

11/24/89 LATS

05-902255

# PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY  
BUREAU OF ENVIRONMENTAL HEALTH  
461-9933

P 45285

A 35450

DISTRICT 5th

DATE 11/28/89

DATE SYSTEM APPROVED 11/24/89

INSPECTOR RH

INDEXED

Jack Fyock

IS PERMITTED TO INSTALL X ALTER

ADDRESS

PHONE 988-9270

SUBDIVISION

Waterford Section 2

ROAD

13300 Wicklow Place  
13335 Brighton Dam Rd

LOT

1

PROPERTY OWNER

Charles Spalding

ADDRESS

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

GARBAGE GRINDER? YES NO X

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

TRENCHES - 200 sq. ft. per bedroom. Trench to be 3 feet wide. Inlet 3.5 feet below original grade. Bottom maximum depth 5 feet below original grade. Effective area begins at 3.5 feet below original grade. 1.5 feet of stone below distribution pipe.

LOCATION - Place the distribution box 65 feet down the right (340') lot line and 185 feet off the same lot line as seen when facing the lot from Brighton Dam Road. Run trenches on contour toward the front lot line.

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

PLANS APPROVED BY

Sid Abel

DATE

4/01/87

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.

HD-260

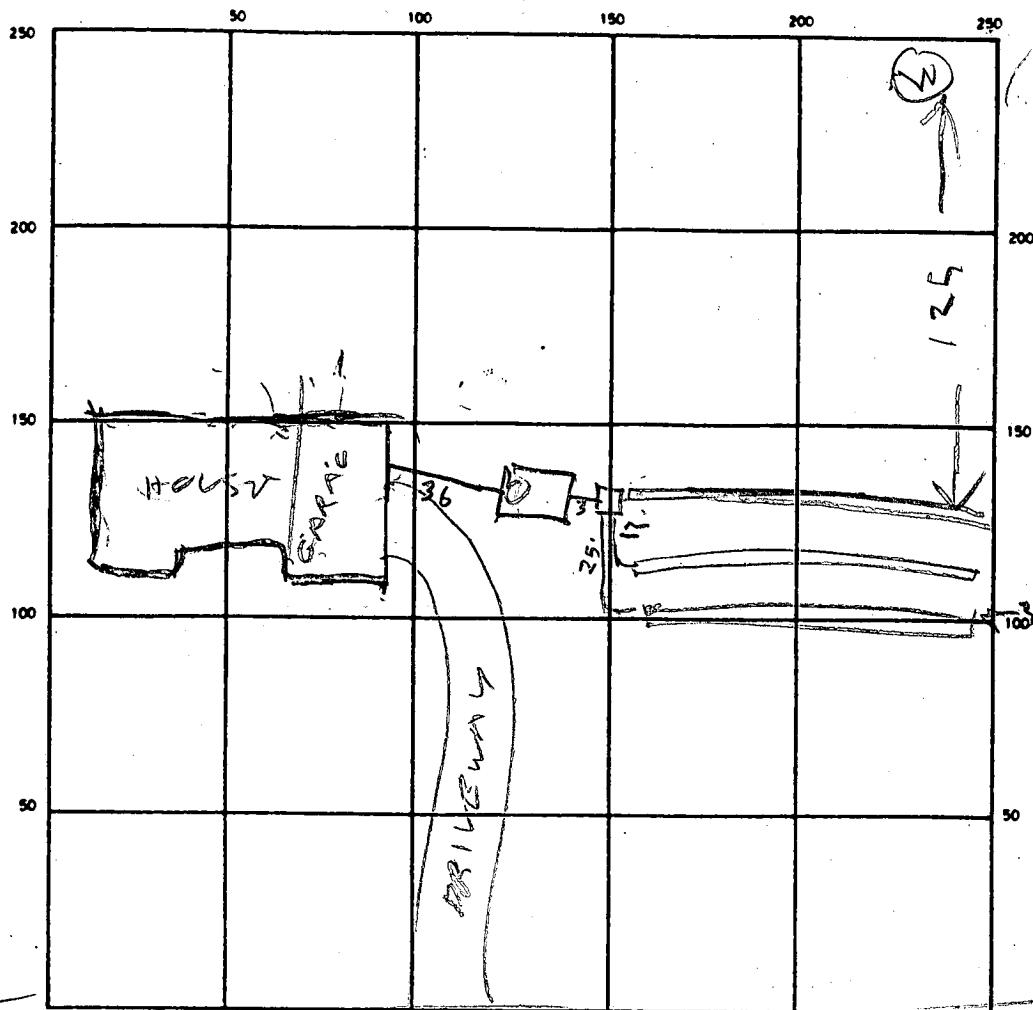
BIDD. PERMIT SIGNED

AND RETURNED 6/13/2000

B00124792

SUN ROOM/DECK

A 35450



