

7/15/99
Septic Co.
1:30 cancelled SRV
7-27-99 7/28/99
3:00 11:00

PERMIT

7/28/99
Needs hoses
P 512008
A 59833-E

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT _____

HOWARD COUNTY HEALTH DEPARTMENT

DATE 7/14/99

BUREAU OF ENVIRONMENTAL HEALTH
~~XXXXXX~~ 410-313-2640

DATE SYSTEM APPROVED 9/23/99

INSPECTOR S.R.K.

INDEXED

Whitworth Excavating IS PERMITTED TO INSTALL ALTER

ADDRESS 12680 Clarksville Pike, Clarksville, MD 21029 PHONE 410-531-5033

SUBDIVISION Holly Crest LOT 6 ROAD 13801 Holly Crest Lane

PROPERTY OWNER Kevin & Katherine Anderson

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS TOP SEAMED TANK REQUIRED

NUMBER OF BEDROOMS 4

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 280

TRENCHES - Trench to be 3 feet wide. Inlet 3.0 feet below original grade. Bottom maximum depth 6.0 feet below original grade. Effective area begins at 3.0 feet below original grade. 1.5 feet of stone below distribution pipe.

LOCATION - Place the distribution box 175 feet down the right lot line and 50 feet off this same lot line as seen from the use-in-common easement off Linthicum Road. Run trenches along contour towards 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. OK/MR

7/27/99 Trench specs changed to utilize upper most area of SDA (topo different than presented) OK to proceed SR

PLANS APPROVED BY Donna K. Soe DATE 4-28-1999

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

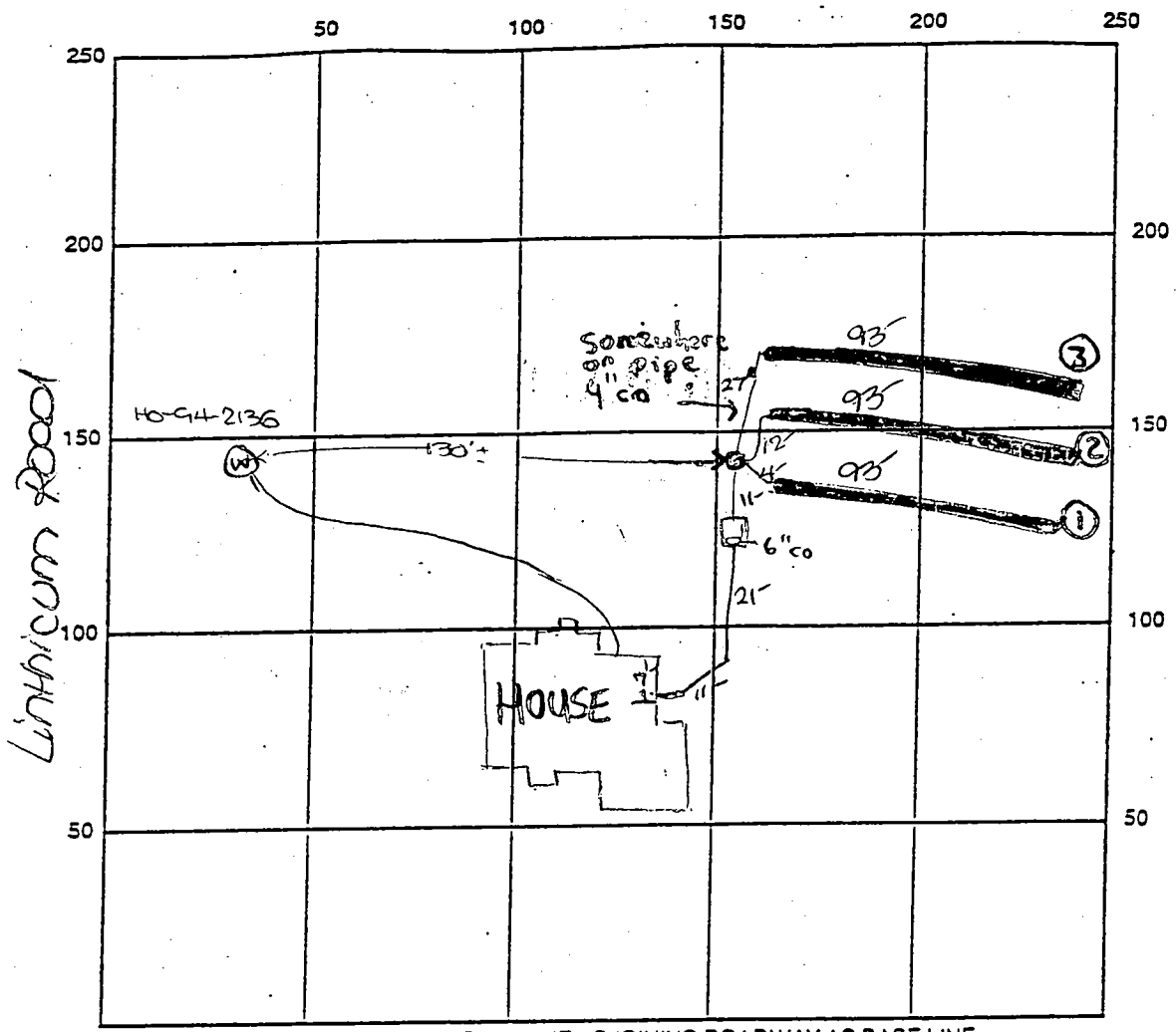
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON, CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

129833-E



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL OK Holly Crest Lane CLEANOUTS 6" S.T., 4" on line between DBox & Trench 3

DISTRIBUTION BOX LEVEL OK

DRAIN FIELD/TITLE DEPTH 6.5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 5 FT.

EFFECTIVE GRAVEL DEPTH 1.5 FT. TOTAL LENGTH 3 x 93 FT. 279

NUMBER OF TRENCHES 3 ONE-SIDEWALL/BOTTOM AREA 837 SQ. FT.

DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA — SQ. FT.

REMARKS: 7/27/99 OK to continue installation w/specs
changed as indicated. DKS

7/28/99 OK to cover all septic work - Needs house
connection for final. DKS

7/28/99 WPT - well line, P.A. 4' bg, well casing 1' a.a.
2pc caio OK, PVC conduit pipe OK. DKS

DATE SYSTEM APPROVED 9/23/99 INSPECTOR Steven R. Krieg

9/23/99 - House connection verbally verified by builder OK (SRK)

APPLICATION

PERCOLATION TESTING

A 59833

P _____

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

DISTRICT _____

DATE 2/18/98

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 Allen Brown KEVIN + KATHERINE ANDERSON

ADDRESS 4609 Lirithicum Ro. PHONE 410-531-2658

AGENT OR PROSPECTIVE BUYER Greg + Rhonda Carpenter

ADDRESS P.O. Box 440 Clarksville 21029 PHONE 301-498-9433

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 8

ROAD AND DESCRIPTION East side of Lirithicum Road
(13801 Holly Crest Lane)

TAX MAP 28 PARCEL # 4

~~BLDG PERMIT SIGNATURE~~
~~NOT RETURNED~~ 428299
Serial # B70 117963

SIZE OF LOT 44,713 SF TYPE BLDG. SFD - 4 Bm
(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.

