

# PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 3rd

DATE 1/5/79

**INDEXED**

Arnold Septic Tank Service

IS PERMITTED TO INSTALL ALTER X

ADDRESS Woodbine, Maryland 21797

PHONE 795-1285

SUBDIVISION Evergreen Valley Estates ROAD 11913 Triadelphia Road LOT 22

PROPERTY OWNER Mr. Bentz

ADDRESS 11913 Triadelphia Road, Ellicott City, Maryland 21043

SPECIFICATIONS 3 bedrooms

SEPTIC TANK CAPACITY 1000 GALLONS

DRAIN FIELD \_\_\_\_\_ DEPTH \_\_\_\_\_ FEET, BOTTOM AREA \_\_\_\_\_ SQ. FT.

DEEP TRENCH \_\_\_\_\_ DEPTH \_\_\_\_\_ FEET, BOTTOM AREA \_\_\_\_\_ SQ. FT.

SEEPAGE PITS \_\_\_\_\_ ABSORBENT SIDE-WALL AREA \_\_\_\_\_ SQ. FT.

INLET PIPE \_\_\_\_\_ FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH \_\_\_\_\_ FT. BELOW ORIGINAL GRADE

EFFECTIVE DEPTH AT \_\_\_\_\_ FT. BELOW ORIGINAL GRADE.

LOCATE DISPOSAL AREA \_\_\_\_\_ FT. FROM \_\_\_\_\_ LOT LINE AND \_\_\_\_\_ FT. FROM \_\_\_\_\_ LOT LINE AS SEEN WHEN  
FACING LOT FROM

LEACHING BED - ~~X~~ 40 feet by 15 feet; 5 foot deep shallow side, with 3 ft. of  
stone.

PLANS APPROVED BY Donald W. Monaghan

DATE 1/5/79

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 PLACING GRAVEL IN TRENCH.

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER.

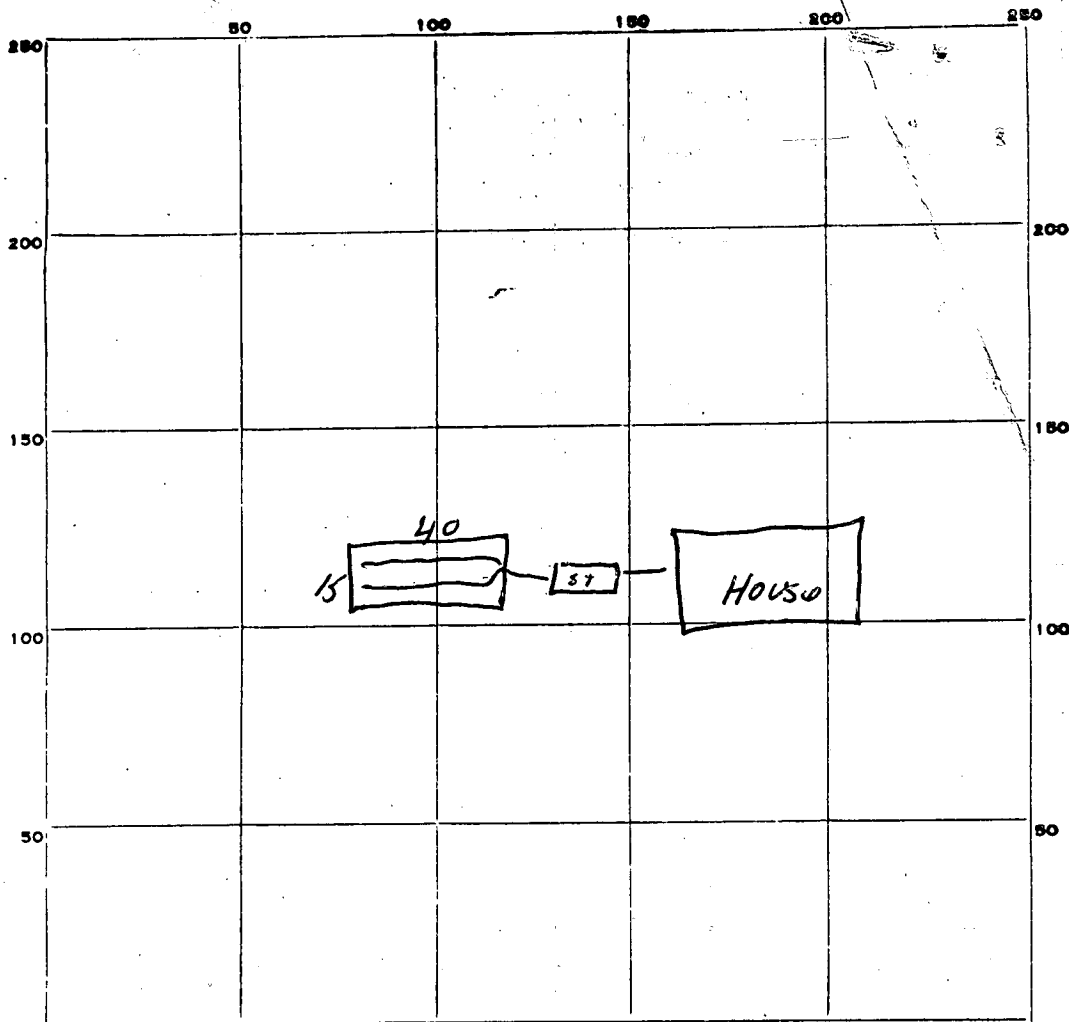
NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

