

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

04-354494

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXX~~

410-313-2640

INDEXED

P 511012

A 43330

DISTRICT 4th

DATE 9/29/98

DATE SYSTEM APPROVED 10/6/98

INSPECTOR DKS

Fogle's Septic Clean, Inc.

IS PERMITTED TO INSTALL ☒ ALTER

ADDRESS 558 Obrecht Road Sykesville, Maryland 21784 PHONE (410) 795-5674

SUBDIVISION Pleasant Hills LOT 11 ROAD 2055 Watkins Way

PROPERTY OWNER James Hiltz

ADDRESS

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

240 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 320

TRENCHES - Trench to be 3 feet wide. Inlet 3.5 feet below original grade. Bottom maximum depth 5 feet below original grade. Effective area begins at 3.5 feet below original grade. 1.5 feet of stone below distribution pipe.

LOCATION - Place the distribution box 300 feet down the right (458.94') lot line and 40 feet off the same lot line as seen when facing the lot from Watkins Way. Run trenches along contour towards rear (335') lot line.

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

OK KM 6-9-98

PLANS APPROVED BY Donna K. Soe DATE 6/02/98

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

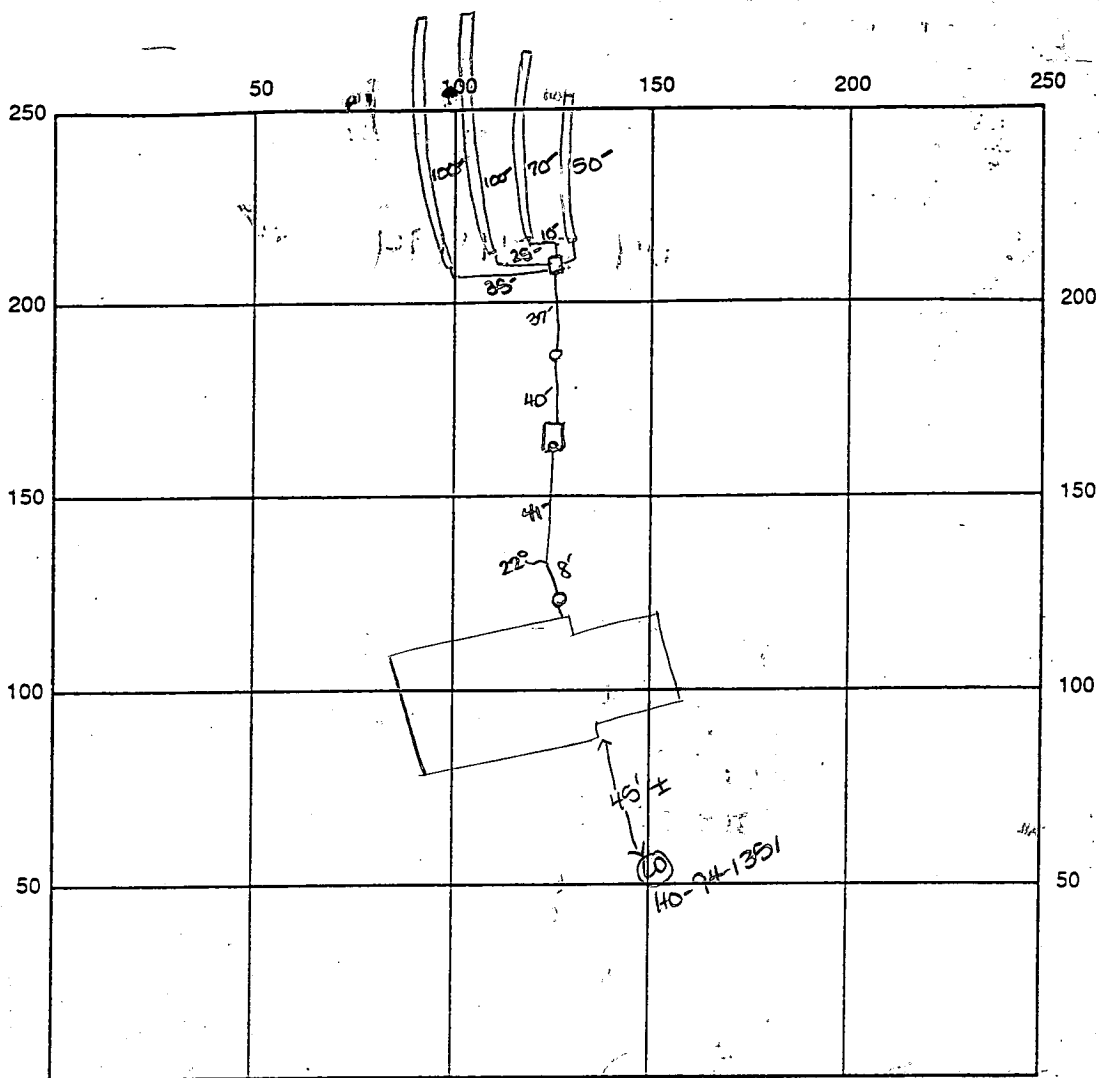
NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

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



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL OK - 1250 gal

CLEANOUTS one at house one on s.t.
one in line

DISTRIBUTION BOX LEVEL OK

DRAIN FIELD/TITLE DEPTH 5 FT.

TRENCH WIDTH 3 FT.

INLET DEPTH 3.5 FT.

EFFECTIVE GRAVEL DEPTH 1.5 FT.

TOTAL LENGTH DS 2x100
270 FT. → 320

NUMBER OF TRENCHES 4

ONE SIDEWALL/BOTTOM AREA 960 SQ. FT.

DRYWALL INSIDE DIAMETER — FT.

EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA — SQ. FT.

REMARKS: 10/6/98 FINAL INSP - OK TO COVER ALL WORK. DKS

DATE SYSTEM APPROVED

10/6/98

INSPECTOR

[Signature]

GENERAL NOTES:

- 1) THIS PLAT IS PREPARED FOR THE BENEFIT OF THE CLIENT SIGNING THE HOUSE LOCATION SURVEY APPROVAL FORM INsofar AS IT IS REQUIRED BY A LENDER OR TITLE INSURANCE COMPANY OR ITS AGENTS IN CONNECTION WITH THE CONTEMPLATED TRANSFER, FINANCING, OR RE-FINANCING. UNLESS INDICATED AS BEING A BOUNDARY SURVEY, THIS PLAT IS NOT INTENDED FOR USE IN THE ESTABLISHMENT OF PROPERTY LINES AND IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATIONS OF FENCES, GARAGES, BUILDINGS OR OTHER EXISTING OR FUTURE IMPROVEMENTS. AS A RESULT, THIS PLAT DOES NOT PROVIDE FOR ACCURATE IDENTIFICATION OF PROPERTY LINE, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING OR RE-FINANCING.
- 2) SUBJECT PROPERTY IS SHOWN IN ZONE ON THE NATIONAL FLOOD INSURANCE PROGRAM FLOOD INSURANCE RATE MAP OF HOWARD COUNTY, MARYLAND, COMMUNITY PANEL No. 23400410007.0 - EFFECTIVE DATE: DEC. 4, 1995
- 3) THE OFFSETS FROM BUILDING LINE TO PROPERTY LINE AS SHOWN ON THE PLAT HEREON ARE TO AN ACCURACY OF 1' PLUS OR MINUS (1').

Post-It® Fax Note

7871

Date

8/22/98

of

pages

1

To

Kurt

From

MARIO MAHARRELL

Co./Dept.

Co.

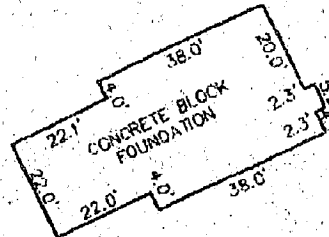
Phone #

Phone #

410-461-2278

Fax #

Fax #



DETAIL
1"=30'

WATKINS WAY

(50' R/W)

R=50.00'
L=40.96'

S87°11'01"E

78.48'

SEE DETAIL

LOT 11

30' BRL

S89°05'35"W 335.00'

LOT 12

LOT 13

LOT 12

LOT 11
PLEASANT HILLS
LOTS 1-13
4TH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
PLAT #10512

TOP of FOUNDATION = ELEV. 708.62
(SRL) BUILDING RESTRICTION LINE

/// DENOTES PRIVATE SEPTIC EASEMENT

FISHER, COLLINS & CARTER, INC.
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS
CENTENNIAL SQUARE OFFICE PARK - 10512 BALTIMORE NATIONAL PIKE
BELLINGHAM CITY, MARYLAND 21038
FAX 410-285-2855



Mark L. Robel 8/10/98
PROFESSIONAL LAND SURVEYOR DATE
REG. - 339

**HOUSE LOCATION
DRAWING**

FOUNDATION LOCATION: 8/16/98
FINAL LOCATION:
BOUNDARY SURVEY:

SCALE: 1"=100'
DATE: 8/16/98
DRAWN BY: L.P.R.
CHECKED BY: M.L.R.
PROJECT No. 51215

FCC *

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

Fax 313-2648 313-2640

APPLICATION FOR FITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation ☒
Replacement ☐

Receipt \$
Date 10/15/98

Name of Installer ROBERT L. FEEZER Co., Inc.

