

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 513219

A 48850

DISTRICT _____

DATE 11/10/2000

DATE SYSTEM APPROVED 5/11/00

INSPECTOR S.R.K.

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

XXXXXXX 410-313-2640

INDEXED

Fogle's Septic Clean, Inc.

IS PERMITTED TO INSTALL ☒ ALTER _____

ADDRESS 580 Obrecht Road, Sykesville, MD 21784 PHONE 410-795-5670

SUBDIVISION Quarterfield LOT 34 ROAD 11608 Whitetail Lane

PROPERTY OWNER Dale Thompson Builders

ADDRESS _____

SEPTIC TANK CAPACITY 1500 GALLONS TOP SEAMED SEPTIC TANK

NUMBER OF BEDROOMS 5

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 300

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 180.00' and 224.29' lot lines, begin 120' trenches 135' feet down the 224.29' lot line and 10 feet off that same lot line. Run trenches on contour in both directions towards the 72.89' 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 11/10/99

IMPORTANT *KEEP TRENCHES 7' ETC (10' CTC) TO CONSERVE AREA*

OK TO INSTALL HIGHEST TRENCH SLIGHTLY OUT OF SEPTIC AREA

PLANS APPROVED BY Amy McMillen Revised 5/2/00 SRK DATE 12-27-1999

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

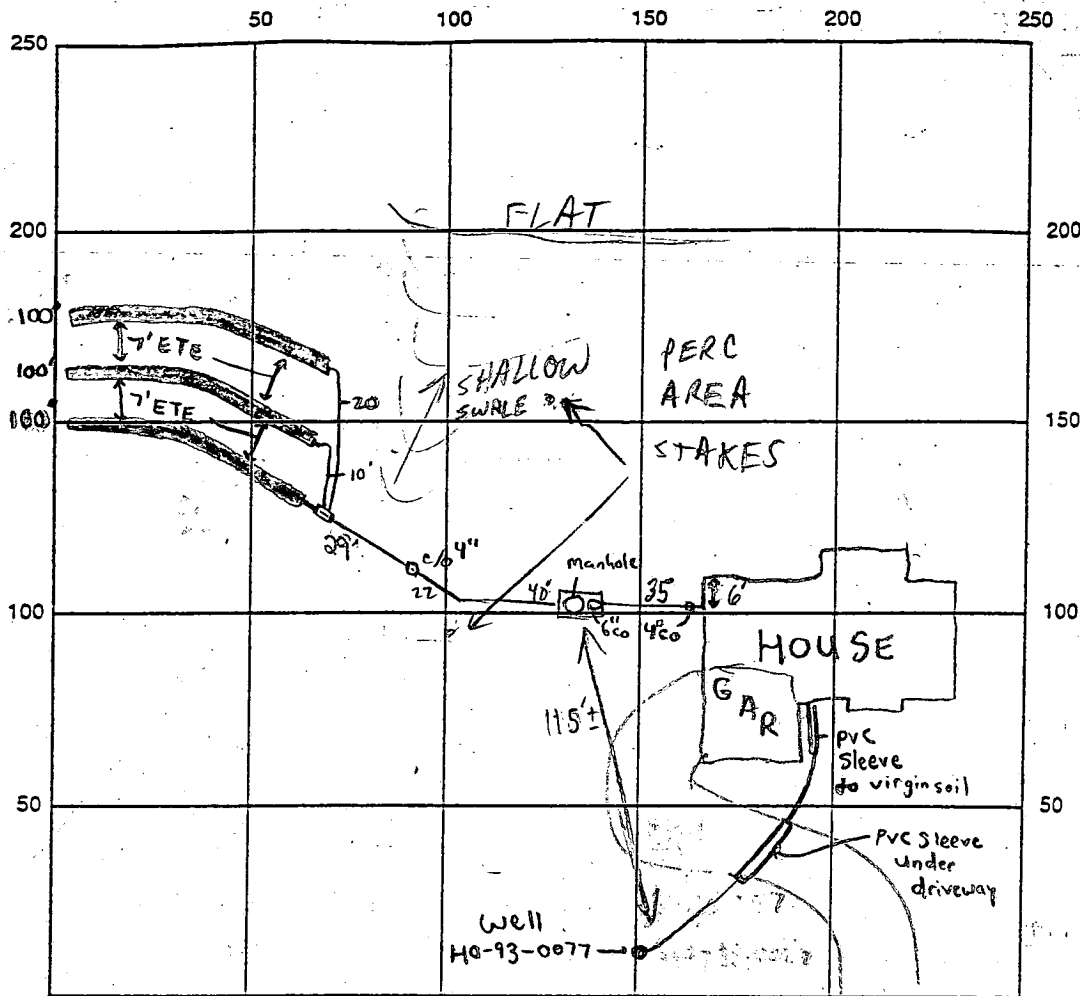
HD-250(6-90)

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

BLDG. PERMITS SECTION
AND RETURNED 6/22/2000
B 00125050
INGROUND POOL

48850

NOT TO SCALE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
WHITETAIL LANE

SEPTIC TANK LEVEL 1500 GAL TOP-SEALED CLEANOUTS 4" @ HOUSE, 6" & MH @ S.T.

DISTRIBUTION BOX LEVEL BAFFLES ARE IN

TILE 6 FT. TRENCH WIDTH 3 FT. INLET DEPTH 4 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 300 FT.

NUMBER OF TRENCHES 3 ONE SIDEWALL / BOTTOM AREA 900 SQ. FT.

DRYWELL INSIDE DIAMETER N/A FT. EFFECTIVE DEPTH BELOW INLET N/A FT.

ABSORBENT AREA N/A SQ. FT.

