7/21/93 (11:00 is finned + 3:00 P.M.)

PERMIT

File

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

03-307375

P 49557

A REPAIR

DISTRICT 3rd

DATE 8/24/93

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

461-9933

INDEXED 7/21 (3:00 P.M)

DATE SYSTEM APPROVED 7/21/93

INSPECTOR C.Bd

Jack Fyock IS PERMITTED TO INSTALL ____ ALTER X

ADDRESS 13775 Triadelphia Road, Glenelg, Maryland 21737 PHONE 988-9270

SUBDIVISION Farside LOT 60 ROAD 11730 Spring Haven Court

PROPERTY OWNER Robert Riedy (To 20'+ off Existing Split Rail Fence)

ADDRESS 11730 Spring Haven Court, Ellicott City, Maryland 21042 PHONE: 730-4350

SEPTIC TANK CAPACITY ____ GALLONS (Put adapter on ① trench to end @ Dist. Box.)

NUMBER OF BEDROOMS 5

(270+ SQUARE FEET ~~PER BEDROOM~~ of ① trench) (Replace 1 trench) [Only 1 trench left system]

LINEAR FEET OF TRENCH REQUIRED ____ [1 New Trench @ end of old ① old]

REPAIR - PURPOSE - To repair an overflowing septic system.

CALL FOR AN INSPECTION WHEN GROUND IS OPENED UP AND SANITARIAN WILL RECOMMEND REPAIR SYSTEM. 1 Trench (Install) 3' Maximum Depth 9 1/2' 60'+ in length + (1) trench to be 2' wide with 360'+ needed 6" of stone under pipe Connect off old ① trench as discussed; CBd Place 11 13' from trees run on contour to road to 20'+ off existing split rail fence.

PLANS APROVED BY Craig D. Williams / CBd at site DATE 5/12/93

COVER NO WORK UNTIL INSPECTED AND APPROVED See original R 31216 also

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.

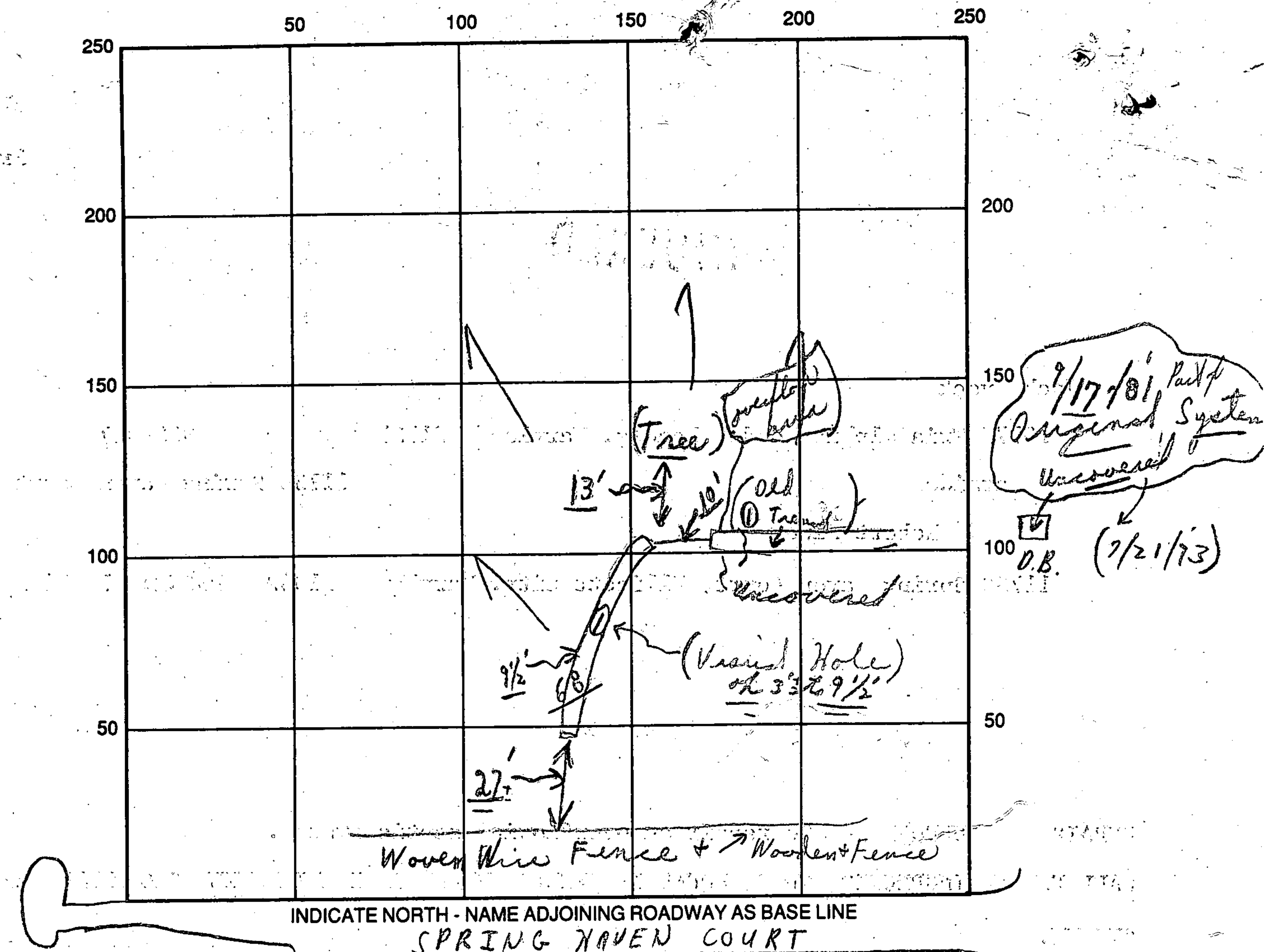
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

R 49557

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

***CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.**

HD-260(6-90)



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SPRING HAVEN COURT

SEPTIC TANK LEVEL Existing CLEANOUTS Existing

DISTRIBUTION BOX LEVEL (ok at time of 7/21/93)

DRAIN FIELD/TITLE DEPTH 9+ FT. TRENCH WIDTH 2 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 6 FT. TOTAL LENGTH 68+ 10' FT. + old Trench #① + others of 9/17/81 First System

NUMBER OF TRENCHES 1 ONE SIDEWALL/BOTTOM AREA 408+ SQ. FT.

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

ABSORBENT AREA 408+ SQ. FT.

REMARKS: (A.M.) 7/21/93 Partial - uncovered distribution box + found #① Trench pipe lower and receiving all of effluent and causing over flow @ end of Trench, ok for trench after visual hole seen, 7/21/93 (P.M.) 7/21/93 Later ok to cover as finish C.Rel (Material on-site)

DATE SYSTEM APPROVED 7/21/93 P.M. INSPECTOR Charles Bryan Streaker

9/2/81

PERMIT

APPROVED 9/17/81 RH

P 31555

A 31216

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 3rd

INDEX

DATE 8/4/81

Robert L. Orndorff IS PERMITTED TO INSTALL X ALTER

ADDRESS 13938 Highland Road, Clarksville, Md 21029 PHONE 596-9394

SUBDIVISION Farside ROAD 11730 Spring Haven Court LOT 60

PROPERTY OWNER ~~Robert Riedy~~

ADDRESS 4913 W. Running Brook, Columbia, Maryland 21044

SPECIFICATIONS 5 bedrooms

SEPTIC TANK CAPACITY 1500 GALLONS

DRAIN FIELD _____ DEPTH _____ FEET, BOTTOM AREA _____ SQ. FT.

DEEP TRENCH _____ DEPTH _____ FEET, BOTTOM AREA _____ SQ. FT.

SEEPAGE PITS _____ ABSORBENT SIDE-WALL AREA _____ SQ. FT.

INLET PIPE _____ FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH _____ FT. BELOW ORIGINAL GRADE

EFFECTIVE DEPTH AT _____ FT. BELOW ORIGINAL GRADE.

