

W.P.T. 6/14/84
approved
6/15/84
C. Williams

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

P 33980

A 28304

Howard County

BUREAU OF ENVIRONMENTAL HEALTH

992-2330

ELLICOTT CITY

DISTRICT 3rd.

DATE 6/8/84

INDEX

03-366992

Harry Uhler, III

IS PERMITTED TO INSTALL X ALTER

ADDRESS 14968 Frederick Road, Woodbine, Maryland 21797 PHONE 854-6266

SUBDIVISION Farside ROAD 11711 Foxspur Court LOT 24

PROPERTY OWNER Peter STASINSKI - owner
GVC Builders PHONE: 730-0554

ADDRESS 11065 Little Patuxent Parkway
Columbia, Maryland ORIN + NADIA ELIASSON

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

GARBAGE GRINDER? YES X NO

SEPTIC TANK CAPACITY 2000 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 218 sq ft. per bedroom. Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 10 feet below original grade. Effective area begins at 3 feet below original grade with 7 feet of stone below distribution pipe. LOCATION: Start the first trench 205 feet from the left lot line and 80 feet from the front lot line as seen when facing the property from Foxspur Court. Connect trenches with distribution box and run along level ground toward front right corner of lot. Trenches to be separated from one another by a distance of 15 feet, center to center.

BLDG. PERMIT SIGNED
AND RETURNED 2-24-99

Serial # 670116342
Myron P.H.

BLDG. PERMIT SIGNED

AND RETURNED 1/23/92
Serial # 40923
additional

PLANS APPROVED BY C. Williams DATE 6/8/84

COVER NO WORK UNTIL INSPECTED AND APPROVED.

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

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

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER. NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH.

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 40 PVC OR ABS.

PERMIT VOID AFTER THREE YEARS.

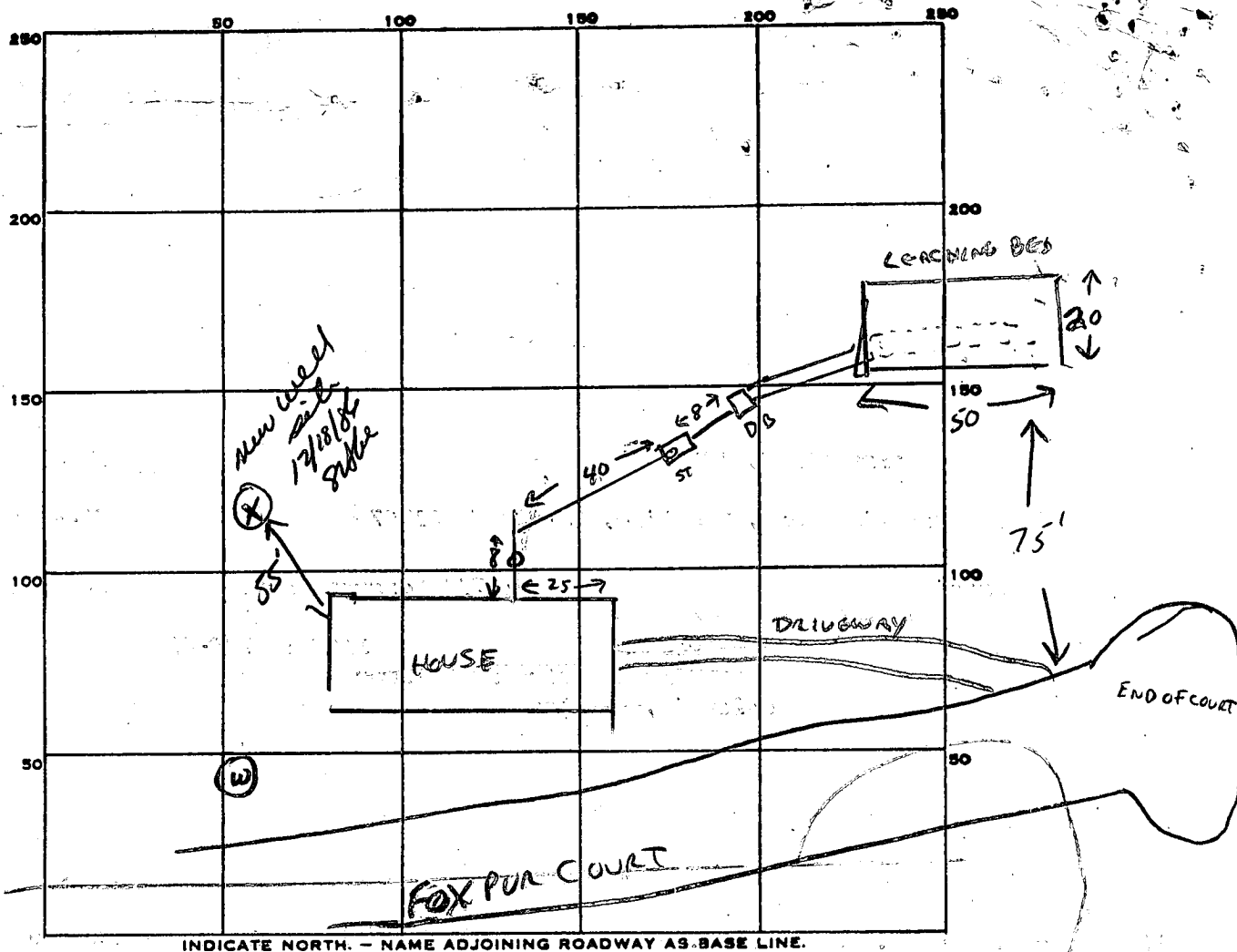
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

A 28304



PERMIT CARD ☒

SEPTIC TANK, LEVEL ☒ 2000

CLEANOUTS ☒ IN LINE ☒ ST ☒

DISTRIBUTION BOX, LEVEL ☒

TILE FIELD, DEPTH N/A FT. TRENCH WIDTH _____ FT.