REMARKS: 5/2/00 - MET WITH KURT FROM FOGLES, BECAUSE OF SWALE IN SEPTIC AREA - LAYOUT INSPECTION

CONDUCTED AT INSPECTOR'S REQUEST, PUMP SYSTEM SHOULD NOT BE NECESSARY BUT SOME OF SEPTIC EASEMENT LOST DUE TO

SWALE NOT DESCRIBED BY MAP CONTOUR. REVISED SOME SYSTEM SPECS (SEE FRONT), 3RD REPAIR CAN BE INSTALLED SLIGHTLY

OUT OF SEPTIC AREA TOWARDS 355.14 LOT LINE (SRK) 5/9/00 S.T. SET, CONTINUE (PVA)

5/10/00 - OK TO CONTINUE WORK (SRK) 5/11/00 - OK TO COVER ALL WORK - (SRK)

DATE SYSTEM APPROVED

5/11/00

INSPECTOR

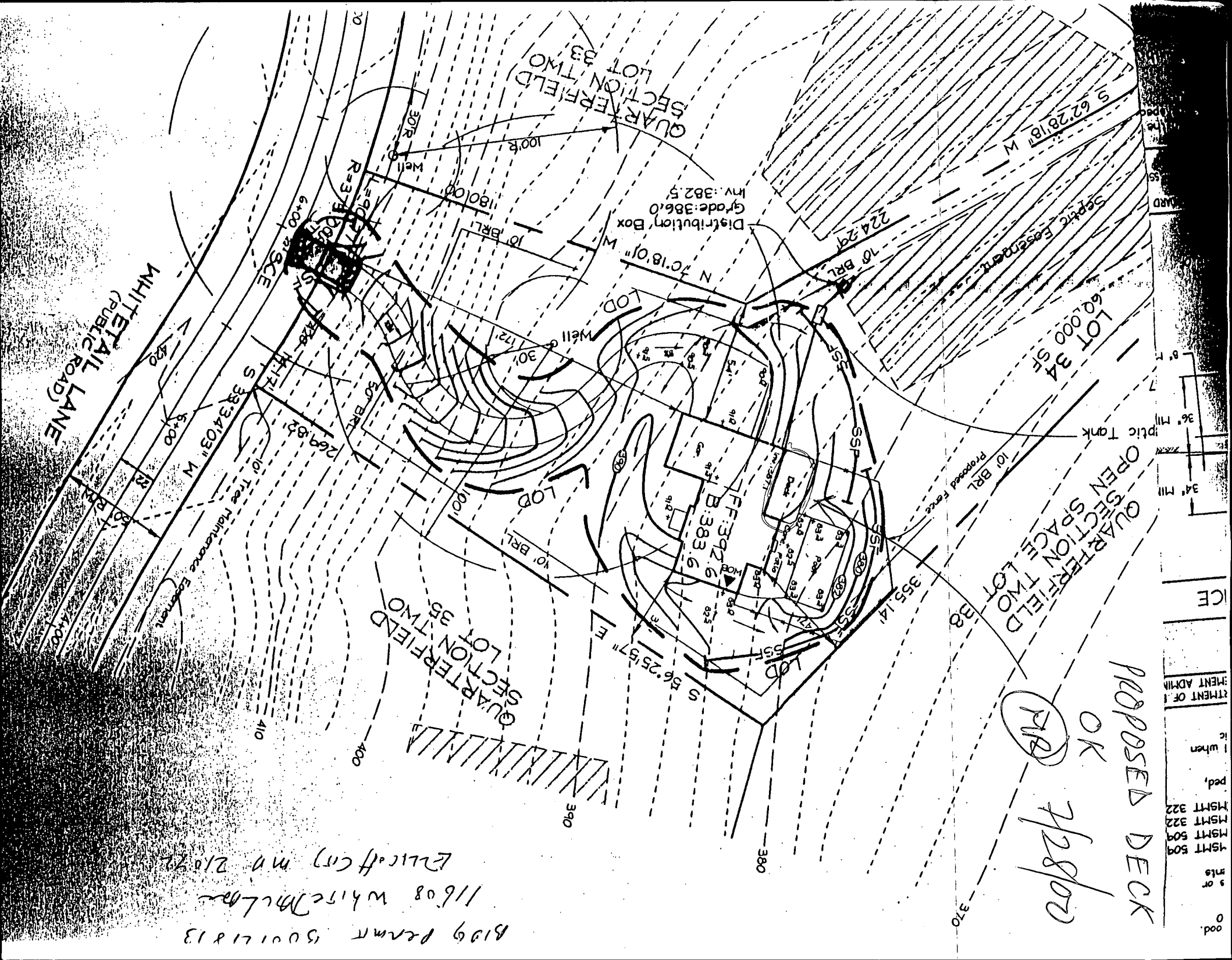
Steven R. King

0
od.
3 or
m/s
MSMT 509
MSMT 509
MSMT 322
MSMT 322
ped,
1 when
ic
MENT OF
MENT ADRIAN

PROPOSED DECK

OK

PR 7/28/00



8109 PERMIT 500121813
11608 White Tail Lane
Elizabeth City, NC 21092

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVE
ELLICOTT CITY, MD 21043
PERMITS (410)313-2465 INSPECTIONS (410)313-1810
AUTOMATED INFORMATION (410) 313-3800

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

000125698

Building Address 11608 WHITETAIL LANE
ELLICOTT CITY MD 21042

Suite/Apt. #: _____ SDP/WP/Petition #: _____
Census Tract 6030 Subdivision Quarterfield

Section — Area — Lot 34

Tax Map 23 Parcel 101 Grid 15

Zoning RR Map Coordinates 10K10 Lot size _____

Existing Use Single Family

Proposed Use Single Family ENCL

Estimated Construction Cost \$ 4000

Description of Work Build 15430 CAPACITY SHOPS

DECK UNITS 12500 / House

on rear of Home w/ steps

Occupant or Tenant _____

Contact Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Property Owner's Name DALE THOMPSON BLDG

Address 10005 JLO COLUMBIA RD

City Columbia State MD Zip Code 21046

Home Phone _____ Work Phone 410-995-6736

Applicant's Name & Mailing Address, (if other than stated hereon):

Phone _____ Fax _____

Contractor Company DE ADRIAN

Contact Person Donna Hamburg

Address _____

City _____ State _____ Zip Code _____

License No. _____

Phone _____ Fax _____

Engineer or Architect Company _____

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

Building Characteristics	Utilities
Height: _____	Water Supply: _____ Public _____ Private _____
No. of stories: _____	Sewage Disposal: _____ Public _____ Private _____
Gross area, sq. ft. per floor: _____	Electric Yes ☐ No ☐ Gas Yes ☐ No ☐
Use group: _____	Heating System: _____ Electric ☐ Oil ☐ Natural Gas ☐ Propane Gas ☐
Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____	Sprinkler system: N/A ☐ Full _____ Partial _____ Other Suppression _____ # of Heads _____
State Certified Modular _____	

