

05-407133

8/16/89 I.P.C.O.

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH DISTRICT 5th

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED

DATE SYSTEM APPROVED

INSPECTOR

P 44801

A 38569

DATE 7/31/89

8/25/89

M. Rifkin

W.T.C., III Plumbing & Heating

IS PERMITTED TO INSTALL ☒ ALTER

ADDRESS

PHONE

SUBDIVISION Twelve Hills

ROAD 13002 Twelve Trees Ct LOT 11. Section 2

PROPERTY OWNER

Michael Mantua

ADDRESS

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER?

YES ☒

NO

SEPTIC TANK CAPACITY 2000

GALLONS

NUMBER OF BEDROOMS 4

8/14 TRENCHES - 220 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 3.5 feet below original grade. Bottom maximum depth 7.5 feet below original grade. Effective (Same inlet depth) area begins at 3.5 feet below original grade. 4 feet of stone below C.B.D. distribution pipe.

LOCATION - Start the first trench 280 feet from the front lot line and 195 feet from the right lot line as seen when facing the lot from Twelve Trees Court. Run trenches along contour toward the front lot line.

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

PLANS APPROVED BY

Sid Abel

DATE 2/10/89

C.B.D.

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

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 40 PVC OR ABS

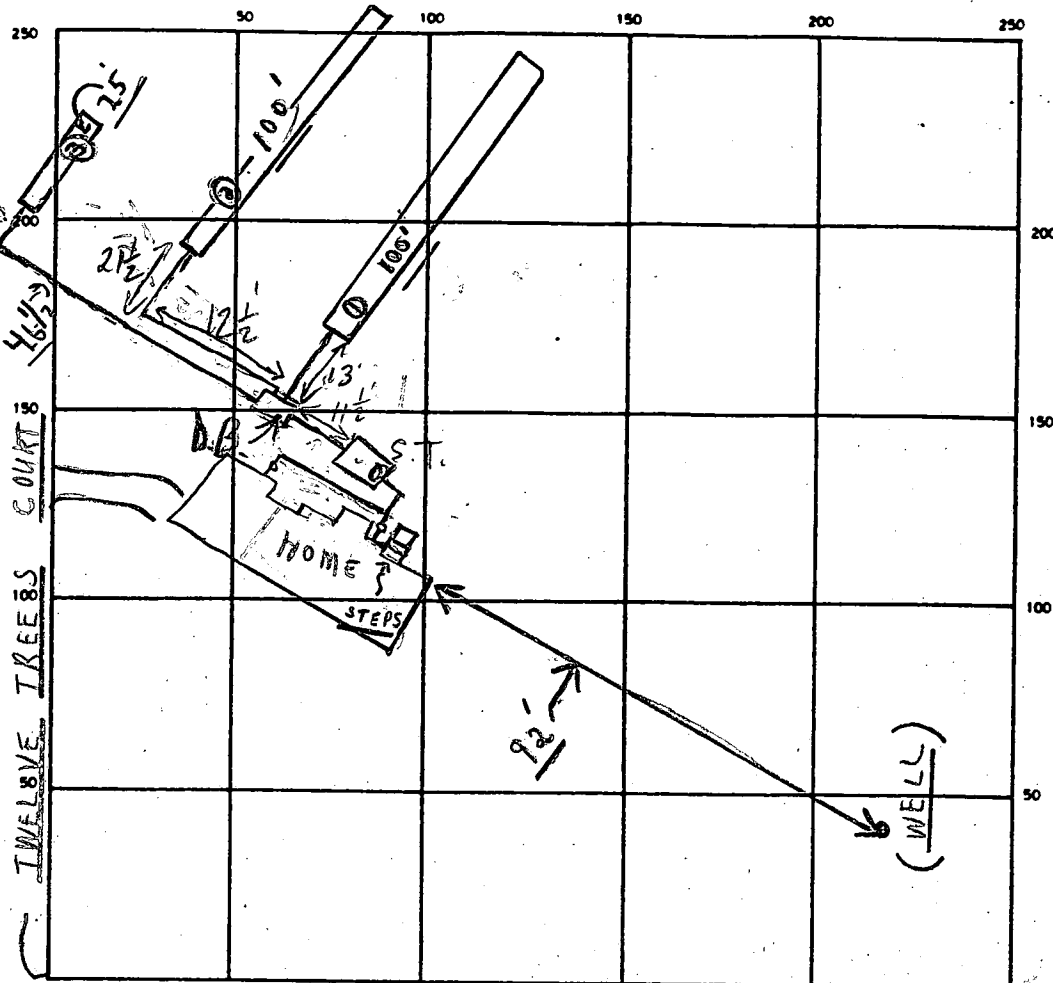
PERMIT VOID AFTER TWO YEARS

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 PVC 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 SYSTEMS.



