

8/15/89 noon
8-16-89
ASAP AM

03-310469

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH DISTRICT 3rd

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

P 44853
A 34926

DATE 8/11/89

DATE SYSTEM APPROVED 8/16/89

INSPECTOR Cwell

INDEXED

Dennis Feaga

IS PERMITTED TO INSTALL ☒ ALTER ☐

ADDRESS 1625 Henryton Road, Marriottsville, Maryland 21104 PHONE 442-5623

SUBDIVISION Bracciale Property ROAD 1830 Woodstock Road LOT 3

PROPERTY OWNER Joseph Rocco ~~Vincent Bracciale~~ PHONE: 465-5687

ADDRESS _____

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

GARBAGE GRINDER? YES _____ NO ☒

180
61930
150 ft trench

SEPTIC TANK CAPACITY 1500 GALLONS NUMBER OF BEDROOMS 5

TRENCHES 180 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 2 1/2 feet below original grade. Bottom maximum depth 8 1/2 feet below original grade. Effective area begins at 2 1/2 feet below original grade. 6 feet of stone below distribution pipe.

LOCATION - Place distribution box 255 feet off the front lot line and 25 feet off the left lot line as seen when facing the lot from Woodstock Road. Run trenches on contour toward the left and rear lot lines.

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

OK/CW

PLANS APPROVED BY Sid Abel DATE 4/06/89

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 TRENCHES ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCHES

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

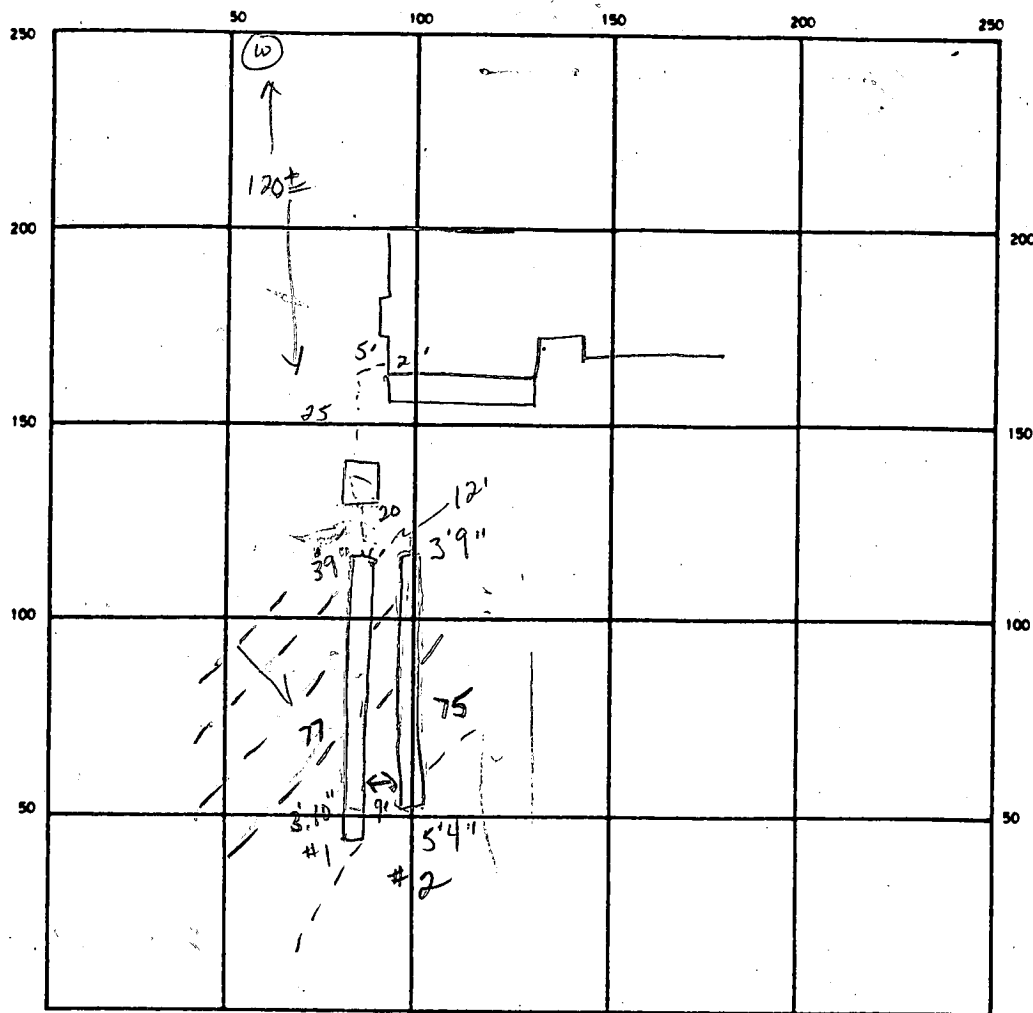
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

