

2/20/04 - 10 AM
 LAYOUT 2/18/04 AM INSP 4 _____
 INSP 2 2/23/04 INSP 5 _____
 INSP 3 _____ INSP 6 _____

ISSUE DATE: 12/4/2003 **PERMIT** 04-366638 P 519690
 APPROVAL DATE: 2/23/04 **INDEXED** A 511939-0

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

K & K Excavating IS PERMITTED TO INSTALL ALTER
 ADDRESS: 14960 Frederick Rd, Woodbine PHONE NUMBER: 410-442-1336
 SUBDIVISION: Wellington III LOT NUMBER: 16
 ADDRESS: 3250 Huntersworth Way PROPERTY OWNER: James Selfridge Builders
 SEPTIC TANK CAPACITY (GALLONS): 1250 OUTLET BAFFLE FILTER REQUIRED
 PUMP CHAMBER CAPACITY (GALLONS): N/A COMPARTMENTED TANK REQUIRED
 NUMBER OF BEDROOMS: 4
 SQUARE FEET PER BEDROOM: 180
 LINEAR FEET OF TRENCH REQUIRED: 240 HOUSE SERVED BY PUBLIC WATER

| | |
|-----------|---|
| TRENCHES: | Trench to be 3.0 feet wide. Inlet 4.0 feet below original grade. Bottom maximum depth 6.0 feet below original grade. Effective area begins at 4.0 feet below original grade. 2.0 feet of stone below distribution pipe. |
| LOCATION: | Place the distribution box near the center of the top of the septic easement. Run trenches on contour in both directions. |
| NOTES: | |

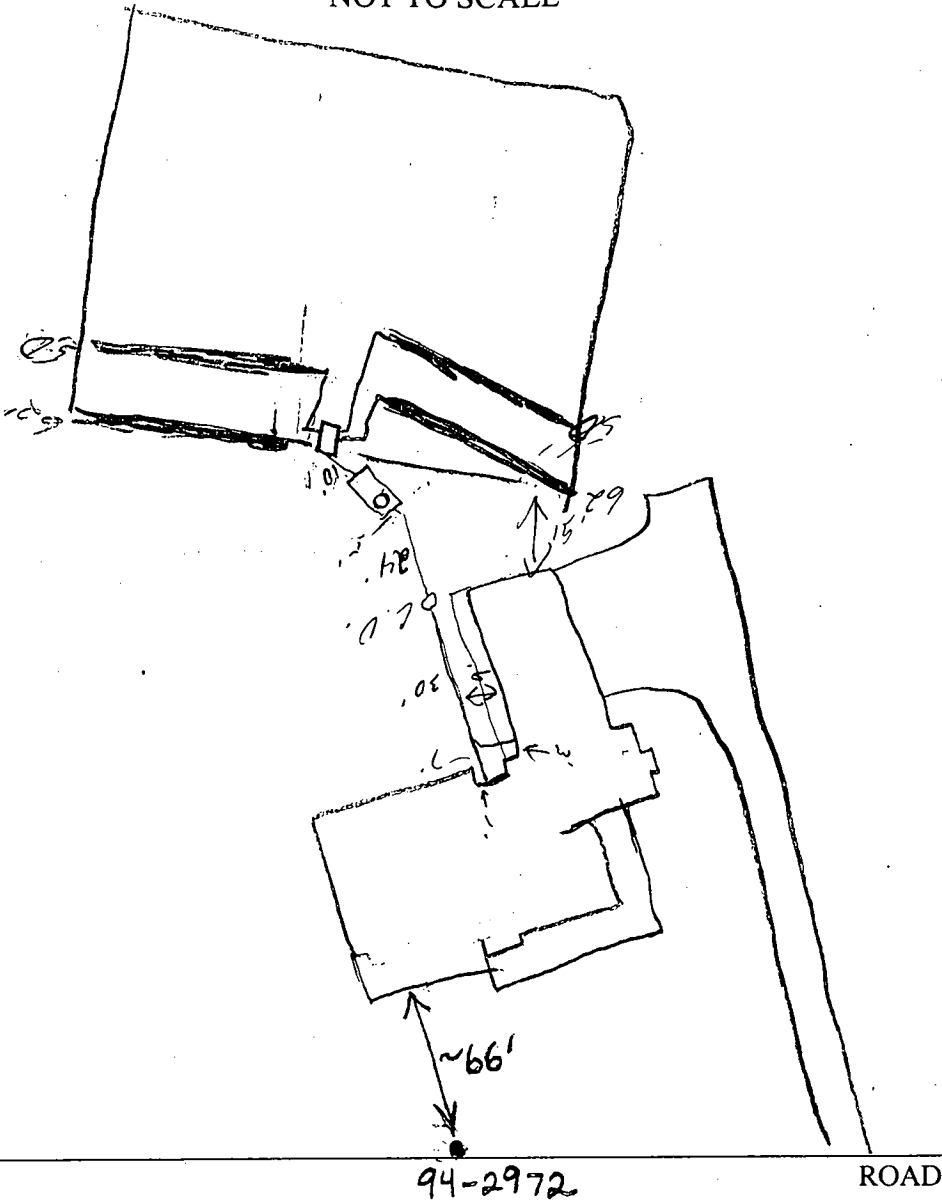
PLANS APPROVED: Brian Baker OK SRK 12/4/03 DATE: 8/26/03

NOTES: PERMIT VOID AFTER 2 YEARS
 CONTRACTOR IS RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
 WATERTIGHT SEPTIC TANKS REQUIRED
 ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL UNLESS SPECIFICALLY AUTHORIZED
 MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS UNLESS SPECIFICALLY AUTHORIZED
 CONTRACTOR RESPONSIBLE FOR COMPLIANCE WITH APPLICABLE REGULATIONS, GUIDELINES AND THE TERMS OF THIS PERMIT

