Layout 12:00 122/00 200 Day 2:00 Day

### PERMIT

#### SEWAGE DISPOSAL SYSTEM

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH 410-313-2640 A\_58095=11 ISSUE DATE\_10-17-00

APPROVAL DATE 11-29-00

INDEXED

Fogle's Septic Clean, Inc. IS PERMITTE	ED TO INSTALL X ALTER
ADDRESS 580 Obrecht Road Sykesville, MD 21784	PHONE (410) 795-5670
SUBDIVISION Wellington West LOT NUMBER 22 ADDRESS 153	309 Doe Hill Court
PROPERTY OWNER <u>Pulte Homes</u> PROPERTY OWNER'S ADDRES	S 1501 S. Edgewood Street
SEPTIC TANK CAPACITY 1250 GALLONS	Baltimore, MD 21227
SEPTIC TANK CAPACITY GALLONS  PUMP CHAMBER CAPACITY GALLONS  NUMBER OF BEDROOMS4  SQUARE FEET PER BEDROOM 180	
NUMBER OF BEDROOMS4	
SQUARE FEET PER BEDROOM 180	
_INEAR FEET OF TRENCH REQUIRED	
RENCHES: Trenches to be 3 feet wide. Inlet 2 feet below original grade. Bot	tom maximum depth
4 feet below original grade. 2 feet of stone below distribution box. OCATION: Beginning from the intersection of the 177.10' and 78.38	21 1.6 14 1
trenches 15 feet down the 177.10' lot line and 100 feet off that s	same lot lines, Begin
trenches on contour toward the 177.10' lot line. 8/29/00 OK AU	
·	
PLANS APPROVED Amy McMillen	DATE 8/16/2000
PERMIT VOID AFTER 2 YEARS	
NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL IN	STALLATIONS
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 IN ARE NOT ACCEPTABLE	HOUSE TO DRAIN FIELDS, 90° ELBOWS
NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX, DRAINFIELDS) TO BE 100 FEET OTHERWISE SPECIFICALLY AUTHORIZED	FROM ANY WATER WELL UNLESS
NOTE: NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH UNLESS SPECIFICALLY AUTHORIZE	
NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS	800 135109 - DECK
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 INSTALLE PERMIT (2) PUMP PERFORMANCE TEST IS NECESSARY PRIOR TO HEALTH DEPARTMENT APPRO	ER PRIOR TO ISSUANCE OF SEPTIC

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

P 514296

	TRENCH DATA
	TRENCH WIDTH30
	TRENCH INLET DEPTH 2.0
	TRENCH BOTTOM DEPTH 4.0
	DEPTH OF STONE
	NUMBER OF TRENCHES 3
	TOTAL TRENCH LENGTH 240
	ABSORBENT AREA 720
	DISTRIBUTION BOX LEVEL OK
	BAFFLE IN DISTRIBUTION BOX OK.
80	
40'	SEPTIC TANK DATA
23.	SEPTIC TANK 1250 TS GALLONS
14.5	MANHOLE RISER Not needed
	6 INCH INSPECTION PORT 012
8,5	PUMP CHAMBER DATA
	PUMP CHAMBER SALLONS NA
/31'	MANHOLE RISER NA
H0-94-1669	ALARM NA
Doe Hill Court	PUMP PERFORMANCE TEST
PRE-CONSTRUCTION INSPECTION: 11/27/00 OK TO STA	RT (MR)
INSPECTION COMMENTS: 11/28/00 House connection made. Sa	Last (BB)
11/29/00 OK to cover- all work AU	
	· · · · · · · · · · · · · · · · · · ·

INSPECTOR A Wi Millen DATE SYSTEM APPROVED 11/29/00

# 4/21/91

## APPLICATION

PERCOLATION TESTING

P\_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

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

DATE 4/11/97

TO: THE COUNTY HEALTH OFFICER ELLICOTT CITY, MARYLAND

THEREBY APPLY	FOR THE NECESSA	AT LEST PHIOH TO	APPLICATION FOR	PERMIT TO CO	JN2 I HUC	(OH HECONSTRUCT) A SEWAGE DISPOSAL STSTEM	•
PROPERTY OWNER	GAL	Partner	Ship		6 Ta		
ADDRESS	15298	Lygion (	chapel	Rd.	_PHONE	442-2101	
AGENT OR PROSPECT	IVE BUYER	J 17161.	2:111				
ADDRESS					_PHONE	•	
PROPERTY LOCATION	:						
SUBDIVISION	Brendel	propert	ý		LOT NO	15	
ROAD AND DESCRIPTI	on Win	Chapel R	oad (s	iouth	Siè	15 He)	
TAX MAP	PARCEL#	69,68,	222				
SIZE OF LOT	lacre			TYPE BLDG		Single family dwelling (SINGLE FAMILY DWELLING OR COMMERCIAL)	
THE SYSTEM INSTAL	LED UNDER THIS	APPLICATION IS A	ACCEPTABLE ONL	Y UNTIL PUB	LIC FACILI	LITIES BECOME AVAILABLE. I FULLY UNDERSTAND	THE
FEE CONNECTED W	TH THE FILING (	OF THIS PERC T	EST APPLICATION	I IS NON-REF	UNDABLE	S UNDER ANY CHROUMSTANCES. I ALSO AGREE	то
COMPLY WITH ALL	M.O.S.H.A. REQUIRE	MENTS IN TESTIN	G THIS LOT	··· <del>·</del>	··· ·	(SIGNATURE OF APPLICANT)	
APPROVED BY			FOF		<del> </del>	DATE	
DISAPPROVED BY	1,174 d. 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,		FC	OR		DATE	
HOLD PENDING FURT	HER TESTS						
REASONS FOR REJEC	TION OR HOLDING _						
PERCOLATION TEST F	PLAT/PRELIMINARY F	LAT - TITLE OR I.D.	#			DATE	
SITE DEVELOPMENT	PLAN/FINAL PLAT - TI	TLE OR I.D. #	<del></del>			DATE	

### THIS IS NOT A PERMIT

HD-216 (3/92)