LOCATE DISPOSAL AREA _____ FT. FROM _____ LOT LINE AND _____ FT. FROM _____ LOT LINE AS SEEN WHEN

TRENCHES ~~XXXXXXXXXXXXX~~

150' per bedroom. Trench 2' wide inlet 2½' below original grade, Maximum depth 5' ~~below original grade, effective area begins at 3' below original grade.~~ 2½' of stone below distribution pipe.

~~NOTE: 1. No trench to exceed 100' in length. 2. If more than one trench used, a dis-~~ tribution box is required. 3. Trenches to be installed on level ground.

~~LOCATION: Start trenches 105' from existing paving along the front of the lot, and 230'~~ from the left (276.16') lot line.

PLANS APPROVED BY ~~Frank Skinner~~ DATE 5/1/81

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: IF TRENCH IS USED CALL FOR INSPECTION BEFORE PLACING GRAVEL IN TRENCH.

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER.

NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

PERMIT VOID AFTER THREE 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 ACCEPTED.

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

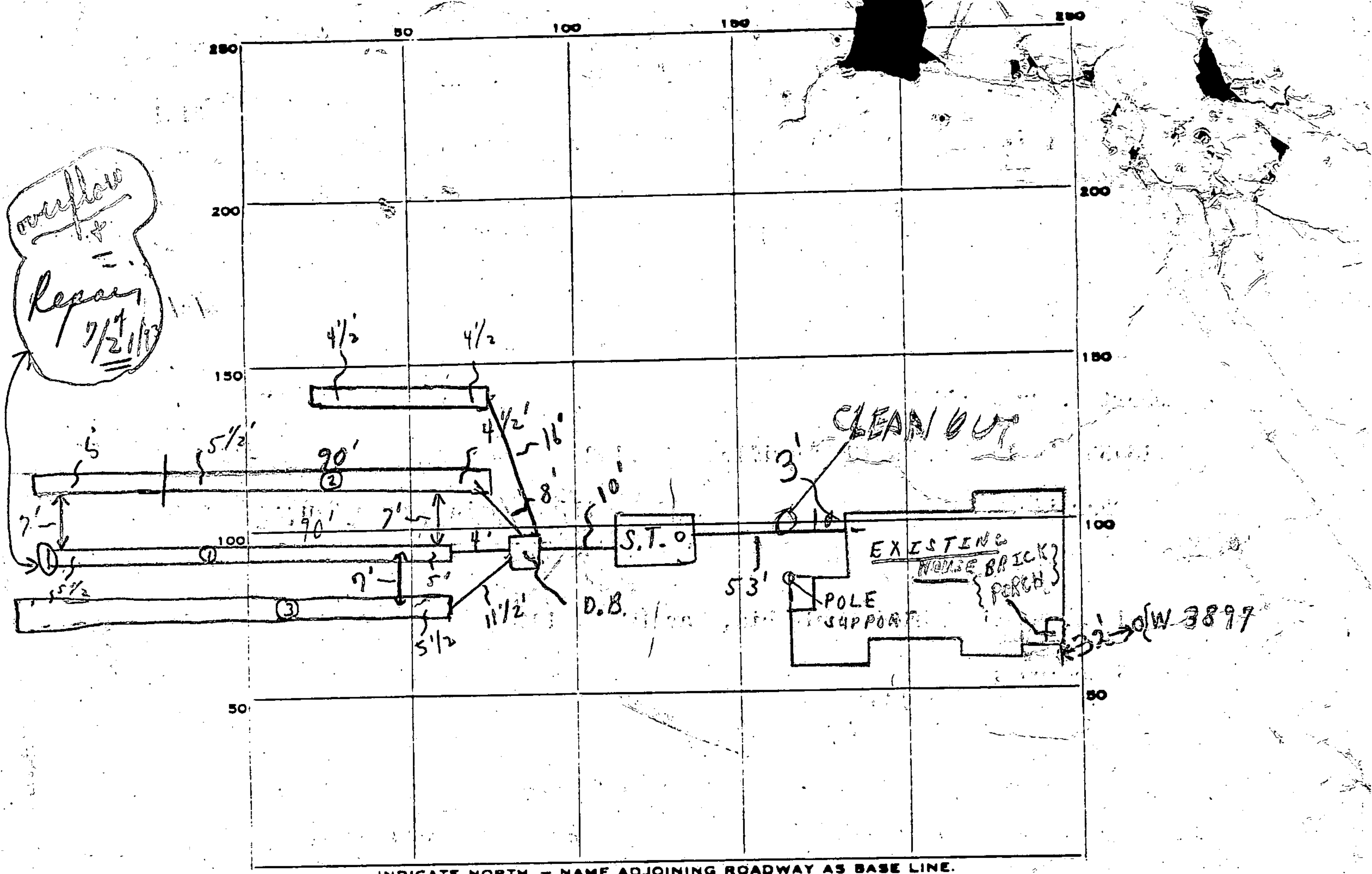
BLDG. PERMIT SIGNED AND RETURNED 8/15/84
Legal #72289
Sunroom

BLDG. PERMIT SIGNED AND RETURNED 4/21/83
Legal # 54472
Step addition cedar deck & concrete patio

BLDG. PERMIT SIGNED AND RETURNED 4/21/83
Legal # 54460
Pool

AP 31216

EH-2-1079



INDICATE NORTH. – NAME ADJOINING ROADWAY AS BASE LINE.

SPRING HAVEN COURT

PERMIT CARD ✓

SEPTIC TANK, LEVEL ✓   S.T. CLEANOUTS ✓

DISTRIBUTION BOX, LEVEL

TILE FIELD, DEPTH ① 5'+ AVG. ② 5' AVG ③ 5½' ④ 4½ FT. TRENCH WIDTH ①②③ } 2 FT.   7/21/93 Only #① trench Drain

GRAVEL DEPTH 3 AVG' IN. TOTAL LENGTH ① 90' ② 90' ③ 90' } 300 FT. ④ 30

NUMBER OF TRENCHES 4   TOTAL BOTTOM AREA —

~~SEEPAGE PITS, INSIDE DIAMETER~~ — FT. DEPTH BELOW INLET — FT.

ABSORBENT AREA 900+ SQ. FT.

REMARKS A.M 9/10/81 (1) CHECKED ① + ② TRENCHES - ONLY - OK FOR STONE; NEED CLEANOUT BETWEEN SEPTIC TANK AND HOUSE - PARTIAL (2) P.M. 3 TRENCHES @ 90' EACH - OK FOR STONE + PIPE; DO NOT COVER TIL INSPECTED. - PARTIAL C.B.

9/14/81 (1) #② TRENCH OK TO COVER + ③ TRENCH OK TO COVER FIRST 65' C.B. (2) 30' OF TRENCH #④ OK FOR STONE ONLY. C.B. (3) OK TO COVER FROM TRENCHES TO SEPTIC TANK ONLY; STILL NEED CLEANOUT BETWEEN HOUSE AND TANK. PARTIAL C.B.

9/17/81 CLEANOUT INSTALLED

DATE SYSTEM APPROVED 9/17/81 INSPECTOR Raymond Hodge

Subdivision: Parside Lot # 60

150 sq ft/bdrm

TRENCHES

	Septic Tank	Minimum Total Sq. Ft.
3 bdrm	1000 gal.	450
4 bdrm	1250 gal.	600
5 bdrm per B.P. # 469175 S.	1500 gal	750

25 | 7500 — 300

Trench 2 width

Inlet 2½ ft below original grade

Maximum Depth 5 ft below original grade

Effective area begins at 3 ft below orig. gd.

2½ ft of stone below distribution pipe.

Note: (1.) No. trench to exceed 100 ft in length

(2.) If more than one trench used, a distribution box is required

(3.) Trenches to be installed on level ground.

