



HOWARD COUNTY HEALTH DEPARTMENT

P-57334

DATE
10 / 17 / 96

Received From Winchester Homes, Inc.

6305 Ivy Lane, Suite 800, Greenbelt, MD 20770

CASH
 CHECK
NO.
4088

For Septic permits Application

Ashleigh Knolls - Lot 102 - Chardon Court

Ashleigh Knolls - Lot 103 - Chardon Court

Three hundred and sixty and $\frac{00}{100}$ Dollars

\$ 360 | 00

Received By Vasanthia Radhakrishna

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 57334B

A _____

DISTRICT 5th

DATE 10/17/96

DATE SYSTEM APPROVED 3/10/99

INSPECTOR *[Signature]*

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXXXX~~ 313-2640

Tax ID #

05-420490

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 102 ROAD 7104 Chardon Court

PROPERTY OWNER Winchester Homes, Inc. PHONE: (301) 474-4411

6305 Ivy Lane, Suite 800

ADDRESS Greenbelt, Maryland 20770

Septic Tank/Pump Chamber Capacity: 1500 Gallons

Number of Bedrooms: 4

- 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.

10/16/96 PJP

BLDG. PERMIT SIGNED

AND RETURNED

11/20/96

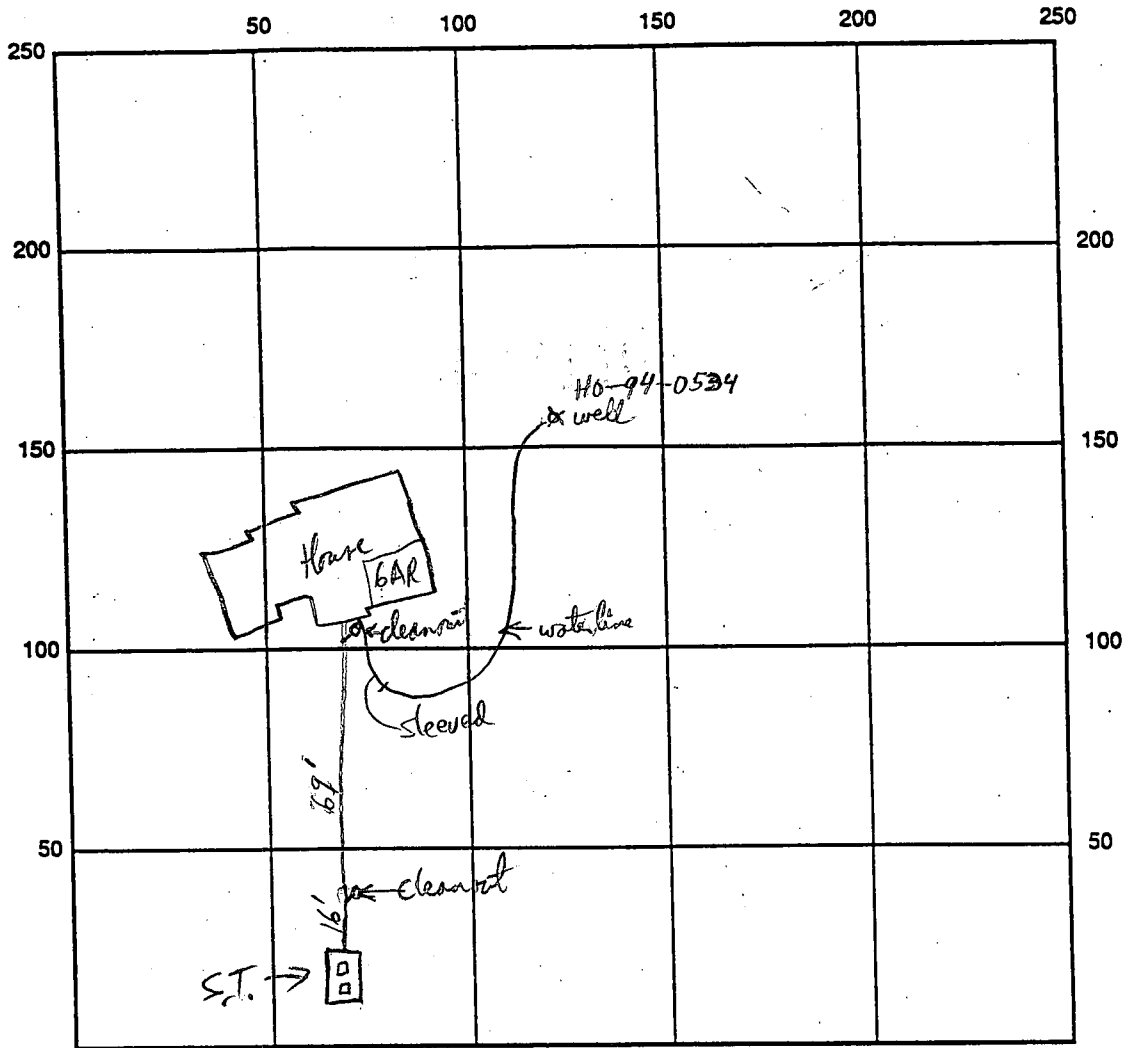
*Seal # 102610
SFD-4B*

P
57
33
4B

Plans Approved By: _____

Date: _____

*11/27/96
House Connection PJP
3/6/99
PLUMB TEST
12-3-96
WPI & C.O.
pm*



Chardon Ct INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL _____ CLEANOUTS _____

REMARKS: House Connect - Needs a cleanout between house & S.T. (17' away)

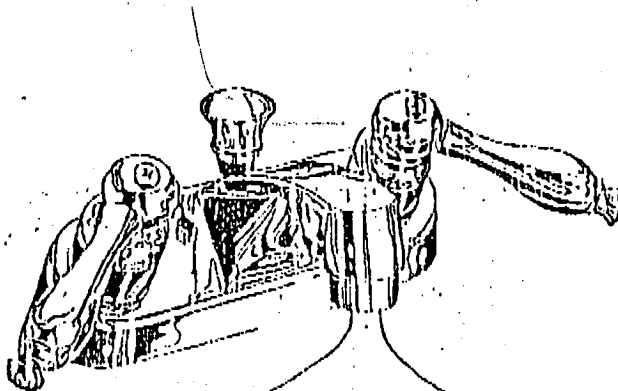
Minimum length ≥ 70 ft without a cleanout R/P 11/29/96

per foot's scheduling error, I arrived @ site @ 2:15pm & then then on way, misdirected - see J. Miller's
used approval letter 3/6/97 OK per J. Miller 3/10/97 R/P

WPF - fit less adapter + waterline OK at 3 1/2 - 4 ft R/P 12/3/95

DATE SYSTEM APPROVED 3/10/97 INSPECTOR [Signature]

