

7-22-86
AM

PERMIT

7/23/86
septic OK
BEN

P 37391
A 37147

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

BUREAU OF ENVIRONMENTAL HEALTH

DISTRICT _____

~~XX992233X~~

461-9933

DATE 7/21/86

A & B Luck Plumbing and Heating, Inc. IS PERMITTED TO INSTALL X ALTER _____

ADDRESS 9872 Main Street, Damascus, Maryland 20872 PHONE _____

SUBDIVISION _____ ROAD 3211 Route 94 LOT _____

PROPERTY OWNER Dennis Potts

ADDRESS _____

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES _____ NO X

BATHROOM IN POLE BARN WITH HORSES

SEPTIC TANK CAPACITY _____ GALLONS NUMBER OF BEDROOMS _____

TRENCHES - 350 sq. ft. TOTAL. Trench to be 2 feet wide. Inlet 3 1/2 feet below original grade. Bottom maximum depth 7 feet below original grade. Effective area begins at 3 1/2 feet below original grade. 3 1/2 feet of stone below distribution pipe.

LOCATION - One 100' trench required. Start trench at high perc hole (Centrally located relative to pole barn). This is approximately 100 feet from left corner of barn and 87 feet from barn (as seen when facing barn from perc field). Run trench on contour toward other high perc hole (located = 125 feet from starting hole).

NOTE - Call for inspection of trench before and after gravel is installed. Provide 6" -8" diameter cleanout and cap to grade or above on septic tank.

PLANS APPROVED BY B. Nixon DATE 7/17/86

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 AND AFTER PLACING GRAVEL IN TRENCH.

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 40 PVC OR ABS.

PERMIT VOID AFTER THREE YEARS.

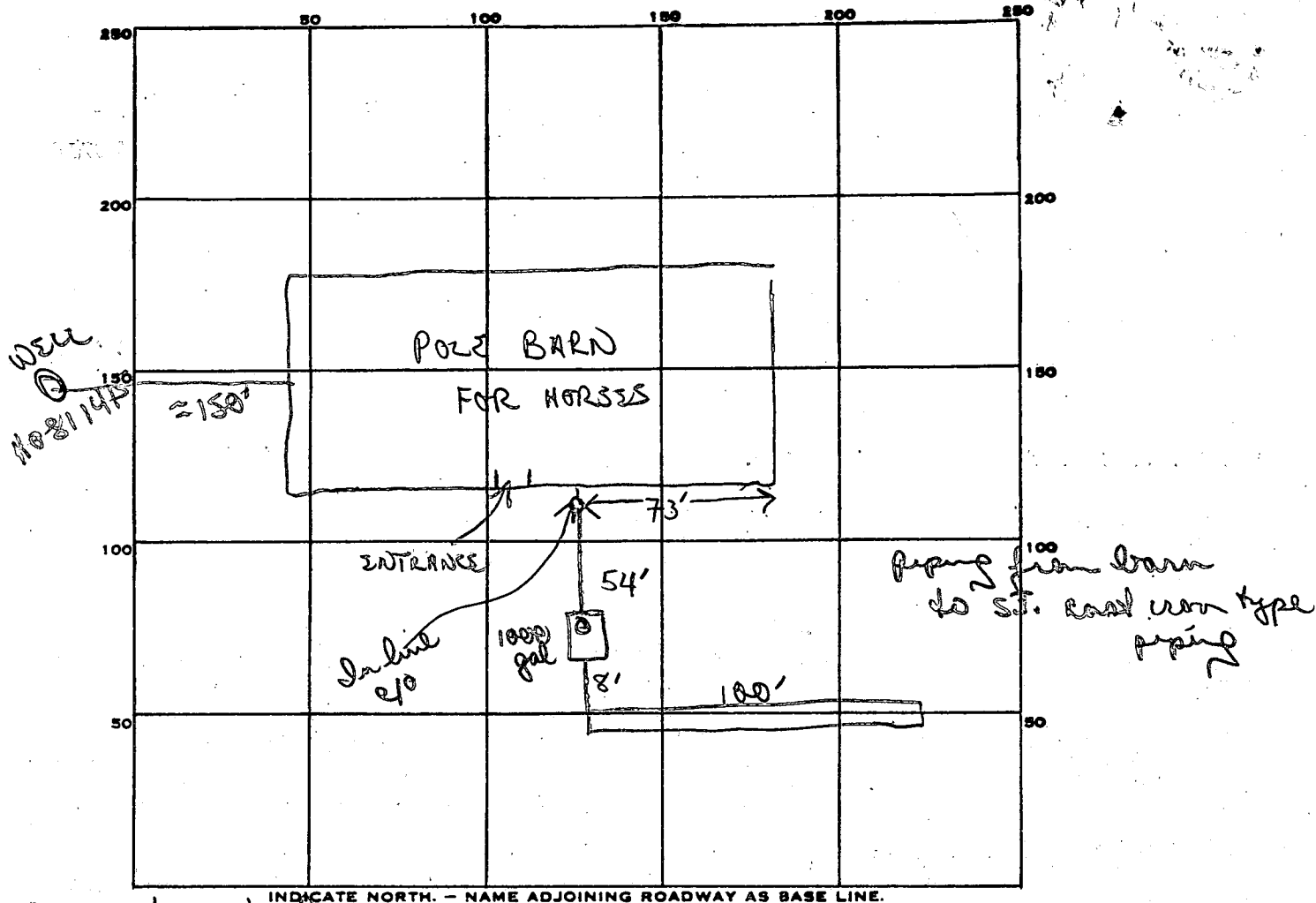
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

