

9/22/97
LATE

PERMIT

04-351096

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 586000

A 43259

DISTRICT 4th

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXX~~ 313-2640

DATE 8-6-97

DATE SYSTEM APPROVED 9/22/97

INSPECTOR DKS

INDEXED

Jack Fyock Septic Service

IS PERMITTED TO INSTALL ALTER

ADDRESS 13775 Triadelphia Road, Glenelg, Maryland 21737 PHONE 410-988-9270

SUBDIVISION Cattail Creek Country Club LOT 19 ROAD 3609 Broadleaf Court

PROPERTY OWNER Blase Cooke

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 280

TRENCHES - Trench to be 3 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 5 feet below original grade. Effective area begins at 3 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Begin trenches 130 feet up the left lot line and 80 feet off that same lot line as seen when facing the lot from Broadleaf Court. Run trenches on 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 Km 4/15/97

PLANS APPROVED BY Amy McMillen

DATE 04/10/97

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.

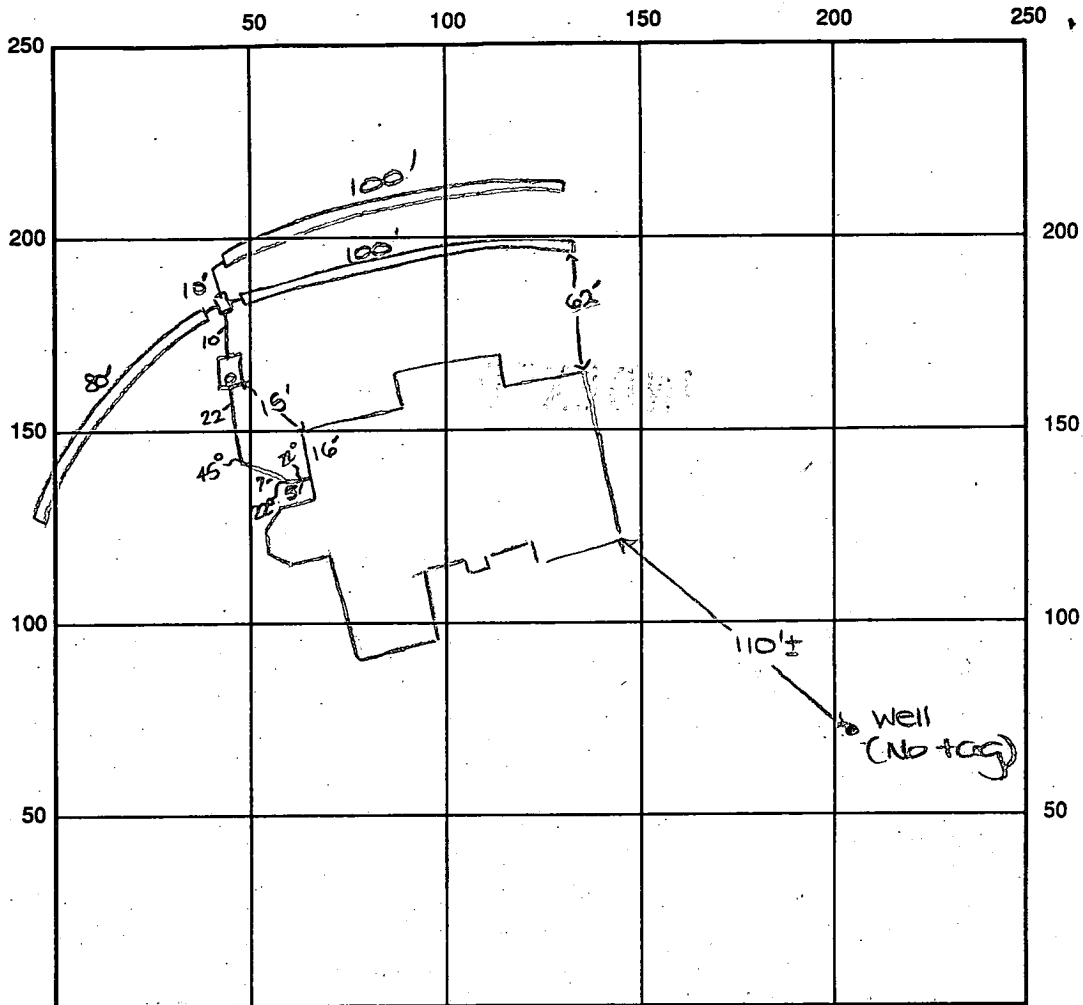
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

HD-260(6-90)

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

A
43259



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

Brookleaf Court

SEPTIC TANK LEVEL OK - 1250 gal CLEANOUTS one on sit.

DISTRIBUTION BOX LEVEL OK

DRAIN FIELD/TITLE DEPTH 3 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 2 x 100 FT. → 280

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 840 SQ. FT.

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

ABSORBENT AREA — SQ. FT.

REMARKS: 9/22/97 FINAL INSP - OK TO COVER ALL WORK. DKS

DATE SYSTEM APPROVED 9/22/97 INSPECTOR Donald Scott

2/18/97
10:00 am

APPLICATION

PERCOLATION TESTING

A 57665

P _____

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

DISTRICT _____

DATE 2/4/97

2/5/97
Preview OK
ALM

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 Blase Cooke

ADDRESS 12154 Mt. Albert Ct PHONE 410-988-9950
Ellicott City, MD 21092

AGENT OR PROSPECTIVE BUYER Sean Carney

ADDRESS 2808 Dorian Ct, Ellicott City Md PHONE 750-6906

PROPERTY LOCATION:

SUBDIVISION Canaan Creek CC LOT NO. 19

ROAD AND DESCRIPTION 3609 Broadleaf Court

**EXIST. PERMIT SIGNED
AND RETURNED 4/3/97**

Permit # B10109604-
4Bum

TAX MAP _____ PARCEL # _____

SIZE OF LOT 3.97 Acres 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 OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

