

3/24/00 ASAP (pm)

3/30/00 10am

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

04-363140

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXXXX~~ 410-313-2640

INDEXED

P 513333

A 59815-R

DISTRICT _____

DATE 3/20/2000

DATE SYSTEM APPROVED 3/30/00

INSPECTOR DKS

Union Paving Company, Inc. IS PERMITTED TO INSTALL ALTER _____

ADDRESS 2912 Summerhill Drive, West Friendship, MD 21794 PHONE 410-442-1425

SUBDIVISION The Woods at Ridgeview LOT 1 ROAD 15090 Frederick Road

PROPERTY OWNER Altieri Homes

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

240 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 320

TRENCHES - 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 - Begin trenches 160 feet off the 366.20' lot line and 50 feet off the 266.21' lot line as seen when facing the lot from the Use-In-Common drive. Run trenches on contour toward the right lot line.

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

- Call for pre-construction stake-out inspection. At installer's option you may use 260 linear feet of trench with 4 feet stonefill (i.e., highest 5 trenches as shown on plan-- 2 feet wide inlet @ 4 feet, max bottom @ 8 ft. to be discussed at pre-construction meeting).

PLANS APPROVED BY Amy McMillen OK RD 3/17/00 DATE 11-24-1999

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**

A 59815-R

APPLICATION

PERCOLATION TESTING

A 59815 ✓

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

DISTRICT _____

DATE 2/10/98

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER CHARLES A SHARP ATTIEKI DOMES

ADDRESS 3779 SHARP Way PHONE 410 4894630

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Old Frederick Road LOT NO. 2 Ex. Home Par 12 x 13 + Lot 1

ROAD AND DESCRIPTION (15790 Frederick Road) Ridgeman Estates

TAX MAP _____ PARCEL # _____

SIZE OF LOT _____ TYPE BLDG. SFD - 4 Bed
(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.

Charles A Sharp
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

59815 K

COUNTY #

SOIL PROFILE

13E

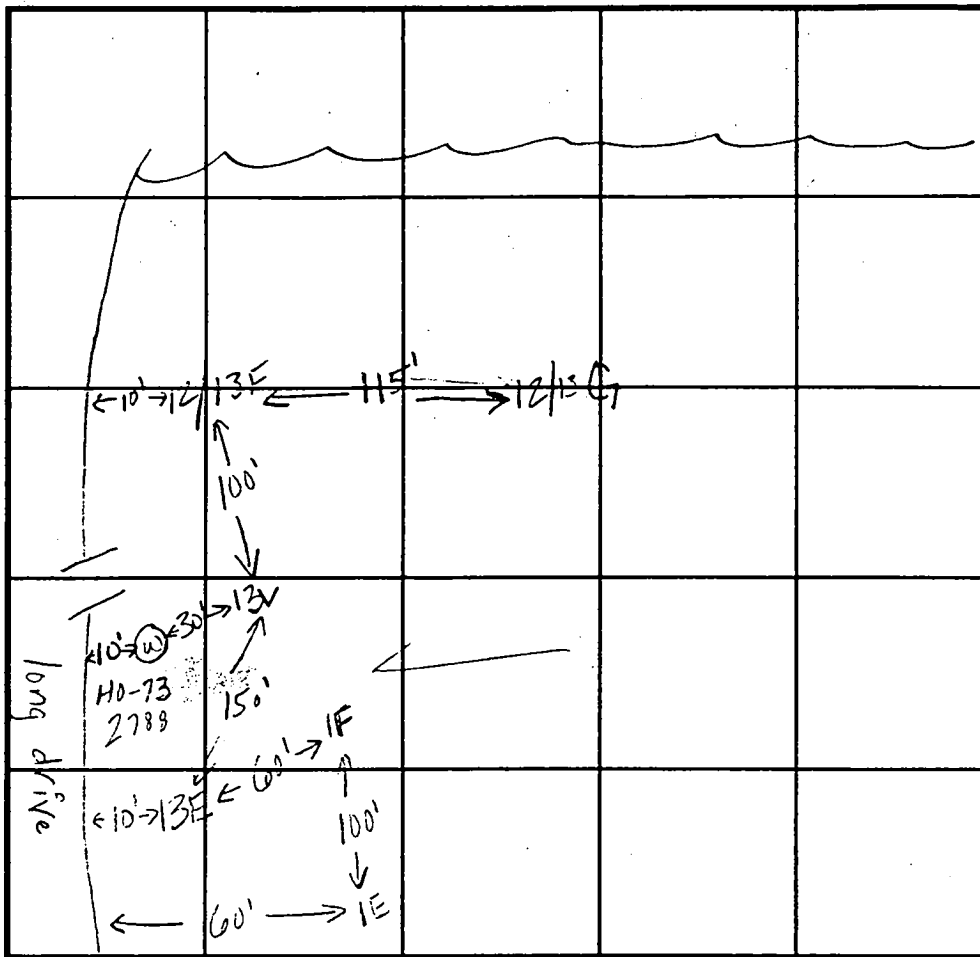
0' or/br Clay lm
 4.0' 1 1/2 tan pink silty Clay loam
 10-15% Shale frags

