

7/27/89 AM
7/26/89 AM

03-312356

File

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH

461-9933

P 44761

A 38171

DISTRICT 3rd

DATE 7/18/89

DATE SYSTEM APPROVED 7/26/89

INSPECTOR C.B.

INDEXED

Dave Hopkins and Son

IS PERMITTED TO INSTALL ALTER

ADDRESS 17550 Old Frederick Road, Mt. Airy, Maryland 21771 PHONE 831-7257

SUBDIVISION Meadowood ROAD 1235 Crows Feet Road LOT 19

PROPERTY OWNER Polaris Development Corp. / Dennis Whelley

ADDRESS _____

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

GARBAGE GRINDER? YES NO

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 180 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 3.5 feet below original grade. Bottom maximum depth 8.0 feet below original grade. Effective area begins at 3.5 feet below original grade. 4.5 feet of stone below distribution pipe.

LOCATION - Start the first trench 230 feet up the right (396.46') lot line and 170 feet off the same lot line as seen when facing the lot from Crows Foot Road. Run trenches on contour in both directions.

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

PLANS APPROVED BY Sid Abel DATE 4/05/89

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

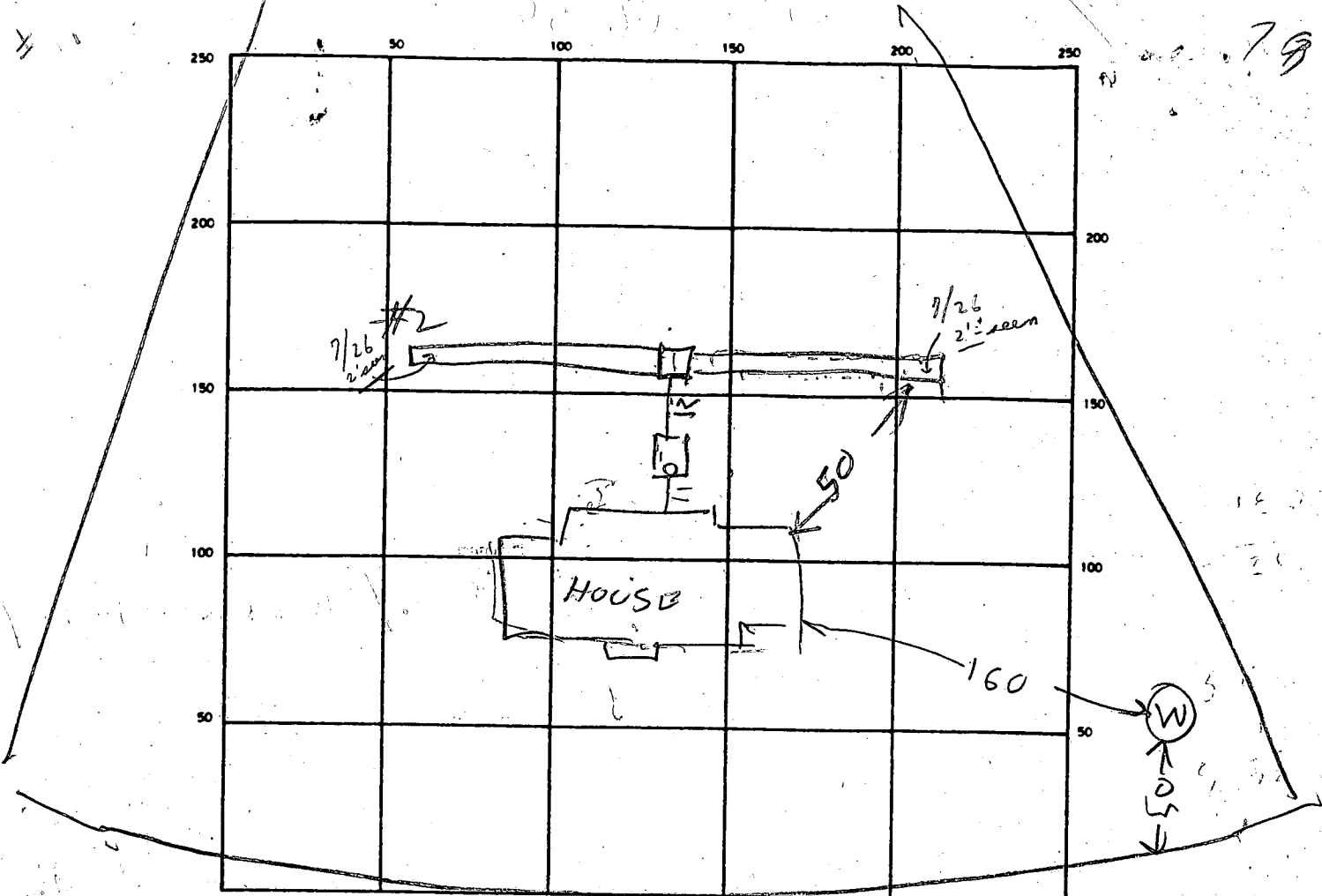
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

***CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.**

38171

79



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
 CROWS FOOT ROAD

SEPTIC TANK. LEVEL 1250 CLEANOUTS OK

DISTRIBUTION BOX. LEVEL _____

DRAIN FIELD/TILE FIELD. DEPTH 8 5/8 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3 1/3 FT.

EFFECTIVE GRAVEL DEPTH 5 1/2 FT. TOTAL LENGTH 80/60 FT. 140

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 760 SQ. FT.

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

ABSORBENT AREA 770+ SQ. FT.

REMARKS 7/25/89 AM LOCATION OK PER PLAN TRENCH #1 DUG

TRENCH #2 STARTED BH.

7/25/89 340 PM TRENCH #2 DUG & SOME STONE ADDED

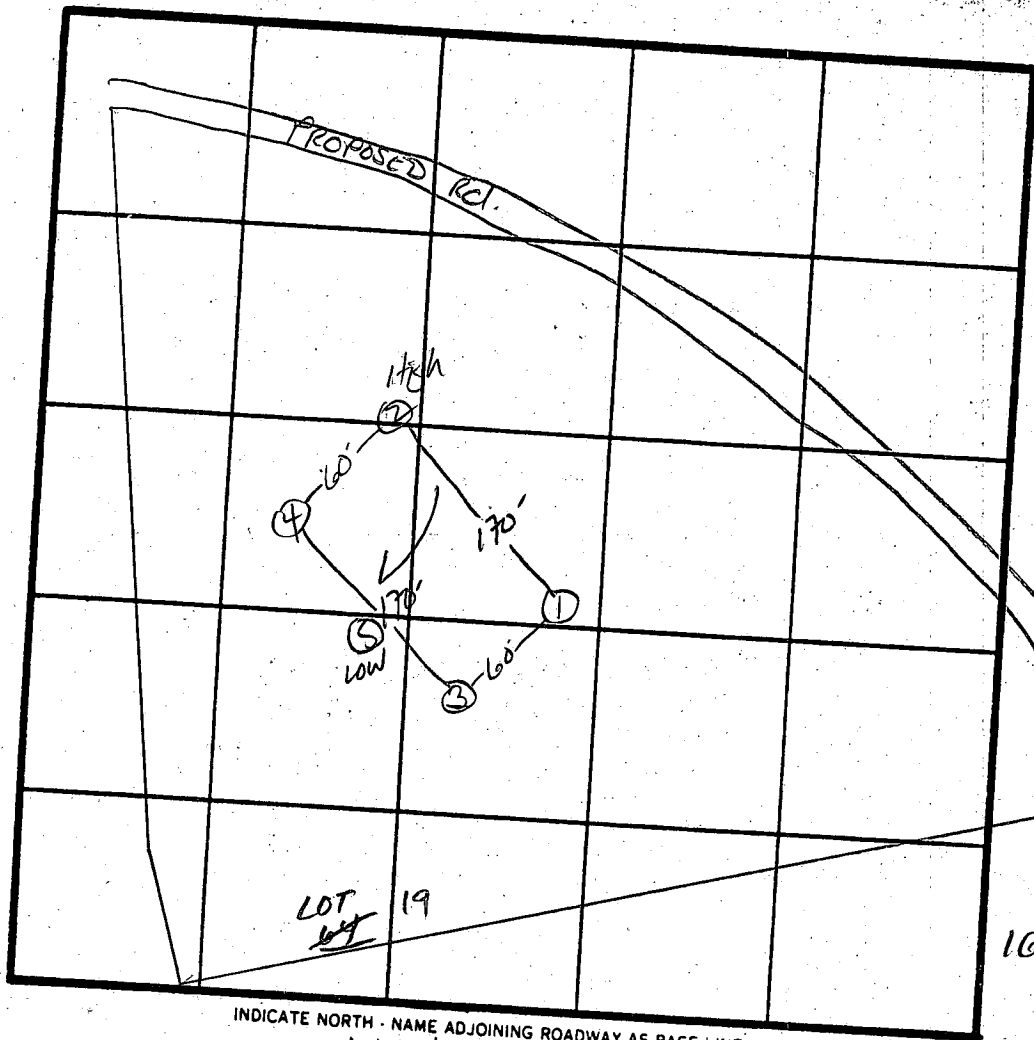
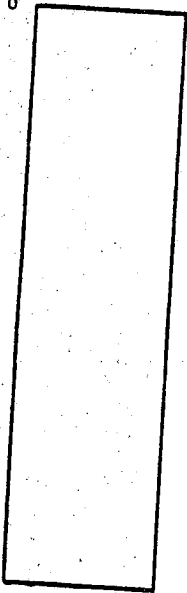
FINISH ADDING STONE & LEAVE ENDS OPEN. COVER TRENCH

