

A 29150

5/23/91

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 # 41853
Date 4/1/91

Name of Installer J. JOSEPH GARTLAND, INC.

Telephone 875-2400

License Number 1713
Certified Well Pump Installer ☐

Well Driller ☐ Registered Plumber ☒

Name of Property Owner Gordon Bishop
Subdivision SUNSET VALLEY Lot # 6
Site Address 1025 SUNSET VALLEY DR.

Telephone 465-0571
Well Tag # HD-88-0669

Pump

1. Type
 - a. Deep well jet ☐
 - b. Shallow well jet ☐
 - c. Submersible ☒
2. Make Goulds
3. Model # 10EJ05422
4. Capacity 10 GPM
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 ☐

Motor

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

Pitless Adapter

1. Make Harvard
2. Model # PT-800
3. Depth 42"

Tank

1. Capacity 42
2. Pressure relief valve? 75 PSI

P.A. 5' B.G. - OK
MR 5/24/91

Piping

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

Well data

1. Depth ☐ ft.
2. Yield ☐ GPM
3. Static water level ☐ ft.
4. Will water supply be disinfected by installer? No

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.

Signature of Applicant: [Signature]

Date: 3/29/91

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

31 MAY -1 10:53
HOWARD COUNTY
RECEIVED

11/5/91
 APPLICATION

HOWARD COUNTY
PERMIT APPLICATION

DEPARTMENT OF PUBLIC WORKS
 BUREAU OF INSPECTIONS LICENSES & PERMITS

3430 COURT HOUSE DRIVE, ELLICOTT CITY, MARYLAND 21043

SERIAL NUMBER

36708

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

1025 Sunset Valley Dr.
 Beltsville, MD 21784

LOT NO.	PARCEL NO.	SEC	AREA	BLOCK NO.	LIBER	FOLIO
6	305	2	-	3	-	-

SUB DIVISION	ZONE	ZONE MAP	ELEC. DIST.	CENSUS TR.
Sunset Valley	R	4	3	6030

OWNER'S NAME AND ADDRESS PHONE NO.

Gordon and Charley Bishop
 3912 Chantal Court
 Ellicott City, Maryland 21043 465-0591

OCCUPANT'S NAME AND ADDRESS PHONE NO.

JAMES H. BISHOP

ARCHITECT OR ENGINEER'S NAME AND ADDRESS PHONE NO.

Same

CONTRACTOR'S NAME AND ADDRESS PHONE NO.

Barnard Bros. Const. Co. Inc.
 1035 Michael Rd.
 Elkridge, MD 21771 444-7621

EXISTING USE PROPOSED USE

Residential Lot SFO

EST. CONSTRUCTION COST LICENSE NUMBER PERMIT FEE

\$250,000.00 13-064901

W/S CODE

FOR OFFICE USE ONLY

DISTANCE IN FEET FROM R/W LINE TO FRONT BUILDING LINE

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

DISTANCE IN FEET FROM SIDE STREET R/W LINE

TO SIDE BUILDING LINE

DISTANCE IN FEET, REAR YD. REQUIRING SET

BACK (CORNER LOT ONLY)

CONDITIONS (IF ANY) 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.

LP-69

Revised

GRADING/SEDIMENT CONTROL ☐ YES ☐ NO SDP #

DESCRIPTION OF WORK AUTHORIZED

Constant 2 story SFO with attached 3-car garage and 1st floor Sun Room

SIZE OF BLDG.	FRONT	DEPTH	HEIGHT
---------------	-------	-------	--------

TYPE OF BLDG.	AREA	VOLUME	ROOF
---------------	------	--------	------

B. ROOMS	ROOMS	BATHS	FIREPLACES

FOOTINGS	FOUNDATION	S. WALLS

UTILITIES			
WATER/WELL	SEWER/SEPTIC	GAS	ELECTRICITY TYPE OF HEAT AC
			Gas Oil Heat AC

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.

