

6-2-93
am

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXX~~ 313-2640

04-31444

INDEXED

P 49281

A 30701

DISTRICT 4th

DATE 5/28/93

DATE SYSTEM APPROVED 6-2-93

INSPECTOR [Signature]

K. E. Snow Construction IS PERMITTED TO INSTALL X ALTER

ADDRESS 4401 Gregg Road, Brookville, Maryland 20833 PHONE 774-3441

SUBDIVISION Mordecai Hoseh Property LOT 14 ROAD 16150 Ed Warfield Road

PROPERTY OWNER John & Glenna Williamson

ADDRESS

SEPTIC TANK CAPACITY 1000 GALLONS

NUMBER OF BEDROOMS 3

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 158 ✓

TRENCHES - Trench to be 2 feet wide. Inlet 3½ feet below original grade. Bottom maximum depth 7½ feet below original grade. Effective area begins at 3½ feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Start the first trench 200 feet from the front lot line and 150 feet from the left lot line. Run trenches on contour to left side of lot.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 12/17/92 R/H

PLANS APPROVED BY Mark Rifkin DATE 9/01/92

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

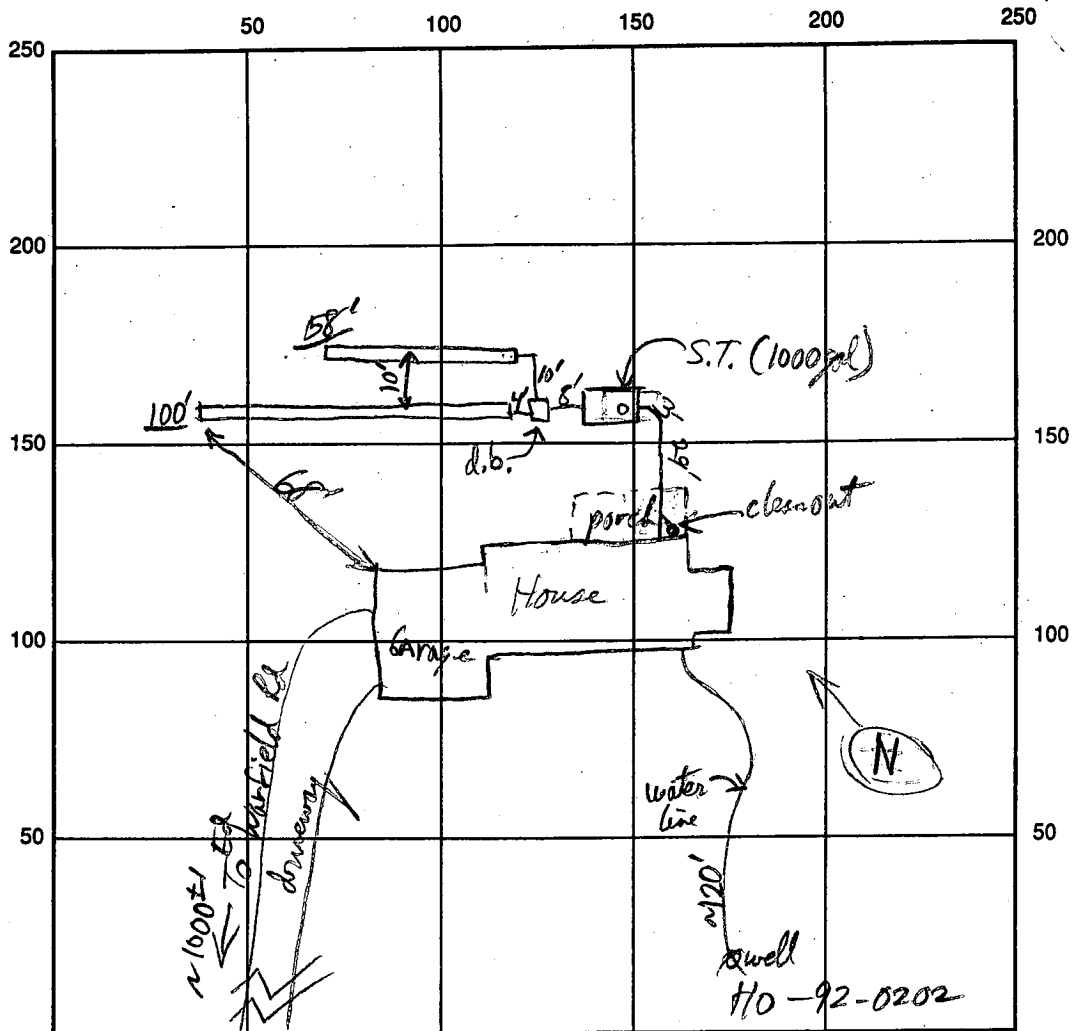
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON, CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

OLD PERMIT SIGNED AND RETURNED 9-16-98
Serial # B711 9044
detached garage

A 30701



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1000gal CLEANOUTS ST & Hse

DISTRIBUTION BOX LEVEL _____

DRAIN FIELD/TITLE DEPTH 7 1/2 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 4 FT. TOTAL LENGTH 100/58 FT.

