

C1 46069

SEQUENCE NO.
(MDE USE ONLY)STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE TYPETHIS REPORT MUST BE SUBMITTED WITHIN
45 DAYS AFTER WELL IS COMPLETED.COUNTY
NUMBER1 2 3 6
(THIS NUMBER IS TO BE PUNCHED
IN COLS. 3-6 ON ALL CARDS)

ST/CO USE ONLY

DATE Received

MM DD YY
04 05 17

DATE WELL COMPLETED

MM DD YY
3-13-17

Depth of Well

22 600 26
(TO NEAREST FOOT)

PERMIT NO.

FROM "PERMIT TO DRILL WELL"

40-17-0010

OWNER BOARMAN George

WELL SITE ADDRESS last name Andrea Drive

SUBDIVISION Paupers Folly

SECTION

TOWN WEST FRIENDSHIP

LOT 1

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		check if water bearing
	FROM	TO	
Top Soil	0	2	
Brown clay	2	8	
Brown Mica	8	30	✓
Gray Mica	30	44	✓
Brown Mica	44	45	✓
Gray Mica	45	350	✓
opening	350	351	✓
Gray Mica	351	600	

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)yes no
Y N
44 44

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 45 46 5 NO. OF POUNDS 45 46 250

GALLONS OF WATER 115

DEPTH OF GROUT SEAL (to nearest foot)

from 48 TOP 52 ft. to 54 BOTTOM 58 ft.
(enter 0 if from surface)

CASING RECORD

casing
types
insert
appropriate
code
belowST CO
STEEL CONCRETE
PL OT
PLASTIC OTHERMAIN CASING TYPE ST
Nominal diameter top (main) casing (nearest inch)! 6
Total depth of main casing (nearest foot) 40OTHER CASING (if used)
diameter depth (feet)
inch from to

SCREEN RECORD

screen type
or open hole
(insert
appropriate
code
below)ST BR HO
STEEL BRASS OPEN
HOLE
PL OT
PLASTIC OTHERC 2 DEPTH (nearest ft.)
1 2 110 39 600
E 1 8 9 11 15 17 21
A 2 23 24 26 30 32 36
C 3 38 39 41 45 47 51
S
R
E
N
SLOT SIZE 1 2 3
DIAMETER OF SCREEN (NEAREST INCH)
56 60
from toGRAVEL PACK
IF WELL DRILLED
WAS FLOWING WELL
INSERT F IN BOX 68MDE USE ONLY
(NOT TO BE FILLED IN BY DRILLER)
T (E.R.O.S.) W Q70 72 74 75 76
TELESCOPE LOG OTHER DATA
CASING INDICATOR

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min.) 5.5

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 14 ft.

WHEN PUMPING 103 ft.

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 INSTALLED PUMP (CIRCLE) (YES or NO) YES NO

IF DRILLER INSTALLS PUMP, THIS SECTION
MUST BE COMPLETED FOR ALL WELLS.TYPE OF PUMP INSTALLED
PLACE (A,C,J,P,R,S,T,O)
IN BOX 29.CAPACITY:
GALLONS PER MINUTE
(to nearest gallon) 31 35

PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH
(nearest ft.) 43 47CASING HEIGHT (circle appropriate box
and enter casing height)
+ above } LAND SURFACE (nearest foot)
- below } 49 51LATITUDE 39.273407
LONGITUDE 76.981616
(DEFAULT COORD. WGS 84)Pursuant to §10-624 of the State Govt. Article of
the Maryland Code personal info. requested on
this form is used in processing this form pursuant
to COMAR 26.04.04. Failure to provide the info.
may result in this form not being processed. You
have the right to inspect, amend, or correct this
form. The Maryland Department of the
Environment is subject to the Maryland Public
Information Act. This form may be made
available on the Internet via MDE's website and is
subject to inspection or copying, in whole or in
part, by the public and other governmental
agencies, if not protected by federal or state law.

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED

yes no
Y N

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
WELLI HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN
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
HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY
KNOWLEDGE.

DRILLERS LIC. NO. 1 MWD 040

DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. 1 JSD 038

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

B 1	SEQUENCE NO. (MDE USE ONLY) <div style="font-size: 2em; font-weight: bold;">47503</div>	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type <div style="font-size: 1.5em;">560516</div>	STATE PERMIT NUMBER <div style="font-size: 1.5em;">H0 - 17 - 0010</div>
Date Received (APA) <div style="font-size: 1.5em;">01/23/17</div>		LOCATION OF WELL <div style="font-size: 1.5em;">Howard</div>	
OWNER INFORMATION 8 MM DD YY 13 <div style="font-size: 1.5em;">BORMAN Boorman</div> <div style="font-size: 1.5em;">GEORGE</div>		8 COUNTY <div style="font-size: 1.5em;">Paupers Folly</div>	
15 Last Name Owner First Name 34 <div style="font-size: 1.5em;">3625 ANDREA DRIVE</div>		23 SUBDIVISION <div style="font-size: 1.5em;">1</div>	
36 Street or RFD 55 <div style="font-size: 1.5em;">WEST FRIENDSHIP, MD 21794</div>		SECTION 44 46 LOT 48 50 <div style="font-size: 1.5em;">West Friendship</div>	
57 Town 70 State 72 Zip 76 		52 NEAREST TOWN <div style="font-size: 1.5em;">71</div>	
DRILLER INFORMATION <div style="font-size: 1.5em;">George F. Easterday</div> <div style="font-size: 1.5em;">MW D 040</div>		11 STREET ADDRESS 30 <div style="font-size: 1.5em;">Andrea Drive</div>	
Driller's Name 76 License No. 81 <div style="font-size: 1.5em;">L. Franklin Easterday, Inc.</div>		ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) <div style="text-align: center;"> <input checked="" type="checkbox"/> NORTH <input type="checkbox"/> WEST <input type="checkbox"/> EAST <input type="checkbox"/> SOUTH </div>	
Firm Name <div style="font-size: 1.5em;">9265 Brown Church Rd., Mt. Airy, Md. 21771</div>		34 37 <div style="font-size: 1.5em;">2250</div>	
Address <div style="font-size: 1.5em;">George F. Easterday</div>		DISTANCE FROM ROAD ENTER FT OR MI 38 39 <div style="font-size: 1.5em;">1/23/2017</div>	
Signature Date 		TAX MAP: 22 BLK: 8 PARCEL 116	
B 2	WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 8 500 ¹² AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 20		
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, DEWATERING <input type="checkbox"/> PUBLIC WATER SUPPLY WELL <input type="checkbox"/> TEST, OBSERVATION, MONITORING <input type="checkbox"/> OPEN LOOP GEOTHERMAL <input type="checkbox"/> CLOSED LOOP GEOTHERMAL			
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL <div style="font-size: 1.5em;">Howard</div> <div style="font-size: 1.5em;">COUNTY NO. 13</div> <div style="font-size: 1.5em;">STATE SIGNATURE</div> <div style="font-size: 1.5em;">DATE ISSUED 2/7/17</div> <div style="font-size: 1.5em;">CO SIGNATURE</div> <div style="font-size: 1.5em;">EXP. DATE 2/7/18</div> <div style="font-size: 1.5em;">DON: 3/8/17 (SC) DOG: 3/13/17 (SC) DOY: 3/22/17 (SC)</div>			
APPROXIMATE DEPTH OF WELL 24 300 28 FEET 		PROPOSED LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURES SUCH AS BUILDINGS, SEPTIC SYSTEM, ROADS AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCE MEASUREMENTS TO WELL <div style="font-size: 1.5em;">3/8</div> <div style="font-size: 1.5em;">40' steel casing at 160'</div> <div style="font-size: 1.5em;">only a little water</div> <div style="font-size: 1.5em;">JULIA MANOR Way</div> <div style="font-size: 1.5em;">300'</div> <div style="font-size: 1.5em;">225</div> <div style="font-size: 1.5em;">3/22</div> <div style="font-size: 1.5em;">pump @ 350' ~5.5 gpm</div> <div style="font-size: 1.5em;">collected -14' static</div> <div style="font-size: 1.5em;">sodium, Cl -103' meas. +</div> <div style="font-size: 1.5em;">started pump @ 6:30 am</div> <div style="font-size: 1.5em;">@ 10:15 am + TDS samples</div>	
APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH 		Pursuant to § 10-624 of the State Govt. Article of the Maryland Code, personal info requested on this form is used in processing this form pursuant to COMAR 26.04.04. Failure to provide the info may result in this form not being processed. You have the right to inspect, amend, or correct this form. The Maryland Department of the Environment is subject to the Maryland Public Information Act. This form may be made available on the Internet via MDE's website and is subject to inspection or copying, in whole or in part, by the public and other governmental agencies, if not protected by federal or State Law.	
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			
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 <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="checkbox"/> 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 (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER - - - - - G - - - - - PERMIT No. H0 - 17 - 0010			

