

6/15/87
ASAP
6/16/87
PM

05-403480

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

P 39957

A 38078

DISTRICT _____

DATE 4/12/87

DATE SYSTEM APPROVED 6-16-87

INSPECTOR S. Abel

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED

C. C. Cissel IS PERMITTED TO INSTALL X ALTER _____

ADDRESS 14079 Brighton Dam Road, Clarksville, Maryland PHONE 854-2006

SUBDIVISION _____ ROAD 7251 Mink Hollow Road LOT _____

PROPERTY OWNER _____ G. Sunderland

ADDRESS _____

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES _____ NO X

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 200 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 4 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Place the distribution box 270 feet from the center of Mink Hollow Road and 100 feet from the left (509') lot line. Run trenches along contour in both directions, no closer than 100 feet to any well.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK/CW

V. SANDY SOIL OK TO STONE & COVER 1ST TRENCH AS NECESSARY, TO SECURE ACCESS TO SECOND TRENCH,
PLANS APPROVED BY C. Williams DATE 1/12/87 6/15/87
CW

COVER NO WORK UNTIL INSPECTED AND APPROVED.

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS.

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E., TANK, DISTRIBUTION BOX, TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCHES ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCHES).

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER. NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH.

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 40 PVC OR ABS.

PERMIT VOID AFTER TWO YEARS.

NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED.

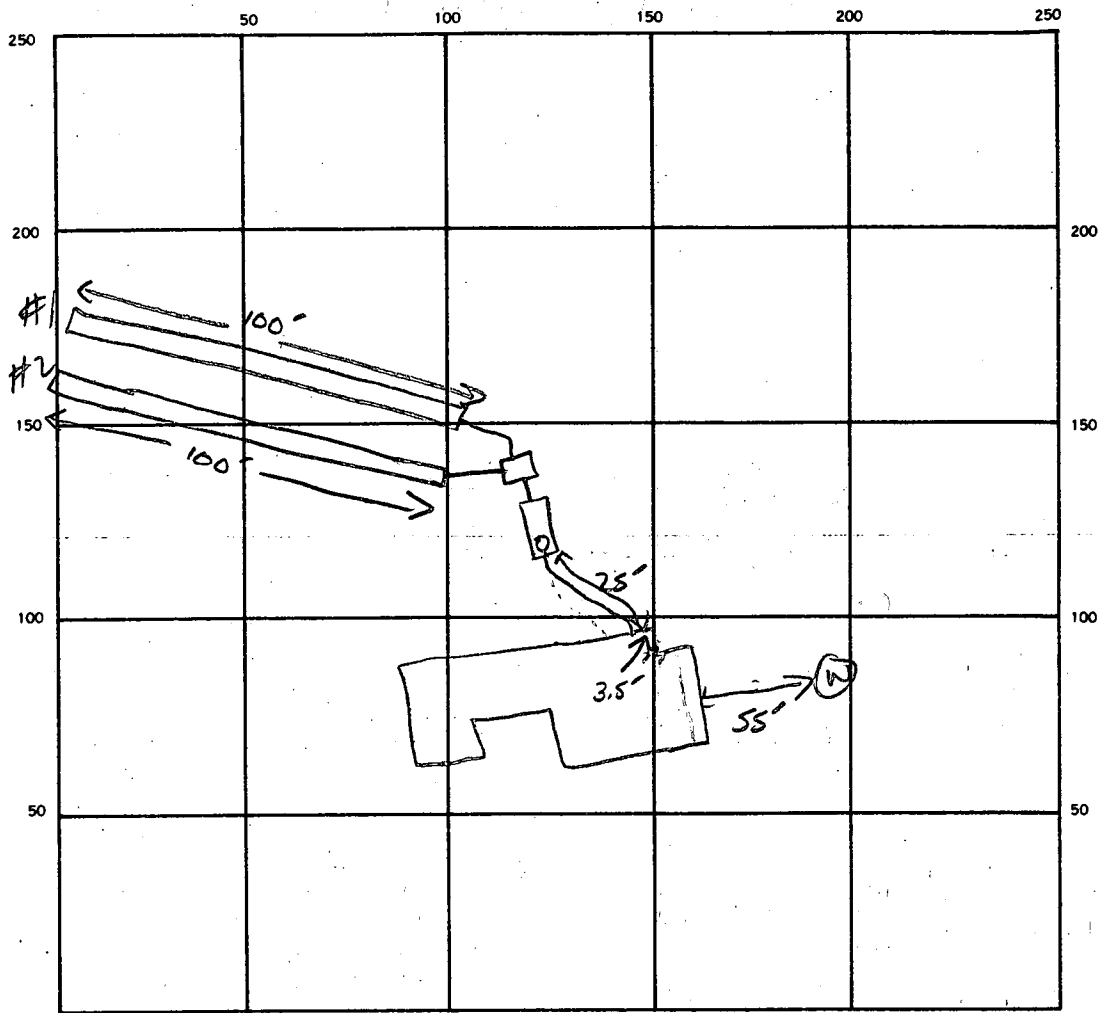
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES.