SOIL PROFILE SOIL PROFILE no: prown distinct SICILM clay 19+brn layer SILM orange tan 1g+. 7.5 mothed tan Silm Silm 150 10% dull grey RX 31 0 150 orainge 061 11.0 refusal SILM 14.C very dark red SOCILM 1020 INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE. rocks mgon PRE-WET TEST - 1" DROP DATE TEST NO. DEPTH START STOP the START STOP TIME baces 1230 him -25-97 6 of the 10:59 10:59 11:02 3min 10:56 raks 10:48 10:55 10:55 11:10 31 15min 156 6-19-97 14,0-see profile -11.5 Visual 215 REMARKS Shallow Syst. Only TYPE OF SOIL TESTED BY AMY MCMILLEN ALSO PRESENT Chuck Shamp TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME \_ TRENCH WIDTH \_\_\_\_ INLET DEPTH\_ MAXIMUM BOTTOM DEPTH \_\_\_\_ SQ. FT/BEDROOM

## 4/29

### APPLICATION

PERCOLATION TESTING

TO: THE COUNTY HEALTH OFFICER

**TELEPHONE: 313-2640** 

HOWARD COUNTY HEALTH DEPARTMENT

3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043

BUREAU OF ENVIRONMENTAL HEALTH

ELLICOTT CITY, MARYLAND I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM. Partnership ed. ADDRESS PHONE\_ PROPERTY LOCATION: (South side) Road PARCEL # 69 68, 222 acre 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 COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT. .

### THIS IS NOT A PERMIT

\_\_\_\_\_ DATE \_\_

HD-216 (3/92)

HOLD PENDING FURTHER TESTS \_

**REASONS FOR REJECTION OR HOLDING.** 

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. #\_

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # \_

AE	5 <u>8095</u>			·		<b>5</b>	-				÷ • • • •	
	SOIL PROFILE									- ]	60U DD0	
0'	SOIL PROFILE	* .						-		0'	SOIL PRO	FILE
	orange											
	Sicium						:					
4.0	dark											
	red 20%											
	rock Silm	İ		0		-,,						
7.0				29	•.	/45	0					
	grev.						30					
	Sichen			·						7		
85	water		*									
	_30_		. * .					·				<del></del>
•	orange	ľ					<del> </del>			_		
	brown Silm											
7,0	mothed											
	160 1100											
	Silm	L	IND	ICATE NORTH	- NAME A	JOINING R	OADWA	Y AS BASE LII	NE.			
	1 ' ' 1	: Г		ICATE NORTH	I - NAME A	DJOINING R				1* DBOP		
	Silm 19t tan W	<u> </u>	DATE	TEST NO.	DEPTI	H ST	PRE- ART	-WET STOP		1" DROP STOR	Р ТІМ	E
· · · · · · · · · · · · · · · · · · ·	Silm 19t tan W Pockets of				DEPTI	H ST	PRE-	-WET	TEST - START	STO		E
	Silm 19t tan W Pockets of		DATE	TEST NO.	DEPTI 3.0	1 ST	PRE- ART	WET STOP ->30	TEST- START	SUL JUC	icient F	E
	Silm 19t tan W Pockets of		DATE	TEST NO. 29	DEPTI 3.0	1 ST	PRE-ART	WET STOP ->30	TEST - START	SUL JUC	icient F	
10.0	Silm 19t tan W1 Pockets		DATE	TEST NO.	DEPTI 3.0	1 ST 85 10:	PRE- ART 20 -	WET STOP ->30 120 34	TEST- START	SULL JUC ID:3	icient F	
10.0	Silm 19t tan W Pockets of	- - - - - -	DATE	TEST NO.	DEPTI 3.0	1 ST 85 10:	PRE- ART 20 -	WET STOP ->30 120 34	TEST- START MIN -IN	SULL JUC ID:3	icient F 6 1/2m	
10.0	Silm 19t tan W Pockets of		DATE	TEST NO.	DEPTI 3.0	1 ST 85 10:	PRE- ART 20 -	WET STOP ->30 120 34	TEST- START MIN -IN	SULL JUC ID:3	icient F 6 1/2m	
10.0	Silm 19t tan W Pockets of		DATE	TEST NO.	DEPTI 3.0	1 ST 85 10:	PRE- ART 20 -	WET STOP ->30 120 34	TEST- START MIN -IN	SULL JUC ID:3	icient F 6 1/2m	
10,0	Silm 19t tan W Pockets of		DATE	TEST NO.	DEPTI 3.0	1 ST 85 10:	PRE- ART 20 -	WET STOP ->30 120 34	TEST- START MIN -IN	SULL JUC ID:3	icient F 6 1/2m	
10.0	Silm 19t tan W Pockets of		DATE	TEST NO.	DEPTI 3.0	1 ST 85 10:	PRE- ART 20 -	WET STOP ->30 120 34	TEST- START MIN -IN	SULL JUC ID:3	icient F 6 1/2m	
10.0	Silm 19t tan W Pockets of		DATE	TEST NO.	DEPTI 3.0	1 ST 85 10:	PRE- ART 20 -	WET STOP ->30 120 34	TEST- START MIN -IN	SULL JUC ID:3	icient F 6 1/2m	
10.0	Silm 19t tan W Pockets of		DATE 4-25-97	TEST NO. 29 30	DEPTI 3.0 4e 2.5 VII	1 ST 85 10 PLD -1 D 10 UKBICI	PRE- ART 20 -	WET STOP ->30 ->30 ->34	TEST- START  MIN -IN  10:34  10:34	STON SULL ID:3	ICIENT F 6 1/2m	NIO.
10.0	Silm 19t tan W Pockets of	R	DATE  4-25-97  EMARKS Wolfer  YPE OF SOIL	TEST NO. 29 30	DEPTI 3.0 4 2.5 VIII	ptn -	PRE- ART 20 -	WET STOP ->30 ->30 ->31 ->34	TEST- START MIN -IN 10:34 10:34 10:40	STON SULL ID:3	CLENT F 6 1/2m F	rear
10.0	Silm 19t tan W Pockets of	R	DATE 4-25-97	TEST NO.  29  30  Table h	DEPTI 3.0 Ce 2.5 VIII	pln -	PRE- ART 20- 30 + 31 -	WET STOP  ->30  ->30  ->31  ->34  ->34  ->34  ->34  ->34  ->36  ->	TEST- START  MIN -IN  10:34  10:34  The high PRESENT CH	STON SULL 10:3	ICIENT F 6 1/2m F 1 this i	yin p.

, . <del>. .</del> .

