

5/7/91 wood
5/8/91 2000

04-348664

PERMIT

P 47001

3922
DEPARTMENT OF HEALTH AND MENTAL HYGIENE
4th

A 39229

DISTRICT 4th

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

DATE 04/16/91

DATE SYSTEM APPROVED 5/8/91

INSPECTOR RJH

INDEXED

Frall Septic Service IS PERMITTED TO INSTALL X ALTER

ADDRESS P. O. Box 659, Mt. Airy, Maryland 21771 PHONE 795-5674

SUBDIVISION Foxport Plantation LOT 17 ROAD 15516 Fox Paw Trail

PROPERTY OWNER J.B. & Sons, Inc. R. Dale + Adrienne McCollum

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

240 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 192

TRENCHES - Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 3 feet below original grade. 5 feet of stone below distribution pipe.

LOCATION - Place the distribution box 220 feet from the back lot line and 100 feet from the left sideline as seen when facing the lot from Fox Paw Trail. Run the trenches toward the rear.

NOTE - No trench to exceed 100 feet in length. Provide 6" -8" diameter cleanout and cap to grade or above on septic tank. OK 4/15/91 RJH

PLANS APPROVED BY Ray Hodges DATE 2/03/89

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, 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

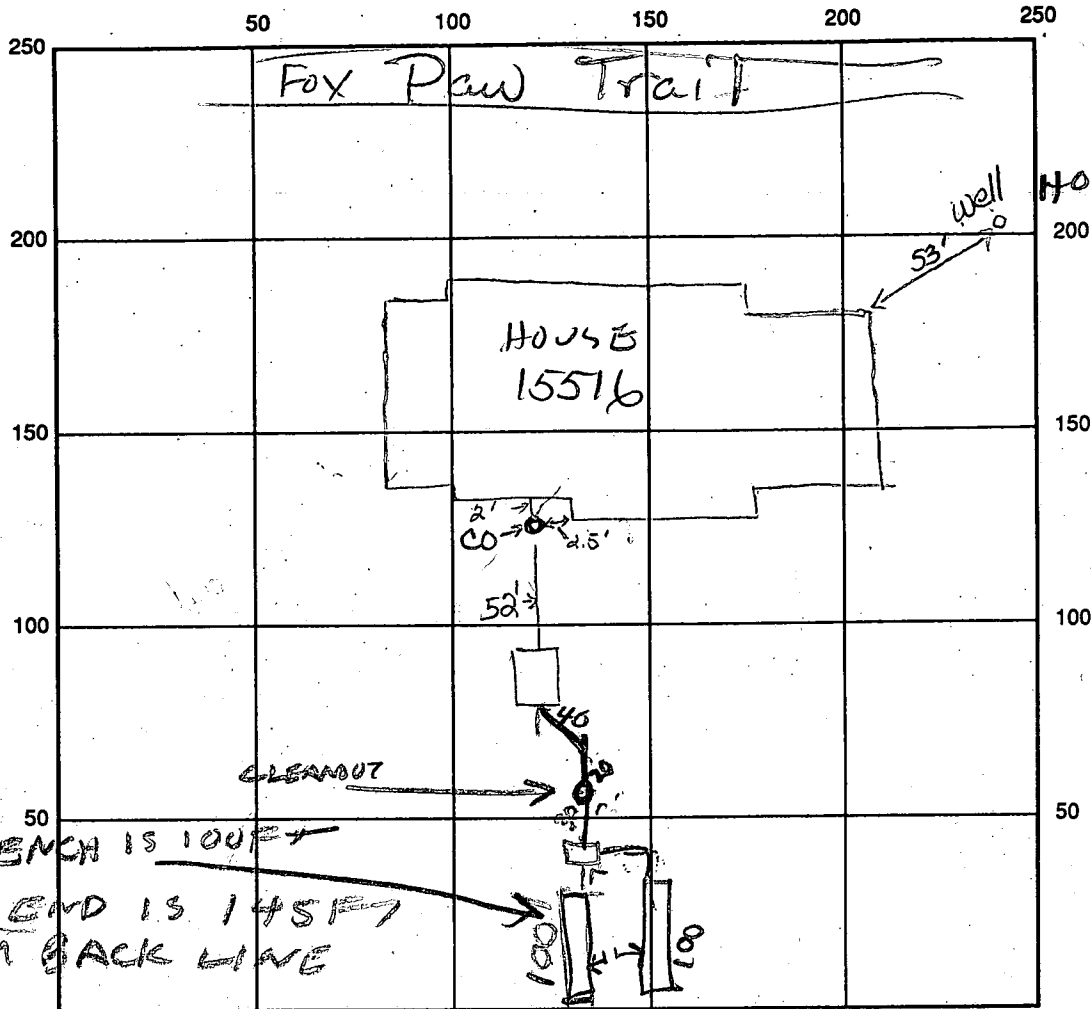
BLDG. PERMIT SIGNED
AND RETURNED 11/23/92
Serial # 46212 - Shed

