

LAYOUT _____ INSP 4 _____

INSP 2 _____ INSP 5 _____

INSP 3 _____ INSP 6 _____

ISSUE DATE: 3/24/2005

APPROVAL DATE: 10/16/05

PERMIT

INDEXED

TAX ID #03-288870

P 522050

A 513159

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

Fogles Septic Clean, Inc IS PERMITTED TO INSTALL ALTER

ADDRESS: 580 Obrecht Road, Sykesville PHONE NUMBER: 410-795-5670

SUBDIVISION: Kingston LOT NUMBER: 8

ADDRESS: 3566 Conchita Drive PROPERTY OWNER: Kevin & Bumi Moore

SEPTIC TANK CAPACITY (GALLONS): 1250 OUTLET BAFFLE FILTER REQUIRED

PUMP CHAMBER CAPACITY (GALLONS): 1250 COMPARTMENTED TANK REQUIRED

NUMBER OF BEDROOMS: 4

SQUARE FEET PER BEDROOM: 210

LINEAR FEET OF TRENCH REQUIRED: 124 HOUSE SERVED BY PUBLIC WATER

| | |
|-----------|---|
| TRENCHES: | Trench to be 3.0 feet wide. Inlet 4.0 feet below original grade. Bottom maximum depth 7.0 feet below original grade. Effective area begins at 4.0 feet below original grade. 3.0 feet of stone below distribution pipe. |
| LOCATION: | Place the distribution box in the highest elevation in the approved SDA. SDA with a minimum of 40' long trench. |
| NOTES: | |

PLANS APPROVED: Kevin J. Bell Reviewed by: _____ DATE: 2/11/05

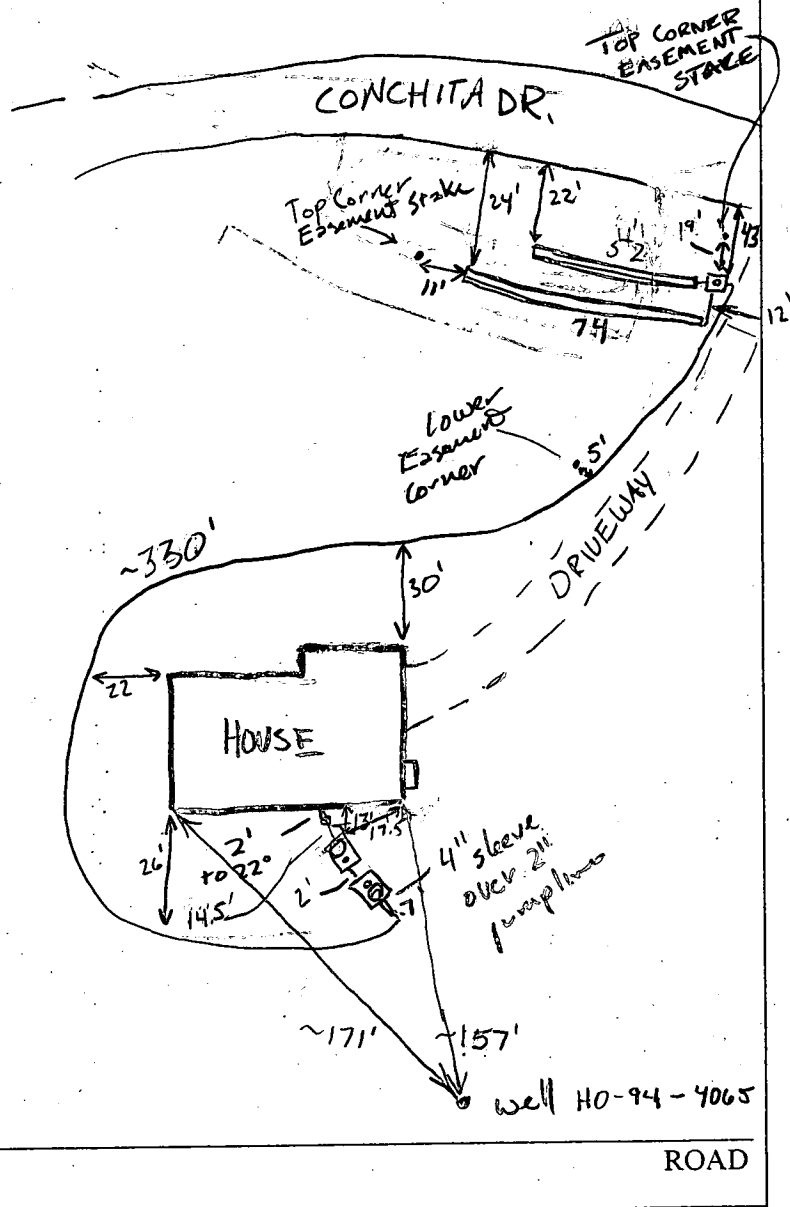
NOTES: PERMIT VOID AFTER 2 YEARS
CONTRACTOR IS RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
WATERTIGHT SEPTIC TANKS REQUIRED
ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL UNLESS SPECIFICALLY AUTHORIZED
MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND 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 13-2640 FOR INSPECTION OF SEPTIC SYSTEM
AND RETURNED**

8-1-05 BOD 155042 - PROPANE TANK

A 513 159

NOT TO SCALE



| TRENCH/DRAINFIELD DATA | | |
|-------------------------|-------|--------------|
| WIDTH | INLET | BOTTOM |
| 3' | 4' | 7' |
| NUMBER OF TRENCHES | | 2 |
| TOTAL LENGTH | | 136' |
| ABSORPTION AREA | | 1224 sq. |
| DISTRIBUTION BOX LEVEL | | Lower |
| DISTRIBUTION BOX BAFFLE | | DOWN TURN 90 |
| DISTRIBUTION BOX PORT | | Yes |

| SEPTIC TANK DATA | |
|---------------------|----------|
| SEPTIC TANK 1 LEVEL | |
| CAPACITY | 1500 GAL |
| SEAM LOC | TOP |
| TANK LID DEPTH | 2-3' |
| BAFFLES | ✓ |
| BAFFLE FILTER | N/A |
| MANHOLE LOC | FRONT |
| 6" PORT LOC | Rear |
| WATERTIGHT TEST | N/A |
| SEPTIC TANK 2 LEVEL | |
| Yes | |
| SINGLE COMP. PUMP | |
| CAPACITY | 1250 GAL |
| SEAM LOC | TOP |
| TANK LID DEPTH | 2-3' |
| BAFFLES | N/A |
| BAFFLE FILTER | No |
| MANHOLE LOC | Rear |
| 6" PORT LOC | Front |
| WATERTIGHT TEST | NA |

PRE-CONSTRUCTION 1x50' and 1x75' on contour at top side of easement

as shown on well check, (6/15/05 GAC & BB layout)

INSTALLATION 6/17/05 trenches & pump line installed everything is

good. Some minor difficulties w/ contour due to strange shape of easement

and contour. Septic install ok Need pump & Alarm. (GAC) Well location

needed - during WPL. 10/3/05 Pump & Alarm test failed,

D-box full of dirt. Everything else ok. 10/5/05 - clogged line

still / P&A fails (P&A) 10/6/05 Pump and alarm working. (BB)

RECEIVED AND RETURNED

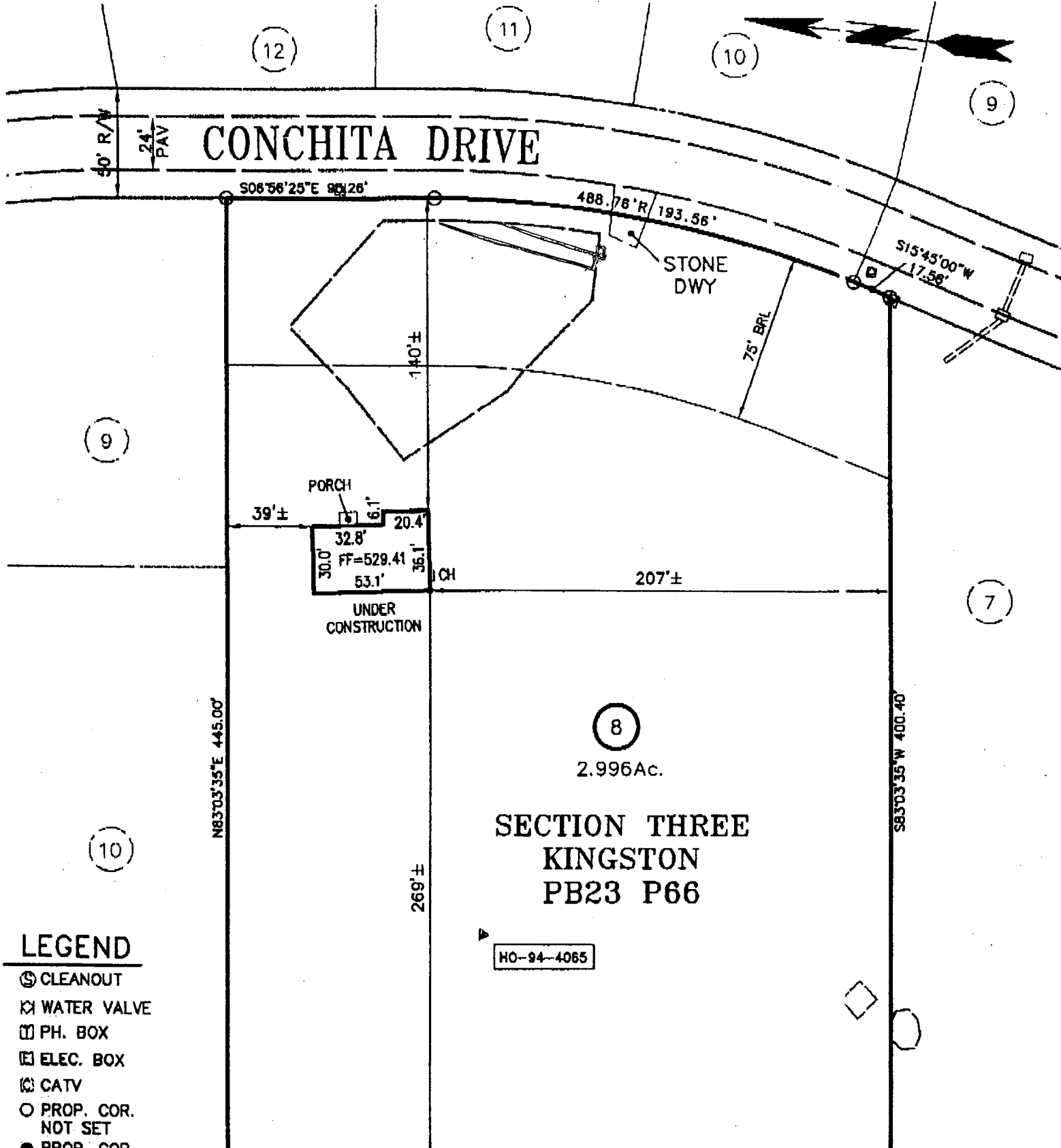
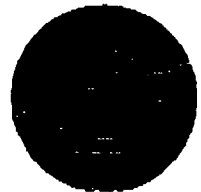
FINAL INSPECTOR B. Baker

DATE OF APPROVAL 10/6/05

3/24/05
 wall check OK

(KJB)

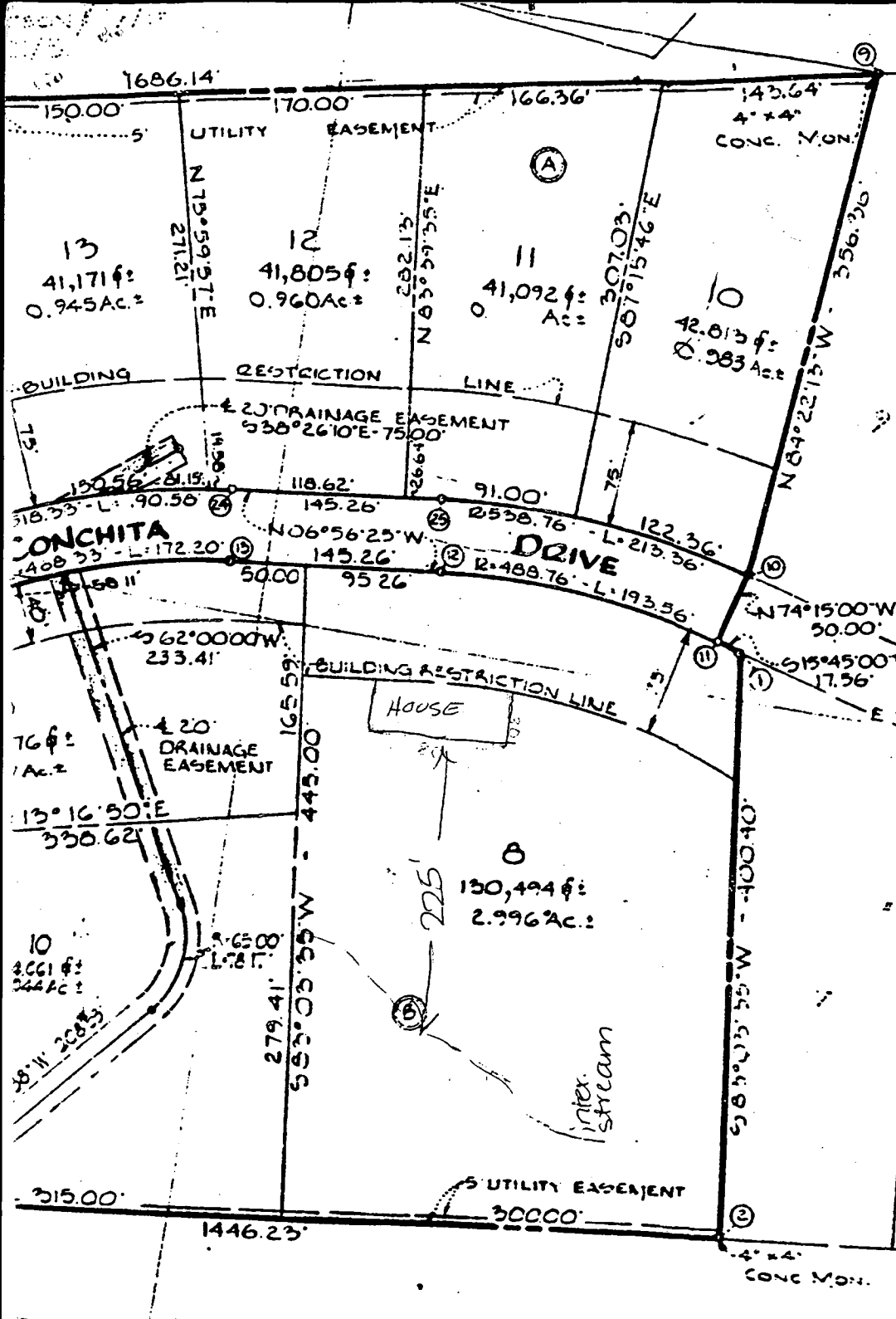
DRS & ASSOCIATES
 LAND DESIGN CONSULTANTS



LEGEND

- ⊙ CLEANOUT
- ⊠ WATER VALVE
- PH. BOX
- ▢ ELEC. BOX
- ⊙ CATV
- PROP. COR. NOT SET
- PROP. COR.

