

7-26-90 needs house connection JEN  
3/30/93 P.M. Jh  
c. Gal.

05-411645

# PERMIT

*File*

P 49547

A 40505

SEWAGE DISPOSAL SYSTEM MARYLAND STATE DEPARTMENT OF HEALTH DISTRICT 5th

HOWARD COUNTY  
BUREAU OF ENVIRONMENTAL HEALTH  
461-9933

## INDEXED

DATE 8/23/90

DATE SYSTEM APPROVED 3/30/93

INSPECTOR C. Bell

Jack Fyock IS PERMITTED TO INSTALL  ALTER

ADDRESS \_\_\_\_\_ PHONE 988-9270

SUBDIVISION Hedgerow ROAD 13650 Gilbride Lane LOT 5

PROPERTY OWNER Wayne Greenfield John & Kathryn Alascio

ADDRESS \_\_\_\_\_

~~EXCARRIAGE GRINDER IS USED TO INCREASE SEPTIC TANK CAPACITY BY 60% AND ABSORPTION AREA BY 20%~~

~~CARRIAGE GRINDER YES XXXXXXXXXXXXXXXXXXXXXXX~~

SEPTIC TANK CAPACITY 1500 GALLONS NUMBER OF BEDROOMS 5 per T/C

TRENCHES - 210 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 4 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Start the first trench 180' from the rear lot line and 90' from the left lot line. Run trenches along contour toward left side of lot.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or septic tank. 5-7-90 JEN

**BUILD PERMIT SIGNED**

**AND RETURNED** 9-1-90

*Serial # 510 120229  
Minor Alterations Basement*

PLANS APPROVED BY Craig Williams

DATE 03/28/90

COVER NO WORK UNTIL INSPECTED AND APPROVED

**BUILDING PERMIT SIGNED**

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF AN ABSORPTION TRENCH

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

**BLDG. PERMIT SIGNED**

PERMIT VOID AFTER TWO YEARS

**AND RETURNED** 10/26/95

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

**BLDG. PERMIT SIGNED**

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

**AND RETURNED** 9/23/94

*Serial # 56429 - garage*

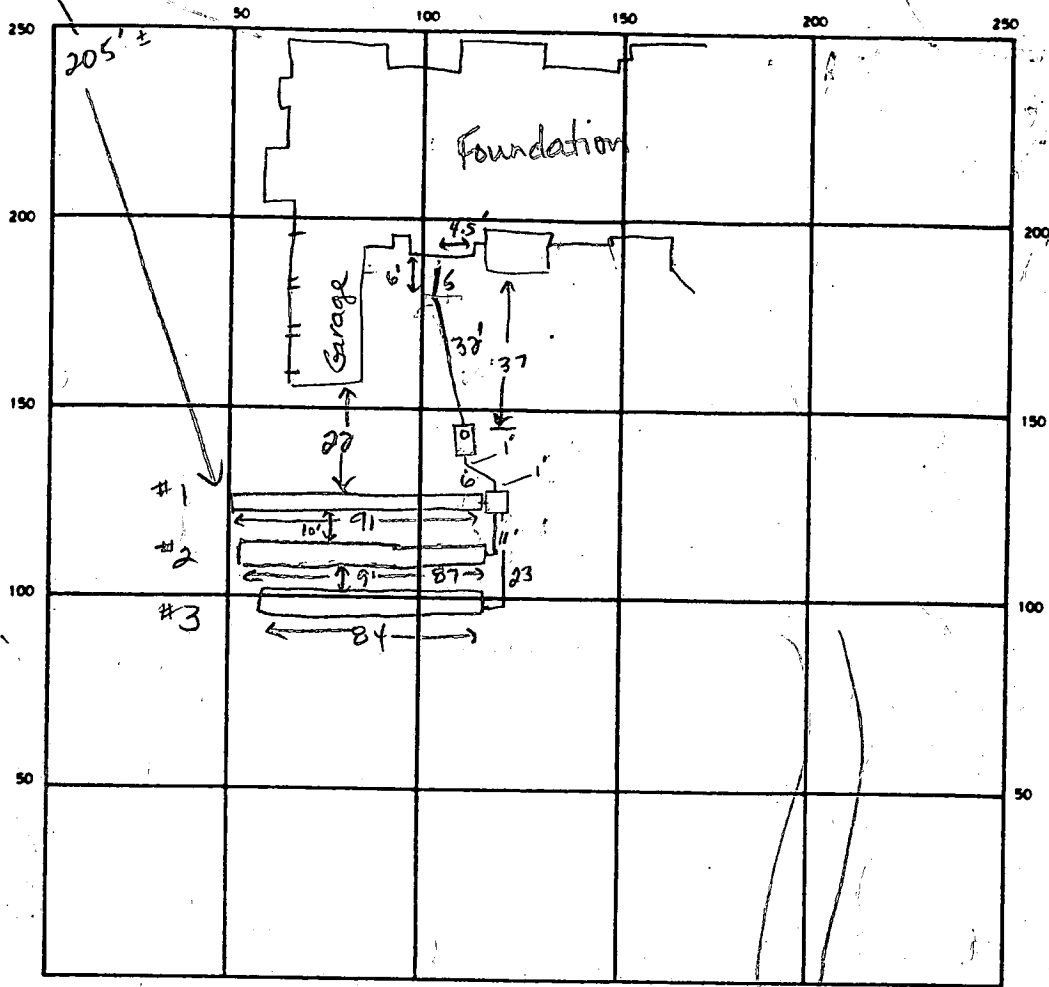
**\*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

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

40505

W 10-88-1130

705  
5/25/93  
P.O. #1  
1/22



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

Gilbride Lane

SEPTIC TANK LEVEL 1500 gal CLEANOUTS 1 on septic tank

DISTRIBUTION BOX LEVEL OK w/ baffle (set on stone & covered with stone for support under driveway)

DRAIN FIELD/TILE FIELD DEPTH 8 8 8 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3.5 3.5 3.5 FT.

EFFECTIVE GRAVEL DEPTH 4.5 4.5 4.5 FT. TOTAL LENGTH 91 87 84 FT.

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 409.5 | 391.5 | 378 SQ. FT.

DRYWELL INSIDE DIAMETER \_\_\_\_\_ FT. EFFECTIVE DEPTH BELOW INLET \_\_\_\_\_ FT.

ABSORBENT AREA 1179 SQ. FT.

REMARKS 7-25-90 OK to stone trench #1 & lay pipe & paper. Continue w/ trench #2, leave end open to bottom. Leave trench #1 open at end to inlet. JEN 7-26-90 OK to cover all work. Needs house connection. JEN Wademan 4-18-91 No cleanout visible, unable to inspect connection today. DAB 3/30/93 water test in P.M. from house to S.T tank c.B. "Left J.C.O.P. letter at into" c.B.

DATE SYSTEM APPROVED 3/30/93 INSPECTOR Charles B. Howard

PST. K1065 OK 792

9/17/91

Pesticide sample taken from  
outside sample - house  
still not occupied.

Area of house connection  
backfilled - no verification  
made.

NEOT BLOR 3/30/93 3/30

(CW)

S.T. c/o still not observed.

From drawing on permit it is  
possible that tank sits under  
part of/all of driveway.

Do NOT issue SCOP until septic  
issues clarified AND results  
of pesticide sample are known

# APPLICATION

PERCOLATION TESTING

A 40585  
P \_\_\_\_\_

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

*1/27/88  
perc or'd  
number approved  
[initials]*

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 Wayne Greenfield

ADDRESS 2549 Red. Cravat Court PHONE 995-6753  
Columbia, Md 21045

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

PROPERTY LOCATION:

SUBDIVISION TWO ONES LOT NO. 5 (adjusted)

ROAD AND DESCRIPTION \_\_\_\_\_  
from part of orig lot 6

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 for field located holes and low siting  
well site location

