

PERMIT

03-314847

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 48875
A 39047

DISTRICT 2nd

DATE 1/21/93

DATE SYSTEM APPROVED 3/8/93

INSPECTOR CW

1/29/93

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~461-9933~~ 313-2640

INDEXED

Paul Schissler/South Carroll Backhoe IS PERMITTED TO INSTALL X ALTER

ADDRESS 4410 Salem Bottom Road, Westminster, Maryland 21157 PHONE 875-4197

SUBDIVISION Amberwoods LOT 14 ROAD 12825 Forest View Court

PROPERTY OWNER Grayson-Homes Rogee & Karen Dewling

ADDRESS

SEPTIC TANK CAPACITY 1500 GALLONS Top Seamed Tank

NUMBER OF BEDROOMS 4

240 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 320

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 140 feet from the rear lot line and 140 feet from the right lot line. Run trenches along contour toward left side of property and maximum trench length 70 feet.

NOTE - Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

PLANS APPROVED BY C. Williams DATE 1/28/93

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 35/40 PVC OR ABS

PERMIT VOID AFTER TWO YEARS

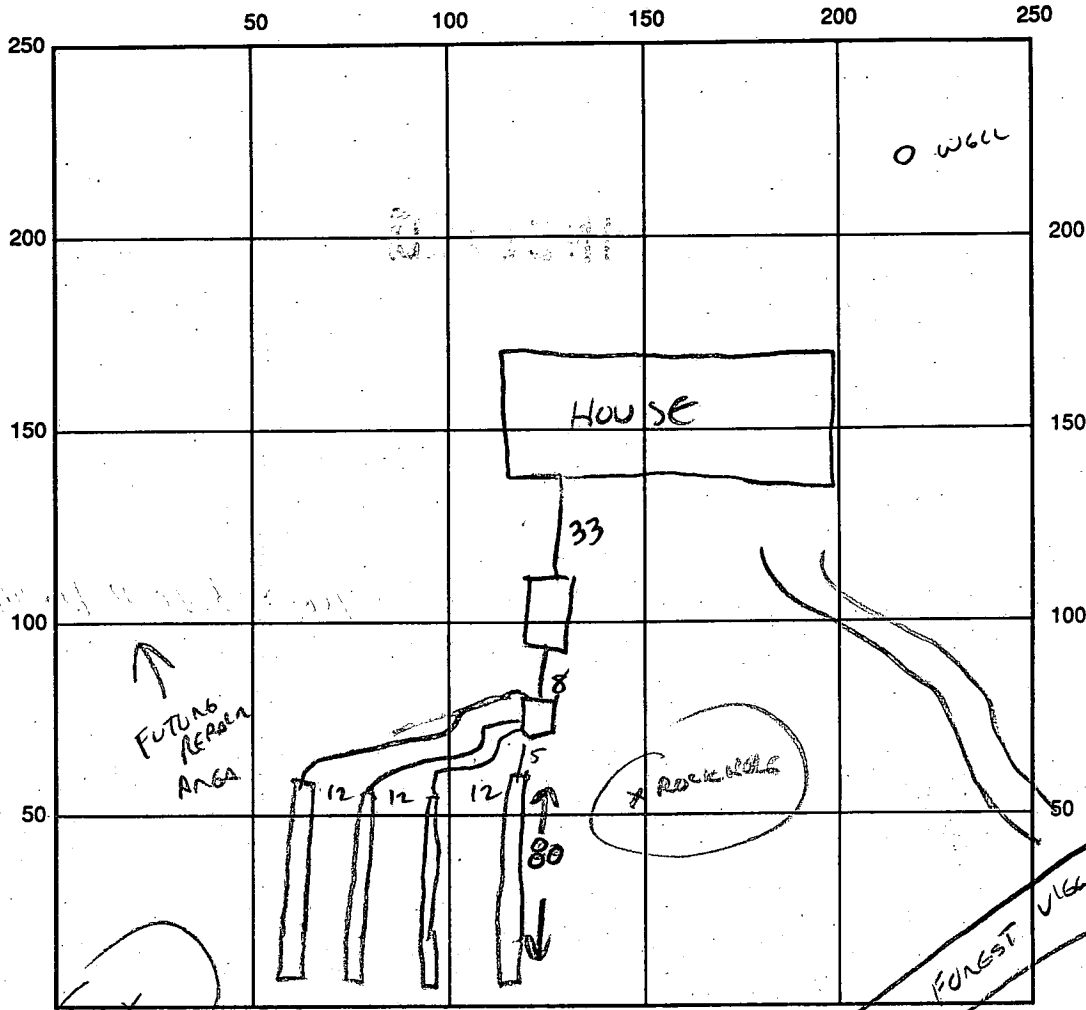
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON, CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

BLDG. PERMIT SIGNED
RETURNED 2/13/93
Serial # 60787
deek

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

A
39047



SEPTIC TANK LEVEL ✓ 1500 G. TOP SEARCHED CLEANOUTS 57 ✓

DISTRIBUTION BOX LEVEL ✓

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

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 320' FT. (4 @ 80')

NUMBER OF TRENCHES 4 ONE SIDEWALL/BOTTOM AREA 960 SQ. FT.

