

PROBLEM ADDRESS

RECEIVED

PERMIT NUMBER: B 21000278 DATE ACCEPTED:

JAN 26 2021



RESIDENTIAL BUILDING PERMIT APPLICATION

HOWARD COUNTY DEPARTMENT OF INSPECTIONS, LICENSES, AND PERMITS

3430 COURT HOUSE DRIVE, ELLICOTT CITY, MD 21043 - PHONE: (410) 313-2455 OPTION #4
www.howardcountymd.gov

LICENSES & PERMITS DIVISION

BUILDING SITE ADDRESS REQUIRED

Street Address: 12330 PAWS SPRING CT		Unit:
City: ELLICOTT CITY	State: MD	Zip Code: 21042
Subdivision/Village/Complex Name:		SDP/WP/BA #:
Lot:	Tax Map:	Parcel:
		Grading Permit #:

DESCRIPTION OF WORK REQUIRED

Existing Use: SINGLE FAMILY	Proposed Use:	Estimated Cost: \$
Trade Work to Be Completed (Separate Permits Required): <input type="checkbox"/> Mechanical (HVACR) <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> None		
RENOVATE INTERIOR - FOR HANDICAP USE. TWO FULL BATHROOM, BASEMENT KITCHEN		
		50 FT

PROPERTY OWNER INFORMATION REQUIRED

Owner(s) Name(s) (As it appears on tax records): LOU & JANICE FRIES	Primary Residence: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Owner's Street Address: 12330 PAWS SPRING CT	
City: ELLICOTT CITY	State: MD
Phone: 443-253-5298	Zip Code: 21042
Email:	

APPLICANT NAME REQUIRED - INDIVIDUAL WHO SIGNS THIS APPLICATION

Business Name: CHATHAM PROPERTIES LLC	Contact Name: JUANIE BENSON
Street Address: 9887 DIVERSIFIED LANE	
City: ELLICOTT CITY	State: MD
Phone: 410 852-9564	Zip Code: 21042
Email: ACQIRISLAX@VERIZON.COM	

CONTRACTOR INFORMATION REQUIRED

Business Name: SPAIDE CUSTOM BUILDERS, INC	
Licensee's Name: SPAIDE CUSTOM BUILDERS	License #: MHC 46282
Street Address: 3633 CHATHAM RD	
City: ELLICOTT CITY	State: MD
Phone: 410 365-9514	Zip Code: 21042
Email: SPAIDECB@HOTMAIL.COM	

ARCHITECT/ENGINEER INFORMATION INDIVIDUAL WHO SIGNED PLANS, IF APPLICABLE

Business Name: N/A	Name:
Street Address:	
City:	State:
Phone:	Zip Code:
Email:	

BUILDING CHARACTERISTICS REQUIRED

Primary Structure: <input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> SF Duplex <input type="checkbox"/> Mobile Home <input type="checkbox"/> Multi-Family Dwelling (MF*)	Condo: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Utilities: <input checked="" type="checkbox"/> Electric <input checked="" type="checkbox"/> Gas	Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private (Well)
Heating System: <input type="checkbox"/> Electric <input checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> Propane <input type="checkbox"/> Other:	Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private (Septic)
Sprinkler System: <input type="checkbox"/> NFPA 13 <input type="checkbox"/> NFPA 13R <input type="checkbox"/> NFPA 13D <input checked="" type="checkbox"/> None	Roadside Tree Project: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes: #
Fire Alarm System: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Voice Evac	

ADDITIONAL RESIDENTIAL INFORMATION (PLEASE SELECT/COMPLETE ALL THAT APPLY)

Model Name & Options:				
# of Bedrooms (SF): 3	# of efficiency units (MF*):	# of 1 BR (MF*):	# of 2 BR (MF*):	# of 3 BR (MF*):
# Rooms:	# Full Baths: 3	# Half Baths: 1	# Fireplaces: 1	
Garage/Carport Info: <input checked="" type="checkbox"/> Attached Garage <input type="checkbox"/> Detached Garage <input type="checkbox"/> Integral Garage <input type="checkbox"/> Carport <input type="checkbox"/> None				
Basement/Foundation Info: <input type="checkbox"/> Slab on Grade <input type="checkbox"/> Post & Pier <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/> Finished Basement: <input checked="" type="checkbox"/> Full or <input type="checkbox"/> Partial				
1 st Fl Width: 65'	1 st Fl Depth: 42'	2 nd Fl Width: N/A	2 nd Fl Depth:	Bsmt Width: Bsmt Depth:
Energy Method: <input type="checkbox"/> Prescriptive <input type="checkbox"/> Performance <input type="checkbox"/> UA Alternative <input type="checkbox"/> ERI		Gross Area: 2,700 sq ft Occupiable Area: 2,000 sq ft		