Cindy DeLozzo
(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

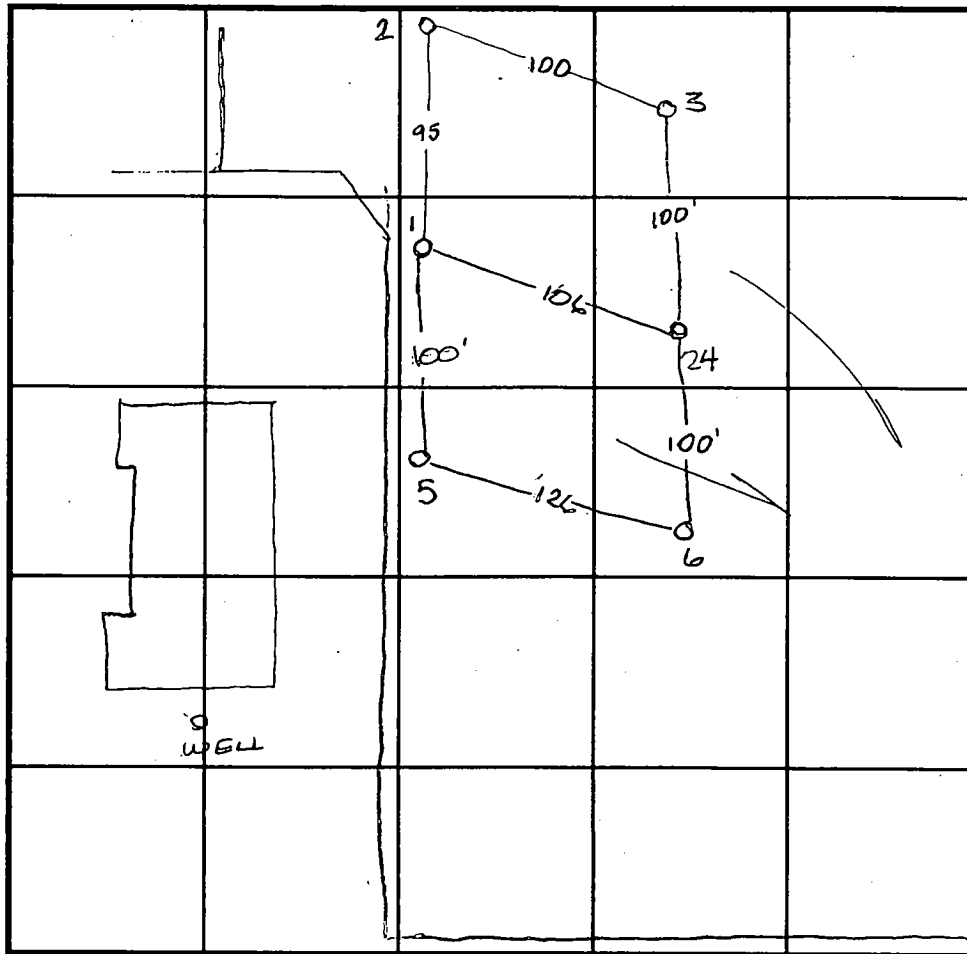
COUNTY #

SOIL PROFILE

0' 1 2
 yellow
 orange
 SiClM

2.0
 red
 pink
 w/
 15%
 yellow
 mica
 shale
 SiSalM

11.0



SOIL PROFILE

0'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

3.5
 red
 brown
 SiClM

3.0
 lgt
 yellow
 orange
 SiClM

8.0
 dark
 red
 w/
 15%
 mica
 saprolite
 red &
 mica white

11.0

4.5
 orange
 yellow
 SiClM
 sub &
 blocky
 strong
 struct.

3.0
 dark
 red w/
 mottles
 of bright
 yellow
 SiClM
 10%
 saprolite
 not H₂O

11.0

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
3-20-98	1	3.5 VII.0	9:53	10:00	10:00	10:07	7min
	2	3.5 VII.0	9:55	10:07	10:07	10:25	18min
	3	3.5 VII.5	9:57	9:58 ³⁰	9:58 ³⁰	10:01	2 1/2 min
	4	Visual	to 11.0-sec profile		—		OK
	5	3.5 VII.0	10:08	10:10	10:10	10:12	2min
	6	3.0 VI.2.0	10:06	10:14	10:14	10:22	8min

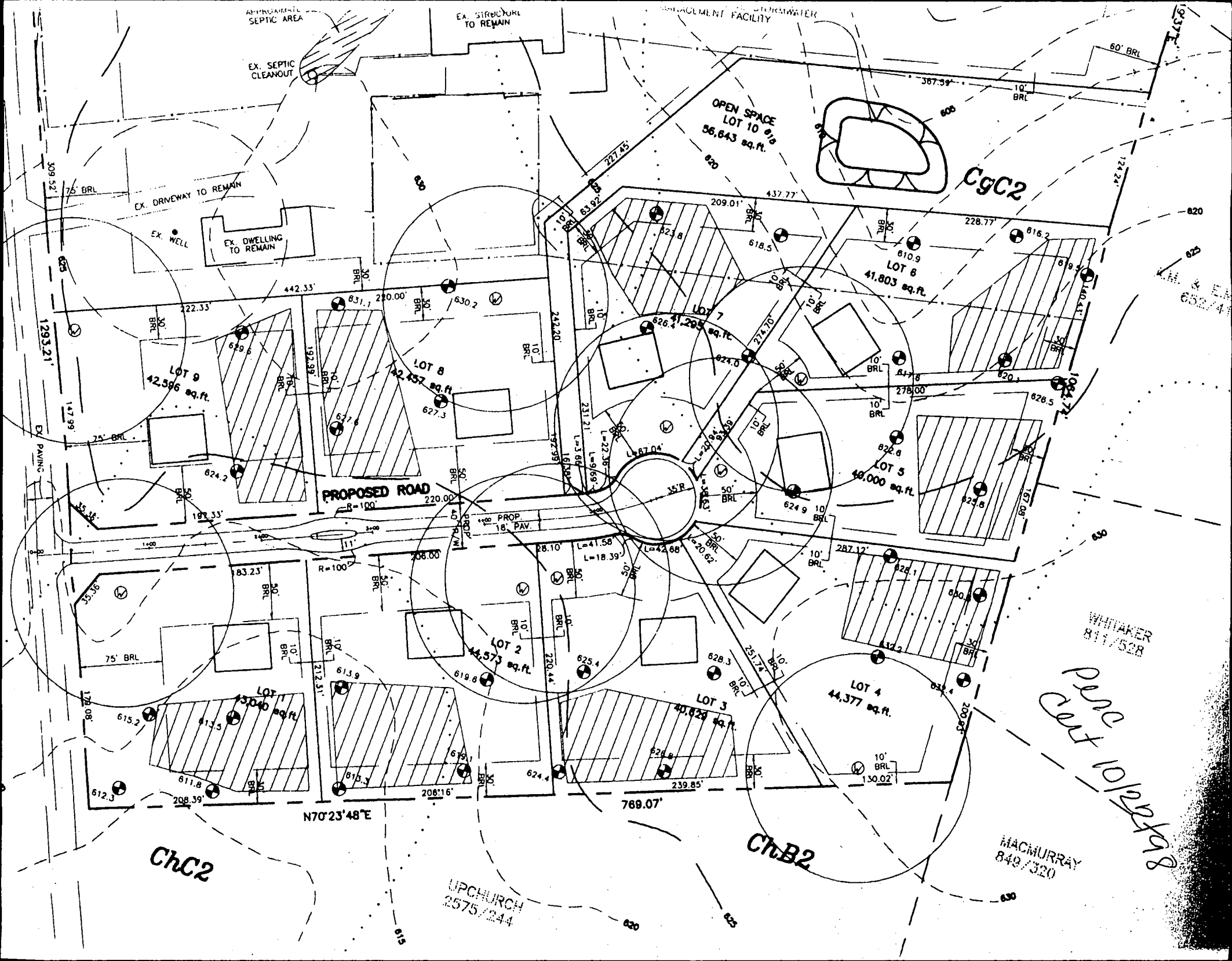
REMARKS _____

TYPE OF SOIL _____

TESTED BY Amy McMillen ALSO PRESENT Chuck Zepp

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____



APPROXIMATE SEPTIC AREA

EX. STRUCTURE TO REMAIN

WATER TREATMENT FACILITY

OPEN SPACE LOT 10 56,643 sq. ft.

Chc2

EX. DRIVEWAY TO REMAIN

EX. DWELLING TO REMAIN

LOT 9 42,596 sq. ft.

LOT 8 42,437 sq. ft.

LOT 7 42,295 sq. ft.

LOT 6 41,803 sq. ft.

PROPOSED ROAD

18' PROP. PAV.

LOT 5 48,000 sq. ft.

LOT 2 44,573 sq. ft.

LOT 3 40,828 sq. ft.

LOT 4 44,377 sq. ft.