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

ABSORBENT AREA _____ SQ. FT.

REMARKS: 1/28/93 ROCK ENCOUNTERED IN INITIAL SEPTIC ANGA. HOUSE DIFFERS FROM BP PLAN.
RE-PLAN OK TO ESTABLISH NEW RESERVE FIELD - SEE TEST NOTES SEPARATE PAGE. (CW)

1/29/93 TANK AND TRENCHES OK.
 HOUSE CONNECTION AND REVISED SEWAGE EASEMENT PLAN REQ'D FOR
 FINAL APPROVAL. CW

SEWAGE PLAN OK AS REVISED, HOUSE CONNECTION AND WELLING INSTALLATION OK 3/8/93 CW

DATE SYSTEM APPROVED 3/8/93 INSPECTOR CW

1/28/93
AM

APPLICATION

PERCOLATION TESTING

A 39047

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

NO FEE RETEST
ROCK ENCOUNTERED
IN PORTIONS OF
PLATTED S.D.A.

DISTRICT _____

DATE _____

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

RETEST TO REESTABLISH
VIABLE SEPTIC EASEMENT, (CW)

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER GRAYSON HOMES

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION AMBERWOODS LOT NO. 14

ROAD AND DESCRIPTION 12825 FOREST U6W CT

TAX MAP _____ PARCEL # _____

SIZE OF LOT 3+ ACRES TYPE BLDG. SFD
(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 SHALLOW SYSTEM, DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING PLAT OF REVISED SEPTIC EASEMENT REQ'D (CW)

