

C1 16634

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)

COUNTY NUMBER

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED

Depth of Well 500 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-95-2391

OWNER D.R. Horton, WELL SITE ADDRESS Drovers Lane, TOWN Cooksville, SUBDIVISION Vista Ridge, SECTION, LOT 16

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entries for Orange Clay, Orange Loamy, Light Brown, Orange Loamy, Gray, Brown, Gray, White, Gray.

GROUTING RECORD: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL (CTM, BC), NO. OF BAGS 42, NO. OF POUNDS 2948, GALLONS OF WATER 252, DEPTH OF GROUT SEAL 0 to 110 ft.

CASING RECORD: MAIN CASING TYPE (PL), Nominal diameter top (main) casing 10 1/2 inch, Total depth of main casing 113 ft.

OTHER CASING (if used) table with columns: diameter inch, depth (feet) from, to.

SCREEN RECORD: screen type or open hole (H), insert appropriate code below (H, BR, PL, OT).

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED (Y)

CIRCLE APPROPRIATE LETTER: A, E, P

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...

DRILLERS LIC. NO. 1 M SD 009, DRILLERS SIGNATURE Allen Conner

LIC. NO. 1 D

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

DEPTH (nearest ft.) table with columns: 1-11, 15-17, 21-23, 24-26, 30-32, 36-38, 39-41, 45-47, 51-53, 56-60

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

TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST: HOURS PUMPED 0.6, PUMPING RATE 1 gal/min, METHOD USED TO MEASURE PUMPING RATE 1 gal, WATER LEVEL BEFORE PUMPING 33 ft, WHEN PUMPING 22.6 ft, TYPE OF PUMP USED (for test) 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, - below, LAND SURFACE 0.2 (nearest foot)

LATITUDE 39.3231010, LONGITUDE 77.0151825 (DEFAULT COORD. WGS 84)

NOTES:

B 1	09387	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL 538027-G please type	STATE PERMIT NUMBER HO -95 -2391
1 2 3 6				70 fill in this form completely 79

**OWNER INFORMATION**

Date Received (APA) 080612  
8 MM DD YY 13

DR Horton Inc  
15 Last Name Owner First Name 34

1356 Beverly RD Suite 300  
36 Street or RFD 55

McLean, VA 22101  
57 Town 70 State 72 Zip 76

**LOCATION OF WELL**

Howard  
8 COUNTY 21

Vista Ridge  
23 SUBDIVISION 42

SECTION 44 46 LOT 48 50  
16

Cooksville  
52 NEAREST TOWN 71

**DRILLER INFORMATION**

Allen Compton M S D 009  
76 Driller's Name License No. 81

Fogles Well Drilling, LLC  
Firm Name

P.O. Box 202 Woodbine, MD 21797  
Address

Allen Compton 7-1172  
Signature Date

**SOURCES OF DRILLING WATER**

1. Drovers  
2. Drovers Lane  
3.

11 STREET ADDRESS 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

34 30' 37  
DISTANCE FROM ROAD

ENTER FT OR MI 38 39

TAX MAP: 8 BLK: 23 PARCEL 176

**WELL INFORMATION**

APPROX. PUMPING RATE 5  
1 GAL. PER MIN. 8 12

AVERAGE DAILY QUANTITY NEEDED 500  
1 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

OPEN LOOP GEOTHERMAL

CLOSED LOOP GEOTHERMAL

**NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL**

Howard A516045 13  
COUNTY NAME COUNTY NO.

