

8/31/00
sewer
vent
anytime
12/6/00
Anytime
check well cap

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

461-9933

03-325113

INDEXED

P 514212

A 50560-H

DISTRICT _____

DATE 8/29/2000

DATE SYSTEM APPROVED 8/31/00

INSPECTOR *AM*

J. Joseph Gartland, Inc.

IS PERMITTED TO INSTALL _____ ALTER _____

ADDRESS 1835 West Old Liberty Road, Westminster, MD 21157

PHONE 410-875-2400

SUBDIVISION Lyndonbrook

LOT 8

ROAD 2082 St. James Road

MAURICE & EVELYN BRADLEY

PROPERTY OWNER Dorsey Family Homes

ADDRESS 9926 Cypressmede Drive, Ellicott City, MD 21042

NUMBER OF BEDROOMS: 4

- House is served by a shared community septic system. As part of the general permit for the community system, items previously installed or under construction include grinder pump installation, connection from grinder pump to common effluent line and house and shared disposal fields.

- This permit is limited to installation of the individual house sewer line and grinder pump installation only as per the signed building permit site plan. Copy Attached. 7/27/00 O.K. (B.B.)

8/29/00 This house has a direct gravity feed into the main line - a grinder pump / pump test not needed *AM*

SEWER PERMIT DATED

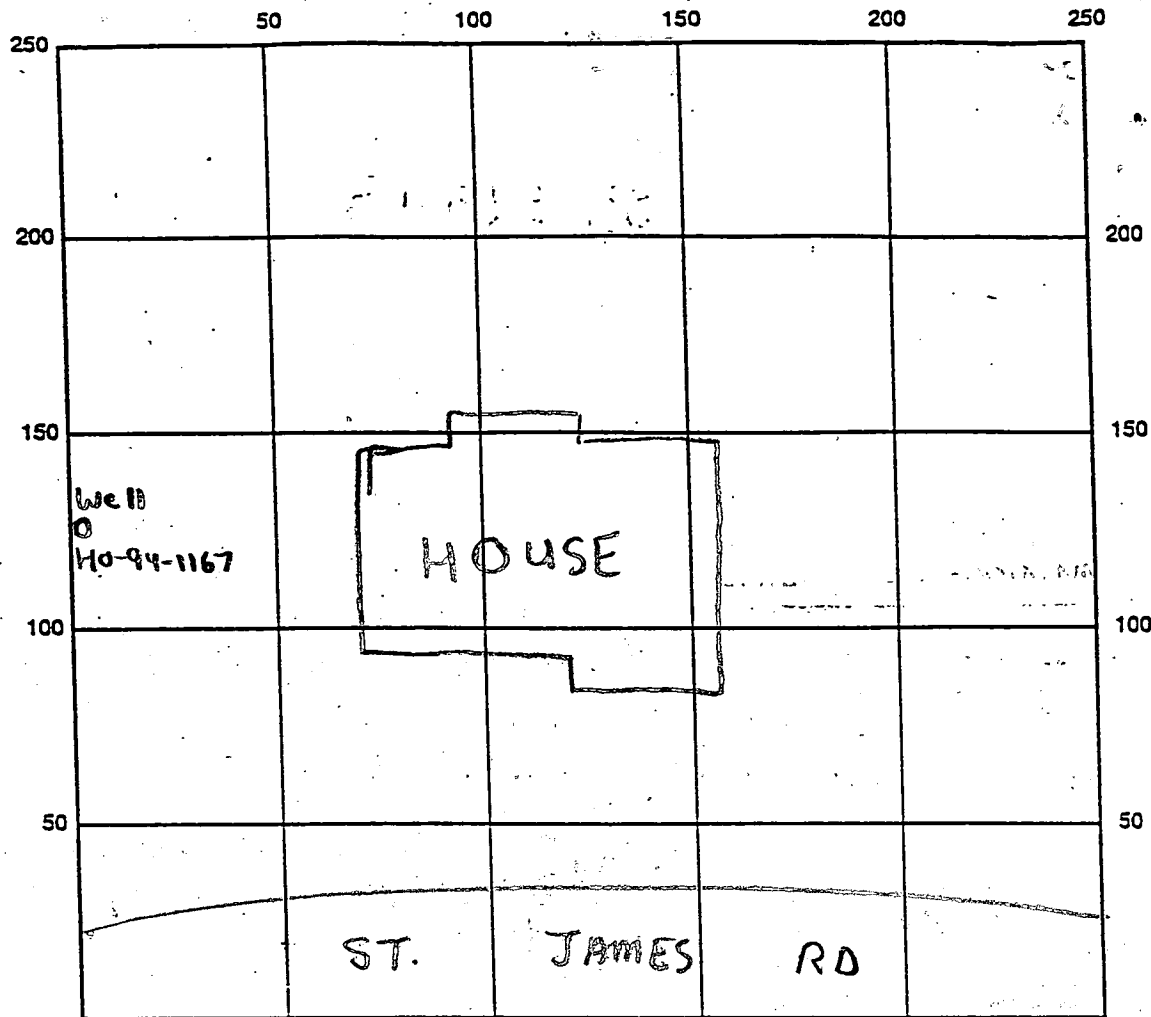
AND RETURNED 12/26/2001

800133713 FINISH BASEMENT

PLANS APPROVED BY Amy McMillen

DATE 7/14/2000

A50560-H



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL _____ CLEANOUTS _____

REMARKS: NO INSP BY HCHD ON HOUSE SEWER

DATE SYSTEM APPROVED 8/31/00 INSPECTOR Amy Mcmillen (SRK)
12/7/00
fixed cleanout
Steven R. Krag

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 ☒