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 ACCEPTED.

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

P 29382



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

*Triadelphia Rd*

PERMIT CARD 012

SEPTIC TANK, LEVEL OK

CLEANOUTS 012

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

*L Bed*  
FILE FIELD, DEPTH 5 ft Shallow *L Bed* TRENCH WIDTH 15 FT.

GRAVEL DEPTH 36 IN. *L Bed* TOTAL LENGTH 40 FT.

NUMBER OF TRENCHES \_\_\_\_\_ TOTAL BOTTOM AREA 60 sq ft

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

ABSORBENT AREA \_\_\_\_\_ SQ. FT.

*AM*  
REMARKS 1-5-79 OK to put gravel in bed.

DATE SYSTEM APPROVED 1/5/79

INSPECTOR W. Monag

12/5/72

230

# PERMIT

P 17747

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH *original A# 63100*

HOWARD COUNTY

## INDEXED

ELLICOTT CITY

DISTRICT 3

DATE 12/4/72

Arnold Septic Tank Cleaning Service IS PERMITTED TO INSTALL ALTER X

ADDRESS Woodbine, Maryland PHONE 795-1285

A SEWAGE DISPOSAL-SYSTEM LOCATED AT

SUBDIVISION Evergreen Valley Estates ROAD 11913 Triadelphia Rd. LOT 22

PROPERTY OWNER William B. Carter 286-2053

ADDRESS

SPECIFICATIONS

DRAIN FIELD DEPTH FEET, BOTTOM AREA SQ. FT.

SEEPAGE PITS ABSORBENT SIDE-WALL AREA SQ. FT.

SEPTIC TANK CAPACITY GALLONS

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 22% & TANK CAPACITY 50%.

OTHER REPAIR - Call for inspection when ground is excavated so Sanitarian can

recommend repair system.

