

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 512708

A 59287-C

DISTRICT _____

DATE 9-17-1999

DATE SYSTEM APPROVED 1/11/00

INSPECTOR CW

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
XXXXXX 410-313-2640

INDEXED

03-330222

Gartland Plumbing & Heating IS PERMITTED TO INSTALL ☒ ALTER ☐

ADDRESS 1835 West Old Liberty Road, Westminster, MD 21157 PHONE 410-875-2400

SUBDIVISION Sand Hill Landing LOT 2 ROAD 2380 Sand Hill Road

PROPERTY OWNER Dorsey Family Homes

ADDRESS _____

PUMPED SEPTIC SYSTEM PROPOSED

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

INSTALL: 1-1250 GALLON PUMP CHAMBER

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

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

LOCATION - Place the distribution box 140 feet from the West (416') lot line and 140 feet from the North lot line. Run trenches along contour toward rear of lot - BEING CERTAIN TO MAINTAIN 100 FEET SEPARATION FROM WATER WELL.

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

10/29/99 CHANGED BECAUSE OF FIELD CONDITIONS OK 10/23/99
TO 90' OFF OF THE 416.15' & 145' OFF OF THE NORTH LOT LINE
(DROX IS NOW LOCATED IN ITS ORIGINAL PLANNED LOCATION - SEE BP PLAN)

PLANS APPROVED BY (SRK) Craig Williams DATE 7-13-1999

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

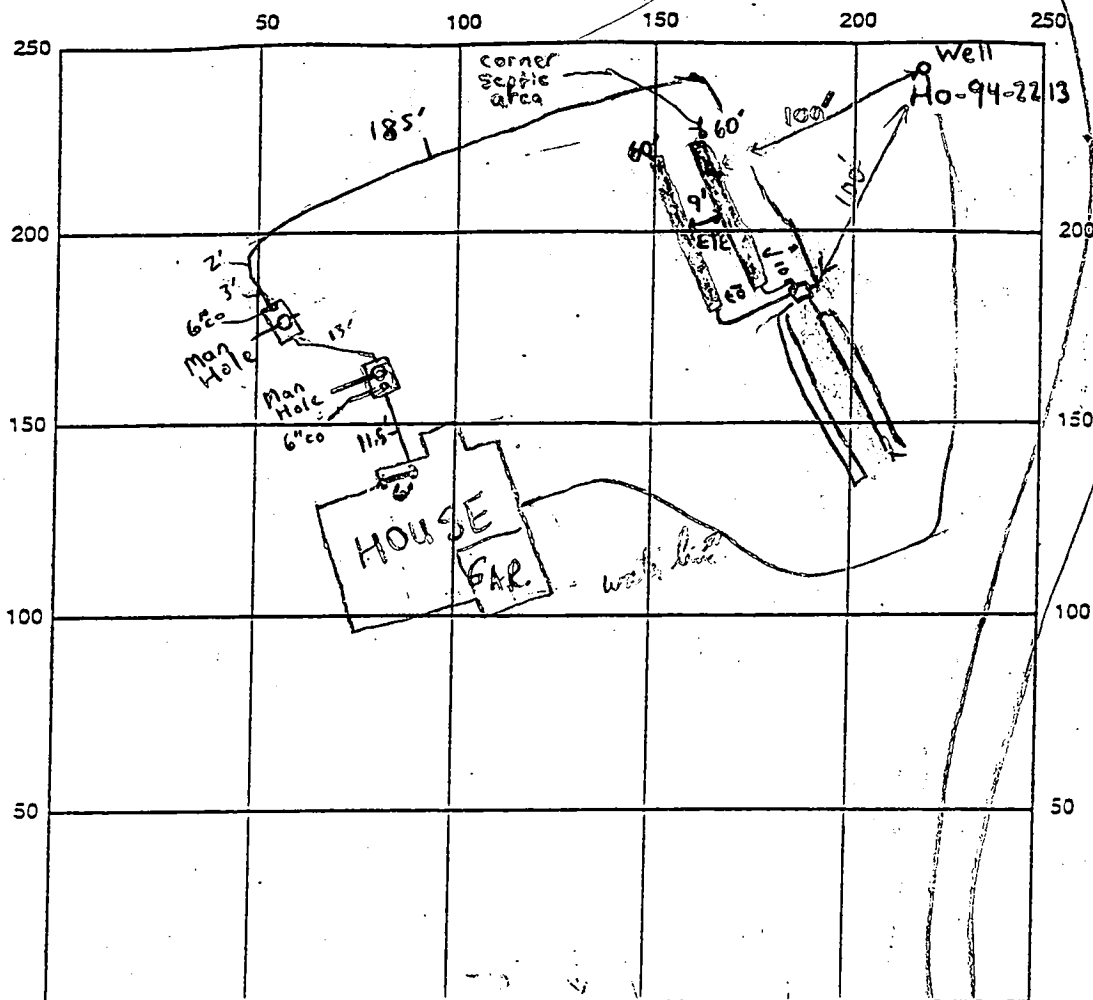
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON, CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

ORIGINAL PERMIT SIGNED AND RETURNED 10/17/99
B00120667 LP Tank

59287C



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SAND HILL ROAD Pump Tank - (6" & Manhole)

SEPTIC TANK LEVEL 2 + 1250 gallon midstream tanks CLEANOUTS Septic Tank - (6" & Manhole)

DISTRIBUTION BOX LEVEL ✓

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

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 240 FT.

NUMBER OF TRENCHES 4 (4) 60 ONE SIDEWALL/BOTTOM AREA 720 SQ. FT.

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

ABSORBENT AREA N/A SQ. FT.

REMARKS: 10/29/99 - DBOX LOCATION CHANGED BACK TO ITS ORIGINAL LOCATION AS A RESULT OF REVISED PLUMBING & CONTOUR ISSUES, OK TO INSTALL AS PER DISCUSSED & CONTINUE WORK - (SR) 10/29/99 - OK TO CONTINUE WORK - (SR)

11/1/99 ADDITIONAL² TRENCHES COMPLETE. OK TO COVER. CW

PUMP PERFORMANCE TEST NEEDED FOR FINAL APPROVAL, ✓ OK 11/1/2000 CW

WPI - OK 11/3/99 RP 11/1/00 PV

DATE SYSTEM APPROVED 11/11/2000 INSPECTOR Corey W. Wilson

WPI
11/3/99 Ready 11-12

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 J. Jos. Gartland, Inc.

Telephone 410-875-2400

License Number 1713

Certified Well Pump Installer _____ Well Driller _____ Registered Plumber ☒

Name of Property Owner Dorsey Family Homes Telephone 410-465-7200

Subdivision Sand Hill Landing Lot # 2 Well Tag # _____

Site Address 2380 Sand Hill Road.