GRAVEL DEPTH _____ IN. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA _____

LEACHING BED
SEEPAGE PITS, INSIDE DIAMETER 20 X 50 FT. DEPTH BELOW INLET 18 FT.

ABSORBENT AREA 1000 SQ. FT.

REMARKS _____

STRONG VEIN OF ROCK ENCOUNTERED AT TANK AND DISTRIBUTION BOX.

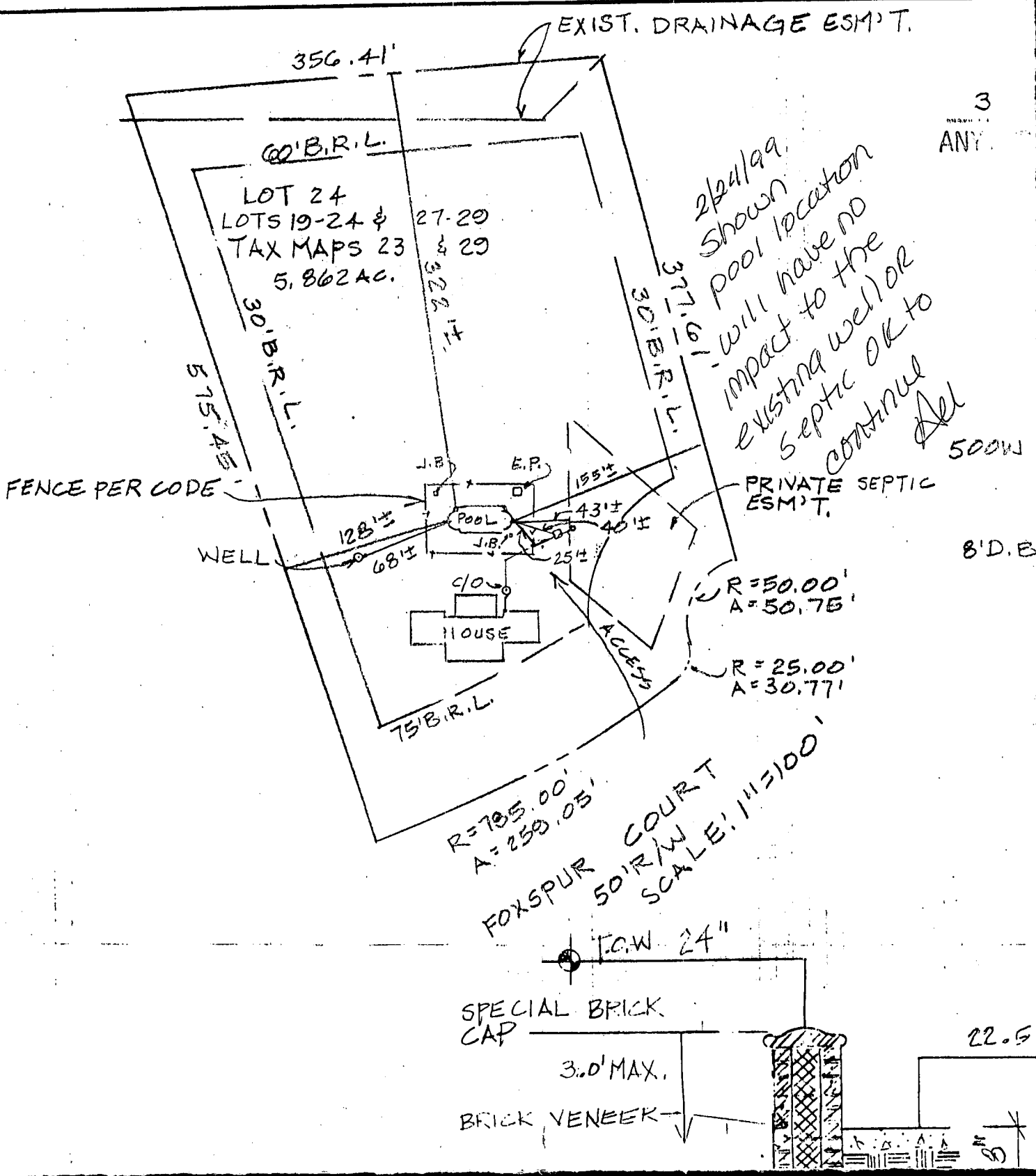
VEIN DROPPED OFF ENOUGH TO ALLOW SHALLOW SYSTEM BUT NOT DEEP TRENCHES.