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
SF Dwelling ☐ SF Townhouse ☐ Depth _____ Width _____	Water Supply: _____ Public _____ Private _____
1st floor: _____	Sewage Disposal: _____ Public _____ Private _____
2nd floor: _____	Electric Yes ☐ No ☐ Gas Yes ☐ No ☐
Basement: _____	Heating System: _____ Electric ☐ Oil ☐ Natural Gas ☐ Propane Gas ☐
Finished Basement ☐ Unfinished Basement ☐ Crawl space ☐ Slab on Grade ☐ No. of Bedrooms _____	Sprinkler system: N/A ☐ NFPA #13D _____ NFPA #13R _____ Other: _____
Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	
Other Structure: _____ Dimensions: _____ Footings: _____ Roof: _____	
State Certified Modular _____ Manufactured Home _____	

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature

Title/Company

Print Name

Date

Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

** PLEASE WRITE NEATLY AND LEGIBLY. **

FOR OFFICE USE ONLY -

AGENCY DATE SIGNATURE APPROVAL

Land Development DPZ 7/26/00 Joe Heltl

State Highways

Building Official

Dev. Engineering DPZ

Health 7/28/00 Mark R. Riffin

Fire Protection

Is Sediment Control approval required prior to issuance?

YES ☐ NO ☐

CONTINGENCY CONSTRUCTION START: ☐

ONE STOP SHOP: ☐

DPZ SETBACK INFORMATION

Front: 50 FT

Rear: 30 FT

Side: 10 FT

Side St.: NA

All minimum setbacks met?

YES ☐ NO ☐

Is Entrance Permit required?

YES ☐ NO ☒

Historic District?

