

Howard County Health Department

To: RG, LOT 126

BUILDER CALLED TO
Q WHAT WAS HOLDING
UP HIS OCCUPANCY?

I TOLD HIM —
NEEDS WATER SAMPLE

BUT I FORGOT TO:
TELL HIM IT ALSO
NEEDS SEPTIC PUMP
APPROVAL IE RELEASE

From: _____
BY BUREAU OF UTILITIES,

Date: _____

HD-170



(CW)

6/4/97

2-20-97
MORNING

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 57642B

A _____

DISTRICT _____

DATE 01/17/97

DATE SYSTEM APPROVED _____

INSPECTOR _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
313-2640

TAXED #
05-420768
INDEXED

Winchester Homes, Inc. IS PERMITTED TO INSTALL ALTER _____

ADDRESS 6305 Ivy Lane, Suite 800, Greenbelt, Maryland 20770 PHONE (410) 489-1202

SUBDIVISION Ashleigh Knolls LOT 126 ROAD 7290 Fawn Crossing Way

PROPERTY OWNER Winchester Homes, Inc.

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

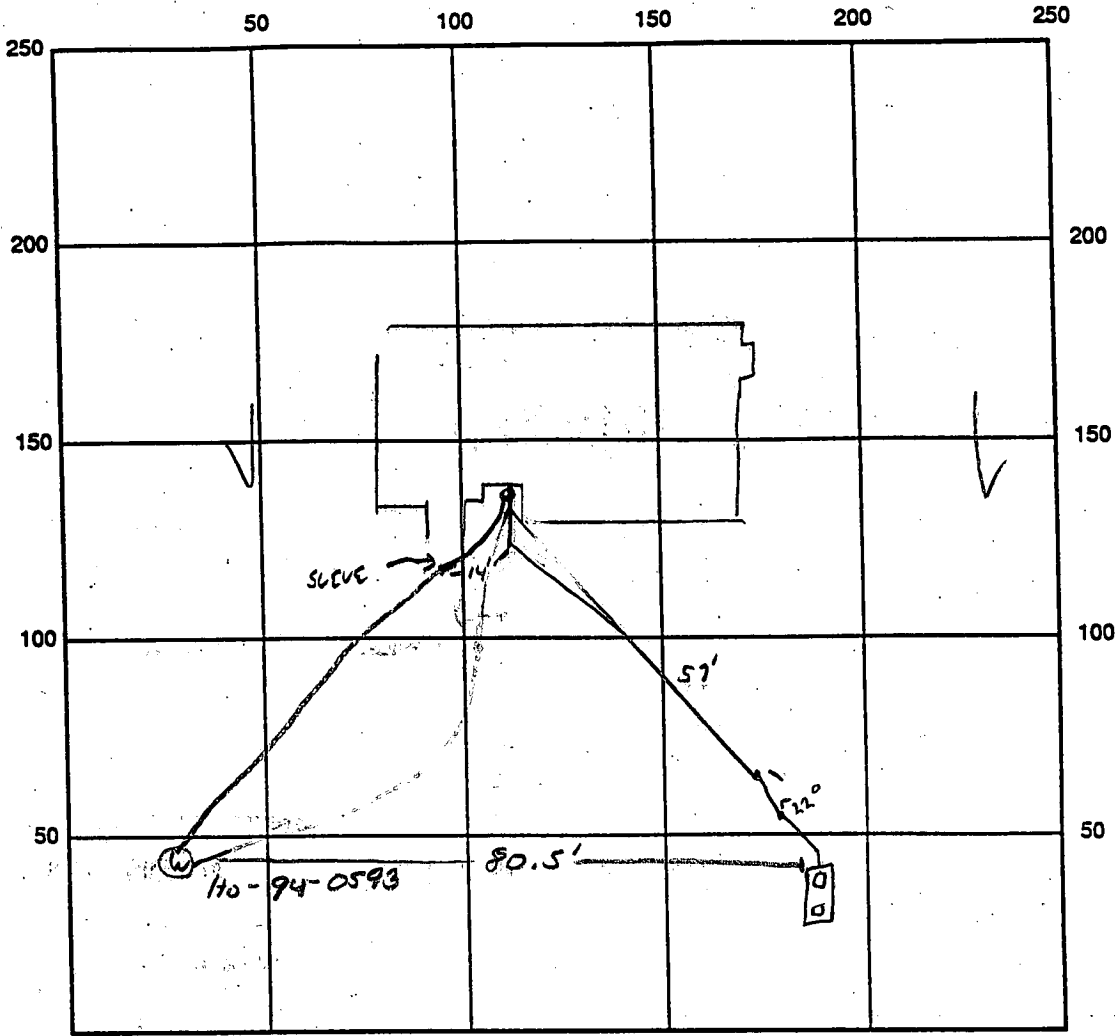
LOG PERMIT SIGNED AND RETURNED
PERMIT SIGNED AND RETURNED 1/23/97
Serial # B0105685
SFD-4B