INDICATE NORTH — NAME ADJOINING ROADWAY AS BASE LINE

TWELVE HILLS Rd

SEPTIC TANK LEVEL OK CLEANOUTS 2 In-line - OK S.T. - OK

DISTRIBUTION BOX LEVEL OK (Baffle in use)

DRAIN FIELD/TILE FIELD DEPTH 7.5 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3.5 FT.

EFFECTIVE GRAVEL DEPTH 4 FT. TOTAL LENGTH 225 FT.

NUMBER OF TRENCHES 3 ONE SIDEWALL AREA 900 SQ. FT.

DRYWELL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA SQ. FT.

8/16 NOTE: Yellow CARD IS IN WINDOW SQ. NO PIPE IN; ALL 3
REMARKS TRENCHES OK FOR STONE - PARTIAL
C.B. &

8/25/89 ALL WORK OK TO COVER MR

DATE SYSTEM APPROVED

8/25/89

INSPECTOR

M. Riffin

SUBDIVISION: Twelve Hills
Sec. 2

A 38569

LOT NUMBER: 11

DRY WELL OR DRY WELL AND TRENCH

	<u>Septic Tank</u>	<u>Minimum Total Square Feet</u>
3 bedroom	1000 gallon	
4 bedroom	1250 gallon	
5 bedroom	1500 gallon	

Inlet _____ feet below original grade.

Bottom maximum depth _____ feet below original grade.

Effective area begins at _____ feet below original grade.

NOTE: If trench is used to make up absorbent area, run the trench on level ground and leave a 5-foot earth buffer between dry well and trench. No trench is to exceed 100 feet in length. Trench inlet to be same as dry well, with _____ feet of stone below distribution pipe.

TRENCHES

Trench to be 2 wide.

Inlet 3.5 feet below original grade.

Bottom maximum depth 7.5 feet below original grade.

Effective area begins at 3.5 feet below original grade.

4 feet of stone below distribution pipe.

180 sq. ft./bedroom
280 sq ft/bedroom with
4BN/CP 6-10

- NOTE:
- (1) No trench to exceed 100 feet in length.
 - (2) If more than one trench used, a distribution box is required.
 - (3) Trenches to be installed on level ground.
 - (4) Call for inspection of trench before gravel is installed.
 - (5) Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank and drywell.
 - (6) If a garbage disposal is used, increase septic tank capacity by 50% and increase absorbent sidewall area by 22%.

LOCATION: START THE FIRST TRENCH 280 FT FROM THE FRONT LOT LINE
AND 195 FT FROM THE RIGHT LOT LINE AS SEEN WHEN FACING
THE LOT FROM TWELVE TAPES CO. RUN TRENCHES ALONG CONTOUR
TOWARD THE FRONT LOT LINE. 2-10-89 Salm

APPLICATION

PERCOLATION TESTING

A 38569

P _____

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

DISTRICT 5

DATE 12/17/86

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 Altogether Limited Partnership Michael MANTUA 721-1675
ADDRESS 10176 Baltimore National Pike Suite 210 PHONE 465-5855

PROSPECTIVE BUYER _____
ADDRESS _____ PHONE Final Lot 11 Sec 2 NEW 14 (april 97)

PROPERTY LOCATION:
SUBDIVISION Altogether LOT NO. 26

ROAD AND DESCRIPTION Linden Church Rd + Rt 32 13002 Twelve Trees Ct.

TAX MAP 28 PARCEL # 66

SIZE OF LOT 3 acres TYPE BLDG SFD
(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.

