Alalas Mr

## PERMIT

SEWAGE DISPOSAL SYSTEM

DISTRICT 5t

MARYLAND STATE DEPARTMENT OF HEALTH'

DISTRICT <u>5th</u>

HOWARD COUNTY

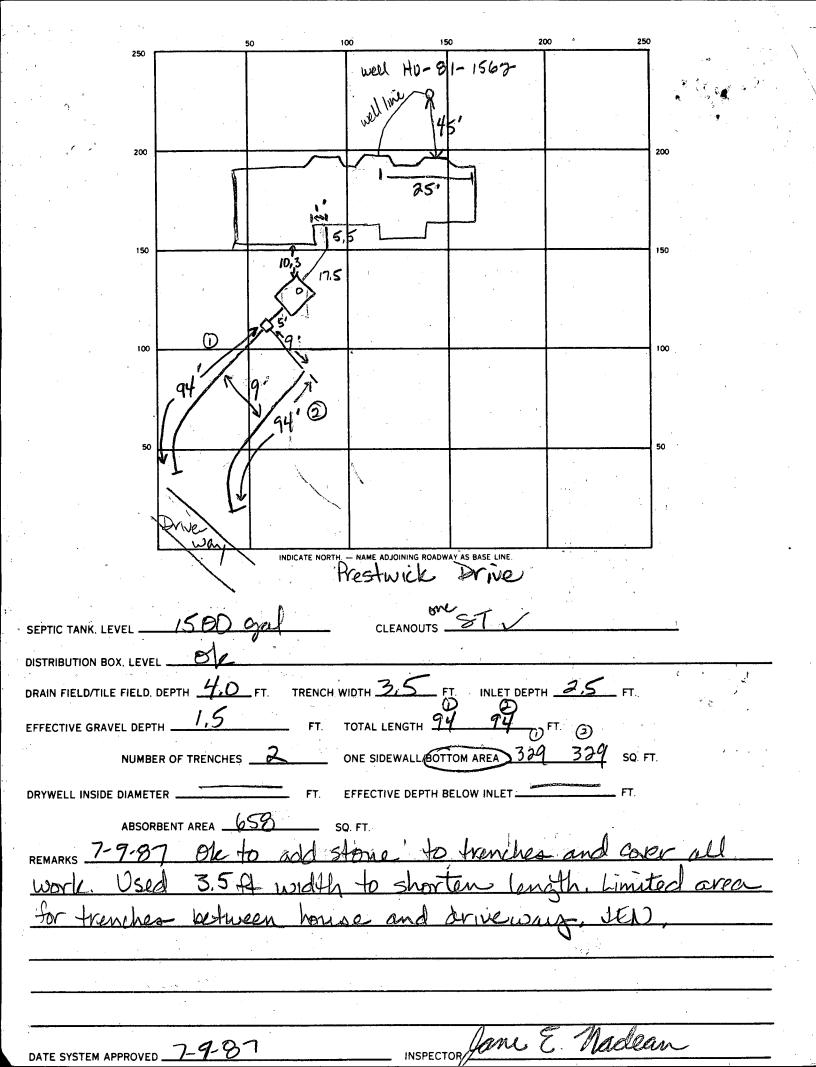
DATE 3/3

BUREAU OF ENVIRONMENTAL HEALTH 461-9933 INDEXED

ATE SYSTEM APPROVED 7-9-87

INSPECTOR \_\_\_\_

Jack	Fyock	IS PERMITTED TO INSTALL X ALTER
ADDRESS		PHONE988-9270
SUBDIVISION Greenefie	140 65	558 Prestwick Drive LOT 16
SUBDIVISIONGreenerie		
PROPERTY OWNER	Rzepkowski /	Sichard Prost
ADDRESS		
IF GARBAGE GRINDER IS USED IF	NCREASE SEPTIC TANK CAPACITY BY 50	
GARBAGE GRINDER? YES	NO <u>_X</u>	1589 632
SEPTIC TANK CAPACITY	O GALLONS NUMBER OF BE	EDROOMS4_
TRENCHES - 158 sq.	ft. per bedroom. Trench t	to be 3 feet wide. Inlet 2.5 feet below
original	grade. Bottom maximum de	epth 4.0 feet below original grade. Effec
		ginal grade. 1.5 feet of stone below
	tion pipe.	
LOCATION - Place th	<u>e distribution box 80 feet</u>	t from the rear (263') lot line and 175 fe
		seen when facing the lot from Prestwick D
		left lot line, Maintain 100 feet from we.
	tic tank.	
NOTE - No trenc	h to exceed 100 feet in le	ength. Provide 6" - 8" diameter cleanout
cap to g	rade or above on septic ta	ink. of
PLANS APPROVED BY	S. Abel	DATE 2/18/86
COVER NO WORK UNTIL INSPECTED AND	) APPROVED	
