10/27/99 Need pump chart and manhole on pp DB

10/27/99 1:00
12/15/99 12:00

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 5127O8

A 59335

DISTRICT

INDEXED 03-330265

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

DATE 9/17/99

DATE SYSTEM APPROVED 10/15/99

INSPECTOR S.R.K.

J. Joseph Gartland IS PERMITTED TO INSTALL X ALTER

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

SUBDIVISION Sand Hill Landing LOT 3 ROAD 2390 Sand Hill Road

PROPERTY OWNER Dorsey Family Homes

ADDRESS

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

CONTRACTOR TO REQUEST LAYOUT INSPECTION PRIOR TO BEGINNING TRENCH EXCAVATION.

* PUMPED SEPTIC SYSTEM REQUIRED DUE TO HOUSE LOCATION CLEARANCES *

(WATCH FOR 100' TO WELL - POTENTIAL 20' CONFLICT WITH WRITTEN SPECS)

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 distribution box 130 feet from the back (330.00') lot line and 170 feet from the left lot line as seen when facing the property from SAnd Hill Road. Install trenches on contour.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. 9/17/99 OK AH

PLANS APPROVED BY Steven R. Krieg/c. 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.

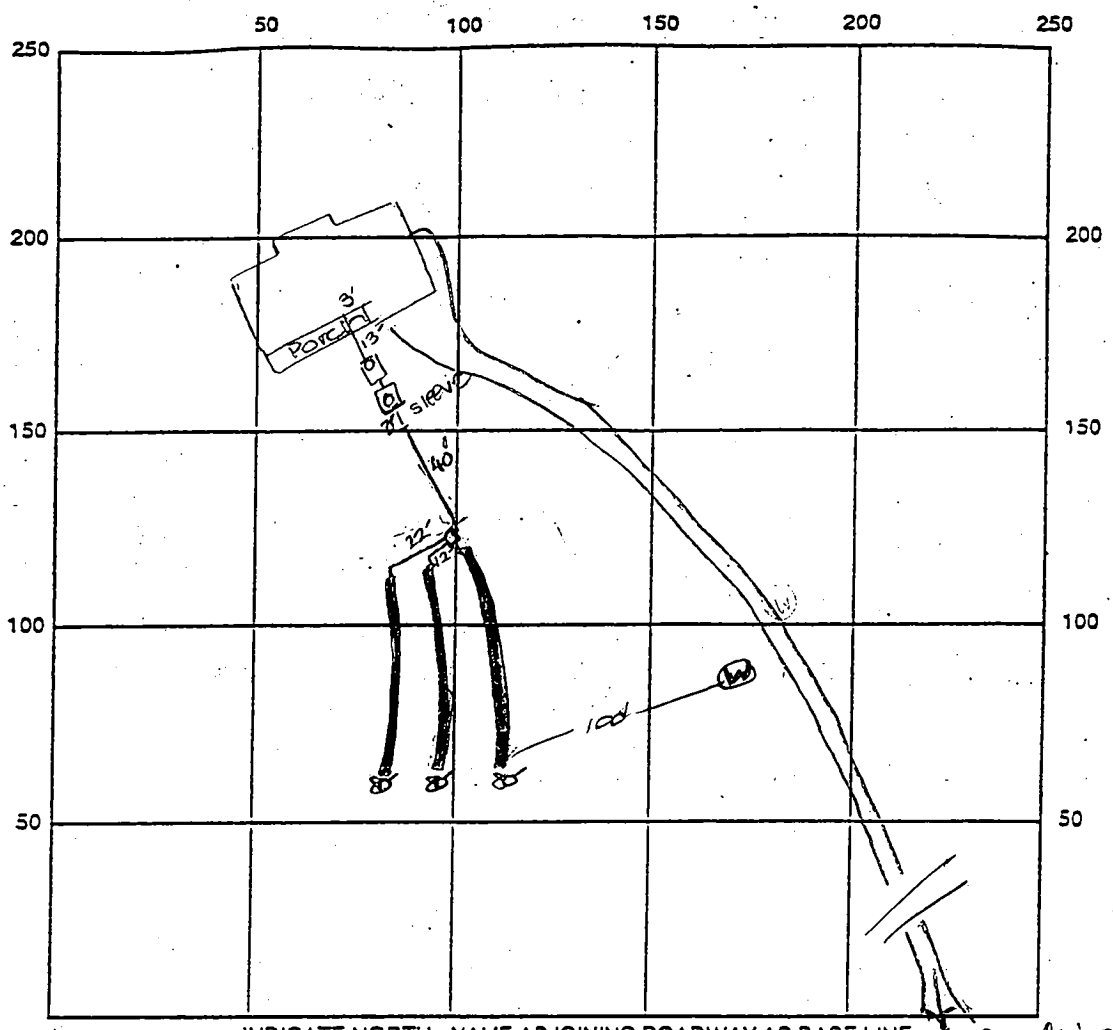
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

HD-260(6-90)

A 59335



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE long drive to Sand Hill Road

SEPTIC TANK LEVEL ok-1250 gal s.t. 1000 gal pump pit CLEANOUTS one on s.t. + mean pc.

