

Howard County Health Department
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, Maryland 21043
461-9933

INSPECTION NOTICE

Remarks HO 94 0535

WELL LINE OK TO COVER

Disapproved _____

Approved _____

Work not complete _____

Inspected by Shah Jerry

Date 10-2-96

10-2-96
11/27/96
House Connection - AM

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 57099A

A _____

DISTRICT 5th

DATE 08/29/96

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
~~151-1930X~~ 313-2640

Tax ID #
05-420512

DATE SYSTEM APPROVED _____

INSPECTOR _____

INDEXED

VanSant Plumbing & Heating _____ IS PERMITTED TO INSTALL ALTER _____

ADDRESS 3 N. Main Street, Mt. Airy, Maryland 21771 PHONE 682-6727

SUBDIVISION Ashleigh Knolls LOT 104 ROAD 7112 Chardon Court

PROPERTY OWNER Winchester Homes, Inc.

ADDRESS _____

Septic Tank/Pump Chamber Capacity 1500 Gallons

Number of Bedroom 4

BLDG. PERMIT SIGNED

AND RETURNED 7/18/96

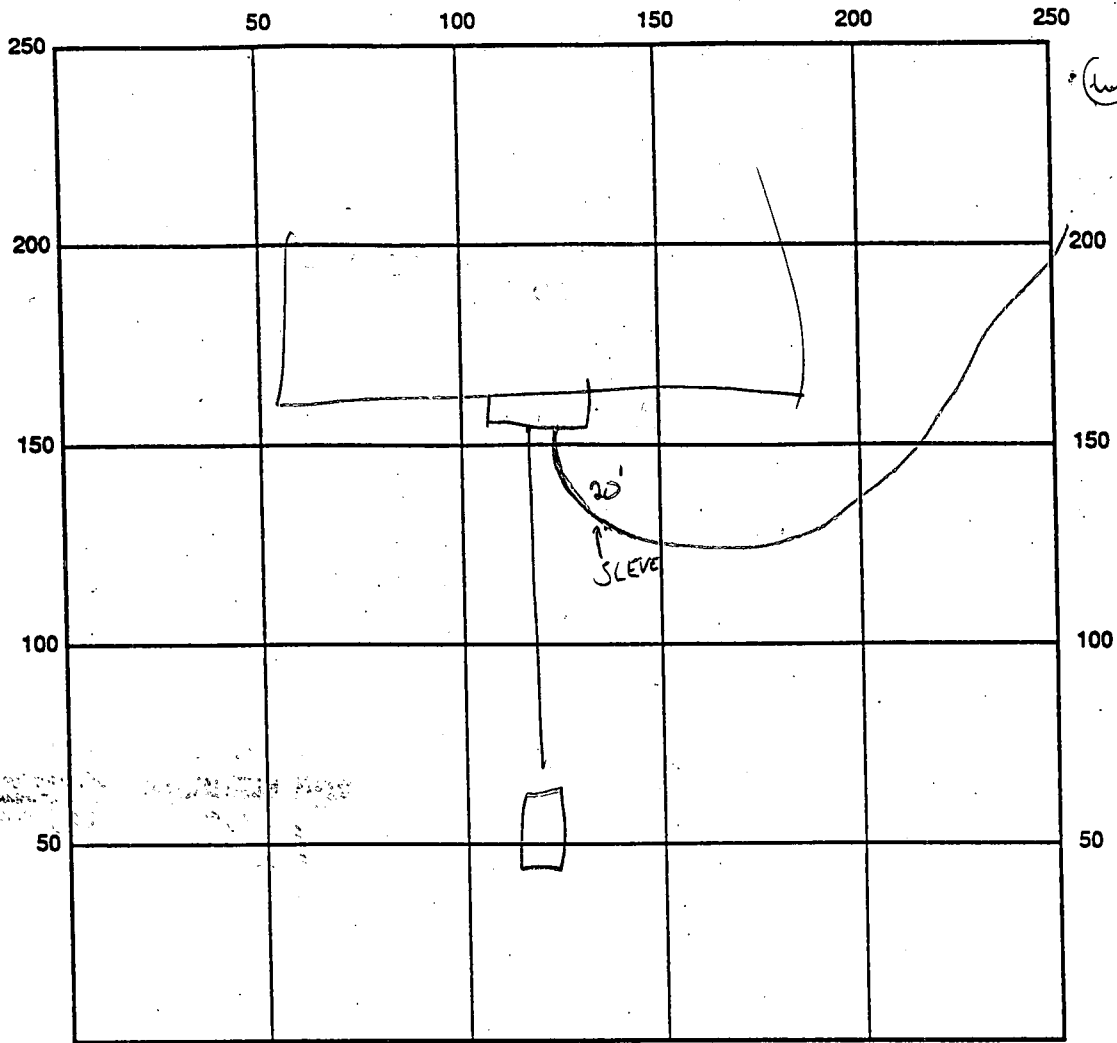
Serial # B10100949
SFD

- 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 portion of the septic installation permit is strictly limited to authorization of the individual pump in the pump pit with associated piping and electrical controls, and installation of the individual house sewer line. Location as per the signed building permit site plan, copy attached.
- Contact Health Department for inspection before covering the installation.
- For the pump test 48 hour advance notice of inspection is required. Where adequate notice has been provided, installation may proceed to completion one-half hour after the scheduled inspection time.

P
57
09
94A

Plans Approved By: _____

Date: _____



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
 CHARLTON CT.

SEPTIC TANK LEVEL _____ CLEANOUTS _____

REMARKS: 10-2-96 LINE OK AT HOUSE NEEDS TANK CONN.
 Final best already cover - contractor said NPM have a K E cover. R/P 11/25/96

DATE SYSTEM APPROVED _____ INSPECTOR _____

C1- 2730

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 PRINT OR TYPE

COUNTY NUMBER 13-

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED 07/29/6

Depth of Well 500 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" H0-94-0535

OWNER Winchester Homes STREET OR RFD Chardon Court TOWN Highland SUBDIVISION Ashleigh Knolls SECTION LOT 104

WELL LOG table with columns for DESCRIPTION, FEET (FROM, TO), and check if water bearing. Includes entries for Top Soil, Sand Silt, Clay gravel, Mica, Flint, Mica, Flint, Mica.