NEITHER THE HOWARD COUNTY COUNC	IL NOR THE HEALTH DEPARTMENT IS RESPONSIB	BLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.
NOTE: CLEANOUT REQUIRED EVERY 70	FEET OF SEWER LINE AND/OR AT 90° SWEEPS I	IN LINES FROM HOUSE TO DRAIN FIELDS.
NOTE: ALL PARTS OF SEPTIC SYSTEMS	I.E., TANK, DISTRIBUTION BOX, TRENCHES) TO BE 1	100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)
NOTE: IF DEEP TRENCH(ES) ARE USED	CALL FOR INSPECTION BEFORE AND AFTER PLACE	CING GRAVEL IN TRENCH(ES).
NOTE: NO DRY WELL SHALL EXCEED 1	5 FOOT IN DIAMETER, NO ABSORPTION TRENCH 1	TO EXCEED 100 FEET IN LENGTH.
NOTE: ALL PIPE FROM HOUSE TO SEPT	IC TANK MUST BE CAST IRON OR SCHEDULE 40 F	PVC OR ABS.
PERMIT VOID AFTER TWO YEARS.		
	TANK AND DRY WELL. STAND PIPES MUST BE 6 IN ANK IS DEEPER THAN 3 FEET, MANHOLE TO GRAD	NCHES IN DIAMETER. CAST IRON. CONCRETE OR TERRA COTTA OR PVC OR ABS
NOTE: DISTRIBUTION BOXES MUST HA	/E BAFFLES.	and returned 9/3/100
		Secret 11 del



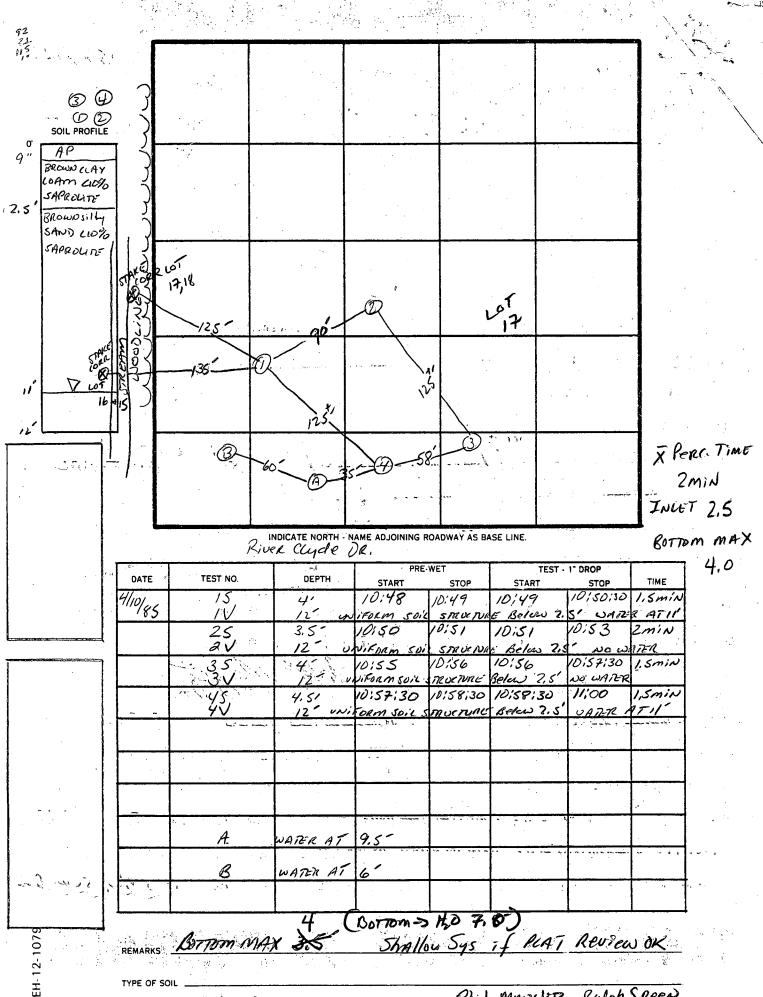
## APPLICATION

TELEPHONE: 992-2330

	SEWAGE DISPOSAL TESTING	<b>A</b>	29890
STATE OF MA	ARYLAND - DEPARTMENT OF HEALTH AND ME	ITAL HYGIENE P	
HOWARD COUNTY HEALTH DEPARTM ENVIRONMENTAL HEALTH SERVICES	- A	DISTRICT	
P. O. BOX 476 ELLICOTT CITY, MARYLAND 210	43	DATE 3-29	9-85

