

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 58114

A

DISTRICT 5th

DATE 04/29/97

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

XX4618213 313-2640

DATE SYSTEM APPROVED 9/11/97

INSPECTOR [Signature]

INDEXED

Winchester Homes, Inc.

IS PERMITTED TO INSTALL ☒ ALTER ☐

ADDRESS 6305 Ivy Lane, Suite 800, Greenbelt, Maryland 20770 PHONE

SUBDIVISION Ashleigh Knolls LOT 67 ROAD 7117 Chilton Court

PROPERTY OWNER Winchester Homes, Inc. / DeWitt J. Donaldson

6305 Ivy Lane, Suite 800

ADDRESS Greenbelt, Maryland 20770

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

- 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.

OLD PERMIT SIGNED

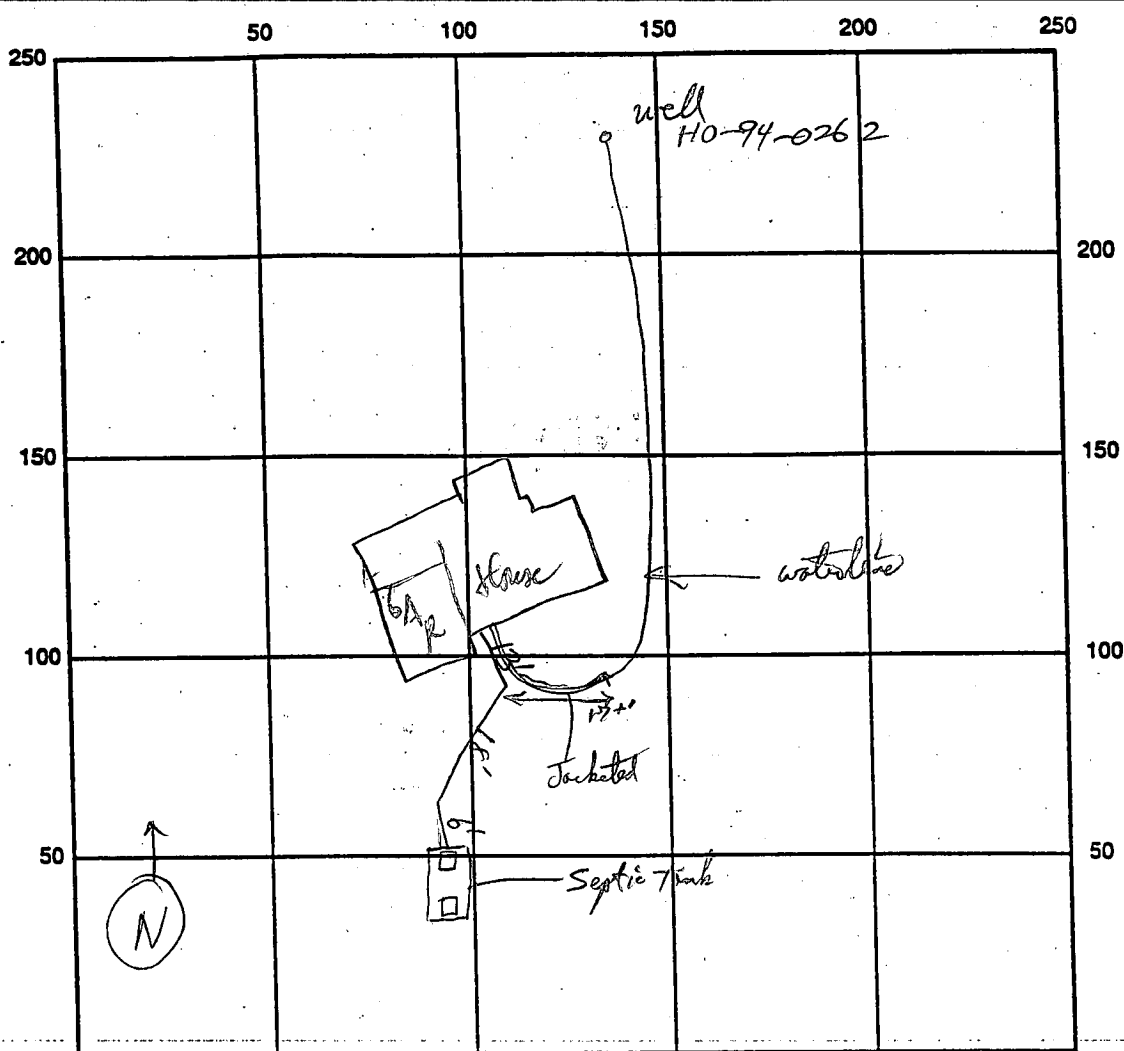
AND RETURNED 4-30-98

Serial # 310111376 deck

Plans Approved By [Signature]

Date: 5/1/97

058114



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL _____

CLEANOUTS _____

REMARKS:

