

5/5/93
3:30
5/6/93
11:45 LATER

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

04-347005

P 49031

A 36664

DISTRICT 4th

DATE 3/5/93

DATE SYSTEM APPROVED 7/2/93

INSPECTOR M. Rifkin

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXX~~ 313-2640

~~Charles A. Klein & Sons, Inc.~~ So. Carroll Backhoe IS PERMITTED TO INSTALL ALTER

ADDRESS 5220 Klees Mill Road, Sykesville, Maryland 21784 PHONE 549-6960

SUBDIVISION Woodfield LOT 4 ROAD 14815 Woodfield Lane

PROPERTY OWNER Steve & Stacy Fishmen

ADDRESS

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

TRENCHES - Trench to be 3 feet wide. Inlet ~~2~~^{4 1/2} feet below original grade. Bottom maximum depth ~~8~~^{4 1/2} feet below original grade. Effective area begins at ~~2~~^{4 1/2} feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Starting from right rear lot corner as seen from Sherbrooke Lane, Start first trench 50 feet down rear lot line and 120 feet off this same lot line. Run trenches on contour toward rear of lot.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 3/0/93 RH

REPAIRS SHALLOW!!!

PLANS APPROVED BY Mark Rifkin REVISED 5/5/93 DATE 8/22/89

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, 90° ELBOWS NOT ACCEPTABLE.

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 35/40 PVC OR ABS

PERMIT VOID AFTER TWO YEARS

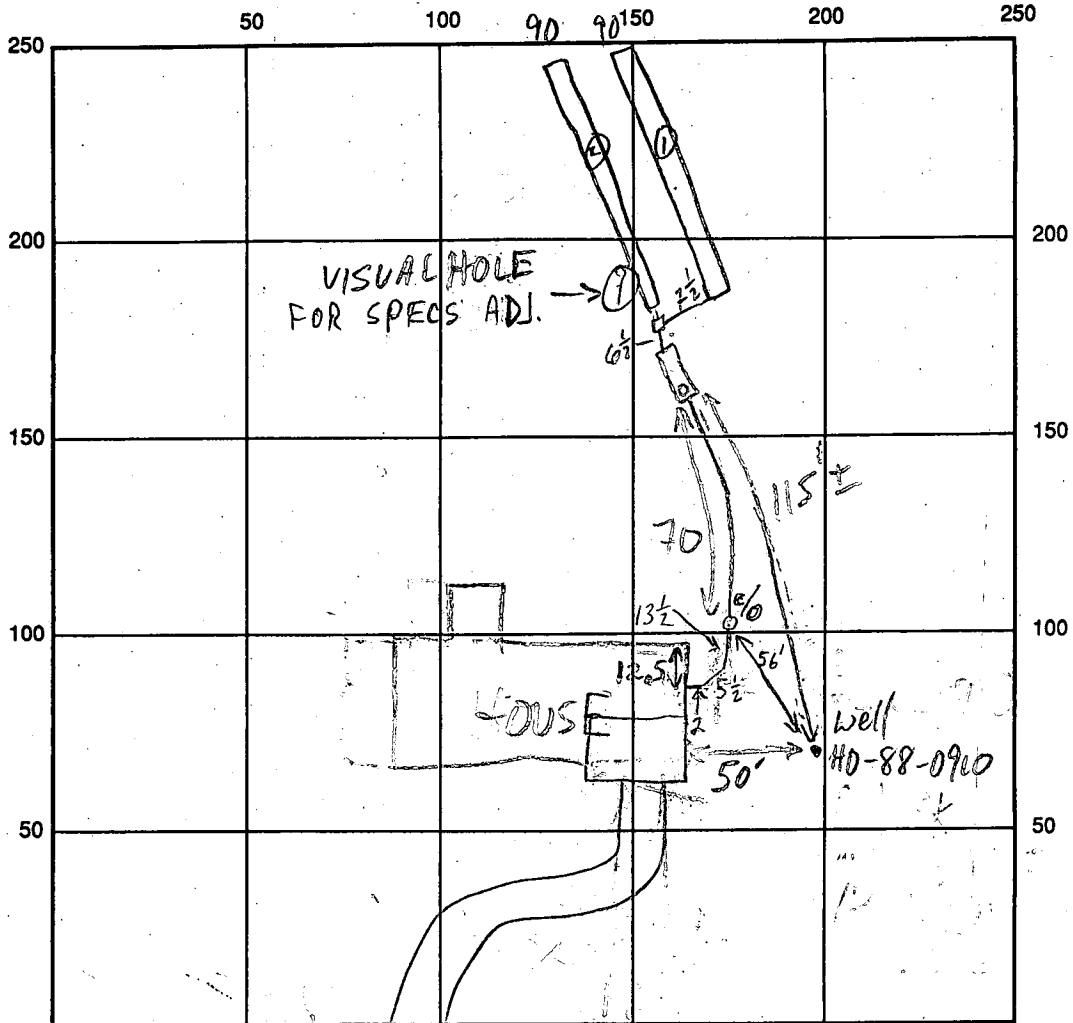
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON, CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

BLDG. PERMIT SIGNED AND RETURNED 6/17/93
Serial # 49297
deck

P A 36664



WOODFIELD LA INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1250 GAL - OK

CLEANOUTS S.T. - OK; INLINE - OK

DISTRIBUTION BOX LEVEL OK - Baffle in

DRAIN FIELD/TITLE DEPTH $\frac{1 1/2}{8 1/2}$ FT.

TRENCH WIDTH 2 FT.

