

4/10/98
late C.O.

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

03 - 325431

P 59925

A 58133

DISTRICT 3rd

DATE 4-7-98

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXX~~

410-313-2640

INDEXED

DATE SYSTEM APPROVED 4/10/98

INSPECTOR OKS

Jack Fyock Septic Services

IS PERMITTED TO INSTALL X ALTER

ADDRESS 13775 Triadelphia Road, Glenelg, Maryland 21737 PHONE 410-988-9270

SUBDIVISION Quarterfield LOT Parcel A ROAD 11615 Whitetail Lane

PROPERTY OWNER John Pinkston

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 280

TRENCHES - Trench to be 3 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 5 1/2 feet below original grade. Effective area begins at 4 feet below original grade. 1 1/2 feet of stone below distribution pipe.

LOCATION - Starting from the right rear lot corner, place the distribution box 105 feet down the rear (108.80') lot line and 80 feet off this same lot line. Run trenches on contour in both directions.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK/MR

4/6/98 REV. FOR CONCERNS ABOUT ROCK MR

PLANS APPROVED BY Mark Rifkin/Donna K. Soe DATE 03/03/98

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

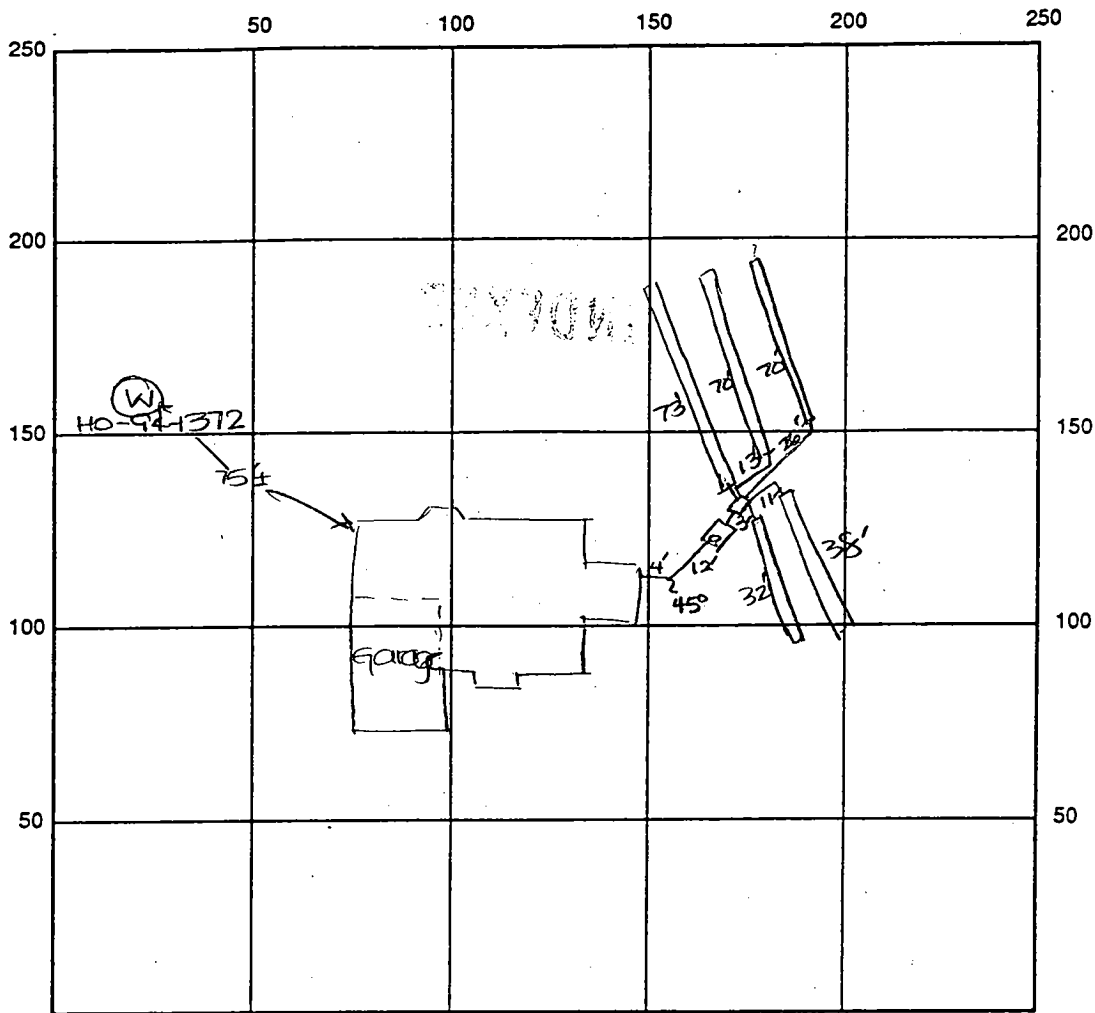
*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

BLDG. PERMIT SIGNED

AND RETURNED 8-19-98

Serial # Pro 112931
Radio antenna

A 58133



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

Whitetail Lane

SEPTIC TANK LEVEL OK - 1250 gal CLEANOUTS one on septic tank

DISTRIBUTION BOX LEVEL OK

DRAIN FIELD/TITLE DEPTH 5.5 FT.

TRENCH WIDTH 3 FT.

INLET DEPTH 4 FT.

EFFECTIVE GRAVEL DEPTH 1.5 FT.

TOTAL LENGTH 173 70 70 → 283

NUMBER OF TRENCHES 5

ONE SIDEWALL/BOTTOM AREA 849 SQ. FT.

DRYWALL INSIDE DIAMETER — FT.

EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA — SQ. FT.

