

9/16/86
ST AM

9-16-86
approved
S. Abel

PAID CASH

P 37636

A 35077

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH

992-2330

461-9933

04-326342

INDEXED

ELLICOTT CITY

4th

DISTRICT

DATE 9/10/86

Arnold Septic Tank Service

IS PERMITTED TO INSTALL ☒ ALTER

ADDRESS Mt. Airy, Maryland 21771 PHONE 795-7873

SUBDIVISION Hanson Watkins ROAD 15387 Route 144 LOT 5

PROPERTY OWNER Mr. & Mrs. Glen M. Farina GARY & Bonita Clark

ADDRESS JUST BEFORE MORGAN RD.

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

GARBAGE GRINDER? YES ☒ NO

SEPTIC TANK CAPACITY 1500 GALLONS NUMBER OF BEDROOMS 3

TRENCHES - 205 sq. ft. per bedroom with garbage grinder. Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 4 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Start the first trench 230 feet from the 443.95 ft. lot line and 170 feet from the 461.51 ft. lot line. Run trench(s) on level ground toward the 488.42 ft. lot line. Separate trenches by 10 feet if second trench used,

NOTE - No trench to exceed 100 feet in length. If more than one trench used, a distribution box is required. Call for inspection of trench(s) before and after gravel is installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

INSTALLATION SITE HAS BEEN REGRADED, APPARENTLY 1-1/2' TOPSOIL CUT AWAY,

BOTTOM TRENCH DEPTH REDUCED TO 8' BELOW GRADE TO COMPENSATE.

CONTRACTOR TO CALL AT TIME OF 1ST EXCAVATION IF SITE CONDITIONS SUBSTANTIALLY DIFFERENT THAN INDICATED HERE, C.W., 9/9/86

PLANS APPROVED BY S. Abel DATE 12/04/85

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 SIGNED AND RETURNED 5-7-98

PERMIT VOID AFTER THREE YEARS.

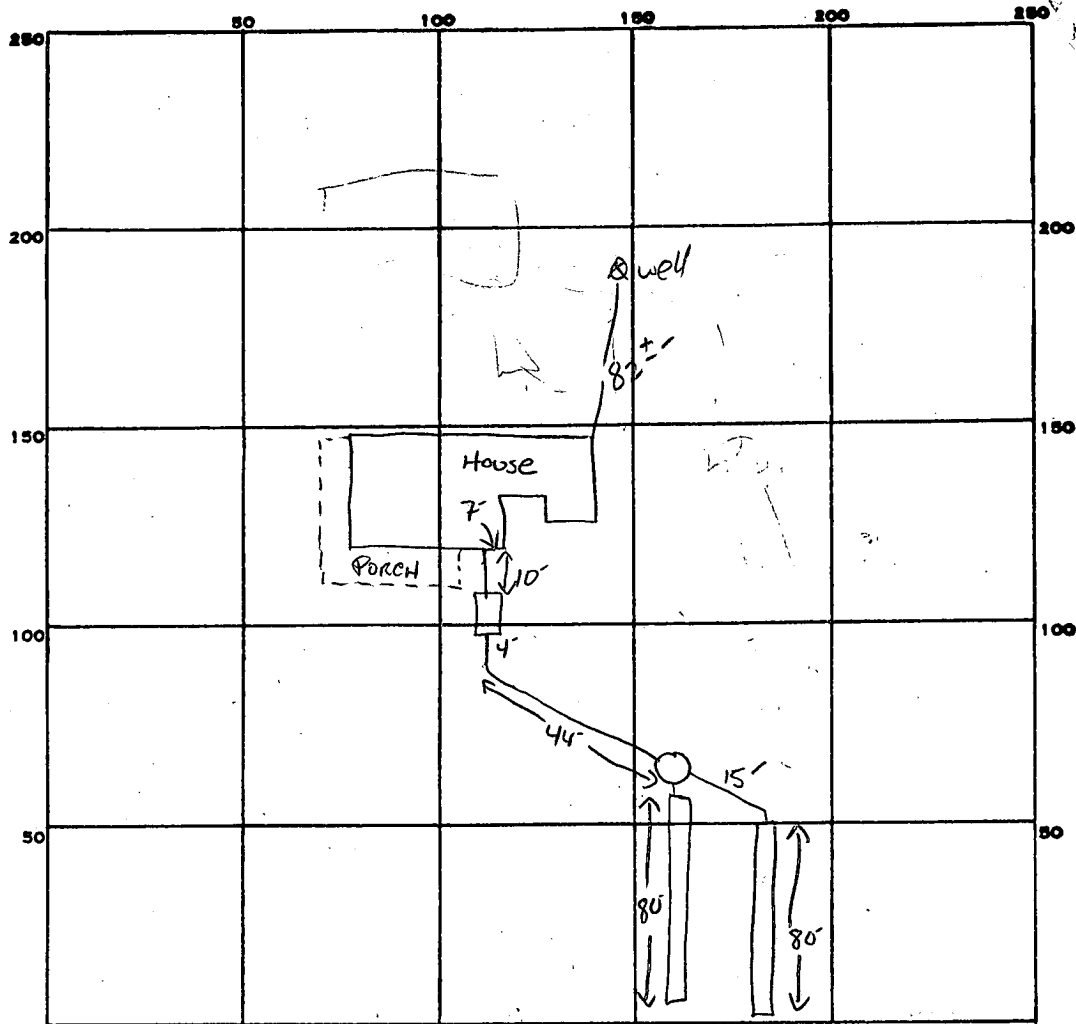
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