SIGNATURE
 TITLE
 DATE 3-15-91

FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING		
SHA		
SEDIMENT/GRADING		
BUILDING OFFICIAL		
WATER & SEWER		
HEALTH DEPT.	3/22/91	R. Hodge
FIRE PROTECTION		
STORM WATER MGM.		

Distribution of Copies:
 White - Building Official
 Green - Planning & Zoning

Yellow - Engineering
 Pink - Health Dept.
 Gold - S.H.A.

APPROVED

DATE

A) PROPOSED HOUSE

F.F. Elev.=108.0'
Bsm't. Elev.=99.0'
Inv. Out Elev.=98.7'

B) PROPOSED SEPTIC TANK

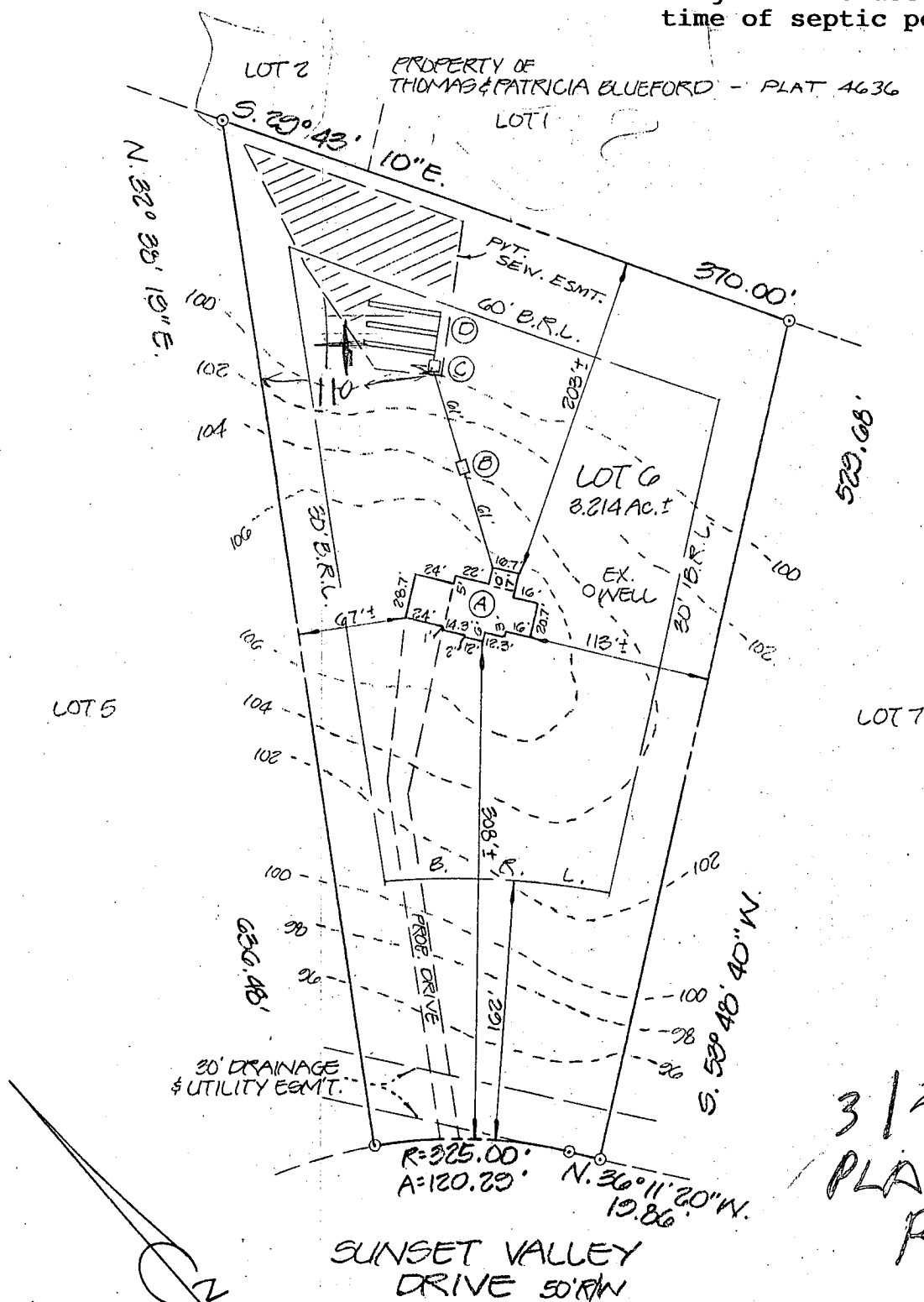
Ex. Elev.=104.0'
Inv. In Elev.=97.4'
Inv. Out Elev.=97.1'

