

2/5/90
2/6/90 CATS
2/27/90
P.M.
R.M.

2/5/90 (1) P.C.O.
C.B.C.

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

DISTRICT 5th

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

05-411440

DATE 2/20/90

INDEXED

DATE SYSTEM APPROVED 2/27/90

INSPECTOR M. Rittken

Jack Fyock

IS PERMITTED TO INSTALL ALTER

ADDRESS _____ PHONE 988-9270

SUBDIVISION Chapel Woods Mallan Rea Sub ROAD 11811 Chapel Woods Court LOT 1

PROPERTY OWNER Bruce W. Crewell Jim GARRETT

ADDRESS _____

~~IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 25%.~~

GARBAGE GRINDER YES NO

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 210 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 4 1/2 feet below original grade. Bottom maximum depth 8 1/2 feet below original grade. Effective area begins at 4 1/2 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Place the distribution box 10 feet from the left lot line and 140 feet from the lot corner at the end of the pipestem access (intersection of 205' and 398' lot lines). Run trenches on contour toward right side of lot.

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

***** - SEPTIC SYSTEM TO BE INSTALLED PRIOR TO HOUSE CONSTRUCTION (FOOTING INSPECTION)

PLANS APPROVED BY C. Williams DATE 1/22/90

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

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 TRENCHES ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCHES

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 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 PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED

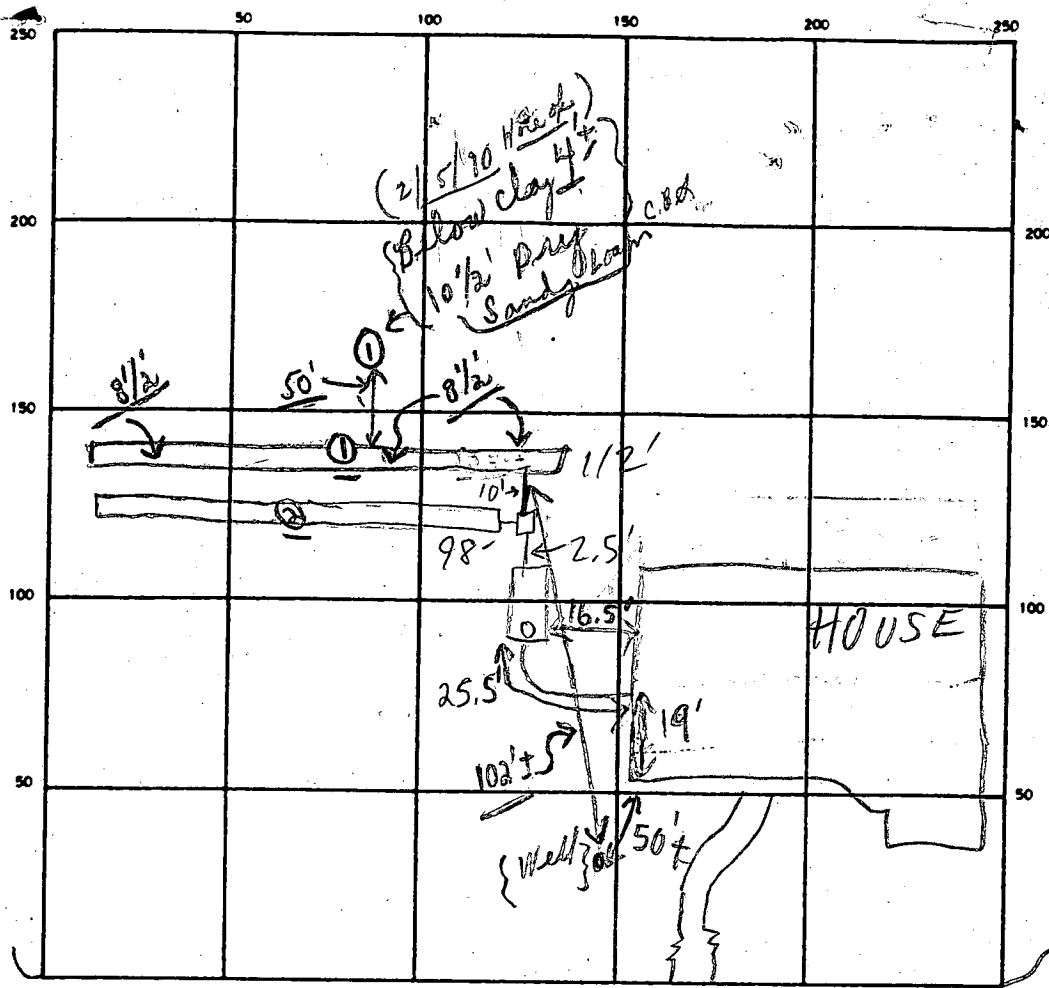
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

BLDG. PERMIT SIGNED AND RETURNED 2/29/90
Serial # 34487 - Garage
BA-92-37
to allow a 3rd garage
2 car garage siding

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

43536



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

CHAPEL WOODS COURT

SEPTIC TANK LEVEL 1250 GAL - OK CLEANOUTS OK
 DISTRIBUTION BOX LEVEL OK - BAFFLE IN
 DRAIN FIELD/TILE FIELD DEPTH 8 1/2 FT. TRENCH WIDTH 2 FT. INLET DEPTH 4 1/2 FT.
 EFFECTIVE GRAVEL DEPTH 4 FT. TOTAL LENGTH 112' + 98' FT.
 NUMBER OF TRENCHES 2 ONE SIDEWALL AREA 448 + 392 SQ. FT.
 DRYWELL INSIDE DIAMETER 19 FT. EFFECTIVE DEPTH BELOW INLET 50' FT.
 ABSORBENT AREA 840 SQ. FT.

