

9/22/00 1-130pm

9/25/00 AM

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

P-5142197

A 56429-BB

ISSUE DATE 8/30/00

APPROVAL DATE 9/22/00

INDEXED

RPS# ?

Lehsac Plumbing & Heating

IS PERMITTED TO INSTALL ALTER X

ADDRESS 202 Azar Court, Baltimore, MD 21227 PHONE 410-242-6888

SUBDIVISION Gaither Hunt LOT NUMBER 28 ADDRESS 11020 Steeple Chase Court

PROPERTY OWNER Ryan Homes PROPERTY OWNER'S ADDRESS 11020 Steeple Chase Ct.

SEPTIC TANK CAPACITY 1250 GALLONS (existing)

PUMP CHAMBER CAPACITY N/A GALLONS

NUMBER OF BEDROOMS 4

SQUARE FEET PER BEDROOM N/A

LINEAR FEET OF TRENCH REQUIRED N/A

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

LOCATION:

REPAIR: Move existing septic tank to a point where the propped deck will be
10 feet from the septic tank.

PLANS APPROVED Steven R. Krieg DATE 9/22/00

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

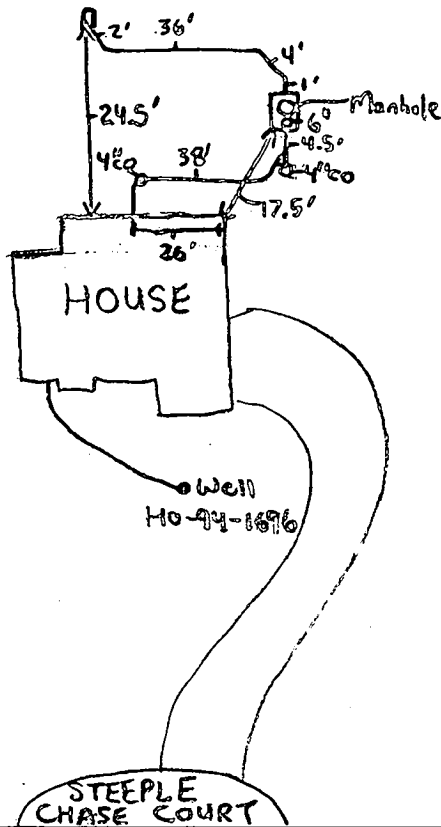
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

P544219

NOT TO SCALE



TRENCH DATA

TRENCH WIDTH N/A
TRENCH INLET DEPTH N/A
TRENCH BOTTOM DEPTH N/A
DEPTH OF STONE N/A
NUMBER OF TRENCHES N/A
TOTAL TRENCH LENGTH N/A
ABSORBENT AREA N/A
DISTRIBUTION BOX LEVEL ☒
BAFFLE IN DISTRIBUTION BOX ☒

SEPTIC TANK DATA

SEPTIC TANK 1250MS. GALLONS
MANHOLE RISER Yes
6 INCH INSPECTION PORT Yes

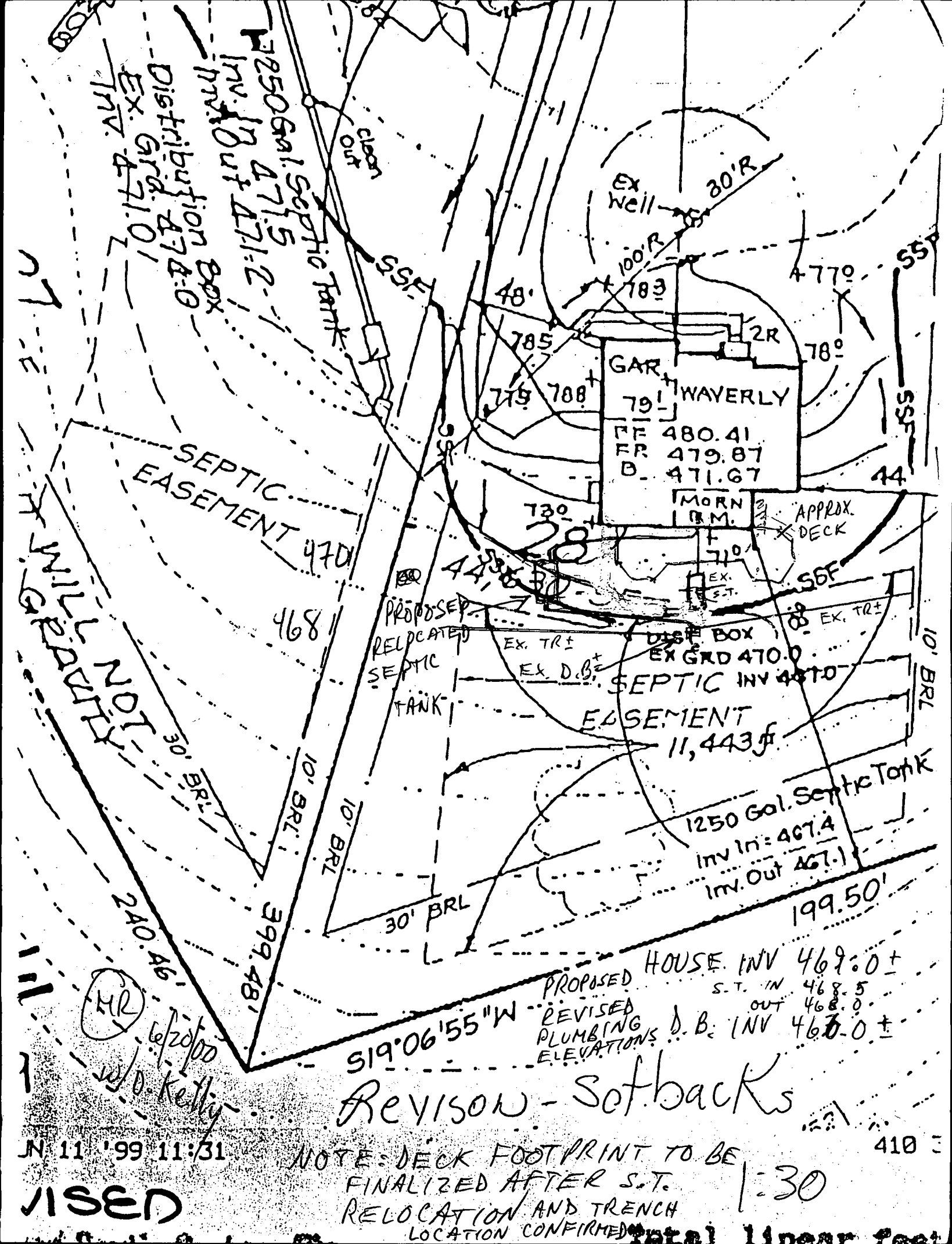
PUMP CHAMBER DATA

PUMP CHAMBER GALLONS N/A
MANHOLE RISER N/A
ALARM N/A
PUMP PERFORMANCE TEST N/A

PRE-CONSTRUCTION INSPECTION: _____

INSPECTION COMMENTS: 9/22/00 - OK TO CONTINUE WORK (SRW)
9/22/00 - OK TO COVER ALL WORK, BRING MANHOLE FLUSH OR
SLIGHTLY BELOW GRADE (SRW)

INSPECTOR Steven R. Krey DATE SYSTEM APPROVED 9/22/00



Ed Campus

443286

7158

Septic to deck

8/31/99
1 PM

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 512-676

A 56429-BB

DISTRICT _____

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXXX~~ 410-313-2640

DATE 8/23/99

DATE SYSTEM APPROVED 8/31/99

INSPECTOR S.R.K.

