

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXX~~

410-313-2640

INDEXED

TAX ID #03-33121

P 513631

A 510124 A

DISTRICT _____

DATE 6/13/2000

DATE SYSTEM APPROVED 8/2/00

INSPECTOR M. Ritkin

SK Backhoe & Septic Service

IS PERMITTED TO INSTALL ☒ ALTER _____

ADDRESS 1220 FSK Highway, Keymar, MD 21757

PHONE 410-775-0562

SUBDIVISION The Christian Family Outreach Center

LOT 1

ROAD 1459 Sykesville Road

PROPERTY OWNER Michael Pfau TIM TRESS

ADDRESS _____

TOP SEAMED TANK REQUIRED

SEPTIC TANK CAPACITY 1500 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

PUMPED SEPTIC SYSTEM PROPOSED

INSTALL: 1-1500 Gallon Top Seamed Pump Chamber

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

TRENCHES - Trench to be 3 feet wide. Inlet 3½ feet below original grade. Bottom maximum depth 5½ feet below original grade. Effective area begins at 3½ feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Place the distribution box 10 feet off the intersection of the 85.57' and the 143.14' lot lines. Run trenches on contour in both directions.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. (manhole cleanouts required on both tanks)

*NO MORE THAN 3½' OF COVER ON SEPTIC TANK OR PUMP CHAMBER

CALL HEALTH DEPARTMENT TO FIELD LOCATE NEW TANK LOCATION - SRK/RJP

PLANS APPROVED BY Steven R. Krieg/Ronald J. Pinkley

DATE 12-09-1999

COVER NO WORK UNTIL INSPECTED AND APPROVED

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESS OR FAILURE OF THIS PERMIT

BUILDING PERMIT SIGNED

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO MAIN LINE. SWEEPS 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

HD-260(6-90)

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

2/12/03 B00140310 FINISH BASEMENT (NO DRAWING)

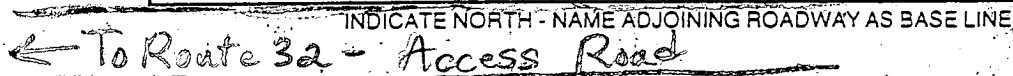
B00125484

Deck 7/21/00

10/14/01 B005073R-IG POOL

4-11-05 B00153120-DECK

#513631



DISTRIBUTION BOX LEVEL OK - Baffle

EFFECTIVE GRAVEL DEPTH 2.0 FT. TOTAL LENGTH 240 FT.

DRYWALL INSIDE DIAMETER 11.125 FT. EFFECTIVE DEPTH BELOW INLET 1 FT.

REMARKS: 7/7/00 House connection made. Everything satisfactory.

DATE SYSTEM APPROVED

INSPECTOR

M. Ripkin

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043
461-0033

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation ☒
Replacement ☐

Receipt # _____
Date _____

Name of Installer S.K. Plumbing & Heating Inc

Telephone 410-775-0922

License Number 12285

Certified Well Pump Installer _____ Well Driller _____ Registered Plumber Yes

Name of Property Owner Trinity House

Telephone 410-315-8722

Subdivision Christian Family Lot # 1

Well Tag # 110-44-2192

Site Address 1459 S. Resville Rd

Pump

1. Type
a. Deep well jet _____
b. Shallow well jet _____
c. Submersible Yes

Motor

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

Pitless Adapter

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

2. Make JACOBI

3. Model # _____

4. Capacity 5 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 Screen

Tank

1. Capacity Well-X-trol 203
2. Pressure relief valve? Yes

Piping

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

Well data

1. Depth 165 ft.
2. Yield 12 GPM
3. Static water level 18 ft.
4. Will water supply be disinfected by installer? Yes

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

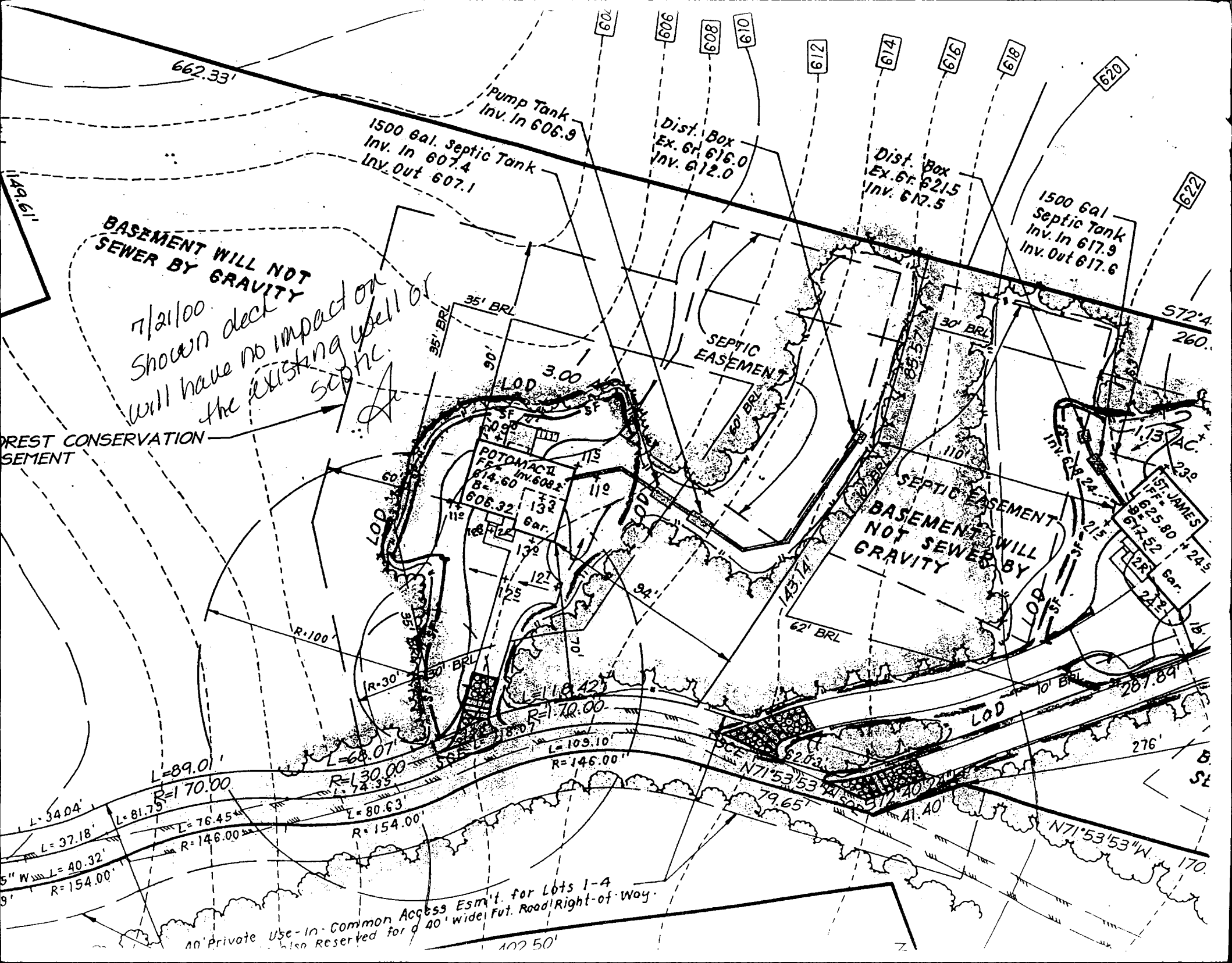
All information given above is true to the best of my knowledge

6/27/00-WPI ON
(BB) SRH

Signature of Applicant: _____

Date: 8-3-00

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



BASEMENT WILL NOT SEWER BY GRAVITY
7/21/00
Shown deck will have no impact on the existing well or septic.

