

3/5/99
2/3/99
3/8/99
3/9/99
3/30/99 (early)

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

03-326594

P 511404

A 50626-H

DISTRICT 3rd

DATE 2/11/99

DATE SYSTEM APPROVED 3/9/99

INSPECTOR Au

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXX~~ 410-313-2640

INDEXED

Fogle's Septic Clean, Inc.

IS PERMITTED TO INSTALL ☒ ALTER ☐

ADDRESS 580 Obrecht Road Sykesville, MD 21784 PHONE (410) 795-5670

SUBDIVISION Heyn Property LOT 6 ROAD 1646 Woodstock Road

PROPERTY OWNER Williamsburg Group

ADDRESS

SEPTIC TANK CAPACITY 1250 GALLONS ***MANHOLE CLEANOUT REQUIRED***

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

* Highest corners of septic easement must be staked prior to installation of system *

TRENCHES - Trench to be 3 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 5 feet below original grade. Effective area begins at 3 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Beginning from the intersection of the 130.24' and 274.97' lot lines, begin trenches 175 feet up the 274.97' lot line and 80 feet off that same lot line. Run trenches on contour in both directions.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 9/4/98 BCS

* Maintain 20' separation from house to sewage easement *

PLANS APPROVED BY Amy McMillen DATE 9-04-98

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

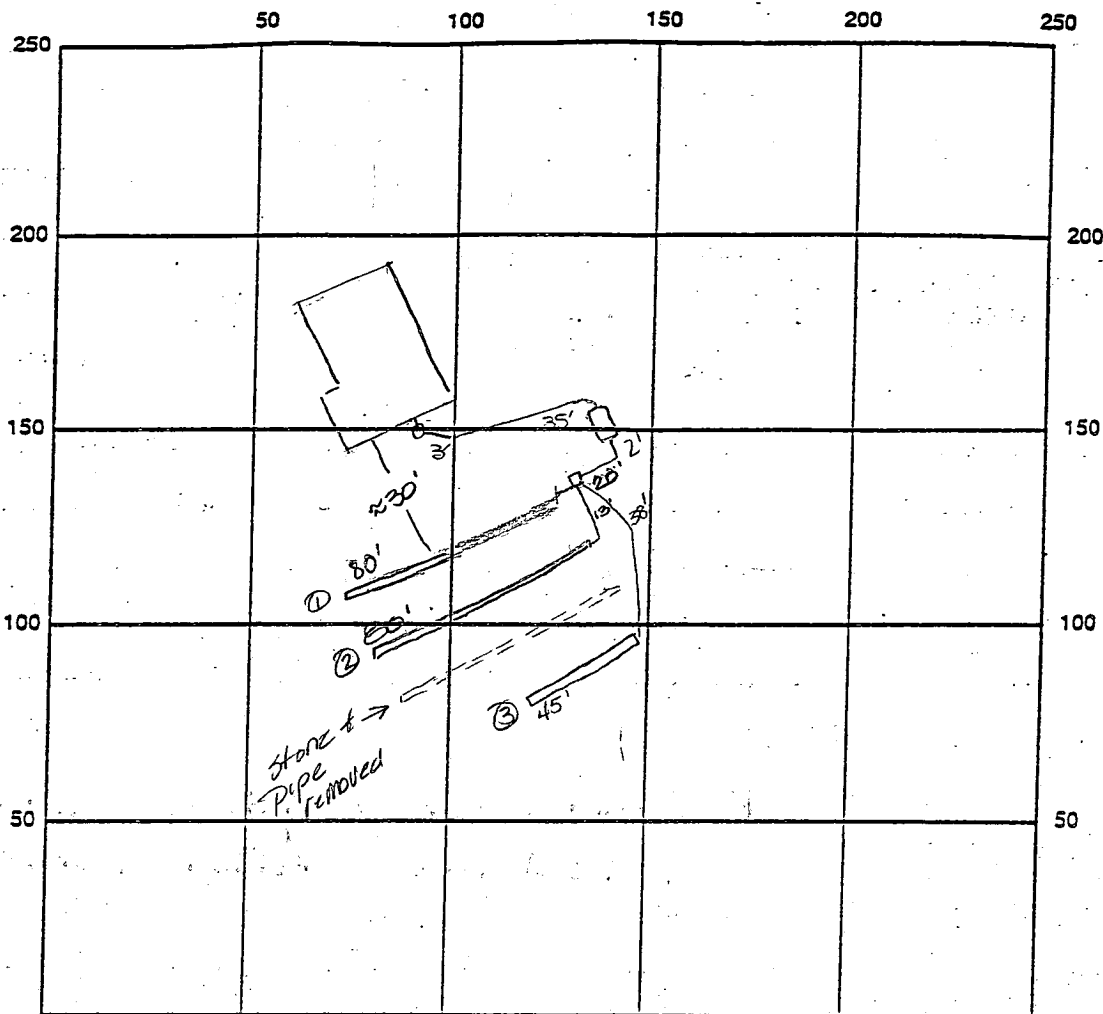
BLDG. PERMIT SIGNED

AND RETURNED 3-4-99

Serial # B10 116507

signed

50626-H



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL OK - 1250 gcu

CLEANOUTS 2 - house & tank

DISTRIBUTION BOX LEVEL OK - baffle is in

DRAIN FIELD/TITLE DEPTH

1	2	3
5	5	7

 FT.

