

2/15/02 -
1 pm
pump test

9/25/01
LAYOUT 11:00
Final

9/25/01
Final
PM

05-411 844

PERMIT

SEWAGE DISPOSAL SYSTEM
HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
410-313-2640

P 515 257
A 40524
ISSUE DATE 5/23/01
APPROVAL DATE 2-15-02

INDEXED

Pump test ok

Matfield's Equipment

IS PERMITTED TO INSTALL ALTER

ADDRESS 13785 Burnwoods Road PHONE ~~000~~ 301-854-6172

SUBDIVISION Hedgerow LOT NUMBER 24 ADDRESS 13609 Gilbride Lane

PROPERTY OWNER MTR Land PROPERTY OWNER'S ADDRESS 13970 Baltimore Blvd.

SEPTIC TANK CAPACITY 1250 GALLONS

**BUILDING PERMIT SIGNED
AND RETURNED**

PUMP CHAMBER CAPACITY 1250 GALLONS

12-3-03 800 148 350 - SUN ROOM

NUMBER OF BEDROOMS 4

SQUARE FEET PER BEDROOM 180

LINEAR FEET OF TRENCH REQUIRED 240 280 installed

TRENCHES: Trenches to be 3.0 feet wide. Inlet 5.0 feet below original grade. Bottom maximum depth 7.0 feet below original grade. 2.0 feet of stone below distribution box.

LOCATION: Place the distribution box 160 feet off the front lot line and 75 feet off the right lot line as seen from Gilbride Lane. Run first trench along contour towards the right lot line; run all other trenches along contour in both directions.

NOTES: Septic pump detail to be provided by installer prior to issuance of septic permit. Pump performance test is necessary prior to Health Department approval of pump septic system. O.K. (Ba)

PLANS APPROVED Amy Mc Millen

PERMIT VOID AFTER 2 YEARS

NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS

NOTE: TOP OF SEPTIC TANKS ARE TO BE NO DEEPER THAN 3.0 FEET BELOW FINISH GRADE

NOTE: WATERTIGHT SEPTIC TANKS REQUIRED

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS, 90° ELBOWS ARE NOT ACCEPTABLE

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX, DRAINFIELDS) TO BE 100 FEET FROM ANY WATER WELL UNLESS OTHERWISE SPECIFICALLY AUTHORIZED

NOTE: NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH UNLESS SPECIFICALLY AUTHORIZED

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

NOTE: IF PUMPED SEPTIC SYSTEM REQUIRED, (1) SEPTIC PUMP DETAIL TO BE PROVIDED BY INSTALLER PRIOR TO ISSUANCE OF SEPTIC PERMIT (2) PUMP PERFORMANCE TEST IS NECESSARY PRIOR TO HEALTH DEPARTMENT APPROVAL OF SEPTIC PERMIT

NEITHER THE HOWARD COUNTY COUNCIL NOR 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

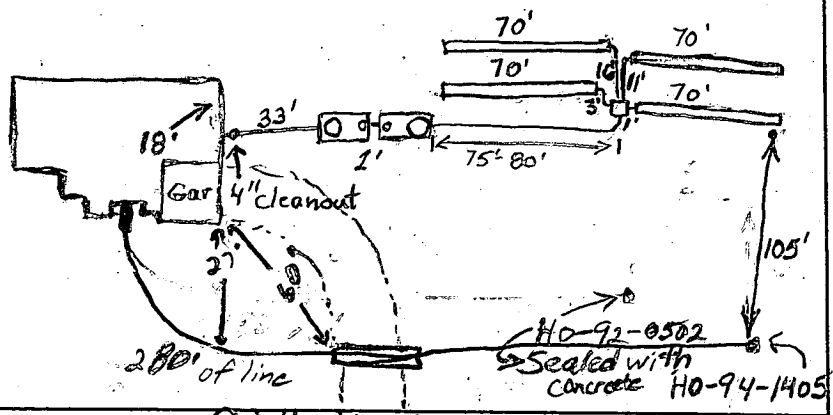
REGISTERED
DATE 2-24-00
NO. 133402
21X20 DECK
1/28/01
12-8-2001
800 1334 87
26X40 INGROUND POOL
w/ fence

A40524

NOT TO SCALE

REMOVED

BUILDING PERMIT SIGNED
AND RETURNED
COMPUTER DATA



TRENCH DATA	
TRENCH WIDTH	3'
TRENCH INLET DEPTH	5'
TRENCH BOTTOM DEPTH	7'
DEPTH OF STONE	2'
NUMBER OF TRENCHES	4
TOTAL TRENCH LENGTH	280'
ABSORBENT AREA	840 sq. ft.
DISTRIBUTION BOX LEVEL	Levelers
BAFFLE IN DISTRIBUTION BOX	90° Elbow

SEPTIC TANK DATA	
SEPTIC TANK	1500 TS GALLONS
MANHOLE RISER	Yes
6 INCH INSPECTION PORT	Yes
PUMP CHAMBER DATA	
PUMP CHAMBER GALLONS	1500 TS
MANHOLE RISER	Yes + 6" cleanout
ALARM	OK
PUMP PERFORMANCE TEST	OK (AUDITORY TEST)

Gilbride Lane

PRE-CONSTRUCTION INSPECTION: 9/24/01 Hatfields to set distribution in middle of easement and to install 4 trenches. Will try to

INSPECTION COMMENTS: maximize use of area by installing more than 240 feet of trench. BB 9/25/01 O.K. to cover everything.

Need pump and alarm test for final approval. BB

2/15/02 Alarm test OK. Water reached d.b. Confirmed via listening through four-inch PVC against the lid. (K6)