FOREST CONSERVATION EASEMENT

SEPTIC EASEMENT

SEPTIC EASEMENT
BASEMENT WILL NOT SEWER BY GRAVITY

40' Private Use-In-Common Access Esm't. for Lots 1-4
Also Reserved for a 40' wide Fut. Road Right-of-Way.

APPLICATION

PERCOLATION TESTING

A 5/6/24

P _____

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

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

~~Investigations~~
~~Ex 5-17~~
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 ~~Robert Nixon~~ ~~(Nixon)~~ Christian Family Outreach Center
ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER TSA GROUP, INC.
ADDRESS _____ PHONE _____

PROPERTY LOCATION: ST
SUBDIVISION _____ LOT NO. Holes for lots 1 & 2

ROAD AND DESCRIPTION MD RT 32, APPROX 3 mi SOUTH OF I-70

TAX MAP 15 PARCEL # 90

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] TSA Group
(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



RT 32

CLAY

INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____

APPLICATION

PERCOLATION TESTING

A 510124

P _____

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

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

DISTRICT _____

DATE 5-4-98

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

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

PROPERTY OWNER CHRISTIAN FAMILY OUTREACH CENTER MICHAEL PFAU

ADDRESS 1475 SYKESVILLE RD., SYKESVILLE, MD 20874 PHONE _____

ENGINEER
AGENT OR PROSPECTIVE BUYER TSA GROUP, INC

ADDRESS 8480 BAUD. NAT. PCE, ELLICOTT CITY, MD 21043 PHONE 410-465-6105

PROPERTY LOCATION: AGENT - STEVE SHIPPE (NOT TSA) 410-472-2993

SUBDIVISION 1475 SYKESVILLE RD (RTE 32) LOT NO. 2182

ROAD AND DESCRIPTION EAST SIDE ROUTE 32 APPROX. 3/4 MI NORTH OF OLD FREDERICK RD

1459 Sykesville Road

TAX MAP 9 PARCEL # 41

SIZE OF LOT 1.3 AC ±

TYPE BLDG. _____

~~SINGLE FAMILY DWELLING OR COMMERCIAL~~

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNLESS 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

COUNTY #

SOIL PROFILE

0' ALL P3A-P3D

orge
sa cl
lm

3

orge brn
red/yel
si sa lm
10-15%
saprolite
frags

11'9"
-13

P3E

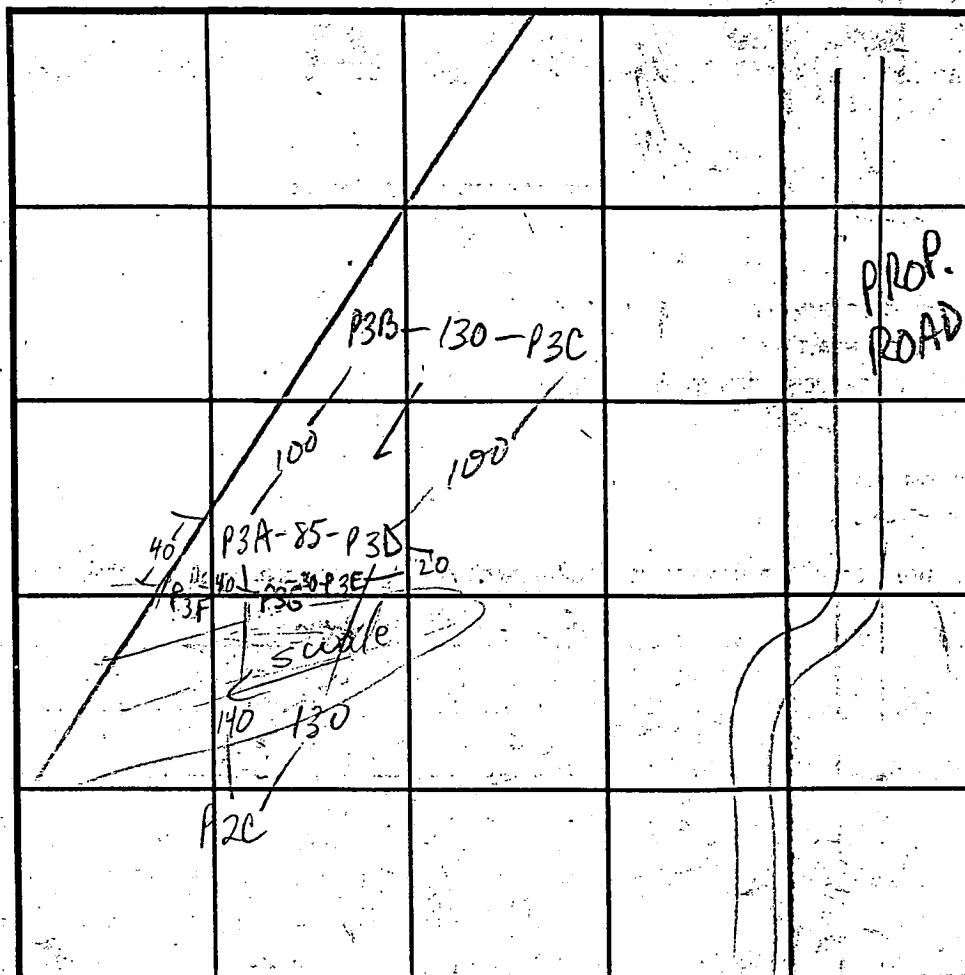
orge
tan brn
sa cl
20% mica
saprolite

12

P3F/G

3

orge
brn
si sa lm
10% frags



SOIL PROFILE

0'

INDICATE NORTH - NAME ADJOINING ROADWAY ABOVE LINE

RT. 32

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
6/2/98	P3As/V	4'13"	3:24	3:26	3:26	3:28	2
	P3Ds/V	4'11'9"	3:27	3:29	3:29	3:33	4
	P3C F/V	3'5/13	3:36	3:37	3:37	3:39	2
	P3Bs/V	4'12'9"	3:38	3:39	3:39	3:41	2
6/9/98	P3E S						
	P3E V	12	H ₂ O @	12'			
	P3F S	2	10:50	11:00	3/4" R = 0.16		
		3	11:07	11:16	11:16	11:38	22
	P3F V	12	SLIGHT	MOTTLES @	BOT		
	P3GS	4'3"	11:23	11:25	11:25	11:27	2
	P3G V	13	H ₂ O @ ?				