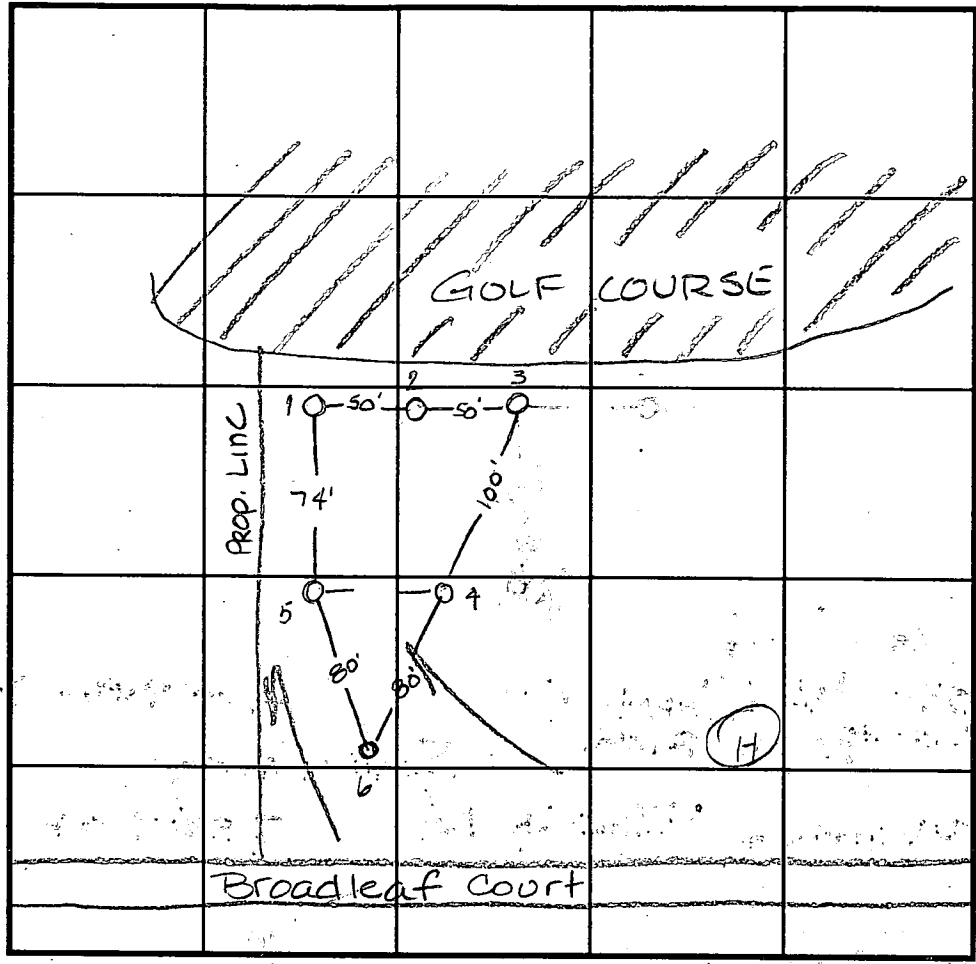
HOLD PENDING FURTHER TESTS _____

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



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE. Broadleaf Court

SOIL PROFILE 2

0' dark red brown SiCLM
3.0 reddish brown SiSalm some clay no rock
12.0

3

red brn SiLM
4.0 lgt red brown Sa SiLM no rock no evidence of H2O

4

3.5 dark red brown SiCLM
lgt tan brown SiSalm micaceous few rocks
12.0

SOIL PROFILE 5

0' orange red SiCLM
4.0 lgt beige SiSalm some clay
12.0 dry

6

dark brn red SiCLM
3.5 dark red SiLM almost dark pink
13.0

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2-18-97	1	H ₂ O at 8.0'					F
	2	4.0 / v12.0	10:24	10:33	10:33	11:46	13min
	3	4.5 / v12.0	10:20	10:24	10:24	10:35	11min
	4	Visual	to 12.5 - see profile		—		OK
	5	3.5 / v12	10:37	10:50	10:50	>30min	slow
	5	Well perc at 4.5			—		OK
	6	Visual	at 13.0 - see profile		—		OK

REMARKS ^{some} Relocation of SDA possible but not to the extent originally requested

TYPE OF SOIL _____
TESTED BY Amy McMillen ALSO PRESENT Sean Carney

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 12min TRENCH WIDTH 3.0

INLET DEPTH 3.0 MAXIMUM BOTTOM DEPTH 5.0 SQ. FT./BEDROOM 210 ft²

APPLICATION

PERCOLATION TESTING

A 43258

8-2-95

Reperc requested to accommodate desired house location No

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH

3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

DISTRICT _____

fee - this office requested DATE _____

test to confirm

"sketchy" perc notes:

to confirm percable

soils Auw

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 _____

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Cattail Creek LOT NO. 18

ROAD AND DESCRIPTION Broadleaf Ct

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 _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING HOLD FOR REVISED PERC CERT MR 8/4/95

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

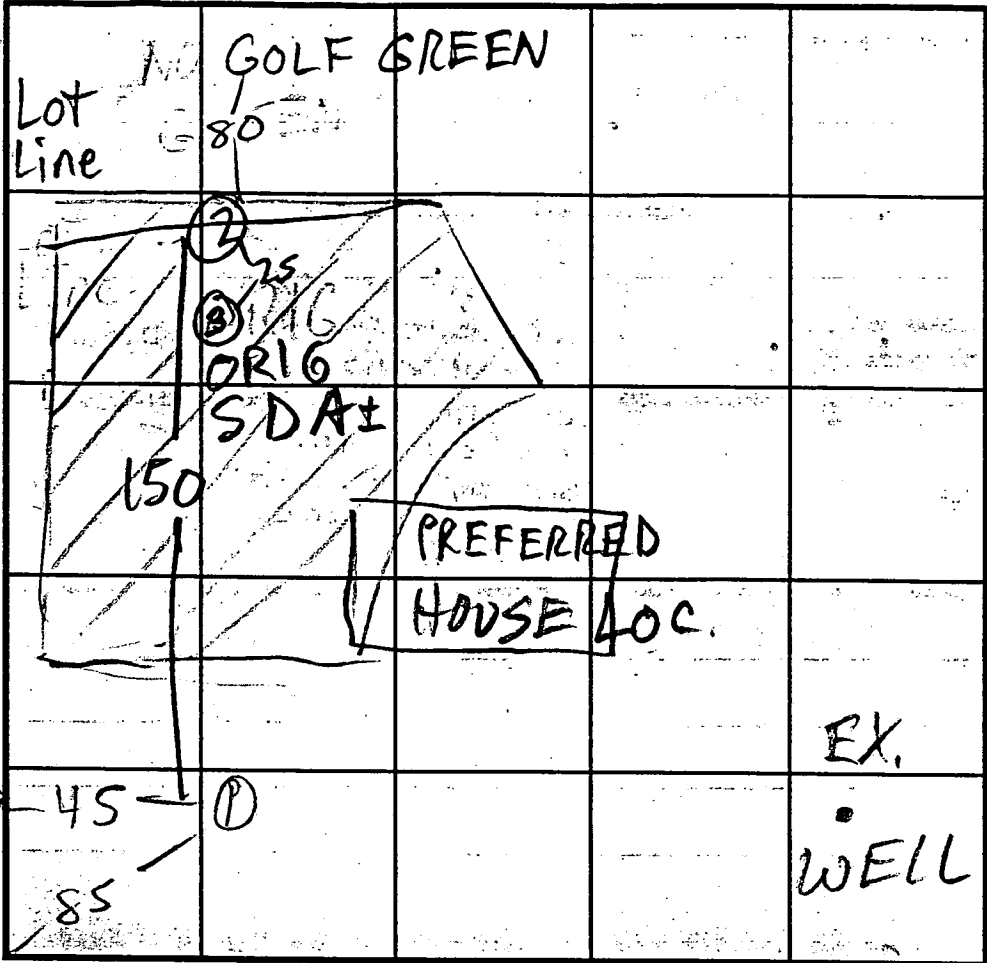
SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