INDEXED

Lehsac Plumbing & Heating IS PERMITTED TO INSTALL X ALTER _____

ADDRESS 202 Azar Court, Baltimore, MD 21227 PHONE 410-242-6888

SUBDIVISION Gaither Hunt LOT 28 ROAD 11020 Steeple Chase Court

PROPERTY OWNER Ryan Homes

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS ***MANHOLE CLEANOUT REQUIRED***

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

TRENCHES - Trench to be 3 feet wide. Inlet 4.0 feet below original grade. Bottom maximum depth 4.0 feet below original grade. Effective area begins at 2.0 feet below original grade. 2 feet of stone below distribution pipe. 5.6

LOCATION - Place the distribution box 240 feet down the right (399') lot line and 80 feet off that same lot line. Run trenches along 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. 8/17/99 OK AL

PLANS APPROVED BY Glen Savage/Amy McMillen nd/cw DATE 10/26/98

COVER NO WORK UNTIL INSPECTED AND APPROVED

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM

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

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

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH

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

PERMIT VOID AFTER TWO YEARS

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

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

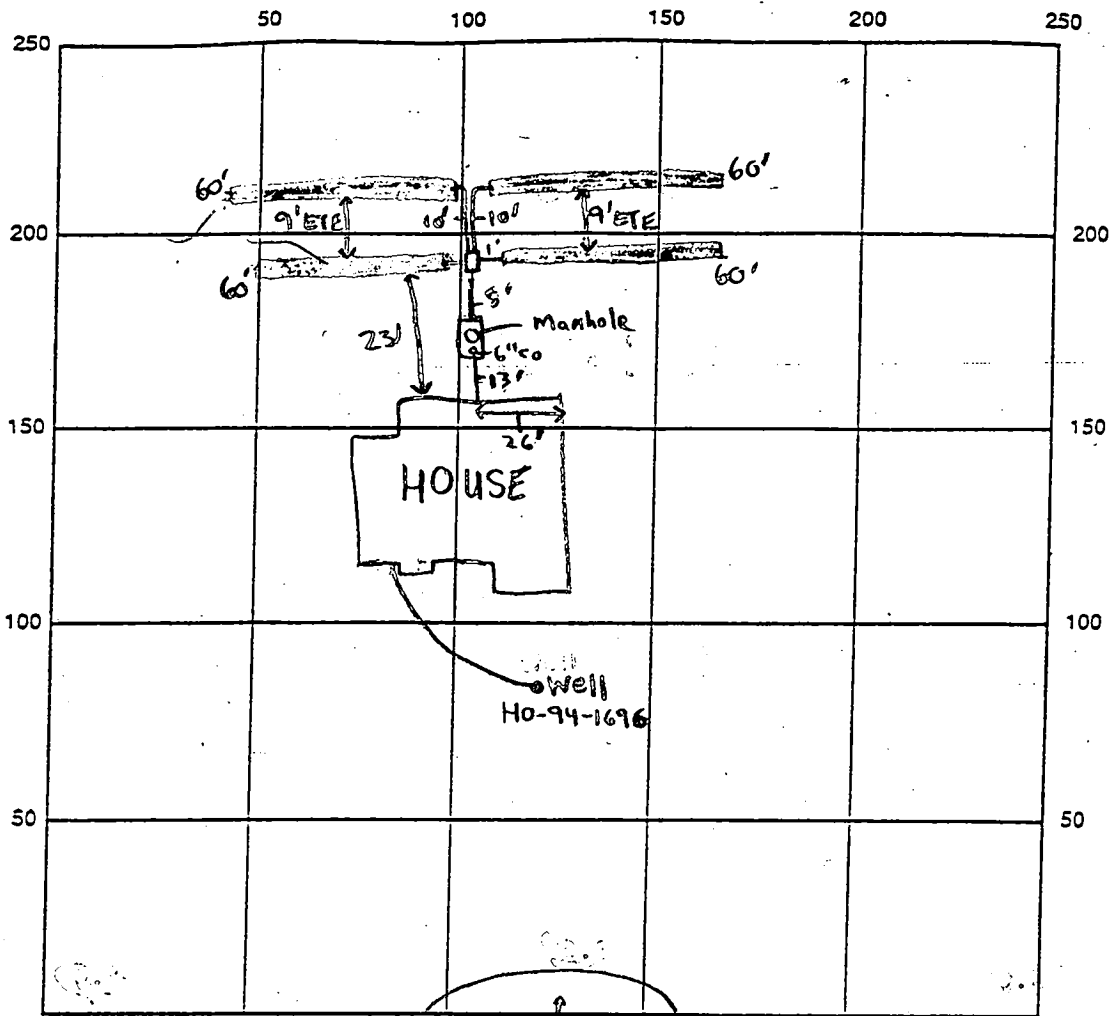
*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

HD-260(5-90)

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

56429-BB

NOT TO SCALE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
STEEPLE CHASE CT

SEPTIC TANK LEVEL 1250 gallon mid seater CLEANOUTS 6" @ Tank, Manhole @ Tank

DISTRIBUTION BOX LEVEL ✓ Baffle is in

TILE DRAIN FIELD/TILE DEPTH 6 FT. TRENCH WIDTH 3 FT. INLET DEPTH 4 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. - TOTAL LENGTH 240 FT.

NUMBER OF TRENCHES 4 ~~ONE SIDEWALL~~ BOTTOM AREA 720 SQ. FT.

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

ABSORBENT AREA N/A SQ. FT.

REMARKS: 8/31/99 - OK TO COVER ALL WORK - SRM

DATE SYSTEM APPROVED 8/31/99 INSPECTOR Steven R. Krieg

APPLICATION

PERCOLATION TESTING

A 56429

P _____

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2840

DISTRICT _____

DATE 4/4/96

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 J-Thomas Scrivener RYAN HOMES

ADDRESS C/o Land Design & Development PHONE 410 740 5176

AGENT OR PROSPECTIVE BUYER Donald R. Renner Jr

ADDRESS 10805 Hickory Ridge Rd PHONE _____
21044

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 76 28

ROAD AND DESCRIPTION 11020 STEEPLE CHASE COURT

TAX MAP 29 PARCEL # 21

~~AND RETURNED 11-26-98~~
~~Serial # 300 114416~~

SIZE OF LOT 1 + Acres TYPE BLDG. SFD - 4 Brm
(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]
(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 _____

