



Building Permit Application

Howard County Maryland
Department of Inspections, Licenses and Permits
3430 Court House Drive
Permits: 410-313-2455
www.howardcountymd.gov

Date Received: _____

CB/41208

Permit No.: 14003917

Building Address: 17008 Frederick Rd
 City: MD State: MD Zip Code: 21771
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: _____
 Section: _____ Area: _____ Lot: _____
 Tax Map: _____ Parcel: _____ Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

Property Owner's Name: ROSE L. MOSE
 Address: 17008 Frederick Rd
 City: MD State: MD Zip Code: 21771
 Phone: _____ Fax: _____
 Email: rose.l.mose@mda.com

Applicant's Name & Mailing Address, (If other than stated herein)
 Applicant's Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Existing Use: Commercial
 Proposed Use: Commercial
 Estimated Construction Cost: \$ 500,000
 Description of Work: new 2-story commercial building

Contractor Company: INDYPR
 Contact Person: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 License No.: _____
 Phone: _____ Fax: _____
 Email: _____

Occupant or Tenant: _____
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Engineer/Architect Company: _____
 Responsible Design Prof.: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Commercial Building Characteristics	Residential Building Characteristics	
Height:	<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories:	Depth	Width
Gross area, sq. ft./floor:	1 st floor:	
	2 nd floor:	
Area of construction (sq. ft.):	Basement:	
	<input type="checkbox"/> Finished Basement	
Use group:	<input type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
Construction type:	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:	
<input type="checkbox"/> Structural Steel	Multi-family Dwelling	
<input type="checkbox"/> Masonry	No. of efficiency units:	
<input type="checkbox"/> Wood Frame	No. of 1 BR units:	
<input type="checkbox"/> State Certified Modular	No. of 2 BR units:	
	No. of 3 BR units:	
	Other Structure:	
	Dimensions:	
<input checked="" type="checkbox"/> Roadside Tree Project Permit	Footings:	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Roof:	
Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Utilities	
Water Supply	
<input checked="" type="checkbox"/> Public	
<input type="checkbox"/> Private	
Sewage Disposal	
<input type="checkbox"/> Public	
<input type="checkbox"/> Private	
Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Heating System	
<input type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
Sprinkler System:	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number:	
Building Shell Permit Number:	

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature _____

Print Name _____

Email Address _____

Date _____

Title/Company _____

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

PLEASE WRITE NEATLY & LEGIBLY

-FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	3/12/15	H. Ose...

DPZ SETBACK INFORMATION	
Front:	
Rear:	
Side:	
Side St.:	
All minimum setbacks met?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Lot Coverage for New Town Zone:	
SDP/Red-line approval date:	

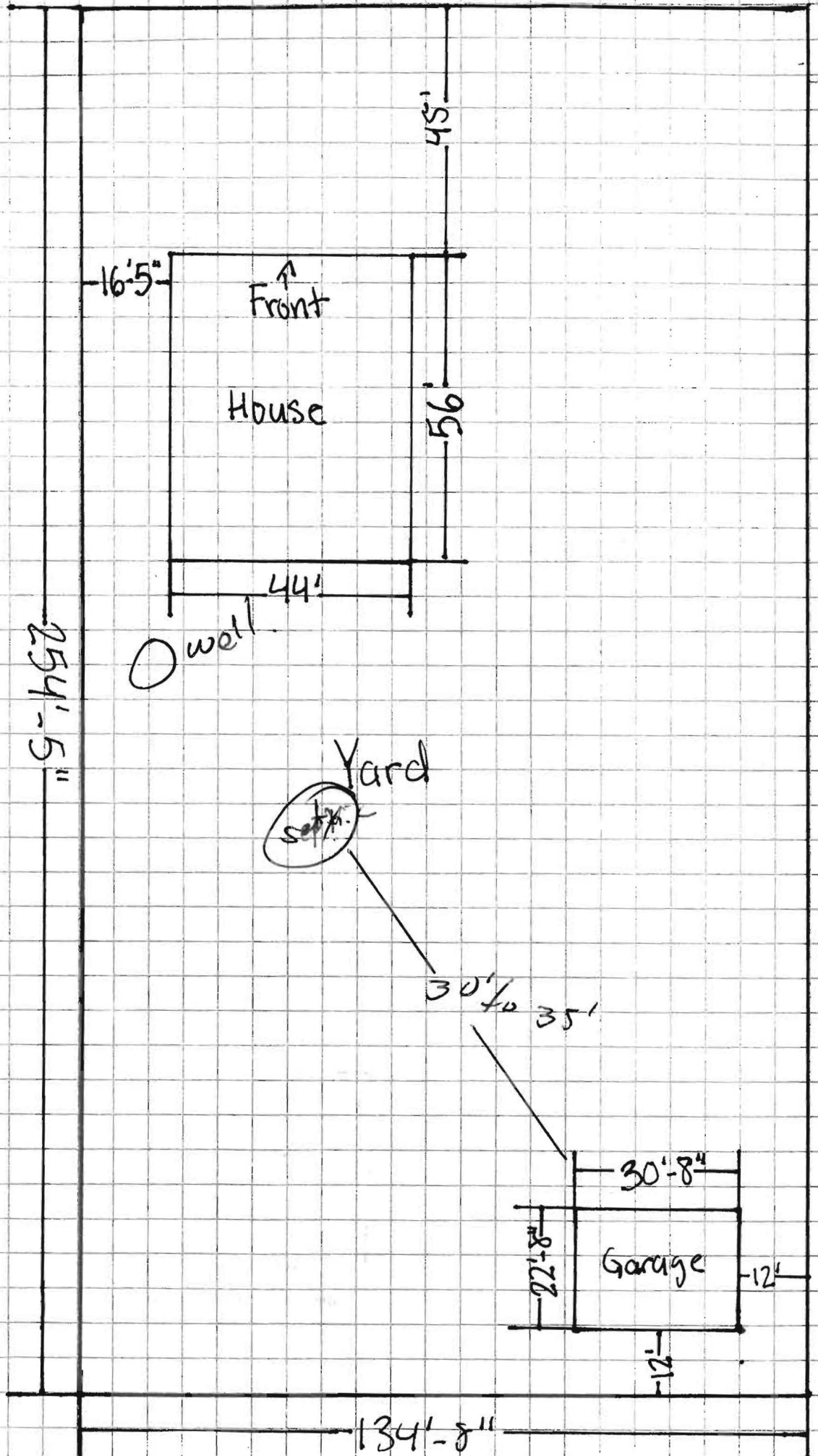
Filing Fee	\$
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	#

