

4/26/94
c/o 10:00
4/27/94 NOON

Tax ID - 04-350901

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 49903C

A 42455

DISTRICT 4th

DATE 3/1/94

DATE SYSTEM APPROVED 4/27/94

INSPECTOR M. Ritkin

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH
~~461-9933~~ 313-2640

INDEXED

* Time Expired for
FCOP Compliance *

Paul Schissler/South Carroll Backhoe, Inc. IS PERMITTED TO INSTALL ALTER

ADDRESS 4410 Salem Bottom Road, Westminster, Maryland PHONE 875-4197

SUBDIVISION Cattail Creek Country Club LOT 2 ROAD 3608 Broadleaf Court

PROPERTY OWNER Altieri Homes Ray Bowen

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

INSTALLER:

NUMBER OF BEDROOMS 4

Specifications subject to adjustment,
observation test hole required prior
to beginning any installation.

240 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 320

TRENCHES - Trench to be 3 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 6 feet below original grade. Effective area begins at 4 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Place the distribution box 180 feet from the front lot line and 100 feet from the right lot line. Run trenches along contour in both directions.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 3/1/94 DKS

REPLACEMENT WELL TAG ORDERED 4-94 ACCORDING TO DENISE SEARTELOUGH @ HOE,

AND BY CRAIG CARLSON OF COVENANT HOMES - ON 9-23-96 TAG RECEIVED 9/24/96 JG

PLANS APPROVED BY C. Williams DATE 2/23/94