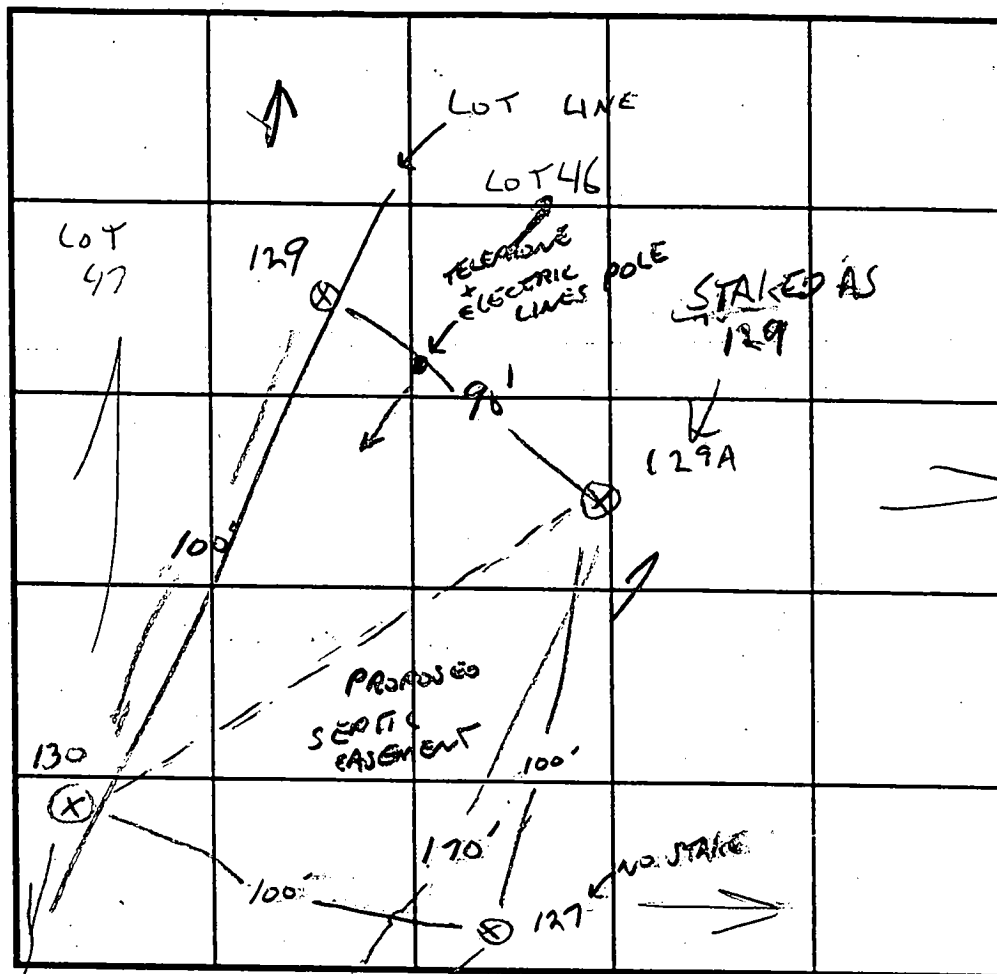
THIS IS NOT A PERMIT

56429

COUNTY #

SOIL PROFILE

0'



SOIL PROFILE

0'

TOPSOIL

DARK RED
ORANGE
SANDY CLAY
LOAMBROWN
SANDY
MICA LOAM

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4-4-96	129	4' 6" / 10	SEE	LOT 47	FOR DETAIL		2 MIN
	130	4' 6" / 10	"	"	"	"	4 MIN
	129A	5' 6" / 10' 6"	1:55	1:58	1:58	2:04	6 MIN
	128	4' 6" / 10' 6"	1:49	1:50	1:50	1:52	2 MIN
4-11-96	127	4' / 11	2:51	2:52	2:52	2:55	3 MIN

REMARKS LOT 46 28

TYPE OF SOIL

TESTED BY G. SAVAGE

ALSO PRESENT MIKE + MIKE

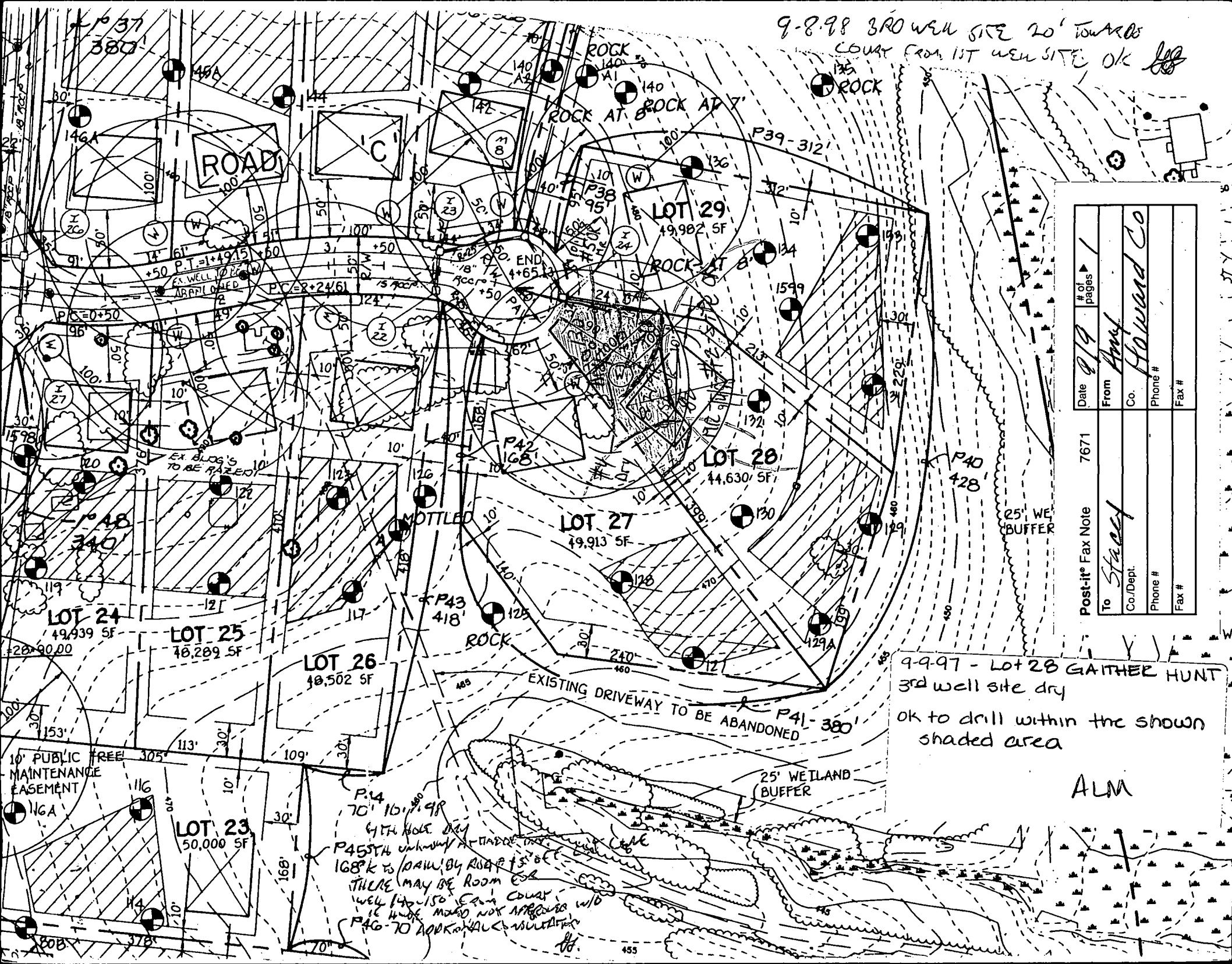
TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 4 MIN

