

# PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY  
BUREAU OF ENVIRONMENTAL HEALTH  
461-9933

INDEXED

P 39936

A 36489

DISTRICT 4th

DATE 8/25/87

DATE SYSTEM APPROVED 8-25-87

INSPECTOR JEN

Jack Fyock IS PERMITTED TO INSTALL X ALTER

ADDRESS \_\_\_\_\_ PHONE 988-9270

SUBDIVISION Bratton Property ROAD 2178 Route 94 LOT \_\_\_\_\_

PROPERTY OWNER Richard Norwood CRAIG MOORE

ADDRESS \_\_\_\_\_

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

GARBAGE GRINDER? YES \_\_\_\_\_ NO X

SEPTIC TANK CAPACITY 1000 GALLONS NUMBER OF BEDROOMS 3

160  
3  
5 480  
45  
30  
96 ft trench

TRENCHES - 160 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 9 feet below original grade. Effective area begins at 4 feet below original grade. 5 feet of stone below distribution pipe.

LOCATION - Place the distribution box at a point 230 feet from the front (419.55') lot line and 125 feet from the left (652') lot line as seen when facing the property from Route 94. Run trenches on contour toward the left front property corner.

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

OK/SX

PLANS APPROVED BY S. Abel DATE 9/24/86

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: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS.

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(IES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(IES).

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 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 PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES.

BLDG. PERMIT SIGNED

AND RETURNED 4-8-98

Serial # 200110921

detached garage

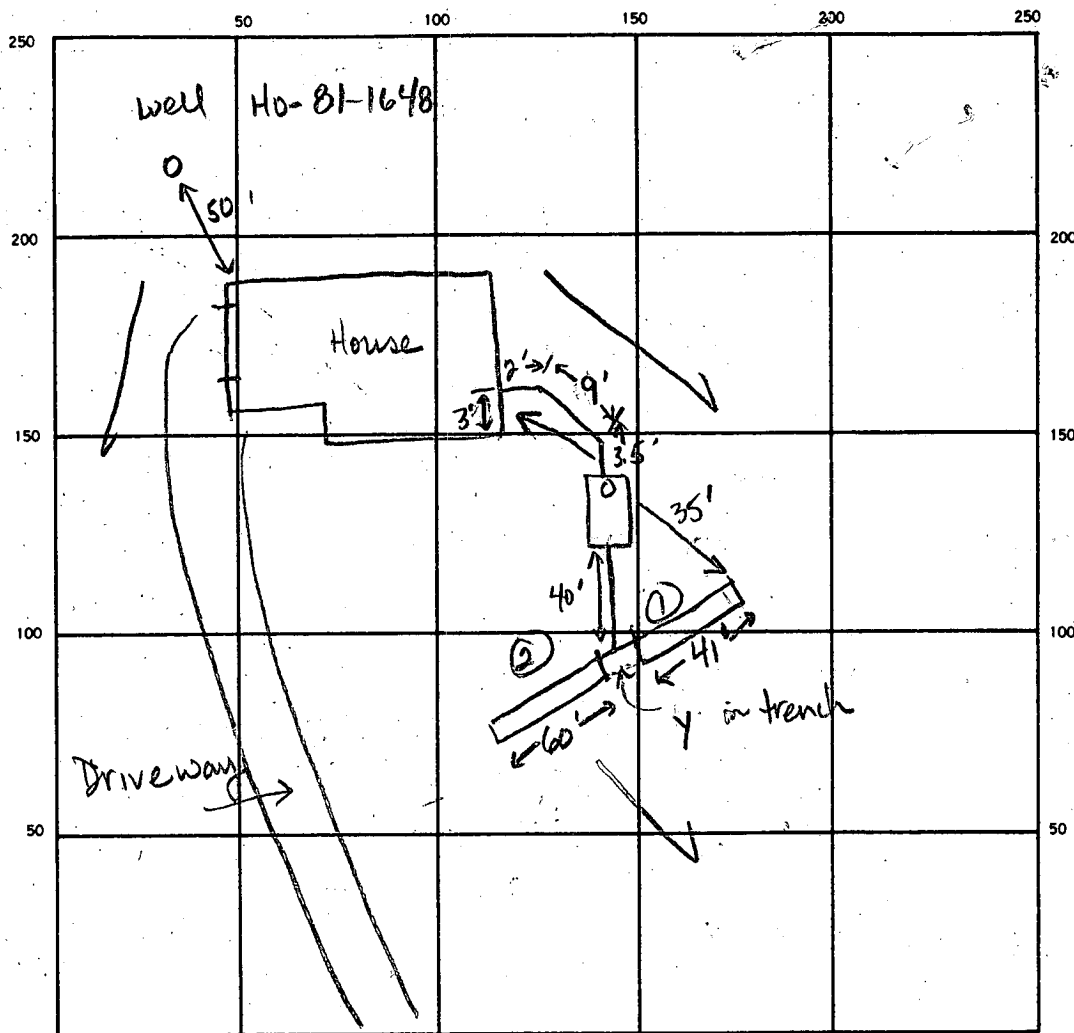
\*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

\*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1186

A 36489

2 pm



INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.