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

***CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.**

EH - 2-1082

A 37147



PERMIT CARD

SEPTIC TANK, LEVEL

DISTRIBUTION BOX, LEVEL

TILE FIELD, DEPTH

7

FT.

TRENCH WIDTH

2

FT.

GRAVEL DEPTH

3 1/2

IN.

TOTAL LENGTH

100

FT.

NUMBER OF TRENCHES

1

1 SIDE WALL
TOTAL BOTTOM AREA

350

SEEPAGE PITS, INSIDE DIAMETER

FT.

DEPTH BELOW INLET

FT.

ABSORBENT AREA

350

SQ. FT.

REMARKS

7/22/86 Trench location OK. OK to install stone pipe
paper to trench. OK to add piping from barn to tank
& tank to trench.

7/23/86 OK to cover trench & all other work

DATE SYSTEM APPROVED

7/23/86

INSPECTOR

B. Wilson

7/12/86
DENNIS POTTS
3211 RTE 94

A 36739W

SUBDIVISION:

(FOR POLE BARN)

LOT NUMBER:

DRY WELL OR DRY WELL AND TRENCH

_____ sq. ft./bedroom

	Septic Tank	Minimum Total square Feet
3 bedroom	1000 gallon	_____
4 bedroom	1250 gallon	_____
5 bedroom	1500 gallon	_____

Inlet _____ feet below original grade.

Bottom maximum depth _____ feet below original grade.

Effective area begins at _____ feet below original grade.

NOTE: If trench is used to make up absorbent area, run the trench on level ground and leave a 5 foot earth buffer between dry well and trench. No trench is to exceed 100 feet in length. Trench inlet to be same as dry well, with _____ feet of stone below distribution pipe.

TRENCHES

BATHROOM IN POLE BARN

350 sq. ft. ~~2 bedroom~~ (w/ HORSES)

(TOTAL)

Trench to be 2 wide.

Inlet 3 1/2 feet below original grade.

Bottom maximum depth 7 feet below original grade.

Effective area begins at 3 1/2 feet below original grade.

3 1/2 feet of stone below distribution pipe.

- NOTE:
- (1) No trench to exceed 100 feet in length.
 - (2) If more than one trench used, a distribution box is required.
 - (3) Trenches to be installed on level ground.
 - (4) Call for inspection of trench before gravel is installed.
 - (5) Provide 6"-8" diameter cleanout and cap to grade or above on septic tank and drywell.
 - (6) If a Garbage disposal is used, increase septic tank capacity by 50% and increase absorbant sidewall area by 22%.

