

5/18/00
2:00
RPS # 414598

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 513295

A REPAIR

DISTRICT _____

DATE 3-1-2000

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
~~XXXXXXXX~~ 410-313-2640

INDEXED

DATE SYSTEM APPROVED 5/18/00

INSPECTOR BB

WTC III Plumbing & Heating, Inc. IS PERMITTED TO INSTALL ALTER _____

ADDRESS 1820 Gillis Falls Road, Woodbine, MD 21797 PHONE 410-489-4457

SUBDIVISION Fox Chase LOT 3 ROAD 13742 Brighton Dam Road

PROPERTY OWNER Nantucker Homes/Dorsey, Inc.

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

TRENCHES - Trench to be 3 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 5 feet below original grade. Effective area begins at 3 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Starting at the 220.37'/331.52' intersection, place the distribution box 175' feet down the 331.52' lot line and 125 feet off this same lot line. Run trenches on contour toward Brighton Dam Road.

NOTES - MAINTAIN A MINIMUM OF 100 FEET FROM THE WELL TO THE TRENCHES. No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. 1/22/99 OK AU

PLANS APPROVED BY Mark E. Rifkin REVISED DATE 10/12/99

COVER NO WORK UNTIL INSPECTED AND APPROVED

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS. 90° ELBOWS NOT ACCEPTABLE.

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

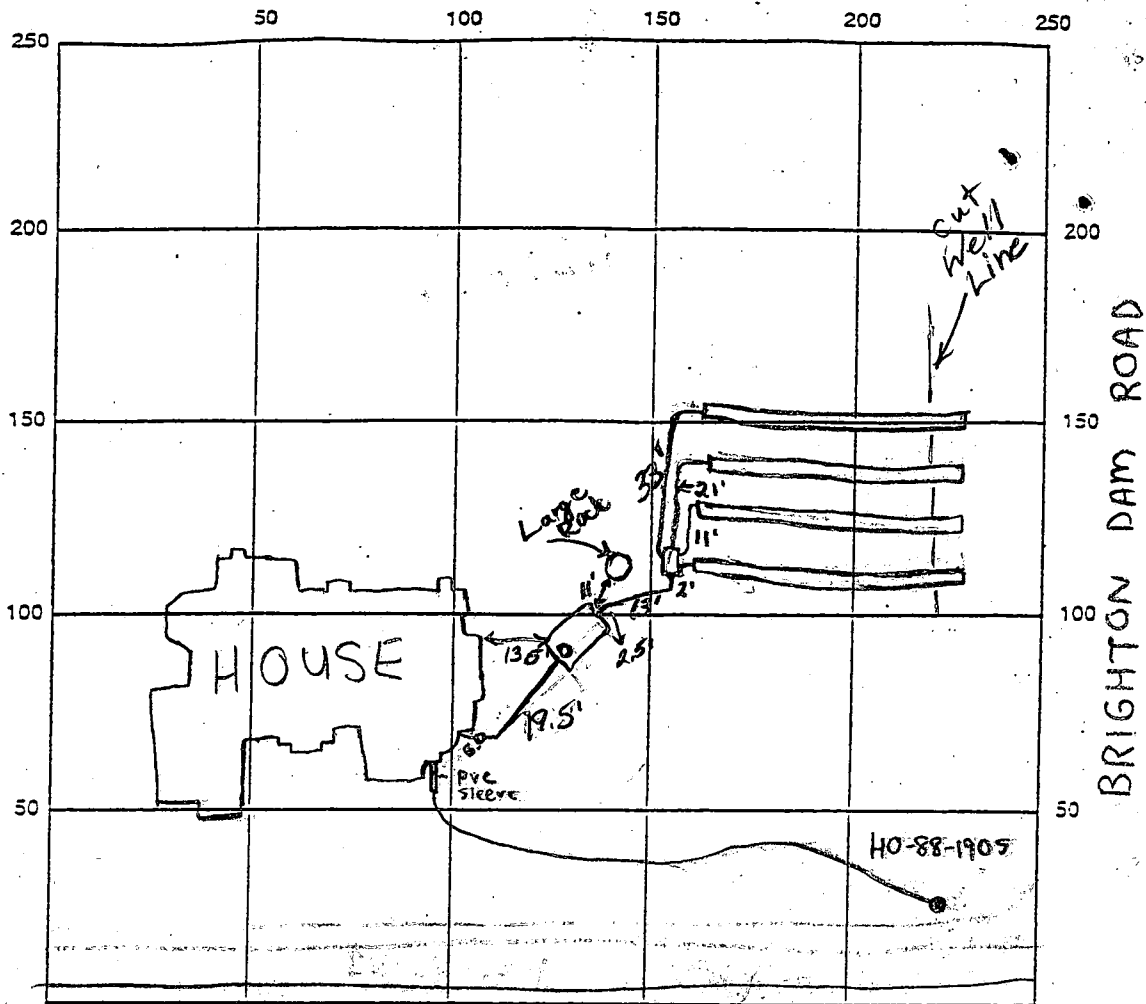
PERMIT VOID AFTER TWO YEARS

NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON, CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT.

513295



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
DRNEWBY

SEPTIC TANK LEVEL 1250 MS CLEANOUTS 4" House, 8" Tank

DISTRIBUTION BOX LEVEL O.K.

DRAIN FIELD/TITLE DEPTH 5.0 FT. TRENCH WIDTH 3.0 FT. INLET DEPTH 3.0 FT.

EFFECTIVE GRAVEL DEPTH 2.0 FT. TOTAL LENGTH 4x60' FT. (240' Total)

NUMBER OF TRENCHES 4 ONE SIDE/L/BOTTOM AREA 720 SQ. FT.

DRYWALL INSIDE DIAMETER N/A FT. EFFECTIVE DEPTH BELOW INLET N/A FT.

ABSORBENT AREA N/A SQ. FT.

REMARKS: 5/18/00 House connection made. Trenches within staked septic area. Everything looks O.K. O.K. to cover. Installer attempted to run trenches toward rear of house but was deterred by large rock. Well line found crossing part of easement. Cannot locate any source. (BB) (Topo may not be same as indicated on plots.)