DISTRISUTION BOX LEVEL ok - baffle in

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

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 3 x 80 FT. + 240

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 720 SQ. FT.

DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA — SQ. FT.

REMARKS: 10/22/99 Due to shift in house location (downhill and 22' closer to 262.37' lot line), gravity sewer to specified d.b. location not possible. It appears that grading has occurred over the area closest to the house. I relayed this info to installer who will notify bldr. (DKS) 10/27/99 Pumped system installed in order to place d.b. and specified location. OK to cover

DATE SYSTEM APPROVED 12/15/99 INSPECTOR Steven R. Hurig

12/15/99 - Pump test "on", high water alarm ok (SRH)

* all septic work - Need pump check and manhole on pp for final. (JS)

1-7-98

APPLICATION

A-59335 A ~~59787~~

PERCOLATION TESTING

~~TEST FEE DUE~~

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
P.O. 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 Homes

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 (Revised Name) SRH ~~Zentgraf Property~~ LOT NO ~~4~~ 3 SRH

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

(2390 Sand Hill Road)

TAX MAP 16 PARCEL # 66

~~PERMIT SIGNED~~
~~RETURNED~~ 71399
Sewal # B01117673

SIZE OF LOT 1 Acre TYPE BLDG Single - 4 Bdrm
(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

A59335

TYPICAL

SOIL PROFILE B

0

DARK BROWN, LOAM

DARK ORANGE SOARSE SANDY LOAM

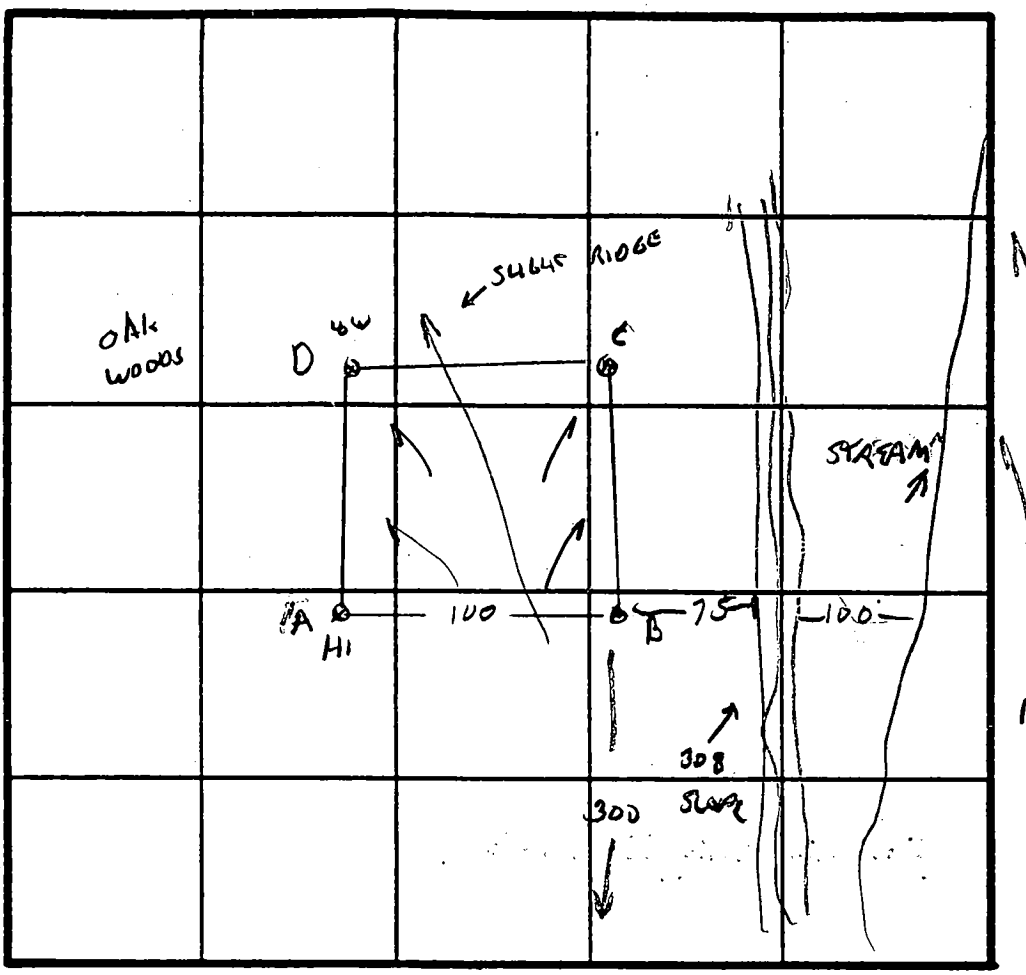
11

C

DARK BR LOAM

308 PLATY MICA FRAGS BELOW 5'

11.5



INDICATE NORTH · NAME ADJOINING ROADWAY AS BASE LINE.

