PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 512772

A 49993-F

DISTRICT

DATE 10/18/99

DATE SYSTEM APPROVED 2/3/00

INSPECTOR RP Bailey

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

INDEXED
05.425684

SK Plumbing and Heating IS PERMITTED TO INSTALL X ALTER

ADDRESS 1220 FSK Highway, Keymar, MD 21757 PHONE 410-775-0562

SUBDIVISION Easternview LOT 5 ROAD 11854 Simpson Road

PROPERTY OWNER ~~Trinity Builders~~ JOE & SANDI STEWART

ADDRESS

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 280

PUMPED SEPTIC SYSTEM REQUIRED

INSTALL: 1-1250 Gallon Pump Chamber

NOTES:
- Septic pump detail to be proivded by installer prior to issuance of septic permit.
- Pump performance test is necessary prior to Health Department approval of pumped septic system.

TRENCHES - Trench to be 3 feet wide. Inlet 3.0 feet below original grade. Bottom maximum depth 5.0 feet below original grade. Effective area begins at 3.0 feet below original grade. 2.0 feet of stone below distribution pipe.

LOCATION - Beginning from the intersection of the 40.39' and 198.27' lot lines, begin trenches 125 feet down the 198.27' lot line and 10 feet off that same lot line. Run trenches on contour toward the right lot line.

INSTALL TRENCHES AS SHOWN ON APPROVED SEPTIC PLAN - AND DEVIATION FROM THIS LAYOUT SHOULD BE APPROVED BY THIS OFFICE PRIOR TO INSTALLATION.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. 8/24/99 ORA

PLANS APPROVED BY Amy McMillen DATE 7/22/1999

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)

BLDG. PERMIT SIGNED AND RETURNED 6/28/2000
B00125105
SUNDECK W/STEPS
3/20/03 B00140791 REC RM W/BAR + BATH

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.

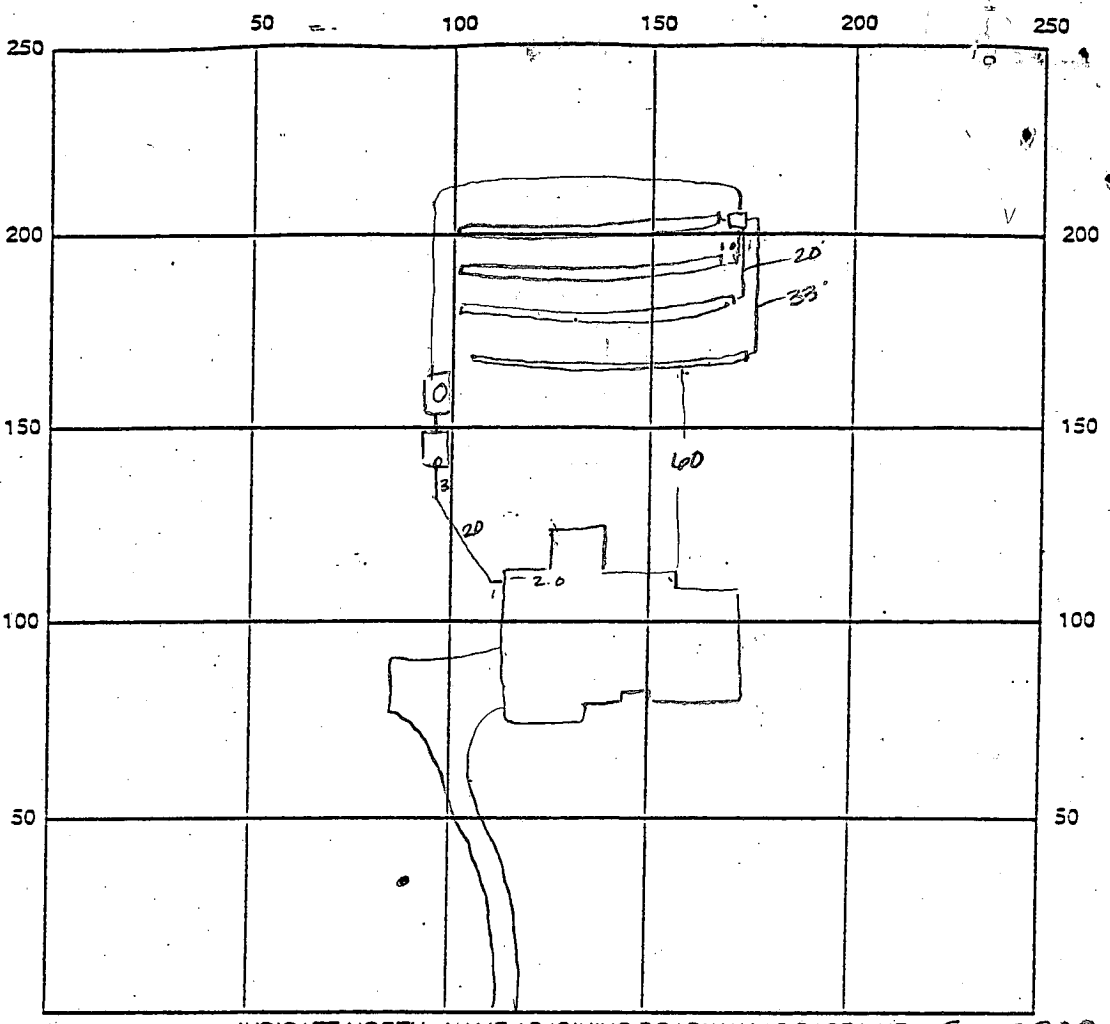
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

HD-250(6-90)

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

A 49993 F



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE Simpson Rd

SEPTIC TANK LEVEL 1250 gal ST & pump CLEANOUTS 6" on distribution box & septic tank manhole on pump

DISTRIBUTION BOX LEVEL OK baffle is in

DRAIN FIELD/TITLE DEPTH 5.0 FT. TRENCH WIDTH 3.0 FT. INLET DEPTH 3.0 FT.

EFFECTIVE GRAVEL DEPTH 2.0 FT. TOTAL LENGTH 280 FT.

NUMBER OF TRENCHES 4 ONE SIDEWALL/BOTTOM AREA 840 SQ. FT.

DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET 2.0 FT.

ABSORBENT AREA — SQ. FT.

REMARKS: 11/4/99 OK to cover all work - pump preformance test needed - contractor verified that he would sleeve electric line due 2/3/00 - Alarm OK, Ball valve all way open, check valve ✓, Pumping OK, No Control Box, Pump is wired via circuit Breaker Box. On/off Float worked OK. Pump Test OK ff

11/4/99 WPI 4.0 below casing 1.5' above, 2 piece cap, PVC pipe OK ff

DATE SYSTEM APPROVED 2/3/00 INSPECTOR RPinkley

APPLICATION

PERCOLATION TESTING

A 49993F

P

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

DISTRICT 1

DATE 4/26/94

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 ~~John M. Janney~~ Trinity Builders MD 21029

ADDRESS 7346 Pindell School Rd. Clarksville PHONE (301)725-5885

AGENT OR PROSPECTIVE BUYER Carman Associates

ADDRESS P.O. Box 122, Ellicott City, MD 21041 PHONE (410)442-1045

PROPERTY LOCATION:

SUBDIVISION BRENDA'S CHOICE LOT NO. 5

ROAD AND DESCRIPTION West side Pindell School Rd. @ Johns Hopkins Rd.
11854 Simpson Road

TAX MAP 41 PARCEL # 143

SIZE OF LOT 1 Acre TYPE BLDG. Single Family - 4 Bdrm
(SINGLE FAMILY DWELLING OR COMMERCIAL)

[illegible] PERMIT SENT

[illegible] RETURNED 7-22-98
Serial #B001933s

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. Ronald L. Carman, GENERAL PARTNER
(SIGNATURE OF APPLICANT) CARMAN ASSOC.

