50 AM 1 /30 AM

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH

XXXXXXXXXX

313-2640

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

INDEXED

P 58469

57655

DISTRICT 5th

DATE <u>5-19-97</u>

DATE SYSTEM APPROVED

9-30-98

NSPECTOR_

David Bassler	- CELL PHONE	410-977-2203	IS PERMIT	TED TO INSTALL _	X ALTER	
ADDRESS 4990 Shej	pard Lane, Ellico	tt City, Md.		PHONE 410-53	1-2193	
SUBDIVISION		LOT	ROAD507	0 Sheppard L	ane	
		Basslers, Inc.				
ADDRESS						
SEPTIC TANK CAPACITY	1000 GALLONS	MOBIL HON	1E			
NUMBER OF BEDROOMS	3		÷			
210 SQUARE FE	EET PER BEDROOM				•	
LINEAR FEET OF TRENCH	REQUIRED 210					
depth	6.5 feet below or	e. Inlet 4.5 feet iginal grade. Eff of stone below d	fective area	begins at 4		
LOCATION - Start as follows:	the first trench llows: 200' off t	at the highest par he souther propert	rt of the se	ptic area, o	r approximate	≥ly vel
NOTES - No tre		feet in length.	provide 6"	- 8" diamete	r cleanout ar	nd
cap to	grade or above o	n septic tank.	orlaw			
PLANS APROVED BY	Mark Rifkin			DA	TE 5/08/97	

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

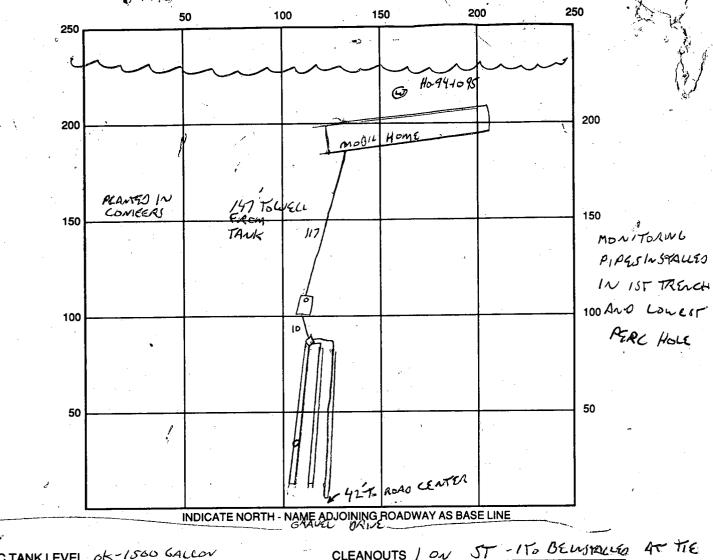
NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

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.

FYA ON ABS AGGET TED. IF TO GO SET TO TARRIO SEET EN THAR OF EET WARRIOGE TO GO SET TED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES



SEPTIC TANK LEVEL OK-1560 GALLON CLEANOUTS 1 ON ST - 170 BELISTALIED AT THE
SEPTIC TANK LEVEL OK-1560 GALCON CLEANOUTS JON ST - 170 BEWIELED AT THE
DISTRIBUTION BOX LEVEL OK
DRAIN FIELD/TITLE DEPTH 6.5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 4.5 FT.
EFFECTIVE GRAVEL DEPTH 24 FT. TOTAL LENGTH 2×90, FT. 1-100 = 280
NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREASQ. FT.
DRYWALL INSIDE DIAMETER FT.
ABSORBENT AREASQ. FT.
REMARKS: 5/4/98 NERDS UNE FROM TRAVER TO S.T., DIST BOX CLEANED OUT WINTE CONTINUE. AS
5/8/98 SYSTEM INSTALLED, WE MISSED INSPECTION, APPLICANT COVERED WORK
DUE TO IMPRIBLE RAIN ICH PER CH SKETCH OF SYSTEM TO BE COMPRETED BY MA.
BAJSLER. HY 5/8/98 TRENCHES VERIFFO - DISTON OK, COVER ALL MORK, WAT
OR -NEFD INSTANDATION SHEET, CLEANUTON LINE TO ST + PINE CERT, SITE
PLAN FOR TRAILER 2 REQUI FOR FIRST - AGREED BY D. BASSER. St 9/30/18 New cold
DATE SYSTEM APPROVED 4-30-98 INSPECTOR & McMiller Con
sep



Septic Data

Mobile Home

of bedrooms

First flags

First floor 376.00

Invert

373.00

Septic Tank

Size 1500 gal. Existing grade 372.00 Invert in 368.30

Invert out

367.90

Distribution Box

Existing grade 371.30 Invert 367.80

Trenches

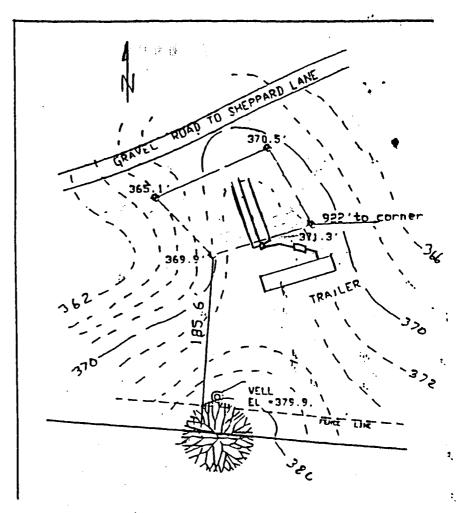
of trenches 2
Length 70.0'
Width 3.0'
2' of stone below pipe

Well #

HO-94-1095

Perc #

A57655



I certify the above measurements and elevations are actual and correct for this

property.