SPECIAL CONDITIONS

NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

The Health Dept. must receive advance notification of all drilling, grouting, + yield tests. req'd at yield.

Sodium, chloride + TDS sample @ COUNTY

Page of

Date 3-22-17 - Wednesday

Review

FIELD DATA SHEET
HYDROGEOLOGIC AREA (3) WELL YIELD TEST

Maryland Well Permit No. HO-17-0010 Election District 1

Location of Property (road) Andrea Dr.

Subdivision Paupers 744 Lot 1 Block Plat Sec.

Well Driller Easterday Owner George Boorman

Depth of Well. 0 600 2 1/2

Distance of Measuring Point (M.P.) above ground 16"

Static Water Level (S.W.L.) below M.P. 14 feet

I. High Rate Pumping -- reservoir drawdown

Time pump started 6:30

Pumping rate 17 cpm

Total time 15 min to reach pumping water level 103 ft. below M.P.

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

[illegible]

**HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
WELL & SEPTIC PROGRAM
TEL: (410)313-1771 FAX: (410)313-2648**

Information Form for the Installation of the Well Pump, Pitless Adapter, and Supply Line

NOTE: The installer is responsible for requesting an inspection prior to 9 am on the day of the desired inspection. No work is to be covered until approved by the Health Department. All installations must comply with the National Standard Plumbing Code (NSPC, as amended locally) and COMAR 26.04.04 (MD Well Construction Regulations). Submission of a complete form is required prior to Use and Occupancy approval.

Company Name: Fooge's Well Pumps & Water Treatment, LLC Telephone #: 410 795 3670
Address: 5300 Brent Rd
Sykesville, MD 21784

(Must circle one) Licensed Plumber ☒ Licensed Well Driller ☒ Licensed Well Pump Installer

License # and name of individual responsible for the field installation:

Name (Print): David C. Fooge License #: MSD2226

*A licensed individual must perform the actual installation. Apprentices must be under the supervision of a licensed journeyman or master plumber, pump installer or well driller. Licensees may be subjected to field verification. Unlicensed individuals may be reported to the appropriate licensing agency.

Name of Property Owner: NWR Inc Telephone #: _____
Subdivision: Beverly Estates Lot #: 1 Well Tag #: HO-17-0010
Site Address: 13711 Terapond Dr
West Friendship MD 21794

<u>Submersible Pump Data</u>	<u>Pitless Adapter</u>	<u>Well Cap and Electric Conduit</u>
Make: <u>Grundfos</u>	Make: <u>Campbell</u>	Two piece watertight cap: <u>YES</u>
Model #: <u>7PS10422</u>	Model #: <u>NA</u>	Screened, vented well cap: <u>YES</u>
Pump Capacity: <u>7</u> GPM	Depth: <u>36"</u> (36" min)	Cap secured to casing: <u>YES</u>
Well Yield: <u>5.5</u> GPM	NSF/WSC approved: <u>YES</u>	Conduit min 1.5" B.G.: <u>YES</u>
Depth of well encountered at time of pump installation: <u>600' (est)</u>		Conduit secured to well cap: <u>YES</u>

If pump capacity exceeds well yield, a low water cutoff switch is required by NSPC 1990 Section 17.4.4
Torque wrenches, cable guards, or other acceptable method used—Must circle one
Safety rope, if used, attached to Incess rope adapter or other acceptable method inside of well casing. NA

<u>Pipe to house</u>	<u>House Connection</u>
Type: <u>1" poly pipe</u>	PVC sleeve to undisturbed soil at wall penetration: <u>YES</u>
PSI: <u>200</u> (160 min)	Length of sleeve (5' minimum from foundation): <u>12'</u>
Depth of supply line: <u>36"</u> (36" min)	Sleeve sealed properly: <u>YES</u>

The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Signature of company representative responsible for installation: David C. Fooge Date: 6/3/2019

For Health Department Use Only - Not to be completed by installer

Date Insp Requested: <u>06/04/2019</u>	Date Insp. Approved: <u>06/04/2019</u>	Inspector: <u>[Signature]</u>
Inspection Data: Pitless adapter watertight & water supply line at least 36" below grade	<u>✓</u>	40" <u>06/04/2019</u> <u>[Signature]</u>
Two piece cap installed and attached to casing securely	<u>✓</u>	
Elec. conduit extends at least 18" below grade/attached to cap properly	<u>✓</u>	36" <u>06/04/2019</u> <u>[Signature]</u>
Safety rope not outside of well cap/casing	<u>✓</u>	
Correct well tag attached properly and casing 8" above finished grade	<u>✓</u>	14" <u>06/04/2019</u> <u>[Signature]</u>
Water supply line sleeved adequately at house connection	<u>✓</u>	9.5' <u>06/04/2019</u> <u>[Signature]</u>
Adequate grout observed below pitless adapter	<u>✓</u>	

BACK

EX House
06/04/2019

13.5

INTERIM CERTIFICATE OF POTABILITY

Expiration Date – APRIL 4, 2020

October 4, 2019

Homeowner
13711 Tergeo Drive
West Friendship, MD 21794

RE: Belvedere Estates, Lot 1
13711 Tergeo Drive
Building Permit: B19000812
Well Permit: HO-17-0010

Dear Homeowner:

This is to advise you that the septic system installation and water well construction for the above referenced property have been inspected and approved. Final approval of the septic system was granted on **6/20/2019**. Final approval of the well line connection to the dwelling was granted on **6/4/2019**. The well construction was completed on **3/13/2017**. Water samples were collected on **7/10/2019, 7/16/2019, 7/22/2019, 8/6/2019, 9/9/2019, 9/30/2019**.

The water sample results indicate that the water samples submitted for testing were free of coliform and fecal coliform bacteria at the time of sampling and are bacteriologically safe for drinking. This certifies that the initial sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under well permit HO-17-0010. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies.

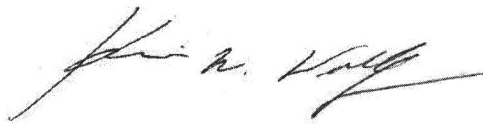
This Interim Certificate of Potability will expire **six months** from the date of issuance. Submission of a second bacteriological test indicating the water is free of coliform and fecal coliform bacteria is required prior to the expiration date, after which time a Final Certificate of Potability will be issued. **Failure to submit an additional sample and obtain a Final Certificate of Potability will result in a Notice of Violation and is punishable as a misdemeanor under the *Annotated Code of Maryland, Environment Article, 9-1311*, subject to a fine of up to \$500 or imprisonment not to exceed three months.**

Please contact (410) 313-1773 to schedule a final water sample appointment or contact a Maryland certified water laboratory to schedule a water sample. A list of laboratories certified by the state of Maryland may be found at the following website:
<http://www.mde.state.md.us/assets/document/WSP-Labs-2010apr16.pdf>

Maura J. Rossman, M.D., Health Officer

In closing, please refer to our "[Homeowner Fact Sheet](#)" which illustrates a better understanding for your Onsite Sewage Disposal System. You will also find a link to Maryland Department of the Environments website which describes in further detail operation and maintenance of your septic system.

