

LAYOUT 10/20/03 1pm INSP 4 11/3/03 - 2PM  
INSP 2 10/21/03 12:30 INSP 5 \_\_\_\_\_  
INSP 3 10/24/03 3pm INSP 6 \_\_\_\_\_

ISSUE DATE: 9/25/2003

APPROVAL DATE: 11/3/03

## PERMIT INDEXED

P 519590

A 50857-E

### ON-SITE SEWAGE DISPOSAL SYSTEM HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH

Fogles Septic Clean, Inc IS PERMITTED TO INSTALL ☒ ALTER ☐

ADDRESS: 580 Obrecht Rd, Sykesville 21784 PHONE NUMBER: 410-795-5670

SUBDIVISION: High Forest Estates LOT NUMBER: 32

ADDRESS: 15170 Sapling Ridge Drive PROPERTY OWNER: Big Branch Overlook, LLC

SEPTIC TANK CAPACITY (GALLONS): 1500 OUTLET BAFFLE FILTER REQUIRED ☒

PUMP CHAMBER CAPACITY (GALLONS): N/A COMPARTMENTED TANK REQUIRED ☒  
With Manhole Access

NUMBER OF BEDROOMS: 4

SQUARE FEET PER BEDROOM: 210

LINEAR FEET OF TRENCH REQUIRED: 280 HOUSE SERVED BY PUBLIC WATER ☐

TRENCHES:	Trench to be 3.0 feet wide. Inlet 2.0 feet below original grade. Bottom maximum depth 4.0 feet below original grade. Effective area begins at 3.0 feet below original grade. 2.0 feet of stone below distribution pipe.
LOCATION:	Place the distribution box at the highest useable portion of SDA at the time of layout. <i>Trench Layout upon <del>2nd</del> 1st insp.</i>
NOTES:	Install 1-80' long trench and 2-100' to maximize area. Maintain 9' edge to edge separation.

PLANS APPROVED: John A. Boris KN 9/25/03 DATE: 5/30/03

NOTES: PERMIT VOID AFTER 2 YEARS

CONTRACTOR IS RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS

WATERTIGHT SEPTIC TANKS REQUIRED

ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL UNLESS SPECIFICALLY AUTHORIZED

MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS UNLESS SPECIFICALLY AUTHORIZED

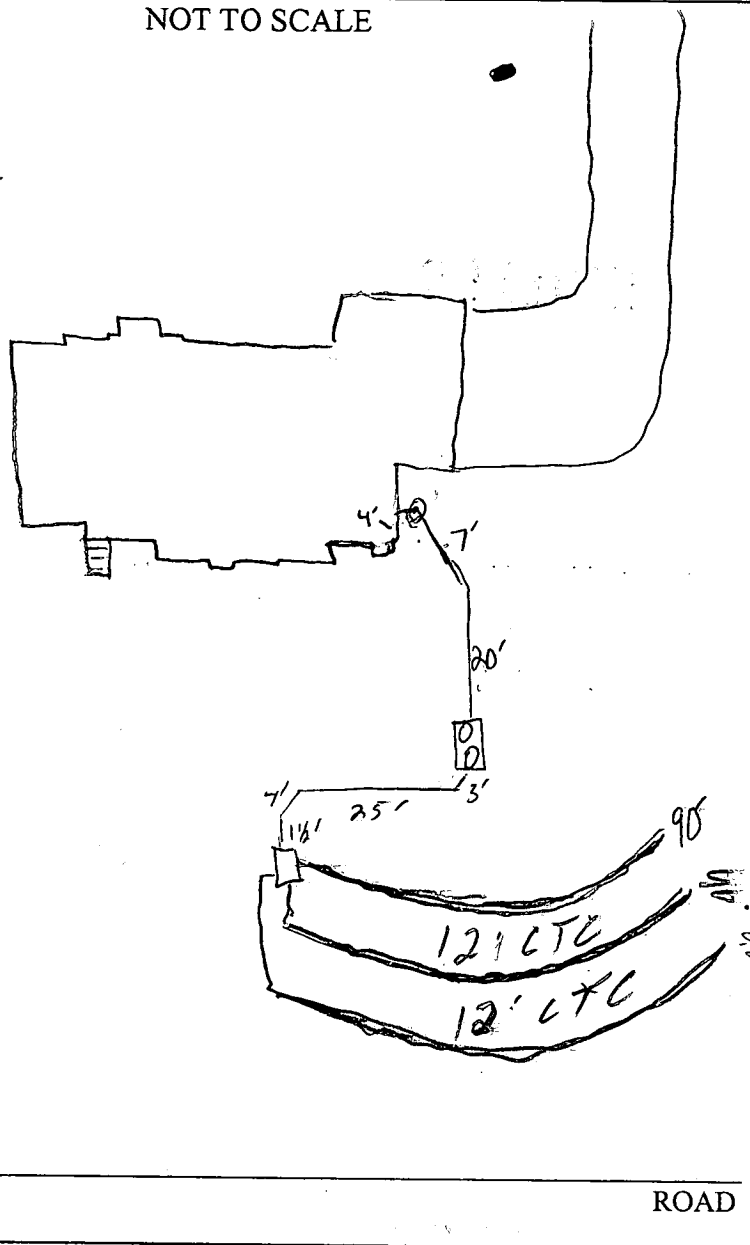
CONTRACTOR RESPONSIBLE FOR COMPLIANCE WITH APPLICABLE REGULATIONS, GUIDELINES AND THE TERMS OF THIS PERMIT

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS  
RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM

FOR DEPOSIT ONLY  
DIRECTOR OF FINANCE  
HOWARD COUNTY, MD  
HEALTH DEPARTMENT  
PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT  
ALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM  
AND RETURNED  
11/30/03 600 157385 DECK

A50857-E

NOT TO SCALE



TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
<u>3</u>	<u>2-2'8"</u>	<u>4-4'8"</u>
NUMBER OF TRENCHES <u>3</u>		
TOTAL LENGTH <u>220'</u>		
ABSORPTION AREA <u>810 #</u>		
DISTRIBUTION BOX LEVEL <u>✓</u>		
DISTRIBUTION BOX BAFFLE <u>✓</u>		
DISTRIBUTION BOX PORT <u>—</u>		

SEPTIC TANK DATA	
SEPTIC TANK 1 LEVEL <u>✓</u>	
CAPACITY	<u>1250</u> GAL
SEAM LOC	<u>Top</u>
TANK LID DEPTH	<u>2.5'</u>
BAFFLES	<u>✓</u>
BAFFLE FILTER	<u>✓</u>
MANHOLE LOC	<u>F &amp; B</u>
6" PORT LOC	<u>—</u>
WATERTIGHT TEST	<u>—</u>
SEPTIC TANK 2 LEVEL <u>—</u>	
CAPACITY	<u>—</u> GAL
SEAM LOC	<u>—</u>
TANK LID DEPTH	<u>—</u>
BAFFLES	<u>N/A</u>
BAFFLE FILTER	<u>—</u>
MANHOLE LOC	<u>—</u>
6" PORT LOC	<u>—</u>
WATERTIGHT TEST	<u>—</u>

PRE-CONSTRUCTION 10/20/03 Not stake, OK to set S.T. outside of well radius (SO)

INSTALLATION 10/23/03 - Tank set, house has been lowered 1-2'.  
 OK to lower 1<sup>st</sup> trench invert to 2'8" (SO) 10/29/03 OK to  
 cover all completed work (KB/SO) 11/3/03 OK to cover all  
 work (SO)

