03-313239

PERMIT

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38625

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY BUREAU OF ENVIRONMENTAL HEALTH 461-9933

INDEXED

_4/07/89

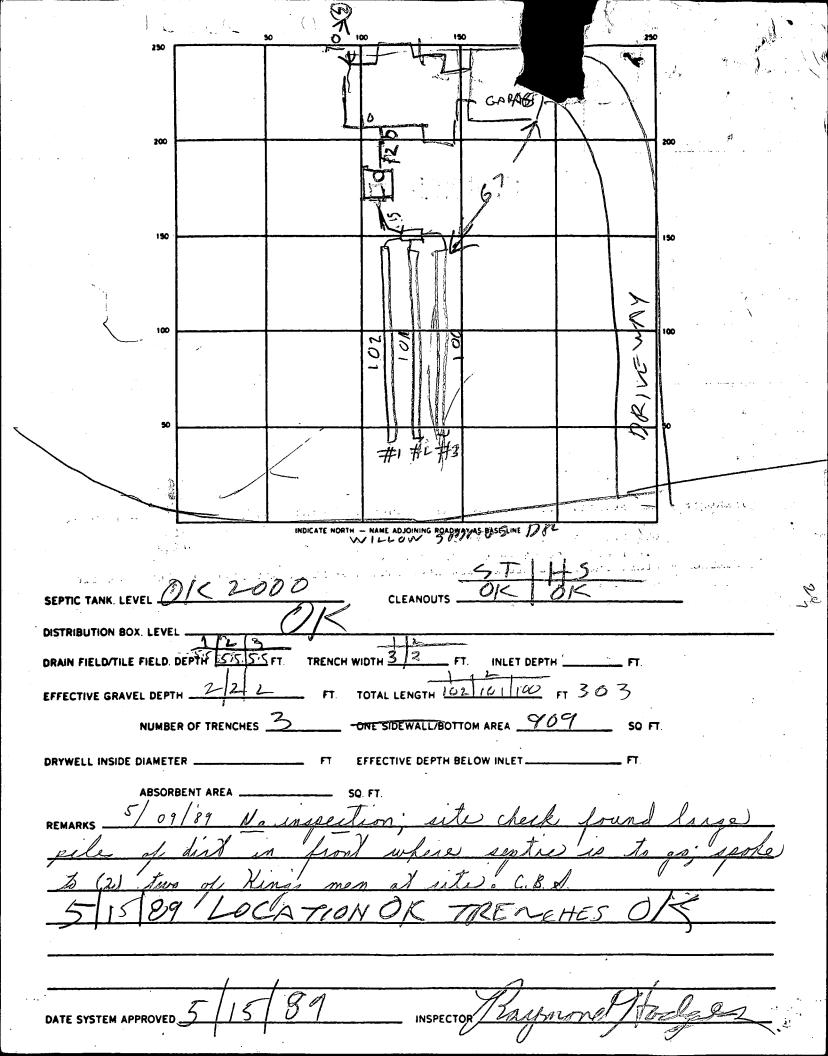
waiter w. King Plumbing & Heating Contractors, Inc. IS PE	RMITTED TO INSTALL X ALTER
ADDRESS 5305 King's Court, Frederick, Maryland 21701	PHONE662-6990
SUBDIVISION Willow Highlands ROAD 1709 Willow S	prings Dr LOT2
PROPERTY OWNER Willow Springs Limit	ed Partnership
ADDRESS	
IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION	ON AREA BY 22%
GARBAGE GRINDER? YES X NO NO	•
SEPTIC TANK CAPACITY 2000 GALLONS NUMBER OF BEDROOMS 4	<u> </u>
TRENCHES - 220 sq. ft. per bedroom with garbage disposal Inlet 3.5 feet below original grade. Bottom original grade. Effective area begins at 3.5 2.0 feet of stone below distribution pipe. LOCATION - Start the first trench 130 feet from the from the left lot line as seen when facing the lot trenches on contour toward the left side of 1 NOTE - No trench to exceed 100 feet in length. Prov cap to grade or above on septic tank. ΦΚ/(ω)	maximum depth 5.5 feet below feet below original grade. t lot line and 300 feet from from Willow Springs Drive. Run ot. MAINTAIN 100 FEET FROM WELL ide 6" - 8" diameter cleanout an
PLANS APPROVED BY Sid Abel	DATE2/22/89
COVER NO WORK UNTIL INSPECTED AND APPROVED	and the second s
NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSI	UL 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 (U	INLESS OTHERWISE SPECIFICALLY AUTHORIZED
NOTE: IF DEEP TRENCHIES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENC	
NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO ABSORPTION TRENCH TO EXCEED 100 FEET II	N LENGTH.
NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 40 PVC OR ABS	COG PERMIT SIGNED
PERMIT VOID AFTER TWO YEARS	RETURNED 5/9/9/
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER "CA! ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE DECUMEND.	STIRON CONCRETE OR TERRA COTTA OR PVC OR ABS