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

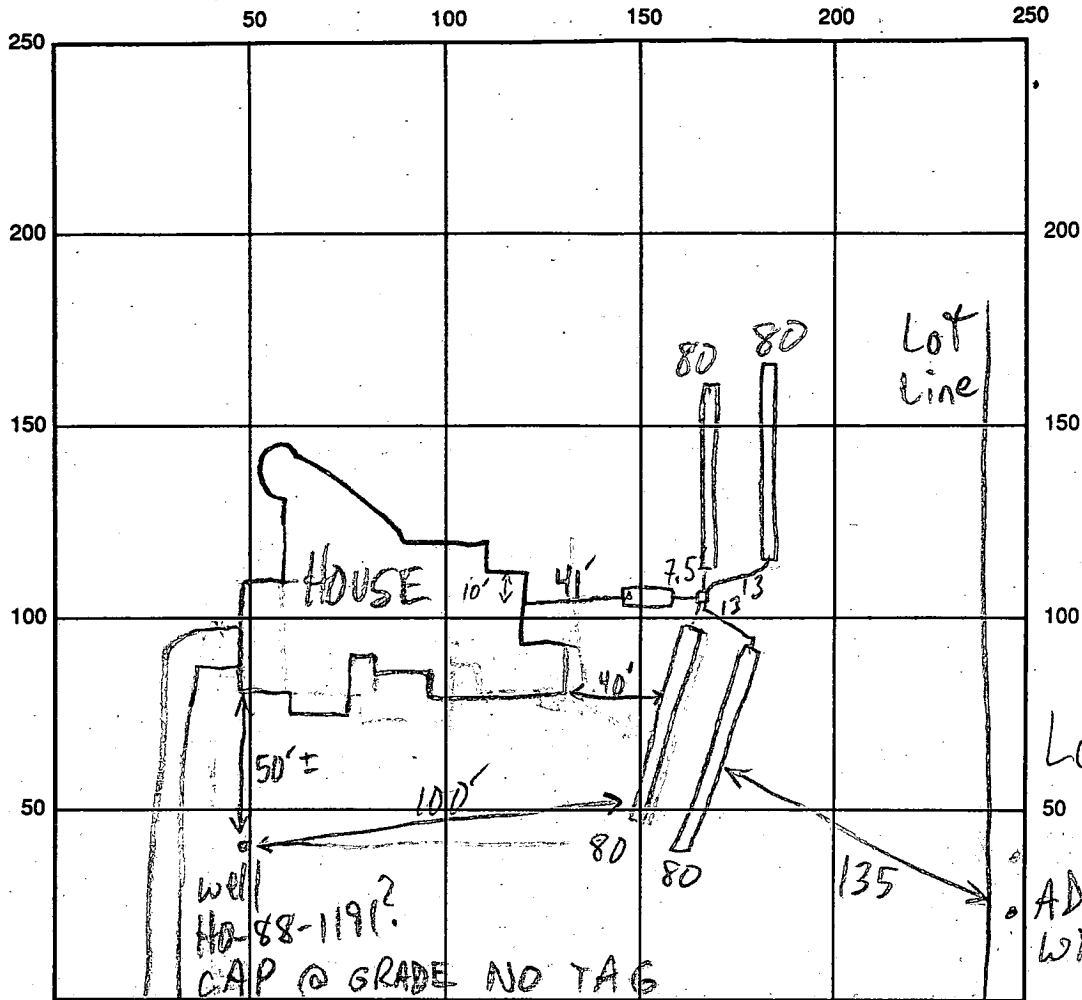
PERMIT VOID AFTER TWO YEARS

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**

A
42455



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 15.00 GAL - OK CLEANOUTS S.T. - OK
 DISTRIBUTION BOX LEVEL OK - BAFFLE IN
 DRAIN FIELD/TITLE DEPTH 6 FT. TRENCH WIDTH 3 FT. INLET DEPTH 4 FT.
 EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 4 @ 80 FT.
 NUMBER OF TRENCHES 4 ONE SIDEWALL/BOTTOM AREA 4 @ 240 SQ. FT.
 DRYWALL INSIDE DIAMETER 2 FT. EFFECTIVE DEPTH BELOW INLET — FT.
 ABSORBENT AREA 960 SQ. FT.

REMARKS: 4/26/94 GRADE @ SEWAGE AREA APPEARS OK; GRADE @ S.T. HOLE CONFIRMS OK; OK TO CONTINUE MR
4/27/94 OK TO COVER MR

4/27/94 WELL LINE OK TO COVER, CASING EXTENDED MR
4/27/94 T/C TO BLDR RE: CASING; T/C TO MPE RE: REPL. TAG MR
 DATE SYSTEM APPROVED 4/27/94 INSPECTOR M. Rifkin

APPLICATION

PERCOLATION TESTING

A 42455

P _____

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

DISTRICT 4

DATE 12/9/88

THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Altieri Homes, Inc
Egwood Farm Inc c/o Land Design + Development

ADDRESS 8307 Main St PHONE 461-4600

PROSPECTIVE BUYER N/A

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Clark Systemou Valley LOT NO. New 2 final

ROAD AND DESCRIPTION Roxbury + Dorsey Mill (3608 Broadleaf Court)

TAX MAP 21 PARCEL # 6

SIZE OF LOT 3.25 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.