34926



SEPTIC TANK. LEVEL 1500 gal CLEANOUTS _____

DISTRIBUTION BOX. LEVEL _____

DRAIN FIELD TILE FIELD. DEPTH 9'9" FT. TRENCH WIDTH 2.0 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 6 FT. TOTAL LENGTH 77 75 = 152 FT.

NUMBER OF TRENCHES 2 ONE SIDEWALL BOTTOM AREA 912 SQ. FT.

DRYWELL INSIDE DIAMETER _____ FT. EFFECTIVE DEPTH BELOW INLET _____ FT.

ABSORBENT AREA 912 SQ. FT.

REMARKS 8-15-89 Leave trenches as they are. Must make sure that leachate pipe is level w/in 1/8". Must measure pipe before any cover is placed. OK to stone both trenches den

DATE SYSTEM APPROVED 8/16/89

INSPECTOR cwiller

Permit Application Request Canceled

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 49923

A REPAIR

DISTRICT 3rd

DATE 03/14/94

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~461-9933~~ 313-2640

DATE SYSTEM APPROVED

INSPECTOR

Duane Canter

IS PERMITTED TO INSTALL ☐ ALTER ☒

ADDRESS 698 Tuscauvilla Hills, Charlestown, West Virginia PHONE 410-465-8605

SUBDIVISION Bracciale Property LOT 3 ROAD 1810 Woodstock Road

PROPERTY OWNER Joseph Rocco

ADDRESS

SEPTIC TANK CAPACITY ^{existing} 15000 GALLONS second 1000gal septic tank optional

NUMBER OF BEDROOMS 5

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 300 if 3' wide trench, 225' if 4' stone fill

REPAIR - PURPOSE - SEPTIC SYSTEM HAS FAILED.

Call for inspection when ground is opened so sanitarian can recommend repair. 03/14/94
Install 3 Trenches 100 L.F. each, inlet @ 3' bottom @ 5' for 3' wide, or bottom @ 6'
for 2' wide Trenches. (IF 2' inlet is possible use 4ft stone fill with bottom
at 6' for Total of 225 Lin. Ft. of Trench.) Use a new dist. box, connected to
existing septic tank via a Ball Run Valve favoring new trench system. Old db. + ST. should
be pumped free of solids. Optional Second ST. or Septic for wash water only may be elected -
call to confirm such change - Install trenches on Contour
PLANS APPROVED BY *[Signature]* DATE 3/15/94

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, 90° ELBOWS NOT ACCEPTABLE.