A 35077



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD ☒

SEPTIC TANK, LEVEL 1500 GAL ☒

CLEANOUTS ☒ 5

DISTRIBUTION BOX, LEVEL ☒

TILE FIELD, DEPTH 8 FT. TRENCH WIDTH 4 INLET FT.

GRAVEL DEPTH 4 FT ~~IN~~ TOTAL LENGTH 80 ^① 80 ^② TOTAL 160 FT.

NUMBER OF TRENCHES 2 ONE SIDE WALL TOTAL BOTTOM AREA 640 ~~φ~~

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

ABSORBENT AREA 640 SQ. FT.

REMARKS 9-16-86 OK TO ADD STONE. S. Abel

DATE SYSTEM APPROVED

9-16-86

INSPECTOR

S. Abel

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: 992-2330

DISTRICT

DATE

A

P

35077

4th

2-28-85

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

Glenn M. FARINA

ADDRESS

2730 W. Friendship Rd W. Friendship Md 21794

PHONE

442-1569

PROPERTY LOCATION:

SUBDIVISION

Hanson Watkins Property

LOT NO.

5

ROAD AND DESCRIPTION

15987

Rt 144 Old Frederick Rd

Woodbine Md

BLDG. PERMIT SIGNED

AND RETURNED

12-4-85

SIZE OF LOT

5 Acres

TYPE BLDG.

4

(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.

Glenn M. Farina

(SIGNATURE OF APPLICANT)

APPROVED BY

FOR

DATE

REJECTED BY

FOR

DATE

HOLD PENDING FURTHER TESTS

DATE

REASONS FOR REJECTION OR HOLDING

3-4-85 Perc. test satisfactory; Hold for certified location of hole, house and proposed well location same

THIS IS NOT A PERMIT

SOIL PROFILE

0'	AD-3
1'	RED BROWN CLAY LOAM 40%
4'	SAPROLITE Yellow Brown Silty SAND 30-50% SAPROLITE WITH SMALL STONES

CL = center line

(4)

0' A0-3
RED BROWN
CLAY COLORED
L10%
SAPROLITE

3' RED BROWN
Silty SAND
40-50%
SAPROLITE

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

INDICATE NORTH:
G-24144

③

0'	Ab-3
1'	RED BROWN CLAY LOAM 20-30% SAPROLITE
4'	BROWN Silty LOAM >50% SAPROLITE

$\bar{X}$ Perc. Time
 10 min
 INLET 4'
 BOTTOM MAX
 9'

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
3/4/85	1 S	5'	1:36	1:39	1:39	1:49	10 min
	1 M	9'	1:35	1:42	1:42	1:53	11 min
	1 V	15'	UNIFORM SOIL STRUCTURE Below 4'				
	2 S	6'	1:50	1:52	1:52	2:00	8 min
	2 V	15'	UNIFORM SOIL STRUCTURE Below 4'				
3/4/85	3 S	6'	2:03	2:09	2:09	2:18	9 min
	3 M	9'	2:03	2:05	2:05	2:12	7 min
	2 V	14.5'	UNIFORM SOIL STRUCTURE Below 4'				
	4 S	5'	2:16	2:23	2:23	2:36	13 min
	4 V	15'	UNIFORM SOIL STRUCTURE Below 3'				