C 1 SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT	THIS REPORT MUST BE SUBMITTED AFTER WELL IS COMPLETED.
1 2 3 6	FILL IN THIS FORM COMPLETELY PLEASE TYPE	COUNTY A 5 80 95 U
ST/CO-USE ONLY DATE WELL COMPLETED BY DO	/Y	PERMIT NO. FROM "PERMIT TO DRILL WELL"
08 13 8 13	98 22 180 26 (TO NEAREST FOOT)	<u>HO 94 1166 9</u> 28 29 30 31 32 33 34 35 36 37
OWNER BPMB ASSOC.  STREET OR RFD Last name DOE IN	(1) C+ first name TOWN C	atenwood
SUBDIVISION Kellington	JEST SECTION T	LOT
WELL LOG  Not required for driven wells	GROUTING RECORD  WELL HAS BEEN GROUTED (Circle Appropriate Box.)	C 3
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING	TYPE OF GROUTING MATERIAL (Circle one)	PUMPING TEST HOURS PUMPED (nearest hour) 3
DESCRIPTION (Use additional sheets if needed)  FROM TO bearing	NO. OF BAGS 46 13 NO. OF POUNDS. 145 46 13 NO. OF POUNDS. 145 46 13 NO. OF POUNDS. 145 145 145 145 145 145 145 145 145 145	PUMPING RATE (gal. per min.)
Dirt 0 1 Soft Br. Shale 1 35	GALLONS OF WATER 78	METHOD HEED TO
Soft Br. Sand-	DEPTH OF GROUT SEAL (to nearest foot)  from 0 ft. to 39 ft.	MEASURE PUMPING RATE submersible WATER LEVEL (distance from land surface)
stone 35 37 Hard Blue Grafite 37 46	(enter 0 if from surface)	BEFORE PUMPING 35 ft.
Hard Br. Sand- stone 46 48 X	casing types insert ST CO	7.4
Hard Blue Grafite 48 125	(appropriate code STEEL CONCRETE CONCRETE	WHEN PUMPING $\frac{74}{22}$ ft.
Hard Br. Sand- stone 125 127 X	PLASTIC OTHER	TYPE OF PUMP USED (for test)  A air  P piston  T turbine
Hard Blue Grafite 127 180	MAIN Nominal diameter Total depth CASING top (main) casing of main casing TYPE (nearest inch)! (nearest foot)	C centrifugal R rotary O (describe
	ST 6 41 66 70	27 27 below)
A Comment	E OTHER CASING (if used)	jet submersible
	C diameter depth (feet).	PUMP INSTALLED
	A S .	DRILLER INSTALLED PUMP (CIRCLE) (YES or NO)
	G	IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.
	screen type or open hole  STBR HO	TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O)  29
The state of the s	insert STEEL BRASS OPEN BRONZE	IN BOX 29.  CAPACITY: GALLONS PER MINUTE
	code below PLASTIC OTHER	*(to nearest gallon) 31 35
	C 2 DEPTH (pearest ft.)	PUMP HORSE POWER  PUMP COLUMN LENGTH;  37  41
NUMBER OF UNSUCCESSFUL WELLS: 0	1 H O 41 180	(nearest ft.) 43 47
WELL HYDROFRACTURED Yes N	E	CASING HEIGHT (circle appropriate box and enter casing height)
CIRCLE APPROPRIATE LETTER  A WELL WAS ABANDONED AND SEALED	H <sup>2</sup> 23 24 26 30 32 36 S	49 AND SURFACE (nearest)
E ELECTRIC LOG OBTAINED	C 3 R 38 39 41 45 47 51	$\frac{2}{50   51}   (float cst)$
P TEST WELL CONVERTED TO PRODUCTION WELL  I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN	E SLOT SIZE 1 2 3	LOCATION OF WELL ON LOT - SHOW PERMANENT STRUCTURES
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	DIAMETER (NEAREST OF SCREEN INCH)	AND INDICATE NOT LESS THAN TWO DISTANCES
HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.	from to	(MEASUREMENTS TO WELL)
DRILLERS LIC. NO. 1 M W D2_5_6 1	GRAVEL PACK  IF WELL DRILLED  WAS EL OWING METAL BROWN AND THE STATE OF THE STATE O	MINN Change DOZO
Dana Kyker Jr. II DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)	WAS FLOWING WELL IN THE WAS FLOWING WELL IN THE WAS FLOWING WELL IN THE WAS FLOWING WAS FL	$\Theta$
LIC NO. I JW D 3 3 4	(NOT TO BE FILLED IN BY DRILLER)  T (E.R.O.S.) W Q	
Dana Kylen Joth	70	3 Due
SITE SUPERVISOR (sign of driller or journeyman responsible for sitework (different from permittee)	TELESCOPE LOG TALESCOPE LOG OTHER DATA	
DENV-CR97	© COUNTY	

