7/31/96
10:00

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 56509 C

A →

DISTRICT 5

DATE 7/20/96

DATE SYSTEM APPROVED 10/31/96

INSPECTOR

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
~~[illegible]~~ 313-2640

Tax ID# 05-418631

INDEXED

Van Sant Plumbing & Heating IS PERMITTED TO INSTALL X ALTER

ADDRESS 3 N. Main Street, Mt. Airy, MD 21771 PHONE 682-6726

SUBDIVISION Ashleigh Knolls LOT 43 ROAD 7112 Carlisle Court

PROPERTY OWNER Winchester Homes, Inc.

BUILDING PERMIT SIGNED AND RETURNED

ADDRESS

8120 B00149872 - IG POOL

BLDG. PERMIT SIGNED AND RETURNED 5/17/2001
B00129150 SCREENED PORCH AND DECK

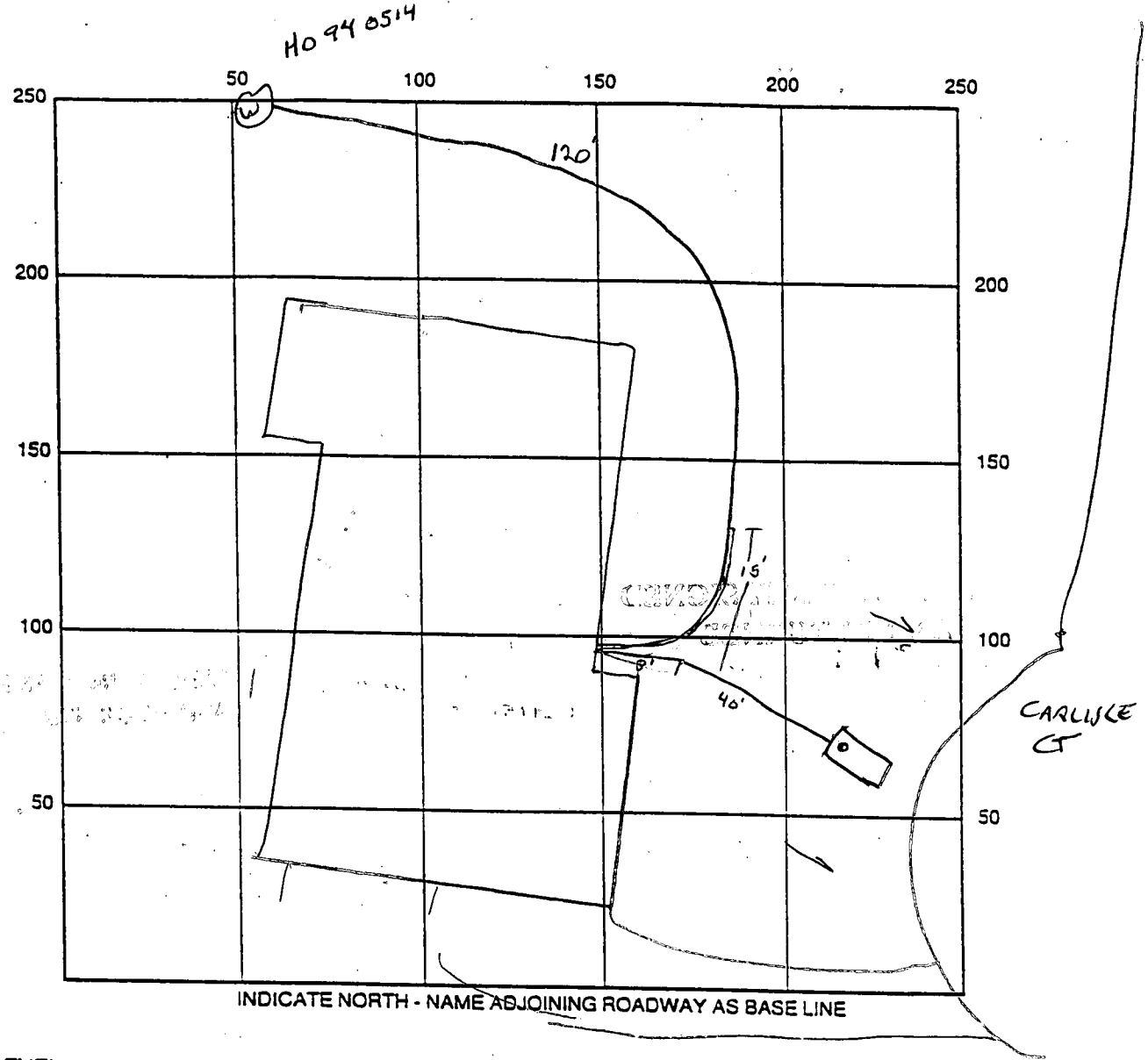
BLDG. PERMIT SIGNED AND RETURNED 5/6/96
Sewall # 63695 - SFD

BLDG. PERMIT [illegible] screen porch/deck AND RETURNED B00129150 - 5/17/01

- House is served by a shared community septic system. As part of the general permit for the community system, items previously installed or under construction include individual septic tank, connection from tank to common effluent line, community system headworks, and shared disposal fields.
- This portion of the septic installation permit is strictly limited to authorization of the individual pump in the pump pit with associatd piping and electrical controls, and installation of the individual house sewer line. Location as per the signed building permit site plan, copy attached.
- Contact Health Department for inspection before covering the installation.
- For the pump test 48 hour advance notice of inspection is required. Where adequate notice has been provided, installation may proceed to completion one-half hour after the scheduled inspection time. OK/CW

P 56509 C

HO 94 0514



SEPTIC TANK LEVEL _____ CLEANOUTS _____

DISTRIBUTION BOX LEVEL _____

DRAIN FIELD/TITLE DEPTH _____ FT. TRENCH WIDTH _____ FT. INLET DEPTH _____ FT.

EFFECTIVE GRAVEL DEPTH _____ FT. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ ONE SIDEWALL/BOTTOM AREA _____ SQ. FT.