REMARKS

TYPE OF SOIL

TESTED BY

M. Ripkin

ALSO PRESENT

Flock crew
rep from TSA S. Shipp

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

3

TRENCH WIDTH

3

INLET DEPTH

3 1/2

MAXIMUM BOTTOM DEPTH

5 1/2

SQ. FT./BEDROOM

180

APPLICATION

PERCOLATION TESTING

A 510124

P _____

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

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

DISTRICT _____

DATE 5-4-98

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 CHRISTIAN FAMILY OUTREACH CENTER

ADDRESS 1475 SYKESVILLE ROAD, SYKESVILLE, MD 20874 PHONE _____

AGENT OR PROSPECTIVE BUYER TSA GROUP, INC.

ADDRESS 8480 BALD NAT. PKE, ELLICOTT CITY, MD 21043 PHONE 410-465-6105

PROPERTY LOCATION:

SUBDIVISION 1475 SYKESVILLE ROAD (RTE 32) LOT NO. 1

ROAD AND DESCRIPTION EAST SIDE ROUTE 32 APPROX. 3/4 MI. NORTH OF OLD FREDERICK ROAD

TAX MAP 9 PARCEL # 41

SIZE OF LOT 1.4 AC ± 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

COUNTY #

SOIL PROFILE

0' P2E
 orge
 sa
 cl 1m
 3 orge brn
 sa mica 1m
 10% frags
 1 w/depth
 7 1/2 gray
 mottles
 10 orge brn
 sa mica 1m
 13 H₂O

P2F

orge red
 brn
 sa 1m

4 orge
 brn
 si 1m

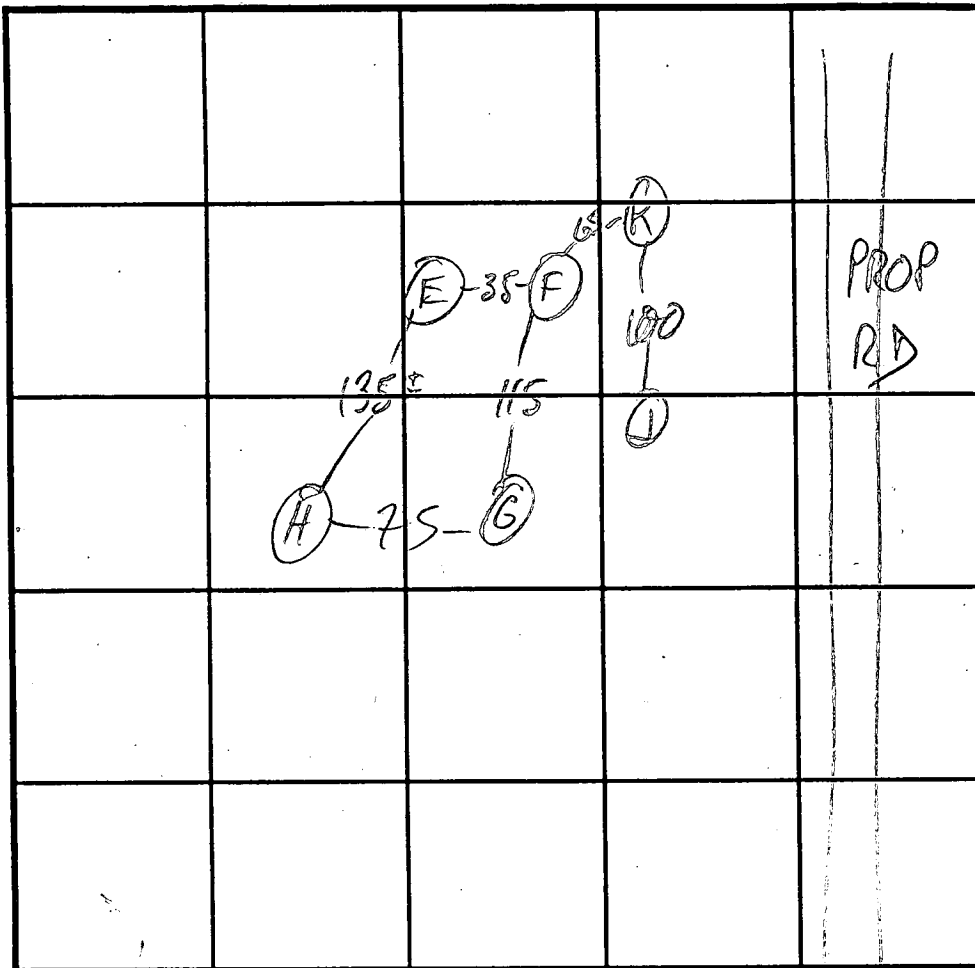
7 gray mottles

8 orge
 brn
 si 1m
 10% frags

G H

red brn
 cl 1m

5 1/2 red
 orge
 si mica 1m
 10% frags
 damp @
 uncertain
 depth



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

RT 32

SOIL PROFILE

0' K
 red brn
 cl 1m
 5 tan
 brn
 sa 1m
 10% frags
 suspect
 mottles
 @ 7 1/2
 12

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
6/9/98	P2E s/v	4/13	11:41	11:43	11:43	11:45	2
11	P2FS/v	4 1/2 / 13"	11:44	11:48	11:48	11:53	5
	P2G s/v	3 / 13 3/4"	12:12	12:27	1/2" RED	16 Hg	12
	P2H v	12	mottles? @ 8 1/2				
	P2K s	5 1/2	1:04	1:06	1:06	1:12	6
	P2K v	12	suspected mottles @ 7 1/2 DRY				
	P2J v	8 1/2	CLAY TO BOT, DAMP				

REMARKS

TYPE OF SOIL

TESTED BY M. R. F. K. I. N.

ALSO PRESENT T. S. A. rep. S. Shipp, Fyock, v. crew

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

TRENCH WIDTH

INLET DEPTH

MAXIMUM BOTTOM DEPTH

SQ. FT./BEDROOM

APPLICATION

PERCOLATION TESTING

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P _____

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

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

DISTRICT _____

DATE 5-4-98

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

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

PROPERTY OWNER CHRISTIAN FAMILY OUTREACH CENTER (TIM KEANE)

ADDRESS 1475 SYKESVILLE ROAD, SYKESVILLE, MD 20874 PHONE 410-489-5510

AGENT OR PROSPECTIVE BUYER TSA GROUP, INC.

ADDRESS 8480 BALD. NAT. PCE, ELLICOTT CITY, MD 21043 PHONE 410-465-6105

PROPERTY LOCATION:

SUBDIVISION 1475 SYKESVILLE RD (RTE 32) LOT NO. Open Space near lot 1

ROAD AND DESCRIPTION EAST SIDE ROUTE 32 APPROX. 3/4 MI NORTH OF OLD FREDERICK ROAD

TAX MAP 9 PARCEL # 41

SIZE OF LOT 1.2 AC ± TYPE BLDG. SFD
(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC ~~FAIR~~ BECOME AVAILABLE. I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE IN 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 _____