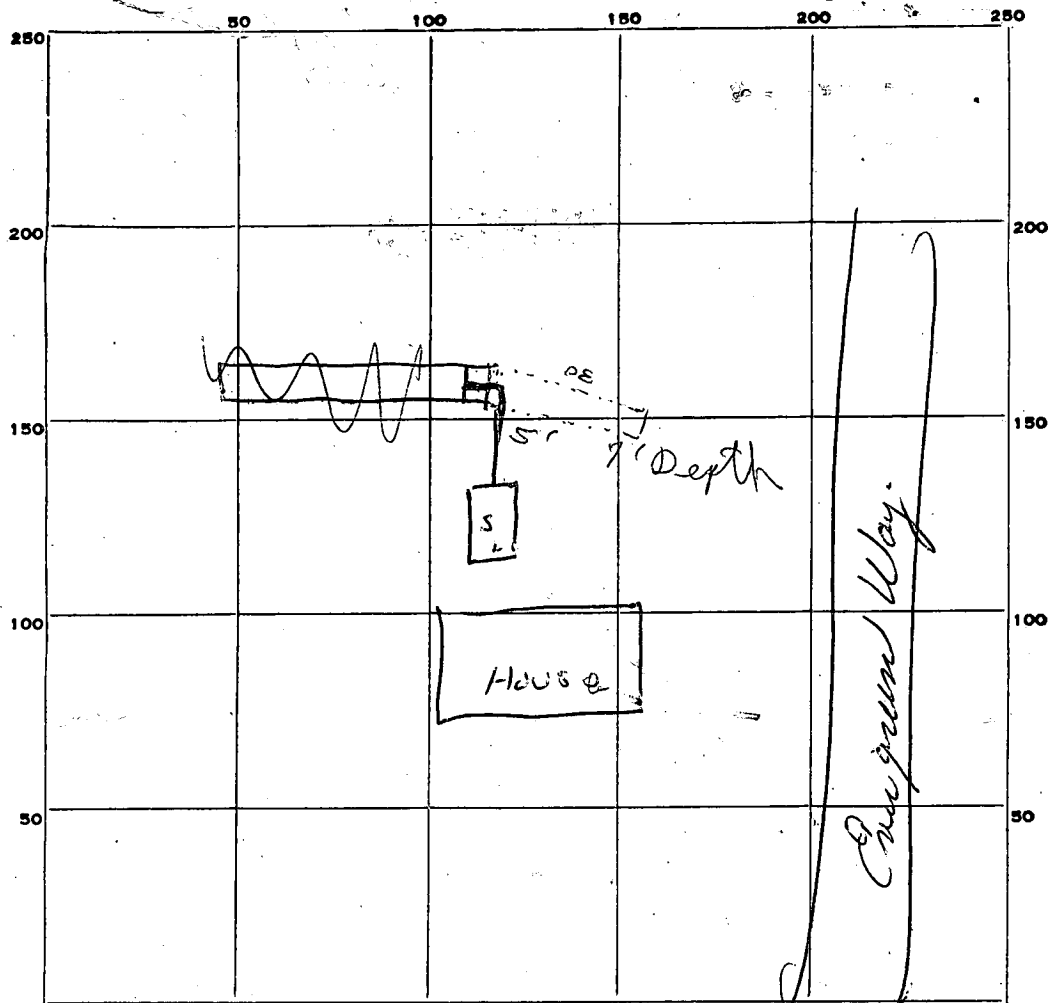
*100ft of pipe 4ft deep - 3 ft wide  
with 2ft of gravel under pipe - cut for  
spacing of trench before gravel is installed*

PLANS APPROVED BY Palmer F. Wine DATE 12/4/72

FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

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

A 17747



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

Tridelphia DE

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

SEPTIC TANK, LEVEL \_\_\_\_\_

CLEANOUTS \_\_\_\_\_

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

TILE FIELD, DEPTH \_\_\_\_\_ FT. TRENCH WIDTH \_\_\_\_\_ FT.

GRAVEL DEPTH \_\_\_\_\_ IN. TOTAL LENGTH \_\_\_\_\_ FT.

NUMBER OF TRENCHES \_\_\_\_\_ TOTAL BOTTOM AREA \_\_\_\_\_

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

ABSORBENT AREA \_\_\_\_\_ SQ. FT.

REMARKS 12/8/72 4:15 Office Fred stated to check trench  
as outlined. 30' long 6' at Septic Tank. to 7' away from  
it. (Raining, <sup>during</sup> after check out go home)  
① Inspection Trench 30' - 5 to 7' deep G.S.

