

5-16-86  
8:30 AM  
5-19-86  
ASAP

03-308014  
**PERMIT**

APPROVED  
5/19/86  
RH  
P 36846  
A 28665

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY  
BUREAU OF ENVIRONMENTAL HEALTH  
992-2330  
461-9933

ELLICOTT CITY  
DISTRICT 3rd  
DATE 4/24/86

INDEXED

Paul Schissler IS PERMITTED TO INSTALL ☒ ALTER ☐

ADDRESS 4410 Salembottom Road, Westminster, Maryland 21157 PHONE 875-4197

SUBDIVISION Sandy Hill Estates ROAD 2418 Woodstream Ct. LOT 3

PROPERTY OWNER (Vantage Homes)

ADDRESS

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

GARBAGE GRINDER? YES ☐ NO ☒

SEPTIC TANK CAPACITY 1000 GALLONS NUMBER OF BEDROOMS 3

TRENCHES - 158 sq. ft. per bedroom. Trench to be 3 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 4 1/2 feet below original grade. Effective area begins at 3 feet below original grade. 1 1/2 feet of stone below distribution pipe.

LOCATION - Place the distribution box 170 feet from the front lot line and 130 feet from the right lot line as seen when facing the property from Woodstream Court. Run trenches along contour toward left lot line.

NOTE - No trench to exceed 100 feet in length. If more than one trench used, a distribution box is required. Call for inspection of trench before and after gravel is installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. H/A

PLANS APPROVED BY C. Williams DATE 12/16/86

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: IF TRENCH IS USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH.

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 THREE YEARS.

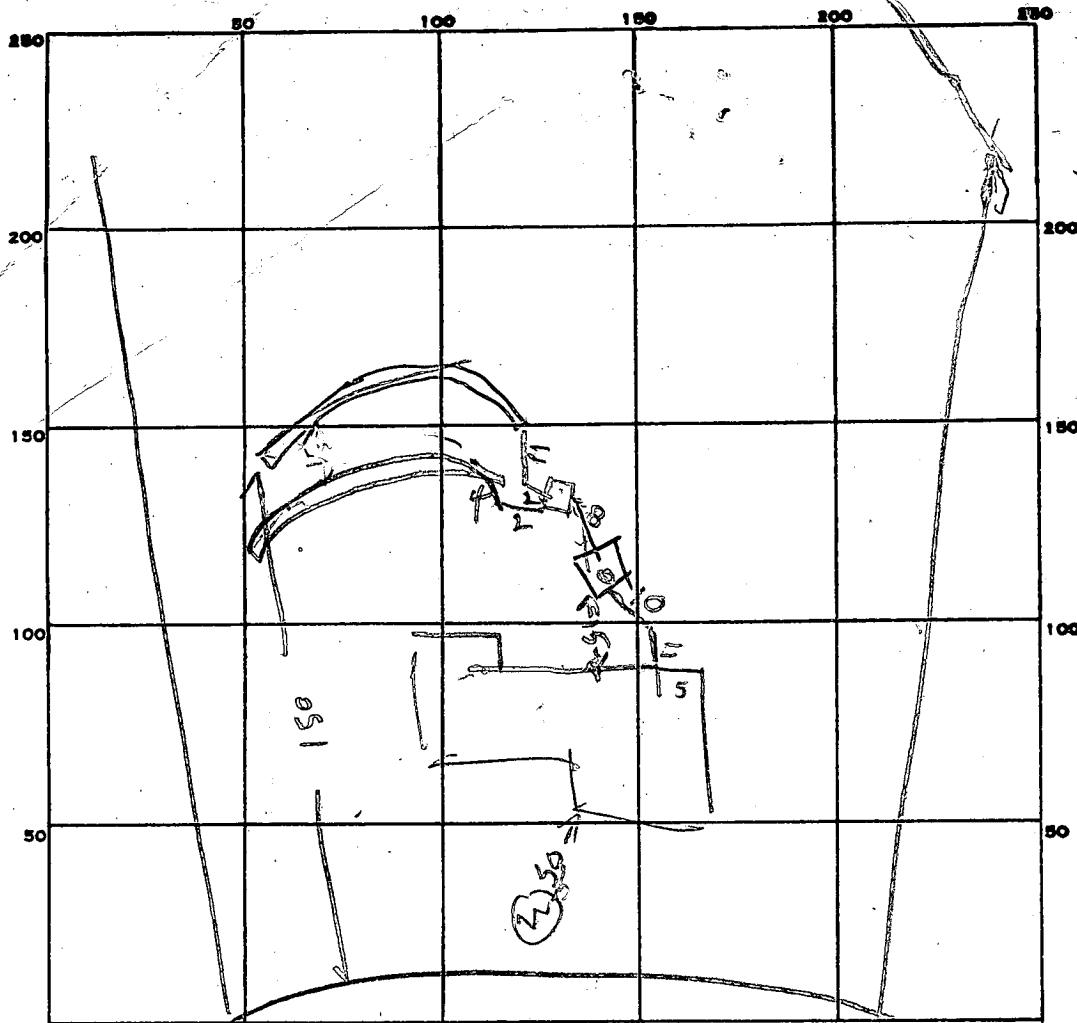
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