Mal S. Reil
(SIGNATURE OF APPLICANT)

APPROVED BY Sickney Abdul FOR Shen deep trenches DATE 2-10-89

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 2-4-87 Hold for PCAT SDD Shallow Syst. only 80

BUDG. PERMIT SIGNED
AND RETURNED 2-10-89

BP238978M

THIS IS NOT A PERMIT

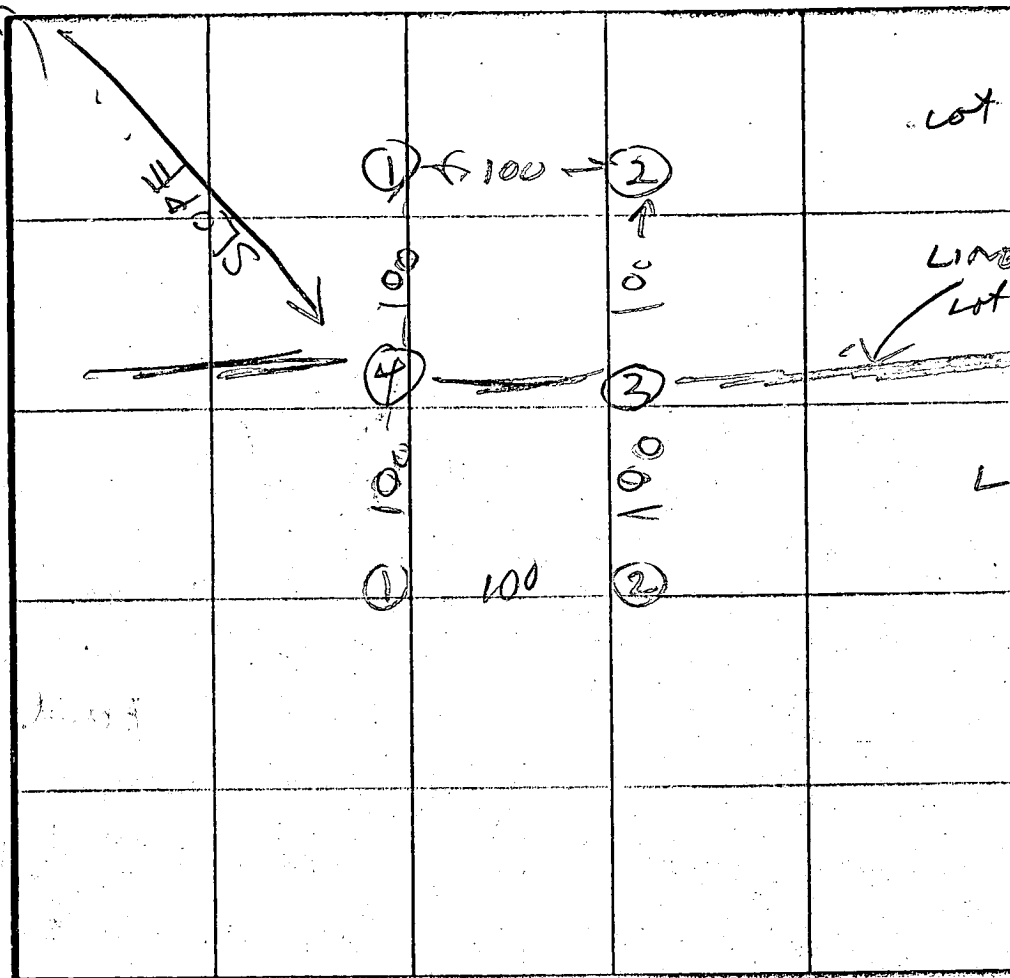
SOIL PROFILE

BROWN
CLAY

PINK
BROWN
SAND
LOAM

DAR GUIN
CLAT

PINK
BROWN
SAND
LOAN



LINE BETWEEN
Lot 108 & Lot 11

LOT 10

5 Pencil Smear
 180° 1BR
 Insect 3.5
 Bottom 7.5'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

LINDEN CHANNEL RD

[illegible]