TRENCH WIDTH 3

INLET DEPTH 3' 6"

MAXIMUM BOTTOM DEPTH 5' 6"

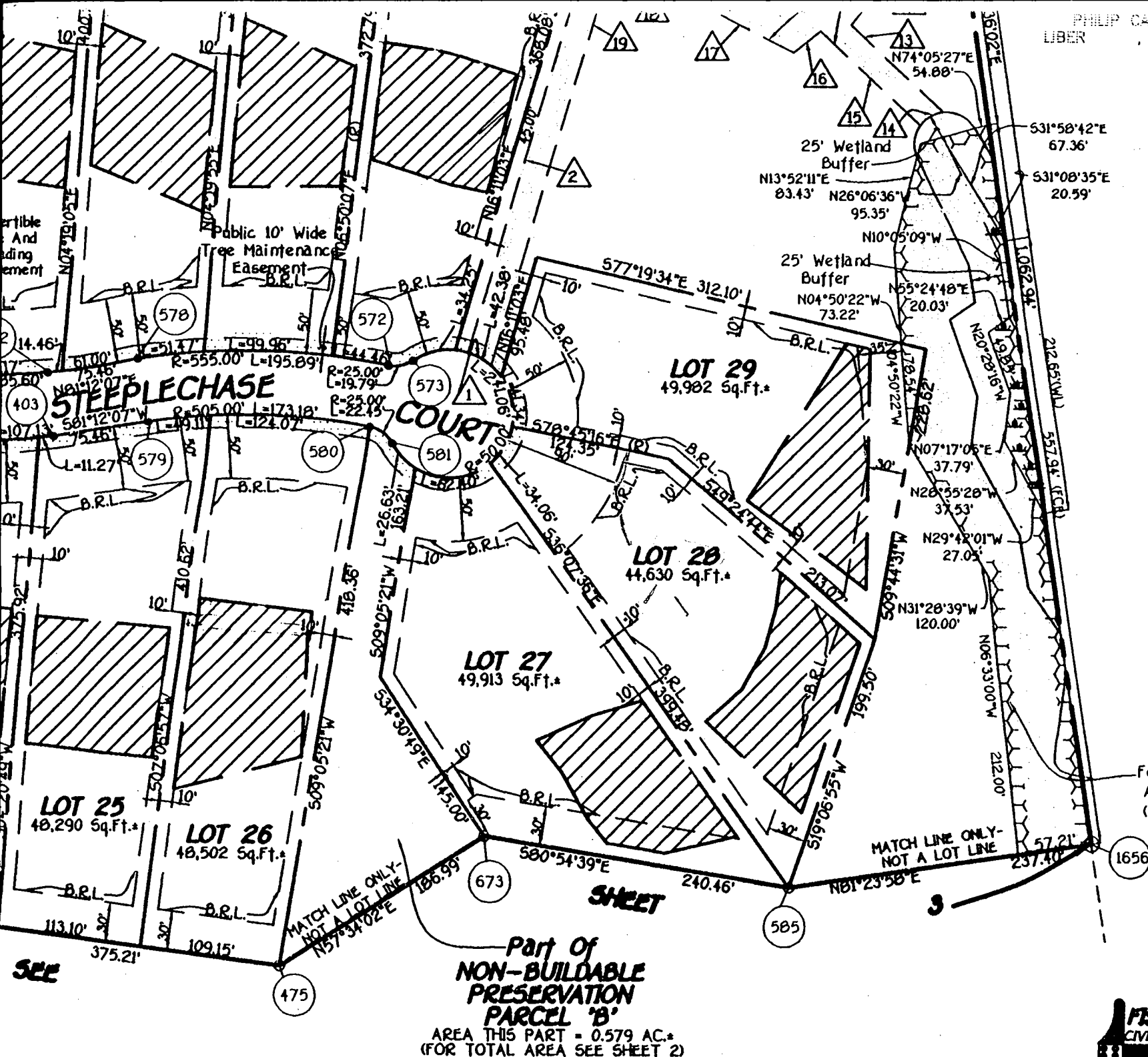
SQ. FT./BEDROOM 180



Date	9/9	# of pages	1
From	Amy Howard Co		
To	Stacy	Co./Dept.	
Phone #		Phone #	
Fax #		Fax #	

Post-it® Fax Note 7671

SYMBOL	BEARING & DISTANCE
1	R-50.00'
2	N16°11'03"E
3	N44°37'27"E
4	N20°00'03"W
5	N85°40'05"W
6	N04°19'55"E
7	S85°40'05"E
8	N06°46'15"E
9	S85°40'05"E
10	S68°24'13"E
11	S10°17'44"E
12	S37°56'50"W
13	S46°44'24"E
14	R-25.00'
15	N46°44'24"W
16	S50°40'07"W
17	N62°30'08"W
18	S44°37'27"W
19	S16°11'03"W

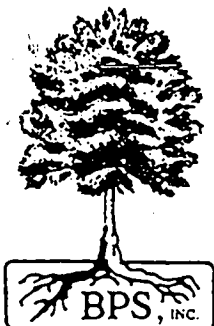


6030.

CH 6017

CK Hb 24465
8-3-99 # ~~2500~~

issued 6/21/99



The Roots for Development

**BUILDING
PERMIT
SERVICES
INC.**

2602 Parallel Path • Abingdon, Maryland 21009

(410) 515-1717 • FAX (410) 515-2213

August 3 1999

Howard County
Inspections & Permits
3430 Court House Dr.
Ellicott City, MD. 21043

Attn: Avis Corbin

Re: Amendment
Permit# B00114416
11020 Steeple Chase Ct. Lot# 28

Dear Avis,

Please amend the above building permit to reflect a change in setbacks.
The location of a new well required the house to be moved.

Thank you,

Patricia A. Orla
Agent for Ryan Homes

cc: JR Leonard
File

E/4/99

RASHA

cc: Health Dept
DPZ

8/12/99 Revised house location should
not impact existing well or septic system
OK to proceed DKS
Health Dept.