INSPECTOR Frederick, Kase

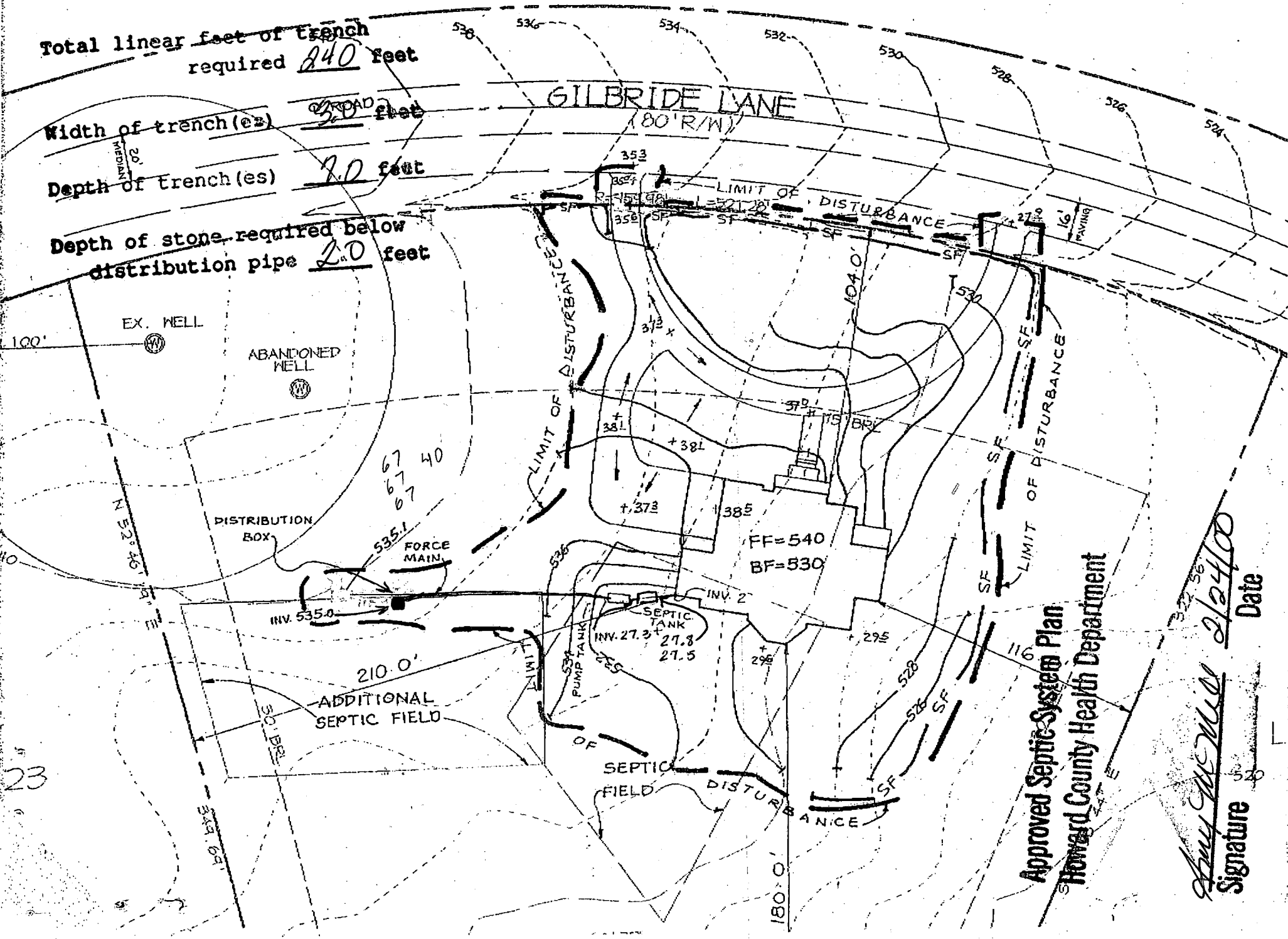
DATE SYSTEM APPROVED 2-15-02

Total linear feet of trench required 240 feet

Width of trench (es) 3.0 feet

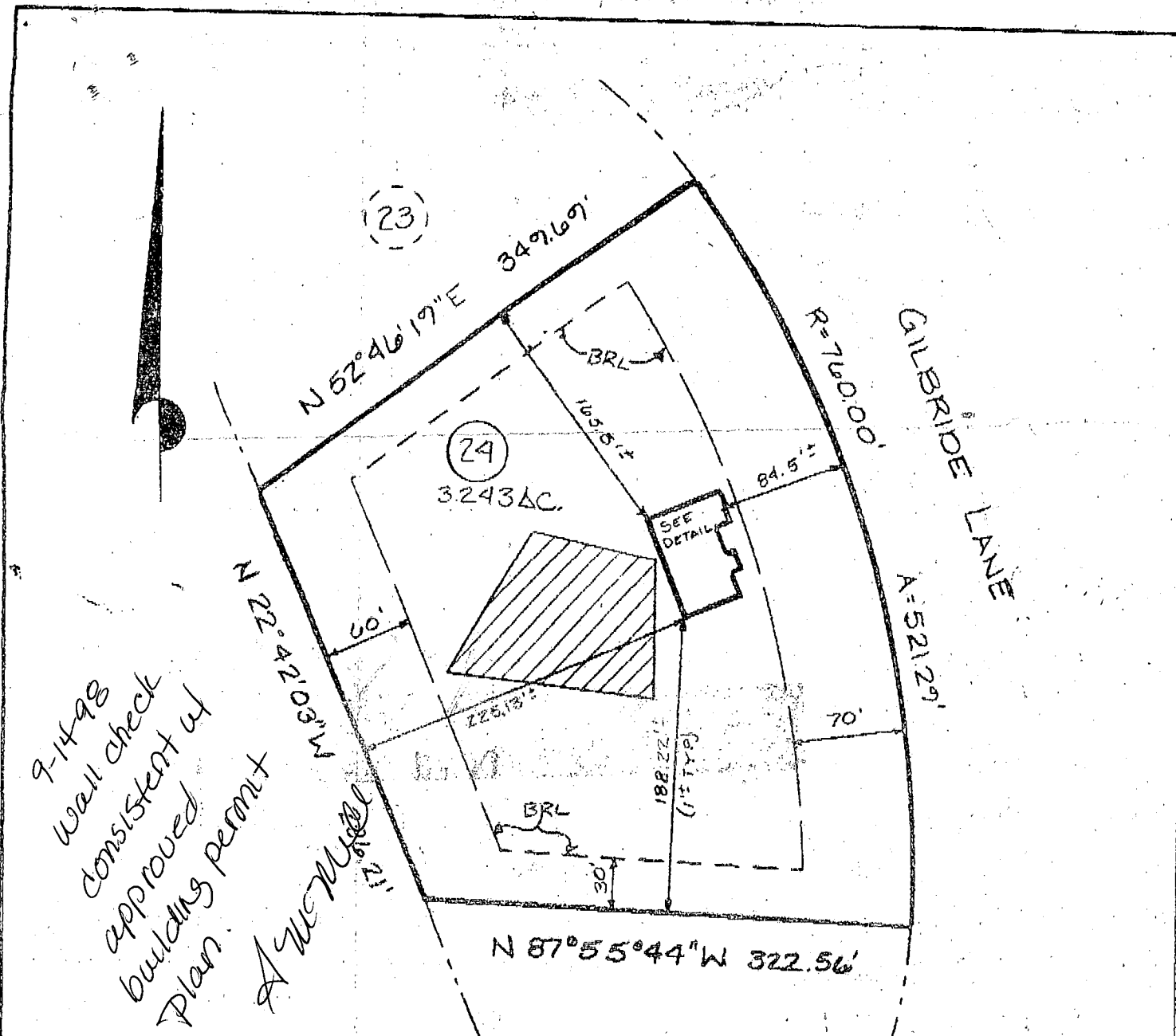
Depth of trench (es) 2.0 feet

Depth of stone required below distribution pipe 2.0 feet

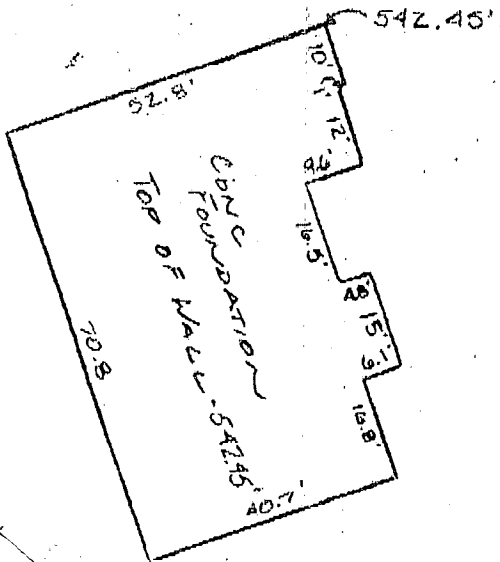


Approved Septic System Plan
 Howard County Health Department

Signature Amy McMill Date 2/24/00



DETAIL SCALE 1"=30'



(25)

LOCATION DRAWING
 LOT 24
 HEDGEROW

SECTION ONE
 5TH ELEC. DIST HOWARD, CO MD

I hereby certify that I have surveyed the property shown hereon for the purpose of locating the improvements. This plan is a benefit to the consumer only in so far as it is required by a title insurance company or its agent in connection with an associated transfer, financing or refinancing. It is not to be relied upon for the establishment of boundary, easement or right-of-way lines for any reason, such as the location of fences, garages, buildings, or other existing or future improvements.

By: Dennis E. Meckley Property Line Surveyor No 10841 Date

The improvements shown hereon lie within Flood Hazard Zone "C", (area of minimal flooding), as designated on National Flood Insurance Program Flood Insurance Rate Map, Panel 26 of 45 Community Panel Number 240044/002 prepared by the Federal Emergency Management Agency.

CLSI

Carroll Land Services Incorporated
 Engineers • Surveyors • Land Development Consultants
 Landscape Architects • Environmental Specialists
 439 East Main Street Westminster, MD 21157-5339
 (410) 876-2017 FAX (410) 876-0009

DRAWN BY: JR
DESIGN BY:
REVIEW BY:
DATE: 9-4-98
SCALE: 1"=100'
JOB NO: 98148
SHEET:

9/27/01
AM

**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 Fitting

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 (MD Well Construction Regulations). Submission of a complete form is required prior to Use and Occupancy approval.

Company Name: Willoughby Pumps Telephone #: 410-781-7051
Address: 6203 PATRICK DR
SEKESVILLE, MD. 21874

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer
License # and name of individual responsible for the field installation:

Name (Print): MRS Willoughby License# CA92

*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: Mrs LUND Telephone #: 301-925-3110
Subdivision: RODEROLD Lot # 24 Well Tag #: HO 94-1405
Site Address: 13609 GILBRIDE LAKE
DICKESVILLE MD 21029

Submersible Pump Data
Make: JACOBS Pitless Adapter Make: HARVARD
Model #: _____ Model #: _____
Pump Capacity _____ GPM Depth: 42" (36" min)
Well Yield: 15 GPM NSF approved: _____
Depth of well encountered at time of pump installation: 42 (feet)
If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4
Torque wrenches or Cable guards are required - Must circle one
Safety rope, if used, attached to inside of well casing with eye bolt

Well Cap and Electric Conduit
Two piece watertight cap:
Screened, vented well cap:
Cap secured to casing:
Conduit min 1 1/2" B.G.:
Conduit secured to well cap:

Piping to house
Type: CRISTLINE House Connection
PSI: 1/2" (160 psi min) PVC sleeved to undisturbed soil at wall penetration:
Depth of supply line: (36" min) Approximate length of sleeve: 6'
Sleeve caulked and sealed properly:

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 _____ date _____

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

Date Insp. Requested: 9/27/01 Date Insp. Approved: 2/19/02 K6 SRN

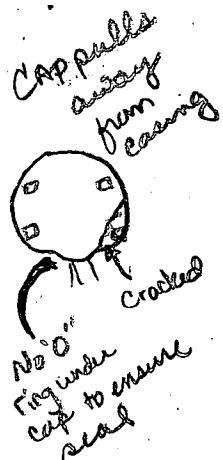
Inspection Data: Pitless adapter and water supply line at least 36" below grade
Two piece cap installed and attached to casing securely
Elec. conduit extends at least 18" below grade/attached to cap properly
Safety rope installed inside of well casing
Correct well tag attached properly and casing 6" above finished grade
Water supply line sleeved adequately at house connection
Adequate gROUT observed below pitless adapter

Well Cap Cracked
 Not tight
 plumber notified
 9/28/01
 SRN

HD-215 (Rev. 8/00)

All Issues 2/19/02 resolved

2/15/02 Cap still cracked & loose
Called plumber K6



C 1 5552 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)

FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE

COUNTY NUMBER A 40524

ST/CO USE ONLY DATE RECEIVED 2/11/98

DATE WELL COMPLETED 2 9 98

Depth of Well 225 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-94-1405

OWNER G & S Gilbride Homes last name first name TOWN Clarksville STREET OR RFD Hedgerow SUBDIVISION SECTION LOT 2

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entries for Sand (0-75) and Gray Mica Rock (75-225).

GROUTING RECORD form with fields for GROUTING MATERIAL (CM, BC), NO. OF BAGS (20), NO. OF POUNDS (1880), GALLONS OF WATER (120), DEPTH OF GROUT SEAL (0-69).

CASING RECORD form with fields for casing types (ST, CO, PL, OT), MAIN CASING TYPE (ST), Nominal diameter (6), Total depth (80).

OTHER CASING (if used) form with fields for diameter and depth.

SCREEN RECORD form with fields for screen type (ST, BR, HO, PL, OT), DIAMETER OF SCREEN (56, 60).

PUMPING TEST form with fields for HOURS PUMPED (3), PUMPING RATE (20), METHOD USED (Bucket), WATER LEVEL (36, 43), TYPE OF PUMP USED (S).

PUMP INSTALLED form with fields for DRILLER WILL INSTALL PUMP (NO), TYPE OF PUMP INSTALLED (S), CAPACITY: GALLONS PER MINUTE (31, 35), PUMP HORSE POWER (37, 41), PUMP COLUMN LENGTH (43, 47), CASING HEIGHT (2).

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED: YES (Y), NO (N)

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

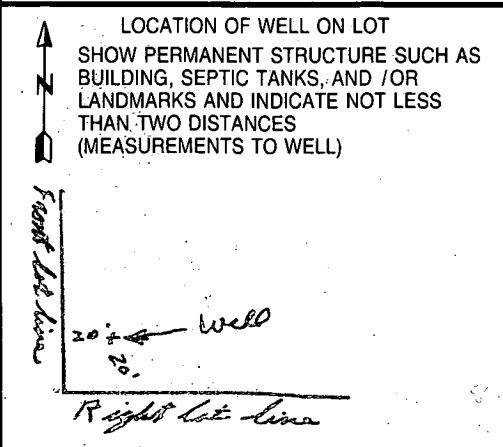
DRILLERS LIC. NO. 1 MS DO 24, DRILLERS SIGNATURE, LIC. NO. 1 MS DO 27

SITE SUPERVISOR (signature) responsible for sitework if different from permittee

DEPTH (nearest ft.) table with columns for depth intervals (1-21, 23-32, 38-47, 51-61) and values (78, 225).

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

MDE 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



B 1	8097	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER HO-94-1405 <small>fill in this form completely</small>
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Date Received (APA) **2-2-98**

OWNER INFORMATION

6+5 Homes

Last Name: **Homes** Owner: **Homes** First Name: **Homes**

2211 Edenbrooke Ct.

Street or RFD: **Eldersburg Md. 21784**

Town: **Eldersburg** State: **MD** Zip: **21784**

LOCATION OF WELL

8 COUNTY: **Howard**

23 SUBDIVISION: **Hedgerow Sub.**

SECTION: **44** LOT: **24**

NEAREST TOWN: **Dayton**

MILES FROM TOWN (enter 0 if in town): **2.2** M. I.

