

PERMIT

05-411726

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 511962

A 40511

DISTRICT 5th

DATE 6/22/99

DATE SYSTEM APPROVED 6/29/99

INSPECTOR BB

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXX~~ 410-313-2640

INDEXED

Farm and Home Excavating

IS PERMITTED TO INSTALL ☒ ALTER ☐

ADDRESS 901 Driver Road, Marriottsville, MD 21104 PHONE 410-442-2139

SUBDIVISION Hedgerow LOT 11 ROAD 13605 Sheepshead Court

PROPERTY OWNER Nantucket Homes/Dorsey, Inc.

ADDRESS

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

6/22/99 spoke w/installer -
due to density of woods
and ex. contour, OK to install
3-80' trenches extending
towards the 620.63' lot
line only. DKS

TRENCHES - Trench to be 3 feet wide. Inlet 4.0 feet below original grade. Bottom maximum depth 6.0 feet below original grade. Effective area begins at 4.0 feet below original grade. 2.0 feet of stone below distribution pipe.

LOCATION - Beginning from the intersection of the 302.52' and 499.89' lot lines, place the distribution box 235 feet up the 499.89' lot line and 90 feet off that same lot line. Run trenches on contour toward the 620.63' lot line.

NOTES - ***TOP THREE TRENCHES NOT TO EXCEED 70 FEET IN LENGTH.*** Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

OK KM 9/17/98

PLANS APPROVED BY Amy McMillen DATE 9-08-98

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. 90° ELBOWS NOT ACCEPTABLE.