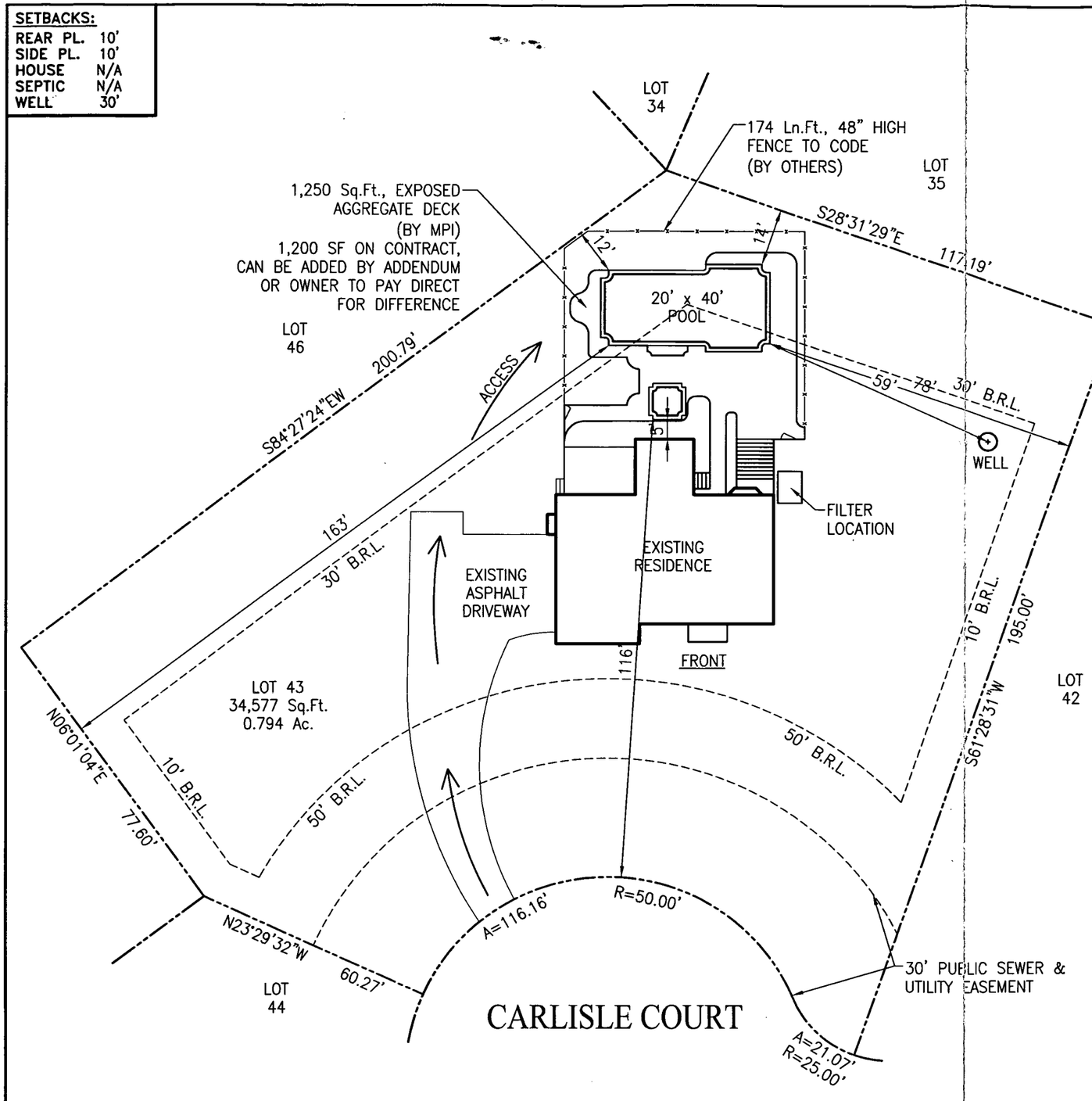
DRYWALL INSIDE DIAMETER _____ FT. EFFECTIVE DEPTH BELOW INLET _____ FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS: 7/31/96 HOUSE TO SEPTIC TANK FOUNDATION CONNECTION OK; W.P.T OK GF. OK TO COVER ALL WORK. NEEDS RMP TEST.
Septic pump test OK – Needs Mira regarding around Manhole Cover per Mr Keller GF 10/31/96

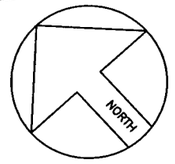
DATE SYSTEM APPROVED 10/31/96 INSPECTOR 10/31/96

SETBACKS:	
REAR PL.	10'
SIDE PL.	10'
HOUSE	N/A
SEPTIC	N/A
WELL	30'



APPROVED
WALK-THRU BUILDING PERMIT
BP# 00149872 A# P56509C
APP. SAN KN DATE: 8-12-04
DESC. OF WORK: inground pool

PRIVATE WELL
& PUBLIC SEWER



ZONE: ONE

SITE PLAN
1"=30'

LOT 43
ASHLEIGH KNOLLS
ACCOUNT #418631
MAP 41, GRID 7, PARCEL 475
ELECTION DISTRICT NO.05
HOWARD COUNTY, MARYLAND

OTHER NUMBERS:
CELLULAR PHONE: 301-908-3757 (Bill)

REVISIONS:
00/00/00

PERMIT SET
DATE: 08-11-04

Maryland POOLS Inc.
9515 GERWIG LANE, SUITE 119, COLUMBIA, MD 21046, 410-995-6600
11166 MAIN STREET, SUITE 402, FAIRFAX, VA 22030, 703-359-7192
800-252-SWIM
WWW.MARYLANDPOOLS.COM

EQUIPMENT LIST

DIRT/GRADING:	MOSTLY HAUL
SPA:	50 SF, W/8JTS,100WLGHT,BLWR&SKIM
RAISED BEAM:	NONE
TILE:	STB-808 (1ST); SURF-240 (2ND)
COPING:	PA FULL RANGE FLAGSTONE - CUT
PLASTER:	WHITE MARBELITE
FILTER SYS:	C&C 420 SF CART. W/3HP PUMP
CLEANING SYS:	PCC-2000
TREATMENT SYS:	MINERAL SPRINGS
CONTROL SYS:	RS-8
HEATER:	AC-125 (HEAT PUMP)
LIGHTS:	ONE **WATTS:** 500 **VOLTS:** 120
LOVESEAT:	(1) @ 6' - INSIDE
AQUA BENCH:	(1) @ 8'
RAIL GOODS:	NONE
DECKING:	1,200 Sq.Ft., EXPOSED AGGREGATE
FENCE:	BY OWNER
POOL COVER:	NONE **TYPE:** N/A
CHEMICALS:	$100 CHEMICAL ALLOWANCE
OTHER ITEMS:	8' DIVING BOARD & STAND
	INITIAL WATER FILL
	MPI LANDSCAPE PACKAGE
	150K BTU (NAT. GAS) SPA HEATER
ELECTRIC:	0 FT.

