

1/29/91 9:30
12:00
2/4/91
2/5/91
2/6/91
PLG INST. INSP. REQUB STD
BY CONTRACTOR
per C.W.
S.A.P.

File

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

04-345487

INDEXED

P 46753
A 36624
4th
DISTRICT
DATE 1/17/91
DATE SYSTEM APPROVED 2/6/91
INSPECTOR C.B.O.
+ DB-J.C.B.O.

Herbert Brown → abigita → 1/29/91

IS PERMITTED TO INSTALL ALTER

ADDRESS 11214 Angleberger Road, Thurmont, Maryland 21788 PHONE 898-3711

SUBDIVISION Drummond Property ROAD 2252 Daisy Road LOT 3

PROPERTY OWNER Lawrence E. Loveland

ADDRESS _____

~~IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 25%~~

~~GARBAGE GRINDER XXXXES XXXXXXXXXXXXXXXXXXXX~~

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 210 sq. ft. per bedroom. Trench to be 3 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 6 feet below original grade. Effective area begins at 4 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Place the distribution box 400 feet across the front (575.73') lot line and 120 feet off the same line as seen when facing the lot from Daisy Rd. Run trenches on contour toward right side of lot.

NOTE - No trench to exceed 100 feet in length. Provide a 6" - 8" diameter cleanout and cap to grade or septic tank. 8-6-90 JEN

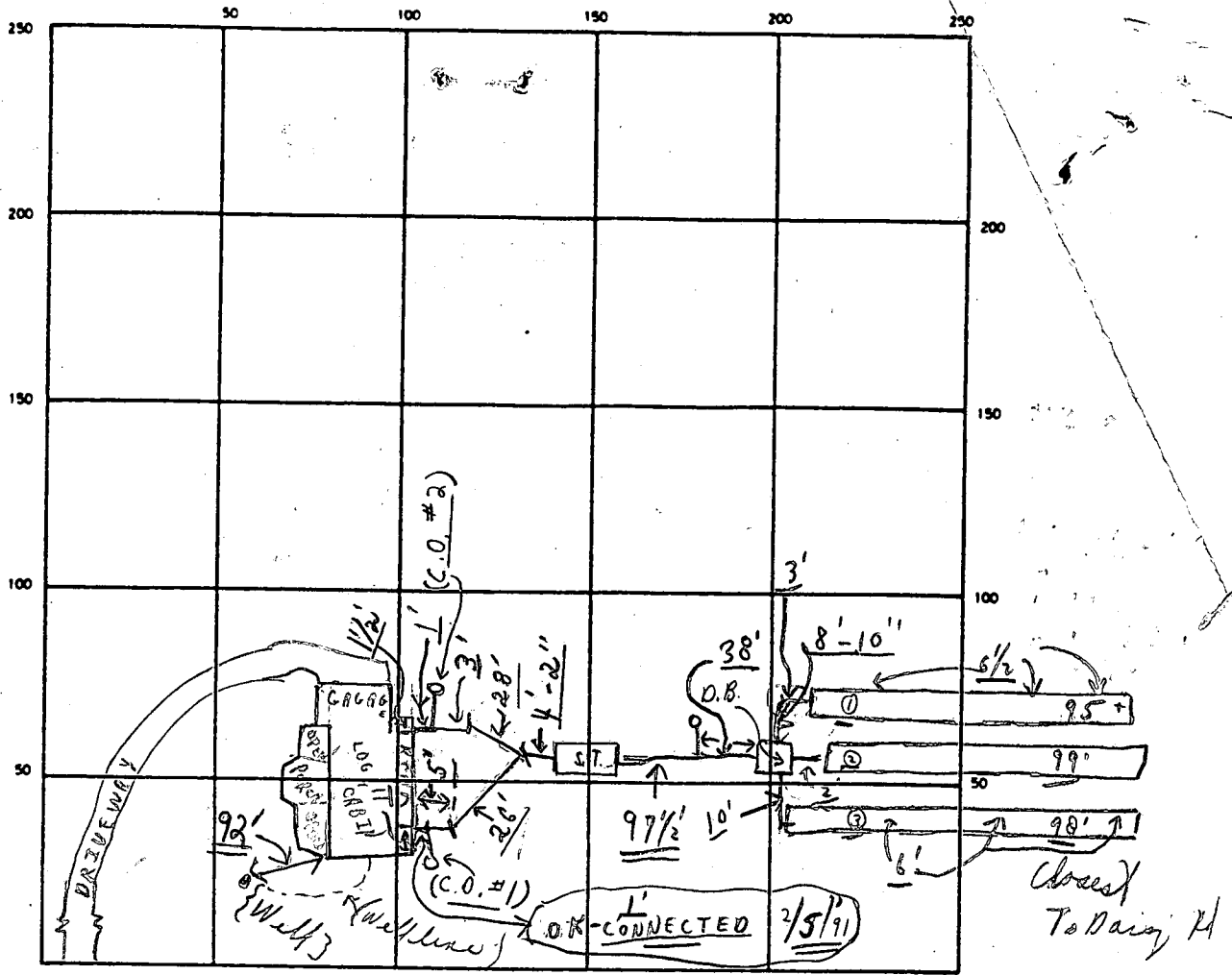
PLANS APPROVED BY Sid Abel cm DATE 06/14/88

- 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 APROVAL ON THIS PERMIT**

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

A 36624



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

DAISY ← _____ DAISY ROAD

SEPTIC TANK. LEVEL	OK	CLEANOUTS	S.T. OK 2/5/91	{O.K-CONNECTED} To houses # 1 C.O.	# 2 C.O.
DISTRIBUTION BOX. LEVEL	OK (Baffles is in)			OK	OK
DRAIN FIELD/TILE FIELD. DEPTH	6 ⁺ + ave	TRENCH WIDTH	3	INLET DEPTH	4
EFFECTIVE GRAVEL DEPTH	2 + average	TOTAL LENGTH	95' 99' 98'		292
NUMBER OF TRENCHES	3	ONE SIDEWALL/BOTTOM AREA	876 ⁺		SO. FT.
DRYWELL INSIDE DIAMETER		FT.		EFFECTIVE DEPTH BELOW INLET	
ABSORBENT AREA	876 ⁺			SO. FT.	

