PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 50629A

A _____

DISTRICT _____

DATE 4-5-95

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

461-9933

~~TOAD #~~ 05-418828

INDEXED

DATE SYSTEM APPROVED _____

INSPECTOR _____

Columbia Builders, Inc. IS PERMITTED TO INSTALL X ALTER _____

ADDRESS P.O. Box 999, Columbia, MD 21044 PHONE 730-3939

SUBDIVISION Ashleigh Knolls LOT 59 ROAD 7116 Chilton Court

PROPERTY OWNER ~~Columbia Builders, Inc.~~ Haley - NEW owner

ADDRESS 7116 Chilton Court
Clarksville, MD 21029

Addition - Propane Tank

BLDG. PERMIT SIGNED AND RETURNED 9-27-95

Serial # 61812

- House is served by a shared community septic system. As part of the general permit for the community system, items previously installed or under construction include individual septic tank, connection from tank to common effluent line, community system headworks, and shared disposal fields.

- This permit is limited to installation of the individual house sewer line only. Location as per the signed building permit site plan, copy attached.

- As the community system is not yet approved for service, connection to the septic tank is prohibited at this time. Sewer line is to be capped so as to maintain a minimum 2 foot separation from the connecting stub on the inlet side of the septic tank. Contact Health Department for inspection before covering the installation.

BUILDING PERMIT SIGNED AND RETURNED

12/21/04 - B00151049 - FINISH BASEMENT

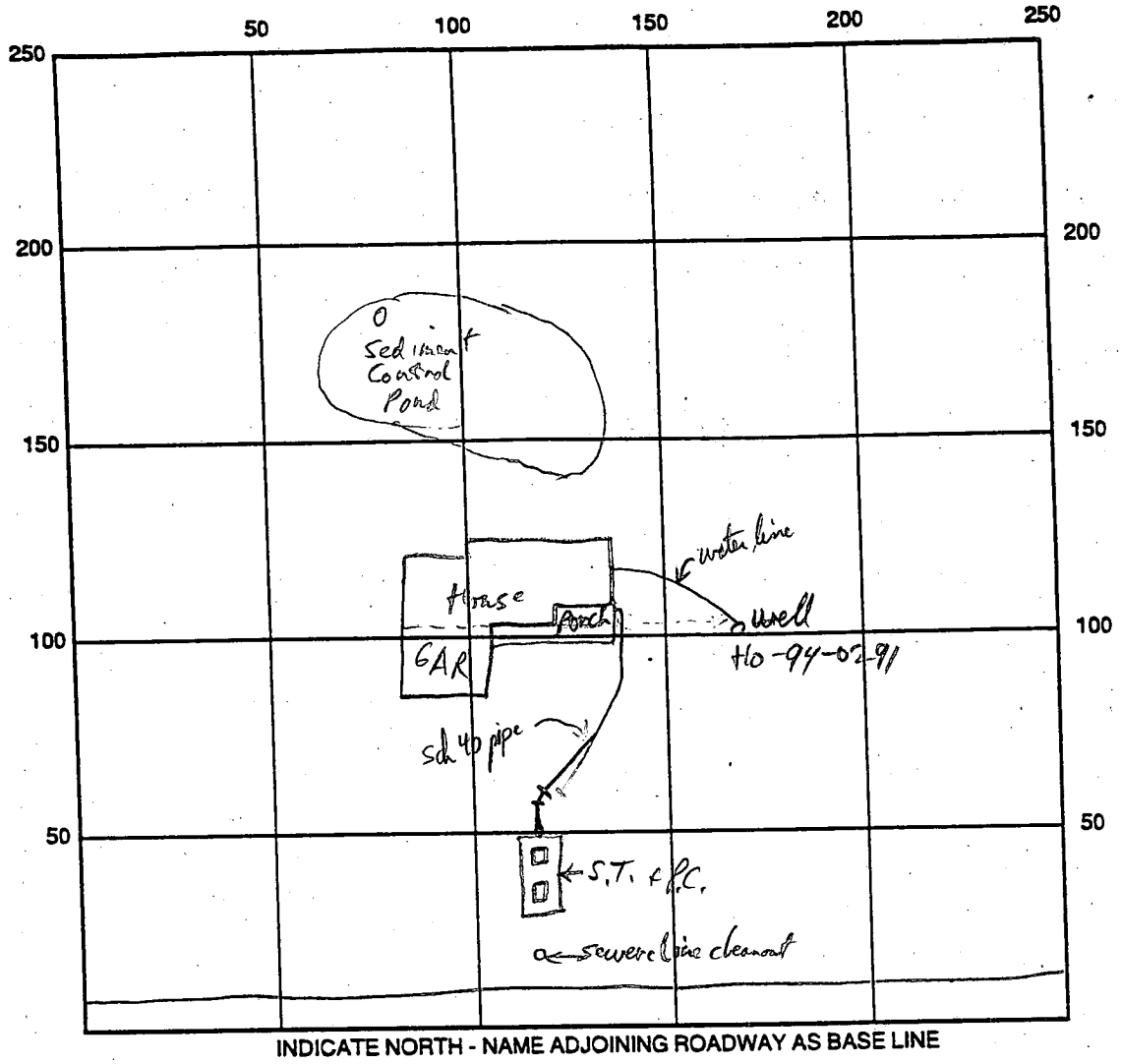
BLDG. PERMIT SIGNED AND RETURNED 4/2/97

Serial # B0010679

dlck

50629A

PLANS APPROVED BY _____ DATE _____



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1000gal S.T. + 500gal P.C. Standard 2-chambered water tight CLEANOUTS _____

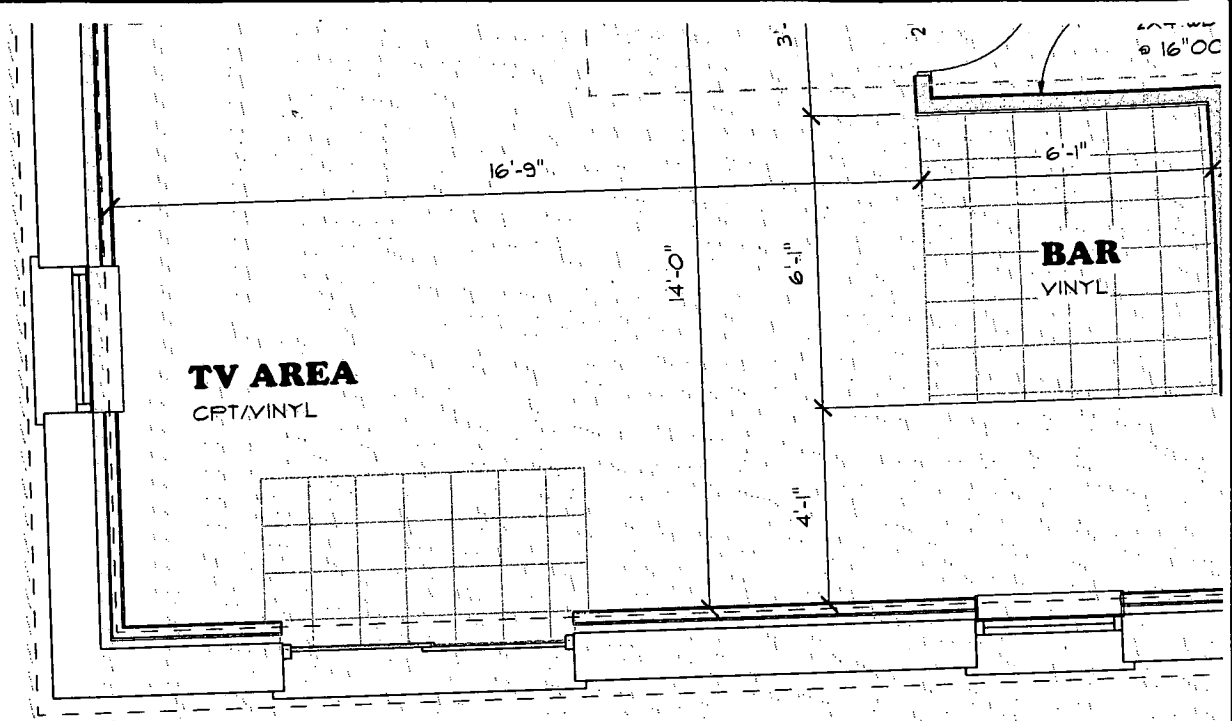
REMARKS: House Connection to 10 ft from S.T. OK & Cover 8/9/95 BJP

Sewere Line Connection OK BJP 8/23/95

BUILDING PERMIT SIGNED AND RETURNED

Pitless adapter & water line OK at 3 ft - BJP 8/11/95

DATE SYSTEM APPROVED _____ INSPECTOR _____



APPROVED

WALK-THRU BUILDING PERMIT

BP# B00151649 ~~D#~~ P# 50629A

APP. SAN KJB DATE: 12/21/04

DESC. OF WORK: finish Basement

w/ NO new Bedrooms

RECEIVED

DEC 20 2004

HOWARD COUNTY HEALTH DEPT.
BUREAU OF ENVIRONMENTAL HEALTH

ASHLEIGH KNOLLS

W502905

SUBDIVISION: LOT NUMBER: 59

DRY WELL OR DRY WELL AND TRENCH

_____ sq. ft./bedroom

	Septic Tank	Minimum Total Square Feet
3 bedroom	1000 gallon	_____
4 bedroom	1250 gallon	_____
5 bedroom	1500 gallon	_____

Inlet _____ feet below original grade.