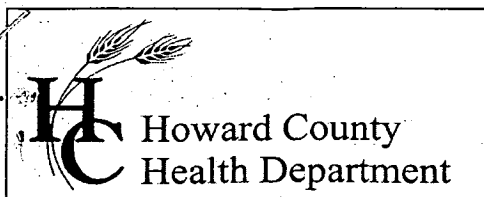
GENERAL INFORMATION  
 COMMENTS

DATE OF APPROVAL  
 11/3/03

FINAL INSPECTOR

*[Signature]*

DATE OF APPROVAL



3525 H Ellicott Mills Drive, Ellicott City, MD 21043  
(410) 313-1771 Fax (410) 313-2648  
TDD (410) 313-2323 Toll Free 1-866-313-6300  
website: www.hchealth.org

Penny E. Borenstein, M.D., M.P.H., Health Officer

January 8, 2004

Big Branch Overlook, LLC  
7164 Columbia Gateway Drive, Suite #230  
Columbia, MD 21046

**SENT VIA FACSIMILE 410-872-9141**

RE: 15170 Sapling Ridge Drive  
High Forest Estates, Lot 32  
BP # B00141811  
Well Permit # 94-2820

Dear Sirs:

This is to advise you that the septic system for the above referenced property has been installed and inspected. **Final approval of the septic system was granted on November 3, 2003.**

The water sample results indicate that the water samples submitted for testing were free of coliform and fecal coliform bacteria at the time of sampling and are bacteriologically safe for drinking. The water sample results were found to be in compliance with COMAR water quality standards.

#### **INTERIM CERTIFICATE OF POTABILITY**

This certifies that the initial sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under well permit #94-2820. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies. Based upon satisfactory investigation and evaluation, the Howard County Health Department as authorized by the Maryland Department of the Environment accepts this well system as required by COMAR 26.04.04.

This certificate may become final upon completion of the second bacteriological test, which is to be taken by the county health department within six months of receipt of this letter. **Please contact (410) 313-1773 to schedule a final water sample appointment. Currently, there is no charge for this final sampling.**

Date of Water Samples: 12/17/03 & 12/29/2003  
Date of Well Completion: 08/22/2000

Approving Authority,

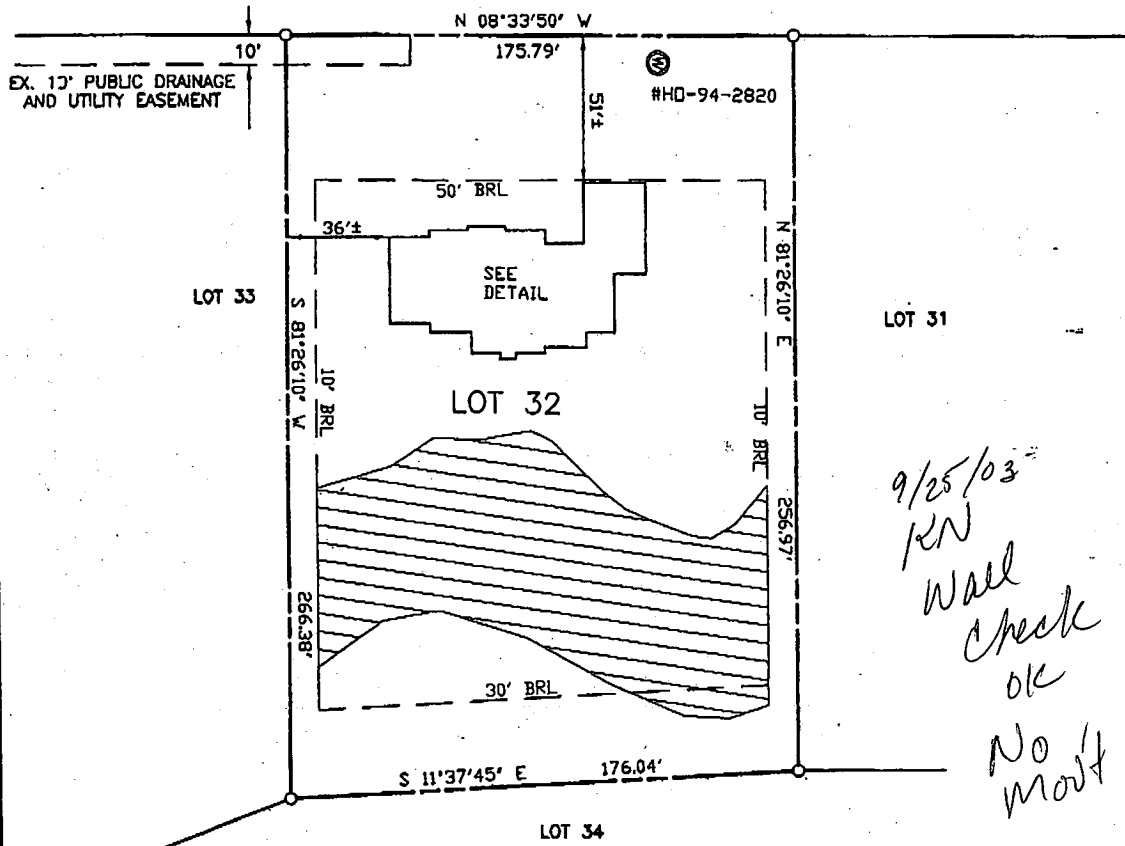
*Brian Baker*

Brian Baker  
Registered Environmental Sanitarian  
Well & Septic Program

mlb

cc: Building Inspector's Office  
Community Health Services  
File

# SAPLING RIDGE DRIVE (50' R/W)



FIRST FLOOR ELEVATION = 477.2'  
OFFSET DIMENSIONS TO PROPERTY LINES ARE  $\pm 1'$

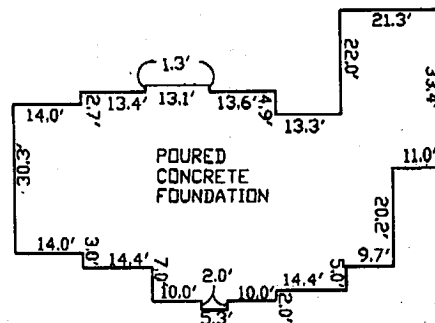
## SURVEYOR'S CERTIFICATE

I HEREBY CERTIFY TO THE BEST OF MY PROFESSIONAL KNOWLEDGE, INFORMATION AND BELIEF, THAT THE DIMENSIONS OF THE BUILDING WALLS SHOWN HEREON ARE CORRECT; THAT THEY ARE BASED ON A FIELD RUN SURVEY PERFORMED BY BENCHMARK ENGINEERING, INC. ON 07/17/03; AND THAT THE PROPERTY OUTLINE SHOWN HEREON IS BASED ON THE PLAT PREPARED BY R.M. MOCHI GROUP P.C., INC. ENTITLED "HIGH FOREST ESTATES LOTS 1 THROUGH 50", AND RECORDED AMONG THE LAND RECORDS OF HOWARD COUNTY AS PLAT No. 13961

*David M. Harris*  
DAVID M. HARRIS  
REGISTERED PROFESSIONAL LAND SURVEYOR  
MD REG. No. 10978  
FOR BENCHMARK ENGINEERING, INC.  
MD REG. No. 351  
RECORD PLAT No. 13961  
FEMA FIRM No. 240044 0025 B  
ZONE: C  
DATED: 12/04/86