Pump

1. Type
 - a. Deep well jet _____
 - b. Shallow well jet _____
 - c. Submersible ☒
2. Make Goulds
3. Model # 5ES07422
4. Capacity 5 GPM

Motor

1. Horsepower 3/4
2. RPM _____
3. Voltage _____
 - a. 110 _____
 - b. 220 ☒

Pitless Adapter

1. Make Harvard
2. Model # PT800
3. Depth 42"

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 42gal
2. Pressure relief valve? 75PSI

Piping

1. Type Plastic
2. Size 1"
3. NSF and/or BOCA Code approved ☒
4. Depth of supply line 42"

Well data

1. Depth 250 ft.
2. Yield _____ GPM
3. Static water level _____ 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.

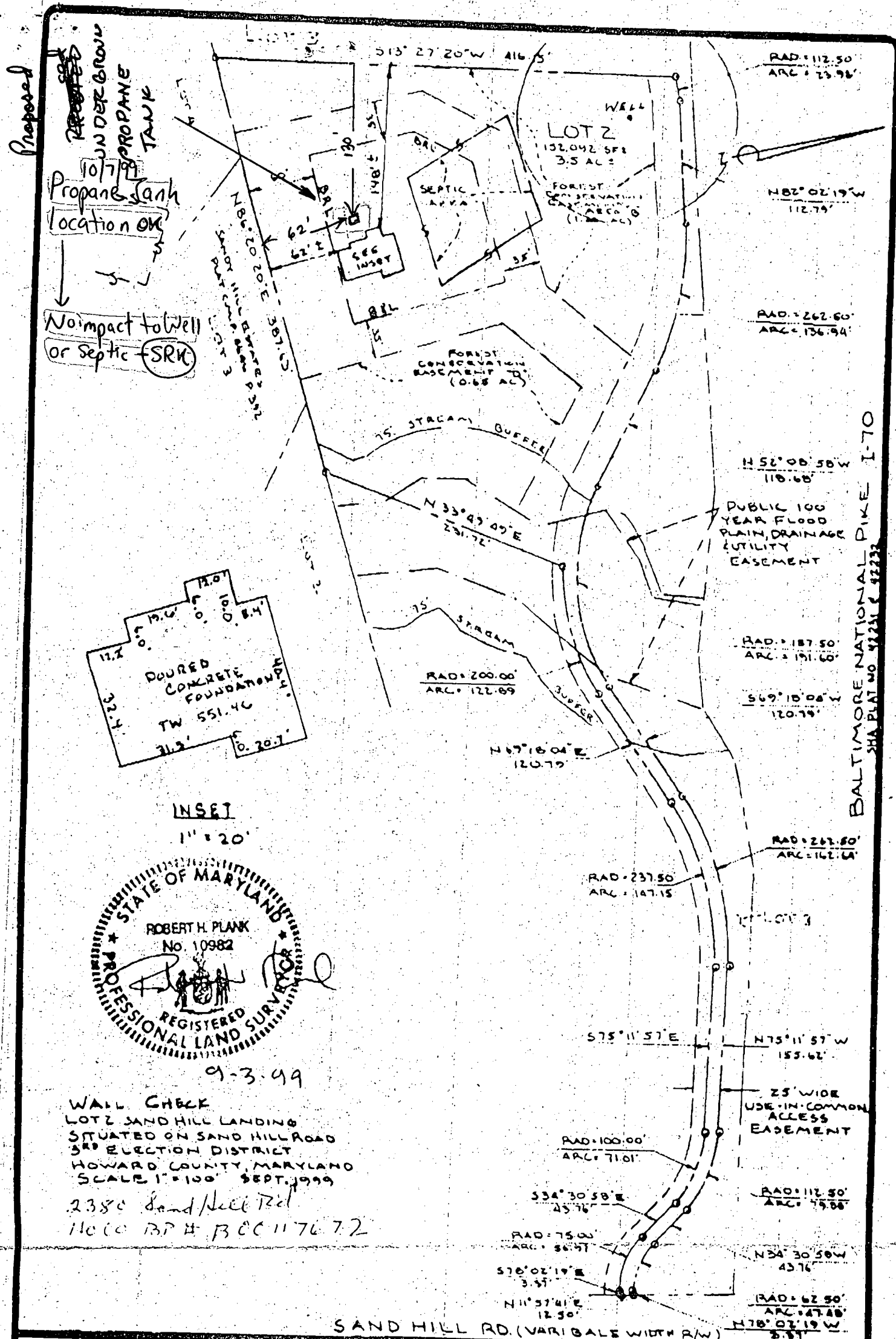
WPI OK RJP (SRU)

11/3/99

Signature of Applicant _____

Date: 11/4/99

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



I CERTIFY THIS PLAT TO BE CORRECT; IT IS THE RESULT OF AN ACTUAL FIELD SURVEY BASED ON DATA FOUND AMONG THE LAND RECORDS OF HOWARD COUNTY, MARYLAND, AS REFERENCED HEREON.

REFERENCE

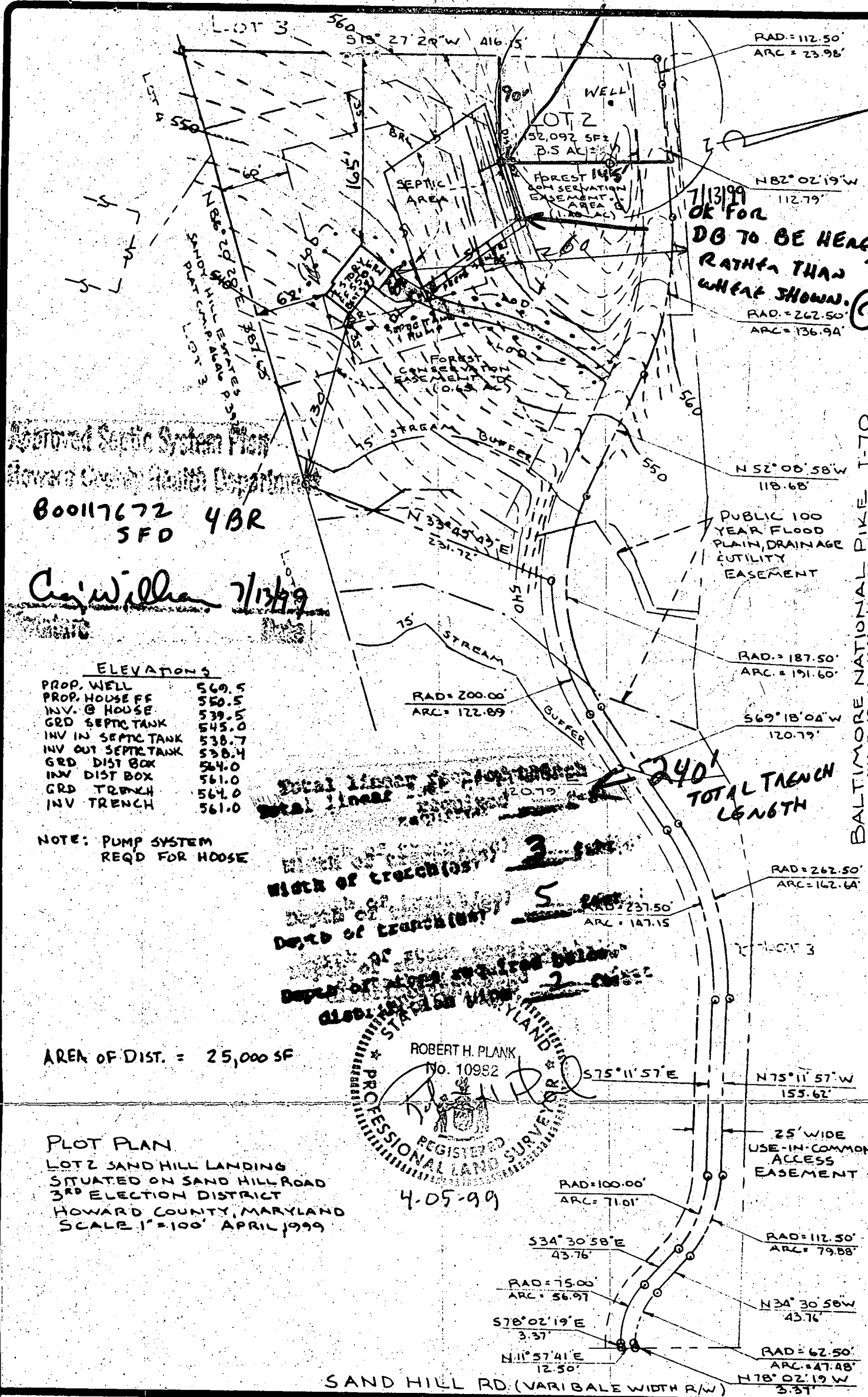
JOB NO.

