

LAYOUT 10/3/02 10:30-11 INSP 4 10/9/02 3:30
 INSP 2 10/4/02 2:30pm INSP 5 10/25/02 2:30PM
 INSP 3 10/8/02 2:30 INSP 6 _____

ISSUE DATE: 8/29/2002
 APPROVAL DATE: 10/24/02

**PERMIT
INDEXED**

P 517445
 A 512754-E

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

05-366402

South Carroll Backhoe, Inc IS PERMITTED TO INSTALL ALTER

ADDRESS: 4410 Salem Bottom Road, Westminster PHONE NUMBER: 410-875-4197

SUBDIVISION: Pindell Crossing LOT NUMBER: A (60)

ADDRESS: 7500 Pindell School Road PROPERTY OWNER: NVR Inc.

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

PUMP CHAMBER CAPACITY (GALLONS): 1500 COMPARTMENTED TANK REQUIRED

NUMBER OF BEDROOMS: 5

SQUARE FEET PER BEDROOM: 210

LINEAR FEET OF TRENCH REQUIRED: 350 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 5.0 feet below original grade. 2.0 feet of stone below distribution pipe.
LOCATION:	Place the distribution box as shown on approved site plan. Run trenches on contour. Keep trenches 10' center to center (7' edge to edge) to conserve future repair area.
NOTES:	

PLANS APPROVED: Steven R. Krieg OK 3/20/02 (SO) DATE: 3/11/2002

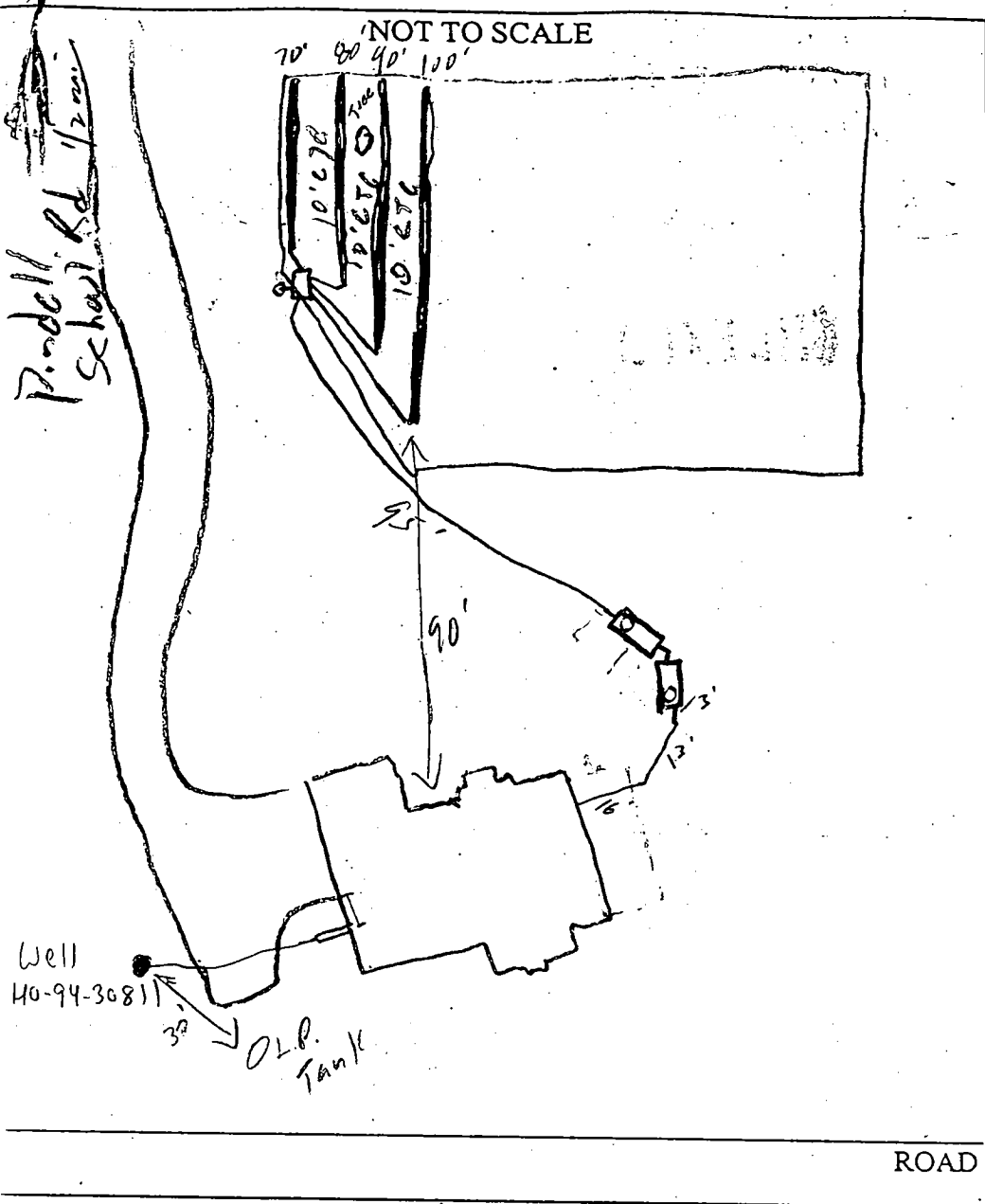
NOTES: PERMIT VOID AFTER 2 YEARS
 CONTRACTOR IS RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
 WATERTIGHT SEPTIC TANKS REQUIRED
 ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL UNLESS SPECIFICALLY AUTHORIZED
 MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS 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
 0-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

10-3-02 800138613 - RISE AND TANK
 5-12-04 800148121 - FINISHED BASEMENT

4512 754-E



TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
3	4	6
NUMBER OF TRENCHES		4
TOTAL LENGTH		340
ABSORPTION AREA		1020 ft ²
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	1500 GAL
SEAM LOC	Top
TANK LID DEPTH	2'
BAFFLES	<input checked="" type="checkbox"/>
BAFFLE FILTER	<input type="checkbox"/>
MANHOLE LOC	Front
6" PORT LOC	<input type="checkbox"/>
WATERTIGHT TEST	<input checked="" type="checkbox"/>
SEPTIC TANK 2 LEVEL <input checked="" type="checkbox"/>	
CAPACITY	1500 GAL
SEAM LOC	Top
TANK LID DEPTH	1.5'
BAFFLES	<input checked="" type="checkbox"/>
BAFFLE FILTER	<input type="checkbox"/>
MANHOLE LOC	Center
6" PORT LOC	<input type="checkbox"/>
WATERTIGHT TEST	<input type="checkbox"/>

PRE-CONSTRUCTION 10/3/02 Lot staked, contours maybe off. Inset 1/14 trenches 70'/80'/90'/100' 10' CTC House corner changed (SO)

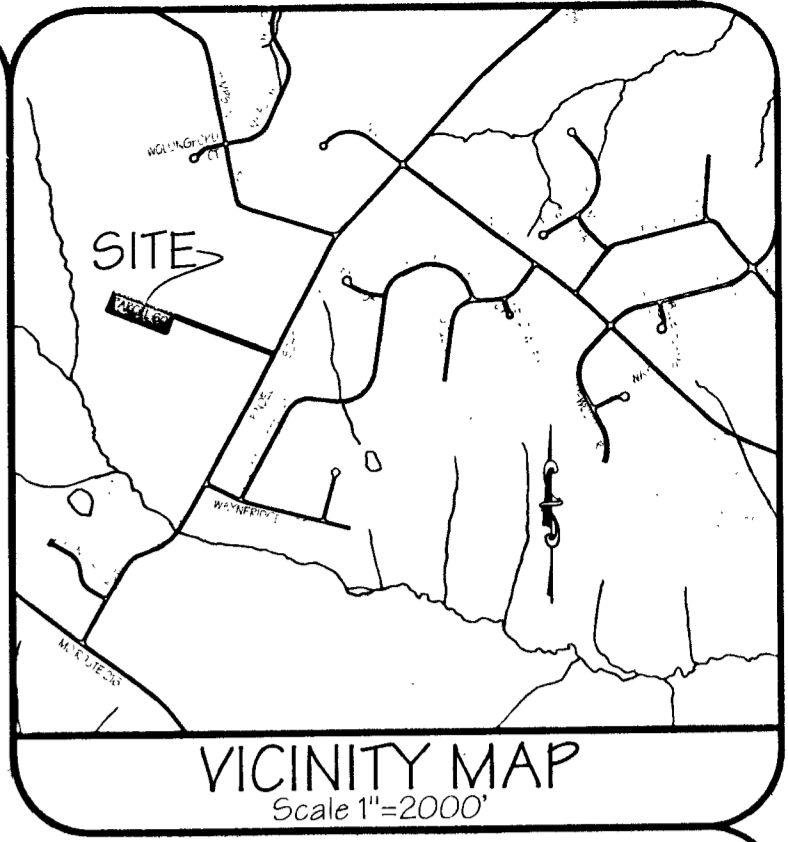
INSTALLATION 10/6/02 Tanks set, 1 1/2 trenches installed (SO)