Mal Ken
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

BLDG. PERMIT SIGNED
AND RETURNED 12/29/88
Serial # 52097
SFD-4Bmm

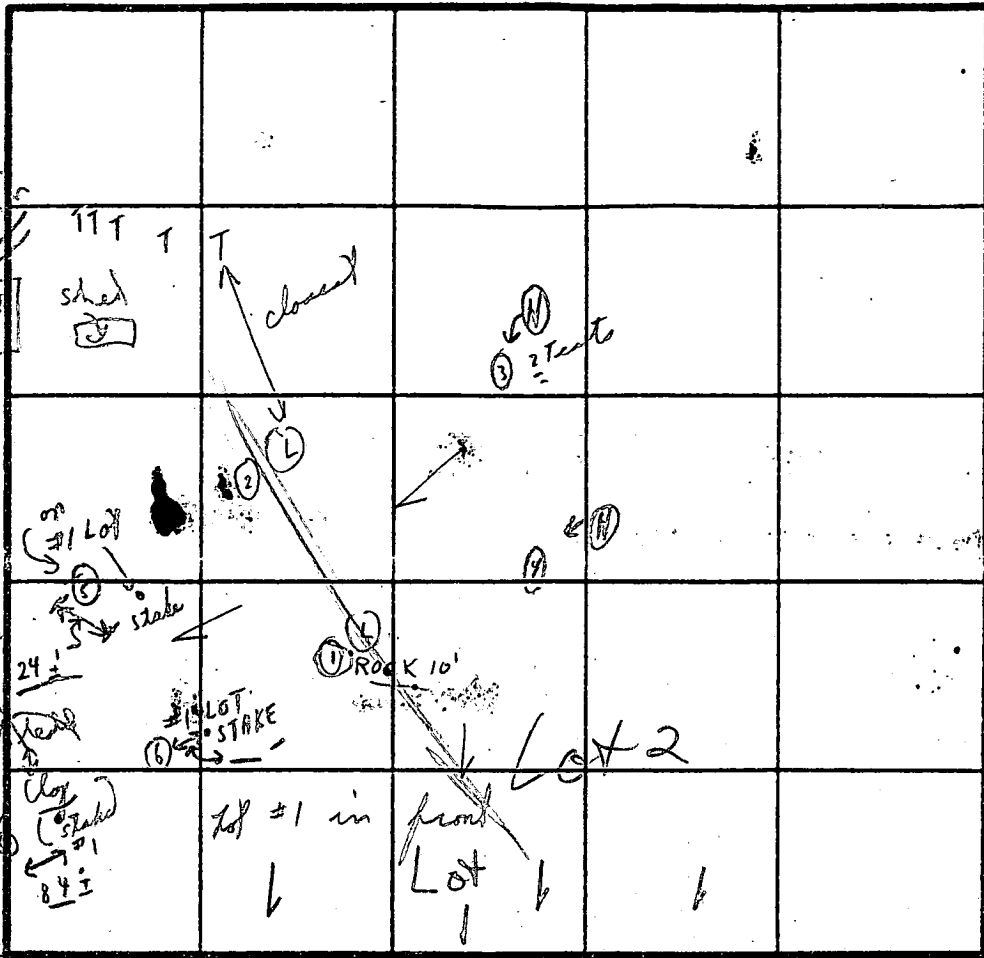
HD-216

THIS IS NOT A PERMIT

A 42455

#1 + #2

SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

GLENWOOD ←

R.T. 97 →

13 min
Inlet 4'

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
1/4/89	(L1)	4' d	10:04	10:08	10:08	10:15	7 min
		10'	: Rock :		:	:	
	(L2)	4' d	10:09	10:16	10:16	10:29	13 min
		11 1/2'	:	:	: Loam :	:	
	(N3)	4'	10:11	10:14	10:16	10:20	6 min
		7'	10:10	10:16	10:16	10:20	6 min
	(N4)	12'	← Loam below clay →				
	(N5)	4 1/2' d	2:46	2:48	2:48	2:51	3 min
		11 1/2'			LOAM	Dry to 13'-8"	
	(N6)	6 1/2'	2:55	2:58	2:58	3:03	5 min

{ Dry to }
13'

Dry to
12'

