

03-298175

# PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH\*

DISTRICT 3rd

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH

461-9933

INDEXED

DATE 5/13/87DATE SYSTEM APPROVED 5/22/87INSPECTOR PAHerman SirkIS PERMITTED TO INSTALL X ALTERADDRESS 2555 Jennings Chapel Road, Woodbine, Maryland 21797 PHONE 489-4724SUBDIVISION Warfield Property ROAD 1975 Sand Hill Road LOTPROPERTY OWNER Gordon Warfield

ADDRESS

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

GARBAGE GRINDER? YES NO XSEPTIC TANK CAPACITY 1000 GALLONS NUMBER OF BEDROOMS 3

TRENCHES - 160 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 3.5 feet below original grade. Broom maximum depth 8.5 feet below original grade. Effective area begins at 3.5 feet below original grade. 5 feet of stone below distribution pipel.

LOCATION - Place the distribution box or start the trench 375 feet from the front lot line and 130 feet from the right lot line as seen when facing the lot from Sand Hill Road.

Run trench(s) on contour toward left and right lot lines.

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

PLANS APPROVED BY Sid AbelDATE 5/13/87

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 TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES).

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.

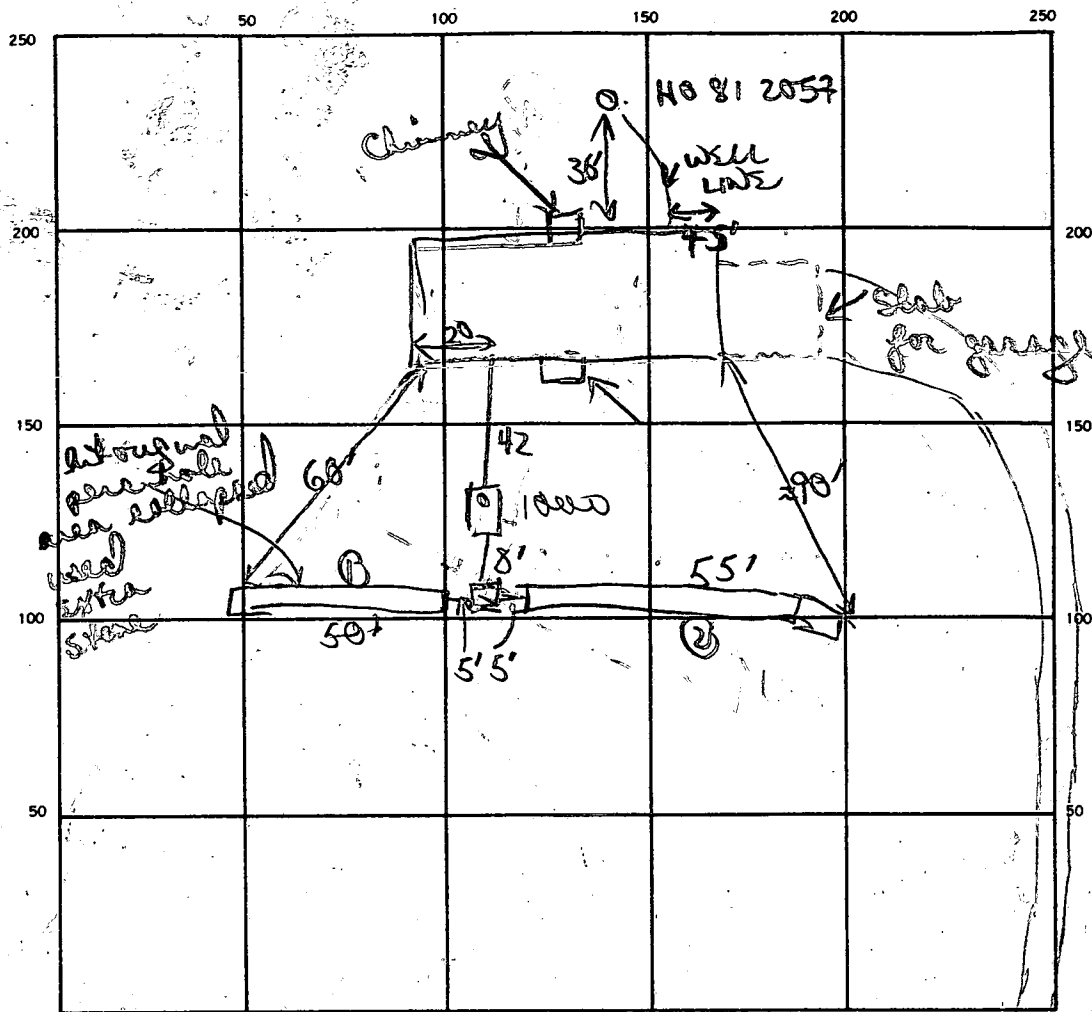
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES.