Location: Start trenches 105' from existing paving along the front of the lot, and 230' from the left (276.16') lot line

3/18/81
9:30 AM
Yellow

APPLICATION

A 31216

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 473 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT 3

DATE MARCH 10, 1981

BLDG. PERMIT SIGNED AND RETURNED 7/7/81
Sewage # 46917

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 WOODMARK, INC. Robert Riedy

ADDRESS 12150 MT ALBERT CT 4913 W. Running Brook 21043 Columbia, Md 21044 PHONE 730-4350 531-5072

PROPERTY LOCATION:

SUBDIVISION FARSIDE LOT NO. 60

ROAD AND DESCRIPTION 11730 SPRING HAVEN COURT

SIZE OF LOT 3.714 TYPE BLDG. _____ (NUMBER OF BEDROOMS)

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. Robert Riedy
(SIGNATURE OF APPLICANT)

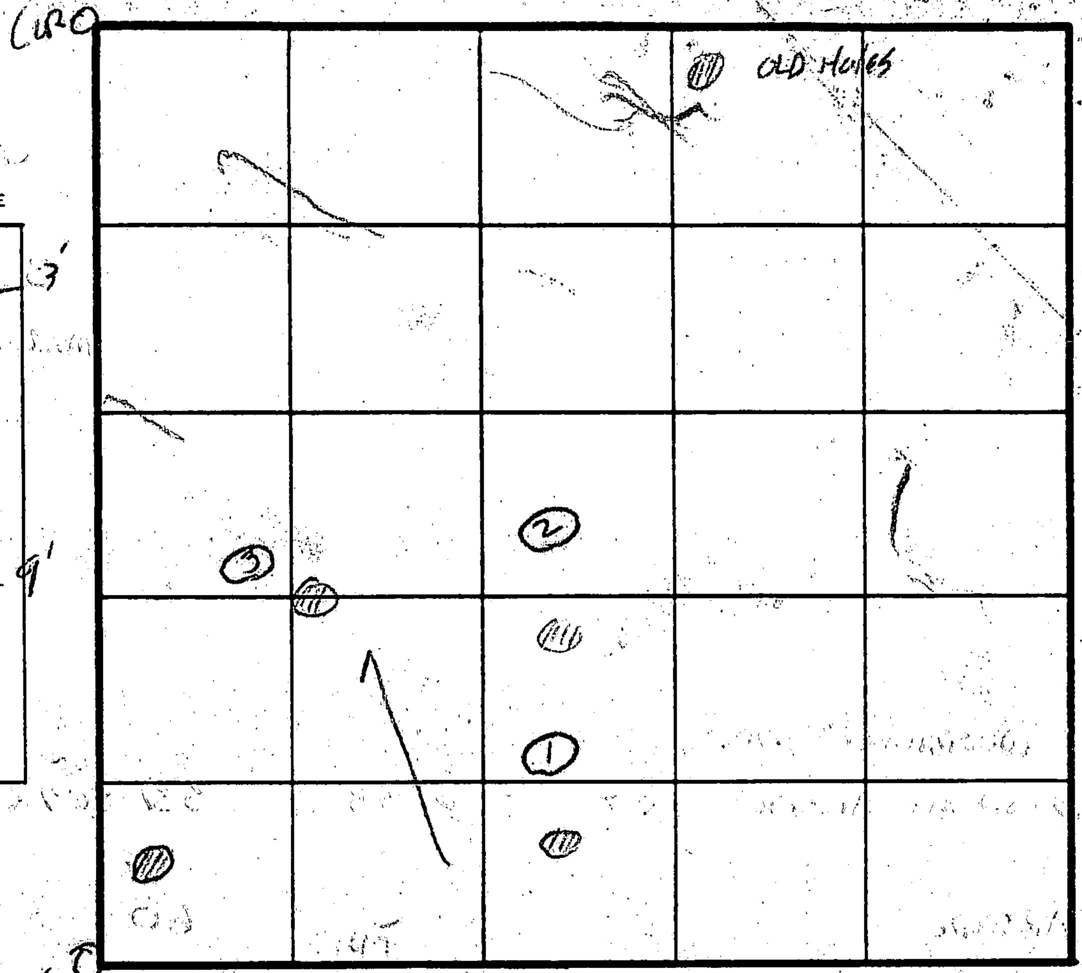
APPROVED BY Frank Skinner FOR _____ DATE 5/1/81

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



① SOIL PROFILE

0'
Clay — 3'
Very Sandy Loam — 9'
Rock solid

③

Clay
Brown Sandy Loam — 9'
Rock — 10'
Sand

②

Clay — 3'
Brown Clay Sandy Loam (Some Rock) — 8
Rocky Sandy Loam — 10
Hard Sandy Loam — 12
Hard Rock

INDICATE NORTH. NAME ADJOINING ROADWAY AS BASE LINE.
SPRING HAVEN COURT

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
3/18/81	1S 1M	3 8'	9:41 9:53	9:42 9:54	9:42 9:54	9:44 9:56	2 2
	1D 2S	9' 3'	9:43	9:48	9:48	10:00	12
	2M 2D	7	10:25	10:26	10:26	10:29	3
	3S 3M	4' 8'	9:43 9:59	9:47 10:00	9:47 10:00	9:51 10:04	4 4
	3D	10					

REMARKS Retest

TYPE OF SOIL

TESTED BY SK 3/18/81 ALSO PRESENT

EH-12-1079

APPLICATION

A 3/216

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 473 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT 3

DATE MARCH 10, 1981

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 WOODMARK, INC

ADDRESS 12150 MT ALBERT CT 21043 PHONE 531-5072

PROPERTY LOCATION:

SUBDIVISION FARSIDE LOT NO. 60

ROAD AND DESCRIPTION SPRING HAVEN COURT

SIZE OF LOT 3.714 TYPE BLDG. _____
(NUMBER OF BEDROOMS)

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.

Ralph Ottenstein
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

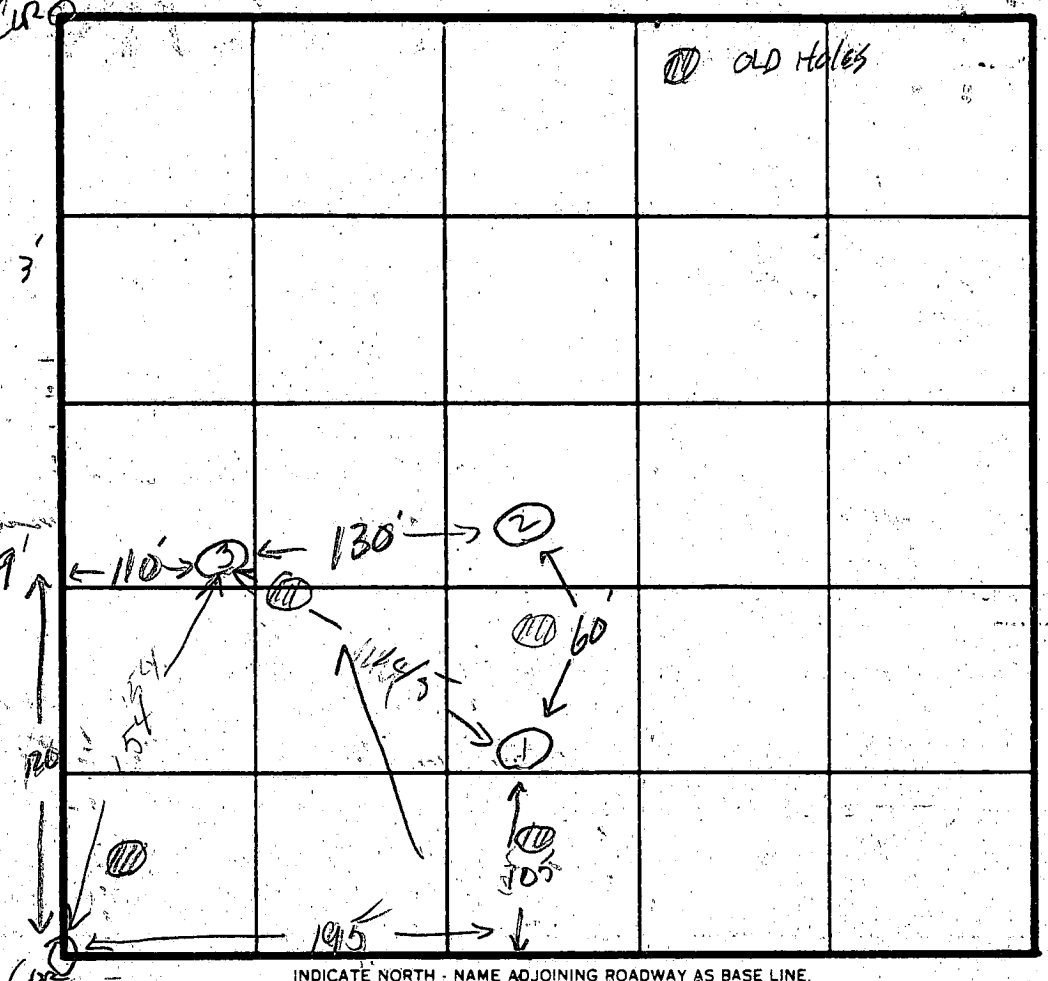
REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