TRENCH WIDTH

1	2	3
3	3	3

 FT.

INLET DEPTH

1	2	3
3	3	3

 FT.

EFFECTIVE GRAVEL DEPTH

1	2	3
2	2	4

 FT.

TOTAL LENGTH

1	2	3
80	80	45

 FT.

NUMBER OF TRENCHES 3

ONE SIDEWALL/BOTTOM AREA 705 SQ. FT.

DRYWALL INSIDE DIAMETER - FT.

EFFECTIVE DEPTH BELOW INLET

1	2	3
2	2	4

 FT.

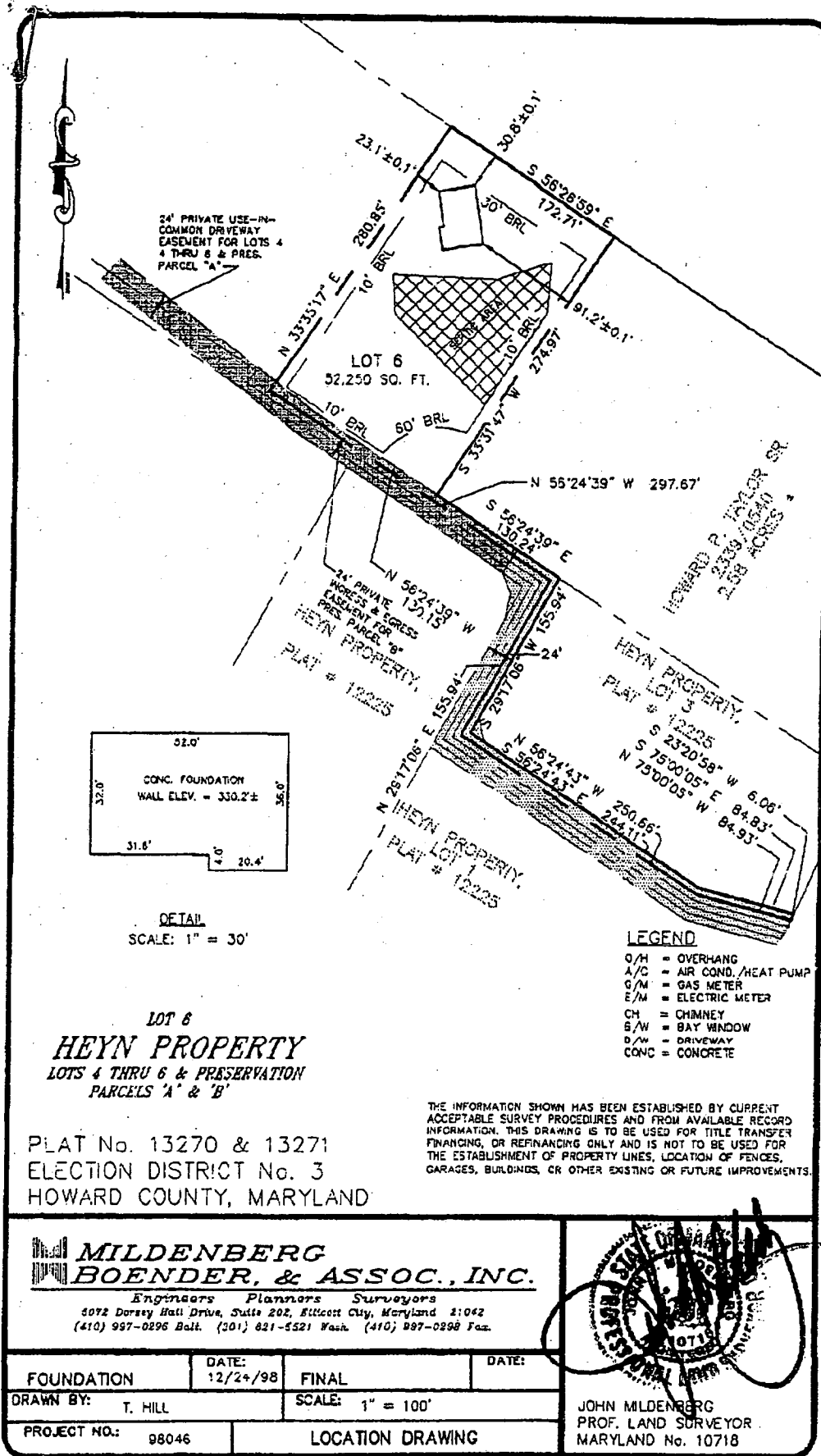
ABSORBENT AREA - SQ. FT.