13V

0' or/br clay loam
 4.0' 1 1/2 tan pink Silty Clay lm
 20% shale frags

12/13G

0' or/br Clay lm
 4.0' 1 1/2 tan pink, yellow silty Clay lm
 10-15% Shale frags



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE. Rt 144

SOIL PROFILE

12/13G

Same as test hole # 12/13G

311C

red brown silt loam
 3.0' 1 1/2 tan silt loam
 4590 Rx

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2-25-98	13E	4.0'S	10:16	10:25	10:25	10:42 ³⁰	17 min
		11.5'D	visual	ok-see	profile		
	13V	12.0'D	visual	ok-see	profile		
	12/13G	3.5'S	10:53	11:11	11:11	11:34	23 min
		12.0'D	visual	ok-see	profile		
	12/13E	3.0'S	11:07	11:12	11:12	11:23	11 min
		6.0'D	11:09	11:12	11:12	11:14	2 min
		12.0'D	visual	ok-see	profile		
3-11-99	311C	4.0' / 12.0'	3:57	4:10	4:10	4:28	18 min

REMARKS test holes staked

TYPE OF SOIL

TESTED BY

Kim Maiste

ALSO PRESENT

Chuck Sharp

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

26 min initial system + 13.14 minutes in repair system

TRENCH WIDTH

3.0'

INLET DEPTH

4.0'

MAXIMUM BOTTOM DEPTH

6.0'

SQ. FT./BEDROOM

210 repair

initial system 4.0' inlet, 8.0' below

240 initial pp 1/10/90

4/10/00

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043
Phone: 410-313-2640
Fax: 410-313-2648

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation
Replacement _____

Receipt # _____
Date 4/10/00

Name of Installer Carroll Water Systems, Inc.

Telephone 410-876-5100

License Number PI-074

Certified Well Pump Installer Well Driller _____ Registered Plumber _____

Name of Property Owner ALT. CR. HOMER

Telephone _____

Subdivision: WOODS AT RIDGEVIEW

Lot# 1 Well Tag# HO-73-2788

Site Address 15050 FREDERICK RD

GREEN LISBON, MD

Pump

- 1. Type
 - a. Deep well jet _____
 - b. Shallow well jet _____
 - c. Submersible

Motor

- 1. Horsepower 1/2
- 2. RPM 3450
- 3. Voltage
 - a. 110 _____
 - b. 220

Pitless Adapter

- 1. Make Campbell
- 2. Model # B-10X
- 3. Depth 48"

2. Make Gould's

3. Model # 7SB05422

4. Capacity 7 GPM

5. Pump exceeds well capacity Yes _____ No

6. If yes, is low pressure cutoff switch installed? Yes _____ No

7. What methods are used to protect the pump and electrical wiring from vibrations?

Torque arrestors _____ Cable guards Other _____

Tank

- 1. Capacity 82
- Pressure relief valve: Yes

Piping

- 1. Type Plastic
- 2. Size 1"
- 3. NSF and/or BOCA Code approved Yes
- 4. Depth of supply line 4'

Well data

- 1. Depth 100 ft
- 2. Yield ✓ GPM
- 3. Static water level ✓ ft.
- 4. 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.