REMARKS A.M. 2/5/90 partial - ok for stone in #1 trench - only. 1 hole
50'+ below #1 trench - dig at 10 1/2'. c.B.d. 2/5/90 p.m.
(NOTE - NO HOUSE YET.) 2/5/90 #2 TRENCH (1) EXTENDED
TO 112' OK TO BACKFILL. TRENCH (2) DUG TO 60' MR
2/5/90 #3 OK TO FINISH STONE IN (2) & COVER TRENCHES
2/6/90 OK TO COVER S.T. NO HOUSE CONN MR 2/27/90 OK TO COVER ALL MR

DATE SYSTEM APPROVED 2/27/90 INSPECTOR M. Riffin

3-8-89
1:30pm

APPLICATION

PERCOLATION TESTING

A 43536

P _____

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

DISTRICT 5TH

DATE Sept. 20, 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 Mattan Rea, Jr. Bruce W. Grewell - 301-740-4126

ADDRESS 1 1/2 miles on Miles, Route 1, Box 185 PHONE 820-7641

Easton, Md. 21601 UNKNOWN

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Rea property LOT NO. Lot 1

ROAD AND DESCRIPTION West side of Chapel Woods Ct @ End of
Cal. Co. Sec. 11811 Chapel Woods Court

TAX MAP 29 PARCEL # 36

SIZE OF LOT 3.00 Acres⁺ TYPE BLDG. S.F.D.
(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.

Dennis M. Bush
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

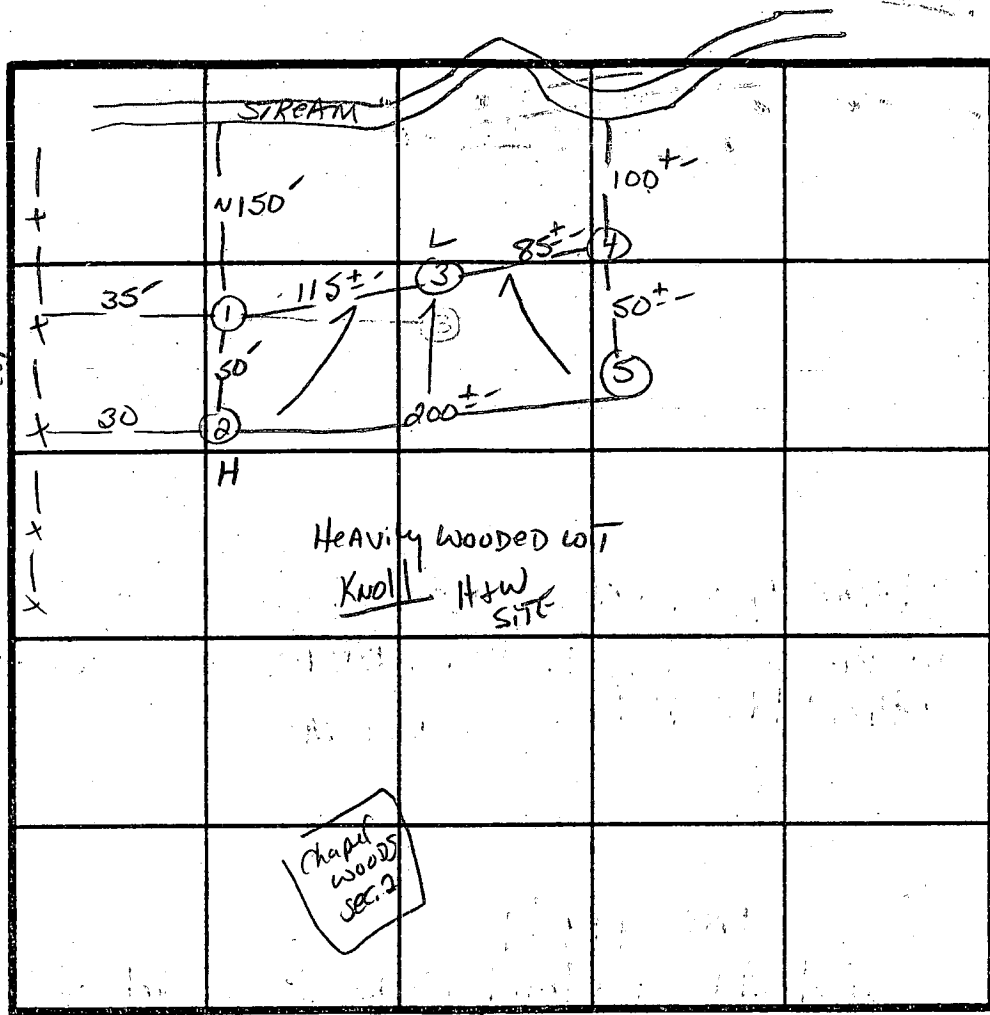
REASONS FOR REJECTION OR HOLDING 3-8-89 Perc Satisfactory - Hold for Subd. Plat. S. Abnd

BDDG. PERMIT SIGNED
AND RETURNED 1/22/90
Serial # 30769
SFD

THIS IS NOT A PERMIT

SOIL PROFILE

0	A1-3
3'	RED BROWN SILTY CLAY LOAM 90% Frag
4.5'	Red Yellow Silt LOAM <100% Frag
5.5'	Yellow BR Silt LOAM <10% Frag
12.5'	



PERC 10 min
210 #/BR
INLET 4.5'
BOTTOM 8.5'

Hole #4 used
AS common hole
FOR LOT #1+2

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
3/8/89	1S 1V	4.0' 12.5'	12:48	1:02	1:02	1:23	21min
	2S 2V	5.0' 12.0'	12:56	1:09	1:09	1:20	11min
	3V	12.0'	SAMP AS #1				
	4S 4V	4.0' 12.0'	1:02	1:03	1:03	1:06	3min
	5S 5V	5.0' 12.5'	1:07	1:08	1:08	1:12	4min

