

LAYOUT \_\_\_\_\_ INSP 4 \_\_\_\_\_  
INSP 2 \_\_\_\_\_ INSP 5 \_\_\_\_\_  
INSP 3 \_\_\_\_\_ INSP 6 \_\_\_\_\_

ISSUE DATE: 02/01/2005

P 521965

APPROVAL DATE: 5/27/05

A 513361

**PERMIT  
INDEXED  
SANDMOUND SYSTEM  
ON-SITE SEWAGE DISPOSAL SYSTEM  
HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH**

**05-346320**

Hatfields Equipment IS PERMITTED TO INSTALL ☒ ALTER ☐

ADDRESS: 13785 Burntwoods Road, Glenelg PHONE NUMBER: 410-531-6773

SUBDIVISION: Clarksville Ridge LOT NUMBER: 57

ADDRESS: 6714 Whitegate Road PROPERTY OWNER: S. Wellington/R. Hopkins

SEPTIC TANK CAPACITY (GALLONS): 1500 OUTLET BAFFLE FILTER REQUIRED ☒

PUMP CHAMBER CAPACITY (GALLONS): 1000 COMPARTMENTED TANK REQUIRED ☐

NUMBER OF BEDROOMS: 3

*Trench Width - 3'  
Inlet - 1.5'  
Bottom - 5'*

LOCATION:	<del>Sand mound to be installed only from the sides.</del> <i>150' of Trench Total</i>
NOTES:	<del>Sand mound to be installed according to approved sand mound plan. Reserve area to be staked and fenced off to prevent vehicle intrusion.</del>

PLANS APPROVED: MER DATE: 5/27/04

NOTES: PERMIT VOID AFTER 2 YEARS  
CONTRACTOR IS RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS  
WATERTIGHT SEPTIC TANKS REQUIRED  
ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL UNLESS SPECIFICALLY AUTHORIZED  
MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS UNLESS SPECIFICALLY AUTHORIZED  
CONTRACTOR RESPONSIBLE FOR COMPLIANCE WITH APPLICABLE REGULATIONS, GUIDELINES AND THE TERMS OF THIS PERMIT

**NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS  
RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM  
PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT  
ALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM**

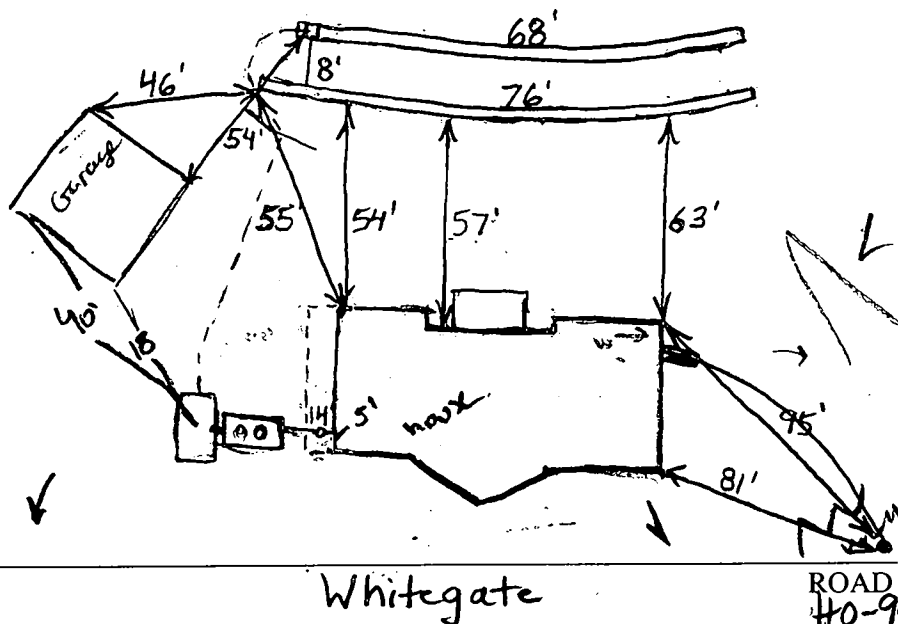
**BUILDING PERMIT SIGNED  
AND RETURNED**

*22505 BOD 152324-416 PROPOSED TANK*

A513361

NOT TO SCALE

3.5+ Loads of Stone Used



# TRENCH/DRAINFIELD DATA

WIDTH 3' INLET 1.5'-3' BOTTOM 5'

NUMBER OF TRENCHES 2

TOTAL LENGTH 144'

ABSORPTION AREA 432+2.75 Sidwall

DISTRIBUTION BOX LEVEL Levelers

DISTRIBUTION BOX BAFFLE Yes

DISTRIBUTION BOX PORT To Be Installed

## SEPTIC TANK DATA

SEPTIC TANK 1 LEVEL ✓

CAPACITY 1500 GAL

SEAM LOC top

TANK LID DEPTH 1'

BAFFLES ✓

BAFFLE FILTER ✓

MANHOLE LOC Corner

6" PORT LOC None

WATERTIGHT TEST N/A

SEPTIC TANK 2 LEVEL 1000 ✓

CAPACITY 1000 GAL

SEAM LOC Top

TANK LID DEPTH 1'

BAFFLES ?

BAFFLE FILTER No

MANHOLE LOC Middle?

6" PORT LOC None

WATERTIGHT TEST No

PRE-CONSTRUCTION

INSTALLATION 2/18/05 - Installation of 2 tanks w/ filters + baffle. OK

2 covers (PAV) 4/19/05 Field run topography in sand mound area not correct. Mound cannot be installed correctly.

To put in 2 trenches at very top of mound area instead.

To maximize use of area. System to be oversized. (BB)

4/20/05 Trenches have less sidewall in middle because contour is high in middle. Need pump and alarm test. O.K. to cover everything. Well drilled in swale downhill of trenches.

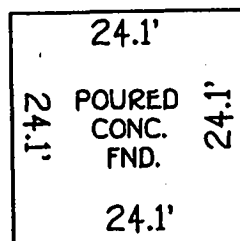
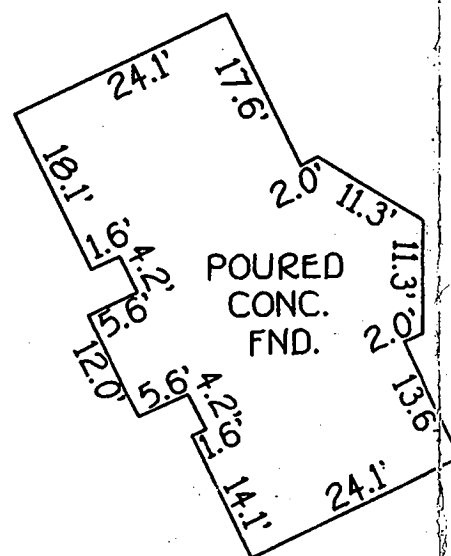
FINAL INSPECTOR J. Coughlin

DATE OF APPROVAL 5/27/05

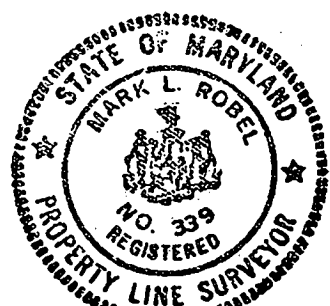
5/27/05 Pump & Alarm are good. Told homeowner to check into UV light filter for well. Probably will do that since it is ~300' directly downslope of Septic. (GAC)

# GENERAL NOTES:

- 1) THIS LOCATION DRAWING IS PREPARED FOR THE BENEFIT OF THE CLIENT SIGNING THE HOUSE LOCATION SURVEY APPROVAL FORM INsofar AS IT IS REQUIRED BY A LENDER OR TITLE INSURANCE COMPANY OR ITS AGENTS IN CONNECTION WITH THE COMTEMPLATED TRANSFER, FINANCING OR REFINANCING OF THE PROPERTY SHOWN HEREON. UNLESS INDICATED AS BEING A BOUNDARY SURVEY, THIS LOCATION DRAWING IS NOT INTENDED FOR USE IN THE ESTABLISHMENT OF PROPERTY LINES AND IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATIONS OF FENCES, GARAGES, BUILDINGS OR OTHER EXISTING OR FUTURE IMPROVEMENTS. AS A RESULT, THIS LOCATION DRAWING DOES NOT PROVIDE FOR ACCURATE IDENTIFICATION OF PROPERTY LINES, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING FOR RE-FINANCING.
- 2) SUBJECT PROPERTY IS SHOWN IN ZONE C ON THE NATIONAL FLOOD INSURANCE PROGRAM FLOOD INSURANCE RATE MAP OF HOWARD COUNTY, MARYLAND, COMMUNITY PANEL No. 2400440030B EFFECTIVE DEC. 4, 1986.
- 3) THE OFFSETS FROM BUILDING LINE TO PROPERTY LINE AS SHOWN ON THE PLAT HEREON ARE TO AN ACCURACY OF PLUS OR MINUS 1' (±)
- 4) NO TITLE REPORT FURNISHED. SUBJECT TO ALL EASEMENTS, RIGHTS OF WAY AND CONDITIONS OF RECORD.
- 5) THE EXISTING WELL(S) SHOWN ON THIS PLAN (IDENTIFIED WITH THE ATTACHED WELL TAGNUMBER HO-94 - 3611 HAS BEEN FIELD LOCATED BY FISHER, COLLINS AND CARTER, INC. PROFESSIONAL LAND SURVEYORS AND IS ACCURATELY SHOWN.



DETAIL:  
1"=20'

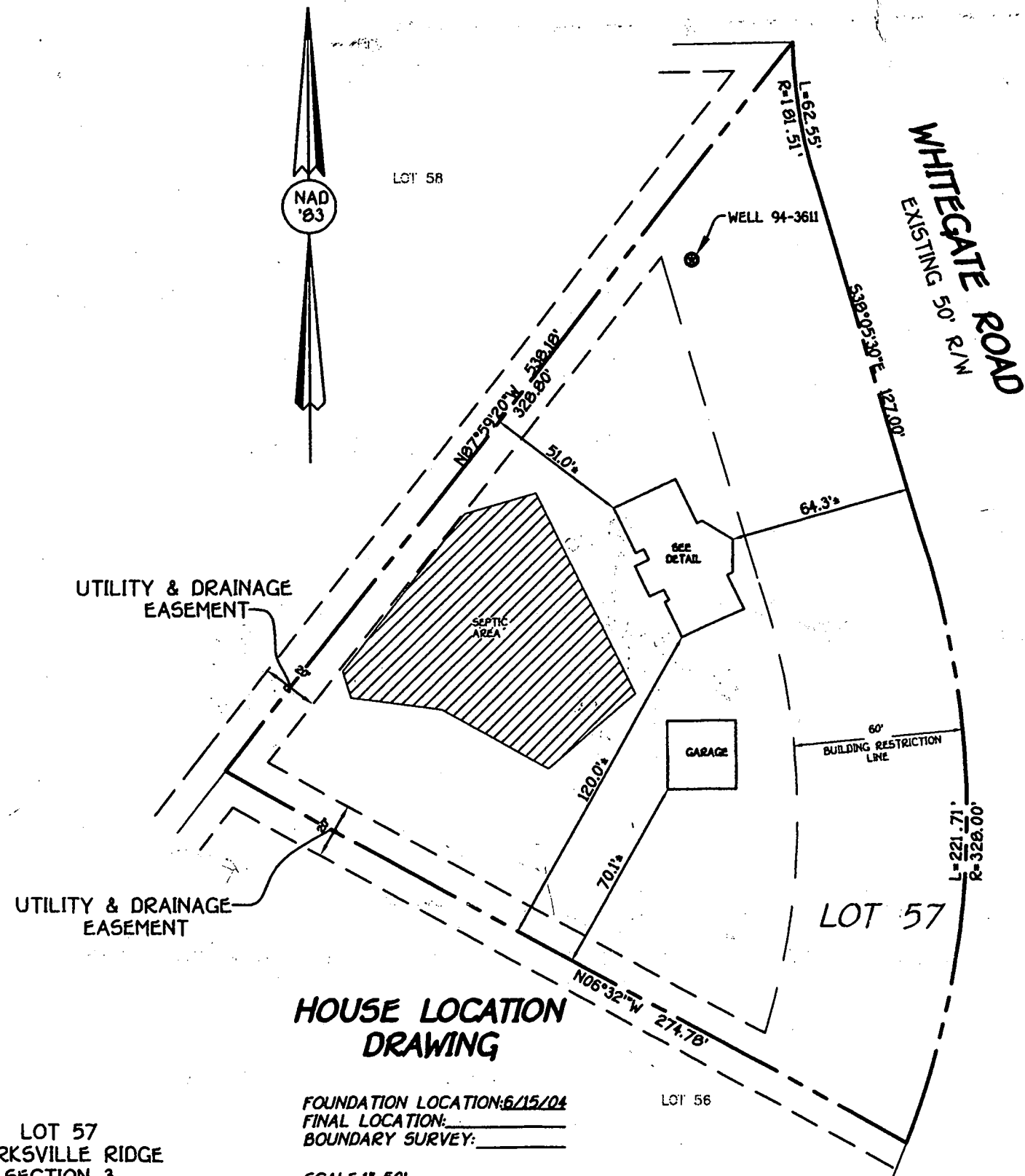


**FISHER, COLLINS & CARTER, INC.**  
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS

CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE  
ELLCOTT CITY, MARYLAND 21042  
(410) 461 - 2855

*Mark L. Robel*  
PROFESSIONAL LAND SURVEYOR DATE 6/30/04  
REG. • 339

LOT 57  
CLARKSVILLE RIDGE  
SECTION 3  
(PLAT REF.: PLAT \*6/ FOLIO 75)  
FIFTH ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND



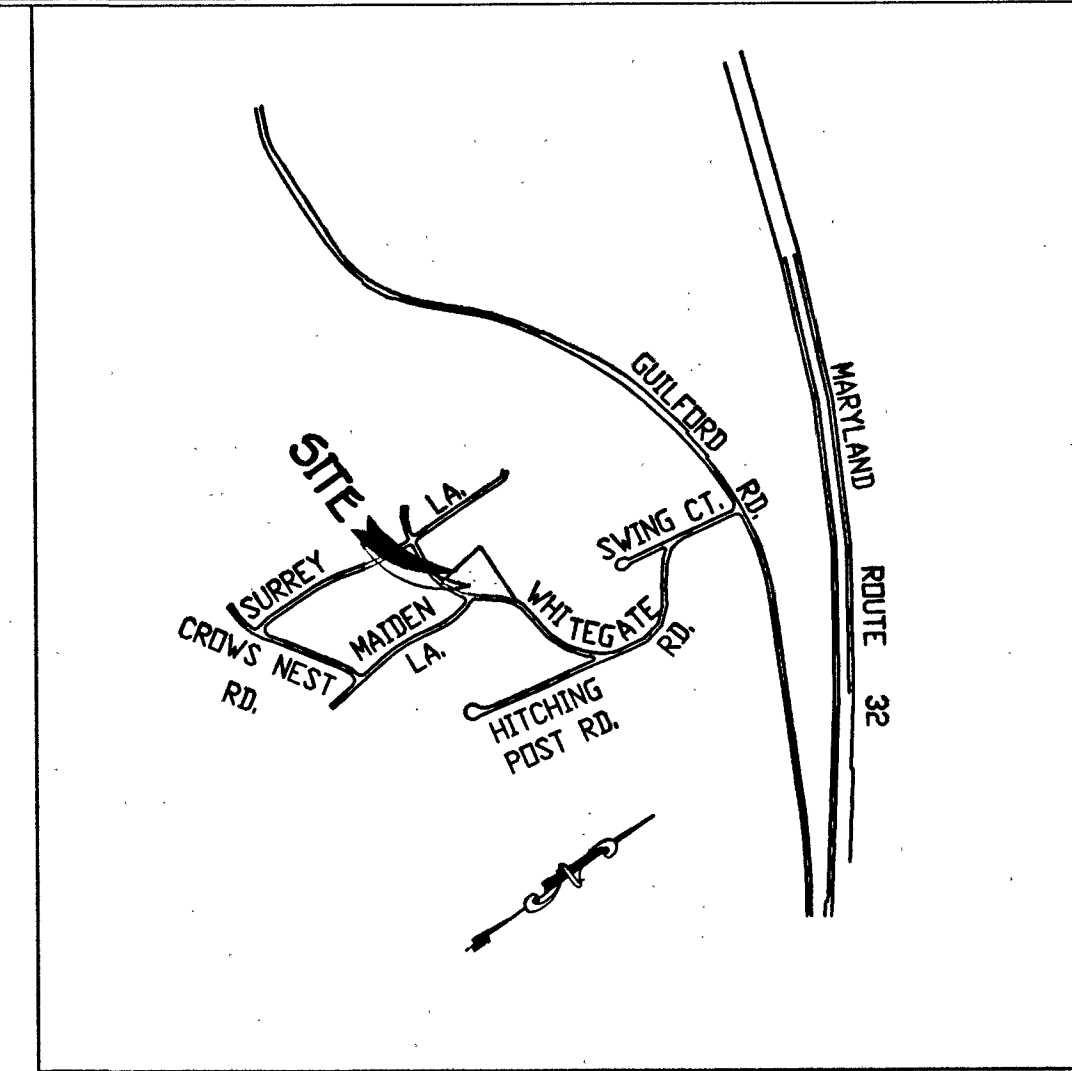
## HOUSE LOCATION DRAWING

FOUNDATION LOCATION: 6/15/04  
FINAL LOCATION: \_\_\_\_\_  
BOUNDARY SURVEY: \_\_\_\_\_

SCALE: 1"=50'  
DATE: 6/30/04  
DRAWN BY: VLL  
CHECKED BY: MLR  
PROJECT No.: 61906

\*6714 WHITE GATE ROAD  
B.R.L. = BUILDING RESTRICTION LINE  
TOP OF FOUNDATION ELEV. 413.5'±

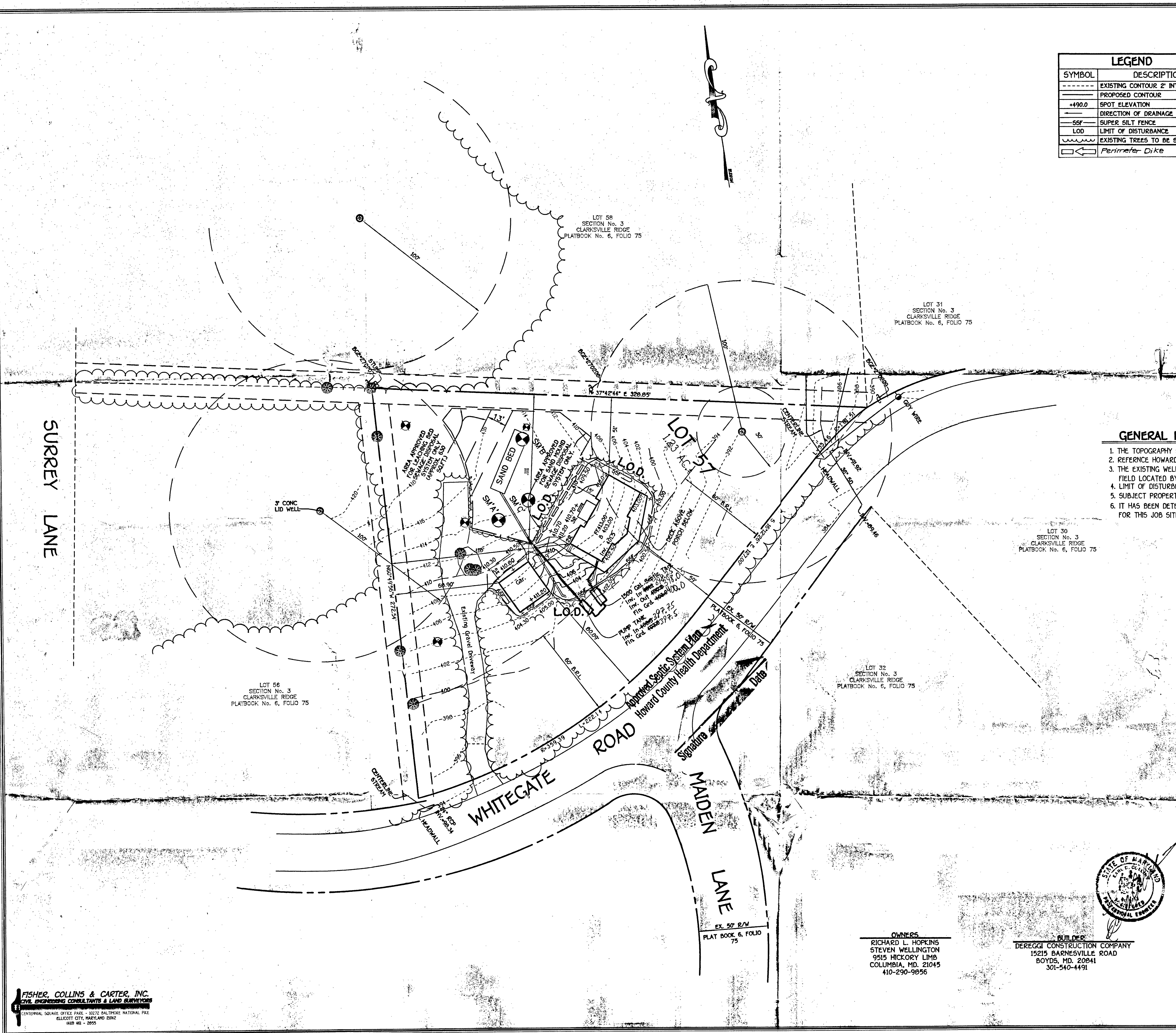
SYMBOL	DESCRIPTION
---	EXISTING CONTOUR 2' INTERVAL
---	PROPOSED CONTOUR
+490.0	SPOT ELEVATION
---	DIRECTION OF DRAINAGE
---	SUPER SILT FENCE
---	LOD
---	LIMIT OF DISTURBANCE
---	EXISTING TREES TO BE SAVED
---	Perimeter Dike



VICINITY MAP  
SCALE: 1" = 1200'

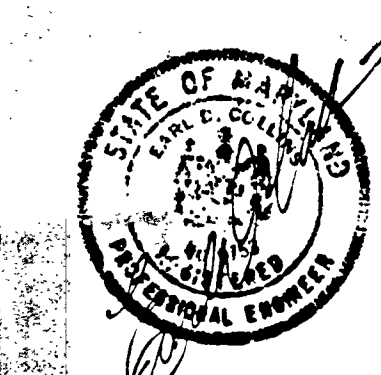
GENERAL NOTES:

1. THE TOPOGRAPHY SHOWN HEREON WAS FIELD RUN BY FISHER, COLLINS AND CARTER, INC., IN DEC. 2004.
2. REFERENCE HOWARD COUNTY PLAT #75.
3. THE EXISTING WELL SHOWN ON THIS PLAN, IDENTIFIED BY HO. CO. WELL TAG NUMBER 94-3611 HAS BEEN FIELD LOCATED BY FISHER, COLLINS AND CARTER, INC AND IS ACCURATELY SHOWN.
4. LIMIT OF DISTURBED AREA: 0.1131 ACRES OR 4926 S.F.
5. SUBJECT PROPERTY ZONED RD50.
6. IT HAS BEEN DETERMINED BY FISHER, COLLINS AND CARTER, INC. THAT A CULVERT PIPE IS NOT NECESSARY FOR THIS JOB SITE. THE DRIVEWAY IS EXISTING AND THERE IS NO CULVERT ON THIS SIDE OF THE STREET.



Approved Septic System Plan  
Howard County Health Department

Signature: *Mark E. Rupp*  
Date: 5/27/04



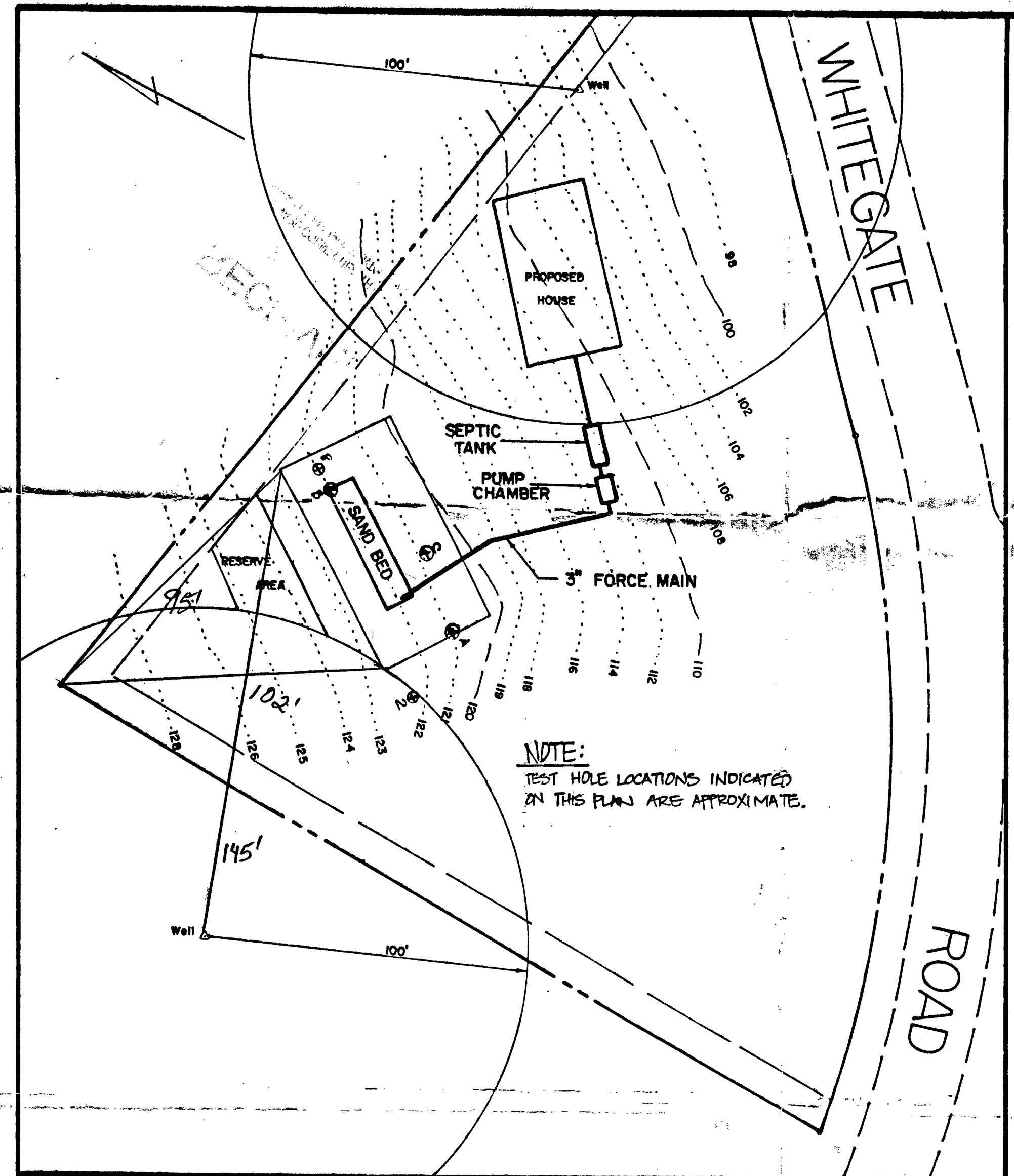
PLAN TO ACCOMPANY BUILDING PERMIT  
LOT 57  
**CLARKSVILLE RIDGE**  
SECTION 3

TAX MAP NO.: 35 GRID NO.: 21 PARCEL NO.: 203  
FIFTH ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND  
SCALE: 1" = 50' DECEMBER, 2003  
1/30 SHEET 1 OF 1

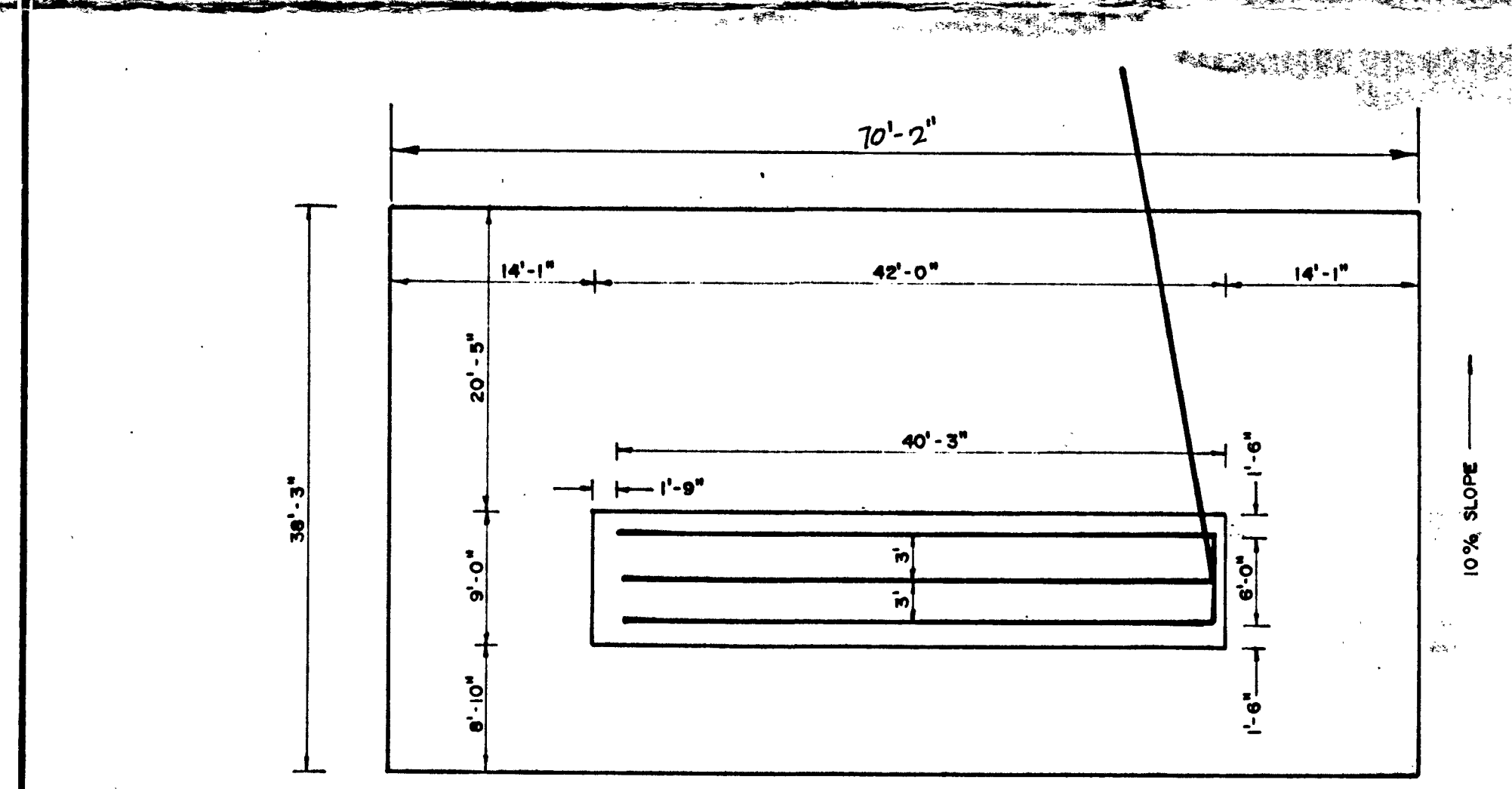
OWNERS  
RICHARD L. HOPKINS  
STEVEN WELLINGTON  
9515 HICKORY LANE  
COLUMBIA, MD. 21045  
410-290-9896

BUILDER  
DEREGGI CONSTRUCTION COMPANY  
15215 BARNESVILLE ROAD  
BOYDS, MD. 20841  
301-540-4491





**SITE PLAN**  
SCALE: 1" = 30'



**MOUND LAYOUT**  
SCALE: 1" = 10'

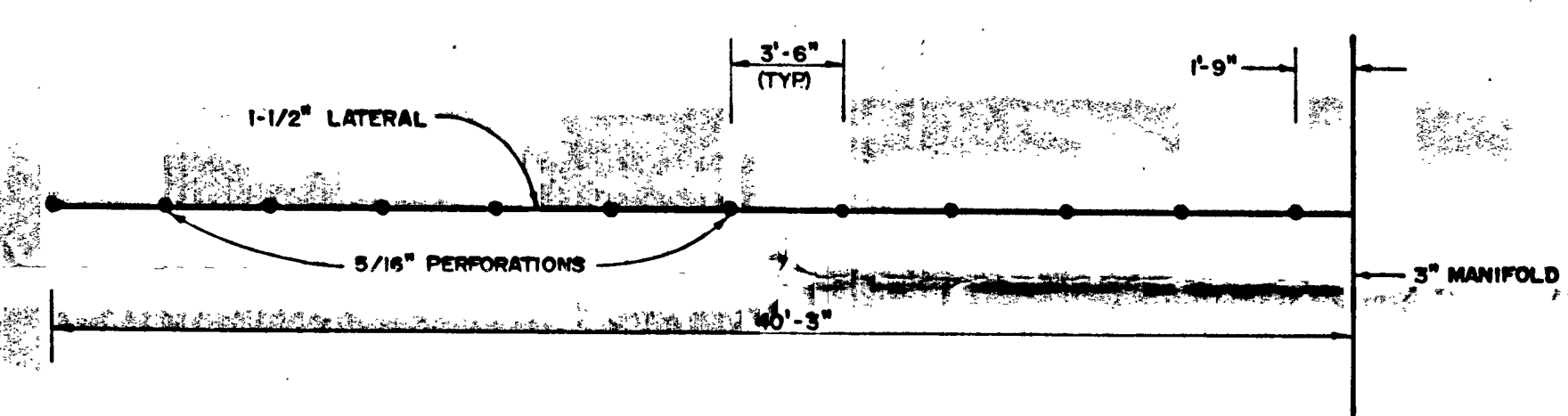
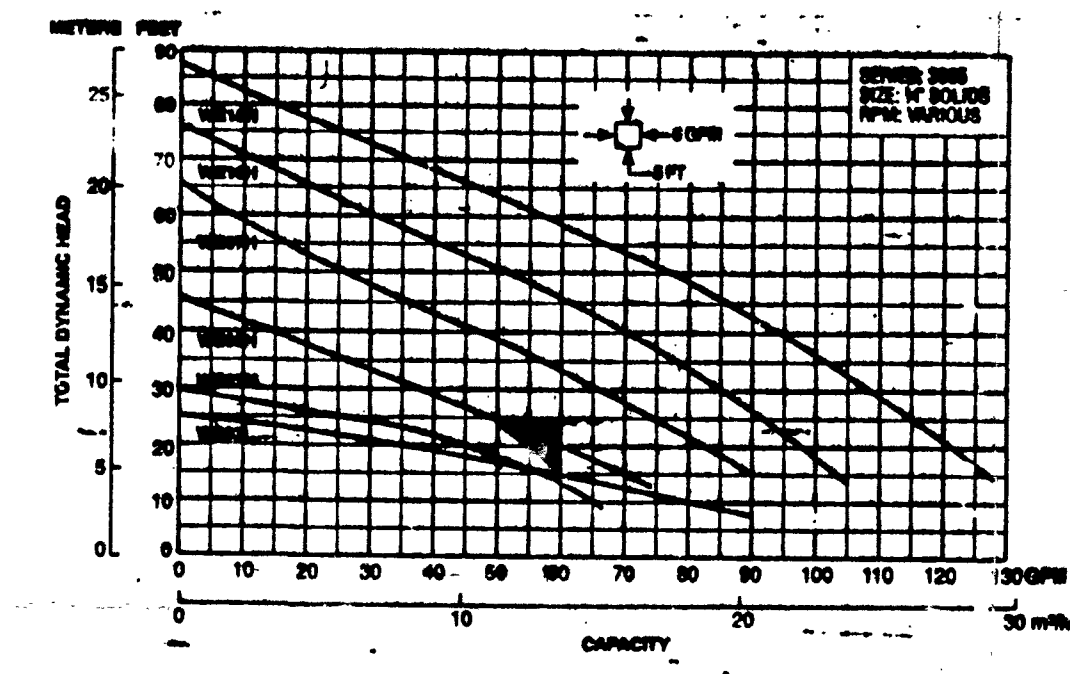
**DESIGN CRITERIA**  
3 Bed Rooms x 150 = 450 GPD  
Loading Rate: 1.2 GPD/Sq. Ft. = 375 Sq. Ft.  
Bed 9' x 42' = 378 Sq. Ft.  
1 - 1,500 GAL. Compartmented Top Seam Septic Tank  
1 - 1,000 GAL. Top Seam Pump Chamber  
Pump Rate - 36 Perforations @ 1.63 GPM = 59 GPM  
TDH - 24'