THE COUNTY HEALTH OFFICER ELLICOTT CITY, MARYLAND I. HEREBY. APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM. RZEPKOWSKI PROPERTY LOCATION: 3 acres SIZE OF LOT . (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

## THIS IS NOT A PERM



TESTED BY

SAbel

Phil MANS 1873, Rulph Speen, also PRESENT C. CISF; 1

HEALTH

MICHANI

10

INITIALS PERMIT NO. 170 71

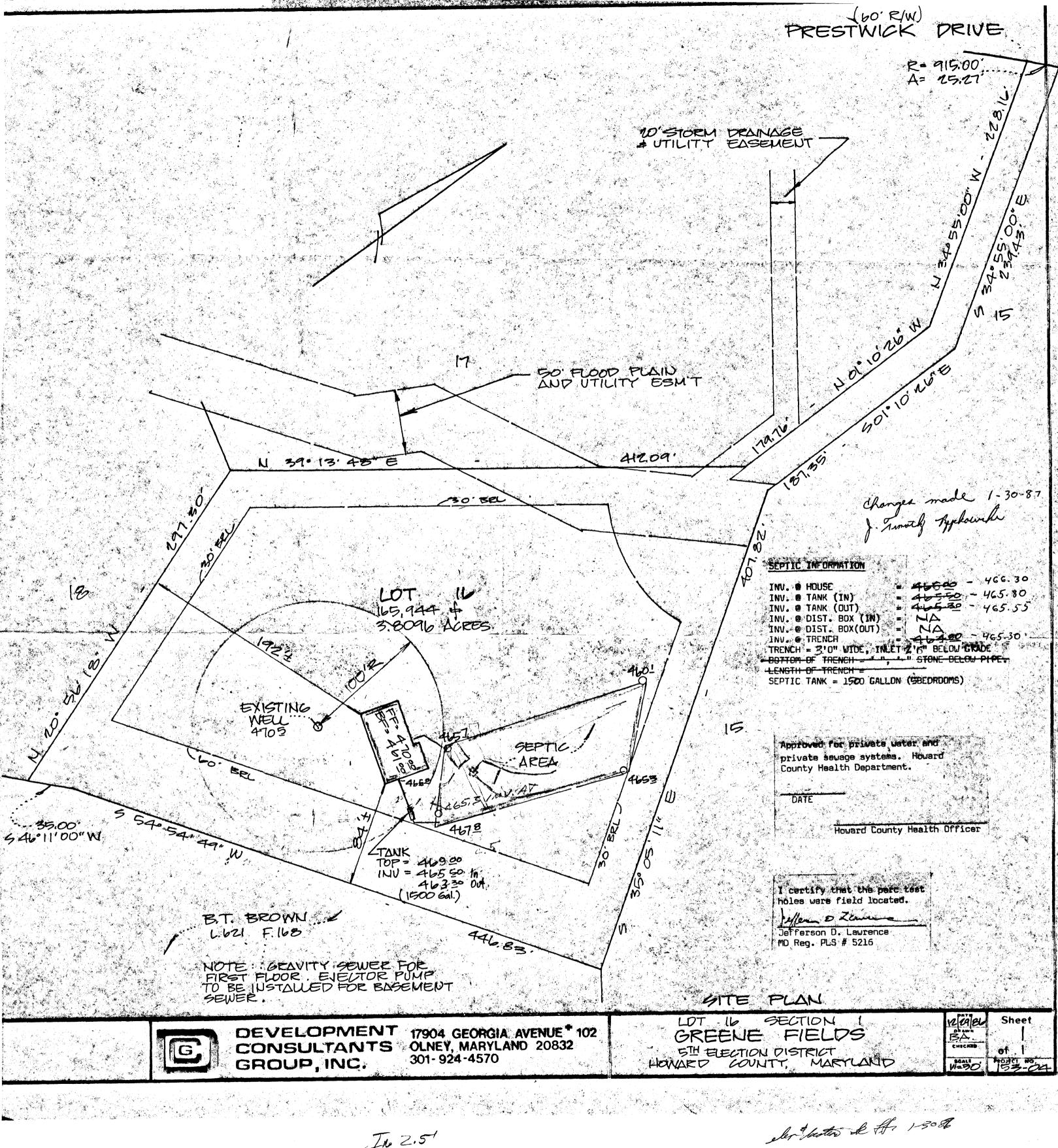
FORCE A

**SPECIAL CONDITIONS** 

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

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

Name of Installer	New Installation		Receipt #
License Number Certified Well Pump Installer   Well Driller   Registered Plumber    Name of Property Owner   Telephone   Subdivision   CAECLETCLOS   Lot #   Well Tag #   V - V - 15    Site Address   FAESTCLOS   Lot #   Well Tag #   V - V - 15    Pump   Motor   Pitless Adapter    1. Type   1. Horsepower   1. Make    a. Deep well jet   2. RP   2. Model #    b. Shallow well jet   3. Voltage   3. Depth    c. Submersible   a. 110    2. Make   b. 220      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    Tank   Piping   Well data    1. Type   1. Depth   ft.    2. Pressure relief   2. Size   2. Yield   GPM    3. NSF and/or BOCA   3. Static water    Code approved   1evel   ft.    4. Depth of supply   4. Will water supply    line   be disinfected by    installer?    I understand that it is my responsibility to notify the Howard County Health    Department when the installation is ready for inspection (otherwise this perm is null and void).  All information given above is true to the best of my knowledge.  Signature of Applicant:	.,		. , ,
Name of Property Owner Telephone Subdivision CACE_FIGEDS Lot # 16 Well Tag # 1 - 1 - 15 Site Address PACSIGUEED  Pump Motor Pitless Adapter 1. Horsepower 1. Make a. Deep well jet 2. RFW 2. Model # b. Shallow well jet 3. Voltage 3. Depth c. Submersible a 110 2. Make b. 220 3. Model # 4. Capacity Yes No 6. If Yes, is jow 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  Tank Piping Well data 1. Type 1. Depth ft. 2. Pressure relief 2. Size 2. Yield GPM 3. NSF and/or BOCA 3. Static water Code approved 1 level ft. 4. Depth of supply 4. Will water supply be disinfected by installer?  I understand that it is my responsibility to notify the Howard County Heal Department when the installation is ready for inspection Totherwise this perm is null and void).  All information given above is true to the best of my knowledge.  Signature of Applicant:	lame of Installer		Telephone
Name of Property Owner Telephone Subdivision CACE_FIGEDS Lot # 16 Well Tag # 1 - 1 - 15 Site Address PACSIGUEED  Pump Motor Pitless Adapter 1. Horsepower 1. Make a. Deep well jet 2. RFW 2. Model # b. Shallow well jet 3. Voltage 3. Depth c. Submersible a 110 2. Make b. 220 3. Model # 4. Capacity Yes No 6. If Yes, is jow 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  Tank Piping Well data 1. Type 1. Depth ft. 2. Pressure relief 2. Size 2. Yield GPM 3. NSF and/or BOCA 3. Static water Code approved 1 level ft. 4. Depth of supply 4. Will water supply be disinfected by installer?  I understand that it is my responsibility to notify the Howard County Heal Department when the installation is ready for inspection Totherwise this perm is null and void).  All information given above is true to the best of my knowledge.  Signature of Applicant:	icense Number		
Name of Property Owner  Subdivision CACELFICLOS  Site Address PACSTACKE D  Pump  Notor  Pitless Adapter  1. Type  1. Horsepower  2. RFW  2. Model #  3. Voltage  3. Depth  5. Submersible  2. Make  4. Capacity  5. Pump exceeds well capacity Yes  6. If Yes, is low pressure cutoff switch installed? Yes  7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors  Cable guards  Other  Tank  Piping  1. Capacity  1. Type  1. Depth  1. Depth  1. Capacity  2. Size  2. Yield  GPM  3. NSF and/or BOCA  3. Static water  Code approved  4. Depth of supply  1. Whill water supply  1. Depth of supply  1. Understand that it is my responsibility to notify the Howard County Health and void).  All information given above is true to the best of my knowledge.  Signature of Applicant:		: Well Driller	Registered Plumber