Bottom maximum depth _____ feet below original grade.

Effective area begins at _____ feet below original grade.

NOTE: If trench is used to make up absorbent area, run the trench on level ground and leave a 5-foot earth buffer between dry well and trench. No trench is to exceed 100 feet in length. Trench inlet to be same as dry well, with _____ feet of stone below distribution pipe.

1500 GAL. "CUSTOM" SEPTIC TANK

TRENCHES

N/A sq. ft./bedroom

Trench to be _____ 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.

NOTE:
(1) No trench to exceed 100 feet in length.
(2) If more than one trench used, a distribution box is required.
(3) Trenches to be installed on level ground.
(4) Call for inspection of trench before gravel is installed.
(5) Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank and drywell.
(6) If a garbage disposal is used, increase septic tank capacity by 50% and increase absorbent sidewall area by 22%.

LOCATION: SHARED DISPOSAL FIELD,
POINT OF CONNECTION IS COMMON SEWER LINE AT
FRONT PROPERTY BOUNDARY.

2/2/95 C Willa

HD-191

STATE USE INDUSTRIES
JESSUP, MD 20794

EMERGENCY/TEMP NO. IF ANY

B 1 | 4041 | SEQUENCE NO. (DP USE ONLY)
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
please print or type

STATE PERMIT NUMBER: HO-94-0291
fill in this form completely

Date Received (APA): 12 09 94

OWNER INFORMATION

Last Name: WINCHESTER | Owner First Name: HOMES
Street or RFD: 6305 IVY LANE
Town: GREENBELT | State: MD | Zip: 20770

DRILLER INFORMATION

George F. Easterday
Driller's Name
L. Franklin Easterday, Inc.
Firm Name
9265 Brown Church Rd.,Mt. Airy, Md. 21771
Address
Gary F. Easterday 9-19-94
Signature Date

MSD/MGD/MWD: 40
License No.

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)

- (D) HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
- [F] FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
- [I] INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
- [P] PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
- [T] TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

APPROXIMATE DEPTH OF WELL: 206 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 DEEPENED 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 DEEPEN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENED (IF AVAILABLE):

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

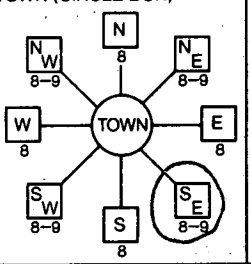
APPROP. PERMIT NUMBER: GAP
FORCE: MR (WRITE INITIALS IN BOX) PERMIT No. HO-94-0291

B 3 LOCATION OF WELL

8 COUNTY: HOWARD
23 SUBDIVISION: ASHLEIGH KNOLLS
SECTION: | LOT: 59
52 NEAREST TOWN: HIGHLAND
MILES FROM TOWN (enter 0 if in town): 1 M I

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



NEAR WHAT ROAD: CHILCOT CT

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
NORTH (N) WEST (W) (32) EAST (E) (S) SOUTH

DISTANCE FROM ROAD: 200
ENTER FT OR MI: FT

TAX MAP: _____ BLK: _____ PARCEL _____

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

COUNTY NAME: HOWARD
COUNTY NO.: W 50290 J

STATE SIGNATURE _____ INSERT S

DATE ISSUED: 01/13/95
CO SIGNATURE: Mark E. Pfeffer
EXP. DATE: 01/13/96

NORTH GRID: 487000
EAST GRID: 819000

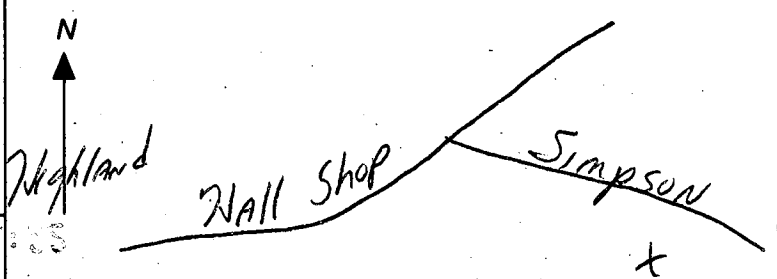
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER
1. well
2.
3.

WRITE THE BOX NUMBER FROM THE MAP HERE
E 819
N 487

2/10/95 grout
20 BAGS GROUT
80' CASING
30' OPEN
2' ABOVE GROUND
X
PER WELL DRILLER
65.5TH
000 000 TAG ON WELL

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION



SPECIAL CONDITIONS
NOTE = APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED = Site inspection before drilling

COUNTY

C 1 **5950** (1 2 3 6) (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

SEQUENCE NO. (DENV USE ONLY)

STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPE

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

COUNTY NUMBER W U 2 1 C J

ST/CO USE ONLY
DATE Received 12 09 95 (8–13)

DATE WELL COMPLETED 02 10 95 (15–20)

Depth of Well 300 (22–26) (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-95-0291 (28–37)

OWNER Winchester Homes
last name first name

STREET OR RFD [illegible] TOWN Highland

SUBDIVISION [illegible] SECTION LOT 59

WELL LOG
Not required for driven wells

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

DESCRIPTION (Use additional sheets if needed)	FEET FROM	FEET TO	Check if water bearing
Top Soil	0	2	
red clay	2	12	
Sand Silt + clay	12	75	
Mica	75	85	
Sand Stone	85	86	
Mica	86	105	
Sand Stone	105	106	✓
Mica	106	145	
Flint Mica Mixed	145	148	✓
Mica	148	220	
Quartz	220	221	✓
Mica	221	300	

IN HARD ROCK AREAS, IDENTIFY SPECIFICALLY WHERE SATURATED FRACTURES WERE OBSERVED.

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, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS IDENT. NO. 40

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) [signature]

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

GROUTING RECORD
WELL HAS BEEN GROUTED (Circle Appropriate Box) yes [Y] (44) no [N] (44)

TYPE OF GROUTING MATERIAL

CEMENT [CM] (45–46) BENTONITE CLAY [BC] (45–46)

NO. OF BAGS 20 NO. OF POUNDS 2000

GALLONS OF WATER 100

DEPTH OF GROUT SEAL (to nearest foot)

from 0 (48) ft. TOP (52) to 30 (54) ft. BOTTOM (58)

(enter 0 if from surface)

CASING RECORD
casing types insert appropriate code below

[ST] STEEL [CO] CONCRETE [PL] PLASTIC [OT] OTHER

MAIN CASING TYPE	Nominal diameter top (main) casing (nearest inch)	Total depth of main casing (nearest foot)
ST (60–61)	6 (63–64)	80 (66–70)

OTHER CASING (if used)

EACH CASING	diameter inch	depth (feet) from	to

SCREEN RECORD
screen type or open hole insert appropriate code below

[ST] STEEL [BR] BRASS BRONZE [HO] OPEN HOLE [PL] PLASTIC [OT] OTHER

C 2 (1 2)

EACH SCREEN		DEPTH (nearest ft.)	
1	HO (8–9)	78 (11–15)	300 (17–21)
2	(23–24)	(26–30)	(32–36)
3	(38–39)	(41–45)	(47–51)

SLOT SIZE 1 ____ 2 ____ 3 ____

DIAMETER OF SCREEN (56–60) (NEAREST INCH)

GRAVEL PACK from ____ to ____

IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68 (68)

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)

T (70) (E.R.O.S.) (72) W Q (74 75 76)

TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3 (1 2)

PUMPING TEST
HOURS PUMPED (nearest hour) 3 (8–9)

PUMPING RATE (gal. per min. to nearest gal.) 5 (11–15)

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 10 (17–20)