YES ☐ NO ☒

Lot Coverage for New Town Zone

SDP/Red-line approval date

PROPERTY ID# 44493

Filing fee \$ 30

Permit fee \$

Excise tax \$

Sub-total paid \$

Add'l permit fee \$

TOTAL FEES \$ 30

Balance due \$

Check # 16643

Validation # 33622

Accepted by

Distribution of Copies-

White: Building Official

Green: LDD, DPZ

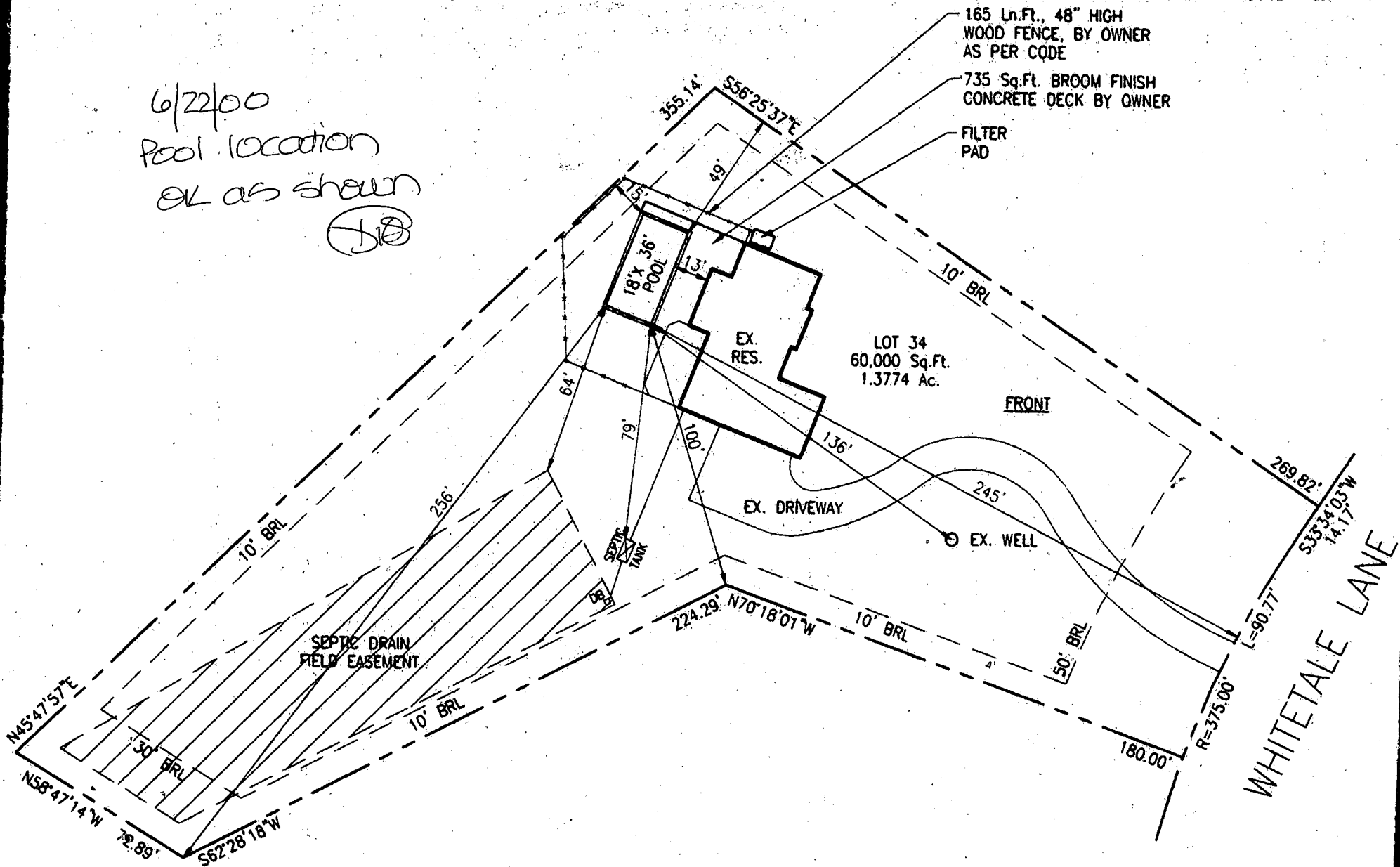
Yellow: DED, DPZ

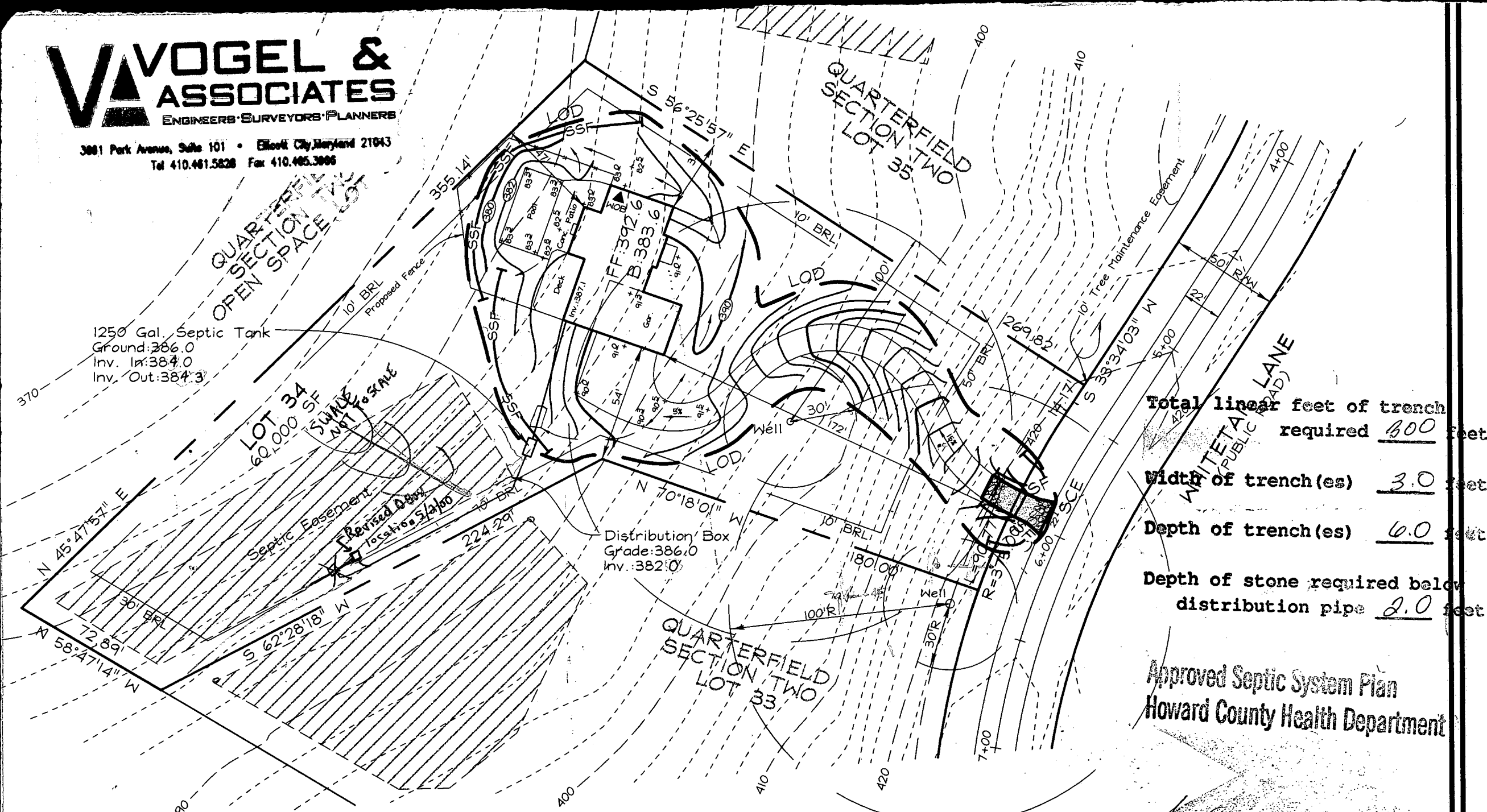
Pink: Health

Gold: SHA

s:\permit.fm

Rev. 10/15/98





Total linear feet of trench required 100 feet

Width of trench(es) 3.0 feet

Depth of trench(es) 6.0 feet

Depth of stone required below distribution pipe 2.0 feet

Approved Septic System Plan
Howard County Health Department

Amey McMillan 12/27/99
Signature Date

SEQUENCE OF CONSTRUCTION

1. Obtain Grading permit.
2. Install sediment control as shown on plan in accordance with details (2 days)

APPLICATION

PERCOLATION TESTING

50
A 488 AB
P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2840

DISTRICT _____
DATE 4/7/93

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
11696 Carroll Mill Road
ADDRESS 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. 17 34
ROAD AND DESCRIPTION Northeast quadrant Folly Quarter Road and Carroll Mill Road
intersection. 11608 WHITETAIL LANE

TAX MAP 23 PARCEL # 8,82 & 101

SIZE OF LOT 1 Ac +/- TYPE BLDG. Single Family - 3 BRMS
(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.
DALE THOMPSON BUILDERS
(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