I-70 → W

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
11/20/98	B	3 / 11V	12:50	12:51	→	12:53	2 MIN
	C	5.5/11.5'	12:58	1:00	→	1:02	2 MIN
		2.5	1:00		→	1:23	10 MIN ESTIMATED
	D		1:10	1:12	→	1:15	3 MIN
	A	11V	SIMILAR TO "C"				O/K

REMARKS WOODED, "C" 30% PLATY MICA FRAGS 2 5', LOT 4

TYPE OF SOIL CHESTER SILT LOAM, SOIL UNSTABLE - NO DEED SHEET

TESTED BY G. SAVAGE ALSO PRESENT TIM FRAGA

APPLICATION

PERCOLATION TESTING

A 59335

P _____

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

DISTRICT _____

DATE _____

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 _____

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Sand Hill Landing (SRK) LOT NO. 4 3 (SRK)

ROAD AND DESCRIPTION _____

_____

TAX MAP _____ PARCEL # _____

SIZE OF LOT _____ 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. _____
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

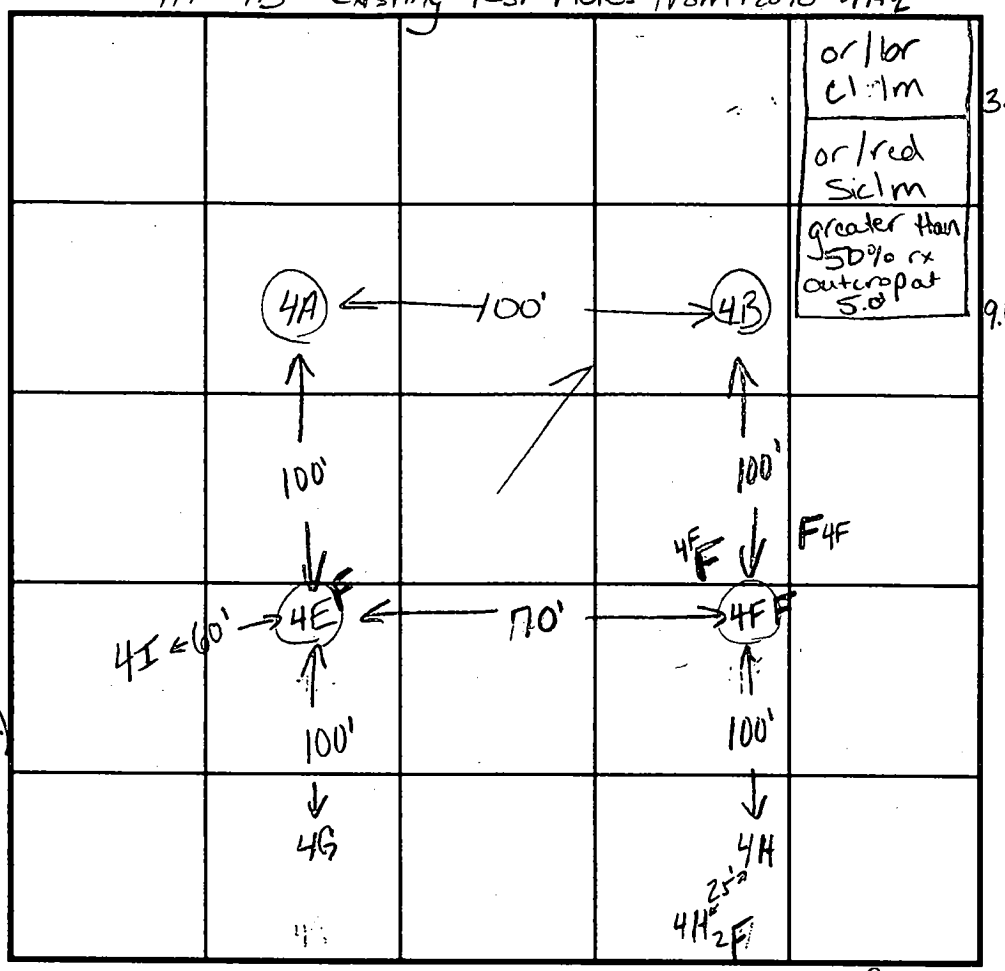
SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

HD-216 (3/92)

59335
COUNTY #

4A + 4B = existing test holes from 1:2048 $4H_2$



SOIL PROFILE 4E

0'
or/br cl lm
3.0'
or/red sicl lm
greater than 50% shale frags
9.0'

4F (multiple holes)

3.0'
or/red cl lm
or/red brown sicl lm
7.0'
Shale outcrop
50% Shale
10.0'

4G

3.5'
or/br cl lm
or/red sicl lm
6.0'
Shale outcrop
30% Shale
10.5'

SOIL PROFILE 4H

3.0'
or/br cl lm
or/red sicl lm
30% Shale frags
4.0'-9.0'
sicl lm to bottom
11.0'

4I

3.0'
or/br cl lm
lt orange/brown sicl lm
30% Shale frags
11.0'

