

TaxID - 04-331338

LAYOUT 3/26/04 INSP 4 _____
INSP 2 3/26/04 INSP 5 _____
INSP 3 _____ INSP 6 _____

ISSUE DATE: 3/15/2004
APPROVAL DATE: 3/26/04

PERMIT INDEXED

P 520096
A 39353

**ON-SITE SEWAGE DISPOSAL SYSTEM
HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE, ELLICOTT CITY, MD 21043**

Fyock Septic Service, Inc IS PERMITTED TO INSTALL ALTER
ADDRESS: PO Box 89, Glenelg, MD 21737 PHONE NUMBER: 410-988-9270
SUBDIVISION: Wise Property LOT NUMBER: _____
ADDRESS: 13743 Old Rover Road PROPERTY OWNER: Wayne Wise
SEPTIC TANK CAPACITY (GALLONS): 1250 OUTLET BAFFLE FILTER REQUIRED
PUMP CHAMBER CAPACITY (GALLONS): N/A COMPARTMENTED TANK REQUIRED
NUMBER OF BEDROOMS: 4
SQUARE FEET PER BEDROOM: 180
LINEAR FEET OF TRENCH REQUIRED: 120 HOUSE SERVED BY PUBLIC WATER

TRENCHES:	Trench to be 3.0 feet wide. Inlet 4.0 feet below original grade. Bottom maximum depth 6.0 feet below original grade. Effective area begins at 4.0 feet below original grade. 2.0 feet of stone below distribution pipe. (Shallow system only)
LOCATION:	Place the distribution box at the highest elevation of the SDA and run two 60' long trenches.
NOTES:	No gravity basement service proposed. Call in a follow up inspection after layout inspection has been done.

PLANS APPROVED: Kacie Noonan OK/MR DATE: 1/23/04

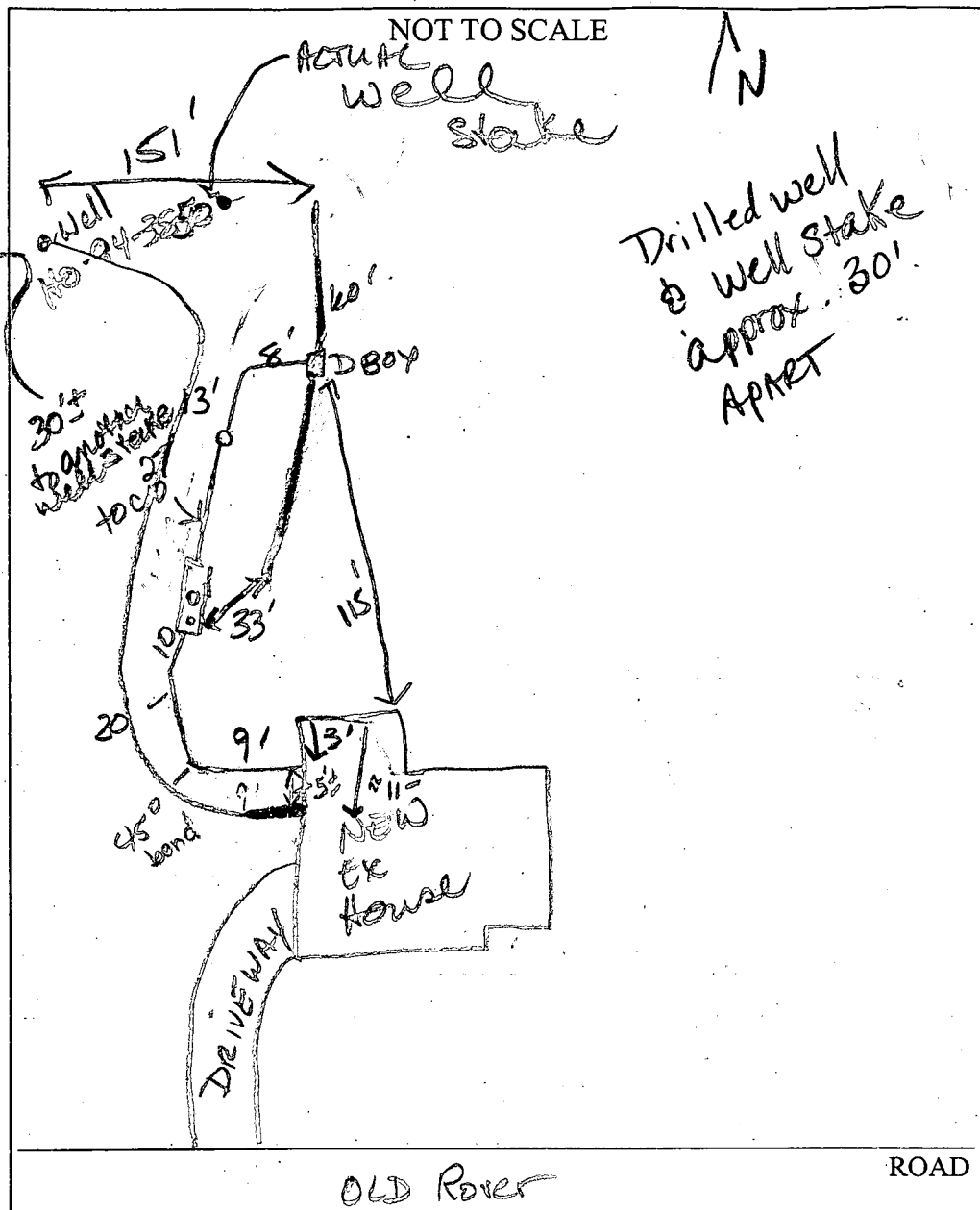
NOTES: PERMIT VOID AFTER 2 YEARS
CONTRACTOR IS RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
WATERTIGHT SEPTIC TANKS REQUIRED
ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL UNLESS SPECIFICALLY AUTHORIZED
MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS UNLESS SPECIFICALLY AUTHORIZED
CONTRACTOR RESPONSIBLE FOR COMPLIANCE WITH APPLICABLE REGULATIONS, GUIDELINES AND THE TERMS OF THIS PERMIT

**NEITHER THE HOWARD COUNTY COUNCIL OR THE HEALTH DEPARTMENT IS
RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM
PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT
CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM
DO NOT LEAVE ANY REQUEST FOR INSPECTION ON VOICEMAIL**

**BUILDING PERMIT SIGNED
AND RETURNED**

4/13/2004 B00147025 500 GAL UG PROPANE TANK

A 39353



TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
3	4	6
NUMBER OF TRENCHES		2
TOTAL LENGTH		120'
ABSORPTION AREA		
DISTRIBUTION BOX LEVEL		yes
DISTRIBUTION BOX BAFFLE		yes
DISTRIBUTION BOX PORT		NO

SEPTIC TANK DATA	
SEPTIC TANK 1 LEVEL	yes
CAPACITY	1250 GAL
SEAM LOC	Top
TANK LID DEPTH	2'
BAFFLES	yes
BAFFLE FILTER	No
MANHOLE LOC	Back
6" PORT LOC	front
WATERTIGHT TEST	NO
SEPTIC TANK 2 LEVEL	N/A
CAPACITY	
SEAM LOC	
TANK LID DEPTH	
BAFFLES	
BAFFLE FILTER	
MANHOLE LOC	
6" PORT LOC	
WATERTIGHT TEST	

