

5/9/96
1:00 do
5/10/96
11:00 pm

09-350995

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 50997C

A43248

DISTRICT 4

DATE 11-28-95

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH

~~461-9933~~ 313-2640

DATE SYSTEM APPROVED 5/10/96

INSPECTOR ALM

INDEXED

South Carroll Backhoe, Inc. IS PERMITTED TO INSTALL ALTER

ADDRESS 4410 Salem Bottom Road, Westminster, MD 21157 PHONE 875-4197

SUBDIVISION Cattail Creek Country Club LOT 10 ROAD 3656 Broadleaf Court

PROPERTY OWNER Altieri Homes / Ballard

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS *Maintain 2% slope 10' prior to septic tank.*

NUMBER OF BEDROOMS 4

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 210

TRENCHES - 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 - Place distribution box 135' off left (724') lot line and 65' off front (311) lot line as seen when facing lot from pipestem Access Road.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 10/21/95 DKS

PLANS APPROVED BY Glen Savage DATE 9/27/95

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

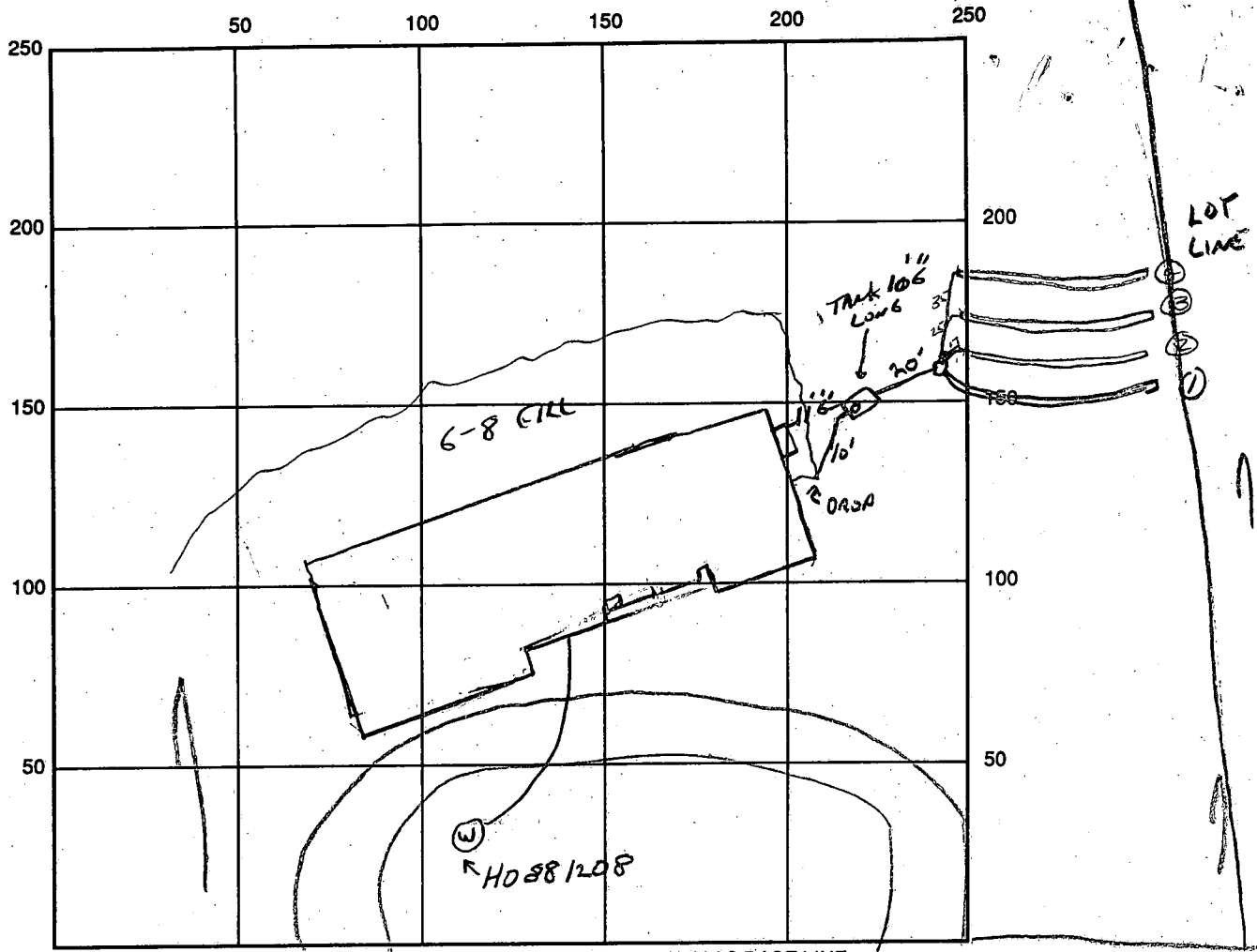
PERMIT VOID AFTER TWO YEARS

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
43248



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE TO BROADLEAF CT. →

SEPTIC TANK LEVEL OK CLEANOUTS ON TANK

DISTRIBUTION BOX LEVEL OK

DRAIN FIELD/TITLE DEPTH 8.0 FT. TRENCH WIDTH 2.0 FT. INLET DEPTH 4.0 FT.

EFFECTIVE GRAVEL DEPTH 4.0 FT. TOTAL LENGTH $\frac{1/2/3/4}{55/55/50}$ FT./30 = 210 total linear ft.

NUMBER OF TRENCHES 4 ONE SIDEWALL/BOTTOM AREA 840 SQ. FT.

DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA — SQ. FT.

