

# PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

DISTRICT 4th

HOWARD COUNTY  
BUREAU OF ENVIRONMENTAL HEALTH  
461-9933

DATE 4/10/88

DATE SYSTEM APPROVED 6-13-88

INSPECTOR S. Abel

INDEXED

04-340841

6-13-88  
MM

P 41930

A 29817

Jack Fuock IS PERMITTED TO INSTALL  ALTER

ADDRESS \_\_\_\_\_ PHONE 988-9270

SUBDIVISION Woodcamp Farms ROAD 17559 Woodcamp Road LOT 9

PROPERTY OWNER Bruce Carter

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 - 210 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 4 1/2 feet below original grade. Bottom maximum depth 9 feet below original grade. Effective area begins at 4 1/2 feet below original grade. 4 1/2 feet of stone below distribution pipe.

LOCATION - Beginning with the left rear lot corner (corner of Lot 10 and Lot 9) place the distribution box <sup>100</sup> feet down the left ~~(600)~~ lot line and <sup>20</sup> feet off the left lot line as seen when viewing property from Woodcamp Road. Run trenches along contour toward the right rear corner of property. Trenches should not exceed 75 feet in length. NOTE: MAKE SURE TO MAINTAIN 100 FEET MINIMUM FROM ALL WELLS (PARTICULARLY LOT 8) TO SEPTIC.

NOTE - Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

PLANS APPROVED BY Bert Nixon <sup>6/4/88</sup> DATE 11/25/86

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: 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 TRENCH(IES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(IES).

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.

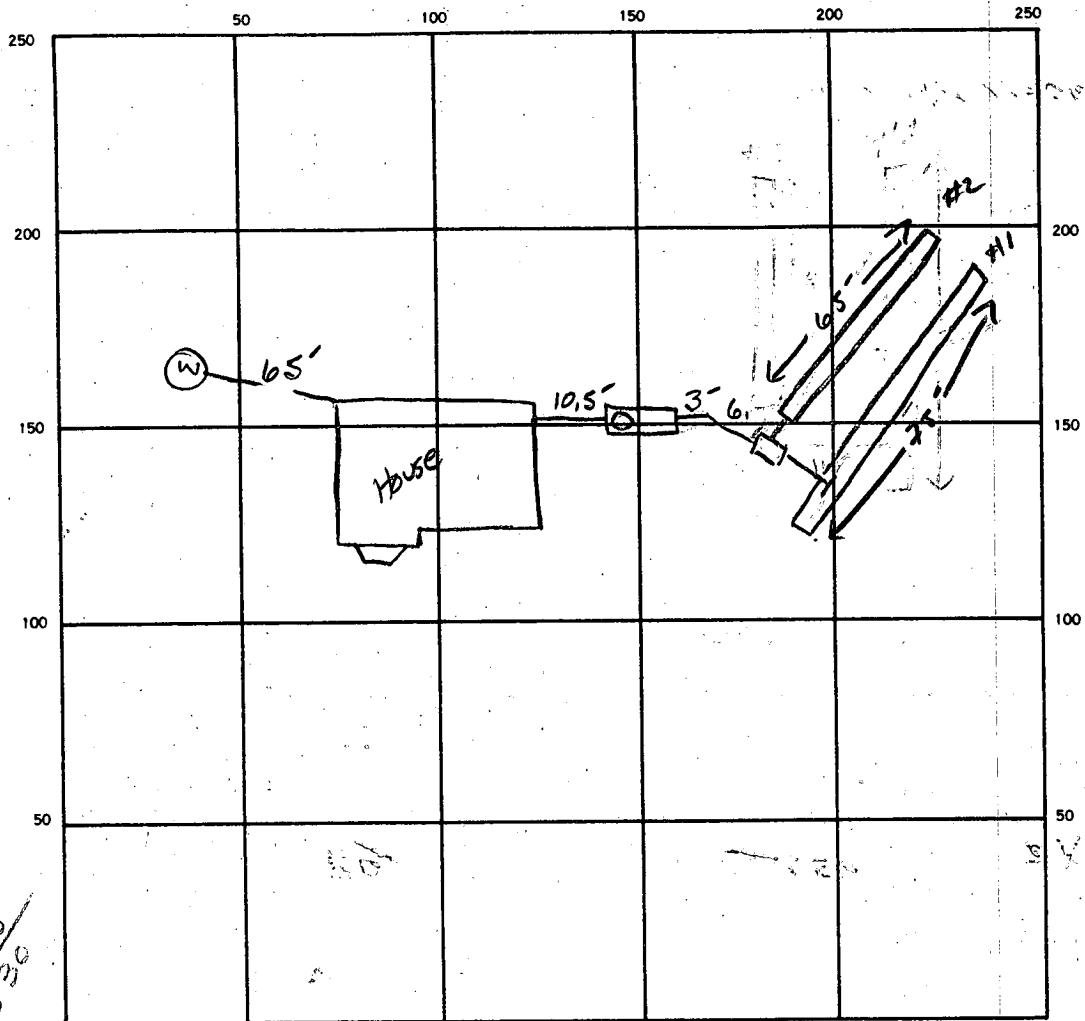
BLDG. PERMIT SIGNED  
AND RETURNED 11/24/92  
Serial # 94256 - Storage Bldg.