MAKEUP AREA APPEARS TO BE OUT OF ROCK AREA AND IF REPAIR IS REQUIRED

TRENCHES SHOULD BE FIRST CONSIDERATION DUE TO SLOPE. 6/15/84 CW

DATE SYSTEM APPROVED 6/15/84

INSPECTOR Chris Wilman

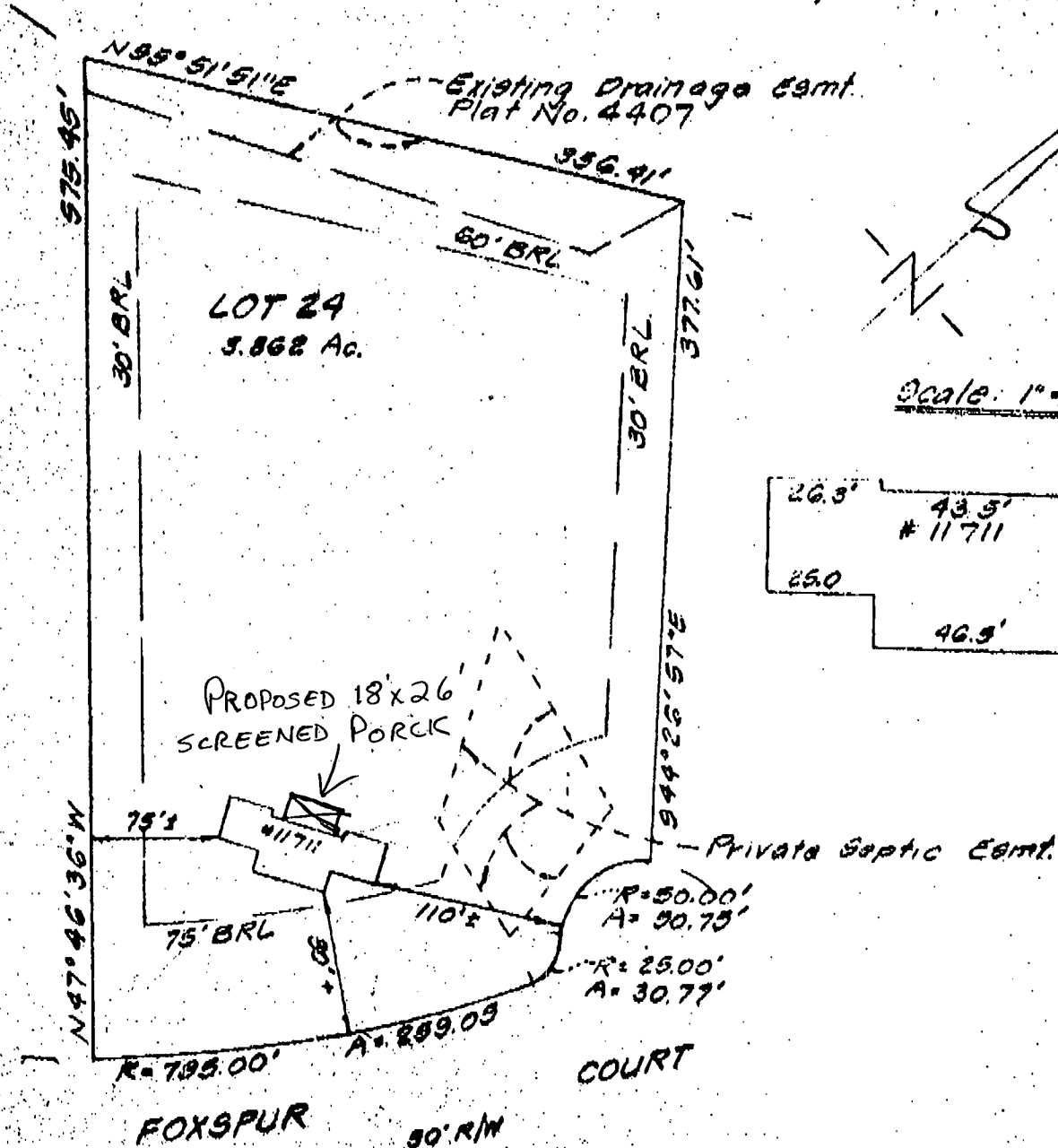


B. Clark

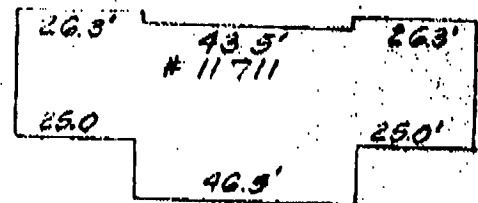
Wall Check: 9-16-84

LOCATION OF HOUSE
11711 FOXSPUR COURT
LOT 24

FAR SIDE
LOTS 19-24, 27-29
TAX MAPS 23129
3RD ELECTION DISTRICT
HOWARD COUNTY, MARYLAND



Scale: 1"=40'



84-030

SURVEYOR'S CERTIFICATE

I hereby certify that the position of all existing improvements on the above described property have been carefully established by a transit-tape survey and that unless otherwise shown, there are no encroachments.

Donald B. Sackett #6059

CLARK • FINEFROCK & SACKETT

ENGINEERS • PLANNERS • SURVEYORS
11315 LOCKWOOD DRIVE SILVER SPRING, MD. 20904
TEL. NO 593-3400

REFERENCE

Plat 4407

DRAWN BY NPK

DATE 5-18-84

SCALE 1"=100'

CHECKED BY KVC

FILE NO.

