

6/14/99  
ASAP

# PERMIT 03-313468

P 511546

## SEWAGE DISPOSAL SYSTEM

A 38647

### DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT \_\_\_\_\_

#### HOWARD COUNTY HEALTH DEPARTMENT

DATE 4-28-99

BUREAU OF ENVIRONMENTAL HEALTH  
~~XXXXXXXX~~ 410-313-2640

DATE SYSTEM APPROVED 6/14/99

INSPECTOR B.B.

## INDEXED

Barnard Brothers Construction Company IS PERMITTED TO INSTALL X ALTER \_\_\_\_\_

ADDRESS 1612 Brittle Branch Way, Woodbine, MD 21797 PHONE 410-489-7621

SUBDIVISION Willow Highlands LOT 22 ROAD 13349 Pipes Lane

PROPERTY OWNER Carl and Tracey Buch

ADDRESS \_\_\_\_\_

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 280

TRENCHES - Trench to be 3 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 5 feet below original grade. Effective area begins at 3 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Place the distribution box 80 feet from the left lot line and 140 feet from the rear lot line. Run trenches along contour toward left side of property. **\*\*\*SYSTEM TO BE INSTALLED HIGHER ON PROPERTY IF POSSIBLE FROM EXISTING PLUMBING.\*\*\***

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. *at 325' from DIC*

PLANS APPROVED BY C. Williams DATE 3-16-99

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. 90° ELBOWS NOT ACCEPTABLE.

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 TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