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

HD-216 (3/92)

APR-26-94 TUE 8:11

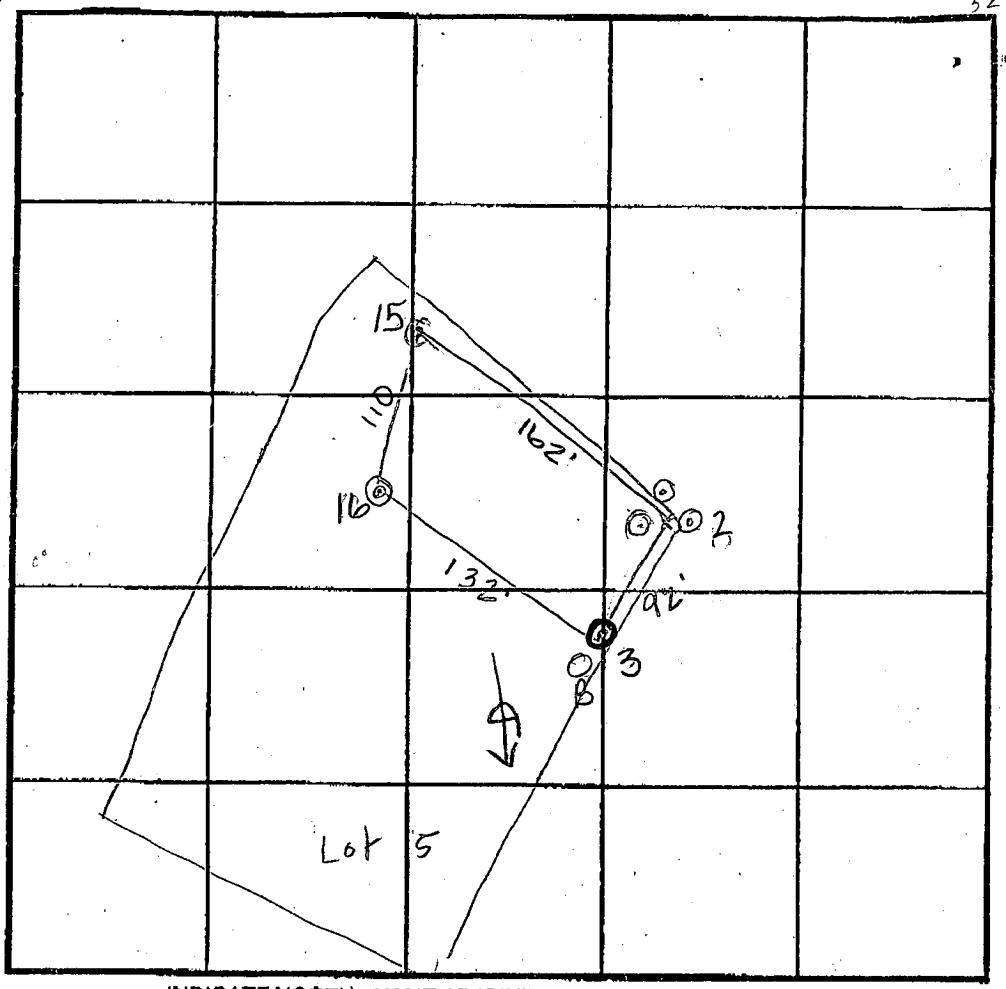
A49993F
COUNTY #

SOIL PROFILE

3
0' orange brn C
3 brn SSiL mica
12' water

2,16
orange brn CL
5' tan orange SiL mica
8' brn/grey SiL Mica
12½'

15
tan C
3' orange SiL mica
12'



SOIL PROFILE
0'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.
SIMPSON RD

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
6-16-94	3	8' V	11:12 30	11:22	11:22	11:42	20 min
	3	4½ V	11.16	11:21	11:21	11:42	21 min
	16	7' V	2:23	2:24	1:26	1:28	2 min
	16	4' V	2:24	1:28	1:28	1:33	5 min
	2	7' V 11'	11:02	11:05	11:05	11:08	3 min
	2	4' V 11'	11:03	11:07	11:07	11:11	4 min
	15	4' V	2:11	2:12	2:12	2:13	1 min
	15	8½' V	2:10	2:12	2:12	2:20	8 min
3-6-95	B	Wet season	No water visual to B				OK