Replacement ☐

Receipt # _____
Date _____

Name of Installer Michael Bartland

Telephone (410) 549-1755

License Number _____

Certified Well Pump Installer _____ Well Driller _____ Registered Plumber 6353

Name of Property Owner Dorsey Family homes

Telephone (410) 465-2200

Subdivision Lyndonbosc Lot # 8

Well Tag # HO-94-1167

Site Address 2082 Saint James Rd

Pump

1. Type

- a. Deep well jet _____
b. Shallow well jet _____
c. Submersible ☒

2. Make Forzuic

3. Model # _____

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 tapc ☒

Motor

1. Horsepower 1/2

2. RPM _____

3. Voltage _____

a. 110 _____

b. 220 ☒

Pitless Adapter

1. Make Harvard

2. Model # _____

3. Depth 42"

Tank

1. Capacity 42

2. Pressure relief valve? ☒

Piping

1. Type Plastic

2. Size 1"

3. NSF and/or BOCA Code approved ☒

4. Depth of supply line 42"

Well data

1. Depth 290 ft.

2. Yield 7 GPM

3. Static water level 60' ft.

4. Will water 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 permit is null and void).

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

Signature of Applicant: Michael Bartland

Date: 10/5/00

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

HD-215

10/5/00 - OK BB except loose cap (SRW)
10/27/00 - OLD WPI FORM ACCEPTED (SRW)

N30°09'21"E 160.88'

LOT 8
33,495 S.F.
MCE=582.00
C.N.S.

FOREST CONSERVATION
EASEMENT #1

N68°38'28"W

LOT 9

LIMIT OF DISTURBANCE

EX POWER POLE
(TO BE REMOVED)
& SWALE

CHAMBERLAIN II

FF=582.18
BE=580.51

7/14/00
Approved
FOR SHARED

MAINT ESMT
SEPTIC
HOOK-UP

L=103.10' R=350.00'

ST. JAMES ROAD

PLAN VIEW

SCALE: 1"=30'