House Connection OK AP 6/5/97

Pump Test OK after milky colored water was pumped out AP/KD 9/11/97

WPT - filters adjacent water line OK to cover @ 4' AP 6/5/97

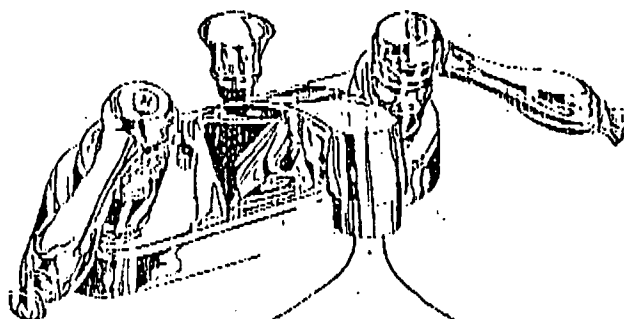
DATE SYSTEM APPROVED

9/11/97

INSPECTOR

AP/KD

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: 9/11/97

TO: Kim

FAX #: 2648

FROM: Jim Miller

COMMENTS: _____

Asleigh Knolls

Lot 67 7117 Chilton Ct

Lot 101 7208 Fawn Crossing

Pump test is OK for U+O

WPE 6/5/97
Rady AM

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 Sant Plbg & Htg

Telephone 829-0444

License Number 1467

Certified Well Pump Installer _____ Well Driller _____ Registered Plumber ☒

Name of Property Owner Winchester Homes

Telephone 670-1010

Subdivision Aspen Knolls Lot # 67 Well Tag # _____

Site Address 1117 Chilton Ct

Pump

1. Type
a. Deep well jet _____
b. Shallow well jet _____
c. Submersible ☒

2. Make Couderc

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 # 1510X

3. Depth 48"

Tank

1. Capacity V-100

2. Pressure relief valve? ☒

6/5/97 pitless adapter
water line OK to cover 4 ft
Rady

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: Harold A. Van Sant

Date: 5-13-97

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

APPLICATION

HOWARD COUNTY

PERMIT APPLICATION

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

SERIAL NUMBER

600105312

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

7117 Chilton Court
Clarksville, Md. 21024GRADING/SEDIMENT CONTROL ☐ YES ☐ NO

SDP #

DESCRIPTION OF WORK AUTHORIZED

House type is: Benfield
2 story, finished bsmt., rear solarium, 3 car garage, 1BR, 4PB,
1 HB, 4BR, FP

LOT NO.	PARCEL NO.	SEC.	AREA	BLOCK NO.	LIBER	FOLIO
67	174475	2	2	7		
SUB DIVISION		ZONE	ZONE MAP	ELEC. DIST.	CENSUS TR.	
Ashleigh Knolls		RR-	41	5	6051.02	

OWNER NAME AND ADDRESS

PHONE NO.

Winchester Home,s Inc.
6305 Ivy Ln., Suite 800
Greenbelt, Md. 20770 (301) 474-4411

OCCUPANT'S NAME AND ADDRESS

PHONE NO.

ARCHITECT OR ENGINEER'S NAME AND ADDRESS

PHONE NO.

R.M. Mochi Group
P.O. Box 10
New Market, 21774-0010 (301) 865-5856

CONTRACTOR'S NAME AND ADDRESS

PHONE NO.

Winchester Homes, Inc.
Same as above

EXISTING USE

Vacant

PROPOSED USE

SFD

EST. CONSTRUCTION COST

\$175,000

LICENSE NUMBER

158-14160

PERMIT FEE

W/S CODE

FOR OFFICE USE ONLY

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

SIDE YARD

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

TO SIDE BUILDING LINE

DISTANCE IN FEET, REAR YD. REQUIRING SET

BACK (CORNER LOT ONLY)

SDP #

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.

LP-69-591

SIZE OF BLDG.	FRONT	DEPTH	HEIGHT
	36'	36'	10'
	36'	36'	10'
	36'	36'	10'

TYPE OF BLDG.	AREA	VOLUME	ROOF
B. ROOMS	1200	42000	450 GABLE
ROOMS	1475	14750	
BATHS			
FIREPLACES	1700	17000	

FOOTINGS	FOUNDATION	S. WALLS
12 X 12	8" CONC	12" FRM
		SIDING

UTILITIES					
WATER/WELL	SEWER/SEPTIC	GAS	ELECTRICITY	TYPE OF HEAT	AC
		X	X	GAS	X

I have carefully examined and read this application and know the same is true and correct, and that is doing this work, all provisions of Howard County Ordinances and the State Laws of Maryland will be complied with, whether specified or not; and I will notify the Department of Inspections, and Permits twenty-four hours in advance when I am ready for the inspections called for elsewhere in the application; and that no work will be covered up until such inspections have been complied with.

SIGNATURE

Kimberly A. Mante

TITLE

DATE

FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING		
SHA		
SEDIMENT/GRADING		
BUILDING OFFICIAL		
WATER & SEWER		
HEALTH DEPT.	5-6-97	Kimberly A. Mante
FIRE PROTECTION		
STORM WATER MGM.		