REMARKS: 5/9/96 WPI OK. OK TO COVER 1ST TRENCH, TANK +
LINE TO DIST BOX. 5/10/96 OK TO COVER ALL WORK final Au

DATE SYSTEM APPROVED 5/10/96 INSPECTOR Amy McMiller

APPLICATION

PERCOLATION TESTING

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

A 43248 ✓
P _____
DISTRICT 4
DATE 12/9/88

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 Egwood Farm Inc C/O Land Design + Development *AITIERI HOMES*

ADDRESS 8307 Main St PHONE 461-4600

PROSPECTIVE BUYER N/A

ADDRESS _____ PHONE _____

PROPERTY LOCATION: New #10 final

SUBDIVISION Clark Spinnore Valley LOT NO. AT

ROAD AND DESCRIPTION Roxbury + Dorsey Mill (3656 Broadheat Court)

TAX MAP 21 PARCEL # 6

SIZE OF LOT 4.07 AC.

BLDG. PERMIT SIGNED
AND RETURNED 9-21-95
Serial # 61175
4 BRMS.

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 Reri
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

HD-216

THIS IS NOT A PERMIT

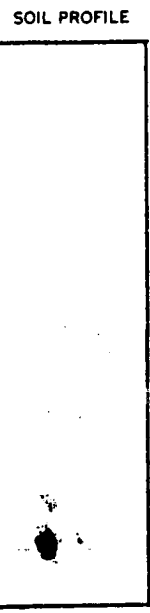
New # 10

A # 43248

11

See New # <u>10</u> = =				

8 min average
Inlet 3'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	

REMARKS _____

TYPE OF SOIL _____

TESTED BY _____ ALSO PRESENT _____

APPLICATION

PERCOLATION TESTING

A 50842

P _____

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

DISTRICT _____

DATE 8-25-95

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 ALTIERI HOMES

ADDRESS 7349 GARDEN VIEW DRIVE PHONE 410-796-5206
ELKRIDGE MD. 21227.

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION CATTAIL CREEK COUNTRY CLUB LOT NO. LOT 10

ROAD AND DESCRIPTION BROADLEAF COURT

TAX MAP 21 PARCEL # _____ RECORDED PLOT 9513

SIZE OF LOT ~~3.476~~ ± 3.476 A TYPE BLDG SINGLE FAMILY.
(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. William F. Frabio FRISBER COLLINS & CARTER
(SIGNATURE OF APPLICANT)

APPROVED BY [Signature] FOR TRENCH SYSTEM DATE 9-27-95
ADJUSTED 5/04/1

REJECTED BY _____ FOR _____ DATE _____

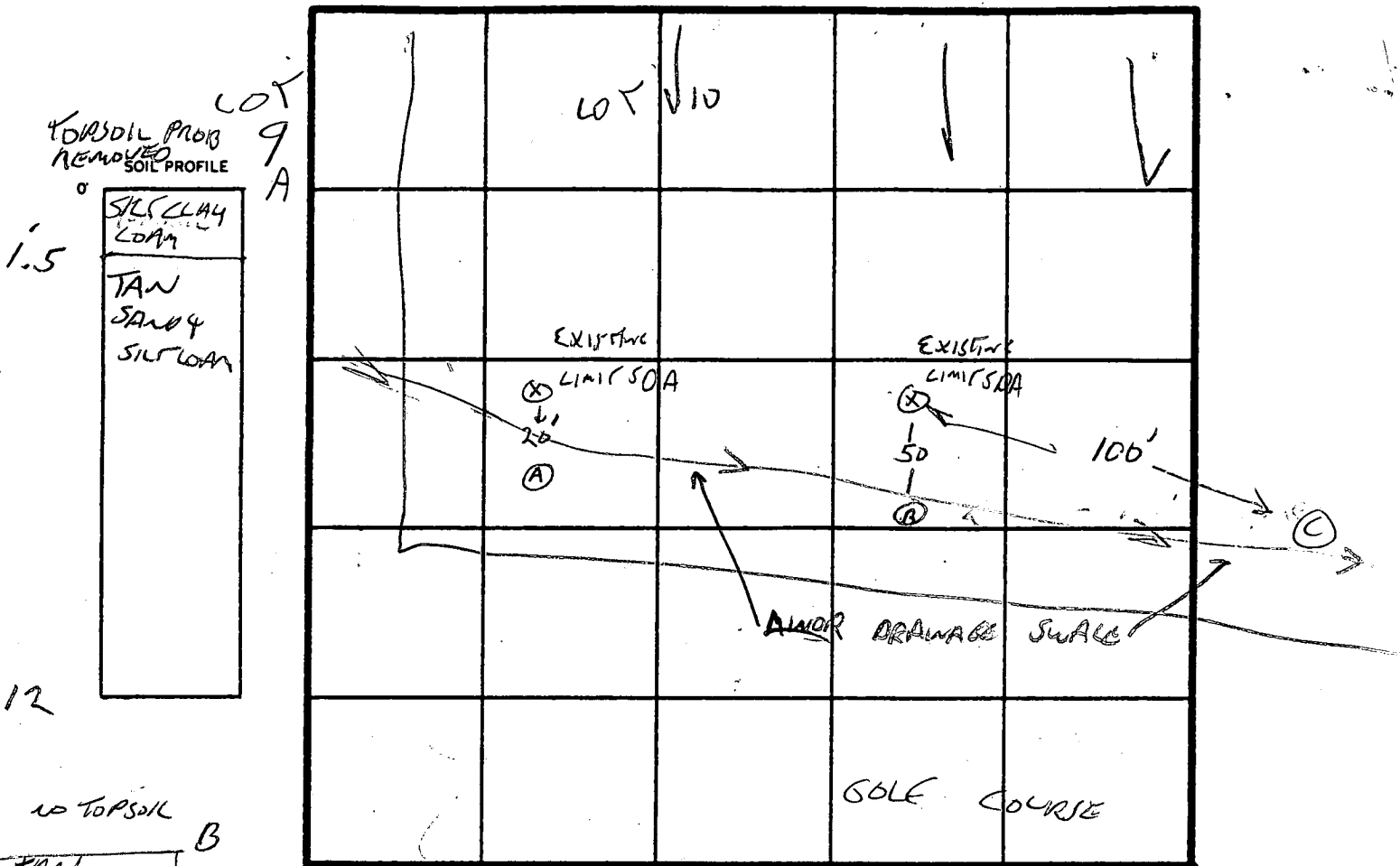
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