DATE SYSTEM APPROVED 5/18/00 INSPECTOR B. Baker

8/6/99
1130

APPLICATION

PERCOLATION TESTING

A 5/2016

P _____

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

RE-PERC
FOR HOUSE SITE-
REVIEW OK (MR)

DISTRICT _____

DATE 7/19/99

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 WILLIAM K FLANIGAN & LESLIE W FLANIGAN

ADDRESS 4942 BRAMHOPE LANE PHONE 410-461-7864

AGENT OR PROSPECTIVE BUYER ELLICOTT CITY, MD 21043 NANTUCKET HOMES/DORSEY

ADDRESS 13090 OLDFREDERICK RD PHONE 410-442-8200

PROPERTY LOCATION: SHKESVILLE, RD 21784 ATTN: LAVON THAXTON
410-531-4847

SUBDIVISION FOX CHASE LOT NO. 3

ROAD AND DESCRIPTION CORNER OF BRIGHTON DAM RD & NICHOLS

TAX MAP _____ PARCEL # _____

SIZE OF LOT 4.89 ACRES TYPE BLDG. RESIDENTIAL
(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.

William K Flanigan
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

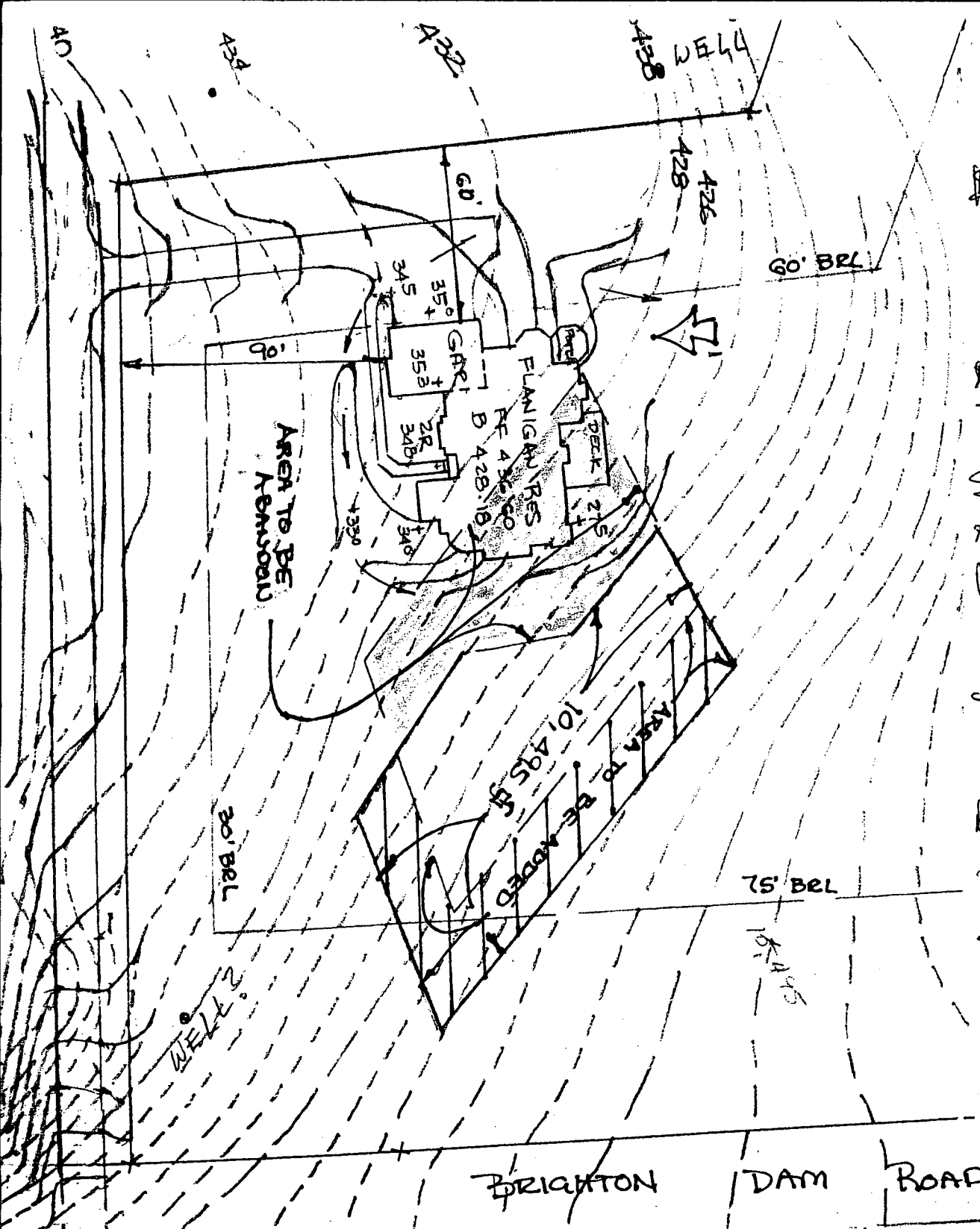
HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING 8/12/99 PERC OK, HOLD FOR PLAT (MR)

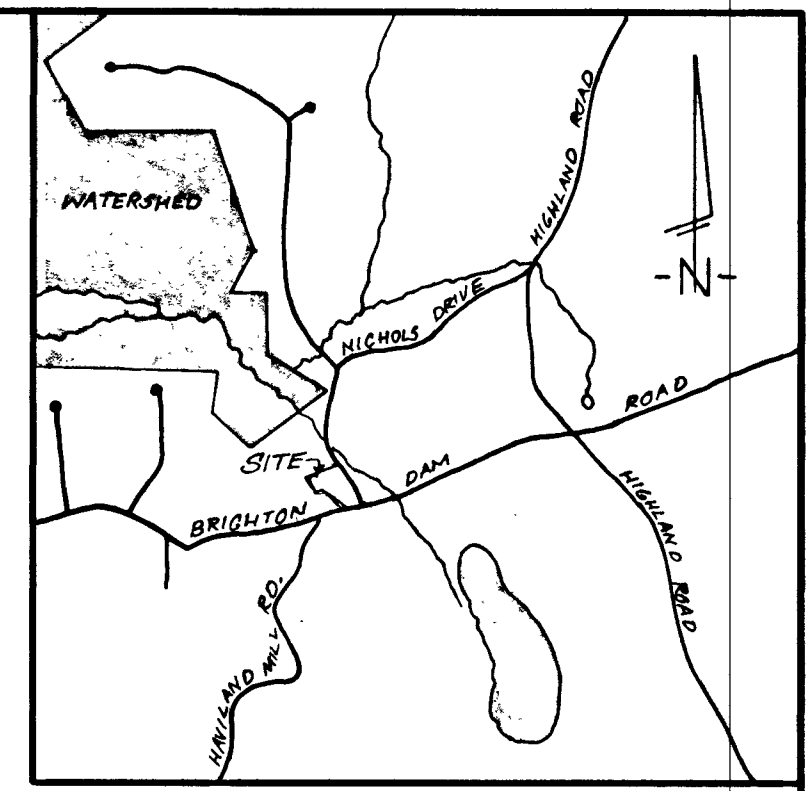
PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

