5/89/m 5/8/89 5/8/89

PERMIT

P 44076

A 30235

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

TRICT 3rd

DATE 4/25/89

BUREAU OF ENVIRONMENTAL HEALTH

INDEXED

DATE SYSTEM APPROVED 5-8-8°

03-309231

INSPECTOR Subul

Paul Schissler/South Carroll	BAckhoe, Inc. IS PERMITTED TO INSTALL X ALTER
	Westminster, Maryland PHONE 875-4197
	ROAD 2711 Wynfield Road LOT 10. Sec.2
PROPERTY OWNERC	& J Homes, Inc.
ADDRESS	
IF GARBAGE GRINDER IS USED INCREASE SEPTI	C TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%
GARBAGE GRINDER? YES NO	<u> </u>
SEPTIC TANK CAPACITY 1250 GALLON	NUMBER OF BEDROOMS4
LOCATION - Place the distribution (485.26') lot line if as seen when facing toward the left lot. NOTE - No trench to exceed	room. Trench to be 2 feet wide. Inlet 4 feet below original mum depth 9 feet below original grade. Effective area begins ginal grade. 5 feet of stone below distribution pipe. ion box or start the first trench 210 feet down the right from the rear right corner and 15 feet off the same line the lot from Wynfield Road. Run trenches on contour line. 100 feet in length. Provide 6" - 8" diameter cleanout above on septic tank.
82445	orlin
COVER NO WORK UNTIL INSPECTED AND APPROVED NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LI NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E., TANK, DISTRIBUT NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTIC	R NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH.
PERMIT VOID AFTER TWO YEARS	
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN	L STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON. CONCRETE OR TERRA COTTA OR PVC OR ABS
NOTE DISTRIBUTION BOXES MUST HAVE BAFFLES	

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

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150		43	13-2450			150
1000			(P DOWNS	a drivestra	
TO THE PARTY OF TH	ėş	10	6	Carrier Company States Comments	is Notabil Notability ($\{ j, \lambda_{j} \}$
		r erysbylgin		-68'	1250.35	100
8/2/4			· Self Service		#1	
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50						50
		7			Jesk	. 3
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in the second of the second		· · · · · · · · · · · · · · · · · · ·	The West only	t molline i	AN THE CER	
SEPTIC TANK, LEVEL	·		CLEANOUTS	<u> </u>	And Charles	
DISTRIBUTION BOX, LEVEL		9.4			Same and I well got	
ORAIN FIELD/TILE FIELD. D	EPTH <u>4</u> F	T. TRENCH WID	TH <u>2</u> FT	INLET DEPTH	<u>4</u> FT.	
EFFECTIVE GRAVEL DEPTH	_5	-	TAL LENGTH 65			
NUMBER	OF TRENCHES	2 0	È SIDEWALL BOTTO	OM AREA	50 SO FT	
DRYWELL INSIDE DIAMETER	?	FT EFF	FECTIVE DEPTH BE	LOW INLET	FT.	
ABSORBE	ENT AREA65	<u> </u>	T.			
REMARKS _ 5-4-89	OK D FINISH	#1- DIG 4	r. sam s-	8-89 011 70	cover all w) or K
					·	
					•	
	· · · · · · · · · · · · · · · · · · ·		·.			
DATE SYSTEM APPROVED	5-8-89		INSPECTOR	S-Marl	·	

j.

APPLICATION

Α	30325

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTME	NT
ENVIRONMENTAL HEALTH SERVICES	K