Is Sediment Control approval required for issuance? Yes No
 CONTINGENCY CONSTRUCTION START

Distribution of Copies: White: Building Officials Green: PSZA,Zoning Yellow: PSZA,Engineering Pink: Health Gold: SHA

Street

1" = 1mm





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

Twitter: HowardCoHealthDep

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

March 11, 2015

Jose R. Lopez
17008 Frederick Road
Mt. Airy, MD 21771

RE: Waiver Approval
17008 Frederick Road
Mt. Airy, MD 21771

Mr. Lopez:

This letter is being issued in response to your waiver request. This agency will grant **approval** of the waiver to the required Percolation Certification Plan and perc testing to establish a septic reserve area as required by the *Howard County Code, Subtitle 8, Section 3.805*. The waiver has been approved on the basis that the impact to the area for future on-site sewage disposal has already been impacted by the shed that was constructed without a permit, however it appears that there is still undisturbed area available for on-site sewage disposal system repairs. Please note that any future addition of living space or other property improvements will likely require testing and a percolation certification plan. Any deviations from the site plan submitted with the building permit will be subject to further review by this Department.

Any questions regarding this decision may be directed to the Well and Septic Program of the Howard County Health Department.

Respectfully,

A handwritten signature in black ink that reads 'Michael J. Davis'.

Michael J. Davis
Assistant Director
Bureau of Environmental Health

Jose R. Lopez

17008 Frederick Rd

Mt. Airy, MD 21771

To whom it may concern

This is regarding the well up date, I want to ask you for a waiver, because I do not have the money to pay for the job, the company talk me it will be about \$ 2000.00 to comply what you ask me to do for the up date. I am sorry to ask you for this by wright after a built the shed, I lost one of my job and do to that they closed all my credit card and right now I still own \$1900.00 of the taxes and I have an till April to pay them and the company that not take payment, I am sorry by due to the fact that the building it's up in me not knowing that I needed a permit to construct shed, I will do in the future the up date, by right now I not in a position to do by if any other way to get the permit. I hope you will understand my situation.

Thank you for your attention on this matter if you have any if you need any further information please don't hesitate in contacting me

Yours truly

Jose R. Lopez.

3/11/15
Approved
J.R. Lopez

Jose R. Lopez
17008 Frederick Rd
Mt. Airy, MD 21771

To whom it may concern

This is regarding a shed that I constructed in the back of my house about two years ago I constructed a shed for storage things like Snowplow, blower and storage for old furniture and stuff from my house I also constructed a working table. In the past I had help my Neighbors to construct their sheds when I constructed my they help me as well my Shed it has been constructed for almost 2 years now. This year we decided to put siding on the shed therefore we bought the insulation paper Tyvek when we put up the Tyvek we found a note that says to stop construction and get a permit to show that I could have enough space for my septic tank and my ground water included in his letter I have enclosed a draft of my property to show that I do have enough space to construct another septic tank if need be I also have enough space to drill for groundwater well. I did not know that I needed a permit to construct a shed since none of my neighbors did, this building it has been like this for about two years I am requesting this time a waiver due to the fact that the building it's up in me not knowing that I needed a permit to construct my shed Thank you for your attention on this matter if you have any question, if you need any further information please don't hesitate in contacting me

Yours truly

Jose R. Lopez.

Oswald, Hank

From: Oswald, Hank
Sent: Thursday, March 12, 2015 8:56 AM
To: joserigo68@yahoo.com
Subject: B14003917_17008 Frederick Road

Mr. Lopez:

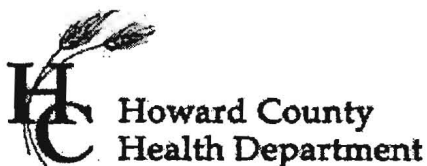
Build Permit # **B14003917** has been *approved* by the Health Department. Please be aware of the following condition placed on your property by the Health Department: **"Prior to any future building permit approval on this property, the Health Department will require the existing well to be upgraded or replaced to meet current construction standards."**

Should you have any questions, please don't hesitate to ask.

Regards,

Hank

Hank Oswald, L.E.H.S.
Howard County Health Department
Bureau of Environmental Health
Well & Septic Program
410.313.1786



Bureau of Environmental Health
8930 Stanford Blvd
Columbia, MD 21045
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

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

March 10, 2015

Mr. Jose Lopez
17008 FREDERICK ROAD
MOUNT AIRY, MD 21771

**RE: Water Sample Results
17008 FREDERICK ROAD**

Dear Mr. Jose Lopez,

We have received the results from the testing of the water sample(s) taken from the above referenced property on March 03, 2015. A description of the results and the established standards for each test is included below. Standards such as maximum contaminant levels (MCL), secondary maximum contaminant levels (SMCL), and drinking water equivalency levels (DWEL) are established by the EPA and other agencies to provide a reference for determining when action should be taken. These standards help to improve the overall quality of your water or ensure that steps are taken to treat the water to prevent you and your family from getting sick. Typically, no water is completely free of contamination but you should be concerned if the level of contamination for a particular test exceeds the standard.

The results from the **Bacteria** testing found that your well water sampled from the bathroom faucet contains no bacteria at this time and is considered safe for all uses. According to drinking water standards there should be no bacteria present.