at
time
4 min
max
depth
3 ft

REMARKS

TYPE OF SOIL

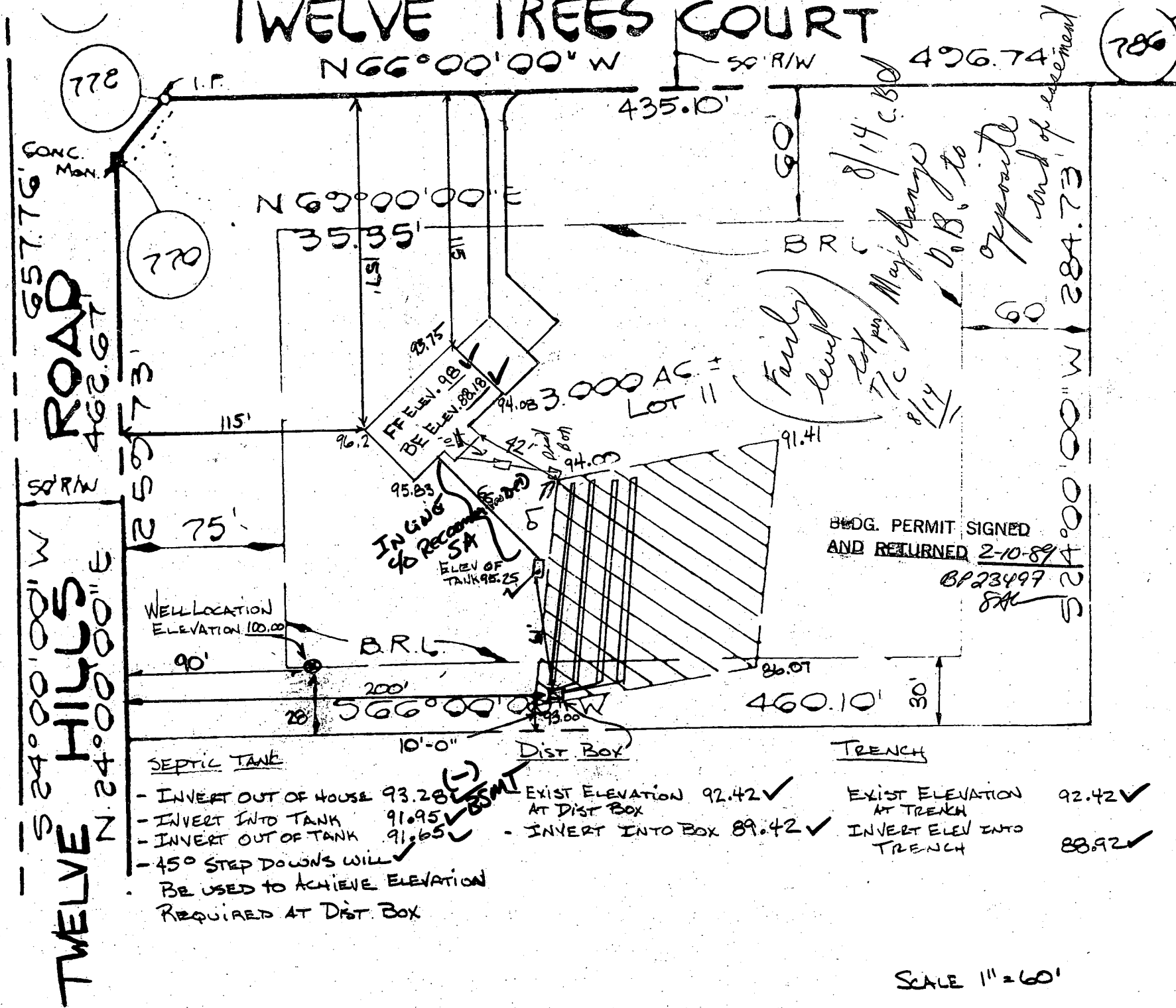
TESTED BY

R HODGES

ALSO PRESENT

MARK
CHUCK CROVO
2 KETTERMANS
DAVID

TWELVE TREES COURT



SEPTIC TANK

- INVERT OUT OF HOUSE 93.28 ✓
- INVERT INTO TANK 91.95 ✓
- INVERT OUT OF TANK 91.65 ✓
- 45° STEP DOWNS WILL BE USED TO ACHIEVE ELEVATION REQUIRED AT DIST. BOX

- EXIST ELEVATION 92.42 ✓ AT DIST. BOX
- INVERT INTO BOX 89.42 ✓

- EXIST ELEVATION 92.42 ✓ AT TRENCH
- INVERT ELEV INTO TRENCH 88.92 ✓

SCALE 1" = 60'

B 1	4918	SEQUENCE NO. (DP USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL	STATE PERMIT NUMBER 40-81-2520
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)			please print or type	
OWNER INFORMATION Date Received (APA) 010788 AMERICAN PROPER 8307 11th Street ELLICOTT CITY MD 21043 Town State Zip			LOCATION OF WELL HOWARD 8 COUNTY TWELVE HILLS 23 SUBDIVISION SECTION 2 LOT 11 DAYTON 52 NEAREST TOWN MILES FROM TOWN (enter 0 if in town) 2 MI TWELVE HILLS ROAD NEAR WHAT ROAD ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH WEST SOUTH EAST DISTANCE FROM ROAD ENTER FT or MI 1540	
DRILLER INFORMATION Driller's Name KATH MAYNE 77 License No. 80 Firm Name KATH MAYNE WELL DRILLING Address 9200 Brown Church Rd. Mt. Airy Signature Kath Mayne Date 11/9/88			DIRECTION OF WELL FROM TOWN (CIRCLE BOX) 	
WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 5 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500			NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL HOWARD COUNTY NAME A38869 COUNTY NO. STATE SIGNATURE DATE ISSUED 01/28/88 CO SIGNATURE B. Nelson NORTH GRID 509000 EAST GRID 081000 EXP. DATE 07/28/88	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="checkbox"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input type="checkbox"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)			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 	
APPROXIMATE DEPTH OF WELL 150 FEET APPROXIMATE DIAMETER OF WELL 6" 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 checked="" 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 _____			DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" 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 type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY <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 (OEP USE ONLY) APPROP. PERMIT NUMBER _____ FORCE 2 INITIALS IN BOX PERMIT NO. 40-81-2520 SPECIAL CONDITIONS	