BUDG. PERMIT SIGNED  
AND RETURNED 5/1/88  
Serial # 32195

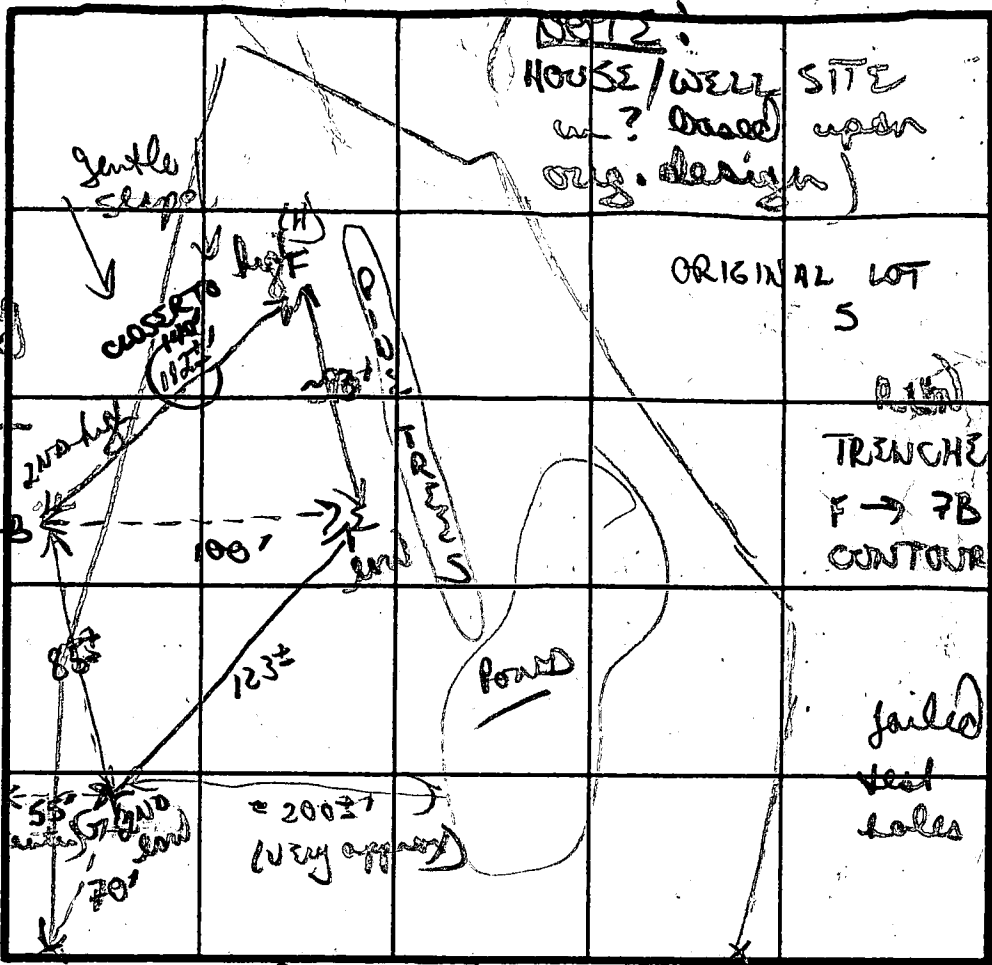
HD-216

# THIS IS NOT A PERMIT

TOLET 4'  
 MAY D = 81  
 X = 8 MIN  
 187# / BED.  
 Σ

SOIL PROFILE

orange clay  
 some gravelly  
 4'±  
 to orange / lo-  
 silty loam  
 w/ 15%  
 small  
 layered  
 frags  
 ↓  
 12 3/4' D 7C



orange/red  
 clayey  
 gravelly  
 clay  
 4'  
 on to north  
 lo / orange  
 silty loam  
 w/ patches  
 of layered  
 frags  
 ↓  
 12 1/2'

similar to  
 G w/ few  
 small  
 scattered  
 patches of  
 white chalky  
 kaolinite  
 for more  
 see  
 13 1/2'

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
11/21/88	(I) E	4' S	307	310	310	313	3 MIN	
		7 1/2' M	308	311	311	315	4 MIN	
		12 3/4' D	bottom (see profile)					
	(H) F	4' S	317	321	321	325	4 MIN	
		13 1/2' D	bottom (see profile)					
	(J) G	4 S	329	331	331	339	3 MIN	
		12 1/2' D	bottom (see profile)					
11/4/88	7B	3' S	1100	1113	1113	1138	25 MIN	
11/7/88	7 1/2' M	7 1/2' M	1101	1105	1105	1114	9 MIN	
		12 3/4' D	bottom (see profile)					

REMARKS: slipping fence for lot 5 onto left edge of what was originally lot 6. will shift lot lines such that own 5 now part of 6 + vice versa  
 TYPE OF SOIL: use hole 7B as common hole  
 TESTED BY: B Nijer ALSO PRESENT: John S. Keith

# APPLICATION

PERCOLATION TESTING

A 40505  
P \_\_\_\_\_  
DISTRICT 5TH  
DATE 10-29-87

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

*1/22/88  
perc unsatisfactory  
(8)*

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 LOWRIE SARGENT

ADDRESS 13243 WESTHEATH LANE PHONE 498-4334  
CLARKSVILLE, MARYLAND 21029

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

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

PROPERTY LOCATION:

SUBDIVISION TEN OAKS LOT NO. 6 ON PREMISE  
5 -> (Now open space)

ROAD AND DESCRIPTION WEST OF HIGHLAND ROAD, NORTH OF TRIADDELPHIA ROAD

TAX MAP 28+34 PARCEL # 60,59  
30+64

SIZE OF LOT 3.0 AC 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]  
(SIGNATURE OF APPLICANT)

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

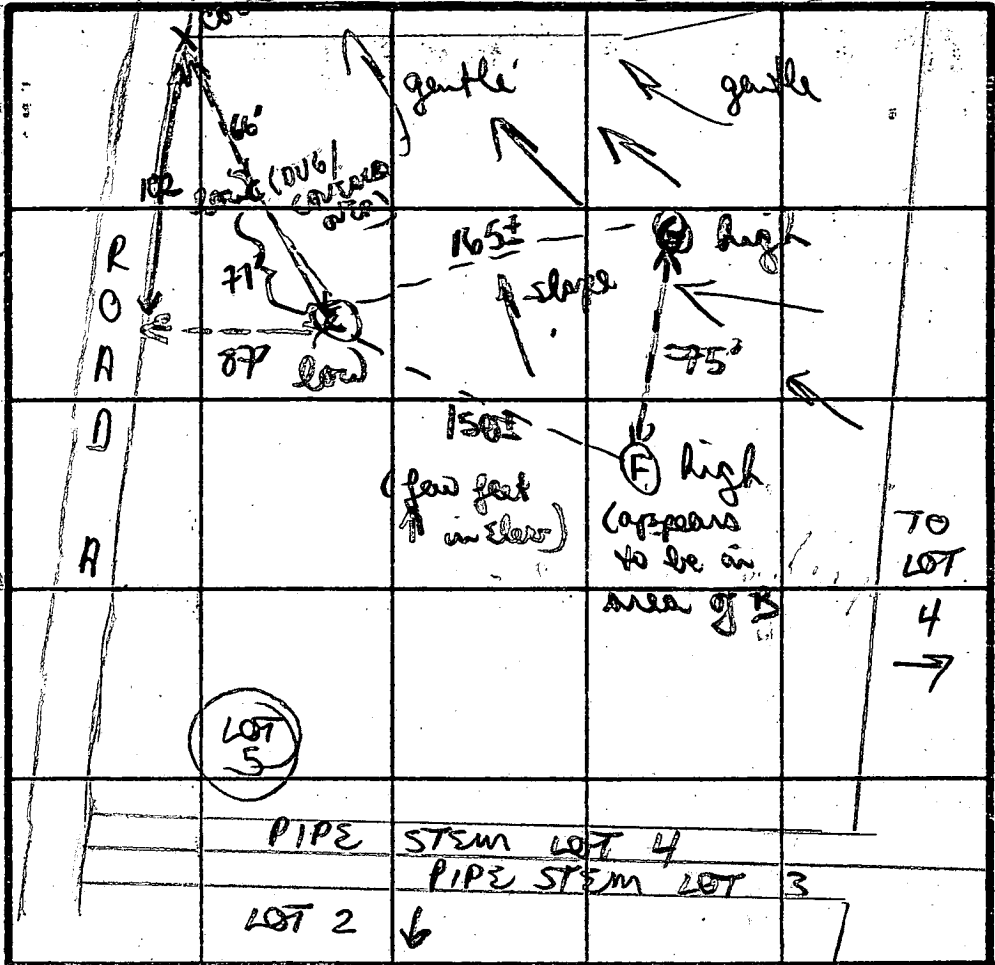
REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

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

REASONS FOR REJECTION OR HOLDING Ho table too high in all holes examined

# THIS IS NOT A PERMIT

open space lot



SOIL PROFILE

heavy orange clay 24'  
w/ pottery to mostly in orange layered micaceous soil  
↓ 3 1/2  
H<sub>2</sub>O 7' 6"

F + G

heavy orange brown clay 2-2 1/2'  
to layered tan grey silty micaceous brown (15% s. all)  
↓  
clay 8'  
H<sub>2</sub>O 9'