REMARKS Wet season testing

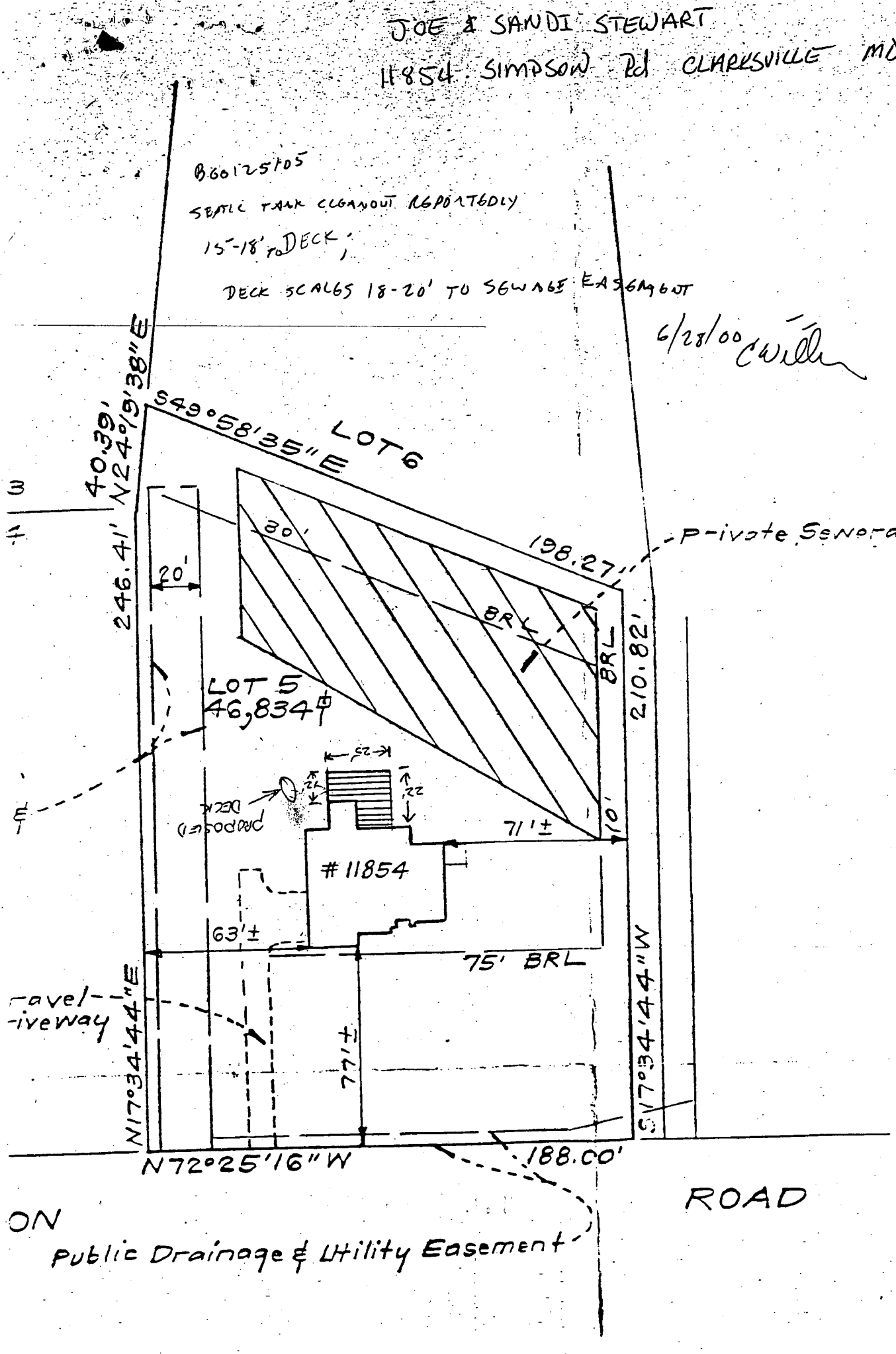
TYPE OF SOIL

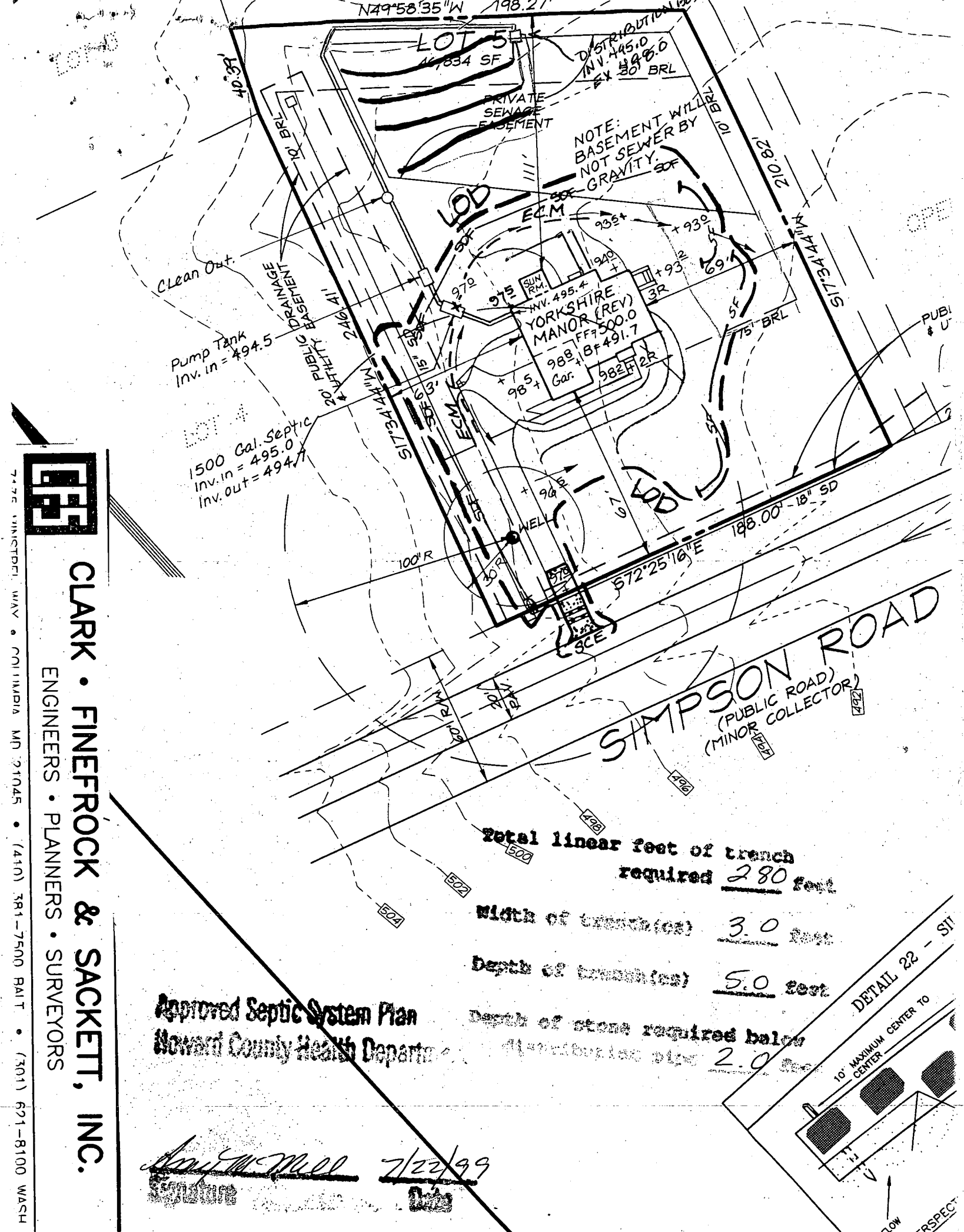
TESTED BY A. McMillen ALSO PRESENT Dan | Phil

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 7 min TRENCH WIDTH ~~2'6"~~ 3.0

INLET DEPTH 3.0 MAXIMUM BOTTOM DEPTH 5.0 SQ. FT/BEDROOM 210

JOE & SANDI STEWART
11854 SIMPSON Rd CLARKSVILLE MD 21029





Total linear feet of trench required 280 feet

Width of trench(es) 3.0 feet

Depth of trench(es) 5.0 feet

Depth of stone required below distribution pipe 2.0 feet

Approved Septic System Plan
Howard County Health Department

7/22/99
Signature Date

DETAIL 22 - SI
10' MAXIMUM CENTER TO CENTER
FLOW

CLARK • FINEFROCK & SACKETT, INC.
ENGINEERS • PLANNERS • SURVEYORS

7175 HANOVER WAY • COLUMBIA, MD 21045 • (410) 381-7500 BALT • (301) 621-8100 WASH

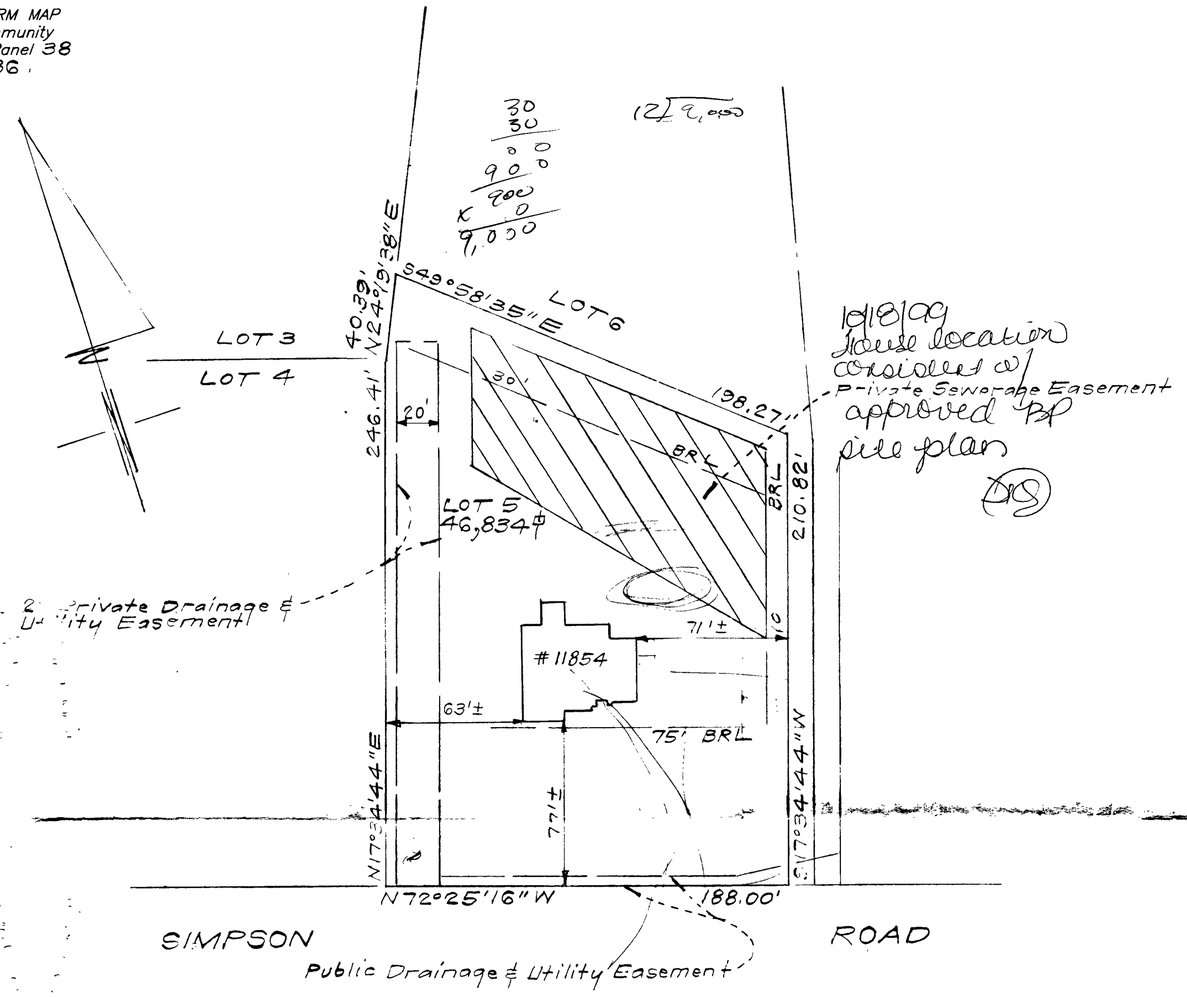
TRINITY 8.

NOTE: This Lot appears to lie in an area classified as Zone C, area of minimal flooding as shown on FIRM MAP of Howard County, Maryland, Community Panel Number 2400440038B, Panel 38 of 45, dated December 4, 1986.