REMARKS: 3/5/99 OK to cover from house to septic tank.

House connection made. DKS 3/8/99 - OK to cover trench 1 & 2. O.L. 3/9/99 3rd trench removed by contractor - it was not installed on contour - end was at original grade - Perc hole to 12.0' 3rd trench installed 45' - stone 3' - 7' because too much fall from beginning to end of area for a 80' trench

DATE SYSTEM APPROVED 3/9/99

INSPECTOR A. McMill



2/11/99

house turned
significantly from
approved building
permit drawing.
Maintain 20'
separation from
house to
septic easement.

(12m)

4/18/45
4/19/85
10/80

APPLICATION

PERCOLATION TESTING

A 50626H

P _____

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

DISTRICT _____

DATE _____

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER DANTEC HEYN Williamsburg Group

ADDRESS 1112 OYSTER COVE DRIVE PHONE (410) 827-4970
GRASONVILLE, MD 21638

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION HEYN PROPERTY LOT NO. 46

ROAD AND DESCRIPTION APPROXIMATELY 3900 FEET FROM THE
INTERSECTION OF MD ROUTE 99 AND WOODSTOCK
ROAD ON THE NORTHWEST SIDE OF WOODSTOCK
ROAD ACROSS FROM INTERSECTION OF CAVEY

TAX MAP 10 PARCEL # 39 LANE AND WOODSTOCK ROAD

SIZE OF LOT 7 LOTS; EACH 1 Acre ± TYPE BLDG. SFD
(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. Stephanie Renculik
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

COUNTY #
50626 H
SOIL PROFILE
1209

0' topsoil
1' or red br
d 1m

dk br
si d 1m

7.5' seepage

9.5' water

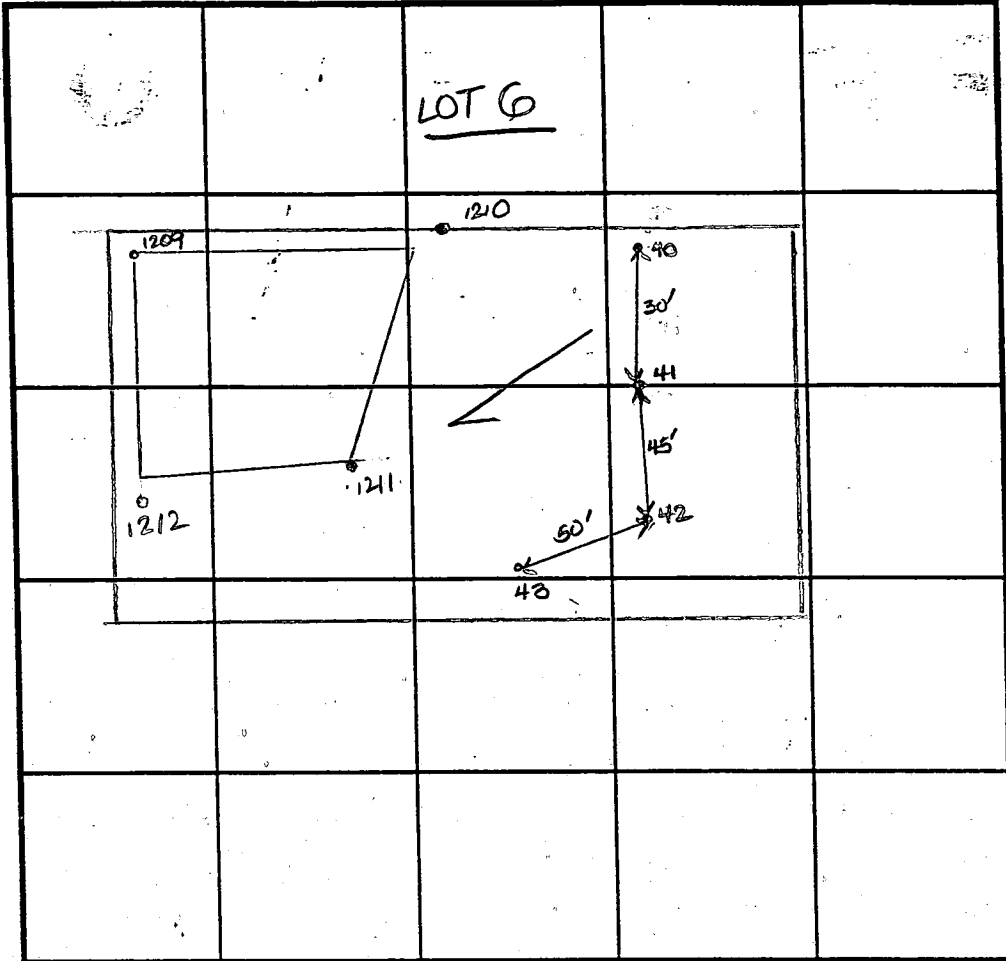
0' 1210
1' topsoil
or red br
d 1m
14 br to
tan si 1m