clay
Loam to rock
clay
Loam

clay
Loam

1'-6 1/2 clay

11'-8" Note blowing snow → LOAM

REMARKS

Treats in mass; - Tests per stake

TYPE OF SOIL

TESTED BY

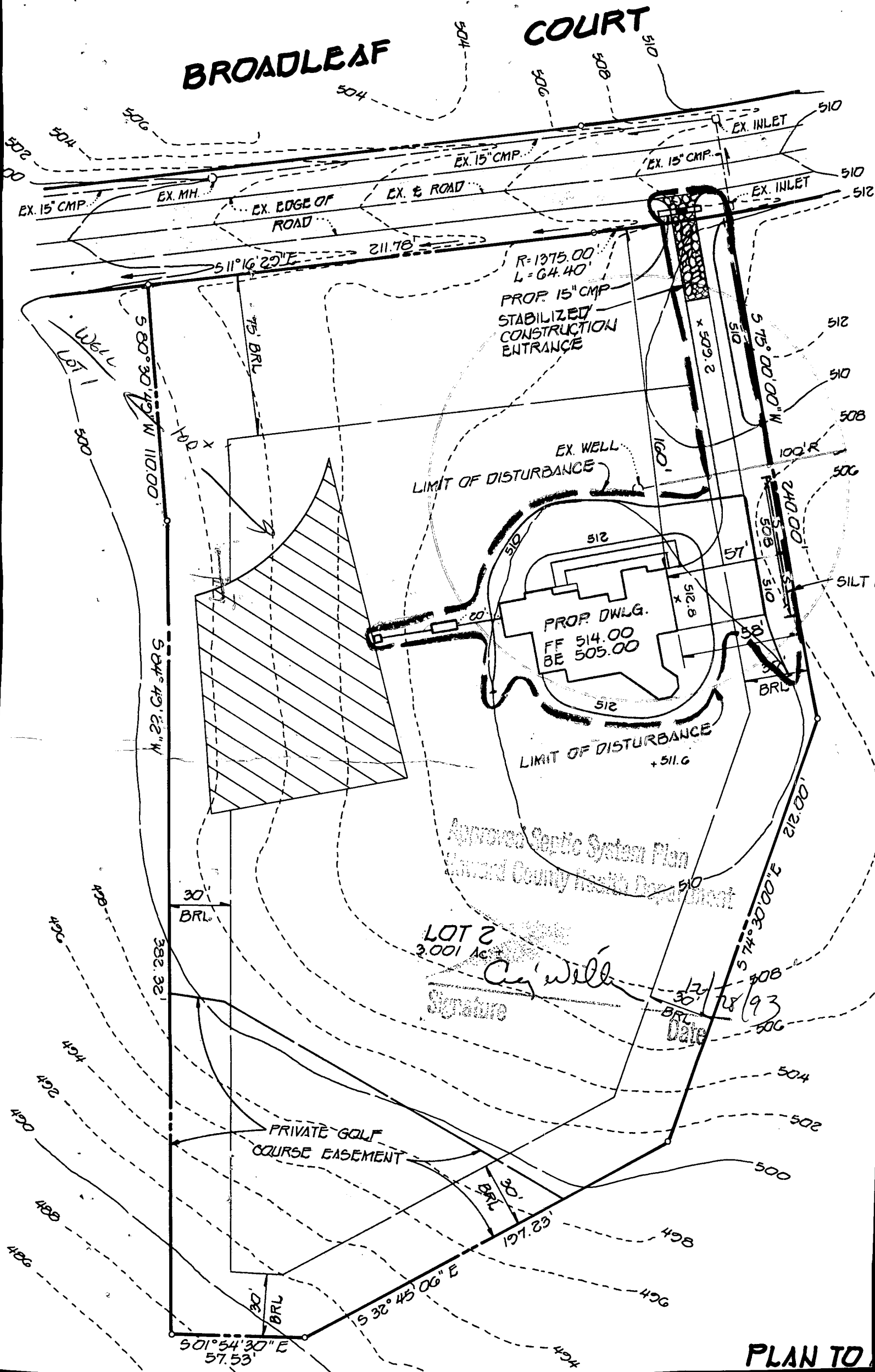
C. B. D.

ALSO PRESENT

{ Ketterman
& son

BROADLEAF

COURT



LOT 2
2.001 AC

C. J. Will
Signature

12/28/93
Date

Approved Septic System Plan
Howard County Health Department

PLAN TO

C1 1163

SEQUENCE NO. (DENV USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

(THIS NUMBER IS TO BE PUNCHED IN COLS 3-6 ON ALL CARDS)

COUNTY NUMBER A#42455

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

8 13

15 20 020790

22 26 165 (TO NEAREST FOOT)

28 37 HO-88-1191

OWNER SYCAMORE VALLEY PARTNER CHIP last name BROADLEAF COURT first name TOWN GLENELG SUBDIVISION SYCAMORE VALLEY SECTION 1 LOT 2

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 FROM TO Check if water bearing

Table with columns: DESCRIPTION, FEET FROM, FEET TO, Check if water bearing. Rows include Top Soil, Shale, Sandstone, Mika, Sandstone, Mika, Sandstone, Mika.