REMARKS Holes Per STAKE APPROX TO PLAT

TYPE OF SOIL Chester loam - Chester Gravelly loam

TESTED BY S. Abel ALSO PRESENT J. Flock

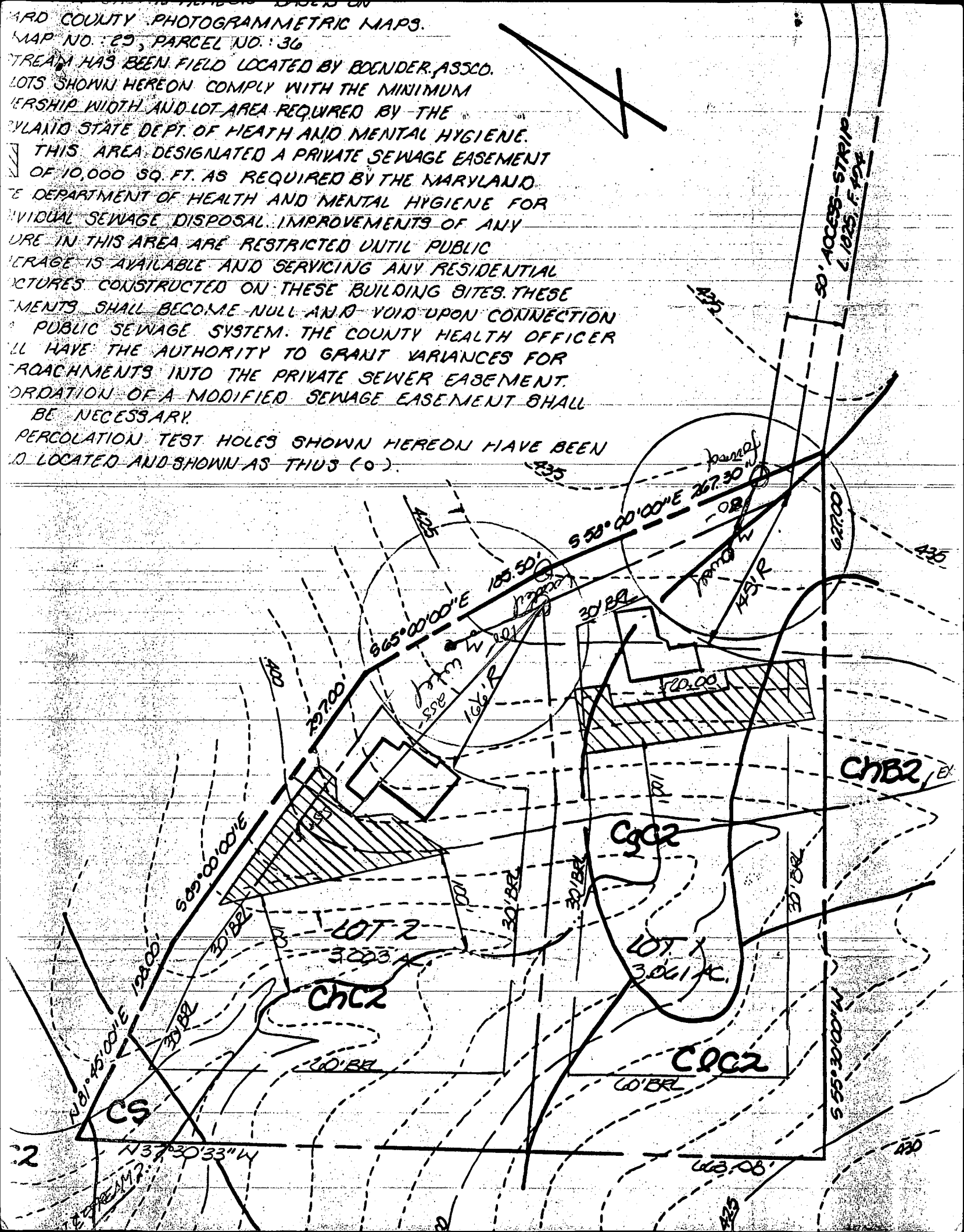
EH-12-1079

MARYLAND COUNTY PHOTOGRAMMETRIC MAPS.
 MAP NO. 29, PARCEL NO. 36

STREAM HAS BEEN FIELD LOCATED BY BENDER, ASSO.
 LOTS SHOWN HEREON COMPLY WITH THE MINIMUM
 RIVERSHIP WIDTH AND LOT AREA REQUIRED BY THE
 MARYLAND STATE DEPT. OF HEALTH AND MENTAL HYGIENE.

THIS AREA DESIGNATED A PRIVATE SEWAGE EASEMENT
 OF 10,000 SQ. FT. AS REQUIRED BY THE MARYLAND
 DEPARTMENT OF HEALTH AND MENTAL HYGIENE FOR
 INDIVIDUAL SEWAGE DISPOSAL IMPROVEMENTS OF ANY
 NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC
 SEWERAGE IS AVAILABLE AND SERVICING ANY RESIDENTIAL
 STRUCTURES CONSTRUCTED ON THESE BUILDING SITES. THESE
 RESTRICTIONS SHALL BECOME NULL AND VOID UPON CONNECTION
 TO A PUBLIC SEWAGE SYSTEM. THE COUNTY HEALTH OFFICER
 SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR
 ATTACHMENTS INTO THE PRIVATE SEWER EASEMENT.
 MODIFICATION OF A MODIFIED SEWAGE EASEMENT SHALL
 BE NECESSARY.

PERCOLATION TEST HOLES SHOWN HEREON HAVE BEEN
 FIELD LOCATED AND SHOWN AS THUS (O).