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 35/40 PVC OR ABS

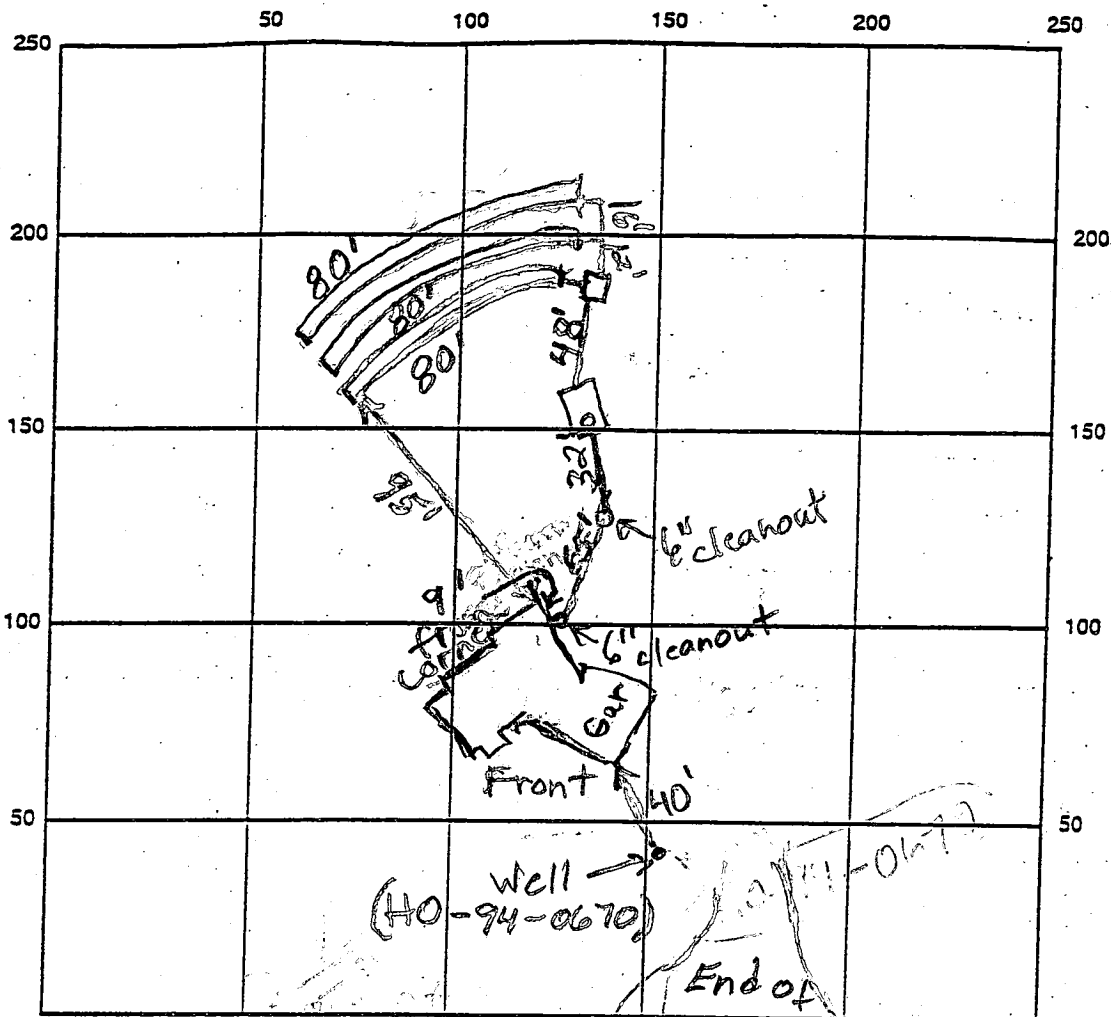
PERMIT VOID AFTER TWO YEARS

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 PVA 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 APPROVAL ON THIS PERMIT

410511



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1250 gal

CLEANOUTS 2-6" line, 1-6" tank

DISTRIBUTION BOX LEVEL O.K.

DRAIN FIELD/TITLE DEPTH 6 FT.

TRENCH WIDTH 3 FT.

INLET DEPTH 4 FT.

EFFECTIVE GRAVEL DEPTH 2 FT.

TOTAL LENGTH 3x80 FT. (240)

NUMBER OF TRENCHES 3

ONE SIDEWALL/BOTTOM AREA 720 SQ. FT.

DRYWALL INSIDE DIAMETER — FT.

EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA — SQ. FT.

REMARKS: 6/29/99 House connection made. Everything looks O.K.
O.K. to cover everything. (BB)

DATE SYSTEM APPROVED 6/29/99

INSPECTOR Brian Baker

APPLICATION

PERCOLATION TESTING

A 40511

P _____

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

DISTRICT 5TH

DATE 10-29-87

*11/19/88
more work pending
per [signature]*

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 LOWERY SARGENT Nantucket Homes Todd McDermott

ADDRESS 13243 WESTHEATH LANE PHONE 498-4334
CLARKSVILLE, MARYLAND 21029 792-7263

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION TEN OAKS LOT NO. 12 11 on Prelim

ROAD AND DESCRIPTION WEST OF HIGHLAND ROAD, NORTH OF TRIADDELPHIA ROAD
(13605 Sheephead Court)

TAX MAP 28+34 PARCEL # 60,59
30+64

SIZE OF LOT 3.0 AC. TYPE BLDG. SFD - 4 Bdrms
(SINGLE FAMILY DWELLING OR COMMERCIAL)

BLDG. PERMIT SIGNED

AND RETURNED 9-8-98

Serial # B10113940

SFD - 4 Bdrms

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 _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING for holes (good) + S/D plat