David (Bassh

Scale: 1"=100"

Owner:

Basslers Inc.

Deed ref.: 5

516/763

Acreage:

429.1 ac.

4994 Sheppard Ln..

Map:

28

Zoning: RC-DEO

Ellicott City, MD 21042

Parcel:

49

Contact Person: David Bassler

Home: (410) 531-3589

Pager: (410) 395-0633

Approved Septic Scient Float Howard County Health Department B 00105134

10' MINIMUM BETWEEN
TRAICER AND SEPTIC TANK
20' MINIMUM BETWEEN
TRAICER AND DRAINFIELDS

Mark & Rifkin 5/8/97 Signature / Date Regular Perc Sometime as (M.) CO. Trop 5/198 130

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

30701

A <u>57655</u>

DISTRICT	
----------	--

DATE 9/22/97

HOWARD C	COUNTY	HEALTH	DEPART	MENT
----------	--------	--------	--------	------

BUREAU OF ENVIRONMENTAL HEALTH

461X9933 410-313-2640

CELL PHONE

DATE SYSTEM APPROVED

1 4/0 977-	2203 INSPECTOR
David Bassler	IS PERMITTED TO INSTALL X ALTER
ADDRESS 4990 Sheddard Lane, Ellicott City, MD 21042	· · · · · · · · · · · · · · · · · · ·
SUBDIVISIONLOT	ROAD 5070 Sheppard Lane
PROPERTY OWNER Basslers, Inc.	
ADDRESS 5070 Sheppard Lane, Ellicott City, MD 21042	
SEPTIC TANK CAPACITY 1500 GALLONS Combined	
NUMBER OF BEDROOMS	
SQUARE FEET PER BEDROOM	
LINEAR FEET OF TRENCH REQUIRED 70' Addition of 70' of	trench to existing specs.
PURPOSE - To establish soil conditions sufficient to for a second dwelling unit, and if successful, to pe to the installed system serving the existing trailer reviewed and approved. Monitoring pipe(s) to be ins	rmit connection of the additional trailer once system installation plans have been
as previously discussed, 5/7/98.	
ACCEPTABLE PEPL CERT AND SITE PLAN REQUA	2EO FOR FINAL APPROVAL.
PLANS APROVED BY Glen Savage	DATE9/22-/97

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)

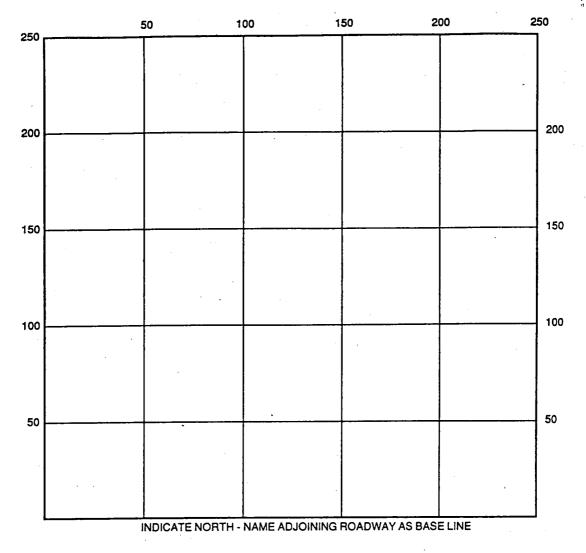
NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH

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



SEPTIC TANK LEVEL	CLEANOUTS	
DISTRIBUTION BOX LEVEL		
DRAIN FIELD/TITLE DEPTHFT.	TRENCH WIDTHFT.	INLET DEPTHFT.
EFFECTIVE GRAVEL DEPTHFT.	TOTAL LENGTHFT.	
NUMBER OF TRENCHES	ONE SIDEWALL/BOTTOM AREA _	SQ. FT.
DRYWALL INSIDE DIAMETERFT.	EFFECTIVE DEPTH BELOW INLET	FT.
ABSORBENT AREASQ. F	т.	
REMARKS:		ı
	4	
DATE SYSTEM APPROVED		





DEPARTMENT OF PLANNING & ZONING

Joseph W. Rutter, Jr., Director

October 10, 1997

Mr. David Bassler 4990 Sheppard Lane Ellicott City, MD 21042

Dear Mr. Bassler:

PEACES IN REQUESTS

OK MA CAUSER REQUESTS

S PERMIT A CONSCER REQUESTS BULLOING PERMIT AGLEAUS PRIOR TO PERE CERT DOCUMENT NEWSION IN ORDER TO COMPLETE POWER CIVE WSBALLARION. OK CONDITIONAL THAT REUSED PARC CERT BE PROMOED FRIOR TO BY DAYS BASJER, JOHN.

RE:

Proposed Farm Tenant Dwelling

4990 Sheppard Lane

This correspondence is in response to your letter of September 23, in which you requested confirmation that constructing a farm tenant mobile home on your farm would be permitted by the Howard County Zoning Regulations. According to your letter, your farm contains 429 acres, and currently contains 7 houses and one mobile home. The addition of the mobile home would bring the total number of dwellings to nine. In your telephone conversation with Stephen Bockmiller on October 9, you informed this office that all accessory dwellings on the subject property are used as residences by employees of the farm, horse care or composting operations on the property.

