

1 08949 1 2 3 6	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL 8251 please type	STATE PERMIT NUMBER HO-94-2715 70 fill in this form completely 79
Date Received (APA) 5/15/00 8 MM DD YY 13 Stanton 15 Last Name Owner First Name 34 Tom 36 Street or RFD 55 11961 Simpson Rd 57 Town 70 State 72 Zip 76 Clarksville, Md 21029	OWNER INFORMATION RN 8251 LOCATION OF WELL CC# 8 COUNTY 21 Howard 23 SUBDIVISION 42 Cherry Brae SECTION 44 46 LOT 48 50 08 Highland 52 NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) 1 M I 73 76 77 78		
DRILLER INFORMATION George F. Easterday M WD 040 Driller's Name 76 License No. 81 L. Franklin Easterday, Inc. Firm Name 9265 Brown Church Rd., MT. Airy, Md. 21771 Address Signature <i>George F. Easterday</i> Date 5/15/2000			
WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 8 12 500 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 20 500			
USE FOR WATER (CIRCLE APPROPRIATE BOX) ☒ DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION ☐ FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) 22 ☐ INDUSTRIAL, COMMERCIAL, DEWATERING ☐ PUBLIC WATER SUPPLY WELL ☐ TEST, OBSERVATION, MONITORING ☐ GEO-THERMAL			
APPROXIMATE DEPTH OF WELL 24 28 FEET 300 APPROXIMATE DIAMETER OF WELL 6 INCH 6 METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jetted & DRIVEN 30 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary) 37 CABLE REVERSE-ROTARY DRIVE-POINT other			
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) ☒ THIS WELL WILL NOT REPLACE AN EXISTING WELL ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS ☐ THIS WELL WILL DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52			
Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROX. PERMIT NUMBER 54 GAP 63 PERMIT No. HO-94-2715 70 71 72 73 74 75 76 77 78 79			
SPECIAL CONDITIONS NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -			

LOCATION OF WELL

11 NEAR WHAT ROAD 30
Simpson Rd

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 NORTH
 WEST
 EAST
 SOUTH
 34 50 37
 DISTANCE FROM ROAD
 ENTER FT OR MI 38 39
 TAX MAP: 41 BLK: 7/8 PARCEL 198

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard COUNTY NAME
A512784C COUNTY NO.
 STATE SIGNATURE INSERT S →
 DATE ISSUED 41
052500 A MCMOR 5/25/61
 43 MM DD YY 48 CO SIGNATURE EXP. DATE
 NORTH GRID 50 488 000 EAST GRID 57 0821 000 63

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER
 1. wells
 2.
 3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E 820
 N 480