\*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT

\*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

A 28665



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

WOOD STREAM CT

PERMIT CARD \_\_\_\_\_

SEPTIC TANK, LEVEL OK 1000

CLEANOUTS ST 20

DISTRIBUTION BOX, LEVEL \_\_\_\_\_

TILE FIELD, DEPTH 4-4 1/2 FT. TRENCH WIDTH 3 FT. #1 86 #2 483

GRAVEL DEPTH 1 1/2-2 FT IN. TOTAL LENGTH 75 FT. #1 225 #2 250 TOTAL 483

NUMBER OF TRENCHES 2 TOTAL BOTTOM AREA 225 / 250 / 483

SEEPAGE PITS, INSIDE DIAMETER \_\_\_\_\_ FT. DEPTH BELOW INLET \_\_\_\_\_ FT.

ABSORBENT AREA 200 SQ. FT.

REMARKS 5/16/86 - TRENCH #1 DUG & PARTLY FILLED WITH STONE

5/16/86 - TRENCH #1 FINISHED & OK TO COVER TANK

AS TRENCH #1 DIG TRENCH #2 & CALL R. HOGGES

5/19/86 TRENCH #2 IS OK 474 SQ FT REQUIRED

483 SQ FT INSTALLED

DATE SYSTEM APPROVED 5/19/86

INSPECTOR Raymond Hogges

# APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SERVICES  
P.O. BOX 476 ELLICOTT, MARYLAND 21043  
TELEPHONE: 992-2330

A 28665

P

Sept 7 onk - 3 bedroom 1000 gal

1250 gal

Tile field - 158

DISTRICT

3rd

DATE 8/9/78

per bedroom installed to a depth of 4 ft below  
orig. grade with 1 ft of gravel under pipe  
contour of ground. Trenches to follow

Begin at present  
line and 125 ft from right side as seen from the front. run  
rest of trenches behind trench 1.

TO: THE COUNTY HEALTH OFFICER  
ELLICOTT CITY, MARYLAND

Trenches to follow contour of  
ground

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Sandy Hill Properties J. D. Builders Mr & Mrs. Charles Aston  
3507 Reynard Ave. 531-3156  
Ellicott City, Md PHONE Mrs. Trager 992-7100  
1405 Larch Road  
Severn, Md 21144

PROPERTY LOCATION: Sandy Hill Estates LOT NO. 2 - New lot 3

ROAD AND DESCRIPTION Sand Hill Road 2418 Woodstream Court

SIZE OF LOT 3 acres TYPE BLDG. 3 or 4 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.

SIGNATURE OF APPLICANT /s/ Rose Trager

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS Wet Season GLK DATE 27 Oct 78REASONS FOR REJECTION OR HOLDING Hold for review - portion of perc area maybe