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

A 39047

COUNTY#

SOIL PROFILE

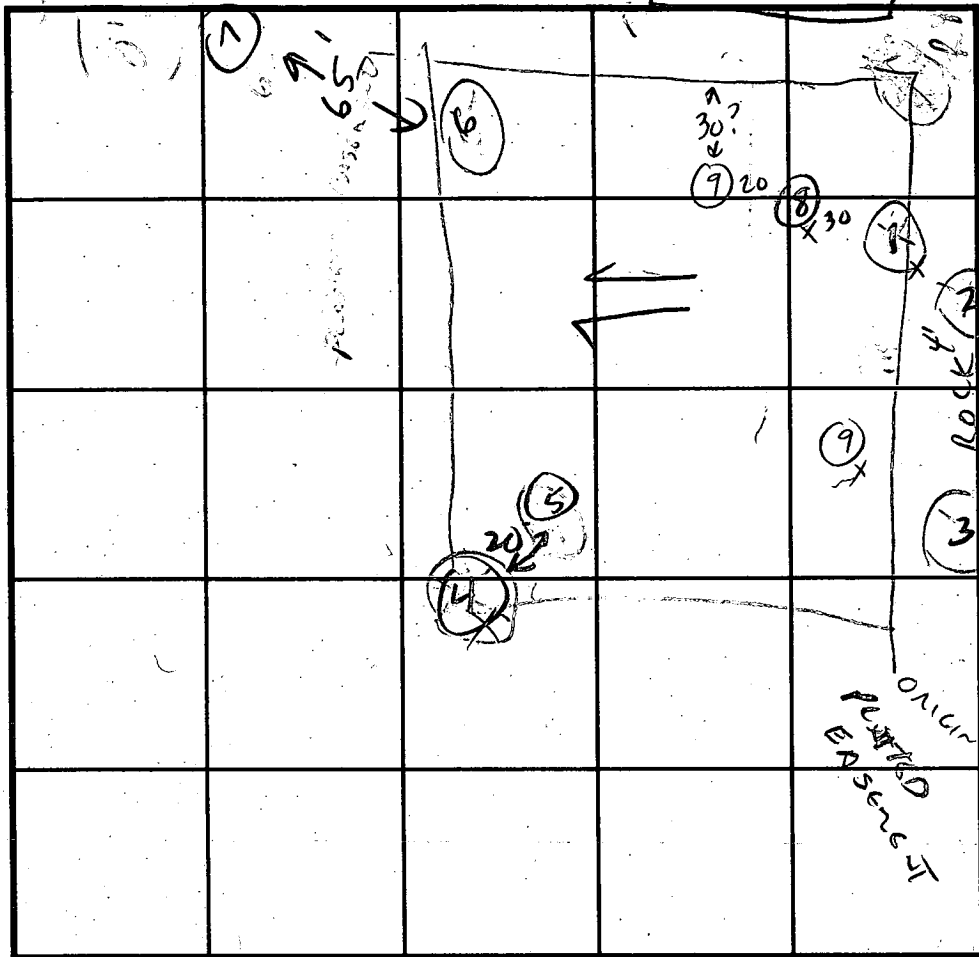
#1 1,2,3,4,9
 B60 ROCK AT 2-5' FAIL

#8 SAND LOAM MIXED W/ ROCK 3-8' 30-40% FAIL

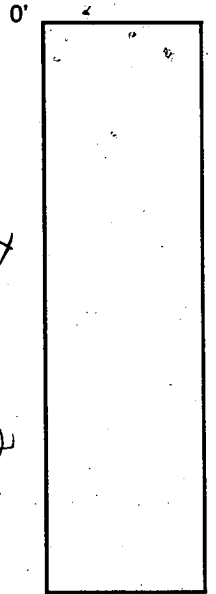
#5 CLAY
 2 CLAY-SAND LOAM
 5 SAND LOAM
 12 ROCK BOTTOM

#6 #7 CLAY
 2 CLAY-SAND LOAM
 5 SAND LOAM

HOUSE



SOIL PROFILE



DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
1/28/93	#1,2,3,4,9	ROCK AT 2-5' - FAIL					8 MIN est
	5	3					2 MIN est
		8					
		12	SAND LOAM 2-12' ROCK BOTTOM				
	6,7	3					8 MIN est OK
		8					2 MIN est OK
		12	UIS OK	3-12			
	8	SAND LOAM BUT MIXED W/ VARIABLE ROCK POCKETS					

REMARKS Original test of soil for location of trenching in TO

TYPE OF SOIL SAND LOAM - SPORADIC ROCK - KEEP SYSTEM SHALLOW!

TESTED BY C. Williams ALSO PRESENT SCHISSEK, PETER BUSH

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 8 MIN TRENCH WIDTH 3

INLET DEPTH 3 MAXIMUM BOTTOM DEPTH 5 SQ. FT./BEDROOM 240

4/13/87

APPLICATION

PERCOLATION TESTING

A 39047

P _____

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

DISTRICT 3

DATE 3/4/87

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 George Arrington Grayson Homes Inc

ADDRESS 1050 Syksville Rd. West Friendship PHONE 301-776-7454

PROSPECTIVE BUYER Amberwoods Limited Partnership

ADDRESS 1420 Fenwick Lane Silver Spring PHONE 301-587-5455

PROPERTY LOCATION:

SUBDIVISION Amberwoods (5-87-42) LOT NO. 15 NW 14

ROAD AND DESCRIPTION Rt 32 north of Rt 99
(12225 Forestview Court)

BLDG. PERMIT SIGNLD
AND RETURNED 12/1/87
Serial # 40577-

TAX MAP 9 PARCEL # 144

SIZE OF LOT 3.06 Ac TYPE BLDG. Single Family
(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.

Sam Nogala
(SIGNATURE OF APPLICANT)

APPROVED BY C. Williams FOR _____ DATE 4/19/89

REJECTED BY _____ FOR _____ DATE _____

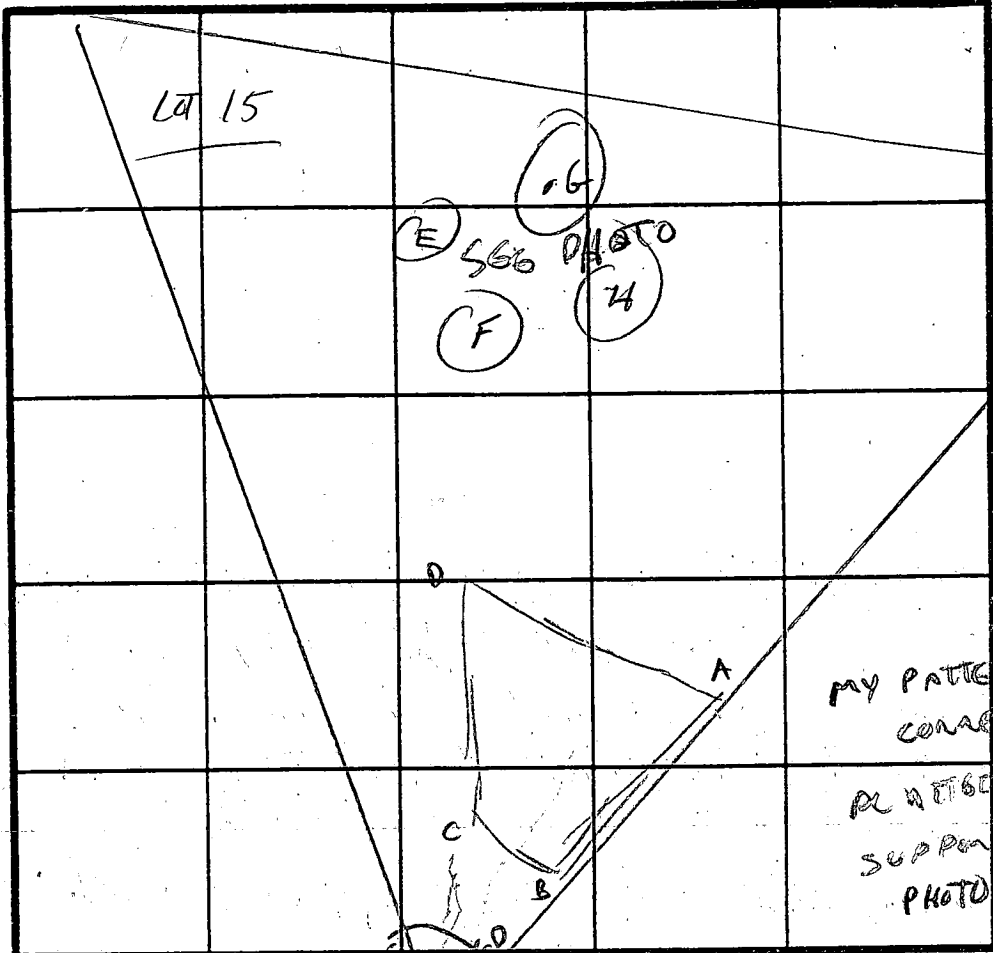
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