REMARKS 1/29/91 Partial, discussed septic installation with Mr. Brown + associates at site. Hold for a call on installation. 2/4/91 Mr. "C." said to check on this in P.M. 2/4/91 P.M. Partial → Tank + {pipe} in from tank to house - except one line → 1' ^{OK 2/5/91} missing - no house connection ok to cover 1' out from (2/4/91 W.P.I. - P.M. - no work.) house to tank, partial no trenches yet, 2/4/91; 2/5/91 A.M. → C.B.D. see next page

DATE SYSTEM APPROVED 2/6/91

INSPECTOR D.B. + Charles [unclear]

(Extra copy)
PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

DISTRICT

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

P _____

A 36624

4th

DATE _____

DATE SYSTEM APPROVED _____

INSPECTOR _____

IS PERMITTED TO INSTALL ALTER _____

ADDRESS _____ PHONE _____

SUBDIVISION Drummond Property ROAD 2252 Daisy Road LOT 3

PROPERTY OWNER Lawrence E. Loveland

ADDRESS _____

~~IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 25%~~

GARBAGE GRINDER? YES NO

280' detention needed

280' Lateral
$$\begin{array}{r} 280 \\ 3 \overline{) 840} \\ \underline{6} \\ 240 \end{array}$$

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4 *T/C 1/14/91 from Bldg*

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PLANS APPROVED BY Sid Abel cm DATE 06/14/88

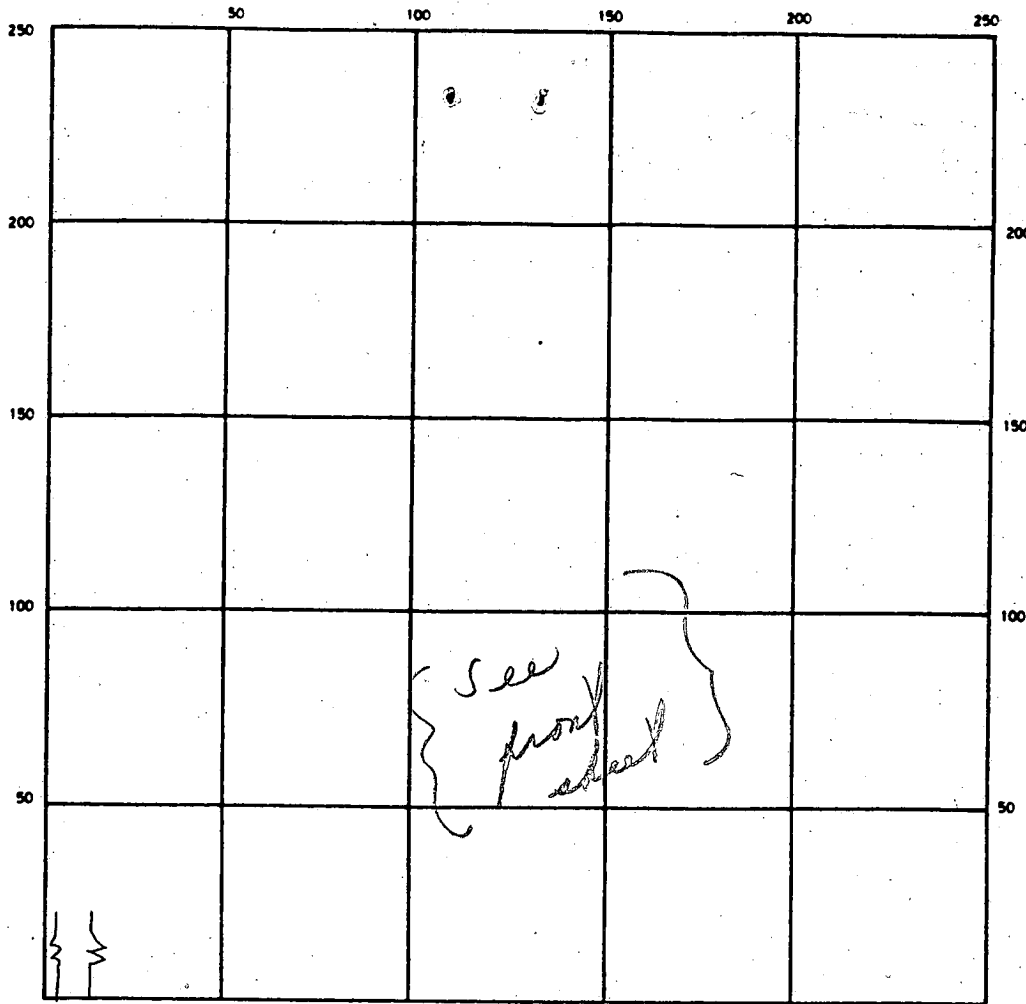
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*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

DAISY ROAD

SEPTIC TANK. LEVEL _____ CLEANOUTS _____

DISTRIBUTION BOX. LEVEL _____ (See page 1)

DRAIN FIELD/TILE FIELD. DEPTH _____ FT. TRENCH WIDTH 3 FT. INLET DEPTH 4 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 P.M. 2/5/91 checked #1 trench (1) was ready for

stone. ok to cover lines from tanks to Dist Box,

parted. C.B. ^{NOON} P.M. OK TO COVER FIRST TRENCH COMPLETELY

parted. 2/5/91 Late P.M. - 2nd trench, #2. ok to cover and

all except third trench at ends + middle, long pipes + depth

(2/5)-W.P.I. - A.M. NONE; 2/5 P.M. - OK to cover lines + pitless

adapted. C.B. (Under left Field)

INSPECTOR Charles Bern Streets + D.B./C.B.

DATE SYSTEM APPROVED _____ 2/6/91 [2/6/91 Field-3rd trench is ok. Pg. 2 of 2]

A 36624

SUBDIVISION: Drummond Property

LOT NUMBER: 3

DRY WELL OR DRY WELL AND TRENCH

_____ sq. ft./bedroom

	<u>Septic Tank</u>	
3 bedroom	1000 gallon	
4 bedroom	1250 gallon	
5 bedroom	1500 gallon	

Minimum Total Square Feet

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

210
190

_____ sq. ft./bedroom

Trench to be 3 wide.

Inlet 4 feet below original grade.

Bottom maximum depth 6 feet below original grade.

Effective area begins at 4 feet below original grade.

2 feet of stone below distribution pipe.

- 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: PLACE THE DISTRIBUTION BOX 400 FE ACROSS THE FRONT
(575.78') LOT LINE AND 120 FE OFF THE SAME LINE AS SEEN
WHEN FACING THE LOT FROM DAISY Rd. RUN TRENCHES ON
CONTOUR TOWARD RIGHT SIDE OF LOT. 6-14-88 SMC

3-14-86
9:30
H.R.P.L.D.

APPLICATION

PERCOLATION TESTING

A 36624

P _____

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

DISTRICT _____

DATE 3/6/86

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 Kay Drummond Lawrence E. Loveland

ADDRESS 2250 Daisy Rd, Woodbine, Md. PHONE 301-871-8922
442-1832

PROSPECTIVE BUYER Unknown

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Drummond Property LOT NO. 3

ROAD AND DESCRIPTION 2252
2250 Daisy Rd (Take 2260 Daisy Rd driveway)

TAX MAP 14 PARCEL # 157

SIZE OF LOT 3.1 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.