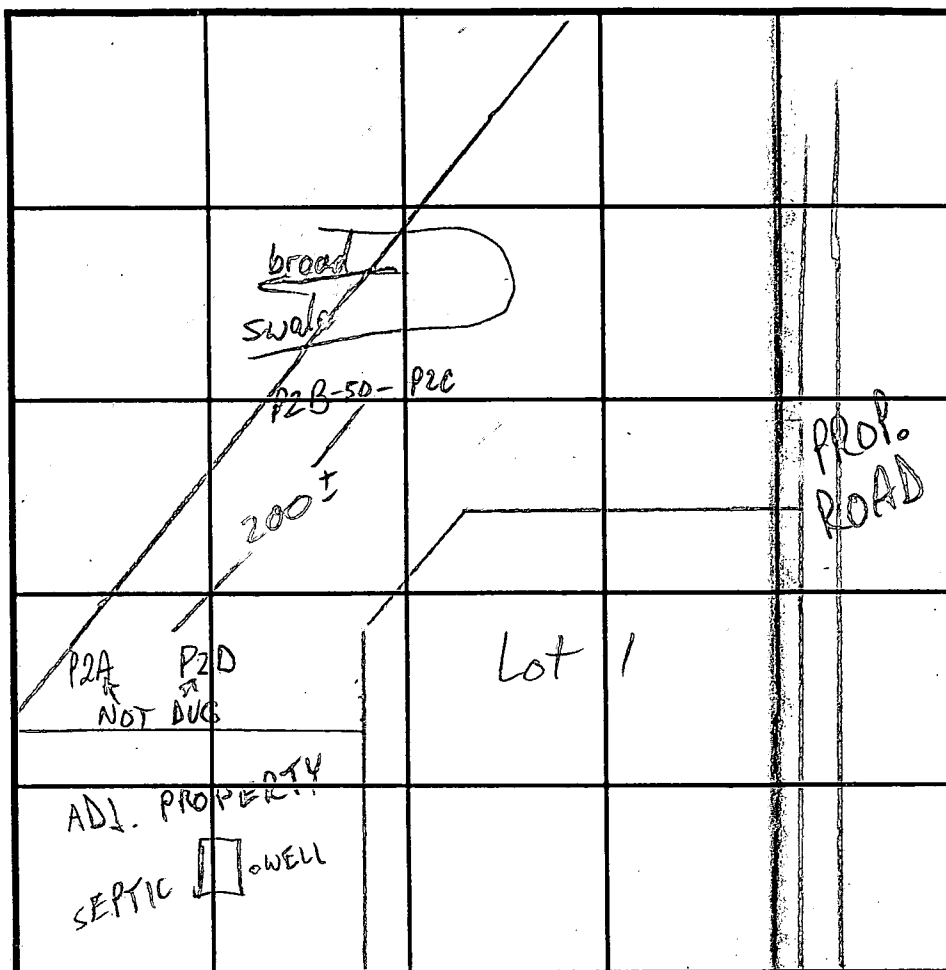
REASONS FOR REJECTION OR HOLDING _____

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

0'	P2R
	red cl per eng'r
6	H ₂ O + red cl per eng'r
10	

[illegible]

52 FT 7 BEDROOM

L622/F0022

DANIAL & JOYCE CHRISTIANSON
L3543/F0140

Signed
Perc Cert

MARYLAND

ROUTE

32

G1C3

G1C3

G1B2

N28°26'19"W
129.00'
S70°01'41"W
150.00'

N19°58'19"W
150.00'

S72°44'19"E

N70°01'41"E
139.62'

N18°03'20"W
277.97'

OPEN SPACE LOT
(TO BE DEDICATED TO THE
HOMEOWNER'S ASSOCIATION)

65 dBA NOISE LINE

LOT 1
47,053 S.F.
1.08 AC.

LOT 2
48,817 S.F.
1.07 AC.

LOT 3
51,199 S.F.
1.18 AC.

PROP. HOUSE

PROP. HOUSE

PROP. HOUSE

PROPERTY OF
WILLIAM & CYNTHIA
BRAUNSCHWEIGER
L2865/F0568

PROPERTY OF
GEORGE & PATRICIA
MOLESWORTH
L156/F0413

N77°33'04"E
199.08'

N12°22'46"N
133.53'

S84°44'46"W
127.20'

S83°46'40"W

N18°03'20"W
134.28'

USE-IN-COMMON
ACCESS EASEMENT

EV. STONE
PARKING AREA

APPROX.
LOCATION
EX. WELL

APPROX.
LOCATION
EX. C.O.

EX. POOL

607.87
P2H

602.49
P2-B

604.84
P2-C

607.23
P2G

609.02
P2I

PROP. WELL

P3-A
613.60

611.67
P3E

612.01
P3G

614.59
P3-D

610.66
P2F

613.86
P2K

616.73
4D

619.08
P3-C

615.64
4E

618.82
AC

621.66
P3B

622.21
P3I

623.28
P3K

624.64
P3G

624.68
4PR

620.70
P5A

625.40
4PL

625.54
4B

623.65
4A

624.68
4PR

625.40
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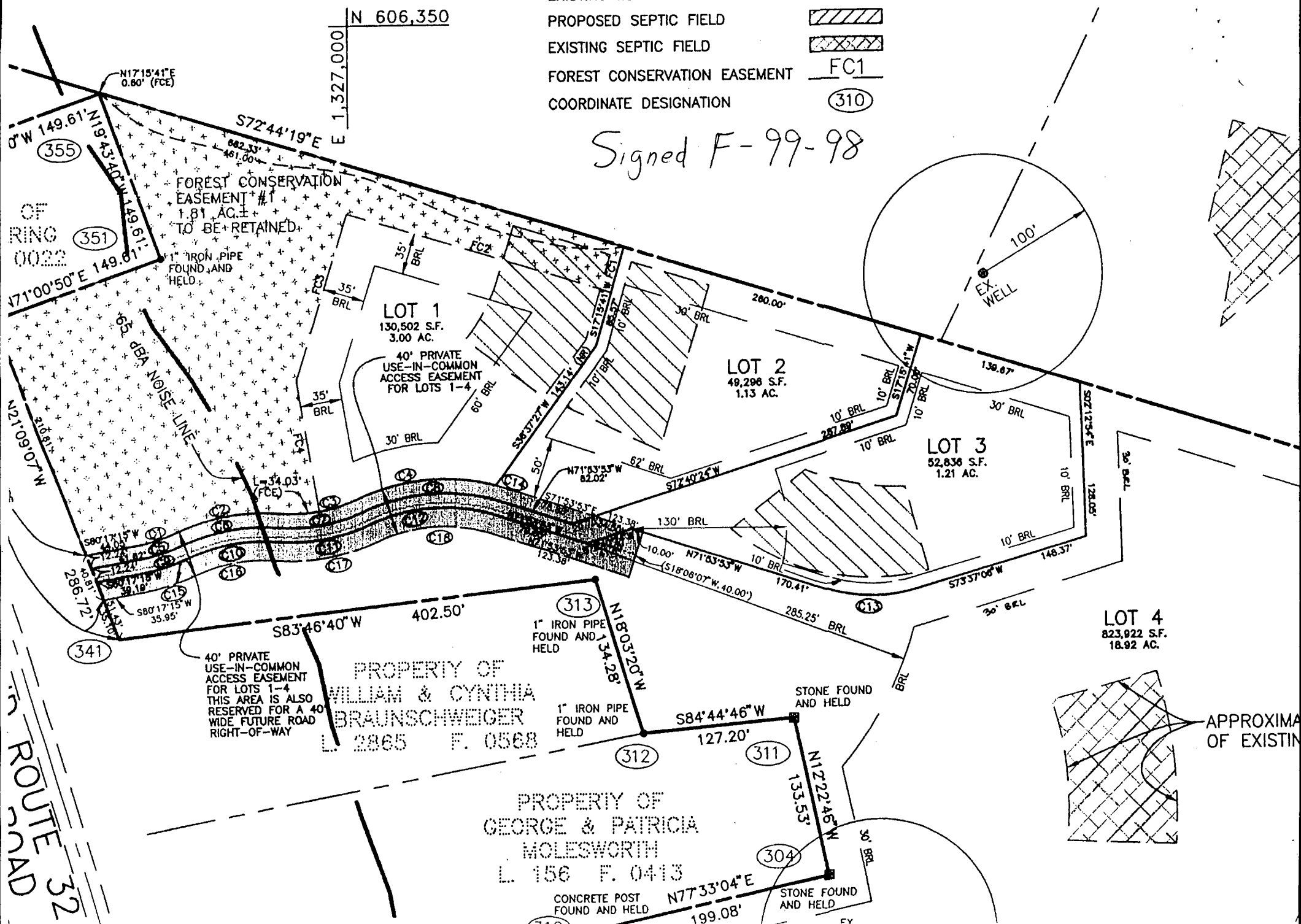
625.54
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LIMIT OF WETLAND
 EXISTING WELL
 PROPOSED SEPTIC FIELD
 EXISTING SEPTIC FIELD
 FOREST CONSERVATION EASEMENT
 COORDINATE DESIGNATION