**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
 ALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM**

A 511939-0

NOT TO SCALE



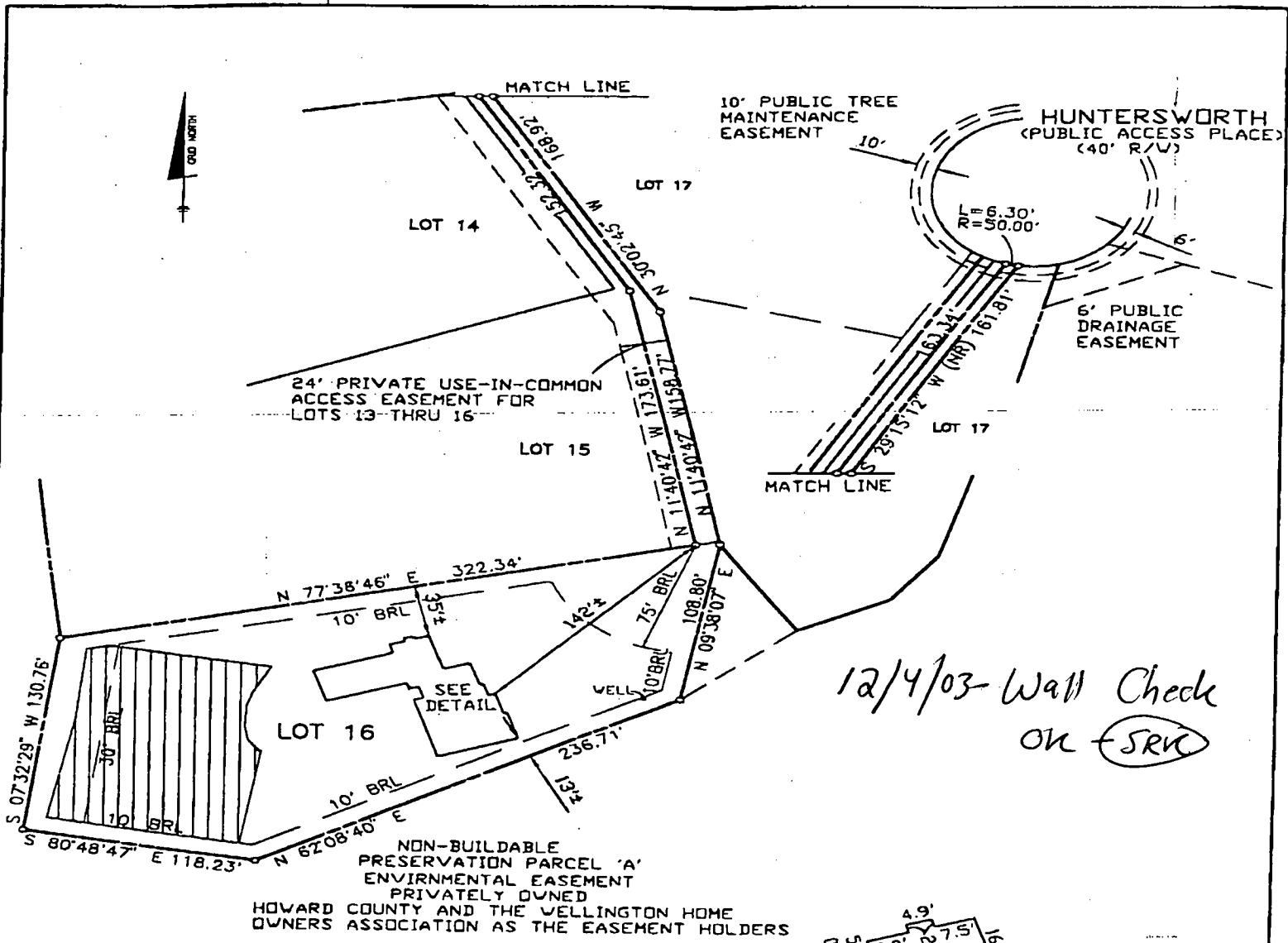
| TRENCH/DRAINFIELD DATA | | |
|-------------------------|-----------|-------------------------------------|
| WIDTH | INLET | BOTTOM |
| <u>3'</u> | <u>4'</u> | <u>6'</u> |
| NUMBER OF TRENCHES | | <u>4</u> |
| TOTAL LENGTH | | <u>240</u> |
| ABSORPTION AREA | | <u>720</u> |
| DISTRIBUTION BOX LEVEL | | <input checked="" type="checkbox"/> |
| DISTRIBUTION BOX BAFFLE | | <input checked="" type="checkbox"/> |
| DISTRIBUTION BOX PORT | | <input checked="" type="checkbox"/> |

| SEPTIC TANK DATA | |
|---|-------------------------------------|
| SEPTIC TANK 1 LEVEL <input checked="" type="checkbox"/> | |
| CAPACITY | <u>1250</u> GAL |
| SEAM LOC | <u>Top</u> |
| TANK LID DEPTH | <u>2'</u> |
| BAFFLES | <input checked="" type="checkbox"/> |
| BAFFLE FILTER | <input checked="" type="checkbox"/> |
| MANHOLE LOC | <u>Front</u> |
| 6" PORT LOC | <input checked="" type="checkbox"/> |
| WATERTIGHT TEST | <input checked="" type="checkbox"/> |
| SEPTIC TANK 2 LEVEL _____ | |
| CAPACITY | _____ GAL |
| SEAM LOC | _____ |
| TANK LID DEPTH | <u>N/A</u> |
| BAFFLES | _____ |
| BAFFLE FILTER | _____ |
| MANHOLE LOC | _____ |
| 6" PORT LOC | _____ |
| WATERTIGHT TEST | _____ |

PRE-CONSTRUCTION 2/20/04 - SRA staked, contours accurate. Install per B.P. Tank set (SO)

INSTALLATION 2/23/04 - OK to cover all work (SO)

FINAL INSPECTOR [Signature] DATE OF APPROVAL 2/23/04



12/4/03 Wall Check
OK (SRV)

NON-BUILDABLE PRESERVATION PARCEL 'A' ENVIRONMENTAL EASEMENT PRIVATELY OWNED HOWARD COUNTY AND THE WELLINGTON HOME OWNERS ASSOCIATION AS THE EASEMENT HOLDERS

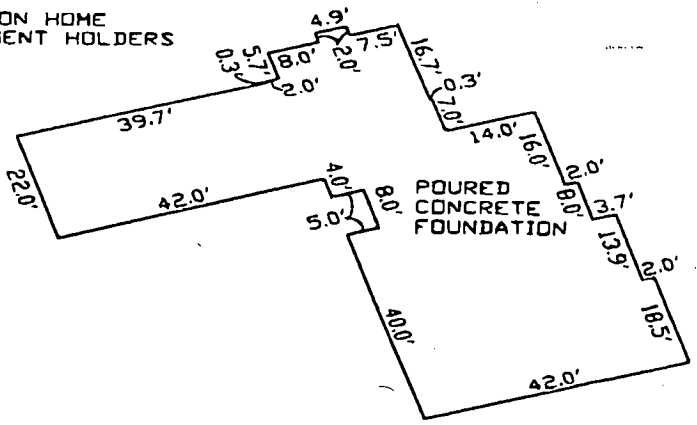
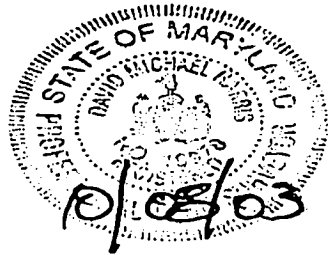
TOP OF FOUNDATION WALL ELEVATION = 517.2'
OFFSET DIMENSIONS TO PROPERTY LINES ARE ± 1'

SURVEYOR'S CERTIFICATE

I HEREBY CERTIFY TO THE BEST OF MY PROFESSIONAL KNOWLEDGE, INFORMATION AND BELIEF, THAT THE DIMENSIONS OF THE BUILDING WALLS SHOWN HEREON ARE CORRECT; THAT THEY ARE BASED ON A FIELD RUN SURVEY PERFORMED BY BENCHMARK ENGINEERING, INC. ON 10/03/03; AND THAT THE PROPERTY OUTLINE SHOWN HEREON IS BASED ON THE PLAT PREPARED BY BENCHMARK ENGINEERING, INC. ENTITLED "THE WOODS OF WELLINGTON LOTS 1-24", AND RECORDED AMONG THE LAND RECORDS OF HOWARD COUNTY AS PLAT No. 15289

David M. Harris
DAVID M. HARRIS
REGISTERED PROFESSIONAL LAND SURVEYOR
MD REG. No. 10978
FOR BENCHMARK ENGINEERING, INC.
MD REG. No. 351
RECORD PLAT No. 15289
FEMA FIRM No. 240044 0014 B
ZONE: C
DATED: 12/04/86