INLET DEPTH $\frac{1 1/2}{7 1/2}$ FT.

EFFECTIVE GRAVEL DEPTH $\frac{1 1/2}{4 1/4}$ FT.

TOTAL LENGTH $\frac{190}{290}$ FT.

NUMBER OF TRENCHES 2

ONE SIDEWALL/BOTTOM AREA $\frac{0260}{0360}$ SQ. FT.

DRYWALL INSIDE DIAMETER FT.

EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA 720 SQ. FT.

REMARKS: 5/5/93 TOPS ON PLAN NOT ACCURATE, CLAY TOO DENSE @ SPECIFIED DEPTH; SPECS ADJUSTED FOR THIS INSTALLATION, REPAIRS SHALLOW MR
5/6/93 OK TO COVER PIPES, S.T. + TRENCHES; HOLD FOR HOUSE CONN MR
7/2/93 HOUSE CONN OK; MR

DATE SYSTEM APPROVED 7/2/93

INSPECTOR M-Riffin



HOWARD COUNTY HEALTH DEPARTMENT

Joyce M. Boyd, M.D., County Health Officer

*Reply to: Charles Streaker
313-2640 or 313-2641*

July 8, 1993

Mr. Steve Fishman
14815 Woodfield Lane
Glenelg, Maryland 21737

RE: Lot 4, Woodfield Subdivision
14815 Woodfield Lane
Well Permit #HO-88-0910

Dear Sir:

A review of our records indicates that final satisfactory water samples were not obtained at the above referenced property. You are requested to contact this office at 313-2640 to arrange for those samples to be taken. These samples are required in order to comply with Maryland Well Construction Regulation (COMAR 26.04.04.09A) (1) which states that: "A person may not put into service a well or water supply system that may be used for human consumption unless a Certificate-of-Potability has first been issued for the well by the approving authority..."

An Interim Certificate-of-Potability was issued based on one satisfactory water sample. The enclosed copy of that Interim Certificate stipulates that a second safe sample be obtained. The purpose of the second sample is to assure that the well is not vulnerable to re-contamination.

You are requested to call this office at 313-2640 to arrange an appointment for the second sample from an inside tap which is the most reliable location from which to obtain a safe sample.

Presently there is no charge for this service.

Very truly yours,

Charles B. Streaker, R.S.
Charles B. Streaker, R.S.
Water and Sewerage Program

CBS:hs

Bureau of Environmental Health
3525-H Ellicott Mills Drive Ellicott City, Maryland 21043-4544
Water and Sewerage, Permits 313-2640 Community Environmental Health 313-2642
Technical Services 313-2644 Director 313-2645 TDD 313-2323



HOWARD COUNTY HEALTH DEPARTMENT

Joyce M. Boyd, M.D., County Health Officer

Reply to: Charles B. Streaker
313-2640 or 313-2641

July 2, 1993

Mr. Steve Fishman
1203 Wild Rose Court
Mariottsville, Md.

21104

RE: LOT #4 - Woodfield
14815 Woodfield Lane
Well permit HO-88-0910

Dear Mr. Steve Fishman:

This is to advise you that the septic system was installed, inspected and approved on July 2, 1993.

The water sample recently submitted for testing was free of coliform and fecal coliform bacteria at the time of sampling and is bacteriologically safe for drinking.

INTERIM CERTIFICATE OF POTABILITY

This certifies that the initial sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under permit(s) HO-88-0910. No guarantee can be given for health protection beyond this date of issue. Based upon a satisfactory investigation and evaluation by the Howard County Health Department, the Maryland Department of the Environment accepts this well system as required by COMAR 26.04.04.09.

This certificate may become final upon completion of the final bacteriological test which is to be taken within six months. The well owner accepts his responsibilities under COMAR 26.04.04.10.

June 29, 1993
Date of Water Sample

August 15, 1989
Date Well Approved

Charles B. Streaker / MR
Approving Authority
Charles B. Streaker, R.S.
Water and Sewerage Program

CBS:hs

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 # _____
 Date _____

Name of Installer ROBERT L. FEEZER CO., INC.

Telephone 781-4655

License Number 2122
 Certified Well Pump Installer

Well Driller

Registered Plumber

Name of Property Owner STEVE FISHMAN

Telephone 795-1405

Subdivision WOODFIELD Lot # 4

Well Tag # HD-88-1910 ??

Site Address 14815 WOODFIELD LN.

Pump

- Type
 - Deep well jet
 - Shallow well jet
 - Submersible
- Make Dearing (EASWAS)
- Model # 3ALW
- Capacity 8 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 3450
- Voltage
 - 110
 - 220

Pitless Adapter

- Make DICKEN
- Model # JRS-10
- Depth 11 1/2"

Tank CAPIVE AIR

- Capacity WX 263
- Pressure relief valve? YES

P.A. OK MR
5/6/93

Piping

- Type Poly.
- Size 1"
- NSF and/or BOCA Code approved
- Depth of supply line 42"

Well data

- Depth 160 ft.
- Yield 12 GPM
- Static water level _____ 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: *Robert L. Feezer*

Date: 3/26/93

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

SUBDIVISION:

Woodfield
Woodfield La

A 36664

LOT NUMBER: 4

DRY WELL OR DRY WELL AND TRENCH

_____ sq. ft./bedroom

	Septic Tank
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.

ORIG. SYSTEM 4 1/2 - 8 1/2

TRENCHES

180 sq. ft./bedroom

Trench to be 3 wide.
 Inlet 2 1/2 feet below original grade.
 Bottom maximum depth 4 feet below original grade.
 Effective area begins at 2 1/2 feet below original grade.
1 1/2 feet of stone below distribution pipe.