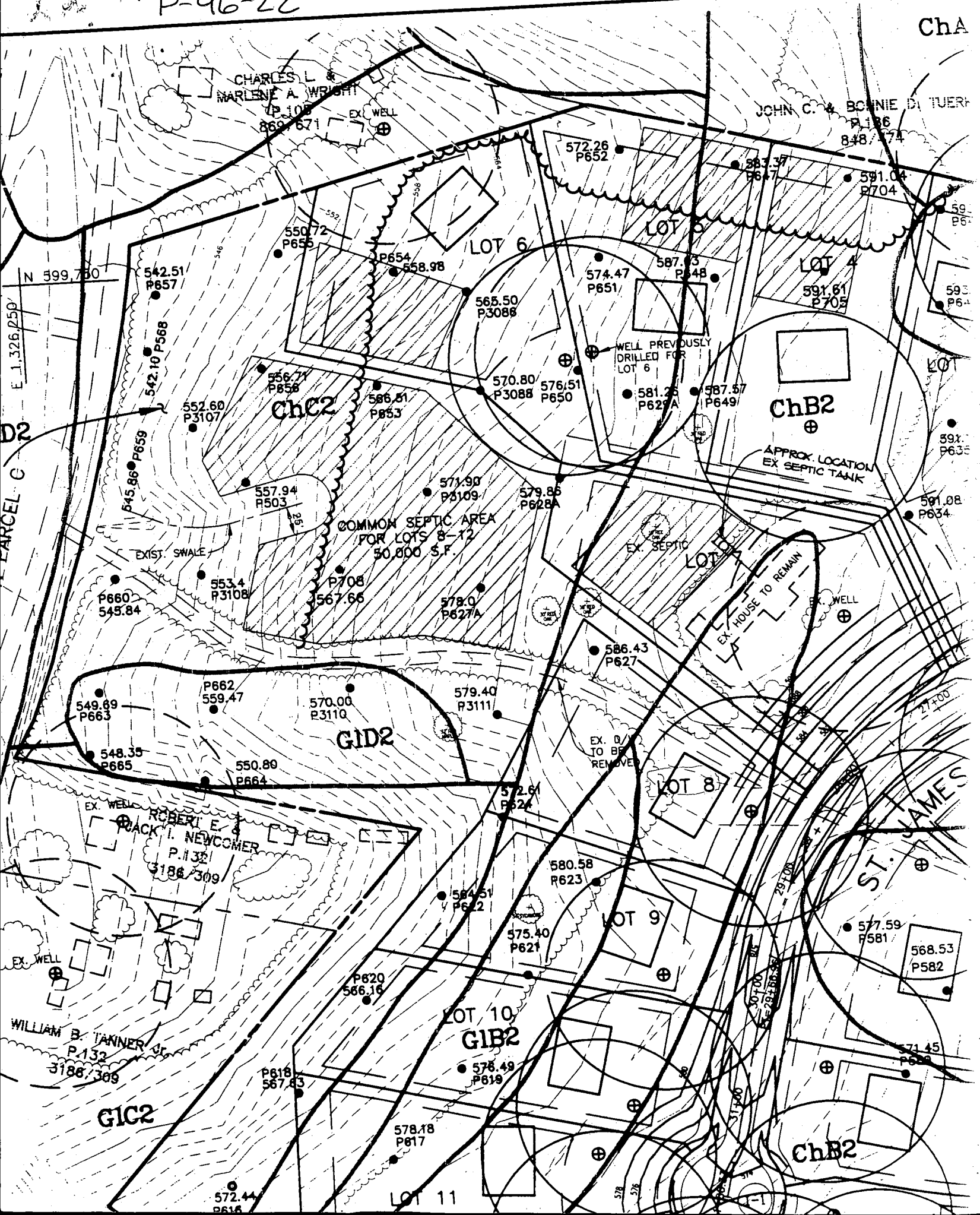
BENCHMARK ENGINEERING

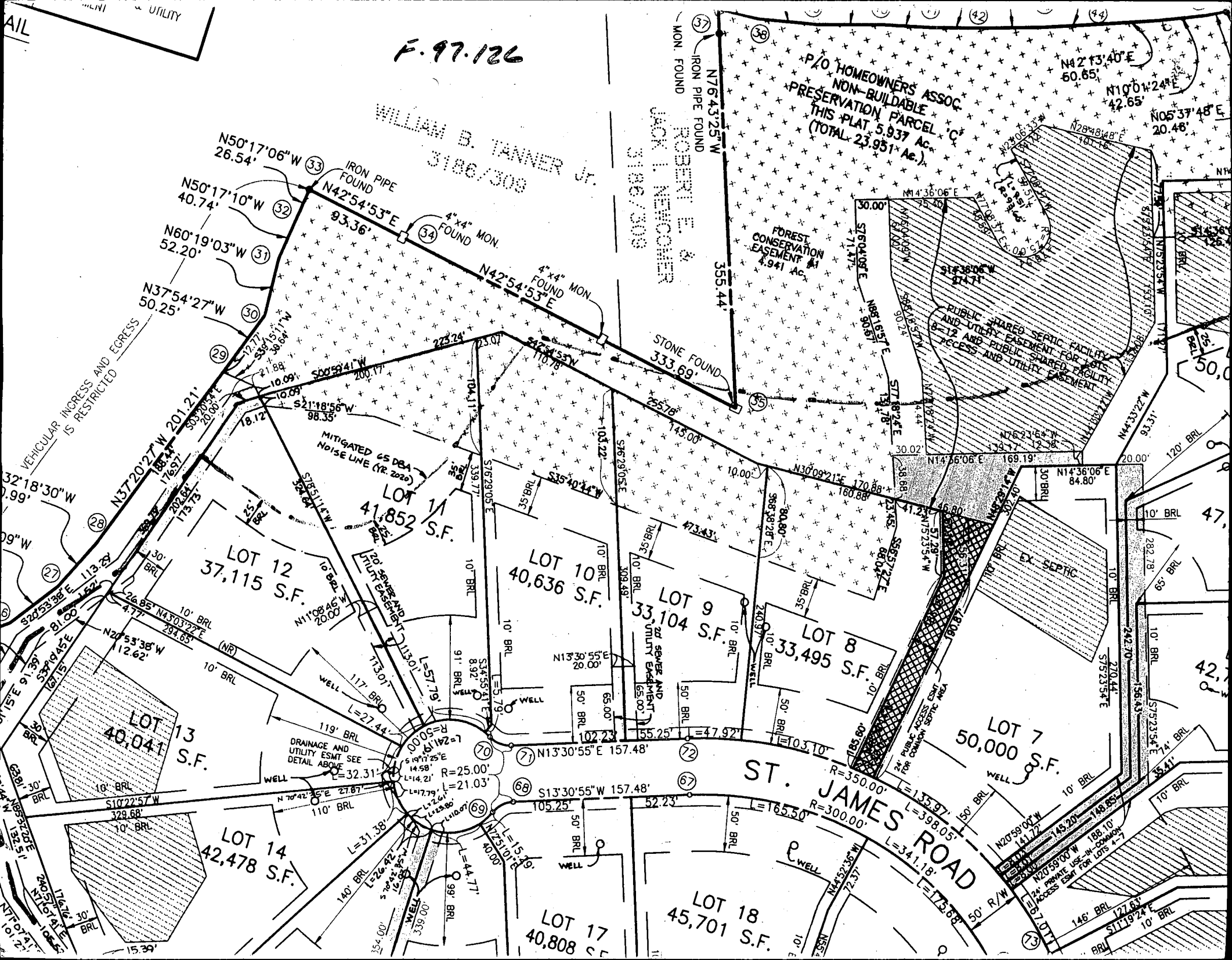
16' DRIVEWAY
P-2 PAVEMENT

24' SEWER AND UTIL
PUBLIC ACCESS EASEMENT
FOR COMMON SEPTIC A

585.0
3

ChA





C16067

SEQUENCE NO.
(MDE 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

50560H

ST/CO USE ONLY
DATE Received
7-18-97

DATE WELL COMPLETED
MM 7 DD 7 YY 97

Depth of Well
22 265 26
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
HO-94-1167

OWNER SDC

STREET OR RFD last name St. James Rd. first name

TOWN West Friendship

SUBDIVISION Stiegler Property SECTION LOT 8

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 | |
| Sand | 0 | 48 | |
| Gray Mica Rock | 48 | 265 | ✓ |

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 15 NO. OF POUNDS 1410

GALLONS OF WATER 90

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 45 ft.

CASING RECORD

casing
types
insert
appropriate
code
below

STEEL ST CONCRETE CO

PLASTIC PL OTHER OT

MAIN CASING TYPE ST

Nominal diameter
top (main) casing
(nearest inch)! 6

Total depth
of main casing
(nearest foot) 53

OTHER CASING (if used)

diameter depth (feet)

inch from to

SCREEN RECORD

screen type
or open hole

STEEL ST BRASS BR OPEN HOLE HO

BRONZE PL PLASTIC PL OTHER OT

insert
appropriate
code
below

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED yes Y no N

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 26.04.04 "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 LIC. NO. 1 MS DO 24

DRILLERS SIGNATURE

(MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. 1 MS DO 27

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

DEPTH (nearest ft.)

