04-346092

PERMIT

MARYLAND STATE DEPARTMENT OF HEALTH'

A	38230	
	COLUMN TWO IS NOT THE OWNER.	-

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH 461-9933

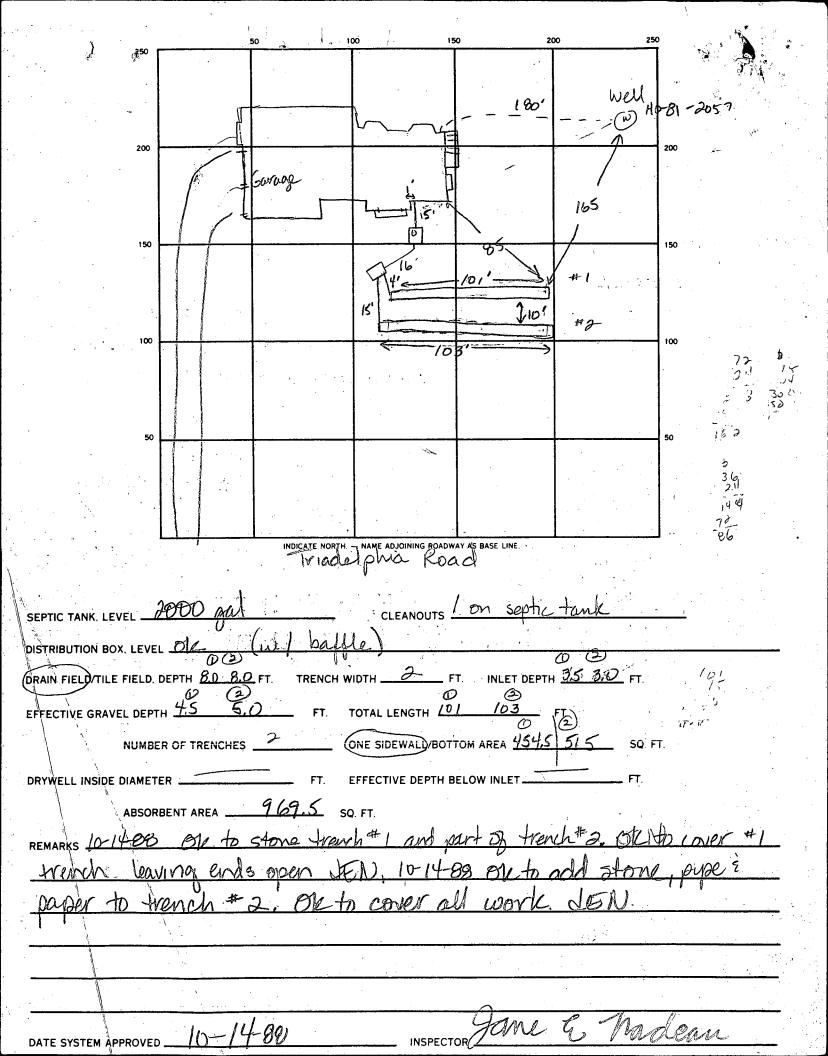
INDEXED

Paul Schissler	IS PERMITTED TO INSTALLXALTER
ADDRESS 4410 Salem Bottom Road, Westminster, Marylan	d PHONE 875-4197
SUBDIVISION <u>Femiano Estates</u> ROAD <u>14640 Tr</u>	·
PROPERTY OWNER	mes Richard J & LISA MUNZER
ADDRESS	,
IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND A	BSORPTION AREA BY 22%. GLDG. P ERMIT SIGNED
GARBAGE GRINDER? YESX NO	s_4 Seval & Bro 11339/
SEPTIC TANK CAPACITY 2000 GALLONS NUMBER OF BEDROOM	S_4 Seval Bril.
TRENCHES - 228 sq. ft. per bedroom with garbage dis 3½ feet below original grade. Bottom ma Effective area begins at 3½ feet below of distribution pipe. LOCATION - Beginning from left front (360.00'/ 313.) box 260 feet down the front (313.02') lifted facing the property from Triadelphia Road the left (360.00') lot lines. NOTE - No trench to exceed 100 feet in length. cap to grade or above on septic tank. ok/	ximum depth 8 feet below original grade riginal grade. 4½ feet of stone below 02') lot corner, place the distribution ne and 100 feet off the line as seen what d. Run trenches along contour towards Provide 6" - 8" diameter cleanout and /cw Updated
PLANS APPROVED BY Sid Abel	DATE/
COVER NO WORK UNTIL INSPECTED AND APPROVED. NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR TH NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FR	
NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E., TANK, DISTRIBUTION BOX, TRENCHES) TO BE 100 FEET FR	ROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)
NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAV	EL IN TRENCHIES). BOO 134 267 SUNROOM WIBASEMENT UNE
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 40 PVC OR ABO	S. BLDG. PERMIT SIGNED
PERMIT VOID AFTER TWO YEARS.	Sualt STEET
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DI. ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIR	
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES.	

