

9/21/00
a.m. Final

PERMIT
SEWAGE DISPOSAL SYSTEM
HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
410-313-2640

P 514188

A 513337

ISSUE DATE 8/15/2000

APPROVAL DATE 9/22/00

04-335988 INDEXED

John W. Pfaff Builders, Inc. IS PERMITTED TO INSTALL _____ ALTER _____

ADDRESS 15119 Oak Orchard Road, New Windsor, MD 21776 PHONE 410-795-6200

SUBDIVISION William Ridgely Property LOT NUMBER 2 ADDRESS 2177 Roxbury Mills Road

PROPERTY OWNER Nancy Putnam PROPERTY OWNER'S ADDRESS 3828 Wilberta Street

SEPTIC TANK CAPACITY 1000 GALLONS Olney, MD 20832

PUMP CHAMBER CAPACITY _____ GALLONS

NUMBER OF BEDROOMS 3 *** TOP SEAMED SEPTIC TANK REQUIRED ***

SQUARE FEET PER BEDROOM 180

LINEAR FEET OF TRENCH REQUIRED 180

TRENCHES: Trenches to be 3 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 5 feet below original grade. 2 feet of stone below distribution box.

LOCATION: Place the distribution box 130 feet off the left lot line and 30 feet off the rear lot line as seen from Route 97. Run trenches along contour toward the right lot line.

Distribution box must be 100' from well!

PLANS APPROVED Donna K. Soe OK SRU 8/17/00 DATE 6/12/2000

PERMIT VOID AFTER 2 YEARS

NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS

NOTE: TOP OF SEPTIC TANKS ARE TO BE NO DEEPER THAN 3.0 FEET BELOW FINISH GRADE

NOTE: WATERTIGHT SEPTIC TANKS REQUIRED

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS, 90° ELBOWS ARE NOT ACCEPTABLE

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX, DRAINFIELDS) TO BE 100 FEET FROM ANY WATER WELL UNLESS OTHERWISE SPECIFICALLY AUTHORIZED

NOTE: NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH UNLESS SPECIFICALLY AUTHORIZED

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

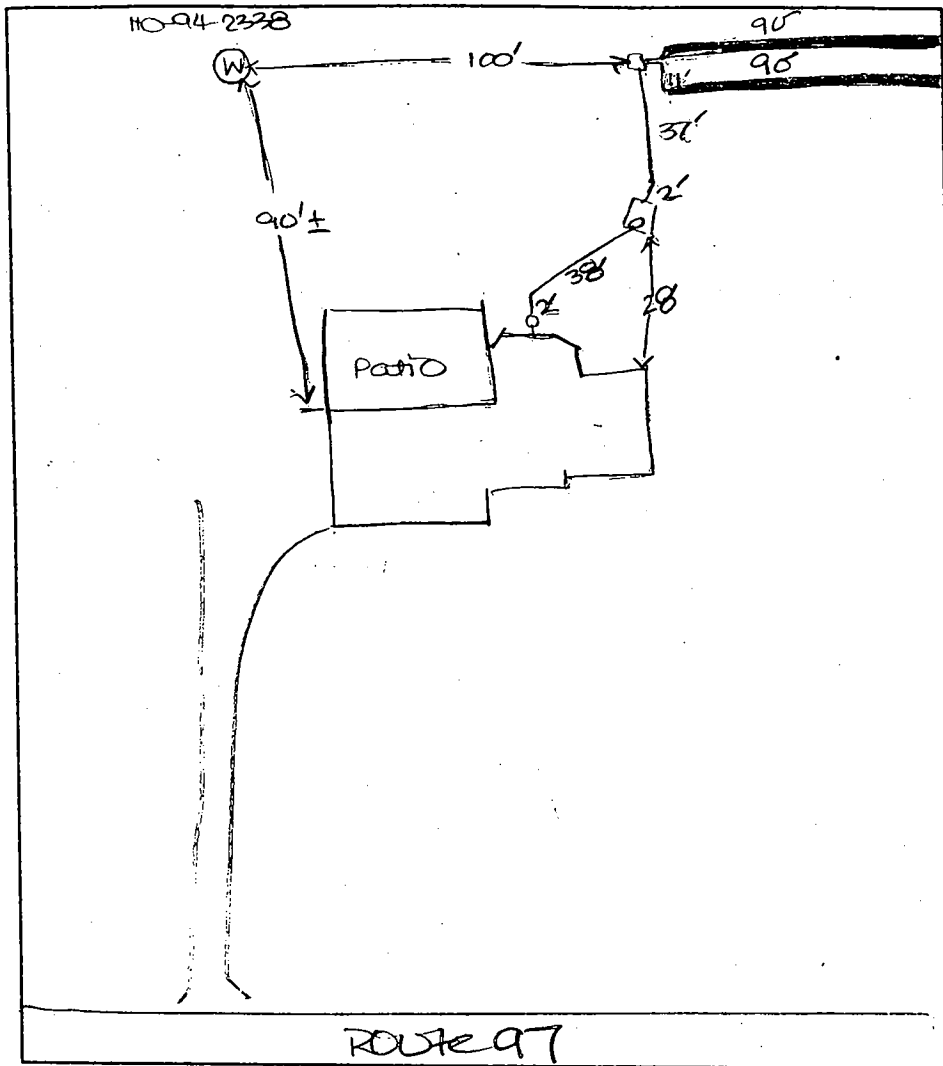
NOTE: IF PUMPED SEPTIC SYSTEM REQUIRED, (1) SEPTIC PUMP DETAIL TO BE PROVIDED BY INSTALLER PRIOR TO ISSUANCE OF SEPTIC PERMIT (2) PUMP PERFORMANCE TEST IS NECESSARY PRIOR TO HEALTH DEPARTMENT APPROVAL OF SEPTIC PERMIT

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
CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

DO NOT PERMIT WORK
5/17/01
B00130264 - pool

P 514188

NOT TO SCALE



TRENCH DATA

TRENCH WIDTH 3
TRENCH INLET DEPTH 3
TRENCH BOTTOM DEPTH 5
DEPTH OF STONE 2
NUMBER OF TRENCHES 2
TOTAL TRENCH LENGTH 180
ABSORBENT AREA 540
DISTRIBUTION BOX LEVEL ✓
BAFFLE IN DISTRIBUTION BOX ✓

SEPTIC TANK DATA

SEPTIC TANK 1000 GALLONS
MANHOLE RISER N/A
6 INCH INSPECTION PORT ✓

PUMP CHAMBER DATA

PUMP CHAMBER
GALLONS _____
MANHOLE RISER _____
ALARM _____
PUMP PERFORMANCE TEST _____

PRE-CONSTRUCTION INSPECTION: _____

INSPECTION COMMENTS: 9/2/00 FINAL INSP - OK to cover all septic work. DLQ

INSPECTOR DLQ DATE SYSTEM APPROVED 9/2/00

APPLICATION

PERCOLATION TESTING

A 513337

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

Proposal - to relocate
existing SDA to accommodate
preferred house site

DISTRICT

DATE

P _____

3/21/00

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 Nancy P. Putnam

ADDRESS 3828 Wilberta St., Olney, MD 20832 PHONE 301/774-0852

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION William Ridgely LOT NO. Lot 2

ROAD AND DESCRIPTION MD Route #97 (2177 Rt 97, Cooksville, MD)

Plat # 3543 TAX ID # 04-335988
TAX MAP _____ PARCEL # _____

SIZE OF LOT 1.549 AC TYPE BLDG. Single Family Dwelling
(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE
FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO
COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

Nancy P. Putnam
(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

SCALE 1" = 100'