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 25/40 PVC OR ABS

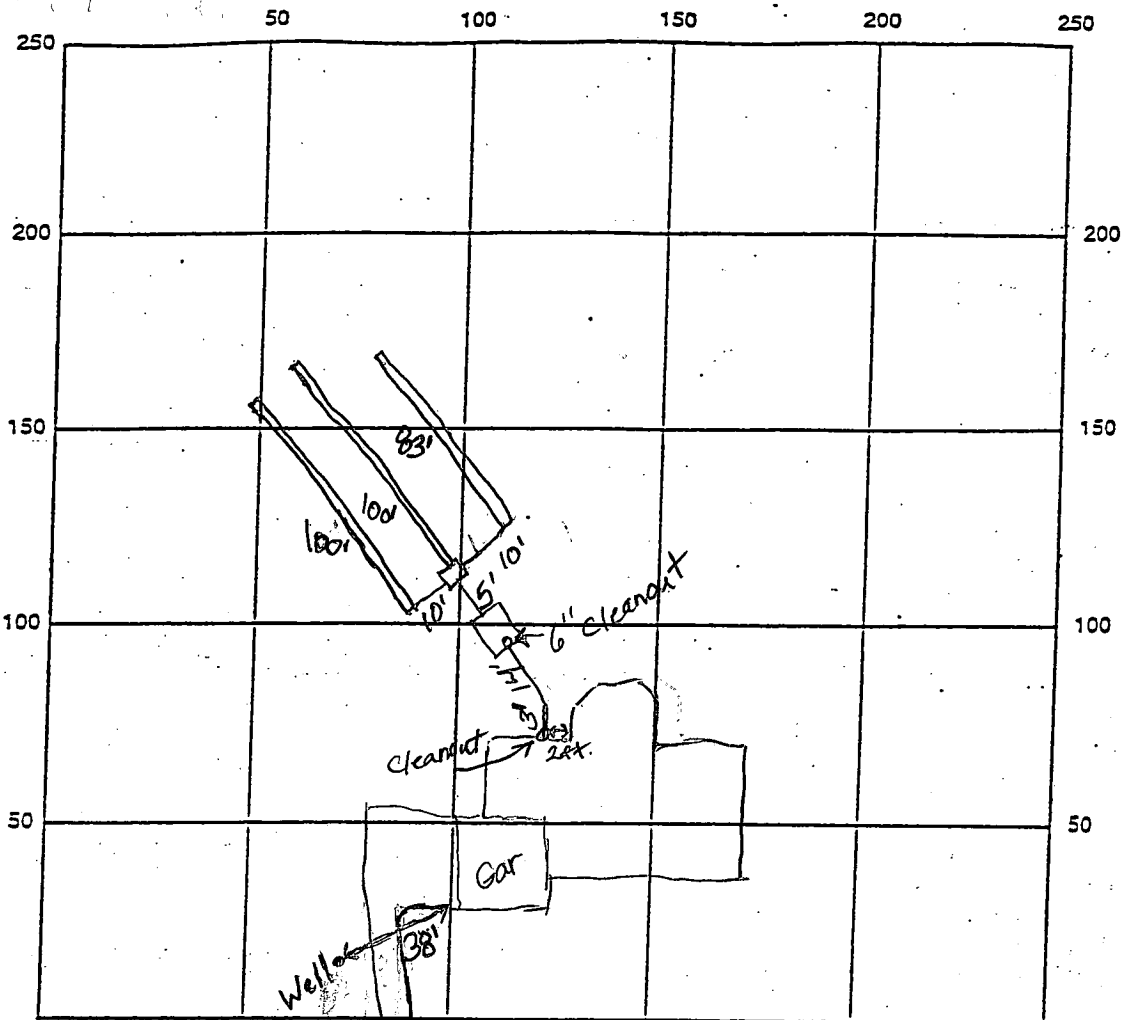
PERMIT VOID AFTER TWO YEARS

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 PVA 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**

38647



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

*Pipes Lane*

SEPTIC TANK LEVEL 1250 gal CLEANOUTS OK-6" cleanout, cleanout near house

DISTRIBUTION BOX LEVEL OK

DRAIN FIELD/TITLE DEPTH 5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 2x100, 1x83 FT.

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 840 SQ. FT.

DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET 2 FT.

ABSORBENT AREA — SQ. FT.

REMARKS: House connection made. System O.K. Alright to  
cover all work. 6/14/99 B.B./ALM

DATE SYSTEM APPROVED 6/14/99 INSPECTOR B. Baber

# PIPES LANE

50' R/W

S72°13'16"E 26.97'

A = PROPOSED 4 BEDROOM HOUSE  
 F.F.E. = 551.0'  
 B.SMT. ELEV. = 542.0'  
 INV. ELEV. = 546.1'

B = PROP. SEPTIC TANK  
 EX. ELEV. = 547.4'  
 INV. IN = 545.9'  
 INV. OUT = 545.6'

C = PROP. DIST. BOX  
 EX. ELEV. = 548.1'  
 INV. ELEV. = 545.4'

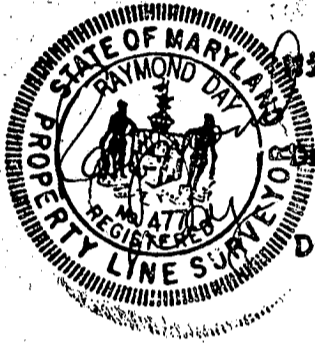
D = PROP. TRENCHES  
 INV. ELEV. = 545.1'  
 LENGTH TO BE DETERMINED  
 AT TIME OF SEPTIC PERMIT  
 ISSUANCE.