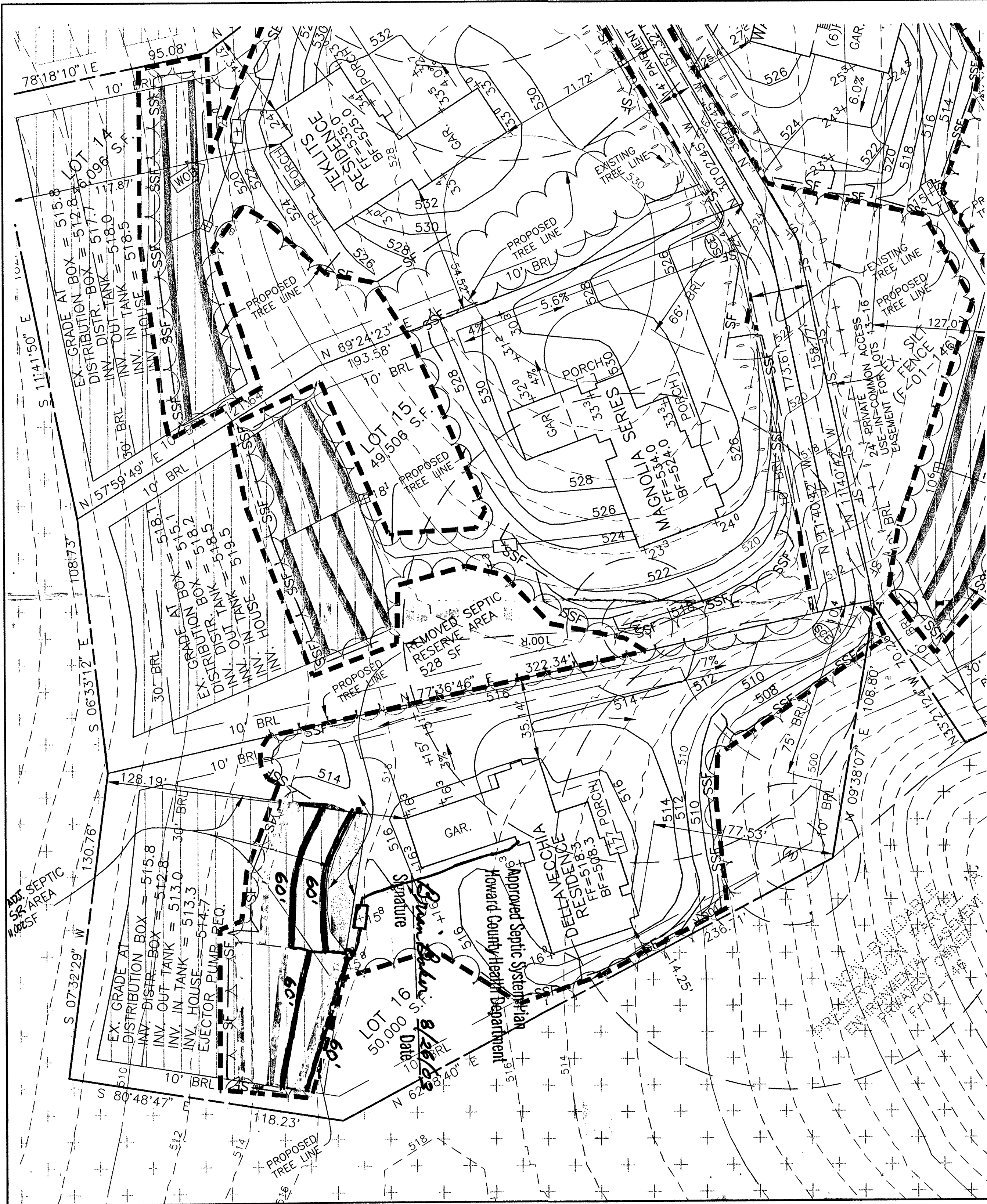
BENCHMARK ENGINEERING, INC.



FOUNDATION DETAIL
SCALE: 1" = 30'
WALL CHECK

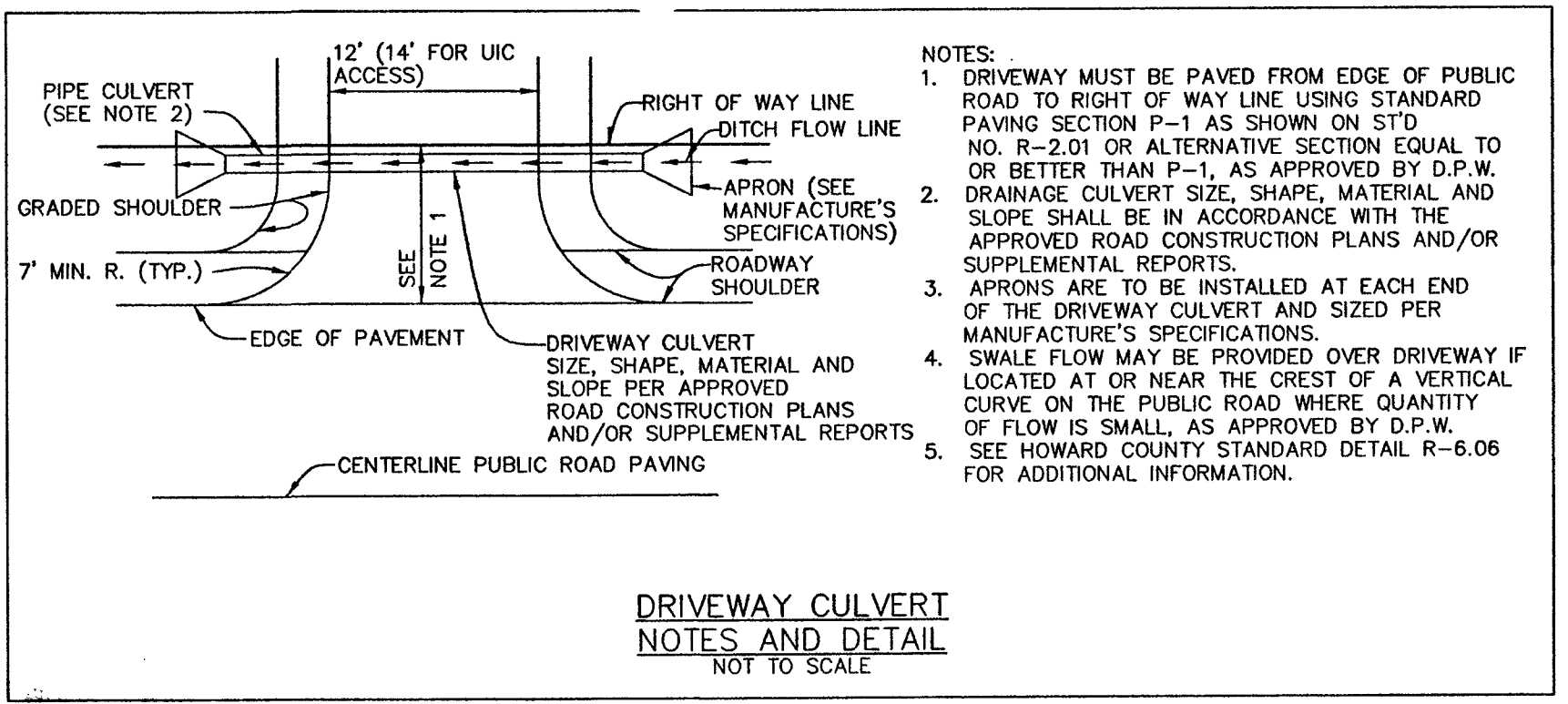
THE WOODS OF WELLINGTON LOTS 1-24
LOT No. 16

3250 HUNTERS WORTH
4TH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
SCALE: 1" = 80' DATE: 10/03/03



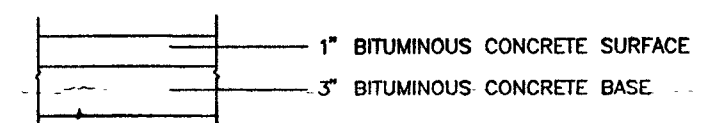
NOTES:

1. THE LOT SHOWN HEREON WAS RECORDED ON PLAT NUMBER 15289, REFER TO THE PLAT FOR LOT DIMENSIONS, LOT AREAS, ALL EASEMENTS AND BUILDING RESTRICTIONS.
2. THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF 10,000 SQUARE FEET AS REQUIRED BY THE STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWERAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA IS RESTRICTED UNTIL PUBLIC SEWER IS AVAILABLE. THIS EASEMENT SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENT INTO THE PRIVATE SEWERAGE EASEMENT. RECORDATION OF A MODIFIED SEWERAGE EASEMENT PLAT SHALL NOT BE NECESSARY.
3. SEDIMENT AND EROSION CONTROLS WERE APPROVED BY HOWARD SOIL CONSERVATION DISTRICT UNDER GP-01-192 AND MODIFIED FOR THIS SPECIFIC HOUSE.
4. TOPOGRAPHY SHOWN HEREON IS TAKEN FROM THE APPROVED ROAD CONSTRUCTION PLANS.
5. EXACT LENGTH OF SEPTIC TRENCHES ARE TO BE DETERMINED BY THE HEALTH DEPARTMENT AT THE TIME OF TRENCH LAYOUT AND INSPECTION.
6. SPOIL FROM THE TRENCHING OF THE SEPTIC AREA IS TO BE PLACED ON THE UPHILL SIDE OF THE EXCAVATION FOR EACH INDIVIDUAL LOT.
7. ALL SEDIMENT AND EROSION CONTROL FEATURES USED ON THIS SITE SHALL COMPLY WITH 1994 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL.
8. ALL DRAINAGE AND STORMWATER MANAGEMENT FEATURES USED ON THIS SITE MUST COMPLY WITH THE APPROVED ROAD CONSTRUCTION PLANS.



- NOTES:**
1. DRIVEWAY MUST BE PAVED FROM EDGE OF PUBLIC ROAD TO RIGHT OF WAY LINE USING STANDARD PAVING SECTION P-1 AS SHOWN ON STD NO. R-2.01 OR ALTERNATIVE SECTION EQUAL TO OR BETTER THAN P-1, AS APPROVED BY D.P.W.
 2. DRAINAGE CULVERT SIZE, SHAPE, MATERIAL AND SLOPE SHALL BE IN ACCORDANCE WITH THE APPROVED ROAD CONSTRUCTION PLANS AND/OR SUPPLEMENTAL REPORTS.
 3. APRONS ARE TO BE INSTALLED AT EACH END OF THE DRIVEWAY CULVERT AND SIZED PER MANUFACTURER'S SPECIFICATIONS.
 4. SWALE FLOW MAY BE PROVIDED OVER DRIVEWAY IF LOCATED AT OR NEAR THE CREST OF A VERTICAL CURVE ON THE PUBLIC ROAD WHERE QUANTITY OF FLOW IS SMALL, AS APPROVED BY D.P.W.
 5. SEE HOWARD COUNTY STANDARD DETAIL R-6.06 FOR ADDITIONAL INFORMATION.

**DRIVEWAY CULVERT
NOTES AND DETAIL
NOT TO SCALE**



**PAVING SECTION
NOT TO SCALE**

| NO. | DATE | REVISION |
|---|------------|---|
| | | |
| <p>BENCHMARK ENGINEERS ▲ LAND SURVEYORS ▲ PLANNERS ENGINEERING, INC.</p> <p>8480 BALTIMORE NATIONAL PIKE ▲ SUITE 418 ELLCOTT CITY, MARYLAND 21043 PHONE: 410-465-6105 ▲ FAX: 410-465-6644 EMAIL: benchmrk@ccais.com</p> | | |
| OWNER/BUILDER: | | PROJECT: |
| JAMES H. SELFRIDGE BUILDERS, INC. 14045 GARED DRIVE GLENWOOD, MD 21738 PHONE: 410-531-8930 FAX: 410-531-8939 | | THE WOODS OF WELLINGTON LOT 16 |
| LOCATION: | | TITLE: |
| 3250 HUNTERS WORTH GLENWOOD, MD 21738 TAX MAP 14 - BLOCK 20 - P/O PARCEL 246 4th ELECTION DISTRICT, HOWARD COUNTY, MARYLAND | | PERMIT PLAN |
| HOUSE TYPE: DELLAVECCHIA RESIDENCE | | DATE: |
| AUGUST, 2003 | | PROJECT NO. 1430 |
| DESIGN: JMC | DRAFT: JMC | SCALE: 1" = 30' |
| DRAWING 1 OF 1 | | |

**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 installers must comply with the National Standard Plumbing Code (NSPC, as amended locally) and COMAR 26.04.06 (Pit Well Construction Regulations). Submission of a complete form is required prior to Use and Occupancy approval.

Company Name: R E G WATER SYSTEMS Telephone #: 410-239-0700
 Address: 4322 OPALS CHOICE DR.
MANCHESTER, M.D. 21102

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer
 License # and name of individual responsible for the field installation:
 Name (Print): Rickey L. Roos SR. License: PE0141

*A licensed individual must perform the actual installation. Apprentices must be under the direct supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification. SELF-RIDGE HOMES

Name of Property Owner: DELLA VECCIA Telephone #: 410-531-8830
 Subdivision: WOODS OF WOLFINGTON Lot #: 16 Well Tag #: HO-94-2972
 Site Address: 3250 HUNTERS WORTH WAY
GLENSWOOD, M.D. 21738

| | | |
|---|-----------------------------|--|
| Submersible Pump Data | Pitless Adapter | Well Cap and Electric Conduit |
| Make: <u>GRUNDFO S</u> | Make: <u>CAMPBELL</u> | Two piece watertight cap: <input checked="" type="checkbox"/> |
| Model #: <u>1522610-280</u> | Model: <u>VIA-200</u> | Screened, vented well cap: <input checked="" type="checkbox"/> |
| Pump Capacity: <u>15</u> GPM | Depth: <u>42"</u> (36" min) | Cap secured to casing: <input checked="" type="checkbox"/> |
| Well Yield: <u>15</u> GPM | NSF approved: <u>YES</u> | Conduit min 1 1/2" R.G.: <input checked="" type="checkbox"/> |
| Depth of well encountered at time of pump installation: <u>725</u> (feet) | | Conduit secured to well cap: <input checked="" type="checkbox"/> |

If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4
 Torque arrestors or Cable glands are required - Must circle one
 Safety rope, if used, attached to inside of well casing with eye bolt YES

Piping to house
 Type: POLYETHYLENE 1 1/4"
 PSI: 160 (160 psi min)
 Depth of supply line: 42 (36" min)

House Connection
 PVC sleeved to undisturbed soil at wall penetration: YES
 Approximate length of sleeve: 10'
 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 of company representative responsible for installation: Rickey L. Roos SR. date: 3/11/04

