6/13/89 NOON

KJB

05-371999

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

P 43133

A 26160

DISTRICT 5th

DATE 11/29/88

DATE SYSTEM APPROVED 6/13/89

INSPECTOR R. Hughes

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

BP # 22302

INDEXED

Olen Ketterman IS PERMITTED TO INSTALL X ALTER ____

ADDRESS 14960 Route 144, Woodbine, Maryland 21797 PHONE 442-1336

SUBDIVISION Alan Weintraub ROAD 5501 Harris Farm Lane LOT Parcel 10

PROPERTY OWNER Dan Madison

ADDRESS ____

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

GARBAGE GRINDER? YES ____ NO X

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 200 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 3½ feet below original grade. Bottom maximum depth 8½ feet below original grade. Effective area begins at 3½ feet below original grade. 5 feet of stone below distribution pipe.

LOCATION - Place the distribution box 30 feet from the right lot line and 350 feet from the rear lot line as seen when facing the property from the Right-of-way. Run trenches along contour toward right lot line.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

PLANS APPROVED BY C. Williams DATE 9/12/88

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(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

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

A 26160

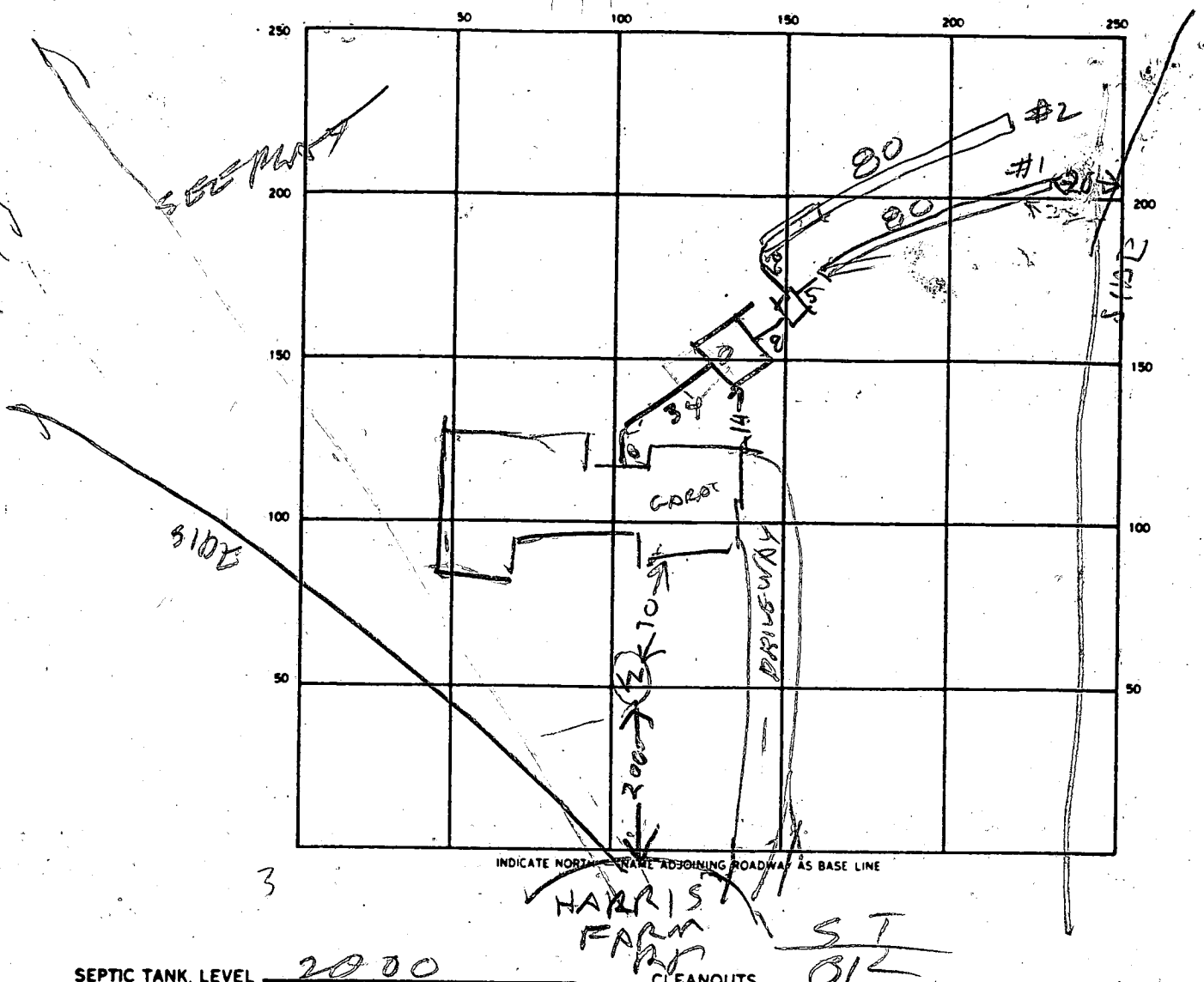
INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT

BUILDING PERMIT SIGNED AND RETURNED

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

HD-260
3-3-05 B00152483 Sunroom

0150



SEPTIC TANK. LEVEL 2000 CLEANOUTS 812

DISTRIBUTION BOX. LEVEL

DRAIN FIELD/TILE FIELD. DEPTH 1: 8.5 2: 8 FT. TRENCH WIDTH 1: 2 2: 2 FT. INLET DEPTH 1: 3 2: 3½ FT.

EFFECTIVE GRAVEL DEPTH 1: 5.5 2: 5.5 FT. TOTAL LENGTH 160 FT

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 800 SQ FT.

DRYWELL INSIDE DIAMETER FT EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA SQ. FT.