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**

A 39229



H082-0411

TRENCH IS 100 FT
 LONG END IS 145 FT
 FROM BACK LINE
 LOT 17

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
 BACK HOUSE SEWEN TANK AFTER TANK

SEPTIC TANK LEVEL OK 1250 CLEANOUTS 018 12' from house OK

DISTRIBUTION BOX LEVEL _____

DRAIN FIELD/TITLE DEPTH 8.5 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 1 FT. TOTAL LENGTH 100 FT. 200

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 1000 SQ. FT.

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

ABSORBENT AREA _____ SQ. FT.

REMARKS: 5-7-91 Septic tank level, OK to backfill from st. to house, D.B.

5/8/91 LOCATION OF TRENCH OK PER PLANS

TRENCH #1 OK, DIG TRENCH #2 RH

5/9/91 PM - TRENCH #2 OK RH

DATE SYSTEM APPROVED 5/9/91 INSPECTOR Raymond Holger

RE: Lot 17 Foxpaw Trail
5-7-91

145
100

245
7

559

Craig Williams,

Please note that the foundation was plumbed from a different location of the house than noted on the plan and contractor has started septic system from different area. Contractor says elevation was measured with transit, elevations are visibly different to one. Contractor has only 1" septic tank to house. There's so much rock in well line area it may have caused the failure of his backhoe. There's 5 to 10% rock in septic tank area. Perc notes only show that in one hole of easement area. If you decide the area where pipe comes from the house is ok, maybe you'll want a test at final for gravity flow. This may not be possible with co. so close to house.

D. Buggs

APPLICATION

PERCOLATION TESTING

A 39229
P _____
DISTRICT 4TH
DATE 4-24-87

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

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 DONALD RIPPEON J B + Sons, Inc

ADDRESS 15474 BUSHY PARK RD PHONE 384-9257

PROSPECTIVE BUYER UNITED GENERAL CONTRACTORS

ADDRESS 8370 COURT AVE, ELLICOTT CITY PHONE 461-2227

PROPERTY LOCATION: FOXPORT PLANTATION
SUBDIVISION RIPPEON PROPERTY LOT NO. 17

ROAD AND DESCRIPTION CORNER OF CARR'S MILL & BUSHY PARK ROAD, WOODFINE,
HOWARD COUNTY (15376 Foxport Trail)

TAX MAP 14 & 8 PARCEL # 9 & 12

SIZE OF LOT @ 3 acre lot 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.

APPROVED BY BH FOR Trencher DATE 2/3/87
(SIGNATURE OF APPLICANT)

