

LAYOUT 9 AM 6/27/02 INSP 4 8/20/02
 INSP 2 7/9/02 2:00 INSP 5 8/22/02 House Conn. Anytime
 INSP 3 8/16/02 11:00 INSP 6 _____

ISSUE DATE: 5/29/2002 **TAX 03-331571** P 516994

APPROVAL DATE: 8/22/02 **PERMIT INDEXED** 03-331571 A 512694

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

Hatfield's Equipment _____ IS PERMITTED TO INSTALL ALTER

ADDRESS: 13785 Burntwoods Road PHONE NUMBER: 301-854-6172

SUBDIVISION: Brantwood II LOT NUMBER: 12

ADDRESS: 11449 Butterfruit Way PROPERTY OWNER: Cochran

SEPTIC TANK CAPACITY (GALLONS): 1500 OUTLET BAFFLE FILTER REQUIRED

PUMP CHAMBER CAPACITY (GALLONS): N/A COMPARTMENTED TANK REQUIRED

NUMBER OF BEDROOMS: 5

SQUARE FEET PER BEDROOM: 180

LINEAR FEET OF TRENCH REQUIRED: 225 HOUSE SERVED BY PUBLIC WATER

TRENCHES:	Trench to be 2.0 feet wide. Inlet 2.5 feet below original grade. Bottom maximum depth 7.0 feet below original grade. Effective area begins at 2.5 feet below original grade. 4.0 feet of stone below distribution pipe.
LOCATION:	Place the distribution box 80 feet from the right (251.43') lot line and 100 feet from the rear (247.74') lot line as viewed from Butterfruit Way. Install trenches on contour in both directions from distribution box. Call for inspection when ground is open.
NOTES:	Follow initial system design (7ft deep trenches) in highest part of SDA, Beware of greater than 50% rock and very fast perc in soils in northern quarter of SDA. Try to install 300LF of trench if possible, but ok to reduce total trench length to 225LF if some area lost to encountered rocky soils

PLANS APPROVED: Ron J. Pinkley *[Signature]* DATE: 5/29/2002

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
 BUILDING PERMIT SIGNED AND RETURNED ALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM**

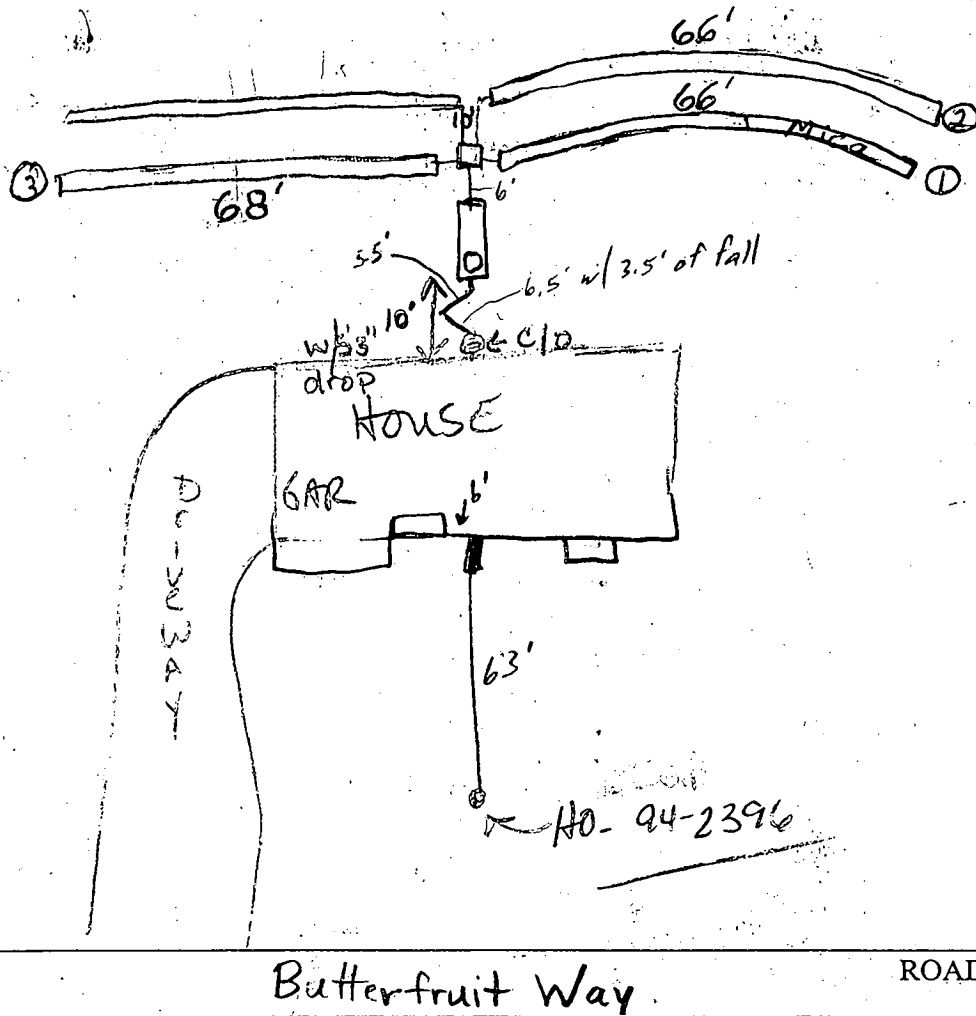
11-4-04 800 151111-16 POOL

A 512694-1

NOT TO SCALE

TRENCH/DRAINFIELD DATA			
WIDTH	INLET	BOTTOM	
2.0	2.5'	7.0'	
NUMBER OF TRENCHES	3		
TOTAL LENGTH	220'		
ABSORPTION AREA	700 sq ft		
DISTRIBUTION BOX LEVEL	✓		
DISTRIBUTION BOX BAFFLE	Yes		
DISTRIBUTION BOX PORT	No		

SEPTIC TANK DATA	
SEPTIC TANK 1 LEVEL	✓
CAPACITY	1500 GAL
SEAM LOC	Top
TANK LID DEPTH	2-5'
BAFFLES	✓
BAFFLE FILTER	
MANHOLE LOC	Back
6" PORT LOC	Front
WATERTIGHT TEST	
SEPTIC TANK 2 LEVEL	
CAPACITY	GAL
SEAM LOC	
TANK LID DEPTH	N/A
BAFFLES	
BAFFLE FILTER	
MANHOLE LOC	
6" PORT LOC	
WATERTIGHT TEST	

