

B 1 5183
1 2 3 6

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL

STATE PERMIT NUMBER
HO-94-3707
70 fill in this form completely 79

518995 please type KN

Date Received (APA)
6/26/03
8 MM DD YY 13

OWNER INFORMATION

15 Last Name Owner First Name 34
Monroe Builders Henry
36 5682 Chamblis Dr. Street or RFD 55
57 Clarksville Md 21029 Town State Zip 76

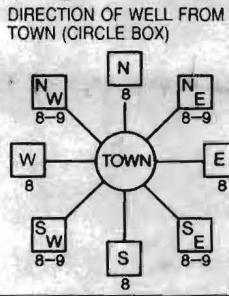
B 3 LOCATION OF WELL

8 COUNTY Howard 21
23 SUBDIVISION Broadwater 42
SECTION 44 46 LOT 2 48 50
52 NEAREST TOWN Clarksville 71
MILES FROM TOWN (enter 0 if in town) 1 M 1
73 76 77 78

DRILLER INFORMATION

76 Driller's Name Joseph E. Magna M 5 D 0 2 4 License No. 81
Firm Name Joseph E. Magna Well Drilling
Address 5512 Ridge Rd. Mt Airy, Md 21771
Signature Joseph E. Magna Date 6/4/03

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



5673 Chamblis Drive
11 NEAR WHAT ROAD 30
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
34 400 37 DISTANCE FROM ROAD FT
ENTER FT OR MI 38 39
TAX MAP: 28 BLK: 22 PARCEL 3060

B 2 WELL INFORMATION

1 2 APPROX. PUMPING RATE 5 GAL. PER MIN. 8 12
AVERAGE DAILY QUANTITY NEEDED 500 GAL. PER DAY 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
- FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
- INDUSTRIAL, COMMERCIAL, DEWATERING
- PUBLIC WATER SUPPLY WELL
- TEST, OBSERVATION, MONITORING
- GEO-THERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard A 29011
COUNTY NAME COUNTY NO.
STATE SIGNATURE INSERT S → 41
DATE ISSUED 6-10-03 Kacie Norman 6-10-04
43 MM DD YY 48 CO SIGNATURE EXP. DATE
NORTH GRID 505 0 0 0 EAST GRID 811 0 0 0
50 55 57 63

APPROXIMATE DEPTH OF WELL 300 FEET
24 28

APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN
30 AIR-ROTary AIR-PERcussion ROTARY (Hydraulic Rotary)
37 CABLE REVerse-ROTary DRive-POINT
other

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

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

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

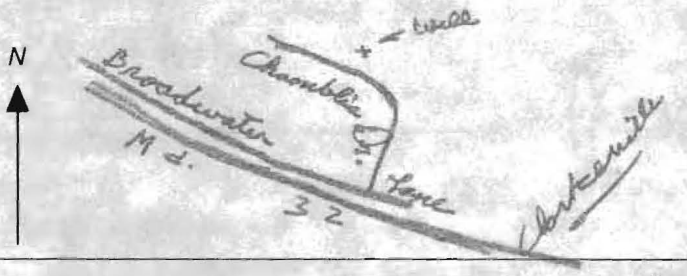
- SOURCES OF DRILLING WATER
1. well
 - 2.
 - 3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E 811
N 5095

6/23/03 well & Ground
54' Annular (50)
17 Bags
340' well
64' Casing

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 (MDE OR COUNTY USE ONLY)

APPROP. PERMIT NUMBER G
PERMIT No. HO-94-3707
70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

DO NOT DISCARD

June 24, 2003
Henry Monroe Builders Inc.
5682 Chamblis Drive
Clarksville, Maryland 21029
Office 301-854-0750
Fax 410-531-5085

Frank Skinner, Director
Howard County Health Department
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, Maryland 21043

Subject: variance on existing well

Mr. Skinner, *relaxation of the setback policy*
This is an application for a ~~variance~~ to save the original well for "standby" for the following property:

Owners: Dave and Laurett Buscher
5673 Chamblis Drive
Clarksville, Maryland 21029

The well will be used for non-potable purposes of irrigation and swimming pool topoff.

A new well, HO-943707, was drilled by Joe Mayne on June 18, and I assume his paper work will follow. This well will now serve the house and new addition. The owners urge your agreement on this matter as the new well is 6 gpm and may not be enough to supply a new irrigation system and all other normal residential use. The distances from existing well to structures involved are: *15'f to new addition, 18 feet to new pool, and 20 feet to new baby pool.* *10' OK (SRK)*

The new addition and pool are laid out on the site and could be observed while inspecting a perc test on the existing septic field to spec the repair. Alan Whitworth Excavation is the subcontractor

Please call me, Mike Marrie, if you have any questions. My cell number is 301-980-8778.

Thank You,



Mike Marrie
Henry Monroe Builders, Inc.

Request approved (SRK/FS)
7/7/03

Enclosed: Plot plan with proposed construction and location of well.

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: Custom Pkg & Htg Co Telephone #: 410.791.8358
Address: 16482 Greenmount Drive
Elkridge, Md 21075

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

License # and name of individual responsible for the field installation:
Name (Print): Michael Oremont License# 8544

*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 Bussler Telephone #: 410-531-5371
Subdivision: Broadwater Estates Lot #: 2 Well Tag #: HO-94-3707 ✓
Site Address: 5678 Chamblee Drive
Clarksdale Md 21029

Submersible Pump Data Pitless Adapter Well Cap and Electric Conduit
Make: Gould Make: Morison Two piece watertight cap: ✓
Model #: 565010412 Model#: BP10X Screened, vented well cap: ✓
Pump Capacity 5 GPM Depth: 42 (36" min) Cap secured to casing: ✓
Well Yield: 6 GPM NSF approved: ✓ Conduit min 18" B.G.: ✓
Depth of well encountered at time of pump installation 740 (feet) Conduit secured to well cap: ✓
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 ✓

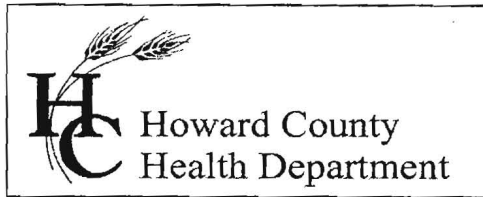
Piping to house House Connection
Type: PVC PVC sleeved to undisturbed soil at wall penetration: ✓
PSI: 160 (160 psi min) Approximate length of sleeve: 10'
Depth of supply line: 42 (36" min) Sleeve caulked and sealed properly: ✓

The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Signature of company representative responsible for installation: Michael Oremont date: 9/16/03

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

Date Insp. Requested: _____ Date Insp. Approved: 9/17/03 (50)
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 ✓



3525 H Ellicott Mills Drive, Ellicott City, MD 21043
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

Penny E. Borenstein, M.D., M.P.H., Health Officer

April 29, 2004

David Buscher
5673 Chamblis Drive
Clarksville, MD 21029

RE: Replacement well
5673 Chamblis Drive
Broadwater Estates, Lot 2
Well Permit # HO-94-3707

Dear Mr. Buscher:

This is to advise you that the septic system for the above referenced property has been installed and inspected. **Final approval of the septic system was granted on 09/16/2003.**

The water sample results indicate that the water samples submitted for testing were free of coliform and fecal coliform bacteria at the time of sampling and are bacteriologically safe for drinking. The water sample results were found to be in compliance with COMAR water quality standards.

INTERIM CERTIFICATE OF POTABILITY

This certifies that the **initial** sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under well permit #HO-94-3707. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies. Based upon satisfactory investigation and evaluation, the Howard County Health Department, as authorized by the Maryland Department of the Environment accepts this well system as required by COMAR 26.04.04.

This certificate may become final upon completion of the second bacteriological test, which is to be taken by the county health department within six months of receipt of this letter. **Please contact (410) 313-1773 to schedule a final water sample appointment. Currently, there is no charge for this final sampling.**

Date of Water Sample: 04/20/2004
Date of Well Completion: 06/23/2003

Respectfully,

Brian Baker, R. S.
Well and Septic Program

BB/mlb
cc: Community Services Program
File