REPAIRS
 ← SPECS
 SHALLOW ONLY

- 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: STARTING FROM RIGHT REAR LOT CORNER AS SEEN FROM SHERBROOKE LA, START FIRST TRENCH 50' DOWN REAR LOT LINE AND 120' OFF THIS SAME LOT LINE. RUN TRENCHES ON CONTOUR TOWARD REAR OF LOT.

MR 8/22/89

4-28-86
9:30

APPLICATION

PERCOLATION TESTING

A 36664

P _____

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

DISTRICT _____

DATE 3/20/86

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 DOMINIC J. FEMIANO ^{Steve + Stacy Fishman} ~~Home Builders Inc.~~

ADDRESS 14702 TRIADELPHIA ROAD PHONE 489-4477

PROSPECTIVE BUYER ARVID JACOBSON, PAUL JACOBSON, RANDALL JACOBSON

ADDRESS 11906 BLUE FEBRUARY WAY PHONE 730-1945

PROPERTY LOCATION: COLUMBIA, MD 21044

SUBDIVISION TRIADELPHIA ESTATES ^{Woodfield} LOT NO. 4

ROAD AND DESCRIPTION TRIADELPHIA ROAD ^{Tax Map (14815-Woodfield Lane)}

1/2 mile past Robbery Rd on Right coming

TAX MAP 21 PARCEL # 33 LOT 2 ^{from Glenelg}

SIZE OF LOT 3.0 ACRES 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. Randall Jacobson
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 4/27/86 - RE DESIGN LOT UNDER GROUND

WATER RH BLDG. PERMIT SIGNED AND RETURNED 12/21/85 Serial # 96602 SFD
BLDG. PERMIT SIGNED AND RETURNED 10/13/89 Serial # 96602 SFD

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

4-28-86
9:30

APPLICATION

PERCOLATION TESTING

A 36664

P _____

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

DISTRICT _____

DATE 3/20/86

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 DOMINIC J. FEMIANO

ADDRESS 14702 TRIADELPHIA ROAD PHONE 489-4477

PROSPECTIVE BUYER ARVID JACOBSON, PAUL JACOBSON, RANDALL JACOBSON

ADDRESS 11906 BLUE FEBRUARY WAY PHONE 730-1845

COLUMBIA, MD 21044

PROPERTY LOCATION:

SUBDIVISION TRIADELPHIA ESTATES LOT NO. 4

ROAD AND DESCRIPTION TRIADELPHIA ROAD

TAX MAP 21 PARCEL # 33 LOT 2

SIZE OF LOT 3.0 ACRES 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. Randall Jacobson
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

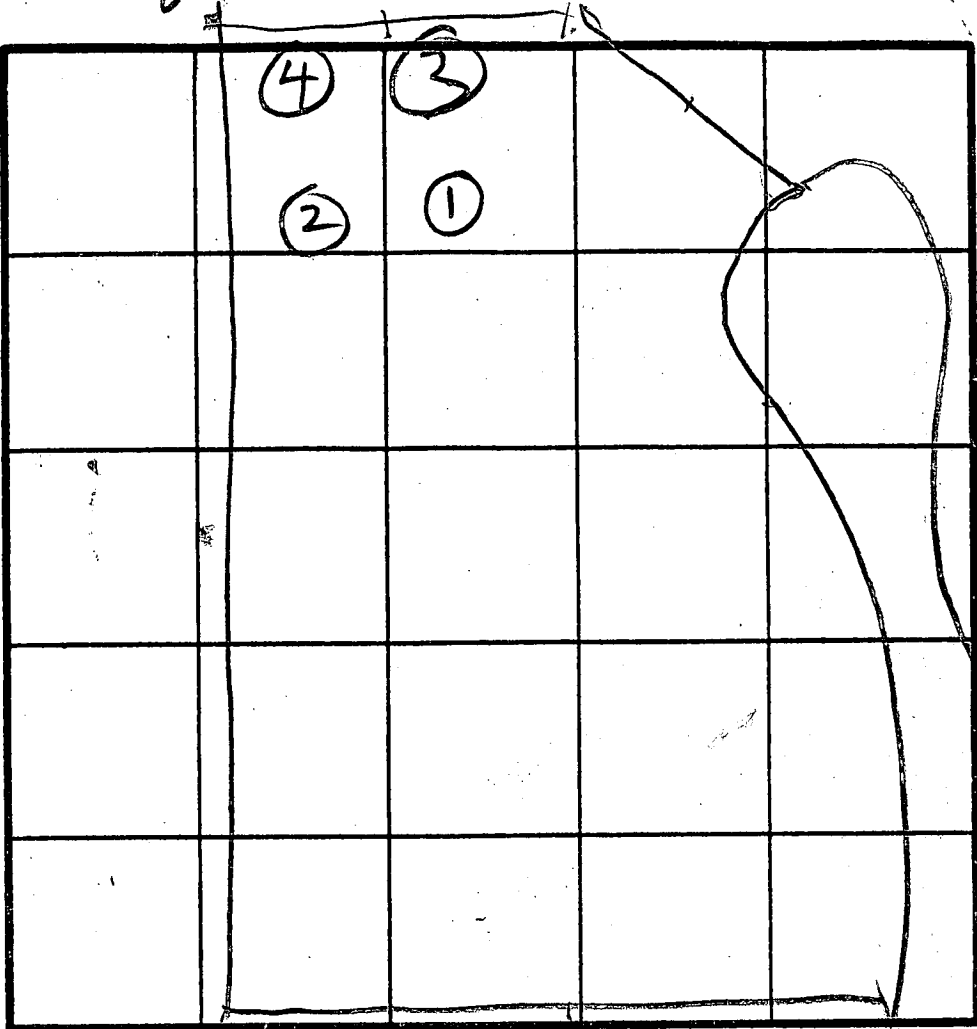
REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