REMARKS: 4/6/98 SITE MTG. TO CONFIRM DESIGN LAYOUT - OK (NA)

4/10/98 FINAL INSP - OK TO COVER ALL WORK. DKS

5/19/98 WPI OK to cover

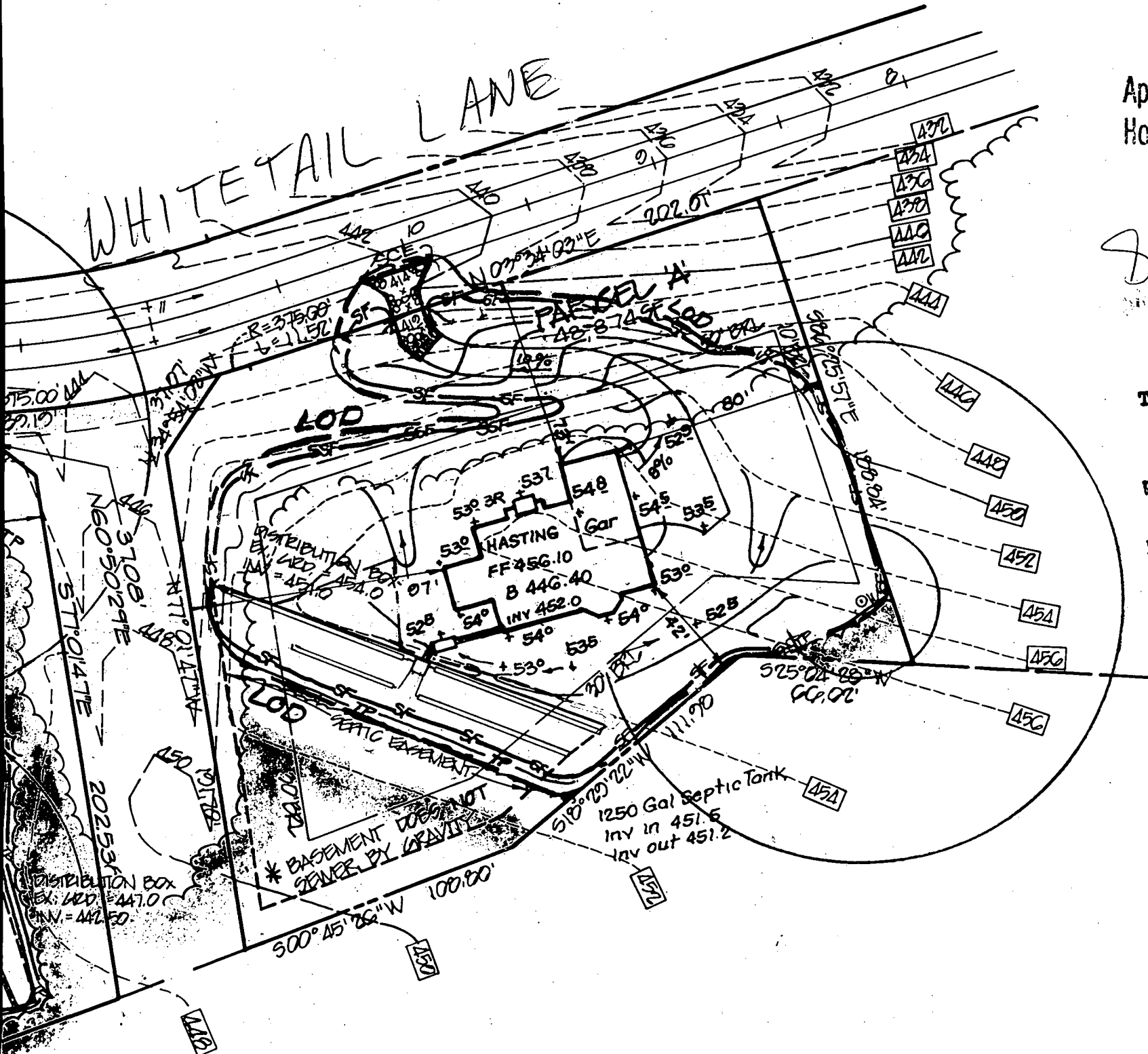
DATE SYSTEM APPROVED 4/10/98

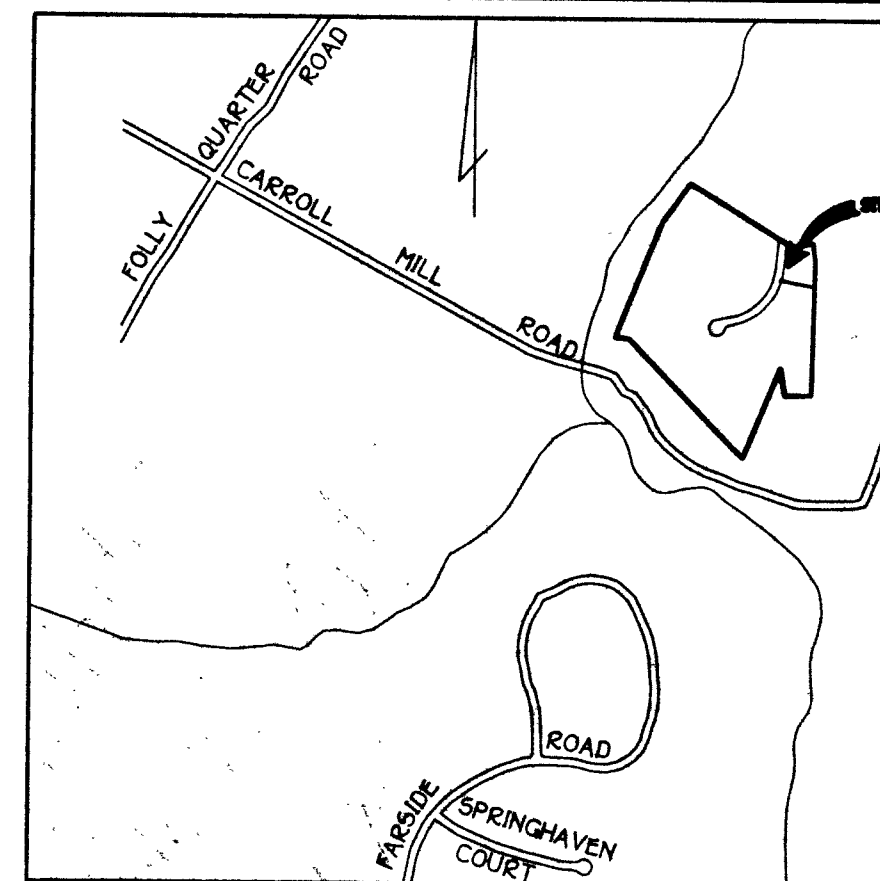
INSPECTOR [Signature]

[illegible]