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

\*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1186

A  
29817



INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.

630  
2  
140  
45  
70  
560  
630

SEPTIC TANK LEVEL 1000 GAL - CLEANOUTS VST

DISTRIBUTION BOX LEVEL ✓

DRAIN FIELD/TILE FIELD. DEPTH 9 FT. TRENCH WIDTH 2 FT. INLET DEPTH 4.5 FT.

EFFECTIVE GRAVEL DEPTH 4.5 FT. TOTAL LENGTH 140 LF #1=75 #2=65

NUMBER OF TRENCHES 2 ONE SIDEWALL BOTTOM AREA 630 SQ. FT.

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

ABSORBENT AREA 630 SQ. FT.

REMARKS 6-13-88 OK TO COVER 1<sup>ST</sup> TRENCH, OK TO STONE #2 - OK TO COVER #2

DATE SYSTEM APPROVED 6-13-88 INSPECTOR S. Abel

11/25/86

A 29817

SUBDIVISION:

WOODCAMP FARMS  
WOODCAMP CT.

LOT NUMBER: 9

DRY WELL OR DRY WELL AND TRENCH

	Septic Tank	_____ sq. ft./bedroom
		<u>Minimum Total square Feet</u>
3 bedroom	1000 gallon	_____
4 bedroom	1250 gallon	_____
5 bedroom	1500 gallon	_____

Inlet \_\_\_\_\_ feet below original grade.  
 Bottom maximum depth \_\_\_\_\_ feet below original grade.  
 Effective area begins at \_\_\_\_\_ feet below original grade.

NOTE: If trench is used to make up absorbent area, run the trench on level ground and leave a 5 foot earth buffer between dry well and trench. No trench is to exceed 100 feet in length. Trench inlet to be same as dry well, with \_\_\_\_\_ feet of stone below distribution pipe.

TRENCHES

210 sq. ft./bedroom

Trench to be 2 wide.  
 Inlet 4 1/2 feet below original grade.  
 Bottom maximum depth 9' feet below original grade.  
 Effective area begins at 4 1/2 feet below original grade.  
4 1/2 feet of stone below distribution pipe.

*360 per BP*

- NOTE:
- (1) No trench to exceed 100 feet in length.
  - (2) If more than one trench used, a distribution box is required.
  - (3) Trenches to be installed on level ground.
  - (4) Call for inspection of trench before gravel is installed.
  - (5) Provide 6"-8" diameter cleanout and cap to grade or above on septic tank and drywell.
  - (6) If a Garbage disposal is used, increase septic tank capacity by 50% and increase absorbant sidewall area by 22%.

LOCATION: BEGINNING WITH THE LEFT REAR LOT CORNER (CORNER OF LOT 10 AND 9) PLACE THE DISTRIBUTION BOX <sup>100</sup>/~~85~~ DOWN THE LEFT (~~656~~) LOT LINE AND <sup>20</sup>/~~100~~ OFF THE LEFT LOT LINE AS SEEN WHEN VIEWING PROPERTY FROM WOODCAMP RD. RUN TRENCHES ALONG CONTOUR TOWARD THE RIGHT REAR CORNER OF PROPERTY. TRENCHES SHOULD NOT EXCEED 75' IN LENGTH.

NOTE: MAKE SURE TO MAINTAIN 100' MINIMUM FROM ALL WELLS (PARTICULARLY LOT 8) TO SEPTIC.

*Paul  
5-14-79*

*Page 1*

# APPLICATION

A 29817

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P \_\_\_\_\_

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

DISTRICT 4th.

DATE 5/8/79

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 Wayne C. Hough  
ADDRESS 17740 Hardy Road  
Mt. Airy, Md. 21771 PHONE Boender Associates  
465-7777

PROPERTY LOCATION:  
SUBDIVISION Woodcamp Farms LOT NO. 9  
13 Section 1  
ROAD AND DESCRIPTION Hardy Road

SIZE OF LOT 3 Acres m/1 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

ANY CIRCUMSTANCES.