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

SLOT SIZE 1 2 3

DIAMETER
OF SCREEN (NEAREST
INCH)

56 60

from to

GRAVEL PACK
IF WELL DRILLED
WAS FLOWING WELL
INSERT F IN BOX 68

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

T (E.R.O.S.) W Q

70 72 74 75 76

TELESCOPE LOG OTHER DATA
CASING INDICATOR

PUMPING TEST

HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min.) 6

METHOD USED TO
MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 42 ft.

WHEN PUMPING 120 ft.

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

IF DRILLER INSTALLS PUMP, THIS SECTION
MUST BE COMPLETED FOR ALL WELLS.

TYPE OF PUMP INSTALLED
PLACE (A,C,J,P,R,S,T,O)
IN BOX 29

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 3 (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)

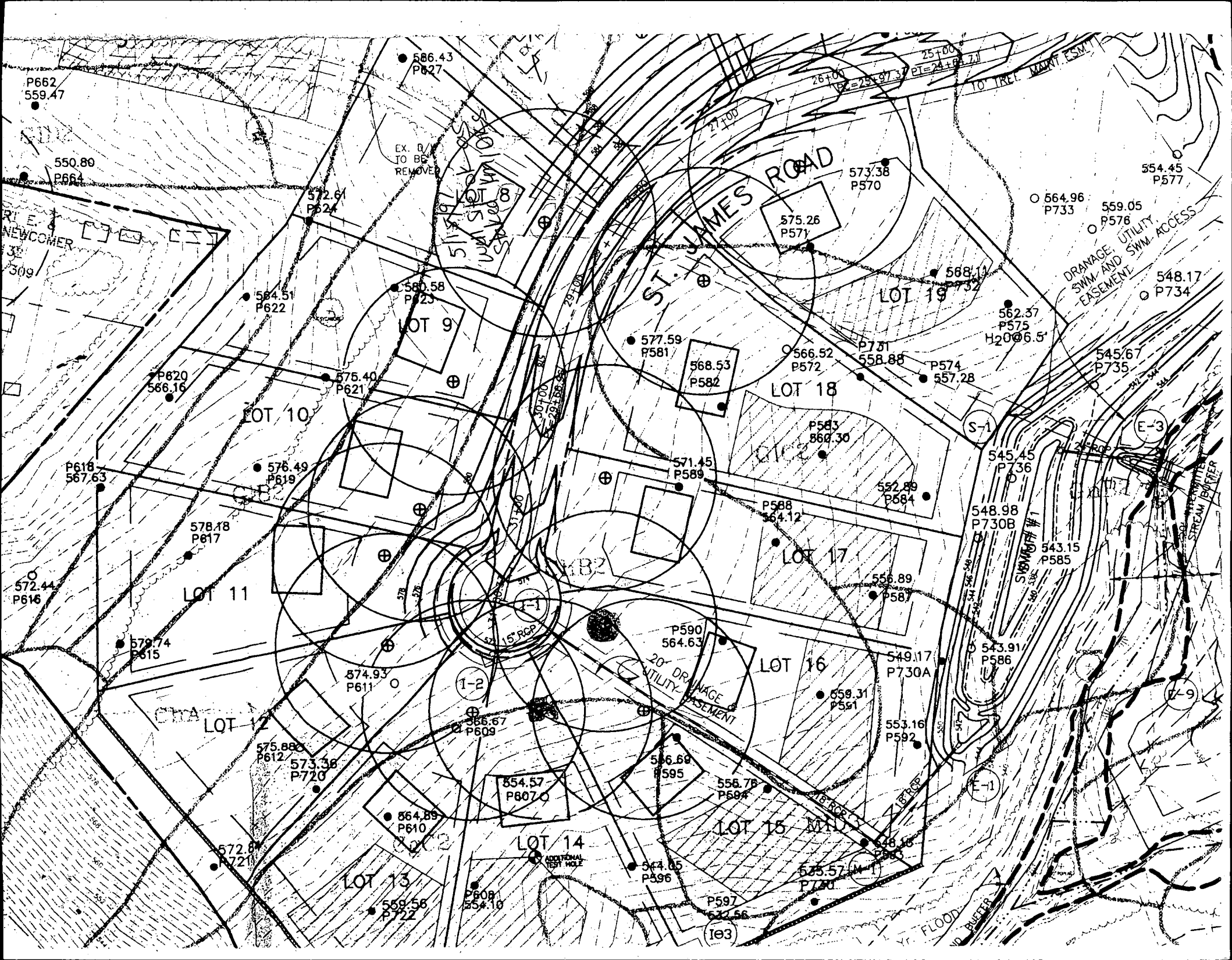
St. James Rd.