REMARKS

TYPE OF SOIL

TESTED BY

Chapter / Munar

5. April

ALSO PRESENT

Ricks

PRELIMINARY

APPLICATION

A 18465

P _____

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICESP. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356DISTRICT 4thDATE 5/7/73TO: 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 Hansen Watkins propertyADDRESS Woodbine, MarylandAny questions call Mr. Fresch
PHONE 424-2900

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. Parcel 5ROAD AND DESCRIPTION Md. Route 144 - 900 ft. from Carr's Mill RoadSIZE OF LOT 5.000 acres TYPE BLDG. 3 or 4 bedrooms
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 /s/ William E. FreschAPPROVED BY C. J. Treaster FOR _____ DATE _____
(KIND OF SYSTEM)REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 4/6/73 Hold for certification of holes
2/24/85 Met Glenn Farina @ site, located 4 holes that passed perc test by driving iron stake in
each hole. Lot to be retested; 2 lowest holes will probably be used in new area.
New area to be certified after new tests are performed F.S.

THIS IS NOT A PERMIT

INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	

REMARKS _____

TYPE OF SOIL _____

PRELIMINARY

APPLICATION

A 18465

SEWAGE DISPOSAL TESTING

P _____

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: 465-3000, EXT. 356

DISTRICT 4th

DATE 5/7/73

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

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SIZE OF LOT 5.000 acres TYPE BLDG. 3 or 4 bedrooms
NUMBER OF BEDROOMS

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SIGNATURE OF APPLICANT /s/ William E. Fresch

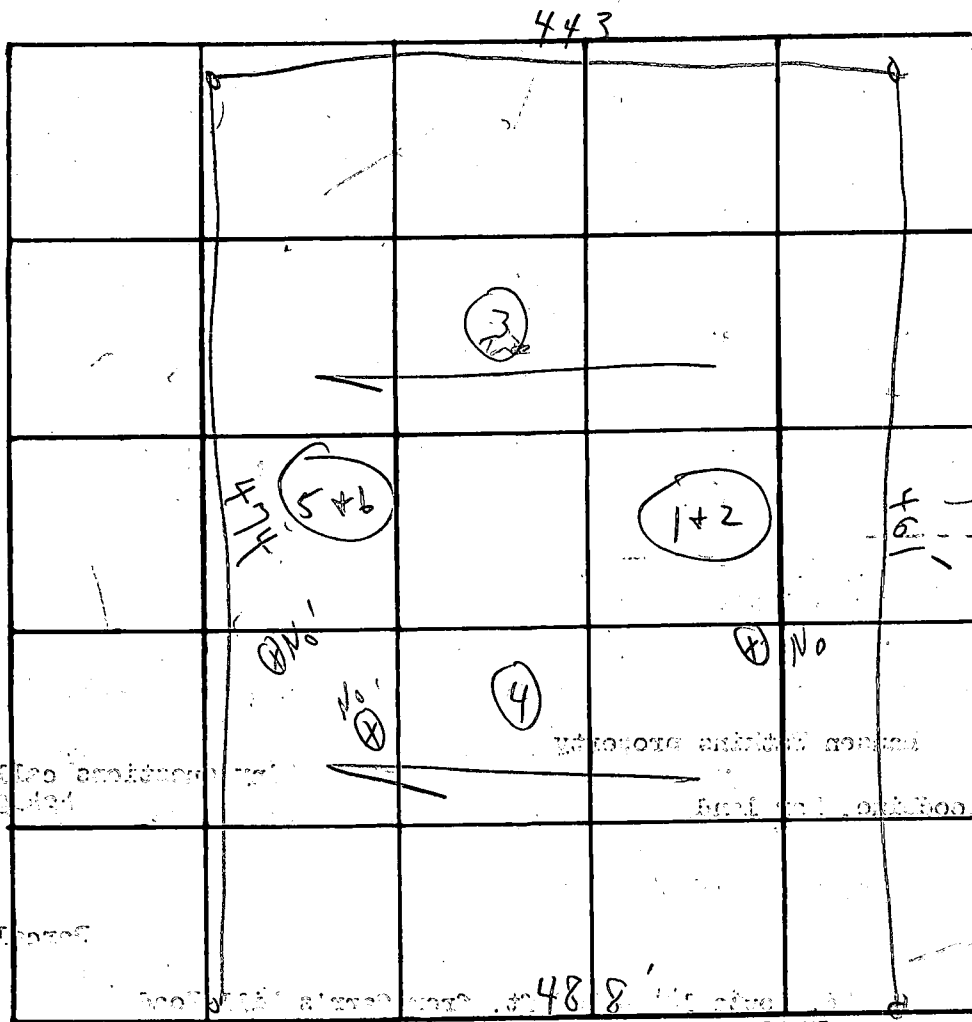
APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