HD-216

THIS IS NOT A PERMIT

A 50842



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
	A ok to 12	4' 6"	3:47	3:59	3:59	4:18	19 MIN ✓
	B ok to 12	4'	3:56	3:57	3:57	3:59	2 MIN ✓
	C ok to 12						

8/3/95

REMARKS NO PERC-NED AREA STAKED LEFT MESSAGE FOR STEVE 8 MINUTE AVERAGE TIME

TYPE OF SOIL C VISUAL SIMILAR TO B-OK

TESTED BY GLEN SAVAGE

ALSO PRESENT STEVE SHARMAN - BUILDER REG CONTRACTOR

906-5941 PAGER

43247

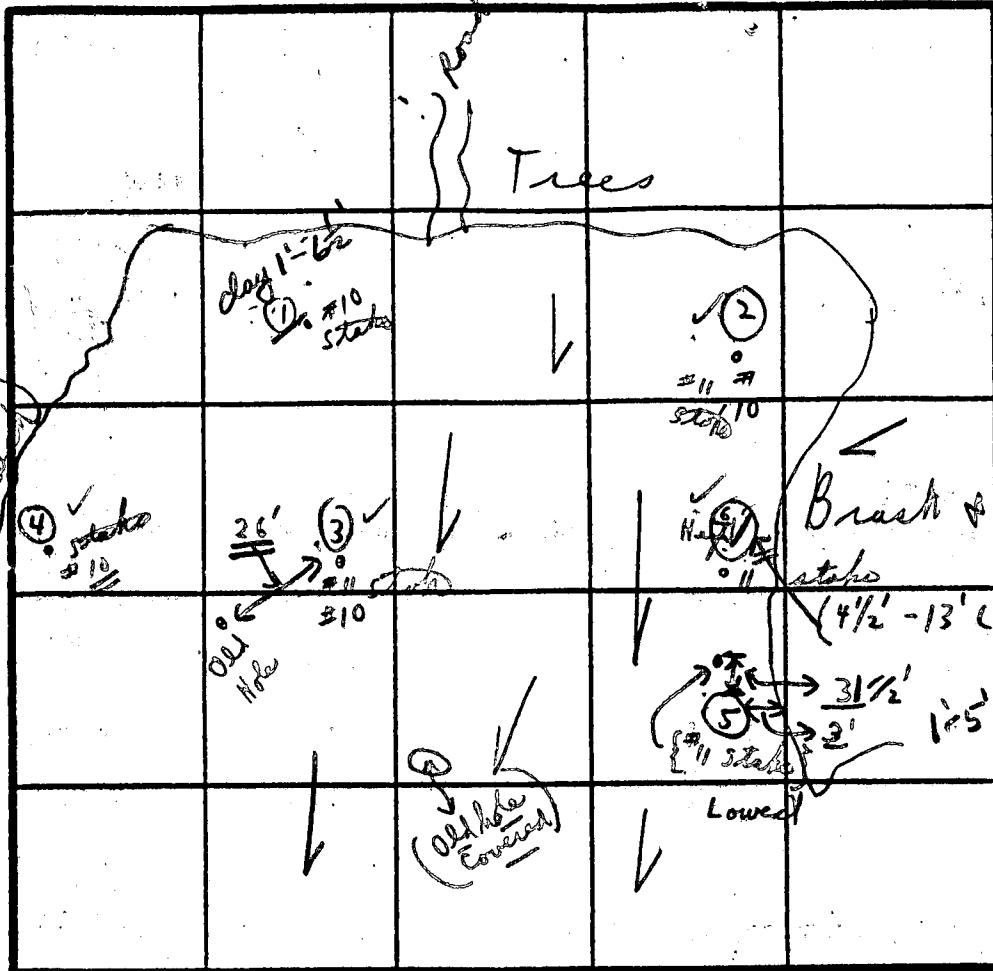
#10

#10

New #9

SOIL PROFILE

- SNOW
- CLAY
- LOAM
- ROCK
- bedrock
- Test shelf



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Dorsen Mill Road

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
1/10/89	①	1'6"-8" 13'	Clayish	Visual			?
	②	3'	1:30	1:32	1:32	1:36	4+ out
	③	4 1/2'	1:30	1:32	1:32	1:36	4+ out
	③	12'					LO. Am
	④	5 1/2'	1:38	1:42	1:42	1:50	8 min
		12'			(Loam 4'-12')		
	⑤	5 1/2'	1:51	1:55	1:55	2:03	8 min
		11'			Loam		

8 min max
under 3

1 1/2" clay
White loam
1" clay
+ rock

11' 10"