COUNTY #

SOIL PROFILE

①
 red
 orange
 silty cl m
 10% frags
 beige
 tan
 brn
 fine
 powdery
 sa m
 45% frags



SOIL PROFILE

0'
 "

ADJ.
 WELL
 15'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

BROADLEAF CT

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8/3/95	1V	1 1/2	OK	see profile			
	2V	3 1/2	REFUSAL				
	3S	3' 9"	11:51	11:55	11:55	12:02	7
	3V	10	HARD	BOT			

③
 tan
 yellow
 silty
 cl m
 tan
 gray silty
 sand
 loam
 25-30%
 frags
 10 HARD BOT

REMARKS _____
 TYPE OF SOIL _____
 TESTED BY M. Riffkin
 ALSO PRESENT bldr, hoe man
 TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____
 INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____

APPLICATION

PERCOLATION TESTING

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

A 43358

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 Lamb Design + Development

ADDRESS 8307 Main St PHONE 461-4600

PROSPECTIVE BUYER N/A

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Clark Spencemore Valley LOT NO. 18 final 21 New = 19

ROAD AND DESCRIPTION Roxbury + Dorsey Mill 3615 Broadleaf Court

TAX MAP 21 PARCEL # 6

SIZE OF LOT - 3.04 AC.

SEWAGE PERMIT SIGNED 4 Bq mg
AND RETURNED 9-1-95
Serial # 60648

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 _____

HD-216

THIS IS NOT A PERMIT

A 43258

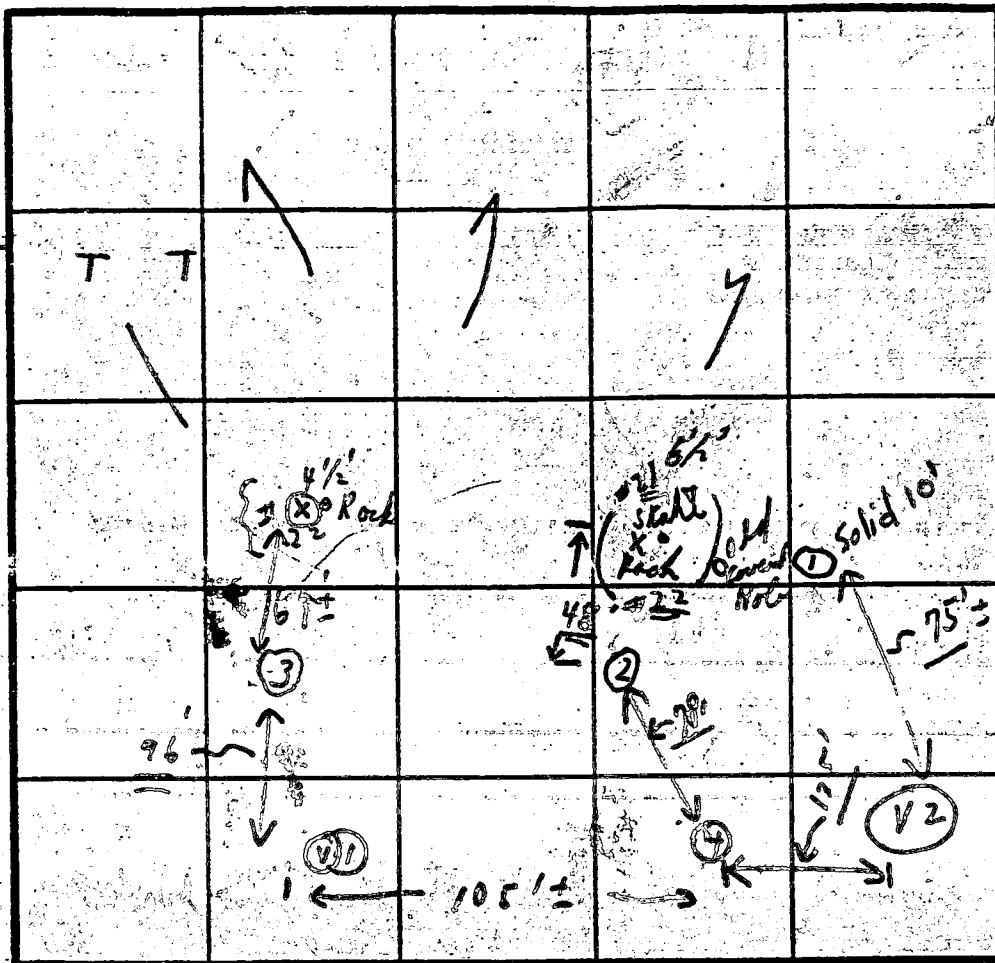
New # 17

#21

+22

SOIL PROFILE

CLAY
TO
LOAM



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
ROAD

6 minute
average
temp
4' Inlet

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
1/6/59	①	4'	9:47	9:50	9:50	9:56	6	
		10'	Solid in bottom					
	②	4'	9:53	9:57	9:59	10:02	5	
		12'	"LOAM"					
	③	3 1/2'	10:00	10:02	10:02	10:07	5	
		12'	LOAM					
	④	3 1/2'	10:13	10:19	10:19	10:25	6	
		7 1/2'	10:13	10:17	10:17	10:21	4	
	V1	12'						
	V2	11 1/2'						

} Dry to 1. =

REMARKS

HEAVY SNOW

TYPE OF SOIL

1/6 (Rockier
Loos later)