Your property is located in the RC-DEO (Rural Conservation-Density Exchange Option) Zoning District. Section 104.C.2 of the Zoning Regulations, which addresses the permitted accessory uses in the RC District permits:

- 2 Accessory houses, limited to the following:
 - a. Farm tenant houses and similar uses customarily accessory to agricultural uses, provided that these uses shall not be permitted on parcels of less than 50 acres, and one unit shall be permitted for each 25 acres of that parcel;...

Based on this regulation, your farm has one permitted principal dwelling and seven farm tenant dwellings. A farm of 429 acres would be permitted a total of seventeen farm tenant dwellings. Therefore, the installation of one mobile home for use by a farm employee is permitted by the Zoning Regulations. Please be aware that all farm tenant dwellings must be occupied by persons actively employed in bona fide agricultural operations on the farm. Farm tenant dwellings are not intended for use as rental units or for individuals who are engaged in non-farming activities on the property. Use of these dwellings for families where no one is involved in the farm operation is a violation of the Zoning Regulations.

Based on the above information, the installation of one mobile home on the subject property as a farm tenant dwelling is permitted by the Zoning Regulations, and this Division will approve a building permit for the mobile home, provided that it meets the required 75 foot front, 30 foot side and 60 foot rear setback requirements set forth in Section 104.E of the Zoning Regulations, and meets the definition of a farm tenant house.

Should you have any questions regarding this matter, please contact Stephen Bockmiller of this Division at the telephone number listed below.

