

12/10/01
Layout
11:00

12/12/01
12:00

03 - 333 485

ISSUE DATE: 12/4/2001

APPROVAL DATE: 12/12/01

**PERMIT
INDEXED**

P 516433-D

A 59868-B

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

Fogle's Septic Clean, Inc. IS PERMITTED TO INSTALL ALTER

ADDRESS: 580 Obrecht Road PHONE NUMBER: 410-795-3432

SUBDIVISION: The Paddocks LOT NUMBER: 16

ADDRESS: 3700 Bold Ruler Court PROPERTY OWNER: Pulte Homes

SEPTIC TANK CAPACITY (GALLONS): 1250 (TOPSEAM)

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 3.0 feet wide. Inlet 3.0 feet below original grade. Bottom maximum depth 4.5 feet below original grade. Effective area begins at 4.0 feet below original grade. 1.5 feet of stone below distribution pipe.
LOCATION:	When facing lot from Bold Venture Ct., place the distribution box approx. 45 ft from left lot line and 35 ft from the rear lot line. Suggested trench lengths are 50, 50, 80, and 100 ft.
NOTES:	Trench spacing should be 10 feet center to center to conserve repair area. Trenches are not to be deeper than 4.5 feet.

PLANS APPROVED: BB OK KG 10/25/01 DATE: 10/25/01

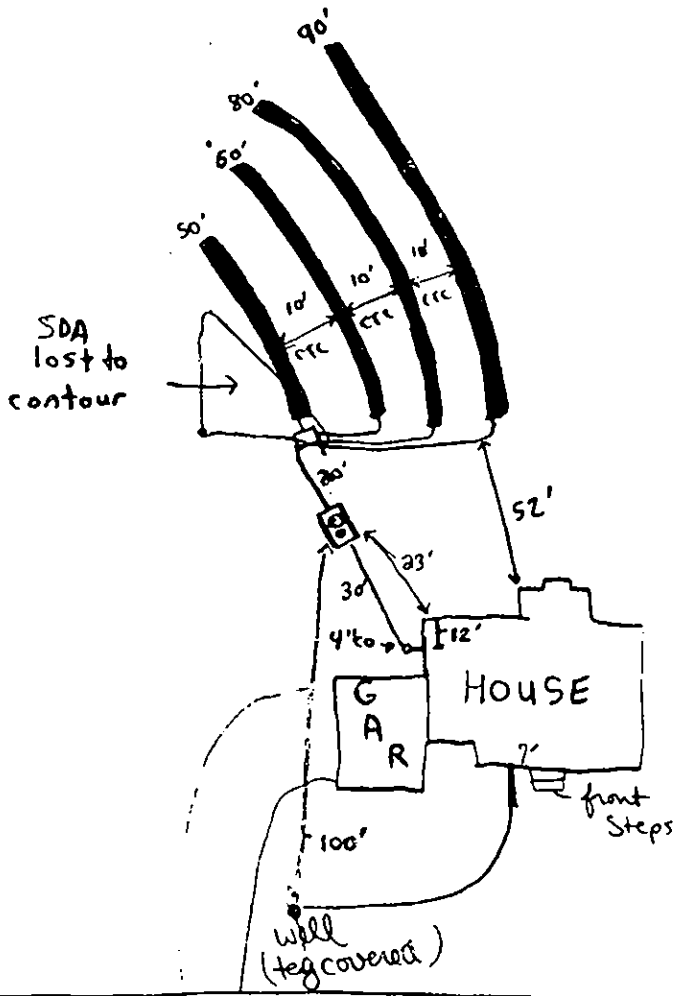
- NOTE: PERMIT VOID AFTER 2 YEARS
- NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
- NOTE: WATERTIGHT SEPTIC TANKS REQUIRED
- NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL.
- NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND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

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

A 59868-B

NOT TO SCALE

02X7002



BOLD RULER CT.

TRENCH DATA

TRENCH WIDTH 3'
 TRENCH INLET DEPTH 3'
 TRENCH BOTTOM DEPTH 4.5'
 DEPTH OF STONE 1.5'
 NUMBER OF TRENCHES 4
 TOTAL TRENCH LENGTH 280'
 ABSORBENT AREA 840 ft²
 DISTRIBUTION BOX LEVEL ✓
 BAFFLE IN DISTRIBUTION BOX ✓

SEPTIC TANK DATA

SEPTIC TANK 1250 GALLONS
 MANHOLE RISER On Center
 6 INCH INSPECTION PORT on front

PUMP CHAMBER DATA

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

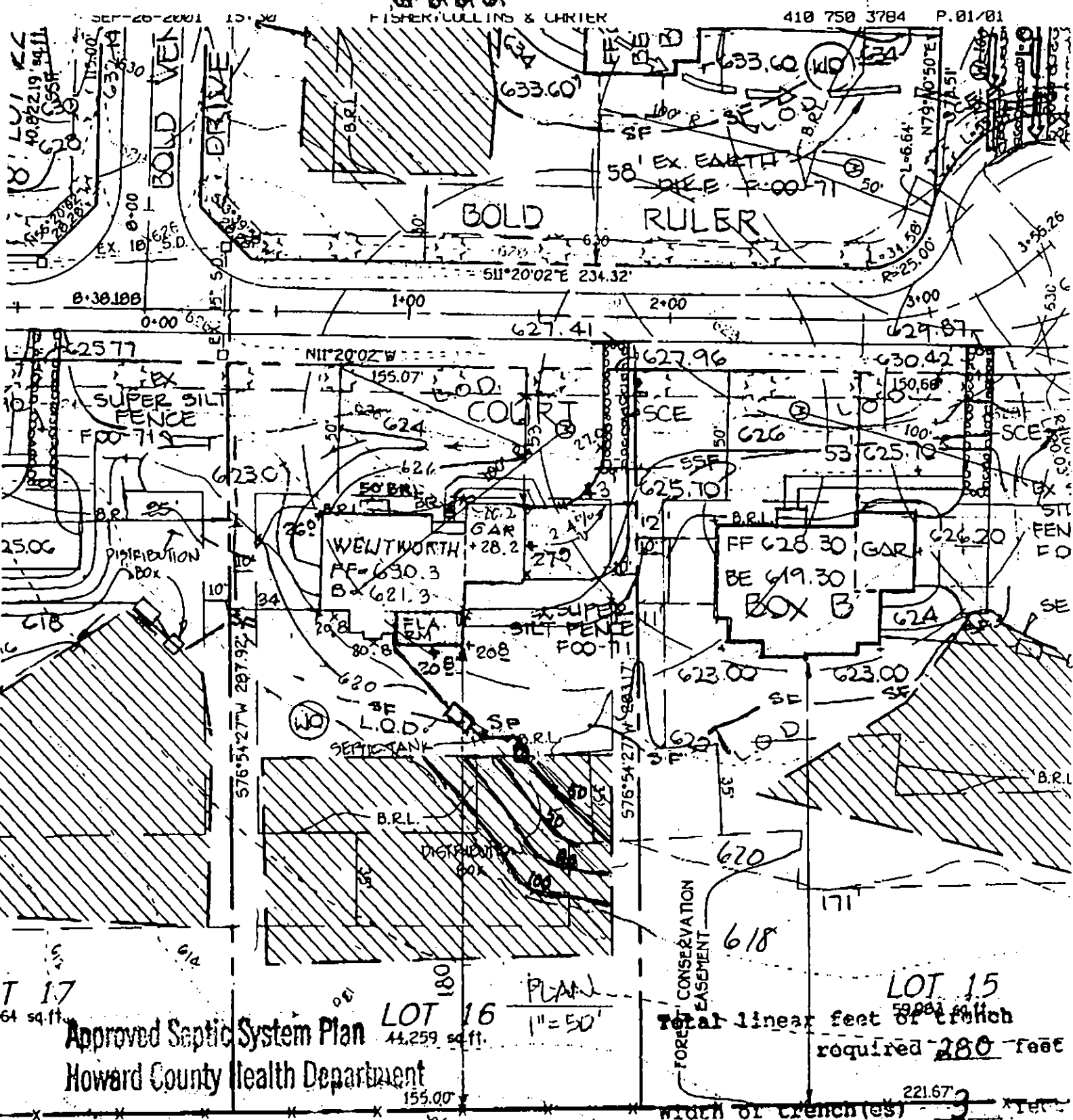
PRE-CONSTRUCTION INSPECTION: 12/10/01 - MET INSTALLER AT SITE - (SPANKY) - INSTALL PER