Approved Septic System Plan  
 Howard County Health Department

800116530 4 BR 570

*C. W. Miller* 3/16/99  
 Date

Total linear feet of trench required 280 feet



Width of trench(es) 3 feet

Depth of trench(es) 5 feet

Depth of stone required below  
 distribution pipe 2 feet

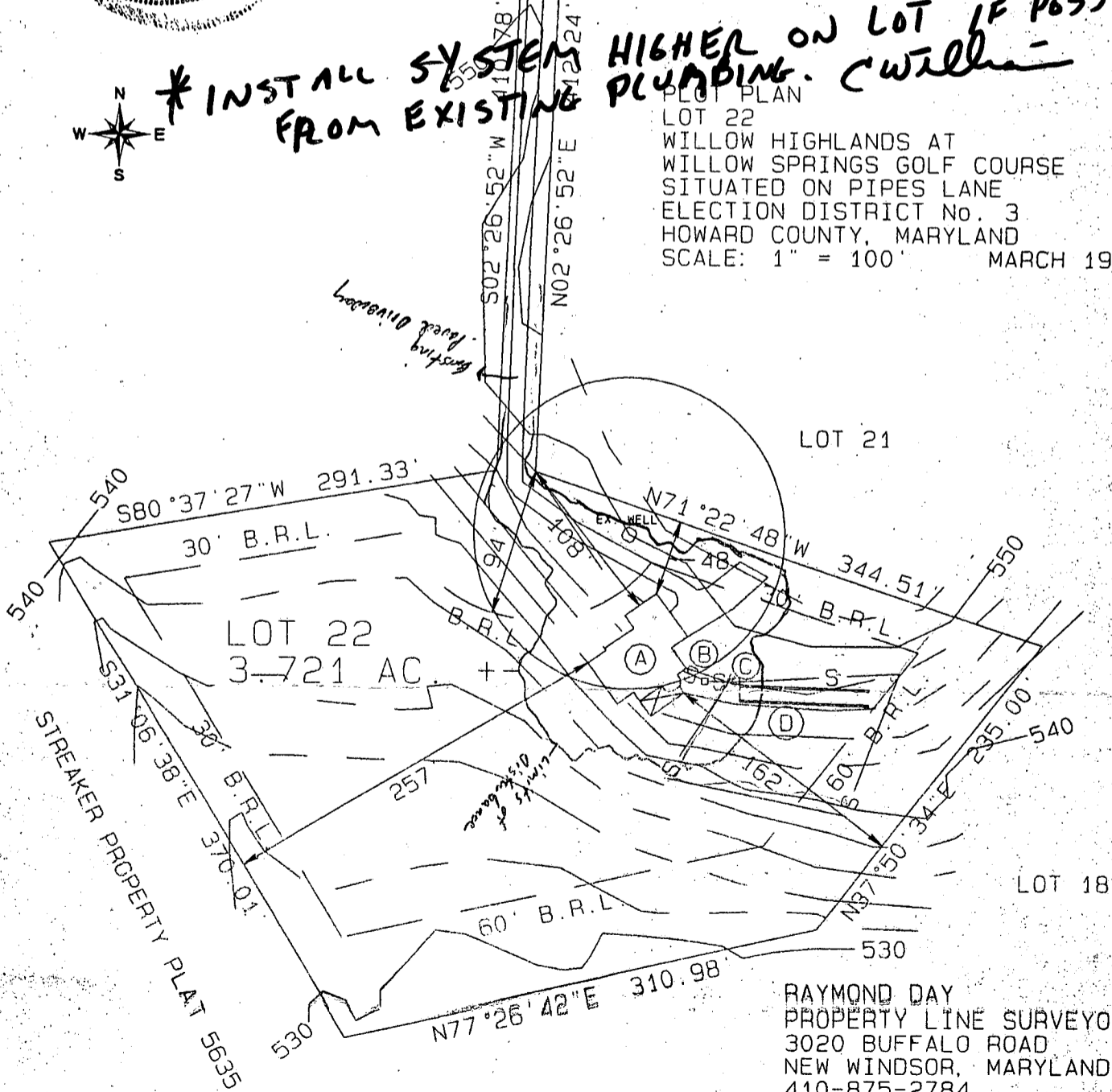
I CERTIFY THIS PLAT TO BE CORRECT.  
 IS THE RESULT OF AN ACTUAL FIELD  
 SURVEY, BASED ON DATA FOUND AMONG  
 THE LAND RECORDS OF HOWARD COUNTY,  
 MARYLAND, AS REFERENCED HEREON.

REFERENCE: PLAT No. 7918



**\* INSTALL SYSTEM HIGHER ON LOT IF POSSIBLE FROM EXISTING PLUMBING. CW Miller**

LOT PLAN  
 LOT 22  
 WILLOW HIGHLANDS AT  
 WILLOW SPRINGS GOLF COURSE  
 SITUATED ON PIPES LANE  
 ELECTION DISTRICT No. 3  
 HOWARD COUNTY, MARYLAND  
 SCALE: 1" = 100' MARCH 1999



RAYMOND DAY  
 PROPERTY LINE SURVEYOR  
 3020 BUFFALO ROAD  
 NEW WINDSOR, MARYLAND  
 410-875-2784 21776

# APPLICATION

PERCOLATION TESTING

A 38600 <sup>47</sup>

P \_\_\_\_\_

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

DISTRICT 3

DATE 12-16-1986

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 WILLOW SPRINGS LIMITED PARTNERSHIP CARL & TRACEY BUCH  
16801 WESLEY CHAPEL ROAD  
ADDRESS MONKTON, MARYLAND 21111 PHONE 347-8700

PROSPECTIVE BUYER \_\_\_\_\_  
ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

PROPERTY LOCATION: Highlands  
SUBDIVISION WILLOW SPRINGS GOLF COURSE LOT NO. 822

ROAD AND DESCRIPTION N/S U.S. RTE 70 N AT LIVE STOCK ROAD  
(13349 PIPES LANE)

TAX MAP 9 & 15 PARCEL # 151 & 11  
SIZE OF LOT 3.0 Ac. ± TYPE BLDG. S.F.D. - 4 Brms  
(SINGLE FAMILY DWELLING OR COMMERCIAL)

BLDG. PERMIT SIGNED  
AND RETURNED 3-16-99  
Send # 116530  
S.F.D. - 4 Brms

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.