Telephone 410-781-4655

License Number 2122

Certified Well Pump Installer ☒ Well Driller ☐ Registered Plumber ☒

Name of Property Owner MARIO MANNARIELLO'S, SONS, INC. Telephone 410-785-1405
Subdivision PLEASANT HILLS Lot # 11 Well Tag # HO-94-1351
Site Address 2055 WATKINS WAY

Pump

1. Type

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

2. Make AQUASTAR

3. Model # AT5-50

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 ☐

Motor

1. Horsepower 1/2

2. RPM 3450

3. Voltage ☐

a. 110 ☐

b. 220 ☒

Pitless Adapter

1. Make HOWARD

2. Model # PT800

3. Depth 42"

Tank WX252 CAPTIVE AIR

1. Capacity 86 GALS

2. Pressure relief valve? YES

Piping

1. Type Poly.

2. Size 1"

3. NSF and/or BOCA Code approved YES

4. Depth of supply line 42"

Well data

1. Depth 300 ft.

2. Yield 5.7 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: Robert L. Feezer

Date: 10/15/98

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

C109469

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
NUMBERA43330

123
6
(THIS NUMBER IS TO BE PUNCHED
IN COLS. 3-6 ON ALL CARDS)

ST/CO USE ONLY
DATE RECEIVED
MM2/9/98YY
813

DATE WELL COMPLETED
MM2DD29YY98
1520

Depth of Well
2230026
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
HO-94-1351
28293031323334353637

OWNERHiltz
last namefirst name

STREET OR RFDWatkins Way
SUBDIVISIONPleasant Hills

TOWNMt Airy

SECTIONLOT11

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	5	
Brown Shale	6	25	
Gray Silt	26	300	

GOT WITH
OT

GROUTING RECORD

yesno
YNY
4444

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL (Circle one)

CEMENTCMBENTONITE CLAYBC

NO. OF BAGS7NO. OF POUNDS658

GALLONS OF WATER42

DEPTH OF GROUT SEAL (to nearest foot)

from0ft. to28ft.
(enter 0 if from surface)

CASING RECORD

casing
types
insert
appropriate
code
below

STEELSTCONCRETECO
PLASTICPLOTHERO

MAIN CASING TYPEPL

Nominal diameter
top (main) casing
(nearest inch)64

Total depth
of main casing
(nearest foot)30

OTHER CASING (if used)

diameterdepth (feet)
inchfromto

SCREEN RECORD

screen type
or open hole

insert
appropriate
code
below

STEELSTBRASSBR
PLASTICPLOTHERO

C3

PUMPING TEST

HOURS PUMPED (nearest hour)3

PUMPING RATE (gal. per min.)5.7

METHOD USED TO
MEASURE PUMPING RATESubmersible

WATER LEVEL (distance from land surface)

BEFORE PUMPING27ft.

WHEN PUMPING200ft.

TYPE OF PUMP USED (for test)

AairPpistonTturbine
CcentrifugalRrotaryOother (describe below)
JjetSsubmersible

NUMBER OF UNSUCCESSFUL WELLS:3

WELL HYDROFRACTURED

yesno
YNY

CIRCLE APPROPRIATE LETTER

AWELL WAS ABANDONED AND SEALED
WHEN THIS WELL WAS COMPLETED

ELECTRIC LOG OBTAINED

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.

DRILLERS LIC. NO. MSD143

DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. MD

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

C2

DEPTH (nearest ft.)

HO29300

123
8911151721
232426303236
383941454751

SLOT SIZE 123

DIAMETER
OF SCREEN

5660
(NEAREST
INCH)

fromto

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.)WQ

7072747576

TELESCOPE
CASING

LOG
INDICATOR

OTHER DATA

PUMP INSTALLED

DRILLER WILL INSTALL PUMP
(CIRCLE) (YES or 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)3135

PUMP HORSE POWER3741

PUMP COLUMN LENGTH
(nearest ft.)4347

CASING HEIGHT (circle appropriate box
and enter casing height)

+above
-below

LAND SURFACE

(nearest
foot)2

LOCATION OF WELL ON LOT

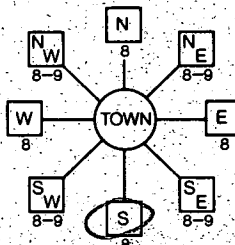
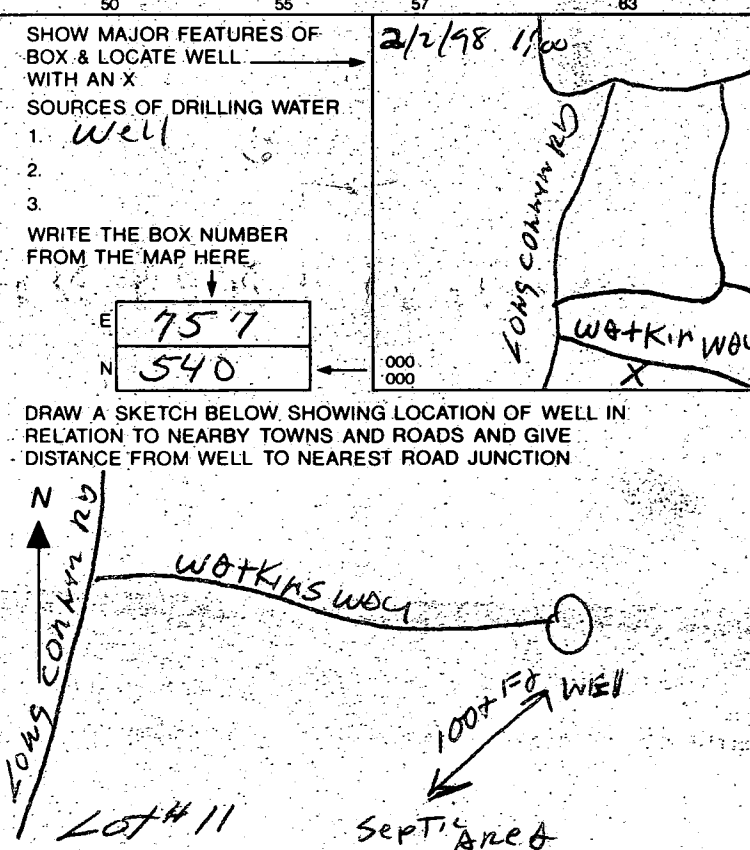
SHOW PERMANENT STRUCTURE SUCH AS
BUILDING, SEPTIC TANKS, AND /OR
LANDMARKS AND INDICATE NOT LESS
THAN TWO DISTANCES
(MEASUREMENTS TO WELL)

MATERIAL USED
Drill Cuttings
Type Cement

WATKINS WAY

Long corner

Septic Tank

B 1 3087 <small>(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON-ALL CARDS)</small>	SEQUENCE NO. <small>(DP USE ONLY)</small>	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER H0-94-1351 <small>fill in this form completely</small>
OWNER INFORMATION Date Received (APA) 120897 15 Last Name 1217 T. L. C. R. M. A. N. P. L. Owner First Name AUGUST 36 Street or RFD 301 H. I. M. O. R. E. Town 70 State 72 Zip 76 MD 21226		B 3 LOCATION OF WELL 8-COUNTY HOWARD 23 SUBDIVISION P. E. O. S. O. N. T. H. I. L. L. S. SECTION 2 LOT 11 52 NEAREST TOWN MT. AIRY MILES FROM TOWN (enter 0 if in town) 5 M. I.	
DRILLER INFORMATION Driller's Name Perry Harley Firm Name Harley Drilling Co. Address Box 160 WALKERSVILLE, MD Signature Perry Harley Date 10-20-97		B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  NEAR WHAT ROAD WATKINS WAY ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 34 90 37 DISTANCE FROM ROAD ENTER FT OR MI FT	
B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 3 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 400		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 200 FEET APPROXIMATE DIAMETER OF WELL 6" NEAREST INCH		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL Howard A43330 COUNTY NAME COUNTY NO. STATE SIGNATURE DATE ISSUED 121097 Kimberly M. White 12/10/98 NORTH GRID 540000 EAST GRID 0757000	
METHOD OF DRILLING (circle one) BORED (or Augered) <input type="checkbox"/> JETTED <input type="checkbox"/> Jettied & DRIVEN 30 AIR-ROTARY <input checked="" type="checkbox"/> AIR-PERCUSSION <input type="checkbox"/> ROTARY (Hydraulic Rotary) 37 CABLE <input type="checkbox"/> REVERSE-ROTARY <input type="checkbox"/> DRIVE-POINT other _____		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 757 N 540	
REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX) <input type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL. <input checked="" 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 DEEPEINED (IF AVAILABLE) 41 _____ 52		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND LOCATIONS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
Not to be filled in by driller (OEP USE ONLY)			
APPROX. PERMIT NUMBER G A P			
FORCE KM WRITE INITIALS IN BOX PERMIT No. H0-94-1351			
SPECIAL CONDITIONS			

NOTE = APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED =

COUNTY

WATER WELL ABANDONMENT SEALING REPORT FORM

SUBMIT COPIES OF COMPLETED FORM TO:

- * COUNTY ENVIRONMENT AGENCY (contact MDE, WMA if address needed)
- * WELL OWNER
- * MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DATE WELL ABANDONED: FEB-2-98 (month/day/year)

* PERMIT NUMBER OF ABANDONED WELL (if any)

* PERMIT NUMBER OF REPLACEMENT WELL

* PERSON ABANDONING WELL: Perry Hawley

* OWNER'S NAME: Angela Hiltz

* WELL LOCATION:

COUNTY: HOWARD
NEAREST TOWN: MT AIRY
TAX MAP BLOCK PARCEL
SUBDIVISION: Pleasant Hills
SECTION: 11

MARYLAND GRID COORDINATES

BOX NUMBER E 751
N 540

TYPE OF WELL BEING ABANDONED:

☒ DRILLED ☐ JETTED
☐ BORED/AUGURED ☐ HAND DUG
☐ OTHER (specify)