PLAN EXCEPT KEEP TRENCHES 7' ETE (10' CTC) & PUT A 50', 60', 80' & 90' TO HAVE 280';
TOP LEFT CORNER LOST TO CONTOUR PER PLAN - (SRK)

INSPECTION COMMENTS: 12/12/01 - OK TO COVER ALL WORK - (SRK)

INSPECTOR Steven R. Krug

DATE SYSTEM APPROVED 12/12/01



Approved Septic System Plan
Howard County Health Department

LOT 16
44,259 sq. ft.

LOT 15
59,881 sq. ft.
Total linear feet of trench required **280** feet
width of trench(es) **3** feet

Depth of trench(es) **4.5** feet

Depth of stone required below distribution pipe **1.5** feet

Brian Baker 10/25/01
Signature Date
3700 Bold Ruler Court Glenelg Md

LOT 15	LOT 16	LOT 17	LOT 18	LOT 19	LOT 21	LOT 22	LOT 23	LOT INFORMATION CHART
617.10	618.40	615.00	615.00	616.00	616.10	614.70	624.70	INVERT SEPTIC SYSTEM AT HOUSE
627.00	617.60	614.00	612.00	615.10	616.20	624.00	624.00	INVERT IN AT SEPTIC TANK
627.10	617.80	614.50	612.50	614.00	615.70	623.70	623.70	INVERT-OUT AT SEPTIC TANK
614.10	620.00	616.50	615.00	619.50	612.00	621.00	628.00	GRADE OVER SEPTIC TANK
621.50	617.80	614.00	612.00	616.00	615.00	623.50	625.00	INVERT AT DISTRIBUTION BOX
618.00	620.00	611.00	615.00	619.00	615.00	626.50	626.00	GRADE OVER DISTRIBUTION BOX
				614.20				INVERT AT PUMP TANK
				619.50				GRADE OVER PUMP TANK

ICATE
rol represents a practical and workable
ions and that it was prepared in
onservation District.
Date

Revised for HOWARD SCD and me * NO BASEMENT SERVICE
J. L. Wayful 11/1/00
Date
U.S.D.A.-Natural Resources
Conservation Service
This development plan is approved for soil erosion and sediment control by
the HOWARD SOIL CONSERVATION DISTRICT
John R. Blunt
Howard SCD Date

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: Fogles Well Drilling Telephone #: 410-795-9270
Address: 580 Obrecht Rd
Sykesville md 21784

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

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

Name (Print): Allen Compton Licenses: MSD 009

*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: Pulte Homes Telephone #: _____
Subdivision: The Paddocke Lot 16 Lot #: 16 Well Tag #: HO-94-2665
Site Address: 3700 Bold River Ct.

Submersible Pump Data

Make: Rid Sackett
Model #: SE F211-9612
Pump Capacity: 8 GPM
Well Yield: 8 GPM

Pitless Adapter

Make: Campbell
Model #: N/A
Depth: 40' (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 1 1/2" B.G.: yes

Depth of well encountered at time of pump installation: 300 (feet) Conduit secured to well cap: yes

If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.9.4

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 N/A

Piping to house

Type: 1" Black Plastic
PSI: 160 (160 psi min)
Depth of supply line: 42' (36" min)

House Connection

PVC sleeve to undisturbed soil at wall penetration: yes
Approximate length of sleeve: 5'
Sieve 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 of company representative responsible for installation: Allen Compton date: 4-17-02

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

Date Insp. Requested: 2/7/02 Date Insp. Approved: 2/7/02 Inspector: Sodkg 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 1 1/2" below grade/attached to cap properly ✓
Safety rope not seen outside of well cap/casing ✓
Correct well tag attached properly and casing 3" above finished grade ✓
Water supply line sleeved adequately at house connection ✓
Adequate grout observed below pitless adapter ✓

C 1 07663

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED AFTER WELL IS COMPLETED.

COUNTY NUMBER 13

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-2663

OWNER Mobbely GRETCHEN STREET OR RFD PFEFFENKONND TOWN GLENELG SUBDIVISION MOBBELY PARKWAY SECTION LOT 16

WELL LOG Not required for driven wells

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

PUMPING TEST

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

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

HOURS PUMPED (nearest hour) 03

DESCRIPTION (Use additional sheets if needed)

CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 18 NO. OF POUNDS 1642

PUMPING RATE (gal. per min.) 8

FEET FROM TO

GALLONS OF WATER 108 DEPTH OF GROUT SEAL (to nearest foot) from 0 to 59

METHOD USED TO MEASURE PUMPING RATE 1/24

Brown 0 63

WATER LEVEL (distance from land surface)

BEFORE PUMPING 25 ft. WHEN PUMPING 269 ft.

Gray 63 88

CASING RECORD casing types insert appropriate code below

TYPE OF PUMP USED (for test) A air P piston T turbine

White 88 89

MAIN CASING TYPE Nominal diameter top (main) casing Total depth of main casing

C centrifugal R rotary O other (describe below)

Gray 89 270

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

J jet S submersible

White 270 271

SCREEN RECORD screen type or open hole (insert appropriate code below)

TYPE OF PUMP INSTALLED DRILLER INSTALLED PUMP (CIRCLE) YES NO

Gray white 271 300

DEPTH (nearest ft.)