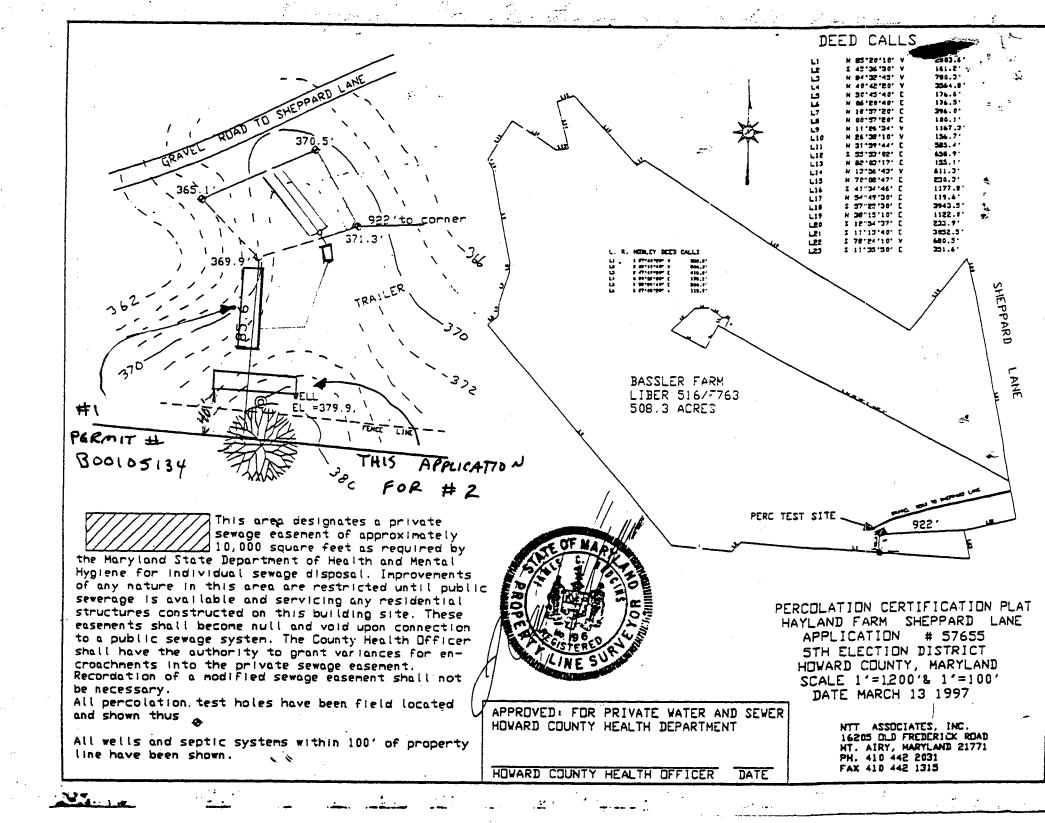
Sincerely,

Wfo. Bu William F. O'Brien, Chief

Division of Comprehensive Planning and Zoning Administration

WFO/SRB/srb

Attachment: Sec. 103.A.43



THE CONTRACTOR OF THE PARTY OF THE PROPERTY OF THE PARTY 49039 SERIAL NUMBER **HOWARD COUNTY** PERMIT APPLICATION B0311090 DEPARTMENT OF INSPECTIONS, LICENSES & PERMIT 3430 COURT HOUSE DRIVE, ELLICOTT CITY, MARYLAND 21043 BUILDING ADDRESS (HOUSE NO., STREET, TOWN OR AREA) GRADING/SEDIMENT CONTROL SHE PRACO DESCRIPTION OF WORK AUTHORIZED ELLICOTT CITY MD PLACEMENT OF MOBIL HOME 16 × 70 for Toward LOT NO. PARCEL NO. AREA BLOCK NO. LIBER 516 763 ZONE MAP | ELEC. DIST. | CENSUS TR. SUB DIVISION ZONE 6051.01 OWNER NAME AND ADDRESS SIZE OF BLDG BASSUER ING 410.531.2193 4994 SHEPPARD OCCUPANTS NAME AND ADDRESS PHONE NO. ROOF TYPE OF BLDG VOLUME AREA B. ROOMS Otener ROOMS BATHS **FIREPLACES** ARCHITECT OR ENGINEER'S NAME AND ADDRESS PHONE NO. FOOTINGS **FOUNDATION** CONTRACTOR'S NAME AND ADDRESS DAJID 34551ER PHONE NO. TYPE OF HEAT WATERWELL SEWER/ŞEPTIÇ **IELECTRICIT** 410-977-2203 4990 SHEPDARD LA **EXISTING USE** PROPOSED USE there in the application; and that no work will be covered un SF MOBIL EST. CONSTRUCTION COST LICENSE NUMBER PERMIT FEE 115.000.00 FOR OFFICE USE **FUNCTION** DATE DISTANCE IN FEET FROM R/W LINE TO FRONT BUILDING LINE ZONING/PLANNING SHA (DISTANCE IN FEET FROM SIDE BLDG. LINE TO SIDE PROPERTY LINE) SEDIMENT/GRADING TO SIDE BUILDING LINE DISTANCE IN FEET, REAR YD. REQUIRING SET **BUILDING OFFICIAL** (CORNER LOT ONLY) **WATER & SEWER** HEALTH DEPT. Check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY FIRE PROTECTION CAUTION To begin construction before a permit placard has been issued STORM WATER MGM

APPROVED

Distribution of Copies:

Green - Planning & Zoning

White - Building Official

Yellow - Engineering

Pink - Health Dept.

Gold - S.H.A.

and displayed on the job is a violation of the law.

before it will be issued.

LP-69-591

Use and occupancy permit must be applied for two weeks

IMPORTANT: PLEASE SHOW ZIP CODES AND AREA CODES WHEREVER REQUIRED.



DEPARTMENT OF PLANNING & ZONING

Joseph W. Rutter, Jr., Director November 20, 1996

Mr. David C. Bassler 12773 Folly Quarter Road Ellicott City, MD 21042

RE:

Farm Tenant Dwellings 4994 Sheppard Lane Tax Map 28, Grid 12, Parcel 49

Dear Mr. Bassler:

This is in response to your letter dated June 7, 1995 and received November 14, 1996, requesting zoning approval for information on a farm tenant house or mobile home for the property referenced above. It is zoned RC-DEO (Rural Conservation-Density Exchange Option). In the Zoning Regulations for the RC district, farm tenant houses or mobile homes ("Farm Tenant Dwellings") are permitted as an accessory use on farm parcels, provided that the parcel is greater than or equal to 50 acres and that the maximum density for such farm tenant houses on a parcel is one unit for each 25 acres. This 429 acre parcel with a total of seven single-family houses does not exceed the density requirement.

The following provisions are applicable for all Farm Tenant Dwellings:

- 1. A Farm Tenant Dwelling shall be primarily occupied by a person who is actively employed in farm operations by the farm located on the parcel upon which the Farm Tenant Dwelling is located ("Farm Tenant"). The occupancy of a Farm Tenant Dwelling by the immediate family of the Farm Tenant, or other persons, is considered as an accessory to this primary occupancy.
- 2. A Farm Tenant Dwelling shall be occupied in perpetuity by a person who qualifies as a Farm Tenant, or by subsequent persons who so qualify. Any occupancy which does not conform with this provision voids the accessory use status of the dwelling as a Farm Tenant Dwelling and may require the removal of the dwelling from the parcel.

David C. Bassler Page 2 November 20, 1996

3. A building permit application for a Farm Tenant Dwelling shall be made in the name of the farm owner or business entity for whom the Farm Tenant is an employee. Such a building permit shall expressly state that the proposed use either is an accessory farm tenant house or mobile home.

Provided the preceding provisions 1, 2 and 3 are followed, a mobile home is permitted as a Farm Tenant Dwelling at this property.

If you should have any further questions, please contact Ms. Dace Blaumanis, Planner I, at (410) 313-2393.

Sincerely,

William F. O'Brien, Chief

Wfo Brun

Division of Comprehensive Planning

and Zoning Administration

WFO/DB:vv Enclosure

RECEIVED David Bassler SEP 19 1997 Hayland Farm 3070 Sheppaul lialbert City Md 9-22-97 We are requesting two nobil hones that could be seemed by a common septic. and well on our fam. The nobil homes are each 2 bedroom and world be on a tempary basis (Motel future development) PAY 25 REDAIN FEE, TO TEST TO EXPAND ALGO AT TIME OF DAUE - UPON FUNTHOL DIDCUSSION WITH YOU, IT 13 OUR UNDERSTANDING THAT "TEMPORARY" IS YOUR INTENT, BUT CANNOT BE GUARANTEED BASED ON ANY 5015 TING LIMITATION ON YOUR PENMITS ON SITE PLAN. THEREFOR 2 SEPARATE SEPTICE EASEMENTS MUST BE \$5TABLISHED TO SATISFY THE COMM REQUIREMENT OF 10,000 SOFT PER DWCLING UNIT. AFTEN THAT, THELE GOULD BE NO OBJECTION TO A COMMON SUPPLY SINCE THE YIELD IS SUFFICIENT AND A COMMON SOTIC SYSTEM JINCE ALL AND UNDE COMMON OWNERSHIP HOWCOM ¥ 9/22/97 MA BAJULER AGREED TO PROLIDE AN OPPORTUNION FOR MONICORM THE EURTIONAL OF THIS SYSTEM - WHE INSTALL AT LEAST I ANTIONING PIPE + ALLOW ANTITUTE ACCESS