***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1186

A
38078



INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.

SEPTIC TANK. LEVEL ✓ 1500. GA CLEANOUTS ✓ 151

DISTRIBUTION BOX. LEVEL ✓

DRAIN FIELD/TILE FIELD. DEPTH ① 8 ② 8 FT. TRENCH WIDTH 2 FT. INLET DEPTH ① 4 ② 4 FT.

EFFECTIVE GRAVEL DEPTH ① 4 ② 4 FT. TOTAL LENGTH ① 100' ② 100' FT.

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 800 SQ. FT.

DRYWELL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA 800 SQ. FT.

REMARKS —

—

—

—

—

—

DATE SYSTEM APPROVED 6-16-87 INSPECTOR S. Abel

Dec 19, 1986
1:30

APPLICATION

PERCOLATION TESTING

A 38028
P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

DISTRICT _____
DATE 11/19/86

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER RENE G RYCKEBUSCH

ADDRESS 7249 MINK HOLLOW ROAD HIGHLAND 20777 PHONE 854-0366

PROSPECTIVE BUYER GARY SUNDERLAND ✓

ADDRESS 10940 JOHNS HOPKINS RD. E.C. PHONE 490-8987 W-596-1116

PROPERTY LOCATION:

SUBDIVISION 7251 MINK HOLLOW ROAD HIGHLAND ✓ LOT NO. "B"

ROAD AND DESCRIPTION _____

TAX MAP 40 PARCEL # 309

SIZE OF LOT 2 acres TYPE BLDG. _____
(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

Rene G Ryckebusch
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

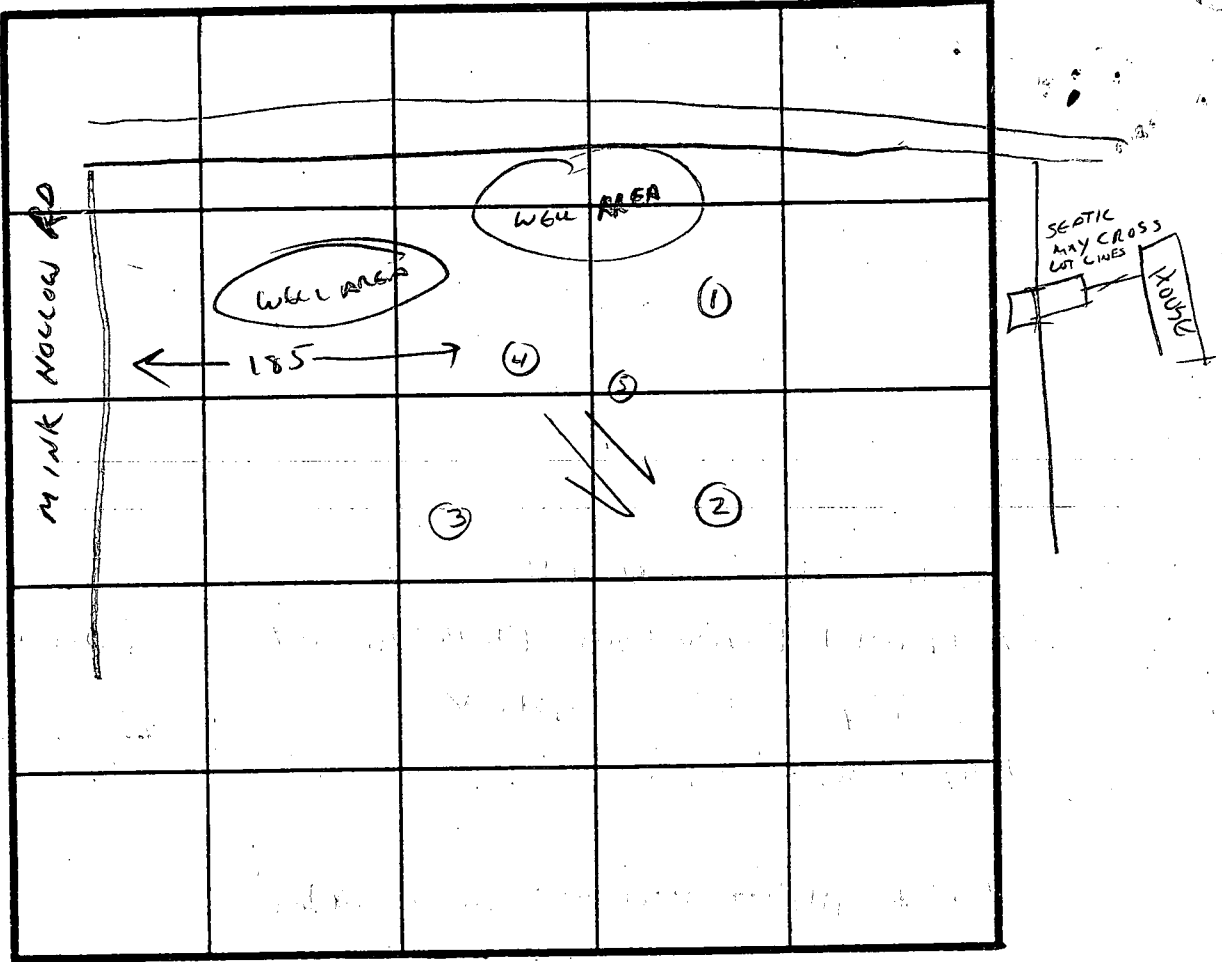
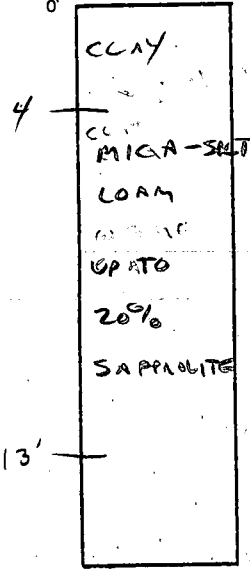
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