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
5-5-98	4E	9.0' D	visual only - see profile				F
	4F	10.0' D	visual only - see profile				F
	4G	3.0' S	10:38 30	10:48 30	10:48 30	11:05	16 30
		10.5' D	visual ok - see profile				
	4H	11.0' D	visual only - see profile				
	$4H_2$	9.0' D	visual only - see profile				F
	4I	3.0' S	11:45 15	11:48 15	11:48 15	11:53	4 45
		11.0' D	visual ok - see profile				

REMARKS

TYPE OF SOIL

TESTED BY Kim Maiste ALSO PRESENT Tim Feaga + Chuck Zepp

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 11 minutes TRENCH WIDTH

INLET DEPTH MAXIMUM BOTTOM DEPTH SQ. FT/BEDROOM 210

C 1 | 06709 | SEQUENCE NO. (MDE 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 59335

ST/CO USE ONLY
DATE Received MM 03 DD 31 YY 99

DATE WELL COMPLETED MM 04 DD 30 YY 99

Depth of Well 250 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO - 94 - 2214

OWNER C.A.B. Properties

STREET OR RFD 2701 Woodridge Ct. (last name / first name) TOWN West Friendship MD 21794

SUBDIVISION Sand Hill Landing Lot 3 SECTION ____ LOT 3

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	FEET TO	check if water bearing
Overburden	0	30	
Gray Rock	30	250	x
water at 56'			
Well #1 250' Dry (backfilled)			

NUMBER OF UNSUCCESSFUL WELLS: 1

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 LIC. NO.: MWD 399

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO.: MWD 241

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

GROUTING RECORD
WELL HAS BEEN GROUTED (Circle Appropriate Box): yes (Y) no (N)

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT (CM) BENTONITE CLAY (BC)

NO. OF BAGS 8 NO. OF POUNDS 800

GALLONS OF WATER 48

DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 32 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)!	Total depth of main casing (nearest foot)
PL	6	35

OTHER CASING (if used)

EACH CASING	diameter inch	depth (feet) from	to

SCREEN RECORD
screen type or open hole — insert appropriate code below

ST STEEL | BR BRASS BRONZE | HO OPEN HOLE | PL PLASTIC | OT OTHER

C 2

EACH SCREEN	DEPTH (nearest ft.)		
1	HO	35	250
2			
3			

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 ____

TELESCOPE CASING ____ LOG INDICATOR ____ OTHER DATA ____

C 3

PUMPING TEST
HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min.) 10.0

METHOD USED TO MEASURE PUMPING RATE Submersible

WATER LEVEL (distance from land surface)

BEFORE PUMPING 28 ft.

WHEN PUMPING 51 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

PUMP INSTALLED
DRILLER WILL INSTALL 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) ____

PUMP HORSE POWER ____

PUMP COLUMN LENGTH (nearest ft.) ____

CASING HEIGHT (circle appropriate box and enter casing height)

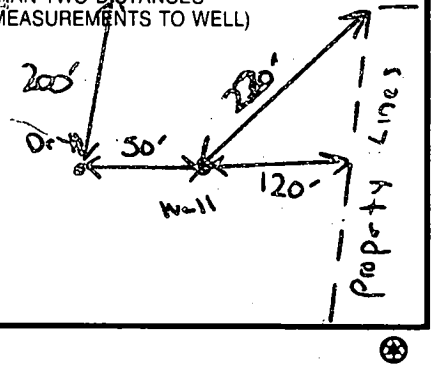
(+) above LAND SURFACE

(–) below

1 (nearest) foot

LOCATION OF WELL ON LOT I-70

SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND /OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)



COUNTY

Page 1 of 1

Review OH SRH 6/4/99

Date 4-28-99

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 94-2214

Location of property (road) Sand Hill Road

Subdivision Sand Hill Landing Lot 3 Block ____ Plat ____ Sec. ____

Well Driller Paul M. Fabrizak Owner C.A.B. Properties

Depth of well 250'

Distance of measuring point (M.P.) above ground 1'

Static water level (S.W.L.) below M.P. 28'

I. *High rate pumping -- reservoir drawdown*

Time pump started 0800 Pumping rate 12.50

Total time 15 min to reach pumping water level 34 ft. below M.P.

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

TIME (in 15 minute intervals	WATER LEVEL below M.P.	PUMPING RATE time to fill 5 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
0800	28'	24		12.50
0815	34'	25		12.0
0830	35'	25		12.0
0845	35'	25		12.0
0900	36'	26		11.53
0915	36'	26		11.53
0930	36'	26		11.53
0945	40'	27		11.11
1000	47'	28		10.71
1015	51'	30		10.0
1030	51'	30		10.0
1045	51'	30		10.0
1100	51'	30		10.0

HD-224

Page ___ of ___ Missed Test on 4/27 Review ___
Date ___ Static 28 Final water level 61 10gpm

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 94-2214
Location of property (road) Sand Hill Road
Subdivision Sand Hill Landing Lot 3 Block ___ Plat ___ Sec. ___
Well Driller Paul M. Fabrizak Owner C.A.B. Properties

Depth of well ___
Distance of measuring point (M.P.) above ground ___
Static water level (S.W.L.) below M.P. 28

I. High rate pumping -- reservoir drawdown

Time pump started ___ Pumping rate ___
Total time ___ to reach pumping water level ___ ft. below M.P.