TESTED BY

C. B. J.

ALSO PRESENT

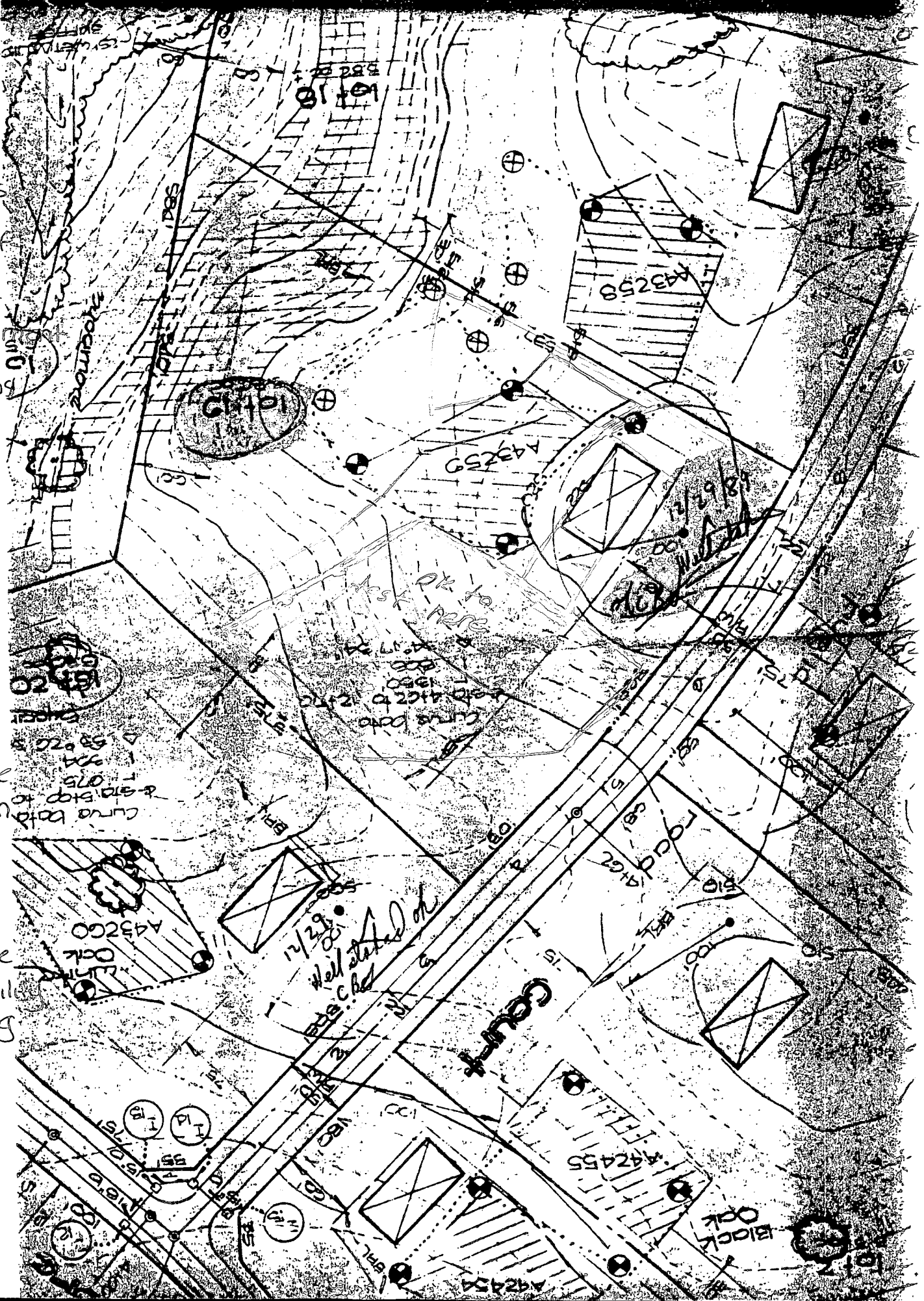
2 Kitten

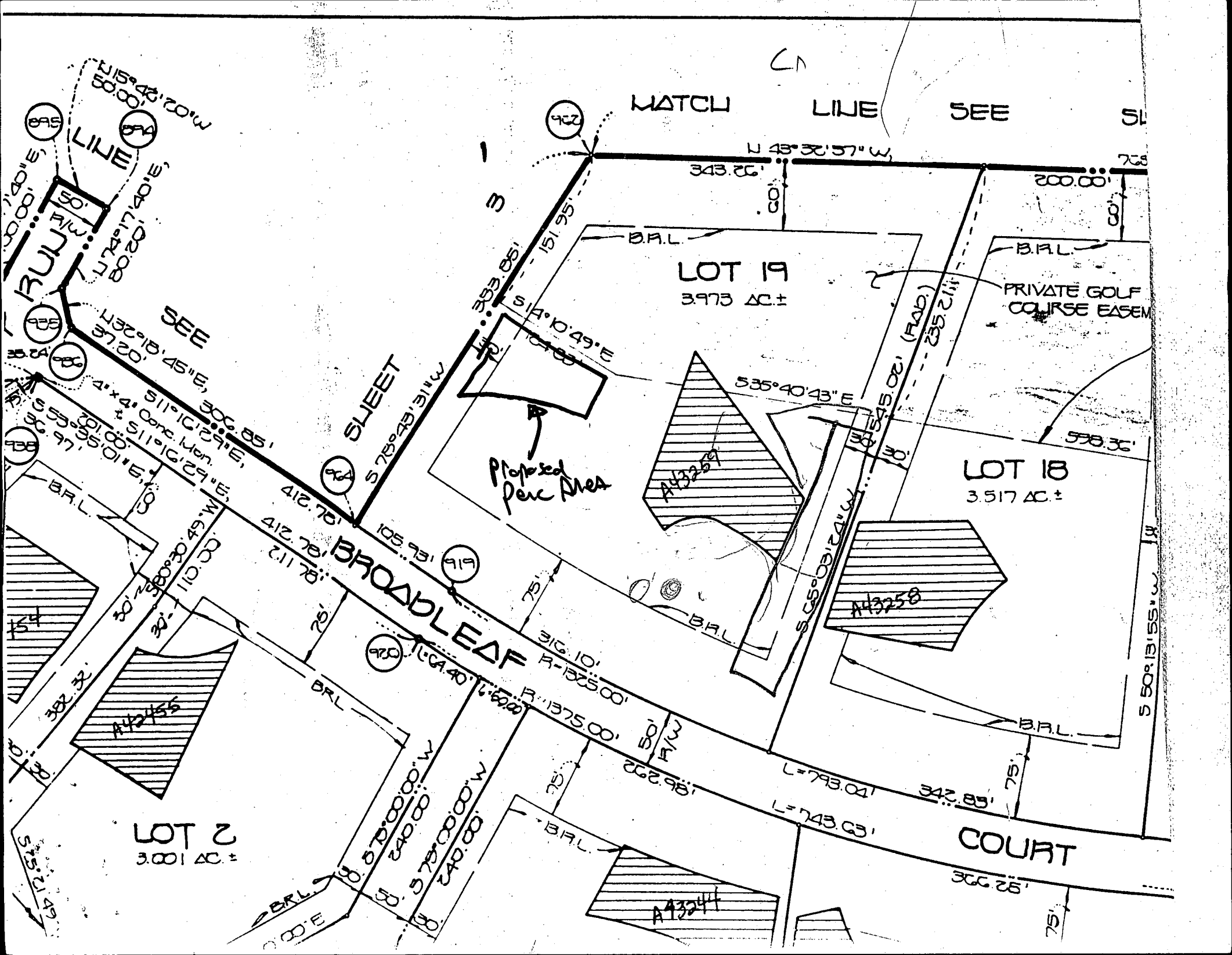
1-23-97

Proposed relocation of SDA -

- ① Failed test holes in lower portion of septic easement
- ② encroachment of 100' well radius on high end.
- ③ Unsure of golf course intrusion on the existing SDA.

Shown change not acceptable only option seems to be retest to left side of lot. Unsure of probability of passing in that location





MATCH LINE SEE

LOT 19
3.973 AC ±

LOT 18
3.517 AC ±

LOT 2
3.001 AC ±

BROADLEAF COURT

COURT

SWEET SUEET

Proposed Parc Area

PRIVATE GOLF COURSE EASEMENT

B.R.L.