REMARKS 6/13/89 1000M HOUSESEWER COVER BUT OK UNDER MAT SAID SIDE ISOK TRENCH #1 DUG & PARTLY STONED TRENCH #2 STARTED 6/13/89 305 - TRENCHES #1 & #2 OK. RAIN TODAY

BUILDING PERMIT SIGNED AND RETURNED

DATE SYSTEM APPROVED 6/13/89 INSPECTOR Raymond Rodger

SUBDIVISION: ALAN WEINTRAUB A 26160

LOT NUMBER: 10

DRY WELL OR DRY WELL AND TRENCH

_____ sq. ft./bedroom

	Septic Tank	Minimum Total Square Feet
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

200 sq. ft./bedroom

Trench to be 2 wide.

Inlet 3½ feet below original grade.

Bottom maximum depth 8½ feet below original grade.

Effective area begins at 3½ feet below original grade.

5 feet of stone below distribution pipe.

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 absorbent sidewall area by 22%.

LOCATION: PLACE THE DISTRIBUTION BOX 30' FROM THE RIGHT LOT LINE AND 350' FROM THE REAR LOT LINE AS SEEN WHEN FACING THE PROPERTY FROM THE RIGHT-OF-WAY, RUN TRENCHES ALONG CONTOUR TOWARD RIGHT LOT LINE.

REVISED 9/12/88 C Walker

11/4/88 OK BA

HD-191

APPLICATION

A 26160

P

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

3 B.R. 1000 gal. septic tank | 4 B.R. 1250 gal. septic tank

DISTRICT 5th

DATE 6/21/77

Drywell and trench system to have 160 Sq. ft. effective sidewall absorption area per bedroom to begin below the first 3½ ft. of non-porous soil. Maximum depth permitted for drywell and trench is 9 ft. below original grade. Place the drywell 12 ft. from the right (616.93 ft. long) side line and 350 ft. from the rear (424.80 ft. long) property line, as seen when facing the property from the end of the 100 ft. wide common right of way. Start the trench after a 5 foot earth buffer with the drywell and proceed to dig it on level ground the necessary distance.

NOTE: Call for inspection of trench before gravel is installed in trench

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 Allan Weintraub DAN MADISON

ADDRESS @ Richard Hallowell "ighland, Md. 20777 PHONE 286-2988

PROPERTY LOCATION:

SUBDIVISION 5501 HARRIS Farm Lane LOT NO. Parcel 10 5.808 ac..

ROAD AND DESCRIPTION At end of private road off west side of intersection of Ten Oaks Rd & Highland Rd - 5th Dist.

SIZE OF LOT 5.808 ac.. rec 661/235 on 11/21/73 TYPE BLDG. 4 bedrm single family res.
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT Richard Hallowell

APPROVED BY Frank Skinner FOR Drywell & trench (KIND OF SYSTEM) DATE 2/17/78

REJECTED BY ~~_____~~ FOR ~~_____~~ (KIND OF SYSTEM) DATE ~~_____~~

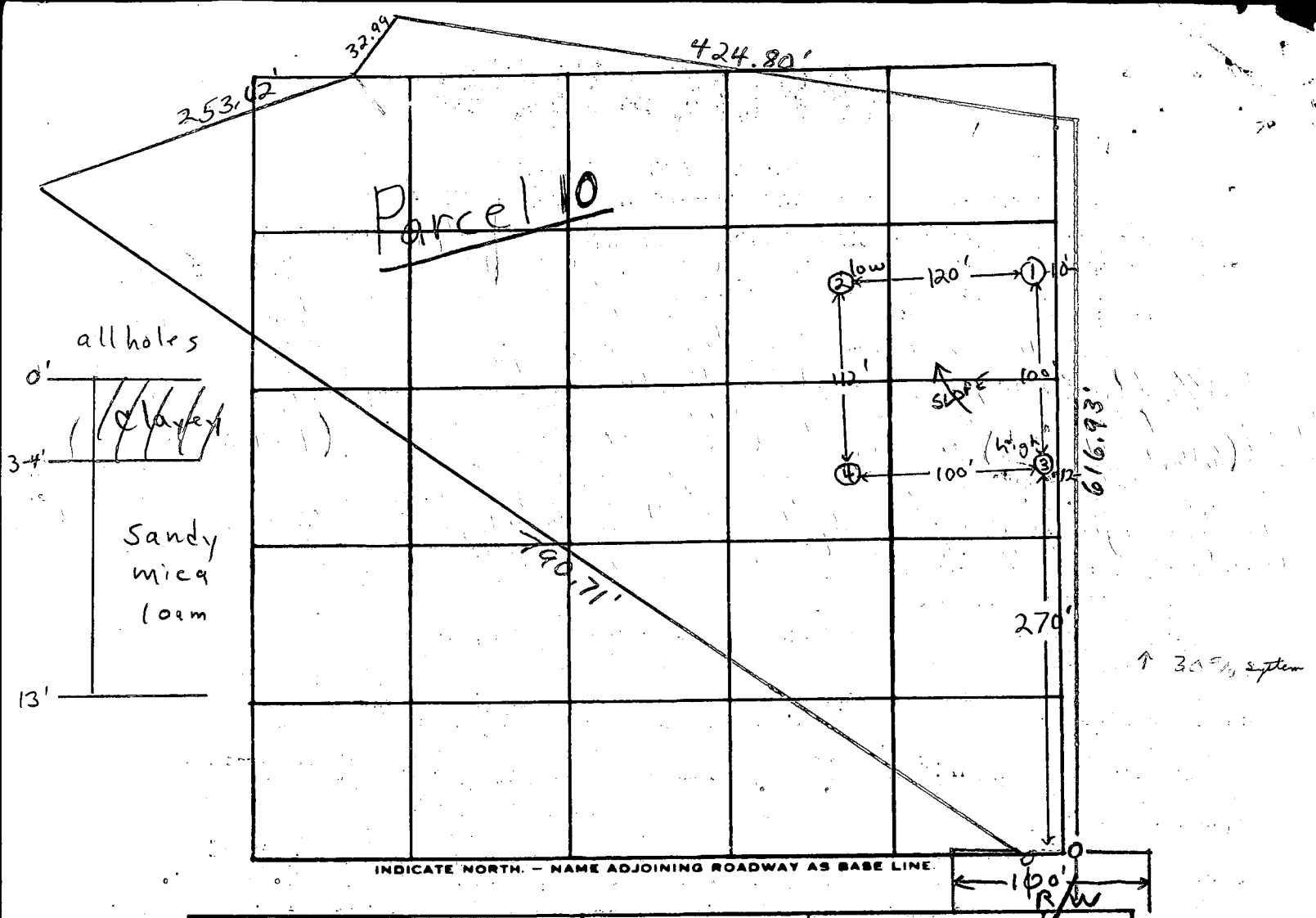
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING ~~7/28/77~~ Hold for signed boundary plat, perc O.K. F.S.