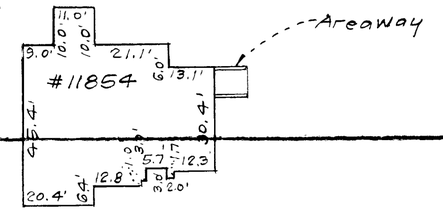
Wall Check: 9-13-99
Top of Wall Elev.: 498.8

30
30
000
900
900
K 0
9,000

12 | 9,000



10/18/99
House location considered w/ Private Sewerage Easement approved BP site plan
DS



SCALE: 1"=30'

CONSUMER INFORMATION

1) This plat is of benefit to the consumer only insofar as it is required by a lender of a title insurance company or its agent in connection with contemplated transfer, financing or refinancing purposes;

2) This plat is not to be relied upon for the establishment or location of fences, garages, buildings or other existing or future structures;

3) This plat does not provide for the accurate identification of property boundary lines, but such identification may not be required for the transfer of title or for securing financing or refinancing.

SURVEYOR'S CERTIFICATE

I hereby certify that a field survey of this property has been made under my supervision for the purpose of locating improvements shown hereon, and that they are located as shown.

9-21-99
DATE

STATE OF MARYLAND
PAIGE ADOLPHUS SEE, JR.
No. 304
REGISTERED
PROPERTY LINE SURVEYOR

NOTE:
1. The setback distance accuracy = 1'.

Plat Reference: PLAT 12458

CLARK • FINEFROCK & SACKETT, INC.
ENGINEERS • PLANNERS • SURVEYORS
7135 MINSTREL WAY • COLUMBIA, MD 21045 • (410) 381-7500 BALT. • (301) 621-8100 WASH.

DESIGNED	LOCATION DRAWING 11854 SIMPSON ROAD LOT 5 EASTERN VIEW LOTS 1-22 AND PRESERVATION PARCEL "A" 5TH ELECTION DISTRICT HOWARD COUNTY, MARYLAND	SCALE 1"=50'
DRAWN KWC		DRAWING
CHECKED PAS		JOB NO.
DATE 9-20-99		FILE NO. 99-119-?

EMERGENCY/TEMP NO. IF ANY

B 1 [redacted] 19 (MDE USE ONLY)

STATE OF MARYLAND
PERMIT TO DRILL WELL
please print or type

STATE PERMIT NUMBER
HO - 94 - 2299
fill in this form completely

Date Received (APA) 6 4 99

OWNER INFORMATION
Trinity Builders INC (Last Name / Owner / First Name)
6212 Devon DR (Street or RFD)
Columbia MD. 21044 (Town / State / Zip)

DRILLER INFORMATION
Ralph Mayne MSD 116 (Driller's Name / License No.)
Ralph Mayne well Drilling (Firm Name)
9120 Brown Church Rd. Mt Airy (Address)
Ralph Mayne 6-1-99 (Signature / Date)

B 2 WELL INFORMATION
APPROX. PUMPING RATE (GAL. PER MIN.) 5
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)
- (D) DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
- [F] FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION
- [I] INDUSTRIAL, COMMERICIAL, DEWATERING
- [P] PUBLIC WATER SUPPLY WELL
- [T] TEST, OBSERVATION, MONITORING
- [G] GEO-THERMAL

APPROXIMATE DEPTH OF WELL 150 FEET

APPROXIMATE DIAMETER OF WELL 6" 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 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
- [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)

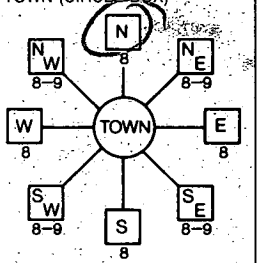
Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROP. PERMIT NUMBER GAP

PERMIT No. HO - 94 - 2299

B 3 LOCATION OF WELL
Howard (COUNTY)
Eastern View (SUBDIVISION)
SECTION - LOT 5
Fulton (NEAREST TOWN)
MILES FROM TOWN (enter 0 if in town) 3 MI

B 4
DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



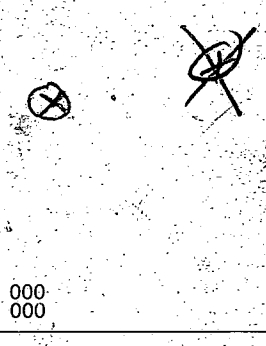
Simson Rd. (NEAR WHAT ROAD)
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) — NORTH / WEST / EAST / SOUTH
DISTANCE FROM ROAD 40 ENTER FT OR MI
TAX MAP: ____ BLK: ____ PARCEL ____

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL
Howard (COUNTY NAME) 49993-F (COUNTY NO.)
STATE SIGNATURE ____ INSERT S
DATE ISSUED 06 18 99 Steven R. King (CO SIGNATURE) 06 18 00 (EXP. DATE)
NORTH GRID 486 000 EAST GRID 822 000

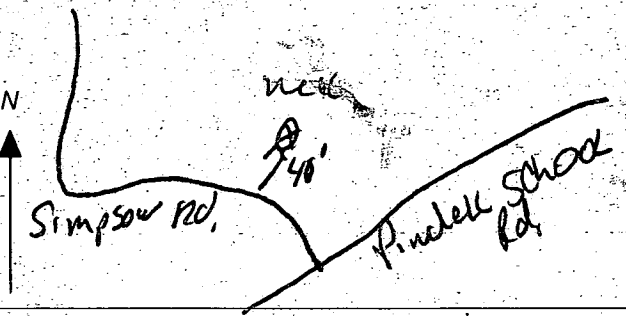
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER
1. well
2.
3.

WRITE THE BOX NUMBER FROM THE MAP HERE
E 8202
N 4806



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 =

SEQUENCE [redacted]
(MDE USE ONLY)

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

[redacted] ION REPORT

FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPE

[redacted] 45 DAYS AF[redacted]

COUNTY NUMBER 44993-F

ST/CO USE ONLY
DATE Received MM 10 DD 17 YY

DATE WELL COMPLETED MM 08 DD 03 YY 99

Depth of Well 125 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-2299

OWNER [redacted] Trinity Builders, Inc.
(last name / first name)

STREET OR RFD [redacted] Simpson Road TOWN Near Fulton

SUBDIVISION Easternview SECTION _____ LOT 5

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
Top Soil	0	2	
Sandy	2	60	✓
Sand Stone	60	65	
MICKA	65	90	
Sand Stone	90	95	✓
MICKA	95	125	

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. M SD 116
[redacted] Mayer
DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. M SD 212
[redacted]

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 25 NO. OF POUNDS 2580

GALLONS OF WATER 150

DEPTH OF GROUT SEAL (to nearest foot)
from 0 ft. TOP to 30+ ft. BOTTOM
(enter 0 if from surface)

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): 75

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

EACH SCREEN	DEPTH (nearest ft.)		
1	110	73	125
2			
3			

SLOT SIZE 1 _____ 2 _____ 3 _____

DIAMETER OF SCREEN _____ (NEAREST INCH)

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68 — from _____ to _____

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)
T (E.R.O.S.) W Q
TELESCOPE CASING | LOG INDICATOR | OTHER DATA

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min.) 12.

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)
BEFORE PUMPING 25 ft.
WHEN PUMPING 33 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)

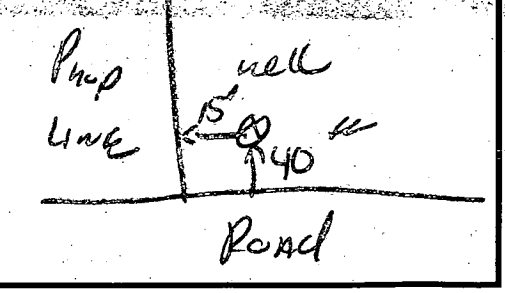
PUMP HORSE POWER

PUMP COLUMN LENGTH (nearest ft.)