CURB



① SOIL PROFILE

0'
Clay 3'
Very Sandy Loam 9'
Rock Solid

③
Clay 4'
Brown Sandy Loam 9'
Rock 10'
Solid

②
Clay 3'
Brown Gray Sandy Loam 8'
Some Rock
Rocky Sandy Loam 10'
Hard Sandy Loam 12'
Hard Rock

INDICATE NORTH · NAME ADJOINING ROADWAY AS BASE LINE.
SPRING HAVEN COURT

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
3/18/81	15	3'	9:41	9:42	9:42	9:44	2
	1M	8'	9:53	9:54	9:54	9:56	2
	10	9'					
	25	3'	9:43	9:48	9:48	10:00	12
	2M	9	10:25	10:26	10:26	10:29	3
	20						
	35	4'	9:45	9:47	9:47	9:51	4
	3M	8'	9:58	10:00	10:00	10:04	6
	30	10					

REMARKS Retest

TYPE OF SOIL

TESTED BY SK 3/18/81 ALSO PRESENT

EH-12-1079

Prel

28318

A 28319

P

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

Septic Tank { 1-3 Bedrooms 1000 gallons
4 Bedrooms 1250 gallons

DISTRICT 3

DATE May 12, 1978

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 Woodmark, Inc.

ADDRESS 9267 Balto. Nat'l. Pike PHONE 461-2889

PROPERTY LOCATION:

SUBDIVISION Farside LOT NO. 60

ROAD AND DESCRIPTION Rt. 40 West to left on Rt. 144, left on Folly Quarter, left on Homewood, 1 mile to property on left

SIZE OF LOT 3 plus acres TYPE BLDG. 4
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT R. J. Attwell Jr

APPROVED BY _____ FOR _____ DATE 1 1
(KIND OF SYSTEM)

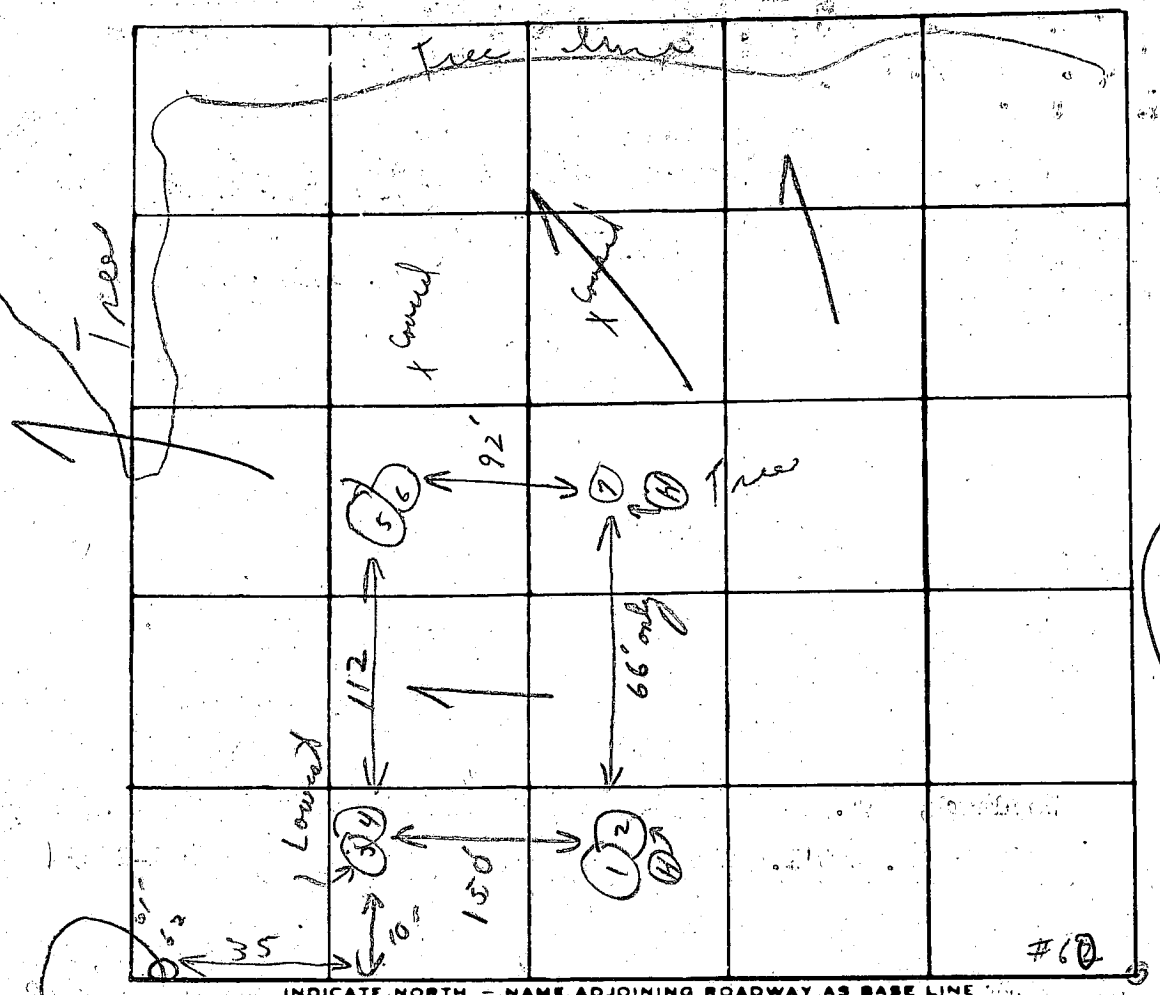
REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

60



60

INDICATE NORTH — NAME ADJOINING ROADWAY AS BASE LINE

Unnamed Road

Soil Profile

150 sq ft. per bedroom

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
7/7/78	1 pm.	4'	1:00	1:01	1:01	1:03	2m
	(H) 2 JD	12'	1:00	1:02	1:02	1:05	3m
	3 A	3'-3½'	1:05	1:1	Pulled pipe 1:1	1:19	
	(L) 4	10'	1:05	1:08	1:08	1:18	10m
	5	3½'	Visual		similar		
	6	10½			to		
	7	12'	Visual		others		
	3B	4'	1:42	1:44	1:44	1:55	11m
						4	26