Pump 1. Type 2. RPW 2. Model # 2. Submersible 3. Voltage 3. Depth 2. Make 4. Capacity 5. Plump exceeds well capacity Yes 6. If Yes, 1 low pressure cutoff switch installed? Yes 7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors 7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors 7. Cable guards 7. Pressure relief 7. Size 7. Size 7. Yield 7. Opp 8. No and/or BOCA and a Static water 8. No and/or BOCA and/or BOC		30	744
Pump 1. Type 2. RPW 2. Model # 2. Submersible 3. Voltage 3. Depth 2. Make 4. Capacity 5. Plump exceeds well capacity Yes 6. If Yes, 1 low pressure cutoff switch installed? Yes 7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors 7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors 7. Cable guards 7. Pressure relief 7. Size 7. Size 7. Yield 7. Opp 8. No and/or BOCA and a Static water 8. No and/or BOCA and/or BOC	lame of Property Owner 🔝 🛴 🔠		Telephone
Pump 1. Type 2. RFW 2. Model # 4. Capacity 5. Plump exceeds well capacity Yes 7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors  Cable guards  1. Type 1. Depth 6. Piping 7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors  Cable guards  Other  Pank 1. Capacity 1. Type 1. Depth 6t. 2. Pressure relief 2. Size 2. Yield 3. NSF and/or BOCA 3. Static water Code approved 4. Will water supply line Code approved 1. Level 1. Type 1. Depth 6t. 4. Depth of supply 1. Depth 6. Signature of Applicant:	Subdivision GREENFIGLOS	Lot* # <u>/6 - W</u>	ell Tag # <u>F10 - 01 - 13 (</u>
1. Type a. Deep well jet b. Shallow well jet c. Submersible a. 110 2. Make b. 220 3. Model # 4. Capacity 6. Pump exceeds well capacity Yes 6. If Yes, is low pressure cutoff switch installed? Yes 7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors  Tank 1. Capacity 2. Pressure relief 2. Size 2. Yield 3. NSF and/or BOCA 3. Static water Code approved 4. Will water supply line Code approved 1. Tevel 1. Depth of supply 1. Depth of supply 1. Depth of supply 1. Department when the installation is ready for inspection otherwise this permiss null and void).  Signature of Applicant:	Site Address Prestwick Dr		and the second second
1. Type a. Deep well jet b. Shallow well jet c. Submersible a. 110 c. Make b. 220 d. Make b. 220 d. Make d. Capacity d. Pump exceeds well capacity Yes d. Make methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors  Tank Piping d. Capacity d. Pressure relief d. Size d. Size d. Yield data d. Capacity d. Pressure relief d. NSF and/or BOCA d. Static water Code approved d. GPM d. Will water supply line dedisinfected by installer?  I understand that it is my responsibility to notify the Howard County Heal Department when the installation is ready for inspection (otherwise this permiss null and void).  Signature of Applicant:			
1. Type a. Deep well jet b. Shallow well jet c. Submersible a. 110 c. Make b. 220 d. Make b. 220 d. Make d. Capacity d. Pump exceeds well capacity Yes d. Make methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors  Tank Piping d. Capacity d. Pressure relief d. Size d. Size d. Yield data d. Capacity d. Pressure relief d. NSF and/or BOCA d. Static water Code approved d. GPM d. Will water supply line dedisinfected by installer?  I understand that it is my responsibility to notify the Howard County Heal Department when the installation is ready for inspection (otherwise this permiss null and void).  Signature of Applicant:			The same of the same
a. Deep well jet	<del>-</del>		Pitiess Adapter
a. Deep well jet			1. Make
c. Submersible a 110  2. Make b. 220  3. Model #	a. Deep well jet	Z. RPM	2. Model #
Pump exceeds well capacity Yes No If Yes, is low pressure cutoff switch installed? Yes No What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors Cable guards Other  Tank Piping Well data 1. Type 1. Depth ft. 2. Size 2. Yield GPM 3. NSF and/or BOCA 3. Static water Code approved level ft. 4. Depth of supply 4. Will water supply line be disinfected by installer?  I understand that it is my responsibility to notify the Howard County Health and void).  All information given above is true to the best of my knowledge.  Signature of Applicant:	b. Shallow well jet,\	3. Voltage	3. Depth
