

6343

SEQUENCE NO. (OEP USE ONLY) 538-5223

STATE OF MARYLAND PERMIT TO DRILL WELL

OEP PERMIT NUMBER 40-81-1273

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

please print or type

fill in this form completely

**Date Received** 12/30/85 9:30 AM

**OWNER INFORMATION**

15 Last Name **McKENZIE** Owner First Name **LEO**

36 Street or RFD **6958 PINDLEL SCH RD**

57 Town **FULTON** 70 State 72 **MD** 74 Zip 76 **20759**

**LOCATION OF WELL**

8 COUNTY **HOWARD** 21

23 SUBDIVISION **MAD 41** 42

SECTION **31** LOT **8** PARCELL **33**

52 NEAREST TOWN **SIMPSONVILLE**

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

**DRILLER INFORMATION**

Driller's Name **GEORGE F. EASTERDAY** 77 License No. 80 **40**

Firm Name **L. F. EASTERDAY, INC**

Address **9255 BROWN CHURCH RD. MT. AIRY, MD 21711**

Signature **George F. Easterday** Date **12/22/85**

**DIRECTION OF WELL FROM TOWN (CIRCLE BOX)**

**NEAR WHAT ROAD** **6958 Pindell Sch Rd** 30

**ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)**

**DISTANCE FROM ROAD** **200** 37

ENTER FT or MI **FT** 38 39

**WELL INFORMATION**

APPROX. PUMPING RATE (GAL. PER MIN.) **5**

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **500**

**USE FOR WATER (CIRCLE APPROPRIATE BOX)**

HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)

FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)

INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)

PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)

TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

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

COUNTY NAME **HOWARD** COUNTY NO. **A-30357**

OEP SIGNATURE **B. Nelson** STATE HEALTH INSERT S. **06/28/86**

DATE ISSUED **123085** CO SIGNATURE **B. Nelson** EXP DATE **06/28/86**

NORTH GRID **490000** EAST GRID **0826000**

APPROXIMATE DEPTH OF WELL **200** 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

THIS WELL WILL DEEPEM AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) \_\_\_\_\_

**Not to be filled in by driller (OEP USE ONLY)**

APPROP. PERMIT NUMBER **GAP**

FORCE **PA** WRITE INITIALS IN BOX PERMIT NO. **40-81-1273**

**SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X**

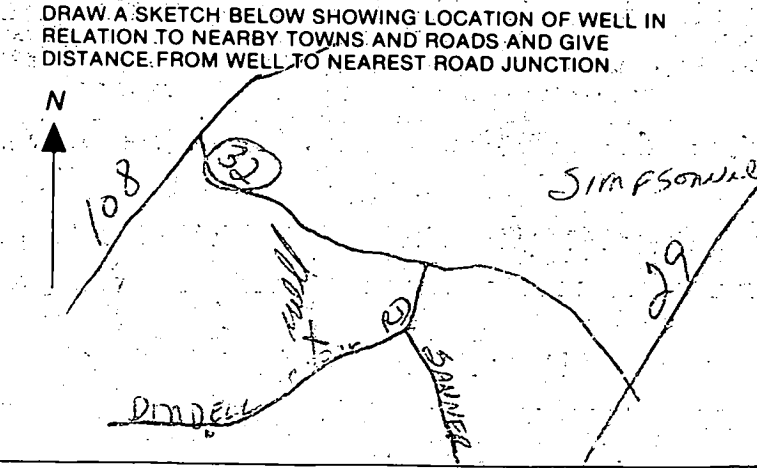
**SOURCES OF DRILLING WATER**

- WELL
- 
- 

**WRITE THE BOX NUMBER FROM THE MAP HERE**

**8206**

**4900**

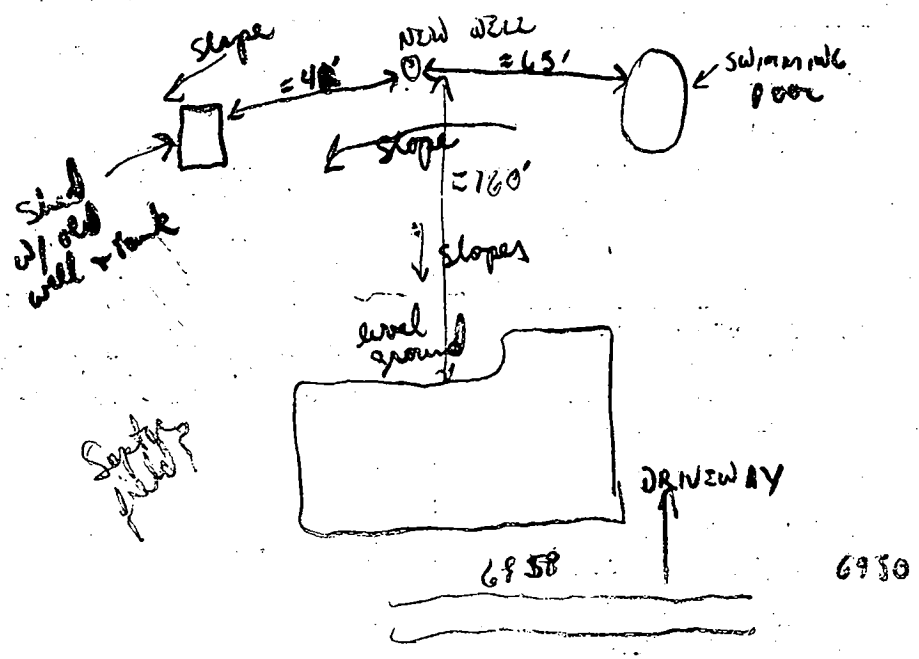


SPECIAL CONDITIONS

12/30/85  
OK id  
(B)

