

Approved RHC  
3/11/2022

Menu Save Reset Cancel Help

Record Detail \* (This section is required.)

<b>Permit Type</b>	<b>Permit Number</b>	<b>Opened Date</b>
Building/Residential/Misc/Pool Spa	B22000114	01/13/2022
<b>Description of Work</b>		
SFD/ INSTALL A 38' X 17' INGROUND CONCRETE POOL, FENCE TO CODE, FILLED BY TRUCK, DEPTH 3' TO 8'		

check spelling

Address \* (This section is required.)

Search Reset Clear Get Parcel & Owner

<b>Street #</b>	<b>Street Name</b>	<b>Street Type</b>	
7106	MOORLAND	DR	
<b>Unit Type</b>	<b>Unit #</b>	<b>X Coordinate</b>	<b>Y Coordinate</b>
--Select--		-76.93419	39.17455
<b>City</b>	<b>State</b>	<b>Zip Code</b>	<b>Primary</b>
CLARKSVILLE	MD	21029	Yes

Parcel \* (This section is required.)

Search Reset Clear Get Address & Owner

<b>GIS ID *</b>	<b>Parcel</b>	<b>Parcel Area</b>	<b>Land Value</b>	<b>Improved Value</b>	<b>Exemption Value</b>	<b>Plan Area</b>
849257	475	40000	269500	746000	476500	RURAL
<b>Legal Description</b>						
IMPSLOT 5 40,000 SQ[ ]7106 MOORLAND DR[ ]JASHLEIGH KNOLLS PHASE 1						

check spelling

<b>Block</b>	<b>Lot</b>	<b>Census Tract</b>	<b>Council Dist</b>	<b>Inspection Dist</b>	<b>Supervisor Dist</b>	<b>Map #</b>	<b>DAP Zone</b>
	5	605102	4				
<b>Plan Area</b>	<b>State Tax Id</b>	<b>Subdivision Name</b>					
	1405416027						
<b>Section</b>	<b>Area</b>	<b>Tax Map</b>					
		41					
<b>Grid</b>	<b>Zoning District</b>	<b>ADC Map</b>					
41-7	RR-DEO	5052-A3					
<b>SDP No.</b>	<b>Final Plan No.</b>	<b>WP File No.</b>					
<b>Record Plat No.</b>	<b>WS Contract No.</b>	<b>FDP No.</b>	<b>Primary</b>				
11120			Yes				
<b>Owner Occupied</b>	<b>Year Built</b>	<b>Historic District</b>					
<input type="radio"/> Yes <input type="radio"/> No	1994	<input type="radio"/> Yes <input checked="" type="radio"/> No					
<b>Historic District Registry No.</b>	<b>Stat Area</b>	<b>Flood Plain</b>					
	5-15A	<input type="radio"/> Yes <input checked="" type="radio"/> No					
<b>Building No</b>							

Owner \* (This section is required.)

Search Reset Clear

<b>Name *</b>		
OSICK BRIAN		
<b>Address Line 1</b>		
7106 MOORLAND DR		
<b>Address Line 2</b>		
<b>Address Line 3</b>		
<b>Mail City</b>	<b>Mail State</b>	<b>Mail Zip Code</b>
CLARKSVILLE	MD	21029
<b>Phone</b>	<b>Primary</b>	
570-592-4405	Yes	
<b>E-mail</b>		
<b>Cell Number</b>	<b>Fax Number</b>	

Professionals (This section is not required.)

Search Reset Clear

<b>License # *</b>	<b>Business Name</b>		
08010045494	SUNRISE PREMIERE POOL BUILDERS LLC		
<b>License Type *</b>	<b>First Name</b>	<b>Middle Name</b>	<b>Last Name</b>
MHIC Ind	DONALD		SEYFFERTH
<b>Primary</b>	<b>Address Line 1</b>		
Yes	1517 RITCHIE HWY, SUITE 103		
	<b>Address Line 2</b>		
	<b>City</b>	<b>State</b>	<b>ZIP Code</b>
	ARNOLD	MD	21012-0000
	<b>Phone 1</b>	<b>Phone 2</b>	<b>Fax</b>
	4103493852		4103493668
	<b>E-mail</b>		
	SUNRISEPOOLS33@AOL.COM		

Applicant (This section is not required.)

Search As Owner As Lic. Prof As Contact

<b>Type *</b>	<b>First Name</b>	<b>MI</b>	<b>Last Name</b>
Applicant	KAREN	H	ROWLEY
<b>Relationship</b>	<b>Full Name</b>		
Agent for Applicant	KAREN H ROWLEY		
<b>Primary</b>	<b>Organization Name</b>		
Yes	KH & K		
	<b>Street Address</b>		
	293 SOUTHLAND COURT		
	<b>Address Line 2</b>		
	<b>City</b>	<b>State</b>	<b>Zip Code</b>
	DUNKIRK	MD	20754
	<b>Phone</b>	<b>Cell</b>	<b>Fax</b>
	410-507-7705		
	<b>E-mail *</b>		
	KHKPERMITS05@YAHOO.COM		

Addl Info

<b>Est Construction Cost *</b>	<b>Housing Units *</b>	<b>Number of Buildings *</b>	<b>Public Owned</b>
50000	0	0	No
<b>Construction Type</b>			
329 - Structures Other Than Buildings (Retaining Walls/Tents)			