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

TIME (in 15 minute intervals	WATER LEVEL below M.P.	PUMPING RATE time to fill 5 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)

HD-224

EMERGENCY/TEMP NO. IF ANY

B 1 | 8833 | SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND
PERMIT TO DRILL WELL
please print or type

STATE PERMIT NUMBER: HO-94-2214

fill in this form completely

Date Received (APA): 03 25 99 (MM DD YY)

OWNER INFORMATION

C. A. B. Properties (Last Name / Owner / First Name)

2701 Woodridge Ct (Street or RED)

West Friendship MD 21794 (Town / State / Zip)

DRILLER INFORMATION

Paul M. Faliszak — MW D399 (Driller's Name / License No.)

G. Edgar Harr Sons' Corp (Firm Name)

12047 Falls Rd Cockeysville 21030 (Address)

Signature — 3/23/99 (Date)

B 2 WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.): 5

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY): 750

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- (D) DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
- (F) FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION
- (I) INDUSTRIAL, COMMERICIAL, DEWATERING
- (P) PUBLIC WATER SUPPLY WELL
- (T) TEST, OBSERVATION, MONITORING
- (G) GEO-THERMAL

APPROXIMATE DEPTH OF WELL: 200 FEET

APPROXIMATE DIAMETER OF WELL: 6 NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) — JETTED — Jetted & DRIVEN

AIR-ROTary — (AIR-PERcussion) — ROTARY (Hydraulic Rotary)

CABLE — REVerse-ROTary — DRive-POINT

other

REPLACEMENT OR DEEPENED WELLS (CIRCLE APPROPRIATE BOX)

- (N) THIS WELL WILL NOT REPLACE AN EXISTING WELL
- (Y) THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
- (S) THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
- (D) THIS WELL WILL DEEPEN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENED (IF AVAILABLE)

Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROP. PERMIT NUMBER: GAP

PERMIT No. HO-94-2214

B 3 LOCATION OF WELL

Howard (COUNTY)

Sand Hill Landing (SUBDIVISION)

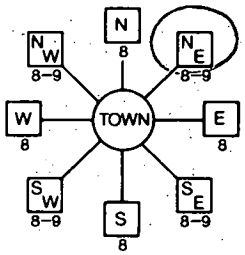
SECTION — LOT 3

West Friendship (NEAREST TOWN)

MILES FROM TOWN (enter 0 if in town): 1 MI

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Sand Hill Road (NEAR WHAT ROAD)

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): NORTH (N) WEST (W) (32) (E) EAST (S) SOUTH

DISTANCE FROM ROAD: 900 FT (ENTER FT OR MI)

TAX MAP: 16 BLK: 7 PARCEL 66

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard (COUNTY NAME) — A 5933S (COUNTY NO.)

STATE SIGNATURE — INSERT S → S

DATE ISSUED: 03 31 99 (MM DD YY)

Steven P. Krieg — 03 31 00 (CO SIGNATURE — EXP. DATE)

NORTH GRID: S36 000

EAST GRID: 0819 000

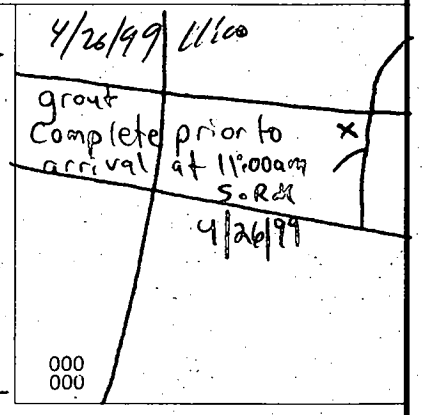
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER
1. Well
2.
3.