28" Annular space  
10 bags cement  
tag given to driller ✓  
30' casing  
grout done - OK  
No pump test done

Static H<sub>2</sub>O level 44'  
well depth at least 260' } our own measurements



PUB. SEWER STATUS VERIFIED BY \_\_\_\_\_

ISSUE DATE: \_\_\_\_\_

APPROVAL DATE: \_\_\_\_\_

**PERMIT**

**INDEXED**

**ON-SITE SEWAGE DISPOSAL SYSTEM  
HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH**

05-342988

P \_\_\_\_\_

A 516050-K

\_\_\_\_\_ IS PERMITTED TO INSTALL  ALTER

ADDRESS: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

SUBDIVISION: \_\_\_\_\_ LOT NUMBER: \_\_\_\_\_

ADDRESS: 6958 Pindell School Road PROPERTY OWNER: Leo McKenzie

SEPTIC TANK CAPACITY (GALLONS): \_\_\_\_\_

PUMP CHAMBER CAPACITY (GALLONS): \_\_\_\_\_

NUMBER OF BEDROOMS: \_\_\_\_\_

SQUARE FEET PER BEDROOM: \_\_\_\_\_

LINEAR FEET OF TRENCH REQUIRED: \_\_\_\_\_

TRENCHES:	Trench to be _____ feet wide. Inlet _____ feet below original grade. Bottom maximum depth _____ feet below original grade. Effective area begins at _____ feet below original grade. _____ feet of stone below distribution pipe.
LOCATION:	_____
PURPOSE:	_____


PLANS APPROVED: \_\_\_\_\_ DATE: \_\_\_\_\_

- NOTE: PERMIT VOID AFTER 2 YEARS
- NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
- NOTE: WATERTIGHT SEPTIC TANKS REQUIRED
- NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL
- NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS

**NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM**

A516050-K

Click here for a plain text ADA compliant screen.

	<b>Maryland Department of Assessments and Taxation</b> <b>HOWARD COUNTY</b> <b>Real Property Data Search</b>	<a href="#">Go Back</a> <a href="#">View Map</a> <a href="#">New Search</a>
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Account Identifier: District - 05 Account Number - 342988

**Owner Information**

<b>Owner Name:</b>	MCKENZIE LEO E MCKENZIE VIVIAN J WF	<b>Use:</b>	RESIDENTIAL
<b>Mailing Address:</b>	6958 PINDELL SCHOOL RD FULTON MD 20759-9718	<b>Principal Residence:</b>	NO
		<b>Deed Reference:</b>	1) / 1421/ 616 2)

**Location & Structure Information**

<b>Premises Address</b>	<b>Zoning</b>	<b>Legal Description</b>
6958 PINDELL SCHOOL RD. FULTON 20759	RRDEO	1 LOT NO 8 S 2 6958 PINDELL SCHOOL RD

Map	Grid	Parcel	Sub District	Subdivision	Section	Block	Lot	Group	Plat No:
41	3	33					8	81	Plat Ref:

<b>Special Tax Areas</b>	<b>Town Ad Valorem Tax Class</b>	NO A/V, NO M/P, RURAL FIRE TAX
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Primary Structure Built	Enclosed Area	Property Land Area	County Use
1958	1,770 SF	2.23 AC	
<b>Stories</b>	<b>Basement</b>	<b>Type</b>	<b>Exterior</b>
1	YES	STANDARD UNIT	FRAME

**Value Information**

	Base Value	Value As Of 01/01/2002	Phase-in Assessments As Of 07/01/2002	Phase-in Assessments As Of 07/01/2003
<b>Land:</b>	102,300	132,300		
<b>Improvements:</b>	118,490	163,800		
<b>Total:</b>	220,790	296,100	245,893	270,996
<b>Preferential Land:</b>	0	0	0	0

**Transfer Information**

<b>Seller:</b> BUDDHIST INC HAE IN SA	<b>Date:</b> 12/27/1985	<b>Price:</b> \$90,000
<b>Type:</b> IMPROVED ARMS-LENGTH	<b>Deed1:</b> / 1421/ 616	<b>Deed2:</b>
<b>Seller:</b> BERGER HARRY &	<b>Date:</b> 11/15/1982	<b>Price:</b> \$107,500
<b>Type:</b> IMPROVED ARMS-LENGTH	<b>Deed1:</b> / 1128/ 19	<b>Deed2:</b>
<b>Seller:</b>	<b>Date:</b>	<b>Price:</b>
<b>Type:</b>	<b>Deed1:</b>	<b>Deed2:</b>

**Exemption Information**

Partial Exempt Assessments	Class	07/01/2002	07/01/2003
County	000	0	0
State	000	0	0
Municipal	000	0	0

**Tax Exempt:** NO  
**Exempt Class:**

**Special Tax Recapture:**  
\* NONE \*