GENERAL NOTES

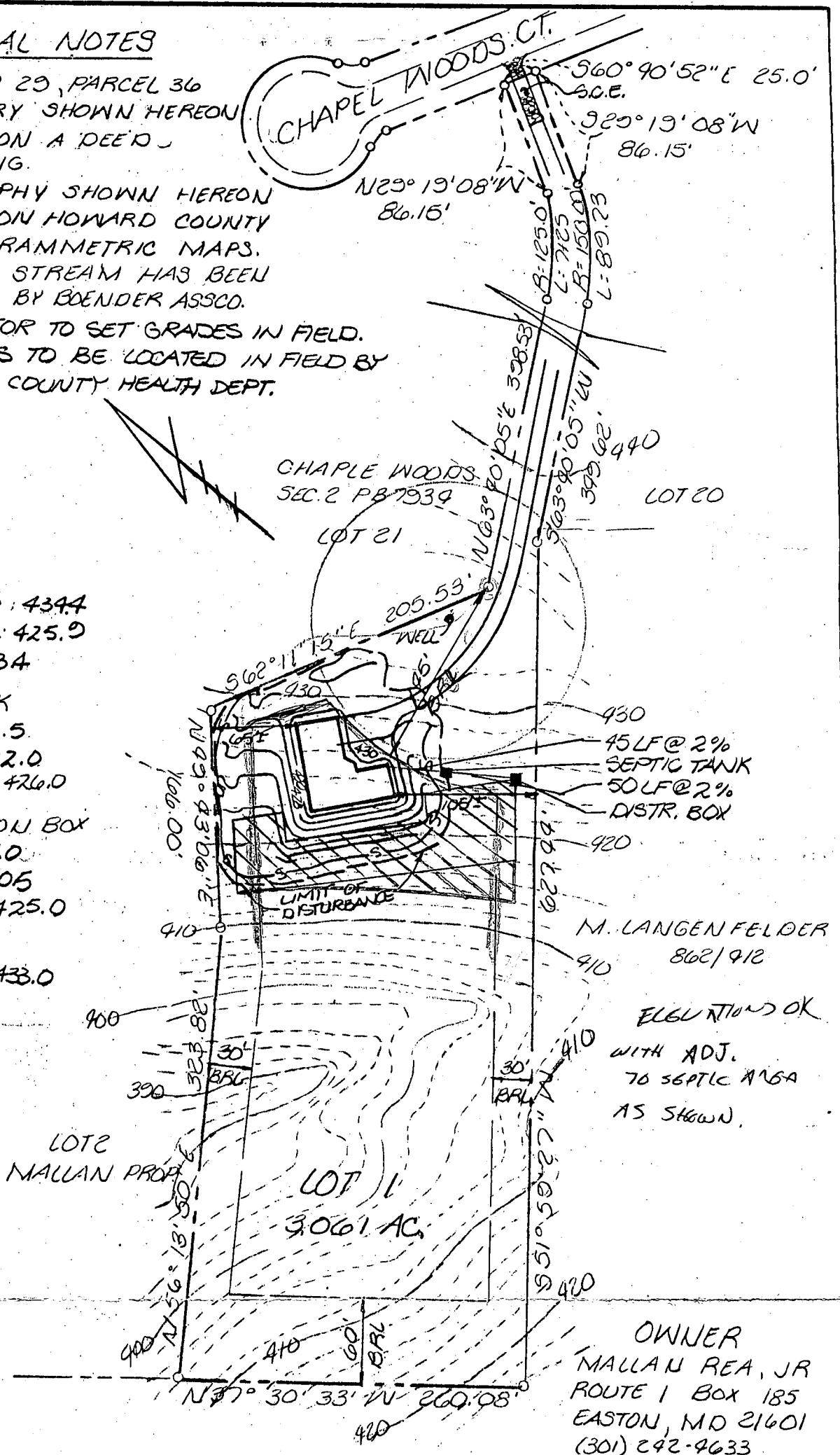
1. TAX MAP 29, PARCEL 36
2. BOUNDARY SHOWN HEREON BASED ON A DEED PLOTTING.
3. TOPOGRAPHY SHOWN HEREON BASED ON HOWARD COUNTY PHOTOGRAMMETRIC MAPS.
4. EXISTING STREAM HAS BEEN LOCATED BY BOENDER ASSO.
5. CONTRACTOR TO SET GRADES IN FIELD.
6. TRENCHES TO BE LOCATED IN FIELD BY HOWARD COUNTY HEALTH DEPT.

HOUSE
 FIRST FLOOR: 434.4
 BASEMENT: 425.9
 INV. OUT: 423.4

SEPTIC TANK
 INV. IN: 422.5
 INV. OUT: 422.0
 EX. GRADE: 426.0

DISTRIBUTION BOX
 INV. IN: 421.0
 INV. OUT: 420.5
 EX. GRADE: 425.0

WELL
 EX. GRADE: 433.0



M. LANGENFELDER
 862/912

ELEVATIONS OK
 WITH ADJ.
 TO SEPTIC AREA
 AS SHOWN.