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

BLDG. PERMIT SIGNED

NOTE DISTRIBUTION BOXES MUST HAVE BAFFLES



SUBDIVISION: Willow Highlands

HD-191

LOT NUMBER: 2

DRY WELL OR DRY WELL AND TRENCH

		sq	. ft./bedroom 🐃
3 bedroom	Septic Tank 1000 gallon	Minimum Total Square Fe	<u>eet</u>
4 bedroom	1250 gallon		
5 bedroom	1500 gallon		
Inletfeet	below original grade.		
Bottom maximum depth	feet below or	riginal grade.	
Effective area begins	at feet belo	ow original grade.	
and leave a to exceed l	5-foot earth buffer bet	ent area, run the trench of tween dry well and trench. rench inlet to be same as ibution pipe.	No trench is
	TRENCHES		
*			. ft./bedroom bedroom/will wage dispose
Trench to be 3	wide.	220 sq. ft.	bedrom/well
Inlet <u>3.5</u> feet	below original grade.	Jan (Wage dispose
Bottom maximum depth	5.5 feet below or	iginal grade. 7646P	
	at 3.5 feet belo		
	one below distribution p		
 (2) If more (3) Trenches (4) Call for (5) Provide tank and (6) If a ga 	to be installed on <u>leve</u> inspection of trench be 6" - 8" diameter clean drywell.	distribution box is requied ground. fore gravel is installed. fout and cap to grade or a d, increase septic tank c	bove on septic
LOCATION: START TH	G FIRST PREACIT 130	FF FROM THE FRONT LE	TCINE AND
300 Ft From THE	: LEST LIT LING !	45 Sten water FARING	THE 105
From Willow Spa	eings DA. RUN TRO	PWCHES ON CONTOUR	NWAND THE
LEFT SIDE OF LO	T MAINTAIN 100 F	FF FROM Well S.C.	but 2.22.89
			<u> </u>
	•	•	
1			

APPLICATION A 38629

PERCOLATION TESTING

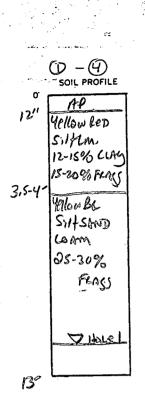
HOWARD COUNTY HEALTH DEPARTMENT **BUREAU OF ENVIRONMENTAL HEALTH**

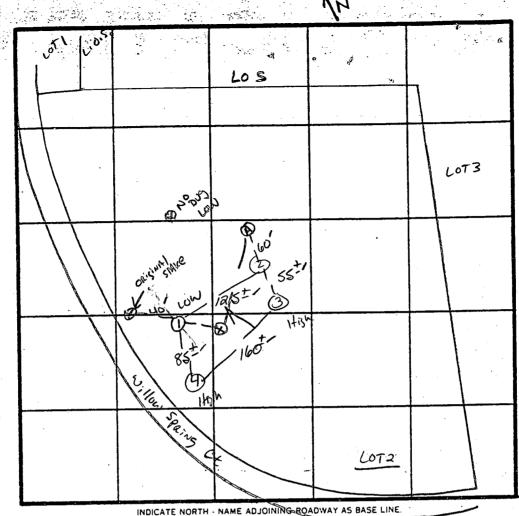
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043 ,