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA _____ SQ. FT.

DRYWALL INSIDE DIAMETER _____ FT. EFFECTIVE DEPTH BELOW INLET _____ FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS: Hit some sticky rock pockets at begin of both Trenches & 3/5ths way out long Trench. Pockets
Not Significant enough to Bridge. Consider peak tests and long distance to Neighbor's well.
OK to gravel fill Trenches 6/2/93 OK to cover 6/2/93

DATE SYSTEM APPROVED 6-2-93 INSPECTOR [Signature]

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 30701

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P.O. BOX 476 ELLICOTT, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT R4

DATE 5/20/80

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 ~~DALE A. JACKSON & PHYLLIS E. JACKSON~~ John & Glenna Williamson

ADDRESS P. O. Box 2125
607 Stonington Rd. PHONE (301) 593-6977
Silver Spring, Md. 20902

PROPERTY LOCATION:

SUBDIVISION Map 013, Grid 17, Parcel 0049 LOT NO. 14
16150 Ed Warfield Road

ROAD AND DESCRIPTION 9.794 Acres, Ed Warfield Rd. N S, Woodbine 10

SIZE OF LOT 9.794 Acres TYPE BLDG. Single family dwelling

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.

SIGNATURE OF APPLICANT Dale Jackson & Phyllis E. Jackson

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY J. Stayer FOR drywell DATE 6/2/80

HOLD PENDING FURTHER TESTS _____ DATE _____

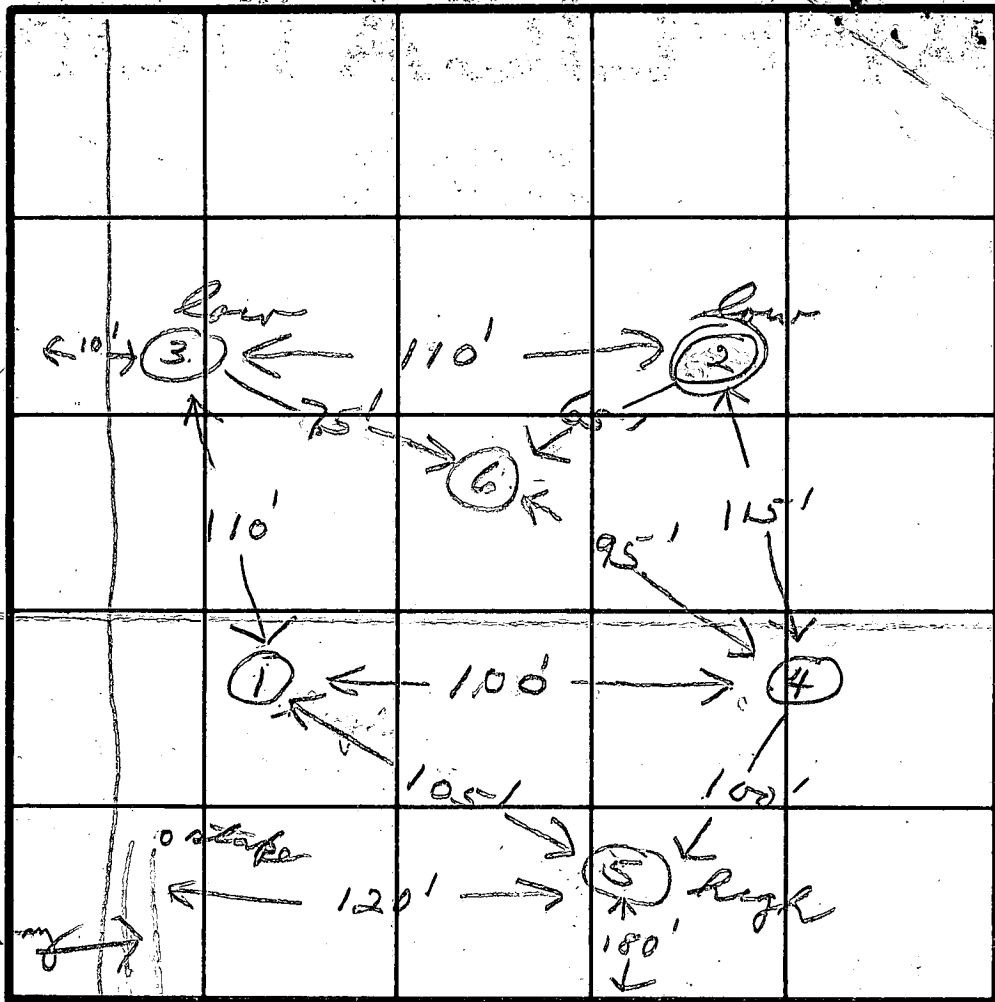
REASONS FOR REJECTION OR HOLDING _____

FILED PERMITS SECTION
AND RETURNED 12/3/82
Serial # 46263 - SFD
3 Bedrooms

THIS IS NOT A PERMIT

SOIL PROFILE

0
 0-3'
 Clay, little
 sand,
 3'-11 1/2'
 Clay, mica,
 weathered
 shale from
 4' down