LOCATION: ONE 100' TRENCH REQUIRED. START TRENCH AT HIGH PERC HOLE (CENTRALLY LOCATED RELATIVE TO POLE BARN). THIS IS APPROX 100' FROM LEFT CORNER OF BARN AND 87' FROM BARN (AS SEEN WHEN FACING BARN) FROM PERC FIELD). RUN TRENCH ON CONTOUR TOWARDS OTHER HIGH PERC HOLE (LOCATED ≈ 125' FROM STARTING HOLE).

7/8/86 PM
2:10

APPLICATION

PERCOLATION TESTING

A 37147

P _____

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

DISTRICT _____

DATE 6/11/86

7/16/86
perc test completed
(en)

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 DENNIS POTTS

ADDRESS 3211 Woodbine Rd. # 94 PHONE _____

PROSPECTIVE BUYER N/C

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION MAP 13 PART OF P42 LOT NO. _____

ROAD AND DESCRIPTION Rt 94 South on #94 house number on left side of road.

TAX MAP _____ PARCEL # _____

SIZE OF LOT _____ TYPE BLDG. HORSE STABLE
(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. ABB LUCK P/H INC. Allward Hunt
(SIGNATURE OF APPLICANT)

APPROVED BY B. Wilson FOR Pole barn Septer field DATE 7/17/86

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS 7/16 DATE _____

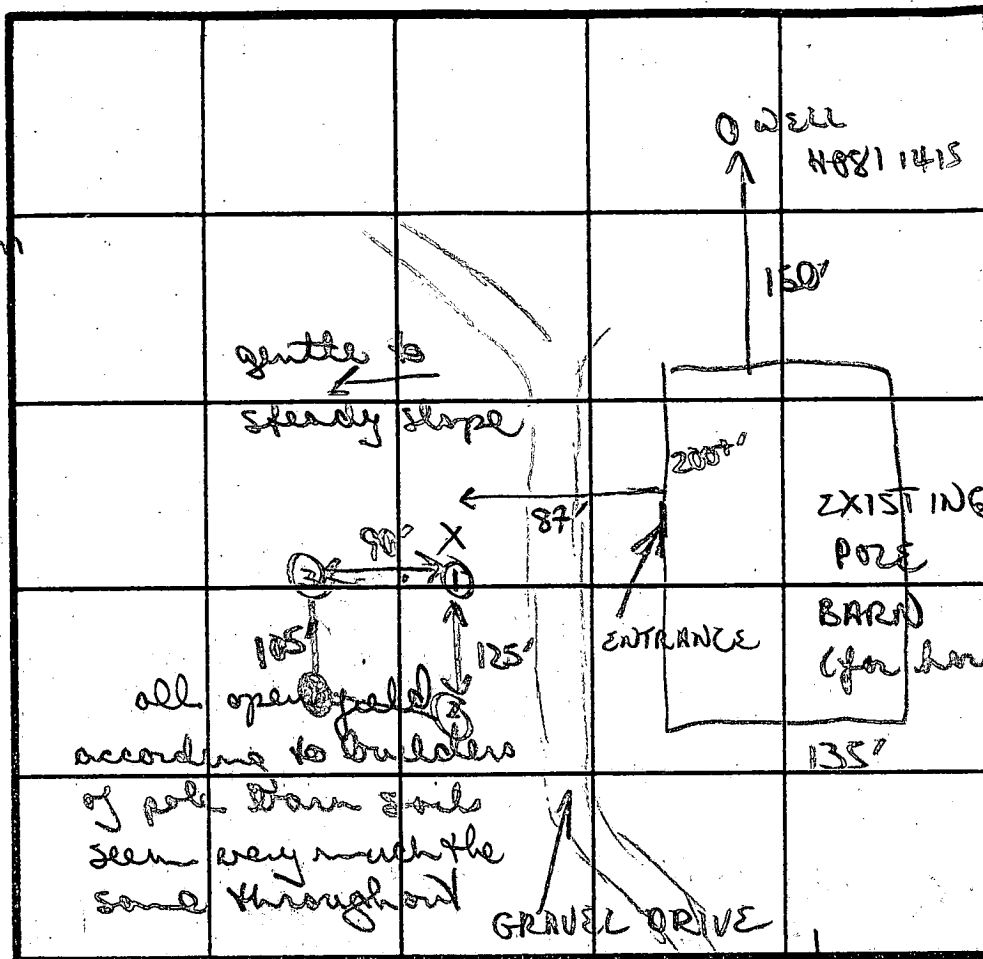
REASONS FOR REJECTION OR HOLDING for verified plat +/or OK'd approval