Test near stakes

4' inlet

7 min avg

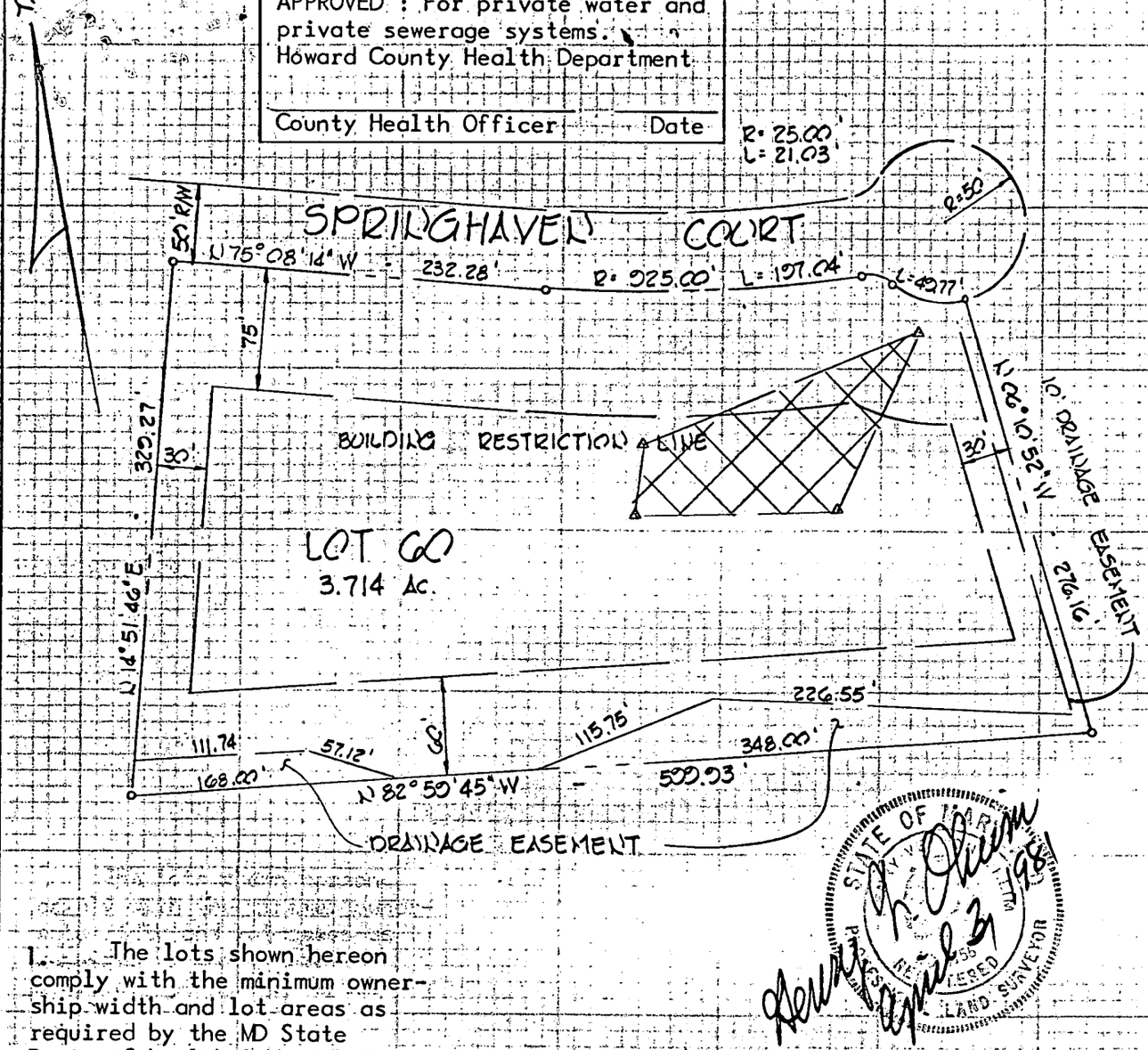
REMARKS (Test in open field)

TYPE OF SOIL

TESTED BY C.B.S. & J.S. ALSO PRESENT: same as yesterday

APPROVED : For private water and private sewerage systems.
Howard County Health Department

County Health Officer — Date



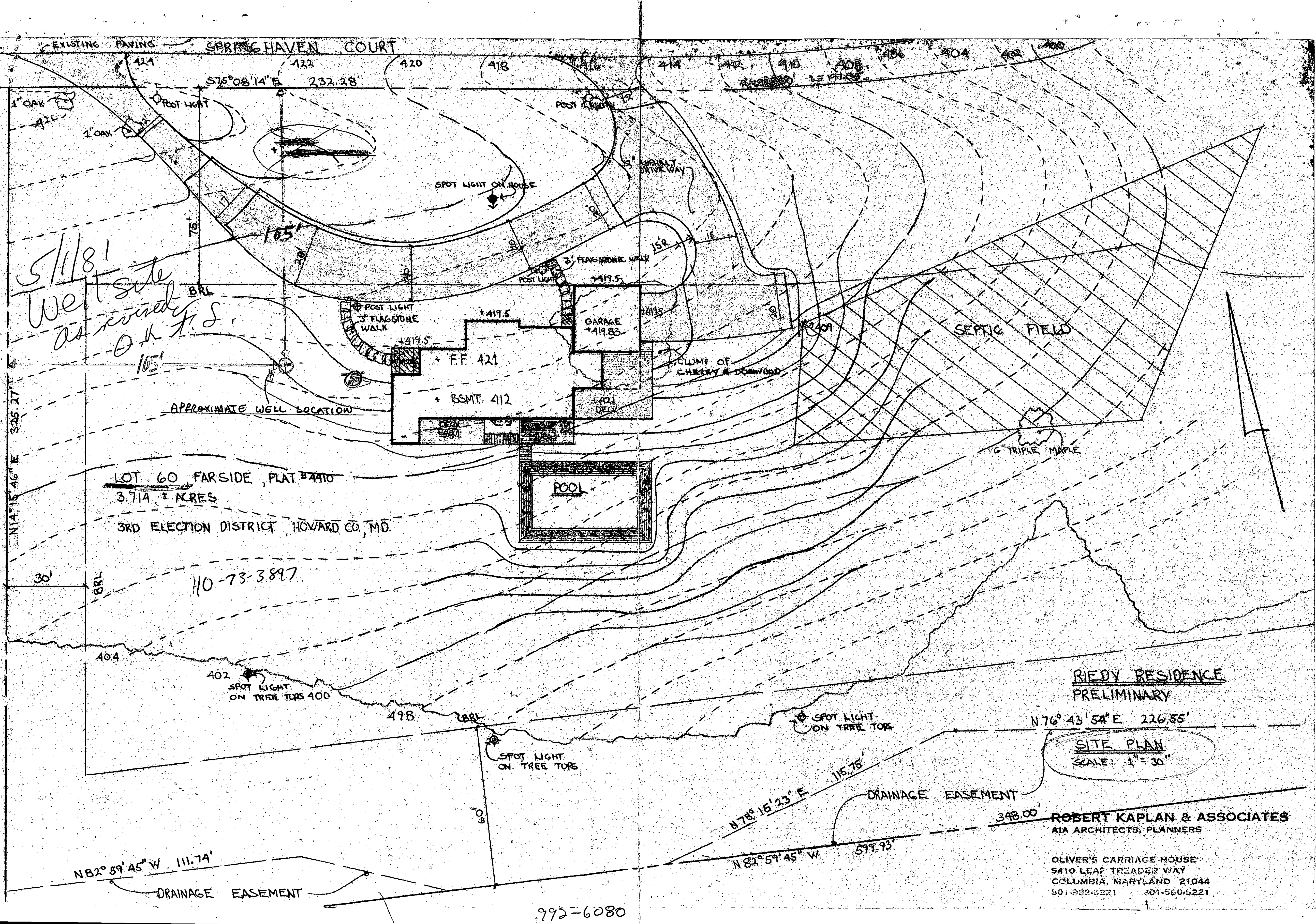
1. The lots shown hereon comply with the minimum ownership width and lot areas as required by the MD State Dept. of health & Mental Hygiene.
2. ☒ This area designates a private sewerage easement of approximately 10,000 sq. ft. as required by the Maryland State Department of Health and Mental Hygiene for individual sewage disposal. Improvements of any nature in this area are retricted until public sewage is available and servicing any residential structure constructed on this site. This easement shall become null and void upon connection to a public sewerage system.
3. △ Perculation tests have been field located.