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: 3/6/97 ran
TO: Craig Williams
FAX #: 2648
FROM: Jim Miller

COMMENTS:
Pump Test for lot 102 7104 Chardon Ct
lot 103 7108 Chardon Ct
are OK for U+D

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 # 0
 Date 11/4/96

Name of Installer Van Sant Plog & Hlg

Telephone 829-0444

License Number 1467
 Certified Well Pump Installer Well Driller Registered Plumber

Name of Property Owner Winchester Homes Telephone 670-1010
 Subdivision Ashleigh Knoll Lot # 102 Well Tag # 710-94-0534
 Site Address 7104 Chardon Ct
Clarksville

Pump
 1. Type
 a. Deep well jet
 b. Shallow well jet
 c. Submersible
 2. Make Goulds
 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 # B10K
 3. Depth 48"

Tank
 1. Capacity V-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?

*12/3/96 Pitless Adapter
 with line OK @ 3 1/2 - 4 ft
 pp.*

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: [Signature]

Date: 10/31/96

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

C 1 2732

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

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

DATE RECEIVED grid

DATE WELL COMPLETED: 08 26 96

DEPTH OF WELL: 300 (TO NEAREST FOOT)

PERMIT NO.: HO-94-0534

OWNER Winchester Homes last name Chardon Court first name TOWN Highland SUBDIVISION Ashleigh Knolls SECTION LOT 102

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: top soil, Shale, White Marble, Gray Mica, red marble.

GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box)

TYPE OF GROUTING MATERIAL (Circle one) CEMENT CM BENTONITE CLAY BC NO. OF BAGS 48 NO. OF POUNDS 4800 GALLONS OF WATER 240 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 68 ft.