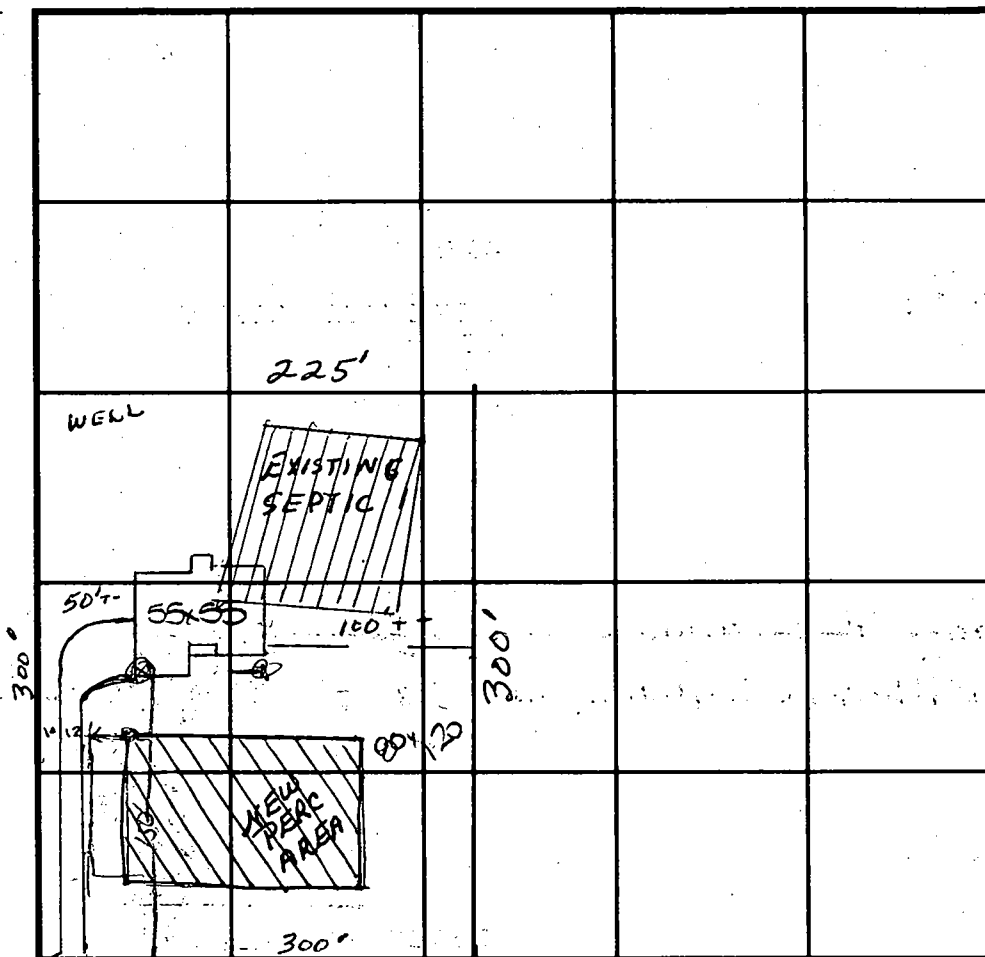
COUNTY #

SOIL PROFILE

0'

SOIL PROFILE

0



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Rt 9ND

SOUTH

← NORTH

[illegible]

REMARKS _____

TYPE OF SOIL _____

TESTED BY _____ ALSO PRESENT _____

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

INLET DEPTH	MAXIMUM BOTTOM DEPTH	SQ. FT./BEDROOM
1.0	1.0	1.0
1.5	1.5	1.5
2.0	2.0	2.0
2.5	2.5	2.5
3.0	3.0	3.0
3.5	3.5	3.5
4.0	4.0	4.0
4.5	4.5	4.5
5.0	5.0	5.0
5.5	5.5	5.5
6.0	6.0	6.0
6.5	6.5	6.5
7.0	7.0	7.0
7.5	7.5	7.5
8.0	8.0	8.0
8.5	8.5	8.5
9.0	9.0	9.0
9.5	9.5	9.5
10.0	10.0	10.0
10.5	10.5	10.5
11.0	11.0	11.0
11.5	11.5	11.5
12.0	12.0	12.0
12.5	12.5	12.5
13.0	13.0	13.0
13.5	13.5	13.5
14.0	14.0	14.0
14.5	14.5	14.5
15.0	15.0	15.0
15.5	15.5	15.5
16.0	16.0	16.0
16.5	16.5	16.5
17.0	17.0	17.0
17.5	17.5	17.5
18.0	18.0	18.0
18.5	18.5	18.5
19.0	19.0	19.0
19.5	19.5	19.5
20.0	20.0	20.0
20.5	20.5	20.5
21.0	21.0	21.0
21.5	21.5	21.5
22.0	22.0	22.0
22.5	22.5	22.5
23.0	23.0	23.0
23.5	23.5	23.5
24.0	24.0	24.0
24.5	24.5	24.5
25.0	25.0	25.0
25.5	25.5	25.5
26.0	26.0	26.0
26.5	26.5	26.5
27.0	27.0	27.0
27.5	27.5	27.5
28.0	28.0	28.0
28.5	28.5	28.5
29.0	29.0	29.0
29.5	29.5	29.5
30.0	30.0	30.0
30.5	30.5	30.5
31.0	31.0	31.0
31.5	31.5	31.5
32.0	32.0	32.0
32.5	32.5	32.5
33.0	33.0	33.0
33.5	33.5	33.5
34.0	34.0	34.0
34.5	34.5	34.5
35.0	35.0	35.0
35.5	35.5	35.5
36.0	36.0	36.0
36.5	36.5	36.5
37.0	37.0	37.0
37.5	37.5	37.5
38.0	38.0	38.0
38.5	38.5	38.5
39.0	39.0	39.0
39.5	39.5	39.5
40.0	40.0	40.0
40.5	40.5	40.5
41.0	41.0	41.0
41.5	41.5	41.5
42.0	42.0	42.0
42.5	42.5	42.5
43.0	43.0	43.0
43.5	43.5	43.5
44.0	44.0	44.0
44.5	44.5	44.5
45.0	45.0	45.0
45.5	45.5	45.5
46.0	46.0	46.0
46.5	46.5	46.5
47.0	47.0	47.0
47.5	47.5	47.5
48.0	48.0	48.0
48.5	48.5	48.5
49.0	49.0	49.0
49.5	49.5	49.5
50.0	50.0	50.0
50.5	50.5	50.5
51.0	51.0	51.0
51.5	51.5	51.5
52.0	52.0	52.0
52.5	52.5	52.5
53.0	53.0	53.0
53.5	53.5	53.5
54.0	54.0	54.0
54.5	54.5	54.5
55.0	55.0	55.0
55.5	55.5	55.5
56.0	56.0	

