

9/16/85  
11:20 a/cast

9/17/85 anytime

APPROVED  
9/17/85  
RH 35839

# PERMIT

P 35839  
A 28488

## SEWAGE DISPOSAL SYSTEM

**MARYLAND STATE DEPARTMENT OF HEALTH\***

**HOWARD COUNTY**  
BUREAU OF ENVIRONMENTAL HEALTH  
992-2330

04-340108

ELLCOTT CITY  
DISTRICT 4th

DATE 8/01/85

# INDEXED

Arnold Septic Tank Service IS PERMITTED TO INSTALL X ALTER \_\_\_\_\_

ADDRESS Woodbine, Maryland 21797 PHONE 795-1285

SUBDIVISION Weller Property ROAD 1375 Route 94 LOT 6

PROPERTY OWNER Richard Schubert

ADDRESS \_\_\_\_\_

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES \_\_\_\_\_ NO X

SEPTIC TANK CAPACITY 1000 GALLONS      NUMBER OF BEDROOMS 3

TRENCHES - 203 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 7 feet below original grade. Effective area begins at 3 feet below original grade. 4 feet of stone below distribution pipe. LOCATION: Start the first trench 215 feet from the front lot line (that borders Md. Rte 94) and 70 feet from the right sideline (that is 417.60 ft. long). Continue to dig the trench on level ground running towards the left side of the lot, as seen when facing the property from Md. Rte 94. NOTE: No trench to exceed 100 feet in length. If more than one trench used, a distribution box is required. Call for inspection of trench(s) before and after gravel is installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

PLANS APPROVED BY 2/19/85 Frank Skinner DATE 2/19/85

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: IF TRENCH IS USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH.

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 40 PVC OR ABS

PERMIT VOID AFTER THREE YEARS.

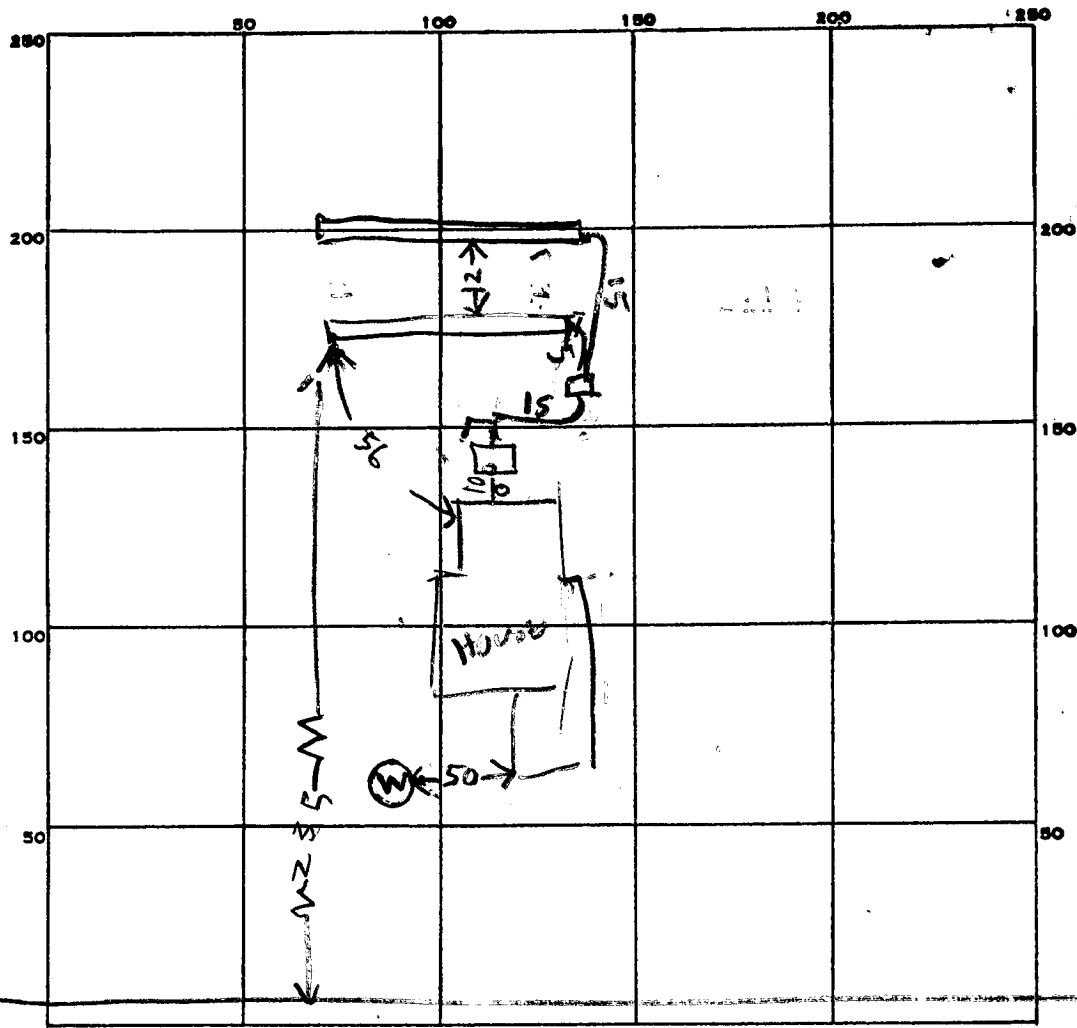
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