7/17/86 Plat will not be reg'd. Drawing sufficient

THIS IS NOT A PERMIT

①
SOIL PROFILE

orange brown
to yellow
brown clay
- 3/4' loam
powdery
red brown
loam
5% small
frags
saprolite
↓
10 1/2 - 11'



④
yellow brown
clay
4 1/2' silty, dry
powdery
loam w/
clay smear
+ 5-10%
small
frag sapro.
10 1/2'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

↓ TO RTE 94 1200'

②
orange/yellow
clay to clay
loam
purple/orange
powdery
silty loam
w/ 5% - 20%
saprolite
frags
11'

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
7/8/86	①	4' S	214	217	217	220	3min
		10' D	222	227	227	235	8min
		11' bottom (see profile)					
	②	3' S	105	115	115	131	16min
		6 1/2' M	1249	1253	1253	100	8min
		11' bottom (see profile)					
	③	3 1/2' S	112	114	114	117	3min
		10 1/2' D					
		bottom (see profile)					
	④	4' S	1255	100	100	106	6min
		10 1/2' D					
		bottom (see profile)					

③
orange/brown
clay loam
silty/powdery
loam - 5%
small frag
saprolite
10 1/2' D

REMARKS: 7/8 Only had 1 hole dug 7/16/86 others dug along red brown clay loam - 3/2; powdery silty loam
TYPE OF SOIL: w/ 5-10% small saprolite
TESTED BY: B. Wylor
ALSO PRESENT: [Signature]

B 1	1296	SEQUENCE NO. (OEP USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL	OEP PERMIT NUMBER
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)		5/5/85 please print or type		
Date Received <u>10:00 AM</u> OWNER INFORMATION 15 Last Name <u>DONN</u> Owner First Name <u>JOHN</u> 36 Street or RFD <u>WOODRIDGE RD</u> 57 Town <u>MT AIRY</u> 70 State <u>MD</u> 72 Zip <u>21771</u>		LOCATION OF WELL 8 COUNTY <u>ST. MARY'S</u> 21 23 SUBDIVISION <u>ARTS QU</u> 42 SECTION <u>44</u> 46 LOT <u>48</u> 50 52 NEAREST TOWN <u>MT AIRY</u> 71 MILES FROM TOWN (enter 0 if in town) <u>3</u> 73 <u>MI</u> 76 77 78		
DRILLER INFORMATION Driller's Name <u>George F. Easterday</u> 77 License No. 80 <u>40</u> Firm Name <u>G. F. Easterday, Inc.</u> Address <u>9265 Brown Church Rd., Mt. Airy, Md. 21771</u> Signature <u>[Signature]</u> Date <u>5/5/85</u>				
WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) <u>5</u> 8 <u>12</u> AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <u>500</u> 14 <u>20</u>				
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="checkbox"/> P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input type="checkbox"/> T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)				
APPROXIMATE DEPTH OF WELL <u>20</u> 24 <u>28</u> FEET APPROXIMATE DIAMETER OF WELL <u>6</u> INCH METHOD OF DRILLING (circle one) <input checked="" type="checkbox"/> BORED (or Augered) <input type="checkbox"/> JETTED <input type="checkbox"/> Jetted & DRIVEN <input checked="" type="checkbox"/> AIR-ROTARY <input type="checkbox"/> AIR-PERCussion <input type="checkbox"/> ROTARY (Hydraulic Rotary) <input type="checkbox"/> CABLE <input type="checkbox"/> REVERSE-ROTARY <input type="checkbox"/> DRIVE-POINT other _____				
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> N THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <input type="checkbox"/> S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY <input type="checkbox"/> D THIS WELL WILL DEEPM AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52 _____				
Not to be filled in by driller (OEP USE ONLY) APPROP. PERMIT NUMBER _____ 54 _____ GAP _____ 63 FORCE <u>60</u> WRITE INITIALS PERMIT NO. <u>MD-91-1415</u> 67 68 IN BOX 70 71 72 73 74 75 76 77 78 79				
SPECIAL CONDITIONS				