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

NUMBER OF UNSUCCESSFUL 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

WELL HYDROFRACTURED YES (Y) NO (N)

PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH (nearest ft.) 43 47

CIRCLE APPROPRIATE LETTER

CASING HEIGHT (circle appropriate box and enter casing height)

LAND SURFACE 02 (nearest foot)

A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED

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

NO Survey stakes

E ELECTRIC LOG OBTAINED

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

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)

P TEST WELL CONVERTED TO PRODUCTION WELL

DRILLERS LIC. NO. 1 M.S.D.009

TELESCOPE CASING LOG INDICATOR OTHER DATA

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 SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. 1 D

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

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

OWNER

STREET OR RFD

TOWN

SUBDIVISION

SECTION

LOT

WELL LOG

GROUTING RECORD

PUMPING TEST

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

TYPE OF GROUTING MATERIAL (Circle one)

HOURS PUMPED (nearest hour)

DESCRIPTION (Use additional sheets if needed)

CEMENT (CM) BENTONITE CLAY (BC)

PUMPING RATE (gal. per min.)

FEET FROM TO

GALLONS OF WATER DEPTH OF GROUT SEAL (to nearest foot)

METHOD USED TO MEASURE PUMPING RATE

Brown 0 63

WATER LEVEL (distance from land surface)

BEFORE PUMPING WHEN PUMPING

Gray 63 88

CASING RECORD

TYPE OF PUMP USED (for test)

White 88 89

MAIN CASING TYPE Nominal diameter top (main) casing Total depth of main casing

C centrifugal R rotary O other (describe below)

Gray 89 270

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

J jet S submersible

White 270 271

SCREEN RECORD screen type or open hole (insert appropriate code below)

TYPE OF PUMP INSTALLED DRILLER INSTALLED PUMP (CIRCLE) YES NO

Gray white 271 300

DEPTH (nearest ft.)

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

NUMBER OF UNSUCCESSFUL WELLS:

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

CAPACITY: GALLONS PER MINUTE (to nearest gallon)

WELL HYDROFRACTURED YES (Y) NO (N)

PUMP HORSE POWER

PUMP COLUMN LENGTH (nearest ft.)

CIRCLE APPROPRIATE LETTER

CASING HEIGHT (circle appropriate box and enter casing height)

LAND SURFACE

A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED

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

NO Survey stakes

E ELECTRIC LOG OBTAINED

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

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)

P TEST WELL CONVERTED TO PRODUCTION WELL

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LIC. NO. 1 D

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DATE WELL COMPLETED

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STREET OR RFD

TOWN

SUBDIVISION

SECTION

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CAPACITY: GALLONS PER MINUTE (to nearest gallon)

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PUMP HORSE POWER

PUMP COLUMN LENGTH (nearest ft.)

CIRCLE APPROPRIATE LETTER

CASING HEIGHT (circle appropriate box and enter casing height)

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NO Survey stakes

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STREET OR RFD

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SECTION

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WELL HYDROFRACTURED YES (Y) NO (N)

PUMP HORSE POWER

PUMP COLUMN LENGTH (nearest ft.)

CIRCLE APPROPRIATE LETTER

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WELL LOG

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TYPE OF GROUTING MATERIAL (Circle one)

HOURS PUMPED (nearest hour)

DESCRIPTION (Use additional sheets if needed)

CEMENT (CM) BENTONITE CLAY (BC)

PUMPING RATE (gal. per min.)

B 1 13826

SEQUENCE NO (MDE USE ONLY)

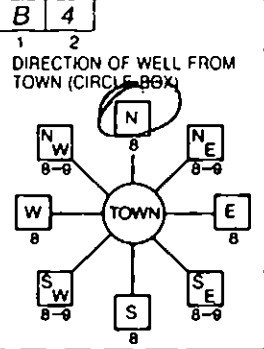
STATE OF MARYLAND PERMIT TO DRILL WELL please print or type

STATE PERMIT NUMBER Ho - 94 - 2663 fill in this form completely

OWNER INFORMATION: Date Received (APA), 8 MM DD YY 13, MOSSBERY GRETCHEN, RT 144, WEST FRIENDSHIP RD 21794

LOCATION OF WELL: HOWARD COUNTY, MOSSBERY PROP, SECTION 44-46, LOT 48-50, GLENELG NEAREST TOWN, 4 MILES FROM TOWN

DRILLER INFORMATION: ARNOLD COMPTON M5D009, FOGAR'S WELL DRILLING, 580 BARRENT RD SYDNEYVILLE, Allen Compton 2-22-00



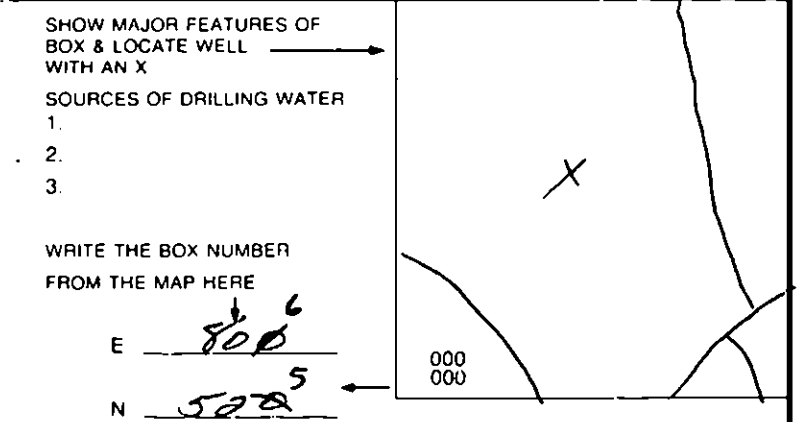
DIFFERDORN NEAR WHAT ROAD, ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX), DISTANCE FROM ROAD 2300 FT, TAX MAP 20, BLK 1-7, PARCEL 41-234

WELL INFORMATION: APPROX. PUMPING RATE 5 GAL PER MIN, AVERAGE DAILY QUANTITY NEEDED 500 GAL PER DAY

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL: HOWARD COUNTY, STATE SIGNATURE, DATE ISSUED 030200, CO SIGNATURE Q'will, EXP DATE 3/101, NORTH GRID 525, EAST GRID 0806

USE FOR WATER (CIRCLE APPROPRIATE BOX): DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION

APPROXIMATE DEPTH OF WELL 200 FEET, APPROXIMATE DIAMETER OF WELL 6 INCH



METHOD OF DRILLING (circle one): BORED (or Augered) AIR-ROTary, JETTED, Jetted & DRIVEN, ROTARY (Hydraulic Rotary), CABLE, REVERSE-ROTary, Drive-POINT

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX): THIS WELL WILL NOT REPLACE AN EXISTING WELL

Not to be filled in by driller (MDE OR COUNTY USE ONLY): APPROX PERMIT NUMBER, PERMIT No Ho - 94 - 2663