TELEPHONE: 992-2330

DISTRICT 10/31/79

THE COUNTY HEALTH OFFICER ELLICOTT CITY, MARYLAND

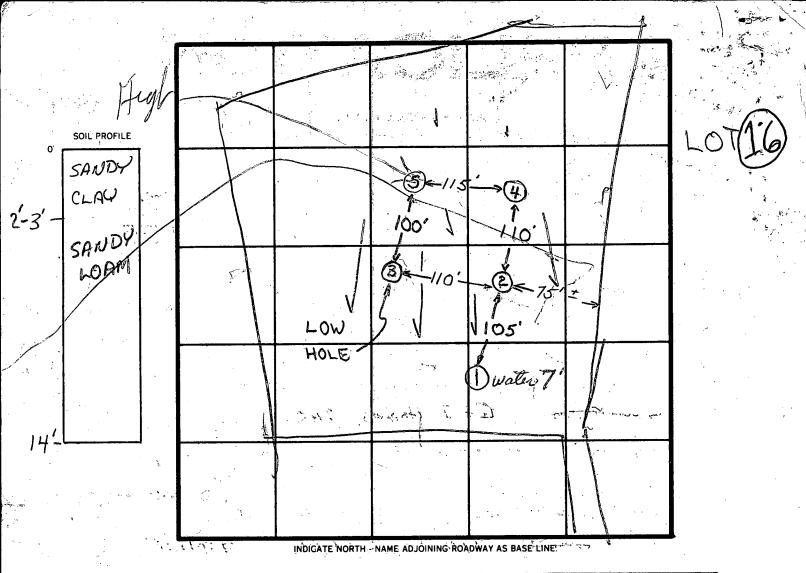
I, HERBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER	Land AS	sociaces		Mones	LNC.	
ADDRESS	3450 Ft	. Meade Rd.,	No. 206,	Laurel, Md.	20810 _{PHONE}	Tom Munz - 792-2242 or Ted Snovell - 265-6543
PROPERTY LOCATION:	Y. X. X. A.	TEUD property				1 O seed 2 on Fan
SUBDIVISION	norman	property				-20
ROAD AND DESCRIPTION		Route 144	2711	hynfield	1 Rd.	16 on signed preling
SIZE OF LOT	3 acres	plus	-	•	TYPE BLDG.	3 or 4 bedrooms
THE SYSTEM	M INSTALLE	D UNDER THIS AF	PLICATION IS	ACCEPTABLE OF		BLIC FACILITIES BECOME AVAILABLE.
				. EU ING OF THE B	EDG TEGT ADDI	ICATIONIC NON REFUNDADI E UNDER

ANY CIRCUMSTANCES.

