

1/29/91 JKS

Tax ID - 05-411378

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 46893

A 42238

DISTRICT 5th

DATE 3/7/91

DATE SYSTEM APPROVED 1/29/91

INSPECTOR DB

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED

Jack Fyock IS PERMITTED TO INSTALL ALTER

ADDRESS _____ PHONE 988-9270

SUBDIVISION Adams Reach , Sec. 1 LOT 5 ROAD 5593 Broadwater Lane

PROPERTY OWNER BAC-MP Development Ltd. Partnership Anne Forshey

ADDRESS _____ Kyu Chang Kang

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

TRENCHES - Trench to be 3 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 4.5 feet below original grade. Effective area begins at 3 feet below original grade. 1.5 feet of stone below distribution pipe.

LOCATION - Start the first trench 195 feet from the front (359.34') lot line and 110 feet from the left (330.61') lot line as seen when facing the lot from Broadwater Lane
Run trenches on contour toward the rear left corner.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 11/20/90 RA

PLANS APPROVED BY Sid Abel DATE 6/09/89

COVER NO WORK UNTIL INSPECTED AND APPROVED

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM

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

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

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH

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

PERMIT VOID AFTER TWO YEARS

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

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

11/20/90 RA

APPLICATION

PERCOLATION TESTING

A 42238

P _____

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

DISTRICT 5th

DATE MAY 1988

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 BAC - MP DEVELOPMENT LIMITED PARTNERSHIP

C/O M.P. ASSOCIATES
ADDRESS 3901 NATIONAL DRIVE SUITE 100 PHONE 421-1700
BURTONSVILLE, MARYLAND 20866

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION ADAMS REACH Sec 1 LOT NO. 25 LOT 5 Preliminary

ROAD AND DESCRIPTION LOCATED ON THE NORTH AND SOUTH SIDES OF
MD. ROUTE 32, WEST OF RTE 108, NORTH OF TEN OAKS ROAD
(5593 Broadwater Lane)

TAX MAP 28 PARCEL # 240

SIZE OF LOT ± 3.3 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.

RATKAP
(SIGNATURE OF APPLICANT)

APPROVED BY Srd Ulluf FOR Standard touch DATE 6-9-89

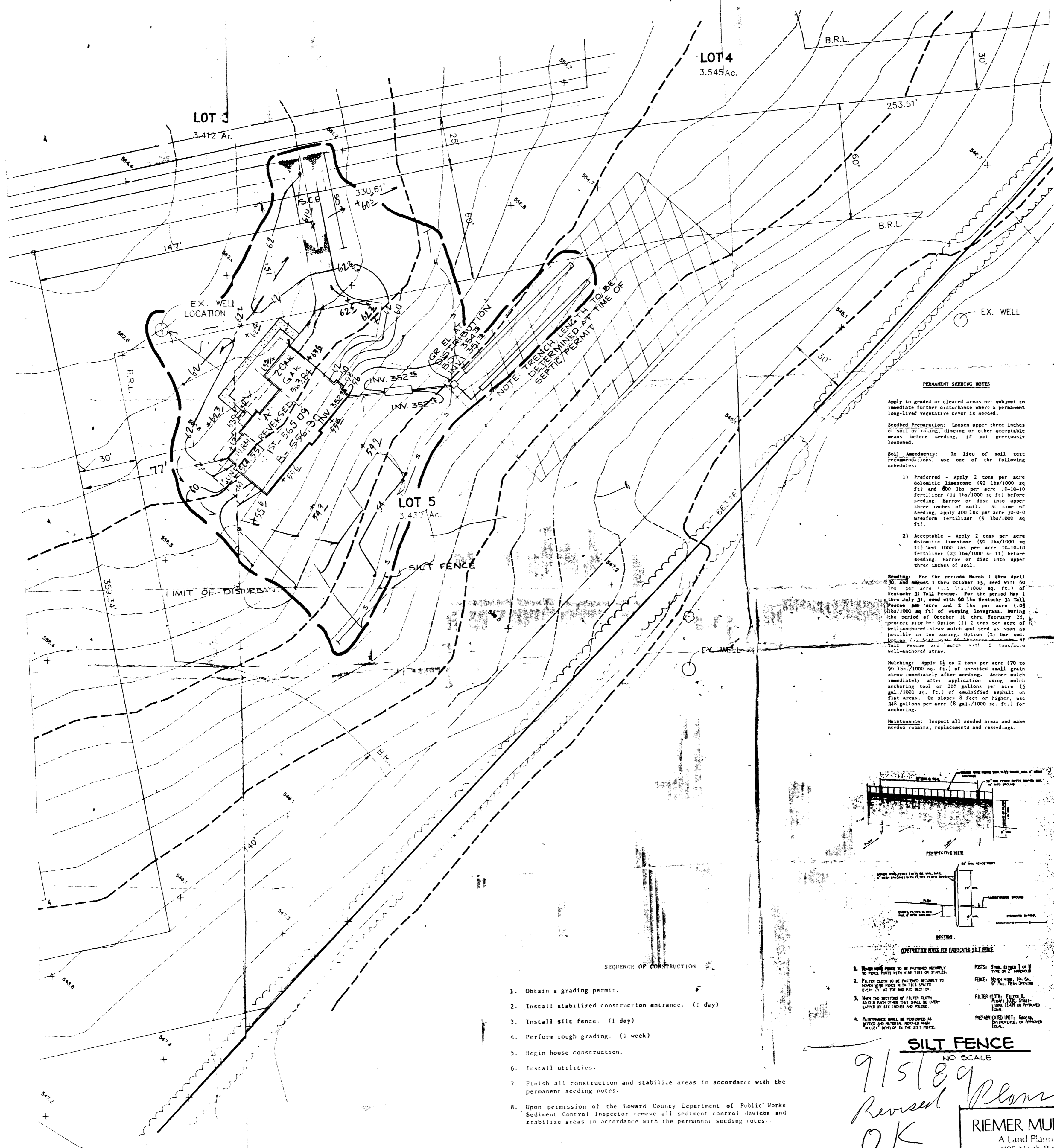
REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 9-13-88 Due Satisfactory - hold for subd. plat. Sab