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 6 177

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

SCREEN RECORD screen type or open hole insert appropriate code below 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, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

TYPE: MWD/MSD/MGD 40 DRILLERS LIC. NO. Geny F. Esterday DRILLERS SIGNATURE LIC. NO. MWD 481 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

DEPTH (nearest ft.) HO 175 300 ACHSCREN 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH) 56 60

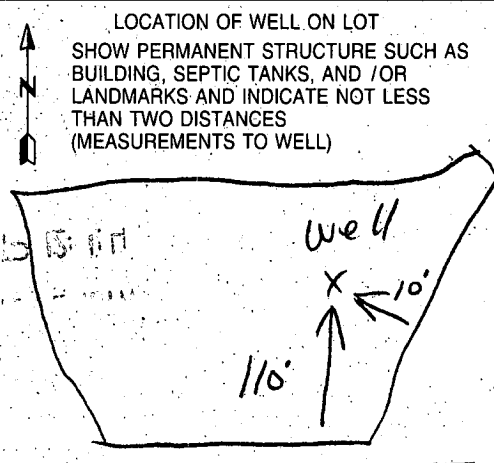
GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q 74 75 76 TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3

PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 10.0 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 10 ft. WHEN PUMPING 32 ft. TYPE OF PUMP USED (for test) A air P piston T turbine C centrifugal R rotary O other (describe below) J jet S submersible

PUMP INSTALLED DRILLER WILL INSTALL 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) PUMP HORSE POWER PUMP COLUMN LENGTH (nearest ft.) CASING HEIGHT (circle appropriate box and enter casing height) above below LAND SURFACE (nearest foot)



APPLICATION

HOWARD COUNTY

PERMIT APPLICATION

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

SERIAL NUMBER
100102610

G-3338

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

7104 Chardon Court
Clarksville, Md. 21029

26718

GRADING/SEDIMENT CONTROL YES NO

SDP #

DESCRIPTION OF WORK AUTHORIZED

House type is Oxford:
2 story, full bsmt., 9 R, 3 PB, 1 HL
garage, 4 BR & opt. FP

LOT NO.	PARCEL NO.	SEC.	AREA	BLOCK NO.	LIBER	FOLIO
102	174	2	2	7		
SUB DIVISION		ZONE	ZONE MAP	ELEC. DIST.	CENSUS TR.	
Ashleigh Knolls		RR	41	5	6051.02	

OWNER NAME AND ADDRESS
Winchester Homes, Inc.
6305 Ivy Ln., Suite 800
Greenbelt, Md. 20770 (301) 474-4411

PHONE NO.

OCCUPANT'S NAME AND ADDRESS
PHONE NO.

ARCHITECT OR ENGINEER'S NAME AND ADDRESS
R.M. Mochi Group
330 N. Ridge Rd., Suite 235
Ellicott City, Md. 21043 (410) 461-0079

PHONE NO.

CONTRACTOR'S NAME AND ADDRESS
Winchester Homes, Inc.
Same as above

PHONE NO.

EXISTING USE	PROPOSED USE
Vacant	SFD

EST. CONSTRUCTION COST	LICENSE NUMBER	PERMIT FEE
\$160,000	158-14160	

SIZE OF BLDG.	FRONT	DEPTH	HEIGHT
	1807	18870	10'
	1803	18030	10'
	60'	38'	10
TYPE OF BLDG.	AREA	VOLUME	ROOF
B. ROOMS	1987	19870	Asp Gable
ROOMS	1393	13930	
BATHS			
FIREPLACES	1492	14920	
FOOTINGS		FOUNDATION	S. WALLS
16" x 8"		8" concrete	frm
			siding

UTILITIES					
WATERWELL	SEWER/SEPTIC	GAS	ELECTRICITY	TYPE OF HEAT	AC
		X	X	Gas	X

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
Permit Administrator 10/24/96

TITLE DATE

FOR OFFICE USE ONLY

DISTANCE 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 # _____

FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING		
SHA		
SEDIMENT/GRADING		
BUILDING OFFICIAL		
WATER & SEWER		
HEALTH DEPT.	10/22/96	Cywill
FIRE PROTECTION		
STORM WATER MGM		

Check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

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.