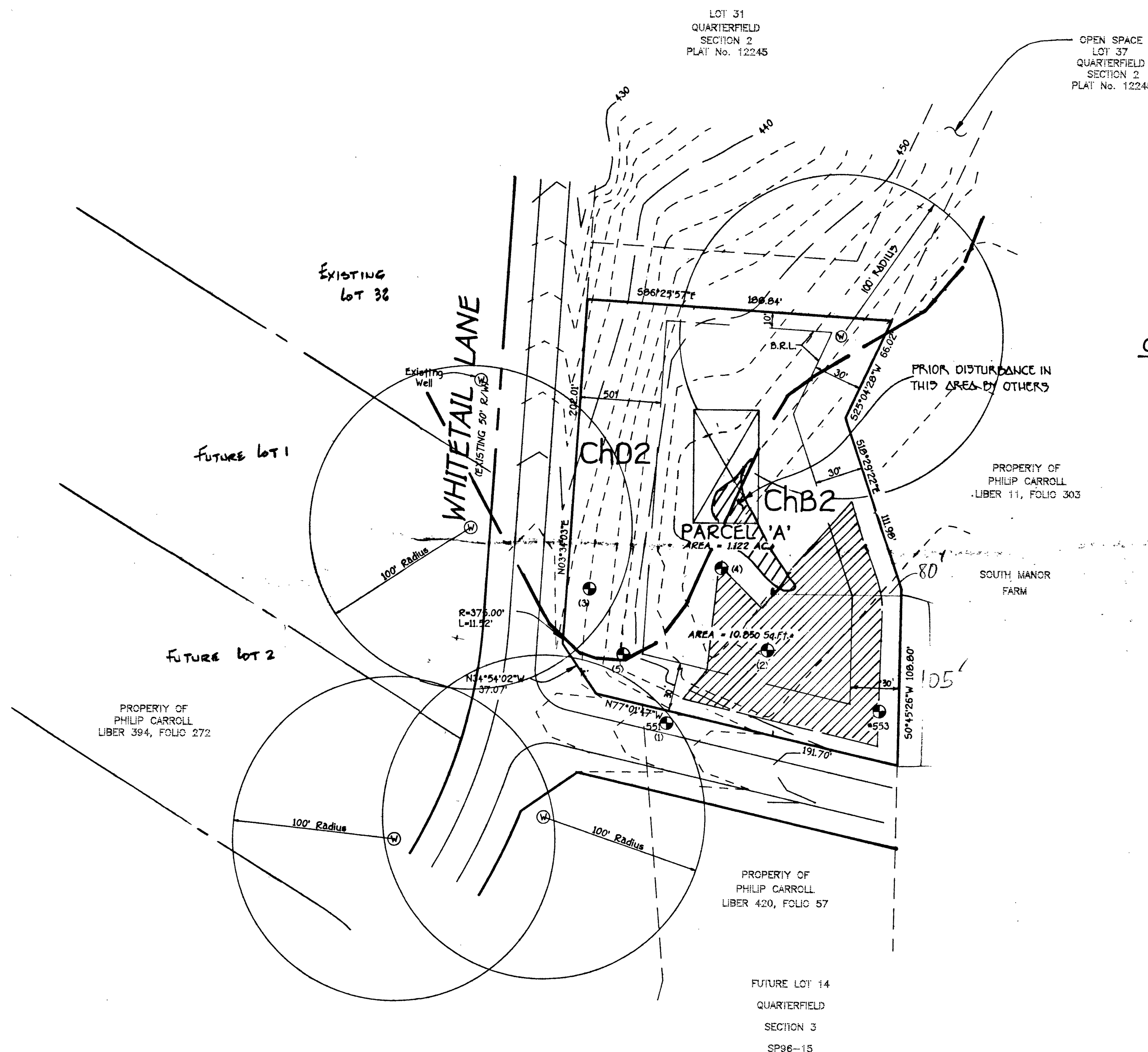
~~PARCEL~~ A
12-874958

Depth of stone required below
distribution pipe 4 feet





VICINITY MAP
SCALE: 1" = 1200'



GENERAL NOTES:

1. THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF 10,000 SQUARE FEET AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWERAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWERAGE IS AVAILABLE. THESE EASEMENTS SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENT INTO THE PRIVATE SEWERAGE EASEMENT. RECORDATION OF A MODIFIED SEWERAGE EASEMENT SHALL NOT BE NECESSARY.
2. THE LOT SHOWN HEREON COMPLY WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREA AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT.
3. ALL WELLS AND SEPTIC SYSTEMS WITHIN 100 FEET OF THE PROPERTY HAVE BEEN SHOWN.
4. DENOTES PROPOSED DWELLING
5. DENOTES WELL LOCATION.
6. DENOTES PERC HOLE LOCATION.
7. PROPOSED WELL ON LOT 14, QUARTERFIELD, SECTION 3 WILL BE A METAL CASING AND INCLUDE GROUTING TO BEDROCK WITH TREMIE PIPE.
8. PROPOSED WELLS SHOWN ON WEST SIDE OF WHITETAIL LANE SHOWN ON APPROVED PLAN DATED AUGUST 21, 1996 ARE ADJUSTED TO REFLECTED NEW WELL LOCATIONS AS PER THIS DRAWING.

FISHER, COLLINS & CARTER, INC.
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS
11700 SQUARE OFFICE PARK & HWY 20 BALTIMORE NATIONAL PIKE
ELLICOTT CITY, MARYLAND 21042
(410) 461-2855

PROJECT No.: 30546PERC PLAN 2.DWG

APPROVED FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS,
HOWARD COUNTY HEALTH DEPARTMENT.

COUNTY HEALTH OFFICER

10-3-97
DATE

OWNER & DEVELOPER

MID-ATLANTIC DEVELOPMENT LLC
5026 DORSEY HALL DRIVE, SUITE 204
ELLICOTT CITY, MARYLAND

[Signature]

SIGNED
PERC CERTIFICATION PLAN
PARCEL 'A'

TAX MAP No.: 23 ZONED: RC-DEO PARCEL(S): 04

THIRD ELECTION DISTRICT HOWARD COUNTY, MARYLAND



Scale: 1" = 50'
DATE: AUGUST 7, 1997

6/21/97
12:00am
6/21/97

APPLICATION

PERCOLATION TESTING

A 58133

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

~~NEEDS~~
~~225~~
SEPARATE PARCEL
ADJACENT TO SECTION II
TREAT AS SUBDIVISION

DISTRICT _____

DATE 5/6/97

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Mid Atlantic Development LLC John Pinkston

ADDRESS 5026 Dorsey Hill Drive, Ellicott City PHONE 410-964-5522

AGENT OR PROSPECTIVE BUYER LID

ADDRESS 10865 Widening Ridge Rd Suite 215 Columbia PHONE 740-2100

PROPERTY LOCATION:

SUBDIVISION Quakerfield LOT NO. Par A

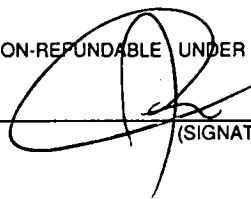
ROAD AND DESCRIPTION 11615 Whitetail Lane

TAX MAP 23 PARCEL # 84

SIZE OF LOT 1.122 AC TYPE BLDG. Single Family - 4 Bm
(SINGLE FAMILY DWELLING OR COMMERCIAL)

BLDG. PERMIT SIGNED
AND RETURNED 3-3-98
Serial # 130110185

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.