SPECIAL CONDITIONS: NOTE - APPROVING AUTHORITY'S SHOULD USE SEPARATE SHEET IF NEEDED

APPLICATION

PERCOLATION TESTING

A _____

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2840

DISTRICT _____

DATE 3/9/98

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 _____

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER WINCHESTER HOMES INC. c/o MR. KEITH KUBISTA

ADDRESS 6305 IVY LANE SUITE 800 PHONE (301) 489-1120
GREENBELT MD. 20770

PROPERTY LOCATION:

SUBDIVISION MOBBERLY PROPERTY LOT NO. 20 19 ¹⁷⁹ 16

ROAD AND DESCRIPTION BURNT WOODS ROAD

TAX MAP 22 PARCEL # 141, 2, 234 & 530

SIZE OF LOT 1 AC. CLUSTER TYPE BLDG. S.F.D.
(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. Zacharia Y. Fisch
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

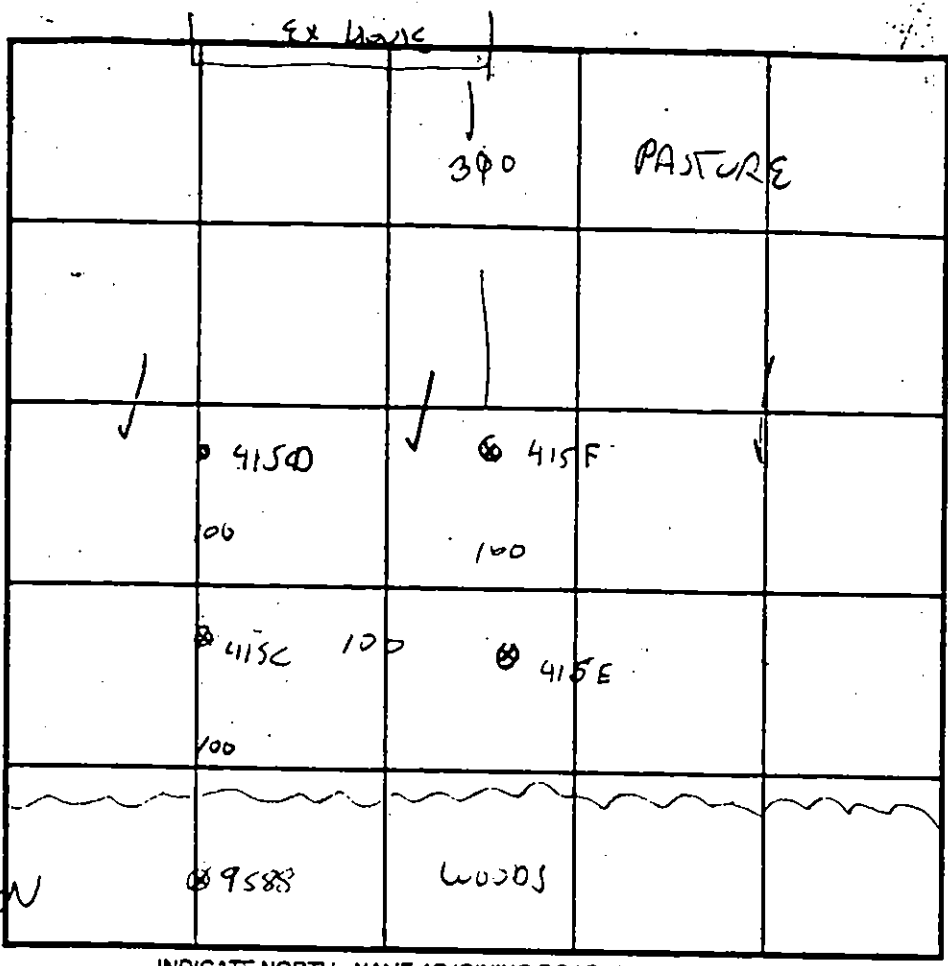
REASONS FOR REJECTION OR HOLDING _____

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'
 E
 SIMILAR TO C
 DULL GREY
 SC
 STAYS @ 9'
 WATER 12"
 4150
 LIGHT TAN
 SC



SOIL PROFILE
 415C
 0'
 6'
 STRONG OR LOAM
 3'
 STRONG OR SILT
 6'
 DULL GREY w/ BLACK STREAKS
 LOOKS SATURATED BELOW 8'
 WATER
 12'
 LOT 19

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
5/15/99	415C	3.5/2	2:40	2:50	→	3:02	12AW ✓
	4150	3.5/11.5	VISUAL	OK			OK
	415E	3.3	12:57	2:59	→	3:01	2AW
	415E	4/12.5					OK

REMARKS ALL SOILS MICACEOUS
 TYPE OF SOIL _____
 TESTED BY G. SAVAGE ALSO PRESENT _____
 TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____
 INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____

APPLICATION

PERCOLATION TESTING

A _____

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2840

DISTRICT _____

DATE 3/9/98

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 _____

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER WINCHESTER HOMES INC. c/o MR. KEITH KUBISTA

ADDRESS 6305 IVY LANE SUITE 800 PHONE (301) 489-1120
GREENBELT MD. 20770

PROPERTY LOCATION:

SUBDIVISION MOBBERLY PROPERTY LOT NO. 15¹⁶

ROAD AND DESCRIPTION BURNT WOODS ROAD

TAX MAP 22 PARCEL # 141, 2, 234 & 530

SIZE OF LOT 1 AC. CLUSTER TYPE BLDG. S.F.D.
(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.

