

B 1 09342 <small>1 2 3 6</small>	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type 538463	STATE PERMIT NUMBER HO -95 -2412 <small>70 fill in this form completely 79</small>
Date Received (APA) 09/11/12 <small>8 MM DD YY 13</small> OWNER INFORMATION 15 Last Name Owner First Name 34 Stewart Kret Homes 36 Street or RFD 55 7090 Samuel Morse Dr 57 Town 70 State 72 Zip 76 Columbia, Md. 21046		B 3 LOCATION OF WELL 8 COUNTY 21 Howard 23 SUBDIVISION 42 Owings Property SECTION 44 46 LOT 48 50 17 52 NEAREST TOWN 71 Highland	
DRILLER INFORMATION Driller's Name 76 License No. 81 Allen Compton M S D 009 Firm Name Fogles Well Drilling, LLC Address PO Box 202 Woodbine, Md 21797 Signature Date Allen Compton 6-29-12		B 4 SOURCES OF DRILLING WATER 1. 2. 3. ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH <input checked="" type="checkbox"/> WEST <input type="checkbox"/> EAST <input type="checkbox"/> SOUTH <input type="checkbox"/> 34 250 37 DISTANCE FROM ROAD FT ENTER FT OR MI 38 39 TAX MAP: 21 BLK: 12 PARCEL	
B 2 WELL INFORMATION 1 2 APPROX. PUMPING RATE 8 12 (GAL. PER MIN.) 5 AVERAGE DAILY QUANTITY NEEDED 14 20 (GAL. PER DAY) 500		USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, DEWATERING <input type="checkbox"/> PUBLIC WATER SUPPLY WELL <input type="checkbox"/> TEST, OBSERVATION, MONITORING <input type="checkbox"/> OPEN LOOP GEOTHERMAL <input type="checkbox"/> CLOSED LOOP GEOTHERMAL	
APPROXIMATE DEPTH OF WELL 24 28 300 FEET APPROXIMATE DIAMETER OF WELL NEAREST INCH 6		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL COUNTY NAME COUNTY NO. Howard A515214 13 STATE SIGNATURE INSERT S 41 DATE ISSUED 43 MM DD YY 48 10/09/2012 R. R. 10/9/13 CO SIGNATURE EXP. DATE	
METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jetted & DRIVEN <input checked="" type="checkbox"/> AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary) <input type="checkbox"/> CABLE REVERSE-ROTARY Drive-POINT other		PROPOSED LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURES SUCH AS BUILDINGS, SEPTIC SYSTEM, ROADS AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCE MEASUREMENTS TO WELL 	
REPLACEMENT OR DEEPEENED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <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 <input type="checkbox"/> THIS WELL WILL DEEPEEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEENED (IF AVAILABLE) 41 52 G		Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER PERMIT No. HO -95 -2412 <small>70 71 72 73 74 75 76 77 78 79</small>	
SPECIAL CONDITIONS NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED Radium Sample required at yield test			

Well Permit No. HO - 95-2912
Location of property (road) Winding Stream way
Subdivision Dwight P.D. Lot 17 Block Plat Sec.
Well Driller Egiles Owner S&K Homes

Depth of well 300'
Distance of measuring point (M.P.) above ground 1'
Static water level (S.W.L.) below M.P. 3

Time pump started 8:00 Pumping rate 12
Total time 15 min to reach pumping water level 80 ft. below M.P.

[illegible]

Send Report To: Bert Nixon
Howard Co. Env. Health
7178 Columbia Gateway Dr
Columbia, MD 21046

State of Maryland
DHMH - Laboratories Administration
Division of Environmental Chemistry
RADIATION LABORATORY
201 W. Preston Street, Baltimore, Maryland 21201
John M. DeBoy, Dr. P. H., Director

LABORATORY ANALYSIS REQUEST

Sample Bottle No. A: 952412BB No. B: _____ Field Blank Bottle No. 1: 17+19 No B: _____

Plant/Site Name: Owings Property-Lot 17 County: Howard

Sample Source: Winding Stream Way Location: HO-95-2412
(well no, lab sink, sample tap, etc.)