5% rock
frags

0' 1211
1' topsoil
or br d
1m
dk br
si d 1m

11.5' water

LOT 6



SOIL PROFILE
1212

0' topsoil
1' or br d
1m

or br
to br
si d 1m

9.5' seepage

11.5' water

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4-19-95	1209	9.5'D	WATER	- NOT	TESTED		F
	1210	3.5'S	2:32 ₃₀	2:33 ₃₀	2:33 ₃₀	2:35 ₃₀	2
		18.0'D					
	1211	5.0'S	2:21	2:23 ₃₀	2:23 ₃₀	2:26	3
		11.5'D	WATER				
	1212	4.5'S	10:36	10:37	10:37	10:38 ₃₀	2
		11.5'D	WATER @ 9.5'				

REMARKS _____

TYPE OF SOIL _____

TESTED BY D. Soe ALSO PRESENT owner, Fyock's men

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 3 TRENCH WIDTH 3'

INLET DEPTH 3' MAXIMUM BOTTOM DEPTH 5' SQ. FT/BEDROOM 180

APPLICATION

PERCOLATION TESTING

A 50626 F

P _____

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

DISTRICT _____

DATE _____

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER _____

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Hryn Property LOT NO. 16

ROAD AND DESCRIPTION _____

TAX MAP _____ PARCEL # _____

SIZE OF LOT _____ TYPE BLDG. _____
(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.

(SIGNATURE OF APPLICANT) _____

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

50606 F

COUNTY #

SOIL PROFILE

42

topsoil
or red
br c/lm

11 or br
to tan
si lm

sm str
white

SOIL PROFILE

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4-19-95	40	6.0'D	Refusal - Not		tested	—	F
	41	7.0'D	Refusal - Not		tested	—	F
	42	3.5'S	1:26 ₃₀	1:28 ₃₀	1:28 ₃₀	1:31	3
	43	11.0'D					
	43	3.0'S	1:52 ₃₀ 1:51 ₃₀	1:53 ₃₀ 1:52	1:53 ₃₀ 1:52	1:54 ₃₀ 1:52 ₃₀	1 30 sec
		3.0'S	1:55 ₃₀	1:56 ₃₀	1:56 ₃₀	1:58	2 ^{OK}
		11.5'D					

REMARKS

TYPE OF SOIL

TESTED BY D. See

ALSO PRESENT owner, Fyock's men

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

3'

TRENCH WIDTH

3'

INLET DEPTH

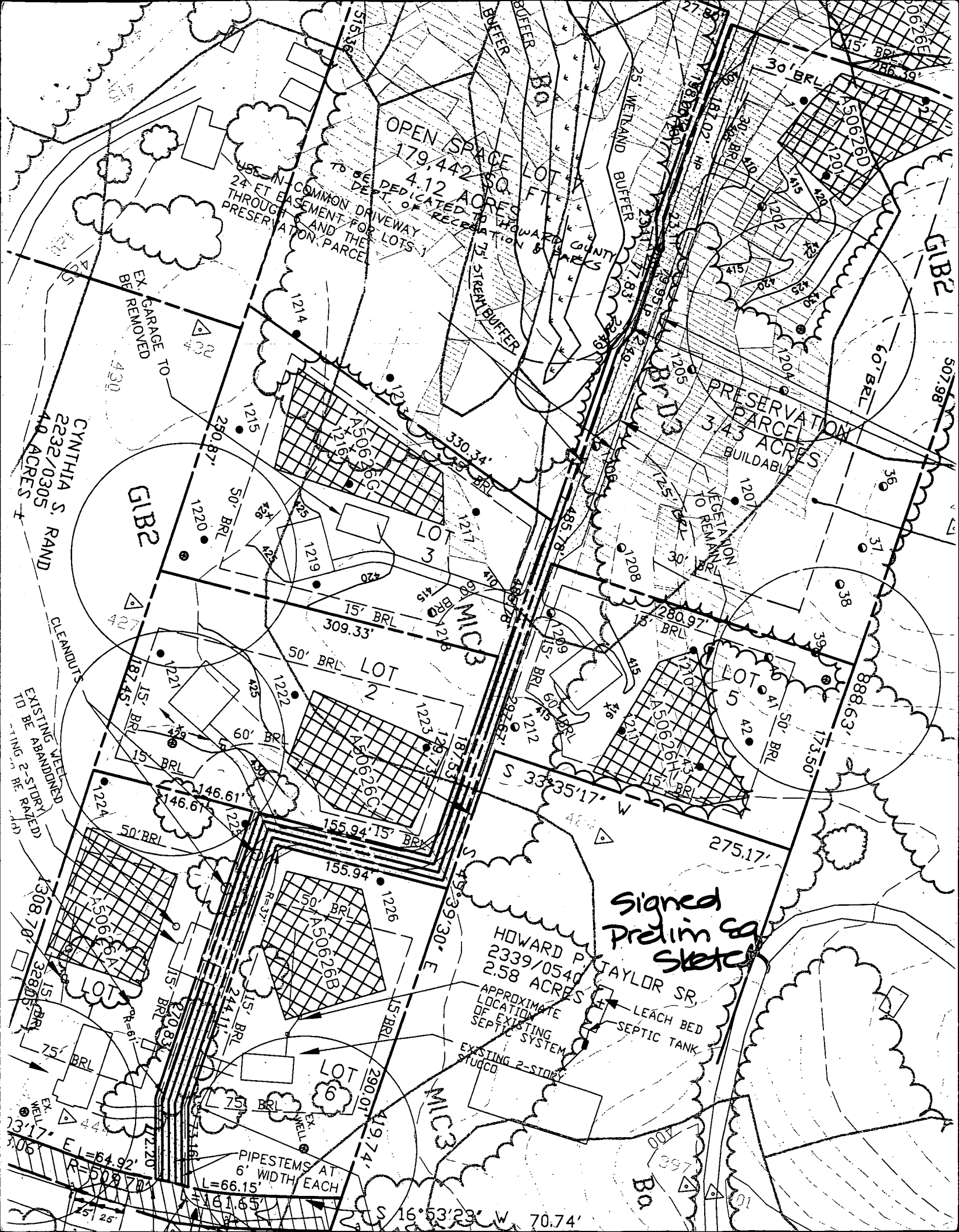
3'