(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING HOLD FOR PLAT, PERC OK MR 7/8/97

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

COUNTY #

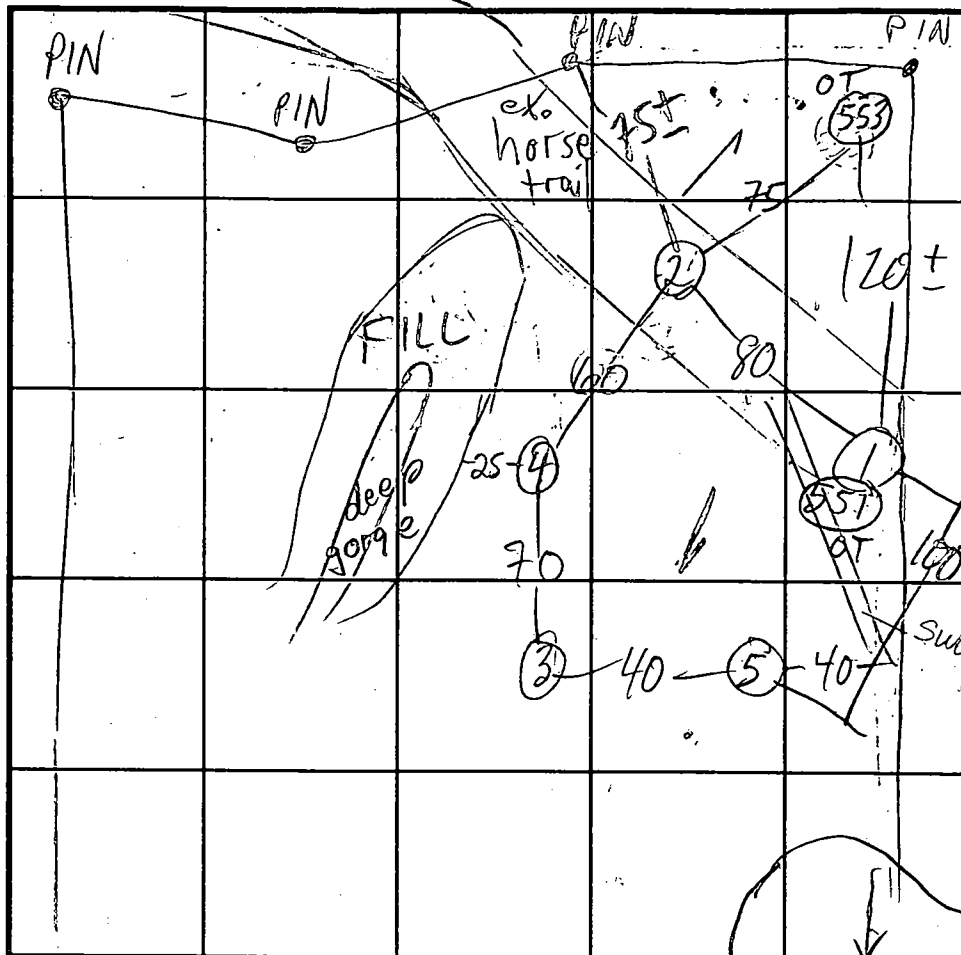
SOIL PROFILE

ALL HOLES

tan
sac/dm3-4
tan
beige gray
sa lm
10% frags

9 1/2-12

SOIL PROFILE

OT = OLD
PERC
TEST
HOLEEX. WHITETAIL LA INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE. PROPOSED WELL SITE
LOT 1 ACROSS RD

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
7/8/97	1 S	5	10:26	10:33	10:33	10:44	11
	1 V	12	OK see profile				
	2 S	4	10:28	10:31	10:31	10:36	5
	2 V	10' 9"	OK see profile				
	3 S	4	10:45	10:48	10:48	10:55	7
	3 V	9 1/2	OK see profile				
	4 V	11' 3"	OK see profile				
	5 V	11	OK see profile				
11/8/95	553 V	12	10 min perc @ 6"				
	551 V	11	10 min perc @ 4 1/2"				

(RECORDED
FROM PREVIOUS)

REMARKS

TYPE OF SOIL

TESTED BY

M. R. F. Kin

ALSO PRESENT

Jared S, Mike J. & crew

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

9

TRENCH WIDTH

2

INLET DEPTH

4

MAXIMUM BOTTOM DEPTH

7

SQ. FT./BEDROOM

210

APPLICATION

PERCOLATION TESTING

A 1509058

P

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525 H ELLICOTT MILLS DRIVE ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2840

DISTRICT

DATE 10/12/95

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER / MR TOM SCRIVENER
CONTRACT PURCHASER
ADDRESS 5026 VORSEY HALL DRIVE #201 PHONE 964-5522
ELLICOTT CITY, MD 21042
AGENT OR PROSPECTIVE BUYER DONALD R. KEWICK JR. LAND DESIGN & DEVELOPMENT, INC.
DEVELOPER
ADDRESS 10805 HICKORY RIDGE ROAD PHONE 740-2100
COLUMBIA, MD 21045

PROPERTY LOCATION:
QUARTERFIELD LOT NO. 47
ROAD AND DESCRIPTION PROPOSED WHITETAIL LANE - THIRD ELECTION DISTRICT,
ADJACENT TO QUARTERFIELD I & II OFF OF FOLLY QUARTER ROAD

ZONING MAP 23 PARCEL # 84
SIZE OF LOT CLUSTER ONE ACRE 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.
Robert H. [Signature] - AGENT - LTD. INC.
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____
REAPPROVED BY _____ FOR _____ DATE _____
SOLD PENDING FURTHER TESTS

REASONS FOR REJECTION OR HOLDING 12/26/95 PERC OK HOLD FOR PLAT MR

PERCOLATION TEST PLAT PRELIMINARY PLAT - TITLE OR L.D. # _____ DATE _____
SITE DEVELOPMENT PLAT FINAL PLAT - TITLE OR L.D. # _____ DATE _____