SIGNATURE OF APPLICANT /s/ Wayne C. Hough

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

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

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING 5/18/79 REPERC IN WET SEASON R

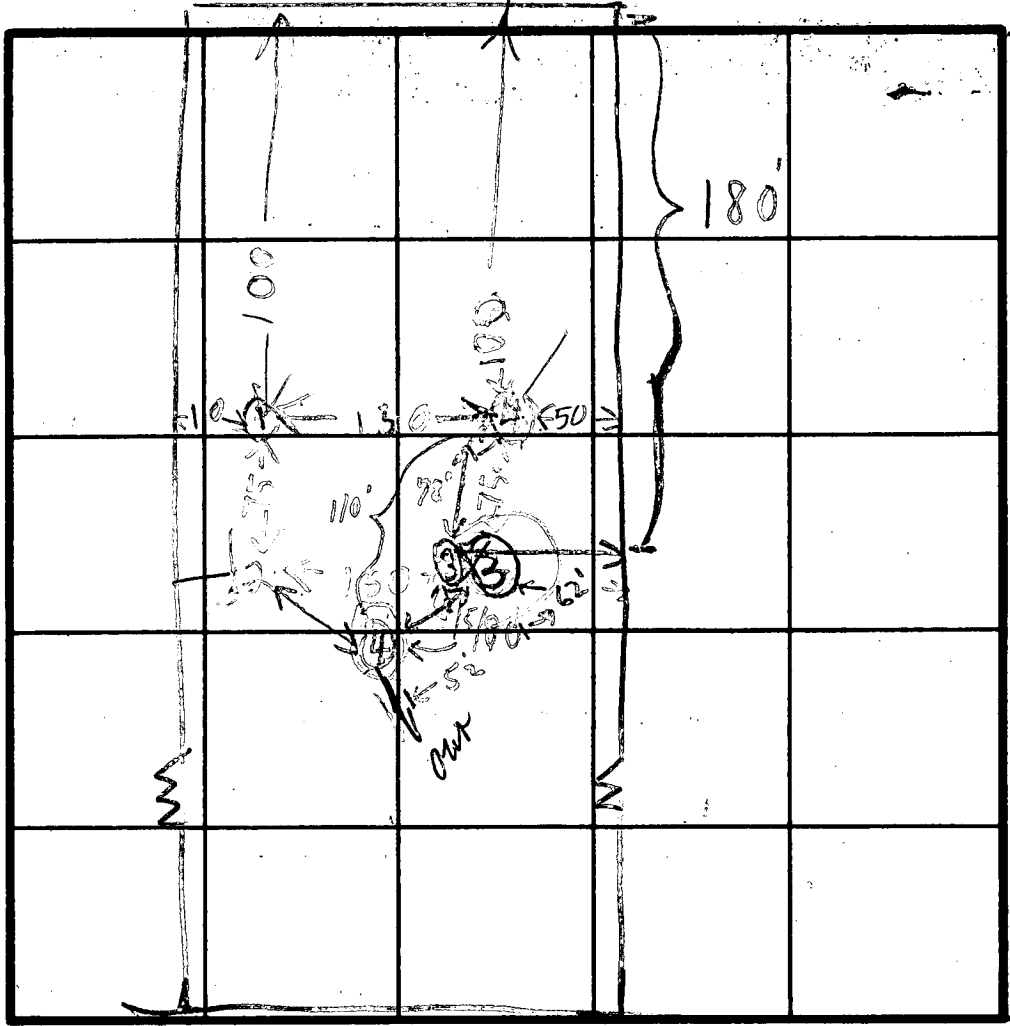
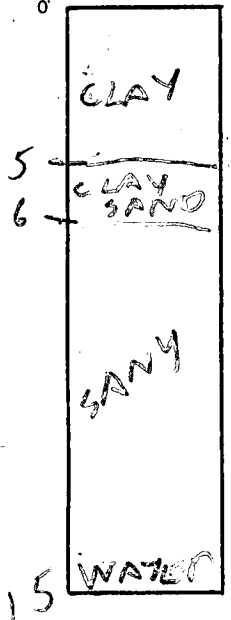
5/22/79 Held for Review DM said Reperc in wet season RH

Office 2/6/80 #4 Hole unacceptable per Mr. Monaghan  
Need 2 more holes tested per Mr. Monaghan  
Possibly #2

## THIS IS NOT A PER

OLD 13-9  
NEW

(3)  
SOIL PROFILE



FIELD SHEET  
TEST NOT PER STONE

Notes 1, 2, 4, 5  
126  
08/16

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

← TO HARRY RD

WOOD CAMP RD

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	HOLD ELEVATION
			START	STOP	START	STOP		
5/19/79	1D	13	2:15	2:21	2:21	2:30	9	HIGHEST
	1S	4	2:15	2:21	2:21	2:30	9	
	2V	11 1/2	TOP 5 FT CLAY	5 FT CLAY				LOW
	2V	15	SEE SOIL PROFILE	WATER 15 FT				LOWEST
5/19/79	4V	13	TOP 5 FT CLAY	5 FT SANDY				NEXT HIGHEST
2/5/80	3	5 1/2'	1:55	2:25	1/2"	X; X	30 min	
		13 1/2'	1:54	2:25	3/4"	X; X	31 min	
	4a	5 1/2'	4:24	4:35	4:35	4:57	22 min	
	4b	13 1/2'	4:25	4:55	2 1/2" - 1/2" g. mod.			
	B	9 1/2'	5:13	5:20	5:20	5:30	10 min	

5/18/79 P.M. 2/5/80 Hold for further tests for expansion  
2/5/80 DENNY C.B.S.

