

11/15/89

04-347749

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH DISTRICT 4th

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED

P 45225

A 38745

DATE 11/14/89

DATE SYSTEM APPROVED 11/15/89

INSPECTOR M. Rifkin

Dave Hopkins & Son

IS PERMITTED TO INSTALL X ALTER

ADDRESS 17550 Old Frederick Road, Mt. Airy, Maryland 21771 PHONE 831-7257

SUBDIVISION Morgan Station ROAD 842 The Old Station Ct LOT 36

PROPERTY OWNER James Narron

ADDRESS

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

GARBAGE GRINDER? YES NO X

SEPTIC TANK CAPACITY 1750 GALLONS NUMBER OF BEDROOMS 6

TRENCHES - 210 sq. ft. per bedroom. Trench to be 3 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 5.5 feet below original grade. Effective area begins at 4 feet below original grade. 1.5 feet of stone below distribution pipe.

LOCATION - Start the first trench 240 feet from the rear lot line and 25 feet from the right lot line as seen when facing the property from the Right-of-Way. Run trenches along contour toward right-front part of property.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. *OK*

PLANS APPROVED BY C. Williams/Sid Abel DATE 9/06/88-5/16/88

COVER NO WORK UNTIL INSPECTED AND APPROVED

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX, TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCHES ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCHES

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 40 PVC OR ABS

PERMIT VOID AFTER TWO YEARS

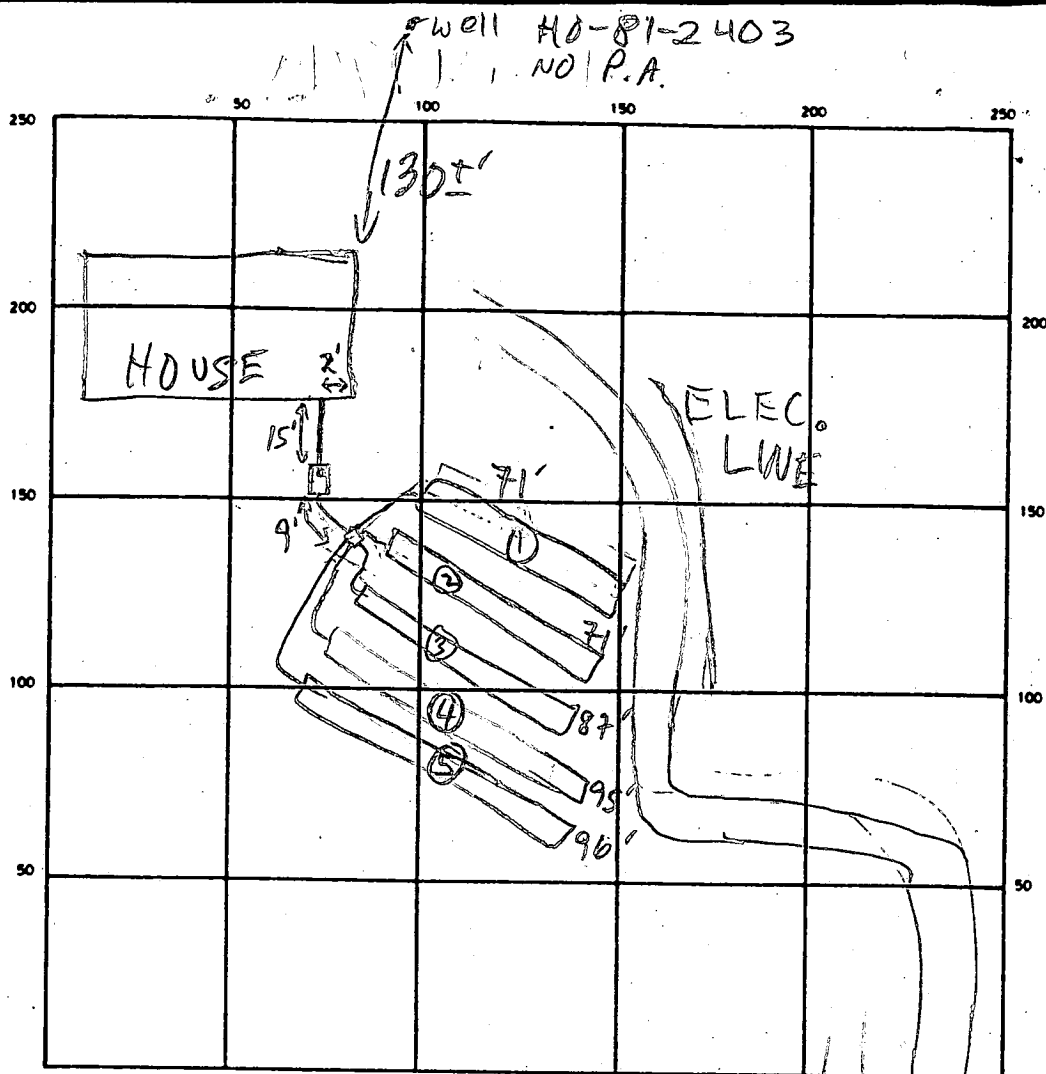
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

BLDG. PERMIT
AND RETURNED 7/5/95
Serial # 60538 -
2 car garage

***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

***CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.**



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
THE OLD STATION CT

SEPTIC TANK. LEVEL 2000 GAL - OK CLEANOUTS S.T. - OK
DISTRIBUTION BOX. LEVEL OK BAFFLE IN
DRAIN FIELD/TILE FIELD. DEPTH 5.5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 4 FT.
EFFECTIVE GRAVEL DEPTH 1.5 FT. TOTAL LENGTH ① 71 ② 71 ③ 87 ④ 95 ⑤ 96 } 420 FT.
NUMBER OF TRENCHES 5 ONE SIDEWALL/BOTTOM AREA 1260 SQ. FT.
DRYWELL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.
ABSORBENT AREA — SQ. FT.