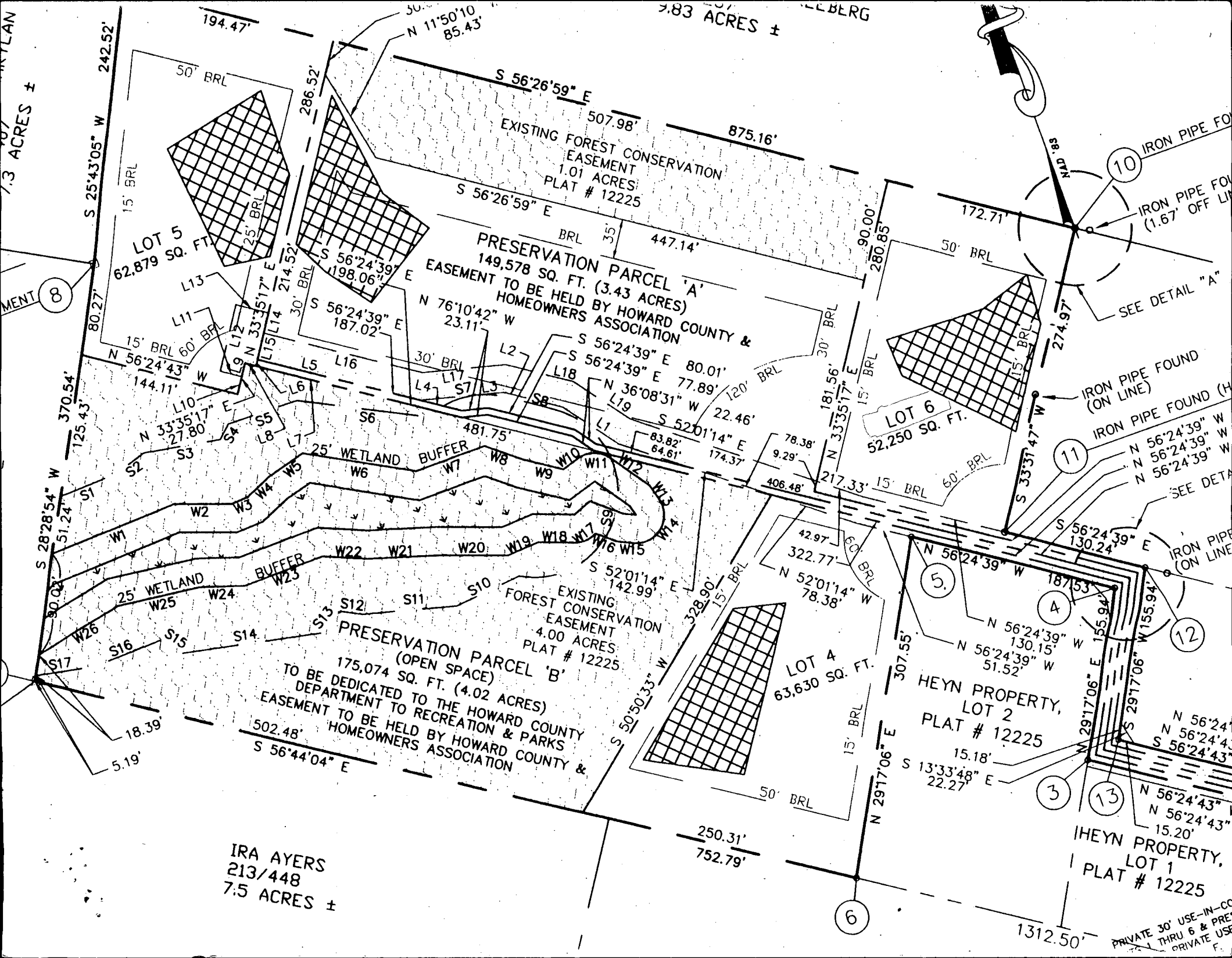
MAXIMUM BOTTOM DEPTH

5'