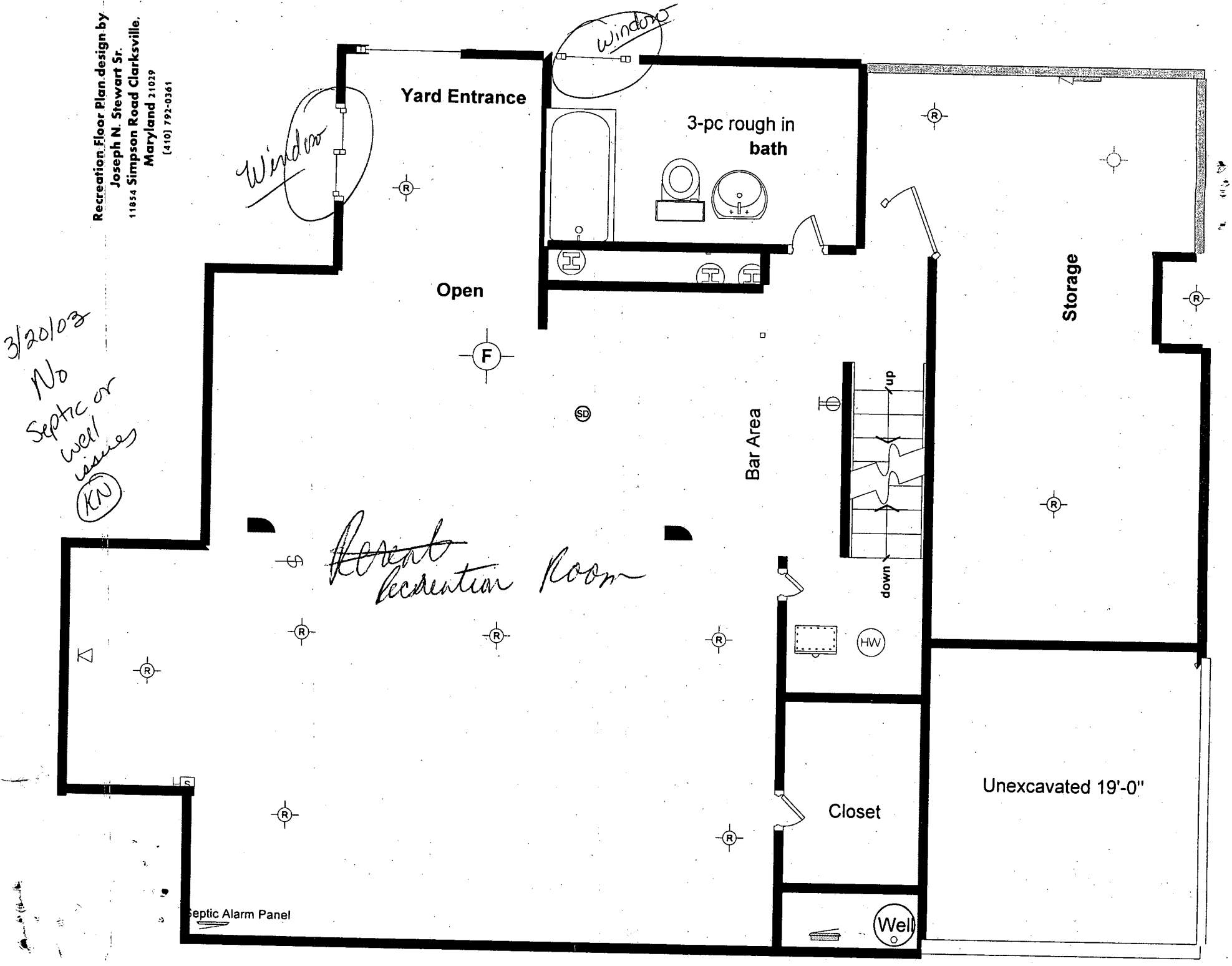
CASING HEIGHT (circle appropriate box and enter casing height)
[+] above [–] below LAND SURFACE 2 (nearest foot)

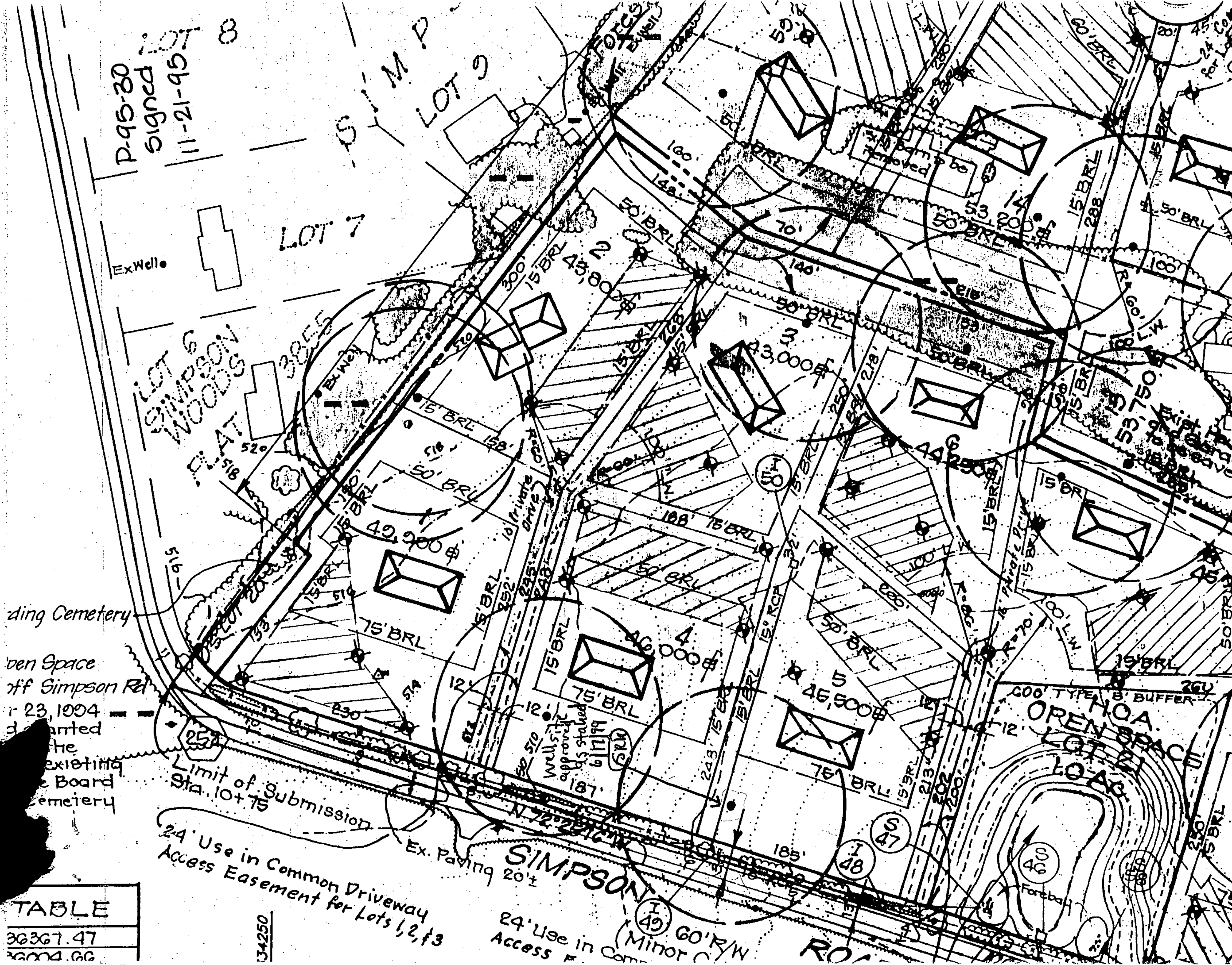
LOCATION OF WELL ON LOT

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



COUNTY


Recreation Floor Plan design by
Joseph N. Stewart Sr.
11854 Simpson Road Clarksville,
Maryland 21029
(410) 792-0361
Window
Yard Entrance
Window
3-pc rough in
bath
Open
Storage
3/20/03
No
Septic or
well
issues
KN
F
SD
Bar Area
up
down
Recreation Room
HW
Unexcavated 19'-0"
Closet
Septic Alarm Panel
Well