TM 16, P 66

99SY 0901

NH NASSAUX-HEMSLEY, INC.

204 S. MAIN STREET
MOUNT AIRY, MARYLAND 21771
(301) 829-2296

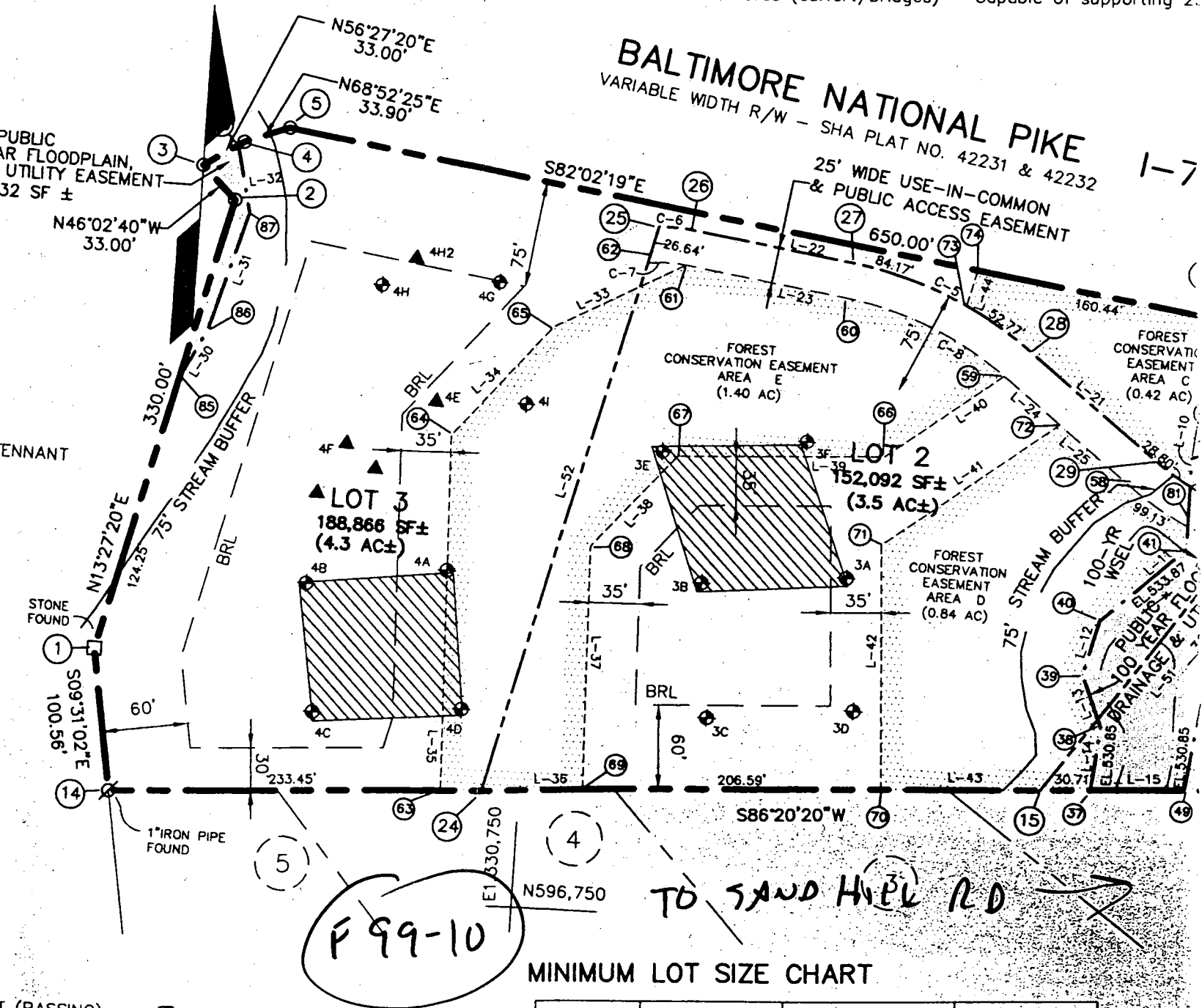


BALTIMORE NATIONAL PIKE I-70
SHA PLAT NO 42231 & 42232

NH NASSAUX-HEMSLEY, INC.
204 S. MAIN STREET
MOUNT AIRY, MARYLAND 21771
(301) 829-2296

34°30'58"W	43.76'	L-44	S13°18'32"W	25.99'
75°11'57"W	155.62'	L-45	N08°00'55"E	21.70'
69°18'04"W	120.79'	L-46	N06°32'59"W	216.79'
52°08'58"W	118.68'	L-47	N78°02'19"W	3.37'
82°02'19"W	112.79'	L-48	N34°30'58"W	43.76'
82°02'19"E	112.79'	L-49	N75°11'57"W	155.62'
52°08'58"W	51.47'	L-50	S69°18'04"W	120.79'
52°08'58"W	67.21'	L-51	S33°49'49"W	231.72'
69°18'04"E	120.79'	L-52	S13°27'20"W	416.15'
		L-53	N86°20'20"E	365.70'

- There are no existing structures on site to remain.
- Refuse collection, snow removal and road maintenance for the junction of the flag or pipestem and the road R/W or pipestem lot driveway.
- All areas are more or less.
- This plat is based on a field run monumented boundary January 13, 1998 by D.S. Thaler & Associates, Inc.
- Driveways shall be provided prior to residential occupancy and emergency vehicles per the following minimum requirements:
 - Width - 16 feet serving two or more residences.
 - Surface - 6 inches of compacted crusher run base with 45 foot turning radius.
 - Structures (culvert/bridges) - Capable of supporting 20,000 lbs.