GROUTING RECORD: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL (CM), CEMENT (CM), BENTONITE CLAY (BC), NO. OF BAGS (60), NO. OF POUNDS (6600), DEPTH OF GROUT SEAL (87 ft).

CASING RECORD: casing types insert appropriate code below (ST, CO, PL, OT).

MAIN CASING TYPE: Nominal diameter top (main) casing (6 inch), Total depth of main casing (150 feet).

OTHER CASING (if used): diameter inch, depth (feet) from to.

SCREEN RECORD: screen type or open hole insert appropriate code below (ST, BR, HO, PL, OT).

WELL HYDROFRACTURED (Y)

CIRCLE APPROPRIATE LETTER: A (well abandoned and sealed), 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...

TYPE (MWD/MSD/MGD) 40, DRILLERS LIC. NO. 40, DRILLERS SIGNATURE (George F. Eustenbury), LIC. NO. 501, SITE SUPERVISOR SIGNATURE (Charles P. Teller).

DEPTH (nearest ft.) table with rows for casing height and slot size of screen.

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

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER): TELESCOPE CASING, LOG INDICATOR, OTHER DATA.

PUMPING TEST: HOURS PUMPED (3), PUMPING RATE (6.0 gal. per min.), METHOD USED TO MEASURE PUMPING RATE (Bucket), WATER LEVEL (15 ft), BEFORE PUMPING (195 ft), WHEN PUMPING (195 ft), TYPE OF PUMP USED (S - submersible).

PUMP INSTALLED: DRILLER WILL INSTALL PUMP (NO), TYPE OF PUMP INSTALLED PLACE (S), CAPACITY: GALLONS PER MINUTE, PUMP HORSE POWER, PUMP COLUMN LENGTH (43 ft), CASING HEIGHT (+ above, - below).

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). Includes hand-drawn diagram of well location on a lot with dimensions 120' and 50'.

10-2-96
WELL UNDER AT
HOUSE - UNDER WATER
AT WELL - NEEDS
RE-INSPECTION

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

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation Replacement
Name of Installer Van Sant Pibg + Htg Receipt # _____ Date _____ Telephone 839-0444
License Number 1467 Certified Well Pump Installer _____ Well Driller _____ Registered Plumber
Name of Property Owner Winchester Homes Telephone 670-1010
Subdivision Antelope Knolls Lot # 104 Well Tag # 24-2535
Site Address 7112 Chardon Ct
Clarksville, MD 21029

Pump
1. Type
a. Deep well jet _____
b. Shallow well jet _____
c. Submersible
2. Make Grundfos
3. Model # _____
4. Capacity _____ 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 _____
2. RPM _____
3. Voltage _____
a. 110 _____
b. 220
Pitless Adapter
1. Make Campbell
2. Model # Blox
3. Depth 48"