DATE SYSTEM APPROVED 12-12-72

INSPECTOR

St. Mary

1972 repair P. # 17747  
P 05584  
A 03100

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 3

DATE 8-7-62

INDEXED

Excavating Contractors

IS PERMITTED TO INSTALL ☒ ALTER ☐

ADDRESS

PHONE

A SEWAGE DISPOSAL SYSTEM LOCATED AT

11913 Mia. Rd.

SUBDIVISION Evergreen Valley ROAD Triadelphia and Evergreen Rd. 22

PROPERTY OWNER Leonard Leonardi

ADDRESS RFD 2, Ellicott City

SPECIFICATIONS

DRAIN FIELD DEPTH FEET, BOTTOM AREA SQ. FT.

SEEPAGE PITS ABSORBENT SIDE-WALL AREA SQ. FT.

SEPTIC TANK CAPACITY 750 GALLONS

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 22% & TANK CAPACITY 50%.

OTHER Dry well - 336 sq. ft. sidewall area below inlet located about 100 ft. to 130 ft. from the front lot line and about 90 ft. to 115 ft. from the barbed wire fence or Tile Field - 300 sq. ft. bottom area located about 100 ft. to 165 ft. from the front lot line and about 30 ft. to 100 ft. from the barbed wire fence.

PLANS APPROVED BY Raymond Hodges DATE 10/26/60

FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

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

A 03100



*Repair Perce*  
*11/16/78*  
*cancelled*

# 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 \_\_\_\_\_  
P \_\_\_\_\_

DISTRICT 3rd

DATE 11/15/78

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 Mr. Bentz

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

PROPERTY LOCATION:

SUBDIVISION Evergreen Valley Estates LOT NO. 22

ROAD AND DESCRIPTION 11913 Triadelphia Road - 1st house on left at entrance to Evergreen Valley Estates; Evergreen Way.

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.

SIGNATURE OF APPLICANT /s/ Bud Arnold

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

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

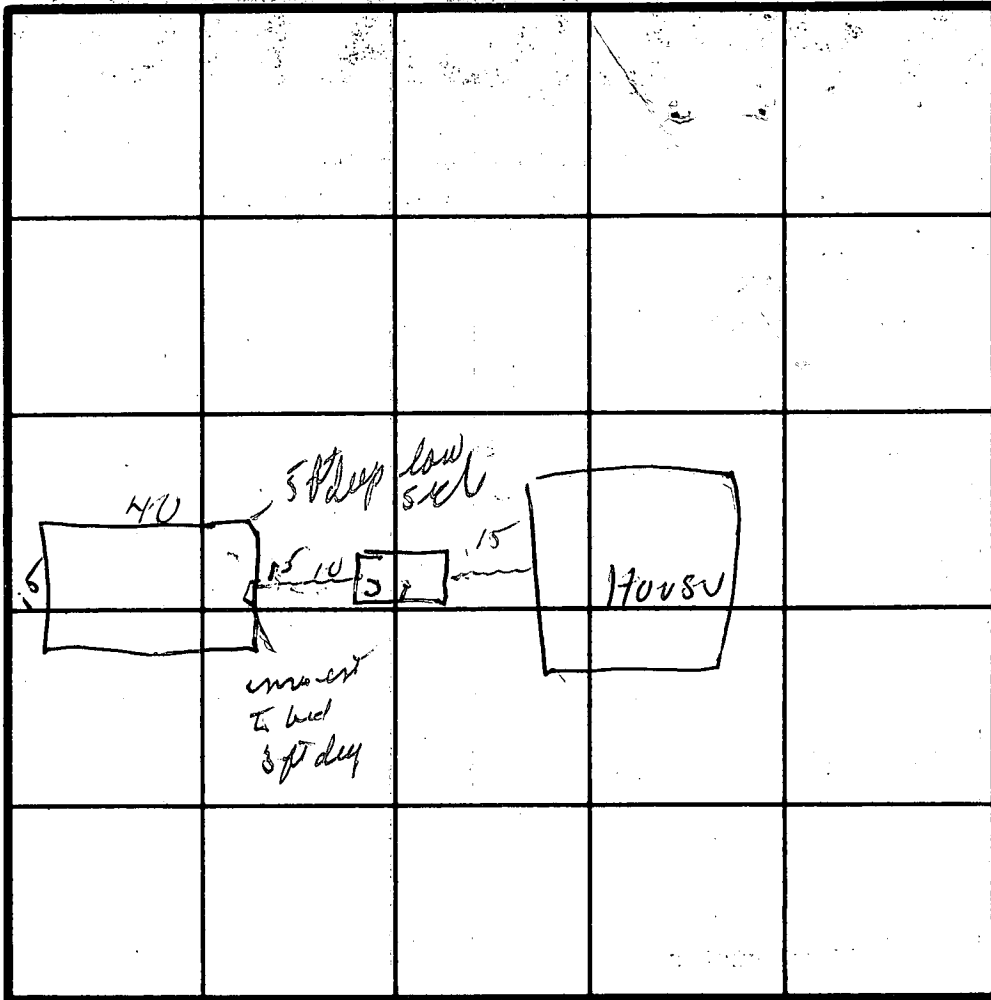
HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING \_\_\_\_\_