$\bar{x} = 10$
 210' BR.
 Inlet 3 1/2'
 Bottom 7 1/2'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Warfield Rd

4-10'

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
6/2/80	1S	4'	9:55	10:02	10:02	10:10	8
	1D	11 1/2'	9:55	10:00	10:00	10:04	4
	(2S)	3'	10:26	- failed	1st inch		
	2D	11'	10:27	10:30	10:30	10:37	7
	3S	4 1/2'	10:42	10:47	10:47	10:55	8
	3D	12 1/2'	10:43	10:46	10:46	10:51	5
	4S	3 1/2'	11:25	11:30	11:30	11:40	10
	4D	11 1/2'	11:25	11:30	11:30	11:38	8
	(2S)	4'	11:02				
	(2D)	12'	- water				
	5S	4'	11:40	11:45	11:45	11:52	7
	5D	11 1/2'	11:40	11:58	11:58	12:27	29
	6 ✓	12'	similar				

REMARKS Re-pure on hole #2 - water 12 ft

TYPE OF SOIL

TESTED BY JS + SK ALSO PRESENT H Sink

APPLICATION

A 18200

P _____

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DISTRICT 4th

DATE March 29, 1973

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 Mordecai Hoseh

ADDRESS Woodbine, Maryland PHONE _____

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. Parcel 14

ROAD AND DESCRIPTION Ed Warfield Rd., Woodbine, Maryland

SIZE OF LOT 9.749 Acres TYPE BLDG. Single Family Dwelling
3 or 4 Bedrooms
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT X Peter B. Weller

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

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

13
4
9

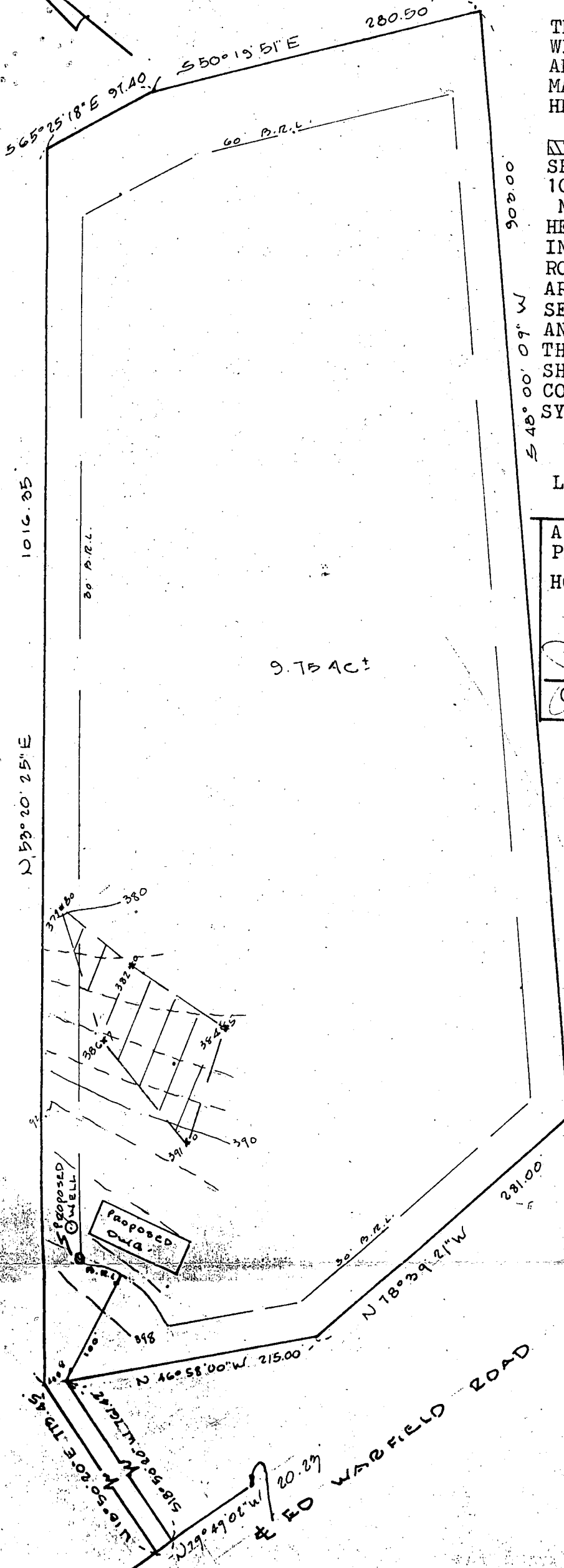
DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
7/5/73	1	11 1/2	1004	1000	1020	1024	14
	2	4 1/2	1004	1007	1007	1010	3
	3	11	1016	1018	1018	1020	2
	4	5	1021	1025	1025	1032	7
	5	10 1/2	TOP	5 FT	CLAY		
	6	10	BOT	SAND	SHALE	DRY	
			TOP	45 FT	CLAY		
			BOT	SAND		DRY	

High Hole

REMARKS _____

TYPE OF SOIL _____

TESTED BY _____ ALSO PRESENT: _____



THE LOT SHOWN HEREON COMPLIES WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREA AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF HEALTH AND MENTAL HYGIENE.