POOL DATA

SIZE/SHAPE:	20' x 40' - CEYLON		
POOL AREA:	710	**SPA:** 50	**OTHER:**
TOTAL AREA:	760		
PERIMETER:	116	**SPA:** 28	
GALLONAGE:	30,175	**DEPTH:**	3'-6" TO 8'-6"

DIRECTIONS TO SITE

32-W TO 29-S TO 216-W, R/T ONTO BROWNS BRIDGE RD. (@ LIGHT) 1/2 MILE RIGHT ON MOORELAND DR. 1ST LEFT CARLISLE CT. - STAIGHT AHEAD @ CUL-DE-SAC.

MAP # 14
GRID E-13

William & Kelly Raney
7112 Carlisle Court
Clarksville, Maryland 21029
Howard County

HOME PHONE: 301-854-3013
OFFICE PHONE: 301-490-6414
OTHER PHONE: 410-274-6181 (Kelly)

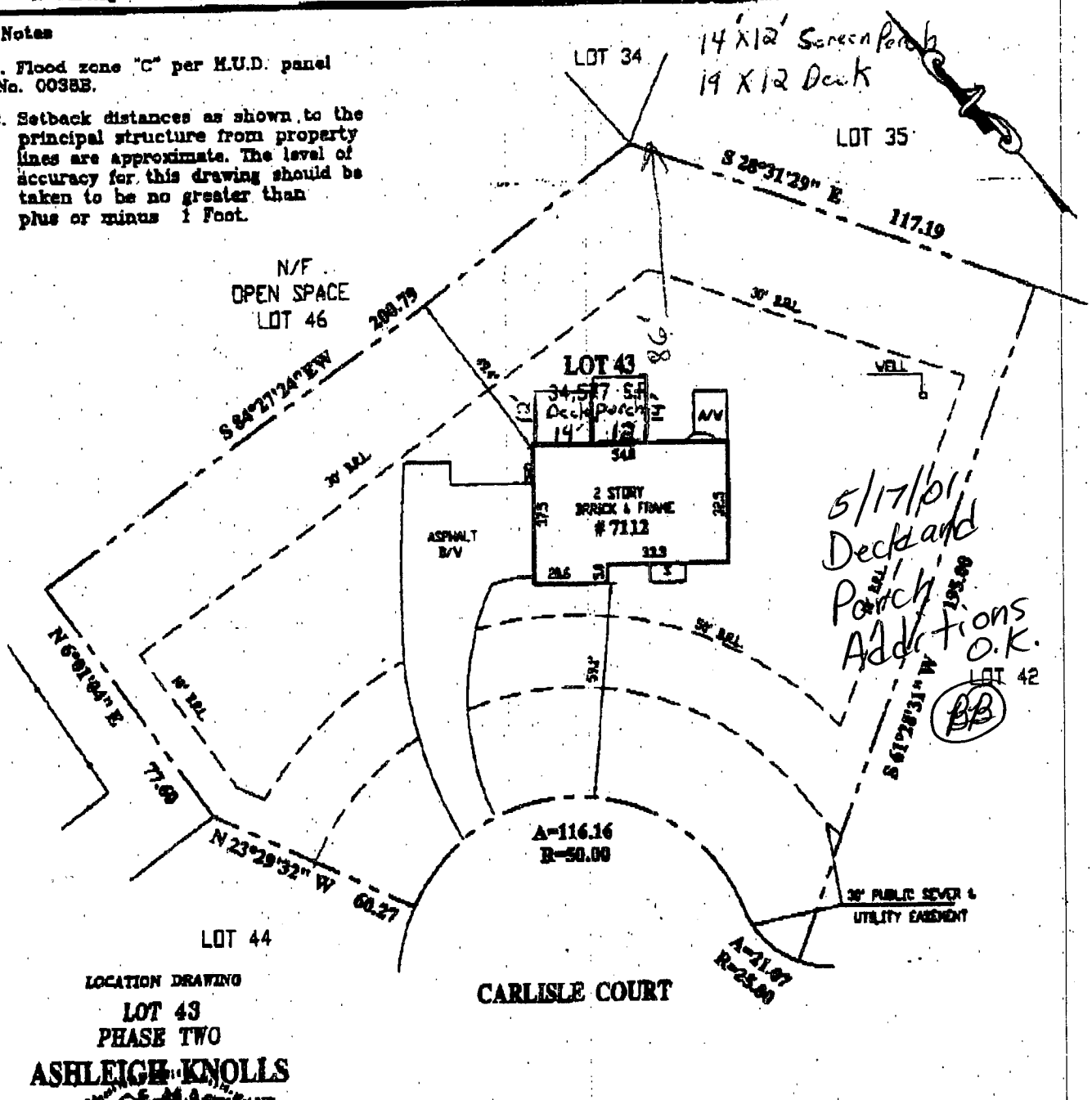
SITE PLAN				ZONE: ONE
LOT: 43	SUBDIVSION NAME: ASHLEIGH KNOLLS	DISTRICT: 05		PIN #: 418631
SCALE: 1"=30'	BY: J.L.R.	DATE: 8/11/04	JOB NUMBER: DW04-8016	SHEET #: S-1

CONSUMER INFORMATION NOTES:

1. This plan is a benefit to a consumer insofar as it is required by a lender or a title insurance company or its agent in connection with contemplated transfer, financing or re-financing.
2. This plan is not to be relied upon for the establishment or location of fences, garages, buildings, or other existing or future improvements.
3. This plan does not provide for the accurate identification of property boundary lines, but such identification may not be required for the transfer of title or securing financing or re-financing.
4. Building line and/or Flood Zone information is taken from available sources and is subject to interpretation of originator.