APPROVED

DATE

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

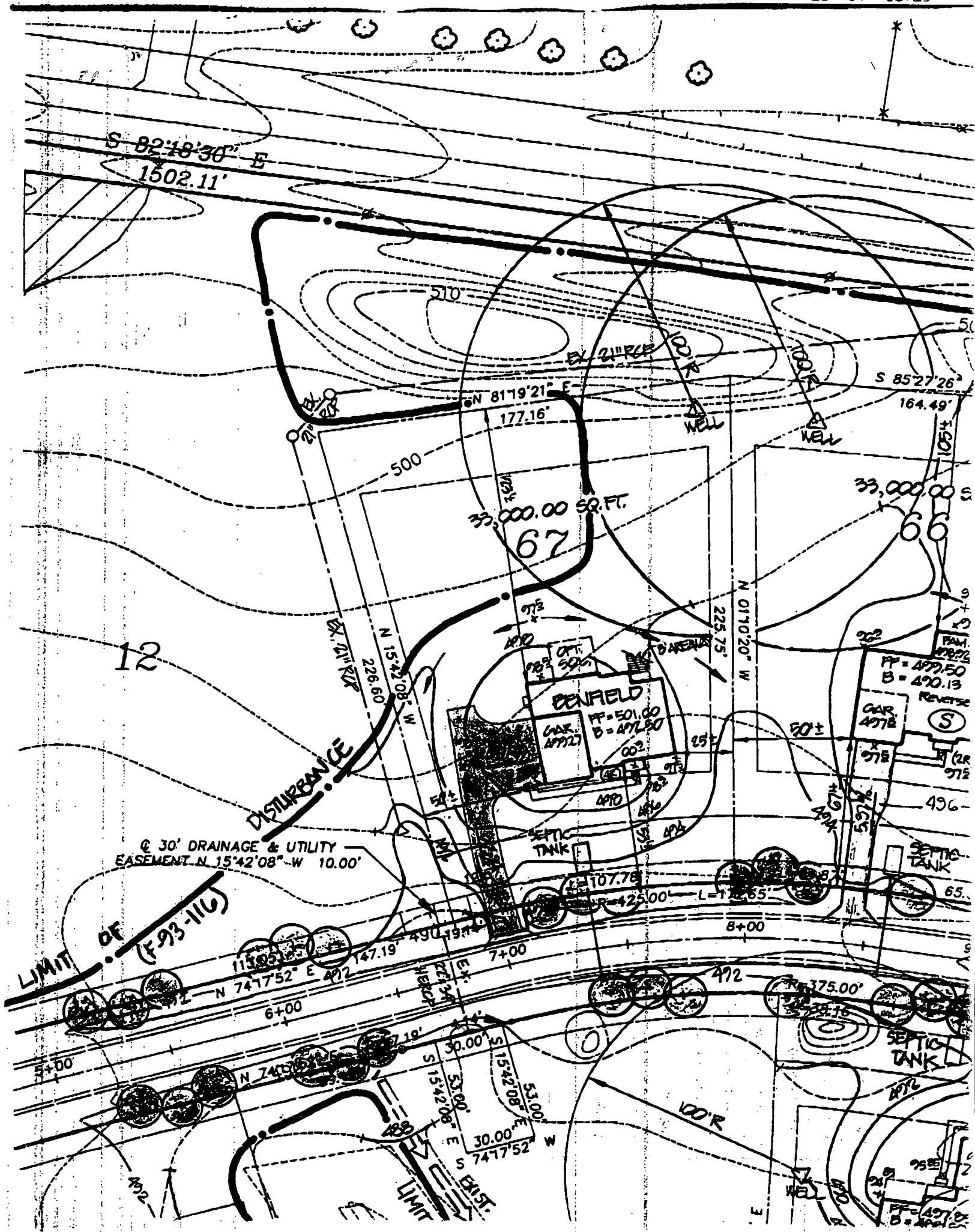
CA

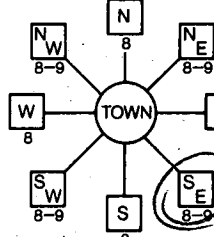
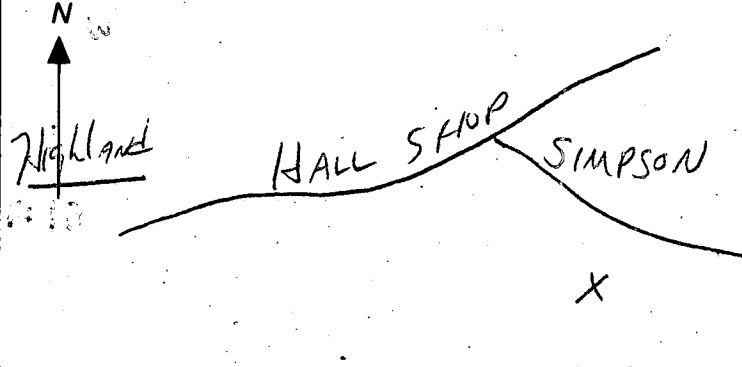
PHASE 1

	LOT 10	LOT 11	LOT 59	LOT 60	LOT 61	LOT 62	LOT 63	LOT 64	LOT 65	LOT 66	LOT 67
FF ELEV	507.0	506.1	497.85		490.52	491.50		503.10	501.00	499.50	501.60
INV. OUT OF HOUSE	501.2 ⁽¹⁾	499.3 ⁽¹⁾	497.85 ⁽¹⁾		494.52	495.50 ⁽¹⁾		497.10 ⁽¹⁾	495.00 ⁽¹⁾	493.50 ⁽¹⁾	495.60 ⁽¹⁾
EXIST. GROUND • SEPTIC TANK	504.0	502.0	499.72		498.02	496.02		498.24	494.42	492.24	497.64
PROP. ELEV. • SEPTIC TANK	504.0	502.0	491.75		497.98	496.40		499.20	496.60	494.30	495.11
INV. IN • SEPTIC TANK	501.0	499.0	498.75		492.60	493.40		495.81	492.54	489.55	490.85
INV. OUT • SEPTIC TANK	500.7	498.7	N/A		N/A	N/A		N/A	N/A	N/A	N/A
EXIST. GROUND • DIST. BOX	510.5	508.0	N/A		N/A	N/A		N/A	N/A	N/A	N/A
INV IN • DIST. BOX	507.5	506.0	N/A		N/A	N/A		N/A	N/A	N/A	N/A

(1) NO SEWER SERVICE TO BASEMENT

SEDIMENT CONTROL NOTES:



B 1 4057	SEQUENCE NO. (DP USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER H0-94-0262 <small>fill in this form completely</small>
Date Received (APA) 120994		B 3 LOCATION OF WELL	
OWNER INFORMATION 15 Last Name WINCHESTER 13 Owner First Name HOMES 34 36 Street or RFD 6305 IVY LANE 55 57 Town GREENBELT 70 State 72 MD Zip 76 20770		8 COUNTY HOWARD 21 23 SUBDIVISION ASHLEIGH KNOLLS 42 SECTION 44 46 LOT 67 50 52 NEAREST TOWN HIGHLAND 71 MILES FROM TOWN (enter 0 if in town) 1 73 MI 76 77 78	
DRILLER INFORMATION George F. Easterday Driller's Name L. Franklin Easterday, Inc. Firm Name 9265 Brown Church Rd., MT. Airy, Md. 21771 Address George F. Easterday 9/19/94 Signature Date		B 4	
WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 5 8 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500 12 14 20		DIRECTION OF WELL FROM TOWN (CIRCLE BOX) 	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="checkbox"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input type="checkbox"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		NEAR WHAT ROAD CHILTON CT ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 34 280 37 DISTANCE FROM ROAD ENTER FT OR MI FT 38 39 TAX MAP: _____ BLK: _____ PARCEL: _____	
APPROXIMATE DEPTH OF WELL 200 24 FEET 28 APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL Howard COUNTY NAME STATE SIGNATURE DATE ISSUED 120994 Mark E. Kiffin CO SIGNATURE NORTH GRID 488000 50 55 EAST GRID 0819000 57 63 SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. wells 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE E 8109 N 4808 000 000 TAO on well GS	
METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jetted & DRIVEN <input checked="" type="checkbox"/> AIR-ROTARY <input type="checkbox"/> AIR-PERCussion <input type="checkbox"/> ROTARY (Hydraulic Rotary) CABLE REVERSE-ROTARY DRIVE-POINT other _____		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
REPLACEMENT OR 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 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 <input type="checkbox"/> THIS WELL WILL DEEPEN 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 GAP 54 63 FORCE MR WRITE INITIALS IN BOX 67 68 PERMIT No. H0-94-0262 70 71 72 73 74 75 76 77 78 79	
SPECIAL CONDITIONS NOTE = APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED = Site inspection before drilling			

C1 5958

SEQUENCE NO.
(DENV USE ONLY)STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPETHIS REPORT MUST BE SUBMITTED WITHIN
45 DAYS AFTER WELL IS COMPLETED.(THIS NUMBER IS TO BE PUNCHED
IN COLS. 3-6 ON ALL CARDS)COUNTY W 50290A
NUMBER

ST/CO USE ONLY

DATE Received

120994

DATE WELL COMPLETED

022795

Depth of Well

22 300 26
(TO NEAREST FOOT)

PERMIT NO.

FROM "PERMIT TO DRILL WELL"

H0-94-0262

OWNER WINCHESTER HOMESSTREET OR RFD last name CHILTON COURT

first name

TOWN HIGHLANDSUBDIVISION ASHLEIGH KNOLLS

SECTION

LOT 67

4/2/12

WELL LOG

Not required for driven wells

STATE THE KIND OF FORMATIONS
PENETRATED, THEIR COLOR, DEPTH,
THICKNESS AND IF WATER BEARINGDESCRIPTION (Use
additional sheets if needed)

FEET

Check
if water
bearing

DESCRIPTION (Use additional sheets if needed)	FEET	Check if water bearing
	FROM	TO
Topsoil	0	2
red clay	2	8
Sand	8	65
gravel	65	67
Sand	67	72
Mica	72	110
Sand Stone	110	111
Mica	111	125
Sand Stone	125	126
Mica	126	300

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)yes ☒ no ☐

TYPE OF GROUTING MATERIAL

CEMENT ☒ BENTONITE CLAY ☐NO. OF BAGS 36 NO. OF POUNDS 3600GALLONS OF WATER 180

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 30 ft.

(enter 0 if from surface)

TOP BOTTOM

(enter 0 if from surface)

casing types insert appropriate code below

STEEL CONCRETE

PLASTIC OTHER

MAIN CASING TYPE

Nominal diameter top (main) casing (nearest inch)

Total depth of main casing (nearest foot)

ST 6 84

60 61 63 64 66 70

OTHER CASING (if used)

diameter depth (feet)

inch from to

EACH CASING

screen type or open hole

insert appropriate code below

STEEL BRASS OPEN HOLE

PLASTIC OTHER

C2

DEPTH (nearest ft.)

1 40 82 300

EACH SCREEN

23 24 26 30 32 36

38 39 41 45 47 51

SLOT SIZE 1 2 3

DIAMETER OF SCREEN (NEAREST INCH)

56 60

from to

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

IN HARD ROCK AREAS, IDENTIFY SPECIFICALLY
WHERE SATURATED FRACTURES WERE OBSERVED.

WELL HYDROFRACTURED

yes ☒ no ☐

Y X

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 PRE-
SENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF
MY KNOWLEDGE.DRILLERS IDENT. NO. 40DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)SITE SUPERVISOR (sign of driller or journeyman
responsible for sitework if different from permittee)

COUNTY

PUMPING TEST

HOURS PUMPED (nearest hour) 3PUMPING RATE (gal. per min. to nearest gal.) 6METHOD USED TO MEASURE PUMPING RATE Buchet

WATER LEVEL (distance from land surface)

BEFORE PUMPING 16WHEN PUMPING 112

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 ☐

(CIRCLE) (YES or 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:

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

(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)

25' well

280

Chilcot CT.

2/28/95 3 HR?
8:30-9:00.

FIELD DATA SHEET

Well Permit No. HO - 94-0262

Location of property (road), Chilson Ct

Subdivision Ashleigh Knolls

Well Driller Easterday

Lot 07 Block Plat Sec.