TELEPHONE: 461-9933

O: THE COUNTY HEALTH OFFICER	•	· · · · · · · · · · · · · · · · · · ·		
ELLICOTT CITY, MARYLAND	•			
I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER T	O CONSTRUCT OR RECONST	RUCTI A SEWAGE DISPOSAL	SYSTEM.	
ROPERTY OWNER WILLOW SPRINGS	I IMITED DA	DTNEDSHID		
ROPERTY OWNER WILLOW SPRINGS	POAD	NIFCKSTIIP	7	7
16801 WESLEY CHAPEL ADDRESS MONKTON, MARYLAND	21111	PHONE	347-87 0	ē
ROSPECTIVE BUYER			<u> </u>	
			•	
ADDRESS	 	PHONE		
PROPERTY LOCATION:				
SUBDIVISION WILLOW SPRINGS GO	S		0	
UBDIVISION WILLOW SPAINGS GO	LF-COURSE	LOT NO	d	
ALC DE DIE T	0 N NT /1	VE CTOLL D	o A D	
OAD AND DESCRIPTION N/S U.S. RTE 7	U N HI CI	VC STUCK A	<u> </u>	
1709 Wil	low Springs	DR.		
	•	`		
TAX MAP 9 \$ 15 PARCEL # 151 \$ 11	<u> </u>			
30 A=+			S.F.D	
IZE OF LOT		ITPE BLUG	ISINGLE FAMILY DWELLING O	OR COMMERCIAL)
		1.1.		
THE SYSTEM INSTALLED UNDER THIS APPLICATION IS A	CCEPTABLE ONLY UNTIL P	UBLIC FACILITIES BECOM	ME AVAILABLE. I FULLY UN	IDERSTAND THE
	The state of the s		• •	
FEE CONNECTED WITH THE FILING OF THIS PERC TEST	APPLICATION IS NON-REFI گا در ۲	JNDABLE UNDER ANY CII LOW SPRINK	RCUMSTANCES. I ALSO AGI	REË TO COMPLY
WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS	~ ~ ~	Roman B		10001000
		(SIGNATURE OF	APPLICANT)	
PPROVED BY Siel albel	\bigcup_{X}	endonal hour	les DATE 2-28	-SG
PPROVED BY	FOR	mucuer june	DATE A 20	0/
EJECTED BY	FOR	•	DATE	
OLD PENDING FURTHER TESTS	<u> </u>		DATE	
41282	Due MADE CARE	The hold for	Cutalización ala	T CAL.
EASONS FOR REJECTION OR HOLDING 4-13-87	TAME. SPOTIS POSE!	O Trojer of est	- U DOLLUISIAN GIVER	· · O /our
	<u>.</u>	·		
		Dea Dea	DG. PERMIT SIGNEL	

THIS IS NOT A PER





X PERC 6MIN 180 PIBL FULLT 3.5 BUTTM 5.5

		U#1			\\	·	-
DATE	TEST NO.	DEPTH	, PRE START	WET STOP	TEST	- 1" DROP STOP	TIME
4/13/87	15	<i>3,</i> ડ	1:55	1159	1159 Splaw 2.5	2:06	7min
787	2 5	WATER AT	1:44	1:47	1:47	1,52	SMIN
	2 V 3 Sn	13° 0 3,5° 7,5	NIFORM SOI 1:48 1:46	1:52 1:49	3.5° 1152 1149	1:58	6 MIN 5 MIN
	3 v		riFULUA SO				
	40	12 U	vironm Se	Now 2.5-		,	
	. ,						
				•		,	
			·				
4/13/87	A- 56	RING WAR	RAT 7				