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH

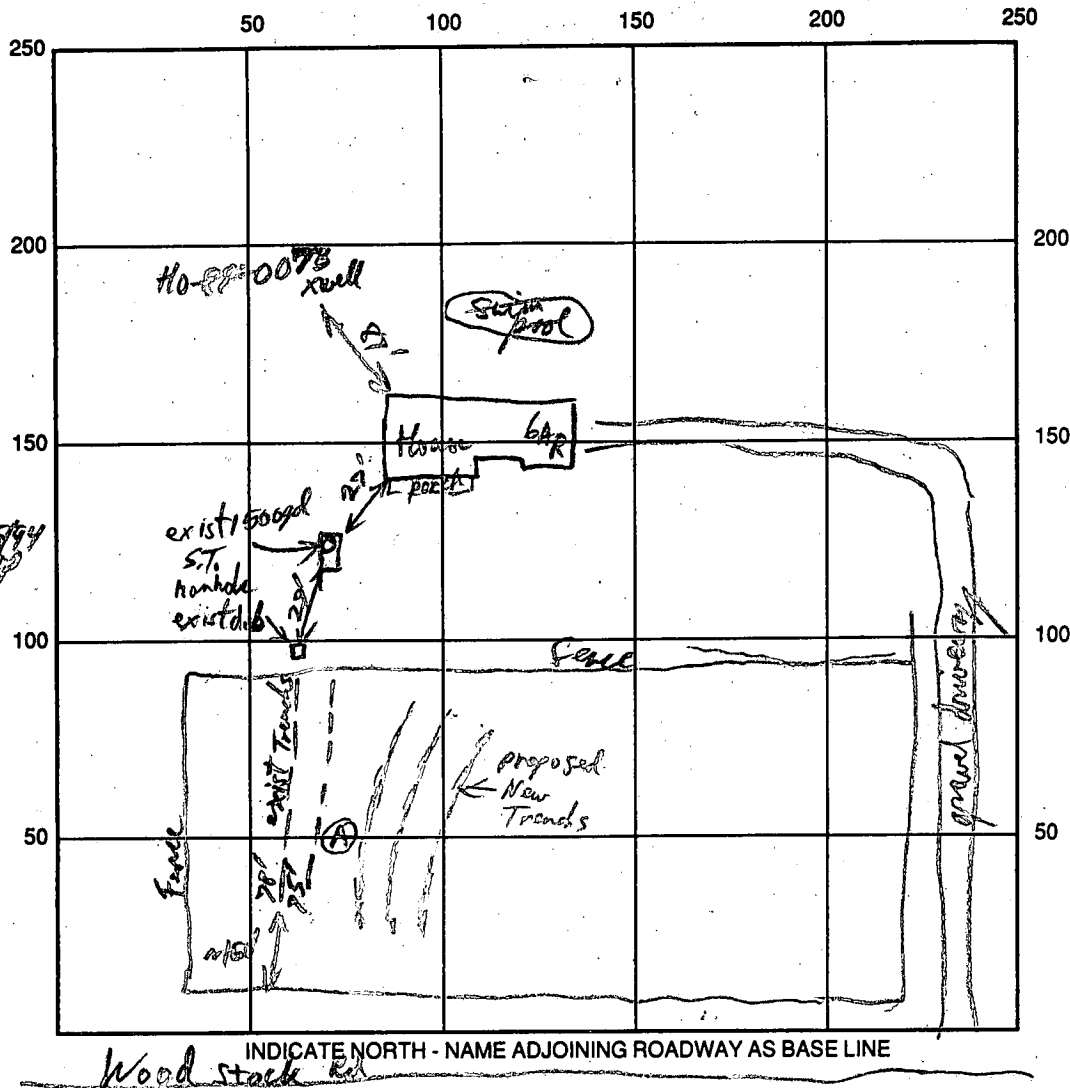
NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

PERMIT VOID AFTER TWO YEARS

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

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT



A Trench 3/15/94
 1-2 L-HL
 SL (mica)
 No water on back observed
 3-4 min pores on record ideal soils

SEPTIC TANK LEVEL _____ CLEANOUTS _____

DISTRIBUTION BOX LEVEL _____

DRAIN FIELD/TITLE DEPTH _____ FT. TRENCH WIDTH _____ FT. INLET DEPTH _____ FT.

EFFECTIVE GRAVEL DEPTH _____ FT. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ ONE SIDEWALL/BOTTOM AREA _____ SQ. FT.

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

ABSORBENT AREA _____ SQ. FT.

REMARKS: Failure due to solids/synopsis (excessive washer use) filling distribution trenches.
 May Consider Separate Septic System for bath water only 3/15/94
 The installer ran water into d.b. for 1/2 hr - water going into trench with no backups.
 Says pipe between S.T. + d.b. was cut by Power company installing electric line and not repaired properly so rainwater was flooding out Septic System. We'll withdraw repair permit application until further requested. 3/15/94

DATE SYSTEM APPROVED _____ INSPECTOR _____

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 34926

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT _____

DATE 2/04/85

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 Glenelg Manor Associates
12533 Folly Quarter Road
ADDRESS Ellicott City, Maryland 21043 PHONE 531-6455 Don Reuwer

PROPERTY LOCATION:

SUBDIVISION Bracciale Property LOT NO. 3

ROAD AND DESCRIPTION Woodstock Road

SIZE OF LOT 3.09 Acres TYPE BLDG. 3 or 4 Bedrooms
(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. /s/ Donald R. Reuwer, Jr.
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