C) PROPOSED DISTRIBUTION BOX

Ex. Elev.=100.0'
Inv. Elev.=95.8'

D) PROPOSED TRENCHES

Inv. Elev.=95.5'
Bottom Max=9'
4.5' of Stone
Length to be determined at
time of septic permit issuance



LOT PLAN
LOT 6, SECTION TWO
SUNSET VALLEY
1025 SUNSET VALLEY DRIVE
ELECTION DISTRICT N°3
HOWARD COUNTY, MARYLAND
SCALE: 1"=100' MARCH 1991

NOTE: Topo taken from Preliminary Plan,
Section Two, SUNSET VALLEY, prepared by
Fisher, Collins, & Carter, Inc., Nov 14, 1980.

I CERTIFY THIS PLAT TO BE CORRECT; IT IS THE RESULT
OF AN ACTUAL FIELD SURVEY, BASED ON DATA FOUND AMONG
THE LAND RECORDS OF HOWARD COUNTY,
MARYLAND, AS REFERENCED HEREON.



VANMAR ASSOCIATES INC.
Engineers • Surveyors • Planners
310 South Main Street, Mount Airy, Maryland 21771
(301) 829-2890 (301) 831-5015

REFERENCE

JOB NO.

PLAT N° 5205

21-2772

Perit

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

P.O. BOX 476 ELLICOTT, MARYLAND 21043
TELEPHONE: 992-2330

A 29150

P _____

DISTRICT 3RD

DATE 10/12/78

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 VIRGINIA M. GARRATT Gordon and Christy Bishop

ADDRESS FORSYTHE ROAD SYKESVILLE, MD. 21784 PHONE 301-442-2262

PROPERTY LOCATION:

SUBDIVISION SUNSET VALLEY LOT NO. New #6 on 11/14/80 P.L. 2

ROAD AND DESCRIPTION 1025' SUNSET VALLEY DRIVE

SIZE OF LOT 3.0 AC. ± TYPE BLDG. SINGLE FAMILY RESIDENCE

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.