Signed F-99-98



Depth of stone required below
distribution pipe 2 feet

~~BASEMENT WILL NOT
SEWER BY GRAVITY~~

Approved Septic System Plan

Howard County Health Department

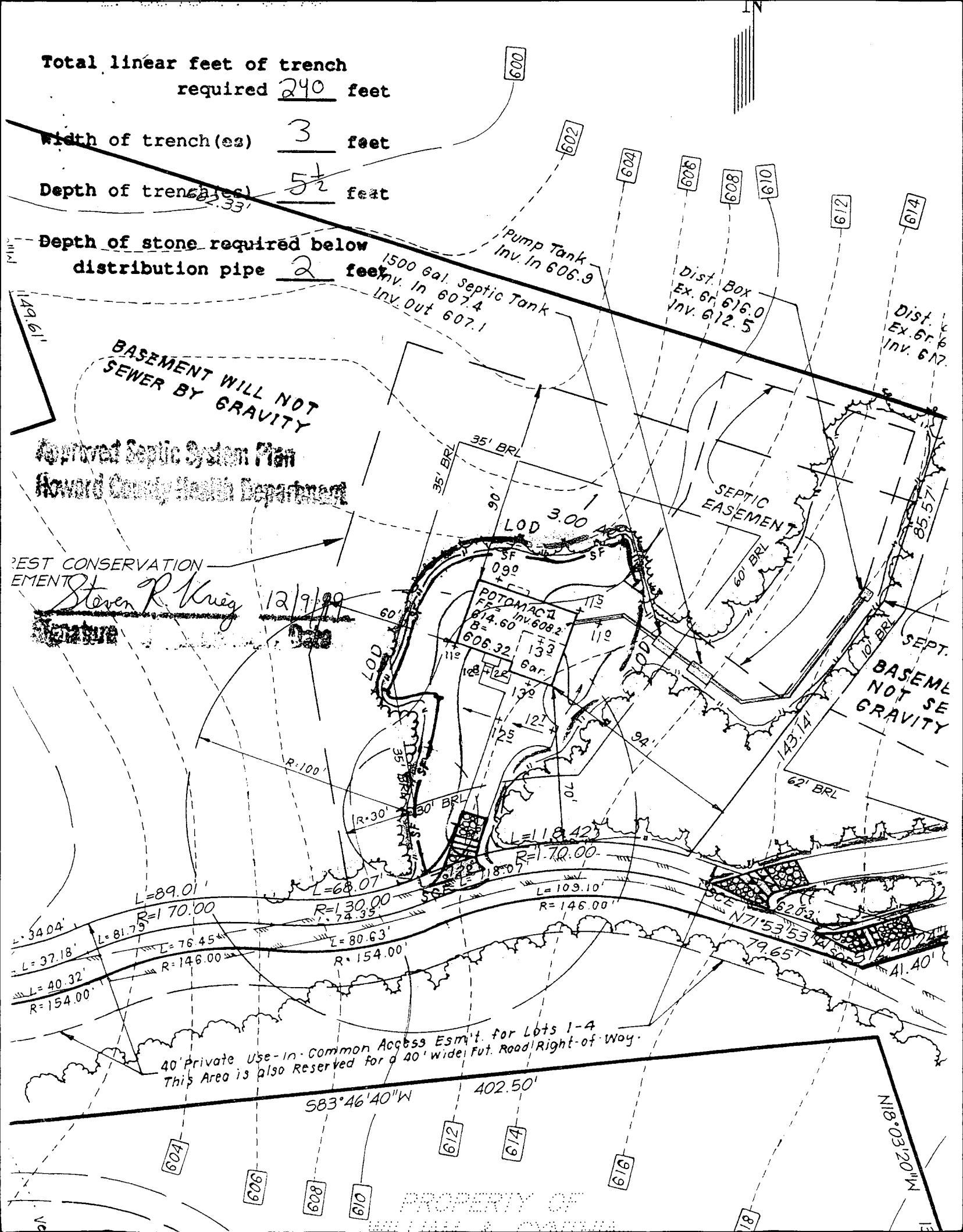
BEST CONSERVATION
ELEMENT 201

AGENT Steven R. Krieg
Signature

12/9/99

40' Private Use-In-Common Access Easmt. for Lots 1-4
This Area is also Reserved for a 40' wide Fut. Road Right-of-Way