HO-94-4065



| V-N | RADIUS | LENGTH | ANGLE | BE |
|-------|--------|--------|--------|-----|
| 11-12 | 488.76 | 193.56 | 98.06 | 22° |
| 13-14 | 468.33 | 172.20 | 87.08 | 21° |
| 15-16 | 285.83 | 73.47 | 36.94 | 14° |
| 16-17 | 25.00 | 39.27 | 25.00 | 90° |
| 18-3 | 866.19 | 95.83 | 47.97 | 06° |
| 4-19 | 816.19 | 90.32 | 45.21 | 06° |
| 20-21 | 25.00 | 39.27 | 25.00 | 90° |
| 21-22 | 235.83 | 60.61 | 30.47 | 14° |
| 23-24 | 518.33 | 190.58 | 96.38 | 21° |
| 25-10 | 538.76 | 213.36 | 108.10 | 22° |

| COO | | |
|-----|----------|-----|
| N: | NORTH | EAS |
| 1 | 4 670.33 | 753 |
| 2 | 4 621.95 | 713 |
| 3 | 5 232.44 | 702 |
| 4 | 5 252.07 | 705 |
| 5 | 6 057.58 | 696 |
| 6 | 6 291.68 | 760 |
| 7 | 5 447.49 | 77 |
| 8 | 5 393.45 | 77 |
| 9 | 4 638.70 | 79 |
| 10 | 4 673.65 | 75 |
| 11 | 4 687.23 | 75 |
| 12 | 4 878.95 | 75 |
| 13 | 5 023.16 | 75 |

NOTE: The origin of hereon is a

SECTION 2
"KINGSTON"

21K 5
35530
410 985

SECTION THREE KINGSTON

HOWARD C.

SEDIMENT CONTROL NOTES

- A minimum of 48 hours notice must be given to the Howard County Department of Inspections, Licenses and Permits, Sediment Control Division prior to the start of any construction (313-1855).
- All vegetative and structural practices are to be installed according to the provisions of this plan and are to be in conformance with the most current Maryland Standards and Specifications for soil erosion and sediment control and revisions thereto.
- Following initial soil disturbance or re-disturbance, permanent or temporary stabilization shall be completed within: a) 7 calendar days for all perimeter sediment control structures, dikes, perimeter slopes and all slopes steeper than 3:1, b) 14 days as to all other disturbed or graded areas on the project site.
- All sediment traps/basins shown must be fenced and warning signs posted around the perimeter in accordance with Vol. 1, Chapter 12, of the Howard County Design Manual, Storm Drainage.
- All disturbed areas must be stabilized within the time period specified above in accordance with the 1994 Maryland Standards and Specifications for Soil Erosion and Sediment Control for Permanent Seeding (sec. 54), Temporary Seeding (sec. 50), and Mulching (sec. 52). Temporary stabilization with mulch alone can only be done when recommended seeding dates do not allow for proper germination and establishment of grasses.
- All sediment control structures are to remain in place and are to be maintained in operative condition until permission for their removal has been obtained from the Howard County Sediment Control Inspector.
- Site Analysis:

| | |
|------------------------------------|---------------|
| Total Area of Site | 2.996 Acres |
| Area Disturbed | 0.59 Acres |
| Area to be roofed or paved | 0.10 Acres |
| Area to be vegetatively stabilized | 0.49 Acres |
| Total Cut | 253 Cu. Yards |
| Total Fill | 253 Cu. Yards |
| Offsite Waste/Borrow Area Location | N/A |
- Any sediment control practice which is disturbed by grading activity for placement of utilities must be repaired on the same day of disturbance.
- Additional sediment controls must be provided, if deemed necessary by the Howard County Sediment Control Inspector.
- On all sites with disturbed areas in excess of 2 acres, approval of the inspection agency shall be requested upon completion of installation of perimeter erosion and sediment controls, but before proceeding with any other earth disturbance or grading. Other building or grading inspection approvals may not be authorized until this initial approval by the inspection agency is made.
- Trenches for the construction of utilities is limited to three pipe lengths or that which shall be back-filled and stabilized within one working day, whichever is shorter.

TEMPORARY SEEDING NOTES

Apply to graded or cleared areas likely to be redisturbed where a short-term vegetative cover is needed.

Seeding Preparation:
Loosen upper three inches of soil by raking, disking or other acceptable means before seeding, if not previously loosened.

Soil Amendments:
Apply 600 lbs. per acre 10-10-10 fertilizer (14 lbs./1000 sq. ft.).

Seeding:
For the periods March 1 through April 30, and August 15 through November 15, seed with 1 1/2 bushels per acre of annual ryegrass (3.2 lbs./1000 sq. ft.). For the period of May 1 thru August 14, seed with 3 lbs./acre of weeping lovegrass (0.7 lbs./1000 sq. ft.). For the period November 16 thru February 28, protect site by applying 2 tons per acre of well anchored straw mulch and seed as soon as possible in the spring, or use sod.

Mulching:
Apply 1 1/2 to 2 tons per acre (70 to 90 lbs./1000 sq. ft.) of unrotted small grain straw immediately after seeding. Anchor mulch immediately after application using mulch anchoring tool or 218 gallons per acre (5 gal./1000 sq. ft.) of emulsified asphalt on flat areas. On slopes 8 feet or higher, use 348 gallons per acre (8 gal./1000 sq. ft.) for anchoring. Refer to the 1988 Maryland Standards and Specification for Soil Erosion and Sediment Control for rate and methods not covered.

PERMANENT SEEDING NOTES

All disturbed areas shall be stabilized as follows:

Seeding Preparation:
Loosen upper three inches of soil by raking, disking or other acceptable means before seeding.

Soil Amendments:
Apply two tons per acre dolomitic limestone (92 lbs./1000 sq. ft.) and 600 lbs. per acre 0-20-20 fertilizer (14 lbs./1000 sq. ft.). Before seeding harrow or disc into upper 3 inches of soil. At time of seeding, apply 400 lbs. per acre 38-0-0 ureaform fertilizer (9 lbs./1000 sq. ft.) and 500 lbs. per acre (11.5 lbs./1000 sq. ft.) of 10-20-20 fertilizer.

Seeding:
For the periods March 1 through April 30, and August 1 through October 15, seed with 100 lbs. per acre (2.3 lbs./1000 sq. ft.) of Kentucky 31 Tall Fescue. For the period of May 1 thru July 31, seed with 60 lbs./acre (1.4 lbs./1000 sq. ft.) Kentucky 31 Tall Fescue and 2 lbs. per acre (0.05 lbs./1000 sq. ft.) of weeping lovegrass. During the period of October 16 thru February 28, protect site by applying 2 tons per acre of well anchored straw mulch and seed as soon as possible in the spring.
Option 1) Applying 2 tons per acre of well anchored straw mulch and seed as soon as possible in the spring.
Option 2) Use sod.
Option 3) Seed with 100 lbs./acre Kentucky 31 Tall Fescue and mulch with two tons/acre well anchored straw. All slopes should be hydroseeded.

Mulching:
Apply 1 to 2 tons per acre (45 to 90 lbs./1000 sq. ft.) of unrotted small grain straw immediately after seeding. Anchor mulch immediately after application using 200 gallons per acre (5 gal./1000 sq. ft.) of emulsified asphalt on flat areas. On slopes 8 feet or higher, use 348 gallons per acre (8 gal./1000 sq. ft.) for anchoring.

Maintenance:
Inspect all seeded areas and make needed repairs, replacements and reseedings.
For public ponds substitute Chemung Crownwetch at 15 lbs./acre and Kentucky 31 Tall Fescue at 40 lbs./acre as the seeding requirement. Optimum seeding date for this mixture is March 1 to April 30.

SEQUENCE OF CONSTRUCTION

- Obtain grading permit. 1 Day
- Install Sediment and Erosion Control Devices as shown on plan. 1 Day
- Clear and grub to limits of disturbance and mass grade to sub-base. 1 Day
- Install temporary seeding. 1 Day
- Construct Buildings. 2 Month
- Fine grade site and install permanent seeding and landscaping. 1 Day
- Remove Sediment Control Devices as upland areas are stabilized and permission is granted by Erosion and Sediment Control Inspector. 2 Days

SEDIMENT CONTROL NOTES

1. A minimum of 48 hours notice must be given to the Howard County Department of Inspections, Licenses and Permits, Sediment Control Division prior to the start of any construction (313-1855).

2. All vegetative and structural practices are to be installed according to the provisions of this plan and are to be in conformance with the most current Maryland Standards and Specifications for soil erosion and sediment control and revisions thereto.

3. Following initial soil disturbance or re-disturbance, permanent or temporary stabilization shall be completed within: a) 7 calendar days for all perimeter sediment control structures, dikes, perimeter slopes and all slopes steeper than 3:1, b) 14 days as to all other disturbed or graded areas on the project site.

4. All sediment traps/basins shown must be fenced and warning signs posted around the perimeter in accordance with Vol. 1, Chapter 12, of the Howard County Design Manual, Storm Drainage.

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6. All sediment control structures are to remain in place and are to be maintained in operative condition until permission for their removal has been obtained from the Howard County Sediment Control Inspector.

7. Site Analysis:

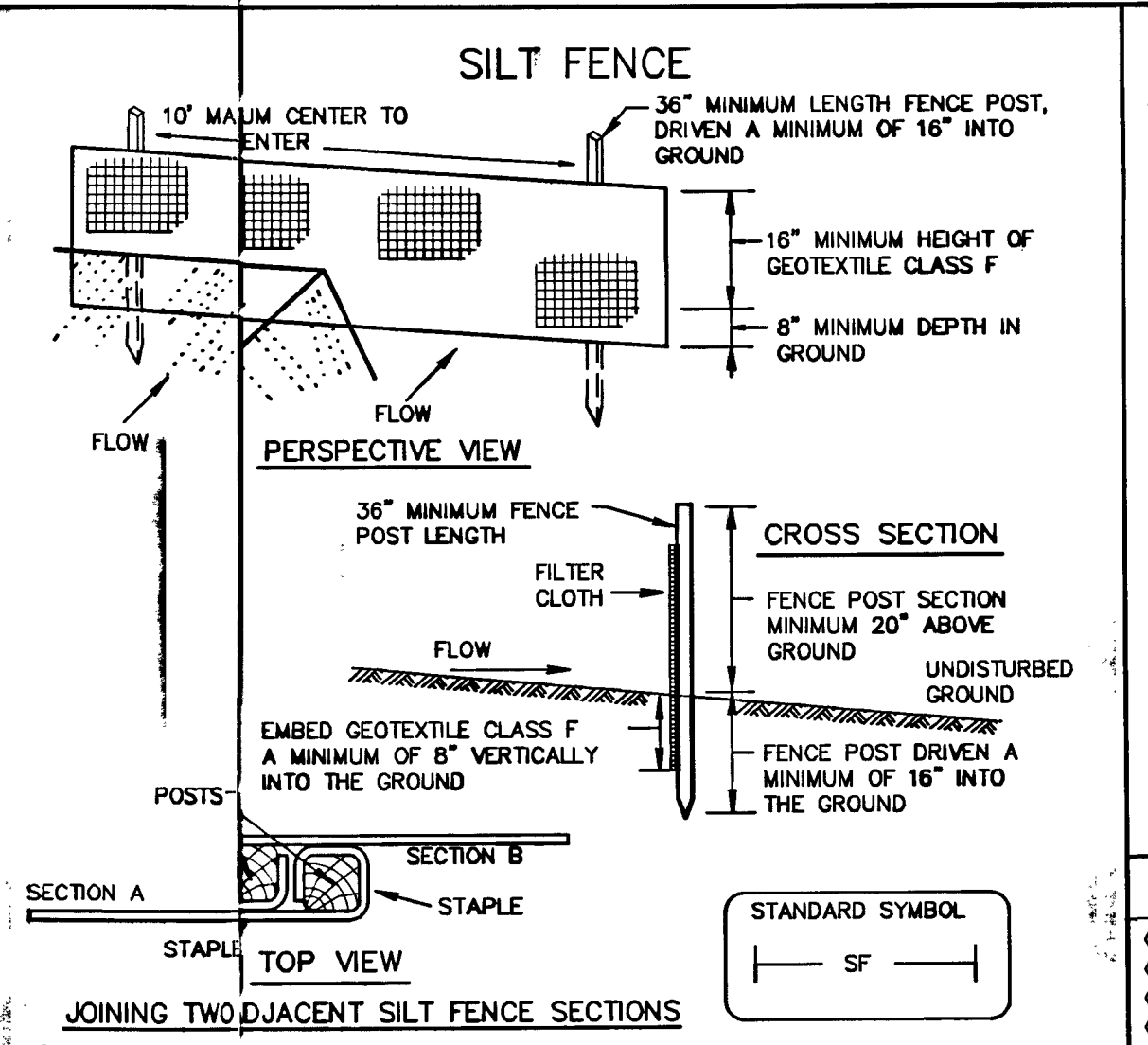
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|------------------------------------|---------------|
| Total Area of Site | 2.996 Acres |
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| Total Cut | 253 Cu. Yards |
| Total Fill | 253 Cu. Yards |
| Offsite Waste/Borrow Area Location | N/A |

8. Any sediment control practice which is disturbed by grading activity for placement of utilities must be repaired on the same day of disturbance.

9. Additional sediment controls must be provided, if deemed necessary by the Howard County Sediment Control Inspector.

10. On all sites with disturbed areas in excess of 2 acres, approval of the inspection agency shall be requested upon completion of installation of perimeter erosion and sediment controls, but before proceeding with any other earth disturbance or grading. Other building or grading inspection approvals may not be authorized until this initial approval by the inspection agency is made.

11. Trenches for the construction of utilities is limited to three pipe lengths or that which shall be back-filled and stabilized within one working day, whichever is shorter.