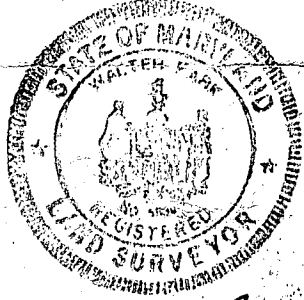
THIS AREA DESIGNATES A PRIVATE SEWAGE EASEMENT OF APPROXIMATELY 10,000 SQ. FT. AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF HEALTH AND MENTAL HYGIENE FOR INDIVIDUAL SEWAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWER IS AVAILABLE AND SERVICING ANY RESIDENTIAL STRUCTURE ON THIS BUILDING SITE. THIS EASEMENT SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM.

THIS DESIGNATES FIELD LOCATED PERC HOLES AND ELEVATIONS

APPROVED: FOR PRIVATE WATER AND PRIVATE SEWAGE SYSTEMS.
 HOWARD COUNTY HEALTH DEPT.

Joan L. Jones 6-23-80
 COUNTY HEALTH OFFICER DATE.

FIELD LOCATED PERC HOLES
 TAX MAP 13 PARCEL 49
 D. JACKSON PROPERTY
 4th ELECTION DISTRICT
 HOWARD COUNTY, MD
 SCALE 1"=100' 6/12/1980



Walter Park
 HUDKINS ASSOCIATES INC.
 231 JOSEPH SQUARE
 COLUMBIA, MD 21044

HEALTH DEPT

C1A 6635 SEQUENCE NO. (DENV USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

COUNTY NUMBER A= 30701

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

Grid for date received

102892

308

10-92-0202

OWNER: (Name) - RECONST. last name first name TOWN

STREET OR RFD SUBDIVISION SECTION LOT

WELL LOG Not required for driven wells STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

Table with columns: DESCRIPTION, FEET (FROM, TO), Check if water bearing. Includes entries for Top Soil, Br. shale, Blue shale, Green shale, Blue shale.

GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box)

TYPE OF GROUTING MATERIAL CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS NO. OF POUNDS GALLONS OF WATER DEPTH OF GROUT SEAL

CASING RECORD casing types insert appropriate code below ST CO PL OT STEEL CONCRETE PLASTIC OTHER

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

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

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

DEPTH (nearest ft.) EACH SCREEN SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH)

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

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.) W.O. TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3

PUMPING TEST HOURS PUMPED (nearest hour) PUMPING RATE (gal. per min. to nearest gal.) METHOD USED TO MEASURE PUMPING RATE WATER LEVEL (distance from land surface) BEFORE PUMPING WHEN PUMPING 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 WILL INSTALL PUMP (CIRCLE) (YES or 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) F above LAND SURFACE below (nearest foot)

LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)

CIRCLE APPROPRIATE LETTER A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED E ELECTRIC LOG OBTAINED 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 IDENT. NO. DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

COUNTY

B 1 **03319** SEQUENCE NO. (DP USE ONLY)

(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
MD-92-0202
fill in this form completely

Date Received (APA) **082492**

WILLIAMSON'S
OWNER INFORMATION

SWAN K E CONST
Last Name Owner First Name

4401 CREEK RD
Street or RFD

BROOKEVILLE MD 20833
Town State Zip

B 3 LOCATION OF WELL

HOWARD COUNTY

MORDECAI HOSEAH PAPA SUBDIVISION

SECTION **14** LOT **14**

DAISY NEAREST TOWN

MILES FROM TOWN (enter 0 if in town) **0** MI

DRILLER INFORMATION

George F. Easterday Driller's Name License No. **40**

L. FRANKLIN EASTERDAY INC Firm Name

MT. WIRY MD 21771 Address

George F. Easterday Signature Date **8-19-92**

B 4

Edwarfield Rd NEAR WHAT ROAD

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

50 DISTANCE FROM ROAD ENTER FT or MI **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 # **30701** COUNTY NO.

STATE SIGNATURE _____ DATE ISSUED **101692**

Charles F. Easterday CO SIGNATURE **4/16/92** EXP. DATE

NORTH GRID **532000** EAST GRID **0728000**

APPROXIMATE DEPTH OF WELL **200** FEET

APPROXIMATE DIAMETER OF WELL **6** NEAREST INCH.

