marketing Consultants, Inc., Timothy W. Feaga

ADDRESS 3243 Bethany Lane, Ellicott City, MD 21042 PHONE (410) 313-8808

PROPERTY LOCATION:

SUBDIVISION Cissel Property LOT NO 2

ROAD AND DESCRIPTION Intersection of Hardy & St. Michael's Road

TAX MAP 7 PARCEL # 394, 4, 341, 144

SIZE OF LOT 1 Acre TYPE BLDG _____
(SINGLE FAMILY DWELLING OR COMMERCIAL)

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. Willis Lambert Cissel JR

(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

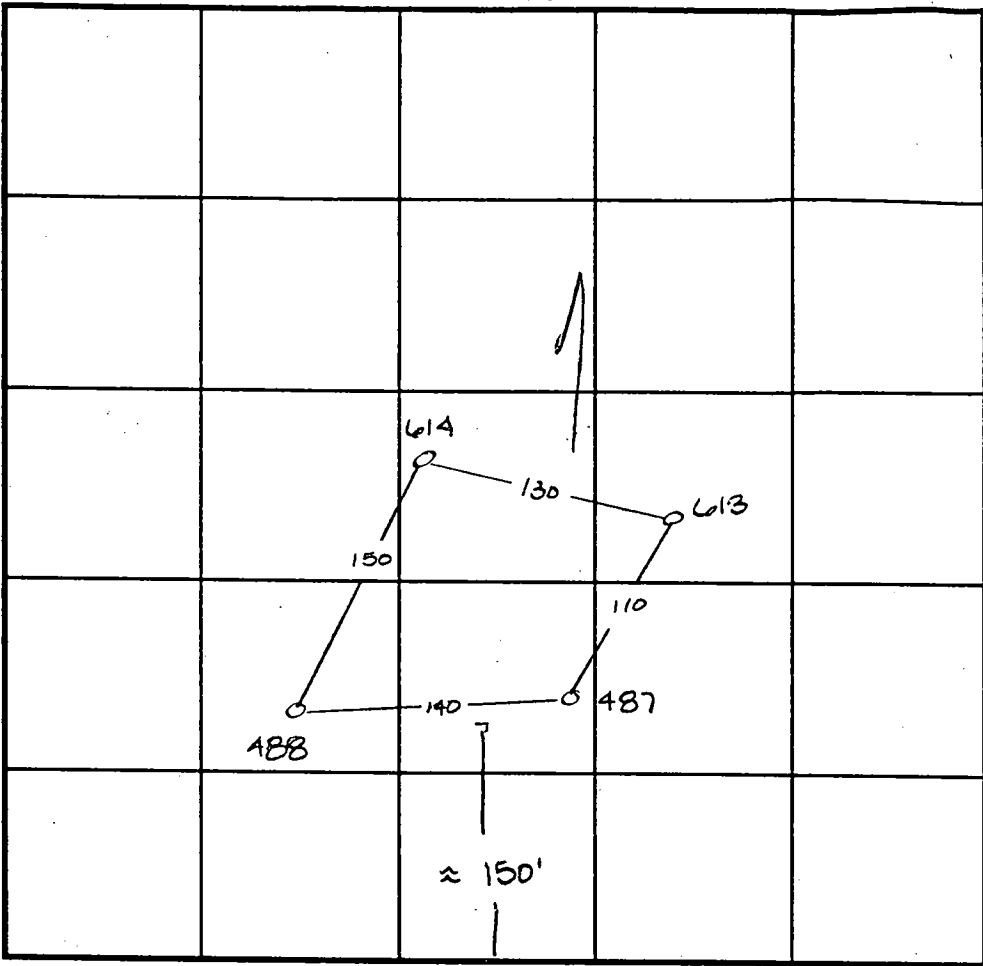
COUNTY #

SOIL PROFILE

0' 488
30% shale
beigh
SiClm
3.0
dark
orange
red
SiLm
30%
Shale
7.0
40%
Rx
dark
orange
SiLm
9.0

614
beigh
to
orange
SiClm
10% Rx
3.0
lgt
orange
SiSaln
10% Rx
7.0
pocket of
40% Rx
8.0
orange
SiSaln
10% Rx
11.0

487 613
tan
brown
SiClm
2.0
red
SiLm
7.0
lgt pink
yellow
SaSiLm
15%
Shale
12.0



SOIL PROFILE

0'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.
Hardy Road

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8-21-96	488	3.0 √ 9.0	7:36	7:37	7:37	7:38 ³⁰	1 1/2 min
	614	3.5 √ 11.0	7:41 ³⁰	7:50 ³⁰	7:50 ³⁰	8:02	1 1/2 min
	487	2.0 √ 12.0	1:54	1:56	1:56	1:59	3 min
	613	Visual	only - SCC profile				OK

REMARKS _____
TYPE OF SOIL _____
TESTED BY Amy McMillen ALSO PRESENT Tim Feaga
TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____
INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____

APPLICATION

PERCOLATION TESTING

A 47047

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
PO BOX 476 ELLICOTT CITY MARYLAND 21043
TELEPHONE 461 9933

DISTRICT 4th

DATE April 11, 1991

5/7/91

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 W. Lambert Cissel, Jr.

ADDRESS 3425 Hipsley Mill Road, Woodbine, MD 21797 PHONE 301-442-2463

PROSPECTIVE BUYER Same

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Stevens Delight LOT NO 4

ROAD AND DESCRIPTION 1300 ± St. Michaels Rd.

TAX MAP 1 PARCEL # 341

SIZE OF LOT 3.5 acres ± TYPE BLDG Single Family Dwelling
(SINGLE FAMILY DWELLING OR COMMERCIAL)

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.