WILLOW SPRINGS INC Ben Partner  
Buy Thomas  
(SIGNATURE OF APPLICANT)

APPROVED BY Sedang Alief FOR Deep trenches DATE 8-7-89  
Shallow Requiris

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING 4-21-87 Perc Satisfactory - Hold for Subdivision Plat - S.M.W

# THIS IS NOT A PERMIT

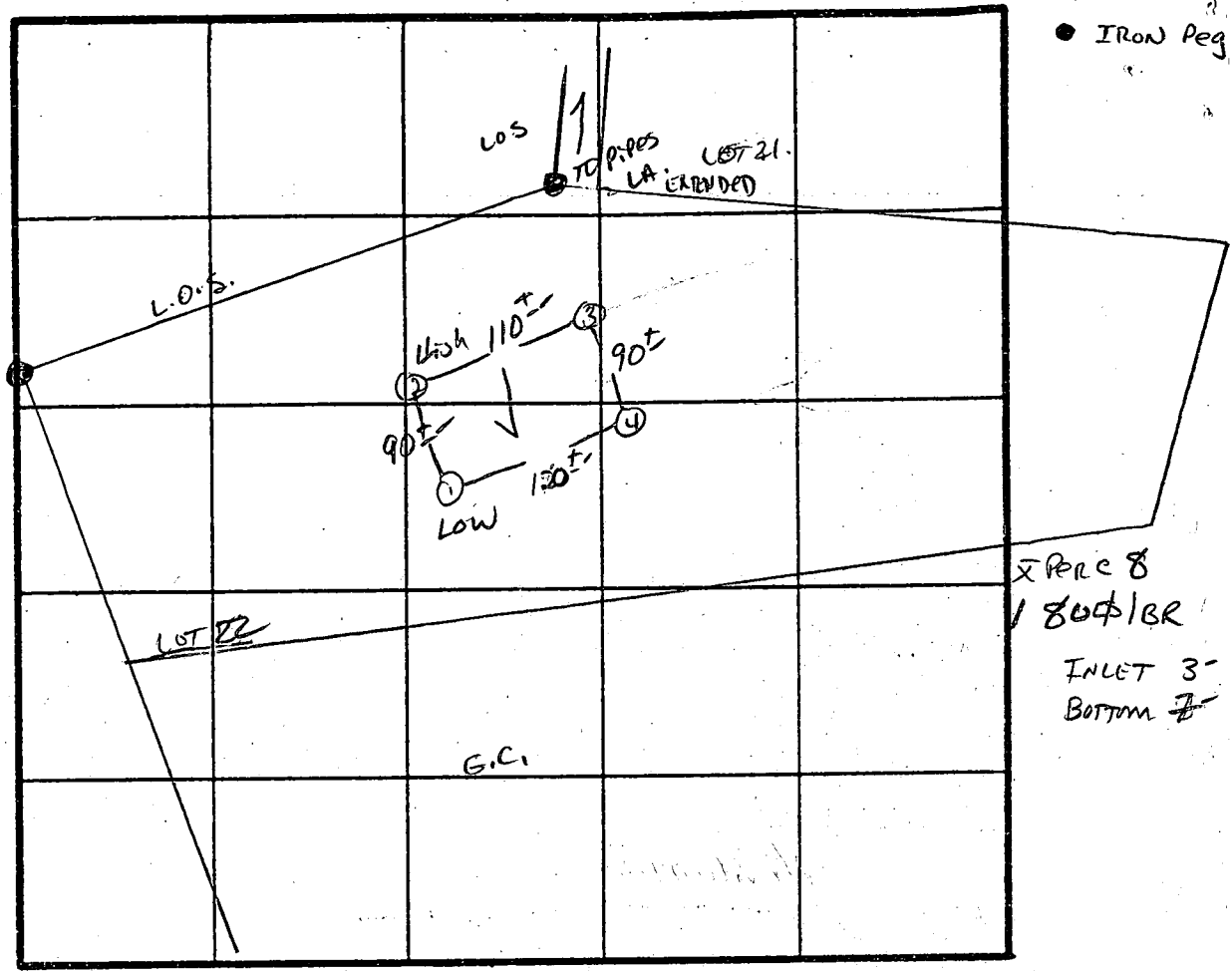
1

● Iron Peg

① → ④  
SOIL PROFILE

0'  
6"  
4'  
12-13'

A1-3  
Red yellow  
Silt loam  
12% CLAY  
15-20% FRAGS  
(MASES/NOS)  
HOLE #1  
Yellow BL  
SANDY SILT  
LOAM  
20-30%  
FRAGS



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/21/87	1 S	5'	2:47	2:55	2:55	3:13	18 MIN
	1 V	13'	UNIFORM SOIL below 4'				
	2 S	4'	2:59	3:02	3:02	3:05	3 MIN
	2 M	6.5'	3:00	3:01	3:01	3:03	2 MIN
	2 V	13'	UNIFORM SOIL below 3.5'				
	3 V	13'	UNIFORM SOIL below 3.5'				
	4 S	4'	2:53	2:58	2:58	3:06	8 MIN
	4 V	12.5'	UNIFORM SOIL below 3.5'				