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN

AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary)

CABLE REVERSE-ROTary Drive-POINT

other _____

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

- well
-
-

WRITE THE BOX NUMBER FROM THE MAP HERE

770 **530**

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

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

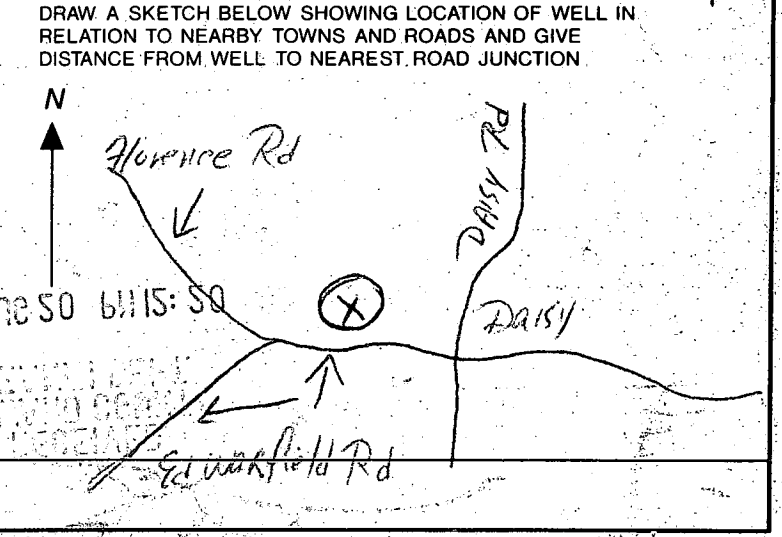
THIS WELL WILL NOT REPLACE AN EXISTING WELL

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 DEEPEM AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) _____



Not to be filled in by driller (OEP USE ONLY)

APPROX. PERMIT NUMBER _____

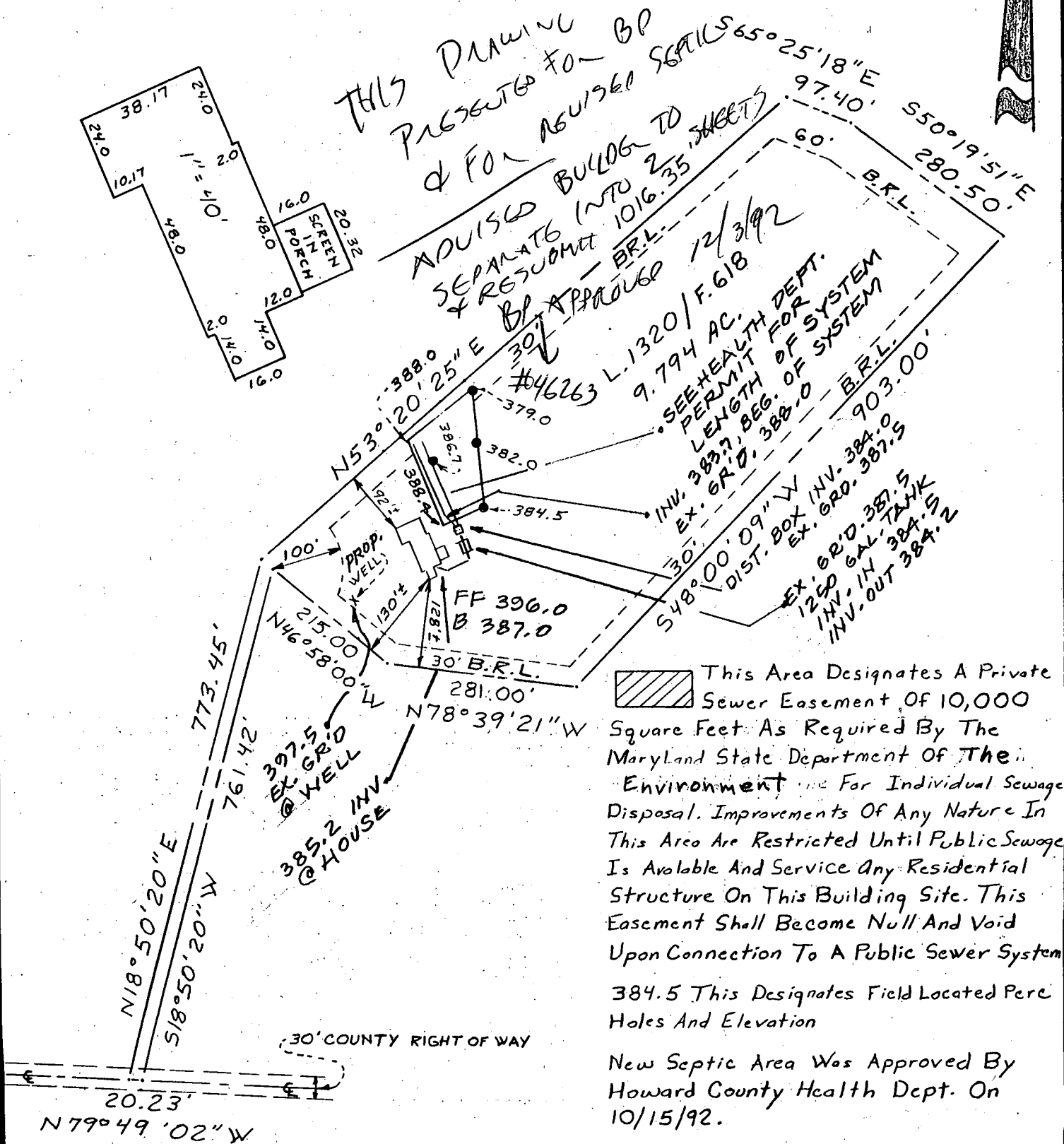
FORCE **C** WRITE INITIALS IN BOX **W** PERMIT No. **MD-92-0202**

SPECIAL CONDITIONS

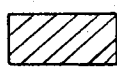
PLOT PLAN
 LIBER-1320 FOLIO-618
 WILLIAMSON PROPERTY
 4th. ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND

APPROVED: FOR PRIVATE WATER
 AND PRIVATE SEWAGE SYSTEMS.
 HOWARD COUNTY HEALTH DEPT.

COUNTY HEALTH OFFICER DATE



THIS DRAWING
 PREPARED FOR BP
 & FOR ADVISED SEPTICS
 ADJUSTED BULLDOG TO
 SEPARATE INTO 2
 & RESUMPT 1016.35
 BR.L. SHEETS

 This Area Designates A Private
 Sewer Easement Of 10,000
 Square Feet As Required By The
 Maryland State Department Of The
 Environment For Individual Sewage
 Disposal. Improvements Of Any Nature In
 This Area Are Restricted Until Public Sewage
 Is Available And Service Any Residential
 Structure On This Building Site. This
 Easement Shall Become Null And Void
 Upon Connection To A Public Sewer System

384.5 This Designates Field Located Perc
 Holes And Elevation

New Septic Area Was Approved By
 Howard County Health Dept. On
 10/15/92.

ED WARFIELD RD.

Tri - County Surveys, Inc. BOX 55 • DAMASCUS, MARYLAND 20872 • (301) 831-3655 LAND PLANNING CONSULTANTS • SUBDIVISIONS • LOTS & BOUNDARIES	REFERENCE	COUNTY OF	Drawn by: J.R.S.
	Liber-1320 Folio-618	HOWARD	Checked by: WLW
			Job No.: 92-018
SURVEYOR'S CERTIFICATION I hereby certify that the property delineated hereon is in accordance with the Plat of Subdivision and/or deed of record, that the improvements were located by accepted field practices and include permanent visible structures and encroachments, if any. This Plat is not for determining property lines, but prepared for exclusive use of present owners of property and also those who purchase, mortgage, or guarantee the title thereto, within six months from date hereof, and as to them I warrant the accuracy of this Plat.			Scale: 1" = 200'
			DATES
WILLIAM L. WIRTS - Registered Land Surveyor - Maryland No. 10721 <i>William L. Wirts</i> 11-16-92			Wall Ck.:
Note: House does not lie within a flood hazard area			Final Loc.:
			Recert.:

NOTE: This drawing is not intended or represented to be a lot stake out survey; no lot corners were set; and is not to be used, or relied upon, for the establishment of any fence, building or other improvements. No responsibility is extended herein to future purchasers.

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 6-15-93

Name of Installer BECK PLUMBING

Telephone 301-421-9279

License Number _____

Certified Well Pump Installer _____

Well Driller _____

Registered Plumber

Name of Property Owner WILLIAMSON

Telephone 301-725-2418

Subdivision HOSEH SUB

Lot # 19

Well Tag # HO-92-0702

Site Address 16150 EDWARDS RD

Pump

1. Type

- a. Deep well jet _____
b. Shallow well jet _____
c. Submersible 3/4 HP

2. Make JACUZZI

3. Model # _____

4. Capacity _____ GPM

5. Pump exceeds well capacity Yes _____ No

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 _____

Motor

1. Horsepower 3/4

2. RPM _____

3. Voltage _____

a. 110 _____

b. 220

Pitless Adapter

1. Make _____

2. Model # _____

3. Depth 3

Tank

1. Capacity _____

2. Pressure relief valve? _____

Piping

1. Type BLACK POLY

2. Size 1"

3. NSF and/or BOCA Code approved _____

4. Depth of supply line _____

Well data

1. Depth 325 ft.

2. Yield 10 GPM

3. Static water level 37 ft.

4. Will water supply be disinfected by installer? NO

P.A. & WELL LINE OK
3-4 B.G. MR 6/15/93

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.

Signature of Applicant: [Signature]

KESNOW CONST.