BP 20172

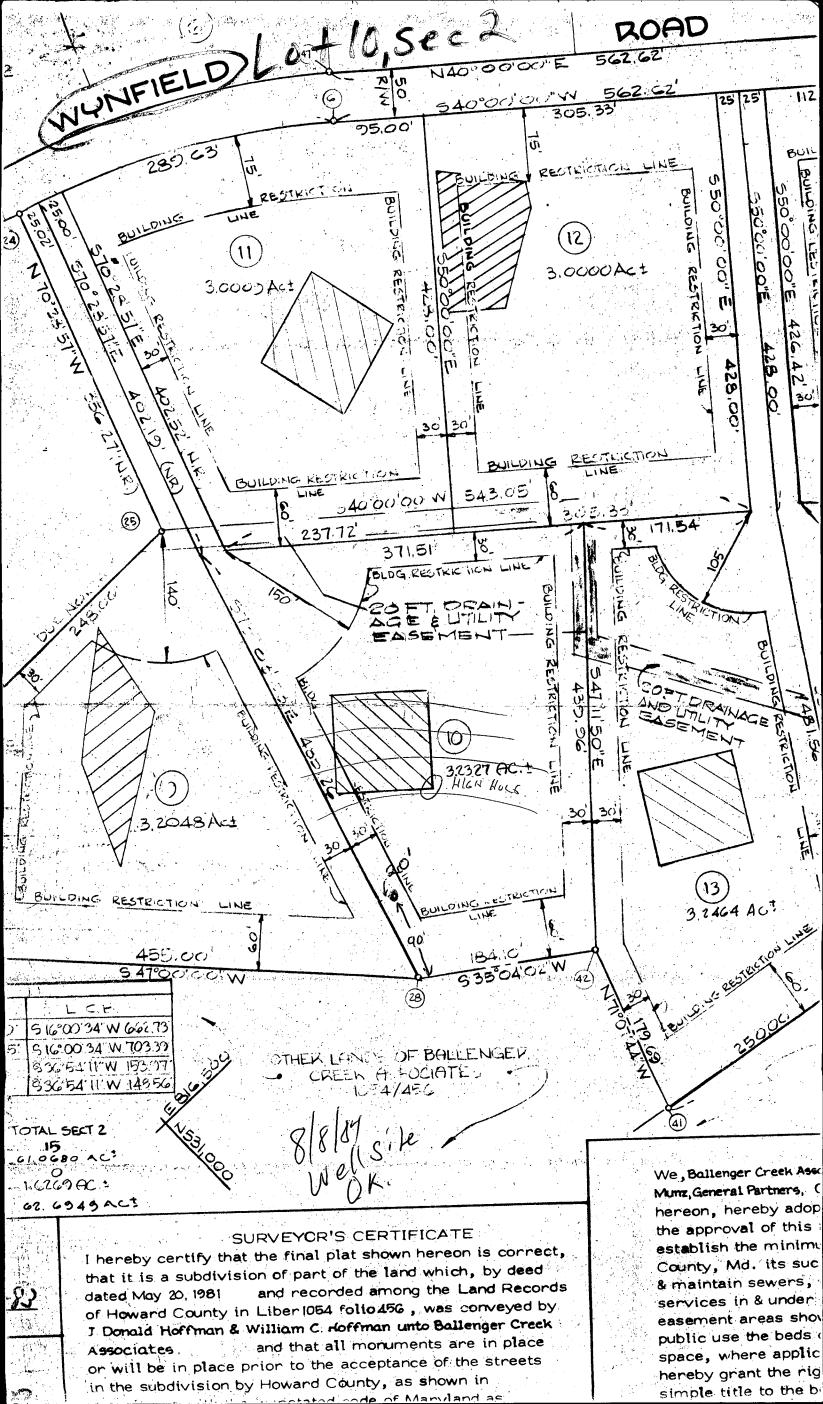
THIS IS NOT A



Γ		· · · · · · · · · · · · · · · · · · ·	i i	PRE-	WET	TEST	1" DROP	· ·	
ľ	DATE	TEST NO	DEPTH	START	STOP	START	STOP	TIME	
•	119/79		フ	WAT	TER	7 FT F	OM GR		
Ī	1/27/20	25.	4/2	1:00	1:01	1:01	1:03	2	
ŀ	1-114	<u>50</u>	14'	1:01	1:03	1:103	1:11%	90 SE	- CANDY
l		35 3D	14'	1:10	1:10	1:20	1:33	13	C SANDY NO ROCK
ľ	e in	45	5' 14'2'	1:25	1:1:27 1: 28	1:27	1:29	2	- A.I.
ŀ		4D	1712	1:40	1: 28 1: 41	1:41	1:43	2	TPIINIAVG
	* \$ 10	5S ===	14%	1:41	1:44	1:44	1:47	3	7MINIAVG 3'i what
	e e e jed	,	p.						·
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L							·		
ŀ	g. Jus	<u> </u>	 				-	 	† .
			2			<u> </u>		<u> </u>	. ,

TYPE OF SOIL SANDY BELOW 3'- HARD SAND AT 14'

TESTED BY RHERD IN 2779 ALSO PRESENT JIM DUS ZYNSKI



Mr. Stumen Could you please give is a well location for Lo 7 10 See 3 Wynfield Jue Mayne well be applying for point We are afraid to use proposed well location shown on The because of Perk