Pump exceeds well capacity Yes No If Yes, is low pressure cutoff switch installed? Yes No What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors Cable guards Other  Tank Piping Well data 1. Type 1. Depth ft. 2. Pressure relief 2. Size 2. Yield GPM valve? 3. NSF and/or BOCA 3. Static water Code approved level ft. 4. Depth of supply 4. Will water supply line be disinfected by installer?  I understand that it is my responsibility to notify the Howard County Heal pepartment when the installation is ready for inspection (otherwise this permiss null and void).  All information given above is true to the best of my knowledge.  Signature of Applicant:	c. Submersible	a. 110	
Pump exceeds well capacity Yes No If Yes, is low pressure cutoff switch installed? Yes No What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors Cable guards Other  Tank Piping Well data 1. Type 1. Depth ft. 2. Pressure relief 2. Size 2. Yield GPM valve? 3. NSF and/or BOCA 3. Static water Code approved level ft. 4. Depth of supply 4. Will water supply line be disinfected by installer?  I understand that it is my responsibility to notify the Howard County Heal pepartment when the installation is ready for inspection (otherwise this permiss null and void).  All information given above is true to the best of my knowledge.  Signature of Applicant:	2. Make	b. 220	taper . The agency
Pump exceeds well capacity Yes No If Yes, is low pressure cutoff switch installed? Yes No What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors Cable guards Other  Tank Piping Well data 1. Type 1. Depth ft. 2. Pressure relief 2. Size 2. Yield GPM valve? 3. NSF and/or BOCA 3. Static water Code approved level ft. 4. Depth of supply 4. Will water supply line be disinfected by installer?  I understand that it is my responsibility to notify the Howard County Heal pepartment when the installation is ready for inspection (otherwise this permiss null and void).  All information given above is true to the best of my knowledge.  Signature of Applicant:	3. Model #	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Tank  Piping  Piping  Pressure relief  Valve?  Solve approved  All information given above is true to the best of my knowledge.  Piff Yes, is low pressure cutoff switch installed? Yes  No  No  No  No  No  No  Road  Piping		i	**
What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors Cable guards Other	I. CapacityGPM		
Vibrations? Torque arrestors Cable guards Other	o. Pump exceeds well capacity	Yes NO	
Tank  1. Capacity  2. Pressure relief valve?  3. NSF and/or BOCA Code approved  4. Depth of supply line  1. Understand that it is my responsibility to notify the Howard County Heal Department when the installation is ready for inspection (otherwise this permis null and void).  All information given above is true to the best of my knowledge.  Signature of Applicant:	o. Pump exceeds well capacity of If Yes, is low pressure cutof	ff switch installed?	Yes No
2. Size 2. Yield GPM  valve? 3. NSF and/or BOCA 3. Static water  Code approved level ft.  4. Depth of supply be disinfected by installer?  I understand that it is my responsibility to notify the Howard County Healt Department when the installation is ready for inspection (otherwise this permiss null and void).  All information given above is true to the best of my knowledge.  Signature of Applicant:	o. Pump exceeds well capacity  if Yes, is low pressure cutof  What methods are used to prot	ff switch installed? tect the pump and elec	Yes No trical wiring from
2. Size 2. Yield GPM  valve? 3. NSF and/or BOCA 3. Static water  Code approved level ft.  4. Depth of supply be disinfected by installer?  I understand that it is my responsibility to notify the Howard County Healt Department when the installation is ready for inspection (otherwise this permiss null and void).  All information given above is true to the best of my knowledge.  Signature of Applicant:	o. Pump exceeds well capacity  if Yes, is low pressure cutof  What methods are used to prot	ff switch installed? tect the pump and elec	Yes No trical wiring from
2. Size 2. Yield GPM  valve? 3. NSF and/or BOCA 3. Static water  Code approved level ft.  4. Depth of supply be disinfected by installer?  I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permiss null and void).  All information given above is true to the best of my knowledge.  Signature of Applicant:	o. Pump exceeds well capacity if Yes, is low pressure cutof What methods are used to prot vibrations? Torque arrestor	ff switch installed? tect the pump and electsCable guard	Yes No trical wiring from Other