## THIS IS NOT A PERMIT

SOIL PROFILE

0



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	

REMARKS \_\_\_\_\_

TYPE OF SOIL \_\_\_\_\_

TESTED BY \_\_\_\_\_ ALSO PRESENT \_\_\_\_\_



# APPLICATION

A 03100

P 0316 65584

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY 750 Gallon Tank

ELLICOTT CITY

Dry Well - 336 sq ft sidewall area below located about 100 ft to 130 ft from the front lot line & about 90 ft to 115 ft from the barbed wire fence

DISTRICT 3

DATE 10/24/60

Tile Field 300 sq ft bottom area located about 100 ft to 115 ft from the front lot line and about 30 ft to 100 ft from the barbed wire fence

TO: THE COUNTY HEALTH OFFICER  
ELLICOTT CITY, MARYLAND

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

PROPERTY OWNER Leonard Leonardi

ADDRESS RFD 2, Ellicott City

PHONE Atlas 6-3267

PROPERTY LOCATION: 11913 Ind. Rd.

original Rock  
1972 2nd Wm. Carter  
Carl Benz

zip 21043

SUBDIVISION Evergreen Valley

LOT NO. 22

ROAD AND DESCRIPTION Triadelphia and Evergreen Rd.

OCCUPANT PHONE

PERSON TO CONSTRUCT SYSTEM

ADDRESS PHONE

SIZE OF LOT 1/2 acre 46000 sq ft TYPE BLDG 3 NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE

SIGNATURE OF APPLICANT Leonard Leonardi

APPROVED BY Raymond Hodges

FOR Tile Field or Dry Well

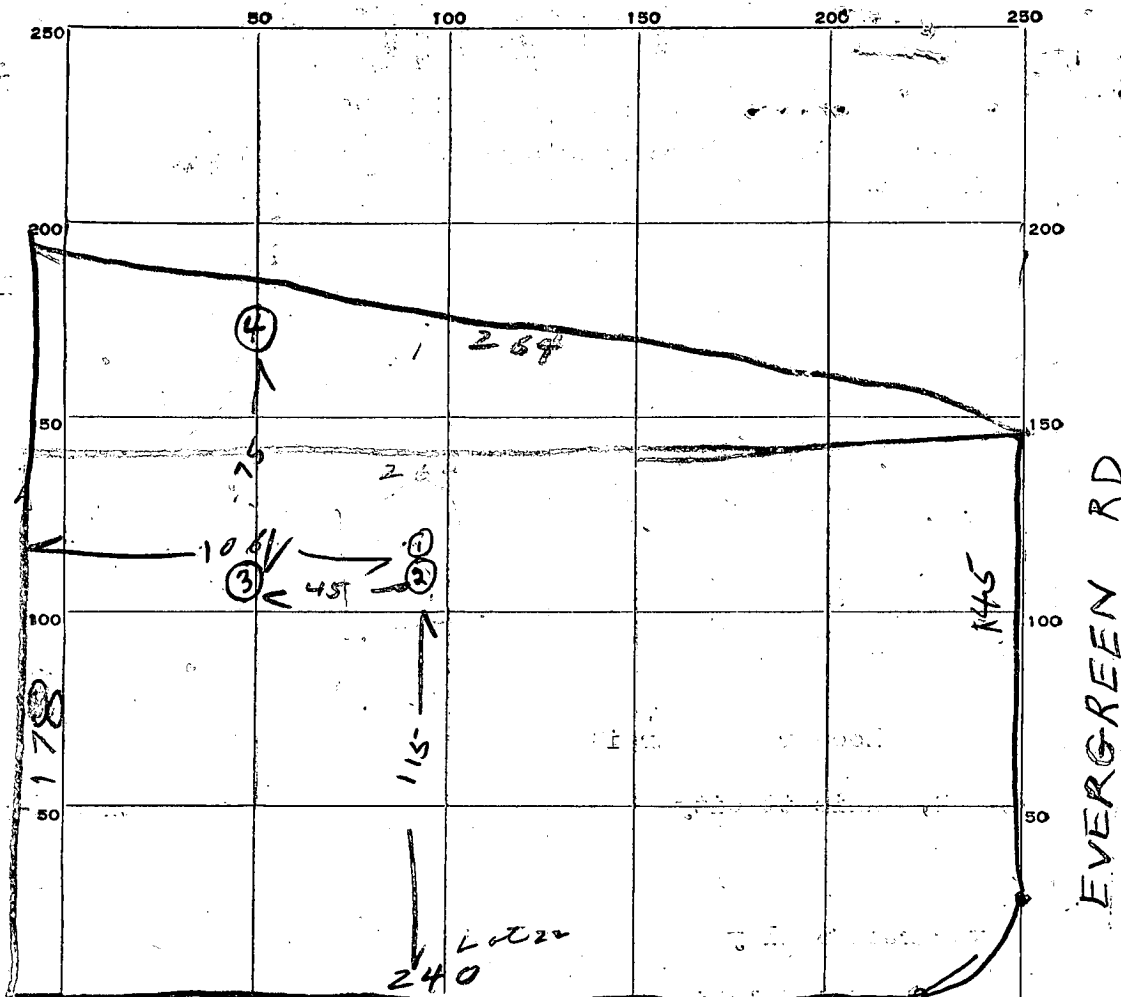
DATE 10/26/60

REJECTED BY FOR (KIND OF SYSTEM) DATE

HOLD PENDING FURTHER TESTS DATE

REASONS FOR REJECTION OR HOLDING

# THIS IS NOT A PERMIT



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

TRIDELPHIA RD.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
10/26/60	1	10	1256	105	105	122	1 1/2 min
" "	2	3	1257	1259	1259	101	2 min
" "	3	3	116	122	1/2 inch		
" "	4	4	120	121	121	124	3 min

