

C1 66841

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

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

FILL IN THIS FORM COMPLETELY PLEASE TYPE

COUNTY NUMBER 572K02

ST/CO USE ONLY

DATE RECEIVED

DATE WELL COMPLETED 10-18-2022

DEPTH OF WELL

145 (TO NEAREST FOOT)

OK 4/14/2024 SP

PERMIT NO. FROM "PERMIT TO DRILL WELL"

HD-20-0235

OWNER: Kastrner, Michael Jr. WELL SITE ADDRESS: 12630 Frederick Rd. TOWN: West Friendship Md, 21794

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes handwritten entries: Topsoil, Brown mica, Gray mica, water 51ft, 75ft, 105ft.

GROUTING RECORD: WELL HAS BEEN GROUTED (Circle appropriate box) YES [Y] NO [N]

TYPE OF GROUTING MATERIAL (Circle one): CEMENT [CM] BENTONITE CLAY [BC]. NO. OF BAGS 21. NO. OF POUNDS 1774. GALLONS OF WATER 126. DEPTH OF GROUT SEAL 68 ft.

CASING RECORD: casing types insert appropriate code below. MAIN CASING TYPE: ST (STEEL) 6 inch diameter, 69 total depth.

OTHER CASING (if used): diameter 10 inch, depth 17 feet.

SCREEN RECORD: screen type or open hole. (insert appropriate code below) ST (STEEL) BR (BRASS) HO (OPEN HOLE) PL (PLASTIC) OT (OTHER)

DEPTH (nearest ft.): 40, 68, 145

SLOT SIZE 1, 2, 3. DIAMETER OF SCREEN (NEAREST INCH) 56 to 60.

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68.

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q. TELESCOPE CASING LOG INDICATOR OTHER DATA.

PUMPING TEST: HOURS PUMPED 3. PUMPING RATE 11-15. METHOD USED TO MEASURE PUMPING RATE. WATER LEVEL (distance from land surface) BEFORE PUMPING 17-20 ft. WHEN PUMPING 22-25 ft. TYPE OF PUMP USED (for test) [S] submersible.

PUMP INSTALLED: DRILLER INSTALLED PUMP (CIRCLE) YES [NO]. TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29. CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31-35. PUMP HORSE POWER 37-41. PUMP COLUMN LENGTH (nearest ft.) 43-47. CASING HEIGHT (circle appropriate box and enter casing height) [+] above LAND SURFACE [] below (nearest foot) 1.

LATITUDE 39.30295 LONGITUDE 76.95099 (DEFAULT COORD. WGS 84). 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.

NUMBER OF UNSUCCESSFUL WELLS: 0. WELL HYDROFRACTURED [Y] [N]. CIRCLE APPROPRIATE LETTER: A (WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED), E (ELECTRIC LOG OBTAINED), P (TEST WELL CONVERTED TO PRODUCTION WELL). DRILLERS LIC. NO. 1 MSD022. DRILLERS SIGNATURE: [Signature]. LIC. NO. 1 D. SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee).

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FILL IN THIS FORM COMPLETELY PLEASE TYPE

COUNTY NUMBER 572K02

ST/CO USE ONLY DATE RECEIVED MM DD YY 11 02 22

DATE WELL COMPLETED MM DD YY 10-18-2022

Depth of Well 145 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HD-20-0235

OWNER: Kautner, Michael, Jr. WELL SITE ADDRESS: 12636 Frederick Rd. TOWN: West Friendship, MD 21794

WELL LOG

Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

Table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), check if water bearing. Includes handwritten entries: Topsoil (0-10), Brown mica (10-58), gray mica (58-145), water (51ft, 75ft, 105ft).

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) YES [Y] NO [N]. TYPE OF GROUTING MATERIAL (Circle one) CEMENT [CM] BENTONITE CLAY [BC]. NO. OF BAGS 21 NO. OF POUNDS 4774. GALLONS OF WATER 126. DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 68 ft.

CASING RECORD

MAIN CASING TYPE: [ST] STEEL, [PL] PLASTIC. Nominal diameter top (main) casing (nearest inch): 6. Total depth of main casing (nearest foot): 69.