Kay Drummond
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

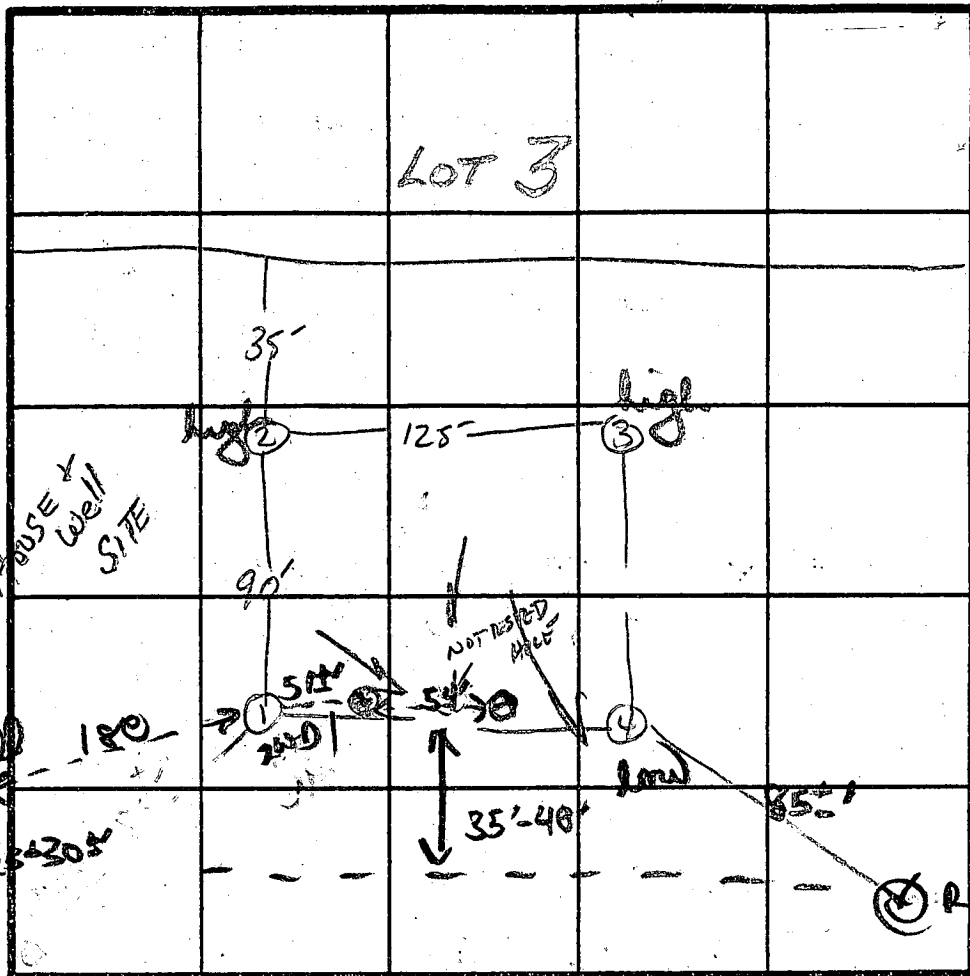
REASONS FOR REJECTION OR HOLDING 3-17-86; Perc Results Satisfactory; hold for certified holes, house + well size. S. Alue

BLDG. PERMIT SIGNED
AND RETURNED 7/29/86
Serial # 33962

THIS IS NOT A PERMIT

① ②
SOIL PROFILE

0"	AP
10"	Yellow BR Silty Clay Lim. 40% FRAGMENTS
4.5'	Yellow BR Silty Sand 20-30% FRAGMENTS
10'	FRAGMENTS 30-40% FRAGMENTS
14'	



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.
DAISY Rd.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
3/14/80	1 S	5'	12:15	12:20	12:20	12:29	9min	
	1 M	NOT TESTED						
	1 V	14'	VARYING SOIL STRUCTURE - See Profile					
	2 S	4.5'	12:06	NO MOVEMENT				
	2 M	1.9'	12:05	12:07	12:07	12:10	3min	
	2 V	14'	VARYING SOIL STRUCTURE - See Profile					
	3 S	4.5'	12:09	12:12	12:12	12:21	9min	
	3 M	9'	12:08	12:21	12:21	12:48	27min	
	3 V	14'	VARYING SOIL STRUCTURE - See Profile					
	4 S	5'	12:19	12:21	12:21	12:27	6min	
	4 M	9'	12:19	12:21	12:21	12:27	6min	
	4 V	14'	VARYING SOIL STRUCTURE - See Profile					
	2 S ₁	6'	12:31	12:33	12:33	12:39	6min	

X = 10min
2:10
1:00 BR
INLET
4.0
BOTTOM 6.0

REMARKS _____

TYPE OF SOIL Me Airy

TESTED BY S. Abel

ALSO PRESENT _____

APPLICATION

PERCOLATION TESTING

A 36624

P _____

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

DISTRICT _____

DATE 3/6/86

170 # TOTAL 680 #
INLET 4 1/2' @ NO GAP DISPOSAL
MAX. 9'

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 Kay Drummond

ADDRESS 2250 Daisy Rd, Woodbine, Md. PHONE 442-1832

PROSPECTIVE BUYER Unknown

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Drummond Property LOT NO. 3

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Kay Drummond
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____


REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

SOIL PROFILE

0' 

