

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

October 22, 2012

Sang In Lee
10718 Hunting Lane
Columbia, MD 21044

RE: **Order to Connect to Public Water System**
10718 Hunting Lane
Columbia, MD 21044

Dear Mr. Lee:

You were referred to us from Howard County Real Estate Services regarding efforts to connect to the public water supply system due to ongoing water pressure and supply issues. Howard County verified that your property is accessible to public water but is outside the Metropolitan District.

Additionally, you provided information to this office that you have had dwindling water pressure and have had instances of no water supply in recent months. A field review by this Department has also confirmed that the private water supply for the property is a pit well of unknown construction.

Based on the aforementioned information and department evaluation, the ongoing water supply problems from your existing pit well creates a condition that is considered a potential threat to health as described in Howard County Code Section 12.105

Therefore, pursuant to provisions of Section 12.105 as amended by Council Bill 32-2002, you are hereby ORDERED to apply for the necessary permits and begin process for connection to the public water supply within thirty (30) days of receipt of this letter. Barring any unusual processing delays or extreme weather conditions, connection to the public water supply shall occur within sixty (60) days of receipt of this letter. In Addition, you are required to abandon the existing well in conformance with the procedures outlined in COMAR 26.04.04.11. Abandonment shall occur within thirty (30) days following connection to public water. If you are unable to meet any of these deadlines, please contact Jeff Williams at 410-313-4261 to discuss.

This decision may be appealed to the Board of Health. If you choose to appeal, you shall file a written request to the executive secretary of the Board of Health within fifteen (15) days of receipt of this letter.

Failure to comply with this order shall be grounds for further enforcement action as set forth in Section 12 of the Howard County Code.

If you have any questions, contact Jeff Williams at 410-313-4261.

B. Nixen for Maura Rossman

Maura J. Rossman, M.D.

Health Officer

CC: Carl Katenkamp, Real Estate Services
Bert Nixen, Bureau of Environmental Health
Tammy Frank, Department of Planning and Zoning
James Irvin, Director, Department of Public Works
Don Lieu, DPW Utility Design Division
Jeff Welty, Deputy Chief, Bureau of Utilities
Executive Secretary, Board of Health

11/5/01
Repair
AM

11/6/01
Final
Noon

ISSUE DATE: 10/31/01

APPROVAL DATE: 11/6/01

PERMIT INDEXED

P 516401

A REPAIR

ON-SITE SEWAGE DISPOSAL SYSTEM
HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH

05-355877

Fogle's Septic Clean, Inc. IS PERMITTED TO INSTALL ALTER

ADDRESS: 580 Obrecht Road, Sykesville PHONE NUMBER: 410-795-5670

SUBDIVISION: Holiday Hills LOT NUMBER: 69

ADDRESS: 10718 Hunting Lane PROPERTY OWNER: Jeanne Goodman

SEPTIC TANK CAPACITY (GALLONS): Existing

PUMP CHAMBER CAPACITY (GALLONS): N/A

NUMBER OF BEDROOMS: 3?

SQUARE FEET PER BEDROOM: 180

LINEAR FEET OF TRENCH REQUIRED: 108 2-54' Trenches

TRENCHES:	Trench to be depth original grade. Inlet feet below original grade. Inlet feet below original grade. Effective area begins at feet of stone below distribution pipe. Bottom maximum depth feet below
LOCATION:	
PURPOSE:	Existing septic system is failing. Call when ground is opened so sanitarian can recommend repair.