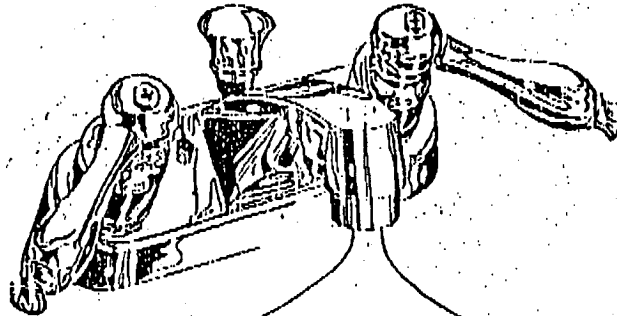
Tank
1. Capacity 100
2. Pressure relief valve?
Piping
1. Type P.S.
2. Size 1"
3. NSF and/or BOCA Code approved
4. Depth of supply line 48"
Well data
1. Depth _____ ft.
2. Yield _____ GPM
3. Static water level _____ ft.
4. Will water supply be disinfected by installer?

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: Harold Van Sant
Date: 8.27.96

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

HOWARD COUNTY
BUREAU OF UTILITIES
8250 OLD MONTGOMERY ROAD
COLUMBIA, MD 21045
(410) 313-4900



**FAX
COVER
SHEET**

FAX # (410) 313-4919

Number of Pages: 1
(Including this sheet)