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	

REMARKS _____

TYPE OF SOIL _____

TESTED BY _____ ALSO PRESENT _____

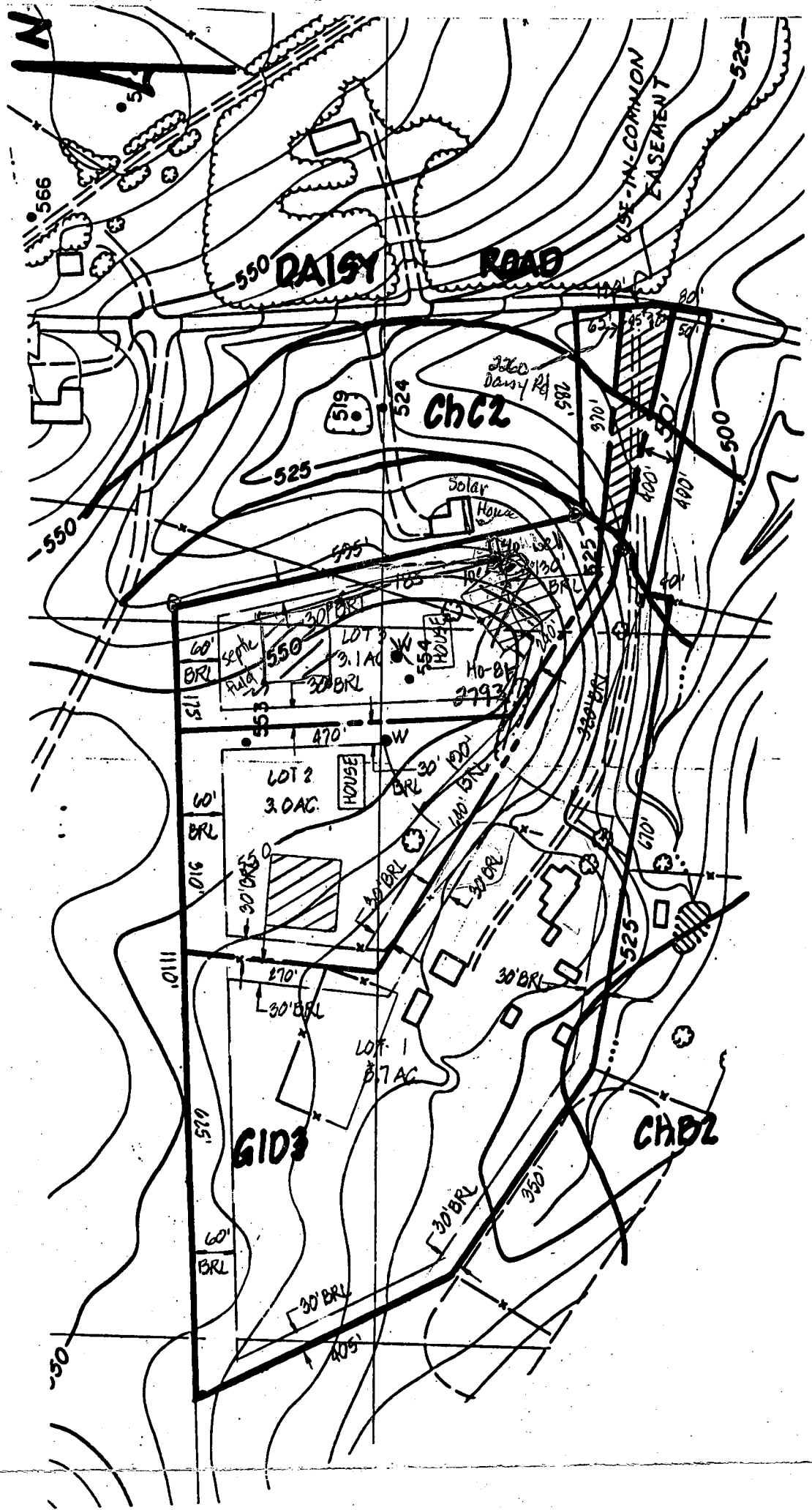
EH-12-1079

F-86-200

312
156
187

24
96

227
237
34
40



TITLE: PERCOLATION TEST PLAT				
PROJECT: DRUMMOND PROPERTY				
LOCATION: 4 TH ELECTION DISTRICT TAX MAP: 13 HOWARD CO., MD.				
SCALE: 1" = 200'	DESIGNED BY: —	DRAWN BY: D.P.	CHECKED BY: D.R.	DATE: MARCH, 1986
FIELD BOOK: —	PAGE NO.: —	JOB NO.: 8582	DRAWING NO.: 1 OF 1	

boender associates
inc.
consulting engineers
land surveyors
land planners

COURTHOUSE SQUARE
3565 ELLICOTT MILLS DRIVE
ELLICOTT CITY, MD. 21043
(301) 465-7777

IMPORTANT MESSAGE

FOR Mo. JANE NADEAU

DATE 9/21/88 TIME 2:30's A.M.
P.M.

WHILE YOU WERE OUT

M LARRY LOVELAND

~~OR~~ HOME OWNER ^{2850 Daisy Rd}
Drummond, Lot 3

PHONE NO. 301-871-8422

TELEPHONED	<input checked="" type="checkbox"/>	PLEASE CALL	<input checked="" type="checkbox"/>
CALLED TO SEE YOU	<input type="checkbox"/>	WILL CALL AGAIN	<input type="checkbox"/>
WANTS TO SEE YOU	<input type="checkbox"/>	RUSH	<input type="checkbox"/>

RETURNED YOUR CALL

MESSAGE Please call up to 5:30 P.M.
today or 8:30 - 10:00 A.M.

tomorrow. Reference -
water well certificate.

SIGNED Charles Bryan Steaks

well drilled

June 27, 1988

2250 DaisyRd, Lot-3

Drummond Property

Mr. Loveland owns it

HO-81-2793

~~855~~ Compton

9-21-88 4:15 pm

Mr. Loveland wanted to know if well had been approved. I told him we would have to review it, but did not see any major reason why it would not be approved. DEN

C1 9651 SEQUENCE NO. (DENV USE ONLY)
 (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 TYPE

PERMIT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
 COUNTY NUMBER **A-36624**

DATE Received [] DATE WELL COMPLETED **062898** Depth of Well **175** (TO NEAREST FOOT) FROM "PERMIT TO DRILL WELL" **10-81-2793**

OWNER **Lovelad** last name **Lovelad** first name **Lovelad** TOWN **Lispcon**
 STREET OR RFD **DURY ROAD** SUBDIVISION **TAX MAP 13 Parcel 157** SECTION **11** LOT **3**

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		Check if water bearing
	FROM	TO	
Top soil	0	1	
Brown shell	1	12	
Gray sandstone	12	35	
gray rock	35	75	✓
white x gray	75	160	✓
gray rock	160	175	

GROUTING RECORD
 WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** YES **N** NO
 TYPE OF GROUTING MATERIAL:
 CEMENT **CM** BENTONITE CLAY **BC**
 NO. OF BAGS **12** NO. OF POUNDS **1108**
 GALLONS OF WATER **72**
 DEPTH OF GROUT SEAL (to nearest foot)
 from **0** ft. to **33** ft.
 (enter 0 if from surface)

CASING RECORD
 casing types insert appropriate code below
ST **CO** **PL** **OT**
 STEEL CONCRETE PLASTIC OTHER

MAIN CASING Nominal diameter top (main) casing (nearest inch) **5.75** Total depth of main casing (nearest foot) **42**
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

EACH SCREEN	DEPTH (nearest ft.)	
	1	2
1	HO 10	175
2		
3		

SLOT SIZE 1 2 3
 DIAMETER OF SCREEN (NEAREST INCH) from to

C3
PUMPING TEST
 HOURS PUMPED (nearest hour) **09**
 PUMPING RATE (gal. per min. to nearest gal.) **03**
 METHOD USED TO MEASURE PUMPING RATE **1 gal.**
 WATER LEVEL (distance from land surface)
 BEFORE PUMPING **50**
 WHEN PUMPING **65**
 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)
(-) below }

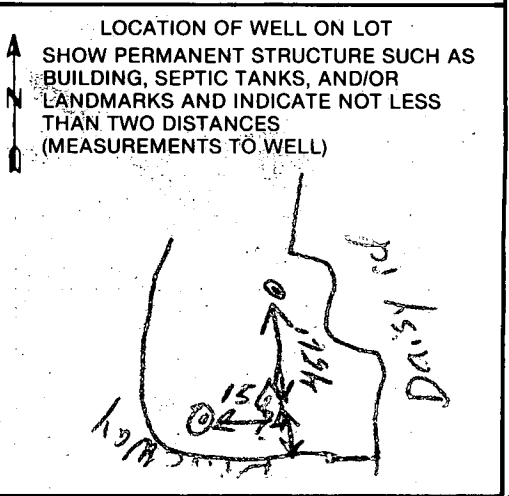
A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED
E ELECTRIC LOG OBTAINED
P TEST WELL CONVERTED TO PRODUCTION WELL

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. **252**
 DRILLERS SIGNATURE **Allen**
 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

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

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



B 1 9299 SEQUENCE NO. (DP USE ONLY)
THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS

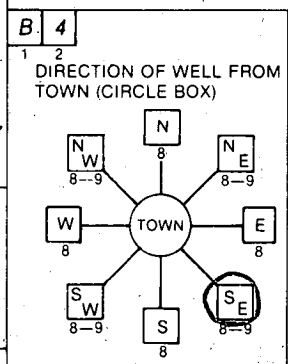
STATE OF MARYLAND PERMIT TO DRILL WELL please print or type