REMARKS: HOLES DIFF FROM PERT / SHALLOW SYST ONLY

TYPE OF SOIL: CHOCREL

TESTED BY: S. Abo / ALSO PRESENT: O. KETZALMAN

EH-12-1079

# APPLICATION

PERCOLATION TESTING

A 38647

P \_\_\_\_\_

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

DISTRICT \_\_\_\_\_

DATE \_\_\_\_\_

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 \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

PROSPECTIVE BUYER \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

PROPERTY LOCATION:

SUBDIVISION Willow Highlands LOT NO. 22 Retest

ROAD AND DESCRIPTION Pipes Lane

TAX MAP \_\_\_\_\_ PARCEL # \_\_\_\_\_

SIZE OF LOT \_\_\_\_\_ 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.

(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING 2-28-91 shallow system. soils confirm 4-21-87 results,

JEN

HD-216

# THIS IS NOT A PERMIT

A 38647

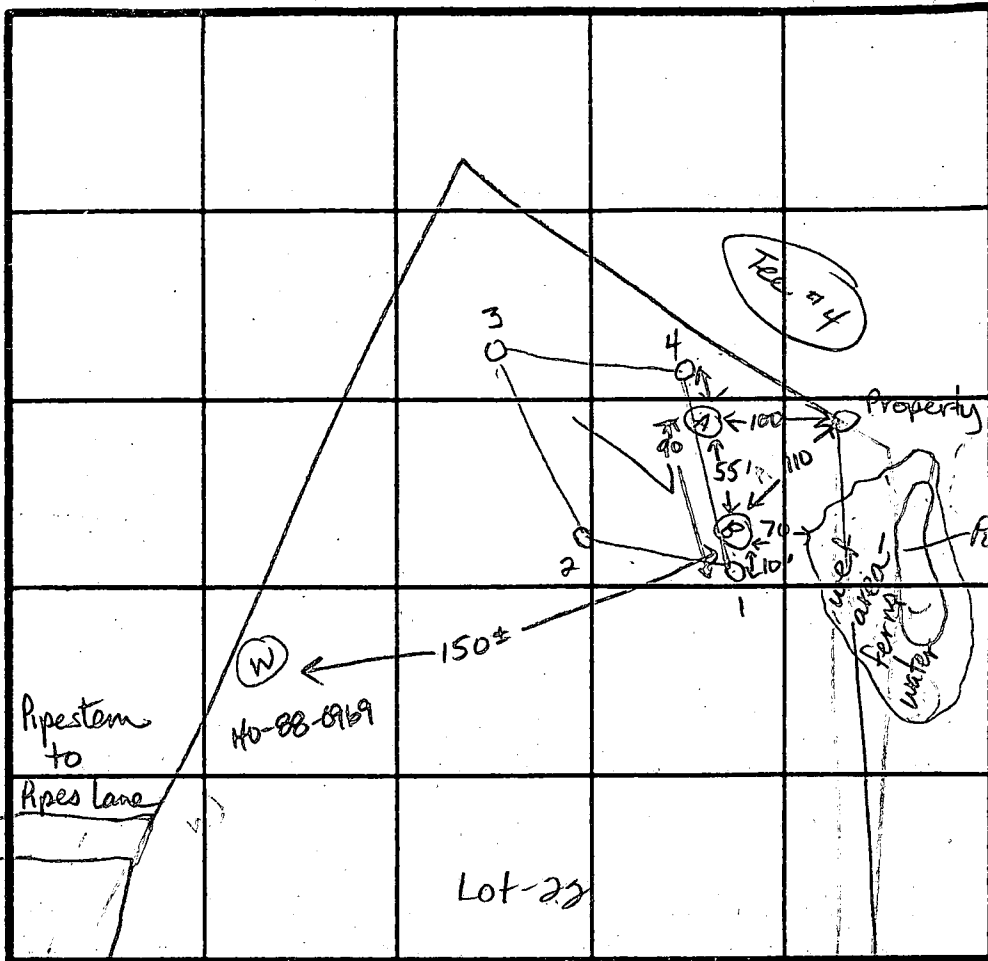
(A)  
SOIL PROFILE

0-0.5' Dk. brown  
silt, org

0.5-3.5 Red  
ssil, roots

3.5-13.5 Tan micaceous  
ssil, <60%  
Saprolite  
trace of  
mottles, <5%

13.5' Bottom  
water  
at 12.5 ft



2 2nd low  
B lowest

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

(B)