BLDG. PERMIT SIGNED
AND RETURNED 1/2/87
BP 10386
SABER

THIS IS NOT A PERMIT

ALL HOLES
SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
12/11/86	FREEZING RAIN - NOT POSSIBLE TO CONDUCT TEST						
	5 HOLES DUG - ALL BUT LOWEST OBVIOUSLY OK						
	RE-OPEN 1 HIGH HOLE AND LOWEST HOLE FOR						
	FORMAL TESTING AT LATER DATE.						
	LOT SLOPES CONSIDERABLY BUT DOES NOT EXCEED 25%						
12/15/86	TEST HOLES 1+3 REINSPECTED - VISUALLY SATISFACTORY						
	WATER ON SITE FROZEN IN BUCKET, LIMITED TIME AVAILABLE						
	FORMAL PERC WAIVED.						

200 SQ FT
BOTTOM

INLET 4
BOTTOM 8'

JEH-12-1079

REMARKS _____

TYPE OF SOIL _____

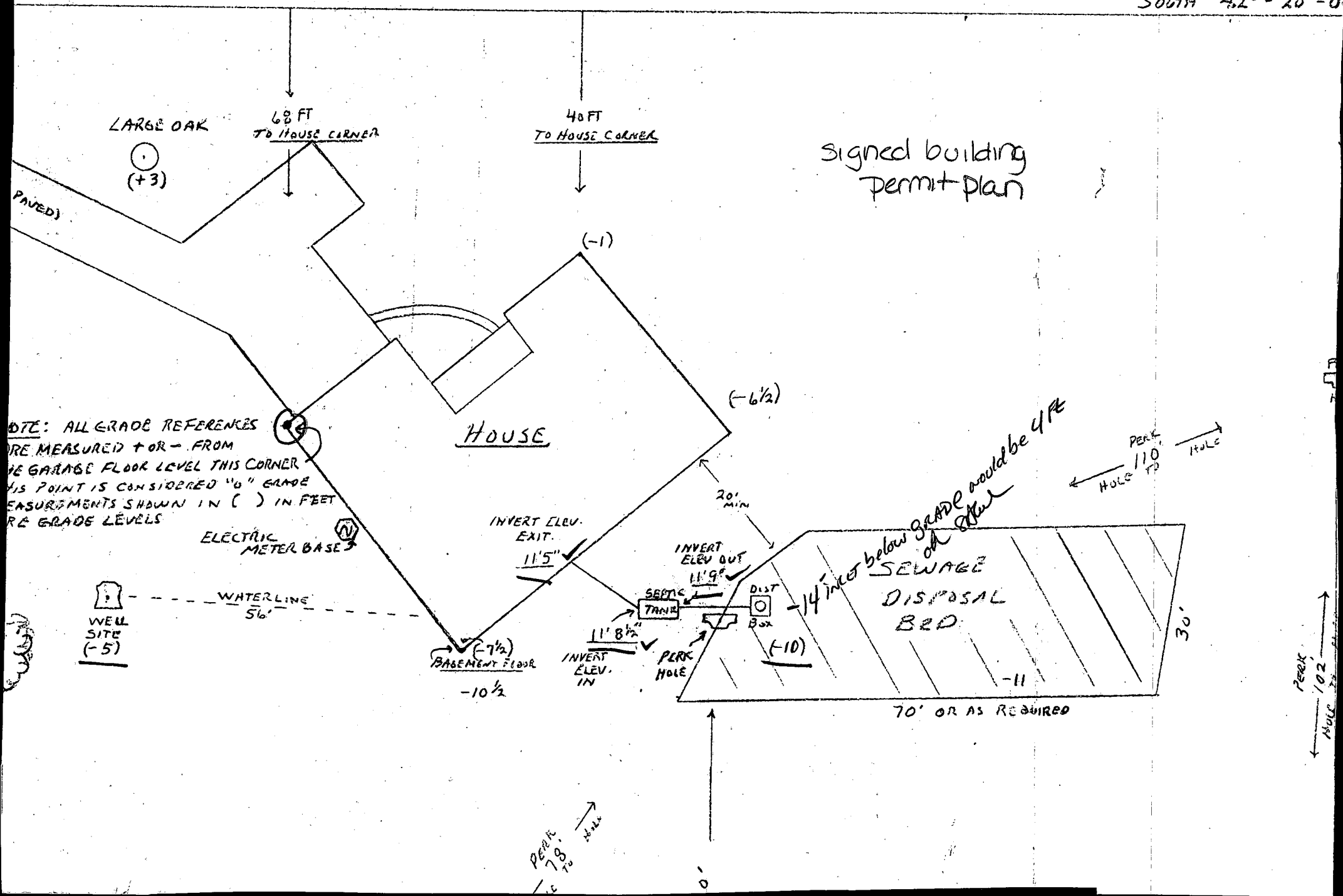
TESTED BY _____ ALSO PRESENT _____

RYCKEBUSCH

RIGHT A-WAY UNPAVED

SOUTH 42° - 20' - 0"

Signed building
Permit plan



LARGE OAK (+3)
68 FT TO HOUSE CORNER

48 FT TO HOUSE CORNER

HOUSE

BASEMENT FLOOR (-7 1/2)

ELECTRIC METER BASE

WELL SITE (-5)

WATERLINE 56'

INVERT ELEV. EXIT 11'5"

INVERT ELEV. OUT 11'9"

INVERT ELEV. IN 11'8 1/2"

SEPTIC TRANS

DIST Box

SEWAGE DISPOSAL BED

(-10)

70' OR AS REQUIRED

30'

PERK HOLE TO 110'

PERK HOLE TO 78'

PERK HOLE TO 102'

NOTE: ALL GRADE REFERENCES ARE MEASURED + OR - FROM THE GARAGE FLOOR LEVEL THIS CORNER. THIS POINT IS CONSIDERED "0" GRADE. MEASUREMENTS SHOWN IN () IN FEET ARE GRADE LEVELS.

C1 3873

SEQUENCE NO. (OEP 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)

COUNTY NUMBER A-38078

DATE Received

DATE WELL COMPLETED 1/20/77

Depth of Well 200 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-RI-1858

OWNER SUNDERLAND last name first name TOWN HIGHLAND STREET OR RFD MINK HOLLOW RD SUBDIVISION MAP 40 G 7 P 304 SECTION LOT

WELL LOG table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Includes handwritten entries: SAND 0-58, Clay with pebbles 58-300.

GROUTING RECORD: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL CEMENT BENTONITE CLAY, NO. OF BAGS 14, NO. OF POUNDS 1316, GALLONS OF WATER 84, DEPTH OF GROUT SEAL from 0 to 50 ft.

