

4/21/88 pm
4/22/88 1 pm

05-400023

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

P 41395

A 26613

DISTRICT 5th

DATE 3/31/88

DATE SYSTEM APPROVED 4/22/88

INSPECTOR Rit

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED

Donald Parlette

IS PERMITTED TO INSTALL ALTER

ADDRESS 6575 Route 32, Clarksville, Maryland 21029 PHONE 531-2140

SUBDIVISION Dayton Meadows ROAD 13821 Dayton Meadows Ct LOT 4, Sec.1, Area 1

PROPERTY OWNER Stephen Tufts/Sandra Stanton

ADDRESS _____

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES NO

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 210 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 8 1/2 feet below original grade. Effective area begins at 4 feet below original grade. 4 1/2 feet of stone below distribution pipe.

LOCATION - Beginning from the intersect of the 300' lot line and the 280' lot line, place 1st trench 115 feet ~~down~~ the front (280') line and 80 feet off the front line as seen when facing property from Dayton Meadows Court. Run trenches along contour towards the righ (277.42') lot line.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. 04/cw

PLANS APPROVED BY S. Abel DATE 2/09/88

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.

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(IES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(IES).

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 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 PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED.

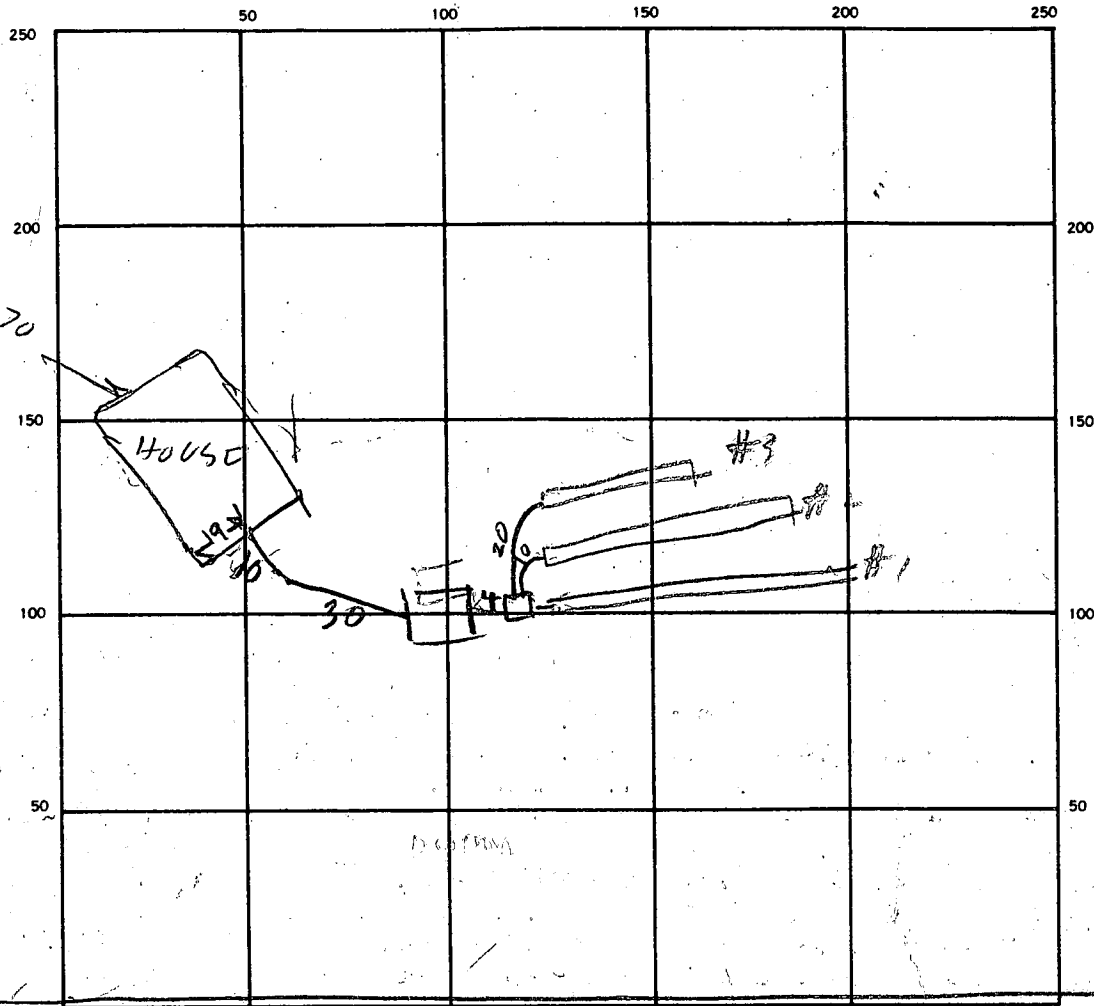
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES.

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

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1186

A-26613



415
327
135
877

INDICATE NORTH. NAME ADJOINING ROADWAY AS BASE LINE
200 FT EAST 6100

SEPTIC TANK. LEVEL 1500

CLEANOUTS ST O/K

4.5
73
125
315
327.5

DISTRIBUTION BOX. LEVEL _____

DRAIN FIELD/TILE FIELD. DEPTH 1 2 3 FT. TRENCH WIDTH 1 2 3 FT. INLET DEPTH 4 4 4 FT.

EFFECTIVE GRAVEL DEPTH 1 2 3 FT. TOTAL LENGTH 23 73 30 FT. 87

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 4 5 327 13 SQ. FT. 877 45 REQUIRE 840

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

ABSORBENT AREA _____ SQ. FT.

REMARKS 4/21/88 - LOCATION OK PER PLANS. TRENCHES DUG RIT
4/22/88 - TRENCHES FINISHED COVER WORK

DATE SYSTEM APPROVED 4/24 88 INSPECTOR Raymond Hodges

6/22/87
①

DAYTON MEADOWS

A 26613

SUBDIVISION:

SEC 1 AREA 1

LOT NUMBER:

4

DAYTON MEADOWS CT.

DRY WELL OR DRY WELL AND TRENCH

_____ sq. ft./bedroom

	Septic Tank
3 bedroom	1000 gallon
4 bedroom	1250 gallon
5 bedroom	1500 gallon

Minimum Total Square Feet

Inlet _____ feet below original grade.

Bottom maximum depth _____ feet below original grade.

Effective area begins at _____ feet below original grade.

NOTE: If trench is used to make up absorbent area, run the trench on level ground and leave a 5-foot earth buffer between dry well and trench. No trench is to exceed 100 feet in length. Trench inlet to be same as dry well, with _____ feet of stone below distribution pipe.

TRENCHES

210 sq. ft./bedroom

Trench to be 2 wide.

Inlet 4 feet below original grade.

Bottom maximum depth 8 1/2 feet below original grade.

Effective area begins at 4 feet below original grade.

4 1/2 feet of stone below distribution pipe.

No G. Disp-
3 Baths
4 Bed. R.

- NOTE:
- (1) No trench to exceed 100 feet in length.
 - (2) If more than one trench used, a distribution box is required.
 - (3) Trenches to be installed on level ground.
 - (4) Call for inspection of trench before gravel is installed.
 - (5) Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank and drywell.
 - (6) If a garbage disposal is used, increase septic tank capacity by 50% and increase absorbent sidewall area by 22%.

LOCATION: BEGINNING FROM THE INTERSECT OF THE 300' LOT LINE AND THE 280' LOT LINE, PLACE 1ST TRENCH 115' ^{DOWN} ~~ACROSS~~ THE FRONT (280') LINE AND 80' OFF THE FRONT LINE AS SEEN WHEN FACING PROPERTY FROM DAYTON MEADOWS CT. RUN TRENCHES ALONG CONTOUR TOWARDS THE RIGHT (277.42) LOT LINE. UPDATED 2/9/88 S.M.

SECT. PERMITS SIGNED AND RETURNED 2-16-88

PRELIMINARY

APPLICATION

A 26613

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 5th
DATE 8/16/77

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 William Mitchell Stephen Tufts / Sandra Stanton

ADDRESS _____ PHONE Paul Kottis
421-9433

PROPERTY LOCATION:

SUBDIVISION Dayton Meadows LOT NO. 6, Block A
final see I near LOT 4
NEW LOT 13

ROAD AND DESCRIPTION Green Bridge Road 13821 DAYTON MEADOWS Ct

SIZE OF LOT 40,000 sq. ft. TYPE BLDG. 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 /s/ Paul Kottis

APPROVED BY _____ FOR Dw of Trench DATE _____
(KIND OF SYSTEM)

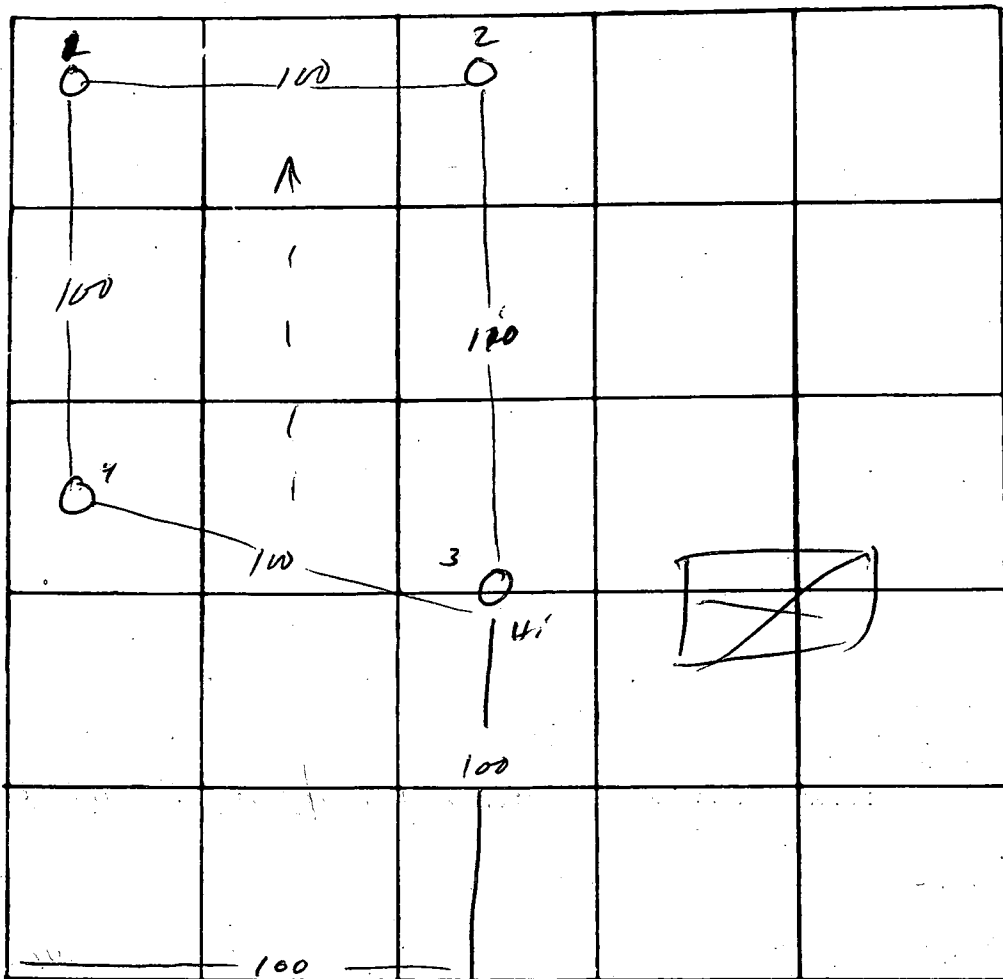
REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____ B.P. 16668 2-4-88

FOR DEPOSIT ONLY
HOWARD COUNTY HEALTH DEPARTMENT
16 10310 02

THIS IS NOT A PERMIT



Lt. A

0
14
sandy loam
with some clay
sparsely mixed

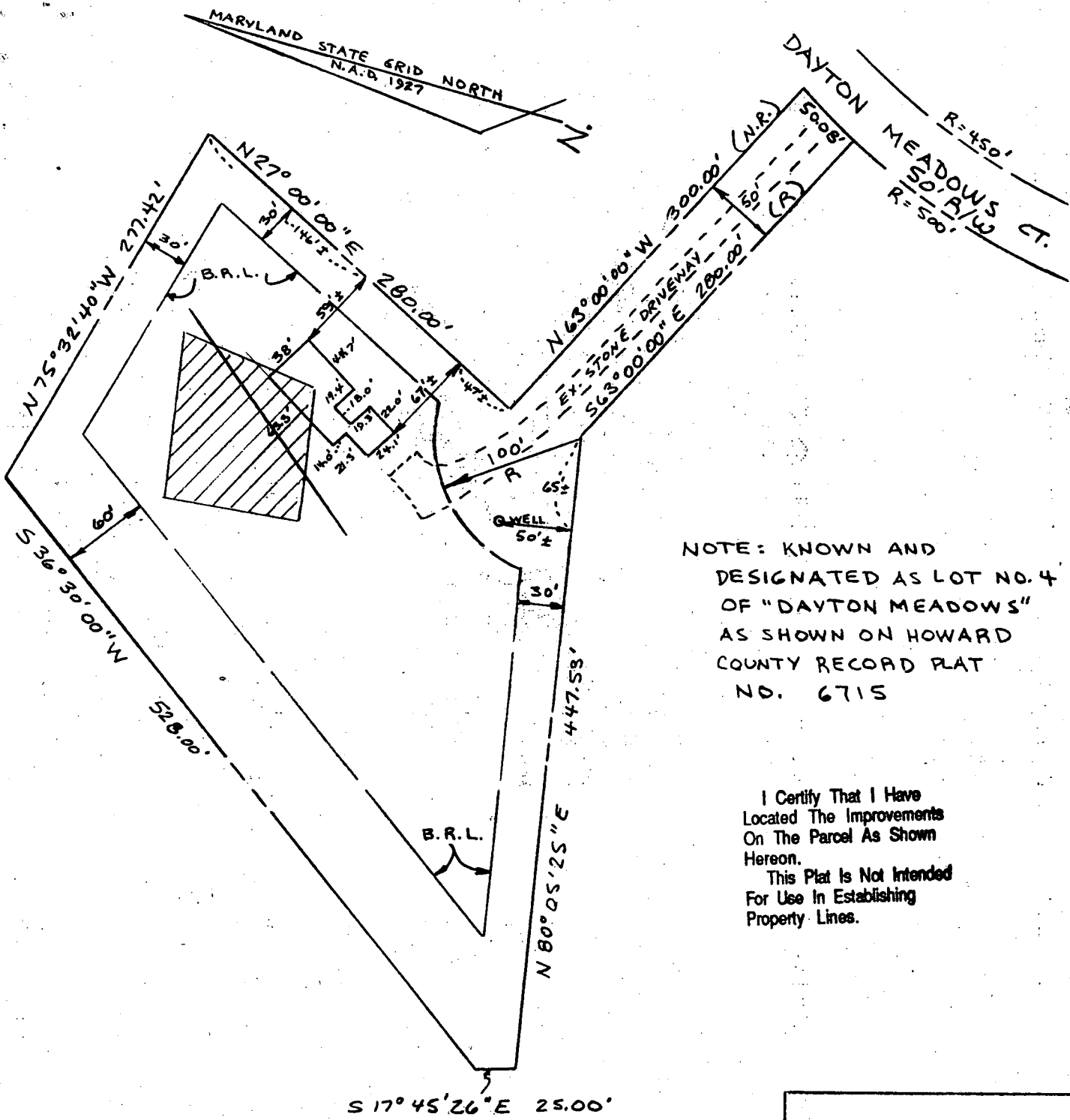
INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
23 Aug 77	1	4	10 ⁴⁷	10 ⁵⁰	10 ⁵⁰	10 ⁵³	3
		14	10 ⁴²	11 ¹⁰	11 ¹⁰	11 ³⁷	27
	2	3	10 ⁵³	11 ⁰²	11 ⁰²	11 ²⁴	17
		14½	10 ⁵³	10 ⁵⁸	10 ⁵⁸	11 ¹⁴	1.6
	3	4	10 ⁵¹	10 ⁵⁴	10 ⁵⁴	10 ⁵⁹	5
		13½	10 ⁵¹	10 ⁵⁹	10 ⁵⁹	11 ¹⁴	15
	4	13	VI's				

REMARKS _____

TYPE OF SOIL _____

TESTED BY *M* ALSO PRESENT: *Kottis*



NOTE: KNOWN AND DESIGNATED AS LOT NO. 4 OF "DAYTON MEADOWS" AS SHOWN ON HOWARD COUNTY RECORD PLAT NO. 6715

I Certify That I Have Located The Improvements On The Parcel As Shown Hereon.
This Plat Is Not Intended For Use In Establishing Property Lines.

S 17° 45' 26" E 25.00'



BOTTERILL-HOBBS, INC.
SURVEYORS

PROPERTY • HOUSE LOCATIONS • TOPOGRAPHY

ARTHUR M. BOTTERILL
3601 DEWBERRY CIRCLE
WESTMINSTER, MD 21157
(301) 549-8782

JEFFERSON D. HOBBS II
2733 FREDERICK ROAD
CATONSVILLE, MD 21228
(301) 465-4723

HOUSE LOCATION PLAT

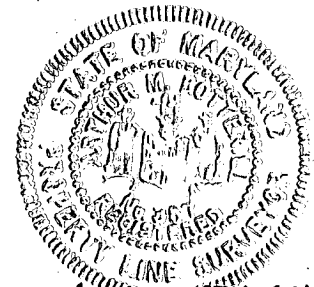
13821 DAYTON MEADOWS CT.

5TH ELECTION DISTRICT

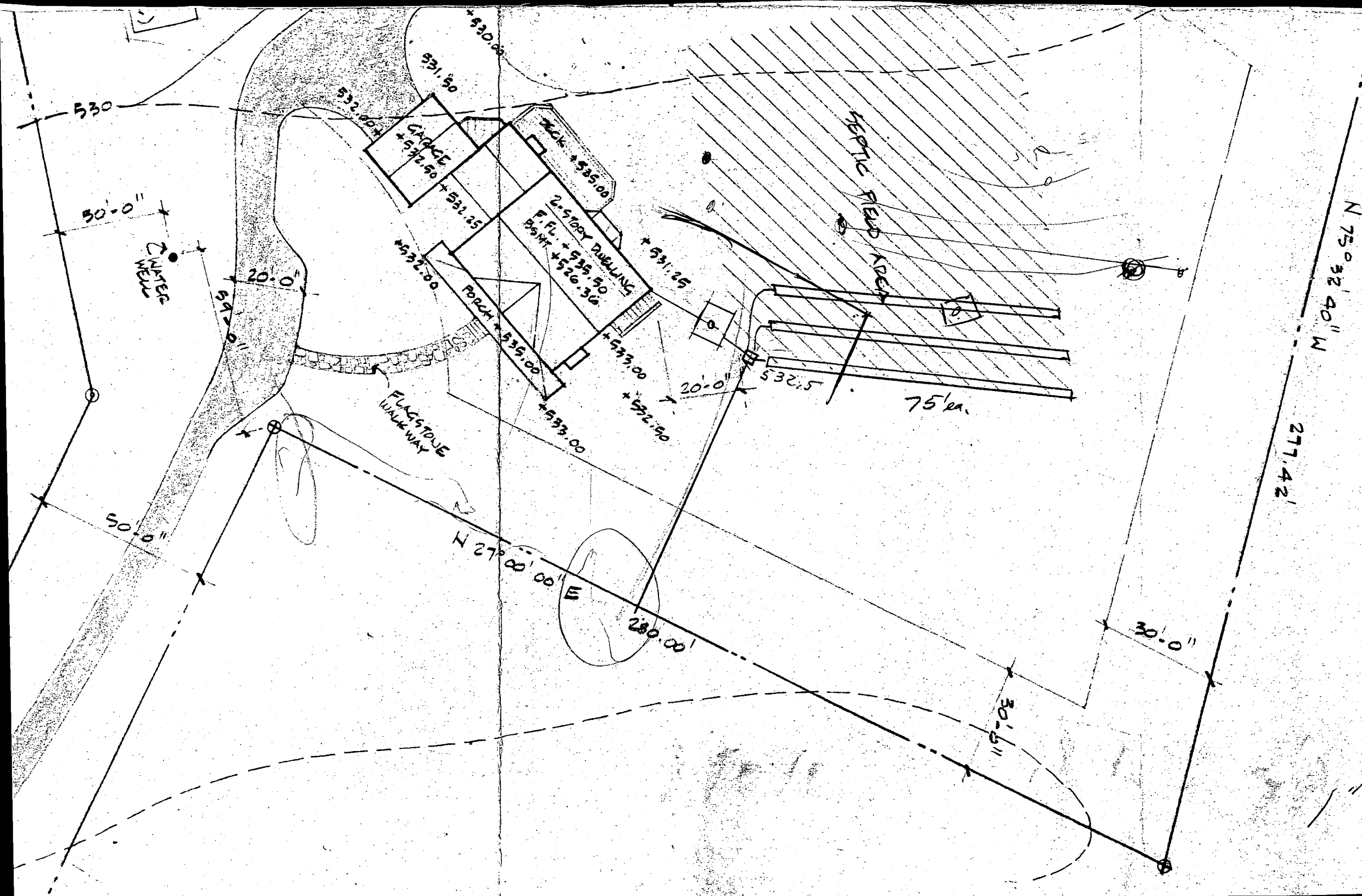
HOWARD COUNTY, MD.

DATE: 3-30-1988

SCALE: 1"=100'



Arthur M. Botterill
PROPERTY LINE SURVEYOR
NO. 357



Bl. 16668
 app.

elev. & location of *ST*

House out inv. 529.25
 S. TANK IN INV. 529.0
 S. TANK OUT INV. 528.75
 Dist. Box in inv. 528.65
 out inv. 528.60
 Grade 532.5
 Trench inv. 528.5

Jty L. C. Jng
 2-16-88

1" = 30'

B 7 8288

SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

please print or type

OEP PERMIT NUMBER

40-81-2129

fill in this form completely

Date Received

8 13

OWNER INFORMATION

CARMAN ASSOCIATES

Box 122

ELLICOTT CITY MD 21043

B 3

LOCATION OF WELL

HOWARD

DAYTON MEADOWS

SECTION Z LOT 4 (AREA 2)

DAYTON

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

DRILLER INFORMATION

Joseph L. Mayne 238

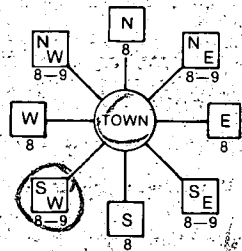
Joseph L. Mayne Well Drilling

5512 Ridge Rd. Mt. Airy 21771

Joseph L. Mayne 5/21/87

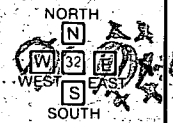
B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



DAYTON MEADOWS ST. DAYTON MEADOWS CR.

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



330 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)

- D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

HOWARD COUNTY NAME A26613 COUNTY NO.

OEP SIGNATURE DATE ISSUED

061287 B. N. Nixon 12/12/87

NORTH GRID 511000 EAST GRID 080200

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
other

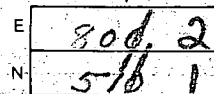
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

- N THIS WELL WILL NOT REPLACE AN EXISTING WELL
Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
D THIS WELL WILL DEEPEN AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)

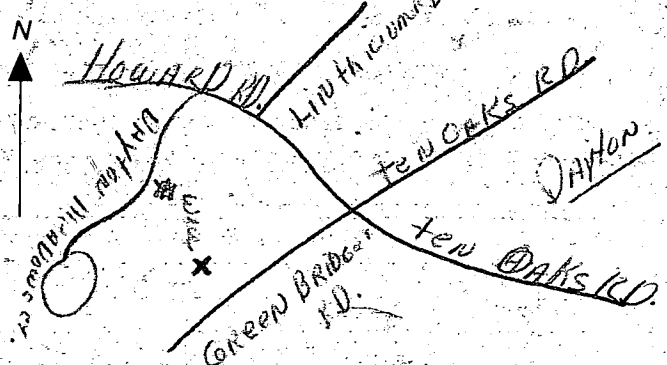
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER 1. Well

WRITE THE BOX NUMBER FROM THE MAP HERE



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



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

APPROX. PERMIT NUMBER GAP

FORCE INITIALS PERMIT NO. 40-81-2129

SPECIAL CONDITIONS

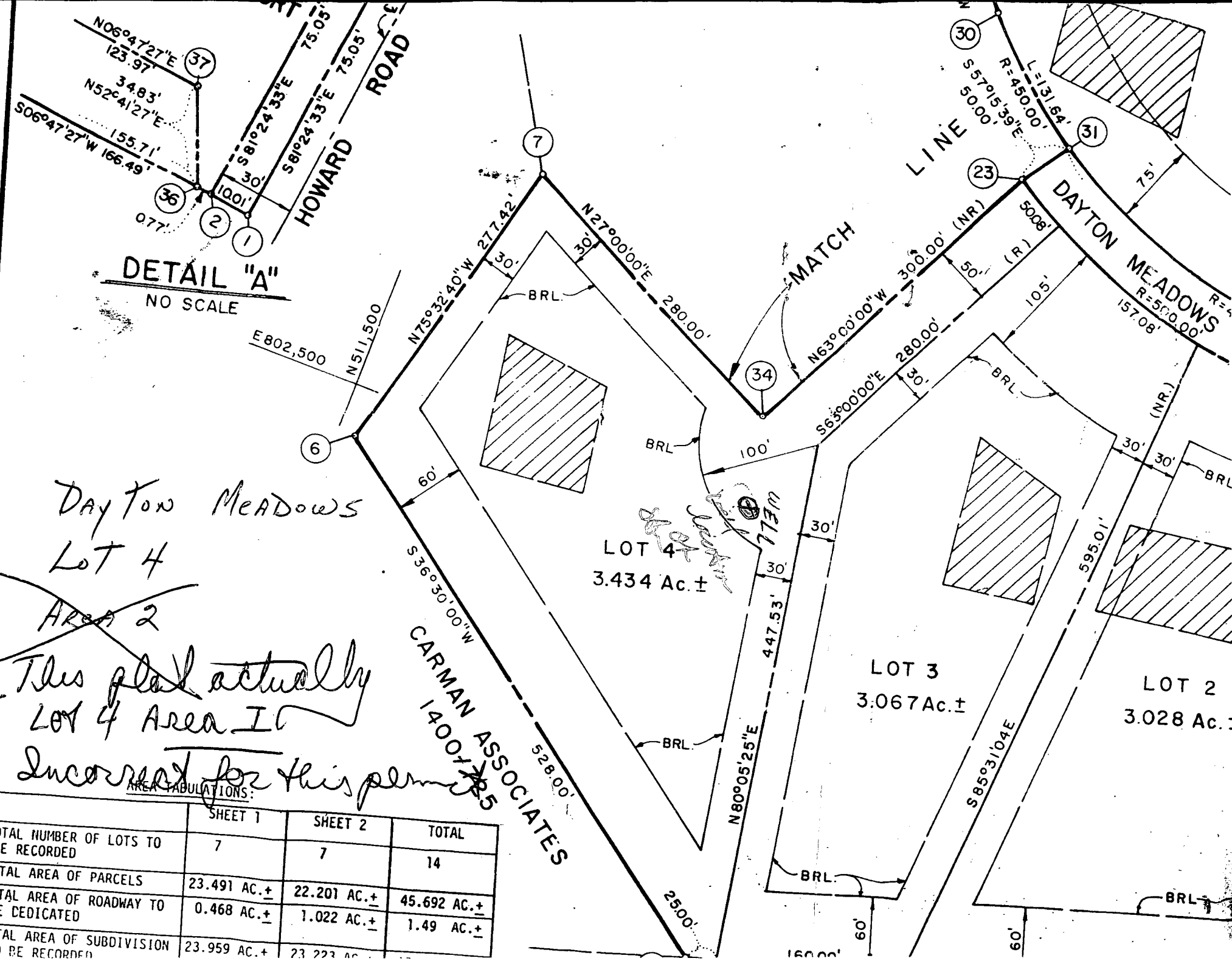
6/26/87

46' casing
location as per stakes

HO sample

— 'open
— bags

HO sample H1090



DETAIL "A"
NO SCALE

Dayton Meadows
Lot 4
Area 2

SPS/87 This plan actually
Lot 4 Area I
Bo Incorrect for this permit

AREA TABULATIONS:

	SHEET 1	SHEET 2	TOTAL
TOTAL NUMBER OF LOTS TO BE RECORDED	7	7	14
TOTAL AREA OF PARCELS	23.491 AC.±	22.201 AC.±	45.692 AC.±
TOTAL AREA OF ROADWAY TO BE DEDICATED	0.468 AC.±	1.022 AC.±	1.49 AC.±
TOTAL AREA OF SUBDIVISION TO BE RECORDED	23.959 AC.±	23.223 AC.±	

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-2129
 Location of property (road) DAYTON MEADOWS CT.
 Subdivision DAYTON MEADOWS Lot 4 Block Plat Sec. 1 AREA 1
 Well Driller JOSEPH MAYNE Owner ASSOCIATES, CARMEN

Depth of well 345'
 Distance of measuring point (M.P.) above ground 18''
 Static water level (S.W.L.) below M.P. 27'

I. High rate pumping -- reservoir drawdown

Time pump started 8:00 Pumping rate 12
 Total time 30 min. to reach pumping water level 182 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 \$ gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
8:15	95	500		12
8:30	182	5		12
8:45	182	23		2 1/2
9:00	182	23		2 1/2
9:15	182	23		2 1/2
9:30	182	23		2 1/2
9:45	182	23		2 1/2
10:00	182	23		2 1/2
10:15	182	23		2 1/2
10:30	182	23		2 1/2
10:45	182	23		2 1/2
11:00	182	23		2 1/2
11:15	182	23		2 1/2
11:30	182	23		2 1/2
11:45	182	23		2 1/2
12:00	182	23		2 1/2
12:15	182	23		2 1/2
12:30	182	23		2 1/2
12:45	182	23		2 1/2
1:00	182	23		2 1/2
1:15	182	23		2 1/2
1:30	182	23		2 1/2
1:45	182	23		2 1/2
2:00	182	23		2 1/2
2:15	182	23		2 1/2
2:30	182	23		2 1/2

4/22/88

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 # 41552
Date 4/22/88

Name of Installer RWR Plumbing

Telephone 388-1663

License Number _____
Certified Well Pump Installer Well Driller _____ Registered Plumber

Name of Property Owner Stephen Tufts / Sandy Stanton Telephone 461-7069
Subdivision Dayton Meadows Ct Lot/# 4 Well Tag # _____
Site Address 3821 Dayton Meadows Ct

Pump	Motor	Pitless Adapter
1. Type	1. Horsepower _____	1. Make _____
a. Deep well jet _____	2. RPM _____	2. Model # _____
b. Shallow well jet _____	3. Voltage _____	3. Depth _____
c. Submersible _____	a. 110 _____	
2. Make _____	b. 220 _____	
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 _____		

Tank	Piping	Well data
1. Capacity _____	1. Type _____	1. Depth _____ ft.
2. Pressure relief valve? _____	2. Size _____	2. Yield _____ GPM
	3. NSF and/or BOCA Code approved _____	3. Static water level _____ ft.
	4. Depth of supply line _____	4. Will water supply be disinfected by installer? _____

APPROVED
NO INS P - CW

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: Sandy Stanton

Date: 4/22/88

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

STATE OF MARYLAND
DEPARTMENT OF HEALTH AND MENTAL HYGIENE
LABORATORIES ADMINISTRATION
REPORT OF WATER ANALYSIS

Bottle Number: H1090 Name: ASSOCIATES, CARMEN County: HOWARD
 Source of Sample: LOT 4 SEC 1 DAYTON MEADOWS Street: DAYTON MEADOWS ST. Town or City: DAYTON MEADOWS Collector: B. Nifan
 Sample Type (Circle): Community Source Non-Community Distribution Private MCL Emergency Recheck Routine
 Remarks: HO 81 2129

13 County Plant No. Sampling Station 062687 Date Collected 1230 M Time Acid Iced
 Field Data: pH* Chlorine Residual Free Total Specific Conductance

✓	ANALYSIS	CODE	RESULTS	✓	ANALYSIS	CODE	RESULTS
	pH*	011			Arsenic	253	
	Alkalinity (Total)	040			Barium	262	
	Alkalinity (HCO ₃)	050			Cadmium	273	
	Alkalinity (CO ₃)	060			Chromium	283	
	pH*, Ca CO ₃ SAT.	071			Lead	302	
	Alkalinity, Ca CO ₃ SAT	080			Mercury	314	
	Hardness	110			Selenium	323	
	Ammonia-N	143			Silver	333	
✓	Nitrate-Nitrite N	162	<u>ND</u>		Aluminum	192	
	Nitrite N	173			Calcium	231	
	MBAS	182			Copper	241	
	Chloride	091			Iron	122	
	Fluoride	101			Magnesium	271	
	Color*	020			Manganese	133	
	Turbidity*	031			Nickel	391	
	Conductance*, SPEC.	201			Potassium	361	
	Silica	210			Sodium	371	
	Sulfate	220			Zinc	342	
	Total Residue	381					

Water Sample Request

For 3/14
10-12

PROPERTY OWNER Stephen Tufts/Sandy Stanton DATE OF REQUEST 7/28/88
TELEPHONE 461-7069 (w) 531-2321 NEW WELL NUMBER HO-81-2129

DIRECTIONS OR INSTRUCTIONS _____

NAME Steve Tufts/Sandy Stanton
ADDRESS 13821 Dayton Meadows Ct. Dayton, Md. 21036
Dayton Meadows - Lot 4, Sec. 1, Area 1.

SAMPLE TYPE REASON FOR REQUEST
 Health Hazard Physician's Advice
 U & O New Residence
 Real Estate Nitrate Monitoring
 Pond or Stream Taste or Odor
 Sewage Treatment System Necessity
 Other Plumbing or Well Repair
 Replacement Well
 Curiosity

SETTLEMENT DATE 1/1/
SEPTIC SYSTEM: Approved Disapproved DATE 4/22/88

CONDITION: _____
SUPPLY TYPE: Drilled Well Hand Dug Spring Public

CONDITION: A-26613
FIRST SAMPLE COLLECTOR Un. Micro Ref. Lab. TIME 12:10 DATE 8/3/88

BACTERIA _____, pH 6.6, Free Cl⁻ _____, Res. Cl⁻ _____, VOC _____
 CHEMICAL _____, LEAD & COPPER ND, NITRATES 1.0, PESTICIDE _____

ACTION: Bacteria Positive

RESAMPLE COLLECTOR Un. Micro Ref. Lab. DATE 8/15/88
 BACTERIA _____, pH 7.1, Free Cl⁻ 0, Res. Cl⁻ 0, TIME 2:25

CHEMICAL _____, Other _____
ACTION: 1 COP issued 8/24/88 JEN

RESAMPLE COLLECTOR J. MENUSTIK DATE 03/14/89
 BACTERIA SS-588, pH 7.0, Free Cl⁻ 0.0, Res. Cl⁻ 0.0, TIME 10:30 AM

ACTION: 3/23/89 F.C.O.P. C.B. (Bacteriophage)

RESAMPLE COLLECTOR _____ DATE 1/1/
 BACTERIA _____, pH _____, Free Cl⁻ _____, Res. Cl⁻ _____, TIME _____

ACTION: _____

0m/5
10-12
3/14

CERTIFICATION OF WATER QUALITY

University Micro Reference Laboratory Inc.

611(P) Hammonds Ferry Road

Linthicum, MD 21090

(301) 789-3636

Certification #127

INVOICE NO: M- /53.20

FIELD DATA

SOURCE: 13821 DAYTON MEADOWS COURT

COUNTY: HOWARD

ZIPCODE: 21036

Contact: SCT CONSTR./STEVE

Date: 08/15/88

Time: 02:25:00

PHONE: (301) 761-7069

Sampler: RAD

Sampler #: HB186

Well #: NO TAG

Free Cl: 0

Total Cl: 0

pH: 7.120

SAMPLE DATA

Coliforms/100ml		N(MB3)	TURBIDITY	SAND	IRON	LEAD		
FECAL	TOTAL	8.362	<0.1	0				
(2.2	(2.2	mg/L	(Ntu)	mg/L	mg/L	mg/L	mg/L	mg/L

MPN PRESUMPTIVE						MPN CONFIRMED					Fecal Confirmed			
m) of Sample	10	10	10	10	10	m) of Sample	10	10	10	10	10	44.5 °C		
GAS 24 hr.	N	N	N	N	N	GAS 24 hr.								
GAS 48 hr	N	N	N	N	N	GAS 48 hr.								

	DATE	TIME	
Received	08/15/88	03:40:00	
Tested	08/15/88	03:45:00	
Reported	08/17/88	02:41:00	

R.D'AGOSTINO, PHD
(Microbiologist)

Microbiological analysis of sample tested indicates that it is SAFE for human consumption. ✓

Sample Analysis	84.00
Septic Testing	
Other Chemistry	
Consultation	
Total	\$ 84.00

MAIL TO: SCT CONSTR.
8310 ECHO DRIVE
ELLCOTT CITY 21043

TERMS: NET DUE UPON RECEIPT, PLEASE RETURN YELLOW COPY WITH YOUR REMITTANCE.

CERTIFICATION OF WATER QUALITY

University Micro Reference Laboratory Inc.

611(P) Hammonds Ferry Road

Linthicum, MD 21090

(301) 789-3636

Certification #127

INVOICE NO: W- 753.10

FIELD DATA

SOURCE: 13821 DAYTON MEADOWS COURT

COUNTY: HOWARD

ZIPCODE: 21036

Contact: SCT CONSTR./STEVE

Date: 08/03/88

Time: 12:10:00

PHONE: (301) 461-7069

Sampler: DB

Sampler #: 88150

Well #: NO TAG

Free Cl: 0

Total Cl: 0

pH: 6.5/2

SAMPLE DATA

Coliforms/100ml		N(NO3)	TURBIDITY	SAND	IRON	LEAD		
FECAL	TOTAL	1.012	24	0				
(2.2)	(2.2)2	mg/L	(Ntu)	mg/L	mg/L	mg/L	mg/L	mg/L

MPN PRESUMPTIVE						MPN CONFIRMED					Fecal Confirmed			
ml. of Sample	10	10	10	10	10	ml of Sample	10	10	10	10	10	44.5 ° C		
GAS 24 hr.	N	P	N	N	N	GAS 24 hr.	N	P	N		N			
GAS 48 hr	P	P	P	N	P	GAS 48 hr.	N	P	N		N			

	DATE	TIME
Received	08/03/88	12:10:00
Tested	08/03/88	01:00:00
Reported	08/06/88	10:33:00

R. D. AGOSTINO, PHD
(Microbiologist)

Microbiological analysis of sample tested indicates that it is **UNSAFE** for human consumption.

Sample Analysis	
Septic Testing	
Other Chemistry	
Consultation	
Total	\$ NC

ALL CHARGES WILL
APPEAR ON FINAL TEST

TERMS: NET ONE UPON RECEIPT. PLEASE RETURN YELLOW COPY WITH YOUR REMITTANCE.

HOWARD COUNTY HEALTH DEPARTMENT

JOYCE M. BOYD, M.D., M.P.H.
COUNTY HEALTH OFFICER



Bureau of Environmental Health
3525 Ellicott Mills Drive
Ellicott City, Maryland 21043

Director - 461-9956
Water & Sewerage, Permits - 461-9933
Community Environmental Health - 461-9944
Technical Services - 461-9955

August 24, 1988

W: 531-2321
Day.

Mrs. Tufts (Sandy Stanton)
Steve Tufts

SCT Construction
8310 Echo Drive
Ellicott City, Maryland 21043

RE: Dayton Meadows - Lot 4, Sec.1
Area 1
13821 Dayton Meadows Court

To Whom It May Concern:

This is to advise you that the septic system was installed, inspected and approved on April 24, 1988.

The water sample recently submitted for testing was free of coliform and fecal coliform bacteria at the time of sampling and is bacteriologically safe for drinking.

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 permit(s) HO-81-2129. No guarantee can be given for health protection beyond this date of issue. Based upon a satisfactory investigation and evaluation by the Howard County Health Department, the Department of Health and Mental Hygiene accepts this well system as required by COMAR 26.04.04.09.

This certificate may become final upon completion of the final bacteriological test which is to be taken and the results submitted to the Howard County Health Department within six months. The well owner accepts his responsibilities under COMAR 26.04.04.10.

June 26, 1987
Date Well Approved

August 15, 1988
Date of Water Sample

Jane E. Nadeau

Approving Authority
Jane Nadeau, Sanitarian
Water and Sewerage Program

STATE OF MARYLAND
DEPARTMENT OF HEALTH AND MENTAL HYGIENE
Laboratories Administration

201 W. Preston St.
 P.O. Box 2355, Baltimore, Maryland 21203
 J. Mehlen Joseph, Ph.D., Director

Lab. No. 417086

BACTERIOLOGICAL DRINKING WATER REPORT
Field Record

SAMPLE TYPE:	Source <u>STEPHEN TUFTS</u>		
Community <input type="checkbox"/>	Location: <u>13821 DAYTON MEADOWS CT (KITCHEN TAP)</u>		
Non-Community <input type="checkbox"/>	Iced: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Time Collected <u>10:03</u> <input checked="" type="checkbox"/> am. <input type="checkbox"/> pm.	
Private <input checked="" type="checkbox"/>	Treated: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Bottle No. <u>55-588</u>	
Check Sample <input type="checkbox"/>	Collector # _____	Collector Name <u>J. MENUSTIK</u>	
Special <input type="checkbox"/>	Collector Name _____	County <u>HOWARD</u>	

<u>13</u> County	<u> </u> Plant No.	<u> </u> Sampling Station	<u>03 14 89</u> Date Collected
---------------------	--------------------------	---------------------------------	-----------------------------------

pH 7.0 Res. Cl: Free 0.0 Total 0.0 Card No.

LABORATORY RECORD

Thiosulfate: Pres. Absent Undetermined

PRESUMPTIVE TEST*

ml. of Sample	10ml.			
Gas, 24 hours	-	-	-	-
Gas, 48 hours	-	-	-	-

CONFIRMED TEST

ml. of Sample	10ml.				
Coliforms †	-	-	-	-	-
Fecal Coliforms ‡	-	-	-	-	-

No. of Pos.
<u>0</u>

Presumptive Coliforms/100 ml. (Membrane Filter) =

Verified Coliforms/100ml. (Membrane Filter) =

SPC Dil. 1:..... Col. Counted:

Standard Plate Count §/ml.

- ** using m Endo-Agar LES at 35°C incubation
- * using Lauryl Sulfate Trypticase Broth at 35°C incubation
- † using Brilliant Green Lactose Bile Broth at 35°C incubation
- ‡ using EC Broth at 44.5°C incubation
- § using Plate Count Agar at 35°C incubation

Laboratory

Annapolis	<input type="checkbox"/>	Cumberland	<input type="checkbox"/>
Cambridge	<input type="checkbox"/>	Frederick	<input type="checkbox"/>
Central	<input checked="" type="checkbox"/>	Salisbury	<input type="checkbox"/>
Cheverly	<input type="checkbox"/>		

Date & Hour: 03 14 89 10:03

Recd. MB

Exam MB

Rept. MB

Remarks _____

Bacteriologist C. Case

HOWARD COUNTY HEALTH DEPARTMENT

JOYCE M. BOYD, M.D., M.P.H.
COUNTY HEALTH OFFICER



Bureau of Environmental Health
3525 Ellicott Mills Drive
Ellicott City, Maryland 21043

Director - 461-9956
Water & Sewerage, Permits - 461-9933
Community Environmental Health - 461-9944
Technical Services - 461-9955

March 2, 1989

Mr. Steve Tufts
13821 Dayton Meadows Court
Dayton, Maryland 21036

RE: Dayton Meadows, Lot 4, Sec. 1
13821 Dayton Meadows Court
Well Permit #HO-81-2129

Dear Mr. Tufts:

A review of our records indicates that final satisfactory water samples were not obtained at the above referenced property. You are requested to contact this office at 461-9933 to arrange for those samples to be taken. These samples are required in order to comply with Maryland Well Construction Regulation (COMAR 26.04.04.09A(1) which states that: "A person may not put into service a well or water supply system that may be used for human consumption unless a Certificate-of-Potability has first been issued for the well by the approving authority...".

An Interim Certificate-of-Potability was issued based on one satisfactory water sample. The enclosed copy of that Interim Certificate stipulates that a second safe sample be obtained. The purpose of the second sample is to assure that the well is not vulnerable to re-contamination.

You are encouraged to call this office at 461-9933 to arrange an appointment for the second sample from an inside tap which is the most reliable location from which to obtain a safe sample.

If you have any questions relative to this matter, please call 461-9933.

Very truly yours,

A handwritten signature in cursive script that reads "Charles B. Streaker".

Charles B. Streaker, Sanitarian
Water and Sewerage Program

CBS:hs

Enclosure

HOWARD COUNTY HEALTH DEPARTMENT

JOYCE M. BOYD, M.D., M.P.H.
COUNTY HEALTH OFFICER



Bureau of Environmental Health
3525 Ellicott Mills Drive
Ellicott City, Maryland 21043

Director - 461-9956
Water & Sewerage, Permits - 461-9933
Community Environmental Health - 461-9944
Technical Services - 461-9955

March 27, 1989

Mr. Stephen Tufts
13821 Dayton Meadows Court
Dayton, Maryland 21036

RE: Dayton Meadows, Lot 4,
Section 1, Area 1
13821 Dayton Meadows Court
Well Permit #HO-81-2129

Dear Mr. Tufts:

This is to advise you that the septic system was installed, inspected and approved on April 22, 1988.

The water sample recently submitted for testing was free of coliform and fecal coliform bacteria at the time of sampling and is bacteriologically safe for drinking.

FINAL CERTIFICATE OF POTABILITY

This certifies that all sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under permit(s) HO-81-2129.

Date of Final Sampling
March 14, 1989

Date of Acceptance
March 23, 1989

Charles B. Streaker, Sanitarian
Water and Sewerage Program

Water Sample Dates: 8/15/88
.3/14/89

CBS:hs