greater 725% slope. GLK 23 MAR 79

BLDG. PERMIT SIGNED

AND RETURNED 8/13/79Serial # 60177 SFD

BLDG. PERMIT SIGNED

AND RETURNED 12/16/79Serial # 60156

# THIS IS NOT A PERMIT

③

9

SOIL PROFILE

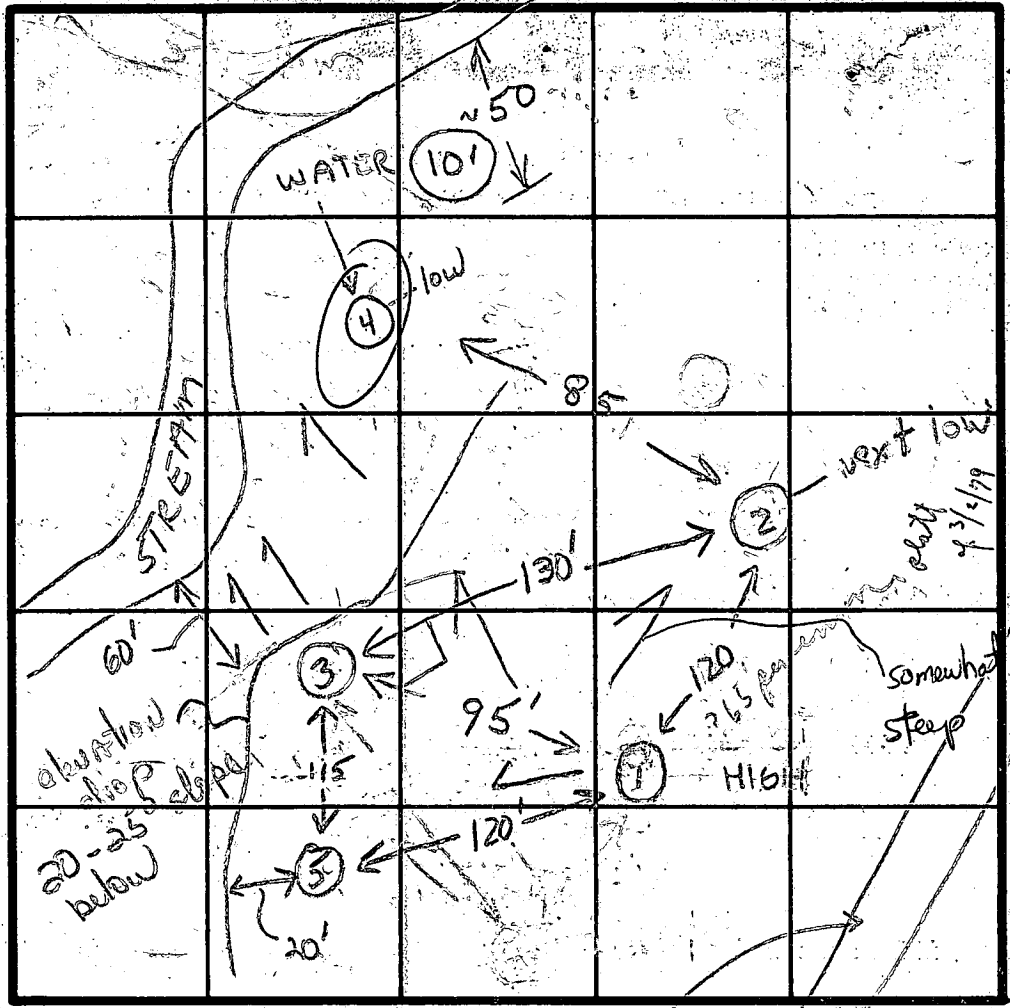
0'  
3'