Route 94

SEPTIC TANK. LEVEL 1000 gal CLEANOUTS 1 on Septic Tank

DISTRIBUTION BOX. LEVEL           

DRAIN FIELD TILE FIELD. DEPTH 9 9 FT. TRENCH WIDTH 2 FT. INLET DEPTH 4 4 FT.

EFFECTIVE GRAVEL DEPTH 5 5 FT. TOTAL LENGTH 41 60 FT.

NUMBER OF TRENCHES 2 ONE SIDEWALL BOTTOM AREA 205 300 SQ. FT.

DRYWELL INSIDE DIAMETER            FT. EFFECTIVE DEPTH BELOW INLET            FT.

ABSORBENT AREA 505 SQ. FT.

REMARKS 8-25-87 OK to add stone, pipe and paper to  
trenches SEN, 8-25-87 OK to cover all work.  
House connection not hooked up to plumbing  
inside house. SEN

DATE SYSTEM APPROVED 8-25-87 INSPECTOR Jane E. Nadeau

# APPLICATION

PERCOLATION TESTING

A 3/6/86

P \_\_\_\_\_

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

DISTRICT \_\_\_\_\_

DATE 2/4/86

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 Walter Bratton

ADDRESS # 2178 Route 94 PHONE Norman Weller-489-4200

PROSPECTIVE BUYER RICHARD WOODWARD

ADDRESS Route 94 PHONE \_\_\_\_\_

PROPERTY LOCATION:

SUBDIVISION \_\_\_\_\_ LOT NO. \_\_\_\_\_

ROAD AND DESCRIPTION 3 miles South of Libson

TAX MAP 7 PARCEL # 381

SIZE OF LOT 5 acres TYPE BLDG. 3 or 4 Bedrooms 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. /s/ Bud Arnold-Norman Weller BLDG. PERMIT SIGNED

(SIGNATURE OF APPLICANT) AND RETURNED 9-29-86

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE BP# 73005

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

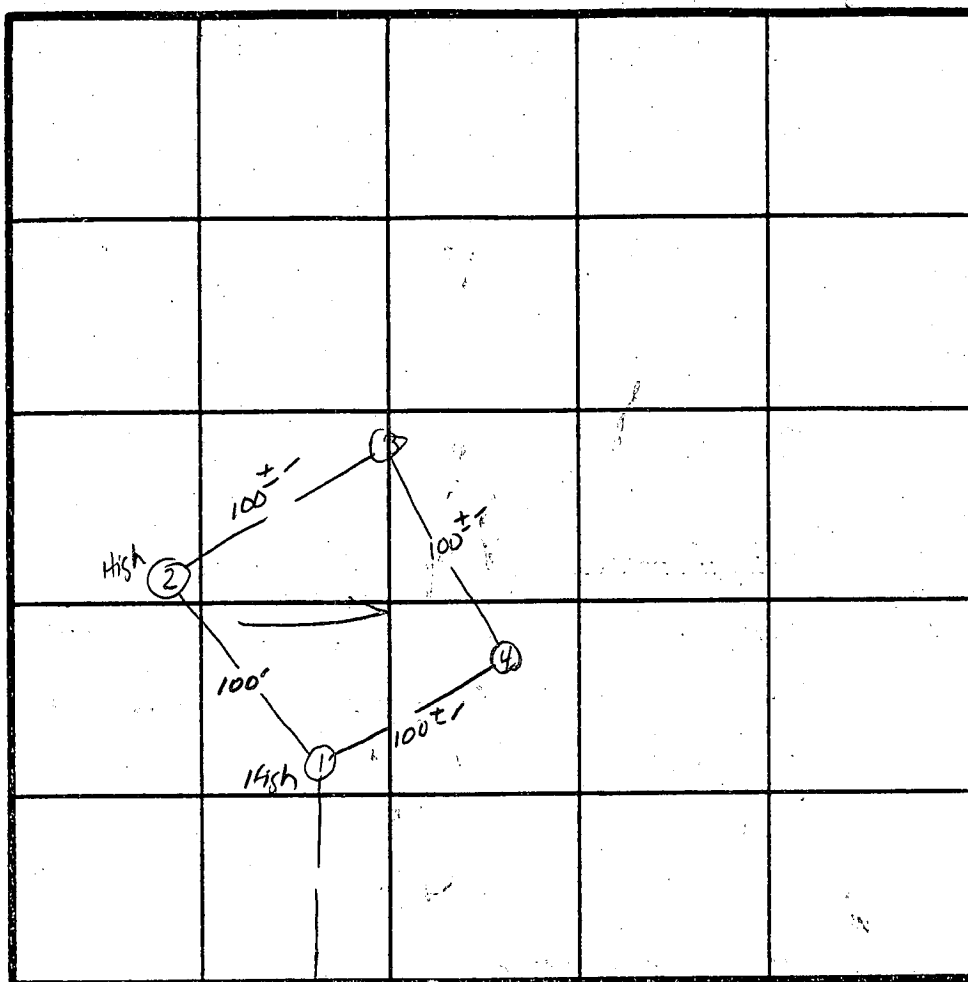
REASONS FOR REJECTION OR HOLDING 2-14-86 PERC. SATISFACTORY; HOLD FOR CERTIFIED HOLD LOCATION  
HOUSE AND WELL SITE; ALL FUTURE REPAIR SYSTEMS MUST BE SHALLOW  
SYSTEM