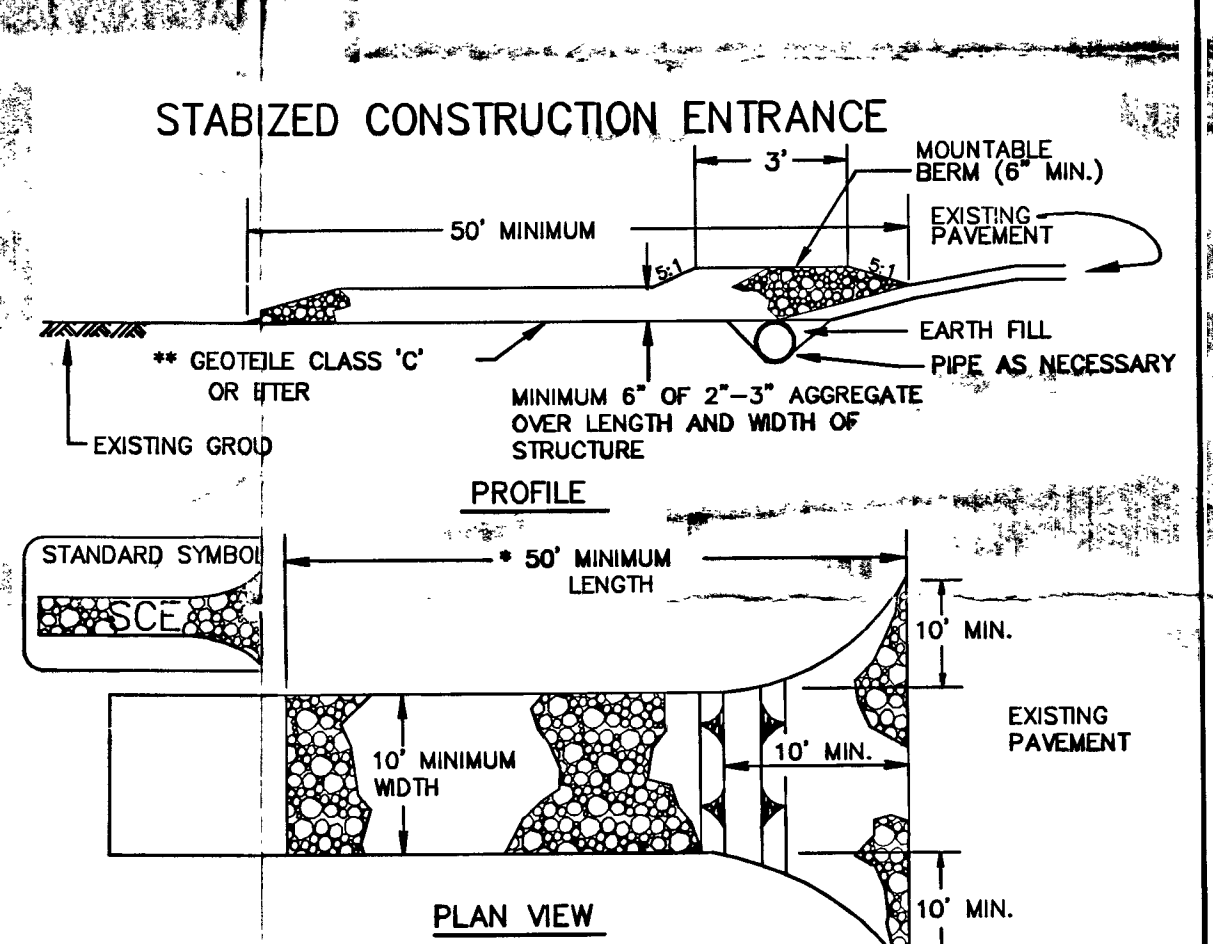


JOINING TWO ADJACENT SILT FENCE SECTIONS

Construction Specifications:

- Fence posts shall be a minimum of 36" long driven 16" minimum into the ground. Wood posts shall be 1 1/2" x 1 1/2" square (minimum) cut, or 1 3/4" diameter (minimum) round and shall be of sound quality hardwood. Steel posts will be standard T or section weighting not less than 1.00 pound per linear foot.
- Geotextile shall be fastened securely to each fence post with wire ties or staples at top and mid-section and shall meet the following requirements for Geotextile as F:

| | | |
|----------------------|----------------------------|----------------|
| Tensile length | 50 lbs./in. (min.) | Test: MSMT 509 |
| Tensile bulus | 20 lbs./in. (min.) | Test: MSMT 509 |
| Flow Rate | 0.3 gal./ft./minute (max.) | Test: MSMT 322 |
| Filtering efficiency | 75% (min.) | Test: MSMT 322 |
- Where ends of fabric come together, they shall be overlapped, folded and stapled to prevent sediment bypass.
- Silt Fence shall be inspected after each rainfall event and maintained when bulges occur other sediment accumulation reached 50% of the fabric height.



CONSTRUCTION SPECIFICATIONS

- Length - minimum of 50' (*30' for single residence lot).
- Width - 10' minimum, should be flared at the existing road to provide a turning radius.
- Geotextile fabric (far cloth) shall be placed over the existing ground prior to placing stone. The plan approval authority may not require single family residences to use geotextile.
- Stone - crushed aggregate (2" to 3") or reclaimed or recycled concrete equivalent shall be placed at least 6" deep over the length and width of the entrance.
- Surface Water - surface water flowing to or diverted toward construction entrances shall be piped through the entrance, maintaining positive drainage. Pipe installed through stabilized construction entrance shall be protected with a mountable berm with 5:1 slopes and a minimum of 6" of stone over the pipe. Pipe has to be sized according to the drainage. When the SCE is located at a high spot and has no drainage to convey a pipe will not be necessary. Pipe should be sized according to the amount of runoff to be conveyed. A 6" minimum will be required.
- Location - A stabilized construction entrance shall be located at every point where construction traffic enters or leaves a construction site. Vehicles leaving the site must travel over the entire length of the stabilized construction entrance.

TOPSOIL SPECIFICATIONS

Soil to be used as topsoil must meet the following:

- Topsoil shall be loam, sandy loam, clay loam, silt loam, sandy clay loam or loamy sand. Other soils may be used if recommended by an agronomist or soil scientist and approved by the appropriate approval authority.
- Regardless, topsoil shall not be a mixture of contrasting texture subsoils and shall contain less than 5% by volume of cinders, stones, slag, coarse fragments, gravel, sticks, roots, trash or other materials larger than 1 1/2" in diameter.
- Topsoil must be free of plants or plant parts such as bermuda grass, quackgrass, johnsongrass, nutsedge, poison ivy, thistle or others as specified.

Where the topsoil is either highly acidic or composed of heavy clays, ground limestone shall be spread at the rate of 4-8 tons/acre (200-400 lbs./1000 sq. ft.) prior to the placement of topsoil. Lime shall be distributed uniformly over designated areas and worked into the soil in conjunction with tillage operations.

GENERAL NOTES

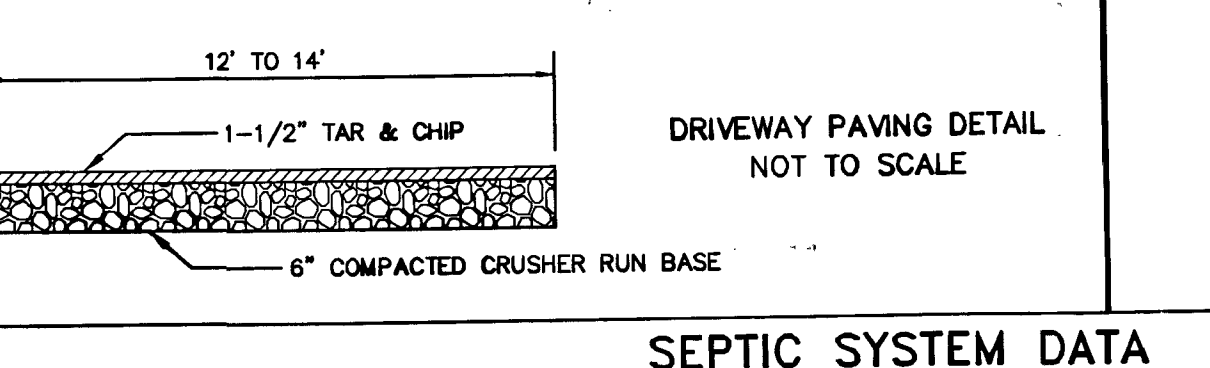
- Total area of property: 2.996 acres.
- Septic easement subject to Howard County Health Department review.
- Length of trench to be determined at time of septic permit issuance.
- Contractor/Builder to verify elevation in the field before beginning any construction.
- Field run topographic survey run by Fisher, Collins & Carter, Inc. in May of 2004.
- No wetlands currently exist on the property.
- For driveway entrance detail refer to Howard County Design Manual Volume IV Standard Detail R6.05.
- This area designates a private sewerage easement of least 10,000 square feet as required by the Maryland State Department of the Environment for individual sewerage disposal. Improvements of any nature in this area are restricted until public sewerage is available. These easements shall become null and void upon connection to a public sewerage system.
- The County Health Officer shall have the authority to grant adjustments to the private sewerage easement. Recordation of a modified sewerage easement shall not be necessary.
- The lot shown hereon complies with the minimum ownership with and lot area as required by the Maryland State Department of the Environment.
- Existing wells and/or sewerage easements within 100 feet of the property have been shown from the best available information.
- All house sites shown comply with minimum building restriction regulations.
- All wells shall be drilled prior to final plat recordation. It is the developer's responsibility to schedule the well drilling prior to final plat submission. It will not be considered "government delay" if the well drilling holds-up the Health Department signature of the record plat.
- The existing well shown on this plan identified with the attached well log number HO-94-4065 has been field located by DRS & Associates professional land surveyor and is accurately shown.

SEPTIC TEST LEGEND

| | |
|---------------------------------|---|
| ○ PROPOSED PERC | ○ PROPOSED OBSERVATION HOLE |
| ⊙ APPROVED DEEP TRENCH PERC | ⊙ APPROVED DEEP TRENCH OBSERVATION HOLE |
| ⊙ APPROVED MODIFIED TRENCH PERC | ⊙ APPROVED MODIFIED TRENCH OBSERVATION HOLE |
| ⊙ APPROVED SAND MOUND PERC | ⊙ APPROVED SAND MOUND OBSERVATION HOLE |
| ⊙ APPROVED TILE FIELD PERC | ⊙ APPROVED TILE FIELD OBSERVATION HOLE |
| ⊙ FAILED PERC | ⊙ FAILED OBSERVATION HOLE |
| ⊙ NO TEST | |

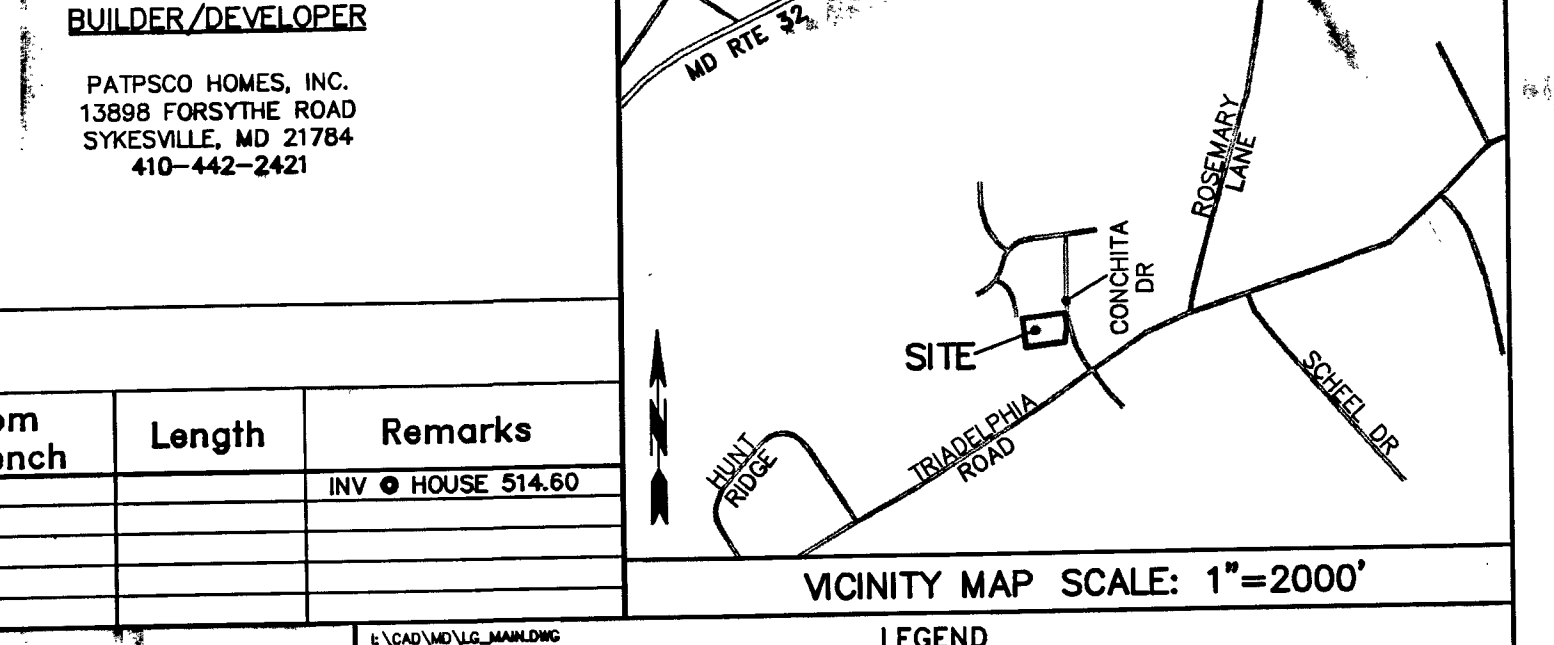
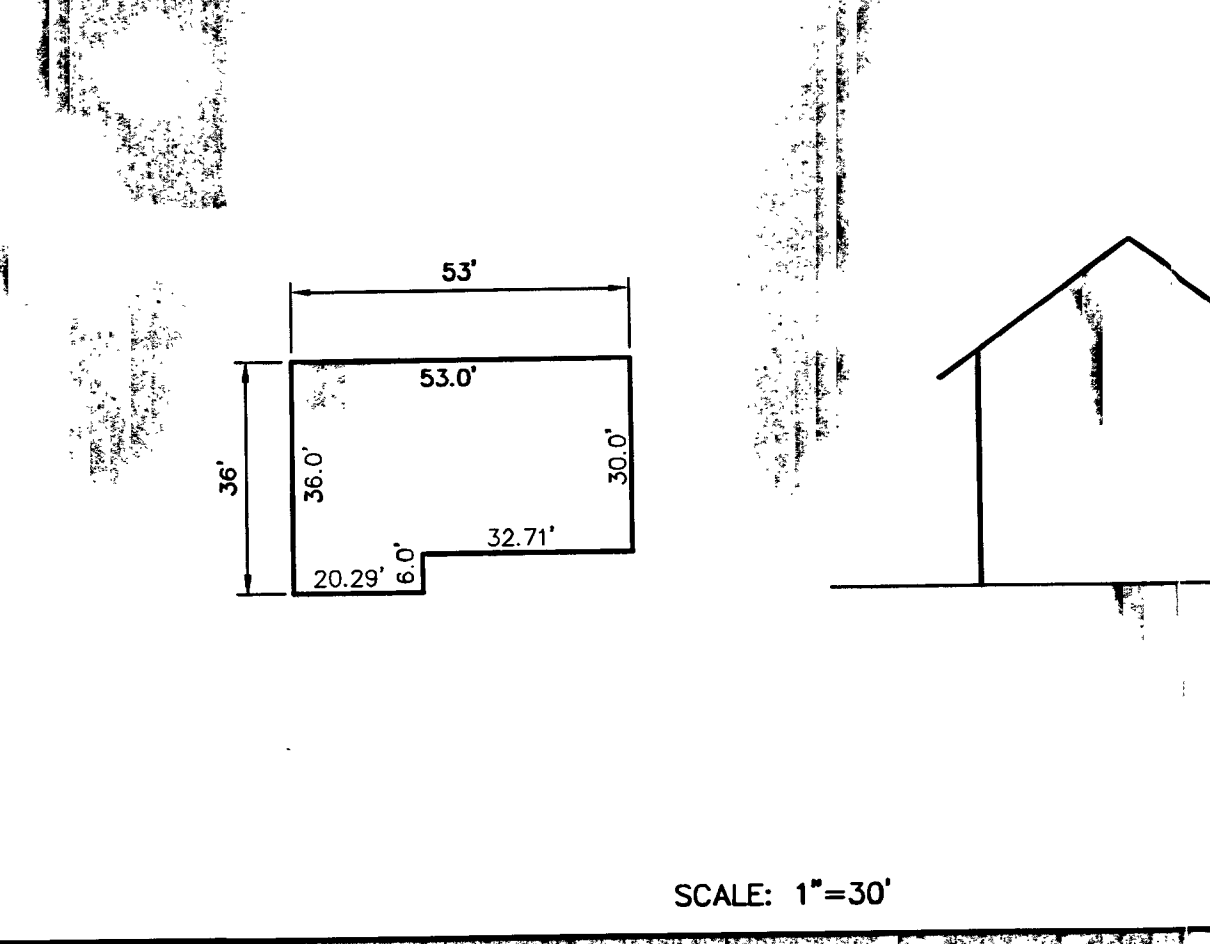
SEPTIC TEST RESULTS