INDICATE NORTH — NAME ADJOINING ROADWAY AS BASE LINE

WICKLOW PLACE

SEPTIC TANK LEVEL OK 125' CLEANOUTS OK

DISTRIBUTION BOX LEVEL \_\_\_\_\_

DRAIN FIELD/TILE FIELD DEPTH 15 FT. TRENCH WIDTH 3 FT. INLET DEPTH \_\_\_\_\_ FT.

EFFECTIVE GRAVEL DEPTH 4.5 4.5 4.5 FT. TOTAL LENGTH 90 90 90 FT.

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 9,10 SQ. FT.

DRYWELL INSIDE DIAMETER \_\_\_\_\_ FT. EFFECTIVE DEPTH BELOW INLET \_\_\_\_\_ FT.

ABSORBENT AREA \_\_\_\_\_ SQ. FT.

REMARKS 11/24/89 - LOCATION OK TRENCHES OK

DATE SYSTEM APPROVED

11/24/89

INSPECTOR

Raymond Hodge

# APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SERVICES

P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 992-2330

35450  
A 34908

P \_\_\_\_\_

DISTRICT 5

DATE 1-25-85

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.

Charles Spading  
953-1186

PROPERTY OWNER Developer - Highland Development Corp.

ADDRESS 13690 Nichols Drive PHONE 531-5539

PROPERTY LOCATION: WATERFORD

SUBDIVISION HUNTING MANOR ESTATES LOT NO. 1

ROAD AND DESCRIPTION 13335 Brighton Dam Rd.

SIZE OF LOT 3 Acres TYPE BLDG. Single Family

(NUMBER OF BEDROOMS)

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 Lichy Abel FOR Shallow tile fields DATE 4-1-87

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING 5-6-85 PERC. SATISFACTORY; HOLD FOR Certified Subdivision PLAT. Satisf