Date: 6-15-93

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

8-18-98
11:00 meet owner

SITE INSPECTION SHEET

OWNER: John & Glenna Williamson

DATE REQUESTED: 8-17-98

ADDRESS: 16150 Ed Warfield Rd

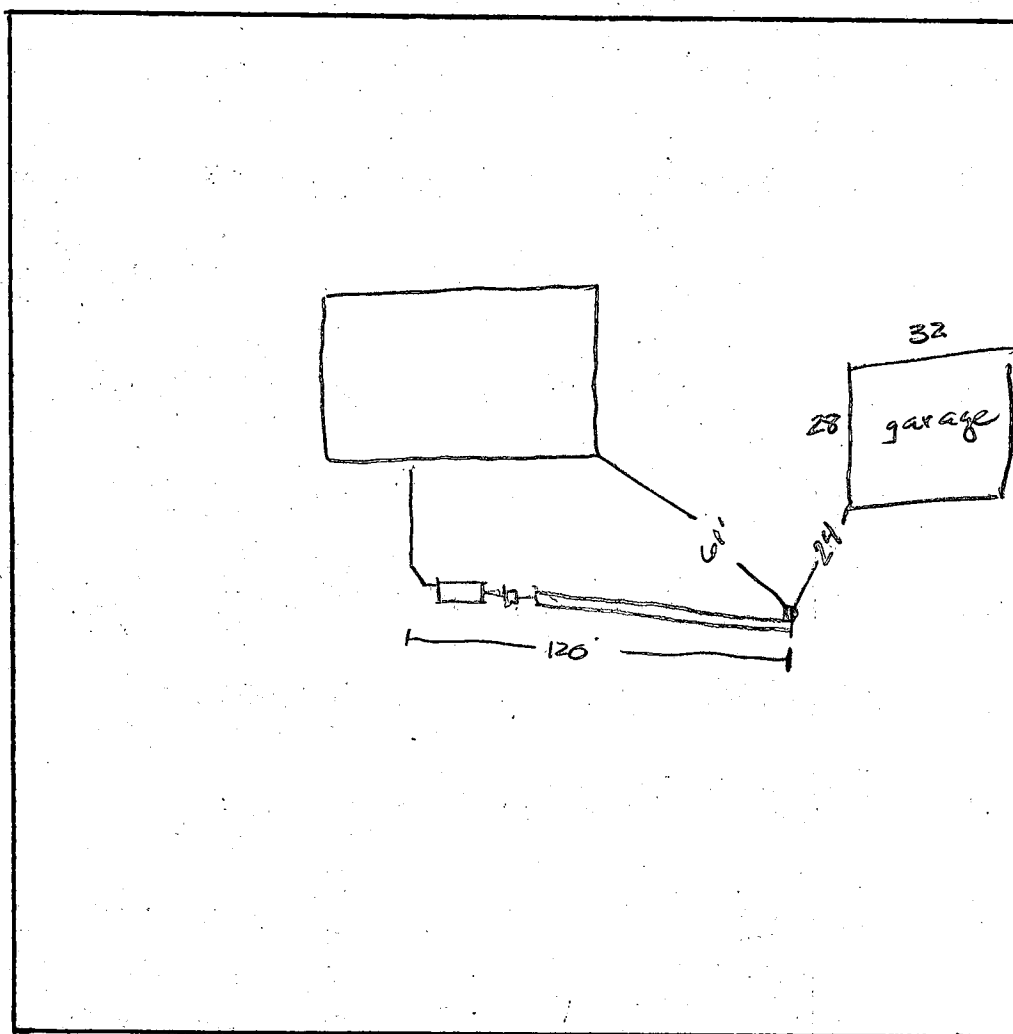
DRILLER: _____

WELL TAG # _____

COUNTY # _____

PROPOSAL: Garage addition - may be closer than 20' to drainfields

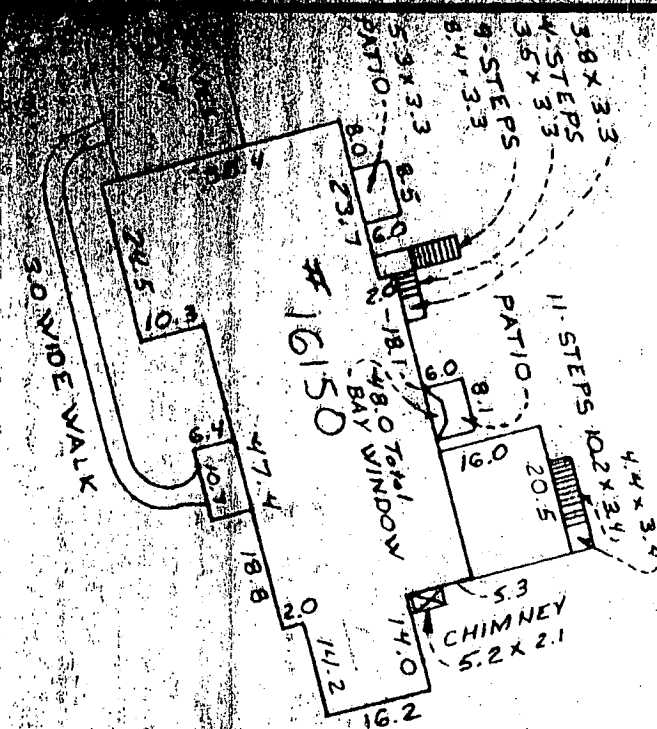
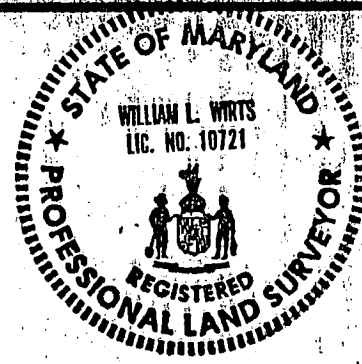
LOCATION DIAGRAM