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

THIS IS NOT A PERMIT



7/15/99
 OFFICE VISIT BY LAVON
 OF (PHIL) DORSEY BUILDERS
 RE: ADJUSTMENT AS SHOWN;
 BLDG WAS ADVISED ADJ.
 TOWARD COMMON DRIVE NOT
 SUITABLE DUE TO WELL (EX.);
 ADJ. TOWARD POND PREVIOUSLY
 CAUTIONED AGAINST (GS, 10/26/98);
 DOWNHILL ADJ. MAY BE OK,
 TESTING REQ'D; WET
 SEASON NOT BELIEVED TO
 BE REQ'D; TENTATIVE TEST
 DATE OF 8/6/99 @ 1:30 ASSIGNED
 SUBJECT TO RECEIPT OF FULL
 PERC PROPOSAL + CW REVIEW
 M.R.



LEGEND

CONTOUR INTERVAL	2 FT.
EXISTING CONTOUR	340
PROPOSED CONTOUR	348
DIRECTION OF DRAINAGE	→
WALK OUT BASEMENT	W.O.B.
SPOT ELEVATION	+78.4
LIMIT OF DISTURBED AREA	LOD

Topo. May not Conform to Indicated

GENERAL NOTES

1. TOPO WAS TAKEN FROM PLANS PREPARED BY
2. LENGTH OF TRENCHES TO BE DETERMINED AT TIME OF PERMIT ISSUANCE.
3. DISTURBED AREA: 22,750 S.F.
4. BY COPY OF THIS PLAN THE HO. CO. HEALTH DEPT. ACCEPTS THIS MODIFICATION TO THE RECORDED SEWAGE DISPOSAL EASEMENT.
5. RECORDED PLAT NO. 9979 ON 7/16/1991.

CLARK • FINEFROCK & SACKETT, INC.
ENGINEERS • PLANNERS • SURVEYORS

7135 MINSTREL WAY • COLUMBIA, MD 21045 • (410) 381-7500 BALT. • (301) 621-8100 WASH.

DESIGNED J.M.E.	SITE DEVELOPMENT, SEDIMENT AND EROSION CONTROL PLAN LOT 3 FOX CHASE TAX MAP 34 PARCEL 172 FIFTH (5th) ELECTION DISTRICT HOWARD COUNTY, MARYLAND	SCALE 1" = 50'
DRAWN K.B.		DRAWING 1 of 1
CHECKED J.M.E.		JOB NO. 99-121
DATE 8-25-99		FILE NO. 99-121
FOR: DORSEY BUILDERS, Inc. 13090 OLD FREDERICK ROAD SYKESVILLE, MD 21784		

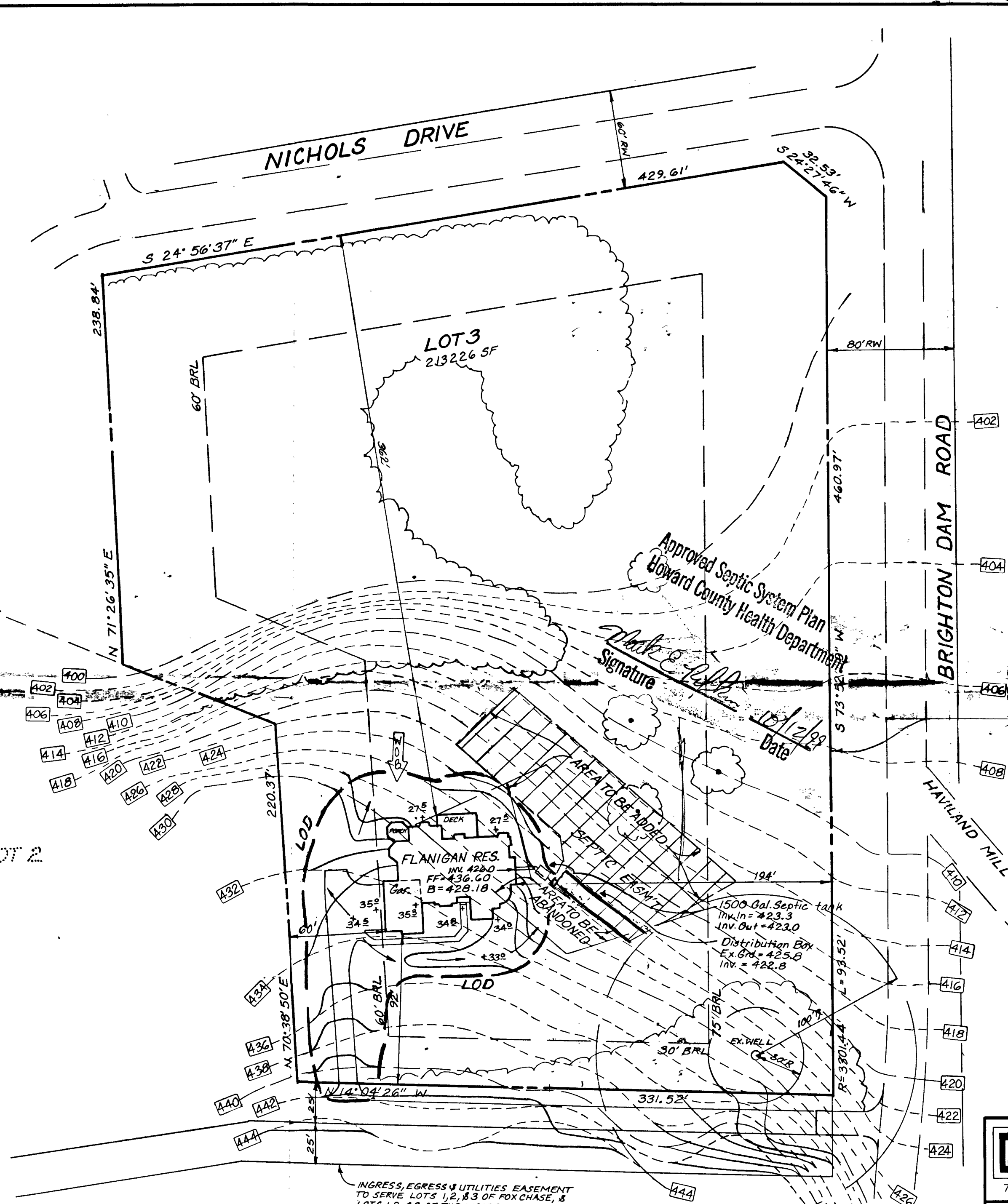
Total linear feet of trench required 240 feet