REMARKS 11/15/89 OK TO CONTINUE W/TRENCHES (4) & (5); FALL
FROM HOUSE TO TANK 1/2" PER FOOT, BUT DIDN'T SEE
NEED TO FORCE INSTALLER TO RESET TANK MR
11/15/89 OK TO COVER ALL MR

DATE SYSTEM APPROVED 11/15/89 INSPECTOR M. R. Fick

APPLICATION

PERCOLATION TESTING

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

A 38745

P _____

DISTRICT 4

DATE 12/17/86

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Ray W. Crum + wife JAMES NARRON

ADDRESS 791 Morgan Station Rd PHONE 489-4995

PROSPECTIVE BUYER Hemphill Partnership

ADDRESS 10176 Baltimore National Pike Suite 210 PHONE 465-5855

PROPERTY LOCATION:

SUBDIVISION Morgan Station (Crum Property) LOT NO. 4X

ROAD AND DESCRIPTION E/S Morgan Station Rd north of Old Frederick Rd

842 The Old Station Ct.

TAX MAP 3 PARCEL # 9

SIZE OF LOT 3 acres TYPE BLDG. SFD

(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE

FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY

WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

(SIGNATURE OF APPLICANT)

APPROVED BY Sid Ulup FOR Standard Trunchy DATE 5-16-89

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 5/18/87 HOLD FOR CERTIFIED PLAT

LOT LINE CHANGED FORM ORIGINAL TEST PLAT B/A

BLDG. PERMIT SIGNED

AND RETURNED 5-16-89

BP5743 SA

THIS IS NOT A PERMIT

LOT
NEW
44

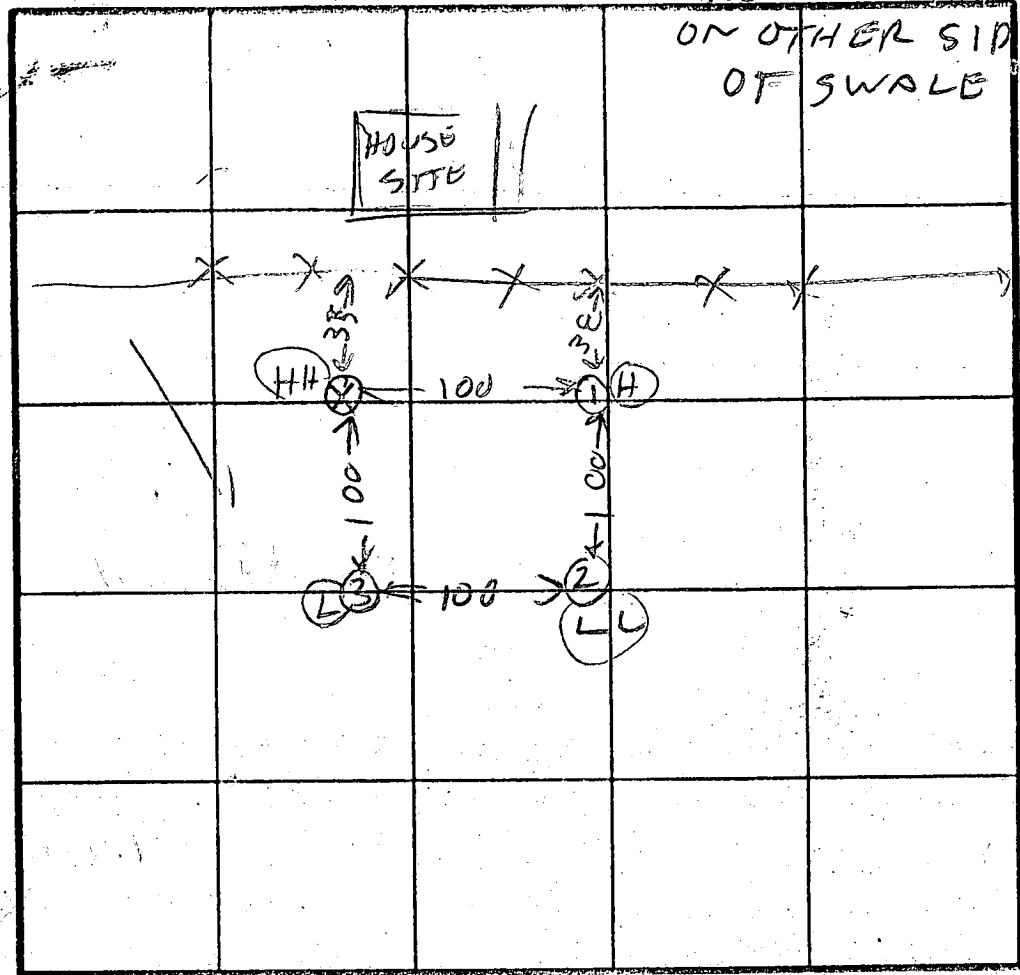
(W)

IN BACK OF
HOUSE ON HILL
ON OTHER SIDE
OF SWALE

14
2
28
7
30

SOIL PROFILE

CLAY
BROWN
SAND
SILT
SILT
LOAM



H

2 Pene
12 min
210 #12
Inlet 3'
Bottom 5'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

(2)
CLAY
BROWN
SAND
SILT
LOAM

WATER

(3)
BROWN
CLAY
BROWN
SAND
SILT
LOAM

DATE	TEST NO.	DEPTH	PRE-WET		TEST 1" DROP		TIME
			START	STOP	START	STOP	
5/8/87	1 S	2.5	1042	1048	1048	1054	2
	1 V	8.5	1044	1046	1046	1054	8
	IV	11	OK				
	2 S	2.5	1048	1054	1054	1112	18
	2 V	12	OK				
	3 S	3	1055	1108	1108	1128	20
	3 V	11.5	OK				
	(X) V		COVERED SEE SHEET FOR LOT 44				