Shallow system only

BLDG. PERMIT SIGNED  
AND RETURNED 11/29/88

BP 22729  
SAC

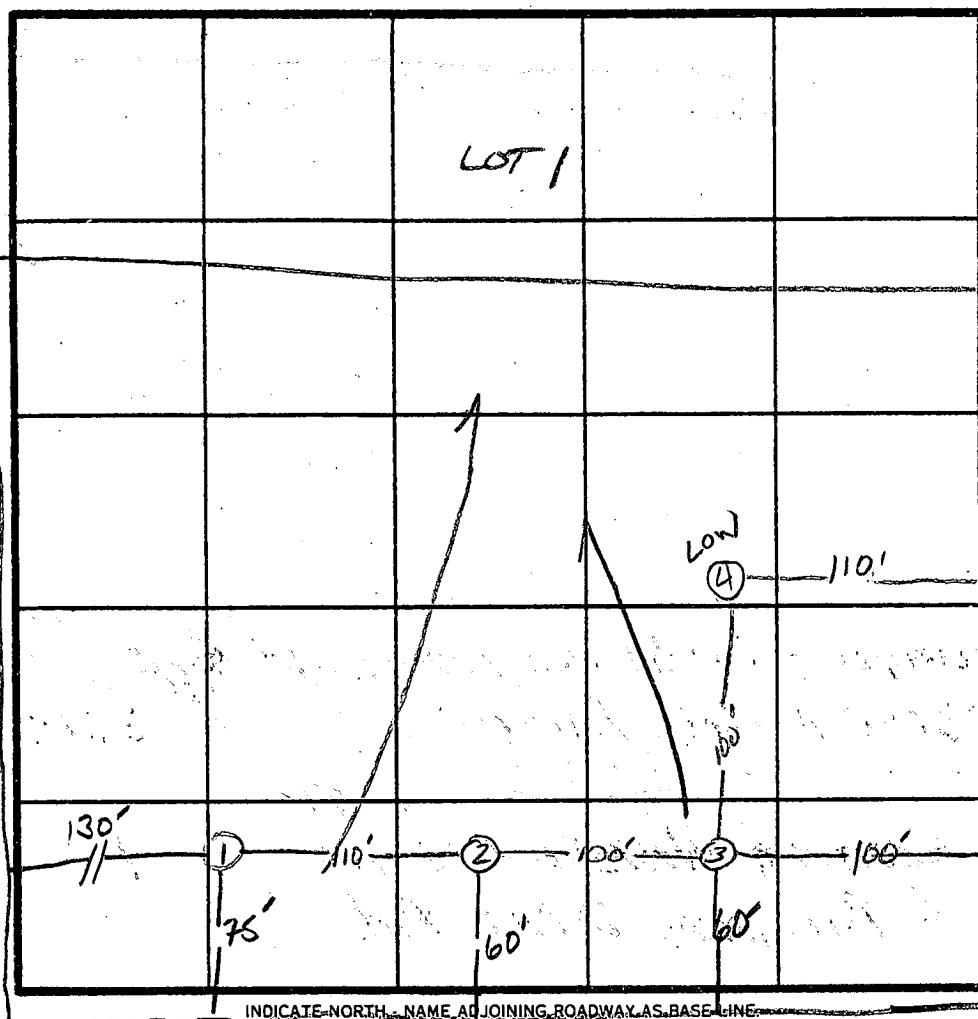
# THIS IS NOT A PERMIT

LOT 1

0"	AI-3
4"	BROWN CLAY LOAM (10%) SAPROLITE
4'	BROWN Silty SAND 10-20% SAPROLITE
2'	AI-3
02'	CLAY & LARGE STONES
4'	BROWN Silty SAND <10% SAPROLITE

(5)

A1-3
Yellow BROWN CLAY LOAM 100% SAPROLITE
TAN Grey Silty SAND 100% SAPROLITE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

Brighton Dam Rd.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
5/6/85	1V	WATER 9' CLAY 5'					
	2V	WATER AT 10' CLAY TO 4'					
	S	4'	2:16	2:17	2:17	2:20	3min
	3V	12' ROCK 2-4' GOOD UNIFORM SOIL BELOW 4' → 12'					
	S	4'	2:21	2:28	2:28	2:44	16min
	4V	12' UNIFORM SOIL STRUCTURE BELOW 4'					
	S	4'	2:37	2:45	2:45	3:05	20min
	5V	12'					
	S	4'	2:55	2:57	2:57	3:01	4min
	6V	12' UNIFORM SOIL STRUCTURE BELOW 4'					

⑥  
A1-3  
BROWN CLAY  
CONTAIN 10%  
SAPROLITE  
BROWN SAND  
SILT 10%  
SAPROLITE

7 PERC  
11 min  
INLET 3.5  
BOTTOM 5

REMARKS

SHALLON SYS. ONLY.