AGREEMENT/ DISCALIMER REQUIRED

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

APPLICANT'S ORIGINAL SIGNATURE: *[Signature]* DATE SIGNED: 1/26/2021

FOR OFFICE USE ONLY

CHECKS PAYABLE TO: DIRECTOR OF FINANCE OF HOWARD COUNTY

AGENCIES REQUIRED/APPROVALS:			
<input checked="" type="checkbox"/> PR	<input checked="" type="checkbox"/> DPZ	<input type="checkbox"/> DED	<input checked="" type="checkbox"/> Health 3/19/21
SUBMITTAL FEES: \$25.00	PAYMENT: none	ACCEPTED BY: <i>[Signature]</i>	
no plans			

Oswald, Hank

From: Oswald, Hank
Sent: Wednesday, February 24, 2021 9:51 AM
To: DIANE BENSON
Subject: Re: 12330 Pans Spring Well

Hi Ms. Benson,

*3/8/21 - Telephone conversation w/ Diane Benson.
Ms. Benson will forward bacteria results @ camp
of project. H.O.*

Thanks for the information on the well and seltic. (I see there was a positive bacteria coliform result. Was there any follow-up on this?)

Thanks,

Hank

Sent from my Verizon, Samsung Galaxy smartphone
Get [Outlook for Android](#)

From: DIANE BENSON <ecgirlslax@verizon.net>
Sent: Tuesday, February 23, 2021 7:34:14 PM
To: Oswald, Hank <hoswald@howardcountymd.gov>
Subject: Fw: 12330 Pans Spring Well

[Note: This email originated from outside of the organization. Please only click on links or attachments if you know the sender.]

Hi Hank,

Here is everything current homeowner has for 12330 Pans springs crt Ellicott city md.

Let me know if you need anything else.

Diane Benson
Chatham Properties LLC
(410) 852-9564

----- Forwarded Message -----

From: LOUIS FRIES <lfries5432@comcast.net>
To: Ecgirlslax@verizon.net <ecgirlslax@verizon.net>
Sent: Tuesday, February 23, 2021, 07:17:31 PM EST
Subject: 12330 Pans Spring Well

Hi Diane,

Attached please find:

- 1) Well inspection report.
- 2) Well test results report.
- 3) Septic system inspection report.
- 4) Proposal to excavate and replace well casing, replace well cap, recirculate and chlorinate.
- 5) Evidence of completion of above (and other things).

Well and plumbing have not been flushed since chlorination, when plumbing in house is completed will resample.

I am concerned this will lead to a huge hassle. I smell it.

Lou

Real Property Data Search (w3)

Search Result for HOWARD COUNTY

View Map	View GroundRent Redemption	View GroundRent Registration							
Special Tax Recapture: None									
Account Identifier: District - 03 Account Number - 298116									
Owner Information									
Owner Name:	FRIES LOUIS FREDERICK III FRIES JANICE RALSTON	Use: RESIDENTIAL Principal Residence: YES							
Mailing Address:	12330 PANS SPRING CT ELLCOTT CITY MD 21042-1338	Deed Reference: /20024/ 00260							
Location & Structure Information									
Premises Address:	12330 BENSON BRANCH RD ELLCOTT CITY 21042-0000	Legal Description: LOT 50 BL B S 6 12330 BENSON BRANCH RD WOODMARK							
Map:	Grid:	Parcel:	Neighborhood:	Subdivision:	Section:	Block:	Lot:	Assessment Year:	Plat No:
0022	0012	0187	3020203.14	2035			50	2019	Plat Ref:
Town: None									
Primary Structure Built	Above Grade Living Area	Finished Basement Area	Property Land Area	County Use					
1974	2,138 SF	588 SF	40,205 SF						
Stories	Basement	Type	Exterior	Quality	Full/Half Bath	Garage	Last Notice of Major Improvements		
1	YES	STANDARD UNIT	STONE/	5	3 full	1 Attached			
Value Information									
		Base Value	Value	Phase-in Assessments					
			As of	As of	As of				
			01/01/2019	07/01/2020	07/01/2021				
Land:		239,200	240,000						
Improvements		280,600	318,400						
Total:		519,800	558,400	545,533	558,400				
Preferential Land:		0	0						
Transfer Information									
Seller: WAITES ANNIE R			Date: 12/16/2020			Price: \$500,000			
Type: ARMS LENGTH IMPROVED			Deed1: /20024/ 00260			Deed2:			
Seller:			Date:			Price: \$0			
Type:			Deed1: /00583/ 00719			Deed2:			
Seller:			Date:			Price:			
Type:			Deed1:			Deed2:			
Exemption Information									
Partial Exempt Assessments:	Class		07/01/2020	07/01/2021					
County:	000		0.00						
State:	000		0.00						
Municipal:	000		0.00 0.00	0.00 0.00					
Special Tax Recapture: None									
Homestead Application Information									
Homestead Application Status: No Application									
Homeowners' Tax Credit Application Information									
Homeowners' Tax Credit Application Status: No Application					Date:				