\*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT

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

EH - 2-1186

A 388889



✓ final

To RTE 99 ← SAND HILL RD

SEPTIC TANK LEVEL 1000 ✓ CLEANOUTS 18T

DISTRIBUTION BOX LEVEL OK ✓

DRAIN FIELD/TILE FIELD. DEPTH #1 #2 2' 8" FT. TRENCH WIDTH #1 #2 2' 6" FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 5' 5' FT. TOTAL LENGTH 50' 55' FT.

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 250 + 275 SQ. FT.

DRYWELL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA 525 SQ. FT.

REMARKS 5/19/87 LOCATION OK PER PLAN LENGTHEN TRENCH

#1 25 FT ADD 5 FT OF STONE TO BOTH TRENCHES

FINISH JOB & CALL B/H

5/24/87 OK to finish adding stone to trench #1. OK to  
cover both trenches & all work. OK'd WPT also.

DATE SYSTEM APPROVED 5/22/87

INSPECTOR B Nipon

*Revised 4-1-87 11:30 PM*

# APPLICATION

PERCOLATION TESTING

A 38889  
P \_\_\_\_\_

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

DISTRICT 3rd

DATE 3/09/87

*ok to process  
3/9/87  
SA*

TO: THE COUNTY HEALTH OFFICER  
ELLICOTT CITY, MARYLAND

*Called date to Mr. Warfield 3/17/87*

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

PROPERTY OWNER J. Gordon Warfield

ADDRESS 1970 Sand Hill Road, Marriottsville, Maryland 21104 PHONE 442-1477

PROSPECTIVE BUYER \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

PROPERTY LOCATION:

SUBDIVISION Warfield Property LOT NO. \_\_\_\_\_

ROAD AND DESCRIPTION 1975 Sand Hill Road

TAX MAP 16 PARCEL # 150

SIZE OF LOT 27 Acres TYPE BLDG. Tenant House  
(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.

*J. Gordon Warfield*  
(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

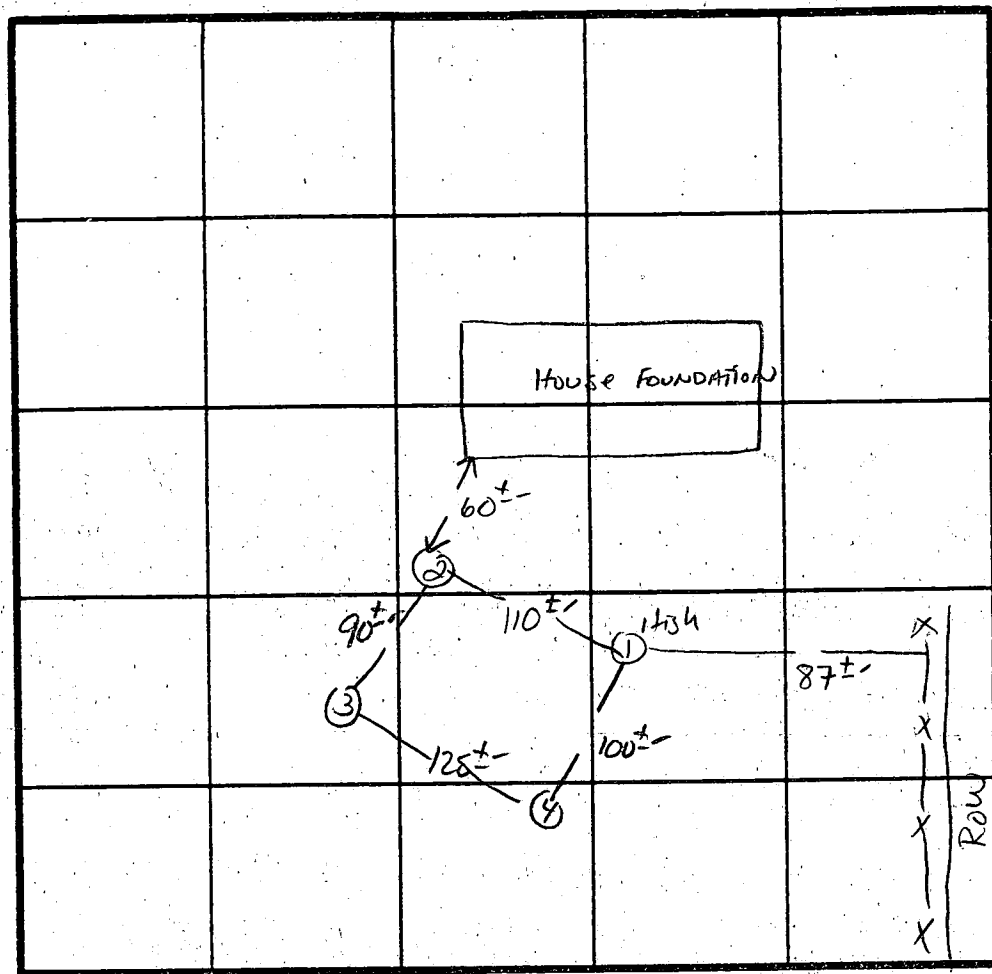
HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING 4-1-87 PERC SATISFACTORY HOLD FOR PLAT. S. Hall