4/10/00 - No connection made. Tag missing. Suspicious grout **BR**

Signature of Applicant: _____

[Handwritten Signature]

Date: 04/10/00

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



HOWARD COUNTY HEALTH DEPARTMENT

Diane L. Matuszak, M.D., M.P.H., County Health Officer
May 17, 2000

Altieri Homes
9017 Red Branch Road, Suite 201
Columbia, MD 21045

RE: The Woods at Ridgeview, Lot 1
15090 Frederick Road
Well Tag Permit # HO-73-2788

Dear Sirs:

During an attempted well line inspection conducted on April 10, 2000, it was observed that the assigned well tag permit # (HO-73-2788) for the above referenced property was not located on the well casing. It is believed that the well tag was accidentally disconnected from the well casing during well line excavation/installation activities.

The well construction regulations, COMAR 26.04.04.06 B (3), state "If the identification tag is removed from the well by a licensed well driller, plumber, or pump installer during later work on the well, it shall be replaced by the person so removing it in the proper position and manner."

Therefore before any request for use and occupancy can be granted for this property, the well tag must be attached to the well casing by the appropriate individual in the manner described in COMAR 26.04.04.06 B (3).

A replacement well tag has been made. Please contact this office before you plan to pick up the tag, and for inspection after the tag has been reattached. Enclosed is a copy of the COMAR regulation 26.04.04.06 B (3).

Thank you in advance for your cooperation in this matter.

Respectfully,

Brian Baker

Brian Baker, Sanitarian
Water and Sewerage Program

Enclosure

cc: L. Franklin Easterday, Inc.
Carroll Water Systems
File ✓

B 1 3242 (SEQ. NO.)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
 TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL

WRA PERMIT NUMBER
 HO 73 2788
 FILL IN THIS FORM COMPLETELY

DATE RECEIVED (WRA USE ONLY)
 7/13/78
 9:30a

OWNER: Yeager, Larry (Ambrose A. Hochrain property)
 COL 15 LAST NAME COL 34 FIRST NAME COL 34
 STREET OR RFD: 15110 Frederick Rd
 COL 36 COL 55
 POST OFFICE: ...
 COL 57 COL 76

B 1 CONTINUED DRILLER INFORMATION
 1 2 3 (SEQ. NO.) 6
 DATE: 7/14/78 LICENSE NUMBER: 42
 COL 77 COL 80
 SIGNATURE: L F Easterday
 FIRST NAME DRIVER LAST NAME

B 3 LOCATION OF WELL
 1 2 3 (SEQ. NO.) 6
 COUNTY: Howard (DO NOT ABBREVIATE COUNTY NAME) COL 21
 SUBDIVISION: 23 COL 42
 SECTION: 44 LOT: 46 COL 48 COL 50
 NEAREST TOWN: ... COL 52 COL 71
 MILES FROM TOWN (ENTER 0 IF IN TOWN): 2.5 COL 73 COL 76 COL 77 COL 78

B 2 WELL INFORMATION
 1 2 3 (SEQ. NO.) 6
 MAXIMUM PUMPING RATE (GALLONS PER MINUTE): 5 COL 8 COL 12
 AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY): 600 COL 14 COL 20
 USE FOR WATER (CIRCLE APPROPRIATE BOX)
 HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
 FARMING, AGRICULTURE, IRRIGATION
 INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT.
 MUNICIPAL WATER SUPPLY } MUST HAVE STATE HEALTH DEPT. APPROVAL
 PRIVATE WATER COMPANY }
 TEST

