

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

313-2640

INDEXED

DATE SYSTEM APPROVED

INSPECTOR

P 56973 C

A 49915 L

DISTRICT 3

DATE 6/10/96

8/15/96

M. R. P. Kin

South Carroll Backhoe, Inc.

IS PERMITTED TO INSTALL ☒ ALTER ☐

ADDRESS 4410 Salem Bottom Road, Westminster, MD 21157 PHONE 875-4197

SUBDIVISION Sobus Farms LOT 28 ROAD 2921 Summer Hill Drive

PROPERTY OWNER Altieri Homes, Inc. / Char

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 - Place distribution box 160 feet up the left (311.20) lot line and 100 feet off that same lot line as seen when facing the lot from Summer Hill Road. Run trenches on contour toward the left 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. 6/3/96 OK ALM

PLANS APPROVED BY DATE

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-260(6-90)

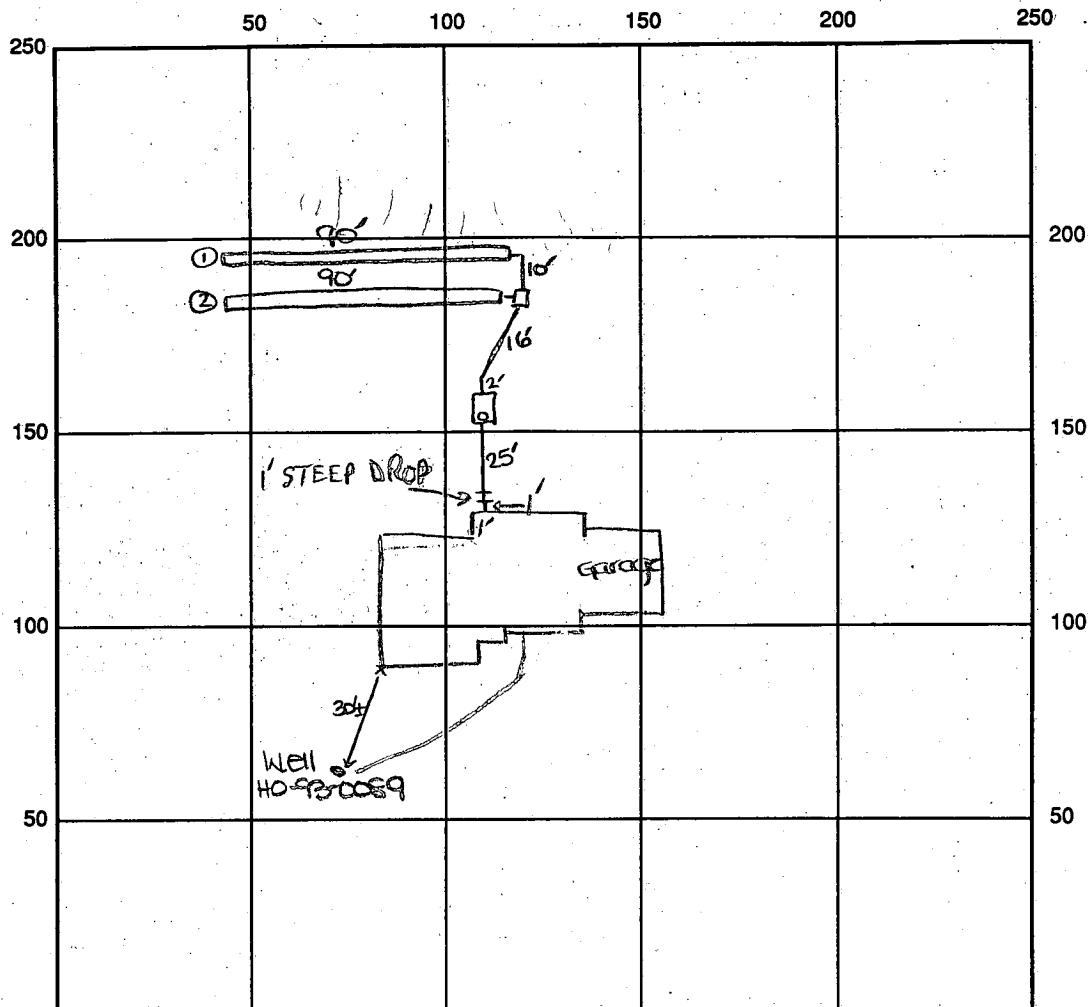
*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

8/14/96 Needs house connection OKS

8/14/96
A.M. House
8/15/96
C.W.P.I.