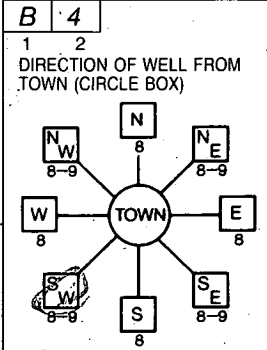
DRILLER INFORMATION

Driller's Name: **Joseph L. Mayne** License No.: **MSD 24**

Firm Name: **Joseph L. Mayne Well Drilling**

Address: **5542 Ridge Rd. W. Ringwood 21771**

Signature: **Joseph L. Mayne** Date: **2/2/98**



11 NEAR WHAT ROAD: **Colliside Lane**

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX):

NORTH
 WEST
 EAST
 SOUTH

DISTANCE FROM ROAD: **20** FT

TAX MAP: _____ BLK: _____ PARCEL: _____

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.): **5**

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY): **500**

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 APPROVAL)

TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER. HEALTH DEPARTMENT APPROVAL

COUNTY NAME: **Howard** COUNTY NO.: **A50010**

STATE SIGNATURE: _____ INSERT S →

DATE ISSUED: **2-2-98** EXP. DATE: **2-2-99**

NORTH GRID: **507000** EAST GRID: **806000**

APPROXIMATE DEPTH OF WELL: **300** FEET

APPROXIMATE DIAMETER OF WELL: **6** INCH

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER:

- well**
-
-

WRITE THE BOX NUMBER FROM THE MAP HERE:

E **806**

N **507**

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

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): _____

Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROP. PERMIT NUMBER: **54** G.A.P. **63**

FORCE: **KM** WRITE INITIALS IN BOX: **HO-94-1405** PERMIT No. **HO-94-1405**

2/2/98
10:39
met driller

SITE INSPECTION SHEET

OWNER: _____

DATE REQUESTED: 2/2/98

ADDRESS: Gilbride Lane

DRILLER: Joseph Mayne

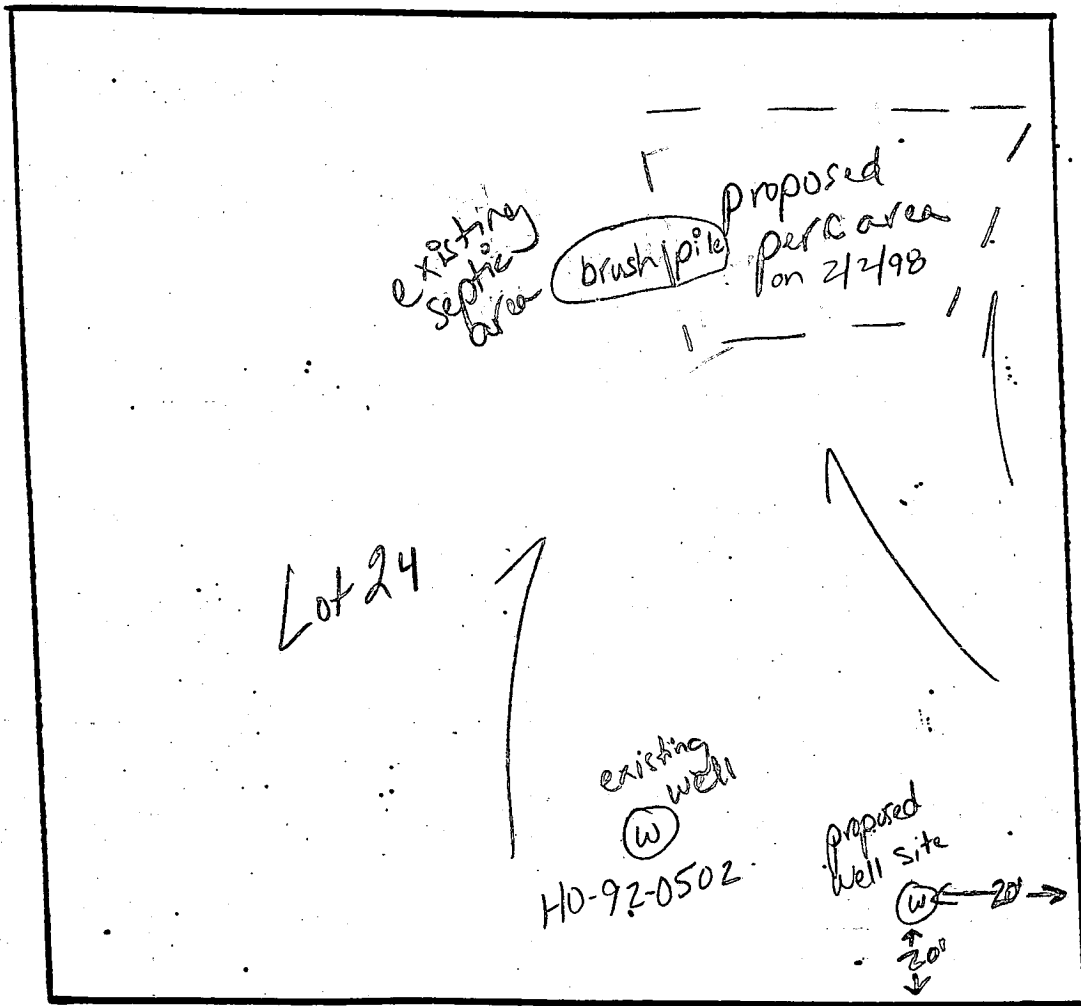
Hedgerow Lot 24

WELL TAG # HO-92-0502 (existing well)

COUNTY # Howard (13)

PROPOSAL: Replacement Well - owner wants to replace well due to low yield of existing well

LOCATION DIAGRAM



COMMENTS: 2/2/98 replacement well site ok as shown (no stake) will remain 20' from each property corner as shown. Discussed possible relocation of existing septic easement. Tony Lee will be contacting office to discuss perm.) existing well will be abandoned and sealed by Joseph Mayne (PM)

DATE: 2/2/98

INSPECTOR: Kimberly M. [Signature]

 WATER WELL ABANDONMENT-SEALING REPORT FORM

SUBMIT COPIES OF COMPLETED FORM TO:

- * COUNTY ENVIRONMENT AGENCY (contact MDE, WMA if address needed)
- * WELL OWNER
- * MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DATE WELL ABANDONED: 2/9/98 (month/day/year)

* PERMIT NUMBER OF ABANDONED WELL (if any) 76 - 92 - 0502

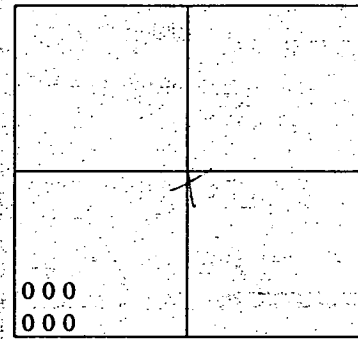
* PERMIT NUMBER OF REPLACEMENT WELL 76 - 94 - 1405

* PERSON ABANDONING WELL: Joseph Wayne

WELL DRILLERS LICENSE NUMBER: 024
 CIRCLE: MWD/MSD/MGD

* OWNER'S NAME: G S Thomas

* WELL LOCATION:
 COUNTY: Howard
 NEAREST TOWN: Dayton
 TAX MAP _____ BLOCK _____ PARCEL _____
 SUBDIVISION: Hedgerow Sub
 SECTION: _____ LOT: 24
 NEAREST ROAD: Calbride Lane



SHOW WELL LOCATION BY X WITHIN BOX

MARYLAND GRID COORDINATES

BOX NUMBER
 E 800
 N 500

* TYPE OF WELL BEING ABANDONED:

- DRILLED JETTED
- BORED/AUGURED HAND DUG
- OTHER (specify) _____

* USE CODE:

- DOMESTIC MUNICIPAL/PUBLIC
- IRRIGATION INDUSTRIAL
- TEST/OBSERVATION

* TYPE OF CASING:

- STEEL PLASTIC
- CONCRETE OTHER (specify) _____

* SIZE OF CASING: 6 5/8 INCHES IN DIAMETER

* DEPTH OF WELL: 400 FEET DEEP

* WAS ANY CASING REMOVED? YES NO
 if yes, length removed, in feet: _____

* WAS CASING RIPPED OR PERFORATED? YES NO

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
<u>Cement</u>	<u>0</u>	<u>60</u>
<u>washed gravel</u>	<u>60</u>	<u>400</u>

SIGNATURE Joseph L. Wayne
 MASTER WELL DRILLER OR SUPERVISING SANITARIAN

024
 LICENSE #

MWD/MSD/MGD
 CIRCLE ONE

2/10/98
 DATE

C1 **0514** 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 **A40524**

ST/CO USE ONLY DATE Received **122203** DATE WELL COMPLETED **122203** Depth of Well **400** (TO NEAREST FOOT)
 PERMIT NO. FROM "PERMIT TO DRILL WELL" **Ho-92-0502**

OWNER **Hastotlan** last name **Douglas** first name
 STREET OR RFD **618 bridge lane** TOWN **Clarksville**
 SUBDIVISION **Hobbs** SECTION **24** LOT **24**

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	
Overburden	0	25	
Mud & Boulders	25	70	
Gray Rock	70	100	X

GROUTING RECORD
 WELL HAS BEEN GROUTED (Circle appropriate box) **Y** (yes) **N** (no)
 TYPE OF GROUTING MATERIAL
 CEMENT **CM** BENTONITE CLAY **BC**
 NO. OF BAGS **15** NO. OF POUNDS **1500**
 GALLONS OF WATER **90**
 DEPTH OF GROUT SEAL (to nearest foot) from **0** ft. to **100** ft.
 (enter 0 if from surface)

CASING RECORD
 casing types insert appropriate code below
ST **CO** **PL** **OT**
 STEEL CONCRETE PLASTIC OTHER
 MAIN CASING TYPE **ST** Nominal diameter top (main) casing (nearest inch) **10** Total depth of main casing (nearest foot) **75**

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

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

C2
 DEPTH (nearest ft.)
 EACH SCREEN **10** **75** **400**

CIRCLE APPROPRIATE LETTER
A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED
E ELECTRIC LOG OBTAINED
P TEST WELL CONVERTED TO PRODUCTION WELL

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS IDENT. NO. **390**
 DRILLERS SIGNATURE **Walter Dismore**
 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

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

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

C3
PUMPING TEST
 HOURS PUMPED (nearest hour) **10**
 PUMPING RATE (gal-per min. to nearest gal.) **11** **15**
 METHOD USED TO MEASURE PUMPING RATE **Submersible**
 WATER LEVEL (distance from land surface) BEFORE PUMPING **109** WHEN PUMPING **310**
 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 (CIRCLE) (YES or NO) YES **N** 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: **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 **-** below
 LAND SURFACE (nearest foot) **50** **51**

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)

NO Map Available

B 1 09292

SEQUENCE NO. (DP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL please print or type

STATE PERMIT NUMBER

MD-92-0502 fill in this form completely

Date Received (APA)

11/29/93

OWNER INFORMATION

Hostetler Douglas 10 Corporate Center Columbia MD 21044

DRILLER INFORMATION

Paul M. Fabiszak G. Edgar Harr Sons Corp. 12047 Falls Rd Cockeysville 21030 11-26-93

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... I INDUSTRIAL... P PUBLIC OR PRIVATE WATER COMPANY... T TEST, OBSERVATION, MONITORING...

APPROXIMATE DEPTH OF WELL 200 FEET

APPROXIMATE DIAMETER OF WELL 6 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)

- 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 27 WRITE INITIALS IN BOX PERMIT No. MD-92-0502

SPECIAL CONDITIONS

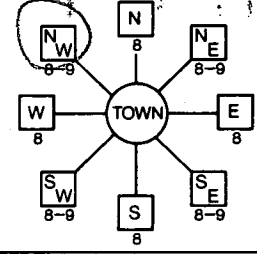
B 3

LOCATION OF WELL

Howard Hedgerow 23 SUBDIVISION SECTION 44 46 LOT 24 48 50 CLARKSVILLE 52 NEAREST TOWN 4 MI 73 76 77 78

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Gilbride Lane NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



34 100 37 DISTANCE FROM ROAD ENTER FT or MI 7 38 39

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard COUNTY NAME A40524 COUNTY NO STATE SIGNATURE DATE ISSUED 120893 CO SIGNATURE EXP. DATE 12-8-94 NORTH GRID 504000 EAST GRID 804000

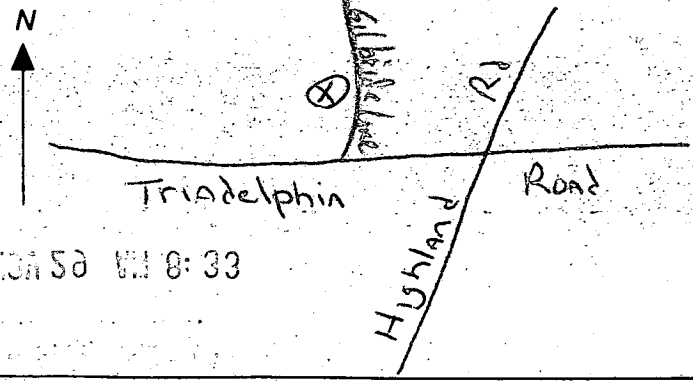
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

- SOURCES OF DRILLING WATER 1. 2. 3.