## THIS IS NOT A PERMIT

① ④

SOIL PROFILE

0'	6"	A1-3
4.0'		BR. yellow CLAY Lm. 2-10% FRAGMENTS
10'		yellow BR SAND LOAM 10-20% COARSE FRAGMENTS
13'		yellow BR SAND LOAM 30-40% SHALE COARSE FRAGMENTS



HOLE  
1+2 ON  
CONTOUR

7 PERC  
7 MIN  
INLET 4'

BOTTOM 9'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

ROW → TO RE 94

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2/14/86	1 S	5'	10:05	10:08	10:08	10:16	8min
	1 M	9'	10:05	10:08	10:08	10:14	6min
	1 V	13'	SEE PROFILE - VARYING SOIL STRUCTURE				
	2 S	5'	10:16	10:18	10:18	10:23	5min
	2 M	8'	10:16	10:20	10:20	10:29	9min
	2 V	13'	SEE PROFILE - VARYING SOIL STRUCTURE				
	3 S	5'	10:32	10:35	10:35	10:40	5min
	3 M	9'	10:31	10:33	10:33	10:36	3min
	3 V	12'	LARGE ROCK (SHALE) AT BOTTOM				
	4 S	4.5'	10:51	10:57	10:57	11:06	9min
	4 M	9'	10:47	10:53	10:53	11:02	9min
	4 V	13'	SAME AS HOLE #1				

1587/BR

②

0'	6"	A1-3
4.5'		BROWN SAND CLAY 10-20% SHALE FRAGMENTS
11'		BROWN SAND SILT LOAM 20-30% SHALE FRAGMENTS
13'		SAME/SHALE FRAGMENTS 40-50%

③

0'	6"	A1-3
4'		yellow BR SAND CLAY Lm. 10-20% FRAGMENTS
11'		BR. yellow w/ PINK CASTS SAND Lm. 20-30% SHALE FRAG.
12'		SAME w/ 40-50% SHALE FRAGMENTS