DATE: 12/16/96

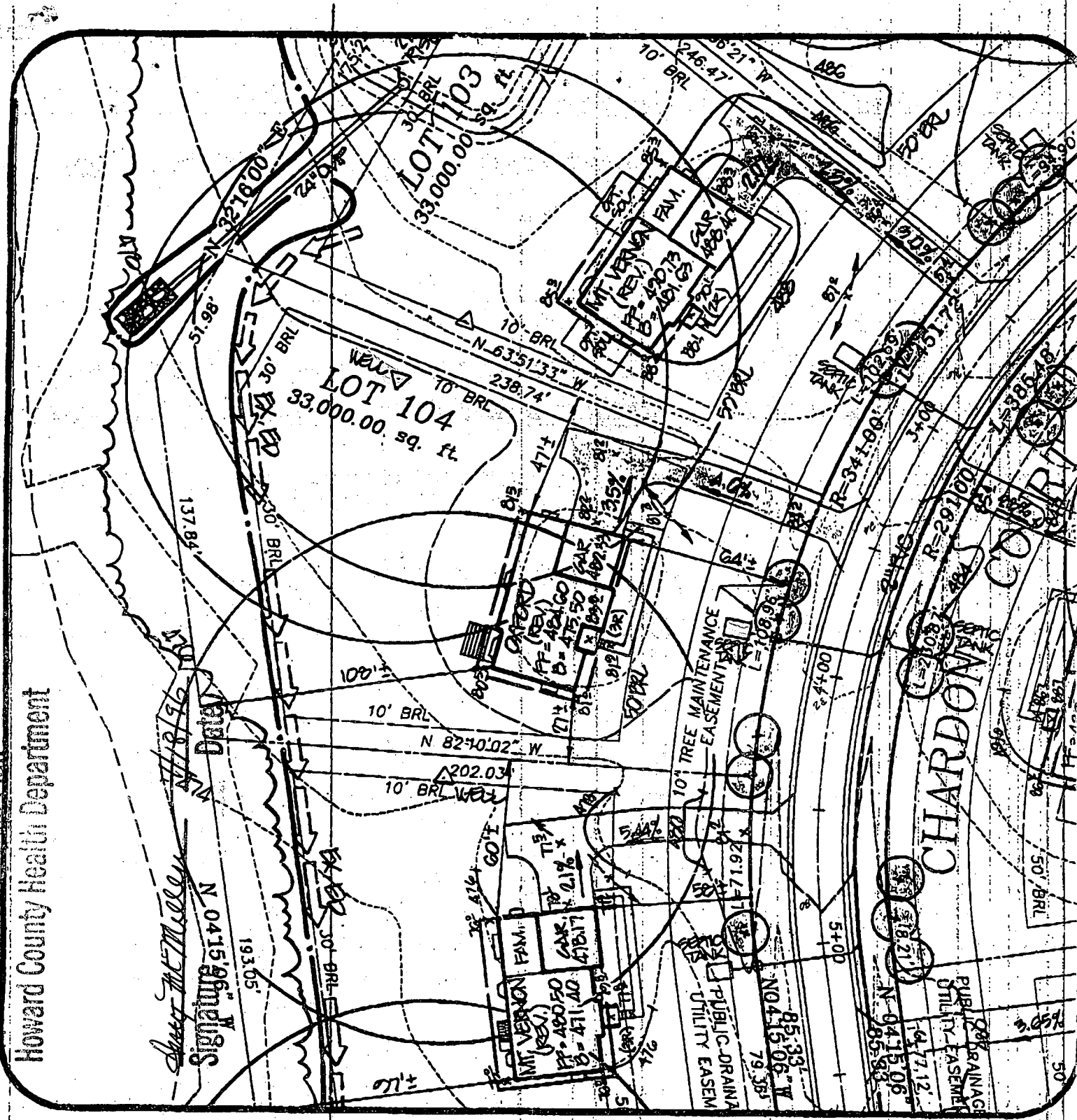
TO: Craig Williams

FAX #: 2648

FROM: Jim Miller

COMMENTS: Pump test for Lot 104 712 Chardon Ct
+ Lot 109 7121 Chardon Ct are OK

Approved Sentic System Plan
Howard County Health Department



SHEET 1 OF 2

7112 Chardon Cour

Ashleigh Knolls
Lot 104

DATE:
7/1/96

PROJECT NO:
94027.72

DRAWN BY:
TJP

SCALE:
1" = 50'

R.M. MOCHI GROUP, P.C.

3300 N. Ridge Road, Suite 235
Elicott City, MD 21043-3305

(410) 461-0079
Fax: (410) 750-6340

	FF ELEV.	INV. OUT OF HOUSE	EXIST. GROUND AT SEPTIC TANK	PROP. GROUND AT SEPTIC TANK	INV. INTO SEPTIC TANK
LOT 84					
LOT 85					
LOT 86					
LOT 87					
LOT 88					
LOT 89					
LOT 90					
LOT 91					
LOT 92					
LOT 93					
LOT 94					
LOT 95					
LOT 96					
LOT 97					
LOT 98					
LOT 99	500.20	494.20	497.94	494.40	490.00
LOT 100					
LOT 101					
LOT 102					
LOT 103					
LOT 104	484.60	478.60	481.31	481.70	476.60
LOT 105	480.50	474.50	478.41	479.00	471.30
LOT 106					
LOT 107					
LOT 108					
LOT 109					

SHEET 2 OF 2

7112 Chardon Court

Ashleigh Knolls
Lot 104

DATE: 7/1/96

DRAWN BY: TJP

PROJECT NO.: 94027.22

SCALE: N/A

R.M. MOCHI GROUP, P.C.

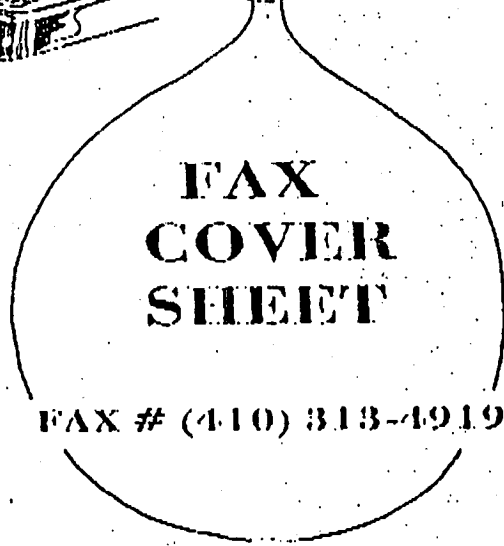
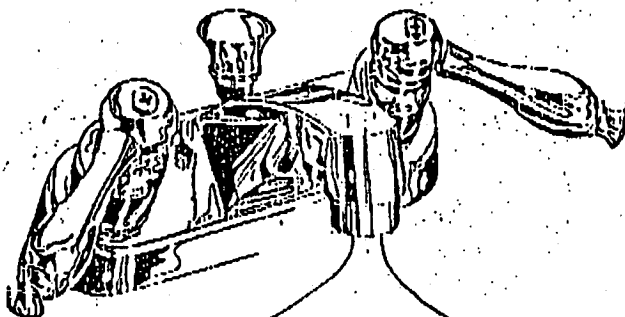
CIVIL ENGINEERS
LAND SURVEYORS

PLANNING
ENVIRONMENTAL

3300 N. Ridge Road, Suite 235
Ellicott City, MD 21043-3305

(410) 461-0079
Fax: (410) 750-8340

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