County: ☒ ☐ Plant No. ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

CHECK (one per box)

Drinking Water ☒
Landfill ☐
Stream ☐
Other ☐

Community ☐
Non-community ☐
Private ☒
Other ☐

Source (raw water) ☒
Distribution (treated) ☐
MCL ☐

Emergency ☐
Routine ☒
Recheck ☐
Special ☐

Collector: B. Baker

Telephone No.: (410) 313-2643

Date Collected: 11/19/2012

Time Collected: 11:15 a.m. _____ p.m.

Nitric Acid Preserved: Yes ☒ No ☐

Iced: Yes ☐ No ☒

Submitters Code: ☐ ☐

Federal Project: ☐

Field Data: _____
pH _____ Chlorine _____

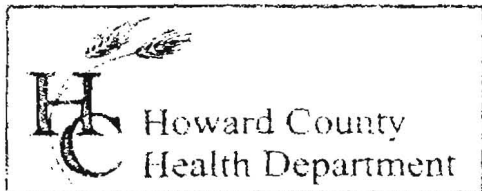
Remarks: Sample Collected During Yield Test

✓	Test	EPA Code	Laboratory No.	Results (pCi/L)	Date Analyzed	Date Reported
✓	Gross Alpha	4000				
✓	Gross Beta	4100				
	Radon-222 Bottle A	4004				
	Radon-222 Bottle B	4004				
	Field Blank #A	4004				
	Field Blank #B	4004				
	Tritium					
	Ra - 226	4020				
	Ra - 228	4030				
	Total Uranium	4006				

Date Received: ____/____/____

Supervisor: _____

•Tel. No.: (410) 767 - 5537 •Fax No: (410) 333- 5373



3525 H Ellicott Mills Drive, Ellicott City, MD 21043
(410) 313-2640 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

TO ALL INTERESTED PARTIES

When submitting a well permit application for a proposed well for new construction, please indicate one of the following:

- ☒ The well site has been staked by Jose Bolazco Escalante Engineers
(professional land surveyor or company employing professional land surveyors)
on 8-28-12 (date) and does not require a site inspection.
- ☐ Lot # 17-24
The well driller, builder or property owner will call the Health Department to schedule a time to meet in the field to verify the proposed well site location.

This sheet, along with two copies of an acceptable well site plan, must be attached to the green well permit application.