CLAYEY SAND

SANDY LOAM

Smth. Amts. weathered MICA SCHIST

lot #9



Elevation

② → ④ = 3'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.  
SANDHILL RD

portion between ①②③ very low and may be 75% slope

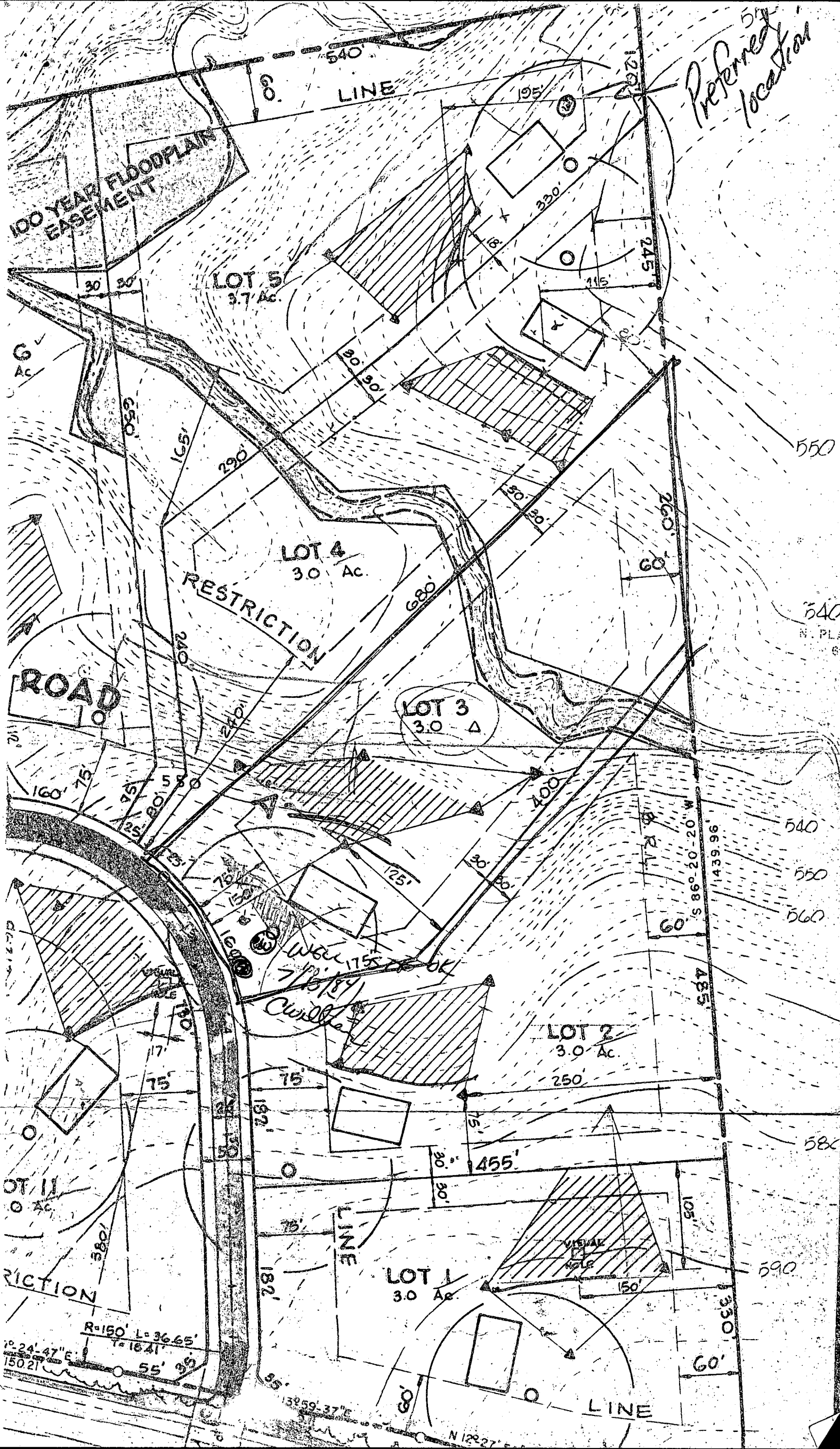
DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/22/78	15	4'	1159	1200	1200	1203	3
	1D-HIGH	12'	1451	147	147	151	4
	25	4'	135	137	137	140	3
	2D-Low	12'	131	132	132	135	3
	35	4'	200	202	202	204	2
	3D	12'	202	204	204	207	3
	4-Low	10'	WATER				
	5	12'	VISUAL - similar				
23 MAR 79	2	12 1/2'	Dry 3' Sandy				

avg = 3.0

REMARKS Test by stake - heavy woods

TYPE OF SOIL SANDY LOAM BELOW CLAY

TESTED BY GLK ALSO PRESENT J. Traver Stick



Preferred location

100 YEAR FLOODPLAIN EASEMENT

LOT 5  
3.7 Ac.

LOT 4  
3.0 Ac.

LOT 3  
3.0 Ac.

LOT 2  
3.0 Ac.

LOT 1  
3.0 Ac.

ROAD

RESTRICTION

Well 1757 OK  
7/15/84  
Cur OK

LOT 11  
0 Ac.

RESTRICTION

R=150' L=36.65'  
1"=16.41'

10.24' 47" E  
150.21'

LINE

LINE

550

540  
N. PL

540

550

560

580

590

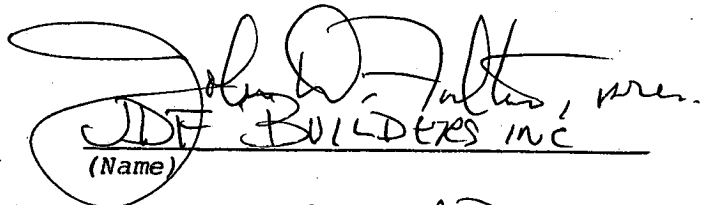
HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

PUMP INSTALLATION

THE FOLLOWING STATEMENT MUST BE COMPLETED BY THE HOME OWNER  
WHEN A PUMP IS INSTALLED BY A PERSON OTHER THAN THE WELL  
DRILLER:

My well driller is not to install the pump for my water well, and I  
hereby certify that it will be my responsibility to have a Pump Permit  
taken out by a registered master plumber or certified pump installer.  
It will be my responsibility to notify the Health Department before  
and during the installation so that inspections can be made by their  
representative. (Pursuant to Chapter XVII, of the Plumbing Code of  
Howard County.)