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1186



APPLICATION

PERCOLATION TESTING

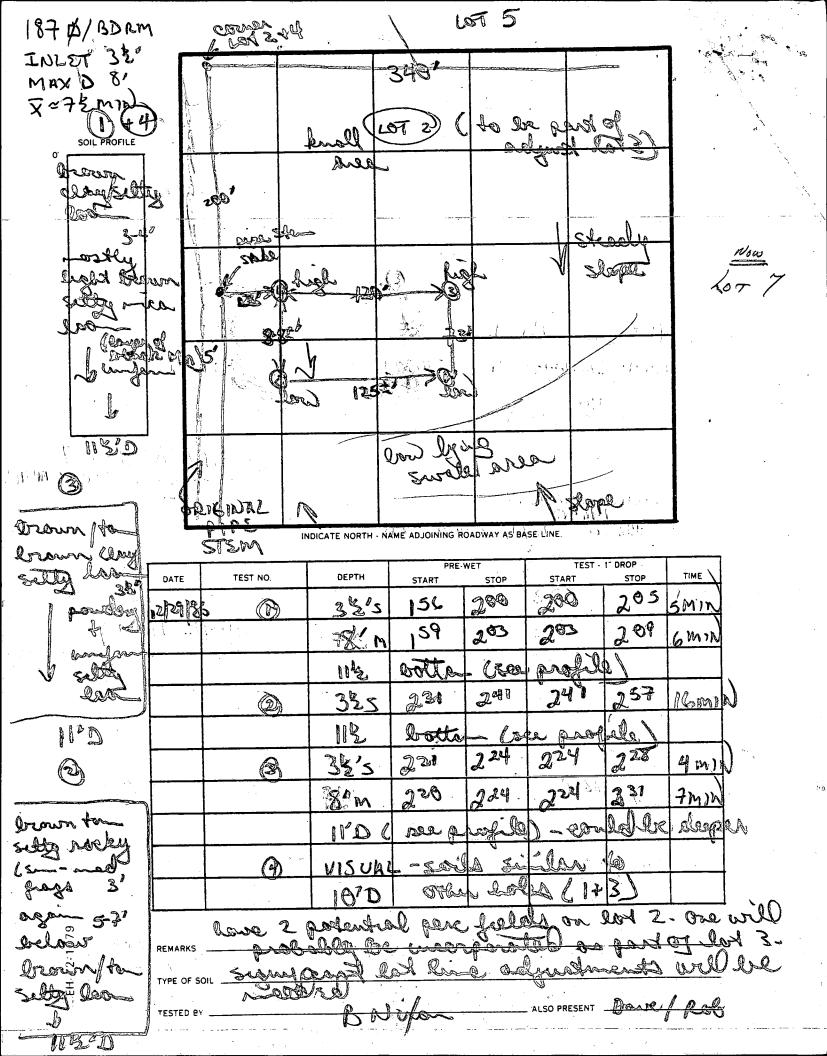
HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH

P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043 TELEPHONE: 461-9933

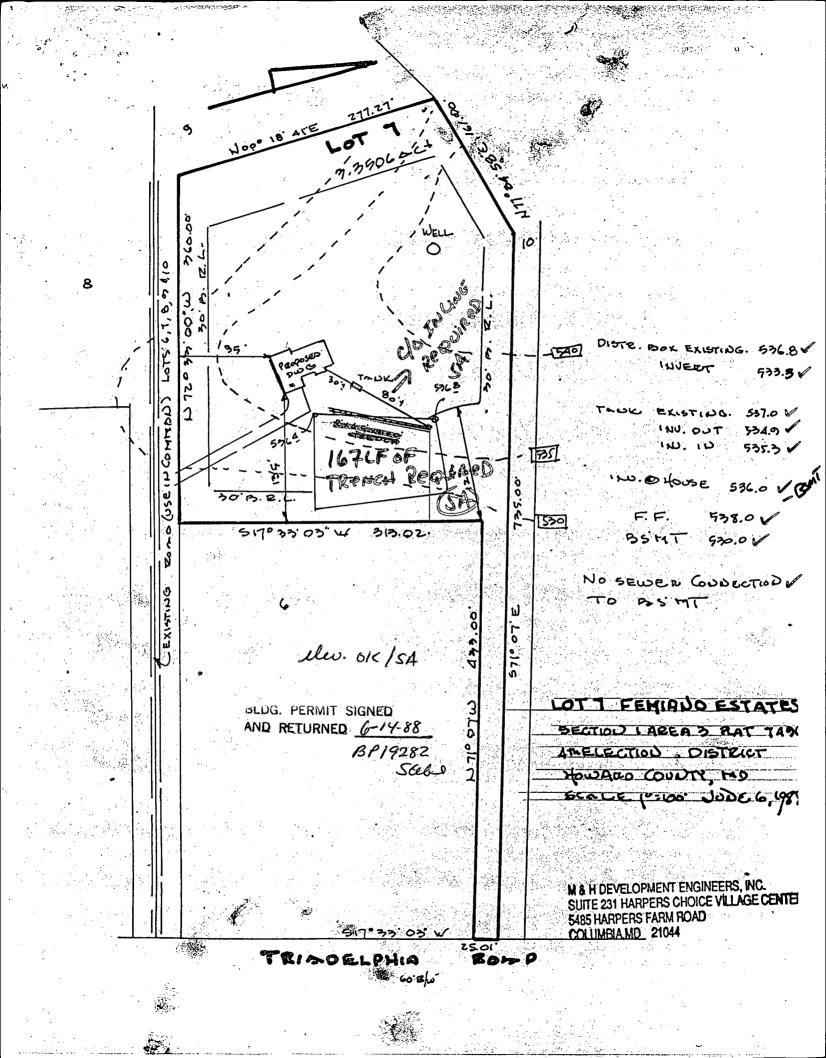
DATE 15/5/FX

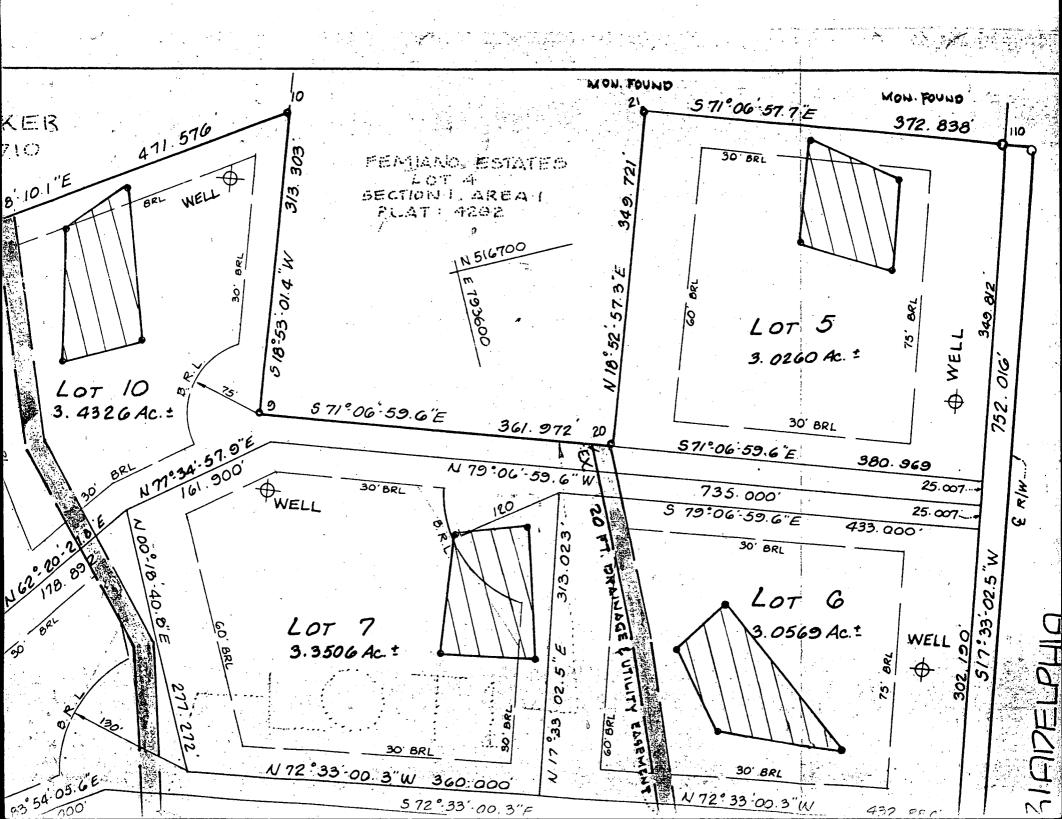
					,		,		•	٠
	TY HEALTH OF									\ \ \
I, HEREBY.	APPLY FOR TH	IE NECESSARY	TEST IN ORD	ER TO CONS	STRUCT (OR REC	ONSTRUCT) A	SEWAGE DISPOSAL	_ SYSTEM.		
PROPERTY OWNE	· PAtr	TCIA	BASS	sler			70 X			
ADDRESS	499 4	Shepp	DARd	la	Ellicot:	}	PHONE	531-2	193	· · · · · · · · · · · · · · · · · · ·
PROSPECTIVE BU	YER	NONE							- :	
ADDRESS						·	PHONE	<u></u>		·
PROPERTY LOCAT	ION:		:		+ + - + - + - + - + - + - + - + - + - +			FIR	JAL	LOT 7
SUBDIVISION	FEMIAN	in Est	1ates				LOT NO	· · · · · · · · · · · · · · · · · · ·	\mathcal{X}	2503.
ROAD AND DESCR	176		TRIAL	DELPH	IA RD	<u> </u>	· .			, y
	•								·	
тах мар2)	ARCEL #	33					et a		
SIZE OF LOT	<u> 5. 3</u>	0 A	_			e des	TYPE BLDG	SINGIE	FAMI	LY
							· ·	(SINGLE FAMIL)	Y DWELLING	OR COMMERCIAL)
THE SYSTEM IN	NSTALLED UN	IDER THIS AP	PLICATION	IS ACCEPT	ABLE ONLY UN	ITIL PUBLIC	FACILITIES BECO	OME AVAILABLE	. I FULLY UI	NDERSTAND THE
FEE CONNECT	ED WITH THE	FILING OF T	HIS PERC TE	EST APPLIC	CATION IS NON	-REFUNDAE	BLE UNDER ANY C	CIRCUMSTANCE	S. I ALSO AG	REE TO COMPLY
WITH ALL M.O	.s.H.A. REQU	IREMENTS IN	TESTING T	THIS LOT.	1		<u> </u>		:	· .
							(SIGNATURE OF	1.5		
APPROVED BY)idney	abel			FOR	Dei	p French	DATE	6-1	4-88
REJECTED BY	·				FOR			DATE		
HOLD PENDING F	URTHER TESTS	· · · · · · · · · · · · · · · · · · ·		, , , , , , , , , , , , , , , , , , ,				DATE		
REASONS FOR RE	JECTION OF H	OLDING						,		
READONS FOR RE	JEÇTION OR I									
. '								PERMIT S		8

THIS IS NOT A PERMIT



300.55° 4163 4.70 AC. + LOT 5 4.00 DC/= M f. 105 GIBZ (F30) GICE LUT 3 250.0 MTC3 GIBZ 800 E 253.00 572° 33'00" E 100.00 MIC 3 5170 27'00"W