SOIL PROFILE

erg. bin
clm

med
org btm
sa km

15% g/h

xiator

② / ③

topsoil

org red
brn cl
Lm

med

og ben
en

QENE-1D
seepage
water

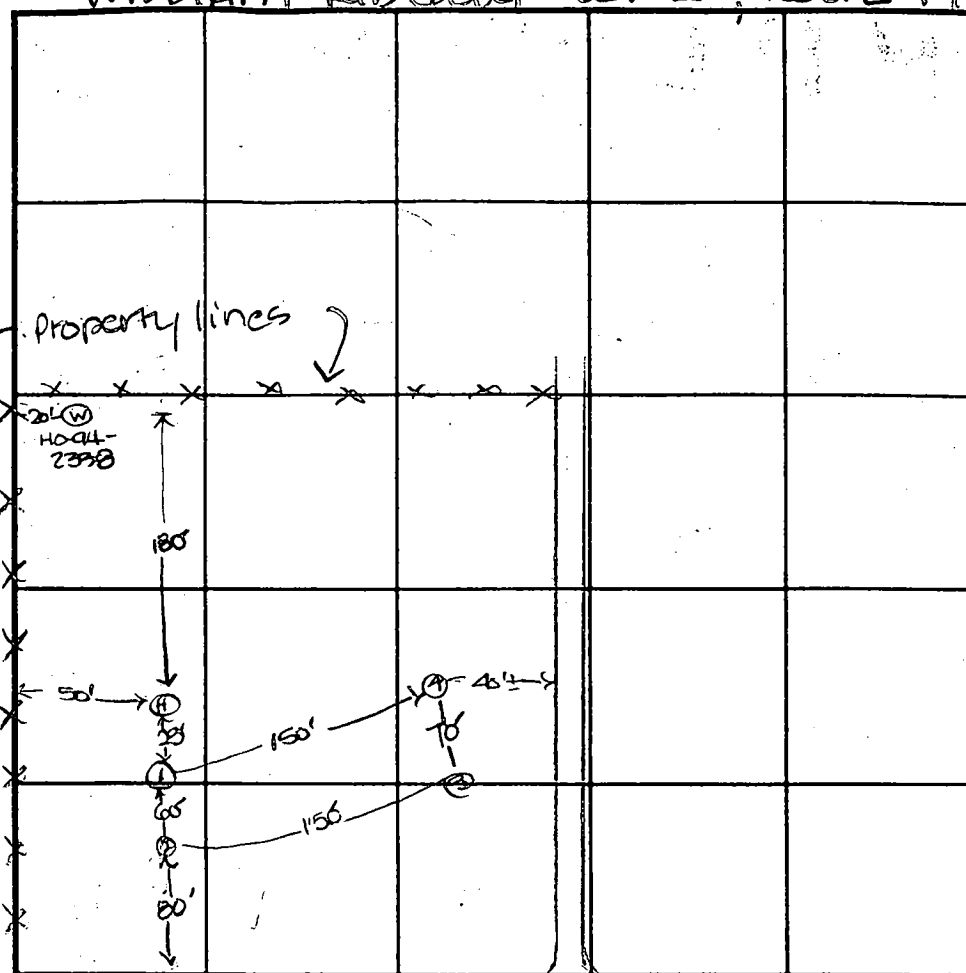
④

topsoil

red born
cl lm

br
org barn
sa km

Water



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

Route 97

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
5-8-00	1	4.0'S	10:41	10:44	10:44	10:48	4
		13.5'D	water	- see	profile		OK
	2	4'4" S	11:02	11:07 ₃	11:07 ₂	11:12	5
		9.0'D	cave-in / seepage				FAIL
	3	3.5' S	11:26 ₃	11:33 ₃	11:37 ₂	11:42 ₃	9
		9.0'D	cave-in / seepage				FAIL
	4	3.5' S	11:43	11:47	11:47	11:53	6
		13.0'D	water	- see	profile		OK

REMARKS test holes not staked

TYPE OF SOIL

TESTED BY

ALSO PRESENT

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

TRENCH WIDTH

INLET DEPTH

MAXIMUM BOTTOM DEPTH

SQ. FT./BEDROOM



APPLICATION

A 23364

P _____

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DISTRICT 4

DATE 6/8/76

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Worthington Ridgely

ADDRESS Route 97, Cooksville, Maryland PHONE Any questions call:
John Schneider
465-7777

PROPERTY LOCATION:

SUBDIVISION William B. Ridgely Property LOT NO. 2

ROAD AND DESCRIPTION Route 97 - on left side going toward Glenwood - approx. 1 mile
past intersection of Route 97 & Route 144. (Sign says Spring Meadow Farm)

SIZE OF LOT 300' x 150' TYPE BLDG. 3 or 4

IF NOT SINGLE RESIDENCE DESCRIBE _____
NUMBER OF BEDROOMS
(Single Fmly. Dwellg.)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ Carolyn P. Ridgely

APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

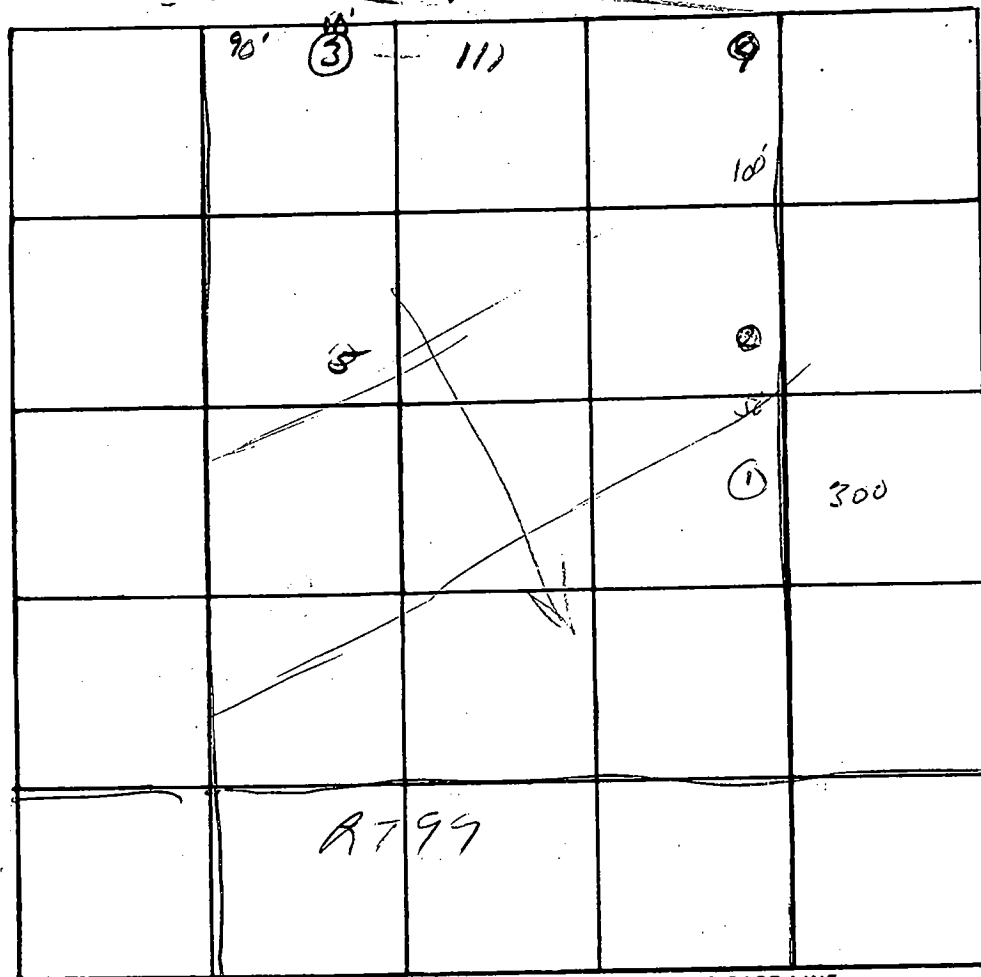
REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

125' X 100'



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
6/9/76	1 s	4'	11:26	12:31	12:35	12:35	4
	1 d.	13'	11:28	NO	PERK		
	2 s	4	11:57	11:59	11:59	12:04	5
	2 d	17	11:56	12:03	12:03	12:18	15
	3 s	3.5	1:31	1:36	1:36	1:45	9
	3 d	12	1:30	1:36	1:36	1:48	12
	5 s	3	1:34	1:37	1:37	1:42	5
	d	12	1:33	1:37	1:37	1:47	10
	4.	13'	Visual	04	3-13'		

REMARKS

TYPE OF SOIL

TESTED BY

ADON, R Byss

ALSO PRESENT:

Schmitt, Rosh
R. L. Byss

6105647

SEQUENCE NO.
(MDE USE ONLY)

STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPE

THIS REPORT MUST BE SUBMITTED WITHIN
45 DAYS AFTER WELL IS COMPLETED.
COUNTY
NUMBER

ST/CO USE ONLY
DATE Received
MM * DD YY
8 13

DATE WELL COMPLETED
MM DD YY
8/26/99

Depth of Well
22 200 26
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
HO-94-2338

OWNER Ridgely Wayne
STREET OR RFD Route 97 TOWN Glenwood
SUBDIVISION Wm. Ridgely Property SECTION 2 LOT 2

WELL LOG		
Not required for driven wells		
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING		
DESCRIPTION (Use additional sheets if needed)	FEET	
	FROM	TO
Top Soil	0	2
red Shale	2	10
Clay	10	56
brown slate	56	80
gray slate	80	85
brown slate	85	125
Mica	125	126
Sand Stone	126	150
Mica	150	152
brown slate	152	200
Mica		

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)
☒ Y ☐ N

TYPE OF GROUTING MATERIAL (Circle one)
CEMENT ☒ CM BENTONITE CLAY ☐ BC

NO. OF BAGS 20 NO. OF POUNDS 2000

GALLONS OF WATER 120

DEPTH OF GROUT SEAL (to nearest foot)
from 0 ft. to 53 ft.
(enter 0 if from surface)

CASING RECORD

casing types insert appropriate code below

☒ ST ☐ CO
STEEL CONCRETE
☐ PL ☐ OT
PLASTIC OTHER

MAIN CASING TYPE ST 06 65
Nominal diameter top (main) casing (nearest inch) Total depth of main casing (nearest foot)

OTHER CASING, (if used)
diameter inch depth (feet) from to

SCREEN RECORD

screen type or open hole ☒ ST ☐ BR ☐ HO
(insert appropriate code below) STEEL BRASS OPEN HOLE
☐ PL ☐ OT
PLASTIC OTHER

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min.) 12

METHOD USED TO MEASURE PUMPING RATE Buchot

WATER LEVEL (distance from land surface)
BEFORE PUMPING 27 ft.
WHEN PUMPING 63 ft.