TYPE OF SOIL

TESTED BY

SAbe

TERRY, Les, Downey  
ALSO PRESENT

### ALSO PRESENT

<b>B 1</b> <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">8357</div>	SEQUENCE NO. (OEP USE ONLY)	<b>STATE OF MARYLAND</b> <b>PERMIT TO DRILL WELL</b> please print or type	OEP PERMIT NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">40-81-2373</div>
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)		fill in this form completely	
<b>Date Received</b> <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">092987</div>		<b>B 3</b> <b>LOCATION OF WELL</b> <span style="float: right;">R-40174</span> <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">Howard</div>	
<b>OWNER INFORMATION</b> <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">Spalding, Maureen</div>		8 COUNTY <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">WATERFORD</div>	
15 Last Name <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">9451</div>		23 SUBDIVISION <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">Highland</div>	
Owner <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">Ellisworth</div>		SECTION <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">44</div>	
First Name <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">Ct</div>		LOT <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">1</div>	
Street or RFD <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">Fulton</div>		52 NEAREST TOWN <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">Highland</div>	
Town <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">MD20759</div>		MILES FROM TOWN (enter 0 if in town) <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">3</div>	
<b>DRILLER INFORMATION</b> Driller's Name <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">George F. Easterday</div>		77 License No. 80 <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">40</div>	
Firm Name <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">L.F. Easterday, INC</div>		<b>B 4</b> DIRECTION OF WELL FROM TOWN (CIRCLE BOX) 	
Address <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">9265 Brown Ch. Rd., Mt. Airy, MD .21771</div>		11 NEAR WHAT ROAD <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">Wickham Place</div>	
Signature <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">George F. Easterday</div>		ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">W</div>	
Date <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">9-26-87</div>		34 DISTANCE FROM ROAD <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">300</div>	
<b>B 2</b> <b>WELL INFORMATION</b>		ENTER FT or MI <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">Ft</div>	
APPROX. PUMPING RATE (GAL. PER MIN.) <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">5</div>		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL	
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">500</div>		COUNTY NAME <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">Howard</div>	
<b>USE FOR WATER (CIRCLE APPROPRIATE BOX)</b>		COUNTY NO. <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">A-35450</div>	
<input checked="" type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)		OEP SIGNATURE <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">George F. Easterday</div>	
<input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)		DATE ISSUED <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">092987</div>	
<input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)		CO SIGNATURE <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">Schwartz</div>	
<input type="checkbox"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)		EXP. DATE <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">03-28-88</div>	
<input type="checkbox"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		NORTH GRID <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">498000</div>	
APPROXIMATE DEPTH OF WELL <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">300</div> FEET		EAST GRID <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">0807000</div>	
APPROXIMATE DIAMETER OF WELL <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">6</div> INCH		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">807</div>	
<b>METHOD OF DRILLING (circle one)</b>		SOURCES OF DRILLING WATER 1. Well	
<input checked="" type="radio"/> BORED (or Augered)		2.	
<input type="radio"/> JETTED		3.	
<input type="radio"/> JETTED & DRIVEN		WRITE THE BOX NUMBER FROM THE MAP HERE <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">807</div>	
<input type="radio"/> AIR-ROTARY		other	
<input type="radio"/> AIR-PERCussion		136ABS X	
<input type="radio"/> ROTARY (Hydraulic Rotary)		CROUT Done Before annual Location	
<input type="radio"/> REVERSE-ROTARY		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION	
<input type="radio"/> DRIVE-POINT			
<b>REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)</b>		PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE)	
<input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL		<div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">40-81-2373</div>	
<input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED		SPECIAL CONDITIONS	
<input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY		HEALTH	
<input type="checkbox"/> THIS WELL WILL DEEPEIN AN EXISTING WELL		HEALTH	

C1 1979  
SEQUENCE NO. (OEP USE ONLY)  
1 2 3 4 5 6  
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND  
WELL COMPLETION REPORT  
FILL IN THIS FORM COMPLETELY  
PLEASE PRINT OR TYPE

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

COUNTY NUMBER A-35450

DATE Received  
8 13

DATE WELL COMPLETED  
11 30 87

Depth of Well  
22 240 26  
(TO NEAREST FOOT)

PERMIT NO.  
FROM "PERMIT TO DRILL WELL"  
40-81-2373

OWNER SPALDING MURKIN  
last name first name  
STREET OR RFD WICHLOW PLACE TOWN CLARKSVILLE  
SUBDIVISION WARRFORD SECTION 2 LOT 1

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	
Clay	2 4	
Shale x	4 10	
Mica	10 20	
Sand Stone	20 25	
Mica	25 60	
Sand Stone	60 62	✓
Mica	62 200	
Flint	200 205	✓
Mica	205 210	

GROUTING RECORD  
WELL HAS BEEN GROUTED (Circle Appropriate Box) YES ☒ Y NO ☐ N  
TYPE OF GROUTING MATERIAL  
CEMENT ☒ CM BENTONITE CLAY ☐ BC  
NO. OF BAGS 13 NO. OF POUNDS 1300  
GALLONS OF WATER 65  
DEPTH OF GROUT SEAL (to nearest foot)  
from 0 ft. to 29 ft.  
(enter 0 if from surface)

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

MAIN CASING TYPE  
Nominal diameter top (main) casing (nearest inch) 6  
Total depth of main casing (nearest foot) 32

OTHER CASING (if used)  
diameter inch depth (feet) from to

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

DEPTH (nearest ft.)  
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

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. 40  
DRILLERS SIGNATURE  
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