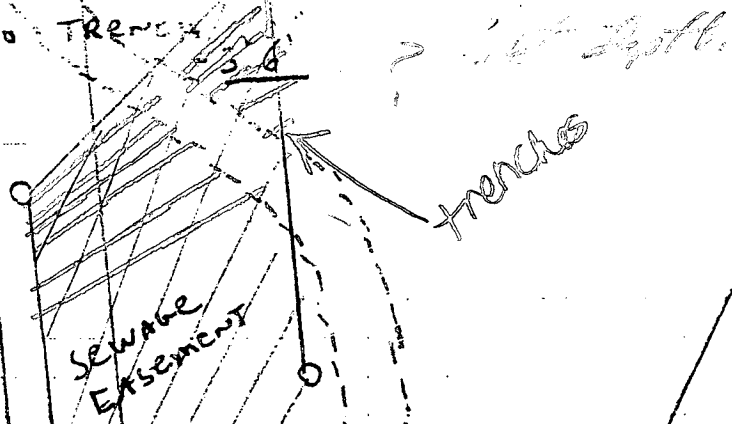
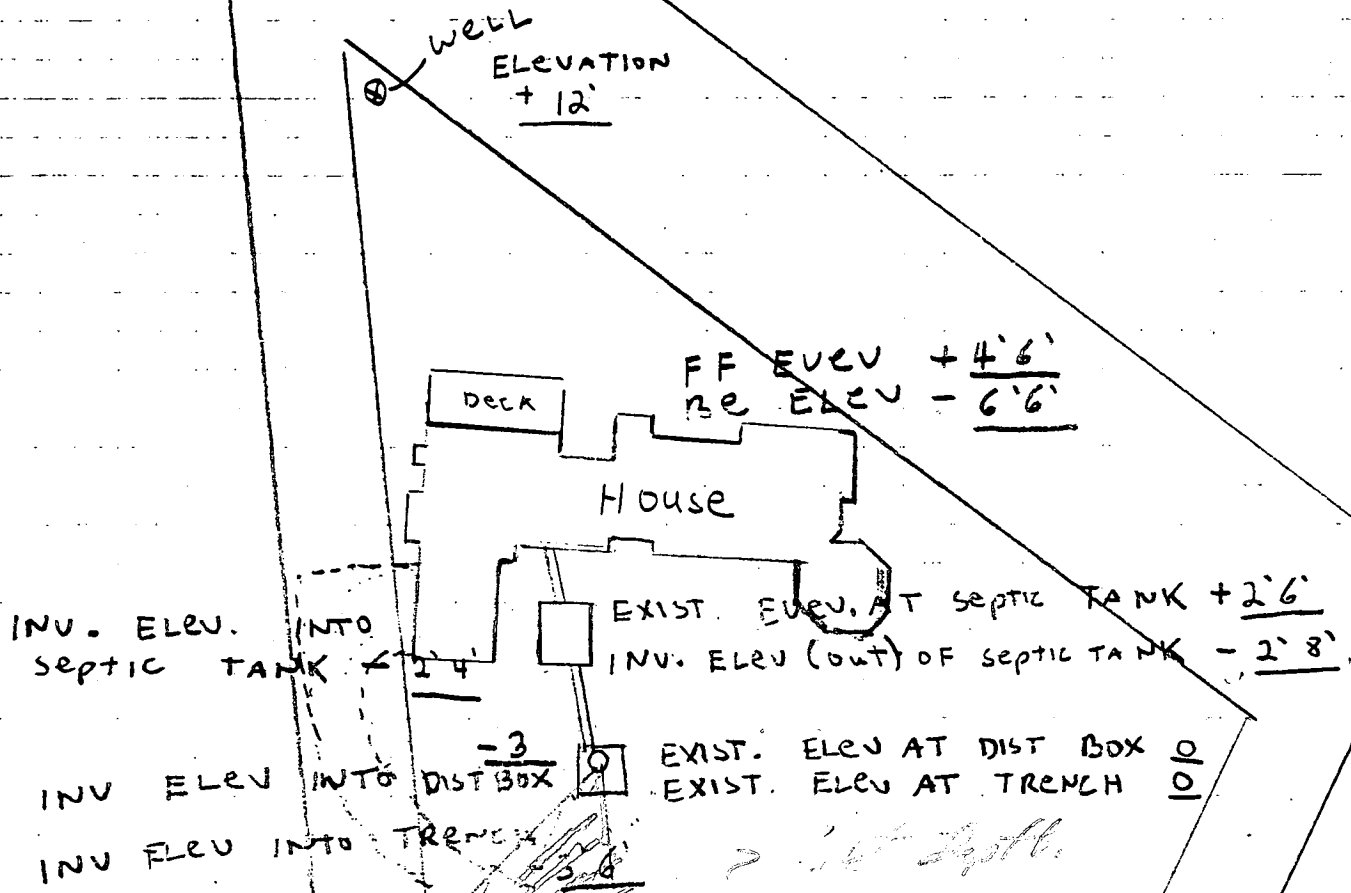
INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1' DROP		TIME
			START	STOP	START	STOP	
1/22/88	C	?	Dug + covered over				
	E	H <sub>2</sub> O	7' Deep				
	F	H <sub>2</sub> O	9' Deep				
	G	H <sub>2</sub> O	8' 10"				

REMARKS: H<sub>2</sub>O in all holes - none tested. Area all unsatisfactory  
 TYPE OF SOIL: orange clays 3-4'; layered weathered shale frags  
 TESTED BY: B Nyman ALSO PRESENT: Keith, Brian

SH-12-1079

# LOT 5 hedgerow



Revised -  
House location  
changed  
VOTD  
5-7-90 VER

WAYNE GREENFIELD  
Wayne *[Signature]*

GILBRIDE LANE (Sub-Div) Hedgerow

- Probably need 3 trenches

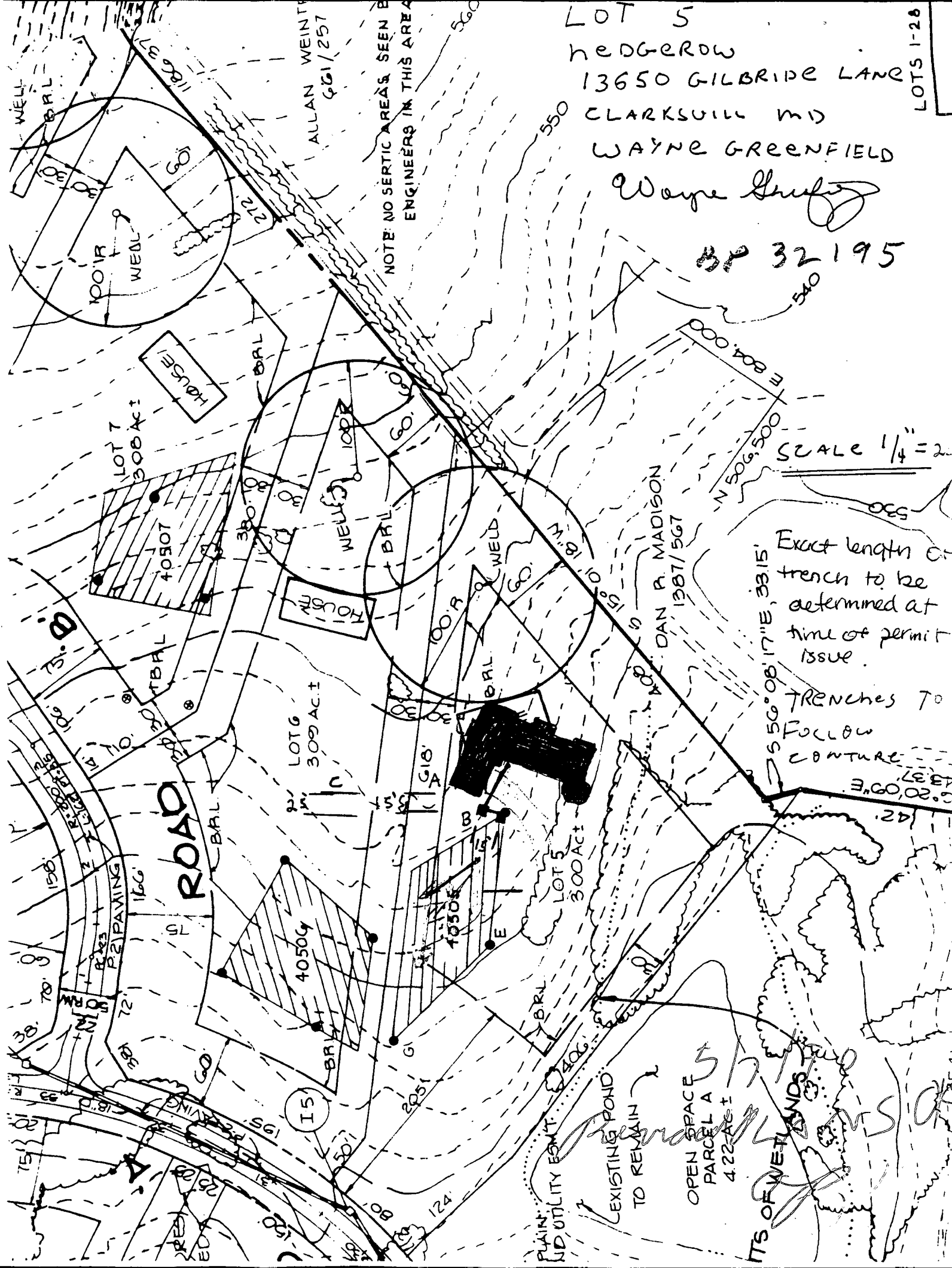
- more curve in drive up grade  
toward dist. box.