Christine A. Richards
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

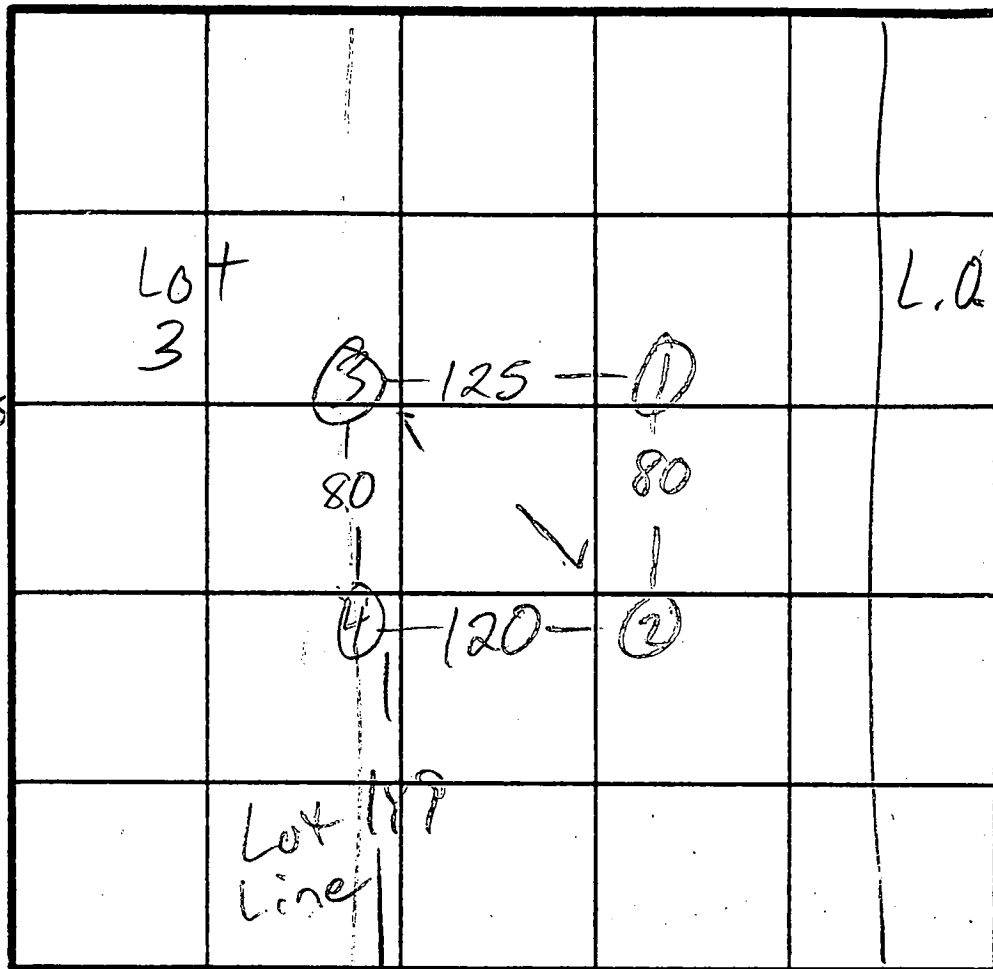
REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

Lot 4
A47047

①-④
SOIL PROFILE

0
org brn
sa cl
loam
15-20% frags
2 1/2 - 4 1/2
brn tan
sa lm
20-30%
shaley
saprolite
red frags
12-12 1/2



HARDY RD

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
6/4/91	1 S ₂	4 5	10:29 11:16	15 min 11:33	3/4" REDIG 11:33	35 min 3/4"	fail	
1/1	1 V ₃	7 12 1/2	1:28	1:29	1:29	1:33	4	
	2 S ₂	4 1/2 7 1/2	10:29 10:32	10:34 10:34	10:34 10:34	10:45 10:37	11 3	
1	2 V	12 1/2	sim to profile 25-30% frags					fail
5/3/91	3 S	3 1/2	12:34	12:43	12:43	12:50	7	
1/1	3 V	12	see profile					
	4 S ₂	3 1/2 5	12:35 12:57	{ SLOW REDIG				
	4 V ₃	7 12	1:13 see	1:18 profile	1:18	1:30	12	

