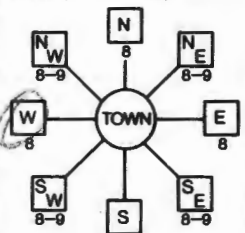
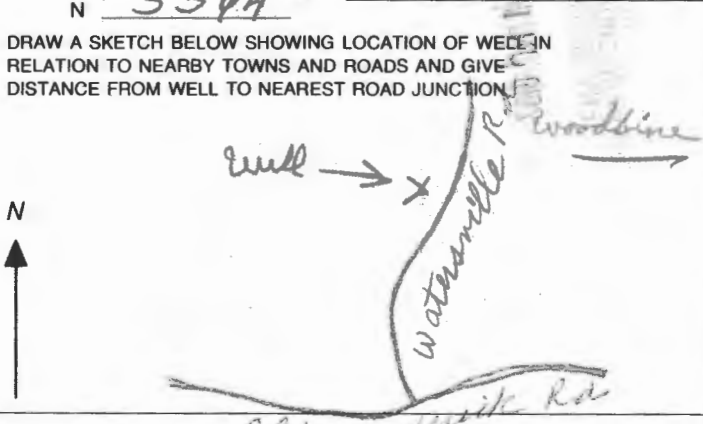




|  |                                |  |   |
|--|--------------------------------|--|---|
| B 1<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">3473</div>   | SEQUENCE NO.<br>(MDE USE ONLY) | STATE OF MARYLAND<br><b>APPLICATION FOR PERMIT TO DRILL WELL</b><br>533289 please type   | STATE PERMIT NUMBER<br><div style="font-size: 1.2em;">H0-95-1937</div> fill in this form completely |
| Date Received (APA)<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">6/11/2010</div>  |                                | B 3<br><b>LOCATION OF WELL</b><br>8 COUNTY <u>Howard</u> 21<br>23 SUBDIVISION <u>Hay Meadow Overlook</u> 42<br>SECTION <u>44</u> 46 LOT <u>48</u> 50<br><u>Woodbine</u><br>52 NEAREST TOWN _____ 71<br>MILES FROM TOWN (enter 0 if in town) <u>5.2</u> M I<br>73 76 77 78  |   |
| <b>OWNER INFORMATION</b><br>15 Last Name <u>Dorsey</u> 34<br><u>Builders Inc</u><br>36 Street or RFD <u>13090 Old Frederick Rd</u> 55<br><u>Lykesville Md 21784</u><br>57 Town 70 State 72 Zip 76  |                                | B 4<br>1 2<br>DIRECTION OF WELL FROM TOWN (CIRCLE BOX)<br>   |   |
| <b>DRILLER INFORMATION</b><br>Driller's Name <u>Joseph L Mayne</u> MS D 024<br>76 License No. 81<br>Firm Name <u>Joseph L Mayne Well Drilling</u><br>Address <u>5512 Ridge Rd Mt. Airy Md 21771</u><br>Signature <u>Joseph L Mayne</u> Date <u>6-7-2010</u>  |                                | 11 NEAR WHAT ROAD <u>Watonsville Rd</u> 30<br>ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)<br>NORTH <u>40</u> WEST <u>34</u> EAST <u>37</u> SOUTH <u>FT</u><br>DISTANCE FROM ROAD ENTER FT OR MI 38 39<br>TAX MAP: <u>2</u> BLK: <u>15</u> PARCEL <u>18</u>  |   |
| B 2<br><b>WELL INFORMATION</b><br>1 2<br>APPROX. PUMPING RATE (GAL. PER MIN.) <u>5</u><br>8 12<br>AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <u>500</u><br>14 20   |                                | <b>NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL</b><br><u>Howard</u> (13) <u>A521569</u><br>COUNTY NAME COUNTY NO.<br>STATE SIGNATURE _____ INSERT S →<br>DATE ISSUED <u>6/25/2010</u> <u>Brian Baker</u> <u>6/25/2010</u><br>43 MM DD YY 48 CO SIGNATURE EXP. DATE<br>NORTH GRID <u>554</u> 000 EAST GRID <u>772</u> 000<br>50 55 57 63  |   |
| <b>USE FOR WATER (CIRCLE APPROPRIATE BOX)</b><br><input checked="" type="checkbox"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION<br><input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)<br><input type="checkbox"/> INDUSTRIAL, COMMERCIAL, DEWATERING<br><input type="checkbox"/> PUBLIC WATER SUPPLY WELL<br><input type="checkbox"/> TEST, OBSERVATION, MONITORING<br><input type="checkbox"/> GEO-THERMAL |                                | SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X<br>SOURCES OF DRILLING WATER<br>1. <u>Well</u><br>2.<br>3.<br>WRITE THE BOX NUMBER FROM THE MAP HERE<br>E <u>772</u><br>N <u>554</u><br>000 000   |   |
| APPROXIMATE DEPTH OF WELL <u>300</u> FEET<br>24 28<br>APPROXIMATE DIAMETER OF WELL <u>6</u> INCH<br>NEAREST INCH   |                                | DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION<br>  |   |
| <b>METHOD OF DRILLING (circle one)</b><br>BORED (or Augered) JETTED Jetted & DRIVEN<br>30 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)<br>37 CABLE REVERSE-ROTARY Drive-POINT<br>other _____  |                                | REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)<br><input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL<br><input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED<br>39 <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<br><input type="checkbox"/> THIS WELL WILL DEEPEIN AN EXISTING WELL<br>PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) 41 _____ 52 |   |
| Not to be filled in by driller (MDE OR COUNTY USE ONLY)<br>APPROP. PERMIT NUMBER _____ G _____<br>PERMIT No. <u>H0-95-1937</u><br>70 71 72 73 74 75 76 77 78 79  |                                |  |   |
| SPECIAL CONDITIONS<br>NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED   |                                |  |   |



