

PERMIT

513677
P 15677

SEWAGE DISPOSAL SYSTEM

A-15085

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH

ISSUE DATE 7/10/2000

INDEXED 410-313-2640

APPROVAL DATE 7/21/00

04-324234

JIMMY BOONT CELL # 301-748-5206

Van Sant Plumbing & Heating

IS PERMITTED TO INSTALL ALTER

ADDRESS 3 N. Main Street, Mt. Airy, MD 21771

PHONE 301-829-0444

SUBDIVISION Warfield Estates III LOT NUMBER 7 ADDRESS 3428 Shady Lane

PROPERTY OWNER David M. Bernstein PROPERTY OWNER'S ADDRESS 14670 Rothgeb Dr., Ste. 201

Rockville, MD 20850

SEPTIC TANK CAPACITY 2 @ 1250 ea GALLONS 410-489-0010

PUMP CHAMBER CAPACITY _____ GALLONS *** TOP SEAMED SEPTIC TANKS REQUIRED ***

NUMBER OF BEDROOMS 4 *REVISED LOCATION PLAN? KEEP TANK(S)*

SQUARE FEET PER BEDROOM 240 *AS HIGH AS POSSIBLE BUT INSTALL*

LINEAR FEET OF TRENCH REQUIRED 320 *(SHALLOW) TRENCHES (4 @ 80) AS LOW ON RIGHT SIDE AS POSSIBLE, 7/11/00*

TRENCHES: Trenches to be 3 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 5 feet below original grade. 2 feet of stone below distribution box.

LOCATION: Limited septic area requires precise installation for maximum use of available area. Septic area to be cleared of all unnecessary brush and then staked out by surveyor (all 9 corners!). Septic contractor to request trench layout inspection prior to installation. Septic tank and pump pit to be located as per attached building permit site plan of this approval date. Distribution box and trench locations subject to field adjustment at sanitarian's direction.

* OBJECT OF PRE-INSTALLATION INSPECTION IS TO LAYOUT 2 SYSTEMS OF EQUAL OR NEARLY EQUAL SIZE THAT MAKE MAXIMUM USE OF AVAILABLE AREA REGARDLESS OF TOTAL TRENCH LENGTH. THEN INSTALL ONE SYSTEM. (DUNG, SOB ABOVE SPECIFICATION DATED 7/11/00)

PLANS APPROVED Craig Williams

DATE 4/24/2000

PERMIT VOID AFTER 2 YEARS

NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS

NOTE: TOP OF SEPTIC TANKS ARE TO BE NO DEEPER THAN 3.0 FEET BELOW FINISH GRADE

NOTE: WATERTIGHT SEPTIC TANKS REQUIRED

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

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

NOTE: NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH UNLESS SPECIFICALLY AUTHORIZED

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

NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

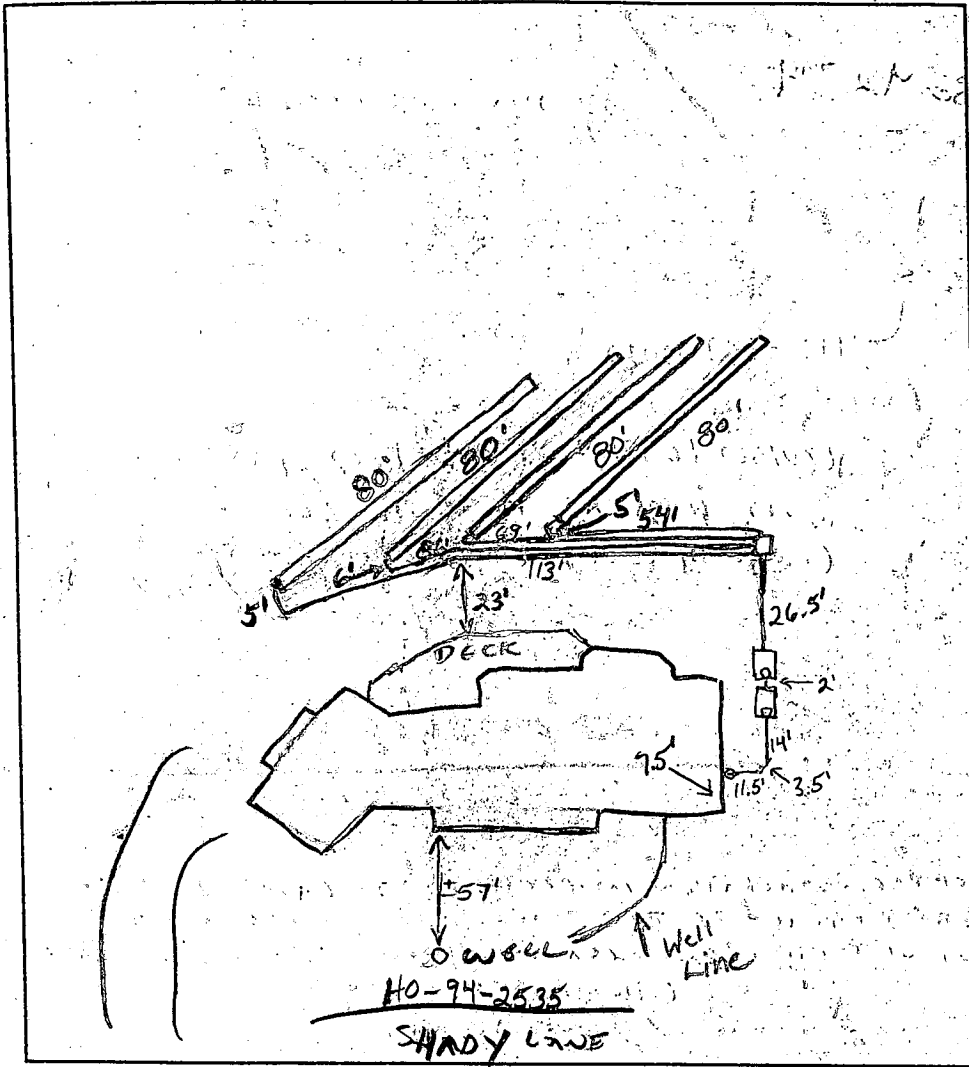
NOTE: IF PUMPED SEPTIC SYSTEM REQUIRED, (1) SEPTIC PUMP DETAIL TO BE PROVIDED BY INSTALLER PRIOR TO ISSUANCE OF SEPTIC PERMIT (2) PUMP PERFORMANCE TEST IS NECESSARY PRIOR TO HEALTH DEPARTMENT APPROVAL OF SEPTIC PERMIT

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
CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

7/18/00
10:00
7/21/00 10:00

PS13677

NOT TO SCALE



TRENCH DATA	
TRENCH WIDTH	3.0
TRENCH INLET DEPTH	3.0
TRENCH BOTTOM DEPTH	5.0
DEPTH OF STONE	2.0
NUMBER OF TRENCHES	4
TOTAL TRENCH LENGTH	320'
ABSORBENT AREA	960 sq. ft.
DISTRIBUTION BOX LEVEL	OK
BAFFLE IN DISTRIBUTION BOX	Yes

SEPTIC TANK DATA	
SEPTIC TANK	2-1250 TS GALLONS
MANHOLE RISER	None
6 INCH INSPECTION PORT	Two
PUMP CHAMBER DATA	
PUMP CHAMBER GALLONS	_____
MANHOLE RISER	_____
ALARM	_____
PUMP PERFORMANCE TEST	_____