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

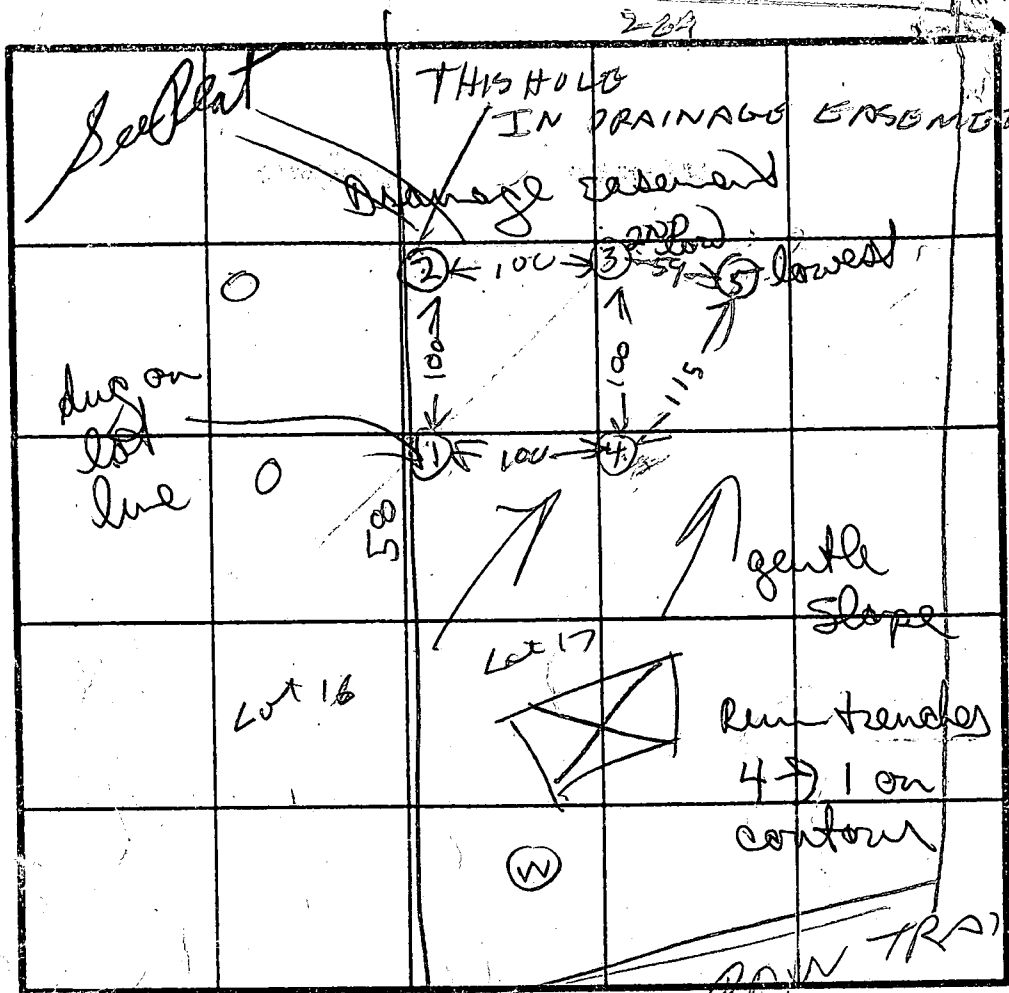
REASONS FOR REJECTION OR HOLDING 6/18/87 Per OK Hold for Plat BH
9/9/87 Extra hole OK BH

FOR DEPOSIT ONLY
HOWARD COUNTY HEALTH DEPARTMENT
10-103616-02

BOG. PERMIT SIGNED AND RETURNED 10/25/89
Serial # 29662-SFD-4 Bed.

THIS IS NOT A PERMIT

Lot 17 7/16



HOLE ELEV

① HIGH

⑤ LOW

② MEDIUM

max depth 4' 10 min

SOIL PROFILE

0

BROWN CLAY

3

PINK BROWN SAND LOAM

125

②

BROWN CLAY

4

ORANGE BROWN SAND LOAM

135

③

BROWN CLAY

4

TAN/PINK BROWN SAND LOAM

125

④

BROWN CLAY

32

PINK BROWN SAND LOAM

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
6/12/87	1S	3.5	1057	1108	1108	1132	24
	1V	12.5	OK				
	2S	4.5	1100	1118	1118	1130	12
	2V	13.5	OK				
	3S	4.5	1138	1150	1150	1207	17
6/19/87	3V	12.5	OK				
	4S	4	1145	1150	1150	1150	8
	4V	11	OK				
9/9/87	5V	13	OK				

ONLINE HOLE Lot 16 & 17

ONLINE HOLE Lot 16 & 17

⑤

BROWN CLAY

PINK BROWN SAND LOAM

13

15/12

REMARKS: Holes dug per test plat 9/9/87 HOLE (5) EXTRA DUG BECAUSE ONE OF ORIGINAL HOLES IN DRAINAGE EASEMENT

TESTED BY: R HODGES

ALSO PRESENT: DONNA BROWN 6/18/87, JEFF ALLEN 9/9/87, KYLE NICHOLS, DAVE FLANER 6/12/87, 9/9/87

B 1 1154 SEQUENCE NO. (DP 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

STATE PERMIT NUMBER
 40-88-0411
 fill in this form completely

B 2 OWNER INFORMATION
 Date Received (APA) 3/20/89
 THE BRYANT GROUP
 2815 HAKALAND ROAD
 FALLS CHURCH VA 22043

B 3 LOCATION OF WELL
 HOWARD COUNTY
 FOXPORT PLANTATION
 SECTION 17 LOT 17
 GLENWOOD
 MILES FROM TOWN 2 1/2 MI

B 3 DRILLER INFORMATION
 Joseph L. Mayne
 238
 JOSEPH L. MAYNE WELL DRILLING
 5512 RIDGE RD. MT. AIRY MD. 21771
 Joseph L. Mayne 1/10/89