OWNER
 MALLAN REA, JR
 ROUTE 1 BOX 185
 EASTON, MD 21601
 (301) 242-4633

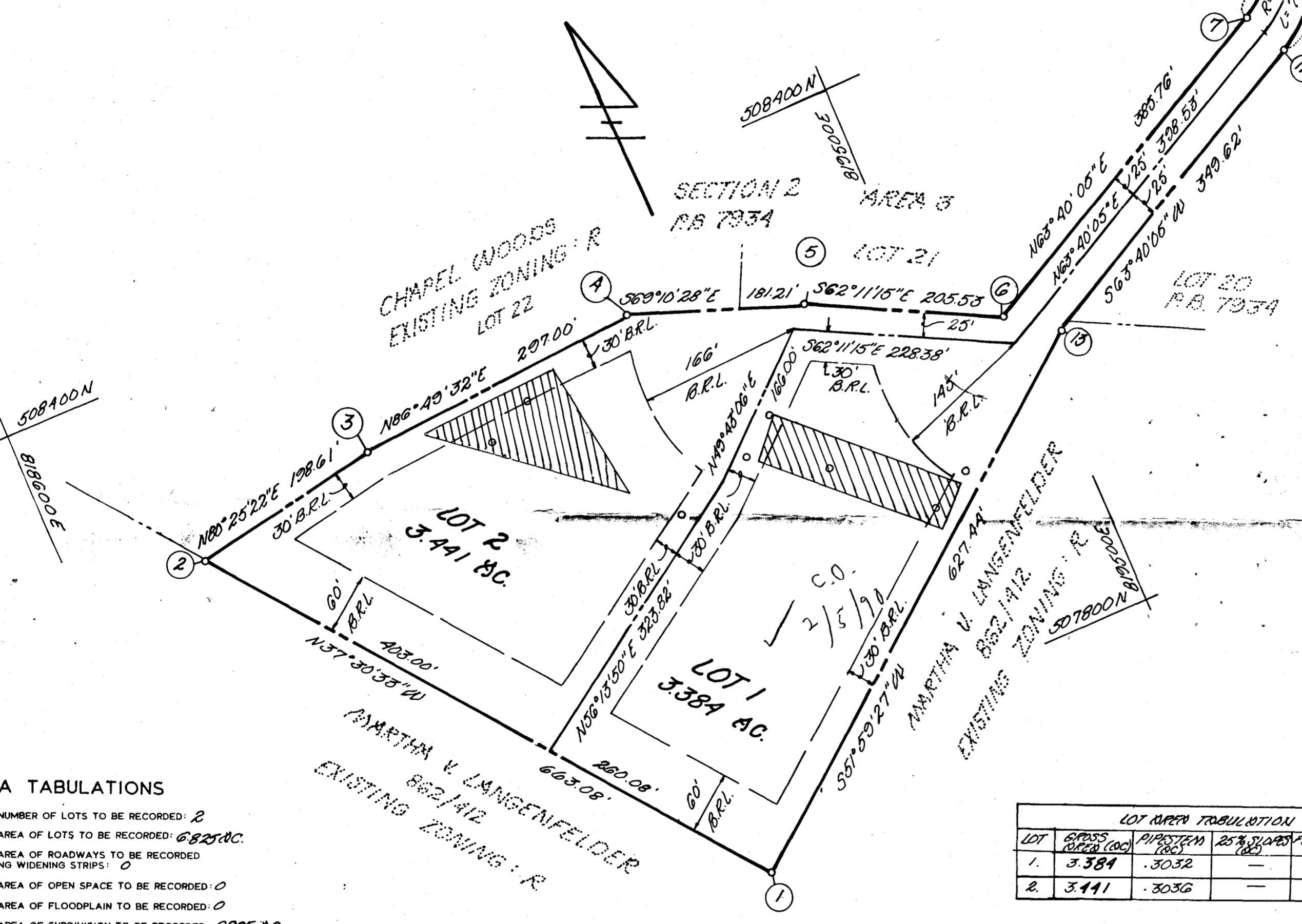
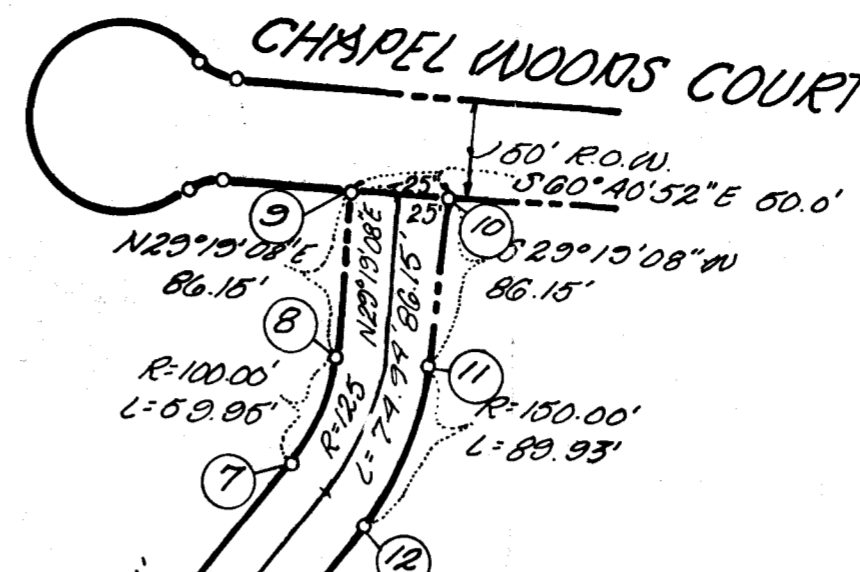
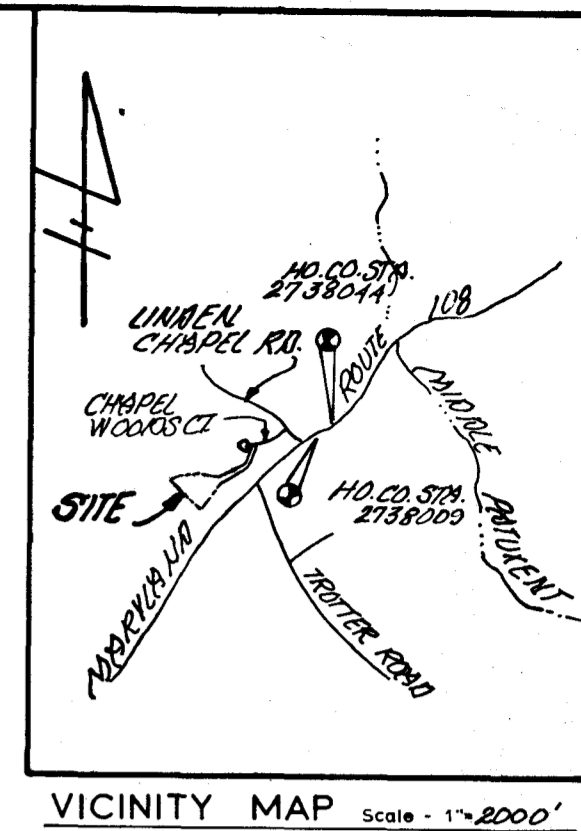
TITLE: GRADING STUDY				
PROJECT: MALLAN'S PROPERTY				
LOCATION: 5th ELECTION DISTRICT HOWARD CO., MD.				
SCALE: 1"=100'	DESIGNED BY: J.C.O.	DRAWN BY: BAK/JCO	CHECKED BY: DMR	DATE: JULY, 1989
FIELD BOOK: —	PAGE NO.: —	JOB NO.: 8959	DRAWING NO.: 1 OF 1	

boender associates
 inc.
 consulting engineers
 land surveyors
 land planners

3230 BETHANY LANE
 ELLICOTT CITY, MD. 21043
 (301) 465-7777

COORDINATE SCHEDULE		
NO.	NORTH	EAST
1	507705.50	819138.91
2	508231.49	818755.17
3	508262.53	818931.00
4	508280.78	819227.55
5	508216.55	819376.72
6	508120.64	819578.72
7	508291.75	819924.45
8	508332.41	819967.27
9	508407.52	820009.47
10	508383.04	820053.06
11	508307.93	820010.88
12	508246.74	819946.63
13	508091.87	819633.28

CURVE DATA						
NO.	RADIUS	LENGTH	DELTA	TAN.	CHORD	CHORD BEARS
7-8	100.00	59.25	34.2035	30.906	59.05	N16°29'36"E
11-12	150.00	89.93	34.2035	46.369	88.58	S46°29'36"W