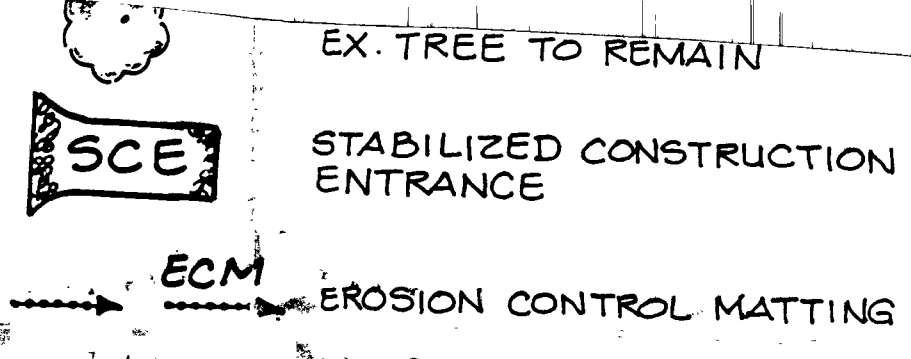
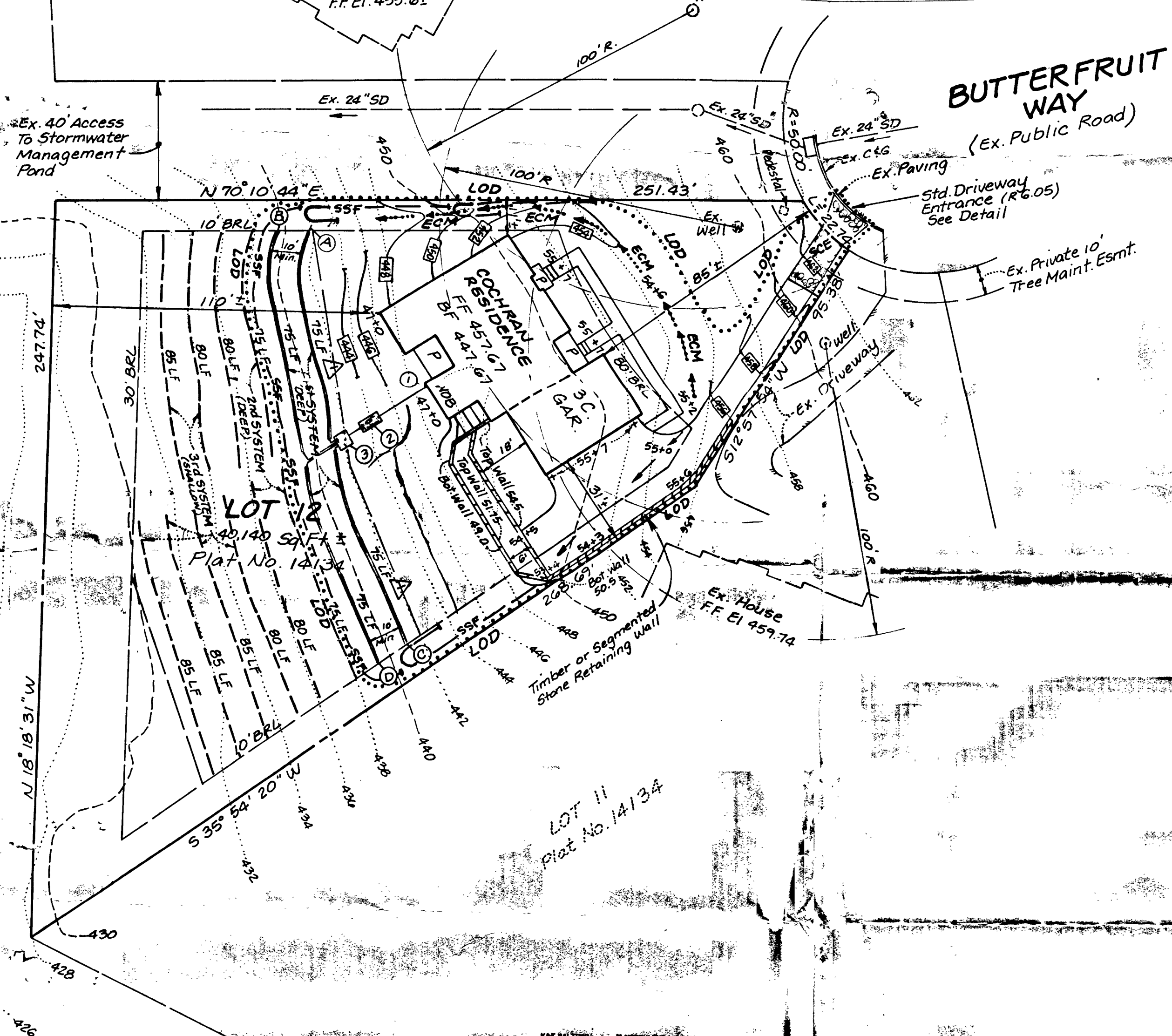


PRE-CONSTRUCTION T.C. discussion re trench field - system before House because of probable rock in initial Dptic Area, 6/27/02

6/27/02 Areas of 750% partially decayed mica fragments in the end of trench 1. Poured water into bottom of trench 1 in mica fragments. Second pour was ~ 1 minute per inch and slowed considerably from first pour ~ 30 sec. Will accept mica content since decayed rock does offer some treatment and pore rates would probably be above 2 minutes after some saturation. (BB) 6/28/02 O.K. to cover trenches and distribution box. (BB) 7/9/02 Test S.T. OK to cover tank (SC) 8/19/02 Spoke to Tom Prefers 22' bends Must have 10' of 2% slope into septic tank. 8/20/02

FINAL INSPECTOR [Signature] DATE OF APPROVAL 8/22/02

8/22/02 Cont. replumbed to S.T. OK to cover (S)



SEWAGE SYSTEM DESIGN DATA / LOT 12:

- ① Invert at foundation wall: 445.17 Basement Service
- ② 1500 Gallon Septic Tank (5 Bedrooms) Δ
Provide Manhole to Finished Grade
 - A. Ex. Ground Over Tank: 444.00
 - B. Prop. Grade Over Tank: 444.00
 - C. Invert In: 441.30
 - D. Invert Out: 441.00
- ③ Distribution Box: (Provide 4 Outlets Minimum)
 - A. Ex. Ground Over Box: 442.00
 - B. Prop. Grade Over Box: 442.00
 - C. Invert In: 439.00
- 4. Trench Design: 60 LF/Bedrm. X 5 Bedrm. = 300 LF Δ

	A	B	C	D
Ex. Ground				
Over Trench:	441.00	439.30	441.00	439.30
Inv. Trench:	437.50	435.80	437.50	435.80
Botm. Trench:	433.50	431.80	433.50	431.80
Trench Length:	75 Ft.	75 Ft.	75 Ft.	75 Ft.
Trench Width:	2 Ft.	2 Ft.	2 Ft.	2 Ft.

NOTE: TRENCH DESIGN MAY BE REVISED AT TIME OF INSTALLATION BASED ON SITE CONDITIONS.

- NOTES:**
1. Existing Zoning: RC (Rural Cor)
 2. Plat Reference: 14134
 3. Limit of Disturbance: 20473 SF
 4. The proposed driveway for this lot is 10 feet wide, 6" crusher run w surface.
 5. The topography shown is field rd
 6. See architectural plans for buildi
 7. The retaining wall shown hereon treated timber or segmented stone to be provided by Contractor. No exceeds 2' - 11" in height.
 8. The septic trench design for the shall be a deep system compris trench for the two systems. The a shallow system comprising 50
 9. Sediment control measures for t the existing sediment basin (F9) controls shown hereon are prov existing sediment basin constru converted to a permanent storm
 10. The initial system shown on this issuance of the building permit. inspected upon excavation and material.