BLDG. PERMIT SIGNED AND RETURNED 11/4/88

BP 22302

THIS IS NOT A PERMIT



DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME	
7/27/77	1	5½	1:10	→	→	1:18	8 min	clayey to 4'
	1A	13'	1:10	1:17	1:17	1:27	10 min	
	2 low	4½'	1:13	→	→	1:19	6 min	
	2A	12½'	1:11	1:19	1:19	1:29	10 min	
	3 high	4'	1:15	1:17	1:17	1:20	3 min	clayey to 3½'
	3A	13'	1:15	1:20	1:20	1:26	6 min	
	4	12'	Clayey to 5'; sandy mica loam below					

REMARKS _____

TYPE OF SOIL Sandy mica loam below tops 3-5' clayey soil

TESTED BY F.S. ALSO PRESENT: Fyocks crew

PARCEL No. 10
5.808 ACRES

S 68° 19' 47" E 216.93'

N 26° 30' 58" E 424.80'

N 49° 38' 37" W 32.39'

N 14° 53' 26" W 253.62'

MARYLAND GAS PIPELINE COMPANY 764.4'

S 58° 16' 57" W 790.71'

S 69° 00' 00" E 1430.00'

N 69° 00' 00" W 1480.00'

Rad.= 255.00'
L= 186.92'
Chd.= S 48° 00' 00" E
182.76'

Rad.= 280.00'
L= 183.25'
Chd.= N 50° 00' 00" W
180.18'

N 71° 00' 00" W 190.00'

Rad.= 215.00'
L= 191.10'
Chd.= S 43° 30' 00" E
139.16'

Rad.= 280.00'
L= 142.88'
Chd.= N 42° 30' 00" W
142.00'

S 60° 00' 00" E 680.00'

N 60° 00' 00" W 680.00'

Underground Pipeline
R/W 267/105

Rad.= 245.00'
L= 133.69'
Chd.= S 75° 38' 00" E
132.04'

100.00'
N 88° 44' 00" E

S 01° 16' 00" E 5.00'

S 88° 44' 00" W 100.00'

Rad.= 280.00'
L= 136.42'
Chd.= N 75° 38' 00" W
134.74'

TEN OAKS ROAD

PLAT FROM DEEDS
OF
PARCEL NO. 10
FOR
ALLEN WEINTRAUB
FIFTH ELECTION DIST., HOWARD CO.
CLARKSVILLE, MARYLAND.
SCALE 1in= 100ft. JUNE 29, 1977

Note: The lot shown hereon complies with the minimum ownership & lot area as required by the Maryland State Dept. of Health & Mental Hygiene.