OTHER CASING (if used)

Table with columns: diameter inch, depth (feet) from, to. Entry: 10 inch diameter, 0 to 12 feet depth.

screen type or open hole (insert appropriate code below)

SCREEN RECORD

Screen type codes: [ST] STEEL, [BR] BRASS, [PL] PLASTIC, [HO] OPEN HOLE, [OT] OTHER.

NUMBER OF UNSUCCESSFUL WELLS: 0. WELL HYDROFRACTURED: YES [Y] NO [N]

CIRCLE APPROPRIATE LETTER: A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED. E ELECTRIC LOG OBTAINED. P TEST WELL CONVERTED TO PRODUCTION WELL.

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT...

DRILLERS LIC. NO.: M SD 022. DRILLERS SIGNATURE: [Signature]

LIC. NO.: D

SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

DEPTH (nearest ft.) 145. E A C H S C 3 R E E N

SLOT SIZE 1 2 3. DIAMETER OF SCREEN (NEAREST INCH) 56 to 60

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q

70 72 74 75 76. TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 3. PUMPING RATE (gal. per min.) 11 to 15. METHOD USED TO MEASURE PUMPING RATE. WATER LEVEL (distance from land surface) BEFORE PUMPING 17 to 20 ft. WHEN PUMPING 22 to 25 ft. TYPE OF PUMP USED (for test) [A] air, [P] piston, [T] turbine, [C] centrifugal, [R] rotary, [O] other, [J] jet, [S] submersible.

PUMP INSTALLED

DRILLER INSTALLED PUMP YES [NO]. IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS. TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29. CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 to 35. PUMP HORSE POWER 37 to 41. PUMP COLUMN LENGTH (nearest ft.) 48 to 47. CASING HEIGHT (circle appropriate box and enter casing height) [+] above, [-] below. LAND SURFACE 1 (nearest foot).

LATITUDE 39.30295 LONGITUDE 76.95049 (DEFAULT COORD. WGS'84)

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B 1 64988

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL 572102 please type

STATE PERMIT NUMBER HO-20-0235 fill in this form completely

OWNER INFORMATION Date Received (APA) 01/06/22 8 MM DD YY 13 15 Last Name Owner First Name 34 Michael 36 Street or RFD 55 8900 Brauer-ton Rd. Unit #407 57 Town 70 State 72 Zip 76 Ellicott City MD 21043

LOCATION OF WELL B 3 8 COUNTY Howard 21 23 SUBDIVISION 42 SECTION 44 46 48 50 LOT West Friendship Md 21794 52 NEAREST TOWN

DRILLER INFORMATION Driller's Name 76 Harry Wayne License No. 81 M 5 D 027 Firm Name 21771 Mayne Well Drilling LLC Address 6501 Buffalo Rd. Mt. Airy MD Signature 9-6-2022 Date

SOURCES OF DRILLING WATER B 4 1. Well 2. 3.

Frederick Rd 12630 11 STREET ADDRESS 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH WEST EAST SOUTH DISTANCE FROM ROAD 34 37 ENTER FT OR MI 38 39 TAX MAP: BLK: PARCEL

WELL INFORMATION B 2 APPROX. PUMPING RATE 5 (GAL. PER MIN.) 8 12 AVERAGE DAILY QUANTITY NEEDED 500 (GAL. PER DAY) 14 20

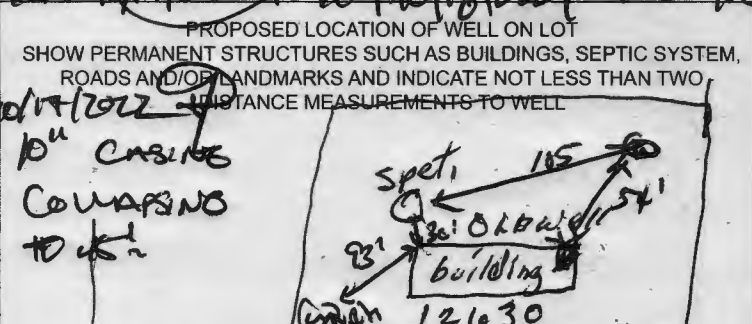
USE FOR WATER (CIRCLE APPROPRIATE BOX) D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) I INDUSTRIAL, COMMERCIAL, DEWATERING P PUBLIC WATER SUPPLY WELL T TEST, OBSERVATION, MONITORING O OPEN LOOP GEOTHERMAL C CLOSED LOOP GEOTHERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL Howard COUNTY NAME STATE SIGNATURE DATE ISSUED 10/07/2022 EXP. DATE 10/07/2022