A sample was collected to determine the **Nitrate** level in your water supply. The nitrate level was 9.40 parts per million. The MCL for nitrate is 10.0 parts per million.

Please contact the Health Department at (410) 313-1773 between 8:30 a.m. and 4:30 p.m., Monday through Friday if you have any questions regarding these test results.

Sincerely,

Ramar Martin, R.S.
Community Hygiene Program

Enclosures

SEND REPORT TO:
 Howard County Health Department
 Bureau of Environmental Health
 8930 Stanford Blvd.
 Columbia, Maryland 21045
 PHONE NO.:

STATE OF MARYLAND
 DEPARTMENT OF HEALTH AND MENTAL HYGIENE
 LABORATORIES ADMINISTRATION
 201 West Preston Street, Baltimore MD 21201
 Robert A. Myers, Ph.D., Director

LABORATORY:
 CENTRAL (410) 767-6145
 E. SHORE REGIONAL (410) 219-9005
 W. MD REGIONAL (301) 759-5115

BACTERIOLOGICAL DRINKING WATER REPORT

Category Code: 4F

Lab No.: 009404

FIELD RECORD *EMAIL RESULTS TO: JOSE RIGGS @ YAHOO.COM*

Sample Type: Community Non-Community Non-Transient Private Check Sample C.O.P. Bottled Water OTHER: _____

Source: Jose Lopez
 Location: 17008 Frederick Rd, Mt Airy
 Iced: Yes No Treated: Yes No
 Date Collected: 3/3/2015 Time Collected: 9:00 a.m. p.m.
 Collector Name: BOLESIAV SHKLYAV Collector ID No.: 3179 BS
 Collector Tel. No.: 410-313-1787 Bottle No.: HC17008 County: HOWARD

Test Requested:
 Quantitative: Colilert®-QT Enterolert®
 P/A: Colilert® Enterolert®
 Multiple Tube Fermentation: MTF MTF (A1 Method-Source Waters Only)
 Heterotrophic Plate Count (HPC-Pour Plate Method)

OTHER: _____

COMMENTS: BATH ROOM 2-ND FLOOR

LABORATORY RECORD (DHMH Use Only)

Test Method(s): SM 9223 Colilert® SM 9223 Colilert®QT SM 9223 Colilert®-18
 SM 9221 B (MTF) SM 9221 B, E (MTF) SM 9221 E (A1)
 (Check all that apply) SM 92215B (HPC) Enterolert® ASTMD 6503-99
 OTHER: _____

Temperature Control: 5
 Thiosulfate: Present Absent Undetermined

P/A TEST (Colilert®/Enterolert®) QUANTITATIVE TEST (Colilert®-QT/Enterolert®) HETEROTROPHIC PLATE COUNT

100 mL sample	MPN/100mL	Dilution	100 mL sample	# Positive wells	MPN/100 mL	Plate A:	Plate B:
Total coliforms		<input type="checkbox"/> 1:10	Total coliforms	0	<1		
E. coli		<input type="checkbox"/> 1:100	E. coli	0	<1		
Enterococci		<input type="checkbox"/> 1:1000	Enterococci				

Incubate 24.48.72 hrs/HPC (HPC/ml) = _____

MAR 3'15 PM 2:18
 RECEIVED
 MAR 3'15 PM 2:46
 PLACED IN INCUBATOR
 MAR 4'15 PM 2:58
 RESULTS READ/REPORTED

RECEIVED

PRESUMPTIVE MTF TEST

ml of Sample	10 mL
Gas/24h	
Gas/48h	

MAR 9 2015

RESULTS

No. of Positives (+)	MPN/100mL

CONFIRMED MTF TEST (MTF/A1 Method)

ml of Sample	10 mL
Total Coliforms	
Fecal Coliforms	

COMMUNITY HYGIENE PROGRAM

SAMPLE INVALIDATION:

Sample Rejection
 Laboratory Accident
 Other: _____

RESAMPLE REQUIRED:
 YES NO

DATE: _____

ANALYZED BY/DATE: L. Taylor 3-4-15 REVIEWED BY/DATE: J. Adam 3-4-15
 REMARKS: _____



State of Maryland
DHMH-Laboratories Administration
Division of Environmental Chemistry
INORGANICS ANALYTICAL LABORATORY
201 W. Preston Street, Baltimore, Maryland 21201
Robert Myers, Ph.D., Director



Certificate of Analysis

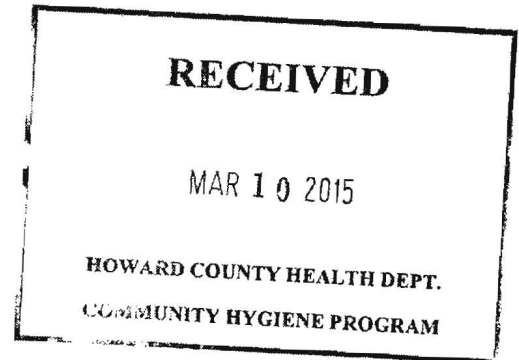
HOWARD CO ENVIRONMENTAL HLTH
8930 STANFORD BLVD
COLUMBIA, MD 21045

Lab Project NoE15002721 Date Coll. 03/03/2015 Date Received 03/03/2015 Submitted By: Cook

Field ID: HC 17008
Lab No.: E15002721003

<u>Analyte</u>	<u>Method</u>	<u>Result</u>	<u>Units</u>	<u>Date Analyzed</u>
Nitrate + Nitrite, as N	EPA 353.2	9.40	mg N/L	03/06/2015

Comments:



Approved by: *Shahin Aneli*

Approval date: 03/09/2015

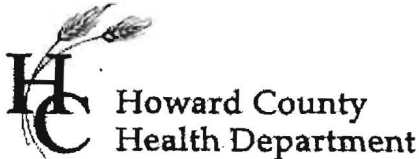
*The following methods are included in our A2LA Scope of Accreditation: EPA150.1, EPA 353.2, EPA 375.2, SM4500F C, SM 4500-CN G & QCM-CN, QCM-CN.

