12.8.80 m

PERMIT

P 43/48
A 33331

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH. DISTRICT 3rd

TRICT 3rd

HOWARD COUNTY

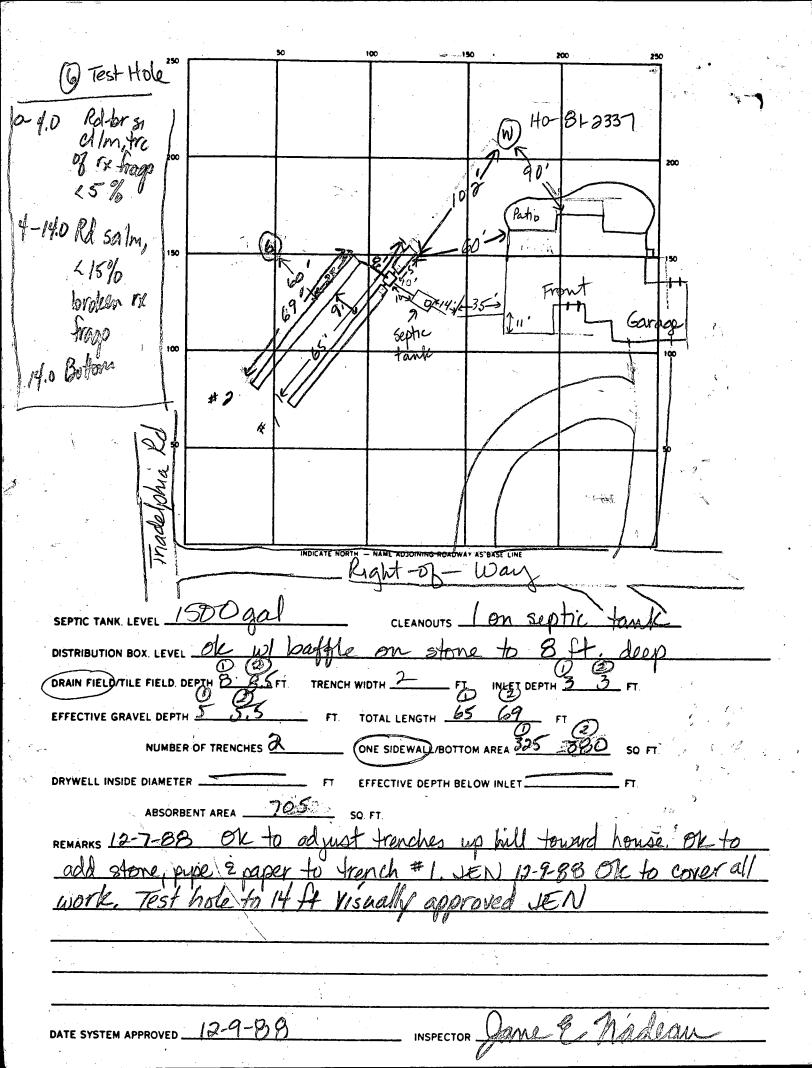
BUREAU OF ENVIRONMENTAL HEALTH 461-9933 INDEXED 05

DATE 19/1/99

DATE SYSTEM APPROVED 12-9-88

C. C. Cissel IS PERMITTED TO INSTALL X ALTER	
ADDRESS 14079 Brighton Dam Road, Clarksville, Maryland 21020NE 854-2006	
SUBDIVISIONTriadelphia WoodsROAD 12430 Triadelphia Road LOTParcel 3 - Lo	- t 7
PROPERTY OWNER Judith Zura	
ADDRESS	
IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.	
GARBAGE GRINDER? YES X NO \ \frac{5 \left(\text{132} \ ft \)	rench
SEPTIC TANK CAPACITY 1500 GALLONS NUMBER OF BEDROOMS 3	
	EN
TRENCHES - 220 sq. ft. per bedroom with garbage disposal. Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth feet below original grade.	
DELECTIVE RICE DEUTIS AT 3 TRACE halow animinal	inal
below distribution pipe.	tone
LOCATION - Start first trench 175 feet from the front lot line and 90 feet from the lot line as seen when facing the property for the lot line as seen when facing the property for the line and 90 feet from the lot line as seen when facing the property for the line and 90 feet from the lot line as seen when facing the property for the lot line and 90 feet from the	
	af+
	eft ches
along contour toward left or right lot line	ches
along contour toward left or right lot line. NOTE - No trench to exceed 100 feet in length. Provide 6" - 2" Along the property from Triadelphia Road. Run trench to exceed 100 feet in length.	ches
along contour toward left or right 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. or cw	ches -
along contour toward left or right 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. or of the second septic tank.	ches -
along contour toward left or right 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. or contact the septiment of the septiment	ches -
along contour toward left or right 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. OF CW /2/8/88 OK TO MOUE SOPTIC SYSTEM Closer to //www. PLANS APPROVED BY	ches -
along contour toward left or right 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. OF COSER TO HOUSE MAINTAIN S PLANS APPROVED BY	ches -
along contour toward left or right 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. OF CW 2/8/88 OK TO MOVE Septic System Closer to //ouse maintain S PLANS APPROVED BY	ches -
along contour toward left or right 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. OF CO. 12/8/88 OK TO MOUE SPITC SYSTEM Closer to //ouse maintain S PLANS APPROVED BY	ches -
along contour toward left or right 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. OF COSER TO HOUSE MAINTHIN S PLANS APPROVED BY	ches -
along contour toward left or right 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. O* Color to Mainthin S PLANS APPROVED BY	ches -
along contour toward left or right 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. Of Co. Williams PLANS APPROVED BY	ches -
along contour toward left or right 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. OF GW /2/8/88 OK TO MOUE Septic System Closer to //ouse majoral system Plans approved by	ches -
along contour toward left or right 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. Of Co. Williams PLANS APPROVED BY	ches -