BY B.H. 2/5/80 C.B.S. ALSO PRESENT DENNY & GARY

# APPLICATION

Page 2

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 29817

P \_\_\_\_\_

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

DISTRICT 4TH

DATE 5/8/79

*System First R.H.*

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 ~~WAYNE C. HOOVER~~ BRUCE CARTER  
ADDRESS 1774 HARDY RD PHONE BOONDER  
MT AIREY 21771 485-7777

PROPERTY LOCATION:  
SUBDIVISION WOOD CAMP FARMS LOT NO. 13  
ROAD AND DESCRIPTION HARDY RD  
17539 WOODCAMP Rd.

SIZE OF LOT \_\_\_\_\_ TYPE BLDG. \_\_\_\_\_

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.

BLDG. PERMIT SIGNED  
AND RETURNED 4-14-87  
*S. Cal*  
*BP# 11144*

SIGNATURE OF APPLICANT \_\_\_\_\_

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

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

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

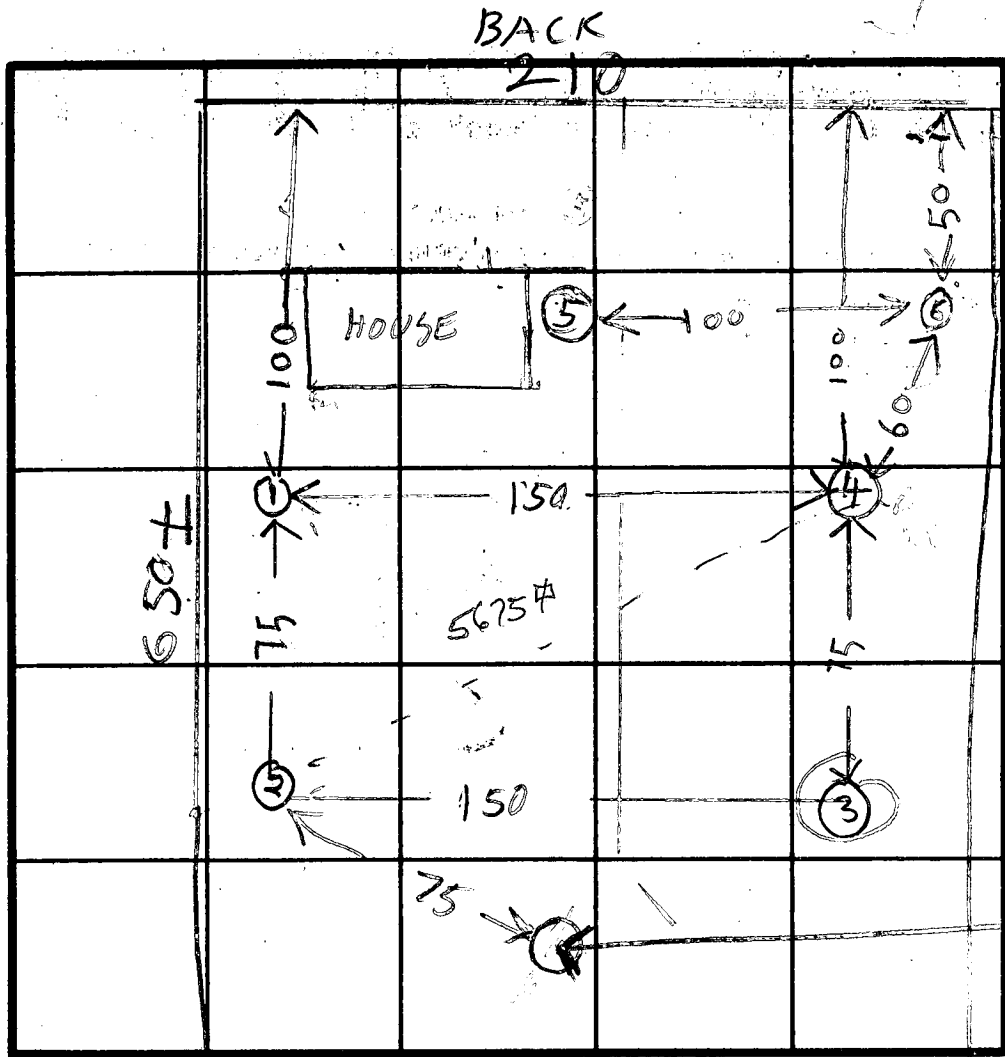
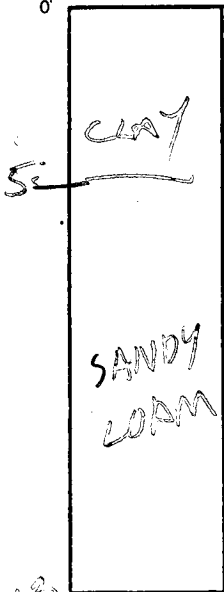
REASONS FOR REJECTION OR HOLDING 3/11/80 - PERC OK HOLD FOR