Revised 6/10/03

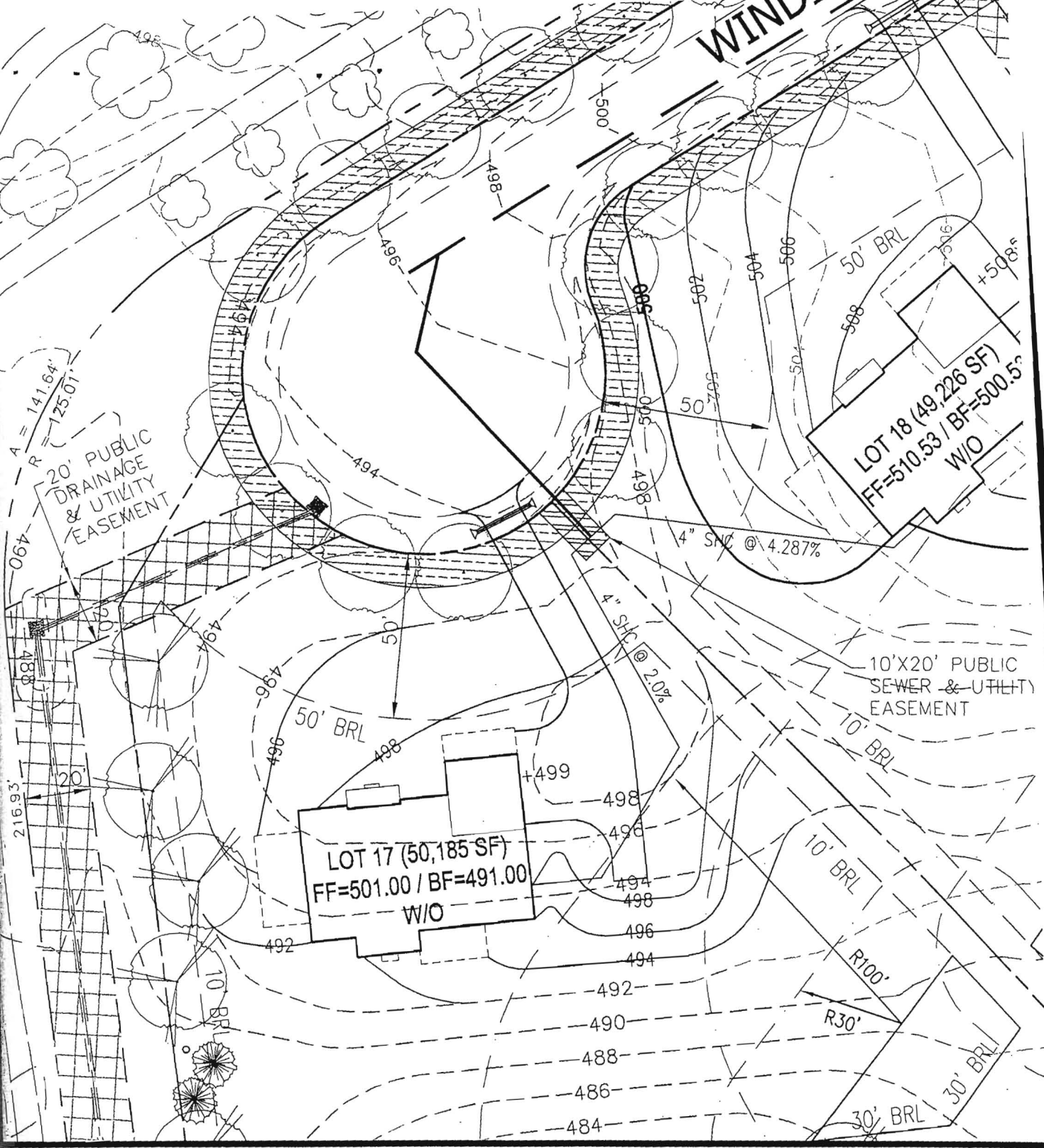
WIND

$A = 141.64'$
 $R = 125.01'$
20' PUBLIC
DRAINAGE
& UTILITY
EASEMENT

LOT 18 (49,226 SF)
FF=510.53 / BF=500.53
W/O

LOT 17 (50,185 SF)
FF=501.00 / BF=491.00
W/O

10'X20' PUBLIC
SEWER & UTILITY
EASEMENT





Bureau of Environmental Health

7178 Columbia Gateway Drive, Columbia, MD 21046-2147

Main: 410-313-2640 | Fax: 410-313-2648

TDD 410-313-2323 | Toll Free 1-866-313-6300

www.hchealth.org

Facebook: www.facebook.com/hocohealth

Maura J. Rossman, M.D., Health Officer

February 5, 2013

**Steuart Kret Homes
7090 Samuel Morse Drive
Columbia, Maryland 21046**

**RE: Owings Overlook Lot 17
Winding Stream Way
Well Tag: HO - 95 - 2412**

To Whom it May Concern:

A sample was collected during a yield test on November 19, 2012 and submitted to the Department of Health & Mental Hygiene Laboratories to assess the possible presence of **Gross Alpha** and **Gross Beta** in the future well water supply. **Gross Alpha** and **Gross Beta** measure the total alpha and beta particle activity in a water supply. These naturally occurring radioactive nuclides have been demonstrated to be present in a certain type of geologic formation known as the Baltimore Gneiss which exists in your area of development within the County.

Results from this screening revealed a **Gross Alpha** of $< 2.0 \pm 0.0$ picocuries/liter (pCi/L), while the **Gross Beta** level was $< 4.0 \pm 0.0$ pCi/L. The **Gross Alpha** result was below its **maximum contaminant level (MCL)** of 15 pCi/L, while the **Gross Beta** level was below its targeted value of 50 pCi/L (roughly equivalent to the **annual dose rate** of 4 millirems/year).

At the time of testing and with respect to these parameters, the future well water supply meets EPA regulatory standards. Additional testing **for these parameters** will not be required to secure the future Use & Occupancy. **Please note** that other standard testing parameters (bacteria, nitrate, turbidity and sand) will still be required to help secure Use & Occupancy.