7/26/89 only ends ved - paper stone to 2' of surface

-FINAL.

DATE SYSTEM APPROVED 7/26/89 INSPECTOR Charles Bryan Steakis

SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
 ↓ to Henkaton Rd.

PERC
 4min
 100#/BA
 Inlet 3.5
 BOTTOM 8.0

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
12/15/86	1S	3"	3:03	3:05	3:05	3:08	3min	
	1M	10"	3:11	3:13	3:13	3:20	7min	
	1V	12"	uniform soil below 3.5'					
	2S	4"	2:57	2:58	2:58	2:59	1min	
	2V	12"	SAME AS #1					
	3S	3.5"	3:22	3:24	3:24	3:29	5min	
	3V	11.5"	SAME AS #1					
	4V	12"	SAME AS #1 w/ PINK CRISIS below 4' through					
	5V	12"	SAME AS #1					

REMARKS HOLES PER PLAT

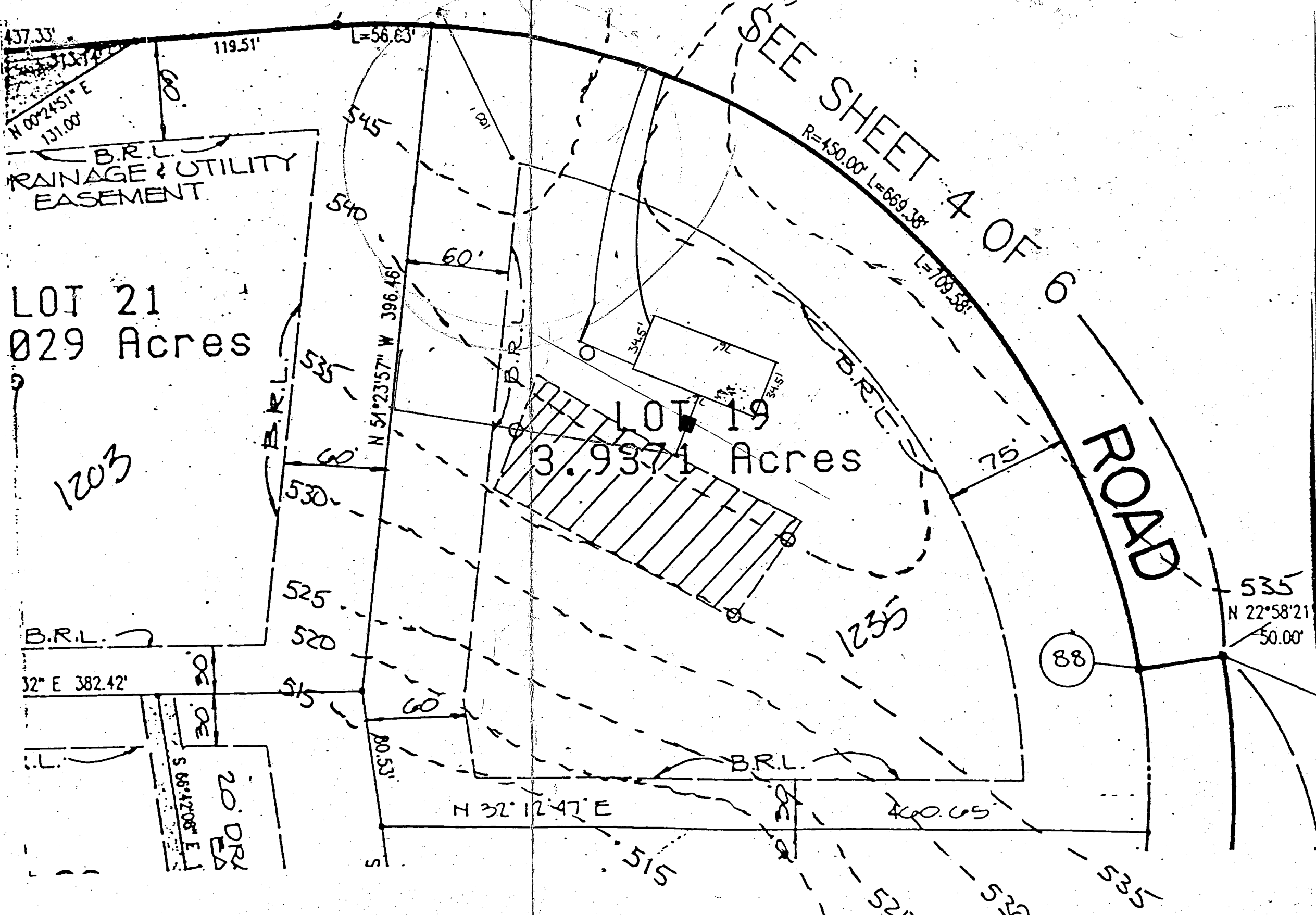
TYPE OF SOIL Glenelg

TESTED BY S. Abel

J. Fyock & Co / owner

MEADOWOOD
SECTION ONE
LOT 19

TAX MAP 10 PARCEL 139
3RD ELECTION DISTRICT
HOWARD COUNTY, MARYLAND



LOT 21
0.29 Acres

LOT 19
3.9371 Acres

ROAD

BLDG. PERMIT SIGNED
AND RETURNED 4/21/89
BP 24891
OK

Scale 1" = 60'
OWNER:

Polaris Development Corp.
3414 Morningwood Drive
Suite 1, Olney, MD 20832

B 1 2299 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
NO-81-2545
fill in this form completely

Date Received 07 14 87
OWNER INFORMATION
SODRING HILL ASSOC
1432 RT 32
W FRIENDSHIP MD 21794

B 3 LOCATION OF WELL R 39647
HOWARD COUNTY
MEADOWWOOD
SECTION 1 LOT 19
SMITHS BIRCHES
4 MILES FROM TOWN

DRILLER INFORMATION
George F. Easterday
L. Franklin Easterday, Incx.
9265 Br. Ch. Rd., Mt. Airy, Md. 21771
Signature: George F. Easterday Date: 7/2/87

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
NORTH, WEST, EAST, SOUTH
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
DISTANCE FROM ROAD 60 FT

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)
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 NAME
OEP SIGNATURE: B. Naylor
DATE ISSUED: 02/11/88
NORTH GRID: 548000 EAST GRID: 0819000