SIGNATURE OF APPLICANT Bruce D. Burt

APPROVED BY Raymond Hodge FOR TRENCH DATE 2/18/85

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

BLDG. PERMIT SIGNED
AND RETURNED 3/23/81

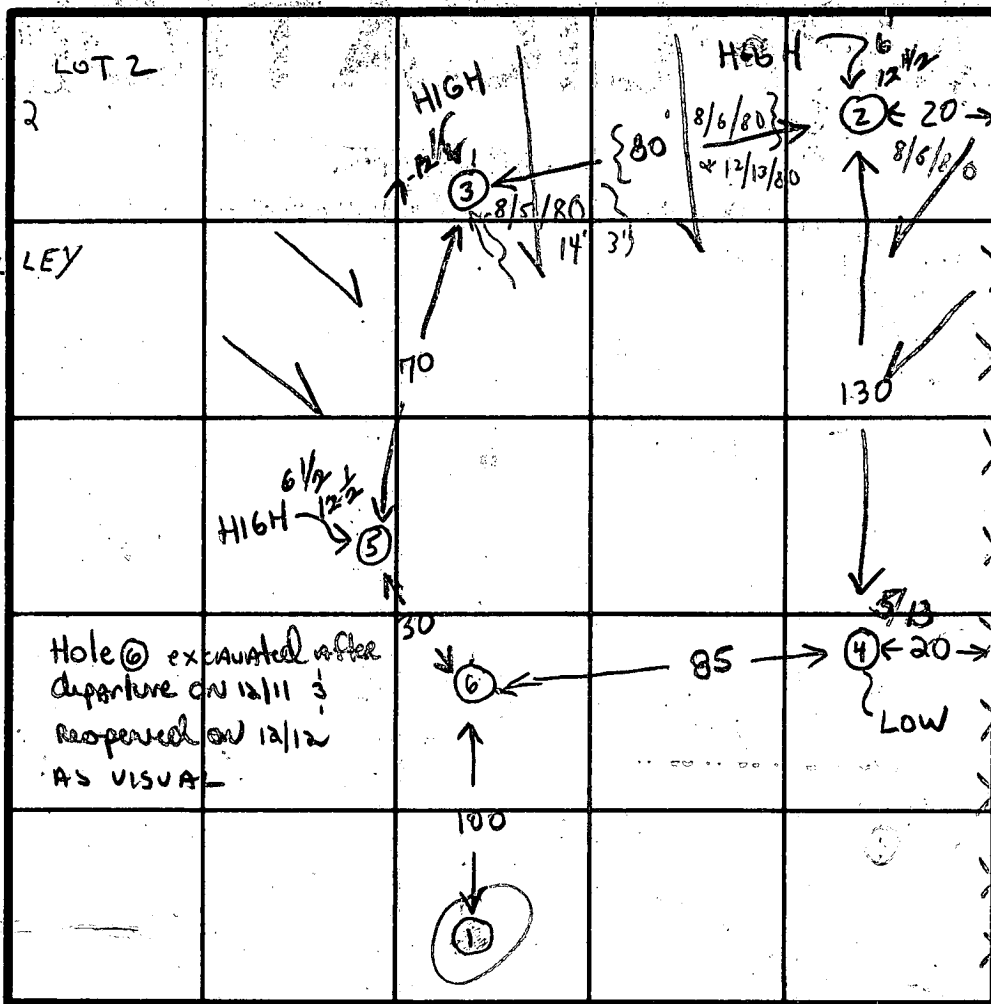
Serial # 36928
8FD

THIS IS NOT A PERMIT

New # 6 SEC 2
11/14/80

SOIL PROFILE

SUNSET VALLEY



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DAY ROAD

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
12/12/78	①	11'	ROCKY FROM OG SOLID	FROM OG AT 11'	10 11'		
12/13/78	2S	6'	1120	1126	1126	1134	8
	2D	12 1/2'	1124	1126	1126	1135	9
	3S	6'	1210	1220	No drop		fails
	3D	12 1/2'	1141	1154	1154	1211	17
	4S	5'	1149	1154	1154	1200	6
	4D	13'	1215	1221	1221	1236	15
	5S	6 1/2'	153	159	159	208	9
	5D	12 1/2'	1206	1211	1211	1215	4
	6S	12'	VISUAL	- SIMILAR	(CLAY to 5')		
	6D	7'	157	208	208	235	27
8-5-80	Confirmed in field	#3 hole on 8/6/80	14'-3" with crown	8/6/80	Dug deeper	To 15'	Visual
8/6/80	Visual	#2 hole	14'-3"	loam in deep part of hole			
							95

REMARKS

Tests by stake - open field (2 3 3 NEAR REAR prop line) (3-6')

TYPE OF SOIL

VARIABLE CLAY LAYER - SANDY LOAM BELOW

TESTED BY

GLK

ALSO PRESENT

CROWD'S CREW

Unif 4' Wood ground 6'