APPLICATION

PERCOLATION TESTING

A 5 7655

•	·
HOWARD COUNTY HEALTH DEPARTMENT	DISTRICT
BUREAU OF ENVIRONMENTAL HEALTH	DISTRICT
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043 TELEPHONE: 313-2640	DATE 1-29-97
60 10 MAIN	ENTO ALCE
TO: THE COUNTY HEALTH OFFICER	TO CHAVEL BRIVE
ELLICOTT CITY, MARYLAND	TO CRAVEL BRIVE
	UCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.
PROPERTY OWNER BASS 18-15 INC	
ADDRESS 4994 Sheppard IN EC PHON	410 531-2193
AGENT OR PROSPECTIVE BUYER NONE	
ADDRESS PHON	
PROPERTY LOCATION:	
SUBDIVISION HAY AND FARM LOTNO)
ROAD AND DESCRIPTION 4994 Shepp med IN. ENTER	ON GrAVEL TRUCK
ENTRANCE & 1500' BACK ON LEFT	
TAX MAP 28 PARCEL# 49	
SIZE OF LOT 429 2 AC TYPE BLDG. 2	(SINGLE FAMILY DWELLING OR COMMERCIAL)
THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FAC	CILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE
FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDAE	ILE UNDER ANY CIRCUMSTANCES I ALSO AGREE TO
COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.	C. Bassler
	(SIGNATURE OF APPLICANT)
APPROVED BY FOR	DATE 5/7/98
DISAPPROVED BYFOR	DATE
HOLD PENDING FURTHER TESTS	
REASONS FOR REJECTION OR HOLDING	
PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. #	DATE
SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. #	DATE