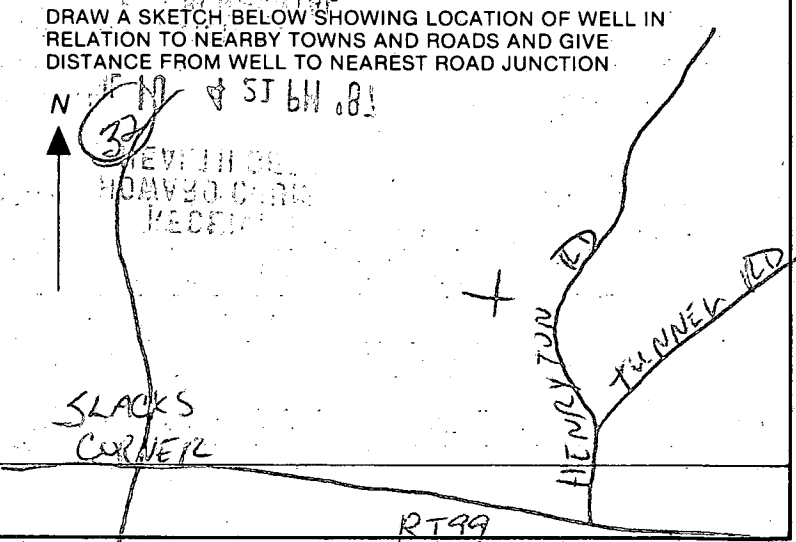
APPROXIMATE DEPTH OF WELL 200 FEET

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

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
8169
H5408

REPLACEMENT OR DEEPEINED 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
D 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 (OEP USE ONLY)
APPROX. PERMIT NUMBER GAP

FORCE INITIALS IN BOX PERMIT No. NO-81-2545

SPECIAL CONDITIONS

C1 2156 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

SEQUENCES TO (OEP 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 **A 38171**

DATE Received

DATE WELL COMPLETED **04/19/88**

Depth of Well **340** (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" **H0-81-2545**

OWNER **ASSOCIATES SPRING HILL**
 STREET OR RFD **MEADOWOOD ROAD** TOWN **SYRESVILLE**
 SUBDIVISION **MEADOWOOD** SECTION **1** LOT **11**

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		Check if water bearing
	FROM	TO	
Topsoil	0	2	
Br. Mica	2	60	
Tan Mica	60	80	
Gray Mica	80	86	
Tan Mica	86	95	
Gray Mica	95	118	
Tan Mica	118	122	
Gray Mica	122	135	
Tan Mica	135	137	
Gray Mica	137	340	

GROUTING RECORD
 WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**
 TYPE OF GROUTING MATERIAL
 CEMENT **CM** BENTONITE CLAY **BC**
 NO. OF BAGS **19** NO. OF POUNDS **1900**
 GALLONS OF WATER **65**
 DEPTH OF GROUT SEAL (to nearest foot)
 from **0** ft. to **50** ft.
 (enter 0 if from surface)

CASING RECORD
 casing types insert appropriate code below
ST **CO** **PL** **OT**
 STEEL CONCRETE PLASTIC OTHER
 MAIN CASING TYPE **ST** **G** **73**
 Nominal diameter top (main) casing (nearest inch) **4** **73**
 Total depth of main casing (nearest foot) **73**

OTHER CASING (if used)
 diameter inch from to

SCREEN RECORD
 screen type or open hole insert appropriate code below
ST **BR** **HO** **PL** **OT**
 STEEL BRASS OPEN HOLE PLASTIC OTHER

C2
 DEPTH (nearest ft.)
H0 **71** **340**
 SLOT SIZE 1 2 3
 DIAMETER OF SCREEN (NEAREST INCH) **56** **60**

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

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

C3
PUMPING TEST
 HOURS PUMPED (nearest hour) **3**
 PUMPING RATE (gal. per min. to nearest gal.) **3**
 METHOD USED TO MEASURE PUMPING RATE **Bucket**
 WATER LEVEL (distance from land surface) BEFORE PUMPING **67** WHEN PUMPING **111**
 TYPE OF PUMP USED (for test) **A** air **P** piston **T** turbine **C** centrifugal **R** rotary **O** other (describe below) **J** jet **S** submersible

