

2/22/89
11:30

04-309529

3606
R484

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

W 43624

A REPAIR

DISTRICT 4th

DATE 2/22/89

DATE SYSTEM APPROVED

INSPECTOR

INDEXED

Olen Ketterman

IS PERMITTED TO INSTALL ALTER X

ADDRESS 14960 Route 144, Woodbine, Maryland 21797 PHONE 442-1336

SUBDIVISION ROAD 3185 Florence Road LOT

PROPERTY OWNER Raymond Becraft
3185 Florence Road

ADDRESS

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

GARBAGE GRINDER? YES NO ☒

SEPTIC TANK CAPACITY 1000 GALLONS NUMBER OF BEDROOMS 3

REPAIR - CALL FOR INSPECTION WHEN GROUND IS OPENED UP SO SANITARIAN CAN RECOMMEND REPAIR.

INSTALL - 1-108" TRENCH INLET 3' BOTTOM 8" 5' STONE

RUN TRENCH THROUGH HOLE #1 S. A.W.

PLANS APPROVED BY C. Williams DATE 2/22/89

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 TRENCHES ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCHES

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

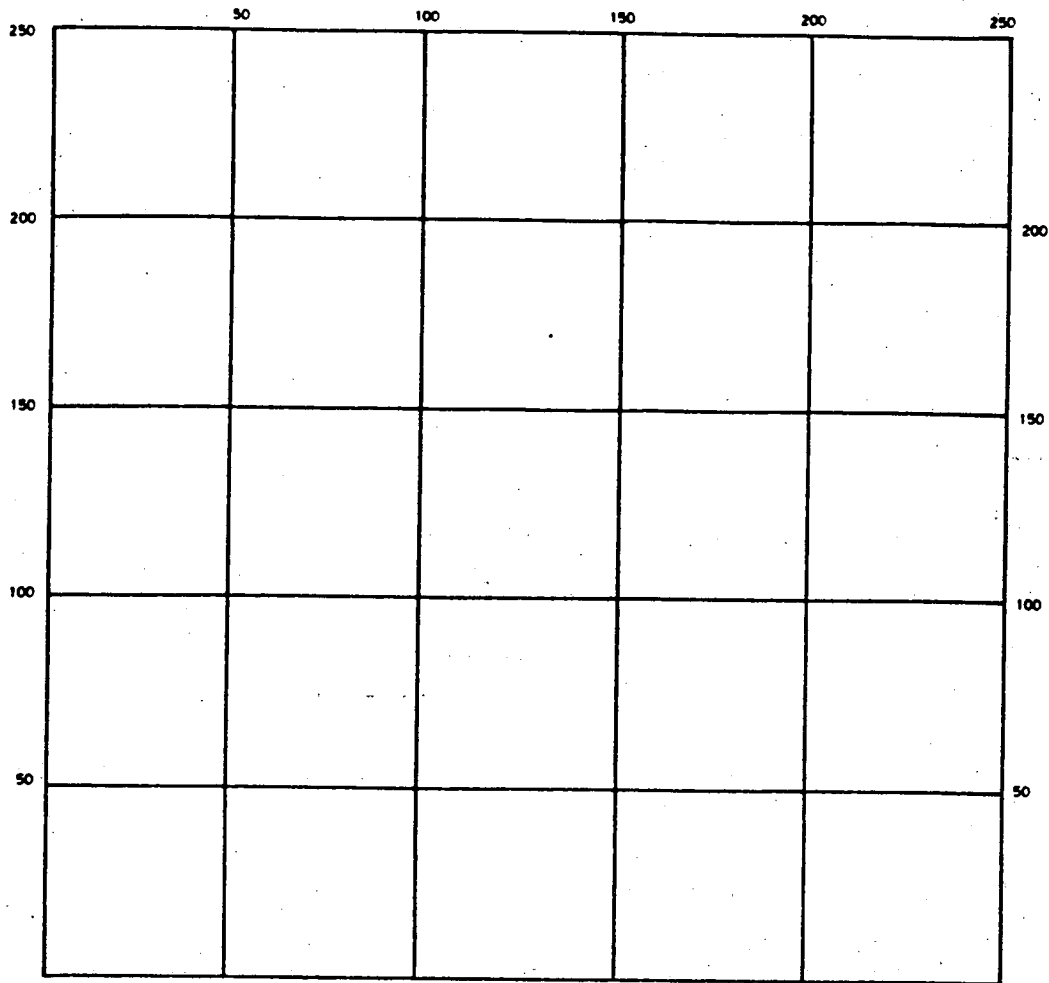
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

W 43624



SEPTIC TANK. LEVEL _____ CLEANOUTS _____

DISTRIBUTION BOX. LEVEL _____

DRAIN FIELD/TILE FIELD. DEPTH _____ FT. TRENCH WIDTH _____ FT. INLET DEPTH _____ FT.

EFFECTIVE GRAVEL DEPTH _____ FT. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ ONE SIDEWALL/BOTTOM AREA _____ SQ. FT.

DRYWELL INSIDE DIAMETER _____ FT. EFFECTIVE DEPTH BELOW INLET _____ FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS _____

DATE SYSTEM APPROVED _____ INSPECTOR _____

APPLICATION

PERCOLATION TESTING

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

DISTRICT

DATE

A Repair

P _____

12K

2-23-89

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 PERCRAFT, Raymond

ADDRESS _____ PHONE _____

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. _____

ROAD AND DESCRIPTION 3185 Florence Rd

TAX MAP _____ PARCEL # _____

SIZE OF LOT _____ TYPE BLDG. _____
(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 _____

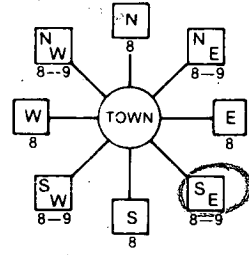
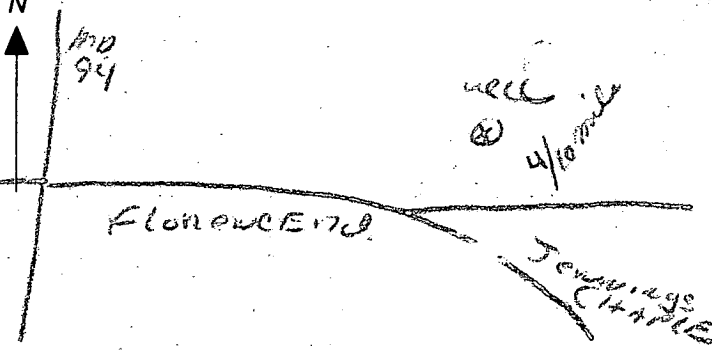
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

HD-216

THIS IS NOT A PERMIT

C1 2250		SEQUENCE NO. (DENV USE ONLY)		STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE				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)								COUNTY NUMBER W-43624					
DATE Received 		DATE WELL COMPLETED 0 7 0 3 8 9		Depth of Well 22 1 6 5 26 (TO NEAREST FOOT)		OK MR 1/9/91				PERMIT NO. FROM "PERMIT TO DRILL WELL" 4 0 - 8 8 - 0 4 2 1			
OWNER REARAT RAYMOND last name REARAT first name RAYMOND				TOWN FLORENCE									
STREET OR RFD				SECTION				LOT					
SUBDIVISION													
WELL LOG Not required for driven wells				GROUTING RECORD									
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING				WELL HAS BEEN GROUTED (Circle Appropriate Box) Y N									
				TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE CLAY BC									
				NO. OF BAGS 9 NO. OF POUNDS 900									
				GALLONS OF WATER 54									
				DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 4 0 + ft. 48 TOP 52 54 BOTTOM 58 (enter 0 if from surface)									
DESCRIPTION (Use additional sheets if needed) Top Soil 0 2 Brown Shale 2 50 ✓ Brown Sand 50 55 Blue Sand 55 80 Brown Sand 80 85 ✓ Blue Sand 85 165				CASING RECORD									
				casing types insert appropriate code below ST CO STEEL CONCRETE PL OT PLASTIC OTHER									
				MAIN CASING TYPE PL LC LC LC									
				Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 60									
				OTHER CASING (if used) diameter inch depth (feet) from to									
SCREEN RECORD				screen type or open hole insert appropriate code below ST BR HO STEEL BRASS OPEN HOLE PL OT PLASTIC OTHER									
				C2 DEPTH (nearest ft.) 1 8 0 5 8 23 38									
				SLOT SIZE 1 2 3									
				DIAMETER OF SCREEN (NEAREST INCH) 56 60									
				GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68									
DRILLERS IDENT. NO. 273 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)				OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) WQ 70 72 74 75 76 TELESCOPE CASING LOG INDICATOR OTHER DATA									
				PUMPING TEST									
				HOURS PUMPED (nearest hour) 3									
				PUMPING RATE (gal. per min. to nearest gal.) 8									
				METHOD USED TO MEASURE PUMPING RATE Bucket									
CIRCLE APPROPRIATE LETTER A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED E ELECTRIC LOG OBTAINED P TEST WELL CONVERTED TO PRODUCTION 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.				WATER LEVEL (distance from land surface) BEFORE PUMPING 5 0 WHEN PUMPING 1 6 5									
				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 NO IF 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.)									
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) House Well 300				CASING HEIGHT (circle appropriate box and enter casing height) + above - below LAND SURFACE 2 (nearest foot) 50 51									