TYPE OF PUMP USED (for test)
☒ A air ☐ P piston ☐ T turbine
☐ C centrifugal ☐ R rotary ☐ O other (describe below)
☐ J jet ☒ S submersible

NUMBER OF UNSUCCESSFUL WELLS 0

WELL HYDROFRACTURED ☒ Y ☐ N

CIRCLE APPROPRIATE LETTER
A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED
E ELECTRIC LOG OBTAINED
P TEST WELL CONVERTED TO PRODUCTION WELL

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

DRILLERS LIC. NO. M WD 040
George F. Eustenbury
DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. M WD 561
Charles P. Lill
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

C 2

DEPTH (nearest ft.)

E A C H S C R E E N

8 9 11 15 17 21

23 24 26 30 32 36

38 39 41 45 47 51

SLOT SIZE 1 2 3

DIAMETER OF SCREEN (NEAREST INCH)
56 60

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

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)
T (E.R.O.S.) W Q

70 72 74 75 76

TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMP INSTALLED

DRILLER WILL INSTALL PUMP (CIRCLE) (YES or NO) YES ☐ NO ☒

IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.

TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) 29

CAPACITY GALLONS PER MINUTE (to nearest gallon) 31 35

PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH (nearest ft.) 43 47

CASING HEIGHT (circle appropriate box and enter casing height)
☒ + above ☐ - below LAND SURFACE 02 (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)

side line 20' well 325' RT. 97

8:30 8/27/99 Review ^{on} 11/10/99 SRK

Well Permit No. HO - 94-2338
Location of property (road) Route 97
Subdivision Wm. Ridgely Property Lot 2 Block Plat Sec.
Well Driller G. Foster City Owner Ridgely
Depth of well 200 / 209 ft
Distance of measuring point (M.P.) above ground 2' feet
Static water level (S.W.L.) below M.P. 27' feet

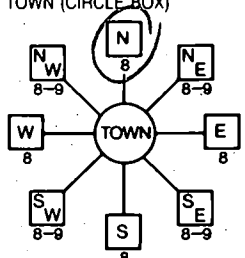
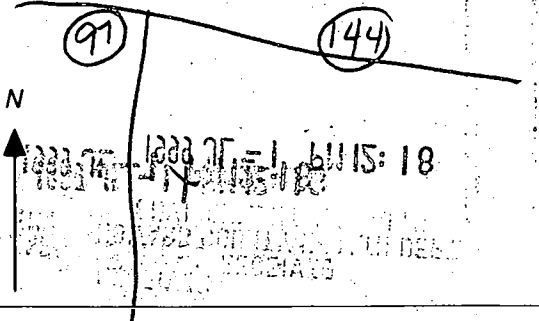
Time pump started 5:45 Pumping rate 12 gpm
Total time _____ to reach pumping water level _____ ft. below M.P.

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

TIME (in 15)	WATER LEVEL	PUMPING RATE
--------------	-------------	--------------

Pump Set 180

HD-224 SONNY

B 1 16327 1 2 3 6	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER HO-94-2338 70 fill in this form completely 79
Date Received (APA) 07/10/99 8 MM DD YY 13 Ridgely Wayne 15 Last Name Owner First Name 34 5009 Durham Rd. West 36 Street or RFD 55 Columbia, Md 21044-1449 57 Town 70 State 72 Zip 76		B 3 Howard LOCATION OF WELL CCM 8 COUNTY 21 Spring Meadow Farm Wm. Ridgely 23 SUBDIVISION 42 SECTION 44 46 LOT 20 48 50 Glenwood 52 NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) 2 M I 73 76 77 78	
DRILLER INFORMATION George F. Easterday M W 040 Driller's Name 76 License No. 81 . Franklin Easterday, Inc. Firm Name 9265 Brown Church Rd.. MT. Airv. Md. 21771 Address George F. Easterday 6/30/1999 Signature Date		B 4 4 1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  34 325 37 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH ☒ WEST ☐ EAST ☐ SOUTH ☐ DISTANCE FROM ROAD ENTER FT OR MI 38 39 TAX MAP: _____ BLK _____ PARCEL _____	
B 2 2 WELL INFORMATION 1 2 APPROX. PUMPING RATE (GAL. PER MIN.) 8 12 500 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 20		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL HOWARD A 2336A COUNTY NAME COUNTY NO. STATE SIGNATURE INSERT S → DATE ISSUED 07/28/99 07/27/00 43 MM DD YY 48 NORTH GRID 538 0 0 0 EAST GRID 0794 0 0 0 50 55 57 63	
USE FOR WATER (CIRCLE APPROPRIATE BOX) ☒ DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION ☐ FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) 22 ☐ INDUSTRIAL, COMMERCIAL, DEWATERING ☐ PUBLIC WATER SUPPLY WELL ☐ TEST, OBSERVATION, MONITORING ☐ GEO-THERMAL		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. wells 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE E 790 N 530	
APPROXIMATE DEPTH OF WELL 300 FEET 24 28 APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST INCH		8/26/99 9:30 8/26/99 Missed X Grout, 18 empty cement bags near Well HO-94-2338. What I see looks O.K. 000 8/22/99 B.B. No Y.eld Test Done	
METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jetted & DRIVEN 30 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary) 37 CABLE REVerse-ROTARY Drive-POINT other		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION MAP 9 C1 	
REPLACEMENT OR DEEPEENED WELLS (CIRCLE APPROPRIATE BOX) ☒ THIS WELL WILL NOT REPLACE AN EXISTING WELL ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS ☐ THIS WELL WILL DEEPEEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEENED (IF AVAILABLE) 41 52		Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROX. PERMIT NUMBER 54 G A P 63 PERMIT No. HO-94-2338 70 71 72 73 74 75 76 77 78 79	
SPECIAL CONDITIONS NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -			

ROUTE

SKC PUT # 589
LAND DEDICATED FOR
FOR FUK POSTED

70

ROUTE

S.R.C. PLAT # 2589
LAND DEDICATED TO
FOR PURPOSES OF A PUBLIC ROAD.

734.58' FEET TO IRON PIPE FOUND AT THE N.W. CORNER OF THE MT. GREGORY CHURCH PROP.

N 14° 42' 00" E

20.00' 225.00'

(6) (5)

— E OF RD & E OF R/W —

MARYLAND (0.210 ACRES)

EX. 22' PAVING

WILLIAM B. RIDGELY, ET UX
190/408

WILLIAM B. RIDGELY, ET UX. \$10,000
190 / 408

5000
29250

5505A

2/5/99
By signature of this plan,
the Health Dept. N9250
approves this modification
to the existing sewage
easement. *Michael S. Lee*

**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 26.04.04 (MD Well Construction Regulations). Submission of a complete form is required prior to Use and Occupancy approval.

Company Name: CARROLL WATER SYSTEMS Telephone #: 410-876-5100
Address: 150 AIRPORT DR.
WESTMINSTER, MD 21157

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

License # and name of individual responsible for the field installation:
Name (Print): RONALD W. SMITH License# PI 074

*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. Licenses may be subjected to field verification.