1. This screen allows you to search the Real Property database and display property records.
2. Click **here** for a glossary of terms.
3. Deleted accounts can only be selected by Property Account Identifier.
4. The following pages are for information purpose only. The data is not to be used for legal reports or documents. While we have confidence in the accuracy of these records, the Department makes no warranties, expressed or implied, regarding the information.

2.23.21 - Spoke to Diane Benson (applicant) regarding scope of work. Ms. Benson stated that owners want to make the residence ADA accessible, by adding ramp, & widening doors to bathrooms. - H.O.



ROBERT L FEEZER CO
6315 BARNETT AVE
ELDERSBURG, MD 21784
4107814655

Cashier: Employee
Transaction 001174

Total \$4,915.00

<https://clover.com/privacy>

ROBERT L. FEEZER CO.

Water Supply & Water Conditioning Equipment

P O Box 1636
 6321 Barnett Avenue
 Sykesville, MD 21784
 Phone 410-781-4655 410-795-1405

DATE: January 21, 2021

Louis Fries
 12330 Pans Spring Court
 Ellicott City, Maryland 21042

CLIENT ID

DESCRIPTION	NUMBER	EACH	AMOUNT
Installation of Acid Neutralizer and Cabinet Softener , repaired well casing and installed a water tight well cap. Chlorinated the well and recirculated chlorine. Paid in full with credit card.			\$4,915.00
Discount			
			\$4,915.00

Accounts Are Considered Due When Invoice Is Presented.
 After 30 Days, A 1-1/2% Monthly Service Charge Will Be Added

THANK YOU FOR YOUR BUSINESS!

HOME LAND

ENVIRONMENTAL

p:443-995-5385 | info@homelandhealthyhomes.com | www.homelandhealthyhomes.com

Date: November 6, 2020 Name of Evaluator: Scott Thompson Time: 08:00 Property Address: 12330 Pans Spring Court Ellicott City, MD. 21042 Recent Weather Conditions: Sunny	Ordered By: Louis Fries Buyers: Louis Fries Homeowner Interview: The homeowner interview was sent and received prior to the evaluation.	Occupied: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Length of Time Vacant: ~70 Days # of People Living in Home: N/A # of People moving in: Unknown Property Age: 1974 System Age: 1974 Last Date of Cleaning: Unknown Recomm'd Pumping Freq: 1-2 Years
Liquid level in tank is: <input type="checkbox"/> Above Normal <input checked="" type="checkbox"/> Normal <input type="checkbox"/> Below Normal	Bottom Solids Depth: 24+ Inches	
Depth of tank: At Grade	Type of Tank Access: 6-inch Cleanout	Depth of tank access: At Grade
Maintenance appears: <input type="checkbox"/> Good <input type="checkbox"/> Fair <input checked="" type="checkbox"/> Poor	Depth to Distribution Box: N/A	
Effluent Filter present: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Previous high liquid level: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Distance to well: ~100 Feet
Records Search: Records were requested but received from Howard County prior to the evaluation.		
Were there any impermeable surfaces above the septic system (i.e. driveway)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Type of Tank	Tank Composition and Size	Type of Absorption System
<input checked="" type="checkbox"/> Septic Tank (1 tank)	<input type="checkbox"/> Metal <input checked="" type="checkbox"/> Concrete <input type="checkbox"/> Plastic	<input type="checkbox"/> Leaching Field <input type="checkbox"/> Raised Mound
<input type="checkbox"/> Aeration System	Tank Size: 1,000 gallons	<input checked="" type="checkbox"/> Drywell (Number of: 1) <input type="checkbox"/> Cesspool
<input type="checkbox"/> Other:	<input type="checkbox"/> Unknown: _____	
System Component	Condition	Comments
Septic Tank	<input checked="" type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable <input type="checkbox"/> Needs Further Evaluation	A camera was used during the inspection. (See camera inspection) The septic tank is composed of concrete and is 1,000 gallons in capacity. Access is a 6-inch cast iron cleanout at grade; the septic tank is at grade. The front and back baffles are in place and composed of concrete and PVC respectively. There is 24+ inches of solids with foreign objects in the tank indicating poor maintenance and is due for cleaning. (See page 2; picture 1) It is recommended that the tank be cleaned every 1-2 years thereafter.
Absorption System	<input checked="" type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable <input type="checkbox"/> Needs Further Evaluation	One drywell was located during the inspection; the drywell has access at grade however the access appears to be located within the cinder block walls making the access ineffective. (See page 2; picture 2) The drywell has approximately 1.5 feet of liquid depth remaining. The liquid level in the drywell was verified using the camera. Approximately 420 gallons of water were introduced into the system with no sign of a back-up; the effluent level remained stagnant throughout the completion of the hydraulic load test which was monitored using the camera. Due to the age of the system, the buyer should budget for future repairs.

