

C1 08157

SEQUENCE NO. (MDE 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)

FILL IN THIS FORM COMPLETELY PLEASE TYPE

COUNTY NUMBER 4-520 385 4-520 448

ST/CO USE ONLY

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL" 140-95-2354

DATE Received MM 07 DD 28 YY 12

MM 09 DD 12 YY 12

22 165 26 10/11/2012

28 29 30 31 32 33 34 35 36 37

OWNER Land Marketing Consultants

WELL SITE ADDRESS last name HAYLAND Court first name TOWN CLACKSVILLE MD

SUBDIVISION WALNUT CREEK SECTION LOT 57

WELL LOG

Not required for driven wells

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) Y N

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 14 NO. OF POUNDS 9400

GALLONS OF WATER 84

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 53 ft. (enter 0 if from surface)

CASING RECORD

ST CO PL OT STEEL CONCRETE PLASTIC OTHER

MAIN CASING TYPE PC Nominal diameter top (main) casing (nearest inch)! 6 Total depth of main casing (nearest foot) 55

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

SCREEN RECORD ST BR HO PL OT STEEL BRASS BRONZE PLASTIC OPEN HOLE OTHER

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. Rows include Top Soil, CLAY, Sand Stone, White MICA, Sand Stone, White MICA.

C3

PUMPING TEST

HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min.) 10

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 24 ft.

WHEN PUMPING 26 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. 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) + above LAND SURFACE - below 2 (nearest foot)

LATITUDE 39.14.278 LONGITUDE 76.56.730 (DEFAULT COORD. WGS 84)

NOTES:

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED Y 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. M SD 117 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. D

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

C2 DEPTH (nearest ft.)

Table with columns: 1-2, 8-9, 11, 15, 17, 21, 23-24, 26, 30, 32, 36, 38-39, 41, 45, 47, 51. Rows A, C, H, S, C, R, E, E, N.

DIAMETER OF SCREEN (NEAREST INCH) 56 60 from to

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

MDE 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

B 1 14939

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL

STATE PERMIT NUMBER

HO - 95 - 2354

fill in this form completely

538031-F please type

Date Received (APA)

08 06 12

OWNER INFORMATION

Land Marketing Consultants PO Box 482 LISBOW MD 21065

B 3 LOCATION OF WELL

Howard COUNTY WALNUT CREEK SUBDIVISION CLANKSVILLE NEAREST TOWN

DRILLER INFORMATION

Ralph E. Mayne M S D 119 Driller's Name License No. 76 81 Ralph Mayne Well Drilling Firm Name 12024 Handy Rd Mt Airy MD 21071 Address Date 4/14/12

B 4 SOURCES OF DRILLING WATER

HAYLAND Ct. STREET ADDRESS 11 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) DISTANCE FROM ROAD ENTER FT OR MI TAX MAP: 28 BLK: 11 PARCEL 49

B 2 WELL INFORMATION

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

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard A520385 13 COUNTY NAME A520448 COUNTY NO. STATE SIGNATURE DATE ISSUED 08/15/12 EXP. DATE 8/15/13

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- Domestic Potable Supply & Residential Irrigation, Farming, Industrial, Commercial, Dewatering, Public Water Supply Well, Test, Observation, Monitoring, Open Loop Geothermal, Closed Loop Geothermal

APPROXIMATE DEPTH OF WELL 150 FEET

APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH

METHOD OF DRILLING (circle one)

AIR-ROTARY, JETTED, Jettied & DRIVEN, AIR-PERCussion, ROTARY (Hydraulic Rotary), CABLE, REVerse-ROTary, DRive-POINT

REPLACEMENT OR DEEPEINED 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 DEEPEIN AN EXISTING WELL

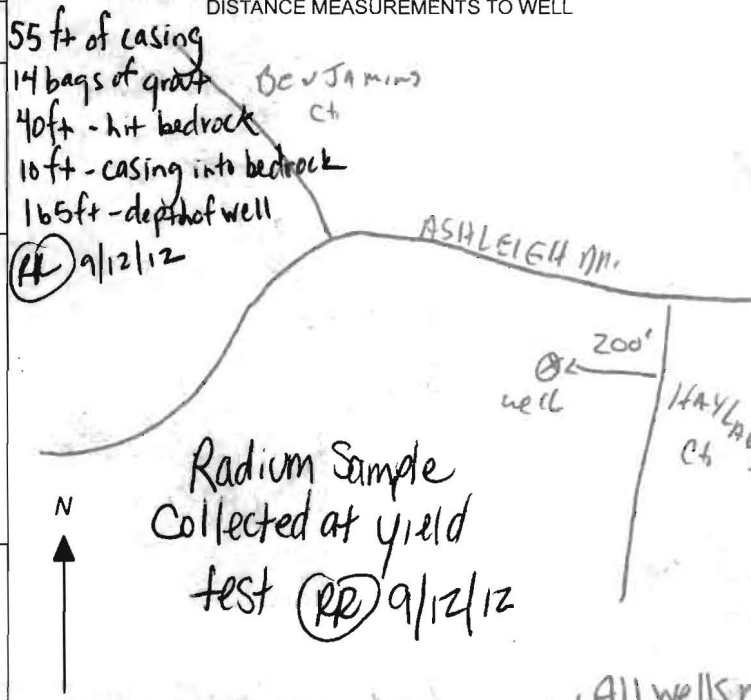
Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROX. PERMIT NUMBER HO 2006G020 PERMIT No. HO - 95 - 2354

SPECIAL CONDITIONS

NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

PROPOSED LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURES SUCH AS BUILDINGS, SEPTIC SYSTEM, ROADS AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCE MEASUREMENTS TO WELL



55 ft of casing, 14 bags of grout, 40ft - hit bedrock, 10ft - casing into bedrock, 165ft - depth of well

ASHLEY LN, HAYLAND Ct, Radium Sample Collected at yield test (RR) 9/12/12

All wells must be at least 100' apart

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
WELL & SEPTIC PROGRAM
TEL: (410)313-1771 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: Tri-Country Pump Service, Inc Telephone #: 301-432-0330
Address: 6711 Old National Pike
Dyersburg, 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): William E. Griffith License# 20135

*A licensed individual must perform the actual installation. Apprentices must be under the supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification. Unlicensed individuals may be reported to the appropriate licensing agency.

Name of Property Owner: Craftmark Homes Telephone #: 703-932-0573
Subdivision: Walnut Creek Lot #: 57 Well Tag #: HO-95-2354
Site Address: Grace Myrtle
Ellicott City, Md

Submersible Pump Data Pitless Adapter Well Cap and Electric Conduit
Make: Siba Kits Make: American Grundy Two piece watertight cap: VS
Model #: S7P4HS0522 Model#: PT800 Screened, vented well cap: Y
Pump Capacity 7 GPM Depth: 36 (36" min) Cap secured to casing: Y
Well Yield: 10 GPM NSF/WSC approved: Y Conduit min 18" B.G.: Y
Depth of well encountered at time of pump installation: 165 (feet) Conduit secured to well cap: YES
If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 1718.4
Torque arrestors, Cable guards, or other acceptable method used- Must circle one
Safety rope, if used, attached to brass rope adapter or other acceptable method inside of well casing

Piping to house House Connection
Type: Poly PVC sleeve to undisturbed soil at wall penetration: VS
PSI: 100 (160 psi min) Length of sleeve(5' minimum from foundation): 20
Depth of supply line: 36 (36" min) Sleeve sealed properly: Y

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: William E. Griffith date: 4-4-2014

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

Date Insp. Requested: Date Insp. Approved: Inspector:
Inspection Data: Pitless adapter watertight & 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 not outside of well cap/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

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Company Name: _____ Telephone #: _____
 Address: _____

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer
 License # and name of individual responsible for the field installation:

Name (Print): _____ License# _____

***A licensed individual must perform the actual installation. Apprentices must be under the supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification. Unlicensed individuals may be reported to the appropriate licensing agency.**

Name of Property Owner: _____ Telephone #: _____
 Subdivision: _____ Lot #: _____ Well Tag #: HO - ____ - ____
 Site Address: _____

Submersible Pump Data

Make: _____
 Model #: _____
 Pump Capacity _____ GPM
 Well Yield: _____ GPM

Pitless Adapter

Make: _____
 Model#: _____
 Depth: _____ (36" min)
 NSF/WSC approved: _____

Well Cap and Electric Conduit

Two piece watertight cap: _____
 Screened, vented well cap: _____
 Cap secured to casing: _____
 Conduit min 18" B.G.: _____

Depth of well encountered at time of pump installation: _____ (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, Cable guards, or other acceptable method— Must circle one

Safety rope, if used, attached to brass rope adapter or other acceptable method inside of well casing _____

Piping to house

Type: _____
 PSI: _____ (160 psi min)
 Depth of supply line: _____ (36" min)

House Connection

PVC sleeve to undisturbed soil at wall penetration: _____
 Length of sleeve(5' minimum from foundation): _____
 Sleeve 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 _____ date _____

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

Date Insp. Requested: 4/7/14 Date Insp. Approved: 4/8/14 Inspector: KG
 Inspection Data: Pitless adapter watertight & 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 not outside of well cap/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 ✓

95 2354



7178 Columbia Gateway Dr., Columbia, MD 21046
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

Peter L. Bielensohn, M.D., M.P.H., Health Officer

TO ALL INTERESTED PARTIES

When submitting a well application for a proposed well for new construction, please indicate one of the following:

Well Site Location:

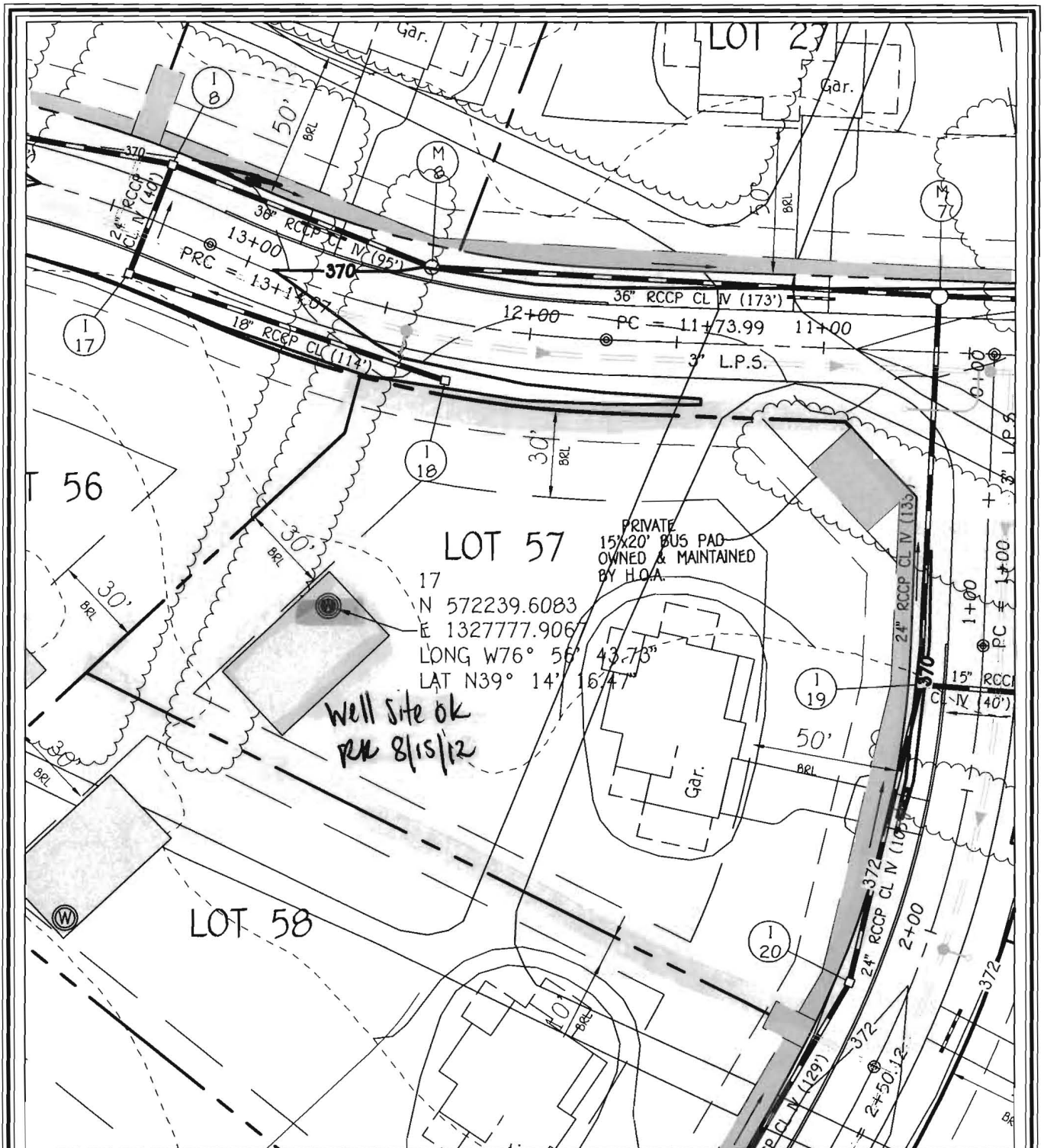
<u>Walnut Creek</u>	<u>57</u>	<u>Hayland Court</u>
Subdivision/Property Name	Lot #	Road Name

The well site has been staked by Fisher, Collins, and Carter, Inc.,
(professional land surveyor or company employing professional land surveyors)
on 04/22/12 (date) and does not require a site inspection.

The well driller, builder or property owner will call the Health Department to schedule a time to meet in the field to verify the proposed well site location.

This sheet, along with two copies of an acceptable well site plan, must be attached to the green well permit application.

Revised 3/11/07



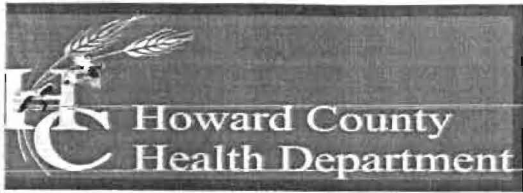
WELL LOCATION INFORMATION:
 NORTHING = EASTING =
 LATITUDE = LONGITUDE =

**LOT 57 WELL MAP
 WALNUT CREEK
 PHASE TWO**

Lots 23 - 60, Non-Buildable Preservation Parcels
 'C', 'G', 'I', 'K', 'L' And 'M', Buildable Bulk Parcels 'E' And 'H'
 & Non-Buildable Parcel 'J'

ZONED: RC-DEO & RR-DEO
 TAX MAP No. 28 GRID Nos. 4, 5, 10-12, 17, AND 18 PARCEL No. 49
 FIFTH ELECTION DISTRICT HOWARD COUNTY, MARYLAND
 DATE: JULY 30, 2012 SCALE: 1"=50'

FISHER, COLLINS & CARTER, INC.
 CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS
 CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE
 ELLICOTT CITY, MARYLAND 21042
 (410) 461 - 2955



Bureau of Environmental Health

7178 Columbia Gateway Drive, Columbia, MD 21046-2147

Main: 410-313-2640 | Fax: 410-313-2648

TDD 410-313-2323 | Toll Free 1-866-313-6300

www.hchealth.org

Facebook: www.facebook.com/hocohealth

Maura Rossman, M.D., Acting Health Officer

January 3, 2013

Bassler Venture
Attn. Tim Feaga
15950 North Avenue, P.O. Box 482
Lisbon, Maryland 21765

RE: Walnut Creek Lot 57
Hayland Court
Well Tag: HO - 95 - 2354

Dear Mr. Feaga:

A sample was collected during a yield test on September 17, 2012 and submitted to the Department of Health & Mental Hygiene Laboratories to assess the possible presence of **Gross Alpha** and **Gross Beta** in the future well water supply. **Gross Alpha** and **Gross Beta** measure the total alpha and beta particle activity in a water supply. These naturally occurring radioactive nuclides have been demonstrated to be present in a certain type of geologic formation known as the Baltimore Gneiss which exists in your area of development within the County.

Results from this screening revealed a **Gross Alpha** of $< 2.0 \pm 0.0$ picocuries/liter (pCi/L), while the **Gross Beta** level was $< 4.0 \pm 0.0$ pCi/L. The **Gross Alpha** result was below its **maximum contaminant level (MCL)** of 15 pCi/L, while the **Gross Beta** level was below its targeted value of 50 pCi/L (roughly equivalent to the **annual dose rate** of 4 millirems/year).

At the time of testing and with respect to these parameters, the future well water supply meets EPA regulatory standards. Additional testing **for these parameters** will not be required to secure the future Use & Occupancy. **Please note** that other standard testing parameters (bacteria, nitrate, turbidity and sand) will still be required to help secure Use & Occupancy.

A copy of the test results is enclosed for your information. Please call this office at 410-313-1773 if you have any further questions.

Sincerely,

A handwritten signature in cursive script that reads 'Bert Nixon'.

Bert Nixon, Director
Bureau of Environmental Health

Enclosure

cc: Barry Glotfelty, MDE Water Mgmt.
Well & Septic property file

Send Report To:

Bert Nixon

State of Maryland
DHMH - Laboratories Administration
Division of Environmental Chemistry
RADIATION LABORATORY

E000563 13

Howard County Health Department
Bureau of Environmental Health
7178 Columbia Gateway Drive
Columbia, Maryland 21046

201 W. Preston Street, Baltimore, Maryland 21201
John M. DeBoy, Dr. P. H., Director

LABORATORY ANALYSIS REQUEST

Sample Bottle No. A: 95-2354 No. B: _____ Field Blank Bottle No. 1: 2354A No B: _____

Plant/Site Name: Walnut Creek County: Howard

Sample Source: Hayland Court-Lot 57 Location: H0-95-2354
(well no, lab sink, sample tap, etc.)

County: 1 3 Plant No.

CHECK (one per box)

Drinking Water
Landfill
Stream
Other

Community
Non-community
Private
Other

Source (raw water)
Distribution (treated)
MCL

Emergency
Routine
Recheck
Special

Collector: R. Rappaport

Telephone No.: 410-313-1781

Date Collected: 9/12/12

Time Collected: 11:15 a.m. _____ p.m.

Nitric Acid Preserved: Yes No

Iced: Yes No

Submitters Code: Federal Project:

Field Data: _____ pH _____ Chlorine _____

Remarks: Sample Collected During Yield Test

✓	Test	EPA Code	Laboratory No.	Results (pCi/L)	Date Analyzed	Date Reported
✓	Gross Alpha	4000	0563	< 2.0	09/19/12	09/20/12
✓	Gross Beta	4100	0563	< 4.0	"	"
	Radon-222 Bottle A	4004				
	Radon-222 Bottle B	4004				
	Field Blank #A	4004				
	Field Blank #B	4004				
	Tritium					
	Ra - 226	4020				
	Ra - 228	4030				
	Total Uranium	4006				

Date Received: 09/13/12

Supervisor: [Signature]

Tel. No.: (410) 767 - 5537 Fax No.: (410) 333- 5373

Martin, Sharhonda

From: Tudor, Matt
Sent: Tuesday, July 22, 2014 8:24 AM
To: Day, Lori; Wolf, Kevin
Cc: Hart, Amy; Rocco, Anthony; Baker, Brian; Martin, Sharhonda; Williams, Jeffrey; Bozzell, Duane
Subject: U&O Release 5002 Crape Myrtle Court

On the morning of July 11th, Duane Bozzell observed the start-up of a Sewage Grinder Pump at the Walnut Creek Shared Septic System:

Walnut Creek, Contract 50-4330-D
Craftmark Homes, Lot #57
5002 Crape Myrtle Court
Ellicott City, MD 21042

The Sewage Grinder Pump test was successful ; the Bureau of Utilities releases its hold on this property for U&O.

Matt
410-313-4934 office
410-978-1320 mobile

Well Line Inspection Checklist

Tag 10 95 2354

- Date of the **Requested Inspection**
- Date of the **Actual Inspection**
- Date of **Final Approval**
- Did the Contractor complete the top portion of the sheet **PRIOR** to inspection?

1. Is the **Pitless Adaptor** watertight?

- Does the curve in the adaptor match the curve of the casing at the point of contact (seal/gasket)
- Is the adaptor Lead-free Brass or Stainless Steel
- ✓ Does the adaptor have a seal/gasket
- ✓ Is the water line securely fastened to the adaptor
- Is there an undercut beneath the adaptor
- Was it filled with back fill or gravel?
- ✗ Is the adaptor at least 36 inches below grade
+ With current grade 24"

2. Is the **Well Cap** on?

- Is it tight and secure *36" +*
- Are the bolts snug
- ✓ Does the cap have a vent/screen
- Does the cap have a place for electrical conduit
- Is the cap a two piece design (top and bottom)

3. Is the **Electrical Conduit** installed?

- Does the conduit extend at least 18 inches below grade
- ✓ Is the conduit glued into the coupling
- Is the conduit secure in the cap

4. Is the **Safety Rope** NOT outside of the well cap/casing?

5. Is the **Well Tag** attached to the casing?

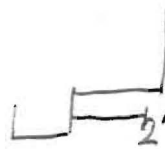
- Is the tag attached correctly (1/2 inch stainless steel band, or equivalent)
- ✓ Is the tag number correct
- Is the tag at least 8 inches above final grade

6. Is the **Water Supply Line** connected?

- Is it at least 36 inches below grade
- ✓ Is the trench bedded with gravel in necessary
- Is the water line sleeved adequately into the house
- Is the sleeve extended to at least 5 feet from any foundation
- Is the water line into the foundation sidewall or under the foundation floor
- *If under foundation floor, line is not required to be sleeved at connection point**
- Is the connection point waterproofed (ex. Tar)

7. Is the **Casing Properly/Adequately Grouted**?

- ✓ Is there a visible open annular spacing
- Is there grout at the site of water line service, or up to grounds surface
- ✓ Is there at least 2 inches around the nominal casing size
- ✓ Is the grout continuous and uniform





Fredericktowne Labs Inc.

ENVIRONMENTAL TESTING

3020 Venable Court * P.O. Box 245 * Myerstown, MD 21773 * 301-293-3340 * Fax 301-293-3266
www.fredericktownelabs.com * info@fredericktownelabs.com

Certificate of Analysis

Acct. No. 3948 - 1116-1

Field Record

Site visit performed on: Monday, July 14, 2014 11:03 AM
by: Chris Taylor State ID No. 9379CT
Affiliation: Tri-County Pump Service
Property Owner: Craftmark Homes
Property Address: Lot 57, 5002 Crape Myrtle Way
Ellicott City, MD
Sample Source: Power Room ✓

Well No.: HO-95-2354

Field pH: 6.8

Total Res. Cl.: 0.0 mg/l ✓

REVISED
Address 7/17/14

OK ✓
8/1/14

Laboratory Report

Sample Received at laboratory: 7/14/2014 12:03 PM

Bacteriological results:

Total Colif. (/100ml)	E.coli. (/100ml)	Start		End		Method	Analyst
		Date	Time	Date	Time		
<1 ✓	<1 ✓	07/14/14	14:00	07/15/14	14:49	9223B	JD

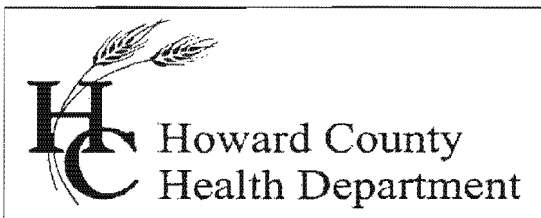
Bacteriological analysis of this sample indicates the water is safe for human consumption and meets federal, state and local requirements. Analysis was performed according to the 20th edition of Standard Methods

Inorganic Chemical results:

Parameter	Result	Units	MCL	Date of Analysis	Method	Analyst
Nitrate-Nitrogen ✓	1.5	mg/l	10	7/14/2014	300.0	JD
Sand ✓	<2	mg/l	5	7/14/2014	0.065mm Filter	KB
Turbidity ✓	0.8	NTU	10	7/14/2014	180.1	KB

Reported by: Colleen Mellott 7/17/14
Name Date

Fredericktowne Labs, Inc. is a State Certified Water Quality Laboratory
Maryland Cert. No. 118 Virginia Cert. No. 00444
MDOT WBE Cert. No.: 91-158



Bureau of Environmental Health

8930 Stanford Blvd., Columbia, MD 21045
Main: 410-313-1771 | Fax: 410-313-2648
TDD 410-313-2323 | Toll Free 1-866-313-6300
www.hchealth.org

Facebook: www.facebook.com/hocohealth
Twitter: HowardCoHealthDep

Maura J. Rossman, M.D., Health Officer

INTERIM CERTIFICATE OF POTABILITY

Expiration Date – FEBRUARY 1, 2015

August 1, 2014

Homeowner
5002 Crape Myrtle Court
Ellicott City, MD 21042

**RE: Walnut Creek, Lot 57
5002 Crape Myrtle Court
Building Permit: B13004347
Well Permit: HO-95-2354**

Dear Homeowner:

This is to advise you that the septic system installation and water well construction for the above referenced property have been inspected and approved. Final approval of the septic system was granted on 7/11/2014. Final approval of the well line connection to the dwelling was granted on 4/8/2014. The well construction was completed on 9/12/2012. Water samples were collected on 7/14/2014.

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. 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-95-2354. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies.

This Interim Certificate of Potability will expire **six months** from the date of issuance. Submission of a second bacteriological test indicating the water is free of coliform and fecal coliform bacteria is required prior to the expiration date, after which time a Final Certificate of Potability will be issued. **Failure to submit an additional sample and obtain a Final Certificate of Potability will result in a Notice of Violation and is punishable as a misdemeanor under the *Annotated Code of Maryland, Environment Article, 9-1311*, subject to a fine of up to \$500 or imprisonment not to exceed three months.**

Please contact (410) 313-1773 to schedule a final water sample appointment or contact a Maryland certified water laboratory to schedule a water sample. A list of laboratories certified by the state of Maryland may be found at the following website:
<http://www.mde.state.md.us/assets/document/WSP-Labs-2010apr16.pdf>

Approving Authority,



Robert Bricker, REHS/R.S., L.E.H.S.
Environmental Sanitarian
Well & Septic Program

cc: Howard County Dept. of Inspections, Licenses, and Permits
Community Hygiene Program
File