

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

INDEXED

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

DISTRICT 4th

DATE 7/24/91

DATE SYSTEM APPROVED 8/1/91

INSPECTOR C.B.O.

Fogle's Septic Clean

IS PERMITTED TO INSTALL X ALTER

ADDRESS 558 Obrecht Road, Sykesville, Maryland 21784 PHONE 795-5670

SUBDIVISION Femiano Estates LOT 11 ROAD 14670 Triadelphia Road

PROPERTY OWNER Dennis and Stasy Ward

ADDRESS

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

240 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

TRENCHES - 240 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet $4\frac{1}{2}$ feet below original grade. Bottom maximum depth $8\frac{1}{2}$ feet below original grade. Effective area begins at $4\frac{1}{2}$ feet below original grade. 4 feet of stone below distribution

LOCATION - pipe. Place the distribution box 115' from the front (262') lot line and 140' from the left (408') lot line as seen when facing the property from Triadelphia Road. Run trenches on contour toward left (south) side of property.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 6/5/91 Rlt

PLANS APPROVED BY Craig Williams DATE 6/3/91

COVER NO WORK UNTIL INSPECTED AND APPROVED

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS, 90° ELBOWS NOT ACCEPTABLE.

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

PERMIT VOID AFTER TWO YEARS

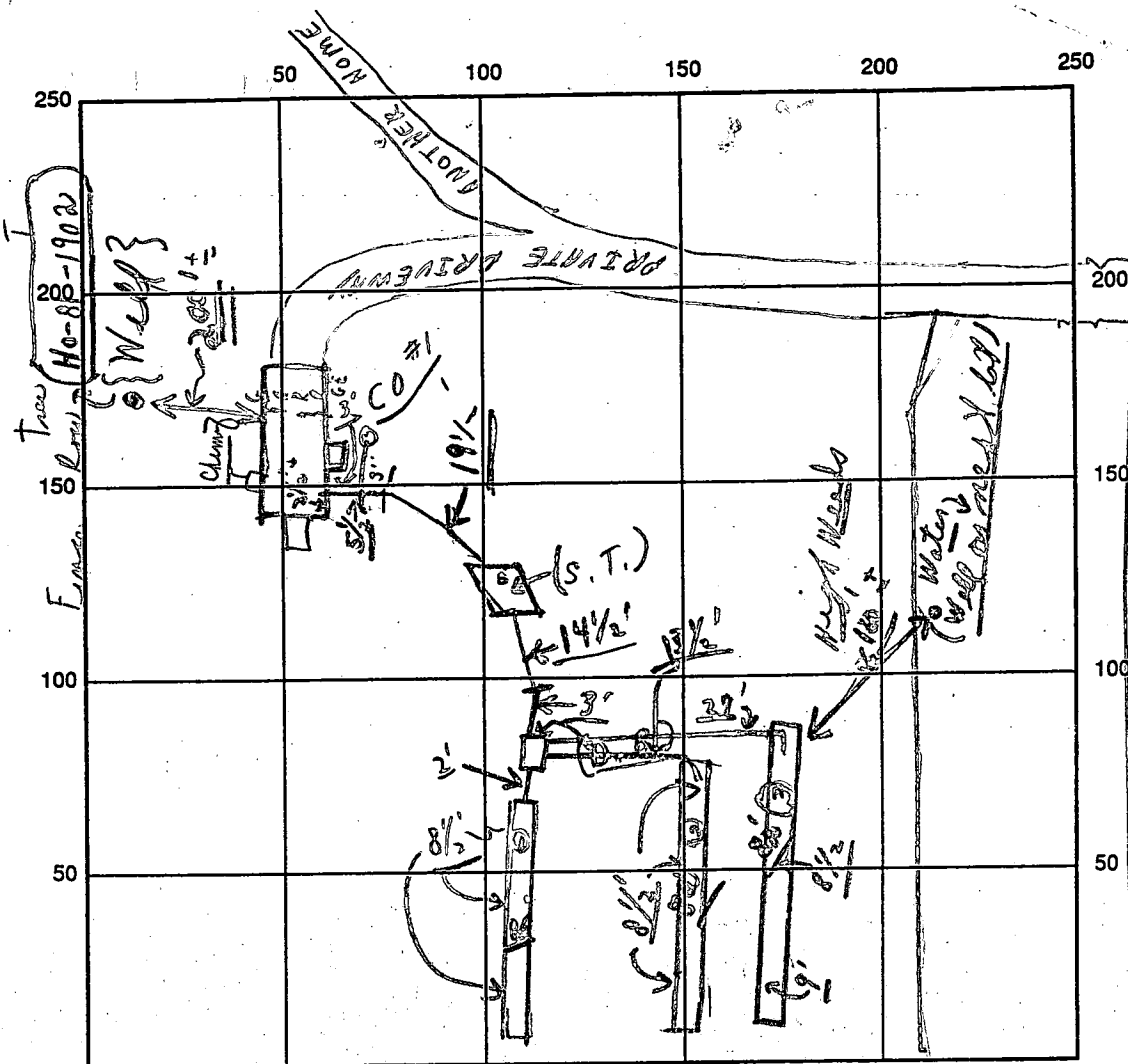
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON. CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

***CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.**

open field



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL OK CLEANOUTS OK / C.O.#1 OK
DISTRIBUTION BOX LEVEL OK (Baffle is in)
DRAIN FIELD/TITLE DEPTH 8 1/2' + overspill TRENCH WIDTH 2 FT. INLET DEPTH 4 1/2 FT.
EFFECTIVE GRAVEL DEPTH 4' FT. TOTAL LENGTH 250' +
NUMBER OF TRENCHES 3 ONE SIDEWALL/END AREA 1000 SQ. FT.
DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.
ABSORBENT AREA 1000 SQ. FT.

