C.O. 8.14.98 pm

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 510234

A 48844

DISTRICT 3rd

DATE 6-30-98

DATE SYSTEM APPROVED 8-14-98

INSPECTOR ALL

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
~~XXXXXXX~~ 410-313-2640

WPI - willow64by 8/21/98

INDEXED

Fogle's Septic Clean, Inc. IS PERMITTED TO INSTALL X ALTER _____

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

SUBDIVISION Quarterfield LOT 28 ROAD 3749 Running Springs Road

PROPERTY OWNER Dale Thompson Builders

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 180

TRENCHES - Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 7 feet below original grade. Effective area begins at 3 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Starting from the left rear lot corner, place the distribution box 85 feet up the left (329.73') lot line and 100 feet off this same lot line. Run trenches on contour in both directions.

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 6.17.98

PLANS APROVED BY Mark Rifkin DATE 6/16/98

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

[redacted] 4/19/01

B00129714
deck

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.

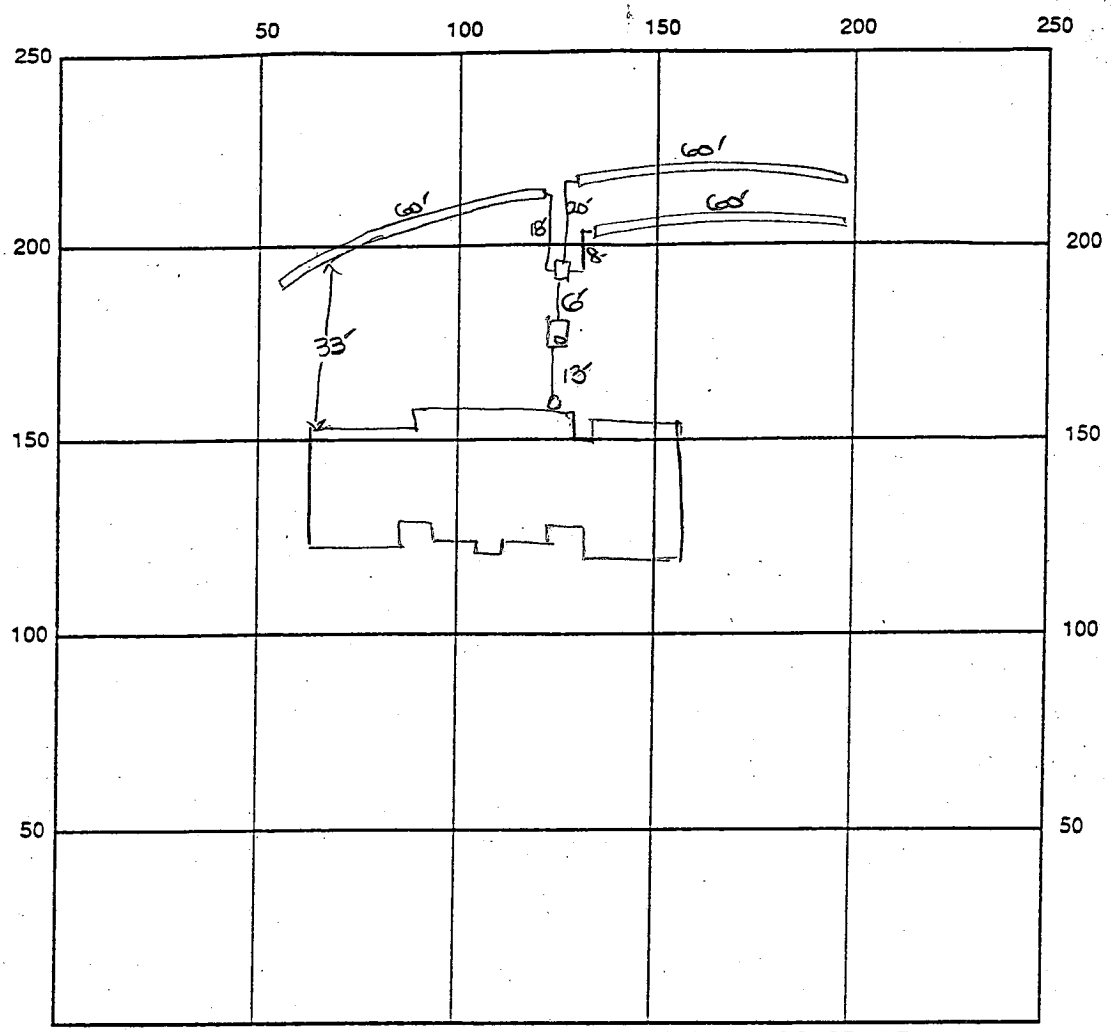
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

HD-260(6-90)

A 48844



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL OK CLEANOUTS one on s.t.

