

10/10/84
Septic
(PM)

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

Approved
10/10/84
C. Williams

P. 36623
29174
A 34655

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED
03-309037

ELLICOTT CITY
DISTRICT 3rd
DATE 3/6/84

Paul Schissler IS PERMITTED TO INSTALL ☒ ALTER ☐
ADDRESS 4410 Salembottom Road, Westminster, Maryland 21157 PHONE 875-4197
SUBDIVISION Sunset Valley ROAD 1050 Sunset Valley LOT 8, Section 2
PROPERTY OWNER Virginia M. Garrett EUGENE BURGESS
ADDRESS

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

GARBAGE GRINDER? YES ☐ NO ☒

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 180 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 9 feet below original grade. Effective area begins at 4 feet below original grade. 5 feet of stone below distribution pipe.

LOCATION: Place distribution box 210 feet from the edge of Sunset Valley Drive and 50 feet from the right lot line. Run trenches along level ground toward right-rear part of property.

NOTE: No trench to exceed 100 feet in length. If more than one trench used, a distribution box is required. Trenches to be installed on level ground. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

BUDG. PERMIT SIGNED
AND RETURNED 7-20-98
Serial # B70113035
Close in inspection record

PLANS APPROVED BY C. Williams DATE 10/17/85

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.

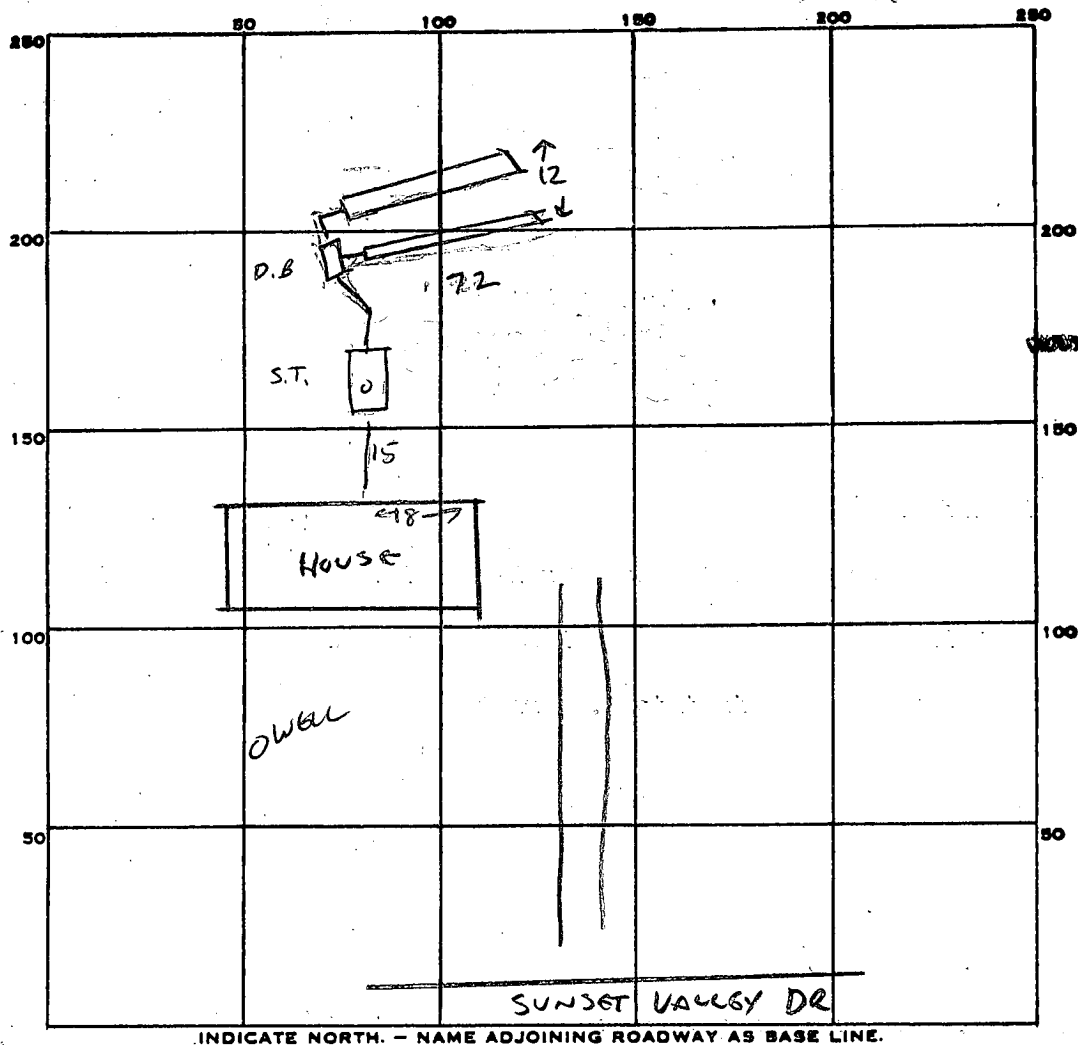
PERMIT VOID AFTER THREE YEARS.

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 APPROVAL ON THIS PERMIT

FOR INSPECTION OF SEPTIC SYSTEMS.