10/9/02 OK to cover all work, Pump & Alarm tests needed (SO)

10/24/02 Pump & Alarm tests OK (SO)

FINAL INSPECTOR [Signature] DATE OF APPROVAL 10/24/02

BUILDING DEPARTMENT SIGNED



LEGEND:

- 472 --- EXISTING GROUND
- 472 --- PROPOSED GRADE
- PROF WELL
- >--- DRAINAGE FLOW
- SCE STABILIZED CONSTRUCTION ENTRANCE
- LIMIT OF DISTURBANCE (GP02-30)
- ~ ~ ~ EXISTING TREES TO BE REMOVED
- ~ ~ ~ EXISTING TREES TO BE SAVED
- SF — SF — SILT FENCE
- TPF — TPF — TREE PROTECTION FENCE

NOTES:

1. EXISTING ZONING: RR (RURAL RESIDENTIAL)
2. PLAT REFERENCE: 15100
3. LIMIT OF DISTURBANCE: 46,000 SQ. FT.
4. THE PROPOSED DRIVEWAY FOR THIS LOT SHALL BE A MINIMUM OF 10 FEET WIDE, 6" CRUSHER RUN WITH 2 1/2" MACADAM SURFACE.
5. THE TOPOGRAPHY SHOWN IS TAKEN FROM THE HOWARD COUNTY AERIAL TOPOGRAPHY.
6. SEE ARCHITECTURAL PLANS FOR BUILDING DIMENSIONS.
7. GRADING PERMIT FOR THIS LOT WAS ISSUED UNDER GP02-30.
8. THE PROPOSED SEPTIC SYSTEM FOR THIS LOT REQUIRES A PUMP. THE SYSTEM AS SHOWN REQUIRES AN INTERIOR PUMP PIT FOR BASEMENT SERVICE.
9. PUMP CHAMBER TO BE A MINIMUM 1000 GALLON TOP SEAMED PUMP PIT WITH SINGLE EFFLUENT PUMP. PUMP SHALL BE EQUIPPED WITH AUDIBLE AND VISUAL ALARM SYSTEM FOR HIGH WATER AND PUMP MALFUNCTION. ALARM SYSTEM SHALL BE INSTALLED ON A SEPARATE ELECTRICAL CIRCUIT. INSTALL CHECK VALVES AS REQUIRED.
10. PROVIDE MANHOLE CLEANOUT TO FINISHED GRADE AT PROPOSED SEPTIC TANK AND THE PUMP CHAMBER.
11. DETAILS AND SPECIFICATIONS OF THE PROPOSED PUMP WITHIN THE PUMP PIT TO BE SUPPLIED BY THE CONTRACTOR FOR REVIEW AND APPROVAL BY THE HOWARD COUNTY HEALTH DEPARTMENT PRIOR TO ISSUANCE OF A SEPTIC PERMIT.

SEWAGE SYSTEM DESIGN DATA:

- 1 Invert at foundation wall: 461.50 First Floor Service Only (Wall Hung with Interior Pump Pit for Basement Services)
- 2 1500 Gallon Septic Tank (5 Bedrooms)
Provide Manhole to Finished Grade
A. Ex. Ground Over Tank: 471.50
B. Prop. Grade Over Tank: 471.00
C. Invert In: 461.00 LID OF ST = 470
D. Invert Out: 468.30
- 3 1600-Gallon Pump Pit
A. Ex. Ground over Pit: 472.00
B. Prop. Grade over Pit: 471.60
C. Invert In: 468.60 LID OF PPT = 469.6
D. Invert Out: 469.10
- 4 Distribution Box: (Provide 5 Outlets Minimum)
A. Ex. Ground Over Box: 475.10
B. Prop. Grade Over Box: 475.10
C. Invert In: 471.10
- 5 Trench Design: 70 LF/Bedrm. X 5 Bedrm. = 350 LF

	A	B	C	D	E
Ex. Gr. Over Trench:	474.70	474.30	474.00	473.60	473.20
Invert Trench:	470.70	470.30	470.00	469.60	469.20
Bottom Trench:	468.70	468.30	468.00	467.60	467.20
Trench Length:	50 Ft.	60 Ft.	70 Ft.	80 Ft.	90 Ft.
Trench Width:	3 Ft.	3 Ft.	3 Ft.	3 Ft.	3 Ft.

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

ENGINEER'S CERTIFICATE

"I HEREBY CERTIFY THAT THIS PLAN FOR EROSION AND SEDIMENT CONTROL REPRESENTS A PRACTICAL AND WORKABLE PLAN BASED ON MY PERSONAL KNOWLEDGE OF THE SITE CONDITIONS AND THAT IT WAS PREPARED IN ACCORDANCE WITH REQUIREMENTS OF THE HOWARD SOIL CONSERVATION DISTRICT."

SIGNATURE OF ENGINEER _____ DATE _____

THESE PLANS HAVE BEEN REVIEWED FOR THE HOWARD SOIL CONSERVATION DISTRICT AND MEET THE TECHNICAL REQUIREMENTS.