-

LOT 5  
 HEDGEROW  
 13650 GILBRIDE LANE  
 CLARKSVILLE MD  
 WAYNE GREENFIELD  
*Wayne Greenfield*

BP 32195

LOTS 1-28



C1 1267 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 A40505

ST/CO USE ONLY DATE Received [ ] [ ] [ ] [ ] [ ] [ ] DATE WELL COMPLETED 01/08/90 Depth of Well 400 (TO NEAREST FOOT) PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-88-1130

OWNER Greenfield Homes Inc last name Gilbride first name Inc TOWN Myran  
 STREET OR RFD HEDGEDOW SECTION 5 LOT 5

**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	
B <sub>1</sub> Shale	2	30	
B <sub>1</sub> mica	30	55	
Gray Mica	160		
Flint	160	165	
Gray Mica	165	400	

**GROUTING RECORD**  
 WELL HAS BEEN GROUTED (Circle Appropriate Box)  YES  NO  
 TYPE OF GROUTING MATERIAL  
 CEMENT  BENTONITE CLAY   
 NO. OF BAGS 15 NO. OF POUNDS 1410  
 GALLONS OF WATER 75  
 DEPTH OF GROUT SEAL (to nearest foot)  
 from 0 ft. to 36 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 ST Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 47  
 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 OPEN HOLE  
 PL  OT  
 PLASTIC OTHER

**DEPTH (nearest ft.)**  
 EACH SCREEN DEPTH (nearest ft.)  
 1 HO 46 900  
 2  
 3  
 SLOT SIZE 1 2 3  
 DIAMETER OF SCREEN (NEAREST INCH) from to

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

**C 3**  
**PUMPING TEST**  
 HOURS PUMPED (nearest hour) 6  
 PUMPING RATE (gal. per min. to nearest gal.) 1  
 METHOD USED TO MEASURE PUMPING RATE Direct  
 WATER LEVEL (distance from land surface) BEFORE PUMPING 30 WHEN PUMPING 190  
 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  below (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 A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED  
 E ELECTRIC LOG OBTAINED  
 P TEST WELL CONVERTED TO PRODUCTION WELL

THEREBY 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. 40  
 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)  
 SITE SUPERVISOR (sign of driller or journeyman responsible for sitework if different from permittee)

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)  
 T (E.R.O.S.) W Q  
 70 72 74 75 76  
 TELESCOPE CASING LOG INDICATOR OTHER DATA

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

Howard County Health Department  
 Bureau of Environmental Health  
 3525-H Ellicott Mills Drive  
 Court House Square  
 Ellicott City, Md. 21043  
 461-9933

New Installation    
 Replacement

Receipt # 46109  
 Date 7/6/90

Name of Installer Zepp Plumbing + Heating Inc. Telephone 301-671-7111

License number # 7082 / MD.  
 Certified Well Pump Installer  Well Driller  Registered Plumber

Name of Property Owner Greenfield Homes Telephone 301-549-7558  
 Subdivision HENGECROW Lot # 5 Well tag #             
 Site Address 13650 BILBRIDE LANE  
Clarksville, Md. 21029

<b>Pump</b>	<b>Motor</b>	<b>Pitless Adapter</b>
1. Type	1. Horsepower <u>1</u>	1. Make <u>MARTINSON</u>
a. Deep well jet <input type="checkbox"/>	2. RPM <u>          </u>	2. Model # <u>B-10X</u>
b. Shallow well jet <input type="checkbox"/>	3. Voltage <u>          </u>	3. Depth <u>42"</u>
c. Submersible <input checked="" type="checkbox"/>	a. 110 <input type="checkbox"/>	
2. Make <u>GOULDS</u>	b. 220 <input checked="" type="checkbox"/>	
3. Model # <u>SES 10412</u>		
4. Capacity <u>5</u> GPM		
5. Pump exceeds well capacity Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
6. If Yes, is low pressure cutoff switch installed? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors <input checked="" type="checkbox"/> Cable guards <input checked="" type="checkbox"/> Other <input type="checkbox"/>		

<b>Tank</b>	<b>Piping</b>	<b>Well data</b>
1. Capacity <u>120 gallons</u>	1. Type <u>Polybutelene</u>	1. Depth <u>400</u> ft.
2. Pressure relief valve? <u>YES</u>	2. Size <u>1"</u>	2. Yield <u>1</u> GPM
	3. NSF and/or BOCA Code approved <input checked="" type="checkbox"/>	3. Static water level <u>          </u> ft.
	4. Depth of supply line <u>42"</u>	4. Will water supply be disinfected by installer? <u>yes</u>

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: Edgar W. Zepp, III  
 Date: 6/28/90

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

# HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

B00120229

Building Address 13650 Gilbride Ln.  
Clarksville, Md. 21029  
 Suite/Apt. #: \_\_\_\_\_ SDP/WP/Petition #: \_\_\_\_\_  
 Census Tract 605101 Subdivision Hedgerow  
 Section \_\_\_\_\_ Area \_\_\_\_\_ Lot 5  
 Tax Map 25 Parcel 30 Grid 20  
 Zoning RR Map Coordinates 13H4 Lot size \_\_\_\_\_

Property Owner's Name Donald C. Wilhelm  
 Address 1944 ~~the~~ ~~the~~ 13650 Gilbride Ln.  
 City Clarksville State Md. Zip Code 21029  
 Home Phone 443-535-0091 Work Phone 410-765-0820  
 Applicant's Name & Mailing Address, (if other than stated hereon): \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_

Existing Use Basement St Home  
 Proposed Use Basement Recreation  
 Estimated Construction Cost \$ 2000  
 Description of Work Create a wet bar, library,  
bedroom and bath Rec Rm  
in part of basement

Contractor Company owner  
 Contact Person \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 License No. \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_

Occupant or Tenant owner  
 Contact Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_

Engineer or Architect Company \_\_\_\_\_  
 Contact Person \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_

**BUILDING DESCRIPTION - COMMERCIAL**

**BUILDING DESCRIPTION - RESIDENTIAL**

Building Characteristics	Utilities
Height: _____	Water Supply: _____ <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
No. of stories: _____	Sewage Disposal: _____ <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: _____ <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Construction type: _____ <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> # Depth _____ Width _____	Water Supply: _____ <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
1st floor: _____	Sewage Disposal: _____ <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
2nd floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: _____ <input type="checkbox"/> Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms _____	Heating System: _____ <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other: _____
Other Structure: _____ Dimensions: _____ Footings: _____ Roof: _____ <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THEREON; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Judith A. Wilhelm  
 Applicant's Signature  
owner  
 Title/Company

Judith A. Wilhelm  
 Print Name  
9/2/99  
 Date

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**  
 \*\* PLEASE WRITE NEATLY AND LEGIBLY. \*\*  
 - FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL
Land Development DPZ		
State Highways		
Building Official	<u>9/1/99</u>	<u>[Signature]</u>
Dev. Engineering DPZ		
Health	<u>9/1/99</u>	<u>[Signature]</u>
Fire Protection		