STATE PERMIT NUMBER 40-81-2793 fill in this form completely

Date Received (APA) WK 770-0800 H8718422
OWNER INFORMATION
052388
LOVELAND LAWRENCE
13705 FRANK FORT CT
ROCKVILLE MD 20853

LOCATION OF WELL
Howard
COUNTY
DRUMMOND PROPERTY
SECTION LOT B
Lisbon
MILES FROM TOWN (enter 0 if in town) 2 MI

DRILLER INFORMATION
Harry Edmondson
Edmondson Well Drilling
741 Klee Hill Westminster 21157
Harry Edmondson 5-23-88



Daisy rd
DIRECTION OF WELL FROM TOWN (CIRCLE BOX) SE
NEAR WHAT ROAD
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) WEST
DISTANCE FROM ROAD 500 FT

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
County Name Howard County No. A-36624
DATE ISSUED 061388
NORTH GRID 537000 EAST GRID 0782000

- USE FOR WATER (CIRCLE APPROPRIATE BOX)
D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

APPROXIMATE DEPTH OF WELL 250 FEET

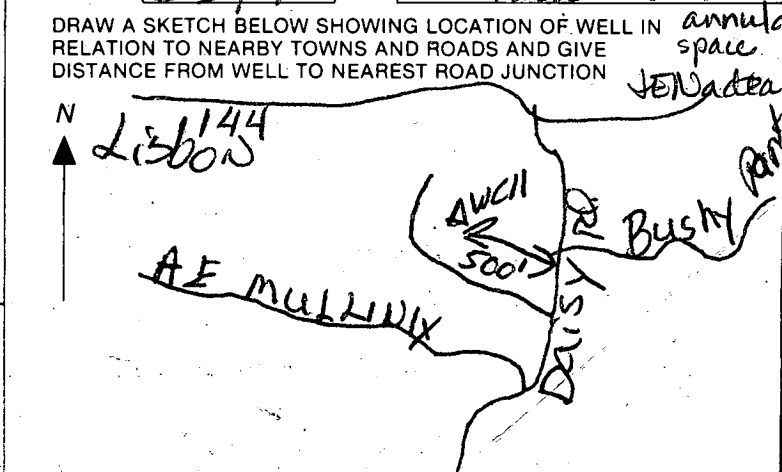
APPROXIMATE DIAMETER OF WELL 6 INCH

METHOD OF DRILLING (circle one)
BORED (or Augered) JETTED Jetted & DRIVEN
AIR-ROTary AIR-PERcussion ROTARY (Hydraulic Rotary)
CABLE REVERSE-ROTary Drive-POINT

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
SOURCES OF DRILLING WATER
WRITE THE BOX NUMBER FROM THE MAP HERE
E 780
N 5307

6-28-88
Location ok
4 1/2 ft casing
33 ft open hole
3 ft above ground
12 bags cement
Left 20 ft of rubber hose in

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)
N THIS WELL WILL NOT REPLACE AN EXISTING WELL
Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
D 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)
APPROX. PERMIT NUMBER GAP
FORCE 54 INITIALS IN BOX PERMIT No. 40-81-2793

SPECIAL CONDITIONS
COUNTY

STATE OF MARYLAND
 DEPARTMENT OF HEALTH AND MENTAL HYGIENE
 Laboratories Administration
 201 W. Preston St.
 P.O. Box 2355, Baltimore, Maryland 21203
 J. Mehsen Joseph, Ph.D., Director

CO166521818

Lab No. _____

WATER ANALYSIS

Bottle Number: 11 1555 Name: Lawrence Loveland County: Howard

Source of Sample: Daisy Road Street: _____ Town or City: _____ Collector: J. Arden

Sample Type (Circle): Community Source Non-Community Distribution Private MCL Emergency Recheck Routine

Remarks: Drummond Property Lot 3 110-81-2793

County: 13 Plant No. --- Sampling Station --- Date Collected 062888 Time 1:40 PM Acid Iced

Field Data: pH* --- Chlorine Residual --- Free --- Total --- Specific Conductance ---

ANALYSIS	CODE	RESULTS	ANALYSIS	CODE	RESULTS
pH*	00403		Arsenic	01002	
Alkalinity (Total)	00410		Barium	01007	
pH*, Ca CO ₃ SAT.	70311		Cadmium	01027	
Alkalinity, Ca CO ₃ SAT.	74023		Chromium	01034	
Hardness	00900		Lead	01051	
Ammonia-N	00608		Mercury	71900	
Nitrate-Nitrate N	00630	<u>02</u>	Selenium	01147	
Nitrite N	00615		Silver	01077	
MBAS	38260				
Chloride	00940		Aluminum	01105	
Fluoride	00951		Calcium	00916	
Color	00081		Copper	01042	
Turbidity	00076	<u>07</u>	Iron	01045	
Conductance*, SPEC	00095		Magnesium	00927	
Sulfate	00945		Manganese	01055	
Total Solids	00500		Nickel	01067	
Dissolved Solids	70300		Potassium	00937	
			Sodium	00929	
			Zinc	01092	

*Results reported in units, all others in milligrams per liter (ppm)

Date Received JUN 29 1988 Date Reported 7/5/88 Chemist LS

HOWARD COUNTY HEALTH DEPARTMENT

JOYCE M. BOYD, M.D., M.P.H.
COUNTY HEALTH OFFICER



Bureau of Environmental Health
3525 Ellicott Mills Drive
Ellicott City, Maryland 21043

Director - 461-9956
Water & Sewerage, Permits - 461-9933
Community Environmental Health - 461-9944
Technical Services - 461-9955

TO: HALLER ASSOCIATES
662 TRAIL AVE
FREDERICK MD 21701

FROM:

DATE: 6/22/90

This office has received your building permit # 33462.
We are unable to approve your permit for the following reason(s):

- No septic elevations/site plans provided (example and septic specification enclosed).
- Incorrect septic specs. (See enclosure.)
- No invert elevation at _____.
- No existing grade at _____.
- No elevation at well.
- Invert at trench(s) incorrect. (See enclosed.)
- House too small.
- House to _____ less than _____ feet.
- Well to _____ less than _____ feet.
- Sewage easement location incorrect.
- No well on property.
- Other: _____

If you should have any question, please call RAYMOND HODGES
or _____ at 461-9933.

HD-210

7/24/90 Revised Plans
OK

E/16113
 Call owner #770-880074

Health Dept

#25 W

HOWARD COUNTY
PERMIT APPLICATION

SERIAL NUMBER
 33462

LICENSES AND PERMITS DIVISION

DEPARTMENT OF INSPECTIONS, LICENSES & PERMITS
 3430 COURT HOUSE DRIVE, ELLICOTT CITY, MARYLAND 21043

BUILDING ADDRESS (BLOCK NO., STREET, TOWN OR AREA) GRADING/SEDIMENT CONTROL YES NO SDP #

8252 DAISY RD. SUBDIVISION LOT 3
 LISBON (WOODBORO, MD, 21765)

LOT NO.	PARCEL NO.	SEC.	AREA	BLOCK NO.	LIBER	FOLIO
# 3	157	—	—	6	—	—

SUB DIVISION	ZONE	ZONE MAP	ELEC. DIST.	CENSUS TR.
DRUMMOND	R	13	4 TH	6040

OWNER'S NAME AND ADDRESS PHONE NO.
 LAWRENCE E. LOVELAND
 SAME AS OCCUPANT

OCCUPANT'S NAME AND ADDRESS PHONE NO.
 13705 FRANKFORT COURT
 ROCKVILLE, MARYLAND 301-871-8422

ARCHITECT OR ENGINEER'S NAME AND ADDRESS PHONE NO.
 NONE

CONTRACTOR'S NAME AND ADDRESS PHONE NO.
 DAK RIDGE LOG HOMES 301-831412
 7932 WORMANS MILL RD
 FREDERICK MD 21701

EXISTING USE PROPOSED USE
 VACANT LOT New Single Family Home

EST. CONSTRUCTION COST LICENSE NUMBER PERMIT FEE
 \$ 90,000.