REMARKS

HOLES OK, PER PLAN ±

TYPE OF SOIL

TESTED BY

M. Rifkin

ALSO PRESENT

ST. MICHAEL'S
CHURCH

LOT 2

Sep. Tank

LOT 3

LOT 4

STEVEN'S DELIGHT

HARDY ROAD

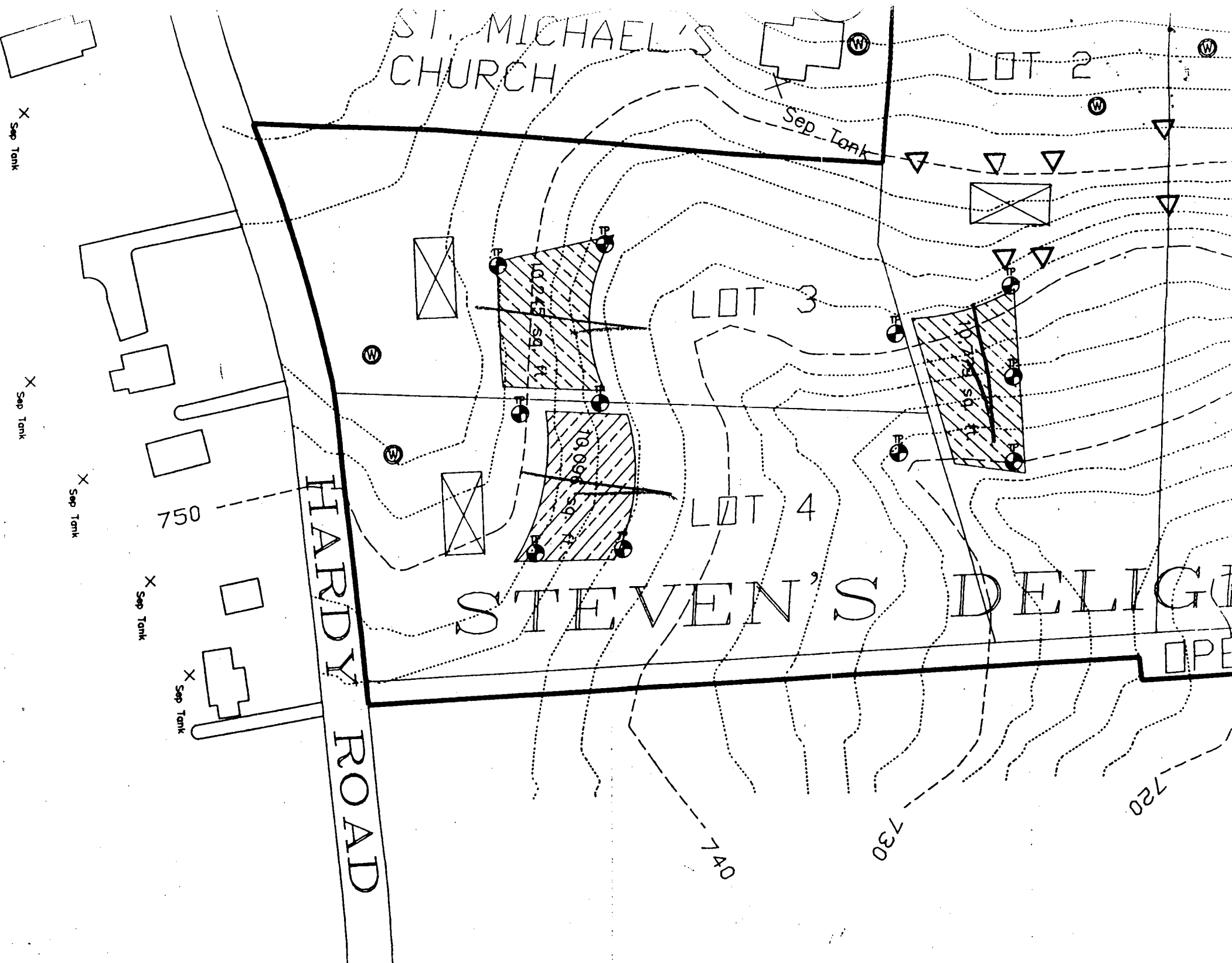
750

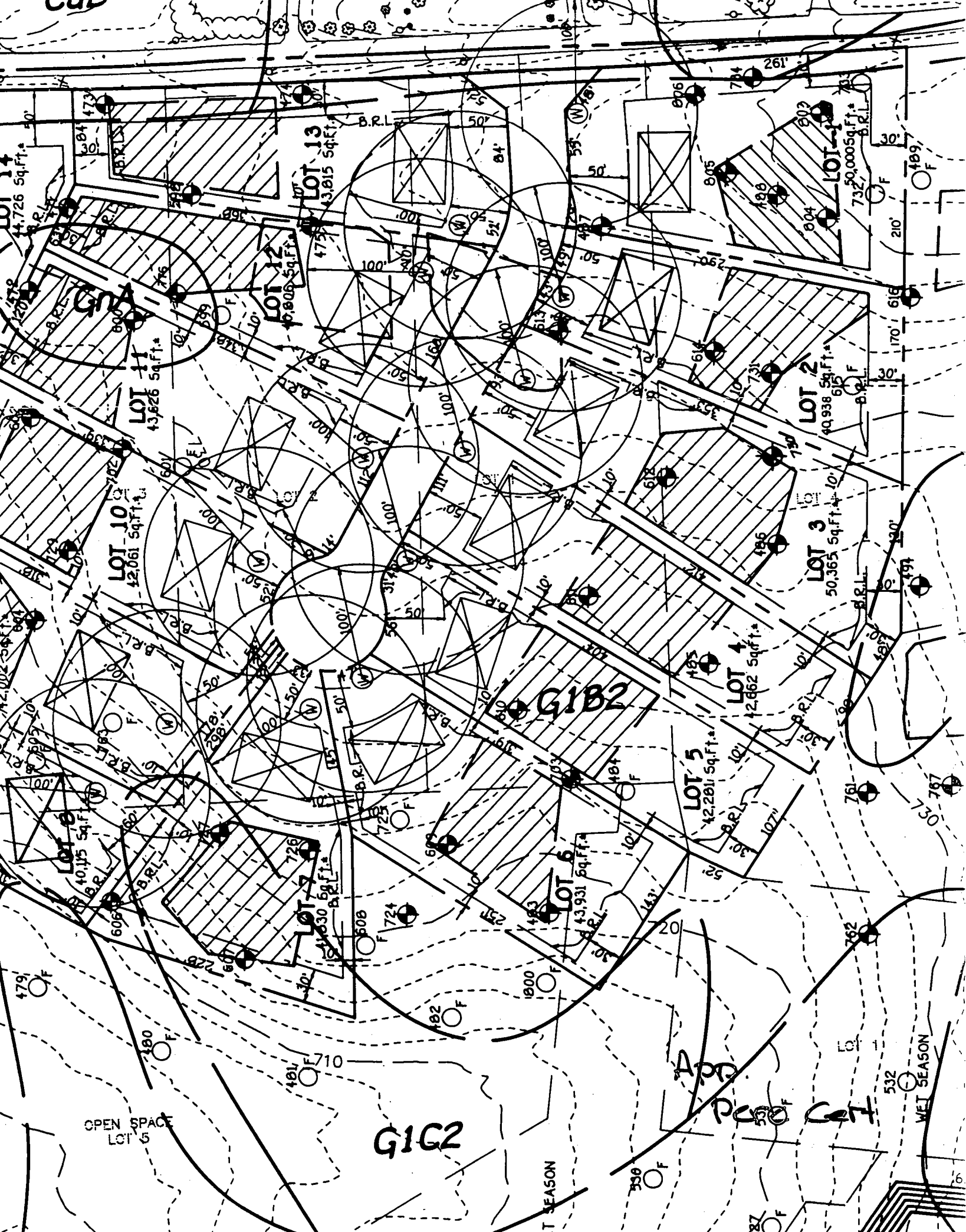