BUDG. PERMIT SIGNED
AND RETURNED 9/6/89
Serial # 20690
SFD-4 Bedrooms

THIS IS NOT A PERMIT



PERMANENT SEEDING NOTES

Apply to graded or cleared areas not subject to immediate further disturbance where a permanent long-lived vegetative cover is needed.

Seedbed Preparation: Loosen upper three inches of soil by raking, discing or other acceptable means before seeding, if not previously loosened.

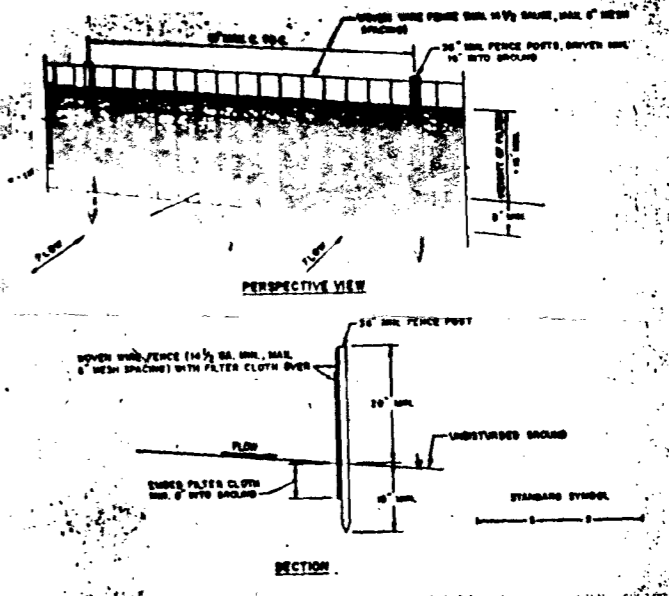
Soil Amendments: In lieu of soil test recommendations, use one of the following schedules:

- 1) Preferred - Apply 2 tons per acre dolomitic limestone (92 lbs/1000 sq ft) and 800 lbs per acre 10-10-10 fertilizer (12 lbs/1000 sq ft) before seeding. Narrow or disc into upper three inches of soil. At time of seeding, apply 400 lbs per acre 30-0-0 ureaform fertilizer (9 lbs/1000 sq ft).
- 2) Acceptable - Apply 2 tons per acre dolomitic limestone (92 lbs/1000 sq ft) and 1000 lbs per acre 10-10-10 fertilizer (20 lbs/1000 sq ft) before seeding. Narrow or disc into upper three inches of soil.