valve?    3. NSF and/or BOCA   3. Static water   Code approved   level   ft.     4. Depth of supply   4. Will water supply   be disinfected by installer?     I understand that it is my responsibility to notify the Howard County Heal Department when the installation is ready for inspection (otherwise this permiss null and void).  All information given above is true to the best of my knowledge.    Signature of Applicant:     Signature	o. Pump exceeds well capacity if Yes, is low pressure cutof What methods are used to prot vibrations? Torque arrestor	ff switch installed? tect the pump and electsCable guard	Yes No trical wiring from Other Well data
I understand that it is my responsibility to notify the Howard County Heal Department when the installation is ready for inspection (otherwise this permiss null and void).  All information given above is true to the best of my knowledge.  Signature of Applicant:	Tank  Capacity	res No No	Yes No trical wiring from Other Well data  1. Depth ft.
I understand that it is my responsibility to notify the Howard County Heal Department when the installation is ready for inspection (otherwise this permiss null and void).  All information given above is true to the best of my knowledge.  Signature of Applicant:	Fump exceeds well capacity If Yes, is low pressure cutof What methods are used to prot vibrations? Torque arrestor  Tank Capacity Pressure relief	res No No	Yes No trical wiring from Other Well data  1. Depth ft.
I understand that it is my responsibility to notify the Howard County Heal Department when the installation is ready for inspection (otherwise this permiss null and void).  All information given above is true to the best of my knowledge.  Signature of Applicant:	Fump exceeds well capacity If Yes, is low pressure cutof What methods are used to prot vibrations? Torque arrestor  Tank Capacity Pressure relief	res No No	Yes No trical wiring from Other Well data  1. Depth ft.
I understand that it is my responsibility to notify the Howard County Heal Department when the installation is ready for inspection (otherwise this permits null and void).  All information given above is true to the best of my knowledge.  Signature of Applicant:	Fump exceeds well capacity If Yes, is low pressure cutof What methods are used to prot vibrations? Torque arrestor  Tank Capacity Pressure relief	res No No	Yes No trical wiring from Other Well data  1. Depth ft.
Department when the installation is ready for inspection (otherwise this permiss null and void).  All information given above is true to the best of my knowledge.  Signature of Applicant:	Fump exceeds well capacity If Yes, is low pressure cutof What methods are used to prot vibrations? Torque arrestor  Tank Capacity Pressure relief	Piping  1. Type  2. Size  3. NSF and/or BOCA Code approved 4. Depth of supply	Yes No trical wiring from  S Other  Well data  1. Depth ft.  2. Yield GPM  3. Static water level ft.  4. Will water supply
Department when the installation is ready for inspection (otherwise this permiss null and void).  All information given above is true to the best of my knowledge.  Signature of Applicant:	Fump exceeds well capacity If Yes, is low pressure cutof What methods are used to prot vibrations? Torque arrestor  Tank Capacity Pressure relief	Piping  1. Type  2. Size  3. NSF and/or BOCA Code approved 4. Depth of supply	Yes No trical wiring from  S Other  Well data  1. Depth ft.  2. Yield GPM  3. Static water level ft.  4. Will water supply be disinfected by
Department when the installation is ready for inspection (otherwise this permiss null and void).  All information given above is true to the best of my knowledge.  Signature of Applicant:	Fump exceeds well capacity If Yes, is low pressure cutof What methods are used to prot vibrations? Torque arrestor  Tank Capacity Pressure relief	Piping  1. Type  2. Size  3. NSF and/or BOCA Code approved 4. Depth of supply	Yes No trical wiring from  S Other  Well data  1. Depth ft.  2. Yield GPM  3. Static water level ft.  4. Will water supply be disinfected by