Perc Certification

TITLE: "FARSIDE" Lot #60 Record Plat #4410
Sheet 6 of 10 3rd Election District
Howard County, Maryland

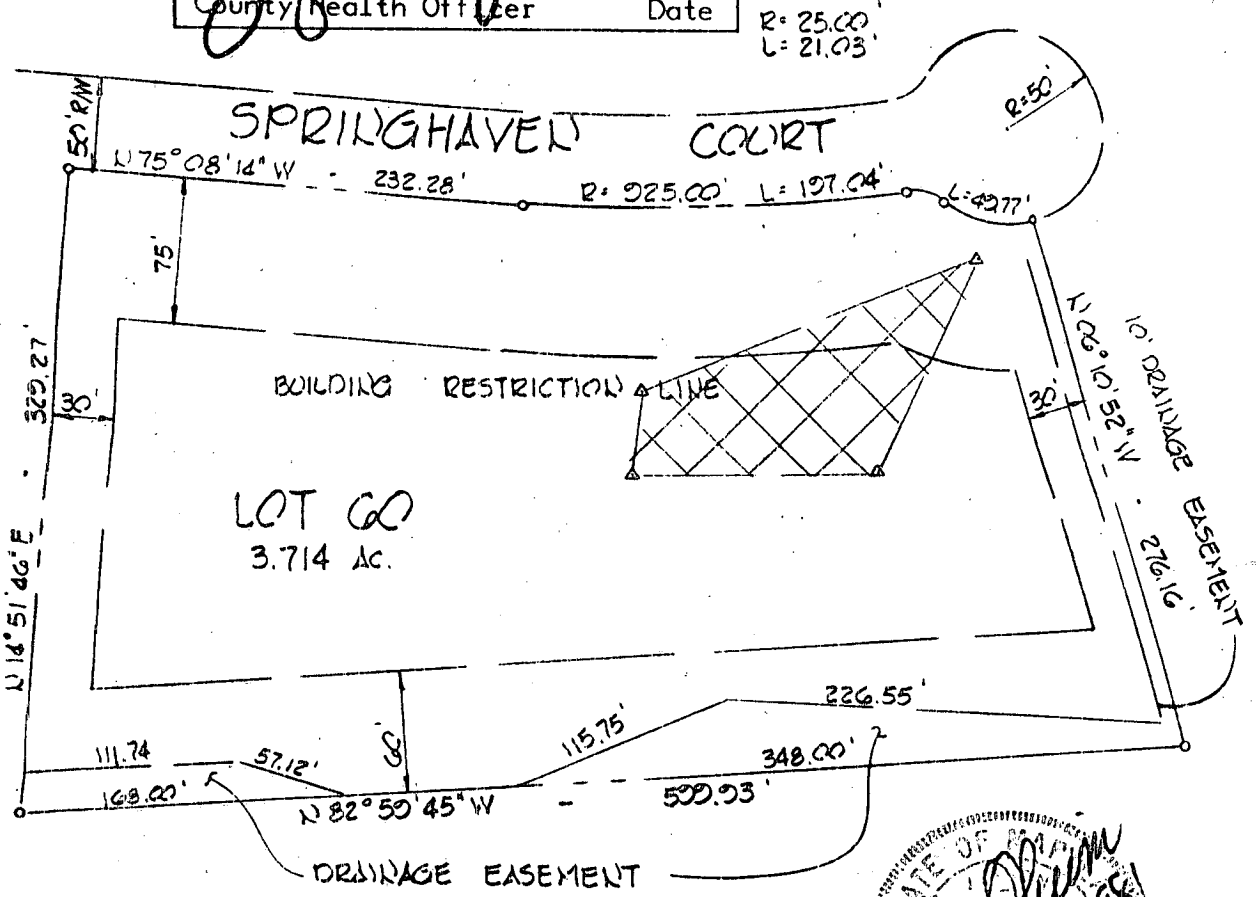
YDINGS HEIM
ASSOCIATES INC.
CONSULTING ENGINEERS LAND & CONSTRUCTION SURVEYORS
8370 COURT AVENUE, ELLICOTT CITY, MD. 21043 465-0660

5/1/81
original sent to Dr Boyd
for Signature
S. S.


EXISTING PAVING
SPRINGHAVEN COURT
S75°08'14"E 232.28'
1" OAK
1" OAK
POST LIGHT
POST LIGHT
SPOT LIGHT ON HOUSE
ASPHALT DRIVEWAY
3' FLAGSTONE WALK
POST LIGHT
POST LIGHT
3' FLAGSTONE WALK
105'
105'
BRL
5/1/81
Well site as revised O.K. F.S.
GARAGE +419.83
F.F. 421
BSMT. 412
+421 DECK
CLUMP OF CHERRY & DOGWOOD
SEPTIC FIELD
APPROXIMATE WELL LOCATION
6" TRIPLE MAPLE
POOL
LOT 60, FARSIDE, PLAT #4410
3.714 ± ACRES
3RD ELECTION DISTRICT, HOWARD CO., MD.
N14°15'46"E 325.27'
30'
BRL
110-73-3897
404
402
SPOT LIGHT ON TREE TOPS 400
498
BRL
SPOT LIGHT ON TREE TOPS
SPOT LIGHT ON TREE TOPS
RIEDY RESIDENCE
PRELIMINARY
N76°43'54"E 226.55'
SITE PLAN
SCALE: 1" = 30'
N78°15'23"E 115.75'
DRAINAGE EASEMENT
348.00'
ROBERT KAPLAN & ASSOCIATES
AIA ARCHITECTS, PLANNERS
OLIVER'S CARRIAGE HOUSE
5410 LEAF TREADER WAY
COLUMBIA, MARYLAND 21044
N82°59'45"W 599.93'
N82°59'45"W 111.74'
DRAINAGE EASEMENT
60'
992-6080

APPROVED : For private water and private sewerage systems.
Howard County Health Department

County Health Officer — Date 5-1-81



1. The lots shown hereon comply with the minimum ownership width and lot areas as required by the MD State Dept. of health & Mental Hygiene.
2. ⊠ This area designates a private sewerage easement of approximately 10,000 sq. ft. as required by the Maryland State Department of Health and Mental Hygiene for individual sewage disposal. Improvements of any nature in this area are restricted until public sewage is available and servicing any residential structure constructed on this site. This easement shall become null and void upon connection to a public sewerage system.
3. △ Perculation tests have been field located.

Perc. Certification

TITLE: "FARSIDE" Lot #60 Record Plat #4410
Sheet 6 of 10 3rd Election District
Howard County, Maryland

LYDINGS HEIM ASSOCIATES INC.
CONSULTING ENGINEERS LAND & CONSTRUCTION SURVEYORS
8370 COURT AVENUE, ELLICOTT CITY, MD. 21043 465-0660

C 1 | 8265 | SEQUENCE NO. (WRA 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 30 DAYS AFTER WELL IS COMPLETED

COUNTY NUMBER A 31216

Date Received (WRA use only) 6/30/81

DATE WELL COMPLETED

Depth of Well 145 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" H0-73-3897

OWNER Woodmack Inc (last name / first name)

STREET OR RFD Spring haven Court TOWN Columbia

SUBDIVISION Farside SECTION LOT 630

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	
Brown Shale	2	8	
Brown Sandstone	8	22	
Blue Slate	22	80	
Blue Slate	80	85	J15
Blue Slate	85	145	

GROUTING RECORD
WELL HAS BEEN GROUTED (Circle Appropriate Box) yes Y / no N

TYPE OF GROUTING MATERIAL

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 5 NO. OF POUNDS 470

GALLONS OF WATER 30

DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 20 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	24

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

C 2 (seq. no.)

EACH SCREEN		DEPTH (nearest ft.)	
1	HO	20	145
2			
3			

SLOT SIZE 1 ____ 2 ____ 3 ____

DIAMETER OF SCREEN ____ (NEAREST INCH)

from ____ to ____

GRAVEL PACK ____ ____

IF WELL DRILLED WAS FLOWING WELL CIRCLE BOX F

C 3 (seq no.)

PUMPING TEST
HOURS PUMPED (nearest hour) 2

PUMPING RATE (gal. per min. to nearest gal.) 15

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 30

WHEN PUMPING 145

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 APPROPRIATE BOX) YES Y / NO N

IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE

TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: (A, C, J, P, R, S, T, O)

CAPACITY: GALLONS PER MINUTE (to nearest gallon)

PUMP HORSE POWER

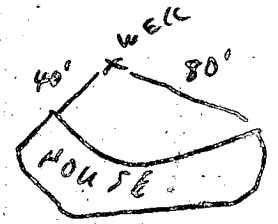
PUMP COLUMN LENGTH (nearest ft.)