541-K

*Retest
Use this
for retest*
*application
Lot 25*

APPLICATION

A 28304

P _____

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT 3

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

DATE May 12, 1978

P O BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

Specs on separate sheet

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 Woodmark, Inc. GYC Builders

ADDRESS 11065 Little Patuxent Parkway
9267 Balto., Nat'l. Pike Columbia PHONE 461-2889 730-0554

PROPERTY LOCATION:

SUBDIVISION Farside LOT NO. 24
11711 Foxspur Court

ROAD AND DESCRIPTION Rt. 40 West to left on Rt. 144, left on Folly Quarter, left on
Homewood, 1 mile to property on left

SIZE OF LOT 3 plus acres TYPE BLDG. 4 BR with garage

NUMBER OF BEDROOMS 4

IF NOT SINGLE RESIDENCE DESCRIBE _____

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

SIGNATURE OF APPLICANT [Signature]

APPROVED BY Raymond Hodges FOR Daywell DATE 10/25/79
(KIND OF SYSTEM)

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

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 9/21/78 PERC O/K RM

Final Permit OK 10/25/79 RM

BLDG. PERMIT SIGNED

AND RETURNED 4/16/84

Serial # 58494 SFD.

THIS IS NOT A PERMIT

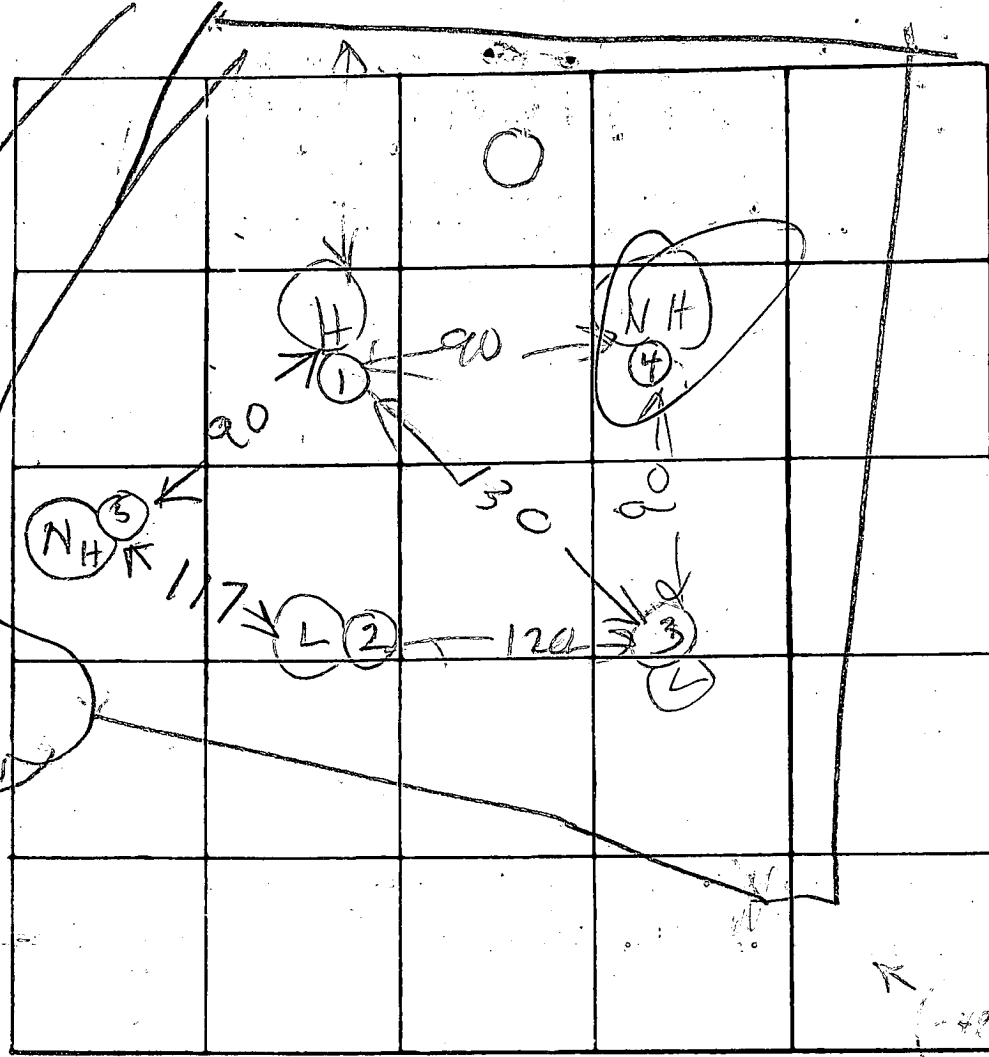
Lot 24
New
Revised
Plat

See plat

Now
24

No Tests
ever
C.B. 9/14/78

Shipped
in 6.00
8 P.M.



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

Unnamed Road

DATE	TEST NO.	DEPTH	PRE-WET		TEST 1" DROP		TIME
			START	STOP	START	STOP	
9/21/78	1 D	12'	1135	1137	1137	1141	4
	1 S	3'	1134	1135	1135	1136	1
	2 V	12'	ALL SAND				
	3 D	13'	1147	1156	1156	1215	19
	3 S	3 1/2'	1146	1148	1148	1151	3
	4 V	11'	TOP OF LAY SAND		3.07		
	5 V	13'	ALL SAND			4	25

Unit 3'

ROCK

7 min
if

REMARKS

TYPE OF SOIL

TESTED BY

ALSO PRESENT

C.B. & V.E.
9/21/78 RD DM FR M. WAKEFIELD

APPLICATION

A 28402

P _____

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICESP. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356DISTRICT 3DATE May 12, 1978TO: 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 Woodmark, Inc.ADDRESS 9267 Balto. Nat'l. Pike PHONE 161-2889