**BENCHMARK**  
ENGINEERING, INC.

8400 BALTIMORE NATIONAL PIKE A SUITE 410  
BLOOMING CITY, MARYLAND 21043  
PHONE: 410-482-8100 A FAX 410-482-0944  
EMAIL: Benchmark@bca.com



## FOUNDATION DETAIL

SCALE: 1" = 30'

## WALL CHECK

**HIGH FOREST ESTATES**  
**LOTS 1 THROUGH 50**  
LOT No. 32

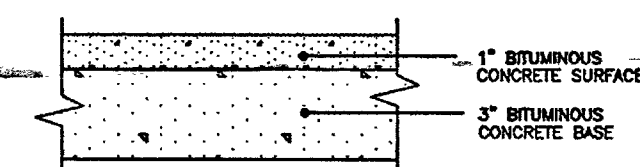
15170 SAPLING RIDGE DRIVE

5TH ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND

SCALE: 1" = 50' DATE: 07/17/03

# NOTES:

- THE LOT SHOWN HEREON WAS RECORDED ON PLAT NUMBER 13961. REFER TO THIS PLAT FOR LOT DIMENSIONS, LOT AREAS, ALL EASEMENTS AND BUILDING RESTRICTIONS.
- THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF 10,000 SQUARE FEET AS REQUIRED BY THE STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWERAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA IS RESTRICTED UNTIL PUBLIC SEWER IS AVAILABLE. THIS EASEMENT SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENT INTO THE PRIVATE SEWERAGE EASEMENT. RECORDATION OF A MODIFIED SEWERAGE EASEMENT PLAT SHALL NOT BE NECESSARY.
- SEDIMENT AND EROSION CONTROLS WERE APPROVED BY HOWARD SOIL CONSERVATION DISTRICT UNDER GP-01-176.
- EXACT LENGTH OF SEPTIC TRENCHES ARE BE DETERMINED BY THE HEALTH DEPARTMENT AT THE TIME OF PERMIT ISSUANCE.
- SPOIL FROM THE TRENCHING OF THE SEPTIC AREA IS TO BE PLACED ON THE UPHILL SIDE OF THE EXCAVATION FOR EACH INDIVIDUAL LOT.
- ALL SEDIMENT AND EROSION CONTROL FEATURES USED ON THIS SITE SHALL COMPLY WITH 1994 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL.

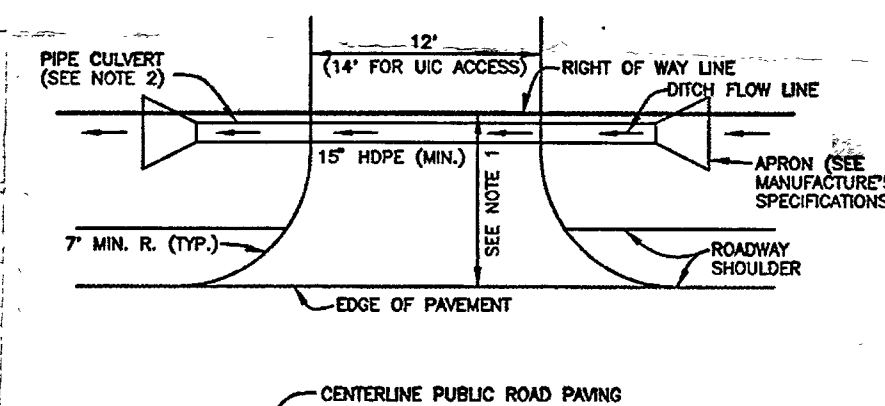


FULL DEPTH BIT. CONC. ALTERNATIVE

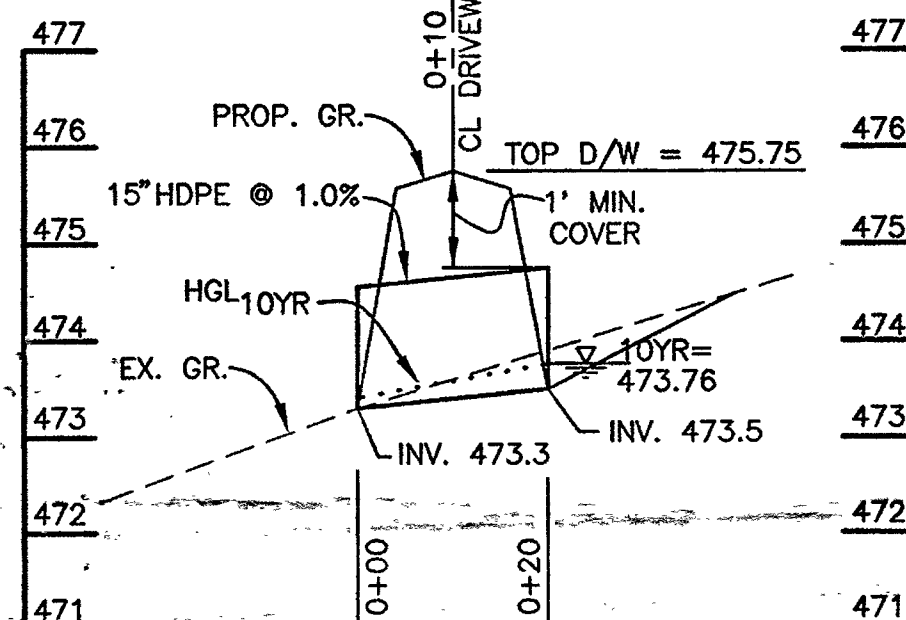
## P-1 PAVING DETAIL NOT TO SCALE

### DRIVEWAY CULVERT NOTES:

- DRIVEWAY MUST BE PAVED FROM EDGE OF PUBLIC ROAD TO RIGHT-OF-WAY USING STANDARD PAVING SECTION P-1 AS SHOWN ON H.O.C.O. STD. R-2.01 OR AN ALTERNATE SECTION EQUAL TO OR BETTER THAN P-1, AS APPROVED BY D.P.W.
- DRAINAGE CULVERT SHALL BE SIZED FOR A 10 YEAR FREQUENCY STORM.
- ALL DRIVEWAY CULVERT PIPES ARE TO BE 15" HDPE OR GREATER TO PREVENT BLOCKING. HDPE APRONS ARE TO BE INSTALLED AT EACH END OF THE CULVERT AND SIZED PER MANUFACTURER'S SPECIFICATIONS. IF A LARGER PIPE IS REQUIRED THE DITCH INVERT CAN BE LOWERED TO PROVIDE A MINIMUM DITCH GRADIENT OF 0.5% AND THE CLEARANCE SHOWN.
- SWALE FLOW MAY BE PROVIDED OVER DRIVEWAY IF LOCATED AT OR NEAR THE CREST OF A VERTICAL CURVE ON THE PUBLIC ROAD WHERE QUANTITY OF FLOW IS SMALL AS APPROVED BY D.P.W.
- TIE-IN GRADE OF DRIVEWAY SHALL NOT EXCEED 14%.
- SEE HOWARD COUNTY STANDARD DETAIL R-6.06 FOR ADDITIONAL INFORMATION.