CASING HEIGHT (circle appropriate box and enter casing height)

above / below — 2 (nearest foot) — LAND SURFACE

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)

N



CIRCLE APPROPRIATE BOX
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 I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CAPTIONED "PERMIT TO DRILL WELL", AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

DRILLERS IDENT. NO. 308

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

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

T (E.R.O.S.) W Q

TELESCOPE CASING — LOG INDICATOR — OTHER DATA

HEALTH

EMERGENCY / TEMP NO. IF ANY

B 1 6914 SEQUENCE NO. WRA USE ONLY
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
please print or type

WRA PERMIT NUMBER HO-73-3897
fill in this form completely

DATE RECEIVED 6/30/81 9:30 — 4/30/81 (WRA USE ONLY)

OWNER INFORMATION

Woodmark Inc.
LAST NAME OWNER FIRST NAME

12150 Mt. Albert Ct.
STREET OR RFD

Ellicott City Md.
TOWN STATE ZIP

B 1 CONTINUED

DRILLER INFORMATION

Stanley W. Bollinger Jr. 308
DRILLER'S NAME LICENSE NO.

Stanley W. Bollinger Jr. 4/29/81
SIGNATURE DATE

WELL INFORMATION

B 2

APPROX. PUMPING RATE (GAL. PER MIN) 5

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)

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

APPROXIMATE DEPTH OF WELL 165 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
- [D] THIS WELL WILL DEEPEN AN EXISTING WELL

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

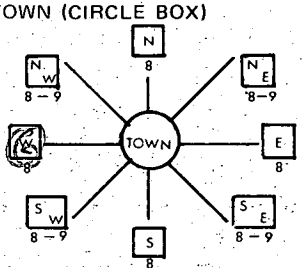
LOCATION OF WELL

B 3

COUNTY Howard
SUBDIVISION Fawside
SECTION LOT 60
NEAREST TOWN Columbia
MILES FROM TOWN (enter 0 if in town) 3 M I

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Springhaven Ct.
NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH WEST EAST SOUTH

80 FT
DISTANCE FROM ROAD (CIRCLE APPROPRIATE BOX) MI

SHOW LOCATION OF WELL WITH AN "X" IN THIS BOX →

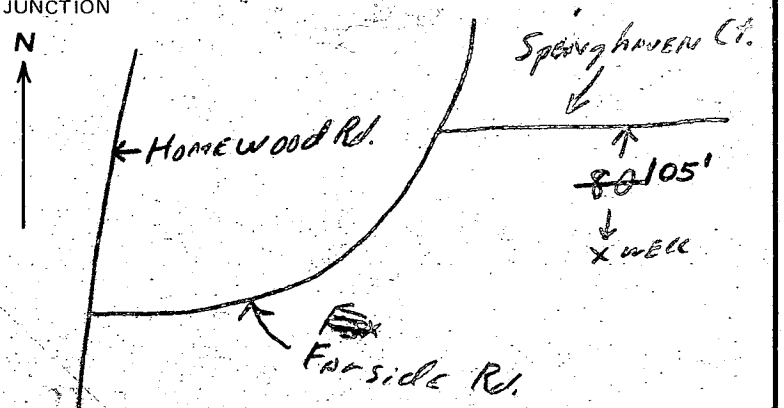
24' - Casing
1' - above gr.
20' - open
5 - bags cement
6/30/81 X WELL

WRITE THE BOX NUMBER FROM THE MAP HERE →

E 820 6
N 510 3

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



B 4

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

HOWARD — COUNTY NAME
A 31216 — COUNTY NO.

EHA SIGNATURE
STATE HEALTH CIRCLE BOX [S]

MO 05 DAY 11 YR 81 — Frank Sherman — CO SIGNATURE — 5/11/81 DATE

NORTH GRID 513 000 EAST GRID 0826 000 ELEV. (FT.)

Not to be filled in by driller (WRA USE ONLY)

APPROP. PERMIT NUMBER GAP

FORCE WRITE INITIALS IN BOX CONDITIONS A E N S G W Q C L U — ✓ ✓

B 5 SPECIAL CONDITIONS (WRA USE ONLY)

HEALTH

PLOT PLAN

OWNER Mr & Mrs Bob Reidy

Application No. _____

ADDRESS 11730 Springhaven Ct

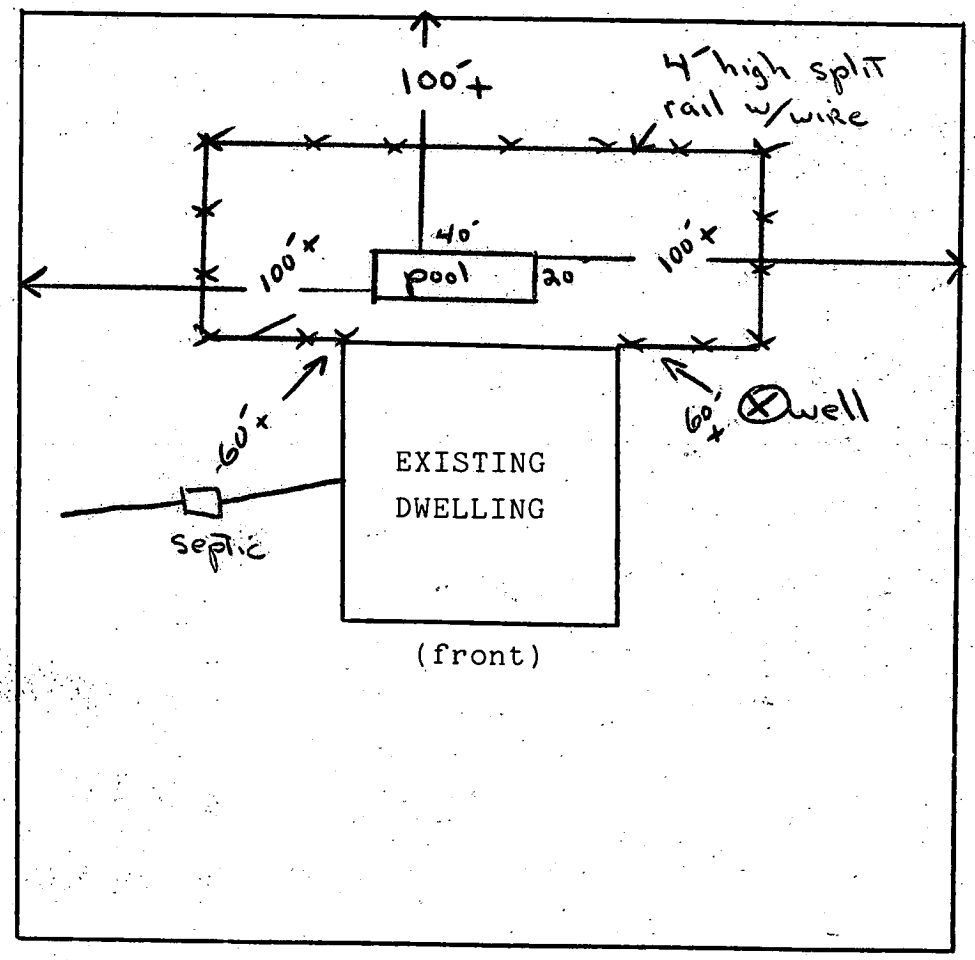
PLEASE SHOW BELOW:

- property line dimensions and easements.
- existing buildings.
- existing well/septic. (show distance to nearest structure)
- road names and location of alleys.
- if your property is in a tidal or riverine flood area, indicate elevation of lowest floor of proposed work.
- the proposed work and the setback distances to the proposed work.

Front yard setback _____ Left side setback _____

Rear yard setback _____ Right side setback _____

NOTE: If a fence is to be closer than 2 feet to any existing fence or wall, adequate access must be provided for maintenance.



6/17/83
OK ISIGN/
PERMIT
RH

ROAD NAME Springhaven Ct.

10/82

SITE PLAN LOT 60 FARSIDE

SCALE: 1"=30' PLAT. #4410, 3RD ELECTION DISTRICT
HOWARD COUNTY, MARYLAND.