NATURAL RESOURCE CONSERVATION SERVICE _____ DATE _____

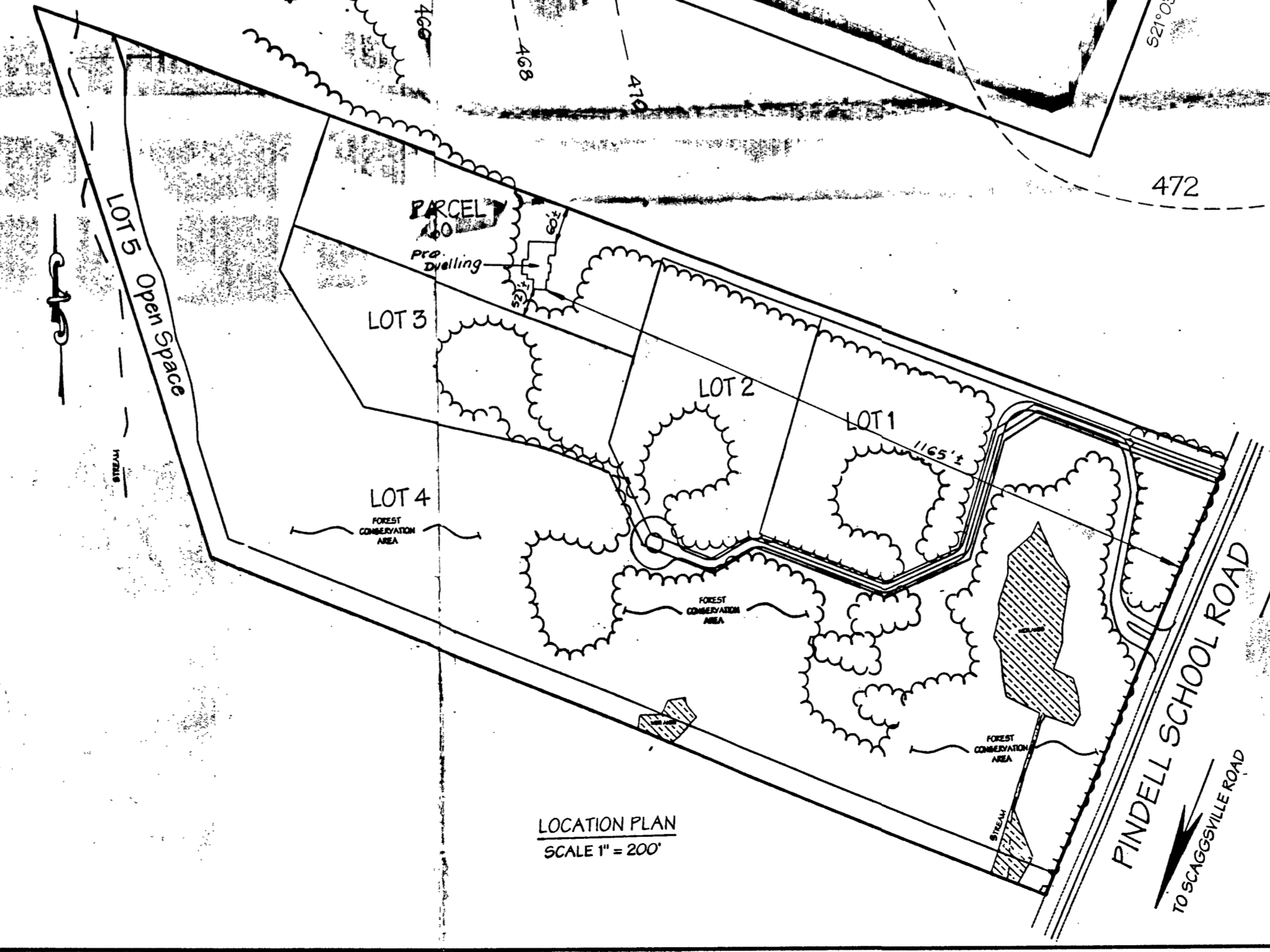
DEVELOPER'S CERTIFICATE

"I HEREBY CERTIFY THAT ALL DEVELOPMENT AND/OR CONSTRUCTION WILL BE DONE ACCORDING TO THESE PLANS AND THAT ANY RESPONSIBLE PERSONNEL INVOLVED IN THE CONSTRUCTION PROJECT WILL HAVE A CERTIFICATE OF ATTENDANCE AT A DEPARTMENT OF THE ENVIRONMENT APPROVED TRAINING PROGRAM FOR THE CONTROL OF SEDIMENT AND EROSION BEFORE BEGINNING THE PROJECT. I ALSO AGREE TO PERIODIC ON-SITE INSPECTION BY THE HOWARD SOIL CONSERVATION DISTRICT OR THEIR AUTHORIZED AGENTS, AS AND WHEN NECESSARY."

SIGNATURE OF DEVELOPER _____ DATE _____

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

HOWARD SOIL CONSERVATION DISTRICT _____ DATE _____



LDE Inc. Engineers, Surveyors, Planners 9250 Ramsey Road, Suite 106 Columbia, Maryland - 21045 (410)715-1070 - (301)596-3424 - FAX(410)715-9340		SCALE 1" = 30'
DESIGNED BDB	PLOT PLAN PINDELL CROSSING PARCEL 60	
DRAWN JLM		
CHECKED BDB	TAX MAP 41 GRID 13 & 14 PARCEL 201 5TH ELECTION DISTRICT HOWARD COUNTY, MARYLAND	
DATE 8/2001	BUILDER NV HOMES 2200 DEFENSE HIGHWAY SUITE 301 CROFTON, MD 21114 (301) 858-0522 (410) 721-4703	JOB NO. 01-031
		FILE NO.

10/4/02

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: Robert L. Fezzer Co. Inc Telephone #: 410-781-4655
Address: 6301 Bayview H. Ave.
Sykesville, MD

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer
License # and name of individual responsible for the field installation:
Name (Print): Robert L. Fezzer License # 3122

*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: NV Homes Telephone #: 410-721-4703
Subdivision: PINDEN CROSSING Lot #: 46 Well Tag #: HO-99-3081
Site Address: 7500 Pinden Sch Rd Prestar A

Submersible Pump Data Pitless Adapter Well Cap and Electric Conduit
Make: _____ Make: Campbell Two piece watertight cap:
Model #: _____ Model #: PT 800 Screened, vented well cap:
Pump Capacity _____ GPM Depth: 40" (36" min) Cap secured to casing:
Well Yield: 15 GPM NSF approved: Conduit min 18" B.G.:
Depth of well encountered at time of pump installation: _____ (feet) Conduit secured to well cap:
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: Poly PVC sleeved to undisturbed soil at wall penetration:
PSI: (160 psi min) Approximate length of sleeve: 5'
Depth of supply line: 40" (36" min) Sleeve caulked and sealed properly:

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: Robert L. Fezzer date: 10/4/02

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

Date Insp. Requested: 10/4/02 Date Insp. Approved: 10/4/02 (SRK)
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

TRIED CALLING FOR INSPECTION ALL MORNING ANSWERING MACHINE STILL ON. WOULD LIKE INSPECTED 10/4/02 IF POSSIBLE ANY PROBLEM PLEASE CONTACT RICK CROSS COU# 410-456-5729

C1 0720 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.

COUNTY NUMBER 13 OKSRM 9/19/01

ST/CO USE ONLY
DATE RECEIVED
MM DD YY

DATE WELL COMPLETED
MM DD YY
05 16 2001

Depth of Well
22 160 26
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
HO-94-3081

OWNER Pindell Woods LLC
STREET OR RFD Pindell School Rd TOWN FULTON
SUBDIVISION Setterholm Prop SECTION LOT A

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	
Overburden	0	65	
Gray Rock	65	160	x

water at 80'

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 27 NO. OF POUNDS 2700
GALLONS OF WATER 1162
DEPTH OF GROUT SEAL (to nearest foot)
from 0 ft. to 72 ft.
(enter 0 if from surface)

CASING RECORD
casing types insert appropriate code below
STEEL (ST) CONCRETE (CO)
PLASTIC (PL) OTHER (OT)
MAIN CASING TYPE: ST
Nominal diameter top (main) casing (nearest inch): 6
Total depth of main casing (nearest foot): 72

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

SCREEN RECORD
screen type or open hole insert appropriate code below
STEEL (ST) BRASS (BR) OPEN HOLE (HO)
PLASTIC (PL) OTHER (OT)

NUMBER OF UNSUCCESSFUL WELLS: 0
WELL HYDROFRACTURED: YES (Y) NO (N)

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 28.04.04 "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. MWD 399
DRILLERS SIGNATURE: Warren Powell
LIC. NO. MWD 241

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

C 2 DEPTH (nearest ft.)

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	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
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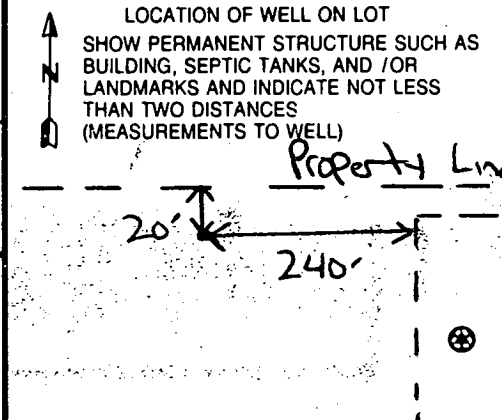
DIAMETER OF SCREEN (NEAREST INCH)
56 60
from to

GRAVEL PACK IF WELL DRILLED IF WELL 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.) 15.0
METHOD USED TO MEASURE PUMPING RATE: Submersible
WATER LEVEL (distance from land surface)
BEFORE PUMPING 16 ft.
WHEN PUMPING 32 ft.
TYPE OF PUMP USED (for test)
A air P piston T turbine
C centrifugal R rotary O (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: 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 (nearest foot)
- below }



B 1 7071

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

STATE PERMIT NUMBER

HO-94-3081

W515213 please print or type

fill in this form completely

Date Received (APA) 4/20/01

OWNER INFORMATION

Pindell Woods LLC, 8835 P Columbia 100 Rwy, Columbia MD 21045

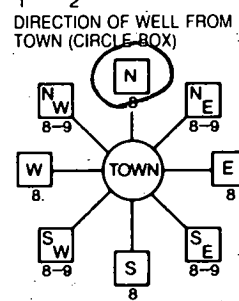
LOCATION OF WELL

Howard COUNTY, Setteholm Property, Parcel A, FULTON NEAREST TOWN, 1 MILE FROM TOWN

