



**B 1** SEQUENCE NO. (MDE USE ONLY) **STATE OF MARYLAND** STATE PERMIT NUMBER  
 58611 **APPLICATION FOR PERMIT TO DRILL WELL** HO-17-0007  
 please type fill in this form completely 79

**1 2 3 6** Date Received (APA) 410-489-7392  
 8 MM DD YY 13 01/06/17  
**OWNER INFORMATION**  
 15 Last Name Stanley Miller Family Trust  
 Owner First Name  
 36 16217 Frederick Road  
 Street or RFD  
 55 Woodbine MD 21797  
 57 Town 70 State 72 Zip 76

**B 3** LOCATION OF WELL  
 8 COUNTY Howard County 21  
 23 SUBDIVISION Stanley Miller Property 42  
 SECTION 44 46 LOT 1 48 50  
 52 NEAREST TOWN Woodbine 71

**DRILLER INFORMATION**  
 76 Driller's Name Michael Barlow MWD 355 License No. 81  
 Firm Name Barlow Well Drilling  
 Address 522 Underwood Lane 21014  
 Signature Date 1/3/17

**B 4** SOURCES OF DRILLING WATER  
 1. WELL  
 2.  
 3. HCHD  
 80' casing  
 95' water  
 220' water  
 ~280 down

11 STREET ADDRESS Frederick Road 30  
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
 53750 34 37  
 DISTANCE FROM ROAD FT  
 ENTER FT OR MI 38 39  
 TAX MAP: 7 BLK: 10 PARCEL 467

**B 2** WELL INFORMATION  
 1 2 APPROX. PUMPING RATE (GAL. PER MIN.) 5 8 12  
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 750 14 20

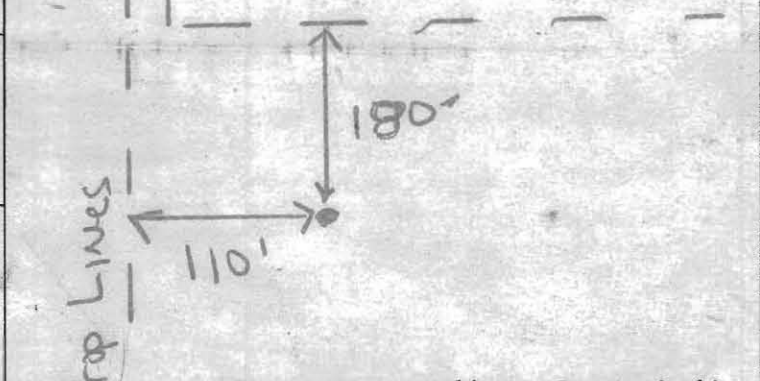
**USE FOR WATER** (CIRCLE APPROPRIATE BOX)  
 DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION  
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)  
 INDUSTRIAL, COMMERCIAL, DEWATERING  
 PUBLIC WATER SUPPLY WELL  
 TEST, OBSERVATION, MONITORING  
 OPEN LOOP GEOTHERMAL  
 CLOSED LOOP GEOTHERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL  
 11:45 19 sec / gal / foot  
 12:00 17 sec / gal / foot  
 12:15 HbW about 90'  
 COUNTY NAME Howard County COUNTY NO. 23  
 STATE SIGNATURE INSERT S →  
 DATE ISSUED 1/25/17  
 43 MM DD YY 48 CO SIGNATURE EXP. DATE 1/25/18  
 DW: 02/21/17 DOY: 02/28/17

APPROXIMATE DEPTH OF WELL 300 24 28 FEET  
 APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST

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

**METHOD OF DRILLING** (circle one)  
 BORED (or Augered) JETTED Jetted & DRIVEN  
 30 AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary)  
 37 CABLE REVerse-ROTary Drive-POINT  
 other



**REPLACEMENT OR DEEPEMED WELLS** (CIRCLE APPROPRIATE BOX)  
 THIS WELL WILL NOT REPLACE AN EXISTING WELL  
 THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED  
 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS  
 THIS WELL WILL 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-17-0007  
 70 71 72 73 74 75 76 77 78 79

Pursuant to § 10-624 of the State Govt. Article of the Maryland Code, personal info requested on this form is used in processing this form pursuant to COMAR 26.04.04. Failure to provide the info may result in this form not being processed. You have the right to inspect, amend, or correct this form. The Maryland Department of the Environment is subject to the Maryland Public Information Act. This form may be made available on the Internet via MDE's website and is subject to inspection or copying, in whole or in part, by the public and other governmental agencies, if not protected by federal or State Law.