12 min

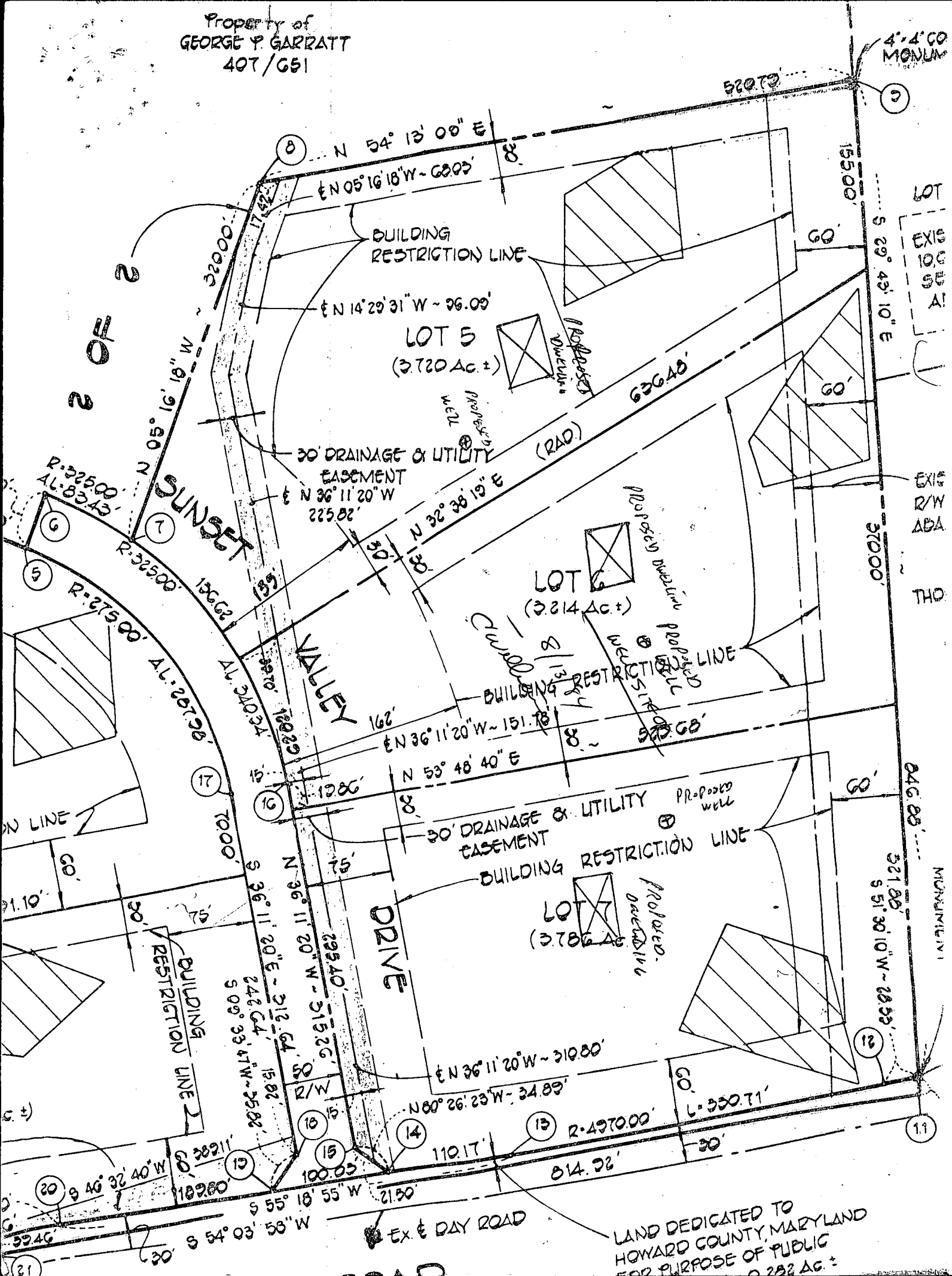
hard bottom

hard bottom

FIELD SHEET

8/5/80 CROWD'S CREW
WALTER
PZGER
WHITE
8/5/80

4-4 CO
MONUM



C1 3331 SEQUENCE NO. (OEP USE ONLY)

1, 2, 3
(THIS NUMBER IS TO BE PUNCHED
IN COLS. 3, 6 ON ALL CARDS)STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPETHIS REPORT MUST BE SUBMITTED WITHIN
45 DAYS AFTER WELL IS COMPLETED.COUNTY
NUMBER A 29150

DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO.
FROM "PERMIT TO DRILL WELL"

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
----	----	----	----	----	----	----	----	----	----	----

