

EMERGENCY/JEMP NU. IF ANI STATE PERMIT NUMBER SEQUENCE NO. STATE OF MARYLAND (MDE USE ONLY) APPLICATION FOR PERMIT TO DRILL WELL H0-95 1101 please type 526268 fill in this form completely LOCATION OF WELL Date Received (APA) B 3 Howard 10491 3 CCH 6 0 OWNER INFORMATION 0 13 8 COUNTY ee Development Group Inc **Terrapin** Creek 23 SUBDIVISION 42 Last Name 8601 Georgia Ave, Suite 200 **First Name** 34 15 1 SECTION L LOT 55 46 Street or RFD 50 36 West Friendship Silver Spring, Md 20910 57 70 State 72 Zip 76 52 NEAREST TOWN 71 Town DRILLER INFORMATION MILES FROM TOWN (enter 0 if in town) 040 George F. Easterday W 73 76 77 78 D B Driller's Name L. Franklin Easterday, Inc. 4 License No. 81 76 **Terrapin Creek Drive** 2 1 age DIRECTION OF WELL FROM TOWN (CIRCLE BOX) NEAR WHAT ROAD 30 Firm Name 9265 Brown Church Rd., MT. Airy, Md. 21771 NORTH N ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) N E W Addres WEE 2/28/2007. eara SOUTH K 50 34 37 Date W Е TOWN Signature DISTANCE FROM ROAD Ft. 5 B 2 WELL INFORMATION APPROX. PUMPING RATE ENTER FT OR MI 38 39 1 2 Sw (GAL. PER MIN.) 8 12 °E 500 S TAX MAP: 15 BLK: 5 PARCEL 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 20 NOT TO BE FILLED IN BY DRILLER USE FOR WATER (CIRCLE APPROPRIATE BOX) HEALTH DEPARTMENT APPROVAL DOMESTIC POTABLE SUPPLY & RESIDENTIAL D 20 FARMING (LIVESTOCK WATERING & AGRICULTURAL COUNTY NO F STATE IRRIGATION SIGNATURE INSERT S 22 INDUSTRIAL COMMERICIAL, DEWATERING 41 DATE USSUED 130 PUBLIC WATER SUPPLY WELL P CO SIGNATUR 43 MM TEST, OBSERVATION, MONITORING T EAST 081 NORTH 000 GRID 000 GRID G GEO-THERMAL 50 SHOW MAJOR FEATURES OF 300 BOX & LOCATE WELL * APPROXIMATE DEPTH OF WELL J FEET WITH AN X 28 24 SOURCES OF DRILLING WATER 6 NEAREST APPROXIMATE DIAMETER OF WELL 1. INCH wells 2. METHOD OF DRILLING (circle one) 3. BORED (or Augered) **Jetted & DRIVEN** JETTED AIR-PERcussion AIR-ROTary **ROTARY** (Hydraulic Rotary) WRITE THE BOX NUMBER CABLE **REVerse-ROTary** DRive-POINT FROM THE MAP HERE other 810 E REPLACEMENT OR DEEPENED WELLS 000 (CIRCLE APPROPRIATE BOX) 530 N THIS WELL WILL NOT REPLACE AN EXISTING WELL N DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN THIS WELL WILL REPLACE A WELL THAT WILL BE 10 C 1 Y ABANDONED AND SEALED RELATION TO NEARBY TOWNS AND ROADS AND GIVE THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS DISTANCE FROM WELL TO NEAREST ROAD JUNCTION S 39 Jerrapin 32 creek D THIS WELL WILL DEEPEN AN EXISTING WELL Y PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENED (IF AVAILABLE) 41 52 Not to be filled in by driller (MDE OR COUNTY USE ONLY) 701 Friend phip H02006011 APPROP, PERMIT NUMBER PERMIT No. 10 71 SPECIAL CONDITIONS • TIES SHOULD USE SEPARATE SHEET IF MEEDED