Zacharia Y. Fisch
(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

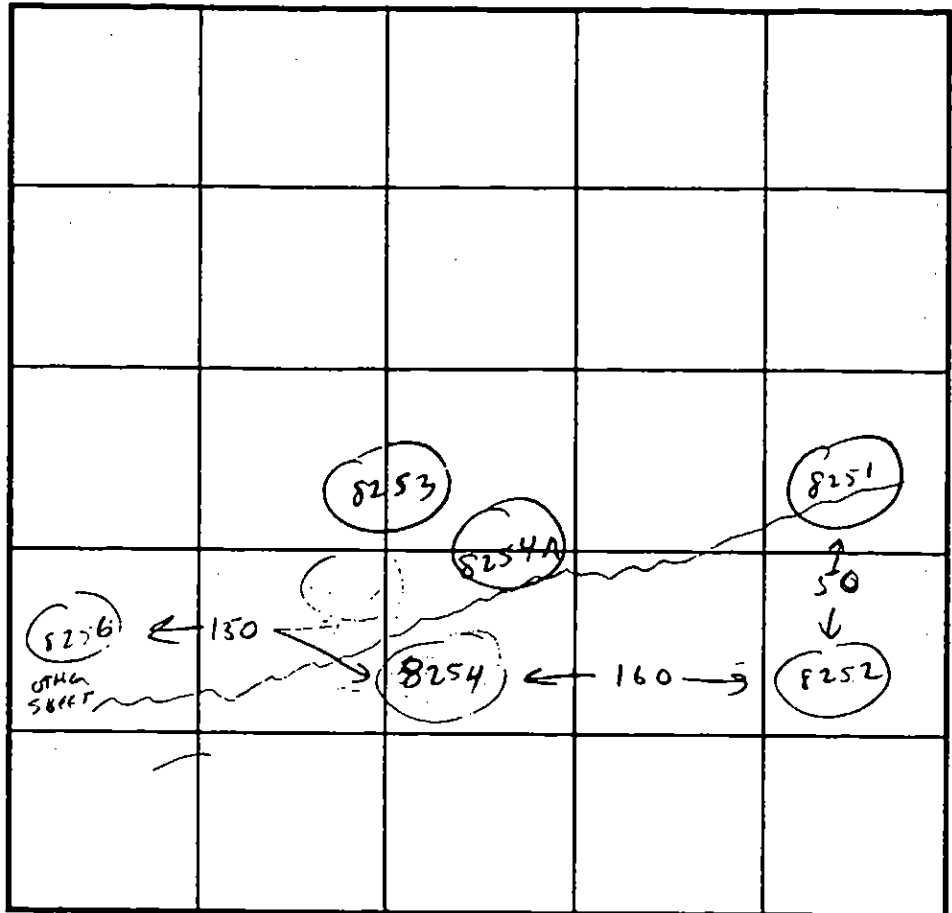
COUNTY #

SOIL PROFILE

0' **8252**
 CLAY
 5' TRANSITION
 7' STRONG GREY "GLEYED"
 SANDY INDICATION OF WATER
 15' WATER

SOIL PROFILE

0' **8253**
 CLAY
 3' LIGHT GRAY SILT LOAM
 11' DARKER GRAY MOTTLED
 17' WET



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

8254
 ABANDONED
 WATER
 NO PROFILE
 TAKE

8251
 3' CLAY TRANSITION
 4' TAN MICA LOAM
 11' GRAY MOTTLER
 15' WATER
 17'

8254A
 4' CLAY MICA LOAM
 11' GRAY

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
4/9/99	8252	6	12:29	12:34	12:34	12:40	6 min	
		WATER @ 15'	INDICATIONS OF WATER		TO 7'		FAIL	
	8251	4	12:26	12:28	12:28	12:32	4 min	
		WATER @ 15'	INDICATIONS OF WATER		TO 11'		OK SHALLOW	
	8254	ABANDONED - WATER						
	8254A	VIS	OK FOR SHALLOW (GOES GOOD 4-11')					
	8253	4	12:19	12:21	12:21	12:24	3 min	
		VIS	OK 4-11' - OK SHALLOW					

REMARKS FIELD LOCATED "TREE TRUNK LINES" SEEMS TO DEFINE
LIMIT OF APPROPRIABLE SOLS FOR HOLDS IN THIS SHEET.
 TYPE OF SOIL _____
 TESTED BY CWILSON / STEVE KRIEG ALSO PRESENT MIKE FITZGERALD
 TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____
 INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____

APPLICATION

PERCOLATION TESTING

A _____
P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525 H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2840

DISTRICT _____
DATE 3/9/98

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 _____
ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER WINCHESTER HOMES INC. c/o MR. KEITH KUBISTA
ADDRESS 6305 IVY LAKE SUITE 800 PHONE (301) 489-1120
GREENBELT MD. 20770

PROPERTY LOCATION:
SUBDIVISION MOBBERLY PROPERTY LOT NO. 15¹⁶
ROAD AND DESCRIPTION BURNT WOODS ROAD

TAX MAP 22 PARCEL # 141, 2, 234 + 530
SIZE OF LOT 1 AC. CLUSTER TYPE BLDG. S.F.D.
(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.

Zacharia Y. Fisch
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

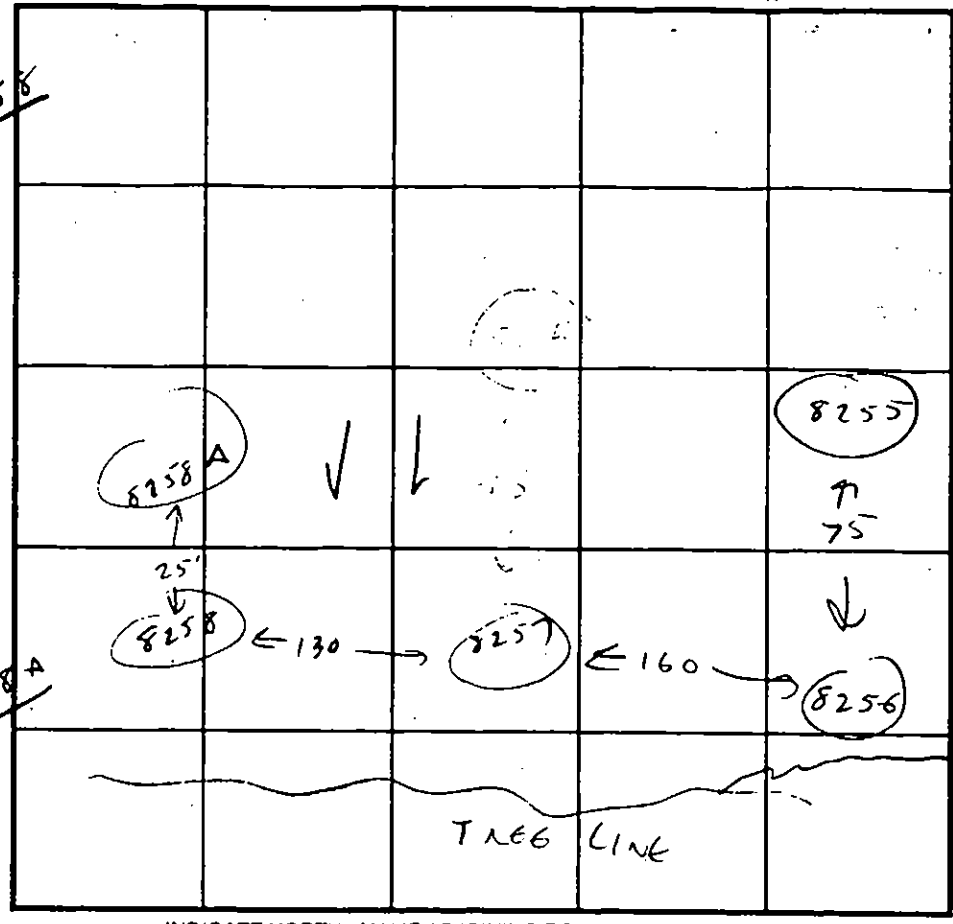
REASONS FOR REJECTION OR HOLDING _____

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 LNT
 0' 8258
 CLAY
 3' MIXED
 5'
 8' HAND MOTION
8258A
 CLAY
 3' MIXED
 5' MICALON
8257
 CLAY
 3 1/2'
 9' SOFT SANDSTONE ZONIC SOIL
 10'
 13 1/2'