PROPERTY LOCATION:

SUBDIVISION Farside LOT NO. 2524ROAD AND DESCRIPTION Rt. 40 west to left on Rt. 114, left on Folly Quarter, left on
Homewood, 1 mile to property on leftSIZE OF LOT 3 plus acres TYPE BLDG. 4
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

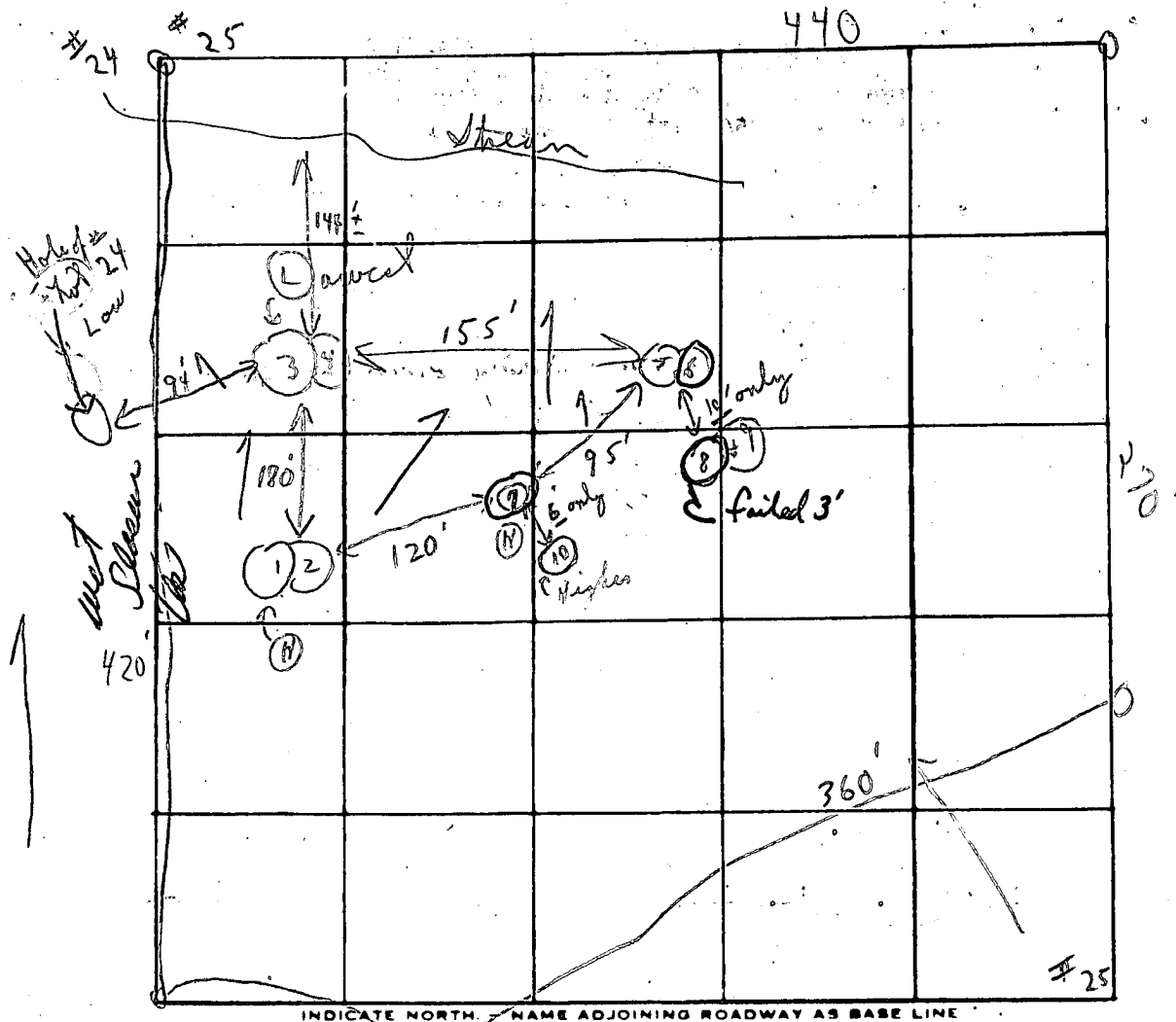
THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



Soil Profile

Below
dry
sandy
brown

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST 1" DROP START	TEST 1" DROP STOP	TIME
7/6/78	1	2'	9:25	9:28	9:28	9:32	4 in
	(H) 2	13'	9:24	9:25	9:25	9:27	2 in
	3	3 1/2'	9:30	9:31	9:31	9:33	2 in
	(L) 4	11 1/2'	9:31	9:36	9:36	9:43	2 in
	5	Visual					
	(L) 6	4'-12 1/2'	Water	12 1/2' for 3 1/4 hours			
	(7)	4'-12'	Next	Water	12' for 4 1/2 hours		
7/7/78	(8) (H)	2'	10:16	10:35	10:35	10:43	10:58 1/4
	9	12'	10:16	10:20	10:20	10:43	23
CBSD	10	12'	Visual	- dry after 1/2 hr			
Waterfield	(Hole 3+4)	1' lower					(1+2) and

Test per
etc.