W/S CODE FOR OFFICE USE ONLY

DISTANCE IN FEET FROM R/W LINE TO FRONT BUILDING LINE _____
 SIDE YARD _____
 (DISTANCE IN FEET FROM SIDE BLDG. LINE TO SIDE PROPERTY LINE)
 DISTANCE IN FEET FROM SIDE STREET R/W LINE _____
 TO SIDE BUILDING LINE _____
 DISTANCE IN FEET, REAR YD. REQUIRING SET _____
 BACK _____ (CORNER LOT ONLY)
 CONDITIONS (IF ANY) _____ SDP # _____

Checks payable to DIRECTOR OF FINANCE OF HOWARD COUNTY

CAUTION
 To begin construction before a permit placard has been issued and displayed on the job is a violation of the law.
 Use and occupancy permit must be applied for two weeks before it will be issued.

IMPORTANT: PLEASE SHOW ZIP CODES AND AREA CODES WHEREVER REQUIRED.

LP-69
 Revised

DESCRIPTION OF WORK AUTHORIZED
 New Single Family Home
 ATTACHED TWO CAR GARAGE

SIZE OF BLDG.	FRONT	DEPTH	HEIGHT
TYPE OF BLDG.	AREA	VOLUME	ROOF
B. ROOMS			
ROOMS			
BATHS			
FIREPLACES			
FOOTINGS		FOUNDATION	S. WALLS

UTILITIES
 WATER/WELL SEWER/SEPTIC GAS ELECTRICITY TYPE OF HEAT ELECT AC

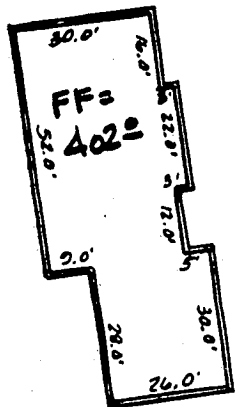
I have carefully examined and read this application and know the same is true and correct, and that in doing this work, all provisions of Howard County Ordinances and the State Laws of Maryland will be complied with, whether specified or not; and I will notify the Bureau of Inspections, and Permit twenty-four hours in advance when I am ready for the inspections called for elsewhere in this application; and that no work will be covered up until such inspections have been completed with.

OWNER'S SIGNATURE DATE
 [Signature] 6-13-90
 TITLE DATE

FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING		
SHA		
SEDIMENT/GRADING		
BUILDING OFFICIAL		
WATER & SEWER		
HEALTH DEPT.		
FIRE PROTECTION		
STORM WATER MGMT.		

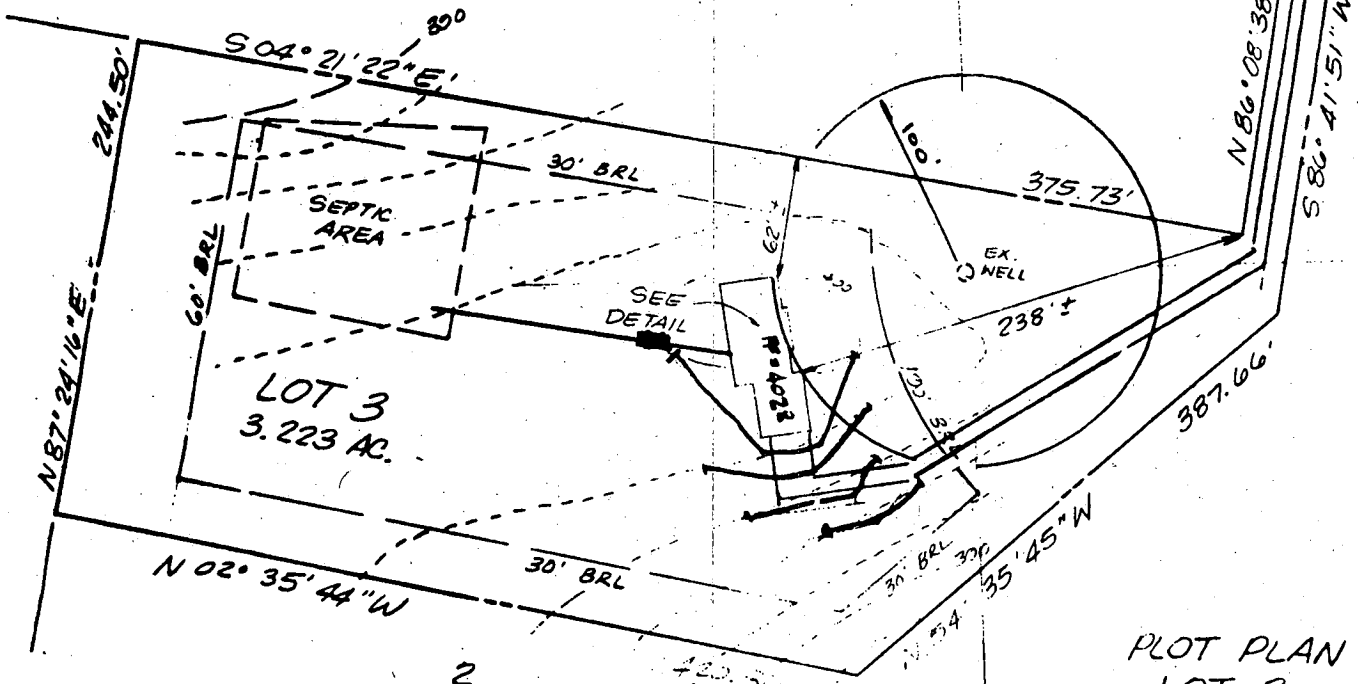
APPROVED DATE
 Distribution of Copies:
 White - Building Official
 Green - Planning & Zoning
 Yellow - Engineering
 Pink - Health Dept.
 Gold - S.M.A.

Health Dept

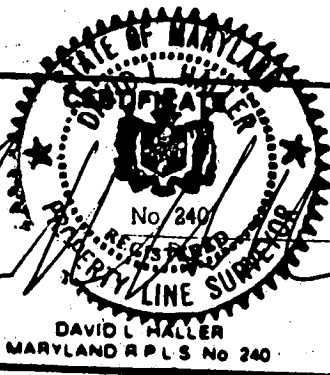


DETAIL
SCALE: 1" = 40'

DAISY ROAD
R. 360.00'
A. 25.63'



PLOT PLAN
LOT 3
DRUMMOND
HOWARD COUNTY, MD.



