

7-8-97
C.O. AM

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 58039A

A

DISTRICT 5th

DATE 03/24/97

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~313-2640~~ 313-2640

TOXID#

05-420245

DATE SYSTEM APPROVED

INSPECTOR

INDEXED

Winchester Homes, Inc.

IS PERMITTED TO INSTALL ☒ ALTER

ADDRESS 6305 Ivy Lane, Suite 800, Greenbelt, Md

PHONE 474-4411

SUBDIVISION Ashleigh Knolls

LOT 80

ROAD 7205 Downing Court

PROPERTY OWNER

Winchester Homes

ADDRESS

NUMBER OF BEDROOMS: 4

DEPT. PERMIT SIGNED

AND RETURNED 3/24/97

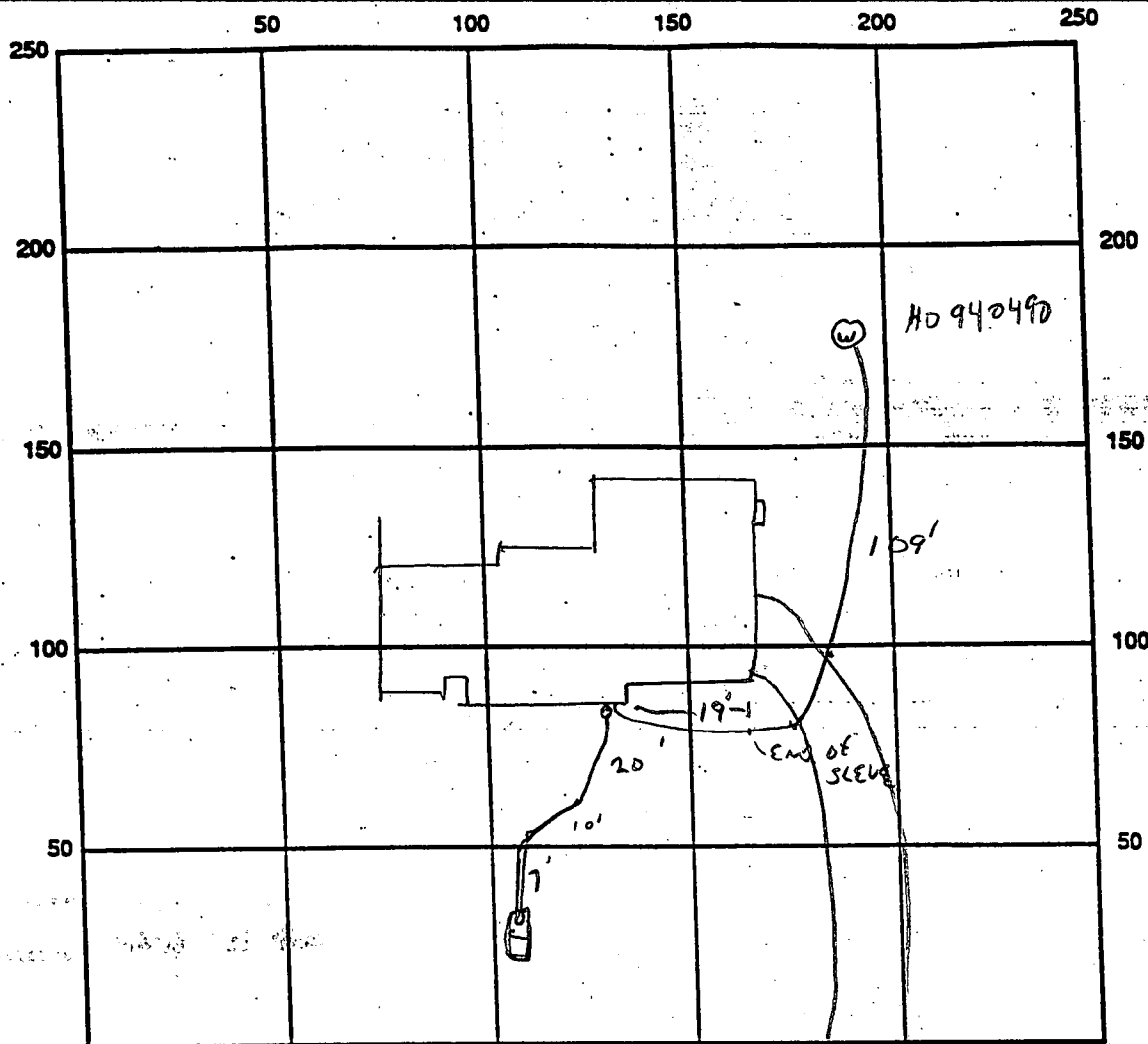
Serial # 109476

- House is served by a shared community septic system. As part of the general permit for the community system, items previously installed or under construction include individual septic tank, connection from tank to common effluent line, community system headworks, and shared disposal fields.
- This portion of the septic installation permit is strictly limited to authorization of the individual pump in the pump pit with associated piping and electrical controls, and installation of the individual house sewer line. Location as per the signed building permit site plan, copy attached.
- Contact Health Department for inspection before covering the installation.
- For the pump test 48 hour advance notice of inspection is required. Where adequate notice has been provided, installation may proceed to completion one-half hour after the scheduled inspection time.

58039A

Paul Kelly

3/27/97