OWNER KARFONTA last name SUNSET VALLEY DRIVE first name SYKESVILLE
STREET OR RFD
SUBDIVISION SUNSET VALLEY SECTION 2 LOT 6

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
FROM TOCheck
if water
bearing

Top Soil	0	2
Sandy	2	10
Sand Stone	10	25
Micka	25	30
Sand Stone	30	40
Micka	40	160

GROUTING RECORD

WELL HAS BEEN GROUTED

(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL

CEMENT CM BENTONITE CLAY BCNO. OF BAGS 5 NO. OF POUNDS 500GALLONS OF WATER 30
DEPTH OF GROUT SEAL (to nearest foot)from 0 ft. to 18 ft.
(enter 0 if from surface)Casing types
insert
appropriate
code
below

ST	CO
STEEL	CONCRETE
PL	OT
PLASTIC	OTHER

MAIN Casing TYPE PL Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 20OTHER CASING (if used)
diameter inch depth (feet) from to screen type or open hole
insert
appropriate
code
below

ST	BR	HO
STEEL	BRASS	OPEN HOLE
PL	OT	OTHER
PLASTIC	OTHER	

C2
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
---	---	---	---	---	---	---	---	---	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----

SLOT SIZE 1 2 3
DIAMETER OF SCREEN (NEAREST INCH)GRAVEL PACK from to
IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68OEP USE ONLY
(NOT TO BE FILLED IN BY DRILLER)
T (E.R.O.S.) WQ
70 72 74 75 76
TELESCOPE CASING LOG INDICATOR OTHER DATA

C3

PUMPING TEST

HOURS PUMPED (nearest hour) 3PUMPING RATE (gal. per min. to nearest gal.) 9METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 30WHEN PUMPING 30

TYPE OF PUMP USED (for test)

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

PUMP INSTALLED

DRILLER WILL INSTALL PUMP YES NOIF DRILLER INSTALLS PUMP, THIS SECTION
MUST BE COMPLETED FOR ALL WELLS
EXCEPT HOME USE
TYPE OF PUMP INSTALLED
PLACE (A,C,J,P,R,S,T,O)
IN BOX - SEE ABOVE: CAPACITY:
GALLONS PER MINUTE (to nearest gallon) PUMP HORSE POWER PUMP COLUMN, LENGTH (nearest ft.)

CASING HEIGHT (circle appropriate box and enter casing height)

+	above
-	below

 LAND SURFACE 2 (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)

Well Permit No. HO - 81-0669
Location of property (road) SUNSET VALLEY DRIVE
Subdivision SUNSET VALLEY Lot 6 Block Plat Sec. 2
Well Driller RALPH MAYNE Owner CHAS. KARFONIA

Depth of well 160 ft
Distance of measuring point (M.P.) above ground 1 ft
Static water level (S.W.L.) below M.P. 30 ft

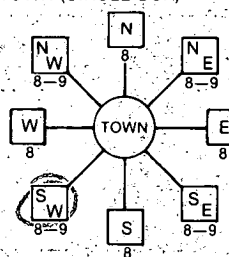
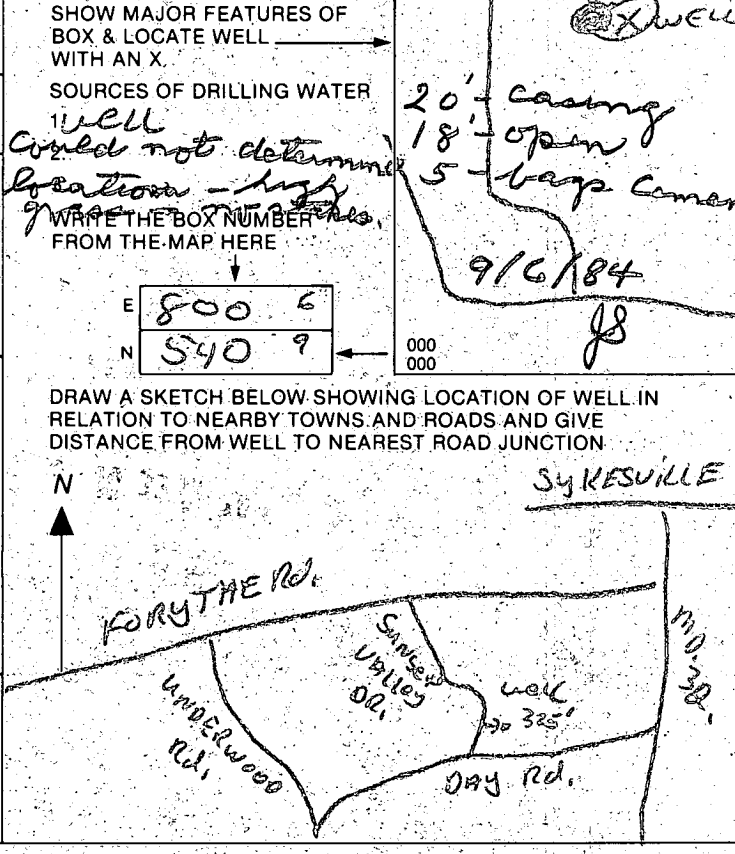
I. ~~High rate pumping -- reservoir drawdown~~

