

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

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: NATIONAL WATER SERVICE Corp Telephone #: 301-252-9391
 Address: P.O. BOX 138
ASHTON, MD 20861

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 RYCKE License# PI-0145

***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: JACQUES ROSSON W Telephone #: 240-447-7454
 Subdivision: N/A Lot #: N/A Well Tag #: HO - N/A HOUSE BUILT IN 1960's, NO TAG
 Site Address: 7106 MINK HOLLOW RD
HIGHLAND, MD 20717

Submersible Pump Data

Make: _____
 Model #: N/A
 Pump Capacity: N/A
 Well Yield: _____
 Depth of well encountered at time of pump installation: N/A (feet)

Pitless Adapter

Make: AMERICA GRAMPY
 Model#: 304 STAINLESS 1"
 GPM Depth: 60" (36" min)
 GPM NSF/WSC approved: _____

Well Cap and Electric Conduit

Two piece watertight cap: YES
 Screened, vented well cap: YES
 Cap secured to casing: YES
 Conduit min 18" B.G.: YES
 Conduit secured to well cap: YES

If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4

Must circle one: Torque arrestors / Cable guards / Other acceptable method used

Safety rope, if used, attached to brass rope adapter or other acceptable method inside of well casing N/A

Piping to house

Type: POLY
 PSI: 200 (160 psi min)
 Depth of supply line: 60" (36" min)

House Connection

PVC sleeve to undisturbed soil at wall penetration: N/A
 Length of sleeve (5' minimum from foundation): N/A
 Sleeve sealed properly: N/A

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 RYCKE date: 12/11/2020

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

Date Insp. Requested: 12/11/2020 Date Insp. Approved: _____ Inspector: _____
 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 _____

(Revised form 10/24/2018)



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

January 12, 2021

Jacques Rossouw
7106 Mink Hollow
Highland, MD 20777

RE: Water Sample Results
7106 Mink Hollow
Invoice #35092

Dear Mr. Rossouw,

We have received the results from the testing of the water sample(s) taken from the above referenced property on December 30, 2020. A description of the results and the established standards for each test is included below. Standards such as maximum contaminant levels (MCL), secondary maximum contaminant levels (SMCL), and drinking water equivalency levels (DWEL) are established by the EPA and other agencies to provide a reference for determining when action should be taken. These standards help to improve the overall quality of your water or ensure that steps are taken to treat the water to prevent you and your family from getting sick. Typically, no water is completely free of contamination but you should be concerned if the level of contamination for a particular test exceeds the standard.

The results from the **Bacteria** testing found that your well water sampled from the bathroom faucet contains no bacteria at this time and is considered safe for all uses. According to drinking water standards there should be no bacteria present.

A sample was collected to determine the **Nitrate** level in your water supply. The nitrate level was 1.94 parts per million. The MCL for nitrate is 10.0 parts per million.

A sample was collected to determine the **Turbidity** level in your water supply. The turbidity level was <0.5 parts per million. The MCL for turbidity is 10.0 parts per million.

In addition, **Sand** was not visible within the sample.

Please contact the Health Department at (410) 313-1773 between 8:30 a.m. and 4:30 p.m., Monday through Friday if you have any questions regarding these test results.

Sincerely,

Kathleen Cook, R.S.
Community Hygiene Program
Enclosures

SEND REPORT TO:

Howard County Health Department
 Environmental Health

State of Maryland
 MDH - Laboratories Administration
DIVISION OF ENVIRONMENTAL SCIENCES
 1770 Ashland Avenue, Baltimore, MD 21205
 Robert A. Myers, Ph.D. Director

PHONE NO.: 410-312-2045

MICROBIOLOGICAL ANALYSIS OF DRINKING WATER

Category Code: 46 Invoice No.: 35092 Lab No.: _____

FIELD RECORD

Sample Type:
 Community
 Transient
 Non-Transient
 Private
 Repeat Sample
 C.O.P
 Bottled Water
 OTHER:

Source Address: Jacques Residence, 1106 Mount Hollow
 Sampling Site: Backyard Bottle No.: HC 1106
 Ice: Yes No Treated: Yes No County: Howard
 Date Collected: 12/30/19 Time Collected: 11:00 am pm
 Collector Name: B. Shultz Collector ID No.: 0112145
 Collector Tel. No.: 410-212-1112 PWS ID No.:

Test Requested:
 Quantitative: Colilert-QT P/A: Colilert
 Heterotrophic Plate Count SimPlate
 Multiple Tube Fermentation: MTF
 Quantitative: Enterolert
 Other: _____

County: 13 Plant No. _____ Sampling Station _____
 pH: 10 Res.Cl: 00 Free: 00 Total: 00

Remarks: * Sand presence not found

LABORATORY RECORD (MDH Use Only)

Test Method(s): (check all that apply)
 SM 9223 Colilert SM 9223 Colilert-QT SM 9223 Colilert-18
 SM 9221B (MTF) SM 9221B, F (MTF) SM 9223 Colisure
 SM 9215B (HPC) Enterolert ASTM D6503-99 SimPlate
 Other: _____

Temperature Control: 2.1 °C Thiosulfate: Present Absent Undetermined

P/A Test		Quantitative Test			Heterotrophic Plate Count	
100 mL Sample	(+/-)	Dilution: <input type="checkbox"/> 1:10 <input type="checkbox"/> 1:100 <input type="checkbox"/> 1:1000			Incubated 24, 48, 72hr @ 35°C	
Total Coliforms		100 mL Sample	# Positive wells	MPN/100 mL	Plate A:	
<i>E. coli</i>		Total Coliforms	0	<1	Plate B:	
Enterococci		<i>E. coli</i>	0	<1		
		Enterococci				

Average **RECEIVED** CFU/mL
MPN/mL

DEC 30 2019 1:59 HP
 Received

DEC 30 2019 4:11 HP
 Placed in Incubator

DEC 31 2019 11:23 HP
 Results Read/Reported

Presumptive MTF Test
 mL of Sample: 10 mL
 Gas/24h: _____
 Gas/48h: _____

Confirmed MTF Test
 mL of Sample: 10 mL
 Total Coliforms: _____
E. coli: _____

Specialized Testing Results:

MTF Results

No. of Positive (+)	MPN/100 mL	Recorded Value

RECEIVED
 JAN 11 2020
 HOWARD COUNTY HEALTH DEPT
 COMMUNITY HYGIENE PROGRAM
 MTF Results

Analyst: L. Payer 12-31-20 Reviewed by/Date: T. ... 12/31/20
 Remarks: _____ Fax Email Phone

Laboratory: Central Lab (443) 681-3960 ESRL (410) 219-9005 WMRL (301) 759-5115
 This report shall not be reproduced except in full without the written approval of the laboratory. Results only valid for sample received.



State of Maryland
Department of Health
Laboratories Administration
Division of Environmental Sciences
INORGANICS ANALYTICAL LABORATORY
1770 Ashland Avenue, Baltimore, Maryland 21205
Robert Myers, Ph.D., Director



HOWARD CO ENVIRONMENTAL HLTH
8930 STANFORD BLVD
COLUMBIA, MD 21045

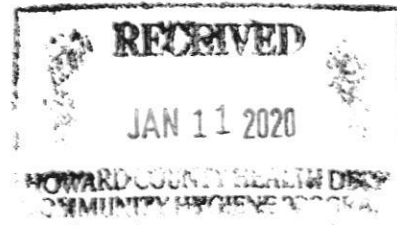
Certificate of Analysis

Lab Project NoE21001672 Date Coll. 12/30/2020 Date Received: 12/30/2020 Submitted By: Shkylar

Field ID: HC7106
Lab No.: E21001672001

<u>Analyte</u>	<u>Method</u>	<u>Result</u>	<u>Units</u>	<u>Date Analyzed</u>
Nitrate + Nitrite, as N	EPA 353.2	1.94	mg N/L	12/31/2020
Turbidity	EPA 180.1	<0.5	NTU	12/31/2020

Comments:



Approved by: _____

Approval date: 01/08/2021

*The following methods are included in our A2LA Scope of Accreditation: EPA150.1, EPA 353.2, EPA 375.2, SM4500F C, SM 4500-CN G & QCM-CN, QCM-CN. Samples are tested as received.

This document contains confidential health information that is privileged, confidential and exempt from disclosure under law. If you have received this information in error, please call (410) 767-6190 and arrange for return or destruction.