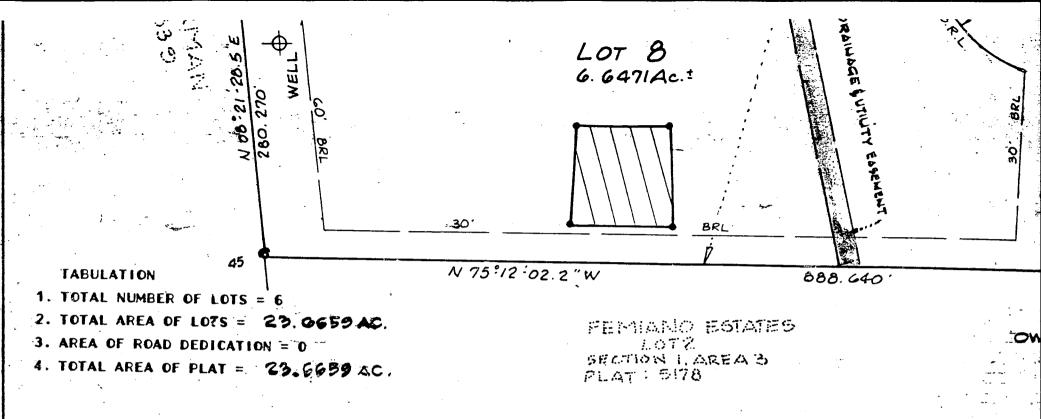
IN PLAT NO. 5178 FEMIANO ESTATES SOURCE PROPERTY ZUNED R AS PER COMPREHENSIVE ZONING PLAN (8-2-85). LOTS 1 & 2 · SECTION I, AREA 3 2. B.R.L. DENOTES BUILDING RESTRICTION LINE 3. BEARINGS AND COORD!!!ATES SHOWN . N 515 800 FEMANO ESTAYES HEREON ARE BASED ON THE MARYLAND 4. C) T 1 STATE GRID SYSTEM. SECTION 1 , AREA 2 4 @ DENOTES FIELD LOCATED PERC HOLES. PLAT: 4100 5. FOR FLAG OR PIPESTEM LOTS, REFUSE COLLECTION, SNOW REMOVAL, AND ROAD 572°32-56.1"E 100.003 MAINTENANCE ARE PROVIDED TO THE JUNCTION OF THE FLAG OR PIPESTEM AND ROAD R/W ONLY AND NOT ONTO THE FLAG OR PIPESTEM DRIVEWAY. 103 517°26'27.4"W 69.998 NOTE: THIS AREA DESIGNATES A PRIVATE SEWAGE EASEMENT OF 10,000 SQUARE FEET. 104 AS REQUIRED BY TOHE 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 AVAILLABLE. THESE TRICIA M. BASSLER EASEMENTS, SHALL BECOME NULL AND VOID UPON CONNECTION 94 SHEPPARD LAKE TO A PUBLIC SEWAGE SYSTEM. THE COUNTY HEALTH SHALL HAVE LICOTT CITY 21043 THE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENTS INTO THE PRIVATE SEWAGE EASEMENT. RECORDATION OF A MODIFIED SEWAGE EASEMENT SHALL NOT BE NECESSARY. RECORDED AS PLAT No. 7496 ON 11/20/87 AMONG THE LAND OWNER'S CERTIFICATE RECORDS OF HOWARD COUNTY, MARYLAND. owner of the property shown and described hereon, hereby adopt this plan of subdivision; and in consideration of the approval of this Plat by the Office of Planning and Zoning establish the minimum building restriction lines. All esements of rights-of-way affecting the property are FILE COPY .. SIGNES FEMIANO ESTATES SECTION 1 AREA 3 included in this plan of subdivision. Witness my/our hand/s this 16 day of which LOTS 5 THRU 10 INCL. RESUB OF LOT 1 P-87-64 9-87-91 TAX MAP 21 127 PARCEL 33 F-87. 218 4 TH ELECTION DISTR. HO.CO.MO.

> MICH DEVELOPMENT ENGINEERS 5405 HARPERS FARM RD. SUITE 231 HARPERS CHOICE VILL CTP.

DATE: 6-16-87

SCALE : 1" = 100'

ENGINEER :



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

COUNTY HEALTH OFFICER DATE

APPROVED: HOWARD COUNTY OFFICE OF

PLANNING AND ZONING

11.17:87

DIRECTOR

DATE

J.B

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

Man M. - Par

ulola

SURVEYOR'S CERTIFICATE

I hereby certify that the Final Plat shown hereon is correct; that it is a subdivision of ALL OF the lands conveyed. By DOMINIC J.FEMIANO FELLEN F. FEMIANO, HIS WIFE

UNTO PATRICIA M. BASSLER BY DEED DATED

DEC. 2, 1986

in the Land Records of Howard County in Liber 1596

Folio 703, and that all monuments are in place or will be in place prior to the acceptance of the streets in the subdivision by Howard County as shown, in accordance with

the Annotated Code of Maryland, as amended.



(Registered Land Surveyor)