USE CODE:

☒ DOMESTIC ☐ MUNICIPAL/PUBLIC
☐ IRRIGATION ☐ INDUSTRIAL
☐ TEST/OBSERVATION

TYPE OF CASING:

☐ STEEL ☒ PLASTIC
☐ CONCRETE ☐ OTHER (specify)

SIZE OF CASING: 6 1/4" INCHES IN DIAMETER

DEPTH OF WELL: 400 FT FEET DEEP

WAS ANY CASING REMOVED? ☒ YES ☐ NO
if yes, length removed, in feet: 3 FT

WAS CASING RIPPED OR PERFORATED? ☒ YES ☐ NO

SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN

LICENSE # 143

MWD ☒ MSD ☐ MGD

CIRCLE ONE 2-2-98 DATE

DENV 828 JULY 1993

(tag destroyed)
HO 94 1181
HO 94 1351

WELL DRILLERS LICENSE NUMBER: 143
CIRCLE: MWD / MSD / MGD

000	
000	X

SHOW WELL LOCATION
BY X WITHIN BOX

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
Stone + Drilling Muds	400	30
Type I Grout	30	Surface
12 B045		

LINE CHART

134.31	N	34.03	5886.99655
414.55	N	16.34	5596.376
78.50	N	17.27	56350.488
50.00	N	17.50	56808.127
330.00	E	44.09	57262.594
			57688.166
			57438.640
			57389.834
			57072.287
			5594.360

36.74	E	32.18	24.89
99.59	E	44.29	15.00
88.66	E	00.55	100.00
112.06	E	34.07	16.49
36.84	E	02.34	76.65
52.52	N	39.13	17.64
52.52	E	51.13	33.30
17.64	E	30.30	76.65
16.49	E	57.27	16.49
100.00	N	03.03	100.00
15.00	E	57.27	15.00
24.89	E	52.18	24.89

ARDS OF HOWARD
AS PLAT
THE PURPOSES OF
449.92'
42'

ACCESS & UTILITY
EMENT
42'

DEVELOPMENT
CONSULTANTS
GROUP
GEORGIA AVE.
102
MD. 20832
4-4570

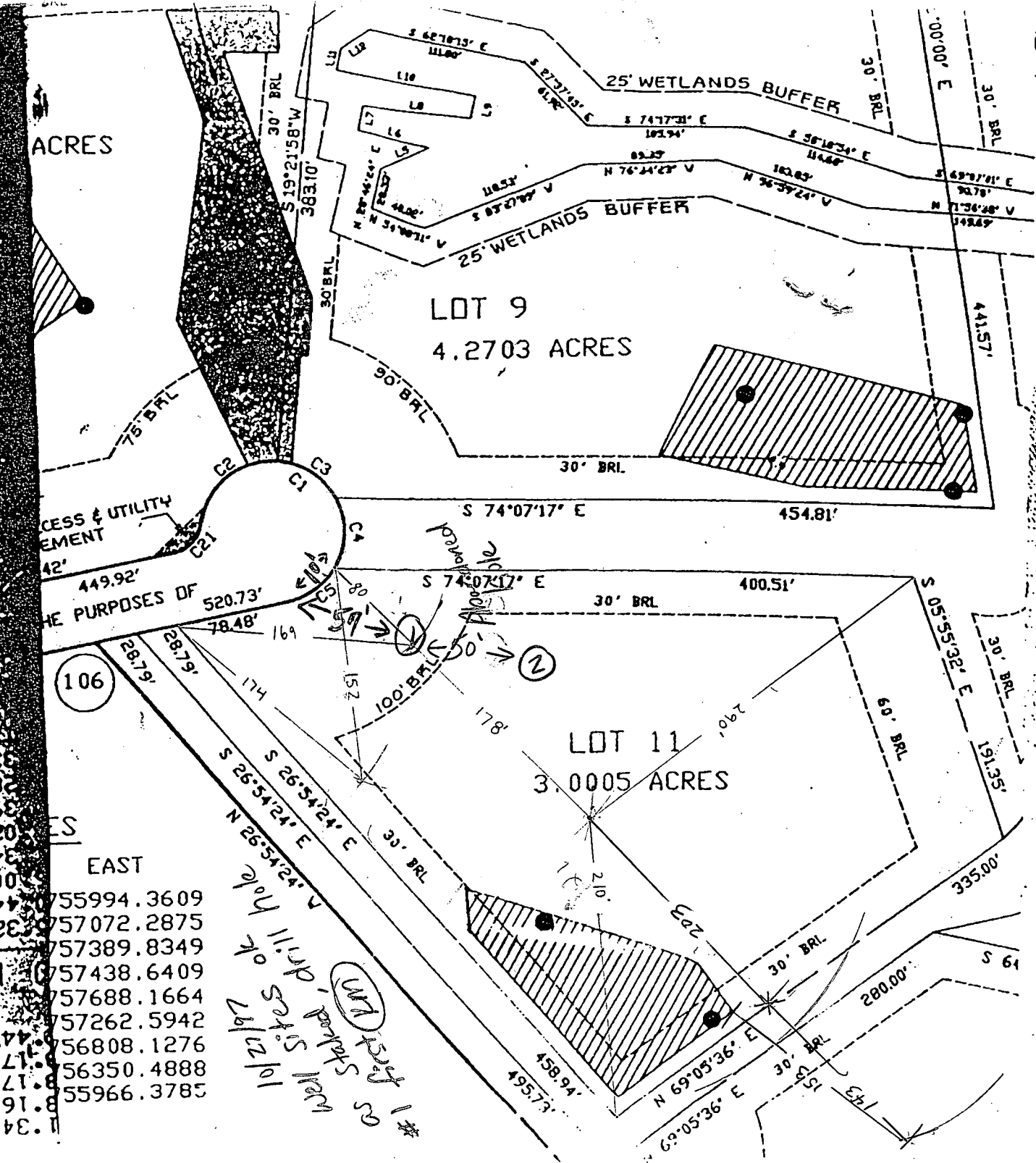
59-25

ACRES

LOT 9
4.2703 ACRES

LOT 11
3.0005 ACRES

#1 as Staked (km)
Well Sited ok
12/12/01



2/5/78
Spool 1000
HD Hills 10:15 AM

Howard County Health Department

To: File

Pleasant Hills - Lot 11

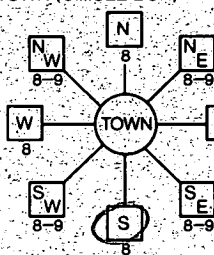
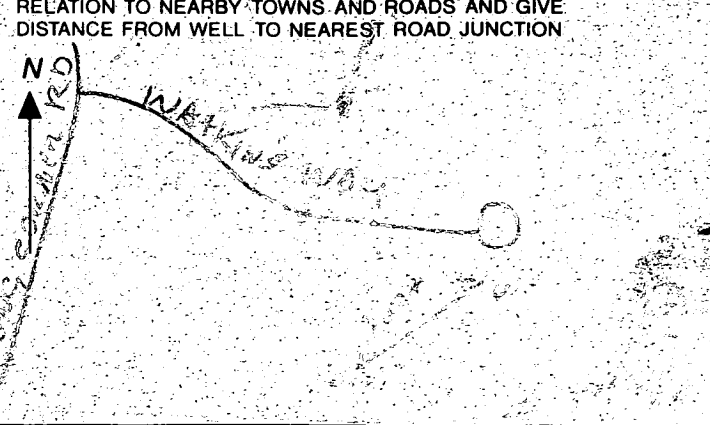
Well drilled at site #1 -

- location OK
- I arrived @ 1 PM, no one at site
- ex well, not approved, also not abandoned

From: DLS

Date: 2/2

HD-170

B 1 3062	SEQUENCE NO. (DP USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER 40-94-1187 <small>fill in this form completely</small>
Date Received (APA) 051697		B 3 LOCATION OF WELL	
OWNER INFORMATION Last Name: HARTZ Owner: ANGELO Street or RFD: 1217 TILKERMAN PL Town: BAITHMORE State: MD Zip: 21226		COUNTY: HARVARD SUBDIVISION: PIEBLOTT HILLS SECTION: I LOT: 11 NEAREST TOWN: MOUNT AIRY MILES FROM TOWN (enter 0 if in town): 5 MI	
DRILLER INFORMATION Driller's Name: Derry Harley Firm Name: Harley Drilling Co Address: Box 160 Watkinsville, MD Signature: Derry Harley Date: 5-15-97		B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX) 	
B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.): 3 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY): 500		NEAR WHAT ROAD: WATKINS WAY ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): 90 DISTANCE FROM ROAD: FT OR MI: FT TAX MAP: _____ BLK: _____ PARCEL: _____	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input checked="" 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)		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL Howard COUNTY NAME: Howard COUNTY NO: A43330 STATE SIGNATURE: [Signature] DATE ISSUED: 052797 EXP. DATE: 5/27/98 NORTH GRID: 540 000 EAST GRID: 0757000	
APPROXIMATE DEPTH OF WELL: 200 FEET 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: 757 N: 540	
METHOD OF DRILLING (circle one) BORED (or Augered) <input checked="" type="checkbox"/> JETTED <input type="checkbox"/> Jetted & DRIVEN <input type="checkbox"/> AIR-ROTARY <input type="checkbox"/> AIR-PERCussion <input checked="" type="checkbox"/> ROTARY (Hydraulic Rotary) <input type="checkbox"/> CABLE <input type="checkbox"/> REVERSE-ROTARY <input type="checkbox"/> Drive-POINT <input type="checkbox"/> 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 <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 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: F WRITE INITIALS IN BOX: _____ PERMIT No. 40-94-1187	
SPECIAL CONDITIONS NOTE = APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED = _____ COUNTY: _____			