RECEIVED
HOWARD COUNTY
HEALTH DEPT.
ELICOTT CITY, MD.
JAN 6 9 03 AM '87

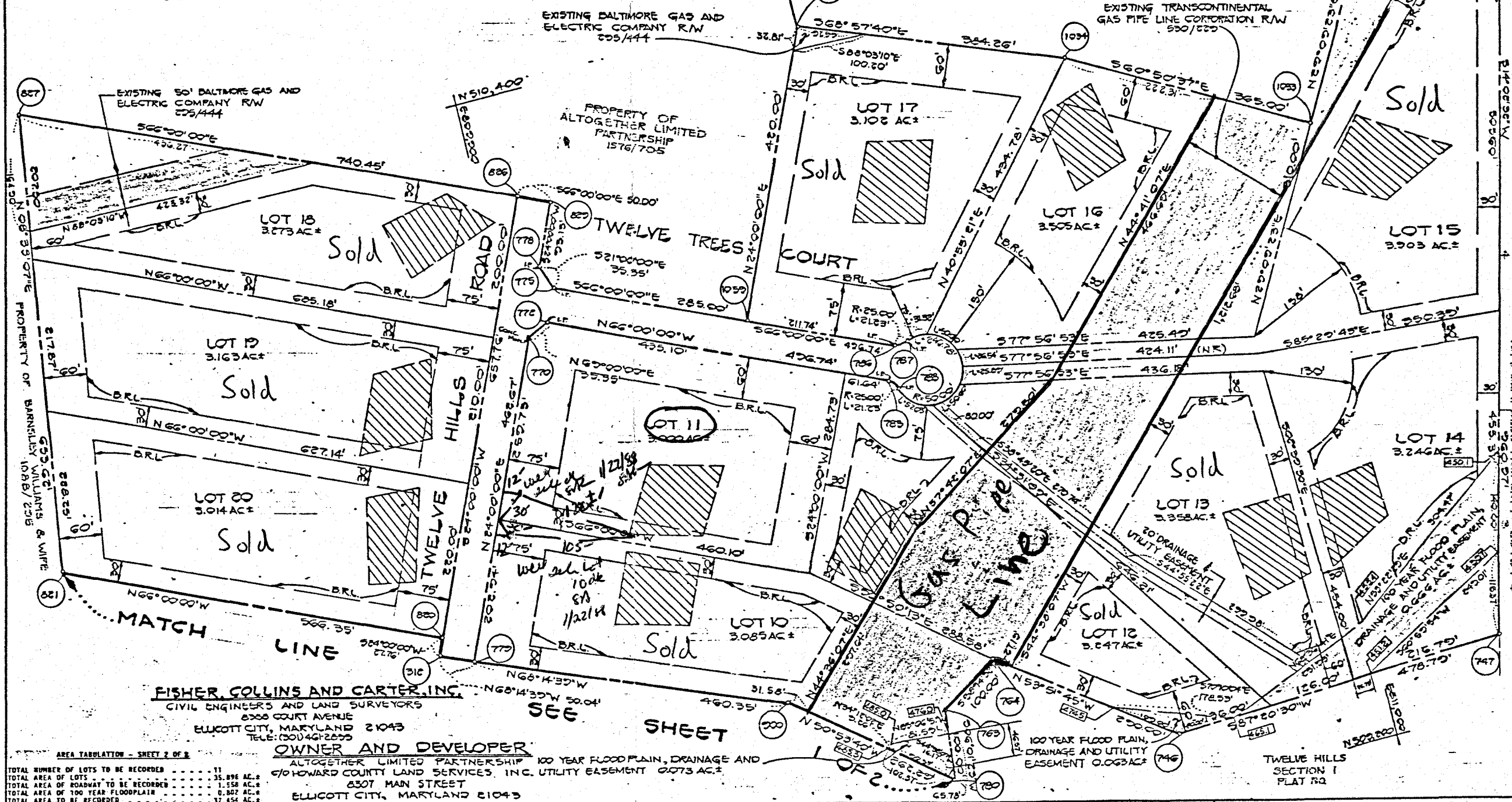
- ① 43 ft open hole
- ② 60 ft
- ③ Location looks OK PER plan
- ④ 15 bags
- ⑤ well OK