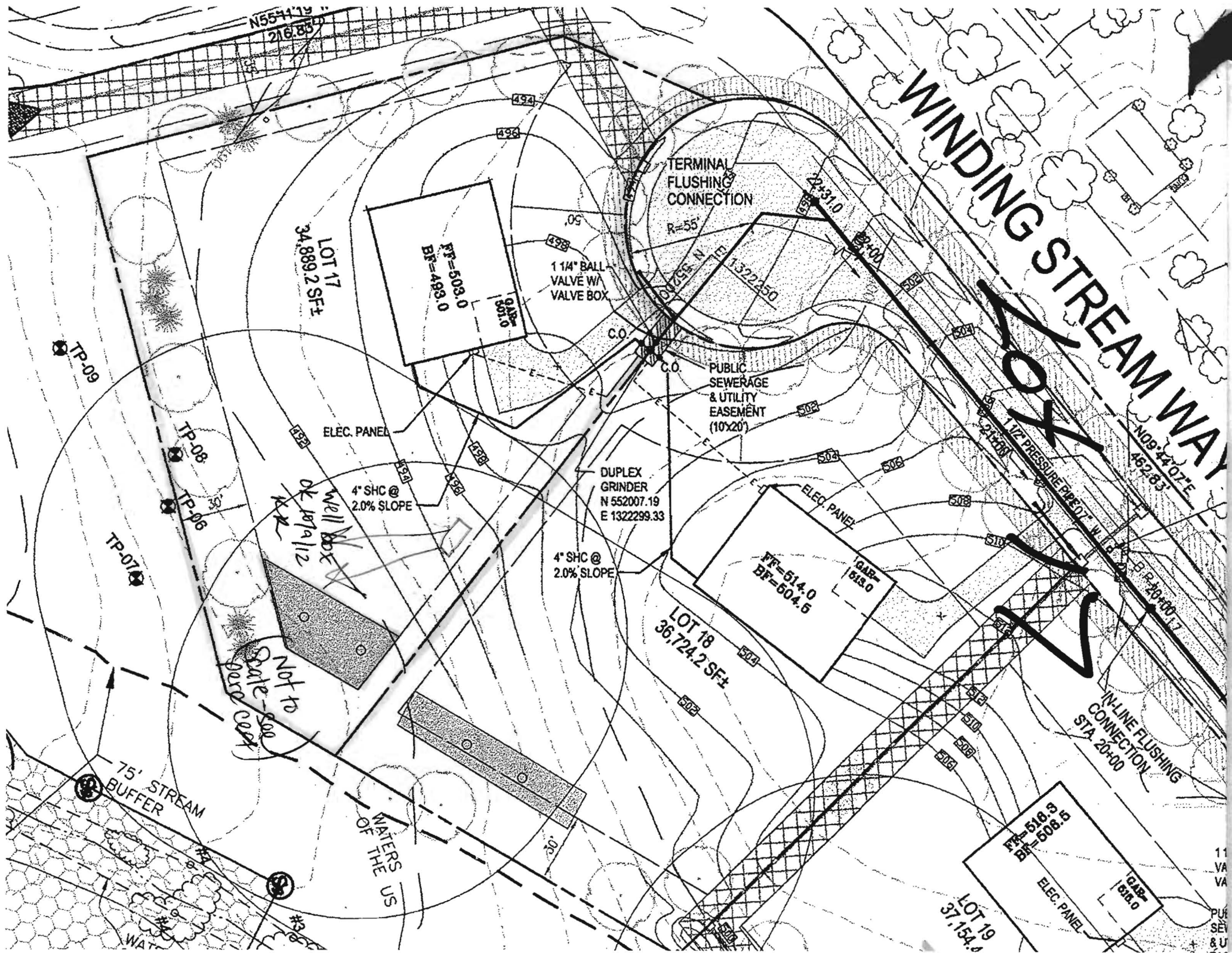
A copy of the test results is enclosed for your information. Please call this office at **410-313-1773** if you have any further questions.

Sincerely,

Bert Nixon, Director
Bureau of Environmental Health

Enclosure

cc: Barry Glotfelty, MDE Water Mgmt.
Well & Septic property file



HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
WELL & SEPTIC PROGRAM
TEL: (410)313-1771 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 LLC Telephone #: 410 795 5670
Address: PO Box 202
Woodbine, MD 21797

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

Name (Print): David C. Fogle License #: MSD226

*A licensed individual must perform the actual installation. Apprentices must be under the supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification. Unlicensed individuals may be reported to the appropriate licensing agency.