740

730

720

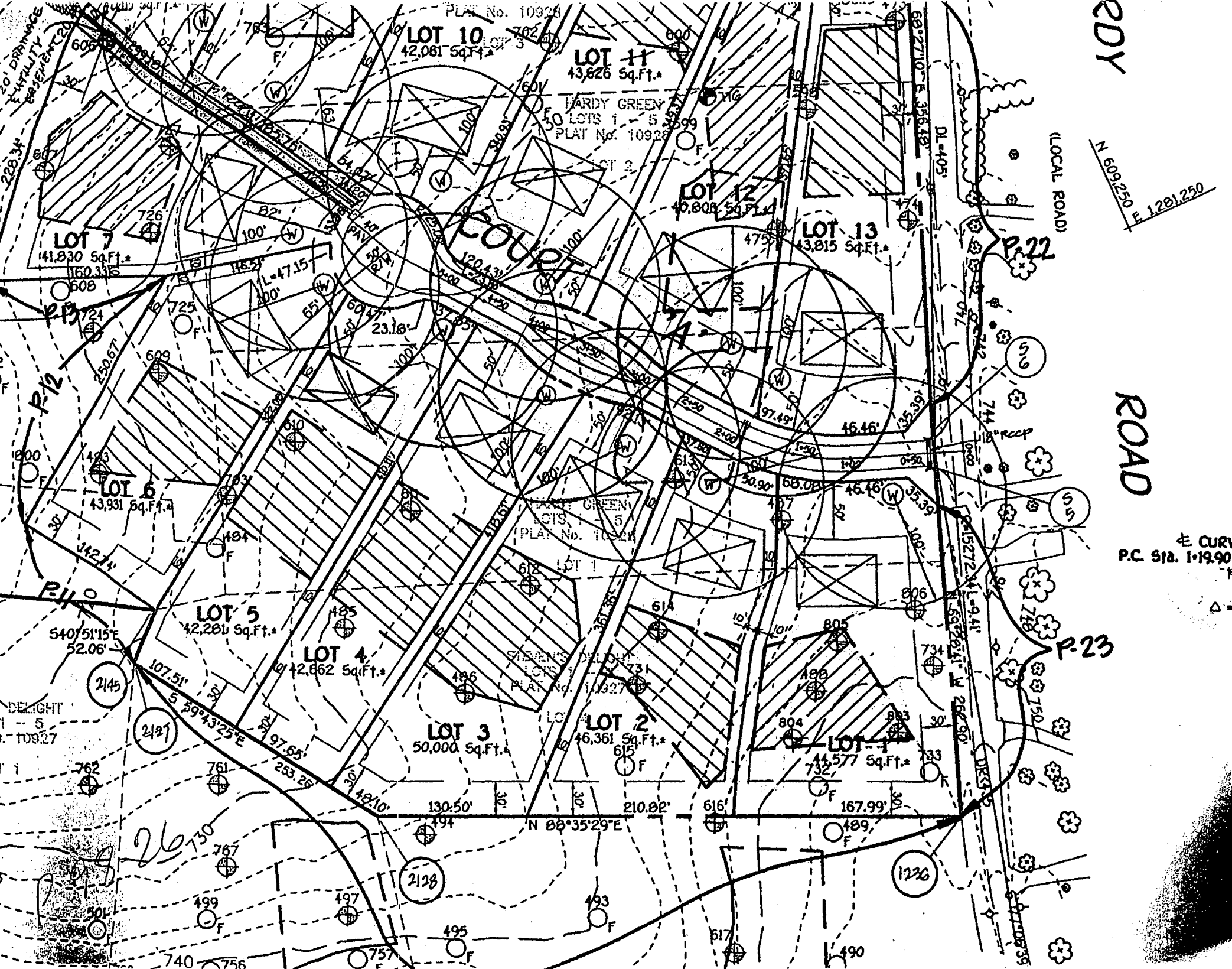
OPEN

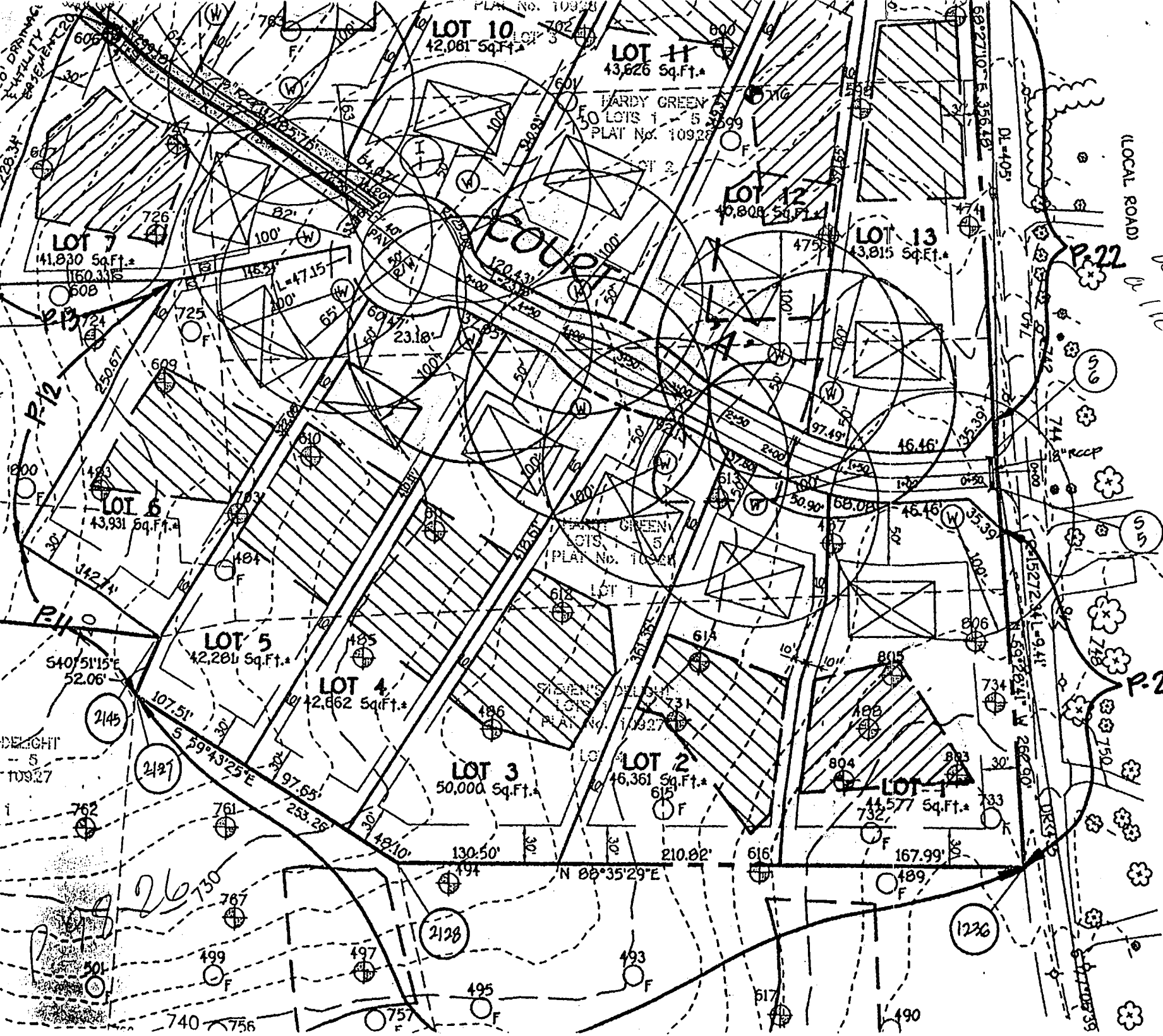




N 609.250
E 1281.250

4 CURV
 P.C. 512. 1-19-90





20Y

(LOCAL ROAD)

N 60°25'0" E 1201.250'

Well stated by