WHEN PUMPING 117 (22–25)

TYPE OF PUMP USED (for test)

[A] air (27) [P] piston (27) [T] turbine (27)

[C] centrifugal (27) [R] rotary (27) [O] other (describe below) (27)

[J] jet (27) [S] submersible (27)

PUMP INSTALLED
DRILLER WILL INSTALL PUMP (CIRCLE) (YES or NO) YES NO

IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE

TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE: (29)

CAPACITY: GALLONS PER MINUTE (to nearest gallon) (31–35)

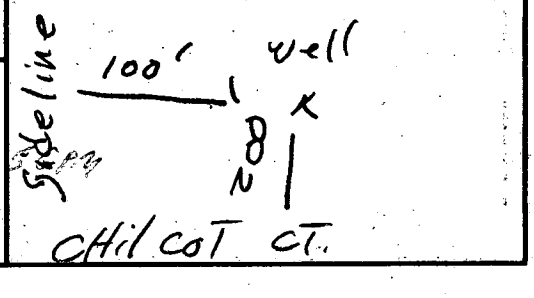
PUMP HORSE POWER (37–41)

PUMP COLUMN LENGTH (nearest ft) (43–47)

CASING HEIGHT (circle appropriate box and enter casing height)

[+] above (49) [–] below (49) LAND SURFACE 2 (50–51) (nearest foot)

LOCATION OF WELL ON LOT
SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)



COUNTY

Page _____ of _____ 2/28/95 3/1 Review OK 10/18/95 DKS
Date _____

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 94-0291
Location of property (road) Chilcot Ct
Subdivision Ashleigh Knolls Lot 59 Block _____ Plat _____ Sec. _____
Well Driller Easterday Owner Winchester Homes

Depth of well 300 5gpm
Distance of measuring point (M.P.) above ground 2'
Static water level (S.W.L.) below M.P. 10'

I. High rate pumping -- reservoir drawdown

Time pump started 1:00 Pumping rate 12 G.P.M.
Total time 15 min. to reach pumping water level 115 ft. below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes

TIME (in 15 minute intervals	WATER LEVEL below M.P.	PUMPING RATE time to fill 5 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
1:15	115	10 sec.	Pump setting 280	6 G.P.M.
1:30	115	10 "	Lee Holland	6 "
1:45	116	10 "		6 "
2:00	117	10 "		6 "
2:15	117	10 "		6 "
2:30	117	10 "		6 "
2:45	117	10 "		6 "
3:00	117	10 "		6 "
3:15	117	10 "		6 "
3:30	117	10 "		6 "
3:45	117	10 "		6 "
4:00	117	10 "		6 "
4:15	117	10 "		6 "

HD-224

SITE SUPERVISOR (sign) or driller or foreman INDICATOR

Page _____ of _____ Review _____
Date _____

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 940291
Location of property (road) Chilcot Ct
Subdivision Ashleigh Knolls Lot 59 Block ____ Plat ____ Sec. ____
Well Driller Easterday Owner Winchester Homes

Depth of well _____
Distance of measuring point (M.P.) above ground 2'
Static water level (S.W.L.) below M.P. _____

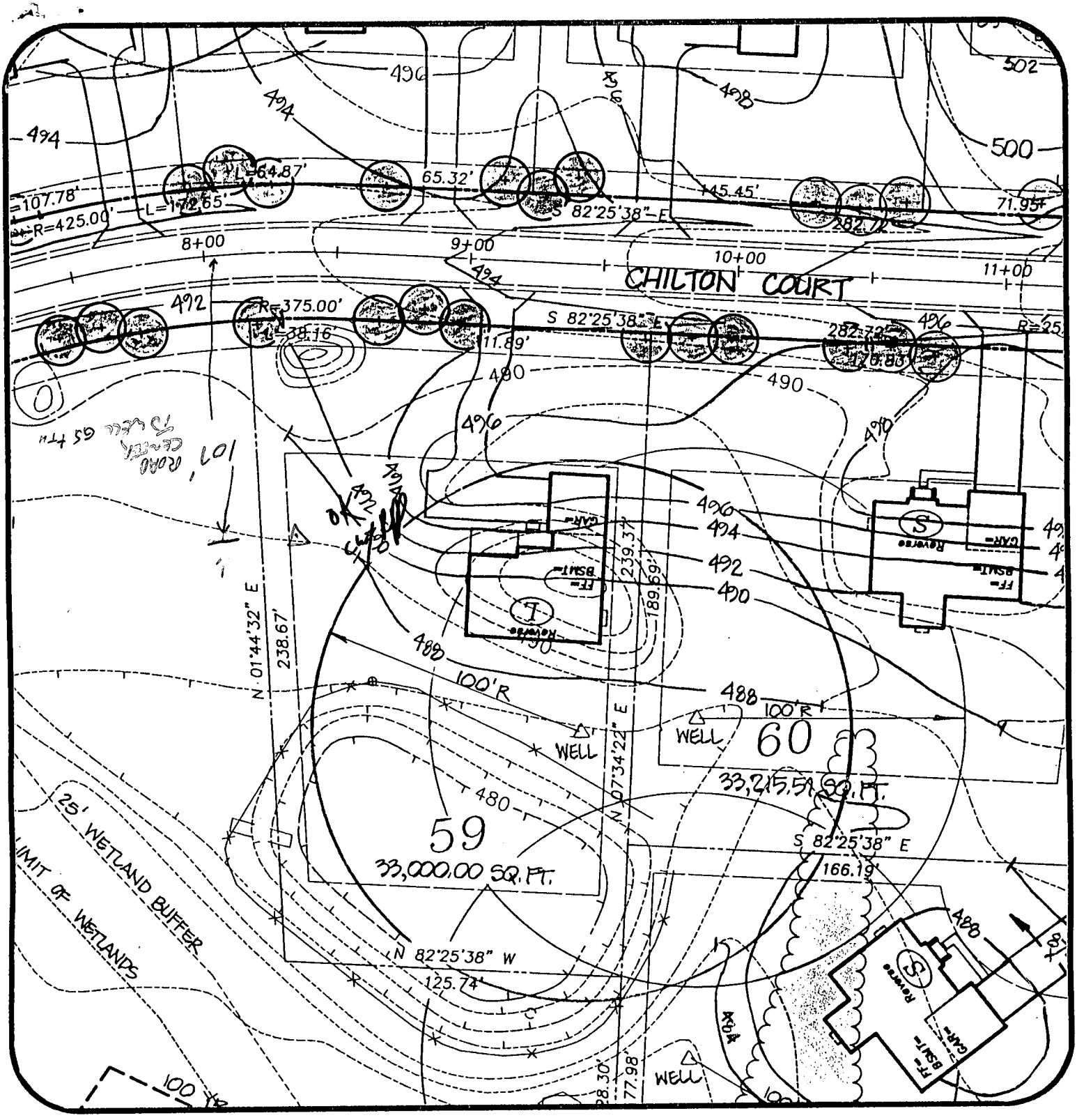
I. High rate pumping -- reservoir drawdown

Time pump started _____ Pumping rate _____
Total time _____ to reach pumping water level _____ ft. below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes

TIME (in 15 minute intervals	WATER LEVEL below M.P.	PUMPING RATE time to fill 5 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)