WRITE THE BOX NUMBER FROM THE MAP HERE

8004 5004

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



PLAT # 8931
 HEORER'S SECTION ONE
 LOTS 1 THRU 28 AND
 PARCELS A & B.

HOSTETTER
 SUBJECT PROPERTY
 LOT # 24

1504,500 N
 1504,500 N
 1504,500 N

1504,500 N
 1504,500 N

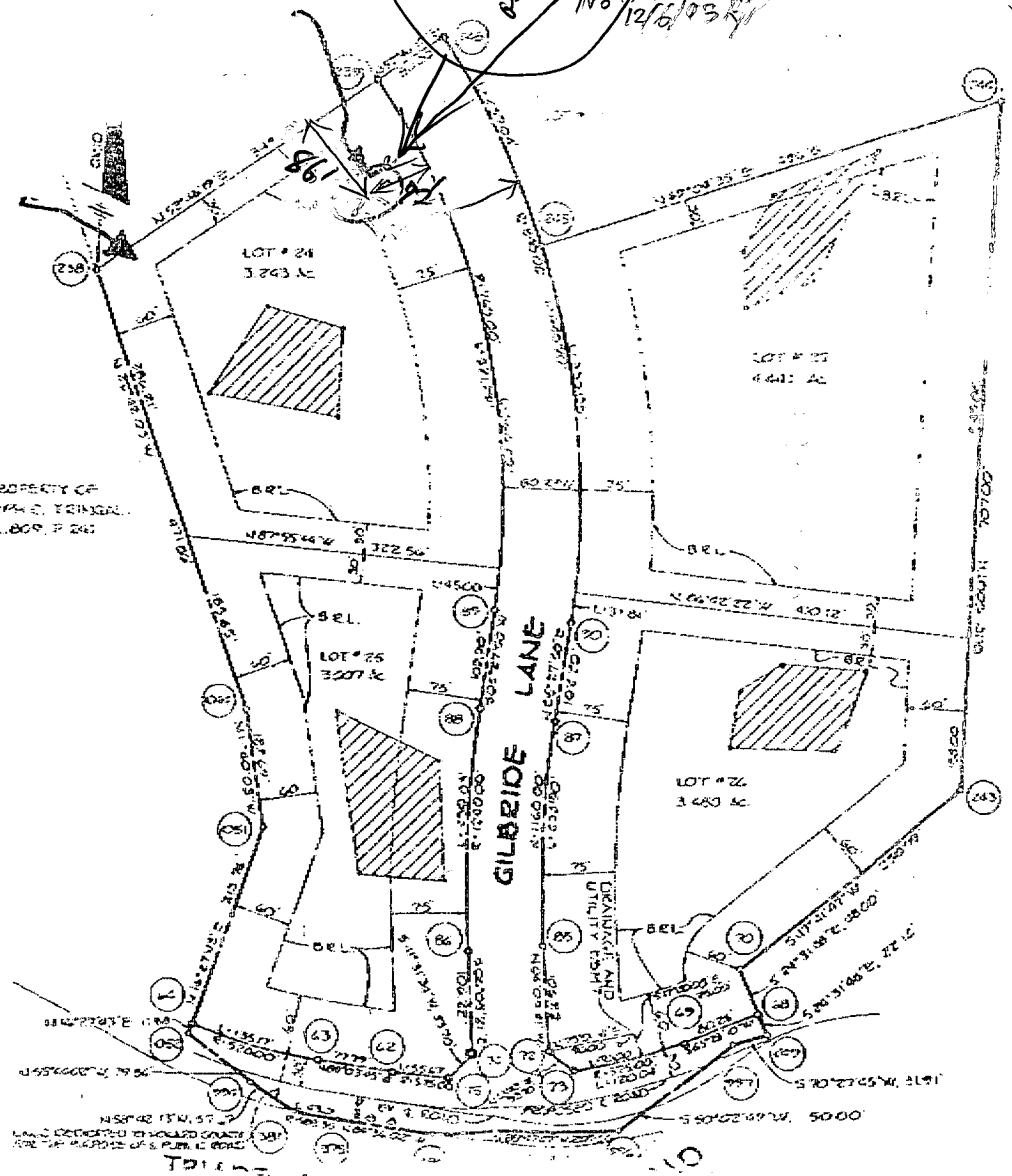
PROPERTY OF
 GEORGE C. HEORER
 1504,500 N

PROPOSED
 WELL
 SITE

Well site OK
 as Stake
 12/8/93 PJP
 No Well Stake
 12/6/93 RJP

Well location change
 of P 20/10 OK PJP 12/10/93

Revised Well Change (noted)
 12/10/93



TOTAL TABLE AREA THIS SHEET
 TOTAL NUMBER OF LOTS TO BE RECORDED

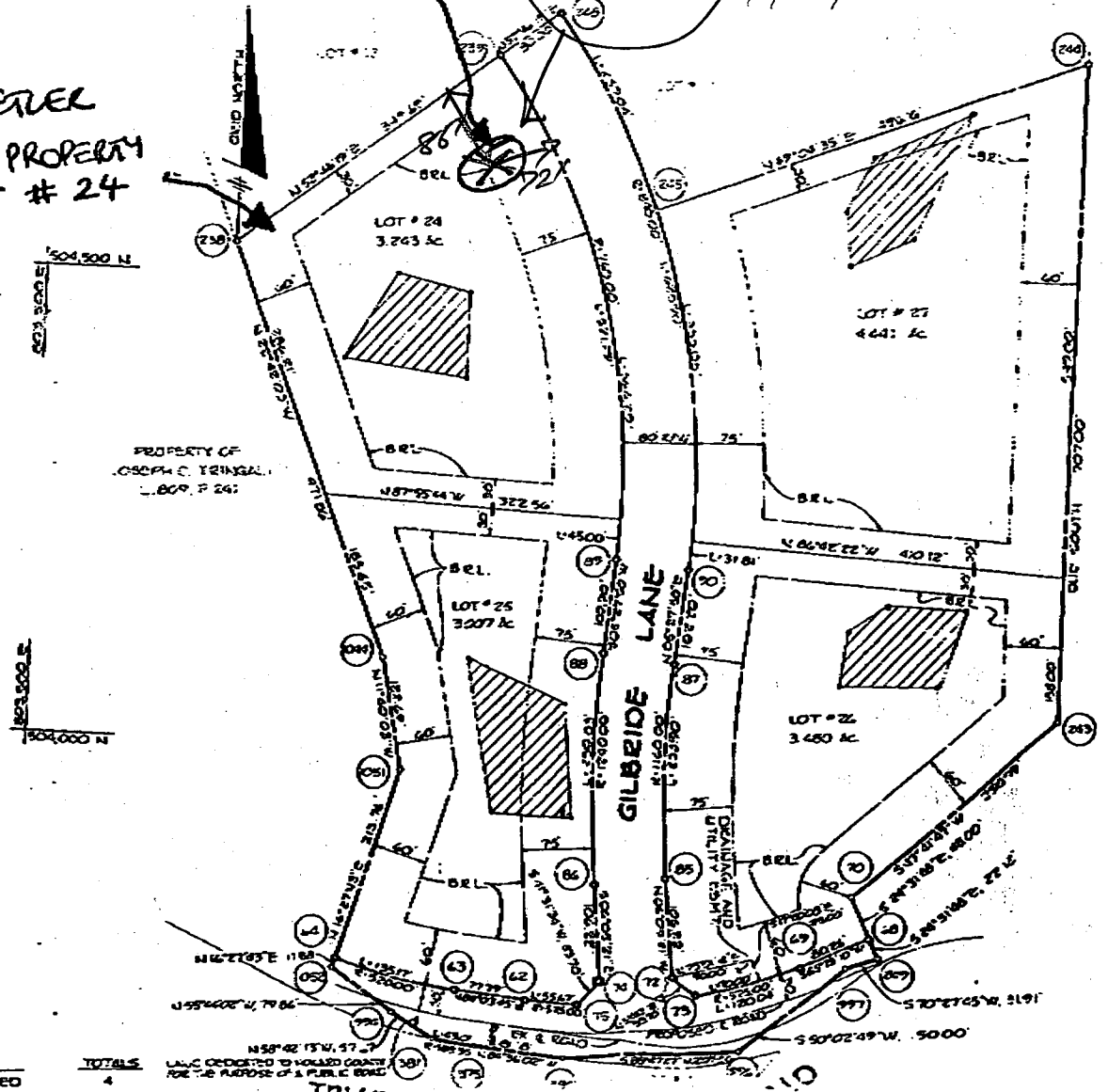
NOTICE
 THIS PLAT IS SUBJECT TO ALL RECORDS
 IN THE OFFICE OF THE PUBLIC CLERK

PLAT # 8931
 HEDGERON SECTION ONE
 LOTS 1 THRU 28 AND
 PARCELS A & B.

HOSTETTER
 SUBJECT PROPERTY
 LOT # 24

PROPOSED
 WELL
 SITE

Well site at
 86 Stadel
 12/8/93 HP
 No well stake
 12/6/93 R/P



TOTAL TABULATION THIS SHEET	4
TOTAL NUMBER OF LOTS TO BE RECORDED	4
TOTAL AREA OF LOTS	10.900

TOTALS
 LOTS DEDICATED TO HOLLAND COUNTY
 FOR THE PURPOSE OF A PUBLIC ROAD

2/23/98
TENTATIVE
10 AM

APPLICATION

PERCOLATION TESTING

PROPOSAL IS TO ADJUST
SOA

A 59806

P _____

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

DISTRICT _____

DATE 2/23/98

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

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

PROPERTY OWNER ~~Mr. and Mrs. N. Douglas Hostetler~~ Anthony & Colleen Lee
11036 Gaither Farm Rd.
ADDRESS Ellicott City, Md 21043 PHONE 410-795-8388

AGENT OR PROSPECTIVE BUYER John B. Slater (Slater Associates)
ADDRESS 5560 Sterrett Place Suite 302, Columbia, Md 21044 PHONE 992-0001

PROPERTY LOCATION:

SUBDIVISION Hedgerow LOT NO. Lot 24

ROAD AND DESCRIPTION Gilbridge Lane (2nd lot on left off Triadelphia Mill Rd)
(13609 Gilbridge Lane)

TAX MAP 28 & 34 PARCEL # 30, 59, 60, 89

SIZE OF LOT 3.243 acra TYPE BLDG. Single family dwelling - 4 Brms
(SINGLE FAMILY DWELLING OR COMMERCIAL)

BLDG PERMIT SIGNED

AND RETURNED 6-26-98

Serial # B10112239

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.