DISTRIBUTION BOX LEVEL OK - baffle in

DRAIN FIELD/TITLE DEPTH 7 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 4 FT. TOTAL LENGTH 3 x 60 FT. 180/4 = 720

NUMBER OF TRENCHES 3 (ONE SIDEWALL)/BOTTOM AREA 720 SQ. FT.

DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET 4.0 FT.

ABSORBENT AREA — SQ. FT.

REMARKS: 8/14/98 OK to cover all work final AM

8-24-98 WPI OK to cover AM

DATE SYSTEM APPROVED 8-14-98 INSPECTOR Amy McMillen

APPLICATION

PERCOLATION TESTING

A 44

P

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

DISTRICT

DATE 1/7/93

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER ~~Joseph M. Zoller, III~~ Dale Thompson Builders

ADDRESS 11696 Carroll Mill Road Ellicott City, Maryland 21043 PHONE

AGENT OR PROSPECTIVE BUYER SDC Group, Inc.

ADDRESS P.O. Box 417, Ellicott City, MD 21041 PHONE (410) 465-4244

PROPERTY LOCATION:

SUBDIVISION Zoller Property LOT NO. 10 ~~12~~ 28

ROAD AND DESCRIPTION Northeast quadrant Folly Quarter Road and Carroll Mill Road intersection.

BLDG. PERMIT SIGNED AND RETURNED 6-16-98
Serial # BR 111956

TAX MAP 23 PARCEL # 8,82 & 101

SIZE OF LOT 1 Ac +/- TYPE BLDG. Single Family - 4 Bdrm
(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.

SDC Group Inc.
By: [signature] VP
(SIGNATURE OF APPLICANT)

APPROVED BY FOR DATE

DISAPPROVED BY FOR DATE

HOLD PENDING FURTHER TESTS

REASONS FOR REJECTION OR HOLDING PERC OK — HOLD FOR PLAT MR 7/26/93

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # DATE

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # DATE

THIS IS NOT A PERMIT

HD-216 (3/92)

COUNTY #

SOIL PROFILE

276

0'