a licensed surveyor
ROAD

E CURV
P.C. 518.1-19.90

P-23

P-22

Approved Septic System Plan
Howard County Health Department

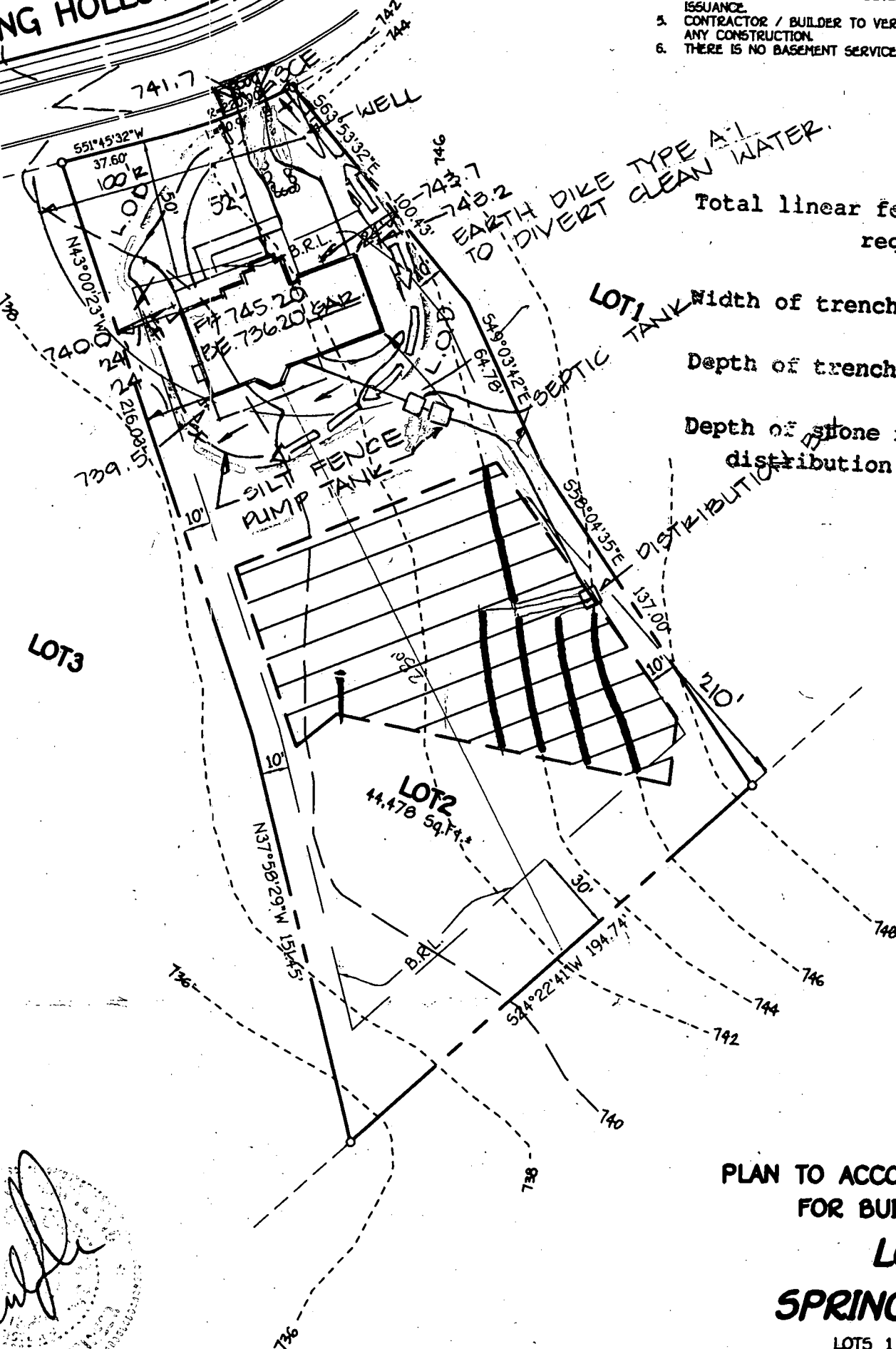
Ami M. Miller 11/24/99
Signature Date

VICINITY MAP
SCALE: 1"=200'