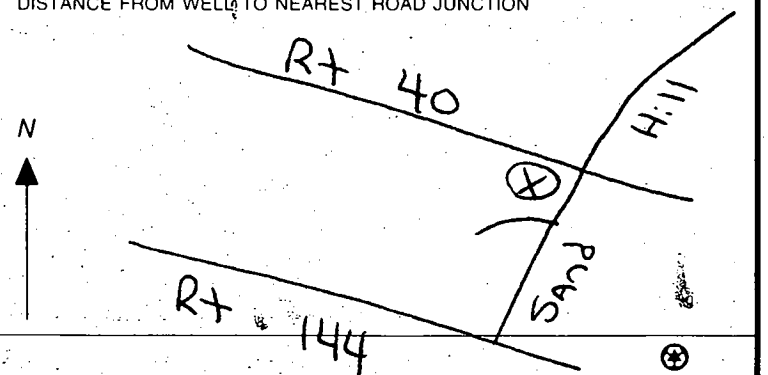
WRITE THE BOX NUMBER FROM THE MAP HERE

E 819

N S36



DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION



SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

DENV-Permit 97

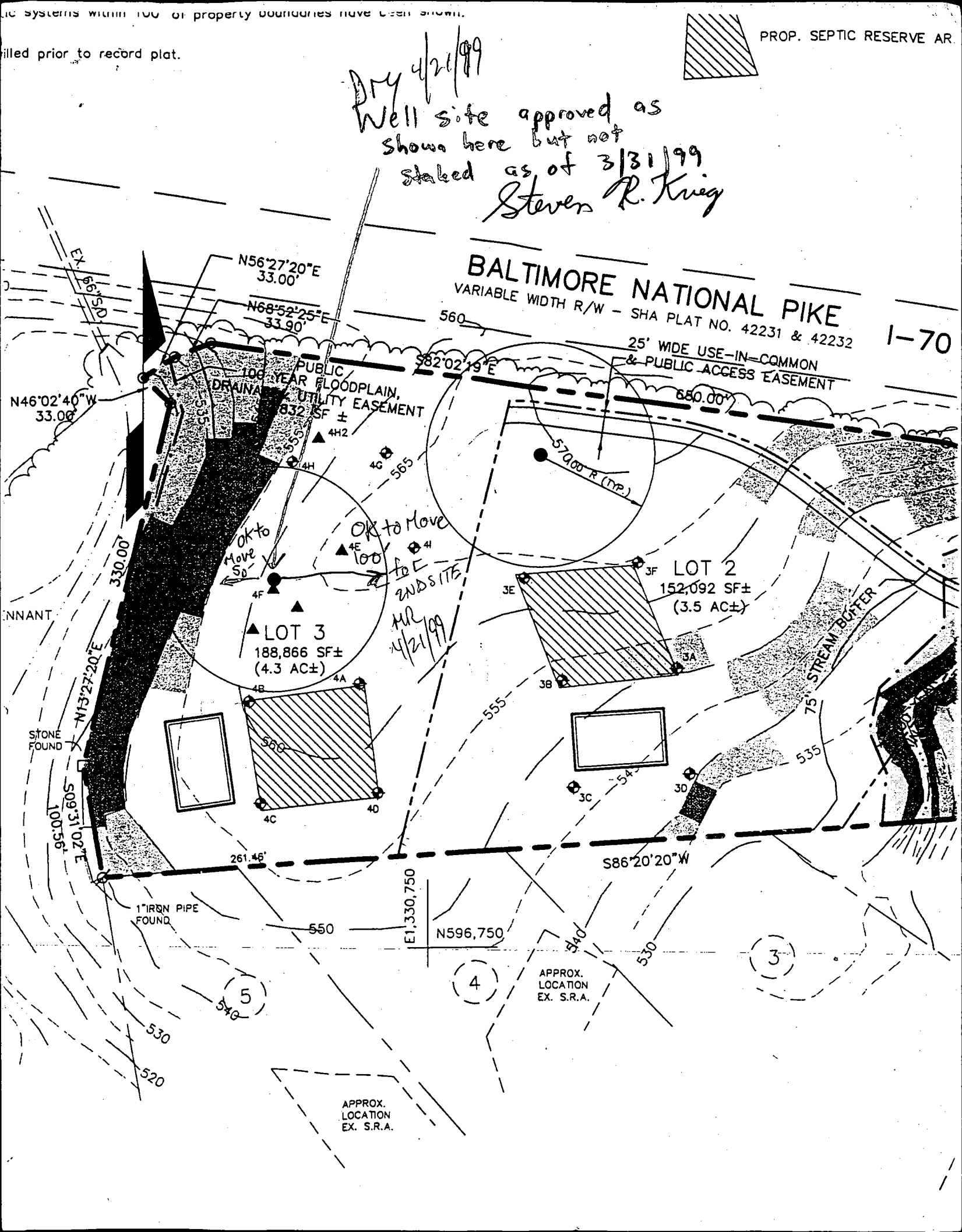
② COUNTY

ic systems within 100' of property boundaries have been shown.

illed prior to record plat.

PROP. SEPTIC RESERVE AR.

DY 4/21/99
Well site approved as shown here but not staked as of 3/31/99
Steven R. Krieg



HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043
~~461-9933~~
410-313-2640

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation ✓
Replacement ____

Receipt # ____
Date ____

Name of Installer J Joseph Garthland Inc Telephone 675-2400

License Number ____
Certified Well Pump Installer ____ Well Driller ____ Registered Plumber 1713

Name of Property Owner Parsons Chimney Homes Telephone ____
Subdivision Sand Hill Landing Lot # 3 Well Tag # HO-94-2218
Site Address ____

Pump
1. Type
   a. Deep well jet ____
   b. Shallow well jet ____
   c. Submersible ✓
2. Make Goulds
3. Model # 7SB07
4. Capacity 7 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 3/4
2. RPM 3600
3. Voltage ____
   a. 110 ____
   b. 220 ✓

Pitless Adapter
1. Make Harvard
2. Model # ____
3. Depth 48"

Tank
1. Capacity 42
2. Pressure relief valve? Yes

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

Well data
1. Depth 270 ft.
2. Yield ____ GPM
3. Static water level 90 ft.
4. Will water supply be disinfected by installer? ____

WP - pitless adapter OK @ 3½ ft
2 pipe Cap + PVC conduit pipe OK
AP 10/3/99

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).