tan/brn sa cl lm 10% frags

3

.079 gray

tan sa lm 5-15% frags

11

426

tan sa cl lm 10% frags

3

tan sa lm 10-20% frags

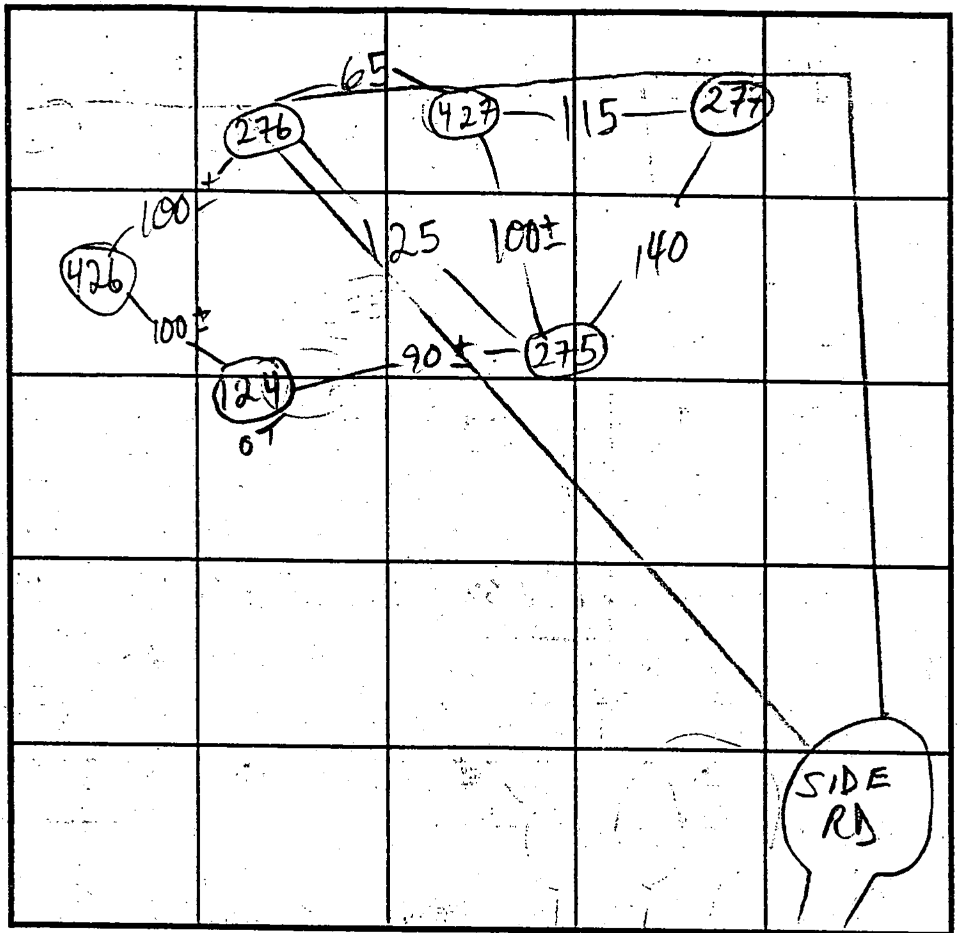
7

tan sa lm <10% frags

11½

SOIL PROFILE

0'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
8/3/94	276 S	4½	1:46:25	1:47:05	1:47:05	1:48:20	1¼ min
	276 V	11½					
	277 S	5	2:12:50	2:14:25	2:14:25	2:17	2+
	277 V	13					
	275 S	5	2:03:20	2:04:05	2:04:05	2:05:15	1+
	275 V	11½					
	427 S	5	1:51:45	1:52:30	1:52:30	1:53:30	1
	427 V	13	clay	to 3'	s into	profile	
	426 S	4½	1:15	1:21	1:21	1:37	16
	426 V	11½					