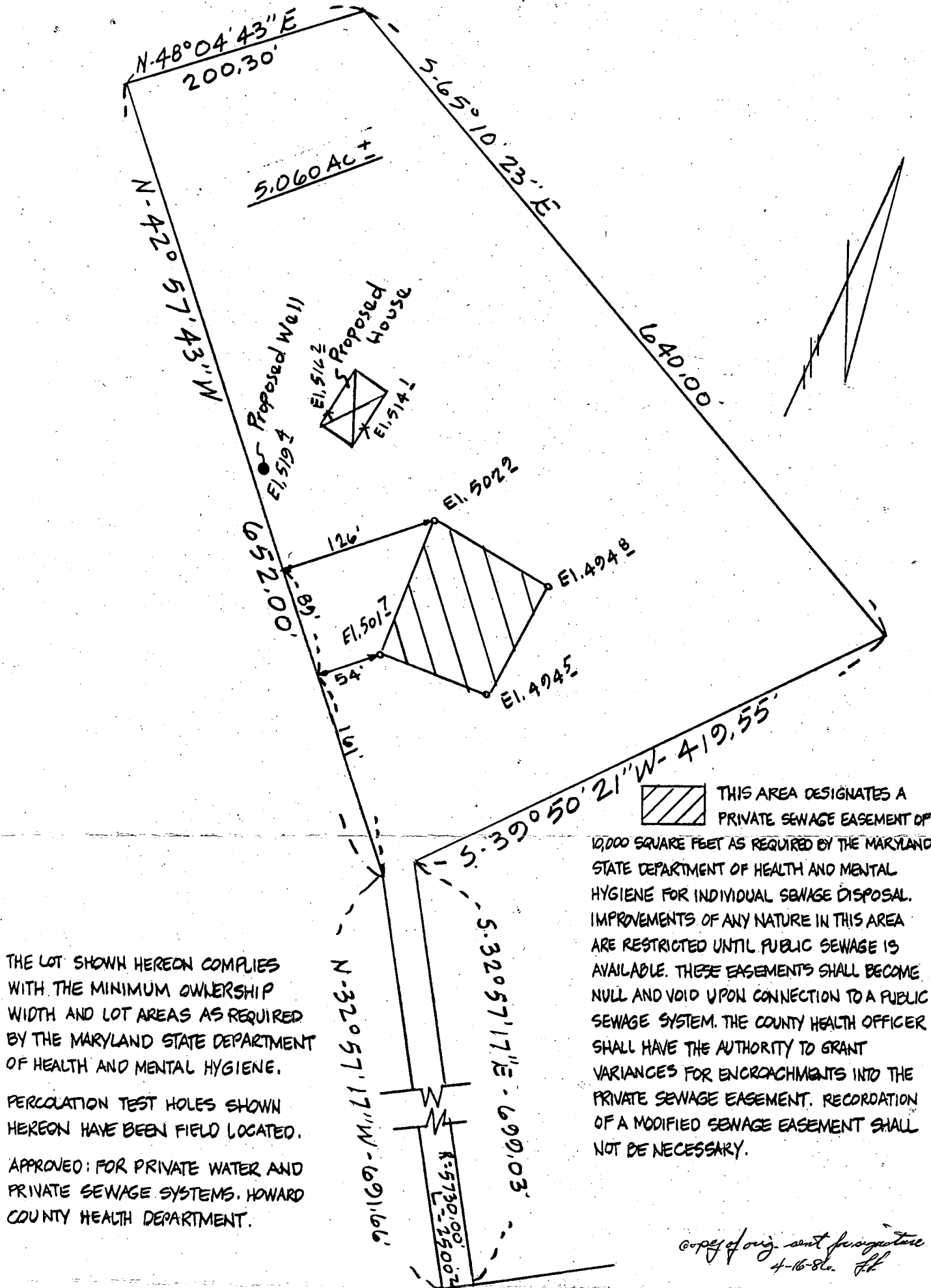
REMARKS LOT LINES NOT VISABLE - ALL FUTURE REPAIRS SHALLOW SYSTEM

TYPE OF SOIL MT A1-3 / MANDR LOAM

TESTED BY S. Abel

ALSO PRESENT SOUTH CARROLL BACKHOE





THE LOT SHOWN HEREON COMPLIES WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREAS AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF HEALTH AND MENTAL HYGIENE.

PERCOLATION TEST HOLES SHOWN HEREON HAVE BEEN FIELD LOCATED.

APPROVED FOR PRIVATE WATER AND PRIVATE SEWAGE SYSTEMS. HOWARD COUNTY HEALTH DEPARTMENT.

THIS AREA DESIGNATES A PRIVATE SEWAGE EASEMENT OF 10,000 SQUARE FEET 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. THESE EASEMENTS SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENTS INTO THE PRIVATE SEWAGE EASEMENT. RECORDATION OF A MODIFIED SEWAGE EASEMENT SHALL NOT BE NECESSARY.

copy of orig. sent for signature  
4-16-86. JH

COUNTY HEALTH OFFICER

DATE

MD. RT. 94

TITLE: PERCOLATION CERTIFICATION

PROJECT: TAX MAP 7-BLOCK 21-PARCEL 381

LOCATION: 4TH ELECTION DISTRICT HOWARD CO., MD.

SCALE: 1"=100' DESIGNED BY: — DRAWN BY: BH CHECKED BY: — DATE: 4-7-86

FIELD BOOK: 77 PAGE NO.: — JOB NO.: 8673 DRAWING NO.: 1 OF 1

boender associates inc.  
consulting engineers  
land surveyors  
land planners

COURTHOUSE SQUARE  
3565 ELLICOTT MILLS DRIVE  
ELLICOTT CITY, MD. 21043  
(301) 465-7777



Well Permit No. HO - 1648  
Location of property (road) 2178 RTE 94  
Subdivision MAP 7 P381 Lot \_\_\_\_\_ Block \_\_\_\_\_ Plat \_\_\_\_\_ Sec. \_\_\_\_\_  
Well Driller ~~MR~~ R. FEEZER Owner NORWORM RICK

Depth of well 200  
Distance of measuring point (M.P.) above ground 55 <sup>2 FT</sup>  
Static water level (S.W.L.) below M.P.

Time pump started 9:30 Pumping rate 9  
Total time 1 hr 15 min to reach pumping water level 121 ft. below M.P.

[illegible]



C15280

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.

COUNTY  
NUMBER

A36489

DATE Received

72186

DATE WELL COMPLETED

72186

Depth of Well

2220026

(TO NEAREST FOOT)

PERMIT NO.

FROM "PERMIT TO DRILL WELL"

10-81-1643

OWNER

NORWOOD

STREET OR RFD

8173 RT 2 94

SUBDIVISION

MAP 7 P. 381

SECTION

LOT

RICK

first name

TOWN

HISBON

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		Check if water bearing
	FROM	TO	
Top Soil	0	2	
Red soil	2	25	
Brown soil	25	55	
Shell			
black rock	55	100	✓
gray rock	100	200	✓

GROUTING RECORD

WELL HAS BEEN GROUTED  
(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL

CEMENTCMBENTONITE CLAYBC

NO. OF BAGS77NO. OF POUNDS1598

GALLONS OF WATER102

DEPTH OF GROUT SEAL (to nearest foot)

from048ft. to27504ft. 58

(enter 0 if from surface)

CASING RECORD

casing types  
insert  
appropriate  
code  
below

STEELSTCONCRETECO

PLASTICPLOTHEROT

MAIN CASING TYPE

Nominal diameter top (main) casing (nearest inch)

Total depth of main casing (nearest foot)

ST668570

OTHER CASING (if used)

diameter inch

depth (feet) from to

EACH CASING

SCREEN RECORD

screen type  
or open hole

insert  
appropriate  
code  
below

STEELSTBRASSBRHOOPENHOLE

PLASTICPLOTHEROT

C2

DEPTH (nearest ft.)