THIS IS NOT A PERMIT

A-50905P OLD TEST HOLES

COUNTY #

SOIL PROFILE

SOIL PROFILE

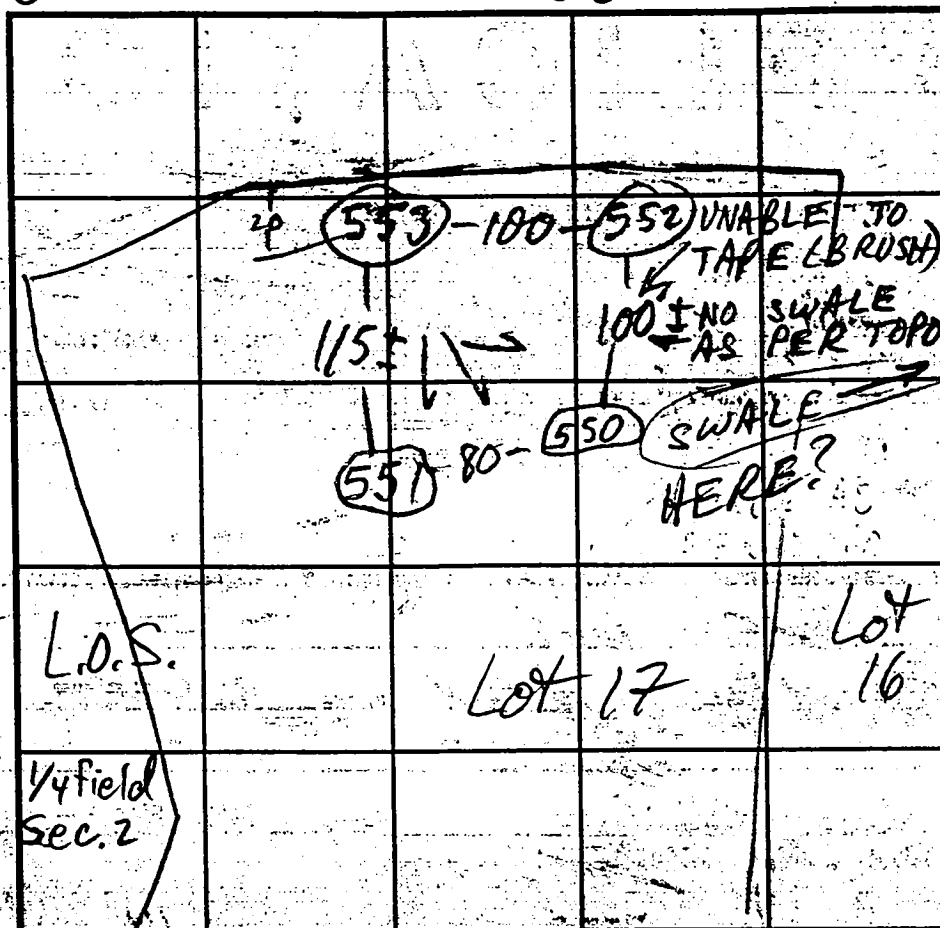
ALL HOLES

059 per
cl lva

brn sa
cl lm

beige
sa
10-15%
frags

SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

WHITE TAIL LA

DATE		TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
				START	STOP	START	STOP	
11/8/95	553 S	6	11:02	11:05	11:05	11:15	10	
	553 V	12	OK see profile					
	552 S	5 1/2	11:07	11:13	11:13	11:22	9	
	552 V	10 1/2	OK see profile					
	551 S	4 1/2	11:31	11:38	11:38	11:48	10	
	551 V	11	20% frags above 4'					
	550 S	5	11:46	11:48	11:48	11:57	9	
	550 V	10 1/2	OK see profile					