A 29174



PERMIT CARD ✓

SEPTIC TANK, LEVEL ✓

CLEANOUTS ST ✓

DISTRIBUTION BOX, LEVEL ✓

TILE FIELD, DEPTH 9 FT. TRENCH WIDTH FT.

GRAVEL DEPTH 5 FT IN. TOTAL LENGTH 144 FT.

NUMBER OF TRENCHES 2 (72+72) ONE SIDEWALL TOTAL BOTTOM AREA 720

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

ABSORBENT AREA 720 SQ. FT.

REMARKS 6-8" ROCK CHUNKS IN SEPTIC TANK HOLD. CONTRACTOR INSTRUCTED

TO SEAL TANK & LINGS WELL. NO ROCK ENCOUNTERED AT HEAD OF TRENCH - 30FT AWAY

10/10/86 TRENCHES OK TO COVER. CW

10/10/86
CW

DATE SYSTEM APPROVED 10/10/86

INSPECTOR C. Williams

PRSL

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 29174

P _____

DISTRICT 3^{RD.}

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. GARRETT

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

PROPERTY LOCATION:

SUBDIVISION SUNSET VALLEY LOT NO. New #8 11/14/80 pld
26 Pg. 2
Sec. 2

ROAD AND DESCRIPTION _____

SIZE OF LOT _____ TYPE BLDG. _____

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 S/ BRUCE D. BURTON

APPROVED BY Raymond Rodger FOR Dry Wells Branch DATE 2/18/83

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

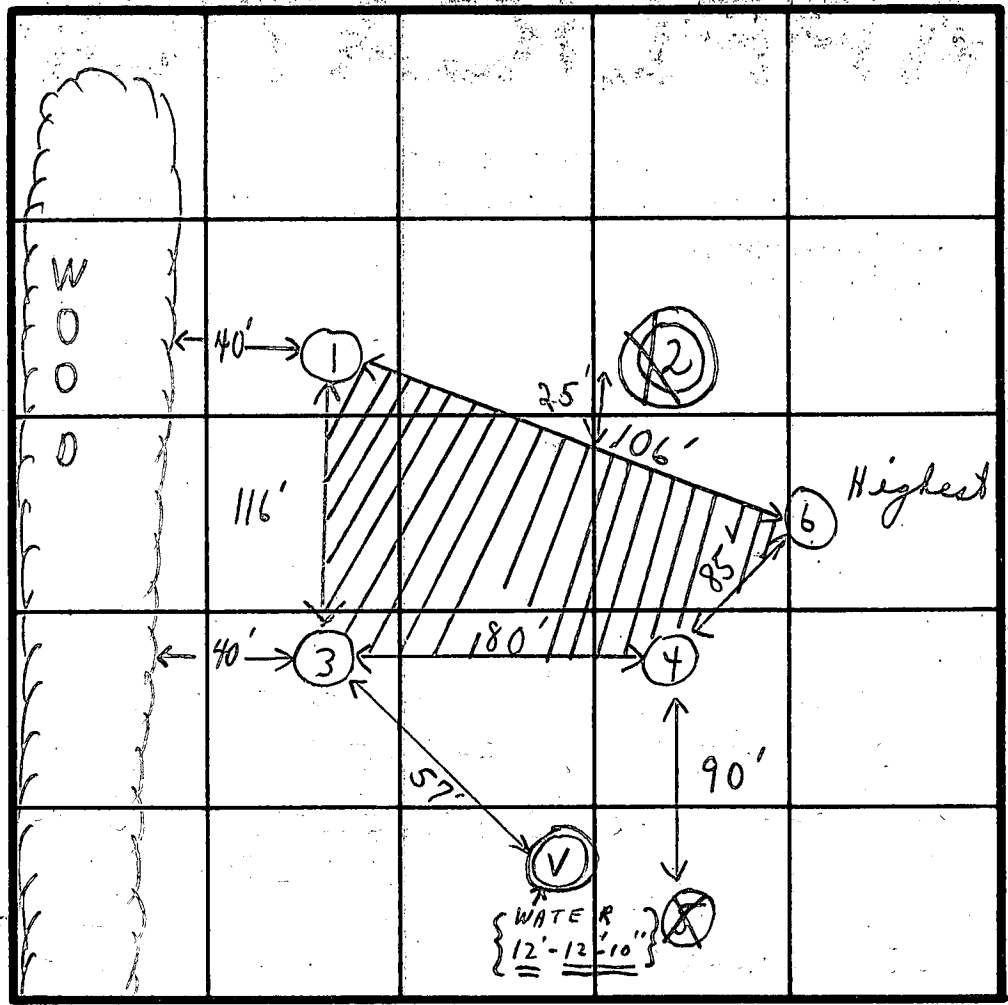
THIS IS NOT A PERMIT

New #8

#26
Pg. 2
SOIL PROFILE

BELOW
CLAY
SEE
EACH
HOLE

FIELD
SHEET



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE

	DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
				START	STOP	START	STOP	
	8/6/80	#3	14 1/2'	(LOAM-DEEP)		AS G.K. DESCRIBED		
	8/6/80	#2 X	9'-8"	Solid in bottom		AS G.K. DESCRIBED		
	8/7/80	V	12'-10"	{WATER FROM 12'-12'-10"}				
		1 S	4'	1:36	1:43	1:43	1:56	13 min
		1 D	14'-8"	(LOAM-DEEP)				
		6 S	2 1/2'	2:45	2:52	2:52	3:20	28 min
		6 D	12 1/2'	2:38	2:40	2:40	2:43	3 min