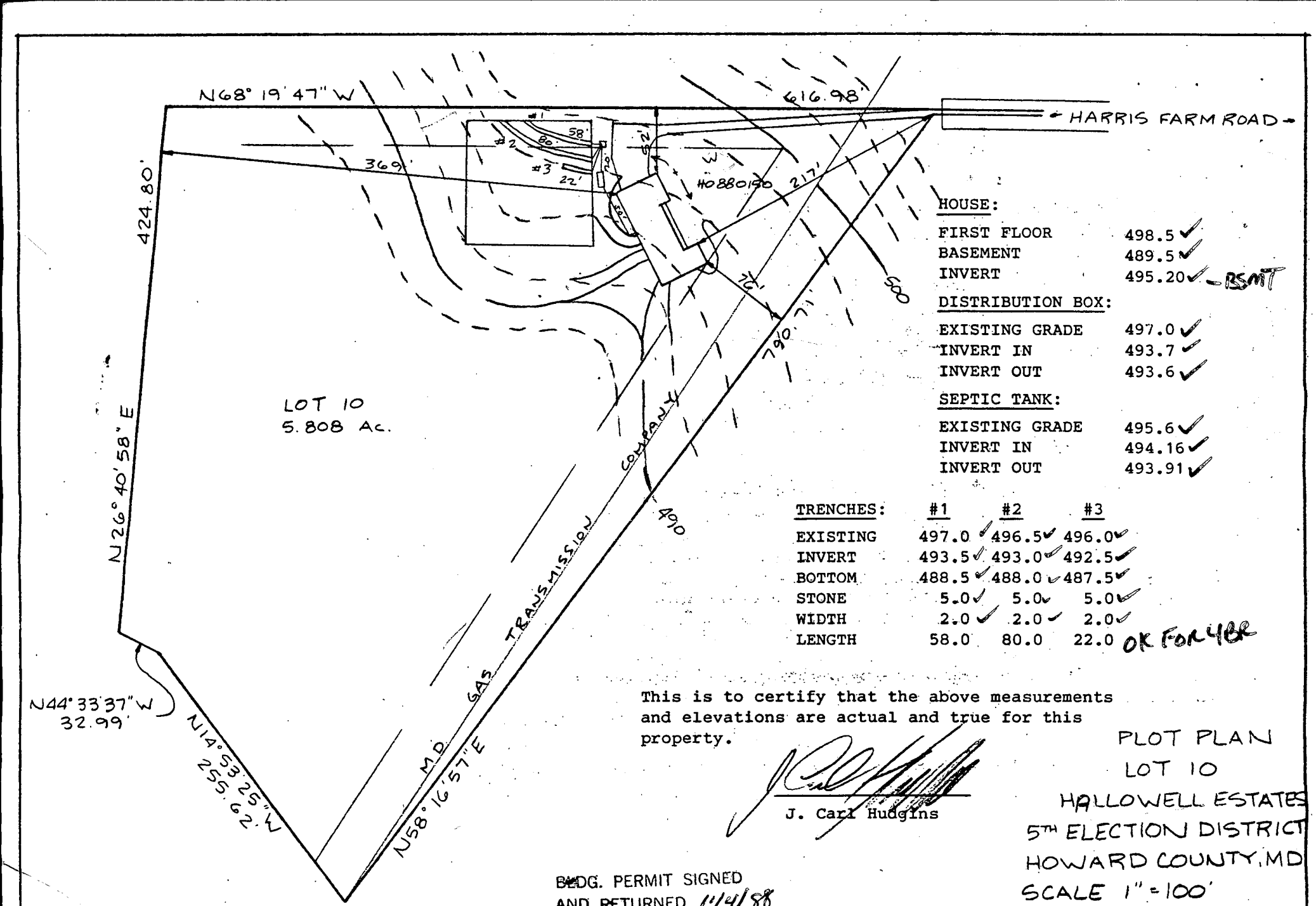
Area: Private Water & Private Sewer

Joseph Barylmo 10-21-77
(County Health Officer) Date

STATE OF MARYLAND
ROBERT E. BOEN
NO. 8115
REGISTERED
LAND SURVEYOR

Robert E. Boen

C-4395-10



HOUSE:

FIRST FLOOR	498.5 ✓
BASEMENT	489.5 ✓
INVERT	495.20 ✓ BSMT

DISTRIBUTION BOX:

EXISTING GRADE	497.0 ✓
INVERT IN	493.7 ✓
INVERT OUT	493.6 ✓

SEPTIC TANK:

EXISTING GRADE	495.6 ✓
INVERT IN	494.16 ✓
INVERT OUT	493.91 ✓

TRENCHES:	#1	#2	#3
EXISTING	497.0 ✓	496.5 ✓	496.0 ✓
INVERT	493.5 ✓	493.0 ✓	492.5 ✓
BOTTOM	488.5 ✓	488.0 ✓	487.5 ✓
STONE	5.0 ✓	5.0 ✓	5.0 ✓
WIDTH	2.0 ✓	2.0 ✓	2.0 ✓
LENGTH	58.0	80.0	22.0

OK FOR 4BR

This is to certify that the above measurements and elevations are actual and true for this property.

J. Carl Hudgins

BLDG. PERMIT SIGNED AND RETURNED 11/4/88
BP 22302

PLOT PLAN
LOT 10
HALLOWELL ESTATES
5TH ELECTION DISTRICT
HOWARD COUNTY, MD
SCALE 1" = 100'
DATE 01 NOV 88

EMERGENCY/TEMP NO. IF ANY

B 1 | 1329 | SEQUENCE NO. (DP USE ONLY)

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

STATE OF MARYLAND PERMIT TO DRILL WELL

please print or type

STATE PERMIT NUMBER: HO-88-0150

fill in this form completely

OWNER INFORMATION

Date Received (APA): 081688

Owner — Last Name: MADISON, First Name: R. DANNY

Street or RFD: 12313 MIKE LANE

Town: BOWIE, State: MD, Zip: 20715

DRILLER INFORMATION

Driller's Name: Joseph L. Mayne — License No.: 238

Firm Name: Joseph L. Mayne Well Drilling

Address: 5512 Ridge Rd. Mt. Airy Md. 21771

Signature: Joseph L. Mayne — Date: 8/15/88

B 2 WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.): 5

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY): 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- (D) HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) — circled
- 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)

APPROXIMATE DEPTH OF WELL: 250 FEET

APPROXIMATE DIAMETER OF WELL: 6 NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) — JETTED — Jetted & DRIVEN

AIR-ROTary (marked) — AIR-PERcussion — ROTARY (Hydraulic Rotary)

CABLE — REVerse-ROTary — DRive-POINT

other

REPLACEMENT OR DEEPENED WELLS (CIRCLE APPROPRIATE BOX)

- (N) THIS WELL WILL NOT REPLACE AN EXISTING WELL — circled
- 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 DEEPEN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENED (IF AVAILABLE):

Not to be filled in by driller (OEP USE ONLY)

APPROP. PERMIT NUMBER: GAP

FORCE: CS (WRITE INITIALS IN BOX) — PERMIT No.: HO-88-0150

SPECIAL CONDITIONS

B 3 LOCATION OF WELL

COUNTY: HOWARD

SUBDIVISION: ALAN WEINTRAUB

SECTION: — LOT: 10 Parcel 10

NEAREST TOWN: CLARKSVILLE

MILES FROM TOWN (enter 0 if in town): 2½ MI

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX): W (circled)

NEAR WHAT ROAD: Harris Farm Lane

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): S

DISTANCE FROM ROAD: 300 — ENTER FT or MI: FT

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

COUNTY NAME: HOWARD — COUNTY NO.: A# 26160

STATE SIGNATURE — INSERT S

DATE ISSUED: 083088 — CO SIGNATURE: Charles Bryan Shecker — EXP. DATE: 3/2/[illegible]