Hold for wet
season - record
Hold for
supervision
Personnel
dry well at
High
hole and
trenches
are a

Retests
per
Chad
7/7/78

REMARKS dry down 88 5' muddy loam test in over field - some small rose bushes

TYPE OF SOIL

TESTED BY

difference between (8,9)+(10) + (7) 6"-1"

C.B. L. + J. L.

ALSO PRESENT:

Jane man
as 7/5/78
and 7/7/78

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8016

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

STATE OF MARYLAND

PERMIT TO DRILL WELL

please print or type

OEP PERMIT NUMBER

40-81-0487

fill in this form completely

Date Received

9/10/84 - 9:30 AM

OWNER INFORMATION

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FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-0487
 Location of property (road) Foxspur Court
 Subdivision Farside Lot 24 Block Plat Sec.
 Well Driller Joseph Mayne Owner G.V.C. Builders

Depth of well 323'
Distance of measuring point (M.P.) above ground 1'
Static water level (S.W.L.) below M.P. 28'

I. High rate pumping -- reservoir drawdown

Time pump started 8:00 Pumping rate 10 GPM
Total time 30 min to reach pumping water level 16.8 ft. below M.P.

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

[illegible]

WPI

LINE 40" DEEP

PITLESS ADAPTER OK.

6/15/84 C. Williams

C1 3387		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 COLUMNS 3-6 ON ALL CARDS)								COUNTY NUMBER A 28304			
DATE Received		DATE WELL COMPLETED		Depth of Well				PERMIT NO.			
<div><div></div><div></div><div></div><div></div><div></div><div></div></div>		04/08/84		323 (TO NEAREST FOOT)				40-81-0487			
OWNER GVC Builders		last name Foxspur Court		first name		TOWN Elioak		LOT 24			
STREET OR RFD		SUBDIVISION Farside		SECTION		LOT					
WELL LOG Not required for driven wells				GROUTING RECORD				C 3			
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING				WELL HAS BEEN GROUTED (Circle Appropriate Box)				PUMPING TEST			
DESCRIPTION (Use additional sheets if needed)				TYPE OF GROUTING MATERIAL				HOURS PUMPED (nearest hour)			
CEMENT CM BENTONITE CLAY BC				PUMPING RATE (gal. per min. to nearest gal.)				METHOD USED TO MEASURE PUMPING RATE bucket			
NO. OF BAGS 5 NO. OF POUNDS 470				GALLONS OF WATER 30				WATER LEVEL (distance from land surface)			
DEPTH OF GROUT SEAL (to nearest foot)				from 0 ft. to 20 ft.				BEFORE PUMPING			
				(enter 0 if from surface)				WHEN PUMPING			
casing types insert appropriate code below				ST CO STEEL CONCRETE				TYPE OF PUMP USED (for test)			
				PL OT PLASTIC OTHER				A air P piston T turbine			
MAIN CASING TYPE				Nominal diameter top (main) casing (nearest inch)				C centrifugal R rotary O other (describe below)			
S				6 22				J jet S submersible			
OTHER CASING (if used)				diameter inch				PUMP INSTALLED			
depth (feet) from to								DRILLER WILL INSTALL PUMP YES NO			
								IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE			
screen type or open hole				SCREEN RECORD				TYPE OF PUMP INSTALLED			
insert appropriate code below				ST BR HO STEEL BRASS OPEN HOLE				PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE:			
				PL OT PLASTIC OTHER				CAPACITY: GALLONS PER MINUTE (to nearest gallon)			
								PUMP HORSE POWER			
								PUMP COLUMN LENGTH (nearest ft.)			
								CASING HEIGHT (circle appropriate box) and enter casing height			
								LAND SURFACE (nearest foot)			
CIRCLE APPROPRIATE LETTER A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED				SLOT SIZE 1 2 3				LOCATION OF WELL ON LOT			
E ELECTRIC LOG OBTAINED				DIAMETER OF SCREEN (NEAREST INCH)				SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)			
P TEST WELL CONVERTED TO PRODUCTION WELL				GRAVEL PACK							
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.				IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68							
DRILLERS IDENT. NO. 238				OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)							
Joseph L. Mayne				T (E.R.O.S.)				WQ			
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)				70 72				74 75 76			
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)				TELESCOPE CASING LOG INDICATOR				OTHER DATA			

Page 1 of 1
Date 4/10/84

Review 4/26/84 O.R. F.S.

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-0487
Location of property (road) Foxspur Court
Subdivision Fairside Lot 24 Block Plat Sec.
Well Driller Joseph L. Mayne Owner GYC Builders

Depth of well 323
Distance of measuring point (M.P.) above ground 1'
Static water level (S.W.L.) below M.P. 28'

I. High rate pumping -- reservoir drawdown

Time pump started 8:00 Pumping rate 10
Total time 30 min. to reach pumping water level 168 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 $\frac{1}{2}$ gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
8:15	108	6 min.		10
8:30	168	6		10
8:45	168	35		134
9:00	168	35		134
9:15	168	35		134
9:30	168	35		134
9:45	168	35		134
10:00	167	35		134
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11:00	167	35		134
11:15	167	35		134
11:30	167	35		134
11:45	167	35		134
12:00	167	35		134
12:15	167	35		134
12:30	167	35		134
12:45	167	35		134
1:00	167	35		134
1:15	167	35		134
1:30	167	35		134
1:45	167	35		134
2:00	167	35		134
2:15	167	35		134
2:30	167	35		134