WALTER PARK ROS. US. 5539 WEH. DEYELOPMENT ENGINEERS 15 JOSEPH SRUARE COLUMBIA, MD. 2044

B 1 1 1000 SEQUENCE NO. ST	ATE OF MARYLAND	STATE PERMIT NUMBER
4 9 9 9 PHOT ONLY	RMIT TO DRILL WELL	HD-1811-1315197
(THIS NUMBER IS TO BE PUNCHED	please print or type	fill in this form completely
IN COLS. 3-6 ON ALL CARDS)	B 3	LOCATION OF WELL
Date Received (APA) [1] 2 3 3 7 OWNER INFORMATION		
8 13	B COUNTY	21
3 A S S L E K D A U I D First Name Owner First Name	FEM, AND	ESH
12))3 FOLLY 24AR+E	23 SUBDIVISION	[]] / AAS A 2 \
36 Street or RFD	55 SECTION 44 46	LOT ZI CHRZH 3)
57 Town 70 State 72 Zip	GLERELE	6
DRILLER INFORMATION	52 NEAREST TOWN	
KALIL MAYANE 212	MILES FROM TOWN (ent	er 0 if in town) 73 76 77 78
The strains is	nse No: 80 B .4	TRING(a) A MO
Firm Name	DIRECTION OF WELL FROM	TRIDELPLIA MID.
9170 Brown Churchild Mit A.	TOWN (CIRCLE BOX)	
Address Marine 12/16	N N N	ON WHICH SIDE OF ROAD W 32 E
Signature Date	W	(CIRCLE APPROPRIATE BOX) WEST SEAST
B 2 WELL INFORMATION	W TOWN E	souтн
ÁPPROX. PUMPING RATE (GAL. PER MIN.)	8	34 34 40 37
AVERAGE DAILY QUANTITY NEEDED		DISTANCE FROM ROAD
(GAL PER DAY)	20 8=9 S 8-9 8	ENTER FT or MI
USE FOR WATER (CIRCLE APPROPRIATE BOX)		NOT TO BE FILLED IN BY DRILLER
D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONL)		HEALTH DEPARTMENT APPROVAL
F FARMING (LIVESTOCK WATERING & AGRICULTURAL		COUNTY NO.
IRRIGATION) INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL G	OV. STATE	
OTHER (REQUIRES APPROPRIATION PERMIT)	SIGNATURE	INSERT S
PUBLIC OR PRIVATE WATER COMPANY (REQUIRES P APPROPRIATION PERMIT AND STATE HEALTH DEPAR	TMENT 0/2588	BN400 07/25/88
APPROVAL)	43 48 CC NORTH 0 0	SIGNATURE / EXP DATE
TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)	GRID 50	55 GRID 57 63
[9 [68] A]	SHOW MAJOR FEATUR	ESOF 2288 (Drawled)
APPROXIMATE DEPTH OF WELL 15 0 1 FEET	BOX & LOCATE WELL _ WITH AN X	nortalgane on
Water Commence Live Live Commence	NEAREST SOURCES OF DRILLING	10.0
APPROXIMATE DIAMETER OF WELL	INCH 1 LLCL	2
METHOD OF DRILLING (circle one)	3:	181818
BORED (or Augered) JETTED Jetted 8	DRIVEN WRITE THE BOX NUMB	ER 2/3/88
30 AIR-ROTATY AIR-PERcussion ROTARY (Hydraul	c Rotary) FROM THE MAP HERE	recolling an express
<u>CABLE</u> <u>REV</u> erse <u>-ROT</u> ary <u>DR</u> iv	e-POINT	3 55'came (2'alone
other		3 000 14 loss seven
REPLACEMENT OR DEEPENED WELLS	EALTH N 5/4	000
(CIRCLE APPROPRIATE BOX)		W SHOWING LOCATION OF WELL IN TOWNS AND ROADS AND GIVE
N THIS WELL WILL NOT REPLACE AN EXISTING WELL	DISTANCE FROM WELL	TO NEAREST ROAD JUNCTION
THIS WELL WILL REPLACE A WELL THAT WILL BE	0 44 W35 PH 18 301	y RO HOWAND
L' J ABANDONED AND SEALED 39 THIS WELL WILL REPLACE A WELL THAT WILL BE U	SÉDING TO A STANDARD OF THE	
AS A STANDBY	一门"特里打到"这些人的第三人称	
D THIS WELL WILL DEEPEN AN EXISTING WELL.	HOWAR	
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPE (IF AVAILABLE) 41		-1170
	°²	No Morge
Not to be filled in by driller (OEP USE ONLY)		De Ma
APPROP. PERMIT NUMBER GAP	63	
WRITE STOWN		
FORCE WRITE PERMIT NO. 470 71 72 73 74 75 76	7 78 79	

C 1 2120 SEQUENCE NO. (OEP USE ONLY)	STATE OF MARYLAND	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED:	
1 2 3 6 (THIS NUMBER'IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)	WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE	COUNTY A-38230	
DATE Received DATE WELL COMPLETE		PERMIT NO. FROM "PERMIT TO DRILL WELL"	
020288	22 7 4 5 26	HO-811-2507	
OWNER BASSLER	(TO NEAREST FOOT)	28 29 30 31 32 33 34 35 36 37	
STREET OR RED TAST NAMED ELPH	A ROAD first name TOWN	GLINELE	
SUBDIVISION FEMIANO IST		LOT T	
WELL LOG Not required for driven wells	GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box)	C 3	
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH,	TYPE OF GROUSING MATERIAL	PUMPING TEST HOURS PUMPED (nearest hour)	
THICKNESS AND IF WATER BEARING DESCRIPTION (Use FEET Check if water	CEMENT CM BENTONITE CLAY BC	PUMPING RATE (gal. per min.	
additional sheets if needed) FROM TO bearing	NO. OF BAGS 1900 NO. OF POUNDS 1900	to nearest gal.)	
	DEPTH OF GROUT SEAL (to nearest foot)	METHOD USED TO MEASURE PUMPING RATE	
Topsal 0 2	from 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	WATER LEVEL (distance from land surface) BEFORE PUMPING	
	(enter 0 if from surface) casing CASING RECORD	WHEN PUMPING US	
Stricty 2 45	types insert ST CO	22 25	
SAND STONE 45 50	appropriate SIEEL CONCRETE OF LOOK	TYPE OF PUMP USED (for test) A air P piston T turbine	
	below PLASTIC OTHER	27 27 27 27 27 mother	
MickA 50 60	MAIN Nominal diameter Total depth CASING top (main) casing of main casing	C centrifugal R rotary (describe 27 below)	
SANCISTONE 60 65 U	TYPE (nearest inch) (nearest foot)	J jet Submersible	
	0 C S S S 70	27 27	
SANCISTONE 60 65 V Mick A 65 145	E OTHER CASING (if used) A diameter depth (feet)	PUMP INSTALLED	
	inch from to	DDU LED MULL INICTALL DUMB	
		(CIRCLE) (YES or NO) IF DRILLER INSTALLS PUMP, THIS SECTION	
	screen_type SCREEN RECORD	MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE	
	or open hole insert STEEL BRASS (HO	TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O)	
	appropriate STEEL BRASS OPEN BRONZE HOLE	CAPACITY:	
	code below PLASTIC OTHER	GALLONS PER MINUTE (to nearest gallon)	
entre de la company de la comp	C 2	PUMP HORSE POWER 37 41	
The second secon	DEPTH (nearest it.)	PUMP COLUMN LENGTH (nearest ft.)	
		CASING HEIGHT (circle appropriate box and enter casing height)	
and the second s		LAND SURFACE (nearest)	
CIRCLE APPROPRIATE LETTER	S 23 24 26 30 32 36 R 3	- below below below below	
A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED	E 3 38 39 41 45 47 51	LOCATION OF WELL ON LOT	
E ELECTRIC LOG OBTAINED	SLOT SIZE 1233	SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS	
P TEST WELL CONVERTED TO PRODUCTION WELL	DIAMETER (NEAREST OF SCREEN 56 60 INCH)	N LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TOWELL)	
I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 10.17.13 "WELL CONSTRUCTION"	from to	()	
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	GRAVEL PACK FOR THE PACK FOR TH	-01	
DRILLERS IDENT. NO. 223	F IN BOX 68 68) () () () () () () () () () () () () ()	
Hall Muss	OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)	3 3/2-15	
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)	T (E.R.O.S.) WQ	3	
Pall 5 WT since	70 72		
SITE SUPERVISOR (sign. of driller of our our responsible for sitework if different from permittee)	TELESCOPE LOG OTHER DATA CASING INDICATOR		