PRE-CONSTRUCTION INSPECTION: SEE REVISED LOCATION SPECIFICATIONS ON OTHER SIDE. 7/11/00 CW

INSPECTION COMMENTS: 7/18/00 House connection made. O.K. to cover tanks. To install 4-80' trenches with 6' edge to edge spacing. Trenches are to start at very beginning of easement in driveway area and are to run towards rear lot line (BB) 7/19/00 WPI ok. First trench started. Trenches not to be deeper than 5.0' (BB) First 2 trenches done. O.K. to cover. Third trench dug. Six foot spacing between trenches. To leave beginning and end of last 2 trenches open. (BB)

INSPECTOR B. Baker DATE SYSTEM APPROVED 7/21/00

7/21/00 Finished last two trenches. System satisfactory. (BB)

**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: VAN SANT PLBG Telephone #: 301-829-0444
Address: 3 N MAIN ST
MT AIR, MD

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer

License # and name of individual responsible for the field installation:
Name (Print): AL A VAN SANT License#: 1467

*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: DAVID BENNETT Telephone #: 301 370-1825
Subdivision: Warfield Estates Lot #: 7 Well Tag #: HO-99-2535
Site Address: 34885th Cir. Glenwood MD

Submersible Pump Data	Pitless Adapter	Well Cap and Electric Conduit
Make: _____	Make: <u>AMERICAN</u>	Two piece watertight cap: <input checked="" type="checkbox"/>
Model #: _____	Model #: <u>610X</u>	Screened, vented well cap: <input checked="" type="checkbox"/>
Pump Capacity _____ GPM	Depth: <u>42</u> (36" min)	Cap secured to casing: <input checked="" type="checkbox"/>
Well Yield: _____ GPM	NSF approved: <u>yes</u>	Conduit min 18" B.G.: <input checked="" type="checkbox"/>
Depth of well encountered at time of pump installation: _____ (feet)		Conduit secured to well cap: <input checked="" type="checkbox"/>

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

Piping to house	House Connection
Type: <u>200PS</u>	PVC sleeved to undisturbed soil at wall penetration: <u>15ft</u>
PSI: _____ (160 psi min)	Approximate length of sleeve: <u>15ft</u>
Depth of supply line: <u>42</u> (36" min)	Sleeve caulked and sealed properly: <u>yes</u>

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.

Howard Van Sant Only Done well log trench and installation
Drum and installation drawings done by others
12-28-00
Signature of company representative responsible for installation date

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

Date Insp. Requested: 7/19/00 Date Insp. Approved: 7/19/00 (BB)SRK
Inspection Data: Pitless adapter and water supply line at least 36" below grade
Two piece cap installed and attached to casing securely
Elec. conduit extends at least 18" below grade/attached to cap properly
Safety rope installed inside of well casing
Correct well tag attached properly and casing 8" above finished grade
Water supply line sleeved adequately at house connection
Adequate grout observed below pitless adapter

APPLICATION

A 15085

P _____

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 4

DATE 12/31/69

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

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

PROPERTY OWNER Maple Hill Farms Associates

ADDRESS 9300 Fontana Ave., Seabrook, Md. 20801 PHONE _____

PROPERTY LOCATION:

SUBDIVISION Warfield Estates LOT NO. 7, Blk. B, Sec. 3

ROAD AND DESCRIPTION Shady Lane

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 160' x 272' x 120' x 61.06' x 226.11 TYPE BLDG. 3 or 4
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

SIGNATURE OF APPLICANT /s/ McClintock & Huster

APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

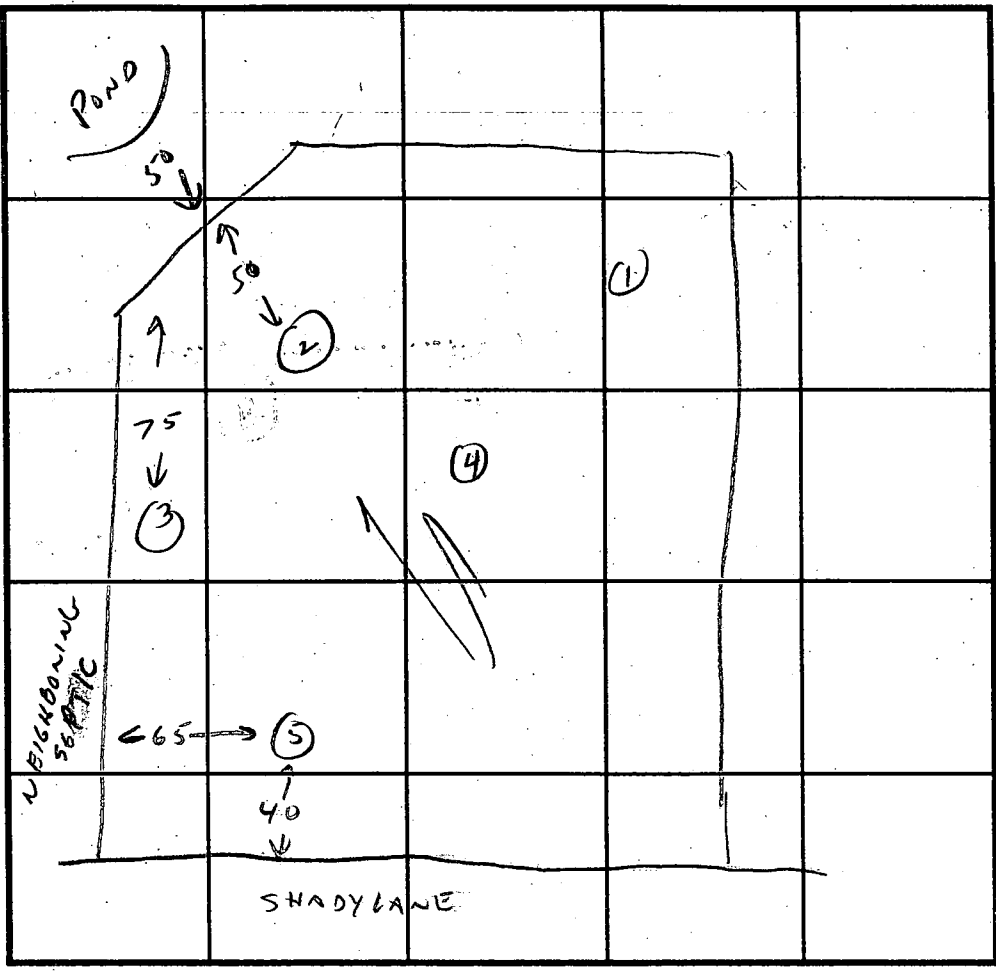
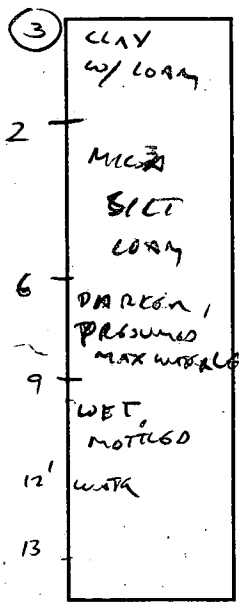
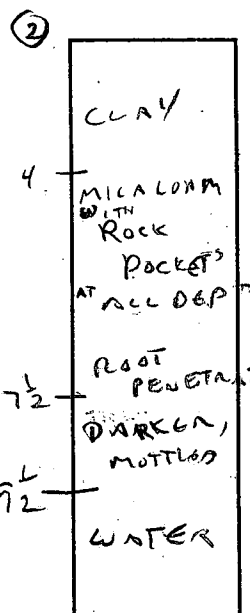
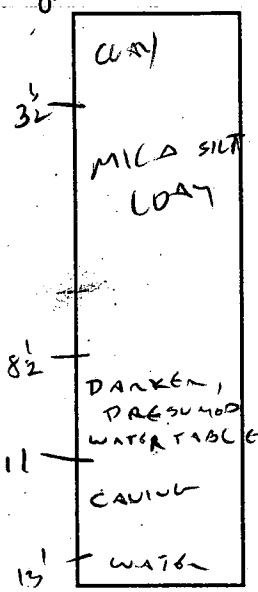
REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