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

CHARROW CT

SEPTIC TANK LEVEL OK

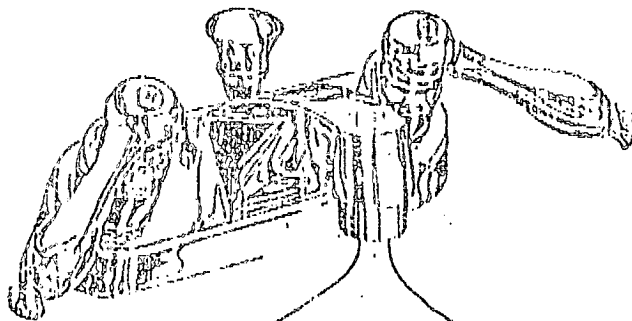
CLEANOUTS OK 1 AC WALL

REMARKS: 7/8/97 SEPTIC CONNECTION MADE. WRT OK TO
COVER, PUMP NOT SET, GRIND TO BE ATTACHED CASING
OK TO COVER

DATE SYSTEM APPROVED _____

INSPECTOR _____

HOWARD COUNTY
BUREAU OF UTILITIES
8250 OLD MONTGOMERY ROAD
COLUMBIA, MD 21045
(410) 313-4900



FAX
COVER
SHEET

FAX # (410) 313-4919

Number of Pages: 1
(Including this sheet)

DATE: 10/10/97
TO: Kim
FAX #: 2648
FROM: Jim Miller
COMMENTS:
Lot 80 7205 Downing Court
Ashleigh Knolls
is OK for H & O

7-8-97
WPI AM
OK *EF*

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 # _____
Date _____

Name of Installer

Van Land Plog & Hg

Telephone *829-0444*

License Number *1467*

Certified Well Pump Installer ☐

Well Driller ☐

Registered Plumber ☒

Name of Property Owner

Winchester Homes

Telephone *670-1010*

Subdivision

Apple Knolls

Lot #

80

Well Tag #

_____-_____-_____-

Site Address

1205 Darnings Ct

Pump

1. Type

- a. Deep well jet _____
b. Shallow well jet _____
c. Submersible ☒

2. Make

Grundfos

3. Model #

4. Capacity

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

2. RPM

3. Voltage

a. 110

b. 220 ☒

Pitless Adapter

1. Make

Campbell

2. Model #

B10X

3. Depth

48"

Tank

1. Capacity

V-100

2. Pressure relief valve? ☒

Piping

1. Type

P.S.

2. Size

1"

3. NSF and/or BOCA Code approved ☒

4. Depth of supply line

48"

Well data

1. Depth

ft.

2. Yield

GPM

3. Static water level

ft.