1408911151720021

2232426303236

3383941454751

EACH SCREEN

SLOT SIZE 123

DIAMETER OF SCREEN

fromto

(NEAREST INCH)

5660

GRAVEL PACK

IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

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

T(E.R.O.S.)

WQ

7072747576

TELESCOPE CASING

LOG INDICATOR

OTHER DATA

C3

PUMPING TEST

HOURS PUMPED (nearest hour)

389

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

61115

METHOD USED TO MEASURE PUMPING RATE

1gal

WATER LEVEL (distance from land surface)

BEFORE PUMPING

5820

WHEN PUMPING

2225

TYPE OF PUMP USED (for test)

AairPpistonTturbine

272727

CcentrifugalRrotaryOother (describe below)

272727

JjetSsubmersible

2727

PUMP INSTALLED

DRILLER WILL INSTALL PUMP YESNO

(CIRCLE) (YES OR NO)

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

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

29

CAPACITY: GALLONS PER MINUTE (to nearest gallon)

3135

PUMP HORSE POWER

3741

PUMP COLUMN LENGTH (nearest ft.)

4347

CASING HEIGHT (circle appropriate box and enter casing height)

abovebelow

LAND SURFACE

250

(nearest foot)

5051

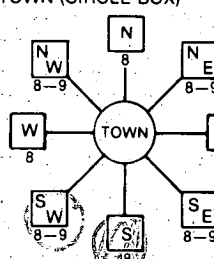
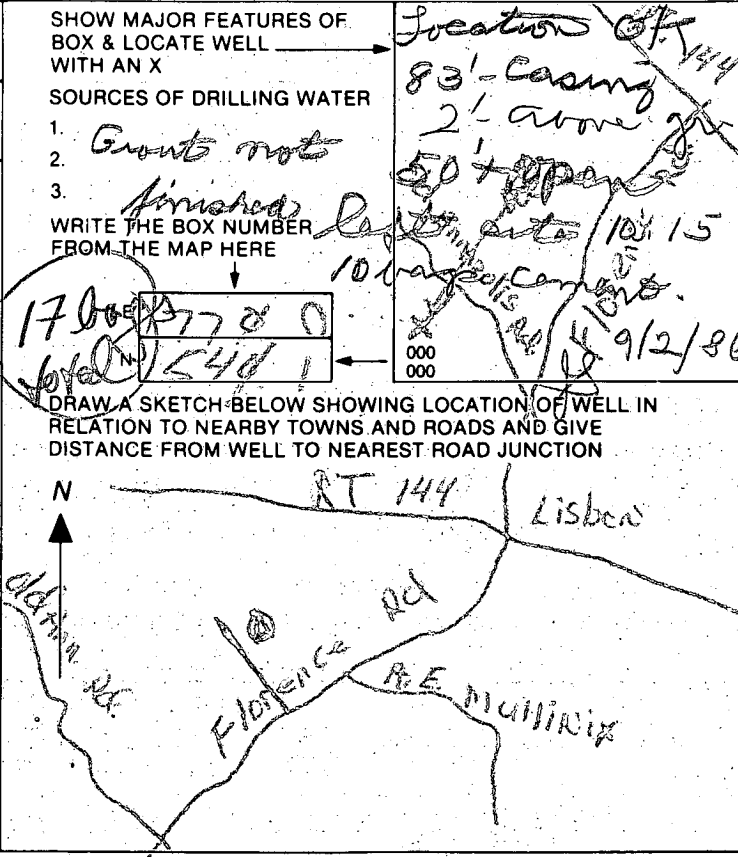
LOCATION OF WELL ON LOT