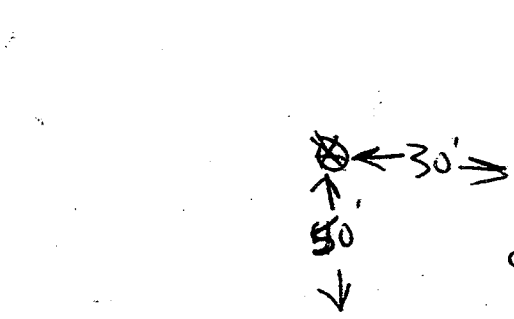
PUMP INSTALLED
 DRILLER WILL INSTALL PUMP YES **NO**
 IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE
 TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE: **29**
 CAPACITY: GALLONS PER MINUTE (to nearest gallon) **31** **35**
 PUMP HORSE POWER **37** **41**
 PUMP COLUMN LENGTH (nearest ft.) **43** **47**
 CASING HEIGHT (circle appropriate box and enter casing height) **+** above **-** below
 LAND SURFACE **2** (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)

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. **40**
 DRILLERS SIGNATURE **Wesley K. Blong**
 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)



Age _____ of _____
Date _____

Well 4-20-88
8:00

Review ok 8/25/88 CW

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-2545
Location of property (road) MEADOWOOD ROAD
Subdivision MEADOWOOD Lot 19 Block _____ Plat _____ Sec. 1
Well Driller GEORGE PASTERDAY Owner ASSOCIATES, SPRING HILL

Depth of well 340 3 GPM
Distance of measuring point (M.P.) above ground _____
Static water level (S.W.L.) below M.P. 67 ft

I. High rate pumping -- reservoir drawdown

Time pump started 9:15 Pumping rate 8 gpm
Total time 30 min 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)
9:45	138	20 SEC		3
10:00	108	20 SEC		3
10:15	110	20	JOE	3
10:30	110	20		3
10:45	110	20		3
11:00	110	20		3
11:15	111	20		3
11:30	111	20		3
12:00	111	20		3
12:15	111	20		3
12:30	111	20		3
12:45	111	20		3
1:00	111	20		3
1:15	111	20		3
1:30	111	20		3
1:45	111	20		3
2:00	111	20		3
2:15	111	20		3
2:30	111	20		3
2:45	111	20		3
3:00	111	20		3
3:15	111	20		3
3:30	111	20		3
4:00	111	20		3

B-17-89
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 X Replacement _____ Receipt # _____ Date _____
Name of Installer Gaske, John M. III Telephone 247-6963
License Number 3189 Certified Well Pump Installer _____ Well Driller _____ Registered Plumber X
Name of Property Owner POLARIS Development Corp. Telephone 1-301-774-8082
Subdivision MEADOWOODS Lot # 19 Well Tag # HO-01-2545
Site Address 1235 CROWS FOOT ROAD

Pump Motor Pitless Adapter
1. Type a. Deep well jet _____ b. Shallow well jet _____ c. Submersible X
2. Make Gould
3. Model # 5ES07412
4. Capacity 3 GPM
5. Pump exceeds well capacity Yes _____ No X
6. If Yes, is low pressure cutoff switch installed? Yes _____ No X
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors X Cable guards X Other TAPE

Tank Piping Well data
1. Capacity 203x/82 gal.
2. Pressure relief valve? yes
Pitless Adapter 4' B.G.
MR 8/17/89
1. Type Big Blue
2. Size 1"
3. NSF and/or BOCA Code approved yes
4. Depth of supply line 320'
1. Depth 340 ft.
2. Yield 3 GPM
3. Static water level _____ ft.
4. Will water supply be disinfected by installer? NO

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: John M Gaske
Date: 8/8/89

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