REMARKS: 7/31/91 A.M. (early) - ok for stone in {trench #1} -
Partial; 7/31/91 P.M. - Partial - ok for stone in '86 in trench #1
7/31/91 Late P.M. - partial ok for stone in #2 & #3 trenches
and to cover #1 trench's c.b.s. - 8/1/91 A.M. - HOLD FOR A CALL -
FOR FINAL - EXCEPT FOR HOUSE CONNECTION - C.B.S.
FOR 8/1/91 Finish - ok to cover all work as per house copy
DATE SYSTEM APPROVED 8/01/91 INSPECTOR Charles, Ryan, [Signature]
7/31/91 No - W.P.I. 8/1/91

APPLICATION

PERCOLATION TESTING

A 3P229

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

DISTRICT _____

DATE 12/3/86

12/28/86
Received on to
process.
8/28/87

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Patricia Bassler Dennis and Stacy Ward

ADDRESS 4994 Sheppard LA Ellicott PHONE 531 2193

PROSPECTIVE BUYER None

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Femingo Estates LOT NO. 4

ROAD AND DESCRIPTION 14650 TRIDELPHIA RD

(2000' PAST ROXBURY, SAME SIDE)

TAX MAP 21 PARCEL # 33

SIZE OF LOT 4 AC ± TYPE BLDG. Single Family
(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING for centered field located holes & plat
showing probable lot line adjustments

BLDG. PERMIT SIGNATURE
AND RETURNED 3/30/91
Serial # 3759-SFD

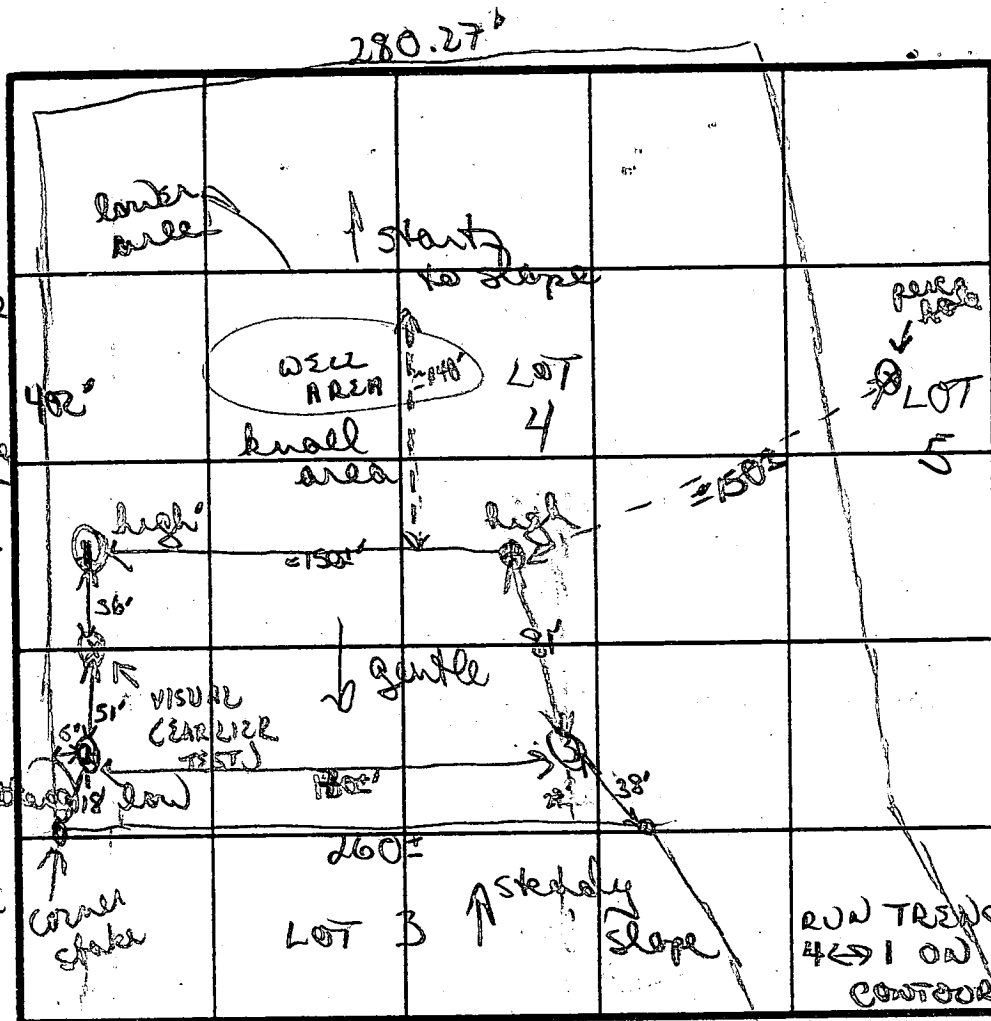
THIS IS NOT A PERMIT

INLET 4 1/2'
 MAX 8 1/2'
 230 4 / BDRM
 X ≈ 17 MIN

SOIL PROFILE

red/orange
 clay 3'
 to yellow
 orange clay
 clay 4-4 1/2'
 to brown
 yellow
 silty loam
 ↓
 layered weathering
 10% to rock
 frags
 ↑ w/ depth
 11' D

②



Red/brown
 clay 4'
 to red clay
 loam 5'
 to grey to
 brown silty
 loam mix
 fairly
 uniform
 12' D

INDICATE NORTH NAME ADJOINING ROADWAY AS BASE LINE.

yellow red
 clay to clay
 loam 3 1/2'
 to orange
 brown silty
 micaceous
 < 5% small
 scattered rock
 frags 8'
 ↓

③

patches red
 + red yellow
 clay! clay
 loam 4-5'
 changing
 yellow to
 silty loam
 ↓
 12' D

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
12/29/86	X	VISUAL (≈ 12' D)	SEE	NOTES	FROM	LOT 3	-OR
	①	4-4 1/2 S	1037	1044	1044	1053	9 min
		11' D	both (see profile)				
	②	4' S	1145	1207	1207	1237	30 min
		11' D	both (see profile)				
	③	4 1/2 S	1132	1151	1151	1220	29 min
		8' M	1129	1133	1133	1138	5 min
		12' D	both (see profile)				
	④	5' S	1057	1111	1111	1135	24 min
		8' M	1157	1201	1201	1206	5 min
		12' D	both (see profile)				