**SOIL TEST**

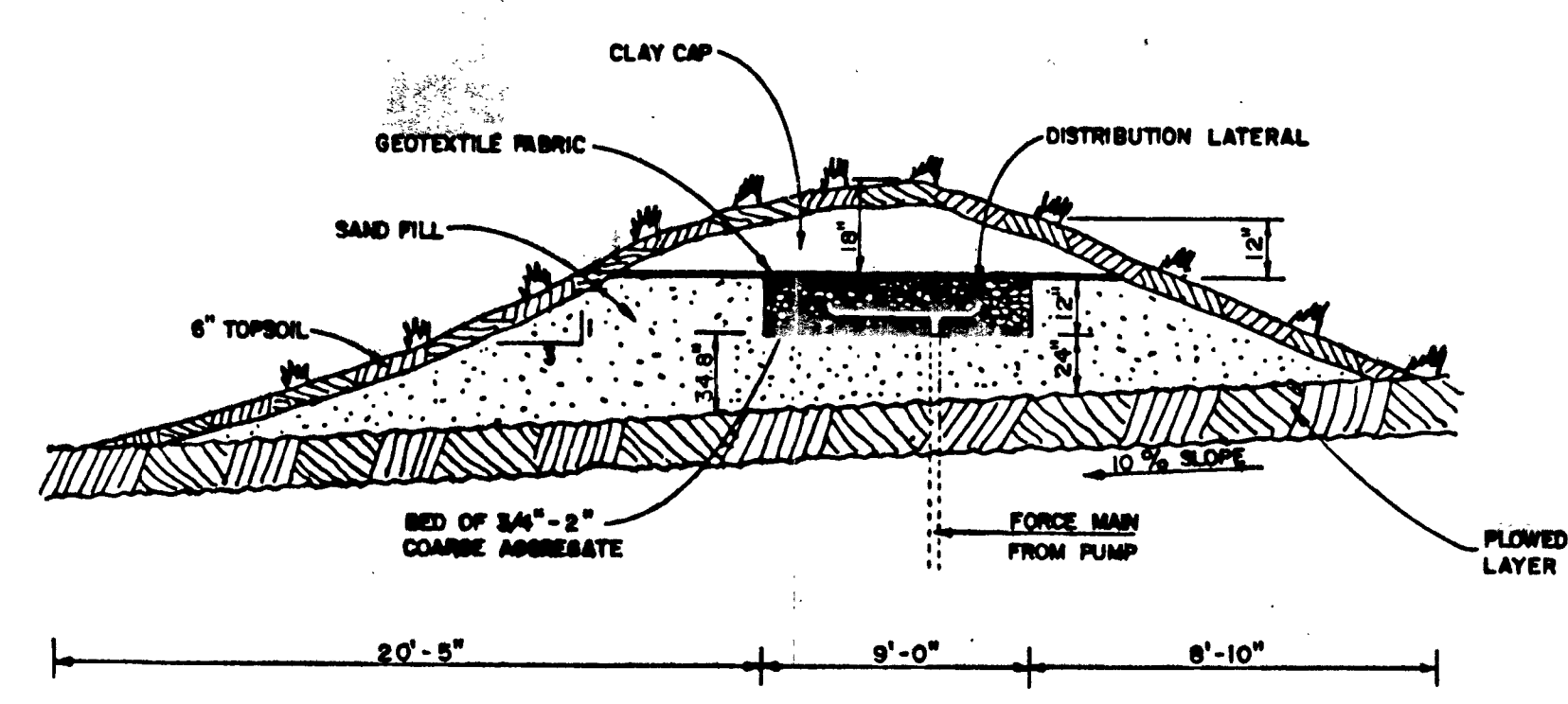
A: Depth 15" - 13.3 Min / Inch  
B: Depth 20" - 21.3 Min / Inch  
C: Depth 12" - 13.0 Min / Inch

**SPECIFICATIONS**

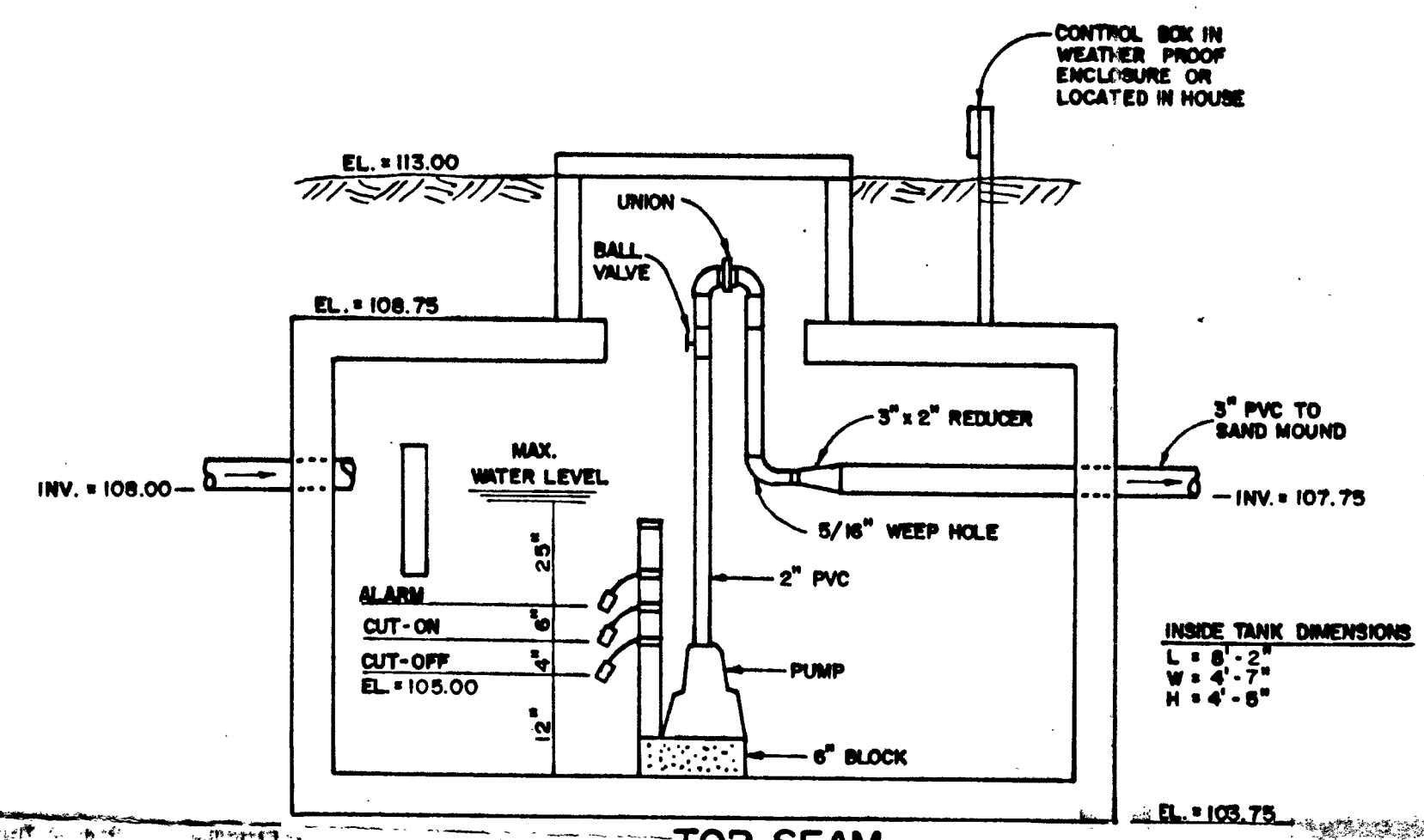
- Tank measurements and elevations are based on septic tanks and pump chambers as manufactured by Mayer Bros., Elkhridge, Md. (410) 796-1434.
- All piping to be schedule 40 PVC of sizes shown.
- The force main from the pump chamber to the sand bed is to be installed with a continuous slope back to the chamber to assure complete drainage following each pump cycle.
- A submersible pump is to remove 59 GPM against 24' TDH to be provided. Pump to be a Goulds Model 3885-WB-07H, or equal.
- A test of the pump system and distribution piping is required prior to covering the system.
- The High Water Alarm is to be on a separate circuit. Alarm to be located in the house.
- Sand Mound Area to be Accessed Only From Sides or Downhill.
- Complete Septic Reserve Area to be Fenced off at Time of BP for Soil Protection.



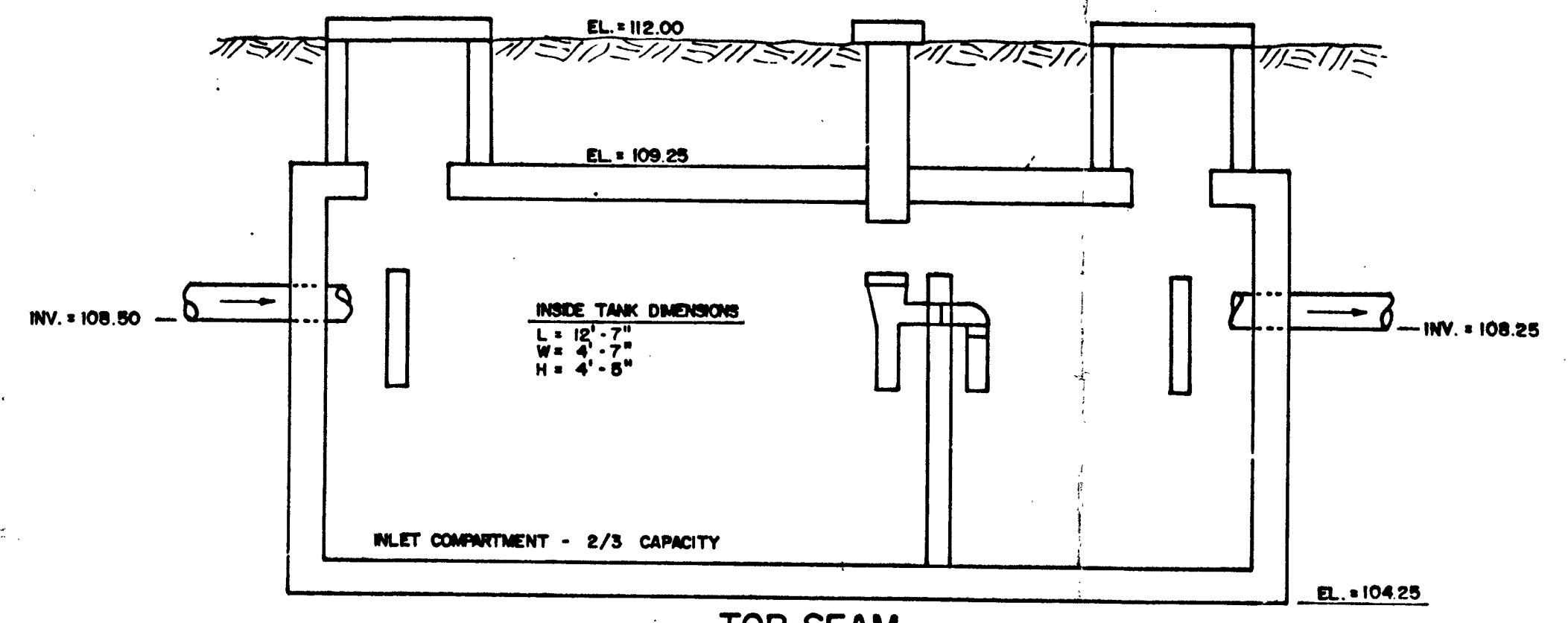
**TYPICAL LATERAL DETAIL**  
SCALE: 3/16" = 1'



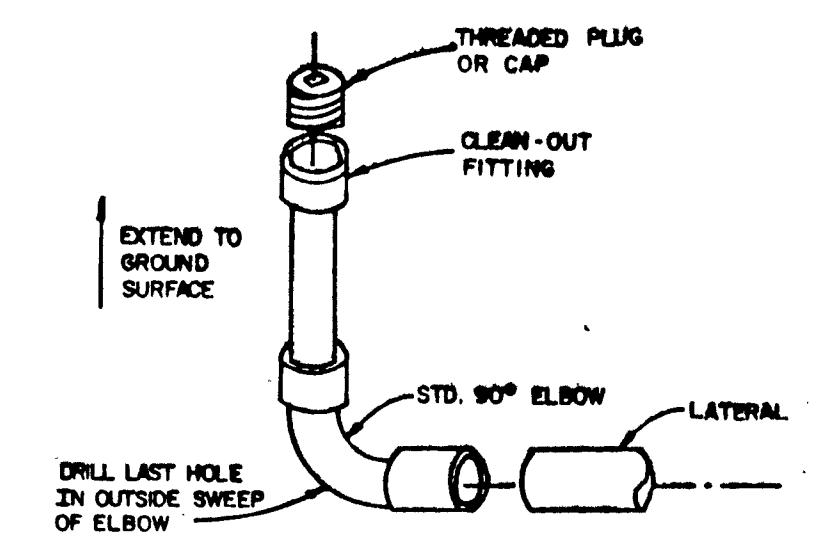
**MOUND DESIGN**  
NOT TO SCALE



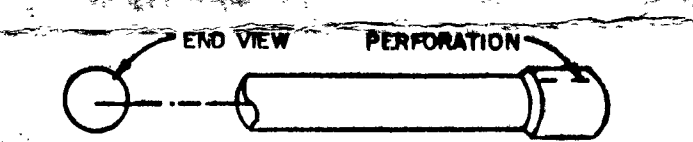
**TOP SEAM  
1000 GAL. PUMP CHAMBER**  
NOT TO SCALE



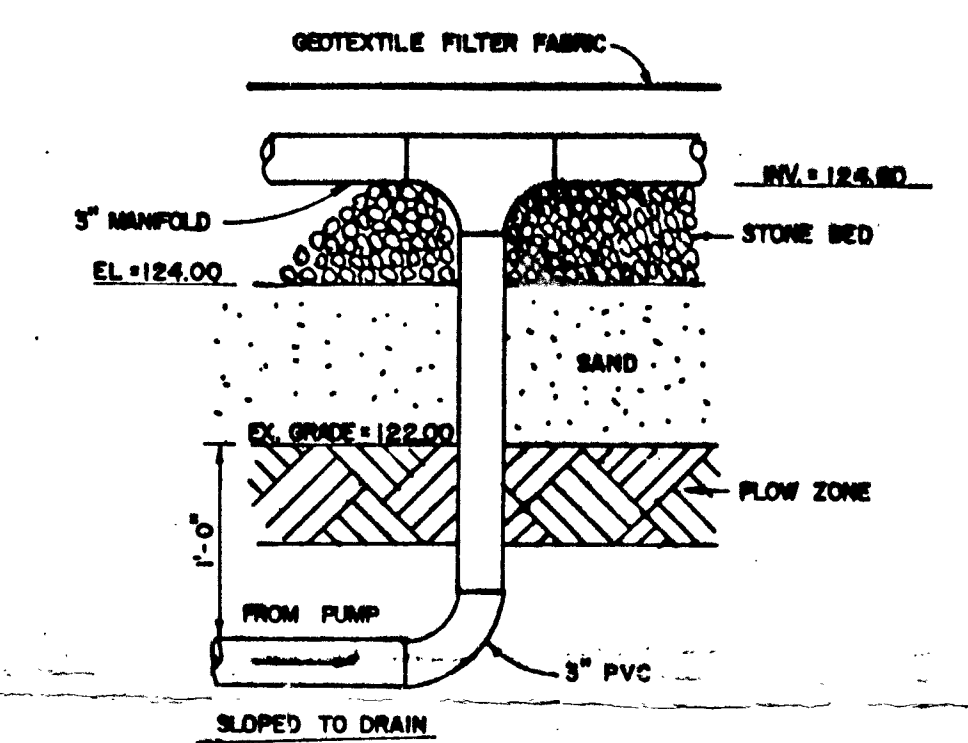
**TOP SEAM  
1500 GAL. SEPTIC TANK**  
NOT TO SCALE



**LATERAL END TURN-UP**  
USE ON LATERAL FARTHEST FROM PUMP  
NOT TO SCALE

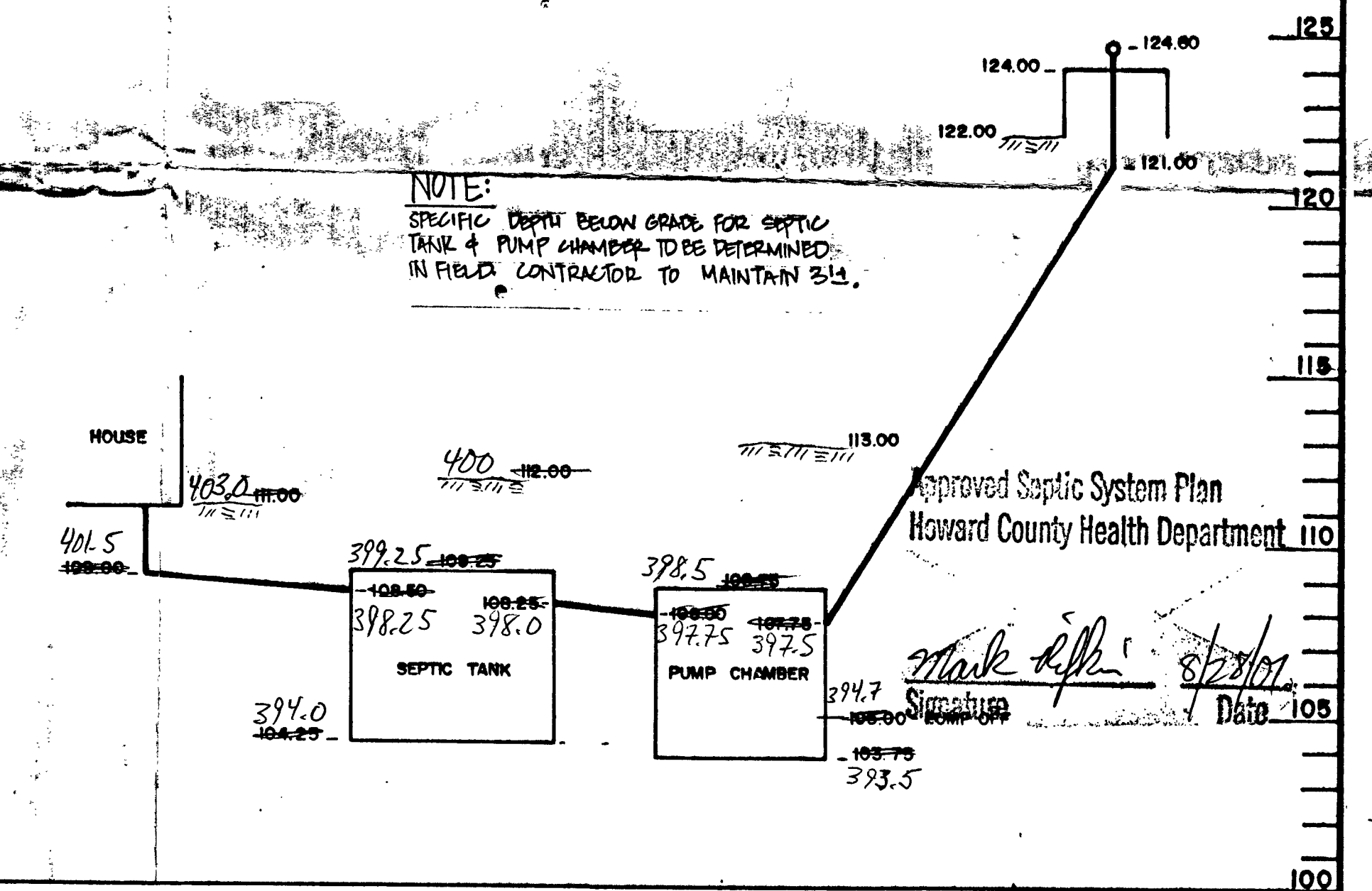


**LATERAL END CAP**  
USE ON LATERALS NOT EQUIPPED WITH TURN-UP  
NOT TO SCALE



**SUPPLY LINE - MANIFOLD DETAIL**  
NOT TO SCALE

**NOTE:**  
SPECIFIC DEPTH BELOW GRADE FOR SEPTIC TANK & PUMP CHAMBER TO BE DETERMINED IN FIELD CONTRACTOR TO MAINTAIN 3'.