B.R.L.

B.R.L.

B.R.L.

B.R.L.

MATCH LINE

N 43° 32' 57" W

343.20'

200.00'

S

S 53° 28' 51" W

S 17° 10' 49" E

S 35° 40' 43" E

S 55° 02' 12" W

S 50° 13' 55" W

N 15° 42' 20" W
50.00'
S 12° 17' 40" E
50.00'

SEE
S 13° 18' 45" E, 300.85'
S 51° 10' 29" E, 300.85'
S 55° 35' 01" E, 301.00'
S 53° 35' 01" E, 301.00'

S 30° 20' 49" W, 110.00'
S 30° 20' 49" W, 110.00'

412.76'
105.98'
181.21'
316.10'
R-1375.00'
R-1375.00'

S 57° 00' 00" W, 240.00'
S 57° 00' 00" W, 240.00'

L=793.00'

L=743.63'

342.85'

300.26'

A43254

A43258

A43255

A43244

925

924

928

927

926

929

924

919

920

922

CA

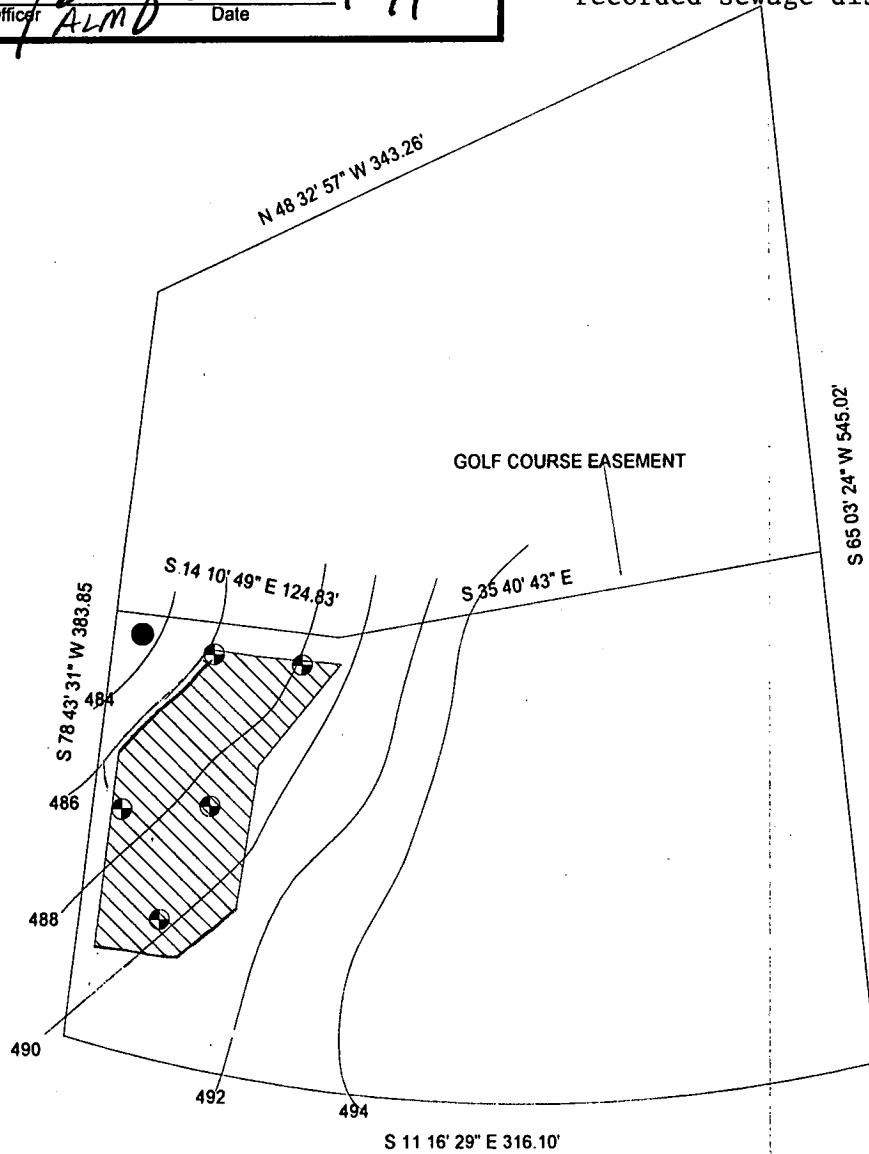
APPROVED: For private water and private sewerage systems.
Howard County Health Department

Joseph M. Bost 4-9-97
Howard County Health Officer ALMD Date

RE-PERCOLATION TEST PLAT

The purpose of this plat is to
revise the location of the
recorded sewage disposal easement.

PROPERTY KNOWN AS:
Lot 19, "CATTAIL CREEK CC"
Howard County, Maryland



This area designates a private sewerage easement of at least 10,000 square feet as required by the Maryland Department of the Environment for individual sewerage disposal. Improvements of any nature in this area are restricted until public sewerage is available and servicing any residential structures connected on this building site. This easement shall become null and void upon connection to a public sewerage system. The County Health Officer shall have the authority to grant variances for encroachments into the private sewerage easement. Recordation of a modified sewerage easement shall not be necessary.

- All percolation test holes that have passed are shown hereon have been field located and thus shown (⊕)
- All percolation test holes that have failed are shown hereon have been field located and thus shown (●)

I hereby certify that all information contained herein is accurate to the best of my knowledge. All wells and private septic systems that are located within 100 feet of the property line are shown. The lots shown here on comply with the minimum ownership width and lot area as required by the Maryland State Department of the Environment.

Joseph M. Bost

Doughoregan Homes, Inc.
2808 Brian Court
Ellicott City, Maryland 21043
Sean K. Carney (410) 750-6406

Date

scale: 1"=100'

APPLICATION

HOWARD COUNTY

SERIAL NUMBER

PERMIT APPLICATION

DEPARTMENT OF INSPECTIONS, LICENSES & PERMIT
3430 COURT HOUSE DRIVE, ELLICOTT CITY, MARYLAND 21043

600105862

BUILDING ADDRESS (HOUSE NO., STREET, TOWN OR AREA)

3609 Broadleaf Ct
Glenwood MD 28915

GRADING/SEDIMENT CONTROL YES NO

DESCRIPTION OF WORK AUTHORIZED

Per Temporary Trailer
for Residential
Construction

LOT NO.	PARCEL NO.	SEC.	AREA	BLOCK NO.	LIBER	FOLIO
19						
SUB DIVISION		ZONE	ZONE MAP	ELEC. DIST.	CENSUS TR.	
"Cathall Creek"						

OWNER NAME AND ADDRESS
Blase Cook
2808 Baum Court
Ellicott City, Md 21043

PHONE NO.
410-750-6104

OCCUPANT'S NAME AND ADDRESS
Same

PHONE NO.

ARCHITECT OR ENGINEER'S NAME AND ADDRESS
Same

PHONE NO.

