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

## **MEMORANDUM**

*Sent via email to [justin@cornerstone-homes.com](mailto:justin@cornerstone-homes.com) on 10/29/2024.*

**TO:** Justin Boy  
Cornerstone Homes, LLC

**FROM:** Ryan Rappaport, LEHS   
Well & Septic Program

**DATE:** October 29, 2024

**RE:** **5938 Trotter Road, Clarksville, MD. 21029**  
(Map 35 Grid 8, Parcel 373, TaxID 05-370450)  
(Demolition of existing structure to rebuild SFD subdivision)

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**This is to advise that the Howard County Health Department recommends issuance of the demolition permit for the above referenced property.**

A site inspection of the property was completed on October 28, 2024, and at this time no well or onsite septic components have been located on this property. The existing drilled well (permit number: HO-88-0328) that was utilized for the above referenced property has been located and sealed according to *COMAR 26.04.04.34*. An abandonment report was submitted by George Easterday (MSD 040) with Easterday-Wilson Water Services LLC to this office which confirms well abandonment completion. The well abandonment was completed on September 26, 2024.

The existing septic tank and distribution box were pumped out and removed from the site. The trenches for the system were abandoned in place and left onsite. An invoice was provided to the Health Department which states that this septic abandonment work was completed Fyock Septic Service, Inc on July 3, 2024.

According to utility records, this property has access to public water and sewer. If you plan to re-build on this parcel, you will need to connect to public water and sewer per Howard County specifications and regulations

**IF ANY WELL OR SEPTIC COMPONENTS ARE FOUND DURING SITE WORK, YOU MUST NOTIFY THIS OFFICE IMMEDIATELY.**

*Cc: File*



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 WATER WELL ABANDONMENT-SEALING REPORT FORM  
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SUBMIT COPIES OF COMPLETED FORM TO:

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

OK  
 10/20/24

DATE WELL ABANDONED: 9-20-24 (month/day/year)

\* PERMIT NUMBER OF ABANDONED WELL (if any)

HO-88-0328

\* PERMIT NUMBER OF REPLACEMENT WELL:

\* PERSON ABANDONING WELL: Lester C. Simmons Jr.

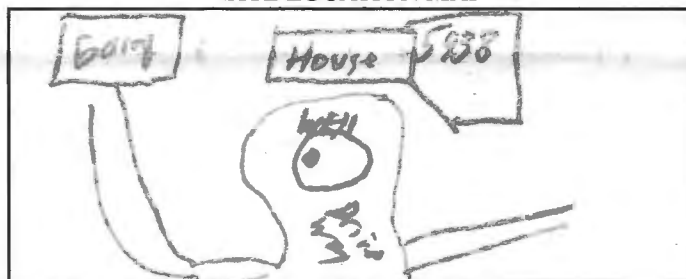
WELL DRILLER'S LICENSE NUMBER: J59 098

CIRCLE: MWD / MSD / MGD

\* OWNER'S NAME: Development PARTNERS

SITE LOCATION MAP

\* WELL LOCATION:  
 COUNTY: Howard  
 NEAREST TOWN: CLARKSVILLE  
 TAX MAP \_\_\_\_\_ BLOCK \_\_\_\_\_ PARCEL \_\_\_\_\_  
 SUBDIVISION: \_\_\_\_\_  
 SECTION: \_\_\_\_\_ LOT: \_\_\_\_\_  
 STREET ADDRESS: 5938 Trotter Rd



LATITUDE 3 9.208297

LONGITUDE 7 6.922734

LOG OF SEALING MATERIAL

\* TYPE OF WELL BEING ABANDONED:  
 DRILLED \_\_\_\_\_ JETTED  
 \_\_\_\_\_ BORED \_\_\_\_\_ HAND DUG  
 \_\_\_\_\_ OTHER (specify) \_\_\_\_\_

\* USE CODE:  
 DOMESTIC \_\_\_\_\_ MUNICIPAL/PUBLIC  
 \_\_\_\_\_ IRRIGATION \_\_\_\_\_ INDUSTRIAL  
 \_\_\_\_\_ TEST/OBSERVATION \_\_\_\_\_ GEOTHERMAL

\* TYPE OF CASING:  
 \_\_\_\_\_ STEEL \_\_\_\_\_ PLASTIC  
 \_\_\_\_\_ CONCRETE \_\_\_\_\_ OTHER (specify) \_\_\_\_\_

| MATERIAL                | FEET |    |
|-------------------------|------|----|
|                         | FROM | TO |
| Bentonite               | 310' | 0  |
| VOLUME OF MATERIAL USED |      |    |
| <u>25 Bags</u>          |      |    |

SIZE OF CASING: 6 INCHES IN DIAMETER

DEPTH OF WELL: 310' FEET DEEP

WAS ANY CASING REMOVED? YES \_\_\_\_\_ NO   
 If yes, length removed, in feet: \_\_\_\_\_

WAS CASING RIPPED OR PERFORATED? YES \_\_\_\_\_ NO

George F. Easterday  
 SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN LICENSE# 040

Pursuant to § 10-624 of the State Govt. Article of the Maryland Code, personal info requested on this form is used in processing this form pursuant to COMAR 26.04.04. Failure to provide the info may result in this form not being processed. You have the right to inspect, amend, or correct this form. The Maryland Department of the Environment is subject to the Maryland Public Information Act. This form may be made available on the Internet via MDE's website and is subject to inspection or copying, in whole or in part, by the public and other governmental agencies, if not protected by federal or State Law.

MWD / MSD / MGS 9-26-24  
 CIRCLE ONE DATE

COUNTY

# Fyock Septic Service, Inc.

# Invoice

P. O. Box 89  
 Glenelg, MD 21737

410-988-9270 Office

410-531-1256 Fax #

|          |           |
|----------|-----------|
| Date     | Invoice # |
| 7/3/2024 | R14363    |

| Bill To  |  |  | Service Location                         |  |
|--|--|--|--|--|
| Brandon Smith<br>13811 RT 144<br>West Friendship, MD 21794 |  |  | 5938 Trotter RD<br>Clarksville, MD 21029 |  |

| Rep | Terms          | Due Date | Time         |  |
|-----|----------------|----------|--------------|--|
| AS  | Due on receipt | 7/3/2024 | 410-984-8512 |  |

| Service          | Description                      | Rate   | Miles/Loads | Amount |
|------------------|----------------------------------|--------|-------------|--------|
| Residential P... | Pump Out Residential Septic Tank | 200.00 |             | 200.00 |
| Fuel             | Fuel Surcharge                   | 25.00  |             | 25.00  |
| 2000 Gallon      | County Waste Disposal Fee        | 130.00 |             | 130.00 |

|   |  |             |  |  |
|---|--|-------------|--|--|
| Notice To Customer: I understand that Fyock Septic Service is NOT responsible for any damage to property while rendering services at the above address. |  |             | <b>Total \$355.00</b>  |  |
| Customer<br>Signiature: _____ Date: _____   |  |             | <b>MAKE CHECK<br/>                 PAYABLE TO<br/>                 FYOCK SEPTIC<br/>                 SERVICE</b> |  |
| Comments  |  | Serviced By |  |  |
|   |  | Check #     |  |  |

5938 Trotter Rd