Width of trench(es) 3 feet

Depth of trench(es) 5 feet

Depth of stone required below distribution pipe 2 feet

INGRESS, EGRESS & UTILITIES EASEMENT TO SERVE LOTS 1, 2, & 3 OF FOX CHASE, & LOTS 1, 2, & 3 OF THE WOODS.



LOT 2

LAND DEDICATED TO HOWARD COUNTY, MD FOR THE PURPOSE OF A PUBLIC ROAD (36159.8)



HOWARD COUNTY HEALTH DEPARTMENT

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

August 12, 1999

William and Leslie Flanigan
4942 Bramhope Lane
Ellicott City, MD 21043

RE: PERCOLATION TEST RESULTS
A 512016
Adjustment to Previously Platted Easement
Fox Chase, Lot 3
Brighton Dam Road

Dear Mr. and Mrs. Flanigan

Percolation testing conducted August 6, 1999 on the above referenced property indicated satisfactory soil conditions. 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.

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.

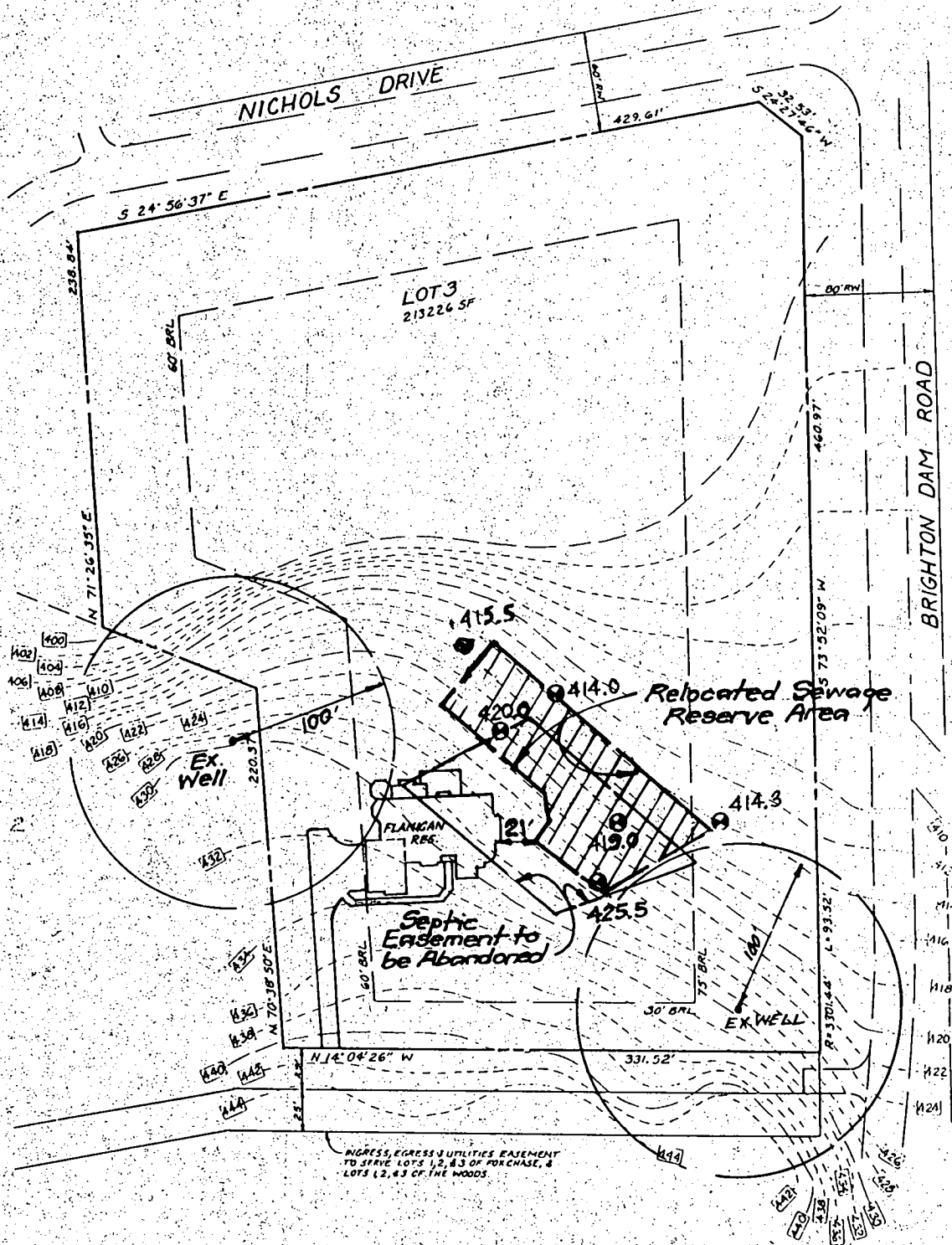
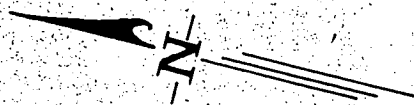
Water and Sewerage Program

MR

Enclosures

cc: Nantucket Homes/Dorsey
Clark, Finefrock and Sackett
File

PERCOLATION CERTIFICATION
 PLAT 9979
 LOT 3
FOX CHASE
 Tax Map 34 Parcel 172
 5th Election District
 HOWARD COUNTY, MARYLAND



//// This Area designates a private sewage reserve area of 10,000 sq. ft. as required by the Maryland State Department of the Environment for individual sewage disposal. Improvements of any nature in this area are restricted until public sewage is available. These easements shall become null and void upon connection to a public 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.