PRE-CONSTRUCTION 3/26/04 Topo accurate, OK to begin (KN)

INSTALLATION 3/26/04 Trenches in OK to cover all work (KN)
 Need WPI, 3/30/04 WPI OK (KN)

FINAL INSPECTOR Kacie [Signature] DATE OF APPROVAL 3/30/04

BUILDING PERMIT SIGNED
 PERMITTED



GENERAL NOTES

1. REFERENCE DEED Liber 6895 Folio 327
2. LIMIT OF DISTURBED AREA: 0.5472 Acres or 23,836 SQ. FT.
3. LENGTH OF TRENCHES TO BE DETERMINED AT TIME OF PERMIT ISSUANCE.
4. EXISTING TOPOGRAPHY WAS FIELD RUN BY FISHER, COLLINS AND CARTER, INC. IN OCT. 2003

LEGEND	
SYMBOL	DESCRIPTION
-----	EXISTING CONTOUR 2' INTERVAL
—————	PROPOSED CONTOUR
+490.0	SPOT ELEVATION
—————	DIRECTION OF DRAINAGE
—SSF/TPF—	SUPER SILT FENCE/TREE PROTECTION FENCE
—SSF—	SILT FENCE
LOD	LIMIT OF DISTURBANCE
~~~~~	EXISTING TREES TO BE SAVED
====>	PERIMETER DIKE (CLEANWATER DIVERSION)

# 3171 DANMARK DRIVE  
STUART A TEPER  
SUSAN A TEPER  
921/271  
RR-DEC  
TAX MAP 15, PARCEL 233  
LOT 9

# 3178 DANMARK DRIVE  
JOHN ROBERT SMITH  
PAMELA SMITH  
1048/120  
RR-DEC  
TAX MAP 15, PARCEL 333  
LOT 28

# 13753 OLD ROVER ROAD  
GARY R WINKLER AND  
SHEENA WINKLER  
8116/81  
RR-DEC  
TAX MAP 15, PARCEL 54

#13749 OLD ROVER ROAD  
JAMES W HACKETT  
3183 /875  
8854/81  
RR-DEC  
TAX MAP 15, PARCEL 59

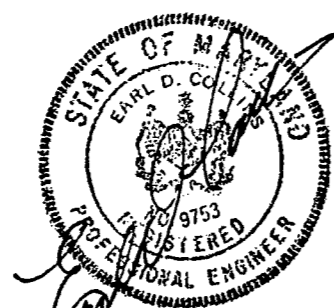
#13737 OLD ROVER MILL  
MARGIE ARDELLA WISE  
867/390  
RR-DEC  
TAX MAP 15, PARCEL 198

Soil Profile (Consistent w/ other test holes done by J. Nadeu)  
(B)  
Bm  
siccL 3 1/2 - 4  
brn org brn  
Lm Sand  
Trace R_s 14  
(KN)

Approved Septic System Plan  
Howard County Health Department

*Kevin Nanan*  
Signature  
Date 11/23/04

P Box here



**FISHER, COLLINS & CARTER, INC.**  
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS  
CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE  
ELLICOTT CITY, MARYLAND 21042  
(410) 461 - 2955

**Owner**  
WAYNE L. WISE  
12046 HALL SHOP ROAD  
CLARKSVILLE, MARYLAND - 21046  
13737 Old Rover Rd.  
West Friendship, MD  
21994

**Builder**  
B SQUARE CONSTRUCTION  
2420 ALEE'S DRIVE  
NEW WINDSOR, MD. 21776

PLAN TO ACCOMPANY BUILDING PERMIT  
PARCEL 195  
**WISE PROPERTY**  
FOURTH ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND  
DEED REF. Liber 6895 Folio 327  
ZONING: R-R  
TAX MAP 15 PARCEL 195  
SCALE: 1"=50' DATE: OCTOBER, 2003  
SHEET 1 OF 2

HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
WATER AND SEWERAGE PROGRAM  
TEL: (410)313-2640 FAX: (410)313-2648

Information Form for the Installation of the Well Pump, Pitless Adapter, and Supply Piping

NOTE: The installer is responsible for requesting an inspection prior to 9 am on the day of the desired inspection. No work is to be covered until approved by the Health Department. All installations must comply with the National Standard Plumbing Code (NSPC, as amended locally) and COMAR 26.04.04 (Old Well Construction Regulations). Submission of a complete form is required prior to Use and Occupancy approval.

Company Name: REG WATER SYSTEMS INC Telephone #: 410-239-0700  
Address: 4322 OPALS CHOICE DR.  
MANCHESTER, MD 21102

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer  
License # and name of individual responsible for the field installation:  
Name (Print): Rickey L. Roos, SR. License # PI 0141