**\*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT**

**\*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.**

EH - 2-1082

A28485



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

ROUTE 94

PERMIT CARD \_\_\_\_\_

SEPTIC TANK, LEVEL OK 1000

CLEANOUTS ST NO | HOUSE SEWER  
OK | OK

DISTRIBUTION BOX, LEVEL \_\_\_\_\_

TILE FIELD, DEPTH 7 | 7 FT. TRENCH WIDTH 2 | 2 FT.

GRAVEL DEPTH 4 | 4 FT. TOTAL LENGTH 25 | 79 FT.

NUMBER OF TRENCHES 2 TOTAL BOTTOM AREA 30 | 4 | 31 | 0

SEEPAGE PITS, INSIDE DIAMETER \_\_\_\_\_ FT. DEPTH BELOW INLET \_\_\_\_\_ FT.

ABSORBENT AREA \_\_\_\_\_ SQ. FT.

REMARKS 9/16/85 1120AM LOCATION OF TRENCH #1 DOG  
ADD STONE RH 9/16/85 1120M - STONE ADDED TO TRENCH #1  
9/16/85 200 TRENCH #2 DOG RH FINISH JOB & CALL RH  
9/17/85 JOB FINISHED

DATE SYSTEM APPROVED

INSPECTOR

Raymond [Signature]

SUBDIVISION:

Richard Schubert  
Weller Property

LOT NUMBER:

6

A 28485

Md Rte 94

DRY WELL OR DRY WELL AND TRENCH

sq. ft./bedroom

	<u>Septic Tank</u>	<u>Minimum Total square Feet</u>
3 bedroom	1000 gallon	
4 bedroom	1250 gallon	
5 bedroom	1500 gallon	

Inlet \_\_\_\_\_ feet below original grade.

Bottom maximum depth \_\_\_\_\_ feet below original grade.

Effective area begins at \_\_\_\_\_ feet below original grade.

BP # 6485

NOTE: If trench is used to make up absorbent area, run the trench on level ground and leave a 5 foot earth buffer between dry well and trench.  
No trench is to exceed 100 feet in length. Trench inlet to be same as dry well, with \_\_\_\_\_ feet of stone below distribution pipe.

TRENCHES203 sq. ft./bedroomTrench to be 2 ft. wide.Inlet 3 feet below original grade.Bottom maximum depth 7 feet below original grade.Effective area begins at 3 feet below original grade.4 feet of stone below distribution pipe.