THIS IS NOT A PERMIT

APPLICATION

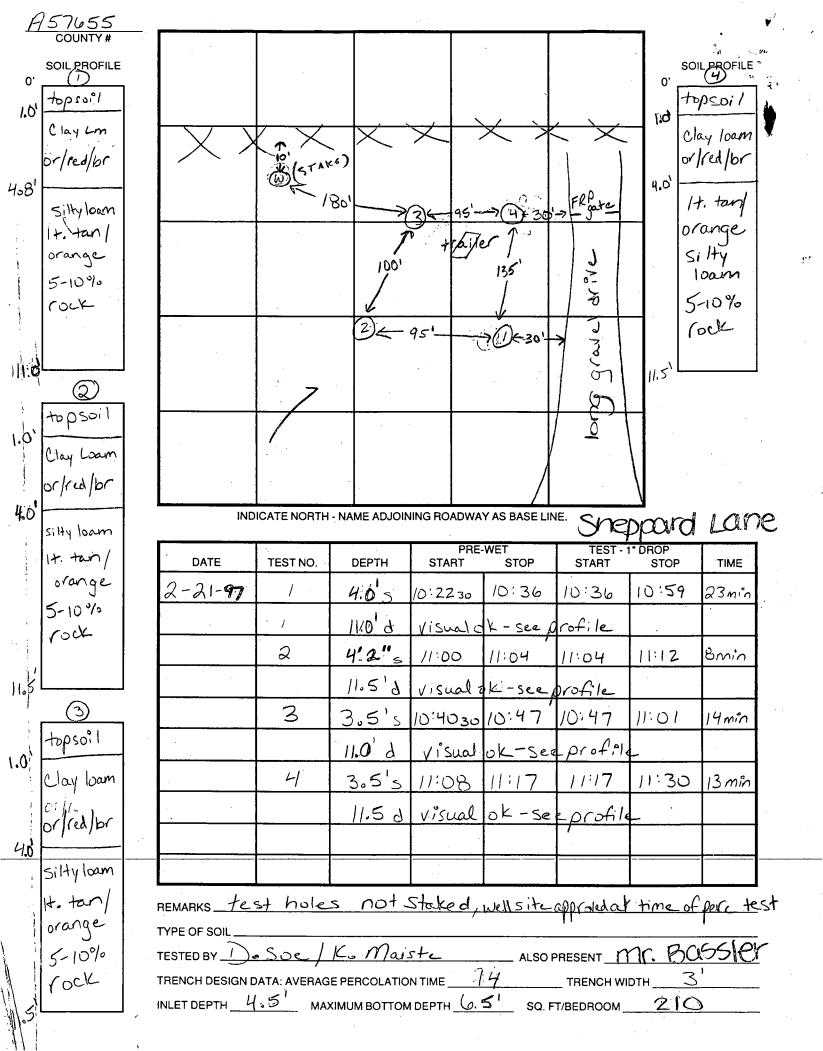
PERCOLATION TESTING

A 5 7655

		P
HOWARD COUNTY HEALTH DEPARTMENT		DISTRICT
BUREAU OF ENVIRONMENTAL HEALTH		DISTRICT
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043 TELEPHONE: 313-2640		DATE 1-29-97
	COLU MARA	ENTAANCE
TO: THE COUNTY HEALTH OFFICER	JUDA ON	TO GRAVEL DRIVE STUMP DUMP"
ELLICOTT CITY, MARYLAND	W 10 % 34	244
I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATI	ON FOR PERMIT TO CONSTI	RUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.
PROPERTY OWNER SASSIES INC		
	C .	1/10 (2) 2102
ADDRESS 4994 Sheppard IN	PHON PHON	NE 410 33/72193
AGENT OR PROSPECTIVE BUYER NONE	,	
AGENT OR PROSPECTIVE BUYER		
ADDRESS	PHO	NE
PROPERTY LOCATION:		
- Harris (Fagus		
SUBDIVISION HAY LAND FARM	LOT N	0
ROAD AND DESCRIPTION 4994 Shipp Rd 1	N. ENTER	ON GrAVEL TRUCK
·		
ENTRANCE 9 1500' BACK	ON LEFT	
TAX MAP 28 PARCEL# 49		
· · · · · · · · · · · · · · · · · · ·		
SIZE OF LOT 429. ZAC	TYPE BLDG. 🕰	66droom mobil Home
		(SINGLE PAMILY DWELLING OF COMMERCIAL)
THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE	E ONLY UNTIL PUBLIC FA	ACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE
FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPL	ICATION IS NON-REFUNDA	BLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO
COMPLY INTO ALL MODELLA DECLINATION INTERCENTS IN TERCENTS	- Davil	C Barreler
COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS INTESTING THIS LO	or	(SIGNATURE OF APPLICANT)
	•	
APPROVED BY	FOR	DATE
DISAPPROVED BY	EOP .	DATE
BIOAT ROYED BT	ron <u>·</u>	·
HOLD PENDING FURTHER TESTS		
REASONS FOR REJECTION OR HOLDING		
PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. #		DATE
- Engosmon reor room necumanii roor - Inte on io.#		DAIL .
SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. #		DATE

THIS IS NOT A PERMIT

HD-216 (3/92)



3	C 1 6007 SEQUENCE NO. (MDE 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 WINCHED IN COLS. 3-6 ON ALL CARDS)	FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE	COUNTY NUMBER A 57655
	ST/CO USE ONLY DATE WELL COMPL DATE Received	ETED Depth of Well	PERMIT NO. FROM "PERMIT TO DRILL WELL"
	8 13 15	22 265 26 20 (TO NEAREST FOOT)	28 29 30 31 32 33 34 35 36 37
ş-,	OWNER	PIFYED	5///2014
	STREET OR RFD SUBDIVISION NO. NO. NO. NO.	Dara Wile Town Town	Ellicott City
:	WELL LOG	GROUTING RECORD YES NO	C 3
	Not required for driven wells	WELL HAS BEEN GROUTED (Circle Appropriate Box)	PUMPING TEST
	STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING DESCRIPTION (Use) FEET Check	TYPE OF GROWING MATERIAL (Circle one) CEMENT (HOURS PUMPED (nearest hour)
	DESCRIPTION (Use additional sheets if needed) DESCRIPTION (Use FROM TO bearing	NO. OF BAGS NO. OF BOUNDS	PUMPING RATE (gal. per min.)
•	Top Soil 0 2	GALLONS OF WATER	METHOD USED TO
2. * 1. * *		from 48 TOP 52 ft. to 54 BOTTOM 58	WATER LEVEL (distance from land surface)
4.5	54nag 2 15	(enter 0 if from surface)	79
· .	SANDSTONE 15 18	casing types types Insert ST CO	17 20
. 1	SANDY 2 15 SANDSTONE 15 18 MICKA 18 28	appropriate STEEL CONCRETE	WHEN PUMPING 55 ft.
	SANd STONE 28 30 U	below PEASTIC OTHER	TYPE OF PUMP USED (for test) A air P piston T turbine
	MICKA 30 140	MÅIN Nominal diameter Total depth CASING top (main) casing of main casing TYPE (nearest inch)! (nearest foot)	C centrifugal R rotary O other (describe
a.	Flir Pock 140 145 MICKA 145 265	$\frac{PL}{60^{\circ} 61}$ $\frac{26}{63}$ $\frac{26}{66}$	27 below)
	145 265	OTHER CASING (if used)	J jet Submersible
		A diameter depth (feet) C inch from to	PUMP INSTALLED
		S	DRILLER WILL INSTALL PUMP YES NO
			IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.
		screen type SCREEN RECORD	TYPE OF PUMP INSTALLED
;	- 10 mm	or open hole ST BR HO	PLACE (A,C,J,P,R,S,T,O) 29 IN BOX 29. CAPACITY:
ć		(appropriate code below BRONZE HOLE P L O T	GALLONS PER MINUTE (to nearest gallon) 31 35
ŭ, :		PLASTIC OTHER	PUMP HORSE POWER
***	NUMBER OF UNSUCCESSFUL WELLS	DEPTH (nearest ft.)	PUMP COLUMN LENGTH (nearest ft.)
₹.	WELL HYDROFRACTURED yes N	$\begin{bmatrix} 1 & HO & 29 & 265 \\ A & 8 & 9 & 11 & 15 & 17 & 21 \end{bmatrix}$	CASING HEIGHT (circle appropriate box and enter casing height)
	£ CIRCLE APPROPRIATE LETTER	C 2 ,	above LAND SURFACE
	A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED	S \$	below (nearest) foot)
	E ELECTRIC LOG OBTAINED TEST WELL CONVERTED TO PRODUCTION	R 38 39 41 45 47 51	49 50 51 LOCATION OF WELL ON LOT
	WELL WELL WELL AND HEREBY CENTIFY THAT THE WELL AND HEREBY CENTIFY THAT THE WELL AND HEREBY CONSTRUCTION AND HEREBY CONSTRUCTI	E SLOT SIZE 1 2 3 N DIAMETER (NEAREST	SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND /OR
	IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED, PERMIT AND THAT THE INFORMATION PRESENTED HEREIN; S'ACCURATE AND COMPLETE TO THE BEST OF MY	OF SCREEN (NCH) (NCH)	LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES
	KNOWLEGGE	from: to	(MEASUREMENTS TO WELL)
	DRILLERS LIC NO. 1 M S. D. 1. 16. 1.	GRAVELIPACK IF WELL DRILLED WAS FLOWING WELL	dung on
	DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)	INSERT F IN BOX 68 68 MDE USE ONLY	Assort 1
	LIC. NO.; M S D 1 1 9	(NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q	JA250 200
	Rath & Mangar	70 72	w & land
	SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)	TELESCOPE LOG CASING INDICATOR OTHER DATA	720
		COUNTY	Bene in