  
J.D.F. BUILDERS INC  
(Name)

3509 Reppard Dr.  
Ellicott City, Md 21043  
(Address)

SANDY HILL ESTATES LOT 3

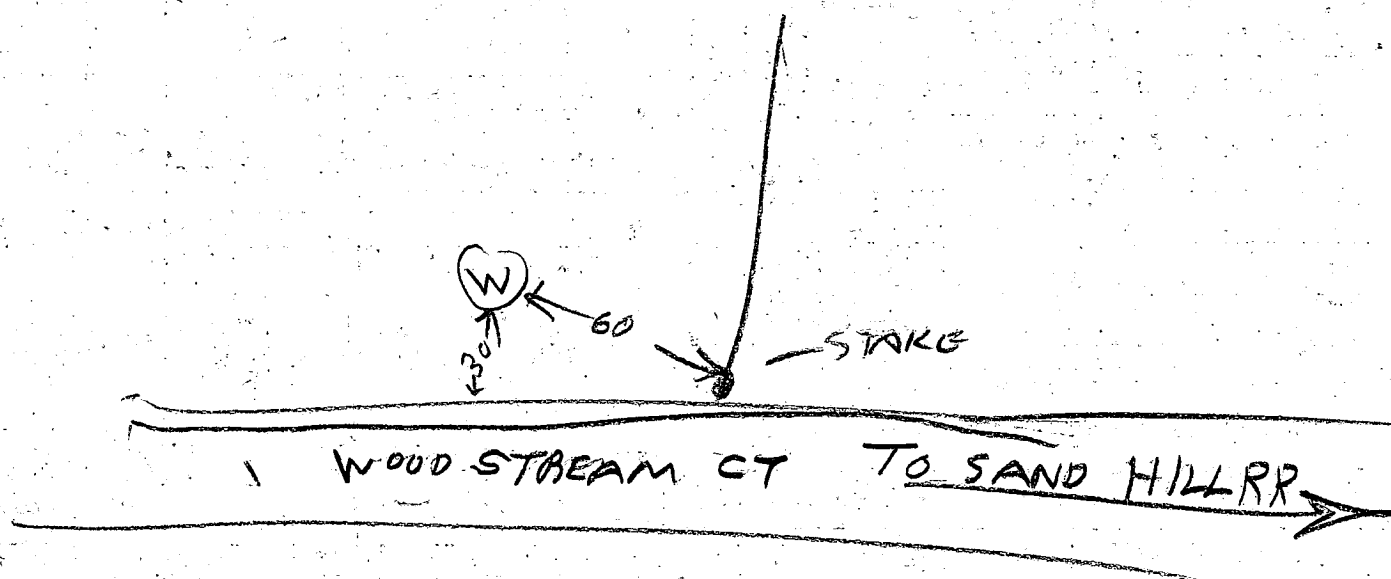
Ho-81-0638  
(OEP Well Permit Number)

July 12, 1984  
(Date)

[illegible]