Plc Hole & Lot lines changed from
original Test Plot

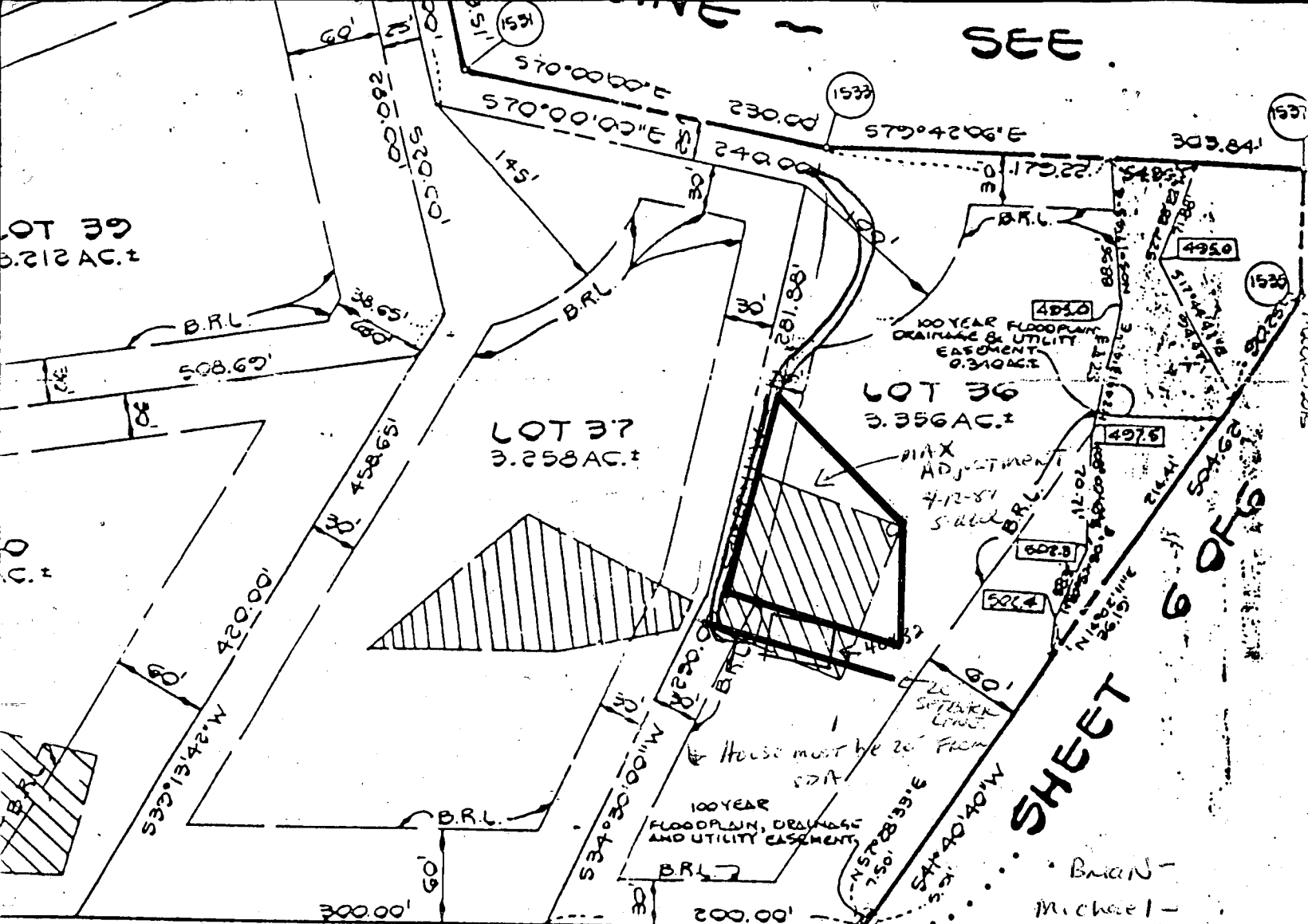
HOLE (X) IS A NON-LINE HOLE BETWEEN LOT 44 & LOT 43
HOLES (1) (2) (3) ARE ON ORIGINAL LOT 44

REMARKS: DIFFERENT PERCHOLDS FROM ORIGINAL TEST PLOT
KETTERMAN SAID SID DRIED WET SEASON
TYPE OF SOIL WAS EXTENDED FOR THIS PERCH

TESTED BY R. HODGES

ALSO PRESENT RILEY OR
OK KETTERMAN

EH 12-1079



AND DEVELOPER

EMPHILL AND ASSOCIATES
P.O. BOX 15
ELICOTT CITY, MARYLAND 21043

Jim Narron
489-4715 M
549-3360 (W)

FISHER, COLLINS AND CARTER,
CONSULTING ENGINEERS AND LAND SURV
8388 COURT AVENUE
ELICOTT CITY, MARYLAND 21043
TELEPHONE (301) 461-2855