(	· · · · · · · · · · · · · · · · · · ·	
Page	1 of 1	
Date	08/13/98	•

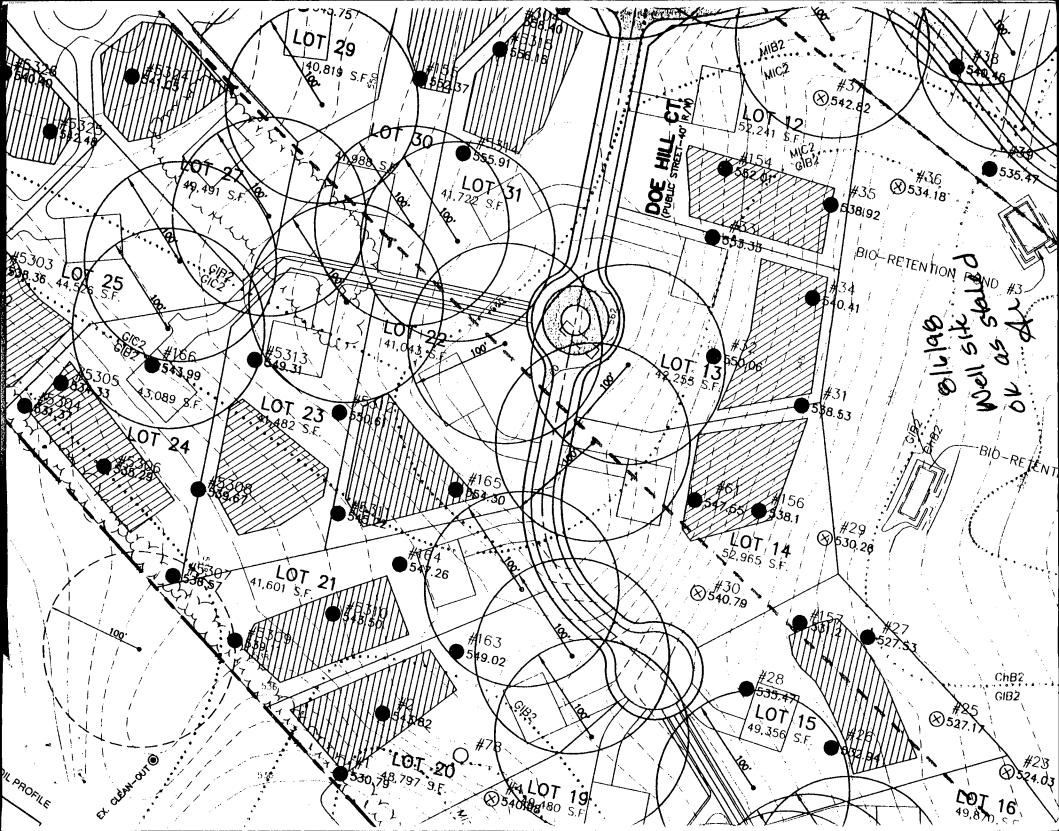
### FIELD DATA SHEET HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 94-1669 Location of property (road) Doe Hill-C	<b>:</b> }		
Subdivision Wellington West Well Driller Dang Kyker	Lot 2Z Block Owner BOMB A	Plat 1556C	Sec. 2
Depth of well 180 feet  Distance of measuring point (M.P.) about the static water level (S.W.L.) below M.P.	ve ground 2 feet 35 feet		
I. High rate pumping reservoir drawdown  Time pump started 11:45  Total time 3hrs to reach pumping a	Pumping rate yater level 74	12 qpm ft. below	<u></u>

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

TIME (in 15 minute in- tervals	WATER LEVEL below M.P.	PUMPING RATE time to fill \( \frac{1}{2} \) 1 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
11:45	35'	5 sec.		12
12:00	48'	5 sec.		12
12:15	56'	5 sec.		12
12:30	58'	5 sec.		12
12:45	59'	5 sec.		12
1:00	60'	5 sec.		12
1:15	63'	5 sec.		12
1:30	65 <b>'</b>	5 sec.		12
1:45	67 <b>'</b>	5 sec.		- 12
2:00	68'	5 sec.		12
2:15	70'	5 sec.		12
2:30	72'	5 sec.		
2:45	74'	5 sec.		12 12
				· · · · · · · · · · · · · · · · · · ·
·	•			

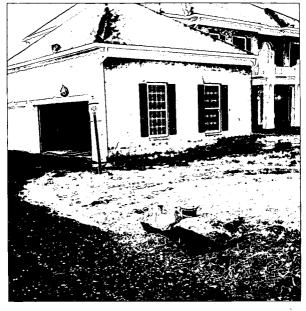
ام	SEQUENCE NO.	STATE OF	MARYLAND	STATE PERMIT NUMBER	
	(MDE USE ONLY)		DRİLL WELL	HO-GU - 111-08	
`   '	6.		int or type	70 fill in this form completely	L
-	Deta Descript (ADA)				1
	Date Received (APA)  O 803 98  OWNER INFOR	MATION	B 3 HOWAL	LOCATION OF WELL	
	8 MM DD. YY 13	2 0 -	8 COUNTY	21	1.18
	ASSOCIATES L	OPMB 1	WE// INSTA	in West	
	15 Last Name Owner	First Name 34			
	15298 UNION Chap 36 Street or RFB	el Road	SECTION 44 46	LOT. 2.2.	
	36 Street or RFD		44 46	48 50	
	Wood PiNe my	21797		wood	
	57 Town 70 State 7  DRILLER INFORMATION	72 Zip 76	52 NEAREST TOWN	71	
		7 ~/	MILES FROM TOWN (en	ter 0 if in town)	
	DANA 124/Pel TRTI N Briller's Name 76	ا کے <u>ا</u> کے <u>ا</u> کے License No. 81	B 4	73 70 77 70	
			1 2	Die Hill CT	
	Firm_Name	M DAININ INC	DIRECTION OF WELL FROM TOWN (CIRCLE BOX)	11 NEAR WHAT ROAD 30	
	Westminster Rolary WE Firm Name Por Bet 86 I Westminster	L. Md 21157		ON WHICH SIDE OF ROAD	]
AK	Address	_		(CIRCLE APPROPRIATE BOX)	
24. 11	Dan Xal 24	7-22-98	8-9	WEST STEAST	
	Signature	Date	W TOWN E	34 / <i>ОС</i> 37 <b>souт</b> н	
$\frac{B}{1}$	3 2 WELL INFORMATION APPROX. PUMPING RATE —	<u>)                                    </u>	·_/\\	DISTANCE FROM ROAD	
	(GAL. PER MIN.) 8	2 Gr 12	SW S 8-9 S 8-9	ENTER FT OR MI 38 39	
ž I	AVERAGE DAILY QUANTITY NEEDED 14	$\frac{575}{20}$	8-9 5 8-9	TAX MAP: // BLK: PARCEL ZZ	1
	USE FOR WATER (CIRCLE APP			O BE FILLED IN BY DRILLER	1
( j	DOMESTIC POTABLE SUPPLY & RESIDEN	ΤτΔΙ	HEAL]	TH DEPARTMENT APPROVAL	
	IRRIGATION	·	Howard	CO A58095 COUNTY NO.	
	F FARMING (LIVESTOCK WATERING & AGRI	CULTURAL	COUNTY NAME	COUNTY NO.	
	HHIGATION	.**	STATE SIGNATURE	INSERT S	
.22	I INDUSTRIAL, COMMERICIAL, DEWATERIN	G	DATE ISSUED	2	ø
	P PUBLIC WATER SUPPLY WELL		080698 43 mm od yy 48	A MCMULLO 8/6/99 CO SIGNATURE EXP. DATE	
	T TEST, OBSERVATION, MONITORING		NOTEL	EACT	A.
	G GEO-THERMAL		GRID 530 (	$\frac{0.00}{55}$ GRID $\frac{790}{57}$ 0.00 63	
`  -			SHOW MAJOR FEATURE	ES OF CAPACITAD	
	APPROXIMATE DEPTH OF WELL 230	- /J·FEET	BOX & LOCATE WELL	11/1/10 1-00	-
	APPROXIMATE DEPTH OF WELL 24	28	WITH AN X	WATER	
.	APPROXIMATE DIAMETER OF WELL	NEAREST INCH	SOURCES OF DRILLING	WATER 3HR DUMP 12400	
			2.		
	METHOD OF DRILLING		<b>3</b>		12, 1
30	BORED (or Augered) JETTED	Jetted & <u>DRIVEN</u>		1 DE CALL	
37	AIH-HOTARY AIH-PEHCUSSION I	ROTARY (Hydraulic Rotary)	WRITE THE BOX NUMBI	ER \	
<b>3</b> "	CABLE HEVerse-HOTary	<u>DR</u> ive- <u>POINT</u>	FROM THE MAP HERE ↓	XGEII	
	other		· 790	NOE!	
1,	REPLACEMENT OR ĎĚEPE. (CIRCLE APPROPRIATE			000	
r	THIS WELL WILL NOT REPLACE AN EXISTIN	*	N_530		1
<u> </u>	THIS WELL WILL REPLACE A WELL THAT V			W SHOWING LOCATION OF WELL IN	
	ABANDONED AND SEALED	ø		TOWNS AND ROADS AND GIVE	
39	S THIS WELL WILL REPLACE A WELL THAT W		_	TO NEAREST ROAD JUNCTION	
	FOR POLICY ON STANDBY WELLS		LA ALION	I Chapel Kogy	
1	D THIS WELL WILL DEEPEN AN EXISTING WE				
	PERMIT NUMBER OF WELL TO BE REPLACED OF (IF AVAILABLE) 41 -	R DEEPENED 52	N <sup>*</sup>	Ja	'
	<u> </u>		<b>A</b> >	£	
. [	Not to be filled in by driller (MDE OR CO	OUNTY USE ONLY)	Ž. T	125	
	ALTIOL: LENVIL NOWDEN	G A P	$\pi$	S 1=	
	54	63	3	_ /0	
	PERMIT No. 46 -	94 - 1668	<u> </u>		
	SPECIAL CONDITIONS	: 13 14 13 1.0 11 18 19		<u> </u>	1
	NOTE = APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED =				]
DI	ENV-Permit 97	② COUN			1 2 2 2 2 2