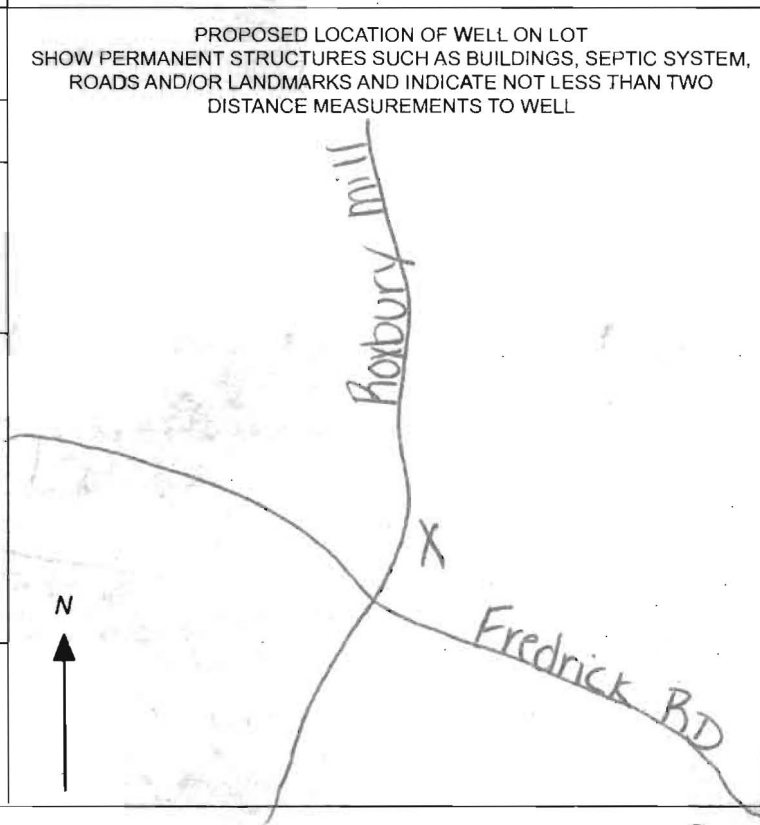
STATE SIGNATURE INSERT S →

DATE ISSUED 09/26/2012  
43 MM DD YY 48

CO SIGNATURE RHT EXP. DATE 9/26/13 41

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

39  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

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

APPROP. PERMIT NUMBER \_\_\_\_\_ G \_\_\_\_\_

PERMIT No. HO -95 -2391  
70 71 72 73 74 75 76 77 78 79

**SPECIAL CONDITIONS**  
NOTE: APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

FIELD DATA SHEET  
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 95-2391  
 Location of property (road) Drivers Lane  
 Subdivision Vista Ridge Lot 16 Block \_\_\_\_\_ Plat \_\_\_\_\_ Sec. \_\_\_\_\_  
 Well Driller Fogles Owner D. R. Horton

Depth of well 500'  
 Distance of measuring point (M.P.) above ground 2'  
 Static water level (S.W.L.) below M.P. 33'