A15085

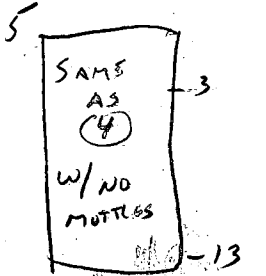
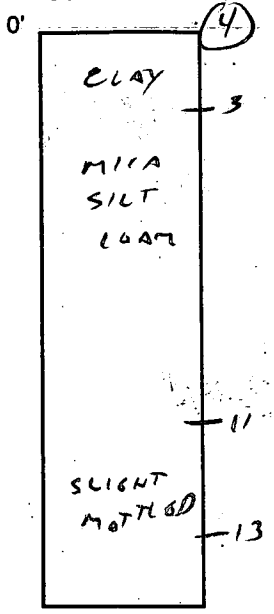
COUNTY #

SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE



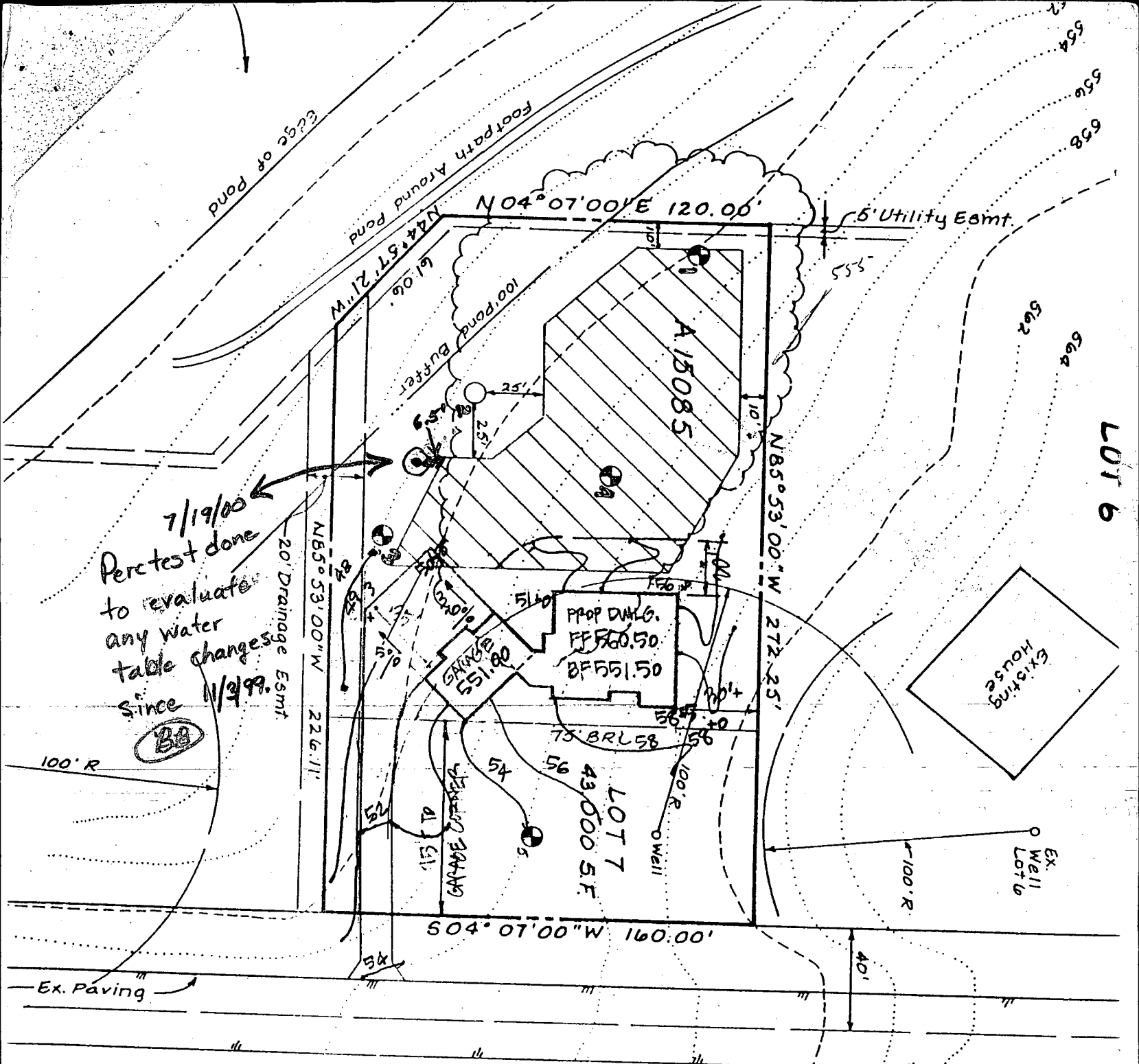
DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
11/3/99	1	3 1/2'	2:04	2:09	2:09	2:16	7 MIN	
	2	NOT SUITABLE - LESS THAN 4' "PERCABLE" SOIL BETWEEN CLAY & MAX. POTENTIAL WATER TABLE						
	3	VLS OK	2-6' ONLY					
	4	VLS OK	3-11'					
	5	VLS OK	3-13'					

REMARKS (2) FAILS, (3) QUESTIONABLE - CONVENTIONAL SYSTEM SHOULD ONLY BE LOCATED ON HIGHER PORTIONS OF LOT...

TESTED BY C. Wilbur ALSO PRESENT BOB NANNI - OWNER ROB FYOCK - EXCAVATOR

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 7 MIN TRENCH WIDTH 3

INLET DEPTH 3 MAXIMUM BOTTOM DEPTH 5 SQ. FT./BEDROOM 240



7/19/00
 Per test done
 to evaluate
 any water
 table changes
 since 11/2/99.

BB

SHADY LANE (EX. 80' R/W MINOR COLLECTOR ROAD)

7/19/00

3.8'	clay loam
	Sa loam
8.0-8.5'	Moist, Mottling
9.5'	Caving
11'	Water

Results similar to testing done by Craig Williams. Treatment area very close to unacceptable limits. Trenches cannot be installed any deeper than 5.0'. BB
 are unacceptable.