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT



TRIADEL PHIA WOODS

A	3	33	3	1	

SUBDIVISTON:

LOT NUMBER:

DRY WELL OR DRY WELL AND TRENCH

		sq. ft./bedroom
-	Septic Tank	Minimum Total Square Feet
3 bedroom 1	1000 gallon	
4 bedroom 1	1250 gallon	
5 bedroom 1	1500 gallon	
Inlet feet b	below original grade.	
Bottom maximum depth _	feet below ori	ginal grade.
Effective area begins a	at feet below	original grade.
and leave a 5 to exceed 100	5-foot earth buffer betw	t area, run the trench on level ground een dry well and trench. No trench is nch inlet to be same as dry well, with ution pipe.
	TRENCHES	
		sq. ft./bedroom
Trench to be 2	wide.	· · · · · · · · · · · · · · · · · · ·
Inlet3 feet b	_	Byes: el
	7 feet below ori	ginal grade.
Effective area begins a	t 3 feet below te below distribution pi	original grade.
NOTE: (1) No trench (2) If more th (3) Trenches t (4) Call for i (5) Provide 6 tank and d (6) If a gard	to exceed 100 feet in 1 an one trench used, a do be installed on level anspection of trench beform - 8" diameter cleanous drywell.	ength. istribution box is required. ground. ore gravel is installed. ut and cap to grade or above on septic , increase septic tank capacity by 50%
LOCATION: STALT	- FIRST TABNOH	175' From THE
		Y THE LEFT LUT LINE
as seen whe	ed Facing the Profes	TOUR D LOTTA LET LIVE,
HD-191		

	ODEL THEN DY		₹ £ \$		_ ` . ` .
1-1-0-t		PI	CAT		
211	1330	I			* · · · · · · · · · · · · · · · · · · ·
wi	11/1	ع مرورد الله الله SEWAGE D	ISPOSAL TESTING		A <u>## 33331</u>
101	STATE		ENT OF HEALTH AND ME	NTAL HYGIENE	Р
9	HOWARD COUNTY HEALTH DEP	· · · · · · · · · · · · · · · · · · ·	and the second of the second o	DISTRICT _	3rd
185	P. O. BOX 476 ELLICOTT CITY, MARYLA TELEPHONE: 992-2330			DATE _	11/28/83
20 %	1 1 TELEPHONE: 992-2330	· • • • • • • • • • • • • • • • • • • •			·
0 3/8	5				
					•
то					•
•	ELLICOTT CITY, MARYLAND I. HEREBY, APPLY FOR THE NECESSARY	TEST IN ORDER TO CONSTRUCT	(OR RECONSTRUCT) A SEWAGE I	DISPOSAL SYSTEM.	
	Carroll prop	erty Tunin	+ ZURA		
PR	OPERTY OWNER	500111	, 20141		Abramson
	ADDRESS			PHONE 730	-7733
PR	ROPERTY LOCATION:		·		
	Triadelphia Woo	ods		TNO (Parcel 3)	- Lot 7
SU	12.430		LO	T NO. 1	
RC	DAD AND DESCRIPTIONTriadely	ohia Road		N.	
ا سا≃سور		and to the same	and the second s	· · · · · · · · · · · · · · · · · · ·	
	3 acres plus		TYPE I	3 or 4 bed	rooms
· Si.	ZE OF LOT		·		OF BEDROOMS)
т	HE SYSTEM INSTALLED UNDER THIS AP	PLICATION IS ACCEPTABLE (ONLY UNTIL PUBLIC FACILITIE	ES RECOME AVAILABLE.	I FULLY UNDERSTAND T
					. ,
F	EE CONNECTED WITH THE FILING OF TI	HIS PERC TEST APPLICATION	IS NON-REFUNDABLE UNDE	R ANY CIRCUMSTANCES	I ALSO AGREE TO COMP
W	VITH ALL M.O.S.H.A. REQUIREMENTS IN	TESTING THIS LOT/S			ramson
			(SIGNAT	URE OF APPLICANT)	
AF	PPROVED BY Soly ally		FOR Dup trend	date _	8-25-88
RF	EJECTED BY		FOR	DATE _	· · · · · · · · · · · · · · · · · · ·
					Sales in the second
Н	OLD PENDING FURTHER TESTS	1. 14. 1	DED - CIV	DATE _	
RE	EASONS FOR REJECTION OR HOLDING	2/12/24 0	TIKE UR	HOLD LE	186
	CERTIFIED	BULBS A	b	- BI DG PERMIT	SIGNED
-15 m				AND RETURNED	~ ~ ~ · · · · · · · · · · · · · · · · ·
-					BP 20882

THIS IS NOT A PERMIT

SOIL PROFILE

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I				PRE-	WET	TEST -	1" DROP	
	DATE	TEST NO.	DEPTH	START	STOP	START		TIME
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REMARKS				e ·
TYPE OF SOIL				
	ē	•		
TESTED BY		<u> </u>	ALSO PRESENT	

