

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 48520

A REPAIR

DISTRICT _____

DATE 9/18/92

DATE SYSTEM APPROVED 7/20/92

INSPECTOR BIT

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED

04-334663

Jack Fyock _____ IS PERMITTED TO INSTALL _____ ALTER X

ADDRESS _____ PHONE 988-9270

SUBDIVISION _____ LOT 28 ROAD 3275 Gwenlee Circle

PROPERTY OWNER Roy M. Richwein
3275 Gwenlee Circle

ADDRESS _____

SEPTIC TANK CAPACITY 1500 GALLONS

NUMBER OF BEDROOMS 5

125 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 107

REPAIR - PURPOSE - SEPTIC SYSTEM HAS FAILED.

Call for inspection when ground is opened so sanitarian can recommend repair. 7/14/92

7/20/92 TRENCH 12FT DEEP 2FT WIDE 6FT STANDING
INLET 6FT RUN TRENCH OFF OLD
DRY WELL BID

PLANS APPROVED BY _____ DATE _____

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**

48520

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 3rd

INDEXED

DATE 4/5/77

P 25563

A 18356

Costello Builders

IS PERMITTED TO INSTALL ALTER

ADDRESS Box 2201 Route 94, Woodbine, Md.

PHONE 442-2288

A SEWAGE DISPOSAL SYSTEM LOCATED AT _____

SUBDIVISION Gwenlee Estates

ROAD 3275 Gwenlee Circle

LOT 2, Blk. D, Sec. 2

PROPERTY OWNER W. L. Boring Ray Richwein

ADDRESS Burntwoods Road, Glenwood, Md.

SPECIFICATIONS 3 bedrooms

DRAIN FIELD _____ DEPTH _____ FEET, BOTTOM AREA _____ SQ. FT.

SEEPAGE PITS _____ ABSORBENT SIDE-WALL AREA _____ SQ. FT.

SEPTIC TANK CAPACITY 1000 GALLONS

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 22% & TANK CAPACITY 50%.

OTHER DRY WELL AND TRENCH - Dry well to have 288 sq. ft. absorbent sidewall area. Inlet at 4 ft. and maximum depth 10 ft. below original grade. No more than 36 ft. from edge of Gwenlee Circle and 90 ft. from left lot line for location of dry well. Trench to be 27 ft. long; 132 sq. ft. sidewall area. Inlet at 4 ft. and maximum depth 10 ft. below original grade. Trench to run parallel to road. NOTE: CALL FOR INSPECTION OF TRENCH BEFORE PLACING STONE IN TRENCH. NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON. PERMIT VOID AFTER THREE 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 ACCEPTED. NOTE: IN NO CASE IS ANY DRY WELL TO EXCEED 15 FOOT IN DIAMETER.