Chc2

ChcB2

UPCHURCH 2575/244

WHITAKER 811/528

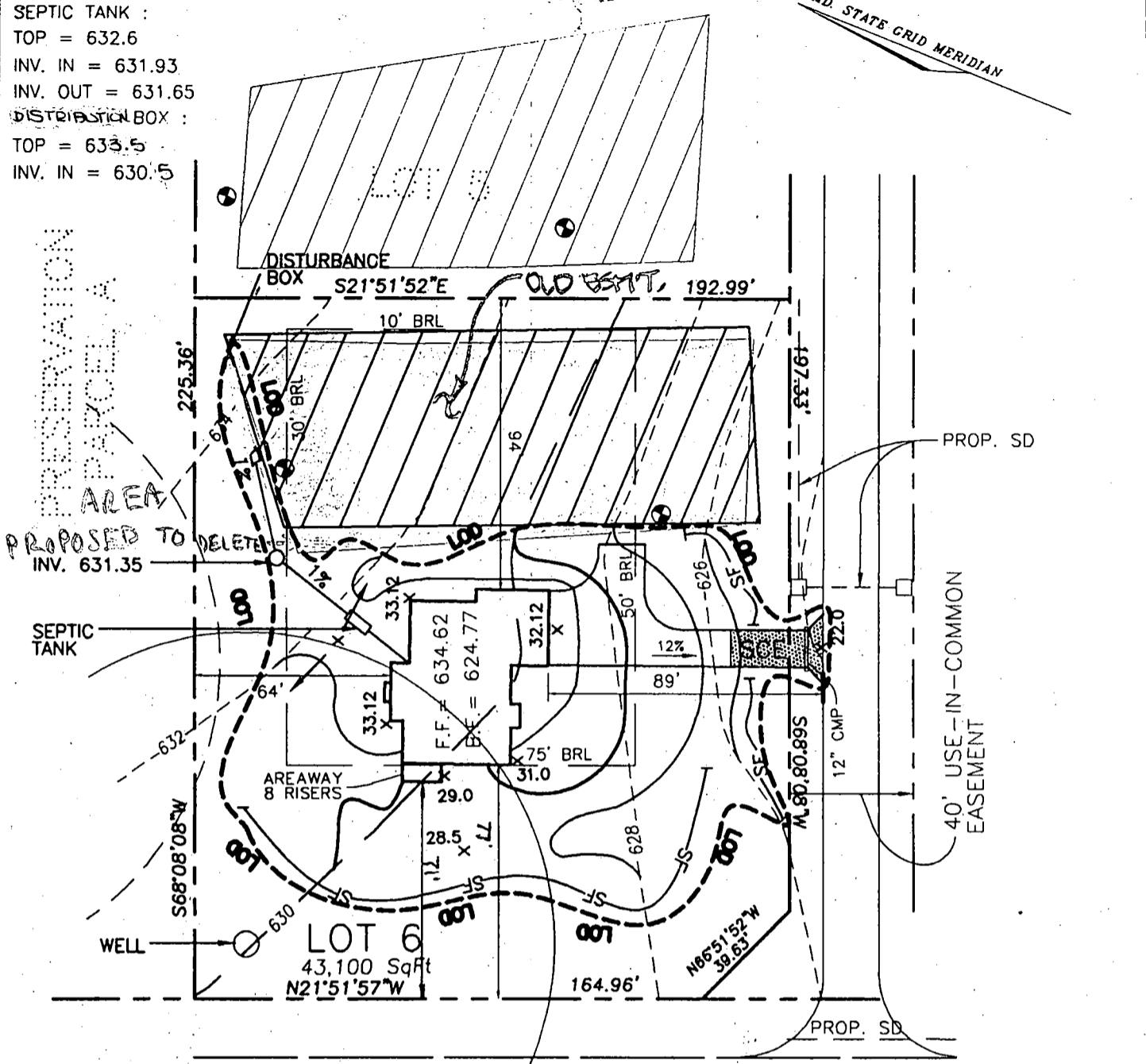
MACMURRAY 849/320

Prop Cont 10/22/78

HOUSE :
 INV. IN = 632.1
 SEPTIC TANK :
 TOP = 632.6
 INV. IN = 631.93
 INV. OUT = 631.65
 DISTRIBUTION BOX :
 TOP = 633.5
 INV. IN = 630.5

MD. STATE GRID MERIDIAN

PROPOSED TO DELETE
 INV. 631.35



Approved Septic System Plan
 Howard County Health Department

[Signature]
 Signature
 4/15/99
 Date

MINITHICUM ROAD

THIS AREA DESIGNATES A MINIMUM 10,000 SQ FT PRIVATE SEWAGE EASEMENT REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWAGE IS AVAILABLE. THESE EASEMENTS SHALL BE NULL AND VOID UPON CONNECTION TO A PUBLIC SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENT INTO THE PRIVATE SEWAGE EASEMENT. RECORDATION OF A MODIFIED SEWAGE EASEMENT SHALL NOT BE NECESSARY.

PERCOLATION TEST HOLES SHOWN HEREON HAVE BEEN FIELD LOCATED AND SHOWN AS

PERCOLATION AREAS AND WATER WELLS WITHIN 100 FEET OF PROPERTY LINES ARE SHOWN ON THIS PLAT.

APPROVED: FOR PRIVATE WATER AND PRIVATE SEWAGE SYSTEMS

Total linear feet of trench required 280 feet
 Width of trench(es) 3 feet
 Depth of trench(es) 5 feet
 Depth of stone required below distribution pipe 2 feet

COUNTY HEALTH OFFICER _____ DATE _____

- LEGEND**
- 478 — EXISTING CONTOUR
 - — PROPOSED CONTOUR
 - SF — SILT FENCE
 - LOD — LIMIT OF DISTURBANCE

PREPARED FOR:
 ALLAN HOMES, INC.
 P.O. BOX 1058
 COLUMBIA, MARYLAND 21044
 TELEPHONE: (410) 381-1414

VOGEL & ASSOCIATES
 ENGINEERS SURVEYORS PLANNERS
 3801 Park Avenue, Suite 101 • Ellicott City, Maryland 21043
 Tel 410.481.5828 Fax 410.485.3908

SCALE 1"=50'
 DRAWN BY J.C.O.
 CHECKED BY R.H.V.
 DATE APRIL 15, 1999
 W. O. # 98-139

PLOT PLAN
 FOR
 LOT 6
 HOLLY CREST, SECTION 1

TAX MAP 28 BLOCK 1 REFERENCE F-99-39
 PARCEL 4 5TH ELECTION DISTRICT HOWARD COUNTY, MARYLAND

C1 9626

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

FILL IN THIS FORM COMPLETELY PLEASE TYPE

THIS REPORT MUST BE SUBMITTED AFTER WELL IS COMPLETED. Ok 9/23/99 SRK

COUNTY NUMBER A59833E

ST/CO USE ONLY

DATE RECEIVED

03 26 99

DATE WELL COMPLETED

MM 03 DD 22 YY 99

DEPTH OF WELL

22 205 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL"

HO-94-2136

OWNER Carpenter last name LINTHICUM first name TOWN Dayton SUBDIVISION Holly Crest SECTION F LOT 6

WELL LOG

Not required for driven wells

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) YES (Y) NO (N)

TYPE OF GROUTING MATERIAL (Circle one) CEMENT (CM) BENTONITE CLAY (BC)

NO. OF BAGS 16 NO. OF POUNDS 1600

GALLONS OF WATER 96

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 30 ft.

(enter 0 if from surface)

CASING RECORD

casing types insert appropriate code below (ST) STEEL (CO) CONCRETE (PL) PLASTIC (OT) OTHER

MAIN CASING TYPE PL Nominal diameter top (main) casing (nearest inch)! 6 Total depth of main casing (nearest foot) 60

OTHER CASING (if used)

diameter inch depth (feet) from to

SCREEN RECORD

screen type or open hole (ST) STEEL (BR) BRASS (HO) OPEN HOLE (PL) PLASTIC (OT) OTHER

DEPTH (nearest ft.)

HO 58 205

23 24 26 30 32 36

38 39 41 45 47 51

SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH) 56 60

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

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q

70 72 74 75 76

TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min.) 12

METHOD USED TO MEASURE PUMPING RATE bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 37 ft.

WHEN PUMPING 48 ft.

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 INSTALLED PUMP (CIRCLE) (YES) (NO)

IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.

TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29

CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 35

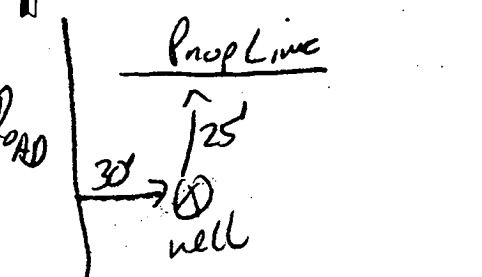
PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH (nearest ft.) 43 47

CASING HEIGHT (circle appropriate box and enter casing height)

(+) above LAND SURFACE (2) (nearest foot) (-) below

LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURES AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)



STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

Table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Rows include Top Soil, Sandy, Sandstone, MICKA, Sandstone, MICKA.