**HYDRAULIC PROFILE**  
SCALE: H: 1/4" = 1'-0", V: N.T.S.



S/E ENGINEERING, INC.			
WESTMINSTER, MARYLAND			
SCALE: AS SHOWN	APPROVED:	DRWN: RSK	
DATE: JULY, 2001	JBC	DES: JBC	
CLARKSVILLE RIDGE - LOT 57			
WHITEGATE ROAD - HOWARD COUNTY			
SANDMOUND		DRAWING NO.	
		1 OF 1	

**HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
WATER AND SEWERAGE PROGRAM  
TEL: (410)313-2640 FAX: (410)313-2648**

**Information Form for the Installation of the Well Pump, Pitless Adapter, and Supply Piping**

**NOTE:** The installer is responsible for requesting an inspection prior to 9 am on the day of the desired inspection. No work is to be covered until approved by the Health Department. All installations must comply with the National Standard Plumbing Code (NSPC, as amended locally) and COMAR 26.04.14.100 Well Construction Regulations. Submission of a complete form is required prior to Use and Occupancy approval.

Company Name: Shelton Plumbing & Heat, Inc. Telephone #: 410 775-2127  
Address: 11713 Green Valley Rd.  
Union Bridge, MD 21029

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer

License # and name of individual responsible for the field installation:

Name (Print): George Shelton, Jr. License # 16965

\*A licensed individual must perform the actual installation. Apprentices must be under the direct supervision of a licensed journeyman or master plumber, pump installer or well driller. License may be subjected to field verification.

Name of Property Owner: Hopkins / Whittington Telephone #: 410 290-8866

Subdivision: Clarksuite Ridge Lot #: 57 Well Tag #: HO

Site Address: 67th Whitgate Rd.  
Clarksuite MD 21029

**Submersible Pump Data**

Make: Lowes  
Model #: 20-310422  
Pump Capacity: 10 GPM  
Well Yield: 12 GPM

**Pitless Adapter**

Make: Lynchell  
Model #: 1/2" x 1"  
Depth: 36" (36" min)  
NSF approved: ✓

**Well Cap and Electric Condu**

Two piece watertight cap ✓  
Screened, vented well cap ✓  
Cap secured to casing ✓  
Conduit min. 1/2" B.O. ✓  
Conduit secured to well cap ✓

Depth of well encountered at time of pump installation: 400 (feet)

If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990, Section 118

Torque arrestors or Cable Guards are required - Must circle one Well Not Sleeved

Safety rope, if used, attached to inside of well casing with eye bolt ✓

**Piping to house**

Type: polyethylene  
PSI: 160 (160 psi min)  
Depth of supply line: 36" (36" min)

**House Connection**

PVC sleeved to undisturbed soil at wall penetration: ✓  
Approximate length of sleeve: 10'  
Sleeve caulked and sealed properly: ✓

The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewer piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact the office for approval prior to installation.

Signature of company representative responsible for installation: George Shelton, Jr.

date: 5-12-05

**For Health Department Use Only - Not to be completed by Installer**

Date Insp. Requested: \_\_\_\_\_

Date Insp. Approved: 8/9/04 50 BB

Inspection Data: Pitless adapter and water supply line at least 36" below grade

Two piece cap installed and attached to casing securely ✓

Elec. conduit extends at least 18" below grade/attached to cap properly ✓

Safety rope installed inside of well casing ✓

Correct well tag attached properly and casing 8" above finished grade ✓

Water supply line sleeved adequately at house connection ✓

Adequate grout observed below pitless adapter ✓

<b>C1</b> <span style="font-size: 24pt; font-weight: bold;">14376</span>	SEQUENCE NO. (MDE USE ONLY)	<b>STATE OF MARYLAND</b> <b>WELL COMPLETION REPORT</b> FILL IN THIS FORM COMPLETELY PLEASE TYPE	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.																																																																																																														
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)		COUNTY NUMBER <b>A513361</b>																																																																																																															
ST/CO USE ONLY DATE Received MM    DD    YY 8                      13	DATE WELL COMPLETED <b>10/16/03</b>	Depth of Well <b>400</b> (TO NEAREST FOOT) 10/30/03 O.K. <b>(BB)</b>																																																																																																															
OWNER <b>Hopkins</b> STREET OR RFD <b>Whitegate Rd</b> SUBDIVISION <b>CLARKSVILLE RIDGE</b> SECTION    TOWN <b>Clarksville</b> LOT <b>57</b>		PERMIT NO. FROM "PERMIT TO DRILL WELL" <b>40-94-3611</b>																																																																																																															
<b>WELL LOG</b> Not required for driven wells STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">DESCRIPTION (Use additional sheets if needed)</th> <th colspan="2">FEET</th> <th rowspan="2">check if water bearing</th> </tr> <tr> <th>FROM</th> <th>TO</th> </tr> </thead> <tbody> <tr> <td>top soil</td> <td>0</td> <td>2</td> <td></td> </tr> <tr> <td>Orangeish/brown Shale</td> <td>2</td> <td>9</td> <td></td> </tr> <tr> <td>brown mica</td> <td>9</td> <td>27</td> <td></td> </tr> <tr> <td>Tannish brown Slate</td> <td>27</td> <td>57</td> <td></td> </tr> <tr> <td>Blue slate</td> <td>57</td> <td>190</td> <td></td> </tr> <tr> <td>Gray slate</td> <td>190</td> <td>230</td> <td></td> </tr> <tr> <td>Blue mica</td> <td>230</td> <td>400</td> <td></td> </tr> </tbody> </table>		DESCRIPTION (Use additional sheets if needed)	FEET		check if water bearing	FROM	TO	top soil	0	2		Orangeish/brown Shale	2	9		brown mica	9	27		Tannish brown Slate	27	57		Blue slate	57	190		Gray slate	190	230		Blue mica	230	400		<b>GROUTING RECORD</b> WELL HAS BEEN GROUTED (Circle Appropriate Box) <b>(Y)</b> <b>(N)</b> TYPE OF GROUTING MATERIAL (Circle one) CEMENT <b>(CM)</b> BENTONITE CLAY <b>(BC)</b> NO. OF BAGS <b>38</b> NO. OF POUNDS <b>3800</b> GALLONS OF WATER <b>228</b> DEPTH OF GROUT SEAL (to nearest foot) <b>33</b> from    ft. to    ft. 48 TOP 52 54 BOTTOM 58 (enter 0 if from surface) <b>CASING RECORD</b> casing types insert appropriate code below <table style="width:100%;"> <tr> <td><b>(ST)</b> STEEL</td> <td><b>(CO)</b> CONCRETE</td> </tr> <tr> <td><b>(PL)</b> PLASTIC</td> <td><b>(OT)</b> OTHER</td> </tr> </table> MAIN CASING TYPE <b>ST</b> Nominal diameter top (main) casing (nearest inch) <b>6</b> Total depth of main casing (nearest foot) <b>35</b> 60 61 63 64 66 70 <b>OTHER CASING (if used)</b> diameter inch    depth (feet) from    to EACH CASING <b>SCREEN RECORD</b> screen type or open hole insert appropriate code below <table style="width:100%;"> <tr> <td><b>(ST)</b> STEEL</td> <td><b>(BR)</b> BRASS</td> <td><b>(HO)</b> OPEN HOLE</td> </tr> <tr> <td><b>(PL)</b> PLASTIC</td> <td><b>(OT)</b> OTHER</td> <td></td> </tr> </table>		<b>(ST)</b> STEEL	<b>(CO)</b> CONCRETE	<b>(PL)</b> PLASTIC	<b>(OT)</b> OTHER	<b>(ST)</b> STEEL	<b>(BR)</b> BRASS	<b>(HO)</b> OPEN HOLE	<b>(PL)</b> PLASTIC	<b>(OT)</b> OTHER																																																																			
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NUMBER OF UNSUCCESSFUL WELLS: <b>0</b> WELL HYDROFRACTURED <b>(Y)</b> <b>(N)</b> CIRCLE APPROPRIATE LETTER <b>A</b> A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED <b>E</b> ELECTRIC LOG OBTAINED <b>P</b> 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.		<b>C2</b> DEPTH (nearest ft.) <table style="width:100%;"> <tr> <td>1</td> <td>2</td> <td>3</td> <td>4</td> <td>5</td> <td>6</td> <td>7</td> <td>8</td> <td>9</td> <td>10</td> <td>11</td> <td>12</td> <td>13</td> <td>14</td> <td>15</td> <td>16</td> <td>17</td> <td>18</td> <td>19</td> <td>20</td> <td>21</td> <td>22</td> <td>23</td> <td>24</td> <td>25</td> <td>26</td> <td>27</td> <td>28</td> <td>29</td> <td>30</td> <td>31</td> <td>32</td> <td>33</td> <td>34</td> <td>35</td> <td>36</td> <td>37</td> <td>38</td> <td>39</td> <td>40</td> <td>41</td> <td>42</td> <td>43</td> <td>44</td> <td>45</td> <td>46</td> <td>47</td> <td>48</td> <td>49</td> <td>50</td> <td>51</td> <td>52</td> <td>53</td> <td>54</td> <td>55</td> <td>56</td> <td>57</td> <td>58</td> <td>59</td> <td>60</td> <td>61</td> <td>62</td> <td>63</td> <td>64</td> <td>65</td> <td>66</td> <td>67</td> <td>68</td> <td>69</td> <td>70</td> </tr> <tr> <td colspan="10"></td> <td colspan="10"><b>33</b></td> <td colspan="10"><b>400</b></td> <td colspan="10"></td> </tr> </table> 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		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70											<b>33</b>										<b>400</b>																			
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70																																												
										<b>33</b>										<b>400</b>																																																																																													
DRILLERS LIC. NO. <b>MW 040</b> <b>George F. Carter</b> DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. <b>JW 0227</b> <b>John D. Carter</b> SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q 72 74 75 76 LOG INDICATOR OTHER DATA																																																																																																															
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) 		PUMPING TEST HOURS PUMPED (nearest hour) <b>6</b> PUMPING RATE (gal. per min.) <b>1.5</b> METHOD USED TO MEASURE PUMPING RATE <b>Bucket</b> WATER LEVEL (distance from land surface) BEFORE PUMPING <b>11</b> ft. WHEN PUMPING <b>139</b> ft. TYPE OF PUMP USED (for test) <b>A</b> air <b>P</b> piston <b>T</b> turbine <b>C</b> centrifugal <b>R</b> rotary <b>O</b> other (describe below) <b>J</b> jet <b>S</b> submersible																																																																																																															
PUMP INSTALLED DRILLER INSTALLED PUMP YES <b>(NO)</b> (CIRCLE) (YES or 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) <b>(+)</b> above } LAND SURFACE <b>(-)</b> below } <b>2</b> (nearest foot)		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) 																																																																																																															

10-2-03  
8:15  
Thursday  
Review

FIELD DATA SHEET  
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 94-364  
Location of property (road) Whitegate Rd  
Subdivision CLARKSVILLE RIDGE Lot 57 Block \_\_\_\_\_ Plat \_\_\_\_\_ Sec. \_\_\_\_\_  
Well Driller Easterday Owner Hopkins, Richard

Depth of well 400 13pm  
Distance of measuring point (M.P.) above ground 2 ft  
Static water level (S.W.L.) below M.P. 11 ft

I. High rate pumping -- reservoir drawdown

Time pump started 9:40 Pumping rate 15 gpm  
Total time 20 min 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 1 gallon bucket	FLOW METER READING (if used) Pump Set	CALCULATED FLOW (gallons per minute)
10:00	139	40		1.5
10:15	139	40		1.5
10:30	139	40		1.5
10:45	139	40		1.5
11:00	139	40		1.5
11:15	139	40		1.5
11:30	139	40		1.5
11:45	139	40		1.5
12:00	139	40		1.5
12:15	139	40		1.5
12:30	139	40		1.5
12:45	139	40		1.5
1:00	139	40		1.5
1:15	139	40		1.5
1:30	139	40		1.5
1:45	139	40		1.5
2:00	139	40		1.5
2:15	139	40		1.5
2:30	139	40		1.5
2:45	139	40		1.5
3:00	139	40		1.5
3:15	139	40		1.5
3:30	139	40		1.5
3:45	139	40		1.5
4:00	139	40		1.5



3 hr yield  
- 10/2/03 8:15

## Review

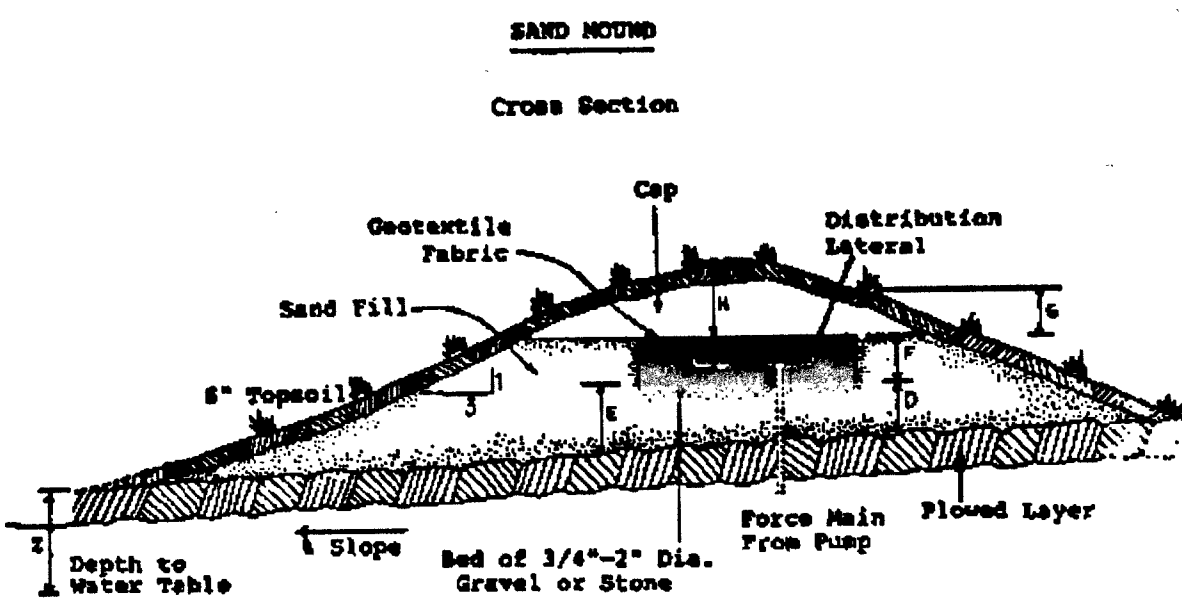
Well Permit No. HO - 94-3611  
Location of property (road) Whitegate Rd  
Subdivision CLARKSVILLE RIDGE Lot 57 Block      Plat      Sec.       
Well Driller Easterday Owner Hopkins, Richard