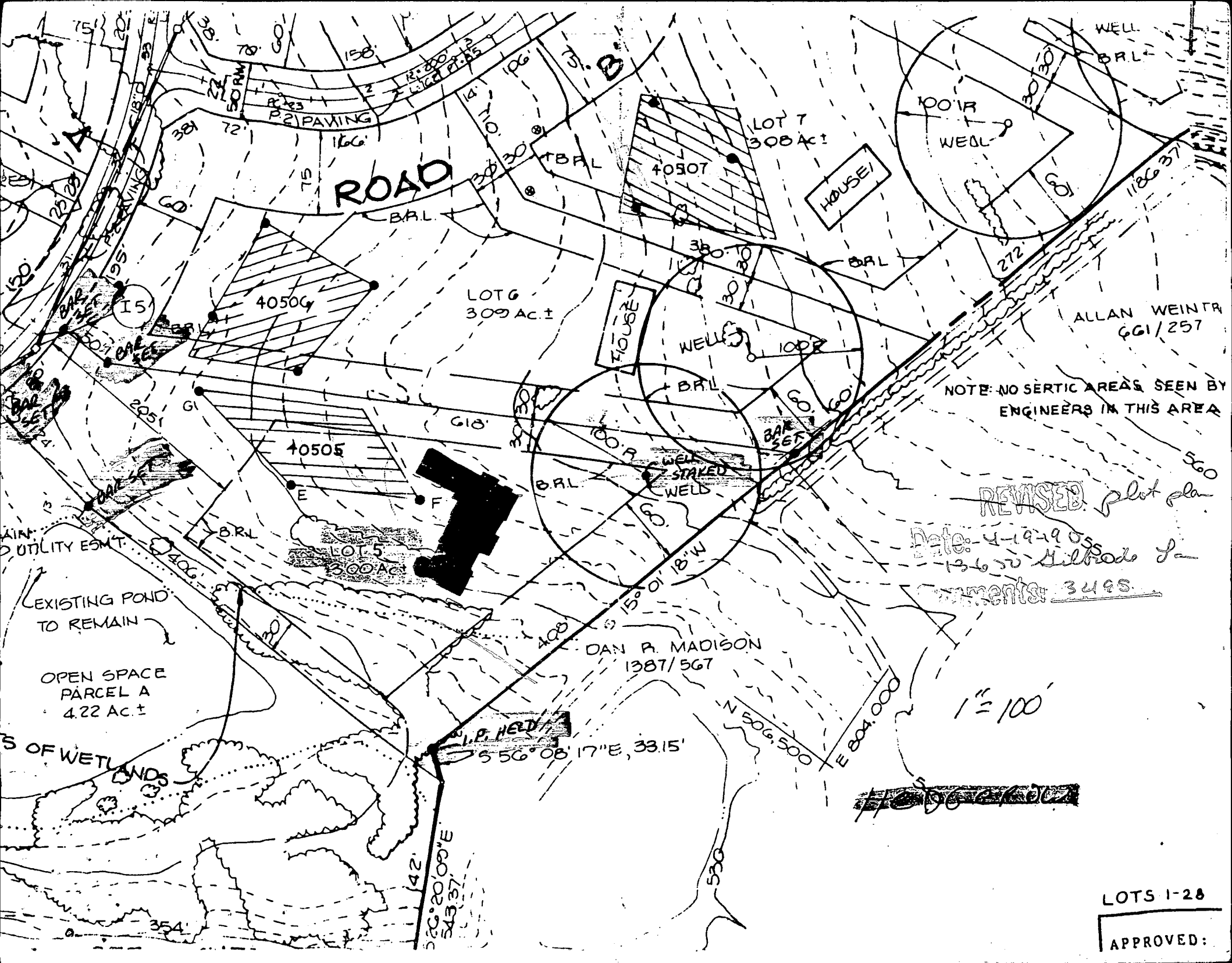
**DPZ SETBACK INFORMATION**  
 Front: \_\_\_\_\_  
 Rear: \_\_\_\_\_  
 Side: \_\_\_\_\_  
 Side St.: \_\_\_\_\_  
 All minimum setbacks met? YES  NO   
 Is Entrance Permit required? YES  NO   
 Historic District? YES  NO   
 Lot Coverage for New Town Zone \_\_\_\_\_  
 SDP/Red-line approval date \_\_\_\_\_

**PROPERTY ID#:** 7783

Filing fee	\$ _____
Permit fee	\$ <u>100</u>
Excise tax	\$ _____
Sub-total paid	\$ _____
Add'l permit fee	\$ _____
TOTAL FEES	\$ <u>100</u>
Balance due	\$ _____
Check	# <u>9292</u>
Validation	# <u>34070</u>

CONTINGENCY CONSTRUCTION START:   
 ONE STOP SHOP:

Distribution of Copies: White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA



ROAD

40506

LOT 6  
309 Act ±

40505

LOT 5  
300 Act ±

DAN R. MADISON  
1387/567

LOT 7  
308 Act ±

ALLAN WEINTRA  
661/257

NOTE: NO SEPTIC AREAS SEEN BY  
ENGINEERS IN THIS AREA

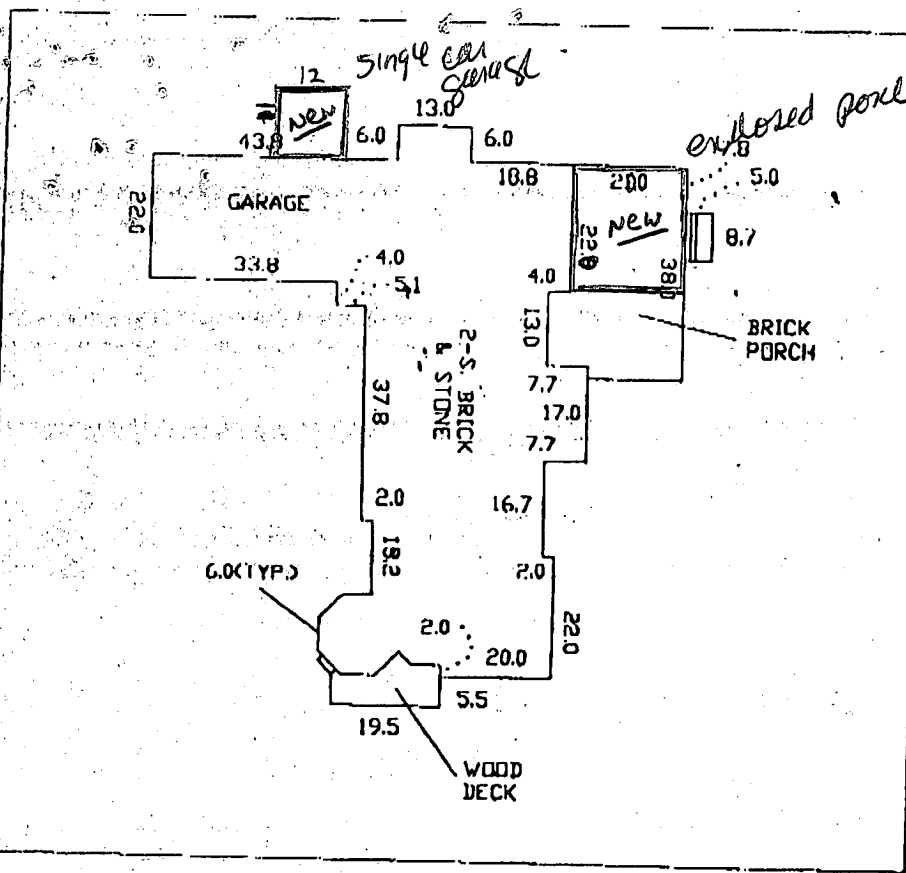
REVISED plot plan

Date: 4-19-90  
13650 Gilbrede Ln  
Comments: 3495

1" = 100'