The Lots shown hereon comply with the minimum ownership width and lot areas as required by the Maryland State Department of the Environment.

Percolation areas and water wells for adjoining lots have been shown where pertinent.

APPROVED: for Private Water and Private Sewage Systems.

Dorey Builders, Inc.
 COUNTY HEALTH OFFICER MR. DATE 10/13/89

FOR: DORSEY BUILDERS, INC.
 13090 Old Frederick Road
 Sykesville Md. 20814

CLARK, FINEFROCK & SACKETT, INC. ENGINEERS · PLANNERS · SURVEYORS 7135 MINSTREL WAY COLUMBIA, MARYLAND 21045 TELEPHONE: BALT. (410)381-7500 · WASH. (301)621-8100	DRAWN BY: K.B.	DATE: 8-20-99	SCALE: 1"=100'
	CHECKED BY: J.M.E.	JOB NO.: 99-121	FILE NO.: 99-121-L
	DESIGNED BY: J.M.E.		

B 1 **0066** SEQUENCE NO. (DP USE ONLY)
 1 2 3 4 5 6
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

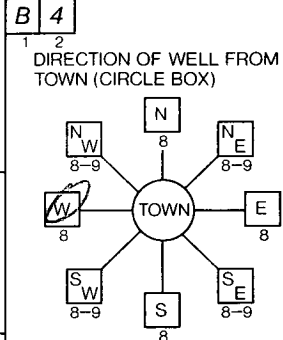
STATE OF MARYLAND
 APPLICATION FOR PERMIT TO DRILL WELL
 please print or type

STATE PERMIT NUMBER
HD-88-1905
 70 fill in this form completely 79

Date Received (APA) **050891**
 OWNER INFORMATION
 Demmitt RICHARD
 PO Box 208
 CLARKSVILLE MD 21029

B 3 LOCATION OF WELL
 HOWARD
 FOXCHASE
 SECTION 44 46 LOT 48 50
 CLARKSVILLE
 MILES FROM TOWN (enter 0 if in town) 3 1/2 MI

DRILLER INFORMATION
 Joseph E. Magee
 Joseph E. Magee WELL DRILLING
 5512 Ridge Rd. Mt. Airy, Md. 21771
 Signature: Joseph E. Magee Date: 5/6/91



Brighton Dam Road
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 DISTANCE FROM ROAD 865 FT

B 2 WELL INFORMATION
 APPROX. PUMPING RATE (GAL. PER MIN.) 5
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)
 HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
 INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
 PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
 TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
 Howard COUNTY NAME #46475 COUNTY NO.
 STATE SIGNATURE DATE ISSUED 053191
 CO SIGNATURE Wade E. Riffin 11/30/91
 NORTH GRID 497000 EAST GRID 0803000

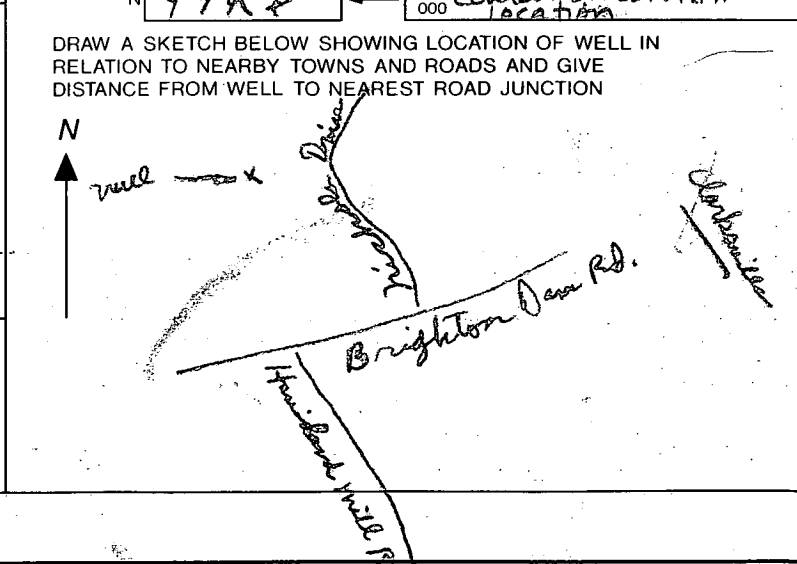
APPROXIMATE DEPTH OF WELL 204 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH

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

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 80X3
 N 49X7
 8/12/91 9:130
 1 ft above grade
 47 ft casing
 40 ft open hole
 13 bags cement
 JENadeau could not confirm location

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
 THIS WELL WILL DEEPEN AN EXISTING WELL
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)



Not to be filled in by driller (OEP USE ONLY)
 APPROP. PERMIT NUMBER GAP
 FORCE MR PERMIT No. HD-88-1905

SPECIAL CONDITIONS

**HOWARD COUNTY
PERMIT APPLICATION**

PERMIT NUMBER

300124775

Building Address 13742 Brighton Dam Road
Clarksville, MD. 21029
Suite/Apt. # _____ SDP/WP/Petition #: _____
Census Tract 6051.0 Subdivision For Chase
Section _____ Area _____ Lot 3
Tax Map 34 Parcel 412 Grid 41
Zoning RR-Map Map Coordinates 13,119 Lot size _____

Property Owner's Name William Flanigan
Address 13742 Brighton Dam Road
City Clarksville State MD Zip Code 21029
Home Phone 410 461 7864 Work Phone 202 429 4671
Applicant's Name & Mailing Address, (if other than stated hereon): _____
Phone _____ Fax _____

Existing Use Single Family Dwelling
Proposed Use Underground Propane Tank
Estimated Construction Cost \$ 2,000.00
Description of Work Bury a 1,000 Gallon U.G.
Propane Tank in accordance to NFPA #58
+ Local Code

Contractor Company Suburban Propane
Contact Person Mike DeVincent
Address 31 Deerwood Circle P.O. Box 1766
City Rockville State MD Zip Code 20850
License No. _____
Phone 301 251 0606 Fax 301 251 0608

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

Engineer or Architect Company _____
Contact Person _____
Address _____
City _____ State _____ Zip Code _____
Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

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

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

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.