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

Date Insp. Requested: 3/12/04 Date Insp. Approved: 3/12/04 **(BB)**
 Inspection Data: Pitless adapter and 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 installed inside of well casing:
 Correct well tag stretched properly and casing 3" above finished grade:
 Water supply line sleeved adequately at house connection:
 Adequate grommet observed below pitless adapter:

| | | | | |
|---|------|--|--|--|
| C1 | 0297 | SEQUENCE NO. (MDE USE ONLY) | STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE TYPE | THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED. |
| (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS) | | | | |
| | | COUNTY NUMBER <u>13</u> <i>4/12/01 OK (88)</i> | | |

| | | | |
|---|--|--|---|
| ST/CO USE ONLY DATE Received MM DD YY 8 13 | DATE WELL COMPLETED MM DD YY 15 4 3 2001 | Depth of Well 22 <u>225</u> 26 (TO NEAREST FOOT) | PERMIT NO. FROM "PERMIT TO DRILL WELL" <u>HO-94-2972</u> 28 29 30 31 32 33 34 35 36 37 |
|---|--|--|---|

OWNER SDC last name Huntersworth first name TOWN Clenwood
 STREET OR RFD _____
 SUBDIVISION Wellington SECTION III LOT 16

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 | |
| <u>Sand</u> | <u>0</u> | <u>35</u> | |
| <u>Gray Mica Rock</u> | <u>35</u> | <u>225</u> | ✓ |

GROUTING RECORD yes no

WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**

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

NO. OF BAGS 12 NO. OF POUNDS 1128
 GALLONS OF WATER 22

DEPTH OF GROUT SEAL (to nearest foot)
 from 0 ft. to 36 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 ST Nominal diameter top (main casing) (nearest inch)! 6 Total depth of main casing (nearest foot) 40

OTHER CASING (if used)

diameter inch _____ depth (feet) from _____ to _____

SCREEN RECORD

screen type or open hole insert appropriate code below

| | | |
|----------------------|--------------------|------------------------|
| ST STEEL | BR BRASS | HO OPEN HOLE |
| PL PLASTIC | OT 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. MSD024

DRILLERS SIGNATURE Joseph L. Mayne
(MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. M D

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

C2 DEPTH (nearest ft.)

| |
|----------------------------------|
| 1 <u>Ho</u> <u>37</u> <u>225</u> |
| E 8 9 11 15 17 21 |
| A 23 24 26 30 32 36 |
| S C3 38 39 41 45 47 51 |
| R |
| E |
| N |

E 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

HOURS PUMPED (nearest hour) 3
8 9

PUMPING RATE (gal. per min.) 15
11 15

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 38 ft.
17 20

WHEN PUMPING 43 ft.
22 25

TYPE OF PUMP USED (for test)

A air **P** piston **T** turbine
27 27 27

C centrifugal **R** rotary **O** other (describe below)
27 27 27

J jet **S** submersible
27 27

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 29

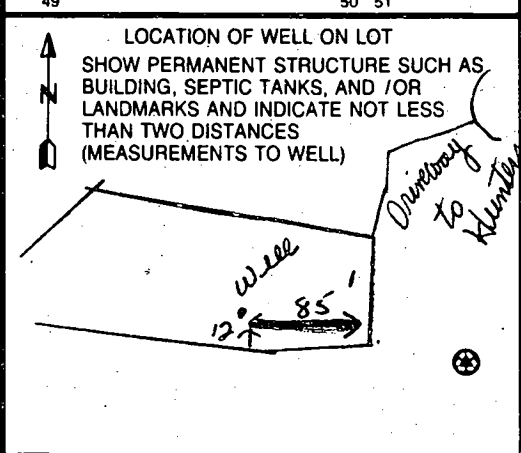
CAPACITY: GALLONS PER MINUTE (to nearest gallon) _____ 31 _____ 35

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 } 3 (nearest foot)
49 50 51



FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 94-2972
 Location of property (road) Huntersworth
 Subdivision Wellington, Sect. III Lot 16 Block _____ Plat _____ Sec. _____
 Well Driller J. Mayne Owner SDC

Depth of well 225'
 Distance of measuring point (M.P.) above ground 3'
 Static water level (S.W.L.) below M.P. 38'

I. High rate pumping -- reservoir drawdown

Time pump started 6:45 Pumping rate 15 gpm.
 Total time 5 min. to reach pumping water level 43 ft. below M.P.

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

| TIME (in 15 minute intervals) | WATER LEVEL below M.P. | PUMPING RATE time to fill 5/ gallon bucket | FLOW METER READING (if used) | CALCULATED FLOW (gallons per minute) |
|-------------------------------|------------------------|--|------------------------------|--------------------------------------|
| 7:00 | 43' | 4 sec. | N/A | 15 gpm. |
| 7:15 | 43 | 4 | | 15 |
| 7:30 | 43 | 4 | | 15 |
| 7:45 | 43 | 4 | | 15 |
| 8:00 | 43 | 4 | | 15 |
| 8:15 | 43 | 4 | | 15 |
| 8:30 | 43 | 4 | | 15 |
| 8:45 | 43 | 4 | | 15 |
| 9:00 | 43 | 4 | | 15 |
| 9:15 | 43 | 4 | | 15 |
| 9:30 | 43 | 4 | | 15 |
| 9:45 | 43 | 4 | | 15 |
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B 1 03739

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

STATE PERMIT NUMBER

HO-94-2972

W514704 please print or type

Date Received (APA)

12/12/00

OWNER INFORMATION

Security Development Group

P.O. Box 417

Ellicott City Md 21041

LOCATION OF WELL

Howard COUNTY

Wellington SUBDIVISION

SECTION 3 LOT 16

Glenwood NEAREST TOWN

MILES FROM TOWN (enter 0 if in town) 1.42

DRILLER INFORMATION

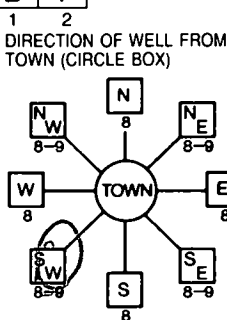
Joseph L. Mayne M S D O 24

Joseph L. Mayne Well Drilling

5512 Ridge Rd Mt Airy 21774

Joseph L. Mayne 12/12/00

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Huntersworth NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



34 450 37 DISTANCE FROM ROAD ENTER FT OR MI 38 39

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)
F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
I INDUSTRIAL, COMMERCIAL, DEWATERING
P PUBLIC WATER SUPPLY WELL
T TEST, OBSERVATION, MONITORING
G GEO-THERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard COUNTY NAME 13 COUNTY NO.

STATE SIGNATURE INSERT S

DATE ISSUED 02/05/01 CO SIGNATURE EXP. DATE 02/04/02

NORTH GRID 528 000 EAST GRID 0786 000

APPROXIMATE DEPTH OF WELL 260 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH

METHOD OF DRILLING (circle one)

- BORED (or Augered) JETTED Jetted & DRIVEN
AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary)
CABLE REVERSE-ROTary DRIVE-POINT
other

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

- N THIS WELL WILL NOT REPLACE AN EXISTING WELL
Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
D THIS WELL WILL DEEPEM AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

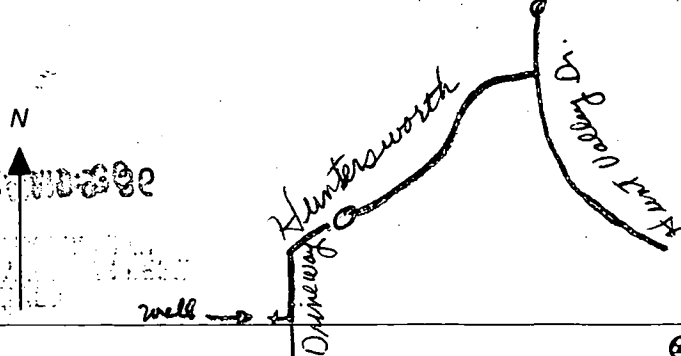
SOURCES OF DRILLING WATER

- 1. well
2.
3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E 7826
N 5280

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



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

APPROX. PERMIT NUMBER HO 00 GA P 013 01

PERMIT No. 10-94-2972

SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

Lot 16

Well site OK as stated
by surveyor. No site
inspection conducted.
2/5/01 (D/C)

FOREST CONSERVATION
EASEMENT 1
RETENTION

LOT 12
50,000 S.F.