This document contains confidential health information that is privileged, confidential and exempt from disclosure under law. If you have received this information in error, please call (410) 767-6190 and arrange for return or destruction.

Telephone: (410) 767 - 6190

Fax: (410) 225 - 3175

S:\EnviroFinal-InorganicsA.rpt



Bureau of Environmental Health
8930 Stanford Blvd
Columbia, MD 21045
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

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

January 29, 2015

Mr. Jose Lopez
17008 FREDERICK ROAD
MOUNT AIRY, MD 21771

RE: Water Sample Results
17008 FREDERICK ROAD
Invoice #: 30501

Dear Mr. Lopez,

We have received the results from the testing of the water sample(s) taken from the above referenced property on January 13, 2015. A description of the results and the established standards for each test is included below. Standards such as maximum contaminant levels (MCL), secondary maximum contaminant levels (SMCL), and drinking water equivalency levels (DWEL) are established by the EPA and other agencies to provide a reference for determining when action should be taken. These standards help to improve the overall quality of your water or ensure that steps are taken to treat the water to prevent you and your family from getting sick. Typically, no water is completely free of contamination but you should be concerned if the level of contamination for a particular test exceeds the standard.

A **Turbidity** sample was collected to determine the amount of suspended particulates in your water supply. The turbidity level was <0.5 nephelometric turbidity units (NTU's). The MCL for turbidity is 10.0 NTU's.

Please contact the Health Department at (410) 313-1773 between 8:30 a.m. and 4:30 p.m., Monday through Friday if you have any questions regarding these test results.

Sincerely,

Ramar Martin, R.S.
Community Hygiene Program

Enclosures

Send Report To:

Howard County Health Department
 Bureau of Environmental Health
 8930 Stanford Blvd.
 Columbia, Maryland 21045

DEPARTMENT OF HEALTH AND MENTAL HYGIENE
 Laboratories Administration
 201 W. Preston St
 P.O. Box 2355, Baltimore, Maryland 21203
 Robert A. Myers, Ph. D., Director

E15002159001
 Received: 01/13/2015
 Inorganic HC 17008

WATER ANALYSIS

INV. No. 30501

Do not write above line

SAMPLE ID

Bottle Number HC 17008 Name Jose Lopez County Howard County Code 13

Location 17008 Frederick Rd, Mt Airy Data Category Code 46

Collected: Date 1/13/15 Time 10:00 am Collector & Phone Boleslav Shklyar Submitter Code

CHECK (one per box)

Drinking Water <input checked="" type="checkbox"/>	Community <input type="checkbox"/>	Source (raw water) <input type="checkbox"/>	Emergency <input type="checkbox"/>
Landfill <input type="checkbox"/>	Non-community <input type="checkbox"/>	Distribution (treated) <input type="checkbox"/>	Routine <input checked="" type="checkbox"/>
Stream <input type="checkbox"/>	Private <input type="checkbox"/>	MCL <input type="checkbox"/>	Recheck <input type="checkbox"/>
Other <input type="checkbox"/>	Other <input type="checkbox"/>		Special <input type="checkbox"/>

Federal Project S

FIELD

Plant No. Sampling Station Preservation: Iced Acid Type of Acid

pH 6.8 Chlorine: Free 0.0 Total 0.0 Specific Conductance

Notes to Lab/Remarks: sample taken from Butyradow 2nd floor
no R/O *Email results to: joserigo68@yahoo.com

CHECK TESTS	TESTS	Error Code	RESULTS
	Alkalinity (Total)		
	Ammonia - N		
	Chloride		
	Conductance*, Spec.		
	Dissolved Solids (Total)		
	Hardness		
	Fluoride		
	Nitrite, N		
✓	Nitrate - Nitrite, N		*
	Sulfate		
	Total Solids		
✓	Turbidity*		
	Other:		
	<u>* LAB REPORTED HIGH RESULT TO COLLECTOR VIA EMAIL 1/20/15. JRS</u>		

RECEIVED

JAN 22 2015

HOWARD COUNTY HEALTH DEPT.
 COMMUNITY HYGIENE PROGRAM
 Reported

* Results reported in Units, all others in milligrams per liter (ppm)

Number of Tests Requested

Section Chief



State of Maryland
DHMH-Laboratories Administration
Division of Environmental Chemistry
INORGANICS ANALYTICAL LABORATORY
201 W. Preston Street, Baltimore, Maryland 21201
Robert Myers, Ph.D., Director



Certificate of Analysis

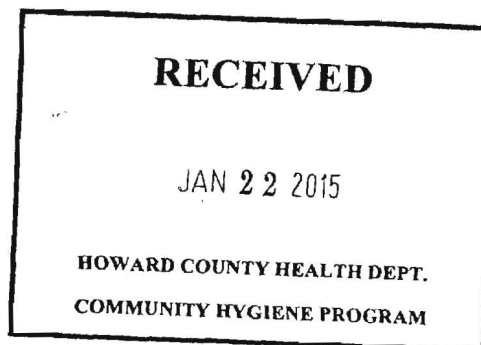
HOWARD CO ENVIRONMENTAL HLTH
8930 STANFORD BLVD
COLUMBIA, MD 21045

Lab Project NoE15002159 Date Coll. 01/13/2015 Date Received 01/13/2015 Submitted By:Shklyar

Field ID: HC 17008
Lab No.: E15002159001

<u>Analyte</u>	<u>Method</u>	<u>Result</u>	<u>Units</u>	<u>Date Analyzed</u>
Nitrate + Nitrite, as N	EPA 353.2	12.00	mg N/L	01/15/2015
Turbidity	EPA 180.1	<0.5	NTU	01/14/2015

Comments:



Approved by: *Shabbar Aneli*

Approval date: 01/15/2015

*The following methods are included in our A2LA Scope of Accreditation: EPA150.1, EPA 353.2, EPA 375.2, SM4500F C, SM 4500-CN G & QCM-CN, QCM-CN.