*A licensed individual must perform the actual installation. Apprentices must be under the direct supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification.

Name of Property Owner: MR. E. MVS - WISE Telephone #: 410-635-6311  
Subdivision: _____ Lot #: 2 Well Tag #: HO-94-3850  
Site Address: 83743 OLD RIVER ROAD Parcel 19E  
WESTERLANDSHIRE, MD 21794

Submersible Pump Data Pitless Adapter Well Cap and Electric Conduit  
Make: GRUNDFOSS Make: CAMPBELL Two piece watertight cap.   
Model #: SGE 10C-240 Model #: VA 800 Screened, vented well cap.   
Pump Capacity: 10 GPM Depth: 42" (36" min) Cap secured to casing.   
Well Yield: 12 GPM NSF approved:  Conduit min 18" B.G.:   
Depth of well encountered at time of pump installation: 16.5 (feet) Conduit secured to well cap.

If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4  
Torque arrestors or Cable glands are required - Must circle one  
Safety rope, if used, attached to inside of well casing with eye bolt

Piping to house  
Type: 7042THL42E  
PSE: 160 (160 psi min)  
Depth of supply line: 42 (36" min)

House Connection  
PVC sleeved to undisturbed soil at wall penetration: YES  
Approximate length of sleeve: 10'  
Sleeve caulked and sealed properly: YES - FELCIO BOOTS

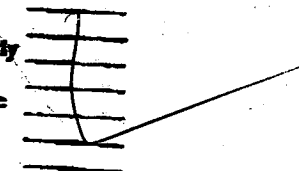
The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Signature of company representative responsible for installation: Rickey L. Roos, SR. date: 3/29/04

For Health Department Use Only - Not to be completed by Installer

Date Insp. Requested: 3/30/04 Date Insp. Approved: 3/30/04 KN

- Inspection Data: Pitless adapter and water supply line at least 36" below grade
- Two piece cap installed and attached to casing securely
- Elec. conduit extends at least 18" below grade/attached to cap properly
- Safety rope installed inside of well casing
- Connect well tag attached properly and casing 5" above finished grade
- Water supply line sleeved adequately at house connection
- Adequate ground observed below pitless adapter



**DRILLER: REMOVE COPY AND RETAIN FOR YOUR RECORDS. RETURN COUNTY COPY TO COUNTY ENVIRONMENTAL AGENCY. SUBMIT COPY TO OWNER. RETURN ALL OTHER PARTS TO DEPARTMENT OF ENVIRONMENT, 2500 BROENING HIGHWAY, BALTIMORE, MARYLAND 21224.**

<b>C1</b> 3880	SEQUENCE NO. (MDE USE ONLY)	<b>STATE OF MARYLAND WELL COMPLETION REPORT</b> FILL IN THIS FORM COMPLETELY PLEASE TYPE	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
1 2 3 4 5 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)		COUNTY NUMBER <b>(13) A 5195660</b>	
ST/CO USE ONLY DATE Received MM/DD/YY <b>11/04/04</b>	DATE WELL COMPLETED MM/DD/YY <b>01/16/04</b>	Depth of Well <b>180</b> (TO NEAREST FOOT)	PERMIT NO. FROM: "PERMIT TO DRILL WELL" <b>112304</b> <b>(15) 94-3850</b>
OWNER <u>Wise</u> last name <u>Wayne</u> first name		TOWN <u>Glenelg</u>	
STREET OR RFD <u>OLD ROVER ROAD</u>		SUBDIVISION <u>Wise Property</u> SECTION <u>LOT parcel 198</u>	
<b>WELL LOG</b> Not required for driven wells		<b>GROUTING RECORD</b> yes no	
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING		WELL HAS BEEN GROUTED (Circle Appropriate Box) <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