Name of Property Owner: Stewart Kret Telephone #: 410-312-5160
Subdivision: Quinn's Property Lot #: 17 Well Tag #: HO-45-2412
Site Address: 1827 Winding Stream Lane
Highland, MD 20777

Submersible Pump Data
Make: Grundfos
Model #: 155GE01180
Pump Capacity: 7 GPM
Well Yield: 6 GPM

Pitless Adapter
Make: Campbell
Model #: N/A
Depth: 36" (36" min)
NSF/WSC approved: YES

Well Cap and Electric Conduit
Two piece watertight cap: YES
Screened, vented well cap: YES
Cap secured to casing: YES
Conduit min 18" B.G.: YES
Conduit secured to well cap: YES

Depth of well encountered at time of pump installation: 300 (feet)

If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4

Torque arrestors, Cable guards, or other acceptable method used—Must circle one

Safety rope, if used, attached to brass rope adapter or other acceptable method inside of well casing N/A

Piping to house
Type: 1" black poly pipe
PSI: 160 (160 psi min)
Depth of supply line: 36" (36" min)

House Connection
PVC sleeve to undisturbed soil at wall penetration: YES
Length of sleeve (5' minimum from foundation): YES
Sleeve sealed properly: YES

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: David Fogle date: 5/13/14

For Health Department Use Only — Not to be completed by Installer

Date Insp. Requested: _____ Date Insp. Approved: 5/14/14 Inspector: BB

Inspection Data: Pitless adapter watertight & 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 not outside of well cap/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 ☒



Bureau of Environmental Health

8930 Stanford Boulevard, Columbia, MD 21045

Main: 410-313-2640 | Fax: 410-313-2648

TDD 410-313-2323 | Toll Free 1-866-313-6300

www.hchealth.org

Facebook: www.facebook.com/hocohealth

Twitter: HowardCoHealthDep

Maura J. Rossman, M.D., Health Officer

INTERIM CERTIFICATE OF POTABILITY

Expiration Date – December 19, 2014

June 19, 2014

Homeowner
6827 Winding Stream Way
Highland, MD 20777

**RE: Owings Overlook, Lot 17
6827 Winding Stream Way
Building Permit: B13003597
Well Permit: HO-95-2412**

Dear Homeowner:

This is to advise you that the septic system installation and water well construction for the above referenced property have been inspected and approved. Final approval of the septic system was granted on **6/18/2014**. Final approval of the well line connection to the dwelling was granted on **5/14/2014**. The well construction was completed on **12/6/2012**. Water samples were collected on **6/6/2014 and 6/18/2014**.

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.

Gross Alpha and Beta samples were also collected on **11/19/2012**. Results showed a Gross Alpha level of **<2.0 ± 0.0 pCi/L** and **Gross Beta** level of **<4.0 ± 0.0 pCi/L**. The Gross Alpha was below the maximum contaminant level (MCL) of 15 pCi/L and the Gross Beta was below the target level of 50pCi/L (roughly equivalent to the annual dose rate of 4 millirems per year). At the time of testing and with respect to these parameters, the well water is safe for all uses.

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 HO-95-2412. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies.

This Interim Certificate of Potability will expire **six months** from the date of issuance. Submission of a second bacteriological test indicating the water is free of coliform and fecal coliform bacteria is required prior to the expiration date, after which time a Final Certificate of Potability will be issued. **Failure to submit an additional sample and obtain a Final Certificate of Potability will result in a Notice of Violation and is punishable as a misdemeanor under the Annotated Code of Maryland, Environment Article, 9-1311, subject to a fine of up to \$500 or imprisonment not to exceed three months.**

Please contact (410) 313-1773 to schedule a final water sample appointment or contact a certified water quality laboratory to schedule a water sample. A list of laboratories certified by the state of Maryland may be found at the following website: <http://www.mde.state.md.us/assets/document/WSP-Labs-2010apr16.pdf>

Approving Authority,

A handwritten signature in black ink, appearing to read 'Jeff Williams', with a long horizontal flourish extending to the right.