LINE CHART

1.34.31	N	34.03	1
414.55	N	16.34	2
78.50	N	17.27	3
50.00	N	17.50	4
330.00	E	44.09	5
556808.1276			6
57262.5942			7
57688.1664			8
57438.6409			9
57389.8349			10
57072.2875			11
55994.3609			12
36.74	E	32.18	13
99.59	E	44.29	14
83.86	E	00.55	15
112.06	E	34.07	16
36.84	E	02.34	17
52.52	N	13.58	18
17.64	E	51.1	19
76.65	E	30.3	20
16.49	E	57.2	21
100.00	N	03.7	22
15.00	E	57.2	23
24.89	E	52.1	24

EAST

ARDS OF HOWARD

CESS & UTILITY
EMENT

HE PURPOSES OF

106

LOT 9

4.2703 ACRES

LOT 11

3.0005 ACRES

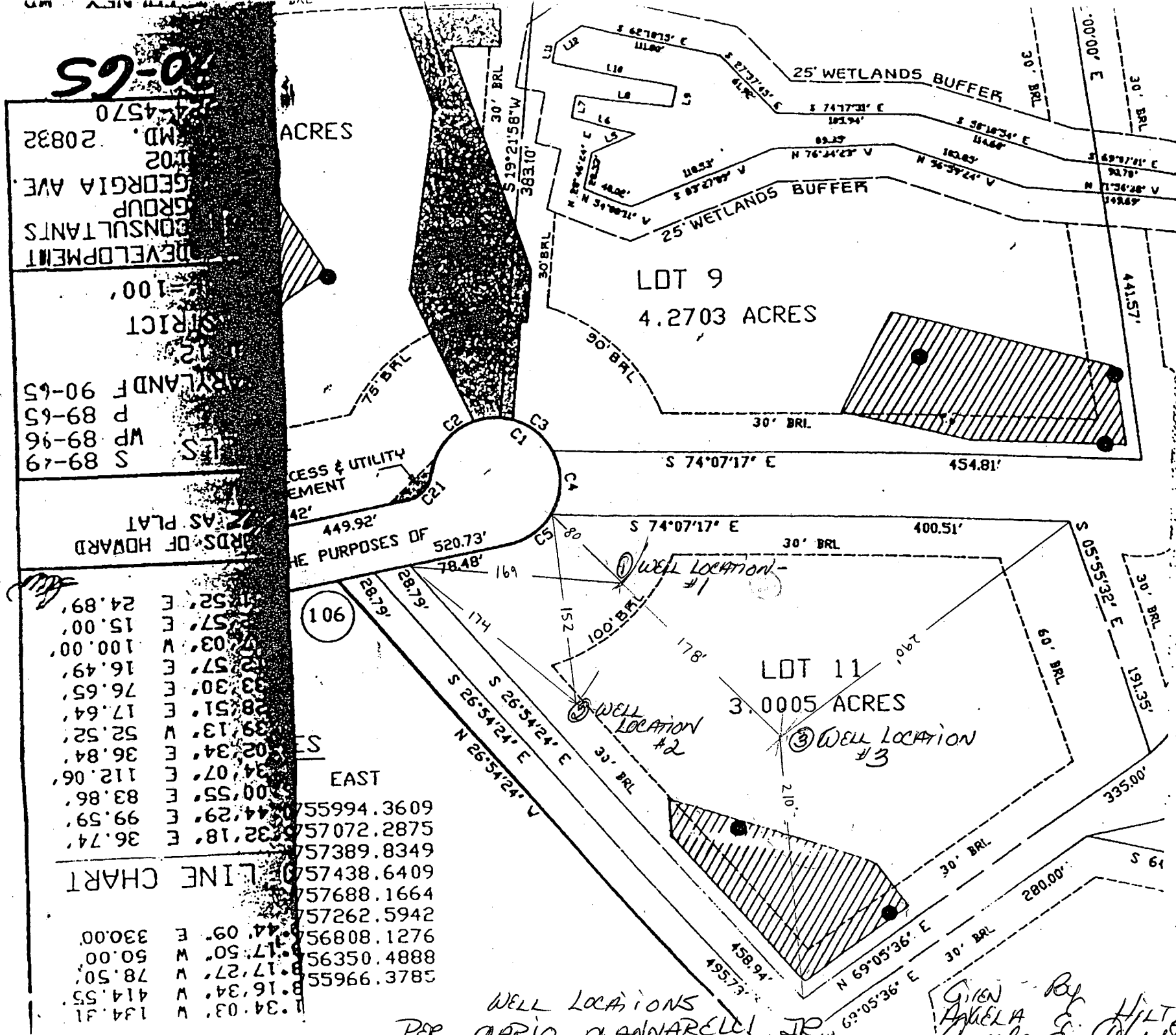
WELL LOCATION #1

WELL LOCATION #2

WELL LOCATION #3

WELL LOCATIONS
FOR MARIO MANNARELLI, JR.

GIVEN BY
ANGELA E. HILTZ



DEVELOPMENT
CONSULTANTS
GROUP
GEORGIA AVE.
T02
MD. 20832
44570

S 89-79
WP 89-96
P 89-65
RYLAND F 90-65
RICT
100'
ACRES



HOWARD-COUNTY HEALTH DEPARTMENT

Joyce M. Boyd, M.D., County Health Officer

July 14, 1997

Mr. Perry Harley
Harley Drilling Company
P.O. Box 160
Walkersville, Maryland 21793

RE: Pleasant Hills - Lot #11
Watkins Way
Well Permit #HO-94-1181

Dear Mr. Harley:

In a letter addressed to you June 19, 1997, this office expressed concern that the above referenced well was not in the location approved by the Health Department.


In order to resolve this concern, this office requested that the owner provide accurate field location of the well. The requested site plan submitted by the owner June 25, 1997, confirms that the location of the well is unacceptable due to its proximity to the existing approved septic easement.

Therefore, it is the determination of this office that this well needs to be abandoned and replaced by another well in an appropriate location, approved by this office prior to drilling.

To appeal this decision, it will be necessary for you to contact the program supervisor, Mr. Craig Williams, within fifteen (15) days of receipt of this letter. Formal avenues of appeal are available if this issue cannot be resolved in conference.

Thank you in advance for your prompt attention to this matter.

Sincerely,


Donna K. Soe, R. S.
Water and Sewerage Program

DKS

cc: Ms. Angela Hiltz
file

Bureau of Environmental Health
3525-H Ellicott Mills Drive Ellicott City, Maryland 21043-4544
Water and Sewerage, Permits (410) 313-2640 Community Environmental Health (410) 313-2644
Food Protection Program (410) 313-2642 TDD (410) 313-2323



HOWARD COUNTY HEALTH DEPARTMENT

Joyce M. Boyd, M.D., County Health Officer

June 19, 1997

MEMORANDUM

TO: Perry Harley
Harley Drilling Company
P.O. Box 160
Walkersville, Maryland 21793

FROM: Kimberly Maiste, Sanitarian (km)
Water and Sewerage Program

RE: Pleasant Hills - Lot 11
Watkins Way
Well Permit # HO-94-1181

OWNER ACKNOWLEDGES
THEY DIRECTED DRILLED.
DRILLER ADVISED BY ME THAT
ONLY LOCATIONS APPROVED
BY HEALTH DEPT ARE TO
BE DRILLED.

OWNER MADE APPT. FOR 6/24/97 1PM
TO SHOW PLAT; ACKNOWLEDGED
"THERE WAS A PROBLEM"
- APPOINTMENT RESCHEDULED FOR
6/25 @ 10:00. (km)

On June 11, 1997, an inspection for a grout and yield test, on the above referenced well, was performed by Donna Soe. During this inspection, it was observed that the well was not in the approved location.

A surveyed site plan needs to be submitted, along with the completion report, to this office so that we may evaluate the suitability of the actual location of the drilled well. The plan to be submitted should include the following information:

- actual locations and elevations of all drilling attempts
- actual location of existing well
- a suitable house site
- location of the approved septic area
- contour lines

If the well locations are drawn on a copy of the preliminary plan, most or all of the required information will have been shown.

To prevent any future occurrences of this kind, please be advised that the appropriate procedure is to obtain approval of any site prior to drilling. The reference may be found in COMAR 26.04.04.05B(2)(h) and C.

If you have any questions regarding this matter please feel free to contact me at the address below, or by calling (410) 313-2640.