REFERENCES	
PLAT BK.	
PLAT NO.	712
LIBER	
FOLIO	

HALLER ASSOCIATES SURVEYING-ENGINEERING-PLANNING (301) 663-1843 822 TRAIL AVENUE, FREDERICK, MARYLAND 21701			
		DATE OF SURVEYS	SCALE: 1" = 100'
WALL CHECK		DRAWN BY	RD
MSE LOC		JOB NO	90-643
BOUNDARY			

PLOT PLAN 6/10/00

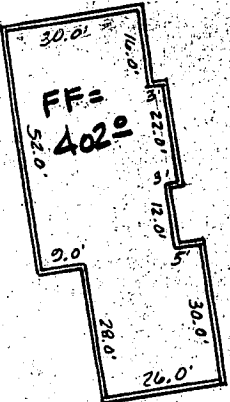
Brown Construction, Inc.

Builder

1/29/91

Hubert R. Brown, Jr.

11214 Angleberger Road * Thurmont, Maryland 21788
Telephone: Bus. (301) 898-3701 Res. (301) 898-5598

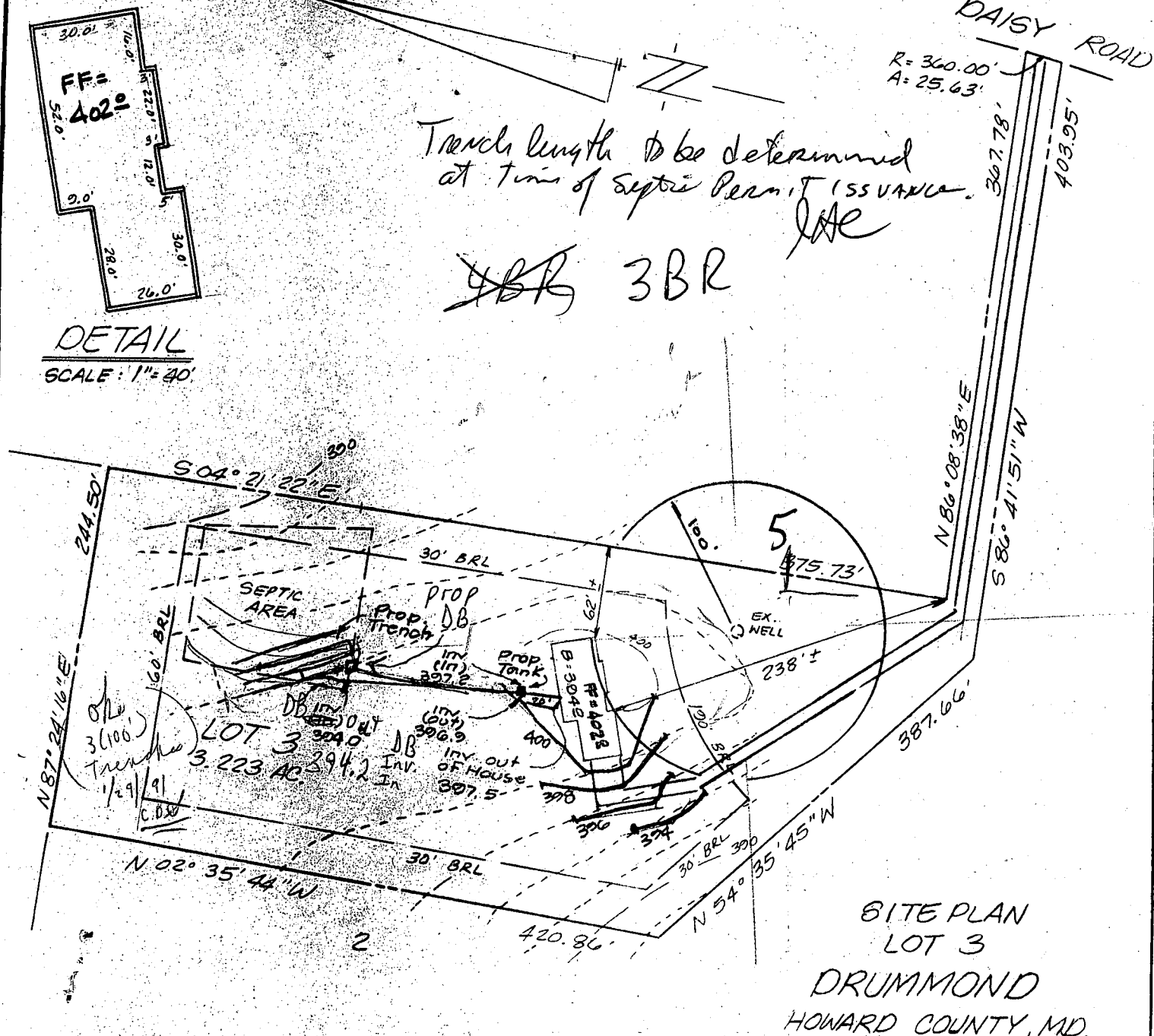


Trench length to be determined at time of Septic Permit ISSUANCE.
 JAE

~~4BR~~ 3BR

DAISY ROAD
 R= 360.00'
 A= 25.63'

DETAIL
 SCALE: 1"=40'



SITE PLAN
 LOT 3
 DRUMMOND
 HOWARD COUNTY, MD.