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

14 G 13

C1 77780		SEQUENCE NO. (MDE USE ONLY)		STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE TYPE		THIS REPORT MUST BE SUBMITTED AFTER WELL IS COMPLETED.																																		
ST/CO USE ONLY DATE Received JUL 12 2000		DATE WELL COMPLETED 6/26/00		Depth of Well 22 <u>300</u> 26 (TO NEAREST FOOT)		COUNTY NUMBER <u>AS/2784 C</u> PERMIT NO. FROM "PERMIT TO DRILL WELL" <u>H0-94-2715</u>																																		
OWNER last name <u>Stanton</u> first name <u>Tom</u>		STREET OR RFD <u>Simpson Road</u>		TOWN <u>Highland</u>		SUBDIVISION <u>Cherry Brae</u> SECTION LOT <u>8</u>																																		
WELL LOG Not required for driven wells		GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) <u>Y</u> <u>N</u>		C3		PUMPING TEST																																		
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING		TYPE OF GROUTING MATERIAL (Circle one) CEMENT <u>CM</u> BENTONITE CLAY <u>BC</u>		HOURS PUMPED (nearest hour) <u>3</u>		PUMPING RATE (gal. per min.) <u>95.4</u>																																		
DESCRIPTION (Use additional sheets if needed)		NO. OF BAGS <u>22</u> NO. OF POUNDS <u>3700</u>		METHOD USED TO MEASURE PUMPING RATE <u>Bucket</u>		WATER LEVEL (distance from land surface)																																		
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">FEET</th> <th colspan="2">check if water bearing</th> </tr> <tr> <th>FROM</th> <th>TO</th> </tr> </thead> <tbody> <tr> <td>TOP SOIL</td> <td>0</td> <td>2</td> </tr> <tr> <td>shaley clay</td> <td>2</td> <td>15</td> </tr> <tr> <td>brown shale</td> <td>15</td> <td>65</td> </tr> <tr> <td>Mica</td> <td>65</td> <td>80</td> </tr> <tr> <td>Sand Stone</td> <td>80</td> <td>81</td> <td>✓</td> </tr> <tr> <td>Mica</td> <td>81</td> <td>125</td> <td></td> </tr> <tr> <td>Sand Stone</td> <td>125</td> <td>126</td> <td>✓</td> </tr> <tr> <td>Mica</td> <td>126</td> <td>300</td> <td></td> </tr> </tbody> </table>		FEET	check if water bearing		FROM	TO	TOP SOIL	0	2	shaley clay	2	15	brown shale	15	65	Mica	65	80	Sand Stone	80	81	✓	Mica	81	125		Sand Stone	125	126	✓	Mica	126	300		GALLONS OF WATER <u>192</u>		DEPTH OF GROUT SEAL (to nearest foot) <u>50</u>		BEFORE PUMPING <u>34</u> ft.	
FEET	check if water bearing																																							
	FROM	TO																																						
TOP SOIL	0	2																																						
shaley clay	2	15																																						
brown shale	15	65																																						
Mica	65	80																																						
Sand Stone	80	81	✓																																					
Mica	81	125																																						
Sand Stone	125	126	✓																																					
Mica	126	300																																						
		from <u>0</u> TOP 52 ft. to <u>50</u> BOTTOM 58 ft. (enter 0 if from surface)		WHEN PUMPING <u>217</u> ft.		TYPE OF PUMP USED (for test)																																		
		CASING RECORD casing types insert appropriate code below ST CO STEEL CONCRETE PL OT PLASTIC OTHER		MAIN CASING TYPE <u>ST</u>		Nominal diameter top (main) casing (nearest inch) <u>6</u>		Total depth of main casing (nearest foot) <u>76</u>																																
		OTHER CASING (if used) diameter inch depth (feet) from to		TYPE OF PUMP USED (for test)		TYPE OF PUMP USED (for test)																																		
		screen type or open hole insert appropriate code below ST BR HO STEEL BRASS BRONZE OPEN HOLE PL OT PLASTIC OTHER		TYPE OF PUMP USED (for test)		TYPE OF PUMP USED (for test)		TYPE OF PUMP USED (for test)																																
NUMBER OF UNSUCCESSFUL WELLS:		C2 DEPTH (nearest ft.)		TYPE OF PUMP USED (for test)		TYPE OF PUMP USED (for test)																																		
WELL HYDROFRACTURED <u>Y</u> <u>N</u>		1 <u>40</u> 74 300		TYPE OF PUMP USED (for test)		TYPE OF PUMP USED (for test)																																		
CIRCLE APPROPRIATE LETTER A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED E ELECTRIC LOG OBTAINED P TEST WELL CONVERTED TO PRODUCTION WELL		2 <u>23</u> 24 26 30 32 36		TYPE OF PUMP USED (for test)		TYPE OF PUMP USED (for test)																																		
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.		3 <u>38</u> 39 41 45 47 51		TYPE OF PUMP USED (for test)		TYPE OF PUMP USED (for test)																																		
DRILLERS LIC. NO. 1 <u>MW D040</u> <u>George F. Enderburg</u> DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)		4 <u>43</u> 44 46 50 52 56		TYPE OF PUMP USED (for test)		TYPE OF PUMP USED (for test)																																		
LIC. NO. 1 <u>MW D 501</u> <u>Charles R. Latta</u> SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		5 <u>48</u> 49 51 55 57 61		TYPE OF PUMP USED (for test)		TYPE OF PUMP USED (for test)																																		
		GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68		TYPE OF PUMP USED (for test)		TYPE OF PUMP USED (for test)																																		
		MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q		TYPE OF PUMP USED (for test)		TYPE OF PUMP USED (for test)																																		
		70 72 74 75 76		TYPE OF PUMP USED (for test)		TYPE OF PUMP USED (for test)																																		
		TELESCOPE CASING LOG INDICATOR OTHER DATA		TYPE OF PUMP USED (for test)		TYPE OF PUMP USED (for test)																																		

LOCATION OF WELL ON LOT
 SHOW PERMANENT STRUCTURES AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)



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

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: Fogle's Well Pump + Water Treatment, LLC Telephone #: 410-795-1535

Address: P.O. Box 63

Woodbine, Maryland 21797

Must circle one: Licensed Plumber / Licensed Well Driller / Licensed Well Pump Installer

License # and name of individual responsible for the field installation:

Name (Print): Dave C. Fogle License# MSD226

*A licensed individual must perform the actual installation. Apprentices must be under the supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification. Unlicensed individuals may be reported to the appropriate licensing agency.