03-319970

A 49915 L



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

Summer Hill Drive

SEPTIC TANK LEVEL OK - 1250 gal CLEANOUTS one on tank

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 90 FT. $\rightarrow$ 180'

NUMBER OF TRENCHES 2 ONE SIDEWALL ~~AREA~~ 720 SQ. FT.

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

ABSORBENT AREA — SQ. FT.

REMARKS: 8/14/96 A.M. OK to stone trenches and continue. DKS
8/14/96 P.M. OK to cover all septic work. Needs house
connection. DKS

8/15/96 HOUSE CONN OK TO COVER MR

8/15/96 WPI OK TO COVER 3-4' B-G. MR

DATE SYSTEM APPROVED 8/15/96 INSPECTOR M. Ritkin

APPLICATION

PERCOLATION TESTING

A 49915 L

P _____

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

DISTRICT 3

DATE 3/9/94

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 ALTIERI HOMES, INC. Hilltop Development Corporation

ADDRESS P.O. Box 208, Clarksville, Md. 21029 PHONE 410-531-5539

AGENT OR PROSPECTIVE BUYER Richard Demmitt

ADDRESS P.O. Box 208, Clarksville, Md. 21029 PHONE 410-531-5539

PROPERTY LOCATION:

SUBDIVISION Sabus Farms LOT NO. 28 (twenty-eight)

ROAD AND DESCRIPTION at the end of Winfield Rd.
(2121 Summer Hill Drive)

TAX MAP 15 PARCEL # 26 & 154

SIZE OF LOT 1 acre + TYPE BLDG. S.F.D.
(SINGLE FAMILY DWELLING OR COMMERCIAL)

BLDG. PERMIT SIGNED

AND RETURNED 5/9/94

Serial # 44887-4Bm

S.F.D.

(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.