DRILLER INFORMATION

Paul M. Fabiszak, MWD 399, G Edgar Harr Sons Corp, 12047 Falls Rd Gockersville 21030, Signature, Date 4-18-01

DIRECTION OF WELL FROM TOWN



Pindell School Road NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX), DISTANCE FROM ROAD 1000 FT

WELL INFORMATION

APPROX. PUMPING RATE 5 GAL. PER MIN., AVERAGE DAILY QUANTITY NEEDED 750 GAL. PER DAY

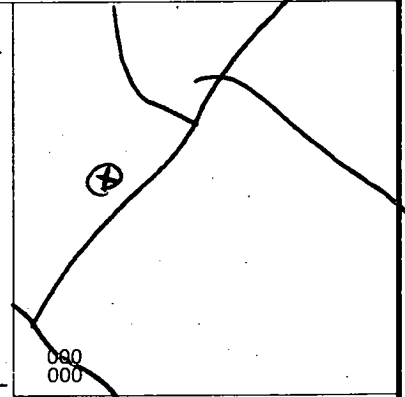
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard Co. COUNTY NAME, 13 COUNTY NO., DATE ISSUED 4/24/01, EXP. DATE 4/24/02, NORTH GRID 480000, EAST GRID 820000

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION (circled), FARMING, INDUSTRIAL, PUBLIC WATER SUPPLY WELL, TEST, OBSERVATION, MONITORING, GEO-THERMAL

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X, SOURCES OF DRILLING WATER 1. Well



WRITE THE BOX NUMBER FROM THE MAP HERE, E 820, N 480

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

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED, AIR-ROTARY, AIR-PERCUSION, CABLE, REVERSE ROTARY, other

REPLACEMENT OR DEEPEMED 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 DEEPEMED AN EXISTING WELL

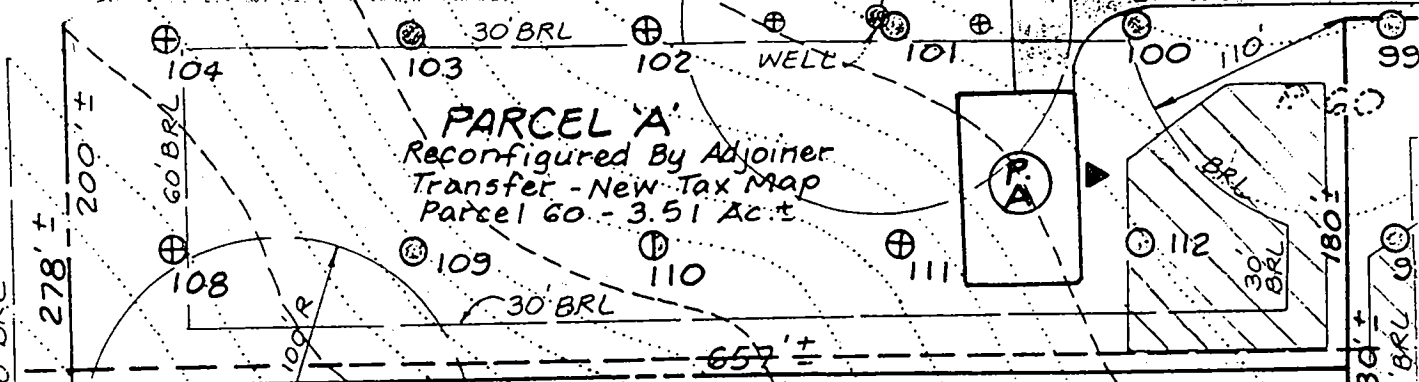
Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROX. PERMIT NUMBER, PERMIT No. HO-94-3081

SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

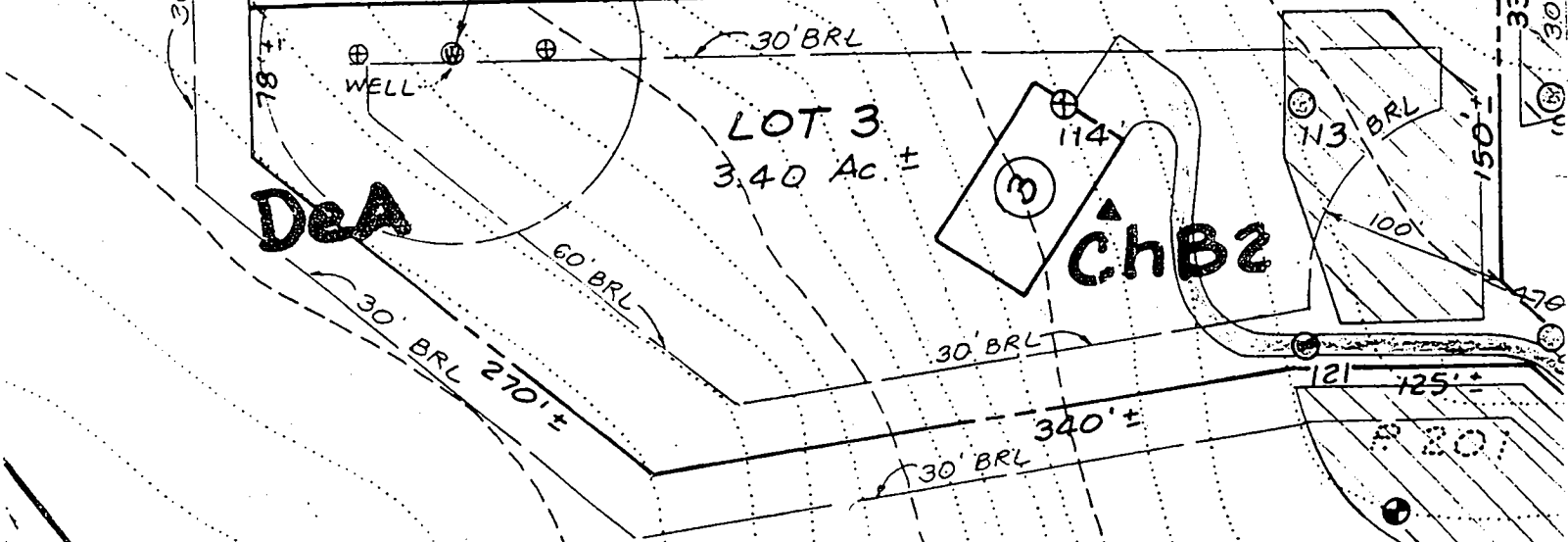
S 68° 56' 22" E



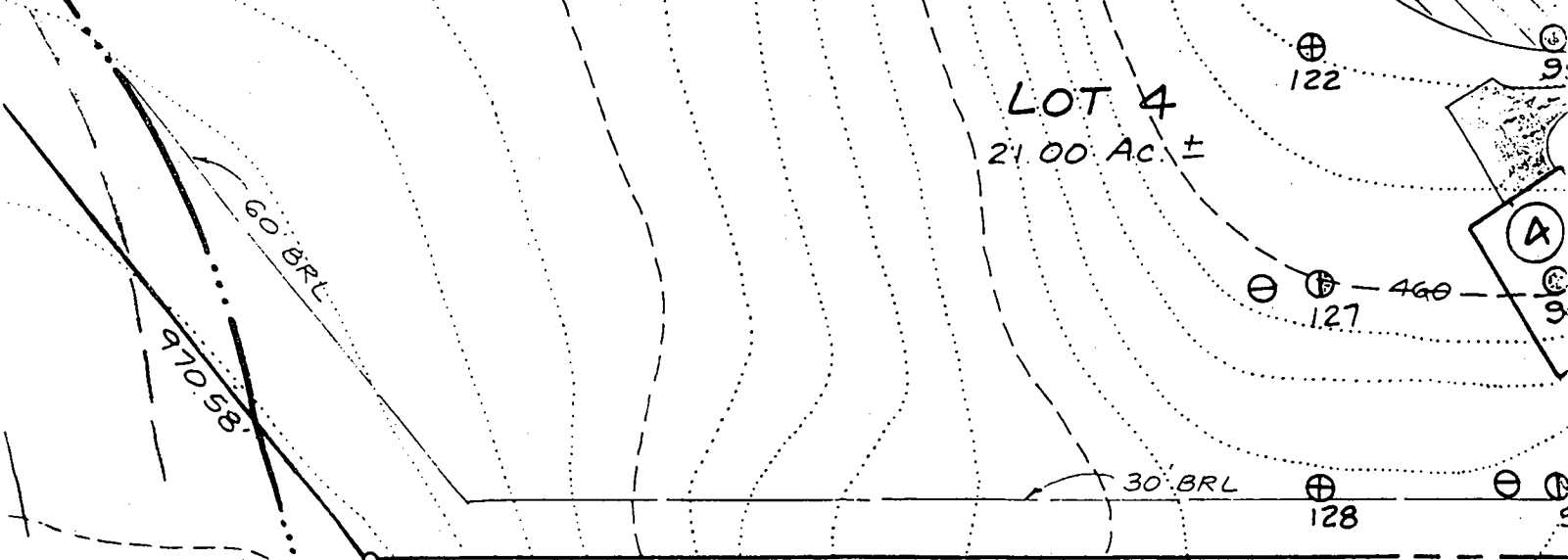
DeA

LOT 3
3.40 Ac. ±

ChBz



LOT 4
21.00 Ac. ±



N 67° 54' 57" W

4/24/01
Well site located
by surveyor
[Signature]



APPLICATION

PERCOLATION TESTING

A 512754

P _____

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

DISTRICT _____

DATE _____

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 Brantly Development Group, Inc.
ADDRESS 8835P Columbia 100 Parkway
Columbia, MD 21045 PHONE 410-730-0810

AGENT OR PROSPECTIVE BUYER Heritage Land Development
ADDRESS 3060 Washington Road (Rt. 97), Suite 220
Glenwood, MD 21738 PHONE 410-489-7900

PROPERTY LOCATION:

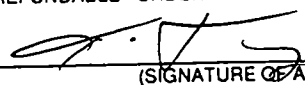
SUBDIVISION Pindell School LOT NO. 3

ROAD AND DESCRIPTION Pindell School Road

TAX MAP 41 PARCEL # 201

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.



(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 #

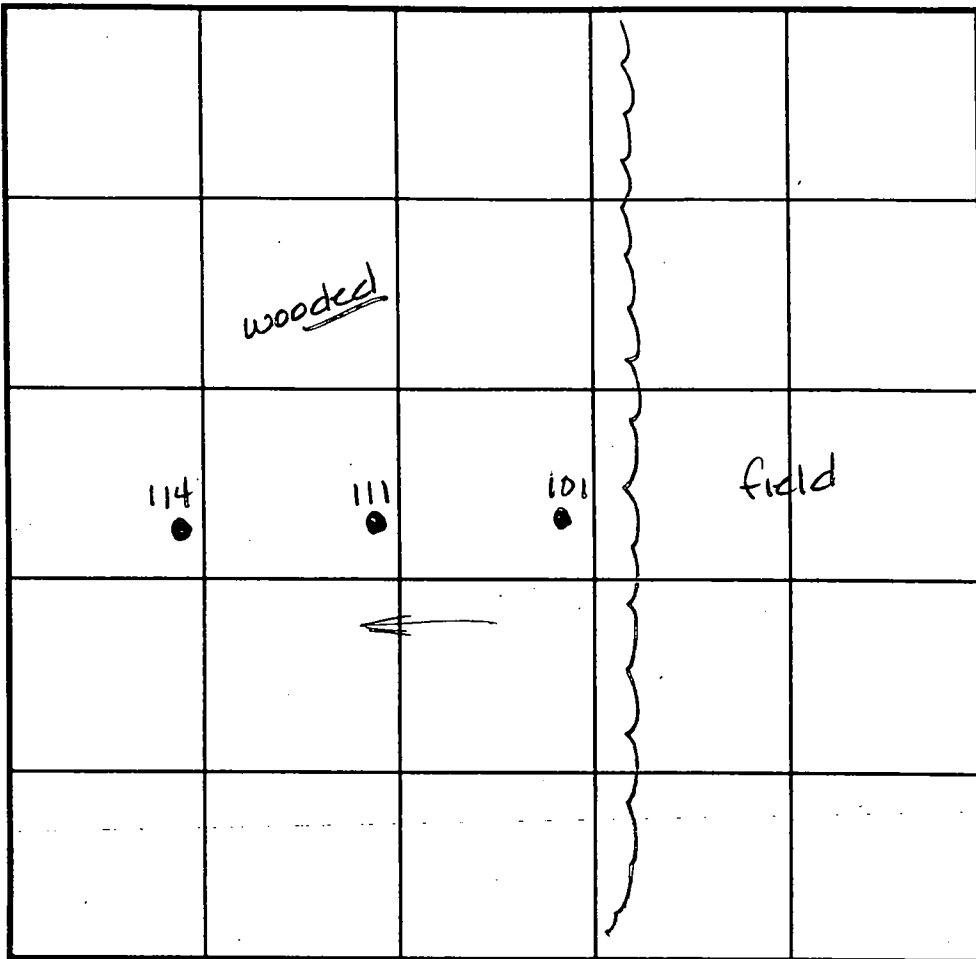
SOIL PROFILE

0' 111
 dark red silclm

4.0 red brn silclm

8.5 60% saprolite rock dark red silclm

12.0



SOIL PROFILE

0'

114
 lgt brown to tan silclm

5.0 red and tan mottled silclm 20% rock

12.0

101
 yellow tan silclm

3.0 dark pink silclm 10% R_x

12.0

↓

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Pindell School Road

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11-1-99	111	4.5 / 12.0	2:11	2:24	2:24	>30 min (E)	Insoff cent depth - to bedrock
	114	5.5 / 12.0	2:43	No movement	—	—	slow
	101	Visual	to 12.0 - see profile		—	—	OK

REMARKS _____

TYPE OF SOIL _____

TESTED BY Amy McMillen ALSO PRESENT Bruce Burton

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

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

APPLICATION

PERCOLATION TESTING

A 512754

P _____

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

DISTRICT _____

DATE _____

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 Brantly Development Group, Inc.
8835P Columbia 100 Parkway
ADDRESS Columbia, MD 21045 PHONE 410-730-0810

AGENT OR PROSPECTIVE BUYER Heritage Land Development
3060 Washington Road (Rt. 97), Suite 220
ADDRESS Glenwood, MD 21738 PHONE 410-489-7900

PROPERTY LOCATION:

SUBDIVISION Pindell School LOT NO. 4

ROAD AND DESCRIPTION Pindell School Road

TAX MAP 41 PARCEL # 201

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.