EH-12-1079

# APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

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P		

HOWARD COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH SERVICES

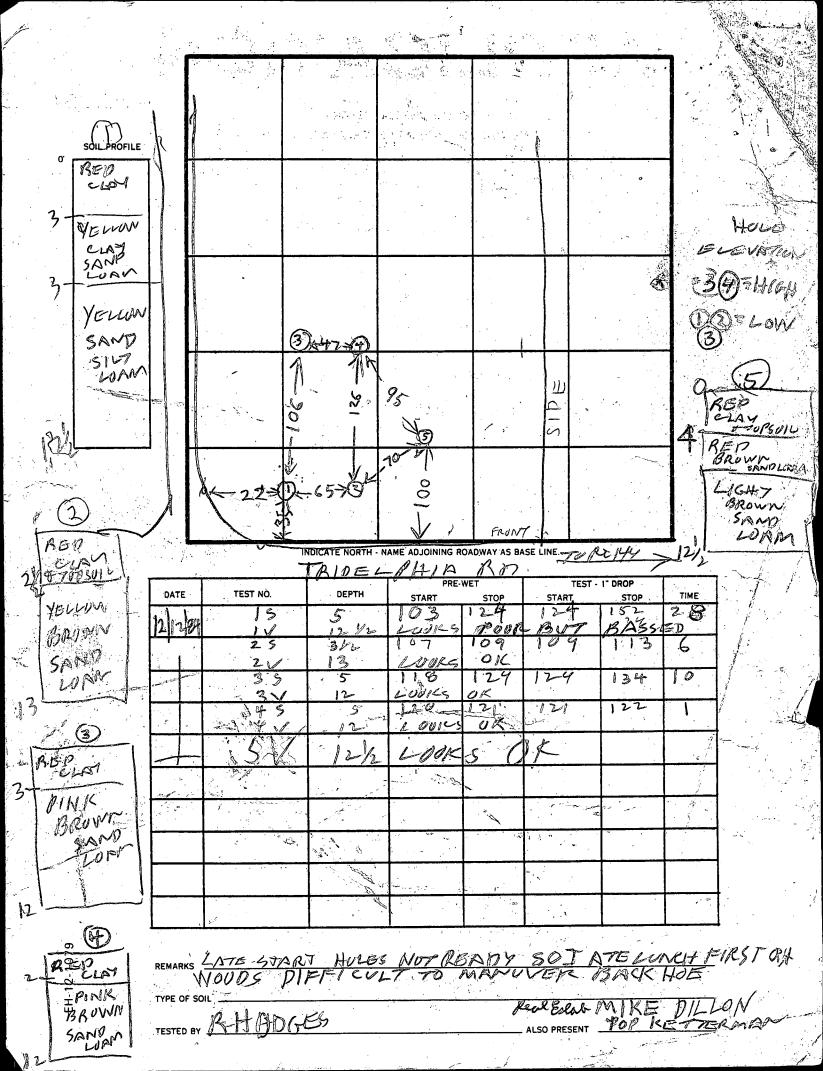
P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043