Approving Authority,



Kevin M. Wolf, LEHS, R.S./REHS, Supervisor
Groundwater Management Section
Well & Septic Program

cc: Howard County Dept. of Inspections, Licenses, and Permits
Community Hygiene Program
File

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

1413 Old Taneytown Rd. Westminster, MD (410) 848-1014 (410) 876-4554 FAX (410) 848-0298

REPORT OF ANALYSIS

Laboratory ID #: 133157 Account #: 1933
Reference: Belvedere Estates Lot 1 (Model) Company: Fogles Well Pump & Treatment
Location: 13711 Tergeo Drive Requested By: Dave Fogle
West Friendship, MD 21794 Source: Well Water
Date/ Time Collected: 9/30/2019 1022 Site: Kitchen Sink Tap
Date/Time Rec'd: 9/30/2019 1120 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 7.0
Collected By: B. Wilkerson 9315BW Well #: HO-17-0010

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	10/1/2019 / 0830 / CRS
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	10/1/2019 / 0830 / CRS

NOTES

- 1 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 2 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 3 Sample collected by client, analyzed as received
- 4 ND:None Detected
- 5 Visual well check: Sealed, vented cap
- 6 pH and Chlorine level tested in lab (pH tested after recommended holding time)

Reason for Test : Use & Occupancy

Building Permit # : 19000812

Date Reported: 10/1/2019

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

1413 Old Taneytown Rd. Westminster, MD (410) 848-1014 (410) 876-4554 FAX (410) 848-0298

REPORT OF ANALYSIS

Laboratory ID #: 133040
Reference: Belvedere Estates Lot 1 (Model)
Location: 13711 Tergeo Drive
West Friendship, MD 21794
Date/ Time Collected: 9/24/2019 0755
Date/Time Rec'd: 9/24/2019 1010
Chlorine ppm: Free: ND Total: ND
Collected By: J. Evans 7411JE
Account #: 1933
Company: Fogles Well Pump & Treatment
Requested By: Dave Fogle
Source: Well Water
Site: Kitchen Sink Tap
Treatment: None
pH: 6.8
Well #: HO-17-0010

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	12.4	MPN/ 100 ml	<1.0	SM20 9223B	9/25/2019 / 0900 / CRS
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	9/25/2019 / 0900 / CRS

NOTES

- 1 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 2 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 3 Sample collected by client, analyzed as received
- 4 ND:None Detected
- 5 Visual well check: Sealed, vented cap
- 6 pH and Chlorine level tested in lab (pH tested after recommended holding time)

Reason for Test : Use & Occupancy

Building Permit # : 19000812

Date Reported: 9/25/2019

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

1413 Old Taneytown Rd. Westminster, MD (410) 848-1014 (410) 876-4554 FAX (410) 848-0298

REPORT OF ANALYSIS

Laboratory ID #: 132689 Account #: 1933
Reference: Belvedere Estates Lot 1 (Model) Company: Fogles Well Pump & Treatment
Location: 13711 Tergeo Drive Requested By: Dave Fogle
West Friendship, MD 21794 Source: Well Water
Date/ Time Collected: 9/9/2019 1205 Site: Kitchen
Date/Time Rec'd: 9/9/2019 1355 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 6.9
Collected By: D. Fogle 8914DF Well #: HO-17-0010

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	>200.5	MPN/ 100 ml	<1.0	SM20 9223B	9/10/2019 / 0830 / CRS
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	9/10/2019 / 0830 / CRS

↳ FYI - well was reworked
(Deepened casing) and super chlorinated
after this sample.

NOTES

- 1 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 2 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 3 Sample collected by client, analyzed as received
- 4 ND:None Detected
- 5 Visual well check: Sealed, vented cap
- 6 pH and Chlorine level tested in lab (pH tested after recommended holding time)

Reason for Test : Use & Occupancy

Building Permit # : 19000812

Date Reported: 9/10/2019

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

1413 Old Taneytown Rd. Westminster, MD (410) 848-1014 (410) 876-4554 FAX (410) 848-0298

REPORT OF ANALYSIS

Laboratory ID #:	131861	Account #:	1933
Reference:	Belvedere Estates (Model)	Company:	Fogles Well Pump & Treatment
Location:	13711 Tergeo Drive	Requested By:	Dave Fogle
	West Friendship, MD 21794	Source:	Well Water
Date/ Time Collected:	8/6/2019 1330	Site:	Kitchen Sink
Date/Time Rec'd:	8/6/2019 1435	Treatment:	None
Chlorine ppm:	Free: ND Total: ND	pH:	6.1
Collected By:	J. Evans 7411JE	Well #:	HO-17-0010

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	200.5	MPN/ 100 ml	<1.0	SM20 9223B	8/7/2019 / 1000 / RER
Bacteria, E. coli, MPN	1.0	MPN/ 100 ml	<1.0	SM20 9223B	8/7/2019 / 1000 / RER

NOTES

- 1 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 2 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 3 ND:None Detected
- 4 Visual well check: Sealed, vented cap
- 5 pH and Chlorine level tested in lab (pH tested after recommended holding time)

Reason for Test : Use & Occupancy
Building Permit # : 19000812

Date Reported: 8/7/2019

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

1413 Old Taneytown Rd. Westminster, MD (410) 848-1014 (410) 876-4554 FAX (410) 848-0298

REPORT OF ANALYSIS

Laboratory ID #: 131521 Account #: 1933
Reference: Belvedere Estates (Model) Company: Fogles Well Pump & Treatment
Location: 13711 Tergeo Drive Requested By: Dave Fogle
West Friendship, MD 21794 Source: Well Water
Date/ Time Collected: 7/22/2019 1115 Site: Kitchen Sink Tap
Date/Time Rec'd: 7/22/2019 1150 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 6.3
Collected By: J. Evans 7411JE Well #: HO-17-0010

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	34.4	MPN/ 100 ml	<1.0	SM20 9223B	7/23/2019 / 1030 / RER
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	7/23/2019 / 1030 / RER

NOTES

- 1 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 2 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 3 Sample collected by client, analyzed as received
- 4 ND:None Detected
- 5 Visual well check: Sealed, vented cap
- 6 pH and Chlorine level tested in lab (pH tested after recommended holding time)

Reason for Test : Use & Occupancy
Building Permit # : 19000812

Date Reported: 7/23/2019

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

1413 Old Taneytown Rd. Westminster, MD (410) 848-1014 (410) 876-4554 FAX (410) 848-0298

REPORT OF ANALYSIS

Laboratory ID #: 131423 Account #: 1933
Reference: Belvedere Estates (Model) Company: Fogles Well Pump & Treatment
Location: 13711 Tergeo Drive Requested By: Dave Fogle
West Friendship, MD 21794 Source: Well Water
Date/ Time Collected: 7/16/2019 0730 Site: Kitchen Sink Tap
Date/Time Rec'd: 7/16/2019 1050 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 6.4
Collected By: B. Wilkerson 9315BW Well #: HO-17-0010

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	28.8	MPN/ 100 ml	<1.0	SM20 9223B	7/17/2019 / 0915 / RER
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	7/17/2019 / 0915 / RER