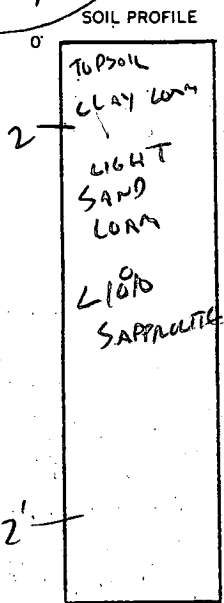
15 E, F, H

X = 5. MIN
180
INLET 2'
BOTTOM 7'



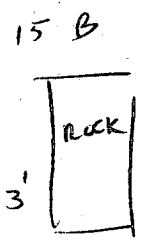
MY PATTERN NOT
CORRECT,
PLEASE PATTERN
SUPPORT BY
PHOTO.

INDICATE NORTH - NAME ADJOINING ROADWAY AS-BASE LINE.



15 G

SIMILAR
TO
E/F/H
SOILS
DARK



DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/13	15 B	ROCK 3'					
4/13	15 E	3' 7'	12:10 12:10	12:12 12:12	12:12 12:12	12:16 12:15	4 MIN 3 MIN
		VIS	OK 12'				
4/13	15 F	VIS	OK 1-	12'			
4/13	15 G	4 12	12:18 12	12:20 VIS	12:20 OK	12:23	3 MIN
4/13	15 H	3	12:17 VERY SANDY	12:23 AT 4'	12:23	12:30	7 MIN
		12	VIS	OK -	LOAD		

REMARKS _____

TYPE OF SOIL SANDY LOAM VERY LITTLE ROCK IN TEST AREA ABOVE 10'

TESTED BY CWELTON ALSO PRESENT _____

EH-12-1079

LOT 16
(SEE SHEET #)

LOT 15
3.000 AC.

"FUTURE"
GRADING & SEDIMENT
CONTROL

DISTURBED AREA
29,590 sq. ft.

HENRY F. HERZING, JR.
830/325

NOTE: BASEMENT EL. (523.72) NOT
SEWERABLE BY MEANS OF GRAVITY FLOW

LOT 14
3.0001 AC.

DEVELOPER'S/BUILDER'S CERTIFICATE
I/WE CERTIFY THAT ALL DEVELOPMENT AND CONSTRUCTION WILL BE DONE
ACCORDING TO THESE PLANS, AND THAT ALL RESPONSIBLE PERSONS INVOLVED IN
THE CONSTRUCTION PROJECT WILL HAVE A CERTIFICATE OF ATTENDANCE AT A
DEPT. OF NATURAL RESOURCES APPROVED TRAINING PROGRAM FOR THE CONTROL
OF SEDIMENT AND EROSION CONTROL BEFORE BEGINNING THE PROJECT. I ALSO
AUTHORIZE PERIODIC ON-SITE INSPECTION BY THE HOWARD SOIL CONSERVATION
DISTRICT OR THEIR AUTHORIZED AGENTS AS DEEMED NECESSARY.