PLANS APPROVED BY David J. O'Neill

DATE 2/22/76

FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

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

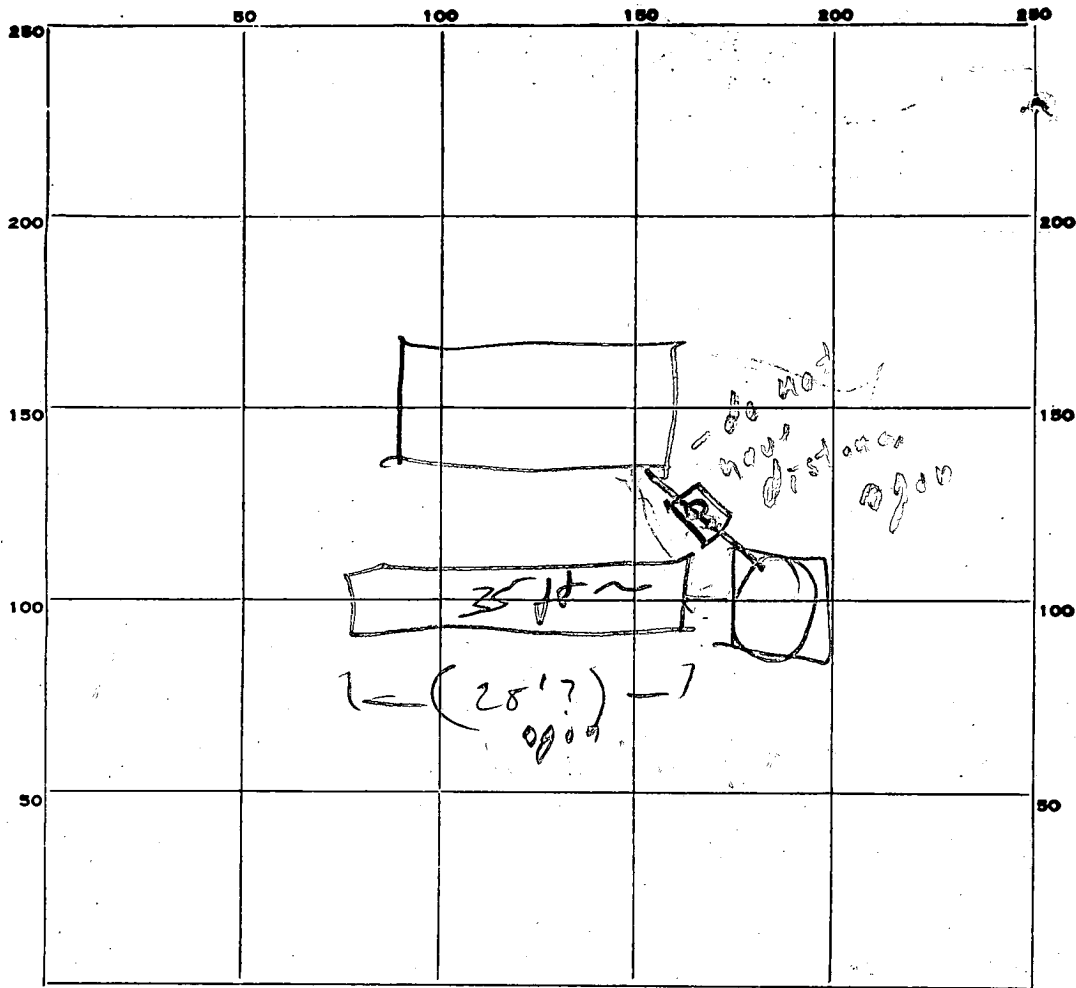
BLDG. PERMIT SIGNED AND RETURNED 6/1/83

Serial # 54117
Sunder

BLDG. PERMIT SIGNED AND RETURNED 8/20/81

Serial # 47449
Addition - basement

18356



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD

ROAD

SEPTIC TANK, LEVEL

CLEANOUTS 57 dw

DISTRIBUTION BOX, LEVEL

TILE FIELD, DEPTH 10 FT. TRENCH WIDTH 2 FT.

GRAVEL DEPTH _____ IN. TOTAL LENGTH 35 FT.

NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA 245

SEEPAGE PITS, INSIDE DIAMETER 59' FT. DEPTH BELOW INLET 7' FT.

ABSORBENT AREA 399 SQ. FT.

REMARKS AB43-77

DATE SYSTEM APPROVED

4/29/99

INSPECTOR

D/O [Signature]

APPLICATION

A _____

P _____

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DISTRICT 3

DATE 10/24/75

12/10/75 - 2nd

*12/19/75
9:30 (rain)*

(1/2 day only)

*4/13/76
2 PM - 2nd*

*12/11/75
9:30*

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 W. S. Boring

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

Combination of these lots pastored.