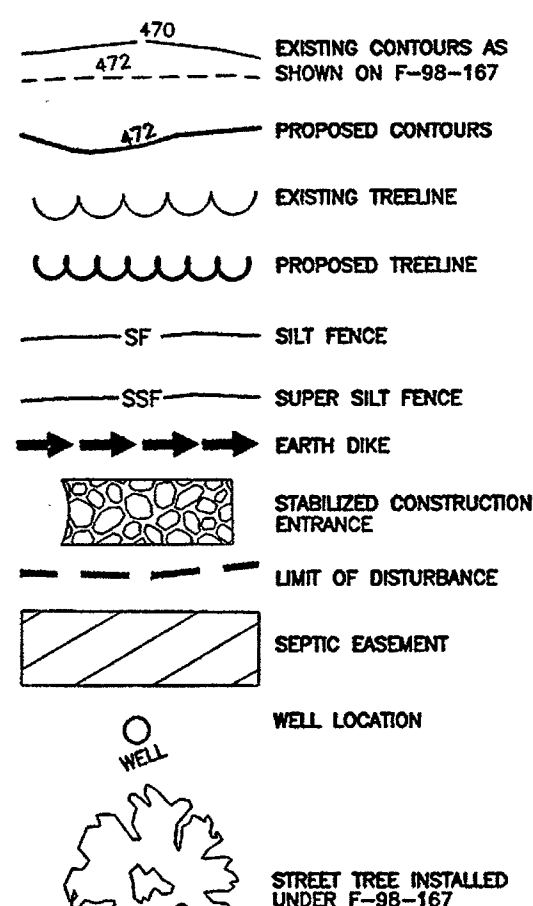


## DRIVEWAY CULVERT NOT TO SCALE



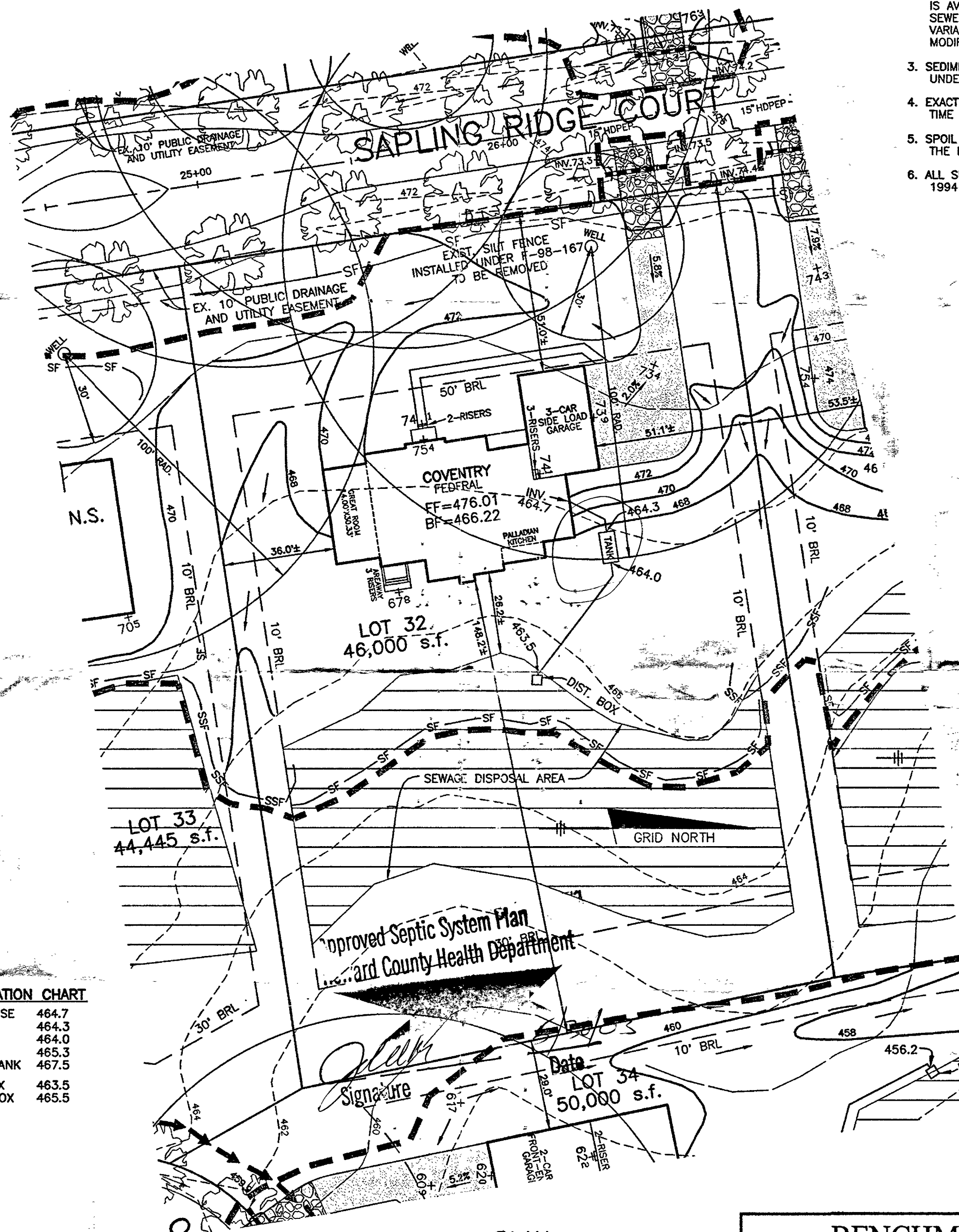
LOT 32 CULVERT PROFILE  
SCALE: 1"=20' HOR., 1"=2' VERT.

### LEGEND



### SEPTIC INFORMATION CHART

INV. OUT OF HOUSE	464.7
INV. IN TANK	464.3
INV. OUT TANK	464.0
TOP OF TANK	465.3
GROUND OVER TANK	467.5
INV. IN DIST. BOX	463.5
GROUND OVER BOX	465.5



### PLAN

SCALE: 1" = 30'

### BENCHMARK

ENGINEERS • LAND SURVEYORS • PLANNERS  
**ENGINEERING, INC.**

8480 BALTIMORE NATIONAL PIKE • SUITE 418  
ELLCOTT CITY, MARYLAND 21043  
PHONE: 410-465-6105 FAX: 410-465-6644

BUILDER: TOLL BROTHERS, INC.  
7164 COLUMBIA GATEWAY DRIVE  
SUITE 230  
COLUMBIA, MARYLAND 21046  
410-872-9105

PROJECT: **HIGH FOREST ESTATES  
LOT 32**

LOCATION: 15170 SAPLING RIDGE DRIVE  
TAX MAP 27, GRID 6 - PARCEL 140,141,142  
5th ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND

TITLE: **PLOT PLAN**

HOUSE TYPE: **COVENTRY**

DATE: MAY 5, 2003 PROJECT NO. 1362

SCALE: AS SHOWN DRAWING 1 OF 1

**HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
WATER AND SEWERAGE PROGRAM  
TEL: (410)313-2640 FAX: (410)313-2648**

**Information Form for the Installation of the Well Pump, Pitless Adapter, and Supply Piping**

**NOTE:** The installer is responsible for requesting an inspection prior to 9 am on the day of the desired inspection. No work is to be covered until approved by the Health Department. All installations must comply with the National Standard Plumbing Code (NSPC, as amended locally) and COMAR 26.04.04 (MD Well Construction Regulations). Submission of a complete form is required prior to Use and Occupancy approval.

Company Name: Fogles Well Drilling Telephone #: 410-795-5670  
Address: 580 Obrecht Rd  
Stylesville, MD 21154

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer  
License # and name of individual responsible for the field installation:

Name (Print): Allen Compton License# MSD009  
\*A licensed individual must perform the actual installation. Apprentices must be under the direct supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification.