Michael A. DeVincent
Applicant's Signature
Residential Energy Representation
Title/Company

Michael A. DeVincent
Print Name
6/12/00
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 DPZ		
State Highways		
Building Official		
Dev. Engineering DPZ	<u>6/20/00</u>	<u>Mike Rafferty</u>
Health		
Fire Protection		

DPZ SETBACK INFORMATION
Front: _____
Rear: _____
Side: _____
Side St. _____
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>
Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>
Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>
Lot Coverage for New Town Zone _____
SDP/Red-line approval date _____ Accepted by _____

PROPERTY ID#	72932
Filing fee	\$ 149
Permit fee	\$ _____
Excise tax	\$ _____
Sub-total paid	\$ _____
Add'l permit fee	\$ _____
TOTAL FEES	\$ _____
Balance due	\$ _____
Check #	_____
Validation #	_____

Is Sediment Control approval required prior to issuance?
YES NO

CONTINGENCY CONSTRUCTION START:
ONE STOP SHOP:

4/10/00 Am

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043
461-9933

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation
Replacement

Receipt # _____
Date _____

Name of Installer William T Cumberland

Telephone 410 489 4457

License Number 7979

Certified Well Pump Installer Well Driller Registered Plumber

Name of Property Owner Nantucket Homes Telephone _____

Subdivision Fox Chase Lot # 3 Well Tag # HO-88-1905

Site Address 13742 Brighton Park Rd

Pump

- 1. Type
 - a. Deep well jet
 - b. Shallow well jet
 - c. Submersible
- 2. Make _____
- 3. Model # _____
- 4. Capacity _____ GPM
- 5. Pump exceeds well capacity Yes No

Motor

- 1. Horsepower 3/4
- 2. RPM _____
- 3. Voltage _____
 - a. 110 _____
 - b. 220

Pitless Adapter

- 1. Make _____
- 2. Model # _____
- 3. Depth _____

- 6. If Yes, is low pressure cutoff switch installed? Yes No
- 7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors Cable guards Other _____

Tank

- 1. Capacity 40 gallon
- 2. Pressure relief valve? yes

Piping

- 1. Type Plastic
- 2. Size _____
- 3. NSF and/or BOCA Code approved
- 4. Depth of supply line _____

Well data

- 1. Depth 3.25 ft.
- 2. Yield 7.5 GPM
- 3. Static water level 36 ft.
- 4. Will water supply be disinfected by installer? no

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

4/10/00 - WPI OK (SRH) Signature of Applicant: [Signature]

Date: 3/1/00

Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.

HD-215 Called Builder & discussed that well casing must be 8" above finished grade

C1 **4562** SEQUENCE NO. (DENV USE ONLY)
 1 2 3 4 5 6
 (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 PRINT OR TYPE

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
 COUNTY NUMBER **A 46475**

ST/CO USE ONLY
 DATE Received: [] [] [] [] [] []
 DATE WELL COMPLETED: **081291**

Depth of Well
 22 **325** 26
 (TO NEAREST FOOT)

PERMIT NO.
 FROM PERMIT TO DRILL WELL
HO 88-1905

OWNER **Heimitt Richard**
 last name first name
 STREET OR RFD **Brighton Dam Rd** TOWN **Clarksville**
 SUBDIVISION **FOX CHASE** SECTION [] LOT **X 3**

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	
SAND	0	44	
GRAY MICACIOUS ROCK	44	325	

GROUTING RECORD
 WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**
 TYPE OF GROUTING MATERIAL
 CEMENT **CM** BENTONITE CLAY **BC**
 NO. OF BAGS **13** NO. OF POUNDS **1222**
 GALLONS OF WATER **75**
 DEPTH OF GROUT SEAL (to nearest foot)
 from **0** ft. to **40** ft.
 (enter 0 if from surface)

C 3
PUMPING TEST
 HOURS PUMPED (nearest hour) **3**
 PUMPING RATE (gal. per min. to nearest gal.) **705**
 METHOD USED TO MEASURE PUMPING RATE **Bucket**
 WATER LEVEL (distance from land surface)
 BEFORE PUMPING **38**
 WHEN PUMPING **139**
 TYPE OF PUMP USED (for test)
A air **P** piston **T** turbine
C centrifugal **R** rotary **O** other (describe below)
J jet **S** submersible

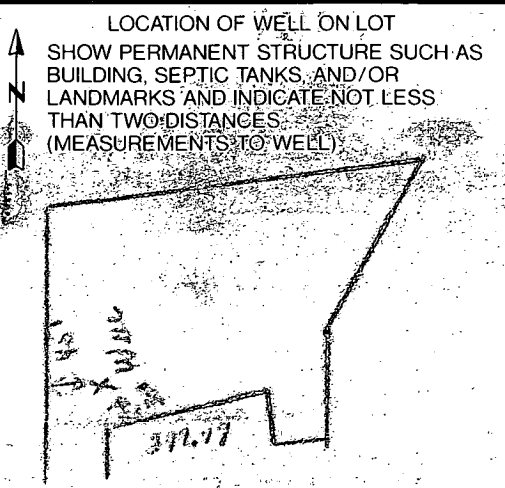
CASING RECORD
 casing types insert appropriate code below
ST **CO**
 STEEL CONCRETE
PL **OT**
 PLASTIC OTHER
 MAIN CASING TYPE **ST** Nominal diameter top (main) casing (nearest inch) **6** Total depth of main casing (nearest foot) **47**