PROPERTY OF



B 1	4705	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER <u>HO-94-2192</u> <small>70 fill in this form completely 79</small>
Date Received (APA) <u>2/16/99</u> <small>8 MM DD YY 13</small>		OWNER INFORMATION		
15 Last Name <u>PFAN</u> Owner <u>Michael</u> First Name <u>34</u>				
36 <u>6212 Devow Dr.</u> Street or RFD <u>55</u>				
57 <u>Columbia</u> Town <u>MD.</u> State <u>21044</u> Zip <u>76</u>				
DRILLER INFORMATION				
Driller's Name <u>Ralph MAYNE</u> License No. <u>MS D 116</u> <u>81</u>				
Firm Name <u>Ralph Mayne Well Drilling</u>				
Address <u>9120 Brown Church Rd. Mt Airy</u>				
Signature <u>Ralph Mayne</u> Date <u>2-10-99</u>				
B 2	WELL INFORMATION			
1 2		APPROX. PUMPING RATE (GAL. PER MIN.) <u>5</u> <u>12</u>		
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <u>500</u> <u>20</u>				
USE FOR WATER (CIRCLE APPROPRIATE BOX)				
<input checked="" type="checkbox"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION				
<input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)				
22 <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, DEWATERING				
<input type="checkbox"/> PUBLIC WATER SUPPLY WELL				
<input type="checkbox"/> TEST, OBSERVATION, MONITORING				
<input type="checkbox"/> GEO-THERMAL				
APPROXIMATE DEPTH OF WELL <u>150</u> FEET <u>24</u> <u>28</u>		APPROXIMATE DIAMETER OF WELL <u>6"</u> NEAREST INCH		
METHOD OF DRILLING (circle one)				
BORED (or Augered) <u>AIR-ROTARY</u> JETTED Jettied & DRIVEN				
30 <u>AIR-ROTARY</u> AIR-PERCussion ROTARY (Hydraulic Rotary)				
37 <u>CABLE</u> REVERSE-ROTARY Drive-POINT				
other _____				
REPLACEMENT OR DEEPENED WELLS (CIRCLE APPROPRIATE BOX)				
<input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL				
<input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED				
39 <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS				
<input type="checkbox"/> THIS WELL WILL DEEPEN AN EXISTING WELL				
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENED (IF AVAILABLE) 41 _____ 52				
Not to be filled in by driller (MDE OR COUNTY USE ONLY)				
APPROX. PERMIT NUMBER <u>54</u> <u>63</u>		GAP		
PERMIT No. <u>HO-94-2192</u> <small>70 71 72 73 74 75 76 77 78 79</small>				
B 3	LOCATION OF WELL			
8 COUNTY <u>Howard</u> 21				
23 SUBDIVISION <u>Christina Family Retreat Center</u> 42				
SECTION <u>44</u> <u>46</u> LOT <u>I</u> <u>48</u> <u>50</u>				
52 NEAREST TOWN <u>West Friendship</u> 71				
MILES FROM TOWN (enter 0 if in town) <u>2</u> M <u>1</u> <small>73 76 77 78</small>				
B 4	1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)		11 30 NEAR WHAT ROAD <u>MORT. 32</u>	
		ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)		
TAX MAP: <u>9</u> BLK: _____ PARCEL <u>91</u>		DISTANCE FROM ROAD <u>400</u> ENTER FT OR MI <u>38</u> <u>39</u>		
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL				
COUNTY NAME <u>Howard</u>		COUNTY NO. <u>W 511416 A</u>		
STATE SIGNATURE _____		INSERT S → _____		
DATE ISSUED <u>3/11/99</u>		EXP. DATE <u>3/11/00</u>		
43 MM DD YY 48		CO SIGNATURE _____		
NORTH GRID <u>547</u> <u>000</u>		EAST GRID <u>0814</u> <u>000</u>		
50 55		57 63		
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X				
SOURCES OF DRILLING WATER				
1. <u>well</u>				
2. _____				
3. _____				
WRITE THE BOX NUMBER FROM THE MAP HERE				
E <u>8124</u>				
N <u>52047</u>				
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 *				

MARYLAND

ROUTE

32

022 F. 0022

G1C3

PROPERTY OF
DANIAL & JOYCE CHRISTIANSON
L. 3543 F. 0140

G1C3

PROPERTY OF
WILLIAM & CYNTHIA
BRAUNSCHWEIGER
L. 2865 F. 0568

PROPERTY OF
GEORGE & PATRICIA
MOLEWORTH
L. 156 F. 0413

G1B2

N24°45'33"W 120.17'
S71°00'50"W 149.61'
N19°45'40"W 149.61'
N71°00'50"E 149.61'

273.93'
N17°15'41"E 0.60'
S72°44'19"E

FOREST CONSERVATION
EASEMENT #1
1.9 AC.±
TO BE RETAINED
20" LANDSCAPE
EDGE

OPEN SPACE LOT 5
(TO BE DEDICATED TO THE
HOMEOWNER'S ASSOCIATION)
90,952 SF (2.09 AC.)

LOT 1
47,085 S.F.
1.08 AC.

LOT 2
16,645 S.F.
1.07 AC.

LOT 3
51,223 S.F.
1.18 AC.

USE-IN-COMMON
ACCESS EASEMENT

S84°44'46"W

127.20'

N77°33'04"E

N12°22'46"W

133.53'

N18°03'20"W

134.28'

S83°46'40"W

402.50'

286.72'

N21°09'07"W

EXISTING
TREE LINE

85' DBA NOISE LINE

PROP. WELL

PROP. HOUSE

PROP. HOUSE

PROP. HOUSE

PROP. WELL

PROP. WELL

PROP. WELL

PROP. WELL

PROP. WELL

PROP. WELL

PROP. WELL

PROP. WELL

APPROX.
LOCATION
EX. C.O.

well notes
3/1/99
11/1/99

well note ok
3/1/99

well note 3/1/99

585

590

598

602

10' BRL

10' BRL

10' BRL

10' BRL

10' BRL

10' BRL

10' BRL

10' BRL

10' BRL

10' BRL

10' BRL

10' BRL

10' BRL

10' BRL

100'

100'

100'

100'

100'

100'

100'

C 1	9696	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE TYPE		THIS REPORT MUST BE SUBMITTED AFTER WELL IS COMPLETED. <u>OK 12/1/99 SRH</u>		
					COUNTY NUMBER	<u>W 511 4/6 A</u>	
ST/CO USE ONLY DATE Received MM DD YY 8 13		DATE WELL COMPLETED MM DD YY 10 23 99		Depth of Well 22 <u>165</u> 26 (TO NEAREST FOOT)		PERMIT NO. FROM "PERMIT TO DRILL WELL" <u>HO - 94 - 2192</u> 28 29 30 31 32 33 34 35 36 37	

OWNER <u>P. Fan</u> <u>Michael</u>	STREET OR RFD <u>HO Rt 32</u>	TOWN <u>West Friendship</u>
SUBDIVISION <u>Christian Family Rest Cr</u>	SECTION <u>1</u>	LOT <u>1</u>

WELL LOG		
Not required for driven wells		
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING		
DESCRIPTION (Use additional sheets if needed)	FEET FROM TO	check if water bearing
Top Soil	0 2	
Sandy	2 40	
Sand Stone	40 45	
MICKA	45 65	
Sand Stone	65 70	
MICKA	70 165	

GROUTING RECORD	
WELL HAS BEEN GROUTED (Circle Appropriate Box) <u>Y</u> <u>N</u>	
TYPE OF GROUTING MATERIAL (Circle one) CEMENT <u>CM</u> BENTONITE CLAY <u>BC</u>	
NO. OF BAGS <u>16</u> NO. OF POUNDS <u>1600</u>	
GALLONS OF WATER <u>96</u>	
DEPTH OF GROUT SEAL (to nearest foot) from <u>0</u> ft. to <u>30+</u> ft. (enter 0 if from surface)	
CASING RECORD	
casing types insert appropriate code below	
STEEL <u>ST</u> CONCRETE <u>CO</u>	
PLASTIC <u>PL</u> OTHER <u>OT</u>	
MAIN CASING TYPE <u>PL</u> Nominal diameter top (main) casing (nearest inch)! <u>6</u> Total depth of main casing (nearest foot) <u>50</u>	
OTHER CASING (if used) diameter inch depth (feet) from to	
SCREEN RECORD	
screen type or open hole insert appropriate code below	
STEEL <u>ST</u> BRASS <u>BR</u> OPEN HOLE <u>HO</u>	
PLASTIC <u>PL</u> OTHER <u>OT</u>	