SOIL AUGER FINDING

TESTED BY

Raymond Hodges

REMARKS

ALSO PRESENT

Richard J. Jernicki LOT NO. 22

Triadelphia Road

Evergreen Valley Way

Well site area on

House

SLOPE

40-13-11-20

<b>B 1</b> 4960		SEQUENCE NO. (OEP USE ONLY)		<b>STATE OF MARYLAND</b> <b>PERMIT TO DRILL WELL</b> please print or type			OEP PERMIT NUMBER <b>H0-73-4132</b> fill in this form completely		
<div style="display: flex; justify-content: space-between;"><div style="width: 45%;">Date Received <b>3/19/82</b> <b>1:15 PM</b> OWNER INFORMATION Last Name <b>15</b> <b>3</b> <b>1</b> <b>8</b> <b>8</b> <b>2</b> Owner <b>1</b> <b>1</b> <b>9</b> <b>1</b> <b>3</b> <b>1</b> <b>1</b> <b>9</b> <b>1</b> <b>3</b> <b>1</b> <b>1</b> <b>9</b> <b>1</b> <b>3</b> <b>1</b> <b>1</b> <b>9</b> <b>1</b> <b>3</b> Street or RFD <b>1</b> <b>1</b> <b>9</b> <b>1</b> <b>3</b> <b>1</b> <b>1</b> <b>9</b> <b>1</b> <b>3</b> <b>1</b> <b>1</b> <b>9</b> <b>1</b> <b>3</b> <b>1</b> <b>1</b> <b>9</b> <b>1</b> <b>3</b> Town 57 State 76 Zip 41</div><div style="width: 55%;">LOCATION OF WELL <b>3</b> <b>1</b> <b>8</b> <b>2</b> COUNTY <b>Howard</b> SUBDIVISION <b>Evergreen Valley Est</b> SECTION <b>2</b> LOT <b>22</b> NEAREST TOWN <b>Mayfield</b> MILES FROM TOWN (enter oil in town) <b>1</b> <b>73</b> <b>76</b> <b>77</b> <b>78</b></div></div>									
<div style="display: flex; justify-content: space-between;"><div style="width: 45%;">DRILLER INFORMATION <b>1</b> <b>1</b> <b>9</b> <b>1</b> <b>3</b> <b>1</b> <b>1</b> <b>9</b> <b>1</b> <b>3</b> <b>1</b> <b>1</b> <b>9</b> <b>1</b> <b>3</b> <b>1</b> <b>1</b> <b>9</b> <b>1</b> <b>3</b> Driller's Name <b>Theresa Easterday</b> Firm Name <b>L.F. Easterday INC.</b> Address <b>9265 Brown Church Rd. Mt. Airy</b> Signature <b>Theresa F. Easterday</b> Date <b>3/16/82</b> 77 License No. <b>80</b></div><div style="width: 55%;">DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH <b>32</b> EAST <b>30</b> WEST <b>34</b> SOUTH <b>37</b> DISTANCE FROM ROAD (CIRCLE APPROPRIATE BOX) <b>50</b> <b>38</b> <b>39</b></div></div>									
<div style="display: flex; justify-content: space-between;"><div style="width: 45%;">WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) <b>5</b> AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <b>500</b> <b>14</b> <b>20</b></div><div style="width: 55%;">SHOW MAJOR FEATURES OF BOX &amp; LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. <b>42' casing</b> 2. <b>above ggs</b> 3. <b>38' open</b> 9. <b>bag cement</b> WRITE THE BOX NUMBER FROM THE MAP HERE <b>820 6</b> <b>530 0</b> <b>3/19/82</b> <b>JS</b></div></div>									
<div style="display: flex; justify-content: space-between;"><div style="width: 45%;">USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="radio"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="radio"/> FARMING (LIVESTOCK WATERING &amp; AGRICULTURAL IRRIGATION) <input type="radio"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="radio"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input type="radio"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)</div><div style="width: 55%;">DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION <b>H0-73-4132</b> </div></div>									
<div style="display: flex; justify-content: space-between;"><div style="width: 45%;">APPROXIMATE DEPTH OF WELL <b>150</b> FEET <b>24</b> <b>28</b> APPROXIMATE DIAMETER OF WELL <b>6</b> INCH NEAREST INCH</div><div style="width: 55%;">METHOD OF DRILLING (circle one) <b>BORED (OR AUGERED)</b> <b>JETTED</b> <b>JETTED &amp; DRIVEN</b> <b>30</b> <b>AIR ROTARY</b> <b>AIR PERCUSSION</b> <b>ROTARY (HYDRAULIC ROTARY)</b> <b>37</b> <b>CABLE</b> <b>REVERSE ROTARY</b> <b>DRIVE POINT</b> other _____</div></div>									
<div style="display: flex; justify-content: space-between;"><div style="width: 45%;">REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="radio"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <input type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY <input type="radio"/> THIS WELL WILL DEEPEM AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) <b>41</b></div><div style="width: 55%;">NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL <b>HOWARD</b> <b>P29382</b> COUNTY NAME COUNTY NO. OEP SIGNATURE <b>Frank Skinner</b> STATE HEALTH CIRCLE BOX <b>41</b> DATE ISSUED <b>03/16/82</b> CO SIGNATURE NORTH GRID <b>530</b> EAST GRID <b>0820</b> EXPIRES <b>09/16/82</b></div></div>									
<div style="display: flex; justify-content: space-between;"><div style="width: 45%;">Not to be filled in by driller (OEP USE ONLY) APPROX. PERMIT NUMBER <b>GAP</b> <b>54</b> <b>63</b> FORCE <b>FS</b> WRITE INITIALS IN BOX <b>FS</b> PERMIT NO. <b>H0-73-4132</b> <b>64</b> <b>68</b> <b>70</b> <b>71</b> <b>72</b> <b>73</b> <b>74</b> <b>75</b> <b>76</b> <b>77</b> <b>78</b> <b>79</b></div><div style="width: 55%;">SPECIAL CONDITIONS 8-63 <b>1</b> <b>2</b> <b>3</b> <b>6</b></div></div>									