SOIL PROFILE 8256
 0' CLAY
 3' MICA LOAM
 45% SAND
 5. APPROXIMATE
 11' GLEYED
 16' WATER
8255
 CLAY
 4' MICA SILT LOAM
 16'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
4/9/99	8255	ABANDONED	11:02	HAND MOTION (A)	8'		FAIL	X
	8258A	4'	11:57	12:02	12:02	12:08	6 MIN	✓
			vis OK 4-10 1/2					
	8257	9 1/2'	11:59	12:02	12:02	12:06	4 MIN	✓
			vis OK 4-13					
	<u>8256</u>	4'	12:05	12:09	12:09	12:16	7 MIN	✓
			SHALLOW ONLY - WATER TABLE INDICATOR 5 TO 11'					
	<u>8255</u>	4 1/2'	12:11	12:13	12:13	12:15	2 MIN	✓
			OK 4-16'					

REMARKS SOME UNSUITABLE SOILS OUTSIDE THE TREE LINE.
 TYPE OF SOIL _____
 TESTED BY C. Williams / STEVE KATIG ALSO PRESENT MIKE FITZGERALD
 TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____
 INLET DEPTH _____ MAXIMUM BOTTOM DEPTH 5' SQ. FT./BEDROOM _____

APPLICATION

PERCOLATION TESTING

A 59868

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2840

DISTRICT _____

DATE 3/9/98

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 _____

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER WINCHESTER HOMES INC. c/o MR. KEITH KUBISTA

ADDRESS 6305 IVY LANE SUITE 800 PHONE (301) 489-1120
GREENBELT MD. 20770

PROPERTY LOCATION:

SUBDIVISION MOBBERLY PROPERTY LOT NO. 18/16

ROAD AND DESCRIPTION BURNT WOODS ROAD

TAX MAP 22 PARCEL # 141, 2, 234 & 530

SIZE OF LOT 1 AC. CLUSTER TYPE BLDG. S.F.D.
(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.

Zacharia Y. Fisch
(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

APPLICATION

PERCOLATION TESTING

A 59868

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2840

DISTRICT _____

DATE 3/9/98

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 _____

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER WINCHESTER HOMES INC. c/o MR. KEITH KUBISTA

ADDRESS 6305 IVY LAKE SUITE 800 PHONE (301) 489-1120
GREENBELT MD. 20770

PROPERTY LOCATION:

SUBDIVISION MOBBERLY PROPERTY LOT NO. A 21

ROAD AND DESCRIPTION BURNT WOODS ROAD

TAX MAP 22 PARCEL # 141, 2, 234 & 530

SIZE OF LOT 1 AC. CLUSTER TYPE BLDG. S.F.D.
(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.

Zacharia G. Fisch
(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 _____

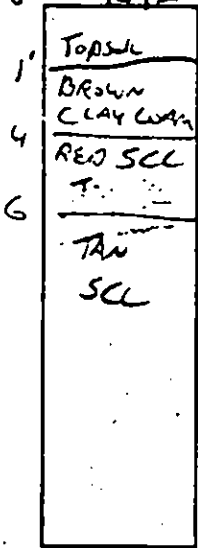
SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

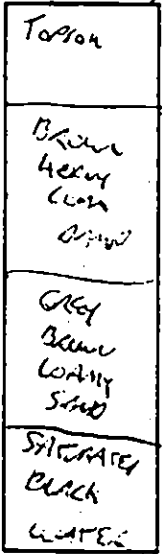
A 59868

COUNTY #

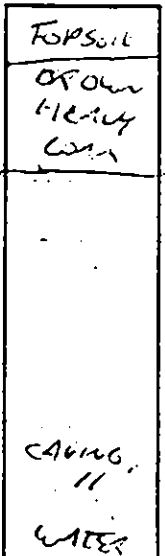
SOIL PROFILE
9592



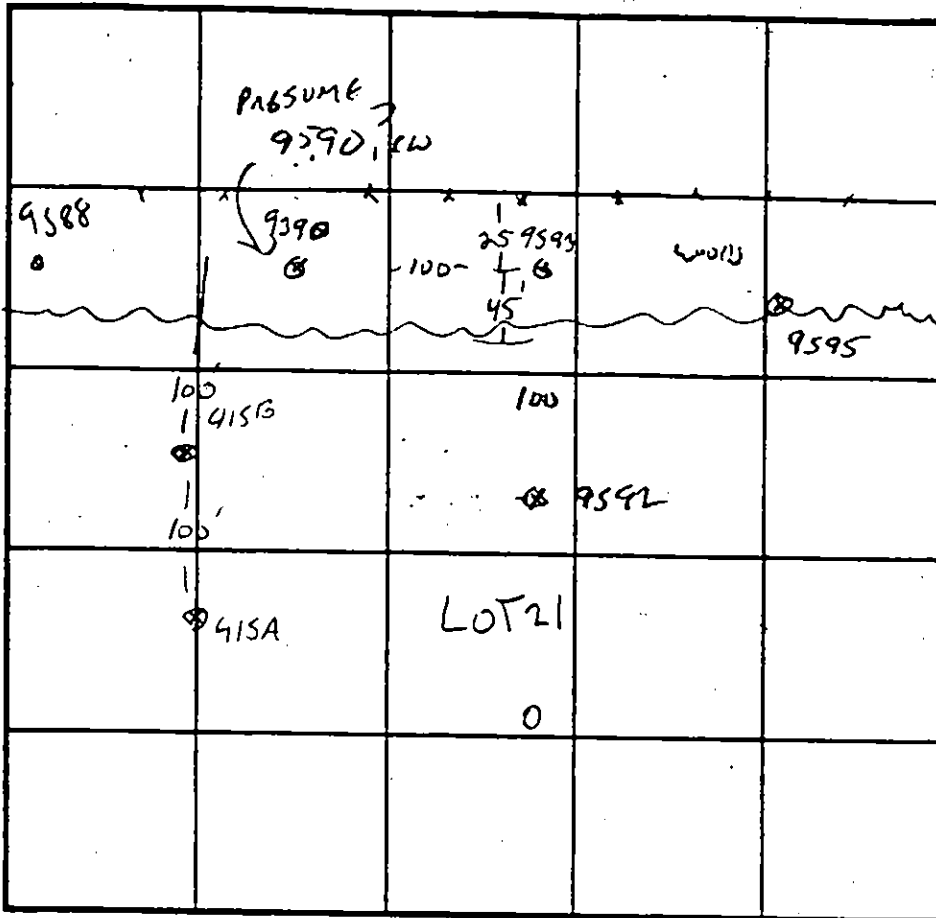
9593



915A

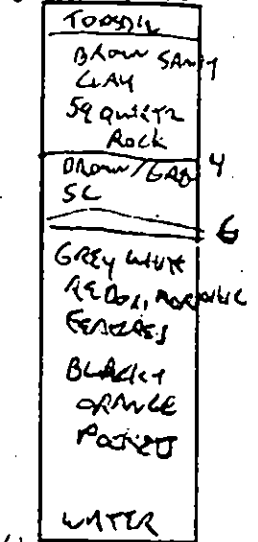


12



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE
9588



LOT 21

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/16/98	9588	3/12	1:59	2:36	3/4 INCH		FAIL
	9593	3/12	2:18	2:38	NO MOVEMENT		FAIL
	9592	6/12	2:32	2:35	→	2:45	10 MIN
5/15/98	415A	3.5/12	2:23	2:26	→	3:29	3 MIN
	91						
	1115B	4'	2:37	2:39	→	2:43	4 MIN