- 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.

57642B

Plans Approved By: Richard Willey

Date: 1/23/97



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
 ← FAWN CROSSING DRIVE →

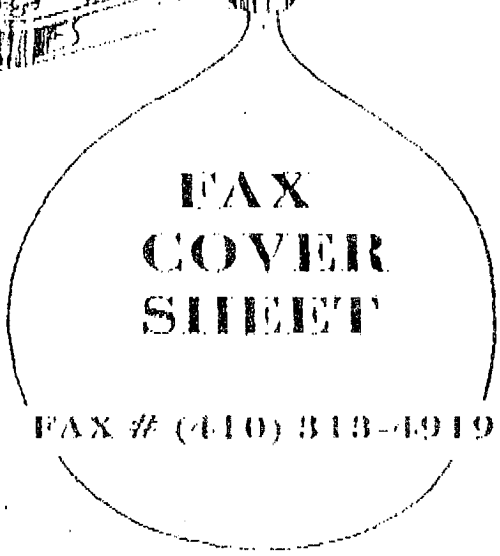
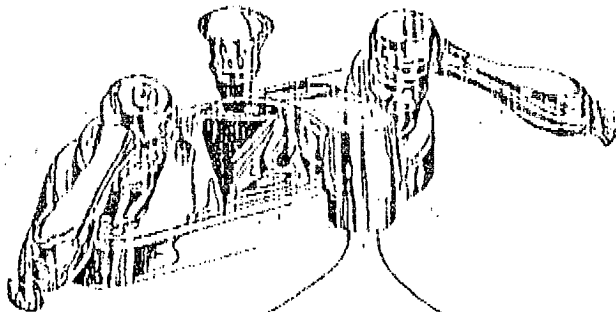
SEPTIC TANK LEVEL _____ CLEANOUTS _____

REMARKS: 2/20/97 SEPTIC TANK TO HOUSE CONNECTION OK TO COVER. *JL*
 EXCEPTION MADE TO 100' SEPERATION BETWEEN WELL
 AND SEPTIC PER CW ACCORDING TO R.P. *JL*