APPROXIMATE DEPTH OF WELL 300 FEET 24 28

APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST

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) N THIS WELL WILL NOT REPLACE AN EXISTING WELL Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS D THIS WELL WILL DEEPEIN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) 41 52

Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER G PERMIT No. HO-20-0235

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B 1 64988 SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type 572102

STATE PERMIT NUMBER HO-20-0235 fill in this form completely

OWNER INFORMATION Date Received (ARA) 010622 8 MM DD YY 13 Rastree Michael 15 Last Name Owner First Name 34 8900 Bradenton Rd. Unit #107 36 Street or RFD 55 57 Town 70 State 72 Zip 76

LOCATION OF WELL B 3 Howard 8 COUNTY 21 23 SUBDIVISION 42 SECTION 44 46 LOT 48 50 West Friendship Md. 21794 52 NEAREST TOWN 71

DRILLER INFORMATION Driller's Name Francis Mays M 50 027 License No. 81 Firm Name Mays Well Drilling LLC 21771 Address 6501 Butterfield Rd. Ht. City MD. Signature Francis Mays Date 9-6-2022

SOURCES OF DRILLING WATER B 4 1. Well 11 STREET ADDRESS 30 2. 3. ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH N WEST W EAST E SOUTH S 34 37 DISTANCE FROM ROAD ENTER FT OR MI 38 39 TAX MAP: BLK: PARCEL

Frederick Rd 12630 11 STREET ADDRESS 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH N WEST W EAST E SOUTH S 34 37 DISTANCE FROM ROAD ENTER FT OR MI 38 39 TAX MAP: BLK: PARCEL

WELL INFORMATION B 2 APPROX. PUMPING RATE (GAL. PER MIN.) 5 8 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500 14 20

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

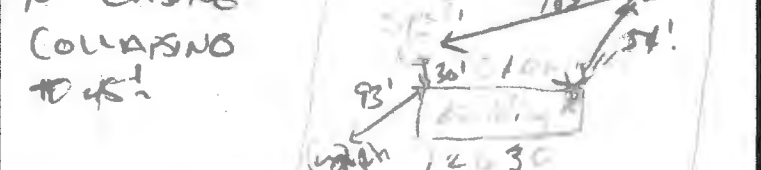
USE FOR WATER (CIRCLE APPROPRIATE BOX) D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) I INDUSTRIAL, COMMERCIAL, DEWATERING P PUBLIC WATER SUPPLY WELL T TEST, OBSERVATION, MONITORING O OPEN LOOP GEOTHERMAL C CLOSED LOOP GEOTHERMAL

COUNTY NAME Howard COUNTY NO. STATE SIGNATURE DATE ISSUED 10/09/2022 EXP. DATE 10/07/2022 CO SIGNATURE

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

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 AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary) CABLE REverse-ROTary DRive-POINT other



REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) N THIS WELL WILL NOT REPLACE AN EXISTING WELL Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS D THIS WELL WILL DEEPEM AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52

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Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER G PERMIT No. HO-20-0235 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

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: AVS Plg + Hts Telephone #: 410-442-2221
 Address: 12630 Frederick Rd PO Box 129
West Friendship MD 21794

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 Kastner License# 1862

***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: Michael Kastner Telephone #: 410-442-2221
 Subdivision: _____ Lot #: _____ Well Tag #: HO-20-0235
 Site Address: 12630 Frederick Rd
West Friendship MD 21794

Submersible Pump Data

Make: Grundfos
 Model #: ISSQE07-180
 Pump Capacity: 15 gpm
 Well Yield: 15+

Pitless Adapter

Make: Boshart
 Model#: P100-55
 GPM Depth: 36" (36" min)
 GPM 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: 145 (feet)
 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 sleeved wire
 Safety rope, if used, attached to brass rope adapter or other acceptable method inside of well casing