1'-4" clayish
4'-12' LOAM
1'-4' CLAYISH
4'-14'-8"
LOAM-DEEP
1'-2 1/2' CLAYISH
2 1/2'-12 1/2' SOME
MOSTLY LOAM

REMARKS Res completed @ office 8/8/80 Per area
High Weeds VIIIIII
 TYPE OF SOIL SEE
 TESTED BY C.B.S. 8/6/80 + 8/7/80 ALSO PRESENT 8/6/80 + 8/7/80
SEE C.B.S. CROVO & DEGLA
QUINER

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

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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

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

PROPERTY LOCATION:

SUBDIVISION SUNSET VALLEY LOT NO. New #8
26 Pg. 1

ROAD AND DESCRIPTION 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. Burtis

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

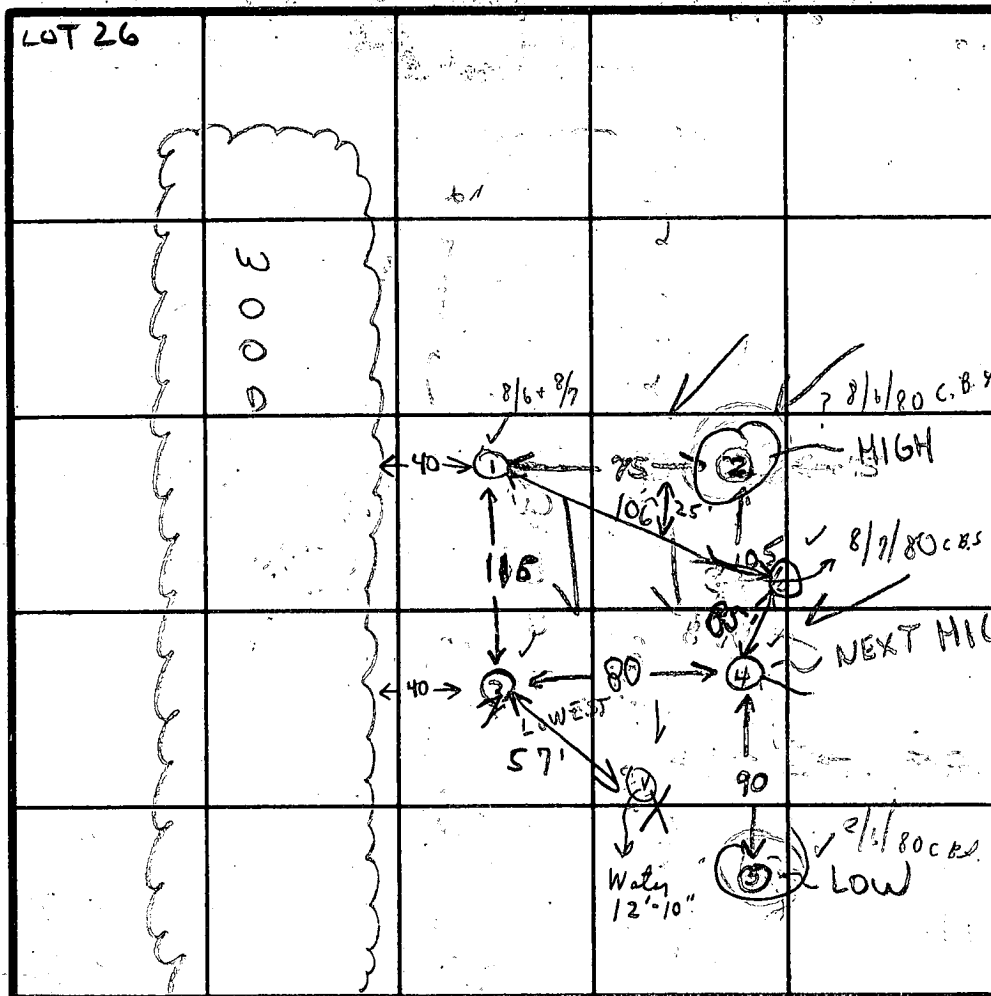
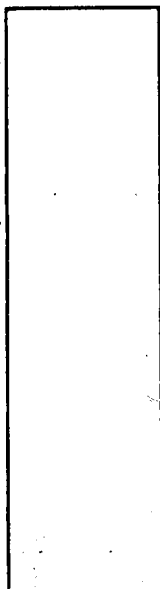
REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