① ②
SOIL PROFILE

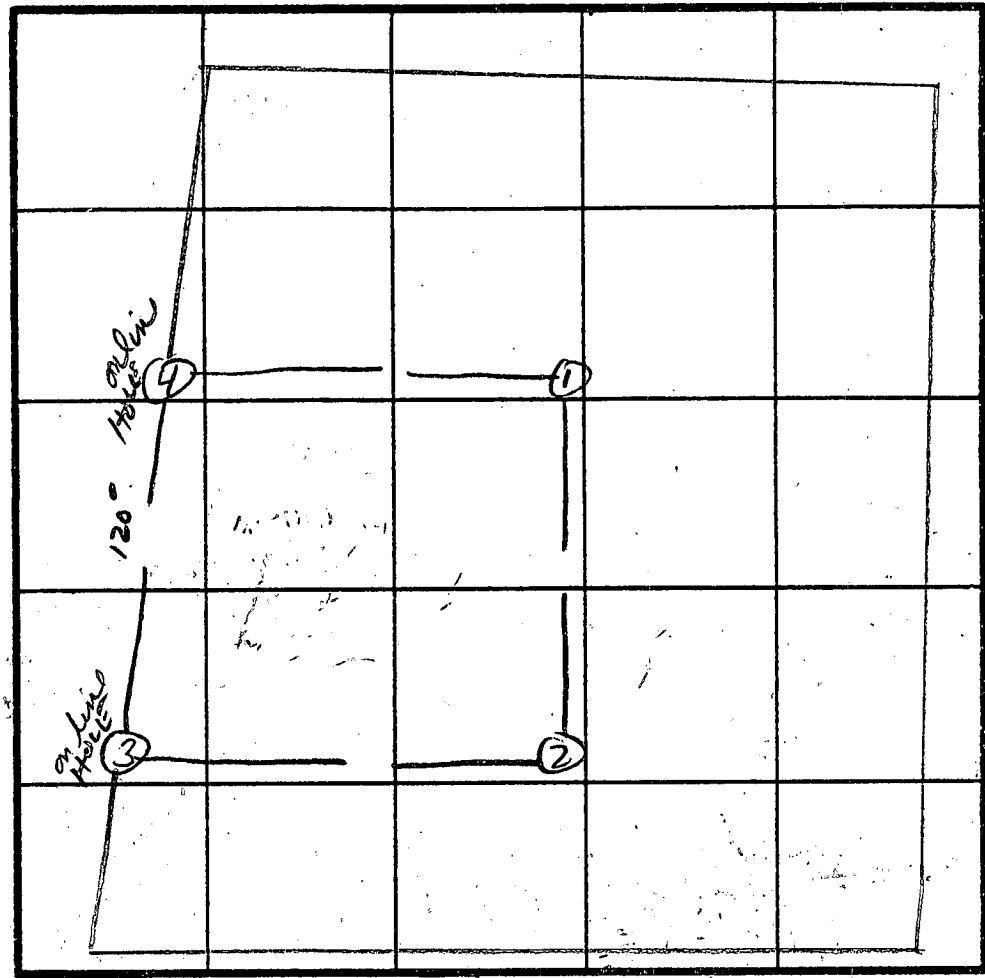
0' AP

1' BROWN CLAY LOAM

2.5' 60% SAPROLITE

SAND Silty micaceous 10-20% SAPROLITE

12-13'



70+

31

DEPTH 8.5'

INLET 2.5'

$\bar{x} = 3 \text{ min}$

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2/6/95	15	2'	12:32	12:34	12:34	12:37	3min
	16	13'					
	2V	12'	UNIFORM Good Soil STRUCTURE Below 3'				
	3	See times for LOT 2					(3min)
	4	See times for LOT 2					(2min)

EH-12-1079

REMARKS _____

TYPE OF SOIL Shale - loam - micaceous

TESTED BY S. Abel / C. Williams

ALSO PRESENT KETTERMAN, KEUWER

Well Permit No. HO - 88-0078
Location of property (road) Woodstock Road
Subdivision Bracciale Property Lot 3 Block Plat Sec.
Well Driller Westminster Rotary Owner Wimsatt Construction Co, T.E.

HD-224

C1 9611-1 SEQUENCE NO. (DENY USE ONLY)
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPE

THIS REPORT MUST BE SUBMITTED WITHIN
45 DAYS AFTER WELL IS COMPLETED.