P-95-30
Signed
11-21-95
LOT 8
LOT 9
LOT 7
SIMPSON
Ex Well
LOT 6
SIMPSON WOODS
PLAT 3855
Ex Well
Barn to be Removed
50'BRL
15'BRL
75'BRL
2
43,800
3
43,000
4
46,000
5
45,500
6
44,250
14
53,200
53,750
42,900
10' Private Drive
Private Drive
Existing Cemetery
Open Space
off Simpson Rd
23, 1994
Board
Cemetery
Limit of Submission
Sta. 10+75
24' Use in Common Driveway
Access Easement for Lots 1, 2, & 3
Ex. Paving 20'±
SIMPSON
ROAD
60' R/W
Minor
24' Use in Common
Access
HOA
OPEN SPACE
LOT 21
1.0 AC.
60' TYPE B BUFFER
Forebay
Wellsite approved as staked
TABLE
36367.47
34250

Faxed 1-12-99

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043
461-9933

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation ✓
Replacement ____

Receipt # ____
Date ____

Name of Installer S.K. Plumbing + Heating Inc Telephone 410-775-0562

License Number 12285 MD. State
Certified Well Pump Installer ____ Well Driller ____ Registered Plumber ✓ 12285

Name of Property Owner Trinity Home Telephone 410-313-8722
Subdivision Eastern View Lot # 5 Well Tag # HO-99-2299
Site Address 11851 Simpson Rd

Pump
1. Type
   a. Deep well jet ____
   b. Shallow well jet ____
   c. Submersible ✓
2. Make Sauer
3. Model # ____
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 Sleeve

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

Pitless Adapter
1. Make ____
2. Model # ____
3. Depth 42

Tank
1. Capacity Well-X-Mate 250
2. Pressure relief valve? Yes

11/4/99 WPI OK A

Piping
1. Type 1" P.E.
2. Size ____
3. NSF and/or BOCA Code approved ____
4. Depth of supply line 42

Well data
1. Depth 85 ft.
2. Yield 30+ GPM
3. Static water level 22 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).

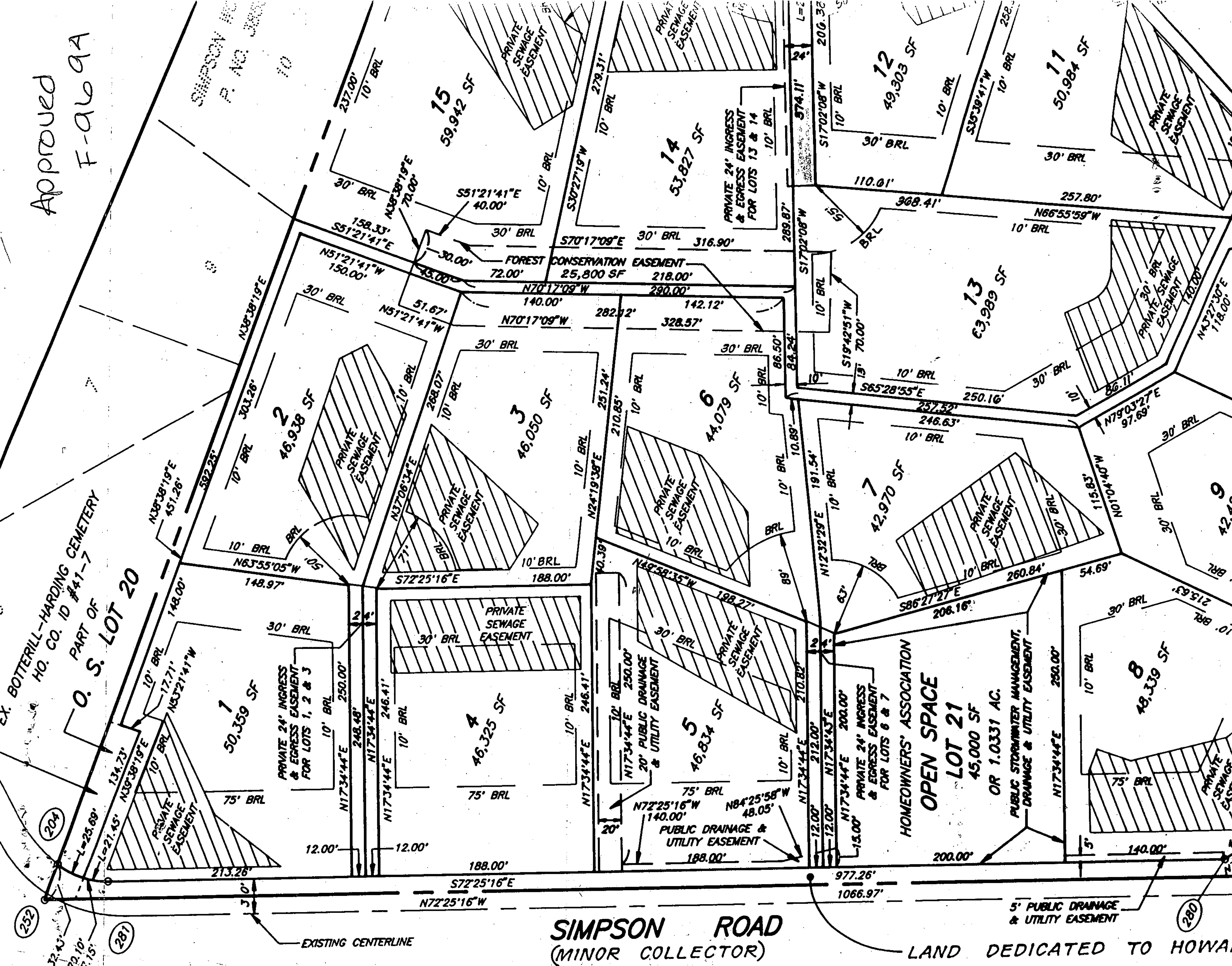
All information given above is true to the best of my knowledge.