B 3

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

DISTANCE FROM ROAD

ENTER FT or MI

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

COUNTY NAME HOWARD COUNTY NO. A36731-W

OEP SIGNATURE _____ STATE HEALTH INSERT S _____

DATE ISSUED 040891

CO SIGNATURE _____ EXP. DATE _____

NORTH GRID 532000 EAST GRID 076000

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

- well
-
-

WRITE THE BOX NUMBER FROM THE MAP HERE

E 71 6
 N 1 2

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

A+BLucky

301

253

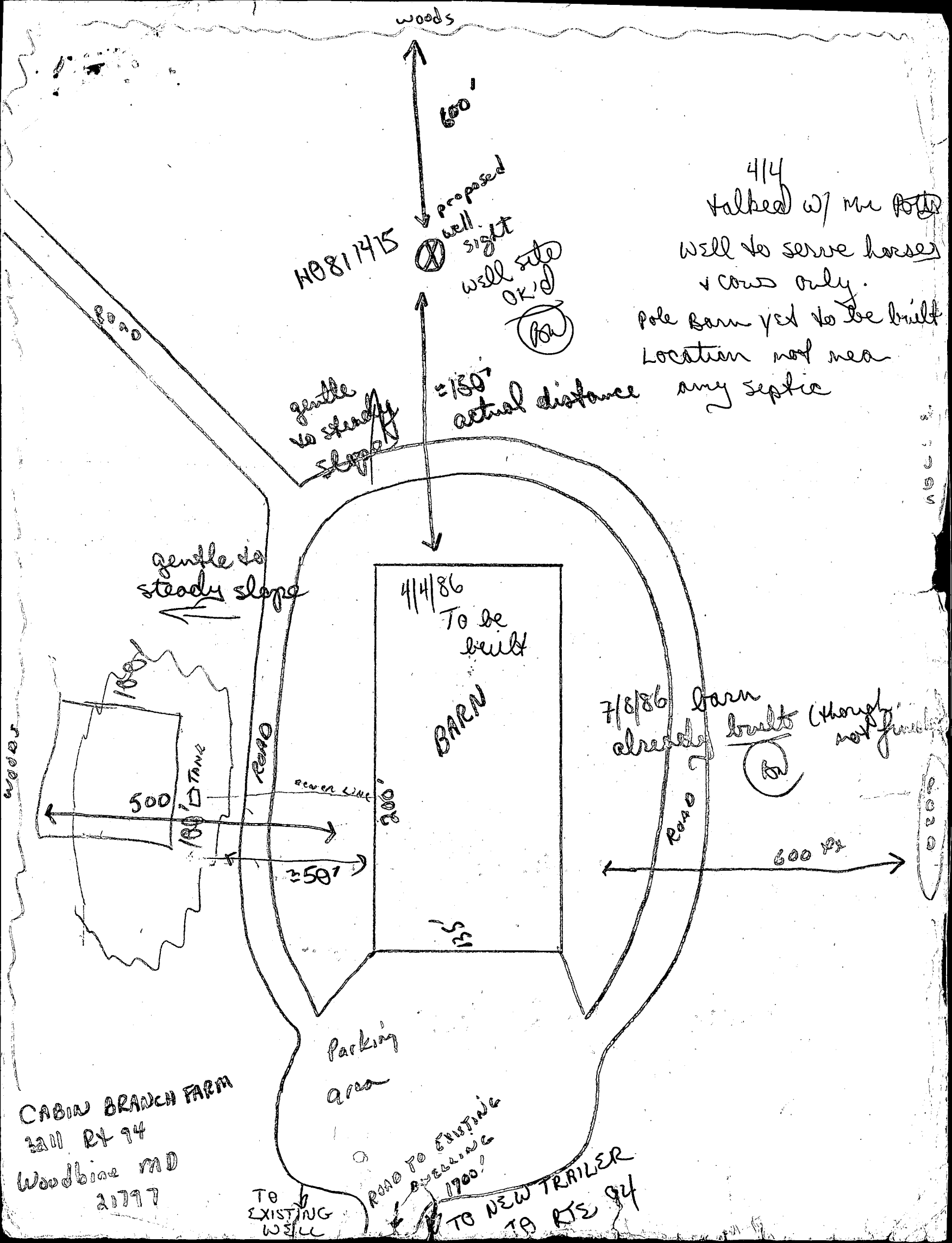
5283

Leonard

Motley

RECEIVED
HOWARD COUNTY
HEALTH DEPT.
APR 27 4 54 PM '81
DIVISION OF
ENVIRONMENTAL
HEALTH

C1 00491		SEQUENCE NO. (OEP 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.			
1 2 3 6 (THIS NUMBER IS TO BE PUNCHED IN COLS 3-6 ON ALL CARDS)								COUNTY NUMBER A 36739-W			
DATE Received 8 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 13		DATE WELL COMPLETED 15 050586 20		Depth of Well 22 200 26 (TO NEAREST FOOT)				PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-81-1415 28 29 30 31 32 33 34 35 36 37			
OWNER POTTS last name		DEWIS first name		TOWN FLORENCE							
STREET OR RFD 321 RTZ 94		SUBDIVISION MAD 13 PART OF P.42		SECTION				LOT			
WELL LOG Not required for driven wells				GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE CLAY BC NO. OF BAGS 16 NO. OF POUNDS 1600 GALLONS OF WATER 90 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 44 ft. (enter 0 if from surface)				C 3 1 2 PUMPING TEST HOURS PUMPED (nearest hour) 8 PUMPING RATE (gal. per min. to nearest gal.) 8 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 50 WHEN PUMPING 299 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		DESCRIPTION (Use additional sheets if needed)		FEET FROM TO		Check if water bearing		CASING RECORD casing types insert appropriate code below ST CO STEEL CONCRETE PL OT PLASTIC OTHER MAIN CASING TYPE S+ Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 80 OTHER CASING (if used) diameter inch from to			