Jeff Williams
Program Supervisor
Well & Septic Program

cc: Howard County Dept. of Inspections, Licenses, and Permits
Community Hygiene Program
File

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

1413 Old Taneytown Rd. Westminster, MD (410) 848-1014 (410) 876-4554 FAX (410) 848-0298

REPORT OF ANALYSIS

Laboratory ID #:	94761	Account #:	1930
Reference:	Steuart & Kret Lot 17	Company:	Fogle's Well Drilling
Location:	6827 Winding Stream Lane	Requested By:	Dave Fogle
	Highland, MD 20777	Source:	Well Water
Date/ Time Collected:	6/18/2014 1500	Site:	Pressure Tank
Date/Time Rec'd:	6/18/2014 1610	Treatment:	Prior to UV Light
Chlorine ppm:	Free: ND Total: ND	pH:	5.9
Collected By:	K.Cassell 7398KC	Well #:	HO-95-2412

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	6/19/2014 / 1020 / LLO
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	6/19/2014 / 1020 / LLO

NOTES

- 1 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 2 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 3 ND:None Detected
- 4 Sample collected by client, analyzed as received
- 5 pH and Chlorine level tested in lab

Reason for Test : Use & Occupancy

Building Permit # : B13003597

Date Reported: 6/19/2014

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

1413 Old Taneytown Rd. Westminster, MD (410) 848-1014 (410) 876-4554 FAX (410) 848-0298

REPORT OF ANALYSIS

Laboratory ID #: 94549 Account #: 1930
Reference: Steuart & Kret Lot 17 Company: Fogle's Well Drilling
Location: 6827 Winding Stream Lane Requested By: Dave Fogle
Highland, MD 20777 Source: Well Water
Date/ Time Collected: 6/6/2014 0846 Site: Kitchen Sink
Date/Time Rec'd: 6/6/2014 1130 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 5.6
Collected By: J. Fogle 1974JF Well #: HO-95-2412

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	2.0	MPN/ 100 ml	<1.0	SM18 9223	6/7/2014 / 1015 / LLO
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	6/7/2014 / 1015 / LLO
Nitrate	3.85	mg/L	10	601	6/6/2014 / 1310 / CRS
Turbidity	1.08	NTU	<10	SM18 2130B	6/6/2014 / 1225 / JKW
Sand	NS	mg/L	5	Visual/Gravimetric	6/6/2014 / 1225 / JKW

NOTES

- 1 mg/L = milligrams per liter (also, parts per million)
- 2 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 3 NS = None Seen (NS indicates less than 5 mg/L)
- 4 NTU = Nephelometric Turbidity Units
- 5 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 6 ND:None Detected
- 7 Sample collected by client, analyzed as received
- 8 pH tested in lab, chlorine level tested on site

Reason for Test : Use & Occupancy**Building Permit # :** B13003597Date Reported: 6/9/2014

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

1413 Old Taneytown Rd. Westminster, MD (410) 848-1014 (410) 876-4554 FAX (410) 848-0298

REPORT OF ANALYSIS

Laboratory ID #:	94711	Account #:	1930
Reference:	Steuart & Kret Lot 17	Company:	Fogle's Well Drilling
Location:	6827 Winding Stream Lane	Requested By:	Dave Fogle
	Highland, MD 20777	Source:	Well Water
Date/ Time Collected:	6/17/2014 1134	Site:	Kitchen Sink
Date/Time Rec'd:	6/17/2014 1345	Treatment:	UV Light
Chlorine ppm:	Free: ND Total: ND	pH:	5.4
Collected By:	J. Fogle 1974JF	Well #:	HO-95-2412

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	6/18/2014 / 0915 / CCH
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	6/18/2014 / 0915 / CCH

NOTES

- 1 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 2 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 3 ND:None Detected
- 4 Sample collected by client, analyzed as received
- 5 pH tested in lab, chlorine level tested on site

Reason for Test : Use & Occupancy
Building Permit # : B13003597

Date Reported: 6/18/2014

Williams, Jeffrey

From: Williams, Jeffrey
Sent: Thursday, June 19, 2014 10:31 AM
To: 'Bill McElwee'
Subject: Owings Overlook 17 and 18

Hello Bill. As we discussed, we will need to see a passing water quality test of the untreated water. This should be noted on the results form as treatment: none. We usually see a test taken at the pressure tank as assurance that it is untreated.