Richard Demmitt
(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

A49915L

COUNTY #

SOIL PROFILE

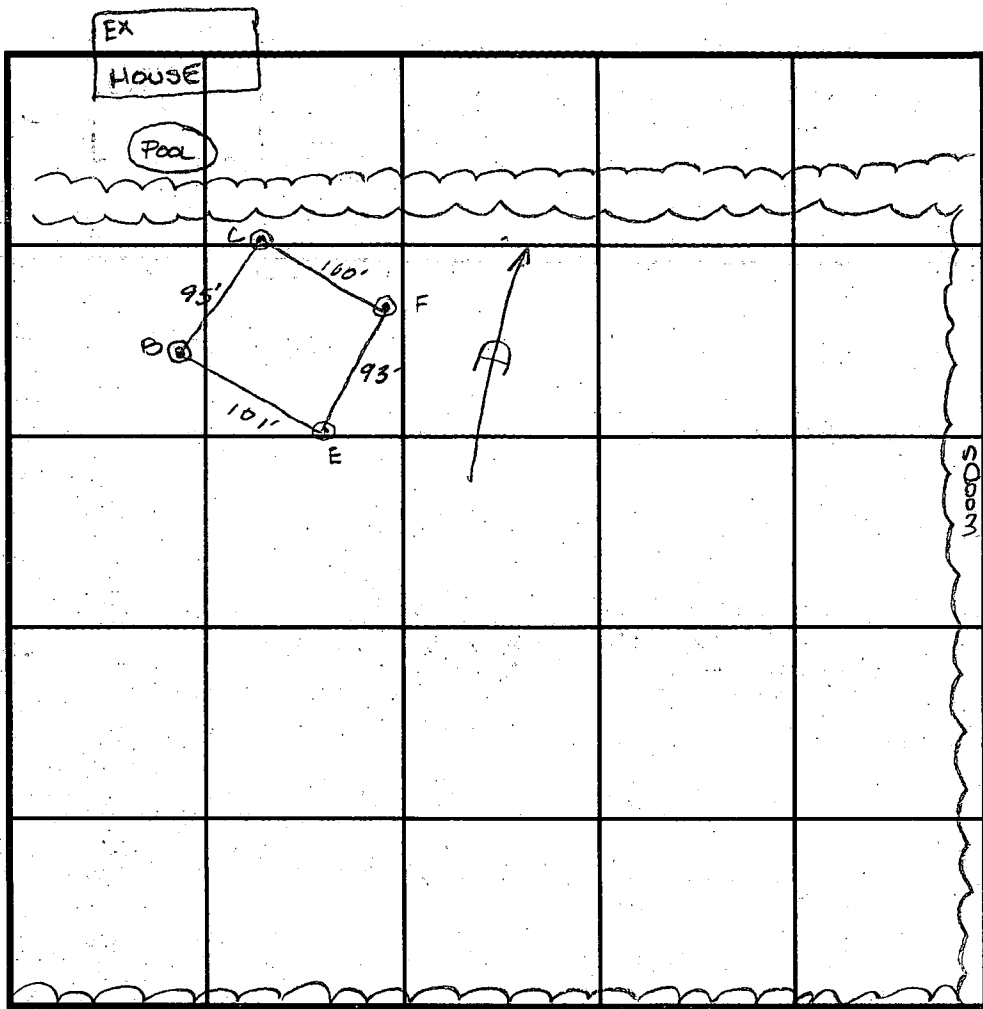
0'
E
brn / orange
SCL
1'
brn
SL
100%
shale + mica
1 1/2'

F

tan / orange
CL
3'
orange
and brn
mix
12 1/2'

C/B

yelf orange
red mix
CL
3 1/2'
reddish
SL
shale
5%
OR
1 1/2'



SOIL PROFILE

0'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
3/24/94	E	3 1/2' / VII 1/2'	10:37 ³⁰	10:39 ⁴⁵	10:39 ³⁰	10:41 ⁴⁵	2min
	F	4' / VI 2 1/2'	10:43 ⁴⁵	10:47 ³⁰	10:47 ³⁰	10:52 ⁴⁵	4 1/2 min
	C	4' / VII 1/2'	10:26 ³⁰	10:28 ⁴⁵	10:28 ⁴⁵	10:29 ⁴⁵	1 3/4 min
		6 1/2' / VII 1/2'	10:26 ³⁰	10:27 ⁴⁵	10:27 ⁴⁵	10:29 ⁴⁵	2min
	B	4' / VI 2'	10:34 ⁴⁵	10:34 ⁴⁵	10:34 ⁴⁵	10:35 ⁴⁵	1min
		7' / VI 2'	10:33 ³⁰	10:34 ⁴⁰	10:34 ⁴⁰	10:34 ⁴⁰	40sec

REMARKS need to show All wells - septic w/in 100' of property line
 TYPE OF SOIL ChB2 Chester Silt Loam
 TESTED BY A. McMillan / M. Rifkin ALSO PRESENT B. Demitt
 TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 3 min TRENCH WIDTH 2'
 INLET DEPTH 3 1/2' MAXIMUM BOTTOM DEPTH 7 1/2' SQ. FT/BEDROOM 180 ft²

LOT 23

copy of
signed
Final Plat
F-95-181
190.09' N 08°5

LOT 13

LOT 14

LOT
E 1,329,000

52'55" E 190.09'

N 08°52'55" E 190.09'

N 08°52'55" E 229.83'

40.00'

N 08°52'55" E 373.82'

N. 08°52'55" E

50' BRL

50' BRL

50' BRL

50' BRL

50' BRL

50' BRL

1.P.F.

S 75°32'35" E 312.17'

1013

S 75.32.34° E

LOT 2

S 75°32'35"	E 335.00
-------------	----------

LOT 25
1.4421 AC.
62816 SF.