4. Will water supply be disinfected by installer? ☒

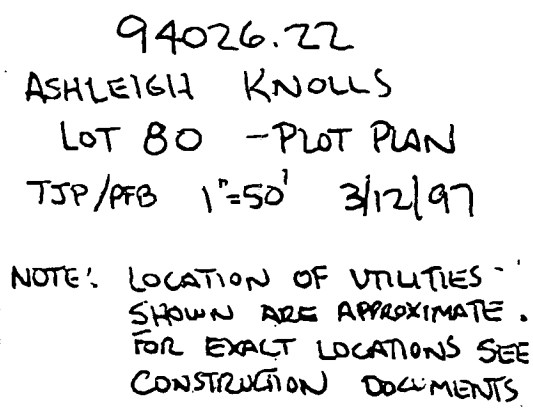
I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

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

Signature of Applicant: *Stanford A. Vandenberg*

Date: *5/28/97*

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



FUTURE

25' WETLANDS BUFFER

LIMIT OF WETLANDS

480

478

25' WETLANDS BUFFER

100 YR. FLOODPLAIN

C. STREAM

	FF ELEV	INV. OUT OF HOUSE	EXIST. GROUND AT SEPTIC TANK	PROP. GROUND AT SEPTIC TANK	INV. INTO SEPTIC TANK
LOT 68					
LOT 69					
LOT 70					
LOT 71					
LOT 72					
LOT 73					
LOT 74					
LOT 75					
LOT 76					
LOT 77					
LOT 78					
LOT 79					
LOT 80	502.70	490.70	490.00	497.7	494.0
LOT 81					
LOT 82					
LOT 83					

P. 469
LOT 1B

APPLICATION

HOWARD COUNTY

SERIAL NUMBER

PERMIT APPLICATION

DEPARTMENT OF INSPECTIONS, LICENSES & PERMIT
3430 COURT HOUSE DRIVE, ELLICOTT CITY, MARYLAND 21043

B00104426

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

7205 Downing Court
Clarksville, Md. 21029GRADING/SEDIMENT CONTROL ☐ YES ☐ NO

SDP #

DESCRIPTION OF WORK AUTHORIZED

House Type in Oxford;
2 story, full bamt., 10 R, 2 PB,
1 HB, 4 BR, rear solarium, opt. FP,
garage

LOT NO.	PARCEL NO.	SEC.	AREA	BLOCK NO.	LIBER	FOLIO
80	475	2	2	112		

SUB DIVISION	ZONE	ZONE MAP	ELEC. DIST.	CENSUS TR.
Ashleigh Knolls	RR	404	5	6051.02

OWNER NAME AND ADDRESS

Winchester Homes, Inc.
6305 Ivy Ln., Suite 800

Greenbelt, Md. 20770 (301) 474-4411

OCCUPANT'S NAME AND ADDRESS

ARCHITECT OR ENGINEER'S NAME AND ADDRESS

J.M. Mochi Group

10120 A Old National Pike

Clarksville, Md. 21754-9706 (301) 865-5858

CONTRACTOR'S NAME AND ADDRESS

Winchester Home,s Inc.
same as above

EXISTING USE

Vacant

PROPOSED USE

Res. Single Family

EST. CONSTRUCTION COST

156,000

LICENSE NUMBER

158-14160

PERMIT FEE

S CODE

FOR OFFICE USE ONLY

DISTANCE IN FEET FROM RW LINE TO FRONT BUILDING LINE

SIDE YARD

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

SIDE BUILDING LINE

DISTANCE IN FEET, REAR YD. REQUIRING SET

CHECK (CORNER LOT ONLY)

Check 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.

9-591

APPROVED

DATE

Distribution of Copies:
White - Building Official
Green - Planning & ZoningYellow - Engineering
Pink - Health Dept.
Gold - S.H.A.

FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING	X	
SHA	X	
SEDIMENT/GRADING	X	
BUILDING OFFICIAL	X	
WATER & SEWER	X	
HEALTH DEPT.	3/24/97	John Brown
FIRE PROTECTION		
STORM WATER MGM.	X	

P. 469
LOT 1B

A



HOWARD COUNTY HEALTH DEPARTMENT

PS 8039

DATE
3/24/97

Received From Whitaker, James, Inc.