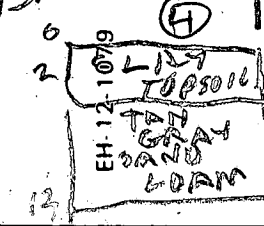
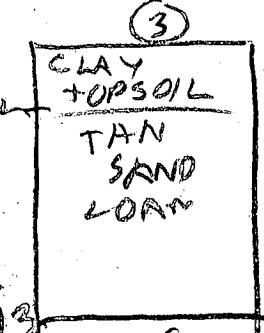
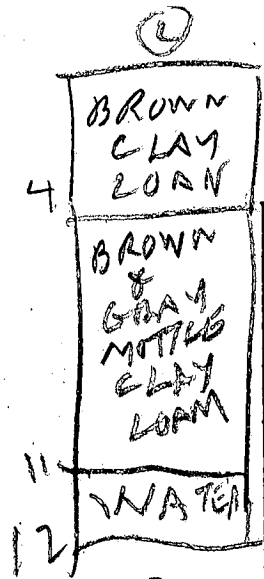
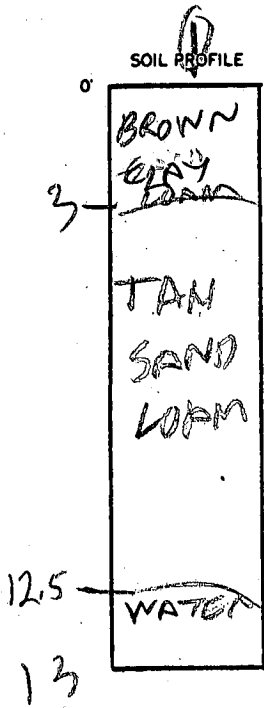
REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