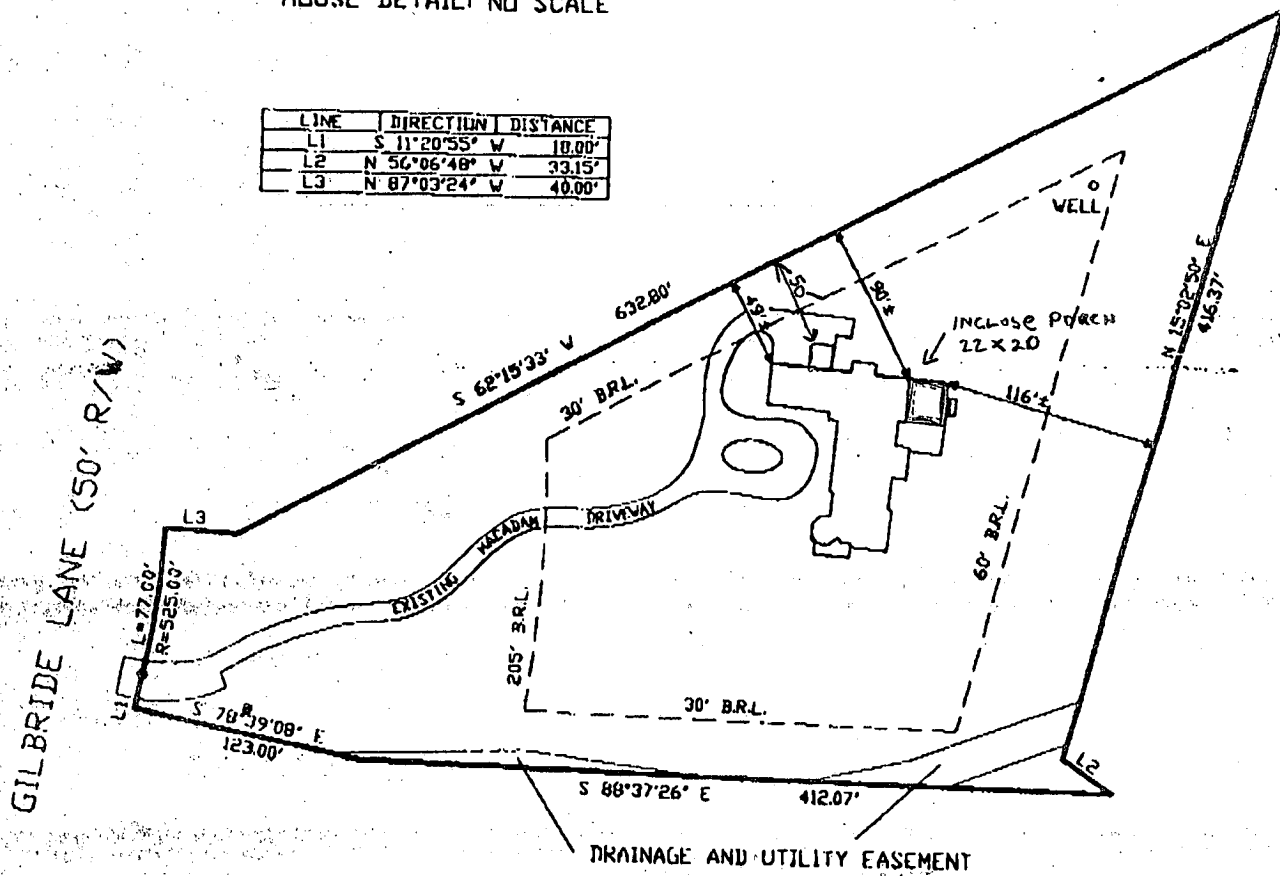
LOTS 1-28

APPROVED:



HOUSE DETAIL: NO SCALE

LINE	DIRECTION	DISTANCE
L1	S 11°20'55" W	10.00'
L2	N 56°06'48" W	33.15'
L3	N 87°03'24" W	40.00'



NOTES:

1. I CERTIFY THAT I HAVE LOCATED THE IMPROVEMENTS ON THE PARCEL AS SHOWN HEREON. THIS PLAT IS NOT INTENDED FOR USE IN ESTABLISHING PROPERTY LINES.
2. THIS PROPERTY IS LOCATED IN FLOOD ZONE 'C' AS SHOWN ON COMMUNITY-PANEL NO. 240044-0026-B, DATED DEC. 4, 1986.
3. FIFTH ELECTION DISTRICT, HOWARD COUNTY, MARYLAND.

*Arthur M. Botterill*

HOUSE LOCATION:

PREPARED BY: <b>ARTHUR M. BOTTERILL</b> 3601 DEWBERRY CIRCLE WESTMINSTER, MD. 21157 (410) 549-2124	Project Location:	LOT NO. 5 OF 'HEDGEROW'	
	Scale: 1"=100'	Date: 6-7-90	REVISION DATE: 3/15/1993
	Tax Map: 28	Parcel: 59	Liber: 969 Folio: 210
	Computed By: AMB	Drawn By: CAD	REVISED BY: VG
	Plat No.:	HOWARD COUNTY RECORD PLAT NO. 8933	

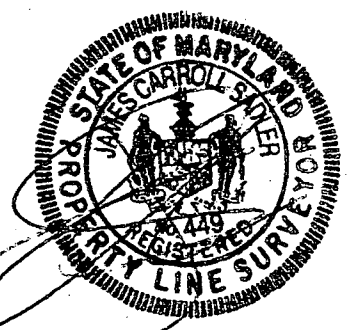
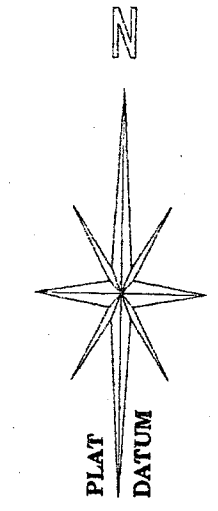
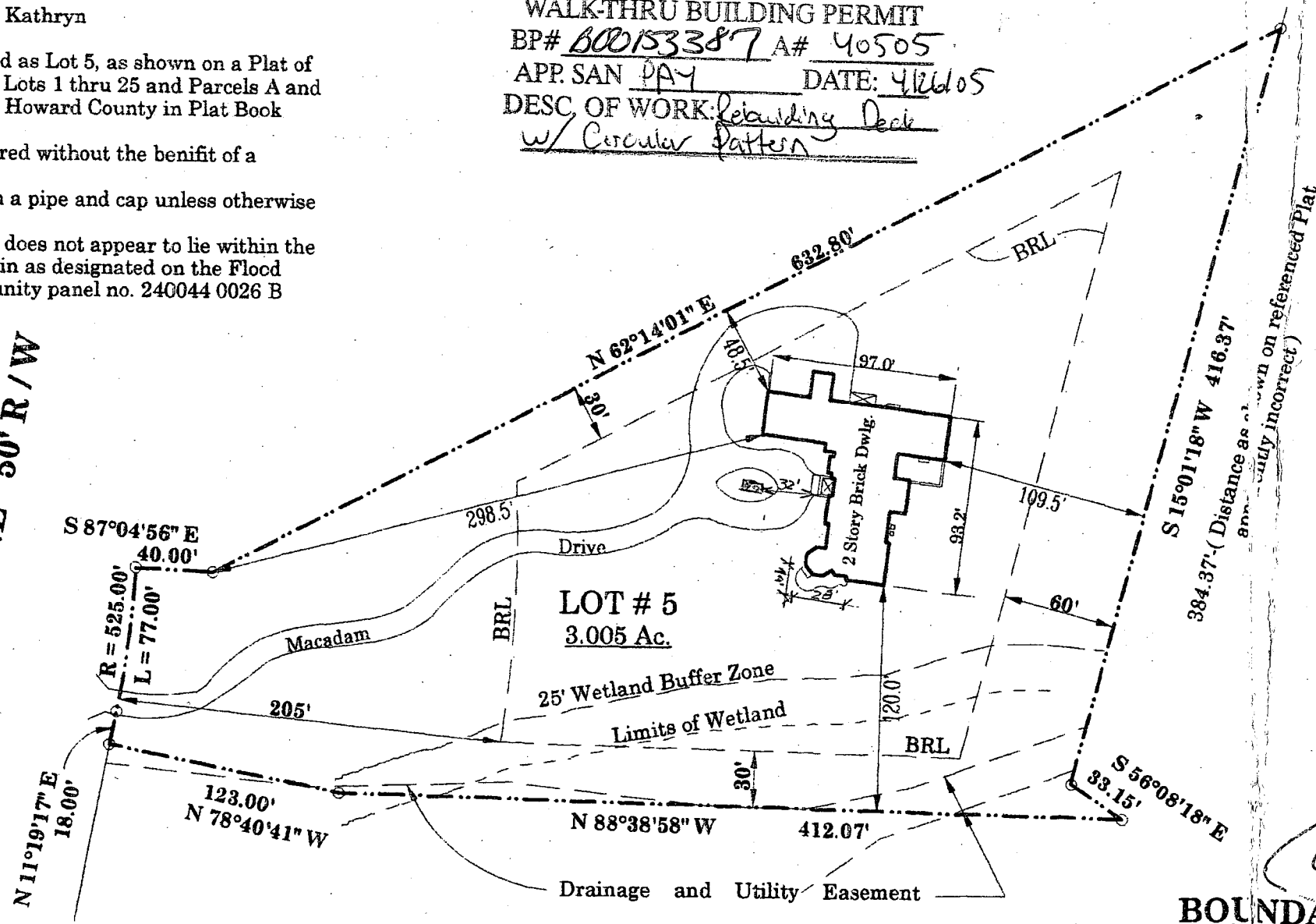
# GENERAL NOTES

- Owners - Alascio, John A & Kathryn
- Deed Ref. 2820 - 124
- Being known and designated as Lot 5, as shown on a Plat of HEDGEROW, Section One, Lots 1 thru 25 and Parcels A and B, which Plat is recorded in Howard County in Plat Book No. 8933.
- This survey has been prepared without the benefit of a Title Report
- All corners are marked with a pipe and cap unless otherwise noted.
- The property shown hereon does not appear to lie within the boundaries of any Flood Plain as designated on the Flood Insurance Rate Map community panel no. 240044 0026 B dated December 4, 1986.