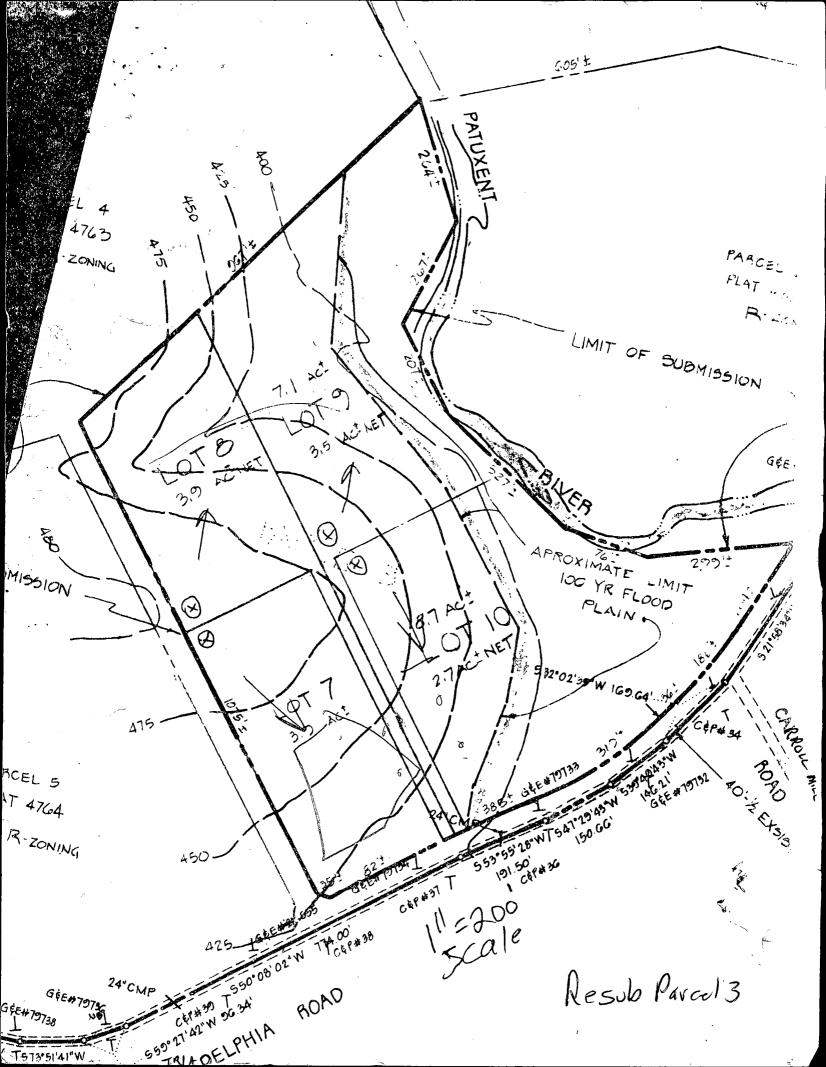
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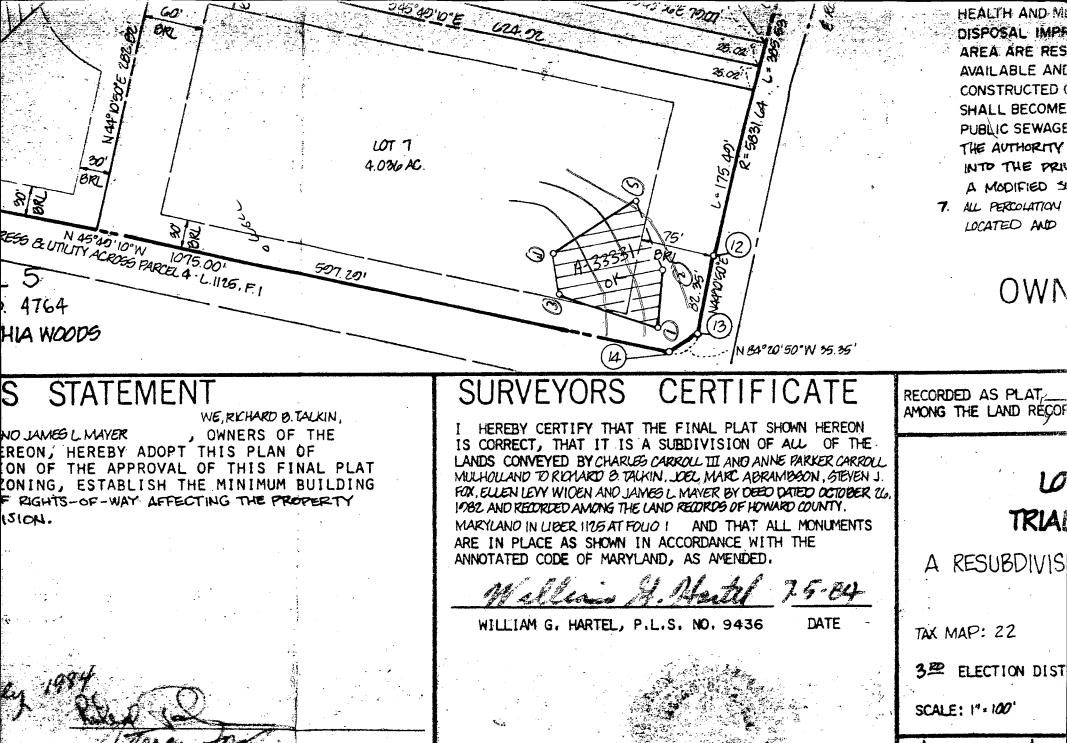
DATE 11/28/83

ROPERTY OWNER _	Carroll	property	<u> </u>		<u> </u>	,		ma Tad	n & Abram	
ADDRESS			<del></del>				PHONE		730-7733	son
ROPERTY LOCATION:										
UBDIVISION $_{}^{T_1}$	riadelphia	a Woods					LOT NO.	Parcel	3) - Lot	7
OAD AND DESCRIPTION	onTria	adelphia	Road							
<i>(</i> -										
ZE OF LOT	3 acres p	plus				TYP	E BLDG.	3 or 4	bedrooms	
				- <del></del>				(NU	MBER OF BEDE	ROOMS)
			•						. •	
HE SYSTEM INSTA	ALLED UNDER T	HIS APPLICAT	ION IS ACC	EPTABLE ONI	Y UNTIL PU	JBLIC FACILI	TIES BECC	OME AVAILA	BLE. I FULLY UI	NDERSTAND '
HE SYSTEM INSTA										
EE CONNECTED V	VITH THE FILING	G OF THIS PER	C TEST AP	PLICATION IS	NON-REFU	NDABLE UNI	DER ANY C	CIRCUMSTAN	ICES. I ALSO AG	
EE CONNECTED V	VITH THE FILING	G OF THIS PER	C TEST AP	PLICATION IS	NON-REFU	NDABLE UNI	DERANYO	CIRCUMSTAN	ICES. I ALSO AG	
EE CONNECTED V	VITH THE FILING	G OF THIS PER	C TEST AP	PLICATION IS OT. <u>/s/</u>	NON-REFUI	NDABLE UNI	DERANYO	CIRCUMSTAN Kin and APPLICAN	ICES I ALSO AG Abramson	
EE CONNECTED V	VITH THE FILING	G OF THIS PER	C TEST AP	PLICATION IS OT. <u>/s/</u>	NON-REFUI	NDABLE UNI	DERANYO	CIRCUMSTAN	ICES I ALSO AG Abramson	
EE CONNECTED V	VITH THE FILING	G OF THIS PER	C TEST AP	PLICATION IS OT. <u>/s/</u>	NON-REFUI	NDABLE UNI	DER ANY C Pr Tall	CIRCUMSTAN Kin and APPLICAN	Abramson Ti	
EE CONNECTED V	VITH THE FILING	G OF THIS PER	C TEST AP	PLICATION IS OT FO	NON-REFUI	NDABLE UNI	DER ANY C DER TALL ATURE OF	CIRCUMSTAN Kin and APPLICAN	Abramson T) TE	