Lot 4 Trudolph Estates



$\bar{X} = 6$
 180 BR
 Inlet 2 1/2
 Bottom 4

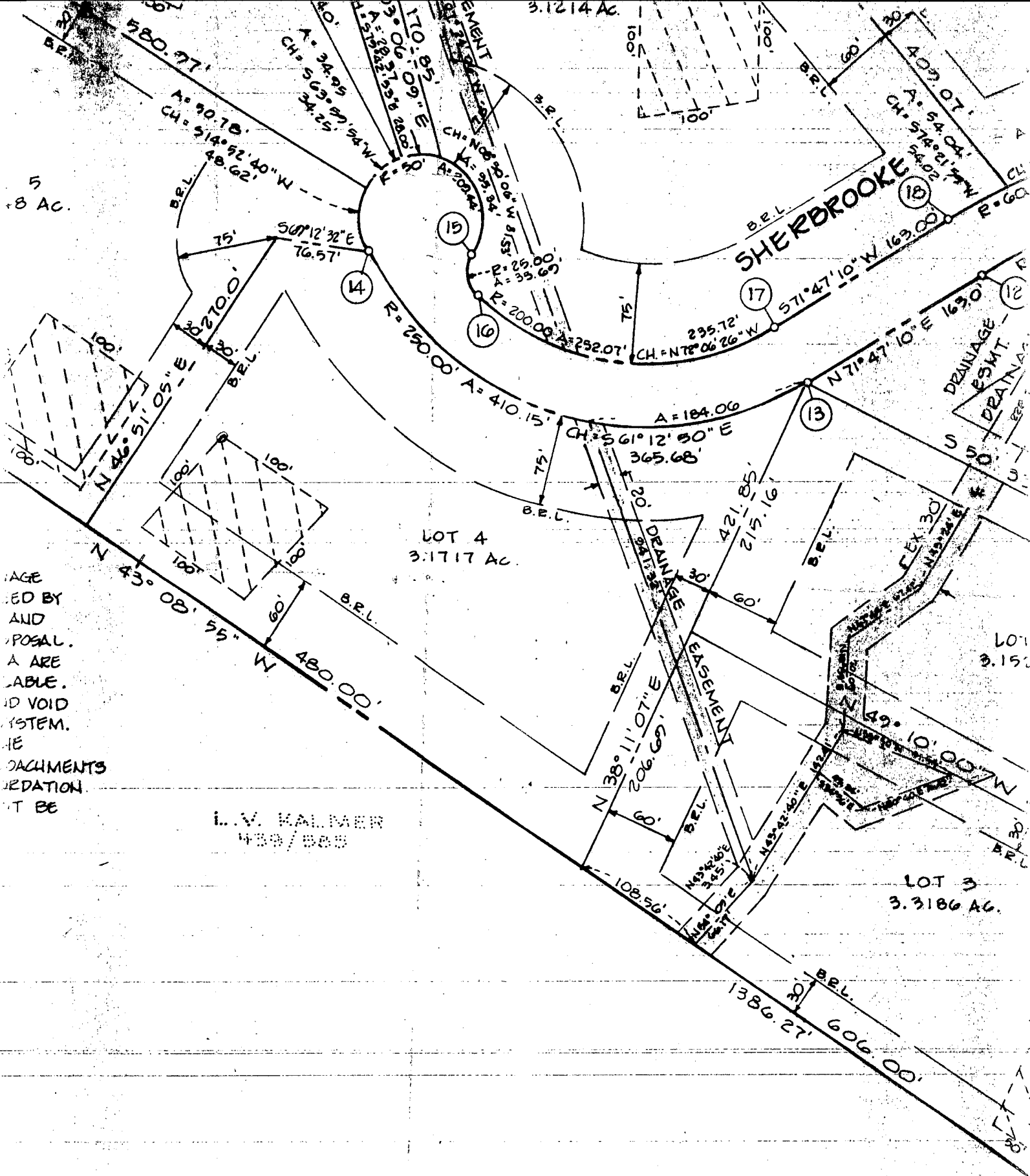


INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/27/66	1V	13	WATER		12 1/2 FT		
	2V	12	WATER		11 FT		
	3S	4	121	126	126	132	6
	3V	13	LOOKS GA				
	4S	5	129	130	130	135	5
	4V	13	LOOKS G				

REMARKS: Holes dug per surveyor stakes

TYPE OF SOIL: _____
 TESTED BY: R HODGES
 ALSO PRESENT: R JALDBSEN, WOODY BARKHOE



AGE
ED BY
AND
POSAL.
A ARE
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ACHMENTS
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T BE

L.V. KALMER
439/585

NONE

D PRIVATE

ENT

DATE

DEDICATION FOR INDIVIDUALS

WE, ARVID L. JACOBSON, RANDALL M. JACOBSON, & B. PAUL JACOBSON, OWNERS, OF PROPERTY SHOWN AND DESCRIBED HEREON, HEREBY ADOPT THIS PLAN OF SUBDIVISION, AND IN CONSIDERATION OF THE APPROVAL OF THIS FINAL PLAT BY THE OFFICE OF PLANNING AND ZONING THE MINIMUM BUILDING REGULATIONS...

APPLICATION

HOWARD COUNTY

PERMIT APPLICATION

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

SERIAL NUMBER
46602

BUILDING ADDRESS (HOUSE NO., STREET, TOWN OR AREA)

**14815 Woodfield Lane
Glencol, MD 21737**

GRADING/SEDIMENT CONTROL YES NO

DESCRIPTION OF WORK AUTHORIZED

**Ryan Homes "New Castle" Model
on file. 1/2 car GARAGE
(4 ROOMS)**

LOT NO.	PARCEL NO.	SEC.	AREA	BLOCK NO.	LIBER	FOLIO
4	209	NA	NA	4		
SUB DIVISION		ZONE	ZONE MAP	ELEC. DIST.	CENSUS TR.	
Woodfield		RC	27	4	6040	

OWNER NAME AND ADDRESS PHONE NO.
**Steve + Stacey Fishman
1203 Wild Rose Ct
Marriottsville, MD 21104** 442-2911

OCCUPANT'S NAME AND ADDRESS PHONE NO.
Same

ARCHITECT OR ENGINEER'S NAME AND ADDRESS PHONE NO.
**Riemer, Muegge + Assoc.
8818 Centre Park Dr. Suite 200
Columbia, MD 21045** 997-9282

CONTRACTOR'S NAME AND ADDRESS PHONE NO.
Owner

SIZE OF BLDG.	FRONT	DEPTH	HEIGHT
	66	32	18'
TYPE OF BLDG.	AREA	VOLUME	ROOF
B. ROOMS			
ROOMS			
BATHS			
FIREPLACES			
FOOTINGS		FOUNDATION	S. WALLS
16" x 8" Concrete		8" Concrete	Siding

UTILITIES

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

I have carefully examined and read this application and know the same is true and correct, and that is 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 Department of Inspections, and Permits twenty-four hours in advance when I am ready for the inspections called for elsewhere in the application; and that no work will be covered up until such inspections have been complied with.

Owner
 SIGNATURE DATE
12/15/92

EXISTING USE PROPOSED USE
Vacant Lot **New Single Family Home**

EST. CONSTRUCTION COST LICENSE NUMBER PERMIT FEE
120,000

FOR OFFICE USE ONLY

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

FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING		
SHA		
SEDIMENT/GRADING		
BUILDING OFFICIAL		
WATER & SEWER		
HEALTH DEPT.	12/21/92	B. Hodges
FIRE PROTECTION		
STORM WATER MGM.		

Check 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.

APPROVED DATE

LP-69-591 Distribution of Copies:
White - Building Official
Green - Planning & Zoning
Yellow - Engineering
Pink - Health Dept.
Gold - S.H.A.

WOOD FIELDS
TOWARD W. CLARK
1235/48

N 51° 21' 02"
E 192.200' 22"