RECEIVED
HOWARD COUNTY
HEALTH DEPT.
JAN 6 4 37 PM '87

129/87
R. W. Weyer

NOTE:

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.



FISHER, COLLINS AND CARTER, INC.
CIVIL ENGINEERS AND LAND SURVEYORS
6000 COURT AVENUE
ELICOTT CITY, MARYLAND 21043
TELE: (301) 461-2655

OWNER AND DEVELOPER

ALTOGETHER LIMITED PARTNERSHIP
670 HOWARD COUNTY LAND SERVICES, INC. UTILITY EASEMENT 0.073 AC±
6307 MAIN STREET
ELICOTT CITY, MARYLAND 21043

AREA TABULATION - SHEET 2 OF 2

TOTAL NUMBER OF LOTS TO BE RECORDED	11
TOTAL AREA OF LOTS	35.896 AC±
TOTAL AREA OF ROADWAY TO BE RECORDED	1.558 AC±
TOTAL AREA OF 100 YEAR FLOODPLAIN	0.802 AC±
TOTAL AREA TO BE RECORDED	37.454 AC±

OWNER'S CERTIFICATE:

WE, ALTOGETHER LIMITED PARTNERSHIP, A MARYLAND LIMITED PARTNERSHIP, OWNER OF THE PROPERTY SHOWN AND DESCRIBED HEREON, HEREBY ADOP THIS PLAN OF SUBDIVISION, AND IN CONSIDERATION OF THE APPROVAL OF THE FINAL PLAT BY THE OFFICE OF PLANNING AND ZONING, ESTABLISH THE MINIMUM BUILDING RESTRICTION LINES AND GRANT UNTO HOWARD COUNTY, MARYLAND, ITS SUCCESSORS AND ASSIGNS, (1) THE RIGHT TO LAY, CONSTRUCT AND MAINTAIN SEWERS, STORM DRAINS, WATER PIPES AND OTHER MUNICIPAL UTILITIES AND SERVICES IN AND UNDER ALL ROAD OR STREET RIGHTS-OF-WAY AND THE SPECIFIC EASEMENT AREAS SHOWN HEREON; (2) THE RIGHT TO REQUIRE DEDICATION FOR PUBLIC USE THE BEDS OF THE STREETS AND/OR ROADS AND FLOODPLAINS AND OPEN SPACE WHERE APPLICABLE AND FOR GOOD AND OTHER VALUABLE CONSIDERATION, HEREBY GRANT THE RIGHT AND OPTION TO HOWARD COUNTY TO ACQUIRE THE FEE SIMPLE TITLE TO THE BEDS OF THE STREETS AND/OR ROADS AND FLOODPLAINS, STORM DRAINAGE FACILITIES AND OPEN SPACE WHERE APPLICABLE; (3) THE RIGHT TO REQUIRE DEDICATION OF WATERWAYS AND DRAINAGE EASEMENTS FOR THE SPECIFIC PURPOSE OF THEIR CONSTRUCTION, REPAIR AND MAINTENANCE; AND (4) THAT NO BUILDING OR SIMILAR STRUCTURE OF ANY KIND SHALL BE ERRECTED OR OVER THE SAID EASEMENTS AND RIGHTS-OF-WAY. WITNESS OUR HANDS THIS 23RD DAY OF JUNE, 1987.

Donald R. Reuver GENERAL PARTNER
Robert L. Ballantyne GENERAL PARTNER
WITNESS
Terrell A. Fisher
Thomas L. Jones

SURVEYOR'S CERTIFICATE

I HEREBY CERTIFY THAT THE FINAL PLAT SHOWN HEREON IS CORRECT; THAT IT IS A SUBDIVISION OF PART OF THE LAND CONVEYED BY HUGH R. HILL, JR. AND ELEANOR J. HILL, HIS WIFE, TO ALTOGETHER LIMITED PARTNERSHIP, BY DEED DATED DECEMBER 22, 1986 AND RECORDED IN THE LAND RECORDS OF HOWARD COUNTY, MARYLAND IN LIBER 1576 AT FOLIO 705 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, MARYLAND AS SHOWN IN ACCORDANCE WITH THE ANNOTATED CODE OF MARYLAND, AS AMENDED.