| No. | TYPE TEST | COMMENTS | DATE |
|-----|-----------|----------------------|------------|
| 1 | ⊙ | 20m@4', OK TO 13.0' | 2000-04-06 |
| 2 | ⊙ | <100' TO STREAM | 2000-04-06 |
| 3 | ⊙ | 10m@4', OK TO 12.5' | 2000-04-06 |
| 4 | ⊙ | ROCK@5.5' | 2000-04-06 |
| 5 | ⊙ | MOTTLES@7' | 2000-04-06 |
| 6 | ⊙ | 2m@3.5', OK TO 12.5' | 2000-04-06 |
| 7 | ⊙ | OK TO 14' | 2000-04-06 |



SEPTIC SYSTEM DATA

| Structure | Ex. Ground | Finished Ground | Inv. In | Inv. Out | Bottom of Trench | Length | Remarks |
|------------------|------------|-----------------|---------|----------|------------------|--------|--------------------|
| Septic Tank | 518.0 | 518.0 | 514.4 | 514.15 | | | INV @ HOUSE 514.60 |
| Pump Pit | 516.0 | 516.0 | 513.9 | 513.65 | | | |
| Distribution Box | 533.5 | 533.5 | 532.1 | 531.9 | | | |
| Trench #1 | | | | | | | |
| Trench #2 | | | | | | | |

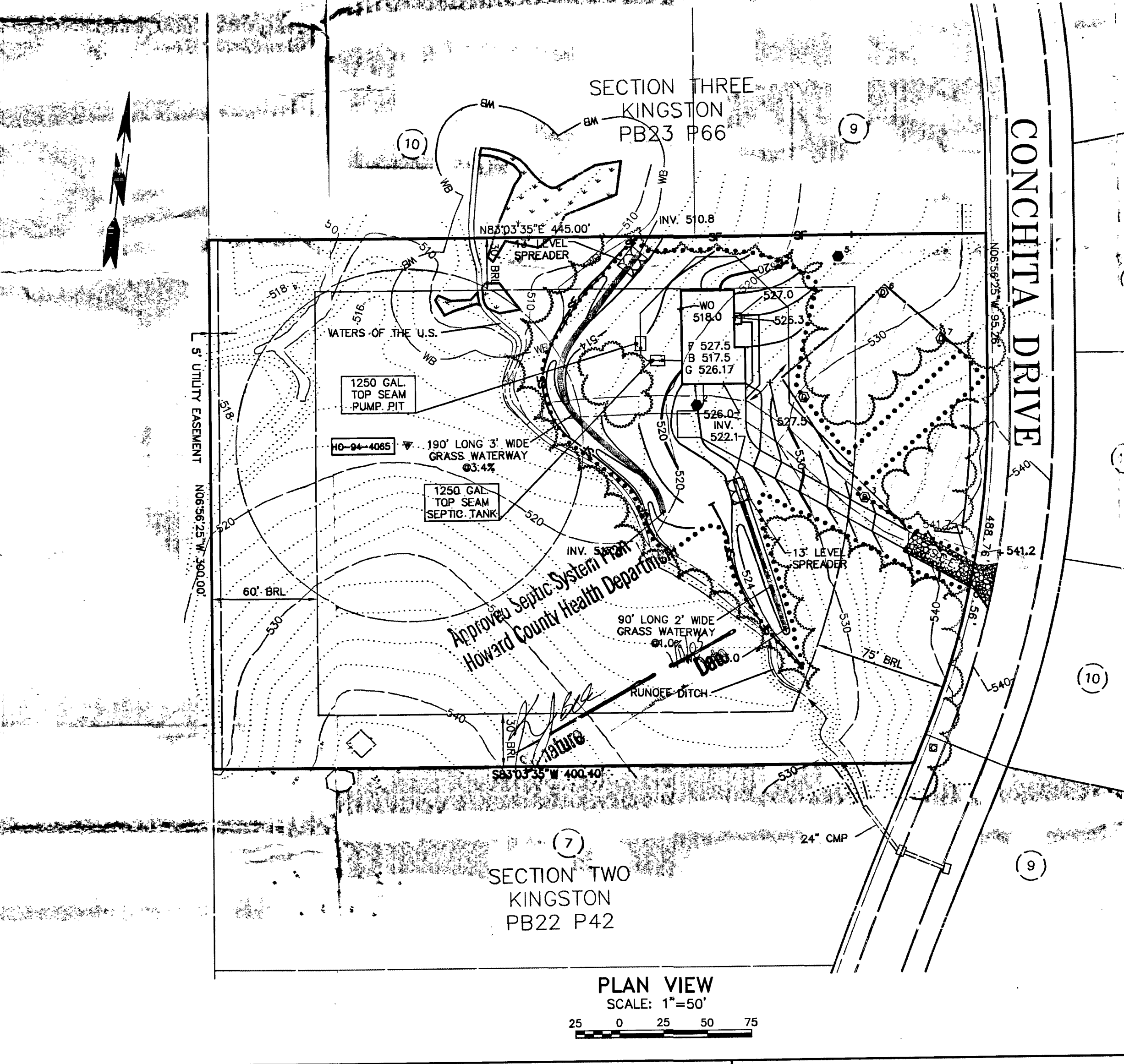


LEGEND

| Existing | Proposed |
|--|--|
| Stream | Stream |
| 500 Yr. Flood Boundary | 500 Yr. Flood Boundary |
| 100 Yr. Floodplain | 100 Yr. Floodplain |
| Flowway | Flowway |
| FRM 100 Yr. Flood Boundary | FRM 100 Yr. Flood Boundary |
| Soil Type | Soil Type |
| Telephone | Telephone |
| Electric | Electric |
| Overhead Lines | Overhead Lines |
| Underground Cable | Underground Cable |
| Gas Line | Gas Line |
| Cable Line | Cable Line |
| Fence Line | Fence Line |
| Zoning Line | Zoning Line |
| Septic Area | Septic Area |
| Center Line Rd | Center Line Rd |
| Edge of Rd | Edge of Rd |
| Right-Of-Way Line | Right-Of-Way Line |
| 25 Wetlands Buffer | 25 Wetlands Buffer |
| Stream Buffer | Stream Buffer |
| Flow Line (Swale, Ditch, Waterway) | Flow Line (Swale, Ditch, Waterway) |
| Limits of Disturbance | Limits of Disturbance |
| Bit. Conc. Pav. | Bit. Conc. Pav. |
| Concrete | Concrete |
| Rip-Rap | Rip-Rap |
| Septic Area | Septic Area |
| Wetlands | Ingress and Egress Easement |
| Rock Outcrop | Slope Easement |
| Structure | Structure |
| Well | Well |
| Dry Hole | Dry Hole |
| Utility Pole w/Guy Wire | Utility Pole w/Guy Wire |
| Utility Pole | Utility Pole |
| Pole Light | Pole Light |
| Sign | Sign |
| Water Curb Box | Water Curb Box |
| Water Valve | Water Valve |
| Water Meter | Water Meter |
| Fire Hydrant | Fire Hydrant |
| Inlet | Inlet |
| Baseline/Centerline Point | Baseline/Centerline Point |
| Flow Upon Ground | Flow Upon Ground |
| Discharge Flow (to swale, ditch, waterway) | Discharge Flow (to swale, ditch, waterway) |
| Spring | Spring |
| Individual Tree (Coniferous) | Individual Tree (Coniferous) |
| Individual Tree (Deciduous) | Individual Tree (Deciduous) |
| Specimen Candidate Tree | Specimen Candidate Tree |
| Sinkhole | Sinkhole |
| Electric Transformer | Electric Transformer |
| Telephone Pedestal | Telephone Pedestal |
| Cable Marker | Cable Marker |
| Monthole | Monthole |
| Clean Out | Clean Out |
| Storm Drain Structure | Storm Drain Structure |
| Sanitary Sewer Structure | Sanitary Sewer Structure |

ABBREVIATIONS

| | | | |
|--------|---|-------|---------------------------------------|
| 100FB | 100 YEAR FLOOD BOUNDARY | L | LEFT OF LIBER |
| AASHTO | AASHTO AMERICAN ASSOCIATION OF STATE HIGHWAY & TRANSPORTATION OFFICIALS | LF | LENGTH OF LIBER |
| ALCMP | ALUMINUM CORRUGATED METAL PIPE | LP | LENGTH OF PERCENT |
| APP | APPROVED | LVC | LENGTH OF VERTICAL CURVE |
| B | BASELINE | M | MINUTES |
| BCCMP | BITUMINOUS COATED CORRUGATED METAL PIPE | NAD | NORTH AMERICA DATUM |
| BEG | BEGIN | NVD | NORTH AMERICA VERTICAL DATUM |
| BL | BEGIN LINE PROFILE | NDC | NOSE DOWN CURB |
| BOR | BUREAU OF DEVELOPMENT AND REVIEW | NIC | NOT IN CONTRACT |
| BORM | BUREAU OF RESOURCE MANAGEMENT | OS | OFF SET |
| CC | CARROLL COUNTY | PB | PLAT BOOK |
| CCP | CARROLL COUNTY PLATE NO. | PC | POINT OF CURVE |
| CCC | CARROLL COUNTY COMMISSIONERS | PE | PERPETUAL EASEMENT FOR |
| C-C | CENTER TO CENTER | PGL | DRAINAGE FACILITY |
| CCHD | CARROLL COUNTY HEALTH DEPARTMENT | PL | PROPERTY LINE |
| CLP | CORRUGATED METAL PIPE | PT | POINT OF TANGENT |
| COW | CITY OF WESTMINSTER | PVC | POINT OF VERTICAL CURVE |
| CFLO | CODE OF PUBLIC LOCAL LAWS AND ORDINANCES | PVI | POINT OF VERTICAL INTERSECTION |
| CRPB | COUNTY ROAD DEED BOOK | R | RIGHT OF RADIUS |
| DIA | DIAMETER | PWA | PUBLIC WORKS AGREEMENT |
| DLFC | DIVISION OF LANDSCAPE AND FOREST CONSERVATION | Q | CUBIC FEET PER SECOND |
| Dn | NORMAL DEPTH | RCP | REINFORCED CONCRETE PIPE |
| DOE | DIVISION OF ENFORCEMENT | SC | CARROLL SOIL CONSERVATION DISTRICT |
| DOER | DIVISION OF ENGINEERING REVIEW | SD | STORM DRAIN |
| DSM | DIVISION OF STORMWATER MANAGEMENT | SH | SHEET |
| DWY | DRIVEWAY | SHA | MARYLAND STATE HIGHWAY ADMINISTRATION |
| E | ENTRANCE ELEVATION | SS | SANITARY SEWER |
| ESW | EMERGENCY SPILLWAY ELEVATION | TSS | TEMPORARILY CONSTRUCTED BERM |
| EL | ELEVATION | TCD | TOP OF CONSTRUCTED DAM |
| ELP | END LINEAR PROFILE | TOT | TOP OF BERM |
| EX | EXISTING GROUND LINE | TOP | TOP OF CURB |
| F | FIRST FLOOR ELEVATION OF FOLIO | TOD | TOP OF DAM |
| FCE | FOREST CONSERVATION EASEMENT | TOG | TOP OF GRATE |
| FG | FINISHED GRADE | TOT | TOP OF TRENCH |
| FG | FINISHED GRADE | TYP | TYPICAL |
| FWRPE | FORESTED WATER RESOURCE PROTECTION EASEMENT | U-I-C | USE-IN-COMMON |
| G | GARAGE ELEVATION | V | VELOCITY FEET PER SECOND |
| GR | GUARD RAIL | VERT | VERTICAL |
| GW | GRASS WATERWAY | WC | WATER CONNECTION |
| HOPE | HIGH DENSITY POLYETHYLENE | WL | WATERLINE |
| HG | HYDRAULIC GRADIENT | WO | WALKOUT |
| HR | HORIZONTAL | WSE | WATER SURFACE ELEVATION |
| HR | HORIZONTAL | WQB | WATER QUALITY BASIN |
| IDE | INVERT DITCH ELEVATION | WQS | WATER QUALITY SWALE |
| IE | INGRESS & EGRESS EASEMENT | WQT | WATER QUALITY TRENCH |
| INV | INVERT | | |



DEVELOPER'S CERTIFICATION

I/We certify that all development and construction will be done in accordance with this plan 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 authorize periodic on-site inspection by the Howard Soil Conservation District.

This Development is approved for soil erosion and sediment control by the Howard County Soil Conservation District.