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED YES (Y) NO (N)

CIRCLE APPROPRIATE LETTER 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 26.04.04 "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 LIC. NO. 1 MSD 116 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. 1 MSD 112

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

B 4 4713

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL please print or type

STATE PERMIT NUMBER

HO-94-2136 fill in this form completely

Date Received (APA)

021699

OWNER INFORMATION

Carpenter's Constructing

P.O. Box 440

Clarksville MD 21027

LOCATION OF WELL

Howard County

Holly Crest I

DAY TOW

NEAREST TOWN

MILES FROM TOWN (enter 0 if in town)

DRILLER INFORMATION

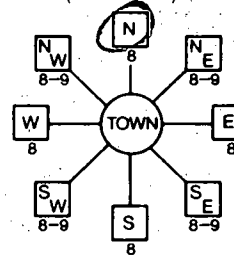
Ralph MAYNE MS D 116

Ralph MAYNE well Drilling

9120 Brown Church Rd Mt Airy

Signature Date 2-10-99

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Linthicum

NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

DISTANCE FROM ROAD

TAX MAP: BLK: PARCEL

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 5

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- Domestic Potable Supply & Residential Irrigation (circled)
Farming (Livestock Watering & Agricultural Irrigation)
Industrial, Commercial, Dewatering
Public Water Supply Well
Test, Observation, Monitoring
Geo-Thermal

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard Co A59833E

STATE SIGNATURE INSERT S

DATE ISSUED 021999 A M T W T F S S 021900

NORTH GRID 514 000 EAST GRID 802 000

APPROXIMATE DEPTH OF WELL 150 FEET

APPROXIMATE DIAMETER OF WELL 61 INCH

METHOD OF DRILLING (circle one)

- Bored (or Augered)
Jetted
Jetted & Driven
Air-Rotary
Air-PerCussion
Rotary (Hydraulic Rotary)
Cable
Reverse-Rotary
Drive-Point

REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)

- This well will not replace an existing well (circled)
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-contact local approving authority for policy on standby wells
This well will deepen an existing well

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE)

Not to be filled in by driller (MDE OR COUNTY USE ONLY)

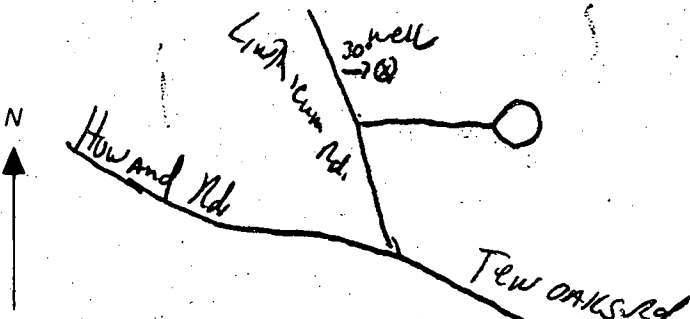
APPROX. PERMIT NUMBER G.A.P.

PERMIT No. HO-94-2136

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 802
N 514

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION



SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043

401-8938
410-313-2640

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation X
Replacement _____

Receipt # _____
Date _____

Name of Installer DAVID W. WISNIEWSKI SR.

Telephone 410-549-2118

License Number 8494

Certified Well Pump Installer _____ Well Driller _____ Registered Plumber X

Name of Property Owner KEVIN ANDERSON

Telephone 410-884-8489

Subdivision HOLLY CREST Lot # 6

Well Tag # HO-94-2136

Site Address 13801 HOLLY CREST LAKE

DAYTON, MD - 21036

Pump

- Type
 - Deep well jet _____
 - Shallow well jet _____
 - Submersible X
- Make GOULD
- Model # 7G507412L
- Capacity 10 GPM

Motor

- Horsepower 3/4
- RPM 3500
- Voltage _____
 - 110 _____
 - 220 X

Pitless Adapter

- Make HORVARD
- Model # PT 800
- Depth 4'

- Pump exceeds well capacity Yes _____ No X
- If Yes, is low pressure cutoff switch installed? Yes _____ No X
- What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors _____ Cable guards X Other _____

Tank

- Capacity 44 GAL.
- Pressure relief valve? YES
75 LBS

Piping

- Type CRII FLEX
- Size 1"
- NSF and/or BOCA Code approved YES
- Depth of supply line 4'

Well data

- Depth 185' ft.
- Yield 12 GPM
- Static water level 130 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.

7/28/99-WPI OK DNS-(SRW)

Signature of Applicant: _____

Date: 9-24-99

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

6/11/01 6/8/01
11:00

9/11/01 Follow-up 1pm
9/12/01 Co. AM

05-431131

ISSUE DATE: 6/11/2001

P- 515269

APPROVAL DATE: 6/8/01

**PERMIT
INDEXED**

A 59833-H

**ON-SITE SEWAGE DISPOSAL SYSTEM
HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH**

Whitworth Excavating IS PERMITTED TO INSTALL ALTER

ADDRESS: 12680 Clarksville Pike, 21029 PHONE NUMBER: 410-531-5033

SUBDIVISION: Holly Crest LOT NUMBER: 8

ADDRESS: 13812 Holly Crest Lane PROPERTY OWNER: Jean-Pierre Miller

SEPTIC TANK CAPACITY (GALLONS): 1250 (TOP SEAM)

PUMP CHAMBER CAPACITY (GALLONS): N/A

NUMBER OF BEDROOMS: 4

SQUARE FEET PER BEDROOM: 210

LINEAR FEET OF TRENCH REQUIRED: 280



TRENCHES:	Trench to be 2.0 feet wide. Inlet 4.0 feet below original grade. Bottom maximum depth 7.0 feet below original grade. Effective area begins at 4.0 feet below original grade. 3.0 feet of stone below distribution pipe.
LOCATION:	Begin trenches 95 feet off the left lot line and 40 feet off the left rear lot line as seen when facing the lot from Holly Crest Lane. Run trenches on contour toward the left rear lot line.
NOTES:	BEST TRENCH LOCATION WILL BE DETERMINED DURING LAYOUT INSP.

PLANS APPROVED: Amy Mc Millen OK SRK 4/16/01 DATE: 4-16-01

- NOTE: PERMIT VOID AFTER 2 YEARS
- NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
- NOTE: WATERTIGHT SEPTIC TANKS REQUIRED
- NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL
- NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS

**BLDG. PERMIT SIGNED
AND RETURNED 9/7/01 - 855131903**

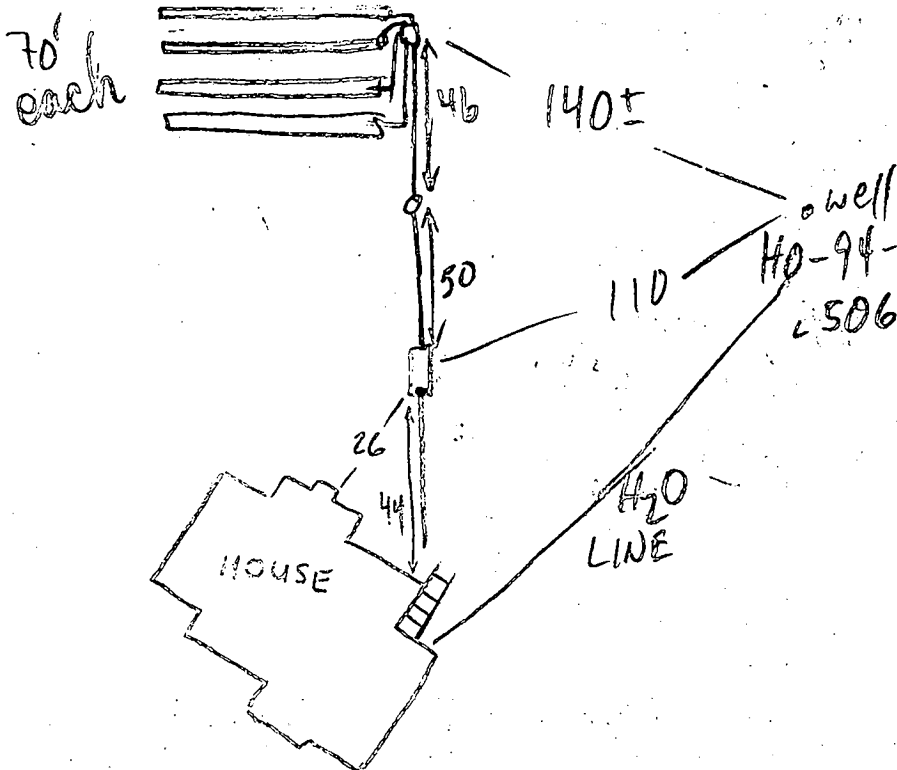
NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM PERMITTED RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