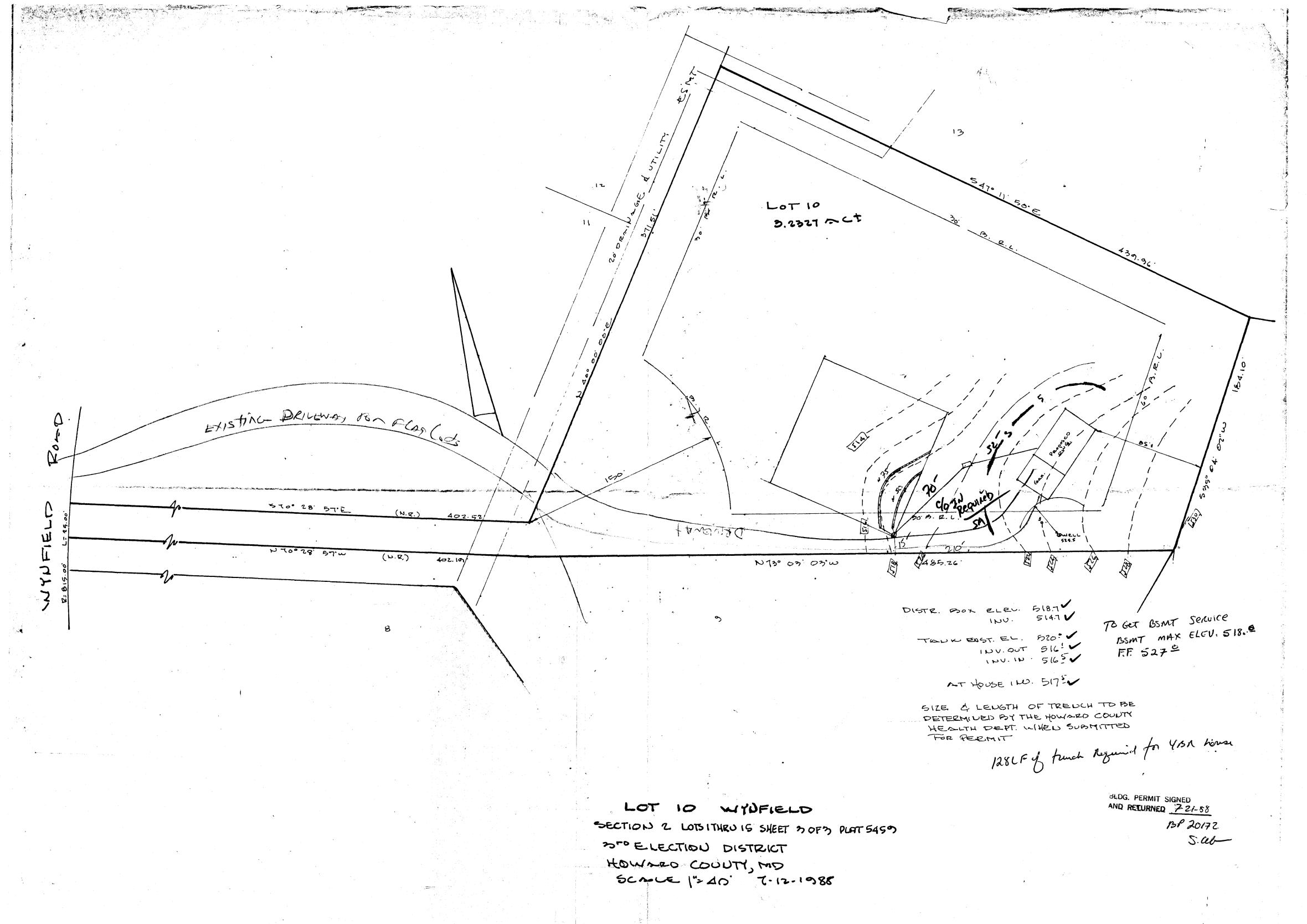
Lee call you in the morning

Than K5,

Caleen Quinin

Stromberg lo 465-550

on Lot 23 Sec 3.