Total linear feet of trench required 225 feet

Width of trench(es) 2 feet

Depth of trench(es) 2 feet

Depth of stone required below distribution pipe 4 feet

Approved Septic System Plan
Howard County Health Department

Handwritten Signature
Signature 5/29/02
Date

No.	DATE	BY	DESC.
Δ	5/23/02	LDE, Inc.	Revised Sewage System Plan

REVISIONS

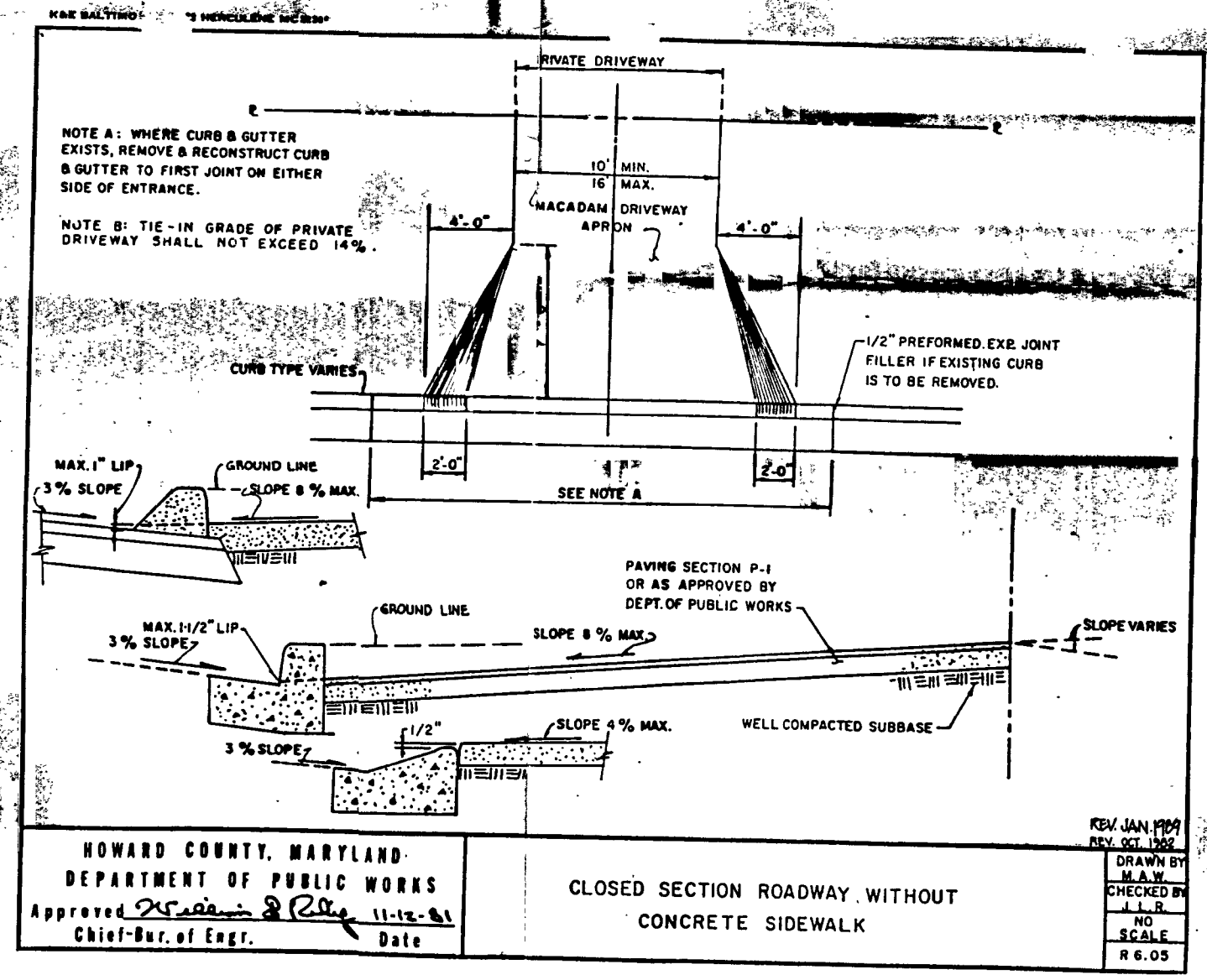
LDE, Inc.
9250 Rumsey Road, Suite 106.
(410) 715-1070 (301) 596-342.

DESIGNED: BDB GRADING and SEDIMENT

DRAWN: KBW BRANTVA SECTION 2

CHECKED: BDB TAX MAP 16 and 23 GRID P/O PARCEL N 3RD ELECTION DISTRICT Previous Submittal: F99-14.

DATE: 3/02 OWNER: CHRIS COCHRAN 10260 Tuscany Rd. Ellicott City, MD 21042 (410) 418-5296



REVIEWED FOR THE HOWARD SOIL CONSERVATION TECHNICAL REQUIREMENTS.

Handwritten Signature
DATE 4/18/02

PLAN IS APPROVED FOR SOIL EROSION AND SEDIMENT CONTROL BY THE HOWARD SOIL CONSERVATION DISTRICT.

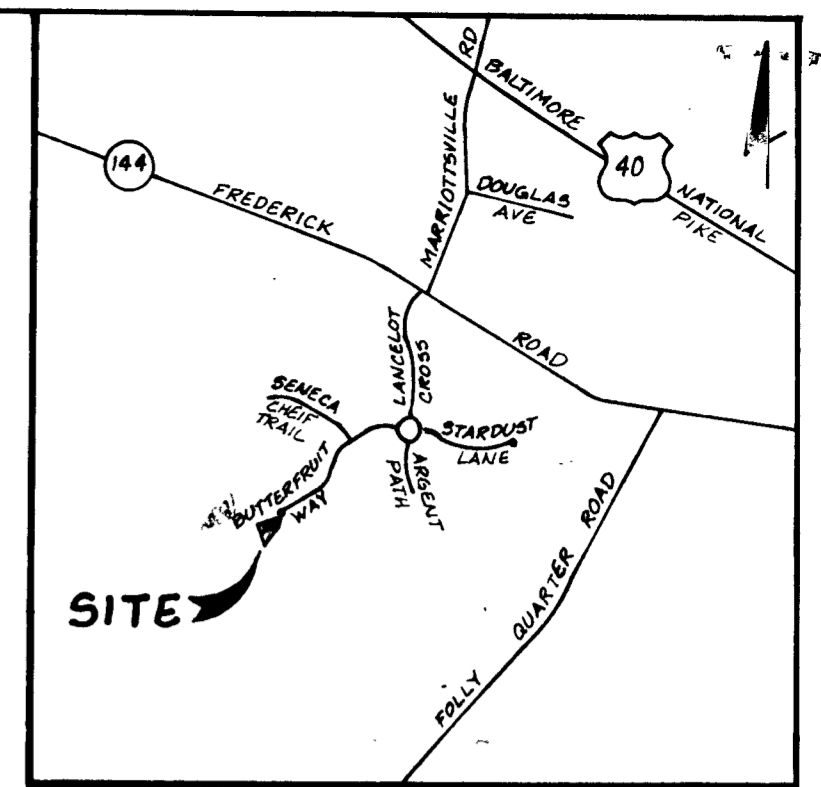
Handwritten Signature
DATE 4/18/02

HOWARD COUNTY, MARYLAND
DEPARTMENT OF PUBLIC WORKS
Approved *Handwritten Signature* 11-12-01
Chief-Dir. of Engr. Date