0-0.5' Dk. brown  
Org.  
silt

0.5'-5.0' Red silt,  
roots

5.0-12.5 Tan  
micaceous  
ssil, <70%  
saprolite

12.5 Bottom  
water  
at 12.0 ft.

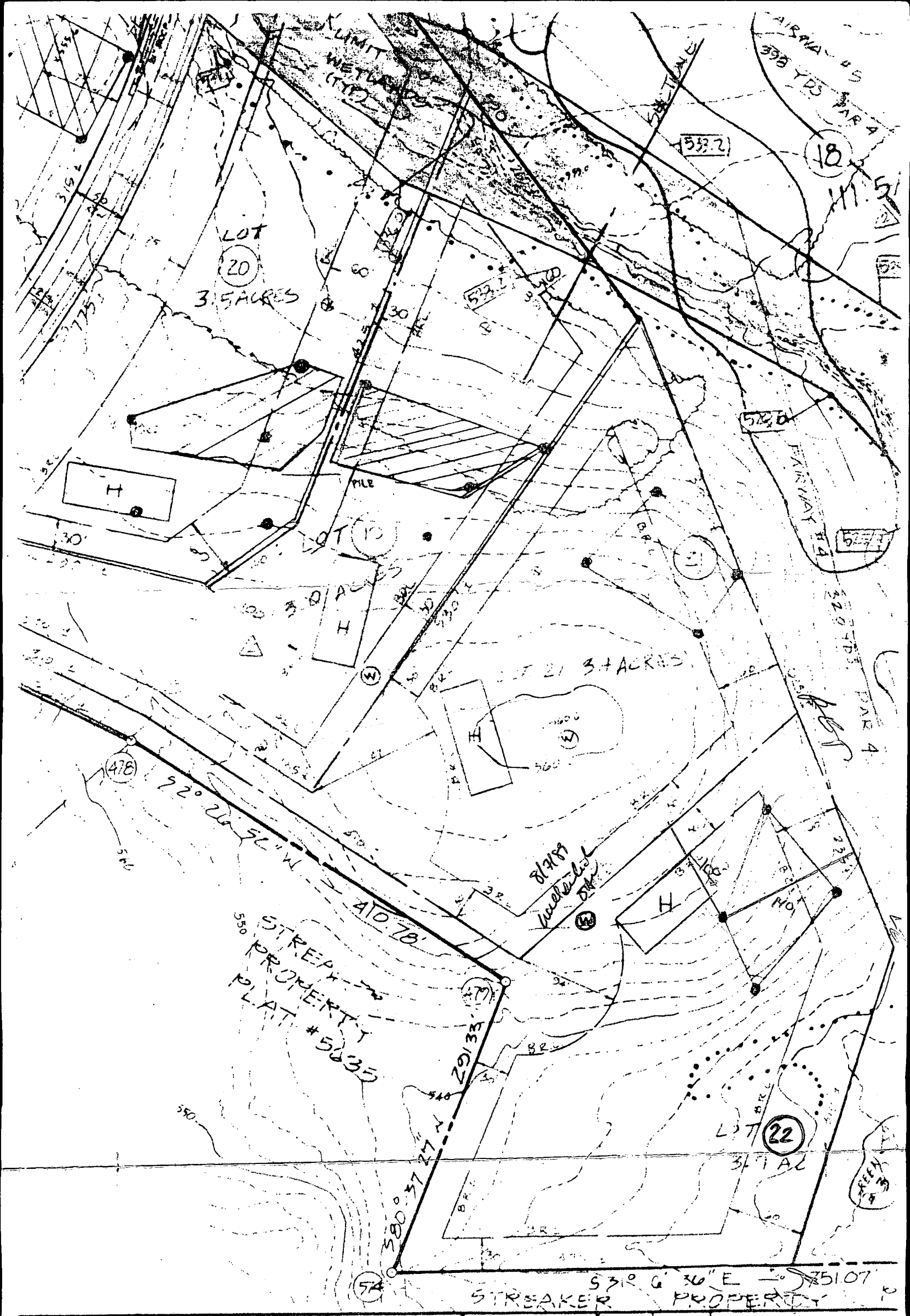
DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2/28/91	Opened as shown on A	11:45 open 13.5' V	Water	at 12.5 ft	after 3 hrs	OK	
	plat - confusion as to hole location in field.						
	B	12.5' V	Water	at 12.0 ft	after 2.5 hrs	OK	
	10:00 pm open						
	2130 H <sub>2</sub> O reading						

REMARKS Soils appear similar to those tested 4-21-87  
shallow system.