EMERGENCY/TEMP NO	J. IF ANY
T I IS 7 I WILL INDEPUSEONLY	TE OF MARYLAND IT TO DRILL WELL OEP PERMIT NUMBER U 0 - 5 1 - 0 5 7 5
	ease print or type I TO DRILL WELL
Date Received 9.30 AM OROS OS SUPER OWNER INFORMATION	B 3 LOCATION OF WELL
Son 9 4 4 5 6 6 PV	HOUSARD 21
15 Last Name Owner First Name /	34 UJ V W F I & L D 42 23 SUBDIVISION 42
36 Street or RFD	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
574 Town 70State72 Zip DRILLER INFORMATION	76 WEST FROPADE WIP 71
Driller's Name 238	MILES FROM TOWN (enter 0 if in town) M M
Firm Name	DIRECTION OF WELL FROM 11 9 NEAR WHAT ROAD 30
5512 Ridge R.B. W. Clina, M.S.	TOWN (CIRCLE BOX) NORTH
Signatuje Pate	ON WHICH SIDE OF ROAD WESTS WESTS
B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.)	TOWN E 8
AVERAGE DAILY QUANTITY NEEDED 8 12 (GAL. PER DAY)	34 7 5 37 DISTANCE FROM ROAD
USE FOR WATER (CIRCLE APPROPRIATE BOX)	8-9 S 8-9 ENTER FT or MI 38 39 NOT TO BE FILLED IN BY DRILLER
HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)	HEALTH DEPARTMENT APPROVAL
F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV.	COUNTY NAME COUNTY NAME COUNTY NO OEP STATE HEALTH
OTHER (REQUIRES APPROPRIATION PERMIT) PUBLIC OR PRIVATE WATER COMPANY (REQUIRES	SIGNATUREINSERT S
P APPROPRIATION PERMIT AND STATE HEALTH DEPARTME APPROVAL)	43 48 CO SIGNATURE EXP. DATE
T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)	GRID 50 55 GRID 57 63
APPROXIMATE DEPTH OF WELL 24 0 0 FEET	SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X 63 - Casing
	SOURCES OF DRILLING WATER
METHOD OF DRILLING (circle one)	2. 12 - Dags commont
BORED (or Augered) <u>JETTED</u> Jetted & <u>DRI</u> 30 31 AIR ROTARY AIR PERcussion ROTARY (Hydraulic Ro	— WRITE THE BOX NUMBER DIZZING
CABLE REVerse_ROTary DRive_PO	1 A 0
other	N 530 CI - 000
REPLACEMENT OR DEEPENED WELLS (CIRCLE APPROPRIATE BOX)	DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE
THIS WELL WILL NOT REPLACE AN EXISTING WELL THIS WELL WILL REPLACE A WELL THAT WILL BE	DISTANCE FROM WELL TO NEAREST ROAD JUNCTION
S AS A STANDBY	DISTANCE FROM WELL TO NEAREST ROAD JUNCTION
D THIS WELL WILL DEEPEN AN EXISTING WELL	
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENDE (IF AVAILABLE) 41 55	
Not to be filled in by driller (OEP USE ONLY)	2 168
APPROP. PERMIT NUMBER G A P 63	E E E
FORCE WRITE INITIALS PERMIT No. O - 8 1 - 0 6 7 N BOX N BOX FORCE WRITE INITIALS PERMIT No. W O - 8 1 - 0 6 7 N BOX N BOX	
SPECIAL CONDITIONS	<i>≥</i> 2

Page		οf	æ.
Page Date 🌶	Juga	s. 7.	28.1984

Review <u>H9724</u>

FIELD DATA SHEET HOWARD COUNTY WELL YIELD TEST

Well Permit No.	HO - S/- U (178 Wunfield Road	16 Block Plater Gary Smith	
Subdivision	Vynfield Joseph L. M	Lot Nayne Owne	16 Block Plater Gary Smith	Sec
Depth of Distance	well 26	9 ' int (M.P.) above gr L.) below M.P.	round 12	·
Time pump Total tim		3 O reach pumping water	Pumping rate 15 level 172 ft.	
TIME (in 15	WATER LEVEL below M.P.	PUMPING RATE time to fill \$ gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
9:30	174	15 are		4
,				,
				<u> </u>
			·	
	· · · · · · · · · · · · · · · · · · ·	<u> </u>	·	
				·
1				
				. •