Larger 10K Rock not the problem as with LOT 5

REMARKS

TYPE OF SOIL

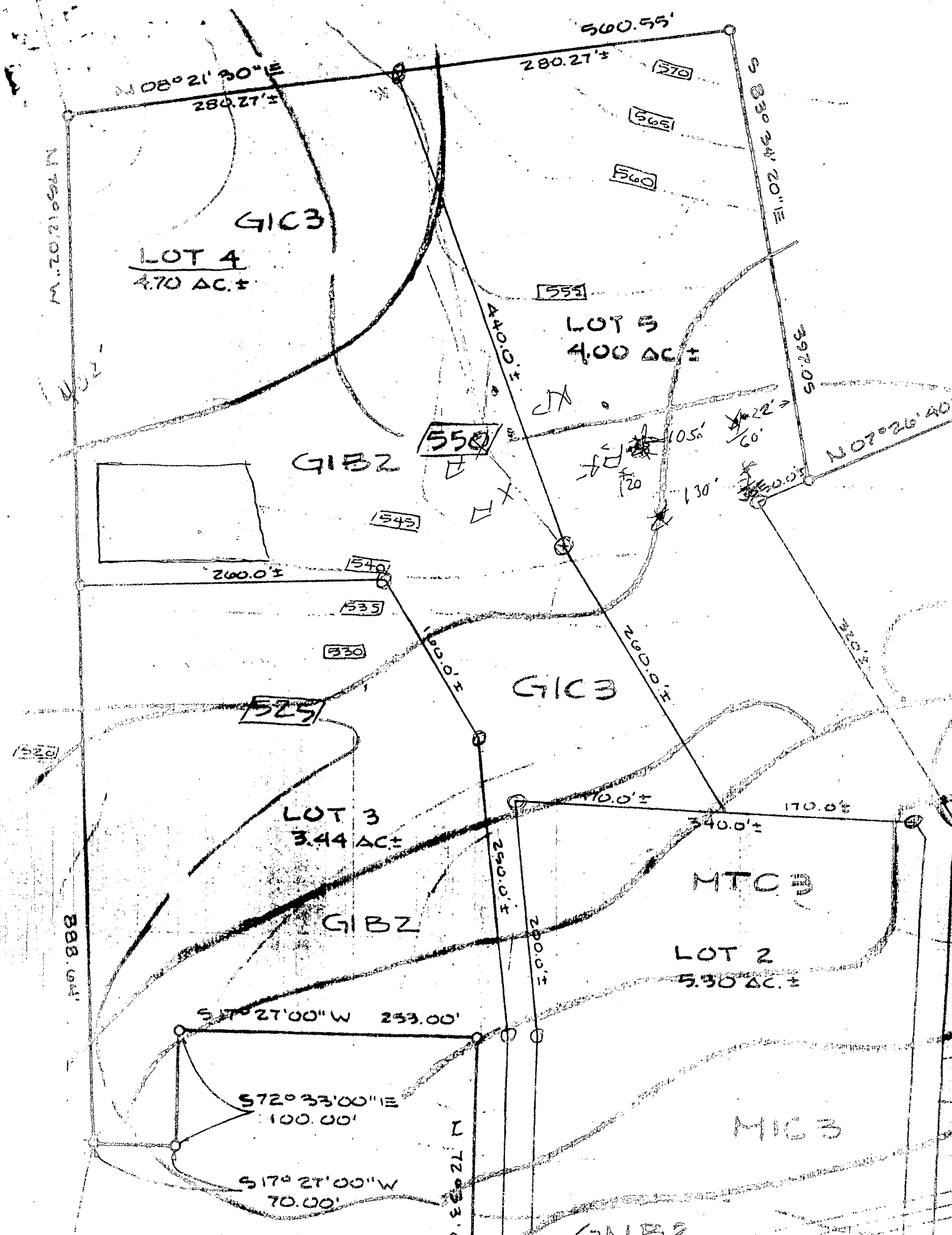
TESTED BY

orange/yellow clays & clay loams up to 5'; silty & clay

B. Nixson

ALSO PRESENT

digger (developer)



DECLARATION OF EASEMENT
FOR INGRESS AND EGRESS
(TO BURDEN LOT 9 FOR BENEFIT OF LOT 8)

11

4

means of
to create

14:50
111 #
11:47
11:50

40-27-95

1. The Declarant for herself, her personal representatives, successors and assigns, does hereby reaffirm, declare and create a perpetual easement, into, over and across the area of ground described and designated on Exhibit "A" attached hereto.

2. The easement described and created pursuant to the provisions of Paragraph 1, above, shall be for the purpose of providing a means of access for ingress and egress to and from Lot 8, and shall be a burden upon Lot 9, and shall be for the benefit of the parcel served thereby and shall run with and bind the land in perpetuity.

3. Any dispute arising out of this Declaration shall be decided by binding arbitration pursuant to the then existing rules and regulations of the American Arbitration Association, or its successors and assigns.

IN WITNESS WHEREOF, Declarant has executed these presents
the day and year first above written.

11

By: Patricia M. Bassler
Patricia M. Bassler

: SS

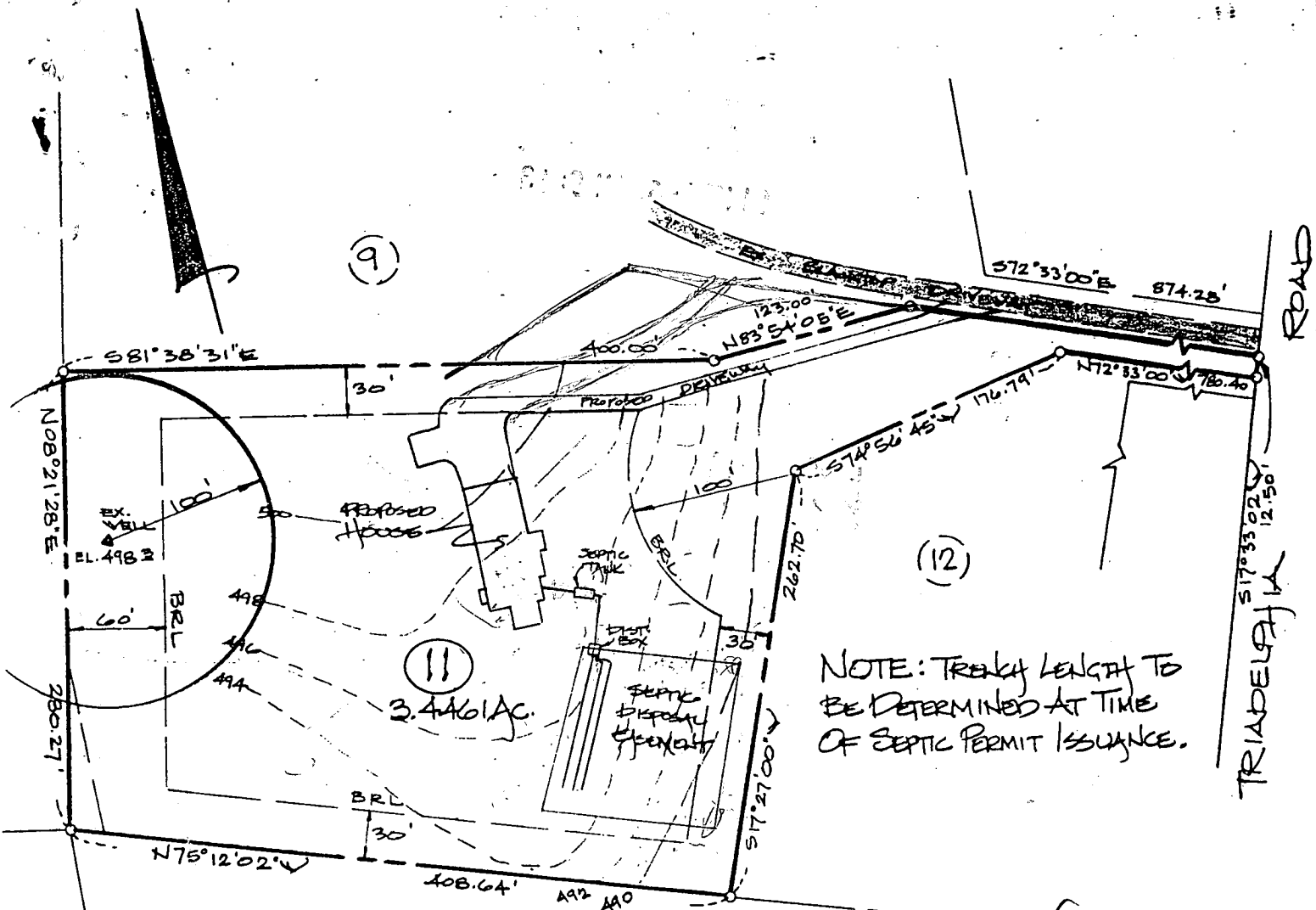
I HEREBY CERTIFY that on this _____ day of March, 1988 before me, the subscriber, a Notary Public of the jurisdiction aforesaid, ~~personally appeared Patricia M. Bassler, known to~~ me, or satisfactorily proven to be the person whose name is subscribed to the within instrument, and acknowledged that she executed the same for the purposes therein contained.