- NOTE:
- (1) No trench to exceed 100 feet in length.
  - (2) If more than one trench used, a distribution box is required.
  - (3) Trenches to be installed on level ground.
  - (4) Call for inspection of trench before gravel is installed.
  - (5) Provide 6"-8" diameter cleanout and cap to grade or above on septic tank and drywell.
  - (6) If a Garbage disposal is used, increase septic tank capacity by 50% and increase absorbant sidewall area by 22%.

LOCATION: Start the first trench 215 feet from the front lot line

(that borders Md. Rte 94) and 70 feet from the right side line  
(that is 412.60 ft. long). Continue to dig the trench on level ground  
running towards the left side of the lot, as seen when facing the  
property from Md. Rte 94

# APPLICATION

A 28485

## SEWAGE DISPOSAL TESTING

P \_\_\_\_\_

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

**FINAL LOT 6**

DISTRICT 4th

DATE 7/13/78

LOT 6

~~Lot 4~~  
~~per U.P. 9924~~

TO: THE COUNTY HEALTH OFFICER  
ELLICOTT CITY, MARYLAND

**LOT 6**

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

PROPERTY OWNER ~~Norman Weller~~ Richard Shabert

ADDRESS \_\_\_\_\_ PHONE Boender - 465-7777

PROPERTY LOCATION:

SUBDIVISION \_\_\_\_\_ LOT NO. 8

ROAD AND DESCRIPTION #1375 Route 94 & South Street

SIZE OF LOT 3.0 acres m/l TYPE BLDG. 3 or 4 bedrooms

NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE \_\_\_\_\_

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

SIGNATURE OF APPLICANT /s/ Jack Boender

APPROVED BY J. Keller FOR ANY DATE 5/23/79

(KIND OF SYSTEM)

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING HOLD ELEVATIONS (GUK) 23 MAY 79

AP # 64485

4-26-85

# THIS IS NOT A PERMIT



MD. ROUTE 94

NO.	RADIUS
7-8	2331.830

LAND TO BE DEDICATED  
TO HOWARD COUNTY, MD  
FOR PURPOSES OF A  
PUBLIC ROAD (0028 AC)

LOT 3  
108.7 AC

Lot 8  
A 28484

BUILDING RESTRICTION LINE

LOT 4  
3462 AC

Lot 9

LOT 5  
3526 AC

PROPOSED WELL  
LOT 6  
3073 AC  
PROPOSED DWELLING

BLDG. RESTRICTION LINE

BUILDING RESTRICTION LINE

BUILDING RESTRICTION LINE

VEHICULAR ACCESS  
EGRESS RESTRICTED

Sold

Sold

Sold

SAC P  
41222

P. 738

600

BLDG

30

30

30

30

30

30

30

30

30

30

30

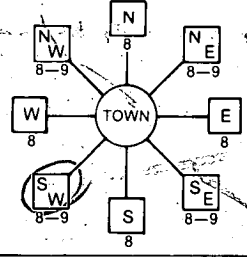
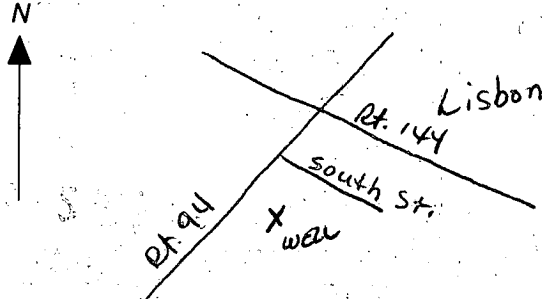
30