C 1 4546 SEQUENCE NO. (OEP USE ONLY)	STATE OF MARYLAND	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
(THIS NUMBER IS TO BE PUNCHED IN COLS: 3-6 ON ALL CARDS)	WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE	COUNTY 430325
DATE Received DATE WELL COMPLET		PERMIT NO. FROM "PERMIT TO DRILL WELL"
082884	22 2 9 26 (TO NEAREST FOOT)	
OWNERSMITH	GARY	
STREET OR RFD last name		WEST FRIENSHIP
SUBDIVISION WYNFIELD	SECTION 2	LOT COT 10
WELL LOG Not required for driven wells	WELL HAS BEEN GROUTED (Circle Appropriate Box)	$\frac{\mathbb{C} \mid 3}{1, 2}$
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH,	(Circle Appropriate Box) TYPE OF GBOUTING MATERIAL	PUMPING TEST
THICKNESS AND IF WATER BEARING DESCRIPTION (Use FEET Check	CEMEN CM BENTONITE CLAY BC	HOURS PUMPED (nearest hour)
additional sheets if needed) FROM 'TO if water bearing	45 46 (PUMPING RATE (gal. per min. 4 11 // 15
	GALLONS OF WATER	METHOD USED TO MEASURE PUMPING RATE LUCKET
Brown Shale 0 30	from 6 ft. to 50 ft.	WATER LEVEL (distance from land surface)
Brown Shale 0 30 Sand 30 59 Hay mica sout 59 269 L	48 TOP 52 54 BOTTOM 58 (enter 0 if from surface)	BEFORE PUMPING 23 1
59 269 L	casing CASING RECORD types	WHEN PUMPING 774
In ay mica rock	insert appropriate STEL CONCRETE	22 , 25 TYPE OF PUMP USED (for test)
	code PL OT	A air P piston T turbine
	PLASTIC OTHER	27 27 27 Oother
	MAIN Nominal diameter Total depth CASING top (main) casing of main casing	C centrifugal R rotary (describe below)
	TYPE (nearest inch) (nearest foot)	J jet S submersible
	S + 60 61 63 64 66 70	27 27
	E OTHER CASING (if used).	
	inch from to	PUMP INSTALLED
	Å S	DRILLER WILL INSTALL PUMP YES (NO) (CIRCLE) (YES or NO)
	N G	IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS
	screen type SCREEN RECORD or open hole	EXCEPT HOME USE TYPE OF PUMP INSTALLED
	insert STEEL BRASS OPEN	PLACE (A,C,J,P,R,S,T,O) IN BOX-SEE ABOVE:
	(appropriate) Code BRONZE HOLE	CAPACITY: GALLONS PER MINUTE
	below PLASTIC OTHER	(to nearest gallon) 31 35
	C 2	PUMP HORSE POWER 37 PUMP COLUMN LENGTH
	DEPTH (nearest ft.)	(nearest ft.)
	E 1 HO 6 / 15 17 21	CASING HEIGHT (circle appropriate box and enter casing height)
		LAND SURFACE
	S 23 24 26 30 32 36	below below to the foot)
CIRCLE APPROPRIATE LETTER A WELL WAS ABANDONED AND SEALED	R E 3	LOCATION OF WELL ON LOT
WHEN THIS WELL WAS COMPLETED E 'ELECTRIC LOG OBTAINED	N 30 33 41 43 47 SLOT SIZE 1 2 3	A SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR
P TEST WELL CONVERTED TO PRODUCTION	DIAMETER (NEAREST	N LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES
WELL HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IT	OF SCREEN 60 INCH)	(MEASUREMENTS TO WELL)
ACCORDANCE WITH COMAR 10.17.13 "WELL CONSTRUCTION AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THI	GRAVEL PACK	1003 T
ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BES OF MY KNOWLEDGE.	FLOWING WELL INSERT	- 1
DRILLERS IDENT. NO. 238	F IN BOX 68 68 OEP USE ONLY	
worth &. marpe	(NOT TO BE FILLED IN BY DRILLER)	20' War
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)	T (E.R.O.S.) W Q	1 C
	70 72 0THER DATA	90"
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee	TELESCOPE LOG OTHER DATA CASING INDICATOR	19400