# APPROVED

WALK-THRU BUILDING PERMIT  
 BP# 000153387 A# 40505  
 APP. SAN PAY DATE: 4/26/05  
 DESC. OF WORK: Rebuilding Deck  
w/ Circular Pattern

GILBRIDE LANE 50' R/W



## BOUNDARY SURVEY

13650 GILBRIDE LANE  
 5th Electoral District Howard County, MD.  
 Scale 1" = 80' Date March 12, 1999

**W. T. SADLER SURVEYORS**  
 152 Westminster Pike  
 Reisterstown, MD. 21136  
 410-526-5618

C1 6548

SEQUENCE NO. (MDE 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 13 A40505

ST/CO USE ONLY DATE RECEIVED MM DD YY

DATE WELL COMPLETED

Depth of Well 800 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-94-4193

OWNER Wilhelm Donald STREET OR RFD 13650 Gilbride Lane TOWN Clarksville SUBDIVISION Hodgerow SECTION 1 LOT 5

WELL LOG

Not required for driven wells

GROUTING RECORD

WELL HAS BEEN GROUTED (Y) (N) TYPE OF GROUTING MATERIAL (C) (B) CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 28 NO. OF POUNDS 2800 GALLONS OF WATER 168 DEPTH OF GROUT SEAL 55 ft.

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 5 PUMPING RATE (gal. per min.) 15. METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 17 ft. WHEN PUMPING 102 ft. TYPE OF PUMP USED (for test) S submersible

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

Table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Rows include Top Soil, Brown Shale, Brown Mica, Sand Stone, Brown Mica, Gray Mica, Opelag, Gray Mica.

CASING RECORD

MAIN CASING TYPE Ho Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 70

OTHER CASING (if used)

Table for other casing with columns for diameter and depth.

SCREEN RECORD

screen type or open hole insert appropriate code below ST BR HO PL OT

DEPTH (nearest ft.) 110 68 800

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED YES NO

CIRCLE APPROPRIATE LETTER A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION"

DRILLERS LIC. NO. 1 MND 040 DRILLERS SIGNATURE

LIC. NO. 1 JSD 038 BRUCE THOMPSON

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

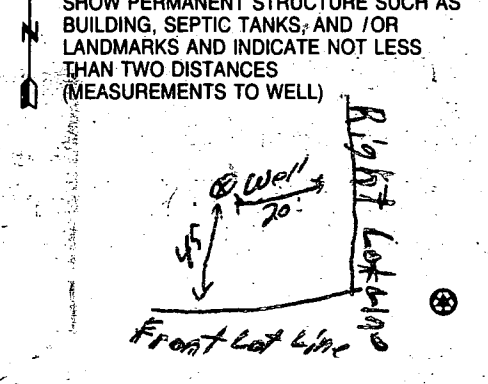
GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F-IN BOX 68

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMP INSTALLED

DRILLER INSTALLED PUMP (CIRCLE) (YES or NO) 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. 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 LAND SURFACE (-) below 2 (nearest foot)

LOCATION OF WELL ON LOT



6-2-05

Page \_\_\_\_\_ of \_\_\_\_\_  
Date \_\_\_\_\_

Review \_\_\_\_\_

FIELD DATA SHEET  
HYDROGEOLOGIC AREA (3) WELL YIELD TEST

Maryland Well Permit No. Ho-94-4193 Election District \_\_\_\_\_  
Location of Property (road) 13650 GILBRIDE LANE  
Subdivision Hedge row Lot 5 Block \_\_\_\_\_ Plat \_\_\_\_\_ Sec. \_\_\_\_\_  
Well Driller Ernst & Son Owner Dw Wilhelm  
Depth of Well 800 10gpm  
Distance of Measuring Point (M.P.) above ground 2 FT  
Static Water Level (S.W.L.) below M.P. 17 FT

7/25/05

I. High Rate Pumping -- reservoir drawdown  
Time pump started 8:40 Pumping rate 15 GPM  
Total time 20 min to reach pumping water level 70 ft. below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes.

TIME	WATER LEVEL Below M.P.	PUMPING RATE Time to fill <u>ONE</u> gal. bucket	<del>FLOW METER READING</del> Pump SET (if used)	CALCULATED FLOW (gallons per min.)
9:00	70 FT	6 SEC	380 FT	10 GPM
9:15	70 FT	6 SEC		10.6 GPM
9:30	70 FT	6 SEC		10 GPM
9:45	70 FT	6 SEC		10 GPM
10:00	70 FT	6 SEC		10 GPM
10:15	70 FT	6 SEC		10 GPM
10:30	70 FT	6 SEC		10 GPM
10:45	70 FT	6 SEC		10 GPM
11:00	70 FT	6 SEC		10 GPM
11:15	71 FT	6 SEC		10 GPM
11:30	71 FT	6 SEC		10 GPM
11:45	71 FT	6 SEC		10 GPM
12:00	84 FT	4 SEC		15 GPM
12:15	88 FT	4 SEC		15 GPM
12:30	92 FT	4 SEC		15 GPM
12:45	94 FT	4 SEC		15 GPM
1:00	95 FT	4 SEC		15 GPM
1:15	96 FT	4 SEC		15 GPM
1:30	98 FT	4 SEC		15 GPM
1:45	99 FT	4 SEC		15 GPM
2:00	100 FT	4 SEC		15 GPM
2:15	101 FT	4 SEC		15 GPM
2:30	102	4 SEC		15 GPM

20 min  
up to 15  
GPM

B 1 1421

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type 522425

STATE PERMIT NUMBER

40-94-4193 fill in this form completely

Date Received (APA) 4/25/2005

OWNER INFORMATION

WILHELM DONALD 13650 GILBRIDE LANE CLARSVILLE, MD 21029

B 3

LOCATION OF WELL

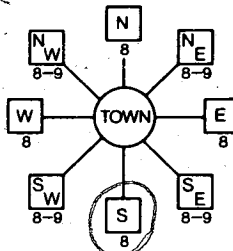
Howard Hedgerow Dayton 52 NEAREST TOWN 71 MILES FROM TOWN 1 M 1 73 76 77 78

DRILLER INFORMATION

George F. Easterday M WD 040 L. Franklin Easterday, Inc. 9265 Brown Church Rd., MT. Airy, Md. 21774

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



13650 Gilbride Lane NEAR WHAT ROAD 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH SOUTH WEST EAST DISTANCE FROM ROAD 34 43 37 Ft. ENTER FT OR MI 38 39 TAX MAP: 28 BLK: 20 PARCEL 30

B 2

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 5 APPROX. PUMPING RATE (GAL. PER MIN.) 8 500 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 500 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION (circled) FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) INDUSTRIAL, COMMERCIAL, DEWATERING PUBLIC WATER SUPPLY WELL TEST, OBSERVATION, MONITORING GEO-THERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard 13 A-40505 COUNTY NO. STATE SIGNATURE INSERT S DATE ISSUED 5/18/2005 Brown Baker 5/18/2006 NORTH GRID 506000 EAST GRID 803000

APPROXIMATE DEPTH OF WELL 300 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary) CABLE REVERSE-ROTary DRIVE-POINT

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-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS 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 (MDE OR COUNTY USE ONLY)