Name of Property Owner: JOHN PFAFF Telephone #: 410-875-6200
Subdivision: _____ Lot #: 2 Well Tag #: HO-94-2538
Site Address: 2177 Roxbury M.H. Road
COOKSVILLE MD

Submersible Pump Data	Pitless Adapter	Well Cap and Electric Conduit
Make: <u>Goulds</u>	Make: <u>Campbell</u>	Two piece watertight cap: <u>YES</u>
Model #: <u>75B05422</u>	Model#: <u>B10X</u>	Screened, vented well cap: <u>YES</u>
Pump Capacity <u>7</u> GPM	Depth: <u>42</u> (36" min)	Cap secured to casing: <u>YES</u>
Well Yield: <u>12</u> GPM	NSF approved: <u>YES</u>	Conduit min 18" B.G.: <u>24'</u>
Depth of well encountered at time of pump installation: <u>200</u> (feet)		Conduit secured to well cap: <u>YES</u>

If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4
Torque arrestors or Cable guards are required - Must circle one
Safety rope, if used, attached to inside of well casing with eye bolt NO

Piping to house

Type: PLASTIC
PSI: 160 (160 psi min)
Depth of supply line: 42 (36" min)

House Connection

PVC sleeved to undisturbed soil at wall penetration: YES
Approximate length of sleeve: 2'
Sleeve caulked and sealed properly: YES

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

Ronald W. Smith
Signature of company representative responsible for installation

9/15/00
date

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

Date Insp. Requested: 9/28/00 Date Insp. Approved: 9/28/00

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

Cap Loose
BB
BB

11/16/00 Builder said he will
tighten cap bolts.
BB

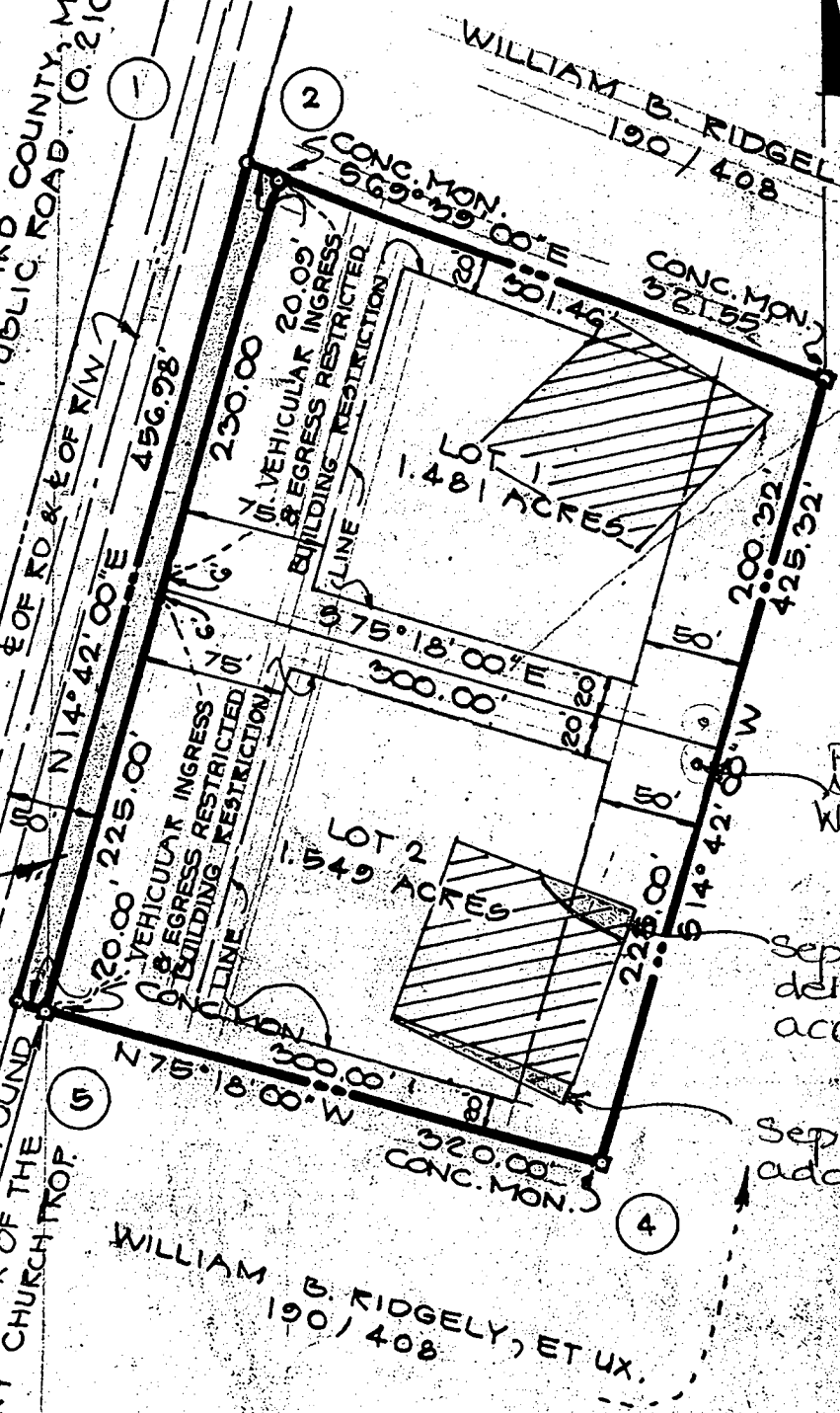
MD.

ROUTE 97

S.R.C. PLAT # 9589
LAND DEDICATED TO HOWARD COUNTY, MARYLAND
FOR PURPOSES OF A PUBLIC ROAD. (0.210 ACRES)

EX. 22' PAVING

734.58' FEET TO IRON PIPE FOUND
AT THE NW. CORNER OF THE
MT. GREGORY CHURCH PROP.



7/28/99
Well site
as
staked
(209)
Primary
Approvable
Well Site

Septic Area to be
deleted (to provide
acceptable well site)

Septic Area to be
added

2/5/99
By signature of this plan,
the Health Dept. N0250
approves this modification
to the existing sewage
easement.
D. K. See

William B. Ridgely, ET UX.

190 / 408

IRON
PIPE(FD.)

S. 14° 42' 00"

W.

225.00'

BAR & CAP (FD.)
"CBM135"

EX. WELL

100.0'

APPR.
SEPTIC
AREA PER
P#3543

B.R.L.

SEPTIC AREA
ACCORDING TO
GRADING STUDY
BY J. L. SCHNEIDER, P.E.
DATED: 6/01/2000

E.

75° 18' 00"
300.00'

B.R.L.

EX.
CONC.
BLOCK
FOUNDATION
(TOW EL.=404.34)

LOT 2

(#2177)

1.549 Acres±

BUILDING RESTRICTION LINE (B.R.L.)

W.

75° 18' 00"
300.00'

N.

VEHICULAR INGRESS & EGRESS RESTRICTED

N. 14° 42' 02"

E.

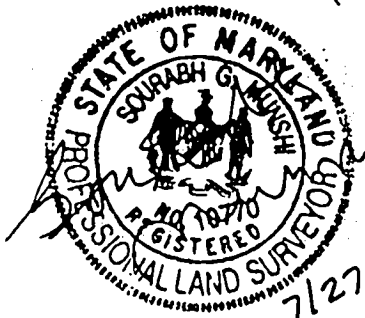
225.00'

EX. 22' PAVING

MD. ROUTE 97

SRC Plat #9589

(EX. 60' R/W - PROP. 100' R/W)



NOTE:

1. FOOTINGS AND FOUNDATION ARE IN PLACE AS SHOWN.
2. TOP OF WALL ELEVATION IS 404.34.

WALL CHECK DRAWING

LOT 2

WILLIAM B. RIDGELY PROPERTY

#2177 MD. ROUTE 97

FOURTH ELECTION DISTRICT

HOWARD COUNTY, MARYLAND

SCALE: 1" = 60' JULY, 2000

Revised: 08/15/2000-Top of wall elevation.