CERTIFIED HOLES PER R.H. & DM 11/24/80 Ford  
Plat signed

# THIS IS NOT A PERMIT

SCALE  
1" = 50 FT

SOIL PROFILE



OLD  
13  
WOOD  
CAMP  
FARMS

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
2/29/80	2S	6	251	306	306	328	24	
2/29/90	2D	14	252	310	310	333	23	
	5S	5 1/2	334	338	338	352	14	
	5D	14 1/2	338	345	345	400	15	
	6V	13	SEE SOIL PROFILE					

REMARKS on 125

TYPE OF SOIL

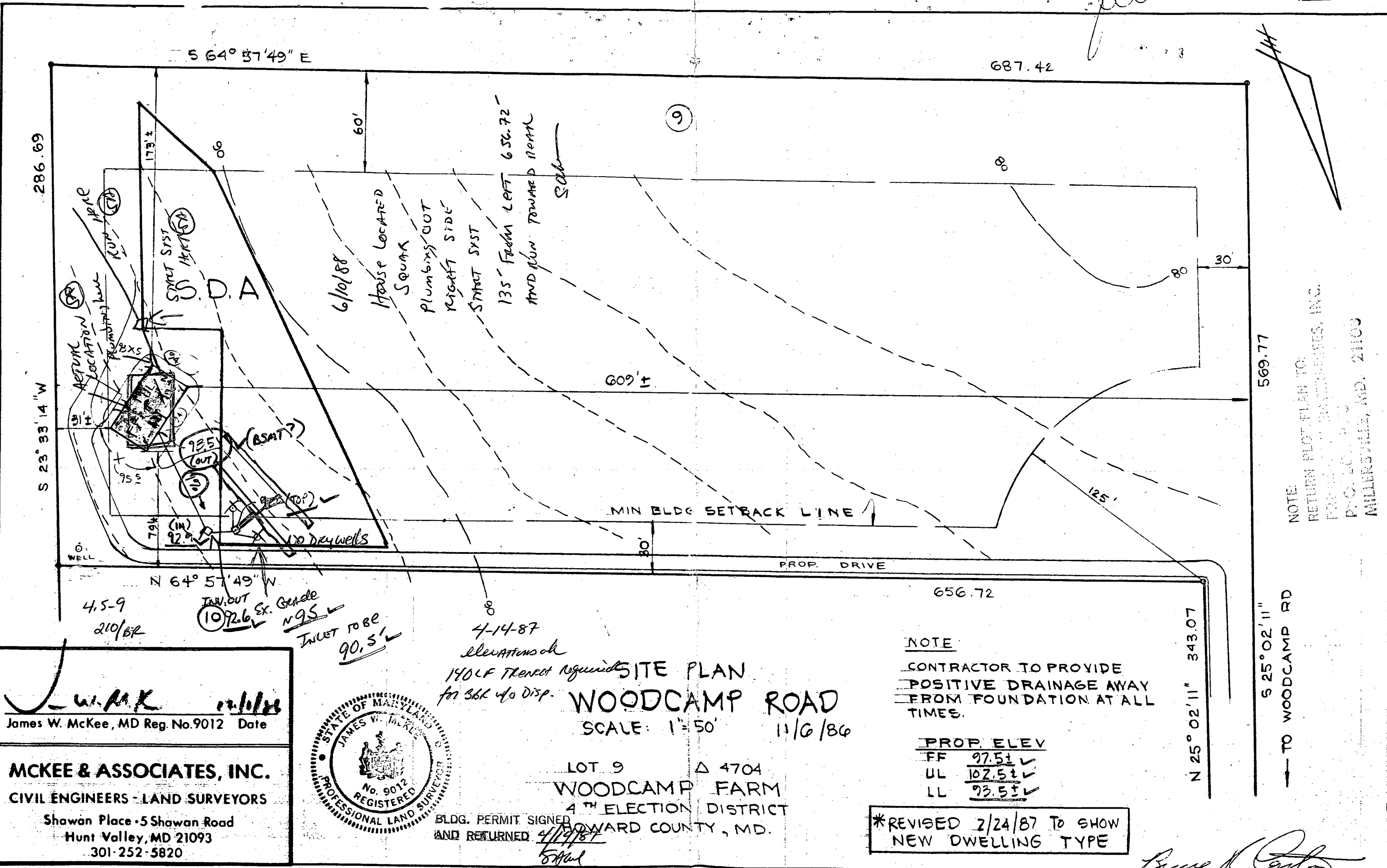
TESTED BY

BH

ALSO PRESENT

DEAN

*file* B. Carter - Rev

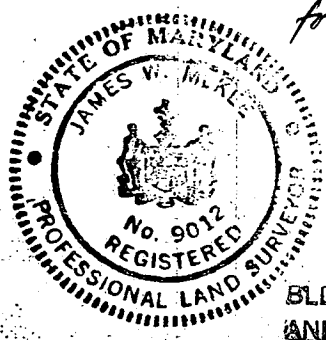


NOTE:  
RETURN PLOT PLAN TO:  
PROFESSIONAL ENGINEERS, INC.  
P.O. BOX 21109  
MILLERSVILLE, MD. 21109

TO WOODCAMP RD  
S 25° 02' 11"