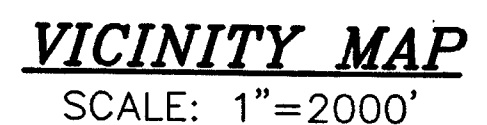
SQ. FT./BEDROOM

180





1. TOPOGRAPHY SHOWN HEREON IS BASED ON A FIELD RUN SURVEY CONDUCTED BY MILDENBERG, BOENDER & ASSOCIATES, INC. IN AUGUST 1998.
2. PROPERTY LINES SHOWN HEREON ARE BASED ON PLAT # 13271 ENTITLED "HEYN PROPERTY, LOTS 4 THRU 6 & PRESERVATION PARCELS 'A' & 'B'".



24' PRIVATE USE-IN-COMMON DRIVEWAY EASEMENT FOR LOTS 4 4 THRU 6 & PRES. PARCEL "A"_____

FIRST FLOOR ELEV.	= 330.67
BASEMENT ELEV.	= 321.67
INV. OUT OF HOUSE	= 318.17
INV IN SEPTIC TANK	= 317.55
INV. OUT SEPTIC TANK	= 317.30
INV. IN DIST. BOX	= 317.06
EXIST. ELEV. @ SEPTIC TANK	= 320.8
PROP. ELEV. @ SEPTIC TANK	= 322.0
EXIST. ELEV. @ DIST. BOX	= 320.0

SITE PLAN
SCALE: 1"=30'

HOWARD SCD _____ DATE _____

(1 OF 2)

B 1	0550	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER 40-94-1481 <small>fill in this form completely</small>
<div style="display: flex; justify-content: space-between;"> <div style="width:45%;"> <p><small>1 2 3 6</small> (THIS NUMBER IS TO BE PUNCHED IN CQLS. 3-6 ON ALL CARDS)</p> <p>Date Received (ARA) <u>2/16/98</u></p> <p>OWNER INFORMATION</p> <p><small>8 MM DD YY 13</small> <u>Hen Dan</u> <small>15 Last Name Owner First Name 34</small></p> <p><small>36</small> <u>1112 Oyster Cove Drive</u> <small>55</small></p> <p><small>57</small> <u>Cockeysville</u> <small>70</small> <u>MD</u> <small>72</small> <u>21638</u> <small>76</small></p> <p>DRILLER INFORMATION</p> <p><u>Paul M. Fabiszak</u> <small>76</small> <u>M WD 399</u> <small>81</small></p> <p><u>G. Edgar Harr Sons' Corp</u></p> <p><u>12047 Falls Rd Cockeysville 21030</u></p> <p><u>2/16/98</u></p> <p><small>Signature Date</small></p> </div> <div style="width:50%;"> <p>LOCATION OF WELL</p> <p><u>Howard</u> <small>8 COUNTY 21</small></p> <p><u>Hen Property</u> <small>23 SUBDIVISION 42</small></p> <p><u>Woodstock</u> <small>52 NEAREST TOWN 71</small></p> <p><u>6</u> <small>SECTION 44 46 LOT 48 50</small></p> <p>MILES FROM TOWN (enter 0 if in town) <u>0</u> <small>73 76 77 78</small></p> </div> </div>				
<div style="display: flex; justify-content: space-between;"> <div style="width:45%;"> <p>WELL INFORMATION</p> <p><u>5</u> <small>APPROX. PUMPING RATE (GAL. PER MIN.) 8 12</small></p> <p><u>750</u> <small>AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 20</small></p> <p>USE FOR WATER (CIRCLE APPROPRIATE BOX)</p> <p><input checked="" type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)</p> <p><input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)</p> <p><input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)</p> <p><input type="checkbox"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE APPROVAL)</p> <p><input type="checkbox"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)</p> </div> <div style="width:50%;"> <p>DIRECTION OF WELL FROM TOWN (CIRCLE BOX)</p> <p>ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)</p> <p><u>Woodstock Rd</u> <small>11 NEAR WHAT ROAD 30</small></p> <p><u>500</u> <small>34 DISTANCE FROM ROAD 37 ENTER FT OR MI 38 39</small></p> <p><u>10</u> <u>18</u> <u>39</u> <small>TAX MAP: BLK: PARCEL</small></p> </div> </div>				
<p>NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL</p> <p><u>HOWARD</u> <u>A 50626H</u> <small>COUNTY NAME COUNTY NO.</small></p> <p><u>3/13/98</u> <u>3/13/98</u> <small>DATE ISSUED CO SIGNATURE EXP. DATE</small></p> <p><u>540 000</u> <u>830 000</u> <small>NORTH GRID EAST GRID 50 55 57 63</small></p>				
<p>APPROXIMATE DEPTH OF WELL <u>200</u> <small>24 28</small> FEET</p> <p>APPROXIMATE DIAMETER OF WELL <u>6</u> <small>NEAREST INCH</small></p> <p>METHOD OF DRILLING (circle one)</p> <p><input checked="" type="checkbox"/> BORED (or Augered) <input checked="" type="checkbox"/> JETTED <input type="checkbox"/> Jetted & DRIVEN</p> <p><input type="checkbox"/> AIR-ROTARY <input checked="" type="checkbox"/> AIR-PERCussion <input type="checkbox"/> ROTARY (Hydraulic Rotary)</p> <p><input type="checkbox"/> CABLE <input type="checkbox"/> REVerse-ROTARY <input type="checkbox"/> Drive-POINT</p> <p>other _____</p>				
<p>REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)</p> <p><input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL</p> <p><input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED</p> <p><input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS</p> <p><input type="checkbox"/> THIS WELL WILL DEEPEIN AN EXISTING WELL</p> <p>PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) <u>41</u> <small>52</small></p>				
<p>Not to be filled in by driller (MDE OR COUNTY USE ONLY)</p> <p>APPROX. PERMIT NUMBER <u>54</u> <small>GAP 63</small></p> <p>FORCE <u>GS</u> <small>WRITE INITIALS IN BOX</small> PERMIT No. <u>40-94-1481</u></p>				
<p>SPECIAL CONDITIONS</p> <p>NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -</p>				