Time pump started 7:45 Pumping rate 46 g.p.m
Total time 15 min to reach pumping water level 30 ft. below M.P.

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

[illegible]

20ft PL. 5 bags

B 1 1445 <small>(THIS NUMBER IS TO BE PUNCHED IN GOLS. 3-6 ON ALL CARDS)</small>	SEQUENCE NO. (OEP USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	OEP PERMIT NUMBER 40-81-0669 <small>fill in this form completely</small>
Date Received <u>9/6/84 9:30 AM</u> OWNER INFORMATION KARFONTA CHARLES 21 CARYSLER PLACE CATONSVILLE MD 21228 Town State Zip		B 3 LOCATION OF WELL HOWARD COUNTY SUNSET VALLEY SUBDIVISION SECTION 2 LOT 6 SYKESVILLE NEAREST TOWN MILES FROM TOWN (enter 0 if in town) 2 MI	
DRILLER INFORMATION Ralph Mayne Driller's Name RALPH MAYNE (WELL DRILLING) Firm Name 9120 Brown Church Rd. Mt. Airy Address Ralph Mayne Signature 7/20/84 Date		B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH WEST EAST SOUTH Sunset Valley DR. NEAR WHAT ROAD 32.5 DISTANCE FROM ROAD ENTER FT. or MI. 0.5	
B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 5 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL HOWARD COUNTY NAME A29150 COUNTY NO. OEP SIGNATURE DATE ISSUED 08/13/84 CO-SIGNATURE NORTH GRID 549 000 EAST GRID 280 600	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="radio"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="radio"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="radio"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="radio"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input type="radio"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X. SOURCES OF DRILLING WATER 1 well could not determine location - high grass - no trees WRITE THE BOX NUMBER FROM THE MAP HERE E 800 6 N 540 9	
APPROXIMATE DEPTH OF WELL 150 FEET APPROXIMATE DIAMETER OF WELL 6 INCH METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jetted & DRIVEN AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary) 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 	
REPLACEMENT OR DEEPENEED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="radio"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <input type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY <input type="radio"/> THIS WELL WILL DEEPEEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENEED (IF AVAILABLE)		Not to be filled in by driller (OEP USE ONLY) APPROP. PERMIT NUMBER FORCE INITIALS PERMIT No. 40-81-0669 WRITE INITIALS IN BOX	
SPECIAL CONDITIONS			

Jay Bernard 484-7621 PRINT FORCE 301-544-3443
 INVOICE NO. *Permit*
 1 5883 #36928
 LT. 6

CERTIFICATE OF ANALYSIS
 WATER TESTING LABORATORIES OF MARYLAND, INC.
 Annapolis - Timonium - Severna Park - Elkton
 TOLL FREE: 1-800-635-0645

ANNAPOLIS: (301) 269-7755
 BELAIR: (301) 838-8411
 ELKTON: (301) 398-2413
 SEVERNA PARK: (301) 647-7737
 TIMONIUM: (301) 628-2855
 WESTMINISTER: (301) 876-2035