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

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

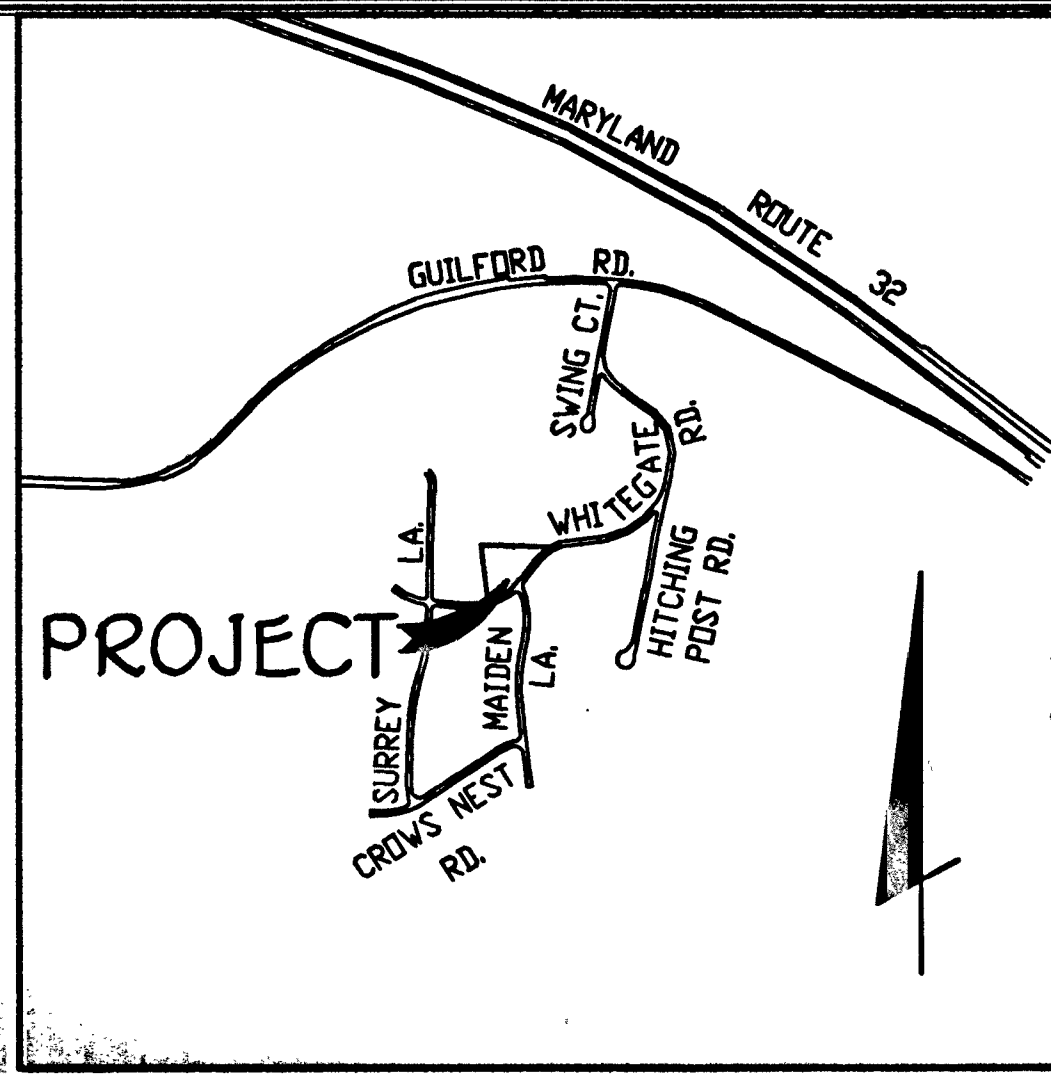
[illegible]

B 1	<b>2187</b>	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND <b>APPLICATION FOR PERMIT TO DRILL WELL</b> <i>W517376</i> please type	STATE PERMIT NUMBER <b>40-94-3611</b> <small>fill in this form completely</small>
Date Received (APA) <i>07 22 02</i>		9132		
OWNER INFORMATION				
<div style="display: flex; justify-content: space-between;"> <div>             8 MM DD YY 13  <b>HOPKINS RICHARD</b>              15 Last Name Owner First Name 34  <b>9515 HICKORY LAMB</b>              36 Street or RFD 55  <b>COLUMBIA, MD 21045</b>              57 Town 70 State 72 Zip 76           </div> </div>				
DRILLER INFORMATION				
<div style="display: flex; justify-content: space-between;"> <div>             Driller's Name  <b>George F. Easterday</b>              Firm Name  <b>L. Franklin Easterday, Inc.</b>              Address  <b>9265 Brown Church Rd., MT. Airy, Md. 21771</b>              Signature <i>George F. Easterday</i> Date <b>7/18/2002</b> </div> <div>             M WD 040              License No. 81              76           </div> </div>				
WELL INFORMATION				
<div style="display: flex; justify-content: space-between;"> <div>             APPROX. PUMPING RATE (GAL. PER MIN.)              8 <b>500</b> 12              AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY)              14 <b>500</b> 20           </div> <div>             5              3           </div> </div>				
USE FOR WATER (CIRCLE APPROPRIATE BOX)				
<input checked="" type="checkbox"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, DEWATERING <input type="checkbox"/> PUBLIC WATER SUPPLY WELL <input type="checkbox"/> TEST, OBSERVATION, MONITORING <input type="checkbox"/> GEO-THERMAL				
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL				
<div style="display: flex; justify-content: space-between;"> <div>             COUNTY NAME  <b>Howard</b>              STATE SIGNATURE  <b>Howard</b>              DATE ISSUED  <b>03 26 03</b>              NORTH GRID  <b>492</b> 50 55           </div> <div>             COUNTY NO.  <b>AS13361</b>              INSERT S              SIGNATURE  <i>Mark Reffin</i>              CO SIGNATURE  <b>3/26/04</b>              EXP DATE  <b>0824</b> 57 63           </div> </div>				
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X				
<div style="display: flex; justify-content: space-between;"> <div>             SOURCES OF DRILLING WATER              1. wells              2.              3.           </div> <div>             WRITE THE BOX NUMBER FROM THE MAP HERE              E <b>720 824</b>              N <b>492</b> </div> </div>				
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 <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 DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52				
DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION				
<div style="display: flex; justify-content: space-between;"> <div>             APPROX. PERMIT NUMBER  <b>40-94-3611</b>              PERMIT No. <b>40-94-3611</b> </div> <div> <b>14 K 11</b>  </div> </div>				



- D = Upslope Sand Fill Depth (in.)  
 E = Downslope Sand Fill Depth (in.)  
 F = Bed Depth (in.)  
 G = Cap & Topsoil Height at Bed Edges (in.)  
 H = Cap & Topsoil Height at Bed Center (in.)  
 I = Depth to Water Table (in.)

TYPICAL SAND MOUND CROSS SECTION DETAIL  
NO SCALE



VICINITY MAP  
SCALE: 1" = 1200'

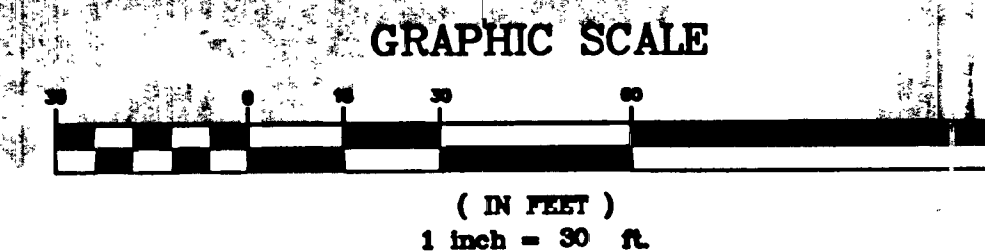
# GENERAL NOTES

- THIS AREA DESIGNATES A PRIVATE EASEMENT AS REQUIRED BY THE HOWARD COUNTY HEALTH DEPARTMENT FOR INDIVIDUAL SAND MOUND SEWAGE 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 ENCROACHMENTS INTO THE PRIVATE SEWERAGE EASEMENT. RECORDATION OF A MODIFIED EASEMENT SHALL NOT BE NECESSARY.
- THE LOTS SHOWN HEREON COMPLY WITH THE MINIMUM OWNERSHIP, WIDTH AND LOT AREA AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT.
- B.R.L. DENOTES BUILDING RESTRICTION LINE.
- ALL WELLS AND SEPTIC SYSTEMS WITHIN 100 FEET OF THE PROPERTY HAVE BEEN SHOWN.
- WELL SHALL BE DRILLED AND DEEMED ACCEPTABLE BY HOWARD COUNTY HEALTH DEPARTMENT PRIOR TO ISSUANCE OF BUILDING PERMIT.
- TOPOGRAPHY BASED ON FIELD RUN SURVEY CONDUCTED BY FISHER, COLLINS, AND CARTER, INC. JUNE, 2000.
- OWNER: MR. JOHN GRIMES C/O LONG AND FOSTER REALTORS 9171 BALTIMORE NATIONAL PIKE ELICOTT CITY, MD. 21043 ATTN: MR. JOHNNY HAMILTON
- AVERAGE SLOPE OF EXISTING GROUND IN THE DELINEATED SEWERAGE RESERVE AREA IS 0.0%.
- THE PROPOSED DWELLING SHALL HAVE NO MORE THAN (3) BEDROOMS.
- A SAND MOUND CONSTRUCTION PLAN IS TO BE SUBMITTED FOR REVIEW AND APPROVAL BY THE HEALTH DEPARTMENT PRIOR TO ISSUANCE OF A BUILDING PERMIT FOR THIS LOT.
- COMPLETE SEPTIC RESERVE AREA TO BE FENCED OFF AT TIME OF BP FOR SOIL PROTECTION.
- THIS AREA APPROVED FOR LEACHING BED SEWAGE DISPOSAL SYSTEM.

## LEGEND

- PROPOSED WELL LOCATION
- POSSIBLE HOUSE SITE
- PASSED PERCOLATION (STANDARD TEST)
- FAILED PERCOLATION (STANDARD TEST)
- EXISTING HOUSE
- ACCEPTABLE SAND MOUND TEST LOCATIONS

NOTE: EXACT SIZE OF SAND MOUND FOOTPRINT, LOCATION & TYPICAL SECTION SHALL BE DETERMINED ON THE CONSTRUCTION PLANS REFERENCED IN GENERAL NOTE NO. 10.



Signed PERCOLATION PLAN  
 CLARKSVILLE RIDGE  
 SECTION No. 3  
 LOT 57

PLAT BOOK No. 6, FOLIO 75  
 TAX MAP 35, GRID 21, PARCEL 203  
 FIFTH ELECTION DISTRICT  
 SCALE: 1" = 30'

OWNER  
 MR. AND MRS. JOHN GRIMES  
 C/O LONG & FOSTER REALTORS  
 9171 BALTIMORE NATIONAL PIKE  
 ELICOTT CITY, MARYLAND 21043  
 ATTN: MR. JOHNNY HAMILTON

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

*John Hamilton*  
 COUNTY HEALTH OFFICER

8/28/01  
 DATE

I CERTIFY THAT THE LOCATIONS SHOWN HEREON ARE BASED ON FIELD LOCATIONS CONDUCTED IN ACCORDANCE WITH THE SUPERVISION, AND ARE CORRECT TO THE BEST OF MY PERSONAL KNOWLEDGE AND BELIEF.

*John Hamilton*  
 SIGNATURE OF PROFESSIONAL LAND SURVEYOR  
 OR PROPERTY LINE SURVEYOR (W/ SEAL)

8/8/01  
 DATE





**SANITARY/ENVIRONMENTAL ENG., INC.**

Consulting Engineers  
1414 Washington Road  
WESTMINSTER, MARYLAND 21157  
(410) 876-7740  
FAX (410) 840-9924

JOB LOT 57 CLARKSVILLE RIDGE

SHEET NO. 1 OF       

CALCULATED BY        DATE 7/20/01

CHECKED BY        DATE       

SCALE (GRIMES)

Calculations - Sand mound

3 Bed Rooms - @ 150 = 450 GPD  
Loading rate - 1.2 gpd/sq. ft. 375 sq. ft.

Bed - 9' x 42' = 378 sq. ft.  
SLOPE = 10%

Up slope Sand fill = 24"  
down slope " " = 24" + (0.1 x 108") = 34.8"

Up slope Setback = (24" + 22")(3)(0.77) = 106" = 8'-10"  
Down slope " = (34.8" + 22")(3)(1.44) = 245" = 20'-5"  
Sideslope " =  $\left( \frac{34.8 + 24}{2} \right) \times 28" \times 3 = 172" = 14'-4"$

mound width = 9' + 8'-10" + 20'-5" = 38'-3"  
mound length = 42' + 14'-1" + 14'-1" = 70'-2"

Dose - 75' - 3" FM @ 38.4 gal/100' = 28.8 gal. (29)

1 1/2" laterals = 3 x 5 x 40'-3" = 603.75' @ 10.6 gal/100'  
6.04 x 10.6 = 64 gal  
Dose = 29 + 64 = 93 gal

Pump chamber measurement -

Floor area = 37.6 sq. ft.

93 gal / 7.48 gal/cu ft = 12.4 cu ft.

12.4 cu ft / 37.6 sq. ft. = 0.33 ft = 4"

TDH = Elevation difference - 124.6 - 105 = 19.6'  
Distal Head 2.0'

F - 30 equivalent feet OR 2" PVC in pump chamber

**SANITARY/ENVIRONMENTAL ENG., INC.**

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JOB LOT 57-CLARKSVILLE 12IDE

SHEET NO. 2

OF

CALCULATED BY

DATE

7/20/01

CHECKED BY

DATE

SCALE

$$F = 0.0984 \frac{Q^{1.85}}{d^{4.87}}$$

$$F = 0.0984 \frac{188^2}{34.33} = 5.4' / 100'$$

$$F - 2" = 0.3 \times 5.4 = \underline{1.6'}$$

$$L - 3" Q 59.5 \text{ gpm} = (75')$$

$$F = 0.81' / 100' = 0.75 \times 0.81 = \underline{0.6'}$$

$$\text{Total } F = 1.6' + 0.6' = 2.2'$$

$$\text{TDH} = 19.6 + 2.0 + 2.2 = 23.8' (24')$$

Pump - 59.5 gpm against 24' TDH

GOULDS Model 2885 WE 07 H.

# SANITARY/ENVIRONMENTAL ENG., INC.

Consulting Engineers

1414 Washington Road  
WESTMINSTER, MARYLAND 21157

(410) 876-7740  
FAX (410) 840-9924

## LETTER OF TRANSMITTAL

TO: HOWARD CO. HEALTH DEPT.  
BUREAU OF ENV. HEALTH  
3525-11 ELLICOTT MILLS DRIVE  
ELLICOTT CITY, MD 21043

DATE <u>May 18</u>	JOB NO.
ATTENTION <u>MARK RIFKIN</u>	
RE: <u>LOT 57</u> <u>CLARKSVILLE RIDGE</u> <u>RELOCATION OF TANKS</u>	

WE ARE SENDING YOU ☒ Attached ☐ Under separate cover via \_\_\_\_\_ the following items:

- ☐ Shop drawings    ☐ Prints    ☐ Plans    ☐ Samples    ☐ Specifications  
☐ Copy of letter    ☐ Change order    ☐ \_\_\_\_\_

COPIES	DATE	NO.	DESCRIPTION
1			HYDRAULIC PROFILE
1			CALCULATIONS
			EX-GRADE @ <del>100</del> 5-T = 400
			NEED 18"
			WILL DROP PUMP
			Impact low? T/C to C/Se

THESE ARE TRANSMITTED as checked below:

- ☐ For approval    ☐ Approved as submitted    ☐ Resubmit \_\_\_\_\_ copies for approval  
☐ For your use    ☐ Approved as noted    ☐ Submit \_\_\_\_\_ copies for distribution  
☐ As requested    ☐ Returned for corrections    ☐ Return \_\_\_\_\_ corrected prints  
☐ For review and comment    ☐ \_\_\_\_\_  
☐ FOR BIDS DUE \_\_\_\_\_    ☐ PRINTS RETURNED AFTER LOAN TO US

REMARKS

MARK - THIS RELOCATION ADDS 1.8' TO THE  
 TDH - HOWEVER, THE SPECIFIED PUMP IS MORE THAN  
 ADEQUATE, THE INCREASE IN PUMP DOSE IS  
 INSIGNIFICANT - NOT ENOUGH TO REQUIRE ANY  
 FLOW CHANGES.  
 THE PROPOSED TANK RELOCATIONS WILL BE O.K.

COPY TO File

SIGNED: Jim Clark

If enclosures are not as noted, kindly notify us at once.