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
 Foppas Trail
 NEAR WHAT ROAD
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 DISTANCE FROM ROAD 90 FT
 ENTER FT or MI FT

B 2 WELL INFORMATION
 APPROX. PUMPING RATE (GAL. PER MIN.) 5
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

B 2 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 A39229
 COUNTY NAME COUNTY NO.
 STATE SIGNATURE Raymond W. Hodges INSERT S
 DATE ISSUED 021789
 CO SIGNATURE Raymond W. Hodges EXP. DATE 02/11/89
 NORTH GRID 541000 EAST GRID 0785000

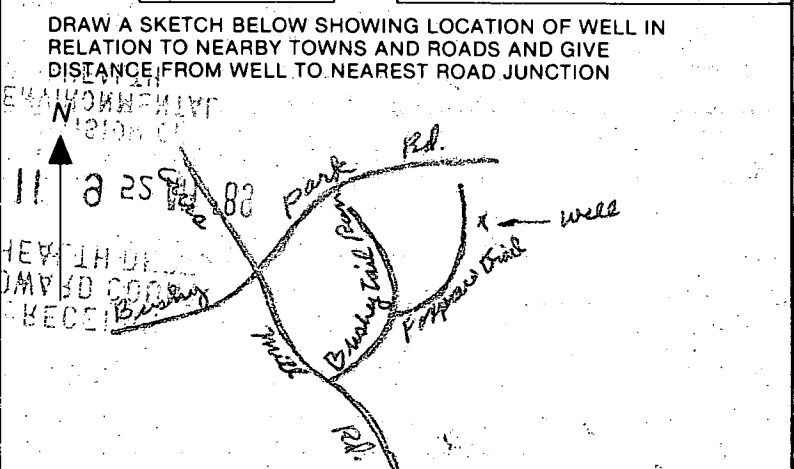
APPROXIMATE DEPTH OF WELL 220 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH

B 2 METHOD OF DRILLING (circle one)
 BORED (or Augered) AIR-ROTary
 JETTED
 Jetted & DRIVEN
 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
 WRITE THE BOX NUMBER FROM THE MAP HERE
 7825
 5421
 84' CASING
 50' OPEN GROUT
 15 BAGS (NOT OBS'D)
 1' CASING A.G.
 3/20/89 MR
 VTAG OK

B 2 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)



Not to be filled in by driller (OEP USE ONLY)
 APPROP. PERMIT NUMBER GAP
 FORCE RH PERMIT No. 40-88-0411

SPECIAL CONDITIONS

Glenwood

C1 6753

SEQUENCE NO. (DENV 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 39229

DATE Received

DATE WELL COMPLETED 092089

Depth of Well 965 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 110-22-0411

OWNER GROUP last name RYANT first name STREET OR RFD FOX PAW TRAIL TOWN GLENWOOD SUBDIVISION FOXPORT PLANTATION SECTION LOT 17

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 Brown Shale (0-78) and Blue Rock (78-365).

GROUTING RECORD WELL HAS BEEN GROUTED (Y) (N) TYPE OF GROUTING MATERIAL CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 15 NO. OF POUNDS 1410 GALLONS OF WATER 90 DEPTH OF GROUT SEAL (to nearest foot) from 0 to 50 ft.

CASING RECORD casing types insert appropriate code below (S, T, CO, PL, OT) MAIN CASING TYPE (S, T) Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 84

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

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

DEPTH (nearest ft.) DEPTH OF SCREEN (nearest ft.) H O 83 365

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. 231

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

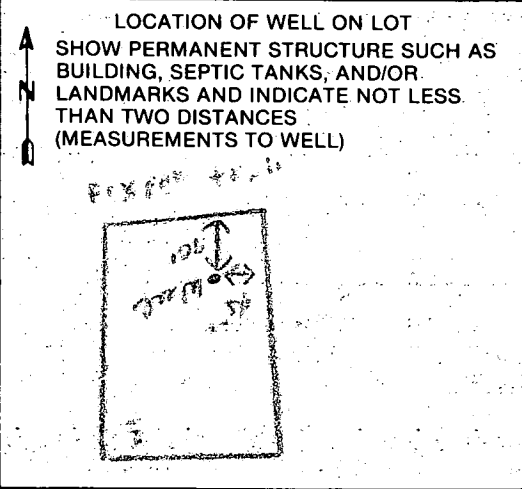
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