DATE SYSTEM APPROVED _____ INSPECTOR _____



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

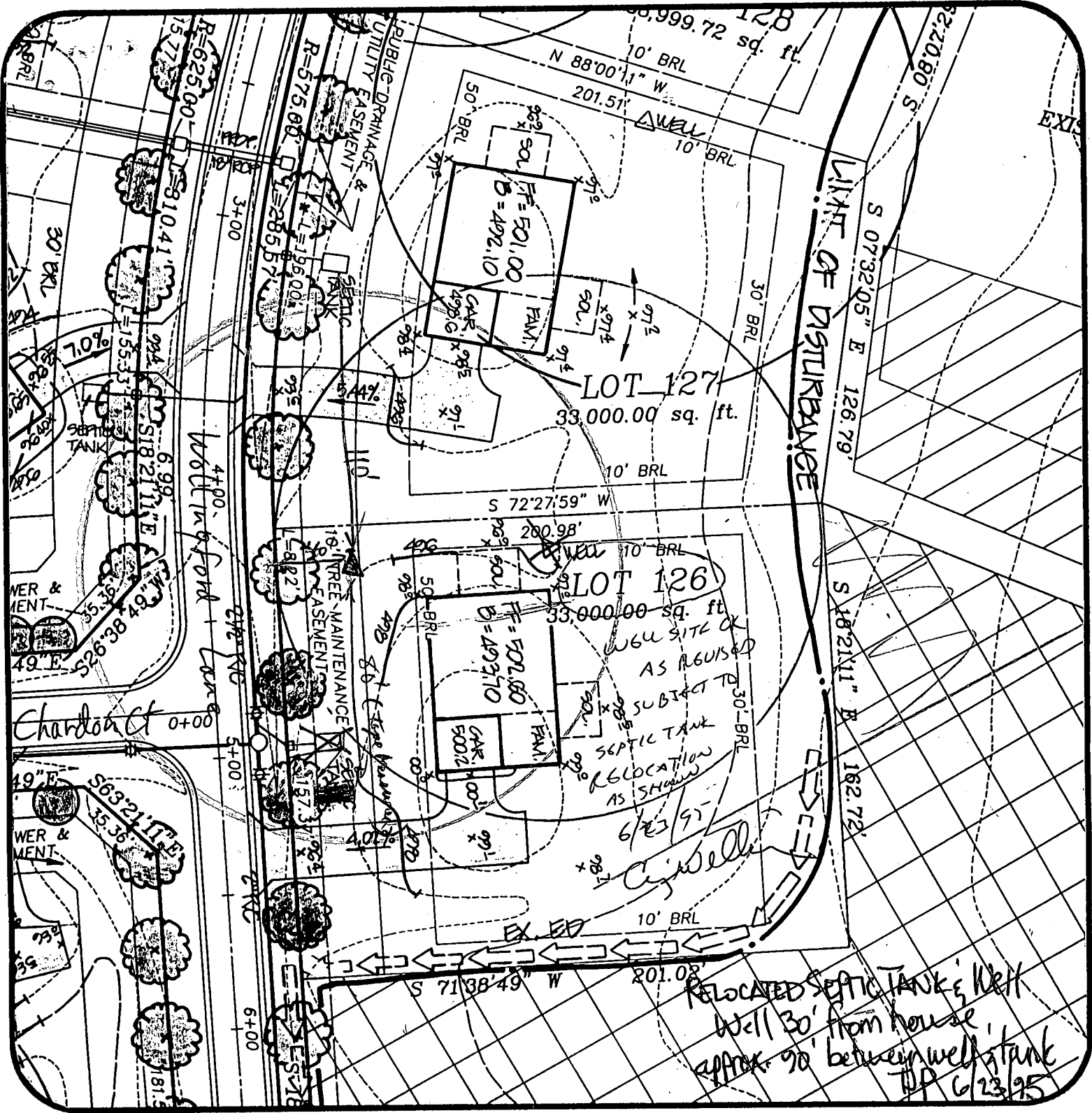


**FAX
COVER
SHEET**

FAX # (410) 313-4919

Number of Pages: 1
(Including this sheet)

DATE: 6/13/97
TO: Kim
FAX #: 2648
FROM: Jim Miller
COMMENTS: Pump test for lot 126
7209 Fawn Crossing is OK for U&O
Ashleigh Knolls



Ashleigh Knolls
Lot 126

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
Ellicott City, MD 21043-3305

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

RELOCATED SEPTIC TANK & WELL
Well 30' from house
approx. 90' between well & tank
6/23/95