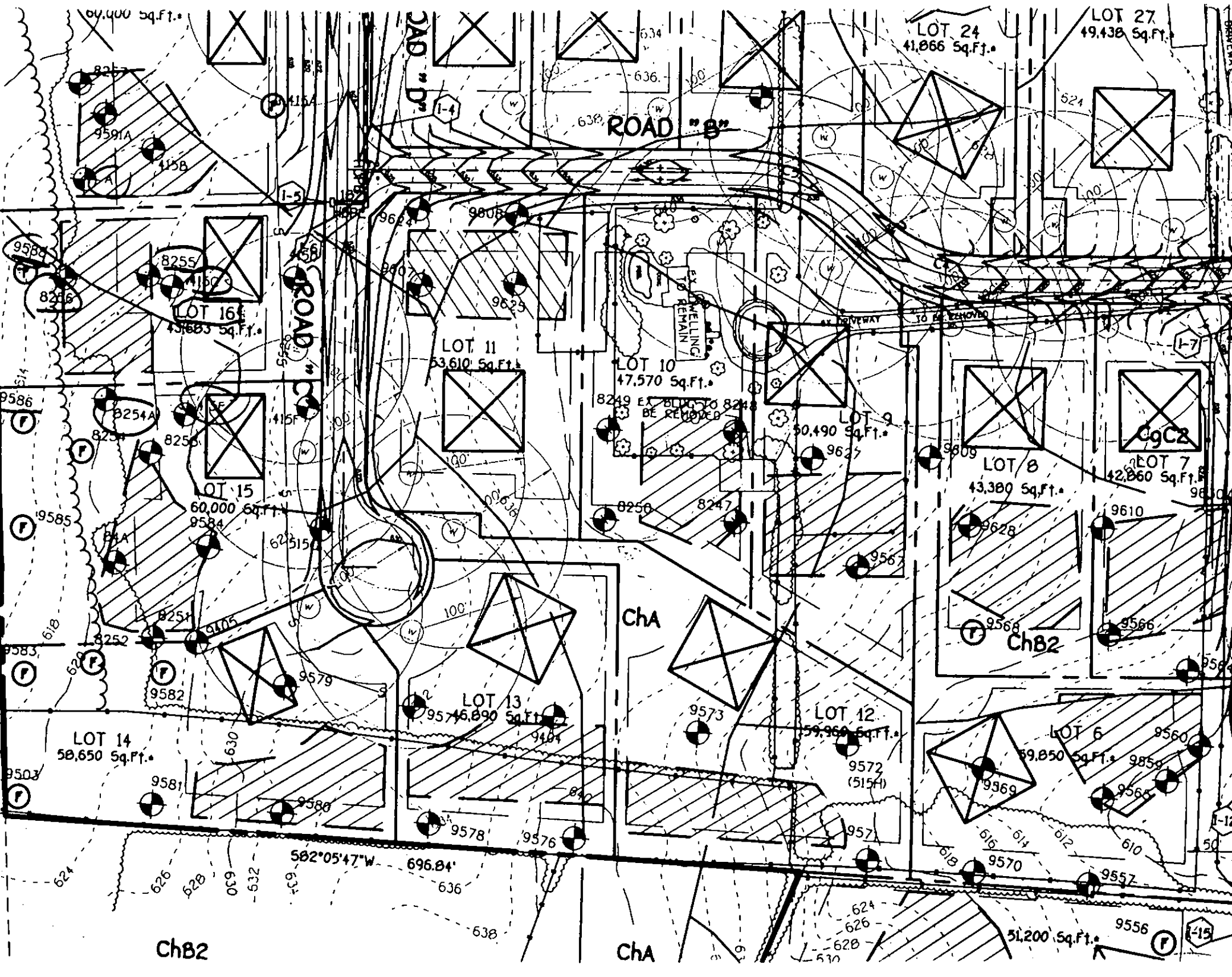
REMARKS: MORE HILIER ON LANDSCAPE, 415A IS 35' OUTSIDE OF LINE IN SW A/E

TYPE OF SOIL: A15 GLEY BELOW 9' H₂O @ 11.5'

TESTED BY: G. SAUVAGE ALSO PRESENT: Fydes case

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

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



Wm. W. BROWN
CIVIL ENGINEER
7520 15th St.
Denver, Colo.

PUBLIC DRAINAGE &
UTILITY EASEMENT

8112

9597

30'
B.R.L.

10'
B.R.L.

LOT 19
41,650 Sq.Ft.

LOT 18
45,730 Sq.Ft.

LOT 17
60,000 Sq.Ft.

LOT 16
43,683 Sq.Ft.

LOT 15
60,000 Sq.Ft.

LOT 22
43,000 Sq.Ft.