FIELD DATA SHEET HOWARD COUNTY WELL YIELD TEST

Location of proj	HO - 81-25 perty (road)	TRIADEI PHIA	ROAD	Com A Rose
Subdivision Well Driller	PALPH MY	JOHNEY DOWNER	+ Block Plat BASSLER DAVI	Sec. 1 ARU
Denth of	wall 145			
Time pump Total tim		reach pumping water	Pumping rate // (ft.)	
			recorded every 15 minus	
TIME (in 15 minute in- tervals	WATER LEVEL below M.P.	PUMPING RATE time to fill \$\frac{1}{2}\$ gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
9',15	48.		\	10 GiP.M.
9:30	48'	6 pc	\ /	106.P.m
9:45	48'	(open		10G.P.m
10:00	48'	Com		10
10:15	48	Gar	/	10
10:30	48	6per	 	70
10.45	48	lowe		10
11:00	48	Care	/	10
11:15	48	Gere		10
11,50	48	6 mil	 	10
12:00	78	6 Sec		10
	48	6 Sec		10 G.P.M.
12/15	48	6 Sec		20 0.1,10()
	<u> </u>			
	·		 	
			· ·	
HD-224	F-IR.	1105	. // /	
	55 PL	40 Eyr	14 bays	

C1 2121	SEQUENCE (OEP USE ON	-	STATE OF MARYLAND	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
	1 2 3 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)		WELL COMPLETION REPORT FILL:(全田以下 FORM COMPLETELY) PLEASE PRINT OR TYPE	COUNTY A 38546 - OBSE
DATE Received	DATE WELL CO	OMPLETE	Depth of Well 22 19 5 26 (TO NEAREST FOOT)	PERMIT NO. FROM "PERMIT TO DRILL WELL" 28 29 30 31 32 33 34 35 36 37
OWNER	RASSL		DAVID	
STREET OR RFD		Y LLP	4 0000	GLENELG 3 LOT \$ LOT 7
WELL) 23	GROUTING RECORD VAS DO	<u>\$</u> _LOT_ 3 \(\mathbb{E}\) \(\mathbb{Z}\)\(\mathbb{T}\)
Not required fo STATE THE KIND OI PENETRATED, THEI THICKNESS AND IF	F FORMATIONS R COLOR, DEP	тн,	WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL	PUMPING TEST HOURS PUMPED (nearest hour)
DESCRIPTION (Use additional sheets if needed)	FEET TO	Check if water	CEMENT C M BENTONITE CLAY B C	PUMPING RATE (gal. per min. G
	0 2	bearing	NO. OF BAGS NO. OF POUNDS ALLONS OF WATER DEPTH OF GROUT SEAL (to nearest foot)	to nearest gal.) METHOD USED TO MEASURE PUMPING RATE WATER LEVEL (distance from land surface)
Juy Soil Shrdy	2 50		from from from 52 ft. to 4 5 7 ft. to 4 BOTTOM 58 ft. (enter 0 if from surface)	BEFORE PUMPING 40 17 20
Shud Store	50 55		casing types types insert appropriate CASING RECORD STEEL CONCRETE	WHEN PUMPING 22 TYPE OF PUMP USED (for test)
M:cKA	55 95		code below PLASTIC OTHER	A air P piston T turbine
Sand Stank	>5 80	<u></u>	MAIN Nominal diameter Total depth CASING top (main) casing of main casing TYPE (nearest inch) (nearest foot)	C centrifugal R rotary O (describe below)
MickA	80 145	, 	P 2	J jet S submersible
			E OTHER CASING (if used) A diameter depth (feet) H inch from to	PUMP INSTALLED
and the second s			C A S S S S S S S S S S S S S S S S S S	DRILLER WILL INSTALL PUMP YES NO (CIRCLE) (YES or NO) IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS
*			screen type SCREEN RECORD or open hole insert BR	EXCEPT HOME USE TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX-SEE ABOVE: 29
:			appropriate code below PLASTIC OTHER	CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 35
			C 2	PUMP COLUMN LENGTH
			DERTH (nearest ft.)	(nearest ft.) CASING HEIGHT (circle appropriate box and enter casing height)
			H 2 26 4 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	LAND SURFACE (nearest foot)
CIRCLE APPROI A WELL WAS ABAND WHEN THIS WELL W	ONED AND SE	ALED	R = 3	LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS
E ELECTRIC LOG OBTA	AINED		SLOT SIZE 1 2 3	J BUILDING, SEPTIC TANKS, AND/OR
P TEST WELL CONVERTED TO PRODUCTION WELL			DIAMETER (NEAREST OF SCREEN 56 60 INCH)	N LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)
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 to GRAVEL PACK to IF WELL DRILLED WAS FLOWING WELL INSERT	
DRILLERS IDENT. NO. 223			F IN BOX 68 68 OEP USE ONLY	L'NE S & S
DRILLERS SIGNATURE (MUST MATCH SIGNATURI	Mayre E.ON APPLICAT	TION)	(NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q 74 75 76	Rop
Roth &	May	رمين	70 72	-0,1
SITE SUPÉRVISOR (sign. o responsible for sitework if o			TELESCOPE LOG OTHER DATA CASING INDICATOR	38, 8
The second second	To a street of the street of t	7	HEALTH	