IN WITNESS WHEREOF, I hereunto set my hand and official seal.

Notary Public

My Commission Expires: 7/1/90

Mail to Jack Weaver Esq.
2525, Lincoln Middle Rd. Ste 1
Bellevue City, NC - 21043



NOTE: TRENCH LENGTH TO BE DETERMINED AT TIME OF SEPTIC PERMIT ISSUANCE.

ELEVATIONS OK
 6/3/91 CW

- (7)
- Basement Elev. = 492.0
 - First Floor " = 501.0
 - INV. OUT OF HOUSE " = 494.38
 - INV. INTO SEPTIC TANK " = 493.93
 - INV. OUT OF SEPTIC TANK " = 493.63
 - INV. INTO DIST. BOX " = 493.00
 - INV. INTO TRENCH " = 492.85
 - EX. GRADE AT SEPTIC TANK " = 496.9 ±
 - EX. GRADE AT DIST. BOX " = 496.0
 - EX. WELL ELEV. = 498.3

SEPTIC SYSTEM SPEC. FOR BUILDING PERMIT
FOR LOT 11 FEMIANO ESTATES PAT #9148

4th ELEC. DIST. Howard Co. MD

DATE: MAY 15 1991 SCALE: 1" = 100'

I CERTIFY THAT THE ABOVE MEASUREMENTS ARE ACTUAL AND CORRECT FOR THIS PROPERTY

SIGNED Stephen C. Barnhart R.P.L.S. #168
 STEPHEN C. BARNHART RPLS #168

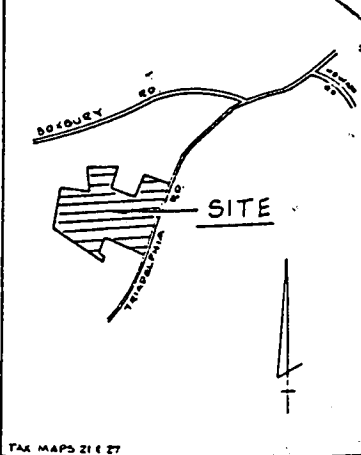
PREPARED BY:
 STEPHEN C. BARNHART
 SURVEYING AND LAND PLANNING
 P.O. BOX 244
 FINKSBURG MD 21048
 861-8730

COORDINATES	
10	NORTH EAST
11	316.002 471 723.002 10
10	316.000 371 723.470 21
9	316.003 371 723.000 01
23	316.006 001 723.711 30
21	316.011 701 723.004 40
110	316.077 031 724.177 25
100	315.200 021 723.250 40
101	316.104 251 723.413 79
102	315.203 451 723.343 72
103	315.073 401 723.443 32
104	315.204 021 723.424 34
45	316.233 011 723.543 18
15	316.000 411 723.000 44
14	316.043 061 723.041 21