DESCRIPTION (Use additional sheets if needed)	FEET FROM TO	TYPE OF GROUTING MATERIAL (Circle one) CEMENT <input checked="" type="checkbox"/> <b>CM</b> BENTONITE CLAY <input type="checkbox"/> <b>BC</b>	
Top Soil	0 2	NO. OF BAGS ⁴⁵ / ₄₆ <b>16</b> NO. OF POUNDS ⁴⁵ / ₄₆ <b>1600</b>	
Brown Shale	2 45 ✓	GALLONS OF WATER <b>96</b>	
Brown Slate	45 50	DEPTH OF GROUT SEAL (to nearest foot) from <u>0</u> ft. to <u>30+</u> ft. 48 TOP 52 54 BOTTOM 58	
Blue Stone	50 75	CASING RECORD casing types insert appropriate code below <input checked="" type="checkbox"/> <b>ST</b> <input type="checkbox"/> <b>CO</b> STEEL CONCRETE <input type="checkbox"/> <b>PL</b> <input type="checkbox"/> <b>OT</b> PLASTIC OTHER	
Brown Slate	75 80 ✓		
Blue Stone	80 180	MAIN CASING TYPE <u>ST</u> Nominal diameter top (main) casing (nearest inch) <u>6</u> Total depth of main casing (nearest foot) <u>58</u> ✓ 60 61 63 64 66 70	
OTHER CASING (if used) EACH CASING diameter inch depth (feet) from to		SCREEN RECORD screen type or open hole insert appropriate code below <input checked="" type="checkbox"/> <b>ST</b> <input type="checkbox"/> <b>BR</b> <input checked="" type="checkbox"/> <b>HO</b> STEEL BRASS OPEN HOLE <input type="checkbox"/> <b>PL</b> <input type="checkbox"/> <b>OT</b> PLASTIC OTHER	
NUMBER OF UNSUCCESSFUL WELLS: <u>0</u>		<b>C 2</b> DEPTH (nearest ft.)	
WELL HYDROFRACTURED <input checked="" type="checkbox"/> Y <input type="checkbox"/> N		1 <u>HO</u> <u>56</u> ✓ <u>180</u>	
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		E A C H S C R E E N 8 9 11 15 17 21 23 24 26 30 32 36 38 39 41 45 47 51	
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.		SLOT SIZE 1 <u>2</u> 3 DIAMETER OF SCREEN (NEAREST INCH) <u>59</u> <u>60</u> from to	
DRILLERS LIC. NO. <u>M SD 112</u> <u>W. E. [Signature]</u> DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)		GRAVEL PACK IF WELL DRILLED WAS FLOWING/WELL INSERT F IN BOX 68 <u>68</u>	
LIC. NO. T <u>D</u>		MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W.Q.	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		70 72 74 75 76 TELESCOPE CASING LOG INDICATOR OTHER DATA	
		<b>C 3</b>	
		<b>PUMPING TEST</b>	
		HOURS PUMPED (nearest hour) <u>3</u>	
		PUMPING RATE (gal. per min.) <u>12</u>	
		METHOD USED TO MEASURE PUMPING RATE <u>Bucket</u>	
		WATER LEVEL (distance from land surface)	
		BEFORE PUMPING <u>45</u> ft. 17 20	
		WHEN PUMPING <u>50</u> ft. 22 25	
		TYPE OF PUMP USED (for test) <input checked="" type="checkbox"/> <b>A</b> air <input type="checkbox"/> <b>P</b> piston <input type="checkbox"/> <b>T</b> turbine <input checked="" type="checkbox"/> <b>C</b> centrifugal <input type="checkbox"/> <b>R</b> rotary <input type="checkbox"/> <b>O</b> other (describe below) <input type="checkbox"/> <b>J</b> jet <input checked="" type="checkbox"/> <b>S</b> submersible	
		<b>PUMP INSTALLED</b>	
		DRILLER INSTALLED PUMP (CIRCLE) (YES or NO) YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
		IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.	
		TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29 <u>29</u>	
		CAPACITY: GALLONS PER MINUTE (to nearest gallon) <u>31</u> <u>35</u>	
		PUMP HORSE POWER <u>37</u> <u>41</u>	
		PUMP COLUMN LENGTH (nearest ft.) <u>43</u> <u>47</u>	