CASING RECORD: MAIN CASING TYPE SF, Nominal diameter 6, Total depth of main casing 64. OTHER CASING (if used) diameter inch, depth (feet) from to.

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

DEPTH (nearest ft.) table with handwritten entries: 40, 22, 300.

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

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 10.17.13 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT...

DRILLERS IDENT. NO. 238. DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

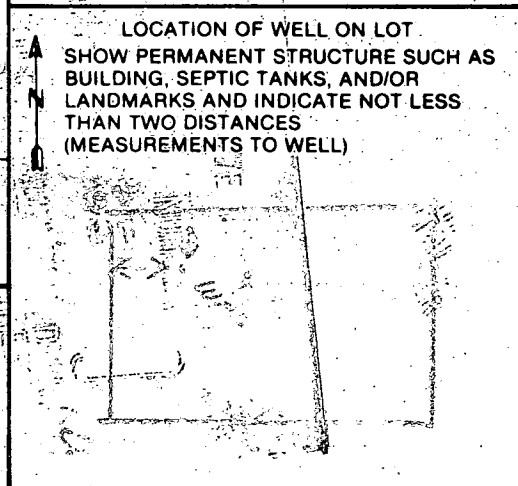
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

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

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER). T (70), (E.R.O.S.) (72), WQ (74, 75, 76). TELESCOPE CASING, LOG INDICATOR, OTHER DATA.

PUMPING TEST: C 3. HOURS PUMPED (nearest hour) 6. PUMPING RATE (gal. per min to nearest gal.) 3. METHOD USED TO MEASURE PUMPING RATE bucket. WATER LEVEL (distance from land surface) BEFORE PUMPING 20, WHEN PUMPING 19. TYPE OF PUMP USED (for test) S submersible.

PUMP INSTALLED: DRILLER WILL INSTALL PUMP YES NO. TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE: 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, - below. LAND SURFACE (nearest foot) 50-51.



HOWARD COUNTY HEALTH DEPARTMENT

JOYCE M. BOYD, M.D., M.P.H.
COUNTY HEALTH OFFICER



Bureau of Environmental Health
3525 Ellicott Mills Drive
Ellicott City, Maryland 21043

Director - 461-9956
Water & Sewerage, Permits - 461-9933
Community Environmental Health - 461-9944
Technical Services - 461-9955

February 9, 1987

Mr. G. Sunderland
10940 John Hopkins Road
Laurel, Maryland 20707

RE: Well Tag Number:
HO-81-1858 Mink Hollow Rd
Tax Map Page 40
Block 7 Parcel 309

Dear Mr. Sunderland:

The water sample recently submitted for testing from the above referenced water supply revealed that nitrate-nitrogen was present at a concentration of 12.5 parts per million. COMAR 10.17.13.09 prohibits approval of any water supply with a nitrate-nitrogen contaminant level in excess of 10 parts per million.