Page	•	of	
Date	FORIL	9	1992

FIELD DATA SHEET HOWARD COUNTY WELL YIELD TEST

Weil Permit No. HO - 94-1095 Location of property (road) Sheppoard	d 100e	`. `{
Subdivision Hayland Farm Well Driller R. Mayne	Lot Block Plat Sec. Owner BOSSIEF	
Depth of well <u>265'</u> Distance of measuring point (M.P.) abo Static water level (S.W.L.) below M.P.	ove ground 2 60	
I. High rate pumping reservoir drawdown Time pump started $8:30$ Total time $15 \text{ m}_1 \text{ v}$ to reach pumping	Pumping rate 126Pm water level 55 ft. below M.P.	

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

TIME (in 15	WATER	T.EVET.	PUMPING	DATE	ELON MEMBE DELETIO	1 2 2		
minute in-	below				FLOW METER READING (if used)		TED FLOW	
tervals		•	time to fill <u>万</u> gallon bucket		(11 usea)	(gallon minute	(gallons per	
8.45	55	FA	1	Sec	í	/O	GBM	
5:00	55	H	6	Sec		10		
5', 15	55	4	6	SEC		10	GPM	
5:30	55	"/	6	71		10	6174	
5:45	55	7	6	1		10		
10:00	55	11.	6	11		10		
10:15	55	fo	to	Sec		10	620	
10:30	55	for	6	Sec	\/	10	6PM	
10:45	55	Fa	L	SEL		10	Glas	
11:00	55	'/	6	"		10	11	
11:15	55 55	11	b	11			· · · · · · · · · · · · · · · · · · ·	
11;30	55	K	6	Sec	/-	10	GPM	
11:45	55	for	6	Sec		16		
				- 30	/-\	707	GPM	
					/			
								
								
								
	 		 					
								