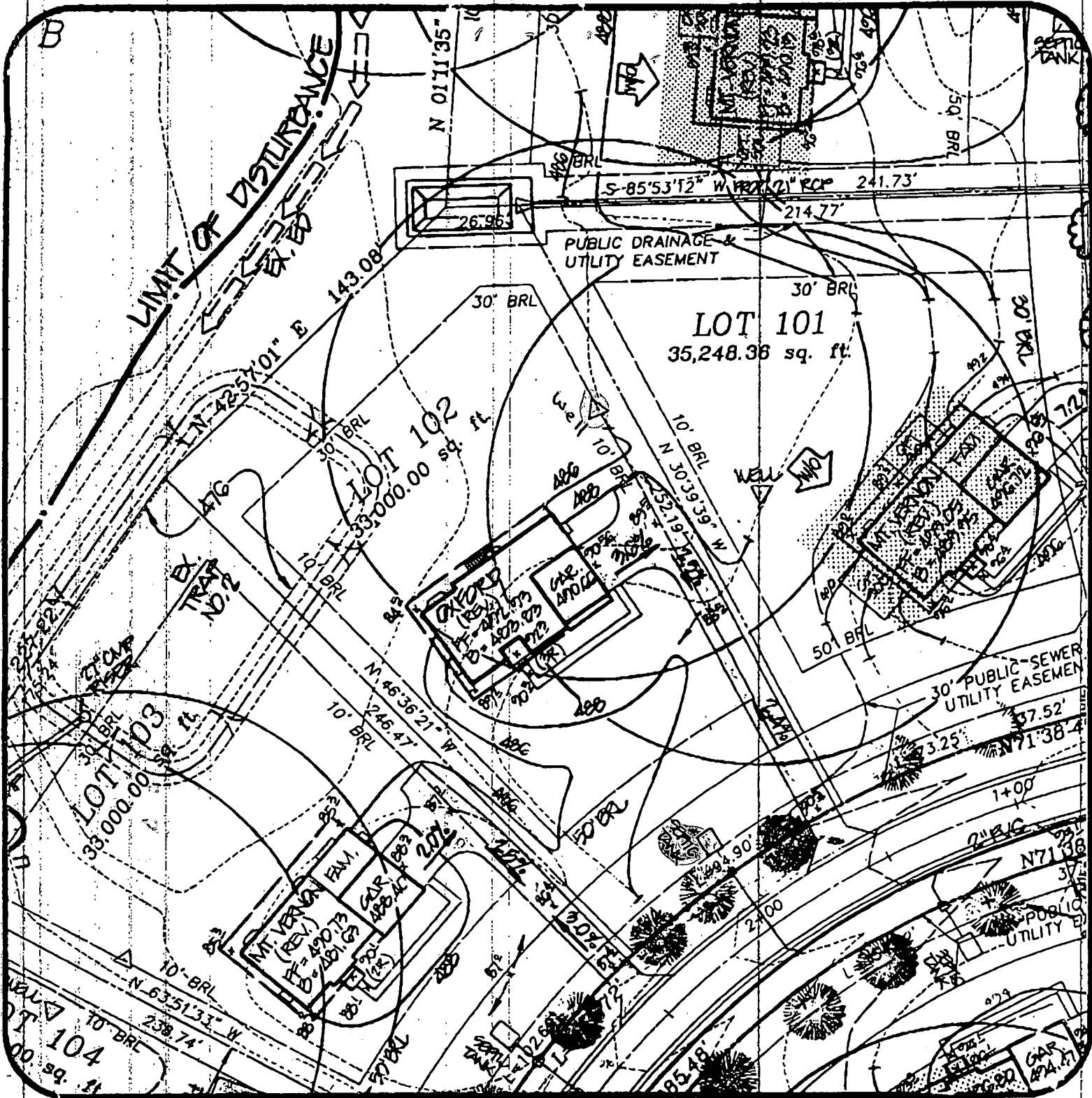
IMPORTANT: PLEASE SHOW ZIP CODES AND AREA CODES WHEREVER REQUIRED.