Post-it Fax Note

7671

Date 6/11/99 # of pages 1

To J.R. LEONARD

From JOEY E

Co. Dept. RYAN

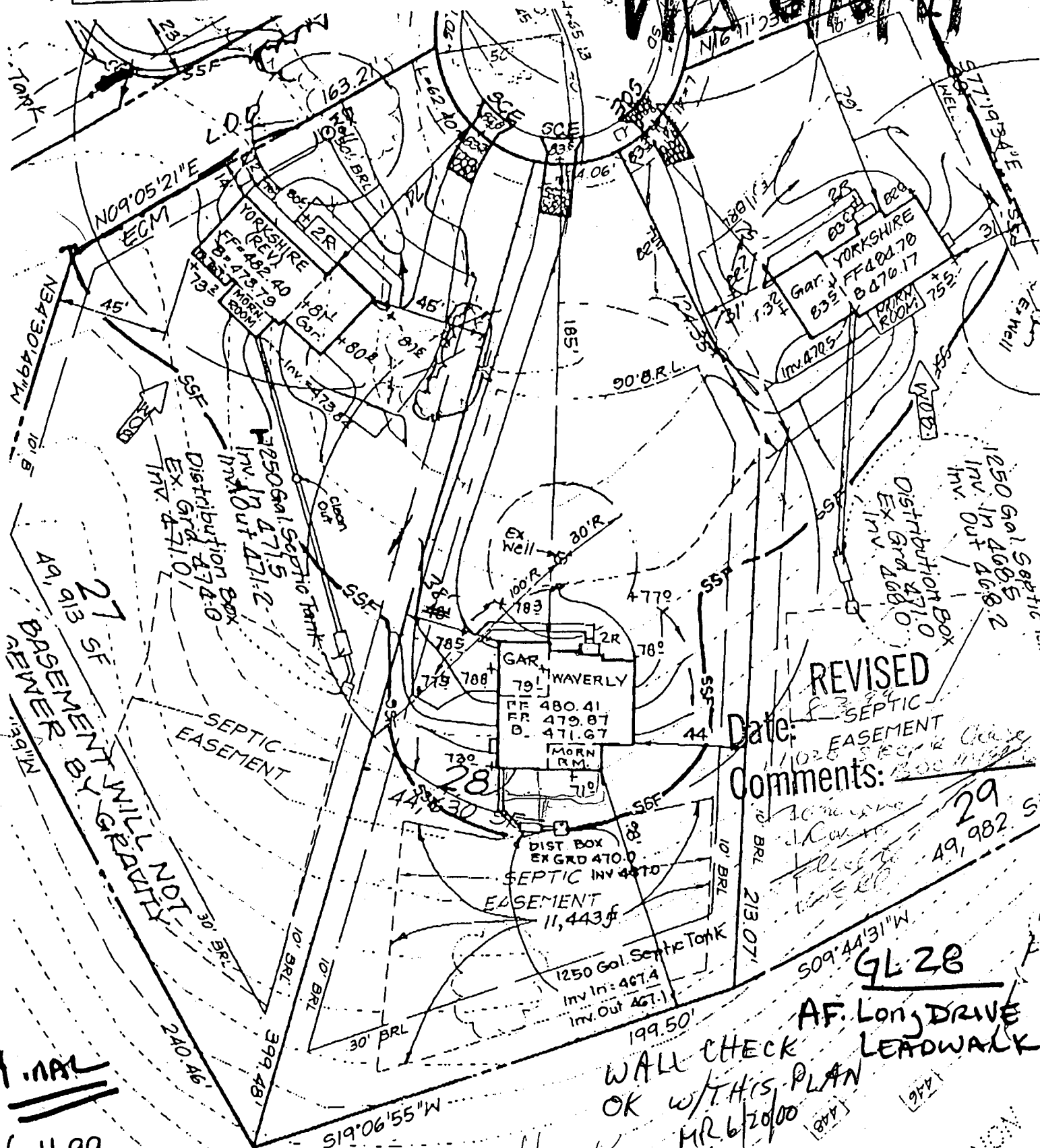
Cu CFS

Phone # Garther Hunt

Phone #

Fax # Lot 28

Fax #



REVISED

Date: 6/3/99
Comments: SEPTIC EASEMENT

GL 28

AF. Long DRIVE LEADWALK

WALL CHECK OK W/THIS PLAN
MR 6/20/00

Revision - Softbacks

JUN 11 '99 11:31

410 381 7500

PAGE 01

* REVISED

Approved Septic System Plan

Howard County Health Department

Total linear feet of trench

required 240 feet

Width of trench(es)

3 feet

Depth of trench(es)

6 feet

Depth of stone required below

distribution pipe 2 feet

[Signature]

8/10/99

Total linear feet of trench
required 240 feet

Width of trench(es) 3.0 feet

Depth of trench(es) 5.5 feet

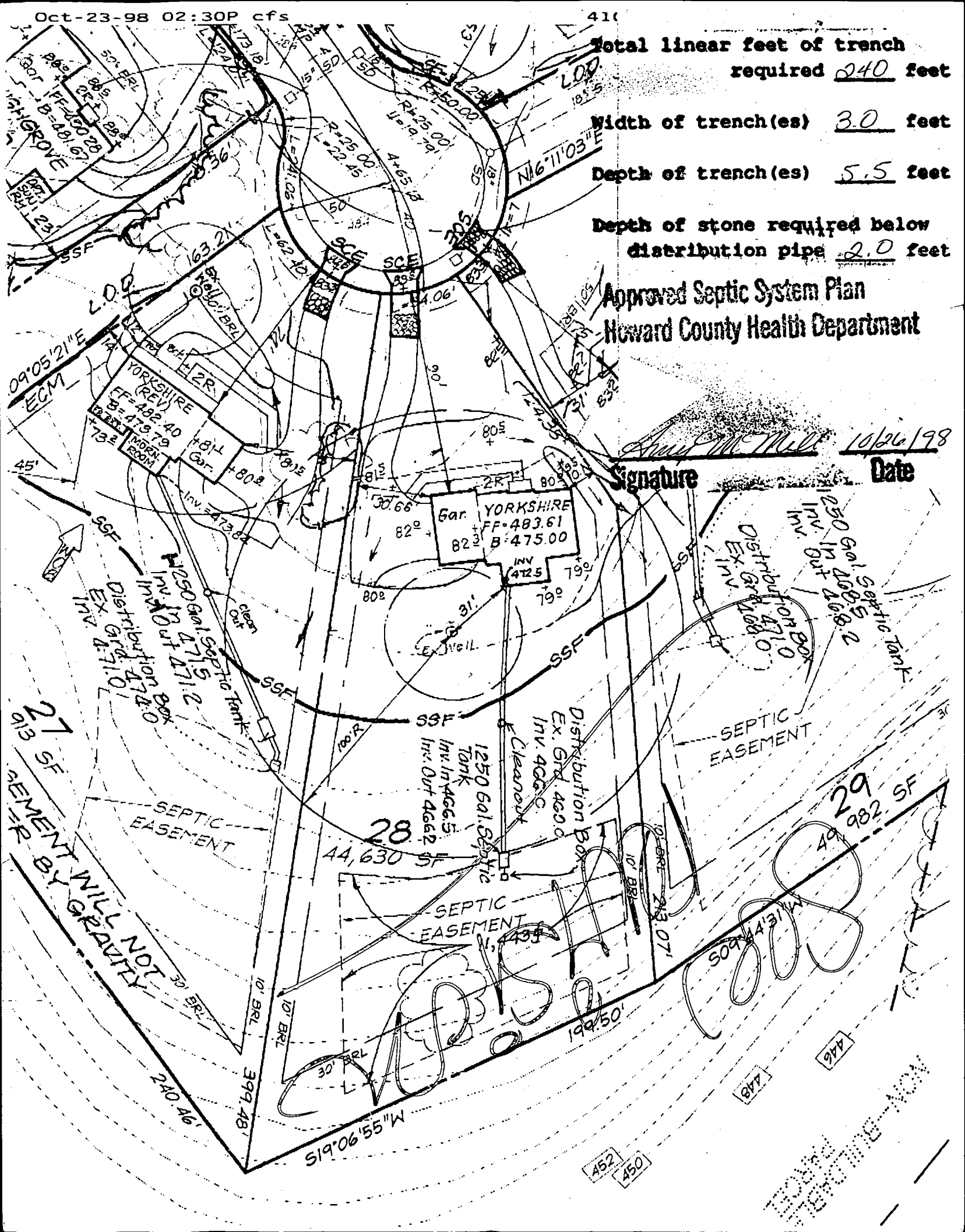
Depth of stone required below
distribution pipe 2.0 feet