MINIMUM LOT SIZE CHART

LOT NO.	GROSS AREA	PIPESTEM AREA	MIN. LOT SIZE
2	152,092 SF	9,112 SF	142,980 SF
3	188,866 SF	56,438 SF	132,428 SF

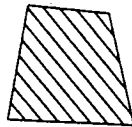
OWNER'S DEDICATION

...BULATION
 ...er of lots to be recorded:
 I, Duane E. Zentgraf, Member, C.A.B. Properties, Inc., owner of the property shown

LOCATIONS (FAILING)

PROP. WELL LOCATION

PROP. SEPTIC RESERVE AREA



BLTIMORE NATIONAL PIKE
ABLE WIDTH R/W - SHA PLAT NO. 42231 & 42232

25' WIDE USE-IN-COMMON
& PUBLIC ACCESS EASEMENT

1-70

EX. PERPETUAL EASE
FOR STREAM CHANGE
(SHA R/W PLAT 401)

LOT 2
152,092 SF±
(3.5 AC±)

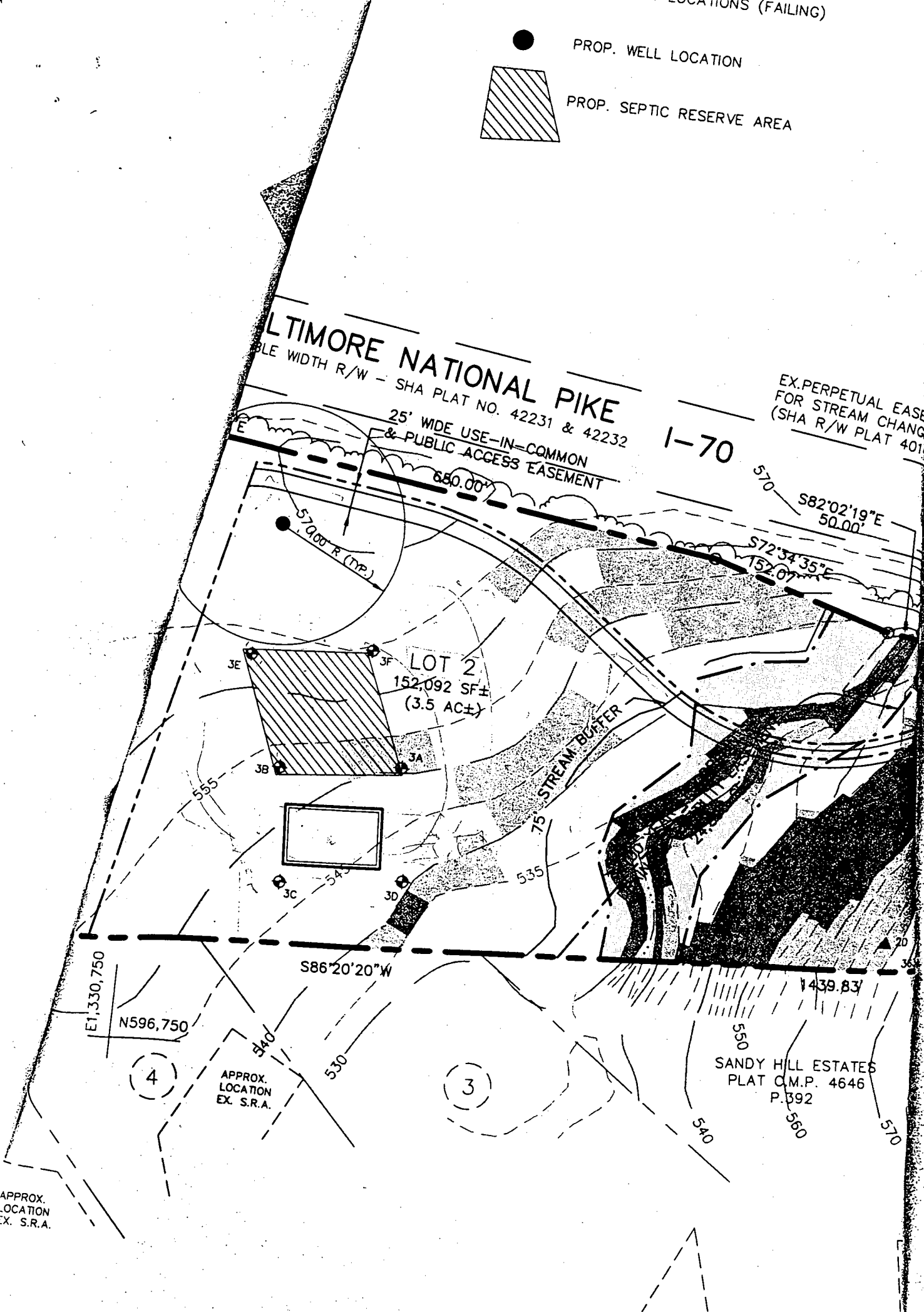
75' STREAM BUFFER

1439.83'

SANDY HILL ESTATES
PLAT C.M.P. 4646
P. 392

APPROX.
LOCATION
EX. S.R.A.

APPROX.
LOCATION
EX. S.R.A.



APPLICATION

PERCOLATION TESTING

A _____

P _____

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

DISTRICT _____

DATE Jan. 28, 1998

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 Duane Zentgraf

ADDRESS 2701 Woodridge Court, W. Friendship, MD 21794 PHONE 410-442-2709

PROSPECTIVE BUYER Heritage Land Development

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

PROPERTY LOCATION:

SUBDIVISION Sand Hill Landing SRH
Zentgraf Property LOT NO X X 2 SRH

ROAD AND DESCRIPTION Sand Hill Road, South West Corner of Sand Hill and I-70

TAX MAP 16 PARCEL # 66

SIZE OF LOT 1 Acre TYPE BLDG S. F. D.
(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.