LOT 24
1.3691 AC.
59640 SF.

LOT 23
1.3358 AC.
58186 SF.

LOT 27
1.3694 AC.
59653 SF.

LOT 28
1.3319 AC
58016 SF

LOT 29
1.3445 AC.
58565 SF.

LOT 30
1.3187 AC.
57440 SF.

-10' PUBLIC TREE
MAINTENANCE EASEMENT

SUMMER HILL

DRIVE

R=450.00

R=400.00

A=164.27

50'

R/W

LOT 19
1.1893 AC.
51807 SF.

LOT 20
1.3626 AC
59357 SF

LOT 18
1.2199 AC
53139 SF

57000 AC.
1.3085 SF.

0° 40' 00" W 190.00'

30' BRI

PLAT NO 15457
WYNFIELD SECTION T

LOT 13

Approved Septic System Plan
Howard County Health Department

Signature

Date

BRH
SEPTIC EASEMENT 64887

DISTURBANCE
SEPTIC EASEMENT

DISTRIBUTION BOX
EX. GRD. 558.5
INV. 555.5

1250 Gal.
SEPTIC TANK
INV. IN 556.1
INV. OUT 555.8

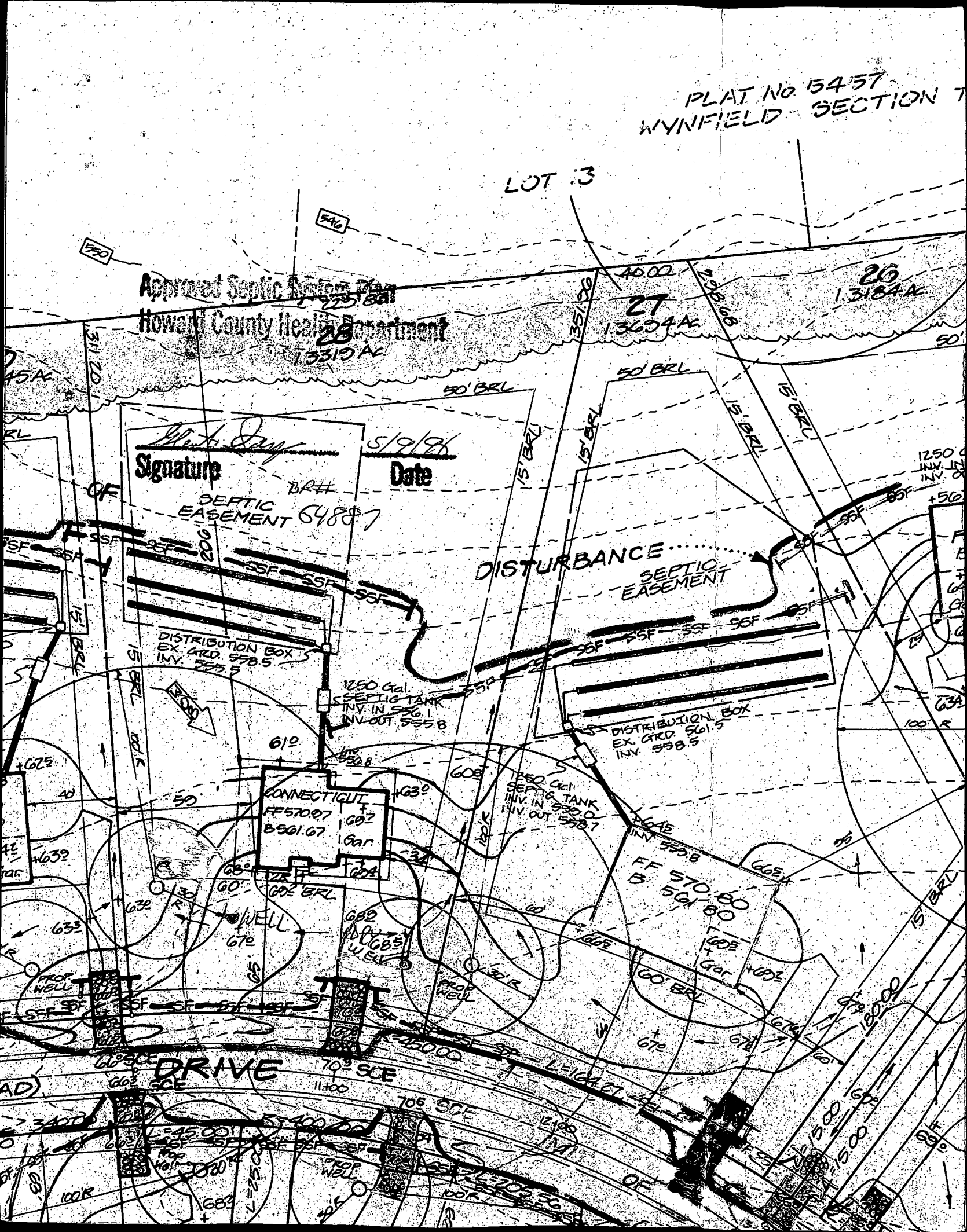
DISTRIBUTION BOX
EX. GRD. 561.5
INV. 558.5