B 1	7866	SEQUENCE NO. (OEP USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	OEP PERMIT NUMBER HO-81-0638 fill in this form completely
THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS				
Date Received <u>8/6/84</u> <u>2:00 P.M.</u>		LOCATION OF WELL		
OWNER INFORMATION 15 Last Name <u>JOE</u> 13 Owner <u>Bu:lders Inc</u> 36 First Name <u>Keynard</u> 55 Street or RFD <u>Dr</u> 57 Town <u>Elliot</u> 70 State <u>MD</u> 72 Zip <u>21043</u> 76		8 COUNTY <u>Howard</u> 21 23 SUBDIVISION <u>Sandy Hill Estates</u> 42 SECTION <u>3</u> 44 46 LOT <u>3</u> 48 50 52 NEAREST TOWN <u>Slacks Corner</u> 71 MILES FROM TOWN (enter 0 if in town) <u>2.5</u> 73 MI 76 77 78		
DRILLER INFORMATION Driller's Name <u>Wm. W. Reichart</u> 77 License No. <u>064</u> 80 Firm Name <u>Wm. W. Reichart, Inc</u> Address <u>RD #2 Box 54 Hanover, PA 17331</u> Signature <u>Wm. W. Reichart</u> Date <u>7/9/84</u>		11 NEAR WHAT ROAD <u>Wood Stream Ct</u> 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH <input checked="" type="checkbox"/> N <input type="checkbox"/> NE <input type="checkbox"/> E <input type="checkbox"/> SE <input type="checkbox"/> S <input type="checkbox"/> SW <input type="checkbox"/> W 34 <u>40</u> 37 DISTANCE FROM ROAD ENTER FT or MI <u>FT</u> 38 39		
WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) <u>5</u> 8 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <u>500</u> 14 20		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL <u>Howard</u> COUNTY NAME OEP SIGNATURE <u>Am. William</u> COUNTY NO. <u>A 28665</u> DATE ISSUED <u>07/18/84</u> STATE HEALTH INSERT S <input type="checkbox"/> 41 CO SIGNATURE <u>Am. William</u> EXP. DATE <u>1/18/85</u> NORTH GRID <u>535000</u> 50 55 EAST GRID <u>0818000</u> 57 63		
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)		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. <u>Approved well</u> 2. <u>well OK</u> 3. <u>See other well</u> X WRITE THE BOX NUMBER FROM THE MAP HERE E <u>810</u> N <u>530</u> 000 000		
APPROXIMATE DEPTH OF WELL <u>250</u> 24 FEET 28 APPROXIMATE DIAMETER OF WELL <u>6</u> INCH. NEAREST INCH.		METHOD OF DRILLING (circle one) BORED (or Augered) <input checked="" type="checkbox"/> JETTED <input type="checkbox"/> Jetted & DRIVEN 30- AIR-ROTary <input checked="" type="checkbox"/> (AIR-PERCussion) ROTARY (Hydraulic, Rotary) 37 CABLE <input type="checkbox"/> REVERSE-ROTary <input type="checkbox"/> 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 39 <input type="checkbox"/> S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY <input type="checkbox"/> D THIS WELL WILL DEEPMEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPMED (IF AVAILABLE) 41 _____ 52		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 		
Not to be filled in by driller (OEP USE ONLY)				
APPROX. PERMIT NUMBER _____ 54 GAP _____ 63 FORCE <input checked="" type="checkbox"/> W WRITE INITIALS IN BOX PERMIT No. <u>HO-81-0638</u> 67 68 70 71 72 73 74 75 76 77 78 79				
SPECIAL CONDITIONS				





- ① LOCATION OK
- ② 50 1/2 FT CASING
- ③ 39 FT OPEN HOLE
- ④ WELL OK 14 BAGS USED
- ⑤

2/6/04  
Raymond Hedges

C1 2870 SEQUENCE NO. (OEP 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 28665

DATE Received  
8 13

DATE WELL COMPLETED  
080684  
15 20

Depth of Well  
22 400 26  
(TO NEAREST FOOT)

PERMIT NO.  
FROM "PERMIT TO DRILL WELL"  
HO-81-0638  
28 29 30 31 32 33 34 35 36 37

OWNER JDF BUILDERS  
STREET OR RFD last name WOOD STREAM CT first name TOWN SLACKS CORNER  
SUBDIVISION SANDY HILL EST. SECTION LOT 3

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 FROM TO Check if water bearing  
rolling ground 0 46  
gravel  
schist 46 89  
water  
schist 89 315  
water  
schist 315 400

GROUTING RECORD  
WELL HAS BEEN GROUTED (Circle Appropriate Box) YES Y NO N  
TYPE OF GROUTING MATERIAL  
CEMENT C M BENTONITE CLAY B C  
NO. OF BAGS 14 NO. OF POUNDS 1344  
GALLONS OF WATER 96  
DEPTH OF GROUT SEAL (to nearest foot) from 0 48 TOP 52 ft. to 39 54 BOTTOM 58 ft. (enter 0 if from surface)  
CASING RECORD  
casing types insert appropriate code below  
STEEL S T CONCRETE C O  
PLASTIC P L OTHER O T  
MAIN CASING TYPE Nominal diameter top (main) casing (nearest inch) Total depth of main casing (nearest foot)  
S T 60 61 63 64 49 66 70

OTHER CASING (if used)  
EACH CASING diameter depth (feet) from to  
inch from to

SCREEN RECORD  
screen type or open hole insert appropriate code below  
STEEL S T BRASS B R OPEN HOLE H O  
PLASTIC P L OTHER O T

C2  
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  
SLOT SIZE 1 2 3  
DIAMETER OF SCREEN 56 60 (NEAREST INCH)

GRAVEL PACK  
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.) W Q  
70 72 74 75 76  
TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3  
PUMPING TEST  
HOURS PUMPED (nearest hour) 7  
PUMPING RATE (gal. per min. to nearest gal.) 1  
METHOD USED TO MEASURE PUMPING RATE watch & bucket  
WATER LEVEL (distance from land surface) BEFORE PUMPING 25 WHEN PUMPING 375  
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 EXCEPT HOME USE  
TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE: 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) 4 above 49 below LAND SURFACE 1 (nearest foot) 50 51

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)  
wood Stream Court

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. 064  
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)  
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

Page 8 of 1  
Date 8/6/84

Review 1/29/85 OK J.S.