SURVEYOR'S CERTIFICATE
I HEREBY CERTIFY THAT THE FINAL PLAT SHOWN HEREON
IS THAT IT IS A SUBDIVISION OF PART OF THE LAND
CONVEYED BY ROY W. CRUM, SR. AND KATHERINE H.
CRUM, HIS WIFE, TO HEMPHILL AND ASSOCIATES BY DEED
RECORDED AUGUST 31, 1987 AND RECORDED AMONG THE LAND
RECORDS OF HOWARD COUNTY, MARYLAND IN C.M.P. BOOK 1721
PAGE 166, AND ALSO THAT IT IS A RESUBDIVISION OF
THE LAND AS SHOWN ON A PLAT ENTITLED "THE SOUTHERN STATION"
RECORDED AMONG THE SAID LANDS RECORDS AS PLATS C.M.P.
BOOKS 7348, AND THAT ALL MONUMENTS ARE IN PLACE
AND BE IN PLACE PRIOR TO ACCEPTANCE OF THE STRAIGHT
SUBDIVISION BY HOWARD COUNTY AS SHOWN IN ACCORDANCE
WITH ANNOTATED CODE OF MARYLAND, AS AMENDED.

MORGAN STATION
LOTS 5-42

(A RESUBDIVISION OF LOT 3
THE SOUTHERN STATION.)

TAX MAP 3
P/O TAX MAP PARCELS 9 & 11
ZONING R
FOURTH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND

SCALE: 1"=100' FEBRUARY 26, 1988

SHEET 2 OF 6

FISHER, L.S. #10692

3/7/88
DATE

588-06

PBB-25

FBB-132

PERCOLATION TEST DATA				
LOT NO.	PREVIOUS LOT NO.	AVERAGE PERC. TIME IN MINUTES PER SECOND INCH.	MAX. DEPTH PERMITTED FOR EFFLUENT PIPE TO ENTER SEWAGE DISPOSAL AREA AT ITS HIGHEST ELEV. WITH REFERENCE TO EXISTING GRADE AT TIME OF PERC. TEST	
			INLET	BOTTOM
5	3	13	4.5	6.5
6	11	12	4.0	7.0
7	12	9	3.0	5.0
8	13	9	3.0	5.0
9	16	9	3.0	5.0
10	15	9	3.0	5.0
11	14	13	3.0	5.0
12	17	6	3.0	5.0
13	18	7	3.0	5.0
18	22	5	3.0	5.0
19	25	9	3.0	5.0
38	48	12	3.0	5.0
39	47	8	3.0	6.0
40	46	8	3.0	6.0
41	3	20	3.0	6.0
42	2	14	3.0	6.0

APPROVED FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEM, HOWARD COUNTY HEALTH DEPT.
Joyce B...
 COUNTY HEALTH OFFICER
 DATE 12-2-87

Chief Commr.