HENRY A. ZIMMERMAN
COR. 825/546

Well Site OK
Perc Holes
Not Found
MR
7/17/89

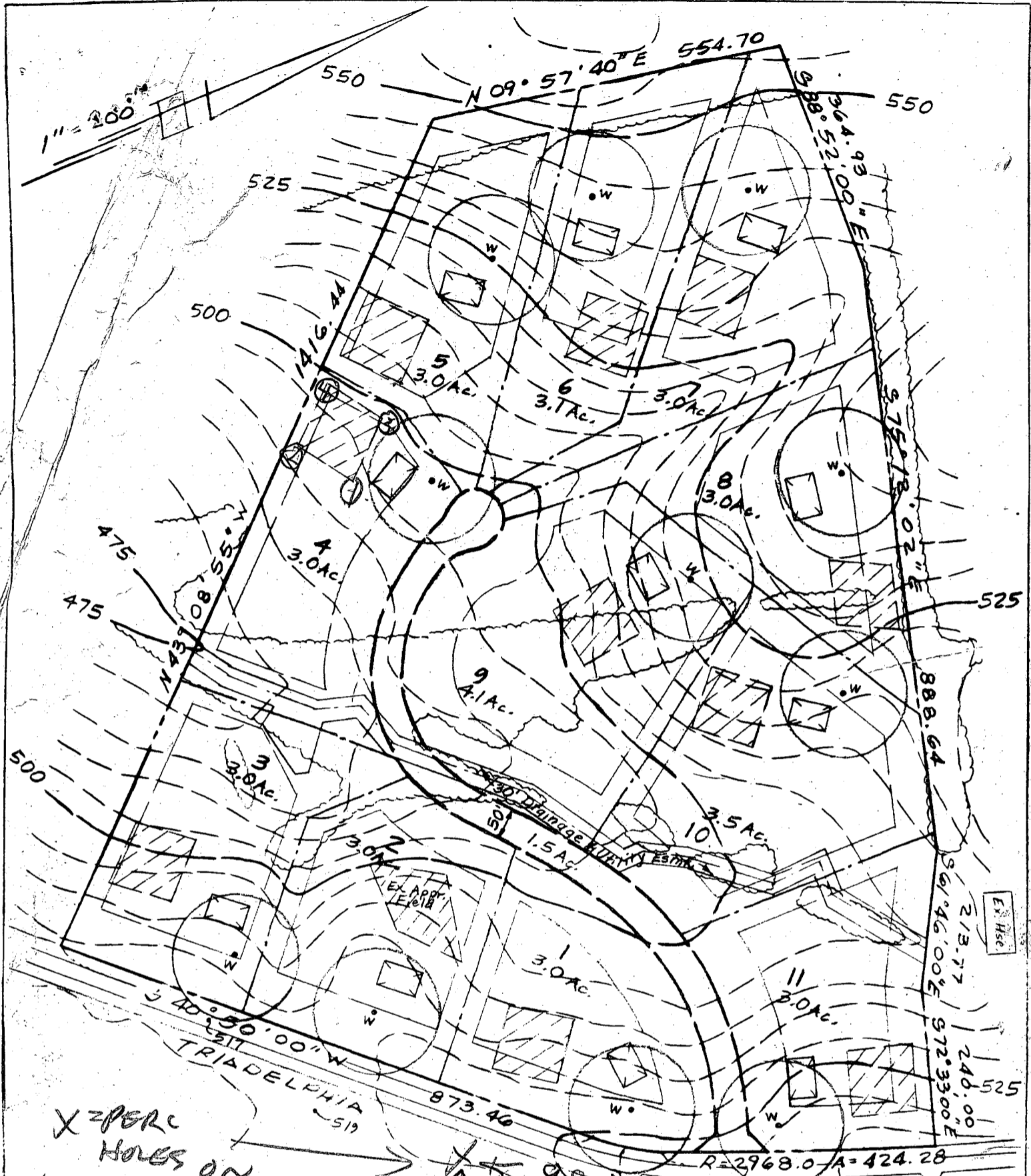
LOT 1 - PLAT 518
DOMINIC J. FEMIANO
825/546

FEMIANO

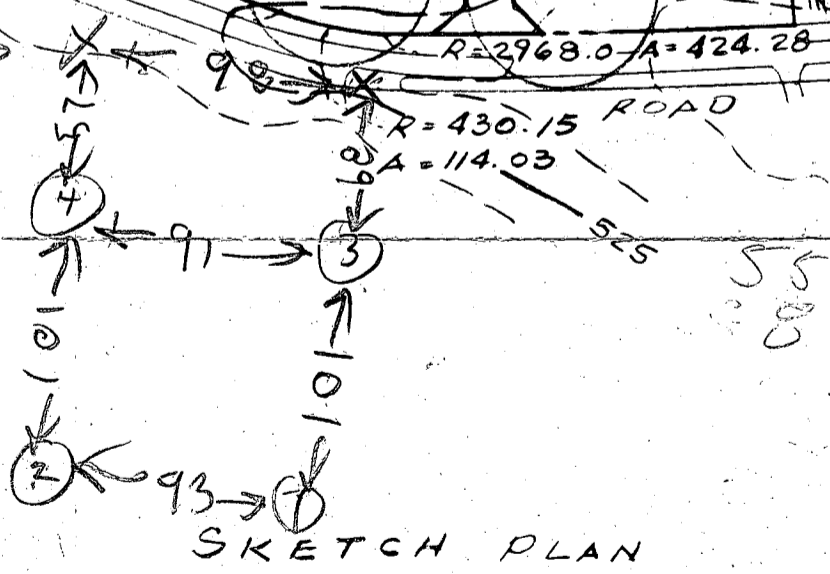
LOT 1
DOMINIC 825/546



WOOD FIELDS
TRIADELPHIA ESTATES
LOT 4



X 2 PERC HOLES ON LOT 5
 NOTES
 ZONING: R (3 Ac. min.)
 MIN. B.R.I.S.: 75' FRONT
 30' SIDE
 60' REAR
 Total Area 36.2 Ac.