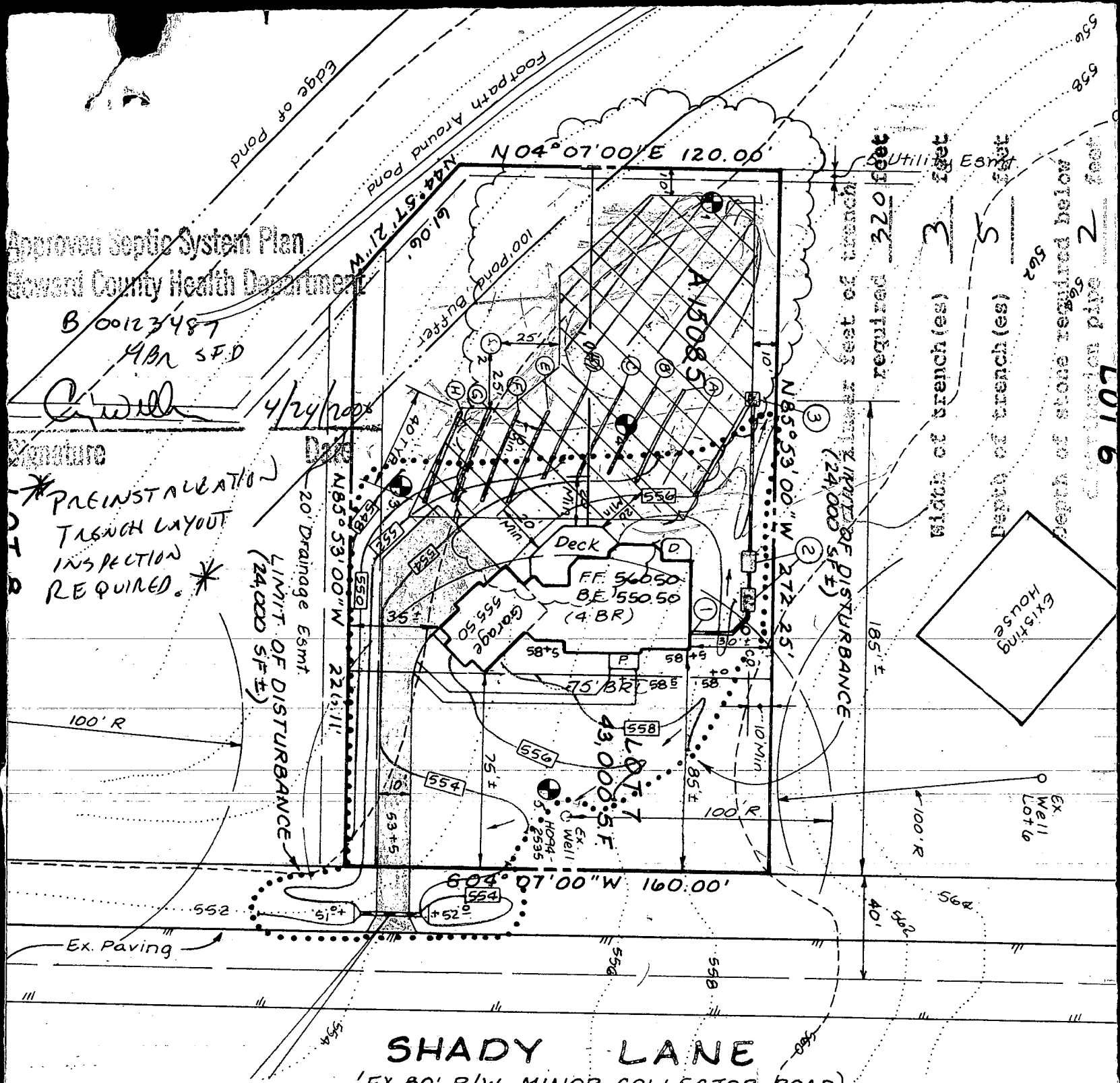
CONCEPT GRADING
 1"=50'
 1/16/00

Approved Septic System Plan
 Howard County Health Department

B/00123487
 L8/8/1100
 YBR SFD

Chandler
 4/24/2008

Signature
 *PREINSTALLATION
 TRENCH LAYOUT
 INSPECTION
 REQUIRED.*



SHADY LANE

(BY 80' R/W MINOR COLLECTOR ROAD)

SEWAGE SYSTEM DESIGN DATA:

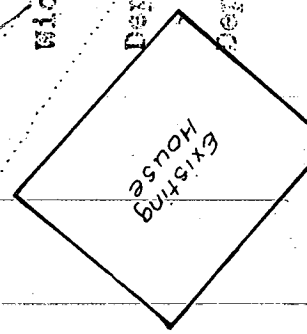
- Invert @ foundation wall: 555.50 *(1st Flr Service Only)
- Two (2) 1250 Gallon Septic Tanks in Series (Top Seamed)
 Provide Manhole To Finished Grade

Initial Tank	Secondary Tank
(A) Ex. ground @ top tank: 558.50	557.50
(B) Fin. grade over top tank: 558.50	557.50
(C) Invert In: 555.00	554.50
(D) Invert Out: 554.70	554.20
- Distribution Box: (Provide 8 Outlets Minimum)

(A) Ex. ground @ Top Box: 555.40
(B) Fin. grade over Top Box: 555.40
(C) Invert In: 552.90

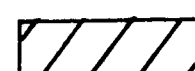
* Pump Req'd. for Bsmt Service

Utility Esm't
 required 370 feet
 width of trench(es) 3 feet
 Depth of trench(es) 5 feet
 Depth of stone required below
 50% pipe 2 feet
 50% pipe 2 feet



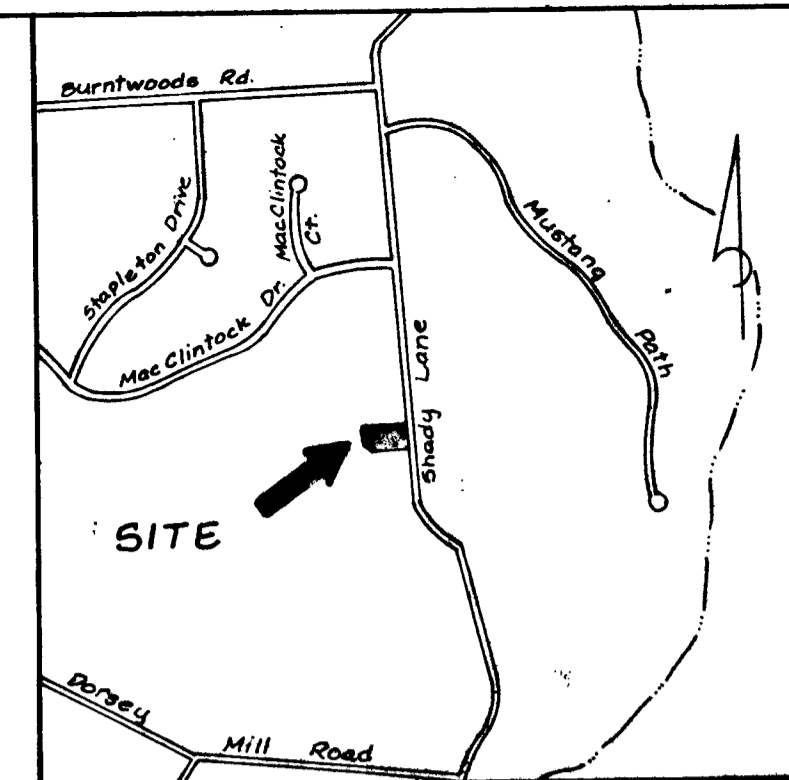
Ex. Well Lot 6

LOT 6

 THIS AREA DESIGNATES A PRIVATE SEWAGE ESMT. AS REQUIRED BY THE MARYLAND STATE DEPT. OF THE ENVIRONMENT FOR INDIVIDUAL SEWAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWAGE IS AVAILABLE. THESE EASEMENTS SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENTS INTO THE PRIVATE SEWAGE EASEMENT. RECORDATION OF A MODIFIED SEWAGE EASEMENT SHALL NOT BE NECESSARY.