GENERAL NOTES

1. SEPTIC EASEMENT SUBJECT TO HOWARD COUNTY HEALTH DEPARTMENT No.
2. PROPOSED 1500 GALLON SEPTIC TANK.
3. A. FIRST FLOOR ELEVATION:
B. BASEMENT ELEVATION:
C. INVERT OF SEPTIC SYSTEM AT HOUSE: 739.5
D. INVERT IN AT SEPTIC TANK: 744.5
E. INVERT OUT AT SEPTIC TANK: 744.5
F. PROPOSED GRADE OVER SEPTIC TANK: 745.0
G. INVERT AT DISTRIBUTION BOX: 743.00
H. EXISTING GROUND OVER DISTRIBUTION BOX: 746.00
4. LENGTH OF TRENCH TO BE DETERMINED AT TIME OF SEPTIC PERMIT ISSUANCE.
5. CONTRACTOR / BUILDER TO VERIFY ELEVATIONS IN FIELD BEFORE BEGINNING ANY CONSTRUCTION.
6. THERE IS NO BASEMENT SERVICE TO SEPTIC SYSTEM.

NG HOLLOW COURT



Total linear feet of trench
required 280 feet

Width of trench(es) 3.0 feet

Depth of trench(es) 5.0 feet

Depth of stone required below
distribution pipe 2.0 feet

PLAN TO ACCOMPANY APPLICATION
FOR BUILDING PERMIT

LOT 2

SPRING HOLLOW

LOTS 1 THRU 30 AND
BUILDABLE PRESERVATION PARCEL 'A'
ZONED: RC-DEO

TAX MAP NO. 7 PARCEL NOS. 38,144,341,394 AND 522

C 1		9811		SEQUENCE NO. (MDE USE ONLY)		STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE TYPE						THIS REPORT MUST BE SUBMITTED AFTER WELL IS COMPLETED. ✓																																			
1 2 3 4 5 6								COUNTY NUMBER A57610 B																																							
ST/CO USE ONLY DATE Received MM DD YY 8 13		DATE WELL COMPLETED MM DD YY 04 15 2018						Depth of Well 22 205 26 (TO NEAREST FOOT)						PERMIT NO. FROM "PERMIT TO DRILL WELL" H0-94-2018 28 29 30 31 32 33 34 35 36 37																																	
OWNER Cissel Lambert last name												STREET OR RFD Spring Hollow Ct first name												TOWN Poplar Springs																							
SUBDIVISION Spring Hollow												SECTION												LOT 2																							
WELL LOG Not required for driven wells												GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL (Circle one) CEMENT CM BENTONITE CLAY BC NO. OF BAGS 19 NO. OF POUNDS 1760 GALLONS OF WATER 114 DEPTH OF GROUT SEAL (to nearest foot) from 0 TOP 52 ft. to 30+ BOTTOM 58 ft. (enter 0 if from surface)												C 3 PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 10 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 49 ft. WHEN PUMPING 118 ft. TYPE OF PUMP USED (for test) A air P piston T turbine C centrifugal R rotary O other (describe below) J jet S submersible																							
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING												CASING RECORD casing types insert appropriate code below MAIN CASING TYPE PL Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 55 EACH CASING diameter inch depth (feet) from to												PUMP INSTALLED DRILLER INSTALLED PUMP (CIRCLE) (YES or NO) YES NO IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS. TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29 CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 35 PUMP HORSE POWER 37 41 PUMP COLUMN LENGTH (nearest ft.) 43 47 CASING HEIGHT (circle appropriate box and enter casing height) + above LAND SURFACE 2 (nearest foot) - below 50 51																							
DESCRIPTION (Use additional sheets if needed)												SCREEN RECORD screen type or open hole insert appropriate code below ST STEEL BR BRASS PL PLASTIC HO OPEN HOLE OT OTHER DEPTH (nearest ft.) 1 H0 53 205 2 23 24 26 30 32 36 3 38 39 41 45 47 51 SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH) 56 60 from to												LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURES AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL) Road well 20' 20' Prop. Lines																							
NUMBER OF UNSUCCESSFUL WELLS: 0												C 2 WELL HYDROFRACTURED YES Y NO N												C 2 DEPTH (nearest ft.) 1 H0 53 205 2 23 24 26 30 32 36 3 38 39 41 45 47 51 SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH) 56 60 from to												C 2 WELL HYDROFRACTURED YES Y NO N											
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 26.04.04 "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.												C 2 WELL HYDROFRACTURED YES Y NO N																							
DRILLERS LIC. NO. MSD116 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)												MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q 70 72 74 75 76 TELESCOPE CASING LOG INDICATOR OTHER DATA												C 2 WELL HYDROFRACTURED YES Y NO N																							
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)																								C 2 WELL HYDROFRACTURED YES Y NO N																							

Well Permit No. HO - 94-2018
Location of property (road) Spring Hollow Ct
Subdivision Spring Hollow Lot 2 Block Plat Sec.
Well Driller Ralph Mayne Owner Lambert Cisse

Depth of well 205^R

Distance of measuring point (M.P.) above ground 2 ft

Static water level (S.W.L.) below M.P. 49 ft.