REMARKS

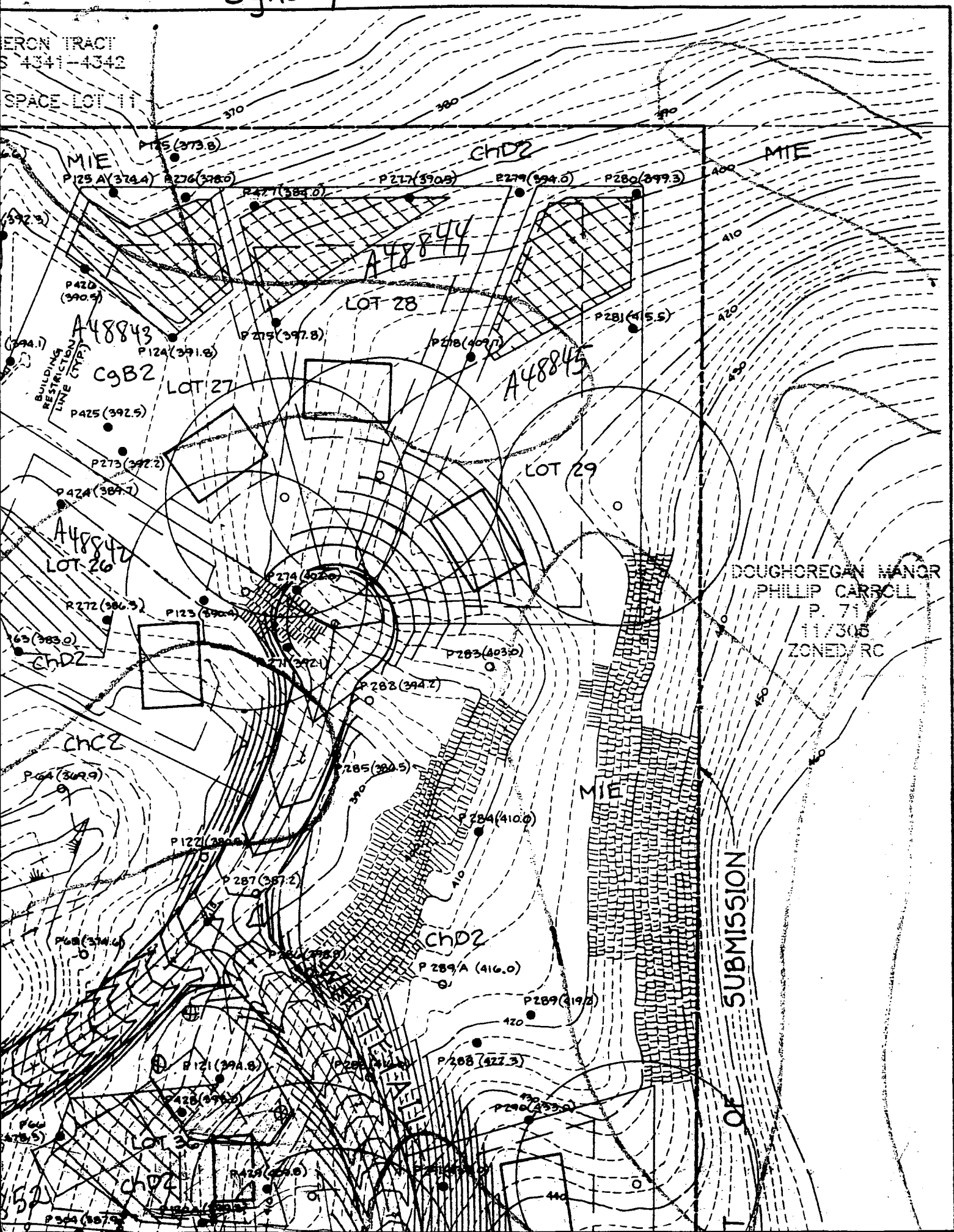
TYPE OF SOIL

TESTED BY M. Rifkin ALSO PRESENT Hatfield crew

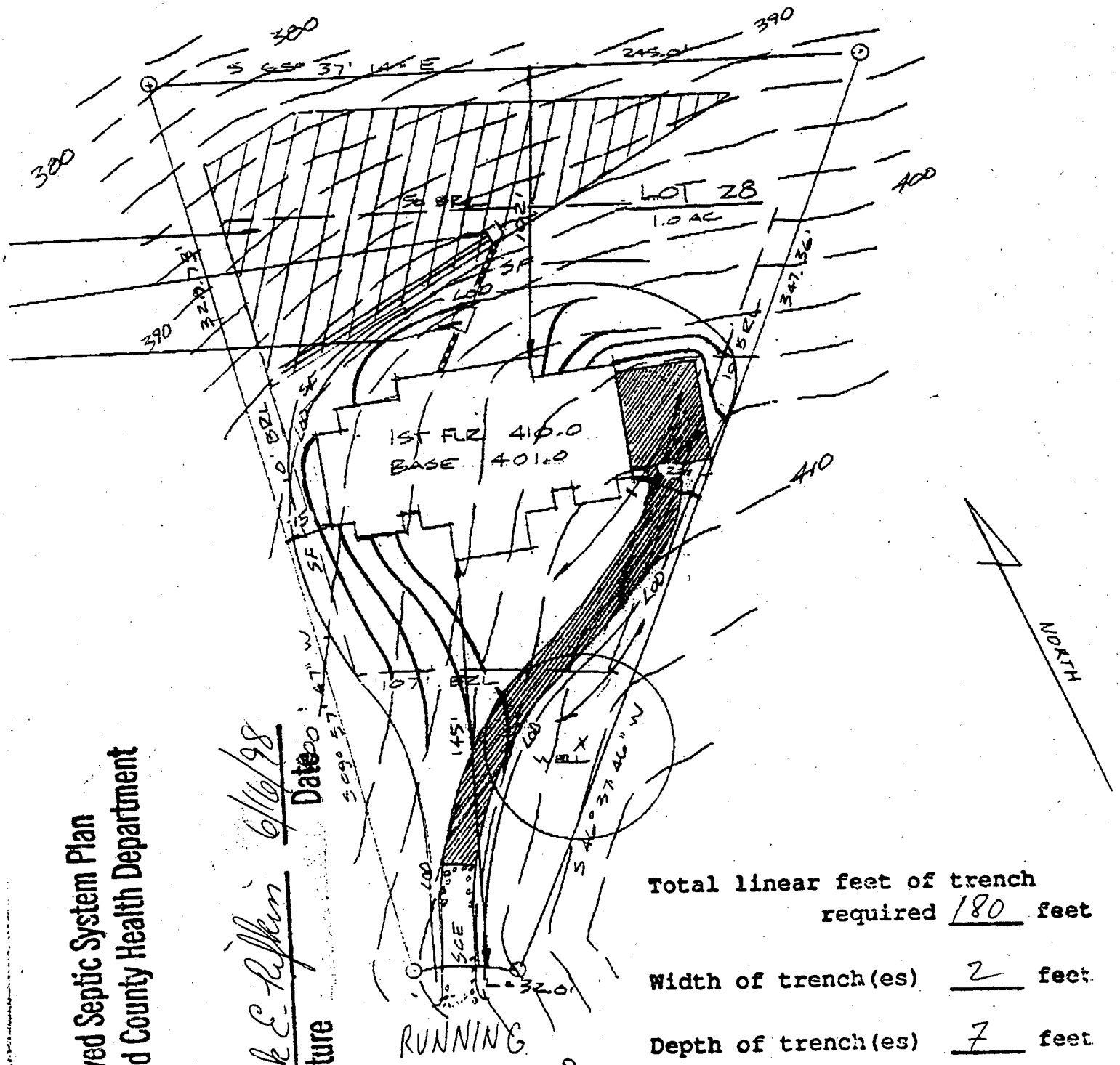
TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 2 TRENCH WIDTH 2