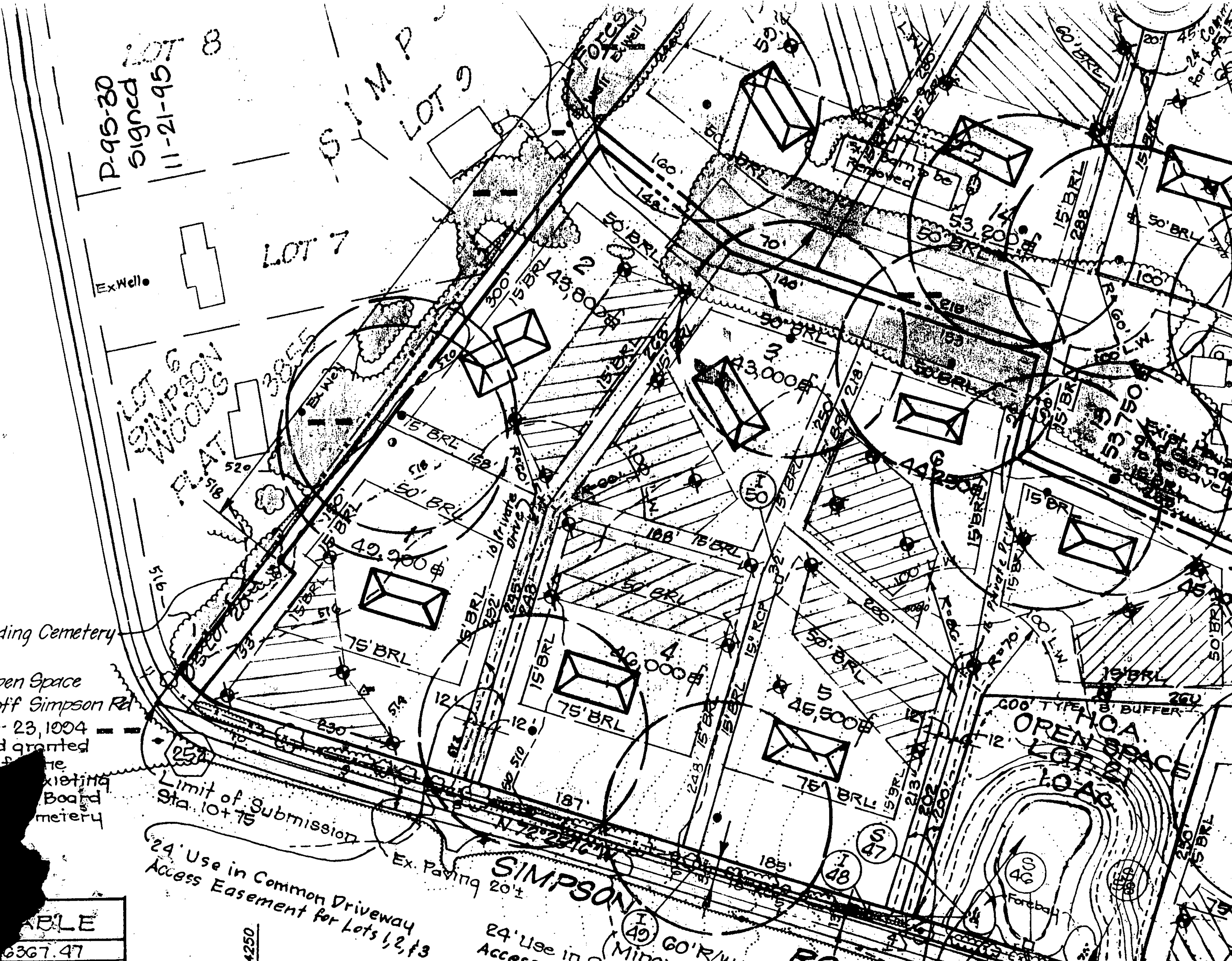
Signature of Applicant: ____

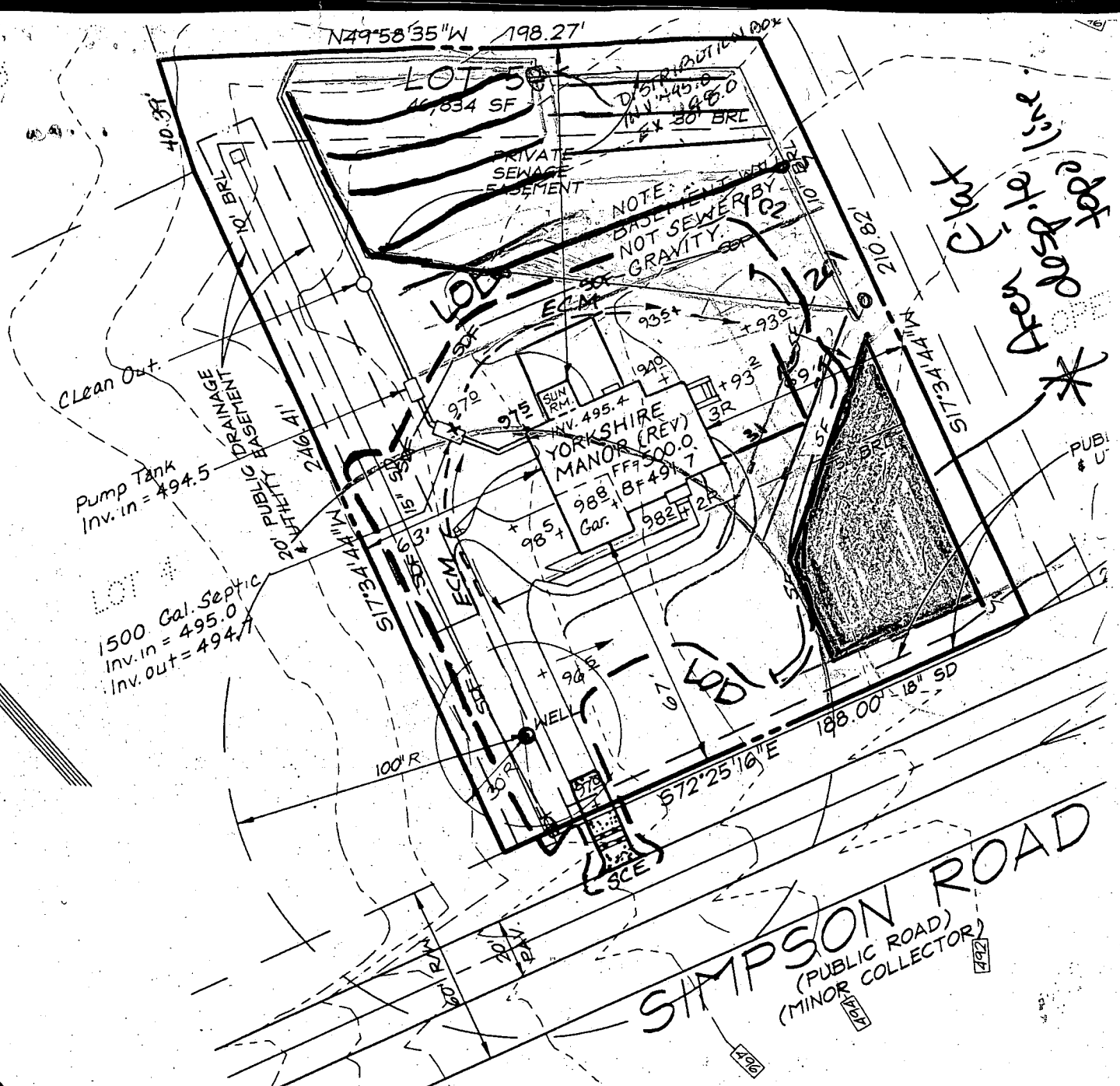
Date: 12-1-99

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

HD-215


Approved F-9697
EX. BOTTERILL-HARDING CEMETERY
HO. CO. ID #41-7
PART OF
O. S. LOT 20
SIMPSON ROAD
(MINOR COLLECTOR)
EXISTING CENTERLINE
LAND DEDICATED TO HOWA
5' PUBLIC DRAINAGE & UTILITY EASEMENT
S72°25'16"E
977.26'
N72°25'16"W
1066.97'
1
50,359 SF
2
46,938 SF
3
46,050 SF
4
46,325 SF
5
46,834 SF
6
44,079 SF
7
42,970 SF
8
48,339 SF
11
50,984 SF
12
49,303 SF
13
63,989 SF
14
53,827 SF
15
59,942 SF
HOMEOWNERS' ASSOCIATION
OPEN SPACE
LOT 21
45,000 SF
OR 1.0331 AC.
PRIVATE SEWAGE EASEMENT
PRIVATE 24' INGRESS & EGRESS EASEMENT FOR LOTS 1, 2 & 3
PRIVATE 24' INGRESS & EGRESS EASEMENT FOR LOTS 6 & 7
PRIVATE 24' INGRESS & EGRESS EASEMENT FOR LOTS 13 & 14
20' PUBLIC DRAINAGE & UTILITY EASEMENT
PUBLIC DRAINAGE & UTILITY EASEMENT
PUBLIC STORMWATER MANAGEMENT, DRAINAGE & UTILITY EASEMENT
FOREST CONSERVATION EASEMENT
25,800 SF
30' BRL
10' BRL
75' BRL
N63°55'05"W
148.97'
S72°25'16"E
188.00'
N70°17'09"W
140.00'
290.00'
S70°17'09"E
316.90'
N51°21'41"W
150.00'
S51°21'41"E
158.33'
S51°21'41"E
40.00'
N38°38'19"E
70.00'
N38°38'19"E
451.26'
592.25'
N24°19'38"E
251.24'
N37°06'34"E
268.07'
N49°58'35"W
198.27'
S86°27'27"E
260.84'
206.16'
S65°28'55"E
250.16'
257.52'
246.63'
N66°55'59"W
368.41'
257.80'
N79°03'27"E
97.69'
N01°04'40"W
115.83'
N43°27'30"E
118.00'
S17°02'08"W
574.11'
289.87'
S19°42'51"W
70.00'
S30°27'19"W
279.31'
N17°34'44"E
250.00'
246.41'
248.48'
212.00'
210.82'
200.00'
N72°25'16"W
140.00'
N84°25'58"W
48.05'
188.00'
200.00'
140.00'
213.26'
12.00'
15.00'
L=25.69'
L=21.45'
134.73'
N53°21'41"W
17.71'
204
252
281
280


P-95-30
Signed
11-21-95
LOT 8
LOT 9
LOT 7
Ex Well
LOT 6
SIMPSON WOODS
PLAT
Removed to be
53,200 sf
43,800 sf
43,000 sf
42,900 sf
46,000 sf
46,500 sf
50' BRL
15' BRL
75' BRL
10' Private Drive
12' Private Drive
HOA
OPEN SPACE
LOT 21
1.0 AC.
600' TYPE B BUFFER
Limit of Submission
Sta. 10+75
24' Use in Common Driveway
Access Easement for Lots 1, 2, & 3
Ex. Paving 20'±
SIMPSON
60' R/W
Forebay
ding Cemetery
pen Space
ff Simpson Rd
- 23, 1994
d granted
xisting
Board
metery
ABLE
6367.47



Total linear feet of trench required 280 feet

Width of trench(es) 3.0 feet

Depth of trench(es) 5.0 feet

Depth of stone required below 2.0 ft.