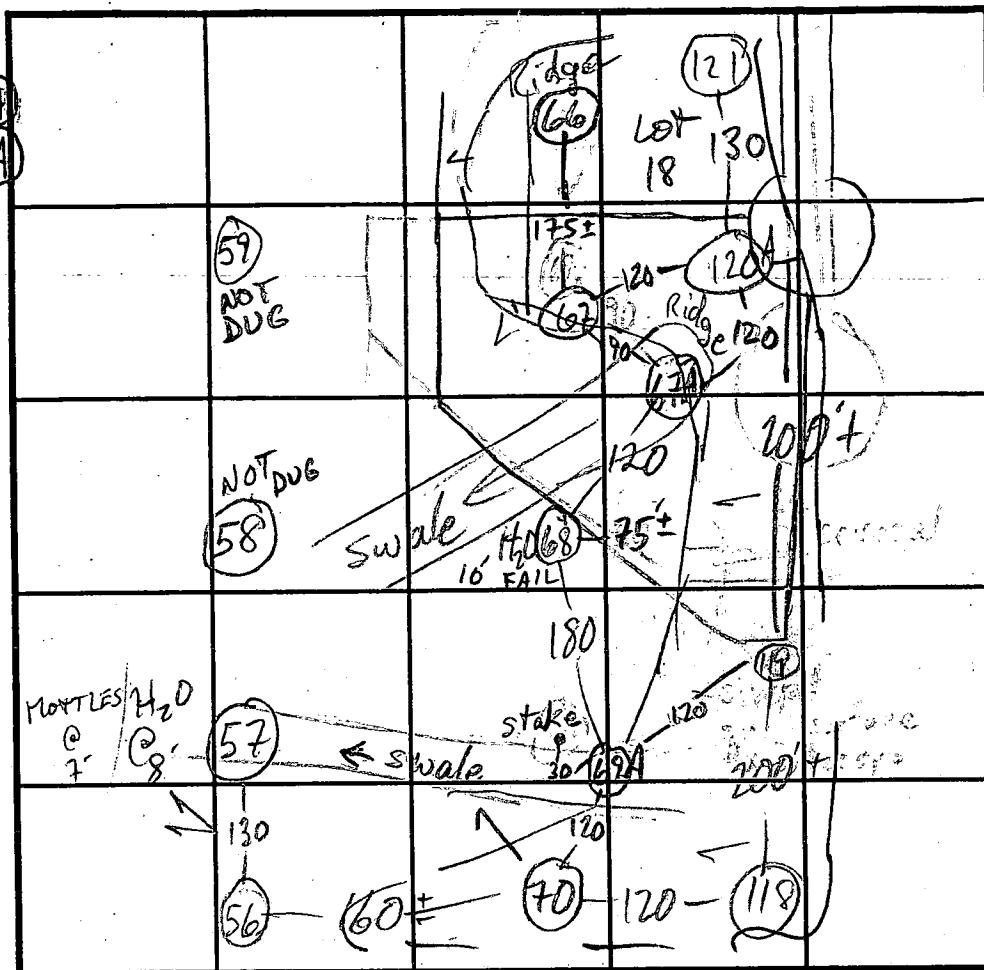
A48833

COUNTY #

Lot #17

SOIL PROFILE

0' (56) (70) (69A) (67A)
 dk. brn
 sa si
 cl lm
 4
 tan gray
 org mica
 quartz
 sa lm
 5-15% frags
 1 1/2



SOIL PROFILE

0' (67)
 brn org
 sa cl lm
 40% hard
 sandstone
 frags
 3 1/2
 tan brn
 gray sa
 lm
 30% hard
 sandstone
 frags
 8
 same 158
 soft
 sandstone
 frags
 13

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

org brn
 si clay
 10% frags
 4 1/2
 org si
 brn lm
 cave 15%
 in frags
 7
 org + dull
 bencolors
 8 3/4
 WATER
 8 1/2

(68)
 org brn
 cl lm
 20%
 quartz
 frags

5-6
 gray
 org
 mottled
 si lm
 20% quartz
 frags
 10 1/2
 WATER

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
2/5/93	57 V	8 1/2	WATER @ 8' 3"	MOTTLES @ 7'			
	56 S	5	10:15:00	10:18:45	10:18:45	10:22:30	3 min 45 sec
	56 M	8	10:16:30	10:18:30	10:18:30	10:19:00	30 sec
	56 V	11 1/2	10:20:00	10:22:00	10:22:00	10:23:30	1 1/2 min
	70 S	5 1/2	10:30:20	10:30:50	10:30:50	10:32:00	1 min 10 sec
	70 M	9	10:31:15	10:32:30	10:32:30	10:35:00	2 1/2 min
	70 V	13	OK 15-20% quartz	frags: 3	4-5'		
	69A S	5	10:48:45	10:50:30	10:50:30	10:54:30	45 sec 3 1/2 min
	69A M	8	10:50:30	10:51:45	10:51:45	10:52:52	FAST
	69A V	11 1/2	10:54:30	10:55:15	10:55:15	10:57:30	2 min
	68 V	10 1/2	see profile				
	67A V	12 1/2	WATER @ 10' - FAIL	MOTTLES @ 5-6'			
	67A S	5	OK see profile				
	67A M	8 1/2	11:24:15	11:27:15	11:27:15	11:30:15	3
	67A S	4 1/2	11:25:00	11:28:00	11:28:00	11:29	1
	67A M	9	11:55:45	11:56:15	11:56:15	11:58	1 1/4 min
	67A V	13	11:57:30	11:58:30	11:58:30	12:00	1 1/2 min

REMARKS

TYPE OF SOIL 67 V 13 see profile

TESTED BY M. R. Pkin ALSO PRESENT C. Sperry, Hatfield crew

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 2 TRENCH WIDTH 2

INLET DEPTH 3 1/2 MAXIMUM BOTTOM DEPTH 7 1/2 SQ. FT./BEDROOM 180

APPLICATION

PERCOLATION TESTING

A 48850
P _____

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

DISTRICT _____

DATE _____

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 _____

ADDRESS _____ PHONE _____

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. _____

ROAD AND DESCRIPTION _____

TAX MAP _____ PARCEL # _____

SIZE OF LOT _____ TYPE BLDG _____
(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE
FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY
WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT. _____

(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

HD-216

THIS IS NOT A PERMIT

118 SOIL PROFILE 119

120A

SEE ATTACHED

Lot 17

brn
sa cl
lm

tan gray
beige

sa
lm
10%
frags

1 1/2

66

brn org
sa cl lm
15% frags

org gray
tan sa
lm
10%
saprolite
frags

3 1/2

13

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2/10/93	119 S	5	2:54:15	2:57:00	2:57:00	3:00:30	3+ min
		9	2:55:00	2:56:00	2:56:00	2:58:30	2+ min
	119 V	12 1/2	see profile				
	118 S	5 1/2	3:04:30	3:10:30	3:10:30	3:18	8 min
		8 1/2	3:13:00	3:13:30	3:13:30	3:14:18	45 sec
	118 V	8 1/2	3:14:45	3:16:00	3:16:00	3:18	2
		12 1/2	sim to (119) 10-15% frags				
2/11/93	120A S	5	2:37:30	2:40:45	2:40:45	2:43:45	3 min
		8 1/2	2:38:00	2:39:45	2:39:45	2:42:45	3 min
	120A V	12 1/2	sim to (119) 15% frags				
2/5/93	66 S	5	2:55:45	2:57:00	2:57:00	2:59:30	2 1/2 min
		9	2:56:30	2:57:00	2:57:00	2:57:50	50 sec
	66 M	9	2:58:15	2:59:15	2:59:15	3:00:30	1 min
		13	see profile				15 sec
	66 V						

REMARKS USE 66-67-67A-69A-70-118-119-120A-121

TYPE OF SOIL

TESTED BY ALSO PRESENT

APPLICATION

PERCOLATION TESTING

A 48850

P 18

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2840

DISTRICT _____

DATE _____

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

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PROPERTY LOCATION:

SUBDIVISION Zoller Property LOT NO. 35 34

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

TAX MAP 23 PARCEL # 8,82 & 101

SIZE OF LOT 1 Ac +/- TYPE BLDG. Single Family
(SINGLE FAMILY DWELLING OR COMMERCIAL)

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COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT. SDC Group Inc.
By: [Signature]
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

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

COUNTY #

SOIL PROFILE

NOT A HOLE

brn
sac 1m
15%
Fraggs

tan
sa 1m
10%
Fraggs
WATER

brn
sac
1m

tan
sa 1m

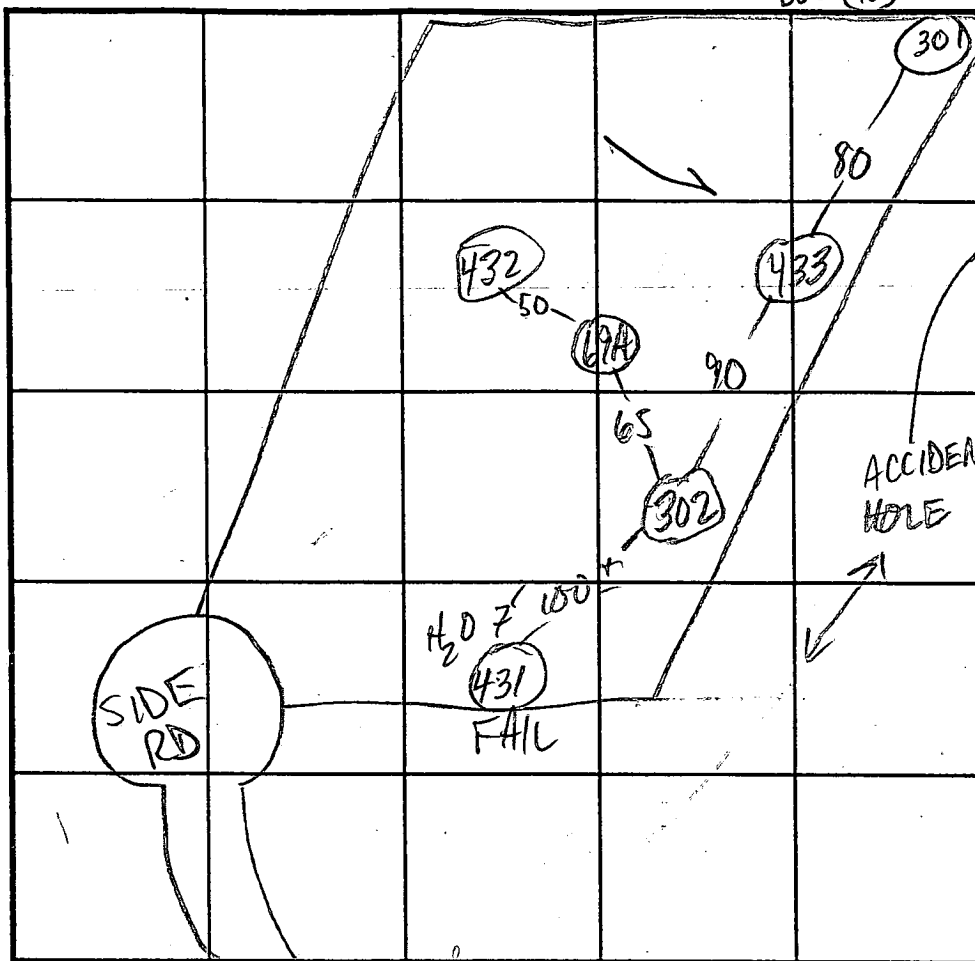
coarse
org tan
sand
WATER

brn
red cl

red
si 1m

care-in

WATER



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE

301 433

tan
sa c/
1m

gray
tan org
coarse
sand
10cm
decomposed
sandstone

5%
Fraggs

302
tan sa c/
1m
15%
Fraggs

brn org
si 1m
20%
Fraggs

dk brn
sa 1m
35%
Fraggs

9 HARD BOY

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
7/26/94	NOT INTENDED AS PERC HOLE	4	2:55:10	2:56:45	2:56:45	3:00	3+
	432	11 1/2	H ₂ O @ 11'				
	432	4	3:12:00	3:13:00	3:13:00	3:16	3
	432	433"	H ₂ O @ 13				EST
7/27/94	431	9 1/2	H ₂ O @ 7				
	301	5	9:54:45	9:55:35	9:55:35	9:57:35	2
	301	12					
	302	3 1/4	10:04:50	10:15	10:15	10:25	10
			see profile				
NOT STAKED	433	3	10:33:45	10:34:05	10:34:05	10:34:40	35 sec
			10:35:05	10:35:40	10:35:40	10:36:40	1 min
	433	12	sim to 301		220% frags		4'-5'