POOL INFORMATION

MISCELLANEOUS POOL INFORMATION

<b>Capital Project-No Fee *</b>	<b>Capital Project Number</b>	<b>Fee Exempt *</b>	<b>Water Supply *</b>	<b>Sewage Disposal *</b>
<input type="radio"/> Yes <input checked="" type="radio"/> No		<input type="radio"/> Yes <input checked="" type="radio"/> No	Private	Private
<b>Existing Use</b>	<b>Type of Pool or Spa *</b>		<b>Electrical Permit Number</b>	<b>Expiration Date</b>
SFD	In Ground Pool		E22000177	7/13/2022

PAYMENT INFORMATION

<b>Check 1</b>	<b>Payee 1</b>	<b>SAP Doc No</b>	<b>SAP Entered</b>

Related Records

Showing 1-2 of 2

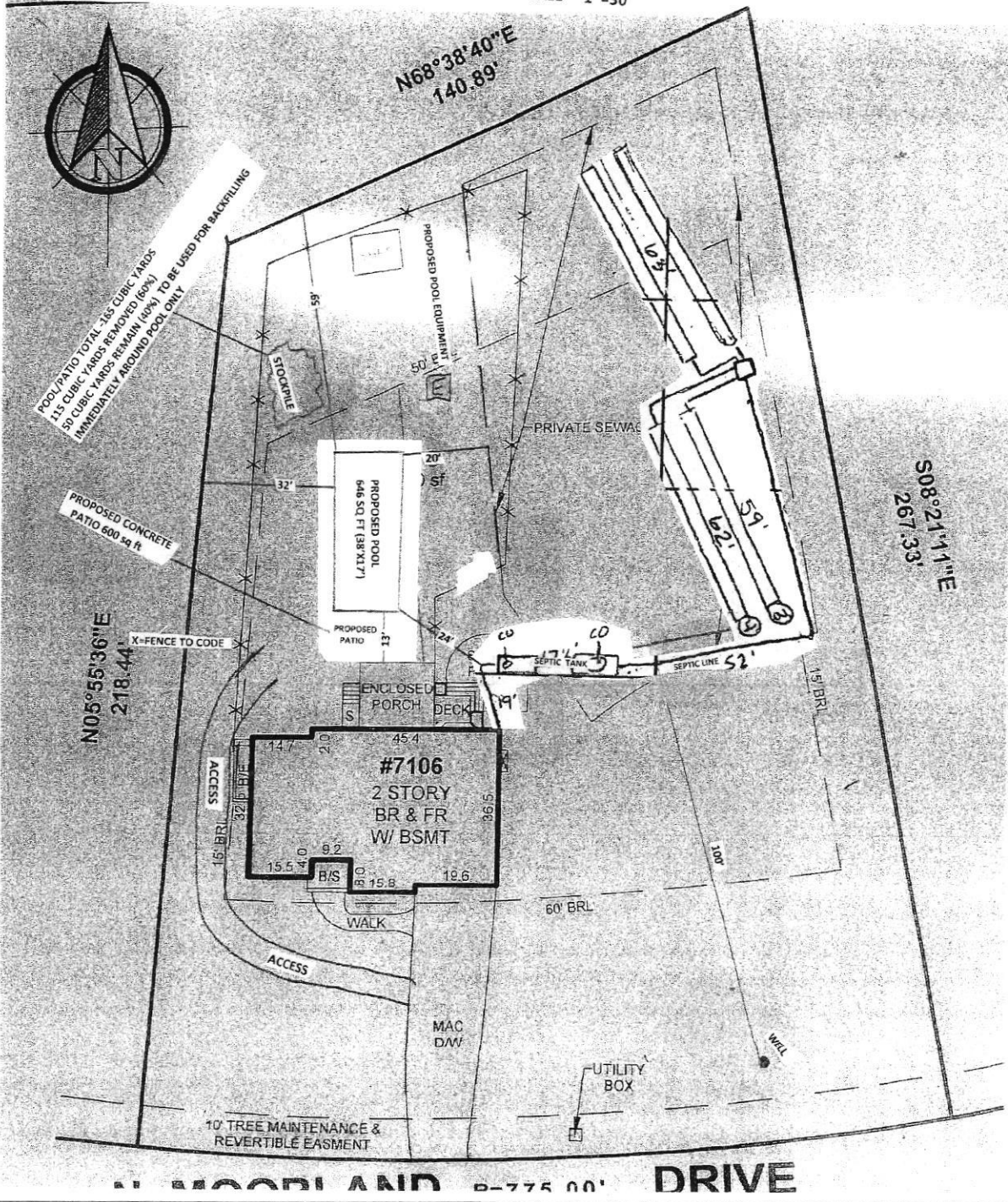
Permit Number	Record Type Alias	Status	Number	Street Name	Opened Date	Description
B22000114	Residential Pool or Spa Permit	Review In Process	7106	MOORLAND	01/13/2022	SFD/ INSTALL A 38' X 17' INGROUND CONCRETE PC
E22000177	Residential Electrical Miscellaneous Permit	Issued	7106	MOORLAND	01/13/2022	Pool wiring & bonding 4103499400 B22000114

Page 1 of 1

Submit Cancel

REVISED 1-31-22

SCALE 1"=30'



## Wolf, Kevin

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**From:** Wolf, Kevin  
**Sent:** Thursday, January 20, 2022 12:15 PM  
**To:** sunrise pools33@aol.com  
**Subject:** B22000114\_7106 Moorland Drive\_38'x17' Inground pool addition

Hello,

I am review of the above mentioned building permit for the proposed pool addition. The following comments were made and need to be addressed:

- The plan sent in with the BP application is not scale. Indicates 1"=30' not correct
- The current setback for a sewage disposal area to a pool (waterline of the pool) is 20ft. not 12ft
- Must show all existing septic components including trench locations, tank locations w/cleanouts, and well location.
- Plan must show a delineated construction entrance/access. Must be marked off in the field also that reflects the plan. This would be to avoid the septic tank and pump tank, as well as the sewer force main and trenches.
- You mention on the plan 40% of the excavated soil from the pool will remain (stockpile). Can you explain on the plan where this 40% is going to be graded? Note that fill is forbidden to be placed on top of the sewage disposal area.