30

30

30

30

<b>B 1</b> 1 2 3 4 5 6 1605 THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS	SEQUENCE NO. (OEP USE ONLY)	<b>STATE OF MARYLAND</b> <b>PERMIT TO DRILL WELL</b> please print or type	OEP PERMIT NUMBER 40-81-0558 <small>fill in this form completely</small>
Date Received <u>11/27/84 9:30 AM</u> 031584 OWNER INFORMATION 15 Last Name <u>Schubert</u> Owner <u>Richard W</u> First Name <u>M</u> 36 7a12 Honeybush Dr 57 Mt Airy Town 70 State 72 Zip 76 71		<b>B 3</b> LOCATION OF WELL 8 COUNTY <u>Howard</u> 21 23 SUBDIVISION <u>Waller Property</u> 42 SECTION <u>44</u> 46 LOT <u>6</u> 48 50 52 NEAREST TOWN <u>Lisbon</u> 71 MILES FROM TOWN (enter 0 if in town) <u>1</u> 73 76 77 78	
DRILLER INFORMATION Driller's Name <u>George F. Easterday</u> 40 W. F. Easterday, Inc. Firm Name 9265 Brown Church Rd. Mt. Airy, Md. 21771 Address Signature <u>George F. Easterday</u> Date <u>3/14/84</u> Signature Date		<b>B 4</b> 1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  11 30 NEAR WHAT ROAD <u>Rt. 94</u> ON WHICH SIDE OF ROAD: (CIRCLE APPROPRIATE BOX) NORTH <u>N</u> 32 EAST <u>E</u> WEST <u>W</u> SOUTH <u>S</u> 34 37 DISTANCE FROM ROAD <u>100</u> ENTER FT or MI <u>F</u> 38 39	
<b>B 2</b> WELL INFORMATION 1 2 APPROX. PUMPING RATE (GAL. PER MIN.) <u>5</u> 8 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <u>500</u> 14 20		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL <u>Howard</u> COUNTY NAME <u>A28485</u> COUNTY NO. <u>A28485</u> OEP SIGNATURE _____ STATE HEALTH INSERT S _____ DATE ISSUED <u>052984</u> CO SIGNATURE <u>Frank A. ... CW</u> EXP. DATE <u>11/29/84</u> NORTH GRID <u>546000</u> 50 55 EAST GRID <u>0778000</u> 57 63	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="checkbox"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input type="checkbox"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. <u>Well</u> 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE N <u>7708</u> E <u>5406</u> 000 000	
APPROXIMATE DEPTH OF WELL <u>200</u> 24 28 FEET APPROXIMATE DIAMETER OF WELL <u>6</u> NEAREST INCH		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
METHOD OF DRILLING (circle one) BORED (or Augered) <u>JETTED</u> Jetted & DRIVEN 30. AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary) 37. CABLE REVERSE-ROTARY Drive-POINT other _____		REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY <input type="checkbox"/> THIS WELL WILL DEEPM AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52	
Not to be filled in by driller (OEP USE ONLY) APPROP. PERMIT NUMBER _____ 54 63 FORCE <u>FS</u> WRITE INITIALS IN BOX PERMIT NO. <u>40-81-0558</u> 70 71 72 73 74 75 76 77 78 79 SPECIAL CONDITIONS			

C13263

SEQUENCE NO.  
(OEP 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  
NUMBERA28485A28485

DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO.

OWNER

STREET OR RFD

SUBDIVISION

last name

first name

TOWN

SECTION

LOT 6

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
Shaley	2	10
Sand Stone	10	40
Mica	40	55
Sand Stone	55	60
Mica	60	75
Sand Stone	75	80
Mica	80	95
Flint	95	97
Mica	97	140

GROUTING RECORD

WELL HAS BEEN GROUTED

TYPE OF GROUTING MATERIAL

CEMENT

BENTONITE CLAY

NO. OF BAGS

NO. OF POUNDS

GALLONS OF WATER

DEPTH OF GROUT SEAL

CASING RECORD

MAIN CASING TYPE

Nominal diameter

Total depth

OTHER CASING

SCREEN RECORD

screen type

slot-size

diameter of screen

C3

PUMPING TEST

HOURS PUMPED

PUMPING RATE

METHOD USED TO MEASURE PUMPING RATE

WATER LEVEL

BEFORE PUMPING

WHEN PUMPING

TYPE OF PUMP USED

PUMP INSTALLED

DRILLER WILL INSTALL PUMP

IF DRILLER INSTALLS PUMP

TYPE OF PUMP INSTALLED

CAPACITY

PUMP HORSE POWER

PUMP COLUMN LENGTH

CASING HEIGHT

LAND SURFACE

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURE

CIRCLE APPROPRIATE LETTER

A WELL WAS ABANDONED AND SEALED

E ELECTRIC LOG OBTAINED

P TEST WELL CONVERTED TO PRODUCTION WELL

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 10.17.13 "WELL CONSTRUCTION"

DRILLERS IDENT. NO.