**BLDG. PERMIT SIGNED
AND RETURNED 12-19-01**

800 133666
Remediation + Finishing Services
71863 800 148059 - IG PD 02

AS9833-H

NOT TO SCALE



TRENCH DATA

TRENCH WIDTH 3
 TRENCH INLET DEPTH 4-5
 TRENCH BOTTOM DEPTH 7-8
 DEPTH OF STONE 3
 NUMBER OF TRENCHES 4
 TOTAL TRENCH LENGTH 280
 ABSORBENT AREA 840
 DISTRIBUTION BOX LEVEL
 BAFFLE IN DISTRIBUTION BOX

SEPTIC TANK DATA

SEPTIC TANK 1500TS GALLONS
 MANHOLE RISER _____
 6 INCH INSPECTION PORT

PUMP CHAMBER DATA

PUMP CHAMBER GALLONS NA
 MANHOLE RISER NA
 ALARM NA
 PUMP PERFORMANCE TEST NA

PRE-CONSTRUCTION INSPECTION: 6/1/01 - CONTOUR DIFFERENT THAN SHOWN ON APPROVED BP PLAN,

OK TO SET BOX AS REVISED ON BP PLAN AND RUN 4-70' TRENCHES ON CONTOUR TOWARDS LEFT OF LOT - (SRU)

INSPECTION COMMENTS: 6/6/01 S.T. SET, NO OTHER WORK (MR)

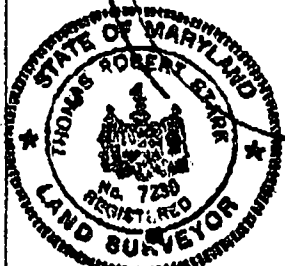
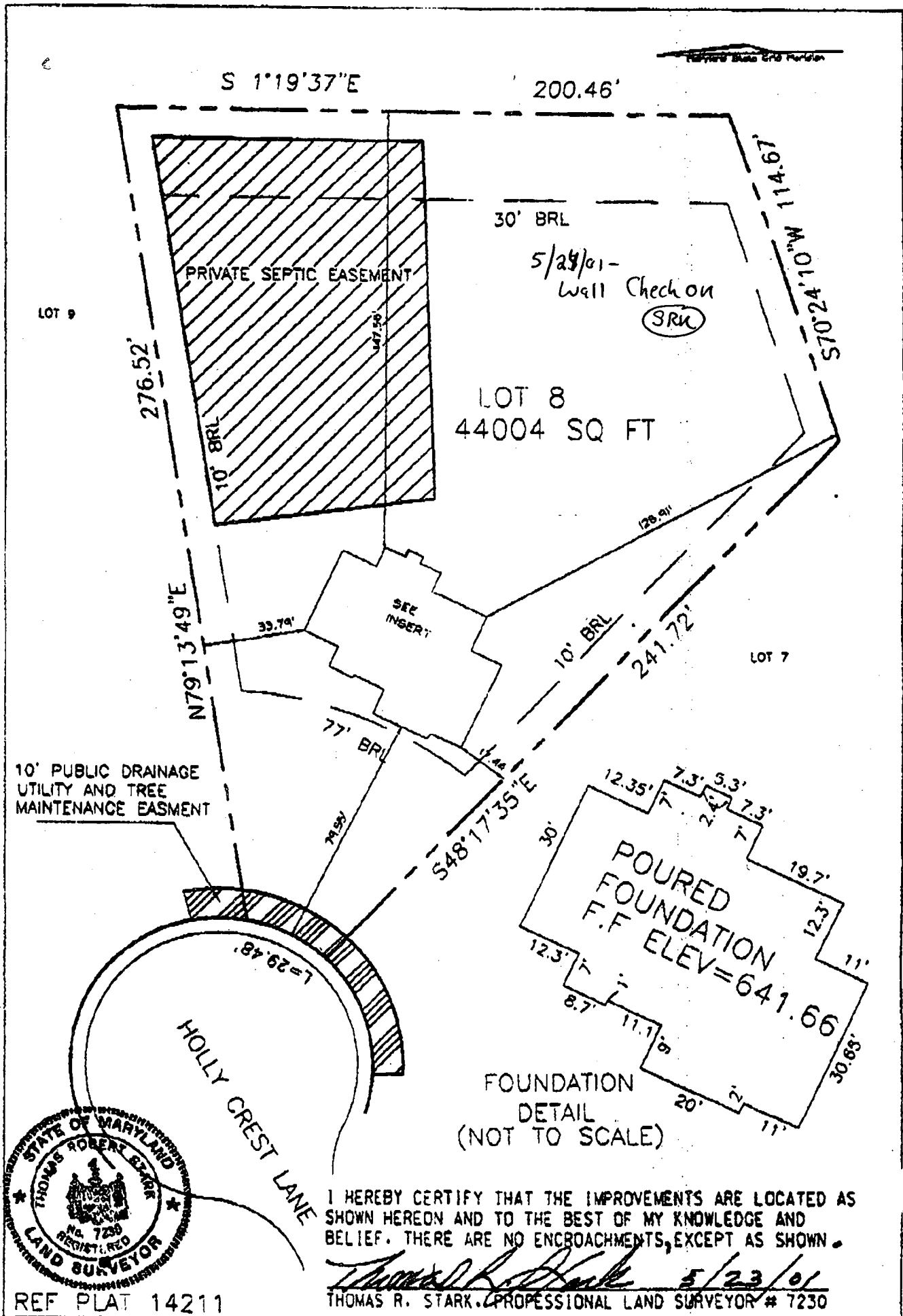
6/8/01 ^{NOON} 2 TRENCHES OK, CONTINUE, OK FOR LAST TWO TRENCHES TO RUN 1'± OFF GRADE W/ BOTTOM + GRAVEL LEVEL (MR)

6/8/01 ^{PM} NOW OBS'D ALL TRENCHES RUNNING DOWNHILL; NO IMPROVEMENT POSSIBLE, OK TO FINISH + COVER AS IS (MR)