Some
concrete
crack

REMARKS ① Visual (4 1/2' - 13' loam)
Tests in open, tests per stake or noted

TYPE OF SOIL 9/27/95 8 MINUTE AVERAGE - SEE ADDITIONAL

TESTED BY C. B. [Signature] ALSO PRESENT { See # 18 & 19 }

Approved Septic System Plan
Howard County Health Department

Signature

Date

PROPOSED PERM TEST

SEWAGE DISPOSAL EASEMENT

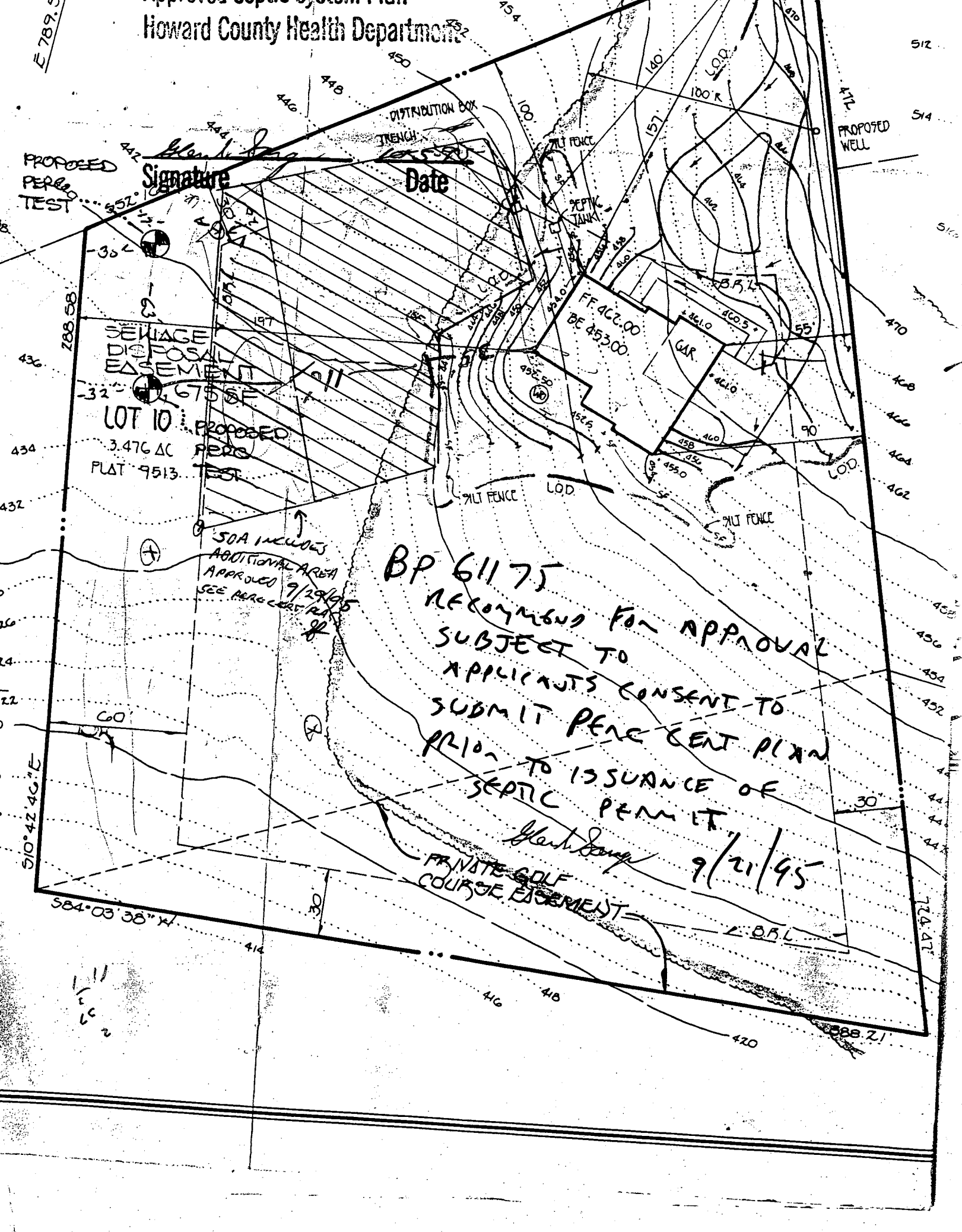
LOT 10
3.476 AC
PLAT 9513

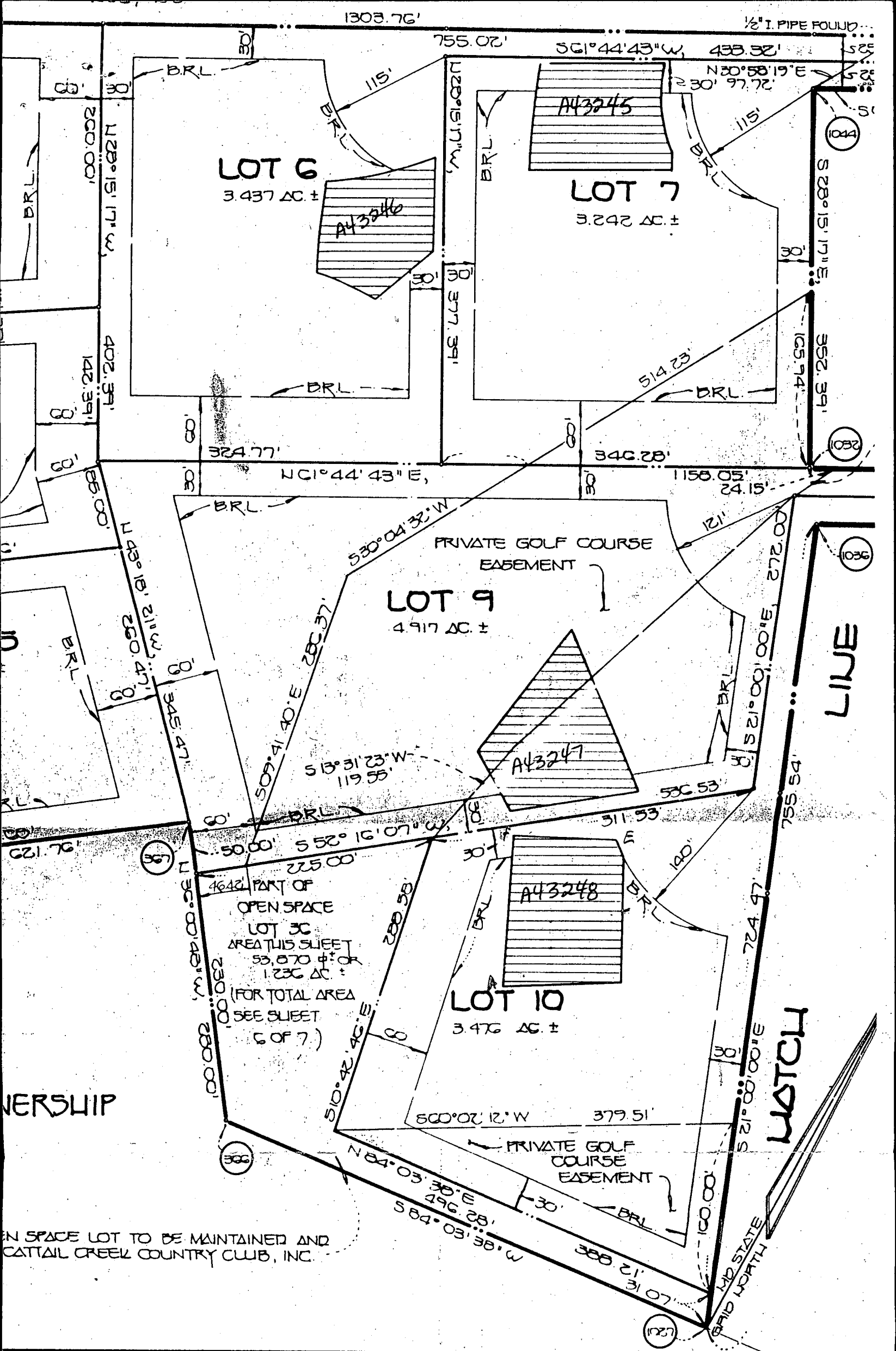
PROPOSED PERM TEST

50A INCLUDES ADDITIONAL AREA APPROVED 9/29/95 SEE MERCURY PLAT

BP 61175
RECOGNIZED FOR APPROVAL
SUBJECT TO APPLICANTS CONSENT TO
SUBMIT PERCENT PLAN
PRIOR TO ISSUANCE OF
SEPTIC PERMIT

Handwritten Signature
9/21/95
PRIVATE GOLF COURSE EASEMENT





WERSHIP

EN SPACE LOT TO BE MAINTAINED AND
CATTAIL CREEK COUNTRY CLUB, INC.

OWNER'S CERTIFICATE