B 4 DIRECTION FROM TOWN
 (CIRCLE APPROPRIATE BOX)
 1 2 3 (SEQ. NO.) 6
 NORTH EAST NORTHWEST SOUTHWEST
 SOUTH WEST SOUTHWEST
 NEAR WHAT ROAD: 15110
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): N
 DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX): 100 COL 34 COL 37 COL 38 COL 39

APPROXIMATE DEPTH OF WELL: 110 FEET
 COL 24 COL 28

APPROXIMATE DIAMETER OF WELL: 6 (NEAREST INCH)
 COL 29 COL 48

METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)
 BORED (OR AUGERED) JETTED DRIVEN
 AIR-ROTARY AIR-PERCUSSION ROTARY (HYDRAULIC ROTARY)
 CABLE REVERSE-ROTARY DRIVE-POINT
 OTHER (DESCRIBE):

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)
 THIS WELL WILL NOT REPLACE AN EXISTING WELL
 THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
 THIS WELL WILL DEEPEM AN EXISTING WELL
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE): 41 COL 41 COL 52

NOT TO BE FILLED IN BY DRILLER (WRA USE ONLY)
 APPROPRIATION PERMIT NUMBER: 84 COL 64 COL 65
 FORCE: ... WRITE INITIALS IN BOX: ... CONDITIONS: ... COL 67 COL 68 COL 70 COL 71 COL 72 COL 73 COL 74 COL 76 COL 77 COL 78 COL 79

B 4 CONTINUED HEALTH DEPARTMENT APPROVAL
 1 2 3 (SEQ. NO.) 6
 STATE HEALTH (CIRCLE BOX): S COUNTY NAME: Howard COUNTY NO.: 126030
 DATE: 7/14/78 APPROVED BY: ...
 COL 43 COL 48

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS, ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON THE SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX BELOW AND THE BOX NUMBER FROM THE WELL LOCATION MAP.

7/14/78
 56 ft deep
 49 ft open hole
 11 bags cement
 OK D

BOX NUMBER: E 270 N 280
 NORTH COORDINATE: ... COL 50 COL 51 COL 52 COL 53 COL 54 COL 55
 EAST COORDINATE: ... COL 57 COL 58 COL 59 COL 60 COL 61 COL 62 COL 63
 ELEVATION AT WELL HEAD (FEET): ... COL 65 COL 66 COL 67 COL 68