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

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

RT 144

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
6/5/73	1	5'	9:57	10:02	10:02	10:10	8 min
	2	10 1/2'	9:56	10:00	10:00	10:07	7 min
	3	10'	Similar to 1 + 2				
	4	11 1/2'	Similar to 5 + 6				
	5	4 1/2'	10:01	10:05	10:05	10:14	9 min
	6	11'	10:02	10:05	10:05	10:10	5 min

REMARKS

TYPE OF SOIL

Certified poles #1 + 2 Highest + closest to corner
 1/16/85 Several old holes found, but unable to locate right near line
 properly due to high briars & weeds to S.

Spelling & location ok
7/12/85

MARYLAND

ROUTE 144

I.P. Fd.

3-59° 21' 11" E - 488.42'

25' BRL

25' BRL

20' BRL

20' BRL

20' BRL

20' BRL

20' BRL

20' BRL

20' BRL

20' BRL

20' BRL

20' BRL

20' BRL

20' BRL

20' BRL

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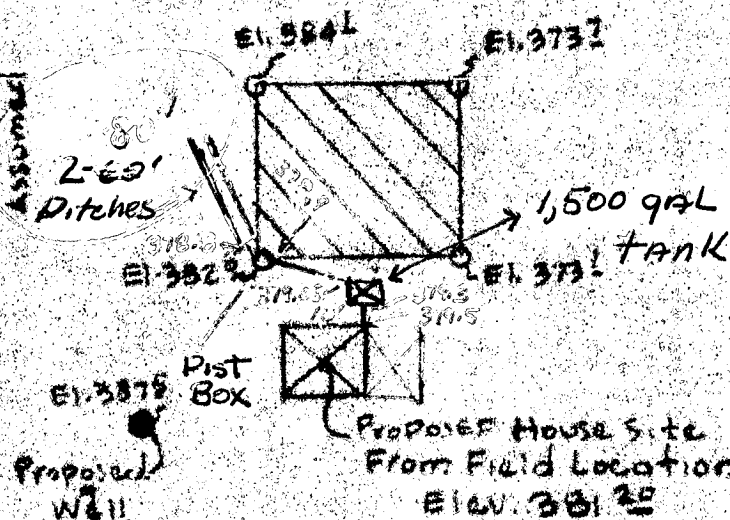
20' BRL

20' BRL

20' BRL

20' BRL

20' BRL



Tax Map B-BLK. 14-Parcel 288
2.000 ACRES

N-57° 40' 10" W - 443.22'

I.P. Fd.



THIS AREA DESIGNATES A PRIVATE SEWAGE EASEMENT OF APPROXIMATELY 10000 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 SERVISING ANY RESIDENTIAL STRUCTURES CONSTRUCTED ON THESE BUILDING SITES. THESE EASEMENTS SHALL BECOME VOID AND VOID FOR ALL PURPOSES IF A PUBLIC SEWAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENTS AND THE PRIVATE SEWAGE EASEMENT. RECDICATION OF A MODIFIED SEWAGE EASEMENT SHALL NOT BE NECESSARY.