:km
Enclosures
cc: Angela Hiltz
file

C 1		6081		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. 3-6 ON ALL CARDS)								COUNTY NUMBER	
ST/CO USE ONLY DATE Received MM DD YY		DATE WELL COMPLETED MM DD YY		Depth of Well 22 400 26		PERMIT NO. FROM "PERMIT TO DRILL WELL"		H0 - 94 - 1181	
8 13		15 20		(TO NEAREST FOOT)		28 29 30 31 32 33 34 35 36 37			
OWNER Hilte		last name		first name		TOWN		MAY	
STREET OR RFD Hilte		SUBDIVISION		SECTION		LOT		11	
WELL LOG Not required for driven wells		GROUTING RECORD		yes no		C 3		PUMPING TEST	
STATE THE KIND OF FORMATIONS PENETRATED: THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING		WELL HAS BEEN GROUTED (Circle Appropriate Box)		TYPE OF GROUTING MATERIAL (Circle one)		HOURS PUMPED (nearest hour)		6	
DESCRIPTION (Use additional sheets if needed)		CEMENT <input checked="" type="checkbox"/> BENTONITE CLAY <input checked="" type="checkbox"/>		NO. OF BAGS 45 46 8 NO. OF POUNDS 45 46 162		PUMPING RATE (gal. per min.)		2	
GALLONS OF WATER		DEPTH OF GROUT SEAL (to nearest foot)		from 48 TOP 52 54 BOTTOM 58		METHOD USED TO MEASURE PUMPING RATE		Submersible	
TOP 50 12 0 3		Brown Shell 4 18		Blue & Green Slate 19 400		WATER LEVEL (distance from land surface)		27	
GOT water		46		200		BEFORE PUMPING		176	
						WHEN PUMPING		22 25	
						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)		31 35	
						PUMP HORSE POWER		37 41	
						PUMP COLUMN LENGTH (nearest ft.)		43 47	
						CASING HEIGHT (circle appropriate box and enter casing height)		LAND SURFACE	
						+ above		2 (nearest foot)	
						- below		50 51	
NUMBER OF UNSUCCESSFUL WELLS: 2		WELL HYDROFRACTURED yes no		C 2		DEPTH (nearest ft.)		H0 31 400	
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.		DRILLERS LIC. NO. 1 M S D 143	
DRILLERS SIGNATURE		LIC. NO. 1 M D		SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		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	
								COUNTY	

HO-94-1181
well completion
report on hold
pending confirmation
of well location
6/25/97
DMS

OWARD COUNTY HEALTH DEPARTMENT

JUN 16 1997

RECEIVED

3
1 ACRES

LOT 10
5.3221 ACRES

LOT 9
4.2733 ACRES

LOT 11
3.0005 ACRES

LOT 13
4.7113 ACRES

ACCESS & UTILITY
ASEMENT

THE PURPOSES OF

106

TES

EAST

- 755994.3609
- 757072.2975
- 757389.8349
- 757438.6409
- 757688.1664
- 757262.5942
- 756808.1276
- 756350.4888
- 755966.3785

*Well 200K
as per
H/5/27/99*

TANGENT

- 70.71'
- 46.87'
- 27.32'
- 29.87'
- 21.71'
- 17.68'

ART

SLOPE	MIN. LOT AREA
2	3.6864 ACRES
1	3.8532 ACRES
0	4.4227 ACRES

NOTE: ALL AREAS
LISTED IN ACRES

ES
CRES

ST

105

APPLICATION

PERCOLATION TESTING

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

A 43330

P _____

DISTRICT 4774

DATE 1-4-89

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 Nelvon M. Watkins JAMES Hiltz

ADDRESS 26311 Howard Chapel Road PHONE (301) 859-0563
Damascas, MD 20878

PROSPECTIVE BUYER Standard Management Corporation

ADDRESS 10324-B Baltimore National Pike PHONE (301) 461-6777
Ellicott City, MD 21043

PROPERTY LOCATION:

SUBDIVISION Pleasant Hills LOT NO. 14 11 on final

ROAD AND DESCRIPTION Off of Long Corner Road (2055 Watkins Way)

TAX MAP 12 PARCEL # 5

SIZE OF LOT 3.50 Ac. TYPE BLDG. Single family - 4Bem
(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. David R. [Signature]

(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 1-27-89 Perc Satisfactory hold for PLAT. Salm

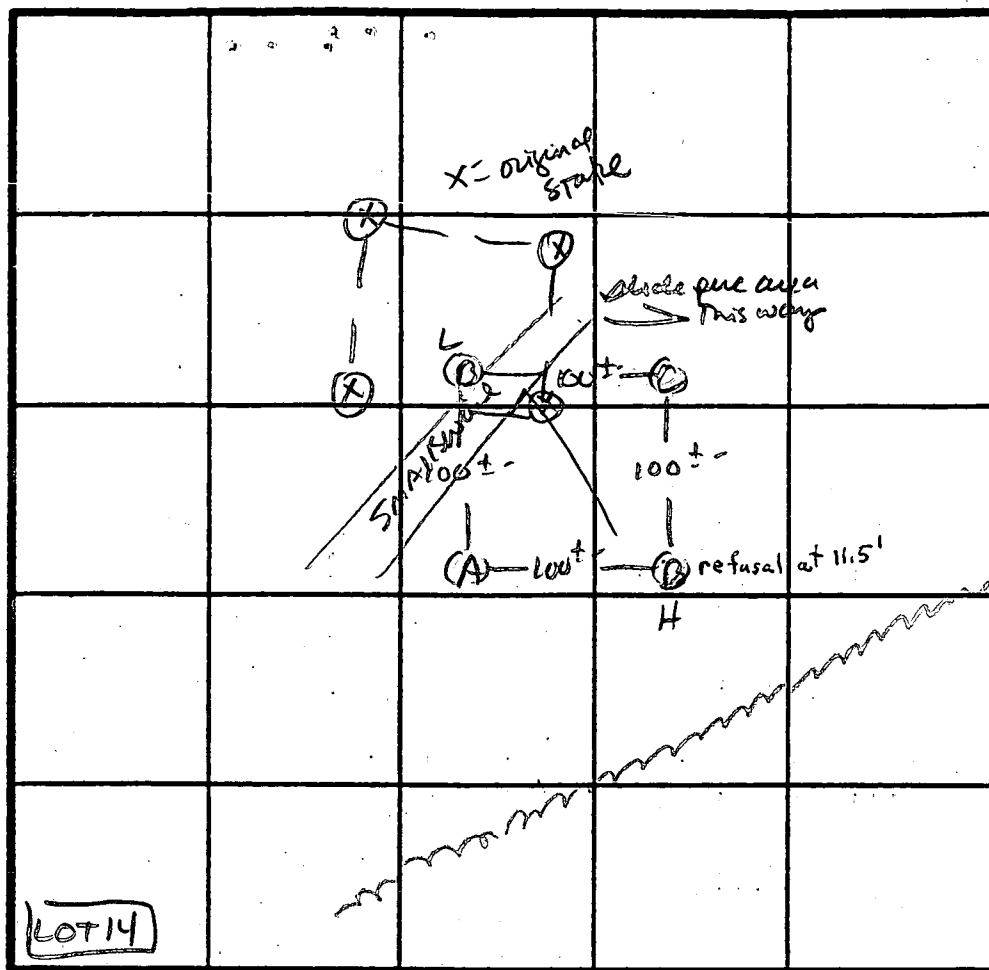
HD-216

THIS IS NOT A PERMIT

A-43330

SOIL PROFILE

0	AD
4"	Strong Bk Silty Clay loam 10-15% Frap
3.5'	Strong Bk Silty Sand loam 15-30% Frap
12'	



\bar{X} Perc 20min
240 ϕ /br
Inlet 3.5
Bottom 5.0

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

LONG CORNER Rd.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
1/27/89	CS	4.5'	10:56	11:06	11:06	11:28	22min
	CV	12'	as profile				
	BS	3.5'	10:59	11:10	11:10	11:35	25min
	BV	11.5'	similar to profile		Refusal	11.5'	
	AS	3.0'	11:05	11:15	11:15	11:43	28min
	AM	6.5'	11:01	11:02	11:02	11:05	3min
	AV	12'	similar to profile		Frap AT	40% AT 11'	
	DS	11.5'	11:10	11:14	11:18	11:38	20min
	DV		same as A				

REMARKS THAN DIFFASTAKED AND APPROX TO PLAT. SHALLOW SIST ONLY

TYPE OF SOIL MT Aray

TESTED BY S. Abel

ALSO PRESENT JACK F. ROCKY, Jeff A.