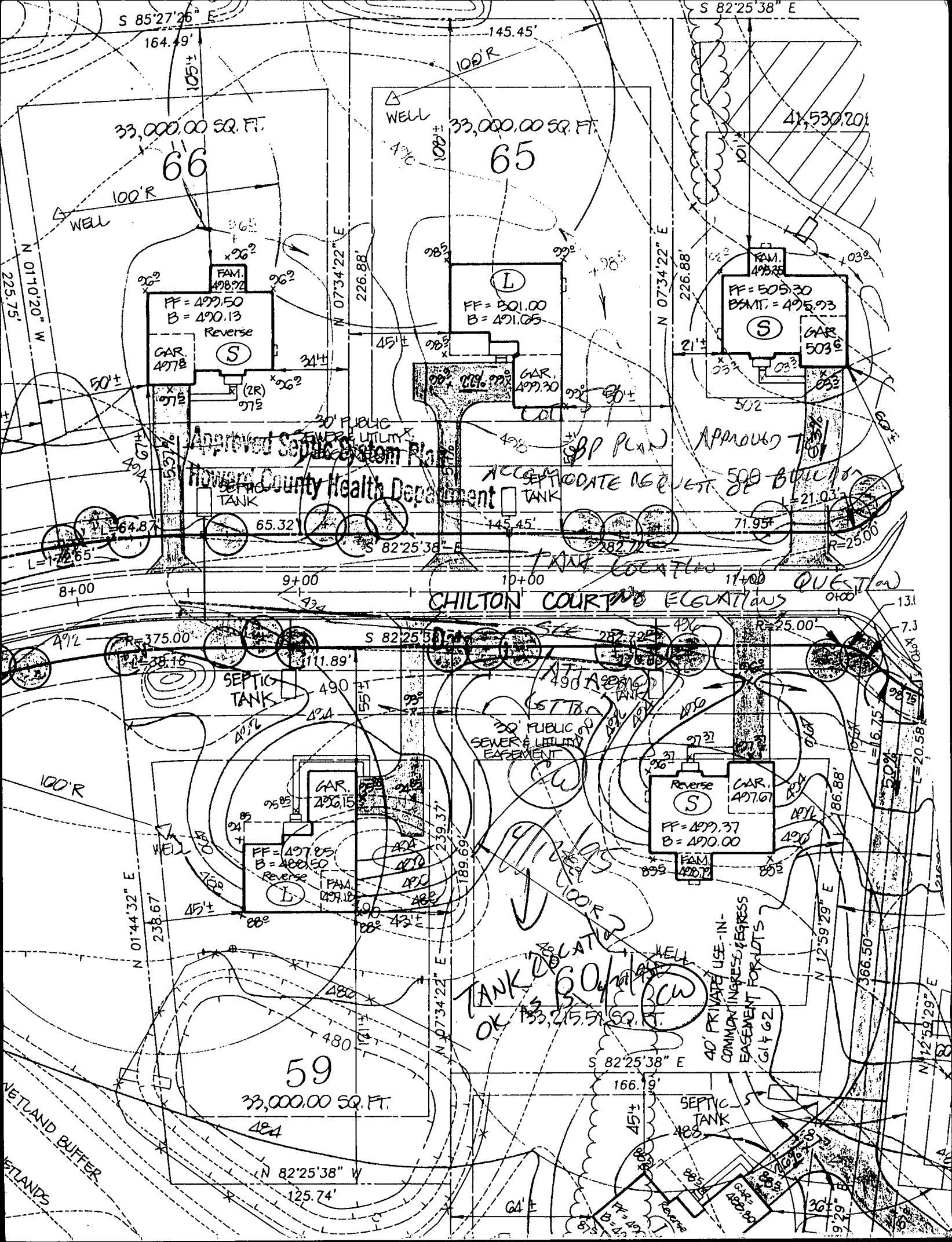
HD-224 Well site at stake. T.H/G.S.



Ashleigh Knolls Lot 59	
DATE: 9/20/24	PROJECT NO.: 89027.06
DRAWN BY: TJP	SCALE: 1" = 50'

OK
11/25/95
(CW)

R.M. MOCHI GROUP, P.C.
CIVIL ENGINEERS
LAND SURVEYORS
PLANNERS
ENVIRONMENTAL
3300 N. Ridge Road, Suite 235
Ellicott City, MD 21043-3305
(410) 461-0079
Fax: (410) 750-6340


S 85°27'26" E
164.49'
145.45'
S 82°25'38" E
100'R
WELL
33,000.00 SQ. FT.
66
65
41,530.20
N 01°10'20" W
225.75'
N 07°34'22" E
226.88'
FAM. 498.72
FF = 499.50
B = 490.13
Reverse
GAR. 497.8
GAR. 499.30
FF = 505.30
BSMT. = 495.93
GAR. 503.6
Approved Septic System Plan
Flower County Health Department
SEPTIC TANK
65.32'
145.45'
71.95'
282.72'
S 82°25'38" E
L=64.87'
L=21.03'
R=25.00'
8+00
9+00
10+00
11+00
CHILTON COURT
R=375.00'
L=38.16'
111.89'
490
30' PUBLIC SEWER & UTILITY EASEMENT
GAR. 496.15
FF = 497.05
B = 490.50
FAM. 497.10
239.37'
189.69'
100'R
WELL
45'±
238.67'
N 01°44'32" E
N 07°34'22" E
480
59
33,000.00 SQ. FT.
N 82°25'38" W
125.74'
WETLAND BUFFER
WETLANDS
GAR. 497.67
FF = 499.37
B = 490.00
FAM. 498.72
40' PRIVATE USE-IN-COMMON INGRESS/EGRESS EASEMENT FOR LOTS 61 & 62
N 12°59'29" E
366.50'
S 82°25'38" E
166.19'
SEPTIC TANK
GAR. 488.80
FF = 493.
B = 488.
Reverse
64'±
36'±
TANK LOCATION QUESTIONS
TANK LOCATION
OK
53,215.51 SQ. FT.
ACCOMMODATE NEW SEPTIC TANK
BP PLAN APPROVED
500 BUILDING

APPLICATION

HOWARD COUNTY

PERMIT APPLICATION

DEPARTMENT OF INSPECTIONS, LICENSES & PERMIT
3430 COURT HOUSE DRIVE, ELLICOTT CITY, MARYLAND 21043

SERIAL NUMBER 58575

BUILDING ADDRESS (HOUSE NO., STREET, TOWN OR AREA)
7116 Chilton Court
Clarksville, MD 21029

GRADING/SEDIMENT CONTROL ☐ YES ☐ NO F93-116 SDP #

DESCRIPTION OF WORK AUTHORIZED
Model (L)
2 Story, Full Base., 10 RM, 4 BA.,
Garage, Opt. FP (4 BR)

LOT NO.	PARCEL NO.	SEC.	AREA	BLOCK NO.	LIBER	FOLIO
59	P/O/1376			7		

SUB DIVISION	ZONE	ZONE MAP	ELEC. DIST.	CENSUS TR.
Ashleigh Knolls	R-R	41	5	6051.02

OWNER NAME AND ADDRESS — PHONE NO.
Columbia Builders, Inc. 730-3939
P.O. Box 999
Columbia, MD 21044

OCCUPANT'S NAME AND ADDRESS — PHONE NO.
N/A

ARCHITECT OR ENGINEER'S NAME AND ADDRESS — PHONE NO.
Mildenberg, Mochi & Assoc., Inc. 461-0078
3300 N. Ridge Road, Suite 235
Ellicott City, MD 21043

CONTRACTOR'S NAME AND ADDRESS — PHONE NO.
Columbia Builders, Inc. 730-3939
P.O. Box 999
Columbia, MD 21044

SIZE OF BLDG.	FRONT	DEPTH	HEIGHT
1	50'	63'	10'
2	50'	65'	10'
B	50'	41'	10'

TYPE OF BLDG.	AREA	VOLUME	ROOF
B. ROOMS	2143	21430	Asp. Gable
ROOMS	1863	18630	
BATHS			
FIREPLACES	1587	15870	T 55,593

FOOTINGS	FOUNDATION	S. WALLS
20" x 8"	12" cmu	wd fram
		sid

UTILITIES					
WATER WELL	SEWER SEPTIC	GAS	ELECTRICITY	TYPE OF HEAT	AC
X	X	X	X	Gas	X

EXISTING USE: Vacant Lot
PROPOSED USE: Single Family Dwelling

EST. CONSTRUCTION COST	LICENSE NUMBER	PERMIT FEE
$100,000.00	361106	

I have carefully examined and read this application and know the same is true and correct, and that is doing this work, all provisions of Howard County Ordinances and the State Laws of Maryland will be complied with, whether specified or not; and I will notify the Department of Inspections, and Permits twenty-four hours in advance when I am ready for the inspections called for elsewhere in the application; and that no work will be covered up until such inspections have been complied with.

SIGNATURE: O. James Greenfield
TITLE: Pres.
DATE: 3/22/95

W/S CODE

FOR OFFICE USE ONLY

DISTRICT IN FEET FROM R/W LINE TO FRONT BUILDING LINE _____

SIDE YARD _____
(DISTANCE IN FEET FROM SIDE BLDG. LINE TO SIDE PROPERTY LINE)

TO SIDE BUILDING LINE _____
DISTANCE IN FEET, REAR YD. REQUIRING SET

BACK _____ (CORNER LOT ONLY) _____ SDP #

Check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING		
SHA		
SEDIMENT/GRADING		
BUILDING OFFICIAL		
WATER & SEWER		
HEALTH DEPT.	4/12/95	Craig Wellman
FIRE PROTECTION		
STORM WATER MGM		

APPROVED _____ DATE _____

CAUTION

To begin construction before a permit placard has been issued and displayed on the job is a violation of the law.

Use and occupancy permit must be applied for two weeks before it will be issued.