LEGEND

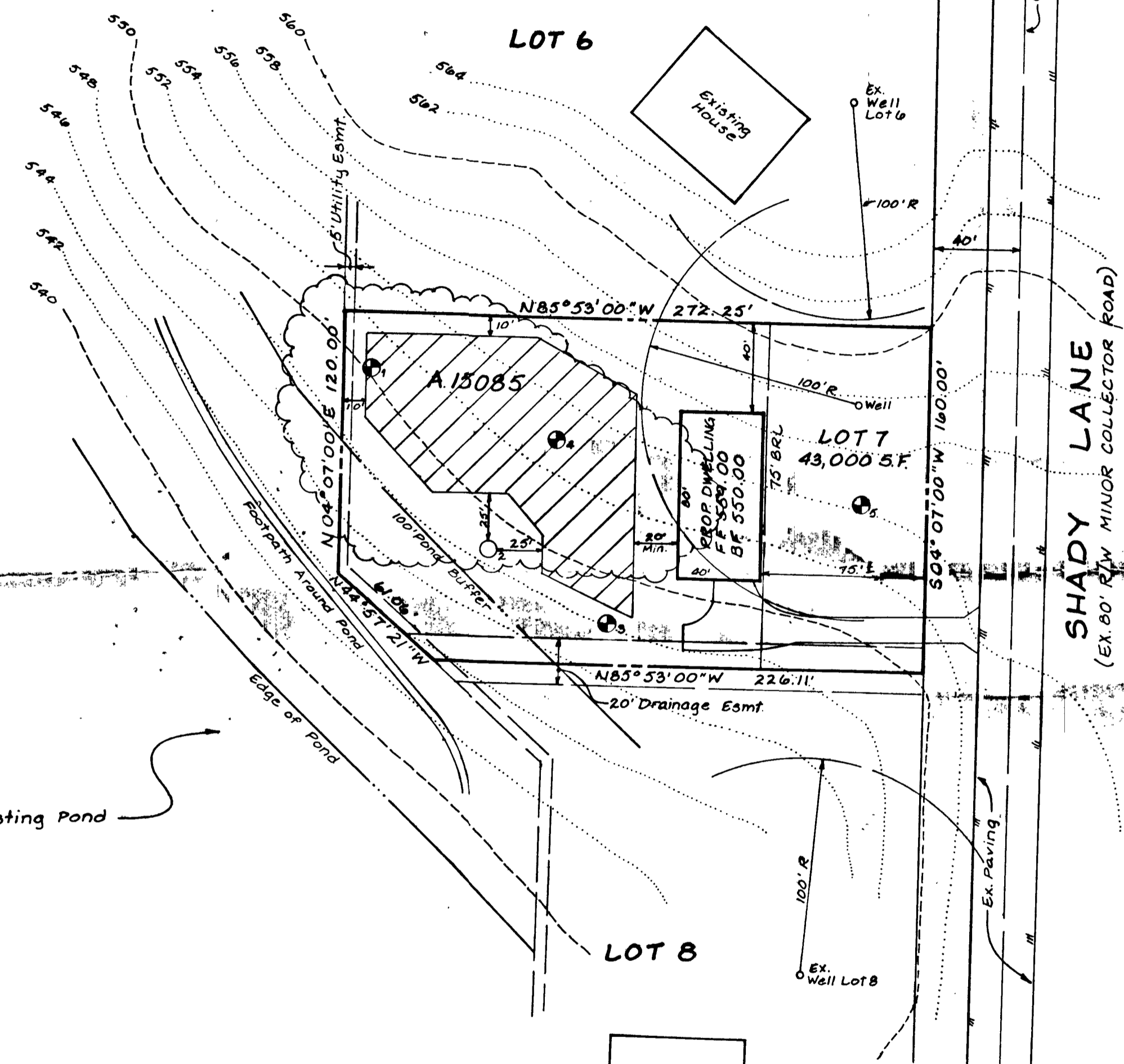
- PERCOLATION TEST / PASSED
- PERCOLATION TEST / FAILED



VICINITY MAP
SCALE: 1"=600'

NOTES:

1. EXISTING ZONING: RR (RURAL RESIDENTIAL).
2. PLAT REFERENCE: PLAT BOOK 18 FOLIOTT
3. TOTAL AREA OF LOT: 0.9871 AC±.
4. THE LOT SHOWN COMPLIES WITH THE MINIMUM LOT AREA AND OWNERSHIP WIDTH AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT.
5. EXISTING WELLS HAVE BEEN SHOWN WITHIN 100 FEET OF THE LOT WHICH MAY AFFECT THIS PROPOSAL.
6. THE LIMITS OF THE SEWAGE DISPOSAL EASEMENT APPROVED BY THIS PLAN CAN BE MODIFIED DEPENDENT ON THE PROPOSED DWELLING UNIT SUBMITTED WITH A BUILDING PERMIT APPLICATION.



Existing Pond

APPROVED: FOR PRIVATE WATER AND PRIVATE SEWERAGE HOWARD COUNTY HEALTH DEPARTMENT
Dino Matuzaj 12/13/99
 Howard County Health Officer Date

OWNER
 Robert Nannini
 316 Oak Park Lane
 Tigh Valley, Oregon 97063

LDE, INC.		
9250 Rumsey Road, Suite 108, Columbia, MD. 21045 (410) 715-1070 (301) 596-3424 (410) 715-9540 (Fax)		
Designed: BDB	PERCOLATION CERTIFICATION PLAT WARFIELD ESTATES SECTION 3	Scale: 1"= 50'
Drawn: STB	BLOCK B LOT 7 4th ELECTION DISTRICT HOWARD COUNTY, MD.	Drawing: 1 of 1
Checked: BDB		Job No. 99-070
Date: 12-99	Builder: BETHANY HOMES, INC. 14670 Rothgeb Drive Suite 201 Rockville, MD 20850 301-294-1964	File No.



HOWARD COUNTY HEALTH DEPARTMENT

November 10, 1999
Diane L. Matuszak, M.D., M.P.H., County Health Officer

Robert Nannini
316 Oak Park Lane
Tigh Valley, Oregon 97063

Re: Percolation test results
Lot 7 Block B Section 7
Warfield Estates
Shady Lane

Dear Mr. Nannini,

Percolation testing was conducted November 3, 1999 at the above referenced property. Test results were generally found to be satisfactory except for the lower locations. A copy of the test results is enclosed.

For further review, please submit a test certification plan to confirm the location of that area deemed suitable for septic system installation. It is recommended that the document be prepared by a registered engineer or land surveyor, and submitted within the next 60 days to allow field verification if necessary.

The document should be at a scale not smaller than 1" to 100', and should show property boundaries, wellsite, building location, test locations and a proposed sewage disposal area approximately 10,000 square feet in size, not closer than 100' to the high water limit of the pond. There should also be a statement certifying that the location of all wells and septic systems within 100' of property boundaries have been shown.

Please feel free to contact me at this office if you have any questions regarding documentation requirements or any other aspect of this evaluation.

Yours truly,

Craig Williams,
Sanitarian

encl.

cc: Mark Leone - Long and Foster
John Waby - LDE

✓ files

APPLICATION

A 15085

P _____

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 4

DATE 12/31/69

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

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

PROPERTY OWNER Maple Hill Farms Associates

ADDRESS 9300 Fontana Ave., Seabrook, Md. 20801 PHONE _____

PROPERTY LOCATION:

SUBDIVISION Warfield Estates LOT NO. 7, Blk. B, Sec. 3

ROAD AND DESCRIPTION Shady Lane

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 160' x 272' x 120' x 61.06' x 226.11 TYPE BLDG. 3 or 4
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