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

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

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

PUMPING TEST  
HOURS PUMPED (nearest hour) 3  
PUMPING RATE (gal. per min. to nearest gal.) 12  
METHOD USED TO MEASURE PUMPING RATE Bucket  
WATER LEVEL (distance from land surface) BEFORE PUMPING 31  
WHEN PUMPING 54  
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) 31  
PUMP HORSE POWER 37  
PUMP COLUMN LENGTH (nearest ft.) 43  
CASING HEIGHT (circle appropriate box and enter casing height) + above - below LAND SURFACE 2 (nearest foot)

LOCATION OF WELL ON LOT  
SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)

well 50'  
300'  
Wichlow Place  
Right of Way

FIELD DATA SHEET  
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-2373  
Location of property (road) WICHON PLACE  
Subdivision WATERGARD Lot 1 Block      Plat      Sec. 2  
Well Driller G. ESTERDAY Owner SLANDY

Depth of well 240 20 GPM  
Distance of measuring point (M.P.) above ground 1 ft  
Static water level (S.W.L.) below M.P. 31 ft

I. High rate pumping -- reservoir drawdown

Time pump started 11:15 Pumping rate 12 gpm  
Total time 15 min. to reach pumping water level 40' ft. below M.P.

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

[illegible]

11/29/89  
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 # 45104  
Date 10/23/89

Name of Installer J. Joseph Gartland, Inc.

Telephone 875-2400

License Number 1713

Certified Well Pump Installer \_\_\_\_\_ Well Driller \_\_\_\_\_ Registered Plumber X

Name of Property Owner Charles Spaulding.

Telephone 474-7229

Subdivision Waterford. Lot # 1

Well Tag # HD - 01 - 2373

Site Address 13335 Brighten Dam Rd.

Pump

1. Type

- a. Deep well jet \_\_\_\_\_  
b. Shallow well jet \_\_\_\_\_  
c. Submersible X

2. Make Goulds

3. Model # 10EJ05422

4. Capacity 10 GPM

5. Pump exceeds well capacity Yes \_\_\_\_\_ No X

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 \_\_\_\_\_

Motor

1. Horsepower 1/2 h.p.

2. RPM \_\_\_\_\_

3. Voltage \_\_\_\_\_

a. 110 \_\_\_\_\_

b. 220 X

Pitless Adapter

1. Make Harvard

2. Model # PT-800

3. Depth \_\_\_\_\_

Tank

1. Capacity 42 gal.

2. Pressure relief valve? 75psi.

Piping

1. Type Plastic

2. Size 1"

3. NSF and/or BOCA Code approved yes.

4. Depth of supply line 42"

Well data

1. Depth \_\_\_\_\_ ft.

2. Yield \_\_\_\_\_ GPM

3. Static water level \_\_\_\_\_ ft.

4. Will water supply be disinfected by installer? \_\_\_\_\_

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).

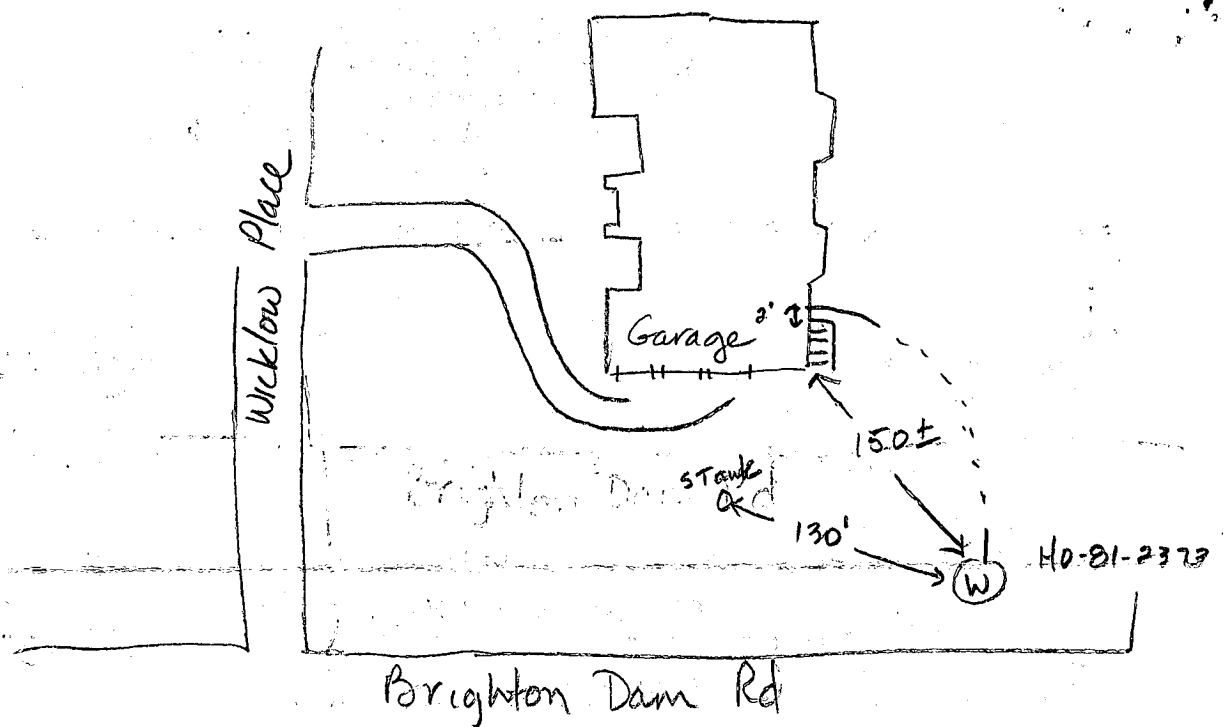
All information given above is true to the best of my knowledge.