Name of Property Owner: Tall Brothers Telephone #: \_\_\_\_\_  
Subdivision: High Forest Estates Lot # 22/81 Well Tag #: HO-94-2820  
Site Address: 15720 Sapling Ridge Dr

<b>Submersible Pump Data</b>	<b>Pitless Adapter</b>	<b>Well Cap and Electric Conduit</b>
Make: <u>Goulds</u>	Make: <u>Comstock</u>	Two piece watertight cap: <u>yes</u>
Model #: <u>55807-422</u>	Model #: <u>N/A</u>	Screened, vented well cap: <u>yes</u>
Pump Capacity <u>5</u> GPM	Depth: <u>36</u> (36" min)	Cap secured to casing: <u>yes</u>
Well Yield: _____ GPM	NSP approved: <u>yes</u>	Conduit min 18" B.G.: <u>yes</u>
Depth of well encountered at time of pump installation: <u>285</u> (feet)		Conduit secured to well cap: <u>yes</u>
If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4		
Torque arrestors or Cable guards are required - Must circle one		
Safety rope, if used, attached to inside of well casing with eye bolt <u>NA</u>		

<b>Piping to house</b>	<b>House Connection</b>
Type: <u>1" Black Plastic</u>	PVC sleeved to undisturbed soil at wall penetration: <u>yes</u>
PSI: <u>160</u> (160 psi min)	Approximate length of sleeve: <u>5</u>
Depth of supply line: <u>42</u> (36" min)	Sleeve caulked and sealed properly: <u>yes</u>

The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Signature of company representative responsible for installation: Allen Compton date: 12-16-03

**For Health Department Use Only - Not to be completed by Installer**

Date Insp. Requested: \_\_\_\_\_ Date Insp. Approved: 1/17/04 SO BB  
Inspection Data: Pitless adapter and water supply line at least 36" below grade ✓  
Two piece cap installed and attached to casing securely ✓  
Elec. conduit extends at least 18" below grade/attached to cap properly ✓  
Safety rope installed inside of well casing ✓  
Correct well tag attached properly and casing 8" above finished grade ✓  
Water supply line sleeved adequately at house connection ✓  
Adequate grout observed below pitless adapter ✓

C1 1653

SEQUENCE NO.  
(MDE USE ONLY)STATE OF MARYLAND  
WELL COMPLETION REPORTFILL IN THIS FORM COMPLETELY  
PLEASE TYPETHIS REPORT MUST BE SUBMITTED AFTER  
WELL IS COMPLETED.COUNTY  
NUMBERST/CO USE ONLY  
DATE Received  
MM DD YY  
8 13

DATE WELL COMPLETED

MM DD YY  
8 22 00  
15 20

Depth of Well

22 285 26  
(TO NEAREST FOOT)

oklw

PERMIT NO.  
FROM "PERMIT TO DRILL WELL"  
HO - 94 - 2820  
28 29 30 31 32 33 34 35 36 37OWNER: Kasfanta Chuck  
STREET OR RFD: Sapling Ridge Dr. TOWN: Dryden  
SUBDIVISION: High Forest Estates SECTION: LOT: 32

## WELL LOG

Not required for driven wells

## GROUTING RECORD

WELL HAS BEEN GROUTED  
(Circle Appropriate Box)YES ☒ Y ☐ N  
44 44

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT ☒ CM BENTONITE CLAY ☒ BCNO. OF BAGS 18 NO. OF POUNDS 1692GALLONS OF WATER 108

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 70 ft.  
(enter 0 if from surface)  
48 TOP 52 54 BOTTOM 58

## CASING RECORD

casing  
types  
insert  
appropriate  
code  
below☒ ST  
STEEL☐ CO  
CONCRETE☐ PL  
PLASTIC☐ OT  
OTHERMAIN  
CASING  
TYPE  
STNominal diameter  
top (main) casing  
(nearest inch)  
6Total depth  
of main casing  
(nearest foot)  
80

60 61

63 64

66 67

70

## OTHER CASING (if used)

E  
A  
C  
H  
C  
A  
S  
I  
N  
Gdiameter depth (feet)  
inch from toscreen type  
or open hole  
(insert  
appropriate  
code  
below)

## SCREEN RECORD

☒ ST  
STEEL☐ BR  
BRASS☐ HO  
OPEN  
HOLE☐ PL  
PLASTIC☐ OT  
OTHERNUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED

yes ☒ Y ☐ 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. MS DO 24DRILLERS SIGNATURE  
(MUST MATCH SIGNATURE ON APPLICATION)LIC. NO. MS DO 27SITE SUPERVISOR (sign. of driller or journeyman  
responsible for sitework if different from permittee)GRAVEL PACK  
IF WELL DRILLED  
WAS FLOWING WELL  
INSERT F IN BOX 68MDE USE ONLY  
(NOT TO BE FILLED IN BY DRILLER)  
T (E.R.O.S.) W Q70 TELESCOPE  
CASING72 LOG  
INDICATOR74 75 76  
OTHER DATA

C 3

## PUMPING TEST

HOURS PUMPED (nearest hour) 3PUMPING RATE (gal. per min.) 8.5METHOD USED TO  
MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 33 ft.WHEN PUMPING 134 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 INSTALLED PUMP  
(CIRCLE) (YES or NO)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 29CAPACITY:  
GALLONS PER MINUTE  
(to nearest gallon)

31 35

PUMP HORSE POWER

37 41

PUMP COLUMN LENGTH  
(nearest ft.)

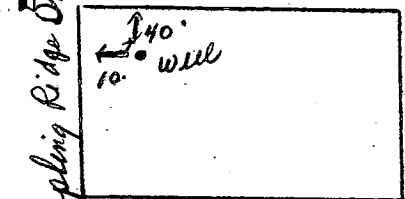
43 47

CASING HEIGHT (circle appropriate box  
and enter casing height)☒ + above

LAND SURFACE

☐ - below1 (nearest  
foot)

## LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURES  
AND INDICATE NOT LESS THAN  
TWO DISTANCES  
(MEASUREMENTS TO WELL)

FIELD DATA SHEET  
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 94-2820  
Location of property (road) Sapling Ridge Dr.  
Subdivision High Forest Est. Lot 32 Block        Plat        Sec.         
Well Driller Joseph Mayne Owner Chuck Karfonta - Sapling Ridge L.L.C.  
Depth of well 285  
Distance of measuring point (M.P.) above ground 1'  
Static water level (S.W.L.) below M.P. 33'

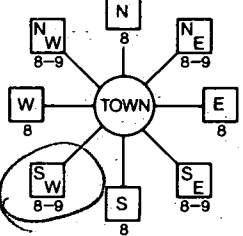
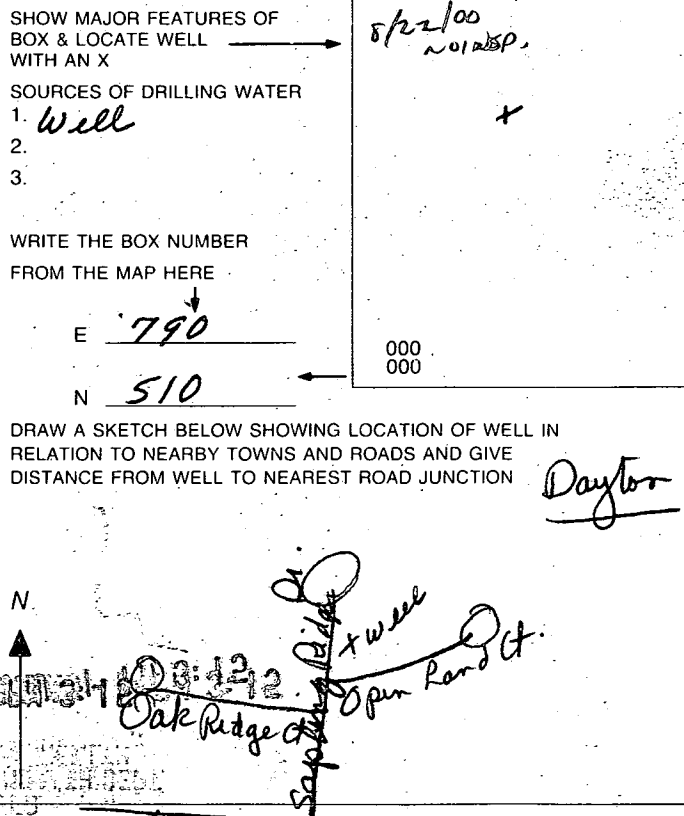
I. High rate pumping -- reservoir drawdown