B 5 SPECIAL CONDITIONS 8-63 (WRA USE ONLY)
 1 2 3 (SEQ. NO.) 6

Mar 17-99

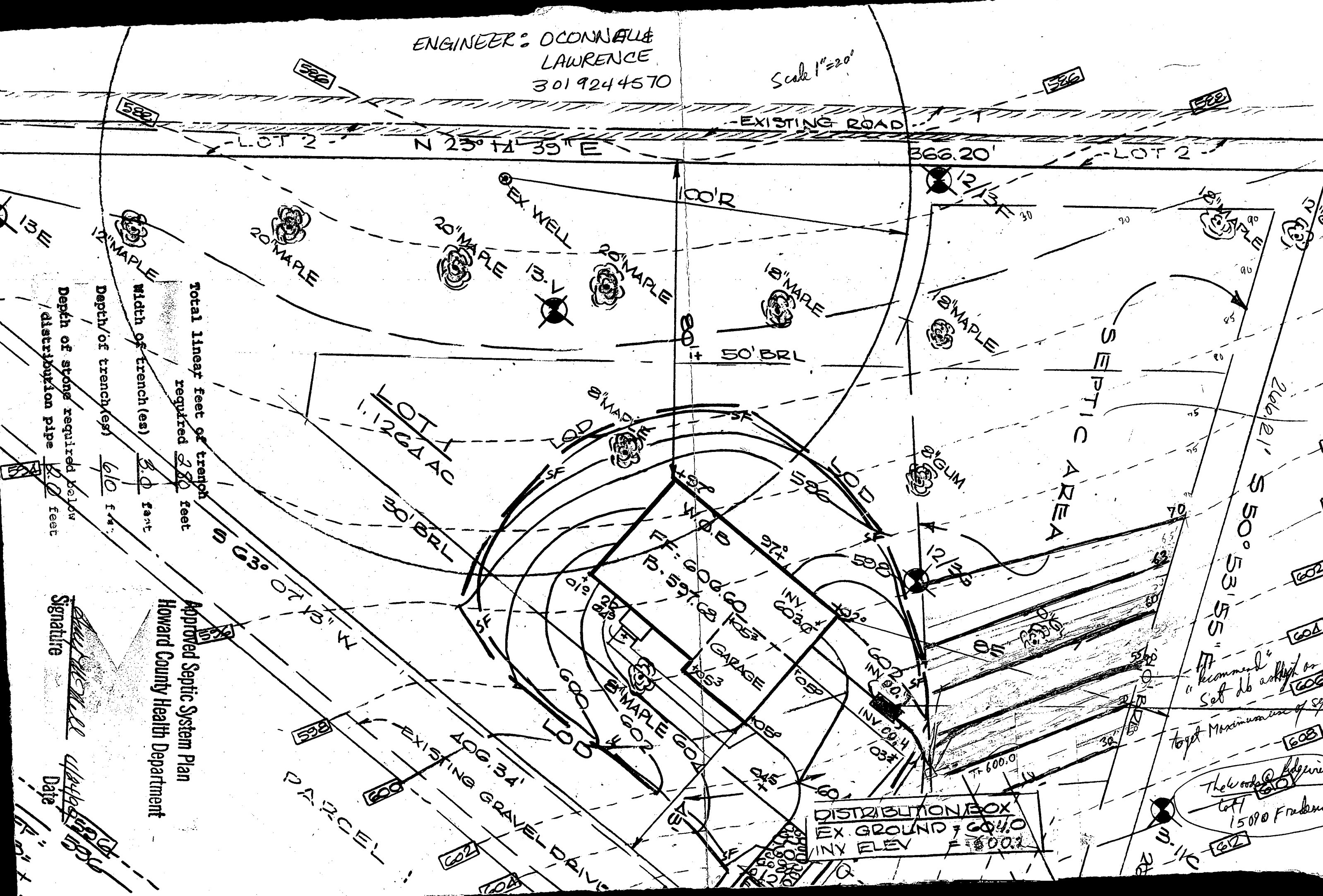
Request that HO 73-2788 on lot 7
be changed from Ag to house hold use.

A Sharp

CHUCK SHARP

ENGINEER: O'CONNELL &
LAWRENCE
301 924 4570

Scale 1"=20'



Total linear feet of trench required 280 feet
Width of trench(es) 3.0 feet
Depth of trench(es) 6.0 feet
Depth of stone required below distribution pipe 2.0 feet

Approved Septic System Plan
Howard County Health Department

Signature

Date

"I recommend"
Set do ask high or low
to get Maximum use of septic
The woods @ Alderbrook
15090 Frederick



HOWARD COUNTY HEALTH DEPARTMENT

Diane L. Matuszak, M.D., M.P.H., County Health Officer

May 9, 2000

Denise Swatzbaugh
Groundwater Permits Program

RE: Woods at Ridgeview – Lot 1
15090 Frederick Road
Woodbine, MD 21797
Well Tag # HO-73-2788

Dear Mrs. Swatzbaugh:

Upon a well line inspection for the above referenced property, it was observed that the above assigned well tag was not located on the well casing. Field/office research could not locate the missing tag; therefore, I am requesting a replacement tag reading HO-73-2788 to be sent to this office. This tag was originally assigned to a well designated for agricultural use at 15110 Frederick Road until the area was subdivided.

Thank you for your cooperation in this matter.