IMPORTANT: PLEASE SHOW ZIP CODES AND AREA CODES WHEREVER REQUIRED.

LP-69-591

Distribution of Copies:
White - Building Official
Green - Planning & Zoning
Yellow - Engineering
Pink - Health Dept.
Gold - S.H.A.

HOWARD COUNTY HEALTH DEPARTMENT

Joyce M. Boyd, M.D., County Health Officer

May 12, 1995

MEMORANDUM

TO: Columbia Builders, Inc.
P. O. Box 999
Columbia, MD 21044

FROM: Craig Williams, Program Director
Water and Sewerage Program
Bureau of Environmental Health

RE: Building Permit Number: 58575

Proposed Use: Single Family Dwelling

Address: 7116 Chilton Court
Clarksville, MD 21029

This is to confirm that the above referenced building permit application was recommended for approval subject to the following conditions and/or cautions:

1) building sewer may not be connected to septic tank until public utilities are placed in service.

2) septic tank pump, piping, floats, and controls must be installed prior to final plumbing inspection.

3) Final inspections require minimum of seven (7) days notice.

This office's recommendation for approval of the building permit application was based upon your acceptance of these conditions.

Please contact Howard County DPW (410) 313-4900 or the Howard County Health Department (410) 313-2640 to schedule the final inspection.

CW:vr

8-11-95
WPI am

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 ✓ Receipt # _____
Replacement _____ Date 8-10-95

Name of Installer JMI Co. Telephone 442-5780

License Number 4524
Certified Well Pump Installer _____ Well Driller _____ Registered Plumber ✓

Name of Property Owner Columbia Blders Telephone 730-3939
Subdivision Ashleigh Knolls Lot # 59 Well Tag # HO-94-0291
Site Address Chilton Ct.

Pump
1. Type
   a. Deep well jet _____
   b. Shallow well jet _____
   c. Submersible ✓
2. Make Jacuzzi
3. Model # _____
4. Capacity 8 GPM
5. Pump exceeds well capacity Yes ✓ No _____
6. If Yes, is low pressure cutoff switch installed? Yes ✓ No _____
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors ✓ Cable guards ✓ Other _____

Motor
1. Horsepower ¾
2. RPM _____
3. Voltage _____
   a. 110 _____
   b. 220 X

Pitless Adapter
1. Make Harwood
2. Model # DT-100
3. Depth 48"

Tank
1. Capacity WX-203
2. Pressure relief valve? YES

Pitless adapter & waterline OK @ 3# RP 8/11/95

Piping
1. Type Plastic
2. Size 1"
3. NSF and/or BOCA Code approved ✓
4. Depth of supply line 42"

Well data
1. Depth 300' ft.
2. Yield 5 GPM
3. Static water level 10 ft.
4. Will water supply be disinfected by installer? YES

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).

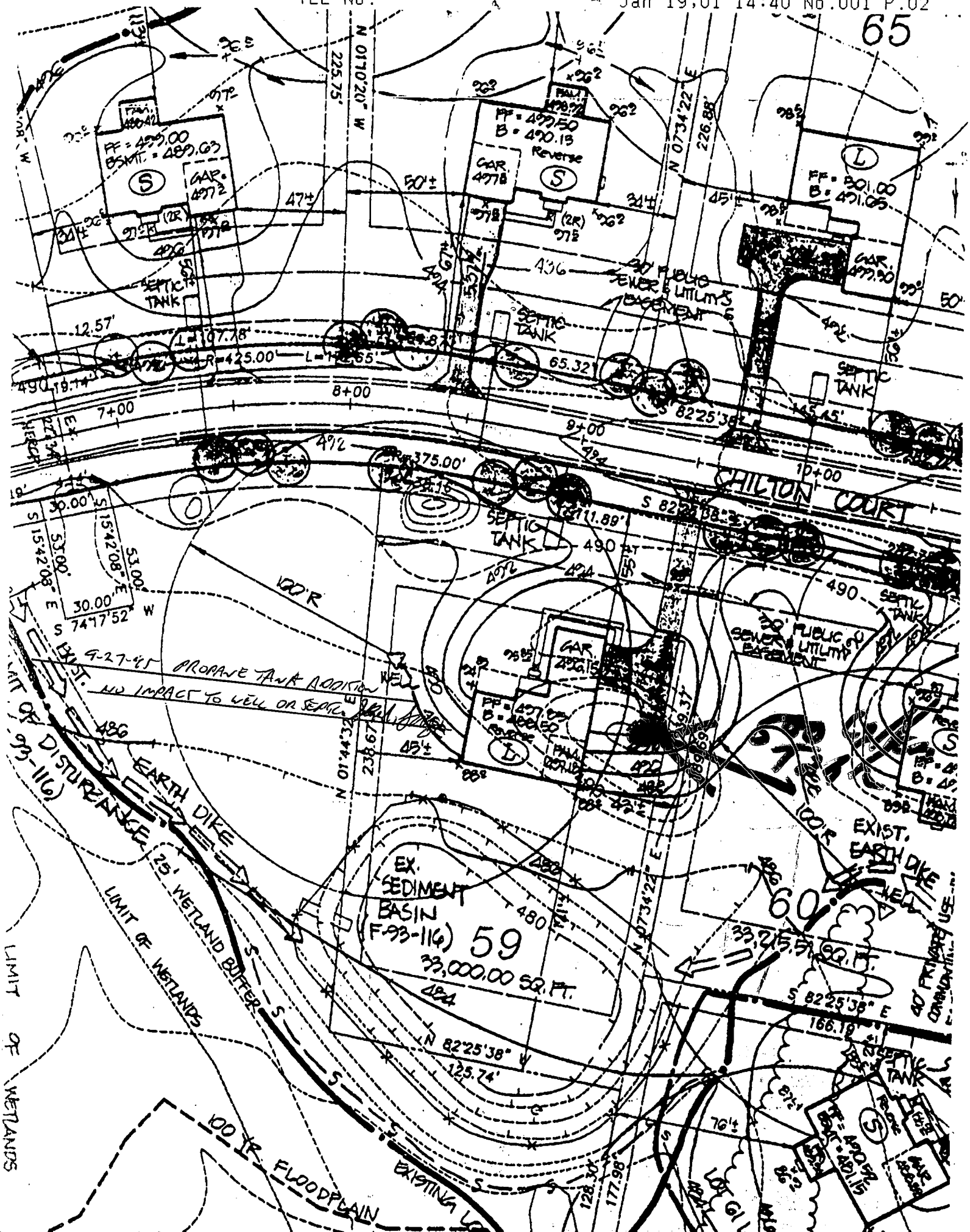
All information given above is true to the best of my knowledge.