PUMP INSTALLED
 DRILLER WILL INSTALL PUMP YES **NO**
 IF DRILLER INSTALLS PUMP THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE
 TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE:
 CAPACITY: GALLONS PER MINUTE (to nearest gallon) [] [] [] [] [] []
 PUMP HORSE POWER [] [] [] [] [] []
 PUMP COLUMN LENGTH (nearest ft.) [] [] [] [] [] []
 CASING HEIGHT (circle appropriate box and enter casing height)
+ above } LAND SURFACE [] (nearest foot)
- below }

OTHER CASING (if used)
 diameter inch [] [] depth (feet) from [] to []
EACH CASING
 screen type or open hole insert appropriate code below
ST **BR** **HO**
 STEEL BRASS OPEN HOLE
PL **OT**
 PLASTIC OTHER

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

C 2
 DEPTH (nearest ft.)
 1 **HO** **46** **325**
 2 [] [] [] [] [] []
 3 [] [] [] [] [] []
 SLOT SIZE 1 [] 2 [] 3 []
 DIAMETER OF SCREEN [] [] [] [] (NEAREST INCH)
 from [] to []



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 IDENT. NO. **938**
 DRILLERS SIGNATURE **Joseph P. Williams**
 (MUST MATCH SIGNATURE ON APPLICATION)
 SITE SUPERVISOR (sign of driller or journeyman responsible for sitework if different from permittee)

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

APPLICATION

PERCOLATION TESTING

A 46475

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

DISTRICT 5

DATE 10-10-90

Preview May need wet season.
Pond Lot-1 is quarry, but should stay 200ft away anyhow. - Is close to reservoir? has similar water exchange as stream wells to be drilled before final plat approval - History of unsuccessful wells near front of Brighton Pines. cw

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Frances Ehlers - Estate

ADDRESS Nantucket Homes/Dorsey, Inc. PHONE _____

PROSPECTIVE BUYER Richard Demmitt

ADDRESS Po Box 209 Clarisville Md 21029 PHONE 531-5539

PROPERTY LOCATION:

SUBDIVISION ~~EHLER Property~~ Fox Chase LOT NO. X 3

ROAD AND DESCRIPTION 13742 Brighton Dam & Nichols Drive

TAX MAP 34 PARCEL # 50

SIZE OF LOT 5.6 TYPE BLDG. SFD - 4Bm
(SINGLE FAMILY DWELLING OR COMMERCIAL)

LOCAL PERMIT SIGNED
AND RETURNED 10-2-99
Serial # B 10120283
SFD - 4Bm

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.

Richard Demmitt
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

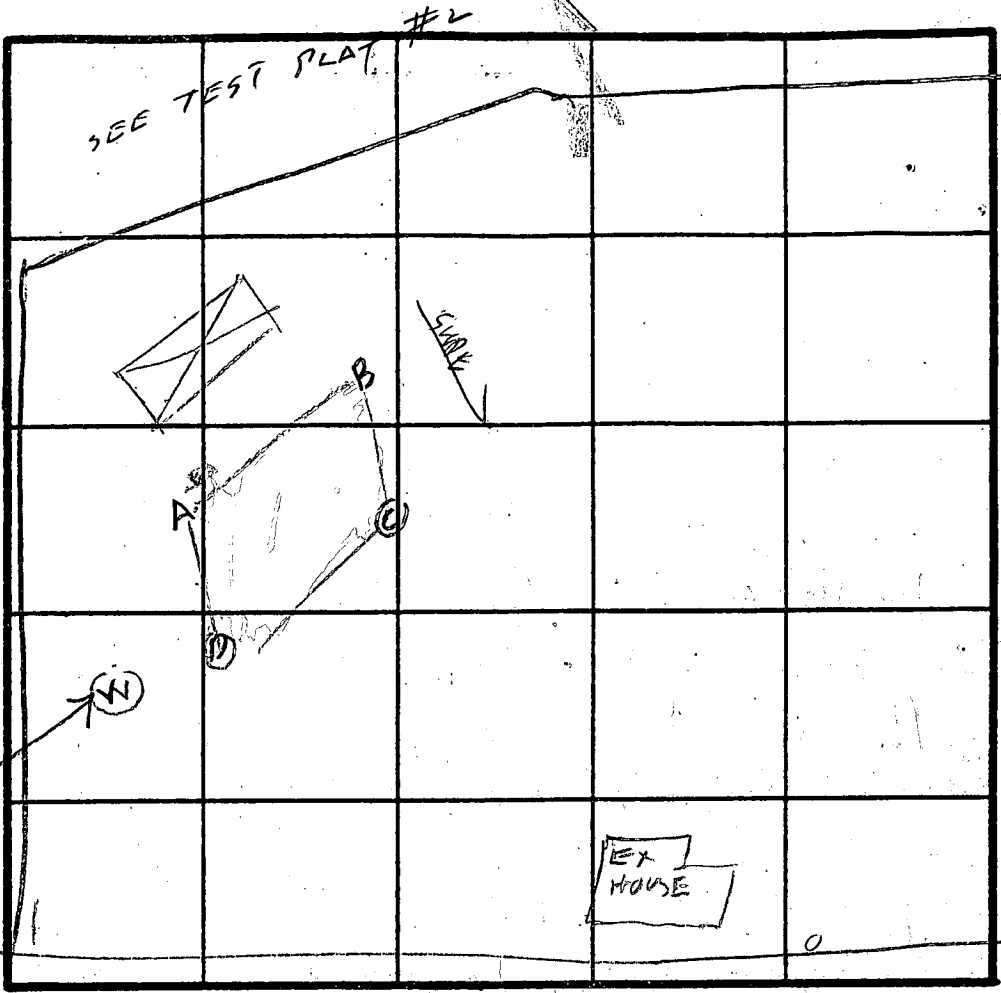
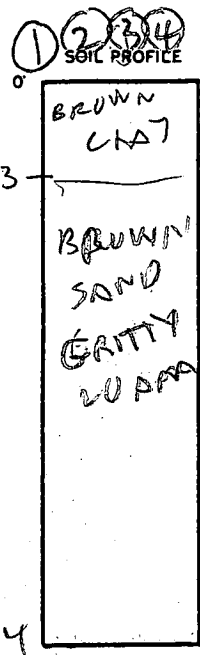
REASONS FOR REJECTION OR HOLDING 10/29/90 PERC DR FOR NEW HOUSE, OLD HOUSE MUST BE RAZED & OLD WELL & SEPTIC MUST BE RAZED - IN RE FORG NEW HOUSE BUILT R/H WAITING FOR PERC CERT PLAT RH