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 Piping**

**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: All Around Plumbing, Inc Telephone #: 301-698-1028  
Address: PO Box 3596  
Frederick, Md 21701

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer  
License # and name of individual responsible for the field installation:

Name (Print): James B. Madden License# 18121

**\*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. Licenses may be subjected to field verification. Unlicensed individuals may be reported to the appropriate licensing agency.**

Name of Property Owner: Russell & Lydia Moore Telephone #: 301-542-9318  
Subdivision: Hay Meadow overlook Lot #: 2 Well Tag #: HO - 95 - 1937 ✓  
Site Address: 530 Watersville Rd.  
Mount Airy, Maryland 21771

**Submersible Pump Data**

Make: Goulds  
Model #: 5GS07422C  
Pump Capacity 5 GPM  
Well Yield: 15 GPM

**Pitless Adapter**

Make: Boshart  
Model#: P-100-SS  
Depth: 36" (36" min)  
NSF/WSC approved: Y

**Well Cap and Electric Conduit**

Two piece watertight cap: Y  
Screened, vented well cap: Y  
Cap secured to casing: Y  
Conduit min 18" B.G.: Y

Depth of well encountered at time of pump installation: \_\_\_\_\_ (feet) Conduit secured to well cap: Y

If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4

Torque arrestors, Cable guards, or other acceptable method used— Must circle one

Safety rope, if used, attached to brass rope adapter or other acceptable method inside of well casing

**Piping to house**

Type: Plastic  
PSI: 200 (160 psi min)  
Depth of supply line: 36" (36" min)

**House Connection**

PVC sleeve to undisturbed soil at wall penetration: Y  
Length of sleeve (5' minimum from foundation): Y  
Sleeve sealed properly: Y

**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.**

Cathy J. Little January 30, 2023  
Signature of company representative responsible for installation date

**For Health Department Use Only – Not to be completed by Installer**

Date Insp. Requested: 1/30/23 Date Insp. Approved: 1/31/23 Inspector: SP  
Inspection Data: Pitless adapter watertight & water supply line at least 36" below grade ✓  
Two piece cap installed and attached to casing securely ✓  
Elec. conduit extends at least 18" below grade/attached to cap properly ✓  
Safety rope not outside of well cap/casing ✓  
Correct well tag attached properly and casing 8" above finished grade ✓  
Water supply line sleeved adequately at house connection ✓  
Adequate grout observed below pitless adapter ✓

used roofing

Front of House

**INTERIM CERTIFICATE OF POTABILITY**

**Expiration Date – NOVEMBER 9, 2023**

May 9, 2023

Homeowner  
530 Watersville Road  
Mount Airy, MD 21771

**RE: Hay Meadow Overlook, Lot 2**  
**530 Watersville Road**  
**Building Permit: B22003851**  
**Well Permit: HO-95-1937**

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 **3/2/2023**. Final approval of the well line connection to the dwelling was granted on **1/31/2023**. The well construction was completed on **7/19/2010**. Water samples were collected on **4/24/2023**.