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Picture 1:

Shows the foreign objects in the tank with the PVC back baffle in place.



Picture 2:

Shows the cleanout over the drywell which appears to be located within the interior wall of the drywell making the access in effective.

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Sketch of System

See sketch for layout and approximate distances of the septic system

DISCLAIMERS

- This is a subjective and visual inspection only, the conclusions of which are based on the observed condition of the system components that could reasonably be accessed, and information known about the system at the time this report was completed. There may be unknown historical problems or unseen conditions which may compromise the conclusions stated in this report.
- Suggestions or recommendations for repairs or remediation may result in the need for further repair or remediation once the system components are fully excavated.
- A 'Satisfactory' evaluation does not mean the system will meet the local approving authority's criteria for determining compliance with state code: COMAR 26.04.02.02 D(4).
- The evaluation of the Sewage Disposal System as reported is based on the conditions observed on the day of the inspection.
- This report is neither a WARRANTY nor does it GUARANTEE continued acceptable functionality or performance of the Sewage Disposal Systems operations.
- If the house has been unoccupied the findings in this report may not be accurate, as limited or no use of the system may conceal or mask problems that may be revealed under typical sewage loading.
- If the general ground condition is excessively wet at the time of inspection, the findings in this report may not be accurate, as ground moisture may cover or hide septic effluent that may be on or near the ground surface.
- If the house is vacant or the conditions excessively wet during inspection, it is recommended that the system be reevaluated at a later date and/or alternate techniques be used to address those potential issues.
- Payment and/or use of this evaluation signify understanding and acceptances of the above clauses, as well as any noted faults with the system.

Representative's Signature:		Date: 11/6/2020
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ROBERT L. FEEZER CO.

WATER SUPPLY & WATER CONDITIONING EQUIPMENT
6321 BARNETT AVENUE SYKESVILLE, MARYLAND 21784
(410) 781- 4655 (410) 795-1405

PROPOSAL

DATE: December 30, 2020

SUBMITTED TO: Mr. & Mrs. Louis Fries
12330 Pans Spring Court
Ellicott City, Md. 21042

PHONE: (000) 000-0000

JOB DESCRIPTION AND LOCATION: Renovations to well casing for above referenced address.

- Excavate area around well casing to expose well casing below grade.
- Weld new well casing to 12" above grade per code requirements.
- Install watertight well cap and cable guard conduit.
- Chlorinate and recirculate well.

ROBERT L. FEEZER CO.

WATER SUPPLY & WATER CONDITIONING EQUIPMENT
6321 BARNETT AVENUE SYKESVILLE, MARYLAND 21784
(410) 781- 4655 (410) 795-1405

We propose hereby to furnish material and labor – complete in accordance with the above specifications, for the sum of:

Nine Hundred Seventy and 00/100 Dollars (\$970.00)

TERMS: NET due upon completion.

This proposal may be withdrawn by us if not accepted within **30 days**.

CONDITIONS: All material is guaranteed to be as specified. All work to be completed in workmanlike manner according to standard practices. Any alteration or deviation from the above specifications involving extra costs will be executed only upon written orders and will become an extra charge over and above the estimate. All agreements are contingent upon strikes, accidents or delays beyond our control. Owner shall carry fire, theft, tornado and other necessary insurance.