## THIS IS NOT A PERMIT







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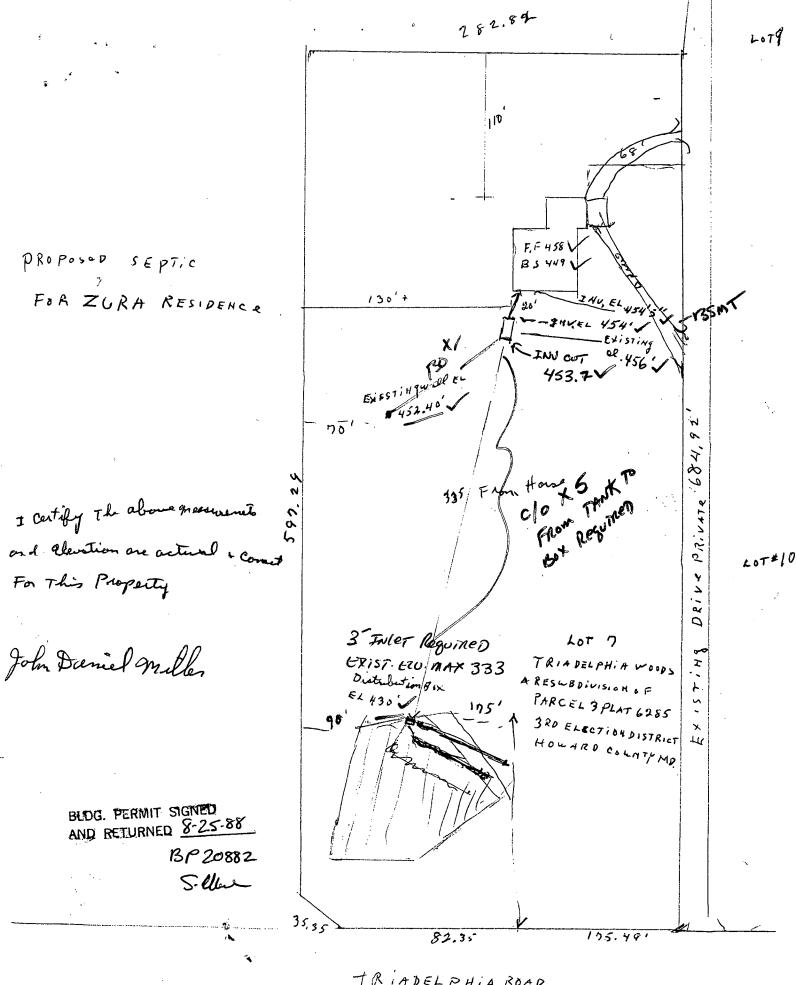
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TAX MAP: 22

3四 ELECTION DIST

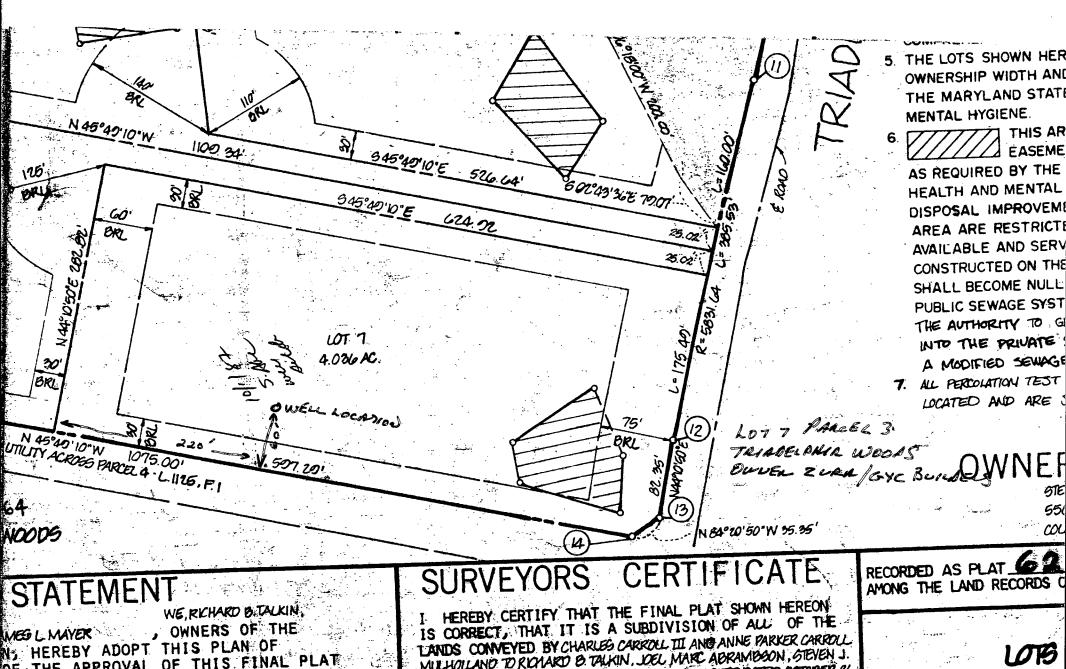
boender

3565 BLICOTT MILLS ELLICOTT CITY, MARYLA



TRIADELPHIA ROAD SITEPLAN 1"= 75'0"