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

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

for Joyce M. Byrd, M.D. 8-21-85
HOWARD COUNTY HEALTH OFFICER ONCE

Old Reference Book 643 Folio 203

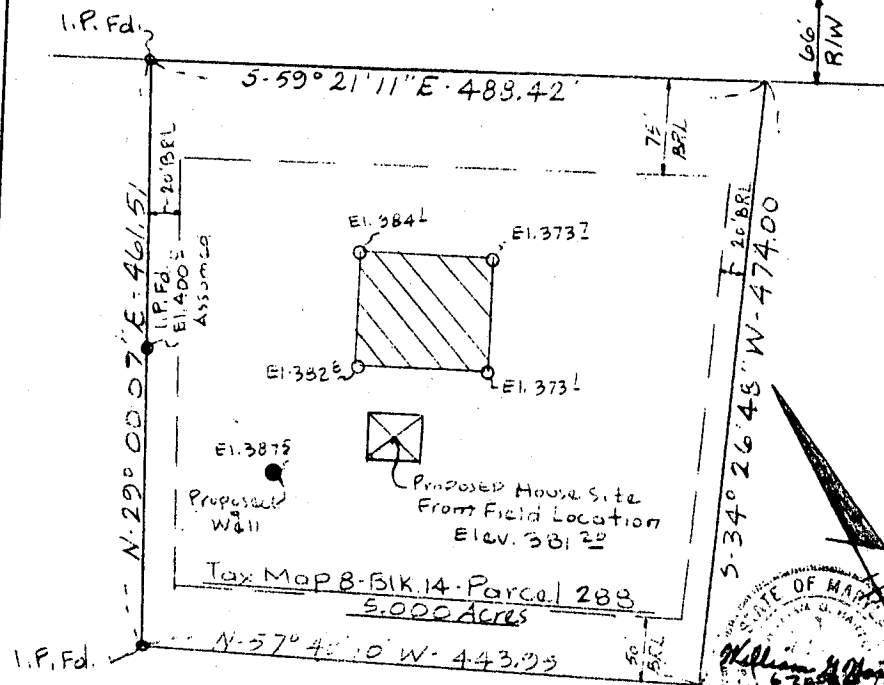
TITLE: PERCOLATION CERTIFICATION				
PROJECT: Glenn M. Farina				
LOCATION: 4TH ELECTION DISTRICT HOWARD CO., MD				
SCALE: 1"=100'	DESIGNED BY: —	DRAWN BY: BH	CHECKED BY: —	DATE: 6-23-85
FIELD BOOK: 66	PAGE NO.: 46	JOB NO.: 85160	DRAWING NO.: 1081	

boender associates
inc.
consulting engineers
land surveyors
land planners

COURTHOUSE SQUARE
3586 ELLICOTT MILLS DRIVE
ELLICOTT CITY MD. 21043
1501 465-3777

MARYLAND

ROUTE 144



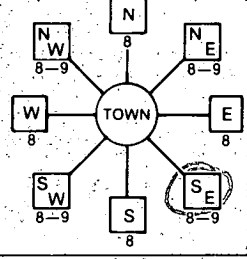
THIS AREA RESERVES A PRIVATE SEWAGE EASEMENT OF APPROXIMATELY 10,000 SQ. FT. AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF HEALTH AND MENTAL HYGIENE FOR INDIVIDUAL SEWAGE EXPOSURE. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED. IF A PUBLIC SEWAGE IS AVAILABLE AND SERVING ANY RESIDENTIAL STRUCTURE, CONSTRUCTED ON THESE BUILDING LOTS, SUCH EASEMENTS SHALL BECOME VOID AND THE LOT SHALL BE CONSIDERED A PUBLIC SERVICE LOT. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT VARIATIONS FOR ENCROACHMENTS INTO THE PRIVATE SEWAGE EASEMENT. RECONSTRUCTION OF A MODIFIED SEWAGE EASEMENT SHALL NOT BE NECESSARY.

ALL LOTS SHOWN HEREIN COMPLY WITH THE MINIMUM OVERSIZED WIDTH AND LOT AREAS AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF HEALTH AND MENTAL HYGIENE.

APPROVED FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS, HOWARD COUNTY HEALTH DEPARTMENT.