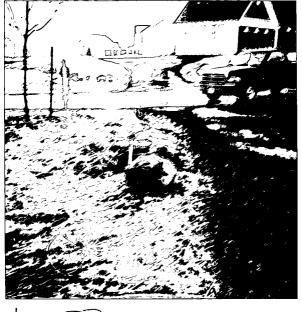
12/5/00 /26/01

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

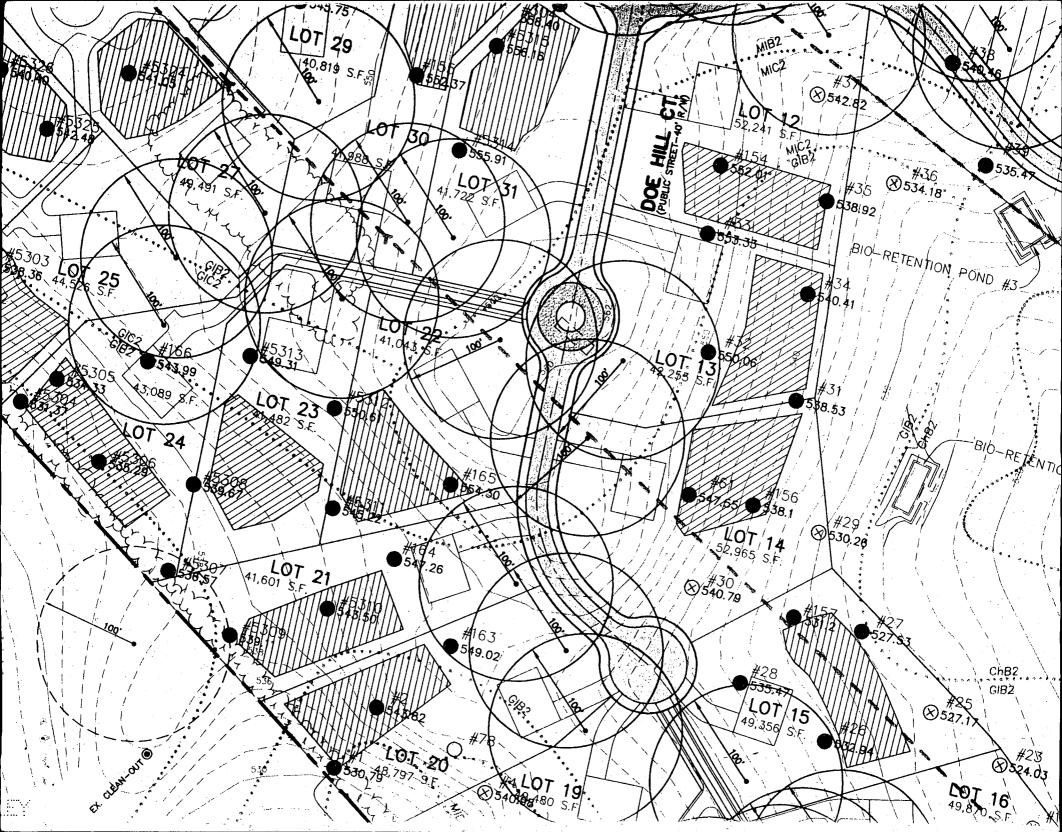
Yafa	11 41 A41 977 M %	
Information Form for the Ins	tallation of the Well Pump. Pitiess Adapter, and Supply Piping	
NOTE: The installer is responsible	le for requesting an inspection prior to 9 am on the day of the desired	
inspection. No work is to be covered	ustil approved by the Health Department. All installations must comply	
Construction Paralations) Roberts	ng Code (NSPC, as amended locally) and COMAR 26.04.04 (MD Well	
Course Section Meganitation, printings	on of a complete form is required prior to Use and Occupancy approval.	
Company Name: WIL LOUGHRY PL	UMB/M- SERVICE Telephone #: 4/0 - 781-7051	
Address: 10-407 FATR	ICK DR.	
SYKESVILLE	mo: 2/184	
(Must circle one) Licensed Flumber	Times and West Physics Figures & West Value at	
License # and name of individual respon	Licensed Well Driller Licensed Well Pump Installer	
Name (Print): CHRIS WIC	COVEHBY Licenset (2092)	
*A Ecosed 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. MILTE. Subdivision: WELL (NGT)	NOVE_COPIL_Telephone #: 410 - 644 - 5403	
Site Address: 15304 DOF	Lot #: do Well Tag #: HO - 44- 16 64	
DOOD FIVE MD	21797	
Submersible Pump Data	Pitless Adapter Well Cap and Electric Conduit	-
Make: TACUZZI	Make: <u>MAKVARD</u> Two piece watertight cap:	
Model #:	Model#: Screened, vented well cap:	
Pump Capacity GPM Well Yield: GPM	Depth: 48" (36" min) Cap secured to casing	:
Depth of well encountered at time of pur	NSF approved: Conduit min 18" B.G.: Amp installation: (feet) Conduit secured to well cap:	*
If pump capacity exceeds well yield, a lo	mp installation:(feet) Conduit secured to well cap: www.water cut off switch is required by NSPC 1990 Section 17.8.4	:
reading stressors of Capie Sireras sic tedi	uired - Must circle ane	
Safety rope, if used, attached to inside	of well casing with eye bolt	
Piping to house	House Connection	
Type: ORESTLINE	PVC slesved to undisturbed soil at wall penetration:	•
PSI: <u>/" (160 psi min)</u>	Approximate length of sleeve: 6	
Depth of supply line: (36" min)	Sleave caniked and scaled properly:	
The woter example line is montand to be	and board for first first the same	•
listribution bax, drainfields, and sews	e at least ten feet from the septic tank, pump chamber, sewage piping, ge reserve area. If this <u>cannot</u> be accomplished, contact this office for	
ipproval prior to installation.	So receive meet in east resultant ne secomparated, constant that offsee 101	
A. WIAA		*
Cha Willow	K 12/4/00	
Signature of company representative resp	possible for installation date	N
For Health Depar	Date Insp. Approved:  The supply line at least 36" below grade  I and attached to casing securely  I least 18" below grade/strached to cap properly  I properly and casing 8" above finished grade	
		1.
Date Insp. Requested: 12 5 00	Date Insp. Approved:	104
aspection Data: Pitless adapter and water	a supply line at least 16" below grade	Jo SK.
Elec conduit extende at	and attached to casing securely t least 18" below grade/attached to cap properly	op in
Safety rope installed in	side of well casine	/ DK/
Correct well tag attache	d property and casing 8" above finished grade	
Water supply line sterve	and the structure of th	۴
Adequate grout observe	d below pittess adapter	