I. High rate pumping -- reservoir drawdown

Time pump started 8:15

Pumping rate 12 GPM

Time pump started 8:15 Pumping rate 12 GPM
Total time 15 min to reach pumping water level 108 ft. below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes

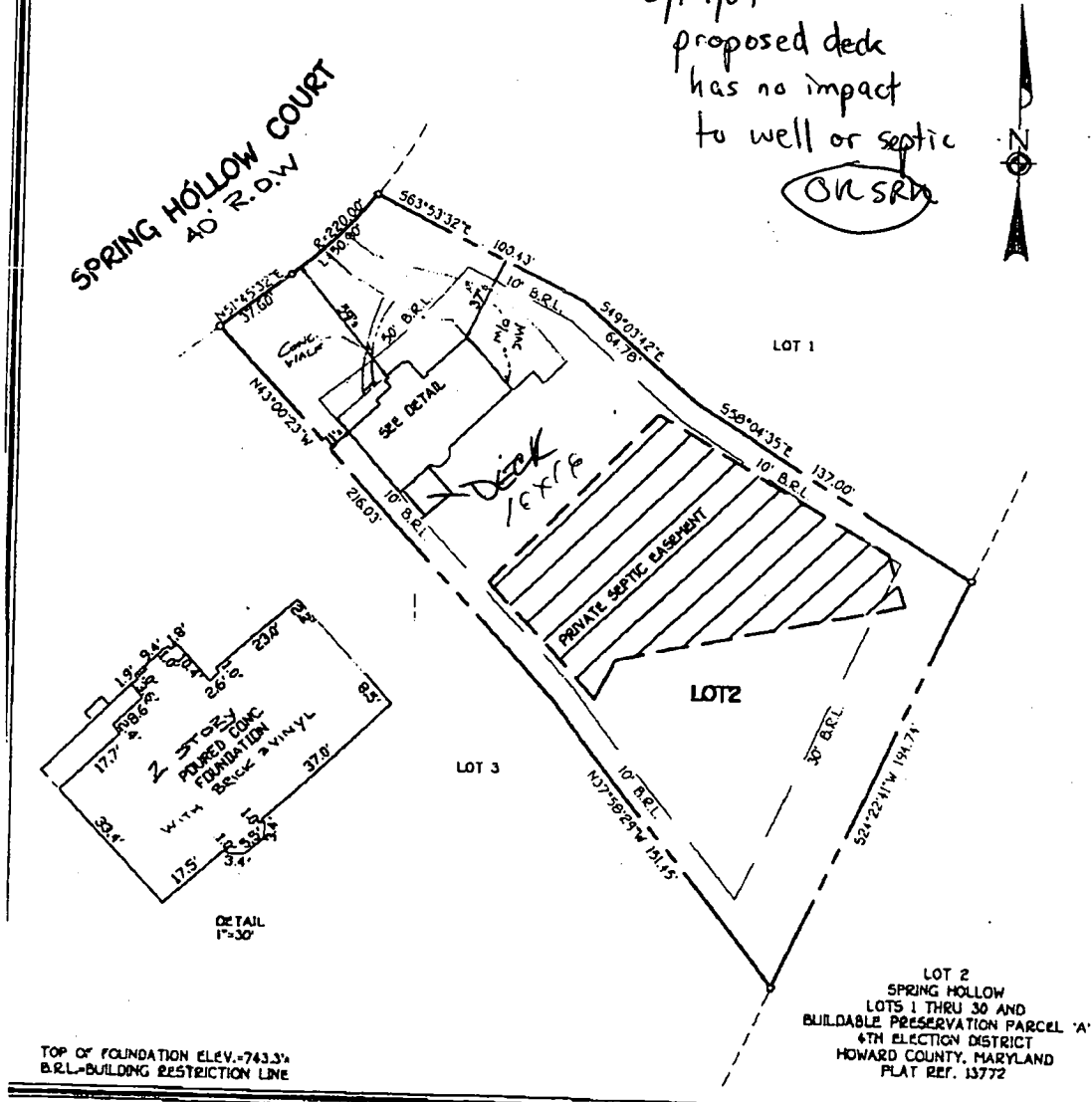
[illegible]

GENERAL NOTES:

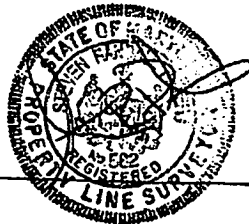
- 1) THIS PLAT IS PREPARED FOR THE BENEFIT OF THE CLIENT, SIGNING THE HOUSE LOCATION SURVEY APPROVAL FORM INsofar AS IT IS REQUIRED BY A LENDER OR TITLE INSURANCE COMPANY OR ITS AGENTS IN CONNECTION WITH THE CONTEMPLATED TRANSFER, FINANCING OR RE-FINANCING. UNLESS INDICATED AS BEING A BOUNDARY SURVEY, THIS PLAT IS NOT INTENDED FOR USE IN THE ESTABLISHMENT OF PROPERTY LINES AND IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATIONS OF FENCES, GARAGES, BUILDINGS OR OTHER EXISTING OR FUTURE IMPROVEMENTS. AS A RESULT, THIS PLAT DOES NOT PROVIDE FOR ACCURATE IDENTIFICATION OF PROPERTY LINE, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING OR RE-FINANCING.
- 2) SUBJECT PROPERTY IS SHOWN IN ZONE C ON THE NATIONAL FLOOD INSURANCE PROGRAM FLOOD INSURANCE RATE MAP OF HOWARD COUNTY, MARYLAND, COMMUNITY PANEL No. 210044 0007, EFFECTIVE DATE: DEC. 4, 1986.
- 3) THE OFFSETS FROM BUILDING LINE TO PROPERTY LINE AS SHOWN ON THE PLAT HEREON ARE TO AN ACCURACY OF 0.5' PLUS OR MINUS (+/-).

ANN
LINN

6/14/01 -
proposed deck
has no impact
to well or septic
ON SRM



FISHER, COLLINS & CARTER, INC.
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS
CENTENNIAL SQUARE OFFICE PARK • 10272 BALTIMORE NATIONAL PIKE
BALICOTT CITY, MARYLAND 21042
(410) 461 - 2855