Name of Property Owner: Williamsburg Farm Telephone #:

Subdivision: Cherry Bay

Lot #:

Well Tag #: HO-94-2715 ✓

Site Address: 11915 Simpson Rd
Clarksville, MD 21029

Submersible Pump Data

Make: Gundorf

Model #: ISSQ507-180

Pump Capacity: 15

Well Yield: 6.4

Depth of well encountered at time of pump installation: 300 (feet)

If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4

Must circle one: Torque arrestors / Cable guards / Other acceptable method used

Safety rope, if used, attached to brass rope adapter or other acceptable method inside of well casing N/A

Pitless Adapter

Make: Campbell

Model#: N/A

GPM Depth: 36" (36" min)

GPM NSF/WSC approved: yes

Well Cap and Electric Conduit

Two piece watertight cap: yes

Screened, vented well cap: yes

Cap secured to casing: yes

Conduit min 18" B.G.: yes

Conduit secured to well cap: yes

Piping to house

Type: 1" poly pipe

PSI: 200 psi (160 psi min)

Depth of supply line: 36" (36" min)

House Connection

PVC sleeve to undisturbed soil at wall penetration: yes

Length of sleeve (5' minimum from foundation): 6'

Sleeve sealed properly: yes

The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Signature of company representative responsible for installation

Date

4/6/2026

For Health Department Use Only - Not to be completed by installer

Date Insp. Requested: 4/6/2026 Date Insp. Approved: 4/6/2026 Inspector:

Inspection Data: Pitless adapter watertight & water supply line at least 36" below grade
Two piece cap installed and attached to casing securely
Elec. conduit extends at least 18" below grade/attached to cap properly
Safety rope not outside of well cap/casing
Correct well tag attached properly and casing 8" above finished grade
Water supply line sleeved adequately at house connection
Adequate grout observed below pitless adapter

SP
✓ 4'
✓ 32"
✓ 32"
✓ 1'
✓ 1'
✓ 1'

(Revised form 10/24/2016)

INTERIM CERTIFICATE OF POTABILITY

Expiration Date – December 16, 2026

June 16, 2026

Homeowner
11915 Simpson Road
Clarksville, MD 21029

RE: Cherry Brae, Lot 8
11915 Simpson Rd
Building Permit: B25004107
Well Permit: HO-94-2715

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 **6/9/2026**. Final approval of the well line connection to the dwelling was granted on **4/6/2026**. The well construction was completed on **6/26/2000**. Water samples were collected on **5/13/2026, 6/2/2026, 6/10/2026**.

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-94-2715. 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>



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1.866.313.6300 - Toll Free

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

In closing, please refer to our "[Homeowner Fact Sheet](#)" which illustrates a better understanding for your Onsite Sewage Disposal System. You will also find a link to Maryland Department of the Environment's website which describes in further detail operation and maintenance of your septic system.

Approving Authority,

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

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

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

1413 Old Taneytown Rd. Westminster, MD (410) 848-1014 (410) 876-4554

REPORT OF ANALYSIS

Laboratory ID #:	181600	Account #:	1933
Reference:	Cherry Bray Lot 8	Client:	Fogle's Well Pump & Treatment
Location:	11915 Simpson Road	Requested By:	Dave Fogle
	Clarksville, MD 21029	Source:	Well Water
Date/ Time Collected:	6/10/2026 0930	Site:	Pressure Tank
Date/Time Rec'd:	6/10/2026 1347	Treatment:	None
Chlorine ppm:	Free: ND Total: ND	pH:	5.5
Collected By:	J. Evans 0309JE	Well #:	HO-94-2715

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	6/11/2026 / 0900 / KDR
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	6/11/2026 / 0900 / KDR

NOTES:

- 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 & Occupancy
Building Permit # : 25004107