Terrell A. Fisher
TERRELL A. FISHER, L.S. #10692

APPROVED: FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS, HOWARD COUNTY HEALTH DEPARTMENT.	DATE
HOWARD COUNTY HEALTH OFFICER	
APPROVED: HOWARD COUNTY OFFICE OF PLANNING AND ZONING.	DATE
DIRECTOR	
APPROVED: FOR STORM DRAINAGE SYSTEMS, AND PUBLIC ROADS, HOWARD COUNTY DEPARTMENT OF PUBLIC WORKS.	DATE
DIRECTOR	

TWELVE HILLS
SECTION TWO
LOTS 7-24

TAX MAP 28 DO TAX MAP PARCEL 66
ZONING R
FIFTH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
SCALE: 1"=100' MAY 15, 1987
SHEET 2 OF 2
567-48 P87-65 F87-

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-2520
Location of property (road) TWELVE HILLS ROAD
Subdivision TWELVE HILLS Lot 11 Block Plat Sec. 2
Well Driller RALPH MAYNS Owner LIMITED TOGETHER

Depth of well 328
Distance of measuring point (M.P.) above ground 2
Static water level (S.W.L.) below M.P. 45

I. High rate pumping -- reservoir drawdown

Time pump started 930 Pumping rate 10 gph
Total time 1 hr to reach pumping water level 265 ft. 1/4 below M.P.

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

[illegible]

C1 2133 SEQUENCE NO. (OEP USE ONLY)

1 2 3 6
(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 TYPETHIS REPORT MUST BE SUBMITTED WITHIN
45 DAYS AFTER WELL IS COMPLETED.COUNTY
NUMBER A 38569

DATE Received

8	9	10	11	12	13
---	---	----	----	----	----

DATE WELL COMPLETED

030188

Depth of Well

22 325 26
(TO NEAREST FOOT)PERMIT NO.
FROM "PERMIT TO DRILL WELL"
HO-81-2520

OWNER

STREET OR RFD

SUBDIVISION

SECTION 2

LOT 11

WELL LOG

Not required for driven wells

STATE THE KIND OF FORMATIONS
PENETRATED, THEIR COLOR, DEPTH,
THICKNESS AND IF WATER BEARINGDESCRIPTION (Use
additional sheets if needed)FEET
FROM TOCheck
if water
bearing

Top Soil	0	2	
Shale	2	50	✓
Sand Stone	50	55	
MICA	55	60	
Sand Stone	60	65	✓
MICA	65	325	

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)yes ☒ Y ☐ N no

TYPE OF GROUTING MATERIAL

CEMENT ☒ CM BENTONITE CLAY ☐ BC

NO. OF BAGS 13 NO. OF POUNDS 1300

GALLONS OF WATER 78

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 43 ft.
(enter 0 if from surface)

CASING RECORD

casing
types
insert
appropriate
code
below☒ ST ☐ CO
STEEL CONCRETE
☒ PL ☐ OT
PLASTIC OTHER

MAIN CASING TYPE Nominal diameter top (main) casing (nearest inch) Total depth of main casing (nearest foot)

☒ PL ☐ 6 ☐ 60

OTHER CASING (if used)

diameter depth (feet)
inch from to

EACH CASING									
-------------	--	--	--	--	--	--	--	--	--

screen type or open hole

SCREEN RECORD

insert
appropriate
code
below☒ ST ☐ BR ☒ HO
STEEL BRASS OPEN
BRONZE HOLE
☒ PL ☐ OT
PLASTIC OTHER

C2

1 2

DEPTH (nearest ft.)