Piping to house

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

House Connection

PVC sleeve to undisturbed soil at wall penetration: ✓
 Length of sleeve (5' minimum from foundation): 100'
 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: _____ date: 10-24-22

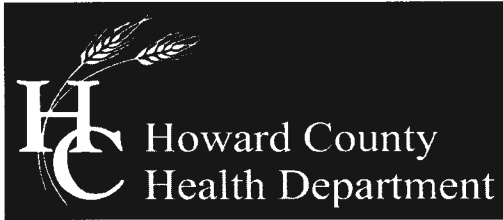
10/25/22 - advised property owner, Mike Kastner

410-442-2221, that a grounding wire is not necessary according to MDE and not to drill into the casing above grade. (2x)

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

Date Insp. Requested: 10/24/22 Date Insp. Approved: 10/25/22 Inspector: RR
 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 Boulevard, Columbia, MD 21045

Main: 410-313-2640 | Fax: 410-313-2648

TDD 410-313-2323 | Toll Free 1-866-313-6300

www.hchealth.org

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

June 7, 2024

RE: **Replacement Well Sampling & Abandonment**

Michael Kastner
12630 Frederick Road
West Friendship MD, 21794
Well Permit # HO-20-0235

Dear Michael Kastner

According to our records, your replacement well was connected October 25, 2022. We request that you contact the Community Hygiene Program at **(410) 313-1773** to schedule initial water sampling for the above referenced replacement well, as required by the Maryland Well Construction Regulation (COMAR 26.04.04). This sampling includes testing for bacteria, nitrates, turbidity, and sand.

It is preferred that the sample be collected from the primary indoor drinking tap, but if suitable scheduling is not possible, the sample may be taken from an outside tap to complete your sampling obligation. However, the potential for unsuccessful sample results increases when samples are collected from taps exposed to the outside environment.

If sampling has already been performed by an outside lab, please help us by forwarding the results of the samples to our office. If you have any further questions, you can call me at 410-313-1789. Otherwise, call Community Hygiene at 410-313-1773 to schedule or arrange for them to collect the subsequent water samples.

Additionally, a condition of the well drilling permit was the proper abandonment and sealing of the old well. Sealing of the well protects the groundwater in your area from contamination and is required per COMAR 26.04.04. The well sealing process must be performed by a licensed well driller. The driller sends an abandonment/sealing report to our office and to the Maryland Department of the Environment upon completion.

If you have any questions or would like to discuss these matters further, please call me at (410) 313-1789. Thank you for your attention to these important matters.

Respectfully,

A handwritten signature in black ink, appearing to read 'SP' or 'Shepsura Page'.

Shepsura Page

Environmental Health Specialist
Howard County Health Department
Well and Septic Program

Wolf, Kevin

From: Cabahug, Joseph
Sent: Wednesday, September 7, 2022 7:58 PM
To: Wolf, Kevin
Cc: Rappaport, Ryan; Martin, Sharhonda; Joe Mayne
Subject: Replacement Well_12630 Frederick Road