Authorized Signature Rusty George

ACCEPTED: The above prices, conditions and specifications are satisfactory, and are hereby accepted. You are hereby authorized to proceed with the work as specified. Payment will be made as outlined above.

Date: 31 Dec 20 Signature *Yocair J. Lewis*

Date: _____ Signature _____

HOME LAND ENVIRONMENTAL

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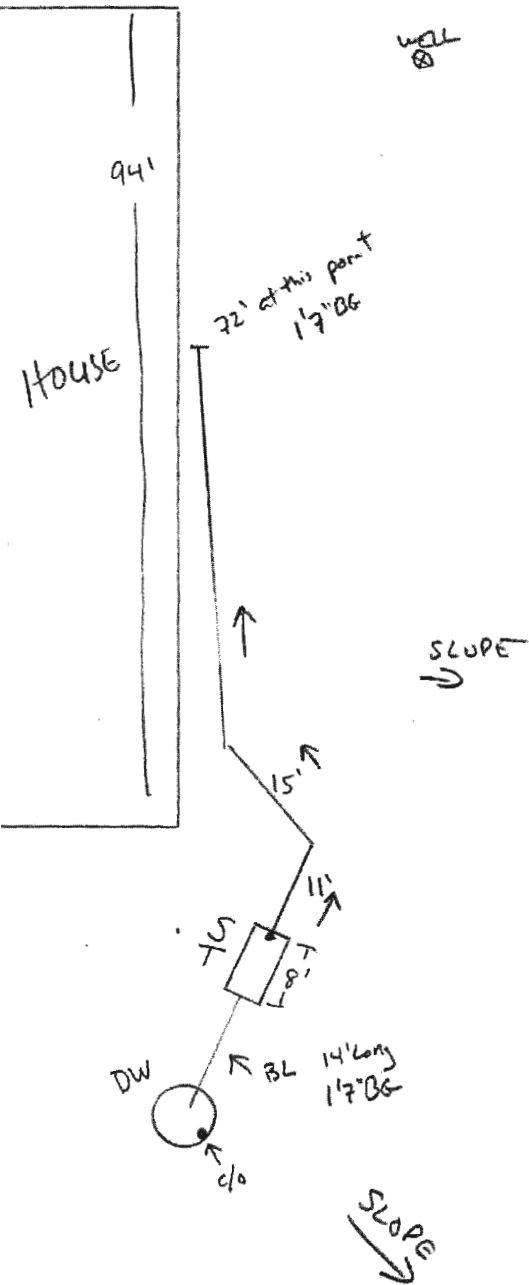
Front of the House
→

ADDRESS: 12330 Pars Spring Ct.
Ellisville City

All measurements are approximate distances.

ST=Septic Tank; DB=Distribution Box; DF=Drainfield; DW=Drywell
FL=Front Line; BL=Back Line; BG=Below Grade; '= Feet; "'= Inches

SCALE: $\frac{3}{32}'' = 2 \text{ Feet}$



COMPLETE THIS FORM WHEN DROPPING OFF ANY
CORRESPONDENCE AND/OR PLANS TO THE HOWARD COUNTY
DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS COUNTER:

Date: 2/24/21
To: FRONT COUNTER
(Person's Name and Division)
From: CHATHAM PROPERTIES LLC (410) 852-9564 DIANE BENSON
(Your Name, Company Name and Telephone Number)
Subject: Project name FRIES RESIDENCE
Project site address 12330 PAWS SPRING CT. ELICOTT CITY, MD 21042
Permit # B 21000278 SDP # _____
Other information pertinent to this project ADDING SPRINKLER SYSTEM

- Please check the attachments below that you are submitting with this transmittal:
- Letter of response to address plan review comment letter
 - Revised plans and/or revised details: When submitting for a complete re-review, duplicate sets shall be submitted.
 - Letter Summarizing Changes
 - Energy conservation calculations
 - Copies of (3) FIRST FLR PLAN (be specific). (3) BASEMENT PLANS
 - Health Department Request DPZ/DED Request Applicant's Request
 - Two sets of single family dwelling model plans to be placed on permanent file: Model name and/or # _____
 - Other ESTIMATED JOB COST 160K

Contact Person Information: (Required)

John SPAIDG Telephone No: 410 365-9514
Please Print Name E-Mail Address: spaidgcb@hotmail.com