BLDG. PERMIT SIGNED  
AND RETURNED 5/13/87

*PP# 11866  
SALE*

# THIS IS NOT A PERMIT



① ② ③ ④  
SOIL PROFILE

0	1A
10"	Yellow BA Silt LOAM 90% CLAY 15-20% MICHIGAN FRAGS
3.5'	Yellow BA Highly MICHEOUS Silt LOAM 15-20% FRAGS
12.5-13'	

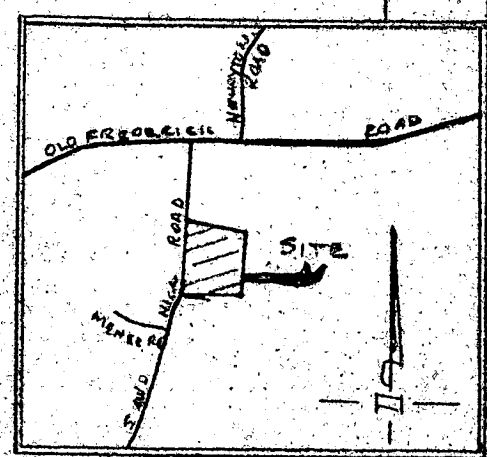
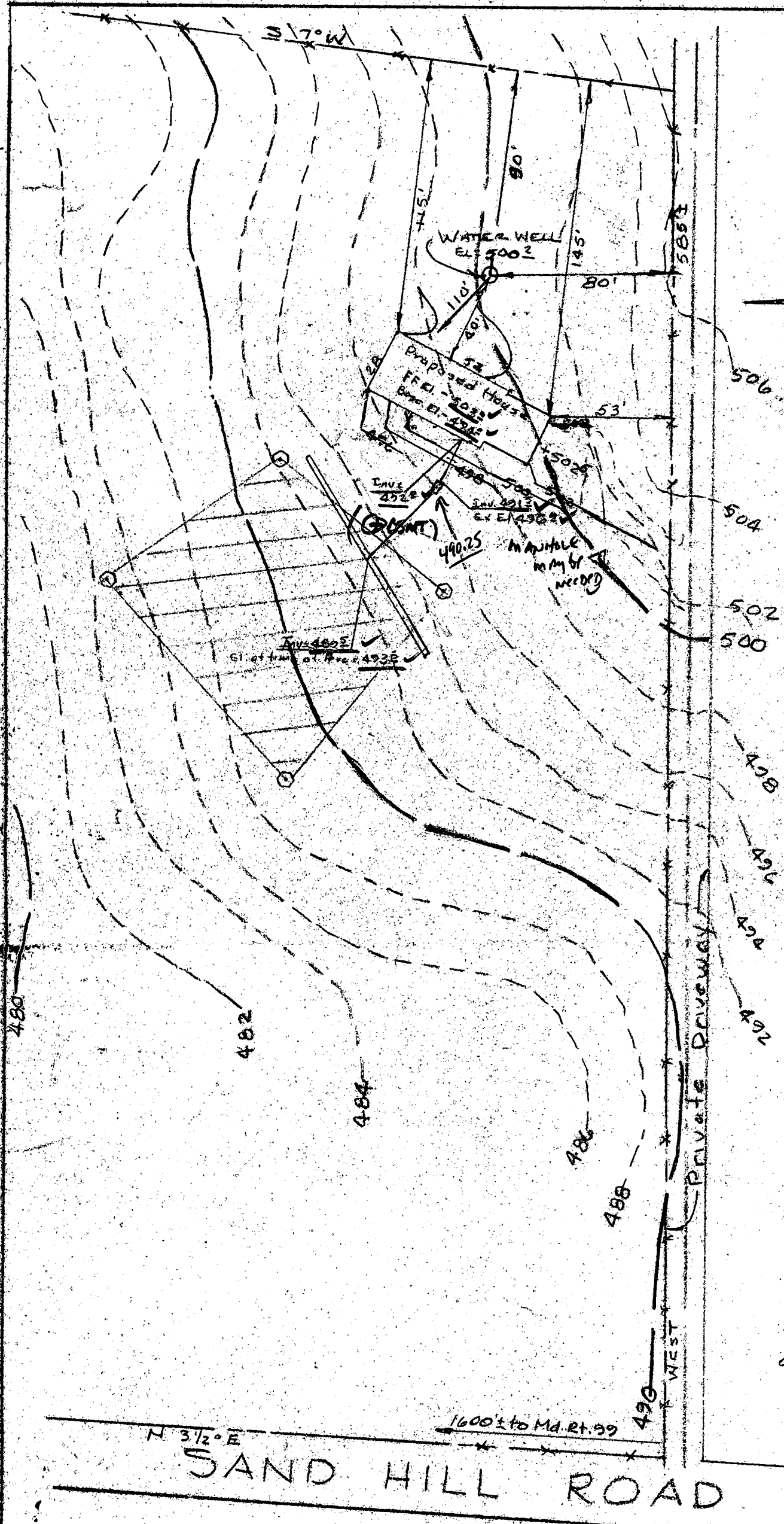
INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.  
SAND HILL Rd.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/1/87	1 S M	4'	11:41	11:45	11:45	11:51	6 min
		8'	11:40	11:44	11:44	11:50	6 min
	1 V	12.5'	UNIFORM Soil below 3.5 ft				
	2 S V	4'	11:42	11:44	11:44	11:47	3 min
		12.5'	UNIFORM Soil below 3.5'				
	3 S V	4'	11:46	11:48	11:48	11:51	3 min
		12.5'	UNIFORM Soil below 3.5'				
	4 S V	4'	11:50	11:53	11:53	11:58	5 min
		13.0'	UNIFORM Soil below 3.5'				

REMARKS \_\_\_\_\_

TYPE OF SOIL Glenelg

TESTED BY S. Abel ALSO PRESENT H. SICK + JR.



PLOT PLAN  
P/O  
PARCEL 150  
MAP 10  
Third Election Dist.  
MARRIOTTSTVILLE  
Howard County, Md.  
Scale: 1" = 50' May 1987

5/13/87  
J.E. Clark  
ch  
SHE

Min Depth of Inlet (invert) 3.5'  
Max Depth of trench 8.5'  
Septic Field trench reqd. 30'  
Septic Field trench provided 100'  
Existing Grade --- 498  
Proposed Grade --- 498  
Propose Elevation + 502.5  
Elevations shown hereon were established from an assumed datum.