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3430 COURT HOUSE DRIVE ELLICOTT CITY, MD 21043 PERMITS (410) 313-2455 INSPECTIONS (410) 313-1810 AUTOMATED INFORMATION (410) 313-3800	HOWARD COUNTY PERMIT APPLICATION	PERMIT NUMBER B 00127007
---	--	--

Building Address <u>2177 Roxbury Mills Rd</u> <u>Cooksville Md 21723</u> Suite/Apt. # _____ SDP/NWP/Petition # _____ Census Tract <u>6040</u> Subdivision <u>Wm. Ridgely Prop</u> Section _____ Area _____ Lot <u>2</u> Tax Map <u>14</u> Parcel <u>212</u> Grid _____ Zoning _____ Map Coordinates <u>9C1</u> Lot size <u>1.5 AC.</u>	Property Owner's Name <u>Nancy Putnam</u> Address <u>3828 Willbetta St.</u> City <u>OWNEY</u> State <u>MD</u> Zip Code <u>20832</u> Home Phone <u>301-785-3423</u> Work Phone _____ Applicant's Name & Mailing Address, (if other than stated hereon): <u>Donald Timanus - Proj MNGR - F&R Builders Inc.</u> <u>1519 Oak Orchard Rd</u> <u>New Windsor Md 21776</u> Phone <u>410-795-6200</u> Fax <u>410-795-9999</u>
--	---

Existing Use <u>Single Family Detached</u> Proposed Use <u>same</u> Estimated Construction Cost <u>\$350,000</u> Description of Work <u>Build wood deck 20' x 11'</u> <u>Slip on to porch</u>	Contractor Company <u>John W Platt Builders Inc.</u> Contact Person <u>Tim Q Platt Builder</u> <u>410-795-9999</u> Address <u>1519 Oak Orchard Rd</u> City <u>New Windsor</u> State <u>MD</u> Zip Code <u>21776</u> License No. <u>11642</u> Phone <u>410-795-6200</u> Fax <u>410-795-9999</u>
---	---

Occupant or Tenant <u>Nancy Putnam</u> Contact Name <u>Nancy Putnam</u> Address <u>3828 Willbetta St.</u> City <u>OWNEY</u> State <u>MD</u> Zip Code <u>20832</u> Phone <u>301-785-3423</u> Fax _____	Engineer or Architect Company _____ Contact Person _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____
---	--

BUILDING DESCRIPTION - COMMERCIAL		BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics Height: _____ No. of stories: _____ Gross area, sq. ft. per floor: _____ Use group: _____ Construction type: ☐ Reinforced Concrete ☐ Structural Steel ☐ Masonry ☐ Wood Frame ☐ State Certified Modular	Utilities Water Supply: ☐ Public ☐ Private Sewage Disposal: ☐ Public ☐ Private Electric Yes ☐ No ☐ Gas Yes ☐ No ☐ Heating System: ☐ Electric ☐ Oil ☐ ☐ Natural Gas ☐ ☐ Propane Gas ☐ Sprinkler system: ☐ N/A ☐ ☐ Full ☐ Partial ☐ Other Suppression # of Heads _____	Building Characteristics SF Dwelling ☐ SF Townhouse ☐ Depth _____ Width _____ 1st floor: _____ 2nd floor: _____ Basement: _____ Finished Basement ☐ Unfinished Basement ☐ Crawl space ☐ Slab on Grade ☐ No. of Bedrooms: _____ 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>Deck</u> Dimensions: <u>14' x 11'</u> Footings: <u>4" x 6"</u> Roof: _____ ☐ State Certified Modular ☐ Manufactured Home	Utilities Water Supply: ☐ Public ☐ Private Sewage Disposal: ☐ Public ☐ Private Electric Yes ☐ No ☐ Gas Yes ☐ No ☐ Heating System: ☐ Electric ☐ Oil ☐ ☐ Natural Gas ☐ ☐ Propane Gas ☐ Sprinkler system: ☐ N/A ☐ ☐ 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 THIS INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THEREON; (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 PURPOSES OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature <u>Donald H. Timanus</u> Title/Company <u>Proj MNGR F&R Builders Inc.</u>	Print Name <u>Donald H. Timanus</u> Date <u>10/17/02</u>
--	---

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

AGENCY ☒ Land Development DPZ ☒ State Highways ☒ Building Official ☒ Dev Engineering DPZ ☒ Health ☒ Fire Protection Is Sediment Control approval required prior to issuance? YES ☐ NO ☐	SIGNATURE APPROVAL <u>Mark Roffe</u> CONTINGENCY CONSTRUCTION START: ☐ ONE STOP SHOP: ☐	DPZ SETBACK INFORMATION Front: _____ Rear: _____ Side: _____ Side St: _____ All minimum setbacks met? YES ☐ NO ☐ Is Entrance Permit required? YES ☐ NO ☐ Historic District? YES ☐ NO ☐ Lot Coverage for New Town Zone _____ SDP/Red-line approval date _____ Accepted by <u>C</u>
--	---	---

PROPERTY ID# <u>116567</u>	
Filing fee	\$ _____
Permit fee	\$ <u>2.00</u>
Excise tax	\$ _____
Sub-total paid	\$ _____
Add'l permit fee	\$ _____
TOTAL FEES	\$ <u>2.00</u>
Balance due	\$ _____
Check #	<u>16340</u>
Validation	# _____

APPR.
SEPTIC
AREA PER
P93543

SEPTIC AREA
ACCORDING TO
GRADING STUDY
BY J. L. SCHNEIDER, P.E.
DATED: 6/01/2000

CONC.
BLOCK
FOUNDATION

LOT 2

(#2177)

1.549 Acres ±

BUILDING RESTRICTION LINE (B.R.L.)

VEHICULAR HIGHWAYS & SCREENS RESPECTED

14° 42' 02"
225.00'

EX. 10' PAVING

MD. ROUTE 97

SRC Plat #9539

(EX. 60' R/W - PROP. 100' R/W)

WALL CHECK DRAWING

LOT 2

WILLIAM B. RIDGELY PROPERTY

#2177 MD. ROUTE 97

FOURTH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
SCALE: 1" = 60' JULY, 2000