NORTH GRID: 506000 — EAST GRID: 0804000

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

1. WELL
2.
3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E: 808 4

N: 508 6

9/21 / Well Driller

42' Casing

32' Well grout - open hole

9 # Bags of cement

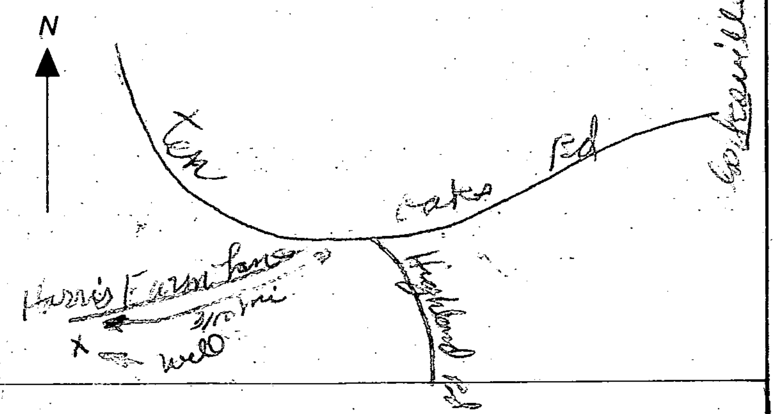
1' Casing above ground

ok C.B.S.

000
000

Tag left at site. CRE

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



COUNTY

Page ___ of ___
Date 9/21/88

Review ac 11/2/88 cw

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 88-0150
Location of property (road) Ten Oaks Farm Rd. - Harris Farm Rd.
Subdivision _____ Lot 10 Block ___ Plat ___ Sec. ___
Well Driller Joseph L. MAYNE Owner DAN & MARILYN MADISON

Depth of well 380'
Distance of measuring point (M.P.) above ground 1'
Static water level (S.W.L.) below M.P. 3'

I. *High rate pumping -- reservoir drawdown*

Time pump started 7:45 Pumping rate 15 gpm
Total time 30 min. to reach pumping water level 225 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 ϕ gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
8:00	140'	4 sec	N/A	15
8:15	225	4		15
8:30	225	50		1.2
8:45	225	50		1.2
9:00	225	50		1.2
9:15	225	50		1.2
9:30	225	50		1.2
9:45	225	50		1.2
10:00	225	50		1.2
10:15	225	50		1.2
10:30	225	50		1.2
10:45	225	50		1.2
11:00	225	50		1.2
11:15	225	50		1.2
11:30	225	50		1.2
11:45	225	50		1.2
12:00	225	50		1.2
12:15	225	50		1.2
12:30	225	50		1.2
12:45	225	50		1.2
1:00	225	50		1.2
1:15	225	50		1.2
1:30	225	50		1.2
1:45	225	50		1.2
2:00	225	50		1.2
2:15	225	50		1.2

C 1 | 0683 | SEQUENCE NO. (DENV 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 6 - 26160

DATE Received

DATE WELL COMPLETED 9/13/83

Depth of Well 380 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 10-88-0150

OWNER MADISON R. DENNY

STREET OR RFD (last name) NARI FARM LANE (first name) TOWN CLARKSVILLE, MD.

SUBDIVISION ALLEN WEINTRAUB SECTION — LOT #10

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	FEET TO	Check if water bearing
Earth	0	41	
Mica Rock	41	380	

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. 238

Joseph L. Mayne
DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)

SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

GROUTING RECORD
WELL HAS BEEN GROUTED (Circle Appropriate Box) yes Y (44) no N (44)

TYPE OF GROUTING MATERIAL

CEMENT CM (45-46) BENTONITE CLAY BC (45 46)

NO. OF BAGS 1 NO. OF POUNDS 94#

GALLONS OF WATER 50

DEPTH OF GROUT SEAL (to nearest foot)

from 0 (48 TOP 52) ft. to 32 (54 BOTTOM 58) ft.

(enter 0 if from surface)

CASING RECORD
casing types insert appropriate code below

ST STEEL CO CONCRETE PL PLASTIC OT OTHER

MAIN CASING TYPE	Nominal diameter top (main) casing (nearest inch)	Total depth of main casing (nearest foot)
ST (60 61)	6 (63 64)	49 (66 70)

EACH CASING — OTHER CASING (if used)

diameter inch	depth (feet) from	to

SCREEN RECORD
screen type or open hole — insert appropriate code below

ST STEEL BR BRASS BRONZE HO OPEN HOLE PL PLASTIC OT OTHER

C 2

EACH SCREEN

	DEPTH (nearest ft.)	
1 (8 9)	40 (11 15)	380 (17 21)
2 (23 24)	(26 30)	(32 36)
3 (38 39)	(41 45)	(47 51)

SLOT SIZE 1 ____ 2 ____ 3 ____

DIAMETER OF SCREEN (56 60) (NEAREST INCH)

GRAVEL PACK from ____ to ____

IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68 (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) 6 (8 9)

PUMPING RATE (gal. per min. to nearest gal.) 12 (11 15)

METHOD USED TO MEASURE PUMPING RATE Est. by

WATER LEVEL (distance from land surface)

BEFORE PUMPING 3 (17 20)

WHEN PUMPING 225 (22 25)

TYPE OF PUMP USED (for test)

A air (27) P piston (27) T turbine (27)

C centrifugal (27) R rotary (27) O other (describe below) (27)

J jet (27) S submersible (27)

PUMP INSTALLED
DRILLER WILL INSTALL PUMP (CIRCLE) (YES or NO) 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)

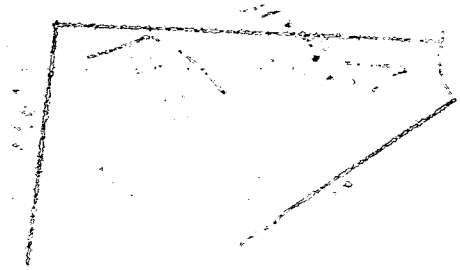
PUMP COLUMN LENGTH (nearest ft.) (43 47)