REMARKS

TYPE OF SOIL

TESTED BY

ALSO PRESENT

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

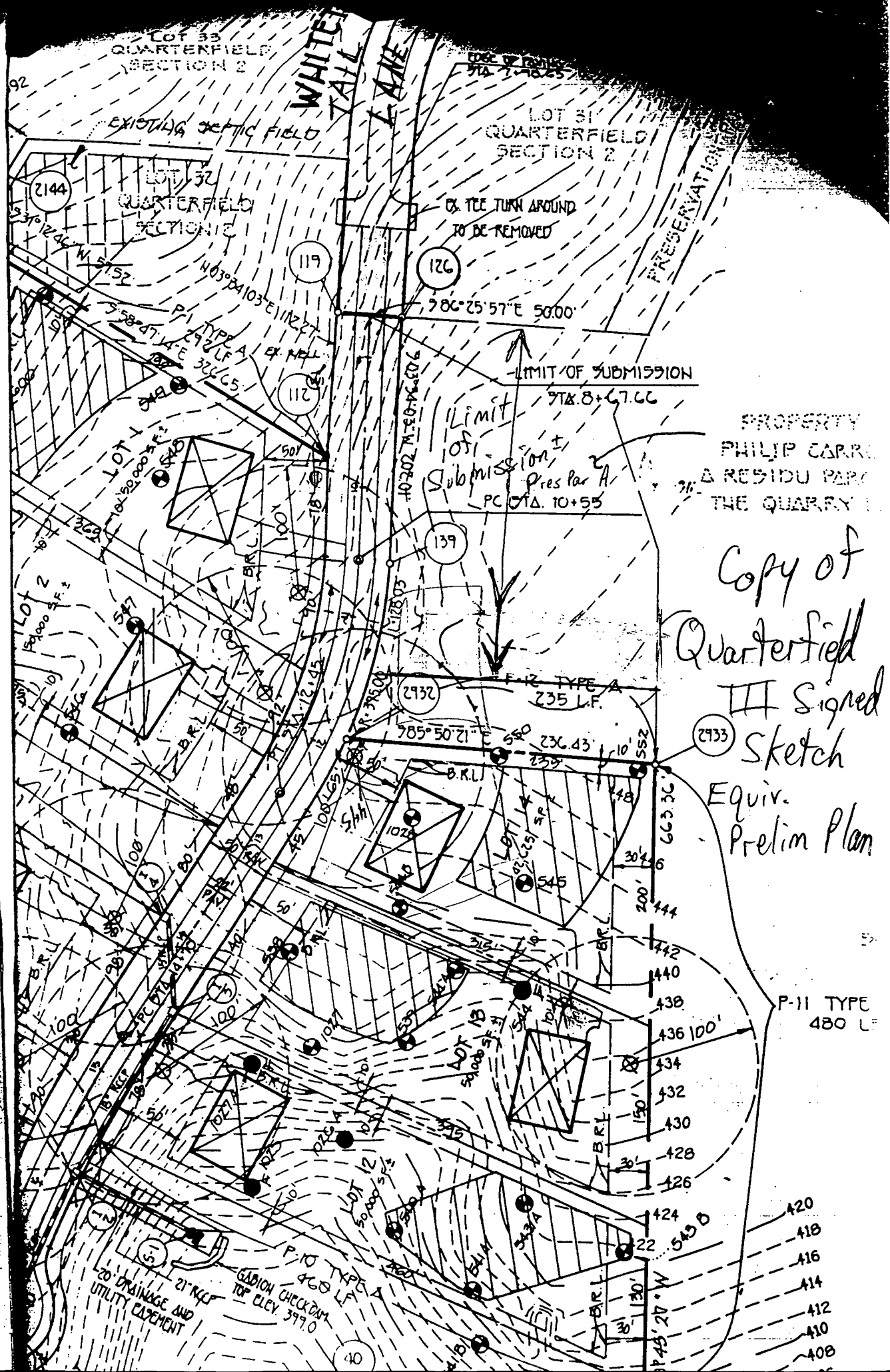
TRENCH WIDTH

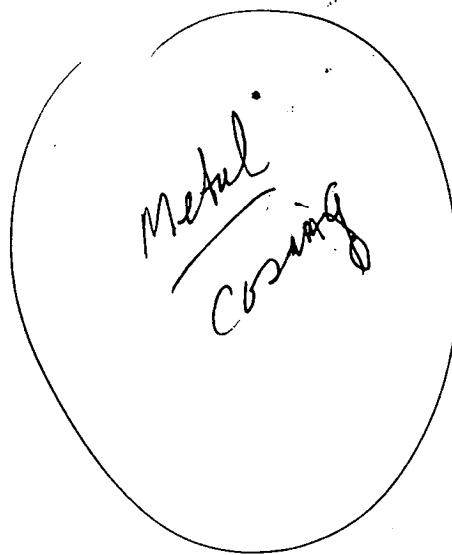
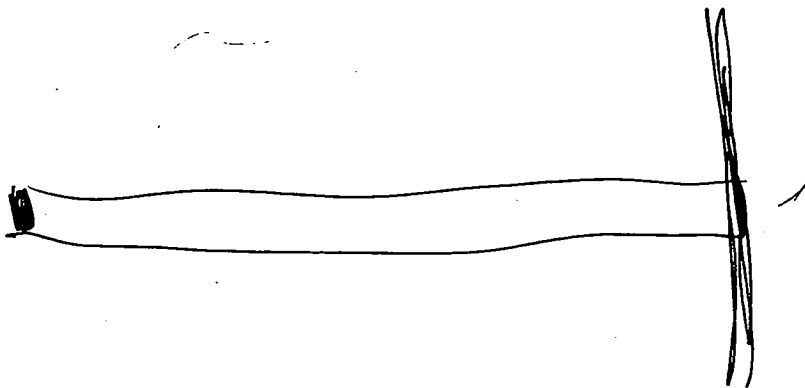
INLET DEPTH

MAXIMUM BOTTOM DEPTH

SQ. FT./BEDROOM

LNU





C1 1307 - SEQUENCE NO. (DENV 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 A 58 133

ST/CO USE ONLY
DATE Received

8 13

DATE WELL COMPLETED

02 25 98

Depth of Well

22 400 26
(TO NEAREST FOOT)

PERMIT NO.

FROM "PERMIT TO DRILL WELL"

H0 - 94 - 1312
28 29 30 31 32 33 34 35 36 37

OWNER Greenfield Homes
last name first name TOWN West Friendship
STREET OR RFD
SUBDIVISION Quarterfield SECTION LOT A

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 FROM TO Check if water bearing

Sand 0 68
Gray Mica Rock 68 400 ✓

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box)

yes Y no N

TYPE OF GROUTING MATERIAL

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 20 NO. OF POUNDS 1880

GALLONS OF WATER 120

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 65 ft.
48 TOP 52 (enter 0 if from surface) 54 BOTTOM 58

CASING RECORD

casing types insert appropriate code below

ST CO
STEEL CONCRETE
PL OT
PLASTIC OTHER

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

S 7 6 71
60 61 63 64 66 70

OTHER CASING (if used)

diameter depth (feet) from to

EACH CASING

screen type or open hole insert appropriate code below

SCREEN RECORD
ST BR HO
STEEL BRASS OPEN HOLE
PL PL BRONZE
PLASTIC OTHER

C2

DEPTH (nearest ft.)

1 H0 70 400
8 9 11 15 17 21
2 23 24 26 30 32 36
3 38 39 41 45 47 51

SLOT SIZE 1 2 3

DIAMETER OF SCREEN (NEAREST INCH)

from to

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

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 3

PUMPING TEST

HOURS PUMPED (nearest hour) 6

PUMPING RATE (gal. per min. to nearest gal.) 207

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 44

WHEN PUMPING 349

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) 31 35

PUMP HORSE POWER 37 41

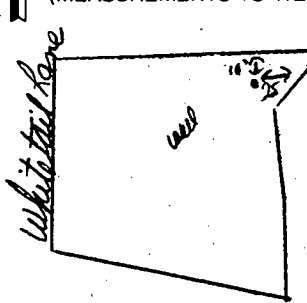
PUMP COLUMN LENGTH (nearest ft.) 43 47

CASING HEIGHT (circle appropriate box and enter casing height)

+ above } LAND SURFACE 07 (nearest foot)
- 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)



IN HARD ROCK AREAS, IDENTIFY SPECIFICALLY WHERE SATURATED FRACTURES WERE OBSERVED.