SIGNATURE OF APPLICANT /s/ McClintock & Huster

APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

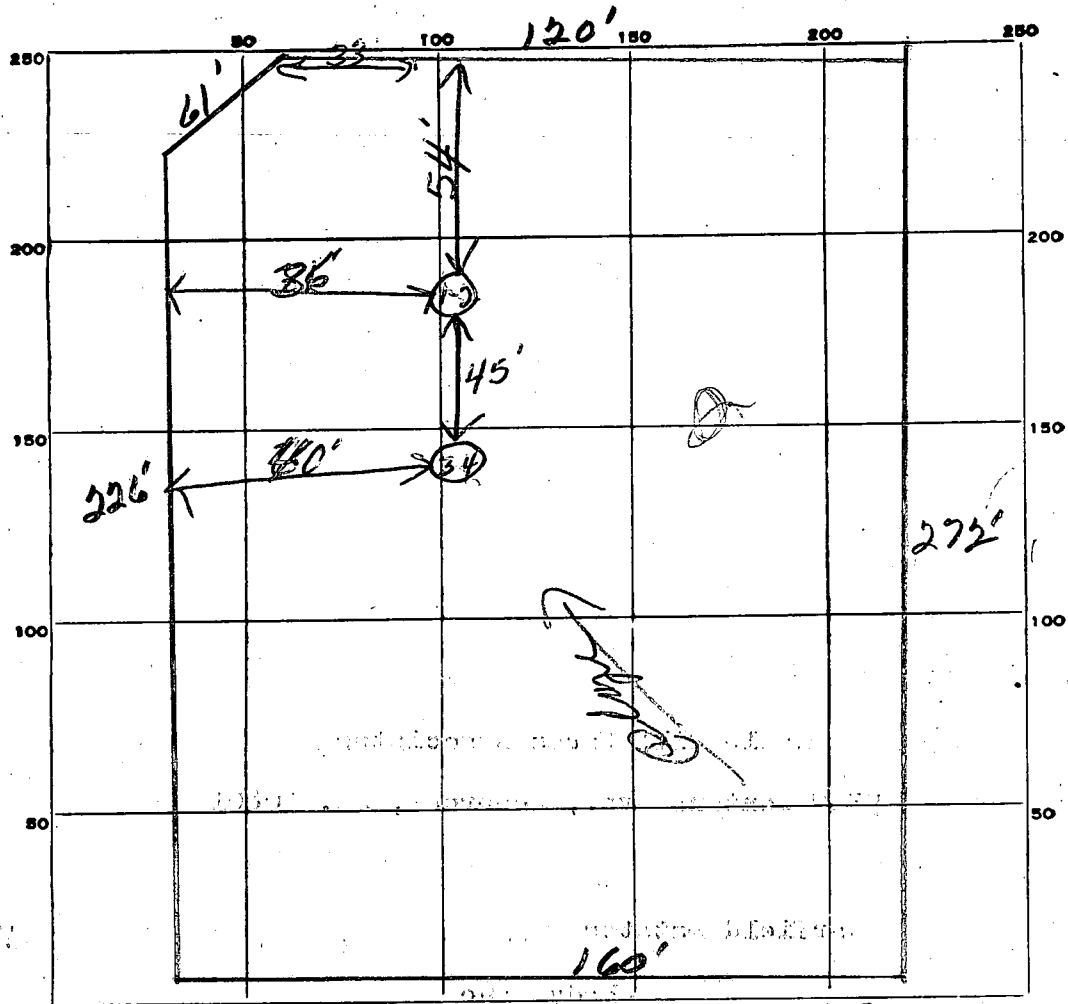
REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

180
 27
 54
 61
 44



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

shady Lane

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2/5/70	1	9'	200	205	205	210	5 min lot 7
	2	3'	200	203	203	206	3 min Blk B
	3	7'	202	212	212	217	5 min
	4	3'	202	213	213	218	5 min

lot 7
 Blk B
 Avg. 5 min
 inlet 3'

SOIL AUGER FINDING _____

TESTED BY JTC

REMARKS Holes have to be deeper



R6765T
NOV 2 1:30

HOWARD COUNTY HEALTH DEPARTMENT

Joyce M. Boyd, M.D., County Health Officer

June 25, 1993

Reply to:

LDB - JOHN
WAB

Mr. Robert Mannini
316 Oak Park Lane
Tigh Valley, Oregon 97063

RE: Percolation Test Application: A15085
Warfield Estates - Lot 7, Block B, Sec. III
Shady Lane
Owner: Robert Nannini

Dear Mr. Nannini:

On June 24, 1993, Anne Hruby, Realtor, met with me to discuss the status of the above referenced property. A copy of the original percolation test results is enclosed.

You will see that this property was tested and approved in 1970. At that time, septic system design standards were considerably different than today.

Additional testing is requested in order to establish better soil conditions and to provide increased septic reserve area in order that a septic system can be designed that is consistent with current standards.

No test fee would be required by this office, but you would be responsible for arranging the services of a backhoe to perform the necessary excavation.

Please feel free to contact me at this office to confirm plans, or to discuss any questions you may have relative to this matter.

Very truly yours, 1 800 - 801 - 2152

Craig Williams

Craig Williams, Program Director
Water and Sewerage Program

CIRCA 10/10 BOB LEONE - REALTOR ADVISED
TEST PLAN NEEDED DUE TO FOUND WATER TABLE
PROBLEMS ON ADJOINING LOT - SEEMINGLY
AS A RESULT OF UNREVIEWED POND EXPANSION.
10/15 OWNER'S REALTOR - BOB HIKMAN
CALLED & DISCUSSED SUBMITTAL OF A "NON-ENGINEERED" PLAN - OWNER TO
CC: Ms. Anne Hruby BE IN TOUCH IN ABOUT A WEEK...
File (SEE ATTACHMENT FOR DETAIL ABOUT LOT NEXT DOOR)

6/2/93
11:10 AM

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 49317

A REPAIR

DISTRICT _____

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXXXX~~ 313-2640

INDEXED

DATE SYSTEM APPROVED 8-12-93

INSPECTOR [Signature]

DATE 6-7-93

Arnold Backhoe & Septic Services IS PERMITTED TO INSTALL ALTER X

ADDRESS P. O. Box 15, Woodbine, Maryland PHONE 795-7873

SUBDIVISION Warfield Estates LOT 8, Blk. B, Sec 3 ROAD 3432 Shady Lane

PROPERTY OWNER Stephanie Brown

3432 Shady Lane

ADDRESS Glenwood, Maryland

SEPTIC TANK CAPACITY 1250 GALLONS 1500 Top Seamed, two compartment Pump System 1000 gal Top Seamed PUMP P11 and a single Scavage effluent Pump

NUMBER OF BEDROOMS 4 If there is one day's Flow capacity above the high water alarm float (or use a duplex Pump System).

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 280' (266 LF accepted to keep distance from culvert & storm water runoff) R/J 8/1/93

REPAIR - PURPOSE - SEPTIC SYSTEM HAS FAILED.

Call for inspection when ground is opened so sanitarian can recommend repair. 6/03/93

Replace existing septic tank with a top seamed septic tank (2 compartment preferred). Install Trenches on contour in both directions away from a central Distribution Box placed approximately near the North East corner of the lot. (as discussed 4 Trenches, 70' long each is acceptable. Make in lot 3' deep, Bottom of Trench 5' deep maximum, 3 ft wide trenches, 2' gravel fill.

PLANS APPROVED BY [Signature] DATE 6-4-93

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.