2-20-97
 NO RINGS
 GRIND WIRE
 TO BE ATTACHED
 TO CASING OR WIRE
 TO COVER WELL

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 # _____ Date _____
 Name of Installer Van Sant Pkg. Htg Telephone 829-0444
 License Number 1467
 Certified Well Pump Installer _____ Well Driller _____ Registered Plumber
 Name of Property Owner Winchester Homes Telephone 670-1010
 Subdivision Shelburne Knolls Lot # 106 Well Tag # _____
 Site Address 209 Fawn Crossing Dr

Pump Motor Pitless Adapter
 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 _____
 1. Horsepower _____
 2. RPM _____
 3. Voltage _____
 a. 110 _____
 b. 220
 1. Make Gambell
 2. Model # 1510X
 3. Depth _____

Tank Piping Well data
 1. Capacity V-100
 2. Pressure relief valve?
 1. Type P.S.
 2. Size 1"
 3. NSF and/or BOCA Code approved
 4. Depth of supply line 48"
 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: Howard A. Van Sant
 Date: 2.19.97

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



HOWARD COUNTY HEALTH DEPARTMENT

PS 7642

DATE 01/17/97

Received From Winchester Homes Inc.
6305 Ivy Lane Suite 800 Gaunabett Md 20770

For Spatec System Payments (2)
Asphalt Curbs - Lot 124 -
Asphalt Curbs - Lot 130 -
Three hundred sixty and 00/100 Dollars

CASH
 CHECK
NO. 4199

\$ 340 00

Received By A Jane Reese

C1 2951

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

082296

300 (TO NEAREST FOOT)

H0-94-0593

OWNER Winchester Homes STREET OR RFD Wellingford Lane TOWN Highland SUBDIVISION Ashleigh Knolls SECTION LOT 126

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, FEET (FROM, TO), check if water bearing. Includes entries for Top soil, Sand silt, Clay, gravel, boulders, mica, Sand stone, Mica, Flint, Mica.

GROUTING RECORD

WELL HAS BEEN GROUTED (Y/N) TYPE OF GROUTING MATERIAL (Cement, Bentonite Clay) NO. OF BAGS, GALLONS OF WATER, DEPTH OF GROUT SEAL

CASING RECORD

MAIN CASING TYPE (ST, PL), Nominal diameter, Total depth of main casing

OTHER CASING (if used)

ACASING diameter inch, depth (feet) from to

SCREEN RECORD

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

NUMBER OF UNSUCCESSFUL WELLS: WELL HYDROFRACTURED (Y/N)

CIRCLE APPROPRIATE LETTER A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION"

TYPE (MWD/MSD/MGD) 40 DRILLERS LIC. NO.

DRILLERS SIGNATURE (Gerry F. Kesterling)

LIC. NO. 501

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

DEPTH (nearest ft.) grid with handwritten values 1098 and 300

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

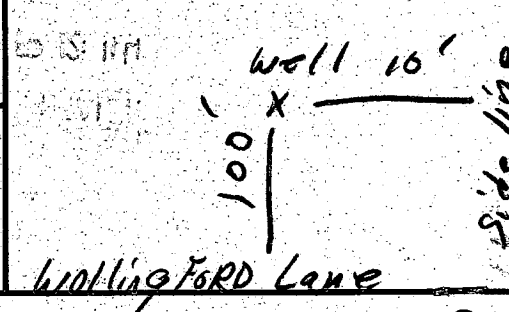
PUMPING TEST

HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 4.6 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 13 ft. WHEN PUMPING 105 ft. TYPE OF PUMP USED (for test) 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) LAND SURFACE (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)



B 1 6427 SEQUENCE NO. (MDE USE ONLY) STATE OF MARYLAND PERMIT TO DRILL WELL please print or type STATE PERMIT NUMBER H0-94-0593
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS) fill in this form completely

OWNER INFORMATION
 Date Received (APA) 05/17/95
 Winchester Homes
 6305 Ivy Homes
 Greenbelt MD 20770