Approved: _____ Date _____

Howard Soil Conservation District

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 the requirements of the Howard Soil Conservation District.

Date: 2005-01-05

SITE PLAN, SEDIMENT/EROSION CONTROL PLAN, NOTES & DETAILS KINGSTON SECTION 3 LOT 8

3RD ELECTION DISTRICT
SCALE: 1"=50'

PB23 P66
HOWARD COUNTY, MARYLAND
DATE: 2004-10-13

D.R.S. & ASSOCIATES LAND DESIGN CONSULTANTS

52 WINTERS STREET
WESTMINSTER, MARYLAND 21157
410-848-4060 410-876-6040
FAX 410-876-7603

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| REV. NO. | DATE | BY | DESCRIPTION |
|----------|------------|---------|---|
| 1 | 2004-11-22 | DRS/jfs | PER DEPT. OF INSPECTIONS, LICENSES & PERMITS |
| 2 | 2004-12-08 | DRS/jfs | PER HOWARD COUNTY HEALTH DEPT. & HOWARD COUNTY DEPT. OF PLANNING & ZONING 2004/12/6 |
| 3 | 2005-01-03 | DRS/jfs | PER HOWARD COUNTY HEALTH DEPT. 2004/12/28 |

I:\CAD\2022\219876\ST03-01.DWG, REV. 01-03-05 8:39:51 AM, jfs

10/24/05
Relax
10/24/05

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 #: 410-795-5670
Address: 3580 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 License# MSD009

*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: Palapso Homes Telephone #: _____
Subdivision: Kingston Lot #: 8 Well Tag #: HO-99-9065
Site Address: 326 Conchita Dr

Submersible Pump Data

Make: Goulds
Model #: 5G515412
Pump Capacity: 5 GPM
Well Yield: 1.4 GPM

Pitless Adapter

Make: Campbell
Model#: N/A
Depth: 36 (36" min)
NSF approved: YES

Well Cap and Electric Conduit

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

Depth of well encountered at time of pump installation: 900 (feet)
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 N/A

Piping to house

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

House Connection

PVC sleeved to undisturbed soil at wall penetration: YLD
Approximate length of sleeve: 5
Sleeve caulked and sealed properly: YLD

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: 8/25/05

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

Date Insp. Requested: 8/22/05 Date Insp. Approved: 10/3/05 GAC

- 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

8/22/05
Sleeved under
stream
(BB)

C1 **3853** SEQUENCE NO. (MDE USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

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

ST/CO USE ONLY DATE RECEIVED: MM 12 DO 20 YY 04
 DATE WELL COMPLETED: MM 12 DO 20 YY 04
 Depth of Well: 22 800 26 2/8/05 (TO NEAREST FOOT) o.k. (BB)
 PERMIT NO. FROM "PERMIT TO DRILL WELL": HO-94-4065

OWNER: Ricker Dan
 STREET OR RFD: 3566 Conchita Drive TOWN: Ellicott City
 SUBDIVISION: Kingston SECTION: _____ LOT: 8

WELL LOG
 Not required for driven wells

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

| DESCRIPTION (Use additional sheets if needed) | FEET | | check if water bearing |
|---|------|-----|------------------------|
| | FROM | TO | |
| Brown Shale | 0 | 68 | |
| Gray Slate | 68 | 85 | |
| White | 85 | 86 | ✓ |
| Gray Slate | 86 | 240 | |
| White | 240 | 241 | ✓ |
| Gray Slate | 241 | 740 | |
| White | 740 | 741 | ✓ |
| Gray Slate | 741 | 800 | |

GROUTING RECORD YES NO
 WELL HAS BEEN GROUTED (Circle Appropriate Box) 44 44
 TYPE OF GROUTING MATERIAL (Circle one)
 CEMENT BENTONITE CLAY
 NO. OF BAGS 110 NO. OF POUNDS 1504
 GALLONS OF WATER 910
 DEPTH OF GROUT SEAL (to nearest foot)
 from 0 TOP ft. to 45 BOTTOM 58 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 Nominal diameter top (main) casing (nearest inch)! Total depth of main casing (nearest foot)
5 16 73
 60 61 63 64 66 70

OTHER CASING (if used)
 diameter depth (feet)
 _____ inch _____ 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. 1 MSD 009
 DRILLERS SIGNATURE [Signature]
 (MUST MATCH SIGNATURE ON APPLICATION)
 LIC. NO. 1 D 1

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

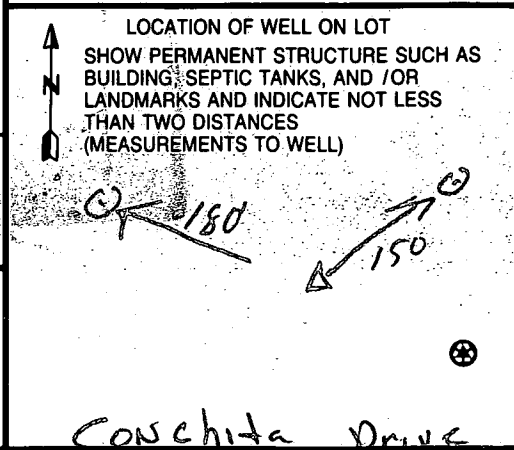
C 2 DEPTH (nearest ft.)
 T 2
 E 8 NO 9 11 15 17 21
 A 2
 C 23 24 26 30 32 36
 H 2
 S 3
 R 38 39 41 45 47 51
 E
 N
 SLOT SIZE 1 _____ 2 _____ 3 _____
 DIAMETER OF SCREEN _____ (NEAREST INCH)
 56 60
 from _____ to _____

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

C 3 **PUMPING TEST**
 HOURS PUMPED (nearest hour) 06
 PUMPING RATE (gal. per min.) 1.4
 METHOD USED TO MEASURE PUMPING RATE 1 gal
 WATER LEVEL (distance from land surface)
 BEFORE PUMPING 12 ft.
 WHEN PUMPING 165 ft.
 TYPE OF PUMP USED (for test)
 A air P piston T turbine
 C centrifugal R rotary O other (describe below)
 J jet S submersible

PUMP INSTALLED
 DRILLER INSTALLED PUMP (CIRCLE) (YES or NO) YES NO
 IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.
 TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29. 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 } 02 (nearest foot)
 49 50 51



FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 94-4065
 Location of property (road) 3566 Conchita Drive
 Subdivision Kingston Lot 8 Block _____ Plat _____ Sec. _____
 Well Driller Egles / Compton Owner Dan Ricker

Depth of well 800'
 Distance of measuring point (M.P.) above ground 2'
 Static water level (S.W.L.) below M.P. 12'

I. High rate pumping -- reservoir drawdown

Time pump started 11:00 Pumping rate 15
 Total time 30 min to reach pumping water level 165 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 #1 gallon bucket | FLOW METER READING (if used) | CALCULATED FLOW (gallons per minute) |
|-------------------------------|------------------------|--|------------------------------|--------------------------------------|
| 11:00 | 12 | 4 | | 15 |
| 11:15 | 117 | 4 | | 15 |
| 11:30 | 165 | 15 | | 4 |
| 11:45 | 165 | 41 | | 1.4 |
| 12:00 | 165 | 41 | | 1.4 |
| 12:15 | 165 | 41 | | 1.4 |
| 12:30 | 165 | 41 | | 1.4 |
| 12:45 | 165 | 41 | | 1.4 |
| 1:00 | 165 | 41 | | 1.4 |
| 1:15 | 165 | 41 | | 1.4 |
| 1:30 | 165 | 41 | | 1.4 |
| 1:45 | 165 | 41 | | 1.4 |
| 2:00 | 165 | 41 | | 1.4 |
| 2:15 | 165 | 41 | | 1.4 |
| 2:30 | 165 | 41 | | 1.4 |
| 2:45 | 165 | 41 | | 1.4 |
| 3:00 | 165 | 41 | | 1.4 |
| 3:15 | 165 | 41 | | 1.4 |
| 3:30 | 165 | 41 | | 1.4 |
| 3:45 | 165 | 41 | | 1.4 |
| 4:00 | 165 | 41 | | 1.4 |
| 4:15 | 165 | 41 | | 1.4 |
| 4:30 | 165 | 41 | | 1.4 |
| 4:45 | 165 | 41 | | 1.4 |
| HD-2245:00 | 165 | 41 | | 1.4 |
| 5:15 | 165 | 41 | | 1.4 |
| 5:30 | 165 | 41 | | 1.4 |
| 5:45 | 165 | 41 | | 1.4 |

B 1: 0613 SEQUENCE NO. (MDE USE ONLY) STATE OF MARYLAND STATE PERMIT NUMBER
 APPLICATION FOR PERMIT TO DRILL WELL HO-94-4065
WS21561 please type fill in this form completely

Date Received (APA) 11/04/04
 OWNER INFORMATION
 15 Last Name Ricker Owner Dan First Name
 36 13898 Street or RFD
 57 Sykesville md Town 70 State 21 Zip 76

B 3 LOCATION OF WELL
 8 COUNTY Howard
 23 SUBDIVISION Kingston
 SECTION 3 LOT 8
 52 NEAREST TOWN West Friendship
 MILES FROM TOWN (enter 0 if in town) 5 M I I

DRILLER INFORMATION
 76 Driller's Name Allen Compton M 3 D 009 License No. 81
 Firm Name Fogles Well Drilling
 Address 580 Obrecht rd
 Signature [Signature] Date 11-4-04

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

 11 NEAR WHAT ROAD 3566 Conchita Dr
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

 34 325 37 DISTANCE FROM ROAD
 ENTER FT OR MI 38 39
 TAX MAP: 22 BLK: 10 PARCEL 198

B 2 WELL INFORMATION
 1 APPROX. PUMPING RATE 5 GAL. PER MIN. 12
 AVERAGE DAILY QUANTITY NEEDED 500 GAL. PER DAY 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)
 DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
 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
 COUNTY NAME Howard COUNTY NO. 13
 STATE SIGNATURE [Signature] INSERT S →
 DATE ISSUED 11/15/04 EXP. DATE 11/15/2005
 43 NORTH GRID 525 000 EAST GRID 809 000

APPROXIMATE DEPTH OF WELL 300 FEET
 APPROXIMATE DIAMETER OF WELL 6" NEAREST INCH

METHOD OF DRILLING (circle one)
 BORED (or Augered) JETTED Jetted & DRIVEN
 30 AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary)
 37 CABLE REVERSE-ROTary DRIVE-POINT
 other _____

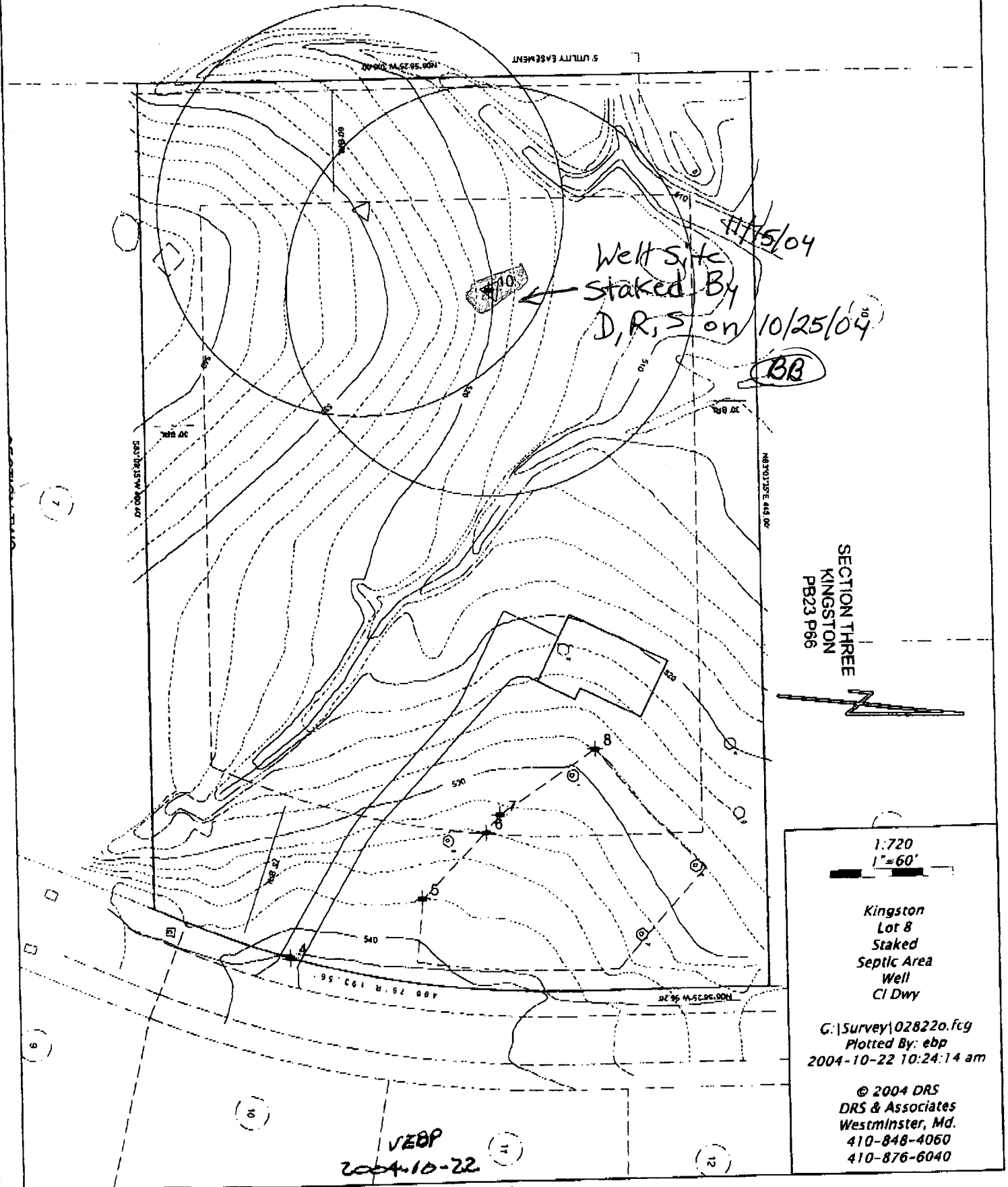
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)
 THIS WELL WILL NOT REPLACE AN EXISTING WELL
 THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
 THIS WELL WILL DEEPEM AN EXISTING WELL
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52

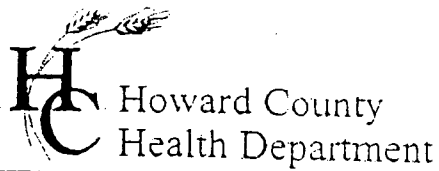
Not to be filled in by driller (MDE OR COUNTY USE ONLY)
 APPROP. PERMIT NUMBER _____ G _____
 PERMIT No. HO-94-4065

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
 SOURCES OF DRILLING WATER
 1. _____
 2. _____
 3. _____
 WRITE THE BOX NUMBER FROM THE MAP HERE
 E 809
 N 5205
 DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION

KINGSTON - LOT 8

1/3





Howard County
Health Department

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

TO ALL INTERESTED PARTIES

When submitting a well permit application for a proposed well for new construction, please indicate one of the following:

- The well site has been staked by DRS
(professional land surveyor or company employing professional land surveyors)
on 10-25-04 (date) and does not require a site inspection.
- The well driller, builder or property owner will call the Health Department to schedule a time to meet in the field to verify the proposed well site location.