...T, AND SYCAMORE VALLEY PARTNERSHIP BY DONALD R. REUER,
DESCRIBED HEREON, HEREBY ADOPT THIS PLAN OF SUBDIVISION,
BY THE DEPARTMENT OF PLANNING AND ZONING, ESTABLISH THE
D COUNTY, MARYLAND, ITS SUCCESSORS AND ASSIGNS, (1) THE
TER PIPES AND OTHER MUNICIPAL UTILITIES AND SERVICES IN
ETC. PARCELS ARE TO BE MAINTAINED AND THE RIGHT TO RE-ENTER

SURVEYOR'S CERTIFICATE

I HEREBY CERTIFY THAT THE FINAL PLAT SHOWN HEREON IS
THAT IT IS A SUBDIVISION COMPRISED OF: (1) ALL OF
CONVEYED BY LOGMOOR FARM, INC. TO SYCAMORE VALLEY PARTNERSHIP

5 SHOWN ON PLAN.
 AND STABILIZE THE SITE.
 AND PERMISSION IS GRANTED FROM
 TOR, REMOVE SEDIMENT CONTROLS
 DISTURBED AREAS.

LIKELY TO BE REDISTURBED
 TER IS NEEDED.

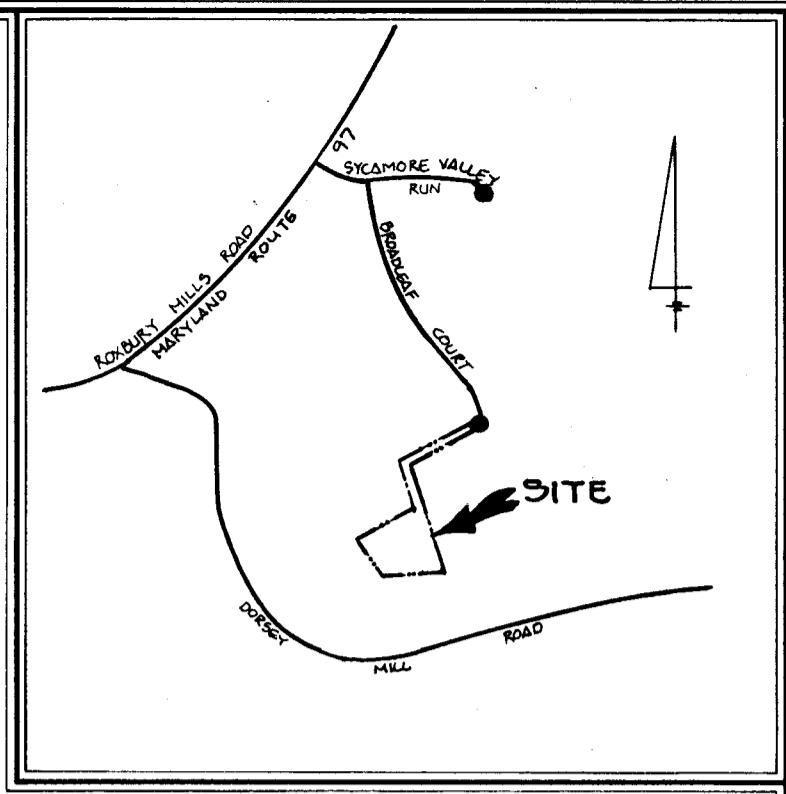
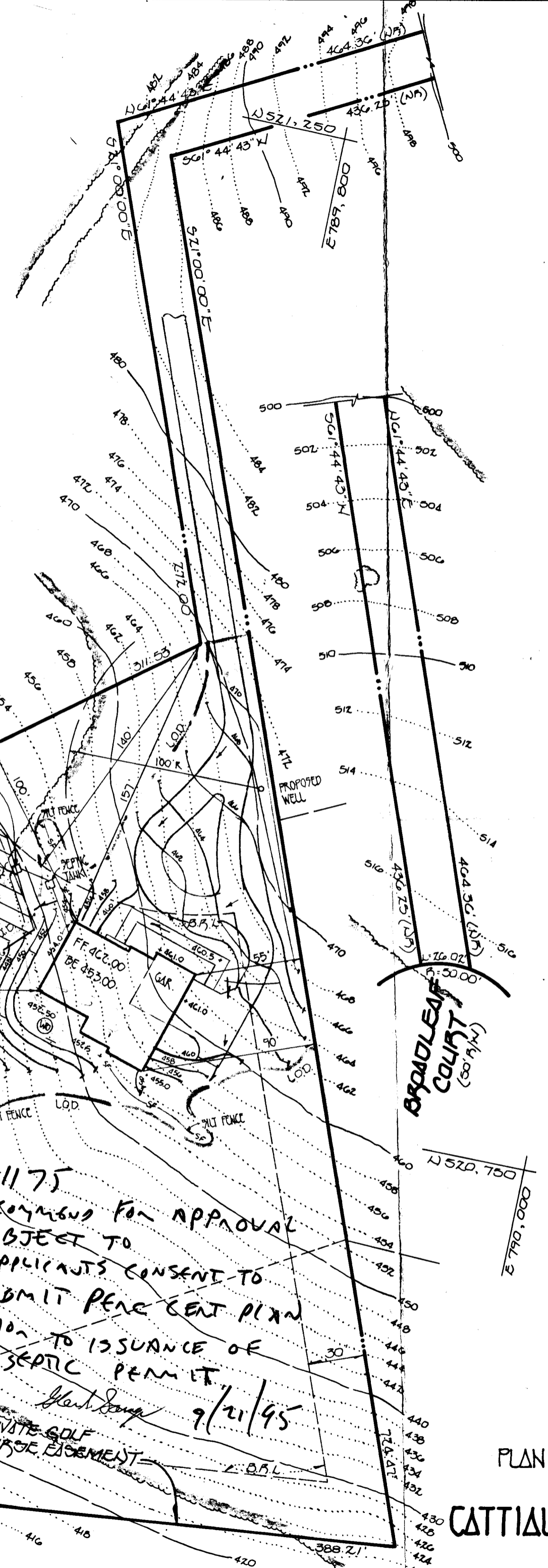
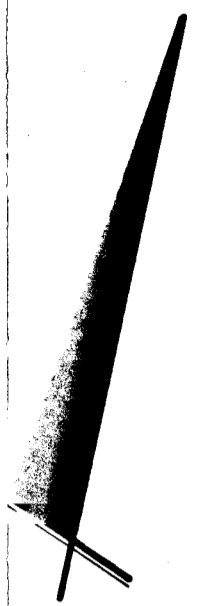
BY RAKING, DISCING
 SEEDING.