GES HOMES, L.L.C. TONY D. LEE
(SIGNATURE OF APPLICANT)
General Manager/Member 2-4-98

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

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

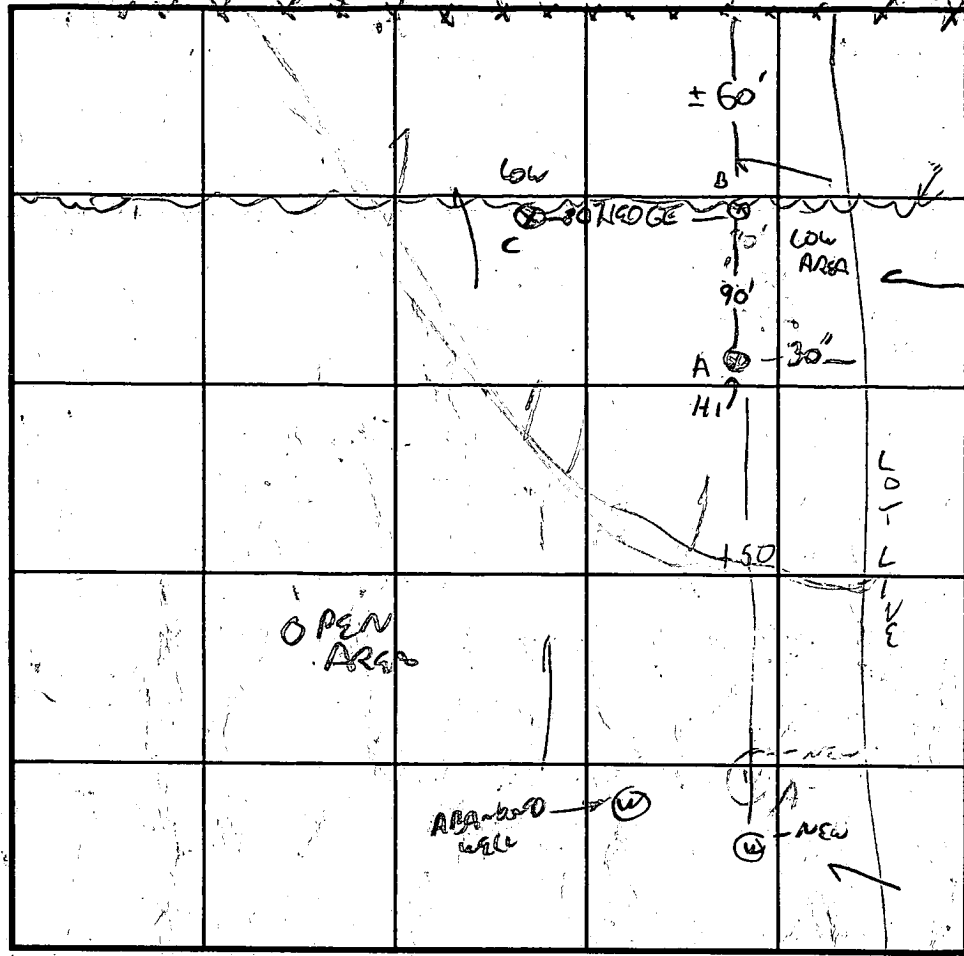
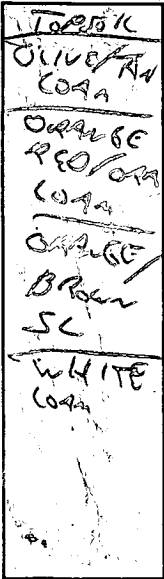
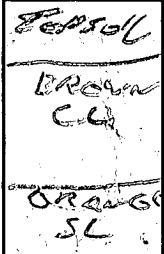
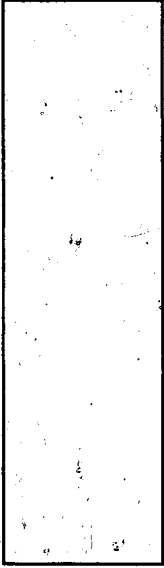
SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

159806

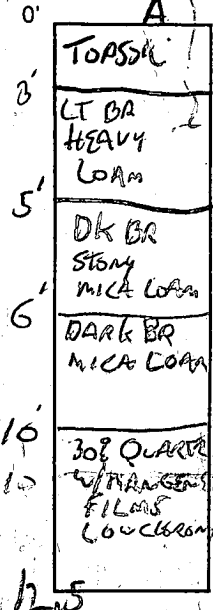
COUNTY #

SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
GILBRIDE Lane

SOIL PROFILE



DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2/2/88	A	5.5 / 12.5	10:49	10:53	→	11:01	8 min
	B	5.5 / 12.0	11:16	11:25		11:50	25 min
	C	5 / 12.5	11:47	slow	REDUCE	HIGH SLOPE	of HOUSE
		7	12:19	12:51	1/2 INCH	slow	
		8	12:53	1:04	→	1:30	25 min

REMARKS: STEADY RAIN, SOIL FELL IN B, TIME ADJUSTED, HORIZONTAL BOUNDARY IN C IS TYPE OF SOIL: IRREGULAR. OPEN TRENCH INSPECTION ADVISABLE. 2 OF 2
 TESTED BY: G. JUNKIE ALSO PRESENT: TONY LEE, GARRARD
 TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____
 INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____

APPLICATION

PERCOLATION TESTING

A 59806

P _____

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

TO RELOCATE
SOA
FOR PREFERRED
HOUSE LOCATION

DISTRICT _____

DATE 2/23/98

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

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

PROPERTY OWNER MR + MRS DOUGLAS HOSTETLER

11036 GAITHER FARM RD

ADDRESS _____ PHONE 410-795-8388

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE 992-0001

PROPERTY LOCATION:

SUBDIVISION HAGEROWN LOT NO. 24

ROAD AND DESCRIPTION _____

TAX MAP 28+34 PARCEL # 30, 59, 60, 89

SIZE OF LOT 3,243 AC TYPE BLDG. SFO
(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. Albert Tony LEE, BUSHOMES LLC.
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

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

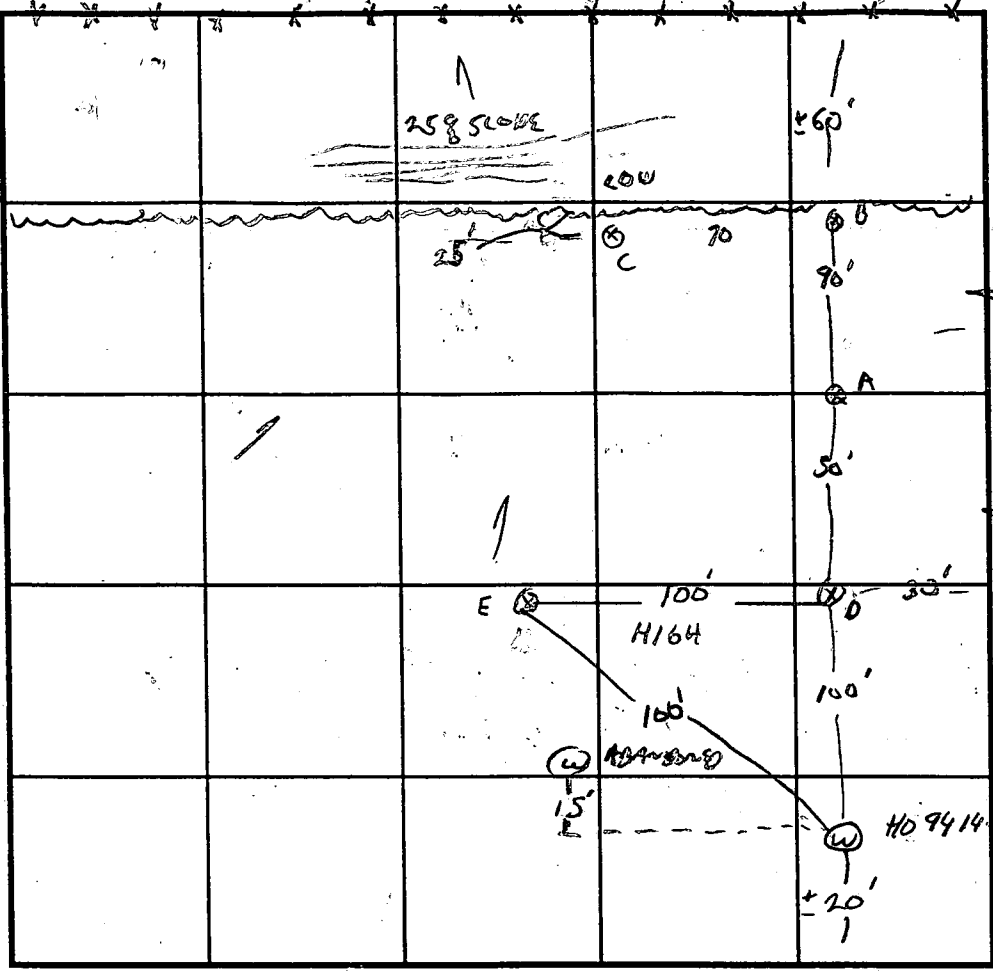
SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

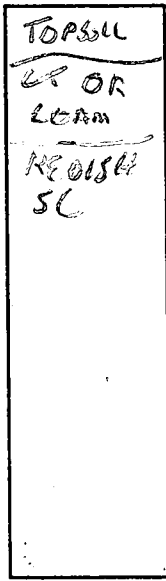
A 59806

COUNTY #

SOIL PROFILE



SOIL PROFILE



HIGH AREA PERC
 AVG IS 7 MW
 LOW AREA PERC
 AVG IS 25 MW

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2/23/98	D	6.5/12	VISUAL	SEE 'A' PROFILE			
	E	12	1.43	1.47	→	1.53	CMW

REMARKS 2 OF 2, USE HIGH PORTION OF AREA TESTED, DEEP CLAY, SLOW REACTS

TYPE OF SOIL LOWER ON LOT,

TESTED BY G. SAURGE

ALSO PRESENT TONY LEE, GARTLAND'S

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 7 MW

TRENCH WIDTH 3

INLET DEPTH 4.5

MAXIMUM BOTTOM DEPTH 6.5

SQ. FT./BEDROOM 180

APPLICATION

PERCOLATION TESTING

A. 40524
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

*11/2/88
perc OK'd
pending approval
plot (B)*

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 WESTMEATH LANE PHONE 498-4334
CLARKSVILLE, MARYLAND 21029

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION TEN OAKS LOT NO. 24 on Prelim

ROAD AND DESCRIPTION WEST OF HIGHLAND ROAD, NORTH OF TRIADELPHIA 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 (HOLDING) for field located holes + subs: plot

THIS IS NOT A PERMIT

A+D
SOIL PROFILE

brown/orange clay (clude) 3 1/2'-4'
 changing to tan silty micaceous loam w/ patches orange silty mica loam