B 1	7917	SEQUENCE NO. (DP USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER. 40-88-0421 fill in this form completely
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)				
Date Received (APA) <u>7/3/89 9:30</u> 022287		OWNER INFORMATION BECKAFT RAYMOND 34 3185 FLORENCE ROAD 55 WOODBINE MD 21797 76		
DRILLER INFORMATION Driller's Name <u>Ralph Mayne</u> Firm Name <u>Ralph Mayne Well Drilling</u> Address <u>9120 Brown Church Rd. Mt Airy</u> Signature <u>Ralph Mayne</u> Date <u>1/16/88</u>		LOCATION OF WELL 8 COUNTY <u>AR0</u> 23 SUBDIVISION <u>FLORENCE</u> SECTION <u>44</u> LOT <u>22</u> 52 NEAREST TOWN <u>FLORENCE</u> MILES FROM TOWN (enter 0 if in town) <u>1</u> M <u>1</u>		
WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) <u>5</u> AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <u>500</u> USE FOR WATER (CIRCLE APPROPRIATE BOX) ☒ HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) ☐ FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) ☐ INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) ☐ PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) ☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  NEAR WHAT ROAD <u>FLORENCE RD.</u> ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  DISTANCE FROM ROAD <u>600</u> ENTER FT or MI <u>K</u>		
APPROXIMATE DEPTH OF WELL <u>150</u> FEET APPROXIMATE DIAMETER OF WELL <u>6"</u> INCH METHOD OF DRILLING (circle one) BORED (or Augered) <u>AIR-ROTARY</u> JETTED <u>JETTED & DRIVEN</u> AIR-PERCussion ROTARY (Hydraulic Rotary) CABLE REVERSE-ROTARY DRIVE-POINT other _____		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL COUNTY NAME <u>HOWARD</u> COUNTY NO. <u>W-43624</u> STATE SIGNATURE _____ DATE ISSUED <u>022389</u> CO SIGNATURE <u>Sidney Alon</u> EXP. DATE <u>08-22-89</u> NORTH GRID <u>533000</u> EAST GRID <u>0773000</u>		
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 ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY ☐ THIS WELL WILL DEEPEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) _____		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. <u>well</u> 2. _____ 3. _____ WRITE THE BOX NUMBER FROM THE MAP HERE E 7703 N 5307		
Not to be filled in by driller (OEP USE ONLY) APPROP. PERMIT NUMBER _____ GAP _____ FORCE <u>SA</u> WRITE INITIALS IN BOX PERMIT NO. <u>40-88-0421</u> SPECIAL CONDITIONS		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 WELL SITE INSPECTION