FERTILIZER (14 LBS./1000 SQ. FT.)

APRIL 30, AND AUGUST
 1 1/2 BUSHEL PER ANNUAL
 200 MAY 1 THRU AUGUST 14.
 VEGETATION (07 LBS./1000SQ.FT.).
 FEBRUARY 20. PROTECT SITE BY
 ANCHORED STRAW MULCH AND
 PRING, OR USE SOD.

TO 90 LBS./1,000 SQ.FT.)
 IMMEDIATELY AFTER SEEDING.
 APPLICATION USING MULCH
 ACRE (5 GAL./1,000 SQ.FT.)
 S. ON SLOPES 0 FEET OR HIGHER,
 000 SQ.FT.) FOR ANCHORING.

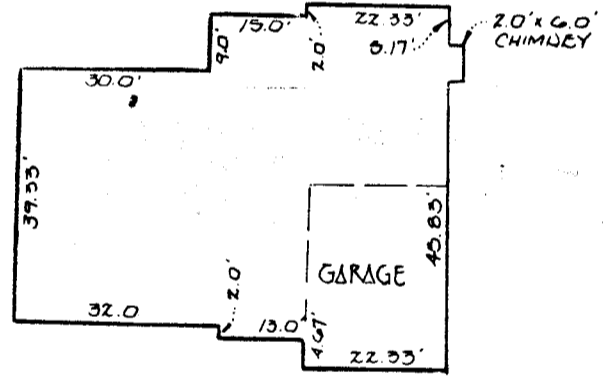
ARDS AND SPECIFICATION FOR SOIL
 RATE AND METHODS NOT COVERED.



VICINITY MAP
 SCALE: 1"=1200'

GENERAL NOTES

1. SEPTIC EASEMENT SUBJECT TO HOWARD COUNTY HEALTH DEPARTMENT No.
2. PROPOSED 1500 GALLON SEPTIC TANK.
3. A. FIRST FLOOR ELEVATION: 462.00
 B. BASEMENT ELEVATION: 453.00
 C. INVERT OF SEPTIC SYSTEM AT HOUSE: 450.50
 D. INVERT IN AT SEPTIC TANK: 445.40
 E. INVERT OUT AT SEPTIC TANK: 445.00
 F. PROPOSED GRADE OVER SEPTIC TANK: 452.00
 G. INVERT AT DISTRIBUTION BOX: 445.00
 H. EXISTING GROUND OVER DISTRIBUTION BOX: 448.00
4. LENGTH OF TRENCH TO BE DETERMINED AT TIME OF SEPTIC PERMIT ISSUANCE.
5. CONTRACTOR / BUILDER TO VERIFY ELEVATIONS IN FIELD BEFORE BEGINNING ANY CONSTRUCTION.