BLDG. PERMIT SIGNED

AND RETURNED 11/19/88

Serial # 119720

dec

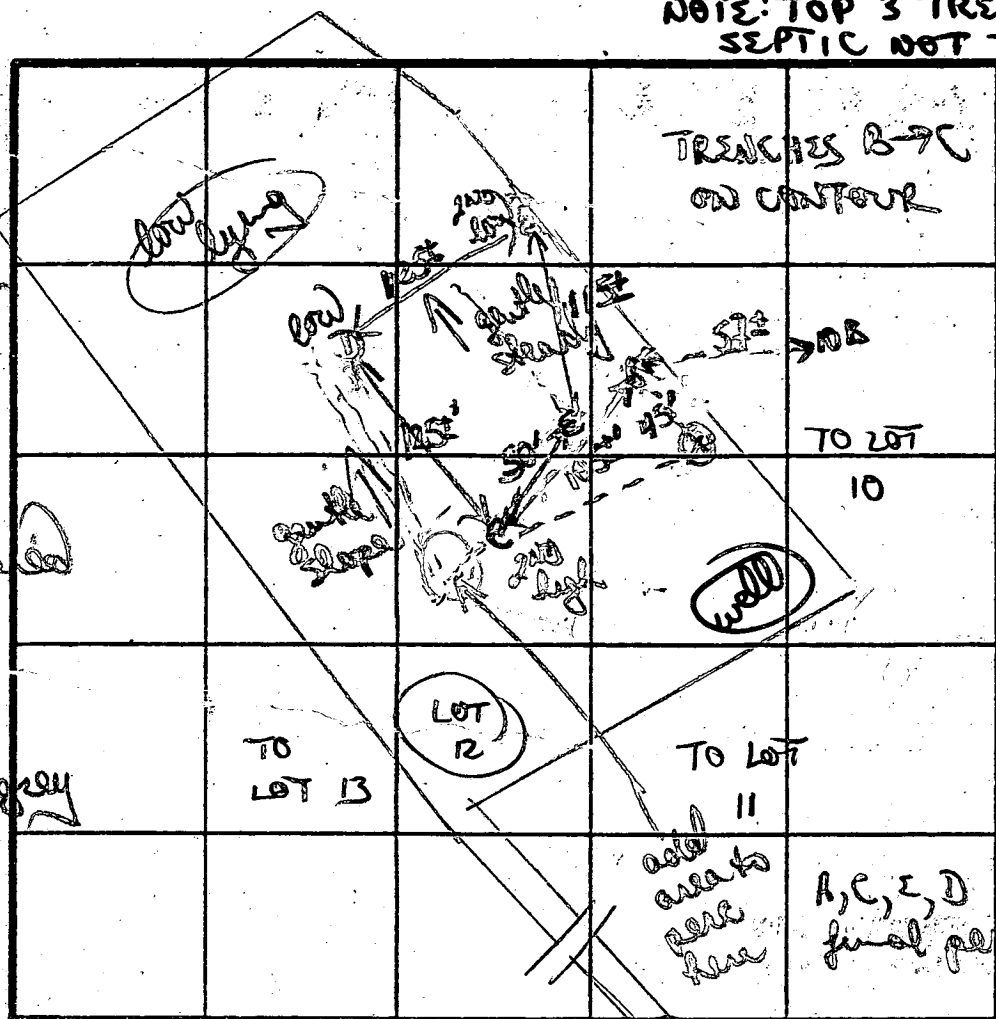
THIS IS NOT A PERMIT

SHALLOW 4'
MAX 6'
X=7 MIN
180°/350°

NOTE: TOP 3 TRENCHES IN
SEPTIC NOT TO EXCEED
70'

SOIL PROFILE

orange/brown
clay/clay
loam
layered
patches of
15% weathered
frag w/
green silt
loam
red white/grey
rock
sand 10'



A
similar to
hole D
11' D
Σ
Brown/yellow
clay loam
(scattered
rock) 4 1/2'
orange silt
loam to
grey silt
loam

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

X+B
orange/brown
clay/clay
loam 25-4'
quickly to
grey/black
layered weathered
rock
hard 5-6'

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11/19/88	C	5' S	305	307	307	310	3 MIN
		11' D	both (see profile)				
	(F) X	layered fragipan / grey rock					5b
	B	layered					5b
	D	4' S	315	321	321	331	10 MIN
		8 1/2' M	315	320	320	326	6 MIN
		12' D	both (see profile)				
	A	4' S	323	328	328	338	10 MIN
		7 1/2' M	321	326	326	331	5 MIN
		11' D	both (see profile)				

D
orange/brown
clay 3'
patchy clay
silt w/
w/ scattered
frag 8'
to 10' silt
orange/grey
w/ small frags 11'-12 1/2'

2 MIN getting hard
TO 6'
OK for 4 1/2'
hard

REMARKS: pore adjusted due to rock. Pore in woods
Rock upper area, better lower, orange brown clays 4 1/2'
clay silt loam below
TESTED BY: B N Yeman
ALSO PRESENT: John, Keith, Brian
OK to shift actual pile to left of E