BLDG. PERMIT SIGNED  
AND RETURNED 5/13/87  
CP 11860  
SHE

N 3 1/2° E  
1600± to Md. Rt. 99  
SAND HILL ROAD

Surveyors Certificate

I hereby certify that the above measurements and elevations are correct and accurate for this site

*Jack Clark*  
Registered Land Surveyor



Prepared by: THE J. E. CLARK CO.  
P.O. Box 147  
Laurel, Md. 20707  
301-725-3442

J. GORDON WARFIELD

MIDNIGHT FARM

1970 SAND HILL ROAD

MARRIOTTSTVILLE, MD. 21104

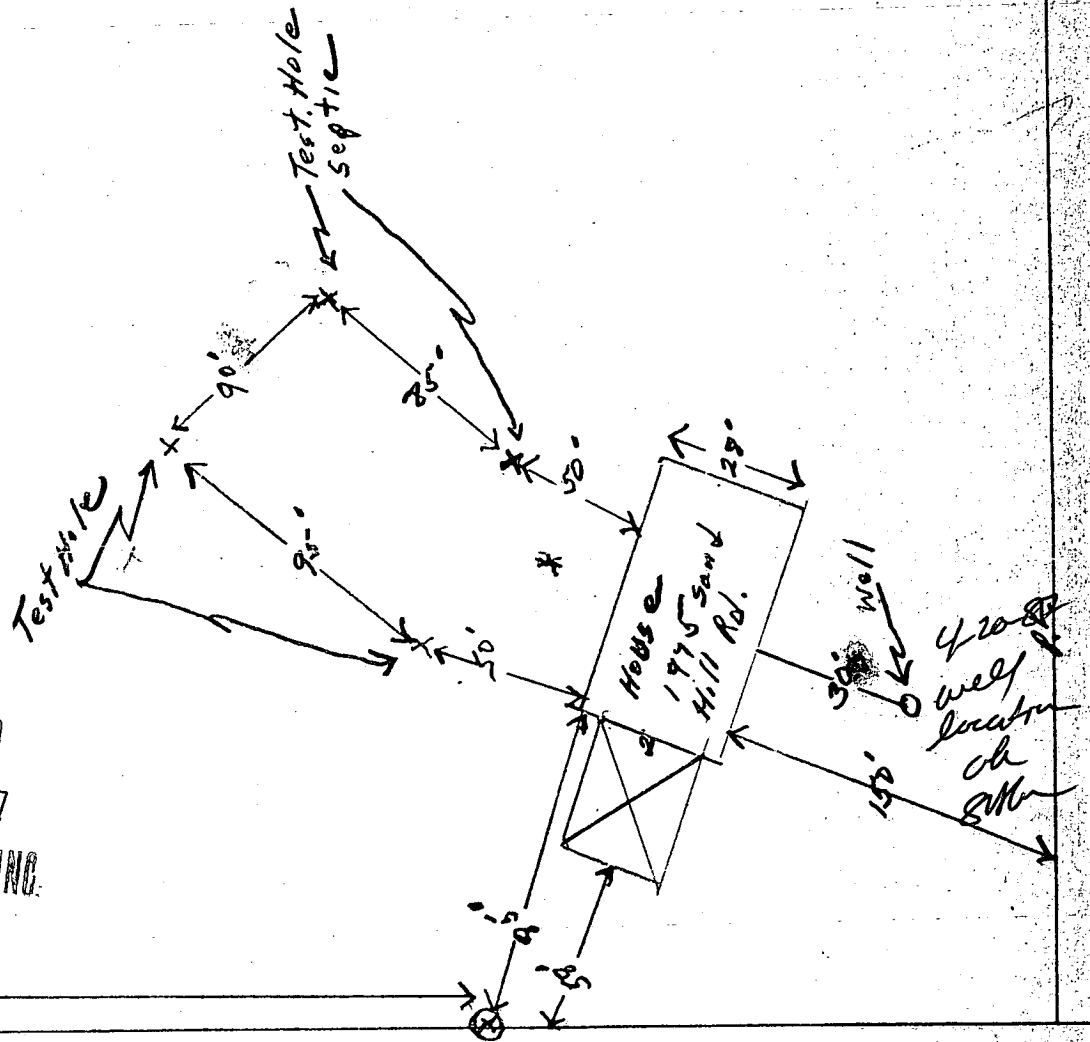
442-1477



*These measurements are correct  
to the best of my knowledge  
J.G. Warfield*

*D.H.  
Fled 20' from Front  
of house to well is 6' 4"*

*Sand Hill Rd*



RECEIVED

APR 6 1987

L.F. EASTERDAY, INC.