C1 3764		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 A-28304	
DATE Received <div style="border: 1px solid black; width: 40px; height: 20px; margin: 2px;"></div>		DATE WELL COMPLETED 01/02/87		Depth of Well 245 (TO NEAREST FOOT)		PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-81-1824	
OWNER STASIONSKI		PETER M.		TOWN ELLICOTT CITY			
STREET OR RFD 1171 FOXSPUR CT.		first name		SECTION 24		LOT 24	
SUBDIVISION EARSIDE							

WELL LOG Not required for driven wells			GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box)			C3				
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING			TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE CLAY BC			PUMPING TEST				
DESCRIPTION (Use additional sheets if needed)	FEET FROM TO		Check if water bearing		NO. OF BAGS 5 NO. OF POUNDS 490			HOURS PUMPED (nearest hour) 3		
					GALLONS OF WATER 20.6			PUMPING RATE (gal. per min. to nearest gal.) 7		
					DEPTH OF GROUT SEAL (to nearest foot) from 0 ft to 245 ft			METHOD USED TO MEASURE PUMPING RATE air		
					(enter 0 if from surface)			WATER LEVEL (distance from land surface) BEFORE PUMPING 56		
SAND STONE GRAY Micaceous			0 16 16 245				WHEN PUMPING 20.5			
					CASING RECORD casing types insert appropriate code below <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">ST</div> <div style="border: 1px solid black; padding: 2px;">CO</div> </div> STEEL CONCRETE <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">PL</div> <div style="border: 1px solid black; padding: 2px;">OT</div> </div> PLASTIC OTHER			TYPE OF PUMP USED (for test) <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">A</div> <div style="border: 1px solid black; padding: 2px;">P</div> <div style="border: 1px solid black; padding: 2px;">T</div> </div> air piston turbine		
					MAIN Nominal diameter Total depth CASING top (main) casing of main casing TYPE (nearest inch) (nearest foot) <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">ST</div> <div style="border: 1px solid black; padding: 2px;">6</div> <div style="border: 1px solid black; padding: 2px;">245</div> </div>			<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">C</div> <div style="border: 1px solid black; padding: 2px;">R</div> <div style="border: 1px solid black; padding: 2px;">O</div> </div> centrifugal rotary other (describe below)		
					OTHER CASING (if used) diameter depth (feet) inch from to			PUMP INSTALLED DRILLER WILL INSTALL PUMP YES NO		
					SCREEN RECORD screen type or open hole insert appropriate code below <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">ST</div> <div style="border: 1px solid black; padding: 2px;">BR</div> <div style="border: 1px solid black; padding: 2px;">HO</div> </div> STEEL BRASS OPEN HOLE <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">PL</div> <div style="border: 1px solid black; padding: 2px;">OT</div> </div> PLASTIC OTHER			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		
DRY WELL 400' FILLED IN WITH CEMENT + DRILLING DATE 01/02/87					CAPACITY GALLONS PER MINUTE (to nearest gallon) <div style="border: 1px solid black; width: 100px; height: 20px;"></div>			PUMP HORSE POWER <div style="border: 1px solid black; width: 100px; height: 20px;"></div>		
					C2			PUMP COLUMN LENGTH (nearest ft.) <div style="border: 1px solid black; width: 100px; height: 20px;"></div>		
					DEPTH (nearest ft.) <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">40</div> <div style="border: 1px solid black; padding: 2px;">23</div> <div style="border: 1px solid black; padding: 2px;">245</div> </div>			CASING HEIGHT (circle appropriate box and enter casing height) <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">+</div> <div style="border: 1px solid black; padding: 2px;">-</div> </div> above below LAND SURFACE (nearest foot)		
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					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)					
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.					GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68			DRILLERS IDENT. NO. 248		
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)					OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)			DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)		
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)					T (E.R.O.S.) W.Q. <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> </div>			TELESCOPE CASING LOG INDICATOR OTHER DATA		