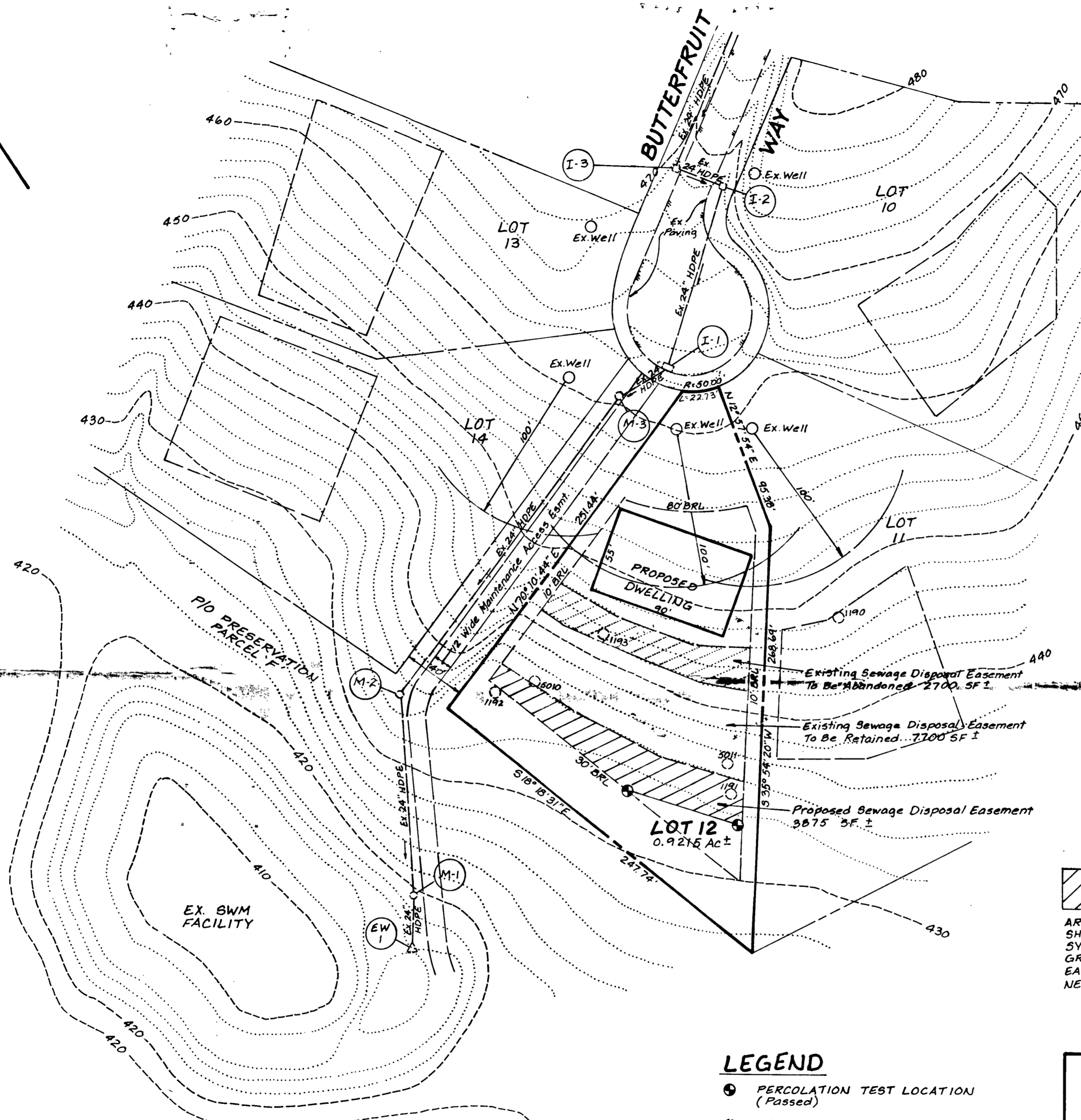
CLOSED SECTION ROADWAY WITHOUT CONCRETE SIDEWALK

REV. JAN 1999
REV. OCT 1997

DRAWN BY
M.A.W.
CHECKED BY
L.L.R.
NO SCALE
R 6.05

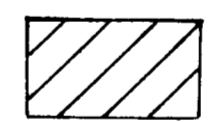


VICINITY MAP
SCALE: 1" = 2000'



NOTES:

1. EXISTING ZONING: RC (RURAL CONSERVATION)
2. PLAT REFERENCE: PLAT # 14134
3. TOTAL AREA OF LOT: 0.9215 Ac. ±
4. THE LOT SHOWN COMPLIES WITH THE MINIMUM LOT AREA AND OWNERSHIP WIDTH AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT.
5. EXISTING WELLS AND SEWAGE DISPOSAL AREAS HAVE BEEN SHOWN WITHIN 100 FEET OF THE PARCEL WHICH MAY AFFECT THIS PROPOSAL.
6. THE LIMITS OF THE SEWAGE DISPOSAL EASEMENT APPROVED BY THIS PLAN CAN BE MODIFIED DEPENDENT ON THE PROPOSED DWELLING UNIT SUBMITTED WITH A BUILDING PERMIT APPLICATION.



THIS AREA DESIGNATES A PRIVATE SEWAGE EASEMENT OF 10,000 SQUARE FEET AS 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 BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENTS INTO THE PRIVATE SEWAGE EASEMENT. RECORDATION OF A MODIFIED SEWAGE SHALL NOT BE NECESSARY.

LEGEND

- PERCOLATION TEST LOCATION (Passed)
- PERCOLATION TEST LOCATION (Passed/Old Test)
- EXISTING SEWAGE DISPOSAL EASEMENT
- ▨ PROPOSED SEWAGE DISPOSAL EASEMENT
- ▩ EXISTING SEWAGE DISPOSAL EASEMENT TO BE ABANDONED

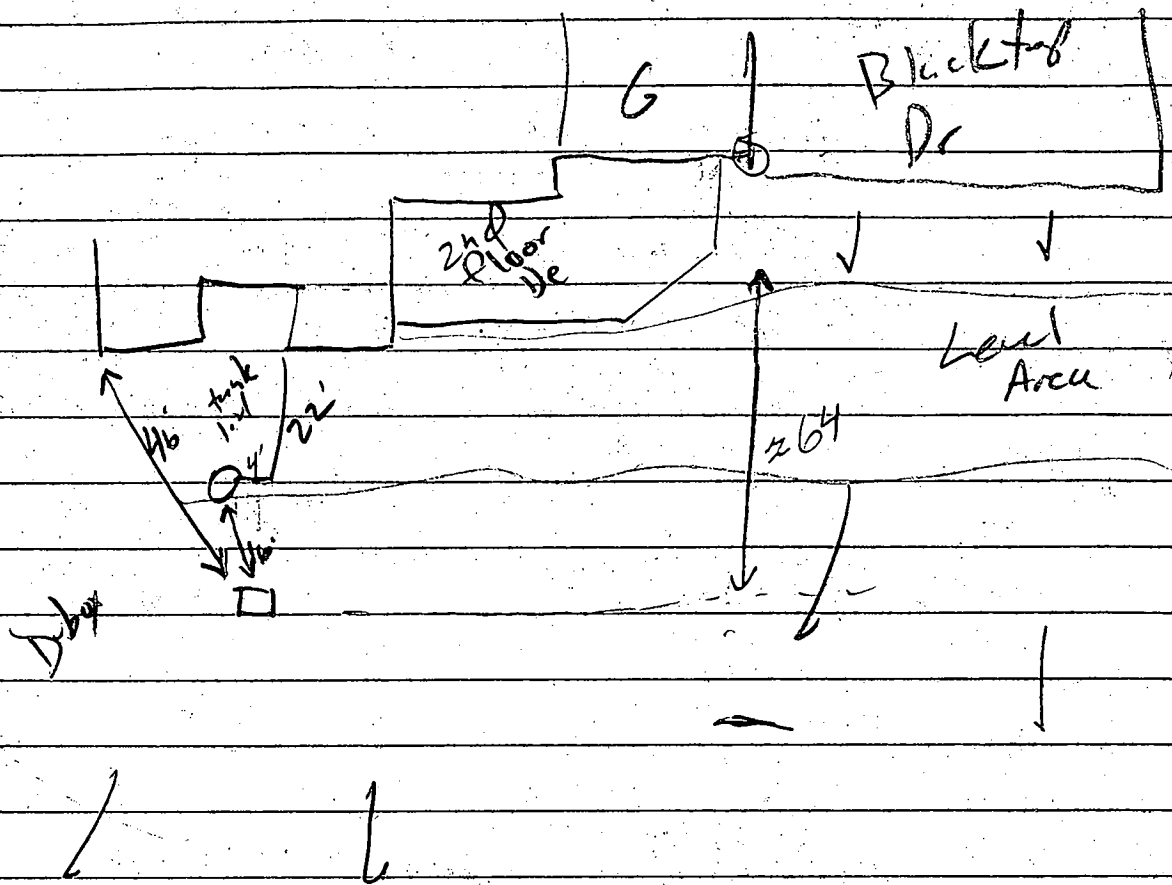
PERC CERTIFICATION

I certify that the locations shown hereon are based on field locations done under my direct supervision, and are correct, to the best of my professional knowledge and belief.

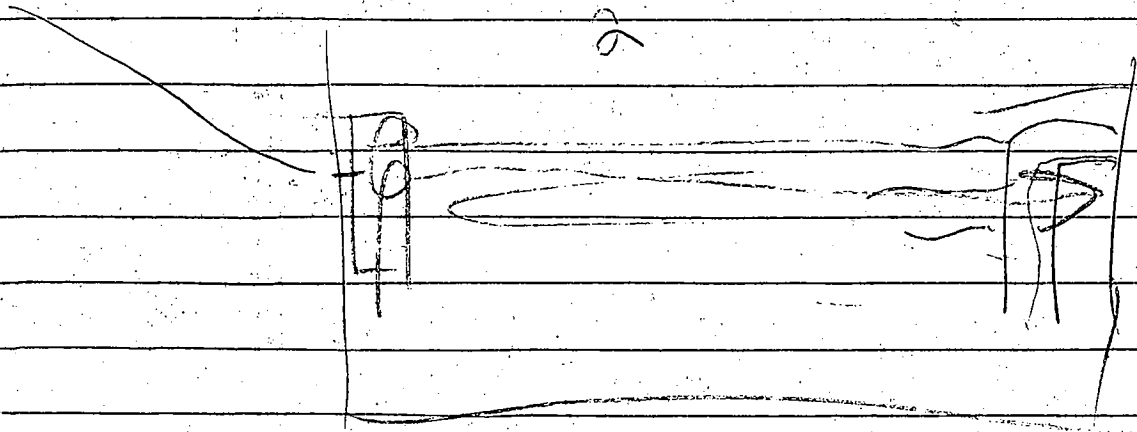
D. Wayne Weller
D. Wayne Weller, Professional Land Surveyor
MD. Reg. No. 10685
5/17/01
Date