Signed

FILE COPY

PRELIMINARY PLAN MORGAN STATION

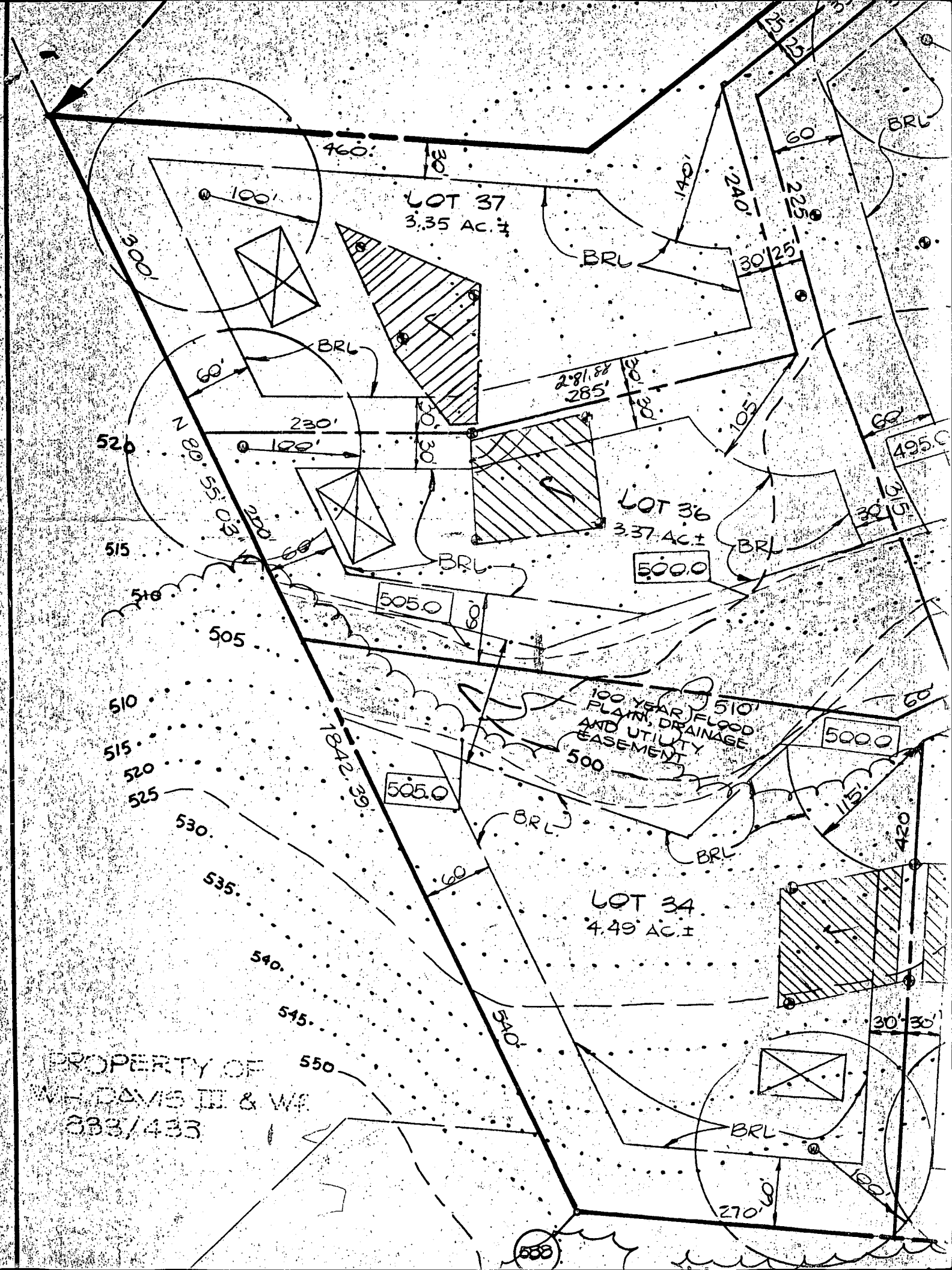
A RESUBDIVISION OF LOT 3
THE SOUTHERN STATION
LOTS 5-42

4th ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
TAX MAP 3, PARCEL 9&11

SCALE: 1"=100' NOVEMBER 23, 1987

SHEET 1 OF 2 S-88-06

P88-25



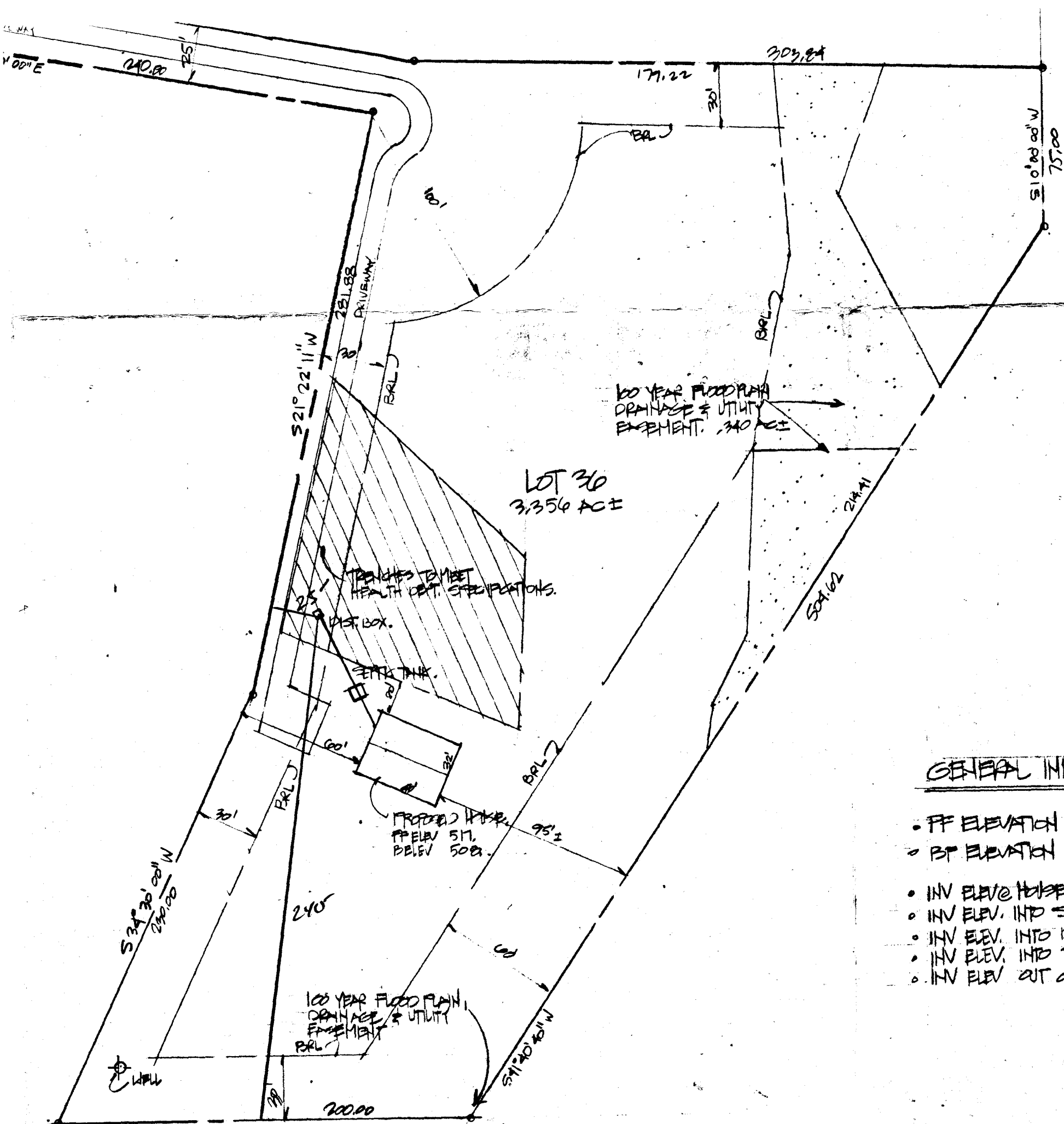
LOT 37
3.35 AC. ±

LOT 36
3.37 AC. ±

LOT 34
4.49 AC. ±

100 YEAR FLOOD
PLAIN, DRAINAGE
AND UTILITY
EASEMENT

PROPERTY OF
W.H. DAVIS III & W.F.
833/433



GENERAL INFORMATION.