Approved Septic System Plan
Howard County Health Department

Signature

Date

10/26/98



C1 4192

SEQUENCE NO.
(MDE USE ONLY)STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE TYPETHIS REPORT MUST BE SUBMITTED AFTER
WELL IS COMPLETED.COUNTY
NUMBER

A 56429B3

ST/CO USE ONLY
DATE Received

10 15 98

DATE WELL COMPLETED

10/9/98

Depth of Well

22 450 26
(TO NEAREST FOOT)PERMIT NO.
FROM "PERMIT TO DRILL WELL"

40-94-1696

OWNER RUSSELL DEV.
STREET OR RFD REEPLECHASE CT TOWN WINDY LAKE
SUBDIVISION GALTHESE HUNT SECTION 1 LOT 2P

WELL LOG

Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR
COLOR, DEPTH, THICKNESS AND IF WATER BEARINGDESCRIPTION (Use
additional sheets, if needed)

FEET

check
if water
bearing

	FROM	TO
Brown sandstone	0	25
HARD GRAY Granite	25	245
Light Green Granite	245	250
DARK Green Granite	393	395
GRAY Granite	395	450

Dry hole #1
452' Deep
#2 500' Deep
#3 300' Deep
#4 300' Deep
#5 300' DeepDry holes Abandoned
& sealed with
Cement & Rock cuttings

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)yes ☒ no ☐
44 44

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT ☒ BENTONITE CLAY ☐NO. OF BAGS 45 NO. OF POUNDS 450GALLONS OF WATER 42

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 89 ft.
(enter 0 if from surface)

CASING RECORD

casing
types
insert
appropriate
code below☒ ST
STEEL☐ CO
CONCRETE☐ PL
PLASTIC☐ OT
OTHERMAIN CASING TYPE ST Nominal diameter top (main) casing (nearest inch) 06 Total depth of main casing (nearest foot) 29OTHER CASING (if used)
diameter inch depth (feet) from toscreen type
or open hole
(insert
appropriate
code below)

SCREEN RECORD

☒ ST
STEEL☐ BR
BRASS☐ HO
OPEN HOLE☐ PL
PLASTIC☐ OT
OTHERC 2 DEPTH (nearest ft.)
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 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100C 2 DEPTH (nearest ft.)
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 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

DIAMETER OF SCREEN (NEAREST INCH)

from to

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

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)

T (E.R.O.S.) W Q

70 72 74 75 76

TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 6PUMPING RATE (gal. per min.) 1.56 gpmMETHOD USED TO MEASURE PUMPING RATE WATCH BUCKET

WATER LEVEL (distance from land surface)

BEFORE PUMPING 29 ft.WHEN PUMPING 239 ft.

TYPE OF PUMP USED (for test)

☒ A air ☐ P piston ☐ T turbine
☐ C centrifugal ☐ R rotary ☐ O other (describe below)
☐ J jet ☒ S submersible

PUMP INSTALLED

DRILLER INSTALLED PUMP (CIRCLE) (YES OR NO) YES ☒ NO ☐

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

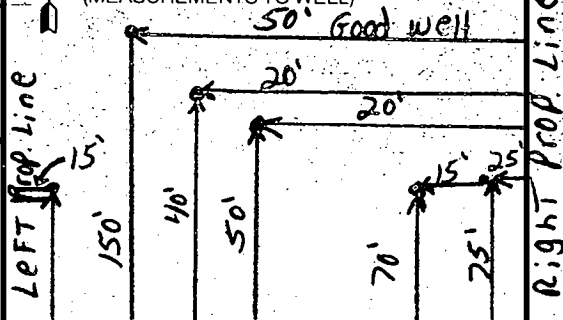
TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29

CAPACITY: GALLONS PER MINUTE (to nearest gallon) 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 2 (nearest foot)LOCATION OF WELL ON LOT
SHOW PERMANENT STRUCTURES
AND INDICATE NOT LESS THAN
TWO DISTANCES
(MEASUREMENTS TO WELL)

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 94-1696
Location of property (road) 5492 E 45E C
Subdivision GA. 92 LUMI Lot 28 Block Plat Sec.
Well Driller A. L. D. BLOW Owner RUSSELL 281

Depth of well 450 Ft
Distance of measuring point (M.P.) above ground 1 Ft
Static water level (S.W.L.) below M.P. 29'

I. High rate pumping -- reservoir drawdown

Time pump started 11:15 a.m. Pumping rate 15
Total time 1 hour to reach pumping water level 239' ft. below M.P.

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

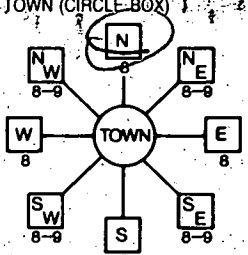
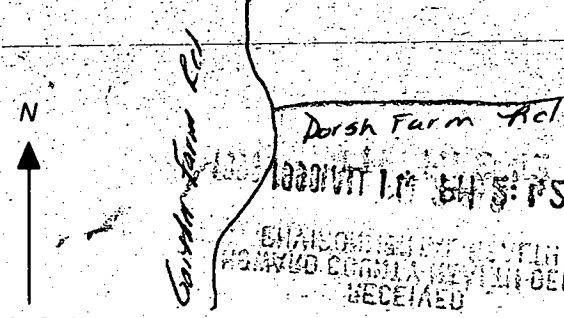
TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE time to fill 5 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
11:15	29'	4 sec		15
11:30	105'	5 sec		12
11:45	201'	9 sec		6.6
12:00	237'	30 sec		2
12:15	239'	41 sec		1.5
12:30	239'	41 sec		1.5
12:45	239'	41 sec		1.5
1:00	239'	41 sec		1.5
1:15	239'	41 sec		1.5
1:30	239'	41 sec		1.5
1:45	239'	41 sec		1.5
2:00	239'	41 sec		1.5
2:15	239'	41 sec		1.5
2:30	239'	41 sec		1.5
2:45	239'	41 sec		1.5
3:00	239'	41 sec		1.5
3:15	239'	41 sec		1.5
3:30	239'	41 sec		1.5
3:45	239'	41 sec		1.5
4:00	239'	41 sec		1.5
4:15	239'	41 sec		1.5
4:30	239'	41 sec		1.5
4:45	239'	41 sec		1.5
5:00	239'	41 sec		1.5

Well Permit No. HO - 94-11696
Location of property (road) STEEPLE CHASE COURT
Subdivision GATHER HUNT Lot 28 Block Plat Sec.
Well Driller MICHAEL BARLOW Owner RUSSELL DEVL

Depth of well 450 Ft.
Distance of measuring point (M.P.) above ground 1 Ft.
Static water level (S.W.L.) below M.P. 29'

Time pump started 11:15 A.M. Pumping rate 15
Total time 1 hour to reach pumping water level 239' ft. below M.P.