DRILLER INFORMATION CIRCLE: MSD/MGD/MWD
 George F. Easterday
 L. Franklin Easterday, Inc.
 9265 Brown Church Rd., MT. Airy, Md. 21771
 George F. Easterday 5-17-95

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 INCH 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 - CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
 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 (MDE OR COUNTY USE ONLY)
 APPROX. PERMIT NUMBER _____ GAP _____
 FORCE RP WRITE INITIALS IN BOX PERMIT No. H0-94-0593

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

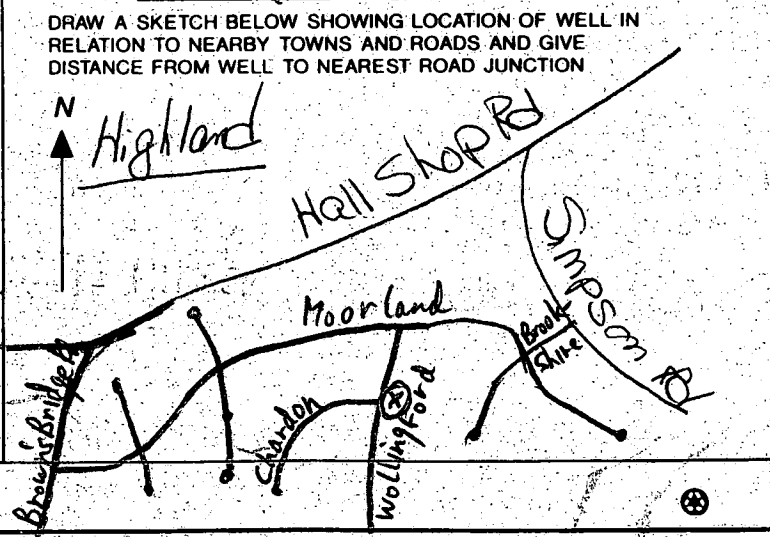
LOCATION OF WELL
 Howard
 Ashleigh Knolls
 SECTION 44 LOT 126
 Highland
 MILES FROM TOWN (enter 0 if in town) 1 MI