@ COUNTY

Page	of	9-11-07	1:00					
Date			Revi	ew				
	НҮ	FIELD DATA DROGEOLOGIC AREA (3)						
Maryland Well Permit No. <u>H0-95-1101</u> Election District Location of Property (road) <u>Jerrapon</u> Cruch Drive								
Subdivision Jenaper Cruck Lot 1_ Block Plat Sec.								
Well Driller Jasterday Owner Lee Development Chryp								
	Depth of Well	100 500m						
	Distance of Measu	uring Point (W.P.) al	ove ground 1/2	······································				
		el (S.W.L.) below M.H reservoir drawdown	•64_1.64	ours set 48				
		and the second	Pumping rate					
То	tal time <u>Durn</u> t	o reach pumping wate	er level 170' ft. 1	pelow M.P.				
II. Recov	ery pump test dat	a - observations to	be recorded every 15	5 minutes.				
		PUMPING RATE						
TIME	WATER LEVEL Below M.P.		FLOW METER READING (if used)	(gallons per min.)				
	Delow M.F.	gal. bucket						
915	70	0 sec.	Igal bucket	6 Gpm				
930	170'			6				
9:45	110	10 "	۲. ۱ ۱					
1000	1 10'	10" 10"		6				
1015	· 10	15"		6				
1030	170'	10 10 ¹¹						
1045	11/2	1 <u>1 2</u> 1 7 58		G'I				
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1130	170'	10''	(i	6"				
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17.00	170'	10"	$\overline{X} h$					
1215	170'	10"	ł į					
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FIELD DATA SHEET HOWARD COUNTY WELL YIELD TEST Well Permit No. HO - 95-1101 Location of property (road) Terrosin Cree k Dr. Subdivision Terrosin Cree k Dr. Depth of well Distance of measuring point (M.P.) above ground Static water level (S.W.L.) below M.P. I. High rate pumping reservoir drawdown Time pump started Pumping rate Total time to reach pumping water level ft. below M.P. II. Recovery pump test data - observations to be recorded every 15 minutes	Page of Date			Review					
Location of property (road) Tarrosin Creek br. Subdivision Terror Creek LotBlockPlatSec Well DrillerBeat are created are			and the second se						
Image: Constraint of the constraint	Location of pro	operty (road) <u>Ta</u>	K Lot	BlockPlat	Sec				
Time pump started to reach pumping water level ft. below M.P. II. Recovery pump test data - observations to be recorded every 15 minutes TIME (in 15 water Level below M.P. minute in-tervals PUMPING RATE gallon bucket FLOW METER READING (if used) (allons per minute)	Depth of Distance	f well e of measuring po	pint (M.P.) above gr	ound					
TIME (in 15 minute in- tervals WATER LEVEL below M.P. PUMPING RATE time to fill 5 gallon bucket FLOW METER READING (if used) CALCULATED FLO (gallons per minute) Image: Ima									
minute in- tervals below M.P. time to fill 5 gallon bucket (if used) (gallons per minute) Image: Strategy of the	II. Recovery p	oump test data -	observations to be	recorded every 15 minut	es				
Image: Second	minute in-		time to fill 5						
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HD-224									

HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH WATER AND SEWERAGE PROGRAM TEL: (410)313-2640 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:	Atlantic	RILLE_Tele	phone #:410	· 840- 8.	112	
	Address:	1802 RAITUR	nare Bivd. K. MD 21157			_	
	License # and na Name (Print): *A licensed Indi	vidual must perform	the actual installation.	lation: License# Apprentices mus	t be under the s	upervision of a	
			iber, pump installer or			ected to field	
		the second s	may be reported to the				
	Name of Propert	y Owner. ((/ //////	YIIIC HOME	Telephone #:/	0-442-0	2/1	0 -
	Subdivision:	2022- 72///////	MD 21784	DOS TERZAP	Ing#: HU- <u>45</u>	- <u>1101</u> / 10/24/20	'IC
	Submersible Pu	mp Data	Pitless Adapter	Well Cap:	and Electric Con	nduit	
	Make:		Make: Mmphc/		watertight cap:		
	Model #:		Model#:	Screencd,	vented well cap:		
	Pump Capacity	GPM	Depth: 42 " (36" r		d to casing:		
	Well Yield:	GPM	NSF/WSC approved:		in 18" B.G.:	<u>···</u>	
		countered at time of p	low water cut off switch		cured to well cap		
			er acceptable method used		C 1990 Scenou 1	/-0.4	
			is rope adapter or other		d inside of well o	asing	
		,					
	Piping to house		House Connection			~	
	Type: <u>MIY</u>			isturbed soil at wall			
	PSI: 160			h of sleeve: <u>AO f</u>	<u>E</u>		
	Depth of supply	line: <u>47</u> (36" min)	Sleeve caulked and	i sealed properly:			
		, drainfields, and sev	be at least ten feet from wage reserve area. If th				
		11.10		1			
	n	man		10/1	8/18		
	Signature of com	pany representative re	esponsible for installation	date		-	
		T- T- MA T	A STATE OF LAND		T d Blan		
		For Health Dep	partment Use Only - No	t to be completed i	y mstauer		
	Date Insp. Reque	ested: 10/24/2-or 8	Date Insp. Approved:	01/03/2019 Ins	pector fe		
			tight & water supply line			40 " 10/24/208@	
	-		led and attached to casing			•	
			s at least 18" below grade		operly	20 22"10/24/2018 4	>
EX Horse	18 1		outside of well cap/casin			16"10/2H/2018@	-
10/24/20	ng C		ched properly and casing		grade	"In' 10/24/2018 (D)	
			erved adequately at house rved below pitiess adapte			In 101241201812	
7.25 6		unchram Stont onzo	• •				
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/ Sleeve	<u>ل</u> ـــ		LINE · LOCH	- GRADE T	34 House	IS TO PAINTED	•
			WELL	CAP SCREEN	CA SER	IS TO PAINTED	
10/10	PAGE	3	ATLANTIC BLV			DURING INSP.	_
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Bureau of Environmental Health 8930 Stanford Blvd | Columbia, MD 21045 410.313.2640 - Voice/Relay 410.313.2648 - Fax 1.866.313.6300 - Toll Free

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

INTERIM CERTIFICATE OF POTABILITY Expiration Date – JULY 23, 2019

January 23, 2019

Homeowner 2003 Terrapin Creek Drive Sykesville, MD 21784

RE: Terrapin Creek, Lot 1 2003 Terrapin Creek Drive Building Permit: B18002517 Well Permit: HO-95-1101

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 1/3/2019. Final approval of the well line connection to the dwelling was granted on 1/3/2019. The well construction was completed on 9/7/2007. Water samples were collected on 1/8/2019, 1/18/2019.

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-95-1101. 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



Bureau of Environmental Health 8930 Stanford Blvd | Columbia, MD 21045 410.313.2640 - Voice/Relay 410.313.2648 - Fax 1.866.313.6300 - Toll Free

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

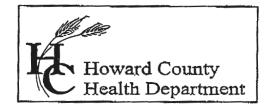
In closing, please refer to our "<u>Homeowner Fact Sheet</u>" which illustrates a better understanding for your Onsite Sewage Disposal System. You will also find a link to Maryland Department of the Environments website which describes in further detail operation and maintenance of your septic system.

Approving Authority,

L.n. Kall

Kevin M. Wolf, L.E.H.S, R.S./REHS, Supervisor Groundwater Management Section Well & Septic Program

cc: Howard County Dept. of Inspections, Licenses, and Permits Community Hygiene Program File



7178 Columbia Gateway Drive, Columbia, MD 21046 (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:

Well Site Location: Pres A <u>TERRAPIN Creek</u> 1-22 <u>Terraph Creek</u> Drive ~ MILO COURT Subdivision/Property Name Lot# Road Name

DX The well site has been staked by <u>VAN MAR ASSOCATES INC</u> (professional land surveyor or company employing professional land surveyors) on <u>3-9-07</u> (date) and does not require a site inspection.
No later Than