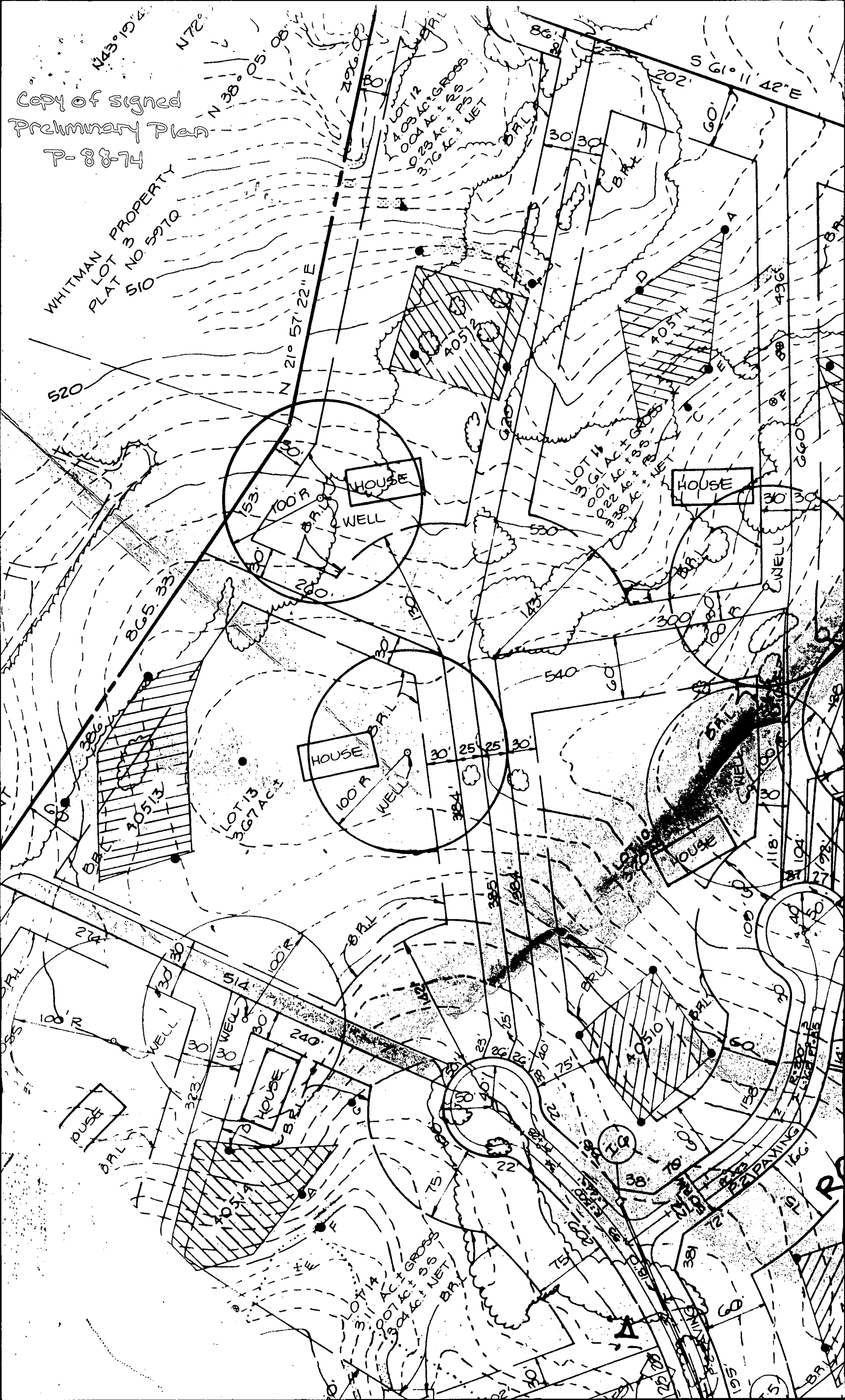
LOT # 24

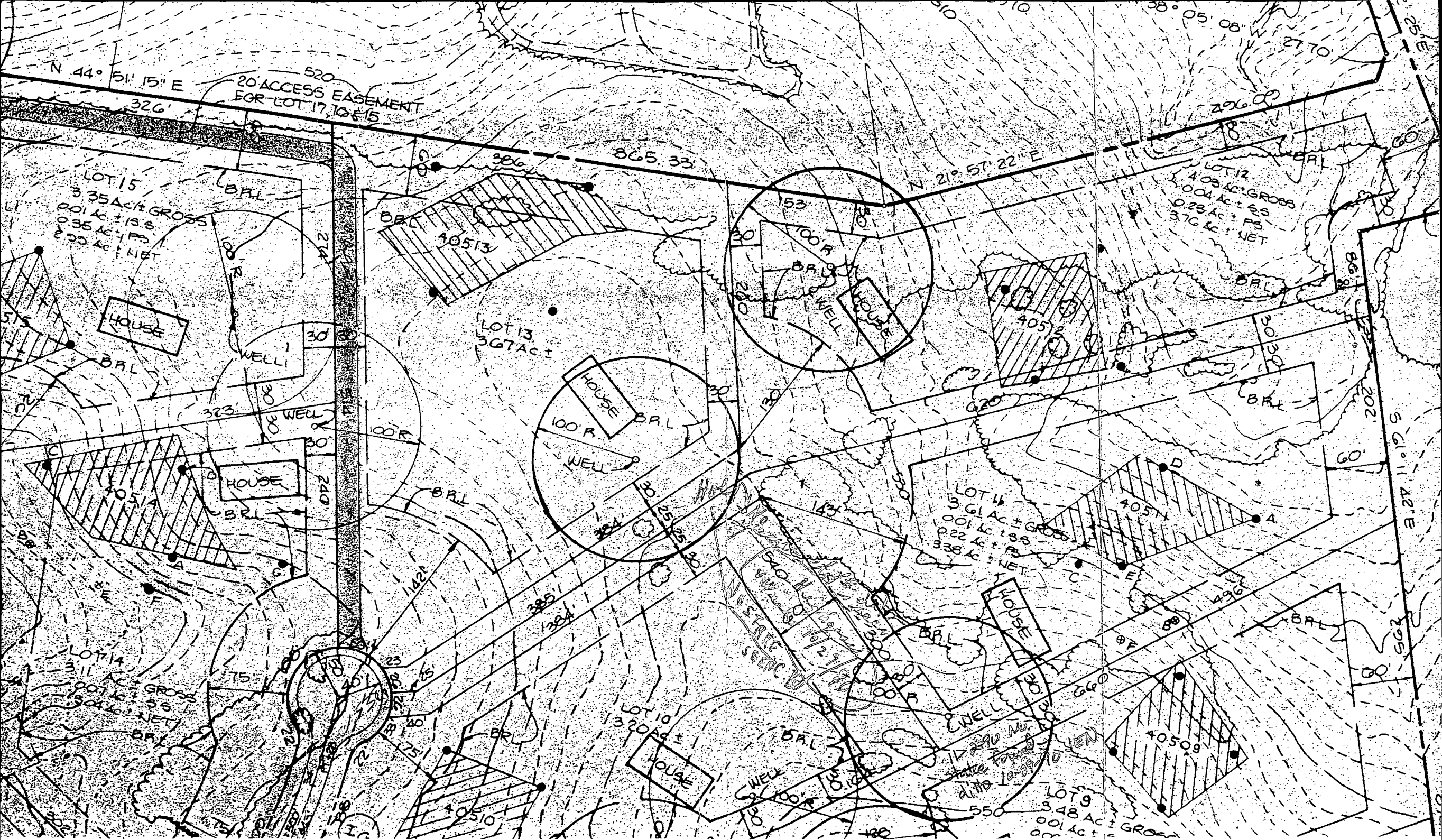


DEDICATION FOR PUBLIC USE THE BEDS OF THE STREETS AND/OR ROADS AND FLOOD
AND OPEN SPACE WHERE APPLICABLE AND FOR GOOD AND OTHER VALUABLE CONSI

Copy of signed
Preliminary Plan
P-88-74

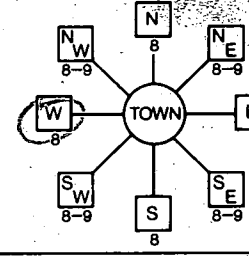
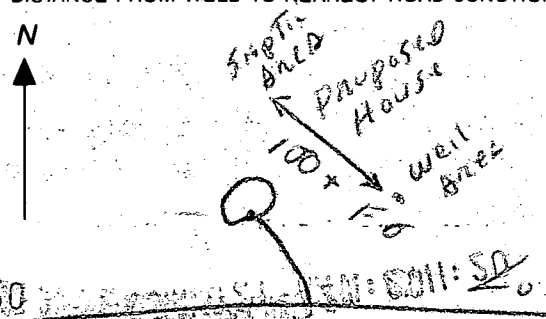
WHITMAN PROPERTY
LOT 3 S97Q
PLAT NO 510





