

COUNTY

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|--|--|--|--|
| B-1 1 2 3 6 09340 | SEQUENCE NO. (MDE USE ONLY) 538063B | STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type | STATE PERMIT NUMBER HO-95-2414 fill in this form completely |
| Date Received (APA) 09/11/12 8 MM DD YY 13 | | LOCATION OF WELL B 3 8 COUNTY Howard 21 23 SUBDIVISION Owings Property 42 SECTION 19 LOT 48 50 52 NEAREST TOWN Highland 71 | |
| OWNER INFORMATION 15 Last Name Stewart Owner Kiet Homes First Name Homes 34 36 Street or RFD 7090 Samuel Morse Dr 55 57 Town Columbia, md 70 State 21046 Zip 76 | | DRILLER INFORMATION Driller's Name Allen Compton M 5 D 0909 76 License No. 81 Firm Name Eagles Well Drilling, LLC Address P.O. Box 262 Woodbine, md 21797 Signature Allen Compton Date 6-29-12 | |
| WELL INFORMATION B 2 1 2 APPROX. PUMPING RATE (GAL. PER MIN.) 5 8 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500 14 20 | | SOURCES OF DRILLING WATER 1. Winding Stream Way 2. Highland Rd 3. Highland Rd 11 STREET ADDRESS 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH <input checked="" type="checkbox"/> N <input type="checkbox"/> W <input type="checkbox"/> E <input type="checkbox"/> S SOUTH <input type="checkbox"/> S <input type="checkbox"/> W <input type="checkbox"/> E <input type="checkbox"/> N 34 250 37 DISTANCE FROM ROAD 21 FT ENTER FT OR MI 38 39 TAX MAP: 21 BLK: 12 PARCEL | |
| USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION <input type="checkbox"/> F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> I INDUSTRIAL, COMMERCIAL, DEWATERING <input type="checkbox"/> P PUBLIC WATER SUPPLY WELL <input type="checkbox"/> T TEST, OBSERVATION, MONITORING <input type="checkbox"/> O OPEN LOOP GEOTHERMAL <input type="checkbox"/> C CLOSED LOOP GEOTHERMAL | | NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL Howard A515214 13 COUNTY NAME COUNTY NO. STATE SIGNATURE INSERT S 41 DATE ISSUED 10/09/2012 K-K 10/9/13 43 MM DD YY 48 CO SIGNATURE EXP. DATE | |
| APPROXIMATE DEPTH OF WELL 300 FEET 24 28 | | 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 | |
| APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST INCH | | METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jetted & DRIVEN 30 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary) 37 CABLE REVerse-ROTary Drive-POINT other | |
| REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> N THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 <input type="checkbox"/> S 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"/> D THIS WELL WILL DEEPEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) 41 52 | | Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER G PERMIT No. HO-95-2414 70 71 72 73 74 75 76 77 78 79 | |
| SPECIAL CONDITIONS NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED Radium Sample required at yield test. | | | |

Page 1 of 1
Date 11-09-12

Review _____

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 95-2414
Location of property (road) Winding Stream Way
Subdivision Owings PRO. Lot 19 Block _____ Plat _____ Sec. _____
Well Driller Eagles 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. 15'

I. High rate pumping -- reservoir drawdown

Time pump started 11:30 Pumping rate 8.5
Total time 30 min to reach pumping water level 31 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 #1 gallon bucket | FLOW METER READING (if used) | CALCULATED FLOW (gallons per minute) |
|-------------------------------|------------------------|--|------------------------------|--------------------------------------|
| 11:30 | 15' | 7 | | 8.5 |
| 11:45 | 22 | 7 | | 8.5 |
| | | | | |
| 12:00 | 31 | 7 | | 8.5 |
| 12:15 | 31 | 7 | | 8.5 |
| 12:30 | 31 | 7 | | 8.5 |
| 12:45 | 31 | 7 | | 8.5 |
| 1:00 | 31 | 7 | | 8.5 |
| 1:15 | 31 | 7 | | 8.5 |
| 1:30 | 31 | 7 | | 8.5 |
| 1:45 | 31 | 7 | | 8.5 |
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| 2:15 | 31 | 7 | | 8.5 |
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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# MSD 226