NOTES

- 1 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 2 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 3 Sample collected by client, analyzed as received
- 4 ND:None Detected
- 5 Visual well check: Sealed, vented cap
- 6 pH and Chlorine level tested in lab (pH tested after recommended holding time)

Reason for Test : Use & Occupancy

Building Permit # : 19000812

Date Reported: 7/17/2019

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

1413 Old Taneytown Rd. Westminster, MD (410) 848-1014 (410) 876-4554 FAX (410) 848-0298

REPORT OF ANALYSIS

Laboratory ID #: 131339 Account #: 1933
Reference: Belvedere Estates (Model) Company: Fogles Well Pump & Treatment
Location: 13711 Tergeo Drive Requested By: Dave Fogle
West Friendship, MD 21794 Source: Well Water
Date/ Time Collected: 7/10/2019 1615 Site: Kitchen Sink Tap
Date/Time Rec'd: 7/11/2019 0854 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 6.2
Collected By: B. Wilkerson 9315BW Well #: HO-17-0010

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	200.5	MPN/ 100 ml	<1.0	SM20 9223B	7/12/2019 / 0930 / CRS
Bacteria, E. coli, MPN	3.1	MPN/ 100 ml	<1.0	SM20 9223B	7/12/2019 / 0930 / CRS
Nitrate	2.03	mg/L	10	601	7/11/2019 / 0915 / CRS
Turbidity	5.15	NTU	<10	SM20 2130B	7/11/2019 / 0920 / CRS
Sand	NS	mg/L	5	Visual/Gravimetric	7/11/2019 / 0920 / CRS

NOTES

- 1 mg/L = milligrams per liter (also, parts per million)
- 2 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 3 NS = None Seen (NS indicates less than 5 mg/L)
- 4 NTU = Nephelometric Turbidity Units
- 5 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 6 Sample collected by client, analyzed as received
- 7 ND:None Detected
- 8 Visual well check: Sealed, vented cap
- 9 pH and Chlorine level tested in lab (pH tested after recommended holding time)

Reason for Test : Use & Occupancy

Building Permit # : 19000812

Date Reported: 7/12/2019

Wolf, Kevin

From: Wolf, Kevin
Sent: Wednesday, July 24, 2019 11:47 AM
To: Carrie Condon
Cc: Clint Cagle; Jarkiewicz, Brian (bjarkiew@nvrinc.com)
Subject: RE: Belvedere Estates Model- UV Light Request
Attachments: Untitled_2019072411284248.pdf

Carrie,

Can you provide us with a letter the 'super' chlorination process you did on this well. You say you checked the casing, does this mean you camera'd the well? I am attaching the well completion report (WCR) and the yield test for your review. Have Allen take a look. What I am concerned with here is that the well being 600ft deep poses the issue of trying to force the super chlorinated water down the well while displacing the already existing water in the column. My other concern here is that there may be a "lens" at 44ft indicated on the WCR that was not sealed off. This *could* be a problem.... I am wondering if we seal this fracture lens off and rechlorinate, we may see a drop in bacteria if any at all.

Clint/Brian, this may be something to go back to Easterday (original well driller) and have them assess this issue and maybe see what their input is. The health department is not obligated under COMAR (as you know) to issue a permanent deviation for bacteria on a new well. There is more of a leverage here to have the well sealed.

There are some things to look at here (as mentioned above) so see what you can find out. The ICOP cannot be issued here anyway until I have an approved/signed shared septic permit. Brian, if you remember from our start-up inspection with Hydroterra and DPW on the shared system, there a few items on the checklist to correct before we could grant approval/final approval. I have not yet heard back from Hydroterra or anyone at that so this may be something that has not yet been completed.

Kevin

From: Carrie Condon <Carrie@foglesinc.com>
Sent: Tuesday, July 23, 2019 11:30 AM
To: Wolf, Kevin <KWolf@howardcountymd.gov>
Cc: Clint Cagle <ccagle@nvrinc.com>
Subject: Belvedere Estates Model- UV Light Request

[Note: This email originated from outside of the organization. Please only click on links or attachments if you know the sender.]

Hey Kevin!

I just wanted to confirm that we are able to install an ultra violet light system at the Belvedere Estates Model Home. We have followed the chlorination/sanitation protocol but are still coming up with a little bit of bacteria and would like to move forward with having a UV Light installed.

The dates of chlorination:

6/3/19

7/12/19

Force Chlorination-7/17/19

The results have gone from 200, 28 to 34 on the last one (taken yesterday).

The guys have checked the well casing etc and everything looks fine!

Please let me know as soon as possible if we have the go ahead to install this UV light so we can get the builders their ICOP.

Thank you!!

Carrie Condon

Fogle's Well Pump & Water Treatment, LLC

24 HR EMERGENCY SERVICE! 410-795-5670

www.fogleswellpump.com

"LIKE" us on Facebook!!

Williams, Jeffrey

From: Steven Krieg -MDE- <steven.krieg@maryland.gov>
Sent: Friday, June 14, 2019 7:06 AM
To: Naomi Howell -MDE-
Cc: Williams, Jeffrey; Davis, Michael J; Nixon, Bert F
Subject: Re: variance request

[Note: This email originated from outside of the organization. Please only click on links or attachments if you know the sender.]

I'll approve the variance and send to Jeff.

Thanks

On Thu, Jun 13, 2019 at 6:53 PM Naomi Howell -MDE- <naomi.howell@maryland.gov> wrote:

Jeff

I agree I do not like after the fact variances or forced variances. In this case it seems reasonable to grant the variance in that the cost of abandonment and re-drilling a well for five feet will seem extreme.

Steve - Can you sign the variance? If not, I can sign it Monday and email it back to you.

Let me know.

Nony

Nony Howell, Chief
Onsite Systems Division
Water and Science Administration
Maryland Department of the Environment
410-537-3779

On Tue, Jun 11, 2019 at 1:27 PM Williams, Jeffrey <jewilliams@howardcountymd.gov> wrote:

Hi Nony. We have a project here that is requesting a variance. I'm going straight to you because it has a high likelihood of being challenged, so we might as well resolve it at the top. The situation is this:

We got a building permit application to build a new house on a lot in a new subdivision. It is served by a shared sewage system and well. The plot plan with the building permit showed a house with a small porch just outside of the 30' setback to the existing well (see attachment A). We approved the permit based on that house location. Unbeknownst to us, they then changed the house model and staked out the foundation of this new house model, poured the foundation, and came to us with the foundation wall check to get a septic permit for the shared sewer connection. It was then that we saw the poured foundation was 25' from the well at the closest corner (attachment B). They explained that the close corner is the poured foundation slab for a porch that extends to the house corner.

We did not want to grant approval for that deviation given that it is within a COMAR setback, it wasn't what we originally approved, and if they had done things in the right sequence, they would have had plenty of room on the lot

to move the house 5'. That said, it was a mistake on the part of the engineer who is usually pretty good, the close corner is a porch foundation, and the only recourse is to abandon the well and drill a new one since the house buyer doesn't want to change house model from what they purchased. So, they are requesting a variance to the 30' setback. I've attached their variance request as attachment C. Let me know if you need more info or if you have any questions. Thanks

Jeff Williams

Program Supervisor, Well & Septic Program

Bureau of Environmental Health

Howard County Health Dept.

410-313-4261

jewilliams@howardcountymd.gov

CONFIDENTIALITY NOTICE

This message and the accompanying documents are intended only for the use of the individual or entity to which they are addressed and may contain information that is privileged, confidential, or exempt from disclosure under applicable law. If the reader of this email is not the intended recipient, you are hereby notified that you are strictly prohibited from reading, disseminating, distributing, or copying this communication. If you have received this email in error, please notify the sender immediately and destroy the original transmission.

[Click here](#) to complete a three question customer experience survey.