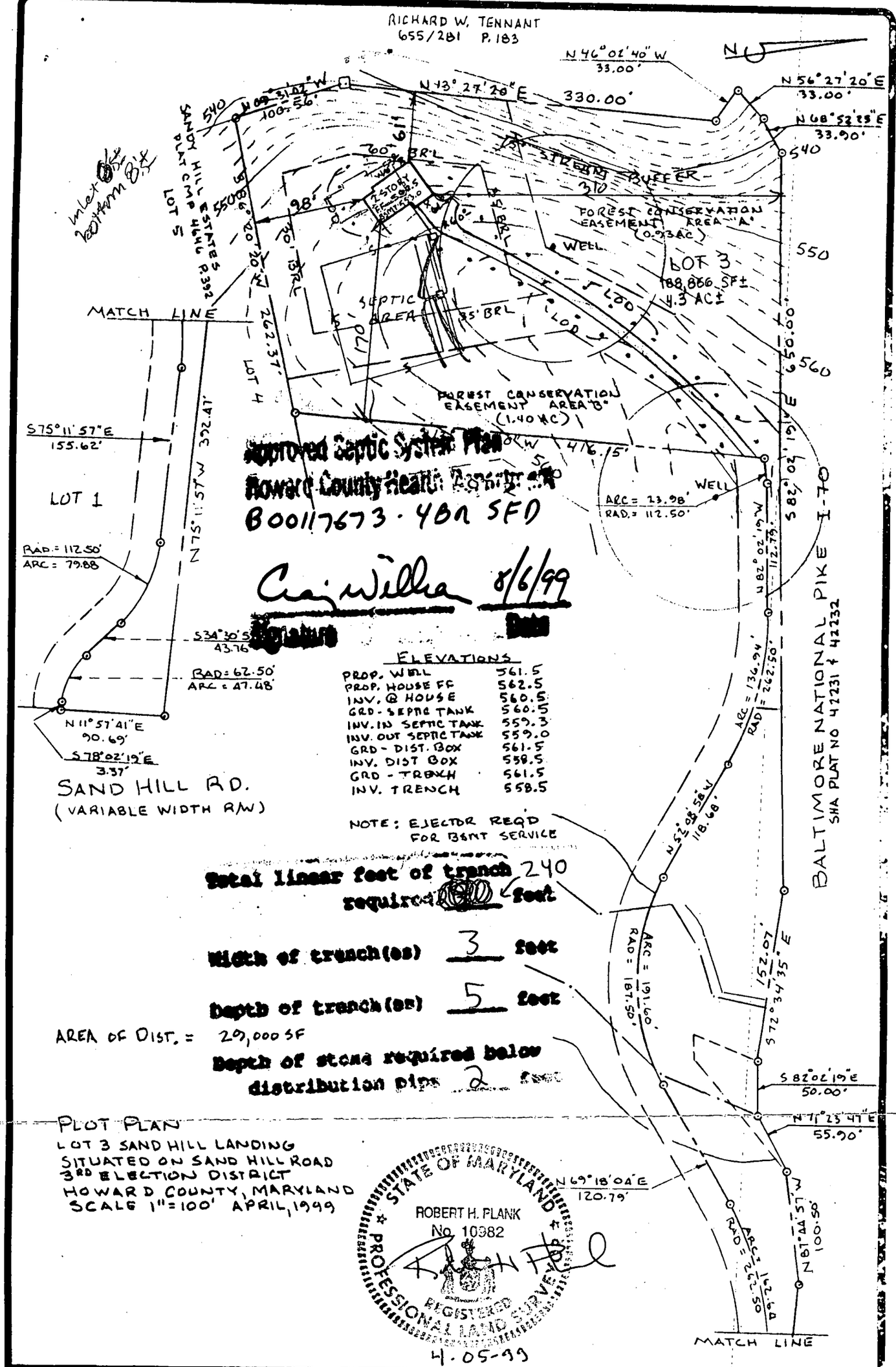
All information given above is true to the best of my knowledge.