If that test fails bacteria, I would like to discuss the chlorination procedure with the person doing that for you. They will need to chlorinate it in a different way according to the procedures in COMAR 26.04.04 for wells which do not respond to standard chlorination.

Also, if the untreated test passes, the UV light may remain as a non-required elective device. We will not allow a UV light to be used in order to achieve a passing bacteria test unless we have evidence that repeated chlorination and the special method of chlorination were unsuccessful and have approved a request for deviation to a certificate of potability from the prospective homeowners. We can discuss that process if needed. Thanks

Jeff Williams
Program Supervisor, Well & Septic Program
Bureau of Environmental Health
Howard County Health Dept.
410-313-4261
jewilliams@howardcountymd.gov

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AdvanTex® Field Maintenance Report **Start-Up Summary Report**

Atlantic Solutions, MD
(877) 814-8426

Property Owner/Tracking #		Operator		Installed Date	
Site Address 6827 Winding Stream Lane, Highland MD 20777					
Phone Number	Permit #	Mode Mode 3A	Bedrooms	Occupants	Occupancy Date
Designer/Engineer Atlantic Solutions		Phone (401) 293-0176	Authorized Installer Fogles Septic		Phone (410) 795-5670
AdvanTex Dealer Atlantic Solutions, LTD		Phone (401) 293-0176	Electrician		Phone

Primary Treatment

If using a single Processing Tank, complete the following:

☐ Processing Tank

Septic Volume (gal.) Recirc Volume (gal.)

Construction ☐ Concrete ☐ Fiberglass ☐ Other

Manufacturer:

If using a separate Septic Tank and Recirc Tank, complete the following:

☐ Septic Tank (gal.)

Construction ☐ Concrete ☐ Fiberglass ☐ Other

Manufacturer:

☐ Recirc Tank (gal.)

Construction ☒ Concrete ☐ Fiberglass ☐ Other

Manufacturer:

☐ Pump Model: PF300511

☐ Floats set properly at 11 -in. 13 -in. 24 -in.

Secondary Treatment

☐ RSV setting: -in.

☐ Residual head measurement:

Pod #1 -in. Pod #2 -in. Pod #3 -in.

☐ Discharge Tank/Basin (gal.)

Construction ☐ Concrete ☐ Fiberglass ☐ PVC (Basin)

Manufacturer:

☐ Pump Model:

☐ Floats set properly at -in. -in. -in.

☐ Discharge pump flow rate (drawdown test): (gpm)

☐ Discharge pump dose volume: (gal./dose)

Comments Start up

Control Panel

Panel ID (RTU or UL #)	"On" Timer Setting	"Off" Timer Setting
TCOM - MVP		

Filter Pods

Pod #1 Serial No.	Pod #2 Serial No.	Pod #3 Serial No.
418488		

Other System Components

☐ Disinfection equipment (manufacturer):

☐ Dispersal system (type of):

Declarations (Initial)

☒ Oranco's Start-Up Procedure was followed.

☒ All lids are secured.

☒ Circuit breakers are on and control panel is latched.

☒ "For Service Call" label with phone # was affixed to panel.

☒ Homeowner Package was reviewed with:

☐ Builder on (date)

☐ Resident on (date)

The system is ready for use ☐ Yes ☐ No (explain)

Signature

Date

Fax completed form to 1-866-384-7404

Martin, Sharhonda

From: Tudor, Matt
Sent: Wednesday, June 18, 2014 10:02 AM
To: Day, Lori; Wolf, Kevin
Cc: Hart, Amy; Rocco, Anthony; Baker, Brian; Martin, Sharhonda; Williams, Jeffrey; Bozzell, Duane; Tudor, Matt
Subject: U&O Release 6827 Winding Stream Way

On the morning of June 12th, Duane Bozzell observed the start-up of a Sewage Grinder Pump at the Owings Property, Lot 5 site Shared Septic System:

Owings Property, Contract 50-4436-D
Steuart Kret, Lot #17
6827 Winding Stream Way
Highland, MD 20777

The Sewage Grinder Pump test was successful ; the Bureau of Utilities releases its hold on this property for U&O.

Matt
410-313-4934 office
410-978-1320 mobile