Floyd Grason for Grason Homes, Inc. _____ DATE _____

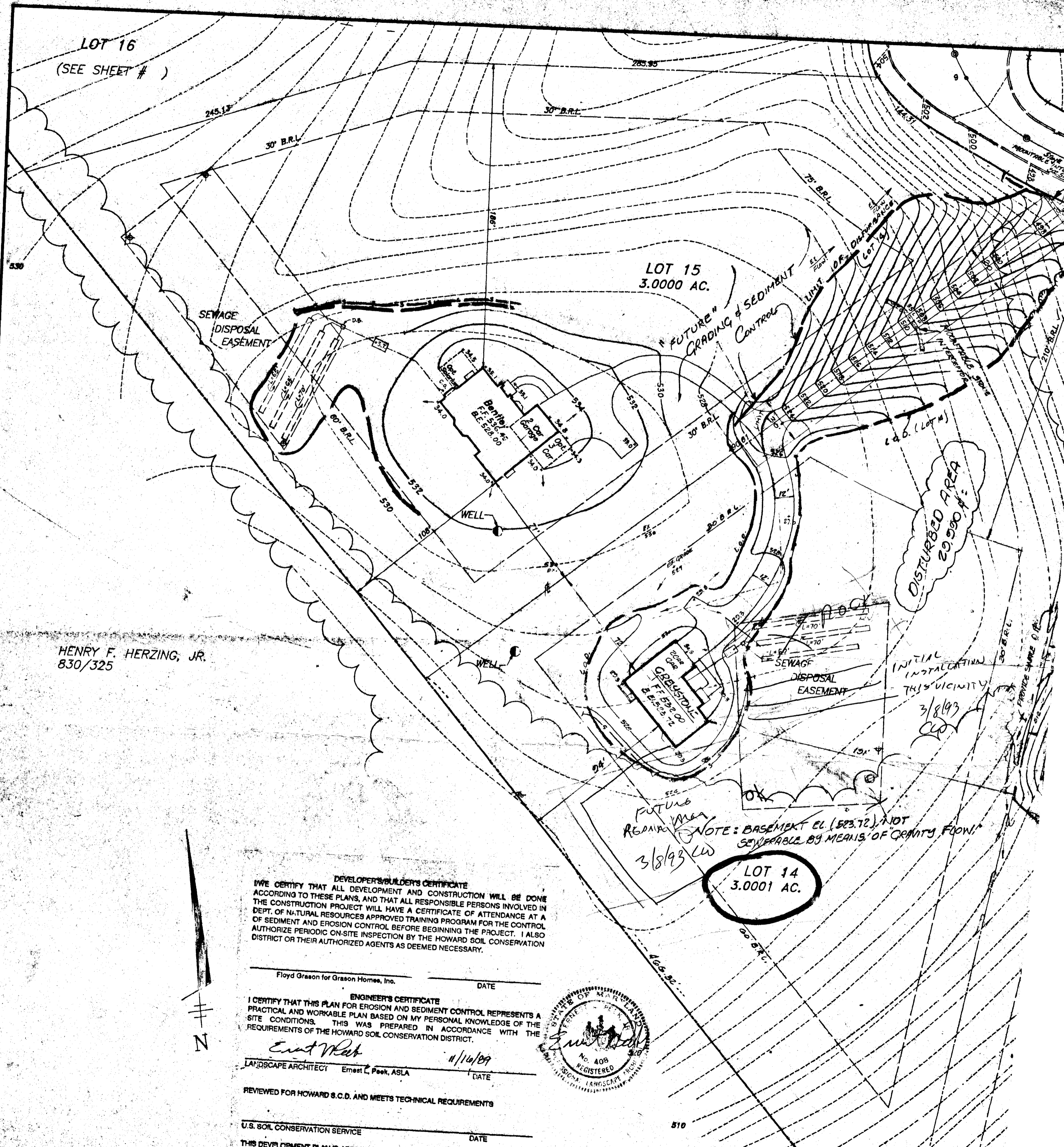
ENGINEER'S CERTIFICATE
I CERTIFY THAT THIS PLAN FOR EROSION AND SEDIMENT CONTROL REPRESENTS A
PRACTICAL AND WORKABLE PLAN BASED ON MY PERSONAL KNOWLEDGE OF THE
SITE CONDITIONS. THIS WAS PREPARED IN ACCORDANCE WITH THE
REQUIREMENTS OF THE HOWARD SOIL CONSERVATION DISTRICT.