Signature of Applicant: ____

Date: ____

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

HD-215



Approved Septic System Plan
Howard County Health Department
B00117673 · 4BR SFD

Cai Willa 8/6/99
Signature Date

ELEVATIONS	
PROP. WELL	561.5
PROP. HOUSE FF	562.5
INV. @ HOUSE	560.5
GRD - SEPTIC TANK	560.5
INV. IN SEPTIC TANK	559.3
INV. OUT SEPTIC TANK	559.0
GRD - DIST. BOX	561.5
INV. DIST BOX	558.5
GRD - TRENCH	561.5
INV. TRENCH	558.5

NOTE: EJECTOR REQ'D FOR BSMT SERVICE

Total linear feet of trench required 240 feet

Width of trench(es) 3 feet

Depth of trench(es) 5 feet

AREA OF DIST. = 29,000 SF

Depth of stone required below distribution pipe 2 feet

PLOT PLAN
LOT 3 SAND HILL LANDING
SITUATED ON SAND HILL ROAD
3RD ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
SCALE 1"=100' APRIL, 1999

STATE OF MARYLAND
ROBERT H. PLANK
No. 10382
REGISTERED
PROFESSIONAL LAND SURVEYOR

4-05-99

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	99 SY 0901

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

STATE OF MARYLAND
ROBERT H. PLANK
No. 10982
REGISTERED
PROFESSIONAL LAND SURVEYOR

4-3-99

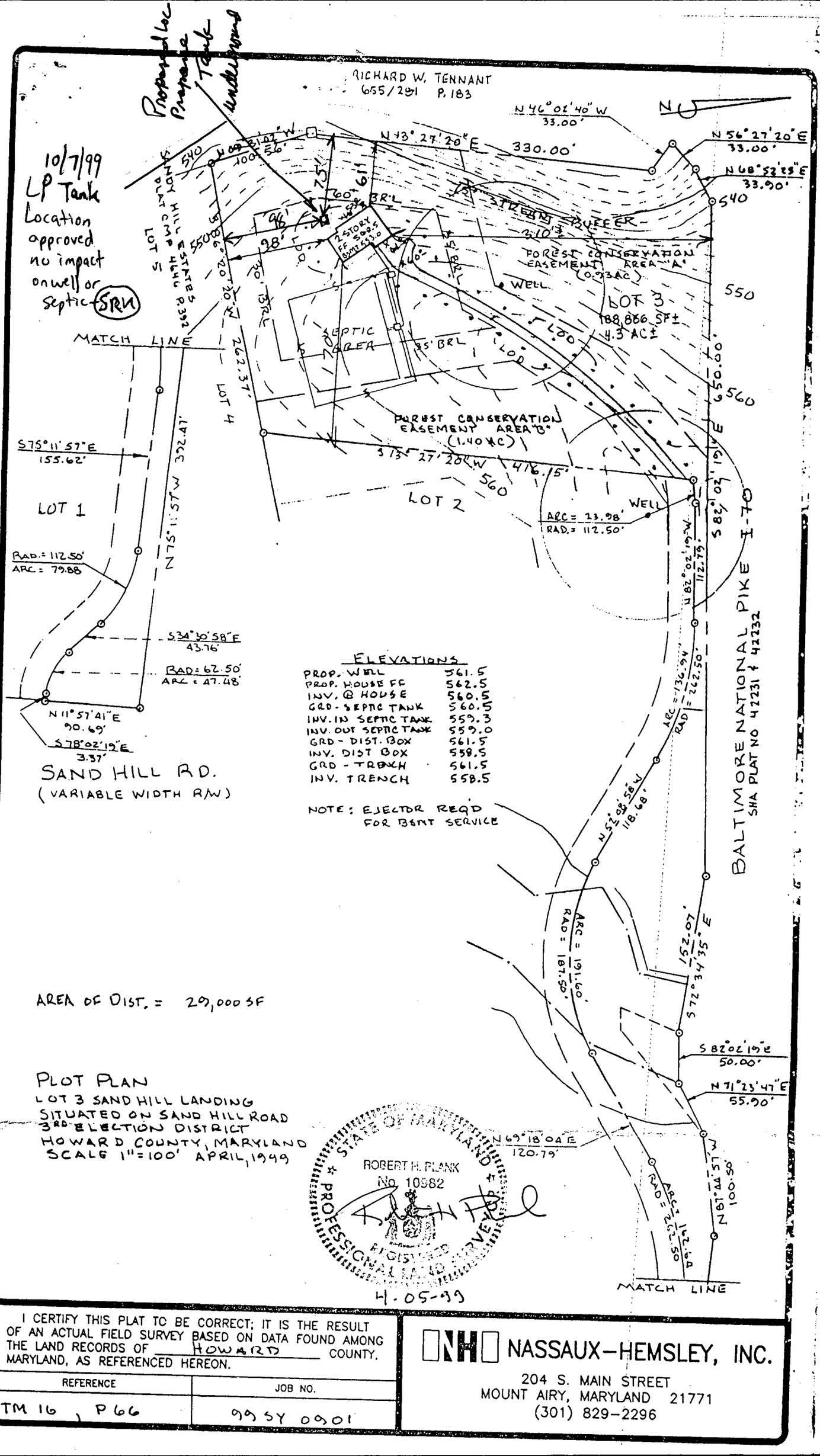
WALL CHECK
LOT 3 SAND HILL LANDING
SITUATED ON SAND HILL ROAD
3RD ELECTION DIST. CT
HOWARD COUNTY, MARYLAND
SCALE 1" = 100' SEPT. 1999

2390 Sand Hill Rd.
HCCC BP # BOC 1176 73

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	99 SY 00,01

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



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	99 SY 0901

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