

C1 **3121** SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND
WELL COMPLETION REPORT
 FILL IN THIS FORM COMPLETELY
 PLEASE TYPE

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

1 2 3 6
 (THIS NUMBER IS TO BE PUNCHED
 IN COLS. 3-6 ON ALL CARDS)

ST/CO USE ONLY
 DATE Received
 MM DD YY
 11 07 11

DATE WELL COMPLETED
 MM DD YY
 10-11-11

Depth of Well
 22 100 26
 (TO NEAREST FOOT)

COUNTY
 NUMBER

PERMIT NO.
 FROM "PERMIT TO DRILL WELL"
 116-95-7203

OWNER NICHOLS BROTHERS CONSTRUCTION
 WELL SITE ADDRESS HOWARD RD TOWN DAYTON
 SUBDIVISION STUDDARD PRODUCTS SECTION _____ LOT 3

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		check if water bearing
	FROM	TO	
Top Soil	0	2	
Brown mica	2	40	
Grey mica	40	62	
Brown mica	62	65	
Grey mica	65	70	
Brown mica	70	72	✓
Grey mica	72	76	
Brown mica	76	78	
Grey mica	78	90	
Brown mica	90	92	✓
Grey mica	92	260	
Limestone	260	400	

GROUTING RECORD yes no

WELL HAS BEEN GROUTED (Circle Appropriate Box)
 Y N

TYPE OF GROUTING MATERIAL (Circle)
 CEMENT BENTONITE CLAY

NO. OF BAGS 21 NO. OF POUNDS 2100
 GALLONS OF WATER 120
 DEPTH OF GROUT SEAL (to nearest foot)
 from 0 ft. to 57 ft.
 (enter 0 if from surface)

CASING RECORD

MAIN CASING TYPE ST Nominal diameter top (main) casing (nearest inch)! 6 Total depth of main casing (nearest foot) 60

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

SCREEN RECORD
 screen type or open hole HO
 (insert appropriate code below) BRONZE OPEN

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 3
 PUMPING RATE (gal. per min.) 7.5
 METHOD USED TO MEASURE PUMPING RATE Bucket
 WATER LEVEL (distance from land surface)
 BEFORE PUMPING 35 ft.
 WHEN PUMPING 251 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 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)

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED yes no

CIRCLE APPROPRIATE LETTER
 A 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. 1 MWD 040
George F. Eustace
 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)
 LIC. NO. 1 W 0064

C 2 DEPTH (nearest ft.)

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

SLOT SIZE 1 _____ 2 _____ 3 _____

DIAMETER OF _____ (NEAREST INCH)
 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

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

LATITUDE 39.246766
 LONGITUDE 77.020324
 (DEFAULT COORD. WGS 84)

NOTES: OK

B 1	<u>9397</u>	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL	STATE PERMIT NUMBER <u>40-95-2203</u> <small>fill in this form completely</small>
1 2 3 6			<u>535944</u>	

OWNER INFORMATION 17007

Date Received (APA) 09/13/11

8 MM DD YY 13

Nichols Brothers Construction

15 Last Name Maple Lawn Owner First Name Owner 34

36 Street or RFD Fulton Md 20755 55

57 Town Fulton 70 State MD 72 Zip 20755 76

3 **LOCATION OF WELL**

Howard COUNTY 21

Studdard Property

23 SUBDIVISION 3 42

44 46 48 50

Dorton

52 NEAREST TOWN Dorton 71

MILES FROM TOWN (enter 0 if in town) 1 M 11

DRILLER INFORMATION

Driller's Name Franklin Easterday, Inc. 76 License No. 040 81

Firm Name 265 Brown Church Rd., MT. Airy, Md. 21774

Address George F. Easterday 9/9/2011

Signature George F. Easterday Date 9/9/2011

B 4

1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

Howard Road

11 NEAR WHAT ROAD 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

34 DISTANCE FROM ROAD 200 37

DISTANCE FROM ROAD ENTER FT OR MI 38 39

TAX MAP: --- BLK: --- PARCEL ---

B 2 **WELL INFORMATION**

APPROX. PUMPING RATE (GAL. PER MIN.) 8 500 12

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION

F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)

I INDUSTRIAL, COMMERCIAL, DEWATERING

P PUBLIC WATER SUPPLY WELL

T TEST, OBSERVATION, MONITORING

G GEO-THERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard COUNTY NAME (13) A530280 COUNTY NO.

STATE SIGNATURE _____ INSERT S → _____ 41

DATE ISSUED, 9/28/11 William Huff 9/28/13

43 MM DD YY 48 CO SIGNATURE EXP. DATE

NORTH GRID 50 000 EAST GRID 57 000

APPROXIMATE DEPTH OF WELL 300 FEET

APPROXIMATE DIAMETER OF WELL _____ 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 _____

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

N THIS WELL WILL NOT REPLACE AN EXISTING WELL

S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS

D THIS WELL WILL DEEPEAN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52

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

APPROX. PERMIT NUMBER _____ G _____

PERMIT No. 40-95-2203

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

N/A

N/A

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

13 ft

SPECIAL CONDITIONS Well must be GPS'd.

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED.

Yield Test Data Sheet

County File #: _____

District _____

MD Well Permit #: 95-2203

Date of Test: 10-11-11

Subdivision Name: STANDARD PROP

Section _____ Lot # 3

Street Address: HOWARD ROAD

Measuring Point (MP) Description: _____
(for ex. "Top of casing")

Distance from MP to ground surface _____ ft.

Well Depth 400 ft. 78pm

Well Driller: EASTDAY

Must be submitted with the State of Maryland Well Completion Report

Submit to:

Pump Start Time	Static Water level <u>35</u> ft.	Pumping Rate () Time to fill <u>1</u> gal. bucket () Flow meter reading (if used)	Calculated Flow (gallons per minute)
TIME	WATER LEVEL BELOW M.P.	<u>8</u> sec	<u>7.5</u>

Water level and pumping rate must be recorded every 15 minutes			
#	TIME	WATER LEVEL ft.	PUMPING RATE GPM
1	12:00	247	8
2	12:15	247	8
3	12:30	247	8
4	12:45	248	8
5	1:00	248	8
6	1:15	249	7.5
7	1:30	249	7.5
8	1:45	249	7.5
9	2:00	249	7.5
10	2:15	250	7.5
11	2:30	250	7.5
12	2:45	251	7.5
13	3:00	251	7.5
14		ft.	GPM
15		ft.	GPM
16		ft.	GPM
17		ft.	GPM
18		ft.	GPM
19		ft.	GPM
20		ft.	GPM
21		ft.	GPM
22		ft.	GPM
23		ft.	GPM
24		ft.	GPM
25		ft.	GPM
26		ft.	GPM
27		ft.	GPM
28		ft.	GPM
29		ft.	GPM
30		ft.	GPM

NOTES:
pump tested by
Jerry Henning

STUDDARD

LOT 3

Fayed 9-4-13

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: Gartland Plumbing Telephone #: 410-875-5303
Address: 1620 Rynkles Rd
Sykesville, MD 21784

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

Name (Print): Joseph Gartland License# 6352

*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: Studdard Amy Telephone #: 410-285-2042
Subdivision: Studdard Property Lot #: 3 Well Tag #: HO-95-2203
Site Address: 14138 Howard Rd
Dayton, MD 21036

Submersible Pump Data

Make: Goulds
Model #: 5650
Pump Capacity 5 GPM
Well Yield: 7 GPM

Pitless Adapter

Make: BPE
Model#: P-100-SS
Depth: 48" (36" min)
NSF approved: Yes

Well Cap and Electric Conduit

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

Depth of well encountered at time of pump installation: 400 (feet)

If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4

Torque arrestors of Cable guards are required - Must circle one

Safety rope, if used, attached to inside of well casing with eye bolt

Piping to house

Type: Poly
PSI: 160 (160 psi min)
Depth of supply line: 48 (36" min)

House Connection

PVC sleeved to undisturbed soil at wall penetration: Yes
Approximate length of sleeve: 40'
Sleeve caulked and sealed properly: Yes

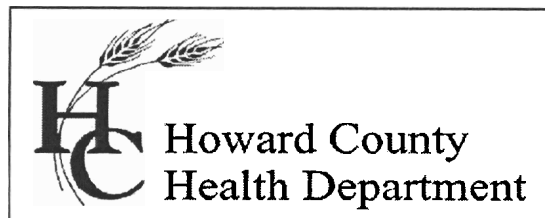
The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Signature of company representative responsible for installation

8-29-13
date

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

Date Insp. Requested: _____ Date Insp. Approved: 9/3/13 (KWW)
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



Bureau of Environmental Health

8930 Stanford Bld., Columbia, MD 21045
Main: 410-313-6300 | Fax: 410-313-6303
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 – July 3, 2014

February 3, 2014

Homeowner
14138 Howard Road
Dayton, Maryland 21036

**RE: Studdard Property, Lot # 3
14138 Howard Road
Building Permit: B13001060
Well Permit: HO-95-2203**

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 **9/3/2013**. Final approval of the well line connection to the dwelling was granted on **9/3/2013**. The well construction was completed on **10/11/2011**. Water samples were collected on **1/29/2014**.

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-95-2203. 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,

Dana Bernard

Dana Bernard, REHS/RS
Environmental Sanitarian
Well & Septic Program

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



TRACE LABORATORIES, INC
 5 North Park Drive
 Hunt Valley, MD 21030 USA
 Telephone: 410/584-9099 / Fax: 410/584-9117
 Website: www.tracelabs.com / Email: info@tracelabs.com

Maryland State Certified Laboratory #318

CERTIFICATE OF ANALYSIS

Requester:

Allied Well Drilling
 Attn: Tim Edwards
 8213 Brock Bridge Road
 Laurel, Maryland 20724

S/O Number: 91942

Report Date: January 30, 2014

Retest #1

Property Sampled: 14138 Howard Road, 21036
Sample Location: Pressure Tank Tap
Residual Chlorine: <0.1 mg/L

Building Permit #: B13001060
Sampler ID #: 7483AM
Samples Iced: Yes

County: Howard **Subdivision:** Studdard Property **Lot #:** 3

Date/Time Collected in Field: January 29, 2014 10:29 am
Date/Time Received in Lab: January 29, 2014 2:16 pm

Well Tag #: HO-95-2203
Well Condition: 2-Piece Cap, Satisfactory

Water Treatment/Conditioning: N/A – Raw Sample

*2-3-14
OK
DJ*

PARAMETER	METHOD	MCL	RESULT	COMMENT
Total Coliform	SM 9223B	Absent	Absent	Pass
<i>E. coli</i>	SM 9223B	Absent	Absent	Pass

The results in this report relate only to those items tested. If any additional information or clarification of this report is required, please contact us. This test report shall not be reproduced except in full without the written approval of Trace Laboratories Inc.

Katherine C. Higgs
 Katherine C. Higgs
 Manager – Drinking Water Testing



TRACE LABORATORIES, INC

5 North Park Drive

Hunt Valley, MD 21030 USA

Telephone: 410/584-9099 / Fax: 410/584-9117

Website: www.tracelabs.com / Email: info@tracelabs.com

Maryland State Certified Laboratory #318

CERTIFICATE OF ANALYSIS

Requester:

Allied Well Drilling
Attn: Tim Edwards
8213 Brock Bridge Road
Laurel, Maryland 20724

S/O Number: 91878

Report Date: January 29, 2014

Property Sampled: 14138 Howard Road, 21036
Sample Location: Pressure Tank Tap
Residual Chlorine: <0.1 mg/L

Building Permit #: B13001060
Sampler ID #: 7483AM
Samples Iced: Yes

County: Howard Subdivision: Studdard Property Lot #: 3

Date/Time Collected in Field: January 23, 2014 11:07 am
Date/Time Received in Lab: January 23, 2014 1:18 pm

Well Tag #: HO-95-2203
Well Condition: 2-Piece Cap, Satisfactory

Water Treatment/Conditioning: N/A - Raw Sample

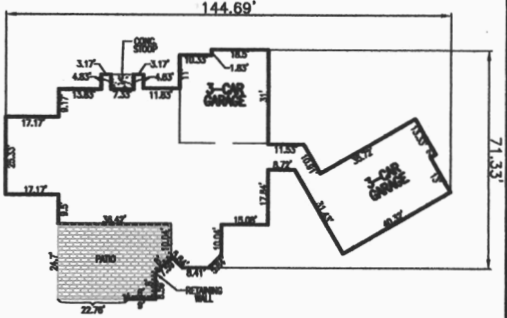
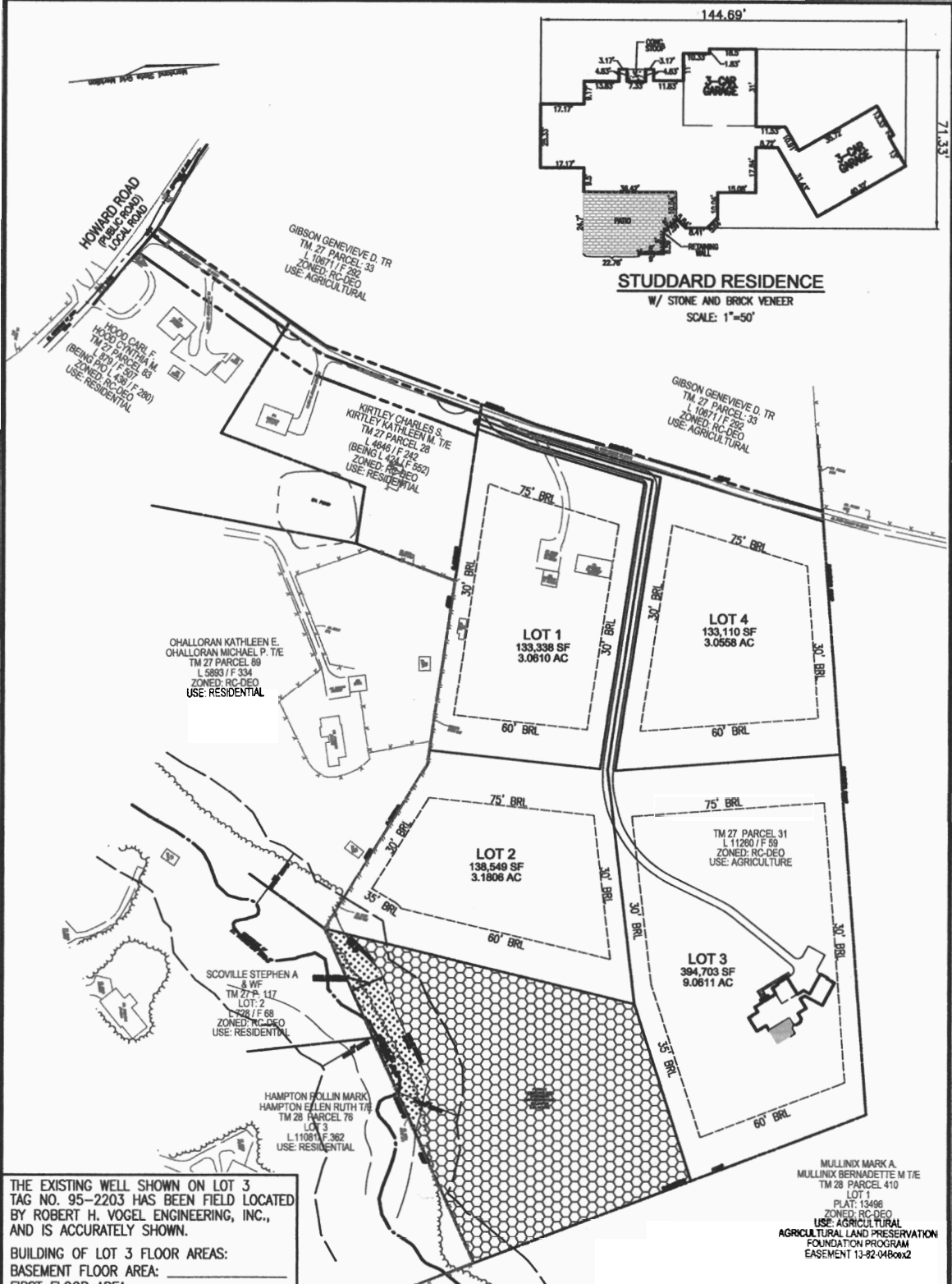
Handwritten note: NOT OK DB 2-3-14

Table with 5 columns: PARAMETER, METHOD, MCL/*SMCL, RESULT, COMMENT. Rows include Total Coliform (FAIL), E. coli (Pass), Nitrate (Pass), Turbidity (Pass), pH (Field) (***), and Sand (Pass).

The results in this report relate only to those items tested. If any additional information or clarification of this report is required, please contact us. This test report shall not be reproduced except in full without the written approval of Trace Laboratories Inc.

Signature of Katherine C. Higgs
Katherine C. Higgs
Manager - Drinking Water Testing

MCL: Maximum Contamination Level, an enforceable level established by the EPA
*SMCL: Secondary Maximum Contamination Level, a level recommended by the EPA
***A non-enforceable parameter that may cause cosmetic effects or aesthetic effects (such as taste, color or odor) in drinking water.



STUDDARD RESIDENCE
W/ STONE AND BRICK VENEER
SCALE: 1"=50'

THE EXISTING WELL SHOWN ON LOT 3 TAG NO. 95-2203 HAS BEEN FIELD LOCATED BY ROBERT H. VOGEL ENGINEERING, INC., AND IS ACCURATELY SHOWN.

BUILDING OF LOT 3 FLOOR AREAS:
BASEMENT FLOOR AREA: _____
FIRST FLOOR AREA: _____
SECOND FLOOR AREA: _____
BEDROOMS: _____

NOTE: STORMWATER MANAGEMENT FOR THIS LOT IS PROVIDED BY VEGETATED SWALES, ROOFTOP DISCONNECTS, NON-ROOFTOP DISCONNECTS, AND MICRO BIORETENTION FACILITIES. ADDRESSED UNDER ECP-11-005 BUILDING PERMIT NO.

SCALE

SCALE: 1"=200'

OWNER

JONATHAN STUDDARD
AMY B. STUDDARD
14118 HOWARD ROAD
DAYTON, MD 21036
(443) 364-8075

SCALE: _____ AS SHOWN
DRAWN BY: _____ JMR
CHECKED BY: _____ RHV
DATE: _____ NOVEMBER 2012
PROJECT #: _____ 08-50
SHEET#: _____ 1 OF 1

PLOT PLAN
STUDDARD
PROPERTY
LOT 3
ECP-11-005
TAX MAP 27 PARCEL 31
BLOCK 6
5TH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND

ADDRESS
14138 HOWARD ROAD
DAYTON, MD 21036
GP-13-005

1 SHEET OF 2

ROBERT H. VOGEL
ENGINEERING, INC.
ENGINEERS • SURVEYORS • PLANNERS
8407 MAIN STREET TEL: 410.461.7666
ELLIOTT CITY, MD 21043 FAX: 410.461.8961

SEPTIC SPECIFICATIONS WORKSHEET

Subdivision Studdard Prop. A
 Street Name 14138 Howard Rd Lot Number 3
 Average Percolation Rate (min./in.) 10 min./inch Application Rate (GPD/sq. ft.) 12
 Number of Bedrooms 5 Design Flow (#BRx150) = 750
 Square Footage (of House) > 3,500 Septic Tank Capacity (gal.) 2,000
 Sidewall Credit / % Reduction 2.5 feet 55 % Total Length of Trench (ft.) 115'

***All Septic/Pump tanks must be top seamed unless otherwise approved by this agency.**

***All Septic tanks must be compartmented unless otherwise approved by this agency.**

Baffle Filter Required? Yes No

Yes No

$750 \div 3 \div 1.2 = 208 \times .55 = 114.8$

TRENCH DIMENSIONS: Trench to 3 feet wide. Inlet is at 4 feet below original grade with 3 feet of stone below the distribution pipe. Bottom maximum depth is 7 feet below original grade. Effective sidewall begins at 5.5 feet below original grade. Maintain at least 4 feet spacing between trenches.

PUMP SYSTEM PROPOSED? YES NO

Pump system details: gallon pump chamber

Note 1: Septic pump detail to be provided by installer prior to issuance of septic permit.

Note 2: Pump performance test required prior to Health Department approval of pumped septic system.

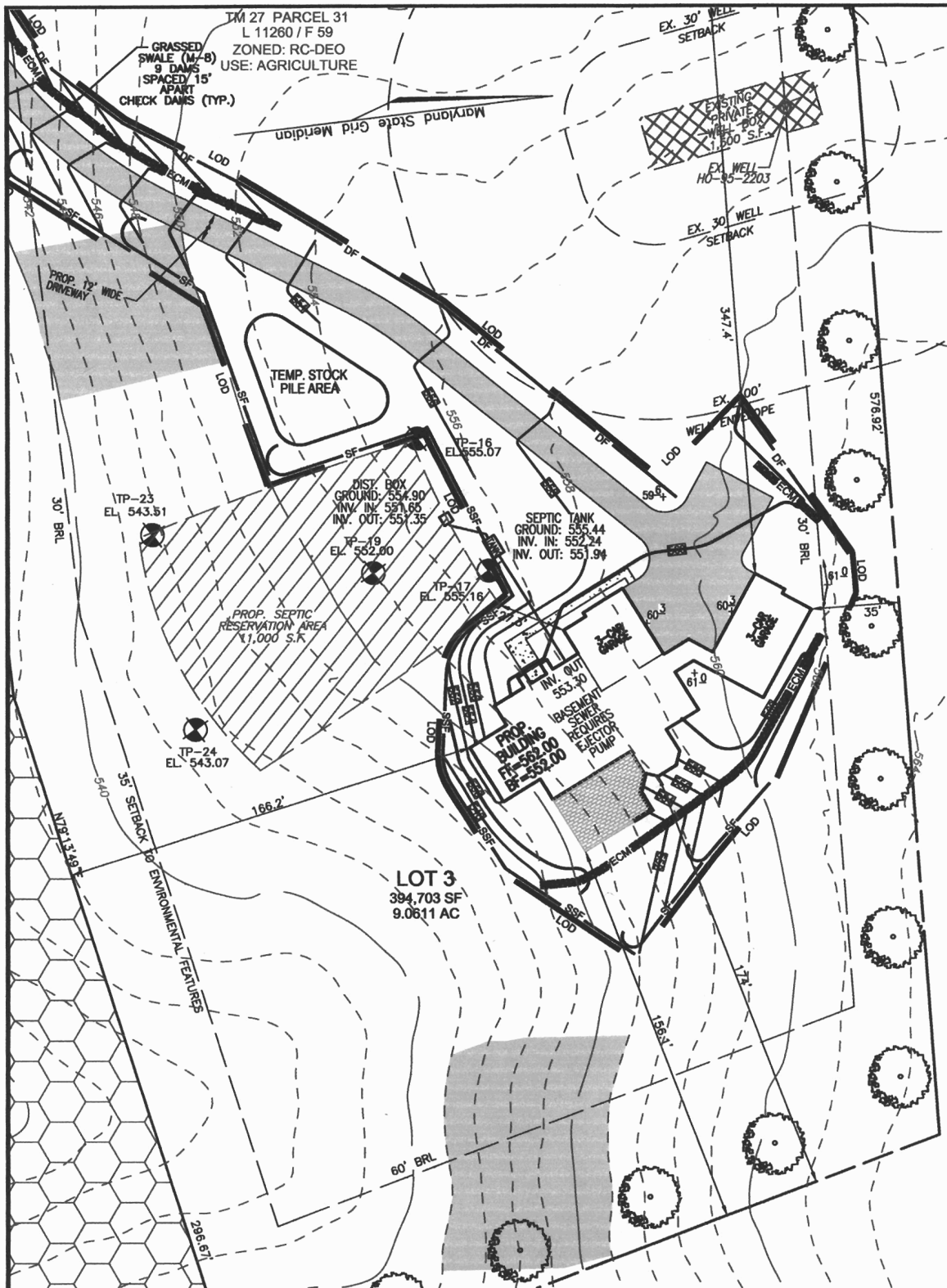
LOCATION:

1. Set septic tank per plan
2. Set distribution box per plan.
3. Install 3x39' trenches on contour

ADDITIONAL NOTES **Do not** order the septic tank until after layout inspection and Sanitarian approval. Stake septic easement corners. Call for layout inspection. Mark utilities. Gravel tickets must be available for Environmental Sanitarians. Stone must be approved by the Howard County Health Department. A written variance request is required for tanks deeper than 3 feet. A traffic bearing lid is required for tanks deeper than 4 feet.

Reviewed by: HS

Date: 4/10/13



LOT 3
394,703 SF
9.0611 AC

SCALE
SCALE: 1"=50'

OWNER
JONATHAN STUDDARD
AMY B. STUDDARD
14118 HOWARD ROAD
DAYTON, MD 21036
(443) 364-8075

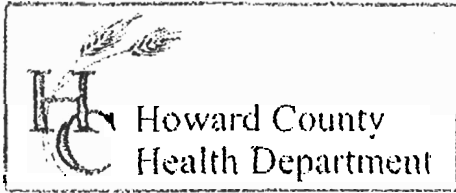
SCALE: AS SHOWN
DRAWN BY: JMR
CHECKED BY: RHV
DATE: NOVEMBER 2012
PROJECT #: 08-50
SHEET #: 1 OF 1

PLOT PLAN
STUDDARD
PROPERTY
LOT 3
ECP-11-005
TAX MAP 27, PARCEL 31
BLOCK 6
5TH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND

ADDRESS
14138 HOWARD ROAD
DAYTON, MD 21036
GP-13-005

2 SHEET OF 2

ROBERT H. VOGEL
ENGINEERING, INC.
ENGINEERS • SURVEYORS • PLANNERS
8407 MAIN STREET
ELLCOTT CITY, MD 21043
TEL: 410.461.7666
FAX: 410.461.8961



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

TO ALL INTERESTED PARTIES

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

- The well site has been staked by Robert H. Vogel EM,
(professional land surveyor or company employing professional land surveyors)
on 9-2-11 (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 6/10/03

LOT 3 Stuckard Prop

RR-DEO

34" E

950.90'

S87°16'34"E 581.62'

PROP. 100' WELL ENVELOPE

PROP. 100' WELL ENVELOPE

PROP. 30' WELL SETBACK

PROP. 30' WELL SETBACK

PROP. 100' WELL ENVELOPE



9/27/11
Well Box Approved
Staked by Vogel Eng.
Kew

N01°54'15"E 360.57'

WILLIAM EDWARD BROWN, SHIRLEY JUNE KENDALL, AND PATRICIA DIANE METZGER
TM. 27'

PARCEL: 31
L 11260 /F 59
ZONED: RR-DEO
TOTAL AREA AS SURVEYED: 799,700 S.F.
OR 18.3586 AC.

PROP. BUILDING

TP-17
EL. 555.16

TP-16
EL. 555.07

TP-19
EL. 552.00

PROP. SEPTIC RESERVATION AREA
11,000 S.F.

GgB
GgC

TP-23
EL. 543.51

TP-24
EL. 543.07

S87°09'27"E 370.70'

PROP. 30' WELL SETBACK

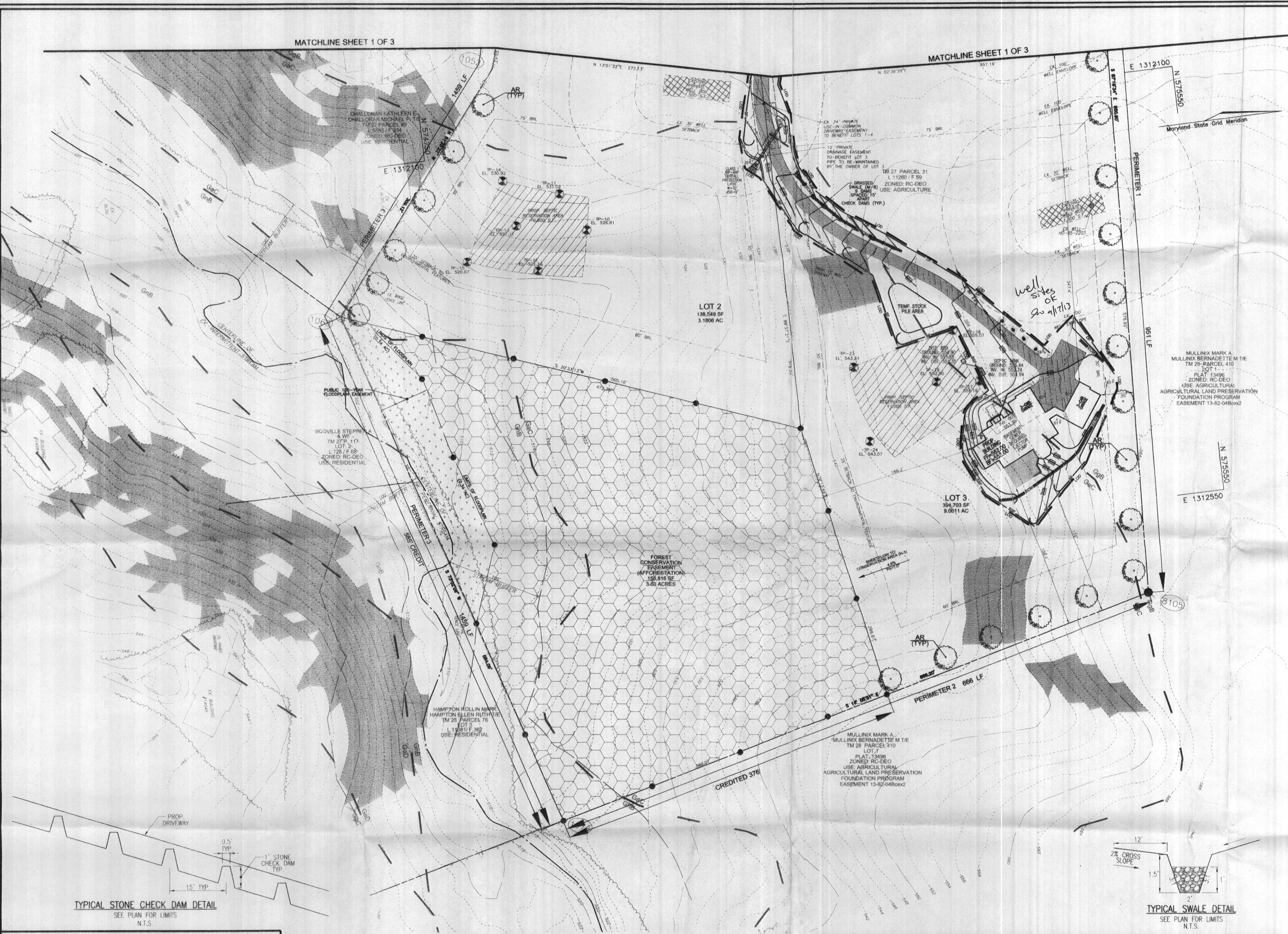
PROP. 100' WELL ENVELOPE

PROP. LOT 2
134,242.46 S.F.
(3.08 AC. 4%)



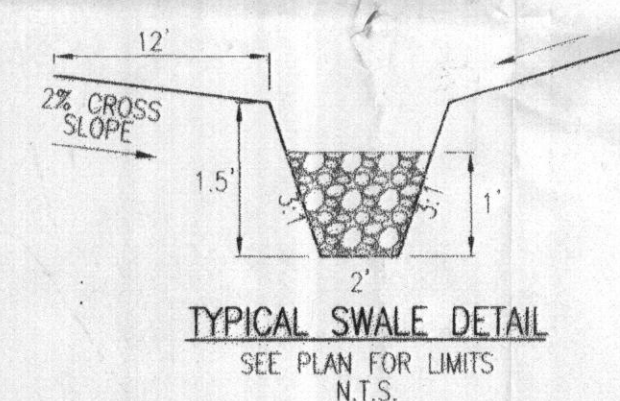
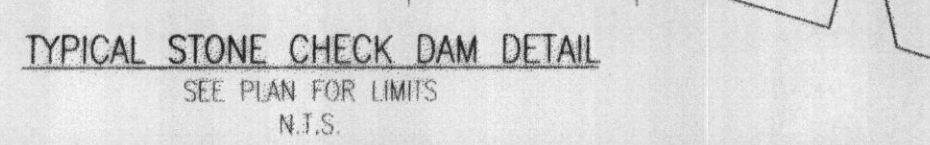
MATCHLINE SHEET 1 OF 3

MATCHLINE SHEET 1 OF 3



LEGEND:

	PROPERTY LINE
	RIGHT-OF-WAY LINE
	ADJACENT PROPERTY LINE
	EXISTING CURB AND GUTTER
	EXISTING UTILITY POLE
	EXISTING LIGHT POLE
	EXISTING MANHOLE
	EXISTING SIGN
	EXISTING SANITARY MANHOLE
	EXISTING SANITARY LINE
	EXISTING CLEANOUT
	EXISTING FIRE HYDRANT
	EXISTING WATER LINE
	EXISTING 10' CONTOUR
	EXISTING 2' CONTOUR
	SOILS
	EXISTING TREE LINE
	EXISTING TREES
	PROPOSED TREES
	EXISTING 15' WIDE RIGHT OF WAY L:11260/F:59-L:300/F:315
	EX. 24' PRIVATE USE-IN-COMMON DRIVEWAY EASEMENT
	EXISTING FENCE
	CENTERLINE OF EXISTING STREAM
	PROPOSED STORMDRAIN
	PROPOSED TREE LINE
	PROPOSED 10' CONTOUR
	PROPOSED 2' CONTOUR
	PROPOSED SPOT ELEVATION
	PROPOSED STABILIZED CONSTRUCTION ENTRANCE
	PROPOSED SILT FENCE
	PROPOSED SUPER SILT FENCE
	PROPOSED DIVERSION FENCE
	PROPOSED LIMIT OF DISTURBANCE
	PROPOSED EROSION CONTROL MATTING
	MODERATE SLOPES
	PROPOSED PAVEMENT
	NON-ROOF TOP DISCONNECTS (N-2)
	PERC TEST
	EXISTING WELL
	EX. PRIVATE WELL AREA ECP-11-005
	EXISTING 50' WIDE RIGHT OF WAY L:11260/F:59-L:424/F:552 L:436/F:280
	EXISTING FOREST CONSERVATION EASEMENT (AFFORESTATION)
	EXISTING FLOODPLAIN



DEVELOPER'S CERTIFICATE

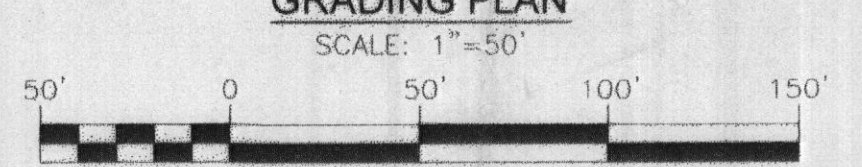
"I/WE CERTIFY THAT ALL DEVELOPMENT AND CONSTRUCTION WILL BE DONE ACCORDING TO THIS PLAN OF DEVELOPMENT FOR SEDIMENT AND EROSION CONTROL, AND THAT ALL RESPONSIBLE PERSONNEL INVOLVED IN THE CONSTRUCTION PROJECT WILL HAVE A CERTIFICATE OF ATTENDANCE AT A DEPARTMENT OF ENVIRONMENT APPROVED TRAINING PROGRAM FOR THE CONTROL OF SEDIMENT AND EROSION BEFORE BEGINNING THE PROJECT. I ALSO AUTHORIZE PERIODIC ON-SITE INSPECTIONS BY THE HOWARD SOIL CONSERVATION DISTRICT."

Jonathan Studdard
SIGNATURE OF DEVELOPER

SOILS LEGEND

SYMBOL	NAME / DESCRIPTION	GROUP
GcC	GAILA LOAM, 8 TO 15 PERCENT SLOPES	B
GcD	GAILA LOAM, 15 TO 25 PERCENT SLOPES	B
GcB	GLENELG LOAM, 3 TO 8 PERCENT SLOPES	B
GcC	GLENELG LOAM, 8 TO 15 PERCENT SLOPES	B
GmB	GLENVILLE SILT LOAM, 3 TO 8 PERCENT SLOPES	C
GmB	GLENVILLE-BAILE SILT LOAMS, 0 TO 8 PERCENT SLOPES	C
LmB	LEGORE-MONTALTO SILT LOAMS, 3 TO 8 PERCENT SLOPES	C

GRADING PLAN



ENGINEER'S CERTIFICATE

"I HEREBY CERTIFY THAT THIS PLAN FOR SEDIMENT AND EROSION REPRESENTS A PRACTICAL AND WORKABLE PLAN BASED ON MY PERSONAL KNOWLEDGE OF THE SITE CONDITIONS AND THAT IT WAS PREPARED IN ACCORDANCE WITH THE REQUIREMENTS OF THE HOWARD SOIL CONSERVATION DISTRICT."

John R. Studdard
SIGNATURE OF ENGINEER
DATE: 11/25/12

THIS DEVELOPMENT PLAN IS APPROVED FOR SOIL EROSION AND SEDIMENT CONTROL BY THE HOWARD SOIL CONSERVATION DISTRICT.

John R. Studdard
HOWARD SCD
DATE: 11/25/12

OWNER/DEVELOPER
JONATHAN STUDDARD
AMY B. STUDDARD
14118 HOWARD ROAD
DAYTON MD, 21036
443-364-8075

NO.	REVISION	DATE

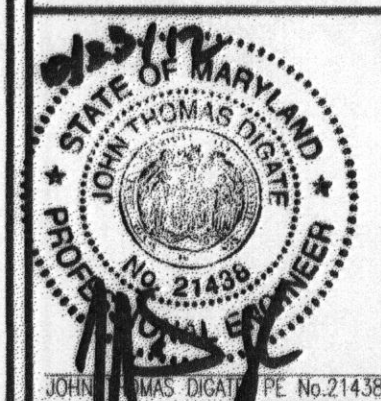
GRADING PLAN

STUDDARD PROPERTY
LOT 3

TAX MAP 27 BLOCK 6
5TH ELECTION DISTRICT
DPZ REF'S: ECP-11-005, WP-10-016

L. 11260/F. 59
PARCEL 31, ZONED RC-DEO
HOWARD COUNTY, MARYLAND

ROBERT H. VOGEL ENGINEERING, INC.
ENGINEERS • SURVEYORS • PLANNERS
8407 MAIN STREET
ELLICOTT CITY, MD 21043
TEL: 410.461.7666
FAX: 410.461.8961



PROFESSIONAL CERTIFICATE
DESIGN BY: JTD
DRAWN BY: JMR
CHECKED BY: JTD
DATE: OCTOBER 2012
SCALE: AS SHOWN
W.O. NO.: 08-50

2 SHEET OF 3