LOT 13
48,658 S.F.

LOT 14
46,096 S.F.

LOT 15
49,506 S.F.

LOT 17
50,000 S.F.

LOT 16
50,000 S.F.

LOT 18
49,726 S.F.

FOREST CONSERVATION
EASEMENT 4
RETENTION

FOREST CONSERVATION
EASEMENT 1
RETENTION

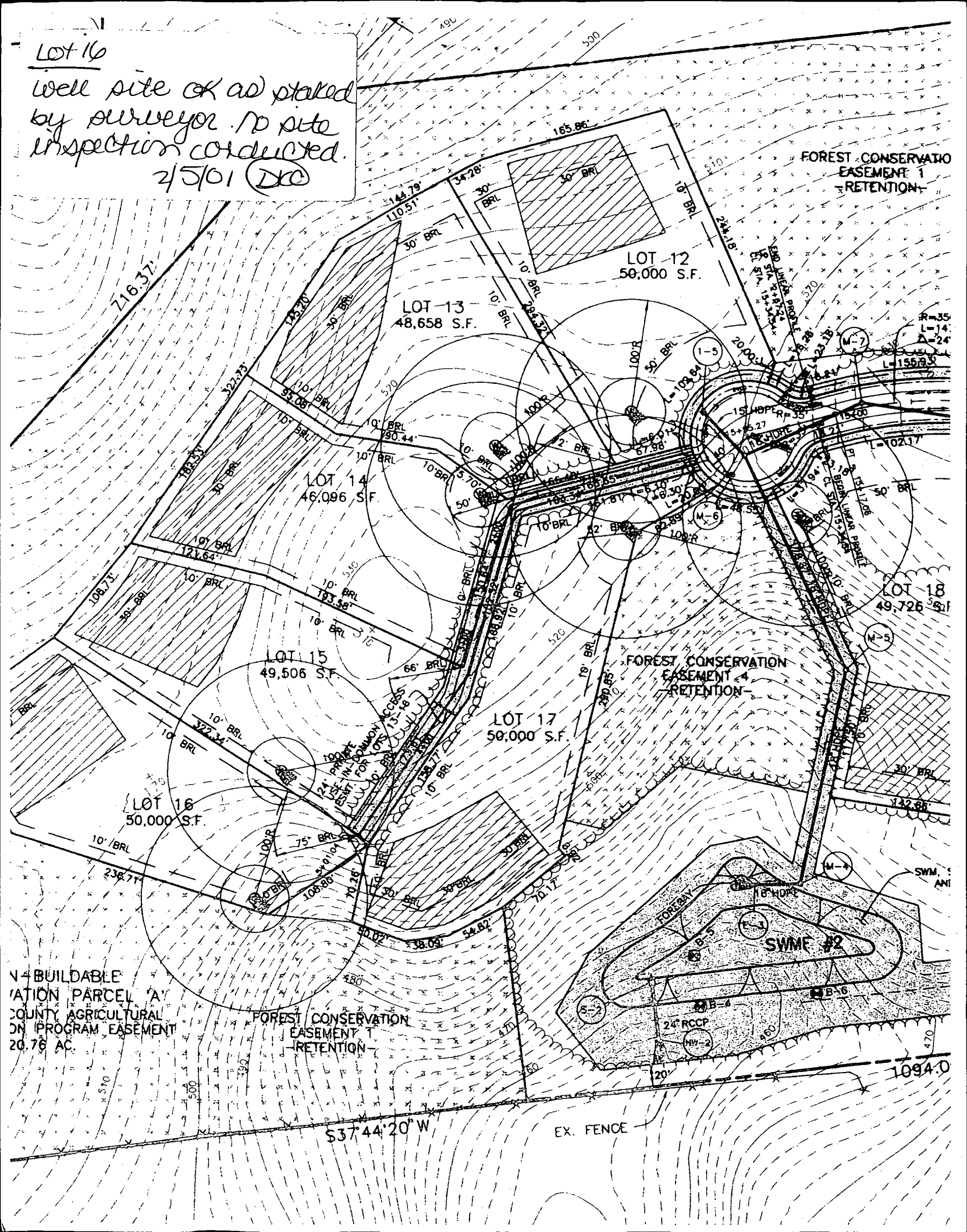
SWME #2

NON-BUILDABLE
PARCEL 'A'
COUNTY AGRICULTURAL
CONSERVATION PROGRAM EASEMENT
20.76 AC.