6305 Joy Lane, Suite 800, Germantown, Md

For Septic System Repairs (2)

Ashyok Mills - Lot 80-7205 Quarry Court

Lot 111 - 7101 Chambers Court

Three hundred sixty and 00/100 Dollars

☐ CASH
☒ CHECK
NO. 4290

\$ 360.00

Received By St. James River

C12934

SEQUENCE NO.
(MDE 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
NUMBER 13-

ST/CO USE ONLY
DATE Received
05/17/95

DATE WELL COMPLETED
12/16/96

Depth of Well
400
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
40-94-0490

OWNER Winchester Homes

STREET OR RFD Downing Court

TOWN Highland

SUBDIVISION Ashleigh Knolls

SECTION

LOT 80

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 shaley clay	2	55	
Sand Stone	55	62	
Mica	62	85	
Flint	85	88	
Mica	88	185	
Flint	185	186	✓
Mica	186	210	
Mica + Flint	210	215	✓
Mixed	215	400	
Mica			

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 10 NO. OF POUNDS 1000

GALLONS OF WATER 50

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 30 ft.

CASING RECORD

casing
types
insert
appropriate
code
below

STEEL ST CONCRETE CO

PLASTIC PL OTHER OT

MAIN CASING TYPE

Nominal diameter
top (main) casing
(nearest inch)

Total depth
of main casing
(nearest foot)

ST 6 68

OTHER CASING (if used)

diameter
inch

depth (feet)
from to

EACH CASING

SCREEN RECORD

screen type
or open hole
insert
appropriate
code
below

STEEL ST BRASS BRONZE BR

PLASTIC PL OPEN HOLE OT

OTHER

WELL HYDROFRACTURED

yes Y no N

NUMBER OF UNSUCCESSFUL WELLS:

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 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.

TYPE MWD/MSD/MGD

DRILLERS LIC. NO. 40

DRILLERS SIGNATURE

LIC. NO. 501

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

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

56 60

GRAVEL PACK

IF WELL DRILLED WAS
FLOWING WELL INSERT
F IN BOX 68

MDE USE ONLY
(NOT TO BE FILLED IN BY DRILLER)

T (E.R.O.S.)

W Q

70 72 74 75 76

TELESCOPE CASING

LOG INDICATOR

OTHER DATA

PUMPING TEST

HOURS PUMPED (nearest hour) 6

PUMPING RATE (gal. per min.) 3.0

METHOD USED TO
MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 12 ft.

WHEN PUMPING 169 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 WILL INSTALL PUMP 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)

PUMP HORSE POWER

PUMP COLUMN LENGTH
(nearest ft.)

CASING HEIGHT (circle appropriate box
and enter casing height)

LAND SURFACE

below 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)

Wells 50' 1'

side line

12/21/96

Review 12/30/96 OK ALM

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 94-0490
Location of property (road) Downing Court
Subdivision Ashleigh Knolls Lot 80 Block Plat Sec.
Well Driller G. Easterday Owner Winchester Homes

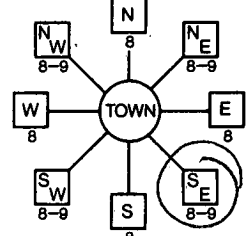
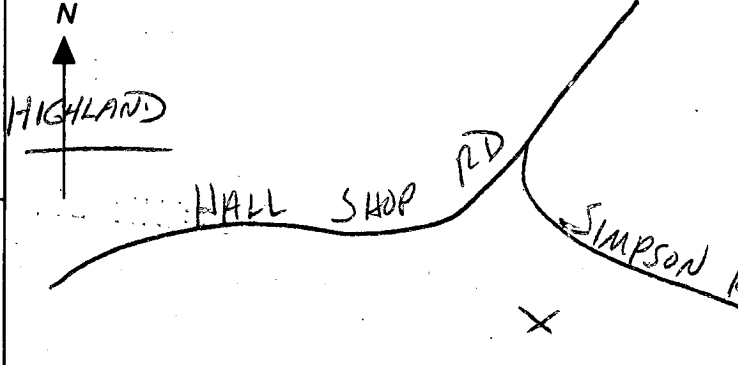
Depth of well 400 360m
Distance of measuring point (M.P.) above ground 2 ft
Static water level (S.W.L.) below M.P. 12 ft

I. High rate pumping -- reservoir drawdown

Time pump started 8:40 am Pumping rate 156 gpm
Total time 20 min to reach pumping water level 168 ft. below M.P.