[Signature]
(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

102

red brown silty clay

dark red silty clay no rock

109 103

red brown silty clay

orange to pink silty mica 5%

110

red brown silty clay

orange brn silty mg & Fe mottles begin @ 9.0

SOIL PROFILE

108

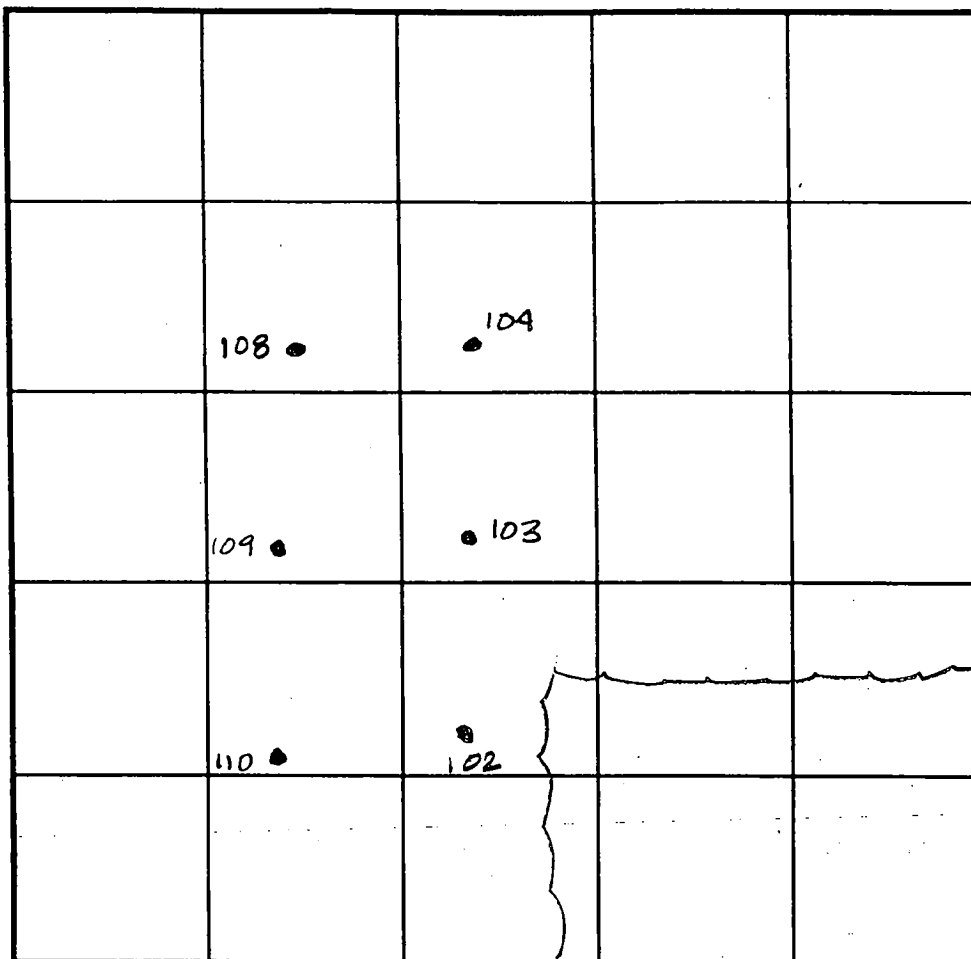
heavy silty mottled red

mottled @ 8.0 water coming in @ 11.0

104

grey mottled silty clay perched H₂O

water



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11-1-99	102	4.0 / 12.0	1:44	No perc - see profile			
		Deep clay					F
	109	4.0 / 12.0	1:52	1:53	1:53	1:55	2min
	103	Visual	to 12.0 - see profile				OK
	110	Visual	to 12.0 - see profile - Hold for wet				Wet
	104	Insufficient depth to H ₂ O - see profile					F
	108	Insufficient depth to H ₂ O - see profile					F

REMARKS _____

TYPE OF SOIL _____

TESTED BY Amy McMillan

ALSO PRESENT Bruce Burton

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____

TRENCH WIDTH _____

INLET DEPTH _____

MAXIMUM BOTTOM DEPTH _____

SQ. FT./BEDROOM _____

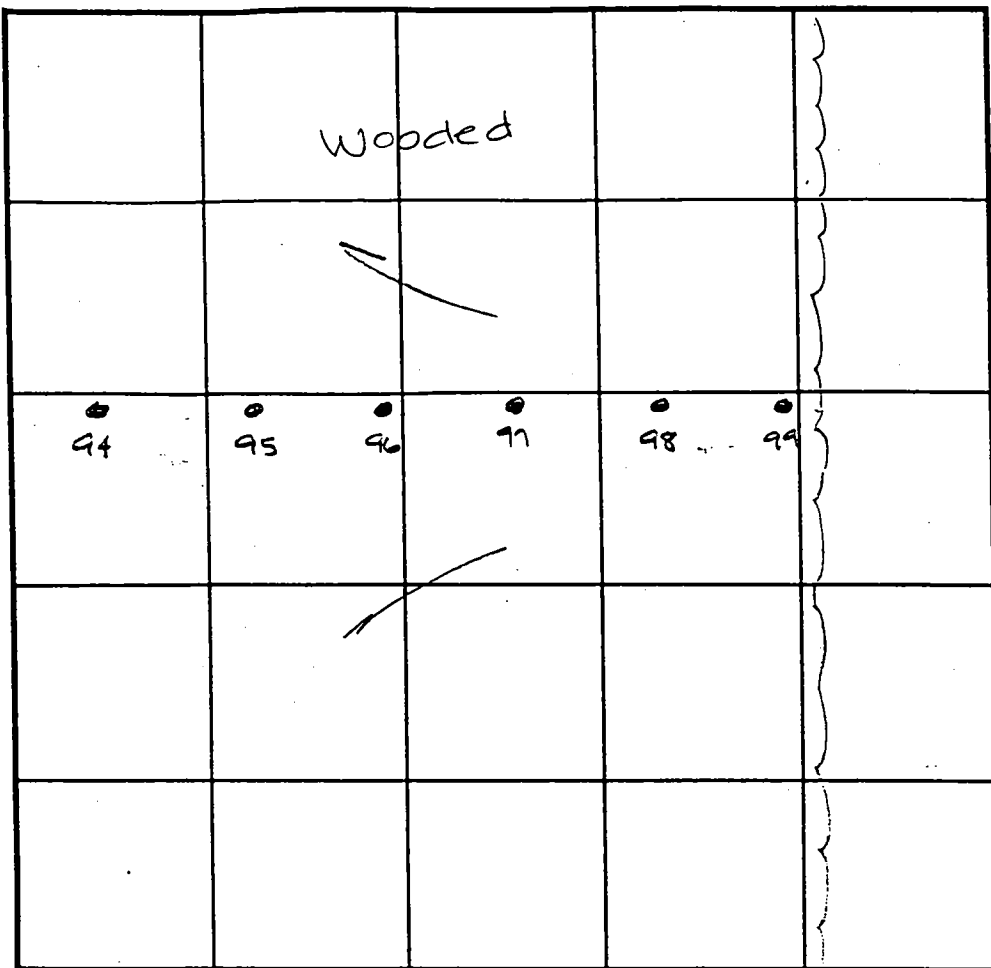
COUNTY #

SOIL PROFILE

99 98
 pink SiClm
 dark pink SaLm
 10% decayed rock
 some yellow banding

97
 dark red SiClm
 dark pink SiSaLm
 dark pink SiSaLm
 30% Rx

96
 dark red SiClm
 dark red SaLm
 yellow brown SiSaLm
 mg deposits mica
 10% Rx



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE

95
 dark red SiClm
 dark red SaLm
 10% Rx w mg deposits yellow banding from rock
 94
 dark red SiClm
 dark red SaLm

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1' DROP		TIME
			START	STOP	START	STOP	
12.7.99	98	4.0 / 12.0	10:12	10:13	10:13	10:15	2min
	99	Visual	to 12.5	- see profile		—	OK
	97	Visual	to 12.0	- see profile		—	OK
	96	3.5 / 12.0	10:20	10:30	10:30	10:51	21min
	95	Visual	to 12.0	- see profile		—	OK
	94	4.0 / 12.5	10:28	10:36	10:36	10:45	9min