APPROVED FOR PRIVATE WATER AND PRIVATE SEWERAGE HOWARD COUNTY HEALTH DEPARTMENT
Dina H. Matusz
Howard County Health Officer
5/25/01
Date

LDE, INC.		
9250 Rumsey Road, Suite 106, Columbia, MD. 21045 (410) 715-1070 (301) 596-3424 (410) 715-9540 (Fax)		
DESIGNED: BDB	REVISED PERCOLATION CERTIFICATION PLAN BRANTWOOD SECTION TWO AREA ONE LOT 12	SCALE: 1" = 50'
DRAWN: STB	TAX MAP 16423 GRID NOS. 21, 22 3/4 PO. PARCEL 214 3rd ELECTION DISTRICT HOWARD COUNTY, MD	DRAWING: 1 OF 1
CHECKED: BDB		JOB NO: 01-021
DATE: 5/01	OWNER: Chris Cochran 10260 Tuscony Road Ellicott City, MD 21042 410-418-5246	BUILDER: James H. Selfridge Builders, Inc. 14045 Gared Road Glenwood, MD 21738 410-531-8930
		FILE NO:



2 site inspections



APPLICATION

PERCOLATION TESTING

A _____

P _____

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

DISTRICT _____

DATE 8/5/95

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 Feaga Family

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER Land Marketing Inc. c/o Tim Feaga

ADDRESS 3243 Bethany Lane Ellicott City PHONE 313-8808
21042

PROPERTY LOCATION:

SUBDIVISION Feaga Property LOT NO. 6265

ROAD AND DESCRIPTION Rt 194 + Folly Quarter Rd

TAX MAP 16223 PARCEL # 3463

SIZE OF LOT 1 acre +/- 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. Mark A. Reil
(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

1192
0' dark orange SiCLM
4' very light yellow SiSalm white/grey mottles
13'

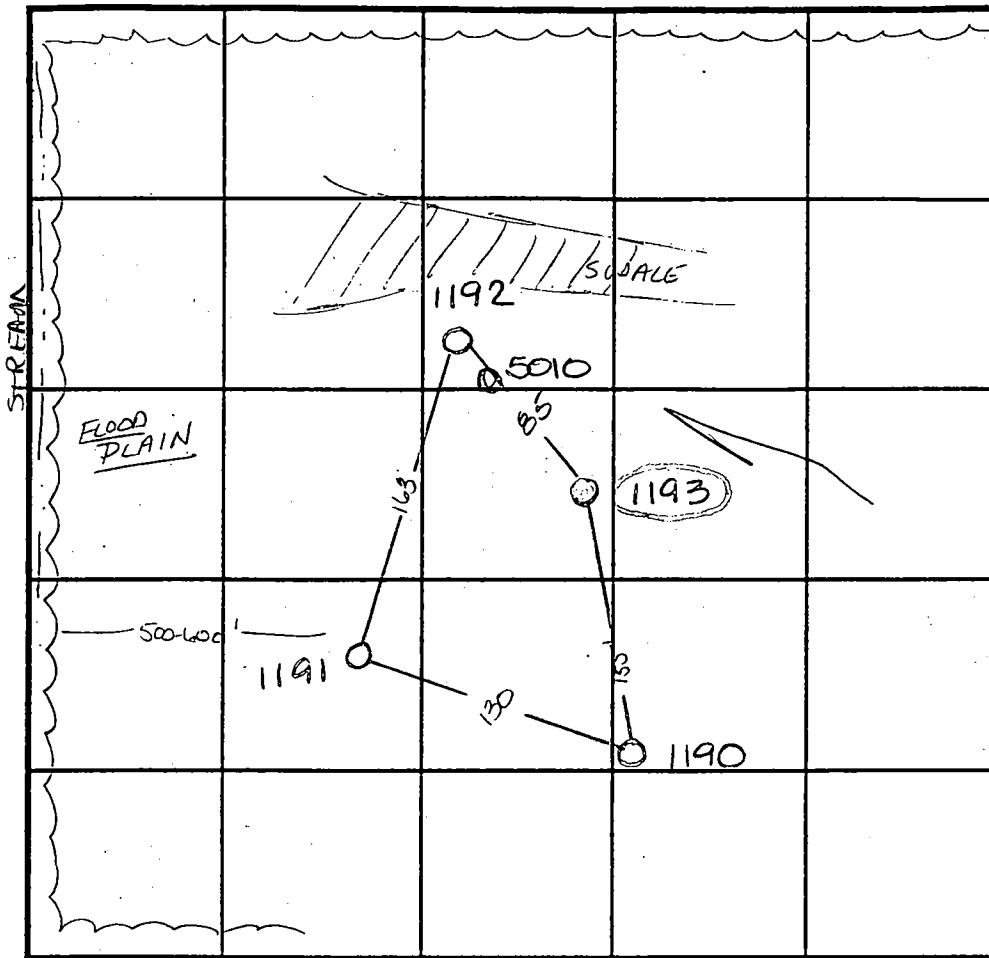
1191

3' Lt orange SiCLM
medium brown micaceous Salm <50% decayed shale/sapropite

1193
mottled yellow orange Salm

1193

5' dark red micaceous SiCLM platy structure
50% rock very micaceous dark red Salm
11'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE

1190
0' dark red brn SiCLM micaceous strong platy structure
4' medium brown Salm micaceous pockets of light orange Salm
13' 5010
4.0' brn CLM red mica SiCLM
7.0' lt orange almost white Salm decayed quartzite & diaspore 10%

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
9-20-95	1192	4.5' V13	1:52 ¹⁵	2:55	2:55	2:57 ³⁰	2 1/2 min
	1191	3' V12	1:59 ³⁰	2:03	2:03	2:11 ³⁰	8 1/2 min
	1193	3.5' V11	2:13 ³⁰	2:13 ⁴⁵	2:13 ⁴⁵	2:14 ¹⁵	30 sec
	1193	repor	2:16 ³⁰	2:17	2:17	2:17 ⁴⁵	45 sec
	1190	4' V13	10:43 ⁴⁵	10:45	10:45	10:49	4 min
3-5-96	5010	Visual	to 12.0 - see profile -				OK
	5011						

REMARKS _____

TYPE OF SOIL _____

TESTED BY Amy McMillen/D. Kerr ALSO PRESENT Tim Feaga

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

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

Wed
4/19/01
10:00

APPLICATION

PERCOLATION TESTING

A 514949

P _____

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

DISTRICT _____

DATE 2/27/01

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 Phil Dorsey

ADDRESS _____ PHONE _____

Mail to
~~AGENT OR~~ PROSPECTIVE BUYER Chris & Laura Cochran

ADDRESS 10260 TUSCANY RD V 21042 PHONE (410) 418-8721 or (410) 418-5296
Ellicott City, MD Fax: (410) 418-5297

PROPERTY LOCATION:

SUBDIVISION Brantwood LOT NO. 12

ROAD AND DESCRIPTION Butterfruit way
Ellicott City MD

TAX MAP _____ PARCEL # _____

SIZE OF LOT 1 acre TYPE BLDG. Single family
(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. Laura Cochran
(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