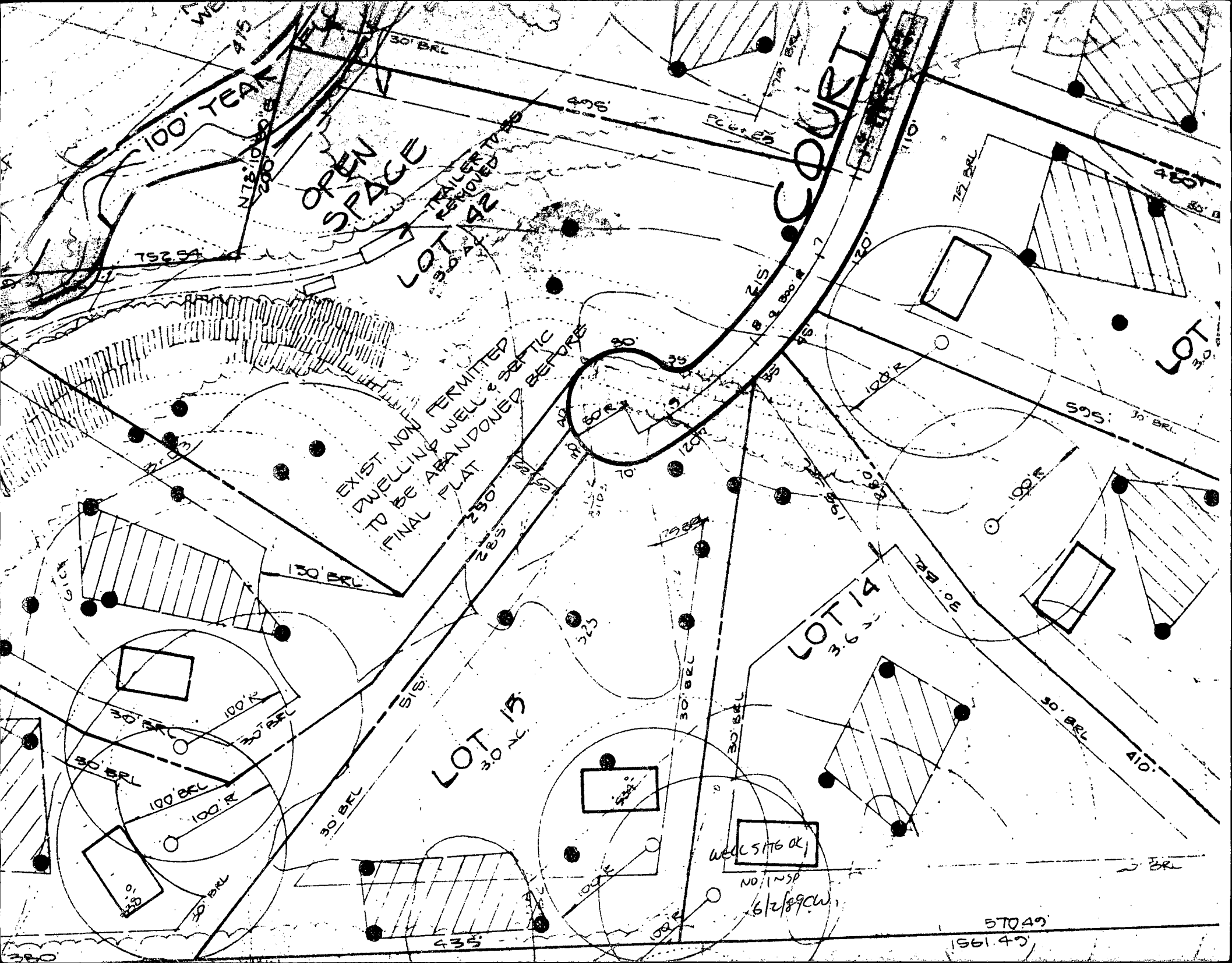
Ernest C. Peek _____ DATE *11/14/89*
LANDSCAPE ARCHITECT Ernest C. Peek, ASLA

REVIEWED FOR HOWARD S.C.D. AND MEETS TECHNICAL REQUIREMENTS

U.S. SOIL CONSERVATION SERVICE _____ DATE _____

THIS DEVELOPMENT PLAN IS APPROVED FOR SOIL EROSION AND SEDIMENT
CONTROL BY THE HOWARD SOIL CONSERVATION DISTRICT





100' TEAK

OPEN SPACE

LOT 12
3.6 AC

EXIST. NOW PERMITTED
DWELLING WELL & SEPTIC
TO BE ABANDONED BEFORE
FINAL FLAT

LOT 15
3.0 AC

COURT

LOT 14
3.9 AC

LOT 10
3.0 AC

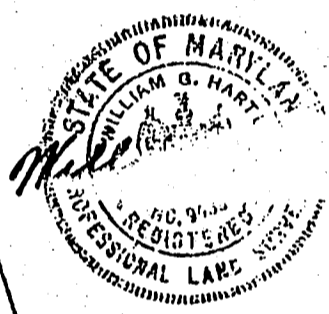
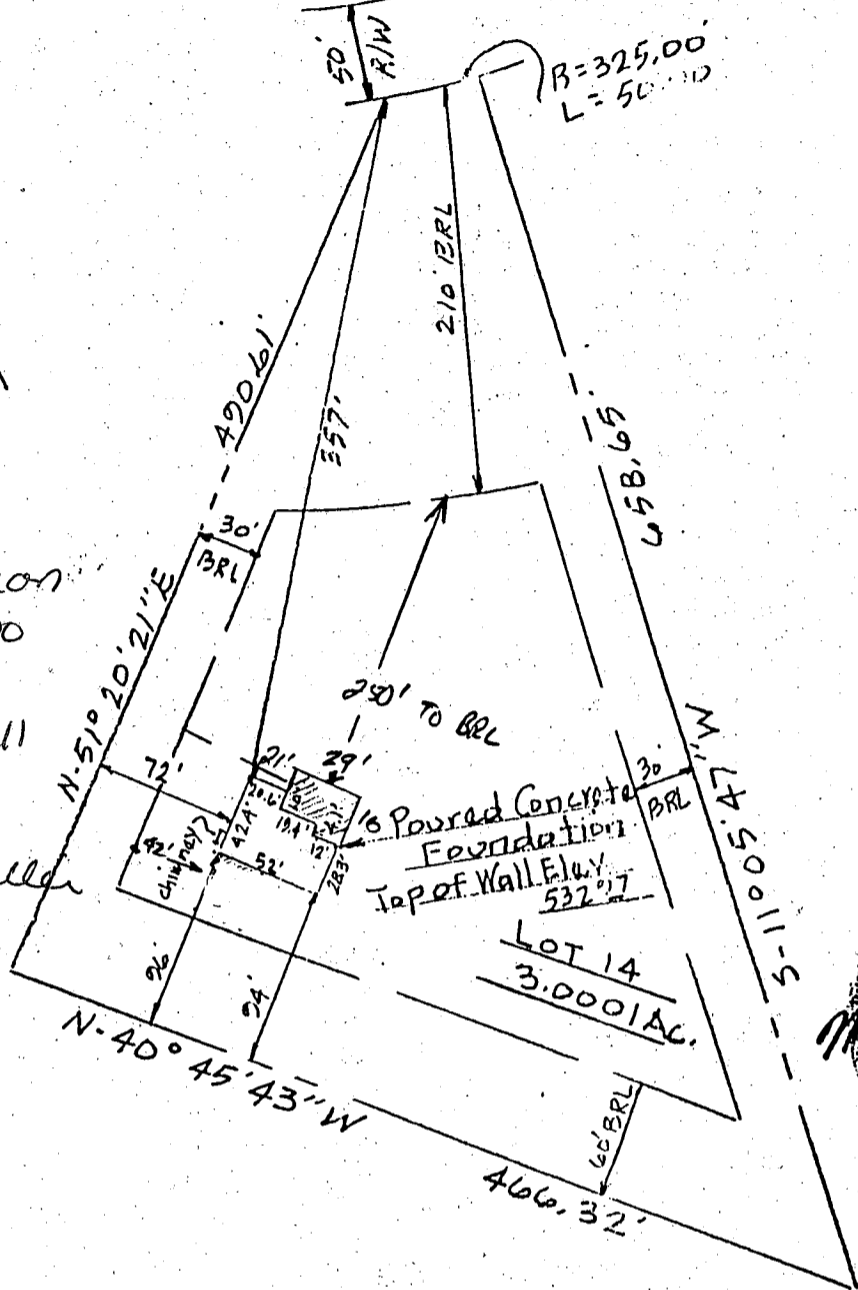
WELL 5176 OK
NO. 125P
6/2/89CW