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

Emailed to: joserigo68@yahoo.com

January 20, 2015

Mr. Jose Lopez
17008 FREDERICK ROAD
MOUNT AIRY, MD 21771

**RE: Water Sample Results
17008 FREDERICK ROAD**

Dear Mr. Lopez,

We have received the results from the testing of the water sample(s) taken from the above referenced property on January 13, 2015. A description of the results and the established standards for each test is included below. Standards such as maximum contaminant levels (MCL), secondary maximum contaminant levels (SMCL), and drinking water equivalency levels (DWEL) are established by the EPA and other agencies to provide a reference for determining when action should be taken. These standards help to improve the overall quality of your water or ensure that steps are taken to treat the water to prevent you and your family from getting sick. Typically, no water is completely free of contamination but you should be concerned if the level of contamination for a particular test exceeds the standard.

A sample was collected to determine the **Nitrate** level in your water supply. The nitrate level was 12 parts per million. The MCL for nitrate is 10.0 parts per million.

Please contact the Health Department at (410) 313-1773 between 8:30 a.m. and 4:30 p.m., Monday through Friday if you have any questions regarding these test results.

Sincerely,

Ramar Martin, R.S.
Community Hygiene Program

240-394-2419

Youmans, Monna *I called Mr Lopez on 1-20-15 & explained Reverse*

From: Jeffrey B. Fernandez -DHMH- <jeffrey.fernandez@maryland.gov>
Sent: Tuesday, January 20, 2015 8:13 AM
To: Shklyar, Boleslav
Cc: Youmans, Monna
Subject: High Nitrate+Nitrite result

*OSTKOPIC
my*

Follow Up Flag: Follow up
Flag Status: Flagged

Hi Boleslav,

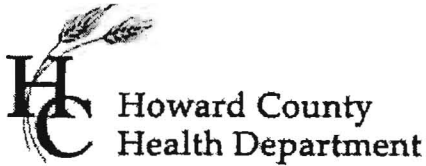
We have a high Nitrate+Nitrite result for the following sample:

Sample #HC 17008 (Lab #E15002159001), collected on 01/13/15 at 17008 Frederick Rd (Lopez). The Nitrate+Nitrite result is 12.00 ppm.

If you have any questions about the sample or results, you may reply to this e-mail or call the lab at 410-767-6189.

Jeff Fernandez

CONFIDENTIALITY NOTICE: This message and the accompanying documents are intended only for the use of the individual or entity to which they are addressed and may contain information that is privileged, confidential, or exempt from disclosure under applicable law. If the reader of this email is not the intended recipient, you are hereby notified that you are strictly prohibited from reading, disseminating, distributing, or copying this communication. If you have received this email in error, please notify the sender immediately and destroy the original transmission.



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TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

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

Emailed to: joserigo68@yahoo.com

January 15, 2015

Mr. Jose Lopez
17008 FREDERICK ROAD
MOUNT AIRY, MD 21771

**RE: Water Sample Results
17008 FREDERICK ROAD
Invoice #: 30501**

Dear Mr. Lopez,

We have received the results from the testing of the water sample(s) taken from the above referenced property on January 13, 2015. A description of the results and the established standards for each test is included below. Standards such as maximum contaminant levels (MCL), secondary maximum contaminant levels (SMCL), and drinking water equivalency levels (DWEL) are established by the EPA and other agencies to provide a reference for determining when action should be taken. These standards help to improve the overall quality of your water or ensure that steps are taken to treat the water to prevent you and your family from getting sick. Typically, no water is completely free of contamination but you should be concerned if the level of contamination for a particular test exceeds the standard.

The results from the **Bacteria** testing found that bacteria was present in the sample taken from the bathroom faucet and at this time is not considered safe for all uses. According to drinking water standards there should be no bacteria present.

Please contact the Health Department at (410) 313-1773 between 8:30 a.m. and 4:30 p.m., Monday through Friday if you have any questions regarding these test results.

Sincerely,

Ramar Martin, R.S.
Community Hygiene Program

Enclosures

240.394.2419 ✓

SEND REPORT TO:
Howard County Health Department
Bureau of Environmental Health
8930 Stanford Blvd.
Columbia, Maryland 21045
PHONE NO.:

STATE OF MARYLAND
DEPARTMENT OF HEALTH AND MENTAL HYGIENE
LABORATORIES ADMINISTRATION
201 West Preston Street, Baltimore MD 21201
Robert A. Myers, Ph.D., Director

LABORATORY:
 CENTRAL (410) 767-6145
 B. SHORE REGIONAL (410) 219-6004
 W. MD REGIONAL (301) 799-6118
008895

Category Code: 4B Inv. No. 30501 Lab No.:

BACTERIOLOGICAL DRINKING WATER REPORT

FIELD RECORD * email results to: Jose Lopez

Sample Type: Community Non-Community Non-Transient Private Check Sample C.O.P. Bottled Water OTHER:

Source: Jose Lopez
Location: 17008 Frederick Rd, Mt Airy
Iced: Yes No Treated: Yes No
Date Collected: 1/13/15 Time Collected: 10:00 a.m. p.m.
Collector Name: Baleslav Shklyov Collector ID No.: 3179 BS
Collector Tel. No.: 410-313-1707 Bottle No.: HC17008 County: Howard

Test Requested:
Quantitative: Coli-ert® QT Enter-ert®
P/A: Coli-ert® Enter-ert®
Multiple Tube Fermentation: MTF MTF (A1 Method-Source Waters Only)
Heterotrophic Plate Count (HPC-Four Plate Method)

OTHER:

COMMENTS: Bottle 2nd fill

LABORATORY RECORD (DHMH Use Only)