26 New #8

Pg 1

SOIL PROFILE



FIELD SHEET

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DAY ROAD

SOIL PROFILE

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
			CLAYEY LOAM		VISUAL		
12/15/78	? 20	12	"	"	BUT ROCKY	THROUGHOUT	
	35	6	1146	1205	1205	1224	19
28 Dec 78	30 B	13 1/2	1146	1205	1205	1225	20
	45	6	1153	1153	1153	1156	3
	40 B	12 1/2	1152	1200	1200	1218	18
	35 50	8'	SOLID	ROCK			
8/6/80	#3 Visual	14 1/2'	LOAM DEEP				
(V L level in field)	#2	9'8"					
8/7/80	X Visual	X Water @ 12'-12'10"			IF USED		
C.B.S.	{ due to water 1 S	pr. 4'	1:36	1:43	FOR WETS		
1'-4' CLAYEY SH					1:43		
4'-14'-8" LOAM + SOME SAND STONE	1 D	14'-8"	(LOAM - D EEP)				
Use	(A) 6 S	2 1/2'	2:45	2:52	2:52	3:20	28 min
1'-2 1/2' CLAYEY SH	6 D	12 1/2'	2:38	2:40	2:40	2:43	3 min

lined 4'

15 min.

good soil at 4'

Hold for reevaluation

4'-12' } C.B.S.

REMARKS

open field - test as stated

TYPE OF SOIL

CLAYEY LOAM WITH SAND LAYERS - variable clay layer

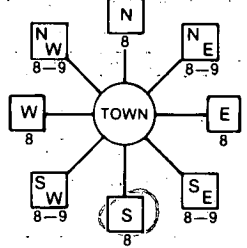
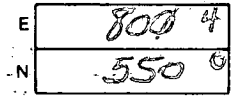
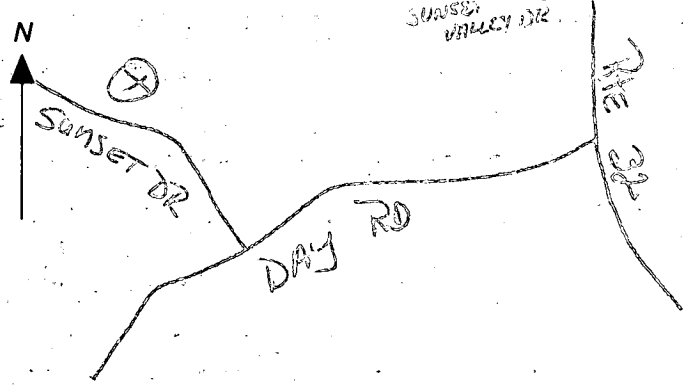
TESTED BY

(GLK)

ALSO PRESENT

8/6/80 CROVO + D ± G CCR
* 8/7/80

15

B 1 1 2 3 4 5 6 5953 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)	SEQUENCE NO. (OEP USE ONLY) 11/11/85 139 out	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	OEP PERMIT NUMBER HO-81-1204 70 fill in this form completely 79
Date Received 11/11/85 OWNER INFORMATION EUGENE BURGESS CONTR 15 Last Name 34 Owner First Name 217 ROLLING FIELD RD 36 Street or RFD 55 BALTIMORE MD 21228 57 Town 70 State 72 Zip 76		B 3 LOCATION OF WELL HOWARD 8 COUNTY 21 SUNSET VALLEY 23 SUBDIVISION 42 SECTION 2 LOT 8 44 46 48 50 SYKESVILLE 52 NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) 2.5 MI 73 76 77 78	
DRILLER INFORMATION SANDY B. COCHRAN Driller's Name 77 License No. 80 120 G. EDGAR HARR SONS CORP. Firm Name 12047 FALLS BL. COLLETSVILLE 21230 Address Sandy B. Cochran 10-3-85 Signature Date		B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  SUNSET VALLEY DRING 11 NEAR WHAT ROAD 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  34 80 37 DISTANCE FROM ROAD ENTER FT or MI AT 38 39	
B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 5 8 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 950 14 20		USE FOR WATER (CIRCLE APPROPRIATE BOX) ☒ HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) ☐ FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) ☐ INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) ☐ PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) ☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)	
APPROXIMATE DEPTH OF WELL 200 FEET 24 28 APPROXIMATE DIAMETER OF WELL 6 INCH 30 37		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL HOWARD A 34655 COUNTY NAME COUNTY NO. OEP STATE HEALTH SIGNATURE INSERT S DATE ISSUED 10/17/85 D. Nilton 04/17/86 43 48 CO SIGNATURE EXP. DATE NORTH GRID 550000 EAST GRID C804000 50 55 57 63	
METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jetted & DRIVEN 30. AIR-ROTary AIR-PERCussion 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  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 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 ☐ THIS WELL WILL DEEPEMED 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 GAP 63 FORCE R4 WRITE INITIALS IN BOX PERMIT NO. HO-81-1204 67 68 70 71 72 73 74 75 76 77 78 79	
SPECIAL CONDITIONS			

C12466SEQUENCE 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
NUMBERA 34655

DATE Recd. 813

DATE WELL COMPLETED11/13/85

Depth of Well2215026
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
HO-81-1204