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 10 NO. OF POUNDS 1000

GALLONS OF WATER 60 DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 37 ft. (enter 0 if from surface)

CASING RECORD

ST CO PL OT STEEL CONCRETE PLASTIC OTHER

MAIN CASING TYPE Nominal diameter top (main) casing Total depth of main casing

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

SCREEN RECORD

ST BR HO PL OT STEEL BRASS OPEN HOLE PLASTIC OTHER

DEPTH (nearest ft.) HD 43 123

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 31

WHEN PUMPING 39

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

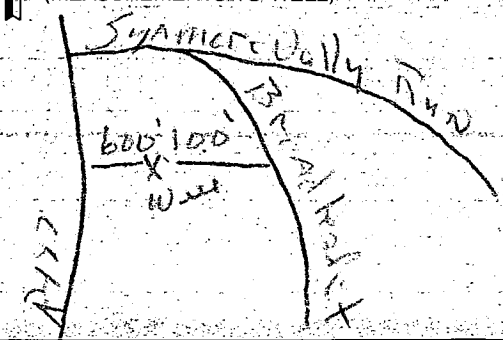
PUMP COLUMN LENGTH (nearest ft.)

CASING HEIGHT (circle appropriate box and enter casing height)

LAND SURFACE (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

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

DRILLERS IDENT. NO. 453

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH)

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

TELESCOPE CASING LOG INDICATOR OTHER DATA

B 1 2178 SEQUENCE NO. (DP USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
PERMIT TO DRILL WELL
 please print or type

STATE PERMIT NUMBER
10-88-1191 ✓
 fill in this form completely

Date Received (APA) 110189
OWNER INFORMATION
 Last Name SYMONS Owner First Name EVILLY
 Street or RFD 917 MAIN STREET
 Town ELLICOTT CITY State MD Zip 21412

DRILLER INFORMATION
 Driller's Name Frank Delph License No. 462
 Firm Name Frank Delph Well Drilling Inc.
 Address 18324 Penn Stg Rd Mt Airy MD
 Signature Frank Delph Date 10/23/89

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 HEALTH DEPARTMENT APPROVAL)
 TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

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
 other _____

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)
 THIS WELL WILL NOT REPLACE AN EXISTING WELL
 THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
 THIS WELL WILL DEEPEM AN EXISTING WELL
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) _____

Not to be filled in by driller (OEP USE ONLY)
 APPROP. PERMIT. NUMBER GA P
 FORCE CS WRITE INITIALS IN BOX PERMIT No. 10-88-1191