By Joseph M. Boyd, M.D., P.E. 8-21-85
HOWARD COUNTY HEALTH OFFICER DATE

Old Parcel 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, 101, 102, 103, 104, 105, 106, 107, 108, 109, 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120, 121, 122, 123, 124, 125, 126, 127, 128, 129, 130, 131, 132, 133, 134, 135, 136, 137, 138, 139, 140, 141, 142, 143, 144, 145, 146, 147, 148, 149, 150, 151, 152, 153, 154, 155, 156, 157, 158, 159, 160, 161, 162, 163, 164, 165, 166, 167, 168, 169, 170, 171, 172, 173, 174, 175, 176, 177, 178, 179, 180, 181, 182, 183, 184, 185, 186, 187, 188, 189, 190, 191, 192, 193, 194, 195, 196, 197, 198, 199, 200, 201, 202, 203, 204, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216, 217, 218, 219, 220, 221, 222, 223, 224, 225, 226, 227, 228, 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B 1 8745 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)	SEQUENCE NO. (OEP USE ONLY) STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	OEP PERMIT NUMBER 40-81-11189 fill in this form completely
Date Received 072085 OWNER INFORMATION FARIMIA GLENN 15 Last Name 13 Owner First Name 34 2730 W FRIENDSHIP RD 36 Street or RFD 55 W FRIENDSHIP MD 21294 57 Town 70 State 72 Zip 76	B 3 LOCATION OF WELL HOWARD 8 COUNTY 21 NONE 23 SUBDIVISION 42 SECTION 44-46 LOT 48-50 TAX MAP 8 PARCEL 288 LISBON 52 NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) 3 MI 73 76 77 78	
DRILLER INFORMATION Ralph MAYNE Driller's Name 77 License No. 80 Ralph MAYNE (well drilling) Firm Name 9120 Brown Church Rd. Mt. Airy Address Ralph Mayne 9/10/85 Signature Date	B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  NEAR WHAT ROAD MD RT. 144 11 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH N WEST W EAST E SOUTH S DISTANCE FROM ROAD 250 34 37 ENTER FT or MI 38 39	
WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 5 8 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500 14 20		
USE FOR WATER (CIRCLE APPROPRIATE BOX) ☒ HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) ☐ FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) ☐ INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) ☐ PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) ☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		
APPROXIMATE DEPTH OF WELL 150 FEET 24 28 APPROXIMATE DIAMETER OF WELL 6" INCH METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jettied & DRIVEN AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary) CABLE REVERSE-ROTARY DRIVE-POINT other		
REPLACEMENT OR DEEPENDING WELLS (CIRCLE APPROPRIATE BOX) ☒ THIS WELL WILL NOT REPLACE AN EXISTING WELL ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY ☐ THIS WELL WILL DEEPEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENDING (IF AVAILABLE) 41 52		
Not to be filled in by driller. (OEP USE ONLY) APPROP. PERMIT NUMBER 54 GAP 63 FORCE CW WRITE INITIALS IN BOX PERMIT No. 40-81-11189 67 68 70 71 72 73 74 75 76 77 78 79		
SPECIAL CONDITIONS		

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard A35077

COUNTY NAME COUNTY NO.

OEP SIGNATURE STATE HEALTH INSERT S 41

DATE ISSUED 092585 Cory Wilkin 3/24/86

43 48 CO SIGNATURE EXP. DATE

NORTH GRID 545000 EAST GRID 0785000

50 55 57 63

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

780

540

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

N

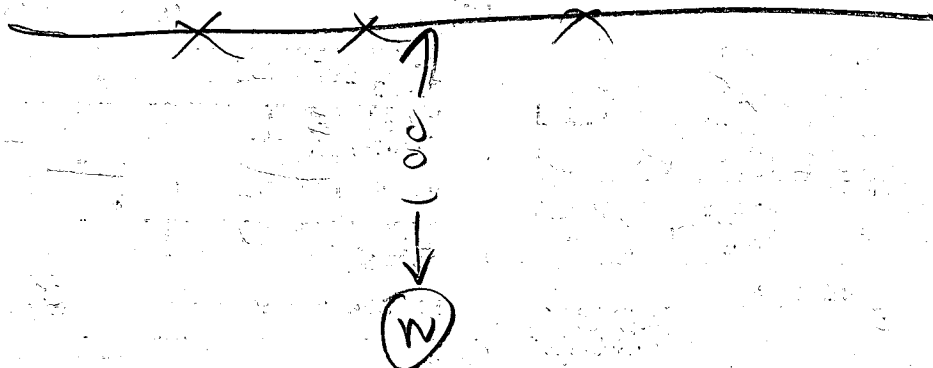
1.5 mi

MD. 144

10/16/85

WELL OK

SEE OTHER SIDE RH



RT 144

TO LISBON

10/18/85

On 1015 WELL GROUT UNDER WAY

- ① LOCATION OK
- ② 13 BAGS
- ③ 54 FT CASING PER GROUTER
- ④ 50 FT OPEN HOLE " "
- ⑤ WELL OK

NO BLUESHEET WRITERS

Depth of Well 160
 Measuring Point - 2 ft
 Static Water Level 32
 Pump Started 8:45
 Total Time 15 min
 Pump Rate 9 gpm
 10:15 AM 32 FT 750 C 9 gpm

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-1189
Location of property (road) ROUTE 144 MAP 8 - PARCEL 288
Subdivision HANSEU WATKINS Lot 5 Block Plat Sec.
Well Driller RALPH MAYNE Owner GLENN FARINA

Depth of well 160 ft
Distance of measuring point (M.P.) above ground 2 ft
Static water level (S.W.L.) below M.P. 32 ft

I. High rate pumping -- reservoir drawdown

Time pump started 8.45 Pumping rate 9.6 p.m
Total time 15 min to reach pumping water level 32 ft. below M.P.