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

200 FT.

WELL

250

<b>B 1</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;">2763</div> <small>1 2 3 4 5 6</small> (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)	SEQUENCE NO. (OEP USE ONLY)	<b>STATE OF MARYLAND</b> <b>PERMIT TO DRILL WELL</b> please print or type	OEP PERMIT NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;">HC-51-1442</div> <small>70 71 72 73 74 75 76 77 78 79</small> fill in this form completely
<b>Date Received</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;">5 3 1 8 7</div> <small>8 9 10 11 12 13</small> <b>OWNER INFORMATION</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;">H O W W O O D</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">R I C K</div> <small>15 16 17 18 19 20 21 22 23 24</small> Last Name Owner First Name <div style="border: 1px solid black; padding: 2px; display: inline-block;">1 2 0 2</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">L E S T E R</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">2 1 5</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">1 1 0 1 2</div> <small>36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55</small> Street or RFD <div style="border: 1px solid black; padding: 2px; display: inline-block;">R D 5 1</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">B A I L L M O O R</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M I 7 1 2 3 8</div> <small>57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76</small> Town State Zip		<b>B 3</b> <b>LOCATION OF WELL</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;">H A W K S</div> <small>1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21</small> COUNTY <div style="border: 1px solid black; padding: 2px; display: inline-block;">M A D 7</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">P 2 8 1</div> <small>23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42</small> SUBDIVISION SECTION <div style="border: 1px solid black; padding: 2px; display: inline-block;">4 4</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">4 6</div> LOT <div style="border: 1px solid black; padding: 2px; display: inline-block;">4 8</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">5 0</div> <small>44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100</small> NEAREST TOWN MILES FROM TOWN (enter 0 if in town) <div style="border: 1px solid black; padding: 2px; display: inline-block;">3</div> M I <small>73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100</small>	
<b>DRILLER INFORMATION</b> Driller's Name <div style="border: 1px solid black; padding: 2px; display: inline-block;">K E R N E L</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">J E A N S</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">2 7 0</div> <small>1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100</small> License No. 80 Firm Name <div style="border: 1px solid black; padding: 2px; display: inline-block;">K E R N E L</div> Address <div style="border: 1px solid black; padding: 2px; display: inline-block;">1 1 0 2</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">L E S T E R</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">2 1 5</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">1 1 0 1 2</div> <small>1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100</small> Signature Date		<b>B 4</b> DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  CN WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH N WEST W EAST E SOUTH S NEAR WHAT ROAD <div style="border: 1px solid black; padding: 2px; display: inline-block;">F L O R E N C E</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">R D</div> <small>11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100</small> 2178 RT 144 CN WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH N WEST W EAST E SOUTH S DISTANCE FROM ROAD <div style="border: 1px solid black; padding: 2px; display: inline-block;">1 2 5 0</div> <small>34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100</small> ENTER FT or MI <div style="border: 1px solid black; padding: 2px; display: inline-block;">4 7</div>	
<b>B 2</b> <b>WELL INFORMATION</b> APPROX. PUMPING RATE (GAL. PER MIN.) <div style="border: 1px solid black; padding: 2px; display: inline-block;">4</div> <small>1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100</small> AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <div style="border: 1px solid black; padding: 2px; display: inline-block;">4 0 0</div> <small>1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100</small>		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL COUNTY NAME <div style="border: 1px solid black; padding: 2px; display: inline-block;">H O W A R D</div> COUNTY NO. <div style="border: 1px solid black; padding: 2px; display: inline-block;">A-36489</div> <small>1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100</small> OEP SIGNATURE DATE ISSUED <div style="border: 1px solid black; padding: 2px; display: inline-block;">0 5 2 1 8 6</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">A. A. A. A. A.</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">0 2 2 1 5 7</div> <small>1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100</small> NORTH GRID <div style="border: 1px solid black; padding: 2px; display: inline-block;">E 4 1 0 0 0</div> EAST GRID <div style="border: 1px solid black; padding: 2px; display: inline-block;">0 7 7 0 0 0 0</div> <small>1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100</small>	
<b>USE FOR WATER (CIRCLE APPROPRIATE BOX)</b> <input checked="" type="radio"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="radio"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="radio"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="radio"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input type="radio"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. Grout not 2. finished 3. 10' above casing WRITE THE BOX NUMBER FROM THE MAP HERE <div style="border: 1px solid black; padding: 2px; display: inline-block;">1 7 0 0 5 7 7 8 0</div> <small>1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100</small> DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
APPROXIMATE DEPTH OF WELL <div style="border: 1px solid black; padding: 2px; display: inline-block;">2 0 0</div> FEET <small>1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100</small> APPROXIMATE DIAMETER OF WELL <div style="border: 1px solid black; padding: 2px; display: inline-block;">6</div> INCH <small>1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100</small>		METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jetted & DRIVEN <small>30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100</small> AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary) CABLE REVERSE-ROTARY Drive-POINT other	
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="radio"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <input type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY <input type="radio"/> THIS WELL WILL DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) <div style="border: 1px solid black; padding: 2px; display: inline-block;">4 1</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">5 2</div> <small>1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100</small>		Not to be filled in by driller (OEP USE ONLY) APPROP. PERMIT NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;">G A P</div> <small>1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100</small> FORCE <div style="border: 1px solid black; padding: 2px; display: inline-block;">A 2</div> WRITE INITIALS IN BOX <small>67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100</small> PERMIT No. <div style="border: 1px solid black; padding: 2px; display: inline-block;">H C - 5 1 - 1 4 4 2</div> <small>70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100</small>	
SPECIAL CONDITIONS			