FIELD RECORD

Sample Source: *Laundry Tub* community ☐ non-community ☒
1025 Sunset Valley Dr.
Sykesville Md. Date *7-9-91*
Bernard Const. Time *12:20*
 Well No. *HO-81-0669* Iced ☒ yes ☐ no
 This Sample Was Taken From a Tap On The Property by Water Testing Laboratories of Maryland, Inc.
 pH *5.5*
 Free Cl. *0*

Construction Satisfactory ☒ Unsatisfactory ☐ Not Determined ☐
 Total Cl. *0*
 County *How*

Bottle No. *5883* Collector *J. Gehlert 89-039-M*

Bacteriological analysis of this sample indicates the water is safe for human consumption.

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 ₃) (mg/l)	Sand	Turbidity (NTU)	(mg/l)	(mg/l)	(mg/l)	Coliforms/100ml Fecal	Total
<i>388</i>	<i>NONE</i>	<i><1</i>					

Date Received: *7-10-91* Time *7*
 Examined: *7-10-91* *8:30*
 Reported: *7-12-91* *9*

Analyst *J. Ventura*
 Thiosulfate Present ☐ Absent ☐

PLEASE DETACH THIS PART AND MAIL WITH REMITTANCE TO:

WATER TESTING LABS
 POST OFFICE BOX 463
 TIMONIUM, MARYLAND 21093

Fax to Co.

INVOICE NO.
 T 5883

DATE:

ANNAPOLIS: (301) 269-7755
 BELAIR: (301) 838-8411
 ELKTON: (301) 398-2413
 SEVERNA PARK: (301) 647-7737
 TIMONIUM: (301) 628-2855
 WESTMINISTER: (301) 876-2035

7-9-91

ATTN: JAY

Bernard Construction
1035 St. Michaels Rd.
Mt. Airy, Md. 21771

	AMOUNT
For analytical work reported above	<i>65⁰⁰</i>
TOTAL DUE	<i>65⁰⁰</i>



HOWARD COUNTY HEALTH DEPARTMENT

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

July 12, 1991 *Reply to:*

Charles Streaker, Sanitarian
461-9933 or 461-9934

Barnard Construction
Attn: Gary Barnard
1035 St. Michaels Road
Mt. Airy, Maryland 21771

Re: Sunset Valley Sec. II, Lot 6
1025 Sunset Valley Drive
Well Permit No. HO-81-0669

Dear Mr. Barnard:

This is to advise you that the septic system was installed, inspected and approved on May 22, 1991.

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 26.04.04 "Well Regulations" have been met for the water supply system installed under permit(s) HO-81-0669. 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 26.04.04.09.

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 26.04.04.10.

June 6, 1984
Date Well Approved

July 9, 1991
Date of Water Sample

Charles Streaker
Approving Authority
Charles Streaker, Sanitarian
Water and Sewerage Program

✓
CBS:cm

Bureau of Environmental Health
3525-H Ellicott Mills Drive Ellicott City, Maryland 21043-4544
Water and Sewerage, Permits 461-9933 Community Environmental Health 461-9944
Technical Services 461-9955 Director 461-9956 TDD 313-2323



HOWARD COUNTY HEALTH DEPARTMENT

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

April 13, 1994

Gordon and Christy Bishop
1025 Sunset Valley Drive
Sykesville, MD 21784

RE: Sunset Valley, Sec. 2, Lot 6
1025 Sunset valley Drive
Well Permit #HO-81-0669

Dear Mr. and Mrs. Bishop:

This is to advise you that the septic system was installed, inspected and approved on May 22, 1991.

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.

FINAL CERTIFICATE OF POTABILITY

This certifies that all sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under permit(s) #HO-81-0669.

Date of Final Sampling: April 4, 1994
Date of Acceptance: April 13, 1994

Approving Authority

Charles Streaker, R.S.

Charles Streaker, R.S.
Water and Sewerage Program

Water Sample Dates: July 9, 1991 and April 4, 1994

CS:dc

cc: file