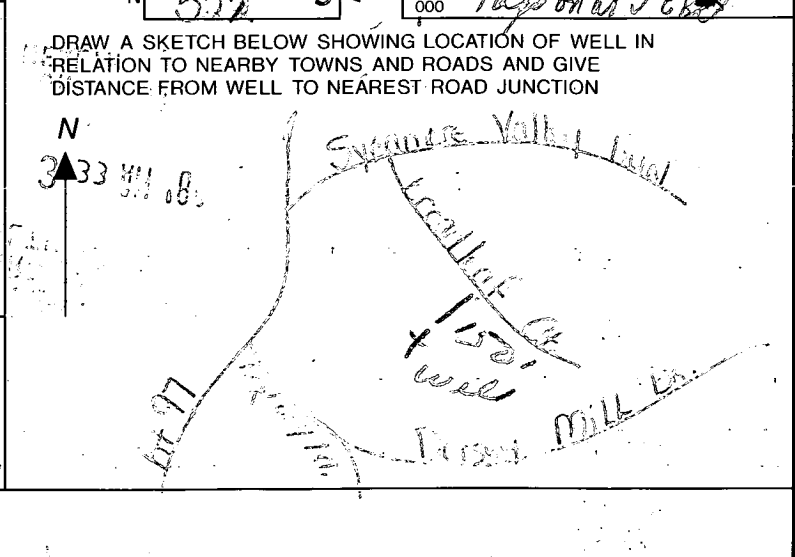
SPECIAL CONDITIONS

LOCATION OF WELL
 HOWARD COUNTY
 SUBDIVISION SPYANNOKE VALLEY
 SECTION 1 LOT 0
 NEAREST TOWN Alenely
 MILES FROM TOWN (enter 0 if in town) 0 MI

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
 TOWN
 NEAR WHAT ROAD Broad Leaf Ct
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 DISTANCE FROM ROAD 150 FT OR MI ft

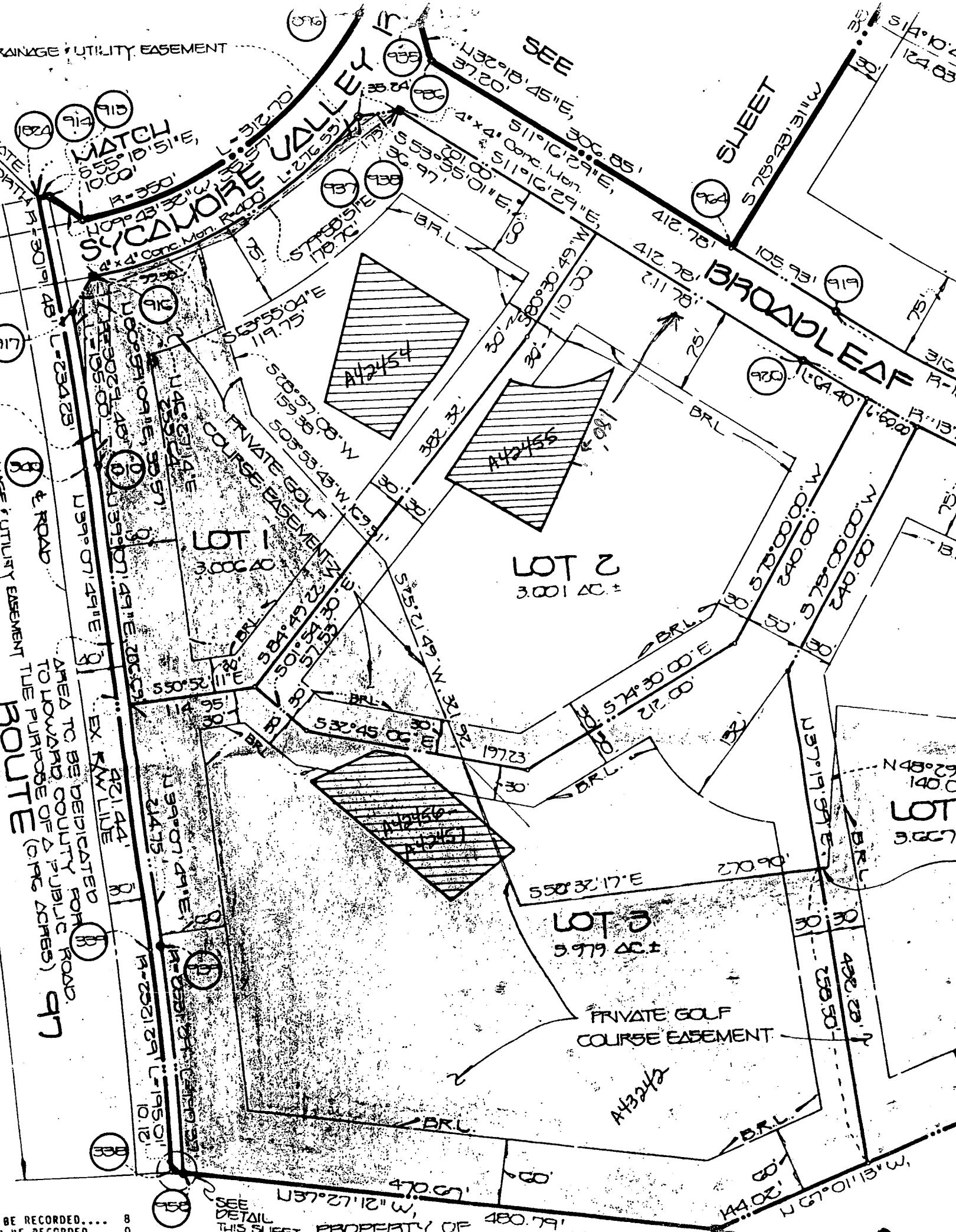
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
 COUNTY NAME Howard COUNTY NO. 07 42 455
 STATE SIGNATURE _____ DATE ISSUED 02 02 90 EXP. DATE 5/3/90
 NORTH GRID 523000 EAST GRID 079000