- FF ELEVATION +517'-0" ✓
- BT ELEVATION +508'-0" ✓
- INV ELEV. H/W +513'-0" ✓ - BSM
- INV ELEV. INTO SEPTIC TANK +512'-10" ✓
- INV ELEV. INTO DIST. BOX. +512'-0" ✓
- INV ELEV. INTO TRENCH. +512'-0" ✓
- INV ELEV. OUT OF SEPTIC TANK. +512'-0" ✓
- EXISTG ELEV. @ SEPTIC TANK +516'-0" ✓
- EXISTG ELEV. @ DIST. BOX +516'-0" ✓
- EXISTG ELEV. @ TRENCH +515'-0" ✓
- ELEV. @ WELL +520'-0" ✓
- SEPTIC TANK CAPACITY 1500 GAL.
- TRENCH CAPACITY 3'W x 5'D x 300' L W/ 2' STONE

NARRON RESIDENCE

SUBDIVISION - MORGAN STATION LOT #30
MORGAN STATION COURT.

SHEET TITLE

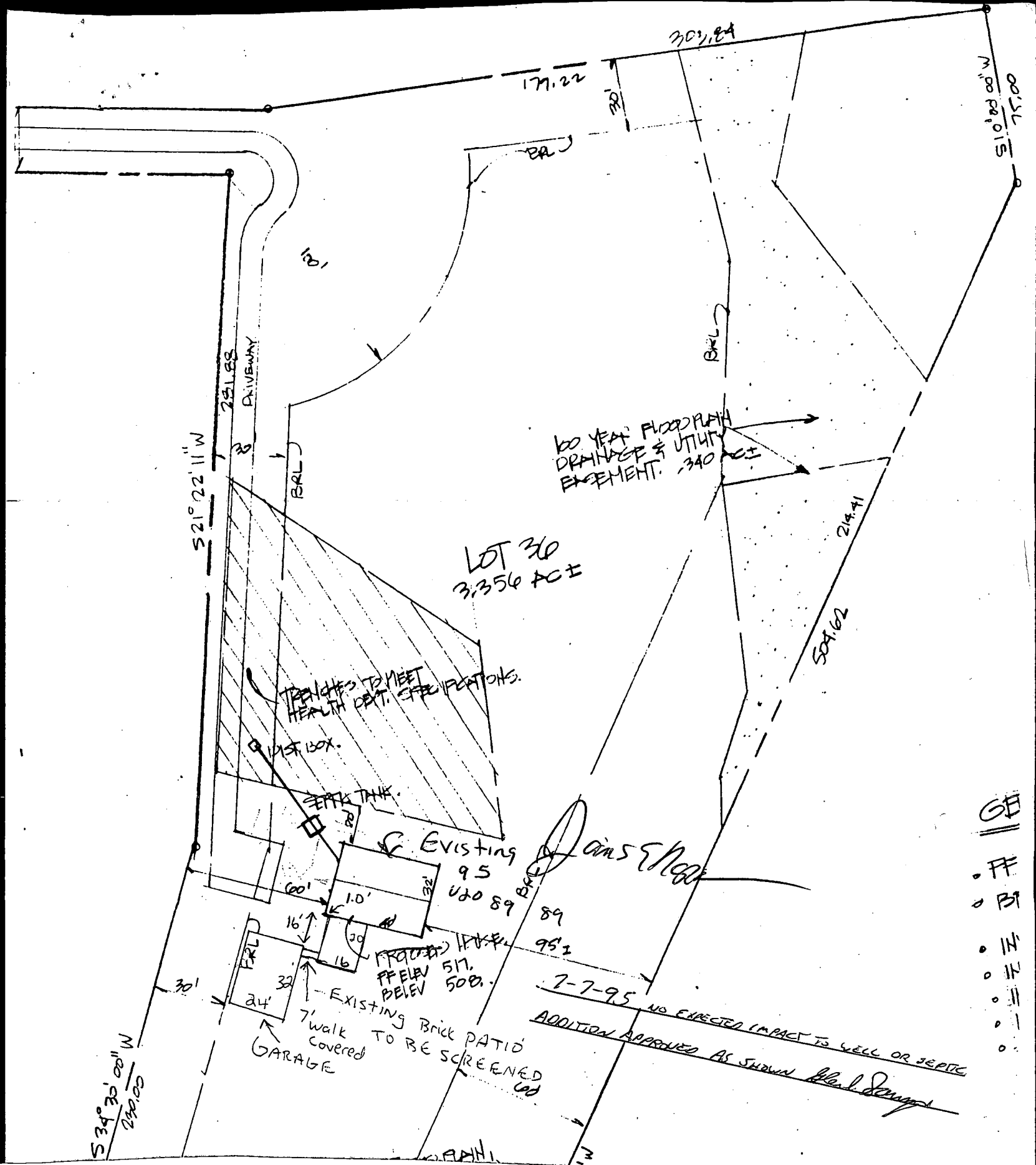
PLOT PLAN.