CONTRACTOR'S NAME AND ADDRESS
Same

PHONE NO.

SIZE OF BLDG.	FRONT	DEPTH	HEIGHT
10 x 50'			

TYPE OF BLDG.	AREA	VOLUME	ROOF
B. ROOMS ROOMS BATHS FIREPLACES			

FOOTINGS	FOUNDATION	S. WALLS

UTILITIES				
WATER/WELL	SEWER/SEPTIC	GAS	ELECTRICITY	TYPE OF HEAT
				AC

I have carefully examined and read this application and know the same is true and correct, and that is doing this work, all provisions of Howard County Ordinances and the State Laws of Maryland will be complied with, whether specified or not; and I will notify the Department of Inspections, Licenses and Permits twenty-four hours in advance when I am ready for the inspections called for elsewhere in the application; and that no work will be covered up until such inspections have been complied with.

CC [Signature] TITLE
5-22-97 DATE

EXISTING USE	PROPOSED USE	
Lot	SFD	
EST. CONSTRUCTION COST	LICENSE NUMBER	PERMIT FEE
100		60

FOR OFFICE USE ONLY

DISTANCE IN FEET FROM R/W LINE TO FRONT BUILDING LINE _____

SIDE YARD _____
(DISTANCE IN FEET FROM SIDE BLDG. LINE TO SIDE PROPERTY LINE)

TO SIDE BUILDING LINE _____
DISTANCE IN FEET, REAR YD. REQUIRING SET

BACK _____ (CORNER LOT ONLY)

SDP # _____

Check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

CAUTION
To begin construction before a permit placard has been issued and displayed on the job is a violation of the law.
Use and occupancy permit must be applied for two weeks before it will be issued.

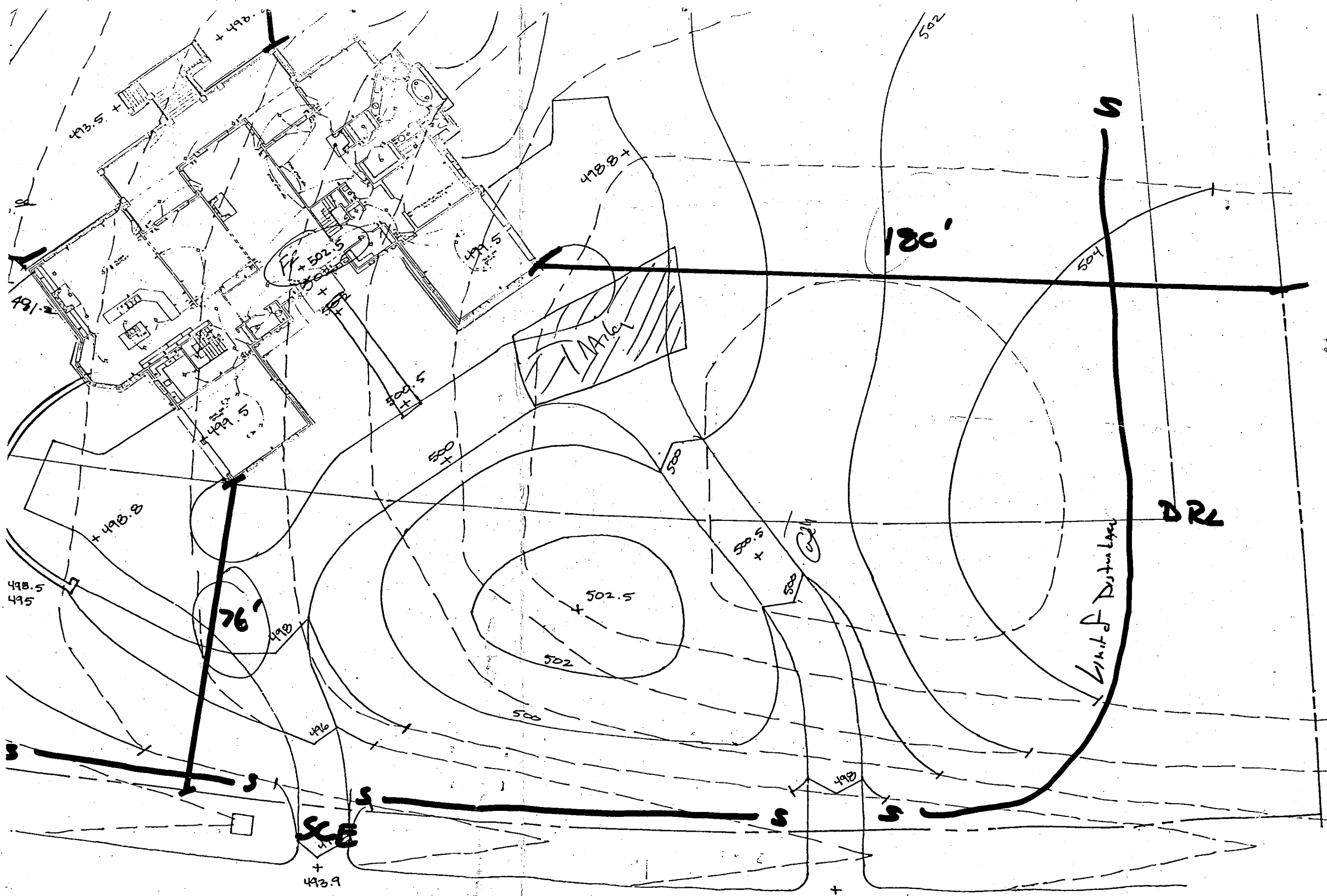
FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING	X	
SHA		
SEDIMENT/GRADING		
BUILDING OFFICIAL	5/22/97	[Signature]
WATER & SEWER		
HEALTH DEPT.	5/22/97	Mark E. Pitkin
FIRE PROTECTION		
STORM WATER MGMT	5/22/97 2:30 PM	11182644

IMPORTANT: PLEASE SHOW ZIP CODES AND AREA CODES WHEREVER REQUIRED.

20 CK# 1233

APPROVED _____ DATE _____

Distribution of Copies:
White - Building Official
Green - Planning & Zoning
Yellow - Engineering
Pink - Health Dept.
Gold - S.H.A.



BROADLEAF COURT

Lot 15 Cattail Creek

C1 1279 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. 3-8 ON ALL CARDS)

COUNTY NUMBER A# 43259

DATE RECEIVED

DATE WELL COMPLETED

Depth of Well 135

PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-08-1138

OWNER: SYCAMORE VALLEY PARTNERSHIP last name: BROAD LEAF COURT first name: GLENELEG TOWN: SYCAMORE VALLEY SECTION: 1 LOT: 19

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, MIKA, Sand Stone, MIKA, Sand Stone, MIKA, Sand Stone, MIKA.

GROUTING RECORD WELL HAS BEEN GROUTED (Yes Y No N) TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE CLAY BC NO. OF BAGS 7 NO. OF POUNDS 700 GALLONS OF WATER 42 DEPTH OF GROUT SEAL (to nearest foot) from 0 to 25 ft.