Once all these action items have been revised, please resubmit the plan so I can have a chance to review. Any questions please feel free to reach out.

Thanks,

Kevin M. Wolf, LEHS, REHS/RS  
Groundwater Mgmt. Sec. Supervisor  
Well & Septic Program  
Howard County Health Department  
8930 Stanford Blvd.  
Columbia, MD 21045  
410-313-2645 (Office)  
410-313-2648 (Fax)  
[www.hchealth.org](http://www.hchealth.org)  
[kwolf@howardcountymd.gov](mailto:kwolf@howardcountymd.gov)



[twitter.com/HoCoHealth](https://twitter.com/HoCoHealth)

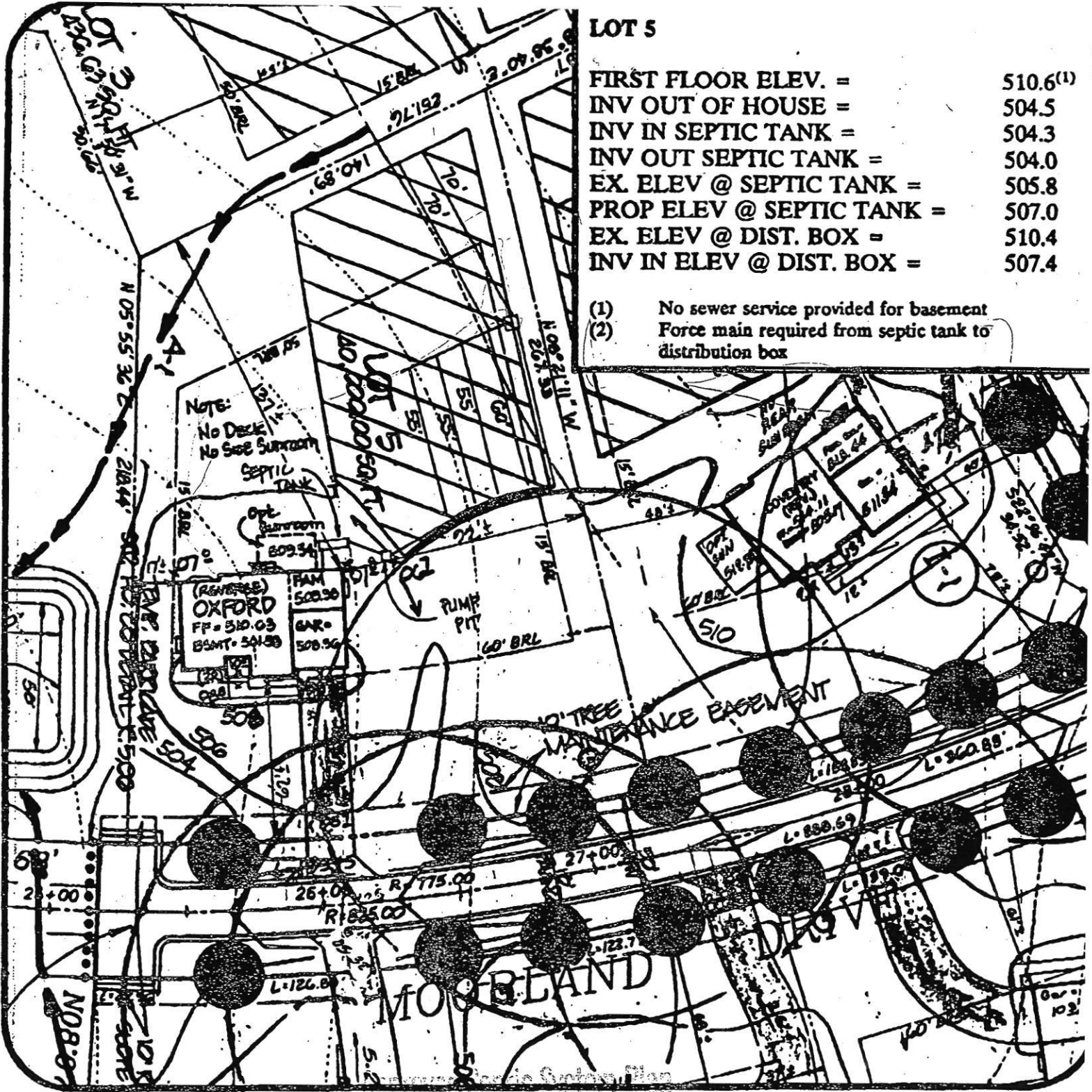


[facebook.com/HoCoHealth](https://facebook.com/HoCoHealth)



[instagram.com/hocohealth](https://instagram.com/hocohealth)