DRILLERS SIGNATURE

SITE SUPERVISOR

GRAVEL PACK

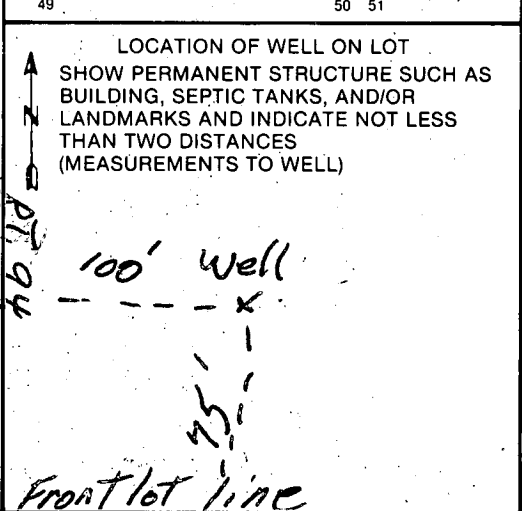
OEP USE ONLY

TELESCOPE CASING

LOG INDICATOR

WQ

OTHER DATA





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)
7:00	24'	$\frac{1}{2}$ min.		10
7:15	24'	$\frac{1}{2}$ min.		10
7:30	24'	$\frac{1}{2}$ min.		10
7:45	24'	$\frac{1}{2}$ min.		10
8:00	24'	$\frac{1}{2}$ min.		10
8:15	24'	$\frac{1}{2}$ min.		10
8:30	24'	$\frac{1}{2}$ min.		10
8:45	24'	$\frac{1}{2}$ min.		10
9:00	24'	$\frac{1}{2}$ min.		10
9:15	24'	$\frac{1}{2}$ min.		10
9:30	24'	$\frac{1}{2}$ min.		10
9:45	24'	$\frac{1}{2}$ min.		10
10:00	24'	$\frac{1}{2}$ min.		10
		Sunny		