(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

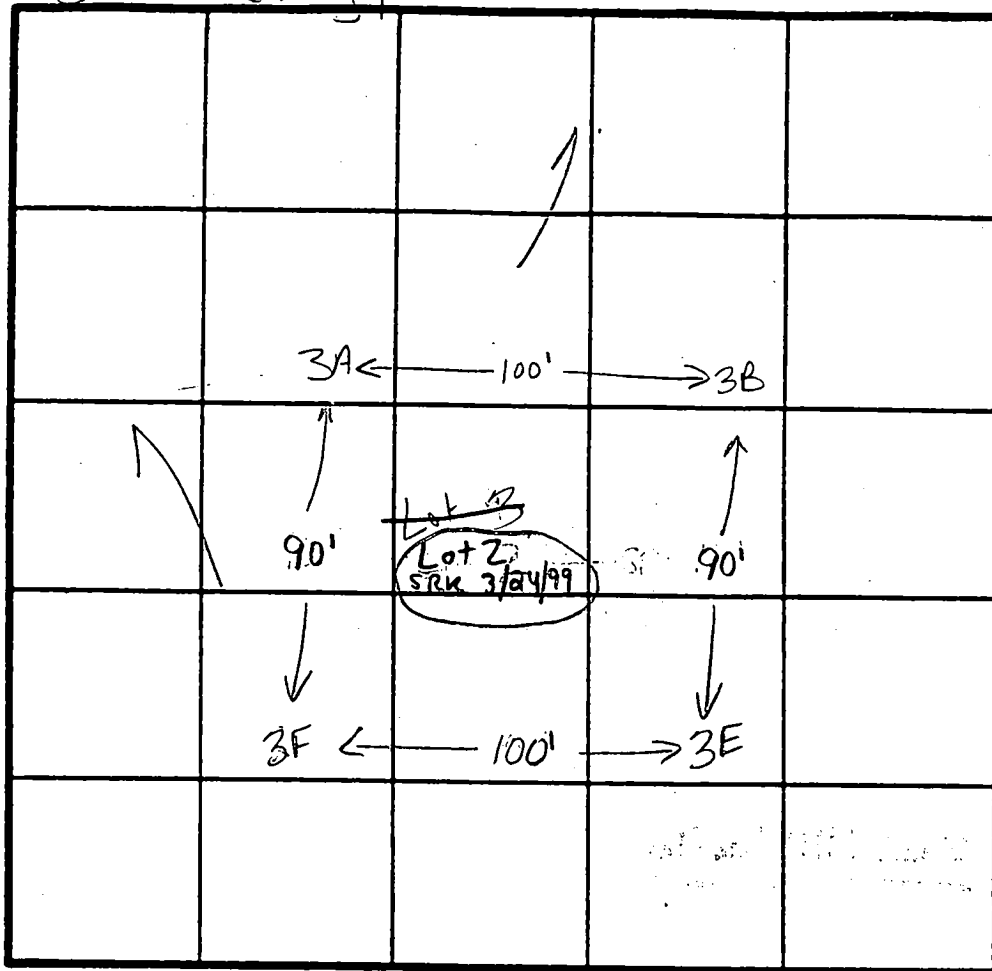
REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

3A+3B = existing perc test holes from 1-20-98



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Rt. 70

3E
SOIL PROFILE

2.5'
or/br
clay
lm

11.0'
lt tan/
brown
silty
loam
10%-15%
shale

3F

3.0'
or/br
clay lm

10.0'
lt tan/
grey
powder
silt
loam
20%
shale
frag

10.0'

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
5-5-98	3E	3.0's	10:23 ₃₀	10:24 ₃₀	10:24 ₃₀	10:25 ₃₀	fast
		11.0'D	visual	ok	see profile		
		(repour)	10:24	10:25	10:25	10:27	2 min
	3F	3.5's	10:31	10:31 ₃₀	10:31 ₃₀	10:32 ₁₅	fast
		10.0'D	visual	ok	see profile		
		(repour)	10:32 ₃₀	10:33 ₃₀	10:33 ₃₀	10:35	1:30

REMARKS _____

TYPE OF SOIL _____

TESTED BY

Kim Maiste

ALSO PRESENT

Tim Feaga, Chuck Zepp

1-7-98

APPLICATION

PERCOLATION TESTING

A 59287C

P _____

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

DISTRICT _____

DATE 12/29/97

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 Duane Zentgraf DORSEY Family HomesADDRESS 2701 Woodridge Court, W. Friendship, MD 21794 PHONE 410-442-2709PROSPECTIVE BUYER Heritage Land DevelopmentADDRESS 3243 Bethany Lane, Ellicott City, MD 21042 PHONE 410-313-8808

PROPERTY LOCATION:

SUBDIVISION Sand Hill Landing (Revised Name) (SRH) LOT NO III 2 (SRH)ROAD AND DESCRIPTION Sand Hill Road, South West Corner of Sand Hill and I-70(2380 Sand Hill Road)TAX MAP 16 PARCEL # 66SIZE OF LOT 1 Acre TYPE BLDG Single - 4 Brn

(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.

(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

HD-216

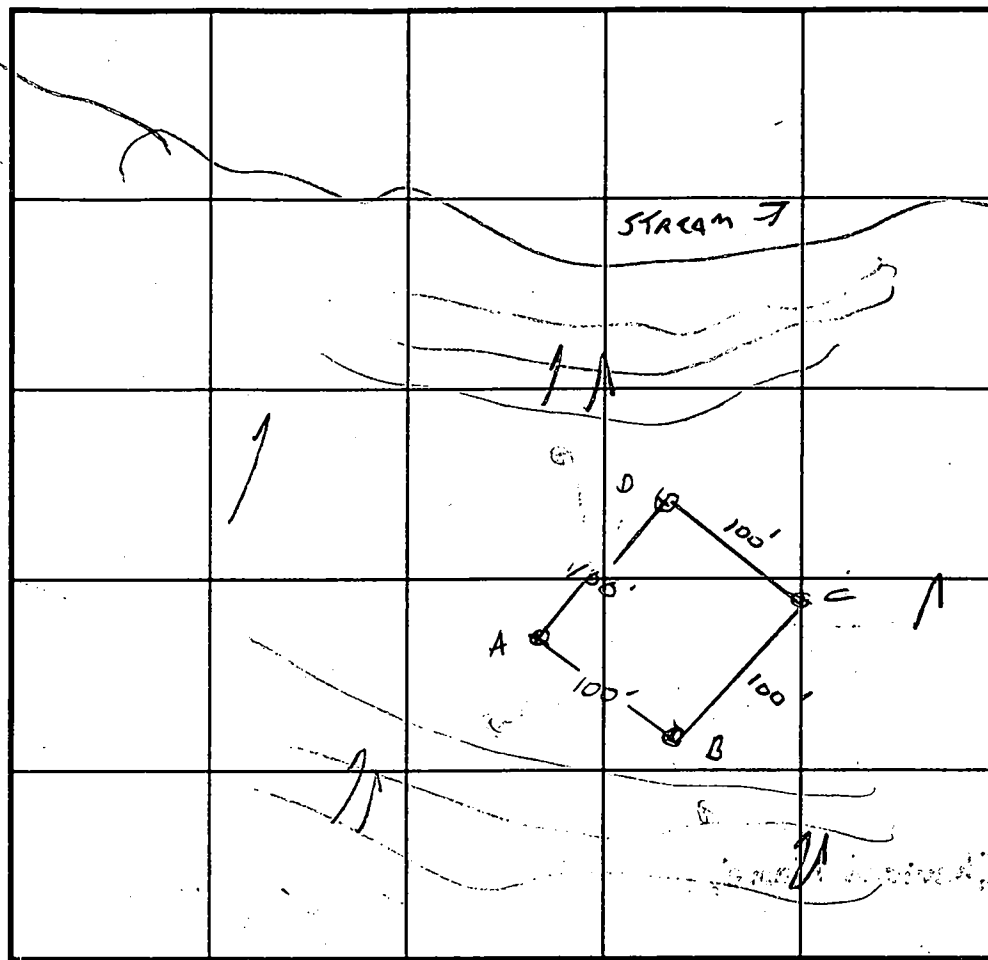
THIS IS NOT A PERMIT

Holes C & D are not within proposed septic reserve area SRK
3/24/99

59287C

COUNTY #

SOIL PROFILE



SOIL PROFILE
TYPICAL
SOFT SHALEY
MICA ROCK
ORANGE CL
104R 4/4
SANDY
MICA LOAM
LEAK FINE
CRUMB
DS
DOE VERY
THIN COARSE
MICA
FRAGS