		inly	
TYPE OF SOIL	Chestell	 ·	
TESTED BY	S. Aby	ALSO PRESENT	U-KETTERMAN

. ЕН. 12-1079

i	eth es 🎺			1/.	/	11	N-08-1	427	
DATE MAnch 13 158	5 WELL	YIELD TE	ST DATA SHÈ	ET - Par	HANK	COUNTY		REVIEWED BY	-
Maryland Well Pero	mit No. <u>/</u>	10-88-	04,20.	Owner (or Appl	icant	WILLOW	Springs	Cinited
Location of Prope	rty (road)	Off i	villow S	Spring	5 6	ni			
Subdivision Will	OW 1916	H L AM	2 S	Lot &	レ Blo	ck	Plat	Sec.	
Depth of Well/3	85'	· .	Heig	ht of Mea	suring	Point	: Above (Ground 3	ze .
Statio Mator Toyo	1 Ralau Mar		Daine . 1/						
Test Stantol 4 The first en	τ 10:43 trv in the	table m	ust be when	total	77 <i>ME</i> In the	drawdo	NO TO /	reach 20	ropries
information. Ind	icate when	the draw	wdown phase	ends and	i the r	ecover	y test b	egins.	ropriate
·			PUMPIN	G RATE			·		
TIME (CHRON.)	WATER I Below N				FLOW M			CALCULAT	,
			gal gal	. bucket	. (if use	ed)	(gallons	per min.)
11:00	20	R		Sec		·		12	SPM
11;15	20	P	5	Sec			Λ	12	Gom
11:30	20	A	5	Sec				12	GPM
11:45	20	H	5	Sec				12	6pm
121,00	20	fo	5	Sec				12	GPM
17:15	20	F	5	See			1	12	Gram
12:30	20	F	5	Soc			1 .	12	GPM
12:45	20	1	5	Sec	: 1			.17.	GPM
1:00	20	F	5	Sec		7-7		12/	GPM
1115	20	Fo	5	Sec	Ì			12	GPM
1;30	20	for	5	Sec		\mathcal{N}		12	Spm
1:45	20	For	. 5	Sec		X		12	Spm

I hereby certify that the yield test was conducted as described in State Health Department Regulations COMAR 10.17.13.070. 50 & CASING 29BAYS