CONNECTICUT
FF 570.97
B 561.67
Gar.

1250 Gal.
SEPTIC TANK
INV. IN 559.0
INV. OUT 558.7

FF 570.80
B 561.80
Gar.

DRIVE



HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3625-H Ellicott Mills Drive
Ellicott City, MD 21043

Fax 313-2648 * 313-2640

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation ☒
Replacement ☐

Receipt # _____
Date _____

Name of Installer

Robert L. Feezer Co., Inc. Telephone 781-4655

License Number

2122

Certified Well Pump Installer

Well Driller

Registered Plumber

☒

Name of Property Owner

ALTERI Homes

Telephone

715-4500

Subdivision

YARD HUNT DEVELOPMENT

Lot # 25

Well Tag #

90 - 00 00

Site Address

3921 SUMMIT DRIVE

H0 93 0089

Pump

1. Type

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

2. Make Eaton & Waring

3. Model # 4F07G 07301

4. Capacity 7 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 3500

3. Voltage _____

a. 110 _____

b. 220 ☒

Pitless Adapter

1. Make HANCOCK

2. Model # PT-500

3. Depth 42' +

Tank

1. Capacity 42 GPM. 5 GPM. (W-702)

2. Pressure relief valve? ☒

8/15/96 WPT OK
MR

Piping

1. Type POLYETHYLENE

2. Size 1"

3. NSF and/or BOCA

Code approved ☒

4. Depth of supply line 42' +

Well data

1. Depth 400 ft.

2. Yield 1.2 GPM

3. Static water level _____ ft.

4. Will water supply be disinfected by installer? ☒

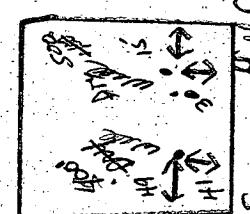
I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

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

Signature of Applicant: Robert L. Feezer

Date: _____

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

C 1 2898		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 A 49915-L	
ST/CO USE ONLY DATE Received		DATE WELL COMPLETED 12/1/95		Depth of Well 400 (TO NEAREST FOOT)		PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-93-0089	
OWNER Dennitt		STREET OR RFD Summer Hill Dr		TOWN W. Friendship			
SUBDIVISION SOBUS FARMS		SECTION		LOT 28			
WELL LOG Not required for driven wells		GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) Y N TYPE OF GROUTING MATERIAL (Circle one) CEMENT CM BENTONITE CLAY BC NO. OF BAGS 14 NO. OF POUNDS 1316 GALLONS OF WATER 28 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 38 ft. (enter 0 if from surface)		C 3 PUMPING TEST HOURS PUMPED (nearest hour) 6 PUMPING RATE (gal. per min.) 001.2 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 56 ft. WHEN PUMPING 370 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 ST STEEL CO CONCRETE PL PLASTIC OT OTHER MAIN CASING TYPE ST Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 42 OTHER CASING (if used) diameter inch depth (feet) from to		PUMP INSTALLED DRILLER WILL INSTALL PUMP (CIRCLE) (YES or NO) 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) + above - below 2 (nearest foot)			
DESCRIPTION (Use additional sheets if needed)		SCREEN RECORD screen type or open hole insert appropriate code below ST STEEL BR BRASS BRONZE HO OPEN HOLE PL PLASTIC OT OTHER		C 2 DEPTH (nearest ft.) H 0 40 400 SLOT SIZE 1 2 3 DIAMETER OF SCREEN 56 60 GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68		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) 	
NUMBER OF UNSUCCESSFUL WELLS: 1		WELL HYDROFRACTURED Y N		MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q 70 72 74 75 76			
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 Joseph L. Mayne DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO.		SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)			