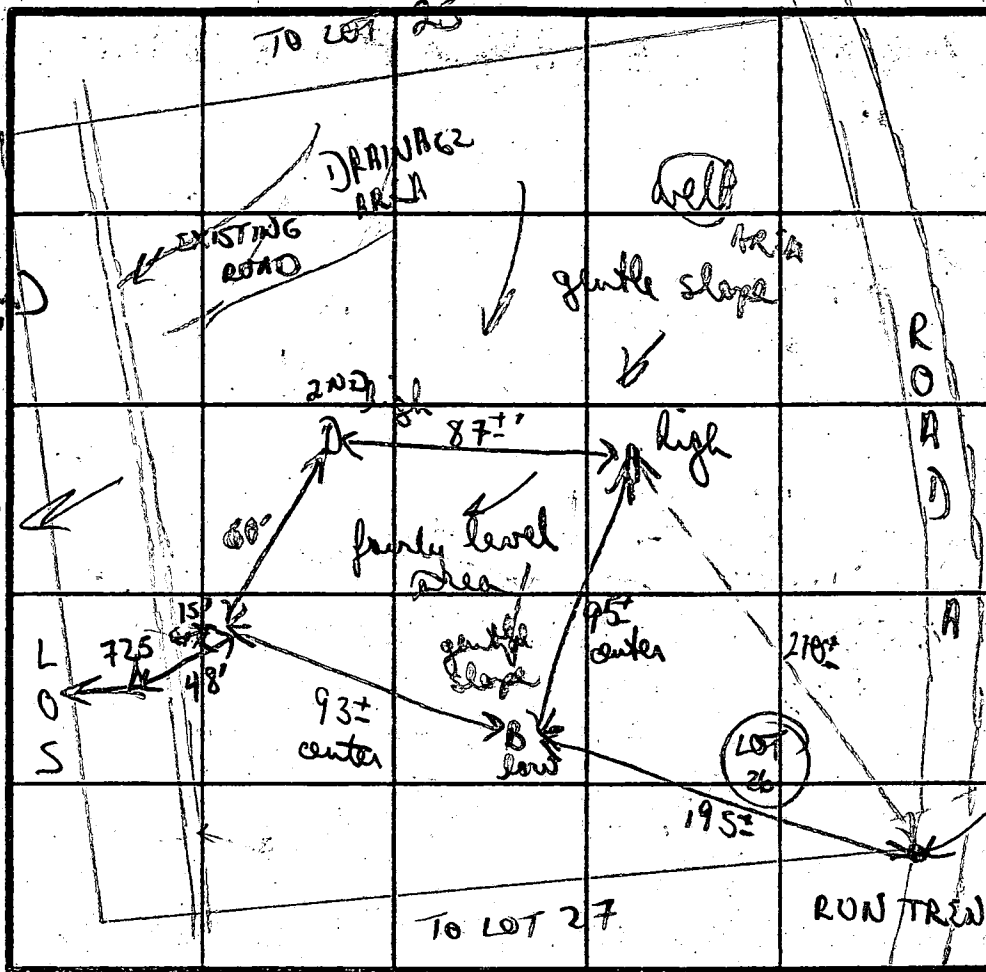
11 1/2' D

C+B

chunky hard orange clay scattered frags 3 1/2'-4'
 to tan silty micaceous loam

w/ 5% smaller frags scattered

12 1/2' D



INLET 4 1/2
 MAX D 8
 194 B/BD
 X = 10 MIN

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1' DROP		TIME	
			START	STOP	START	STOP		
11/2/88	D	3 1/2 S	1030	1033	1033	1037	4 MIN	
		11 1/2 D	bottom (see profile)					
	C	3 1/2 S	1035	1037	1036	1036	RESERVED	
		4 1/2 S	1039	1037	1037	1042	15 MIN	
		8' M	1034	1038	1038	1043	5 MIN	
		12 1/2 D	bottom (see profile)					
	A	3 1/2 S	1039	1038	1038	1040	RESERVED	
		4 1/2 S	1104	1118	1118	1140	22 MIN	
		8' M	1050	1052	1052	1057	5 MIN	
		13' D	bottom (see profile)					
	B	3 1/2 S	1055	1055	1055	1055	RESERVED	
		4 1/2 S	1121	1124	1124	1132	8 MIN	
		13' D	bottom (see profile)					

DO BETTER SLIGHTLY DEEPER

REMARKS

Dug & tested as staked; < 10' can extend around soils similar; do perforam clays 3-4'; silty mica below

TYPE OF SOIL

TESTED BY

B. N. [unclear]

ALSO PRESENT

John S.

Hedge row lot 24

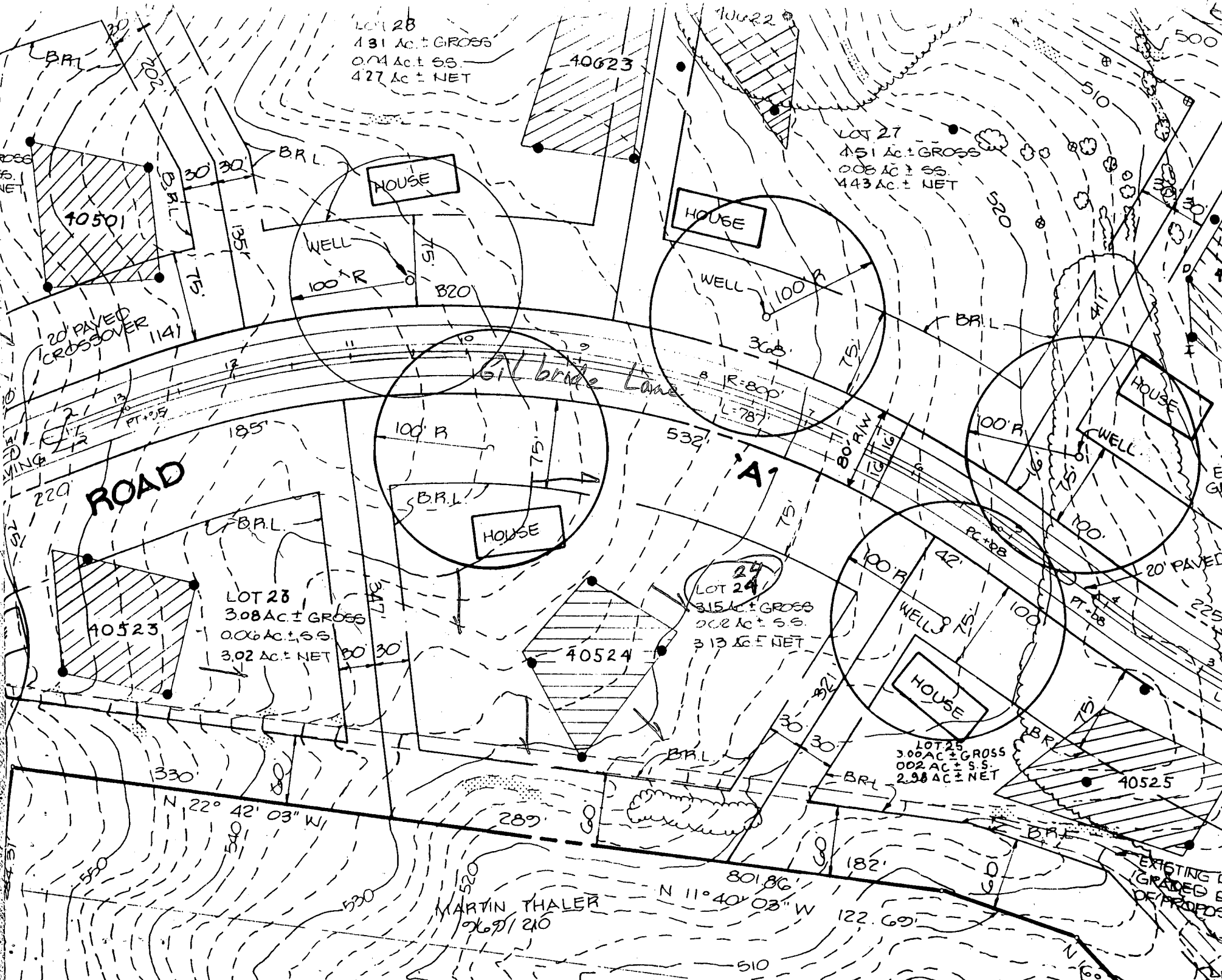
LOT 28
4.31 AC ± GROSS
0.74 AC ± S.S.
4.27 AC ± NET

LOT 27
4.51 AC ± GROSS
0.08 AC ± S.S.
4.43 AC ± NET

LOT 23
3.08 AC ± GROSS
0.06 AC ± S.S.
3.02 AC ± NET

LOT 24
3.15 AC ± GROSS
0.02 AC ± S.S.
3.13 AC ± NET

LOT 25
3.00 AC ± GROSS
0.02 AC ± S.S.
2.98 AC ± NET



ROAD

HOUSE

HOUSE

HOUSE

HOUSE

HOUSE

WELL

WELL

WELL

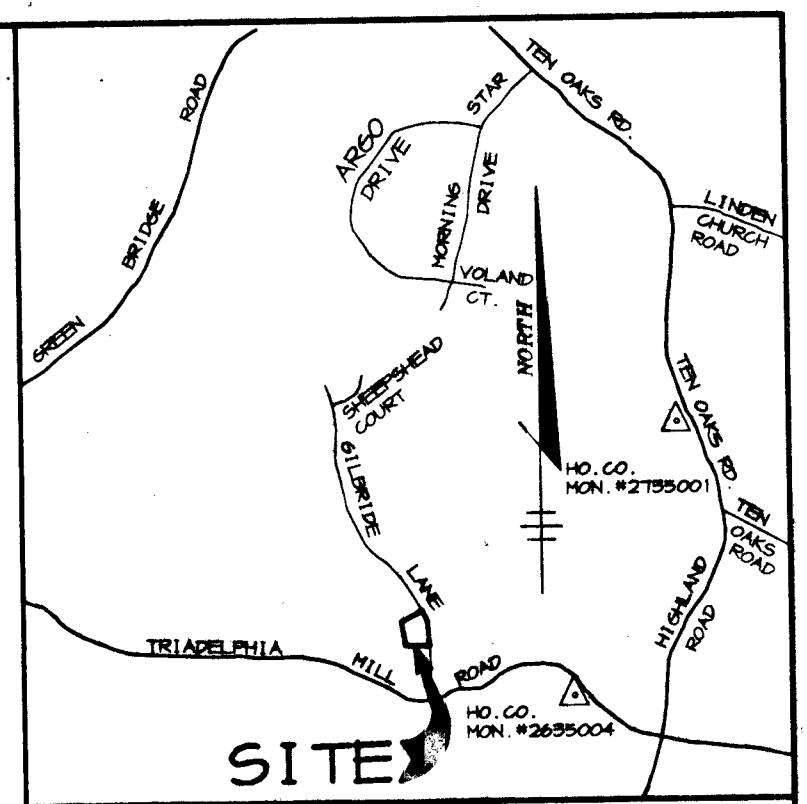
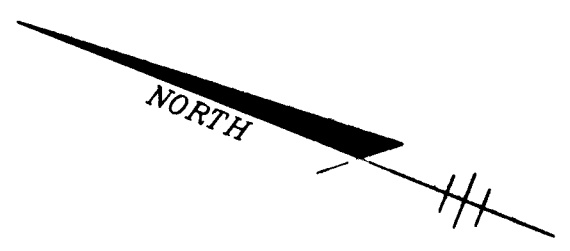
WELL