□ 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 3/11/05

LEE DEVELOPMENT GROUP

Hale Schurde Fam

0.22 50 5 OLDN 9 1815 10 ¥=382.00 =112.44 OWAR 02:0 \$1,20. 21679, 105.52 No. 0 PLAT Q n Cbi AO. OR 8 88. C 00 8 AQ N 56 8 .51.611 M. 92.92.LE N 5/3/07 site's stated Vanmer EWERAGE EASEMENT AS REQUIRED BY WIRDINGENT FOR TED UNTIL PUBLIC NULL AND VOID INTY HEALTH OFFICER NOT BE NECESSARY. WELL SITE PLAN LOT 1 TERRAPIN CREEK (FORMERLY SCHWABE FARM) PART OF THE LANDS CONVEYED TO LDG, INC. BY DEED RECORDED IN UBER 1988 AT FOLIO 258 TAX MAP: 15; GRID: 4 & 5; PARCELS: 12 & 43 SIMULATED ON SYKESWILF AND LIVESTOCK ROAD THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF AT LEAST 10,000 SQUARE FEET AS REQUIRED BY MARYLAND STATE DEPARTMENT OF ENVIRONMENT FOR INDIVIDUAL SEWERAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWERAGE IS AVAILABLE. THESE EASEMENTS SHALL BECOME NULL AND VOID UPON CONNECTION TO PUBLIC SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT ADJUSTMENTS. RECORDATION OF A MODIFIED SEWERAGE EASEMENT SHALL NOT BE NECESSARY. (PASSED) PERCOLATION TEST SITE: 0 (FAILED) PERCOLATION TEST SITE: EXISTING WELL: 0 PROPOSED HOUSE SITE: TAX MAP: 15; GRID: 4 & 5; PARCELS: 12 & 43 SITUATED ON SYKESVILLE AND LIVESTOCK ROAD ELECTION DISTRICT No. 3, HOWARD COUNTY, MARYLAND SCALE: 1" = 50' APRIL, 2007 PROPOSED WELL SITE:

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC. 1413 Old Taneytown Rd. Westminster, MD (410) 848-1014 (410) 876-4554 FAX (410) 848-0298

REPORT OF ANALYSIS

Laboratorv ID #: Reference:	127794 Catonsville Homes	Lot 1	Account #: Company:	1045 Atlantic Blue Water Services	
Location:	2003 Terrapin Creek Road		Requested By:	Mark Mather	
	Sykesville, MD 21	784	Source:	Well Water	
Date/ Time Collected	: 1/8/2019	1030	Site:	Well Tank	
Date/Time Rec'd:	1/8/2019	1338	Treatment:	None	
Chlorine ppm:	Free: ND	Total: ND	pH:	6.9	
Collected By:	M. Mather	3480MM	Well #:	HO-95-1101	

PARAMETERS	RESULTS	UNITS RE	FERENCE	METHOD D	ATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	20.7	MPN/ 100 ml	<1.0	SM20 9223B	1/9/2019 / 0900 / RER
Bacteria, E. coli, MPN	1.0	MPN/ 100 ml	<1.0	SM20 9223B	1/9/2019 / 0900 / RER
Nitrate	2.87	mg/L	10	601	1/8/2019 / 1640 / RER
Turbidity	5.59	NTU	<10	SM20 2130B	1/8/2019 / 1545 / RER
Sand	NS	mg/L	5	Visual/Gravimetric	1/8/2019 / 1545 / RER

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 Sample collected by client, analyzed as received
- 7 ND:None Detected
- 8 Visual well check: Sealed, vented cap
- 9 pH and Chlorine level tested in lab (pH tested after recommended holding time)

Reason for Test :Use & OccupancyBuilding Permit # :B18002517

Date Reported: <u>1/9/2019</u>

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 #:	128045			Account #:	1045	
Reference:	Terrapin Cree	k Lot 1		Company:	Atlantic Blue	Water Services
Location:	2003 Terrapin	Creek Road		Requested By:	Mark Mather	
	Sykesville, M	D 21784		Source:	Well Water	
Date/ Time Collected	: 1/18/2019	1035		Site:	Bathroom Fau	cet
Date/Time Rec'd:	1/18/2019	1300		Treatment:	None	
Chlorine ppm:	Free: ND	Total: N	D	pH:	6.3	
Collected By:	A. Panneton	3508AP		Well #:	HO-95-1101	
PARAMETERS	the state of the second	ESULTS UN	ITS B	EFERENCE	METHOD D	ATE/TIME/ANALYST
Bacteria, Coliform, Total	, MPN	<1.0 MP	N/ 100 ml	<1.0	SM20 9223B	1/19/2019 / 0900 / CCH
Bacteria, E. coli, MPN		<1.0 MP	N/ 100 ml	<1.0	SM20 9223B	1/19/2019 / 0900 / CCH

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- 1 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 2 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 3 Sample collected by client, analyzed as received
- 4 ND:None Detected
- 5 Visual well check: Sealed, vented cap
- 6 pH and Chlorine level tested in lab (pH tested after recommended holding time)

Reason for Test :Use & OccupancyBuilding Permit # :B18002517

Date Reported: <u>1/21/2019</u>