SKETCH PLAN
 TRIADELPHIA ESTATES
 HOWARD COUNTY, MD.
 SCALE: 1" = 200' MARCH 1984

PAUL K MILLER & ASSOC.
 LAND SURVEYING - PLANNING
 ENGINEERING
 100 OAK AVE.
 SEVERNA PARK, MD. 21146
 PHONE: 301-647-1322

H-9C13

B 1 **9197** SEQUENCE NO. (DP USE ONLY)
2-3 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

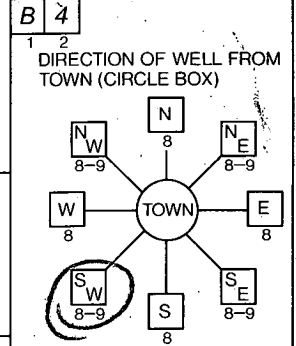
STATE OF MARYLAND
PERMIT TO DRILL WELL
please print or type

STATE PERMIT NUMBER
40-88-0910
70 fill in this form completely 79

Date Received (APA) **062789**
OWNER INFORMATION
8 **JACOBSON RANDY** 13
15 Last Name Owner First Name 34
36 **11906 BLUE FEB WAY** 55
Street or RFD
57 **COLUMBIA** 70 State 72 **MD21044** 76
Town Zip

B 3 LOCATION OF WELL
1 **HOWARD**
8 COUNTY
23 SUBDIVISION ~~TRINDELPHIA~~ **ESTATES**
SECTION 44 46 LOT 4 **WOODFIELD** 42
52 NEAREST TOWN
GLEMELG 71
MILES FROM TOWN (enter 0 if in town) **2** MI
73 76 77 78

DRILLER INFORMATION
George F. Easterday
Driller's Name
L. Franklin Easterday, Inc. 77 License No. 80
Firm Name
9265 Brown Church Rd., Mt. Airy, Md. 21771
Address
George F. Easterday 6/27/89
Signature Date



~~SHERBROOKE~~ LANE
NEAR WHAT ROAD
SHERBROOKE
NORTH N
WEST W 32 EAST E
SOUTH S
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
34 **180** 37
DISTANCE FROM ROAD
ENTER FT or MI **FT**
38 39

B 2 WELL INFORMATION
1 2 APPROX. PUMPING RATE (GAL. PER MIN.) **S**
8 12
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **500**
14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)
 HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
22 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)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
Howard
COUNTY NAME
A36664
COUNTY NO.
STATE SIGNATURE
DATE ISSUED **071889** INSERT S
43 48 CO SIGNATURE **Mark E. Ripkin** 11/8/90
EXP. DATE
NORTH GRID **516000** EAST GRID **0793000**
50 55 57 63

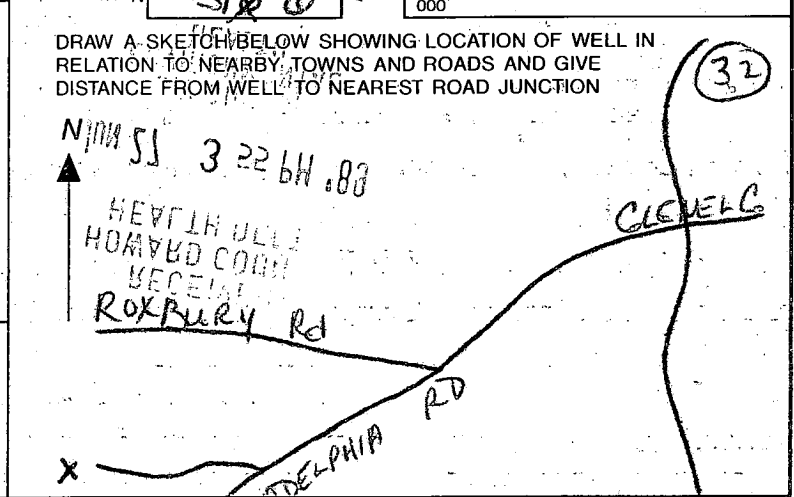
APPROXIMATE DEPTH OF WELL **200** FEET
24 28
APPROXIMATE DIAMETER OF WELL **6** NEAREST INCH

METHOD OF DRILLING (circle one)
BORED (or Augered) JETTED Jetted & DRIVEN
30 **AIR-ROTARY** AIR-PERCussion ROTARY (Hydraulic Rotary)
37 CABLE REVerse-ROTary DRive-POINT
other

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
E **7983**
N **5186**
000
000

8/15/89 9:45
Not grouted yet
Not finished yet
Well path
C.B.

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 DEEPEM AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52



Not to be filled in by driller (OEP USE ONLY)
APPROX. PERMIT NUMBER _____ GAP _____
54 63
FORCE **MR** WRITE INITIALS IN BOX PERMIT No. **40-88-0910**
67 68 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS

8-18-89
J. Jacobson

Review OK 8/31/89 CW

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 88-0910
Location of property (road) Sherbrooke La
Subdivision WOODFIELD Lot 4 Block _____ Plat _____ Sec. _____
Well Driller Easterday Owner R. Jacobson

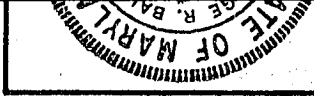
Depth of well 160 20 GPM
Distance of measuring point (M.P.) above ground 2 Feet
Static water level (S.W.L.) below M.P. 25 Feet

I. High rate pumping -- reservoir drawdown

Time pump started 8:30 Pumping rate 12 G.P.M. (MAX)
Total time OPEN to reach pumping water level 25 ft. below M.P.