This department will grant a Permanent Deviation from that regulation if a nitrate removal device is installed that effectively maintains the nitrate-nitrogen contaminant level below the 10 parts per million requirements. Once this device is installed, it will be necessary for you to comply with the following conditions before a Final Certificate of Potability can be issued:

1. Within six months, you must have your water re-tested to insure that the installed nitrate removal system is operating properly. Thereafter a yearly nitrate analysis is recommended.
2. There must be continuing service contract with a plumbing contractor or water treatment service company to maintain the efficiency of the nitrate removal device. You must supply this Department with a copy of that contract.

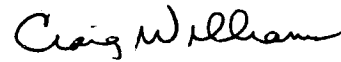
Mr. Sunderland (Continued)
February 9, 1987

page 2

3. If in the future, you decide to sell or rent your home, you must make any potential buyer/tenant aware of the above condition.

If you have any questions relative to this matter, or if the device has been installed and you are ready for resampling, please call me at 461-9933.

Very truly yours,



Craig Williams, Director
Water and Sewerage Program

CW/JS:JR

December 25, 1986

Howard County Health Department
Environmental Health
3525 Ellicott Mills Drive
Ellicott City, MD 21043

Attn.: Graig Williams, Director

Subject Property: Ryckebusch Residence
Ref. Your letter dated Dec. 17, 1986

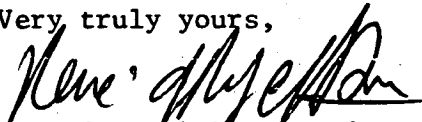
Dear Mr. Williams,

When your Health Department Inspector was here to overview the situation of the two lots at this address, I was told the following:

It is recognized that the septic system for this existing house which was built in 1973, is located at the very edge of the real estate and percolate at the very end of the other lot being purchased by Gary Sunderland. Since the percolation field for that second lot will be situated in the same area and at least 500 feet from the percolation field in operation at the present time, we would be allowed to continue the use of our septic system for a period of time not to exceed five years from this date. Looking forwards to this, a percolation test was performed at this location and passed by yourself on December 11, 1986.

By this letter and with the agreement of Mr. and Mrs. Gary Sunderland, we, Rene G. and Francoise L. Ryckebusch, promise to secure a permit from Howard County and build a new septic system under the supervision of the Bureau of Environmental Health within the new percolation field, as shown in the attached plan.

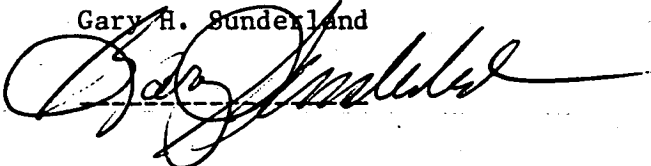
Very truly yours,


Rene G. Ryckebusch and
Francoise L. Ryckebusch
7249 Mink Hollow Road
Highland, Md. 20777

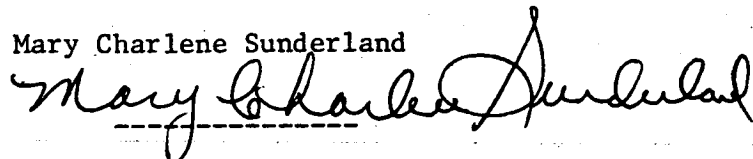
Approved by: Gary H. Sunderland
Mary Charlene Sunderland

This letter and attached plan to be recorded with the deeds of both properties.

Gary H. Sunderland



Mary Charlene Sunderland

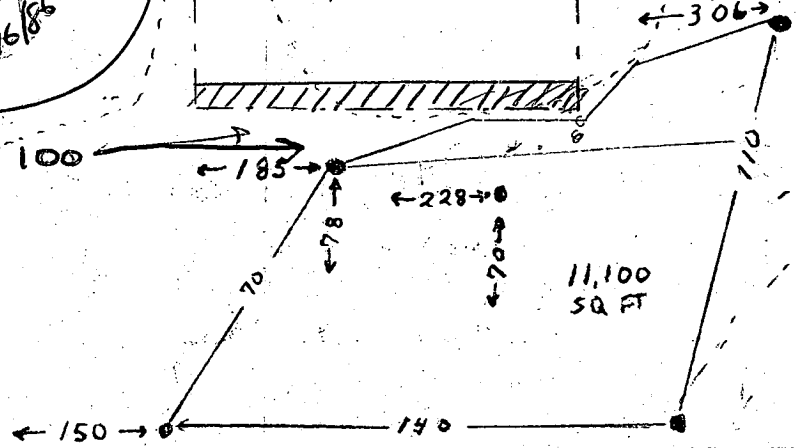
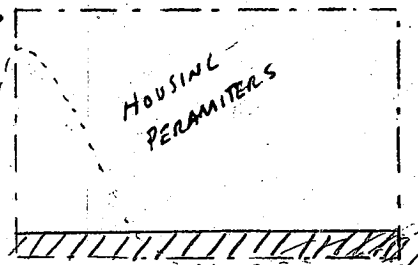
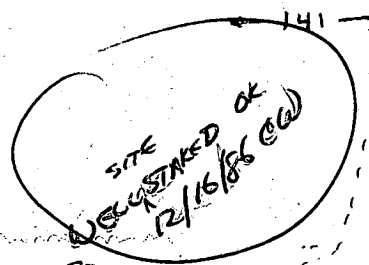