PUMPING TEST		
HOURS PUMPED (nearest hour)	<u>3</u>	
PUMPING RATE (gal. per min.)	<u>12</u>	
METHOD USED TO MEASURE PUMPING RATE	<u>Bucket</u>	
WATER LEVEL (distance from land surface)		
BEFORE PUMPING	<u>21</u> ft.	
WHEN PUMPING	<u>23</u> ft.	
TYPE OF PUMP USED (for test)		
<u>A</u> air	<u>P</u> piston	<u>T</u> turbine
<u>C</u> centrifugal	<u>R</u> rotary	<u>O</u> other (describe below)
<u>J</u> jet	<u>S</u> submersible	

NUMBER OF UNSUCCESSFUL WELLS: <u>0</u>
WELL HYDROFRACTURED <u>Y</u> <u>N</u>
CIRCLE APPROPRIATE LETTER <u>A</u> A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED <u>E</u> ELECTRIC LOG OBTAINED <u>P</u> 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. <u>M SD 116</u> <u>Thad Wayne</u> DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)
LIC. NO. <u>M SD 116</u> <u>Thad E. Wayne</u>
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

DEPTH (nearest ft.)	
<u>HO</u> <u>48</u> <u>165</u>	
SLOT SIZE 1 <u>2</u> 3	
DIAMETER OF SCREEN (NEAREST INCH) from <u>56</u> to <u>60</u>	
GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68 <u>68</u>	
MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q	
TELESCOPE CASING LOG INDICATOR OTHER DATA	

PUMP INSTALLED	
DRILLER INSTALLED PUMP (CIRCLE) (YES or NO) <u>NO</u>	
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 <u>29</u>	
CAPACITY: GALLONS PER MINUTE (to nearest gallon) <u>31</u> <u>35</u>	
PUMP HORSE POWER <u>37</u> <u>41</u>	
PUMP COLUMN LENGTH (nearest ft.) <u>43</u> <u>47</u>	
CASING HEIGHT (circle appropriate box and enter casing height)	
<u>+</u> above } LAND SURFACE	
<u>-</u> below } <u>2</u> (nearest foot)	
LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURES AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)	

Well Permit No. HO - 94-2192

Location of property (road)

Subdivision Christian Family Retreat Ctr

Well Driller

Lot 1
Owner

Block

Plat

Sec.

Depth of well 165

Distance of measuring point (M.P.) above ground 2"

Static water level (S.W.L.) below M.P. 24

I. High rate pumping -- reservoir drawdown

Time pump started 11:00

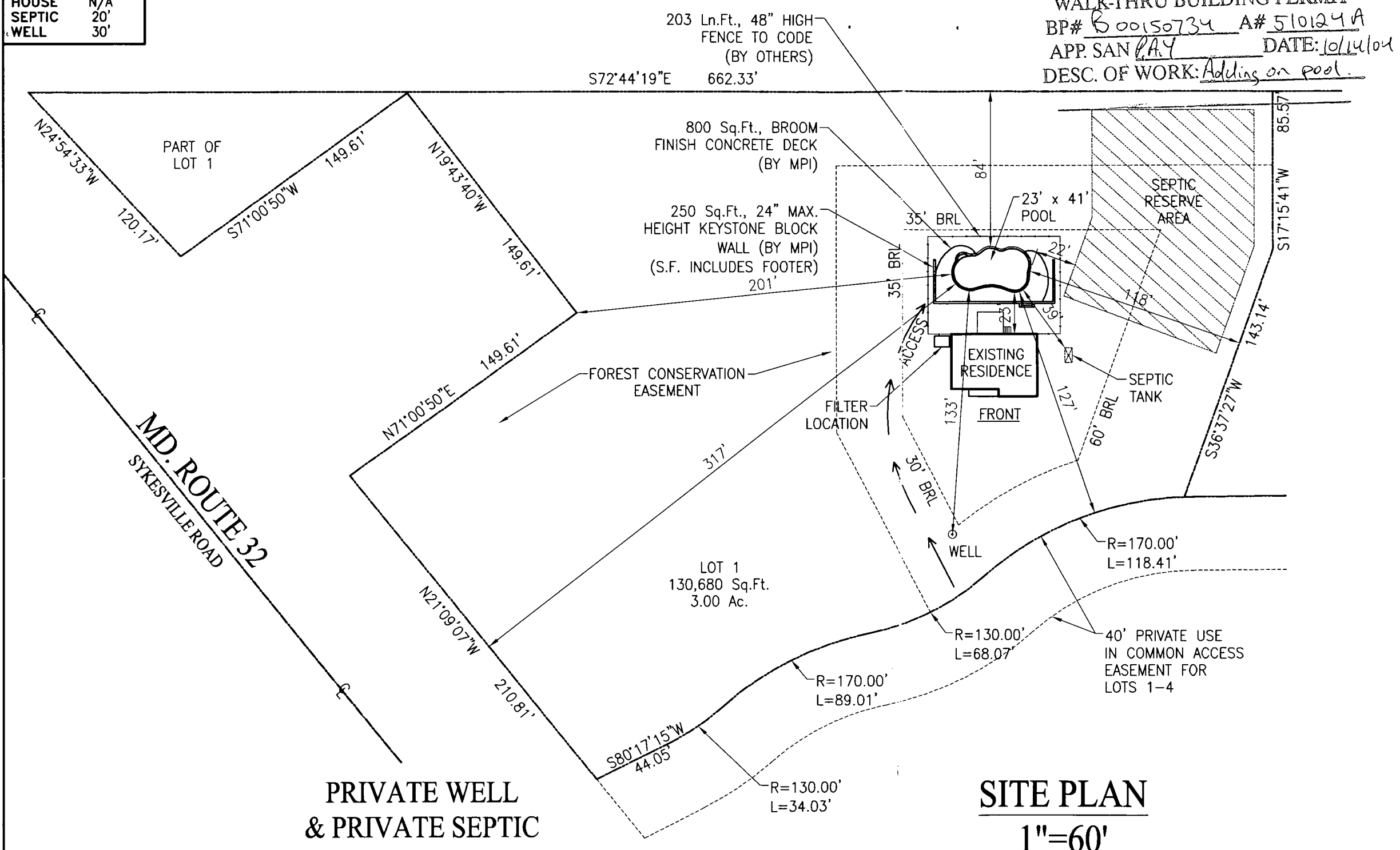
Pumping rate 126 PM

Total time 15 min to reach pumping water level 23 ft. below M.P.

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

[illegible]

SETBACKS:	
REAR PL.	50'
SIDE PL.	30'
HOUSE	N/A
SEPTIC	20'
WELL	30'



APPROVED
WALK-THRU BUILDING PERMIT
 BP# 600150734 A# 510124A
 APP. SAN P. AY DATE: 10/14/04
 DESC. OF WORK: Adding on pool.