All information given above is true to the best of my knowledge.  Signature of Applicant:	Tank  Capacity  Pressure relief  valve?  Understand that it is my res	ff switch installed? tect the pump and elects Cable guard  Piping 1. Type 2. Size 3. NSF and/or BOCA Code approved 4. Depth of supply line  ponsibility to notify	Yes No trical wiring from  Other  Well data  1. Depth ft.  2. Yield GPM  3. Static water level ft.  4. Will water supply be disinfected by installer?  the Howard County Healt
Signature of Applicant:	Tank  Capacity  Pressure relief  valve?  Understand that it is my res	ff switch installed? tect the pump and elects Cable guard  Piping 1. Type 2. Size 3. NSF and/or BOCA Code approved 4. Depth of supply line  ponsibility to notify	Yes No trical wiring from  Other  Well data  1. Depth ft.  2. Yield GPM  3. Static water level ft.  4. Will water supply be disinfected by installer?  the Howard County Healt
Signature of Applicant:	Fump exceeds well capacity If Yes, is low pressure cutoff What methods are used to protect vibrations? Torque arrestor  Tank Capacity Pressure relief valve?  understand that it is my res Department when the installation	ff switch installed? tect the pump and elects Cable guard  Piping 1. Type 2. Size 3. NSF and/or BOCA Code approved 4. Depth of supply line  ponsibility to notify	Yes No trical wiring from  Other  Well data  1. Depth ft.  2. Yield GPM  3. Static water level ft.  4. Will water supply be disinfected by installer?  the Howard County Healt
	Fump exceeds well capacity If Yes, is low pressure cutoff What methods are used to protect vibrations? Torque arrestor  Tank Capacity Pressure relief valve?  understand that it is my res Department when the installation	ff switch installed? tect the pump and elects Cable guard  Piping 1. Type 2. Size 3. NSF and/or BOCA Code approved 4. Depth of supply line  ponsibility to notify	Yes No trical wiring from Other  Well data 1. Depth ft. 2. Yield GPM 3. Static water level ft. 4. Will water supply be disinfected by installer?  the Howard County Healt
	If Yes, is low pressure cutoff. What methods are used to protect vibrations? Torque arrestor ank Capacity Pressure relief valve?  understand that it is my respectively and the installation is null and void).	ff switch installed? tect the pump and elects Cable guard  Piping 1. Type 2. Size 3. NSF and/or BOCA Code approved 4. Depth of supply line  ponsibility to notify n is ready for inspect	Yes No trical wiring from  S Other  Well data  1. Depth ft.  2. Yield GPM  3. Static water level ft.  4. Will water supply be disinfected by installer?  the Howard County Healt ion (otherwise this permi
The state of the s	If Yes, is low pressure cutoff What methods are used to prote vibrations? Torque arrestor ank Capacity Pressure relief valve?  understand that it is my respectively in the control of the	ff switch installed? tect the pump and elects Cable guard  Piping 1. Type 2. Size 3. NSF and/or BOCA Code approved 4. Depth of supply line  ponsibility to notify is ready for inspect	Yes No trical wiring from  S Other  Well data  1. Depth ft.  2. Yield GPM  3. Static water level ft.  4. Will water supply be disinfected by installer?  the Howard County Healt ion (otherwise this permi
Date:	If Yes, is low pressure cutoff. What methods are used to protein vibrations? Torque arrestor ank  Capacity Pressure relief valve?  Understand that it is my respectively and the installation is null and void).	ff switch installed? tect the pump and elects Cable guard  Piping 1. Type 2. Size 3. NSF and/or BOCA Code approved 4. Depth of supply line  ponsibility to notify is ready for inspect	Yes No trical wiring from Other  Well data 1. Depth ft. 2. Yield GPM 3. Static water level ft. 4. Will water supply be disinfected by installer?  the Howard County Healt ion (otherwise this permi
	If Yes, is low pressure cutoff. What methods are used to protein vibrations? Torque arrestor ank  Capacity Pressure relief valve?  Understand that it is my respectively and the installation is null and void).	ff switch installed? tect the pump and elects Cable guard  Piping 1. Type 2. Size 3. NSF and/or BOCA Code approved 4. Depth of supply line  ponsibility to notify n is ready for inspect  true to the best of my re of Applicant:	Yes No trical wiring from Other  Well data  1. Depth ft. 2. Yield GPM 3. Static water level ft. 4. Will water supply be disinfected by installer?  the Howard County Healt ion (otherwise this permi