FIELD DATA SHEET  
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-0638  
Location of property (road) WOOD STREAM CT  
Subdivision SANDY HILL ESTATES Lot 3 Block      Plat      Sec.       
Well Driller WM REICHART Owner JDF BUILDERS

Depth of well 400'  
Distance of measuring point (M.P.) above ground, surface  
Static water level (S.W.L.) below M.P. 25'

I. High rate pumping -- reservoir drawdown

Time pump started 9:00 A.M. Pumping rate 10 gpm  
Total time 14 hrs to reach pumping water level 375' ft. below M.P.

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

TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE time to fill 5 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
9:00	25'	30 sec.		10
9:15	111'	"		"
9:30	198'	"		"
9:45	271'	39.5 sec.		8
10:00	332'	42.8 sec.		7
10:15	375'	5 min.		1
10:30	"	"		"
10:45	"	"		"
11:00	"	"		"
11:15	"	"		"
11:30	"	"		"
11:45	"	"		"
12:00	"	"		"
12:15	"	"		"
12:30	"	"		"
12:45	"	"		"
1:00	"	"		"
1:15	"	"		"
1:30	"	"		"
1:45	"	"		"
2:00	"	"		"
↓	↓	↓		↓
4:15	375'	5 min		1

RECEIVED  
HOWARD COUNTY  
HEALTH DEPT  
ELICOTT CITY, MD  
AUG 13 9 00 AM '84

5/16/86

- ① Pella adapte 01
- ② Pipe OK
- ③ Groundwork OK
- ④ Power wire OK
- ⑤ Pressure Tank not yet installed
- ⑥ No Permit at site must check at office

VERNON L GAUSS INC 6618854  
7907 BELAIR RD  
BALTO MD 21236

5/19/81 Pressure Tank installers



DEVELOPMENT  
CONSULTANTS  
GROUP

12409 ROUTE 108  
CLARKSVILLE MD 21030

TELEPHONE  
301-590-9980  
301-594-0197

SITE PLAN  
LOT 3

TAX MAP 16 PARCEL 392  
PLAT BOOK 4 PLAT 3691

SANDY HILL ESTATES

3<sup>rd</sup> ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND

Job No

123-02

Scale 1" = 100'

DATES

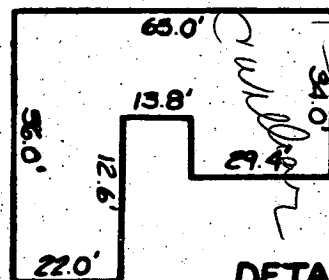


4 Br.  
B = 553.00  
FF = 562.00  
Inv. drain @ house = 548.2  
Septic tank = 1250 gal.  
Inv. in = 548.2  
out = 548.0  
Elev. ground @ Septic tank = 552.00  
Inv. begin tile field = 547.00  
250 LF trench - maintain  
4' of cover with 1 foot of  
gravel in tile field.