6/6/01 WPI: GROUT CAP, CONDUIT, TAG, DEPTH ALL OK MR

INSPECTOR M. Riskin

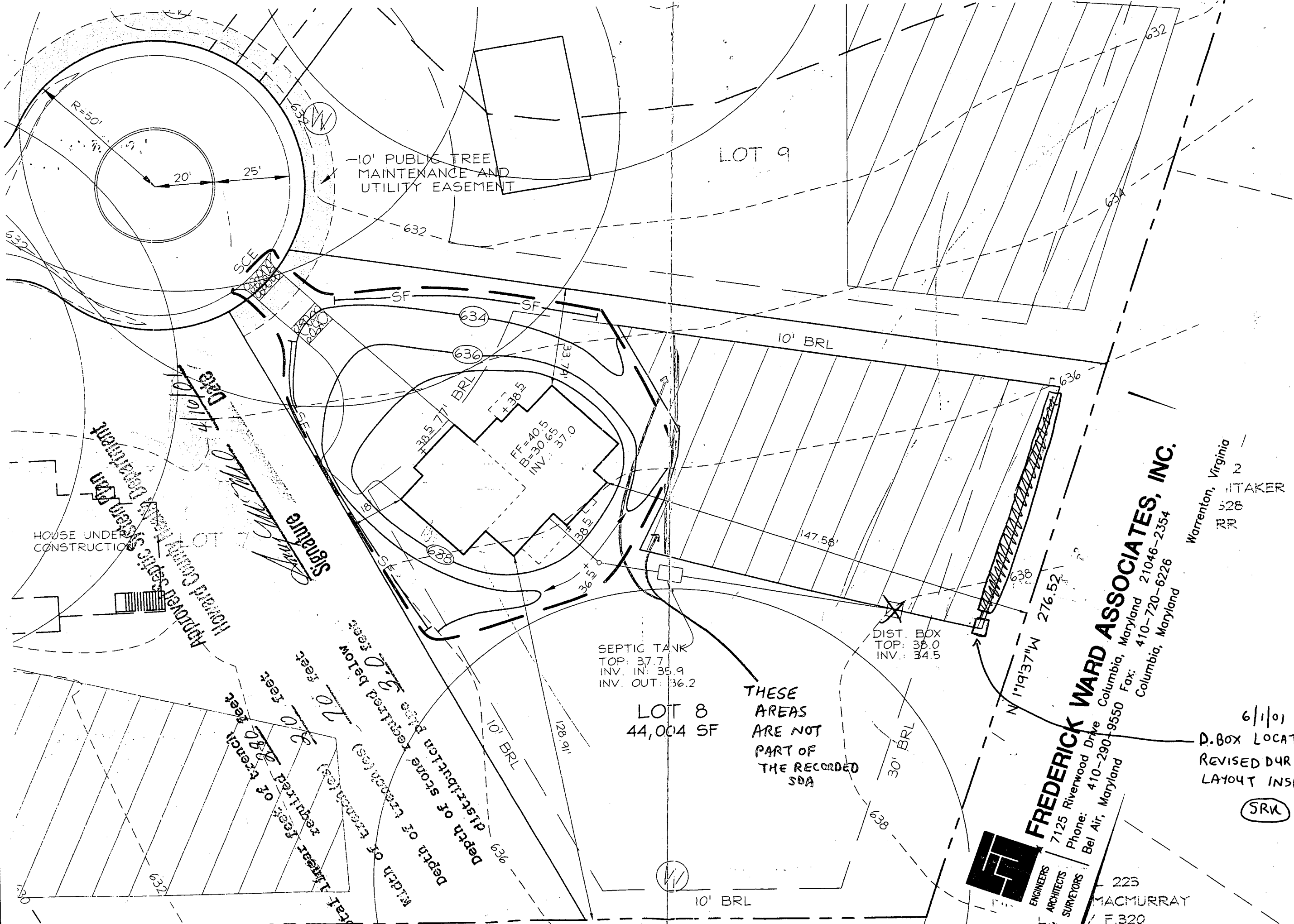
DATE SYSTEM APPROVED 6/8/01



REF PLAT 14211

I HEREBY CERTIFY THAT THE IMPROVEMENTS ARE LOCATED AS SHOWN HEREON AND TO THE BEST OF MY KNOWLEDGE AND BELIEF. THERE ARE NO ENCROACHMENTS, EXCEPT AS SHOWN.

Thomas R. Stark 5/23/01
 THOMAS R. STARK, PROFESSIONAL LAND SURVEYOR # 7230



-10' PUBLIC TREE
MAINTENANCE AND
UTILITY EASEMENT

LOT 9

LOT 8
44,004 SF

THESE
AREAS
ARE NOT
PART OF
THE RECORDED
SDA

SEPTIC TANK
TOP: 37.7
INV. IN: 35.9
INV. OUT: 36.2

DIST. BOX
TOP: 38.0
INV.: 34.5

Approved Septic System Plan
dated 4/11/01
Howard County, Maryland
Signature: [Signature]

HOUSE UNDER
CONSTRUCTION

FREDERICK WARD ASSOCIATES, INC.
 ENGINEERS
 ARCHITECTS
 SURVEYORS
 7125 Riverwood Drive
 Bel Air, Maryland
 Phone: 410-290-9550
 Fax: 410-720-6226
 Columbia, Maryland

Warrenton, Virginia
 2
 TAKER
 528
 70

6/1/01
 D.BOX LOCATION
 REVISED DURING
 LAYOUT INSP.

(SRW)

225
 MACMURRAY
 F.320
 ZONED: RR

**HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
WATER AND SEWERAGE PROGRAM
TEL: (410)313-2640 FAX: (410)313-2648**

Information Form for the Installation of the Well Pump, Pitless Adapter, and Supply Piping

NOTE: The installer is responsible for requesting an inspection prior to 9 am on the day of the desired inspection. No work is to be covered until approved by the Health Department. All installations must comply with the National Standard Plumbing Code (NSPC, as amended locally) and COMAR 26.04.04 (MD Well Construction Regulations). Submission of a complete form is required prior to Use and Occupancy approval.

Company Name: DELUXE PLUMBING & HEATING Telephone #: 410-549-2118
Address: 219 SILVER RUN VALLEY RD.
WESTMINSTER, MO. 64885

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer

License # and name of individual responsible for the field installation:

Name (Print): DAVID W. WISNIEWSKI, SR License# 8494

*A licensed individual must perform the actual installation. Apprentices must be under the supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification. Unlicensed individuals may be reported to the appropriate licensing agency.

Name of Property Owner: JEAN + CAROL MILER Telephone #: 410-995-0565
Subdivision: HOLLY CREST Lot #: 8 Well Tag #: HO-94-2506
Site Address: 13812 HOLLY CREST CIRCLE
DAYTON, MO. 64536

Submersible Pump Data

Make: GOULOS
Model #: 76507412L
Pump Capacity 7 GPM
Well Yield: 8.5 GPM

Pitless Adapter

Make: HARVARD
Model#: PT. 800
Depth: 4' (36" min)
NSF/WSC approved: YES

Well Cap and Electric Conduit

Two piece watertight cap: YES
Screened, vented well cap: YES
Cap secured to casing: YES
Conduit min 18" B.G.: YES
Conduit secured to well cap: YES

Depth of well encountered at time of pump installation: 300 (feet)
If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4

Torque arrestors: Cable guards or other acceptable method used- Must circle one

Safety rope, if used, attached to brass rope adapter or other acceptable method inside of well casing YES

Piping to house

Type: CEIL FLEX
PSI: 160 (160 psi min)
Depth of supply line: 4' (36" min)

House Connection

PVC sleeve to undisturbed soil at wall penetration: YES
Approximate length of sleeve: 8'
Sleeve caulked and sealed properly: YES

The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

[Signature]
Signature of company representative responsible for installation

6-25-01
date

For Health Department Use Only - Not to be completed by Installer

Date Insp. Requested: 6/6/01 Date Insp. Approved: 6/6/01 Inspector: MR SRK
Inspection Data: Pitless adapter watertight & water supply line at least 36" below grade ✓
Two piece cap installed and attached to casing securely ✓
Elec. conduit extends at least 18" below grade/attached to cap properly ✓
Safety rope not seen outside of well cap/casing ✓
Correct well tag attached properly and casing 8" above finished grade ✓
Water supply line sleeved adequately at house connection ✓
Adequate grout observed below pitless adapter ✓

C1 07552 SEQUENCE NO. (MDE USE ONLY)

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

THIS REPORT MUST BE SUBMITTED AFTER WELL IS COMPLETED. ✓
COUNTY NUMBER A59833H

ST/CO USE ONLY
DATE RECEIVED
MM DD YY
8 13

DATE WELL COMPLETED
MM DD YY
01 07 00
Depth of Well
22 300 26
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
HO-94-2506
28 29 30 31 32 33 34 35 36 37

OWNER Allan Homes
STREET OR RFD Holly Crest Lane
SUBDIVISION Holly Crest SECTION TOWN Bayton LOT 8

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	2	
Sandy	2	30	
Sand Stone	30	40	
MICKA	40	60	
Sand Stone	60	65	✓
MICKA	65	270	
Flint Rock	270	275	✓
MICKA	275	300	

GROUTING RECORD
WELL HAS BEEN GROUTED (Circle Appropriate Box) YES NO
TYPE OF GROUTING MATERIAL (Circle one)
CEMENT BENTONITE CLAY
NO. OF BAGS 11 NO. OF POUNDS 1100
GALLONS OF WATER 66
DEPTH OF GROUT SEAL (to nearest foot)
from 0 ft. to 30 ft.
(enter 0 if from surface)

CASING RECORD
casing types insert appropriate code below
STEEL CONCRETE
PLASTIC OTHER
MAIN CASING TYPE PL
Nominal diameter top (main) casing (nearest inch!) 6
Total depth of main casing (nearest foot) 48

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

SCREEN RECORD
screen type or open hole insert appropriate code below
STEEL BRASS OPEN HOLE
BRONZE PLASTIC OTHER

NUMBER OF UNSUCCESSFUL WELLS: 0
WELL HYDROFRACTURED YES NO

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 26.04.04 "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 LIC. NO. 1 MSD 16
DRILLERS SIGNATURE
LIC. NO. 1 MSD 119

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

C2 DEPTH (nearest ft.)