LP-69-591 #4078

APPROVED _____ DATE _____

Distribution of Copies:
White - Building Official
Green - Planning & Zoning

Yellow - Engineering
Pink - Health Dept.
Gold - S.H.A.



SHEET 1 OF 2

7104 GARDON COURT

Approved Septic System Plan
Howard County Health Department

Ashleigh Knolls
 Lot 102

B 00102610 (4BR)
 SHARED SEPTIC SYSTEM
 INDIVIDUAL PERMIT PAID
 P57334B

R.M. MOCHI GROUP, P.C.

CIVIL ENGINEERS
 LAND SURVEYORS
 PLANNERS
 ENVIRONMENTAL

DATE: 10/2/96

PROJECT NO.: 24071-22

DRAWN BY: TJP

SCALE: 1" = 50'

Craig Wil
 Signature 10/22/96

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

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

Date

	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	474.20	477.24	474.40	470.00
LOT 100					
LOT 101					
LOT 102	472.73	456.73	459.15	457.00	454.20
LOT 103	470.73	454.73	456.03	456.10	457.00
LOT 104	484.60	470.60	481.31	481.70	476.60
LOT 105	480.50	474.50	479.11	477.00	471.30
LOT 106					
LOT 107					
LOT 108					
LOT 109	485.00	479.00	476.09	477.10	475.70
LOT 110	479.40	463.40	462.67	463.60	460.00
LOT 111					
LOT 112					
LOT 126					
LOT 127	501.00	475.00	473.01	474.10	470.00
LOT 128					

SHEET 2 OF 2

Ashleigh Knolls
Lot 102

DATE: 10/9/96

PROJECT NO.: 94027.22

DRAWN BY: TJP

SCALE: 1" = 50'

R.M. MOCHI GROUP, P.C.