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
1/20/98	A	3.5 / 11V	12:17	12:18	→	12:20	2 MW
	D	3.5 / 11C"	12:27	12:28	12:31	12:33	2 MW
	C	4.6" / 12V	12:36	→	12:39	12:42	3 MW
	B	VISUAL	-	-	-	-	OK

REMARKS LOT 3 LOT 2

TYPE OF SOIL CHESTER SILT CLAY

TESTED BY G. SAVAGE

ALSO PRESENT TIM FEAGA

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 2 MIN TRENCH WIDTH 3

INLET DEPTH 3 MAXIMUM BOTTOM DEPTH 5 SQ. FT/BEDROOM 180



HOWARD COUNTY HEALTH DEPARTMENT

Diane L. Matuszak, M.D., M.P.H., County Health Officer

August 5, 1999

Robert Dorsey
Dorsey Family Homes
9926 Cypressmeade Dr.
Ellicott City, Md 21042

Re: Lot 1 Sand Hill Landing - B00117671
Lot 2 Sand Hill Landing - B00117672
Lot 3 Sand Hill Landing - B00117673

Dear Mr. Dorsey,

This is to confirm that water supply issues with respect to the above referenced properties have been appropriately addressed and each of the respective building permit applications have been recommended for approval.

For lots 2 and 3, the applicant's request for variance is hereby granted, allowing each lot to be served by an existing well. The basis of the variance being the distance to the point of connection to the public supply.

Lot 1, being closer to the point of connection, is designated for service by the public supply. Abandonment of the existing well is to be accomplished by a licensed driller as early in the construction sequence as practical. In the interim, the well should be protected from risk of accidental damage from construction traffic.

Thank you for your cooperation in this matter.

Yours truly,

Craig Williams

C1	06710	SEQUENCE NO. (MDE USE ONLY)	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
1 2 3 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)		COUNTY NUMBER A59287C		
ST/CO/USE ONLY DATE Received MM DD YY 03 31 98		DATE WELL COMPLETED MM DD YY 04 30 00		PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-94-2213
		Depth of Well 22 250 26 (TO NEAREST FOOT)		28 29 30 31 32 33 34 35 36 37

OWNER C.A.B. Properties	first name	TOWN West Friendship MD 21794
STREET OR RFD 2701 Woodridge Ct.		
SUBDIVISION Sand Hill Landing	SECTION	LOT 2

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
Overburden	0 35	
Gray Rock	35 250	x
water at 82 & 210'		

GROUTING RECORD	
WELL HAS BEEN GROUTED (Circle Appropriate Box)	
TYPE OF GROUTING MATERIAL (Circle one)	
CEMENT ☒ CM BENTONITE CLAY ☒ BC	
NO. OF BAGS 45 46 9	NO. OF ROUNDS 45 46 100
GALLONS OF WATER 34	
DEPTH OF GROUT SEAL (to nearest foot)	
from 0 48 TOP 52 ft. to 36 54 BOTTOM 58 ft.	
(enter 0 if from surface)	
CASING RECORD	
casing types insert appropriate code below	☒ ST STEEL ☒ CO CONCRETE ☒ PL PLASTIC ☒ OT OTHER
MAIN CASING TYPE	Nominal diameter top (main) casing (nearest inch): 60 61 63 64 66 70
PL 6	Total depth of main casing (nearest foot): 40
OTHER CASING (if used)	
diameter inch depth (feet) from to	
E A C H C A S I N G	
SCREEN RECORD	
screen type or open hole	☒ ST STEEL ☒ BR BRASS ☒ HO OPEN HOLE ☒ PL PLASTIC ☒ OT OTHER

PUMPING TEST	
HOURS PUMPED (nearest hour)	3
PUMPING RATE (gal. per min.)	13.6
METHOD USED TO MEASURE PUMPING RATE Submersible	
WATER LEVEL (distance from land surface)	
BEFORE PUMPING	29 ft.
WHEN PUMPING	53 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	

NUMBER OF UNSUCCESSFUL WELLS: 0	
WELL HYDROFRACTURED ☒ YES ☒ NO	
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 LIC. NO. M D 399	
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)	
LIC. NO. M D 241	
Hann Powell	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)	

DEPTH (nearest ft.)	
40 250	
E A C H C A S I N G	
SLOT SIZE 1 2 3	
DIAMETER OF SCREEN (NEAREST INCH)	
56 60	
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 O	
70 72 74 75 76	
TELESCOPE CASING LOG INDICATOR OTHER DATA	

PUMP INSTALLED	
DRILLER WILL INSTALL PUMP 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	
- below (nearest foot)	
49 50 51	
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)	
I-70	
Property Lines	
80' 60'	

B 1	8834	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER HO - 94 - 2213 fill in this form completely
Date Received (APA) 03 25 99		OWNER INFORMATION 15 Last Name CAB Owner First Name Properties 36 Street or RFD 2701 Woodridge Ct 57 Town West Friendship MD 21794 Zip 21794		
8 MM DD YY '13 03 25 99				
DRILLER INFORMATION Driller's Name Paul M. Fabiszak License No. M 11 D3 9 9 Firm Name G. Edgar Harr Sons' Corp Address 12047 Falls Rd. Cockeysville 21030 Signature <i>[Signature]</i> Date 3/23/99		LOCATION OF WELL 8 COUNTY Howard 23 SUBDIVISION Sand H. II Landing SECTION 2 LOT 2 52 NEAREST TOWN West Friendship MILES FROM TOWN (enter 0 if in town) 1		
WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 5 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 750		DIRECTION OF WELL FROM TOWN (CIRCLE BOX) 		
USE FOR WATER (CIRCLE APPROPRIATE BOX) ☒ DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION ☐ FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) ☐ INDUSTRIAL, COMMERCIAL, DEWATERING ☐ PUBLIC WATER SUPPLY WELL ☐ TEST, OBSERVATION, MONITORING ☐ GEO-THERMAL		ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 		
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL COUNTY NAME Howard COUNTY NO. A 59287C STATE SIGNATURE Steven R. King INSERT S S DATE ISSUED 03 31 99 CO SIGNATURE 03 31 99 EXP. DATE NORTH GRID 536 EAST GRID 0819		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. Well 2. 3.		
APPROXIMATE DEPTH OF WELL 200 FEET APPROXIMATE DIAMETER OF WELL 6 INCH		WRITE THE BOX NUMBER FROM THE MAP HERE E 816819 N 536536		
METHOD OF DRILLING (circle one) BORED (or Augered) ☐ JETTED ☐ Jetted & DRIVEN 30 AIR-ROTARY ☐ AIR-PERCussion ☒ ROTARY (Hydraulic Rotary) 37 CABLE ☐ REVerse-ROTary ☐ Drive-POINT 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) ☒ THIS WELL WILL NOT REPLACE AN EXISTING WELL ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS ☐ THIS WELL WILL DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) _____		Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROX. PERMIT NUMBER 40 - 94 - 2213 PERMIT NO. 40 - 94 - 2213		
SPECIAL CONDITIONS NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED				