This sheet, along with two copies of an acceptable well site plan, must be attached to the green well permit application.

Revised 6/10/03

B 1 12023

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

STATE PERMIT NUMBER

40-94-3037

105119 please print or type

fill in this form completely

Date Received (APA)

03 08 01

OWNER INFORMATION

Moore IYABUNMIE
3533 CONCHITA DR
ELLICOTT CITY MD 21042

B 3

LOCATION OF WELL

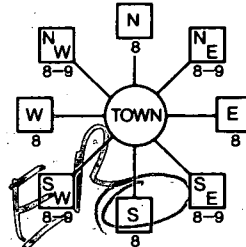
HOWARD
KINGSTON
SECTION 3 LOT 8
WEST FRIENDSHIP
MILES FROM TOWN 5

DRILLER INFORMATION

AARON COMPTON MS D009
FOGARS WELL DRILLING
580 ORBERT RD SYMESVILLE 21784

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



CONCHITA DR
NEAR WHAT ROAD
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
DISTANCE FROM ROAD 350 FT
TAX MAP: 22 BLK: 4 PARCEL 205

B 2

WELL INFORMATION

APPROX. PUMPING RATE 5
AVERAGE DAILY QUANTITY NEEDED 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
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
COUNTY NAME
A513159
COUNTY NO.

DATE ISSUED 03 14 01
CO SIGNATURE Mark E. Ripkin
NORTH GRID 52 00 55
EAST GRID 08 10 57

APPROXIMATE DEPTH OF WELL 300 FEET
APPROXIMATE DIAMETER OF WELL 6"

METHOD OF DRILLING (circle one)

- BORED (or Augered)
JETTED
Jetted & DRIVEN
AIR-ROTARY
AIR-PERCussion
ROTARY (Hydraulic Rotary)
CABLE
REVerse-ROTary
DRive-POINT

REPLACEMENT OR 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

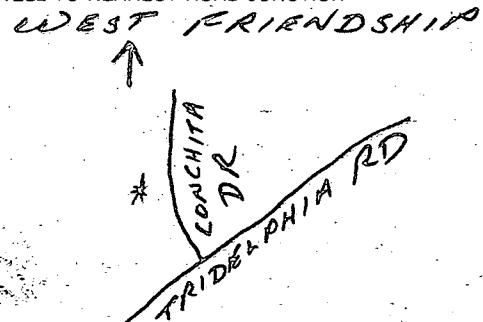
Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROX. PERMIT NUMBER 54
PERMIT No. 40-94-3037

WRITE THE BOX NUMBER FROM THE MAP HERE

E 8210
N 5205

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

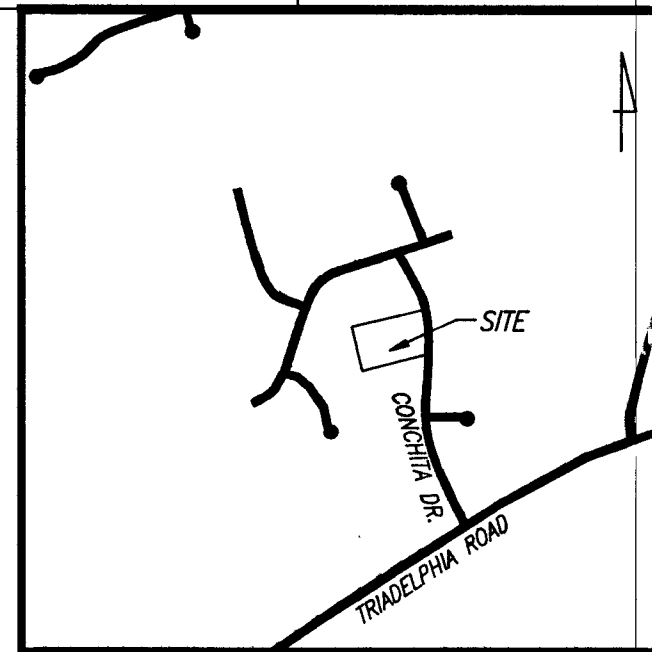
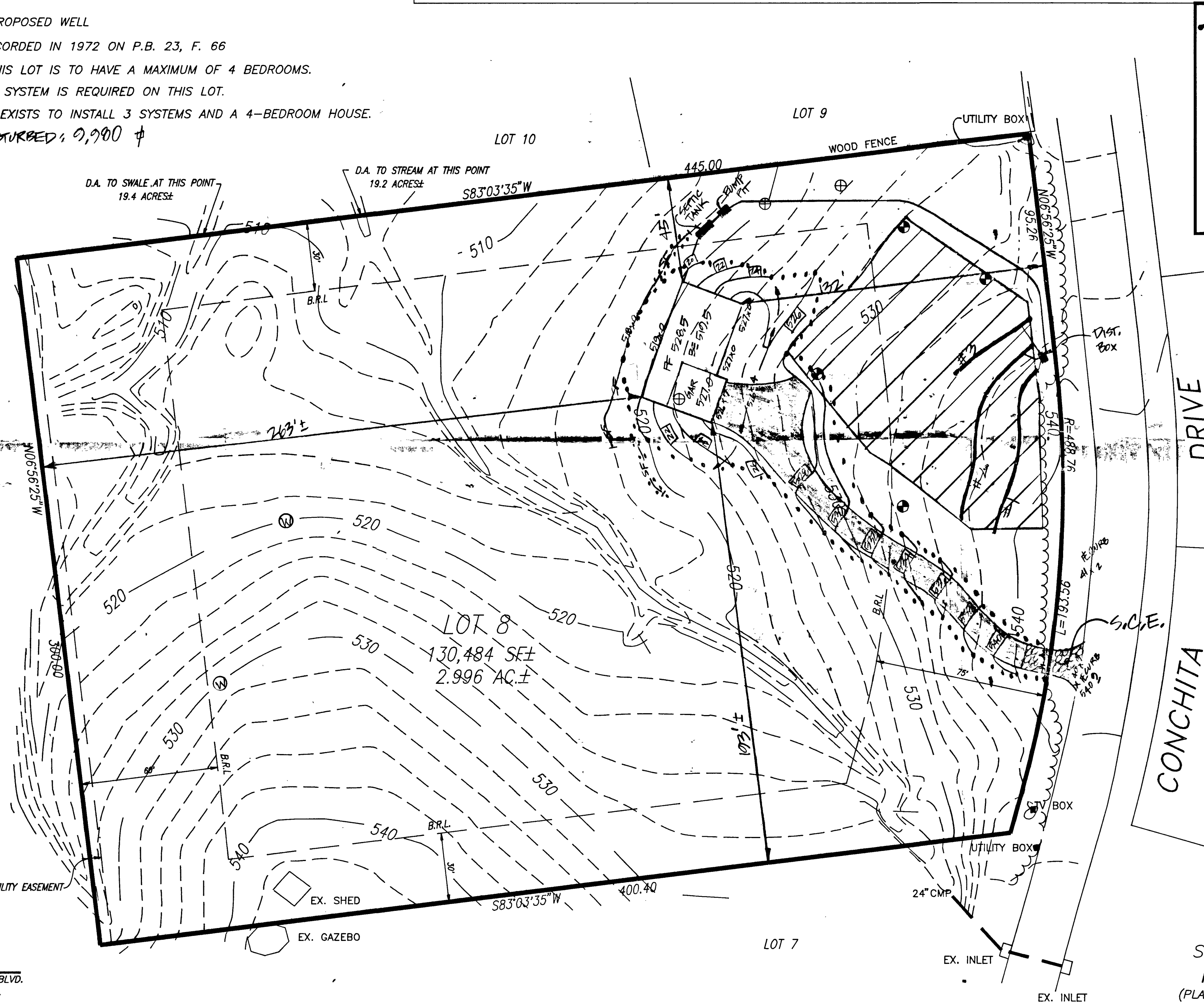


NOTES:

1. THE SPOT ELEVATIONS(398 26) SHOWN HEREON WERE FIELD-RUN BY SHANABERGER & LANE IN AUGUST, 2000.
 2. B.R.L. DESIGNATES BUILDING RESTRICTION LINE.
 ⊕ DESIGNATES FAILED PERC TEST
 ⊙ DESIGNATES APPROVED PERC TEST
 3. (W) DESIGNATES PROPOSED WELL
 4. THIS LOT WAS RECORDED IN 1972 ON P.B. 23, F. 66
 5. THE HOUSE ON THIS LOT IS TO HAVE A MAXIMUM OF 4 BEDROOMS.
 6. A PUMPED SEPTIC SYSTEM IS REQUIRED ON THIS LOT.
 7. SUFFICIENT ROOM EXISTS TO INSTALL 3 SYSTEMS AND A 4-BEDROOM HOUSE.
- ⊕, TOTAL AREA DISTURBED: 9,900 ⊕

SEPTIC SYSTEM DATA

| | | | | | | |
|-----------------------|-------------------|-------------------------|-----------------|-----------|-----------|-----------|
| INV. AT HOUSE: 517.00 | | | | | | |
| SEPTIC TANK | PUMP PIT | DISTRIBUTION BOX | TRENCHES | #1 | #2 | #3 |
| EX. GRADE: 518.5 | EX. GRADE: 518.5 | EX. GRADE: 538.5 | EX. GRADE | 539 | 537.8 | 536 |
| FIN. GRADE: 518.5 | FIN. GRADE: 518.5 | FIN. GRADE: 538.5 | FIN. GRADE | 539 | 537.8 | 536 |
| INV. IN: 516.8 | INV. IN: 516.4 | INV. IN: 536.5 | INV. IN | 535 | 533.8 | 532.8 |
| INV. OUT: 516.5 | INV. OUT: 516.1 | INV. OUT: 536.3 | BOTTOM | 533 | 531.9 | 530.8 |
| | | | LENGTH | 75' | 85' | 40' |



1/19/01 T.C.M.sg to owner: No BP w/o well

DRIVE
CONCHITA

SITE PLAN
LOT 8
SECTION THREE
KINGSTON
 (PLAT BOOK 23, FOLIO 16)
 3RD ELECTION DIST. HOWARD CO., MD.
 SCALE: 1"=30' OCTOBER 18, 2000

SHANABERGER & LANE
 8726 TOWN & COUNTRY BLVD.
 SUITE 201
 ELLICOTT CITY, MD. 21043
 PHONE: 410-461-9563
 FAX: 410-461-9693

NOTES:

1. THE SPOT ELEVATIONS(398 26) SHOWN HEREON WERE FIELD-RUN BY SHANABERGER & LANE IN AUGUST, 2000.
2. THIS AREA DESIGNATES A PRIVATE SEWAGE EASEMENT AS REQUIRED BY THE MD. STATE DEPT. OF THE ENVIRONMENT FOR INDIVIDUAL SEWAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED. THIS EASEMENT SHALL BECOME NULL & VOID UPON CONNECTION TO A PUBLIC SEWAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENTS INTO THE PRIVATE SEWAGE EASEMENT. RECORDATION OF A MODIFIED SEWAGE EASEMENT SHALL NOT BE NECESSARY. THERE IS A 10,000 S.F. MINIMUM RESTRICTION ON THE SEWAGE EASEMENT.
3. B.R.L. DESIGNATES BUILDING RESTRICTION LINE.
4. \oplus 419.3 DESIGNATES FAILED PERC TEST
 \ominus 425.1 DESIGNATES APPROVED PERC TEST
 \odot DESIGNATES PROPOSED WELL

5. THE LOT SHOWN HEREON COMPLIES WITH THE MINIMUM OWNERSHIP WIDTH & LOT AREA AS REQUIRED BY THE MD. STATE DEPT. OF THE ENVIRONMENT.

6. THIS LOT WAS RECORDED IN 1972 ON P.B. 23, F. 66

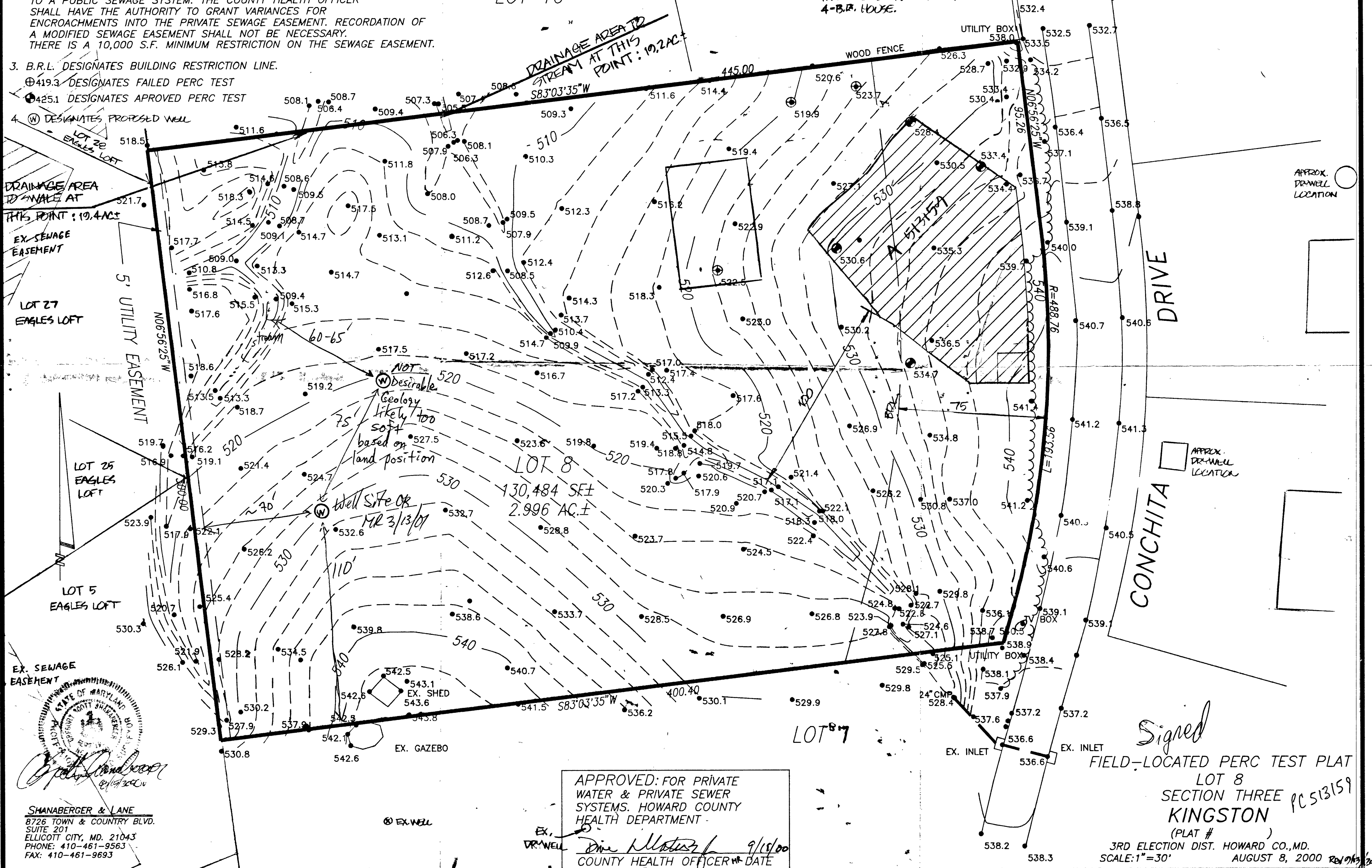
7. THE HOUSE ON THIS LOT IS TO HAVE A MAXIMUM OF 4 BEDROOMS.
8. A RUMPED SEPTIC SYSTEM IS REQUIRED ON THIS LOT.
9. ALL KNOWN WELLS & SEPTIC SYSTEMS WITHIN 100' OF LOT LINES ARE SHOWN.