CIVIL ENGINEERS
AND SURVEYORS

PLANNERS
ENVIRONMENTAL

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

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

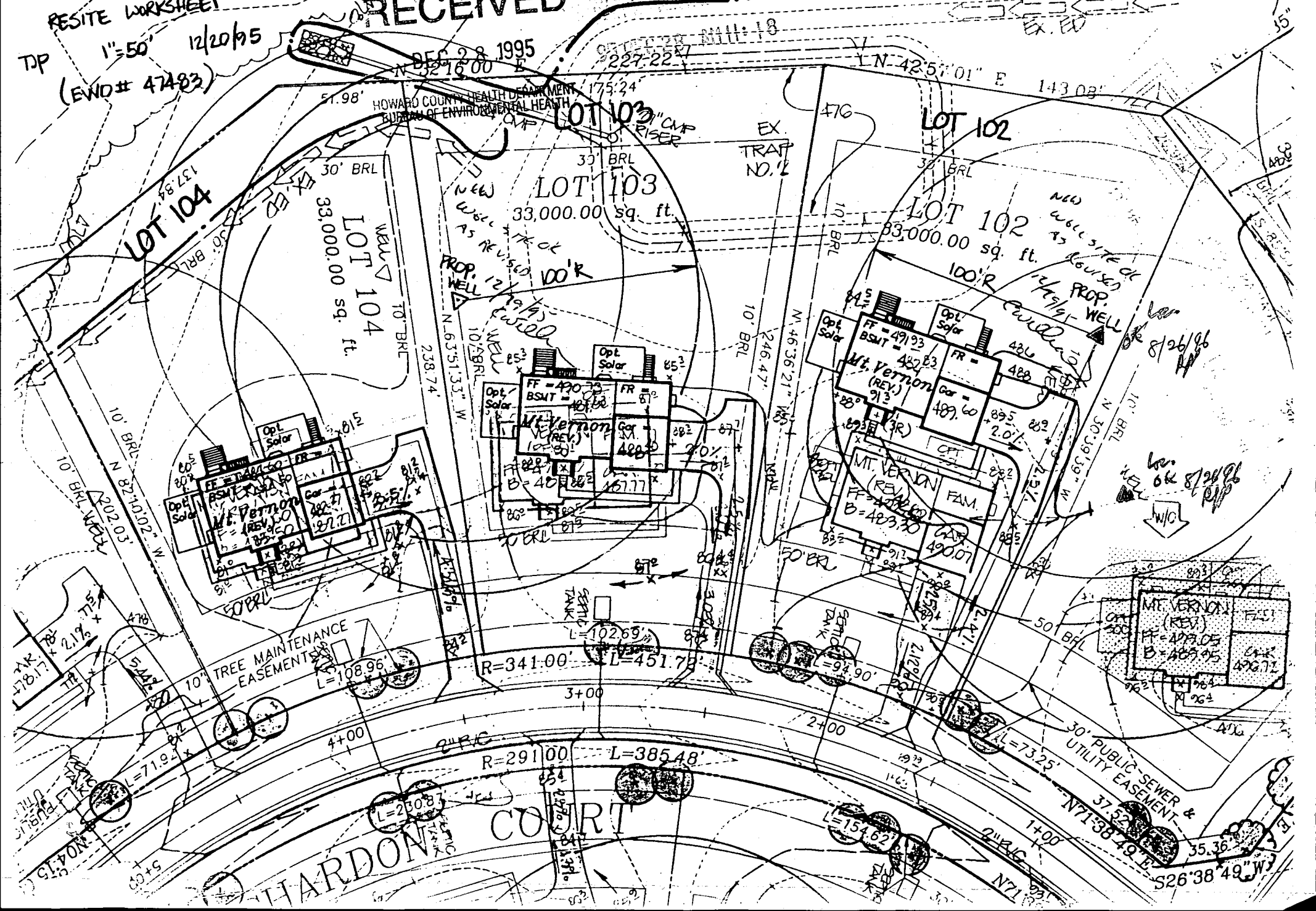
ASHLEIGH KNOLLS

LOTS 102-104
RESITE WORKSHEET

TPP
1"=50'
12/20/95
(EWD# 47483)

RECEIVED

LIMIT OF DISTURBANCE



DEC 28 1995
3216 00

227-227
N. 42° 57' 01" E 143.03'

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH

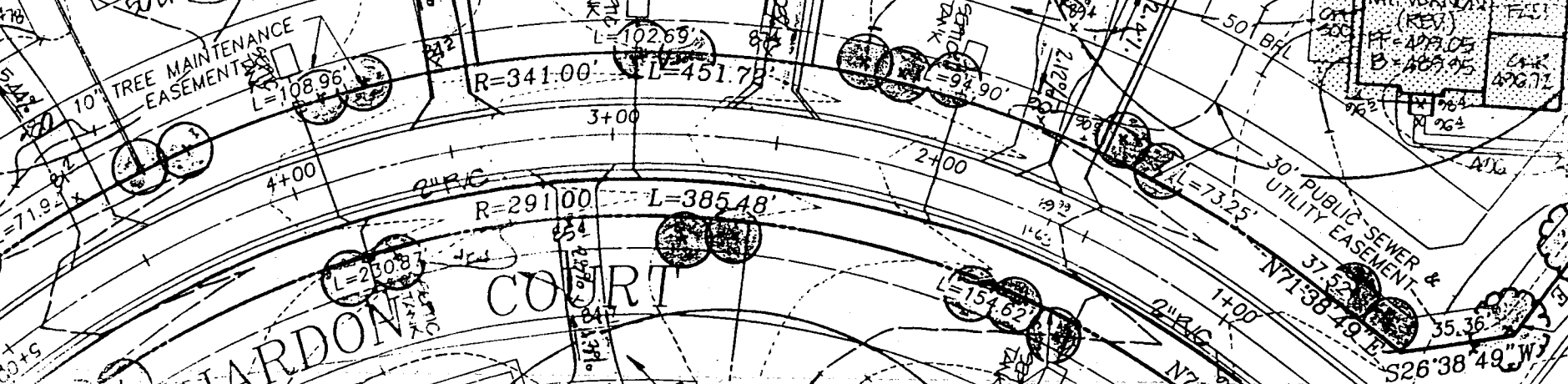
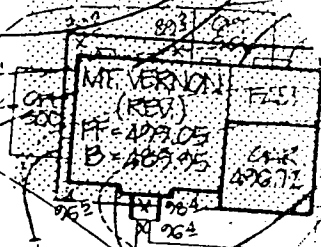
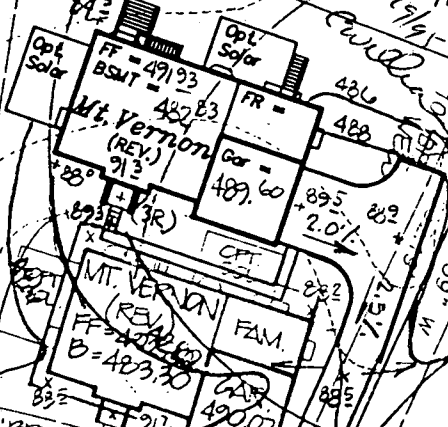
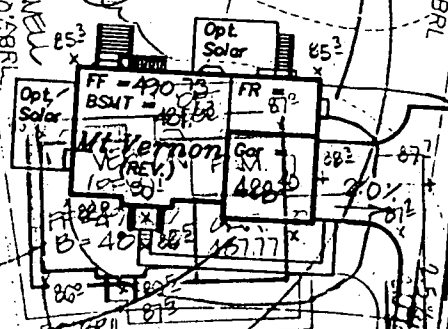
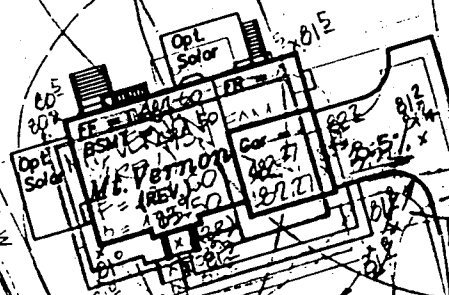
LOT 103
33' BRL
NEW WELL AS REVISED 100'R