DEVELOPMENT CONSULTANTS GROUP
7904 GEORGIA AVE
SUITE 102
NEW MD. 20832
924-4570

S 89-49
 WP 89-96
 P 89-65
 90-65
 HILLS
 MARYLAND F
 AND 12
 DISTRICT
 LE 1, =100,

RECORDS OF HOWARD
AS PLAT

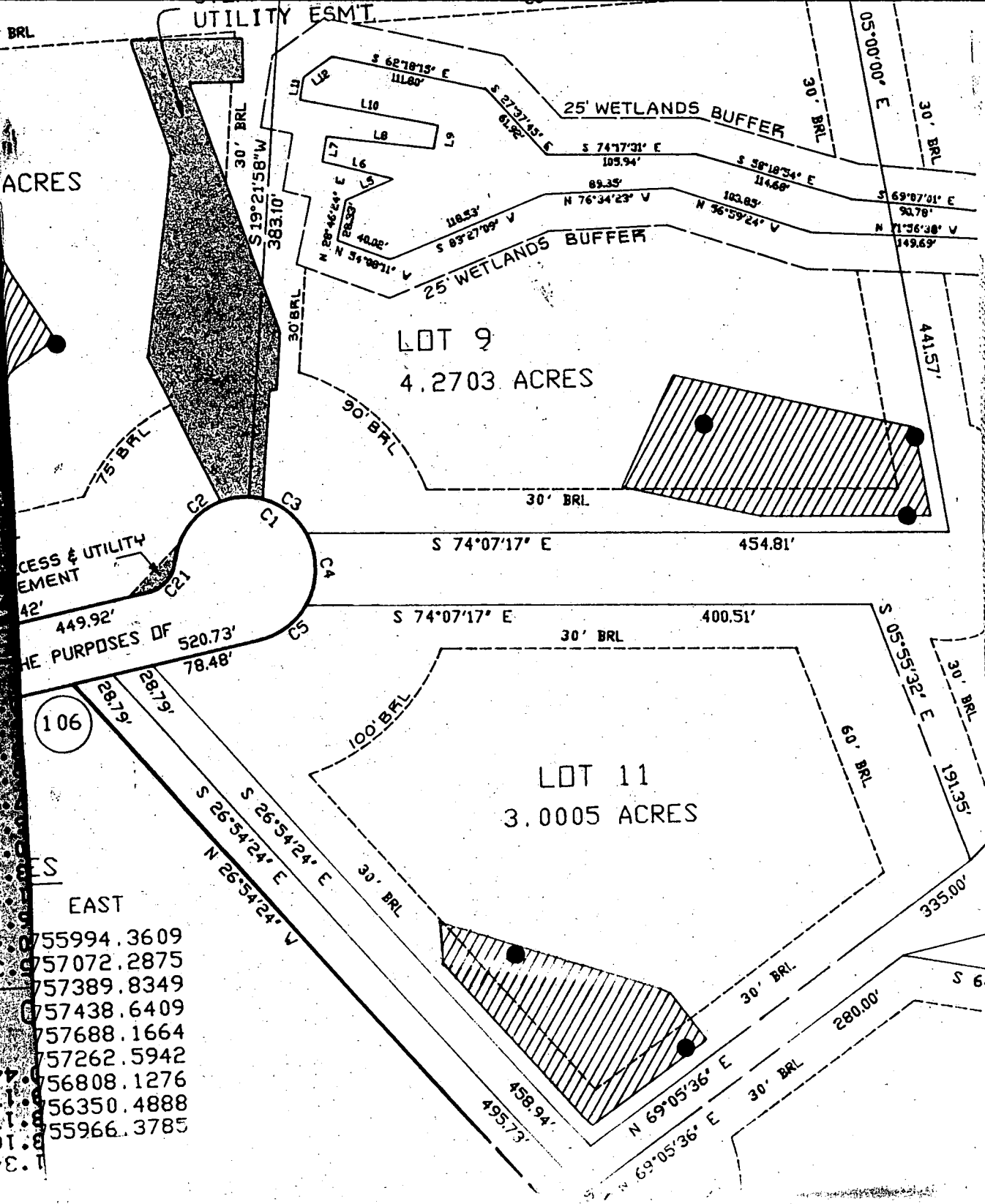
106

106 EAST

555994.3609
57072.2875
57288.8245

CHART LINE

134.31	W	3.34	03
414.55	W	3.16	34
78.50	W	3.17	27
50.00	W	3.17	50
330.00	E	3.44	09



ENGINEER'S CERTIFICATE

I HEREBY CERTIFY THAT THIS PLAN FOR EROSION AND SEDIMENT CONTROL REPRESENTS A PRACTICAL AND WORKABLE PLAN BASED ON MY PERSONAL KNOWLEDGE OF THE SITE CONDITION AND THAT IT WAS PREPARED IN ACCORDANCE WITH THE REQUIREMENTS OF THE HOWARD SOIL CONSERVATION DISTRICT.

SIGNATURE OF ENGINEER _____ DATE _____

DEVELOPER'S CERTIFICATE

I/WE CERTIFY THAT ALL DEVELOPMENT AND CONSTRUCTION WILL BE DONE ACCORDING TO THIS PLAN AND THAT ANY RESPONSIBLE PERSONNEL INVOLVED IN THE CONSTRUCTION PROJECT WILL HAVE A CERTIFICATE OF ATTENDANCE AT A DEPARTMENT OF THE ENVIRONMENT APPROVED TRAINING PROGRAM FOR THE CONTROL OF SEDIMENT AND EROSION BEFORE BEGINNING THE PROJECT. I ALSO AUTHORIZE PERIODIC ON-SITE INSPECTION BY THE HOWARD SOIL CONSERVATION DISTRICT.

SIGNATURE OF DEVELOPER _____ DATE _____

REVIEWED FOR HOWARD COUNTY SOIL CONSERVATION DISTRICT AND MEETS TECHNICAL REQUIREMENTS.

USDA NATURAL RESOURCES CONSERVATION SERVICE _____ DATE _____

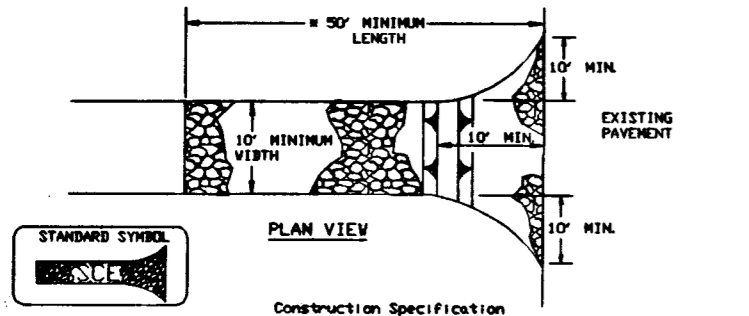
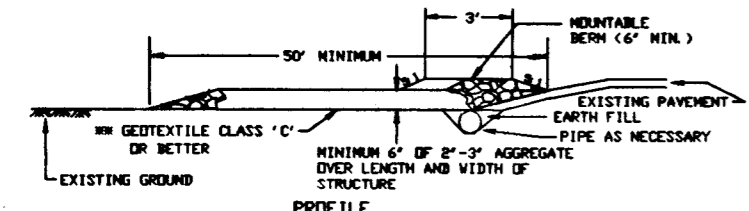
THIS DEVELOPMENT IS APPROVED FOR SOIL EROSION AND SEDIMENT CONTROL BY THE HOWARD SOIL CONSERVATION DISTRICT.

HOWARD SOIL CONSERVATION DISTRICT _____ DATE _____

SEDIMENT CONTROL NOTES

- A MINIMUM OF 48 HOURS NOTICE MUST BE GIVEN TO THE HOWARD COUNTY DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS, SEDIMENT CONTROL DIVISION PRIOR TO THE START OF ANY CONSTRUCTION (03-10-95).
- ALL VEGETATIVE AND STRUCTURAL PRACTICES ARE TO BE INSTALLED ACCORDING TO THE PROVISIONS OF THIS PLAN AND ARE TO BE IN CONFORMANCE WITH THE MOST CURRENT MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL AND REVISIONS THERE TO.
- FOLLOWING INITIAL SOIL DISTURBANCE OR REDISTURBANCE, PERMANENT OR TEMPORARY STABILIZATION SHALL BE COMPLETED WITHIN:
 - CALENDAR DAYS FOR ALL PERMETER SEDIMENT CONTROL STRUCTURES, Dikes, PERMETER SLOPES AND ALL SLOPES STEEPER THAN 3:1, BY 14 DAYS AS TO ALL OTHER DISTURBED OR GRADED AREAS ON THE PROJECT SITE.
- ALL SEDIMENT TRAPS/BASINS SHOWN MUST BE FENCED AND WARNING SIGNS POSTED AROUND THEIR PERIMETER IN ACCORDANCE WITH VOL. 1, CHAPTER 12, OF THE HOWARD COUNTY DESIGN MANUAL, STORM DRAINAGE.
- ALL DISTURBED AREAS MUST BE STABILIZED WITHIN THE TIME PERIOD SPECIFIED ABOVE IN ACCORDANCE WITH THE 1994 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL FOR PERMANENT SEEDING (SEC. 50, 50B SEC. 54), TEMPORARY SEEDING (SEC. 50, AND MULCHING (SEC. 52). TEMPORARY STABILIZATION WITH MULCH ALONE CAN ONLY BE DONE WHEN RECOMMENDED SEEDING DATES DO NOT ALLOW FOR PROPER GERMINATION AND ESTABLISHMENT OF GRASSES.
- ALL SEDIMENT CONTROL STRUCTURES ARE TO REMAIN IN PLACE AND ARE TO BE MAINTAINED IN OPERATIVE CONDITION UNTIL PERMISSION FOR THEIR REMOVAL HAS BEEN OBTAINED FROM THE HOWARD COUNTY SEDIMENT CONTROL INSPECTOR.
- SITE ANALYSIS:

TOTAL AREA OF SITE	3.0005 ACRES
AREA TO BE ROOFED OR PAVED	0.23 ACRES
AREA TO BE VEGETATIVELY STABILIZED	0.14 ACRES
TOTAL CUT	500 CUBIC YDS.
TOTAL FILL	300 CUBIC YDS.
- ANY SEDIMENT CONTROL PRACTICE WHICH IS DISTURBED BY GRADING ACTIVITY FOR PLACEMENT OF UTILITIES MUST BE REPAIRED ON THE SAME DAY OF DISTURBANCE.
- ADDITIONAL SEDIMENT CONTROLS MUST BE PROVIDED, IF DESIRED, NECESSARY BY THE HOWARD COUNTY SEDIMENT CONTROL INSPECTOR.
- ON ALL SITES WITH DISTURBED AREAS IN EXCESS OF 2 ACRES, APPROVAL OF THE INSPECTION AGENCY SHALL BE REQUESTED UPON COMPLETION OF INSTALLATION OF PERMETER EROSION AND SEDIMENT CONTROLS, BUT BEFORE PROCEEDING WITH ANY OTHER EARTH DISTURBANCE OR GRADING. OTHER BUILDING OR GRADING INSPECTION APPROVALS MAY NOT BE AUTHORIZED UNTIL THIS INITIAL APPROVAL BY THE INSPECTION AGENCY IS MADE.
- TRENCHES FOR THE CONSTRUCTION OF UTILITIES IS LIMITED TO THREE PIPE LENGTHS OR THAT WHICH SHALL BE BACK-FILLED AND STABILIZED WITHIN ONE WORKING DAY, WHICHEVER IS SHORTER.