PLEASE ASSURE ALL DOCUMENTS AND/OR REVISIONS ARE APPROPRIATELY SIGNED AND SEALED, IF NECESSARY, BY A LICENSED ARCHITECT OR ENGINEER. PLEASE BE ADVISED THAT INSUFFICIENT INFORMATION MAY RESULT IN THE DELAY OF REVIEW BY THE PLANS EXAMINER. THE DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS WILL CONTACT YOU IF THERE IS A PROBLEM. IN ADDITION, ONCE THE BUILDING PERMIT IS APPROVED BY THE PLAN REVIEW DIVISION AND ALL OTHER REQUIRED SIGNATORY AGENCIES, AND THE BUILDING PERMIT IS READY FOR ISSUANCE, THE PERMIT DIVISION WILL NOTIFY THE APPROPRIATE CONTACT PERSON FOR PERMIT PICK UP. ALL PERMIT STATUS INQUIRIES SHALL BE DIRECTED TO THE PERMIT DIVISION AT 410-313-2455. CODE RELATED QUESTIONS AND PLAN REVIEW INQUIRIES SHALL BE DIRECTED TO THE PLAN REVIEW DIVISION AT 410-313-2436. PLEASE ALLOW A MINIMUM OF FIVE (5) WORKING DAYS FOR ANY PLAN SUBMITTALS TO BE REVIEWED. THANK YOU.

Received by Dropbox cc: Health

HOME LAND

LABS

9106 Philadelphia Road, Suite 106
Rosedale, MD 21237
Phone 443.505.8375
lab@homelandhealthyhomes.com
State Certified Water Quality Lab 353

108 Old Solomons Island Road, Suite I2
Annapolis, MD 21401
Phone 443.505.8375
lab@homelandhealthyhomes.com
State Certified Water Quality Lab 106

3430 Rockefeller Court
Waldorf, MD 20602
Phone 443.505.8375
lab@homelandhealthyhomes.com
State Certified Water Quality Lab 139

Certificate of Analysis

Report Date: 11/9/2020

Client: Home Land Environmental, LLC
Property Address: 12330 Pans Spring Ct
Ellicott City, MD 21042

Sample ID: Louis Fries
Report No: 195677
Sample Time: 11/06/20 08:04
Date & Time Received: 11/06/20 12:35
Sampled By: Scott Thompson 0901WT (Exp. 9/5/2021)
Preservation: Ice
Sample Point(s): Upstairs hallway bathroom sink
Water Conditioning Appears to be: Sediment Filter, Acid Neutralizer (both in semi-bypass)

Chlorine Residual: 0.0
Field pH: 5.9
Well Type: Drilled
Well Height: 26"
Cap Type: 1-Piece Metal
Casing: 6"
Conduit: Secure
Clarity: Clear
Sand: None Observed
Well Tag Number: No visible well tag

Primary Contaminants

Parameter	Method	Result	Pass/Fail	Units	MCL	RL	Analyst	Date of Analysis
Bacteria-Total Coliform	Colitag Test	Present	Fail	Per/100ml	Present	1	ERW-353	11/07/2020
Bacteria-E.coli	Colitag Test	Absent	Pass	Per/100ml	Present	1	ERW-353	11/07/2020
Nitrate + Nitrite as N	EPA 353.2	1.4	Pass	mg/l	10	0.5	ERW-353	11/06/2020

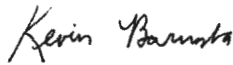
Secondary Contaminants

Parameter	Method	Result	Acceptable /High	Units	SMCL	RL	Analyst	Date of Analysis
Turbidity	EPA 180.1	Not Detected	Acceptable	NTU	10	0.5	AND-353	11/06/2020

The Total Coliform Bacteria is failing. The first step to remediate for Bacteria is a well chlorination. Most plumbers and well contractors can perform this procedure, along with the homeowner. The use of a neutral, third party laboratory is recommended to confirm that the remediation was successful. Please contact us to schedule a resample.

Also, it was noted by our inspector that the well cap is one-piece. The one-piece well cap can allow bugs and moisture into the well, thus introducing bacteria. We recommend that the well cap be replaced with a two-piece cap in addition to the chlorination. A licensed water conditioning company or a well drilling company should be contacted for remediation.

Approved By



Kevin Barnaba, Lab Director

HOME LAND

L A B S

Understanding the Results

This narrative is intended to help the recipient to understand the results. The results listed below are only for tests commonly sampled or analyzed by Home Land Environmental Health Labs. For a full list of the Environmental Protection Agency's (EPA) Primary and Secondary Standards, go to: https://www.epa.gov/sites/production/files/201606/documents/npwdr_complete_table.pdf

Definitions and Acronyms

Analyst: Refers to the individual whom conducted the test.