B 1 9325 SEQUENCE NO. (OEP USE ONLY)	STATE OF	MARYLAND	OEP PERMIT NUMBER
1 2 3 6		DRILL WELL	40-81-2337
THIS NUMBER IS TO BE PUNCHED TN COLS. 3-6 ON ALL CARDS)	please pr	int or type	fill in this form completely 79
Date Received  OG 2387 OWNER INFORMA		B 3	LOCATION OF WELL
OWNER INFORMA	ATION	HOWARD	
15 Last Name Owner	First Name 34	8 COUNTY	PH/H WOODS
11673 FARSIDE	KOAO	23 SUBDIVISION	42
36 Street or RFD	55	SECTION 44 46	LOT 48 50
57 Town 70	State 72 Zip 76	GACNEAG 52 NEAREST TOWN	
DRILLER INFORMATIO	)N	MILES FROM TOWN (ent	er Oif in town) Z / M I
Driller's Name D	77 License No. 80	B 4	73 76 77 78
Firm Name to mange WIV 11	Dkilling	1 2 DIRECTION OF WELL FROM	Midelpin Provi
55/2 Ridge Rd. Int. Air	7. md. 21771	TOWN (CIRCLE BOX)	11 ÑEAR WHAT ROAD 30
was not to Misagan	9/18/87	N 8 NE	ON WHICH SIDE OF ROAD MIGHT
B 2 WELL INFORMATION	Date	8-9	WEST SEAST
APPROX. PUMPING RATE (GAL. PER MIN.)	<del></del>	TOWN E	SOUTH
AVERAGE DAILY QUANTITY NEEDED	12	IS IS	34 <b>3 0 0 1 3</b> 7 DISTANCE FROM ROAD
(GAL. PER DAY)	20	S _W S _E S _{B-9}	ENTER FT or MI
USE FOR WATER (CIRCLE APPR	OPRIATE BOX)	8	NOT TO BE FILLED IN BY DRILLER
[6])номе (SINGLE OR DOUBLE HOUSEHO	· · · · · · · · · · · · · · · · · · ·		HEALTH DEPARTMENT APPROVAL
F FARMING (LIVESTOCK WATERING & A	AGRICULTURAL	HOWARD COUNTY NAME	A \$3.33/ county no.
INDUSTRIAL, COMMERCIAL, STATE AI OTHER (REQUIRES APPROPRIATION F		OEP SIGNATURE	STATE HEALTH INSERT S
PUBLIC OR PRIVATE WATER COMPAN	IY (REQUIRES	DATE ISSUED	41
P APPROPRIATION PERMIT AND STATE H APPROVAL)			SIGNATURE EXP. DATE
T TEST, OBSERVATION, MONITORING (N APPROPRIATION PERMIT)	MAY REQUIRE	NORTH 52600	0 EAST 08 15 0 0 0 0 55 57 57
		SHOW MAJOR FEATUR BOX & LOCATE WELL	ES OF GIFF CHENT
APPROXIMATE DEPTH OF WELL 26 0	FEET 28	WITH AN X	2,400
APPROXIMATE DIAMETER OF WELL	NEAREST INCH	SOURCES OF DRILLING	WATER POST STATE
METHOD OF DRILLING (		2.	Cenido
BORED (or Augered) <u>JETTED</u>	Jetted & <u>DRIVEN</u>	3. WRITE THE BOX NUMBI	
31	TARY (Hydraulic Rotary)	FROM THE MAP HERE	Signal .
<u>CABLE</u> <u>REV</u> erse <u>-ROT</u> ary	<u>DRive-POINT</u>	E SIAS	33-bass final
other		N 5366	000
REPLACEMENT OR DEEPENE.		3 27,5	USHOWING LOCATION OF WELL IN
(CIRCLE APPROPRIATE BO		RELATION TO NEARBY	TOWNS AND ROADS AND GIVE TO NEAREST ROAD JUNCTION
THIS WELL WILL REPLACE A WELL THE ABANDONED AND SEALED		N 🚓	
39 THIS WELL WILL REPLACE A WELL TH	HAT WILL BE USED	A	Superior Control of the Control of t
D THIS WELL WILL DEEPEN AN EXISTIN		The state of the s	A so
PERMIT NUMBER OF WELL TO BE REPLACE		3	Pidi-
(IF AVAILABLE) 41	52	de.	
Not to be filled in by driller (OEP U	ISE ONLY)	E maddledi	To Bar
APPROP. PERMIT NUMBER G	A P 63	D'I	18
FORCE WRITE INITIALS PERMIT NO. 0 - 0 70 71 72	2 1 - 2 3 3 7 73 74 75 76 77 78 79		
SPECIAL CONDITIONS		Salaran La	No. of the second second



OF THE APPROVAL OF THIS FINAL PLAT NG ESTABLISH THE MINIMUM BUILDING SHTS-OF-WAY AFFECTING THE PROPERTY

MULHOLLAND TO RICHARD B. TALKIN, LOEL MARC ABRAMBSON, STEVEN J. FOX, ELLEN LEVY WIDEN AND JAMES L. MAYER BY DEED DATED OCTOBER 26 1982 AND RECORDED AMONG THE LAND RECORDS OF HOWARD COUNTY. MARYLAND IN LIBER 1125 AT FOUR I AND THAT ALL MONUMENTS ARE IN PLACE AS SHOWN IN ACCORDANCE WITH THE ANNOTATED CODE OF MARYLAND, AS AMENDED.