S37°44'20" W

EX. FENCE

1094.0



~~PRES. PARCEL~~ LOT 16

COUNTY # _____

SOIL PROFILE
0' 3J/35

1' topsoil
4' red brn
cl Lm
4' 4' org
brn
si Lm
25-30%
sm
frag

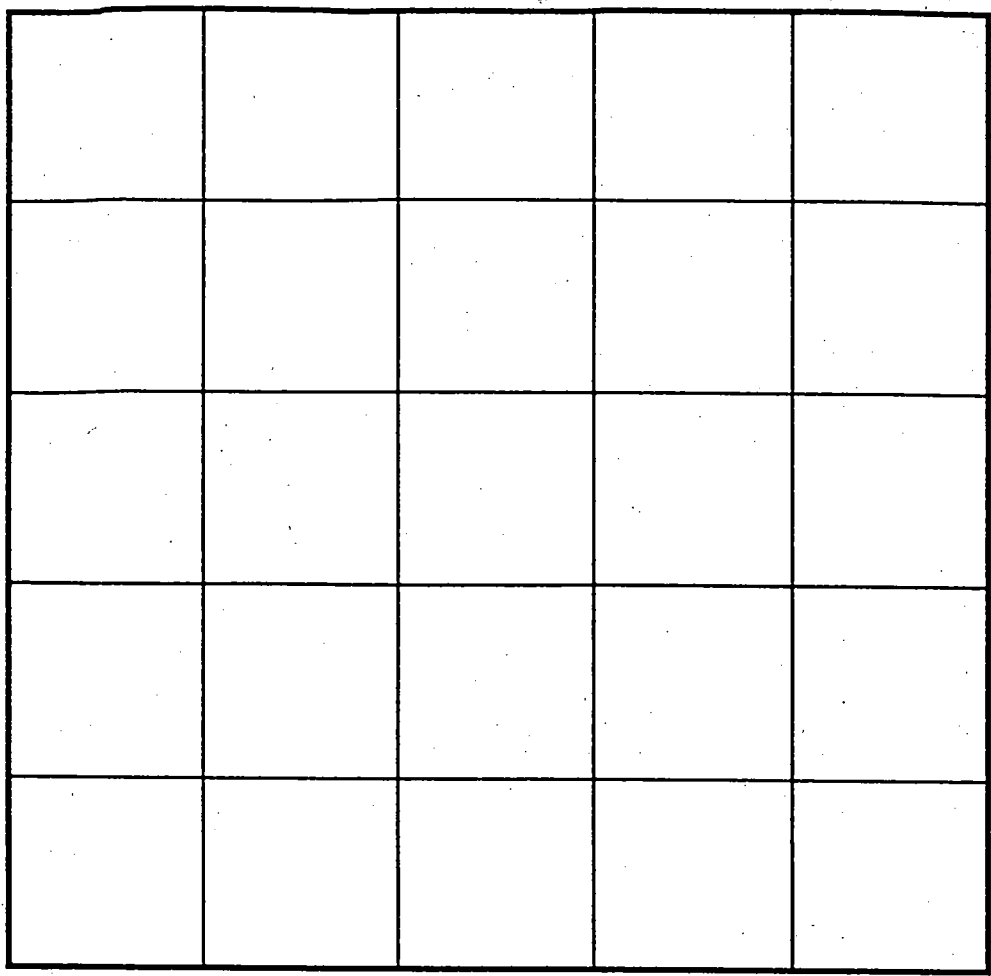
0' 4J

1' topsoil
red brn
cl Lm

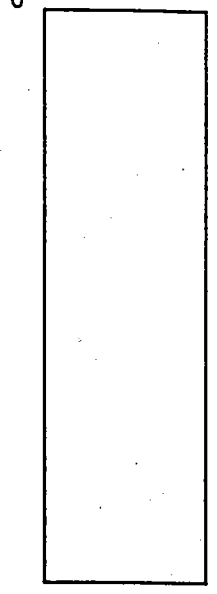
4' pale org
brn
to
tan
si Lm
20%
hard
sh

0' 6J

1' top
red brn
cl Lm
4' pale
org
beige
si Lm
15-20%
sh
frag



SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

| DATE | TEST NO. | DEPTH | PRE-WET | | TEST - 1" DROP | | TIME |
|---------|----------|--------|---------|-------|----------------|-------|------|
| | | | START | STOP | START | STOP | |
| 1-28-00 | 3J | 4.5' S | 11:52 | 11:54 | 11:54 | 11:57 | 3 |
| | | 13.0'D | visual | - see | profile | | OK |
| | 4J | 12.5'D | visual | - see | profile | | OK |
| | 5J | 4.5' S | 12:00 | 12:04 | 12:04 | 12:08 | 4 |
| | | 12.0'D | visual | - see | profile | | OK |
| | 6J | 12.0'D | visual | - see | profile | | OK |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

REMARKS: holes tested as staked

TYPE OF SOIL _____

TESTED BY DKS ALSO PRESENT C. Sperry Hatfield's

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

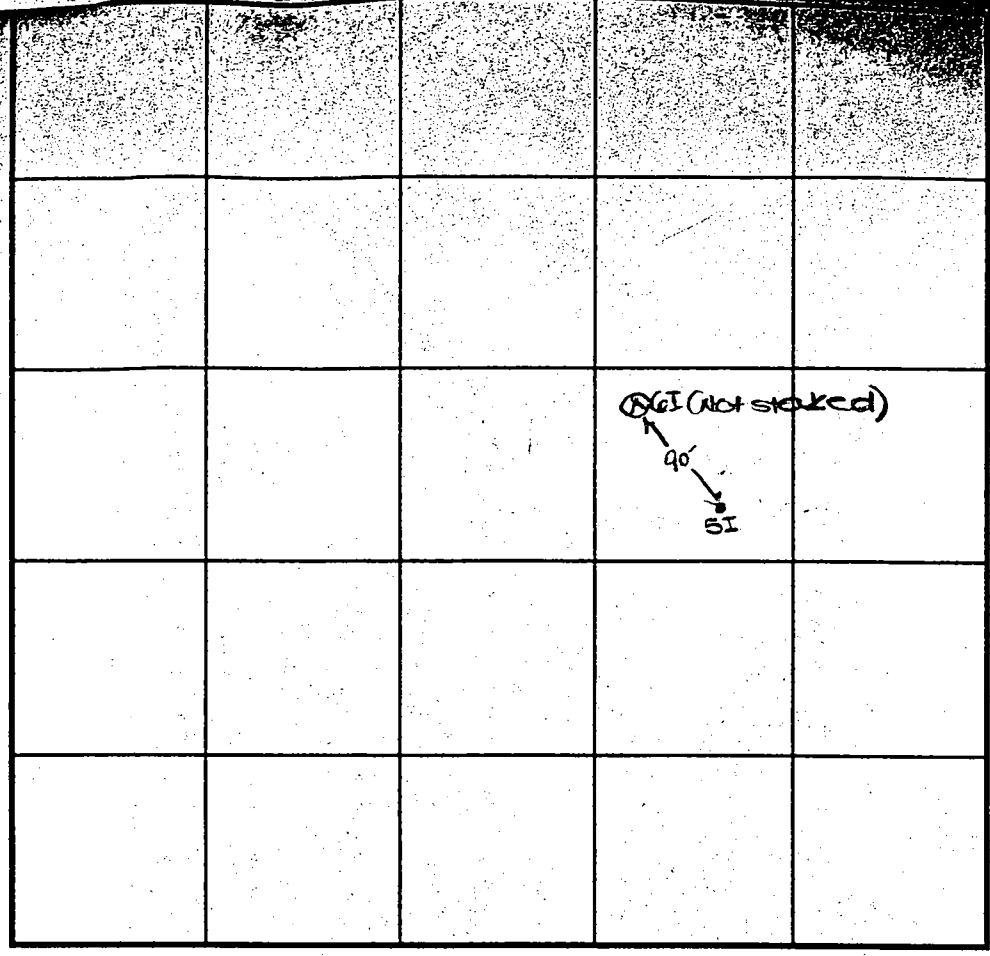
INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____

TO: [unclear]

SOIL PROFILE
4I
top soil
org bn
clm
pale
org beige
sil m
35%
hard
shale

5I
top soil
org red
bn
clm
pale
org tan
sil m
25%+
hard
shale

6I
like 5I
w/
15%+
hard
shale



SOIL PROFILE

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

| DATE | TEST NO. | DEPTH | PRE-WET | | TEST - 1" DROP | | TIME |
|----------|----------|---------|---------|-------|----------------|-------|------|
| | | | START | STOP | START | STOP | |
| 12-16-99 | 4I | 4.5' S | 11:23 | 11:24 | 11:24 | 11:27 | 3 |
| | | 11.5' D | Visual | - see | profile | | OK |
| | 5I | 4.5' S | 11:28 | 11:29 | 11:29 | 11:32 | 3 |
| | | 12.5' D | Visual | - see | profile | | OK |
| | 6I | 12.5' D | Visual | - see | profile | | OK |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

REMARKS _____
 TYPE OF SOIL _____
 TESTED BY DKS ALSO PRESENT Hatfield's
 TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____
 INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____

MIC2

475

F
PERC 28B

F
PERC 27D

TRAFFIC CALLING
DEVICE (TYP)

F
PERC 28A

F
PERC 28C

F
PERC 28D

LOT 12
50,000 S.F.

LOT 13
48,658 S.F.

PERC 30A

PERC 30B

LOT 14
16,096 S.F.

PERC 34

PERC PER
HEALTH DEPT

LOT 15
14,936 S.F.

PROP.
WELL
(TYP)

PERC 51

LOT 16
50,000 S.F.

PERC 6U

PERC 5J NON-BUILDABLE
PRESERVATION PARCEL 'A'
895,683 S.F.
20.56 Ac.±

PERC 29A

PERC 29B

LOT 17
50,000 S.F.