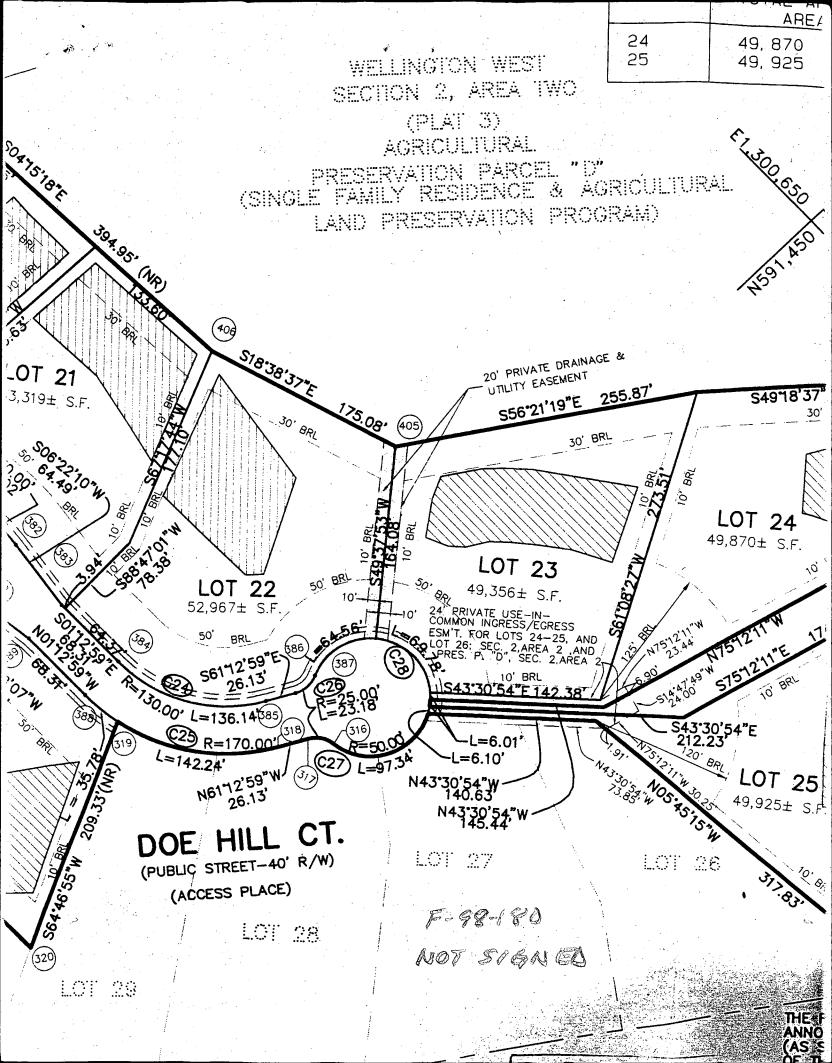


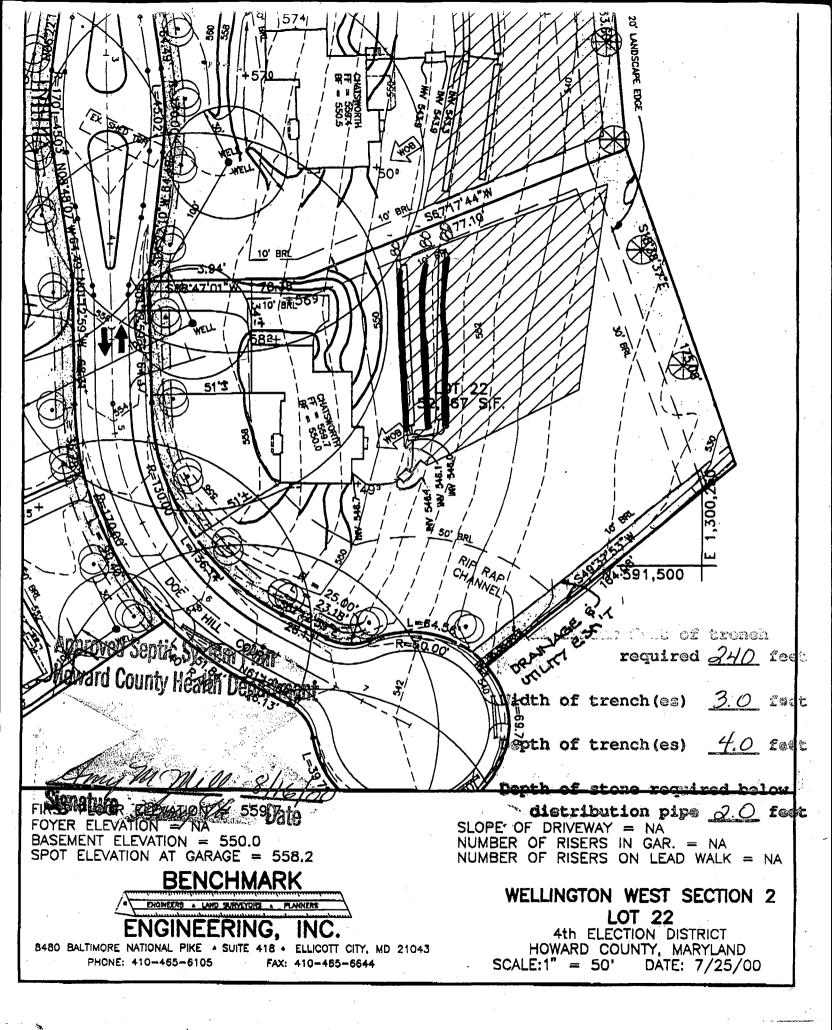
Lorzz 15309 DoethuG.