CASING HEIGHT (circle appropriate box and enter casing height)

(+) above (49) / (−) below (49) } LAND SURFACE ____ (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)

N



COUNTY

6/5/89

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 X
Replacement ____

Receipt # 43F76
Date 3/23/89

Name of Installer MECHANICAL SERVICE

Telephone 8540620

License number ____
Certified Well Pump Installer ____ Well Driller ____ Registered Plumber X

Name of Property Owner DAN MADISON Telephone 464-6236
Subdivision HOLLOWELL Estates Lot # 10 Well tag # HO-88-0150
Site Address 5501 HARRIS FARM LA
CLARKSVILLE Md 21029

Pump
1. Type
   a. Deep well jet ____
   b. Shallow well jet ____
   c. Submersible X
2. Make DAYTON
3. Model # ____
4. Capacity 4 GPM

Motor
1. Horsepower 3/4
2. RPM 3450
3. Voltage ____
   a. 110 ____
   b. 220 X

Pitless Adapter
1. Make TEEL
2. Model # 1"
3. Depth 42"

5. Pump exceeds well capacity Yes X No ____
6. If Yes, is low pressure cutoff switch installed? Yes X No ____
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors ____ Cable guards X Other ____

Tank
1. Capacity 90GAL
2. Pressure relief valve? YES

Piping
1. Type 350'
2. Size 1"
3. NSF and/or BOCA Code approved X
4. Depth of supply line ____

Well data
1. Depth 380 ft.
2. Yield 12 GPM
3. Static water level 30 ft.
4. Will water supply be disenfected by installer? NO

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: Raymond F Cook

Date: 3-22-89

6/5/89 - OK TO COVER OUTSIDE WORK

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

STICKER APPLIED BY

Water Sample Request

PROPERTY OWNER Mr. Wan Madison DATE OF REQUEST 08/23/89

TELEPHONE ______ NEW WELL NUMBER HO-88-0150

DIRECTIONS OR INSTRUCTIONS ______

NAME Alan Wentraub - Lot #6

ADDRESS 5501 Warrior Farm Lane

SAMPLE TYPE

- ___ Health Hazard
- ✓ U & O
- ___ Real Estate
- ___ Pond or Stream
- ___ Sewage
- ___ Other

SETTLEMENT DATE ___/___/___

REASON FOR REQUEST

- ___ Physician's Advice
- ✓ New Residence
- ___ Nitrate Monitoring
- ___ Taste or Odor
- ___ Treatment System Necessity
- ___ Plumbing or Well Repair
- ___ Replacement Well
- ___ Curiosity

SEPTIC SYSTEM: ✓ Approved ___ Disapproved DATE 06/13/89

CONDITION: A# 26160

SUPPLY TYPE: ✓ Drilled Well ___ Hand Dug ___ Spring ___ Public

CONDITION: ______

FIRST SAMPLE COLLECTOR Md. Lab. TIME ______ DATE 07/26/89

✓ BACTERIA Md-120, pH 6, Free Cl^- 0.0, Res. Cl^- 0.0, ~~VOC~~ Turbidity 2.1

✓ CHEMICAL Md-120, LEAD & COPPER —, NITRATES 026 PESTICIDE ______

ACTION: dcop issued August 23, 1989 c.m./c.Bd

2/5/90 FOLLOW UP LETTER

RESAMPLE COLLECTOR MENUSTIK DATE 02/28/90

✓ BACTERIA VV-210, pH 6.6+, Free Cl^- 0.0, Res. Cl^- 0.0, TIME 10:31

___ CHEMICAL ______, Other ______

ACTION: 3/9/90 Send F.C.O.R. c.Bd

RESAMPLE COLLECTOR ______ DATE ___/___/___

___ BACTERIA ______, pH ___, Free Cl^- ___, Res. Cl^- ___, TIME ___

ACTION: ______

RESAMPLE COLLECTOR ______ DATE ___/___/___

___ BACTERIA ______, pH ___, Free Cl^- ___, Res. Cl^- ___, TIME ___

ACTION: ______

HD-232

MARYLAND MEDICAL LABORATORY, INC.

SELVIN PASSEN, M.D.
Director of Laboratories

Main Office: Pathology Building
1901 Sulphur Spring Road, P.O. Box 24080
Baltimore, Maryland 21227-0580

BALTO. AREA (301) 247-9100/WASH. AREA (301) 596-0560

PHYSICIAN

DAN MAIDSON
5501 HARRIS FARM LA
CLARKSVILLE MD 21029

PATIENT

MADISON,DAN
5501 HARRIS FARM LA
CLARKSVILLE MD 21029

PATIENT NAME	DATE	AGE	SEX	LAB NUMBER	
MADISON,DAN	07/26/89	?	M	A89792445	LABORATORY REPORT

ENVIRONMENTAL SCIENCES DEPARTMENT - MD CERTIFICATION #120:

OWNER---------- MADISON,DAN
LOT NUMBER---------- 10
SUBDIVISION NAME---------- N/A
STREET ADDRESS---------- 5501 HARRIS FARM LANE
CITY---------- CLARKSVILLE
COUNTY---------- HOWARD
STATE---------- MARYLAND
ZIP CODE---------- 21029
TAG NUMBER---------- HO-880150
COLLECTED BY---------- HB-687-2595
WATER - TOTAL COLIFORMS (MPN)---- <2.2 /100 ML
THE MARYLAND STATE HEALTH DEPARTMENT HAS ESTABLISHED A MAXIMUM CONTAMINANT LEVEL OF LESS THAN 2.2 COLIFORMS PER 100 ML. WATER WHICH EXCEEDS THIS LIMIT MAY BE CONSIDERED NON-POTABLE.