OWNER RAYMOND BECRAFT

DATE REQUESTED 2/23/89

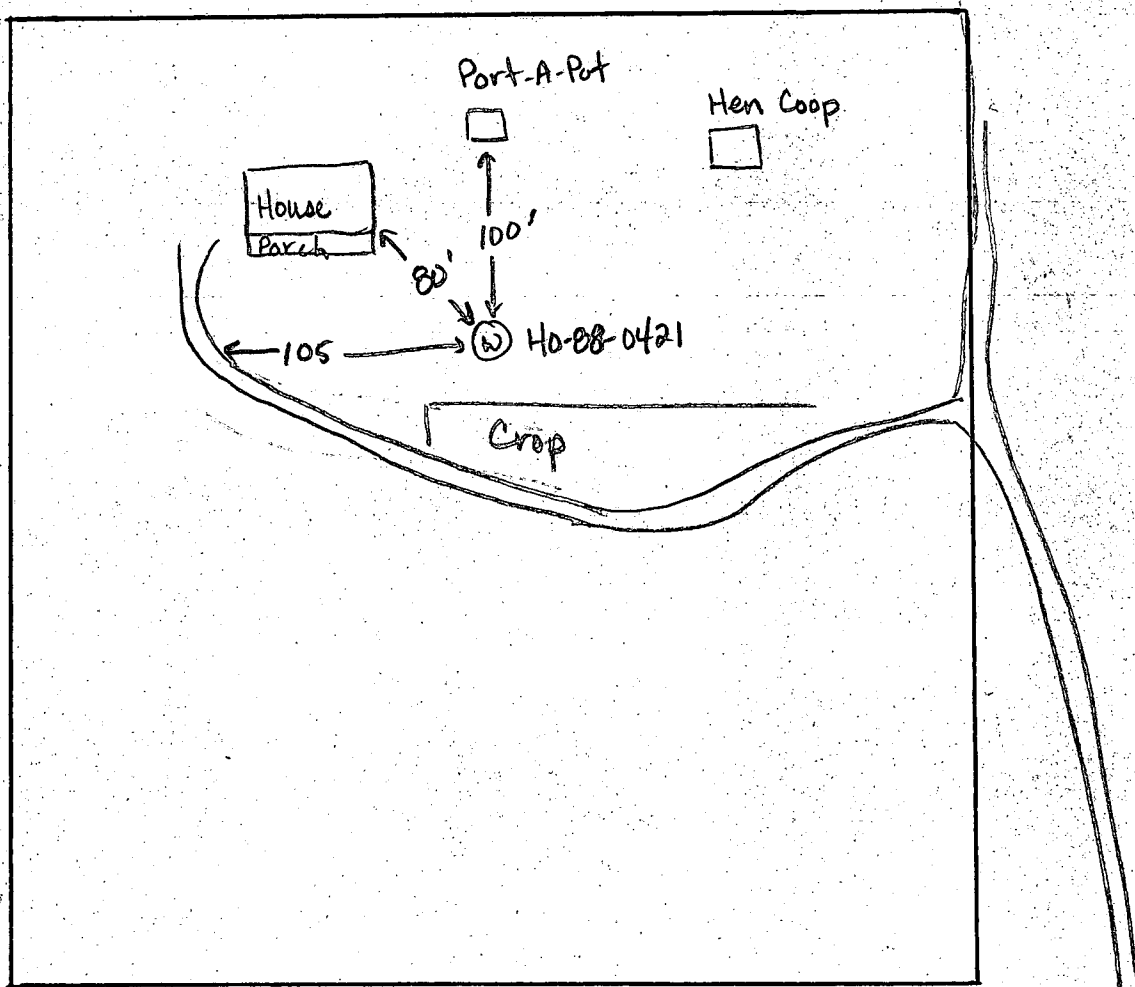
ADDRESS 3185 FLORENCE RD

DRILLER _____

WELL TAG# HO-88-0421

COUNTY# _____

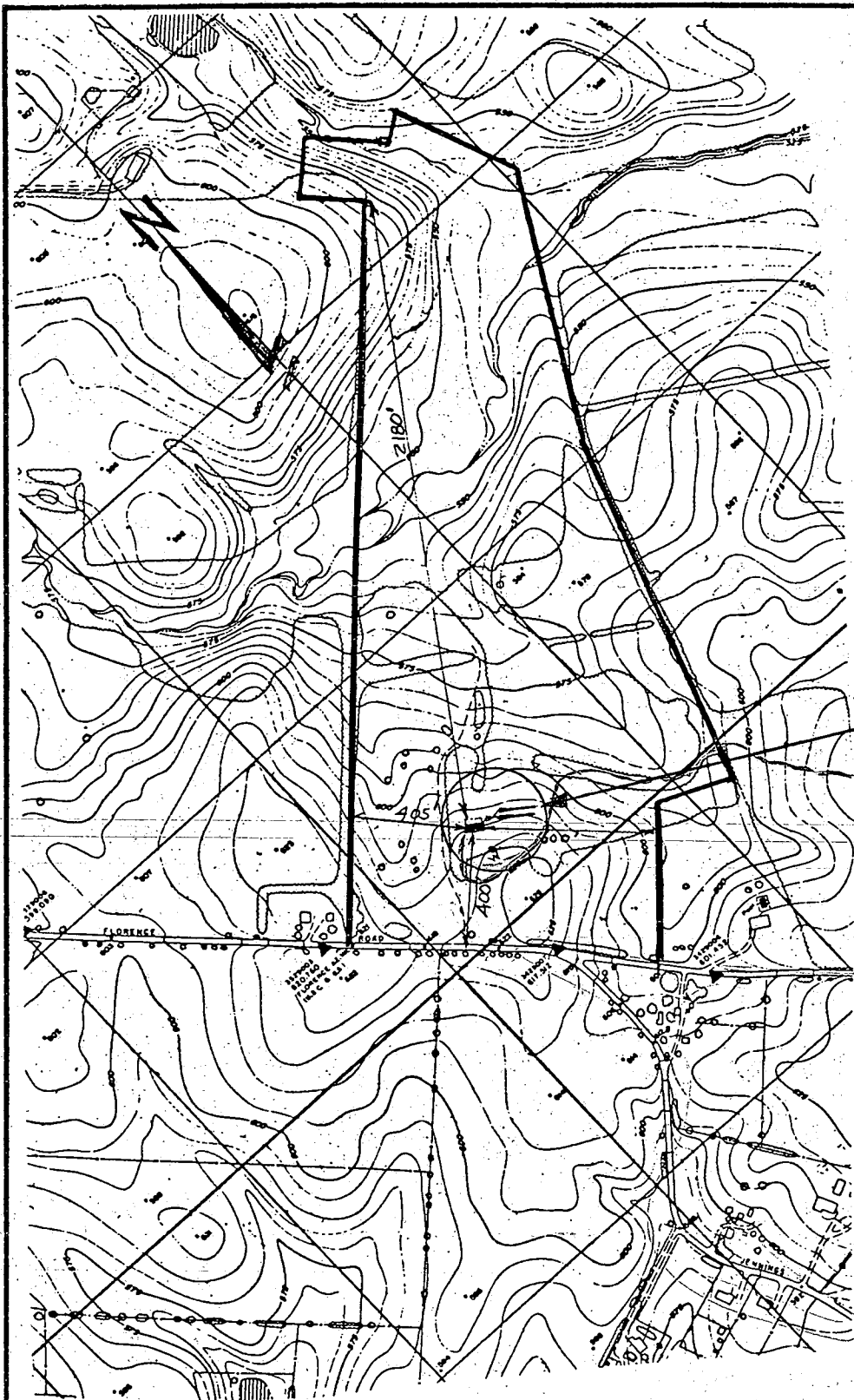
LOCATION DIAGRAM



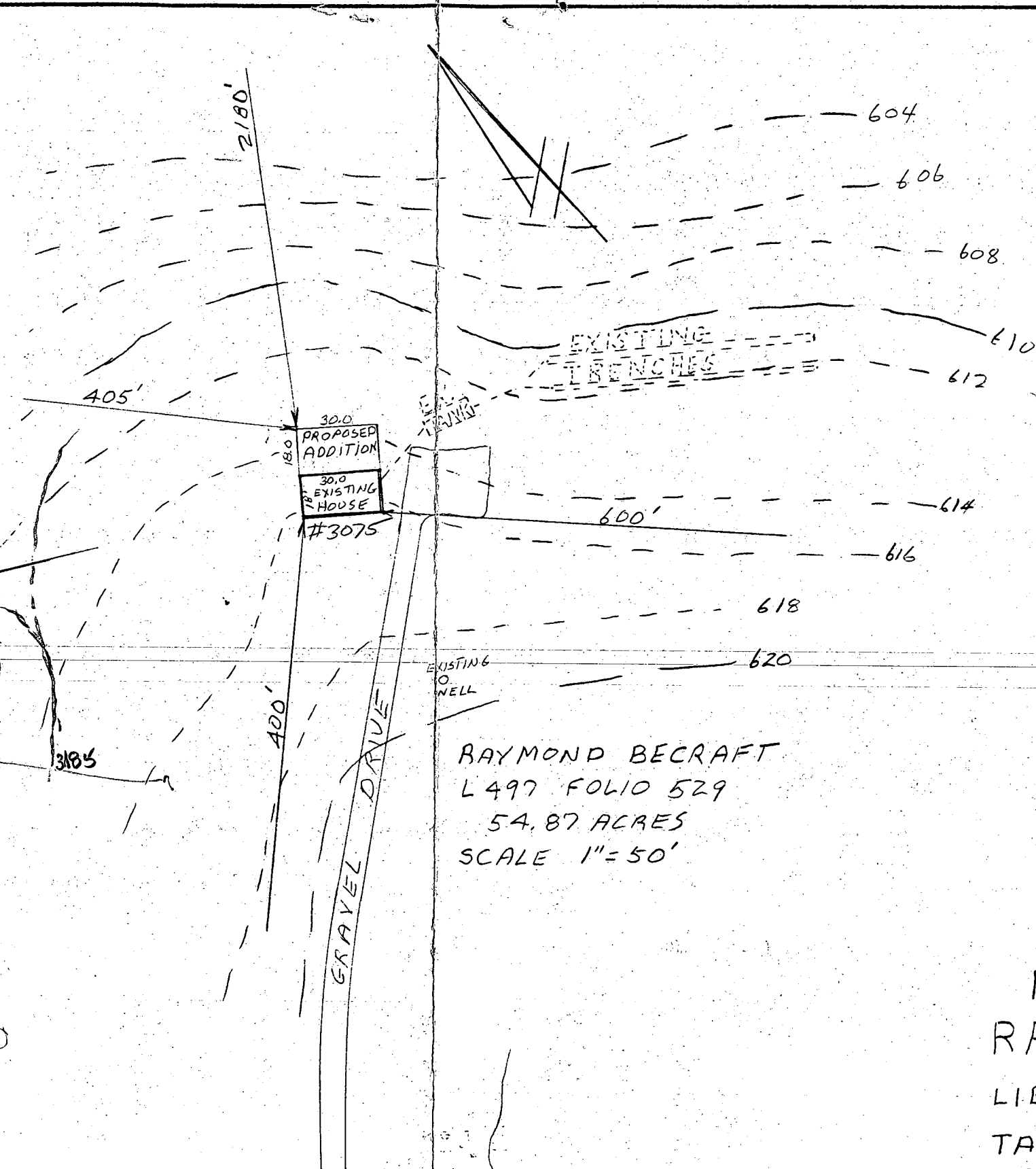
COMMENTS:

Florence Road

At Jennings Chapel Rd

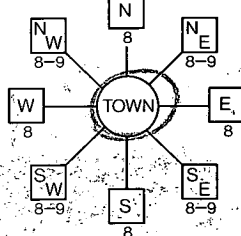
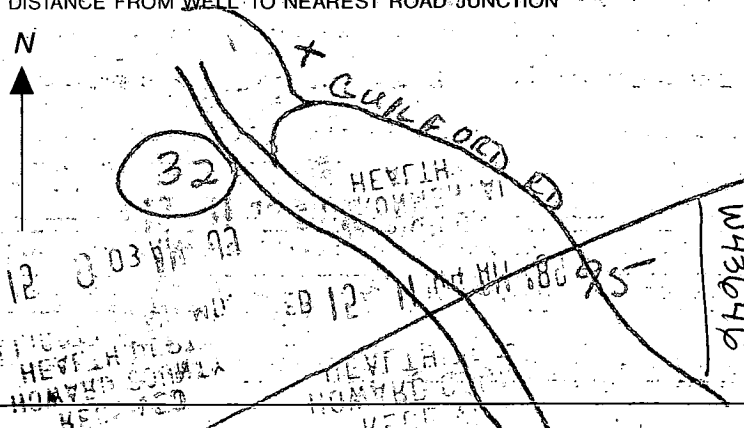


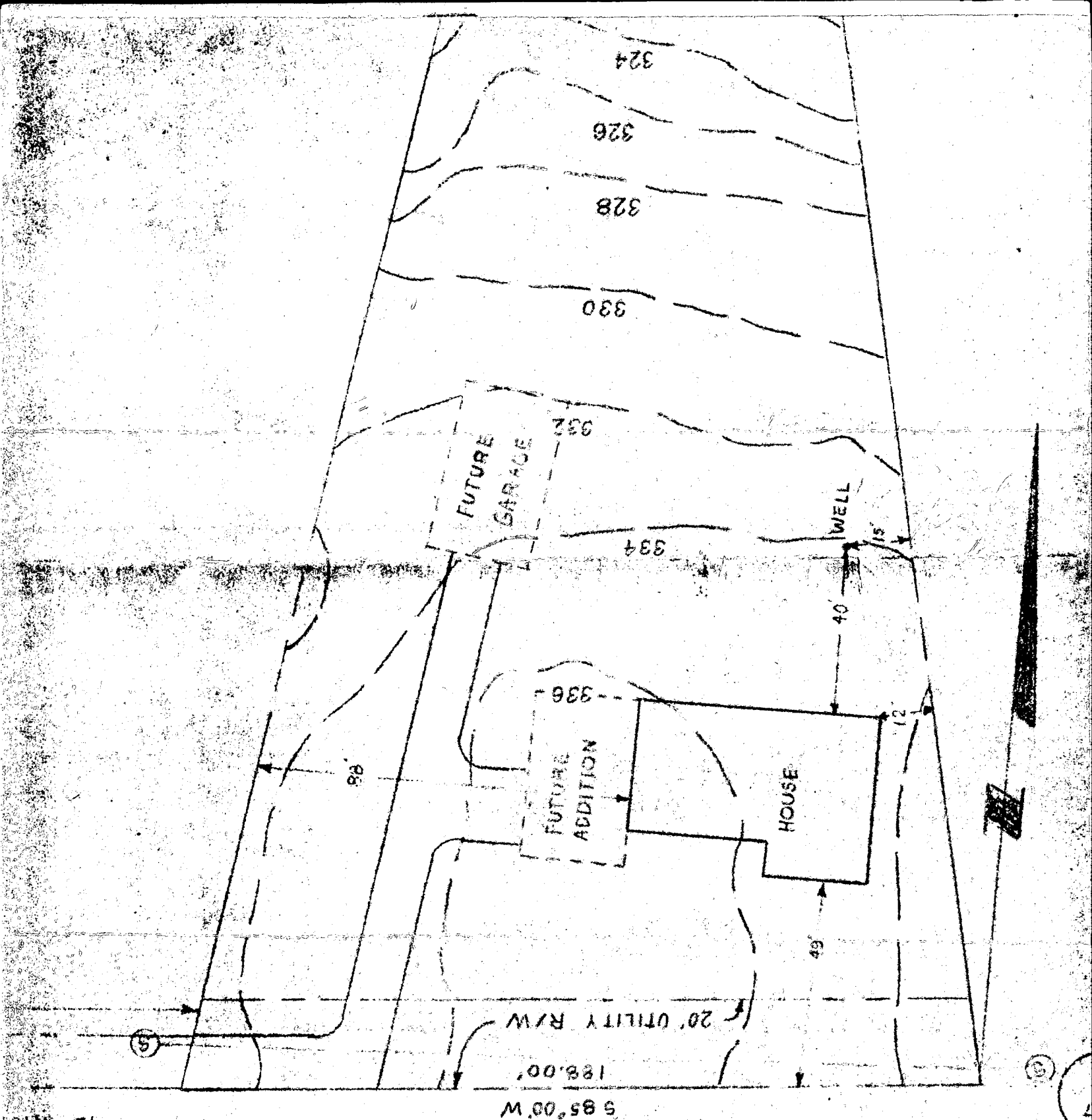
SCALE 1" = 600'



RAYMOND BECRAFT
L 497 FOLIO 529
54.87 ACRES
SCALE 1" = 50'

PLOT PLAN
PROPERTY OF
RAYMOND BECRAFT
LIBER 497 FOLIO 529
TAX MAP 13 PARCEL 22
4TH ELECTION DISTRICT
HOWARD COUNTY MD
SCALE AS SHOWN
DATE 9-6-88

B 1 123 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)	SEQUENCE NO. (DP USE ONLY) 021589	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER H0-88-0501 fill in this form completely
Date Received (APA) 021589		LOCATION OF WELL	
OWNER INFORMATION WENDLING JAMES 15 Last Name 13 Owner First Name 34 7525 MURRAY HILL RD 36 Street or RFD 55 COLUMBIA MD 21040 57 Town 70 State 72 Zip 76		B 3 HOWARD 8 COUNTY 21 23 SUBDIVISION SECTION 44 46 LOT 48 50 GUILFORD 52 NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) 0 MI 73 76 77 78	
DRILLER INFORMATION George F. Easterday Driller's Name L. Franklin Easterday, Inc. 77 License No. 80 9205 Brown Church Rd., Mt. Airy, Md. 21771 Address George F. Easterday 2/9/89 Signature Date		B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  11 9359 GUILFORD RD 30 NEAR WHAT ROAD ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH ☒ N ☐ E ☐ S ☐ W WEST EAST SOUTH 34 2000 37 DISTANCE FROM ROAD ENTER FT or MI FT 38 39	
B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 5 8 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500 14 20		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL Howard 1243646 COUNTY NAME COUNTY NO. STATE SIGNATURE DATE ISSUED INSERT S 41 032189 Mark E. Rifkin 9/11/89 43 48 CO SIGNATURE EXP. DATE NORTH GRID 486000 EAST GRID 0846000 50 55 57 63	
USE FOR WATER (CIRCLE APPROPRIATE BOX) ☒ HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) ☐ FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) ☐ INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) ☐ PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) ☐ 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 N 846 E 486 000 000 TAG OK 4/20/89	
APPROXIMATE DEPTH OF WELL 200 FEET 24 28 APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST INCH		METHOD OF DRILLING (circle one) BORED (or Augered) <u>JETTED</u> Jetted & <u>DRIVEN</u> 30 <u>AIR-ROTARY</u> AIR-PERCussion ROTARY (Hydraulic Rotary) 37 <u>CABLE</u> 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 ☐ THIS WELL WILL DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
Not to be filled in by driller (OEP USE ONLY)			
APPROP. PERMIT NUMBER GAP 54 63 FORCE MR WRITE INITIALS IN BOX PERMIT No. H0-88-0501 67 68 70 71 72 73 74 75 76 77 78 79			
SPECIAL CONDITIONS			