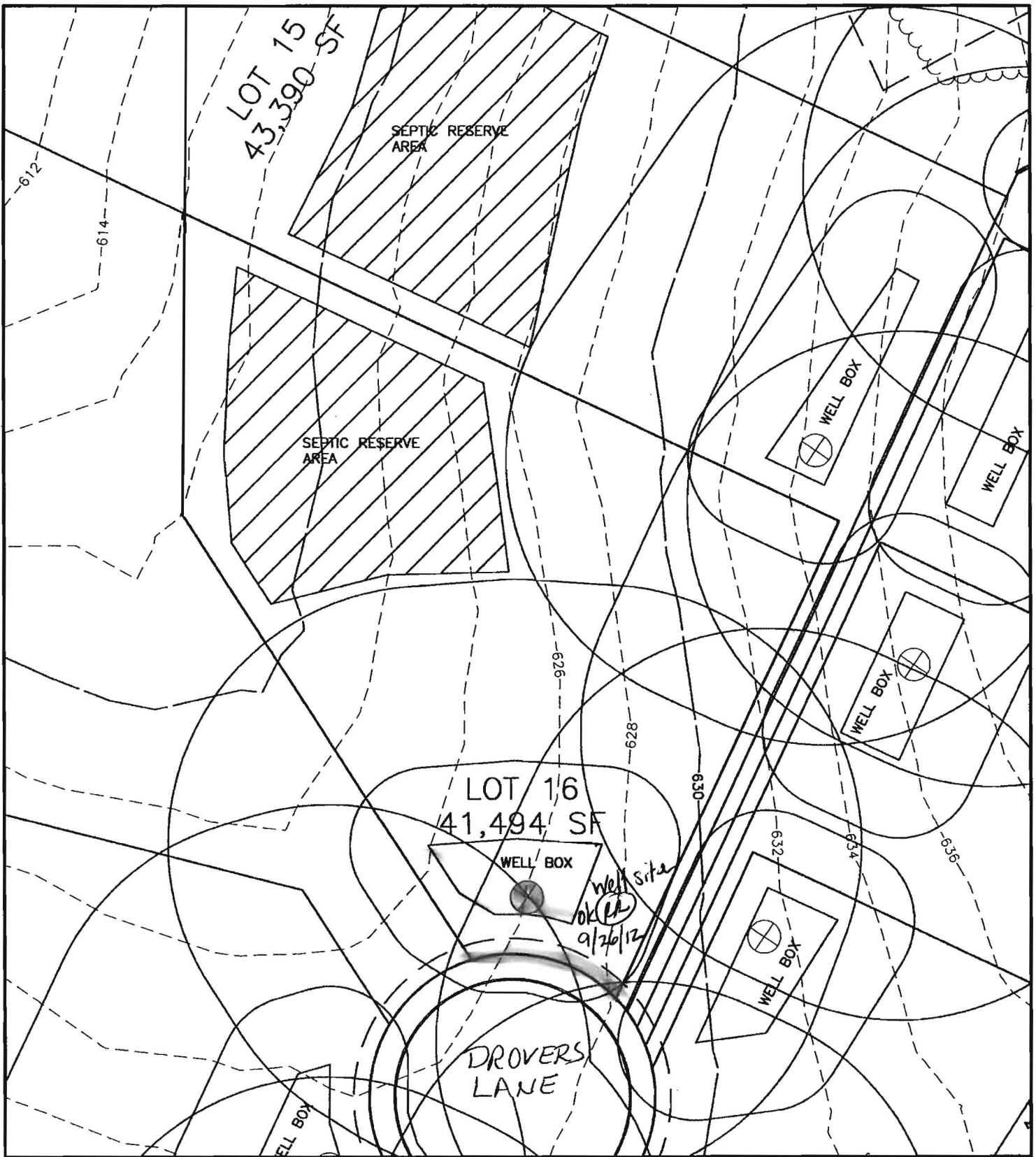
I. High rate pumping -- reservoir drawdown

Time pump started 9:15 Pumping rate 8.5  
 Total time 1 M. to reach pumping water level 226 ft. below M.P.

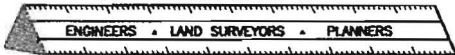
II. Recovery pump test data - observations to be recorded every 15 minutes

TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE time to fill 4 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
9:15	33	7		8.5
9:30	96	7		8.5
9:45	136	7		8.5
10:00	169	7		8.5
10:15	226	7		8.5
10:30	225	60		1
10:45	224	60		1
11:00	223	60		1
11:15	222	60		1
11:30	221	60		1
11:45	220	60		1
12:00	219	60		1
12:15	218	60		1
12:30	217	60		1
12:45	214	60		1
1:00	215	60		1
1:15	214	60		1
1:30	213	60		1
1:45	212	60		1
2:00	211	60		1
2:15	210	60		1
2:30	209	60		1
2:45	208	60		1





**BENCHMARK**



**ENGINEERING, INC.**

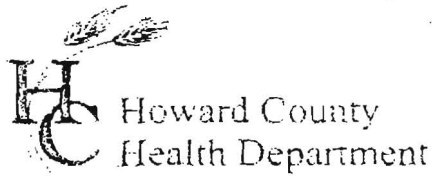
8480 BALTIMORE NATIONAL PIKE • SUITE 418 • ELLICOTT CITY, MD 21043  
 PHONE: 410-465-6105 FAX: 410-465-6644

**WELL EXHIBIT  
 VISTA RIDGE**

LOT 16

FORTH ELECTION DISTRICT  
 HOWARD COUNTY, MARYLAND

SCALE: 1" = 50' DATE: 5/16/12



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

lot #8-21

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 Benchmark Engineering  
(professional land surveyor or company employing professional land surveyors)  
on 7/13/12 (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 6/10/03

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: Fogles Well Drilling LLC Telephone #: 410 795 5070  
 Address: JPO Box 207  
Woodbine, MD 21797