Well Permit No. HO - 94-1167
Location of property (road) St. James Road
Subdivision Stiegler Property Lot 8 Block Plat Sec.
Well Driller Joseph Mayne Owner SDC

Depth of well 265'
Distance of measuring point (M.P.) above ground 2 1/2
Static water level (S.W.L.) below M.P. 42'

Time pump started 10:35 Pumping rate 20 gpm.
Total time 15 min. to reach pumping water level 120 ft. below M.P.

[illegible]



Steigler Property - Well permits for Lots 25 - 28

- Site inspection was conducted on 5/28/97.
- The shown existing well location on the percolation certification plat is actually the location of the existing septic.
- The developers have decided to keep the existing house.

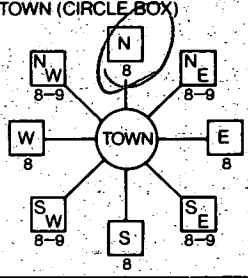
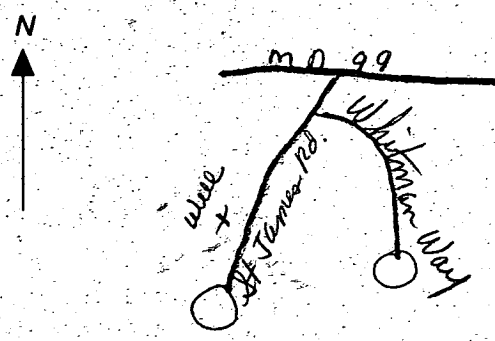
In light of the above findings the following sequence of events was agreed upon by the developer, Clark Sperry:

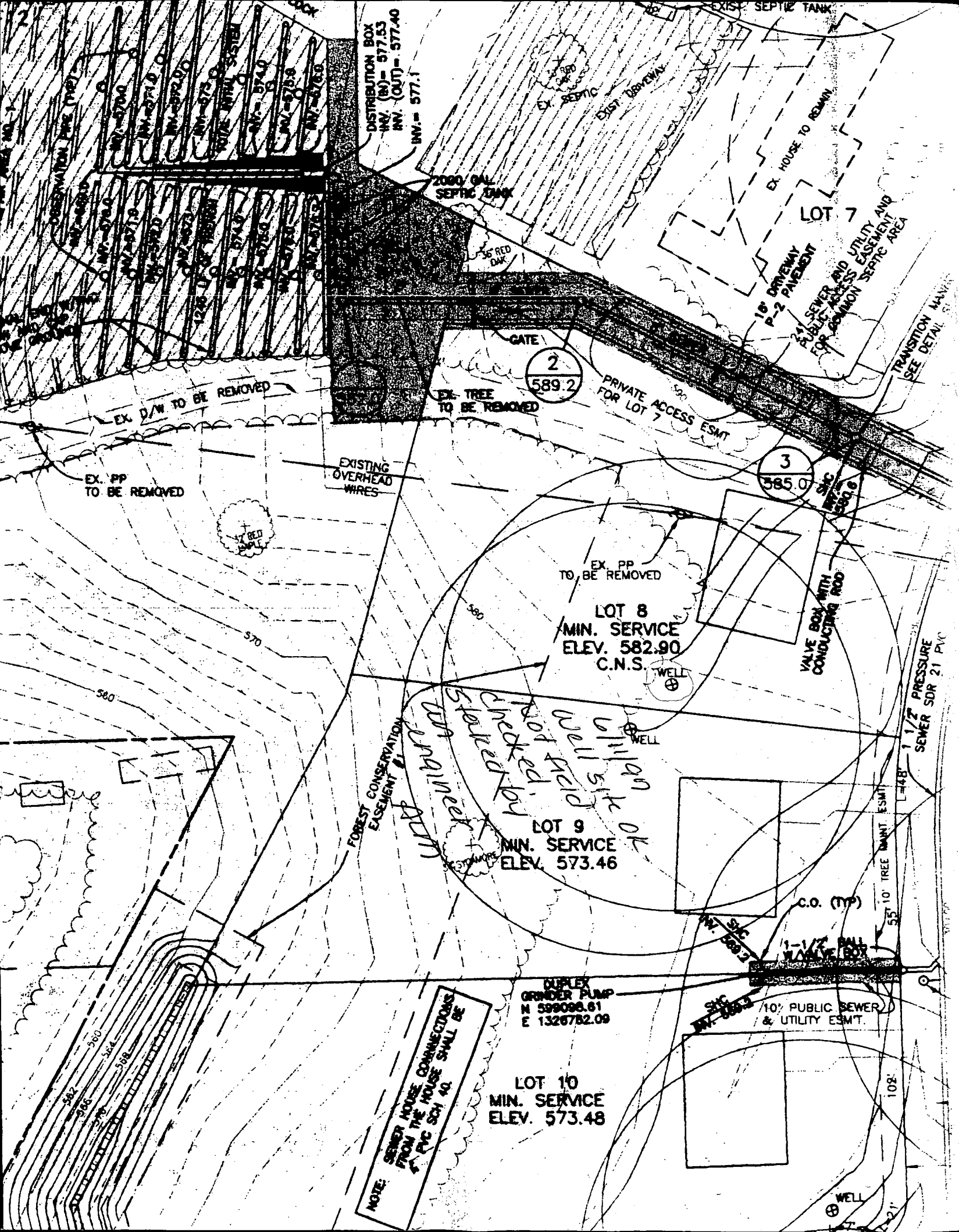
- The wells for Lots 25, 27 & 28 will be drilled as shown on the percolation certification plat.
- A new well will be drilled for Lot 26 and the existing well abandoned.
- The existing septic system will be abandoned and the house connected to the shared septic system.
- Per Clark Sperry, the existing house can not be sold without the final recordation of the subdivision, therefore the existing septic system will not be in use prior to sale of either the existing house or any of the newly created lots and will not have any impact on the wells on lots 27 & 28.