CERTIFICATE

DAVID L. HALLER
 MARYLAND R.P.L.'S No. 240

REFERENCES

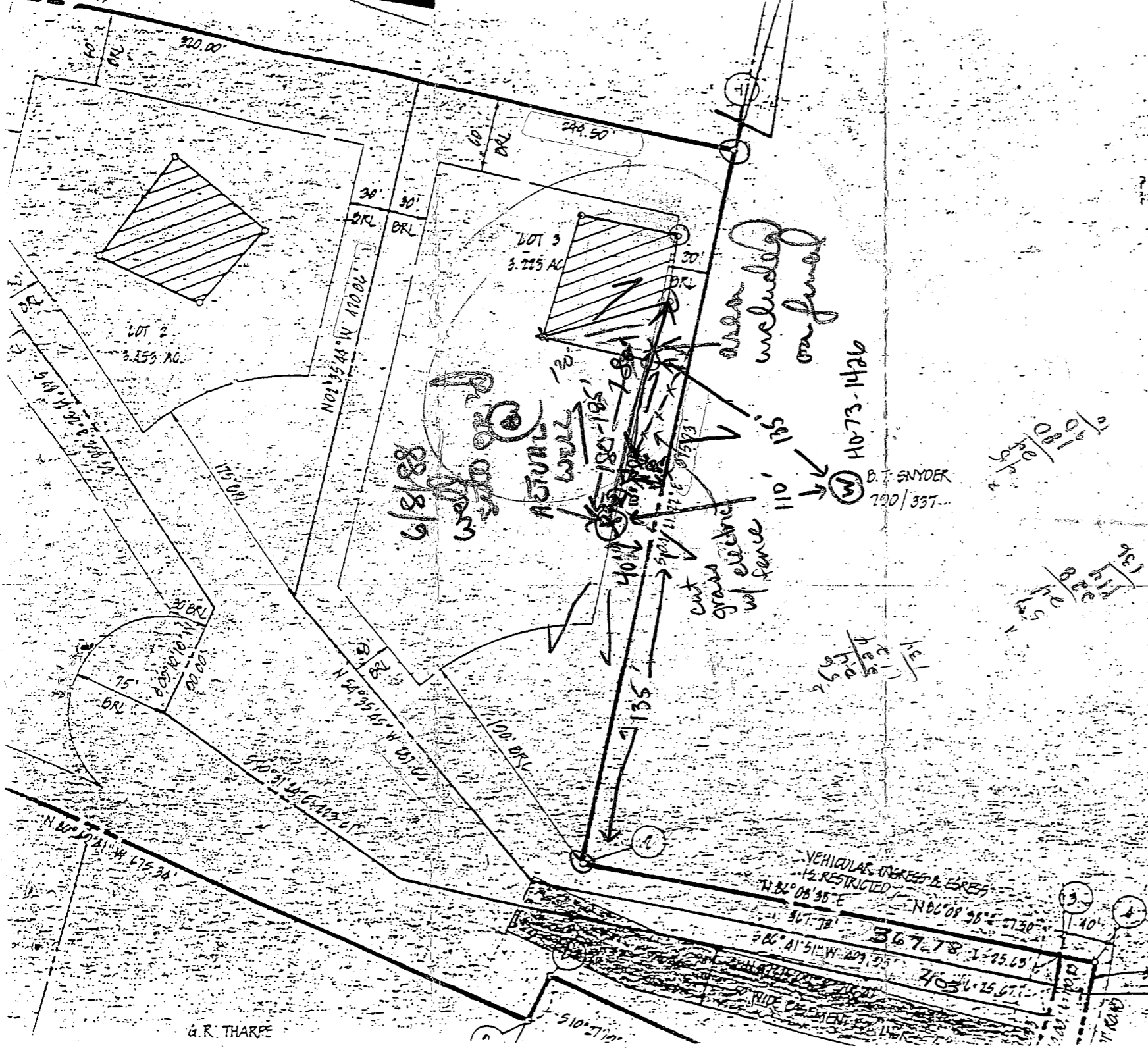
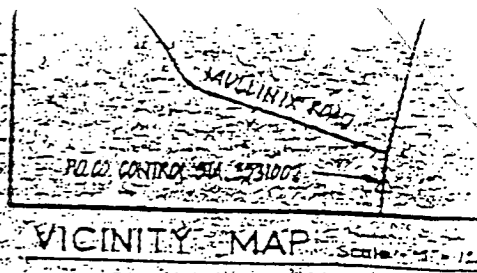
PLAT BK.
 PLAT NO. 7121
 LIBER
 FOLIO

HALLER ASSOCIATES
 SURVEYING-ENGINEERING-PLANNING

(301) 863-1843 522 TRAIL AVENUE, FREDERICK, MARYLAND 21701

DATE OF SURVEYS	SCALE: 1"= 100'
WALL CHECK	DRAWN BY RD
HSE LOC.	JOB NO 90-643
BOUNDARY	

PLOT PLAN 6/10/90
 SITE " " 7/21/90
 PLANS OK
 7/22/90
 R. HODGES



GENERAL NOTES

- 1) Tax Map - 13 Parcel - 157
 - 2) Deed Reference - 015/232
 - 3) Coordinates shown hereon are based on Maryland State Plane coordinate system, Howard County control stations 3331001 AND 3331002
 - 4) Subject property zoned - R per 6-02-85 Comprehensive Zoning Plan
 - 5) ● - DENOTES IRON BAR OR IRON PIPE TO BE SET.
 - 6) The lots shown hereon comply with the minimum ownership width and lots required by the Maryland State Department of Health and Mental Hygiene.
 - 7) This area designated a private sewage easement of approximately 10,000 sq. ft. 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 sewerage is available and servicing any residential structures constructed on these building sites. 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 sewer easement. Recordation of a modified sewage easement shall not be necessary.
 - 8) All percolation test holes shown hereon have been field located and shown thus: (o)
 - 9) For flag or pipestem lots refuse collection, snow removal and road maintenance are provided to the junction of the flag or pipestem and the road right-of-way line, and not onto the flag or pipestem lot driveway.
 - 10) Flag or pipestem lots shall not be further subdivided into lots accommodating additional residences unless a public road can be constructed according to county standards on a minimum fifty (50) foot right-of-way to be added to the County.
 - 11) EXISTING STRUCTURE ON LOT 3
 - 12) BOUNDARY INFORMATION SHOWN HEREON IS BASED ON A SURVEY BY CLAUDE M. SKINNER DATED APRIL 1, 1975
 - 13) SUBDIVISION OF THE PROPERTY WILL REQUIRE FULL COMPLIANCE WITH ALL THE PROVISIONS OF THE HOWARD COUNTY SUBDIVISION AND LAND DEVELOPMENT REGULATIONS.
 - 14) PLAN SUBJECT TO VP-85-148.
- LAND DECEASED TO HOWARD COUNTY, MARYLAND FOR THE PURPOSE OF A PUBLIC ROAD (0.148 AC)

G.R. THARPE

10

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 # 46780
Date 01/29/91

Name of Installer ST MECHANICAL CON.

Telephone 295-6677

License Number 7170

Certified Well Pump Installer _____ Well Driller _____ Registered Plumber X

Name of Property Owner _____

Telephone 871-8422

Subdivision DRUMMOND Lot # 3

Well Tag # HO-81-2793

Site Address 2522 DAISY ROAD

Pump

- Type
 - Deep well jet _____
 - Shallow well jet _____
 - Submersible
- Make Gould
- Model # 7EHO5412
- Capacity 7 GPM
- 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 _____

Motor

- Horsepower 1/2
- RPM _____
- Voltage _____
 - 110 _____
 - 220

Pitless Adapter

- Make CAMPBELL
- Model # Q-10X
- Depth 5-6 FT

Tank

- Capacity 20 GAL
- Pressure relief valve? 15 LB

Piping

- Type 160 PSI
- Size 1"
- NSF and/or BOCA Code approved YES
- Depth of supply line 5-6 FT

Well data

- Depth 175 ft.
- Yield 8.5 GPM
- Static water level _____ ft.
- Will water supply be disinfected by installer? NO

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: JAN 14 1991

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

RECEIVED
HEVLIAN DEBI
HOWARD COUNTY

TC- 1/17/91 - Will send in the
fee for permit re
SS has been typed - filled in SS
done.

RECEIVED
HOWARD COUNTY
HEALTH DEPT.
91 JAN 17 AM 9:03

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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Replacement _____

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Date _____

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License Number 7170

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Motor

- Horsepower 1/2
- RPM _____
- Voltage _____
 - 110 _____
 - 220

Pitless Adapter

- Make CAMPBELL
- Model # B-10X
- Depth 5-6 FEET

Tank

- Capacity 20 GAL
- Pressure relief valve? 75 LB

Piping

- Type 160 PSI
- Size 1"
- NSF and/or BOCA Code approved YES
- Depth of supply line 5-6 FT

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