Page 8/28/84

FIELD DATA SHEET HOWARD COUNTY WELL YIELD TEST

	Permit No. HO - 81-0678 Ation of property (road) Wynfaeld Pd.	
∗ubd.	Driller Joseph Mayne Owner Lang Smith	I
¥	Depth of well	
<i>:</i> .	High rate pumping reservoir drawdown Time pump started 6.30 A.M. Pumping rate 15 gal. Total time 36 min. to reach pumping water level 172 ft. below M.P.	
11.	Recovery pump test data - observations to be recorded every 15 minutes	

IME (in 15	WATER LEVEL	PUMPING RATE	FLOW METER READING	CALCULATED FLO
:nute in-	below M.P.	time to fill 🖇	(if used)	(gallons per
ervals		gallon bucket		minute)
6:45	100	Hou.		15
7:00	172	4		15
7:15	172	15		4
7:30	172	15		4
7:45	17.2	15		4
8:00	172	15		4
8:15	172	15		4
8:00 8:15 8:30	172	15		4
8:45° 9:00 9:15°	174	15		4
9:00	174	15		4
9:15	174	15		4
9:30	171/	15		4
	1//			
 				
· · · · · · · · · · · · · · · · · · ·				

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

Ellert City Md. 21043

THE FOLLOWING STATEMENT MUST BE COMPLETED BY THE HOME OWNER WHEN A PUMP IS INSTALLED BY A PERSON OTHER THAN THE WELL DRILLER:

My well driller is not to install the pump for my water well, and I hereby certify that it will be my responsibility to have a Pump Permit taken out by a registered master plumber or certified pump installer. It will be my responsibility to notify the Health Department before and during the installation so that inspections can be made by their representative. (Pursuant to Chapter XVII, of the Plumbing Code of Howard County.)

Lary L. Smith

(Name)

57 MOUNTAIN GREEN CIR. BALLO. 21307

H0-81-0678

(Date)

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

Replacement	•	Receipt # <u>43291</u> Date <u>12/22/68</u>
Name of Installer	eph Gartland, Inc.	Telephone <u>875-2400</u>
License Number 1713 Certified Well Pump Install	er Well Driller	Registered Plumber X
Name of Property Owner C & Subdivision Wynfield Es Site Address 2711 Wynfie	% J Homes, Inc. tates. Lot # 10 w	Telephone <u>465-4679</u>
Pump	Motor	Pitless Adapter
1. Type	1. Horsepower 📗	1. Make <u>Harvard.</u>
a. Deep well jet	2. RPM	2. Model # <u>FR-800</u>
b. Shallow well jet	3. Voltage	3. Depth <u>42"</u>
b. Shallow well jet c. Submersible 2. Make	a. 110 b. 220	
2. Make GOUTA 3. Model # 109JC5422 4. Capacity 10 GP	_ * b. 220	*
3. Model # 102003428		
4. Capacity GP	M You " No	
5. Pump exceeds well capaci6. If Yes, is low pressure	out off owitch installed?	Voc Y No
7. What methods are used to		
	estors Cable guard	
•		
Tank	Piping Plastic	Well data
		1. Depth ft.
1. Capacity <u>42 gal.</u>	1. Type	
2. Pressure relief	Piping Plastic 1. Type 2. Size	
2. Pressure relief		3. Static water
2. Pressure relief	3. NSF and/or BOCA You Code approved	3. Static water level ft.
2. Pressure relief	3. NSF and/or BOCA You Code approved	3. Static water
2. Pressure relief valve?75psi. I understand that it is my Department when the install is null and void). All information given above	3. NSF and/or BOCA Code approved Ye 4. Depth of supply line 42 y responsibility to notify ation is ready for inspect	3. Static water level ft. 4. Will water supply be disinfected by installer? the Howard County Health ion (otherwise this permit

on the well casing at the time of the inspection.