PLANS APPROVED: Brian Baker DATE: 10/31/01

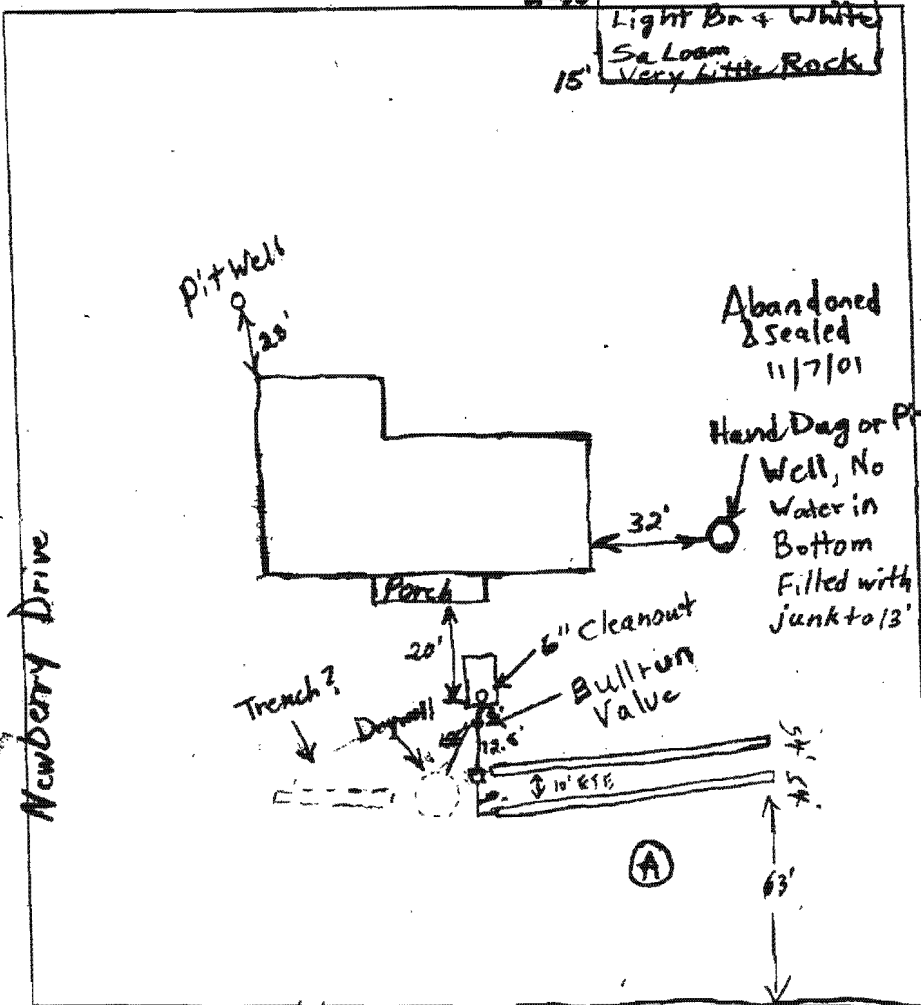
- NOTE: PERMIT VOID AFTER 2 YEARS
- NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
- NOTE: WATERTIGHT SEPTIC TANKS REQUIRED
- NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL
- NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

P 516401

①
 Red Br Cl Loam 6.5' ~ 25 minutes
 3.5' Brown Sa Cl Loam
 5' Brown + White sa Cl Loam
 6-10' Light Br + White Sa Loam
 15' Very little Rocks

NOT TO SCALE



TRENCH DATA

TRENCH WIDTH 2'
 TRENCH INLET DEPTH 6'
 TRENCH BOTTOM DEPTH 11'
 DEPTH OF STONE 5'
 NUMBER OF TRENCHES 2
 TOTAL TRENCH LENGTH 54'
 ABSORBENT AREA 108 sq ft
 DISTRIBUTION BOX LEVEL
 BAFFLE IN DISTRIBUTION BOX

SEPTIC TANK DATA

SEPTIC TANK Existing GALLONS
 MANHOLE RISER No
 6 INCH INSPECTION PORT Yes

PUMP CHAMBER DATA

~~PUMP CHAMBER GALLONS
 MANHOLE RISER
 ALARM
 PUMP PERFORMANCE TEST~~

Hunting Lane

PRE-CONSTRUCTION INSPECTION:

INSPECTION COMMENTS: 11/5/01 First trench started. Homeowner on vacation will have to get back to them about sealing of hand dug well or old pit well with fill above it. (SD) 11/6/01 OK to cover all work (SD)

INSPECTOR

[Signature]

DATE SYSTEM APPROVED

11/6/01

 WATER WELL ABANDONMENT-SEALING REPORT FORM

SUBMIT COPIES OF COMPLETED FORM TO:

- * COUNTY ENVIRONMENT AGENCY (contact MDE, WMA if address needed)
- * WELL OWNER
- * MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DATE WELL ABANDONED: 11/7/01 (month/day/year)

* PERMIT NUMBER OF ABANDONED WELL (if any)

			NA				
--	--	--	----	--	--	--	--

* PERMIT NUMBER OF REPLACEMENT WELL (Drilled Well in pit)