**Consulting Engineers**  
1414 Washington Road  
UNIONTOWN, MARYLAND

WESTMINSTER, MARYLAND 21157  
(410) 876-7740

**(410) 876-7740**

**FAX (410) 840-9924**

**SHEET NO.**

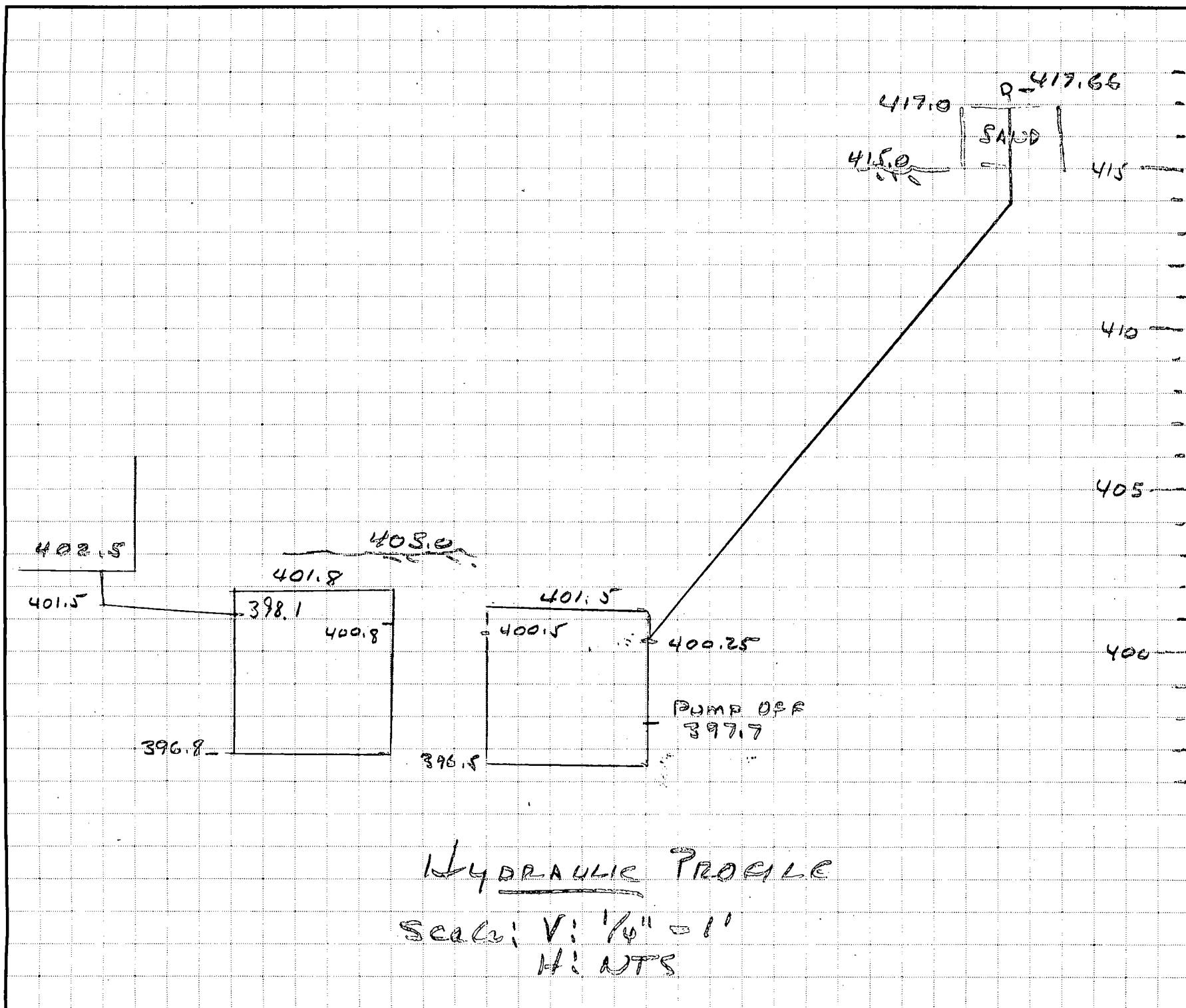
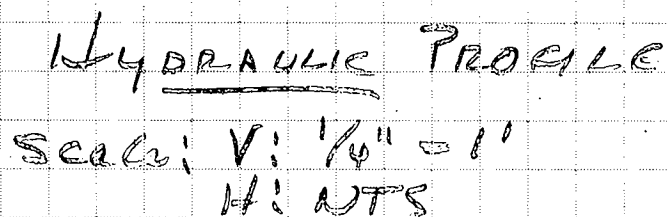
CALCULATED BY:

DATE \_\_\_\_\_

**CHECKED BY**

DATE \_\_\_\_\_

SCALE





11-11-30

**SANITARY/ENVIRONMENTAL ENG., INC.**

Consulting Engineers  
1414 Washington Road  
WESTMINSTER, MARYLAND 21157  
(410) 876-7740  
FAX (410) 840-9924

JOB \_\_\_\_\_

SHEET NO. \_\_\_\_\_ OF \_\_\_\_\_

CALCULATED BY \_\_\_\_\_ DATE \_\_\_\_\_

CHECKED BY \_\_\_\_\_ DATE \_\_\_\_\_

SCALE \_\_\_\_\_

$$90' - 3" \text{ PVC @ } 38.4 \text{ GAL/100'}$$

$$0.9 \times 38.4 = 34.6 \text{ GAL}$$

$$\text{PLUS} - 5 \times 3 \times 40.25' = 604' - 1\frac{1}{2}" \text{ Lateral @ } 10.6 \text{ GAL/100'}$$

$$6.04 \times 10.6 = 64 \text{ GAL}$$

$$\text{DOSE} = 34.6 + 64 = 99 \text{ GAL} / 7.48 = 13 \text{ cu ft.}$$

$$13 \text{ cu ft.} / 40 \text{ sq. ft.} = 0.33' = 4\frac{1}{2}"$$

$$\text{Pump Rate} = 59 \text{ GPM}$$

$$\text{TDH GLEY DIFFERENCE} - 417.66 - 397.7 = 19.96'$$

$$\text{DISTAL HEAD} \quad 2.00'$$

F-

$$2" \text{ PVC} = 6' + \text{VALVE} + L + \text{UNION} + L + L + \text{REDUCER}$$

$$6' + 2' + 7' + 1.3' + 7' + 7' + 10' = 40.3'$$

$$2" \text{ F} = 0.0984 \quad 59 \text{ }^{1.85} \quad 0.0984 \quad \frac{1888}{34.33} = 5.4' / 100'$$

$$2" \text{ F} = 0.403 \times 5.4' = 2.2'$$

$$\text{F-3"} = 59 \text{ GPM} = 0.8' / 100' \quad \text{TOTAL F} = 2.92' (3')$$

$$0.8 \times 0.9 = 0.72$$

$$\text{TDH} = 19.96' + 2.00' + 2.92' = 24.8'$$

**SANITARY/ENVIRONMENTAL ENG., INC.**

Consulting Engineers  
1414 Washington Road  
WESTMINSTER, MARYLAND 21157  
(410) 876-7740  
FAX (410) 840-9924

JOB: WATERVILLE RIDGE

SHEET NO. 60157

OF

CALCULATED BY

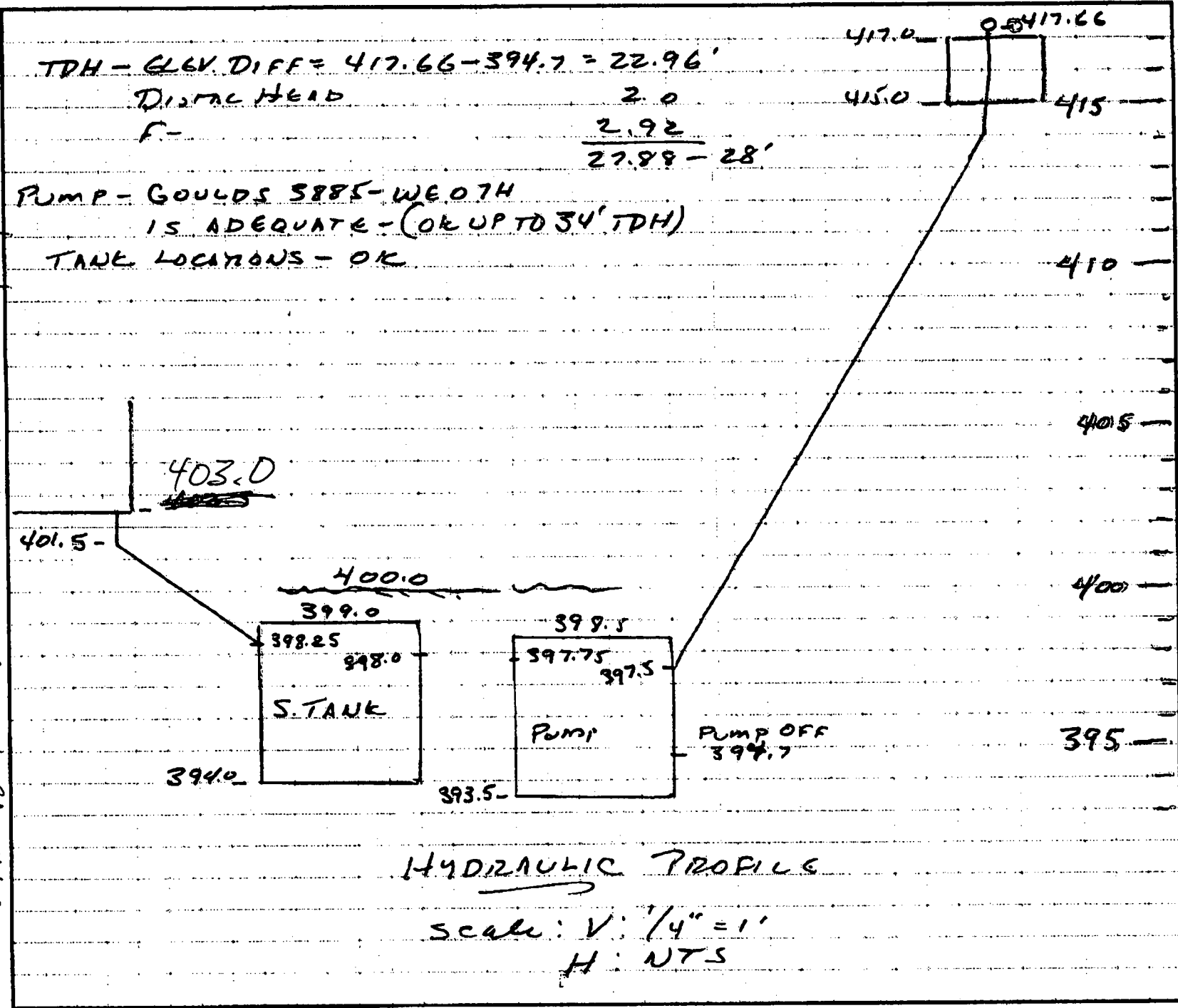
DATE

5/27/04

CHECKED BY

DATE

SCALE



5/27/04 FINAL MODIFICATION BY JIM CLISE OK  
 (RJR)

COUNTY #

SOIL PROFILE

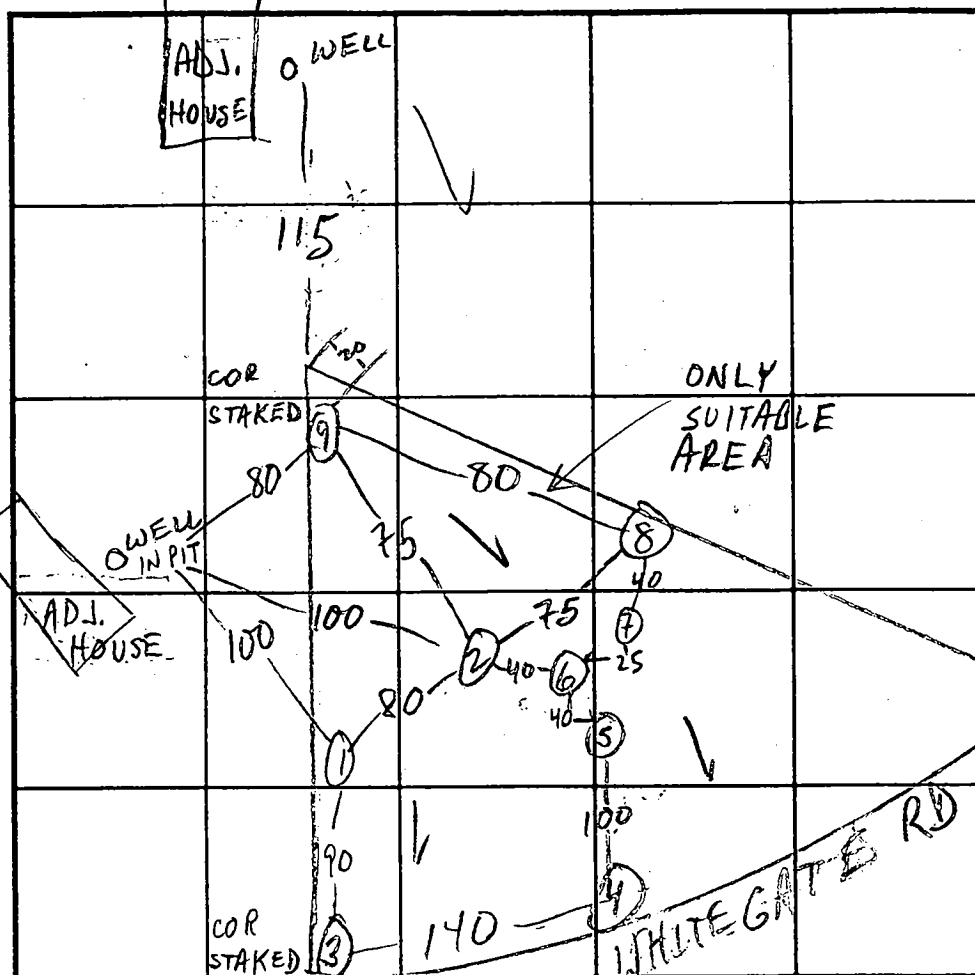
0' ①  
orge brn  
sa c/lm

4' ②  
dk brn  
gray mica  
sa lm  
quartz  
patch @ 4 1/2  
10-15%  
frags  
orge patches?

13' ③  
brntan  
sa c/lm  
brn  
mica  
sa lm  
5% frags

12' 13' ④  
brn sa  
cl lm  
tan gray  
sa lm  
25%  
frags

10' ⑤  
HARD



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE

0' ⑥  
orge brn  
cl lm

6' ⑦  
blk gray  
dk brn  
sa mica  
25%  
hard  
frags

12' ⑧  
WATER

UPHILL ⑨ DOWNHILL  
3' ⑩  
red c/lm  
gray tan sa  
50-65%  
frags

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1' DROP		TIME
			START	STOP	START	STOP	
5/19/00	1V	13	OK	see profile			
	2V	12	OK	see profile			
	3V	7 1/2	REFUSAL	FAIL			
	4V	12 1/2	H <sub>2</sub> O @	12-FAIL-LEACHED FRACTURES			
	5V	4	REFUSAL	FAIL			
	6V	4 1/2	REFUSAL	FAIL			
	7V	10	FAIL	> 50% Rx			
	8V	10	OK	see profile HARD @ BOT			
	9V	13' 3"	OK				

REMARKS NO H<sub>2</sub>O TEST DUE TO STEADY RAIN, LOT WOODED

TYPE OF SOIL AREA LIMITED, WELL SITE APPEARS RESTRICTED

TESTED BY M. Rifkin ALSO PRESENT J. Hamilton, Arnold's

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME &lt; 7 min TRENCH WIDTH DRYWELL

INLET DEPTH 2 MAXIMUM BOTTOM DEPTH 10 SQ. FT./BEDROOM 180

\$2250

wed 5/19/00 10:00  
RE-CHARGE TO 5/19

# APPLICATION

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

## PERCOLATION TESTING

Proposal - ex lot  
of record - establish  
10K SDA  
DWS

A 513361

P \_\_\_\_\_

DISTRICT \_\_\_\_\_

DATE 3/31/00

ORIG APP. DAMAGED IN RAIN

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 John & Geraldine Grimes 410-828-1724

ADDRESS 245 Sandtrap way Roswell GA 30076 PHONE 770-993-3164

AGENT OR PROSPECTIVE BUYER Agent Johnny Hamilton & Long & Foster Realtors

ADDRESS 9171 Rt 40 Ellicott City MD 21043 PHONE 410-461-1456 (xt-144)  
410-418-8144  
410-299-0484

PROPERTY LOCATION:

SUBDIVISION Clarksville Ridge LOT NO. 57

ROAD AND DESCRIPTION Whitegate Road  
Clarksville MD.

TAX MAP 35 PARCEL # 203

SIZE OF LOT 1.2292 Acres TYPE BLDG. Single Family  
(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.

Geraldine Grimes  
(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

DISAPPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING 6/6/00 EXTREMELY LIMITED AREA, HOLD FOR PLAT MR

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



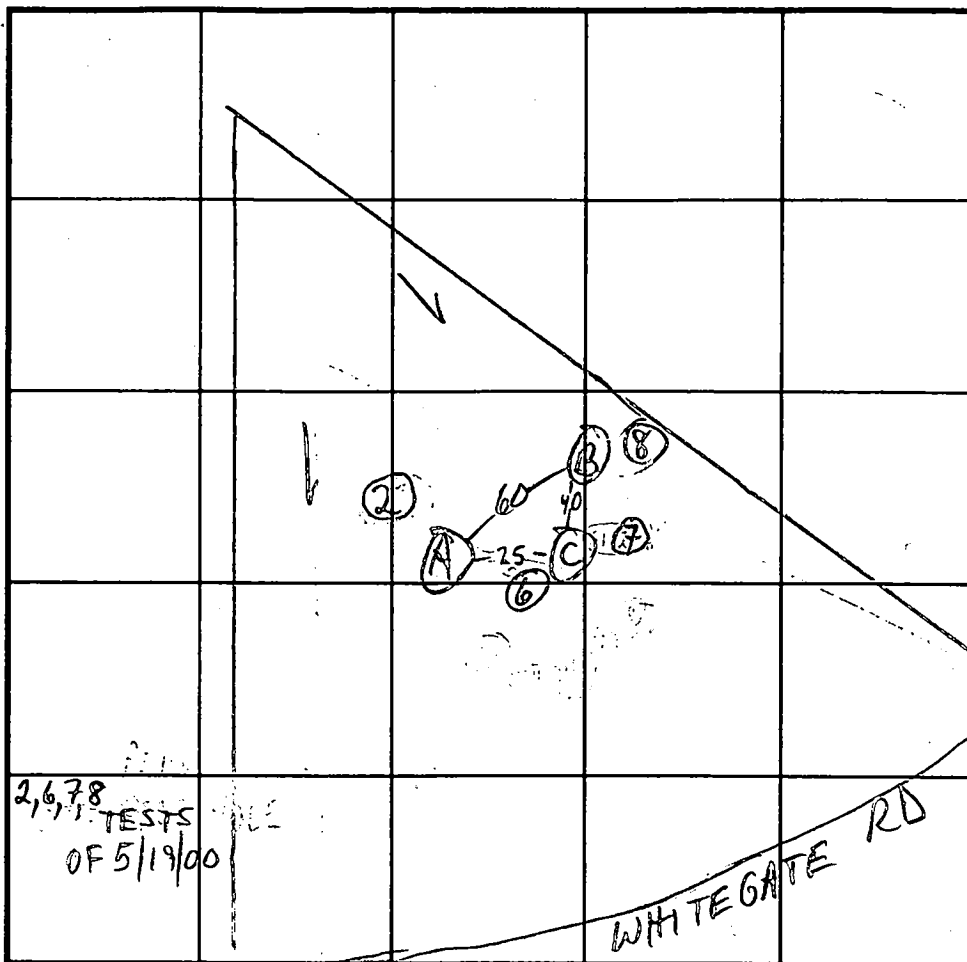
COUNTY #

SOIL PROFILE

0' (A)  
brn mica  
cl lm  
7" orge red  
brn  
scl lm  
Some mica  
10% frags  
21" orge brn  
si salm  
24"

(B)  
choc brn  
mica  
scl lm  
16" brn  
si salm  
10% frags  
20" orge  
scl lm  
24"

(C)  
lt. to med.  
brn mica  
si salm  
13" orge brn  
mica  
sa salm  
17" brn gray  
sa mica  
lm  
24" 5% saprolite



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
3/9/01	A		SEE	ATTACHED			
	B			DATA SHEET			
	C						