OWNERBORESS CONTRACTORS
last namefirst nameEUGENE

STREET OR RFD. SUNSET VALLEY DR. TOWN SYKESVILLE

SUBDIVISION SUNSET VALLEY SECTION 2 LOT 8

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
FROMTO

Check
if water
bearing

OVERBURDEN050

GRANITE50150X

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)
yesno
Y44N44

TYPE OF GROUTING MATERIAL

CEMENTCMBENTONITE CLAYBC

NO. OF BAGS10NO. OF POUNDS1800

GALLONS OF WATER

DEPTH OF GROUT SEAL (to nearest foot)
from0ft. to00ft.
48525458
(enter 0 if from surface)

CASING RECORD

casing
types
insert
appropriate
code
below

STCO
STEELCONCRETE
PLOT
PLASTICOTHER

MAIN CASING TYPENominal diameter top (main) casing of main casing. Total depth of main casing.
(nearest inch)(nearest foot)

ST650

OTHER CASING (if used)
diameter depth (feet)
inchfromto

SCREEN RECORD

screen type
or open hole
insert
appropriate
code
below

STBRHO
STEELBRASSOPEN
PLBRONZEHOLE
PLASTICOTHER

C2

DEPTH (nearest ft.)

14050150

2

3

4

5

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CIRCLE APPROPRIATE LETTER
A A WELL WAS ABANDONED AND SEALED
WHEN THIS WELL WAS COMPLETED
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"
AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE
ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION
PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST
OF MY KNOWLEDGE.

DRILLERS IDENT. NO. 520

DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)
Conley Phin

SITE SUPERVISOR (sign. of driller or journeyman
responsible for sitework if different from permittee)

C3

PUMPING TEST

HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min. to nearest gal.) 75

METHOD USED TO MEASURE PUMPING RATE SUBMERSIBLE

WATER LEVEL (distance from land surface)
BEFORE PUMPING 41

WHEN PUMPING 894

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 WILL INSTALL PUMP YES NO

IF 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: 29

CAPACITY:
GALLONS PER MINUTE 3135

PUMP HORSE POWER 3741

PUMP COLUMN LENGTH (nearest ft.) 4347

CASING HEIGHT (circle appropriate box
-and enter casing height)
+ above } LAND SURFACE
- below } (nearest foot)
495051

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)

Diagram showing well location on lot with distances 10' and 60'.

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81 1204
Location of property (road) SUNSET VALLEY RD
Subdivision SUNSET VALLEY Lot 8 Block Plat Sec. 2
Well Driller SANDY A. COCHRAN Owner EUGENE BURGESS CONTRACTORS

Depth of well 150'
Distance of measuring point (M.P.) above ground 17"
Static water level (S.W.L.) below M.P. 25' 1"

I. High rate pumping -- reservoir drawdown

Time pump started 0730 Pumping rate 15.0
Total time 15 to reach pumping water level 90 ft. below M.P.

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

[illegible]

1447

SEQUENCE NO.
(OEP USE ONLY)STATE OF MARYLAND
PERMIT TO DRILL WELL

OEP PERMIT NUMBER

40-81-0667

fill in this form completely

Date Received

2-22-84

OWNER INFORMATION

KARFONYA CHARLES

15 Last Name Owner First Name 34

21 CARYSLER PLACE

36 Street or RFD 55

NATONSVILLE MDRI 228

57 Town 70 State 72 Zip 76

DRILLER INFORMATION

Ralph Mayne 273

Driller's Name 77 License No. 80

Ralph Mayne (well drilling)

Firm Name

Sico Brown Church Rd. NY, Day

Address

Signature Date

2/20/84

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 5

8 12

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 5

14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

☒ HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)☐ FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)☐ INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)☐ PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

B 3

LOCATION OF WELL

HOWARD

8 COUNTY 21

SUNSET VALLEY

23 SUBDIVISION 42

SECTION 2 LOT 8

44 46 48 50

SUKESVILLE

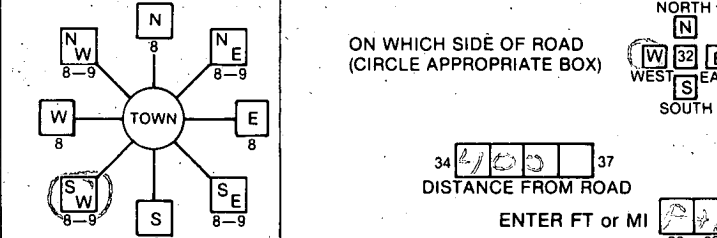
52 NEAREST TOWN 71

MILES FROM TOWN (enter 0 if in town) 2 MI

73 76 77 78

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

NORTH

WEST

EAST

SOUTH

DISTANCE FROM ROAD

ENTER FT or MI

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

COUNTY NAME

OEP SIGNATURE

DATE ISSUED

CO SIGNATURE

EXP. DATE

NORTH GRID

EAST GRID

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

1. well

2.