PERC 10H

PERC 2J

PERC 1J

PERC 25A

PERC 25B

PERC 25C

PERC 25D

SLOPES 15-24.9%

SLOPES 25% & GREATER

SLOPES 15-24.9%

EX F

MIB2
MIC2

MIB2
MIC2

MIC2
MIB2

MIC2

475

SLOPES 15-24.9%

500
505
510
515
520

TRAFFIC CALLING
DEVICE (TYP)

SLOPES 25% & GREATER

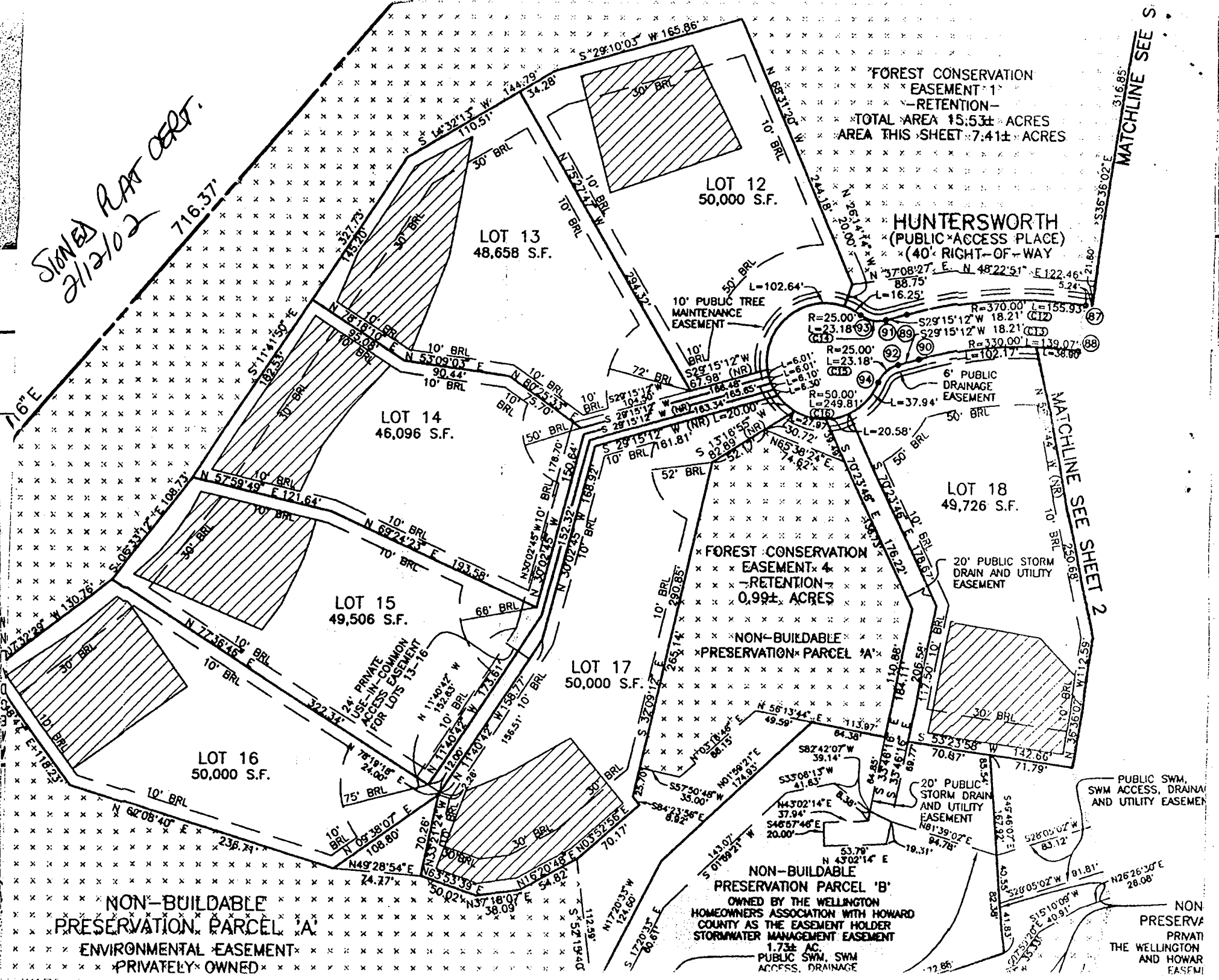
SLOPES 15-24.9%

EX F

STONEY RPT CERT.
2/12/02

FOREST CONSERVATION
EASEMENT 1
RETENTION
TOTAL AREA 15.53± ACRES
AREA THIS SHEET 7.41± ACRES

HUNTERS WORTH
(PUBLIC ACCESS PLACE)
(40' RIGHT-OF-WAY)



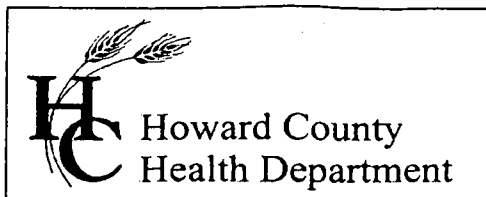
NON-BUILDABLE
PRESERVATION PARCEL 'A'
ENVIRONMENTAL EASEMENT
PRIVATELY OWNED

NON-BUILDABLE
PRESERVATION PARCEL 'B'
OWNED BY THE WELLINGTON
HOMEOWNERS ASSOCIATION WITH HOWARD
COUNTY AS THE EASEMENT HOLDER
STORMWATER MANAGEMENT EASEMENT
1.73± AC.
PUBLIC SWM, SWM
ACCESS, DRAINAGE

NON
PRESERVA
PRIVATI
THE WELLINGTON
AND HOWAR
EASEMEN

MATCHLINE SEE 1
316.85'
336.36 02° E

MATCHLINE SEE SHEET 2
250.68'
10' BRL
250.68'



3525 H Ellicott Mills Drive, Ellicott City, MD 21043
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

Penny E. Borenstein, M.D., M.P.H., Health Officer

June 4, 2004

James H. Selfridge Builders
14045-Gared Drive
Glenwood, MD 21738

SENT VIA FACSIMILE 410-531-8939

RE: 3250 Huntersworth Way
Wellington III, Lot 16
BP # B00143551
Well Permit # HO-94-2972

Dear Sirs:

This is to advise you that the septic system for the above referenced property has been installed and inspected. **Final approval of the septic system was granted on 02/23/2004. Final approval of the well line connection to the dwelling was approved on 03/12/2004.**

The water sample results indicate that the water samples submitted for testing were free of coliform and fecal coliform bacteria at the time of sampling and are bacteriologically safe for drinking. The water sample results were found to be in compliance with COMAR water quality standards.

INTERIM CERTIFICATE OF POTABILITY

This certifies that the **initial** sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under well permit #HO-94-2972. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies. Based upon satisfactory investigation and evaluation, the Howard County Health Department, as authorized by the Maryland Department of the Environment accepts this well system as required by COMAR 26.04.04.

This certificate may become final upon completion of the second bacteriological test, which is to be taken by the county health department within six months of receipt of this letter. **Please contact (410) 313-1773 to schedule a final water sample appointment. Currently, there is no charge for this final sampling.**

Date of Water Sample: 06/01/2004
Date of Well Completion: 04/03/2001

Respectfully,

Brian Baker
Brian Baker, R. S.
Well and Septic Program

BB/mlb

cc: Building Inspector's Office
Community Services Program
File