548  
547

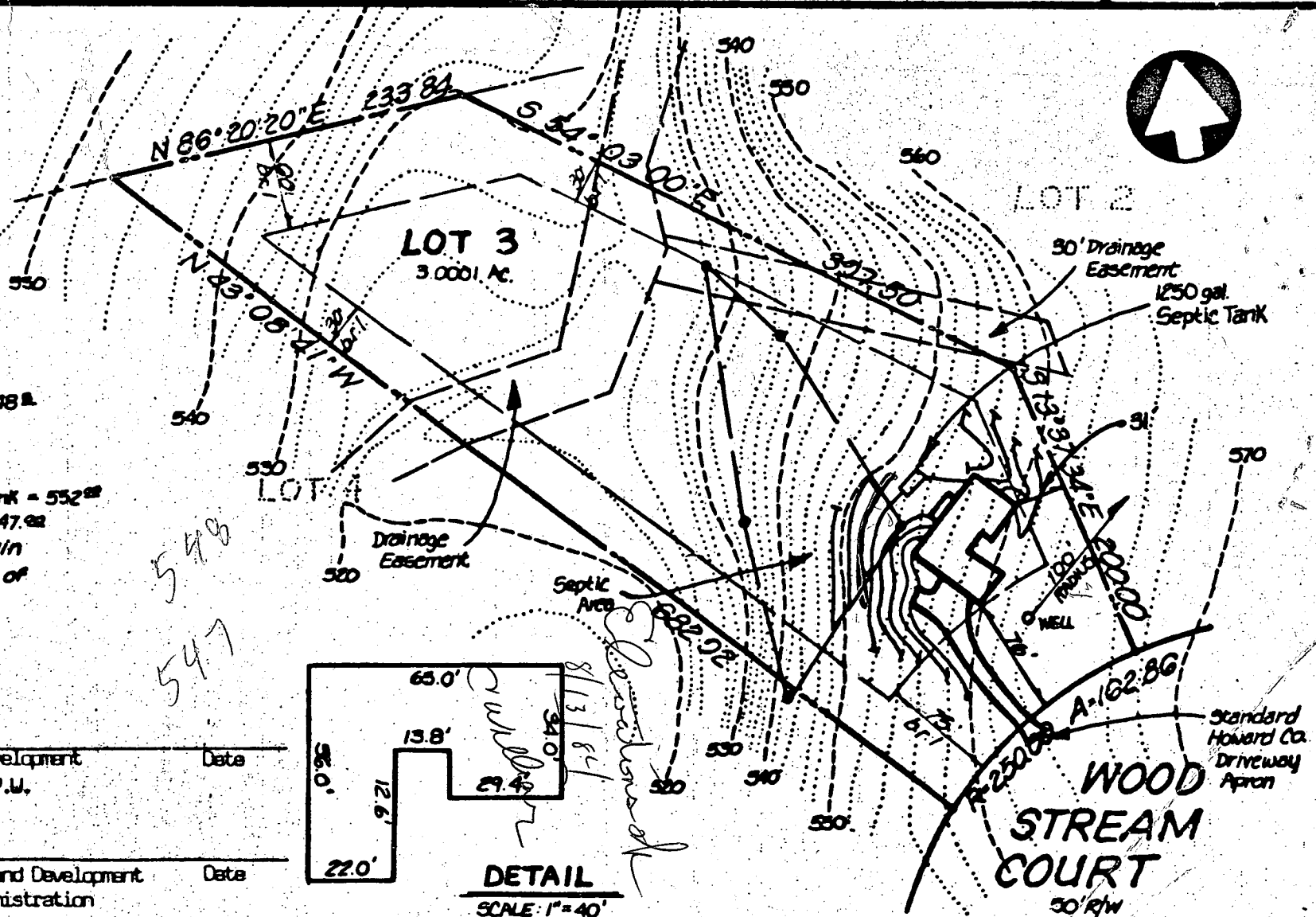
APPROVED: \_\_\_\_\_ Date \_\_\_\_\_  
Chief - Land Development  
Division - D.P.U.

APPROVED: \_\_\_\_\_ Date \_\_\_\_\_  
Division of Land Development  
& Zoning Administration



DETAIL

SCALE: 1" = 40'



# APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

Howard County Health Department  
Bureau of Environmental Health  
3525-H Ellicott Mills Drive  
Court House Square  
Ellicott City, Md. 21043  
461-9933

New Installation ☒  
Replacement ☐

Receipt # 36905  
Date 4-30-86

Name of Installer VERNON L GAUSS INC

Telephone 661-8854

License number 2135

Certified Well Pump Installer ☐ Well Driller ☐ Registered Plumber ☒

Name of Property Owner Vantage Homes Telephone 744-8177

Subdivision 348 Woodstream Court Lot # 3 Well tag # - - -

Site Address 2418 Woodstream Court

SANDY HILL ESTATES

## Pump

1. Type
  - a. Deep well jet ☐
  - b. Shallow well jet ☐
  - c. Submersible ☒
2. Make Meyers
3. Model # 5572-5574
4. Capacity 4 GPM

## Motor

1. Horsepower 3/4
2. RPM
3. Voltage           
  - a. 110 ☐
  - b. 220 ☒

## Pitless Adapter

1. Make Hammer
2. Model # 5100
3. Depth

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

1. Capacity Well x Vol 203
2. Pressure relief valve? ☒

## Piping

1. Type Polybutylene
2. Size 1"
3. NSF and/or BOCA Code approved ☒
4. Depth of supply line 42"

## Well data

1. Depth 280 ft.
2. Yield 15 GPM
3. Static water level 240 ft.
4. Will water supply be disinfected by installer? YES

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: Vernon L Gauss

Date: 4-30-86

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