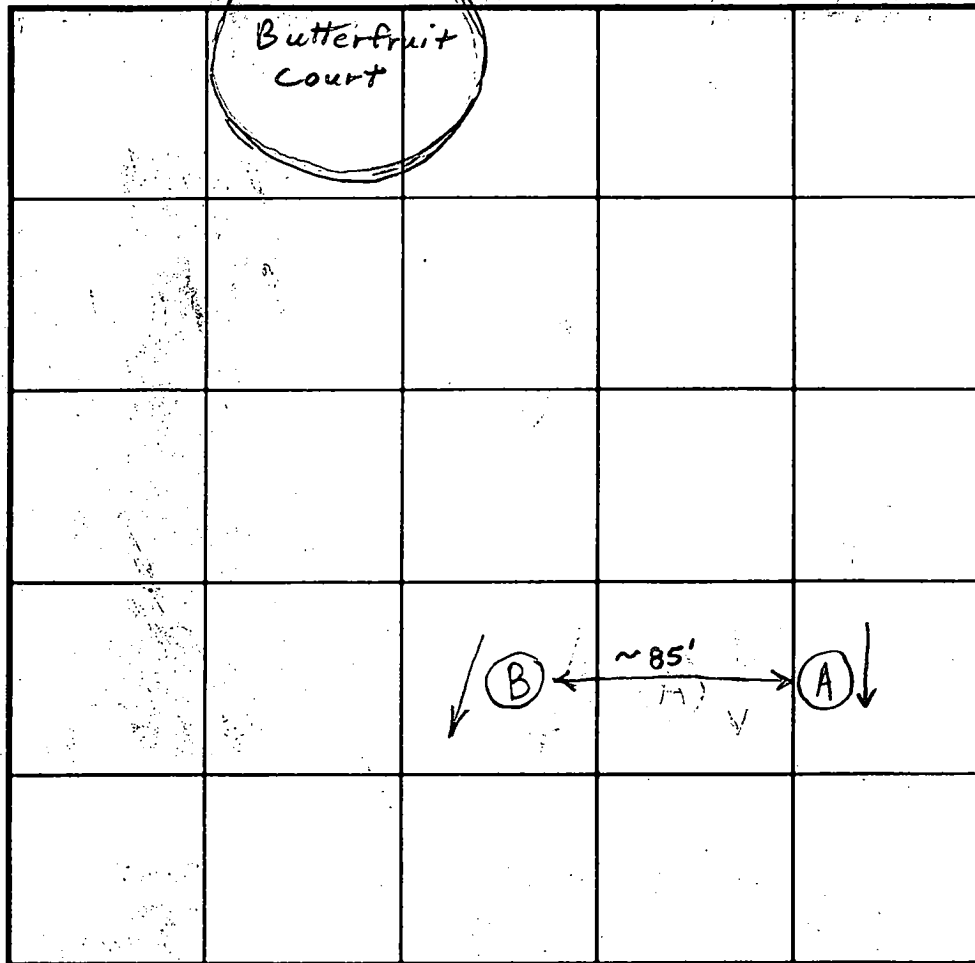
COUNTY #

SOIL PROFILE

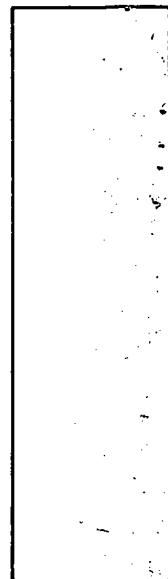
0' (A)
 Brown
 Cl Loam
 38"
 Red Br
 Sa Cl Loam
 7.5'
 Light Or
 Sa Loam
 10% Rock
 10'
 Possible
 Mottling
 12.5'
 Seepage
 Water
 13.0'
 13.5'

(B)
 Brown,
 Cl Loam
 4'
 Red Br
 Sa Cl Loam
 5'
 Br Sa Cl
 Loam
 80'
 Light Or
 Sa
 Loam
 10% Rock
 9.5'
 Possible
 Mottling
 12.5'

End of
Butterfruit
Court



SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/17/01	A	4' / 13.5'	10:10	10:19	10:19	10:38	19
	B	4' / 12.5'	10:41	10:53	10:53	11:12	19
Both test holes are approximately the same elevation.							

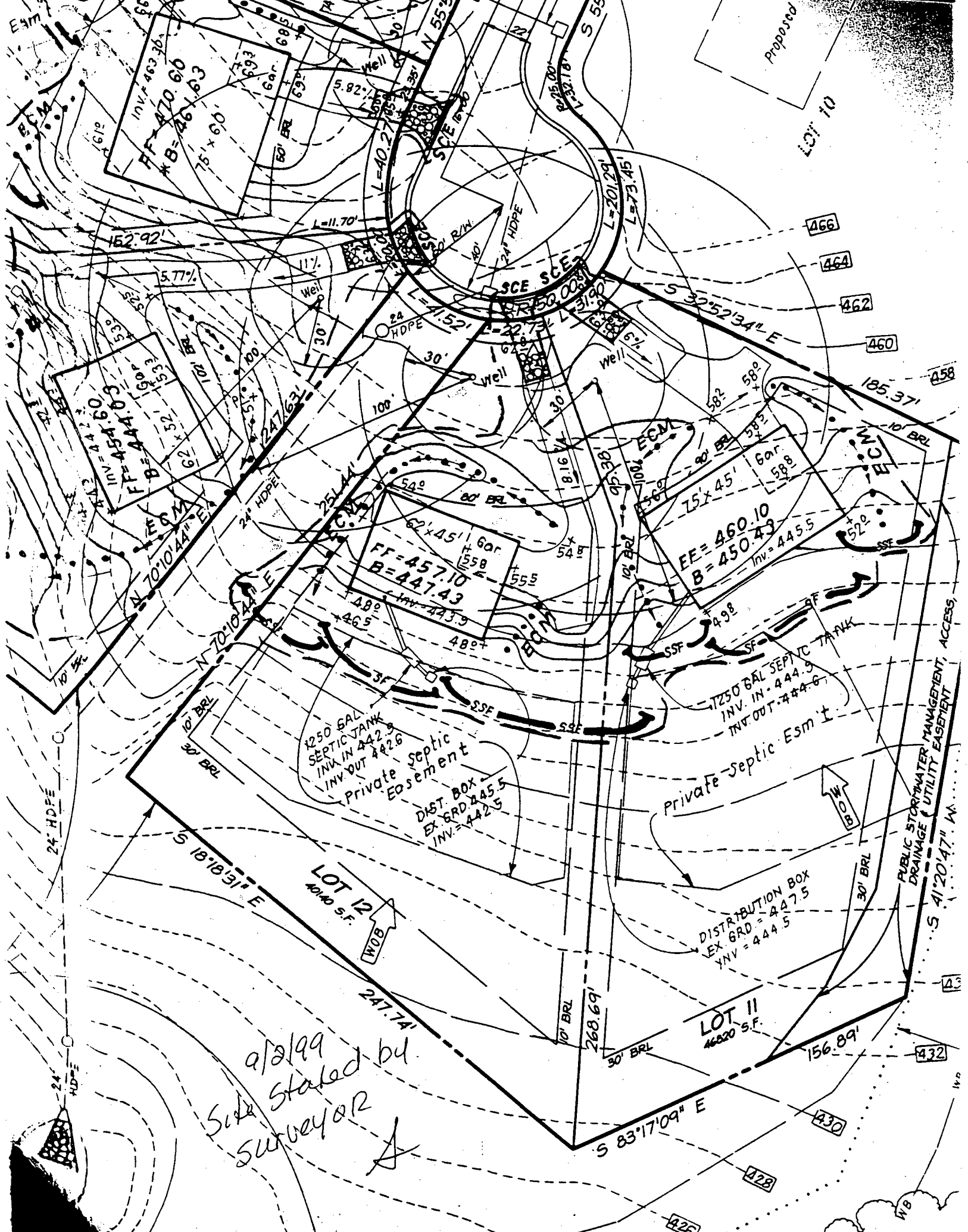
REMARKS Both holes O.K. for a shallow system.