ENG. PERMIT SIGNED
AND RETURNED 5-16-89

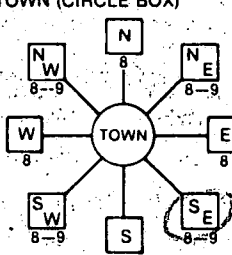

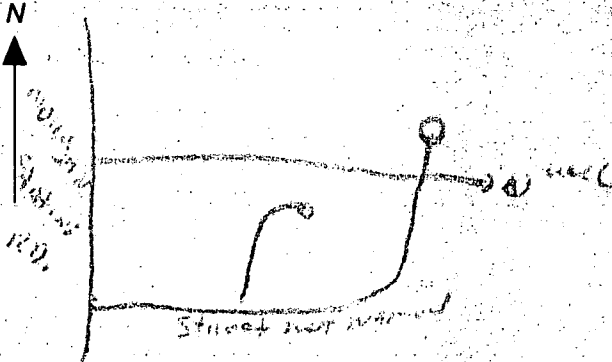
886-
BP25743

DATE _____
SCALE 1"=5'-0"
DRAWN BY EIB

SHEET NO.
10



B 1 7113 SEQUENCE NO. (DP USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER 40-81-2403 fill in this form completely
Date Received (APA) 061788		
OWNER INFORMATION 15 Last Name TRINITY Owner First Name PIATUNSHIP 36 Street or RFO 14711 KESTALA WAY 57 Town DAYTON 70 State 72 Zip 4536		
DRILLER INFORMATION Driller's Name Ralph Wayne 77 License No. 80 Firm Name Ralph Wayne Well Drilling Address 7120 Brown Church Rd Mt Dora Signature Ralph Wayne Date 6/13/88		
WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 5 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500		
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)		
APPROXIMATE DEPTH OF WELL 150 FEET APPROXIMATE DIAMETER OF WELL 6" NEAREST INCH		
METHOD OF DRILLING (circle one) BORED (or Augered) <input checked="" type="checkbox"/> JETTED <input type="checkbox"/> Jetted & DRIVEN <input type="checkbox"/> AIR-ROTARY <input checked="" type="checkbox"/> AIR-PERCussion <input type="checkbox"/> ROTARY (Hydraulic Rotary) <input type="checkbox"/> CABLE <input type="checkbox"/> REVERSE-ROTARY <input type="checkbox"/> DRIVE-POINT <input type="checkbox"/> 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 <input type="checkbox"/> THIS WELL WILL DEEPMEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) _____		
Not to be filled in by driller (OEP USE ONLY) APPROP. PERMIT NUMBER _____ GAP _____ FORCE 54 INITIALS 54 PERMIT No. 40-81-2403		
SPECIAL CONDITIONS		

B 3 LOCATION OF WELL 8 COUNTY HOWARD 21 23 SUBDIVISION MORGAN STATE 42 SECTION 1 44 46 LOT 316 48 50 52 NEAREST TOWN LOCUSTVILLE 71 MILES FROM TOWN (enter 0 if in town) 2 73 76 77 78 MI	B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  NEAR WHAT ROAD THE OLD STATION CC ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  34 3500 37 DISTANCE FROM ROAD ENTER FT or MI 38 39
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL COUNTY NAME Howard COUNTY NO. A-38745 STATE SIGNATURE _____ DATE ISSUED 062988 INSERT S <input type="checkbox"/> CO SIGNATURE _____ EXP. DATE 12-28-88 NORTH GRID 552000 50 55 EAST GRID 0789000 57 63	
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. well 2. well 3. well WRITE THE BOX NUMBER FROM THE MAP HERE E 2849 N 5002 000 000	
DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	

C1 2009 SEQUENCE NO. (OEP USE ONLY)

1 2 3 6
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

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 A 38745

DATE Received 8 13 DATE WELL COMPLETED 07/28/08 Depth of Well 22 205 26 (TO NEAREST FOOT) PERMIT NO. FROM "PERMIT TO DRILL WELL" MO-81-2403 28 29 30 31 32 33 34 35 36 37

OWNER ASSOCIATES HEMPHILL last name first name STREET OR RFD MORGAN STATION ROADS TOWN WOODBINE SUBDIVISION MORGAN STATION SECTION LOT 36

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 FROM TO	Check if water bearing
Top Soil	0 2	
Brown Shale	2 30	
Brown Slate	30 35	✓
Blue Slate	35 55	
Brown Slate	55 60	✓
Blue Slate	60 205	

GROUTING RECORD
WELL HAS BEEN GROUTED (Circle Appropriate Box) YES ☒ NO ☐
TYPE OF GROUTING MATERIAL CEMENT ☒ BENTONITE CLAY ☐
CEMENT ☒ BENTONITE CLAY ☐
NO. OF BAGS 10 NO. OF POUNDS 1000
GALLONS OF WATER 60
DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 36 ft.
(enter 0 if from surface)

CASING RECORD
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)
PL 6 40

OTHER CASING (if used)
diameter inch depth (feet) from to

SCREEN RECORD
screen type or open hole insert appropriate code below
STEEL ☐ BRASS ☐ OPEN ☒
BRONZE ☐ HOLE ☐
PLASTIC ☐ OTHER ☐

DEPTH (nearest ft.)
H 0 38 205
EACH SCREEN 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

CIRCLE APPROPRIATE LETTER
A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED
E ELECTRIC LOG OBTAINED
P TEST WELL CONVERTED TO PRODUCTION WELL

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 10.17.13 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS IDENT. NO. 223
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

SLOT SIZE 1 2 3
DIAMETER OF SCREEN (NEAREST INCH)

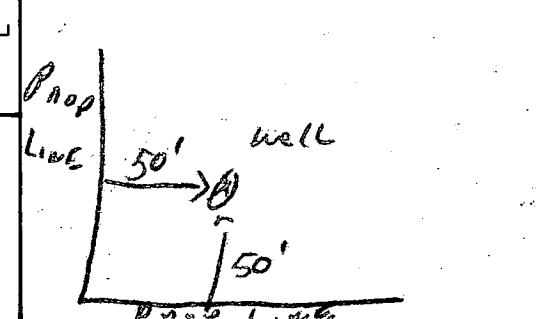
GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

OEP 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) 3
PUMPING RATE (gal. per min. to nearest gal.) 9
METHOD USED TO MEASURE PUMPING RATE Bucket
WATER LEVEL (distance from land surface) BEFORE PUMPING 30
WHEN PUMPING 45
TYPE OF PUMP USED (for test) A air P piston T turbine C centrifugal R rotary O other (describe below) J jet S submersible

PUMP INSTALLED
DRILLER WILL INSTALL PUMP YES ☒ NO ☐
IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE
TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE:
CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 35
PUMP HORSE POWER 37 41
PUMP COLUMN LENGTH (nearest ft.) 43 47
CASING HEIGHT (circle appropriate box and enter casing height) + above - below LAND SURFACE (nearest foot) 2

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)



Well Permit No. HO - 81-2403

Subdivision MORGAN STATION

Lot 36 Block Plat Sec.