COUNTY
NUMBER

A 34726

DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO.
FROM "PERMIT TO DRILL WELL"

8 13

15 20

22 26
(TO NEAREST FOOT)

28 29 30 31 32 33 34 35 36 37

OWNER

STREET OR RFD

last name

first name

TOWN

SUBDIVISION

SECTION

LOT

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	
Dirt	0	1	
Red Clay & Brown Sand	1	18	
Soft Brown & Blue Sandstone	18	29	
Hard Blue & Brown Sandstone	29	43	
Hard Brown Sandstone	43	44	X
Hard Black Sandstone	44	51	
Hard Brown Mica	51	53	X
Hard Black Sandstone	53	105	
laced w/ Brown Sandstone			
Brown Sandstone	105	106	X
Hard Black Sandstone			
Laced w/ Brown Sandstone	106	120	

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

yes
Y
no
N

TYPE OF GROUTING MATERIAL

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 14 NO. OF POUNDS 1316

GALLONS OF WATER 94

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 39 ft.
(enter 0 if from surface)

CASING RECORD
casing types
insert
appropriate
code
below
STEEL CO
PL OT

MAIN CASING TYPE
Nominal diameter top (main) casing (nearest inch)
Total depth of main casing (nearest foot)
ST 6 41.3

OTHER CASING (if used)
diameter inch depth (feet) from to
P L 4 0 40
P L 4 30 60
P L 4 90 110
P L 4 120 130

SCREEN RECORD
screen type or open hole
insert appropriate code below
ST BR HO
STEEL BRASS OPEN
PL BRONZE HOLE
PLASTIC OTHER

DEPTH (nearest ft.)
EACH SCREEN
1 FL 40 50
2 FL 80 90
3 FL 110 120

SLOT SIZE .020

DIAMETER OF SCREEN 4 (NEAREST INCH)

GRAVEL PACK from 128 to 90

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
70 72 74 75 76
TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 3

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

METHOD USED TO MEASURE PUMPING RATE Submersible

WATER LEVEL (distance from land surface)

BEFORE PUMPING 32

WHEN PUMPING 37

TYPE OF PUMP USED (for test)

A air P piston T turbine
C centrifugal R rotary O other (describe below)
J jet S submersible

PUMP INSTALLED

DRILLER WILL INSTALL PUMP YES NO

(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:

CAPACITY:
GALLONS PER MINUTE (to nearest gallon) 31 35

PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH (nearest ft.) 43 47

CASING HEIGHT (circle appropriate box and enter casing height)

+ above
- below
LAND SURFACE 2 (nearest foot)

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)

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. 296
Ronald L. Kyker

DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)

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

COUNTY

WESTMINSTER ROTARY WELL DRILLING, INC.

DANA KYKER & SONS

P. O. BOX 861

PH. # 848-4170 OR 876-1911

COMMERCIAL & DOMESTIC

October, 1988

T. E. Wimsatt Construction Co.
8401 Murphy Road
Laurel, Maryland 20707

Bracciale Property
Lot 3
Woodstock Road

Howard County Health Dept. #A34926
State of Maryland #HO-88-0078

LOG OF DRY HOLE #1-503 FEET

Dirt	0	1	
Soft Brown Mica			
& Clay	1	9	
Soft Brown Mica	9	30	<u>X</u>
Hard, Soft, Blue			
& Blk. Sandstone	30	53	
Hard Black & Blue			5 Bags Cement to
Sandstone	53	389	Backfill
Hard Black Sand-			
Stone & Opening	389	390	
Hard Black &			
Blue Sandstone	390	503	

LOG OF DRY HOLE #2-453 FEET

Dirt	0	1	
Soft Brown Clay &			
Sand	1	9	
Soft Brown Mica &			5 Bags Cement to
Sand	9	36	Backfill
Soft, Hard Brown			
Sandstone	36	50	
Hard Black Sand-			
Stone laced w/	50	80	
Brown Sandstone			
Hard Black			
Sandstone	80	453	

LOG OF DRY HOLE #3-503 FEET

Dirt	0	1
Soft Brown Clay		
& Sand	1	19
Hard, Soft, Brown		
Black, Blue		
Sandstone	19	36
Hard Black &		
Blue Sandstone	36	503

5 Bags Cement to
Backfill

LOG OF DRY HOLE #4-330 Feet

Dirt	0	1
Red Clay	1	5
Soft Brown Schist		
& Sand	5	42
Hard, Soft,		
Brown Sandstone	42	55
Hard Blue		
Sandstone laced	55	76
/w/ Brown Sandstone		
Hard Black		
Sandstone laced		
/w/ Blue Schist	76	330

5 Bags Cement to
Backfill

9/7/89 (PM)

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

New Installation X
Replacement _____

Receipt # 44933
Date 09/07/89

Name of Installer FEAGA Plumbing & Heating

Telephone 442-5729

License Number 6318

Certified Well Pump Installer _____ Well Driller _____ Registered Plumber X

Name of Property Owner VINCENT BRACCIAL

Telephone _____

Subdivision BREEZE WOOD FARMS Lot # 3

Well Tag # HO - 58 - 0078

Site Address 1830 WOODSTOCK RD

Pump

1. Type
a. Deep well jet _____
b. Shallow well jet _____
c. Submersible X
2. Make Goulds
3. Model # _____
4. Capacity 5 GPM