Owner Winchester Homes

Depth of well 300 3.5 GPM

Distance of measuring point (M.P.) above ground

Static water level (S.W.L.) below M.P.

Time pump started 8:30

Pumping rate 12 gpm

Total time 30 min to reach pumping water level 111 ft. below M.P.

[illegible]

NEED TO MEASURE - WELL TO ROAD

PULLER HIT SAND STAIN ON LOT 66
COULD NOT CLEAR.

OK TO DRILL ANY WHERE ON
UPPER $\frac{1}{3}$ OF THIS LOT.

33,000.00 SQ. FT.

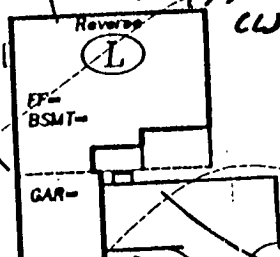
67

WELL SITE

OK

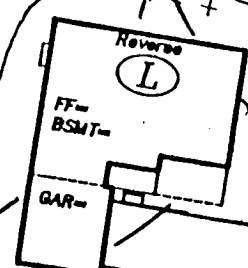
1/2/95

CW

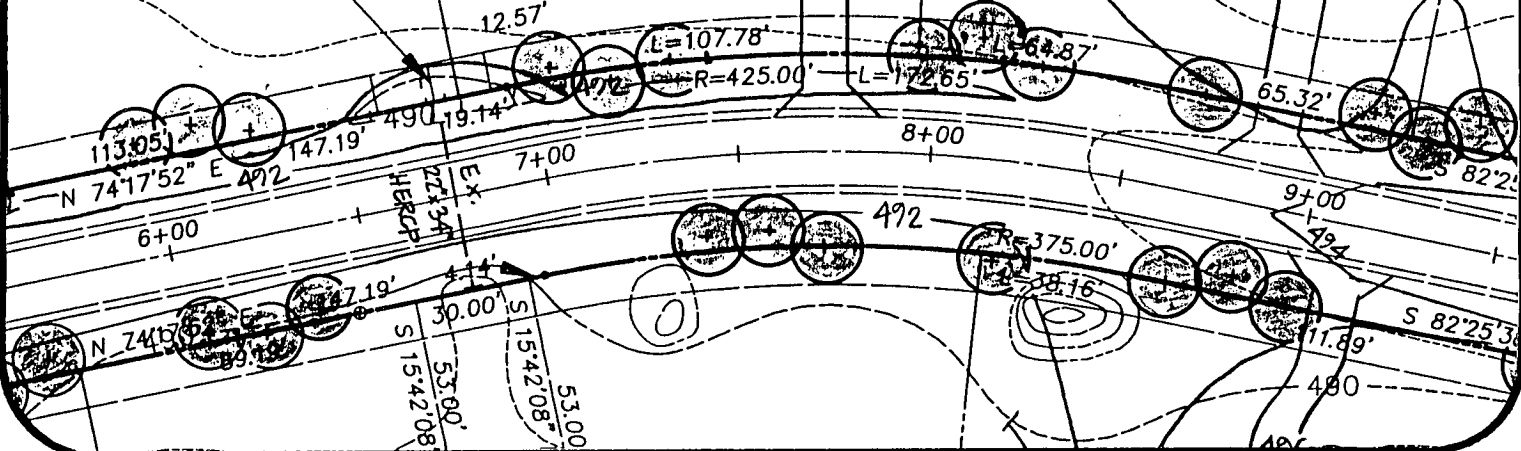


33,000.00 SQ. FT.

66



DRAINAGE & UTILITY
LINE N 15°42'08" W 10.00'



Ashleigh Knolls
Lot 67

DATE: 9/20/94

PROJECT NO.: 89027.06

DRAWN BY: TJP

SCALE: 1" = 50'

R.M. MOCHI GROUP, P.C.

CIVIL ENGINEERS
LAND SURVEYORS

PLANNERS
ENVIRONMENTAL

3300 N. Ridge Road, Suite 235
Ellicott City, MD 21043-3305

(410) 461-0079
Fax: (410) 750-6340

ASHLEIGH KNOLLS

SUBDIVISION:

LOT NUMBER:

DRY WELL OR DRY WELL AND TRENCH

		_____ sq. ft./bedroom
	<u>Septic Tank</u>	<u>Minimum Total Square Feet</u>
3 bedroom	1000 gallon	_____
4 bedroom	1250 gallon	_____
5 bedroom	1500 gallon	_____

Inlet _____ feet below original grade.

Bottom maximum depth _____ feet below original grade.

Effective area begins at _____ feet below original grade.

NOTE: If trench is used to make up absorbent area, run the trench on level ground and leave a 5-foot earth buffer between dry well and trench. No trench is to exceed 100 feet in length. Trench inlet to be same as dry well, with _____ feet of stone below distribution pipe.

1500 GAL. "CUSTOM"
SEPTIC TANK

TRENCHES

N/A sq. ft./bedroom

Trench to be _____ wide.

Inlet _____ feet below original grade.

Bottom maximum depth _____ feet below original grade.

Effective area begins at _____ feet below original grade.

_____ feet of stone below distribution pipe.

- NOTE:
- (1) No trench to exceed 100 feet in length.
 - (2) If more than one trench used, a distribution box is required.
 - (3) Trenches to be installed on level ground.
 - (4) Call for inspection of trench before gravel is installed.
 - (5) Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank and drywell.
 - (6) If a garbage disposal is used, increase septic tank capacity by 50% and increase absorbent sidewall area by 22%.

LOCATION: SHARED DISPOSAL FIELD,

POINT OF CONNECTION IS COMMON SEWER LINE AT
FRONT PROPERTY BOUNDARY.