		CASING HEIGHT (circle appropriate box and enter casing height) <input checked="" type="checkbox"/> <b>+</b> above } LAND SURFACE <input type="checkbox"/> <b>-</b> below } <u>2</u> (nearest foot)	
		<b>LOCATION OF WELL ON LOT</b>	
		SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)	

**FIELD DATA SHEET**  
**HOWARD COUNTY WELL YIELD TEST**

No INSP

Well Permit No. HO - 94-3850  
 Location of property (road) OLD ROVER ROAD  
 Subdivision Wise Property Lot _____ Block _____ Plat _____ Sec. _____  
 Well Driller R. Mayne Owner Wayne Wise  
 Depth of well 180 parcel 198  
 Distance of measuring point (M.P.) above ground 2 ft  
 Static water level (S.W.L.) below M.P. 45 ft

I. High rate pumping -- reservoir drawdown

Time pump started 9:00 Pumping rate 12 GPM  
 Total time 15 min to reach pumping water level 50 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)
9:00	45 ft	5 Sec		12 GPM
			TEST STARTED	
9:15	50 ft	5 Sec	<del>XXXXXXXXXX</del>	12 GPM
9:30	50 ft	5 Sec		12 GPM
9:45	50 ft	5 Sec		12 GPM
10:00	50 "	5 "		12 "
10:15	50 "	5 "		12 "
10:30	50 "	5 "		12 "
10:45	50 ft	5 Sec		12 GPM
11:00	50 ft	5 Sec		12 GPM
11:15	50 ft	5 Sec		12 GPM
11:30	50 "	5 "		12 "
11:45	50 "	5 "		12 "
12:00	50 ft	5 Sec		12 GPM
12:15	50 ft	5 Sec		12 GPM

B 1 5743

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL 519650 please print or type *ARN*

STATE PERMIT NUMBER HO-94-3850 fill in this form completely

OWNER INFORMATION Date Received (APA) 11-04-03 BOONER NANCY G WAYNE WISE 2420 ALLEES DR. New Windsor MD 21776

LOCATION OF WELL B 3 HOWARD COUNTY WISE PROP GLENELG MILES FROM TOWN (enter 0 if in town) 2

DRILLER INFORMATION Ralph E MAYNE MSD 117 RALPH E. MAYNE INC 17024 Handy Rd Mt Airy MD 21771

DIRECTION OF WELL FROM TOWN (CIRCLE BOX) ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) OLD Rover Rd. 300 DISTANCE FROM ROAD ENTER FT OR MI TAX MAP: 35 BLK: 2 PARCEL 198

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

USE FOR WATER (CIRCLE APPROPRIATE BOX) D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL HOWARD A 519566 COUNTY NAME COUNTY NO. STATE SIGNATURE DATE ISSUED 11/12/03 KAEN NOMAN 11/12/04

APPROXIMATE DEPTH OF WELL 150 FEET APPROXIMATE DIAMETER OF WELL 6" NEAREST INCH

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. well WRITE THE BOX NUMBER FROM THE MAP HERE E 5302 N 800

METHOD OF DRILLING (circle one) BORED (or Augered) AIR-ROTARY JETTED AIR-PERCussion ROTARY (Hydraulic Rotary) CABLE REVerse-ROTary Drive-POINT

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) N THIS WELL WILL NOT REPLACE AN EXISTING WELL S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS

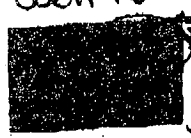
DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION

Not to be filled in by driller. (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER 54 G A P 63 PERMIT No. HO-94-3850

OCT-22-2003 19:17

FISHER, COLLINS & CARTER

well location



30' B.R.L.

5' W 100.00'

* EASEMENT WILL NOT FEWER BY GRAVITY

DISTRICTION BOX  
EX G IN 359.318  
120 G IN 390.18  
FIN. IN 391.5  
IN 391.0

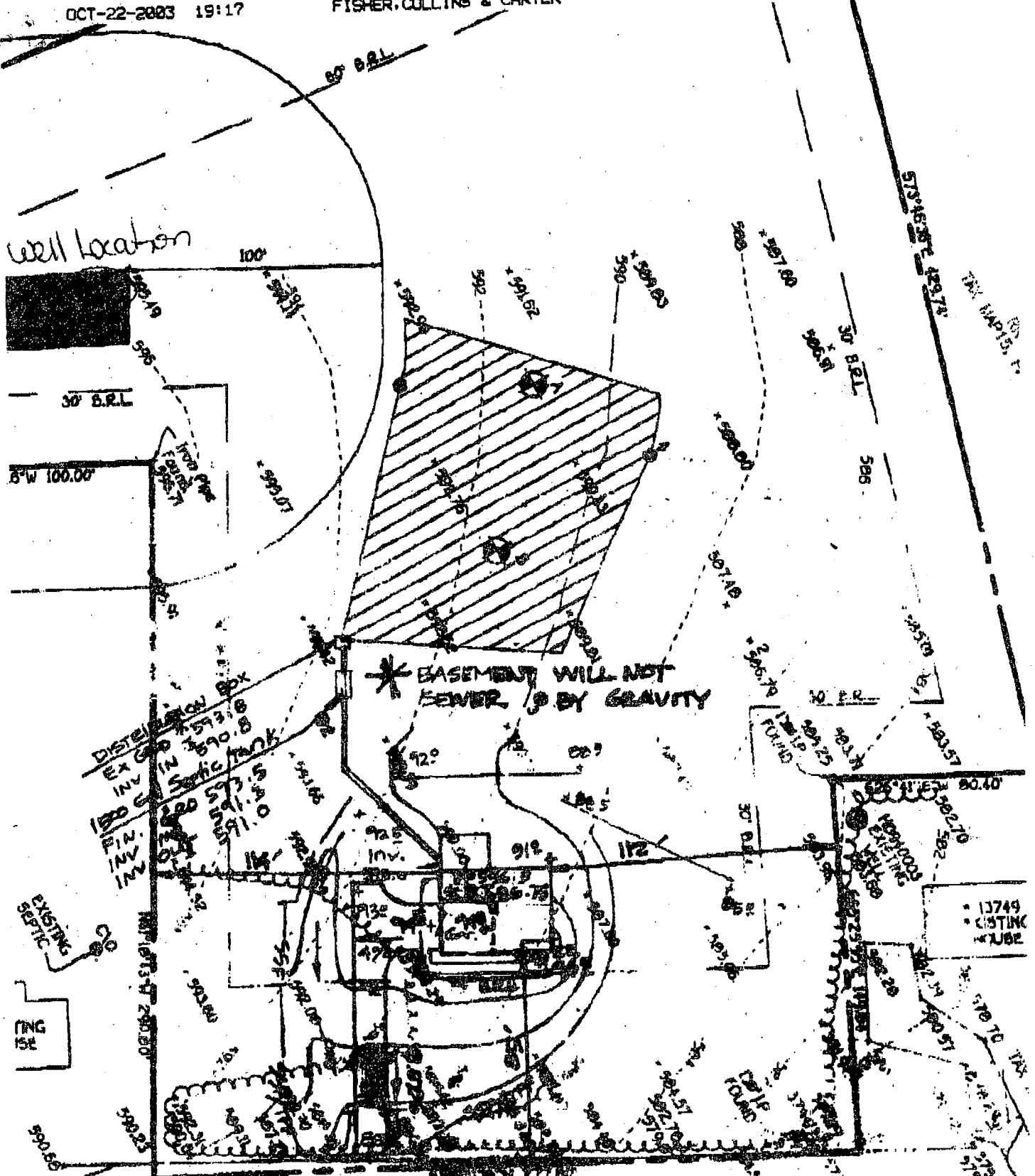
EXISTING SEPTIC

ENG 02

13743 OLD ROVER ROAD  
West Friendship  
Parcel 195

Wise Property

TOTAL P. 01



6/8/87  
9:30 AM  