Notes

1. Flood zone "C" per H.U.D. panel No. 0038B.
2. Setback distances as shown to the principal structure from property lines are approximate. The level of accuracy for this drawing should be taken to be no greater than plus or minus 1 Foot.



LOCATION DRAWING

LOT 43
PHASE TWO
ASHLEIGH KNOLLS
HOWARD COUNTY, MARYLAND

SURVEYOR'S CERTIFICATE

THE INFORMATION SHOWN HEREON HAS BEEN BASED UPON THE RESULTS OF A FIELD INSPECTION PURSUANT TO THE PREPARATION OF A PLAT OF RECORD. EXISTING STRUCTURES SHOWN HEREON WERE LOCATED BASED UPON MEASUREMENTS FROM PROPERTY MARKERS FOUND OR FROM EVIDENCE OF LINES OF PERMANENT OCCUPATION.

MARYLAND PROPERTY LINE SURVEYOR REG. NO. 587

REFERENCES	
PLAT BK.	M.D.R.
PLAT NO.	11640
LIBER	
FOLIO	

SNIDER & ASSOCIATES
SURVEYORS - ENGINEERS
LAND PLANNING CONSULTANTS
2 Professional Drive, Suite 216
Gaithersburg, Maryland 20879
301/948-5100, Fax 301/948-1286

DATE OF LOCATIONS	
WALL CHECK:	
HSE. LOC.:	07-06-00
SCALE:	1" = 40'
DRAWN BY:	S.M.Y.
JOB NO.:	2000-2739

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVE
ELLICOTT CITY, MD 21043
PERMITS (410)313-2455 INSPECTIONS (410)313-1610
AUTOMATED INFORMATION (410) 313-3800

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER B0612950

Building Address 7112 Carlisle Ct Clarksville, Md. 21029

Suite/Apt. #: _____ SDP/WP/Petition #: _____

Census Tract 6051.02 Subdivision Ashley Knoll

Section _____ Area _____ Lot 76 43

Tax Map 40 Parcel 475 Grid 12

Zoning RR Map Coordinates 14E13 Lot size

Property Owner's Name William Raney

Address 7112 Carlisle Ct

City Clarksville State Md Zip Code 21029

Home Phone 301-854-3013 Work Phone _____

Applicant's Name & Mailing Address, (if other than stated hereon):

Phone _____ Fax _____

Existing Use Single Family Dwelling

Proposed Use Screen Porch 14x12 Deck

Estimated Construction Cost $ 9000

Description of Work 14'x12' Screen Porch with 19'x12' Deck with steps

Contractor Company Blake Contractors

Contact Person Paul Blake

Address 4401 Walther Ave

City Balt State Md Zip Code 21214

License No. 18142

Phone 410-254-8447 Fax Same

Occupant or Tenant _____

Contact Name Same

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Engineer or Architect Company X

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

BUILDING DESCRIPTION - *COMMERCIAL*

Building Characteristics

Height:

No. of stories:

Gross area, sq. ft. per floor:

Use group:

Construction type:
____ Reinforced Concrete
____ Structural Steel
____ Masonry
____ Wood Frame

____ State Certified Modular

Utilities

Water Supply:
____ Public
____ Private

Sewage Disposal:
____ Public
____ Private

Electric Yes ☐ No ☐
Gas Yes ☐ No ☐

Heating System:
Electric ☐ Oil ☐
Natural Gas ☐
Propane Gas ☐

Sprinkler system: N/A ☐
____ Full
____ Partial
____ Other Suppression
____ # of Heads

BUILDING DESCRIPTION - *RESIDENTIAL*

Building Characteristics

SF Dwelling ☑ SF Townhouse ☐

	Depth	Width
1st floor:		
2nd floor:		
Basement:		

Finished Basement ☐ Unfinished Basement ☐
Crawl space ☐ Slab on Grade ☐
No. of Bedrooms _____

Multi-family dwellings:
No. of efficiency units: _____
No. of 1 BR units: _____
No. of 2 BR units: _____
No. of 3 BR units: _____

Other Structure:
Dimensions: DECK/POST
Footings:
Roof:

____ State Certified Modular
____ Manufactured Home

Utilities

Water Supply:
☑ Public
____ Private

Sewage Disposal:
____ Public
☑ Private

Electric Yes ☑ No ☐
Gas Yes ☑ No ☐

Heating System:
Electric ☑ Oil ☐
Natural Gas ☑
Propane Gas ☐

Sprinkler system: N/A ☐
____ NFPA #13D
____ NFPA #13R
____ Other:

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.

Larry Tupis
Applicant's Signature

Sales
Title/Company

Larry Tupis
Print Name

3/23/01
Date

Checks payable to: *DIRECTOR OF FINANCE OF HOWARD COUNTY*

** PLEASE WRITE NEATLY AND LEGIBLY. **

FOR OFFICE USE ONLY

AGENCY	DATE	SIGNATURE & COMMENTS	DPZ SETBACK INFORMATION
Land Development, DPZ			Front
State Highways			Rear
Building Official	3/27/01		Side
Dev. Engineering, DPZ			Side St.
Health	3/27/01		All minimum setbacks met? YES ☐ NO ☐
Fire Protection			

PROPERTY I.D. 3048
Filing Fee $ 40.25
Permit Fee $ 30
Excise Tax $
Add'l per. fee $
TOTAL FEES $ 70.25
Subdivision Bond $ 60

HOWARD COUNTY
BUREAU OF UTILITIES
8250 OLD MONTGOMERY ROAD
COLUMBIA, MD 21045
(410) 313-4900

Howard County MARYLAND



FAX COVER SHEET

FAX # (410) 313-4919

Number of Pages: 1
(Including this sheet)