MINK HOLLOW ROAD

CENTER STAKE

8.62

NURSEY
100



509.81

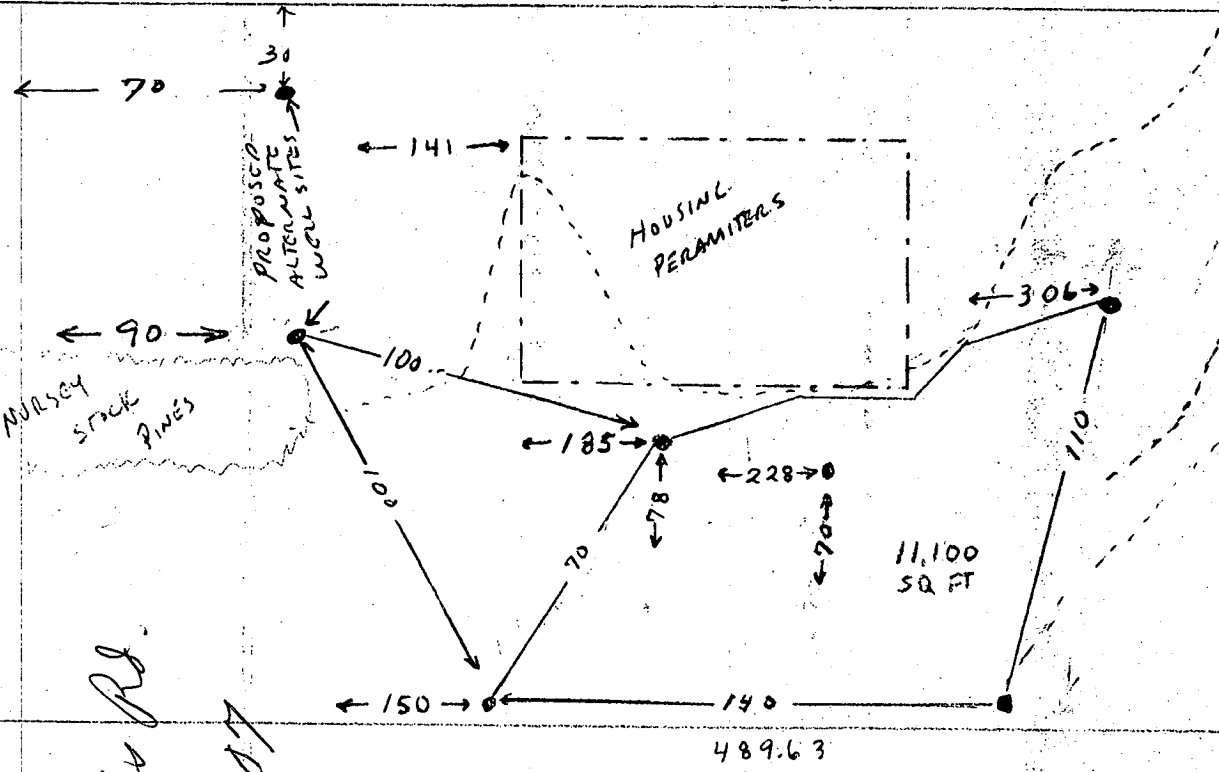
489.63

PERIK M
7251 MINK
OWNER REN
BUYER
DEC. 11, 19

Mink Hollow Rd

1786.2

509.81



C. Sunderland

10940 John Hopkins Rd.

Lannd, Md. 20707

TAX MAP 40, BLOCK 7
PART OF PARCEL 309
ZONED RURAL

PERK PLAT
7251 MINK HOLLOW
OWNER RENE RYKE
BUYER GARY S
DEC. 11, 1986

B 1 3431 SEQUENCE NO. (OEP USE ONLY)
THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS

STATE OF MARYLAND PERMIT TO DRILL WELL
please print or type

OEP PERMIT NUMBER
HO-81-1760
fill in this form completely

Date Received 10:30 AM - grant
OWNER INFORMATION
DALACOROLLA THOMAS
12193 TRIADELPHIA RD
ELLICOTT CITY MARYLAND

B 3 LOCATION OF WELL
HOWARD COUNTY
MAP 16 Q19 P273
WEST FRIENDSHIP
MILES FROM TOWN (enter 0 if in town) 2 MI

DRILLER INFORMATION
Sandy B. Cochran
G. Edgar Hays Sons' Corp.
12047 Falls Rd., Cockeysville 21030