Motor

1. Horsepower 1/2
2. RPM 1740
3. Voltage _____
a. 110 _____
b. 220 X

Pitless Adapter

1. Make _____
2. Model # _____
3. Depth _____

5. Pump exceeds well capacity Yes _____ No X
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 X

Tank

1. Capacity 82
2. Pressure relief valve? YES

Piping

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

Well data

1. Depth 120 ft.
2. Yield _____ GPM
3. Static water level _____ ft.
4. Will water supply be disinfected by installer? YES

9/7/89 TRENCH TO 30" DEEP
HOLE CUT, LING NO YET INSTALLED.
OK TO FINISH & COVER. C.W. [Signature]

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: [Signature]

Date: 9/7/89

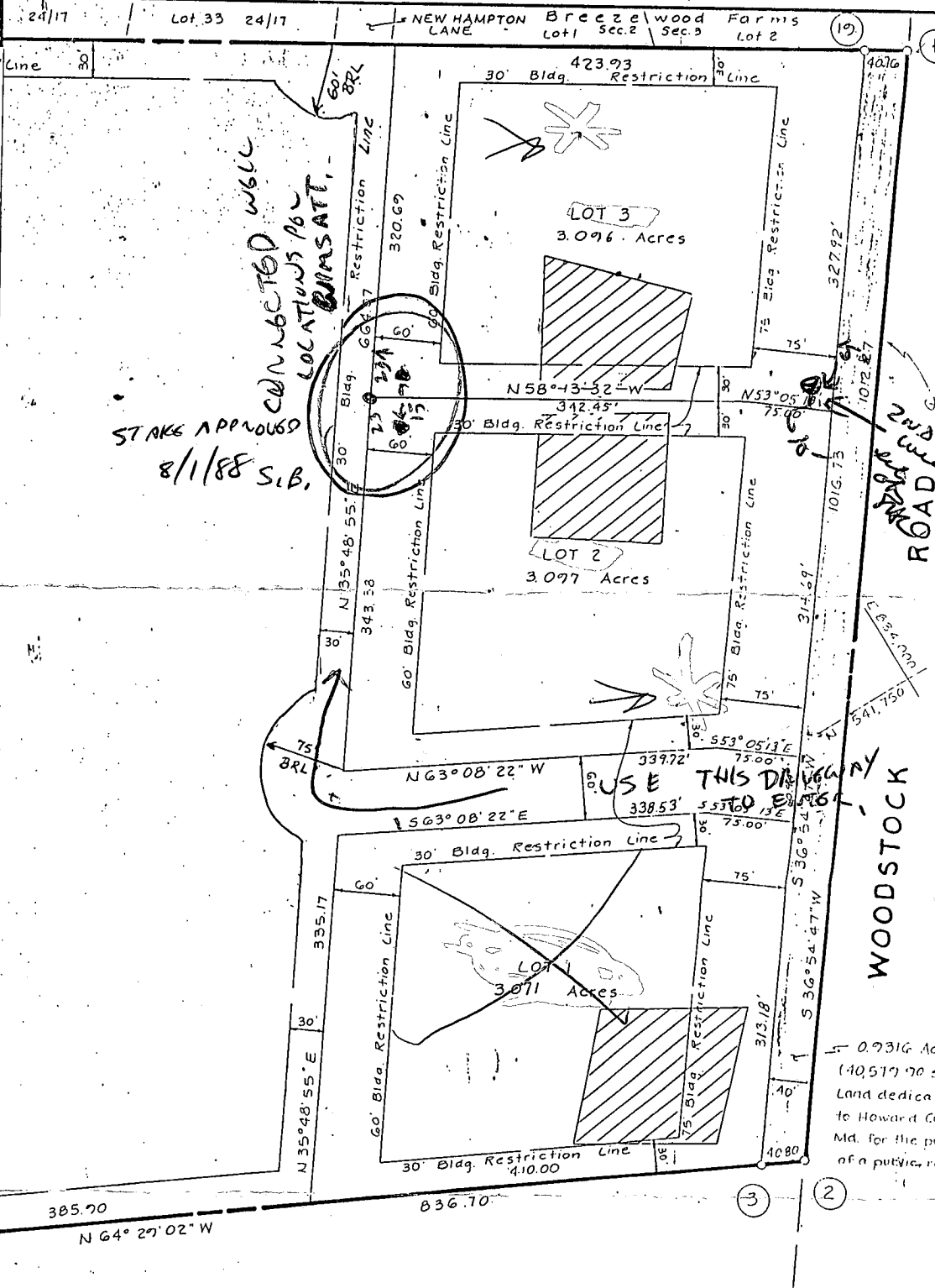
Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.