--

Steven R. Krieg, LEHS, REHS/RS
Regional Consultant for Mid & Western Maryland

On-site Systems Division
Wastewater Permits Program
Water and Science Administration
Maryland Department of the Environment
1800 Washington Boulevard, Suite 455
Baltimore, MD 21230-1708

(410) 537-3680 (Office)
(410) 537-3163 (FAX)

Williams, Jeffrey

From: Williams, Jeffrey
Sent: Tuesday, June 11, 2019 1:27 PM
To: Naomi Howell -MDE- (naomi.howell@maryland.gov); Steven Krieg -MDE- (steven.krieg@maryland.gov)
Cc: Davis, Michael J; Nixon, Bert F
Subject: variance request
Attachments: variance attachment A.pdf; variance attachment B.pdf; variance attachment C.pdf

Hi Nony. We have a project here that is requesting a variance. I'm going straight to you because it has a high likelihood of being challenged, so we might as well resolve it at the top. The situation is this:

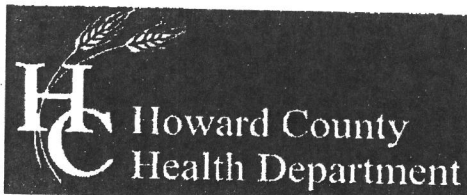
We got a building permit application to build a new house on a lot in a new subdivision. It is served by a shared sewage system and well. The plot plan with the building permit showed a house with a small porch just outside of the 30' setback to the existing well (see attachment A). We approved the permit based on that house location. Unbeknownst to us, they then changed the house model and staked out the foundation of this new house model, poured the foundation, and came to us with the foundation wall check to get a septic permit for the shared sewer connection. It was then that we saw the poured foundation was 25' from the well at the closest corner (attachment B). They explained that the close corner is the poured foundation slab for a porch that extends to the house corner.

We did not want to grant approval for that deviation given that it is within a COMAR setback, it wasn't what we originally approved, and if they had done things in the right sequence, they would have had plenty of room on the lot to move the house 5'. That said, it was a mistake on the part of the engineer who is usually pretty good, the close corner is a porch foundation, and the only recourse is to abandon the well and drill a new one since the house buyer doesn't want to change house model from what they purchased. So, they are requesting a variance to the 30' setback. I've attached their variance request as attachment C. Let me know if you need more info or if you have any questions. Thanks

Jeff Williams
Program Supervisor, Well & Septic Program
Bureau of Environmental Health
Howard County Health Dept.
410-313-4261
jewilliams@howardcountymd.gov

CONFIDENTIALITY NOTICE

This message and the accompanying documents are intended only for the use of the individual or entity to which they are addressed and may contain information that is privileged, confidential, or exempt from disclosure under applicable law. If the reader of this email is not the intended recipient, you are hereby notified that you are strictly prohibited from reading, disseminating, distributing, or copying this communication. If you have received this email in error, please notify the sender immediately and destroy the original transmission.



Bureau of Environmental Health
8930 Stanford Boulevard, Columbia, MD 21045
Main: 410-313-2640 | Fax: 410-313-2648
TDD 410-313-2323 | Toll Free 1-866-313-6300
www.hchealth.org
Facebook: www.facebook.com/hocohealth
Twitter: HowardCoHealthDep

Maura J. Rossman, M.D., Health Officer

APPLICATION FOR VARIANCE
TO COMAR ONSITE WATER/SEWER FOR MDE APPROVAL

Date Submitted

6/4/19

13711 Tergeo Drive

Property Address

Belvedere Estates

Subdivision

1

Lot

22

Tax Map

8

Grid

116

Parcel

600110

Tax Account #

Provide a brief site history including previously submitted and active plans with the Health Department or the County (subdivision plans, perc test applications, Building Permit applications):

Front porch for the Marymount house type, Elevation L extends to the front left corner of the house foundation wall. The house foundation wall is 31 ft. from existing well. The front left corner of porch is 25.8 ft from existing well.

In the area below, list the specific section of the Code of Maryland Regulations (COMAR) to which a variance is being requested and provide a brief summary of the regulation and an explanation of why the variance is being requested (Attach a separate sheet if necessary).

Regulation Section

1. 26.04.04.04.B.(2)(c)

Summary and Explanation

A proposed location for a water supply well shall be at least 30 feet from a foundation.

2.

Property Owner's Signature *Buddy Peet* NV Homes

Health Department Use Only

Reviewed by

J. Williams
HCHD Staff

6/7/19
Date

Recommendation:

☐

Recommended

☐

Not Recommended

HCHD Supervisor

Date

Comments/Conditions:

Approved by:

MDE Representative

Date

Oswald, Hank

From: Tony Fertitta <tonyf@fcc-eng.com>
Sent: Tuesday, March 19, 2019 8:27 AM
To: Oswald, Hank
Subject: RE: Belvedere Estates Plan_13711 Tergeo Drive

[Note: This email originated from outside of the organization. Please only click on links or attachments if you know the sender.]

That is fine

From: Oswald, Hank <hoswald@howardcountymd.gov>
Sent: Tuesday, March 19, 2019 8:23 AM
To: Tony Fertitta <tonyf@fcc-eng.com>
Subject: RE: Belvedere Estates Plan_13711 Tergeo Drive

Tony:

I suppose I could label them DW-1 and DW-2.

Let me know.

Hank

From: Tony Fertitta <tonyf@fcc-eng.com>
Sent: Tuesday, March 19, 2019 8:19 AM
To: Oswald, Hank <hoswald@howardcountymd.gov>
Subject: RE: Belvedere Estates Plan_13711 Tergeo Drive

[Note: This email originated from outside of the organization. Please only click on links or attachments if you know the sender.]

Yes

From: Oswald, Hank <hoswald@howardcountymd.gov>
Sent: Tuesday, March 19, 2019 7:57 AM
To: Tony Fertitta <tonyf@fcc-eng.com>
Subject: Belvedere Estates Plan_13711 Tergeo Drive

Hi Tony:

The plan shows two small rectangles. One rectangle with a line connected to it and one without. What do they represent? Drywells?

Thanks,

Hank

Hank Oswald

Licensed Environmental Health Specialist
Howard County Health Department
Bureau of Environmental Health
Well & Septic Program
8930 Stanford Boulevard
Columbia, MD 21045
410.313.1786 (Office)
hoswald@howardcountymd.gov

CONFIDENTIALITY NOTICE

This message and the accompanying documents are intended only for the use of the individual or entity to which they are addressed and may contain information that is privileged, confidential, or exempt from disclosure under applicable law. If the reader of this email is not the intended recipient, you are hereby notified that you are strictly prohibited from reading, disseminating, distributing, or copying this communication. If you have received this email in error, please notify the sender immediately and destroy the original transmission.

Oswald, Hank

From: Oswald, Hank
Sent: Tuesday, March 12, 2019 1:51 PM
To: Tony Fertitta
Subject: Belvedere Estates_Lot 1

Tony:

Eliminate note 1 from plan. Add well field verification note to plan. Also add bedroom limitation note. I believe it's 5 bedrooms.

Thanks,

Hank

Hank Oswald
Licensed Environmental Health Specialist
Howard County Health Department
Bureau of Environmental Health
Well & Septic Program
8930 Stanford Boulevard
Columbia, MD 21045
410.313.1786 (Office)
hoswald@howardcountymd.gov

CONFIDENTIALITY NOTICE

This message and the accompanying documents are intended only for the use of the individual or entity to which they are addressed and may contain information that is privileged, confidential, or exempt from disclosure under applicable law. If the reader of this email is not the intended recipient, you are hereby notified that you are strictly prohibited from reading, disseminating, distributing, or copying this communication. If you have received this email in error, please notify the sender immediately and destroy the original transmission.