COUNTY

DATE 4-8-98 11:00

NO insp

Woodstock Rd

Cave

Lane

830

540

000

000

4-8-98 11:00

4-8-98 11:00

4-8-98 11:00

4-8-98 11:00

1 2 3 6 05074 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)		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.	
ST/CO USE ONLY DATE Received MM <u>04</u> DD <u>15</u> YR <u>98</u>		DATE WELL COMPLETED MM <u>04</u> DD <u>15</u> YR <u>98</u>		Depth of Well 22 <u>250</u> 26 (TO NEAREST FOOT)		COUNTY NUMBER <u>4 50626H</u> PERMIT NO. FROM "PERMIT TO DRILL WELL" <u>HO-94-1481</u> 28 29 30 31 32 33 34 35 36 37	
OWNER <u>HEYN</u> last name		<u>DAN</u> first name		TOWN <u>WOODSTOCK</u>		LOT <u>6</u>	
STREET OR RFD		SUBDIVISION <u>HEYN PROD</u>		SECTION		LOT <u>6</u>	
WELL LOG Not required for driven wells		GRROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) yes <input checked="" type="checkbox"/> no <input type="checkbox"/> 44 44 TYPE OF GROUTING MATERIAL (Circle one) CEMENT <input checked="" type="checkbox"/> BENTONITE CLAY <input type="checkbox"/> NO. OF BAGS <u>7</u> NO. OF POUNDS <u>100</u> GALLONS OF WATER <u>42</u> DEPTH OF GROUT SEAL (to nearest foot) from <u>0</u> TOP <u>52</u> ft. to <u>26</u> BOTTOM <u>58</u> ft. (enter 0 if from surface)		C 3 1 2 PUMPING TEST HOURS PUMPED (nearest hour) <u>3</u> PUMPING RATE (gal. per min.) <u>11.5</u> METHOD USED TO MEASURE PUMPING RATE <u>Submersible</u> WATER LEVEL (distance from land surface) BEFORE PUMPING <u>19</u> ft. WHEN PUMPING <u>158</u> ft. TYPE OF PUMP USED (for test) <input type="checkbox"/> air <input type="checkbox"/> piston <input type="checkbox"/> turbine <input type="checkbox"/> centrifugal <input type="checkbox"/> rotary <input type="checkbox"/> other (describe below) <input type="checkbox"/> jet <input checked="" type="checkbox"/> submersible			
DESCRIPTION (Use additional sheets if needed)		FEET FROM TO		check if water bearing		C 2 DEPTH (nearest ft.) <u>26</u> <u>250</u>	
Overburden Gray Rock water at 40'		0 22 22 250		x		E A C H C A S I N G OTHER CASING (if used) diameter inch depth (feet) from to	
NUMBER OF UNSUCCESSFUL WELLS: <u>0</u>		WELL HYDROFRACTURED yes <input checked="" type="checkbox"/> no <input type="checkbox"/>		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.		SCREEN RECORD screen type or open hole insert appropriate code below <input checked="" type="checkbox"/> ST STEEL <input type="checkbox"/> BR BRASS <input type="checkbox"/> HO OPEN HOLE <input type="checkbox"/> PL PLASTIC <input type="checkbox"/> OT OTHER	
DRILLERS LIC. NO. <u>M D 399</u>		DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) <u>Thomas McElroy</u>		LIC. NO. <u>M D 076</u>		SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee) <u>Thomas McElroy</u>	
MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q 70 72 74 75 76 TELESCOPE CASING LOG INDICATOR OTHER DATA		GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68 68		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) <u>20' 20'</u>			