Signature of Applicant: \_\_\_\_\_

Date: 10/17/89

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





11-29-89

Pitless adaptor at 48 inches below grade. Ground line connected. Well line covered. House connection ok. Pump tank installed with a relief valve. JENodeau

RECEIVED  
HOWARD COUNTY  
HEALTH DEPT.  
JAN 19 10 56 AM '89  
DIVISION OF  
ENVIRONMENTAL  
HEALTH

10' REVERTIBLE SLOPE EASEMENT

WICKLOW PLACE

WICKLOW AVENUE

BUILDING RESTRICTION LINE

PROPOSED DRIVEWAY

SEWAGE DISPOSAL EASEMENT (10,000 SF)

TYPICAL TRENCH

DISTRIBUTION BOX

SEPTIC TANK

EX. WELL EL. 526.50 79'

214.90'

214.97'

214.98'

214.99'

215.00'

215.01'

215.02'

215.03'

215.04'

215.05'

215.06'

215.07'

215.08'

215.09'

215.10'

215.11'

215.12'

215.13'

215.14'

215.15'

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215.31'

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215.33'

215.34'

215.35'

215.36'

215.37'

215.38'

215.39'

215.40'

215.41'

215.42'

215.43'

215.44'

215.45'

215.46'

215.47'

215.48'

215.49'

215.50'

215.51'

215.52'

215.53'

215.54'

215.55'

215.56'

215.57'