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

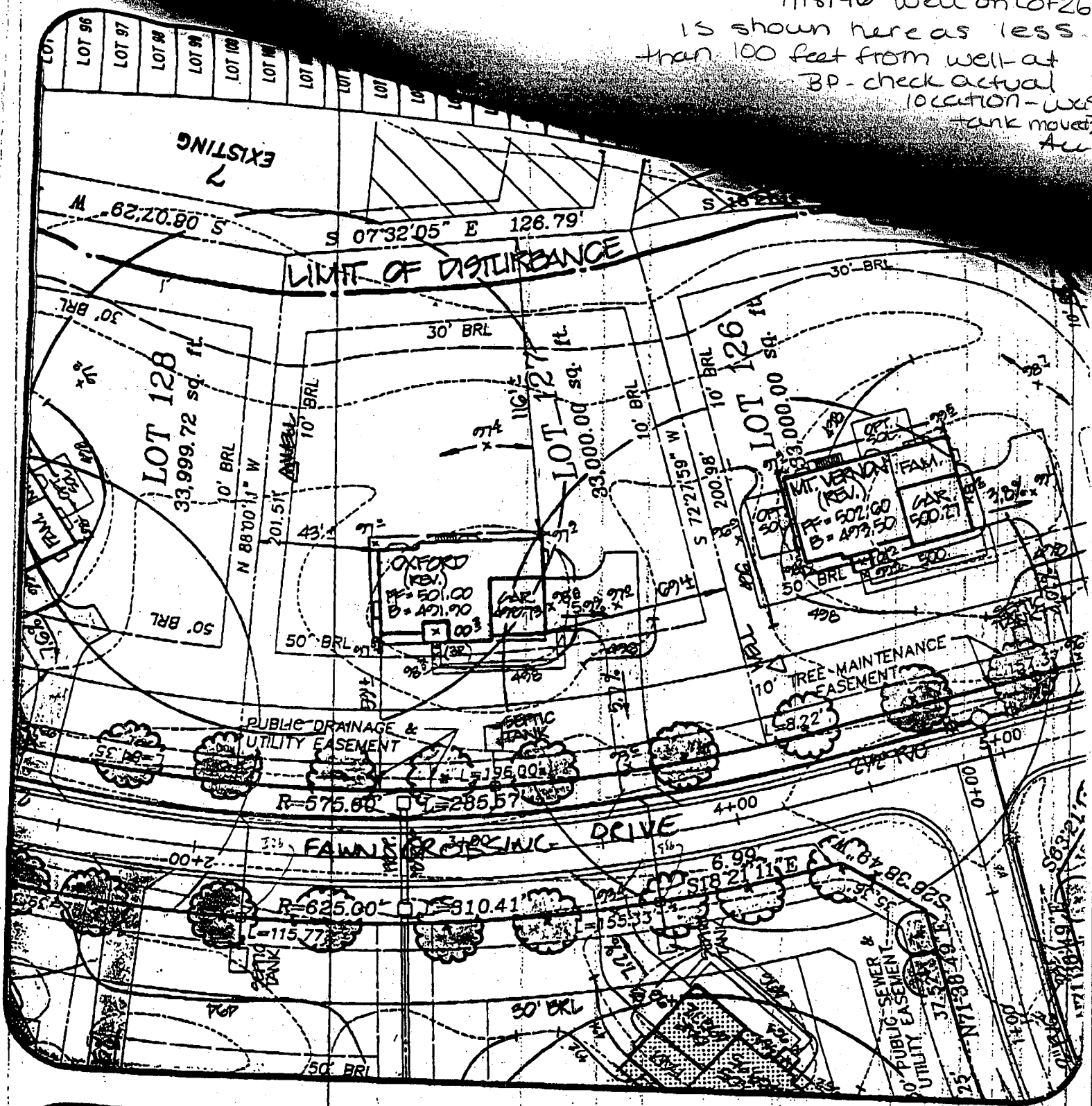
 NEAR WHAT ROAD WOLLINGFORD LANE
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 WEST EAST SOUTH NORTH
 DISTANCE FROM ROAD 100 ENTER FT OR MI FT
 TAX MAP: 40 BLK: 12 PARCEL 174

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
 Howard 13-
 COUNTY NAME _____ COUNTY NO. _____
 STATE SIGNATURE _____ INSERT S _____
 DATE ISSUED 062395 CO SIGNATURE C. W. [Signature] EXP. DATE _____
 NORTH GRID 487000 EAST GRID 0818000