**W.M.K.**  
James W. McKee, MD Reg. No. 9012 Date

**MCKEE & ASSOCIATES, INC.**  
CIVIL ENGINEERS - LAND SURVEYORS  
Shawan Place • 5 Shawan Road  
Hunt Valley, MD 21093  
301-252-5820



140 LF Transit Required  
for 36k w/o Disp.

**SITE PLAN**  
**WOODCAMP ROAD**  
SCALE: 1" = 50' 11/6/86

LOT 9 Δ 4704  
WOODCAMP FARM  
4<sup>TH</sup> ELECTION DISTRICT  
HOWARD COUNTY, MD.

BLDG. PERMIT SIGNED  
AND RETURNED 4/19/87  
5/8/87  
BPH 11144

NOTE  
CONTRACTOR TO PROVIDE  
POSITIVE DRAINAGE AWAY  
FROM FOUNDATION AT ALL  
TIMES.

PROP. ELEV	
FF	97.5 ± ✓
UL	102.5 ± ✓
LL	93.5 ± ✓

\*REVISED 2/24/87 TO SHOW  
NEW DWELLING TYPE

*B. Carter*

B 1 6789

SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

OEP PERMIT NUMBER

MD-91-1786

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

please print or type

fill in this form completely

Date Received

8 13

OWNER INFORMATION

15 Last Name: CARTER, 16 First Name: RUCHE

36 Street or RFD: 9711 MCKTROMANNY RD

57 Town: ELLENDALE, 70 State: MD, 76 Zip: 21043

B 3

LOCATION OF WELL

8 COUNTY: HARRARD

23 SUBDIVISION: WOODCAMP FARM

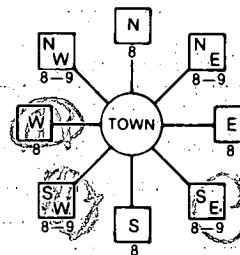
SECTION: 1, LOT: 9

52 NEAREST TOWN: WOODCAMP

MILES FROM TOWN (enter 0 if in town): 1 MI

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



11 NEAR WHAT ROAD: WoodCamp rd.

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



34 DISTANCE FROM ROAD: 800 FT, 37 ENTER FT or MI: 800

B 2

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.): 9

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY): 900

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

HARRARD COUNTY NAME, A-29817 COUNTY NO., OEP SIGNATURE, DATE ISSUED 05/25/87, CO SIGNATURE, EXP. DATE, NORTH GRID 489000, EAST GRID 0764000

APPROXIMATE DEPTH OF WELL: 150 FEET

APPROXIMATE DIAMETER OF WELL: 6" NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (or Augered), JETTED, Jetted & DRIVEN, AIR-ROTary, AIR-PERcussion, ROTARY (Hydraulic Rotary), CABLE, REVerse-ROTary, Drive-POINT

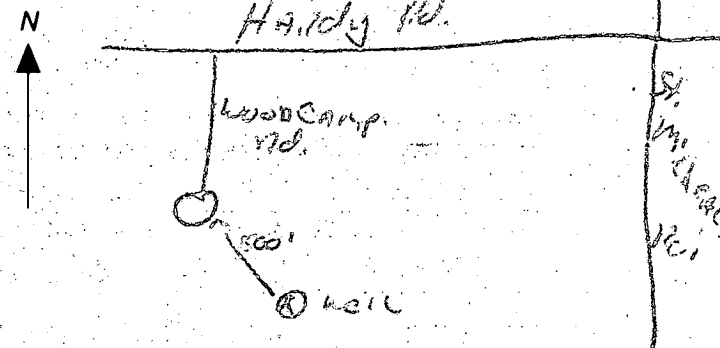
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

- SOURCES OF DRILLING WATER: 1. well, 2. No present etc, 3. ... WRITE THE BOX NUMBER FROM THE MAP HERE

Handwritten notes: 40' casing, 35' open, 9 bags cement, 12/17/86

Grid coordinates: N 700, S 548

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION



REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

- N THIS WELL WILL NOT REPLACE AN EXISTING WELL
Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
D THIS WELL WILL DEEPEMED 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: AA, PERMIT NO.: MD-91-1786

SPECIAL CONDITIONS

C1 3722

SEQUENCE NO. (OEP 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 A-29817

DATE RECEIVED

8 13

DATE WELL COMPLETED

12 17 86

DEPTH OF WELL

22 245 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL"

40-81-1785

OWNER CARTER (last name) BRUCE (first name) STREET OR RFD WOODCAMP RD TOWN MT AIRY SUBDIVISION WOODCAMP FARMS SECTION LOT 9

WELL LOG

Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

Table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Rows include Top Soil, Brown Shale, Brown Slate, Blue Slate, Brown Slate, Blue Slate.