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

[illegible]

54 ft PL

13. Gas 50T open

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

Howard County Health Department
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Court House Square
Ellicott City, Md. 21043
461-9933

9/30/86
no one home for
inside part of
inspection.
outside previously
done. (30)

New Installation ☒
Replacement ☐

Receipt # 36969
Date 5/19/86

Name of Installer George Baker

Telephone 788-3080

License number 2214

Certified Well Pump Installer ☐ Well Driller ☐ Registered Plumber ☒

Name of Property Owner Glen Farina

Telephone

Subdivision Lot # 5 Well tag # 40-81-1181

Site Address 15387 Rt. 144 Woodbine

Pump

1. Type
 - a. Deep well jet
 - b. Shallow well jet
 - c. Submersible

2. Make

3. Model #

4. Capacity 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
2. RPM
3. Voltage
 - a. 110
 - b. 220

Pitless Adapter

1. Make
2. Model #
3. Depth

previous inspected
& covered

Tank

1. Capacity
2. Pressure relief valve

Piping

1. Type
2. Size
3. NSF and/or BOCA Code approved ☐
4. Depth of supply line

Well data

1. Depth ft.
2. Yield GPM
3. Static water level ft.
4. Will water supply be disinfected by installer? ☐

attempted
no inspection 9/30/86
no one home
left message
to call
anytime

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).

9/30/86 All information given above is true to the best of my knowledge.

Signature of Applicant: George Baker

Date: 5-13-86

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

9/30/86
owner called
& confirmed
tank installed

SETBACKS:

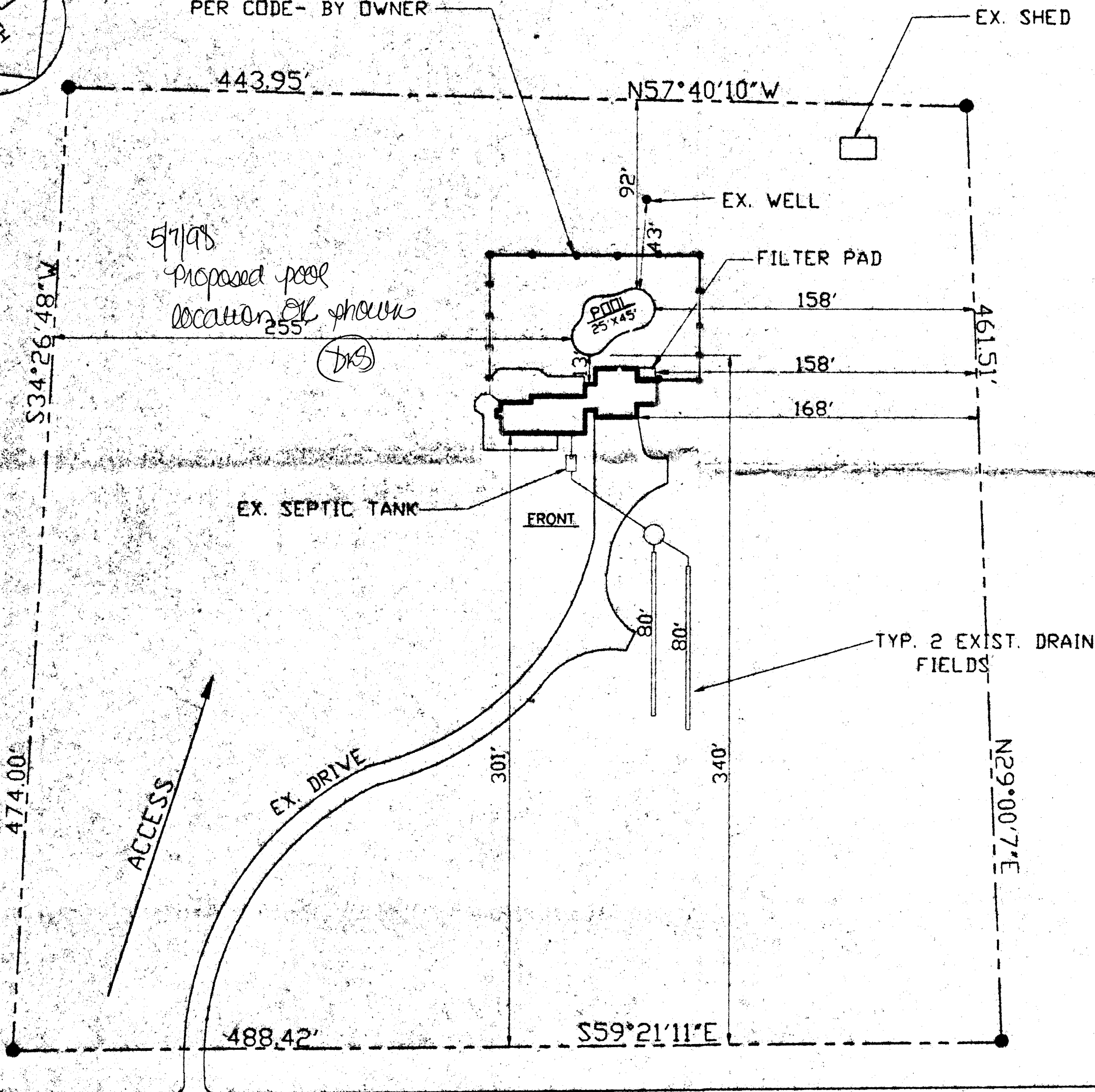
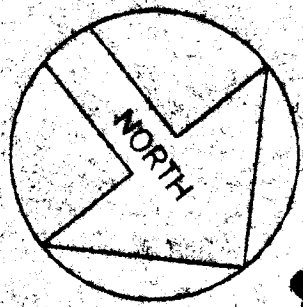
REAR PL. 10'
SIDE PL. 30'
HOUSE 0'
SEPTIC 20'
WELL 30'