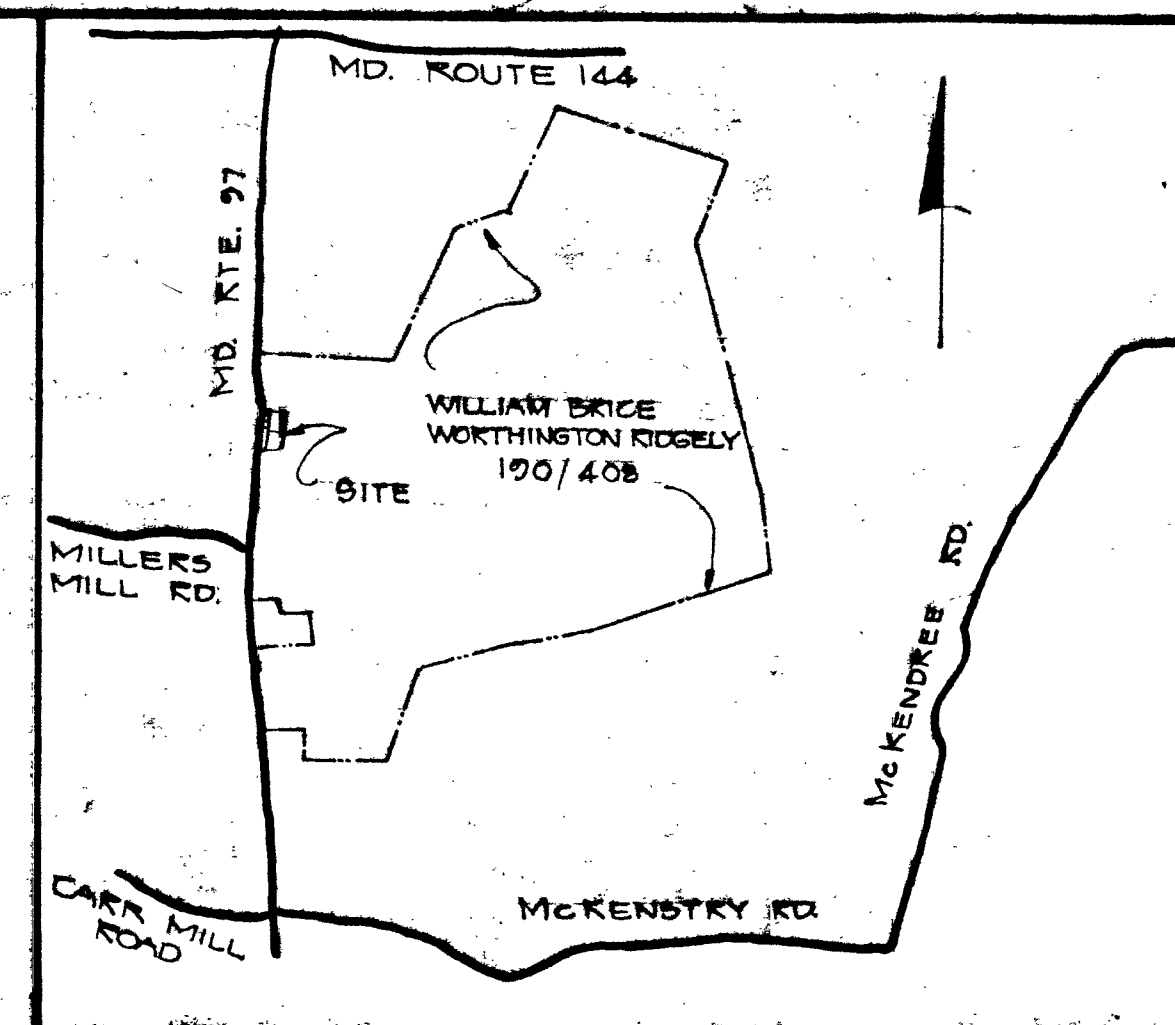
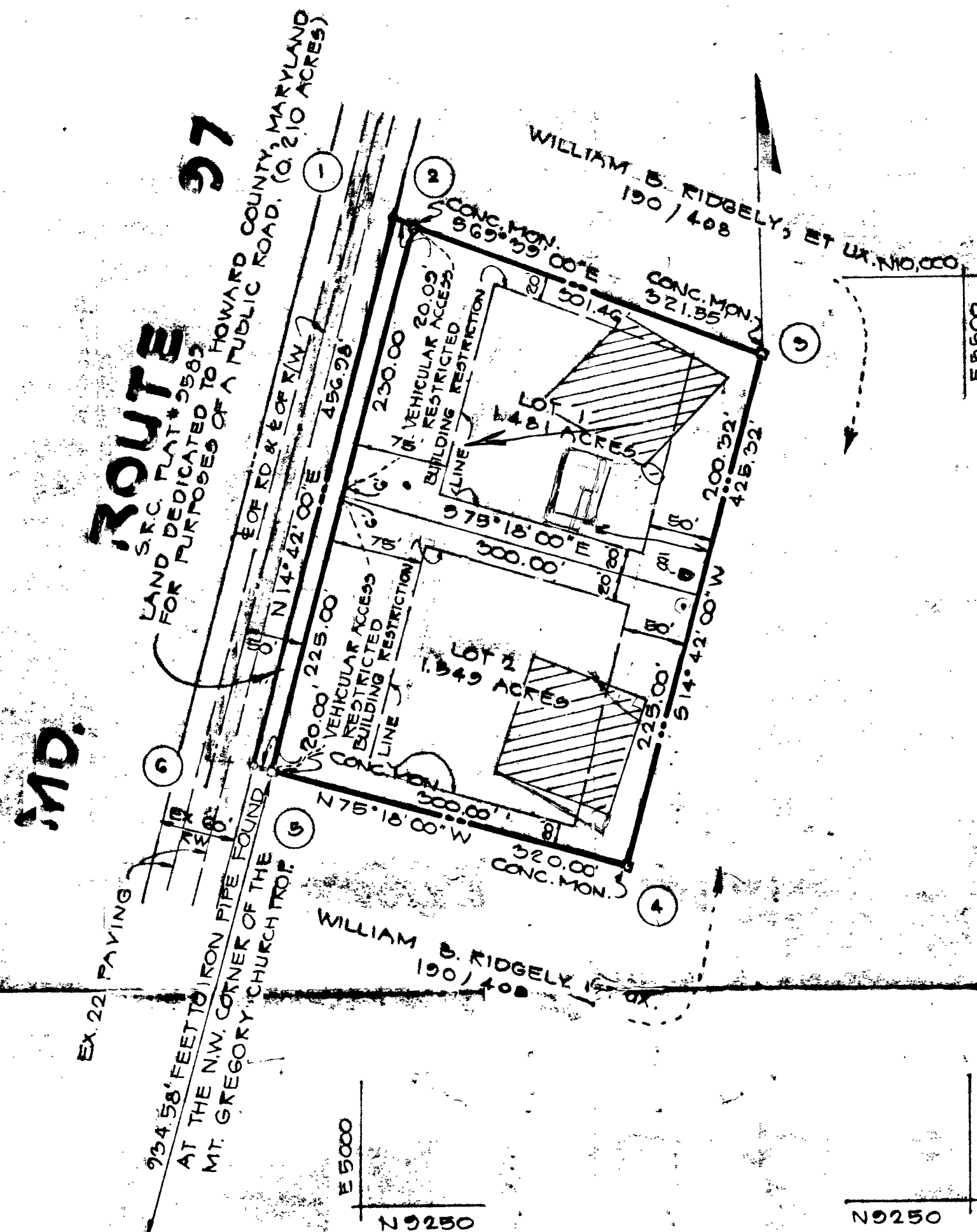


7/27/00

8/18/00
House location
has shifted slightly,
but OK to proceed w/system
installation as planned. @S

COORDINATES

Nº	NORTH	EAST
1	10049.828	5022.423
2	10042.833	5048.267
3	9938.003	5050.915
4	9926.603	5222.986
5	9602.751	4932.806
6	9607.805	4913.461



VICINITY MAP

SCALE: 1" = 2000'

GENERAL NOTES

1. PROPERTY SHOWN HEREON IS LOCATED ON TAX MAP 14, PART OF PARCEL 36.
2. THE LOTS SHOWN HEREON COMPLY WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREA AS REQUIRED BY THE MARYLAND STATE HEALTH DEPARTMENT.
3. THIS AREA DESIGNATES A PRIVATE SEWAGE EASEMENT OF APPROXIMATELY 10,000 SQ. FT. AS REQUIRED BY THE MARYLAND STATE HEALTH DEPARTMENT FOR INDIVIDUAL SEWAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THE AREA ARE RESTRICTED UNTIL PUBLIC SEWAGE IS AVAILABLE AND SERVING ANY RESIDENTIAL STRUCTURES CONSTRUCTED ON THESE BUILDING SITES. THIS EASEMENT SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWAGE SYSTEM.
4. DEED REFERENCE: 190/408.
5. COORDINATES SHOWN HEREON ARE ASSUMED.

AREA TABULATIONS

1. TOTAL Nº OF LOTS: 2
2. TOTAL AREA OF LOTS: 3.030 AC.
3. TOTAL AREA OF R/W DEDICATION: 0.210 AC.
4. TOTAL AREA OF FLAT: 3.240 AC.

Must be changed to private water & sewerage

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

COUNTY HEALTH OFFICER _____ DATE _____

APPROVED: HOWARD COUNTY OFFICE OF PLANNING AND ZONING.

DIRECTOR _____ DATE _____

APPROVED: STORM DRAINAGE SYSTEM AND PUBLIC ROADS, HOWARD COUNTY DEPARTMENT OF PUBLIC ROADS.