PROFESSIONAL LAND SURVEYOR
REG. - 682

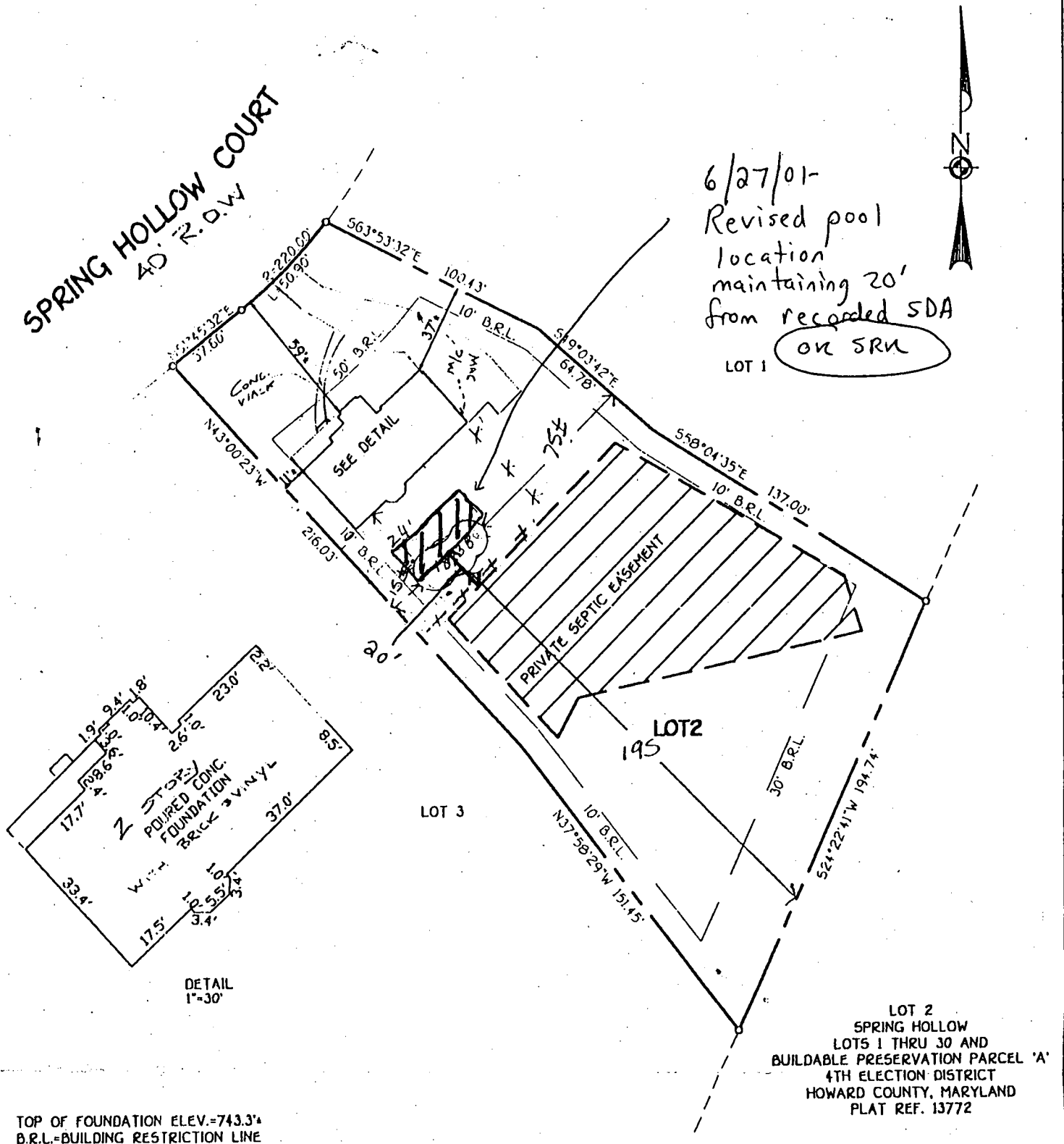
**HOUSE LOCATION
DRAWING**

FOUNDATION LOCATION: 10/27/00
FINAL LOCATION: 1/5/01
BOUNDARY SURVEY:

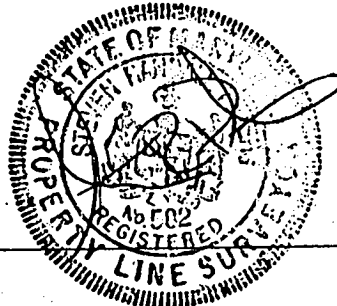
SCALE: 1"=60'
DATE: 1/18/00
DRAWN BY: L.P.F.
CHECKED BY: C.C.
PROJECT No: 61434

GENERAL NOTES:

- 1) THIS PLAT IS PREPARED FOR THE BENEFIT OF THE CLIENT SIGNING THE HOUSE LOCATION SURVEY APPROVAL FORM INsofar AS IT IS REQUIRED BY A LENDER OR TITLE INSURANCE COMPANY OR ITS AGENTS IN CONNECTION WITH THE CONTEMPLATED TRANSFER, FINANCING OR RE-FINANCING. UNLESS INDICATED AS BEING A BOUNDARY SURVEY, THIS PLAT IS NOT INTENDED FOR USE IN THE ESTABLISHMENT OF PROPERTY LINES AND IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATIONS OF FENCES, GARAGES, BUILDINGS OR OTHER EXISTING OR FUTURE IMPROVEMENTS. AS A RESULT, THIS PLAT DOES NOT PROVIDE FOR ACCURATE IDENTIFICATION OF PROPERTY LINE, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING OR RE-FINANCING.
- 2) SUBJECT PROPERTY IS SHOWN IN ZONE C ON THE NATIONAL FLOOD INSURANCE PROGRAM FLOOD INSURANCE RATE MAP OF HOWARD COUNTY, MARYLAND, COMMUNITY PANEL No. 240044 0007, EFFECTIVE DATE: DEC. 1, 1996.
- 3) THE OFFSETS FROM BUILDING LINE TO PROPERTY LINE AS SHOWN ON THE PLAT HEREON ARE TO AN ACCURACY OF 0.5' PLUS OR MINUS (+).



FISHER, COLLINS & CARTER, INC.
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS
CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE
ELLICOTT CITY, MARYLAND 21042
(410) 461-2055



PROFESSIONAL LAND SURVEYOR
REG. • 686

HOUSE LOCATION DRAWING

FOUNDATION LOCATION: 1/17/00
FINAL LOCATION: 1/5/01
BOUNDARY SURVEY:

SCALE: 1"=60'
DATE: 1/18/00
DRAWN BY: L.P.E.
CHECKED BY: C.C.
PROJECT No.: 61434