CONTRACTOR
JOHN McDONOUGH BUILDERS, INC.
5829 BANNEKER ROAD
COLUMBIA, MD. 21044

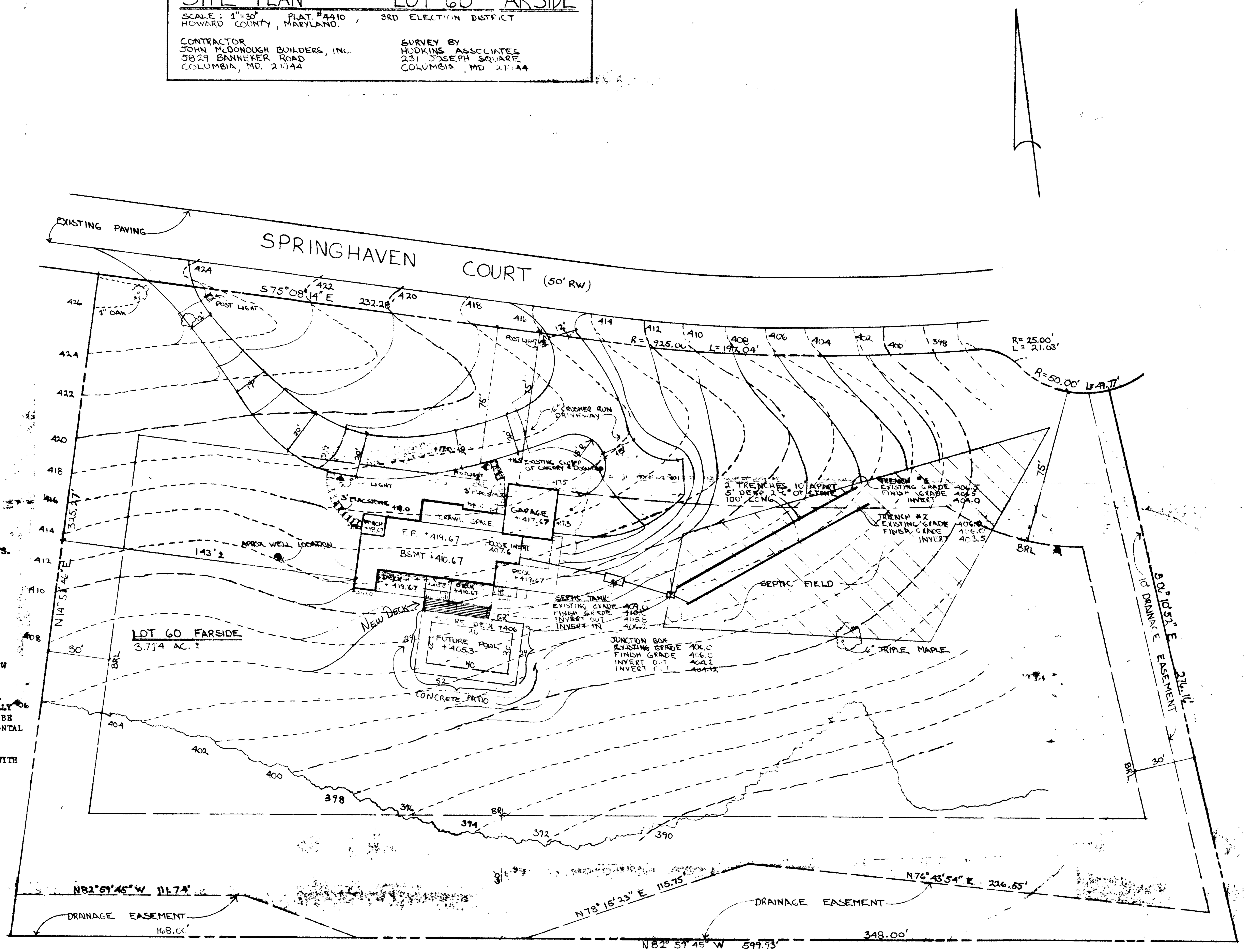
SURVEY BY
HUDKINS ASSOCIATES
231 JOSEPH SQUARE
COLUMBIA, MD 21044

GENERAL NOTES

1. 2500 PSI SOIL BEARING ASSUMED. CONTRACTOR TO SEEK APPROPRIATE ENGINEERING ADVICE IF CONDITIONS WARRANT.
2. CONCRETE SLABS TO BE ON UNDISTURBED SOIL OR COMPACTED FILL. OTHER CONDITIONS MAY REQUIRE ALTERNATIVE DESIGN NOT SHOWN, AT THE CONTRACTOR'S OPTION AND RESPONSOBITY.
3. 8" THICK CMU WALLS TO HAVE MAX. 4'-0" RETAINAGE.
4. STEP FOOTINGS MAX. VERTICAL 2'-0", MIN. HORIZONTAL 4'-0".
5. SILL PLATES TO BE SUITIBLY ANCHORED TO MASONRY WITH STRAPS OR ANCHOR BOLTS IMBEDDED IN CONCRETE 4'-0" O.C.
6. DIMENSIONS GOVERN OVER SCALE.
7. CODES GOVERN OVER DRAWINGS.
8. VERIFY ALL MECHANICAL REQUIREMENTS BEFORE FRAMING.
9. WINDOW NUMBERS REFER TO ANDERSON UNLESS OTHERWISE NOTED.

STRUCTURAL NOTES

1. FOUNDATION:
   - A. FOOTINGS SHALL BEAR ON UNDISTURBED SOIL A MINIMUM OF 2'-6" BELOW FINISHED GRADE AND 1' BELOW ORIGINAL GRADE.
   - B. BACKFILL SHALL NOT BE PLACED UNTIL SUB-FLOOR IS IN PLACE.
2. CONCRETE:
   - A. CONCRETE SHALL BE PROPORTIONED TO DEVELOP COMPRESSIVE STRENGTH OF 3,000 PSI IN 28 DAYS.
   - B. 6 X 6 #10/10 WIRE MESH SHALL BE PLACED IN ALL SLABS ON GRADE UNLESS NOTED OTHERWISE. LAPS SHALL BE A MINIMUM OF 6".
3. MASONRY:
   - A. ALL MORTAR IN FOUNDATIONS SHALL BE TYPE S PER BOCA BASIC BUILDING CODE, SECTION 816. IT SHALL DEVELOP COMPRESSIVE STRENGTH OF 1,800 PSI IN 28 DAYS.
   - B. MASONRY WALL REINFORCING SHALL BE STANDARD GAGE DUR-O-WAL, GALVANIZED, LAID IN EVERY SECOND BED JOINT EXCEPT WHERE NOTED OTHERWISE. TWO CONSECUTIVE JOINTS ABOVE AND BELOW OPENINGS AND TOP THREE COURSES OF ALL WALLS SHALL ALSO BE REINFORCED.
   - C. WHEN DIFFERENTIAL FILL AGAINST OPPOSITE SIDES OF A 12" CONCRETE BLOCK FOUNDATION WALL EXCEEDS 7' AND DOES NOT EXCEED 9', WALL SHALL BE REINFORCED WITH #4 BARS SET VERTICALLY IN CELLS, SPACED 16" APART NEAR THE FACE ON THE LOWER GRADE SIDE. BLOCK CELLS SHALL BE FILLED WITH TYPE S MORTAR. BAR SPLICES SHALL LAP A MINIMUM OF 24". REINFORCE HORIZONTAL JOINTS WITH DUR-O-WAL EVERY COURSE.
   - D. WHEN DIFFERENTIAL FILL EXCEEDS 9' BUT DOES NOT EXCEED 11', WALL SHALL BE REINFORCED WITH #6 BARS SPACED 16" APART AS IN C ABOVE.
4. STRUCTURAL WOOD
   - A. FRAMING LUMBER SHALL BE HEM FIR #2 OR SOUTHERN YELLOW PINE OR EQUAL
   - B. DECK FRAMING AND PLANKING TO BE PRESSURE TREATED.



Robert Kaplan & Associates AIA Architects
Olivers Carriage House, 5410 Leaftreader Way
Columbia, Md. 21044 301-596-5221

date 6/12/81
revised 7/17/81
drawn by MDB

RIEDY RESIDENCE

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