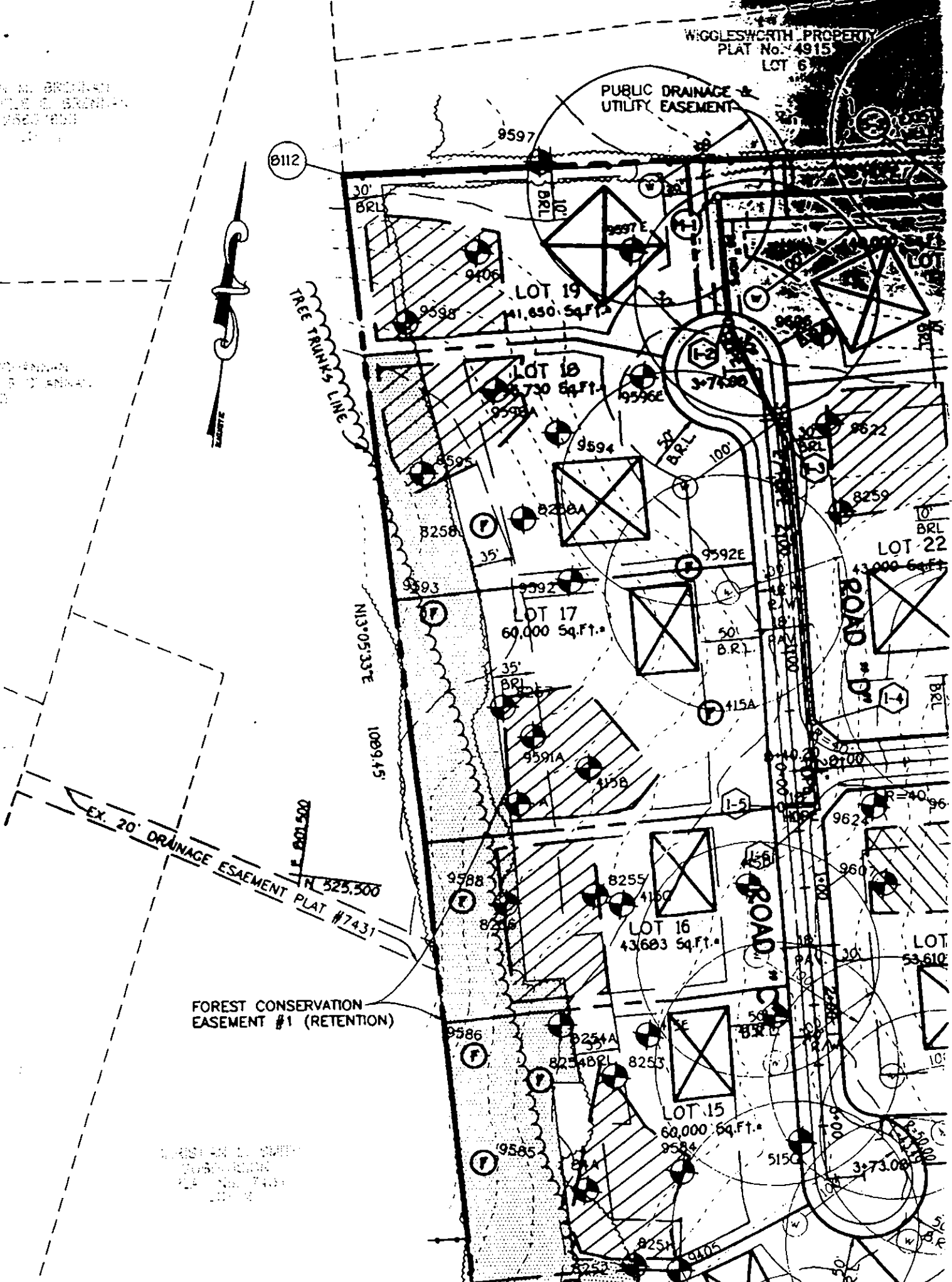
TREE TRUNKS LINE

N13°05'33"E
1089.45'

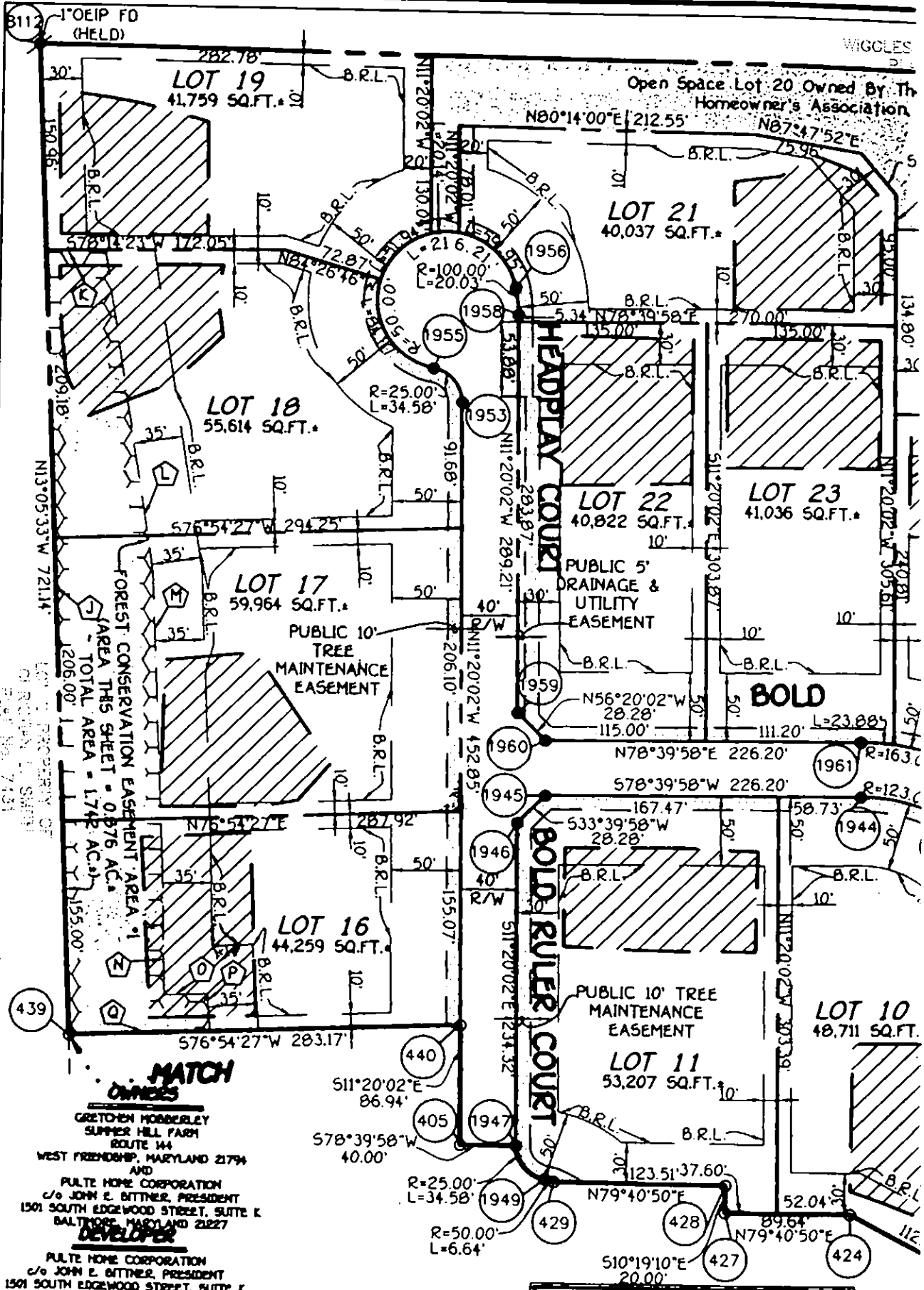
EX. 20' DRAINAGE EASEMENT PLAT #7431

FOREST CONSERVATION
EASEMENT #1 (RETENTION)

Wm. W. BROWN
CIVIL ENGINEER
7520 15th St.
Denver, Colo.



F-00-71
THE
PADDOCKS



The Requirements 53-408, The Field Property Article, Annotated Code Of Maryland FROB Requirement Volume, Use Supplemented As Far As They Relate To The Making Of This Plat And The Setting Of Markers Have Been Complied With

FOREST CONSERVATION EASEMENT METES AND BOUNDS	
SYMBOL	BEARING & DISTANCE
J	N53°03'33"W 576.10'
K	N78°14'23"E 43.61'
L	S18°47'41"E 244.81'