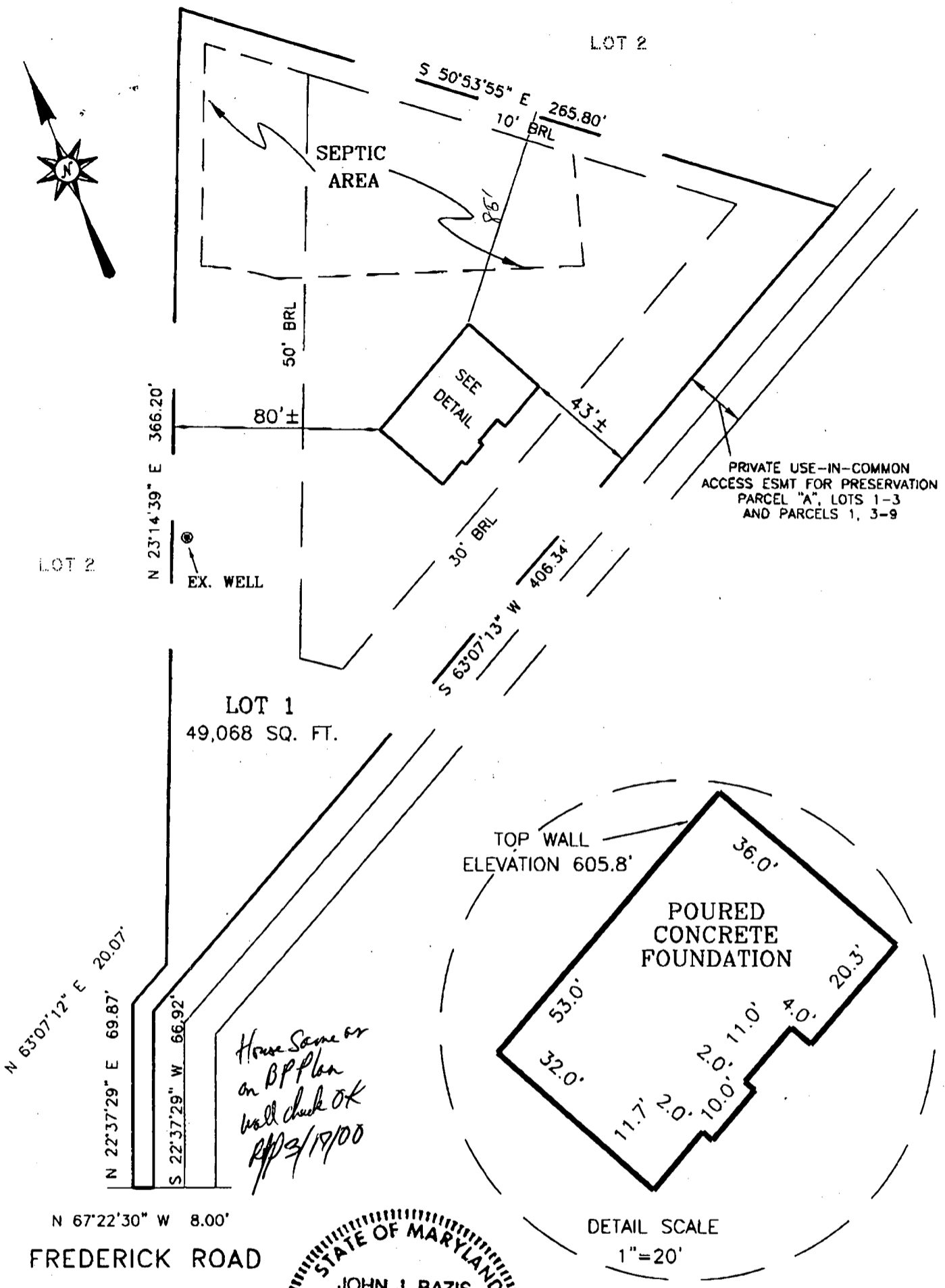
Very truly yours,

Brian Baker

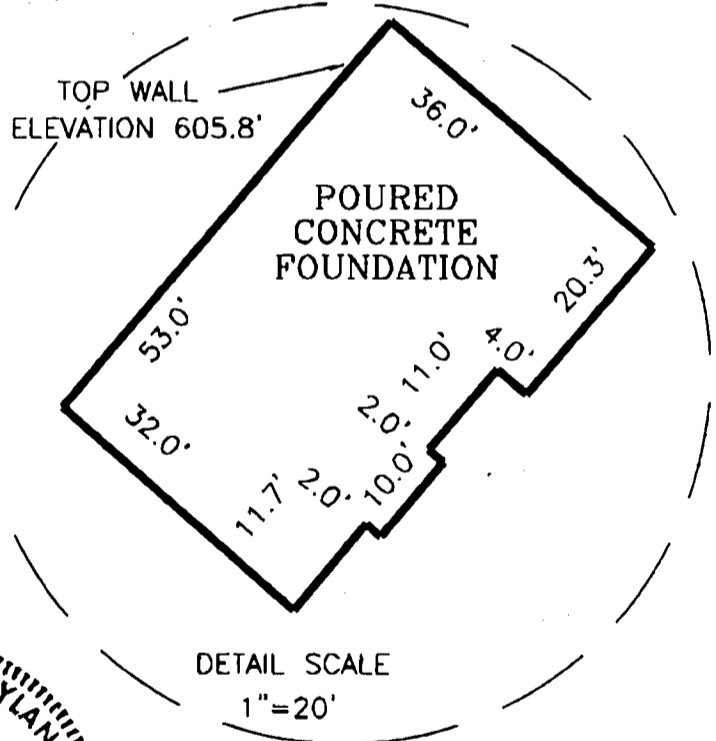
Brian Baker, Sanitarian
Water and Sewerage Program

BB

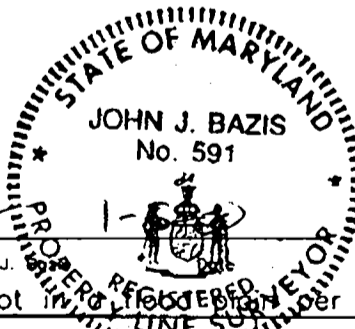
cc: File ✓



House Same as on BPP Plan will check OK RPP/3/19/00



N 67°22'30" W 8.00'
FREDERICK ROAD



Offset dimensions shown thus NN± are generally within 1 (one) foot of the stated distance if 20 feet or less. Longer distances may exceed 1 foot margin proportionally. All offsets depend on site conditions and other factors including but not limited to; elevation changes, availability of property markers, availability and age of land record data, irregularly shaped and/or large lots.

Property shown hereon is not intended to be construed as a deed or other existing records unless otherwise noted

O'CONNELL & LAWRENCE, INC.
 SURVEYORS, ENGINEERS & LAND PLANNERS
 17904 Georgia Avenue, Suite 302, Olney, Maryland 20832
 Tel: (301) 924-4570 • Fax: (301) 924-5872

LOCATION DRAWING
WOODS AT RIDGEVIEW
 LOT 1
 HOWARD COUNTY, MARYLAND
 N/F LIBER 4333, FOLIO 577

SURVEYOR'S CERTIFICATION

I hereby certify to the best of my knowledge and belief that the property delineated hereon is in accordance with the Plat of subdivision and/or deed of record, that the improvements were located by accepted field practices and include permanent visible features and encroachments, if any. This drawing is not to be relied upon for the establishment or location of fences, garages, siding or other existing or future improvements. This drawing does not provide for the accurate identification of property boundary lines, but such identification may not be required for the transfer of title or securing financing or refinancing. Questions pertaining to relationships of the property corners or lines to real objects must be addressed by a Boundary Survey. This drawing is of benefit to a consumer only insofar as it is required by lender or title insurance company or its agent in connection with contemplated transfer, financing or refinancing, and valid only within six months from field date, and as to them I warrant the accuracy of the drawing. No title report furnished.

Job No. 22-337
Scale 1"=50'
Field Dates
Wall Check 3 JAN 00
Final Loc.
Recert