Topsoil		0		1				SCREEN RECORD screen type or open hole insert appropriate code below ST BR HO STEEL BRASS OPEN HOLE PL OT PLASTIC OTHER C 2 1 2 DEPTH (nearest ft.) H 0 78 200 EACH SCREEN 1 8 9 11 15 17 21 2 23 24 26 30 32 36 3 38 39 41 45 47 51			
Red shale		1		5				SCREEN TYPE OR OPEN HOLE insert appropriate code below ST BR HO STEEL BRASS OPEN HOLE PL OT PLASTIC OTHER			
brown shale		5		70				SLOT SIZE 1 2 3 DIAMETER OF SCREEN 56 (NEAREST INCH) 60			
brown slate		70		85				GRAVEL PACK from to IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68			
blue slate		85		110				OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) WQ 70 <input type="checkbox"/> 72 <input type="checkbox"/> 74 <input type="checkbox"/> 75 <input type="checkbox"/> 76 <input type="checkbox"/> TELESCOPE CASING LOG INDICATOR OTHER DATA			
brown slate		110		120				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) 30' 130' well barren pad			
blue slate		120		200							
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 10.17.13 "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 IDENT. NO. 40		DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) Robert K. Neuhues		SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)			



H0811415

proposed well sight well site OK'd
(Ba)

actual distance $\approx 130'$

gentle to steady slope

gentle to steady slope

4/4/86 To be built

BARN

7/8/86 barn already built (though not finished)
(Ba)

CABIN BRANCH FARM
3211 RT 94
Woodbine MD
21797

TO EXISTING WELL

ROAD TO EXISTING WELL 1700'

TO NEW TRAILER TO RT 94

4/4
talked w/ Mr. [unclear]
well to serve horses & cows only.
pole barn yet to be built
Location not near any septic