INLET DEPTH 3 MAXIMUM BOTTOM DEPTH 7 SQ. FT/BEDROOM 180

Signed perc cert



Septic Grades & Elevations	Inv.	Grade
INVERT @ HOUSE	399.00	401.00
INVERT @ ENTRANCE TO TANK	397.00	401.00
INVERT @ EXIT TO TANK	396.75	400.00
INVERT @ DISTRIBUTION BOX	393.00	396.00



Approved Septic System Plan
Howard County Health Department

Mark E. Pfeffer
Signature

6/16/98
Date

Total linear feet of trench required 180 feet

Width of trench(es) 2 feet

Depth of trench(es) 7 feet

Depth of stone required below distribution pipe 4 feet

C 1 | 05060 | SEQUENCE NO. (MDE USE ONLY)

(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 A48844

ST/CO USE ONLY
DATE Received: MM 5 DD 2 YY 98

DATE WELL COMPLETED: MM 4 DD 23 YY 98

Depth of Well: 200 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL": HO-94-1477

OWNER Dale Thompson Bldrs (last name / first name)

STREET OR RFD Running Springs Rd TOWN W. Friendship

SUBDIVISION QUARTER FIELD SECTION _____ LOT 28

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	FEET TO	check if water bearing
Sand	0	28	
Gray Granite	28	200	✓

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED: yes [Y] no [N]

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.

DRILLERS LIC. NO. MSD024

Joseph Mayne
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. MSD021

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

GROUTING RECORD
WELL HAS BEEN GROUTED (Circle Appropriate Box): yes [Y] no [N]

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT [CM] BENTONITE CLAY [BC]

NO. OF BAGS 9 NO. OF POUNDS 846

GALLONS OF WATER 54

DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 29 ft.
(enter 0 if from surface)

CASING RECORD
casing types insert appropriate code below

[ST] STEEL [CO] CONCRETE [PL] PLASTIC [OT] OTHER

MAIN CASING TYPE	Nominal diameter top (main) casing (nearest inch)!	Total depth of main casing (nearest foot)
ST	6	32

OTHER CASING (if used) — EACH CASING

diameter inch	depth (feet) from	to

SCREEN RECORD
screen type or open hole insert appropriate code below

[ST] STEEL [BR] BRASS BRONZE [HO] OPEN HOLE [PL] PLASTIC [OT] OTHER

DEPTH (nearest ft.) — EACH SCREEN

		from	to
1	HO	30	200
2			
3			

SLOT SIZE 1 _____ 2 _____ 3 _____

DIAMETER OF SCREEN _____ (NEAREST INCH)

GRAVEL PACK from _____ to _____

IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)

T (70) (E.R.O.S.) (72) W Q (74 75 76)

TELESCOPE CASING | LOG INDICATOR | OTHER DATA

PUMPING TEST
HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min.) 20

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 45 ft.