REMARKS

TYPE OF SOIL

TESTED BY M. Ripkin

ALSO PRESENT Arnold's, J. Covalt, others

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

TRENCH WIDTH

INLET DEPTH

MAXIMUM BOTTOM DEPTH

SQ. FT./BEDROOM

# APPLICATION

## PERCOLATION TESTING

A \_\_\_\_\_

P \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 313-2640

*Sand Mound  
Tests*

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 *Drew, Catoctin Homes 410-707-2628*

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

PROPERTY LOCATION:

SUBDIVISION *Clarksville Ridge* LOT NO. *57*

ROAD AND DESCRIPTION \_\_\_\_\_

TAX MAP \_\_\_\_\_ PARCEL # \_\_\_\_\_

SIZE OF LOT \_\_\_\_\_ TYPE BLDG. *SFD*  
(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

TEST DATA

NAME <u>Grimes</u>	FILE NO <u>A513361</u>
LOCATION <u>Clarksville Ridge Lot 57</u>	COUNTY _____
<u>Whitegate Rd</u>	DATE <u>3/9/01</u>
RECORDED BY <u>M. Ripkin</u>	GRID _____ E N

HOLE NO.	TEST NO. H <sub>2</sub> O HEIGHT	DEPTH	CLOCK TIME	ELAPSED TIME	MEASUREMENT	REMARKS (Method, Moisture, Biopores)
A	7"	15"	10:42	—	10"	Rate/min min/inch
			11:00	18	8 13/32	> 1 12/32 .089 11.2
			11:15	15	7 1/2	> 2 29/32 .060 16.67
			11:17	—	10"	> 1 5/32 .077 12.99
			11:32	15	8 23/32	> 1 .067 14.93
			11:47	15	7 23/32	
			11:49	—	10"	> 1 1/2 .068 14.71
			12:12	22	8 1/2	> 1 4/32 .075 13.33
			12:27	15	7 20/32	
B	7"	20"	10:56	—	35"	> 1 3/16 .049 20.41
			11:20	24	33 13/16	> 12/16 .038 26.32
			11:40	20	33 1/16	> 13/16 .041 24.39
			12:00	20	32 1/4	> 11/16 .031 32.26
			12:22	22	31 9/16	> 9/16 .031 32.26
			12:40	18	31	
			12:41	—	35"	> 15/16 .047 21.28
			1:01	20	34 1/16	
C	8"	12"	12:36	—	10"	> 2 5/32 .127 7.87
			12:53	17	7 25/32	> 1 28/32 .085 11.76
			1:15	22	5 29/32	
			1:18	—	10"	> 1 14/32 .090 11.11
			1:34	16	8 18/32	> 1 10/32 .088 11.36
			1:49	15	7 1/4	> 1 7/32 .077 12.99
			2:04	15	6 1/32	

**MARYLAND DEPT. OF THE ENVIRONMENT  
ON-SITE SEWAGE DISPOSAL SYSTEM  
SITE EVALUATION REPORT**

### SOIL PROFILE DESCRIPTION

[illegible]



\$225

wed 5/10/00  
10:00  
Reschedule to 5/19

# APPLICATION

## PERCOLATION TESTING

A 513361

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

Proposal - ex lot  
of record - establish  
10L of SDA  
DIS

P \_\_\_\_\_

DISTRICT \_\_\_\_\_

DATE 3/31/00

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 John & Geraldine Grimes

ADDRESS 245 Sandtrap way <sup>30076</sup> PHONE 770-993-3164

AGENT OR PROSPECTIVE BUYER Agent Johnny Hamilton of Long & Foster Realtors

ADDRESS 9171 Rt 40 Ellicott City MD <sup>21043</sup> PHONE 410-461-1456 (xt-144)

### PROPERTY LOCATION:

SUBDIVISION Clarksville Ridge LOT NO. 57

ROAD AND DESCRIPTION White gate Road  
Clarksville MD.

TAX MAP 35 PARCEL # 203

SIZE OF LOT 1.2292 Acres TYPE BLDG. Single Family  
(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] Geraldine Grimes  
(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

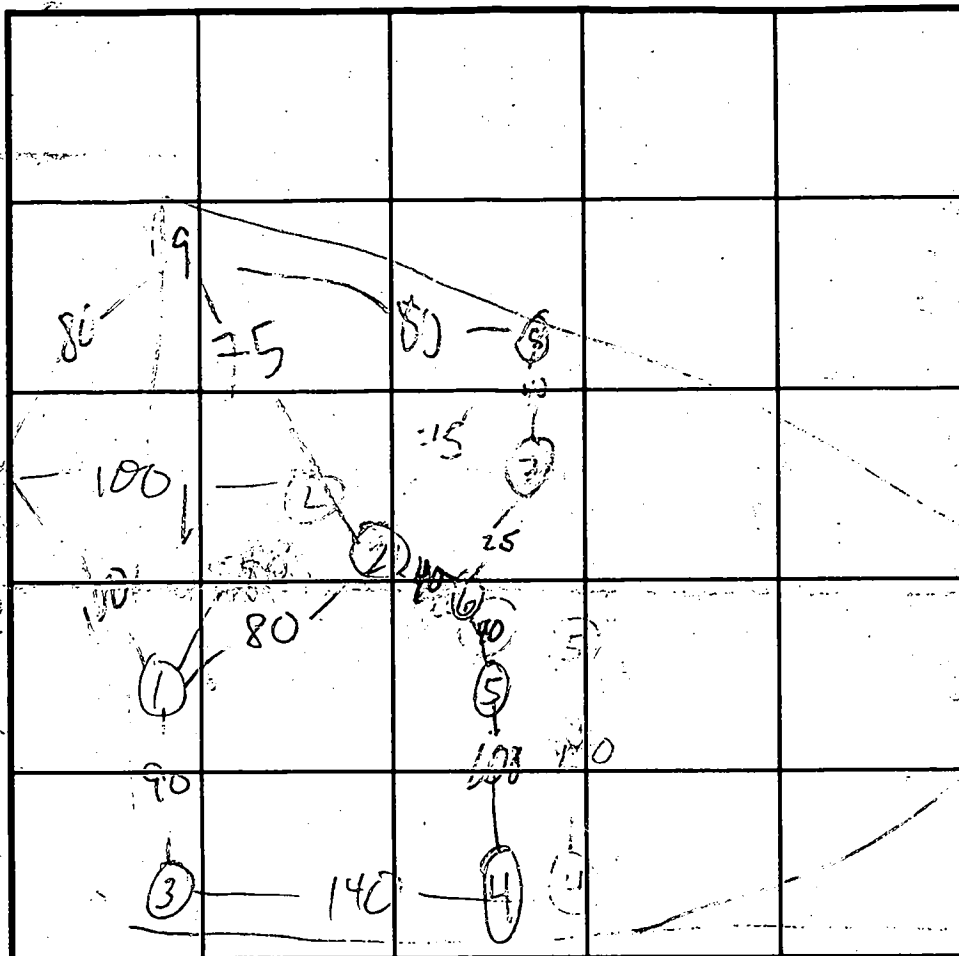
COUNTY #

SOIL PROFILE

0' ①  
 coarse  
 grn  
 sac m  
 o/s grn  
 gr mic  
 5' m  
 15-15' 1/4  
 patch

grn  
 mica  
 1' m  
 5' 20  
 frags

brn /  
 1' c  
 1' m  
 1' 1/2  
 1' m  
 1' 20  
 1' 20



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE

0' ①  
 coarse  
 grn  
 c  
 6' 1/2  
 o/s  
 grn  
 mica  
 25' 20  
 hard frags  
 WATER

③  
 coarse c/  
 1' m  
 3' 1/2 tan of 1' 1/2 m  
 1' 1/2  
 7 1/2 3-7 1/2 HARD

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
5/19/00	1 V	13	OK				
	2 V	12					
	3 V	7 1/2	REFUSAL	FAIL			
	4 V	12 1/2	4-0 (6 12				
	5 V	4	REFUSAL				
	6 V	4 1/2					
	7 V						
	8 V	10	HARD	OK			
	9 V	13 1/2					

REMARKS

TYPE OF SOIL

TESTED BY ALSO PRESENT

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME TRENCH WIDTH

INLET DEPTH MAXIMUM BOTTOM DEPTH SQ. FT./BEDROOM

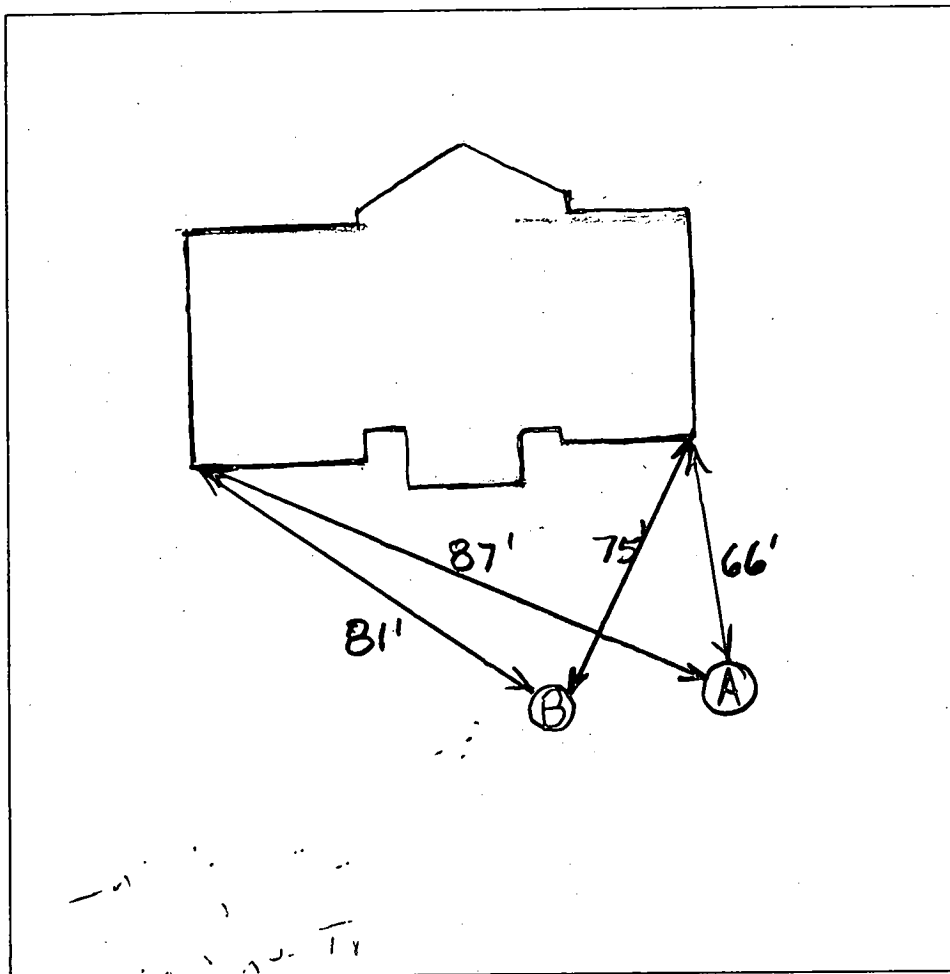
A/P (B)

BrSaCl  
Loam  
~10% Rock

2.5'

BrSa  
Loam  
25-30%  
Rock and  
Saprolite

10'



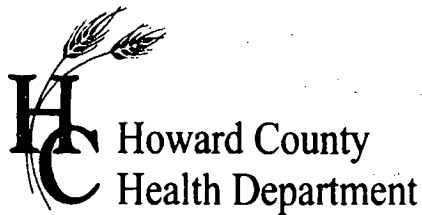
DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2nd INCH	P/F/H
4/19/05	A	1'	12:57:30	1:11	1:28	17	P
	B	4.5'/10'	1:29	1:31	1:34	3	P

REMARKS Water Poured in Bottom of Hole B - Rate O.K.

SANITARIAN B. Baker BACKHOE Hatfields OTHERS \_\_\_\_\_

TEST HOLES USED IN SDA \_\_\_\_\_ AVG. PERC TIME \_\_\_\_\_ SQ. FT/BR \_\_\_\_\_

TRENCH WIDTH \_\_\_\_\_ INLET DEPTH \_\_\_\_\_ MAX. BOT DEPTH \_\_\_\_\_ EFFECTIVE SW \_\_\_\_\_



# APPLICATION

## FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) \_\_\_\_\_ TEST TIME \_\_\_\_\_ A/P \_\_\_\_\_

AGENCY REVIEW: \_\_\_\_\_ DATE \_\_\_\_\_

DO NOT WRITE ABOVE THIS LINE

I HEREBY APPLY FOR THE NECESSARY TESTING/EVALUATION PRIOR TO ISSUANCE OF SEWAGE DISPOSAL SYSTEM PERMIT(S) TO:

CHECK AS NEEDED:

- ☐ CONSTRUCT NEW SEPTIC SYSTEM(S)
- ☐ REPAIR/ADD TO AN EXISTING SEPTIC SYSTEM
- ☐ REPLACE AN EXISTING SEPTIC SYSTEM

CHECK AS NEEDED:

- ☐ NEW STRUCTURE(S)
- ☐ ADDITION TO AN EXISTING STRUCTURE
- ☐ REPLACE AN EXISTING STRUCTURE

CHECK ONE:

- ☐ CREATE NEW LOT(S)
- ☐ BUILD ON AN EXISTING LOT IN A SUBDIVISION
- ☐ BUILD ON AN EXISTING PARCEL OF RECORD

IS THE PROPERTY WITHIN 2500' OF ANY RESERVOIR?

- ☐ YES
- ☐ NO

THE TYPE OF STRUCTURE IS:

- ☐ RESIDENTIAL WITH \_\_\_\_\_ PROPOSED BEDROOMS IN THE COMPLETED STRUCTURE (NOTE **UNKNOWN** IF APPROPRIATE)
- ☐ COMMERCIAL (PROVIDE DETAIL OF NUMBERS AND TYPES OF EMPLOYEES/ CUSTOMERS ON ACCOMPANYING PLAN)
- ☐ INSTITUTIONAL/GOVERNMENT (PROVIDE DETAIL OF NUMBERS AND TYPES OF EMPLOYEES/USERS ON ACCOMPANYING PLAN)

PROPERTY OWNER(S) \_\_\_\_\_

DAYTIME PHONE \_\_\_\_\_ CELL \_\_\_\_\_ FAX \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_  
STREET CITY/TOWN STATE ZIP

APPLICANT \_\_\_\_\_

DAYTIME PHONE \_\_\_\_\_ CELL \_\_\_\_\_ FAX \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_  
STREET CITY/TOWN STATE ZIP

APPLICANT'S ROLE: DEVELOPER BUILDER BUYER RELATIVE/FRIEND REALTOR CONSULTANT

PROPERTY LOCATION

SUBDIVISION/PROPERTY NAME Clarksville Ridge LOT NO. 57

PROPERTY ADDRESS 6714 Whitegate Road  
STREET TOWN/POST OFFICE

TAX MAP PAGE(S) \_\_\_\_\_ GRID \_\_\_\_\_ PARCEL(S) \_\_\_\_\_ PROPOSED LOT SIZE \_\_\_\_\_

AS APPLICANT, I UNDERSTAND THE FOLLOWING: THE SYSTEM INSTALLED SUBSEQUENT TO THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC SEWERAGE IS AVAILABLE. THIS APPLICATION IS COMPLETE WHEN ALL APPLICABLE FEES AND A SUITABLE SITE PLAN HAVE BEEN RECEIVED. I ACCEPT THE RESPONSIBILITY FOR COMPLIANCE WITH ALL M.O.S.H.A. AND "MISS UTILITY" REQUIREMENTS. APPROVAL IS BASED UPON SATISFACTORY REVIEW OF A PERC CERTIFICATION PLAN.

TEST RESULTS WILL BE MAILED TO APPLICANT.

SIGNATURE OF APPLICANT \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT, BUREAU OF ENVIRONMENTAL HEALTH, WELL AND SEPTIC PROGRAM  
3525-H ELLICOTT MILLS DRIVE, ELLICOTT CITY, MARYLAND 21043-4544 (410) 313-1771 FAX (410) 313-2648  
TDD (410) 313-2323 TOLL FREE 1-877-4MD-DHMH

MARK: PLEASE REVIEW & DISCUSS

MS GAMES HAS CALLED  
ME AGAIN ABOUT POSSIBILITIES  
OTHER THAN SAND MOUND FOR  
CLARKSUE RIDGE LOT 57.

SHE SAID HER REACTION  
HAD SUGGESTED A DISPENSAL?  
SYSTEM AND A FRIEND HAD  
SUGGESTED FRANK SKINNER  
MIGHT APPROVE AN ODDER LOT  
WITH A SEPTIC < 100' FROM A WELL,

CONCLUSION  
SHE WILL CALL  
TO SCHEDULE CONFERENCE

I SUGGESTED SHE COME IN  
WITH HER ENGINEER FOR A  
BACKGROUND DISCUSSION ON  
ALTERNATIVES FOR EXISTING LOTS  
SO SHE COULD BETTER UNDERSTAND  
THE POSSIBILITIES FOR HER LOT.

SHE IS TRYING TO SET UP  
SOMETHING FOR NEXT MONDAY ON  
FRIDAY.

10/18/00

(CW)

10/23/00 3:30

## ATTENDANCE SHEET

[illegible]





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HOWARD COUNTY HEALTH DEPARTMENT

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

September 6, 2000

John and Geraldine Grimes  
245 Sand Trap Way  
Roswell, GA 30076

RE: Property Status -- A513361  
Clarksville Ridge, Lot 57  
Whitegate Road

Dear Mr. and Mrs. Grimes:

Since the percolation testing at the referenced lot on May 19, 2000, and our subsequent letter of June 6, 2000, a percolation certification plan proposal was submitted to this office. The septic reserve area proposed in that plan would be potentially acceptable (subject to minor revisions) for a conventional septic system were it not for the presence of a nearby well on the adjacent property.

The letter from Mike McCann of Fisher, Collins and Carter dated July 19, 2000 acknowledged that replacement of that well would be necessary for approval. Since that time, you and your agents have reported that replacement of the subject well does not appear likely at this time.

Without replacement of the well, the best remaining options for septic system approval include percolation testing for a sand mound septic system in the flattest part (believed to be the front) of the lot or percolation testing for an off-site sewage easement on an adjacent property. No other options for septic system approval appear viable at this time.