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

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

PUMPING TEST HOURS PUMPED (nearest hour) 6 PUMPING RATE (gal. per min. to nearest gal.) 204 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 57 WHEN PUMPING 253 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 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)



COUNTY

5/8/91 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 PUMP PERMIT
Replacement _____
Name of Installer Marino P.H. Inc. Telephone 747-5615
License Number M-3095
Certified Well Pump Installer _____ Well Driller _____ Registered Plumber
Name of Property Owner J+B Builders + Son Telephone 1-301-384-9251
Subdivision Fol Part Plantation Lot # 17 Well Tag # 112-28-0411
Site Address 15516 FOX PAW T. RD

Pump
1. Type
a. Deep well jet _____
b. Shallow well jet _____
c. Submersible
2. Make David
3. Model # SES07412
4. Capacity 5 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 1/4
2. RPM _____
3. Voltage 230
a. 110 _____
b. 220

Pitless Adapter
1. Make David
2. Model # SES07412
3. Depth 365'

Tank
1. Capacity WX203
2. Pressure relief valve? YES

Piping
1. Type Plastic
2. Size 1"
3. NSF and/or BOCA Code approved YES
4. Depth of supply line 48"

Well data
1. Depth 365 ft.
2. Yield 2.4 GPM
3. Static water level 57 ft.
4. Will water supply be disinfected by installer? NO

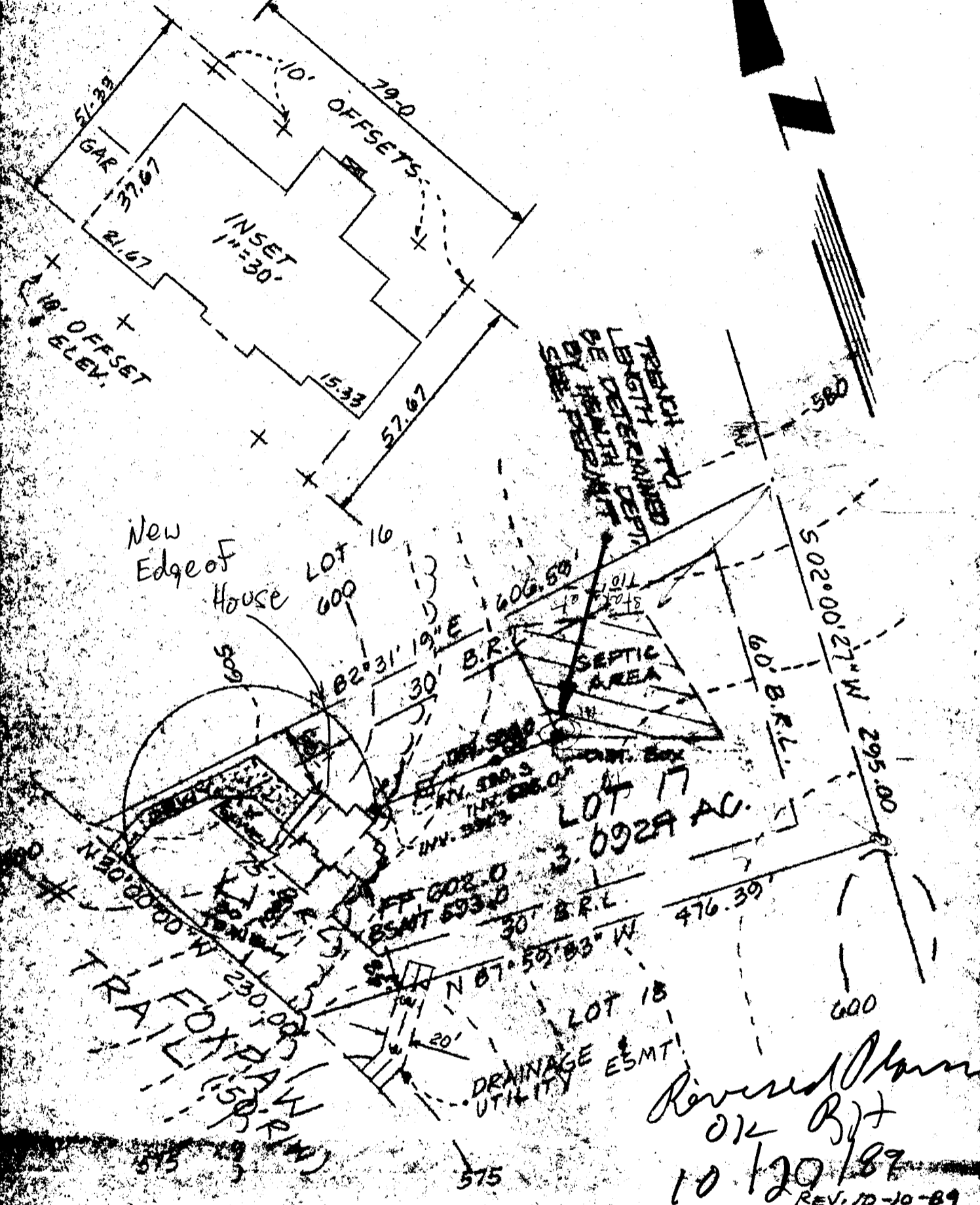
I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.
Signature of Applicant: Joseph D. Marino
Date: 5-8-91