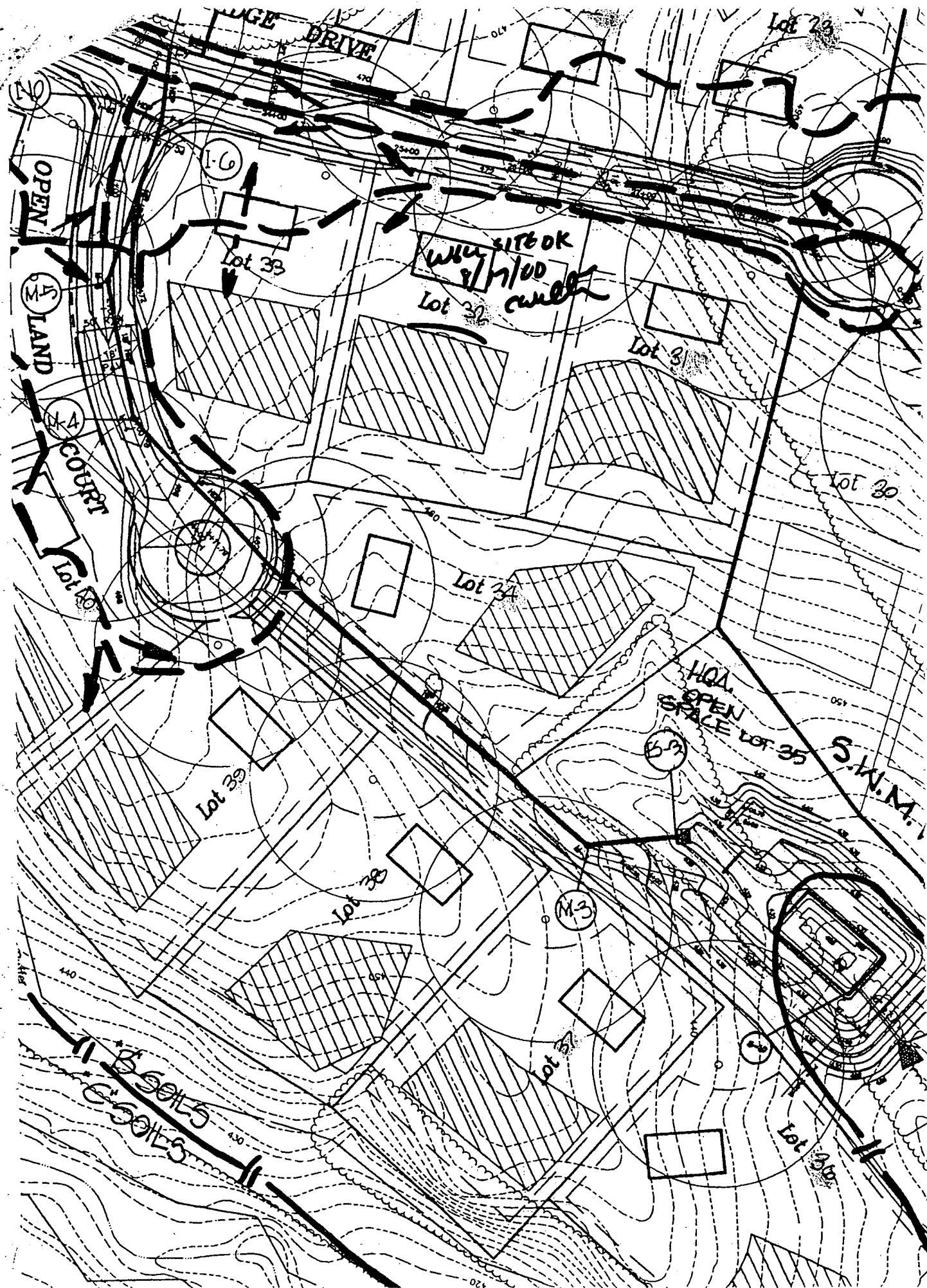
Time pump started 7:30 Pumping rate 15 gpm.  
Total time 30 min. to reach pumping water level 139 ft. below M.P.

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

[illegible]



B 1 1 2 3 4 5 6 <b>5917</b>	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND <b>PERMIT TO DRILL WELL</b> W514165 please print or type	STATE PERMIT NUMBER <b>HO - 94 - 2820</b> 70 fill in this form completely 79
Date Received (APA) 8 MM DD YY 13 15 <u>Karlson</u> Owner 36 <u>16 Mellor Ave.</u> Street or RFD 57 <u>Catonville Md 21228</u> Town State Zip		B 3 LOCATION OF WELL 8 <u>Howard</u> COUNTY 23 <u>High Forest Est.</u> SUBDIVISION SECTION <u>44</u> LOT <u>32</u> 52 <u>Dayton</u> NEAREST TOWN MILES FROM TOWN (enter 0 if in town) <u>4 1/2</u> M I	
DRILLER INFORMATION 76 <u>Joseph L. Mayne</u> Driller's Name 81 <u>Joseph L. Mayne Well Drilling</u> License No. 5512 <u>Ridge Rd Mt. Airy 21771</u> Address 7/21/00 <u>Joseph L. Mayne</u> Signature Date		B 4 1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 11 <u>Sapping Ridge Dr.</u> NEAR WHAT ROAD 30 34 <u>15</u> 37 DISTANCE FROM ROAD ENTER FT OR MI <u>FT</u> TAX MAP: _____ BLK: _____ PARCEL: _____	
WELL INFORMATION 1 2 APPROX. PUMPING RATE (GAL. PER MIN.) <u>5</u> AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <u>500</u>		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL <u>Howard</u> COUNTY NAME 13 COUNTY NO. STATE SIGNATURE _____ INSERT S → DATE ISSUED <u>08/17/00</u> <u>C. Will</u> 8/16/01 43 MM DD YY 48 CO SIGNATURE EXP. DATE NORTH GRID <u>510</u> 0 0 0 EAST GRID <u>0790</u> 0 0 0 50 55 57 63	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION <input type="checkbox"/> F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> I INDUSTRIAL, COMMERCIAL, DEWATERING <input type="checkbox"/> P PUBLIC WATER SUPPLY WELL <input type="checkbox"/> T TEST, OBSERVATION, MONITORING <input type="checkbox"/> G GEO-THERMAL		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. <u>Well</u> 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE E <u>790</u> N <u>510</u>	
APPROXIMATE DEPTH OF WELL <u>300</u> FEET 24 28 APPROXIMATE DIAMETER OF WELL <u>6</u> INCH 30 37 METHOD OF DRILLING (circle one) BORED (or Augered) <u>AIR-ROTARY</u> JETTED <u>ROTARY</u> Jetted & DRIVEN AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary) CABLE REVERSE-ROTARY DRIVE-POINT other _____		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION <u>Dayton</u> 	
REPLACEMENT OR DEEPENED 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 DEEPEAN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEANED (IF AVAILABLE) 41 _____ 52		Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROX. PERMIT NUMBER _____ G PERMIT. No. <u>HO - 94 - 2820</u> 70 71 72 73 74 75 76 77 78 79	
SPECIAL CONDITIONS. NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED.			