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-95-1937. 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>



**Bureau of Environmental Health**  
8930 Stanford Blvd | Columbia, MD 21045  
410.313.2640 - Voice/Relay  
410.313.2648 - Fax  
1.866.313.6300 - Toll Free

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

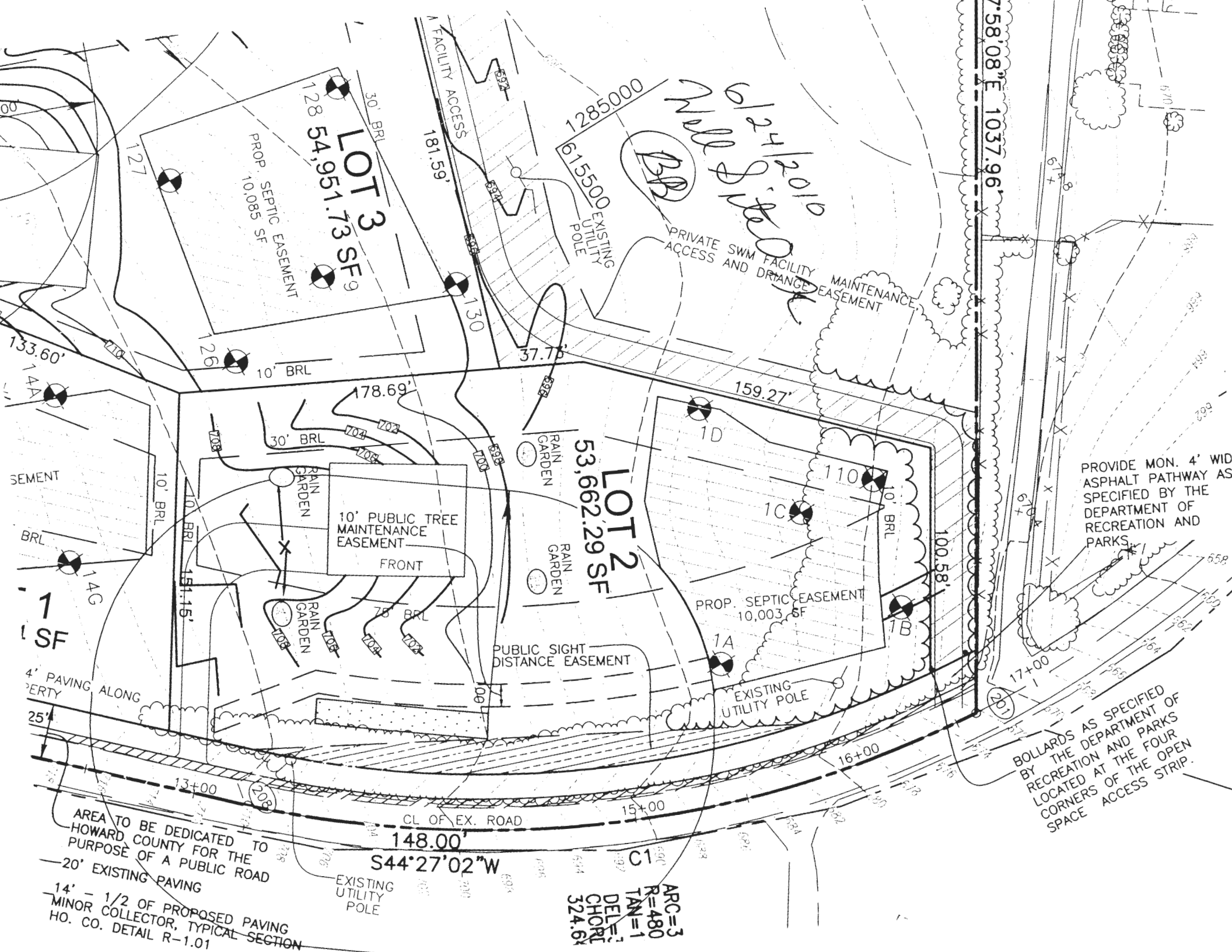
In closing, please refer to our "Homeowner Fact Sheet" which illustrates a better understanding for your Onsite Sewage Disposal System. You will also find a link to Maryland Department of the Environments website which describes in further detail operation and maintenance of your septic system.