20

21,00

Signature of Well Driller

R

5

Sec

2 GPM

c 1 8420		NCE NO		STATE OF MARYLAND	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
(THIS NUMBER IS TO BE IN COLS. 3-6 ON ALL CAR	PUNCHED			WELL COMPLETION REPORT FILETH THIS FORM COMPLETELY PLEASE PRINT OR TYPE	COUNTY NUMBER
DATE Received	DATE WE	FIL COM	AÉI ETE	Depth of Well	PERMIT NO.
			ह न	22 / 5 2 26	FROM "PERMIT TO DRILL WELL"
8 13	15		20	(TO NEAREST FOOT)	28 29 30 31 32 33 34 35 36 37
	last name		5 5 A	first name	· · · · · · · · · · · · · · · · · · ·
STREET OR RFD	11-1-00	est es	KIK	TOWN	LOTE 121 SWIJSHIP
WELL	LOG			GROUTING RECORD NO	C 3
Not required to STATE THE KIND O				WELL HAS BEEN GROUTED (Circle Appropriate Box)	
PENETRATED, THEI	R COLOR,	, DEPTH,		TYPE OF GROUTING MATERIAL 44 44	PUMPING TEST
THICKNESS AND IF DESCRIPTION (Use	FEE1	T	Check	CEMENT CM BENTONITE CLAY BC	HOURS PUMPED (nearest hour)
additional sheets if needed)	FROM	ТО	if water bearing	NO. OF BAGS NO. OF POUNDS 45 46 C	PUMPING RATE (gal. per min. 2 2 1 1 1 15
				GALLONS OF WATER	METHOD USED TO MEASURE PUMPING RATE AND MEASURE PUMPING RATE
Tay Soil	G	والم		from O ft. to D ft.	WATER LEVEL (distance from land surface)
			المخصرة	48 TOP 52 54 BOTTOM 58 (enter 0 if from surface)	BEFORE PUMPING
540-13		70		casing CASING RECORD	WHEN PUMPING
Shoul Stone	10	45		types insert ST CO	22 25
1	Se. \$ 60			(appropriate) STEEL CONCRETE	TYPE OF PUMP USED (for test)
MICKA	1,5	75		below PLASFIC OTHER	A air P piston T turbine
· 6.			i and the same	MAIN Nominal diameter Total depth	C centrifugal R rotary O other
Smed Stone	75	50 T		CASING top (main) casing of main casing	27 27 (document)
-	1	165		(********************************	J jet Submersible
MICKA				F L G G G 70	27 27
Land Chance	84.5	1721		E OTHER CASING (if used)	
Short Stone			. •	A diaméter depth (feet) н inch from to	PUMP INSTALLED
micka	וטכו	105		C A C C C C C C C C C C C C C C C C C C	DRILLER WILL INSTALL PUMP YES NO
*		ļ		N	(CIRCLE) (YES or NO) IF DRILLER INSTALLS PUMP, THIS SECTION
			-	G L L COPEN PEOOR	MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE
				screen type SCREEN RECORD or open hole	TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O)
				insert STEL BRASS OPEN	IN BOX-SEE ABOVE:
			`.	code BHONZE HOLE	CAPACITY: GALLONS PER MINUTE
			•	below PLASTIC OTHER	(to nearest gallon) 31 35
				C[2]	PUMP HORSE POWER 37 41 PUMP COLUMN LENGTH
· ·				DEPTH (nearest ft.)	(nearest ft.)
				E'HO YZ I J85T I	CASING HEIGHT (circle appropriate box and enter casing height)
				C 8 9 11 15 17 21	LAND SURFACE
·			·	S ² 23 24 26 30 32 36	helow (nearest
CIRCLE APPROI				E ₃	49 foot)
A A WELL WAS ABAND WHEN THIS WELL W			.ED .	R 38 39 41 45 47 51	LOCATION OF WELL ON LOT
E ELECTRIC LOG OBTA	AINED			SLOT SIZE 1 2 3	SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR
P TEST WELL CONVER	TED TO PI	RODUCT	TION	DIAMETER (NEAREST INCH)	N LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES
I HEREBY CERTIFY THAT THIS WEL				56 60 ′	(MEASUREMENTS TO WELL)
ACCORDANCE WITH COMAR 10.1 AND IN CONFORMANCE WITH ALI	L CONDITION	IS STATED	IN THE	from to GRAVEL PACK	will and
ABOVE CAPTIONED PERMIT, AN PRESENTED HEREIN IS ACCURATE OF MY KNOWLEDGE.				FLOWING WELL INSERT	Ar Lo
DRILLERS IDENT., NO.	32)	3		F IN BOX 68 68	The line
ONICLENS IDENT. NO. L	RAINA			OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)	and the second s
DRILLERS SIGNATURE	- Logi			T (E.R.O.S.) WQ	1'set line
(MUST MATCH SIGNATURI	E ON APPI	LICATIO	N) -	70 72 74 75 76	
SITE SUPERVISOR (sign. o	f driller or	iournos	man	TELESCOPE LOG OTHER DATA	
responsible for sitework if	different fr	om perm	nittee)	CASING INDICATOR	Commence Sentence Sentence Sentence Commence Com
				COUNTY	ार छ ल छ