In 2.51 mg. 4.0'



DEVELOPMENT CONSULTANTS

SURVEYORS, ENGINEERS & LAND PLANNERS

SUITE 102 🛫 🍍

17904 GEORGIA AVE. **OLNEY, MD 20632** 

**2**4-4570

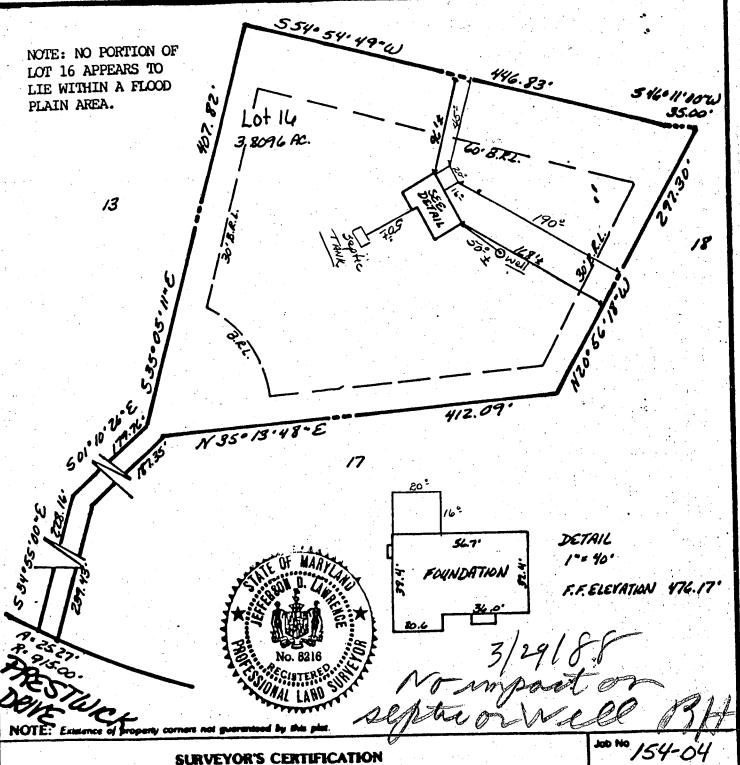
**NOUSE LOCATION PLAT** 

LOT ... IL BLOCK

SECTION 1

GREENE FIELDS

COUNTY OF PLOWARD PLAT BK. PLAT NO. 6672



I hereby certify that the property delired record, that the improvements were located by eccepted field precises and include par encroachments, if any. This Plat is not for determining properly lines, but proowners of property and also shose who purchase, mongage, or guarantee the title th date hereof, and as to them I woment the accuracy of this Plat

Land Surveyor No. 5216

Scale /\* = /00"

DATES

4/8/87 Wall Ck.

Final Loc

Recert