Kevin,

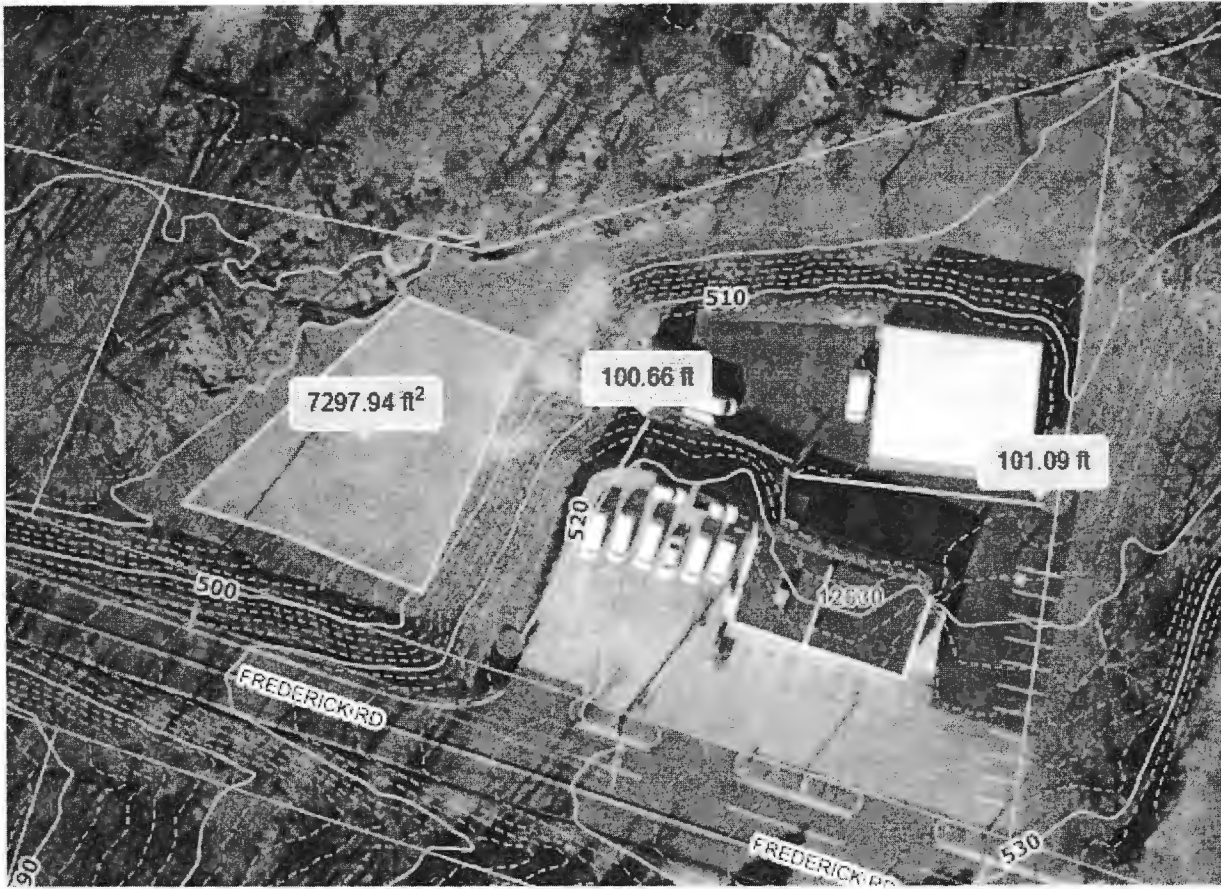
I met Joe Mayne and the property owner out on site to pick two well locations on 09/06/2022. I put the measurements on the well permit.

The first caveat is that there is an expansion package to Route 32 on Frederick road involving an on and off ramp circle, like unto Linden Church Road or Pfeiffercorn. We need to get that Route 32 expansion plan to determine a replacement location.

The two red dots are approximate well locations. The septic is in the back approximately marked by the red line. At this time it is not clear what kind of system is following that septic tank in the back. The second caveat is that the Property Owner states that the lot line was redrawn from the next door BGE lot and they have an additional 20'; therefore it looks off property on GIS but it is on property.

Health has no record of this lot on Index or Public. The Property owner states he has access to a copy. The shaded area is a possible replacement septic area, making the location in the back currently preferable with bollards, if not a third location in the back right point of the property (not marked on diagram).

We need to be careful today so we don't pin ourselves into a holding tank situation. If we could get a copy of the property septic records we could get a better grip on an action plan.



Joseph C. Cabahug – REHS/RS LEHS II
Environmental Health Specialist
Howard County Health Department
8930 Stanford Blvd.
Columbia, MD 21045
410-313-2643 Office
www.hchealth.org



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RECEIPT

Howard County, MD
HOWARD COUNTY HEALTH DEPARTMENT
ASCEND ONE BUILDING
Columbia, MD 21045
8930 STANFORD BLVD

Application: WS-WA-22-02918
Application Type: EnvHealth/Well and Septic/Abandonment/Application
Address: 12630 Frederick RD, Ellicott City, MD 21043

Receipt No.	4872					
Payment Method	Ref Number	Amount Paid	Payment Date	Cashier ID	Received	Comments
Cash	1255	\$160.00	09/07/2022	VDEKRONEY		
Owner Info.:	Larry Maye 12630 Frederick Rad ;Ellicott City, MD 21043					
Work Description:	Receipt #72162					