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 7 NO. OF POUNDS 300 GALLONS OF WATER 54 DEPTH OF GROUT SEAL (to nearest foot) from 0 to 35 ft.

CASING RECORD

MAIN CASING TYPE [PL] Nominal diameter (nearest inch) 6 Total depth of main casing (nearest foot) 40 OTHER CASING (if used) diameter inch depth (feet) from to

SCREEN RECORD

screen type or open hole insert appropriate code below [HO] HOLE [BR] BRASS [ST] STEEL [PL] PLASTIC [OT] OTHER

C2

DEPTH (nearest ft.) 1 HO 38 245 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

C3

PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min. to nearest gal.) 10 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 30 WHEN PUMPING 50 TYPE OF PUMP USED (for test) [C] centrifugal [R] rotary [O] other (describe below) [J] jet [S] submersible

PUMP INSTALLED

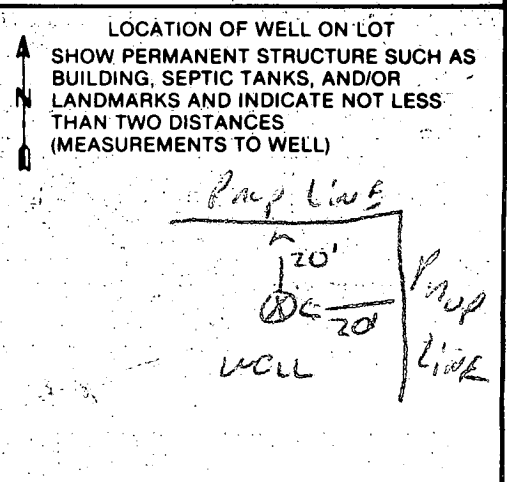
DRILLER WILL INSTALL PUMP YES [NO] IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE TYPE OF PUMP INSTALLED [ ] IN BOX - SEE ABOVE: CAPACITY: GALLONS PER MINUTE (to nearest gallon) PUMP HORSE POWER PUMP COLUMN LENGTH (nearest ft.) CASING HEIGHT (circle appropriate box and enter casing height) [+ above ] [- below ] LAND SURFACE (nearest foot) [2]

CIRCLE APPROPRIATE LETTER 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. 273 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

GRAVEL PACK from to 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 TELESCOPE CASING LOG INDICATOR OTHER DATA





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

6/21/88  
 OK'd in front  
 sticker attached  
 (R)

New Installation X  
 Replacement \_\_\_\_\_

Receipt # 42179  
 Date 6/17/88

Name of Installer T.A. Smith & Co. Inc.

Telephone 796-7532

License number 5581

Certified Well Pump Installer \_\_\_\_\_ Well Driller \_\_\_\_\_ Registered Plumber ✓

Name of Property Owner Bruce Carter

Telephone 465-2150

Subdivision Wood camp Farm Estate Lot #

Well tag # 40-81-1785

17559

Site Address #9 17559 Wood camp Farm Rd  
Mt. Airy, MD 21771

- Pump NOT seen installed
- Type
    - Deep well jet \_\_\_\_\_
    - Shallow well jet \_\_\_\_\_
    - Submersible \_\_\_\_\_
  - Make Goulds
  - Model # 10EJ07422
  - Capacity 16 GPM
  - Pump exceeds well capacity Yes ✓ No \_\_\_\_\_
  - If Yes, is low pressure cutoff switch installed? Yes ✓ No \_\_\_\_\_
  - What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors ✓ Cable guards ✓ Other \_\_\_\_\_

- Motor
- Horsepower \_\_\_\_\_
  - RPM 3450
  - Voltage \_\_\_\_\_
    - 110 \_\_\_\_\_
    - 220 X

- Pitless Adapter
- Make MARTINSON
  - Model # BP10K
  - Depth 42"  
42-44" in OK  
plastic casing  
(no ground)

- Tank WELL XTRE
- Capacity 20
  - Pressure relief valve? 75 PSI

- Piping
- Type Goulden Jet NT160
  - Size 1"
  - NSF and/or BOCA Code approved NFS
  - Depth of supply line 42"

- Well data
- Depth 245 ft.
  - Yield 10 GPM
  - Static water level 35 ft.
  - Will water supply be disinfected by installer? yes

OK

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: J. Allen Smith

Date: 6/16/88

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

# HOWARD COUNTY HEALTH DEPARTMENT

JOYCE M. BOYD, M.D., M.P.H.  
COUNTY HEALTH OFFICER



Bureau of Environmental Health  
3525 Ellicott Mills Drive  
Ellicott City, Maryland 21043

Director - 461-9956  
Water & Sewerage, Permits - 461-9933  
Community Environmental Health - 461-9944  
Technical Services - 461-9955

March 27, 1989

Mr. Bruce Carter  
17559 Woodcamp Road  
Mt. Airy, Maryland 21771

RE: Woodcamp Farms, Lot 9  
17559 Woodcamp Road  
Well Permit #HO-81-1785

Dear Mr. Carter:

This is to advise you that the septic system was installed, inspected and approved on June 13, 1988.