2/2/95 C. Williams

ASHLEIGH KNOLLS

W50290 A

SUBDIVISION:

LOT NUMBER: 67

DRY WELL OR DRY WELL AND TRENCH

	<u>Septic Tank</u>	<u>Minimum Total Square Feet</u>
3 bedroom	1000 gallon	
4 bedroom	1250 gallon	
5 bedroom	1500 gallon	

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LOCATION: SHARED DISPOSAL FIELD,

POINT OF CONNECTION IS COMMON SEWER LINE AT
FRONT PROPERTY BOUNDARY.

2/2/95 C. Wilkin

ASHLEIGH KNOLLS

SUBDIVISION:

LOT NUMBER:

DRY WELL OR DRY WELL AND TRENCH

		_____ sq. ft./bedroom
3 bedroom	<u>Septic Tank</u> 1000 gallon	<u>Minimum Total Square Feet</u>
4 bedroom	1250 gallon	_____
5 bedroom	1500 gallon	_____

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SEPTIC TANK

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N/A sq. ft./bedroom

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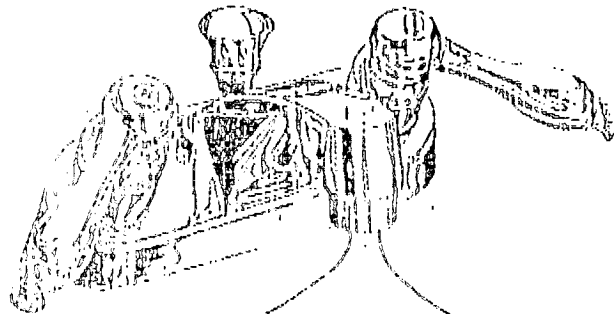
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 - (6) If a garbage disposal is used, increase septic tank capacity by 50% and increase absorbent sidewall area by 22%.

LOCATION: SHARED DISPOSAL FIELD,

POINT OF CONNECTION IS COMMON SEWER LINE AT
FRONT PROPERTY BOUNDARY.

2/2/95 C Wilha

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: 9/10
TO: Craig Williams
FAX #: 2648
FROM: Jim Miller
COMMENTS: Pump Test For Ashleigh Knolls
Lot 101 & Lot 67
Fawn Crossing Chilton
Thur 1:00 PM 9/11

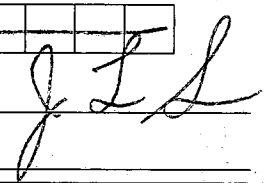
3/10/95 Logged DLS
Lab No. Date Received

0303942 420 8

10:11:00 01/07/93 WATER ANALYSIS

Do not write above this line.

S A M P L E I D	Bottle Number	HO-2518		Name	Winchester Homes		County	Howard	County Code	13
	Source	Ashleigh Knolls, lot 67, Chilton Ct.							Date Category Code	4F
	Collected: Date	2/28/95		Time	10:30		Collector & Phone	D. Soe		
	CHECK (one per box)									
	Drinking Water	<input checked="" type="checkbox"/>	Community	<input type="checkbox"/>	Source (raw water)	<input checked="" type="checkbox"/>	Emergency	<input type="checkbox"/>	Federal Project	S
	Landfill	<input type="checkbox"/>	Non-community	<input type="checkbox"/>	Distribution (treated)	<input type="checkbox"/>	Routine	<input checked="" type="checkbox"/>		
	Stream	<input type="checkbox"/>	Private	<input checked="" type="checkbox"/>	MCL	<input type="checkbox"/>	Recheck	<input type="checkbox"/>		
	Other	<input type="checkbox"/>	Other	<input type="checkbox"/>			Special	<input type="checkbox"/>		

F I E L D	Plant No.	[] [] [] [] [] []		Sampling Station	[] [] [] [] [] []		Preservation: Iced	<input checked="" type="checkbox"/>	Acid	<input checked="" type="checkbox"/>	Type of Acid	H ₂ SO ₄
	pH	[] [] [] []		Chlorine: Free	[] [] [] []		Total	[] [] [] []		Specific Conductance	[] [] [] [] [] []	
	Notes to Lab/Remarks:	110-94-0062										
												

CHECK TESTS	TESTS	CODES	ERROR CODE	G/L	RESULTS	DATE ANALYZED	ANALYST INITIALS
	Alkalinity (Total)	00410					
	Alkalinity, Ca CO ₃ Sat.	74023					
	Ammonia - N	00608					
	Chloride	00940					
	Color*	00081					
	Conductance*, spec.	00095					
	Dissolved Solids	70300					
	Hardness	00900					
	Fluoride	00951					
	Nitrite, N	00615					
<input checked="" type="checkbox"/>	Nitrate - Nitrate, N	00630			0.2	03-01-95	BR
	pH*, Ca CO ₃ SAT	70311					
	Sulfate	00945					
	Total Solids	00500					
	Turbidity*	00076					
	Other:						

* Results reported in Units, all others in milligrams per liter (ppm)

Number of Tests Requested 01

Section Chief Asoka I. Katumuluwa

Date Reported MAR 2 1995

RECEIVED
EDWARD COUNTY
HEALTH DEPT.