SEEGGERI
908/642

GLOCKER
365/710

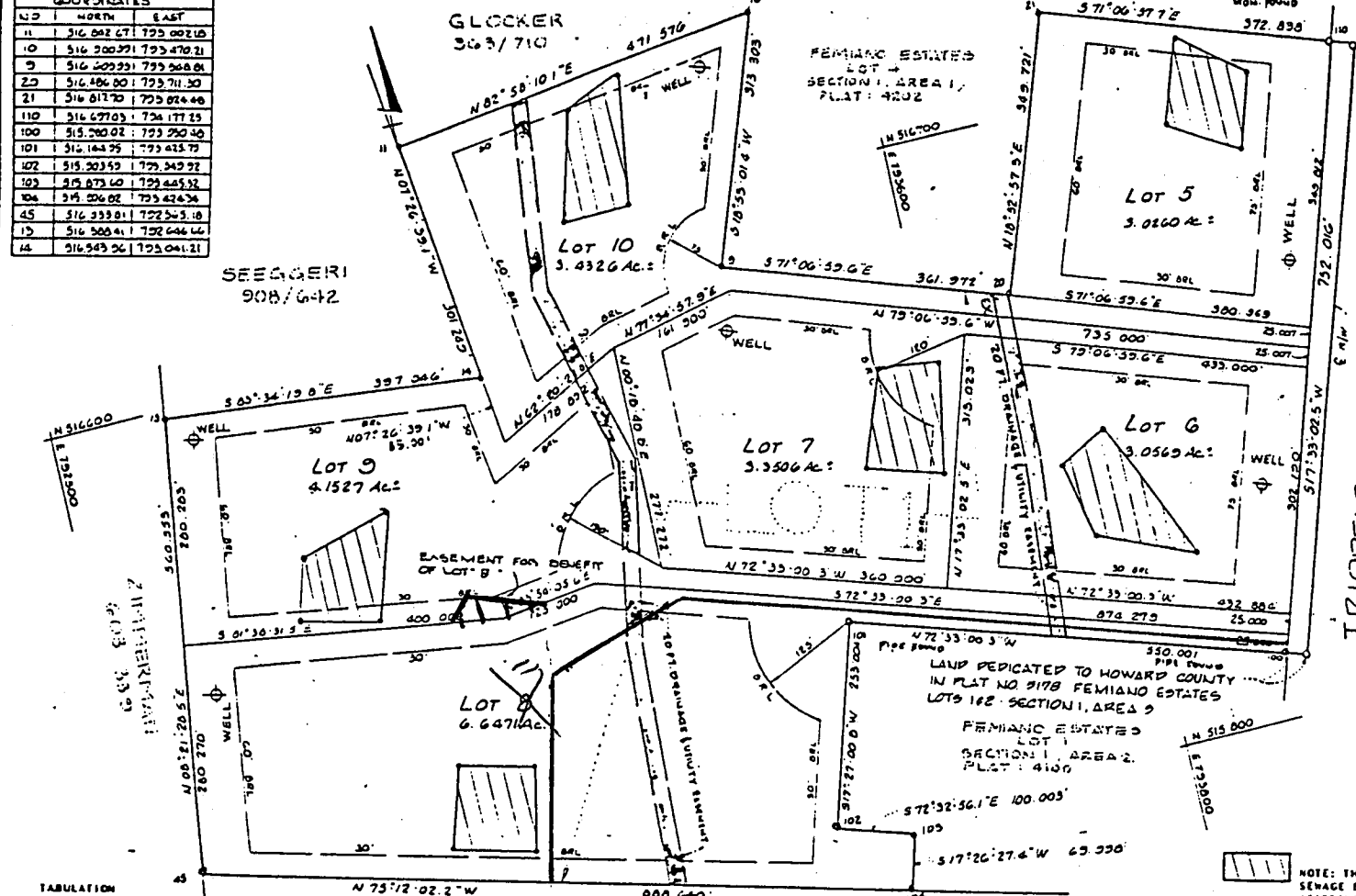
FEMIANO ESTATES
LOT 4
SECTION 1, AREA 1,
PLAT: 4232



LOCATION MAP
SCALE: 1"=1200'

ROAD

TRINIDAD



- TABULATION
1. TOTAL NUMBER OF LOTS = 5
 2. TOTAL AREA OF LOTS = 23.0659 AC.
 3. AREA OF ROAD DEDICATION = 0
 4. TOTAL AREA OF PLAT = 23.0659 AC.

FEMIANO ESTATES
LOT 2
SECTION 1, AREA 3
PLAT: 5178

OWNER: PATRICIA M. DASSLER
4294 SHEPPARD LANE
ELLICOTT CITY, 21043

- NOTES
1. SUBJECT PROPERTY OWNED R AS PER COMPREHENSIVE ZONING PLAN (8-7-85).
 2. B.R.L. DENOTES BUILDING RESTRICTION LINE.
 3. EAKINGS AND COORDINATES SHOWN HEREON ARE BASED ON THE MARYLAND STATE GRID SYSTEM.
 4. DENOTES FIELD LOCATED PERC HOLES.
 5. FOR FLAG OR PIPESTEM LOTS, REFUSE COLLECTION, SNOW REMOVAL, AND ROAD MAINTENANCE ARE PROVIDED TO THE JUNCTION OF THE FLAG OR PIPESTEM AND ROAD R/W ONLY AND NOT ONTO THE FLAG OR PIPESTEM DRIVEWAY.

NOTE: THIS AREA DESIGNATES A PRIVATE SEWAGE EASEMENT OF 10,000 SQUARE FEET, AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF HEALTH AND MENTAL HYGIENE FOR INDIVIDUAL SEWAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWER IS AVAILABLE. THESE EASEMENTS SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWAGE SYSTEM. THE COUNTY HEALTH SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENTS INTO THE PRIVATE SEWAGE EASEMENT. RECORDATION OF A MODIFIED SEWAGE EASEMENT SHALL NOT BE NECESSARY.

APPROVED: FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS, HOWARD COUNTY HEALTH DEPARTMENT.

John P. Miller H-2-81
COUNTY HEALTH OFFICER DATE

APPROVED: HOWARD COUNTY OFFICE OF PLANNING AND ZONING

W. Miller 11-17-87
DIRECTOR DATE

APPROVED: FOR STORM DRAINAGE SYSTEMS AND PUBLIC ROADS, HOWARD COUNTY DEPARTMENT OF PUBLIC WORKS.

John P. Miller 11/16/87
DIRECTOR DATE

SURVEYOR'S CERTIFICATE

I, *Walter Park*, being duly sworn, depose and say that the foregoing is a true and correct copy of the original plat as the same appears in my records, and that I am a duly licensed and qualified surveyor in the State of Maryland.

WALTER PARK, SURVEYOR
15539 W. DEVELOPMENT ENGINEER
251 JOHNS ROAD
COLUMBIA, MD. 21046

OWNER'S CERTIFICATE

I, *PATRICIA M. DASSLER*, do hereby certify that the foregoing is a true and correct copy of the original plat as the same appears in my records, and that I am the owner of the property described in the plat.

Patricia M. Dassler 6-1-87
NAME WITNESSES DATE

RECORDED AS PLAT NO. 7496 ON 11/30/87 AMONG THE LAND RECORDS OF HOWARD COUNTY, MARYLAND.

FEMIANO ESTATES
SECTION 1, AREA 3
LOTS 5 THRU 10 INCL.
RESUB OF LOT 1 3-87-91
TAX MAP 21127 PARCEL 33 3-87-91
4TH ELECTION DIST. NO. CO. MD.
SCALE: 1"=100' DATE: 6-16-87

ENGINEER
W. H. DEVELOPMENT ENGINEER
3485 HARPERS FARM RD.
SUITE 231 HARPERS CHOKE VILL. CT.
COLUMBIA, MD. 21046

LIBER 1801 FOLIO 104

EXHIBIT "A"

F-87-218

HENRY ZIMMERMAN
L 503 E 339

LOT 9

PEMIANO ESTATES
SECTION 1 AREA 2
PLAT 7496

LOT 7

N 08°21'28"E
N 516.000
E 792.500

LOT 11
3.4461 AC.

LOT 12
3.2009 AC.

MINIMUM SERVICE
ABOVE
F.P. ELEV. 525.00

DRAINAGE &
UTILITY ESMT.

WOODFIELD
PLAT 8290

NOTES:

1. THIS AREA DESIGNATES A PRIVATE SEWAGE
EASEMENT OF 10,000 SQUARE FEET AS REQUIRED BY
THE MARYLAND STATE DEPARTMENT OF HEALTH AND

THESE EASEMENTS SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENTS INTO THE PRIVATE SEWAGE EASEMENT. RECORDATION OF A MODIFIED SEWAGE EASEMENT SHALL NOT BE NECESSARY.

2. FOR FLAG OR PIPE STEM LOTS-REFUSE COLLECTION, SNOW REMOVAL, AND ROAD MAINTENANCE TO BE PROVIDED AT THE JUNCTION OF FLAG OR PIPE STEM AND THE ROAD R/W AND NOT ONTO THE FLAG OR PIPE STEM DRIVEWAY.

3. SUBJECT PROPERTY ZONED "R" PER 8-2-85 COMPREHENSIVE ZONING PLAN.

4. B.R.L. DENOTES BUILDING RESTRICTION LINE.

5. THE LOTS SHOWN HEREON COMPLY WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREA AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF HEALTH AND MENTAL HYGIENE.

6. FOR WELL ON LOT 12, APPROVED WELL LINE ENCAGEMENT UNDER THE DRAINAGE & UTILITY EASEMENT REQUIRED BY HEALTH DEPARTMENT AT TIME OF INSTALLATION.