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 8108
 N 4807

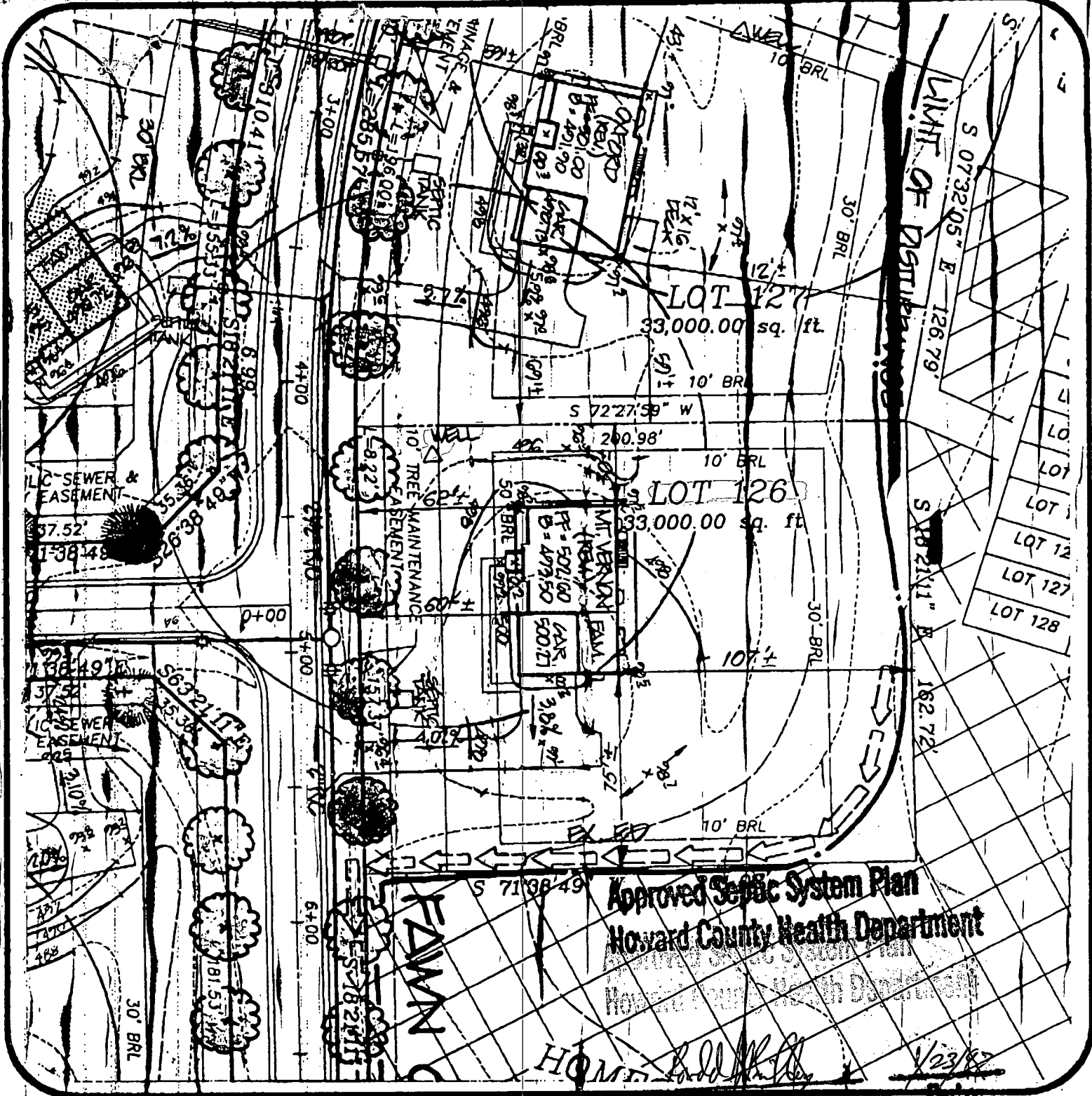


7/18/96 Well on Lot 26
 is shown here as less
 than 100 feet from well at
 BP - check actual
 location - was
 tank moved?
 All



SHEET 1 OF 2

7205 FAWN CROSSING DRIVE		R.M. MOCHI GROUP, P.C. CIVIL ENGINEERS LAND SURVEYORS PLANNERS ENVIRONMENTAL	
Ashleigh Knolls Lot 127			
DATE: 7/11/96	PROJECT NO: 94027.22	3300 N. Ridge Road, Suite 235 Ellicott City, MD 21043-3305 (410) 461-0079 Fax: (410) 750-6340	
DRAWN BY: TJP	SCALE: 1" = 50'		



Approved Sewage System Plan
Howard County Health Department

HOME *[Signature]* 1/23/97
 Signature Date

7209 FAUN CROSSING DRIVE
 ASHLEIGH KNOLLS
 LOT 126

R.M. MOCHI GROUP, P.C.