440'

PVT R/W

B 1 6100

SEQUENCE NO.  
(OEP USE ONLY)STATE OF MARYLAND  
PERMIT TO DRILL WELL

please print or type

OEP PERMIT NUMBER

40-81-2057

fill in this form completely

Date Received

8 13

## OWNER INFORMATION

WARRFIELD J GORDON

1975 SAND HILL

MARRIOTTSVILLE 21100

## DRILLER INFORMATION

George F. Easterday

L. Franklin Easterday, Inc.

2600 Br. Ch. Rd., Mt. Airy, Md. 21771

Address  
Signature  
Date 4/7/87

## WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 5

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

## 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 200 FEET

APPROXIMATE DIAMETER OF WELL 6 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
- ☐ 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)

APPROP. PERMIT NUMBER GAP

FORCE SA WRITE INITIALS IN BOX PERMIT NO. 40-81-2057

SPECIAL CONDITIONS

## LOCATION OF WELL

HOWARD

8 COUNTY

23 SUBDIVISION

SECTION 44 46 LOT 48 50

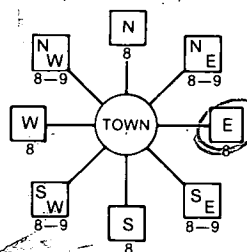
SLACKSCORNER

52 NEAREST TOWN

MILES FROM TOWN (enter 0 if in town) 2 MI

B 4

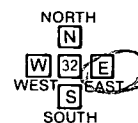
DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



1975 SAND HILL RD

NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



300

DISTANCE FROM ROAD

ENTER FT or MI FT

NOT TO BE FILLED IN BY DRILLER  
HEALTH DEPARTMENT APPROVAL

Howard A-38889

COUNTY NAME COUNTY NO. STATE HEALTH INSERT S

DATE ISSUED 042887 Sinking 10-28-87

NORTH GRID 340000 EAST GRID 0820000

SHOW MAJOR FEATURES OF BOX &amp; LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

1. WELL
- 2.
- 3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E 8200  
N 5400

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION

N 32

House built!

Treatment OK

80' casing

50' open

Did not stay for water

5/11/87

C12407

SEQUENCE NO.  
(OEP 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

A-38889

DATE Received

DATE WELL COMPLETED

05/1/87

Depth of Well

300

(TO NEAREST FOOT)

PERMIT NO.

FROM "PERMIT TO DRILL WELL"

40-81-2C57

OWNER

WARFIELD

last name

GORDON

first name

STREET OR RFD

1975 SAND HILL RD.

TOWN

SLACKSCORNER

SUBDIVISION

SECTION

LOT

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	
Topsoil	0	0
Br. Mica	2	66
Gravel	66	74
Gray Mica	74	88
Tan Mica	88	90
Gray Mica	90	140
Quartz	140	142
Gray Mica	142	300

GROUTING RECORD

WELL HAS BEEN GROUTED  
(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 11 NO. OF POUNDS 1100

GALLONS OF WATER 55

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 76 ft.

CASING RECORD

casing types insert appropriate code below

ST CO PL OT

STEEL CONCRETE PLASTIC OTHER

MAIN CASING TYPE

Nominal diameter top (main) casing (nearest inch)

Total depth of main casing (nearest foot)

ST 60 61 63 64 66 70

OTHER CASING (if used)

diameter inch

depth (feet) from to

SCREEN RECORD

screen type or open hole insert appropriate code below

ST BR HO PL OT

STEEL BRASS OPEN HOLE PLASTIC OTHER

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 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

SLOT SIZE 1 2 3

DIAMETER OF SCREEN (NEAREST INCH)

56 60

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.) WQ

70 72 74 75 76

TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST

HOURS PUMPED (nearest hour)

6

PUMPING RATE (gal. per min. to nearest gal.)