Maryland POOLS Inc.
 9515 GERWIG LANE SUITE 119 COLUMBIA, MD 21046 410-995-6600
 11166 MAIN STREET SUITE 402 FAIRFAX, VA 22030 703-359-7192
 800-252-SWIM
 WWW.MARYLANDPOOLS.COM

EQUIPMENT LIST	
DIRT/GRADING:	T.B.D.
SPA:	NONE
RAISED BEAM:	NONE
TILE:	STB-808
COPING:	'SUIT SAVER' - WHITE
PLASTER:	WHITE MARBELITE
FILTER SYS:	C&C 420 SF CART. W/2HP PUMP
CLEANING SYS:	PCC-2000
TREATMENT SYS:	MINERAL SPRINGS
CONTROL SYS:	NONE
HEATER:	AC-125 (HEAT PUMP)
LIGHTS:	(2) SAM WATTS: 500 VOLTS: 120
LOVESEAT:	(1) @ 6' - OUTSIDE
AQUA BENCH:	(1) @ 8'
RAIL GOODS:	NONE
DECKING:	800 Sq.Ft., BROOM FINISH CONCRETE
FENCE:	BY OWNER
POOL COVER:	NONE TYPE: N/A
CHEMICALS:	\$50 CHEMICAL ALLOWANCE
OTHER ITEMS:	250 Ln.Ft., KEYSTONE BLOCK WALL 8' DIVING BOARD & STAND INITIAL WATER FILL (2) DOOR ALARMS
ELECTRIC:	200 FT.

POOL DATA	
SIZE/SHAPE:	23' x 41' - CUSTOM
POOL AREA:	750
SPA:	OTHER: 12
TOTAL AREA:	762
PERIMETER:	112
SPA:	
GALLONAGE:	31,875
DEPTH:	3'-6" TO 8'-6"

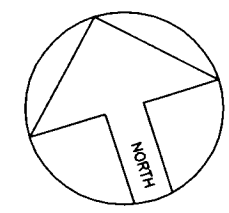
DIRECTIONS TO SITE	
BROKENLAND PKWY., TO 32-WEST-SYKESVILLE RD. ABOUT 1.3 MILES PAST THE EXIT FOR RT.70, TURN RIGHT INTO 1459 (DRIVEWAY WITH A COUPLE MAILBOXES) FIRST HOUSE ON LEFT.	MAP # 5
	GRID D-11

Timothy & Janet M. Tress
1459 Sykesville Road
Sykesville, Maryland 21784
Howard County

HOME PHONE: 410-489-9059
 CELLULAR PHONE: 410-708-8023 (Mrs.)
 OFFICE PHONE:

SITE PLAN			
LOT:	SUBDIVISION NAME:	DISTRICT:	PIN #
1	CHRISTIAN FAMILY OUTREAC.	03	331121
SCALE:	BY:	DATE:	JOB NUMBER:
1"=60'	J.L.R.	10/12/04	JS04-8130
			SHEET #:
			S-1

REVISIONS:
00/00/00



ZONE: ONE

SITE PLAN
1"=60'
 LOT 1
CHRISTIAN FAMILY OUTREACH CENTER
 ACCOUNT #331121
 MAP 9, GRID 18, PARCEL 41
 ELECTION DISTRICT NO.03
 HOWARD COUNTY, MARYLAND

PERMIT SET
 DATE: 10-13-04

SETBACKS:
REAR PL. 50'
SIDE PL. 30'
HOUSE N/A
SEPTIC 20'
WELL 30'

Maryland POOLS Inc.

9515 GERWIG LANE SUITE 119 COLUMBIA, MD 21046 410-995-6600
11166 MAIN STREET SUITE 402 FAIRFAX, VA 22030 703-359-7192
800-252-SWIM
WWW.MARYLANDPOOLS.COM

EQUIPMENT LIST

DIRT/GRADING: T.B.D.
SPA: NONE
RAISED BEAM: NONE
TILE: STB-808
COPING: 'SUIT SAVER' - WHITE
PLASTER: WHITE MARBELITE
FILTER SYS: C&C 420 SF CART. W/2HP PUMP
CLEANING SYS: PCC-2000
TREATMENT SYS: MINERAL SPRINGS
CONTROL SYS: NONE
HEATER: AC-125 (HEAT PUMP)
LIGHTS: (2) SAM WATTS: 500 VOLTS: 120
LOVESEAT: (1) @ 6' - OUTSIDE
AQUA BENCH: (1) @ 8'
RAIL GOODS: NONE
DECKING: 800 Sq.Ft., BROOM FINISH CONCRETE
FENCE: BY OWNER
POOL COVER: NONE TYPE: N/A
CHEMICALS: \$50 CHEMICAL ALLOWANCE
OTHER ITEMS: 250 Ln.Ft., KEYSTONE BLOCK WALL
8' DIVING BOARD & STAND
INITIAL WATER FILL
(2) DOOR ALARMS
ELECTRIC: 200 FT.

POOL DATA

SIZE/SHAPE: 23' x 41' - CUSTOM
POOL AREA: 750 SPA: OTHER: 12
TOTAL AREA: 762
PERIMETER: 112 SPA:
GALLONAGE: 31,875 DEPTH: 3'-6" TO 8'-6"

DIRECTIONS TO SITE

BROKENLAND PKWY., TO 32-WEST-SYKESVILLE RD. ABOUT 1.3 MILES PAST THE EXIT FOR RT.70, TURN RIGHT INTO 1459 (DRIVEWAY WITH A COUPLE MAILBOXES) FIRST HOUSE ON LEFT.

MAP #

5

GRID

D-11

Timothy & Janet M. Tress
1459 Sykesville Road
Sykesville, Maryland 21784
Howard County

HOME PHONE: 410-489-9059
CELLULAR PHONE: 410-708-8023 (Mrs.)
OFFICE PHONE:

SITE PLAN

ZONE:

ONE

LOT: 1	SUBDIVISION NAME: CHRISTIAN FAMILY OUTREACH	DISTRICT: 03	PIN #: 331121
SCALE: 1"=60'	BY: J.L.R.	DATE: 10/12/04	JOB NUMBER: JS04-8130
			SHEET #: S-1

203 Ln.Ft., 48" HIGH FENCE TO CODE (BY OTHERS)
S72°44'19"E 662.33'

800 Sq.Ft., BROOM FINISH CONCRETE DECK (BY MPI)

250 Sq.Ft., 24" MAX. HEIGHT KEYSTONE BLOCK WALL (BY MPI) (S.F. INCLUDES FOOTER) 201'

FOREST CONSERVATION EASEMENT

FILTER LOCATION

EXISTING RESIDENCE

FRONT

SEPTIC TANK

WELL

LOT 1
130,680 Sq.Ft.
3.00 Ac.

SITE PLAN

1"=60'

LOT 1

CHRISTIAN FAMILY OUTREACH CENTER

ACCOUNT #331121
MAP 9, GRID 18, PARCEL 41
ELECTION DISTRICT NO.03
HOWARD COUNTY, MARYLAND

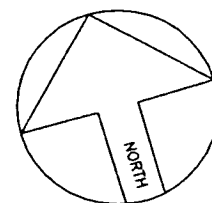
PERMIT SET

DATE: 10-13-04

REVISIONS:

00/00/00

ZONE: ONE



APPROVED
WALK-THRU BUILDING PERMIT
BP# 153120A# 510124A/P 513631
APP. SAN Kacee Norman DATE: 4-11-05
DESC. OF WORK: Deck PRIVATE WELL & PRIVATE SEPTIC

MD. ROUTE 32
SYKESVILLE ROAD

PART OF LOT 1