Site Plan Lot 11 Hedge-row

C 1 2826		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.	
(THIS NUMBER IS TO BE PUNCHED IN COLS. 9-8 ON ALL CARDS)						COUNTY- NUMBER A 40511	
ST/CO USE ONLY DATE RECEIVED 10/2/95		DATE WELL COMPLETED 10/28/95		Depth of Well 565 (TO NEAREST FOOT)		PERMIT NO. FROM "PERMIT TO DRILL WELL" H0-94-0670	
OWNER Sargent Lowrie		STREET OR RFD Gilbride Lane		TOWN Clarksville			
SUBDIVISION Hedgerow		SECTION		LOT 11			
WELL LOG Not required for driven wells		GROUTING RECORD yes no WELL HAS BEEN GROUTED (Circle Appropriate Box) Y N TYPE OF GROUTING MATERIAL (Circle one) CEMENT CM BENTONITE CLAY BC NO. OF BAGS 16 NO. OF POUNDS 1504 GALLONS OF WATER 96 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 64 ft. TOP BOTTOM (enter 0 if from surface)		PUMPING TEST HOURS PUMPED (nearest hour) 6 PUMPING RATE (gal. per min.) 1 METHOD USED TO MEASURE PUMPING RATE Submersible WATER LEVEL (distance from land surface) BEFORE PUMPING 35 ft. WHEN PUMPING 300 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			
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING		CASING RECORD casing types insert appropriate code below STEEL CO CONCRETE PL PLASTIC OT OTHER MAIN CASING TYPE Nominal diameter top (main) casing (nearest inch) 7 Total depth of main casing (nearest foot) 65 OTHER CASING (if used) diameter inch depth (feet) from to		PUMP INSTALLED DRILLER WILL INSTALL PUMP (CIRCLE) (YES or NO) 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) above below LAND SURFACE (nearest foot)			
DESCRIPTION (Use additional sheets if needed)		FEET FROM TO Top Soil 0 5 Brown Shill 6 58 Blue Slate 59 565 GOT water at 150		SCREEN RECORD screen type or open hole insert appropriate code below STEEL BR BRASS BRONZE PL PLASTIC HO OPEN HOLE OT OTHER DEPTH (nearest ft.) 1 40 65 565 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		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) SHED 100x70 WELL Gilbride Lot # 11 TRIDEIRMA mill ROAD	
NUMBER OF UNSUCCESSFUL WELLS: 0		WELL HYDROFRACTURED YES NO Y N		C 2			
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. 410 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO.		SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)	
		MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q TELESCOPE CASING LOG INDICATOR OTHER DATA					

B 1 02932 (THIS NUMBER IS TO BE PUNCHED IN COLS 3-6 ON ALL CARDS)	SEQUENCE NO. (DP USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER 40-94-0670 fill in this form completely
Date Received (APA) 082195 OWNER INFORMATION 52 Argent 13 15 Last Name Owner First Name 34 13245 Westmeath Lane 36 Street or RFD 55 01245ville MD 21029 57 Town 70 State 72 Zip 76		B 3 LOCATION OF WELL 1 2 Howard 8 COUNTY 21 1121600 23 SUBDIVISION 42 SECTION 44 46 LOT 48 50 01245ville 52 NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) 3 MI 73 76 77 78	
DRILLER INFORMATION 410 Driller's Name 77 License No. 80 Firm Name Address Signature Date		B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  NEAR WHAT ROAD 11 30 Gilbride Lane ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH WEST EAST SOUTH 34 200 37 DISTANCE FROM ROAD ENTER Ft or Mi 1.4 38 39	
B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL PER MIN.) 100 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 200 14 20		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 24 28		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL Howard COUNTY NAME A 40511 COUNTY NO. STATE SIGNATURE DATE ISSUED 090195 EXP. DATE 9/1/96 NORTH GRID 508000 EAST GRID 0807000 50 55 57 63	
APPROXIMATE DIAMETER OF WELL 6" NEAREST INCH		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. well 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE E 800 N 500	
METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jetted & DRIVEN 30 37 AIR-ROTARY AIR-PERCussion 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) ☒ THIS WELL WILL NOT REPLACE AN EXISTING WELL. ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 ☐ 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 001 GA 00000 FORCE DS WRITE INITIALS IN BOX PERMIT No. 40-94-0670 67 68 70 71 72 73 74 75 76 77 78 79	
SPECIAL CONDITIONS			

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043

FAX: 313-2648 PHONE: 313-2640

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation ☒
Replacement ☐

Receipt # _____
Date 6/23/98

Name of Installer ROBERT L. FEEZON CO. INC. Telephone 410-781-4653

License Number 2122

Certified Well Pump Installer ☒ Well Driller ☐ Registered Plumber ☒

Name of Property Owner NATUCKER HOMES Telephone 410-795-1405

Subdivision HEDGE ROW Lot # _____ Well Tag # HO-94-0670

Site Address 13605 SHEPHERDS-HOARD COURT

Pump

1. Type

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

2. Make STARTE

3. Model # SP4E02AL

4. Capacity 5 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 _____

CATIVE AIR

Tank WATER 205

1. Capacity 36 GALS

2. Pressure relief valve? YES

Motor

1. Horsepower 1

2. RPM 3450

3. Voltage _____

a. 110 _____

b. 220 ☒

Pitless Adapter

1. Make HARWARD

2. Model # PT800

3. Depth 42 ft.

Piping

1. Type Poly

2. Size 1 1/2"

3. NSF and/or BOCA Code approved YES

4. Depth of supply line 42 ft.

Well data

1. Depth 565 ft.

2. Yield 2 GPM

3. Static water level 30 ft.

4. Will water supply be disinfected by installer? YES

NOTE: 200 PSI DOWN WELL

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).