2

METHOD USED TO MEASURE PUMPING RATE

Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING

44

WHEN PUMPING

96

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)

PUMP HORSE POWER

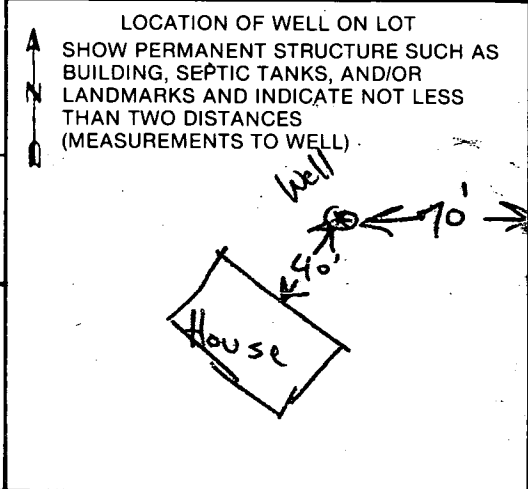
PUMP COLUMN LENGTH (nearest ft.)

CASING HEIGHT (circle appropriate box and enter casing height)

+ above - below

LAND SURFACE (nearest foot)

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. 40

DRILLERS SIGNATURE

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



Page \_\_\_\_\_ of \_\_\_\_\_  
Date \_\_\_\_\_

Sat 144 N - 32 MC 5 G 13  
5-9-87 Run 99  
8:00 R on Sandhill

Review OK/8/87 S/13/87

FIELD DATA SHEET  
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-~~3454~~ 2057

Location of property (road) SANDHILL 1975

Subdivision \_\_\_\_\_

Well Driller George SISKEDAY Lot \_\_\_\_\_ Block \_\_\_\_\_ Plat \_\_\_\_\_ Sec. \_\_\_\_\_  
Owner Wm Field, Hurdon

Depth of well 300 26 PM

Distance of measuring point (M.P.) above ground 2 1/2 ft

Static water level (S.W.L.) below M.P. 44 ft

I. High rate pumping -- reservoir drawdown

Time pump started 7:30

Pumping rate 12 gpm

Total time 15 min to reach pumping water level 94 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 1 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
7:45	94 ft	30 SEC	N/A	2 gpm
8:00	94 ft	30 SEC		2 gpm
8:15	94 ft	30 SEC		2 gpm
8:30	95 ft	30 SEC	Pump at 210 ft	2 gpm
8:45	95 ft	30 SEC	R. Hannon	2 "
9:00	96 ft	30 SEC		2 "
9:15	96 ft	35 SEC		2 "
9:30	95 ft	35 SEC		2 "
9:45	95 ft	35 SEC		2 "
10:00	95 ft	35 SEC		2 "
10:15	94 ft	35 SEC		2 "
10:30	94 ft	35 SEC		2 "
10:45	95 ft	35 SEC		2 "
11:00	95 ft	35 SEC		2 "
11:15	95 ft	35 SEC		2 "
11:30	95 ft	35 SEC		2 "
<del>11:45</del> 11:45	94 ft	35 SEC		2 "
12:00	95 ft	35 SEC		2 "
12:15	96 ft	35 SEC		2 "
12:30	96 ft	35 SEC		2 "
12:45	96 ft	35 SEC		2 "
1:00	95 ft	35 SEC		2 "
1:15	95 ft	35 SEC		2 "
1:30	96 ft	35 SEC		2 "
1:45	96 ft	35 SEC		2 "

# APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

Howard County Health Department  
Bureau of Environmental Health  
3525-H Ellicott Mills Drive  
Court House Square  
Ellicott City, Md. 21043  
461-9933

5/22/87  
OK to cover  
trench inside  
OK when valve  
in (P)

Sticker  
attached

WELL SEPTIC

New Installation ☒  
Replacement ☐

Receipt # 39323  
Date 5-13-87

Name of Installer TIMOTHY J. ROLLMAN

Telephone 725-2392

License number 7079

Certified Well Pump Installer ☐ Well Driller ☐ Registered Plumber ☒

Name of Property Owner PAUL KOTTIS

Telephone 596-9386

Subdivision                      Lot # 4 Well tag # 110-81-2037

Site Address 860 BEETZ RD.