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





LOT 3  
54,951.73 SF

LOT 2  
53,662.29 SF

12/2/2016  
Muller & Co.  
BB

SEMENT  
BRL  
14G  
1 SF  
4' PAVING ALONG  
PROPERTY  
25'

AREA TO BE DEDICATED TO  
HOWARD COUNTY FOR THE  
PURPOSE OF A PUBLIC ROAD  
— 20' EXISTING PAVING  
14' — 1/2 OF PROPOSED PAVING  
MINOR COLLECTOR, TYPICAL SECTION  
HO. CO. DETAIL R-1.01

EXISTING  
UTILITY  
POLE

148.00'  
S44°27'02"W

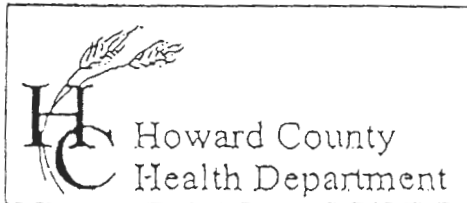
ARC=3  
R=480  
TAN=1  
DEL=1  
CHORD  
324.61

PROP. SEPTIC EASEMENT  
10,003 SF

PRIVATE SWM FACILITY  
ACCESS AND DRAINAGE  
MAINTENANCE EASEMENT

PROVIDE MON. 4' WID  
ASPHALT PATHWAY AS  
SPECIFIED BY THE  
DEPARTMENT OF  
RECREATION AND  
PARKS.

BOLLARDS AS SPECIFIED  
BY THE DEPARTMENT OF  
RECREATION AND PARKS  
LOCATED AT THE FOUR  
CORNERS OF THE OPEN  
SPACE ACCESS STRIP.



7178 Columbia Gateway Drive, Columbia, MD 21046  
(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:

Well Site Location:

Hay Meadow Overlook 1, 2, 3, 4, 5, 6, 7 Watersville Rd  
Subdivision/Property Name Lot# Road Name

- ☒ The well site has been staked by Robert H. Vogel Engineers  
(professional land surveyor or company employing professional land surveyors)  
on 5-2010 (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 3/11/05

Dorsey Builders Inc



**FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.**

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

**REPORT OF ANALYSIS**

|                       |                      |               |                              |
|-----------------------|----------------------|---------------|------------------------------|
| Laboratory ID #:      | 158652               | Account #:    | 1045                         |
| Reference:            | Caruso Homes         | Client:       | Atlantic Blue Water Services |
| Location:             | 530 Watersville Road | Requested By: | Mark Mather                  |
|                       | Mount Airy, MD 21771 | Source:       | Well Water                   |
| Date/ Time Collected: | 4/24/2023 1240       | Site:         | Bathroom Sink                |
| Date/Time Rec'd:      | 4/24/2023 1325       | Treatment:    | None                         |
| Chlorine ppm:         | Free: ND Total: ND   | pH:           | 6.9                          |
| Collected By:         | E. Van Allen 1560EV  | Well #:       | HO-95-1937                   |

| PARAMETERS                             | RESULTS | UNITS       | REFERENCE | METHOD             | DATE/TIME/ANALYST      |
|--|---------|-------------|-----------|--------------------|------------------------|
| Bacteria, Coliform, Total, MPN         | ✓ <1.0  | MPN/ 100 ml | <1.0      | SM20 9223B         | 4/25/2023 / 1000 / TSD |
| Bacteria, E. coli, MPN                 | ✓ <1.0  | MPN/ 100 ml | <1.0      | SM20 9223B         | 4/25/2023 / 1000 / TSD |
| Chloride.                              | 242     | mg/L        | 250*      | EPA 300.0          | 4/24/2023 / 1707 / CRS |
| Iron                                   | 0.04    | mg/L        | 0.3*      | Hach 8146          | 4/25/2023 / 0930 / TSD |
| Nitrate.                               | ✓ 2.57  | mg/L        | 10        | EPA 300.0          | 4/24/2023 / 1707 / CRS |
| Sand                                   | ✓ ND    | mg/L        | 5         | Visual/Gravimetric | 4/25/2023 / 0910 / TSD |
| Turbidity                              | ✓ 0.54  | NTU         | <10       | SM2130B            | 4/25/2023 / 0910 / TSD |
| Solids, Total Dissolved (by electrode) | 516     | mg/L        | 500*      | Electrode          | 4/26/2023 / 0920 / CRS |

**NOTES:**

- 1 \*SMCL = Secondary Maximum Contaminant Level
- 2 mg/L = milligrams per liter (also, parts per million)
- 3 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 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 ND:None Detected
- 7 pH and Chlorine level tested in lab (pH tested after recommended holding time)
- 8 Visual well check: Sealed, vented cap

Reason for Test : Use &amp; Occupancy

Building Permit # : B22003851

Date Reported: 4/26/2023