6/29/89

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

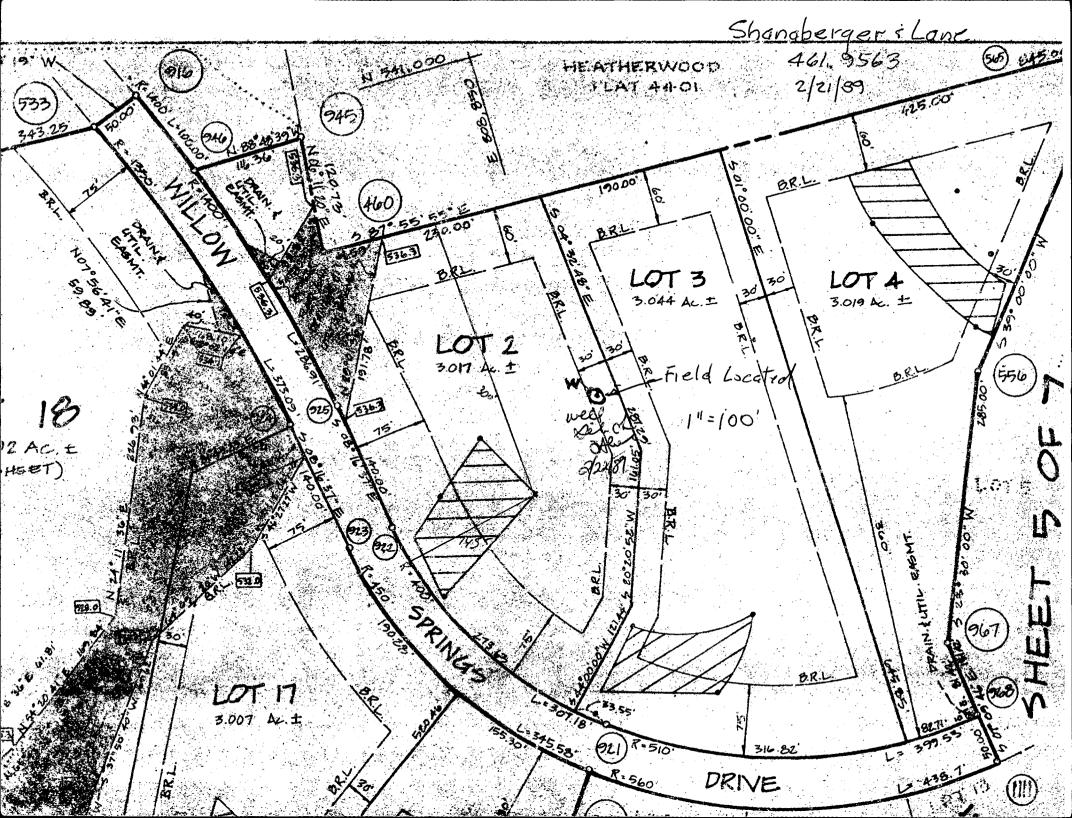
New Installation X Replacement		Receipt # 44546 Date 5/11/69
Name of Installer W.W.King P	lbg. & Htg. Contr., Inc.	Telephone 1-301-662-6990
License Number 2217 Certified Well Pump Installer	well Driller	Registered Plumber X
Name of Property Owner Pulee Subdivision Willow Springs Site Address 1709 Willow Sp	Homes Corp Lot #x2 We	Telephone <u>1-301-921-8707</u> ell Tag # <u>HO - 88</u> - <u>9407</u> ー
Pump 1. Type a. Deep well jet b. Shallow well jet c. Submersible X 2. Make Goulds 3. Model # 7EH07422 4. Capacity 7 GPM 5. Pump exceeds well capacit 6. If Yes, is low pressure c	y Yes No utoff switch installed?	Pitless Adapter 1. Make Martinson 2. Model # BP-10X 3. Depth 42 min 60 max
7. What methods are used to vibrations? Torque arre	protect the pump and elec stors	trical wiring from s X Other
	•	The second secon
Tank 1. Capacity 80 2. Pressure relief valve? yes	Piping 1. Type plastic 160# 2. Size 1"	Well data 1. Depth <u>185</u> ft. 2. Yield <u>12</u> GPM
Tank 1. Capacity 80 2. Pressure relief	Piping 1. Type plastic 150# 2. Size1" 3. NSF and/or BOCA Code approvedX 4. Depth of supply line 42" min	Well data 1. Depth <u>185</u> ft.
Tank 1. Capacity 80 2. Pressure relief valve? yes	Piping 1. Type plastic 150# 2. Size	Well data 1. Depth <u>185</u> ft. 2. Yield <u>12</u> GPM 3. Static water level ft. 4. Will water supply be disinfected by installer? <u>ves</u> the Howard County Health

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

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Page of Date	· ·		5 8 LGO Review _	
Date		· Broot 9	30	
	ં	FIELD DATA S	SHEET	
		HOWARD COUNTY WELL		
Well Permit No.	HO - 8800	(124)	•	
Location of pro	operty (road)	Willow Sparngo Of	2 Block Plater Cullow SO LTD PSH	
Subdivision	Willow Highla	ADS Lot	2 Block Plat	Sec.
Well Driller	L. MAYNE	Owne	I Willow SO. LTD PISH	<u> </u>
Depth of	f well	5	_	•
Distance	e or measuring po	oint (M.P.) above gr	round, 3	
Static v	vater level (S.W.	.L.) below M.P.	16	
I. High rate	pumping reser	rvoir drawdown	,	
Time pum	started /0;4	15	Pumping rate ///	
Total tir	me ISMIN to	reach pumping water	Pumping rate ///sem level // ft.	below M.P.
TT Pegoveru	numn test data -	observations to be	recorded every 15 minu	+ es
	<u></u>			
TIME (in 15 minute in-	WATER LEVEL below M.P.	PUMPING RATE time to fill \$ /	FLOW METER READING (if used)	CALCULATED FLOW (gallons per
tervals		gallon bucket	,	minute)
12:13	20	5 suc		12 GOM
1:00	20	5		12
			3/3/89	
	÷		5. Alul	
	:		H- 1795	, , , , , , , , , , , , , , , , , , , ,
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HD-224