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

License # and name of individual responsible for the field installation:

Name (Print): David C. Fogle License #: MSPD 226

\*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: P.R. Horton Telephone #: \_\_\_\_\_  
 Subdivision: Vista Ridge Lot #: 116 Well Tag #: HO-95-2391  
 Site Address: 2045 Drakers Lane  
Coopersville, MD

<u>Submersible Pump Data</u>	<u>Pitless Adapter</u>	<u>Well Cap and Electric Conduit</u>
Make: <u>Grundfos</u>	Make: <u>Campbell</u>	Two piece watertight cap: <u>YES</u>
Model #: <u>ESB210-220</u>	Model #: <u>N/A</u>	Screened, vented well cap: <u>YES</u>
Pump Capacity: <u>15</u> GPM	Depth: <u>36"</u> (36" min)	Cap secured to casing: <u>YES</u>
Well Yield: <u>1</u> GPM	NSF/WSC approved: <u>YES</u>	Conduit min 1 1/2" B.G.: <u>YES</u>
Depth of well encountered at time of pump installation: <u>500</u> (feet)		Conduit secured to well cap: <u>YES</u>
If pump capacity exceeds well yield, a low water cutoff 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 <u>inside of well casing</u> <u>N/A</u>		

<u>Piping to house</u>	<u>House Connection</u>
Type: <u>1" poly pipe</u>	PVC sleeve to undisturbed soil at wall penetration: <u>YES</u>
PSI: <u>200</u> (60 psi min)	Length of sleeve (5" minimum from foundation): <u>W</u>
Depth of supply line: <u>36"</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: David Fogle date: 8/9/16

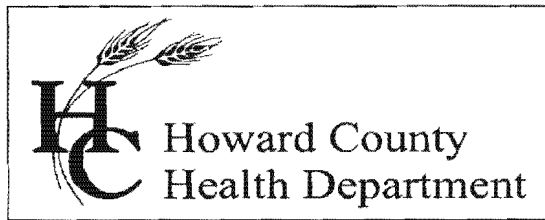
For Health Department Use Only – Not to be completed by Installer

Date Insp. Requested: 8/9/16 Date Insp. Approved: 8/9/16 Inspector: SC

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



72'  
 ↑  
 46'  
 ↑  
 (W)



## Bureau of Environmental Health

8930 Stanford Boulevard, Columbia, MD 21045

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

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

[www.hchealth.org](http://www.hchealth.org)

Facebook: [www.facebook.com/hocohealth](https://www.facebook.com/hocohealth)

Twitter: HowardCoHealthDep

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

### INTERIM CERTIFICATE OF POTABILITY

Expiration Date – June 26, 2017

January 26, 2017

Homeowner  
2045 Drovers Lane  
Cooksville, Maryland 21723

**RE: Vista Ridge, Lot #16  
2045 Drovers Lane  
Building Permit: B16001551  
Well Permit: HO-95-2391**

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 **1/26/2017**. Final approval of the well line connection to the dwelling was granted on **8/9/2016**. The well construction was completed on **1/14/2013**. Water samples were collected on **1/20/2017**.

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-95-2391. 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>

# FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

1413 Old Taneytown Rd. Westminster, MD (410) 848-1014 (410) 876-4554 FAX (410) 848-0298

## REPORT OF ANALYSIS

Laboratory ID #: 112517 Account #: 1930  
Reference: Vista Ridge Lot 16 Company: Fogle's Well Drilling  
Location: 2045 Drovers Lane Requested By: Dave Fogle  
Cooksville, MD 21723 Source: Well Water  
Date/ Time Collected: 1/20/2017 1132 Site: Kitchen Sink  
Date/Time Rec'd: 1/20/2017 1420 Treatment: None  
Chlorine ppm: Free: ND Total: ND pH: 5.0  
Collected By: J. Fogle 1974JF Well #: HO-95-2391

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	1/20/2017 / 1540 / BCD
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	1/20/2017 / 1540 / BCD

### NOTES

- 1 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 2 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 3 ND = None Detected
- 4 pH and Chlorine level tested in lab
- 5 Visual well check: Sealed, vented cap

**Reason for Test :** Use & Occupancy

**Building Permit # :** B16001551

Date Reported: 1/23/2017

Approving Authority,

A handwritten signature in cursive script that reads "Dana Bernard".

Dana Bernard, REHS  
Environmental Sanitarian  
Well & Septic Program

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

# FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

1413 Old Taneytown Rd. Westminster, MD (410) 848-1014 (410) 876-4554 FAX (410) 848-0298

## REPORT OF ANALYSIS

Laboratory ID #: 112339 Account #: 1930  
Reference: Vista Ridge Lot 16 Company: Fogle's Well Drilling  
Location: 2045 Drovers Lane Requested By: Dave Fogle  
Cooksville, MD 21723 Source: Well Water  
Date/ Time Collected: 1/11/2017 1348 Site: Kitchen Sink  
Date/Time Rec'd: 1/11/2017 1452 Treatment: None  
Chlorine ppm: Free: ND Total: ND pH: 5.2  
Collected By: J. Fogle 1974JF Well #: HO-95-2391

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	25.4	MPN/ 100 ml	<1.0	SM18 9223	1/12/2017 / 1030 / CRS
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	1/12/2017 / 1030 / CRS

### NOTES

- 1 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 2 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 3 Sample collected by client, analyzed as received
- 4 ND = None Detected
- 5 pH and Chlorine level tested in lab
- 6 Visual well check: Sealed, vented cap

**Reason for Test :** Use & Occupancy

**Building Permit # :** B16001551

Date Reported: 1/12/2017

# FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

1413 Old Taneytown Rd. Westminster, MD (410) 848-1014 (410) 876-4554 FAX (410) 848-0298

## REPORT OF ANALYSIS

Laboratory ID #: 112171 Account #: 1930  
Reference: Vista Ridge Company: Fogle's Well Drilling  
Location: 2045 Drovers Lane Requested By: Dave Fogle  
Cooksville, MD 21723 Source: Well Water  
Date/ Time Collected: 1/3/2017 1057 Site: Kitchen Sink Tap  
Date/Time Rec'd: 1/3/2017 1445 Treatment: None  
Chlorine ppm: Free: ND Total: ND pH: 5.2  
Collected By: J. Fogle 1974JF Well #: HO-95-2391

PARAMETERS	RESULTS	UNITS	REFERENCE	METHOD	DATE/TIME/ANALYST
Bacteria, Coliform, Total, MPN	3.1	MPN/ 100 ml	<1.0	SM18 9223	1/4/2017 / 1000 / BCD
Bacteria, E. coli, MPN	<1.0	MPN/ 100 ml	<1.0	SM18 9223	1/4/2017 / 1000 / BCD
Nitrate	1.26	mg/L	10	601	1/3/2017 / 1555 / CRS
Turbidity	0.56	NTU	<10	SM18 2130B	1/3/2017 / 1620 / CRS
Sand	NS	mg/L	5	Visual/Gravimetric	1/3/2017 / 1620 / CRS

### NOTES

- 1 mg/L = milligrams per liter (also, parts per million)
- 2 MPN/ 100 ml = Most Probable Number [of viable bacteria] per 100 ml of sample.
- 3 NS = None Seen (NS indicates less than 5 mg/L)
- 4 NTU = Nephelometric Turbidity Units
- 5 Results less than or within the reference range are considered satisfactory and within potable water limits at the time of sampling.
- 6 Sample collected by client, analyzed as received
- 7 ND = None Detected
- 8 pH and Chlorine level tested in lab
- 9 Visual well check: Sealed, vented cap

**Reason for Test :** Use & Occupancy

**Building Permit # :** B16001551

Date Reported: 1/4/2017

Lot 16 Vista Ridge



Bureau of Environmental Health
8930 Stanford Boulevard, Columbia, MD 21045
Main: 410-313-2640 | Fax: 410-313-2648
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www.hchealth.org
Facebook: www.facebook.com/hocohealth
Twitter: HowardCoHealthDep

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

OPERATION AND MAINTENANCE AGREEMENT
FOR AN ON-SITE SEWAGE DISPOSAL SYSTEM
HAVING AN ADVANCED PRE-TREATMENT SYSTEM

THIS AGREEMENT is made this 13 day of May 2016, among I.D.R. Horton, hereinafter collectively referred to as "Owner", and the Howard County Health Department hereinafter referred to as the "County".

WHEREAS, Owner is the owner or contract owner of a parcel of land located at 2045 Drovers Lane, in the Election District of Howard County, Maryland, and the deed and subdivision plat of the property is recorded among the Land Records of Howard County, Maryland, Tax Map # 008, Block # 023, Parcel # 0176, Deed Reference # 22430-35 and Tax Account # 09530 ("the Property").

WHEREAS, The Property is suitable for the installation of a conventional on-site sewage disposal system with an advanced pre-treatment system, utilizing best available technology to perform nitrogen reduction, in accordance with the Code of Maryland Regulations 26.04.02.07, effective January 1, 2013. The pre-treatment device being installed is Norweco.

NOW, THEREFORE, the parties hereto agree as follows:

A. Owner hereby grants to the County the right to enter upon the Property at any reasonable time with prior notice for access to the system to make periodic inspections and the Owner agrees to provide any information and data in Owner's possession reasonably requested and needed by the County.

B. Owner acknowledges and agrees that neither the County nor any of its agents or employees, either officially or individually, underwrites the operation of any system approved by them.

C. The Owner will devote reasonable care and effort to the operation and maintenance of the system in perpetuity or until a public sewer connection is made so that a system malfunction is not the result of poor maintenance, faulty operation, or neglect.

D. The Owner agrees to enter into a contract reasonably acceptable to the Owner and the County with a private entity to operate and maintain on a regularly scheduled basis an approved advanced pre-treatment system. The owner shall supply a copy of the contract to the County when it is renewed or altered.

HOWARD COUNTY CIRCUIT COURT (Land Records) WAR 16850, 16850-001, CE53\_16841. Date available 06/08/2016. Printed 01/04/2017.

JW 2/22/2016

000069

LR - Agreement
Recording Fee 20.00
Grantor/Grantee Name:
Sturjosis
Reference/Control #:
LR - Agreement
SFR Charge 40.00
SFR Total: 60.00
Tax: 60.00
02/12/2016 12:58
#22430-35 CC13-LS
#09530
Howard Co
Columbia/CC05.03.08
Printer 08

E. This agreement shall run with the land and upon Owner's taking title to the Property shall bind the Owner, their heirs, successors, and assigns to the provisions of the agreement as long as the property is in existence and after installation of the system. Owner further agrees that they shall inform in writing any subsequent purchaser or lessee of the Property that the system shall require maintenance or other attention. Upon taking title to the Property, the Owner agrees to cause this agreement to be recorded in the Land Records of Howard County and assure that it becomes part of the Deed for the subject property in order that prospective buyers may be aware of the special conditions affecting this property.

F. This agreement shall not be construed to limit any authority of the County to protect the public health, safety or comfort or to issue any other orders to take any other action which is now or may hereafter be within its authority.

G. This agreement may be voided at any time at the discretion of the County.

H. This agreement contains the entire agreement and understanding between the County 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 by their authorized representatives.

I. The laws of the State of Maryland govern the provisions of all transactions pursuant to this agreement.

J. Owner acknowledges and agrees that interior renovations to increase the number of bedrooms or an increase in living space shall not be permitted without approval from the County.

IN WITNESS WHEREOF, the parties have signed and sealed this agreement on the date indicated above.

Bert Nyman 5/13/2016  
/ Howard County Health Department

Jonathan A. Sturgis 4/13/16  
Owner #1 Signature                      Date

Jonathan A. Sturgis 4/13/16  
Owner #1 Print Name

\_\_\_\_\_  
Owner #2 Signature                      Date

\_\_\_\_\_  
Owner #2 Print Name

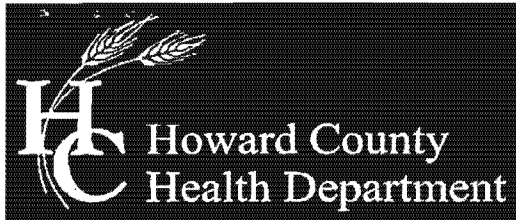
\_\_\_\_\_  
Buyer #1 Signature                      Date

\_\_\_\_\_  
Buyer #2 Signature                      Date

\_\_\_\_\_  
Buyer #1 Print Name

\_\_\_\_\_  
Buyer #2 Print Name

Lot 16 Vista Ridge



Bureau of Environmental Health
8930 Stanford Boulevard, Columbia, MD 21045
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Maura J. Rossman, M.D., Health Officer

OPERATION AND MAINTENANCE AGREEMENT
FOR AN ON-SITE SEWAGE DISPOSAL SYSTEM
HAVING AN ADVANCED PRE-TREATMENT SYSTEM

THIS AGREEMENT is made this 13 day of May 2016, among D.R. Horton, hereinafter collectively referred to as "Owner", and the Howard County Health Department hereinafter referred to as the "County".

WHEREAS, Owner is the owner or contract owner of a parcel of land located at 2045 Drivers Lane, in the Election District of Howard County, Maryland, and the deed and subdivision plat of the property is recorded among the Land Records of Howard County, Maryland, Tax Map # 008, Block # 0023, Parcel # 0176, Deed Reference # 22430-25 and Tax Account # 09530 ("the Property").

WHEREAS, The Property is suitable for the installation of a conventional on-site sewage disposal system with an advanced pre-treatment system, utilizing best available technology to perform nitrogen reduction, in accordance with the Code of Maryland Regulations 26.04.02.07, effective January 1, 2013. The pre-treatment device being installed is Norwelco.

NOW, THEREFORE, the parties hereto agree as follows:

- A. Owner hereby grants to the County the right to enter upon the Property at any reasonable time with prior notice for access to the system to make periodic inspections and the Owner agrees to provide any information and data in Owner's possession reasonably requested and needed by the County.
B. Owner acknowledges and agrees that neither the County nor any of its agents or employees, either officially or individually, underwrites the operation of any system approved by them.
C. The Owner will devote reasonable care and effort to the operation and maintenance of the system in perpetuity or until a public sewer connection is made so that a system malfunction is not the result of poor maintenance, faulty operation, or neglect.
D. The Owner agrees to enter into a contract reasonably acceptable to the Owner and the County with a private entity to operate and maintain on a regularly scheduled basis an approved advanced pre-treatment system. The owner shall supply a copy of the contract to the County when it is renewed or altered.

E. This agreement shall run with the land and upon Owner's taking title to the Property shall bind the Owner, their heirs, successors, and assigns to the provisions of the agreement as long as the property is in existence and after installation of the system. Owner further agrees that they shall inform in writing any subsequent purchaser or lessee of the Property that the system shall require maintenance or other attention. Upon taking title to the Property, the Owner agrees to cause this agreement to be recorded in the Land Records of Howard County and assure that it becomes part of the Deed for the subject property in order that prospective buyers may be aware of the special conditions affecting this property.

F. This agreement shall not be construed to limit any authority of the County to protect the public health, safety or comfort or to issue any other orders to take any other action which is now or may hereafter be within its authority.

G. This agreement may be voided at any time at the discretion of the County.

H. This agreement contains the entire agreement and understanding between the County 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 by their authorized representatives.

I. The laws of the State of Maryland govern the provisions of all transactions pursuant to this agreement.

J. Owner acknowledges and agrees that interior renovations to increase the number of bedrooms or an increase in living space shall not be permitted without approval from the County.

IN WITNESS WHEREOF, the parties have signed and sealed this agreement on the date indicated above.

Bert Nyeon 5/13/2016  
Howard County Health Department

Jonathan A. Sturgis 4/13/16  
Owner #1 Signature                      Date

Jonathan A. Sturgis 4/13/16  
Owner #1 Print Name

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Owner#2 Signature                      Date

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Owner #2 Print Name

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Buyer #1 Signature                      Date

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Buyer #2 Signature                      Date

\_\_\_\_\_  
Buyer #1 Print Name

\_\_\_\_\_  
Buyer #2 Print Name