CONFIDENTIALITY NOTICE



**LOT 5**

FIRST FLOOR ELEV. =	510.6 <sup>(1)</sup>
INV OUT OF HOUSE =	504.5
INV IN SEPTIC TANK =	504.3
INV OUT SEPTIC TANK =	504.0
EX. ELEV @ SEPTIC TANK =	505.8
PROP ELEV @ SEPTIC TANK =	507.0
EX. ELEV @ DIST. BOX =	510.4
INV IN ELEV @ DIST. BOX =	507.4

- (1) No sewer service provided for basement
- (2) Force main required from septic tank to distribution box

NOTE:  
No Deck  
No See Surround

(REVERSE)  
**OXFORD**  
FP = 510.03  
BSMT = 504.99

FAM 500.30  
GAR = 508.50

PUMP PIT

10' TREE MAINTENANCE EASEMENT

MOORELAND

Ashleigh Knolls  
Lot 5

*Signature* 4/22/94

**MILDENBERG,  
MOCHI & ASSOCIATES, INC.**  
ENGINEERS • SURVEYORS • PLANNERS

DATE: 3/31/94

PROJECT NO.: 89027-09

Signature of VBB - P bwh:s Date

3300 North Ridge Road, Suite 235  
Elcoll City, Maryland 21043-3350

DRAWN BY: TJP

SCALE: 1" = 50'

(410) 461-0078 D.C. Metro: (301) 621-5768  
Fax: (410) 750-6340

7/20/94  
pm  
10/21/94  
AM

7/21/94 10 cups purr. tested.

# PERMIT 05-416027

## SEWAGE DISPOSAL SYSTEM

### DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 50059C

A 41370B

DISTRICT 5th

DATE 5/31/94

DATE SYSTEM APPROVED 10/21/94

INSPECTOR DICKS

#### HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXXXXXX~~ 313-2640

INDEXED

VanSant Plumbing & Heating IS PERMITTED TO INSTALL X ALTER

ADDRESS 3 North Avenue, Mt. Airy, Maryland 21771 PHONE 795-6566

SUBDIVISION Ashleigh Knolls, Sec. 1 LOT 5 ROAD 7106 Moorland Drive

PROPERTY OWNER Winchester Homes, Inc.

ADDRESS \_\_\_\_\_

SEPTIC TANK CAPACITY 1250 GALLONS

#### PUMPED SEPTIC SYSTEM

NUMBER OF BEDROOMS 4

INSTALL: --Single or Double Effluent Pump  
In 1000 Gallon Pump Pit.

180 SQUARE FEET PER BEDROOM

--Contractor to supply pump detail  
prior to issuance of septic permit.

LINEAR FEET OF TRENCH REQUIRED 240

TRENCHES - Trench to be 3 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 5 feet below original grade. Effective area begins at 3 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Place distribution box 185 feet from the front lot line and 10 feet from the right lot line. Initial trench to follow contour toward rear lot line, additional trenches to follow contour in both directions.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. *ok/cw*

PLANS APPROVED BY C. Williams DATE 03/15/94

COVER NO WORK UNTIL INSPECTED AND APPROVED

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS, 90° ELBOWS NOT ACCEPTABLE.