95 MAR 10 AM 11:04

Partial List of Submitter Codes

<u>Code</u>	<u>Description</u>	<u>Code</u>	<u>Description</u>
1-30	County Codes	53	Chesapeake Bay & Special Projects
41	Individual Septics & Wells Program	59	Standard & Certification Program
42	Water Supply Program	63	Division of Food Control
43	Recreational Sanitation & Migrant Camps, DHMH	64	Engineering & Maintenance, DHMH
44	STP Inspection Division	65	Division of Community Services
45	Hazardous & Solid Waste Admin. (Landfill Samples)	66	Office of Attorney General
46	Pre-Treatment Enforcement Division	67	Dept. of General Services
48	Licensing and Certification, DHMH	77	E.P.A.
52	Water Quality Monitoring Program	91	State Highway Administration
		96	L.U.S.T./U.S.T./CERCLA
		99	Unknown

Codes for Federally Funded Projects (leave box blank if not federal)

<u>Code</u>	<u>Description</u>	<u>Code</u>	<u>Description</u>
S	Safe Drinking Water Act (SDWA)	N	National Pollution Discharge Elimination System (NPDES)
R	Resource Conservation and Recovery Act (RCRA)	M	Miscellaneous (Other)

Partial List of Data Category Codes

<u>Code</u>	<u>Description</u>	<u>Code</u>	<u>Description</u>
1F	Sediment Samples	2F	Innovative Disposal
2A	Industrial Effluents/Compliance	5A	Solid Waste/Landfills
2B	Industrial Grab	5B	Kidney Dialysis
2C	Municipal Compliance	5C	Commercial Bottled Waters
2D	Municipal Grab	5D	Misc. Wastewaters
4A	MCL Surveys	5E	Misc. River/Stream
4B	Routine Monitoring & Other Communities	5F	Misc. Drinking Water
4D	Potable - County Community	5G	Swimming Pools
4E	Potable - Non Community	5H	Marine or Estuarine Natural Bathing Areas
4F	Potable - Private Wells		
4G	Real Estate Trans./Charge Samples		

Partial List of Error Codes

<u>Code</u>	<u>Description</u>	<u>Code</u>	<u>Description</u>
A	Laboratory Accident	J	Wrong sample type
C	Mechanical/Materials failure	RR	No sample received
D	Insufficient Sample	X	Improper preservation
E	Sample past holding time	LL	Mislabeled sample

APPLICATION

HOWARD COUNTY

PERMIT APPLICATION

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

SERIAL NUMBER

B00111376

B00111376

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

7117 Chilton Court
Clarksville, MD 21029GRADING/SEDIMENT CONTROL ☐ YES ☐ NO

SDP #

DESCRIPTION OF WORK AUTHORIZED

Pressure Treated wood deck - 14' x 25'
to be built 18" off of the ground.

LOT NO.	PARCEL NO.	SEC.	AREA	BLOCK NO.	LIBER	FOLIO
67	665			1		

SUB DIVISION	ZONE	ZONE MAP	ELEC. DIST.	CENSUS TR.
Ashleigh Knolls	RR-DEU	411	5	6551-02

OWNER NAME AND ADDRESS
DeWitt J. Donaldson
7117 Chilton Court
Clarksville, MD 21029

PHONE NO.

410-531-7752

OCCUPANT'S NAME AND ADDRESS

PHONE NO.

Same

ARCHITECT OR ENGINEER'S NAME AND ADDRESS

PHONE NO.

Souder Builders, Inc.
9335 Old Scaggsville Rd.
Laurel, MD 20723

301-725-5772

CONTRACTOR'S NAME AND ADDRESS

PHONE NO.

SOUDER BUILDERS, INC.
9335 Old Scaggsville Rd.
Laurel, MD 20723

301-725-5772

EXISTING USE

SFD

PROPOSED USE

new deck

EST. CONSTRUCTION COST

\$4500.00

LICENSE NUMBER

13-117268

PERMIT FEE

SIZE OF BLDG.	FRONT	DEPTH	HEIGHT
TYPE OF BLDG.	AREA	VOLUME	ROOF
B. ROOMS			
ROOMS			
BATHS			
FIREPLACES			
FOOTINGS	FOUNDATION	S. WALLS	

UTILITIES				
WATERWELL	SEWER/SEPTIC	GAS	ELECTRICITY	TYPE OF HEAT
				AC

I have carefully examined and read this application and know the same is true and correct, and that is doing this work, all provisions of Howard County Ordinances and the State Laws of Maryland will be complied with, whether specified or not; and I will notify the Department of Inspections, and Permits twenty-four hours in advance when I am ready for the inspections called for elsewhere in the application; and that no work will be covered up until such inspections have been completed with.

SIGNATURE

Sec Treas.

4/28/98

TITLE

DATE

W/S CODE

FOR OFFICE USE ONLY

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

SIDE YARD

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

TO SIDE BUILDING LINE

DISTANCE IN FEET, REAR YD. REQUIRING SET

BACK (CORNER LOT ONLY)

SDP #

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

FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING		
SHA		
SEDIMENT/GRADING		
BUILDING OFFICIAL		
WATER & SEWER		
HEALTH DEPT.	4/30/98	C. W. Welch
FIRE PROTECTION		
STORM WATER MGM.		