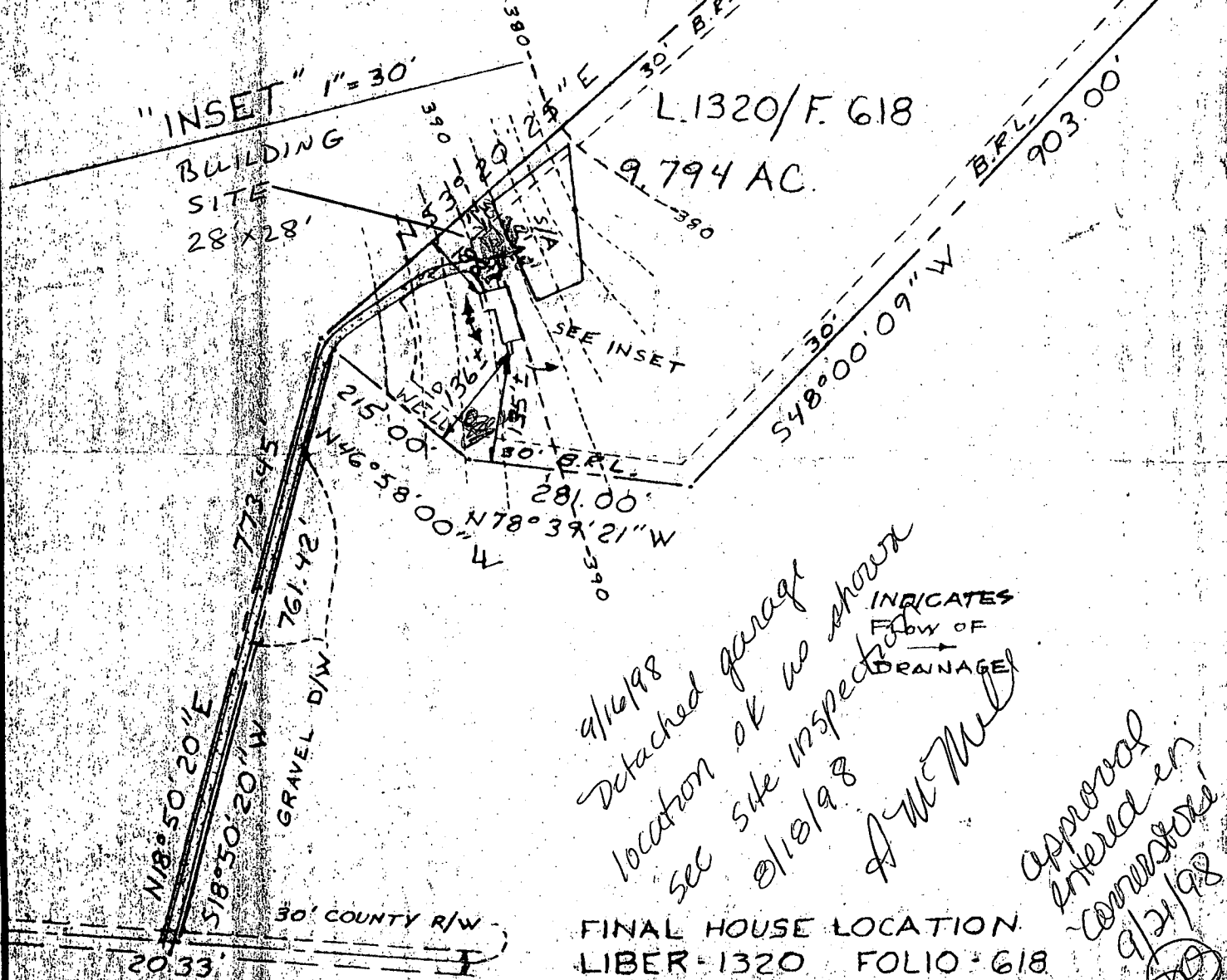
COMMENTS: 8/18/98 OK to build 32x32 garage w/ front of garage even w/ back of house - OK to move towards back of lot as much as needed to avoid electric - This proposal will work if 10' offset from side lot line - close w/ 30' BRL

DATE: 8-18-98

INSPECTOR: A McMulle



"INSET" 1" = 30'
BUILDING
SITE
28' x 28'



9/16/98
Detached garage
location ok w shown
see site inspection
9/18/98
A.W.M.

INDICATES
FLOW OF
DRAINAGE

Approval
entered in
computer
9/21/98

ED WARFIELD ROAD
16150

FINAL HOUSE LOCATION.
LIBER-1320 FOLIO-618
WILLIAMSON PROPERTY
4th ELECTION DISTRICT
HOWARD COUNTY, MARYLAND