57049

1561.47

FORESTVIEW COURT

7-13-95
 Proposed deck location will have no impact to existing well and septic.
 Amy M. Miller



The Lot shown hereon does not lie within the limits of a recorded Flood plain Easement

Plat Reference: Amberwoods - Plat of Correction Section One - Lots 1 through 42, recorded in Platbook 9704

TITLE LOCATION SURVEY					THIS IS TO CERTIFY THAT WE HAVE CONDUCTED A LOCATION SURVEY OF THE IMPROVEMENTS AND THAT THEY ARE LOCATED AS SHOWN HEREON. <i>William G. Hart</i> SIGNATURE REG. NO. <u>9436</u> DATE <u>1-27-93</u>
PROJECT LOT 14-AMBERWOODS-SECTION ONE					
LOCATION 3RD ELECTION DISTRICT, <u>HOWARD</u> CO., MD.					
FIELD BOOK <u>130</u>	PAGE NO. <u>35</u>	DRAWN BY: <u>BH</u>	CHECKED BY <u>WGH</u>	DATE: <u>1-27-93</u>	Boender Associates LEGAL CONSULTANTS, PLANNERS, SURVEYORS 3230 BETHANY LANE ELLICOTT CITY, MD. 21043 (301) 465-7777 FAX: (301) 465-7966
SCALE <u>1" = 100'</u>		JOB NO.: <u>91008</u>			
THE INFORMATION ON THIS PLAT SHOWS ONLY THAT THE IMPROVEMENTS INDICATED HEREON ARE CONTAINED WITHIN THE CONFINES OF THE LOT UPON WHICH THEY ARE ERECTED. THIS PLAT IS NOT TO BE CONSTRUED AS, OR USED FOR THE ESTABLISHMENT OF PROPERTY LINES.					

B 1 02241

SEQUENCE NO. (DP USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL

STATE PERMIT NUMBER

H0-92-0265

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

please print or type

fill in this form completely.

Date Received (APA)

OWNER INFORMATION

Grayson Amberwoods P...
15 Last Name Owner First Name 34
1 Centre Park Drive
36 Street or RFD 55
57 Columbia MD 21045
70 State 72 Zip 76

LOCATION OF WELL

Howard
8 COUNTY 21
Amberwoods
23 SUBDIVISION 42
SECTION 44 46 LOT 14 48 50
Sykesville
52 NEAREST TOWN 71
MILES FROM TOWN (enter 0 if in town) 2 MI
73 76 77 78

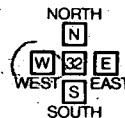
DRILLER INFORMATION

Paul M. Fabiazak 399
Driller's Name 77 License No. 80
G. Edgar Harr Sons' Corp.
Firm Name
12047 Falls Rd Cockeysville 21030
Address
Signature Date 11/11/92

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
N W N E
8-9 8-9
W TOWN E
8 8
S W S E
8-9 8-9
S

12825 Forest View Court
11 NEAR WHAT ROAD 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



34 300 37
DISTANCE FROM ROAD

ENTER FT or MI

F A
38 39

WELL INFORMATION

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

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 A39047
COUNTY NAME COUNTY NO.
STATE SIGNATURE DATE ISSUED 12/16/92
CO SIGNATURE EXP. DATE 5/16/92
NORTH GRID 548000 EAST GRID 0808000