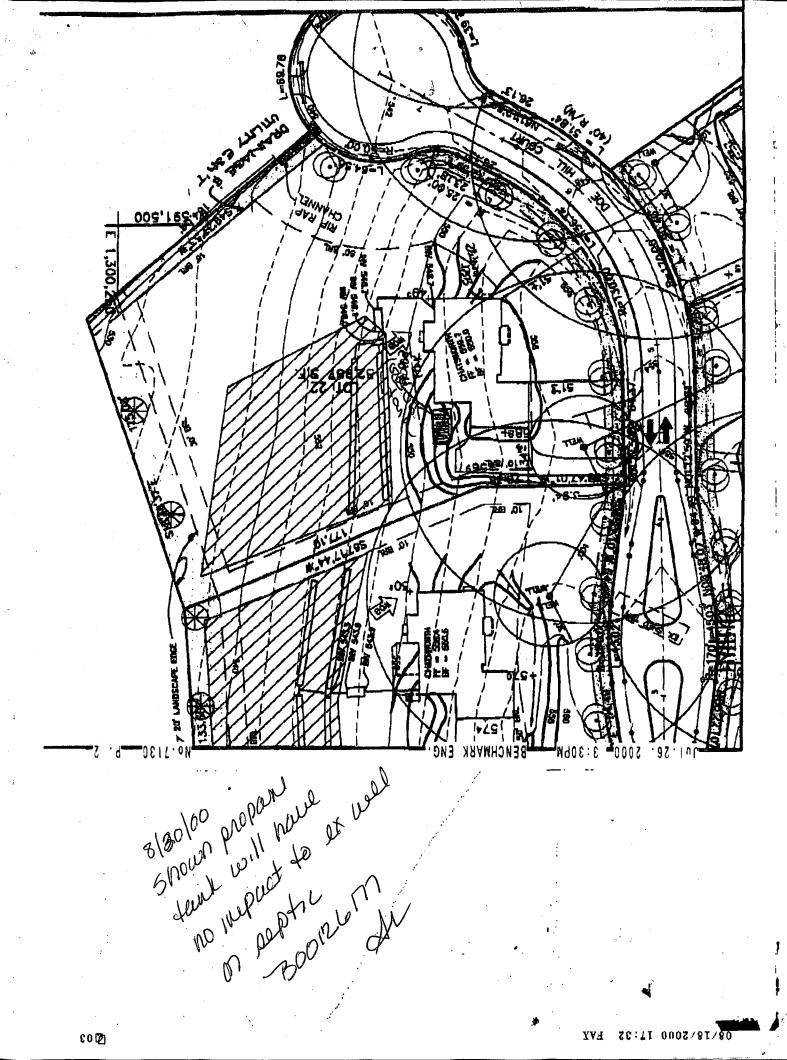


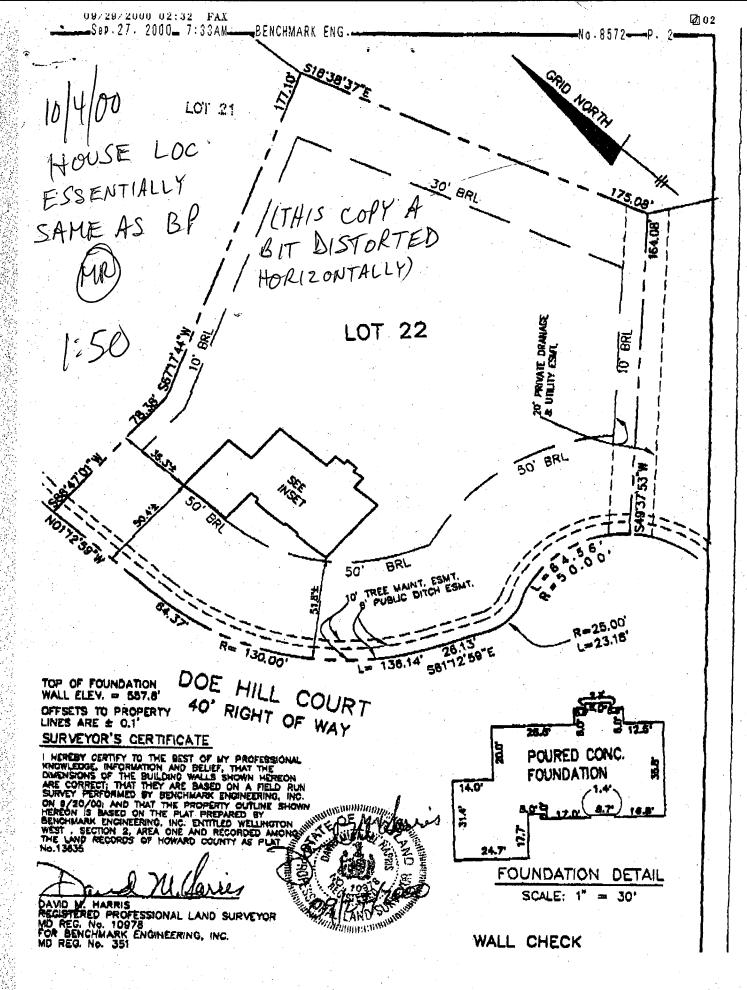
LOT 22 DOE HILL GT











RECORD PLAT NO.13635
FEMA FIRM No. 240044 0014 B
ZONEI C
DATED: 12-04-88
BENCHMARK

ENGINEERING, INC.

8480 BALTIMORE NATIONAL PIKE & SUITE 418 ELLICOTT CITY, MD 21043 PHONE: 410-485-8105 FAX: 410-485-8844 WELLINGTON WEST SECTION 2 AREA ONE LOT No. 22

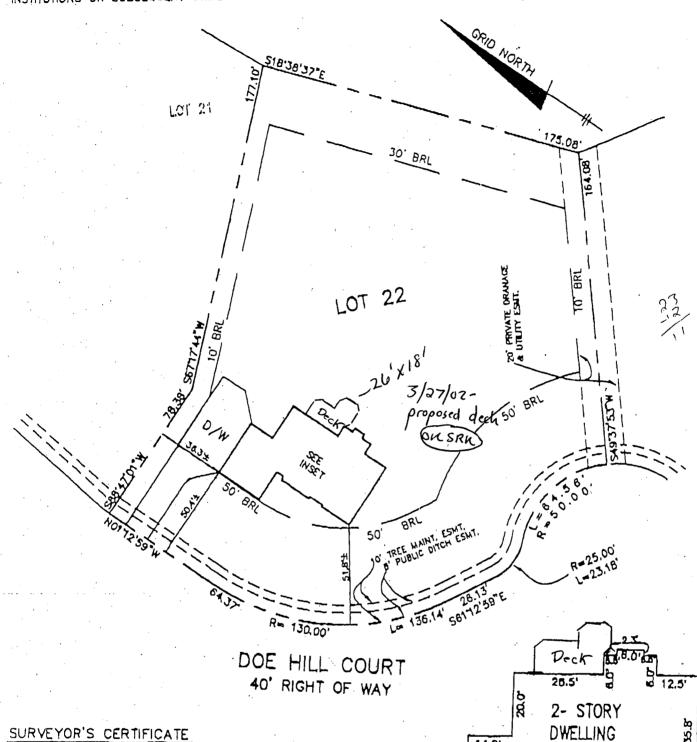
15309 DOE HILL COURT

4TH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
SCALE: 1" = 40' DATE: 9/20/00

NO. UD14"

NOT Jan 24. 20017 4:20PM BENCHMARK ENG NOT:

1. THIS DRAWING IS OF BENEFIT TO A CONSUMER ONLY INSOFAR AS IT IS REQUIRED BY A LENDER OR A TITLE
1. THIS DRAWING IS OF BENEFIT TO A CONSUMER ONLY INSOFAR AS IT IS REQUIRED BY A LENDER OR A TITLE
1. THIS DRAWING IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATION OF FENCES, GARAGES.
2. THE DRAWING IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATION OF FENCES, GARAGES.
3. THE DRAWING DOES NOT PROVIDE FOR THE ACCURATE IDENTIFICATION OF PROPERTY BOUNDARY LINES. BUT
3. THE DRAWING DOES NOT PROVIDE FOR THE ACCURATE IDENTIFICATION OF SECURING FINANCING OR REFINANCING.
3. SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING OR REFINANCING.