APPROX. PERMIT NUMBER G

PERMIT No. 40-94-4193

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

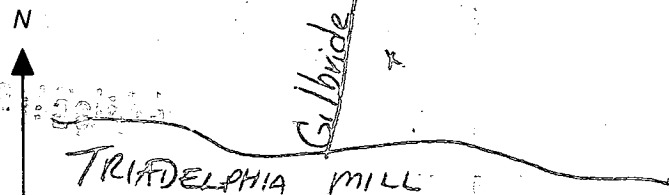
SOURCES OF DRILLING WATER

- 1. wells 2. 3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E 803 N 506

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 13 J 5 Dayton



SPECIAL CONDITIONS

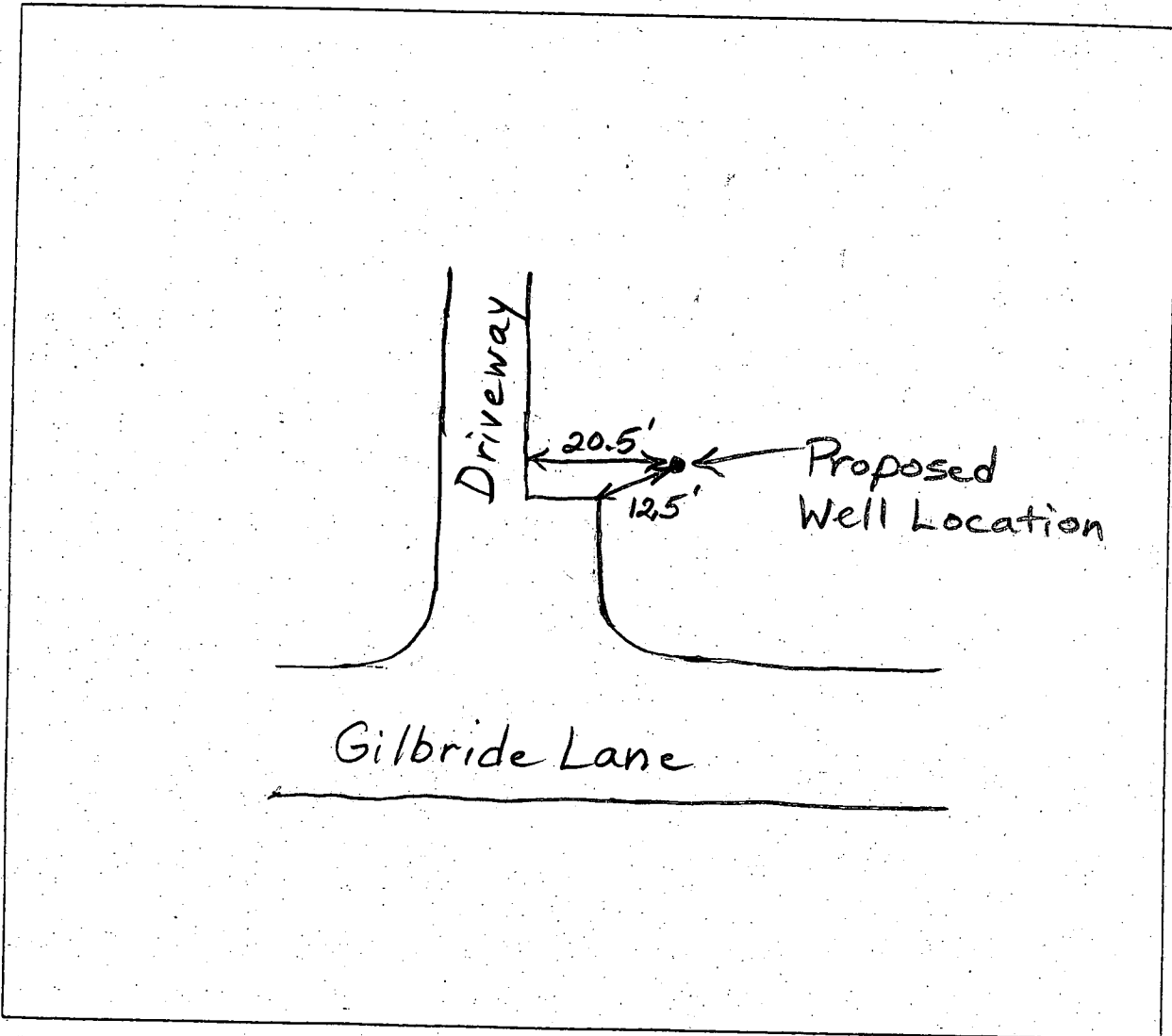
NOTE - APPROVING AUTHORITIES SHOULD USE SPECIAL CONDITIONS IF NEEDED

Well Casing Must Extend at Least 2' Above Grade Well Must Be At least 10' From Property Line

SITE INSPECTION SHEET

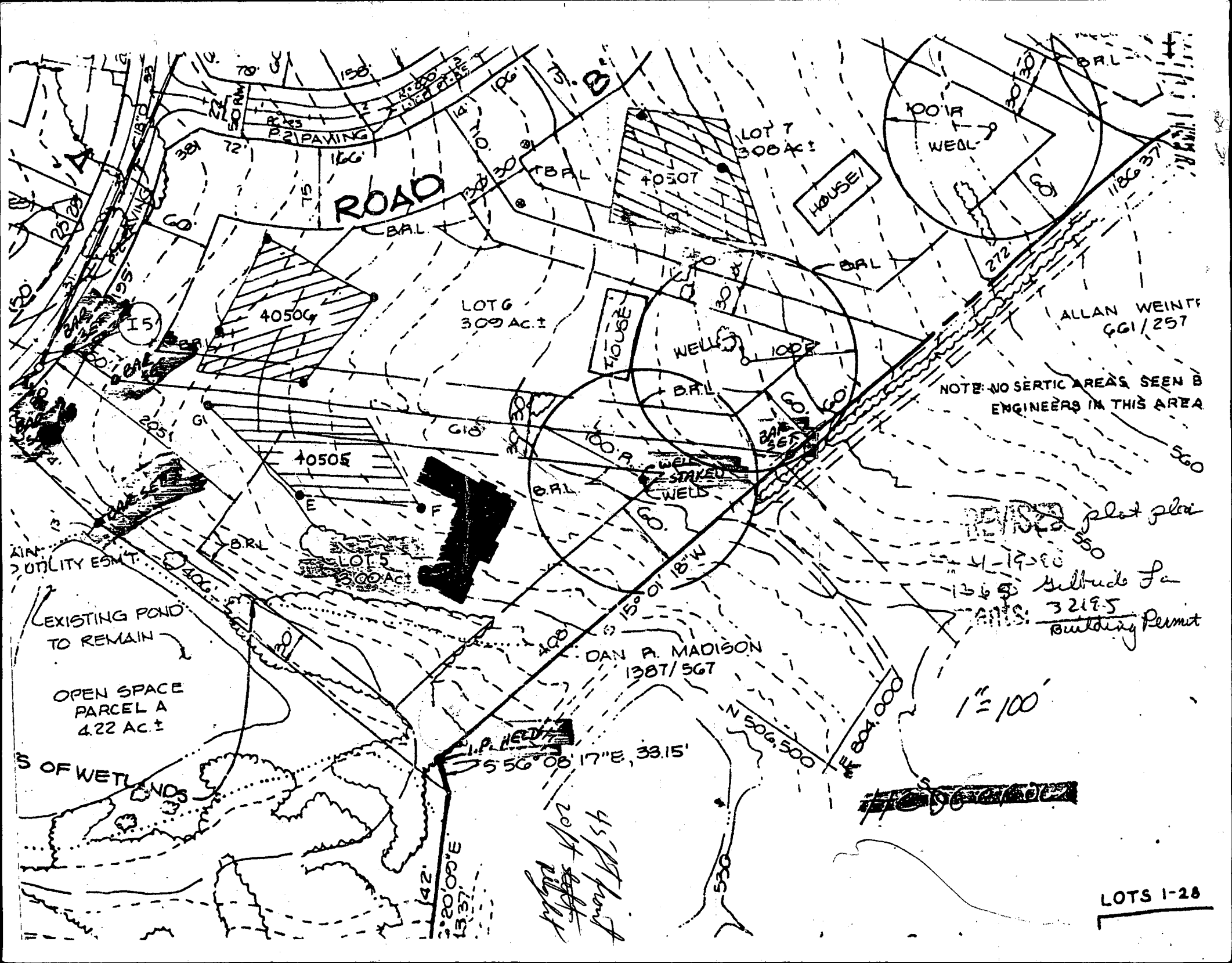
OWNER: Donald Wilhelm PHONE #: \_\_\_\_\_  
ADDRESS: 13650 Gilbride Lane CONTRACTOR: \_\_\_\_\_  
SUBDIVISION: Hedgerow LOT: 5 WELL TAG #: \_\_\_\_\_  
PROPOSAL: \_\_\_\_\_ COUNTY #: \_\_\_\_\_

LOCATION DIAGRAM



COMMENTS: 4/8/05 Homeowner wants to have an irrigation well drilled at the above site. Homeowner says well is 20+' from property line. Casing must be 2+' above grade. Site is in floodplain. (BB)

DATE: \_\_\_\_\_ INSPECTOR: \_\_\_\_\_



ROAD

40504

LOT 6  
309 AC ±

40505

SLOT 5  
300 AC ±

40507

LOT 7  
300 AC ±

HOUSE 1

100' R  
WELL

ALLAN WEINTE  
GGI/257

NOTE: NO SEPTIC AREAS SEEN BY  
ENGINEERS IN THIS AREA

REVISION plot plan

4-17-80  
136 S Millbuck Ln  
DANIS: 32185  
Building Permit

1" = 100'

DAN P. MADISON  
1387/567

S 56° 08' 17" E, 33.15'

*45' pt front  
right  
right*

EXISTING POND  
TO REMAIN

OPEN SPACE  
PARCEL A  
4.22 AC ±

S OF WETLANDS

LOTS 1-28