CASING RECORD casing types insert appropriate code below ST CO STEEL CONCRETE PL OT PLASTIC OTHER MAIN CASING TYPE PL Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 74

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.) 110 70 157

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. 1153 DRILLERS SIGNATURE Frank A. ... SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

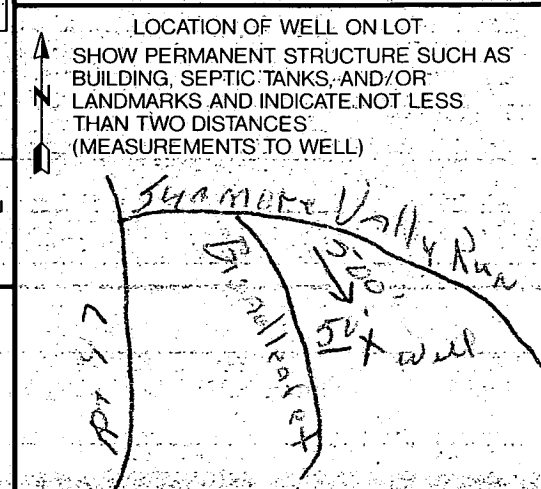
SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH) from to

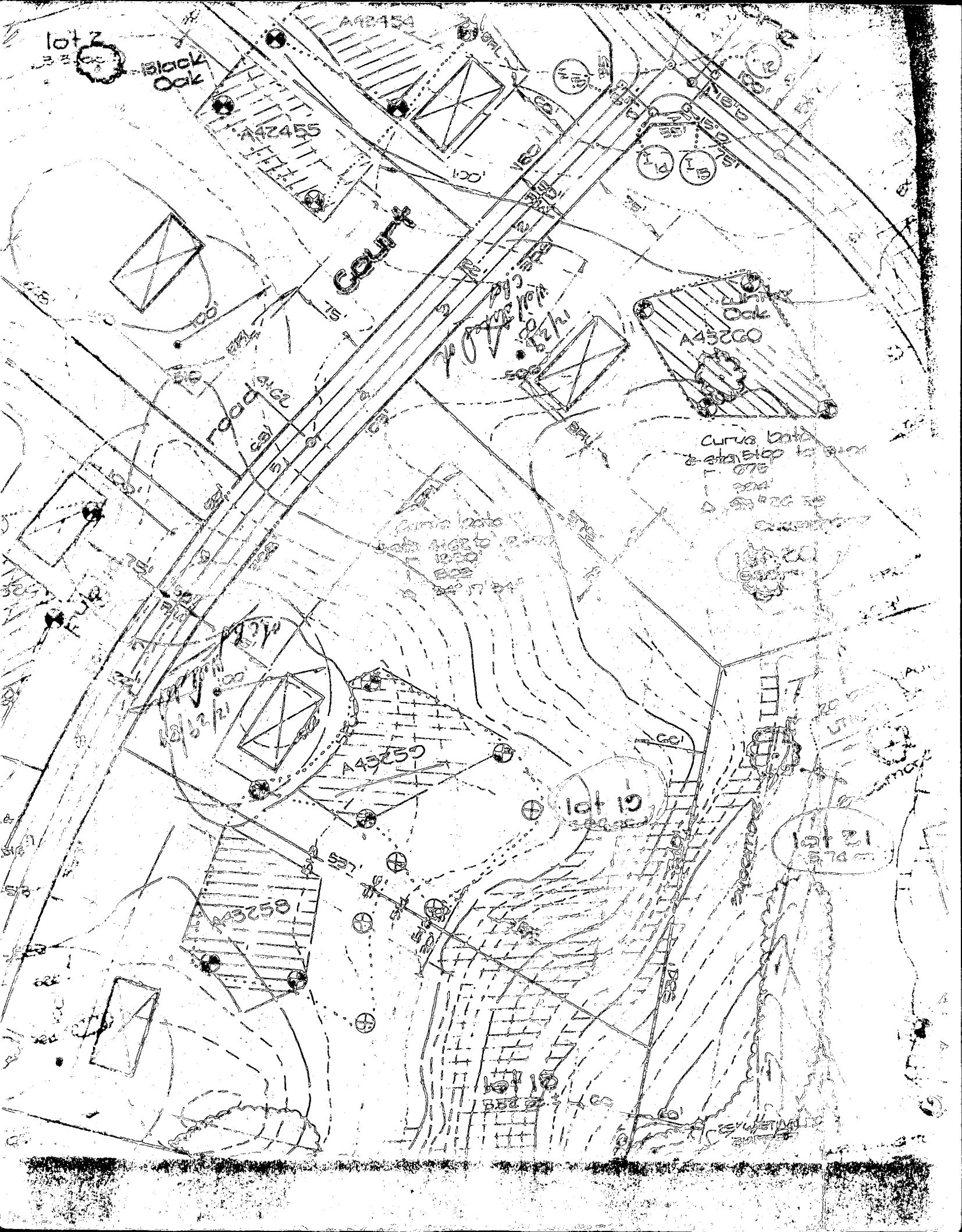
GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

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

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 37 WHEN PUMPING 37 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) (- below) LAND SURFACE (nearest foot)





lot 2

Black Oak

court

road

lot 19

lot 21

A42455

A42454

A43260

A43250

A43254

Curva loto
Stop to

lot 18

B 1 **2195** SEQUENCE NO. (DP USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

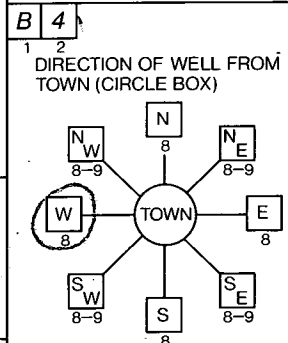
STATE OF MARYLAND
 PERMIT TO DRILL WELL
 please print or type

STATE PERMIT NUMBER
H0-88-11-38
 fill in this form completely

Date Received (APA) **11/07/89**
 OWNER INFORMATION
SYCAMORE VALLEY PART
 15 Last Name Owner First Name 34
2307 MAIN STREET
 36 Street or RFD 55
ELLCOTT CITY MD 21403
 57 Town 70 State 72 Zip 76

B 3 LOCATION OF WELL
HOWARD
 8 COUNTY 21
SYCAMORE VALLEY
 23 SUBDIVISION 42
 SECTION **1** LOT **19**
 44 46 48 50
GLENELG
 52 NEAREST TOWN 71
 MILES FROM TOWN (enter 0 if in town) **2** MI
 73 76 77 78

DRILLER INFORMATION
Frank Delph **453**
 Driller's Name 77 License No. 80
Frank Delph Well Drillers Inc.
 Firm Name
18234 Penn Shop Rd. Mt Airy, Md.
 Address
Frank Delph **10/27/89**
 Signature Date