Signature of Applicant: _____

Date: 8-10-95

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

HD-215


65
60
59
HILTON COURT
EX. SEDIMENT BASIN (F-93-116)
33,000.00 SQ. FT.
33,215.51 SQ. FT.
LIMIT OF DISTURBANCE (F-93-116)
EARTH DIKE
EXIST. EARTH DIKE
25' WETLAND BUFFER
LIMIT OF WETLANDS
100 YR. FLOODPLAIN
EXISTING
9-27-01 PROPANE TANK ADDITION
NO IMPACT TO WELL OR SEPTIC
WELL
SEPTIC TANK
GAR.
PF = 499.00
B = 489.63
PF = 499.50
B = 490.13 Reverse
PF = 501.00
B = 491.05
PF = 491.00
B = 490.50
PF = 490.50
BSMT. = 481.15
40' PUBLIC SEWER & UTILITY EASEMENT
40' PRIVATE DRAINAGE EASEMENT
S 82°25'38" E
N 82°25'38" W
125.74'
166.19'
145.45'
65.32'
111.89'
30.00'
53.00'
S 15°42'08" E
S 74°17'52" W
N 01°10'20" W
225.75'
N 07°34'22" E
226.88'
N 01°44'32" E
238.67'
L=167.78'
R=425.00'
L=112.55'
12.57'
19.74'
375.00'
7+00
8+00
9+00
10+00
EX. 8" WATER LINE
EX. 12" WATER LINE
EX. 8" SEWER LINE
EX. 4" GAS LINE
EX. UTILITY POLE
EX. CATCH BASIN
EX. MANHOLE
EX. FIRE HYDRANT
EX. GAS VALVE
EX. WATER VALVE
EX. GAS METER
EX. SIGN
EX. TREE
EX. CONTOUR
EX. SPOT ELEVATION
EX. BUILDING
EX. PAVEMENT
EX. CURB
EX. GUARD RAIL
EX. FENCE
EX. GRAVEL
EX. CONCRETE
EX. GRASS
EX. WOODS
EX. BRUSH
EX. WETLANDS
EX. WETLAND BUFFER
EX. FLOODPLAIN
EX. SEDIMENT BASIN
EX. EARTH DIKE
EX. SILT FENCE
EX. HAY BALES
EX. STONE
EX. TEMPORARY SEEDING
EX. PERMANENT SEEDING
EX. MULCH
EX. SOD
EX. TOPSOIL
EX. SUBSOIL
EX. BEDROCK
EX. GROUNDWATER
EX. SURFACE WATER
EX. DRAINAGE
EX. UTILITY
EX. ELECTRIC
EX. TELEPHONE
EX. CABLE TV
EX. GAS
EX. WATER
EX. SEWER
EX. STORM
EX. SANITARY
EX. COMBINED
EX. SEPTIC
EX. LEACH FIELD
EX. DRY WELL
EX. CATCH BASIN
EX. MANHOLE
EX. FIRE HYDRANT
EX. GAS VALVE
EX. WATER VALVE
EX. GAS METER
EX. SIGN
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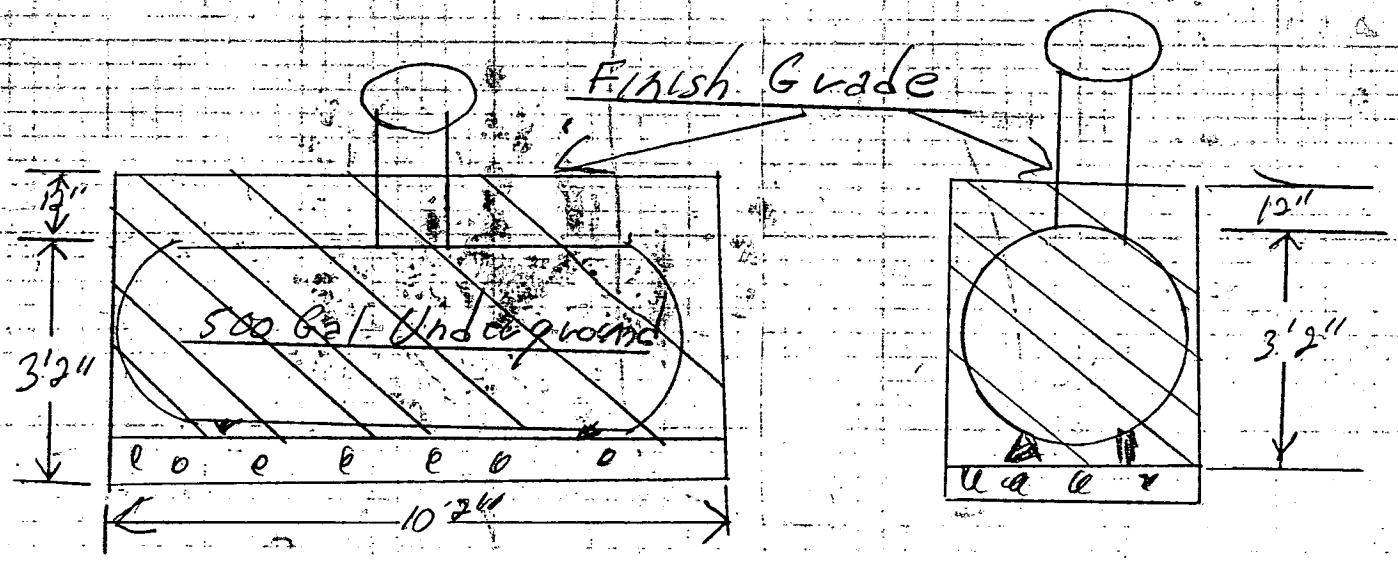
EX. CABLE TV
EX. GAS
EX. WATER
EX. SEWER
EX. STORM
EX. SANITARY
EX. COMBINED
EX. SEPTIC
EX. LEACH FIELD
EX. DRY WELL

JOB COLUMBIA BUILDERS.
7116 CHILTON COURT.
CLARKSVILLE, MD. 21029

INSTALL one 500 GALLON
UNDERGROUND PROPANE TANK.

CONTRACTOR POIST GAS COMPANY
360 MAIN STREET
LAUREL, MD. 20707



APPLICATION

HOWARD COUNTY

PERMIT APPLICATION

DEPARTMENT OF PUBLIC WORKS
BUREAU OF INSPECTIONS LICENSES & PERMITS
3430 COURT HOUSE DRIVE, ELLICOTT CITY, MARYLAND 21043

SERIAL NUMBER 61812

61312

BUILDING ADDRESS (HOUSE NO., STREET, TOWN OR AREA)
7116 CHILTON CT.
CLARKSVILLE, MD. 21029

GRADING/SEDIMENT CONTROL ☐YES ☐NO SDP #

DESCRIPTION OF WORK AUTHORIZED
INSTALL 500 GALLON UNDERGROUND PROPANE STORAGE TANK.

LOT NO.	PARCEL NO.	SEC.	AREA	BLOCK NO.	LIBER	FOLIO
59						

SUB DIVISION	ZONE	ZONE MAP	ELEC. DIST.	CENSUS TR.
ASHLEY KNOLL				

OWNER'S NAME AND ADDRESS — PHONE NO.
COLUMBIA BUILDERS.
P.O. BOX 999 — 730 3939
COLUMBIA, MD. 21044

OCCUPANT'S NAME AND ADDRESS — PHONE NO.
CORNELUS HALEY — 410 715 9330
SAME.

ARCHITECT OR ENGINEER'S NAME AND ADDRESS — PHONE NO.
COLUMBIA BUILDERS — 730 3939
P.O. BOX 999
COLUBIA, MD. 21044

CONTRACTOR'S NAME AND ADDRESS — PHONE NO.
POIST GAS COMPANY — 301 725 3232
360 MAIN STREET
LAUREL, MD. 20707

SIZE OF BLDG.	FRONT	DEPTH	HEIGHT

TYPE OF BLDG.	AREA	VOLUME	ROOF
B. ROOMS			
ROOMS			
BATHS			
FIREPLACES			

FOOTINGS	FOUNDATION	S. WALLS

UTILITIES					
WATER WELL	SEWER/SEPTIC	GAS	ELECTRICITY	TYPE OF HEAT	AC
XXX	XXX	XXX	XXX	GAS	X

EXISTING USE: SFD
PROPOSED USE: SFD w/ tank

EST. CONSTRUCTION COST	LICENSE NUMBER	PERMIT FEE
$2000.00	G 50710	

I have carefully examined and read this application and know the same is true and correct, and that in doing this work all provisions of Howard County Ordinances and the State Laws of Maryland will be complied with, whether specified or not; and I will notify the Bureau of Inspections, and Permits twenty-four hours in advance when I am ready for the inspections called for elsewhere in this application; and that no work will be covered up until such inspections have been complied with.

SIGNATURE

POIST GAS V. PRES — 9/14/95
TITLE — DATE

FOR OFFICE USE ONLY

W/S CODE

DISTANCE IN FEET FROM R/W LINE TO FRONT BUILDING LINE 30'
SIDE YARD 15
(DISTANCE IN FEET FROM SIDE BLDG. LINE TO SIDE PROPERTY LINE)
DISTANCE IN FEET FROM SIDE STREET R/W LINE 120'
TO SIDE BUILDING LINE
DISTANCE IN FEET, REAR YD. REQUIRING SET BACK 65'
(CORNER LOT ONLY)
CONDITIONS (IF ANY)
SDP #

Checks payable to DIRECTOR OF FINANCE OF HOWARD COUNTY

FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING		
SHA		
SEDIMENT/GRADING		
BUILDING OFFICIAL		
WATER & SEWER		
HEALTH DEPT.	9-27-95	
FIRE PROTECTION		
STORM WATER MGM.		

APPROVED — DATE

CAUTION
To begin construction before a permit placard has been issued and displayed on the job is a violation of the law.
Use and occupancy permit must be applied for two weeks before it will be issued

IMPORTANT: PLEASE SHOW ZIP CODES AND AREA CODES WHEREVER REQUIRED.

Distribution of Copies:
White - Building Official
Green - Planning & Zoning
Yellow - Engineering
Pink - Health Dept.
Gold - S.H.A.

LP-69
Revised

SPEED LETTER

TO Craig Williams
Environmental Health
X 2648

FROM Jeff Welty
Utilities

SUBJECT Ashleigh Knolls

MESSAGE

The following lots at Ashleigh Knolls has been inspected and is OK for U/O:

Lot 59 7116 Chilton Ct.