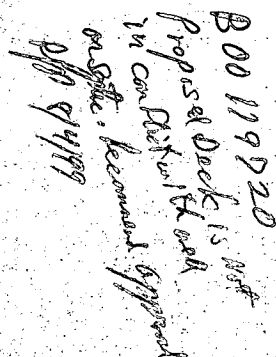
All information given above is true to the best of my knowledge.

Signature of Applicant Robert L. Feezon

Date: 6/23/98

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

WAD
mity
2061 26



CF5

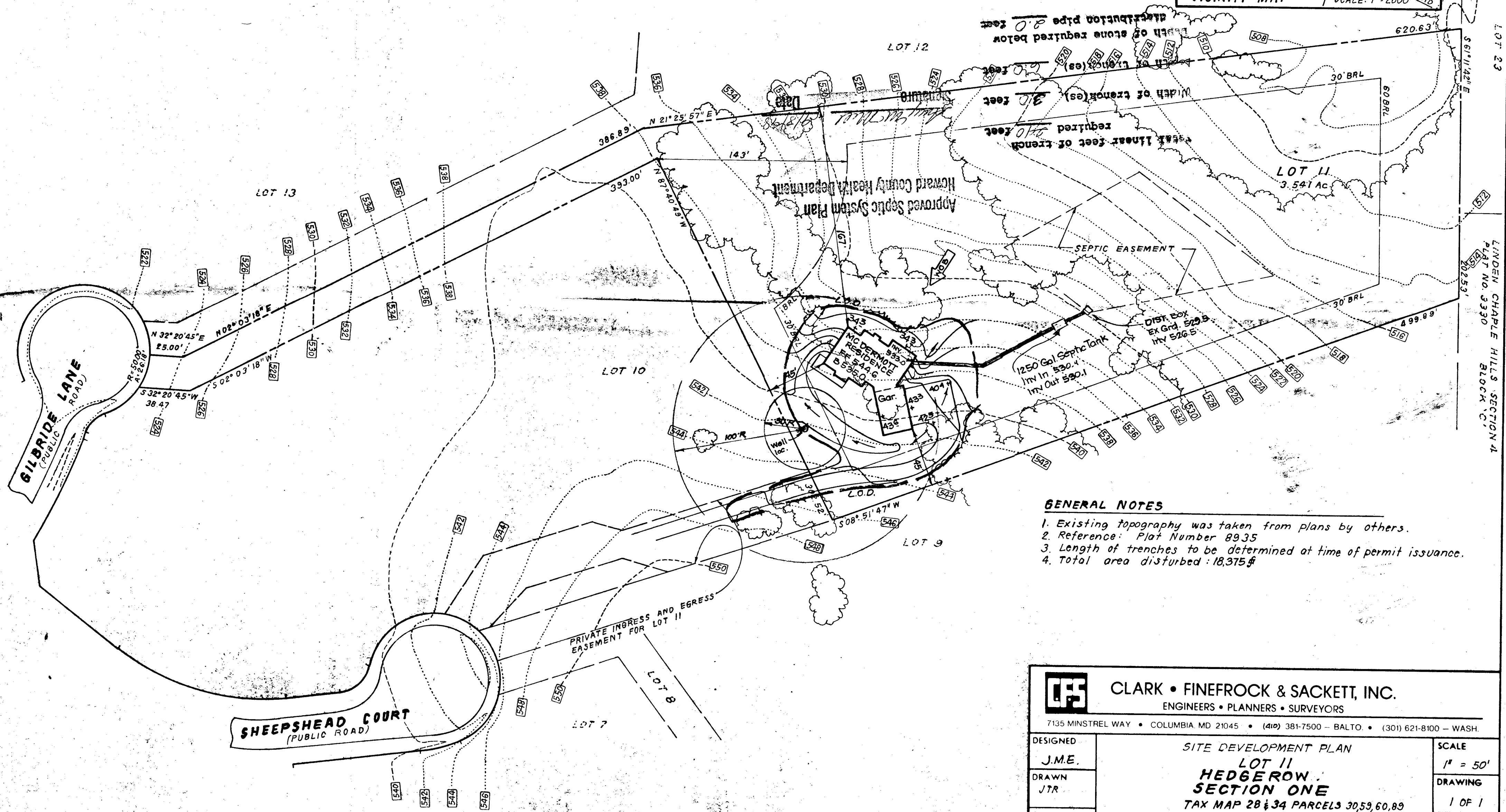
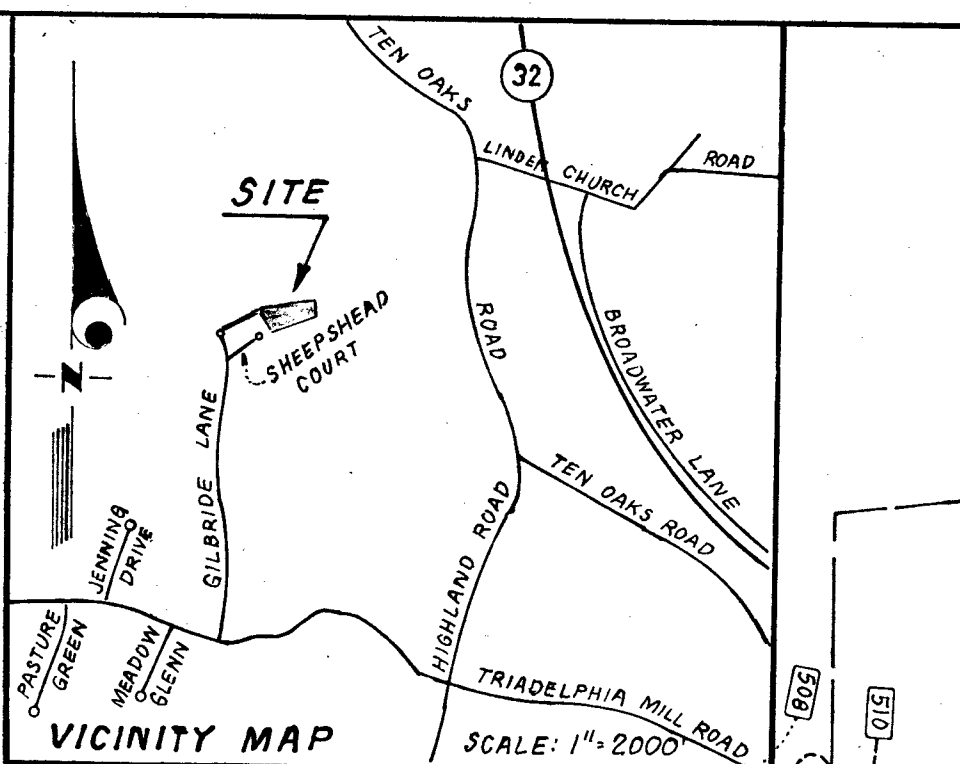
CLARK • FINEFROCK & SACKETT
ENGINEERS • PLANNERS • SURVEYORS