✓ If you have any questions, please call me at (410) 313-2691 if you have any questions.

Mark E. Rifkin

Water and Sewerage Program

cc: Mike McCann, FCC  
File

Howard County Health Department

To: \_\_\_\_\_

8/23

CW

RETURNED AS GRIMES'  
PHONECALL AND RESPONDED.  
TO HER QUESTIONS ABOUT  
THE STATUS OF THE PROPERTY  
AND WHERE TO GO FROM HERE.

WE TALKED IN GENERAL ABOUT  
THE ISSUES TO HELP HER UNDERSTANDING,  
CONCLUDING WITH THE COMMENT THAT  
IT WAS NOT APPROPRIATE FOR ME  
TO BE HER ADVOCATE - SHE SHOULD REPLY

From: \_\_\_\_\_  
ON THE ENGINEER FOR THAT - - -

Date: [ WITH MARKES ACKNOWLEDGEMENT I  
HD-170 ADVISED HER THAT A WRITTEN REPLY TO  
THE MCCANN PROPOSAL WOULD BE FORTHCOMING, ]

**FISHER, COLLINS  
& CARTER, INC.**

**CIVIL ENGINEERING CONSULTANTS  
and LAND SURVEYORS**

Terrell A. Fisher, P.E., L.S.  
Earl D. Collins, P.E.  
Ronald B. Carter, L.S.  
Charles J. Crovo, Sr., P.E., L.S.

July 19, 2000

Howard County Health Department  
Water and Sewerage Program  
3525-H Ellicott Mills Drive  
Ellicott City, Maryland 21043  
ATTN: Mr. Mark Rifkin, R.S.

**RE:** Clarksville Ridge  
Lot 57  
Existing Lot of Record

Dear Mr. Rifkin,


In accordance with your letter of June 6, 2000, we have prepared the tentative Percolation Certification Plan for the above-referenced project. For your review, we have attached a copy of this plan which indicates field run topography and locations of percolation holes from May 19, 2000 testing.

As described in your letter, the 10,000 square feet of septic area cannot be obtained on this lot. However, the relocation of the existing well on the adjacent property (Clarksville Ridge- Lot 56) would allow us to expand the septic area to approximately 2,500 square feet to 8,450 square feet as shown on the attached plan. A representative for the owner of this property will be contacting this neighbor to try to negotiate an agreement that will allow the relocation of the existing well. We will keep you informed of our status regarding the relocation of this well.

The other issue for this lot is the location of the proposed well. Considering the locations of the tentative sewerage area for this lot and the locations of the adjacent sewerage areas, the tentative well site is extremely limited. Based on the indicated topography, the location shown on the plan is not impacted by the proposed or adjacent septic areas.

At your convenience, please review the attached plan, and should you have any questions or require additional information, please do not hesitate to call. Your cooperation and assistance is greatly appreciated.

Very truly yours,  
Fisher, Collins and Carter, Inc.

  
Michael J. McCann

WO #61481  
mjm  
Encls.



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## HOWARD COUNTY HEALTH DEPARTMENT

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

June 6, 2000

John and Geraldine Grimes  
245 Sand Trap Way  
Roswell, GA 30076

RE: Percolation Test Results -- A 513361  
Clarksville Ridge, Whitegate Road, Lot 57  
Existing Lot of Record

Dear Mr. and Mrs. Grimes:

Percolation testing conducted May 19, 2000 on the above referenced property indicated extremely limited satisfactory soil conditions. Limiting factors include shallow depths to bedrock and groundwater and proximity to an adjacent well. Copies of the test results are enclosed.

Further review is contingent upon submission by a registered engineer of a percolation certification plan showing actual locations and elevations of all excavated test holes and a suitable house and well site. The plat should also include the locations of all existing wells and septic reserve areas on the property, as well as the locations of any other relevant features such as streams, swales, or existing structures. A note must be included certifying that all existing wells and septic systems within 100 feet of property boundaries have been shown.

The available satisfactory soils comprise significantly less than 10,000 square feet, which is the optimum amount of sewage reserve for most lots. This area could be theoretically expanded toward the left lot line if the adjacent well were replaced to a point further from this lot line. Also, since the only available satisfactory soils are at the highest portion of the lot, well site options are extremely limited. Accurate topography is critical to precise selection of a suitable well site not impacted by either the proposed septic area on this lot or adjacent septic systems.

The percolation certification plat should be submitted within 60 days to allow field verification if necessary. If you have any questions regarding this matter, please contact me at the above address or by calling (410) 313-2640.

Very truly yours,

Mark E. Rifkin, R.S.

Water and Sewerage Program

MR

Enclosures

cc: Johnny Hamilton, Long & Foster  
File



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## HOWARD COUNTY HEALTH DEPARTMENT

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

April 11, 2001

John and Geraldine Grimes  
245 Sand Trap Way  
Roswell, GA 30076

RE: Sand Mound Percolation Tests  
Clarksville Ridge, Lot 57  
Whitegate Road

Dear Mr. and Mrs. Grimes:

Percolation testing conducted March 9, 2001 revealed satisfactory soil conditions according to sand mound standards. Copies of the test data are enclosed. Such testing was conducted subsequent to previous test results which indicated that, although adequate area for one septic system was available, the lot did not meet minimum standards for two conventional systems due to excessive rock, excessive slopes and an adjacent well.

Further review is contingent upon submission by a registered engineer/surveyor of a percolation certification plan showing the following:

- 1) actual locations and elevations of standard and sand mound test holes, with passed and failed symbols for each type
- 2) a suitable house site
- 3) a initial well site in a suitable location, and preferably two suitable replacement sites
- 3) locations of any other relevant features such as streams, swales, wetlands or floodplains
- 4) a note must be included certifying that all existing wells and septic systems within 100 feet of property boundaries have been shown
- 5) two proposed sewage reserve areas, with "approved for leaching bed sewage disposal system only" and "approved for sand mound sewage disposal system only" placed as appropriate; the standard sewage easement statement should not reference the 10,000-square-foot requirement
- 6) field-run contours in the vicinity of the proposed sewage reserve areas, with one-foot contour intervals in the vicinity of the sand mound, and a note indicating field-run data as appropriate
- 7) footprint for one sand mound with correct topographical orientation and minimum spacing within the proposed sewage reserve area
- 8) designate the percent of existing slope in the sewage reserve area to be used in the sand mound calculations; no part of the sewage reserve area designated for the sand mound may exceed 12% slope

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Bureau of Environmental Health

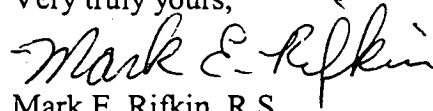
3525-H Ellicott Mills Drive • Ellicott City, Maryland 21043-4544

Water and Sewerage, Permits (410) 313-1771 Community Environmental Health Program (410) 313-1773  
(410) 313-2640 TDD(410) 313-2323 TOLL FREE - 1-877-4MD-DHMH

- 9) a typical sand mound cross-section
- 10) specify the number of bedrooms in the proposed dwelling
- 11) add a general note that a sand mound detail construction plan is to be submitted for review and approval by the Health Dept. prior to issuance of a building permit for the house.

The percolation certification plat should be submitted within 60 days to allow field verification if necessary. If you have any questions regarding this matter, please contact me at the above address or by calling (410) 313-2640.

Very truly yours,



Mark E. Rifkin, R.S.

Water and Sewerage Program

MR

Enclosures

cc: Johnny Hamilton, Long and Foster  
Michael McCann, FCC  
John Covalt  
Jim Clise  
File✓



N 37°42'44" E 328.85'

APPROVED  
SEWAGE DISPOSAL  
SYSTEM ONLY  
(APPROX. 630  
SQ.FT.)

SAND BED

AREA APPROVED  
FOR SAND MOUND  
SEWAGE DISPOSAL  
SYSTEM ONLY

LOT 57

L.O.D.

SM'A

SM'C

L.O.D.

DECK ABOVE  
PORCH BELOW

Existing Grave Driveway

Propane tank

L.O.D.

1500 Gal. Septic Tank  
Inv. In 398.5  
Inv. Out 398.2  
Fin. 399.0

PUMP TANK  
Inv. In 397.9  
Fin. Grd. 401.0

B00152324  
2/25/05  
LP tank OK  
152324

ROAD

GATE

3

HOWARD COUNTY  
PERMIT APPLICATION

PERMIT NUMBER  
B00147655 MAR

Building Address 6714 WILLOWDALE RD,  
CLARKSVILLE, MD 21029  
Suite/Apt. #: \_\_\_\_\_ SDP/WP/Petition #: \_\_\_\_\_  
Census Tract \_\_\_\_\_ Subdivision Clarkville Ridge  
Section 3 Area \_\_\_\_\_ Lot 57  
Tax Map 35 Parcel 203 Grid 21  
Zoning R1 Map Coordinates 14K11 Lot size 1.23

Existing Use Building lot  
Proposed Use new home  
Estimated Construction Cost \$ 300,000.00  
New Custom SFA  
Description of Work 2 bed, 2 bath, open cedar home  
with detached 2 car garage  
5 1/2 baths

Occupant or Tenant None  
Contact Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_

Property Owner's Name Steven Dellington & Richard Hopkins  
Address 9515 Hickory Lane  
City Columbia State MD Zip Code 21045  
Home Phone 410-290-9856 Work Phone 410-318-8675  
Applicant's Name & Mailing Address, (if other than stated hereon):  
Fax 368-8688  
Phone \_\_\_\_\_ Fax \_\_\_\_\_

Contractor Company DeReggi Construction Co  
Contact Person Christine DeReggi  
Address 1525 Barnesville Rd  
City Boyd's State MD Zip Code 20841  
License No. 2709  
Phone 240-876-7753 Fax 301-540-0668

Engineer or Architect Company Lindal Cedar Homes  
Contact Person Jim Walters ext 316  
Address 4300 South 14th Place  
City Seattle State WA Zip Code 98178  
Phone 800-395-7360 Fax 206-725-1615

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: _____	Water Supply: _____ Public _____ Private _____
No. of stories: _____	Sewage Disposal: _____ Public _____ Private _____
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____	Sprinkler system: <u>N/A</u> <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____
State Certified Modular _____	

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: _____ Public _____ Private <input checked="" type="checkbox"/>
1st floor: <u>29'6"</u> <u>52'3"</u>	Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/>
2nd floor: <u>13'7"</u> <u>21'4"</u>	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Basement: <u>32'5"</u> <u>29'6"</u>	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input checked="" type="checkbox"/>
Finished Basement <input checked="" type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms <u>3</u>	Sprinkler system: <u>N/A</u> <input checked="" type="checkbox"/> NFA #13D _____ NFA #13R _____ Other: _____
Multi-family dwellings: _____ No. of efficiency units _____ No. of 1 BR units _____ No. of 2 BR units _____ No. of 3 BR units _____	
Other Structure: <u>garage</u> Dimensions: <u>9'24" x 24'</u> Footings: _____ Roof: <u>cross 4/12</u>	
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.

Applicant's Signature Christine DeReggi  
DeReggi Construction Co.  
Title/Company MR 5/21/04

Print Name Christine DeReggi  
9/27/04  
Date

Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY  
\*\* PLEASE WRITE NEATLY AND LEGIBLY \*\*

FOR OFFICE USE ONLY

5-11 B147655

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3030 COURT HOUSE DRIVE ELICOTT CITY, MD 21043 PERMITS (410) 313-2655 INSPECTIONS (410) 313-1910 AUTOMATED INFORMATION (410) 313-3800	<b>HOWARD COUNTY PERMIT APPLICATION</b>	<b>PERMIT NUMBER</b> B0017656 <i>see</i>
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<b>Building Address</b> <u>6714 Whitelake Rd.,</u> <u>Charlottesville, MD 21079</u>	<b>Property Owner's Name</b> <u>Steven Dellington &amp; David Hyatt</u>
<b>Suite/Apt. #:</b> _____ <b>SDP/WP/Petition #:</b> _____	<b>Address</b> <u>9515 Hickory Lane</u>
<b>Census Tract</b> <u>605103</u> <b>Subdivision</b> <u>Charlottesville Ridge</u>	<b>City</b> <u>Columbia</u> <b>State</b> <u>MD</u> <b>Zip Code</b> <u>21045</u>
<b>Section</b> <u>3</u> <b>Area</b> _____ <b>Lot</b> <u>51</u>	<b>Home Phone</b> <u>410-290-9356</u> <b>Work Phone</b> <u>410-368-8888</u>
<b>Tax Map</b> <u>35</u> <b>Parcel</b> <u>263</u> <b>Grid</b> <u>21</u>	<b>Applicant's Name &amp; Mailing Address</b> (if other than stated here): <u>Christine DeReggi</u> <b>Fax</b> <u>368-8688</u>
<b>Zoning</b> <u>KKDEB</u> <b>Map Coordinates</b> _____ <b>Lot size</b> <u>1.23</u>	<b>Phone</b> _____ <b>Fax</b> _____
<b>Existing Use</b> <u>Building lot SFD</u>	<b>Contractor Company</b> <u>DeReggi Construction Co.</u>
<b>Proposed Use</b> <u>2 car garage</u>	<b>Contact Person</b> <u>Christine DeReggi</u>
<b>Estimated Construction Cost</b> <u>\$ 50,000.00</u>	<b>Address</b> <u>625 Barnesville Rd.</u>
<b>Description of Work</b> <u>Detached 2 car, 1 story garage.</u>	<b>City</b> <u>Bards</u> <b>State</b> <u>MD</u> <b>Zip Code</b> <u>20841</u>
<b>Occupant or Tenant</b> <u>None</u>	<b>License No.</b> <u>2107</u>
<b>Contact Name</b> _____	<b>Phone</b> <u>240-876-1753</u> <b>Fax</b> <u>301-540-0648</u>
<b>Address</b> _____	<b>Engineer or Architect Company</b> <u>Lindal Besor Harris</u>
<b>City</b> _____ <b>State</b> _____ <b>Zip Code</b> _____	<b>Contact Person</b> <u>Jim Walters ext 316</u>
<b>Phone</b> _____ <b>Fax</b> _____	<b>Address</b> <u>4300 South 104th Place</u>
	<b>City</b> <u>Seattle</u> <b>State</b> <u>WA</u> <b>Zip Code</b> <u>98118</u>
	<b>Phone</b> <u>800-385-7360</u> <b>Fax</b> <u>206-725-1615</u>

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

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.

Christine DeReggi  
Applicant's Signature  
Christine DeReggi Construction  
Title/Company  
Date 4/23/04

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**  
\*\* PLEASE WRITE NEATLY AND LEGIBLY. \*\*  
FOR OFFICE USE ONLY



# Fredericktowne

ENVIRONMENTAL TESTING

# Labs

Inc.

3020 Ventrie Court • P.O. BOX 245 • Myersville, MD 21773 • 800-332-3340 • FAX 301-293-2386  
 www.fredericktownelabs.com • info@fredericktownelabs.com

## Certificate of Analysis

Acct. No. 4807 - 1

### Field Record

Site visit performed on: Monday, June 13, 2005 8:50 AM  
 by: John Straits State ID No. 4729JS  
 Affiliation: Fredericktowne Labs, Inc.  
 Property Owner: Steve Wellington and Dick Hopkins  
 Property Address: 6714 White Gate Road  
 Clarksville, MD 21029  
 Sample Source: Bathroom Sink  
 Treatment Devices Noted: No Treatment Devices Present  
 Sample taken after treatment: No  
 Well No.: HO-94-3611  
 Field pH: 7.4  
 Res. Cl.: 0.0 mg/l

### Laboratory Report

Sample Received at laboratory: 6/13/05 10:27 AM

#### Bacteriological results:

Total Colif. (/100ml)	E.coli. (/100ml)	Date/Time Analysis Started	Method	Analyst
<1	<1	6/13/05 3:08 PM	9221B	MM

Bacteriological analysis of this sample indicates the water is safe for human consumption.  
 Analysis was performed according to the 20th edition of Standard Methods

#### Inorganic Chemical results:

Parameter	Result Units	MCL	Date of Analysis	Method	Analyst
Turbidity	6.1 NTU	10	6/15/05	180.1	SER
Nitrate-Nitrogen	<0.5 mg/l	10	6/15/05	353.2	PH
Sand	<2 mg/l	5	6/13/05	0.065mm Filter	JD

Verified by:

*John Straits* 6/15/05  
 Date

Fredericktowne Labs, Inc. is a State Certified Water Quality Laboratory



Howard County  
Health Department

3525 H Ellicott Mills Drive, Ellicott City, MD 21043  
(410) 313-1771 Fax (410) 313-2648  
TDD (410) 313-2323 Toll Free 1-866-313-6300  
website: [www.hchealth.org](http://www.hchealth.org)

Penny E. Borenstein, M.D., M.P.H., Health Officer

*June*  
April 24, 2005

Steven Wellington & Richard Hopkins  
9515 Hickory Limb  
Columbia, MD 21045

**SENT VIA FACSIMILE 410-368-8688**

RE: Clarksville Ridge, Lot 57  
6714 Whitegate Road  
Clarksville, MD 21029  
BP #: B00147655  
Well Permit # HO-94-3611

Dear Sirs:

This is to advise you that the septic system for the above referenced property has been installed and inspected. **Final approval of the septic system was granted on 05/27/2005. Final approval of the well line connection to the dwelling was approved on 08/09/2004.**

The water sample results indicate that the water samples submitted for testing were free of coliform and fecal coliform bacteria at the time of sampling and are bacteriologically safe for drinking. The water sample results were found to be in compliance with COMAR water quality standards.

#### **INTERIM CERTIFICATE OF POTABILITY**

This certifies that the initial sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under well permit #HO-94-3611. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies. Based upon satisfactory investigation and evaluation, the Howard County Health Department as authorized by the Maryland Department of the Environment accepts this well system as required by COMAR 26.04.04.

This certificate may become final upon completion of the second bacteriological test, which is to be taken by the county health department within six months of receipt of this letter. **Please contact (410) 313-1773 to schedule a final water sample appointment. Currently, there is no charge for this final sampling.**

Date of Water Sample(s): 06/13/2005  
Date of Well Completion: 10/16/2003

Approving Authority,

*Brian Baker*

Brian Baker, R. S.  
Well & Septic Program

cc: Building Inspector's Office  
Community Health Services  
File