DATE: 10/31/96

TO: Craig Williams

FAX #: 2648

FROM: Jim Miller Utilities

COMMENTS: Pump test for 7112 Carlise CT Lot 43 has been approved

Page _____ of _____
Date _____

Review 9-26-95 OK-AL

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 94-0514
Location of property (road) Carlisle Court
Subdivision Ashleigh Knolls Lot 43 Block _____ Plat _____ Sec. _____
Well Driller G. Easterday Owner Winchester Homes

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

TIME (in 15 minute intervals	WATER LEVEL below M.P.	PUMPING RATE time to fill 5 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)

HD-224

7/31/96
16:00
ok BB

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043
461-9933

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation ✓
Replacement ____

Receipt # ____
Date ____

Name of Installer VanSant Plbg & Htg Telephone 829-0444

License Number 1467
Certified Well Pump Installer ____ Well Driller ____ Registered Plumber ✓

Name of Property Owner Winchester Homes Telephone 670-1010
Subdivision Ashleigh Knolls Lot # 43 Well Tag # Ho-94-0514
Site Address 7112 Carlisle Ct Clarksville.

Pump
1. Type
   a. Deep well jet ____
   b. Shallow well jet ____
   c. Submersible ✓
2. Make Goulds
3. Model # ____
4. Capacity ____ GPM
5. Pump exceeds well capacity Yes ____ No ____
6. If Yes, is low pressure cutoff switch installed? Yes ____ No ✓
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors ____ Cable guards ✓ Other ____

Motor
1. Horsepower ____
2. RPM ____
3. Voltage ____
   a. 110 ____
   b. 220 ____

Pitless Adapter
1. Make Campbell
2. Model # B-10X
3. Depth 48"

Tank
1. Capacity V.100
2. Pressure relief valve? ✓

Piping
1. Type P.S.
2. Size 1"
3. NSF and/or BOCA Code approved ____
4. Depth of supply line 48

Well data
1. Depth ____ ft.
2. Yield ____ GPM
3. Static water level ____ ft.
4. Will water supply be disinfected by installer? ✓

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

Signature of Applicant: Rayford A VanSant

Date: 7/9/96

Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.

&

APPLICATION

A11a

HOWARD COUNTY

PERMIT APPLICATION

DEPARTMENT OF INSPECTIONS, LICENSES & PERMIT
3430 COURT HOUSE DRIVE, ELLICOTT CITY, MARYLAND 21043

10825

SERIAL NUMBER 63695

C-3058

BUILDING ADDRESS (HOUSE NO., STREET, TOWN OR AREA)

7112 Carlisle Ct.
Clarksville, Md. 21029

GRADING/SEDIMENT CONTROL ☒ YES ☐ NO SDP #

DESCRIPTION OF WORK AUTHORIZED

House Type is: Foxhall
2 story, full bsmt., 9 R, 2 FB,
1 HB, garage, 4 BR, opt. FP

LOT NO.	PARCEL NO.	SEC.	AREA	BLOCK NO.	LIBER	FOLIO
43	174	2	2	7		

SUB DIVISION	ZONE	ZONE MAP	ELEC. DIST.	CENSUS TR.
Ashleigh Knolls	RR	41	5	6051.02

OWNER NAME AND ADDRESS — PHONE NO.

Winchester Homes, Inc.
6305 Ivy Ln., Suite 800
Greenbelt, Md. 20770 (301) 474-4411

OCCUPANT'S NAME AND ADDRESS — PHONE NO.

ARCHITECT OR ENGINEER'S NAME AND ADDRESS — PHONE NO.

R.M. Mochi Group
330 N. Ridge Rd., suite 233
Ellicott City, Md. 21043 (410) 461-0079

CONTRACTOR'S NAME AND ADDRESS — PHONE NO.

Winchester Homes, Inc.
Same as above

SIZE OF BLDG.	FRONT	DEPTH	HEIGHT
	54'	37'	10'
	34'	32'	10'
	54'	32'5"	10'

TYPE OF BLDG.	AREA	VOLUME	ROOF
B. ROOMS:	1785	17850	
ROOMS			
BATHS 6	996	9960	
FIREPLACES	1279	12790	

FOOTINGS	FOUNDATION	S. WALLS
16 x 8	8" conc.	wood frm
		siding

UTILITIES					
WATER/WELL	SEWER/SEPTIC	GAS	ELECTRICITY	TYPE OF HEAT	AC
			X	HP	X

I have carefully examined and read this application and know the same is true and correct, and that is doing this work, all provisions of Howard County Ordinances and the State Laws of Maryland will be complied with, whether specified or not; and I will notify the Department of Inspections, and Permits twenty-four hours in advance when I am ready for the inspections called for elsewhere in the application; and that no work will be covered up until such inspections have been complied with.

SIGNATURE

EXISTING USE	PROPOSED USE
Vacant	Res. Single Fam.

EST. CONSTRUCTION COST	LICENSE NUMBER	PERMIT FEE
$143,534	158-14160	

Permit Administrator — TITLE
3/1/96 — DATE

W/S CODE

FOR OFFICE USE ONLY

DISTANCE IN FEET FROM R/W LINE TO FRONT BUILDING LINE

SIDE YARD
(DISTANCE IN FEET FROM SIDE BLDG. LINE TO SIDE PROPERTY LINE)

TO SIDE BUILDING LINE
DISTANCE IN FEET, REAR YD. REQUIRING SET

BACK (CORNER LOT ONLY) SDP #

Check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING X		
SHA X		
SEDIMENT/GRADING X		
BUILDING OFFICIAL X		
WATER & SEWER		
HEALTH DEPT. X	3/6/96	
FIRE PROTECTION		
STORM WATER MGM. X		

CAUTION

To begin construction before a permit placard has been issued and displayed on the job is a violation of the law.

Use and occupancy permit must be applied for two weeks before it will be issued.

APPROVED — DATE

IMPORTANT: PLEASE SHOW ZIP CODES AND AREA CODES WHEREVER REQUIRED.