7. THERE ARE NO STREAMS OR WETLANDS ON SITE.

TABULATION

TOTAL NUMBER OF LOTS: 2
TOTAL AREA OF LOTS: 6.6470 AC.
TOTAL AREA OF R/W DEDICATION: NONE
TOTAL AREA OF PLAT: 6.6470 AC.

OWNER / DEVELOPER
DAVID & SHELLI BASSLER
12773 FOLLY QUARTER RD.
ELLICOTT CITY, MD. 21043

IS TO RESUBDIVIDE LOT B,

4	516,003.86	793,258.02
5	515,980.02	793,250.46
6	516,144.95	793,425.73
7	515,903.57	793,342.92
8	515,875.60	793,445.32
9	515,806.82	793,424.34
10	516,033.81	792,565.18


COORDINATES SHOWN HEREON ARE BASED ON HOWARD COUNTY CONTROL STATIONS NO. 2933001 AND NO. 3033005.

APPROVED: FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS.

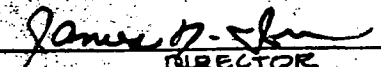
HOWARD COUNTY HEALTH DEPARTMENT

HOWARD COUNTY HEALTH OFFICER 12-31-89
DATE

APPROVED: HOWARD COUNTY DEPARTMENT OF PLANNING AND ZONING


DIRECTOR 2-6-90
DATE


APPROVED: FOR PUBLIC STORM DRAINAGE SYSTEMS AND PUBLIC ROADS
HOWARD COUNTY DEPARTMENT OF PUBLIC WORKS


DIRECTOR 1/22/90
DATE

CERTIFICATE

FINAL PLAT SHOWN HEREON IS SION OF ALL OF THE LAND (LOT B) R TO DAVID C. BASSLER AND FE, BY DEED DATED MARCH 25, AFORESAID LAND RECORDS IN 27.

A PLACE, OR WILL BE IN PLACE OF THE STREETS THE COUNTY AS S. OF MARYLAND, UNNOTATED.


PAUL K. MILLER
LAND SURVEYOR

RECORDED AS PLAT NO. ~~9748~~ 2-9-90 ON AMONG THE LAND RECORDS OF HOWARD COUNTY, MARYLAND

FEMIANO ESTATES - LOTS 11 & 12, SECT. 1, AREA 3

A RESUBDIVISION OF LOT B - FEMIANO ESTATES
(REF. F-87-218, PLAT NO. 7496)

4TH ELECT. DISTRICT HOWARD COUNTY, MARYLAND
TAX MAPS 21 & 27 PARCEL: 33 ZONING: R

SCALE: 1" = 100' DEC., 1989

PAUL K. MILLER & ASSOCIATES
LAND SURVEYING - PLANNING - ENGINEERING
1509 RITCHIE HIGHWAY
SUITE D
ARNOLD, MARYLAND 21012
(301) 757-9202
WITNESS H-9613

<p>B 1 2199 SEQUENCE NO. (OEP USE ONLY)</p> <p>(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)</p> <p>Date Received</p> <p>OWNER INFORMATION</p> <p>8 COUNTY 13 15 Last Name 34 Owner First Name 36 Street or RFD 55 57 Town 70 State 72 Zip 76</p> <p>DRILLER INFORMATION</p> <p>Driller's Name 77 License No. 80 Firm Name Address Signature Date</p> <p>B 2 WELL INFORMATION</p> <p>APPROX. PUMPING RATE (GAL. PER MIN.) 5</p> <p>AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500</p> <p>USE FOR WATER (CIRCLE APPROPRIATE BOX)</p> <p><input checked="" type="checkbox"/> D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)</p> <p><input type="checkbox"/> F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)</p> <p><input type="checkbox"/> I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)</p> <p><input type="checkbox"/> P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)</p> <p><input type="checkbox"/> T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)</p> <p>APPROXIMATE DEPTH OF WELL 150 FEET</p> <p>APPROXIMATE DIAMETER OF WELL 6" INCH</p> <p>METHOD OF DRILLING (circle one)</p> <p>BORED (or Augered) JETTED Jetted & DRIVEN</p> <p>AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)</p> <p>CABLE REVERSE-ROTary Drive-POINT</p> <p>other</p> <p>REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)</p> <p><input checked="" type="checkbox"/> N THIS WELL WILL NOT REPLACE AN EXISTING WELL</p> <p><input type="checkbox"/> Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED</p> <p><input type="checkbox"/> S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY</p> <p><input type="checkbox"/> D THIS WELL WILL DEEPEIN AN EXISTING WELL</p> <p>PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) 41</p> <p>Not to be filled in by driller (OEP USE ONLY)</p> <p>APPROP. PERMIT NUMBER 54 GAP 63</p> <p>FORCE <input checked="" type="checkbox"/> WRITE INITIALS IN BOX PERMIT NO. 40-81-1902 70 71 72 73 74 75 76 77 78 79</p> <p>SPECIAL CONDITIONS</p>	<p style="text-align: center;">STATE OF MARYLAND PERMIT TO DRILL WELL</p> <p style="text-align: center;">please print or type</p> <p style="text-align: right;">OEP PERMIT NUMBER</p> <p style="text-align: right;">10-81-1902 fill in this form completely</p> <p>B 3 LOCATION OF WELL</p> <p>8 COUNTY 21 23 SUBDIVISION 42 SECTION 1 44 46 LOT 11 48 50 52 NEAREST TOWN 71</p> <p>MILES FROM TOWN (enter 0 if in town) 0 MI 73 76 77 78</p> <p>B 4</p> <p>DIRECTION OF WELL FROM TOWN (CIRCLE BOX)</p> <p>TRIDELPHIA RD. 11 30</p> <p>ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)</p> <p>NORTH WEST EAST SOUTH</p> <p>34 2000 37 DISTANCE FROM ROAD ENTER FT or MI F+ 38 39</p> <p>NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL</p> <p>COUNTY NAME HOWARD COUNTY NO. A 38229</p> <p>OEP SIGNATURE DATE ISSUED 02/13/87 R. N. N. 08/13/87</p> <p>NORTH GRID 516 0 0 0 EAST GRID 079 2 0 0 0</p> <p>SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X</p> <p>SOURCES OF DRILLING WATER</p> <p>1. well</p> <p>2.</p> <p>3.</p> <p>WRITE THE BOX NUMBER FROM THE MAP HERE</p> <p>N 520 16</p> <p>24287 - 30' casing 27' open 8 bags cement Location as per OK</p> <p>DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION</p> <p>N</p> <p>Rox Berry Rd.</p> <p>TRIDELPHIA Rd.</p> <p>2000</p>
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C1 3852		SEQUENCE NO. (OEP USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT		THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.	
THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)		FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE				COUNTY NUMBER
DATE Received		DATE WELL COMPLETED		Depth of Well		PERMIT NO. FROM "PERMIT TO DRILL WELL"
020282		020282		22 27 26 (TO NEAREST FOOT)		HO-81-1702
OWNER		BASSLER		DAVID		
STREET OR RFD		PHILADELPHIA ROAD		first name		TOWN
SUBDIVISION		FEMIAN ESTATES		SECTION 1		LOT 11
WELL LOG Not required for driven wells			GROUTING RECORD			C3
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING			WELL HAS BEEN GROUTED (Circle Appropriate Box)			PUMPING TEST
DESCRIPTION (Use additional sheets if needed)			TYPE OF GROUTING MATERIAL			HOURS PUMPED (nearest hour)
CEMENT			BENTONITE CLAY			PUMPING RATE (gal. per min. to nearest gal.)
NO. OF BAGS			NO. OF POUNDS			METHOD USED TO MEASURE PUMPING RATE
GALLONS OF WATER			DEPTH OF GROUT SEAL (ft. to nearest foot)			WATER LEVEL (distance from land surface)
DEPTH OF GROUT SEAL (ft. to nearest foot)			from 48 52 ft. to 54 58 ft.			BEFORE PUMPING
Casing types insert appropriate code below			CASING RECORD			WHEN PUMPING
MAIN CASING TYPE			Nominal diameter top (main) casing (nearest inch)			TYPE OF PUMP USED (for test)
Total depth of main casing (nearest foot)			Casing depth (nearest foot)			A air
P L			S			P piston
60 61			63 64			T turbine
OTHER CASING (if used)			diameter inch			C centrifugal
depth (feet) from to			EACH CASING			R rotary
SCREEN RECORD			screen type or open hole			O other (describe below)
insert appropriate code below			S T B R H O			J jet
STEEL			BRASS			S submersible
PLASTIC			OPEN HOLE			
OTHER			OTHER			
C2			DEPTH (nearest ft.)			PUMP INSTALLED
EACH SCREEN			1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100			DRILLER WILL INSTALL PUMP YES NO
CIRCLE APPROPRIATE LETTER			A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED			IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE
E ELECTRIC LOG OBTAINED			TEST WELL CONVERTED TO PRODUCTION WELL			TYPE OF PUMP INSTALLED
I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 10.17.13, "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.			GRAVEL PACK			PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE:
DRILLERS IDENT. NO.			OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)			CAPACITY: GALLONS PER MINUTE (to nearest gallon)
DRILLERS SIGNATURE			TELESCOPE CASING			PUMP HORSE POWER
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)			LOG INDICATOR			PUMP COLUMN LENGTH (nearest ft.)
			OTHER DATA			CASING HEIGHT (circle appropriate box and enter casing height)
						LAND SURFACE (nearest foot)
						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)