- Length - minimum of 50' (30' for single residence lots).
- Width - 10' minimum, should be placed at the existing road to provide a turning radius.
- Geotextile fabric (filter cloth) shall be placed over the existing ground prior to placing stone. The plan approval authority may not require single family residences to use geotextile.
- Stone - crushed aggregate (2" to 3") or reclaimed or recycled concrete equivalent shall be placed at least 6" deep over the length and width of the entrance.
- Surface Water - all surface water flowing to or diverted toward construction entrances shall be piped through the entrance, maintaining positive drainage. Pipe installed through the stabilized construction entrance shall be protected with a mountable berm with 3:1 slopes and a minimum of 6" of stone over the pipe. Pipe has to be sized according to the design. When the pipe is located at a high spot and has no drainage to convey a pipe will not be necessary. Pipe should be sized according to the amount of runoff to be conveyed. A 6" minimum will be required.
- Location - A stabilized construction entrance shall be located at every point where construction traffic enters or leaves a construction site. Vehicles leaving the site must travel over the entire length of the stabilized construction entrance.

STABILIZED CONSTRUCTION ENTRANCE - 2

NOT TO SCALE

FISHER, COLLINS & CARTER, INC.
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS

CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE
ELLICOTT CITY, MARYLAND 21042
(410) 461-2895

SEQUENCE OF CONSTRUCTION

- OBTAIN GRADING PERMIT.
- INSTALL SEDIMENT CONTROLS AS SHOWN ON PLAN. (1 day)
- PERFORM NECESSARY GRADING AND STABILIZE THE SITE. (2 days)
- CONSTRUCT DWELLING ON SITE. (90 days)

AFTER THE SITE IS STABILIZED AND PERMISSION IS GRANTED FROM THE SEDIMENT CONTROL INSPECTOR, REMOVE SEDIMENT CONTROLS AND STABILIZE ANY REMAINING DISTURBED AREAS.

TEMPORARY SEEDING NOTES

APPLY TO GRADED OR CLEARED AREAS LIKELY TO BE REDISTURBED WHERE A SHORT-TERM VEGETATIVE COVER IS NEEDED.

SEEDING PREPARATION
LOOSEN UPPER THREE INCHES OF SOIL BY RAKING, DISCING OR OTHER ACCEPTABLE MEANS BEFORE SEEDING.
IF NOT PREVIOUSLY LOOSENED.

SOIL AMENDMENTS
APPLY 500 LBS. PER ACRE 10-10-10 FERTILIZER (4 LBS./1000 SQ. FT.)

SEEDING
FOR THE PERIODS MARCH 1 THROUGH APRIL 30, AND AUGUST 15 THROUGH NOVEMBER 15, SEED WITH 1 1/2 BUSHEL PER ANNUAL RYE (3.2 LBS./1000 SQ. FT.) FOR THE PERIOD MAY 1 THRU AUGUST 14, SEED WITH 3 LBS./ACRE OF WEEPING LOVEGRASS (0.7 LBS./1000 SQ. FT.) FOR THE PERIOD NOVEMBER 15 THRU FEBRUARY 28. PROTECT SITE BY APPLYING 2 TONS PER ACRE OF WELL ANCHORED STRAW MULCH AND SEED AS SOON AS POSSIBLE IN THE SPRING, OR USE SOO.

MULCHING
APPLY 1 1/2 TO 2 TONS PER ACRE (70 TO 90 LBS./1000 SQ. FT.) OF UNROTTED SMALL GRASS STRAW IMMEDIATELY AFTER SEEDING. ANCHOR MULCH IMMEDIATELY AFTER APPLICATION USING MULCH ANCHORING TOOL OR 210 GALLONS PER ACRE (5 GAL./1000 SQ. FT.) OF EMULSIFIED ASPHALT ON FLAT ACRES, ON SLOPES 6 FEET OR HIGHER, USE 340 GALLONS PER ACRE (18 GAL./1000 SQ. FT.) FOR ANCHORING.

REFER TO THE 1986 MARYLAND STANDARDS AND SPECIFICATION FOR SOIL EROSION AND SEDIMENT CONTROL FOR RATE AND METHODS NOT COVERED.

PERMANENT SEEDING NOTES

ALL DISTURBED AREAS SHALL BE STABILIZED AS FOLLOWS:

SEEDING PREPARATION
LOOSEN UPPER THREE INCHES OF SOIL BY RAKING, DISCING OR OTHER ACCEPTABLE MEANS BEFORE SEEDING.

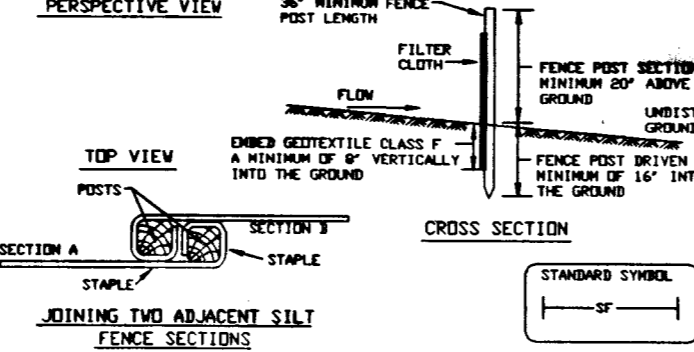
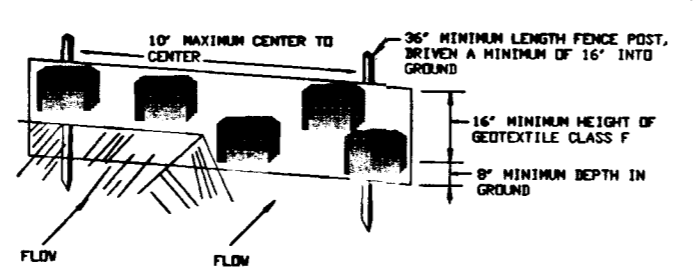
SOIL AMENDMENTS
APPLY TWO TONS PER ACRE DOLICHITE LIMESTONE (92 LBS./1000 SQ. FT.) AND 800 LBS. PER ACRE 0-20-20 FERTILIZER (4 LBS./1000 SQ. FT.) BEFORE SEEDING HARROW OR DISC INTO UPPER THREE INCHES OF SOIL. AT THE TIME OF SEEDING, APPLY 100 LBS. PER ACRE 30-0-0 UREAFORM FERTILIZER (9 LBS./1000 SQ. FT.) AND 500 LBS. PER ACRE (0.5 LBS./1000 SQ. FT.) OF 10-20-20 FERTILIZER.

SEEDING
FOR THE PERIODS MARCH 1 THROUGH APRIL 30, AND AUGUST 1 THROUGH OCTOBER 15, SEED WITH 100 LBS. PER ACRE (2.3 LBS./1000 SQ. FT.) OF KENTUCKY 31 TALL FESCUE, FOR THE PERIOD MAY 1 THROUGH JULY 31, SEED WITH 80 LBS./ACRE (4 LBS./1000 SQ. FT.) KENTUCKY 31 TALL FESCUE AND 2 LBS. PER ACRE (0.05 LBS./1000 SQ. FT.) OF WEEPING LOVEGRASS. DURING THE PERIOD OF OCTOBER 15 THROUGH FEBRUARY 28, PROTECT SITE BY OPTION (1) - TWO TONS PER ACRE OF WELL ANCHORED STRAW MULCH AND SEED AS SOON AS POSSIBLE IN THE SPRING, OPTION (2) - USE SOO; OPTION (3) - SEED WITH 100 LBS./ACRE KENTUCKY 31 TALL FESCUE AND MULCH WITH TWO TONS/ACRE WELL ANCHORED STRAW. ALL SLOPES SHOULD BE HYDROSEED.

MULCHING
APPLY 1 1/2 TO 2 TONS PER ACRE (70 TO 90 LBS./1000 SQ. FT.) OF UNROTTED SMALL GRASS STRAW IMMEDIATELY AFTER SEEDING. ANCHOR MULCH IMMEDIATELY AFTER APPLICATION USING 200 GALLONS PER ACRE (5 GAL./1000 SQ. FT.) OF EMULSIFIED ASPHALT ON FLAT ACRES, ON SLOPES 6 FEET OR HIGHER USE 340 GALLONS PER ACRE (18 GAL./1000 SQ. FT.) FOR ANCHORING.

MAINTENANCE
INSPECT ALL SEEDING AREAS AND MAKE NEEDED REPAIRS, REPLACEMENTS AND RESEEDING.

FOR PUBLIC PONDS SUBSTITUTE CHEMUNG CROWN VETCH AT 15 LBS./ACRE AND KENTUCKY 31 TALL FESCUE AT 40 LBS./ACRE AS THE SEEDING EQUIVALENT. OPTIMUM SEEDING DATE FOR THIS MIXTURE IS MARCH 1 TO APRIL 30.



- Fence posts shall be a minimum of 36" long driven 16" into the ground. Wood posts shall be 1 1/2" x 1 1/2" square (minimum) cut, or 1 3/4" diameter (minimum) round and shall be of sound quality hardwood. Steel posts will be standard T or U section weighting not less than 1.00 pound per linear foot.
- Geotextile shall be fastened securely to each fence post with wire ties or staples at top and mid-section and shall meet the following requirements for Geotextile Class F:

Tensile Strength	50 lbs/in (min.)	Test: MSMT 509
Tensile Modulus	20 lbs/in (min.)	Test: MSMT 509
Flow Rate	0.3 gal. per sq. minute (max.)	Test: MSMT 322
Filtering Efficiency	75% (min.)	Test: MSMT 322
- Where ends of geotextile fabric come together, they shall be overlapped, folded and stapled to prevent sediment bypass.
- Silt Fence shall be inspected after each rainfall event and maintained when bulges occur or when sediment accumulation reached 50% of the fabric height.