Date Reported: 6/11/2026

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

1413 Old Taneytown Rd. Westminster, MD (410) 848-1014 (410) 876-4554

REPORT OF ANALYSIS

Laboratory ID #:	181401	Account #:	1933
Reference:	Cherry Bray Lot 8	Client:	Fogle's Well Pump & Treatment
Location:	11915 Simpson Road	Requested By:	Dave Fogle
	Clarksville, MD 21029	Source:	Well Water
Date/ Time Collected:	6/2/2026 0930	Site:	Pressure Tank
Date/Time Rec'd:	6/2/2026 1207	Treatment:	Prior to Multimedia Unit
Chlorine ppm:	Free: ND Total: ND	pH:	5.3
Collected By:	J. Evans 0309JE	Well #:	HO-94-2715

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Sand	ND	mg/L	5	Visual/Gravimetric	6/2/2026 / 1645 / KDR

OK

NOTES:

- 1 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 2 Sample collected by client, analyzed as received
- 3 ND:None Detected
- 4 pH and Chlorine level tested in lab (pH tested after recommended holding time)
- 5 Visual well check: Sealed, vented cap

Reason for Test : Use & Occupancy

Building Permit # : B25004107

Date Reported: 6/3/2026

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

1413 Old Taneytown Rd. Westminster, MD (410) 848-1014 (410) 876-4554

REPORT OF ANALYSIS

Laboratory ID #:	181400	Account #:	1933
Reference:	Cherry Bray Lot 8	Client:	Fogle's Well Pump & Treatment
Location:	11915 Simpson Road	Requested By:	Dave Fogle
	Clarksville, MD 21029	Source:	Well Water
Date/ Time Collected:	6/2/2026 0930	Site:	Hose Bib
Date/Time Rec'd:	6/2/2026 1207	Treatment:	Multimedia
Chlorine ppm:	Free: ND Total: ND	pH:	5.3
Collected By:	J. Evans 0309JE	Well #:	HO-94-2715

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	6.4	MPN/ 100 ml	<1.0	SM20 9223B	6/3/2026 / 0805 / KDR
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	6/3/2026 / 0805 / KDR
Turbidity	2.35	NTU	<10	SM2130B	6/2/2026 / 1615 / KDR
Iron	0.13	mg/L	0.3*	Hach 8146	6/2/2026 / 1620 / KDR

NOTES:

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

Reason for Test : Use & Occupancy
Building Permit # : B25004107

Date Reported: 6/3/2026

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

1413 Old Taneytown Rd. Westminster, MD (410) 848-1014 (410) 876-4554

REPORT OF ANALYSIS

Laboratory ID #: 181030 Account #: 1933
Reference: Williamsburg Group Client: Fogle's Well Pump & Treatment
Location: 11915 Simpson Road Requested By: Dave Fogle
Clarksville, MD 21029 Source: Well Water
Date/ Time Collected: 5/13/2026 0930 Site: Pressure Tank
Date/Time Rec'd: 5/13/2026 1400 Treatment: None
Chlorine ppm: Free: ND Total: ND pH: 5.7
Collected By: P. Rouchard 4460PR Well #: HO-94-2715

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	19.2	MPN/ 100 ml	<1.0	SM20 9223B	5/14/2026 / 0900 / KDR
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM20 9223B	5/14/2026 / 0900 / KDR
Nitrate.	9.09	mg/L (as N)	10	EPA 300.0	5/13/2026 / 1558 / KDR
Turbidity	14.1	NTU	<10	SM2130B	5/14/2026 / 0855 / KDR
Sand	>5	mg/L	5	Visual/Gravimetric	5/14/2026 / 0920 / KDR
Iron	1.27	mg/L	0.3*	Hach 8146	5/14/2026 / 0945 / KDR

NOTES:

- 1 *SMCL = Secondary Maximum Contaminant Level
- 2 mg/L = milligrams per liter (also, parts per million)
- 3 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 4 NTU = Nephelometric Turbidity Units
- 5 pH and Chlorine level tested in lab (pH tested after recommended holding time)
- 6 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 7 ND:None Detected
- 8 Visual well check: Sealed, vented cap
- 9 Sample collected by client, analyzed as received

Reason for Test : Use & Occupancy

Building Permit # : B25004107

Date Reported: 5/14/2026

Oswald Jr, Woodin

From: Oswald Jr, Woodin
Sent: Wednesday, May 8, 2024 3:52 PM
To: jim@jnmengineeringllc.com
Cc: 'Bruce Harvey'; Silvast, Zackary
Subject: RE: Simpson Road Lots 7 (11935 Simpson Road) and 8 (11915 Simpson Road)

Hi Jim,

As for Lot 7 (11935 Simpson Road), the homeowner will need to ask for a variance from MDE for the well box on this lot. The well box on Lot 7 is considered downgrade of the SDA located on Lot 6 (11945 Simpson Road). A revised perc cert plan is required to add the well box and adjust the SDA. No additional perc testing is required at this time.