Test Method(s):
 SM 9223 Coli-ert® SM 9223 Coli-ert® QT SM 9223 Coli-ert® 18
 SM 9221 B (MTF) SM 9221 B, E (MTF) SM 9221 E (A1)
 SM 9221 5B (HPC) Enter-ert® ASTM D 6803-99
 OTHER:

Temperature Control: 9
Thiosulfate: Present Absent Undetermined

P/A TEST (Coli-ert®/Enter-ert®)		QUANTITATIVE TEST (Coli-ert®-QT/Enter-ert®)			HETEROTROPHIC PLATE COUNT		
100 mL sample	MPN/100mL	Dilution	100 mL sample	# Positive wells	MPN/100 mL	Plate A: <input type="checkbox"/>	Plate B: <input type="checkbox"/>
Total coliforms	7	<input type="checkbox"/> 1:10	Total coliforms	9	10	Incubate 24-48 hrs/HPC (HPC/ml) =	
E. coli		<input type="checkbox"/> 1:100	E. coli	0	<1		
Enterococci		<input type="checkbox"/> 1:1000	Enterococci				

JAN 13 '15 on 7:00 PM PRESUMPTIVE MTF TEST

ANALYZED BY/DATE: L. P. ... 1/14/15 REVIEWED BY/DATE: E. F. ... 1/14/15

REMARKS: 2 RECEIVED
FAX MAIL EMAIL

This report shall not be reproduced except in full without the written approval of the laboratory. Results only valid for sample received.
DHMH-86 1/13 Original-Laboratory

RECEIVED
JAN 15 2015
HOWARD COUNTY HEALTH DEPT
STATE OF MARYLAND DHMH
COMMUNITY HYGIENE PROGRAM



Bureau of Environmental Health

8930 Stanford Blvd, 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

WELL AND WATER SUPPLY SYSTEM DISINFECTION

The purpose of well chlorination is to kill bacteria which may be introduced into wells during well drilling, pump installation and plumbing activities. Chlorination should not be expected to provide any permanent solution to a contamination problem since the process only destroys existing bacteria. If a sample taken after a well is chlorinated shows the presence of bacteria, there may be a new contamination occurring, and possibly problems with the groundwater, well or plumbing exists.

Since chlorine kills all bacteria, if chlorine is found in a water sample, no bacterial analysis of that water can be conducted. To avoid delays in testing, it is important to carefully chlorinate a well without leaving excessive chlorine residuals.

Chlorine is available in liquid (household or commercial bleach) and solid forms that are available from swimming pool supply firms. Liquid bleach may float in a well, while granular solid chlorine may dissolve completely without going all the way to the bottom. Chlorine tablets may sit on the bottom dissolving slowly, often for extended periods of times. The most effective chlorination technique is to use a combination of liquid and solid chlorine. In wells over 225 feet deep, it is best to use both granular and tablet forms as well as liquid bleach.

INSTRUCTIONS:

1. Put the appropriate amount of solid chlorine into the well.
2. Mix the liquid bleach with 5 gallons of water. Pour into the well, rinsing the wires and casing.
3. Attach a garden hose to an outside hose bib, run water into the well for a minimum of ½ hour, or until bleach odor is detected from the hose.
4. Turn on each faucet, flush each toilet, run each shower, washing machine, and dishwasher until bleach is smelled at the fixture. Turn the water off.
5. Let water sit overnight.
6. Flush chlorinated well water onto the driveway. You should attempt to minimize contact between the chlorinated water and your lawn and/or garden as much as possible.
7. Make arrangements with a private certified water testing laboratory or the Health Department to resample the water supply.

WARNING:

DO NOT ALLOW PEOPLE TO USE THE CHLORINATED WATER FOR DRINKING, BATHING, OR LAUNDRY.



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

BE CAREFUL NOT TO RUN THE WELL DRY! FLUSH IN SMALL AMOUNTS IF YOU HAVE ANY CONCERN! (i.e. Flush for 20-30 minutes, then turn the water off for 30-60 minutes)

DO NOT FLUSH CHLORINATED WATER THROUGH THE SEPTIC SYSTEM, AS CHLORINE MAY DAMAGE IT!

TOO MUCH SOLID CHLORINE, ESPECIALLY TABLETS, CAN LEAVE CHLORINE RESIDUAL IN A WELL FOR MONTHS WHICH WILL PREVENT SAMPLING AND APPROVAL OF THE WELL!

Depth of Water In Well	Quantities of Pool Chlorine Granular and/or Tablets (70%)	Quantities of Home Laundry Bleach (5%)
10 Feet	1 Tablespoon	or 1 Cup
20 Feet	3 Tablespoons	or 1 Cup
40 Feet	6 Tablespoons	or 2 Cups
80 Feet	9 Tablespoons	or 1 Quart
100 Feet	4 Ounces	or 1 ½ Quarts
150 Feet	6 Ounces	or 2 Quarts
180 Feet	8 Ounces	or 2 ½ Quarts
225 Feet	12 Ounces	or 3 Quarts
250 Feet	16 Ounces	or 4 Quarts

****>250 INCREASE AMOUNTS PROPORINATELY**

BEST PRACTICE:

To achieve optimum sanitation, refer to the above chart. It is best to use ½ of quantity of solid pool chlorine shown plus ½ of the liquid volume shown for a particular depth of water.

NOTE:

If you only have swimming pool chlorine, mix half of the listed amount in 10 gallons of water and use it for #2 of the instructions.

Example 1

Well is 125 feet deep. The water level is 25 feet down. The water depth is 100 feet. You may use 1½ quarts of liquid household bleach or 4 oz. of pool chlorine. The best practice is to use 0.75 quarts of bleach and 2 oz. of granular pool chlorine.

Example 2

Well is 250 feet deep. Water level is 25 feet down. The water is 225 feet deep. You may use 12 oz. of pool chlorine or 3 quarts of liquid bleach. As granular chlorine may dissolve before it reaches the bottom, the best practice may be to use ½ liquid bleach plus ¼ granular pool chlorine plus ¼ pool chlorine tablets.