PROPOSED 2-STORY
 FOUR BEDROOM DWELLING

Approved Septic System Plan
 Howard County Health Department

Signature _____
 Date _____

BP 61175
 RECOMMEND FOR APPROVAL
 SUBJECT TO
 APPLICANT'S CONSENT TO
 SUBMIT PERCENT PLAN
 PRIOR TO ISSUANCE OF
 SEPTIC PERMIT.
 9/21/95

PLAN TO ACCOMPANY APPLICATION
 FOR BUILDING PERMIT
CATTAL CREEK COUNTRY CLUB
 LOT 10

TAX MAP 21 ZONED 'R' PARCEL C
 FOURTH ELECTION DIST. HOWARD COUNTY, MARYLAND
 SCALE: 1" = 50' DATE: JULY 28, 1995

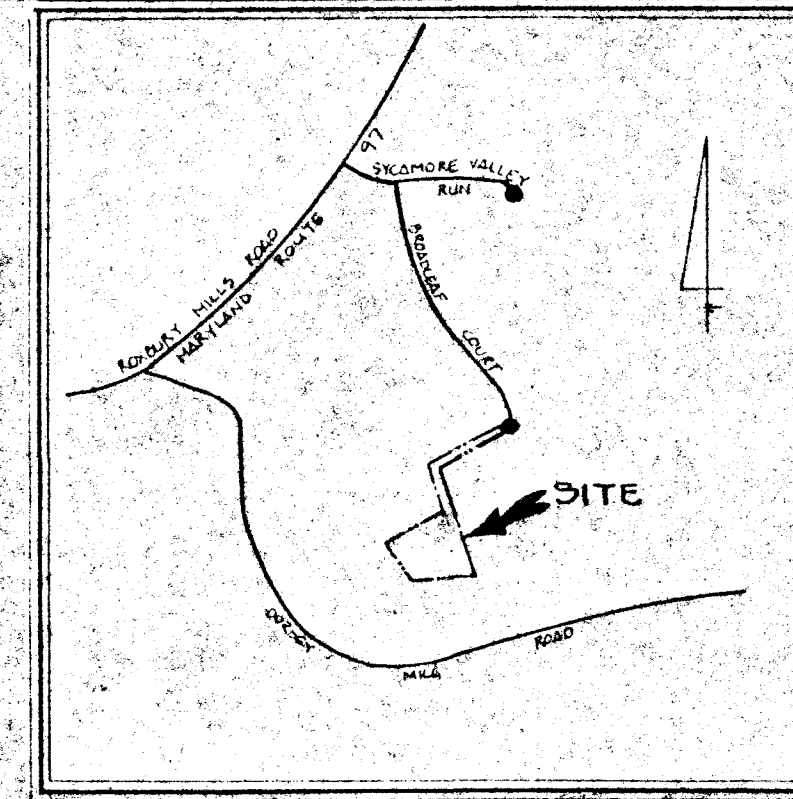
APPROVED FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS,
HOWARD COUNTY HEALTH DEPARTMENT.

James M. Boyles per JMC
COUNTY HEALTH OFFICER

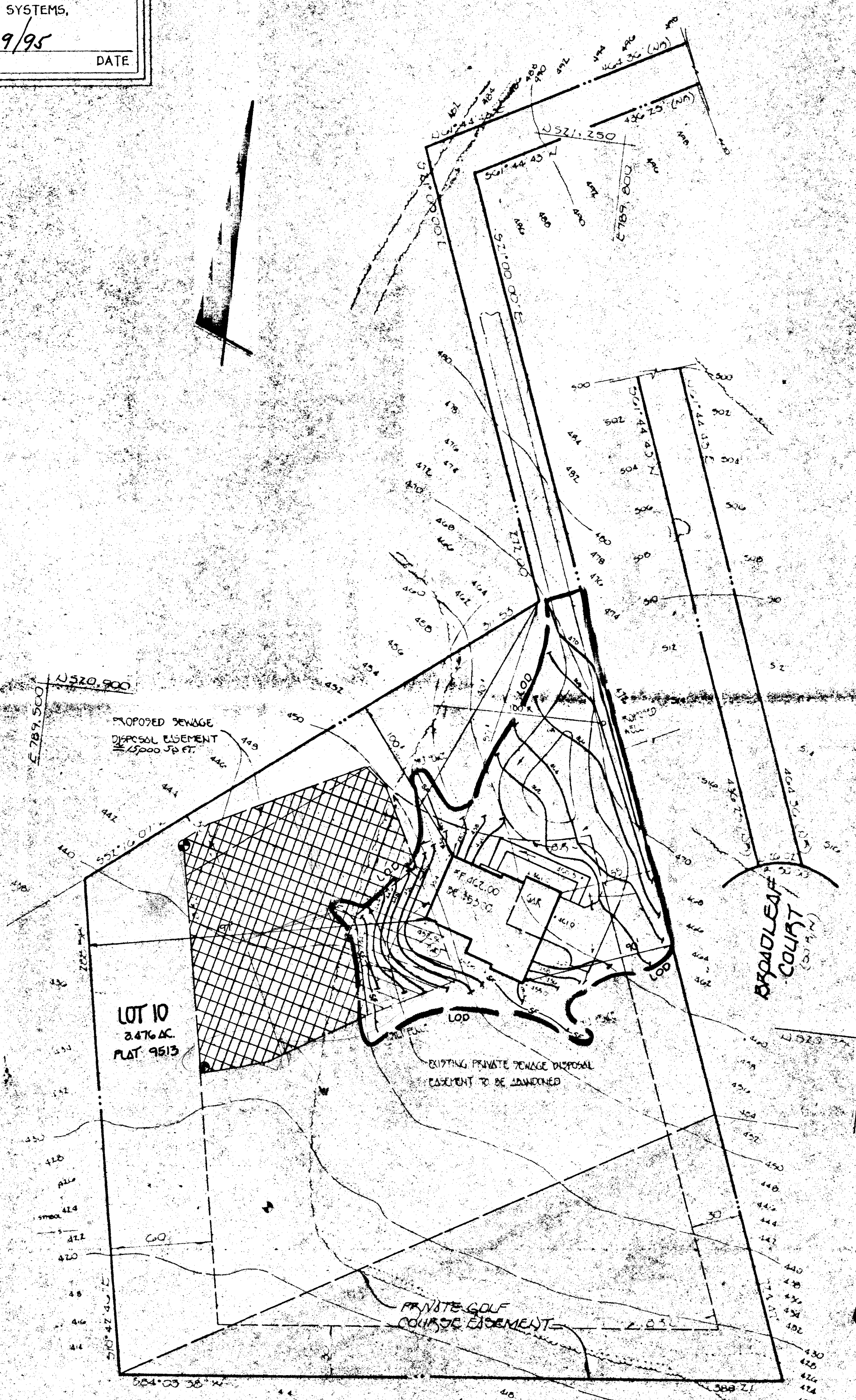
9/29/95

DATE

9-27-95 SENT FOR SIGNATURE



VICINITY MAP
SCALE: 1"=1200'