TYPE OF SOIL

TESTED BY J.E. Nadler

ALSO PRESENT D. Ketterman  
Dave



R 4 LANE  
 NTRY BLVD.  
 203  
 RYLAND 21043  
 7563



DESIGNED	1/1	1/1	1/1
DRAWN	1/1	1/1	1/1
CHECKED			
DATE			
	BU	NO	

**C1** **1092** SEQUENCE NO. (DENV USE ONLY)  
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

**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 **A38647**

ST/CO USE ONLY  
 DATE Received **06 29 89** DATE WELL COMPLETED **10 11 89** Depth of Well **165** (TO NEAREST FOOT)  
 PERMIT NO. FROM "PERMIT TO DRILL WELL" **HC-89-0969**

OWNER **William S. Limited** last name **William** first name **S.** TOWN **W. FRANKSHP**  
 STREET OR RFD **Highlands** SUBDIVISION **Highlands** SECTION **2** LOT **22**

**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	
Top Soil	0	2	
Sandy	2	60	<input checked="" type="checkbox"/>
Sandstone	60	65	
MICA	65	95	
Sandstone	95	100	<input checked="" type="checkbox"/>
MICA	100	165	

**GROUTING RECORD**  
 WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**  
 TYPE OF GROUTING MATERIAL  
 CEMENT **CM** BENTONITE CLAY **BC**  
 NO. OF BAGS **10** NO. OF POUNDS **1000**  
 GALLONS OF WATER **60**  
 DEPTH OF GROUT SEAL (to nearest foot) **3**  
 from **0** ft. to **40** ft.  
 (enter 0 if from surface)

**CASING RECORD**  
 casing types insert appropriate code below  
**ST** **CO** STEEL CONCRETE  
**PL** **OT** PLASTIC OTHER  
 MAIN CASING TYPE **PL** Nominal diameter top (main) casing (nearest inch) **6** Total depth of main casing (nearest foot) **70**

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

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

**C2**  
 DEPTH (nearest ft.) **HO** **68** **125**  
 SLOT SIZE 1 2 3  
 DIAMETER OF SCREEN (NEAREST INCH) from to

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

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

**C3**  
**PUMPING TEST**  
 HOURS PUMPED (nearest hour) **3**  
 PUMPING RATE (gal. per min. to nearest gal.) **10**  
 METHOD USED TO MEASURE PUMPING RATE **Bucket**  
 WATER LEVEL (distance from land surface) BEFORE PUMPING **25** WHEN PUMPING **35**  
 TYPE OF PUMP USED (for test)  
**A** air **P** piston **T** turbine  
**C** centrifugal **R** rotary **O** other (describe below)  
**J** jet **S** submersible

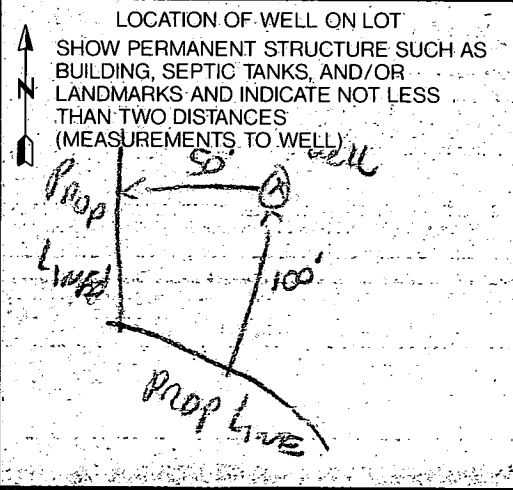
**PUMP INSTALLED**  
 DRILLER WILL INSTALL PUMP YES **NO**  
 IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE  
 TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE:  
 CAPACITY: GALLONS PER MINUTE (to nearest gallon) PUMP HORSE-POWER  
 PUMP COLUMN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

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.

DRILLERS IDENT. NO. **273**  
 DRILLERS SIGNATURE **Keith Wayne**  
 (MUST MATCH SIGNATURE ON APPLICATION)

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



COUNTY



B 1 7971 SEQUENCE NO. (DP USE ONLY)  
1 2 3 4 5 6  
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND PERMIT TO DRILL WELL  
please print or type

STATE PERMIT NUMBER  
70 79  
HD-88-0969  
fill in this form completely

Date Received (APA) 062989  
OWNER INFORMATION  
WILLOW SP LIMITED  
15 Last Name 34 Owner First Name  
16801 WESTLEY CH RD  
36 Street or RFD 55  
MONTGOMERY MD 21111  
57 Town 70 State 72 Zip 76

B 3 LOCATION OF WELL  
1 2  
HOWARD 8 COUNTY 21  
WILLOW HIGHLANDS 23 SUBDIVISION 42  
SECTION 44 46 LOT 22 48 50  
WESTER FRIENDSHIP 52 NEAREST TOWN 71  
MILES FROM TOWN (enter 0 if in town) 1 73 76 77 78