REMARKS

TYPE OF SOIL

TESTED BY

M. R. R. R.

ALSO PRESENT

Hayfield crew

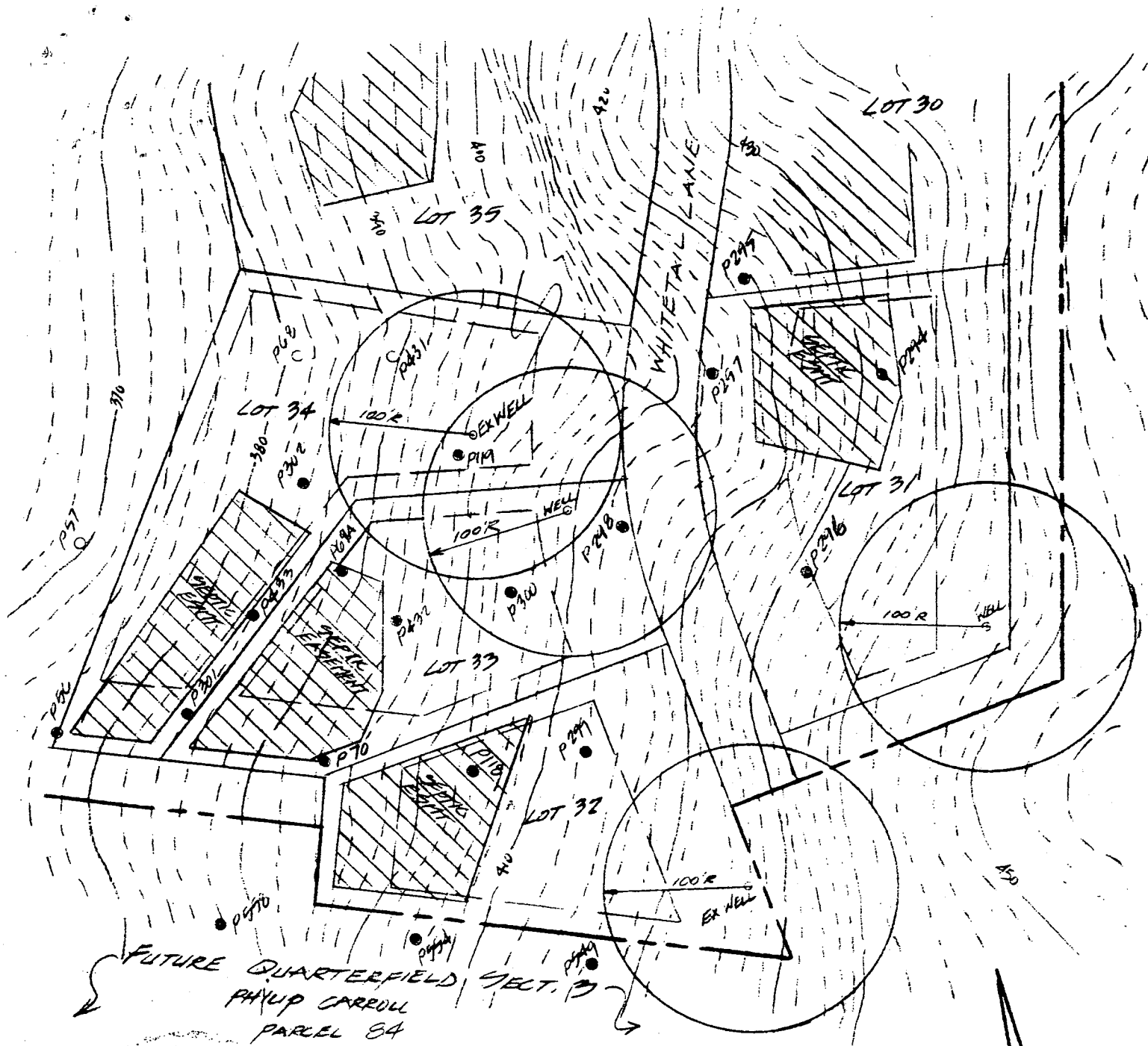
TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

TRENCH WIDTH

INLET DEPTH

MAXIMUM BOTTOM DEPTH

SQ. FT./BEDROOM



FUTURE QUARTERFIELD SECT. 2
 PHILIP CARROLL
 PARCEL 84

APPROVED FOR PRIVATE WATER AND SEWERAGE SYSTEMS
 HOWARD COUNTY HEALTH DEPARTMENT

John Downing

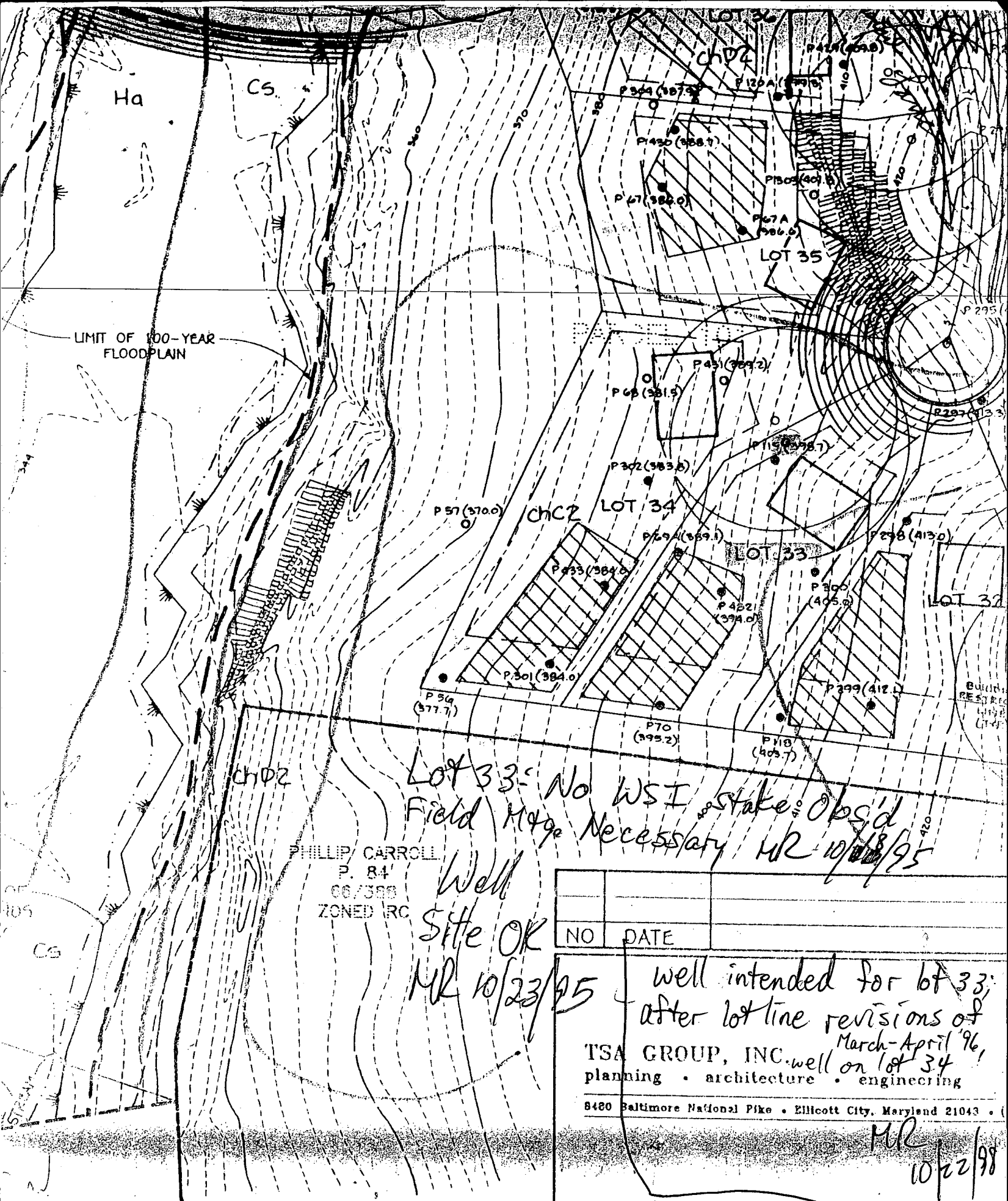
John Downing 4/10/96 1"=100'
 HOWARD COUNTY HEALTH OFFICER (CW)