WHEN PUMPING 55 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

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)

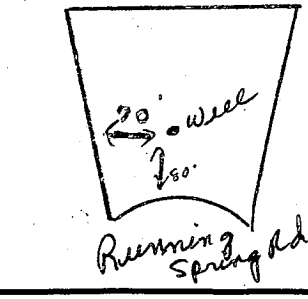
PUMP HORSE POWER

PUMP COLUMN LENGTH (nearest ft.)

CASING HEIGHT (circle appropriate box and enter casing height)

[+] above [–] below LAND SURFACE 2 (nearest foot)

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



COUNTY

EMERGENCY/TEMP NO. IF ANY

B 1 8006 — SEQUENCE NO. (MDE USE ONLY)
1 2 3 4 5 6
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
PERMIT TO DRILL WELL
please print or type

STATE PERMIT NUMBER: HO-94-1477 (70 79)
fill in this form completely

Date Received (APA): 11/18/97 (8 MM DD YY 13)

OWNER INFORMATION

Thompson (15 Last Name) Dale (Owner First Name 34)
10005 Old Columbia Rd. (36 Street or RFD 55)
Columbia (57 Town) Md. (70 State) 21046 (72 Zip 76)

DRILLER INFORMATION

Joseph L. Mayne (Driller's Name) M S D 024 (76 License No. 81)
Joseph L. Mayne Well Drilling (Firm Name)
5512 Ridge Rd. Mt. Airy Md. 21771 (Address)
Joseph L Mayne 11/17/97 (Signature Date)

B 2 — WELL INFORMATION
APPROX. PUMPING RATE (GAL. PER MIN.): 5 (8 12)
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY): 500 (14 20)

USE FOR WATER (CIRCLE APPROPRIATE BOX)

(D) HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
[F] FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
22 [I] INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
[P] PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE APPROVAL)
[T] TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

APPROXIMATE DEPTH OF WELL: 240 FEET (24 28)
APPROXIMATE DIAMETER OF WELL: 6 NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) — JETTED — Jetted & DRIVEN
30 (AIR-ROTary) — AIR-PERcussion — ROTARY (Hydraulic Rotary)
37 CABLE — REVerse-ROTary — DRive-POINT
other

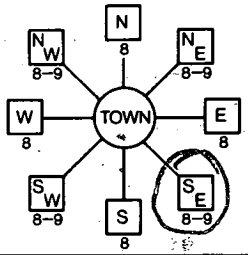
REPLACEMENT OR DEEPENED WELLS (CIRCLE APPROPRIATE BOX)

(N) THIS WELL WILL NOT REPLACE AN EXISTING WELL
[Y] THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
39 [S] THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
[D] THIS WELL WILL DEEPEN AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENED (IF AVAILABLE) (41 52)

Not to be filled in by driller (MDE OR COUNTY USE ONLY)
APPROP. PERMIT NUMBER: GAP (54 63)
FORCE: M R (WRITE INITIALS IN BOX) (67 68) PERMIT No. HO-94-1477 (70 71 72 73 74 75 76 77 78 79)

B 3 — LOCATION OF WELL
Howard (8 COUNTY 21)
Quarterfield (23 SUBDIVISION 42)
SECTION (44 46) LOT 28 (48 50)
West Friendship (52 NEAREST TOWN 71)
MILES FROM TOWN (enter 0 if in town): 4 (73 76 77 78 M I)

B 4 — DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Running Spring Rd. (11 NEAR WHAT ROAD 30)
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): NORTH (N) WEST (W) (32) EAST (E) SOUTH (S)
34 80 37 DISTANCE FROM ROAD: Ft
ENTER FT OR MI (38 39)
TAX MAP: 23 BLK: 185 PARCEL: 101