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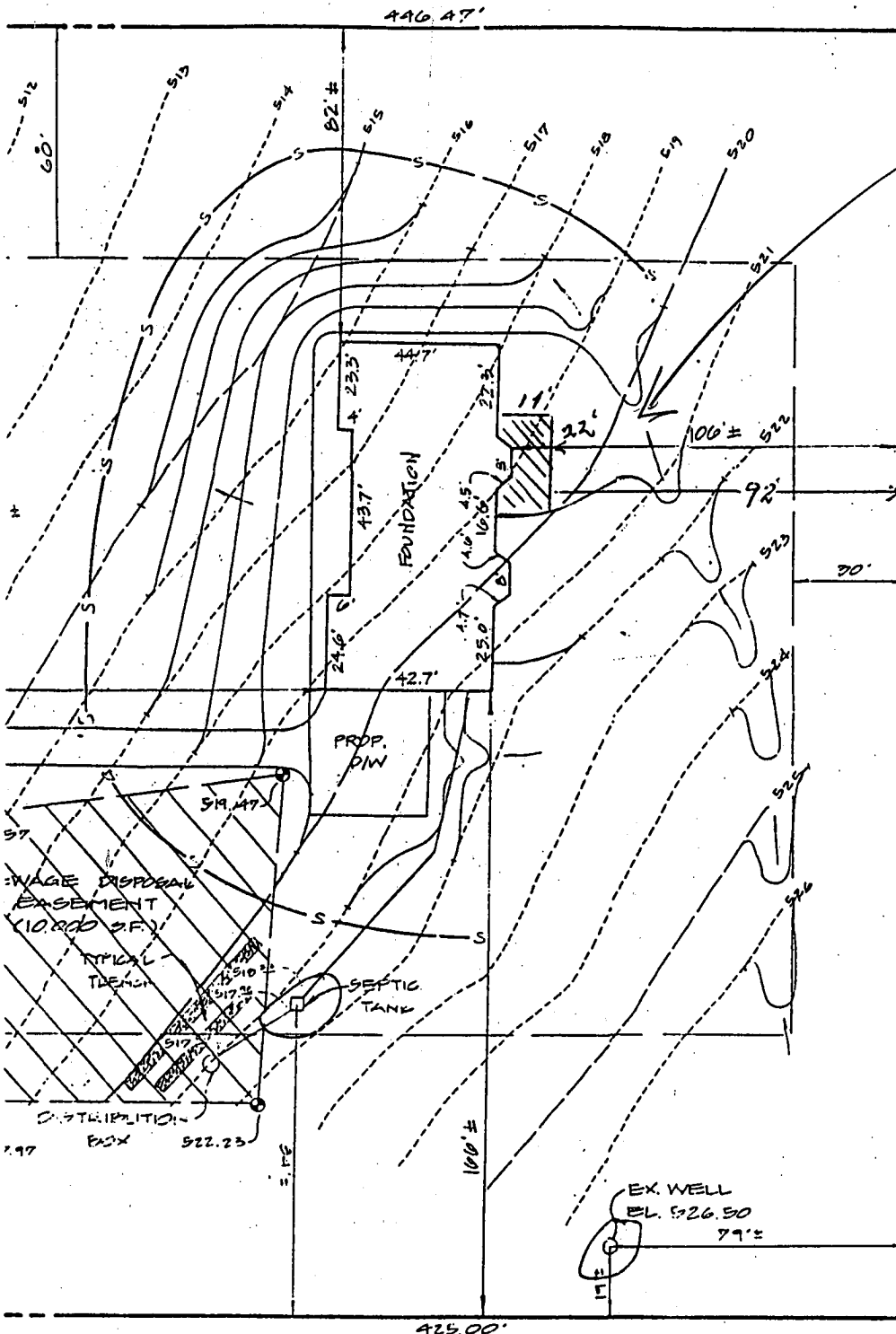
219.04'

SITE PLAN  
 LOT #1 SECTION 2  
 "WATERFORD"  
 PLAT CMP 6880  
 5<sup>TH</sup> ELEC. DIST. HOWARD CO., MD.  
 SCALE: 1"=30' NOV. 13, 1988

S — S - SILT FENCE  
S.C.E. - STABILIZED CONSTRUCTION ENTRANCE

11/29/88  
elevation of  
S. Hill

Bldg. Permit Signed  
AND RETURNED 12/1 *JS*



NO OBJ.  
TO  
SUNROOM  
MR 6/13/00

1st FLOOR EL. - 521  
BSMT. FL. - 519  
INV. EL. OUT - 521  
OF HOUSE

SEPTIC TANK  
EXIST. EL. - 521.1  
INVERT IN - 518.2  
INVERT OUT - 517.9

DISTRIBUTION BOX  
EXIST. EL. - 521.5  
INVERT IN - 517.5

NOTE: THE CONTRACTOR T.  
PROVIDE POSITIVE  
DRAINAGE AWAY FROM  
FOUNDATION AT ALL  
TIMES.

THE BASEMENT FOR  
HOUSE CANNOT BE  
SEWERED BY GRA

# 8617  
4/2/00

APRIL 2 1989  
SERIES OF MD  
MORTGAGE DEPARTMENT

AM ROAD

FENCE  
USED CONSULTATION ENTRANCE

FOUNDATION CERTIFICATION  
LOT # 1 SECTION 2  
"WATERFORD"  
PLAT CMP 0000  
5th ELECT. DIST. HOWARD CO., MD.  
SCALE: 1"=30' APRIL 10, 1989

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THIS INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE HERETO; (4) THAT HE/SHE WILL PERFORM ANY WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSES OF INSPECTING THIS WORK, EXEMPTED AND POSTING NOTICES.

**Print Name**

Date \_\_\_\_\_

**- FOR OFFICE USE ONLY -**

**Gold: SHA**

Rev. 10/15/98

Rev. 10/15/98