HO	46	300
8	9	11
15	17	21
23	24	26
30	32	36
38	39	41
45	47	51

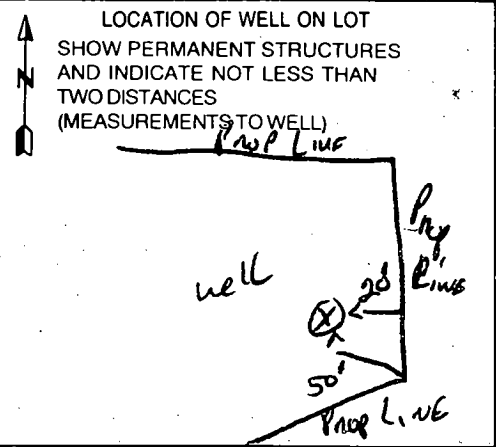
SLOT SIZE 1 2 3
DIAMETER OF SCREEN (NEAREST INCH)
56 60
from to

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

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

C3 PUMPING TEST
HOURS PUMPED (nearest hour) 3
PUMPING RATE (gal. per min.) 8.5
METHOD USED TO MEASURE PUMPING RATE Bucket
WATER LEVEL (distance from land surface)
BEFORE PUMPING 65 ft.
WHEN PUMPING 155 ft.
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 INSTALLED PUMP (CIRCLE) (YES or NO) YES NO
IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.
TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 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
- below } 2 (nearest foot)



APPLICATION

PERCOLATION TESTING

A 59833

P _____

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

DISTRICT _____

DATE 2/18/98

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 Allen Brown

ADDRESS 4609 Linthicum Road PHONE 410-531-2658

AGENT OR PROSPECTIVE BUYER Greg & Rhonda Carpenter

ADDRESS P.O. Box 440, Clarksville 21029 PHONE 301-498-9433

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 4

ROAD AND DESCRIPTION east side of Linthicum Road

TAX MAP 28 PARCEL # 4

SIZE OF LOT 40,067 SF TYPE BLDG. SFD
(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.

Cindy DelZoppo
(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

COUNTY #

SOIL PROFILE

19, 18, 21

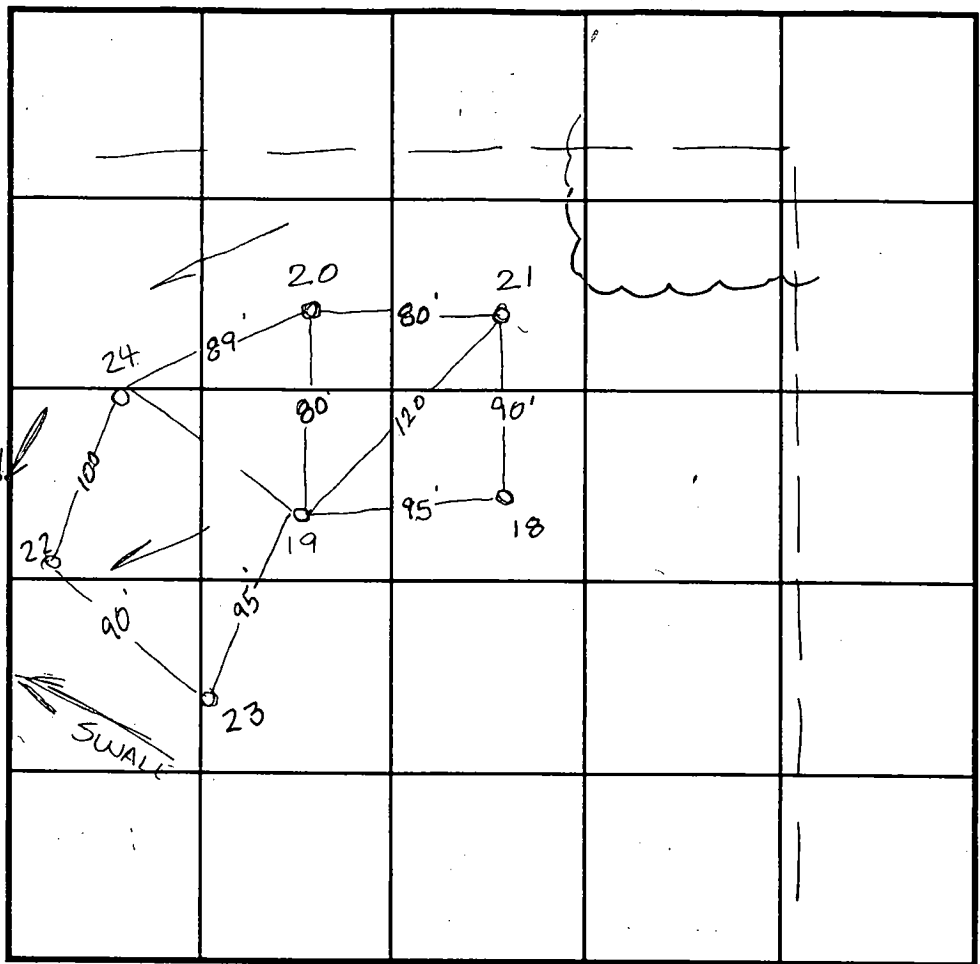
0' dark red SiCLM
 3.0 red orange SiSaLM 10%
 very decayed saprolite few yellow mottles not H₂O
 12.0

20

orange brown SiCLM
 2.5 dark pink SiLM blk/yel/white deposits No H₂O
 12.0

23

red brn SiCLM
 3.0 lgt red to pink SiSaLM some Fe, Mg & white patches No H₂O product of observed parent R_x
 12.0



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

SOIL PROFILE

22, 24

0' orange red SiCLM
 3.0 dark pink red SiSaLM micaceous
 10.0 dark pink SiSaLM 20% saprolite very decayed micaceous Mg, Fe dep
 12.5

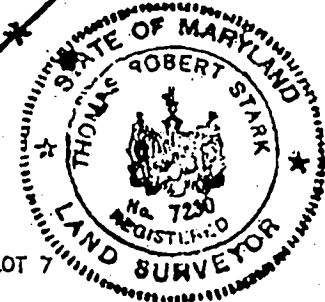
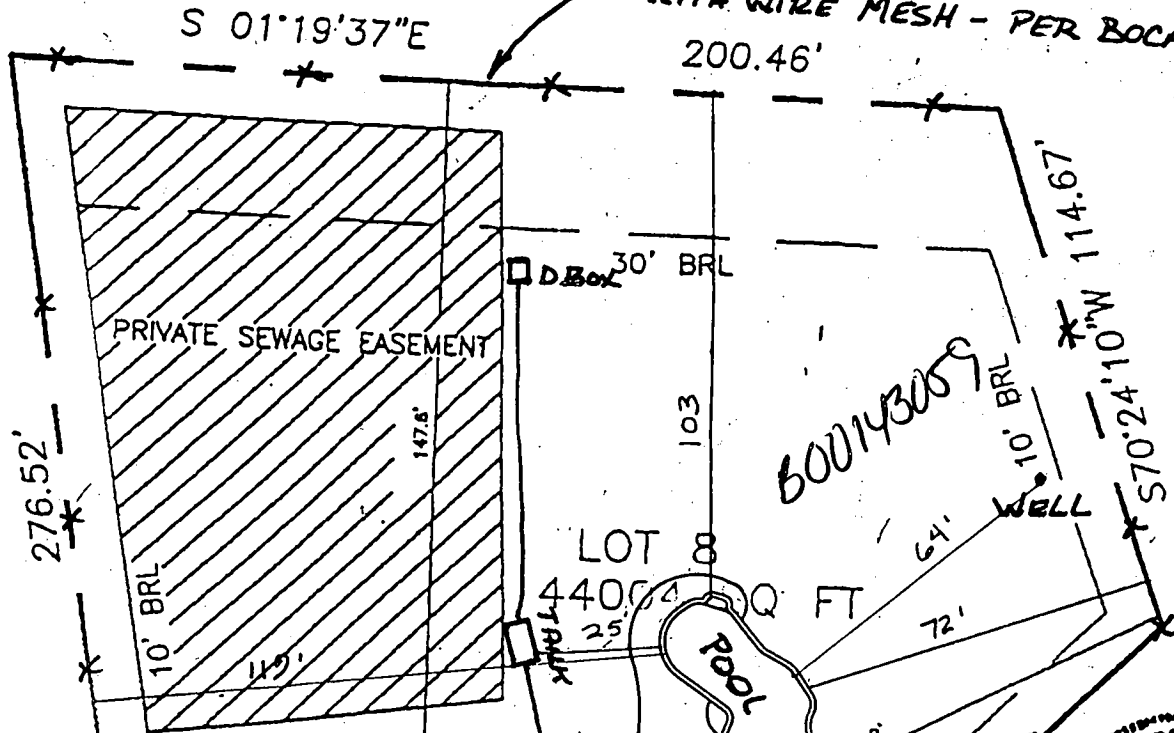
DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
3-20-98	18	3.0 / V12.0	11:38	11:43	11:43	11:54	11min	
	19	3.0 / V12.0	12:42	12:51	12:52	12:50	8min	
	21	3.5 / V11.0	12:50	12:52	12:52	1:00	8min	
	20	3.0 / V12.0	12:52				slow	
	24	3.5 / V11.0	1:00	1:04	1:04	1:10	6min	
	22	Visual	to 12.0 - see profile					OK
	23	3.5 / V12.0	1:04	1:10	1:10	1:22	12min	
	21	4.5 / V11.0	1:30	1:36	1:36	1:48	12min	