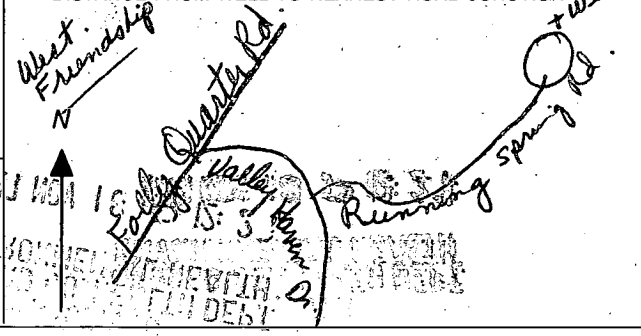
NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

Howard (COUNTY NAME) A48844 (COUNTY NO.)
STATE SIGNATURE: INSERT S → (41)
DATE ISSUED: 03 12 98 (43 MM DD YY 48) Mark E. Rilken (CO SIGNATURE) 3/12/98 (EXP. DATE)
NORTH GRID: 522 000 (50 55)
EAST GRID: 0826 000 (57 63)

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 8226
N 5222

4/23/98
9:30 Grout
46 NSP
x
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



SPECIAL CONDITIONS
NOTE = APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED =

COUNTY

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043
461-0833

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation ✓
Replacement ——

Receipt # ____
Date 8/24/98

Name of Installer Willoughby Plumbing Svcs, Inc. Telephone 410-781-7051

License Number #6998
Certified Well Pump Installer ____ Well Driller ____ Registered Plumber ✓

Name of Property Owner Dale Thompson Builders Telephone 410-781-7051
Subdivision Quarterfield Lot # 28 Well Tag # HO-94-1947
Site Address 3719 Running Spring

Pump
1. Type
   a. Deep well jet ____
   b. Shallow well jet ____
   c. Submersible ✓
2. Make [illegible]
3. Model # ____
4. Capacity ____ GPM
5. Pump exceeds well capacity Yes ____ No ✓
6. If Yes, is low pressure cutoff switch installed? Yes ____ No ____
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arresters ✓ Cable guards ✓ Other Tape

Motor
1. Horsepower 1/2 HP
2. RPM ____
3. Voltage ____
   a. 110 ____
   b. 220 ✓

Pitless Adapter
1. Make Maryard
2. Model # ____
3. Depth 4 ft.

Tank
1. Capacity 40 gal
2. Pressure relief valve? yes

Piping
1. Type Cristline
2. Size 1"
3. NSF and/or BOCA Code approved Yes
4. Depth of supply line 4 ft

Well data
1. Depth 280 ft.
2. Yield 20 GPM
3. Static water level 45 ft.
4. Will water supply be disinfected by installer? No

8-24-98 WP10K do cover Pitless 4' below grade [initials]

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).