N 22° 42' 03" W

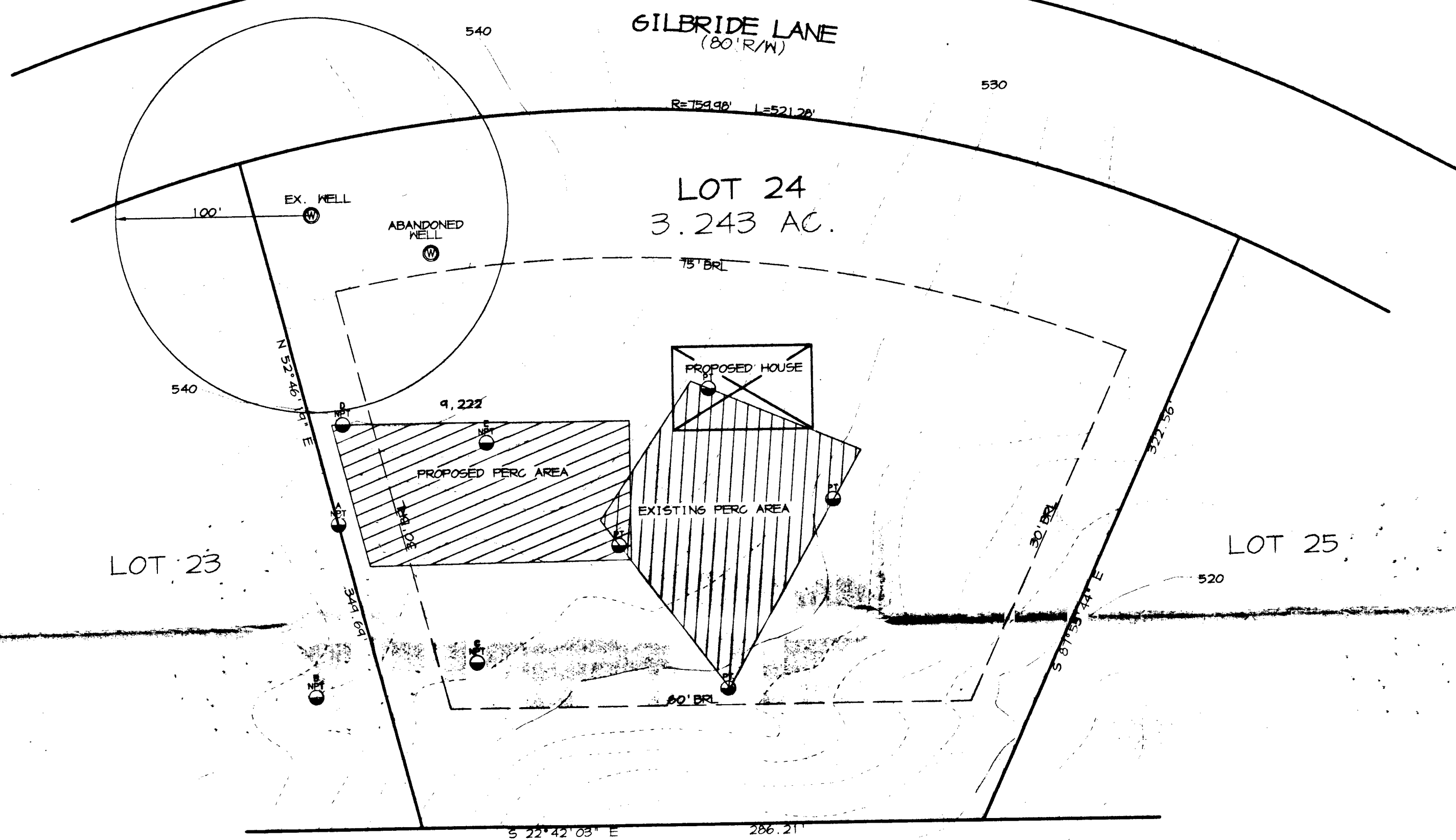
N 11° 40' 03" W

MARTIN THALER
7/6/21 210

EXISTING DRAINAGE
GRADED BY
PROPOSED



SITE VICINITY MAP
SCALE: 1"=2000'



PROPERTY OF
JOSEPH C. TRINGALI
L. 809, F. 241

LEGEND

- PREVIOUS TEST PIT
- NEW TEST PIT

GENERAL NOTES

1. THIS AREA DESIGNATES A MINIMUM 10,000 SQ. FT. PRIVATE SEWAGE DISPOSAL EASEMENT AS REQUIRED BY THE MARYLAND DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWER IS AVAILABLE. THESE EASEMENTS SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENTS INTO THE PRIVATE SEWAGE EASEMENT. RECORDATION OF A MODIFIED SEWAGE EASEMENT PLAT SHALL NOT BE NECESSARY.
2. PERC HOLES SHOWN HEREON HAVE BEEN FIELD LOCATED BY RIEMER MUEGGE & ASSOCIATES, INC. ON OR ABOUT 3-27-98.
3. SUBJECT PROPERTY ZONED R.
4. WELLS AND SEPTIC SYSTEMS WITHIN 100 FEET OF THE PROPERTY BOUNDARY HAVE BEEN SHOWN TO THE BEST OF OUR KNOWLEDGE AND INFORMATION.
5. LOT 24, HEDGEROW SUBDIVISION SHOWN HEREON COMPLIES WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREA AS REQUIRED BY THE MARYLAND DEPARTMENT OF THE ENVIRONMENT.

PURPOSE STATEMENT

THE PURPOSE OF THIS PLAN IS TO RELOCATE A PRIVATE SEWAGE DISPOSAL EASEMENT LOT 24, HEDGEROW, AS SHOWN ON A PLAT OF SUBDIVISION ENTITLED "HEDGEROW, SECTION 1, LOTS 1 THRU 28 AND PARCELS A AND B, RECORDED ON PLAT #8430.

APPROVED: FOR PRIVATE WATER AND PRIVATE SEWAGE SYSTEMS BY THE HOWARD COUNTY HEALTH DEPARTMENT.
Joseph C. Tringali 4-28-98
HOWARD COUNTY HEALTH OFFICER DATE

REVISED PROPOSED PERC AREA 4-20-98	
OWNER / DEVELOPER	MR. TONY LEE 6200 GEORGETOWN BLVD. SUITE C ELDERSBURG, MARYLAND 21784
PROJECT	LOT 24 HEDGEROW SECTION 1
AREA	PLAT No. 8430 TAX MAP NO. 28 5TH ELECTION DISTRICT HOWARD COUNTY, MARYLAND
TITLE	PERC CERTIFICATION PLAN
RIEMER MUEGGE & ASSOCIATES, INC. ENGINEERING • ENVIRONMENTAL SERVICES • PLANNING • SURVEYING 8818 Centre Park Drive, Columbia, Maryland 21045 tel 410.997.8900 fax 410.997.9282	
DATE	4-20-98
DRAWN BY	D.D.K.
PROJECT NO	98091
FILE NAME	PERC
DATE	3-30-98
SCALE	1"=50'
DRAWING NO.	1 OF 1



APPLICATION

PERCOLATION TESTING

A 50010

P _____

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

DISTRICT _____

DATE 5/4/94

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

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

PROPERTY OWNER Mr. and Mrs. N. Douglas Hostetler

11036 Gaither Farm Rd.

ADDRESS Ellicott City, MD 21043 PHONE 730-2806

AGENT OR PROSPECTIVE BUYER John B. Slater (Slater Associates)

ADDRESS 5560 Sterrett Place Suite 302 Col. 21044 PHONE 992-0001

PROPERTY LOCATION:

SUBDIVISION Hedgerow LOT NO. Lot 24

ROAD AND DESCRIPTION Gilbride Lane (2nd lot on left off Tridelphia Mill Rd.)

TAX MAP 28 & 34 PARCEL # 30, 59, 60, 89

SIZE OF LOT 3.243 acres TYPE BLDG. single family dwelling
(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 _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

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

Revere Hedge Row
 1/22/94 A50010
 COUNTY #

SOIL PROFILE

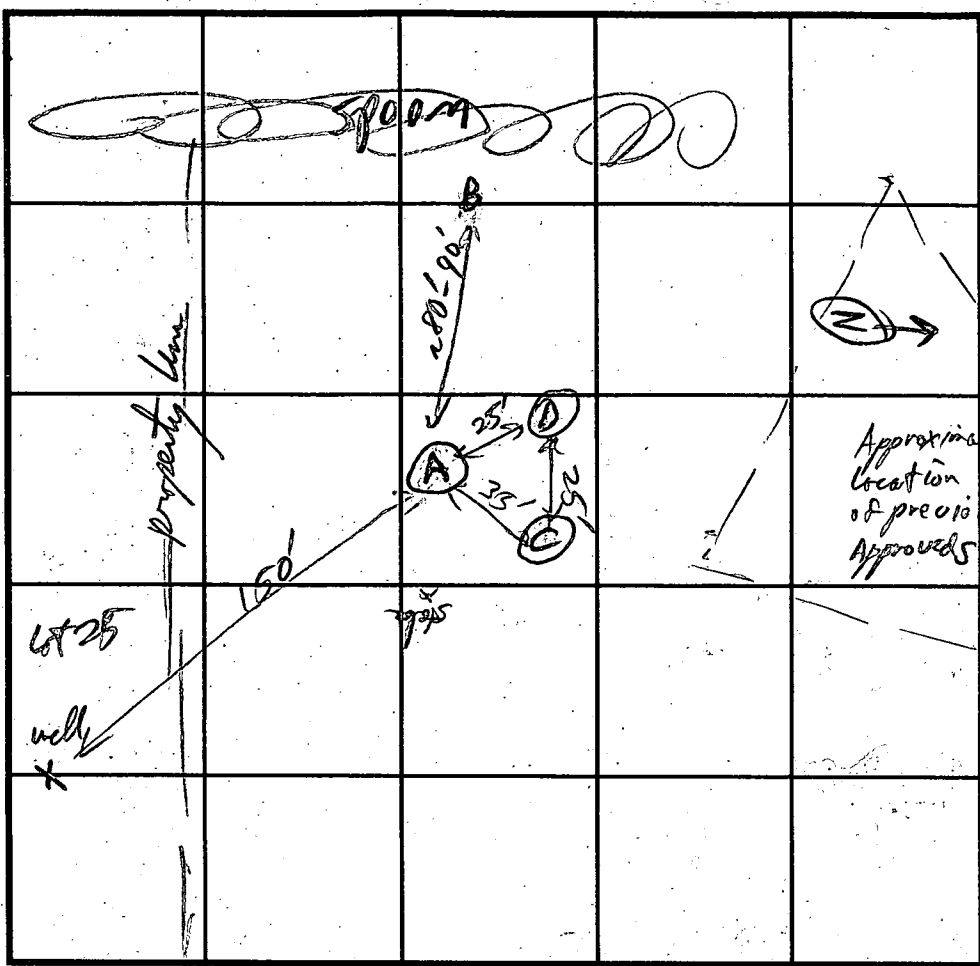
0' A
 Lt. Brn
 Mico. Loam
 Fill
 3' Bleached
 5th Brn original
 3/8" HL (Aust.)
 Rd CL
 6 1/2' Stone (15%)
 Rd - Red Brn
 HL-L (mic)
 9' 7' Never deepened
 when other
 clay holes
 found

B

1' Mid Brn
 Lt. CL-L
 Rd CL
 3 1/4' Transition
 Rd - Red Brn
 HL-L
 (mic) bearing
 5' Red Brn
 Mid Brn
 Mico. Loam

C

Some
 as A



SOIL PROFILE

0'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE. *Gilbridelane*

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
6/21/94	B	4 1/2'	11:20:00	11:23:00	11:23:00	11:28:40	5 1/2 min
		v 9'		N6			
	(A)	v 8' 7'	12:01:50	12:16:54	pulled 12:28 (1/2 more)		Too Slow
			clay to 8'				Fail
	(C)	v 9'	Same as A		clay to 9'		Fail
	(D)	v 7'	Same as A		deeper group @ 7'		Fail