TEST LOCATIONS (FAILING)

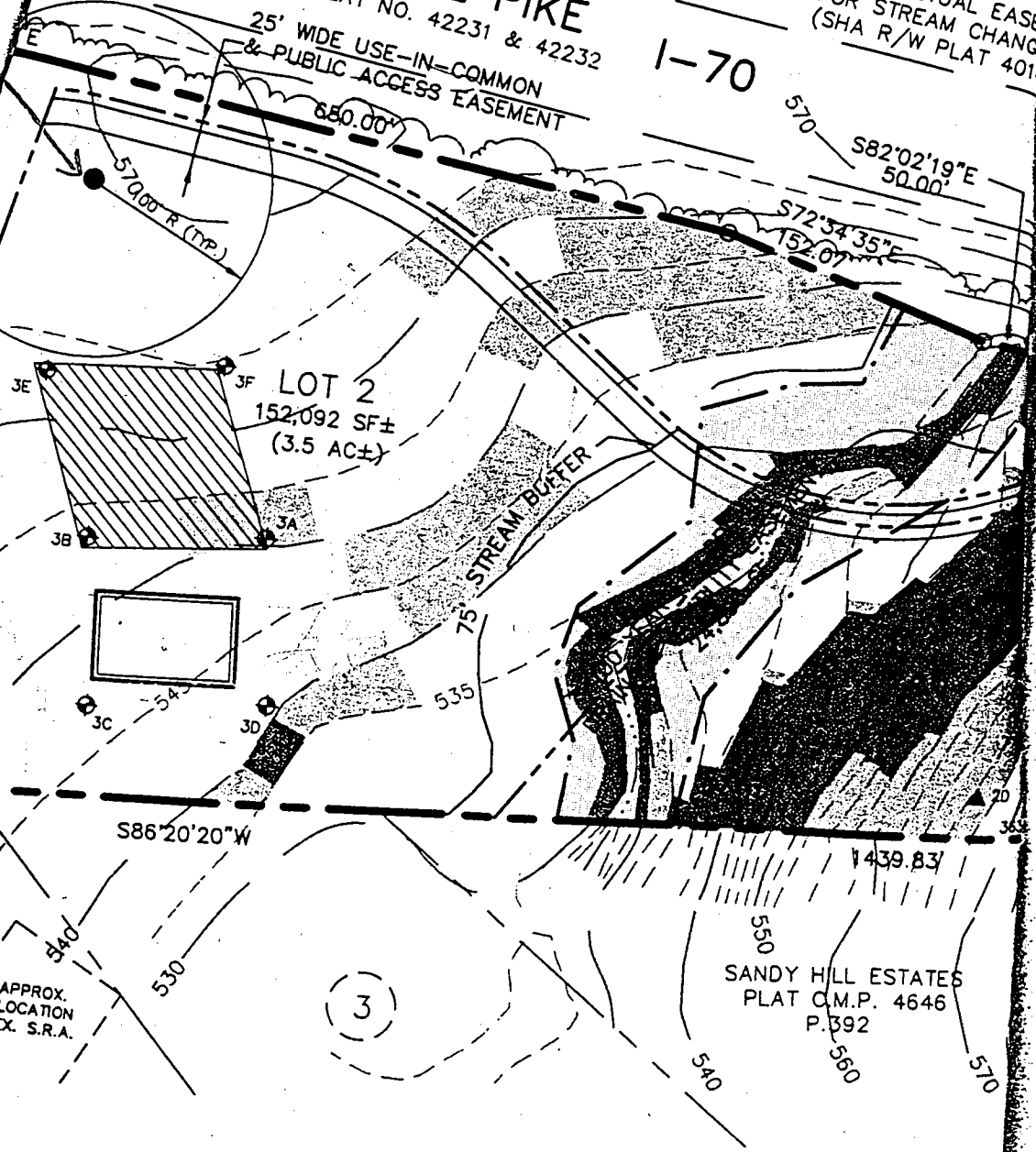
● PROP. WELL LOCATION

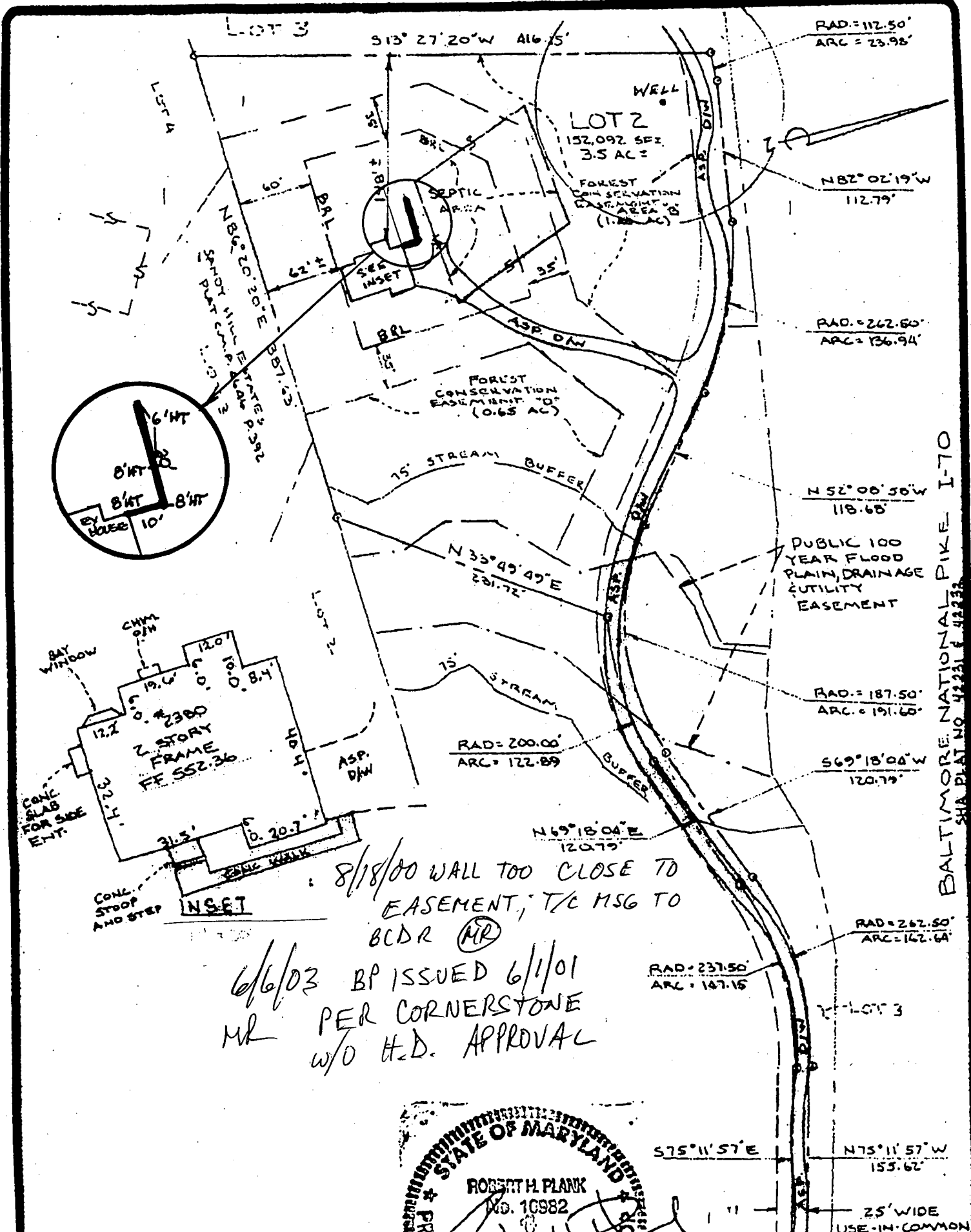
▨ PROP. SEPTIC RESERVE AREA

Well site
approved as
shown here
but not staked
as of
3/31/99
Steven R. Krieg

PORTLAND NATIONAL PIKE
1-70
25' WIDE USE-IN-COMMON
& PUBLIC ACCESS EASEMENT
SHA PLAT NO. 42231 & 42232

EX. PERPETUAL EASE
FOR STREAM CHANG
(SHA R/W PLAT 401)





BALTIMORE NATIONAL PIKE I-70
SHA PLAT NO. 42231 & 42232

STATE OF MARYLAND
ROBERT H. PLANK
No. 10982

8/18/00 WALL TOO CLOSE TO
EASEMENT; T/C MSG TO
BCDR (MR)
6/6/03 BP ISSUED 6/1/01
MR PER CORNERSTONE
W/O H.D. APPROVAL

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3430 COURT HOUSE DRIVE ELLICOTT CITY, MD 21043 PERMITS (410) 313-2455 INSPECTIONS (410) 313-1810 AUTOMATED INFORMATION (410) 313-3800	HOWARD COUNTY PERMIT APPLICATION	PERMIT NUMBER B00125836
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Building Address <u>2380 Sand Hill Rd.</u> <u>Ellicott City, Md 21042</u>	Property Owner's Name <u>John J. Ellsworth</u>
Suite/Apt. #: _____ SDP/WP/Petition #: _____	Address <u>2380 Sand Hill Rd</u>
Census Tract <u>6030</u> Subdivision <u>Sand Hill Meadows</u>	City <u>Ellicott City</u> State <u>MD</u> Zip Code <u>21042</u>
Section <u>1</u> Area <u>Dis #3</u> Lot <u>2</u>	Home Phone <u>301-847-0977</u> Work Phone _____
Tax Map <u>16</u> Parcel <u>66</u> Grid <u>7</u>	Applicant's Name & Mailing Address, (if other than stated hereon): <u>301-847-0977</u>
Zoning <u>RR</u> Map Coordinates _____ Lot size _____	Phone _____ Fax _____
Existing Use <u>Existing Home</u>	Contractor Company <u>DORSEY FAMILY HOMES</u>
Proposed Use <u>Sound Barrier</u>	Contact Person <u>Paul Dorsey, Jr. President</u>
Estimated Construction Cost \$ <u>1500</u>	Address <u>9926 Cypressmole Dr.</u>
Description of Work <u>erect sound fence</u> <u>per plan & spec. 8'-10'</u>	City <u>Ellicott City</u> State <u>MD</u> Zip Code <u>21042</u>
Occupant or Tenant <u>r/k</u>	License No. <u>189906</u>
Contact Name _____	Phone <u>410-465-7200</u> Fax <u>410-465-0588</u>
Address _____	Engineer or Architect Company <u>N/A</u>
City _____ State _____ Zip Code _____	Contact Person _____
Phone _____ Fax _____	Address _____
	City _____ State _____ Zip Code _____
	Phone _____ Fax _____

BUILDING DESCRIPTION - <u>COMMERCIAL</u>		BUILDING DESCRIPTION - <u>RESIDENTIAL</u>	
<u>Building Characteristics</u>	<u>Utilities</u>	<u>Building Characteristics</u>	<u>Utilities</u>