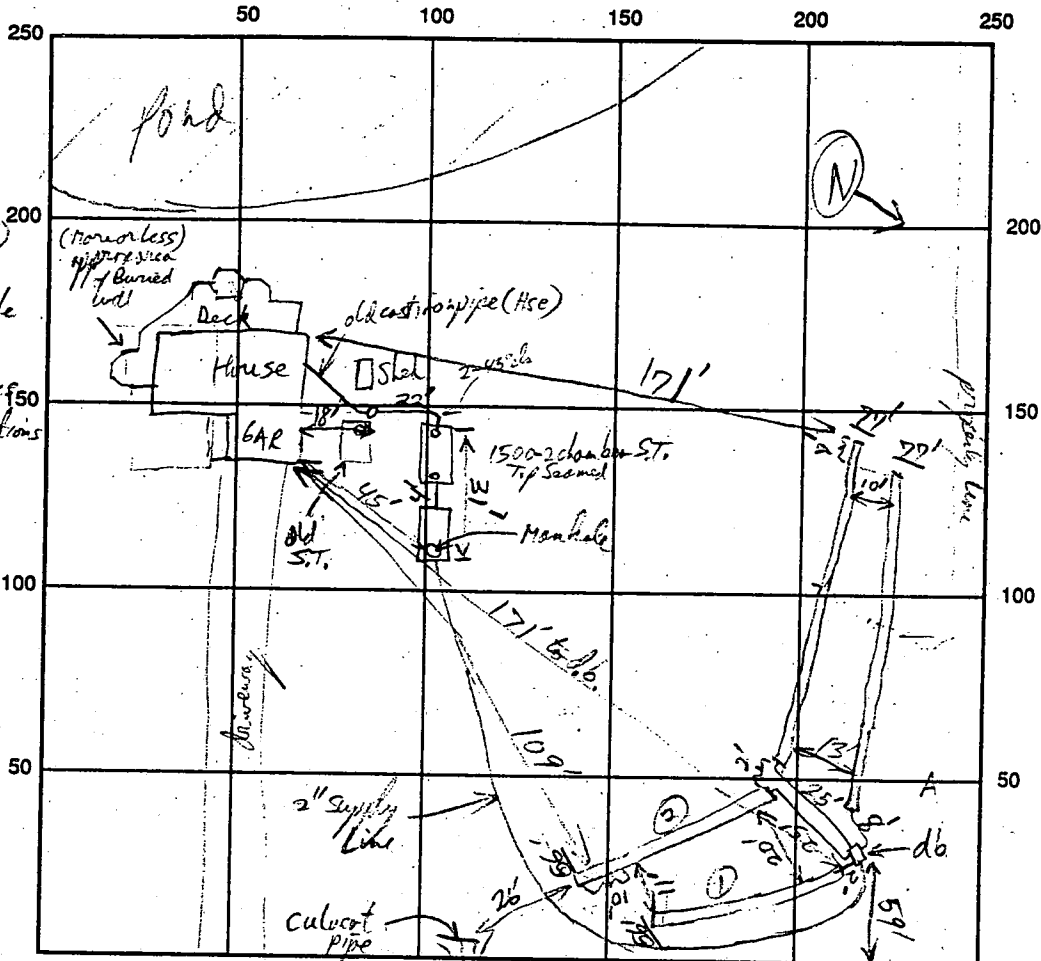
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

HD-260(6-90)

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

49317



Excavation @
 pump chamber
 bottom soil is
 a coarse sand, tan
 with coarse
 small distinct (cl) of
 iron concretions.
 Indicates some
 seasonal water table
 problems @ 6-7 ft
 below ground surface
 at S.T. + P.C. locations
 near house.

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

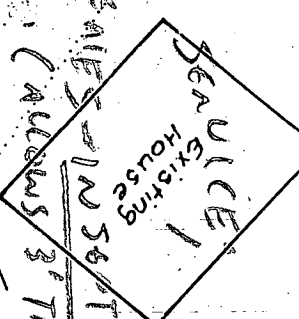
Pump Chamber 1500 gal 1 chamber Tip Seamed ✓ Shady Lane
 SEPTIC TANK LEVEL 1500 gal 2 chamber Tip Seamed ✓ CLEANOUTS S.T. (2), HSE (1), P.C. 3" brick Manhole
 DISTRIBUTION BOX LEVEL Dial a Flows used - d.b. + pipe fittings are sealed at p.c. & hse
 DRAIN FIELD/TITLE DEPTH 5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 FT.
 EFFECTIVE GRAVEL DEPTH 2' FT. TOTAL LENGTH 1/2/3/4 = 266' ^{total} 56/55/177/77 FT. _{to 1st}
 NUMBER OF TRENCHES 4 ONE SIDEWALL/BOTTOM AREA 270 SQ. FT.
 DRYWALL INSIDE DIAMETER _____ FT. EFFECTIVE DEPTH BELOW INLET _____ FT.
 ABSORBENT AREA _____ SQ. FT.

REMARKS: Trench #1 entire length Bottom just contacting into sand. Loam Soil, ~75% of trench has 1-1 1/2 ft
effective sidewall of this soil. Material Hse connection is connected from old S.T. Pump Chamber +
New Septic Tank & etc. OK to lower trench #1 R/R 8/11/93 used 2" supply pipe (Flanell
Pump Chamber OK. All trenches contact into comp. sand. OK to lower R/R 8/12/93
(120 gal base)

DATE SYSTEM APPROVED 8/12/93 INSPECTOR R. Kelly

LOT 6

BATH



TWO TANKS IN SERIES IN SILL AREA (SOME DECK SPACE)
 DIST. BOX IN SET 2 B.C. (ALLOW 3' TANK INVERT WITH 50" RARE)
 AT MIDPOINT (FRONT-TO-BACK)
 OF ADJUSTED 56" C.A. NGA
 ON 55" CONTINUOUS INTERVAL

5' Utility Esmt.

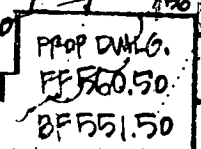
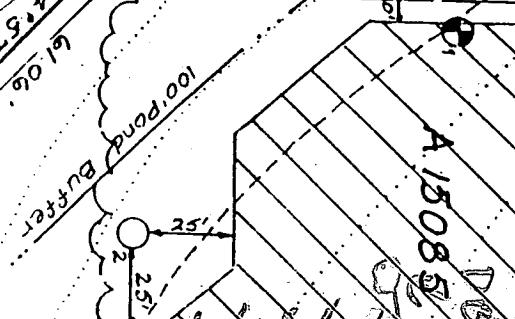
N 04° 07' 00" E 120.00'

N 44° 57' 21" W 61.06'

N 85° 53' 00" W 272.25'

S 04° 07' 00" W 160.00'

N 85° 53' 00" W 226.11'



LOT 7
43,000 S.F.

100' R

Ex. Paving

SHADY LANE

(EX. 80' R/W MINOR COLLECTOR ROAD)

CONCEPT GRADING

1/16/00

- SHOW 8-40' TANKS
- RUNNING BACK TOWARD HOUSE,
- INTUITION SHOULD SHOW ROOM
- FUN 1 MORE GAUITY SERVICE
- AT 1 MORE PUMPED SYSTEM,

1/18/00 (CW)

C1 07580

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

FILL IN THIS FORM COMPLETELY PLEASE TYPE

THIS REPORT MUST BE SUBMITTED AFTER WELL IS COMPLETED.

COUNTY NUMBER A15085

ST/CO USE ONLY

DATE RECEIVED MM DD YY

DATE WELL COMPLETED

MM DD YY 1 28 2000

Depth of Well

22 170 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-2537

OWNER BETHANY HOMES last name SHADY LANE first name TOWN GLENWOOD SUBDIVISION WANFIELD ESTATES SECTION 3 LOT 7

WELL LOG

Not required for driven wells

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

DESCRIPTION (Use additional sheets if needed) FEET FROM TO check if water bearing

Sand 0 71 Gray Mica Rock 71 170

Dry well 380' Backfilled 380-40 drilling material 40-0 cement

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) YES Y NO N

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

NO. OF BAGS 15 NO. OF POUNDS 440

GALLONS OF WATER 90

DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 39 ft.