Date Feb 2, 1987

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-1902
Location of property (road) TRIADSLPHIA RD
Subdivision FEMIANO ESTATES Lot 8 Block Plat Sec.
Well Driller R MAYNE Owner BASSLER, DAVID

Depth of well 245'
Distance of measuring point (M.P.) above ground 2^{feet}
Static water level (S.W.L.) below M.P. 40'

I. High rate pumping -- reservoir drawdown

Time pump started 1:30 Pumping rate 10 GPM
Total time 15 min to reach pumping water level 120 ft. below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes

[illegible]

B 1	7798	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type WS17350	STATE PERMIT NUMBER HO-94-3433 <small>fill in this form completely</small>
Date Received (APA) 07 05 02 <small>8 MM DD YY 13</small>		OWNER INFORMATION		
Last Name Ward		Owner First Name Dennis		
Street or RFD 14670 Triadelphia Rd		City Glenelg Md 21737		
Town Glenelg		State Md		
Zip 21737				
DRILLER INFORMATION				
Driller's Name Joseph L. Wayne		License No. MS D24		
Firm Name Joseph L. Wayne Well Drilling				
Address 5512 Ridge Rd. Mt. Airy Md. 21771				
Signature Joseph L. Wayne		Date 7/5/02		
WELL INFORMATION				
APPROX. PUMPING RATE (GAL. PER MIN.)		5		
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY)		500		
USE FOR WATER (CIRCLE APPROPRIATE BOX)				
<input checked="" type="checkbox"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, DEWATERING <input type="checkbox"/> PUBLIC WATER SUPPLY WELL <input type="checkbox"/> TEST, OBSERVATION, MONITORING <input type="checkbox"/> GEO-THERMAL				
APPROXIMATE DEPTH OF WELL <u>300</u> FEET APPROXIMATE DIAMETER OF WELL <u>6</u> INCH METHOD OF DRILLING (circle one) BORED (or Augered) <input checked="" type="checkbox"/> JETTED <input type="checkbox"/> Jetted & DRIVEN <input type="checkbox"/> AIR-ROTARY <input type="checkbox"/> AIR-PERCussion <input type="checkbox"/> ROTARY (Hydraulic Rotary) <input type="checkbox"/> CABLE <input type="checkbox"/> REVERSE-ROTARY <input type="checkbox"/> Drive-POINT <input type="checkbox"/> other _____				
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)				
<input type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <input checked="" type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="checkbox"/> THIS WELL WILL DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) _____				
Not to be filled in by driller (MDE OR COUNTY USE ONLY)				
APPROP. PERMIT NUMBER _____				
PERMIT No. HO-94-3433				
SPECIAL CONDITIONS <small>NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED</small>				

B 3 LOCATION OF WELL

COUNTY Howard

SUBDIVISION Ferniano Estates

SECTION 44 LOT 11

NEAREST TOWN Glenelg

MILES FROM TOWN (enter 0 if in town) 3 M. I.