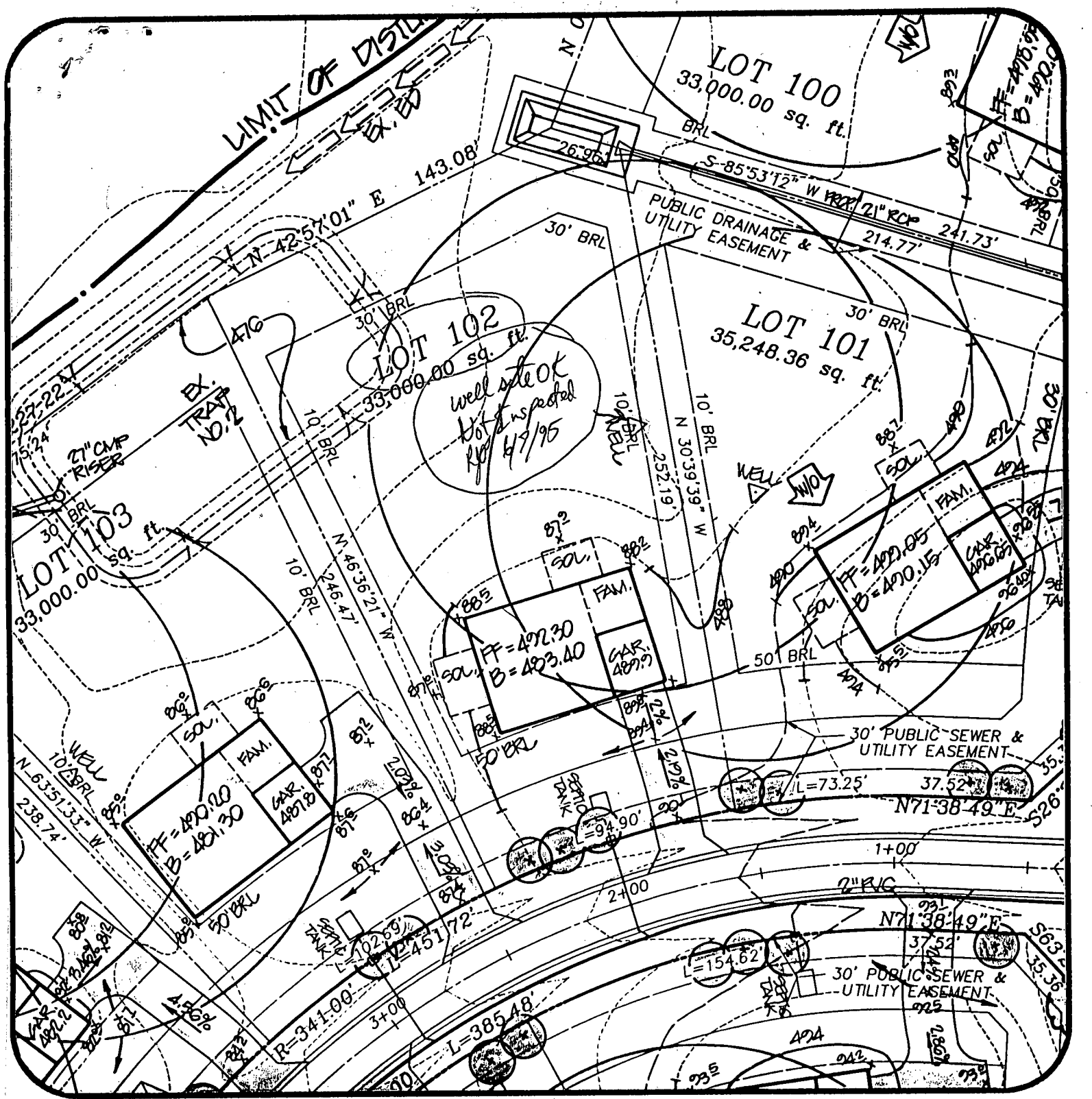
LOT 103
33,000.00 sq. ft.