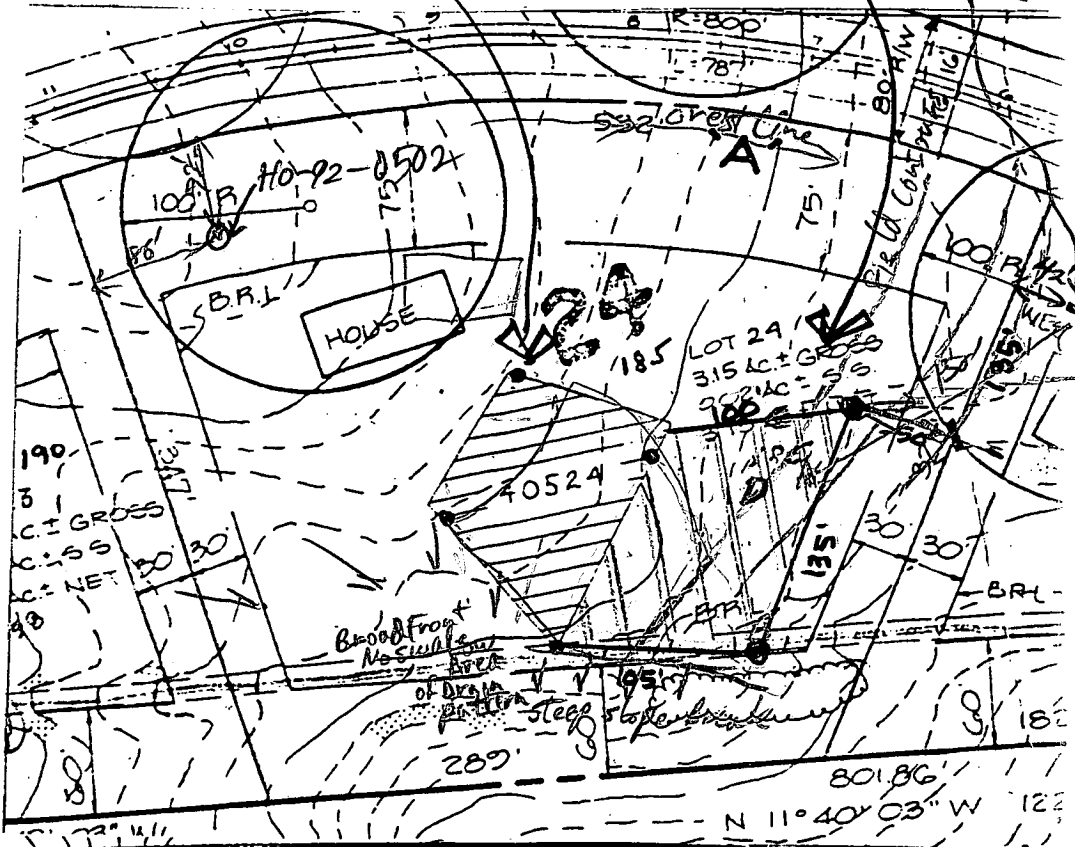
only had 10 deep excavating equipment - unable to dig sufficiently deep test holes

REMARKS Holes A, C, D, deep clay (3' fill cover) - unable to establish New SDA
 TYPE OF SOIL cheater - contractor will confer clients, reschedule if other testing done at this time
 TESTED BY Spillies ALSO PRESENT John Slater, Bob Dunworth
 TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____
 INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____

EXISTING

PROPOSED

LOT 25
Well
40-88-1132



RECORDED AS PLAT NUMBER 8931
 ON 10-24-89 AMONG THE
 LAND RECORDS OF HOWARD COUNTY, MARYLAND.

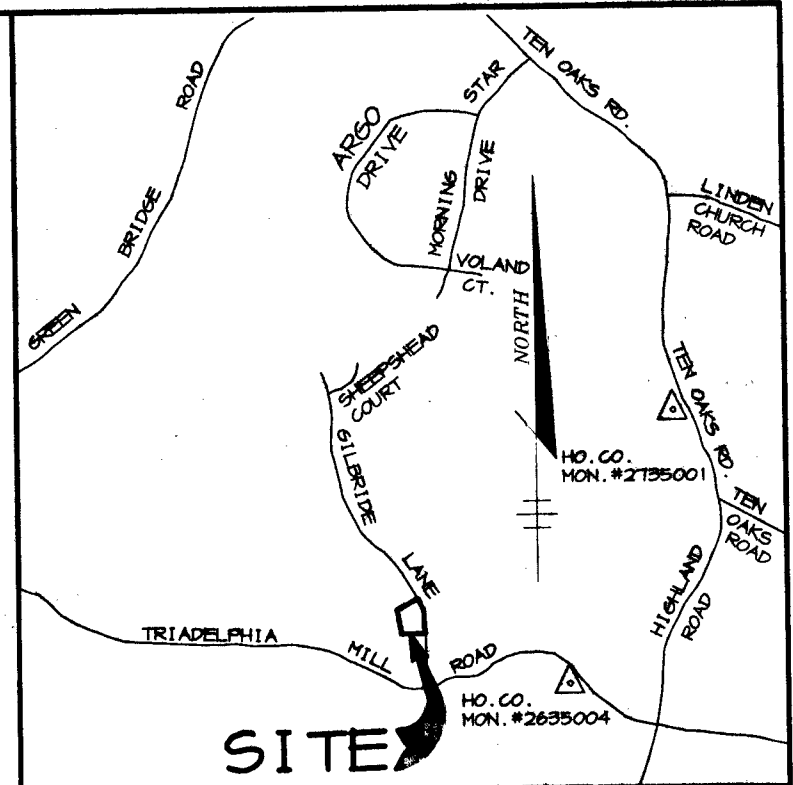
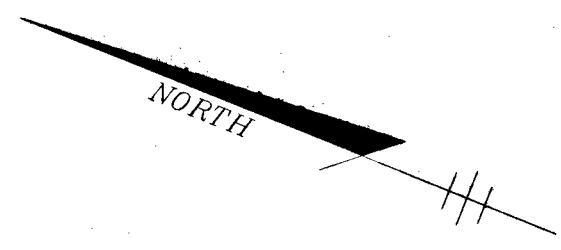
June 21, 1994
 SLATER ASSOC. INC.

HEDGEROW
 SECTION ONE
 LOTS 1 THRU 28 AND PARCELS A AND B

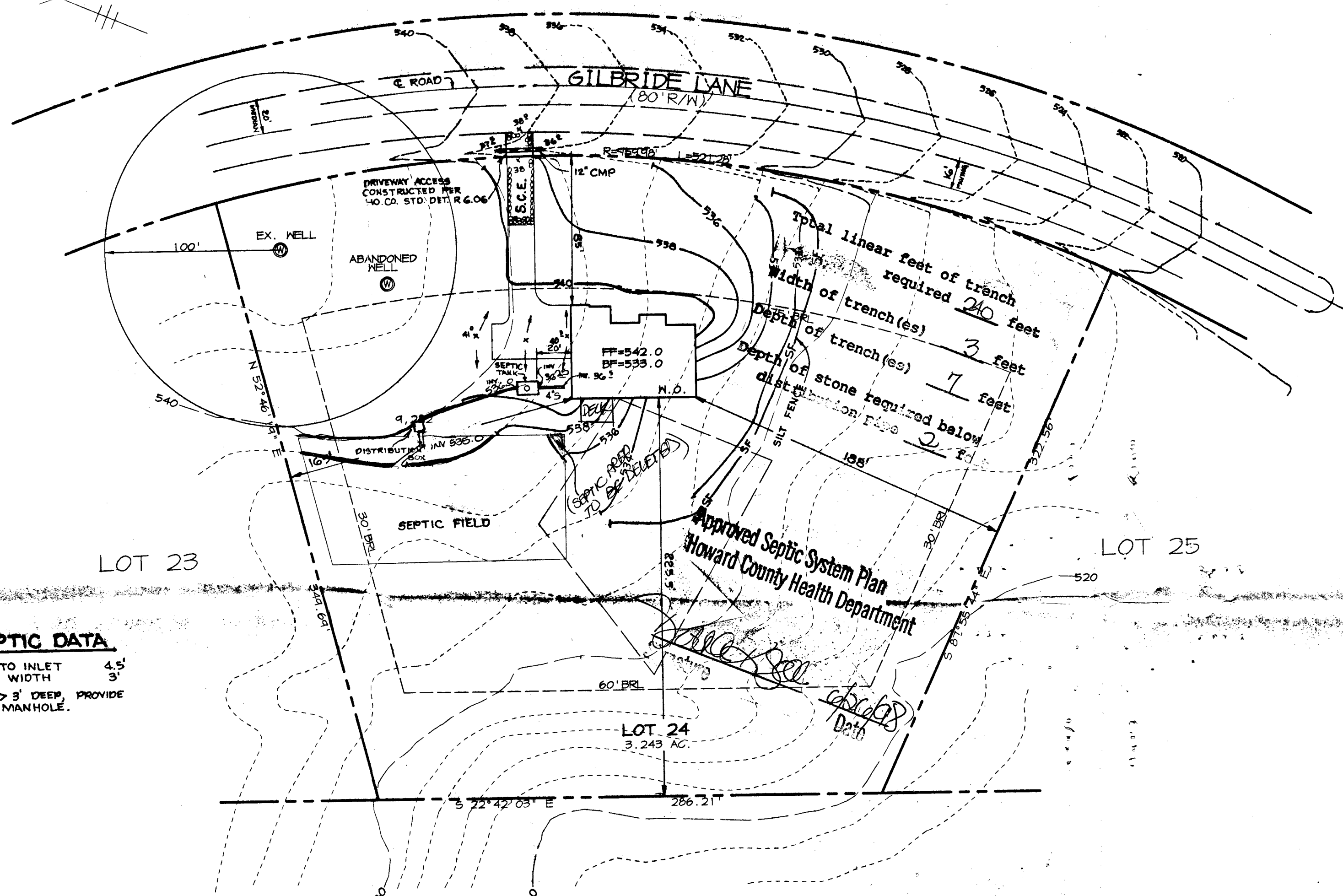
S-88-47 P-88-74 WP-88-89
 TAX MAP NO. 28 & 34, PARCELS 30, 59, 60, 89 EXISTING ZONING - R
 5TH ELECTION DISTRICT, HOWARD COUNTY, MARYLAND
 SCALE: 1" = 100' SHEET 2 OF 6 DATE: 8-29-89

E-89-111

W:\PROJECTS\98031\98031.DWG 50 15 13 1998 RIEMER MUEGGE & ASSOCIATES

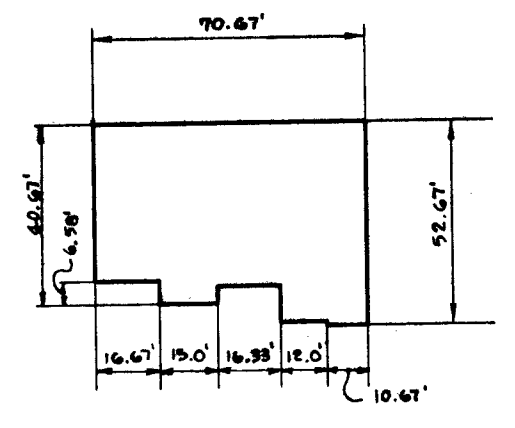


SITE VICINITY MAP
SCALE: 1"=2000'



SEPTIC DATA

DEPTH TO INLET 4.5'
 TRENCH WIDTH 3'
 IF TANK > 3' DEEP, PROVIDE
 ACCESS MANHOLE.



Approved Septic System Plan
 Howard County Health Department

PROPERTY OF
 JOSEPH C. TRINGALI
 L.809, F.241

OWNER / DEVELOPER	
MR. TONY LEE 6200 GEORGETOWN BLVD. SUITE C ELDERSBURG, MARYLAND 21784	
PROJECT	
HEDGEROW LOT 24	
AREA	
PLAT No. 8930 TAX MAP NO. 28 5TH ELECTION DISTRICT HOWARD COUNTY, MARYLAND	
TITLE	
PLOT PLAN	
RIEMER MUEGGE & ASSOCIATES, INC.	
ENGINEERING • ENVIRONMENTAL SERVICES • PLANNING • SURVEYING 8818 Centre Park Drive, Columbia, Maryland 21045 tel 410.997.8900 fax 410.997.9282	
DATE	DRAWN BY : D.D.K./R.J.C.
	PROJECT NO : 98091
	FILE NAME : SHT1
	DATE : MAY 15, 1998
	SCALE : 1"=50'
	DRAWING NO. 1 OF 1