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

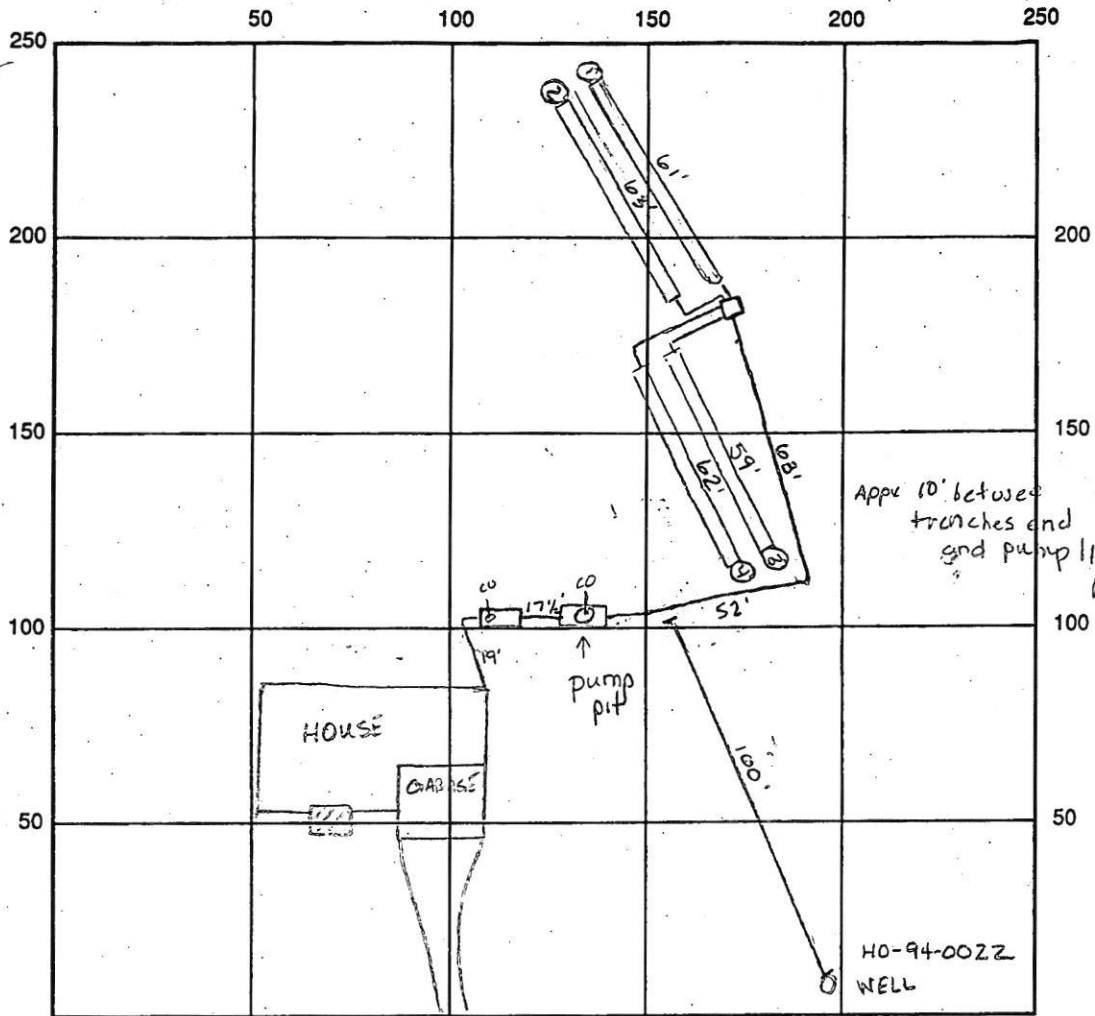
PERMIT VOID AFTER TWO YEARS

NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON. CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

**\*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

A 112101



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE  
MOORELAND DRIVE

SEPTIC TANK LEVEL 1250 ST 1000gal pump CLEANOUTS CO#1 OK CO#2 OK

DISTRIBUTION BOX LEVEL OK baffle is in

DRAIN FIELD/TITLE DEPTH 5' FT. TRENCH WIDTH 3' FT. INLET DEPTH 3' FT.

EFFECTIVE GRAVEL DEPTH 2' FT. TOTAL LENGTH ① 61 ② 63 ③ 59 ④ 62 FT. = 245 linear feet

NUMBER OF TRENCHES 4 ONE-SIDE WALL/BOTTOM AREA 735 SQ. FT.  $\frac{1}{3} \frac{245}{735}$

DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA — SQ. FT.

REMARKS: 7/20/94 OK to cover work, call for pump test when pumps are installed. ACW

7/20/94 No WPI ACW

DATE SYSTEM APPROVED 10/21/94

INSPECTOR [Signature]

# APPLICATION

## PERCOLATION TESTING

A 41370-8

P \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 313-2840

*7/26/68 &  
ORIGINAL TESTING WAS  
FOR SHALES FACILITY.  
THIS PORTION OF PROJECT CHANGED  
TO INDIVIDUAL ON-SITE SEPTIC.  
PLAT APPROVED WITH TEST HOLES  
"IN-VICINITY", BUT NOT  
ON THIS LOT. SEE SUBD. FOLDER IF THAT  
TEST DETAIL IS REQUIRED.  
THIS TESTING SOIL CONDITIONS  
TO CONFIRM INSTALLATION,  
AT TIME OF PERCOLATION TO BE APPROVED.  
AND PRIOR TO BP APPROVAL.  
NO ADDITIONAL TEST FEE  
2/13/94*

DISTRICT \_\_\_\_\_

DATE 2-18-94

TO: THE COUNTY HEALTH OFFICER  
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER WINCHESTER HOMES

ADDRESS 6305 IVY LANE GREENBELT, MD 20770 PHONE \_\_\_\_\_

AGENT OR PROSPECTIVE BUYER \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

PROPERTY LOCATION:

SUBDIVISION ASHLEIGH KNOLLS SECTION I LOT NO. 5

ROAD AND DESCRIPTION BROOKSHIRE LANE

TAX MAP \_\_\_\_\_ PARCEL # \_\_\_\_\_

SIZE OF LOT 1 ACRE TYPE BLDG. S.F.D.  
(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

\_\_\_\_\_  
(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

DISAPPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING \_\_\_\_\_

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # \_\_\_\_\_ DATE \_\_\_\_\_

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # \_\_\_\_\_ DATE \_\_\_\_\_

# THIS IS NOT A PERMIT

A 41370-B

↑ TO BROOKSHIRE LANE

COUNTY #

SOIL PROFILE

0'