3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E 800 6

N 540 9

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION

N

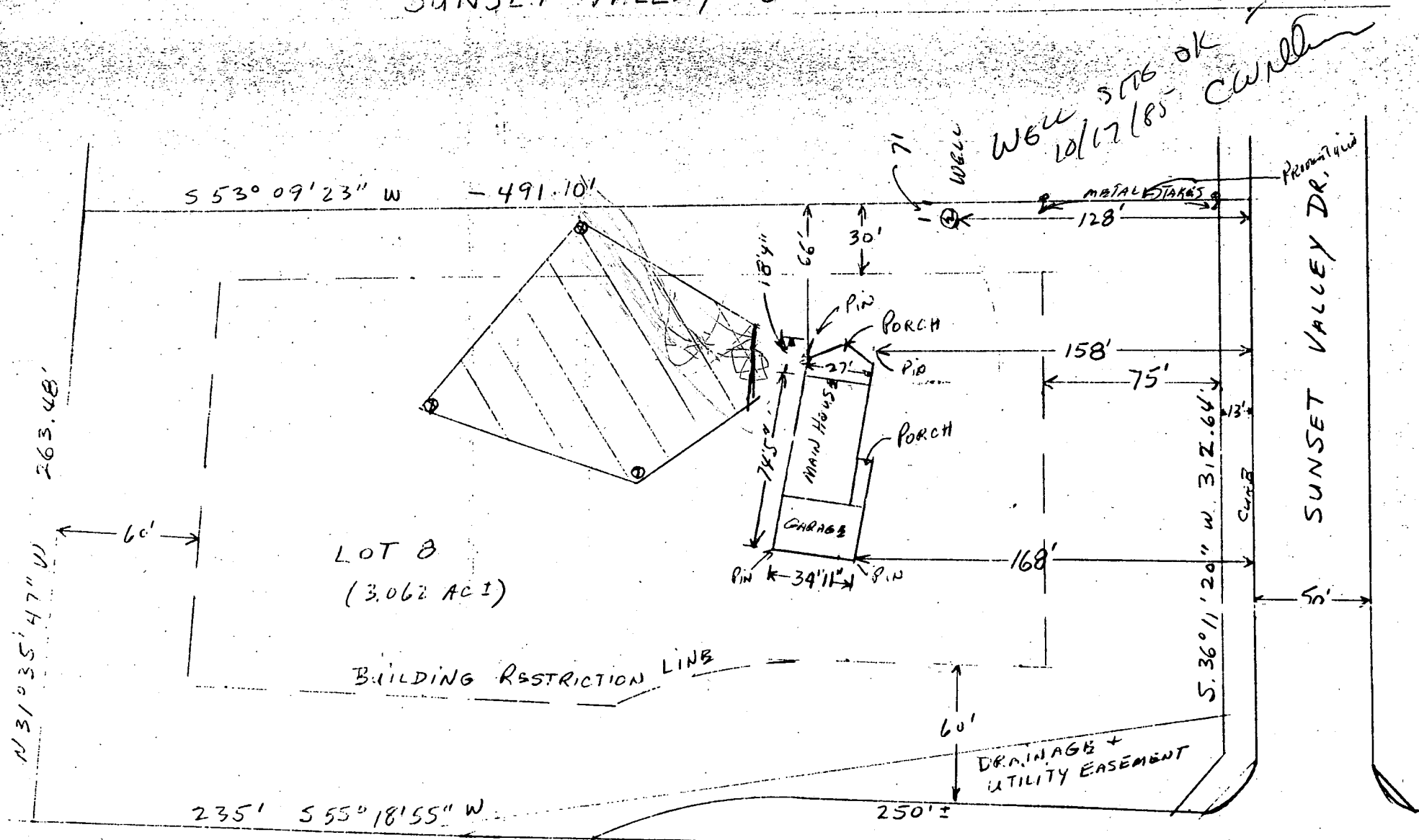
SUKESVILLE

FORGETHE RD

SUNSET VALLEY RD

MIR RD

SUNSET VALLEY SECTION 2 LOT 8



LOCATION OF HOUSE

DAY ROAD

AT EDGE OF PERC AREA IS ACCEPTABLE IN CONCEPT.
 FORMAL APPROVAL DEPENDS ON DRILLING
 OF SATISFACTORY WELL AND SUBMISSION
 OF ACCEPTABLE ELEVATION PLANS.

9/26/85 Craig Williams

EUGENE F. BURGESS
 217 ROLLINGFIELD RD.
 BALTIMORE, MD. 21228

TAX MAP #9 PARCEL 36

744-0534

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

Howard County Health Department
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Court House Square
Ellicott City, Md. 21043
461-9933

New Installation ☒
Replacement ☐

Receipt # 36705
Date 3/20/86

Name of Installer ROBERT L. FEELEZ CO, INC.