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
12193 TRIADELPHIA RD
NEAR WHAT ROAD
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
DISTANCE FROM ROAD 810 FT

B 2 WELL INFORMATION
APPROX. PUMPING RATE (GAL. PER MIN.) 5
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 750

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)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
Howard COUNTY NO. A-38086-W
OEP SIGNATURE DATE ISSUED 5/14/87
NORTH GRID 528000 EAST GRID 0818000

APPROXIMATE DEPTH OF WELL 200 FEET

APPROXIMATE DIAMETER OF WELL 6 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

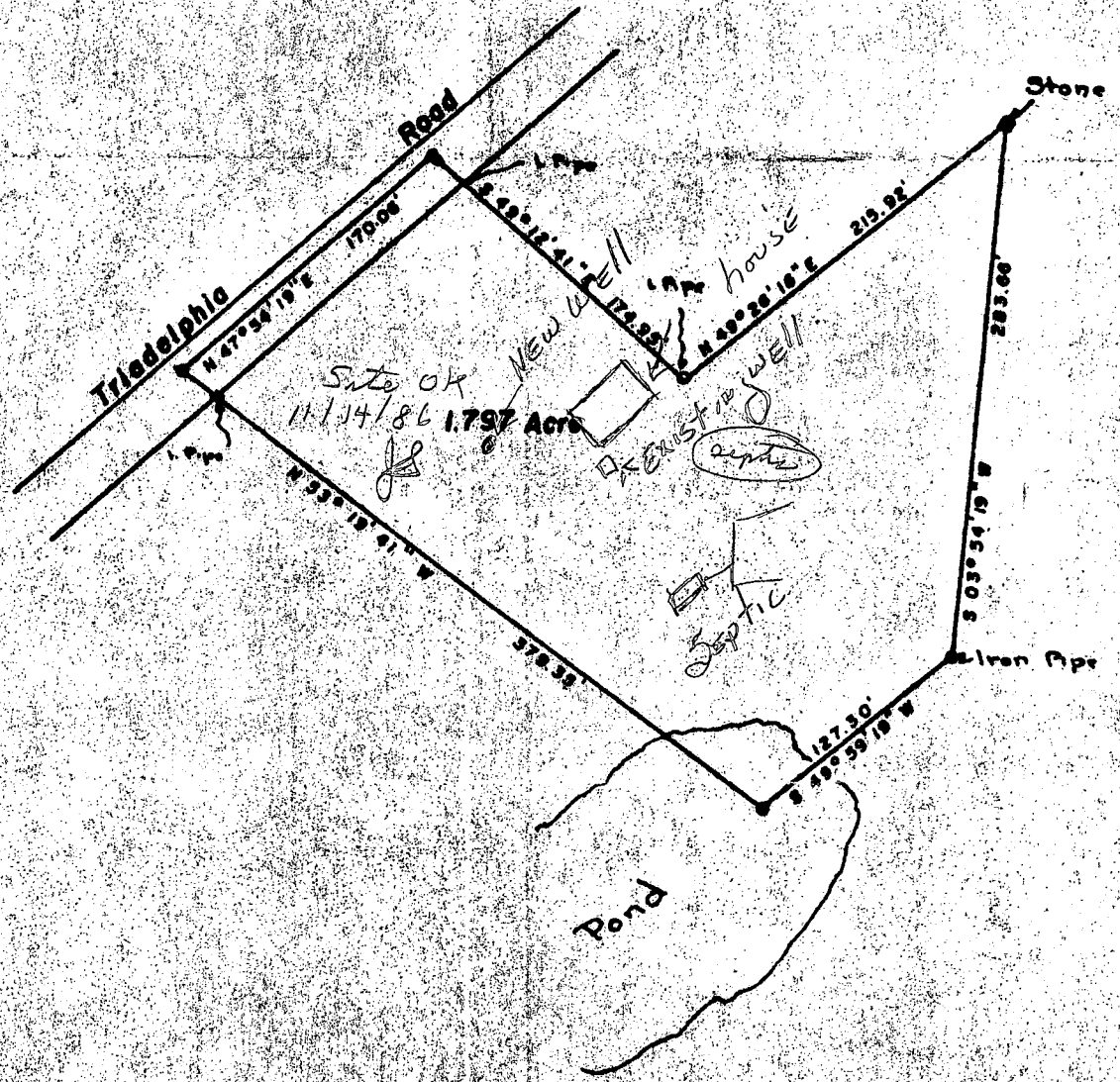
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
SOURCES OF DRILLING WATER
WRITE THE BOX NUMBER FROM THE MAP HERE
8108
5208

REPLACEMENT OR DEEPEMED 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
THIS WELL WILL DEEPEM AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION
N
RI = 144
TRIADELPHIA RD
28 6H.8.
HEALTH DEPARTMENT
HOWARD COUNTY