Maximum Contamination Level (MCL): A level established by the EPA which is the "highest level of a contaminate that is allowed in drinking water." Any level that exceeds the MCL is considered not safe for human consumption.

Method: The type of analysis used to determine the results.

Not Detected (ND): Any level below the reporting limit.

Primary Drinking Water Standard: Enforceable standards developed by the EPA. Levels that exceed the MCL for a particular standard are considered to unsafe for human consumption.

Reporting Limit (RL): The lowest level that can be detected by the method used for the analysis.

Secondary Drinking Water Standard: Standards developed by the EPA. Secondary standards are generally not considered to be dangerous to human health. They may cause aesthetic or cosmetic problems to the water quality or plumbing distribution system.


*Parameter analyzed by **MSS:** Maryland Spectral Services, **FRC:** Florida Radiochemistry, **ECL:** Enviro-Chem Laboratories

This table is for informational purposes only. See page 1 for your results

Parameter	MCL	Type	Effects	Source	Treatment
Total Coliform	Present	Primary	Used to indicate whether potentially harmful bacteria are present	Naturally Present	Well Repair and Chlorination, UV light
E. coli	Present	Primary	Stomach illness	Human and Animal Fecal Waste	Well Repair and Chlorination, UV light
Nitrates	10.0 mg/L	Primary	Blue-Baby Syndrome	Fertilizers and Sewage	Reverse Osmosis
Nitrites	1.0 mg/L	Primary	Blue-Baby Syndrome	Fertilizers and Sewage	Reverse Osmosis
Lead	0.015 mg/L	Primary	Slowed Mental Development, Kidney Problems, High Blood Pressure	Corrosion of household plumbing systems; Erosion of natural deposits	Acid Neutralizer, Chemical Feeder (soda ash), Pipe Replacement
Gross Alpha	15.0 pCi/L	Primary	Increased risk of cancer	Naturally Occurring	Water Softener
Radium 226 & 228	5.0 pCi/L	Primary	Increased risk of cancer	Naturally Occurring	Water Softener
Volatile Organic Compounds (VOC)	Varies	Primary	Increased risk of cancer	Gas and Chemical leaks	Charcoal Filter
Arsenic	0.010 mg/L	Primary	Skin Damage, Circulatory Problems, Cancer	Natural Deposits, Orchards, Industrial Waste	Reverse Osmosis
Cadmium	0.005 mg/L	Primary	Kidney Damage	Pipes, Natural Deposits, Industrial Waste	Reverse Osmosis
Copper	1.3 mg/L	Primary	Gastrointestinal distress, Liver or Kidney Damage	Corrosion of household plumbing systems; Erosion of natural deposits	Acid Neutralizer, Reverse Osmosis, Pipe Replacement
Iron	0.3 mg/L	Secondary	Possible staining on plumbing fixtures and laundry	Naturally Occurring	Water Softener
Turbidity	10.0 NTU	Secondary	Interferes with filtration	Naturally Occurring	Sediment Filter
pH	6.5-8.5 (Neutral range)	Secondary	Low pH: Bitter metallic taste, Corrosion High pH: Slippery feel; Soda taste; Deposits	Naturally Occurring	Acid Neutralizer

Chain of Custody Form

HOME LAND LABS



195677 Date Due: 11/10/2
 Client: Home Land Environmental, LLC
 Project:

Is the sample for a public water system? Yes No

Phone: (443) 505-8375 Email: lab@homelandhealthyhomes.com

9106 Philadelphia Road, Suite 106
 Rosedale, MD 21237
 MD Lab # 353

108 Old Solomons Island Road, Suite L2
 Annapolis, MD 21401
 MD Lab # 106

3430 Rockefeller Court
 Waldorf, MD 20602
 MD Lab # 139

Client Name: _____
 Email Address: _____
 Phone Number: _____

Property Address:

 12330 Pans Spring Ct.
 Ellicott City, MD. 21042

Field Collection Information

Sampler Name: W. Thompson
 Sampler ID #: 0901WT
 Date Sampled: 6NOV20 Time Sampled: 8:04
 Well Tag Number: No visible Well Tag

Field pH: 5.9
 Field Chlorine (mg/L): 0.0
 Sand: Clear
 Clarity: YPS

Well Casing and Cap Condition

Well Type: Drilled Well Pit Below Grade Artesian N/A → Ferrico coupler appears to be present.