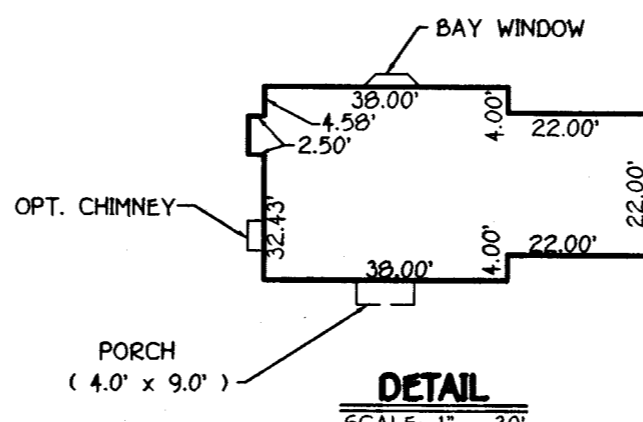
SILT FENCE

NOT TO SCALE

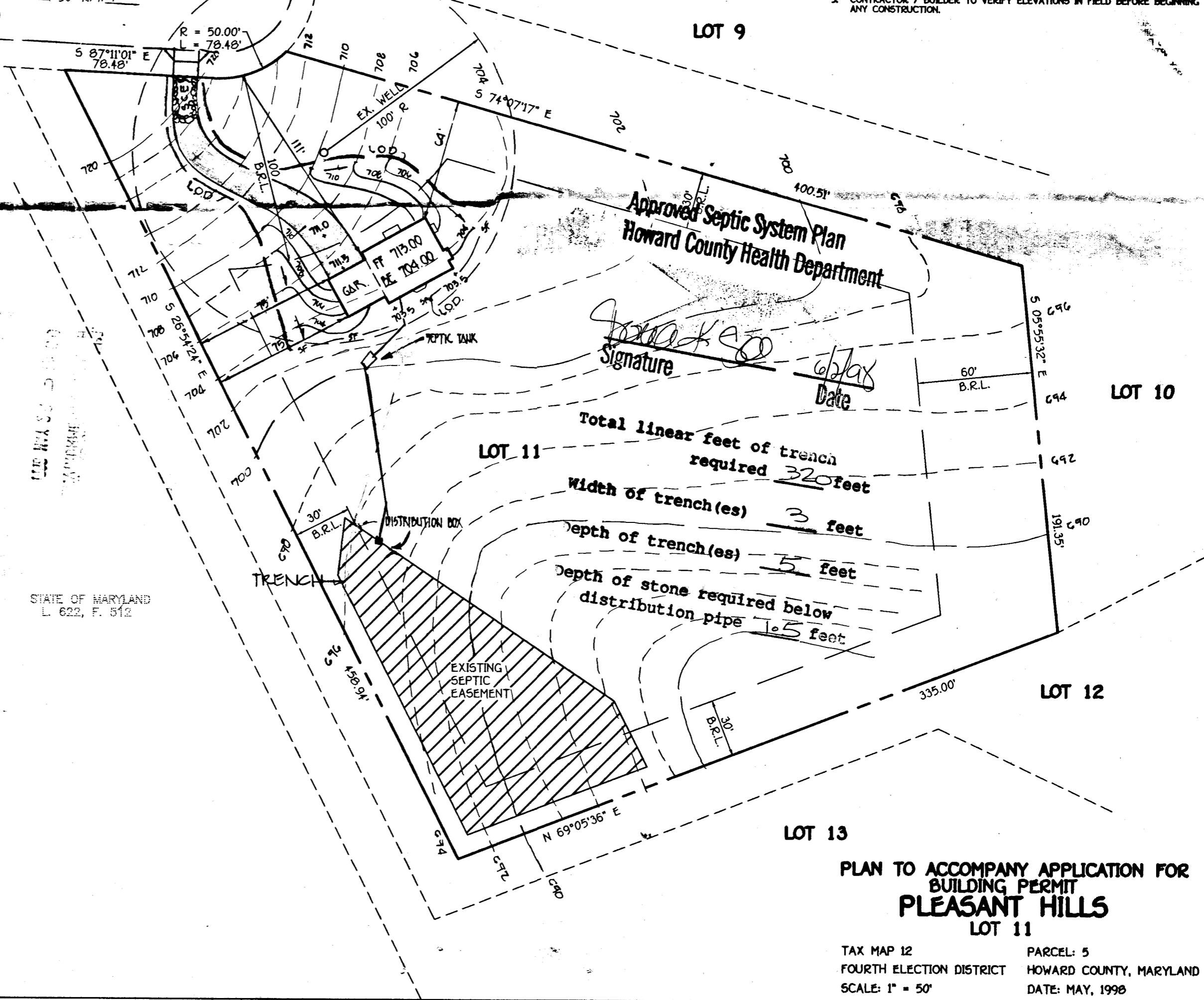
TOPSOIL SPECIFICATIONS - SOIL TO BE USED AS TOPSOIL MUST MEET THE FOLLOWING:
TOPSOIL SHALL BE A LOAM, SANDY LOAM, CLAY LOAM, SILT LOAM, SANDY CLAY LOAM, LOAMY SAND. OTHER SOILS MAY BE USED IF RECOMMENDED BY AN AGRONOMIST OR SOIL SCIENTIST AND APPROVED BY THE APPROPRIATE APPROVAL AUTHORITY. REGARDLESS, TOPSOIL SHALL NOT BE A MIXTURE OF CONTRASTING TEXTURE SUBSOILS AND SHALL CONTAIN LESS THAN 5% BY VOLUME OF CINDERS, STONES, SLAG, COARSE FRAGMENTS, GRAVEL, STICKS, ROOTS TRASH, OR OTHER MATERIALS LARGER THAN 1 1/2" IN DIAMETER.

TOPSOIL MUST BE FREE OF PLANTS OR PLANT PARTS SUCH AS BERMUDA GRASS, QUACKGRASS, JOHNSONGRASS, NUTSEDGE, POISON IVY, THISTLE, OR OTHERS AS SPECIFIED.

WHERE THE TOPSOIL IS EITHER HIGHLY ACIDIC OR COMPOSED OF HEAVY CLAYS, GROUND LIMESTONE SHALL BE SPREAD AT THE RATE OF 4-8 TONS/ACRE (200-400 POUNDS PER 1000 SQUARE FEET) PRIOR TO THE PLACEMENT OF TOPSOIL. LIME SHALL BE DISTRIBUTED UNIFORMLY OVER DESIGNATED AREAS AND WORKED INTO THE SOIL IN CONJUNCTION WITH TILLAGE OPERATIONS AS DESCRIBED IN THE FOLLOWING PROCEDURES.



WATKINS WAY



PLAN TO ACCOMPANY APPLICATION FOR BUILDING PERMIT
PLEASANT HILLS
LOT 11

TAX MAP 12
FOURTH ELECTION DISTRICT
SCALE: 1" = 50'
PARCEL: 5
HOWARD COUNTY, MARYLAND
DATE: MAY, 1998

APPLICATION

HOWARD COUNTY

PERMIT APPLICATION

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

SERIAL NUMBER

B0012016

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

8055 Walker Way
MT. AIRY MD 21771GRADING/SEDIMENT CONTROL ☐ YES ☐ NO

SDP #

DESCRIPTION OF WORK AUTHORIZED

New Single Family
Kit, BR Rm, Fam Rm, L.R., DR, AC
4 Bed rooms, 2 CAR ATTACHED GAR
1 FP unfinished basement

LOT NO. PARCEL NO. SEC. AREA BLOCK NO. LIBER FOLIO

11

5

1

—

4

—

—

SUB DIVISION

I ZONE

ZONE MAP

ELEC. DIST.

CENSUS TR.

PLEASANT H. HS

DEU

12

4

6040

OWNER NAME AND ADDRESS

PHONE NO.

JAMES H. H. 112
1217 Tillerman Place
BALTIMORE MD 21226 410-360-7033

OCCUPANT'S NAME AND ADDRESS

PHONE NO.

SAME

ARCHITECT OR ENGINEER'S NAME AND ADDRESS

PHONE NO.

Fisher Collins & Carter
410-461-2835

CONTRACTOR'S NAME AND ADDRESS

PHONE NO.

M. MANNABILL & SONS CORP
2939 Summit Cr.
511 Court City MD 21043 410-461-2278

EXISTING USE

PROPOSED USE

VACANT LOT SFD

EST. CONSTRUCTION COST

LICENSE NUMBER

PERMIT FEE

120,000 2046

SIZE OF BLDG. FRONT DEPTH HEIGHT

TYPE OF BLDG. AREA VOLUME ROOF

B. ROOMS
ROOMS
BATHS
FIREPLACES

FOOTINGS FOUNDATION S. WALLS

UTILITIES

WATER/WELL 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 in 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.

MARIA MANNABILL

SIGNATURE

DATE 5/29/98

W/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)

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

FUNCTION DATE SIGNATURE APPROVAL

ZONING/PLANNING

SHA

SEDIMENT/GRADING

BUILDING OFFICIAL

WATER & SEWER

HEALTH DEPT.

FIRE PROTECTION

STORM WATER MGMT

ENHANCEDMENT HEALTH

APPROVED DATE

Distribution of Copies:

White - Building Official
Green - Planning & Zoning

Yellow - Engineering

Pink - Health Dept.

Gold - S.H.A.