THA GROUP INC.
 8480 BALT. NATL. PIKE, STE #18
 ELLWOOD CITY, MD 21043

THIS AREA INDICATES APPROVED PERC AREAS AND DESIGNATES A PRIVATE SEWERAGE BASEMENT OF 10,000 S.F. AS REQUIRED BY THE MD DEPT. OF THE ENVIRONMENT FOR INDIVIDUAL SEWERAGE DISPOSAL IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWER IS AVAILABLE. THESE EASEMENTS SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR EASEMENTS INTO THE PRIVATE SEWERAGE BASEMENT. RECORDATION OF A MODIFIED SEWERAGE EASEMENT PLAN SHALL NOT BE NECESSARY.

QUARTERFIELD SECT. 2 PERC CERTIFICATION PLAN
 LOTS 31-34 REVISION
 PERC CERTIFICATION PLAN FOR SUBDIVISION APPROVED 2/3/95. REVISION DUE TO LOT RECONFIGURATION AND PROVISION OF ACCESS TO ADJACENT PARCEL 84.
 SEPTIC AREAS SHOWN ARE A MINIMUM 10,000 SF.
 DEVELOPER: SDC GROUP, INC
 MARCH 1996

C 1 2863		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)		DATE WELL COMPLETED 11/06/95		Depth of Well 22 400 26 (TO NEAREST FOOT)				COUNTY NUMBER A 488 50			
ST/CO USE ONLY DATE RECEIVED		DATE WELL COMPLETED		Depth of Well				PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-93-0077			
OWNER SAC Group		STREET OR RFD Whitetail La		TOWN W. Friendship				SUBDIVISION QUARTERFIELD			
WELL LOG Not required for driven wells		GRROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL (Circle one) CEMENT CM BENTONITE CLAY BC NO. OF BAGS 30 NO. OF POUNDS 2820 GALLONS OF WATER 180 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 49 ft. (enter 0 if from surface)		PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 4 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 30 ft. WHEN PUMPING 280 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		C 3					
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING		CASING RECORD casing types insert appropriate code below MAIN CASING TYPE S 7 Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 63		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.)		C 2					
DESCRIPTION (Use additional sheets if needed)		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 PL PLASTIC HO OPEN HOLE OT OTHER		C 2					
NUMBER OF UNSUCCESSFUL WELLS: 0		WELL HYDROFRACTURED YES Y NO N		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		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		TYPE: MWD/MSD/MGD DRILLERS LIC. NO. 24		DRILLERS SIGNATURE Joseph L. Mayne		LIC. NO.					
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.		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		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) White Tail Lane					



Lot 33: No WSI state: Obs'd
 Field M49 Necessary MR 10/22/95

PHILLIP CARROLL
 P. 84
 06/388
 ZONED RC

Well
 Site OK
 MR 10/23/95

NO	DATE

well intended for lot 33;
 after lot line revisions of
 March-April '96,
 TSA GROUP, INC. well on lot 34,
 planning • architecture • engineering
 8480 Baltimore National Pike • Ellicott City, Maryland 21043 • (

MR
 10/22/98

OWNER:

PRC

EMERGENCY/TEMP NO. IF ANY

B 1 1906		SEQUENCE NO. (MDE USE ONLY)		STATE OF MARYLAND PERMIT TO DRILL WELL please print or type		STATE PERMIT NUMBER HO-93-0077 70 fill in this form completely 78	
Date Received (APA) 100695				OWNER INFORMATION			
8 SDC 13 OR OUP				15 Last Name Owner First Name 34			
36 PO BOX 417 55				Street or RFD			
57 ELLICOTT 70 State 72 CITY 76 MD 21091 78				Town Zip			
DRILLER INFORMATION				CIRCLE: MSD/MGD/MWD			
Driller's Name Joseph R. Wayne 77 License No. 80 24							
Firm Name Joseph R. Wayne Well Drilling							
Address 5512 Ridge Rd. Mt. Airy, Md. 21771							
Signature Joseph R. Wayne Date 10/6/95							
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)							
☒ 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 300 FEET				24 28			
APPROXIMATE DIAMETER OF WELL 6 INCH				NEAREST 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 DEEPEINED 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-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS							
☐ THIS WELL WILL DEEPEN AN EXISTING WELL							
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) 41 _____ 52							
Not to be filled in by driller (MDE OR COUNTY USE ONLY)							
APPROX. PERMIT NUMBER _____ 54 GAP 63							
FORCE MR WRITE INITIALS IN BOX 67 68 PERMIT No. HO-93-0077 70 71 72 73 74 75 76 77 78 79							
SPECIAL CONDITIONS NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -							

B 3		LOCATION OF WELL	
1 HOWARD 21		8 COUNTY	
QUARTERFIELD 42		23 SUBDIVISION	
SECTION 44 46		LOT 34 50	
WEST FRIENDSHIP 71		52 NEAREST TOWN	
MILES FROM TOWN (enter 0 if in town) 4 73 M 76 I 77 I 78			
B 4			
DIRECTION OF WELL FROM TOWN (CIRCLE BOX)		NEAR WHAT ROAD Whitetail Lane 30	
		ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 100 37	
		DISTANCE FROM ROAD ENTER FT OR MI FT 38 39	
		TAX MAP: 23 BLK: 15 PARCEL 101	
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL			
Howard COUNTY NAME		A 488#50 COUNTY NO.	
STATE SIGNATURE _____		INSERT S ☐	
DATE ISSUED 102695 Mark E. Kiffin 10/26/96		EXP. DATE	
43 NORTH GRID 521000 55		48 CO SIGNATURE	
57 EAST GRID 0825000 63			
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X		11/6/95 10:30	
SOURCES OF DRILLING WATER		63' CASING	
1. WELL		49' OPEN	
2.			
3.			
WRITE THE BOX NUMBER FROM THE MAP HERE			
E 8285		000	
N 5281		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			

COUNTY