1	HO	58				325			
2									
3									

EACH SCREEN

1 2 3

SLOT SIZE 1 2 3

DIAMETER OF SCREEN (NEAREST INCH)

from to

GRAVEL PACK

IF WELL DRILLED WAS

FLOWING WELL INSERT

F IN BOX 68

OEP USE ONLY

(NOT TO BE FILLED IN BY DRILLER)

T (E.R.O.S.) WQ

70 72 74 75 76

TELESCOPE LOG OTHER DATA

CASING INDICATOR

C 3

1 2

PUMPING TEST

HOURS PUMPED (nearest hour) 6

PUMPING RATE (gal. per min. to nearest gal.) 1

METHOD USED TO MEASURE PUMPING RATE bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 45

WHEN PUMPING 265

TYPE OF PUMP USED (for test)

☒ A air ☐ P piston ☐ T turbine
☐ C centrifugal ☐ R rotary ☐ O other (describe below)
☐ J jet ☒ S submersible

PUMP INSTALLED

DRILLER WILL INSTALL PUMP YES ☒ NOIF DRILLER INSTALLS PUMP, THIS SECTION
MUST BE COMPLETED FOR ALL WELLS
EXCEPT HOME USE

TYPE OF PUMP INSTALLED

PLACE (A,C,J,P,R,S,T,O)

IN BOX - SEE ABOVE:

CAPACITY:

GALLONS PER MINUTE (to nearest gallon)

PUMP HORSE POWER

PUMP COLUMN LENGTH (nearest ft.)

CASING HEIGHT (circle appropriate box and enter casing height)

LAND SURFACE

above below

2 (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)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
WELLI 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.

DRILLERS IDENT. NO. 233

DRILLERS SIGNATURE

(MUST MATCH SIGNATURE ON APPLICATION)

SITE SUPERVISOR (sign. of driller or journeyman
responsible for sitework if different from permittee)

DATE 3/1/88 WELL YIELD TEST DATA SHEET - ~~FREDERICK~~ Howard. COUNTY REVIEWED BY DK Spahr
 Maryland Well Permit No. H-81-2520 Owner or Applicant Limited Altogether
 Location of Property (road) Twelve Hills Rd.
 Subdivision Twelve Hills Lot 11 Block — Plat — Sec. 2
 Depth of Well 325 ft Height of Measuring Point Above Ground 2 ft
 Static Water Level Below Measuring Point 45 ft

The first entry in the table must be when you begin the drawdown. Enter all appropriate information. Indicate when the drawdown phase ends and the recovery test begins.

TIME (CHRON.)	WATER LEVEL Below M.P.	PUMPING RATE Time to fill <u>1</u> gal. bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per min.)
9:30	45 ft	5 sec		10 G.P.M.
10:30	265 ft	5 sec		1 G.P.M. +
10:45	265	55		1
11:00	265	55		1
11:15	265	55		1
11:30	265	55		1
11:45	265	55		1 G.P.M. +
12:00	265	55		1
12:15	265	55		1
12:30	265	55		1
12:45	265	55		1
1:00	265	55		1
1:15	265	55		1 G.P.M. +
1:30	265	55		1
1:45	265	55		1
2:00	265	55		1
2:15	265	55		1
2:30	265	55		1
2:45	265	55		1 G.P.M. +
3:00	265	55		1
3:15	265	55		1
3:30	265	55		1
3:45	265	55		1
4:00	265	55		1
4:15	265	55		1
4:30	265	55		1 G.P.M. +

I hereby certify that the yield test was conducted as described in State Health Department Regulations COMAR 10.17.13.07Q.

Signature of Well Driller

60 ft PL 430m 13 bags

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 # 44802
Date 7/31/89
Telephone 489-4459

Name of Installer WTC III

License Number 7979

Certified Well Pump Installer ☐ Well Driller ☐ Registered Plumber ☒

Name of Property Owner MICHAEL J. MANTUA

Telephone 301-421-1675

Subdivision TWELVE HILLS Lot # 11

Well Tag # HO-81-2520

Site Address 13002 TWELVE TREES COURT

Pump

- Type
 - Deep well jet ☐
 - Shallow well jet ☐
 - Submersible ☒
- Make MEYERS
- Model # 4
- Capacity 4 GPM

Motor

- Horsepower 3/4
- RPM 110
- Voltage 220
 - 110 ☐
 - 220 ☒

Pitless Adapter

- Make HARVARD
- Model # 4 FT
- Depth 4 FT

- Pump exceeds well capacity Yes ☒ No ☐
- If Yes, is low pressure cutoff switch installed? Yes ☒ No ☐
- What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors ☒ Cable guards ☒ Other ☐

Tank

- Capacity 60 GAL
- Pressure relief valve? YES

Piping

- Type PLASTIC
- Size 1/2" BPSI
- NSF and/or BOCA Code approved YES
- Depth of supply line 290

Well data

- Depth 325 ft.
- Yield 1 GPM
- Static water level 1 ft.
- Will water supply be disinfected by installer? YES

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: [Signature]

Date: 7-31-89

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