Pulim.  
SPECIFIC TO DISTRICT

# APPLICATION

A 39353

## PERCOLATION TESTING

P _____

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

6-8-87  
Peres ok pending  
plat approval

DISTRICT _____

DATE 5/18/87

5-18-87  
OK TO PROCESS / SA  
DATE GIVEN TO MR. WISE.

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 Ellis L. & MARGIE A. Wise

ADDRESS 12046 Hall Ship Rd, Clarksville, Md. 531-5000 PHONE _____

PROSPECTIVE BUYER NONE

ADDRESS _____ PHONE _____

### PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 13737

ROAD AND DESCRIPTION ~~Old Rover Rd (Rover Mill Rd.)~~ Old Rover Road  
Wise lives on Hackett Property

TAX MAP 15 PARCEL # 195

SIZE OF LOT 4.037 Acres TYPE BLDG. SFP  
(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. Ellis Len. Wise  
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

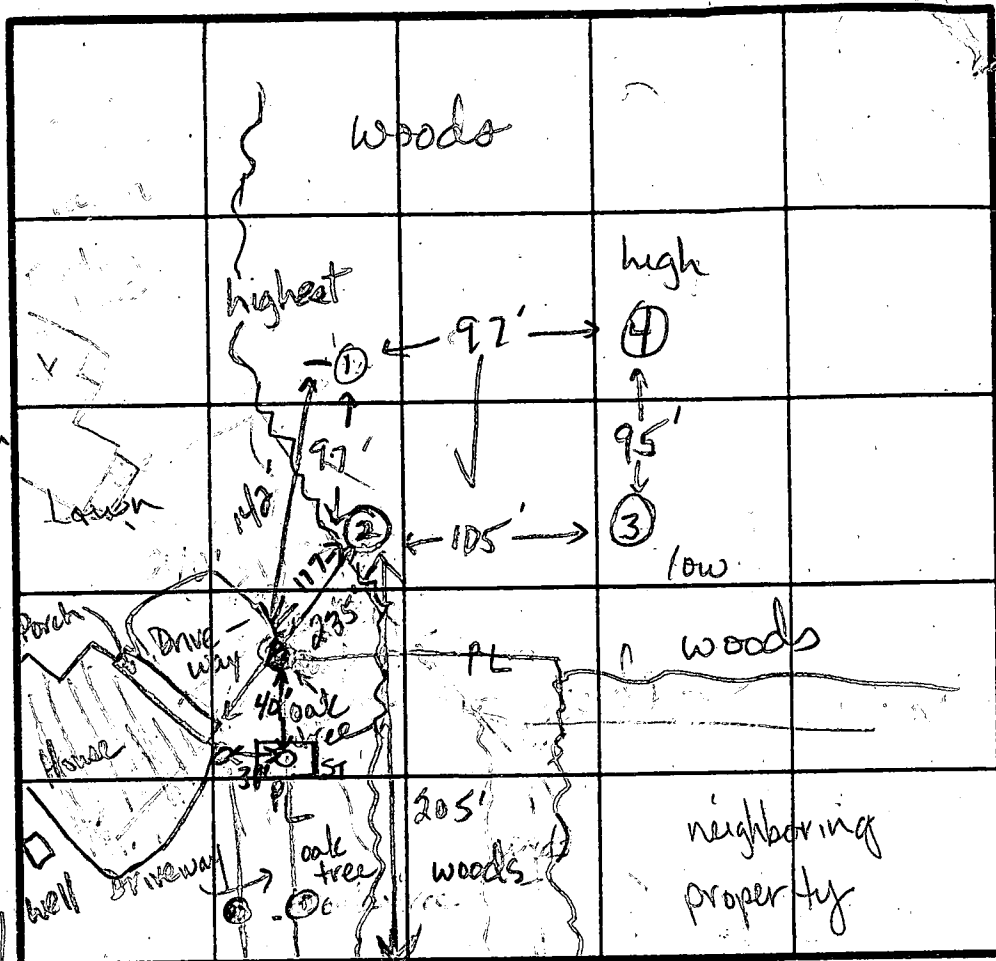
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING for perc location holes! Submit

Plat showing location perc holes / house site & well site so we can write spec. Plat also show location of septic supply.

# THIS IS NOT A PERMIT

for next lot because it may extend to other lot



④  
 0-7.0 Red silty clayey loam  
 7.0-11.5 Yellow-brown sandy/silty clay loam  
 11.5-14.5 Brown silty loam  
 14.5 Bottom

2.97  
 2.4  
 38.8  
 19.4  
 232.8

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

OLD ROVER ROAD

①  
 SOIL PROFILE  
 0-7.0 Red sandy silty loam  
 7.0-13.0 Brown silty sandy loam  
 13.0 Bottom

②  
 0-6.0 Rd clayey silty loam  
 6.0-10.0 Red sandy silty loam  
 10.0-13.0 Red-brown sandy silty loam  
 13.0 Bottom

③  
 0-8.0 Red silty sandy loam  
 8.0-11.0 Yellow br sandy silty loam, trace of broken rock  
 11.0 Bottom

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME		
			START	STOP	START	STOP			
6/8/87	1	3.5 S	10:35	10:37	10:37	10:44	7 min	ok	
		8.0 M	10:33	10:35	10:35	10:37	2 min	ok	
		13.0 D	bottom (see profile)						
	2	3.0 S	10:40	10:58	for 1/4" inch slow perc		perc	ok	
		6.0 M	11:00	11:09	11:09	11:12	3 min		
		13.0 D	bottom (see profile)						
	3	4.0 S	10:46	10:48	10:48	10:50	2 min	ok	
		11.0 D	bottom (see profile)						
	4	5.5 S	10:50	11:03	11:03	11:20	3/4" in	slow perc	
		14.5 D	bottom (see profile)						
		6.5 M	11:37	11:46	11:46	12:02			

REMARKS Area slightly small, area can be obtained by going higher in elevation  
 TYPE OF SOIL Red silty clay loam, Yellow-brown sandy silty clay loam  
 TESTED BY R. HODGES, JANE MADEAU ALSO PRESENT JEFF, Rocky  
 Well is cased but open to soil & bugs. Square cover,

EH-12-1079

**LEGEND**

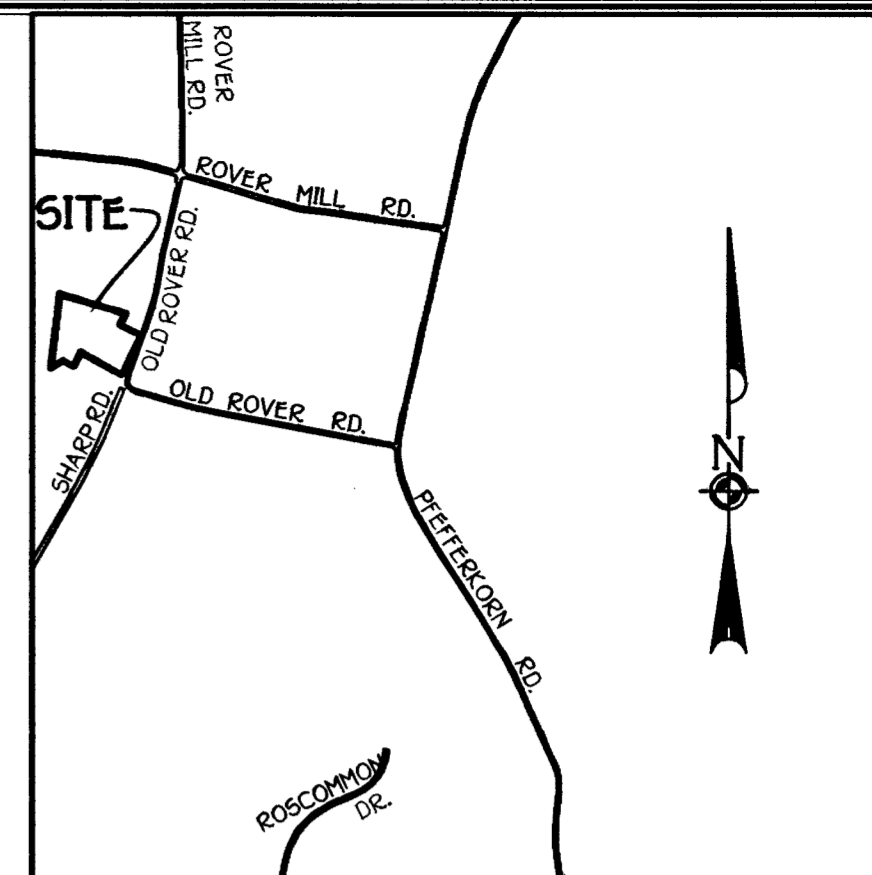
- EXISTING 2' CONTOURS
- - - EXISTING 10' CONTOURS
- ~ ~ ~ EXISTING TREE LINE
- SOIL LINES AND TYPES
- ⊙ DENOTES PROPOSED WELL
- DENOTES FAILED PERC
- DENOTES PASSED PERC
- ⊕ DENOTES ADDITIONAL TEST CONFIRMATION HOLES
- ▭ DENOTES PROPOSED HOUSE
- ▨ DENOTES 15%-24.9% SLOPES
- ▩ DENOTES 25% AND GREATER SLOPE
- ⊞ DENOTES 1500 Sq.Ft. ALTERNATE WELL SITE

# 3171 DANMARK DRIVE  
STUART A TEPER  
SUSAN A TEPER  
921/271  
RR-DEC  
TAX MAP 15, PARCEL 233  
LOT 9

# 13753 OLD ROVER ROAD  
GARY R WINKLER AND  
SHEENA WINKLER  
5116/91  
RR-DEC  
TAX MAP 15, PARCEL 54

# 3179 DANMARK DRIVE  
JOHN ROBERT SMITH  
PAMELA SMITH  
1048/120  
RR-DEC  
TAX MAP 15, PARCEL 233  
LOT 29

#13737 OLD ROVER MILL  
MARGIE ARDELLA WISE  
867/390  
RR-DEC  
TAX MAP 15, PARCEL 196



**VICINITY MAP**  
SCALE : 1" = 1200'

**GENERAL NOTES:**

1. THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF 10,000 SQUARE FEET AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWERAGE DISPOSAL IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWERAGE IS AVAILABLE. THESE EASEMENTS SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT ADJUSTMENTS TO THE PRIVATE SEWERAGE EASEMENT. RECORDATION OF A MODIFIED SEWERAGE EASEMENT SHALL NOT BE NECESSARY.
2. THE LOT SHOWN HEREON COMPLIES WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREA AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT.
3. EXISTING WELLS AND/OR SEWERAGE EASEMENTS WITHIN 100 FEET OF THE PROPERTY HAVE BEEN SHOWN FROM THE BEST AVAILABLE INFORMATION.
4. ALL HOUSE SITES SHOWN COMPLY WITH MINIMUM BUILDING RESTRICTION REGULATIONS.
5. THE WELL SHALL BE DRILLED PRIOR TO FINAL PLAT RECORDATION.
6. TOPOGRAPHY SHOWN IS FROM HOWARD COUNTY GIS TOPOGRAPHY AT 5' CONTOUR INTERVAL INTERPOLATED FOR 2' CONTOUR INTERVAL.
7. BOUNDARY OUTLINE BASED ON AVAILABLE DEED OF RECORD WITHOUT THE BENEFIT OF A FIELD SURVEY AT THIS TIME.
8. TWO (2) ADDITIONAL PERCOLATION TEST HOLES SHALL BE PROVIDED DURING SEPTIC SYSTEM INSTALLATION. INSTALLATION OF SEPTIC SYSTEM SHALL BE DONE PRIOR TO BUILDING PERMIT APPROVAL.
9. DEED SUMMARY  
GRANTOR: MARGIE A. WISE  
GRANTEE: WAYNE L. WISE  
DEED DATE: OCTOBER 2, 2002  
RECORDING REFERENCE: L.6895, F.327  
DEED AREA: 4.037 Ac±
10. OWNER MAILING ADDRESS:  
Mr. WAYNE L. WISE  
12046 HALL SHOP ROAD  
CLARKSVILLE, MARYLAND 21029-1513

**PERC CERTIFICATION**  
I certify that the locations shown herein are based on field locations done under my direct supervision and are correct to the best of my professional knowledge and belief.  
*Terrell A. Fisher*  
Signature of Professional Land Surveyor  
Terrell A. Fisher, Professional Land Surveyor No. 10692  
8/29/03  
Date

APPROVED FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS,  
HOWARD COUNTY HEALTH DEPARTMENT.  
*Ken S. R. K.*  
COUNTY HEALTH OFFICER KN/SRK  
9-5-03  
DATE

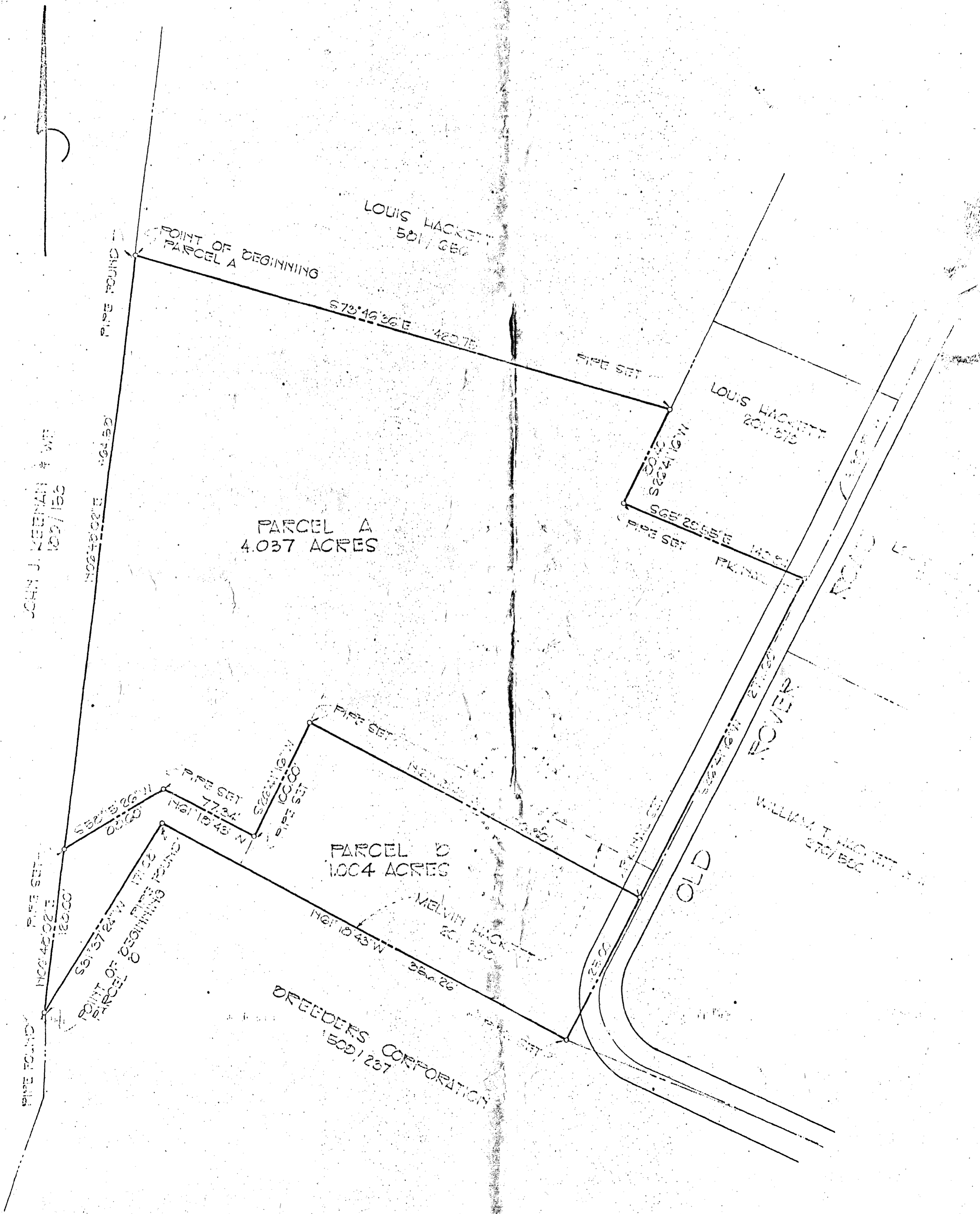
**PERC CERTIFICATION PLAN  
PROPERTY OF  
WAYNE WISE**

TAX MAP #15 ZONED: RR-DEC PARCEL: 195  
FORTH ELECTION DISTRICT HOWARD COUNTY, MARYLAND  
SCALE: 1" = 50'  
DATE: AUGUST 13, 2003  
DATE REVISED: AUGUST 26, 2003

**FISHER, COLLINS & CARTER, INC.**  
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS  
CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE  
ELLICOTT CITY, MARYLAND 21042  
410) 461 - 2855

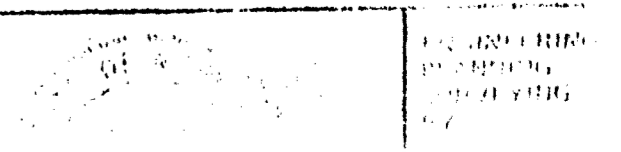
K:\SDSK\PROJ\1886 Old Rover Mill - Boone\dwg\1886 Perc Cert.dwg, 8/29/2003 1:17:34 PM

REVISIONS			CHECK	APPROV	DATE
ISSUE	BY & DATE	DESCRIPTION			



JOHN J. NEEMAN & WIFE  
1007/153

TITLE: PLAT OF SURVEY  
PROJECT: A



SITE INSPECTION SHEET

OWNER: Wayne Wise PHONE #: _____

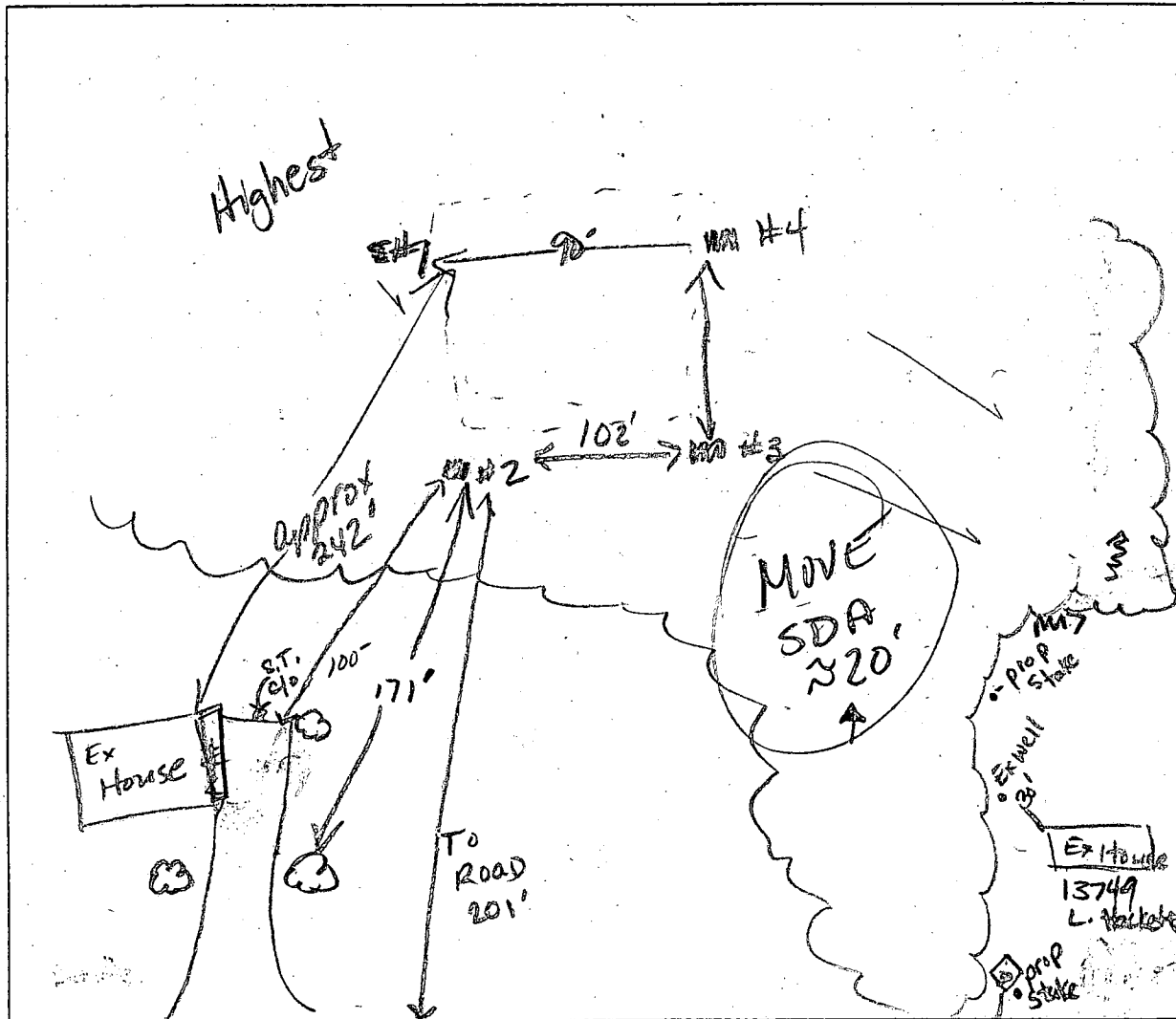
ADDRESS: Old Rover Road CONTRACTOR: _____

WELL TAG #: _____

SUBDIVISION: _____ LOT: _____ COUNTY #: _____

PROPOSAL: Confirm approvable test hole locations,

LOCATION DIAGRAM



Ex well 3-1-3  
2yr old House  
SDA

#13740  
LOUIS Nackerff

COMMENTS: _____

1 1/2 - 2' depressions found in field ADJ  
per Janes Notes, however, hole #1 prop  
is approx 242' not 142'. Relocated Septic system. See Cleanout

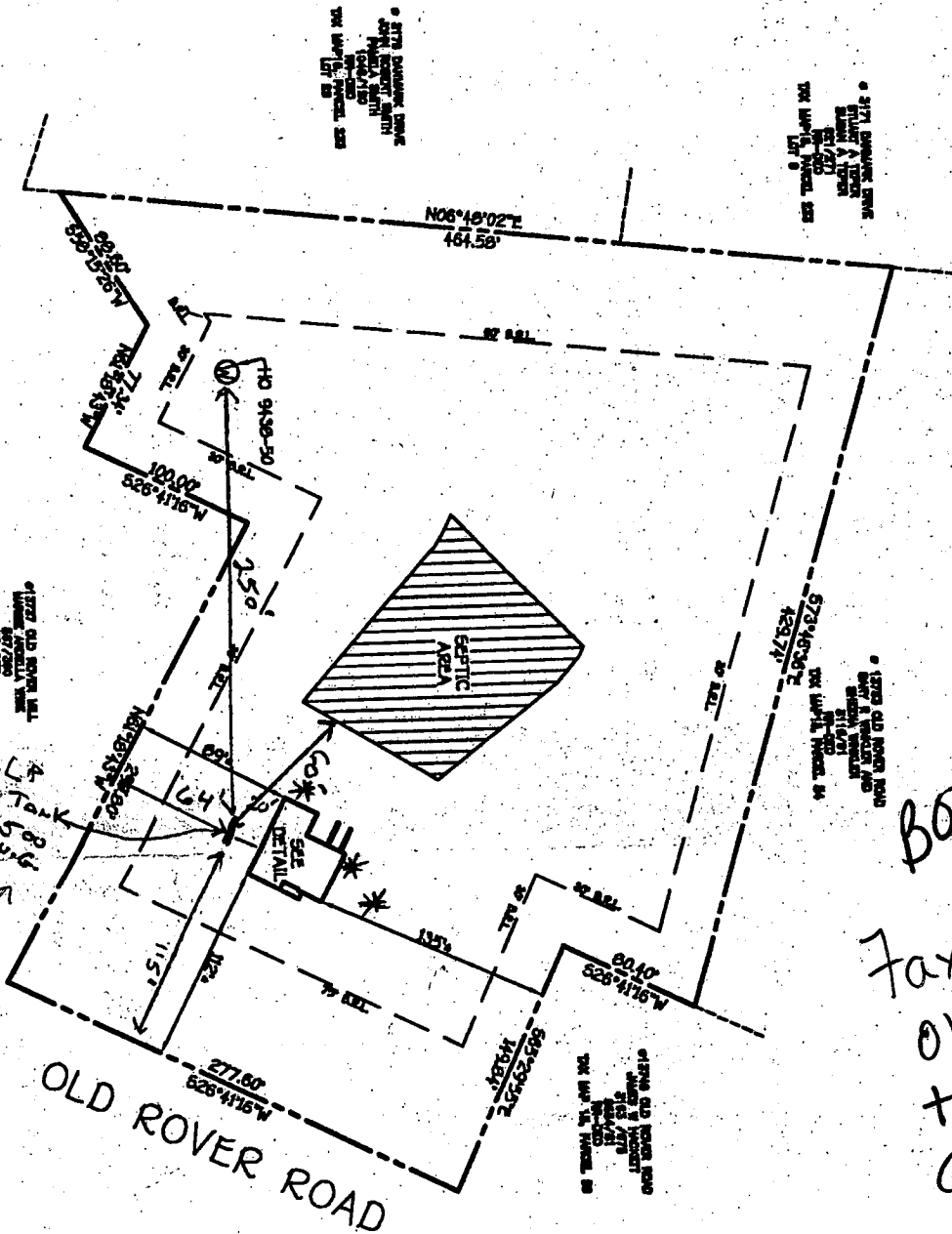
DATE: 2-3-03 INSPECTOR: Racie Noonan

FAY 410-465-0803

**GENERAL NOTES:**  
1. THIS LOCATION PROPOSED IS PREPARED FOR THE BENEFIT OF THE CLIENT UNDER THE HOUSE LOCATION SERVICE...  
2. THE CLIENT SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND APPROVALS...  
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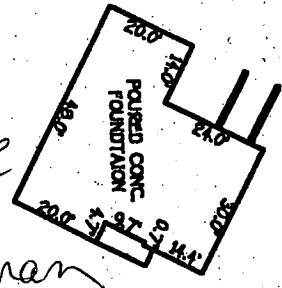
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10. THE CLIENT SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND APPROVALS...



B00147025  
Taxed back  
on 3/31/04  
to propane  
co for  
new location  
of LP.  
KN

* = other poss. locations

Location  
not acceptable  
due to well  
line closer than  
10' ???

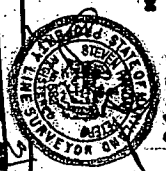


4/13/04  
UB OK'd LP tank loc.  
No comar reg.  
States dist.  
of LP line  
to well line

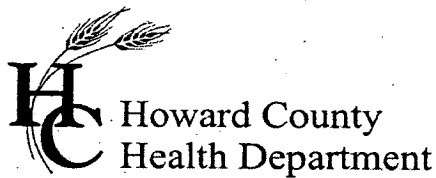


SCALE  
1" = 100'

YANKEE VINE  
LINEA DESIGN FIELD 327  
FOURTH ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND



HOUSE LOCATION  
DESIGNING



3525 H Ellicott Mills Drive, Ellicott City, MD 21043  
(410) 313-1771 Fax (410) 313-2648  
TDD (410) 313-2323 Toll Free 1-866-313-6300  
website: www.hchealth.org

Penny E. Borenstein, M.D., M.P.H., Health Officer

June 3, 2004

B Square Construction, Inc.  
2420 Allées Drive  
New Windsor, MD 21176

*SENT VIA FACSIMILE 410-635-6414*

RE: 13743 Old Rover Road  
BP # B00144889  
Well Permit # HO-94-3850

Dear Sirs:

This is to advise you that the septic system for the above referenced property has been installed and inspected. **Final approval of the septic system was granted on 03/26/2004. Final approval of the well line connection to the dwelling was approved on 03/30/2004.**

The water sample results indicate that the water samples submitted for testing were free of coliform and fecal coliform bacteria at the time of sampling and are bacteriologically safe for drinking. The water sample results were found to be in compliance with COMAR water quality standards.

#### **INTERIM CERTIFICATE OF POTABILITY**

This certifies that the initial sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under well permit #HO-94-3850. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies. Based upon satisfactory investigation and evaluation, the Howard County Health Department as authorized by the Maryland Department of the Environment accepts this well system as required by COMAR 26.04.04.

This certificate may become final upon completion of the second bacteriological test, which is to be taken by the county health department within six months of receipt of this letter. **Please contact (410) 313-1773 to schedule a final water sample appointment. Currently, there is no charge for this final sampling.**

Date of Water Samples: 05/25/2004  
Date of Well Completion: 01/16/2004

Approving Authority,

*Brian Baker*

Brian Baker, R. S.  
Well & Septic Program

cc: Building Inspector's Office  
Community Health Services  
File