C1	3131	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.
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)				COUNTY NUMBER P 29382
Date Received (OEP use only)	DATE WELL COMPLETED 3/19/82	Depth of Well 360 (TO NEAREST FOOT)	PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-73-4132	

OWNER last name Benz first name Carl	STREET OR RFD 11913 Triadelphia Road	TOWN Mayfield
SUBDIVISION Evergreen Valley Ests	SECTION 2	LOT 22

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
TOP SOIL	0 2	
SHALE	2 10	
BROWN SLATE	10 28	✓
MICA	28 340	
FLINT	240 245	✓
MICA	245 315	
FLINT	315 325	✓
MICA	325 360	

GROUTING RECORD	
WELL HAS BEEN GROUTED (Circle Appropriate Box)	YES <input checked="" type="radio"/> NO <input type="radio"/>
TYPE OF GROUTING MATERIAL	
CEMENT <input checked="" type="radio"/> BENTONITE CLAY <input type="radio"/>	BC
NO. OF BAGS 9	NO. OF POUNDS 160
GALLONS OF WATER 45	
DEPTH OF GROUT SEAL (to nearest foot)	
from 48 TOP	ft. to 38 BOTTOM 58 ft.
(enter 0 if from surface)	

CASING RECORD		
casing types insert appropriate code below	ST	CO
	STEEL	CONCRETE
	PL	OT
	PLASTIC	OTHER
MAIN CASING TYPE	Normal diameter top/main casing (nearest inch)	Total depth of main casing (nearest foot)
ST	6	42

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

SCREEN RECORD			
screen type or open hole insert appropriate code below	ST	BR	HO
	STEEL	BRASS BRONZE	OPEN HOLE
	PL	OT	
	PLASTIC	OTHER	

EACH SCREEN	DEPTH (nearest ft.)	
	HO	40 360

SLOT SIZE	
DIAMETER OF SCREEN (NEAREST INCH)	
from to	

GRAVEL PACK	
IF WELL DRILLED WAS FLOWING WELL CIRCLE BOX	

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)	
T	(E.R.O.S.)
70	72
TELESCOPE CASING	LOG INDICATOR
W Q	
OTHER DATA	

C 3	Seq. no.	
PUMPING TEST		
HOURS PUMPED (nearest hour)	3	
PUMPING RATE (gal. per min. to nearest gal.)	40	
METHOD USED TO MEASURE PUMPING RATE	BUCKET	
WATER LEVEL (distance from land surface)		
BEFORE PUMPING	45	
WHEN PUMPING	360	
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 (CIRCLE APPROPRIATE BOX)	YES <input checked="" type="radio"/> NO <input type="radio"/>
IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE	
TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: (A, C, J, P, R, S, T, O))	
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	LAND SURFACE
below	2 (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)	
WELL 75'	
K - - - - -	
50'	
TRI'DELPHIA RD.	
EVERGREENWAY	

CIRCLE APPROPRIATE BOX	
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. 40	
DRILLERS SIGNATURE	
(MUST MATCH SIGNATURE ON APPLICATION)	
SITE SUPERVISOR (sign of driller or journeyman responsible for sitework if different from permittee)	