Maura J. Rossman, M.D., Health Officer

February 23, 2018

Homeowner
13711 Tergeo Drive
West Friendship, MD 21794

Dear Homeowner,

The Health Department received results from the testing for sodium, chloride, and total dissolved solids (TDS) from the well on your property.

Elevated sodium levels in drinking water may affect individuals on low-salt diets. The action level for sodium is 20 milligrams per liter (mg/L); **sodium from your well measured 2.99 mg/L.**

Chloride and TDS are both considered secondary contaminants, meaning high concentrations may affect taste, color, odor, or corrosive properties of water but present no risk to health. The secondary maximum contaminant level for chloride is 250 mg/L; **chloride from your well measured 27 mg/L.** The secondary maximum contaminant level for TDS is 500 mg/L; **TDS from your well measured 168 mg/L.**

Feel free contact me at the number or email below with any questions regarding the results of water sampling.

Sincerely,



Sarah Collins, L.E.H.S.
Howard County Health Department
Well & Septic Program
SCollins@howardcountymd.gov
410-313-6287

Cc: Community Hygiene Program
File

Send Report To: Bert Nixon
Howard Co. Health Dept.
Bureau of Environmental Health
8930 Stanford Blvd.
G

State of Maryland
DHMH - Laboratories Administration
Division of Environmental Chemistry
TRACE METALS LABORATORY
1770 Ashland Avenue
Baltimore, Maryland 21205

Lab No. Date Received



E17003703001

Received: 03/23/2017

Metals

HO-17-0010

Columbia, MD 21045

LABORATORY ANALYSIS REQUEST

Please Print

Digest

Sample ID No: HO-17-0010 Site Name: Paupers Folly - Lot 1 County: Howard

Sample Source: Andrea Drive Dayton Collector: S. Collins
Street Town of City Name

Date Collected: 3 / 22 / 20 17 Time Collected: 10:15 a.m. _____ p.m. Phone #: 410-313-6287

Sample Preserved By: ☐ Field ☐ ESRL ☐ WMRL ☐ Central Lab
Preservative Used: ☒ HNO₃ _____ mL pH: <2, 3/23/17, SHS

Sample Type: ☒ Drinking Water ☐ Landfill ☒ Source (Raw Water) ☐ Liquid
Data Category: ☐ Community ☐ Stream ☐ Distribution (Treated) ☐ Solid
Code ☐ Non-Community ☐ Sediment ☐ Other _____
☒ Private

Specify Program: ☒ SDWA ☐ NPDES ☐ CWA ☐ RCRA ☐ Consumer Products ☐ Other _____

Type of Sample Preparation: ☐ Total Metals ☐ Total Metals TCLP ☐ Dissolved Metals
(field preparation required)

Remarks: Sample collected during yield test.

✓	Element	Results (ppm)	✓	Element	Results (ppm)
	Antimony (Sb)			Copper (Cu)	
	Arsenic (As)			Lead (Pb)	
	Barium (Ba)			Silver (Ag)	
	Beryllium (Be)			Zinc (Zn)	
	Cadmium (Cd)			Aluminum (Al)	
	Chromium (Cr)			Iron (Fe)	
	Mercury (Hg)			Manganese (Mn)	
	Nickel (Ni)			Calcium (Ca)	
	Selenium (Se)			Magnesium (Mg)	
✓	Sodium (Na) <i>JM</i>			Potassium (K)	
	Thallium (Tl)			Uranium (U)	
				Vanadium (V)	

Lab Supervisor: _____

Date Reported: ____/____/____

DHMH 4432 (05/15)

•Phone: (443) 681-3857

•Fax: (443) 681-4507

SUBMITTER'S COPY



State of Maryland
DHMH-Laboratories Administration
Division of Environmental Chemistry
TRACE METALS LABORATORY
1770 Ashland Avenue, Baltimore, Maryland 21205
Robert Myers, Ph.D., Director



Certificate of Analysis

HOWARD CO ENVIRONMENTAL HLTH
8930 STANFORD BLVD
COLUMBIA, MD 21045

Lab Project No: E17003703 Date Coll.: 03/22/2017 Date Received 03/23/2017 Submitted By: Collins

Field ID: HO-17-0010
Lab No.: E17003703001

<u>Method</u>	<u>Element</u>	<u>Result</u>	<u>Units</u>	<u>Date Analyzed</u>
EPA 200.7	Sodium	2.99	ppm	03/31/2017

Comments:

Approved by: Sadia Muneeb

Approval date: 04/04/2017

**The following methods are included in our A2LA Scope of Accreditation: EPA 200.7, EPA 200.8, EPA 245.1.

This document contains confidential health information that is privileged, confidential and exempt from disclosure under law. If you have received this information in error, please call (410) 767-6944 and arrange for return or destruction.



State of Maryland
DHMH-Laboratories Administration
Division of Environmental Chemistry
INORGANICS ANALYTICAL LABORATORY
1770 Ashland Avenue, Baltimore, Maryland 21205
Robert Myers, Ph.D., Director



Certificate of Analysis

HOWARD CO ENVIRONMENTAL HLTH
8930 STANFORD BLVD
COLUMBIA, MD 21045

Lab Project NoE17003702 Date Coll. 03/22/2017 Date Received 03/23/2017 Submitted By: S. Collins

Field ID: HO-17-0010
Lab No.: E17003702001

<u>Analyte</u>	<u>Method</u>	<u>Result</u>	<u>Units</u>	<u>Date Analyzed</u>
Chloride	SM 4500-Cl E	27	mg/L	03/27/2017
Total Dissolved Solids	SM 2540C	168	mg/L	03/24/2017

Comments:

Approved by:

Approval date: 04/03/2017

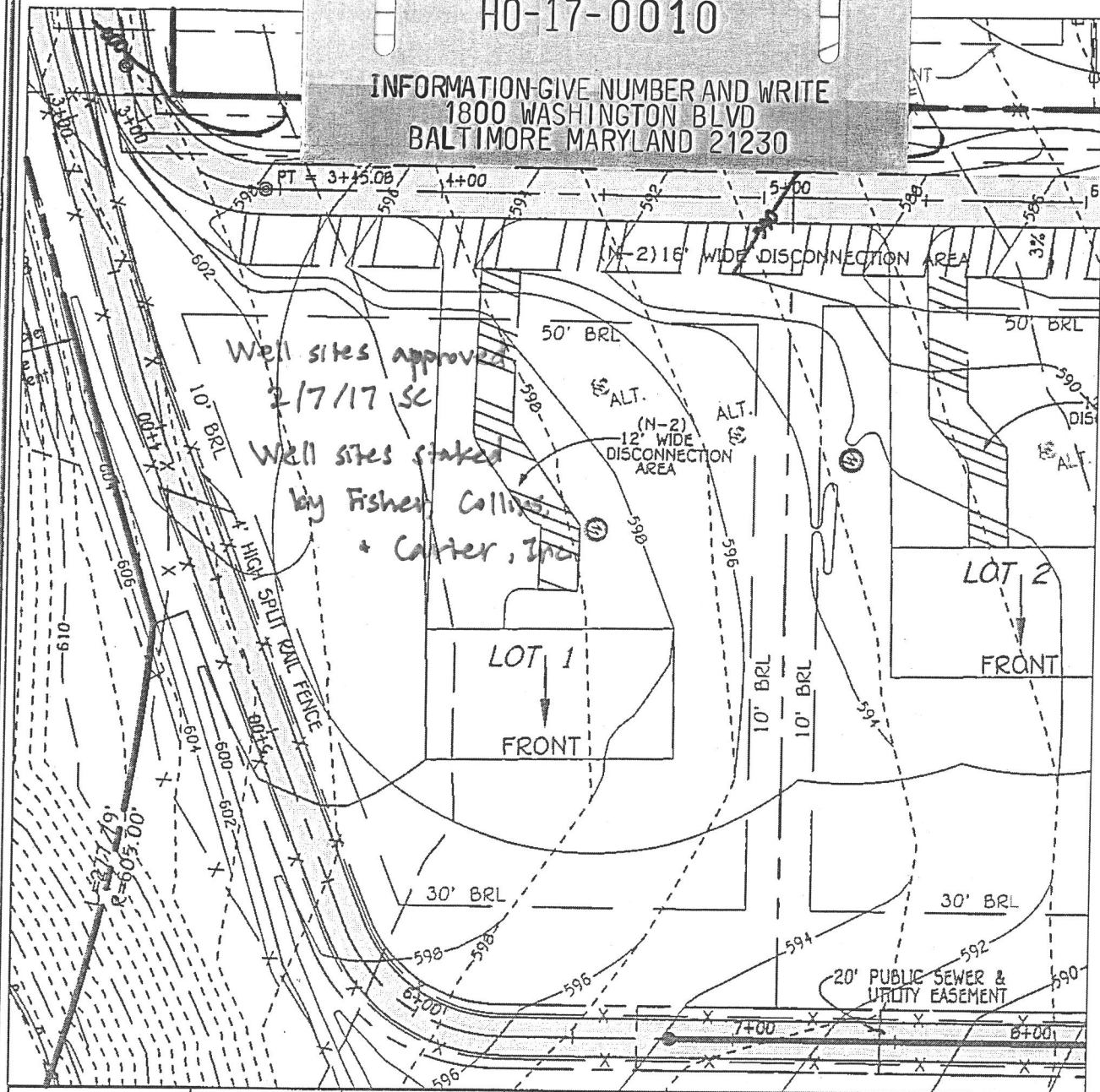
*The following methods are included in our A2LA Scope of Accreditation: EPA150.1, EPA 353.2, EPA 375.2, SM4500F C, SM 4500-CN G & QCM-CN, QCM-CN.