- GENERAL NOTES**
- 1) Tax Map - 29, Parcel - 36
 - 2) Deed Reference - 558/341 AND 1825/494
 - 3) Coordinates shown hereon are based on Maryland State Plane coordinate system, Howard County control station.
 - 4) Subject property zoned - R, per 8-02-85 Comprehensive Zoning Plan.
 - 5) • - Designates iron pin set.
 - 6) THE LOTS SHOWN HEREON COMPLY WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREA REQUIRED BY THE MARYLAND STATE DEPT. OF HEALTH AND MENTAL HYGIENE
 - 7) THIS AREA DESIGNATED A PRIVATE SEWERAGE EASEMENT OF MIN. 10,000 S.F. AS REQUIRED BY THE MARYLAND STATE DEPT. OF HEALTH AND MENTAL HYGIENE FOR INDIVIDUAL SEWAGE DISPOSAL IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWERAGE IS AVAILABLE AND SERVICING ANY RESIDENTIAL STRUCTURES CONSTRUCTED ON THESE BUILDING SITES THESE EASEMENTS SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWER SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENTS INTO THE PRIVATE SEWER EASEMENT. RECONSTRUCTION OF MODIFIED SEWER EASEMENT SHALL NOT BE NECESSARY.
 - 8) ALL RECONSTRUCTION TEST HOLES SHOWN HEREON HAVE BEEN FIELD LOCATED AND SHOWN AS THIS (o).
 - 9) FOR FLAG OR PIPESTEM LOTS, BEFORE COLLECTION, SNOW REMOVAL AND ROAD MAINTENANCE ARE PROVIDED TO THE JUNCTION OF THE FLAG OR PIPESTEM AND THE ROAD R/W LINE, AND NOT ONTO THE FLAG OR PIPESTEM LOT DRIVEWAY.
 - 10) FLAG OR PIPESTEM LOTS SHALL NOT BE FURTHER SUBDIVIDED INTO LOTS ACCOMMODATING ADDITIONAL RESIDENCES UNLESS A PUBLIC ROAD CAN BE CONSTRUCTED ACCORDING TO COUNTY STANDARDS ON A MINIMUM FIFTY (50) FT. R/W TO BE DEDICATED TO THE COUNTY.

AREA TABULATIONS

TOTAL NUMBER OF LOTS TO BE RECORDED: 2
 TOTAL AREA OF LOTS TO BE RECORDED: 6825.00.
 TOTAL AREA OF ROADWAYS TO BE RECORDED INCLUDING WIDENING STRIPS: 0
 TOTAL AREA OF OPEN SPACE TO BE RECORDED: 0
 TOTAL AREA OF FLOODPLAIN TO BE RECORDED: 0
 TOTAL AREA OF SUBDIVISION TO BE RECORDED: 6825.00.

LOT AREA TABULATION CHART				
LOT	GROSS AREA (SQ. FT.)	PIPESTEM (SQ. FT.)	25% SLABS FLOODPLAIN (SQ. FT.)	NET AREA (SQ. FT.)
1.	3,384	30.32	-	3,081
2.	3,441	30.36	-	3,137

OWNER
 MALLAN REA, JR.
 ROUTE 1, BOX 185
 EASTON, MD 21601
 (301) 242-4638

APPROVED: FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS HOWARD COUNTY, MARYLAND

Joseph Boyle 7-24-89
 HOWARD COUNTY HEALTH OFFICER DATE

APPROVED: HOWARD COUNTY OFFICE OF PLANNING AND ZONING

Joseph Reuther 8/17/89
 PLANNING DIRECTOR DATE

APPROVED: FOR STORM DRAINAGE SYSTEMS AND PUBLIC ROADS, HOWARD COUNTY DEPARTMENT OF PUBLIC WORKS

James M. Shum 7/28/89
 DIRECTOR DATE

OWNER'S STATEMENT

We, **MALLAN REA, JR.** and **MAJORIE B. REA**, owners of the property shown and described hereon, hereby adopt this plan of subdivision, and in consideration of the approval of this final plat by the Office of Planning and Zoning, establish the minimum building restriction lines and grant unto Howard County, Maryland, its successors and assigns, 1) the right to lay, construct and maintain sewers, drains, water pipes and other municipal utilities and services, in and under all roads and street rights-of-way and the specific easement areas shown hereon, 2) the right to require dedication for public use, the beds of the streets and/or roads and floodplains and open space where applicable, and for good and other valuable consideration, hereby grant the right and option to Howard County to acquire the fee simple title to the beds of the streets and/or roads and floodplains, storm drainage facilities and open space where applicable, 3) the right to require dedication of waterway and drainage easements for the specific purpose of their construction, repair and maintenance, and 4) that no building or similar structure of any kind shall be erected on or over the said easements and rights-of-way.

Witness my/our hands this 20th day of APRIL, 1989

Mallan M. W. Rea, Jr. *Majorie B. Rea*
 Witness Witness

SURVEYOR'S CERTIFICATE

I hereby certify that the final plat shown hereon is correct, that it is the true and correct subdivision of all the therein parcel of the lands conveyed by **EUSE M. REA TO MALLAN M. W. REA, JR. AND MAJORIE B. REA, HIS WIFE** by deed dated MAY 16, 1971 and recorded in the Land Records of Howard County, Maryland in Liber 568 at Folio 341 AND (2) ALL OF A PARCEL OF LAND CONVEYED BY **HEINRICH REDEVELOPMENT CORPORATION TO MALLAN M. W. REA, JR. AND MAJORIE B. REA, HIS WIFE**, BY DEED DATED MAY 19, 1988 AND RECORDED AMONG THE RECENT SAID LAND RECORDS IN LIBER 1825 AT FOLIO 494 AND THAT ALL MONUMENTS ARE IN PLACE AS SHOWN IN ACCORDANCE WITH THE ANNOTATED CODE OF MARYLAND, AS AMENDED.

William G. Harper 4-14-89
 WILLIAM G. HARPER, PROFESSIONAL LAND SURVEYOR, M.D. NO. 2436

RECORDED AS PLAT 8787 ON 8/21/89 AMONG THE LAND RECORDS OF HOWARD COUNTY, MD.