# APPLICATION

PERCOLATION TESTING

A 57577

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 C.M.C. CONSTRUCTION, INC.

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

AGENT OR PROSPECTIVE BUYER CHARLES A. SHARP

ADDRESS 3779 SHARP ROAD PHONE 410-489-4630

PROPERTY LOCATION:

1/2 DIVISION C.M.C. CONSTRUCTION PROPERTY LOT NO. 52

ROAD AND DESCRIPTION HOWARD ROAD 3,000'± FROM INTERSECTION  
TRIDELPHIA ROAD (SOUTH)

TAX MAP 27 PARCEL # 19

SIZE OF LOT 40,000 - 50,000 SQ. FT. TYPE BLDG. SINGLE FAMILY DWELLING  
(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. Charles A Sharp  
(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

A52577

COUNTY #

SOIL PROFILE

0'

52V

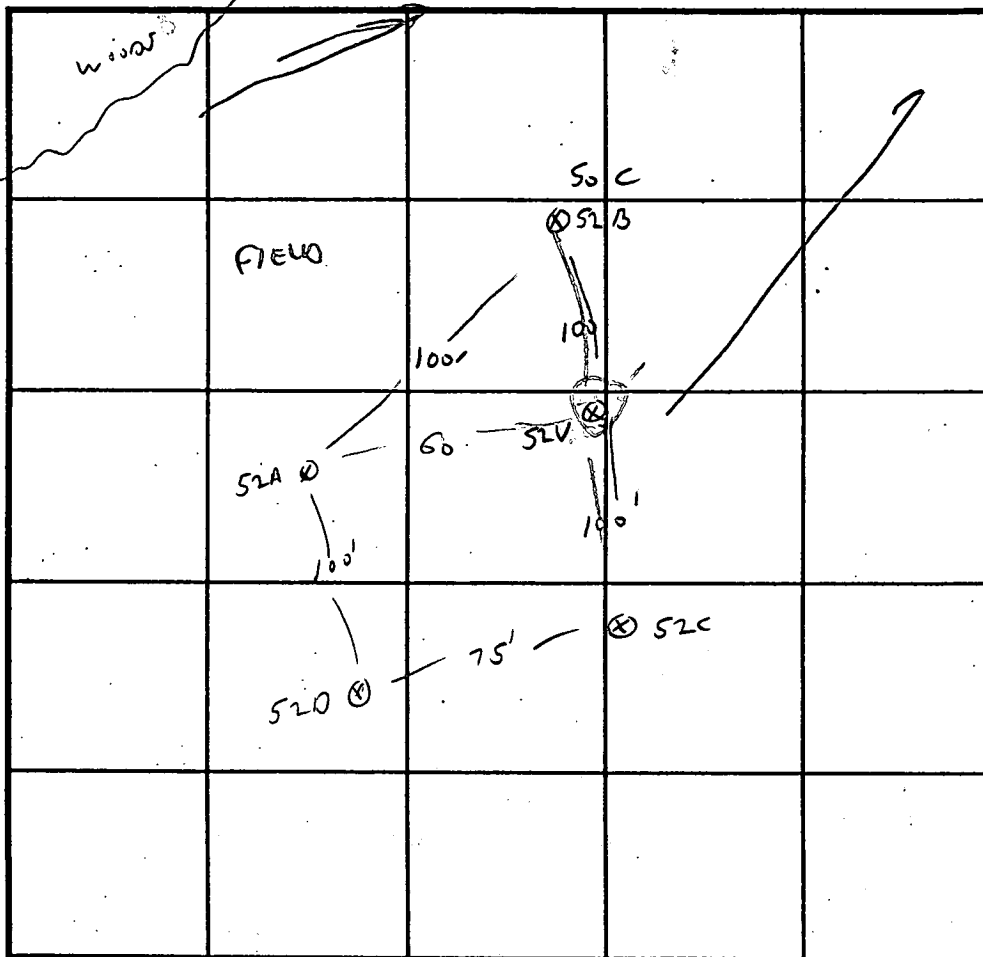
TOPSOIL

BURN  
ORANGE  
SANDY  
CLAY  
LOAM

2-3

OLIVE  
DRAB  
SSC  
ORANGE  
ROTTEN

12V



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE

TYPICAL  
52ATOPSOIL  
BROWN  
CLAY  
LOAMBROWN  
SSC

3'

12

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11/20/96	52A	3/12V	3:06	3:11	3:11	3:21	10min
	52V	7Vok					
	52B/50C	3/12V	3:13	3:14	3:14	3:16	2min
		7Vok					
	52V						