LOT 9
 10. SUFFICIENT ROOM EXISTS TO INSTALL 3 SYSTEMS AND A 4-B.R. HOUSE.

HOWARD COUNTY HEALTH DEPT.
 ERVIE

2000 SP 20 P11 of 49

APPROX. DRYWELL LOCATION



SHANABERGER & LANE
 8726 TOWN & COUNTRY BLVD.
 SUITE 201
 ELLICOTT CITY, MD. 21043
 PHONE: 410-461-9563
 FAX: 410-461-9693

APPROVED: FOR PRIVATE WATER & PRIVATE SEWER SYSTEMS. HOWARD COUNTY HEALTH DEPARTMENT
 EX. DRYWELL *Don H. Waters* 9/15/00
 COUNTY HEALTH OFFICER DATE

Signed
 FIELD-LOCATED PERC TEST PLAT
 LOT 8
 SECTION THREE PC 53159
 KINGSTON
 (PLAT #)
 3RD ELECTION DIST. HOWARD CO., MD.
 SCALE: 1"=30'
 AUGUST 8, 2000

APPLICATION

PERCOLATION TESTING

A 513159

Purpose -
confirm/re-establish
SRP

P _____

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

DISTRICT _____

DATE 12-3-99

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 Mr. James W. King SR

ADDRESS 4021 Villanova Road PHONE 410-484-2046

AGENT OR PROSPECTIVE BUYER Iyabunmi Moore Columbia 21046

ADDRESS 7250A Eden Brook Dr PHONE 410-988-9398
21K STEWART 3533 CONCHITA DR E.C. 21042

PROPERTY LOCATION: 21K STEWART 3533 CONCHITA DR E.C. 21042

SUBDIVISION Kingston LOT NO. 8

ROAD AND DESCRIPTION Conchita DR Lot 8 Section 3

TAX MAP _____ PARCEL # _____

SIZE OF LOT 3 acres TYPE BLDG. Single Family Dwelling
(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.

Iyabunmi Moore
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING PERC AREA LIMITED, VERY CLOSE TO 10K # (MR) 4/18/00

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

(1)(3)

orge
sa
cl 1m
5-10% frags

tan
gray
mica
sa 1m
10-15% frags

dense
orge
cl

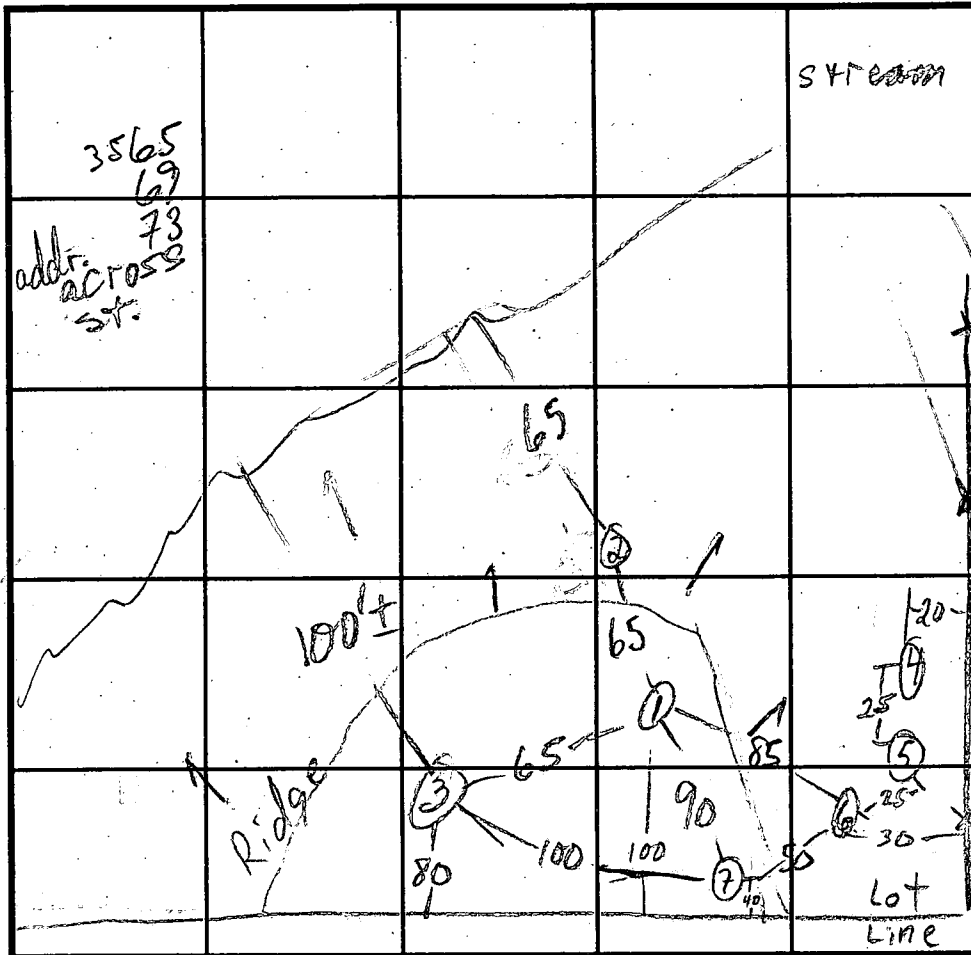
orge
brn
cl 1m

tan
gray
yel
mica
sa 1m
WATER

1/4 tan
sac 1m

tan
yel
sand

mottled
or H₂O



SOIL PROFILE

(5)

1/4 tan
sac 1m

tan
sand

mottles
gray damp

swale

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE. CONCHITA DR

| DATE | TEST NO. | DEPTH | PRE-WET | | TEST - 1" DROP | | TIME | | |
|--------|----------|--------|----------------------------|-------|----------------|-------|------|--------------|---|
| | | | START | STOP | START | STOP | | | |
| 4/6/00 | 1 S | 4 | 10:47 | 10:58 | 10:58 | 11:18 | 20 | ✓ | |
| | 1 V | 13 | OK, faster perc @ 5' | | | | | | |
| | 2 | 13 | FAIL - < 100' TO STREAM | | | | | | X |
| | 3 S | 4 | 11:35 | 11:41 | 11:41 | 11:51 | 10 | ✓ | |
| | 3 V | 12 1/2 | OK see profile | | | | | | |
| | 4 V | 5 1/2 | FAIL ROCK REFUSAL | | | | | | X |
| | 5 V | 8 | mottles @ 7' | | | | | FAIL | X |
| | 6 S | 3 1/2 | 12:51 | 12:52 | 12:52 | 12:53 | FAST | ✓ | |
| | | | 12:53 | 12:54 | 12:54 | 12:56 | 2 | | |
| | 6 V | 13 1/2 | H ₂ O @ 12 1/2' | | | | | OK - shallow | |
| | 7 V | 14 | 2" cl yel tan sand below | | | | | | ✓ |

REMARKS mottles @ bot? OK - shallow

TYPE OF SOIL

TESTED BY M. Ripkin ALSO PRESENT owners J. Goodman - hoe

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME (1)(3)(6)(7) 8 TRENCH WIDTH 2

INLET DEPTH 3 1/2 MAXIMUM BOTTOM DEPTH 8 1/2 SQ. FT./BEDROOM 180

D/W 3 1/2 BOT 9 1/2



HOWARD COUNTY HEALTH DEPARTMENT

Diane L. Matuszak, M.D., M.P.H., County Health Officer

April 19, 2000

James W. King
4021 Villanova Road
Baltimore, MD 21207

RE: PERCOLATION TEST RESULTS
A 513159
Kingston, Lot 8, Conchita Drive
Confirmation of Previously Approved Lot,

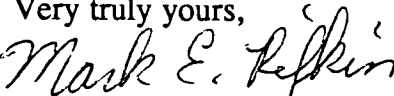
Dear Mr. King:

Percolation testing conducted April 6, 2000 on the above referenced property indicated limited satisfactory soil conditions. The primary limiting factors were proximity to the stream on the property and shallow depths to groundwater. Copies of the test results are enclosed.

Further review is contingent upon submission by a registered engineer of a percolation certification plan showing actual locations and elevations of all excavated test holes and a suitable house and well site. The plat should also include the locations of all existing wells and septic reserve areas on the property, as well as the locations of any other relevant features such as streams, swales, or existing structures. A note must be included certifying that all existing wells and septic systems within 100 feet of property boundaries have been shown.

Due to the observation of existing uphill septic systems across Conchita Drive, it is expected that the only approvable well sites are located across the stream in the rear of the property. Well permit approval would be contingent upon issuance of a stream-crossing permit by the MDE Non-tidal Wetlands Program at 410-631-4179.

The percolation certification plat should be submitted within 60 days to allow field verification if necessary. If you have any questions regarding this matter, please contact me at the above address or by calling (410) 313-2640.

Very truly yours,

Mark E. Rifkin, R.S.
Water and Sewerage Program

MR
Enclosures
cc: Iyabunmi and Kevin Moore
Zik Stewart
File



HOWARD COUNTY HEALTH DEPARTMENT

Diane L. Matuszak, M.D., M.P.H., County Health Officer
February 18, 2000

Zik Stewart
3533 Conchita Drive
Ellicott City, Md. 21042

Re: Percolation Test Application A513159
Lot 8 Kingston, Section 3
Conchita Drive

Dear Mr. Stewart,

This is to acknowledge receipt (Dec 3, 1999) of your percolation test application for the above referenced property. We have not yet observed sufficient rise in the groundwater levels to initiate the spring "wet season" test period.

We are hopeful, but not certain, that conditions will change sufficiently in the next several weeks to allow testing to be scheduled in the middle or later portion of next month.

We will contact you as soon as a determination is reached. You may wish to check back with us around the middle of March if you have not heard from us by that time. Meanwhile, as per our discussion yesterday, it would be helpful if you would research and add to the plan the location of wells and septic systems on surrounding properties and any other relevant site detail that will ultimately be needed to complete the evaluation.

Yours truly, /

Craig Williams, Sanitarian

cc: James King - owner
Iyabunmi Moore - co-applicant

→ 6567 FINESTOWN RD - 57080RDWILLG
(SENT TO OWNERS PREVIOUS ADDRESS,
UNABLE TO CONFIRM TOWN/ZIP
FOR NEW ADDRESS ON VILLANOVA RD) CW

✓ FILL

N12°50'33"E, 319.22'

30' B.R.L.

10' B.R.L.

B.R.L.

200'

185'

245'

10' B.R.L.

FL

578°58'11"E 636.72'

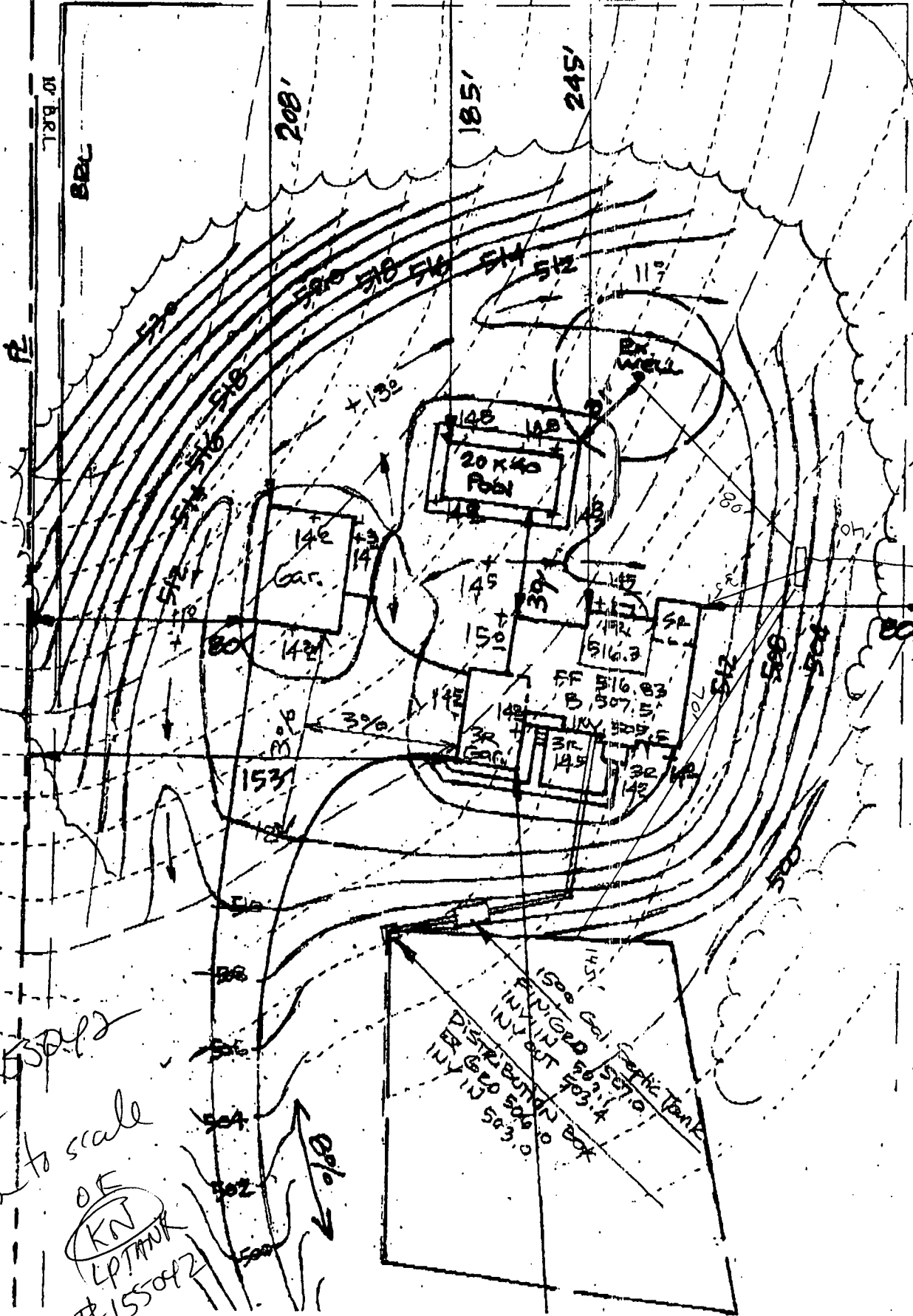
578°58'11"E 636.72'

1000' Gallon U.G.