Well Driller RALPH MAINE

Owner ASSOCIATES HEMPHILL

Depth of well 205'

Distance of measuring point (M.P.) above ground 277

Static water level (S.W.L.) below M.P. 30 ft

Time pump started 9:15 Pumping rate 16 G.P.M

Total time 15 min to reach pumping water level 45 ft. below M.P.

[illegible]

40' PL - 36 gm 10 Buz

11-17-89

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 # 45243
Date 11/16/89

Name of Installer T.M. Barnard/PlumbingTelephone 461-6599License Number #7248

Certified Well Pump Installer ☐ Well Driller ☐ Registered Plumber ☒

Name of Property Owner Hannon Telephone
Subdivision Morgan Station Lot # 36 Well Tag # 40-81-2403
Site Address 8421 The Old Station Co.

Pump	Motor	Pitless Adapter
1. Type	1. Horsepower <u> </u>	1. Make <u> </u>
a. Deep well jet <u> </u>	2. RPM <u> </u>	2. Model # <u> </u>
b. Shallow well jet <u> </u>	3. Voltage <u> </u>	3. Depth <u> </u>
c. Submersible <input checked="" type="checkbox"/>	a. 110 <u> </u>	
2. Make <u> </u>	b. 220 <u> </u>	
3. Model # <u> </u>		
4. Capacity <u>7</u> GPM		
5. Pump exceeds well capacity Yes <u> </u> No <input checked="" type="checkbox"/>		
6. If Yes, is low pressure cutoff switch installed? Yes <u> </u> No <u> </u>		
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors <u> </u> Cable guards <u> </u> Other <u> </u>		

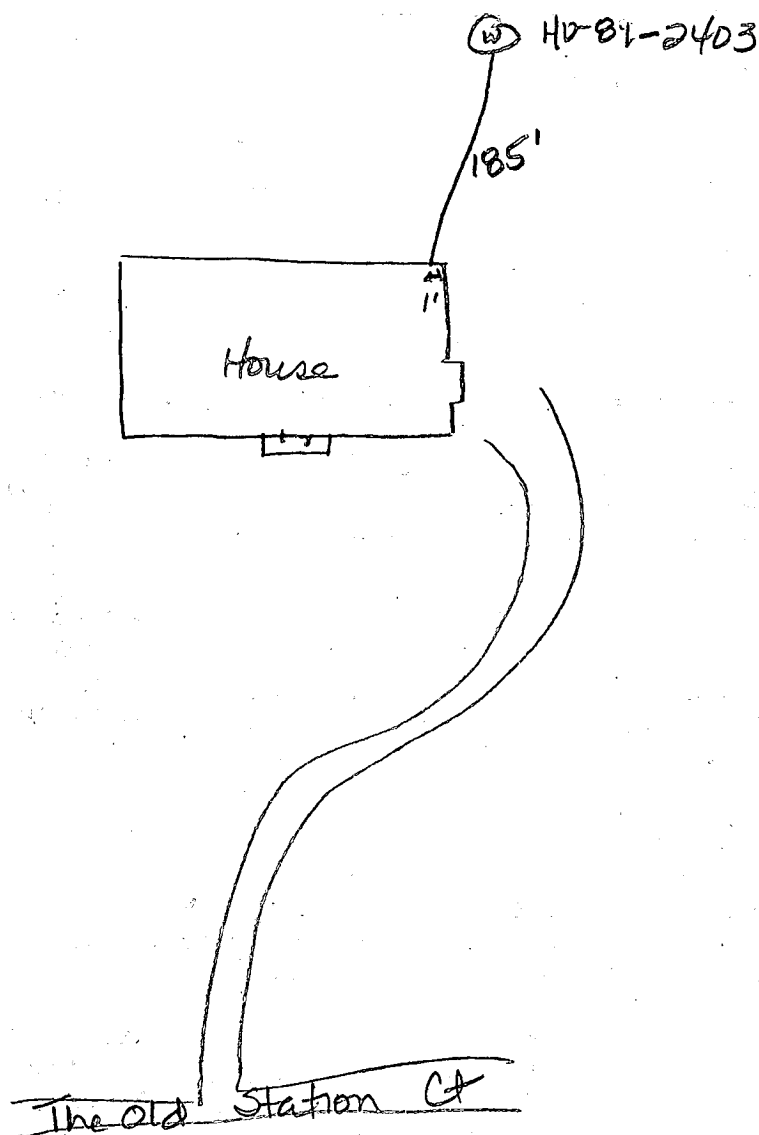
Tank	Piping	Well data
1. Capacity <u> </u>	1. Type <u> </u>	1. Depth <u> </u> ft.
2. Pressure relief valve? <u> </u>	2. Size <u> </u>	2. Yield <u> </u> GPM
	3. NSF and/or BOCA Code approved <u> </u>	3. Static water level <u> </u> ft.
	4. Depth of supply line <u> </u>	4. Will water supply be disinfected by installer? <u> </u>

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: Timothy M. BarnardDate: 11/16/89

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



11-1789

Pitless adaptor at 41 inches below grade. Well line at 48 inches below grade.
House connection ok. Plastic casing - no ground line. JENadeau