LP-69-591

Distribution of Copies:
White - Building Official
Green - Planning & Zoning
Yellow - Engineering
Pink - Health Dept.
Gold - S.H.A.

	FF ELEV	INV. OUT OF HOUSE	EXIST. GROUND AT SEPTIC TANK	PROP. GROUND AT SEPTIC TANK	INV. INTO SEPTIC TANK
LOT 24					
LOT 25					
LOT 26					
LOT 27					
LOT 28	505.70	499.70	498.70	500.50	497.00
LOT 29	505.70	499.70	497.80	500.60	497.10
LOT 30	506.30	500.30	497.30	499.20	496.00
LOT 31	503.90	497.90	494.50	496.00	493.00
LOT 32	498.90	492.90	493.10	493.85	490.10
LOT 33					
LOT 34					
LOT 35	501.60	495.60	492.50	496.00	493.10
LOT 36					
LOT 37	506.33	500.33	499.50	501.10	497.10
LOT 38					
LOT 39					
LOT 40	501.20	495.20	491.39	495.10	491.60
LOT 41					
LOT 42					
LOT 43	499.60	493.60	491.91	492.10	488.40
LOT 44	495.47	489.47	489.60	490.50	487.00
LOT 45	495.80	489.80	492.83	492.00	487.80
LOT 47					
LOT 49					

SHEET 2 OF 2

PLOT PLAN

Ashleigh Knolls
Lot 43

DATE: 2/29/96
PROJECT NO.: 89027
DRAWN BY: MWZ/TJP
SCALE: N/A

R.M. MOCHI GROUP, P.C.
CIVIL ENGINEERS LAND SURVEYORS PLANNERS ENVIRONMENTAL
3300 N. Ridge Road, Suite 235
Ellicott City, MD 21043-3305
(410) 461-0079
Fax: (410) 750-6340

C 1 | 2907 (1 2 3 6) — SEQUENCE NO. (MDE USE ONLY) — (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPE

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

COUNTY NUMBER 13-

ST/CO USE ONLY
DATE Received: 09/06/95 (8–13)

DATE WELL COMPLETED: 07/27/95 (15–20)

Depth of Well: 300 (22–26) (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL": HO-94-05/14 (28–37)

OWNER: Winchester Homes
STREET OR RFD: Carlisle (last name) Court (first name) TOWN: Highland
SUBDIVISION: Ashleigh Knolls SECTION: LOT: 43

WELL LOG
Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (Use additional sheets if needed)	FEET FROM	FEET TO	check if water bearing
Top Soil	0	2	
red Clay	2	3	
Sand & Silt	3	61	
Sand Stone	61	66	
Mica	66	75	
Sand Stone	75	77	✓
Mica	77	90	
Sand Stone	90	92	✓
Mica	92	205	
Flint	205	206	✓
Mica	206	300	

NUMBER OF UNSUCCESSFUL WELLS: ____

WELL HYDROFRACTURED: yes [Y] no [N]

CIRCLE APPROPRIATE LETTER
- A — A WELL WAS ABANDONED AND SEALED WHEN THIS WAS COMPLETED
- E — ELECTRIC LOG OBTAINED
- P — TEST WELL CONVERTED TO PRODUCTION WELL

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

TYPE: MWD/MSD/MGD
DRILLERS LIC. NO. 40
George L. Hasselbach
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)
LIC. NO. MWD 501
Mark R. Fuller
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

GROUTING RECORD
WELL HAS BEEN GROUTED (Circle Appropriate Box) yes [Y] (44) no [N] (44)
TYPE OF GROUTING MATERIAL (Circle one)
CEMENT [CM] (45–46) BENTONITE CLAY [BC] (45–46)
NO. OF BAGS 10 NO. OF POUNDS 1000
GALLONS OF WATER 50
DEPTH OF GROUT SEAL (to nearest foot)
from 0 (48–52) TOP ft. to 42 (54–58) BOTTOM ft.
(enter 0 if from surface)

CASING RECORD
casing types insert appropriate code below
STEEL [ST] CONCRETE [CO] PLASTIC [PL] OTHER [OT]

MAIN CASING TYPE	Nominal diameter top (main) casing (nearest inch)!	Total depth of main casing (nearest foot)
ST (60–61)	6 (63–64)	70 (66–70)

OTHER CASING (if used)
EACH CASING

diameter inch	depth (feet) from	to

SCREEN RECORD
screen type or open hole insert appropriate code below
STEEL [ST] BRASS BRONZE [BR] OPEN HOLE [HO] PLASTIC [PL] OTHER [OT]

C 2

EACH SCREEN	DEPTH (nearest ft.)
1	HO (8–9) 68 (11–15) 300 (17–21)
2	(23–24) (26–30) (32–36)
3	(38–39) (41–45) (47–51)

SLOT SIZE 1 ____ 2 ____ 3 ____
DIAMETER OF SCREEN (56–60) (NEAREST INCH)

GRAVEL PACK / IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68: from ____ to ____ [ ] (68)

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)
T (70) (E.R.O.S.) (72) W Q (74 75 76)
TELESCOPE CASING LOG INDICATOR OTHER DATA

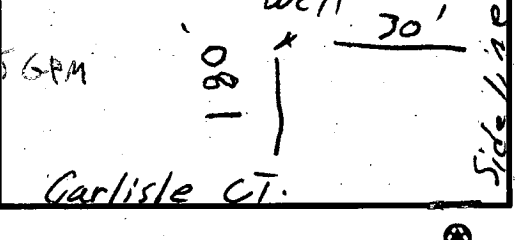
C 3

PUMPING TEST
HOURS PUMPED (nearest hour) 3 (8–9)
PUMPING RATE (gal. per min.) 8 (11–15)
METHOD USED TO MEASURE PUMPING RATE Bucket
WATER LEVEL (distance from land surface)
BEFORE PUMPING 14 (17–20) ft.
WHEN PUMPING 66 (22–25) ft.