B 1	6320	SEQUENCE NO. (DP USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER
(THE NUMBER IS TO BE PUNCHED IN COLUMNS 3-6 ON ALL CARDS)		40-88-0078 fill in this form completely		
Date Received (APA) 672085		LOCATION OF WELL 8 COUNTY: HOWARD 23 SUBDIVISION: BRACCA/LE ADP SECTION: 44 46 LOT: 9 50 52 NEAREST TOWN: WOODSTOCK MILES FROM TOWN (enter 0 if in town): 1 73 76 77 78		
OWNER INFORMATION 15 Last Name: WILMSATT Owner: WILMSATT First Name: CONSTRUCTION 36 8401 N. MAPLE RD Street or RFD: 55 1 ANNAPOLIS Town: 70 State: 72 MD 20709 Zip: 76		DRILLER INFORMATION Driller's Name: Ronald L. Kyker 77 License No. 80: 296 Firm Name: Westminster Rotary Well Drilling, Inc. P.O. Box #861., Westminster, Md. 21157 Address: Ronald L. Kyker Signature: Ronald L. Kyker Date: 07/15/88		
WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.): 4 8 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY): 550 14 20		DIRECTION OF WELL FROM TOWN (CIRCLE BOX) ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH: N WEST: W EAST: E SOUTH: S 400 400 DISTANCE FROM ROAD: 34 37 ENTER FT or MI: 47 38 39		
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)		NOT TO BE FILLED IN BY DRILLER. HEALTH DEPARTMENT APPROVAL COUNTY NAME: Howard COUNTY NO.: A 34926 STATE SIGNATURE: _____ INSERT S DATE ISSUED: 080488 CO SIGNATURE: Chan W. Olan EXP. DATE: 2/4/89 NORTH GRID: 542000 EAST GRID: 0833000		
APPROXIMATE DEPTH OF WELL: 200 24 28 FEET APPROXIMATE DIAMETER OF WELL: 6 INCH NEAREST TOWN: _____		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER: 1. City 2. _____ 3. _____ WRITE THE BOX NUMBER FROM THE MAP HERE: E 839 3 N 549 4 DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 		
METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jetted & DRIVEN 30 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary) 31 CABLE REVERSE-ROTARY Drive-POINT other: _____		REPLACEMENT OR DEEPEMED WELL'S (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 DEEPEM AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE): _____		
Not to be filled in by driller (OEP USE ONLY) APPROP. PERMIT NUMBER: _____ GAP _____ FORCE: 67 68 WRITE INITIALS IN BOX: 69 PERMIT NO.: 40-88-0078 70 71 72 73 74 75 76 77 78 79		SPECIAL CONDITIONS: _____		



8107 Main Street
Ellicott City, MD 21043
301/461-7100
301/465-4920

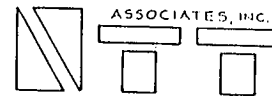
Terri Bracciale
Sales Associate
301/465-5687 Home



D.R. Reuver
1285/237

Owner:

Vincent A. and Teresa Bracciale
15828 Millbrook Lane
Laurel, MD 20707



SURVEYING & LAND DEVELOPMENT
16205 Old Frederick Road
Mt. Airy, Maryland 21771
(301) 442-2031

RECORDED PLAT 6525

12-16-1985 AMONG THE LAND RECORDS OF
HOWARD COUNTY, MD

SURVEYOR'S CERTIFICATE

I hereby certify that the Final Plat shown hereon is correct, that it is a subdivision of all the lands conveyed by Russell V. and Hazel L. Beckett & Frank F. and Emma E. Favazza to Vincent A. and Teresa Bracciale deed dated Sept. 13, 1984 and recorded in the Land Records of Howard County in Liber 1285 Folio 247, and that all monuments are in place, or will be in place prior to the acceptance of the streets in the subdivision by Howard Co. as shown, in accordance with the Annotated Code of Maryland, as amended.