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Page		of	•
Date	21	23	88
	<i></i>		

FIELD DATA SHEET HOWARD COUNTY WELL YIELD TEST

Subdivision FIMIANO ISTATED Lot	RORO 8 Block Plat Sec. 1 ARSA
Depth of well 145 Distance of measuring point (M.P.) above gro Static water level (S.W.L.) below M.P.	ound 3ft
I. High rate pumping reservoir drawdown Time pump started 9.45 Total time $15n, N$ to reach pumping water	Pumping rate 9 G.P.m. level 40 ft. below M.P.
II. Recovery pump test data - observations to be i	recorded every 15 minutes

TIME (in 15	WATER LEVEL	PUMPING RATE	FLOW METER READING	CALCULATED FLOW
minute in-	below M.P.	time to fill 5	(if used)	(gallons per
tervals		gallon bucket		minute)
10,00	4051	7su		96.P.M
10:15	40'	Tore		96.P.m
10,30	40'	7 suc		96.1.M
10:45	40	Tou	/	96.0.m
11:00	40 ft	7sc		96.9.11.
11:15	40'	Touc		967,1
11,30	40'	Tar		96.P.M
11:45	40	700	V .	961n
12:00	40-14	Tree		96.10
12:15	40 F+	7 10C		'9 G-P-M
12:30	HOFF	7 Les Dec	/	9 G-P-M
12,45	4054	De See		9 G P M
,				
		·	/ /	
			1	
	<u> </u>			
<u> </u>	L	L	<u> </u>	1

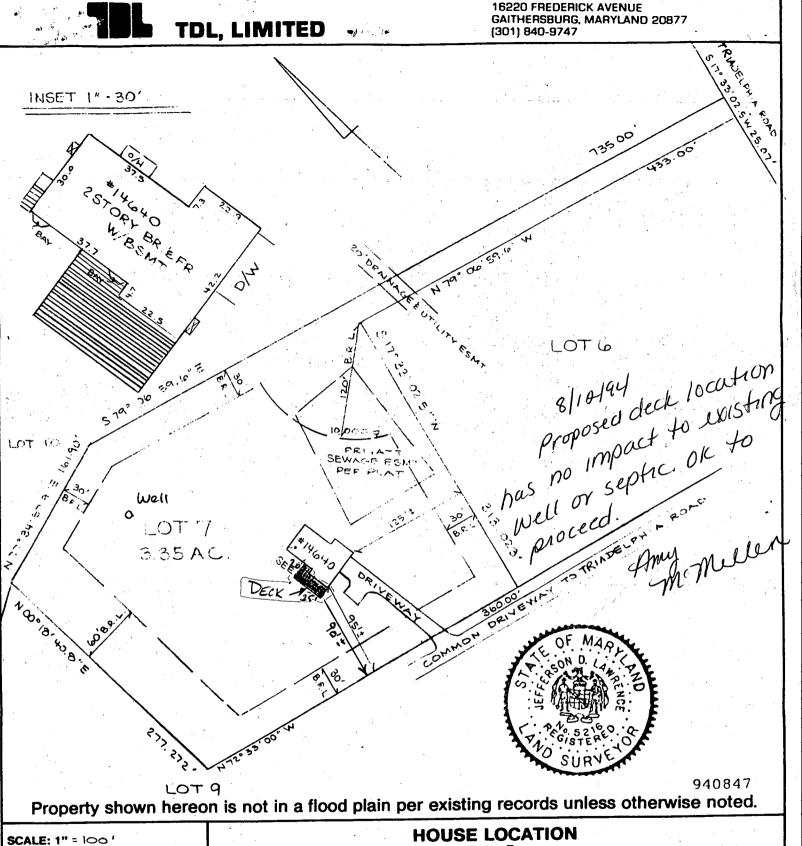
HD-224

63'PL 45 of 1/4 17 box

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

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New Installation X Replacement	Receipt # 42258 Date 7/25/88
Name of Installer Thomas P. Pappas TlA Lehsac Corp	Telephone <u>747-6888</u>
License Number 33박 Certified Well Pump Installer Well Driller	Registered Plumber X
Name of Property Owner Signature Homes, INC. Subdivision Femiano Estates Lot # 3 We	Telephone <u>447-5540</u> 11 Tag #
Site Address 14640 Triadelphia Road	
Pump 1. Type 2. RPM 3650 b. Shallow well jet 3. Voltage c. Submersible X 3. Model # S52 4. Capacity 8 GPM 5. Pump exceeds well capacity Yes X No 6. If Yes, is low pressure cutoff switch installed? 7. What methods are used to protect the pump and elect	Pitless Adapter 1. Make <u>Harvay d</u> 2. Model # <u>PT 800</u> 3. Depth <u>4'</u>
vibrations? Torque arrestors X Cable guards	Other
Tank Piping 1. Capacity 40 1. Type 65 2. Pressure relief valve? YES 3. NSF and/or BOCA Code approved 4. Depth of supply line 3/2!	Well data 1. Depth /45 ft. 2. Yield 1 GPM 3. Static water level /00 ft. 4. Will water supply be disinfected by installer? YES
I understand that it is my responsibility to notify Department when the installation is ready for inspecti is null and void).	on (otherwise this permit
All information given above is true to the best of my	knowledge.
Signature of Applicant	a lacke
Note: A sticker indicating approval/status of the inspection.	tallation will be placed
on the well casing at the time of the inspection.	•