[illegible]

B 1 8010 2 3 4 5 6	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER HO -94 -1696 70 fill in this form completely 79
Date Received (APA) 8 MM DD YY 13 <u>Russell Development</u> 15 Last Name Owner First Name 34 <u>8808 Centre Park Drive Suite 108</u> 36 Street or RFD 55 <u>Columbia Md 21045</u> 57 Town 70 State 72 Zip 76		B 3 Howard LOCATION OF WELL 8 COUNTY 21 <u>Gaither Hunt</u> 23 SUBDIVISION 42 SECTION <u>44</u> 46 LOT <u>28</u> 48 50 <u>Wild Lake</u> 52 NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) <u>4</u> M 73 76 77 78	
DRILLER INFORMATION <u>Michael Barlow</u> MWD 355 Driller's Name 76 License No. 81 <u>Michael Barlow Well Drilling</u> Firm Name <u>912 Tawn Court Joppa, Md 21085</u> Address <u>[Signature]</u> <u>8/12/98</u> Signature Date		B 4 STEADY CHASE CT. 1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  11 NEAR WHAT ROAD: 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH N WEST W EAST E SOUTH S 34 70 37 DISTANCE FROM ROAD ENTER FT OR MI <u>65</u> 38 39 TAX MAP: <u>29</u> BLK: PARCEL <u>21</u>	
B 2 WELL INFORMATION 1 2 APPROX. PUMPING RATE (GAL. PER MIN.) 8 5 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 500 20		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	
APPROXIMATE DEPTH OF WELL <u>200</u> FEET. 24 28 APPROXIMATE DIAMETER OF WELL <u>6</u> INCH 30 37		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL <u>HOWARD</u> <u>A 5642930</u> COUNTY NAME COUNTY NO. STATE SIGNATURE INSERT S → DATE ISSUED <u>8/14/98</u> <u>[Signature]</u> <u>8/14/99</u> 43 MM DD YY 48 CO SIGNATURE EXP DATE NORTH GRID <u>520</u> 000 EAST GRID <u>830</u> 000 50 55 57 63	
METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jetted & DRIVEN 30 AIR-ROTARY <u>AIR-PERCussion</u> ROTARY (Hydraulic Rotary) 37 CABLE Reverse-ROTARY Drive-POINT other		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE E <u>830</u> N <u>520</u> 000 000	
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) ☒ THIS WELL WILL NOT REPLACE AN EXISTING WELL ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS ☐ THIS WELL WILL DEEPEAN 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 	
Not to be filled in by driller (MDE OR COUNTY USE ONLY)			
APPROP. PERMIT NUMBER 54 G A P 63 PERMIT No. <u>HO -94 -1696</u> 70 71 72 73 74 75 76 77 78 79			
SPECIAL CONDITIONS NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -			