50'

8/1/05
plan to scale
of
KN
LPTMOK
#155042

8/1/05
plan to scale
of
KN
LPTMOK
#155042



900-910

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVE
ELLCOTT CITY, MD 21043
PERMITS (410) 313-2433 INSPECTIONS (410) 313-1910
AUTOMATED INFORMATION (410) 313-3800

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

B00151349 KJB

Building Address 3568 Kingswood Circle Dr.
Associated Builders & Contractors
 Suite/Apt. #: 03-288870 SDP/WP/Petition #: _____
 Census Tract 60800.00 Subdivision Kingswood
 Section 3 Area _____ Lot 8
 Tax Map 22 Parcel 44305 Grid 9
 Zoning RR Map Coordinates _____ Lot size 1/4 Ac.

Property Owner's Name Kevin Moore
 Address 2100 Central Ave Dr
 City Ellicott City State MD Zip Code 21043
 Home Phone 410-442-3673 Work Phone _____
 Applicant's Name & Mailing Address, (if other than stated hereon):
443-535-0336 (Bumi Moore)
 Phone 410-442-3673 Fax _____

Existing Use Vacant Lot
 Proposed Use Private Residence
 Estimated Construction Cost \$ 275,000
 Description of Work Build 2.5 car garage
with 2 car driveway

Contractor Company Parsons Homes
 Contact Person D. Baker
 Address 10112 Foxglove Rd
 City Ellicott City State MD Zip Code 21043
 License No. 1293
 Phone 410-313-4793 Fax 410-313-0319

Occupant or Tenant _____
 Contact Name _____
 Address _____
 City _____ State _____ Zip Code _____
 Phone _____ Fax _____

Engineer or Architect Company _____
 Contact Person _____
 Address 52 W. Lincoln St
 City Ellicott City State MD Zip Code 21043
 Phone 410-313-4000 Fax 410-313-4000

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

| Building Characteristics | Utilities |
|---|--|
| Height: _____ | Water Supply: _____ Public _____ Private _____ |
| No. of stories: _____ | Sewage Disposal: _____ Public _____ Private _____ |
| Gross area, sq. ft. per floor: _____ | Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Use group: _____ | Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> |
| Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ State Certified Modular _____ | Sprinkler system: <u>N/A</u> <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____ |

| Building Characteristics | Utilities |
|--|---|
| SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1st floor: <u>36</u> <u>36</u> 2nd floor: <u>36</u> <u>36</u> Basement: <u>Spa</u> Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms <u>2</u> Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____ Other Structure: _____ Dimensions: _____ Footings: _____ Roof: _____ State Certified Modular _____ Manufactured Home _____ | Water Supply: _____ Public _____ Private <input checked="" type="checkbox"/> Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/> Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input checked="" type="checkbox"/> Sprinkler system: <u>N/A</u> <input type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____ |

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Kevin Moore
 Applicant's Signature
 Title/Company _____

Kevin Moore
 Print Name
 Date _____

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
 ** PLEASE WRITE NEATLY AND LEGIBLY: **
 FOR OFFICE USE ONLY

| AGENCY | DATE | SIGNATURE APPROVAL |
|--|----------------|---|
| Land Development, TWZ | | |
| State Highways | | |
| Building Official | | |
| Dev. Engineering, DPZ | | |
| Health | <u>1/11/05</u> | <u>[Signature]</u> |
| Fire Protection | | |
| Is Sediment Control approval required prior to issuance? | | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| CONTINGENCY CONSTRUCTION START: | | <input type="checkbox"/> |
| ONE STOP SHOP: | | <input type="checkbox"/> |

| DPZ SETBACK INFORMATION | PROPERTY ID# |
|---|-----------------------------|
| Front: _____ | <u>44305</u> |
| Rear: _____ | Filing fee \$ <u>217.50</u> |
| Side: _____ | Permit fee \$ _____ |
| Side St.: _____ | Excise tax \$ _____ |
| All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/> | Add'l per. fee \$ _____ |
| Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/> | TOTAL FEES \$ _____ |
| Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/> | Sub-total paid \$ _____ |
| Lot Coverage for NewTown Zone _____ | Balance due \$ _____ |
| SDP/Red-line approval date _____ | Check # <u>6106</u> |
| | Validation # <u>21750</u> |
| | Accepted by _____ |

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
 3430 COURT HOUSE DRIVE
 ELLICOTT CITY, MD 21043
 PERMITS (410)313-2455 INSPECTIONS (410)313-1810
 AUTOMATED INFORMATION (410) 313-3800

**HOWARD COUNTY
 PERMIT APPLICATION**

PERMIT NUMBER

B-00127911

Building Address 3566 CONNORITA DR
ESSEX CITY
Calverley, MD 21222 21092

Suite/Apt. #: _____ SDP/WP/Petition #: _____

Census Tract 6030 Subdivision KINGSTON

Section 3 Area _____ Lot 8

Tax Map 22 Parcel 198 Grid 4

Zoning RR Map Coordinates 10AS Lot size 2.996 ac

Property Owner's Name Kevin Moore

Address 3566

City CC State MD Zip Code 21292

Home Phone _____ Work Phone _____

Applicant's Name & Mailing Address, (if other than stated hereon): _____

Phone _____ Fax _____

Existing Use VACANT LOT

Proposed Use Single Family Home

Estimated Construction Cost \$ 300,000

Description of Work NEW CUSTOM SINGLE
FAMILY HOME

Contractor Company MARSHCOFFMAN'S

Contact Person Don Ricker

Address 3498 FORTSMITH DR

City Jayko State MD Zip Code 21734

License No. _____

Phone 800-976-8009 Fax _____

Occupant or Tenant Kevin Moore

Contact Name Kevin Moore

Address 3566

City CC State MD Zip Code _____

Phone _____ Fax _____

Engineer or Architect Company NO CHANGE

Contact Person PERMIT NO CHANGE

Address PERMIT - CHANGE BY DILLI

City 455 State MD Zip Code 5/23/02

Phone 410-461-9563 Fax 410-461-9653

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics

Height: _____

No. of stories: 2

Gross area, sq. ft. per floor: 1200

Use group: _____

Construction type:
 Reinforced Concrete
 Structural Steel
 Masonry
 Wood Frame
 State Certified Modular

Utilities

Water Supply:
 Public
 Private

Sewage Disposal:
 Public
 Private

Electric Yes No
 Gas Yes No

Heating System:
 Electric Oil
 Natural Gas
 Propane Gas

Sprinkler system: N/A
 Full
 Partial
 Other Suppression
 # of Heads

Building Characteristics

SF Dwelling SF Townhouse

| | Depth | Width |
|------------|-----------|-----------|
| 1st floor: | <u>34</u> | <u>34</u> |
| 2nd floor: | <u>34</u> | <u>34</u> |
| Basement: | <u>34</u> | <u>34</u> |

Finished Basement Unfinished Basement

Crawl space Slab on Grade

No. of Bedrooms 4

Multi-family dwellings:
 No. of efficiency units: _____
 No. of 1 BR units: _____
 No. of 2 BR units: _____
 No. of 3 BR units: _____

Other Structure: _____

Dimensions: _____

Footings: _____

Roof: _____

State Certified Modular
 Manufactured Home

Utilities

Water Supply:
 Public
 Private

Sewage Disposal:
 Public
 Private

Electric Yes No
 Gas Yes No

Heating System:
 Electric Oil
 Natural Gas
 Propane Gas

Sprinkler system: N/A
 NFPA #13D
 NFPA #13R
 Other

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY, WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Kevin Moore
 Applicant's Signature

Don Ricker
 Title/Company

Don Ricker
 Print Name

 Date

Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

CASELL TESTING, INC.

ENVIRONMENTAL SAMPLING AND TESTING
10940 BEAVER DAM ROAD, HUNT VALLEY, MD 21030-2211
(410) 252-7742

REPORT DATE: Oct 15, 2005

County Howard

Lab Number 06-587

Sample iced Yes
Residual Cl₂ <0.1 mg/L Yes

cc: County Health Dept. Yes

CERTIFICATE OF ANALYSIS

Maryland State Certified Water Quality
Laboratory No. 115

REQUESTER: Patapsco Homes
Attn: Jennie
13898 Forsyth Road
Sykesville, Maryland 21784

Property Sampled: U&O: 3566 Conchita Drive, Retest #2

Station Sampled: Kitchen Tap

Tax Map #: 22

Date/Time Sampled: Oct 14, 2005 11:15 am

Parcel #: 205

Owner, Telephone No.:

Sampler: 6724GP

Subdivision Name:

Lot Number:

Building Permit No.: B00151349

Well Number: HO-94-4065

Observation: 2-Piece Cap
Satisfactory

RESULTS OF ANALYSIS:

| PARAMETER | RESULT | METHOD | *MCL/**SMCL | |
|---------------------------|--------|----------|-------------|------|
| Total Coliform | Absent | SM 9223B | *Absent | SAFE |
| E. coli (18 Hour Test) | Absent | SM 9223B | *Absent | SAFE |

Treatment/Conditioning: NONE

Heather R. Beam

*MCL = Maximum Contamination Level
**SMCL = Secondary Maximum Contamination Level

CASSELL TESTING, INC.

ENVIRONMENTAL SAMPLING AND TESTING
 10940 BEAVER DAM ROAD, HUNT VALLEY, MD 21030-2211
 (410) 252-7742

REPORT DATE: Oct 1, 2005

County Howard

Lab Number 06-340

Sample iced Yes
 Residual Cl₂ <0.1 mg/L Yes

cc: County Health Dept. Yes

CERTIFICATE OF ANALYSIS

Maryland State Certified Water Quality
 Laboratory No. 115

REQUESTER: Patapsco Homes
 Attn: Jennie
 1389B Forsyth Road
 Sykesville, Maryland 21784

Property Sampled: U&O: 3566 Conchita Drive, Retest #1

Station Sampled: Kitchen Tap

Tax Map #: 22

Date/Time Sampled: Sep 30, 2005 10:55 am

Parcel #: 205

Owner, Telephone No.:

Sampler: 67246P

Subdivision Name:

Lot Number:

Building Permit No.: B00151349

Well Number: HD-94-4065

Observation: 2-Piece Cap
 Cap Loose on Casing
 2 Bolts Loose

RESULTS OF ANALYSIS:

| PARAMETER | RESULT | METHOD | *MCL/**SMCL | |
|----------------|---------|----------|-------------|--------|
| Total Coliform | PRESENT | SM 9223B | *Absent | UNSAFE |
| E. coli | Absent | | | |
| (18 Hour Test) | | | | |

Treatment/Conditioning: NONE

Heather R. Beam

Heather R. Beam

*MCL = Maximum Contamination Level
 **SMCL = Secondary Maximum Contamination Level

CASELL TESTING, INC.

ENVIRONMENTAL SAMPLING AND TESTING
 10940 BEAVER DAM ROAD, HUNT VALLEY, MD 21030-2211
 (410) 252-7742

REPORT DATE: Sep 22, 2005

County Howard

Lab Number 06-93

Sample iced Yes
 Residual Cl₂ <0.1 mg/L Yes

cc: County Health Dept. Yes

CERTIFICATE OF ANALYSIS

Maryland State Certified Water Quality
 Laboratory No. 115

REQUESTER: Patapsco Homes
 Attn: Jennie
 13898 Forsyth Road
 Sykesville, Maryland 21784

Property Sampled: U&O: 3566 Conchita Drive

Station Sampled: Pressure tank tap

Tax Map #: 22

Date/Time Sampled: Sep 21, 2005 1:15 pm

Parcel #: 205

Owner, Telephone No.:

Sampler: 67246P

Subdivision Name:

Lot Number:

Building Permit No.: B00151349

Well Number: HD-94-4065

Observation: 2-Piece Cap
 Satisfactory

RESULTS OF ANALYSIS:

| PARAMETER | RESULT | METHOD | *MCL/**SMCL | |
|---------------------------|----------------|-----------|-----------------|--------|
| Nitrate | <1.0 mg/L as N | SM 4500D | *10 mg/L as N | Pass |
| Turbidity | 1.0 NTU | EPA 180.1 | *10 NTU | Pass |
| pH | 7.1 Units | EPA 150.1 | **6.5-8.5 Units | *** |
| Sand | Negative | | Negative | |
| Total Coliform | PRESENT | SM 9223B | *Absent | UNSAFE |
| E. coli (18 Hour Test) | Absent | | | |

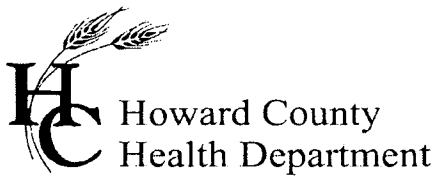
Treatment/Conditioning: NONE

***A non-enforceable parameter that may cause cosmetic effects or aesthetic effects (such as taste, odor, or color) in drinking water.

Heather R. Beam

Heather R. Beam

*MCL = Maximum Contamination Level
 **SMCL = Secondary Maximum Contamination Level



3525 H Ellicott Mills Drive, Ellicott City, MD 21043
(410) 313-1771 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

October 25, 2005

Patuxent Builders
13898 Forsythe Road
Sykesville, MD 21784

RE: Kingston, Lot 8
3566 Conchita Drive
Ellicott City, MD 21042
BP #: B00151349
Well Permit # HO-94-4065

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 10/06/2005. Final approval of the well line connection to the dwelling was approved on 10/03/2005.**

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-94-4065. 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(s): 09/21/2005, 09/30/2005 & 10/14/2005
Date of Well Completion: 12/20/2004

Approving Authority,

Gabriel Creighton, Sanitarian
Well & Septic Program

cc: Building Inspector's Office
Community Health Services
File