Oswald, Hank

From: Oswald, Hank
Sent: Thursday, January 08, 2015 10:39 AM
To: joserigo68@yahoo.com
Subject: Well Water Testing Requirements

Mr. Lopez:

In accord with our conversation this morning, I am sending you the information that you requested regarding the well water sampling requirements. The well water should be tested for Bacteria, Nitrate and Turbidity. As discussed, you may contact the Howard County Health Department, Community Hygiene Program to schedule water testing. The number is (410) 313 – 1773, Monday - Friday between 8 a.m. and 5 p.m. to make the appointment.

Should you have any question, please don't hesitate to ask.

Regards,

Hank

Hank Oswald, L.E.H.S.
Howard County Health Department
Bureau of Environmental Health
Well & Septic Program
410.313.1786



Oswald, Hank

From: Oswald, Hank
Sent: Thursday, December 11, 2014 4:15 PM
To: joserigo68@yahoo.com
Subject: FW: B14003917_17008 Frederick Road

Mr. Lopez:

After our telephone conversation today regarding your well, I met with my supervisor and deputy director to discuss the well conditions. In short, the well will need to be brought up to current standards prior to building permit approval. This means the well will need to be extended above grade, a pit-less adaptor, electrical (pvc) conduit and a two piece well cap installed, the pressure tank relocated to inside the home, and the well pit removed or filled-in.

Once the work has been completed, please call for an inspection. Should you have any questions or need a name of a well driller to conduct the work, please don't hesitate to ask.

Regards,

Hank

Hank Oswald, L.E.H.S.
Howard County Health Department
Bureau of Environmental Health
Well & Septic Program
410.313.1786

From: Oswald, Hank
Sent: Thursday, December 11, 2014 9:31 AM
To: 'Jose Lopez'
Subject: RE: B14003917_17008 Frederick Road

Mr. Lopez:

As a follow-up to my site visit, I have a question about the well. Is it a pit well or hand dug well? Could you send me a couple pictures of what the well looks like underneath the cover.

Regards,

Hank

Hank Oswald, L.E.H.S.
Howard County Health Department
Bureau of Environmental Health
Well & Septic Program
410.313.1786

From: Jose Lopez [<mailto:joserigo68@yahoo.com>]
Sent: Tuesday, December 09, 2014 4:04 PM
To: Oswald, Hank
Subject: Re: B14003917_17008 Frederick Road

good evening, what time would you plan to come Thursday morning, and if I have to be at home.

On Tuesday, December 9, 2014 1:20 PM, "Oswald, Hank" <hoswald@howardcountymd.gov> wrote:

Mr. Lopez:

I will need to verify these measurements by conducting a site visit. I'm planning on this Thursday morning.

Regards,

Hank

Hank Oswald, L.E.H.S.
Howard County Health Department
Bureau of Environmental Health
Well & Septic Program
410.313.1786

From: Jose Lopez [<mailto:joserigo68@yahoo.com>]
Sent: Monday, December 08, 2014 4:57 PM
To: Oswald, Hank
Subject: Re: B14003917_17008 Frederick Road

Here's the letter you asked for and picture for Davis. Thank you.


On Friday, November 14, 2014 10:22 AM, "Oswald, Hank" <hoswald@howardcountymd.gov> wrote:

Jose Lopez:

As a follow-up to our conversation yesterday regarding the percolation certification plan requirement, I'm writing to let you know that you may apply for a waiver top this requirment. In the waiver letter, please describe the addition to be installed, its intended use and how it will not affect the flow on the septic system (i.e. it will not have plumbing etc.). Please address the letter to the deputy director, Mike Davis.

Additionally, you are still required to submit a scaled site plan (1:30-1:100) drawing showing the structures on the property, the well and all septic components utilizing the As Built drawing that was mailed to you. We will also need a copy of the floor plans for the garage to confirm the presence or absence of living space or plumbing.

Should you have any questions, please don't hesitate to ask.



Respectfully,

Hank

Hank Oswald, L.E.H.S.
Howard County Health Department
Bureau of Environmental Health
Well and Septic Program
(410) 313 - 1786