Broad Leaf Ct
 11 NEAR WHAT ROAD 30
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 NORTH N
 WEST W
 EAST E
 SOUTH S
 DISTANCE FROM ROAD **75** FT or MI
 34 37 38 39

B 2 WELL INFORMATION
 APPROX. PUMPING RATE (GAL. PER MIN.) **5**
 8 12
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **500**
 14 20

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)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
HOWARD **A#43259**
 COUNTY NAME COUNTY NO.
 STATE SIGNATURE _____ INSERT S
 DATE ISSUED **12/29/89** **Charles Ryan** **12/29/90**
 43 48 CO SIGNATURE EXP. DATE
 NORTH GRID **523000** EAST GRID **079000**
 50 55 57 63

APPROXIMATE DEPTH OF WELL **200** FEET
 24 28

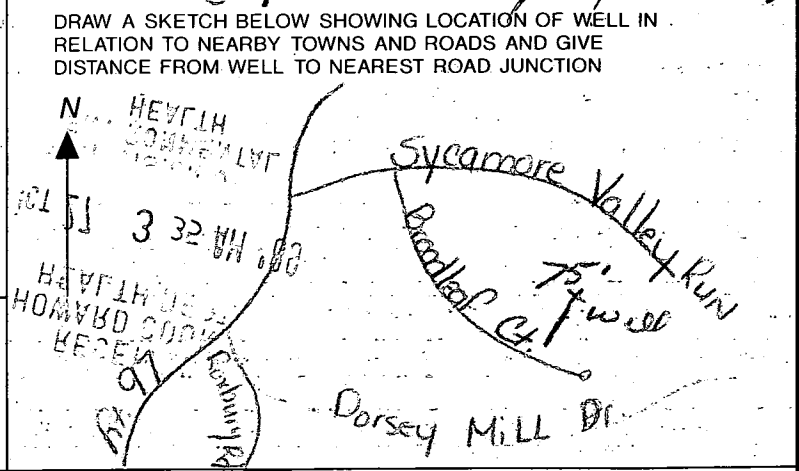
APPROXIMATE DIAMETER OF WELL **6** INCH.
 NEAREST INCH.

METHOD OF DRILLING (circle one)
 BORED (or Augered) JETTED Jetted & DRIVEN
 30 AIR-ROTary AIR-Percussion ROTARY (Hydraulic Rotary)
 37 CABLE REVERSE-ROTary DRIVE-POINT
 other _____

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

 000 (Top on per driller)

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 _____ GAP _____
 54 63
 FORCE WRITE INITIALS IN BOX PERMIT No. **H0-88-11-38**
 67 68 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS

10/29/97
ANYTIME

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043
461-9933

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation X Replacement _____
Receipt # _____ Date 10-29-97
Name of Installer GLENN HASLAM T/A MADISON Telephone 301-680-4200
mechanical
License Number 6420
Certified Well Pump Installer _____ Well Driller _____ Registered Plumber X
Name of Property Owner Joe P. Cooke Telephone 410-792-0862
Subdivision CATTAIL CREEK Lot # 19 Well Tag # _____
Site Address 3609 BROADLEAF CT

Pump Motor Pitless Adapter
1. Type a. Deep well jet _____ 1. Horsepower 1.5 1. Make PT 825
b. Shallow well jet _____ 2. RPM 3450 2. Model # American Granby
c. Submersible X 3. Voltage _____ 3. Depth 4'-0"
2. Make JACUZZI a. 110 _____
3. Model # 15S418-14B-S2 b. 220 X
4. Capacity 18 GPM
5. Pump exceeds well capacity Yes _____ No _____
6. If Yes, is low pressure cutoff switch installed? Yes X No _____
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors X Cable guards X Other _____

Tank Piping Well data
1. Capacity 119 1. Type PLASTIC 1. Depth _____ ft.
2. Pressure relief valve? YES 2. Size 1 1/4" 2. Yield _____ GPM
3. NSF and/or BOCA Code approved YES 3. Static water level _____ ft.
4. Depth of supply line 4'-0" 4. Will water supply be disinfected by installer? _____
10/30/97 well line, p.a. 3.5' b.g. well casing 10" + a.g. 2pc cap installed. casing repaired 3.5' piece OK to cover. (X)

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: _____

Date: 10-29-97

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

HARR DRILLING CO. TEL: 410-360-0784 Jan 26, 98 10:51 AM 001 1.01

G. EDGAR HARR SONS' CORP.

SINCE 1911

12047 FALLS ROAD
COCKEYSVILLE, MD. 21030
(301) 252-4588

Doughoregan Homes Inc
2808 Brian Court
Ellicott City, MD 21043
Attn: Sean Carney

January 26, 1998

Mr. Carney:

We have performed the inspection of the well casing on your lot in Cattail Creek that you requested. We could not find any breaks in the well casing, and the grout seal appeared to be intact. The pitless adapter did not appear to be leaking. If you need further assistance, give us a call.

Sincerely,



Michael Isom
Vice President

1/26/98 Received @ 10:15 a.m.± from Sean Carney. DKS
1/27/98 9:30 a.m. spoke to Sean Carney - I told him that
it would be OK to proceed w/ installation of
UV system and forward test results to us. (DKS)



WELL DRILLING CONTRACTORS • PUMP INSTALLATION & REPAIR



resides in the apt sec 19/29/97
RESOLVED
D.K.S.
dig casing - surrounding



to get dig as possible dig down to address
if thicker it will add dig
dig 2' below pitless to check ground

HOWARD COUNTY HEALTH DEPARTMENT

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

September 25, 1997

Mr. Blase Cooke
12159 Mt. Albert Court
Ellicott City, Maryland 21042

RE: Cattail Creek Country Club, Lot #19
3609 Broadleaf Court
Condition of existing well casing

Dear Mr. Cooke:

I conducted an inspection of the septic system installation at the above referenced property September 22, 1997. At that time, I found that the plastic well casing is broken off at grade. The well tag that identifies the well is not attached to the well casing.

Due to the possibility of structural damage to the well, the well should be inspected by a licensed well driller to determine the extent of the damage. If the well casing is found to be repairable, the repair work should be performed by a licensed well driller. According to COMAR, the well casing must terminate at least 8 inches above final grade. It is requested that the well driller contact this office for inspection once the well casing has been repaired.

If the well casing is found to be beyond repair, then a licensed well driller should abandon and seal the existing well and submit an application to drill a replacement well on the property.

Please be advised that this office cannot issue a Certificate-of-Potability for the property until this problem is corrected.

Thank you in advance for your prompt attention to this important matter. If you have any questions or concerns, please do not hesitate to call me at (410) 313-2640.

Sincerely,

Donna K. Spee
Donna K. Spee, R.S.
Water and Sewerage Program

D.K.S.
cc: Dougheregan Homes - Sean Carney file
not enough to have persistent contour depth seal
work casing
may not be

combo of all those factors

well is deeper than bottom of casing, located at records
D.K.S. 13