APPLICATION

HOWARD COUNTY

PERMIT APPLICATION

SERIAL NUMBER

68106

DEPARTMENT OF PUBLIC WORKS
BUREAU OF INSPECTIONS LICENSES & PERMITS
3430 COURT HOUSE DRIVE, ELICOTT CITY, MARYLAND 21043

BUILDING ADDRESS (HOUSE NO., STREET, TOWN OR AREA)

3211 Woodbine Road

GRADING/SEDIMENT CONTROL ☐ YES ☐ NO

SDP #

DESCRIPTION OF WORK AUTHORIZED

House Trailer

LOT NO. PARCEL NO. SEC. AREA BLOCK NO. LIBER FOLIO

SUB DIVISION ZONE ZONE MAP ELEC. DIST. CENSUS TR.

OWNER'S NAME AND ADDRESS

PHONE NO.

Oakton Associate

OCCUPANT'S NAME AND ADDRESS

PHONE NO.

Dennis L. Pott / Kevin B. Martin

P33-3757

ARCHITECT OR ENGINEER'S NAME AND ADDRESS

PHONE NO.

CONTRACTOR'S NAME AND ADDRESS

PHONE NO.

EXISTING USE

PROPOSED USE

Farm

EST. CONSTRUCTION COST

LICENSE NUMBER

PERMIT FEE

20,000

SIZE OF BLDG. FRONT DEPTH HEIGHT

TYPE OF BLDG. AREA VOLUME ROOF

B. ROOMS

ROOMS

BATHS

FIREPLACES

FOOTINGS

FOUNDATION

S. WALLS

UTILITIES

WATER/WELL SEWER/SEPTIC GAS ELECTRICITY TYPE OF HEAT AC

I have carefully examined and read this application and know the same is true and correct, and that in doing this work, all provisions of Howard County Ordinances and the State Laws of Maryland will be complied with, whether specified or not; and I will notify the Bureau of Inspections, and Permits twenty-four hours in advance when I am ready for the inspections called for elsewhere in this application; and that no work will be covered up until such inspections have been completed with.

SIGNATURE

TITLE

DATE

W/S CODE

FOR OFFICE USE ONLY

DISTANCE IN FEET FROM R/W LINE TO FRONT BUILDING LINE

SIDE YARD

(DISTANCE IN FEET FROM SIDE BLDG. LINE TO SIDE PROPERTY LINE)

DISTANCE IN FEET FROM SIDE STREET R/W LINE

TO SIDE BUILDING LINE

DISTANCE IN FEET, REAR YD. REQUIRING SET

BACK (CORNER LOT ONLY)

CONDITIONS (IF ANY)

SDP #

Checks payable to DIRECTOR OF FINANCE OF HOWARD COUNTY

CAUTION

To begin construction before a permit placard has been issued and displayed on the job is a violation of the law.
Use and occupancy permit must be applied for two weeks before it will be issued