DIRECTOR _____ DATE _____

OWNERS CERTIFICATE

WE WILLIAM BRICE WORTHINGTON RIDGELY & CAROLYN RIDGELY, OWNERS OF THE PROPERTY SHOWN AND DESCRIBED HEREON, ADOPT THIS PLAN OF SUBDIVISION AND IN CONSIDERATION OF THE APPROVAL OF THIS FINAL PLAN BY THE OFFICE OF PLANNING AND ZONING, ESTABLISH THE MINIMUM BUILDING RESTRICTION LINES AND GRANT UNTO HOWARD COUNTY, MD. ITS SUCCESSORS AND ASSIGNS: 1) THE RIGHT TO LAY, CONSTRUCT AND MAINTAIN SEWERS, DRAINS, WATER LINES AND OTHER MUNICIPAL UTILITIES AND SERVICES, IN AND UNDER ALL ROADS AND STREET RIGHT OF WAYS AND THE SPECIFIC EASEMENT AREA SHOWN HEREON; 2) DEDICATE TO PUBLIC USE THE BEDS OF THE STREETS AND OR ROADS AND FLOOD PLAINS AND OPEN SPACE WHERE APPLICABLE, AND FOR ONE DOLLAR CONSIDERATION, HEREBY GRANT THE RIGHT AND OPTION TO HOWARD COUNTY TO ACQUIRE THE FEE SIMPLE TITLE TO THE BEDS OF THE STREETS AND OR ROADS AND FLOOD PLAINS AND OPEN SPACE WHERE APPLICABLE; 3) THAT NO BUILDING OR SIMILAR STRUCTURE OF ANY KIND SHALL BE ERRECTED ON OR OVER THE SAID EASEMENTS AND RIGHT OF WAYS; AND 4) IT IS FURTHER AGREED THAT MAINTENANCE OF ALL WATERWAYS, DRAINAGE EASEMENTS AND/OR FLOOD PLAINS SHOWN HEREON ARE THE RESPONSIBILITY OF THE PROPERTY OWNER, ITS SUCCESSORS AND ASSIGNS.

WITNESS OUR HANDS THIS 11TH DAY OF AUGUST 1976.

William B. Ridgely
Carolyn P. Ridgely
Charles H. Weiland
 WITNESS

SURVEYORS CERTIFICATE

I HEREBY CERTIFY THAT THE FINAL PLAN SHOWN HEREON IS CORRECT, THAT IT IS A SUBDIVISION OF PART OF THE LAND CONVEYED BY H. RICHES WATKINS & ANNA H. WATKINS TO WILLIAM BRICE WORTHINGTON RIDGELY & CAROLYN P. RIDGELY BY DEED DATED JUNE 21, 1946 AND RECORDED IN THE LAND RECORDS OF HOWARD COUNTY IN LIBER 190, FOLIO 408, AND THAT ALL MONUMENTS ARE IN PLACE AS SHOWN IN ACCORDANCE WITH THE ANNOTATED CODE OF MARYLAND.

William G. Hartel
 WILLIAM G. HARTEL, F.L.S. Nº: 9436



8/13/76
 DATE

OWNER & DEVELOPER

WILLIAM B. RIDGELY
 2149 MARYLAND ROUTE 97
 COOKSVILLE, MD. 21723

SUBDIVISION PLAT
LOTS 1 & 2
WILLIAM B. RIDGELY
PROPERTY

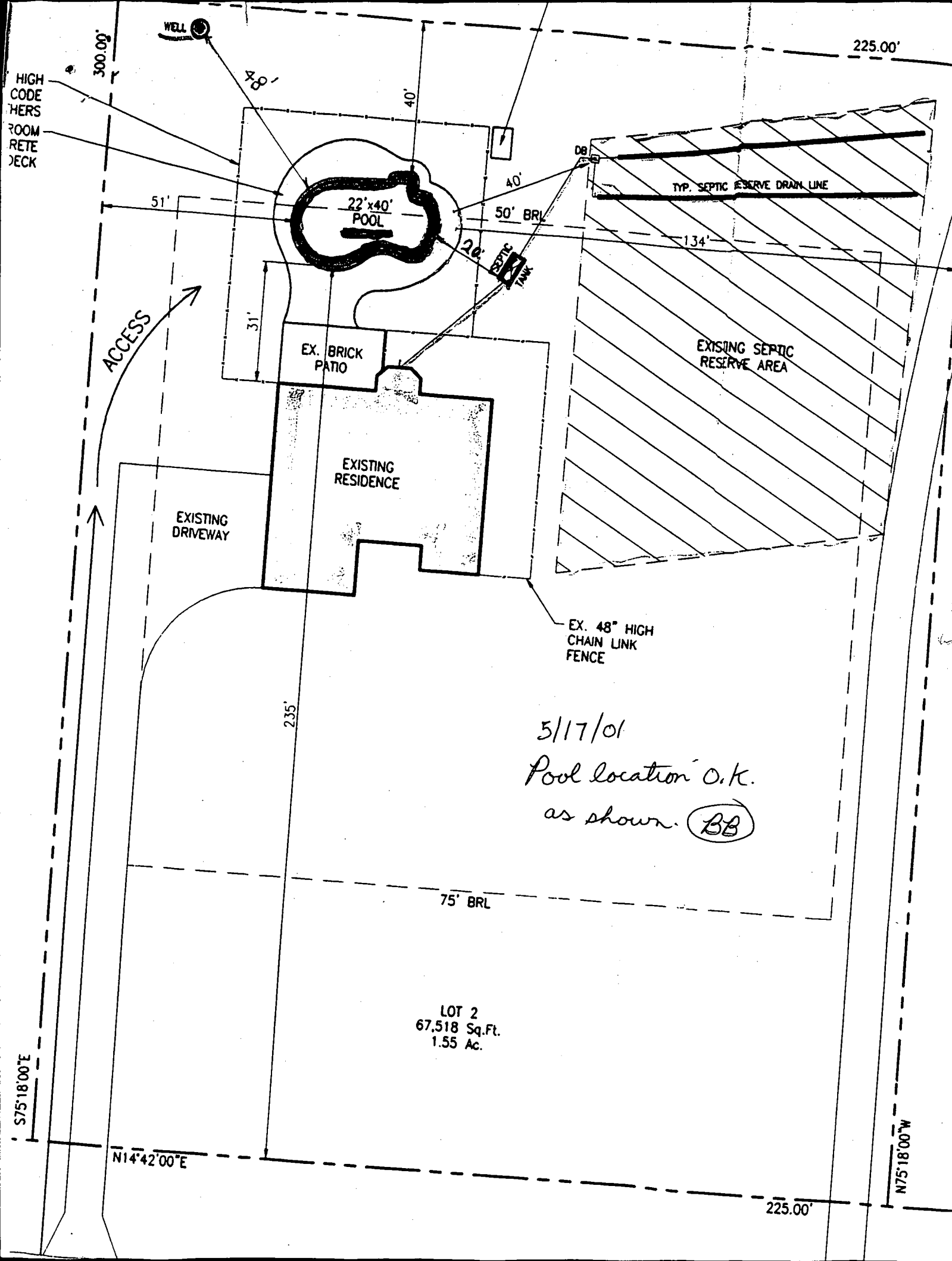
4th ELECTION DISTRICT, HOWARD CO., MD.
 SCALE: 1" = 100' AUGUST 10, 1976

This is ok for DW on
Signature again

I need
this.

Wue 9/10/76 Thanks!

Well sites at East side of parcel,
both near shared property line.



HIGH
CODE
HERS
ROOM
RETE
DECK

ACCESS

EXISTING
DRIVEWAY

EX. BRICK
PATIO

EXISTING
RESIDENCE

22'x40'
POOL

SEPTIC
TANK

TYP. SEPTIC RESERVE DRAIN LINE

EXISTING SEPTIC
RESERVE AREA

EX. 48" HIGH
CHAIN LINK
FENCE

5/17/01
Pool location O.K.
as shown. (BB)

LOT 2
67,518 Sq.Ft.
1.55 Ac.

S75°18'00"E

N14°42'00"E

225.00'

N75°18'00"W

225.00'

75' BRL

235'

51'

31'

40'

50' BRL

134'

40'

WELL