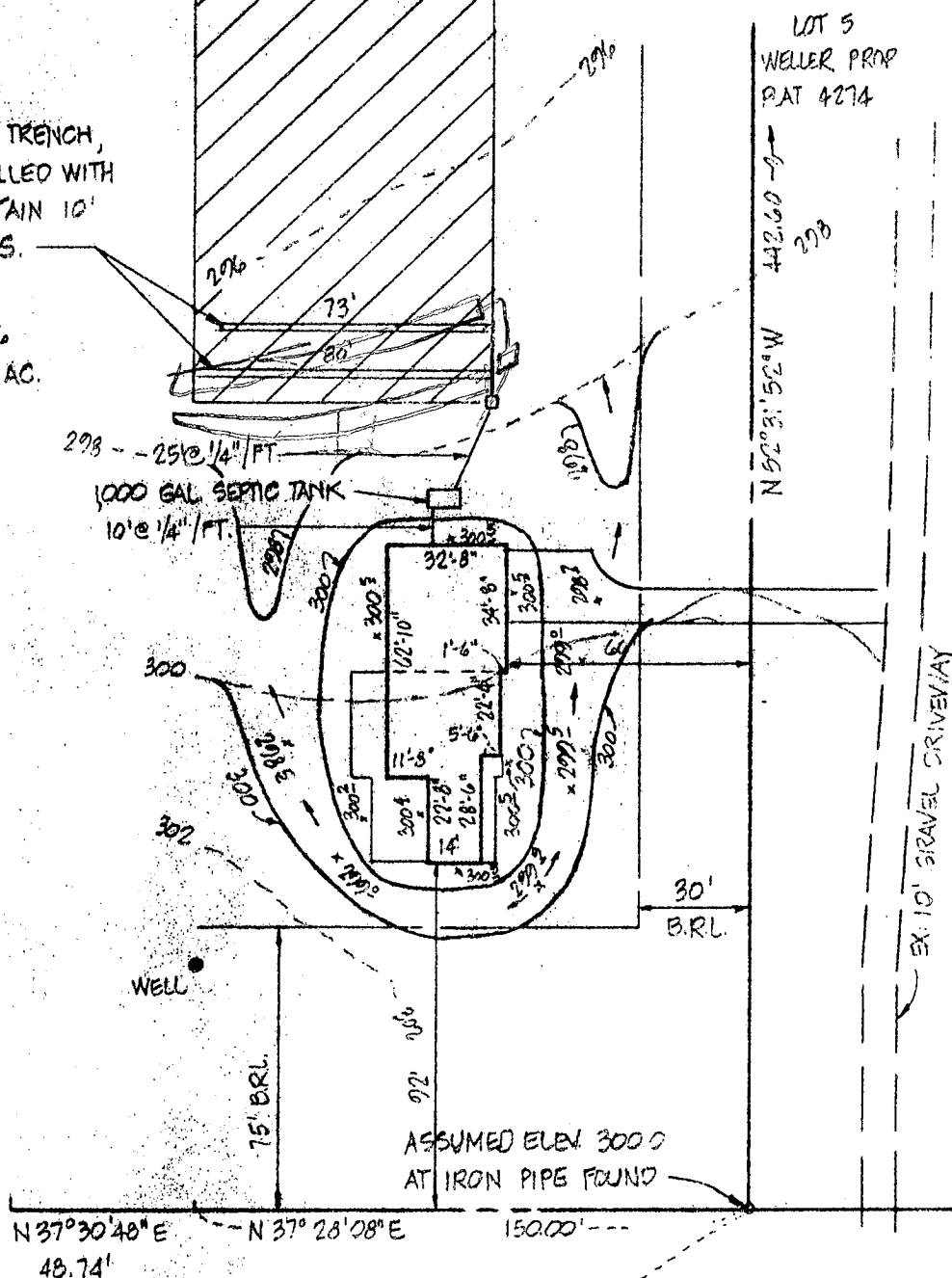
well ok -

B.P. # 64485

signed 4/29/85

PROVIDE 153 L.F. OF TRENCH,  
7' DEEP, 2' WIDE, FILLED WITH  
4' OF STONE. MAINTAIN 10'  
BETWEEN TRENCHES.

LOT 6  
3.073 AC.



MD. RTE. 94

NOTES:

1. HOUSE TO HAVE 3 BEDROOMS.
2. NO GRAVITY SEWER SERVICE TO BASEMENT.
3. TAX MAP: 7
4. EX. ZONING: R

HOUSE

1ST FL: 302.00  
BSMT: 293.2  
INV. OUT: 295.78

SEPTIC TANK

EX. GR.: 298.5  
FIN. GR.: 299.5  
INV. IN: 295.57  
INV. OUT: 295.32

DISTRIBUTION BOX

EX. GR.: 297.8  
FIN. GR.: 297.8  
INV. IN: 294.6

WELL:

EX. GR.: 301.6  
FIN. GR.: 301.6

PLAT REFERENCE: LOTS 3, 4, 5, 6 AND 7, WELLER PROPERTY, A RESUBDIVISION OF LOT 2; PLAT 4274

TITLE:

**GRADING STUDY**

PROJECT:

**LOT 6 - WELLER PROPERTY**

LOCATION:

owner Richard Shurtell  
4TH ELECTION DISTRICT HOWARD CO., MD.

SCALE:

1"=50'

DESIGNED BY:

DRAWN BY:

J.J.B.