The water sample recently submitted for testing was free of coliform and fecal coliform bacteria at the time of sampling and is bacteriologically safe for drinking.

## FINAL CERTIFICATE OF POTABILITY

This certifies that all sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under permit(s) HO-81-1785.

Date of Final Sampling  
March 13, 1989

Date of Acceptance  
March 23, 1989

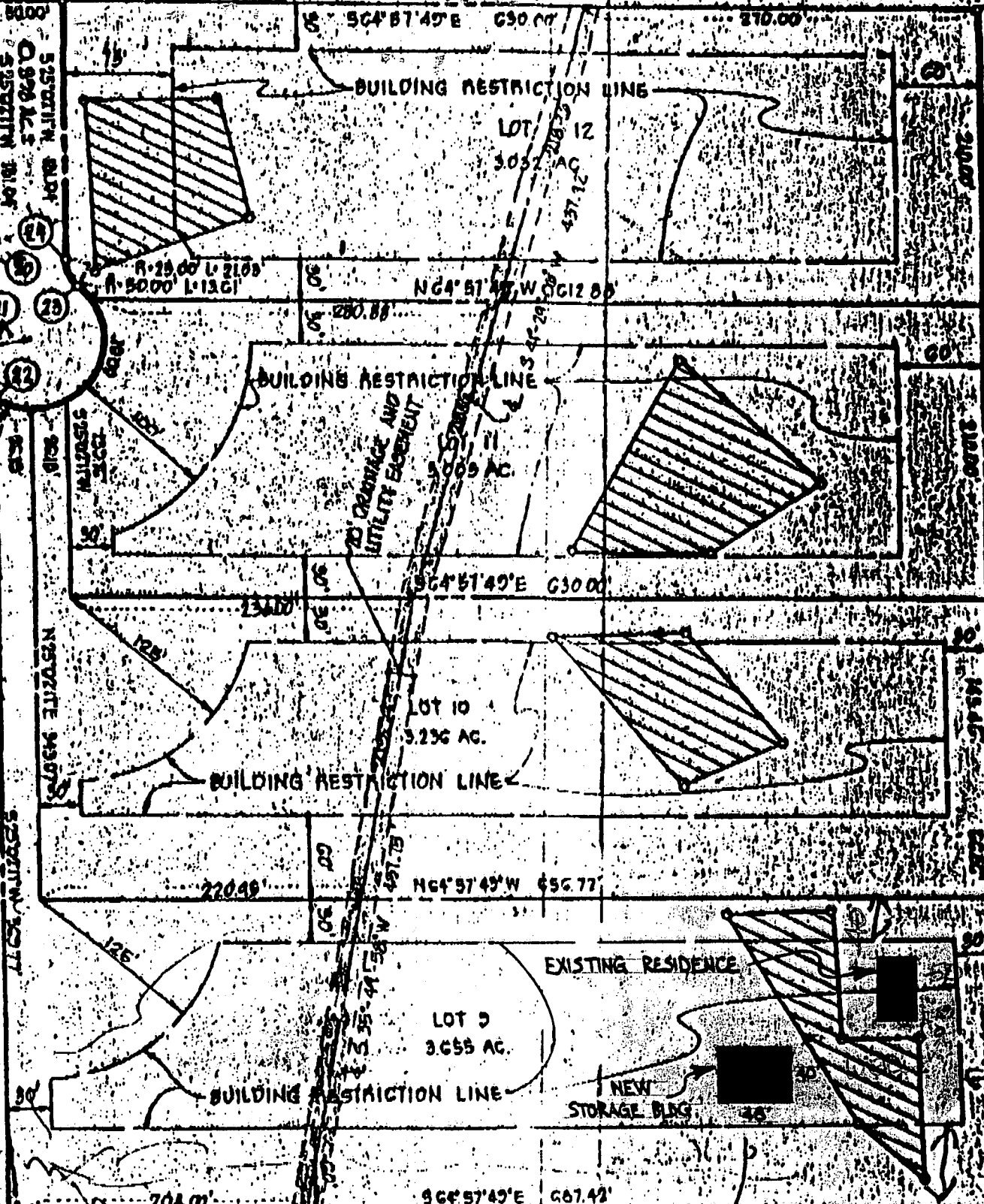
A handwritten signature in cursive script that reads "Charles B. Streaker".

Charles B. Streaker, Sanitarian  
Water and Sewerage Program

Water Sample Dates: 8/25/88  
3/13/89

CBS:hs

MATCH LINE - SEE SHEET 1 OF 3



PLOT PLAN 1" = 100'

11/24/92  
 PLANS OK  
 BP46256  
 B. Hodges  
 BRUCE R. CARTER  
 17559 WOODCAMP RD.  
 MT. AIRY, MD 21771

LOT #9  
 RECORDED 10/28/80  
 PLAT 4704  
 LIBER 1260  
 FOLIO 355