8376-A

3rd FORT

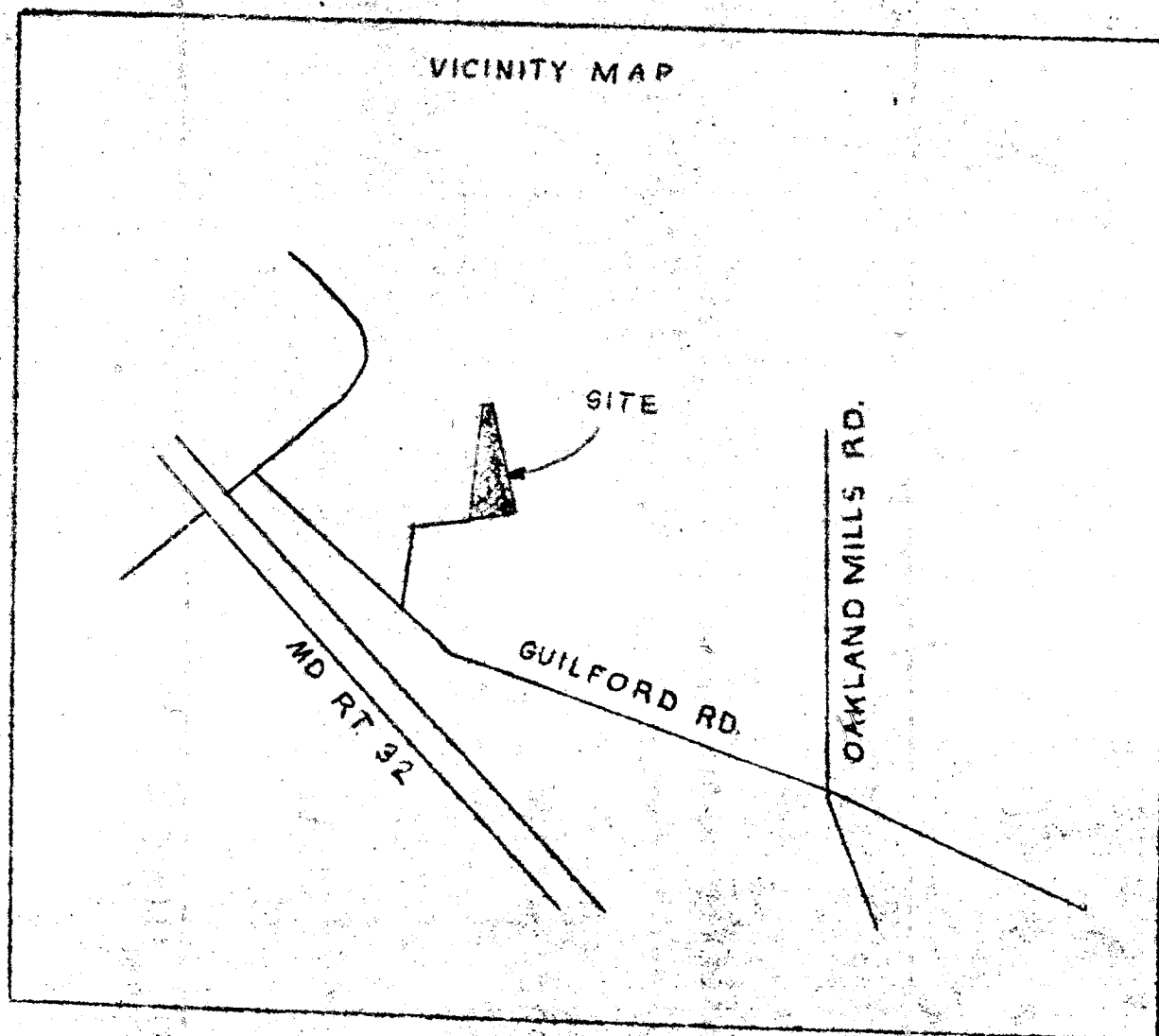
TO SHORELAND SOUTH

LEFT AS CALLED THEN TURN RIGHT
UNDER ROAD TO THE RIGHT

THEN 2nd CORNER ON LEFT

GO TO 2nd RD.

VICINITY MAP



C1 2258	SEQUENCE NO. (DENV USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE	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)		COUNTY NUMBER W 43646	PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-88-0501
DATE Received 8 13	DATE WELL COMPLETED 15 20 04 24 87	Depth of Well 22 340 26 (TO NEAREST FOOT)	

OWNER Wendling James	last name	first name
STREET OR RFD 9357 Guilford Rd		TOWN Guilford
SUBDIVISION	SECTION	LOT

WELL LOG Not required for driven wells		
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING		
DESCRIPTION (Use additional sheets if needed)	FEET FROM TO	Check if water bearing
Top soil	0	2
Br. Sandstone	2	5
Lt. Br. Sandstone	5	8
tan Sandstone	8	80
Flint	80	85
Gray Sandstone	85	220
Flint	220	225
Gray Sandstone	225	310

GROUTING RECORD	
WELL HAS BEEN GROUTED (Circle Appropriate Box)	
TYPE OF GROUTING MATERIAL	
CEMENT CM	BENTONITE CLAY BC
NO. OF BAGS 8	NO. OF POUNDS 800
GALLONS OF WATER 40	
DEPTH OF GROUT SEAL (to nearest foot)	
from 0 ft.	to 19 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	Total depth
top (main) casing	of main casing
(nearest inch)	(nearest foot)
ST	6
63	25
60	66
61	70

OTHER CASING (if used)	
diameter	depth (feet)
inch	from to
6	25
63	66
60	70

SCREEN RECORD		
screen type or open hole		
insert appropriate code below		
ST	BR	HO
STEEL	BRASS	OPEN HOLE
PL	OT	
PLASTIC	OTHER	

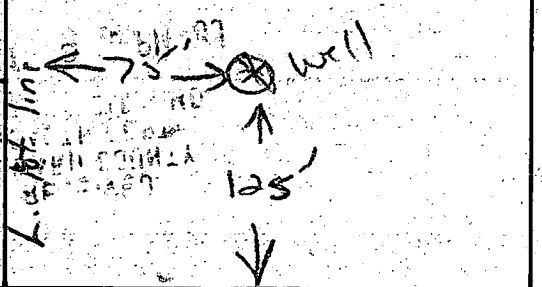
C2	
DEPTH (nearest ft.)	
40	340
8	11
9	15
23	26
24	30
38	41
39	45
47	51
SLOT SIZE 1 2 3	
DIAMETER OF SCREEN (NEAREST INCH)	
56	60
from to	

GRAVEL PACK	
IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68	
68	

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)		
T	(E.R.O.S.)	WQ
70	72	74 75 76
TELESCOPE CASING	LOG INDICATOR	OTHER DATA

C3		
PUMPING TEST		
HOURS PUMPED (nearest hour) 3		
PUMPING RATE (gal. per min. to nearest gal.) 5		
METHOD USED TO MEASURE PUMPING RATE Point		
WATER LEVEL (distance from land surface)		
BEFORE PUMPING 47		
WHEN PUMPING 200		
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 NO	
IF 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: 29	
CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 35	
PUMP HORSE POWER 37 41	
PUMP COLUMN LENGTH (nearest ft.) 43 47	
CASING HEIGHT (circle appropriate box and enter casing height)	
+ above	LAND SURFACE (nearest foot) 1
- below	50 51

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 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.	
DRILLERS IDENT. NO. 46	
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) Wendling James	
SITE SUPERVISOR (sign of driller or journeyman responsible for sitework if different from permittee)	

COUNTY

Front

See pg. 20
directions

HD-224

7-14-89
Before 2 PM

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

BUILDING PERMIT # 25440

New Installation ☒
Replacement ☐

Receipt # 44509
Date 6-13-89

Name of Installer WOOD & WILLOUGHBY PLUMBING SERVICE Telephone 381-4823

License Number MD 7040

Certified Well Pump Installer ☐ Well Driller ☐ Registered Plumber ☒

Name of Property Owner JAMES WENDLING

Telephone 604-3059

Subdivision GUILFORD AREA

Lot #

Well Tag # HO-88-0501

Site Address 5229 GUILFORD RD COLUMBIA

9359

Pump

1. Type

- a. Deep well jet ☐
b. Shallow well jet ☐
c. Submersible ☒

2. Make GOULDS

3. Model # SE05412

4. Capacity 5 GPM

5. Pump exceeds well capacity Yes ☐ No ☒

6. If Yes, is low pressure cutoff switch installed? Yes ☐ No ☒

7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors ☒ Cable guards ☒ Other TIES