APPROVED

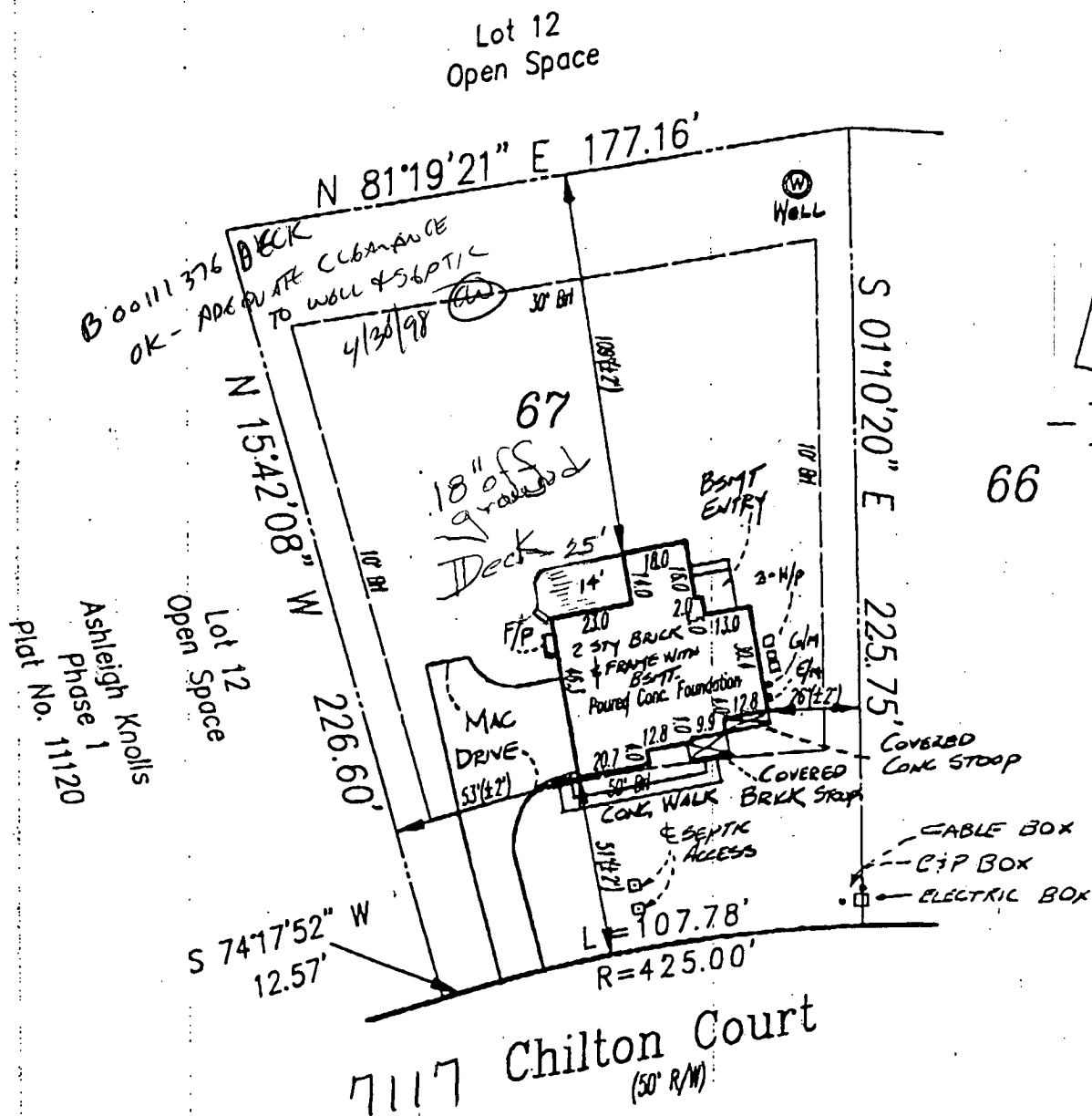
DATE

IMPORTANT: PLEASE SHOW ZIP CODES AND AREA CODES WHEREVER REQUIRED.

LP-69-591

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

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



LEGEND

F/P = FIREPLACE
B/W = BAY WINDOW
D/W = DRIVEWAY
CONC = CONCRETE

O/H = OVERHANG
H/P = HEAT PUMP/AIR COND.
G/M = GAS METER
E/M = ELECTRIC METER

ADDRESS No.: #7117 Chilton Court

TOP OF WALL ELEV. = 499.10 FIRST FLOOR ELEV. =

NO BOUNDARY OR MONUMENTATION ESTABLISHED OR LOCATED.

THE LOCATION DRAWING IS OF BENEFIT TO THE CONSUMER ONLY
INsofar AS IT IS REQUIRED BY A LENDER OR A TITLE INSURANCE
COMPANY OR ITS AGENT IN CONNECTION WITH CONTEMPLATED
TRANSFER, FINANCING OR REFINANCING;

THE LOCATION DRAWING IS NOT TO BE RELIED UPON FOR THE ES-
TABLISHMENT OR LOCATION OF FENCES, GARAGES, BUILDINGS, OR
OTHER EXISTING OR FUTURE IMPROVEMENTS;

AND THE LOCATION DRAWING DOES NOT PROVIDE FOR THE
ACCURATE IDENTIFICATION OF PROPERTY BOUNDARY LINES, BUT
SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER
OF TITLE OR SECURING FINANCING OR REFINANCING.

FLOOD INSURANCE RATE MAP (FIRM) FLOOD ZONE "C"
AREA OF MINIMAL FLOODING
PER COMMUNITY PANEL NUMBER 240044-0038-B

LOT 67

Ashleigh Knolls

Phase Two

PLAT No. 11537

ELECTION DISTRICT No. 5
HOWARD COUNTY, MARYLAND

LOCATION DRAWING

FOUNDATION	DATE: 5/23/97
FINAL	DATE: 9/17/97
DRAWN BY: AWG/DBW	SCALE: 1"=50'
PROJECT No.: 94517.03	

STEVEN R. PETERS
Property Line Surveyor
Maryland No. 582

R.M. MOCHI GROUP, P.C.

CIVIL ENGINEERS
LAND SURVEYORS

PLANNERS
ENVIRONMENTAL

P.O. Box 10
New Market, MD 21774-0010

10120 A Old National Pike
Jiamsville, MD 21754-9706

(301) 865-5858
Fax: (301) 865-5111