WATER - FECAL COLIFORMS (MPN)---
TEST NOT INDICATED. RESULTS OF THIS ANALYSIS HAVE BEEN FORWARDED TO THE HOWARD COUNTY HEALTH DEPARTMENT.

*WATER - PH----------	6	(6.5-8.5)
WATER - TURBIDITY----------	2.1 NTU	(0-10)
WATER - NITRATES----------	0.26 MG/L	(0-10)
	(MARYLAND STATE MAXIMUM CONTAMINANT	)
	(LEVEL (MCL)	)

WATER - TOTAL RESIDUAL CHLORINE-- <0.1 PPM

NEW WELL

Suzanne McAlpin 8/1/89
Virg Harden 8-1-89
SIGNATURE

(COMPLETED)

08/01/89
DATE REPORTED

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

August 23, 1989

Mr. Dan Madison
5501 Harris Farm Lane
Clarksville, Maryland 21029

Re: Alan Weintraub - Lot 10
5501 Harris Farm Lane
Well Permit No. HO-88-0150

Dear Mr. Madison:

This is to advise you that the septic system was installed, inspected and approved on June 13, 1989.

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.

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 permit(s) HO-88-0150. No guarantee can be given for health protection beyond this date of issue. Based upon a satisfactory investigation and evaluation by the Howard County Health Department, the Department of Health and Mental Hygiene accepts this well system as required by COMAR 26.04.04.09.

This certificate may become final upon completion of the final bacteriological test which is to be taken by the county health department within six months. The well owner accepts his responsibilities under COMAR 26.04.04.10.

September 21, 1988
Date Well Approved

July 26, 1989
Date of Water Sample

Charles Streaker C.W.

Approving Authority
Charles Streaker, Sanitarian
Water and Sewerage Program

CS:cm

HOWARD COUNTY HEALTH DEPARTMENT

Joyce M. Boyd, M.D., County Health Officer

February 5, 1990

Reply to:
Charles Streaker, Sanitarian
461-9933 or 461-9934

Mr. Dan Madison
5501 Harris Farm Lane
Clarksville, Maryland 21029

RE: Alan Weintraub - Lot 10
5501 Harris Farm Lane
Well Permit #HO-88-0150

Dear Mr. Madison:

A review of our records indicates that final satisfactory water samples were not obtained at the above referenced property. You are requested to contact this office at 461-9933 to arrange for those samples to be taken. These samples are required in order to comply with Maryland Well Construction Regulation (COMAR 26.04.04.09A) (1) which states that: "A person may not put into service a well of water supply system that may be used for human consumption unless a Certificate-of-Potability has first been issued for the well by the approving authority...".

An Interim Certificate-of-Potability was issued based on one satisfactory water sample. The enclosed copy of that Interim Certificate stipulates that a second safe sample be obtained. The purpose of the second sample is to assure that the well is not vulnerable to re-contamination.

You are requested to call this office at 461-9933 to arrange an appointment for the second sample from an inside tap which is the most reliable location from which to obtain a safe sample.

Presently there is no charge for this service.

Very truly yours,

Charles Streaker

Charles Streaker, Sanitarian
Water and Sewerage Program

CS:cm

STATE OF MARYLAND
DEPARTMENT OF HEALTH AND MENTAL HYGIENE
Laboratories Administration
201 W. Preston St.
P.O. Box 2355, Baltimore, Maryland 21203
J. Mehsen Joseph, Ph.D., Director

Lab. No 014630

BACTERIOLOGICAL DRINKING WATER REPORT

Field Record

SAMPLE TYPE:
Community ☐
Non-Community ☐
Private ☑
Check Sample ☐
Special ☐

Source WILLIAM MADISON
Location: 5501 HARRIS FARM LANE (KITCHEN TAP)
Iced: Yes ☑ No ☐
Treated: Yes ☐ No ☑
Time Collected 10:31 ☑ am. ☐ pm.
Collector # 89-122
Bottle No. VV-210
Collector Name MENUSTIK
County HOWARD

County	Plant No.	Sampling Station	Date Collected
13			02 28 90

pH 6.6 + Res. Cl: Free 0.0 Total 0.0 Card No.

LABORATORY RECORD

Thiosulfate: Pres. ☑ Absent ☐ Undetermined ☐

PRESUMPTIVE TEST*

ml. of Sample	10ml.				
Gas, 24 hours	—	—	—	—	—
Gas, 48 hours	—	—	—	—	—

CONFIRMED TEST

ml. of Sample	10ml.				
Coliforms †	—	—	—	—	—
Fecal Coliforms ‡					

No. of Pos.
0

Presumptive Coliforms/100 ml. (Membrane Filter) =
Verified Coliforms/100ml. (Membrane Filter) ** =
SPC Dil. 1:..... Col. Counted:
Standard Plate Count §/ml.

** using m Endo-Agar LES at 35°C incubation
* using Lauryl Sulfate Trypticase Broth at 35°C incubation
† using Brilliant Green Lactose Bile Broth at 35°C incubation
‡ using EC Broth at 44.5° C incubation
§ using Plate Count Agar at 35°C incubation

Date & Hour:
23 FEB 90 13 53 — Recd.
23 FEB 90 13 53 ZM — Exam
-2 MAR 90 13 15 — Rept.

Laboratory
Annapolis ☐ Cumberland ☐
Cambridge ☐ Frederick ☐
Central ☑ Salisbury ☐
Cheverly ☐

Remarks
Bacteriologist

DHMH-86 (1/89) PROGRAM 2 60M

HOWARD COUNTY HEALTH DEPARTMENT

Joyce M. Boyd, M.D., County Health Officer

March 9, 1990

Reply to:
Charles Streaker, Sanitarian
461-9933 or 461-9934

Mr. Dan Madison
5501 Harris Farm Lane
Clarksville, Maryland 21029

Re: Alan Weintraub - Lot 10
5501 Harris Farm Lane
Well Permit No. HO-88-0150

Dear Mr. Madison:

This is to advise you that the septic system was installed, inspected and approved on June 13, 1989.