Thanks,

REPLY DATE 10/5/95 SIGNED Jeff Welty

Post-it™ brand fax transmittal memo 7671 | # of pages ▸

To Kim	From J. Welty
Co.	Co. Utilities
Dept Health Dept	Phone # 4990
Fax # 2648	Fax #

DATE SIGNED

WILSON JONES • Sandusky • MADE IN U.S.A.
©1987 Wilson Jones • © Wilson Jones 1986

SENDER: DETACH AND RETAIN YELLOW COPY

SPEED LETTER

TO Craig Williams
Environmental Health
X 2648

FROM Jeff Welty
Utilities

SUBJECT Ashleigh Knolls

MESSAGE

The following lots at Ashleigh Knolls has been inspected and is OK for U/O:

Lot 59 7116 Chilton Ct.

Thanks,

DATE SIGNED Jeff Welty

REPLY

DATE SIGNED

Wilson Jones - Carbonless - MADE IN U.S.A.
44 902 Triplicate - © Wilson Jones, 1988

RECIPIENT: RETAIN WHITE COPY, RETURN PINK COPY

HOWARD COUNTY HEALTH DEPARTMENT

Joyce M. Boyd, M.D., County Health Officer

October 5, 1995

Columbia Builders, Inc.
P. O. Box 999
Columbia, Maryland 21044

RE: Ashleigh Knolls, Lot #59
7116 Chilton Court
Well Permit #HO-94-0291

Dear Sirs:

This is to advise you that the septic system for the above referenced property was installed, inspected and approved on October 5, 1995.

The water sample recently submitted for testing was free of coliform and fecal coliform bacteria at the time of sampling and is bacteriologically safe for drinking.

INTERIM CERTIFICATE OF POTABILITY

This certifies that the initial sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under well permit #HO-94-0291. No guarantee can be given for health protection beyond this date of issue. Based upon satisfactory investigation and evaluation by the Howard County Health Department, the Maryland Department of the Environment accepts this well system as required by COMAR 26.04.04.09.

This certificate may become final upon completion of the final bacteriological test which is to be taken by the county health department within six months.

Date of Water Sample: September 28, 1995
Date of Well Completion: February 10, 1995

Approving Authority
Donna K. Soe
Donna K. Soe, Sanitarian
Water and Sewerage Program

DKS
cc: Building Inspector's office
file

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

MICROBIOLOGICAL * CHEMICAL * PHYSICAL WATER ANALYSIS

[illegible] Old Taneytown Road
Westminster, MD 21158

MD State Certification #133
(410) 848-1014 or 876-4554

WATER ANALYSIS REPORT

LABORATORY NUMBER: 4995
SUBSTATION I.D. NUMBER: 17900
OWNER: 7116 Chilton Court
Lot AK-59
CLARKSVILLE , HO, MD, 21029
DATE/TIME COLLECTED: 09-28-1995, 1130
DATE/TIME REC'D LAB: 09-28-1995, 1345
WELL NUMBER: HO-94-0291

COMPANY: CASH ACCOUNT
REQUESTED BY: Brenda Carlman
SOURCE: Well
SITE: Kitchen
COLLECTED BY: J.S. 95-430 (FVAL)
@ RESIDUAL CHLORINE: None Detected
WATER SUPPLY TREATED: NO
TYPE OF TREATMENT: NONE

PARAMETER	RESULTS	REFERENCE	UNITS
pH RESULTS @	6.7	6.5 ~ 8.5	pH Units
NITRATE	1.13	10 OR LESS	mg/L (PPM)

COLIFORM/MUG 24-HOUR TEST:

BACTERIA, TOTAL	ABSENT	Absent	Bacteria Total Coliform
ORGANISMS, FECAL	N/A	Absent	Bacteria Fecal Coliform

ADDITIONAL TEST:

PARAMETER	RESULTS	REFERENCE	UNITS
Turbidity	5.3	Less Than 10	NTU
[illegible]	None	None	

NOTE: A SATISFACTORY TEST RESULTS INDICATES THAT THE PARAMETER(S) [illegible] WERE WITHIN POTABLE WATER LIMITS AT THE TIME OF SAMPLING.

[illegible] SAMPLE ANALYZED IN THE FIELD.

REPORTED: 09-29-1995 LABORATORY DIRECTOR: Chas Mosheim

Chas Mosheim, BS, MT(ASCP)

[illegible], Use & Occupancy,

Sample Analyzed As Received

(4)

STATE OF MARYLAND
DEPARTMENT OF HEALTH AND MENTAL HYGIENE
Laboratories Administration
201 W. Preston St.
P.O. Box 2355, Baltimore, Maryland 21203
J. Mehsen Joseph, Ph.D., Director

013634

Category Code 21 4C Lab. No. _____

BACTERIOLOGICAL DRINKING WATER REPORT

Field Record

SAMPLE TYPE:
- Community ☐
- Non-Community ☐
- Non-Transient ☐
- Private ☑
- Check Sample ☐
- Special ☐

Source [illegible] - Powder Room
Location: [illegible]
Iced: Yes ☑ No ☐ ☑ am.
Treated Yes ☐ No ☑ Time Collected 10:30 ☐ pm.
Collector # 93-45-L Bottle No. A0655
Collector Name B. Canning County [illegible]

County	Plant No.	Sampling Station	Date Collected
13			02 21 91

pH 7.0 Res. Cl: Free 0.0 Total 0.0 Card No. ___

LABORATORY RECORD

Thiosulfate: Pres. ☑ Absent ☐ Undetermined ☐

PRESUMPTIVE MTF TEST*

ml. of Sample	10 ml.
Gas. 24 hours	- - - - - - - - - -
Gas. 48 hours	- - - - - - - - - -

CONFIRMED MTF TEST

ml. of Sample	10 ml.	No. of Pos.
Coliforms †	- - - - - - - - - -	0
Fecal Coliforms ‡		

PRESUMPTIVE P/A TEST*

ml. of Sample	100ml.
Gas. 24 hours	
Gas. 48 hours	

CONFIRMED P/A TEST

ml. of Sample	100 ml.
Total Coliforms †	
Fecal Coliforms ‡	
E. Coli ***	

** Presumptive Coliforms/100 ml. (Membrane Filter) =
† Verified Total Coliforms/100 ml. (Membrane Filter) = ___
‡ Verified Fecal Coliforms/100 ml. (Membrane Filter) = ___
Heterotrophic Plate Count §/ml. = ___

** using m Endo-Agar LES at 35° C incubation
* using Lauryl Sulfate Trypticase Broth at 35° C incubation
† using Brilliant Green Lactose Bile Broth at 35° C incubation
‡ using EC Broth at 44.5° C incubation
§ using Plate Count Agar at 35° C incubation
*** using ONPG-MUG at 35° C incubation

Date & Hour
Rec.d 2 4
Exam 2 4
Rept.

Laboratory
Annapolis ☐ Cumberland ☐
Cambridge ☐ Frederick ☐
Central ☐ Salisbury ☐
Cheverly ☑
Remarks ___

Bacteriologist Plume

DHMH - 86 12/94 COUNTY COPY 60M

HOWARD COUNTY HEALTH DEPARTMENT

Joyce M. Boyd, M.D., County Health Officer

May 13, 1996

Mr. Neal Haley
7116 Chilton Court
Clarksville, Maryland 21029

RE: Ashleigh Knolls, Lot #59
7116 Chilton Court
Well Permit #HO-94-0291

Dear Mr. Haley:

This is to advise you that the septic system for the above referenced property was installed, inspected and approved on October 5, 1995.

The water sample recently submitted for testing was free of coliform and fecal coliform bacteria at the time of sampling and is bacteriologically safe for drinking.

FINAL CERTIFICATE OF POTABILITY

This certifies that all sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under permit #HO-94-0291.

Dates of Water Samples: September 28, 1995
April 22, 1996

Date of Well Completion: February 10, 1995

Approving Authority
Donna K. Soe, Sanitarian
Water and Sewerage Program

DKS
cc: file

APPLICATION

HOWARD COUNTY

PERMIT APPLICATION

DEPARTMENT OF INSPECTIONS, LICENSES & PERMIT
3430 COURT HOUSE DRIVE, ELLICOTT CITY, MARYLAND 21043

$30

SERIAL NUMBER

B00104679

BUILDING ADDRESS (HOUSE NO., STREET, TOWN OR AREA)

7116 CHILTON CT
CLARKSVILLE, MD 21029

LOT NO.	PARCEL NO.	SEC.	AREA	BLOCK NO.	LIBER	FOLIO
59	475	2	-	7		

SUB DIVISION	ZONE	ZONE MAP	ELEC. DIST.	CENSUS TR.
ASHLEIGH KNOLLS	R-SC	4	5	6051.02

OWNER NAME AND ADDRESS — PHONE NO.