*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 #: 410 984-9023
Subdivision: Owings Property Lot #: 19 Well Tag #: HO-95-2414
Site Address: 6811 Winding Stream Way
Highland, Md 20777

| <u>Submersible Pump Data</u> | <u>Pitless Adapter</u> | <u>Well Cap and Electric Conduit</u> |
|---|------------------------------|---|
| Make: <u>Grundfos</u> | Make: <u>Campbell</u> | Two piece watertight cap: <u>YES</u> |
| Model #: <u>1550E07-180</u> | Model #: <u>N/A</u> | Screened, vented well cap: <u>YES</u> |
| Pump Capacity <u>7</u> GPM | Depth: <u>26"</u> (36" min) | Cap secured to casing: <u>YES</u> |
| Well Yield: <u>10</u> GPM | NSF/WSC approved: <u>YES</u> | Conduit min 1 1/2" B.G.: <u>YES</u> |
| Depth of well encountered at time of pump installation: <u>300'</u> (feet) | | Conduit secured to well cap: <u>YES</u> |
| 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 <u>inside of well casing</u> <u>N/A</u> | | |

Piping to house

Type: 1" poly pipe

PSI: 100 (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): 6'

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: 7-22-14

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

Date Insp. Requested: _____ Date Insp. Approved: 7/23/14 Inspector: BB

Inspection Data: Pitless adapter watertight & water supply line at least 36" below grade ✓

Two piece cap installed and attached to casing securely ✓

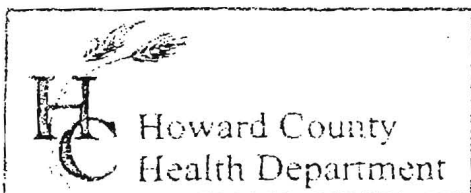
Elec. conduit extends at least 18" below grade/attached to cap properly ✓

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 ✓



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

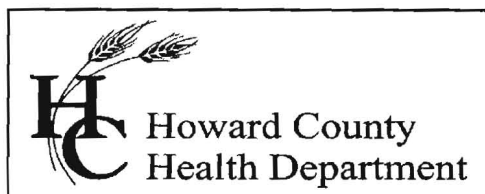
TO ALL INTERESTED PARTIES

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 Bolazn Escalante, Engineers
(professional land surveyor or company employing professional land surveyors)
on 8-38-12 (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



Bureau of Environmental Health

8930 Stanford Blvd., Columbia, MD 21045
Main: 410-313-6300 | Fax: 410-313-6303
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 – February 2, 2015

September 2, 2014

Homeowner

6811 Winding Stream Way, Lot #19
Highland, Maryland 20777

**RE: Owings Property, Lot #19
6811 Winding Stream Way
Building Permit: B13003553
Well Permit: HO-95-2414**

Dear Homeowner:

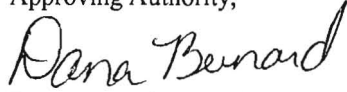
This is to advise you that the septic system installation and water well construction for the above referenced property have been inspected and approved. Final approval of the septic system was granted on **8/06/2014**. Final approval of the well line connection to the dwelling was granted on **7/23/2014**. The well construction was completed on **11/09/2012**. Water samples were collected on **8/8/2014**.

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. 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-95-2414. 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 Maryland certified water 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 cursive script that reads "Dana Bernard".

Dana Bernard, R.E.H.S.
Environmental Sanitarian
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 #: 95571 Account #: 1930
Reference: Steurt & Kret Lot 19 Company: Fogle's Well Drilling
Location: 6811 Winding Stream Lane Requested By: Dave Fogle
Highland, MD 20777 Source: Well Water
Date/ Time Collected: 8/8/2014 1143 Site: Pressure Tank
Date/Time Rec'd: 8/8/2014 1535 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 7.0
Collected By: J. Fogle 1974JF Well #: HO-95-2414