9/15/87

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

461-9933  
8801-18-04

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation ☒  
Replacement ☐

Receipt # WP 48101

Date 9/14/87

Name of Installer David R. Brickman

Telephone 437-5757

License Number 3199

Certified Well Pump Installer David R. Brickman

Well Driller David R. Brickman

Registered Plumber ☒

Name of Property Owner Richard A. Wood

Telephone 442-1156

Subdivision Lot #

Well Tag # 410-81-1648

Site Address 2778 941

Pump

1. Type

a. Deep well jet

b. Shallow well jet

c. Submersible ☒

2. Make Myers

3. Model # 100T-890

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 ☐

Motor

1. Horsepower 1/2

2. RPM 3450

3. Voltage 208

a. 110

b. 220

Pitless Adapter

1. Make Hakubutsu

2. Model 100T-890

3. Depth 45

Tank

1. Capacity 25

2. Pressure relief valve? ☐

Piping

1. Type CST

2. Size 1"

3. NSF and/or BOCA Code approved ☐

4. Depth of supply line 20'

Well data

1. Depth 200 ft.

2. Yield 6 GPM

3. Static water level 155 ft.

4. Will water supply be disinfected by installer? No

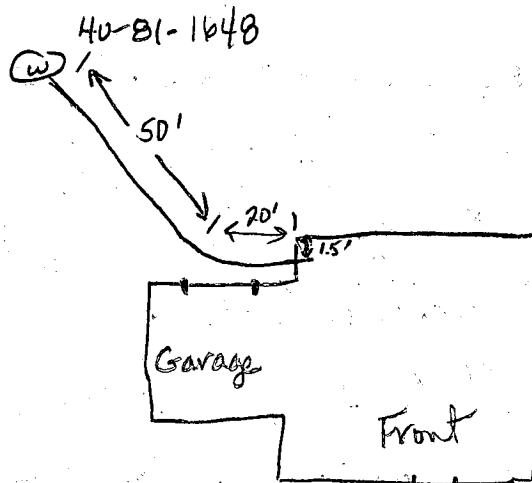
I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

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

Signature of Applicant: David R. Brickman

Date: 9/11/87

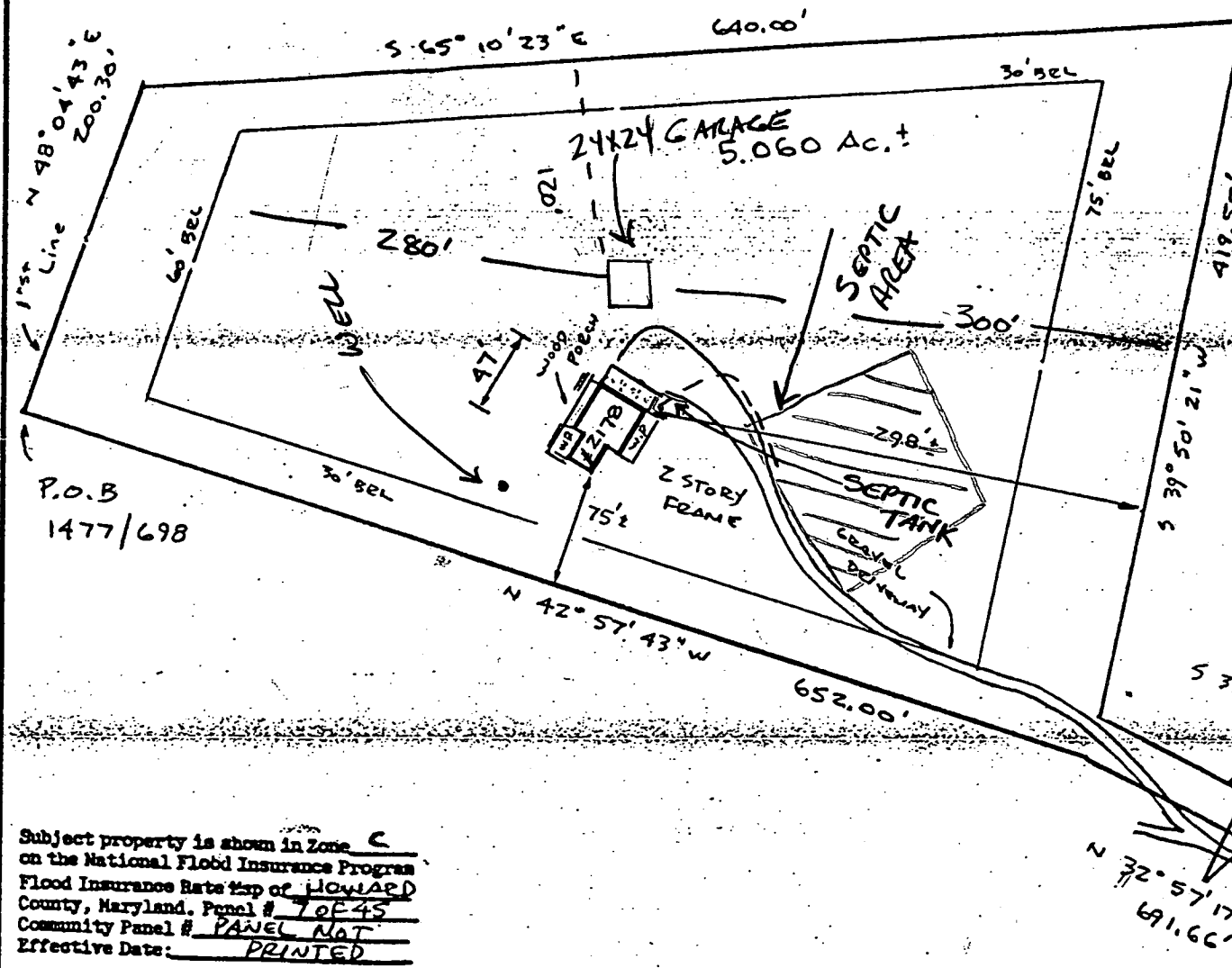
Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.