Telephone 781-4655

License number 2122

Certified Well Pump Installer ☒ Well Driller ☐ Registered Plumber ☒

Name of Property Owner MR. & MRS. EUGENE BURGESS

Telephone 744-0020

Subdivision SUNSET VALLEY

Lot #

Well tag # HO-81-1204

Site Address 1050 SUNSET VALLEY ROAD

Pump

1. Type
 - a. Deep well jet ☐
 - b. Shallow well jet ☐
 - c. Submersible ☒
2. Make GOWLDS
3. Model # 10EJ0741
4. Capacity 10 GPM

Motor

1. Horsepower 3/4
2. RPM 3450
3. Voltage
 - a. 110 ☐
 - b. 220 ☒

Pitless Adapter

1. Make
2. Model #
3. Depth

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 WELL-X-TROL #250

1. Capacity 120
2. Pressure relief valve? YES

Piping

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

Well data

1. Depth 150 ft.
2. Yield 12 GPM
3. Static water level 36 ft.
4. Will water supply be disinfected by installer? YES

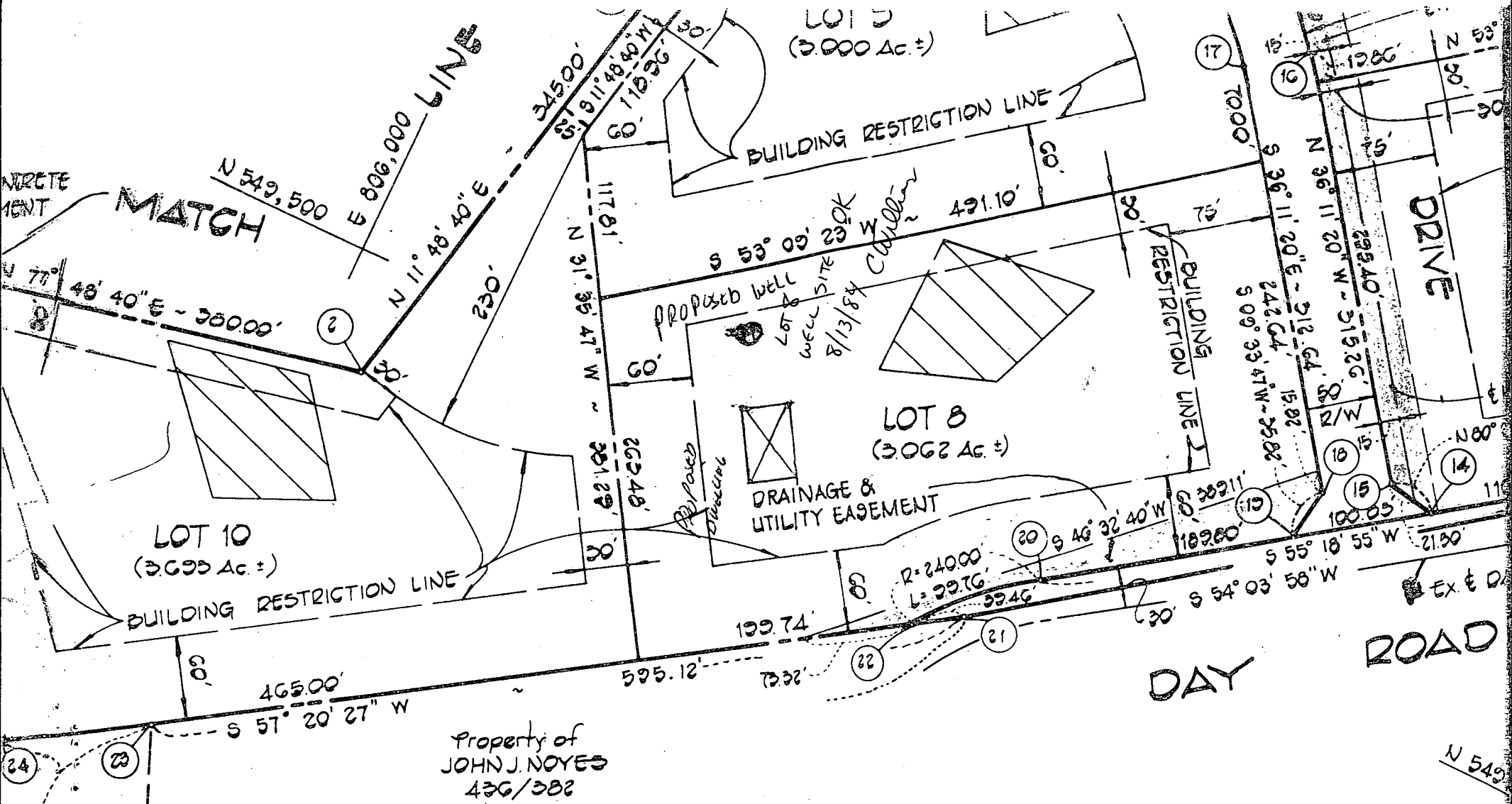
I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

Signature of Applicant: Ricky L. Reed R.L.F.CO.

Date: 3/24/86

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



	SHEET 1 OF 2	SHEET 2 OF 2	TOTAL
BE RECORDED	6	6	12
	20.475 Ac. ±	20.324 Ac. ±	40.799 Ac. ±
	0.764 Ac. ±	0.748 Ac. ±	1.512 Ac. ±
ATED TO HOWARD OR PURPOSE OF	0.282 Ac. ±	--	0.282 Ac. ±
ION 2	21.521 Ac. ±	21.072 Ac. ±	42.593 Ac. ±