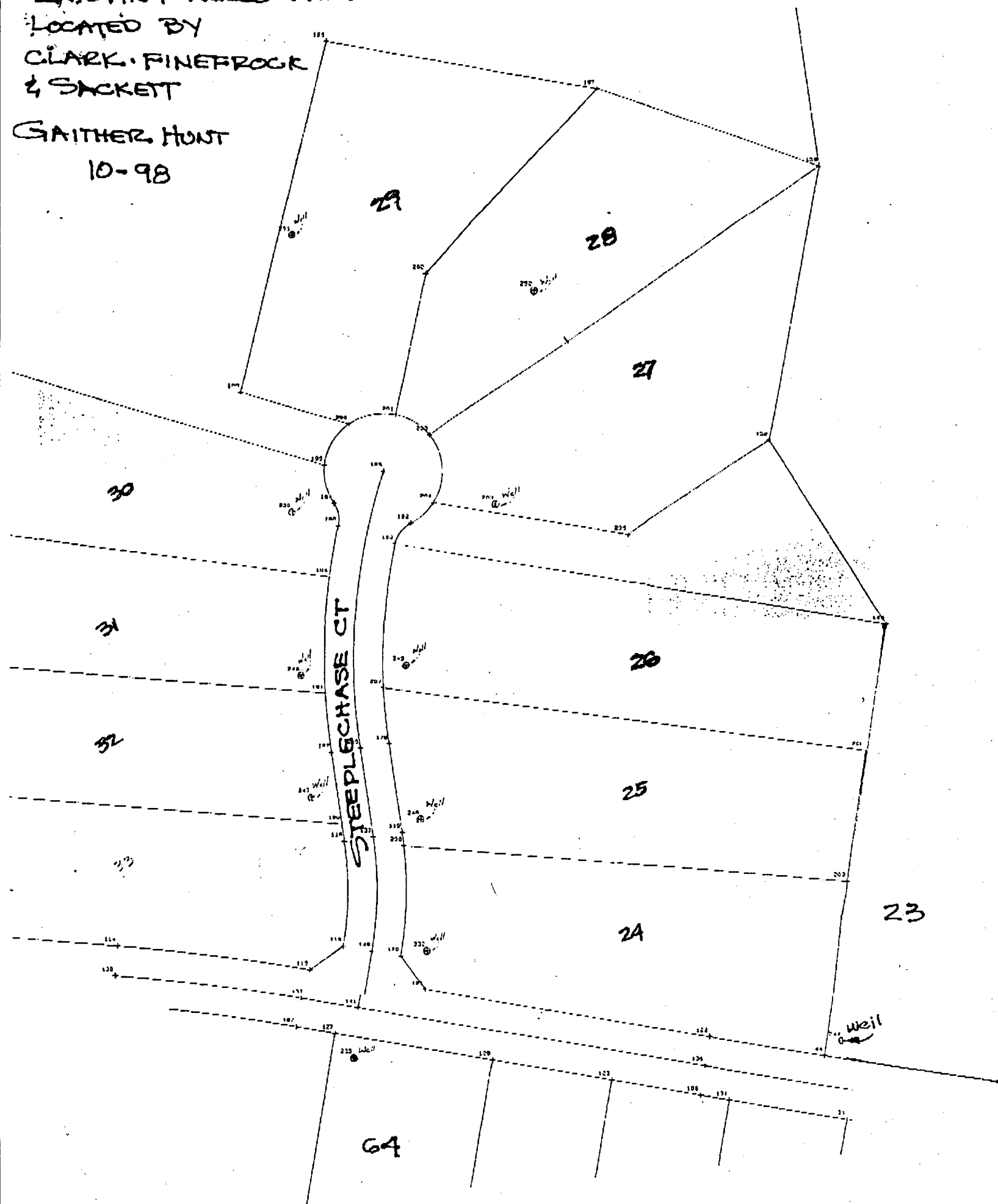
EXISTING WELLS FIELD

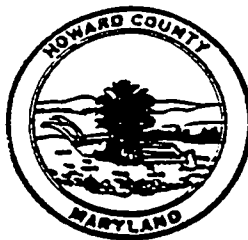
LOCATED BY

CLARK, FINEFROCK
& SACKETT

GAITHER, HUNT

10-98





HOWARD COUNTY HEALTH DEPARTMENT

Joyce M. Boyd, M.D., County Health Officer

10-20-98

NOT FAXED
TALKED w/ PAT
ORLA 10-20-98
AM

TO: Pat Orla

Building Permit Services

FROM: Amy McMillen

RE: B00114416 - Garth Hunt Lot 28

The above referenced building permit cannot be approved at this time. Based upon measurements provided by the well driller, it appears that the existing well is less than 30 feet from the proposed house and less than 100 feet from the proposed septic tank. Please provide the following information / revisions to resolve these issues:

- Field located (by a surveyor) actual well location
- Revised building permit plan w/ house & septic maintaining all required ~~set~~ minimum setbacks.

Thank you.

Number of pages (including cover sheet): 1

Amy McMillen

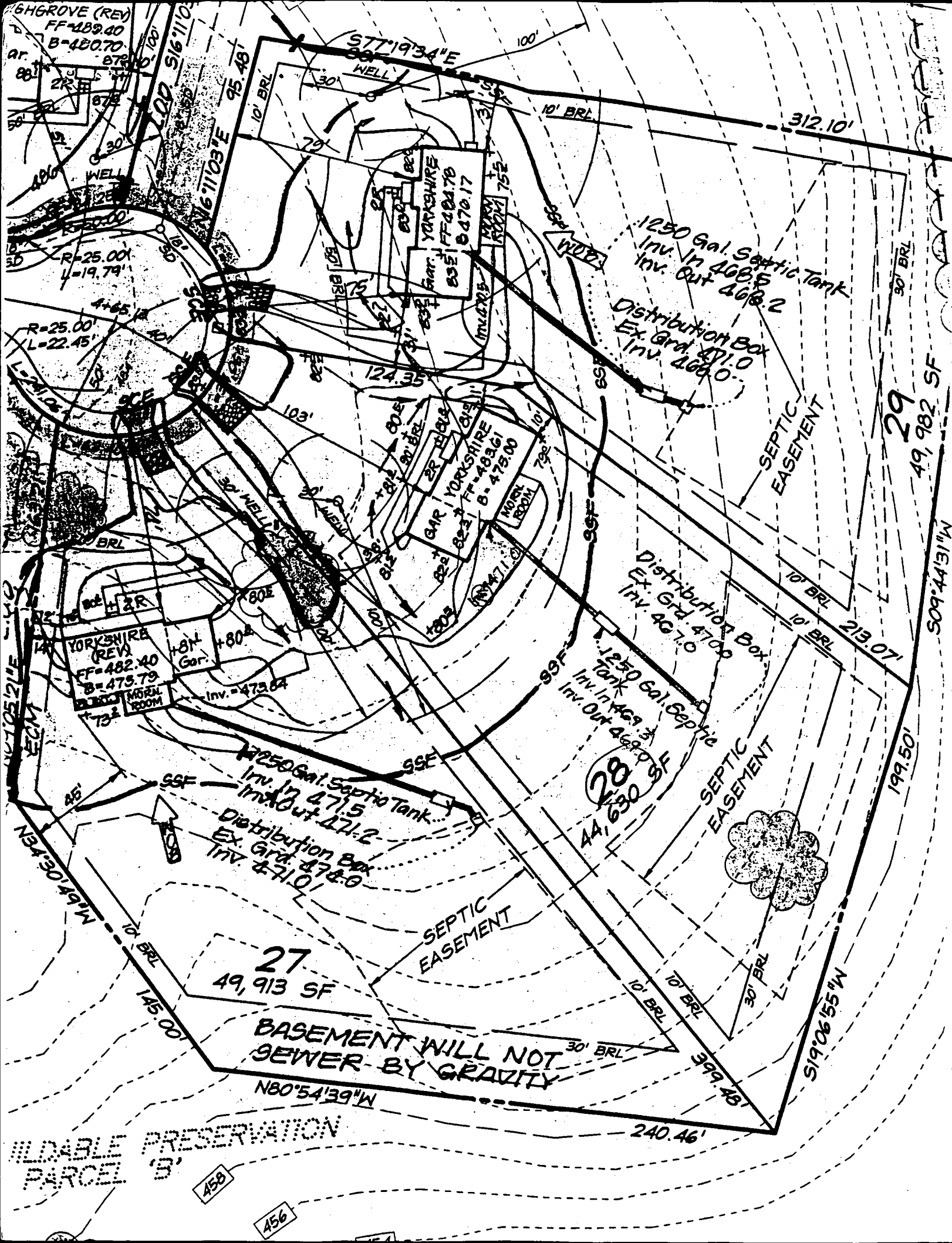
Bureau of Environmental Health

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

Water and Sewerage, Permits (410) 313-2640 Community Environmental Health (410) 313-2644

Food Protection Program (410) 313-2642 TDD (410) 313-2323

10-23-98
Actual well location
field located - it is
less than 100' to
proposed house
and less than
100' to septic
tank
AM



8/31/99
8:00 PM

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

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation ☒
Replacement ☐

Receipt # _____
Date _____

Name of Installer LEHSAC CORP

Telephone 410-242-6888

License Number 3344

Certified Well Pump Installer _____ Well Driller _____ Registered Plumber ☒

Name of Property Owner RYAN

Telephone 410-684-0501

Subdivision Gaithers Hunt Lot # 28 Well Tag # HO-94-1696

Site Address 11020 Steeplechase Ct

Pump

1. Type
 - a. Deep well jet _____
 - b. Shallow well jet _____
 - c. Submersible ☒
2. Make JACUZZI
3. Model # S1J517
4. Capacity 5 GPM

Motor

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

Pitless Adapter

1. Make WILLIAMS
2. Model # _____
3. Depth 42"

5. Pump exceeds well capacity Yes _____ No ☒
6. If Yes, is low pressure cutoff switch installed? Yes _____ No _____
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors _____ Cable guards ☒ Other _____

Tank

1. Capacity 86
2. Pressure relief valve? Y

Piping

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

Well data

1. Depth 450 ft.
2. Yield 1.5 GPM
3. Static water level 50 ft.
4. Will water supply be disinfected by installer? Y

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.

8/31/99-WPI-OW(SRM)

Signature of Applicant: [Signature]

Date: 8/31/99

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