CLAY LOAM

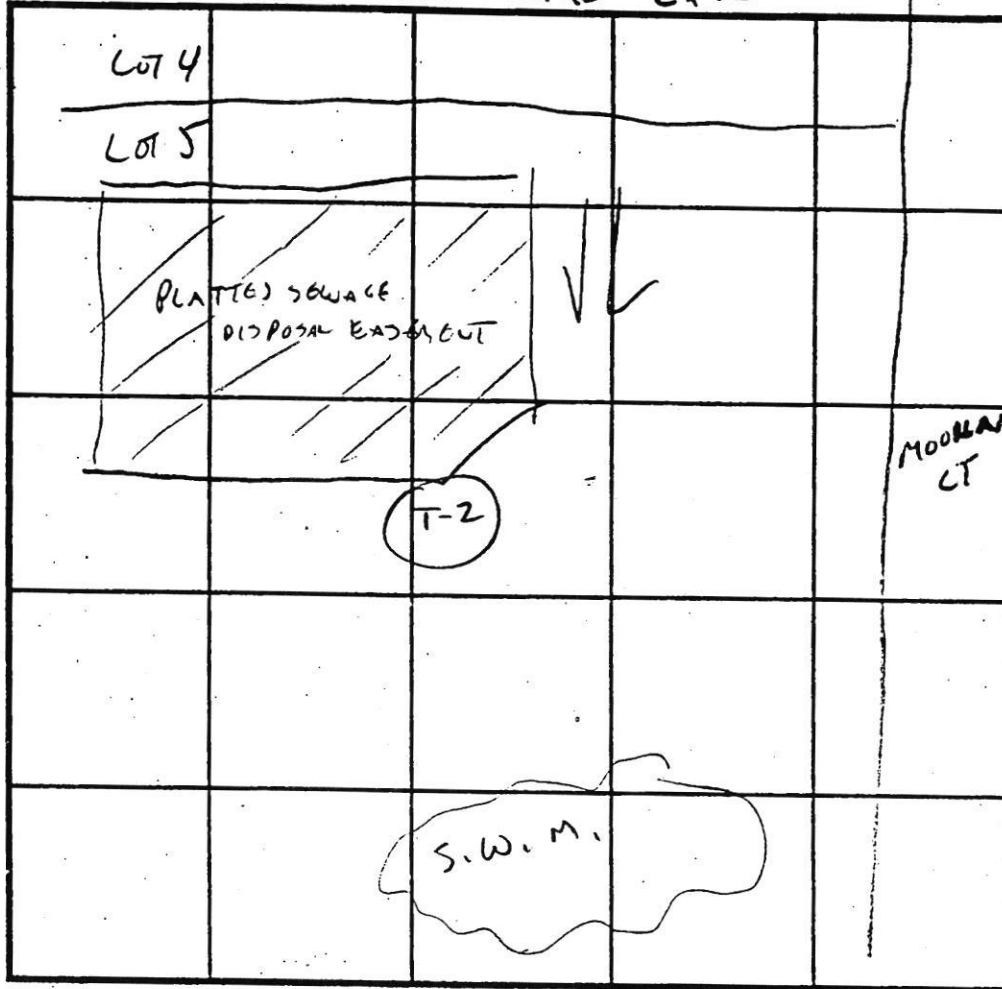
MICA SILT LOAM

2 DRY

SOIL P

0'

MOONARD CT



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
3/7/94	T-2	VIS OK	4-12'				OK
		NO EVIDENCE OF WATER TABLE PROBLEM					(CL)
		5' TEST	12:01	12:06	12:06	12:13	7 MIN

REMARKS \_\_\_\_\_

TYPE OF SOIL \_\_\_\_\_

TESTED BY \_\_\_\_\_ ALSO PRESENT \_\_\_\_\_

# APPLICATION

A 41370 B

### PERCOLATION TESTING

HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043  
TELEPHONE 461-9933

*THESE TESTS WERE ORIGINALLY  
FOR LOT 4, BUT ALSO APPLY TO LOT 5.  
3/17/84 (CW)*

P \_\_\_\_\_

DISTRICT 5th

DATE 2/2/88

TO: THE COUNTY HEALTH OFFICER  
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Winchester Homes, Inc. Real Estate Development Group

ADDRESS 6301 Ivy Lane, Suite 714, Greenbelt, MD 20770 PHONE 301-220-1117

PROSPECTIVE BUYER \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

PROPERTY LOCATION: \_\_\_\_\_

SUBDIVISION Ashleigh Greene Section II LOT NO 93 *Lot 4 SP-93-04 (4-91)*

ROAD AND DESCRIPTION Intersections Browns Bridge Road/Hall Shop Road,  
Hall shop Road/Simpson Road

TAX MAP 41 PARCEL # 174

SIZE OF LOT 3.0 AC. TYPE BLDG SF  
(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

*[Signature]*  
(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING 6-7-88 For perc hole locations and pending  
subdivision plat approval (JEN)