Signed **MALLAN'S PROPERTY** file Copy
LOTS 1 AND 2

boender associates inc.
 consulting engineers
 land surveyors
 land planners

TAX MAP - 29
 TAX MAP PARCEL NO. - 36
 EX. ZONING - R
 ELECTION DISTRICT - 5th
 HOWARD COUNTY, MARYLAND
 SCALE - 1"=100'
 DATE - APRIL 1989
 O. P. & Z. FILE NO. -

COURTHOUSE SQUARE
 3565 ELLICOTT MILLS DRIVE
 ELLICOTT CITY, MD. 21043
 (301) 465-7777

B 1 **2350** SEQUENCE NO. (DP. USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

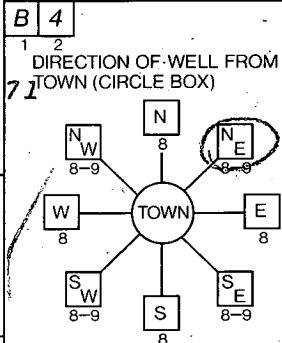
STATE OF MARYLAND
 PERMIT TO DRILL WELL
 please print or type

STATE PERMIT NUMBER
40-88-0998 ✓
 fill in this form completely

Date Received (APA) **080189**
 OWNER INFORMATION
CONVENTRY CONSTRUCT
 Last Name Owner First Name
9891 BROKENLAND PKWY
 Street or RFD
COLUMBIA MD 21046
 Town State Zip

B 3 LOCATION OF WELL **K-14809**
Howard COUNTY
CHAPEL WOODS SUBDIVISION
 SECTION **1** LOT **1**
CLARKSVILLE NEAREST TOWN
 MILES FROM TOWN (enter 0 if in town) **2** MI

DRILLER INFORMATION
George P. Easterday Driller's Name
L. Franklin Easterday, Inc. Firm Name
9265 Brown Church Rd., Mt. Airy, Md. 21717 Address
George P. Easterday Signature **7/31/89** Date



Chapel Woods Ct NEAR WHAT ROAD
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
325 DISTANCE FROM ROAD
 ENTER FT or MI **FT**

B 2 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)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
Howard COUNTY NAME **A-43536** COUNTY NO.
 STATE SIGNATURE _____ DATE ISSUED **081489**
 CO SIGNATURE **Paul Abel** EXP. DATE **02-13-90**
 NORTH GRID **508000** EAST GRID **0819000**

APPROXIMATE DEPTH OF WELL **200** FEET

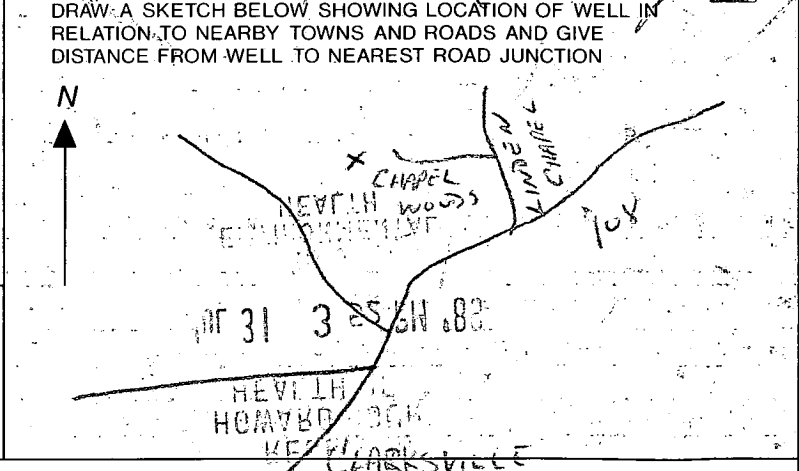
APPROXIMATE DIAMETER OF WELL **6** INCH

METHOD OF DRILLING (circle one)
 BORED (or Augered) JETTED Jetted & DRIVEN
 AIR-ROTARY AIR-PERCussion. ROTARY (Hydraulic Rotary)
 CABLE REVerse-ROTary Drive-POINT

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

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

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**
 FORCE **SA** WRITE INITIALS IN BOX PERMIT No. **40-88-0998**

SPECIAL CONDITIONS

1121 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-43536

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

8 13

092989

22 400 26 (TO NEAREST FOOT)

28 29 30 31 32 33 34 35 36 37 H0-88-0998

OWNER COUNTRY CONSTRUCTION last name STREET OR RFD Chapel Woods Ct first name TOWN Clarksville SUBDIVISION Mallon Prop (Chapel Woods) SECTION LOT 1

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: Top Soil (0-2), Br Shale (2-30), Sand Stone (30-53), Gray Mica (53-400). Includes handwritten note: 3 1/2 GPM.

GROUTING RECORD WELL HAS BEEN GROUTED (Y/N) TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE CLAY BC NO. OF BAGS 12 NO. OF POUNDS 1200 GALLONS OF WATER 60 DEPTH OF GROUT SEAL (to nearest foot) from 0 to 39 ft.

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

MAIN CASING TYPE S+ Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 43

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

Table with columns: EACH CASING, DEPTH (nearest ft.), SCREEN. Rows for casing 1, 2, 3.

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. 40 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

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) 6 PUMPING RATE (gal. per min. to nearest gal.) 4 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 32 WHEN PUMPING 272 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) See Plat

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 Replacement
Name of Installer Crouse P & H License Number 4450
Certified Well Pump Installer Well Driller Registered Plumber
Name of Property Owner Bruce Hewell Telephone 740-4126
Subdivision Mallan's Prop. Lot # 1 Well Tag # - - -
Site Address 11811 Chapel Woods Ct.

Receipt # 45609
Date 2/27/90
Telephone 531-3311

Pump	Motor	Pitless Adapter
1. Type	1. Horsepower _____	1. Make _____
a. Deep well jet _____	2. RPM _____	2. Model # _____
b. Shallow well jet _____	3. Voltage _____	3. Depth _____
c. Submersible <input checked="" type="checkbox"/> _____	a. 110 _____	
2. Make <u>Gould's</u>	b. 220 _____	
3. Model # _____		
4. Capacity _____ GPM		
5. Pump exceeds well capacity Yes _____ No <input checked="" type="checkbox"/>		
6. If Yes, is low pressure cutoff switch installed? Yes <input checked="" type="checkbox"/> No _____		
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors _____ Cable guards _____ Other <input checked="" type="checkbox"/>		
Tank	Piping	Well data
1. Capacity <u>100 gal.</u>	1. Type <u>Plastic</u>	1. Depth _____ ft.
2. Pressure relief valve? _____	2. Size <u>1"</u>	2. Yield _____ GPM
	3. NSF and/or BOCA Code approved _____	3. Static water level _____ ft.
	4. Depth of supply line <u>12"</u>	4. Will water supply be disinfected by installer? _____