4. ALL BUILDINGS, STRUCTURES AND OTHER IMPROVEMENTS SHOWN HEREON ARE IN APPROXIMATE RELATION TO THE APPARENT BOUNDARY LINES.
5. DECLARATION IS MADE TO ORIGINAL PURCHASER OF THE DRAWING. IT IS NOT TRANSFERABLE TO ADDITIONAL INSTITUTIONS OR SUBSEQUENT OWNERS.



I HEREBY CERTIFY TO THE BEST OF MY KNOWLEDGE AND BELIEF THE DWELLING(S) SHOWN ON THIS DRAWING LIES WITHIN THE LOT LINES SHOWN AS COMPILED FROM TITLE OR OTHER SOURCES. OTHER IMPROVEMENTS ARE FOR PICTORIAL PURPOSES ONLY. THIS DRAWING IS NOT A BOUNDARY SURVEY AND HAS BEEN PREPARED EXCLUSIVELY FOR TITLE PURPOSES ONLY. PREPARED WITHOUT THE BENEFIT OF A TITLE REPORT.

10978

RECORD PLAT No.13835 FEMA FIRM No. 240044 0014 B ZONE: C

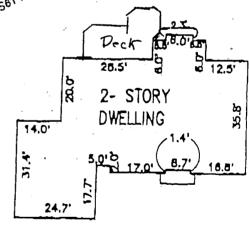
DATED: 12-04-86

> BENCHMARK LOSHING . was stated . PUNCO

ENGINEERING, INC.

8480 BALTINORE NATIONAL PIKE & SUITE 418
ELLICOTT CITY, MD 21043

PHONE: 410-465-6105 FAX: 410-465-6644



DETAIL SCALE: 1" = 30'

LOCATION DRAWING

WELLINGTON WEST AREA ONE SECTION 2

LOT No. 22

15309 DOE HILL COURT

4TH ELECTION DISTRICT HOWARD COUNTY, MARYLAND

1" - 50' DATE: 01/23/01 SCALE:

4106440647

11/ FROJECTS/ 1003/ DWO/ 8588LOT22.DWG

60121009 (A) Flush to Docr (B) 1 Stop UP

20" SQ IN. FOOTING