CIVIL ENGINEERS
 AND SURVEYORS
 PLANNERS
 ENVIRONMENTAL

P.O. Box 10
 New Market, MD 21774-0010
 10120 A Old National Pike
 Ijamsville, MD 21754-9706

(301) 865-5858
 Fax (301) 865-5111

DATE: 1/3/97	PROJECT NO.: 94027.22	SHEET 1 OF 2
DRAWN BY: TRV	SCALE: 1" = 50'	

	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	492.70	497.24	492.40	490.00
LOT 100					
LOT 101					
LOT 102	497.99	486.99	489.15	489.00	482.70
LOT 103	490.79	484.79	486.09	486.00	487.00
LOT 104	484.60	478.60	481.91	481.00	476.60
LOT 105	480.50	474.50	478.21	479.00	471.90
LOT 106	478.00	472.00	476.27	479.6	470.0
LOT 107					
LOT 108					
LOT 109	489.00	479.00	476.09	479.10	479.70
LOT 110	489.60	483.60	482.69	483.80	480.00
LOT 111					
LOT 112					
LOT 126	502.60	494.60	497.07	496.80	492.94
LOT 127	501.00	495.00	499.01	492.10	490.00
LOT 128					

7209 FAWN CROSSING DRIVE

ASHLEIGH KNOLL'S
LOT

DATE: 1/13/97

PROJECT NO. 94027.22

DRAWN BY: TW

SCALE: 1" = 50'

SHEET 2 OF 2

R.M. MOCHI GROUP, P.C.

CIVIL ENGINEERS
LAND SURVEYORS
PLANNERS
ENVIRONMENTAL

P.O. Box 10
New Market, MD 21774-0010
10120 Old National Pike
Jjansville, MD 21754-9706

(301) 865-5858
Fax: (301) 865-5111

APPLICATION

HOWARD COUNTY

PERMIT APPLICATION

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

Completed 1/23/97 MP
SERIAL NUMBER
B 00103685

G-3338

BUILDING ADDRESS (HOUSE NO., STREET, TOWN OR AREA)
7209 Fawn Crossing Drive
Clarksville, Md. 21029 *27701*

GRADING/SEDIMENT CONTROL YES NO
SDP #

DESCRIPTION OF WORK AUTHORIZED
House Type is: MtVernon
2 story, full bsmt., 9 R, 2 PB,
1 HB, garage, 4 BR & opt. PP

LOT NO.	PARCEL NO.	SEC.	AREA	BLOCK NO.	LIBER	FOLIO
126	475	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.

SIZE OF BLDG.	FRONT	DEPTH	HEIGHT
	62'	36'	10'
	62'	32'	20'
	62'	32'	20'

OCCUPANT'S NAME AND ADDRESS
PHONE NO.

TYPE OF BLDG.	AREA	VOLUME	ROOF
B. ROOMS	2007	20070	Asp gable
ROOMS	1387	13870	
BATHS			
FIREPLACES	1479	14790	

ARCHITECT OR ENGINEER'S NAME AND ADDRESS
R.M. Mochi Group
2302 N. Ardgen Rd. Ellicott City, Md. 21043 (301) 865-5858
Ijamsville, Md. 21754-9706
PHONE NO.

FOOTINGS	FOUNDATION	S. WALLS
10 x 8	8" conc	wd. frame siding

CONTRACTOR'S NAME AND ADDRESS
Winchester Homes, Inc.
Same as above
PHONE NO.

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

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 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 completed with.

EXISTING USE
Vacant
PROPOSED USE
Res. Single Family

EST. CONSTRUCTION COST	LICENSE NUMBER	PERMIT FEE
\$157,000	158-14160	

SIGNATURE
Permit Administrator 1/17/97
TITLE DATE

W/S CODE 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.	1/23/97	<i>Ronda Kelly</i>
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

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

ASHLEIGH KNOLLS LOT 126

DATE: 1/13/97	PROJECT NO.: 94027.22
DRAWN BY: TMV	SCALE: 1" = 50'
	SHEET 1 OF 2

P.O. Box 10
New Market, MD 21774-0010
10120 A Old National Pike
Ijamsville, MD 21754-9706
(301) 865-5858
fax: (301) 865-5111

CIVIL ENGINEERS AND SURVEYORS
PLUMBERS
ENVIRONMENTAL