Approved Septic System Plan
Howard County Health Department

7/22/99
Date

DETAIL 22 - ST
10' MAXIMUM CENTER TO CENTER

CLARK • FINEFROCK & SACKETT, INC.
ENGINEERS • PLANNERS • SURVEYORS

Howard County Health Department

APPLICATION

FOR ~~PERCOLATION~~ Auger TESTING AND SITE EVALUATION

TEST DATE(S) _____ TEST TIME _____ A/P _____

AGENCY REVIEW: _____ DATE _____

DO NOT WRITE ABOVE THIS LINE

I HEREBY APPLY FOR THE NECESSARY TESTING/EVALUATION PRIOR TO ISSUANCE OF SEWAGE DISPOSAL SYSTEM PERMIT(S) TO:

CHECK AS NEEDED:
- ☐ CONSTRUCT NEW SEPTIC SYSTEM(S)
- ☐ REPAIR/ADD TO AN EXISTING SEPTIC SYSTEM
- ☐ REPLACE AN EXISTING SEPTIC SYSTEM

CHECK AS NEEDED:
- ☐ NEW STRUCTURE(S)
- ☐ ADDITION TO AN EXISTING STRUCTURE
- ☐ REPLACE AN EXISTING STRUCTURE

CHECK ONE:
- ☐ CREATE NEW LOT(S)
- ☐ BUILD ON AN EXISTING LOT IN A SUBDIVISION
- ☐ BUILD ON AN EXISTING PARCEL OF RECORD

IS THE PROPERTY WITHIN 2500' OF ANY RESERVOIR?
- ☐ YES
- ☐ NO

THE TYPE OF STRUCTURE IS:
- ☐ RESIDENTIAL WITH _____ PROPOSED BEDROOMS IN THE COMPLETED STRUCTURE (NOTE ***UNKNOWN*** IF APPROPRIATE)
- ☐ COMMERCIAL (PROVIDE DETAIL OF NUMBERS AND TYPES OF EMPLOYEES/ CUSTOMERS ON ACCOMPANYING PLAN)
- ☐ INSTITUTIONAL/GOVERNMENT (PROVIDE DETAIL OF NUMBERS AND TYPES OF EMPLOYEES/USERS ON ACCOMPANYING PLAN)

PROPERTY OWNER(S) _____

DAYTIME PHONE _____ CELL _____ FAX _____

MAILING ADDRESS 11854 Simpson Rd MD
STREET CITY/TOWN STATE ZIP

APPLICANT _____

DAYTIME PHONE _____ CELL _____ FAX _____

MAILING ADDRESS _____
STREET CITY/TOWN STATE ZIP

APPLICANT'S ROLE: DEVELOPER BUILDER BUYER RELATIVE/FRIEND REALTOR CONSULTANT

PROPERTY LOCATION
SUBDIVISION/PROPERTY NAME _____ LOT NO. _____

PROPERTY ADDRESS _____
STREET TOWN/POST OFFICE

TAX MAP PAGE(S) _____ GRID _____ PARCEL(S) _____ PROPOSED LOT SIZE _____

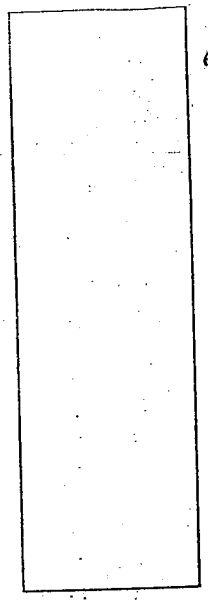
AS APPLICANT, I UNDERSTAND THE FOLLOWING: THE SYSTEM INSTALLED SUBSEQUENT TO THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC SEWERAGE IS AVAILABLE. THIS APPLICATION IS COMPLETE WHEN ALL APPLICABLE FEES AND A SUITABLE SITE PLAN HAVE BEEN RECEIVED. I ACCEPT THE RESPONSIBILITY FOR COMPLIANCE WITH ALL M.O.S.H.A. AND "MISS UTILITY" REQUIREMENTS. APPROVAL IS BASED UPON SATISFACTORY REVIEW OF A PERC CERTIFICATION PLAN.

TEST RESULTS WILL BE MAILED TO APPLICANT. _____
SIGNATURE OF APPLICANT

HOWARD COUNTY HEALTH DEPARTMENT, BUREAU OF ENVIRONMENTAL HEALTH, WELL AND SEPTIC PROGRAM
3525-H ELLICOTT MILLS DRIVE, ELLICOTT CITY, MARYLAND 21043-4544 (410) 313-1771 FAX (410) 313-2648
TDD (410) 313-2323 TOLL FREE 1-877-4MD-DHMH

PLEASE SUBMIT ORIGINALS ONLY (BY MAIL OR IN PERSON)

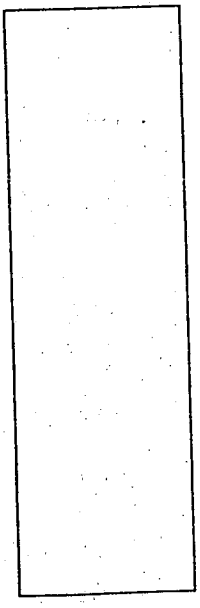
A/P_____



Auger 1

	brown L
1	brown SiCl micaceous <5%
2'3"	yellow brown SiCl micaceous <5%
2'10"	orange brown clearly fago? micaceous SiCl abk
4'	HB

#2



DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2nd INCH	P/F/H

REMARKS - Need a Perc Test.

SANITARIAN PAY/SF BACKHOE N/A OTHERS _____

TEST HOLES USED IN SDA_____ AVG. PERC TIME _____ SQ. FT/BR _____

TRENCH WIDTH _____ INLET DEPTH _____ MAX. BOT DEPTH _____ EFFECTIVE S/W _____

Help Me | Map Reset | Zoom Fit | Find Location | Remove Pin | Layer Control | Image Control | Theme Map | Local Print | Print Layout | Email Map | Map Exit

Distance: ft Zoom 498.64 ft

Disclaimer: Howard County, Maryland assumes no responsibility for the accuracy of this map or the information contained herein or derived therefrom. The buyer and/or user assumes all risks and liabilities whatsoever resulting from or arising out of the use of this map. There are no oral agreements or warranties relating to this sale and/or use of this map.

Tuesday, April 12 2005 | 12:41:45 PM | @737

Map Legends

County Line | Property Line | Contour Lines | 400 Contour Label | 401 Spot Elev.

Contacts: John Bussiere (x3044) Virginia Peterman (x3659) Yut Phasukyued (x3093) Robert Slivinsky (x3094)

Howard County
Health Department

7178 Columbia Gateway Drive, Columbia, MD 21046
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

Penny E. Borenstein, M.D., M.P.H., Health Officer

April 13, 2005

Mr. & Mrs. Stewart
11854 Simpson Rd
Clarksville Maryland, 21029

RE: Sewage Disposal Area Relocation

Dear Mr. & Mrs. Stewart

I am writing in regards to your proposal for a pool and a possible addition to your existing house on 11854 Simpson Road. I attempted to hand auger area in your front yard for possible Sewage easement relocation, but could not auger past four feet due to heavy rock fragments that prevented a proper soil analysis needed for easement relocation.

In order to relocate your sewage disposal area you will need to apply for a percolation test, with fee. I have enclosed an application. I have already prepared a Sewage Easement relocation plan which is usually prepared by an engineer.

Before any building permits are to be signed, percolation testing must be preformed. If you have any questions please call me at 410-313-1771.

Respectfully,

Peter A. Yencsik
Development Coordination Section
Well and Septic Program

PY
Enclosures
cc: File

FILE INQUIRY FORM

Property Address: 11854 Simpson Road.

Possible Pool & Building Addition
possible pending a perc test.
Augering unsuccesful.
If additional bedroom is installed,
tank will need upgraded to a 1500.
System over designed, No additional
trenches needed.
P.A.y. 9-15-05
Re perc plan already prepared by Sanderson.