| PARAMETERS | RESULTS | UNITS | REFERENCE | METHOD | DATE/TIME/ANALYST |
|--------------------------------|---------|-------------|-----------|--------------------|-----------------------|
| Bacteria, Coliform, Total, MPN | <1.0 | MPN/ 100 ml | <1.0 | SM18 9223 | 8/9/2014 / 1600 / BCD |
| Bacteria, E. coli, MPN | <1.0 | MPN/ 100 ml | <1.0 | SM18 9223 | 8/9/2014 / 1600 / BCD |
| Nitrate | <1.0 | mg/L | 10 | 601 | 8/8/2014 / 1600 / CRS |
| Turbidity | 6.00 | NTU | <10 | SM18 2130B | 8/8/2014 / 1630 / CRS |
| Sand | NS | mg/L | 5 | Visual/Gravimetric | 8/8/2014 / 1630 / CRS |

OK
DB
8-2-14

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 pH tested in lab, chlorine level tested on site
- 8 Sample collected by client, analyzed as received

Reason for Test : Use & Occupancy

Building Permit # : B13003553

Date Reported: 8/11/2014



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 19
Winding Stream Way
Well Tag: HO - 95 - 2414

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 8.0 ± 1.9 picocuries/liter (pCi/L), while the **Gross Beta** level was 10.0 ± 2.1 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,

A handwritten signature in black ink, appearing to read 'Bert Nixon'.

Bert Nixon, Director
Bureau of Environmental Health

Enclosure

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

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: 952414BB No. B: _____ Field Blank Bottle No. 1: 17419 No B: _____

Plant/Site Name: Owings Property - Lot 19 County: _____

Sample Source: Winding Stream Way Location: HO-95-2414
(well no, lab sink, sample tap, etc.)

County: ☒ 1 ☒ 3 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: _____ a.m. 12:30 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

W/ BOX

STREAM WAY

PUBLIC SEWERAGE & UTILITY EASEMENT (10'x20')

DUPLEX GRINDER N 552007.19 E 1322299.33

CABLE BOX LOCATION W/ CONDUCTING ROD STA. 20+31

LOT 18 36,724.2 SF±

FF=514.0
BF=504.6

IN-LINE FLUSHING CONNECTION STA. 20+00

CABLE BOX LOCATION W/ CONDUCTING ROD STA. 18+31

LOT 19 37,154.4 SF±

FF=510.3
BF=508.6

1 1/4" BALL VALVE W/ VALVE BOX

PUBLIC SEWERAGE & UTILITY EASEMENT (10'x20')