REMARKS _____

TYPE OF SOIL _____

TESTED BY Amy McMillen ALSO PRESENT Tim Feaga

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

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

COUNTY #

SOIL PROFILE

100 112

bright red
SiCLM
bright red
Salm
micaceous
10%
Shale
red
Salm
30%
Shale

113 121

heavy orange-red
SiCLM
orange brown
micaceous
Salm
20%
Saprotic

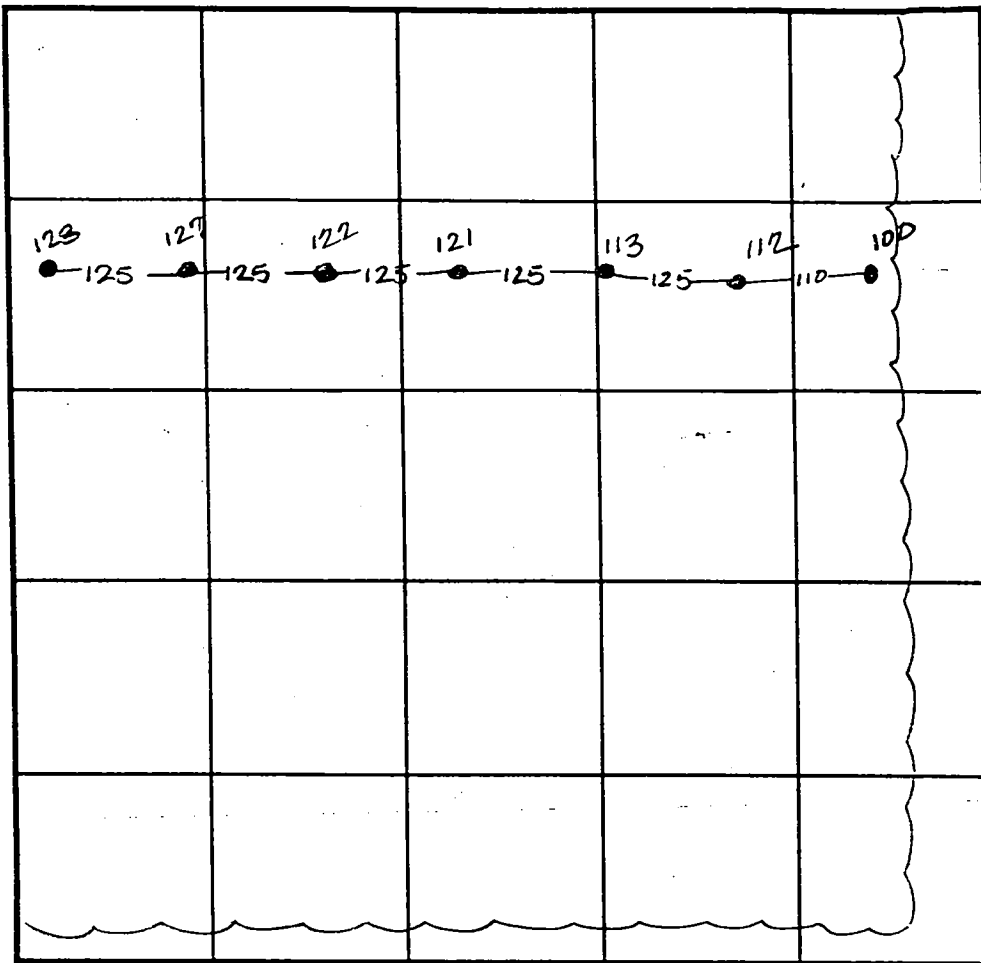
122

orange brown
SiCLM
10%
shale
lgt orange red
Salm
mica
shale
15%

SOIL PROFILE

127 128

orange brown
SiCLM
dark red
SiLM
20%
Shale
lgt yellow
SiLM
grey
moist
mica



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11-1-99	100	5.5 V12.5	11:28	No mvmt @ 12:00			slow
		6.0 V12.5	12:29	12:31	12:31	12:35	4min
	113	4.0 V13.0	11:36	No mvmt @ 12:01			slow
		6.5 V13.0	12:46	12:49	12:49	12:51	3min
	122	5.0 V13.0	12:00	No mvmt @ 12:20			deep clay
		7.0 V13.0	12:53	No mvmt @ 1:07			F
	128	4.0 V12.0	12:11	No mvmt @ 12:40			slow
	127	Visual	OK - need to test				hold
	121	Visual	OK	see profile			OK
	112	Visual	OK	see profile			OK