THIS IS NOT A PERMIT

10/26/90
10/23/90
10/00

HD-216

Lot
A46475



$\bar{x} = 8$
210 BR
Inlet 4'
Bottom 8'

WELL SITE TO BE CHANGED

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
1/12/90	C	3.5	1056	1101	1101	1102	7
		12.5	OK				
1/20/90	D	4.5	1059	1102	1102	1110	8
		14	OK				
	A	4	1103	1109	1109	1125	76
		14	OK				
	B	3.5	1114	1115	1115	1117	2
		6.5	1117	1115	1115	1121	6
		12.5	OK				

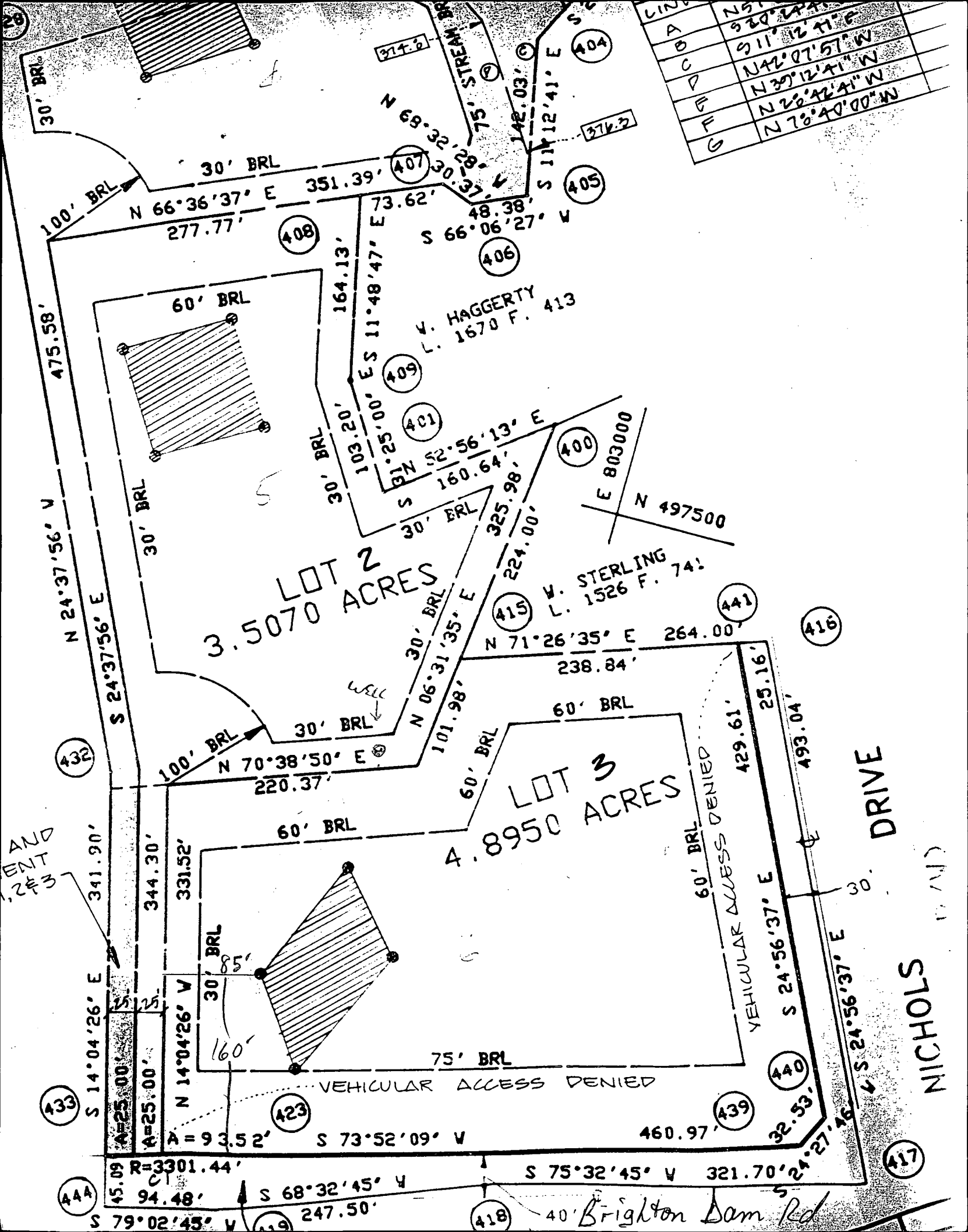
REMARKS: Hole ABCD dug as per Test Plat #2

TYPE OF SOIL: H.C. 10% A

TESTED BY: R. HODGES

ALSO PRESENT: R. DEMITT

LINE	NS	EA
A	920' 24" W	
B	911' 12" W	11' 12" E
C	912' 07" W	57' W
D	N 42° 07' 51" W	
E	N 39° 12' 41" W	
F	N 22° 42' 41" W	
G	N 7° 40' 00" W	



LOT 2
3.5070 ACRES

LOT 3
4.8950 ACRES

V. HAGGERTY
L. 1670 F. 413

W. STERLING
L. 1526 F. 741

DRIVE

NICHOLS

40' Brighton Dam Rd

VEHICULAR ACCESS DENIED

VEHICULAR ACCESS DENIED

AND
ENT
243

R=3301.44'

S 79° 02' 45" W

S 68° 32' 45" W

S 75° 32' 45" W

S 24° 56' 37" E

S 24° 56' 37" E

S 24° 56' 37" E

S 24° 56' 37" E

S 24° 56' 37" E

S 24° 56' 37" E

S 24° 56' 37" E

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