DUPLEX GRINDER N 552400.75 E 1322298.61

SPRING HEAD

(Not to Scale - See percent)
Well box ok
10/12

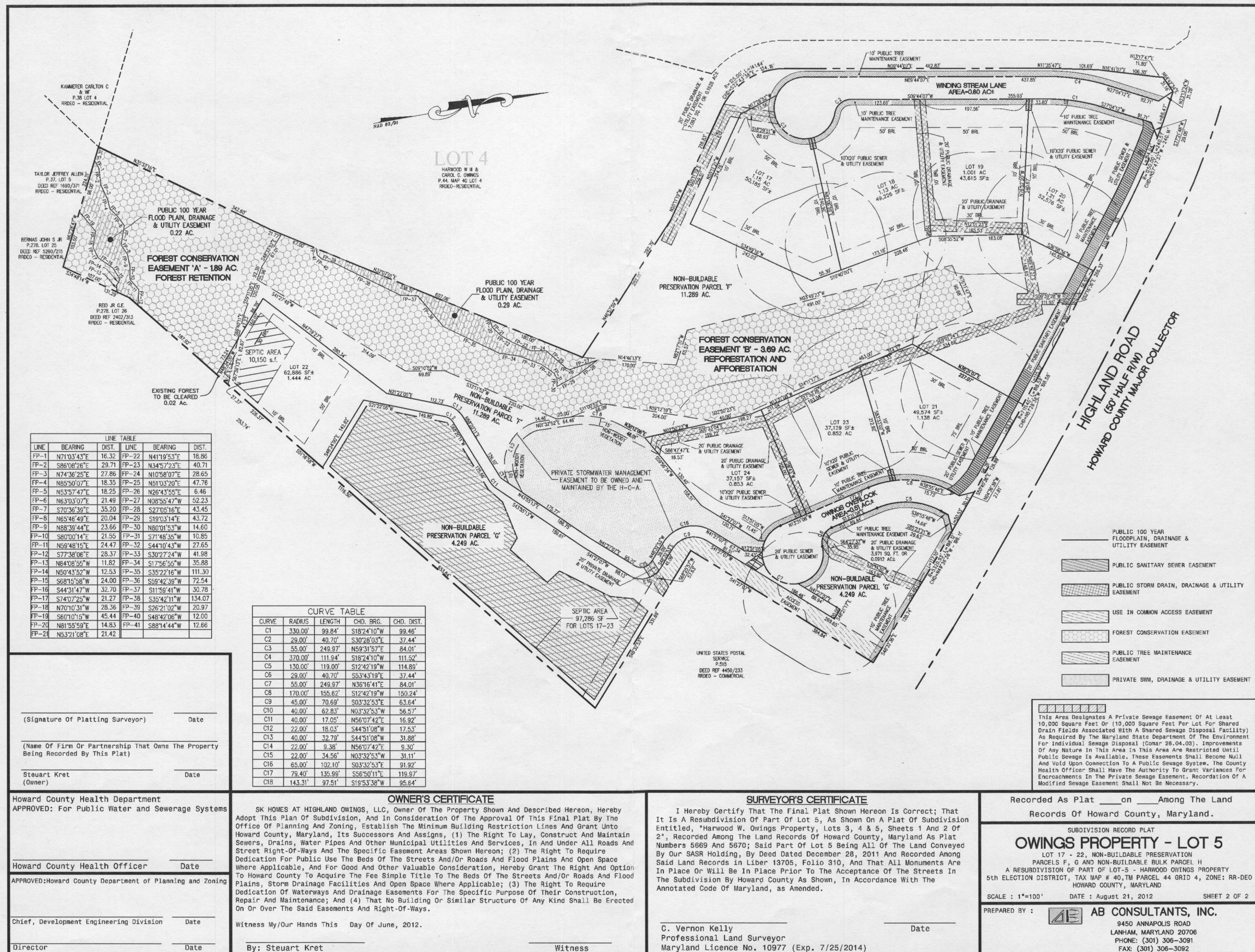
4" SHC @ 2.0% SLOPE

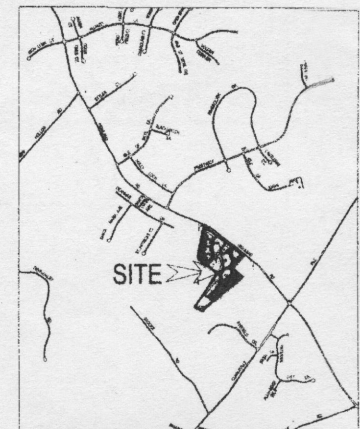
FF=510.6
BF=508.6

LOT 20 43,420

Lot 19

N 133° 47' E
141.80'
N 16° 41' 07" E
106.30'





VICINITY MAP
SCALE: 1" = 2000'