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
 SOURCES OF DRILLING WATER
 1. Well
 2. 10 Bags of cement
42' casing
32' open
2' casing above ground.
 WRITE THE BOX NUMBER FROM THE MAP HERE
 E 74 90
 N 52 3
 Taps on at 150'



DRAINAGE & UTILITY EASEMENT

STATE HIGHWAY 30191 48' L-23428'
DRAINAGE & UTILITY EASEMENT
ROUTE 97
AREA TO BE DEDICATED FROM TO HOWARD COUNTY PUBLIC ROAD. THE PURPOSE OF A PUBLIC ROAD.



BE RECORDED... 8

SEE DETAIL THIS SHEET PROPERTY OF 480.79'



HOWARD COUNTY HEALTH DEPARTMENT

Joyce M. Boyd, M.D., County Health Officer

*Reply to: Charles B. Streaker
313-2640 or 313-2641*

July 12, 1994

Altieri Homes

7349 Gardenview Drive

Baltimore, Maryland 21227

RE: Cattail Creek, Lot #2

3608 Broadleaf Court

Well Tag No. HO- 88-1191

Dear Sirs :

This is to advise you that the septic system was installed, inspected and approved on April 27, 1994.

The water sample recently submitted for testing was free of coliform and fecal coliform bacteria at the time of sampling and is bacteriologically safe for drinking.

The nitrate sample result was documented to be 15.6 parts per million. A nitrate device has not been installed to treat the excessive nitrate contamination.

COMAR 26.04.04.09 prohibits approval of any water supply with a nitrate-nitrogen contaminant level in excess of 10 parts per million. This department will grant a temporary deviation to that section of the regulation on condition that the nitrate removal system is installed within a period of 30 days and the nitrate removal system effectively maintains the nitrate-nitrogen contaminant level below the 10 parts per million requirement.

Furthermore, it will be necessary for you to comply with the following conditions:

1. The system must be properly operated and maintained continuously, in accordance with the service contract for the life of the residence. You must supply this department with a copy of that contract.
2. It is recommended that a yearly nitrate analysis be performed.

Bureau of Environmental Health
3525-H Ellicott Mills Drive Ellicott City, Maryland 21043-4544
Water and Sewerage, Permits 313-2640 Community Environmental Health 313-2642
Technical Services 313-2644 Director 313-2645 TDD 313-2323

3. If, in the future, you decide to sell or rent your home, you must make any potential buyer/tenant aware of the above condition.

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 permit(s) HO- 88-1191. No guarantee can be given for health protection beyond this date of issue. Based upon satisfactory investigation and evaluation by the Howard County Health Department, the Department of Health and Mental Hygiene accepts this well system as required by COMAR 26.04.04.09.

This certificate may become final upon completion of the final bacteriological test which is to be taken by the county health department within six months. The well owner accepts his responsibilities under COMAR 26.04.04.10.

February 7, 1990
Date Well Approved

July 7, 1994
Date of Water Sample

Approving Authority
Charles B. Streaker, R.S.
Sanitarian
Water and Sewerage Program

CBS:hs

Enclosure