REMARKS _____
 TYPE OF SOIL _____
 TESTED BY Amy McMillen ALSO PRESENT Chuck Zepp
 TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____
 INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____

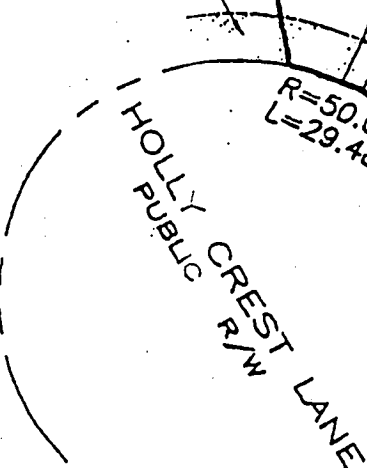
NOTICE: THIS PLAT DOES NOT PROVIDE THE ACCURATE IDENTIFICATION OF PROPERTY BOUNDARY LINES, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING OR REFINANCING. THIS PLAT CONTAINS A TOLERANCE OF ACCURACY OF 0.5' MORE OR LESS.

PROP 4' SPLIT RAIL FENCE WITH WIRE MESH - PER BOCA CODE

LOT 9



10' PUBLIC DRAINAGE UTILITY AND TREE MAINTENANCE EASEMENT



SCALE: 1" = 40'

DWELLING DETAIL (NOT TO SCALE)

I HEREBY CERTIFY THAT THE IMPROVEMENTS ARE LOCATED AS SHOWN AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THERE ARE NO ENCROACHMENTS, EXCEPT AS SHOWN.

Thomas R. Stark 08/20/01
THOMAS R. STARK, PROFESSIONAL LAND SURVEYOR # 7230

CURVE DATA TABLE

CURVE NO.	ARC	RADIUS	TANGENT	DELTA
C1	16.38'	280.00'	8.19'	3°21'
C2	26.01'	25.00'	14.32'	59°36'
C3	249.42'	50.00'	---	285°49'
C4	20.92'	25.00'	11.12'	47°57'
C5	28.51'	320.00'	14.26'	5°06'
C6	13.07'	320.00'	6.53'	2°20'
C7	18.39'	25.00'	9.63'	42°09'
C8	42.68'	40.00'	23.62'	61°08'
C9	60.47'	50.00'	34.55'	69°17'

PARCEL 219
ROBERT E. SHIELDS
LORETTA H. SHIELDS
L1418 / F.64
ZONED: RR

4/19/00
F-00.025

PARCEL 222
CHARLES S. WHITAKER
L811 / F.528
ZONED: RR

PARCEL 223
MICHAEL C. MACMURRAY
L649 / F.320
ZONED: RR

LOT 4
PLAT OF
HOLLY CREST
PLAT NO. 13666

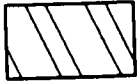



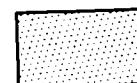
PLAT OF
HOLLY CREST
PLAT NO. 13666

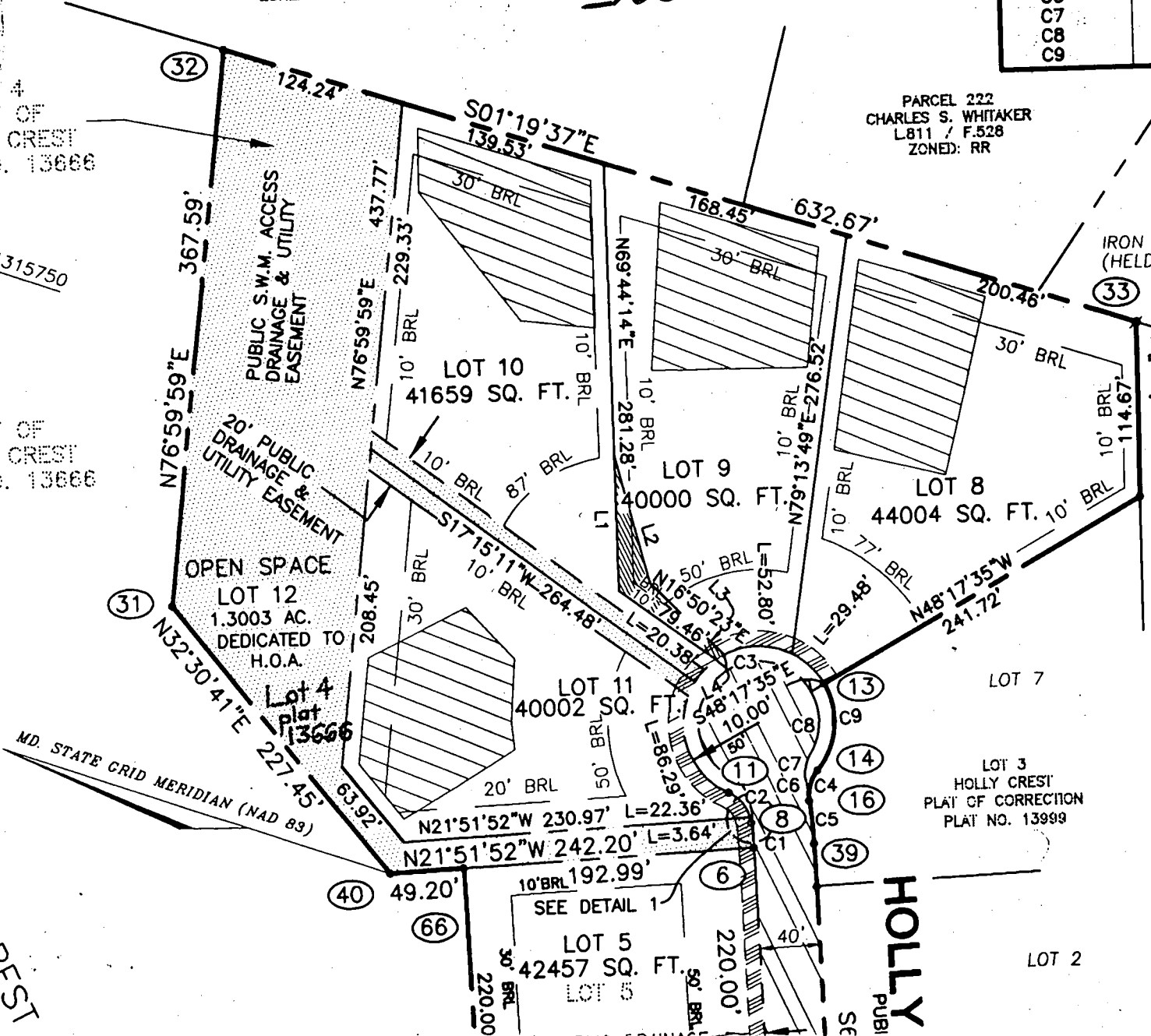
13666

HOLLY CREST

MD. STATE GRID MERIDIAN (NAD 83)

IRON PIN FOUND
(HELD)

-  PRIVATE USE TO BE ABAND
-  PRIVATE ACCE FOR LOT 10
-  10' PUBLIC MAINTENANCE
-  PUBLIC UTIL
-  PRIVATE SEW



LOT 3
HOLLY CREST
PLAT OF CORRECTION
PLAT NO. 13999

PARCEL 168
RONALD L. UPCHURCH
SHARON P. UPCHURCH
L2375 / F.244
ZONED: RR

HOLLY
PUBI

E 1315750
N 574250

LOT 2