17008 Frederick Road
Mt. Airy, MD 21771
12/11/2014
Pit Well



SITE INSPECTION SHEET

OWNER: Jose Lopez

PHONE #: (240) 394-8419

ADDRESS: 17008 Frederick Road

CONTRACTOR: Owner

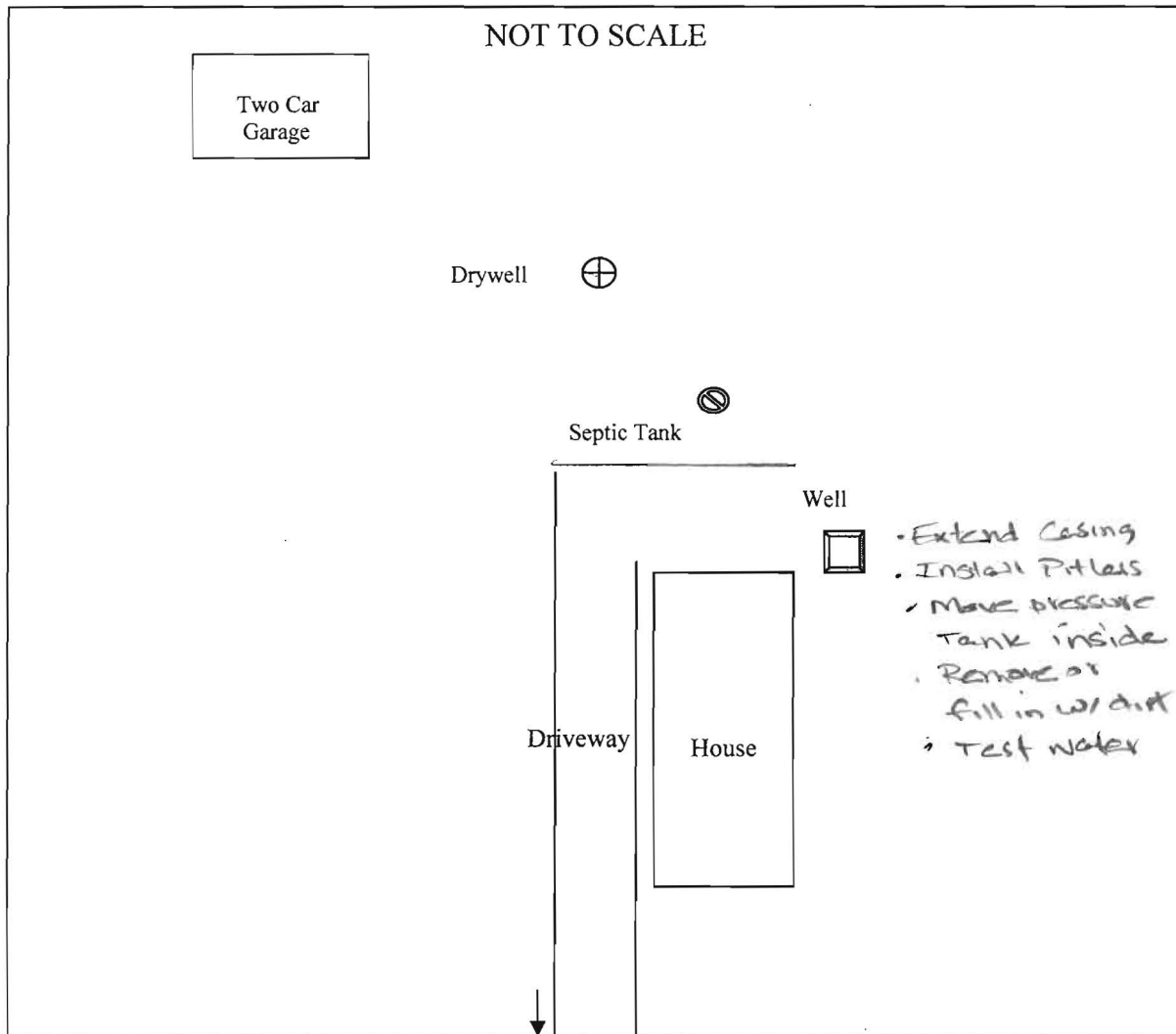
Mt. Airy, MD 21771

WELL TAG #: Hand Dug

SUBDIVISION: _____ **LOT:** _____ **COUNTY #:** Howard

PROPOSAL: Site visit was conducted to confirm the location and condition of the well and septic system.

LOCATION DIAGRAM



COMMENTS: According to SDAT, the primary structure was built in 1933 and is approximately a 0.8 acre lot. The well is located underneath a 5' X 5' piece of plywood with roofing shingles near back corner of house. According to Mrs. Lopez, the well is as big and round as the piece of plywood on top. The well could not be accessed at the time of the inspection. According to the septic record, the well is located less than 100 feet from the septic tank. The septic tank cleanout and drywell weren't evident. There were no septic odors detected or evidence of sewage surfacing in the backyard.

DATE: 12-10-2014 INSPECTOR: Hank Oswald, L.E.H.S.

Real Property Data Search (w2)

Guide to searching the database

Search Result for HOWARD COUNTY

View Map		View GroundRent Redemption			View GroundRent Registration				
Account Identifier:		District - 04 Account Number - 316584							
Owner Information									
Owner Name:		LOPEZ JOSE R LOPEZ LINA E T/E			Use:		RESIDENTIAL		
Mailing Address:		17008 FREDERICK RD MT AIRY MD 21771-3304			Principal Residence:		YES		
					Deed Reference:		/08693/ 00438		
Location & Structure Information									
Premises Address:		17008 FREDERICK RD MT AIRY 21771-0000			Legal Description:		.7848 A 17008 FREDERICK RD		
Map:	Grid:	Parcel:	Sub District:	Subdivision:	Section:	Block:	Lot:	Assessment Year:	Plat No:
0007	0002	0007		0000				2014	Plat Ref:
Special Tax Areas:					Town:		NONE		
					Ad Valorem:		100		
					Tax Class:				
Primary Structure Built		Above Grade Enclosed Area		Finished Basement Area		Property Land Area		County Use	
1933		2,790 SF				35,327 SF			
Stories	Basement	Type	Exterior	Full/Half Bath	Garage	Last Major Renovation			
2	YES	STANDARD UNIT	SIDING	3 full					
Value Information									
			Base Value	Value	Phase-in Assessments				
				As of	As of		As of		
				01/01/2014	07/01/2014		07/01/2015		
Land:			185,900	185,900					
Improvements			85,000	149,600					
Total:			270,900	335,500	292,433		313,967		
Preferential Land:			0		0				
Transfer Information									
Seller: LOPEZ JOSE R				Date: 10/13/2004		Price: \$0			
Type: NON-ARMS LENGTH OTHER				Deed1: /08693/ 00438		Deed2:			
Seller: DAVIS DAVID J				Date: 08/06/2001		Price: \$160,000			
Type: ARMS LENGTH IMPROVED				Deed1: /05610/ 00634		Deed2:			
Seller: DAVIS JAMES S JR				Date: 04/17/1996		Price: \$72,000			
Type: ARMS LENGTH IMPROVED				Deed1: /03704/ 00674		Deed2:			
Exemption Information									
Partial Exempt Assessments:		Class		07/01/2014		07/01/2015			
County:		000		0.00					
State:		000		0.00					
Municipal:		000		0.00 0.00		0.00 0.00			
Tax Exempt:				Special Tax Recapture:					
Exempt Class:				NONE					
Homestead Application Information									
Homestead Application Status: Approved 07/03/2008									