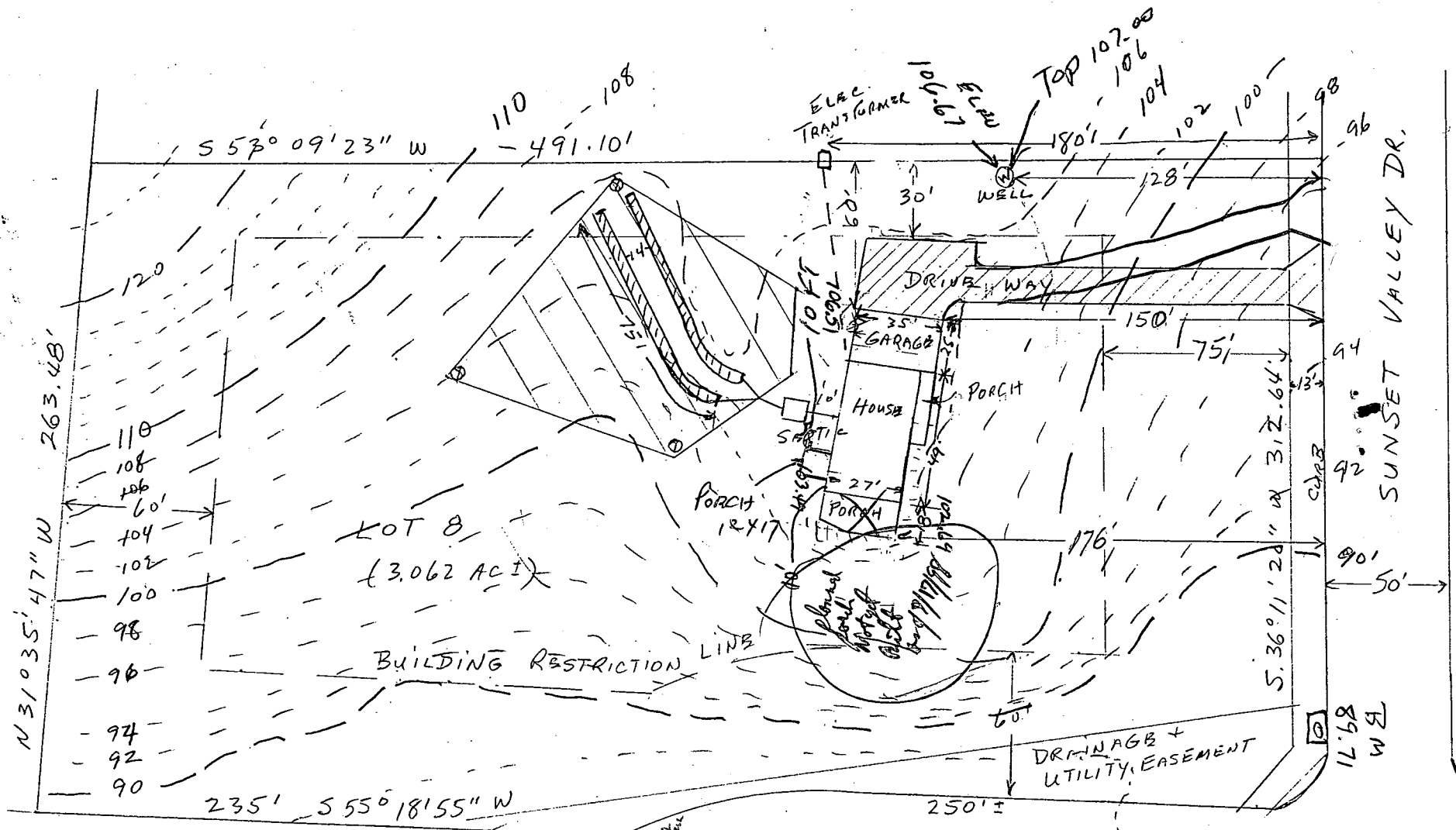
TE WATER AND PRIVATE SEWERAGE
HOWARD COUNTY HEALTH DEPARTMENT

OWNER'S CERTIFICATE

I, CHARLES J. KARFONTA, OWNER OF THE PROPERTY SHOWN AND DESCRIBED HEREON, HEREBY ADOPT THIS
AND IN CONSIDERATION OF THE APPROVAL OF THIS FINAL PLAT BY THE OFFICE OF PLANNING AND ZONING, EST

SUNSET VALLEY SECTION 2 LOT 8

1050 SUNSET VALLEY DR.



SEPTIC SYSTEM ELEVATIONS

HOUSE OUT-102.95

TANK IN 102.75

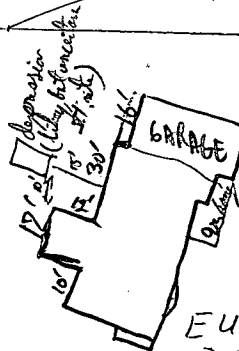
TANK OUT 102.50

DIST. BOX IN 102.30

DIST. BOX OUT 102.20

TRANCH IN 102.10

*Under transform
private septic tank
area (No clearance work)
for slight depression
sufficient to collect
debris is existing +
admission is already
under roof + supported
+ Trench is supported
OK release B.P.*



DAY ROAD

EUGENE F. BURGESS
217 ROLLINGFIELD RD.
BALTIMORE, MD. 21228

TAX MAP #9 PARCEL 36

744-0534