Height Above Grade: <u>26"</u>	Cap Type: <u>1 piece metal</u>	Casing: <u>6"</u>	Conduit: <u>Seam</u>
Sample Point: <u>→ upstairs hallway bathroom sink</u>	Water Conditioning: <u>Sediment filter</u> <u>→ Both in semi bypass.</u> <u>And Neutralizer</u>		

Requested Testing: (Please check all that apply)

- Potability (Bacteria, Nitrate + Nitrite, Turbidity)
- FHA/VA (Bacteria, Nitrate + Nitrite, Nitrite, Turbidity, Lead, Iron)
- Bacteria Chlorides Total Dissolved Solids
- Lead Hardness Pesticides
- Nitrate + Nitrite Arsenic VOC
- Iron Cadmium Other: _____
- Turbidity Gross Alpha Other: _____

List rush samples below
 Refer to table for rush turnaround times and fees

Release Signatures

Released By: WSZ Date/Time: 6NOV 12:35

Released By: _____ Date/Time: _____

Released By: _____ Date/Time: _____

Received in lab by: [Signature] Date/Time: 11.6.20 1235

HOME LAND

ENVIRONMENTAL

p:443-995-5385 | info@homelandhealthyhomes.com | www.homelandhealthyhomes.com

Field Data Sheet
Three Hour Well Yield Test Report

Property Address: 12330 Pan Spring Court Ellicott City, MD. 21042

Date: November 6, 2020

Well Tag Number*: No Visible Well Tag

Well Depth*: Unknown

Static Level*: Unknown

GPM at Drilling*: Unknown

Time	PSI	PUMPING RATE <small>seconds to fill 5 gallon bucket</small>	Additional Data	Total Gallons	Calculated Flow (GPM)
8:00					
8:15	30	39		115.4	7.7
8:30	30	43		220.0	7.0
8:45	30	47		315.8	6.4
9:00	20	59		392.1	5.1
9:15	20	68		458.2	4.4
9:30	25	73	Adjusted Nozzle	519.9	4.1
9:45	25	73		581.5	4.1
10:00	25	73		643.2	4.1
10:15	25	73		704.8	4.1
10:30	25	73		766.4	4.1
10:45	25	73		828.1	4.1
11:00	25	73	FINAL	889.7	4.1

Notes: The check valve at the pressure tank appears to show corrosion and had a slight leak to it throughout the well yield. It is strongly recommended that the check valve be replaced by a licensed septic contractor. This well is producing 4.1 GPM. The average person consumes 75 gallons of water per day. This well produced 5.9 days of water for 2 people in 180 Minutes.

* Reflects data gathered by the well tag number, County records, and/or information supplied from the homeowner.

Signature of: William Thompson, PI0190



This test is performed for informational purposes and not be used as a predictor for future well performance.

Oswald, Hank

From: DIANE BENSON <ecgirlslax@verizon.net>
Sent: Tuesday, February 23, 2021 7:34 PM
To: Oswald, Hank
Subject: Fw: 12330 Pans Spring Well
Attachments: Well cap replacement and chlorination.PDF; Proposal to replace well cap, chlorinate and recirculate.pdf; Pans Spring Court Septic Evaluation (1).pdf; Pans Spring Court Sketch (1).pdf; Well inspection report.pdf; Pans Spring Court 3 Hour Well Yield Report (1).pdf

[Note: This email originated from outside of the organization. Please only click on links or attachments if you know the sender.]

Hi Hank,

Here is everything current homeowner has for 12330 Pans springs crt Ellicott city md.

Let me know if you need anything else.

Diane Benson
Chatham Properties LLC
(410) 852-9564

----- Forwarded Message -----

From: LOUIS FRIES <lfries5432@comcast.net>
To: Ecgirlslax@verizon.net <ecgirlslax@verizon.net>
Sent: Tuesday, February 23, 2021, 07:17:31 PM EST
Subject: 12330 Pans Spring Well

Hi Diane,

Attached please find:

- 1) Well inspection report.
- 2) Well test results report.
- 3) Septic system inspection report.
- 4) Proposal to excavate and replace well casing, replace well cap, recirculate and chlorinate.
- 5) Evidence of completion of above (and other things).

Well and plumbing have not been flushed since chlorination, when plumbing in house is completed will resample.

I am concerned this will lead to a huge hassle. I smell it.

Lou