TYPE OF SOIL

TESTED BY Brian Baker ALSO PRESENT K+K

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 19 TRENCH WIDTH 3

INLET DEPTH 2.5' MAXIMUM BOTTOM DEPTH 4.5' SQ. FT./BEDROOM 240



B 1 09842

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL please print or type

STATE PERMIT NUMBER

HO-94-2396 fill in this form completely

Date Received (APA) 07/23/99

OWNER INFORMATION

Brantwood, L.L.C. 8835 - P Columbia 100 Parkway Columbia, MD 21045

B 3

Howard

LOCATION OF WELL

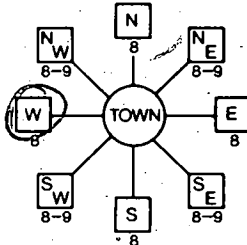
8 COUNTY 21 Brantwood 23 SUBDIVISION SECTION 2 LOT 12 Area 1 Pine Orchard 52 NEAREST TOWN MILES FROM TOWN 2

DRILLER INFORMATION

Robert L. Cline M W D 139 Cline & Duvall, Inc. 8093 Hillmark Ct., Frederick, MD 21704

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Butterfruit Way

11 NEAR WHAT ROAD 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH WEST SOUTH EAST 34 35 37 DISTANCE FROM ROAD ENTER FT OR MI 38 39 TAX MAP: 16 & 23 BLK: P/O 214

B 2

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 5 8 300 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 300 20

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 A5126944 COUNTY NAME COUNTY NO. STATE SIGNATURE INSERT S DATE ISSUED 090299 A M Mullen 9/2/00 CO SIGNATURE EXP. DATE NORTH GRID 520 000 EAST GRID 820 000

APPROXIMATE DEPTH OF WELL 250 FEET APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST

METHOD OF DRILLING (circle one)

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

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-contact local approving authority for policy on standby wells This well will deepen an existing well

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

APPROP. PERMIT NUMBER 54 G A P PERMIT NO. HO-94-2396

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

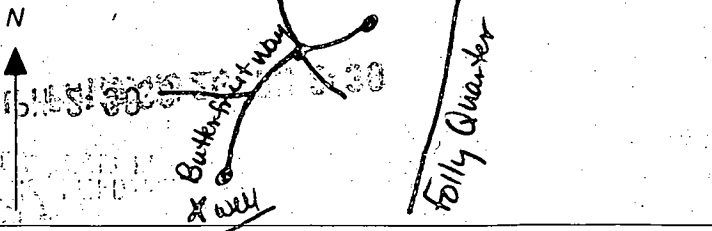
- SOURCES OF DRILLING WATER 1. well 2. 3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E 820

N 520

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

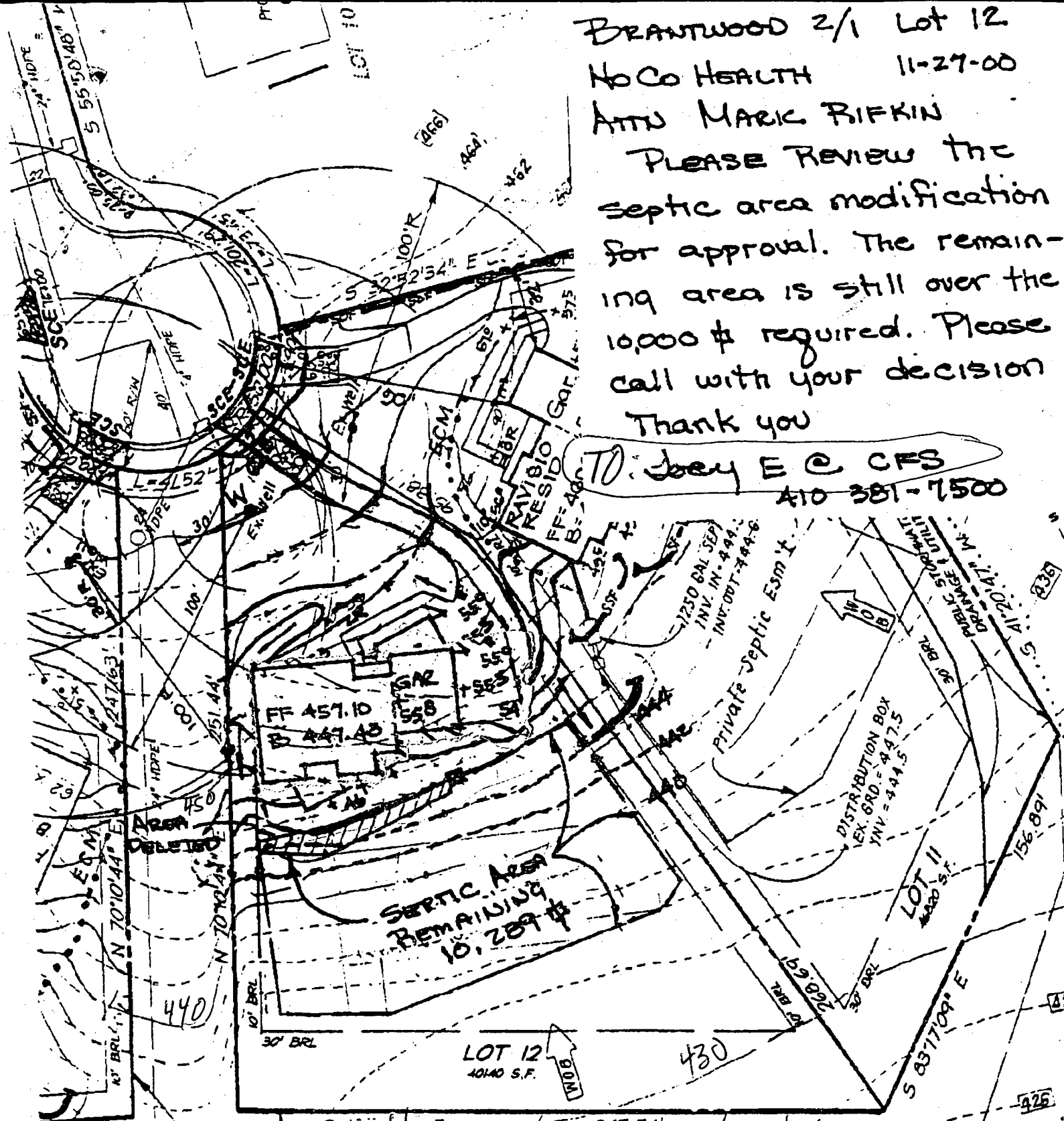


SPECIAL CONDITIONS

*NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED.

BRANTWOOD 2/1 Lot 12
 No Co HEALTH 11-27-00
 ATTN: MARK RIFKIN
 PLEASE REVIEW the
 septic area modification
 for approval. The remain-
 ing area is still over the
 10,000 ft required. Please
 call with your decision
 Thank you

TO: Joey E @ CFS
 410 381-7500



ORIGINAL AREA 10,849 ft²
 AREA DELETED 560 ft²
 AREA REMAIN. 10,289 ft²

ABOVE IS ATTACHED AND SUGGESTED HOUSE LOC WHICH ELIMINATES SRA ADJUSTMENT (MA)
 (faxed to Jo Eckert 12/8/00)

12/8/00 E T/c w/ Joan Cochran, buyer's mother: proposed adjustment is problematic because:
 a. 3x300' = 900' trench req'd to fit, and it is doubtful w/ adjustment + tight, even w/ adjustment
 b. 30% graded slope @ garage over SRA
 c. would not support buyer's desired deck (unspecific)
 d. area remains in front to slide house forward
 NO POSSIBLE way to approve downhill adjustment
 --- PUMPING SUGGESTED ---

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: Mark Brew Plumbing Telephone #: 301-854-3609
Address: PO Box 52 Highwind, MD 21077

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer
License # and name of individual responsible for the field installation:
Name (Print): Mark Brew License# MPL 16761

*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.

Name of Property Owner: CHRISTOPHER COCHRAN Telephone #: 410-918-8281
Subdivision: BRANTWOOD Lot #: Well Tag #: HO 44-2304
Site Address: 11419 Buhert Road Elkton City, MD 21042

Submersible Pump Data Pitless Adapter Well Cap and Electric Conduit
Make: Model #: Depth: 42" (36" min) Two piece watertight cap: X
Pump Capacity: 7 GPM NSF approved: Cap secured to casing: X
Well Yield: 2 GPM Conduit min 18" B.G.: V
Depth of well encountered at time of pump installation: (feet) Conduit secured to well cap: V
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 guards are required - Must circle one
Safety rope, if used, attached to inside of well casing with eye bolt

Piping to house House Connection
Type: PE PVC sleeved to undisturbed soil at wall penetration: V
PSI: 160 (160 psi min) Approximate length of sleeve: V
Depth of supply line: 36 (36" min) Sleeve caulked and sealed properly: V

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: [Signature] date: 5-12-03

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

Date Insp. Requested: 5/12/03 Date Insp. Approved: 5/12/03 (SO)
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 attached properly and casing 8" above finished grade
Water supply line sleeved adequately at house connection
Adequate grout observed below pitless adapter

C1 1932 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 A512694L

ST/CO USE ONLY DATE Received MM DD YY

DATE WELL COMPLETED MM DD YY 12 8 99 Depth of Well 425 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-2396

OWNER Brantwood LLC STREET OR RFD Butterfruit Way TOWN ELLICOTT CITY MD SUBDIVISION Brantwood SECTION II LOT 12

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 FROM TO check if water bearing. BROWN SHALE 0 70 BONE SLATE 70 425 WATER AT 290

GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL (Circle one) CEMENT CM BENTONITE CLAY BC NO. OF BAGS 22 NO. OF POUNDS 2068 GALLONS OF WATER 132 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 79 ft.