Height: _____	Water Supply: _____ Public _____ Private _____	SF Dwelling ☐ SF Townhouse ☐ <u>Depth</u> _____ <u>Width</u> _____	Water Supply: _____ Public _____ Private ☒
No. of stories: _____	Sewage Disposal: _____ Public _____ Private _____	1st floor: _____	Sewage Disposal: _____ Public _____ Private ☒
Gross area, sq. ft. per floor: _____	Electric Yes ☐ No ☐	2nd floor: _____	Electric Yes ☒ No ☐
Use group: _____	Gas Yes ☐ No ☐	Basement: _____	Gas Yes ☐ No ☒
Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____	Heating System: _____ Electric ☐ Oil ☐ Natural Gas ☐ Propane Gas ☐	Finished Basement ☐ Unfinished Basement ☐ Crawl space ☐ Slab on Grade ☐ No. of Bedrooms _____	Heating System: <u>FINA</u> Electric ☐ Oil ☐ Natural Gas ☐ Propane Gas ☒
State Certified Modular _____	Sprinkler system: <u>N/A</u> ☐ Full _____ Partial _____ Other Suppression _____ # of Heads _____	Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Sprinkler system: <u>N/A</u> ☐ NFA #13D _____ NFA #13R _____ Other: _____
		Other Structure: _____ Dimensions: _____ Footings: _____ Roof: _____	
		State Certified Modular _____ Manufactured Home _____	

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

<u>Robert L. Dorsey, Jr. Pres</u> Applicant's Signature <u>PRESIDENT DORSEY FAMILY HOMES</u> Title/Company	<u>ROBERT L. DORSEY JR</u> Print Name <u>8-4-00</u> Date
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Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
** PLEASE WRITE NEATLY AND LEGIBLY **

- FOR OFFICE USE ONLY -

<u>AGENCY</u>	<u>DATE</u>	<u>SIGNATURE APPROVAL</u>	<u>DPZ SETBACK INFORMATION</u>	<u>PROPERTY ID#</u> <u>40932</u>
☒ Land Development, DPZ			Front: _____	Filing fee \$ <u>312</u>
☐ State Highways			Rear: _____	Permit fee \$ _____
☒ Building Official			Side: _____	Excise tax \$ _____
☒ Dev. Engineering, DPZ			Side St. _____	Sub-total paid \$ _____
☒ Health			All minimum setbacks met? YES ☐ NO ☐	Add'l permit fee \$ _____
☐ Fire Protection			Is Entrance Permit required? YES ☐ NO ☐	TOTAL FEES \$ _____
Is Sediment Control approval required prior to issuance? YES ☐ NO ☐			Historic District? YES ☐ NO ☐	Balance due \$ _____
CONTINGENCY CONSTRUCTION START: ☐			Lot Coverage for NewTown Zone _____	Check # <u>6461</u>
ONE STOP SHOP: ☐			SDP/Red-line approval date _____	Validation # <u>22</u>
			Accepted by <u>[Signature]</u>	

Distribution of Copies- White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA