

C1 7108 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.

COUNTY NUMBER 13

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 8 13

DATE WELL COMPLETED MM DD YY 04 15 08 15 20

Depth of Well 22 400 26 5/16/08 (TO NEAREST FOOT) o.k. (BB)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-95-1397 28 29 30 31 32 33 34 35 36 37

OWNER Bassler Alfred STREET OR RFD Basslers Way TOWN Ellicott City SUBDIVISION Walnut Creek SECTION 2 LOT 177

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 (Use additional sheets if needed), FEET (FROM, TO), check if water bearing. Rows include Top Soil, Sandy, White mica, Sand Stone, etc.

GROUTING RECORD yes no

WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL (Circle one) CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 9 NO. OF POUNDS 300 GALLONS OF WATER 54 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 20 ft.

CASING RECORD casing types insert appropriate code below

MAIN CASING TYPE PL Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 21

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

SCREEN RECORD screen type or open hole insert appropriate code below

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

C 2 DEPTH (nearest ft.)

Table with columns: E A C H S C R E E N, 1 2 3, 8 9 11 15 17 21, 23 24 26 30 32 36, 38 39 41 45 47 51. Includes SLOT SIZE 1 2 3 and DIAMETER OF SCREEN (NEAREST INCH) 58 60 from to

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

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q

70 TELESCOPE CASING 72 LOG INDICATOR 74 75 76 OTHER DATA

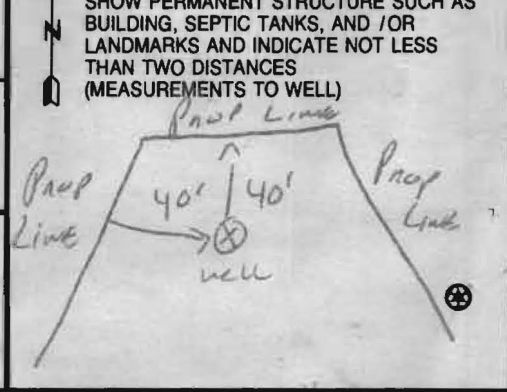
C 3 PUMPING TEST

HOURS PUMPED (nearest hour) 6 PUMPING RATE (gal. per min.) 5 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 22 ft. WHEN PUMPING 80 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. 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 I (nearest foot)

LOCATION OF WELL ON LOT



NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED YES NO 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. 1 M S D 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)

B 1 0564

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL

please type

STATE PERMIT NUMBER

HO-95-1397 fill in this form completely

Date Received (APA)

OWNER INFORMATION

8 MM DD YY 13 BASSLER Venture LLC
15 Last Name Owner First Name 34
36 15950 N. AVE. Street or RFD 55
57 Lisbon MD. 21765 Town State 72 Zip 76

B 3 LOCATION OF WELL

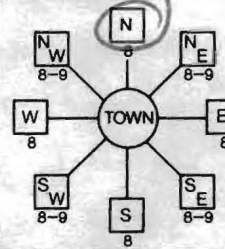
Howard COUNTY 21
Walnut Creek SUBDIVISION 42
SECTION PHASE I LOT 17 44 46 48 50
CLARKSVILLE NEAREST TOWN 52 71

MILES FROM TOWN (enter 0 if in town) 2 MI 73 76 77 78

DRILLER INFORMATION

DRILLER'S NAME M SD 112 RAYL E. MAYNE
Firm Name RAYL E. MAYNE INC
Address 17024 Handy Rd Mt. Airy MD. 21771
Signature Date 3-30-07

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Basslers Way NEAR WHAT ROAD 11 30
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 800
DISTANCE FROM ROAD 34 37
ENTER FT OR MI 38 39
TAX MAP: 38 BLK: 11 PARCEL 49

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)

- 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 13 COUNTY NAME COUNTY NO.
STATE SIGNATURE INSERT S
DATE ISSUED 1/21/2008 Brian Baber 1/21/2009
CO SIGNATURE EXP. DATE
NORTH GRID 511 000 EAST GRID 817 000
50 55 57 63

APPROXIMATE DEPTH OF WELL 150 FEET
APPROXIMATE DIAMETER OF WELL 6 INCH

METHOD OF DRILLING (circle one)

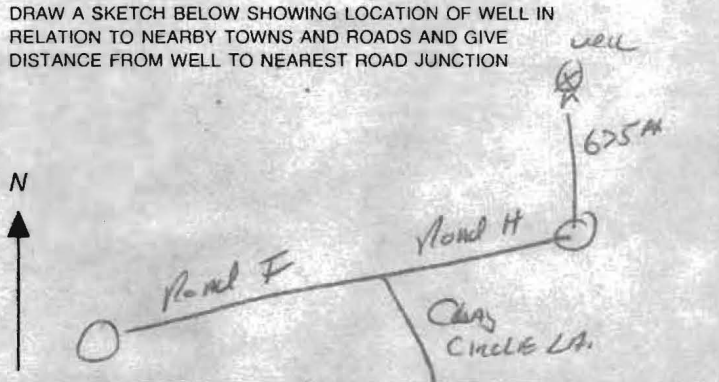
- BORED (or Augered) JETTED Jetted & DRIVEN
AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)
CABLE REVERSE-ROTARY DRIVE-POINT
other

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

- 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 DEEPEM 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 8147
N 508511

4/15/08
Radium Sample Collected During Yield Test
B3B



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

APPROP. PERMIT NUMBER G
PERMIT No. HO 95-1397

SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED
Drill Well Per SP-06-07 Radium Sample

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 95-1397
 Location of property (road) Basslers Way
 Subdivision Walnut Creek Lot 17 Block _____ Plat _____ Sec. 1
 Well Driller Ralph Mayne Owner Bassler

Depth of well 400
 Distance of measuring point (M.P.) above ground 1 ft
 Static water level (S.W.L.) below M.P. 27 ft

I. High rate pumping -- reservoir drawdown

Time pump started 8:30 Pumping rate 10 Gpm
 Total time 30 min to reach pumping water level 80 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 5 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
8:30	27 ft	6 Sec	Test started	10 Gpm
9:00	80 ft	12 Sec		5 Gpm
9:15	80 ft	12 Sec		5 Gpm
9:30	80 ft	12 Sec		5 Gpm
9:45	80 "	12 "		5 "
10:00	80 "	12 "		5 "
10:15	80 "	12 "		5 "
10:30	80 ft	12 Sec		5 Gpm
10:45	80 ft	12 Sec		5 Gpm
11:00	80 ft	12 Sec		5 Gpm
11:15	80 "	12 "		5 "
11:30	80 "	12 "		5 "
11:45	80 "	12 "		5 "
12:00	80 ft	12 Sec		5 Gpm
12:15	80 ft	12 Sec		5 Gpm
12:30	80 ft	12 Sec		5 Gpm
12:45	80 "	12 "		5 "
1:00	80 "	12 "		5 "
1:15	80 "	12 "		5 "
1:30	80 ft	12 Sec		5 Gpm
1:45	80 ft	12 Sec		5 Gpm
2:00	80 ft	12 Sec		5 Gpm
2:15	80 "	12 "		5 "
2:30	80 "	12 "		5 "
2:45	80 ft	12 Sec		5 Gpm
3:00	80 ft	12 Sec		5 Gpm

WCR17

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: Trinity Quality Homes Inc Telephone #: 410-480-0023
Address: 3675 Park Ave #201
Ellicott City, MD 21043

(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 Bowersox License# 11202

*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: Trinity Quality Homes Inc Telephone #: 410-480-0023
Subdivision: Walnut Creek Lot #: 17 Well Tag #: HO-95-1397 ✓
Site Address: 12225 Basslers Way
Clarksville, MD 21029

<u>Submersible Pump Data</u>	<u>Pitless Adapter</u>	<u>Well Cap and Electric Conduit</u>
Make: <u>Myers</u>	Make: <u>American Granby</u>	Two piece watertight cap: <u>yes</u>
Model #: <u>25752-2plus-p4-2</u>	Model #: <u>LF200</u>	Screened, vented well cap: <u>yes</u>
Pump Capacity <u>12</u> GPM	Depth: <u>yes</u> (36" min)	Cap secured to casing: <u>yes</u>
Well Yield: <u>10</u> GPM	NSF/WSC approved: <u>yes</u>	Conduit min 18" B.G.: <u>yes</u>
Depth of well encountered at time of pump installation: <u>400</u> (feet)		Conduit secured to well cap: <u>yes</u>

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 used- Must circle one
Safety rope, if used, attached to brass rope adapter or other acceptable method inside of well casing NO

<u>Piping to house</u>	<u>House Connection</u>
Type: <u>plastic black</u>	PVC sleeve to undisturbed soil at wall penetration: <u>yes</u>
PSI: <u>yes</u> (160 psi min)	Length of sleeve (5' minimum from foundation): <u>10ft</u>
Depth of supply line: <u>yes</u> (36" min)	Sleeve sealed properly: <u>yes</u>

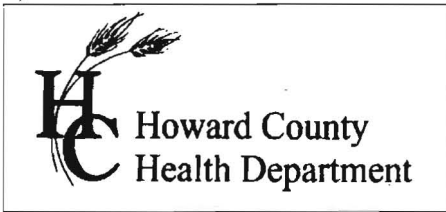
The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Signature of company representative responsible for installation: [Signature] * 6-10-14 date

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

Date Insp. Requested: 12/23/14 Date Insp. Approved: 12/23/14 Inspector: SC

Inspection Data: Pitless adapter watertight & water supply line at least 36" below grade	<u>✓</u>
Two piece cap installed and attached to casing securely	<u>✓</u>
Elec. conduit extends at least 18" below grade/attached to cap properly	<u>✓</u>
Safety rope not outside of well cap/casing	<u>✓</u>
Correct well tag attached properly and casing 8" above finished grade	<u>✓</u>
Water supply line sleeved adequately at house connection	<u>✓</u>
Adequate grout observed below pitless adapter	<u>✓</u>



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

Penny E. Borenstein, 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:

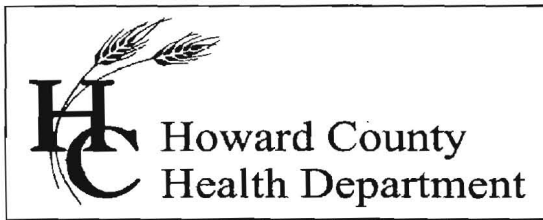
Walnut Creek	17	Road 'H'
Subdivision/Property Name	Lot #	Road Name

The well site has been staked by Fisher, Collins & Carter, Inc.,
 (professional land surveyor or company employing professional land surveyors)
 on 01/12/07 (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 3/11/05



Bureau of Environmental Health

8930 Stanford Boulevard, Columbia, MD 21045

Main: 410-313-1774 | 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
PERMANENT DEVIATION FOR RADIUM

Expiration Date – August 19, 2015

February 19, 2015

Homeowner
12225 Basslers Way
Clarksville, MD 21029

RE: Walnut Creek, Lot 17
12225 Basslers Way
Building Permit: B14000882
Well Permit: HO-95-1397

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 **2/19/2015**. Final approval of the well line connection to the dwelling was granted on **12/23/2014**. The well construction was completed on **4/15/2008**. Water samples were collected on **4/15/2008 and 2/4/2015**.

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.

Gross Alpha and Beta samples were also collected on **4/15/2008**. Results showed a Gross Alpha level of **43.0 ± 6.0 pCi/L** and Gross Beta level of **19.0 ± 2.0 pCi/L**. **This exceeds the maximum contaminant level (MCL) of 15 pCi/L and/or 50 pCi/L, respectively.**

After installation of a radionuclide removal device (Softener), post-treatment water samples were collected on **2/4/2015** and indicated a Gross Alpha level of **10.8 ± 2.5 pCi/L**, a Gross Beta level of **2.4 ± 1.5 pCi/L**, and a Radium 226/228 level of **0.9 ± 0.6 pCi/L**.

This Department will grant a **permanent deviation** to the Interim Certificate of Potability on condition that the radionuclide removal system effectively maintains a Gross Alpha level of less than **15 pCi/L**, a Gross Beta level of less than **50 pCi/L**, and a Radium 226/228 level of less than **5 pCi/L**.

Furthermore, it will be necessary for you to comply with the following conditions:

1. The system must be properly operated and maintained continuously in accordance with the service contract for the life of the residence.

2. It is recommended that a Maryland certified water laboratory certified for radionuclide analysis perform a yearly radionuclide analysis.
3. If you decide to sell or rent your home in the future, you must make any potential buyer/tenant aware of this permanent deviation. **A person who fails to make this disclosure is subject to the penalties set out in COMAR 26.04.04.12F Enforcement and Environment Article 9-1311, Annotated Code of Maryland.**

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-95-1397**. 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.**

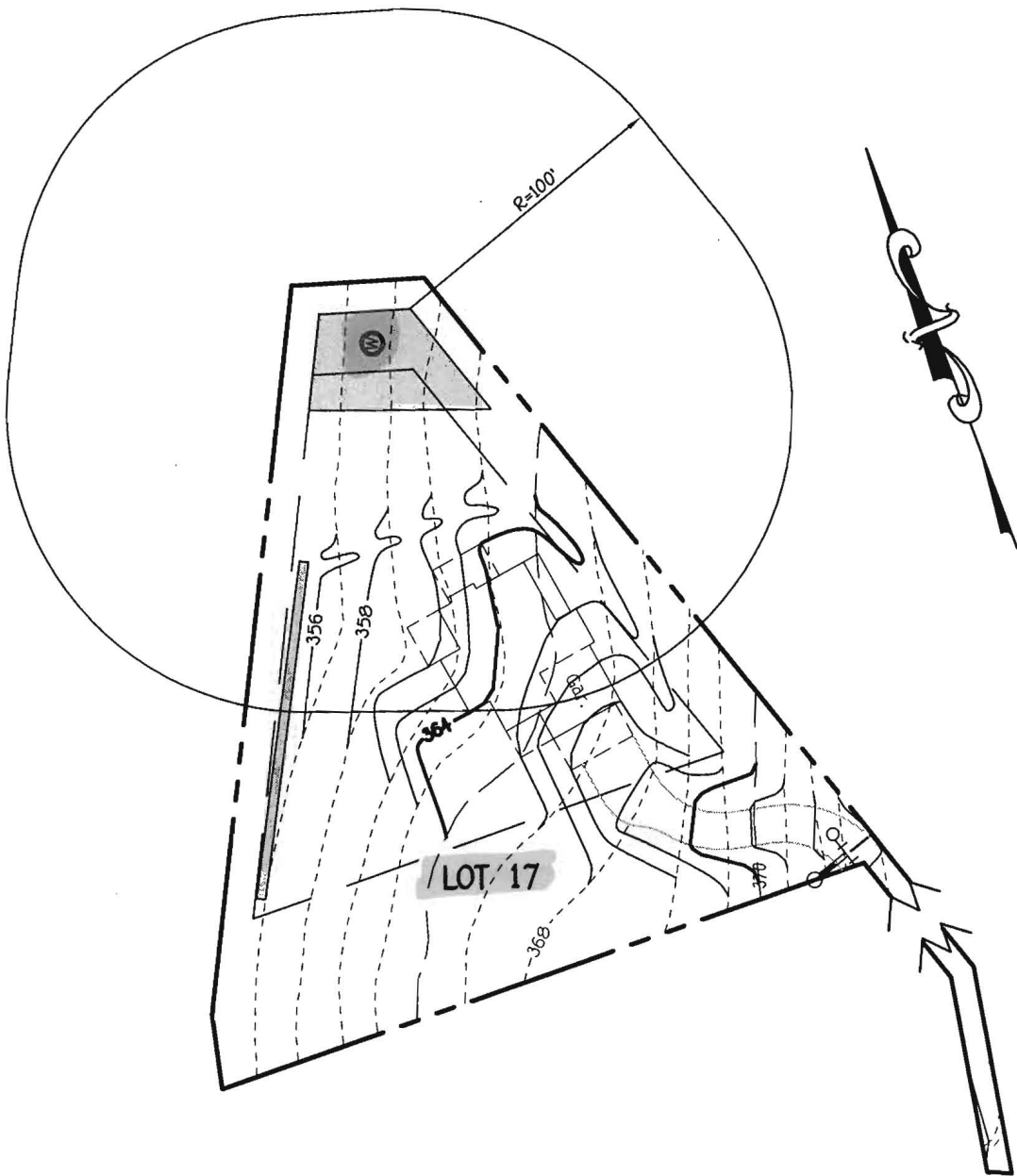
Please contact (410) 313-1773 to schedule a final water sample appointment or contact a Maryland certified water quality laboratory to schedule a water sample. A list of laboratories certified by the state of Maryland may be found at the following website:
<http://www.mde.state.md.us/assets/document/WSP-Labs-2010apr16.pdf>


Approving Authority,

Hank Oswald

Hank Oswald, L.E.H.S.
Well & Septic Program

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



1/21/08
 Well Site Staked
 by 

FISHER, COLLINS & CARTER, INC.
 CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS
 CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE
 ELLICOTT CITY, MARYLAND 21042
 (410) 461 - 2855

WELL LOCATION PLAN
 LOT 17
 ZONED RC-DEO & RR-DEO
 TAX MAP No. 28 GRID No. 4, 5, 10-12, 17 & 18
 PARCEL No. 49
 FIFTH ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND
 SCALE 1"=60' DATE: FEBRUARY 26, 2007

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

June 11, 2008

Heritage Realty and Land Development
15950 North Avenue
P. O. Box 482
Lisbon, Maryland 21765

RE: Walnut Creek Subdivision, Lot#17
Well Tag: HO-95-1397

To Whom It May Concern:

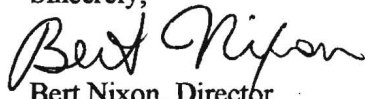
A sample was collected during a yield test on April 15, 2008 and submitted to Department of Health & Mental Hygiene Laboratories to assess the possible presence of **Gross Alpha** and **Gross Beta** in the future well water supply. **Gross Alpha** and **Gross Beta (GA / GB)** measure the total alpha 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 43.0 ± 6.0 picocuries/liter (pCi/L); while the **Gross Beta** level was 19.0 ± 2.0 pCi/L. The **Gross Alpha** result was above its **maximum contaminant level (MCL)** of 15 pCi/L, while the **Gross Beta** level was below its target value of 50 pCi/L (roughly equivalent to the **annual dose rate** of 4 millirem/year).

Since the **Gross Alpha** finding exceeded its **MCL**, additional testing for **Radium** will be necessary to verify existing levels prior to occupancy. Alternatively, you may install treatment designed to reduce **Gross Alpha**, **Gross Beta** and **Radium**, plus provide post treated results (short and long term **GAGB**, plus **Radium**) confirming that levels are in conformance with existing standards. **Additionally**, the owners will be required to sign an "AGREEMENT FOR APPROVAL OF AN INDIVIDUAL DRINKING WELL WITH AN ON-SITE TREATMENT SYSTEM" as part of the Use and Occupancy process. Moreover, keep in mind that the standard potability parameters required for occupancy will still be needed.

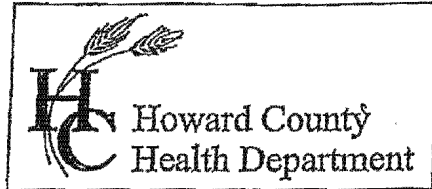
A copy of the test results is enclosed for your information. Please call this office at 410-313-1773 if you have any further questions or concerns.

Sincerely,



Bert Nixon, Director
Bureau of Environmental Health

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



Bureau of Environmental Health
7178 Columbia Gateway Drive 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. Beilenson, M.D., M.P.H., Health Officer

AGREEMENT FOR APPROVAL OF AN INDIVIDUAL DRINKING WELL WITH AN ON-SITE TREATMENT SYSTEM

This agreement is entered into by and between the Howard County Health Department ("the Health Department") and Christopher S. M... ("the Owner").

WHEREAS, the Owner owns a tract of land at street address 12225 ... and the deed and subdivision plat of the property is recorded among the Land Records of Howard County, Maryland, Tax Map # 028, Block # ..., Parcel # 0049, Deed Reference # ... and Tax Account # 05-454425 ("the Property").

20
40

WHEREAS, the Property lacks an available public drinking water source and is required to have and individual well as the source of drinking water for the residence of the property.

WHEREAS, the Owner has installed a residential drinking well under well permit H0-93-1397 that has been tested by the Health Department (or a private laboratory certified to perform testing) for radionuclide particles. The results of the tests have shown that the gross alpha particle content and/or the gross beta particle content and/or the combined radium 226/228 levels exceeds the standards of 15 picocuries per liter (pCi/L), 4 millirems per year (mrem/yr) and/or 5pCi/L respectively.

WHEREAS, The Maryland Department of the Environment (MDE) has promulgated rules and regulations under which a Certificate of Potability may be issued and has delegated the authority to issue such Certificate to the Health Department.

WHEREAS, MDE regulations permit the Health Department to issue as a special condition, a permanent deviation to the Certificate of Potability for individual wells where treatment has been installed to meet the maximum contaminate levels (MCL's) for radionuclides.

WHEREAS, MDE has determined that radium can be effectively removed from the drinking water by the use of treatment devices (e.g., ion exchange or reverse osmosis).

WHEREAS, the Owner is requesting that the Health Department issue a Certificate of Potability contingent upon installation and maintenance of a water treatment device to reduce radionuclides.

WHEREAS, neither the Owner nor the Health Department has knowledge of an alternative safe source of water for the Property.

EMER 15590 FILE 378

NOW THEREFORE, the parties have agreed to the following terms and conditions:

1. The Owner will record this Agreement among the Land records of Howard County, Maryland and provide confirmation to the Health Dept.
2. The Owner agrees to install and maintain a water treatment device, which effectively reduces the gross alpha, gross beta and radium levels to below their respective MCL. The Health Department shall verify that the treatment device is operating effectively and the Owner agrees to allow access to the Health Department to collect a follow-up sample(s).
3. The Health Department shall issue a Certificate of Potability for the well once follow-up sampling shows acceptable gross alpha, gross beta (short and long term) and radium 226 / 228 levels.
4. The Owner agrees that there shall be no liability on part of the Health Department for any immediate or long term impacts to health or property, under any circumstance or including, but not limited to, treatment device failure, improper maintenance or installation, or defect. The Health Department does not warrant nor guarantee that the device will adequately or properly function and the Owner agrees to implement and pay for any necessary changes or corrections.
5. The Owner acknowledges and agrees that neither the Health Department nor any of its agents or employees, either officially or individually, underwrites the operation of any system or treatment device.
6. This Agreement shall not be construed to limit any authority of the Health Department to protect the public health, safety or enjoyment of property or to issue any other orders to take any other action, which is now or may hereafter be within its authority.
7. This agreement contains the entire agreement and understanding between the Health Department and the Owner. There are no additional terms other than as contained in this Agreement. This Agreement may not be modified except in writing signed by each of the parties or their authorized representatives.
8. The Agreement shall run with the land and binds the Owner, his heirs, successors, and assigns. The owner agrees to provide a copy of this agreement to any purchaser or lessee of the property.
9. The laws of the State of Maryland govern the provisions of all transactions.

The parties have signed and sealed this Agreement on the dates set forth below.

12/01/13
Date

12/1/13
Date

Date

Date

Witness

Witness

Robert Buzaitis
Owner

Chris Buzaitis
Owner

Howard County Health Department
Reference/Control #:

LR - Agreement	20.00
Recording Fee	20.00
Grantor/Grantee Name:	Buzaitis
Reference/Control #:	131
LR Foreclosure	40.00
Subj: Subj:	60.00
Total:	60.00
#2825044-1	02-51
05/11/2014	CC13-05
#2825044	CC0503
Howard Co	
Col: 17/CC05_03_04	
Rept: 04 495	

Williams, Jeffrey

From: Baucom, Scott
Sent: Thursday, January 22, 2015 6:35 AM
To: Day, Lori; Wolf, Kevin
Cc: Hart, Amy; Rocco, Anthony; Tuder, Matt; Baker, Brian; Martin, Sharhonda; Williams, Jeffrey; Bozzell, Duane; Bernard, Dana
Subject: U&O Release 12225 Basslers Way

On the morning of January 20th, Duane Bozzell observed the start-up of a Sewage Grinder Pump at the Walnut Creek Shared Septic System:

Trinity Homes
Walnut Creek , Lot 17
Contract 4440
12225 Basslers
Clarksville, MD 21029

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

Scott Baucom
Operations Supervisor I
Howard County DPW, Bureau of Utilities
8270 Old Montgomery Rd.
Columbia, MD 21045
Office (410) 313-4975
FAX (410) 313-4989



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:

Trinity Homes/TBI Homes
 3675 Park Avenue, Suite 301
 Ellicott City, Maryland 21043

S/O Number: 98195 Amended

Report Date: February 19, 2015

Property Sampled: 12225 Basslers Way, 21029
Sample Location: Pressure Tank Tap
Residual Chlorine: <0.1 mg/L

Building Permit #: B14000882
Sampler ID #: 7483AM
Samples Iced: Yes

County: Howard **Subdivision:** Walnut Creek **Lot #:** 17

Date/Time Collected in Field: February 4, 2015 11:32 am
Date/Time Received in Lab: February 4, 2015 12:32 pm

Well Tag #: HO-95-1397 [+]
Well Condition: 2-Piece Cap, Satisfactory

Water Treatment/Conditioning: N/A – Raw Sample

PARAMETER	METHOD	MCL/*SMCL	RESULT	COMMENT
✓ Total Coliform	SM 9223B	Absent	Absent	Pass
✓ E. coli	SM 9223B	Absent	Absent	Pass
✓ Nitrate	SM 4500-NO3D	10 mg/L as N	1.5 mg/L as N	Pass
✓ Turbidity	EPA 180.1	10 NTU	<1.0 NTU	Pass
pH (Field)	SM 4500-H ⁺ B	*6.5-8.5 Units	7.3 Units	***
✓ Sand		Absent	Absent	Pass

2/19/15, H.O.

[+] Upon well observation on 2/4/15, the well was muddy and the tag was difficult to read. The correct tag number was provided to us by the builder.

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

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.



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CERTIFICATE OF ANALYSIS

Requester:

Trinity Homes/TBI Homes
3675 Park Avenue, Suite 301
Ellicott City, Maryland 21043

S/O Number: 98195 Amended

Report Date: February 19, 2015

Property Sampled: 12225 Basslers Way, 21029
Sample Location: Utility Tap
Residual Chlorine: <0.1 mg/L

Building Permit #: B14000882
Sampler ID #: 7483AM
Samples Iced: Yes

County: Howard Subdivision: Walnut Creek Lot #: 17

Date/Time Collected in Field: February 4, 2015 11:38 am
Date/Time Received in Lab: February 4, 2015 12:32 pm

Well Tag #: HO-95-1397 [+]
Well Condition: 2-Piece Cap, Satisfactory

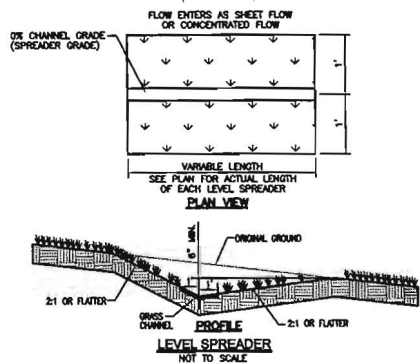
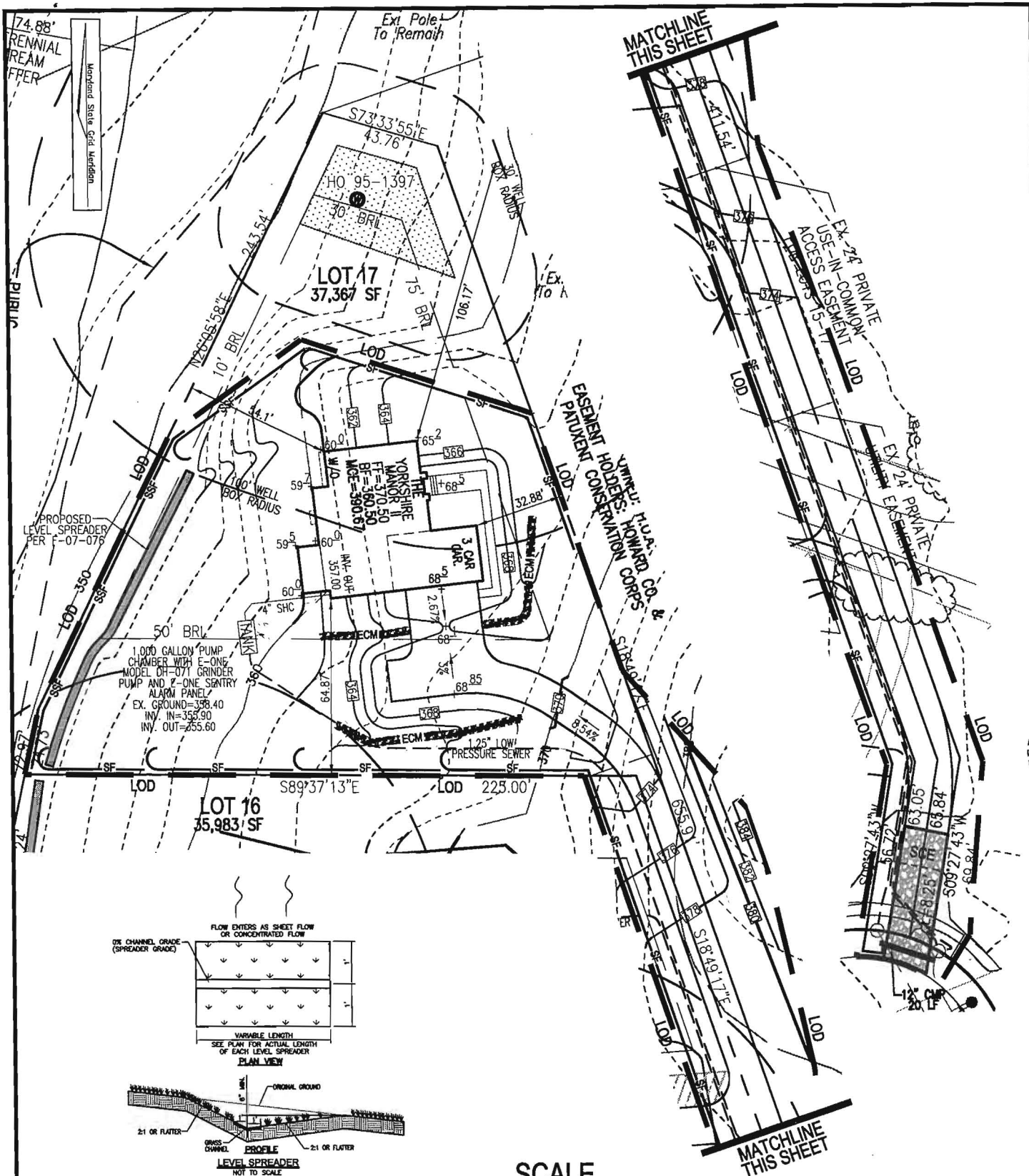
Water Treatment/Conditioning: Softener, Sediment Filter

Table with 5 columns: PARAMETER, METHOD, MCL (pCi/L), RESULT (pCi/L), COMMENT. Rows include Gross Alpha (Short-Term), Gross Beta (Short-Term), Gross Alpha (Long-Term), Gross Beta (Long-Term), Radium 226, and Radium 228.

2/19/15, H.O.
[+] Upon well observation on 2/4/15, the well was muddy and the tag was difficult to read. The correct tag number was provided to us by the builder.

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



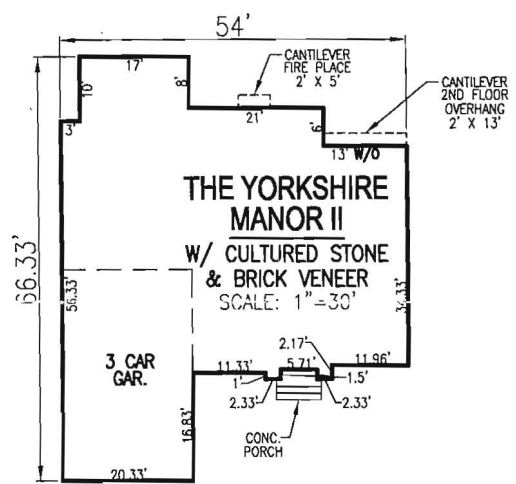
SCALE
1"=50'

THE EXISTING WELL SHOWN ON LOT 17 TAG NO. 95-1397 HAS BEEN FIELD LOCATED BY FISHER, COLLINS, & CARTER, INC., AND IS ACCURATELY SHOWN.

BUILDING OF LOT 17 FLOOR AREAS:
 BASEMENT FLOOR AREA: 1790
 FIRST FLOOR AREA: 1880
 SECOND FLOOR AREA: 1830
 BEDROOMS: 4

NOTE: STORMWATER MANAGEMENT (WQv AND CPv) IS PROVIDED BY EXTENDED DETENTION FACILITY, ONE RAIN GARDEN, ROADWAY GRASS CHANNELS, AND ON-LOT LEVEL SPREADERS (F-07-076). LOT 3 DOES NOT REQUIRE ANY ADDITIONAL PRACTICES.

BUILDING PERMIT NO. _____



SCALE: _____ AS SHOWN
 DRAWN BY: _____ JMR
 CHECKED BY: _____ RHV
 DATE: _____ FEBRUARY 2014
 PROJECT #: _____ 13-21
 SHEET#: _____ 1 OF 1

PLOT PLAN
WALNUT CREEK
LOT 17
REF: F-07-076
 TAX MAP 28 PARCEL 49
 BLOCK 11
 5TH ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND

ADDRESS
 12225 BASSLERS WAY
 ELLICOTT CITY, MD 21042
 GP: 13-038

OWNER
 TRINITY QUALITY HOMES, INC.
 3675 PARK AVENUE, SUITE 301
 ELLICOTT CITY, MARYLAND 21043
 (410) 480-0023

ROBERT H. VOGEL ENGINEERING, INC.
 ENGINEERS • SURVEYORS • PLANNERS
 8407 MAIN STREET ELLICOTT CITY, MD 21043 TEL: 410.461.7666 FAX: 410.461.6961