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

HD-215 5/8/91 OK TO COVER OUTSIDE WORK
PRESSURE TANK NOT YET
INSTALLED 09/11

PLAN
 PORT PLANTATION
 ELECTION DISTRICT
 HOWARD COUNTY MARYLAND



Revised Plan
 OK Bit
 10/20/89
 REV. 10-10-89

Tri-County Surveys, Inc. BOX 65 • BARABOUS, MARYLAND 20672 • (301) 831-3665 LAND PLANNING CONSULTANTS • SURVEYORS • L.S. & C.S. LICENSEES	REFERENCE Plat _____ Book _____ Page _____ No. 5420	COUNTY OF HOWARD	Drawn by: CLW
	SURVEYOR'S CERTIFICATE I hereby certify that the property delineated herein is the result of a survey conducted under deed of record, that the measurements were located by adjacent property owners and/or by structures and monuments of land. This Plan is not for recordation purposes, but is intended for the use of present owners of property and also those who purchase, through or otherwise, the land herein, within six months from the date hereof, and as to those I warrant the accuracy of this Plan.		Checked by: _____ Job No.: _____ Scale: 1"=100' DATE: 7/1/89 Plot Plan 7/1/89 Well Ck.: _____ Final Loc.: _____ Record: _____
Note: House does not lie within a flood hazard area			

NOTE: This drawing is not intended or represented to be a final survey, and is not to be used, or relied upon, for the purpose of any legal action or other transaction, the responsibility is reserved hereby by Tri-County Surveys, Inc.

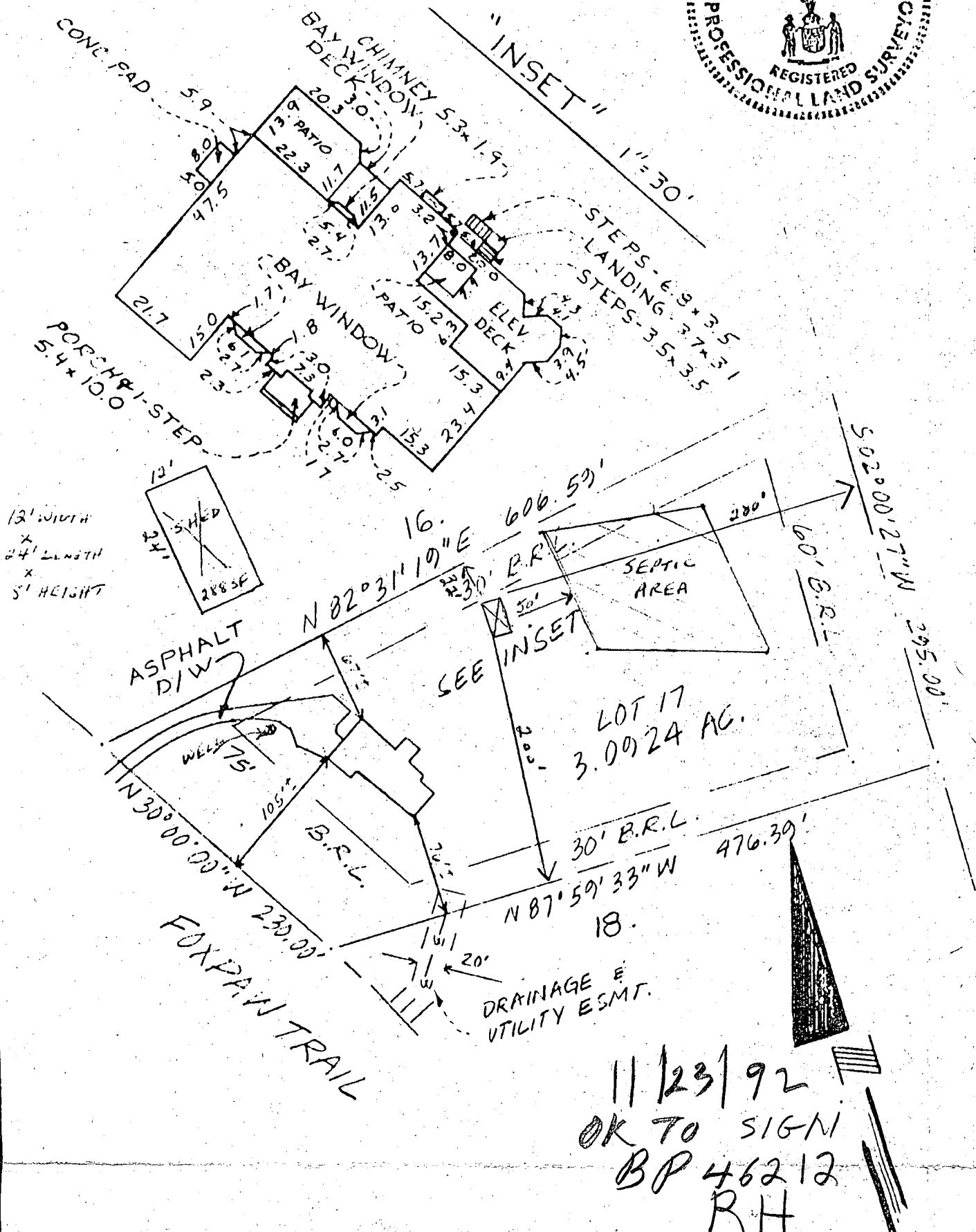
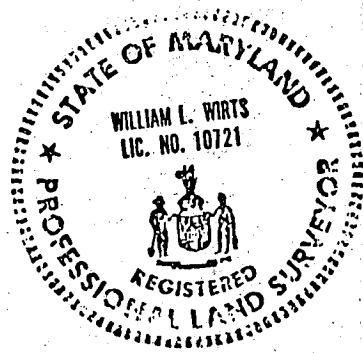
FINAL HOUSE LOCATION

LOT 17

FOXPORT PLANTATION

4TH ELECTION DISTRICT

HOWARD COUNTY, MARYLAND



11/23/92
 OK TO SIGN
 BP 46212
 RH

Tri - County Surveys, Inc. BOX 55 • DAMASCUS, MARYLAND 20872 • (301) 831-3655 LAND PLANNING CONSULTANTS • SUBDIVISIONS • LOTS & BOUNDARIES	REFERENCE Plat Book Plat No. B430	COUNTY OF HOWARD	Drawn by: CLW
	SURVEYOR'S CERTIFICATION I hereby certify that the property delineated hereon is in accordance with the Plat of Subdivision and/or deed of record, that the improvements were located by accepted field practices and include permanent visible structures and encroachments, if any. This Plat is not for determining property lines, but prepared for exclusive use of present owners of property and also those who purchase, mortgage, or guarantee the title thereto, within six months from date hereof, and as to them I warrant the accuracy of this Plat.		Checked by: W.L.V.
Note: House does not lie within a flood hazard area		Job No.: Scale: 1"=100' DATES BK 78 Final Loc.: 10-7-91	
WILLIAM L. WIRTS - Registered Land Surveyor - Maryland No. 10721			Recert.:

NOTE: This drawing is not intended or represented to be a lot stake out survey; no lot corners were set; and is not to be used, or relied upon, for the establishment of any fence, building or other improvements. No responsibility is extended herein to future purchasers.