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-N 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 Charles A. Klein & Sons Inc Telephone 410-549-1960

License Number 1521
Certified Well Pump Installer ☒ Well Driller _____ Registered Plumber _____

Name of Property owner Williamstown Group Telephone 410-997-8800
Subdivision Katappa Woods Lot # 6 Well Tag # HO-99-1461
Site Address 1646 Woodstock Woodstock Md. 21103

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 _____

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 250 ft.
2. Yield 6.54 GPM
3. Static water level 19 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: Charles A. Klein Jr.

Date: _____

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

01/06/1994 08:35

4189970298

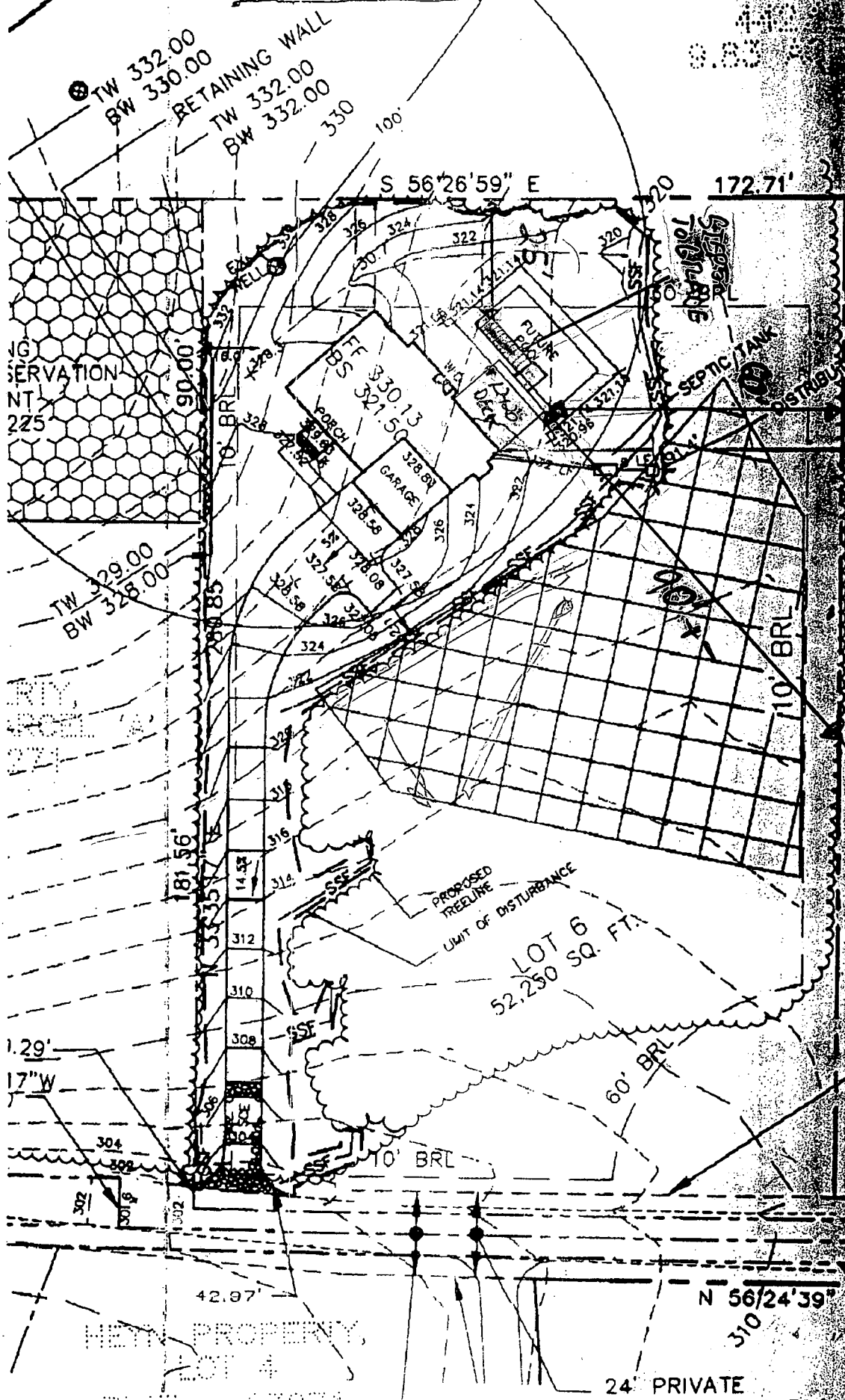
MILDENBERG BOENDER

PAGE 02

SCALE: 1"=30'

GILBERT E. BOENDER

440
8.83



PROPOSED
DECK
OK
AS
SHOWN
IN
GREEN
MR
3/4/99