Seeding: For the periods March 1 thru April 30, and August 1 thru October 15, seed with 60 lbs per acre (1.2 lbs/1000 sq. ft.) of Kentucky 31 Tall Fescue. For the period May 1 thru July 31, seed with 60 lbs Kentucky 31 Tall Fescue per acre and 2 lbs per acre (.05 lbs/1000 sq ft) of weeping lovegrass. During the period of October 16 thru February 28, protect site by: Option (1) 2 tons per acre of well-anchored straw mulch and seed as soon as possible in the spring. Option (2) Use sod. Option (3) Seed with 40 lbs per acre of 11 Tall Fescue and mulch with 2 tons/acre well-anchored straw.

Mulching: Apply 1 1/2 to 2 tons per acre (70 to 140 lbs/1000 sq. ft.) of unrotted small grain straw immediately after seeding. Anchor mulch immediately after application using mulch anchoring tool or 218 gallons per acre (5 gal./1000 sq. ft.) of emulsified asphalt on flat areas. On slopes 8 feet or higher, use 345 gallons per acre (8 gal./1000 sq. ft.) for anchoring.

Maintenance: Inspect all seeded areas and make needed repairs, replacements and reseedings.



CONSTRUCTION NOTES FOR FABRICATED SILT FENCE

1. Posts shall be spaced 10' on center.
2. Filter cloth to be fastened securely to posts with wire ties or staples.
3. Mark the sections of filter cloth which shall be overlapped by six inches and folded.
4. Maintenance shall be performed as needed and material removed when needed to develop the silt fence.

POSTS: Steel, 2" dia. or 1 1/2" dia. type of 2" diameter.
 FENCE: Heavy wire, 1/4" dia. galvanized steel.
 FILTER CLOTH: Filter cloth, 100 mesh, 1/2" thick, 100% polypropylene or approved equal.
 PREPARED UNIT: Geotextile, 100% polypropylene, or approved equal.

SILT FENCE
 NO SCALE

9/15/89
Revised Plans
OK
RH

- SEQUENCE OF CONSTRUCTION**
1. Obtain a grading permit.
 2. Install stabilized construction entrance. (1 day)
 3. Install silt fence. (1 day)
 4. Perform rough grading. (1 week)
 5. Begin house construction.
 6. Install utilities.
 7. Finish all construction and stabilize areas in accordance with the permanent seeding notes.
 8. Upon permission of the Howard County Department of Public Works Sediment Control Inspector remove all sediment control devices and stabilize areas in accordance with the permanent seeding notes.

RIEMER MUEC
 A Land Planning,
 3105 North Ridge
 301-461-265

DATE

B 1 9159 SEQUENCE NO. (DP USE ONLY)
2 (THIS NUMBER IS TO BE PUNCHED
3 IN COLS. 3-6 ON ALL CARDS)

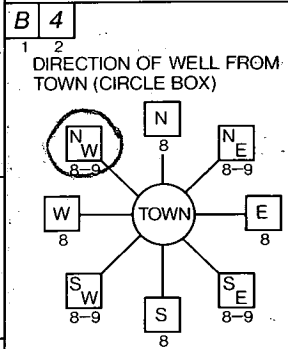
STATE OF MARYLAND
PERMIT TO DRILL WELL
please print or type

STATE PERMIT NUMBER
40-88-0721
70 fill in this form completely 79

Date Received (APA)
C 51889 OWNER INFORMATION
KOREN DEVELOPMENT
ONE CENTRE PARK DR
COLUMBIA MD 21045

B 3 LOCATION OF WELL 12-44287
HOWARD 40.00
ADAMS REACH 5/18/89
CLARKSVILLE
MILES FROM TOWN (enter 0 if in town) 1 MI

DRILLER INFORMATION
George F. Easterday 40
L. Franklin Easterday, Inc.
9265 Brown Church Rd., Mt. Airy, Md. 21771
5/4/89



B 4 BROADWATER LANE
NEAR WHAT ROAD
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
DISTANCE FROM ROAD 450 FT

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

NOT TO BE FILLED IN BY DRILLER - HEALTH DEPARTMENT APPROVAL

USE FOR WATER (CIRCLE APPROPRIATE BOX)
D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

Howard A-42238
COUNTY NAME COUNTY NO.
DATE ISSUED 06/28/89
CO-SIGNATURE Sady Abi
EXP. DATE 12-1-89
NORTH GRID 504000 EAST GRID 081000