TYPE OF PUMP USED (for test)
A air (27) P piston (27) T turbine (27)
C centrifugal (27) R rotary (27) O other (describe below) (27)
J jet (27) S submersible (27)

PUMP INSTALLED
DRILLER WILL INSTALL PUMP (CIRCLE) (YES or NO) YES NO
IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.
TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29. [ ] (29)
CAPACITY: GALLONS PER MINUTE (to nearest gallon) (31–35)
PUMP HORSE POWER (37–41)
PUMP COLUMN LENGTH (nearest ft.) (43–47)
CASING HEIGHT (circle appropriate box and enter casing height)
+ above (49) / – below (49) LAND SURFACE 2 (nearest foot) (50–51)

LOCATION OF WELL ON LOT
SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND /OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)



COUNTY

Page ____ of ____
Date ____

1/25/95 Sat

Review 9-26-95 CK-BF

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 94-0514
Location of property (road) Carlisle Court
Subdivision Ashleigh Knolls Lot 43 Block ____ Plat ____ Sec. ____
Well Driller G. Easterday Owner Winchester Homes

Depth of well 300 4gpm
Distance of measuring point (M.P.) above ground 2 ft
Static water level (S.W.L.) below M.P. 14 ft

I. High rate pumping -- reservoir drawdown

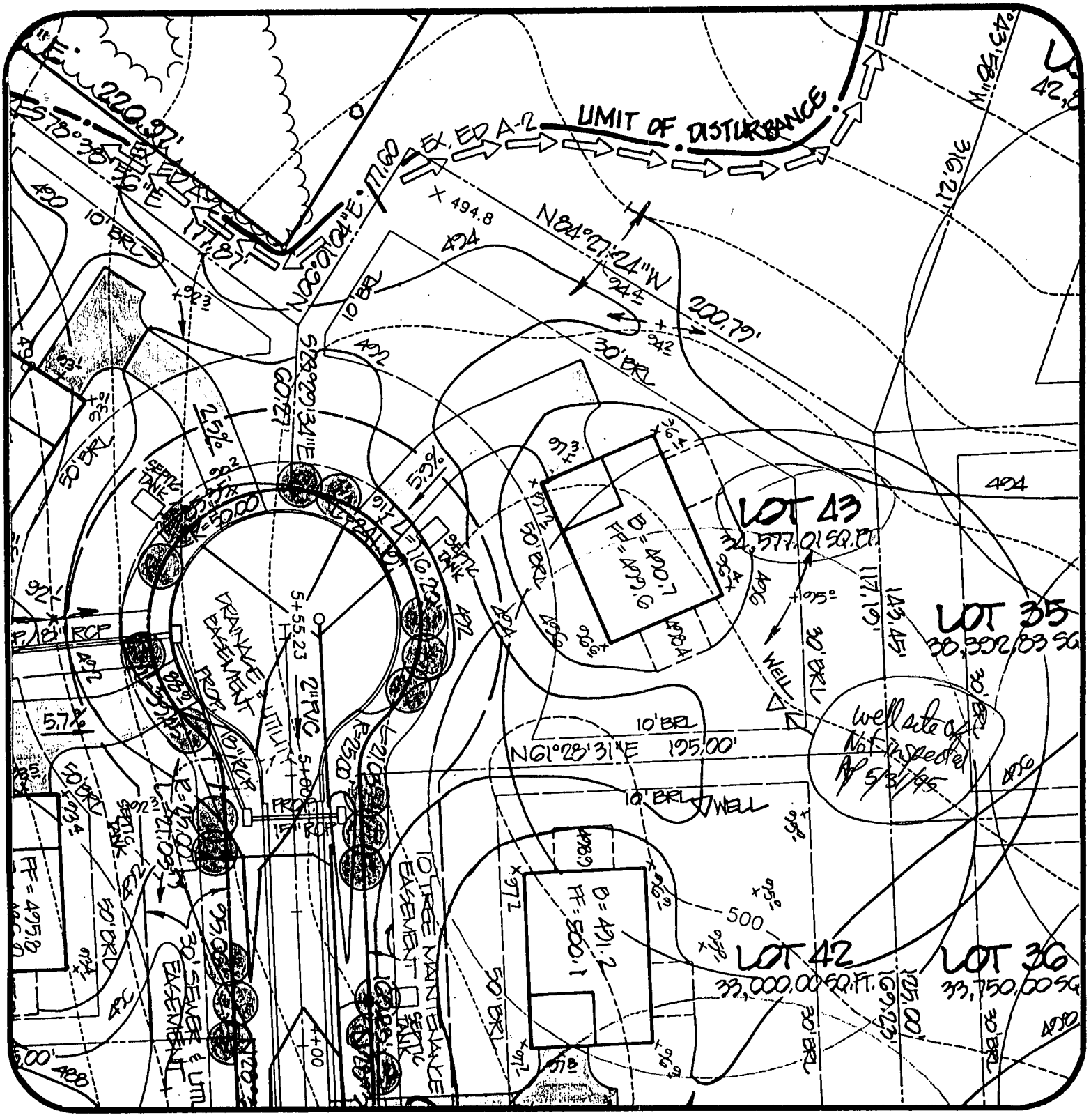
Time pump started 9:45 Pumping rate 12.6 gpm
Total time 15 min to reach pumping water level 66 ft ft. below M.P.