Wallens H. Hai

TRIADE

A RESUBDIVISION

0 PZ FILES VP -85-40, 1

**SPECIAL CONDITIONS** 

BRL TRIADELPHIA WOODS .001 00 , 00° : 00° , oci WELLIZINGS CWM 3.00 2. 8c/ 5.00° 5.00° TANK MUST BE HOUSD 5.00 FANTHEN FROM WELL 5.00 12/11/85 CW _ 301 こだれん 425 10T7 (4.036 Ac) TRIADELPHIA ROAD (NITED GENERAL CONTRACT

C 1 1937 SEQUENCE NO. (OEP USE ONLY)	STATE OF MARYLAND	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
1 2 3 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)	WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE	COUNTY A. 33331
DATE Received DATE WELL COMPLETE		PERMIT NO. FROM "PERMIT TO DRILL WELL"
13 // O 9 8 / 20	(TO NEAREST FOOT)	HU-81-2337
OWNER GYC B	vildeas	
STREET OR RFD last name This Dela		GIPNCIG
SUBDIVISION IN Adelphia ROODS WELL LOG	<b>Y</b>	io
Not required for driven wells	WELL HAS BEEN GROUTED (Circle Appropriate Box)	
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH,	(Circle Appropriate Box)  TYPE OF GROUTING MATERIAL	PUMPING TEST
THICKNESS AND IF WATER BEARING  DESCRIPTION (Use FEET Check	CEMENT CM BENTONITE CLAY BC	HOURS PUMPED (nearest hour)
additional sheets if needed) FROM 7 TO if water bearing	NO. OF BAGS 33 NO. OF POUNDS 3162	PUMPING RATE (gal. per min. 70 to nearest gal.)
	GALLONS OF WATER	METHOD USED TO MEASURE PUMPING RATE
SAND 0 34	from 0   ft. to 50   ft.	WATER LEVEL (distance from land surface)
C Sent less	48 TOP 52 54 BOTTOM 58 (enter 0 if from surface)	BEFORE PUMPING
Cong Mich Bak 81 140 v	casing CASING RECORD types	WHEN PUMPING VIST
(k)	insert SLJCO	TYPE OF PUMP USED (for test)
	code	A air P piston T turbine
	below PLASTIC OTHER	27 27 27 27 27
	MAIN Nominal diameter Total depth CASING top (main) casing /of main casing	C centrifugal R rotary (describe 27 27 27 below)
	TYPE (nearest inch) / (nearest foot)	J jet (S sybmersible
	60 61 63 64 66 70	27
	E OTHER CASING (if used) A diameter depth (feet)	
*	inch from to	PUMP INSTALLED
	C ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (	DRILLER WILL INSTALL PUMP YES (NO)
	N G G	IF DRILLER INSTAULS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS
	screen type SCREEN RECORD	EXCEPT HOME USE TYPE OF PUMP INSTALLED
* "	or open hole IST BR HO street STEEL BRASS OPEN	PLACE (A,C,J,P,R,S,T,O) IN BOX-SEE ABOVE:
	appropriate BRONZE HOLE	CAPACITY: GALLONS PER MINUTE
	below PLASTIC OTHER	(to nearest gallon)
	C 2	PUMP HORSE POWER 37 41
	DEPTH (negrest ft.)	PUMP COLUMN LENGTH (nearest ft.)
	E' HO SON AHA	CASING HEIGHT (circle appropriate box and enter casing height)
	A 8 9 11 15 17 21 H	LAND SURFACE
	S 23 24 26 30 32 36	below  (nearest foot)
A A WELL WAS ABANDONED AND SEALED	E 3 47 45 47	. LOCATION OF WELL ON LOT
WHEN THIS WELL WAS COMPLETED  E ELECTRIC LOG OBTAINED	SLOT SIZE 1 2 3 3	SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR
P TEST WELL CONVERTED TO PRODUCTION	DIAMETER (NEAREST	N LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES
' WELL I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN	OF SCREEN 100 100H)	(MEASUREMENTS TO WELL)
ACCORDANCE WITH COMAR 10.17.13 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION	GRAVEL PACK	
PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.	IF WELL DRILLED WAS FLOWING WELL INSERT	1,20
DRILLERS IDENT. NO. 23 8	F IN BOX 68 68 68	in the second se
Joseph J. Marga	(NOT TO BE FILLED IN BY DRILLER)	60
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)	T (E.R.O.S.) W Q	Combination of the Combination o
	70 72 TELESCOPE LOG OTHER DATA	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)	CASING INDICATOR	TIMBER DE CA LD.