DRILLER INFORMATION  
Ralph MAYNE 273  
Driller's Name 77 License No. 80  
Ralph MAYNE well drilling  
Firm Name  
9120 Brown (HURK RD) Mt Airy  
Address  
Ralph Mayne 6/13/89  
Signature Date

B 4  
1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  
N W N E W E S W S S E S  
TOWN  
NEAR WHAT ROAD 11 PIPES LA 30  
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
NORTH W 32 E SOUTH  
34 425 37 DISTANCE FROM ROAD  
ENTER FT or MI 4 38 39

B 2 WELL INFORMATION  
1 2 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)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL  
HOWARD A 38647  
COUNTY NAME COUNTY NO.  
STATE SIGNATURE DATE ISSUED 080489  
CO SIGNATURE EXP. DATE 3/4/90  
NORTH GRID 541000 EAST GRID 0807000

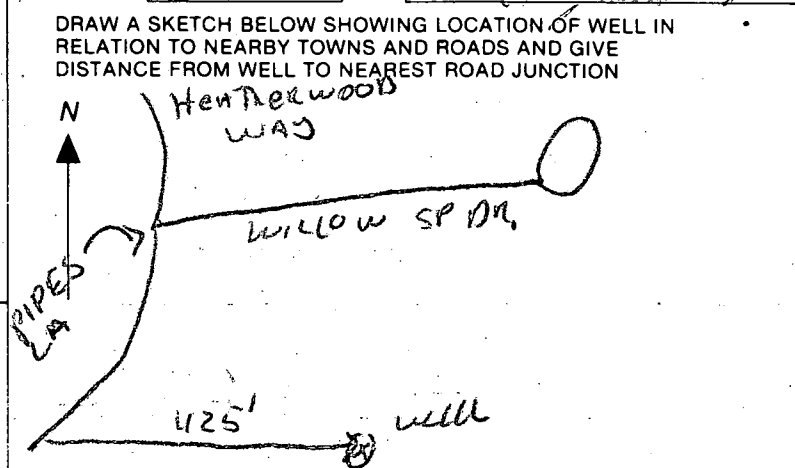
APPROXIMATE DEPTH OF WELL 150 24 28 FEET

APPROXIMATE DIAMETER OF WELL 6" 00 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

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 8097  
N 5401  
10/11/89 9:30 / Well already grouted  
10' Bags of cement  
70' casing  
40' Ground-open  
2' casing above ground (C.B.S.)  
(Tag dated -)

REPLACEMENT OR DEEPEMED 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 DEEPEM AN EXISTING WELL  
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52



Not to be filled in by driller (OEP ONLY)  
APPROP. PERMIT NUMBER 54 GAP 63  
FORCE 67 68 WRITE INITIALS IN BOX PERMIT NO. HD-88-0969 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS

5/7/99  
after 11 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   
Replacement

Receipt # \_\_\_\_\_  
Date 4-23-99

Name of Installer Keith Hundertmark

Telephone 410-857-0255

License Number 8300

Certified Well Pump Installer  Well Driller  Registered Plumber

Name of Property Owner Carl Buch Telephone \_\_\_\_\_

Subdivision Willow Highlands Lot # 22 Well Tag # \_\_\_\_\_

Site Address 13349 Pipes Lane

Pump

- 1. Type
  - a. Deep well jet \_\_\_\_\_
  - b. Shallow well jet \_\_\_\_\_
  - c. Submersible
- 2. Make \_\_\_\_\_
- 3. Model # \_\_\_\_\_
- 4. Capacity \_\_\_\_\_ GPM

Motor

- 1. Horsepower 1/2
- 2. RPM \_\_\_\_\_
- 3. Voltage \_\_\_\_\_
  - a. 110 \_\_\_\_\_
  - b. 220 \_\_\_\_\_

Pitless Adapter

- 1. Make yes
- 2. Model # \_\_\_\_\_
- 3. Depth \_\_\_\_\_

- 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 \_\_\_\_\_

Tank

- 1. Capacity 48
- 2. Pressure relief valve? yes

Piping

- 1. Type 160 psi
- 2. Size 1/2"
- 3. NSF and/or BOCA Code approved yes
- 4. Depth of supply line 42"

Well data

- 1. Depth \_\_\_\_\_ ft.
- 2. Yield \_\_\_\_\_ GPM
- 3. Static water level \_\_\_\_\_ ft.
- 4. Will water supply be disinfected by installer? no

5/7/99  
w/ 1' below grade  
2 1/2' above grade  
2 pvc cap & pvc conduct

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: Keith Hundertmark

Date: 4-23-99

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