CASING RECORD casing types insert appropriate code below MAIN CASING TYPE ST Nominal diameter top (main) casing (nearest inch)! 6 Total depth of main casing (nearest foot) 80

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

SCREEN RECORD screen type or open hole insert appropriate code below ST BR HO PL OT

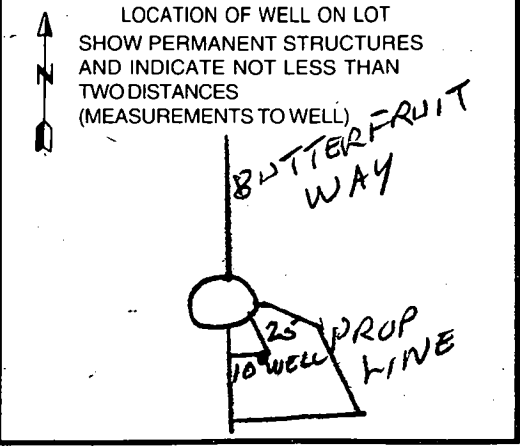
DEPTH (nearest ft.) HO 79 425. Table with columns 1-2, 3-4, 5-6, 7-8, 9-10, 11-12, 13-14, 15-16, 17-18, 19-20, 21-22, 23-24, 25-26, 27-28, 29-30, 31-32, 33-34, 35-36, 37-38, 39-40, 41-42, 43-44, 45-46, 47-48, 49-50, 51-52, 53-54, 55-56, 57-58, 59-60, 61-62, 63-64, 65-66, 67-68, 69-70, 71-72, 73-74, 75-76, 77-78, 79-80.

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

PUMPING TEST HOURS PUMPED (nearest hour) 6 PUMPING RATE (gal. per min.) 2. METHOD USED TO MEASURE PUMPING RATE TIME WATER LEVEL (distance from land surface) BEFORE PUMPING 56 ft. WHEN PUMPING 150 ft. TYPE OF PUMP USED (for test) S submersible

PUMP INSTALLED DRILLER INSTALLED PUMP 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) 49 above LAND SURFACE below 1 (nearest foot)



DRILLERS LIC. NO. 1 MW D 139 Robert Clime DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. 1 MW D 140 Gary Harley SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

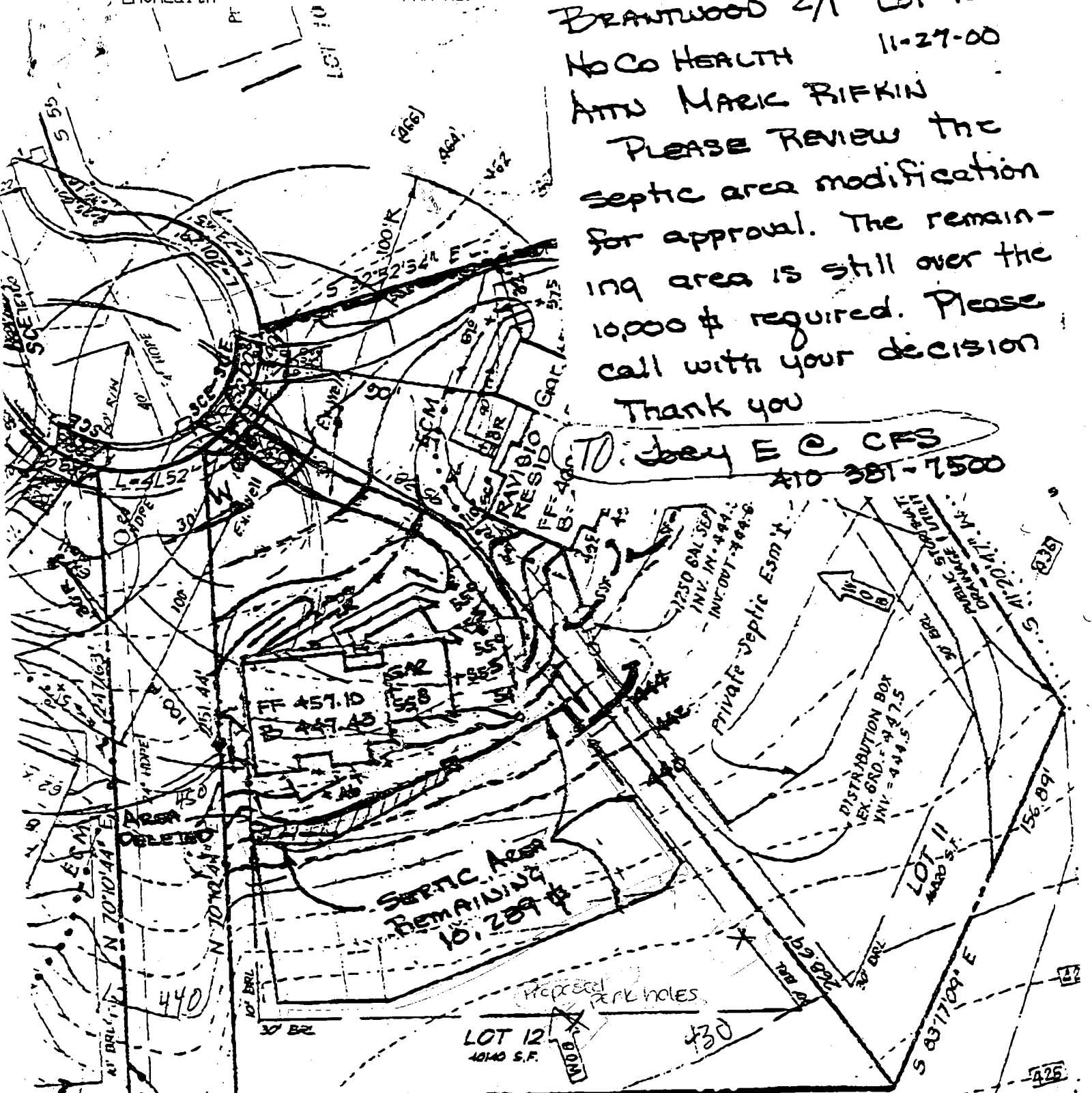
BRANTWOOD 2/1 LOT 11-27-00

NO CO HEALTH

ATTN: MARIC RIFKIN

PLEASE REVIEW THE SEPTIC AREA MODIFICATION FOR APPROVAL. THE REMAINING AREA IS STILL OVER THE 10,000 \$ REQUIRED. PLEASE CALL WITH YOUR DECISION
Thank you

Joy E @ CRS
410-381-7500



ORIGINAL AREA 10,849 \$

AREA DELETED 560 \$

AREA REMAIN. 10,289 \$

30' BUFFER ATTACHED AS SUGGESTED HOUSE LOC WHICH ELIMINATES SRA ADJUSTMENT

12/3/00 E
 247.74' buyer's
 w/ Joan Cochran, mother of for 5 Bk
 proposed adjustment is problematic because:
 a. 3x300' = 900' trench req'd to fit, and it is doubtful adjustment + tight, even w/ adjustment
 b. 30% graded slope @ garage over SRA
 c. would not support buyer's desired deck (unspecif.)
 d. area remains in front to slide house forward
 NO POSSIBLE way to approve downhill adjustment