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

FINAL CERTIFICATION 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-88-0150.

February 28, 1990
Date of Final Sampling

March 9, 1990
Date of Acceptance

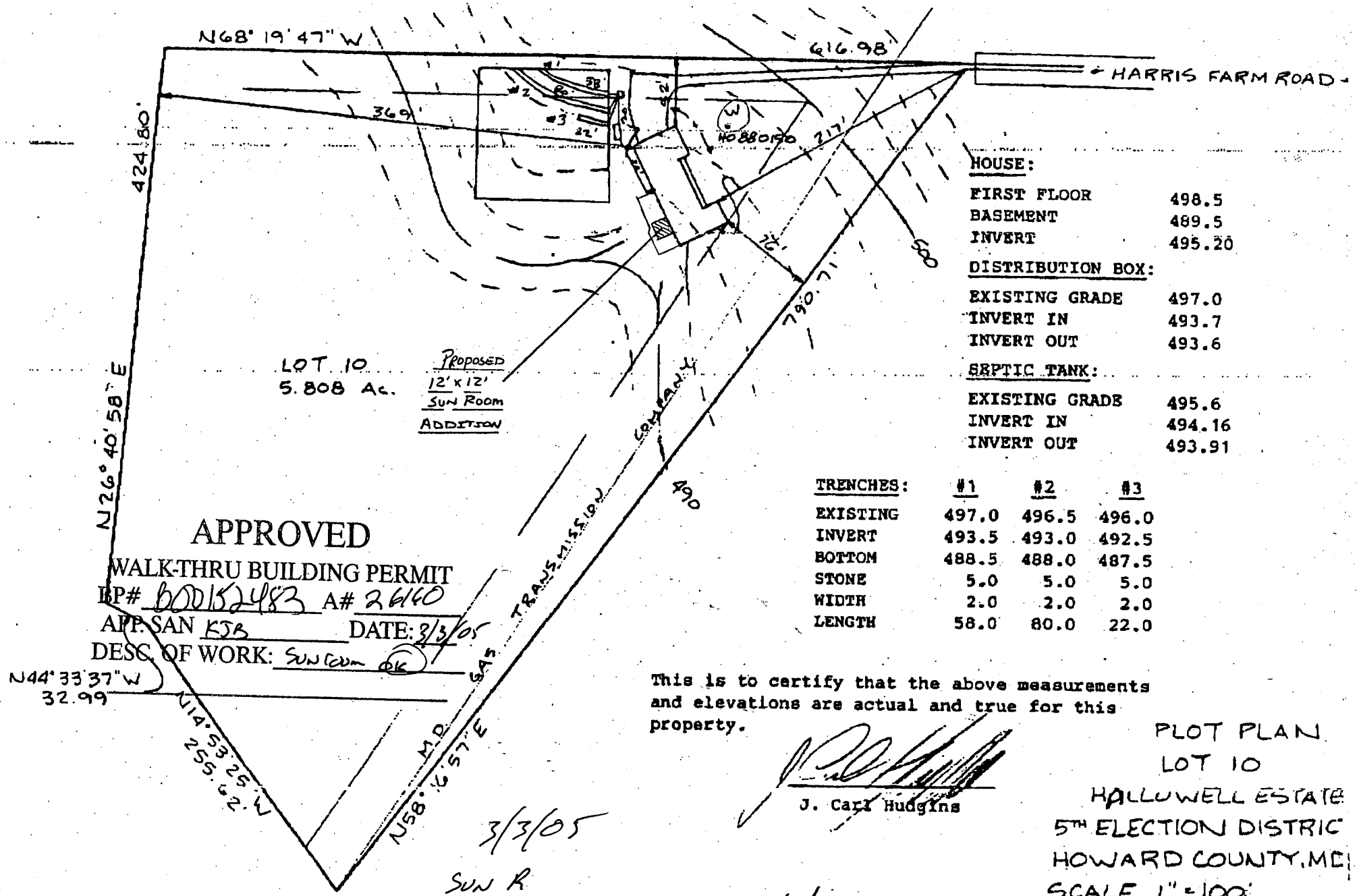
Charles Streaker

Charles Streaker, Sanitarian
Water and Sewerage Program

Water Sample Dates:
July 26, 1989
February 28, 1990

CS:cm

Bureau of Environmental Health
3525 Ellicott Mills Drive Ellicott City, Maryland 21043-4544
Director 461-9956 Water and Sewerage, Permits 461-9933 Community Environmental Health 461-9944
Technical Services 461-9955



HOUSE:	
FIRST FLOOR	498.5
BASEMENT	489.5
INVERT	495.20
DISTRIBUTION BOX:	
EXISTING GRADE	497.0
INVERT IN	493.7
INVERT OUT	493.6
SEPTIC TANK:	
EXISTING GRADE	495.6
INVERT IN	494.16
INVERT OUT	493.91

TRENCHES:	#1	#2	#3
EXISTING	497.0	496.5	496.0
INVERT	493.5	493.0	492.5
BOTTOM	488.5	488.0	487.5
STONE	5.0	5.0	5.0
WIDTH	2.0	2.0	2.0
LENGTH	58.0	80.0	22.0

This is to certify that the above measurements and elevations are actual and true for this property.

J. Carl Hudgins

Madison
#36109
1"=100'

PLOT PLAN
LOT 10
HALLOWELL ESTATE
5TH ELECTION DISTRIC
HOWARD COUNTY, MD
SCALE 1" = 100'
DATE 01 NOV 88

TOTAL P.02