LOT 102
30' BRL

LOT 102
83,000.00 sq. ft.

LOT 104
33,000.00 sq. ft.





Ashleigh Knolls
Lot 102

DATE: 5/2/95	PROJECT NO.: 82027.01
DRAWN BY: TJP	SCALE: 1" = 50'

R.M. MOCHI GROUP, P.C.
 CIVIL ENGINEERS
 LAND SURVEYORS
 PLANNERS
 ENVIRONMENTAL

3300 N. Ridge Road, Suite 235 (410) 461-0079
 Ellicott City, MD 21043-3305 Fax: (410) 750-6340

B 1 **9097** SEQUENCE NO. (DP USE ONLY) STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL STATE PERMIT NUMBER **HO-94-0534**
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS) please print or type ⁷⁰ fill in this form completely ⁷⁹

OWNER INFORMATION
 Date Received (APA) **05/17/95**
Winchester Homes
 15 Last Name 13 Owner First Name 34
6305 Ivy Lane
 36 Street or RFD 55
Greenbelt **MD20770**
 57 Town 70 State 72 Zip 76

DRILLER INFORMATION MSD/MGD/MWD
George F. Easterday **40**
 Driller's Name 77 License No. 80
L. Franklin Easterday, Inc.
 Firm Name
9265 Brown Church Rd., MT. Airy, Md. 21771
 Address
George F Easterday **5-20-95**
 Signature Date

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

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 **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 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) 41 _____ 52

Not to be filled in by driller (OEP USE ONLY)
 APPROX. PERMIT NUMBER _____ GAP _____
 54 63

FORCE **KA** WRITE INITIALS IN BOX PERMIT No. **HO-94-0534**
 67 68 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS NOTE = APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

B 3 **LOCATION OF WELL**
Howard
 8 COUNTY 21
Ashleigh Knolls
 23 SUBDIVISION 42
 SECTION _____ LOT **102**
 44 46 48 50
Highland
 52 NEAREST TOWN 71
 MILES FROM TOWN (enter 0 if in town) _____ MI
 73 76 77 78

B 4 **DIRECTION OF WELL FROM TOWN** (CIRCLE BOX)
 N W N E E S S W S E
 8-9 8-9 8-9 8-9
 TOWN
 8-9 8-9
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 NORTH N
 WEST W EAST E
 SOUTH S
 DISTANCE FROM ROAD **100**
 34 37
 ENTER FT OR MI **FT**
 38 39
 TAX MAP: **40** BLK: **12** PARCEL **174**

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
Howard **13-**
 COUNTY NAME COUNTY NO.
 STATE SIGNATURE _____ INSERT S _____ 41
 DATE ISSUED **060795** **Ronald P. Pinsky** **6/7/96**
 43 48 CO SIGNATURE EXP/DATE
 NORTH GRID **487000** EAST GRID **0817000**
 50 55 57 63

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 **817**
 N **487**
 000 000