CHECKED BY:

DATE:

APRIL, 1985

FIELD BOOK:

PAGE NO.:

JOB NO.:

85055

DRAWING NO.:

105

**boender associates**  
inc.

consulting engineers  
land surveyors  
land planners

COURTHOUSE SQUARE  
3565 ELLICOTT MILLS DRIVE  
ELLICOTT CITY, MD. 21043

(301) 465-7777

RECEIPT

HOWARD COUNTY

**BUILDING PERMIT**

DEPARTMENT OF PUBLIC WORKS  
BUREAU OF INSPECTIONS LICENSES & PERMITS  
3430 COURT HOUSE DRIVE, ELLICOTT CITY, MARYLAND 21043

COMPLETION DATE

SERIAL NUMBER

**64485**

DATE ISSUED

**5/6/85**

USE &amp; OCCUPANCY DATE

BUILDING ADDRESS (HOUSE NO., STREET, TOWN OR AREA)

**1375 Route 94**  
**Woodbine, Md 21797**

LOT NO.	PARCEL NO.	SEC.	AREA	BLOCK NO.	LIBER	FOLIO
6	486			11	1184	356

UB DIVISION	ZONE	ZONE MAP	ELEC. DIST.	CENSUS TR.
<b>Weller Property</b>	R	7	4	6040

OWNER'S NAME AND ADDRESS

PHONE NO.

**Richard W. Schubert**  
**7212 Honeybrook Rd.**  
**Mt. Airy, Md**

OCCUPANT'S NAME AND ADDRESS

PHONE NO.

**owner**

ARCHITECT OR ENGINEER'S NAME AND ADDRESS

PHONE NO.

**Boender Associates, Inc.**  
**3565 Ellicott Mills Dr.**  
**Ellicott City, Md 21043**

**466-7777**

CONTRACTOR'S NAME AND ADDRESS

PHONE NO.

**Manor Homes, Inc.**  
**Md. Route 94**  
**Lisbon, Md**

*Allen Weller*  
*Weller Realty Inc.*  
*489-4200*

EXISTING USE

PROPOSED USE

**SFD****07/A1**

EST. CONSTRUCTION COST

LICENSE NUMBER

PERMIT FEE

**\$70,000****\$239.00**

Z/S CODE

**7**

FOR OFFICE USE ONLY

DISTANCE IN FEET FROM R/W LINE TO FRONT BUILDING LINE **75' min**SIDE YARD **30' min**

(DISTANCE IN FEET FROM SIDE BLDG. LINE TO SIDE PROPERTY LINE)

DISTANCE IN FEET FROM SIDE STREET R/W LINE

DISTANCE IN FEET FROM SIDE BUILDING LINE **n/a**

DISTANCE IN FEET, REAR YD. REQUIRING SET

BACK **60' min** (CORNER LOT ONLY)

SDP #

Checks payable to **DIRECTOR OF FINANCE OF HOWARD COUNTY****CAUTION**

To begin construction before a permit placard has been issued and displayed on the job is a violation of the law.  
Use and occupancy permit must be applied for two weeks before it will be issued.

IMPORTANT: PLEASE SHOW ZIP CODES AND  
AREA CODES WHEREVER REQUIRED.

GRADING/SEDIMENT CONTROL ☐ YES ☐ NO

SDP #

DESCRIPTION OF WORK AUTHORIZED

**X 2 story, part bsmt, 8 room, 2 FB, 1 HB,  
2 Garage (3 BR)**

SIZE OF BLDG.

FRONT

DEPTH

HEIGHT

**1****85'6"****32'8"****10'****2****28'6"****18'8"****9'****B****27'6"****29'6"****8'**

TYPE OF BLDG.

AREA

VOLUME

ROOF

B. ROOMS

ROOMS

BATHS

FIREPLACES

**1913****19130****402****724****asp gable****3978****5792****28,900**

FOOTINGS

FOUNDATION

S. WALLS

**24" x 12"****12" poured w/ fr w/****16" x 8"****8" conc****BV&S1d**

UTILITIES

WATER/WELL

SEWER/SEPTIC

GAS

ELECTRICITY

TYPE OF HEAT

AC

**X****X****X****HP****X****X**

I have carefully examined and read this application and know the same is true and correct, and that in doing this work, all provisions of Howard County Ordinances and the State Laws of Maryland will be complied with, whether specified or not; and I will notify the Bureau of Inspections, and Permits twenty-four hours in advance when I am ready for the inspections called for elsewhere in this application; and that no work will be covered up until such inspections have been complied with.