This document contains confidential health information that is privileged, confidential and exempt from disclosure under law. If you have received this information in error, please call (410) 767-6190 and arrange for return or destruction.

DO NOT REMOVE THIS TAG
DEPARTMENT OF THE ENVIRONMENT
WELL PERMIT NUMBER

H0-17-0010

INFORMATION-GIVE NUMBER AND WRITE
1800 WASHINGTON BLVD
BALTIMORE MARYLAND 21230



LOT #	Northing	Easting	Longitude	Latitude
LOT 1	585134.3500	1316666.9433	W76° 59' 04.89"	N39° 16' 23.97"



PLAN

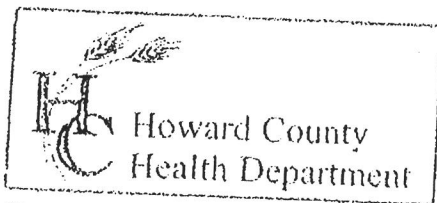
Scale: 1" = 50'

LOT 1 WELL MAP PAUPERS FOLLY

LOTS 1-11, BUILDABLE PRESERVATION PARCEL 'A'
AND NON-BUILDABLE PRESERVATION PARCEL 'B'

ZONED: RR-DEO
TAX MAP No. 22 GRID No. 8 PARCEL No. 116 & P/O No. 7
THIRD ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
DATE: JANUARY 20, 2017
SHEET 1 OF 11

FISHER, COLLINS & CARTER, INC.
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS
CENTRAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE
ELICOTT CITY, MARYLAND 21042
(410) 481-2293



3525 H Ellicott Mills Drive, Ellicott City, MD 21043
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

Penny E. Borenstein, M.D., M.P.H., Health Officer

TO ALL INTERESTED PARTIES

When submitting a well permit application for a proposed well for new construction, please indicate one of the following:

- ☒ The well site has been staked by Fisher Collins & Carter,
(professional land surveyor or company employing professional land surveyors)
on 1-25-17 (date) and does not require a site inspection.
- ☐ The well driller, builder or property owner will call the Health Department to schedule a time to meet in the field to verify the proposed well site location.

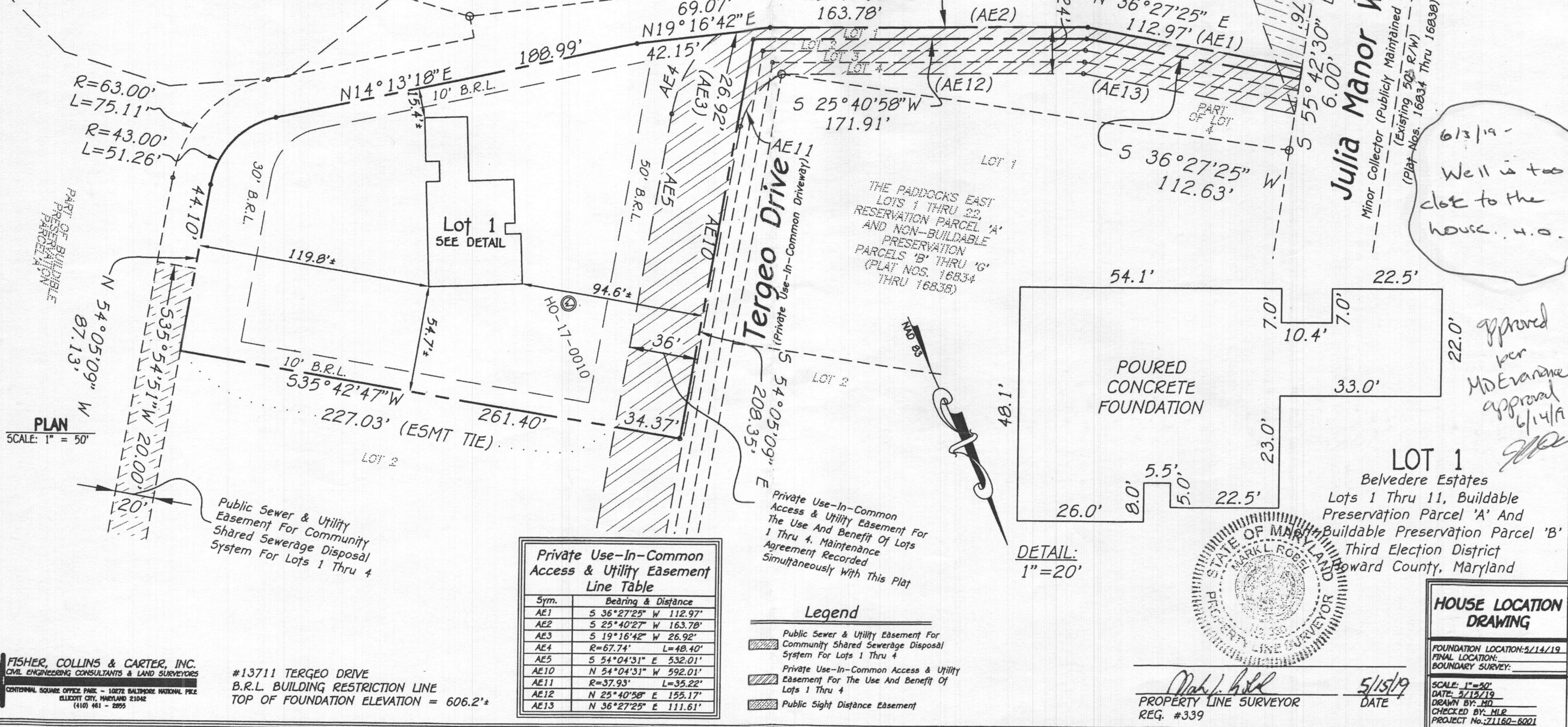
This sheet, along with two copies of an acceptable well site plan, must be attached to the green well permit application.