REMARKS

TYPE OF SOIL

TESTED BY Amy McMillan

ALSO PRESENT Bruce Burton

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

TRENCH WIDTH

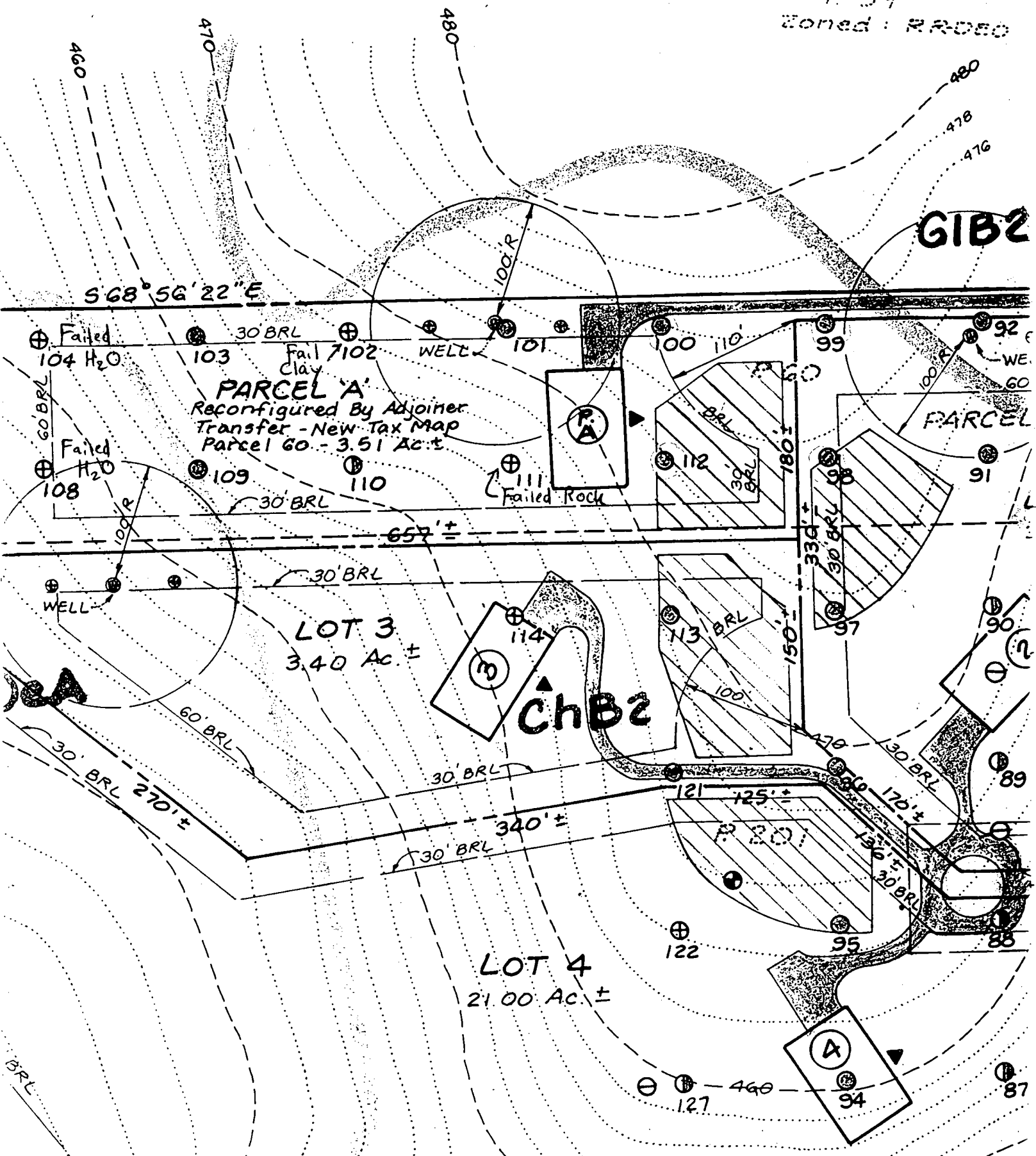
INLET DEPTH

MAXIMUM BOTTOM DEPTH

SQ. FT/BEDROOM

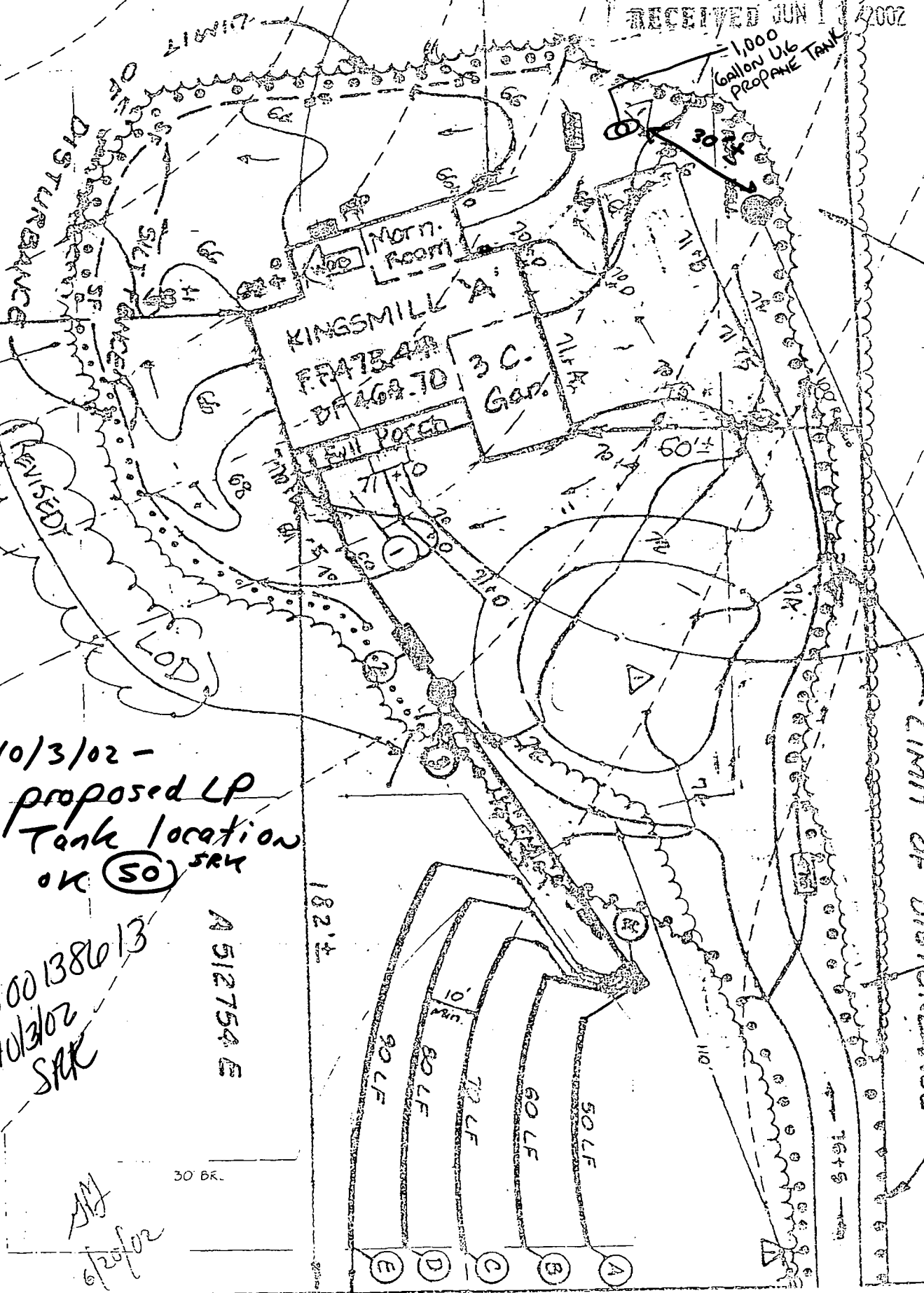
Signed Perc Cert Plan

MAPLE LAWN FARMS
1855 / 657
P 59
Zoned: RR250



RECEIVED JUN 1 2002

1,000 Gallon U16 PROANE TANK



10/3/02 -
proposed LP
Tank location
OK (50) SRK

B00138013
10/3/02
SRK

A512754 E

SRK
6/20/02

30 BR.

DO NOT DISCARD

Michael T. Evans
7500 Pindell School Road
Fulton, MD 20759

September 10, 2003

Mr. Steven Kreig
Supervisor
Howard County Health Dept
Bureau of Environmental Health
3525 Ellicott Mills Drive
Suite H
Ellicott City, MD 21043

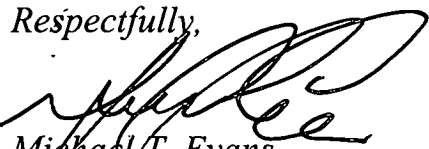
Mr. Kreig,

I would like to apply for a variance on a request to build a garage adjacent to my existing garage that would be within a distance of 15 feet from my well. I have a very narrow lot and not much space to build a 2 car garage. The garage would be for the express purpose of housing additional vehicles. For the proposed plan to work I must get within 15 feet of the well. See the attached site plan.


The garage would be built on a slab with electric access.

Please contact me for further information and I thank you in advance for your consideration.

Respectfully,


Michael T. Evans
410-458-4440

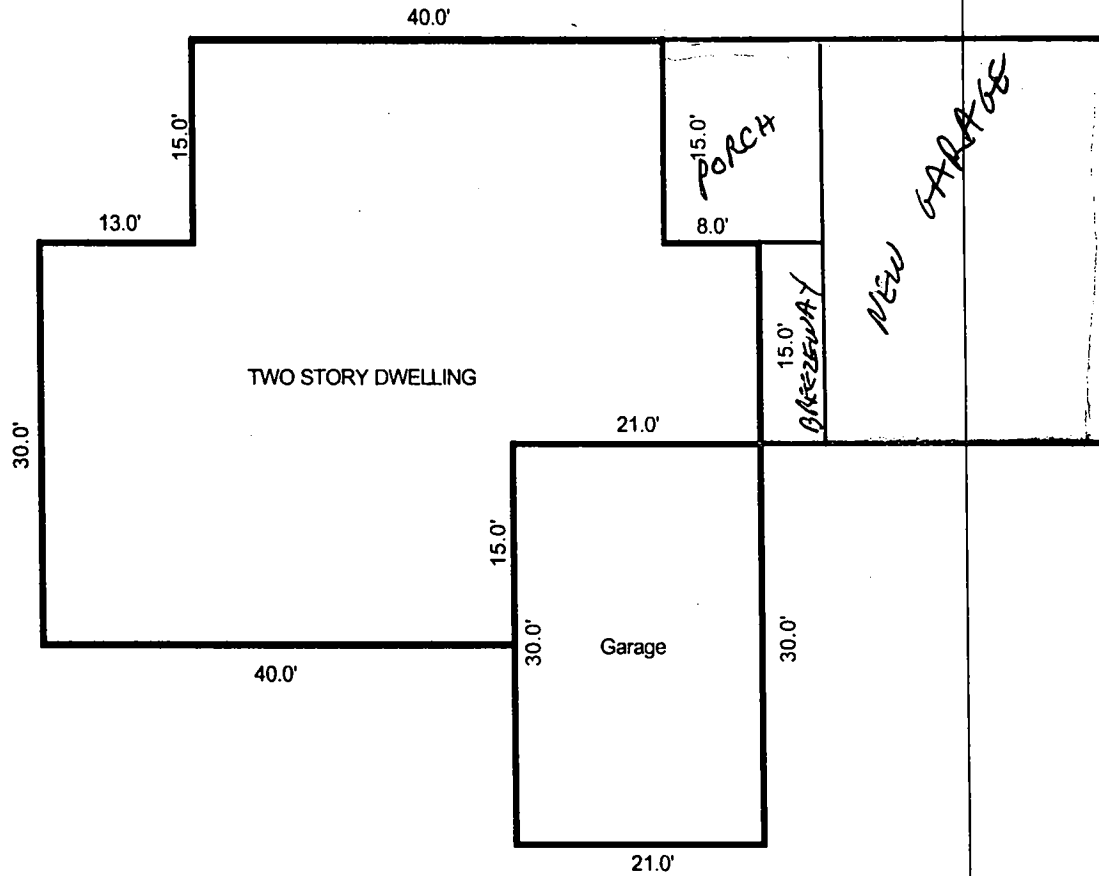
10/21/03 - Local HD recommends
approval of the variance. -SRK

Granted by MDE


FLOORPLAN

Borrower: MICHAEL & SUSAN EVANS	File No.: TP100201
Property Address: 7500 PINDELL SCHOOL ROAD	Case No.:
City: FULTON	State: MD Zip: 20759
Lender: WELLS FARGO HOME MORTGAGE	

= PROPOSED



OK SRK
11/4/03
See Attached
Variance letter

Sketch by Apex IV Windows™

AREA CALCULATIONS SUMMARY			
Code	Description	Size	Totals
GLA1	First Floor	2115.00	2115.00
GAR	Garage	630.00	630.00

LIVING AREA BREAKDOWN		
Breakdown		Subtotals
First Floor		
15.0 x	40.0	600.00
15.0 x	61.0	915.00
15.0 x	40.0	600.00