CORNELIUS + THERESA HALE / 410-531-1070
7116 CHILTON CT
CLARKSVILLE, MD 21029

OCCUPANT'S NAME AND ADDRESS — PHONE NO.

SAME AS ABOVE

ARCHITECT OR ENGINEER'S NAME AND ADDRESS — PHONE NO.

MARYLAND DECK + PATIO 301-253-2216
43 CRAVEN HURST DR
GAITHERSBURG, MD 20878

CONTRACTOR'S NAME AND ADDRESS — PHONE NO.

SAME AS ABOVE

EXISTING USE	PROPOSED USE
SFH	SFH W/DECK

EST. CONSTRUCTION COST	LICENSE NUMBER	PERMIT FEE
4,800	46291	

GRADING/SEDIMENT CONTROL ☐ YES ☐ NO — SDP #

DESCRIPTION OF WORK AUTHORIZED

DECK WITH STEPS
13 X 14 on rear of Home

SIZE OF BLDG.	FRONT	DEPTH	HEIGHT
		2	

TYPE OF BLDG.	AREA	VOLUME	ROOF
B. ROOMS			
ROOMS			
BATHS			
FIREPLACES			

FOOTINGS	FOUNDATION	S. WALLS
PEIR + POST		

UTILITIES						
WATER/WELL	SEWER/SEPTIC	GAS	ELECTRICITY	TYPE OF HEAT	AC

I have carefully examined and read this application and know the same is true and correct, and that is doing this work, all provisions of Howard County Ordinances and the State Laws of Maryland will be complied with, whether specified or not; and I will notify the Department of Inspections and Permits twenty-four hours in advance when I am ready for the inspections called for elsewhere in the application; and that no work will be covered up until such inspections have been complied with.

Steve Brooks IV
SIGNATURE

MANAGER
TITLE

3-25-97
DATE

W/S CODE

FOR OFFICE USE ONLY

DISTANCE IN FEET FROM R/W LINE TO FRONT BUILDING LINE 114

SIDE YARD 57
(DISTANCE IN FEET FROM SIDE BLDG. LINE TO SIDE PROPERTY LINE)

TO SIDE BUILDING LINE 60'
DISTANCE IN FEET, REAR YD. REQUIRING SET

BACK 103 (CORNER LOT ONLY) — SDP #

Check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING		
SHA		
SEDIMENT/GRADING		
BUILDING OFFICIAL		
WATER & SEWER		
HEALTH DEPT.	4/2/97	
FIRE PROTECTION		
STORM WATER MGM.		

CAUTION

To begin construction before a permit placard has been issued and displayed on the job is a violation of the law.

Use and occupancy permit must be applied for two weeks before it will be issued.

APPROVED — DATE

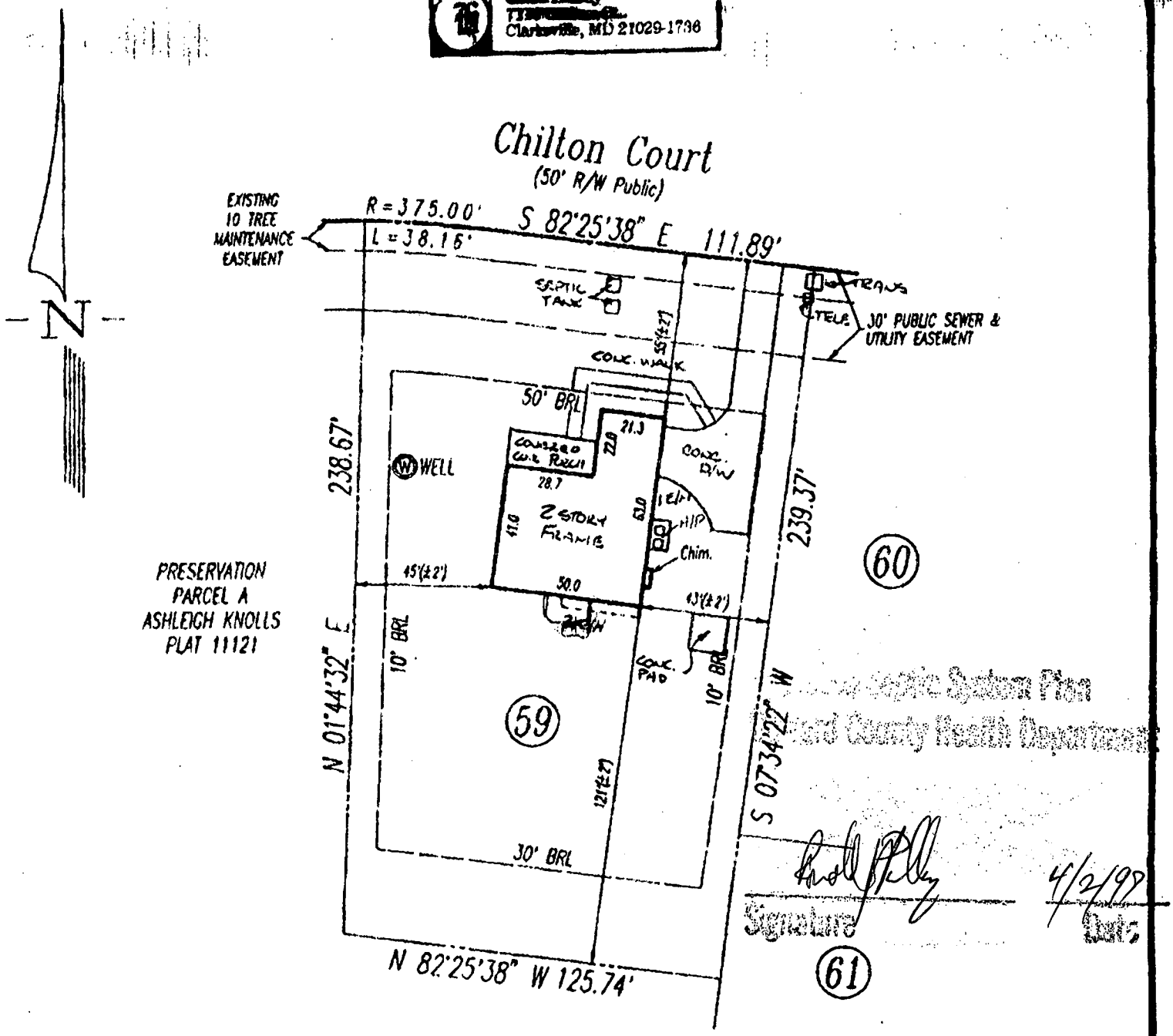
CA

IMPORTANT: PLEASE SHOW ZIP CODES AND AREA CODES WHEREVER REQUIRED.

Distribution of Copies:
White - Building Official
Green - Planning & Zoning
Yellow - Engineering
Pink - Health Dept.
Gold - S.H.A.

LP-89-591 CK 5111

C. J. Haley
[illegible]
Clarksville, MD 21029-1736



...ved Septic System Plan
...ard County Health Department

Signature

4/2/98
Date

LEGEND

F/P	= FIREPLACE	O/H	OVERHANG
B/W	= BAY WINDOW	H/P	HEAT PUMP/AIR COND.
D/W	= DRIVEWAY	G/M	GAS METER
CONC	= CONCRETE	E/M	ELECTRIC METER

ADDRESS No.: #7116 CHILTON COURT

TOP OF WALL ELEV. = 496.40' FIRST FLOOR ELEV. =

NO BOUNDARY OR MONUMENTATION ESTABLISHED OR LOCATED

HOWARD COUNTY HEALTH DEPARTMENT

Receipt

Date April 5 1995

Name Columbia Builders, Inc

Telephone No. 730-3939

DETAILED LOCATION OF SITE, DEVELOPMENT, SECTION, ROAD, LOT NO. & ELECTION DISTRICT

Ashleigh Knolls

Lots 59, 62, 64, 65, 66

Septic System Permit

5 lots @ $ 180.00 each $ 900.00

Received Payment VE CK # 3245

CUSTOMER FILE

P 50629A

MARYLAND BUSINESS FORMS, INC. R-16468

THIS RECEIPT IS NOT A PERMIT AND IT IS NOT A WARRANTY OF PERFORMANCE OF THE SYSTEM THAT IS INSTALLED