Page 1 of 1
Date 12/11/95

Review OK 2/7/96 DKS

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 93-0089
Location of property (road) Summer Hill Dr
Subdivision SOBUS FARMS Lot 28 Block Plat Sec.
Well Driller J Mayne Owner Dennitt, Richard

Depth of well 400'
Distance of measuring point (M.P.) above ground 1 1/2
Static water level (S.W.L.) below M.P. 50'

I. High rate pumping -- reservoir drawdown

Time pump started 7:00 Pumping rate 20 gpm.
Total time 45 MIN. to reach pumping water level 376 ft below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes

TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE time to fill 5 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
7:15	161	3 sec		20 gal.
7:30	295	4		15
7:45	370	5		12
8:00	364	45		1.3
8:15	364	45		1.3
8:30	364	45		1.3
8:45	364	45		1.3
9:00	364	45		1.3
9:15	364	45		1.3
9:30	364	45		1.3
9:45	364	45		1.3
10:00	364	45		1.3
10:15	364	45		1.3
10:30	365	45		1.3
10:45	363	57		1+
11:00	362	55		1+
11:15	361	55		1+
11:30	360	55		1+
11:45	359	55		1+
12:00	359	50		1.2
12:15	359	50		1.2
12:30	358	50		1.2
12:45	357	50		1.2
1:00	357	50		1.2
HD-224 1:15	357	50		1.2
1:30	357	50		1.2
1:45	357	50		1.2

EMERGENCY/TEMP NO. IF ANY

B 1	1989	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER 40-93-0089 fill in this form completely
-----	------	--------------------------------	---	---

Date Received (APA) 10/23/95

OWNER INFORMATION

Demmitt Richard

PO BOX 228

CLARKSVILLE MD 21029

DRILLER INFORMATION

Joseph R. Mayne

Well Drilling

5512 Ridge Rd. Mt. Airy, Md. 21771

10/23/95

WELL INFORMATION

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

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)

HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)

FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)

INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)

PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)

TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

APPROXIMATE DEPTH OF WELL 300 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jettied & DRIVEN

AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)

CABLE REVERSE-ROTARY DRIVE-POINT

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

THIS WELL WILL NOT REPLACE AN EXISTING WELL

THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED

THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS

THIS WELL WILL DEEPEEN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)

Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROX. PERMIT NUMBER

FORCE MR PERMIT No. 40-93-0089

SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

LOCATION OF WELL

HOWARD

8 COUNTY

SOBYS FARMS

SECTION 44 46 LOT 28

WEST FRIENDSHIP

52 NEAREST TOWN

MILES FROM TOWN (enter 0 if in town) 1 1/2 MI

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

NORTH

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

NEAR WHAT ROAD Summer Hill Drive

DISTANCE FROM ROAD 25

ENTER FT OR MI FT

TAX MAP: 15 BLK: PARCEL 26

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard

A49915-L

COUNTY NAME

STATE SIGNATURE

DATE ISSUED 11/08/95

Mark E. Riffen

11/8/96

NORTH GRID 531000

EAST GRID 0818000

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

8188

531

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

West Friendship Rd. 144

Summer Hill Dr.

12-11-95

Pro 60 grout

No other