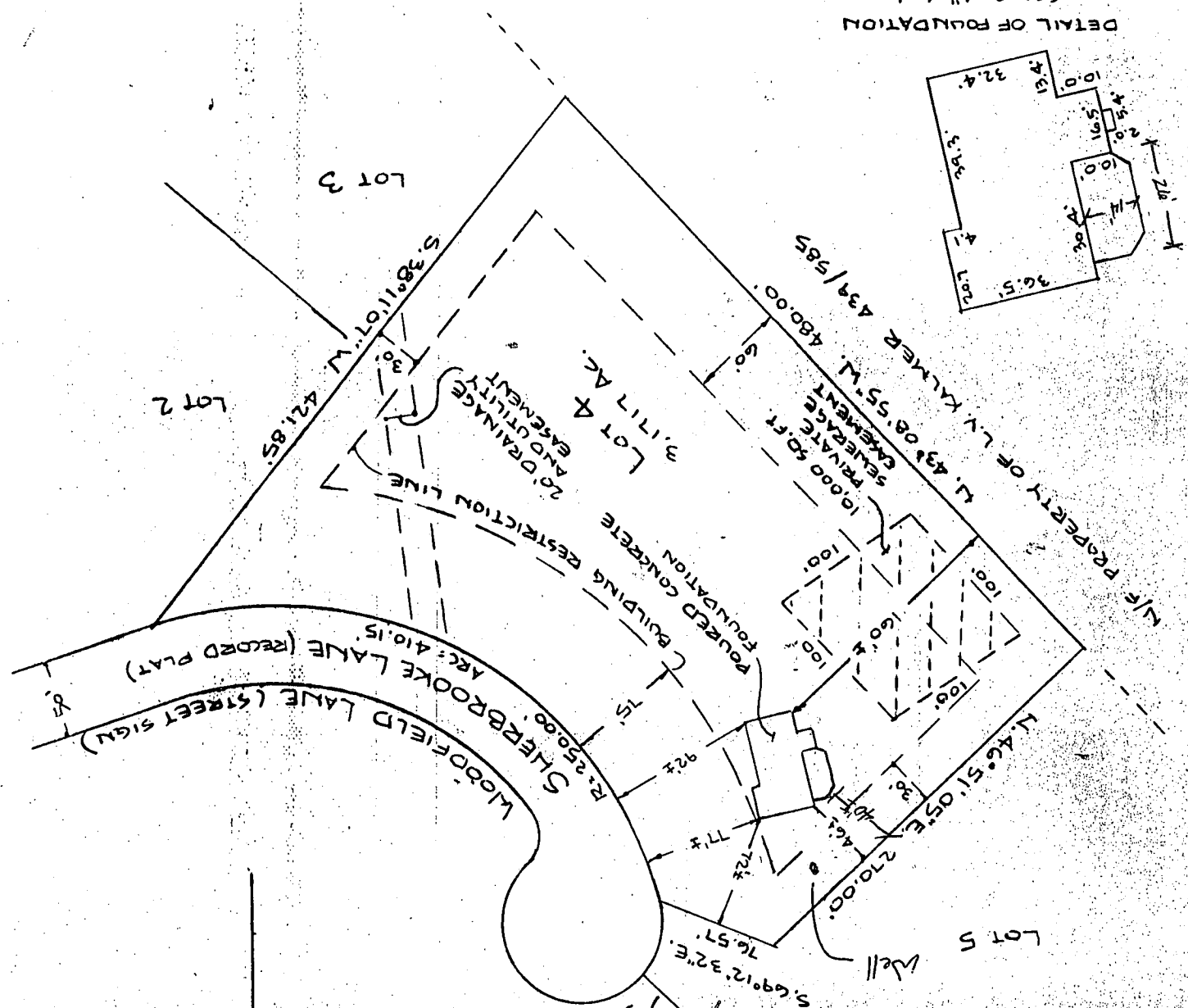
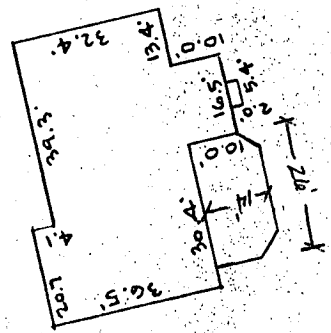
II. Recovery pump test data - observations to be recorded every 15 minutes

TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE time to fill 5 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
8:30	25 FEET	5 SECONDS	N.A	12 GALLONS
8:45	43 FEET	5 SECONDS		12 GALLONS
9:00	59 FEET	5 SECONDS		12 GALLONS
9:15	64 FEET	5 SECONDS		12 GALLONS
9:30	64 FEET	5 SECONDS		12 GALLONS
9:45	64 FEET	5 SECONDS		12 GALLONS
10:00	64 FEET	5 SECONDS		12 GALLONS
10:15	64 FEET	5 SECONDS		12 GALLONS
10:30	64 FEET	5 SECONDS		12 GALLONS
10:45	64 FEET	5 SECONDS		12 GALLONS
11:00	64 FEET	5 SECONDS		12 GALLONS
11:15	64 FEET	5 SECONDS		12 GALLONS
11:30	64 FEET	5 SECONDS		12 GALLONS
			<i>A. Rayhawk Jr.</i>	
			08-18-89	
			Pump rate at 120 feet	



THIS IS TO CERTIFY THAT I HAVE SURVEYED THE PROPERTY SHOWN HEREON FOR THE PURPOSE OF LOCATING THE IMPROVEMENTS ON SAID PROPERTY AND THAT THE IMPROVEMENTS ARE LOCATED AS SHOWN.

DETAIL OF FOUNDATION
SCALE - 1" = 40'



6/16/93
PLANS OK TO SIGN
BP49243
B.J.H.

NOTE: THIS PLAT IS NOT INTENDED FOR USE IN ESTABLISHING PROPERTY LINES AND DOES NOT CONSTITUTE A BOUNDARY SURVEY.