SCALE: 1" = 100
RECORDED IN:
PLAT BOOK:
PLAT: 7496

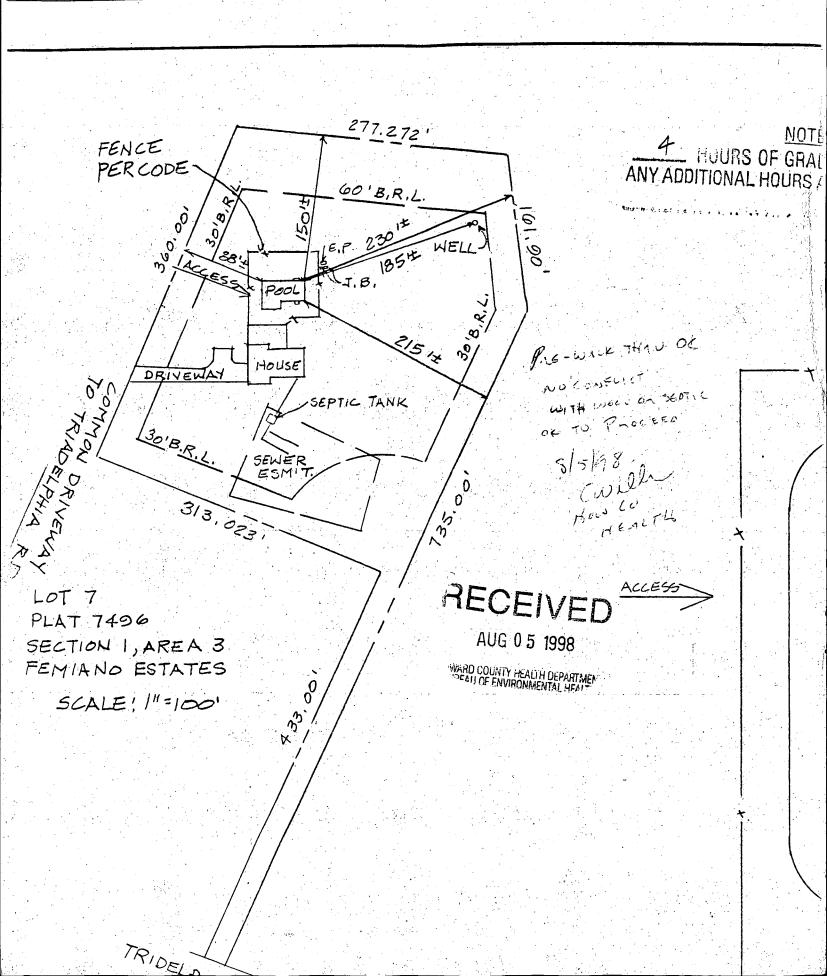
NOTE: This drawing is not intended to establish property lines nor are the existance of corner markers guaranteed. All information shown hereon taken from the land records of the county in which the property is located, Do not attempt to erect fences from information contained on this drawing.

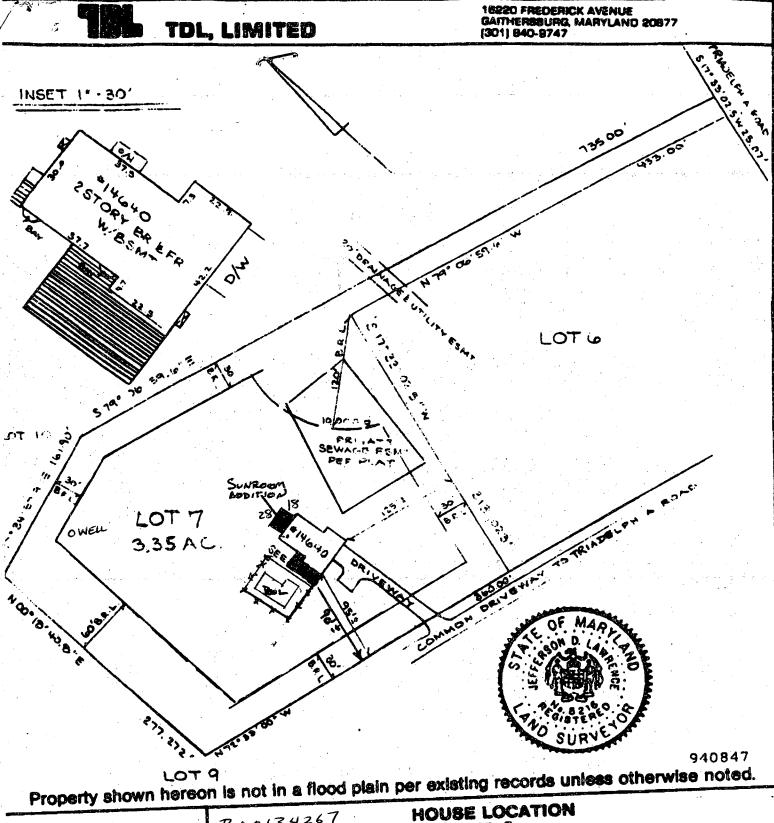
LOT 7
FEMIANO ESTATES
SECTION 1, AREA 3
HOWARD COUNTY, MD

I hereby certify that to the best of my knowledge and belief, the position of all the existing improvements on the above described property has been established by accepted field practices.

Date: June 17, 1994

JEFRERSON D. LAWRENCE, PROFESSIONAL LAND SURVEYOR #5218





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RECORDED IN:
PLAT BOOK:
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