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

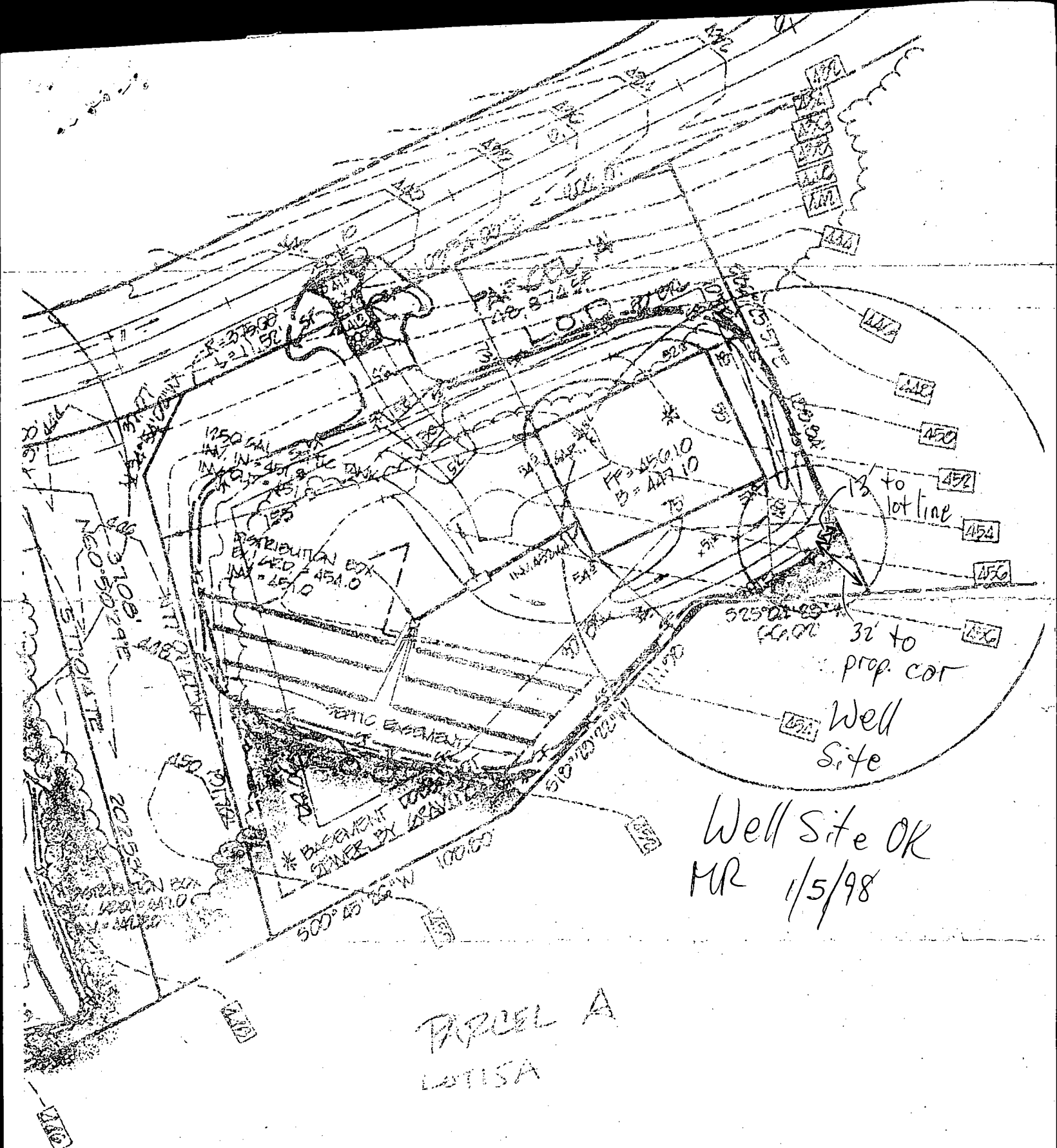
I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS IDENT. NO. MSD024

DRILLERS SIGNATURE Joseph Mayne
(MUST MATCH SIGNATURE ON APPLICATION)

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

B 1 3090	SEQUENCE NO. (DP USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER 40-94-1372 <small>70 fill in this form completely 79</small>
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)		B 3 LOCATION OF WELL	
Date Received (APA) 1.20.897		8 COUNTY HOWARD 21 23 SUBDIVISION PARCEL 42 SECTION 44 LOT 48 50 ELLICOTT 52 NEAREST TOWN CITY 71 MILES FROM TOWN (enter 0 if in town) 3 73 76 77 78 MI	
OWNER INFORMATION 15 Last Name GREENFIELD 34 Owner HOMES INC 36 Street or RFD 6656 Kuster Dr 55 57 Town HIGHLAND 70 State 72 MD Zip 76 20777		B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX) 	
DRILLER INFORMATION Driller's Name Perry HOKLEY 77 License No. 80 143 Firm Name HOKLEY DRILLING & PUMP SYSTEMS Address P.O. Box 160 Signature Perry HOKLEY Date 12-2-97		11 White Brook Ln 30 NEAR WHAT ROAD ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 34 200 37 DISTANCE FROM ROAD ENTER FT OR MI FT 38 39 TAX MAP: 23 BLK: 15 PARCEL 84	
B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 3 8 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500 14 20		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL COUNTY NAME Howard COUNTY NO. A58133 STATE SIGNATURE Mark E. Riffin INSERT S 1/6/99 DATE ISSUED 082698 EXP. DATE NORTH GRID 521000 EAST GRID 0826000	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="checkbox"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input type="checkbox"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. well 2. MMP 3. WRITE THE BOX NUMBER FROM THE MAP HERE E 8286 N 5281	
APPROXIMATE DEPTH OF WELL 200 24 26 FEET APPROXIMATE DIAMETER OF WELL 6 INCH METHOD OF DRILLING (circle one) BORED (or Augered) <input checked="" type="checkbox"/> JETTED <input type="checkbox"/> Jetted & DRIVEN <input type="checkbox"/> 30 AIR-ROTARY <input type="checkbox"/> AIR-PERCussion <input checked="" type="checkbox"/> ROTARY (Hydraulic Rotary) <input type="checkbox"/> 37 CABLE <input type="checkbox"/> REVERSE-ROTARY <input type="checkbox"/> Drive-POINT <input type="checkbox"/> other _____		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="checkbox"/> THIS WELL WILL DEEPEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52		Not to be filled in by driller (OEP USE ONLY) APPROX. PERMIT NUMBER GAP 54 63 FORCE 102 WRITE INITIALS IN BOX 67 68 PERMIT No. 40-94-1372 70 71 72 73 74 75 76 77 78 79	
SPECIAL CONDITIONS NOTE = APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED =			



APPLICATION

HOWARD COUNTY

SERIAL NUMBER

PERMIT APPLICATION

DEPARTMENT OF INSPECTIONS, LICENSES & PERMIT
3430 COURT HOUSE DRIVE, ELLICOTT CITY, MARYLAND 21043

B0010185

BUILDING ADDRESS (HOUSE NO., STREET, TOWN OR AREA)

11615 WHITETAIL LANE
ELLICOTT CITY MD 21043GRADING/SEDIMENT CONTROL ☒ YES ☐ NO

SDP #

DESCRIPTION OF WORK AUTHORIZED

NEW SFD, UNFINISH BMT/WB BATH
2 STORY, BROWN, 4 BEDROOM,
4 FULL BATH, 1 FIREPLACE, 3 CARGAR.