	· ,							
								
			·					
ID-224 9/ A	2 CASIN			Shau				

HD-224 26 A CASing 240 pen 8 BAYS

		EMERGENCY/TEMP NO. IF ANY		LU JESSUP, un 707M
в	1 8277 SEQUENCE NO.	STATE OF	MARYLAND	STATE PERMIT NUMBER
1	(MDE USE ONLY) (THIS NUMBER IS TO BE PUNCHED IN-COLS, 3-6 ON ALL CARDS)	PERMIT TO		HO-94-1095 70 fill in this form completely 79
-	Date Received (APA)		B 3	LOCATION OF WELL
٠.	32797 OWNER INFORMA	ATION	HOWARN	
	BASSLER ALFRE		8 COUNTY	I FARM 1
	15 Last Name Owner 4 S S V C H C C P A N	First Name 34	23 SUBDIVISION	
	36 Street or RFD	55	SECTION 44 46	LOT 48 50
	1914/100HH 101HM	State 72 Zip 76	CHAMINS	TEC.
	DRILLER INFORMATION	CIRCLE: MSD)MGD/MWD	52 NEAREST TOWN MILES FROM TOWN (ente	or 0 if in town) 73 76 77 78
	Oriller's Name WAIDH MAYNG WELL !	77 License No. 80	B 4	Shepparo LANE
	9120 Rhown Chunch R.	Mr. Ainy	DIRECTION OF WELL FROM TOWN (CIRCLE BOX)	11 NEAR WHAT ROAD 30
	Address Tall Mayne Signature	3/2)/57	N N N E S S S S S S S S S S S S S S S S	ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
В	2 WELL INFORMATION		TOWN E	34 1 2 0 0 37 SOUTH
	APPROX. PUMPING RATE (GAL. PER MIN.)			DISTANCE FROM ROAD ENTER FT OR MI
	AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY)		Sw L SE	38 39
	14	20	8-9 8 8-9	TAX MAP: BLK: PARCEL
	USE FOR WATER (CIRCLE APPRO	and the second of the second		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
	F FARMING (LIVESTOCK WATERING & AG	The state of the s	Howard county NAME	A 5 7655
	INDUSTRIAL, COMMERCIAL, STATE AND OTHER (REQUIRES APPROPRIATION PE		STATE SIGNATURE	INSERT S
	PUBLIC OR PRIVATE WATER COMPANY APPROPRIATION PERMIT AND STATE H APPROVAL)	(REQUIRES	DATE ISSUED	SIGNATURE EXP. DATE
	TEST, OBSERVATION, MONITORING (MA	AY REQUIRE	43 48 6 NORTH 5 1 0 0	T FAST A DI LI COLLEGIO
	APPROXIMATE DEPTH OF WELL 24	FEET 28	SHOW MAJOR FEATURE BOX & LOCATE WELL _ WITH AN X	ES OF 4/9/97
	APPROXIMATE DIAMETER OF WELL 6	NEAREST INCH	sources of Drilling	WATER GOUT ®
-	METHOD OF DRILLING (ci	rcle one)	3.	4/9/97
	BORED (et Augered) JETTED	Jetted & <u>DRIVEN</u>	WRITE THE BOX NUMB	Grout of ok
	37	ROTARY (Hydraulic Rotary) DRive-POINT	FROM THE MAP HERE	26 Casing
	CABLE REVerse-HOTary other	<u>DANG-TOIRY</u>	E 8/23	3 24' open
H	REPLACEMENT OR DEEPENE	ED WELLS	N 500	1/ - 000 8 bags KM
	(CIRCLE APPROPRIATE BO			W SHOWING LOCATION OF WELL IN
	THIS WELL WILL NOT REPLACE AN EXIS THIS WELL WILL REPLACE A WELL THAT ABANDONED AND SEALED	r WILL BE		TOWNS AND ROADS AND GIVE TO NEAREST ROAD JUNCTION
	39 S THIS WELL WILL REPLACE A WELL THAT A STANDBY CONTACT LOCAL APPROVIN POLICY ON STANDBY WELLS	r will be used as NG AUTHORITY FOR	A	SHEPPANY
	D THIS WELL WILL DEEPEN AN EXISTING			
	PERMIT NUMBER OF WELL TO BE REPLACED (IF AVAILABLE) 41	O OR DEEPENED \ 52 - \	d 6'599 -	wet Ad.
	Not to be filled in by driller (MDE OR CO	DUNTY USE ONLY)		an Avel Ad.
	APPROP. PERMIT NUMBER G	A P 63		1200 A.
	FORCE WRITE NITUALS PERMIT No. H C-	94-1096		
	SPECIAL CONDITIONS NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -			●
		COUNTY	<i>(</i>	

Page			Review _	
Tump kst 9:30 (3		FIELD DATA HOWARD COUNTY WEL	SHEET L YIELD TEST	
Well Permit No Location of pr Subdivision	. но - <u>94 -10</u> operty (road) NGYICOG FO	Sheppard La	neBlockPlat	Sec
Depth o. Distance	f well	Owns oint (M.P.) above gr .L.) below M.P.	round 2	
Time pump Total tin		O reach pumping water	Pumping rate $\frac{12c\rho}{55}$ ft. recorded every 15 minum	
TIME (in 15 minute in- tervals	WATER LEVEL below M.P.	PUMPING RATE time to fill \$\gamma\rightarrow\gamma\right	FLOW METER READING	CALCULATED FLOW
8:45	55	6		minute)
9:00	55	6		
9:15	55	6		10
9:30	55 55	G		10
9:45	55	\(\sqrt{\text{\tin}\text{\tetx{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\ti}\\\ \ti}}\\ \text{\text{\text{\text{\text{\text{\text{\texit{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tex{\ti}}}\\ \ti}\\\ \text{\text{\text{\text{\text{\text{\tex{\tex		10
10.00	55	6		10
7000		<u> </u>		/:>
			<u> </u>	
		`	4-9-97	
			sample taken 10:30)
			4-9-97 Sample taken 10:30 Sample clear	
			V	
				· · · · · · · · · · · · · · · · · · ·
HD-224	L			

. علىد المنطقة

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

Ellicott City, MD 21043 461-9933 313-2640 313-7648 (fax)

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation		Receipt # Date 5.20-97
Name of Installer Robert	Thurman	Telephone <u>4/0-53/-</u> /72
License Number 17380 Certified Well Pump Installer		
Name of Property Owner <u>BAS</u> Subdivision Site Address <u>50 70 SHEPP</u>	Slor TNC. Lot # WE MED LN E.C. 21042	Telephone <u>40 53/3589</u> ell Tag * <u>40 - 94 - 1095</u>
Pump 1. Type a. Deep well jet b. Shallow well jet c. Submersible 2. Make JA(UZZI 3. Model # 75410 R115Z	Motor 1. Horsepower 3/4 2. RPM 3450 3. Voltage a. 110 b. 220	Pitless Adapter 1. Make 2. Model # //3 3. Depth //8/
 4. Capacity / 6 GPM 5. Pump exceeds well capacity 6. If Yes, is low pressure cu 7. What methods are used to p vibrations? Torque arres 	itoff switch installed? protect the pump and elect	rical wiring from
Tank 1. Capacity XTROC 2. Pressure relief valve? 185	Piping 1. Type Poly 2. Size /" 3. NSF and/or BOCA Code approved 4. Depth of supply line ////	3. Static water level <u>29</u> ft.
I understand that it is my : Department when the installat is null and void).		
All information given above i		\
Signa	ture of Applicant:	and Sonh 5-2097
	Date:	5-2097

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