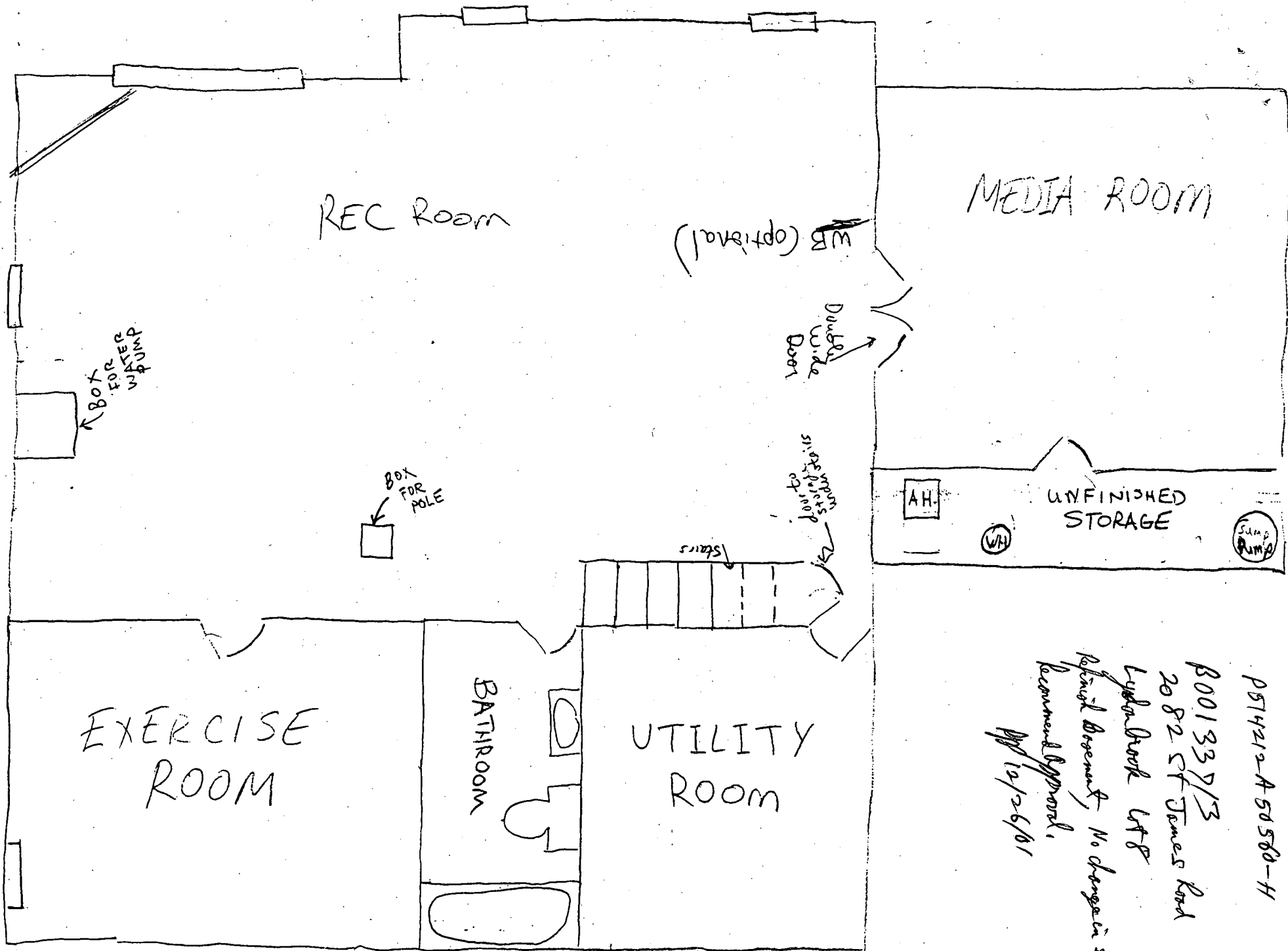
5/29/97

A McMullen

| | | | | |
|---|------|--------------------------------|---|--|
| B 1 | 7446 | SEQUENCE NO. (MDE USE ONLY) | STATE OF MARYLAND PERMIT TO DRILL WELL please print or type | STATE PERMIT NUMBER H0-94-1167 <small>fill in this form completely</small> |
| Date Received (APA) 042297 OWNER INFORMATION SDC 15 Last Name Owner First Name 34 PO BOX 417 36 Street or RFD 55 Elk, cot + CI + MD 21041 57 Town 70 State 72 Zip 76 | | | | |
| DRILLER INFORMATION Joseph L. Mayne Driller's Name 77 License No. 80 024 Firm Name 5512 Ridge Rd. Mt. Airy Md. 21771 Address Joseph L. Mayne 4/21/97 Signature Date | | | | |
| WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 5 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500 14 20 | | | | |
| USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="checkbox"/> P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input type="checkbox"/> T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT) | | | | |
| APPROXIMATE DEPTH OF WELL 300 FEET APPROXIMATE DIAMETER OF WELL 6 INCH METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jetted & DRIVEN AIR-ROTARY AIR-Percussion ROTARY (Hydraulic Rotary) CABLE REVERSE-ROTARY Drive-POINT other | | | | |
| REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> N THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <input type="checkbox"/> S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="checkbox"/> D THIS WELL WILL DEEPEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52 | | | | |
| Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER 54 GAP 63 FORCE KM WRITE INITIALS IN BOX PERMIT No. H0-94-1167 67 68 70 71 72 73 74 75 76 77 78 79 | | | | |
| SPECIAL CONDITIONS NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED - | | | | |

| | |
|--|--|
| B 3 | LOCATION OF WELL HOWARD 8 COUNTY 21 STIEGLER PROPERTY 23 SUBDIVISION 42 SECTION 44 46 LOT 8 48 50 WEST FRIENDSHIP 52 NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) 1 MI 73 76 77 78 |
| B 4 | DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  NEAR WHAT ROAD St James Rd. 11 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 34 30 37 DISTANCE FROM ROAD ENTER FT OR MI FT 38 39 TAX MAP: _____ BLK: _____ PARCEL: _____ |
| NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL Howard 13 COUNTY NAME COUNTY NO. STATE SIGNATURE DATE ISSUED 5/21/97 Kim Maisto 5/21/98 43 48 CO-SIGNATURE EXP. DATE NORTH GRID 538000 EAST GRID 0814000 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 E 8104 N 54038 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  | |





P514212-A50580-H
 B001337/3
 2082 ST James Road
 Lydenbrook UT8
 Refinist Basement, No change in Hblm
 Recurrent Approval.
 10/26/01