HD-216

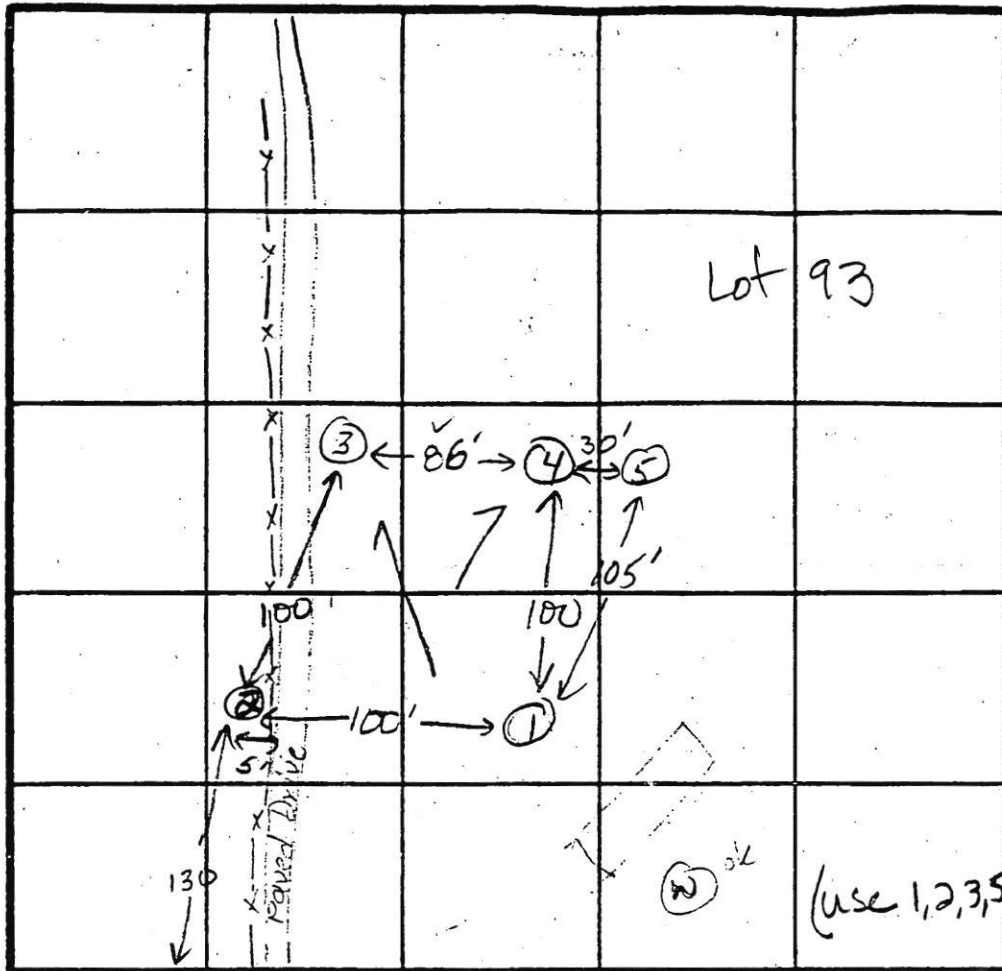
# THIS IS NOT A PERMIT

High 1  
2  
4-5  
Low 3

A41370

①  
SOIL PROFILE

0-6.0 Br sil cl loam  
6.0-12.0 Br mica sa sil m, little decomp rock, < 25%  
12.0 Bottom



②  
0-5.0 Rd-br cl ln little  
5-12.0 Br m. sa sil < 30% sapr: trc: bedd app: at 9  
12.0 Botte

④

0-5.5 Rd sil cl lm  
5.5-11.5 Rd-yellow mica sa sil m, little saprolite < 15%  
11.5 Bottom

Lot 94 ③ INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE. To SIMPSON RD

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
6-7-88	1	4.0 S	1:48	1:51	1:51	1:53	2min	
		7.0 M	1:49	1:51	1:51	1:53	2min	
		12.0 D	Bottom				OK	
	④	4.5 S	2:54	2:08	1/2 inch	slow	Failed	
		11.5 D	Bottom					
	3	6.0 S	2:00	2:02	2:02	2:04	2min	
		13.0 D	Bottom				OK	
	2	12.0 V	(see profile)				OK	
	5	6.0 S	3:12	3:14	3:14	3:16	2min	
		(next to hole 4)						

③  
0-5.0 Br sil cl lm  
5.0-13.0 Br-yellow mica sa sil m, < 30% saprolite  
13.0 Bottom

REMARKS All holes as shown on 6-6-88 plat except hole #5  
TYPE OF SOIL 0-5 Br sil cl lm, 5-13 Br yellow mica sa sil m, saprolite, <  
TESTED BY J.E. Wade ALSO PRESENT Rocky

B 1 **01349** SEQUENCE NO. (DP USE ONLY)  
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

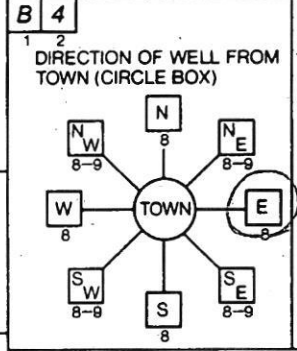
STATE OF MARYLAND  
 PERMIT TO DRILL WELL  
 please print or type

STATE PERMIT NUMBER  
**MD-94-0022**  
 fill in this form completely

Date Received (APA) **011179**  
**OWNER INFORMATION**  
**WINCHESTER HOMES**  
 Last Name Owner First Name  
**6305 IVY LANE**  
 Street or RFD  
**SKEEVIEW BLT MD 20770**  
 Town State Zip

B 3 LOCATION OF WELL  
**HOWARD** COUNTY  
**ASHLEIGH KNOLLS** SUBDIVISION  
 SECTION **5** LOT **5**  
**HIGHLAND** NEAREST TOWN  
 MILES FROM TOWN (enter 0 if in town) **2.1**

**DRILLER INFORMATION**  
**George F. Easterday** License No. **40**  
 Driller's Name L. Franklin Easterday, Inc. 77 License No. 80  
 Firm Name **9265 Brown Church Rd., MT. Airy, Md. 21771**  
 Address **George F. Easterday** Date **1-11-94**  
 Signature Date



**MOORLAND DRIVE** NEAR WHAT ROAD  
 NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL  
**Howard** COUNTY NAME **A41730B** COUNTY NO.  
 STATE SIGNATURE **Craig Wilkins** DATE ISSUED **2-8-95**  
 CO SIGNATURE EXP. DATE  
 NORTH GRID **400000** EAST GRID **0810000**

B 2 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)