3-13-89

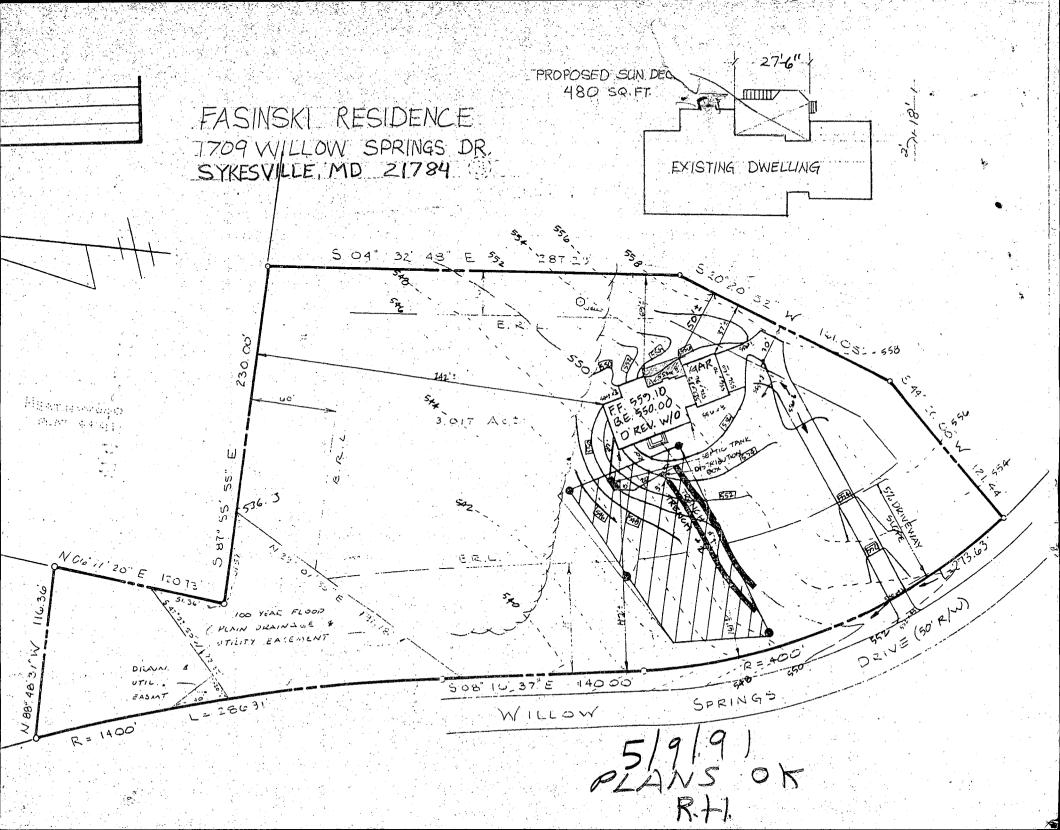


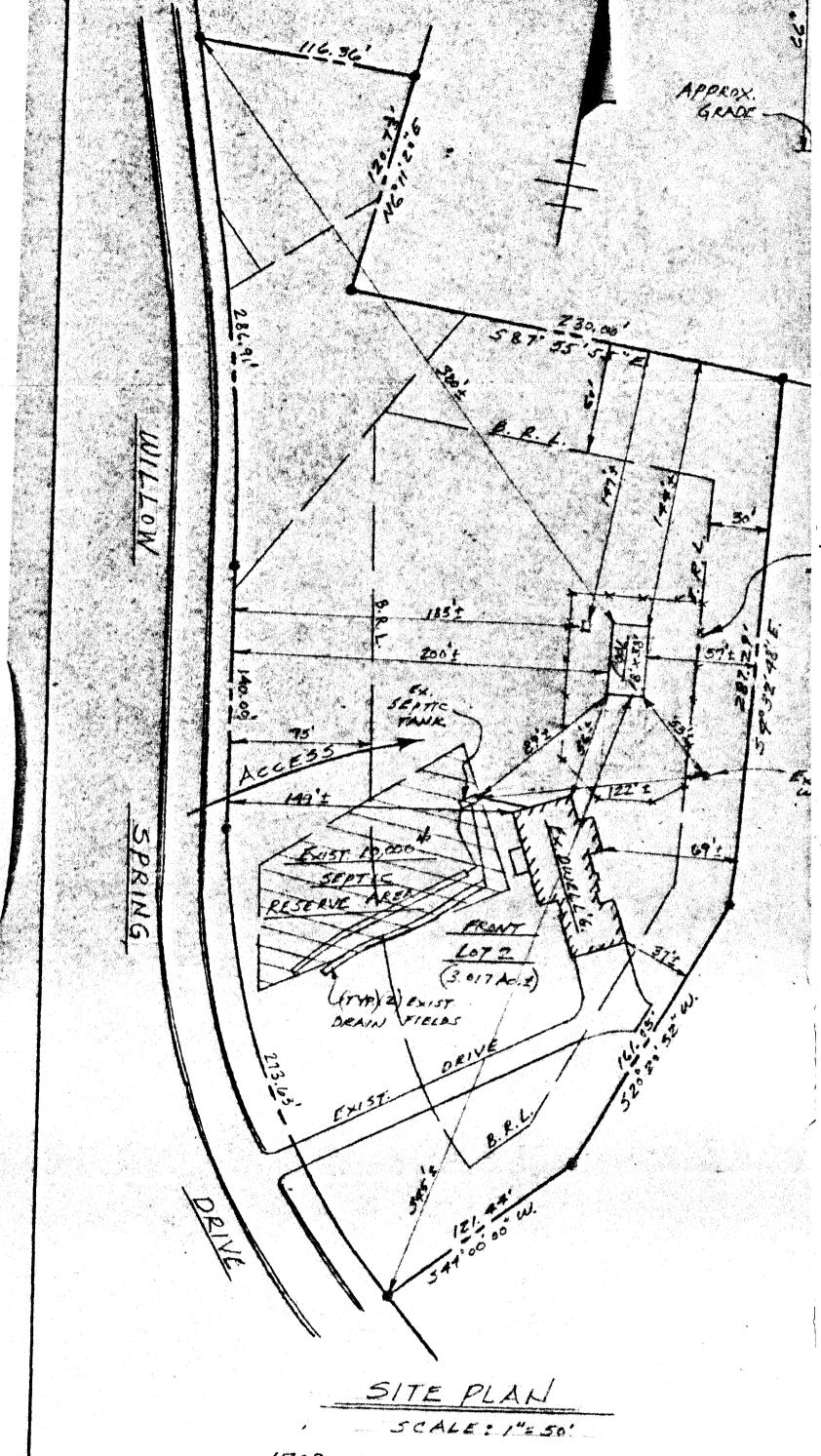
HOWARD COUNTY HEALTH DEPARTMENT Bureau of Environmental Health 3525-H Ellicott Mills Drive Ellicott City, MD 21043 461-9933

APPLICATION FOR SEPTIC PERMIT

New Installation Date 4/4/8	7)
Replacement	-
Name of Installer WALTER W. KING PLEG	ŧ
License # 22/7 Telephone Number /- 30/-662-69	90
Registerd Plumber	*
	•
Name of Property Owner Pulte Homes	
Telephone Number /- 301 - 921 - 8707	
Sub-Division WILLOW HIGHLANDS/WILLOW SPRINGSLOT: 2	
Site Address 1709 WILLOW SPRINGS DR	
SYMESVILLE 21784	
Number of Bedrooms	
Garbage Disposalyesno	

Signature of Applicant Walter Why





1709 WILLOW SPRING DR. 5/9/9/ HOWARD COUNTY, MO 21784 PLANS O/C