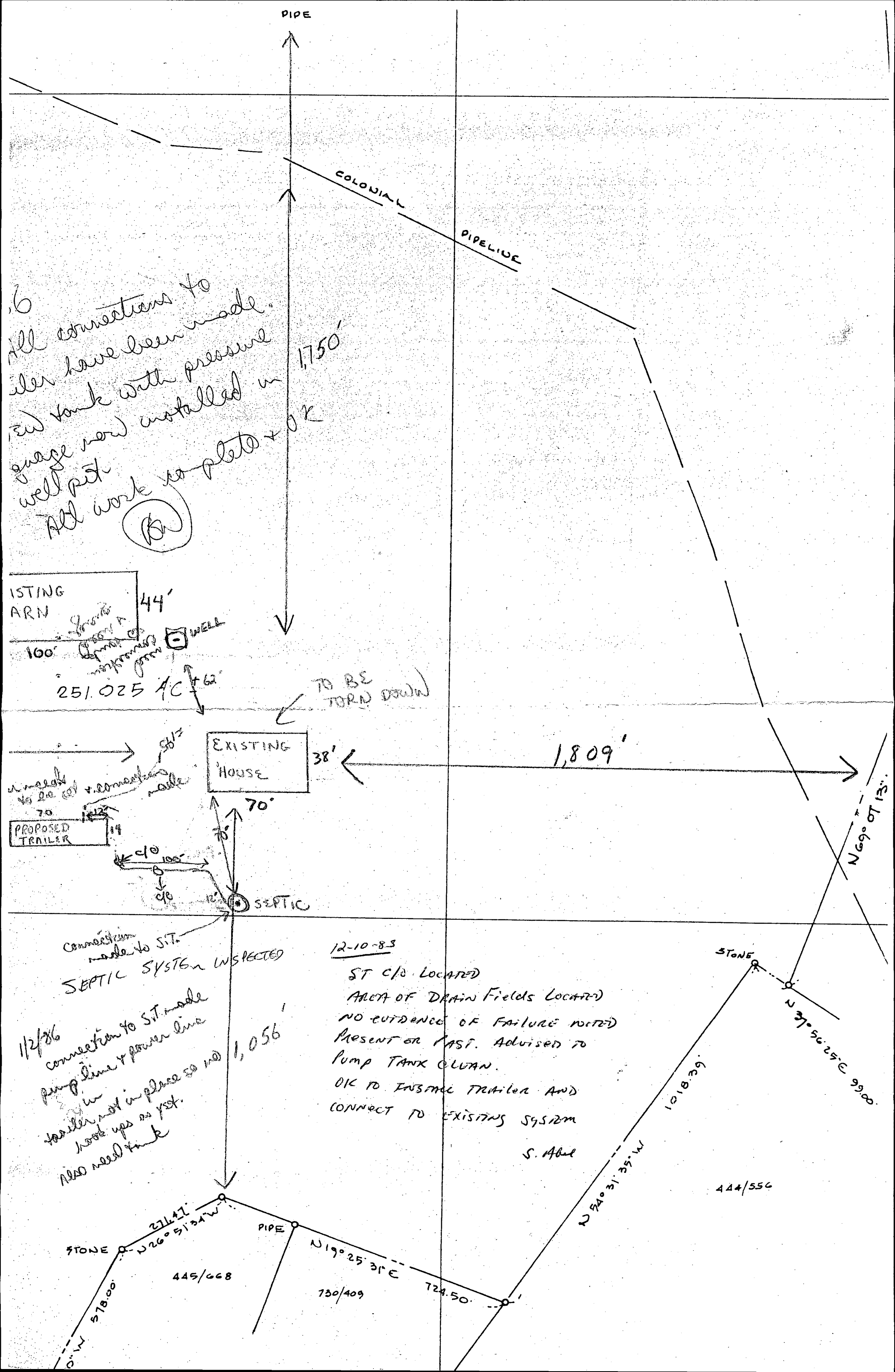
IMPORTANT: PLEASE SHOW ZIP CODES AND
AREA CODES WHEREVER REQUIRED.

FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING		
SHA		
SEDIMENT/GRADING		
BUILDING OFFICIAL		
WATER & SEWER		
HEALTH DEPT.	12/14/85	Craig Miller
FIRE PROTECTION		
STORM WATER MGM.		

APPROVED

DATE

Distribution of Copies:
White - Building Official
Green - Planning & ZoningYellow - Engineering
Pink - Health Dept.
Gold - S.H.A.LP-69
Revised



6
All connections to
iller have been made.
ew tank with pressure
guage now installed in
well pit.
All work to photo + OK
(B)

EXISTING
ARN 44'
100'
251.025 AC + 62'
WELL

EXISTING HOUSE 38'
70'
70'
12'
SEPTIC
PROPOSED TRAILER 14' x 10'
connections made

12-10-83
ST C/O LOCATED
AREA OF DRAIN FIELDS LOCATED
NO EVIDENCE OF FAILURE NOTED
PRESENT OR PAST. ADVISED TO
PUMP TANK CLEAN.
OK TO INSTALL TRAILER AND
CONNECT TO EXISTING SYSTEM
S. Abel
11/2/86
connection to ST made
pump line + power line
in
trailer not in place so no
hook ups as yet.
Also need tank