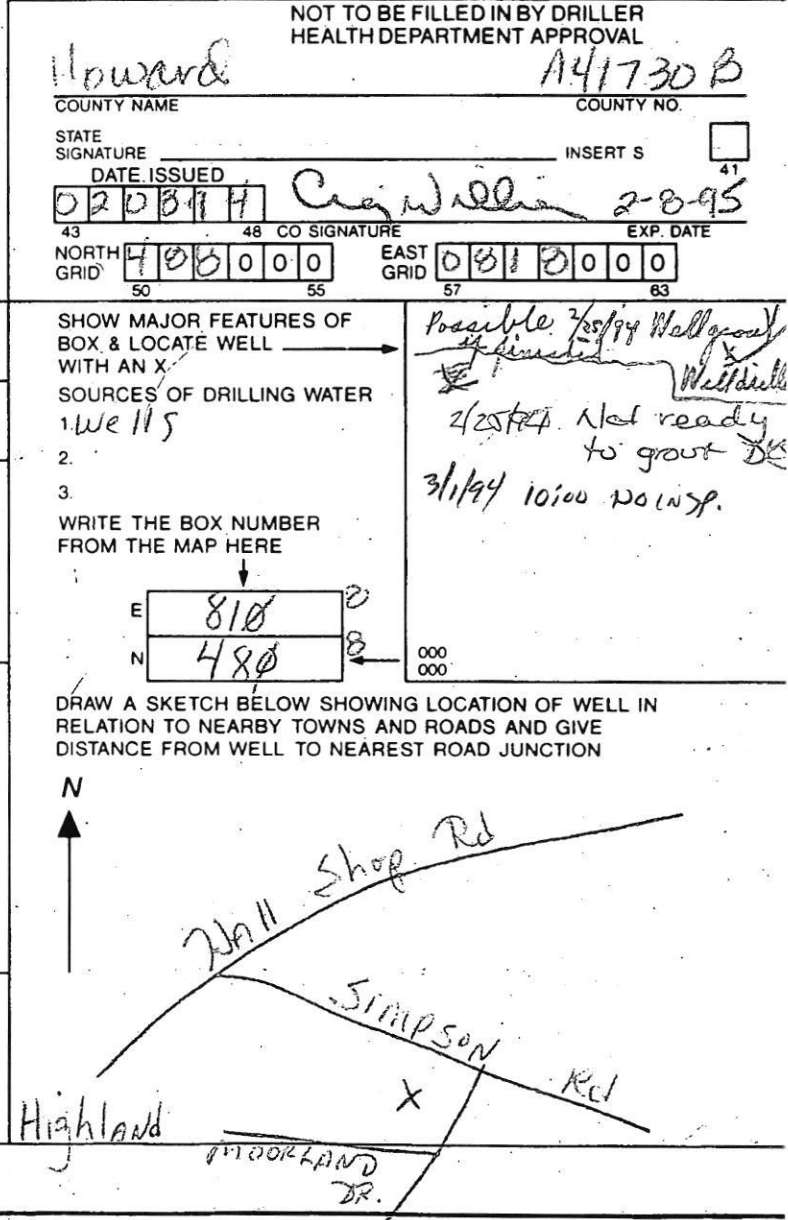
APPROXIMATE DEPTH OF WELL **300** FEET  
 APPROXIMATE DIAMETER OF WELL **6** NEAREST INCH

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 DEEPEINED 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 DEEPEIN AN EXISTING WELL  
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE)

Not to be filled in by driller (OEP USE ONLY)  
 APPROP. PERMIT NUMBER **GAP**  
 FORCE **1** WRITE INITIALS IN BOX PERMIT No. **MD-94-0022**

SPECIAL CONDITIONS





11/1/94  
anytime

7/1/94  
Fina  
CBO

HOWARD COUNTY HEALTH DEPARTMENT  
Bureau of Environmental Health  
3525-H Ellicott Mills Drive  
Ellicott City, MD 21043  
461-9933

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation   
Replacement

Receipt # 10  
Date 5/31/94

Name of Installer VAN SARIK P&S MR. BIZY

Telephone 795-6566

License Number \_\_\_\_\_  
Certified Well Pump Installer \_\_\_\_\_ Well Driller \_\_\_\_\_ Registered Plumber

Name of Property Owner Windsor Homes Telephone 795-6566  
Subdivision Ashleigh Woods Lot # 5 Well Tag # HO-94-0022 ✓  
Site Address \_\_\_\_\_

Pump

- Type
  - Deep well jet \_\_\_\_\_
  - Shallow well jet \_\_\_\_\_
  - Submersible
- Make Goodyear
- Model # \_\_\_\_\_
- Capacity \_\_\_\_\_ GPM
- Pump exceeds well capacity Yes \_\_\_\_\_ No \_\_\_\_\_
- If Yes, is low pressure cutoff switch installed? Yes \_\_\_\_\_ No \_\_\_\_\_
- What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors \_\_\_\_\_ Cable guards  Other \_\_\_\_\_

Motor

- Horsepower 1
- RPM \_\_\_\_\_
- Voltage \_\_\_\_\_
  - 110 \_\_\_\_\_
  - 220

Pitless Adapter

- Make Compbell
- Model # B104
- Depth 48"

Tank

- Capacity V-100
- Pressure relief valve?

Piping

- Type \_\_\_\_\_
- Size 1"
- NSF and/or BOCA Code approved
- Depth of supply line 48"

Well data

- Depth 400 ft.
- Yield 480 GPM
- Static water level \_\_\_\_\_ ft.
- Will water supply be disinfected by installer?

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

Signature of Applicant: Harford A. Vansant

Date: 5/31/94

Green 7/1/94

Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.