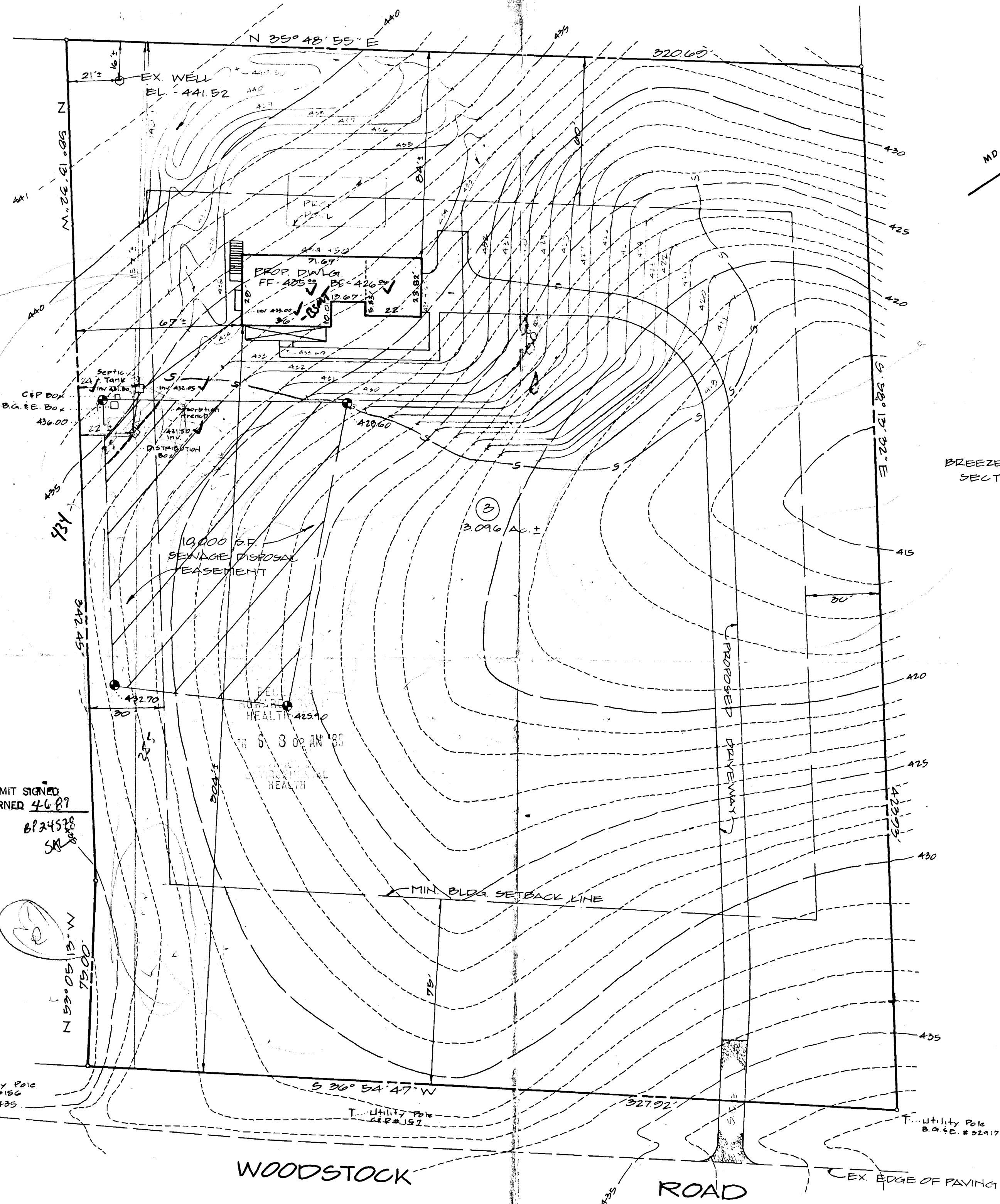


BRACCIALE PROPERTY

LOTS 1, 2, 3 and 4

Parcel 36

Lot 1, 2, 3 and 4



S — S - SILT FENCE
S.C.E. - STABILIZED CONSTRUCTION
ENTRANCE

BASEMENT CANNOT BE SEWERED BY GRAVITY.

I CERTIFY THE ABOVE MEASUREMENTS ARE ACTUAL
& CORRECT FOR THIS PROPERTY.
SIGNED: Mark X. Bolal

3RD ELECTION DISTRICT HOWARD CO, MD.
SCALE: 1"=30' APRIL 3, 1989