D	- 6		PT	
rage Date	 OI	<del></del>	Grov	

10/9/87	730
PT 3hrs 18TD Group 18T	
Grove 75%	980

Review	

### FIELD DATA SHEET HOWARD COUNTY WELL YIELD TEST

Cocation of property (road)  Gubdivision ThiAdelphia  Well Driller J. mayn C		Lot 7 Owner	Block GYC Build	Plat	Sec.
Depth of well Distance of measuring Static water level (S			y-1		nderstron-
I. High rate pumping re.  Time pump started	7/30		ping rate el8&	1069m ft. below	M.P.

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

TIME (in 15 minute in- tervals	WATER LEVEL below M.P.	PUMPING RATE time to fill <b>5/(</b> gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
10;15	88	6		10 G.AM
10:30	88	6		10 G.AM 106PM
			A /	
		10/	9/57 1-1227	
			1-1001	
		<u> </u>	Aluf	
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				<del>                                     </del>
		i		

### FIELD DATA SHEET HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 2337  Location of property (road) Thirdept Subdivision Thirdelphia webDS  Well Driller T. MAYNE	hrp Rd.  Lot 7 Block Plat Sec.  Owner GYC Buildens
Depth of well 140' Distance of measuring point (M.P Static water level (S.W.L.) below	
I. High rate pumping reservoir draw Time pump started $\frac{2.30}{\text{Total time}}$ to reach pure	Pumping rate 10 90 mping water level

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

TIME (in 15	WATER LEVEL	PUMPING RATE	FLOW METER READING	CALCULATED FLOW
minute in-	below M.P.	time to fill \$	(if used)	(gallons per
tervals		gallon bucket		minute)
7:45	88	le see		10
8:00	88	6		10
8.17	88	6		10
6.30	88	6		10
6.45	88	6		10
9:00	88	6	(ex)	16
9:15	58	6		and the second second
9:30	de.	6		No
9:45	88	6		10
10:00	88	6		10
10:15	88	6		10
10:30	58	6		10
			•	
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## HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH

#### PUMP INSTALLATION

THE FOLLOWING STATEMENT MUST BE COMPLETED BY THE HOME OWNER WHEN A PUMP IS INSTALLED BY A PERSON OTHER THAN THE WELL DRILLER:

My well driller is not to install the pump for my water well, and I hereby certify that it will be my responsibility to have a Pump Permit taken out by a registered master plumber or certified pump installer. It will be my responsibility to notify the Health Department before and during the installation so that inspections can be made by their representative. (Pursuant to Chapter XVII, of the Plumbing Code of Howard County.)

Time Mond of Manne

(Address)

HO-81-126/
(OEP Well Permit Number)

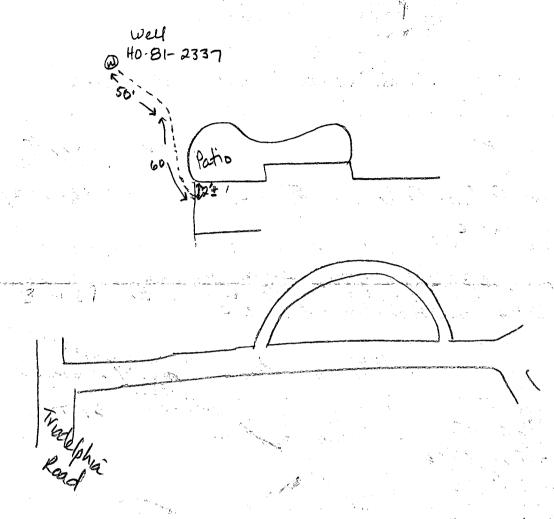
(Date)

USU R-36288 12/2/85 8 30.00

#### 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	4	Receipt # 42776  Date 10-16-21
Name of Installer Allen 19	Van Sout inc	Telephone 442-222
License Number /862 Certified Well Pump Installer		
Name of Property Owner Finds The Subdivision The Adelphia We Site Address 12428 Treads	ty RDain Zura T so & Lot # 7 Well Lphia Pol. RC	elephone Tag # <u>HO -8[ -2337</u>
Pump	Motor 3	Pitless Adapter
1. Type	1. Horsepower 34	1. Make Hanund. 2. Model #
a. Deep well jet	2. RPM	2. Model #
b. Shallow well jet	3. Voltage	3. Depth
c. Submersible  2. Make Godel	a. 110 b. 220	
3. Model # 5/25074/2	ann ann aine ridhlea rain ainn iann ainn	t _s 4
4. CapacityGPM		•
5. Pump exceeds well capacity	Yes No	_
6. If Yes, is low pressure cutor	ff switch installed? Ye	sNo
7. What methods are used to pro-	tect the pump and electri	cal_wiring from
vibrations? Torque arrestor	rs Cable guards _4	Other
Tank	Pining	Well data
Tank  1. Capacity 42	Piping 1. Type #/60	1. Depthft.
2. Pressure relief	2. Size	2. Yield /O GPM
valve?	3. NSF and/or BOCA	3. Static water
<del>j</del>	Code approved Ve	
· · · · · · · · · · · · · · · · · · ·	4. Depth of supply	
A	line 3/	t be disinfected by == :
	Y .	installer?
I understand that it is my res Department when the installation is null and void).		
All information given above is	true to the best of my kn	owledge.
Signatu	re of Applicant:	
	Date: 🛂 🙆	101984
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3-27-89 Electric line connected. Ground line not attached. Pitless adaptor 42 inches below grade. Tweethline in trench covered, House connection covered. Pump tank installed w/ relief valve but not connected. House connection inside cemented. JE Nodean

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