**PRIVATE WELL
& SEPTIC**

NOTE: A VACUUM BREAKER
WILL BE INSTALLED
ON JOB AS PER
CODE.

FENCE DATA:

PROP. 4' HIGH WOOD FENCE AS
PER CODE - BY OWNER



FREDERICK ROAD

SITE PLAN

SCALE: 1" = 50'

15387 FREDERICK RD.
HOWARD COUNTY, MARYLAND 21797

LOT SIZE - 5.00 AC. +/-
LIBER 1323, FOLIO 286
4TH ELECTION DISTRICT

TAX ACCOUNT #

Both Customer and Salesman agree that this drawing, access, elevation & location of all equipment and appurtenances are in agreement. Any changes from this drawing must be approved in writing by the Customer and MPI.

CHECKED BY - SALESMAN

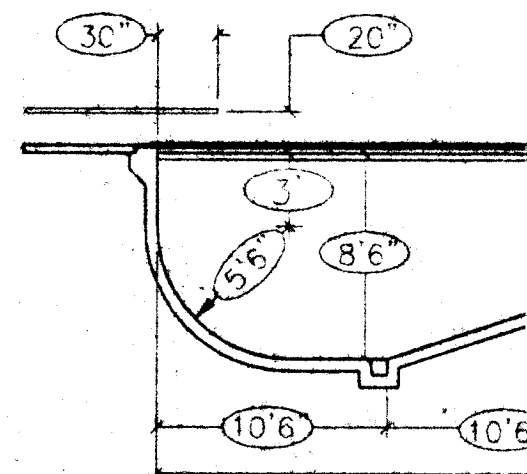
CHECKED BY - CUSTOMER

DIRECTIONS: I-70 WEST CONT. TO RTE.97, LEFT & CONT. TO RTE.144, FOLLOW 5 MILES TO SITE ON LEFT, 1ST DRIVEWAY BEFORE MORGAN STATION RD. ON RIGHT, 15387 FREDERICK RD.

MAP BOOK:

Co.: HOWARD
MAP: 3
GRID: J9

Cross Section POOL ELEVATION



MARYLAND POOLS

9515 GERWIG LANE - SUITE 119
COLUMBIA, MARYLAND 21046
410-995-6600 BALTIMORE
301-621-3319 WASHINGTON