Lot 8 (11915 Simpson Road) - A revised perc cert plan is required to add the alternate well sites and adjust the SDA. No additional perc testing is required at this time.

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

Thanks,

Hank

Hank Oswald
Licensed Environmental Health Specialist
Bureau of Environmental Health
Howard County Health Department
8930 Stanford Blvd. Columbia, MD 21045
(410) 313 - 1786
www.hchealth.org

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From: jim@jnmengineeringllc.com <jim@jnmengineeringllc.com>
Sent: Tuesday, May 7, 2024 10:46 AM
To: Oswald Jr, Woodin <hoswald@howardcountymd.gov>
Cc: 'Bruce Harvey' <BruceHarvey@williamsburgllc.com>; Silvast, Zackary <zsilvast@howardcountymd.gov>
Subject: RE: Simpson Road Lots 7 (11935 Simpson Road) and 8 (11915 Simpson Road)

[Note: This email originated from outside of the organization. Please only click on links or attachments if you know the sender.]

Thank you Hank. Zack if you need any additional info to make this call please let me know. They have a settlement date at the end of the week and we want to make sure everything is good.

Hank, based on our discussions we have adjusted the SDA from the approved plat (shown in red on attached). We will still have the min. 10,000sf and will be within the boundary of the previously approved perc locations. The purpose of

moving the SDA is to allow more room for a well box and to also allow sufficient room for a house while meeting the 30' well setback and 20' septic setback. I wanted to see if this would be okay for just a new perc certification plan without additional testing. Our goal is to avoid this if we can. If needed, I can swing in for a quick meeting to discuss.

Thanks again for the help,
Jim

From: Oswald Jr, Woodin <hoswald@howardcountymd.gov>
Sent: Monday, May 6, 2024 9:00 AM
To: Jim Witmer <jim@jnmengineeringllc.com>
Cc: Bruce Harvey <BruceHarvey@williamsburgllc.com>; Silvast, Zackary <zsilvast@howardcountymd.gov>
Subject: Simpson Road Lots 7 (11935 Simpson Road) and 8 (11915 Simpson Road)

5/6/2024

Hi Jim,

Good morning. I will need to refer this question about the down grade well on **11935 Simpson Road, Lot 7** to my supervisor Zack Silvast/upper management. In the interim, do you have a copy of the completion report for this well (tag # HO-94-2716)?

Any adjustment to the SDA on **11915 Simpson Road, Lot 8** will require a revised perc cert plan. Additional perc testing may be required depending on the changes.

Regards,

Hank

Hank Oswald
Licensed Environmental Health Specialist
Bureau of Environmental Health
Howard County Health Department
8930 Stanford Blvd. Columbia, MD 21045
(410) 313 - 1786
www.hchealth.org

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5/5/2024

Hi Hank,

Thank you for clarifying for us on the perc testing. We have completed the survey for the lot and have a couple more questions. Please see attached exhibits.

Lot 7 – The existing well has been shown and we have also shown a 1,500sf well box as required. The well box is downhill from the lot 6 septic area and is just over 100-feet away. Given this is an existing lot, is this acceptable? My

client is going to be purchasing the lots and we are trying to figure out if there will be any concerns from the HD based on what was previously approved. Also, the well is at the same elevation as the septic reserve area.

Lot 8- The existing well is within 100-feet of the approved septic area as shown on the plat. The septic area is 11,321sf and could be shortened where the well arcs encroach and expanded downgrade and we would still be able to get a minimum 10,000sf. We would also adjust to avoid the alternate well locations and the well box for lot 7. Given this, would we be required to add perc locations or would we just have to submit a revised perc certification plan. I have include the approximate perc locations and the results on the plans for reference.

If its easier for me to swing by to discuss just let me know.