Motor

1. Horsepower 1/2

2. RPM 1750

3. Voltage

a. 110 ☐

b. 220 ☒

Pitless Adapter

1. Make GOULDS

2. Model # PITLESS

3. Depth 4' COVER

Tank

1. Capacity 31.8

2. Pressure relief valve? 75 PSI

Piping

1. Type POLYBUTYLENE

2. Size 1"

3. NSF and/or BOCA Code approved YES

4. Depth of supply line 4' COVER

Well data

1. Depth 200 ft.

2. Yield 5 GPM

3. Static water level 60' ft.

4. Will water supply be disinfected by installer? NO

7/14/89 Pitless AT 5.6" well line same. NO INSIDE WORK COMPLETE. SEA

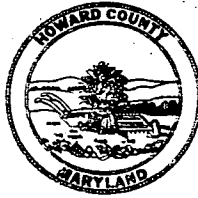
I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

Signature of Applicant: Roy A Wood

Date: 6-13-89

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



Department of Public Works
BUREAU OF ENGINEERING

William E. Riley, Bureau Chief

February 26, 1988

Mr. James Wendling
7521 Murray Hill Road, Apt. 618
Columbia, MD 21046

Subject: Request for Routine Water Extension
Guilford Road

Dear Mr. Wendling:

Your February 17, 1988 letter was forwarded to this office for review. The drawings for the existing sewer and the documents granting the existing easement to the County have been checked; and it has been determined that you cannot currently qualify for a routine extension.

The existing utility easement is 20-feet wide and the sewer main runs along the center of the easement. Since State health regulations require that we maintain ten feet of clearance between a water main and a sewer main, it is physically impossible to fit a water main into the easement as it currently exists.

There are two options available for providing service to your property. The first is to widen the existing easement to a total width of 30-feet (see attached sheet). If the additional area can be granted at no cost to the County, then we can reconsider your request for a routine extension. However, you will have to bear the cost of having a plat and description for the easement prepared and recorded. In addition, even if the easement is granted, one more requirement must be met before the project can be presented for the approval of the Public Works Board. This is that at least half of the property owners who will be required to pay front foot benefit charges as a result of construction of the water main must concur with the project. There appear to be four affected properties (marked by green X's on the attached sheet), so at least one of your neighbors must agree to the project.

In the event that you cannot meet the requirements for a routine extension, there is a second option which is available to you. This is to petition for service through a Capital Project. Each Fall (usually in September) the County publishes an advertisement in local newspapers requesting petitions for new Capital Projects. Should your request be chosen for inclusion in the Capital Budget, funds will become available and work will begin on July 1 of the following year. Therefore, if you submit your request next fall, the project will commence on July 1, 1989.

Elizabeth Bobo, County Executive
James M. Irvin, Director of Public Works

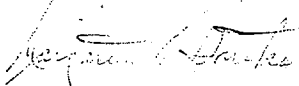
Mr. James Wendling
Subject: Routine Extension
Guilford Road

February 26, 1988
Page 2

Whether the line is designed and built as a routine extension or as a Capital Project, the duration of the project will be approximately one year. If it is built as a routine extension, the project will commence upon approval by the Public Works Board which meets monthly.

If you have any questions concerning these options, please feel free to call me at (301)992-2070.

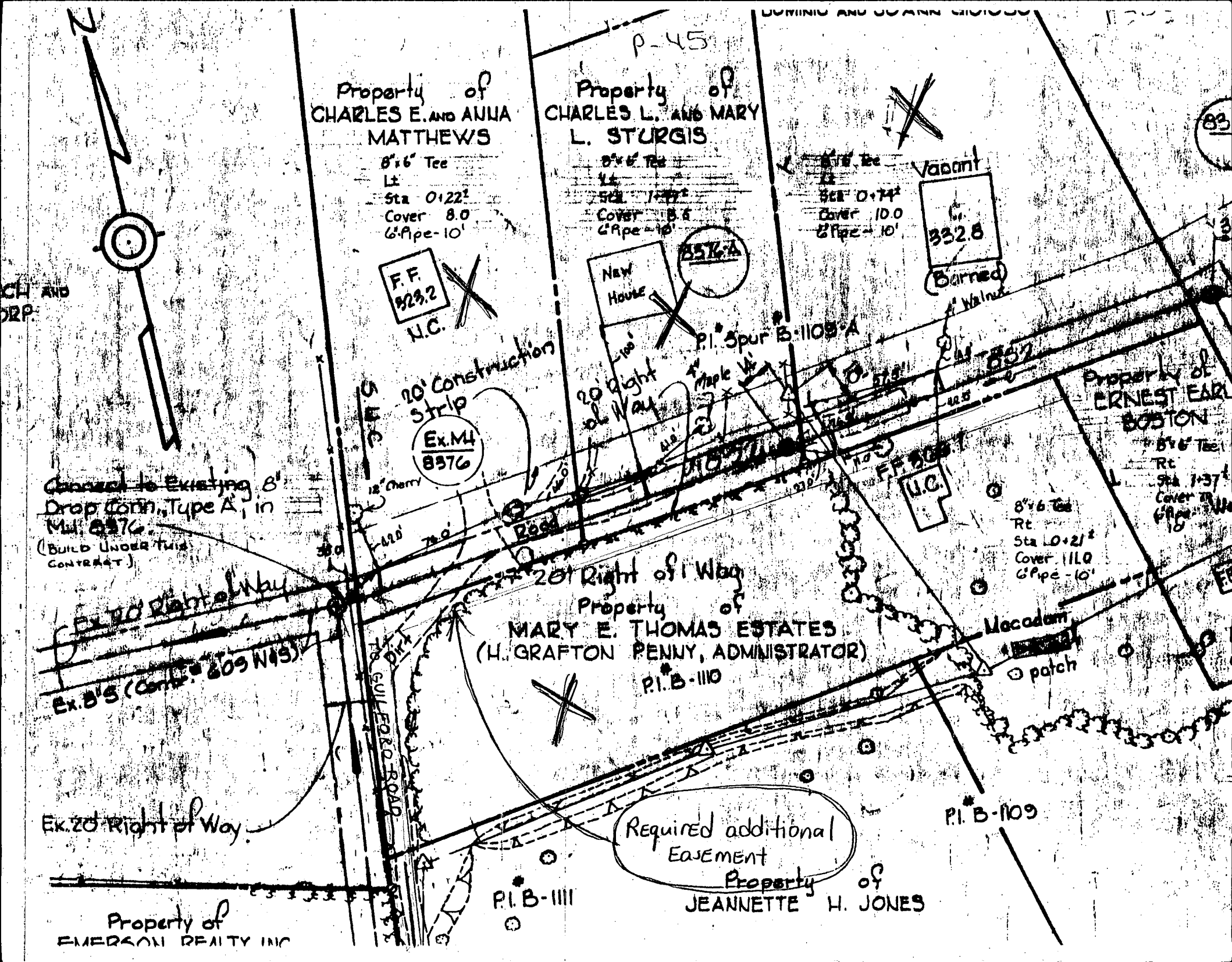
Very truly yours,


Margaret K. Hartka
Utility Design Division
Bureau of Engineering

MKH/nk

Attachment

cc: Ronald G. Lepson



Property of
CHARLES E. AND ANNA
MATTHEWS

8" x 6" Tee
Lt
Sta 0+22.2
Cover 8.0
6" Pipe - 10'

F.F.
929.2
N.C.