9-15-87 Pitless adaptor  
 at 40 inches. No ground  
 line. Steel casing. House  
 connection through wall  
 but not grouted, JE Nadeau,



<b>B 1</b> <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em; font-weight: bold;">0782</div>	SEQUENCE NO. (OEP USE ONLY)	<b>STATE OF MARYLAND</b> <b>PERMIT TO DRILL WELL</b> please print or type	OEP PERMIT NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">           10-81-1432         </div>
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)		LOCATION OF WELL	
<b>Date Received</b> <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">             007122           </div>		<b>B 3</b> <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">             10 M A R D           </div>	
<b>OWNER INFORMATION</b> <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">             NORMOOD PICK           </div>		<div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">             000 7 P. 381           </div>	
<div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">             1707 WESTERIDGE RD           </div>		<div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">             11520 W           </div>	
<div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">             BELT, MOORE           </div>		<div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">             MD 21778           </div>	
<b>DRILLER INFORMATION</b> Driller's Name: <u>George F. Easterday</u> Firm Name: <u>T. F. Easterday, Inc.</u> Address: <u>9265 Brown Ch. Rd., Mt. Airy, Md. 21771</u> Signature: <u>George F. Easterday</u> Date: <u>4/16/86</u>		<b>B 4</b> DIRECTION OF WELL FROM TOWN (CIRCLE BOX) 	
<b>WELL INFORMATION</b> APPROX. PUMPING RATE (GAL. PER MIN.) <u>5</u> AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <u>500</u>		NEAR WHAT ROAD <u>71st St + 94</u> ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 	
<b>USE FOR WATER</b> (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="checkbox"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input type="checkbox"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL COUNTY NAME <u>Harford</u> COUNTY NO. <u>A-36159</u> OEP SIGNATURE <u>[Signature]</u> STATE HEALTH INSERT S <u>41</u> DATE ISSUED <u>04/21/86</u> CO-SIGNATURE <u>[Signature]</u> EXP. DATE <u>10/21/86</u> NORTH GRID <u>541000</u> EAST GRID <u>0770000</u>	
APPROXIMATE DEPTH OF WELL <u>200</u> FEET APPROXIMATE DIAMETER OF WELL <u>6</u> INCH		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. <u>WELL</u> 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">             E 1776 0              N 546 1           </div>	
<b>METHOD OF DRILLING</b> (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 _____		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>REPLACEMENT OR DEEPEINED WELLS</b> (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY <input type="checkbox"/> THIS WELL WILL DEEPEIN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) <u>41</u>		Not to be filled in by driller (OEP USE ONLY) APPROP. PERMIT NUMBER <u>54</u> <u>G A P</u> <u>63</u> FORCE <u>2A</u> WRITE INITIALS IN BOX <u>67 68</u> PERMIT No. <u>10-81-1432</u> <u>70 71 72 73 74 75 76 77 78 79</u>	
<b>SPECIAL CONDITIONS</b>			



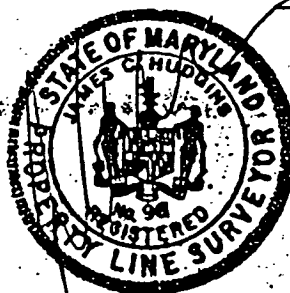
4/8/98  
 shown garage location  
 will have NO impact  
 to the existing well  
 & septic OK to  
 continue  
 A McMill

Subject property is shown in Zone C on the National Flood Insurance Program Flood Insurance Rate Map of HOWARD County, Maryland. Panel # 70E45 Community Panel # PANEL NAT Effective Date: PRINTED

This is to certify that I have surveyed the property known as 2178 MD. ROUTE 94

sheet of recorded 1477/694 among the Land Records of HOWARD County, Maryland for the purpose of locating the improvements thereon.

THIS PLAT SHOWS ONLY THAT THE IMPROVEMENTS ARE CONTAINED WITHIN THE OUTLINES OF THE LOT AND IS NOT TO BE USED TO ESTABLISH PROPERTY LINES.



J. Carl Hudgins PLS#96

# LOCATION SURVEY

2178 MD. ROUTE 94

4th ELECTION DISTRICT  
 HOWARD COUNTY, MD.

NTT ASSOCIATES, INC.  
 16205 Old Frederick Road  
 Mt. Airy, Maryland 21771  
 Phone 442-2031

Scale 1" = 100'  
 Date SEPT 23, 1993  
 Field By JH  
 Drawn By JH  
 Drawing # X14014