<div style="border: 1px solid black; padding: 5px;"> <div style="display: flex; justify-content: space-between;"> B 1 1567 </div> <div style="font-size: small;"> SEQUENCE NO. (OEP USE ONLY) </div> <div style="font-size: x-small;"> (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS) </div> </div>	<div style="border: 1px solid black; padding: 5px;"> STATE OF MARYLAND PERMIT TO DRILL WELL please print or type </div>	<div style="border: 1px solid black; padding: 5px;"> OEP PERMIT NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;"> NO-81-1824 </div> <div style="font-size: x-small;">fill in this form completely</div> </div>
<div style="border: 1px solid black; padding: 5px;"> OWNER INFORMATION <div style="display: flex; justify-content: space-between;"> Date Received 8 COUNTY </div> <div style="display: flex; justify-content: space-between;"> 15 Last Name Owner First Name </div> <div style="display: flex; justify-content: space-between;"> 36 Street or RFD 55 </div> <div style="display: flex; justify-content: space-between;"> 57 Town 70 State 72 Zip 76 </div> </div>	<div style="border: 1px solid black; padding: 5px;"> LOCATION OF WELL <div style="display: flex; justify-content: space-between;"> 8 COUNTY 21 </div> <div style="display: flex; justify-content: space-between;"> 23 SUBDIVISION 42 </div> <div style="display: flex; justify-content: space-between;"> SECTION LOT </div> <div style="display: flex; justify-content: space-between;"> 52 NEAREST TOWN 71 </div> <div style="display: flex; justify-content: space-between;"> 73 76 77 78 </div> </div>	
<div style="border: 1px solid black; padding: 5px;"> DRILLER INFORMATION <div style="display: flex; justify-content: space-between;"> Driller's Name 77 License No. </div> <div style="display: flex; justify-content: space-between;"> Firm Name Address </div> <div style="display: flex; justify-content: space-between;"> Signature Date </div> </div>	<div style="border: 1px solid black; padding: 5px;"> B 4 <div style="display: flex; justify-content: space-between;"> 1 2 </div> <div style="display: flex; justify-content: space-between;"> DIRECTION OF WELL FROM TOWN (CIRCLE BOX) NEAR WHAT ROAD </div> <div style="display: flex; justify-content: space-between;"> ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH </div> <div style="display: flex; justify-content: space-between;"> 34 37 </div> <div style="display: flex; justify-content: space-between;"> DISTANCE FROM ROAD ENTER FT or MI </div> </div>	
<div style="border: 1px solid black; padding: 5px;"> B 2 WELL INFORMATION <div style="display: flex; justify-content: space-between;"> APPROX. PUMPING RATE (GAL. PER MIN.) 8 12 </div> <div style="display: flex; justify-content: space-between;"> AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 20 </div> </div>	<div style="border: 1px solid black; padding: 5px;"> USE FOR WATER (CIRCLE APPROPRIATE BOX) <div style="display: flex; justify-content: space-between;"> <input checked="" type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) </div> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="checkbox"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) </div> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT) </div> </div>	
<div style="border: 1px solid black; padding: 5px;"> <div style="display: flex; justify-content: space-between;"> APPROXIMATE DEPTH OF WELL 24 28 </div> <div style="display: flex; justify-content: space-between;"> APPROXIMATE DIAMETER OF WELL NEAREST INCH </div> </div>	<div style="border: 1px solid black; padding: 5px;"> NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL <div style="display: flex; justify-content: space-between;"> COUNTY NAME COUNTY NO. </div> <div style="display: flex; justify-content: space-between;"> OEP SIGNATURE STATE HEALTH INSERT S </div> <div style="display: flex; justify-content: space-between;"> DATE ISSUED EXP. DATE </div> <div style="display: flex; justify-content: space-between;"> NORTH GRID EAST GRID </div> </div>	
<div style="border: 1px solid black; padding: 5px;"> METHOD OF DRILLING (circle one) <div style="display: flex; justify-content: space-between;"> BORED (or Augered) JETTED Jetted & DRIVEN </div> <div style="display: flex; justify-content: space-between;"> AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary) </div> <div style="display: flex; justify-content: space-between;"> CABLE REverse-ROTary Drive-POINT </div> <div style="display: flex; justify-content: space-between;"> other </div> </div>	<div style="border: 1px solid black; padding: 5px;"> 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 <div style="display: flex; justify-content: space-between;"> E N </div> <div style="display: flex; justify-content: space-between;"> 824 515 </div> <div style="display: flex; justify-content: space-between;"> 000 000 </div> </div>	
<div style="border: 1px solid black; padding: 5px;"> REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX) <div style="display: flex; justify-content: space-between;"> <input 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 </div> <div style="display: flex; justify-content: space-between;"> <input checked="" type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY <input type="checkbox"/> THIS WELL WILL DEEPEIN AN EXISTING WELL </div> <div style="display: flex; justify-content: space-between;"> PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) 41 52 </div> </div>	<div style="border: 1px solid black; padding: 5px;"> DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION <div style="text-align: center;"> </div> </div>	
<div style="border: 1px solid black; padding: 5px;"> Not to be filled in by driller (OEP USE ONLY) <div style="display: flex; justify-content: space-between;"> APPROP. PERMIT NUMBER 54 G A P 63 </div> <div style="display: flex; justify-content: space-between;"> FORCE WRITE INITIALS IN BOX PERMIT NO. </div> <div style="display: flex; justify-content: space-between;"> 67 68 70 71 72 73 74 75 76 77 78 79 </div> </div>		
<div style="border: 1px solid black; padding: 5px;"> SPECIAL CONDITIONS </div>		

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

28304

New Installation X Replacement 19 Ingleside ave
Baltimore, md 21228
Name of Installer MARINO PLUMBING & HEATING INC. Telephone 744-5615
License number
Certified Well Pump Installer Well Driller Registered Plumber X
Name of Property Owner STASIOWSKI Telephone 997-6394 (301)
Subdivision FAR SIDE Lot # 24 Well tag # HO-811-824
Site Address 11711 FOXSPUR COURT

Pump 19.20
1. Type 7564
a. Deep well jet
b. Shallow well jet
c. Submersible X
2. Make MYERS
3. Model # 5272 J74P
4. Capacity 4 GPM
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 X Cable guards X Other

Motor
1. Horsepower 3/4
2. RPM 3450
3. Voltage 210
a. 110
b. 220 X

Pitless Adapter
1. Make HARVARD
2. Model # PT800
3. Depth 42"

Tank
1. Capacity 120 gal.
2. Pressure relief valve? YES

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

Well data
1. Depth 245 ft.
2. Yield 4 GPM
3. Static water level 37 ft.
4. Will water supply be disinfected by installer? YES

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

Signature of Applicant: Joseph D. Marino

Date: 1-5-87

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