**/s/ Sylvia Boender**

SIGNATURE

**agent****4/10/85**

TITLE

DATE

FUNCTION

DATE

SIGNATURE APPROVAL

ZONING/PLANNING

**4/23/85****B. T. Barth**

SHA

**5/3/85****Steve Jones**

SEDIMENT/GRADING

BUILDING OFFICIAL

**5/2/85****G.E. Martin**

WATER &amp; SEWER

**no public WS required**

HEALTH DEPT.

**6/26/85****Fronmelt**

FIRE PROTECTION

STORM WATER MGM.

**4/12/85****Jean Reed****N.R. Gerni 11/41**

APPROVED

**5/6/85**

DATE

*Send UTO*

*Allen Weller*  
*16036 Frederick Ct Rd.*  
*Lisbon, Md*  
*21765*

November 14, 1985

Mr. Allen Weller  
16036 Frederick Road  
Lisbon, Maryland 21765

RE: Weller Property - Lot 6  
1375 Route 94

Dear Mr. Weller:

The water sample recently submitted for testing was free of coliform and fecal coliform bacteria at the time of sampling and is bacteriologically safe for drinking.

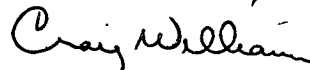
INTERIM CERTIFICATE OF POTABILITY

This certifies that the initial sampling requirements of COMAR 10.17.13 "Well Regulations" have been met for the water supply system installed under permit(s) HO-81-0558. No guarantee can be given for health protection beyond this date of issue. Based upon a satisfactory investigation and evaluation by the Howard County Health Department, the Department of Health and Mental Hygiene accepts this well system as required by COMAR 10.17.13.09.

This certificate may become final upon completion of the final bacteriological test which is to be taken by the county health department within six months. The well owner accepts his responsibilities under COMAR 10.17.13.10.

November 4, 1985

Date



D

Approving Authority  
Craig Williams, Director  
Water and Sewerage Program

CW/JS:JR

Well Approved: 11/28/84  
Septic Approved: 9/17/85

INVOICE NO.

W 13729

## CERTIFICATE OF ANALYSIS

DELMARVA LABORATORIES, INC.  
Annapolis—Salisbury—TimoniumAnnapolis: (301) 269-7755  
Eastern Shore: (301) 546-1318  
Timonium: (301) 628-2855

## FIELD RECORD

Sample Source: 1375  
RT 94  
WOODBINE  
RICHARD SHUBERT  
Permit 64485  
community ☐  
non-community ☐  
private ☒Date 11-4-85Time 930Iced ☒ yes  
☐ nopH 6.0Free Cl 0Total Cl 0Well No. H0 810558  
This Sample Was Taken From a Tap On The  
Property By Delmarva Labs, Inc.  
Satisfactory ☒  
Unsatisfactory ☐  
Not Determined ☐

Construction

County HOWARDBottle No. 13729 Collector J. Law

## LABORATORY RECORD

## Presumptive Bacteriological Test

ml. of Sample	10ml.				
Gas, 24 hours	—	—	—	—	—
Gas, 48 hours	—	—	—	—	—

## Confirmed Bacteriological Test

ml. of Sample	10ml.				
Coliforms					
Fecal Coliforms					

N(NO <sub>3</sub> ) (mg/l)	Sand	Turbidity (NTU)	(mg/l)	(mg/l)	(mg/l)	Coliforms/100ml.	
						Fecal	Total
<u>5.4</u>	<u>None</u>	<u>2.0</u>					

Date

Time

Received: 11/5/85 7:00 PMExamined: 11/5/85 7:19 PM W. H. Shields  
AnalystReported: 11/7/85 7:30 PMBacteriological analysis of this sample indicates the water is safe for human consumption. Thiosulfate Present ☐  
unsafe Absent ☐