Revised 6/10/03

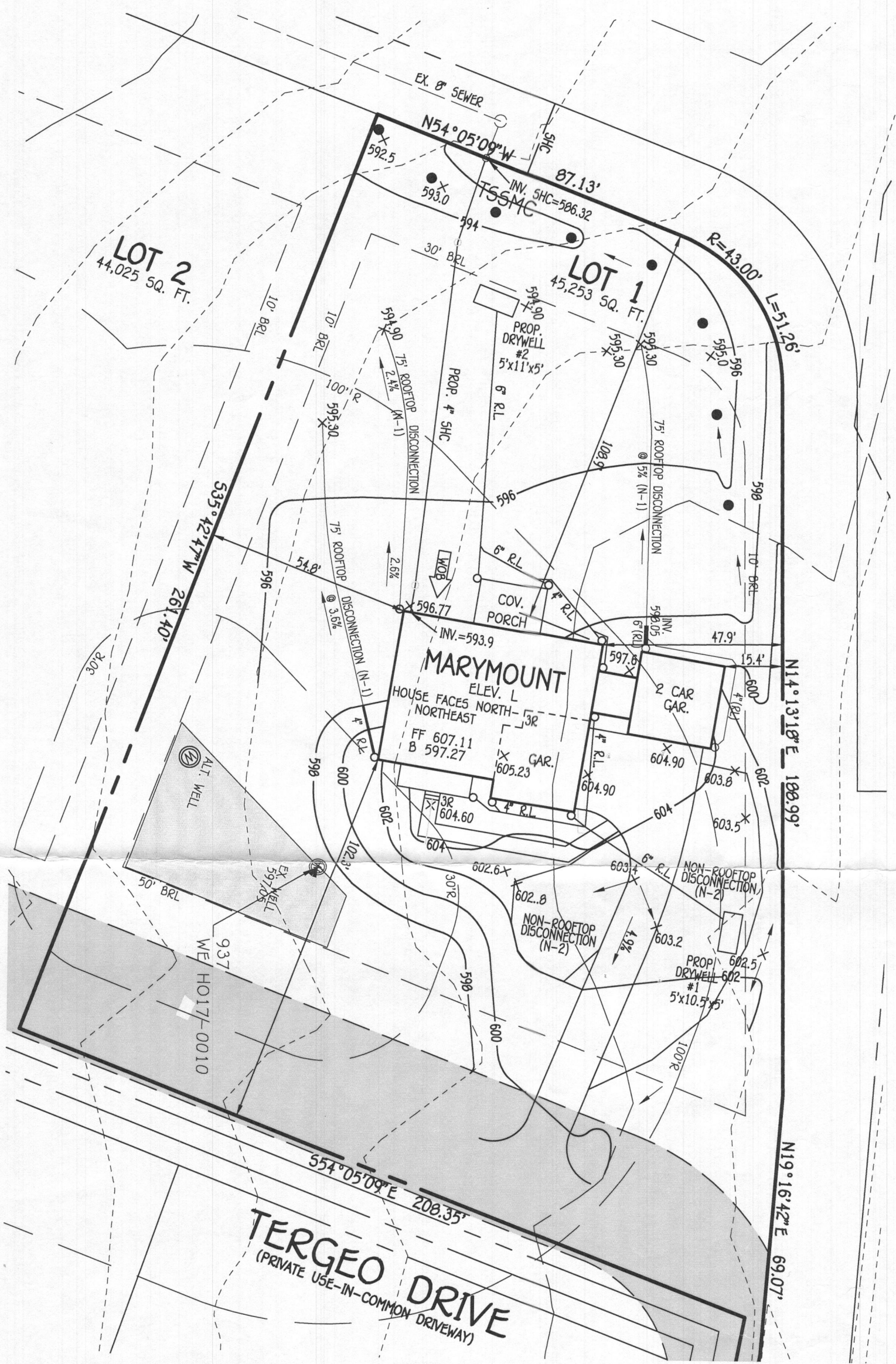
Paupers Ferry

GENERAL NOTES:

- 1) THIS LOCATION DRAWING IS PREPARED FOR THE BENEFIT OF THE CLIENT SIGNING THE HOUSE LOCATION SURVEY APPROVAL FORM INsofar AS IT IS REQUIRED BY A LENDER OR TITLE INSURANCE COMPANY OR ITS AGENTS IN CONNECTION WITH THE CONTEMPLATED TRANSFER, FINANCING OR REFINANCING OF THE PROPERTY SHOWN HEREON. UNLESS INDICATED AS BEING A BOUNDARY SURVEY, THIS LOCATION DRAWING IS NOT INTENDED FOR USE IN THE ESTABLISHMENT OF PROPERTY LINES AND IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATIONS OF FENCES, GARAGES, BUILDINGS OR OTHER EXISTING OR FUTURE IMPROVEMENTS. AS A RESULT, THIS LOCATION DRAWING DOES NOT PROVIDE FOR ACCURATE IDENTIFICATION OF PROPERTY LINES, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING FOR RE-FINANCING.
- 2) SUBJECT PROPERTY IS SHOWN IN ZONE X ON THE NATIONAL FLOOD INSURANCE PROGRAM FLOOD INSURANCE RATE MAP OF HOWARD COUNTY, MARYLAND, COMMUNITY PANEL No. 24027C0065D EFFECTIVE 11/6/2013.
- 3) THE OFFSETS FROM BUILDING LINE TO PROPERTY LINE AS SHOWN ON THE PLAT HEREON ARE TO AN ACCURACY OF PLUS OR MINUS 0.5' (±)
- 4) NO TITLE REPORT FURNISHED. SUBJECT TO ALL EASEMENTS, RIGHTS OF WAY AND CONDITIONS OF RECORD.
- 5) THE EXISTING WELL(S) SHOWN ON THIS PLAN (IDENTIFIED WITH THE ATTACHED WELL TAG NUMBER HO-95-2625 HAS BEEN FIELD LOCATED BY FISHER, COLLINS AND CARTER, INC. PROFESSIONAL LAND SURVEYORS AND IS ACCURATELY SHOWN.
- 6) PROFESSIONAL CERTIFICATION: I HEREBY CERTIFY THAT THESE DOCUMENTS WERE PREPARED BY ME OR UNDER MY RESPONSIBLE CHARGE, AND THAT I AM A DULY LICENSED PROPERTY LINE SURVEYOR UNDER THE LAWS OF THE STATE OF MARYLAND, LICENSE NO. 339, EXPIRATION DATE 10/04/2020.
- 7) BUILDING PERMIT #B-19000012



C:\SDSKPROJ\71160 Boardman Property\dwg\71160 Lot 1 Per Plan.dwg, 3/11/2019 7:15:27 AM, DWG To PDF.pc3



PLAN
SCALE: 1"=30'

WELL CERTIFICATION:
THE EXISTING WELL, TAG NO. HO-17-0010, HAS BEEN FIELD LOCATED AND IS ACCURATELY SHOWN.

BUILDER
NV HOMES INC.
9720 PATUXENT WOODS
COLUMBIA, MARYLAND 21046

FISHER, COLLINS & CARTER, INC.
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS
CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE
ELLICOTT CITY, MARYLAND 21042
(410) 461 - 2855

PERMIT SITE PLAN
BELVEDERE ESTATES
LOT 1

13711 TERGEO DRIVE
ZONED: RC-DEO
TAX MAP NO.: 22 GRID NO.: 8 PARCELS NO.: 116 AND P\O 7
THIRD ELECTION DISTRICT HOWARD COUNTY, MARYLAND
SCALE: AS SHOWN DATE: MARCH 11, 2019
SHEET 1 OF 1