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

TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE time to fill 5 gallon bucket	ELOW METER READING (if used) Pump Set	CALCULATED FLOW (gallons per minute)
0:00 am	168 ft	20 sec.	360 ft	3 GPM
9:15 am	168 ft	20 sec.	360 ft	3 GPM
9:30 am	168 ft	20 sec.	360 ft	3 GPM
9:45 am	168 ft	20 sec.	360 ft	3 GPM
10:00 am	168 ft	20 sec.	360 ft	3 GPM
10:15 am	168 ft	20 sec.	360 ft	3 GPM
10:30 am	168 ft	20 sec.	360 ft	3 GPM
10:45 am	168 ft	20 sec.	360 ft	3 GPM
11:00 am	168 ft	20 sec.	360 ft	3 GPM
11:15 am	168 ft	20 sec.	360 ft	3 GPM
11:30 am	168 ft	20 sec.	360 ft	3 GPM
11:45 am	168 ft	20 sec.	360 ft	3 GPM
12:00 pm	168 ft	20 sec.	360 ft	3 GPM
12:15 pm	168 ft	20 sec.	360 ft	3 GPM
12:30 pm	168 ft	20 sec.	360 ft	3 GPM
12:45 pm	168 ft	20 sec.	360 ft	3 GPM
1:00 pm	168 ft	20 sec.	360 ft	3 GPM
1:15 pm	168 ft	20 sec.	360 ft	3 GPM
1:30 pm	168 ft	20 sec.	360 ft	3 GPM
1:45 pm	169 ft	20 sec.	360 ft	3 GPM
2:00 pm	169 ft	20 sec.	360 ft	3 GPM
2:15 pm	169 ft	20 sec.	360 ft	3 GPM
2:30 pm	169 ft	20 sec.	360 ft	3 GPM
2:45 pm	169 ft	20 sec.	360 ft	3 GPM
3:00 pm	169 ft	20 sec.	360 ft	3 GPM
3:15 pm	169 ft	20 sec.	360 ft	3 GPM
3:30 pm	169 ft	20 sec.	360 ft	3 GPM
3:45 pm	169 ft	20 sec.	360 ft	3 GPM
HD-224 3:00 pm	169 ft	20 sec.	360 ft	3 GPM

B 1 9038	SEQUENCE NO. (DP USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER 40-94-0490 fill in this form completely
Date Received (APA) 05/17/95 OWNER INFORMATION Winchester Homes 6305 IVY Lane Greenbelt MD 20770		B 3 LOCATION OF WELL Howard Ashleigh Knolls SECTION 44 LOT 80 Highland MILES FROM TOWN (enter 0 if in town) 1 MI	
DRILLER INFORMATION MSD/MGD/MWD Driller's Name <u>George F. Easterday</u> L. Franklin Easterday, Inc. Firm Name <u>9265 Brown Church Rd., MT. Airy, Md. 21771</u> Address _____ Signature _____ Date _____		B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  NEAR WHAT ROAD <u>Downing Ct</u> ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 50 DISTANCE FROM ROAD ENTER FT OR MI <u>FT</u>	
B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) <u>5</u> AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <u>500</u>		TAX MAP: <u>40</u> BLK: <u>12</u> PARCEL: <u>174</u>	
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 <u>300</u> FEET APPROXIMATE DIAMETER OF WELL <u>6</u> 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 _____			
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 ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS ☐ THIS WELL WILL DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) _____			
Not to be filled in by driller (OEP USE ONLY) APPROX. PERMIT NUMBER <u>GAP</u> FORCE <u>GS</u> WRITE INITIALS IN BOX PERMIT No. <u>40-94-0490</u>			
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL COUNTY NAME <u>HOWARD</u> COUNTY NO. <u>13-</u> STATE SIGNATURE _____ INSERT S _____ DATE ISSUED <u>5/31/95</u> CO SIGNATURE <u>Paul R. R...</u> EXP. DATE <u>5/31/96</u> NORTH GRID <u>583000</u> EAST GRID <u>775000</u> SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. <u>Well</u> 2. _____ 3. _____ WRITE THE BOX NUMBER FROM THE MAP HERE 810775 4803 DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 			

NOTE = APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED =