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



**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: Barlow Well Drilling Telephone #: 410-838-6910  
Address: 522 Underwood Lane  
Bel Air MD 21014

(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 Barlow License# MWD 355

\*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: Zander Homes Telephone #: 443-421-2800  
Subdivision: Stanley Miller Prop Lot #: 1 Well Tag #: HO-17-0007V  
Site Address: 16285 Frederick Road  
16235 Woodbine MD

**Submersible Pump Data**

Make: FRANKLIN  
Model #: 10FRDIS4  
Pump Capacity: 10 GPM  
Well Yield: 4 GPM

**Pitless Adapter**

Make: BFI  
Model#: P100  
Depth: 42 (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.:   
Conduit secured to well cap:

Depth of well encountered at time of pump installation: 500 (feet)  
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

**Piping to house**

Type: 1" Zoops. poly  
PSI: 200 (160 psi min)  
Depth of supply line: 42 (36" min)

**House Connection**

PVC sleeve to undisturbed soil at wall penetration:   
Length of sleeve (5' minimum from foundation): 6'  
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: [Signature] date: 6/12/18

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

Date Insp. Requested: 6/26/18 Date Insp. Approved: 6/26/18 Inspector: SC  
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



Bureau of Environmental Health  
8930 Stanford Blvd | Columbia, MD 21045  
410.313.2640 - Voice/Relay  
410.313.2648 - Fax  
1.866.313.6300 - Toll Free

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

## INTERIM CERTIFICATE OF POTABILITY

Expiration Date – FEBRUARY 28, 201~~8~~<sup>9</sup>

August 28, 2018

Homeowner  
16235 Frederick Road  
Woodbine, MD 21797

**RE: Stanley Miller Property, Lot 1**  
**16235 Frederick Road**  
**Building Permit: B17003436**  
**Well Permit: HO-17-0007**

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 **8/21/2018**. Final approval of the well line connection to the dwelling was granted on **6/26/2018**. The well construction was completed on **2/28/2017**. Water samples were collected on **8/20/2018**.

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-17-0007. 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>



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

In closing, please refer to our "[Homeowner Fact Sheet](#)" which illustrates a better understanding for your Onsite Sewage Disposal System. You will also find a link to Maryland Department of the Environments website which describes in further detail operation and maintenance of your septic system.

Approving Authority,

Kevin M. Wolf, LEHS, R.S./REHS, Supervisor  
Groundwater Management Section  
Well & Septic Program

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

# ENVIRO-CHEM LABORATORIES, INC.



47 Loveton Circle, Suite K • Sparks, Maryland 21152

410-472-1112

## FINAL REPORT OF ANALYSIS

Zander Homes  
2197 Ridge Rd  
Reisterstown, MD 21136

Report Date: 08/23/2018  
Report Number: 180823085055  
Use and Occupancy  
PERMIT #: B17003436

LAB#- E055311-01      SAMPLE ID- 16235 Fredrick Rd  
LOCATION-      Upstairs Hall Bath Sink by Stairs  
DATE SAMPLED- 08/20/2018      TIME SAMPLED- 13:10  
DATE RECEIVED- 08/20/2018      TIME RECEIVED- 14:30  
DELIVERED BY- Stephen Shelley      RECEIVED BY- Ginny Shelley  
COMMENTS-

COMMENTS-

*No Treatment  
-Kaw*

ANALYSIS	METHOD	ANALYSIS DATE/TIME	BY	RESULT	DATA FLAG
<b>Microbiology by Enviro-Chem</b>					
Total Coliform	SM 9223B	08/20/18 15:00	VPS	Absent	PASS
E. Coli	SM 9223B	08/20/18 15:00	VPS	Absent	PASS

Based on coliform bacteriological standards, at the time of sampling this water was **SAFE** for drinking water purposes.

### Wet Chemistry by Enviro-Chem

Nitrate (as N)	EPA 300.0	08/20/18 18:00	BMG	3.6	mg/L	PASS
pH	SM4500-H+B	08/20/18 17:00	VPS	6.6	SU	
Turbidity	EPA 180.1	08/20/18 17:00	VPS	< 0.2	NTU	

# ENVIRO-CHEM LABORATORIES, INC.



47 Loveton Circle, Suite K • Sparks, Maryland 21152

410-472-1112

## FINAL REPORT OF ANALYSIS

Zander Homes  
2197 Ridge Rd  
Reisterstown, MD 21136

Report Date: 08/23/2018  
Report Number: 180823085055  
Use and Occupancy  
PERMIT #: B17003436

LAB#- E055311-02      SAMPLE ID- 16235 Fredrick Rd      WELL #      HO 17-0007  
LOCATION-      Pressure Tank      SAMPLER-      S Shelley #5510 SS  
DATE SAMPLED- 08/20/2018      TIME SAMPLED- 13:05      CHLORINE-      <0.05 mg/L  
DATE RECEIVED- 08/20/2018      TIME RECEIVED- 14:30  
DELIVERED BY- Stephen Shelley      RECEIVED BY- Ginny Shelley  
COMMENTS-

COMMENTS-

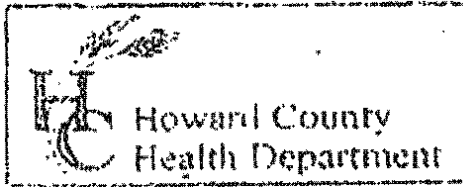
ANALYSIS	METHOD	ANALYSIS DATE/TIME	BY	RESULT	DATA FLAG
<b>Wet Chemistry by Enviro-Chem</b>					
Sand	EPA 160.5	08/20/18 17:10	VPS	< 0.5	ml/L/Hr

Stephen Shelley  
Laboratory Director

### Certifications

State of Maryland Laboratory

#192



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

STANLEY MILLER PROP LOT 1

TO ALL INTERESTED PARTIES

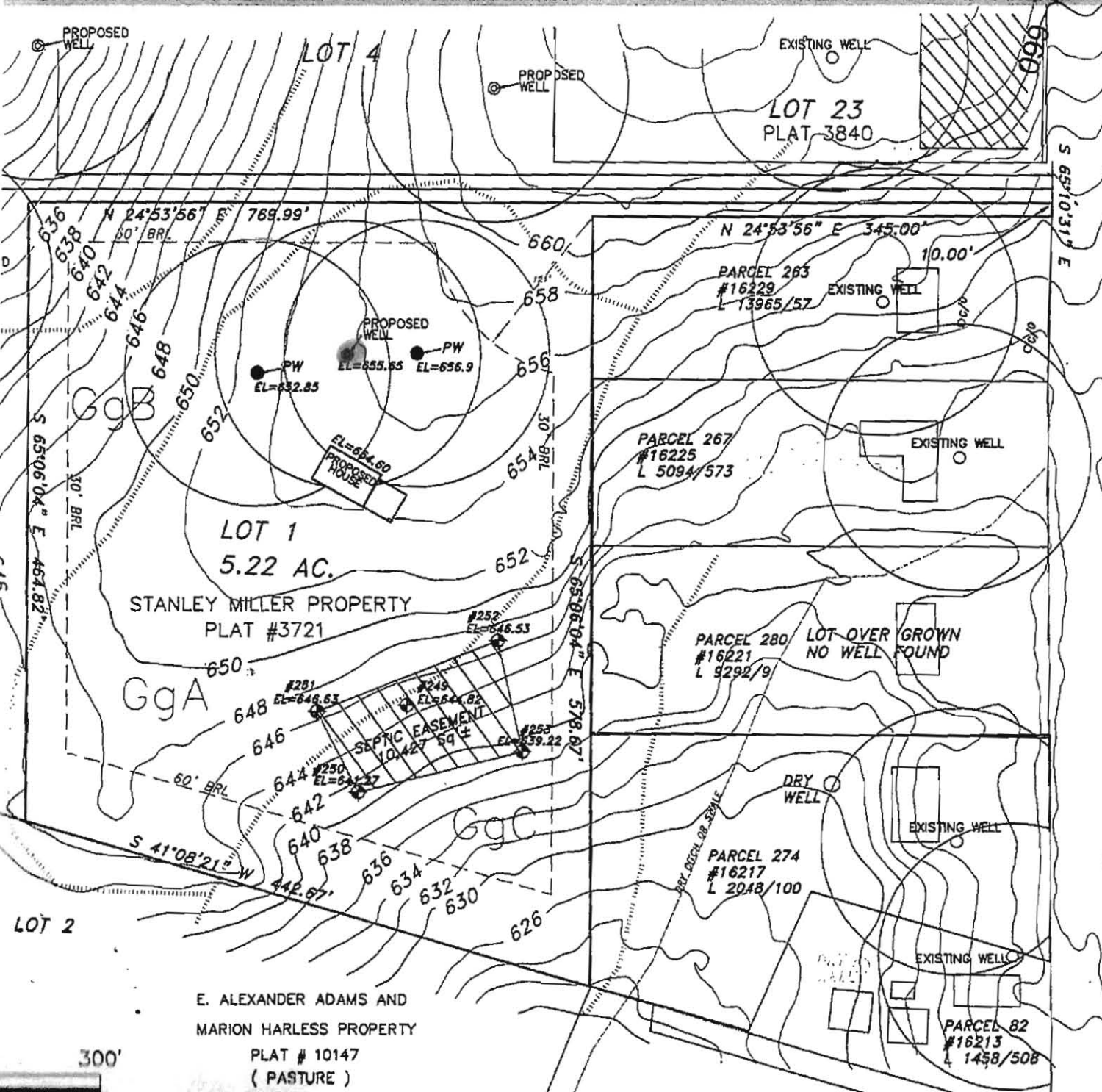
When submitting a well permit application for a proposed well for new construction, please indicate one of the following:

- The well site has been staked by NTT ASSOCIATES  
(professional land surveyor or company employing professional land surveyors)  
on 1/25/07 (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 6/10/03

1" = 100 Feet



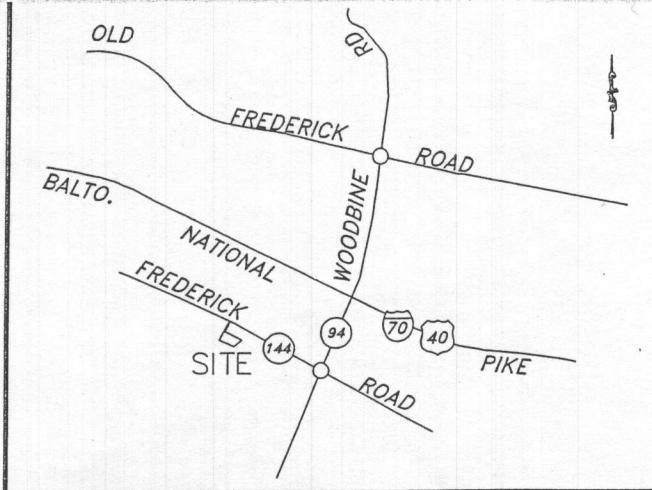
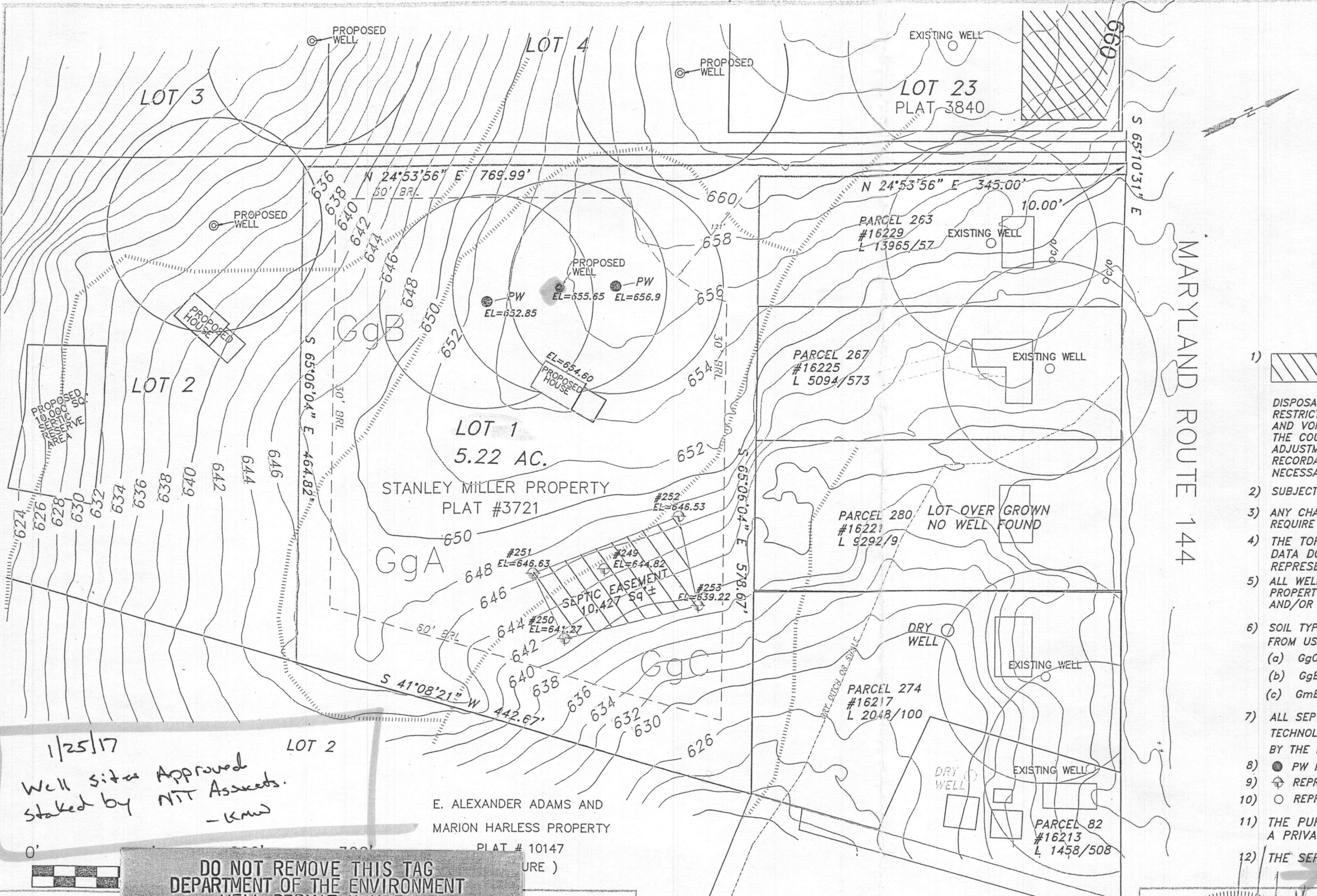
**GENERAL NO**

- 1)  "THIS AREA DESIGNATES A PRIVATE SEWAGE DISPOSAL AREA OF AT LEAST 10,000 SQ FT AS REQUIRED BY THE MARYLAND DEPARTMENT OF THE ENVIRONMENT FOR INSTALLATION OF PRIVATE SEWAGE DISPOSAL IMPROVEMENTS OF ANY TYPE RESTRICTED. THIS SEWAGE DISPOSAL AREA IS VOID UPON CONNECTION TO A PUBLIC SEWER SYSTEM. THE COUNTY HEALTH OFFICER SHALL MAKE NECESSARY ADJUSTMENTS TO THE PRIVATE SEWAGE DISPOSAL RECORDATION OF A REVISED SEWAGE DISPOSAL PLAN IF NECESSARY."
- 2) SUBJECT LOT WAS CREATED IN 1977.
- 3) ANY CHANGES TO A PRIVATE SEWAGE DISPOSAL PLAN REQUIRE A REVISED PERCOLATION CERTIFICATE.
- 4) THE TOPOGRAPHY OF THIS PLAT IS REPRESENTED BY CONTOUR LINES AS SHOWN ON THIS PLAN. IT REPRESENTS THE RELATIVE CHANGES IN ELEVATION.
- 5) ALL WELLS AND SEPTIC SYSTEMS LOCATED ON THIS PLAT ARE TO BE LOCATED WITHIN PROPERTY BOUNDARIES AND 200' DOWN DRAINAGE AND/OR SEPTIC SYSTEMS HAVE BEEN IDENTIFIED.
- 6) SOIL TYPE BOUNDARY LINE SCALED FROM USDA WEB SITE:
  - (a) GgC GLENELG LOAM 8 TO 15%
  - (b) GgB GLENELG LOAM 3 TO 8%
  - (c) GmB GLENVILLE SILT LOAM 3 TO 10%
- 7) ALL SEPTIC SYSTEMS MUST USE THE "PERCOLATION" TECHNOLOGY, AND WILL BE DESIGNED BY THE ENGINEER.
- 8) ● PW REPRESENTS PROPOSED ALTERED WELL
- 9) ⊕ REPRESENTS PASSED PERC HOLE.
- 10) ○ REPRESENTS EXISTING WELL.
- 11) THE PURPOSE OF THIS PLAN IS TO SHOW THE LOCATION OF A PRIVATE SEWAGE DISPOSAL AREA.
- 12) THE SEPTIC FOR PARCELS 82 & 2

LOT 2

E. ALEXANDER ADAMS AND  
MARION HARLESS PROPERTY  
PLAT # 10147  
( PASTURE )

300'



VICINITY MAP 1" = 6000'

**GENERAL NOTES:**

- 1) "THIS AREA DESIGNATES A PRIVATE SEWAGE DISPOSAL AREA OF AT LEAST 10,000 SQUARE FEET AS REQUIRED BY THE MARYLAND DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED. THIS SEWAGE DISPOSAL AREA SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE AUTHORITY TO GRANT ADJUSTMENTS TO THE PRIVATE SEWAGE DISPOSAL EASEMENT RECORDATION OF A REVISED SEWAGE EASEMENT SHALL NOT BE NECESSARY."
- 2) SUBJECT LOT WAS CREATED IN 1977.
- 3) ANY CHANGES TO A PRIVATE SEWAGE EASEMENT SHALL REQUIRE A REVISED PERCOLATION CERTIFICATION PLAN.
- 4) THE TOPOGRAPHY OF THIS PLAT IS TAKEN FROM HOWARD COUNTY DATA DOWNLOAD WEB SITE, AND IS VERIFIED TO ACCURATELY REPRESENTS THE RELATIVE CHANGES ON THE SUBJECT PROPERTY.
- 5) ALL WELLS AND SEPTIC SYSTEMS LOCATED WITHIN 100' OF THE PROPERTY BOUNDARIES AND 200' DOWN-GRADE OF ANY WELLS AND/OR SEPTIC SYSTEMS HAVE BEEN SHOWN.
- 6) SOIL TYPE BOUNDARY LINE SCALED FROM MAP OBTAINED FROM USDA WEB SITE:  
 (a) GgC GLENELG LOAM 8 to 15%  
 (b) GgB GLENELG LOAM 3 to 8%  
 (c) GmB GLENVILLE SILT LOAM 3 to 8%
- 7) ALL SEPTIC SYSTEMS MUST USE THE "BEST AVAILABLE TECHNOLOGY", AND WILL BE DESIGNED AND VERIFIED BY THE ENGINEER.
- 8) ● PW REPRESENTS PROPOSED ALTERNATIVE WELL SITES.
- 9) ⊕ REPRESENTS PASSED PERC HOLE.
- 10) ○ REPRESENTS EXISTING WELL.
- 11) THE PURPOSE OF THIS PLAN IS TO ESTABLISH A PRIVATE SEWAGE DISPOSAL AREA EASEMENT.
- 12) THE SEPTIC FOR PARCELS 82 & 267 COPIED FROM PLANS OF OTHERS. 16235 Frederick Rd.

1/25/17  
Well sites Approved  
staked by NTT Associates.  
-KMD

DO NOT REMOVE THIS TAG  
DEPARTMENT OF THE ENVIRONMENT  
WELL PERMIT NUMBER

HO-17-0007

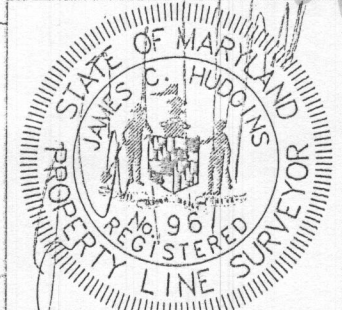
INFORMATION-GIVE NUMBER AND WRITE  
1800 WASHINGTON BLVD  
BALTIMORE MARYLAND 21230

E. ALEXANDER ADAMS AND  
MARION HARLESS PROPERTY  
PLAT # 10147

Family Trust  
ad  
21797  
392

REVISED: 3/1/2016 TO SHOW SEPTIC ON PARCELS 82 & 86

This is to certify that I either personally prepared or was in responsible charge over the preparation of this drawing and the surveying work reflected in it, all set forth in Regulation .12 of Chapter 09.13.06 of the Code of Maryland Annotated Regulations.



J. Carl Hudgins PLS #96  
Expiration Date: 3/11/16

**PERCOLATION CERTIFICATION PLAN**

LOT 1 STANLEY MILLER PROPERTY  
PLAT BOOK 27 PAGE 22 & PLAT 3721  
TAX MAP 7, PARCEL 467  
4TH ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND

**NTT Associates, Inc.**  
16205 Old Frederick Rd.  
Mt. Airy, Maryland 21771  
Phone: (410) 442-2031  
Fax: (410) 442-1315  
www.nttsurveyors.com

Scale:	1" = 100'
Date:	12/18/15
Field By:	JCH
Drawn By:	JCH/SCK
File No.:	STANLEYMILLER

HEALTH OFFICER, HOWARD COUNTY HEALTH DEPT. DATE 3/22/16