REMARKS LOT 52, 52V WET SEASON

TYPE OF SOIL

TESTED BY G. JARVIS

ALSO PRESENT C. SHARP, R. DEMIT

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

TRENCH WIDTH

INLET DEPTH

MAXIMUM BOTTOM DEPTH

SQ. FT/BEDROOM

X

SAPLING RIDGE COURT

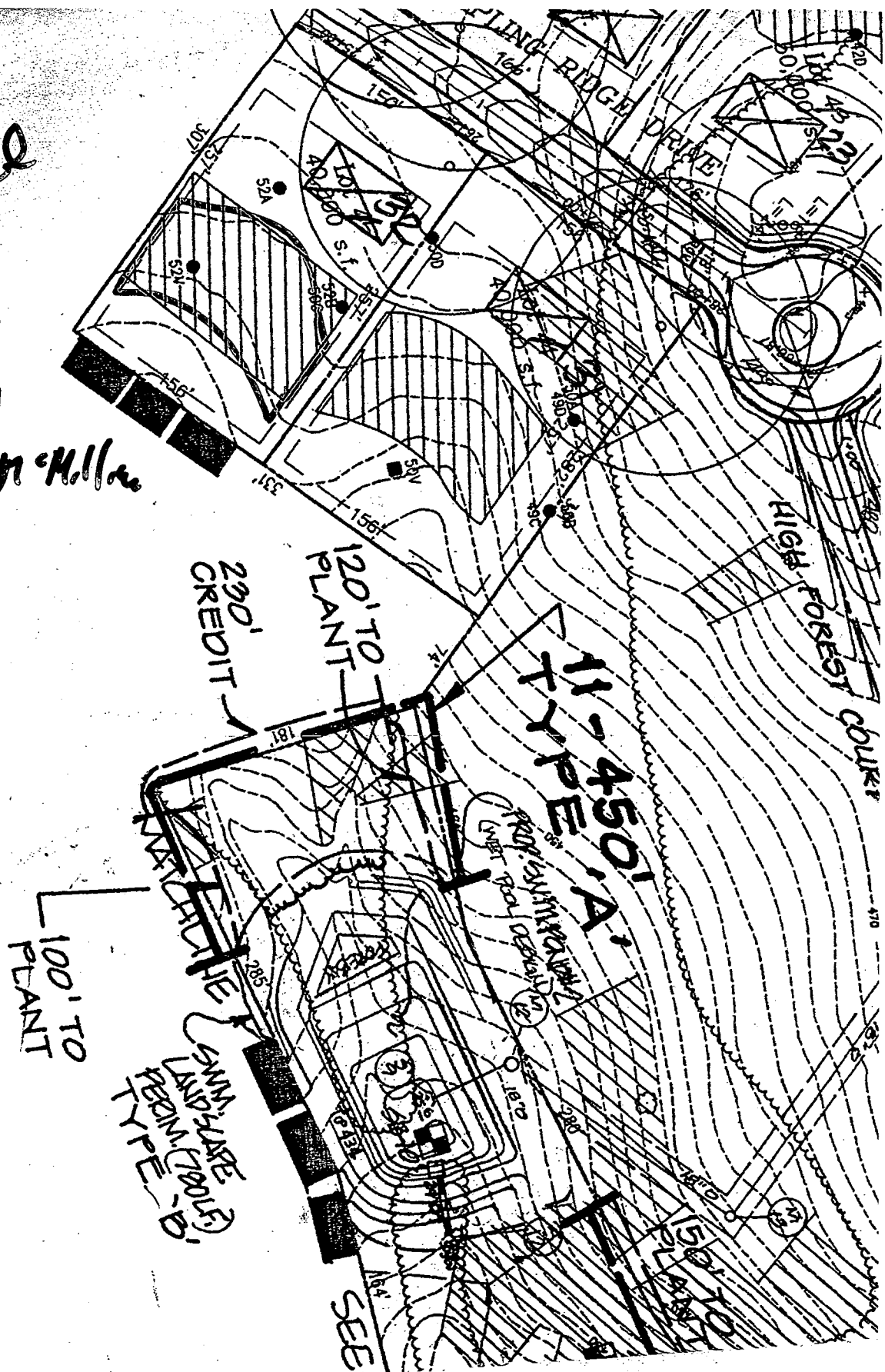
HIGH FOREST

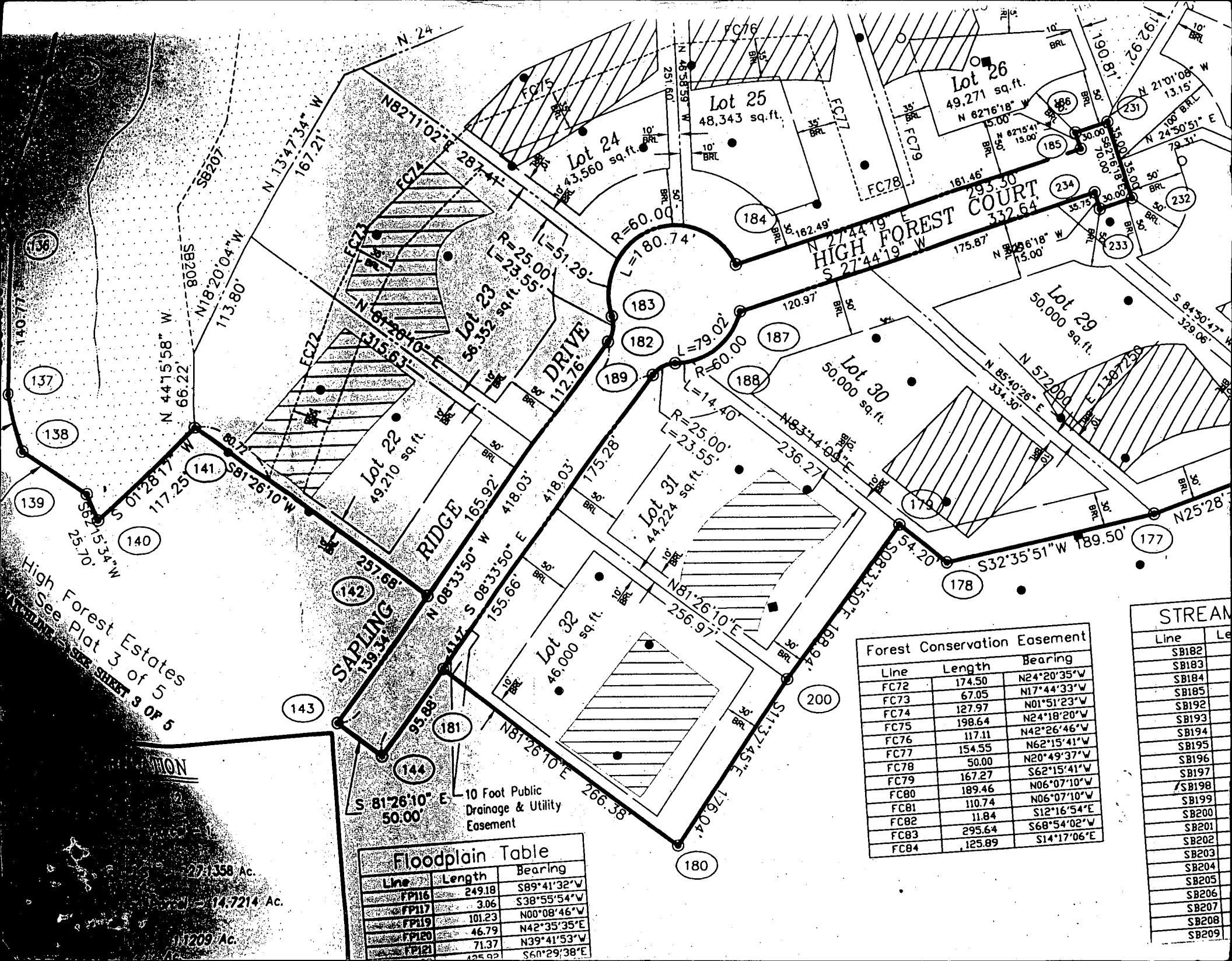
BOX C  
LOT 32  
46,000 S.F.  
PF=478.01  
BF=488.22

BOX C  
LOT 31  
44,224 S.F.  
PF=478.78  
BF=488.97

5/30/01  
Stake SDA and lot corners  
for field insp of  
SDA adjustment.

BOX A  
LOT 34  
45,000 S.F.  
PF=478.01  
BF=488.22

The seal of the State of Maryland is visible in the top left corner. It features a circular design with the text "STATE OF MARYLAND" around the perimeter and "BERT. M. MOORE" in the center. A small crest is also present within the seal.



High Forest Estates  
See Plat 3 of 5  
Plat 3 of 5

Line	Length	Bearing
FP116	249.18	S89°41'32"W
FP117	3.06	S38°55'54"W
FP119	101.23	N00°08'46"W
FP120	46.79	N42°35'35"E
FP121	71.37	N39°41'53"W
FP122	125.92	S60°29'38"E

Line	Length	Bearing
FC72	174.50	N24°20'35"W
FC73	67.05	N17°44'33"W
FC74	127.97	N01°51'23"W
FC75	198.64	N24°18'20"W
FC76	117.11	N42°26'46"W
FC77	154.55	N62°15'41"W
FC78	50.00	N20°49'37"W
FC79	167.27	S62°15'41"W
FC80	189.46	N06°07'10"W
FC81	110.74	N06°07'10"W
FC82	11.84	S12°16'54"E
FC83	295.64	S68°54'02"W
FC84	125.89	S14°17'06"E

Line	Length
SB182	
SB183	
SB184	
SB185	
SB192	
SB193	
SB194	
SB195	
SB196	
SB197	
SB198	
SB199	
SB200	
SB201	
SB202	
SB203	
SB204	
SB205	
SB206	
SB207	
SB208	
SB209	