7135 MINSTREL WAY • COLUMBIA, MD 21045 • (410) 381-7500 BALT. •

LEGEND

CONTOUR INTERVAL 2 FT
 EXISTING CONTOUR 520
 PROPOSED CONTOUR 520
 DIRECTION OF DRAINAGE WOB
 WALK OUT BASEMENT +385
 SPOT ELEVATION 520
 LIMIT OF DISTURBED AREA L.O.D.
 TREE PROTECTION FENCE
 EXISTING TREES TO REMAIN

SCALE: 1"=50'



GENERAL NOTES

1. Existing topography was taken from plans by others.
2. Reference: Plat Number 8935
3. Length of trenches to be determined at time of permit issuance.
4. Total area disturbed: 18,375 sq ft

CLARK • FINEFROCK & SACKETT, INC. ENGINEERS • PLANNERS • SURVEYORS 7135 MINSTREL WAY • COLUMBIA MD 21045 • (410) 381-7500 - BALTO. • (301) 621-8100 - WASH.		
DESIGNED J.M.E.	SITE DEVELOPMENT PLAN LOT 11 HEDGEROW SECTION ONE TAX MAP 28 & 34 PARCELS 30,59,60,89 FIFTH (5th) ELECTION DISTRICT HOWARD COUNTY, MARYLAND	SCALE 1" = 50'
DRAWN JTR		DRAWING 1 OF 1
CHECKED J.M.E.		JOB NO. 98-128
DATE Aug 1998		FILE NO. 98-128 X

FOR: NANTUCKET ISLAND HOMES/DORSEY INC.
 8835 P Columbia 100 Parkway
 Columbia, MD. 21045