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

14670 Triadelphia Rd

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

NORTH ☐ WEST ☒ SOUTH ☐ EAST ☐

DISTANCE FROM ROAD 3/10 ENTER FT OR MI 71

TAX MAP 21 BLK 22 PARCEL 33

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

COUNTY NAME HOWARD COUNTY NO. A-38229

STATE SIGNATURE _____ INSERT S _____

DATE ISSUED 07/05/02 CO SIGNATURE Kacey Noonan EXP. DATE 07/05/03

NORTH GRID 510 EAST GRID 794

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

1. well

2. _____

3. _____

WRITE THE BOX NUMBER FROM THE MAP HERE

E 794

N 510

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

Tag and Destroy
 and Permit
 Cancelled

A-38229

SITE INSPECTION SHEET

OWNER: Dennis Ward 410-489-
9039

DATE REQUESTED:

~~FILE NOT LOCATED~~

ADDRESS: 14670 TRIADELPHIA RD
FEMIANO EST. LOT 11

DRILLER/CONTRACTOR:

WELL TAG NUMBER:

TAX & PARCEL: 22-33

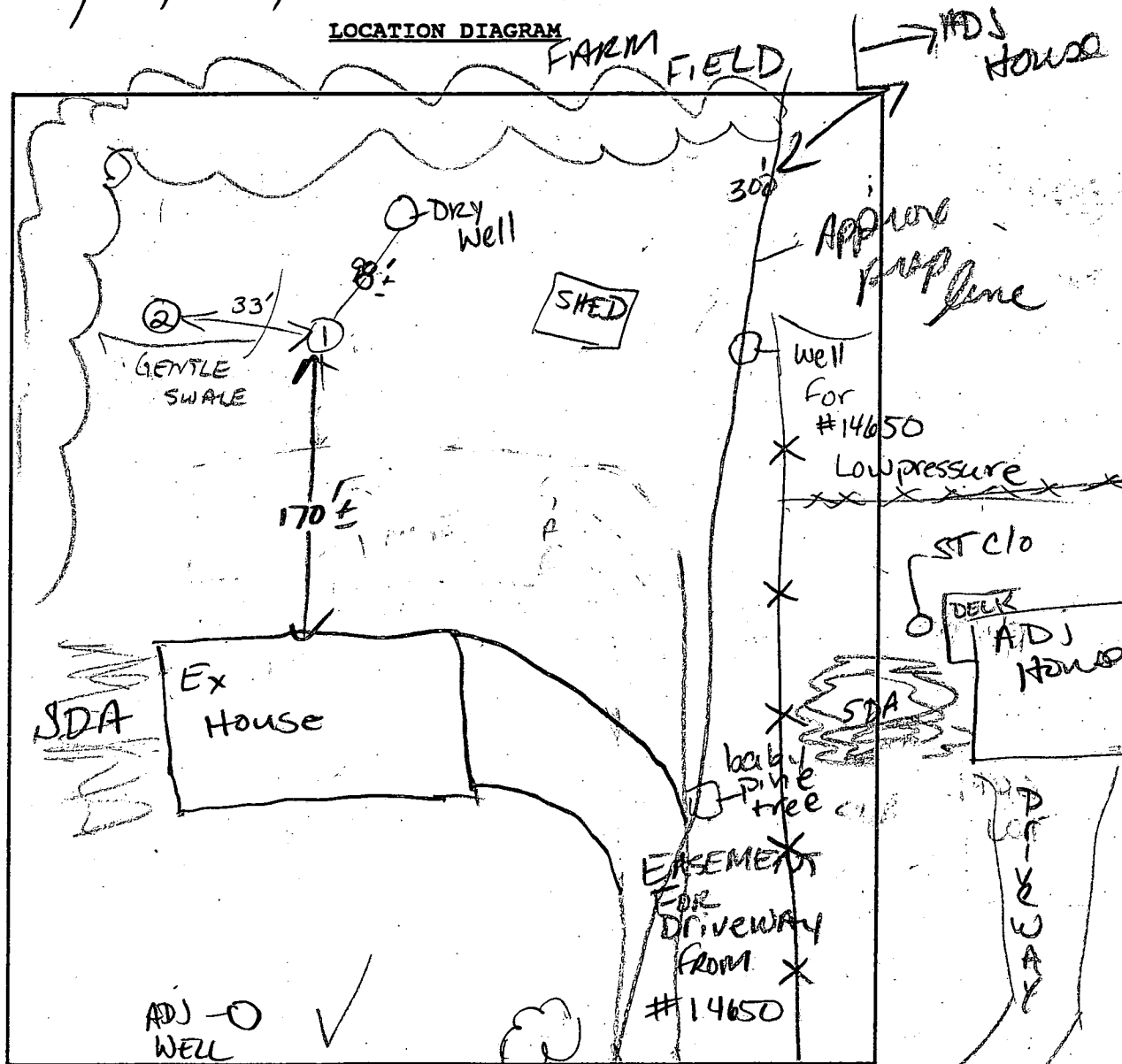
COUNTY; A38229

PROPOSAL:

PROPOSAL: replacement well requested, ~~at~~ ex. well 100% dry
Prev. well by R Mayne, 245', 4 GPM (1987)

LOCATION DIAGRAM

Pressure:
↓ @ 14650



COMMENTS:

7/5/02
COMMENTS: Keep well for irrigation. Dry wells
common for the area. Owner will call to verify
if well 1 is drilled or well 2. \$80 check # 4945

DATE:

INSPECTOR:

FOR

JOHN

Urgent

A.M.
P.M.

DATE

2/23/04

TIME

11:30

While You Were Out

M Dennis Ward (Homeowner)

OF 14670 TRIADDELPHIA RD.

PHONE

301-394-2424

AREA CODE

NUMBER

EXTENSION

TELEPHONED	Y	PLEASE CALL	
CAME TO SEE YOU		WILL CALL AGAIN	
RETURNED YOUR CALL		WANTS TO SEE YOU	

MESSAGE

PAID FOR A WELL PERMIT
7/5/02 - NEVER DRILLED WELL,
WOULD LIKE A REFUND.
A SITE INSPECTION WAS DONE.
TAG RETURNED + DESTROYED.
I told him I'd call him back.
TOLD him HE NEEDS TO SEND
Step A REQUEST IN

SIGNED

adams

9711

WRITING



HOWARD COUNTY HEALTH DEPARTMENT

0517350

DATE 7/5/02

Received From

Dennis W. Ward

14670 Truadulphia Rd, Minnlg, Md. 21737

☐ CASH
☒ CHECK

For

Well permit - REPLACEMENT WELL

address above (FEMIAN ESTATES, LOT 11)

NO.

4945

eighty & 00/100ths

Dollars

\$

80.00

Received By

Barbara J. Rodney

Spoke to Mr.

1/21/05

Dennis Ward - 410-489-9039

Refund for Well Permit

14670 TRUADULPHIA ROAD

Receipt

0517350

He said he sent a letter requesting this refund

Howard County Health Department
Bureau of Environmental Health
7178 Columbia Gateway Drive
Columbia, Maryland 21046

1st Year

Jeff

Memorandum

To: Carletta McKnight

From: John Boris

Date: 2/24/2005

Re: Refund for well permit at 14670 Triadelphia Road

On January 28, 2005, we received a letter from Dennis Ward requesting a refund of \$80.00 for a well permit, which was never used. (He says this is his second request.) His original well recovered sufficiently from the drought that he no longer needed a new one drilled. Our records show that the permit was cancelled and the well tag returned to this office. The receipt number was 517350. (A copy of the receipt is attached.) Please send the full refund (\$80.00) to Mr. Dennis Ward at 14670 Triadelphia Road, Glenelg, MD 21737.

Thank you for your assistance in this matter.