Thanks,
Jim Witmer, PE, PS
President
 JNM Engineering, LLC
1 Park Avenue, suite 1A
Mount Airy, MD 21771
301-514-2808
www.jnmengineeringllc.com

4/23/2024

Hi Jim,

Good morning. The perc test notes (attached) for 11935 (Lot 7) & 11915 (Lot 8) Simpson Road are acceptable. Therefore, we won't have to perc. However, if the engineer has to shift the SDA to fit a house & 2 alternate well sites on the OSDS plan, then additional perc testing will likely be required leading to a revised perc cert plan.

Please contact me with any questions.

Regards,

Hank

Hank Oswald
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Bureau of Environmental Health
Howard County Health Department
8930 Stanford Blvd. Columbia, MD 21045
(410) 313 - 1786
www.hchealth.org

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* will there

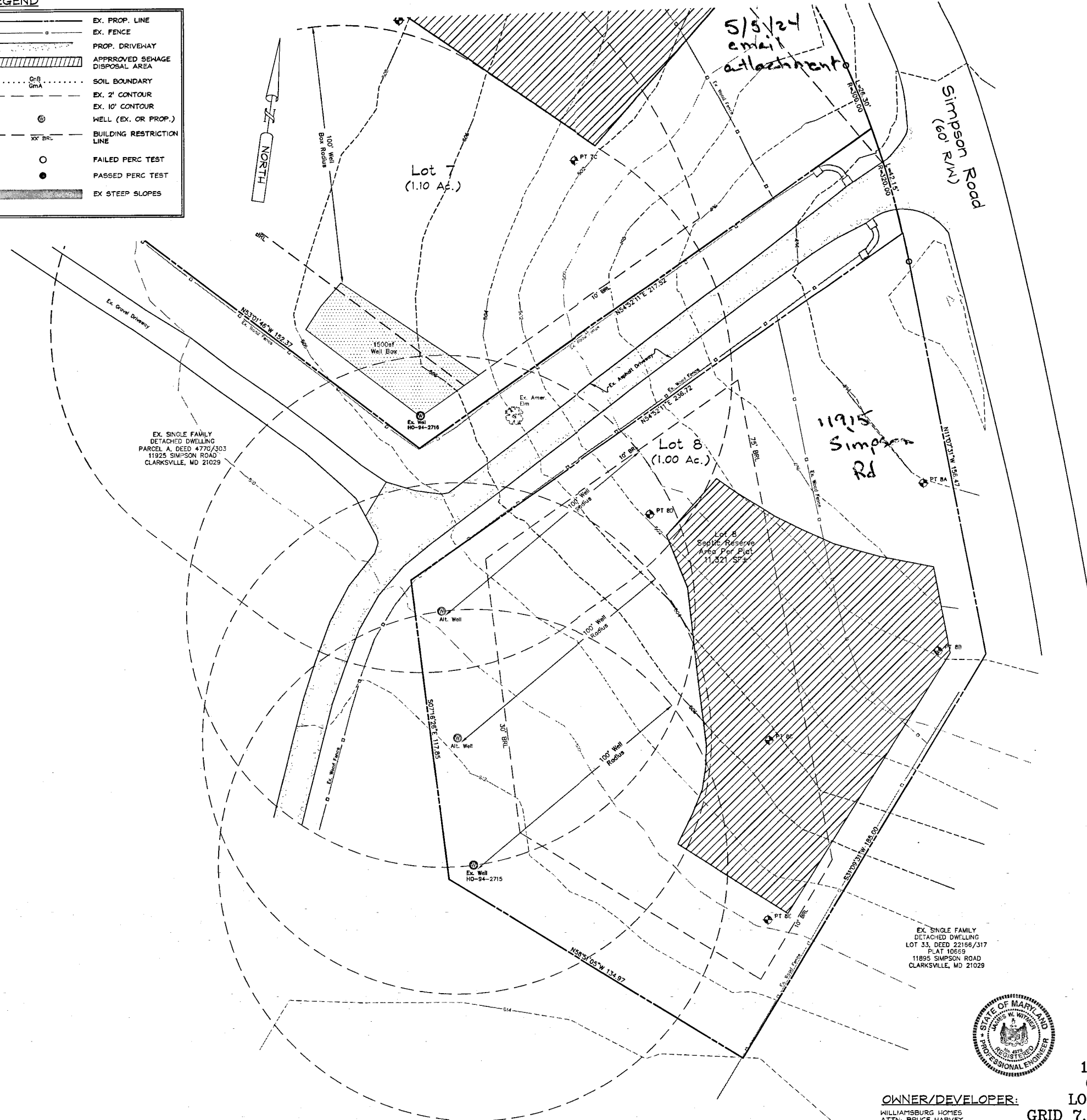
adjustment SDA

require additional

forecasting?