Property of
CHARLES L. AND MARY
L. STURGIS

8" x 6" Tee
Lt
Sta 1+37.2
Cover 8.8
6" Pipe - 10'

New House

35% A

8" x 6" Tee
Lt
Sta 0+74.2
Cover 10.0
6" Pipe - 10'

Voidant
332.8
(Barred)

Property of
ERNEST EARL
BOSTON

8" x 6" Tee
Rt
Sta 1+37.2
Cover 8.8
6" Pipe - 10'

Property of
MARY E. THOMAS ESTATES
(H. GRAFTON PENNY, ADMINISTRATOR)
P.I. B-110

8" x 6" Tee
Rt
Sta 10+21.2
Cover 11.0
6" Pipe - 10'

Macadam
patch

Required additional
EASEMENT

Property of
JEANNETTE H. JONES

P.I. B-1111

P.I. B-1109

Property of
EMERSON REALTY INC

Change to Existing 8"
Drop Corn, Type A, in
M.I. 8976
(BUILD UNDER THIS
CONTRACT)

Ex. 20' Right of Way
Ex. B'S (Cont. 209 N49)

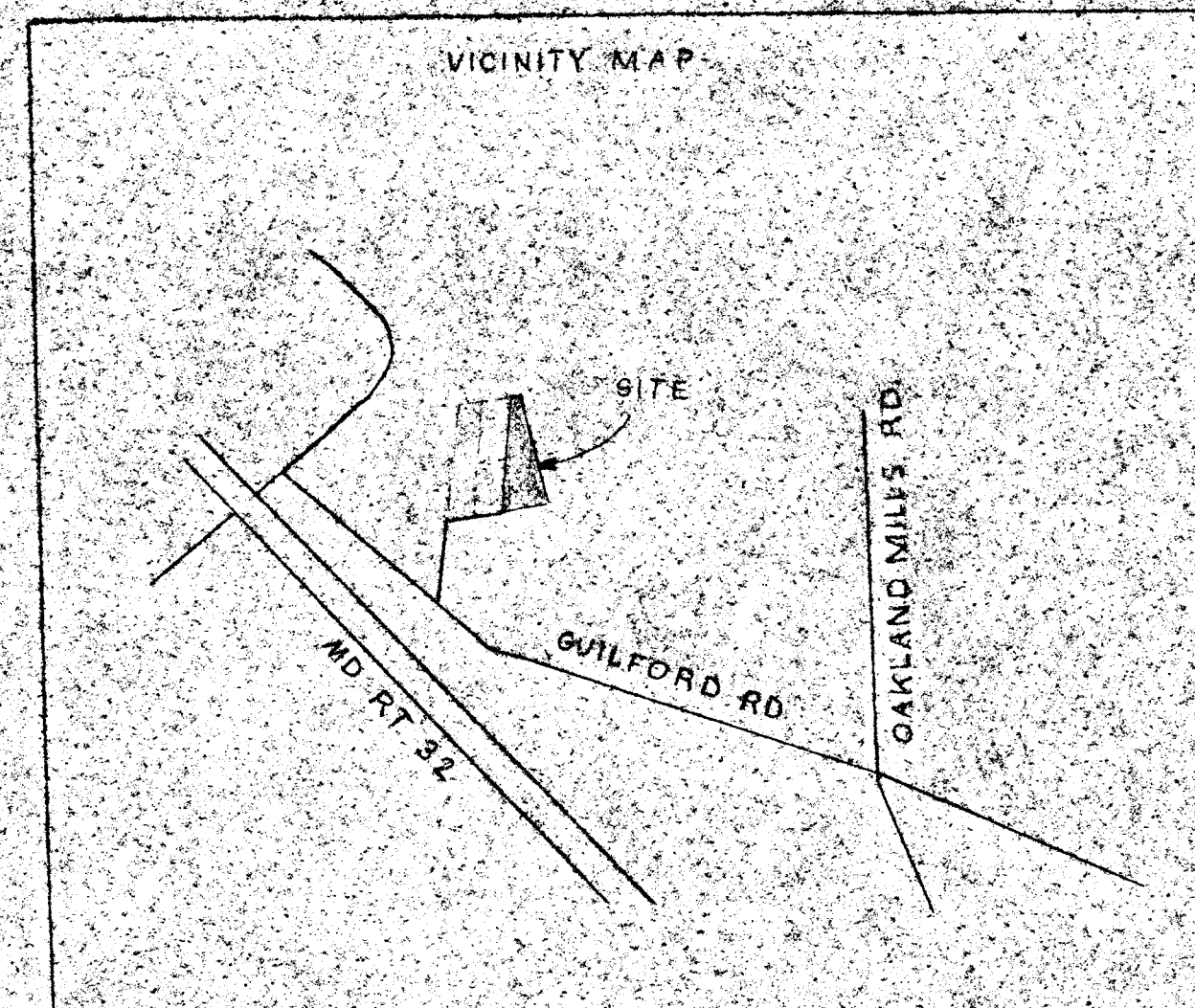
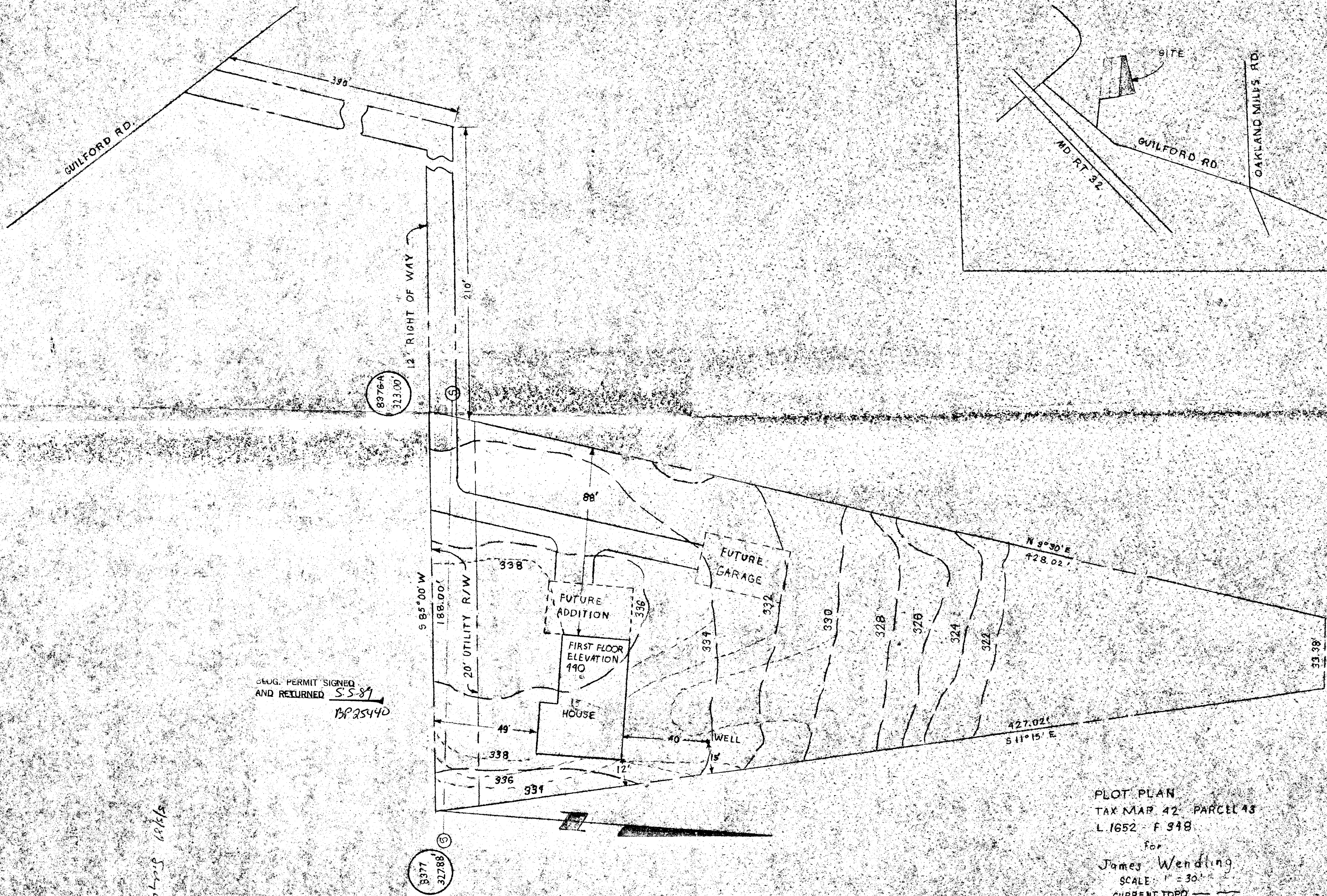
Ex. 20' Right of Way

20' Construction
Strip
Ex. M4
8976

20' Right
of Way

20' Right of Way

F.F. 808.7
U.C.