GENERAL NOTES

1. ALL SHOWN HOUSE SITES COMPLY WITH MINIMUM BUILDING RESTRICTION REGULATIONS.
2. THE LOTS SHOWN HEREON COMPLY WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREAS AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT.
3. THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF 10,000 SQUARE FEET AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWERAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWER IS AVAILABLE. THESE EASEMENTS SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR ADJUSTMENTS TO THE PRIVATE SEWERAGE EASEMENT. RECORDATION OF A MODIFIED SEWERAGE EASEMENT PLAT SHALL NOT BE NECESSARY.
4. THIS AREA DESIGNATES THE PRIVATE SEWERAGE EASEMENT REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT FOR SHARED SEWERAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWER IS AVAILABLE. THESE EASEMENTS SHALL BE NULL AND VOID UPON CONNECTION TO A PUBLIC SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR ADJUSTMENT TO THE PRIVATE SEWERAGE EASEMENT. RECORDATION OF A MODIFIED SEWERAGE EASEMENT SHALL NOT BE NECESSARY. APPROVAL OF THE NUMBER OF LOTS/ROOMS IS SUBJECT TO PRELIMINARY PLAN APPROVAL. NINE (9) LOTS REQUIRE 90,000 S.F. (110,000 S.F. PROVIDED).
5. EXISTING WELLS AND/OR SEWERAGE EASEMENTS WITHIN 100 FEET OF THE PROPERTY HAVE BEEN SHOWN FROM THE BEST AVAILABLE INFORMATION.
6. ALL WELLS SHALL BE DRILLED PRIOR TO FINAL PLAT RECORDATION. IT IS THE DEVELOPERS RESPONSIBILITY TO SCHEDULE THE WELL DRILLING PRIOR TO FINAL PLAT SUBMISSION. IT WILL NOT BE CONSIDERED "GOVERNMENT DELAY" IF THE WELL DRILLING HOLDS-UP THE HEALTH DEPARTMENT SIGNATURE OF THE RECORD PLAT.
7. A GROUND WATER APPROPRIATION PERMIT MUST BE ISSUED PRIOR TO SUBMITTAL OF RECORD PLAT FOR SIGNATURE.
8. THE CONTOURS AND ELEVATIONS SHOWN HEREON ARE BASED ON AERIAL PHOTOGRAPHY BY AIR SURVEY PHOTOGRAMMETRIC MAPPING SERVICES, MARCH 18, 2001.
9. THE BOUNDARY LINES SHOWN HEREON ARE BASED ON A BOUNDARY SURVEY BY DEWBERRY & DAVIS, LLC, JANUARY 2002.
10. THE SPECIFICATIONS FOR THE DRAIN FIELDS WILL BE DESIGNED IN ACCORDANCE WITH HEALTH DEPARTMENT CRITERIA ADOPTED ON SEPTEMBER 1, 2002.
11. ALL SHARED SEPTIC SYSTEM PERC HOLES AND THE DESIGN OF THE SYSTEM ITSELF ARE DEPENDENT UPON MOUNDING STUDY RESULTS.
12. APPLICATION TO No. 515214 PERC LOCATION ARE BASED ON PERC TESTING DATED APRIL 23, 2001.

- LEGEND :**
- EXISTING CONTOURS
 - PROPERTY LINE
 - EXISTING TREELINE
 - PROP. WELL LOCATION
 - GENERIC HOUSE LAYOUT
 - PROP. SEPTIC FIELD
 - PROPOSED SHARED SEPTIC AREA
 - FOREST CONSERVATION EASEMENT
 - PERC TEST HOLE PASSED / SOIL BORING
 - PERC HOLE FAILED



I, CERTIFY THAT THE INFORMATION SHOWN HEREON IS BASED ON FIELD WORK PERFORMED BY ME OR UNDER MY DIRECT SUPERVISION, AND IS CORRECT, TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Erik Marks 2/19/08
ERIK MARKS, PROPERTY LINE SURVEYOR DATE

APPROVED: FOR PRIVATE WATER AND A SHARED SEWERAGE SYSTEMS FOR LOTS 17-21, FUTURE LOTS 23 & 24, AND FOR PRIVATE WATER AND PRIVATE SEWERAGE FOR LOT 22: HOWARD COUNTY HEALTH DEPARTMENT.

Peter Deilensen 2/22/2008
HOWARD COUNTY HEALTH OFFICER DATE

OWNER / DEVELOPER:
RUNNING BROOK, LLC
6900 WOODSIDE COURT
COLUMBIA, MD. 21046
ATTN: TRACI THOMPSON
PHONE: (410) 995-6738
FAX: (410) 381-6747

PLAN
SCALE: 1" = 100'

REVISED PERCOLATION CERTIFICATION PLAT

OWINGS PROPERTY, LOT 5
LOTS 17-22, NON-BUILDABLE PRESERVATION PARCEL F & G
AND NON-BUILDABLE BULK PARCEL H
5th ELECTION DISTRICT HOWARD COUNTY, MD.

DATE: 02-04-08

SHEET 1 OF 1