GENERAL NOTES:

1. [Hatched Area] THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF 10,000 SQUARE FEET AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWERAGE DISPOSAL IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWERAGE IS AVAILABLE. THESE EASEMENTS SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENT INTO THE PRIVATE SEWERAGE EASEMENT. RECORDATION OF A MODIFIED SEWERAGE EASEMENT SHALL NOT BE NECESSARY.
2. [Diagonal Line Area] THIS AREA DESIGNATES AN EXISTING PRIVATE SEWERAGE EASEMENT THIS EASEMENT IS TO BE ABANDONED.
3. THE LOT SHOWN HEREON COMPLIES WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREA AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT.
4. THE PURPOSE OF THIS PLAT IS TO REVISE THE EXISTING PRIVATE SEWERAGE EASEMENT TO THE LOCATION SHOWN HEREON.
5. ALL WELLS AND SEPTIC SYSTEMS WITHIN 100 FEET OF THE PROPERTY HAVE BEEN SHOWN.
6. (W) DENOTES WELL LOCATION.
7. (P) DENOTES PERC HOLE LOCATION.
8. BRL DENOTES BUILDING RESTRICTION LINE.



PERC CERTIFICATION/RELOCATION PLAN
CATTAIL CREEK COUNTRY CLUB

LOT 10

TAX MAP 21
FOURTH ELECTION DISTRICT
SCALE: 1"=50'

ZONED 'R'

PARCEL 6
HOWARD COUNTY, MARYLAND
DATE: SEPTEMBER 25, 1995

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

C1 - 1354

SEQUENCE NO. (DENY 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. 5-6 ON ALL CARDS)

COUNTY NUMBER

R# 43248

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

Grid for ST/CO USE ONLY DATE Received

Grid for DATE WELL COMPLETED

Grid for Depth of Well

Grid for PERMIT NO.

OWNER: SYCAMORE VALLEY WATERWORKS last name: BRAD LEE first name: TOWN: GLENELLG SUBDIVISION: SYCAMORE VALLEY SECTION: 1 LOT: 10

WELL LOG Not required for driven wells STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

Table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Rows include Top Soil, shale, Sandstone, Slate, MIKA, Sandstone, MIKA, Sandstone, MIKA.

GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL CEMENT BENTONITE CLAY

NO. OF BAGS: 16 NO. OF POUNDS: 1100 GALLONS OF WATER: 96 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 50 ft.

CASING RECORD casing types insert appropriate code below ST CO STEEL CONCRETE PL OT PLASTIC OTHER

MAIN CASING TYPE Nominal diameter top (main) casing (nearest inch) Total depth main casing (nearest foot) PL 60 61 L 63 64 84 66 70

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.) 1 HO 8' 9' 11' 14' 15' 17' 21' 23' 24' 26' 30' 32' 36' 38' 39' 41' 45' 47' 51'

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. 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) from to

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

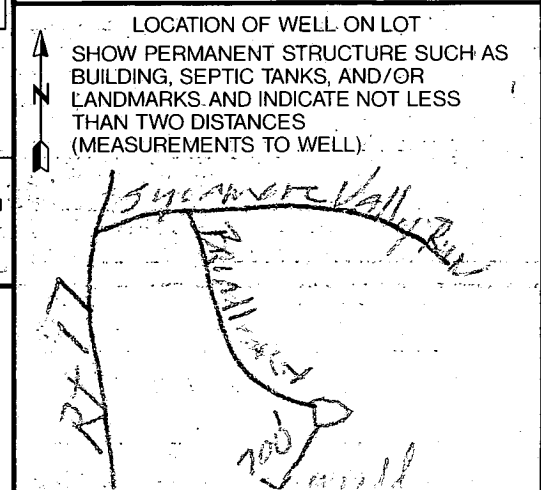
OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q 70 72 74 75 76 TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3

PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min. to nearest gal.) 5 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 60 WHEN PUMPING 80 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 - below 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)



COUNTY

5/10/96
OK to cover
WPT
AM

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043

Fax: 313-2648 313-2640

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation
Replacement

Receipt # _____
Date 5/9/96

Name of Installer ROBERT L. FEEZER Co.

Telephone 781-4655

License Number 2122

Certified Well Pump Installer Well Driller Registered Plumber

Name of Property Owner ALTIERI HOMES

Telephone 795-1405

Subdivision CATTAIL CREEK Lot # 10

Well Tag # HO-88-1208

Site Address 3656 BROADLEAF DRIVE

Pump

- 1. Type
 - a. Deep well jet
 - b. Shallow well jet
 - c. Submersible
- 2. Make STA-RITE
- 3. Model # 10P4 DORN-02
- 4. Capacity 10 GPM
- 5. Pump exceeds well capacity Yes No

Motor

- 1. Horsepower 3/4
- 2. RPM 3450
- 3. Voltage
 - a. 110
 - b. 220

Pitless Adapter

- 1. Make HARVARD
- 2. Model # PT-800
- 3. Depth 42" +

* DID NOT HAVE ANY WELL INSIDE SUPPLIED TO US OTHER THAN THE DEPTH.

- 6. If Yes, is low pressure cutoff switch installed? Yes No
- 7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors Cable guards Other

CAPTIVE AIR

- Tank WELL-X-TAL
- 1. Capacity 34 GALS.
- 2. Pressure relief valve? YES

Piping

- 1. Type Poly.
- 2. Size 1"
- 3. NSF and/or BOCA Code approved YES
- 4. Depth of supply line 42" +

Well data

- 1. Depth 223 ft.
- 2. Yield GPM
- 3. Static water level 50 ft.
- 4. Will water supply be disinfected by installer? YES

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: Robert L. Feezer

Date: 5/9/96

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