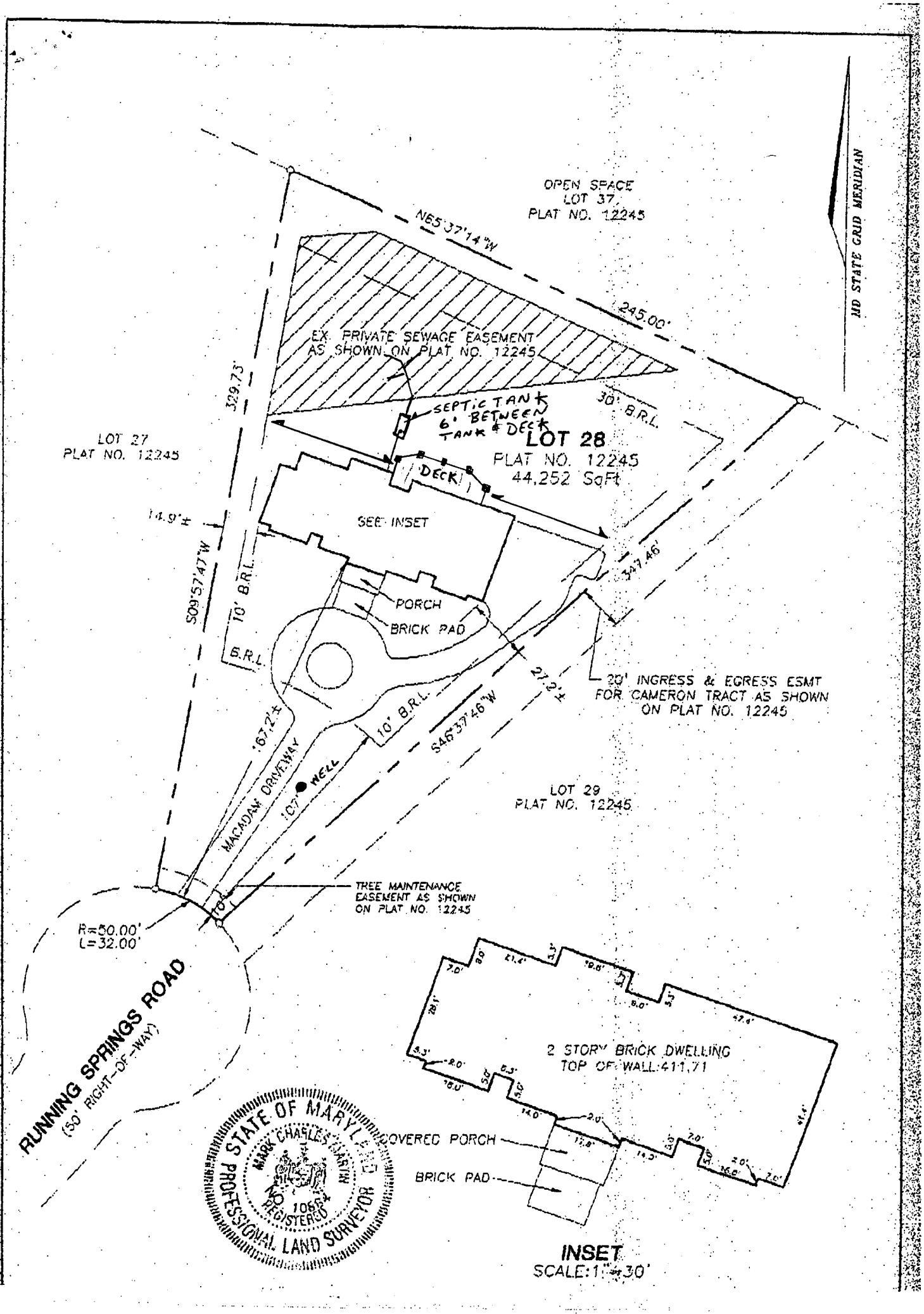
All information given above is true to the best of my knowledge.

Signature of Applicant: Chris J. Willoughby

Date: 8/24/98

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

HD-218


OPEN SPACE
LOT 37,
PLAT NO. 12245
N65°37'14"W
245.00'
MD STATE GRID MERIDIAN
EX. PRIVATE SEWAGE EASEMENT
AS SHOWN ON PLAT NO. 12245
329.73'
30' B.R.L.
SEPTIC TANK
6' BETWEEN
TANK & DECK
LOT 28
PLAT NO. 12245
44,252 SqFt
LOT 27
PLAT NO. 12245
DECK
SEE INSET
14.9'±
S09°57'47"W
10' B.R.L.
347.46'
PORCH
BRICK PAD
B.R.L.
20' INGRESS & EGRESS ESMT
FOR CAMERON TRACT AS SHOWN
ON PLAT NO. 12245
27.2'±
167.2'±
10' B.R.L.
S46°37'46"W
MACADAM DRIVEWAY
107'
WELL
LOT 29
PLAT NO. 12245
TREE MAINTENANCE
EASEMENT AS SHOWN
ON PLAT NO. 12245
10'
R=50.00'
L=32.00'
RUNNING SPRINGS ROAD
(50' RIGHT-OF-WAY)
2 STORY BRICK DWELLING
TOP OF WALL:411.71
COVERED PORCH
BRICK PAD
STATE OF MARYLAND
MARK CHARLES MARTIN
No. 10882
REGISTERED
PROFESSIONAL LAND SURVEYOR
INSET
SCALE:1"=30'