			NA				
--	--	--	----	--	--	--	--

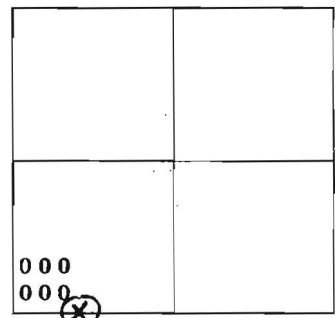
* PERSON ABANDONING WELL: Ricky Colson

WELL DRILLERS LICENSE NUMBER: NA
 CIRCLE: MWD/MSD/MGD

* OWNER'S NAME: Jeanne Goodman & Dave Fogle

* WELL LOCATION: 10718 Hunting Lane

COUNTY: Howard
 NEAREST TOWN: Columbia - Simpsonville
 TAX MAP _____ BLOCK _____ PARCEL _____
 SUBDIVISION: Holiday Hills
 SECTION: _____ LOT: 69



SHOW WELL LOCATION BY X WITHIN BOX

MARYLAND GRID COORDINATES

E 832
 BOX NUMBER
 N 490

* TYPE OF WELL BEING ABANDONED:

- DRILLED
- BORED/AUGURED
- OTHER (specify) _____
- JETTED
- HAND DUG

* USE CODE:

- DOMESTIC
- IRRIGATION
- TEST/OBSERVATION
- MUNICIPAL/PUBLIC
- INDUSTRIAL

* TYPE OF CASING:

- STEEL
- CONCRETE
- PLASTIC
- OTHER (specify) Stone

* SIZE OF CASING: 3 feet INCHES IN DIAMETER

* DEPTH OF WELL: 13 1/2 FEET DEEP

* WAS ANY CASING REMOVED? YES NO
 if yes, length removed, in feet: _____

* WAS CASING RIPPED OR PERFORATED? YES NO

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
<u>Concrete</u>	<u>13.5</u>	<u>0</u>

SIGNATURE - MASTER WELL DRILLER OR SUPERVISING SANITARIAN: [Signature] LICENSE # 0937551 MWD/MSD/MGD [initials] CIRCLE ONE [initials] DATE 11/7/01

Scott, Heidi

From: Connie [cklee1114@gmail.com]
Sent: Tuesday, October 16, 2012 5:11 PM
To: Scott, Heidi
Subject: Public water for our home

Hello Mr. Scott,

I reside at 10718 Hunting Lane Columbia, MD 21044. My father, Sang In Lee, submitted an application for public water for our home yesterday.

We applied for public water because for the past two years we have had very poor water pressure at our home. Our water system seems to be slowly deteriorating and at times we have very little or even no water supply when using our sinks or showers. Some days we cannot even take showers or do the dishes because we have no water at all! We have well water and we believe this is the reason why. Please let us know if you have any further questions. Thank you.

Sincerely,
Connie Lee

Site visit 10/15/12
to confirm pit well.

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sang In Lee
 10718 Hunting Lane
 Columbia, Maryland 21044

2. Article Number

(Transfer from service label)

7007 1490 0000 5769 7749

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X


 Agent Addressee

B. Received by (Printed Name)

Sang In Lee

C. Date of Delivery

10/25/12

D. Is delivery address different from item 1? YesIf YES, enter delivery address below: No

3. Service Type

 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee)

 Yes

Connection Object 7101073533 COLUMBIA, HUNTING LN 10718

[-] Device location 6101073410 OUTSIDE

Device 12/20/12-***.***.** 44550357 6030021 Water Meter - 1" WE 1CCF4N
Device 12/20/12-***.***.** 85096232 6040021 ERT - 1" WE 1CCF4D

[-] Premise 5101002558 HUNTING LN 10718, COLUMBIA

[-] Utility Installation 4101215512 Water 9004130 2

[-] Utility contract 3201012475 12/20/2012 12/31/9999 02/04/2013

Move-out document 00/00/0000

Move-In Document 1000220369 12/20/2012 X

[-] UTIL ACCOUNT 221010058695

RESI

Business Partner 1201005077 SUNG N LEE

Device 12/20/12-***.***.** 44550357 Water Meter - 1" WE 1CCF4N

Device 12/20/12-***.***.** 85096232 ERT - 1" WE 1CCF4D

Water Meter
ERT - 1" WE

[-] Utility Installation 4101215714 Bay Fees 9004130 7

[-] Utility contract 3201012476 12/20/2012 12/31/9999 02/04/2013

Move-out document 00/00/0000

Move-In Document 1000220370 12/20/2012 X

[-] UTIL ACCOUNT 221010058695

RESI

Business Partner 1201005077 SUNG N LEE