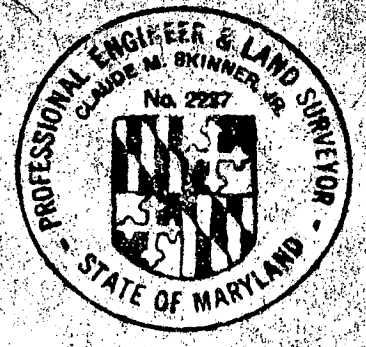
Not to be filled in by driller (OEP USE ONLY)
APPROP. PERMIT NUMBER GAP
FORCE JS WRITE INITIALS IN BOX PERMIT No. HO-81-1760

SPECIAL CONDITIONS



**PLAT OF SURVEY
FOR
WYSE S. TAYLOR
THIRD ELECTION DISTRICT OF HOWARD COUNTY
ELLCOTT CITY, MARYLAND
SCALE: 1 IN. = 100 FT. FEBRUARY 26, 1970**

Claude M. Skinner Jr.
Claude M. Skinner Jr. Reg. Engineer & Land Surveyor No. 2237



A-2959

C1 3719

SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

COUNTY NUMBER A 38086-W

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

DATE RECEIVED

DATE WELL COMPLETED 12 13 86

DEPTH OF WELL 22 200 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HQ-51-1760

OWNER DALACAROLLA THOMAS last name first name STREET OR RFD 12173 TRIADELPHIA RD TOWN WEST FRIENDSHIP SUBDIVISION MAP 16 & 14 P. 233 SECTION LOT

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. Handwritten entries: CLAY, 0-50; GRANITE, 50-220; WELL #1 - 275' DR (CACEFILLED)

GROUTING RECORD WELL HAS BEEN GROUTED (Y) (N) TYPE OF GROUTING MATERIAL CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 7 NO. OF POUNDS 700 GALLONS OF WATER DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 30 ft.

CASING RECORD MAIN CASING TYPE (ST) Nominal diameter (nearest inch) (6) Total depth of main casing (nearest foot) (50) OTHER CASING (if used) diameter inch depth (feet) from to

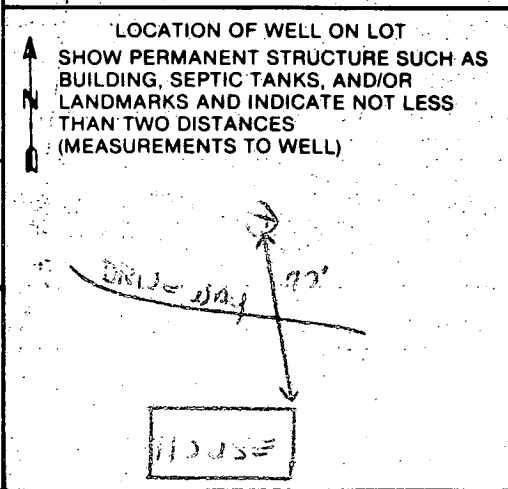
SCREEN RECORD screen type or open hole (ST) (BR) (HO) (PL) (OT) STEEL BRASS BRONZE PLASTIC OPEN HOLE OTHER

DEPTH (nearest ft.) 110 200 220 EACH SCREEN SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH) from to GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

TELESCOPE CASING LOG INDICATOR OTHER DATA T (E.R.O.S.) WQ 70 72 74 75 76

PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min. to nearest gal.) 20 METHOD USED TO MEASURE PUMPING RATE 112 WATER LEVEL (distance from land surface) BEFORE PUMPING 35 WHEN PUMPING 180 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 EXCEPT HOME USE. TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE: 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)



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

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 10.17.13 "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. 102 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

12/11/86 (p.m.)

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

Howard County Health Department
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Court House Square
Ellicott City, Md. 21043
461-9933

New Installation Replacement
Receipt # _____ Date _____

Name of Installer Leonard Sutton Co. Telephone 744-4552

License number _____
Certified Well Pump Installer _____ Well Driller _____ Registered Plumber

Name of Property Owner Thomas Palacorolla Telephone 988-9541
Subdivision _____ Lot # _____ Well tag # _____
Site Address 12183 Triadelphia Rd.

Pump
1. Type
a. Deep well jet _____
b. Shallow well jet _____
c. Submersible
2. Make Myers
3. Model # _____
4. Capacity 4 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 1/2
2. RPM _____
3. Voltage 220
a. 110 _____
b. 220 _____

Pitless Adapter
1. Make _____
2. Model # _____
3. Depth 200 ft.

Tank
1. Capacity XTR-1 202
2. Pressure relief valve? yes

Piping
1. Type poly
2. Size 1"
3. NSF and/or BOCA Code approved
4. Depth of supply line 36"

Well data
1. Depth 200 ft.
2. Yield 2 GPM
3. Static water level 30 ft.
4. Will water supply be disinfected by installer? yes

NO INSPECTION MADE 12/11/86 CW.

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: Leonard E. Dull

Date: 12-10-86

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