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)
10:00 AM	66 ft	7 sec.	Not USED	8 gpm
10:15 AM	66 ft	7 sec.	Not USED	8 gpm
10:30 AM	66 ft	7 sec.	Not USED	8 gpm
10:45 AM	66 ft	7 sec	Not USED	8 gpm
11:00 AM	66 ft	7 sec.	Not USED	8 gpm
11:15 AM	66 ft	7 sec.	Not USED	8 gpm
11:30 AM	66 ft	7 sec.	Not USED	8 gpm
11:45 AM	66 ft	7 sec.	Not USED	8 gpm
12:00 pm	66 ft	7 sec.	Not USED	8 gpm
12:15 pm	66 ft	7 sec.	Not USED	8 gpm
12:30 pm	66 ft	7 sec.	Not USED	8 gpm
12:45 pm	66 ft	7 sec.	Not USED	8 gpm
1:00 pm	66 ft	7 sec.	Not USED	8 gpm

HD-224

...SHOULD USE SEPARATE SHEET IF NEEDED = 3 GPM



Ashleigh Knolls Lot 43		R.M. MOCHI GROUP, P.C. CIVIL ENGINEERS LAND SURVEYORS PLANNERS ENVIRONMENTAL
DATE: 5/2/95	PROJECT NO.: 89027.01	3300 N. Ridge Road, Suite 235 Ellicott City, MD 21043-3305 (410) 461-0079 Fax: (410) 750-6340
DRAWN BY: TJP	SCALE: 1" = 50'	

STATE USE INDUSTRIES
JESSUP, MD 20794

EMERGENCY/TEMP NO. IF ANY

B 1 **9072** SEQUENCE NO. (DP USE ONLY)
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
please print or type

STATE PERMIT NUMBER **HO-94-0514**
fill in this form completely

Date Received (APA) **05/17/95**

OWNER INFORMATION

Winchester Homes
Last Name — Owner — First Name

6305 Ivy Lane
Street or RFD

Greenbelt MD 20770
Town — State — Zip

DRILLER INFORMATION

George F. Easterday
Driller's Name

MSD/MGD/MWD: 40
License No.

L. Franklin Easterday, Inc.
Firm Name

9265 Brown Church Rd., MT. Airy, Md. 21771
Address

George F. Easterday
Signature — Date

B 2 WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 5

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- (D) HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
- (F) FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
- (I) INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
- (P) PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
- (T) TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

APPROXIMATE DEPTH OF WELL 300 FEET

APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) — JETTED — Jetted & DRIVEN
AIR-ROTary — AIR-PERcussion — ROTARY (Hydraulic Rotary)
CABLE — REVerse-ROTary — DRive-POINT
other

REPLACEMENT OR DEEPENED WELLS
(CIRCLE APPROPRIATE BOX)

- (N) THIS WELL WILL NOT REPLACE AN EXISTING WELL
- (Y) THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
- (S) THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
- (D) THIS WELL WILL DEEPEN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENED (IF AVAILABLE)

Not to be filled in by driller (OEP USE ONLY)

APPROP. PERMIT NUMBER GAP

FORCE RP WRITE INITIALS IN BOX — PERMIT No. HO-94-0514

B 3 LOCATION OF WELL

Howard
COUNTY

Ashleigh Knolls
SUBDIVISION

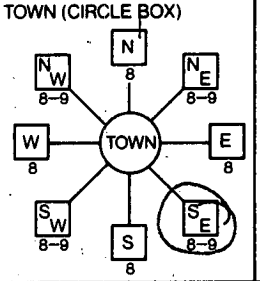
SECTION — LOT 43

Highland
NEAREST TOWN

MILES FROM TOWN (enter 0 if in town) 1 MI

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



CARLISLE CT
NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
NORTH (N) WEST (W) (32) EAST (E) SOUTH (S)

DISTANCE FROM ROAD 180
ENTER FT OR MI FT

TAX MAP: 40 BLK: 12 PARCEL 174

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

Howard — 13
COUNTY NAME — COUNTY NO.

STATE SIGNATURE — INSERT S

DATE ISSUED 05/31/95 — CO SIGNATURE — EXP. DATE 5/31/96

NORTH GRID 48800 — EAST GRID 0017000

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

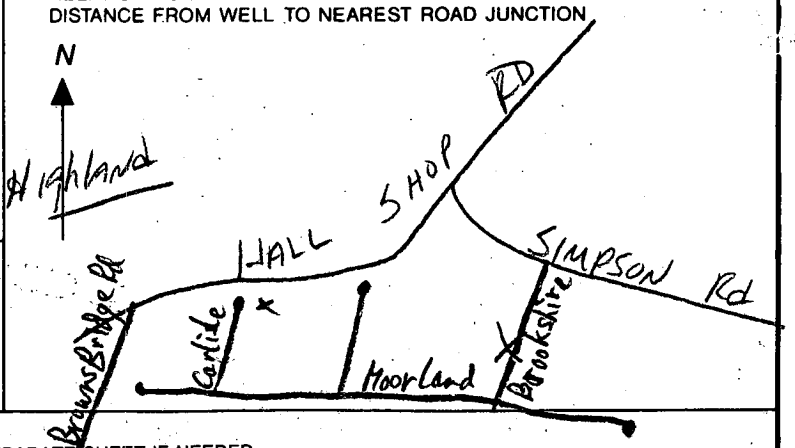
7/27/95
NO INSP

SOURCES OF DRILLING WATER
1. well
2.
3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E 810
N 4808
000
000

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION



SPECIAL CONDITIONS
NOTE = APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED =

COUNTY

HOWARD COUNTY HEALTH DEPARTMENT

Joyce M. Boyd, M.D., County Health Officer

January 24, 1997

Winchester Homes
6305 Ivy Lane, Suite 800
Greenbelt, Maryland 20770

RE: Ashleigh Knolls, Lot #43
7112 Carlisle Court
Well Permit #HO-94-0514

Dear Sirs:

This is to advise you that the septic system for the above referenced property received final approval on October 31, 1996.

The water sample recently submitted for testing was free of coliform and fecal coliform bacteria at the time of sampling and is bacteriologically safe for drinking.

INTERIM CERTIFICATE OF POTABILITY

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-94-0514. No guarantee can be given for health protection beyond this date of issue. Based upon satisfactory investigation and evaluation by the Howard County Health Department, the Maryland Department of the Environment accepts this well system as required by COMAR 26.04.04.09.

This certificate may become final upon completion of the final bacteriological test which is to be taken by the county health department within six months. **It is requested that the homeowner contact Mr. Dave Schroeder, R.S., to schedule follow up water sampling.**

Dates of Water Samples: November 1, 1996 (Chemical)
November 7, 1996 (Bacteriological)
Date of Well Completion: July 27, 1995

Approving Authority
Donna K. Soe, R.S.
Water and Sewerage Program

DKS
cc: Building Inspector's office
file