LOT NO.	PARCEL NO.	SEC.	AREA	BLOCK NO.	LIBER	FOLIO
15	A101	-	-	15	-	-

SUB DIVISION	ZONE	ZONE MAP	ELEC. DIST.	CENSUS TR.
QV-101-101-101	RL-DE	23	3	6030

OWNER NAME AND ADDRESS

JOHN PINKSTON
3888 WOODVILLE LANE
ELLICOTT CITY MD 21043

OCCUPANT'S NAME AND ADDRESS

11

ARCHITECT OR ENGINEER'S NAME AND ADDRESS

CONTRACTOR'S NAME AND ADDRESS
GREENFIELD HOMES INC.
6056 LUSTER DRIVE
HIGHLAND MARYLAND 20777

EXISTING USE

VACANT LOT

EST. CONSTRUCTION COST

400,000

LICENSE NUMBER

CTRD1924

PERMIT FEE

W/S CODE

DISTANCE IN FEET FROM R/W LINE TO FRONT BUILDING LINE

SIDE YARD

(DISTANCE IN FEET FROM SIDE BLDG. LINE TO SIDE PROPERTY LINE)

TO SIDE BUILDING LINE

DISTANCE IN FEET, REAR YD. REQUIRING SET

BACK

(CORNER LOT ONLY)

Check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

CAUTION

To begin construction before a permit placard has been issued and displayed on the job is a violation of the law.
Use and occupancy permit must be applied for two weeks before it will be issued.

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

LP-69-591

6760

SIZE OF BLDG.

74'4" x 62'

FRONT

74'4"

DEPTH

62'

HEIGHT

TYPE OF BLDG.

B. ROOMS

ROOMS

BATHS

FIREPLACES

4

3

4

1

FOOTINGS

8x16 CONCRETE

FOUNDATION

POURED

S. WALLS

FRAME/CONCRETE

SITING

UTILITIES

WATER WELLS SEWER SEPTIC

GAS

ELECTRICITY

TYPE OF HEAT

AC

YES

YES

GAS

YES

I have carefully examined and read this application and know the same is true and correct, and that is doing this work, all provisions of Howard County Ordinances and the State Laws of Maryland will be complied with, whether specified or not; and I will notify the Department of Inspections, and Permits twenty-four hours in advance when I am ready for the inspections called for elsewhere in the application; and that no work will be covered up until such inspections have been complied with.

PROJ MGR

TITLE

SIGNATURE

DATE

2-26-98

FUNCTION

DATE

SIGNATURE APPROVAL

ZONING/PLANNING

SHA

SEDIMENT/GRADING

BUILDING OFFICIAL

WATER & SEWER

HEALTH DEPT.

FIRE PROTECTION

STORM WATER MGMT

APPROVED

DATE

Distribution of Copies:

White - Building Official

Green - Planning & Zoning

Yellow - Engineering

Pink - Health Dept.

Gold - S.H.A.

APPLICATION

HOWARD COUNTY

PERMIT APPLICATION

DEPARTMENT OF INSPECTIONS, LICENSES & PERMIT
3430 COURT HOUSE DRIVE, ELLICOTT CITY, MARYLAND 21043

SERIAL NUMBER

B00112931

BUILDING ADDRESS (HOUSE NO., STREET, TOWN OR AREA)

11615 WHITE TAIL LANE 34498
ELLICOTT CITY, MD 21044GRADING/SEDIMENT CONTROL ☐ YES ☐ NO

SDP #

DESCRIPTION OF WORK AUTHORIZED

DIG, FORM AND POURING
FOOTER FOR 33' HIGH
RADIO ANTENNA (40' FROM PROP. LINE)
HOUSE BEING BUILT UNDER PERMIT B00110185LOT NO. PARCEL NO. SEC. AREA BLOCK NO. LIBER FOLIO
N/A 884 N/A 11A 15

SUB DIVISION ZONE ZONE MAP ELEC. DIST. CENSUS TR.

OWNER NAME AND ADDRESS

PHONE NO.

JOHN PINESTON
3588 WOODVILLE RD
ELLICOTT CITY MD 21043

410-781-6782

OCCUPANT'S NAME AND ADDRESS

PHONE NO.

ARCHITECT OR ENGINEER'S NAME AND ADDRESS

PHONE NO.

CONTRACTOR'S NAME AND ADDRESS

PHONE NO.

GREENFIELD HOMES INC.
6076 LUSTER DR
HAGERSTOWN MD 20777

410-781-6782

EXISTING USE

PROPOSED USE

NEW SFD UNDER CONSTRUCTION
PERMIT B00110185

ANTENNA

EST. CONSTRUCTION COST

LICENSE NUMBER

PERMIT FEE

300.

CTR01925

W/S CODE

FOR OFFICE USE ONLY

DISTANCE IN FEET FROM R/W LINE TO FRONT BUILDING LINE

SIDE YARD

(DISTANCE IN FEET FROM SIDE BLDG. LINE TO SIDE PROPERTY LINE)

TO SIDE BUILDING LINE

DISTANCE IN FEET, REAR YD. REQUIRING SET

BACK (CORNER LOT ONLY)

SDP #

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LP-69-591

6458

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FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING		
SHA		
SEDIMENT/GRADING		
BUILDING OFFICIAL		
WATER & SEWER		
HEALTH DEPT.	8/13/98	Mark E. Kiffin
FIRE PROTECTION		
STORM WATER MGM.		

APPROVED

DATE

A

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

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation ☒
Replacement ☐

Receipt # _____
Date _____

Name of Installer Gartland Plumbing, Inc.

Telephone 410-875-4020

License Number 6352

Certified Well Pump Installer ☒ Well Driller _____ Registered Plumber ☒

Name of Property Owner John Pinkston

Telephone 410-981-6782

Subdivision Quarter Field Lot # 15A

Well Tag # 40-74-1322

Site Address 11615 Whitetail Lane

Pump

1. Type
 - a. Deep well jet
 - b. Shallow well jet
 - c. Submersible ☒
2. Make Grundfos
3. Model # 2530
4. Capacity 2 GPM

Motor

1. Horsepower 1
2. RPM 3450
3. Voltage
 - a. 110
 - b. 220 ☒

Pitless Adapter

1. Make Harvard
2. Model # PT1800
3. Depth 48"

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

1. Capacity 1000
2. Pressure relief valve? Yes

Piping

1. Type Poly
2. Size 1"
3. NSF and/or BOCA Code approved Yes
4. Depth of supply line 48"

Well data

1. Depth 420 ft.
2. Yield 2 GPM
3. Static water level 380 ft.
4. Will water supply be disinfected by installer? Yes

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 _____

Date: May 18, 1998

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

DRIVEWAY CULVERT PROFILES

SCALE: HORIZ. = 1" = 50'
VERT. = 1" = 5'

11615 WHITETAIL LANE