CASING RECORD

STAINLESS STEEL CONCRETE PLASTIC OTHER

MAIN CASING TYPE ST Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 74

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

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

NUMBER OF UNSUCCESSFUL WELLS 1

WELL HYDROFRACTURED YES Y NO N

CIRCLE APPROPRIATE LETTER 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. MS D024 DRILLERS SIGNATURE Joseph L. Mayne LIC. NO. D

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

DEPTH (nearest ft.) HO 73 170

AS C 2 23 24 26 30 32 36 R 38 39 41 45 47 51 E N

SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH) 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

TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3

PUMPING TEST 3

HOURS PUMPED (nearest hour) 4

PUMPING RATE (gal. per min.) 15

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 30 ft.

WHEN PUMPING 92 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

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

PUMP HORSE POWER 37 41

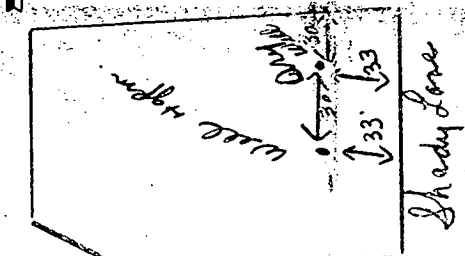
PUMP COLUMN LENGTH (nearest ft.) 43 47

CASING HEIGHT (circle appropriate box and enter casing height)

LAND SURFACE (+) above (-) below 1 (nearest foot)

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURES AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)



B 1 14317

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL please print or type

STATE PERMIT NUMBER

HO - 94 - 2535

fill in this form completely

Date Received (APA)

OWNER INFORMATION

Bothany Homeo Inc - 14670 Rothgeb Ct. Suite 201 Rockville Md. 20850

B 3 LOCATION OF WELL

Howard County Warfield East Glenwood

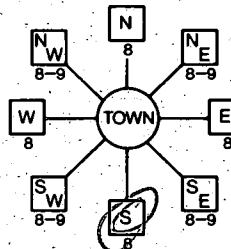
DRILLER INFORMATION

Joseph E. Mayna MSD 24 5512 Ridge Rd Mt. Airy Md. 21771 12/31/99

MILES FROM TOWN (enter 0 if in town)

B 4

DIRECTION OF WELL: FROM TOWN (CIRCLE BOX)



Shady Lane NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



50 DISTANCE FROM ROAD FT

TAX MAP: BLK: PARCEL

B 2 WELL INFORMATION

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

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard A15085 COUNTY NAME COUNTY NO. STATE SIGNATURE INSERT S DATE ISSUED 01/10/00 CO SIGNATURE EXP. DATE 1/10/01 NORTH GRID 525 000 EAST GRID 0794 000

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

APPROXIMATE DEPTH OF WELL 300 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

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)

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

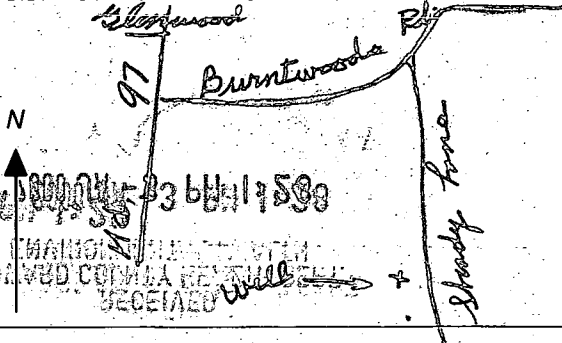
APPROP. PERMIT NUMBER GAP PERMIT No. HO - 94 - 2535

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. WELL 2. 3. Watched first part of grant. O.K. BB

WRITE THE BOX NUMBER FROM THE MAP HERE

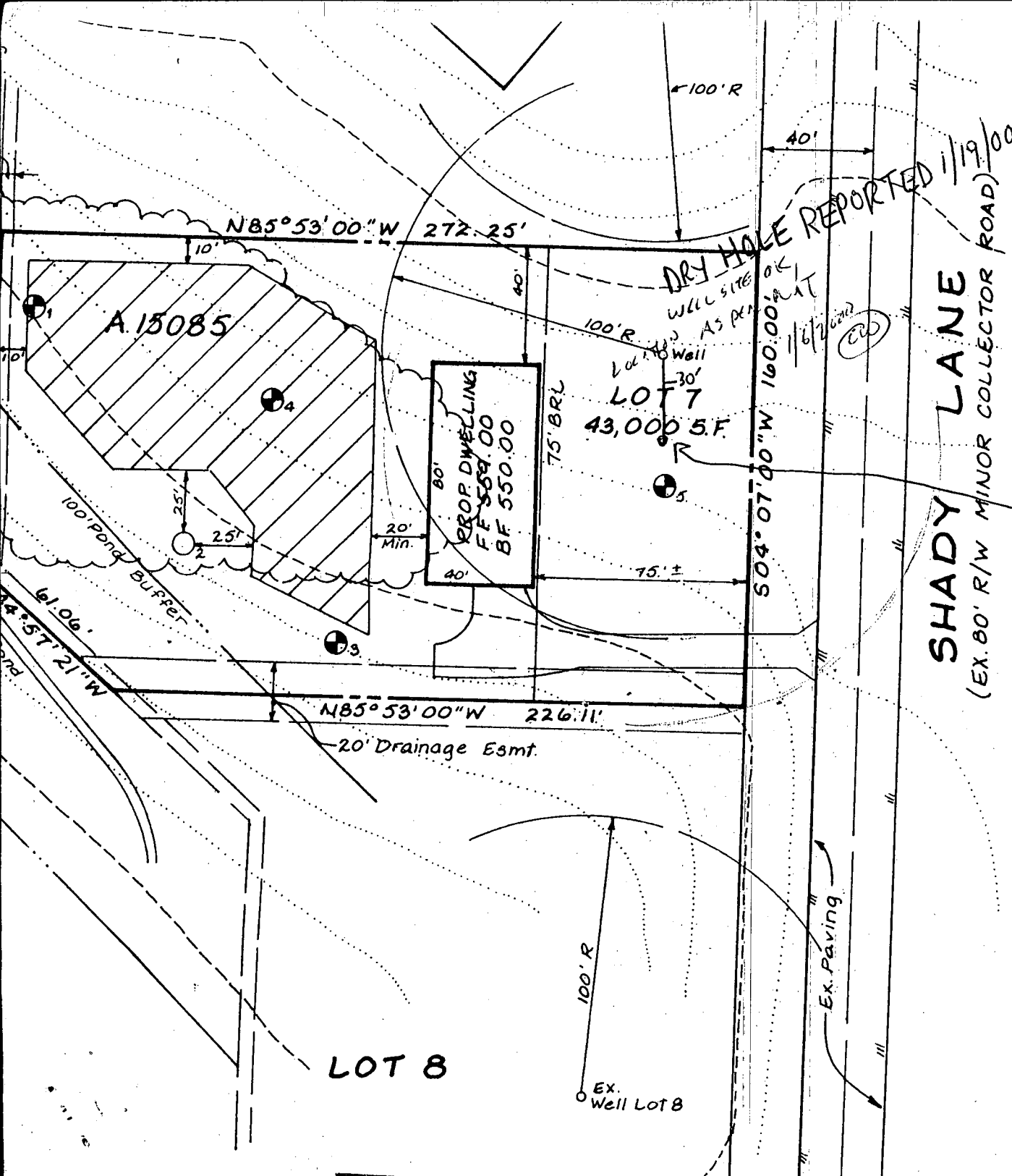
E 790 N 520

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



SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED



1/19/00
 NEW WELL SITE
 30' FROM THE OLD
 WELL SITE OK
 OK TO DRILL (SRK)

NOT

- 1. E
- 2. I
- 3. T
- 4. T
- 5. E
- 6. T