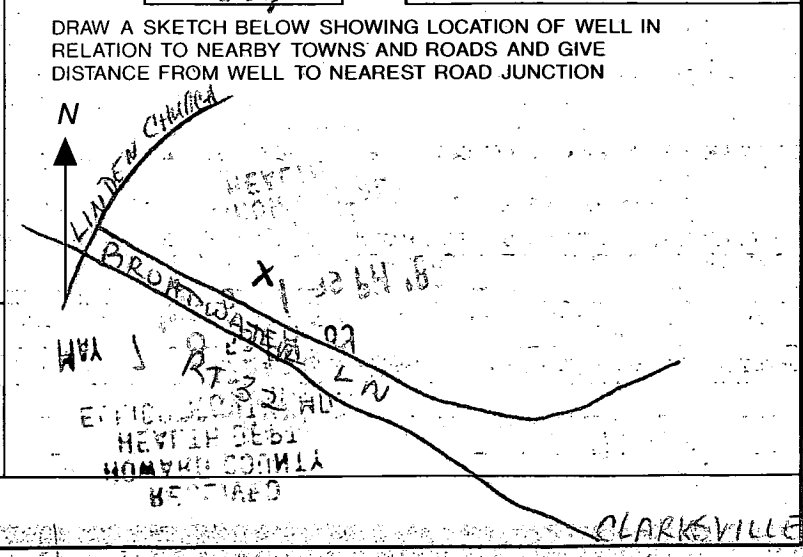
APPROXIMATE DEPTH OF WELL 200 FEET

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
SOURCES OF DRILLING WATER
1. WELL
2.
3.
WRITE THE BOX NUMBER FROM THE MAP HERE
810
5004

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 DEEPEM AN EXISTING WELL



Not to be filled in by driller (OEP USE ONLY)
APPROX. PERMIT NUMBER GAP
FORCE SA PERMIT No. 40-88-0721
SPECIAL CONDITIONS

C1 0045 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 **A 42238**

ST/CO USE ONLY DATE Received: [] [] [] [] [] [] DATE WELL COMPLETED: **070189** Depth of Well: **200** (TO NEAREST FOOT) PERMIT NO. FROM "PERMIT TO DRILL WELL": **40-8K-0721**

OWNER: **RACON Development** last name **Prohaska** first name **lane** TOWN: **Planksville**
 STREET OR RFD: **Adams Ranch** SUBDIVISION: **Adams Ranch** SECTION: **1** LOT: **5 (25)**

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	
Topsoil	0	2	
Clay & shale	2	6	
Soft brown shale	6	67	
Quartz	67	74	✓
Brown mica	74	86	✓
Gravelly shale	86	200	

GROUTING RECORD
 WELL HAS BEEN GROUTED (Circle Appropriate Box) YES **(Y)** NO **(N)**
 TYPE OF GROUTING MATERIAL
 CEMENT **(CM)** BENTONITE CLAY **(BC)**
 NO. OF BAGS **14** NO. OF POUNDS **1400**
 GALLONS OF WATER **70**
 DEPTH OF GROUT SEAL (to nearest foot)
 from **0** ft. to **54** 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): **71**

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

C2
 DEPTH (nearest ft.)
 EACH SCREEN: **HO** **69** **200**
 SLOT SIZE 1: [] 2: [] 3: []
 DIAMETER OF SCREEN (NEAREST INCH) [] [] []
 from [] to []

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

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 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: *[Signature]*
 (MUST MATCH SIGNATURE ON APPLICATION)

SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee): *[Signature]*

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.) 70 72 W Q 74 75 76
 TELESCOPE CASING LOG INDICATOR OTHER DATA

C3
PUMPING TEST
 HOURS PUMPED (nearest hour) **3**
 PUMPING RATE (gal. per min. to nearest gal.) **10**
 METHOD USED TO MEASURE PUMPING RATE **Bucket**
 WATER LEVEL (distance from land surface) BEFORE PUMPING **35** WHEN PUMPING **101**
 TYPE OF PUMP USED (for test) **(S)** submersible

PUMP INSTALLED
 DRILLER WILL INSTALL PUMP YES **(NO)**
 IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE
 TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE:
 CAPACITY: GALLONS PER MINUTE (to nearest gallon) [] [] [] []
 PUMP HORSE POWER [] [] [] []
 PUMP COLUMN LENGTH (nearest ft.) [] [] [] []
 CASING HEIGHT (circle appropriate box and enter casing height) **(+)** above } LAND SURFACE **(-)** below } **2** (nearest foot)