GEOD. PERMIT SIGNED
AND RETURNED S.S. 87
BP 25440

PLOT PLAN
TAX MAP 42 PARCEL 43
L 1652 - F 948

For
James Wendling
SCALE: 1" = 30'
CURRENT TOPO ———
PROPOSED TOPO - - - -

5/18/87 S.S. 87

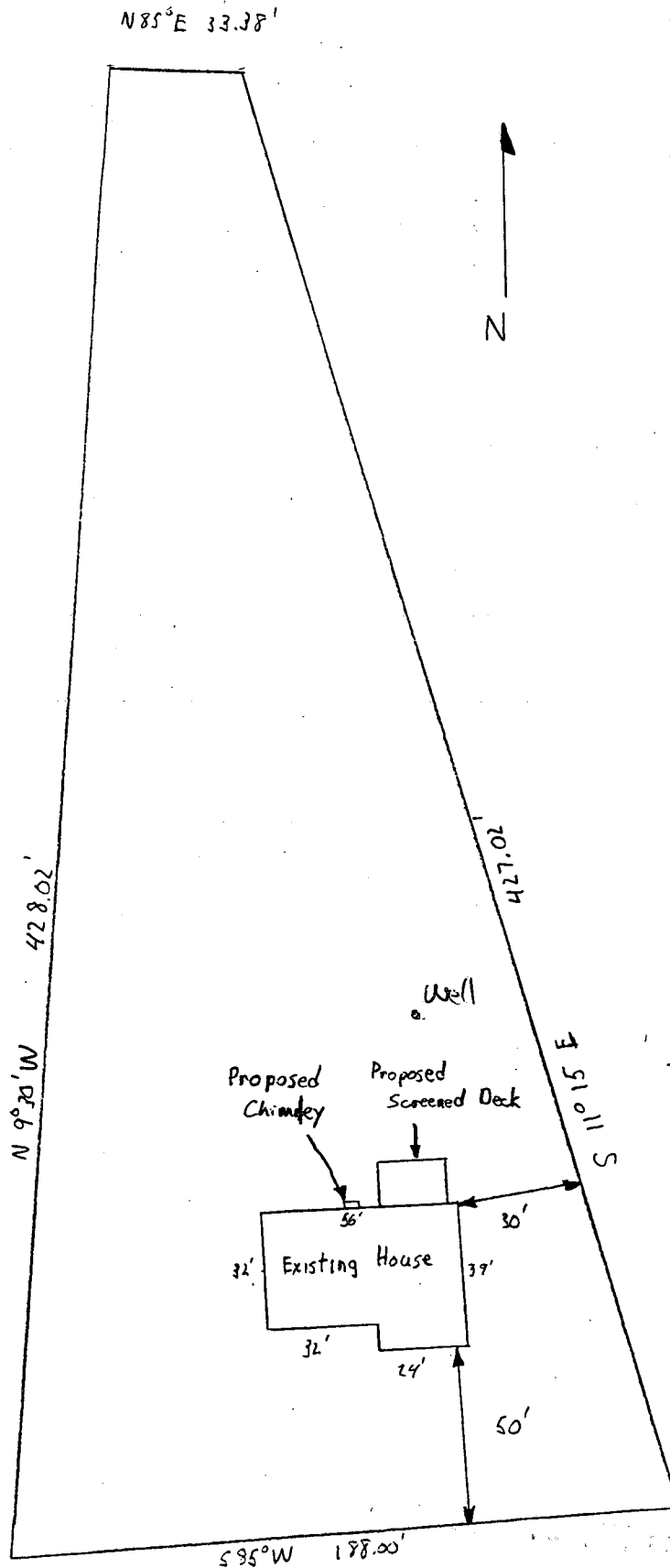
PLOT PLAN

for

9359 Guilford Rd

Columbia, MD 21046

Liber 872, Folio 405-6



BLDG. PERMIT SIGNED

AND RETURNED

9/11/91

Serial #39609 - deck

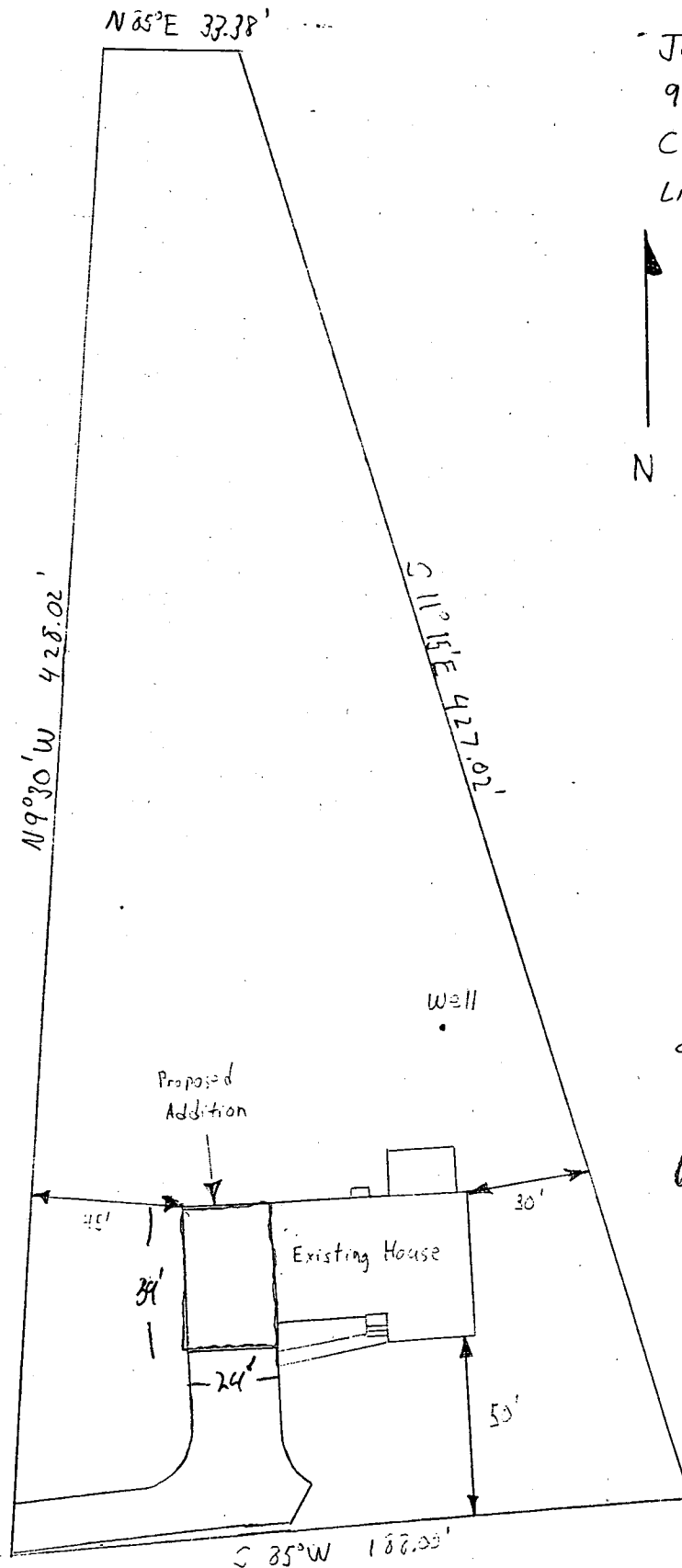
9/11/91
 PLANS ON
 FOR BLDG
 PERMIT
 39609
 RJA

SCALE: 1" = 50'

PLOT PLAN

for

James Wendling
9359 Guilford Rd.
Columbia, MD 21046
Liber 872, Folio 405-6



7/22/92
PLANS O.K.
TO SIGN
BP 45512
R/H

SCALE: 1" = 50'