APPROXIMATE DEPTH OF WELL 200 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH. NEAREST

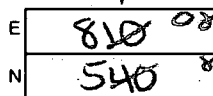
METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN
AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary)
CABLE REVerse-ROTary Drive-POINT
other

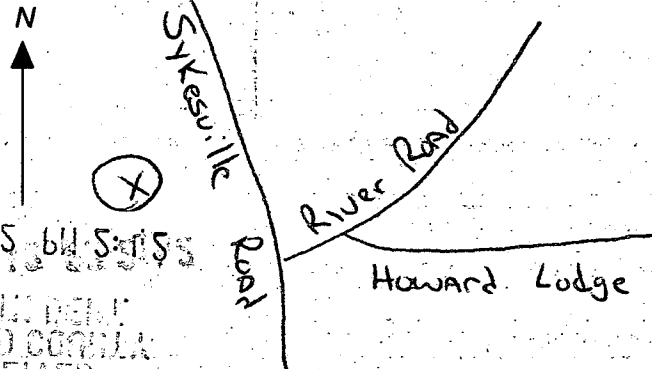
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

WRITE THE BOX NUMBER FROM THE MAP HERE



DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION



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 DEEPEMED AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)

Not to be filled in by driller (OEP USE ONLY)

APPROX. PERMIT NUMBER GAP

FORCE CW PERMIT No. H0-92-0265

SPECIAL CONDITIONS

C1 7626

SEQUENCE NO. (DENV 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 A39047

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED

Depth of Well (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL"

OWNER last name first name TOWN SUBDIVISION 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. Rows include Overburden, Shale & Boulder, Granite.

GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GRROUTING MATERIAL CEMENT BENTONITE CLAY NO. OF BAGS NO. OF POUNDS GALLONS OF WATER DEPTH OF GROUT SEAL

CASING RECORD casing types insert appropriate code below MAIN CASING TYPE Nominal diameter top (main) casing Total depth of main casing

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

SCREEN RECORD screen type or open hole insert appropriate code below

DEPTH (nearest ft.)

CIRCLE APPROPRIATE LETTER A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED ELECTRIC LOG OBTAINED 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. DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

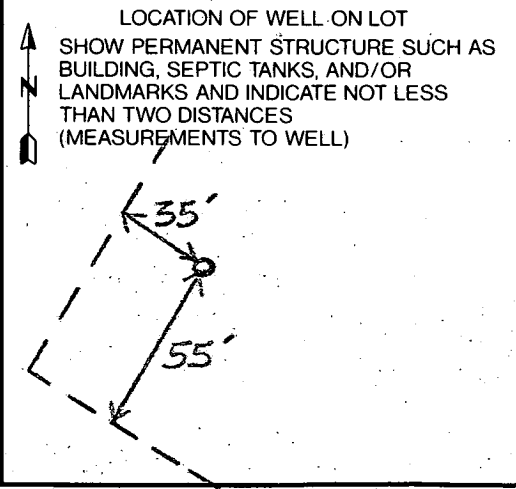
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

SLOT SIZE DIAMETER OF SCREEN GRAVEL PACK 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.) W Q TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST HOURS PUMPED (nearest hour) PUMPING RATE (gal. per min. to nearest gal.) METHOD USED TO MEASURE PUMPING RATE WATER LEVEL (distance from land surface) BEFORE PUMPING WHEN PUMPING TYPE OF PUMP USED (for test)

PUMP INSTALLED DRILLER WILL INSTALL PUMP (CIRCLE) (YES OR 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) LAND SURFACE (nearest foot)



2/29/93
12:00
OK TO COVER
IF NO INSP
BY 11:30 AM

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043
461-9933

SNOW COVERED

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation
Replacement

Receipt # 44052
Date 2/1/93

Name of Installer J. JOSEPH GARTLAND, INC.

Telephone 875-2400

License Number 1713

Certified Well Pump Installer Well Driller Registered Plumber

Name of Property Owner GRAYSON HOMES, INC.

Telephone 461-5900

Subdivision Arboretum Woods Lot # 14

Well Tag # HO-92-0265

Site Address 12825 FOREST VIEW COURT.

Pump

- Type
 - Deep well jet
 - Shallow well jet
 - Submersible
- Make Goulds
- Model # 10EJ05422
- Capacity 10 GPM
- Pump exceeds well capacity Yes No
- If Yes, is low pressure cutoff switch installed? Yes No
- What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors Cable guards Other

Motor

- Horsepower 1/2
- RPM
- Voltage 220
 - 110
 - 220

Pitless Adapter

- Make HARVARD
- Model # PT800
- Depth 42"

Tank

- Capacity 42 gal.
- Pressure relief valve? 75 psi

Piping

- Type PLASTIC
- Size 1"
- NSF and/or BOCA Code approved
- Depth of supply line 42"

Well data

- Depth 300 ft.
- Yield GPM
- Static water level ft.
- Will water supply be disinfected by installer? Yes

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: 1/28/93

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