PROPERTY IS ZONED RR-0EO.
PROPERTY BOUNDARY SHOWN IS BASED ON CURRENT PLAT AND A SURVEY CONDUCTED BY JIM ENGINEERING, LLC DATED APRIL, 2024.
REFERENCE: LIBER 4770 PAGE 303
EXISTING TOPOGRAPHY ONSITE IS BASED ON A FIELD RUN SURVEY CONDUCTED BY JIM ENGINEERING IN APRIL, 2024. OFFSITE TOPOGRAPHY IS BASED ON A REVISION TO THE 1997 SURVEY BY JIM ENGINEERING, LLC DATED APRIL, 2024.
EXISTING TOPOGRAPHY ON THE SEPTIC AREA IS NOT PERMITTED WITHOUT ADDITIONAL TYPING.
POINTS SHOWN ON THIS PLAN ARE FROM THE USDA WEB SOIL SURVEY. THE AREAS SHOWN HEREON COMPLY WITH THE MINIMUM OWNERSHIP WIDTH AND ARE NOT TO BE USED FOR A RESIDENTIAL LOT OR A LOT OF THE ENVIRONMENT.
EXISTING WELLS AND SEWERAGE DISPOSAL AREAS AND COMPONENTS WITHIN 100 FEET OF THE PROPERTY BOUNDARIES AND ALL EXISTING/PROPOSED WELLS ARE TO BE GRADED TO THE SURFACE. ALL EXISTING/PROPOSED SEPTIC SYSTEMS HAVE BEEN REMOVED FROM THE BEST AVAILABLE INFORMATION.
THE LOT WAS CREATED BY PLAT (14485) DATED OCTOBER 26, 2020.
APPROVED GROSS PLAN WILL BE REQUIRED PRIOR TO BUILDING PERMIT.
DRAINAGE
SEPTIC TANK AND PUMP CHAMBERS COVER DEPTHS SHALL NOT EXCEED 3- FEET UNLESS DESIGNED AND APPROVED NOTING A TRAFFIC BEARING LID.
A CHANGE TO THE LOCATIONS OF DEPTHS TO THE ADJACENT HEALTH DEPARTMENT MUST BE APPROVED BY THE ENGINEER. THE ADJACENT HEALTH DEPARTMENT MUST BE NOTIFIED FOR INSTALLATION. A REVISED PLAN MAY BE REQUIRED.

	EX. PROP. LINE
	EX. FENCE
	PROP. DRIVEWAY
	APPROVED SEWAGE DISPOSAL AREA
	SOIL BOUNDARY
	EX. 2' CONTOUR
	EX. 10' CONTOUR
	WELL (EX. OR PROP.)
	BUILDING RESTRICTION LINE
	FAILED PERC TEST
	PASSED PERC TEST
	EX STEEP SLOPES

[illegible]

11915 SW SIMPSON ROAD
CLARKSVILLE, MD 21029
LOT 8, PLAT 14485, MAP 41
GRID 7, 1.00 ACRES, ACCT#05-434408
ONSITE SEWAGE DISPOSAL
SYSTEM DESIGN PLAN

JNM ENGINEERING, LLC
CIVIL ENGINEERING, SURVEYING, LAND PLANNING,
ENVIRONMENTAL, ARBORICULTURE, LEED PROFESSIONAL
105 LEAFY HOLLOW CIRCLE, MOUNT AIRY, MD 21771
(301) 514-2868, JNTEngineeringLLC.com



1 OF 5

[illegible]

11915 SW SIMPSON ROAD
TAX MAP 41, LOT 8 PLAT 14485, 1.10 ACRES
ELECT. DIST. 5, HOWARD COUNTY, MARYLAND

JNM ENGINEERING, LLC
CIVIL ENGINEERING, SURVEYING, LAND PLANNING,
ENVIRONMENTAL, ARBORICULTURE, LEED PROFESSIONALS
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