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 Holstetter
Date: 2/27/90

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

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

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation
Replacement

Receipt # 46808
Date 2-11-91

Name of Installer Lester C. Simmons

Telephone 831-5170

License Number 307

Certified Well Pump Installer

Well Driller

Registered Plumber

Name of Property Owner Coventry Crest

Telephone 750-2000

Subdivision Chapelwood

Lot # 1

Well Tag # 40-88-0998

Site Address Chapelwood St

Pump

1. Type

- a. Deep well jet
b. Shallow well jet
c. Submersible

2. Make Goulds

3. Model # 5ES07422

4. Capacity 5 GPM

5. Pump exceeds well capacity Yes No

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

Motor

1. Horsepower 1/2
2. RPM 34-50
3. Voltage
a. 110
b. 220

Pitless Adapter

1. Make Martison
2. Model # B-10X
3. Depth 4

Tank

1. Capacity 32
2. Pressure relief valve? yes

Piping

1. Type
2. Size 1" NPT
3. NSF and/or BOCA Code approved yes
4. Depth of supply line 42

Well data

1. Depth 400 ft.
2. Yield 3+ GPM
3. Static water level 33 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: Lester C. Simmons

Date: 2-11-91

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

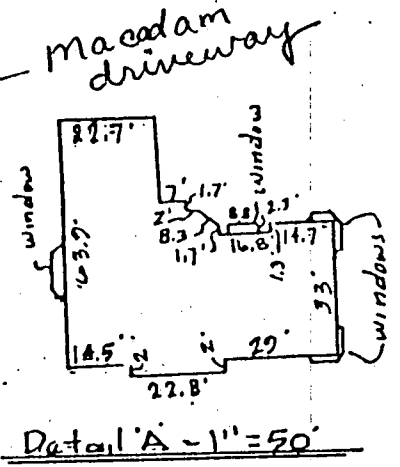
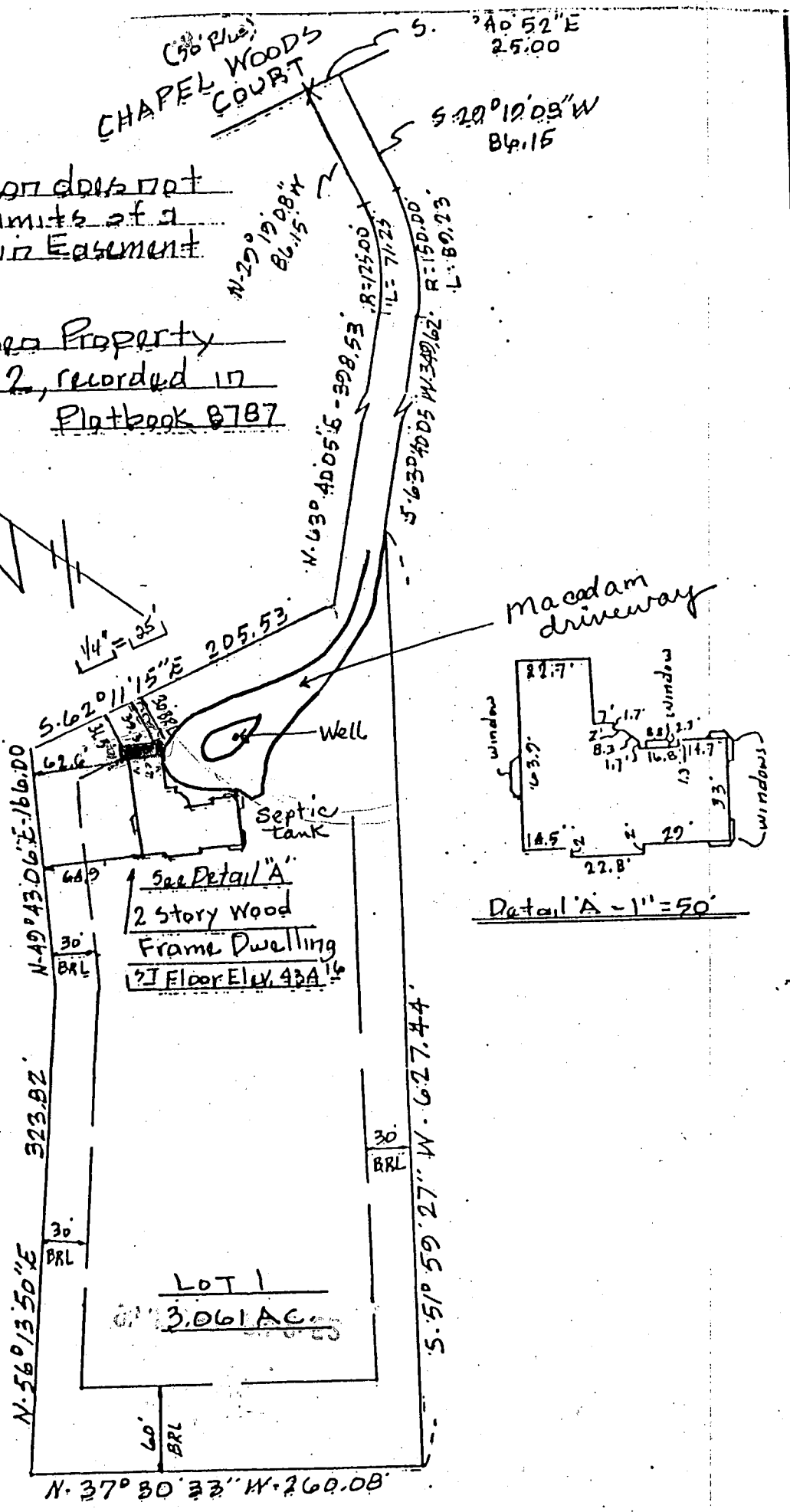
ALLER IS IN P. 11
HEALTH DEPT.
HOWARD COUNTY
RECEIVED

Plat "A"

The Lot shown hereon does not lie within the limits of a recorded Floodplain Easement.

Plat Reference - Bea Property Lot 1 and 2, recorded in Platbook 8787

6/2/94 proposed garage addition will have no impact to existing well or septic or to proceed.
A M Miller



Detail 'A' - 1" = 50'