## Pump

1. Type
  - a. Deep well jet ☐
  - b. Shallow well jet ☐
  - c. Submersible ☒
2. Make JACUZZI
3. Model #
4. Capacity 10 GPM

## Motor

1. Horsepower 1/2
2. RPM
3. Voltage                     
  - a. 110
  - b. 220 ☒

## Pitless Adapter

1. Make HARVARD
2. Model #
3. Depth 1' closer to 3'  
ground wire in  
(not mounted)

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

## Tank

1. Capacity 42 EQUIV (well x hall)
2. Pressure relief valve? yes

## Piping

1. Type CRESTON
2. Size 1"
3. NSF and/or BOCA Code approved yes
4. Depth of supply line 3'

## Well data

1. Depth                      ft.
2. Yield                      GPM
3. Static water level                      ft.
4. Will water supply be disinfected by installer? yes

tank in  
(relief valve  
not yet present)

pump & power lines in

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 J. Rollman

Date: 5-12-87

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

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

Howard County Health Department  
Bureau of Environmental Health  
3525-H Ellicott Mills Drive  
Court House Square  
Ellicott City, Md. 21043  
461-9933

New Installation ✓  
Replacement

Receipt # 39364  
Date 5-18-87

Name of Installer Allen M. Van Sant, Inc. Telephone 442-2221

License number 1862

Certified Well Pump Installer ☐ Well Driller ☐ Registered Plumber ☒

Name of Property Owner J. Gordon Warfield Telephone 442-1477

Subdivision \_\_\_\_\_ Lot # Acad Well tag # \_\_\_\_\_ - \_\_\_\_\_

Site Address 1975 Sand Hill Rd. 150  
Mammoth Lakes, CA 21104

**Pump**

1. Type
- a. Deep well jet \_\_\_\_\_
  - b. Shallow well jet \_\_\_\_\_
  - c. Submersible Yes

2. Make Goulds.

3. Model # SKS07412

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 *5/4*

2. RPM

3. Voltage

a. 110

b. 220 ✓

### Pitless Adapter

1. Make *Horizontal*

2. Model #

3. Depth 3 FA

**Tank**

1. Capacity 42 cal

2. Pressure relief valve? yes

## Piping

1. Type *F166* .

2. Size 1/2

3. NSF and/or BOCA  
Code approved *Yes*

4. Depth of supply line 3 ft

## Well data

1. Depth 300 ft.

2. Yield 2 GPM

3. Static water level ft.

4. Will water supply be disinfected by installer? *Yes*

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: \_\_\_\_\_

Date: 5-18-87

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

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 \_\_\_\_\_

Telephone \_\_\_\_\_

License Number \_\_\_\_\_

Certified Well Pump Installer \_\_\_\_\_ Well Driller \_\_\_\_\_ Registered Plumber \_\_\_\_\_

Name of Property Owner GORDON WARFIELD

Telephone \_\_\_\_\_

Subdivision WARFIELD Pk.

Lot # \_\_\_\_\_

Well Tag # \_\_\_\_\_

Site Address 1975 SANDHILL RD.

Pump

1. Type
  - a. Deep well jet \_\_\_\_\_
  - b. Shallow well jet \_\_\_\_\_
  - c. Submersible \_\_\_\_\_
2. Make \_\_\_\_\_
3. Model # \_\_\_\_\_
4. Capacity \_\_\_\_\_ GPM

Motor

1. Horsepower \_\_\_\_\_
2. RPM \_\_\_\_\_
3. Voltage \_\_\_\_\_
  - a. 110 \_\_\_\_\_
  - b. 220 \_\_\_\_\_

Pitless Adapter

1. Make \_\_\_\_\_
2. Model # \_\_\_\_\_
3. Depth \_\_\_\_\_

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 \_\_\_\_\_

Tank

1. Capacity \_\_\_\_\_
2. Pressure relief valve? \_\_\_\_\_

Piping

1. Type \_\_\_\_\_
2. Size \_\_\_\_\_
3. NSF and/or BOCA Code approved \_\_\_\_\_
4. Depth of supply line \_\_\_\_\_

Well data

1. Depth \_\_\_\_\_ ft.
2. Yield \_\_\_\_\_ GPM
3. Static water level \_\_\_\_\_ ft.
4. Will water supply be disinfected by installer? \_\_\_\_\_

5/20/87 Well Line AT 36-40" Pitless AT 42" - NO INSIDE WALL COMPLETED. - S.A.C.

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: \_\_\_\_\_

Date: \_\_\_\_\_

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