SUBDIVISION Quebec Estates LOT NO. 2, Bldg 10, Sec. 2

ROAD AND DESCRIPTION _____

SIZE OF LOT _____ TYPE BLDG. 3 Per 4
NUMBER OF BEDROOMS _____

IF NOT SINGLE RESIDENCE DESCRIBE _____

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

BLDG. PERMIT SIGNED AND RETURNED 4/1/77
Serial No. 31014

SIGNATURE OF APPLICANT 1st James Castillo

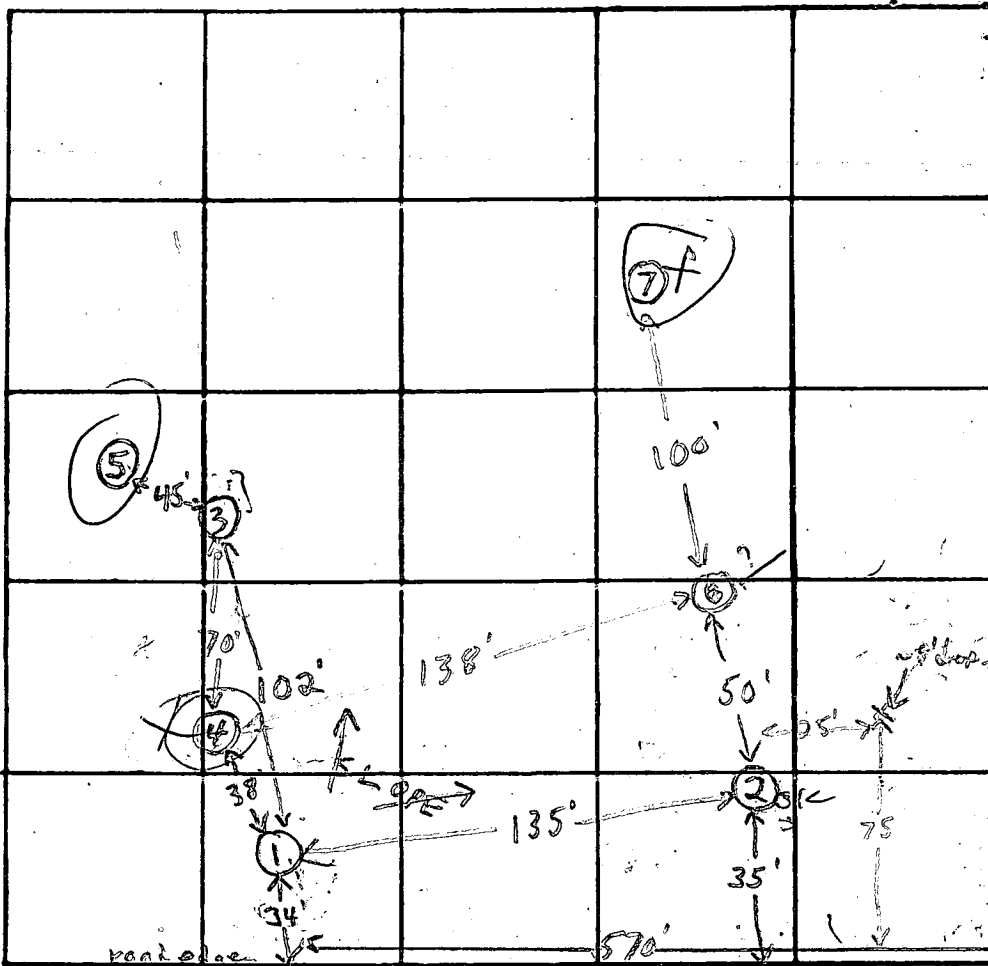
APPROVED BY Douglas Miller FOR Shallow Dry Well and trap DATE 2/22/80
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.
(Gwenlee Circle) Road

- a elev.
- ④ ~3' ↓ ①
 - ③ ~3' ↓ ②
 - ⑤ ~2' ↓ ③
 - ② ~6' ↓ ①
 - ⑥ ~3' ↓ ②
 - ⑦ ~4 1/2' ↓ ⑥

Cared Dr.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
10/24/75	1 high	5'	12:50	12:55	12:55	1:05	10 min	
	1A	12 1/2'	12:51	12:53	12:53	1:00	7 min	
	2	5'	1:29	1:38	1:38	1:59	20 min	
	2A	11'	1:29	1:36	1:36	1:51	15 min	
	3	4 1/2'	1:06	1:09	1:09	1:14	5 min	
	3A	11'	Water at 11' silty loam 3' → 11'					
	4	5'	1:21	1:35	1:35	2:07	32 min	
	4A	11'	1:20	1:35	1:35	1:57	22 min	
	5	10'	Water at 9' clayey to 4' silty loam below					
	6	5'	2:43	2:46	2:46	2:52	5 min	
	6A	11'	Water at 11' clayey to 4' silty loam 4' → 11'					
	7							
	7A	10'	Water at 10' clayey to 4' clayey loam & silty 4' → 10'					

REMARKS: mostly clayey-silt loam
 TYPE OF SOIL: silty loam below top 4' clay & clayey soil
 TESTED BY: F.S.
 ALSO PRESENT: Costello

APPLICATION

A _____

P _____

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DISTRICT _____

DATE _____

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 _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. _____

ROAD AND DESCRIPTION _____

SIZE OF LOT _____ TYPE BLDG. _____

NUMBER OF BEDROOMS _____

IF NOT SINGLE RESIDENCE DESCRIBE _____

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT _____

APPROVED BY _____ FOR _____ DATE _____

(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____

(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS 12/29/15 Test for water dept. in Spv 3 DATE 1/09/16

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

APPLICATION

A 18356

P _____

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DISTRICT 3

DATE April 18, 1973

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 W. L. Boring

ADDRESS Burntwoods Road PHONE 465-2483

PROPERTY LOCATION: Glenwood, Md.

SUBDIVISION Gwenlee Estates Sec. 1 LOT NO. 2, Blk. D, Sec. 12
26

ROAD AND DESCRIPTION Burntwoods Rd. west of Sharp Rd. (Road C)

SIZE OF LOT 150' x 300' ~~100' x 300'~~ 44,250 sq. ft. TYPE BLDG. single family dwelling
^{3 or 4}
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ John Boender

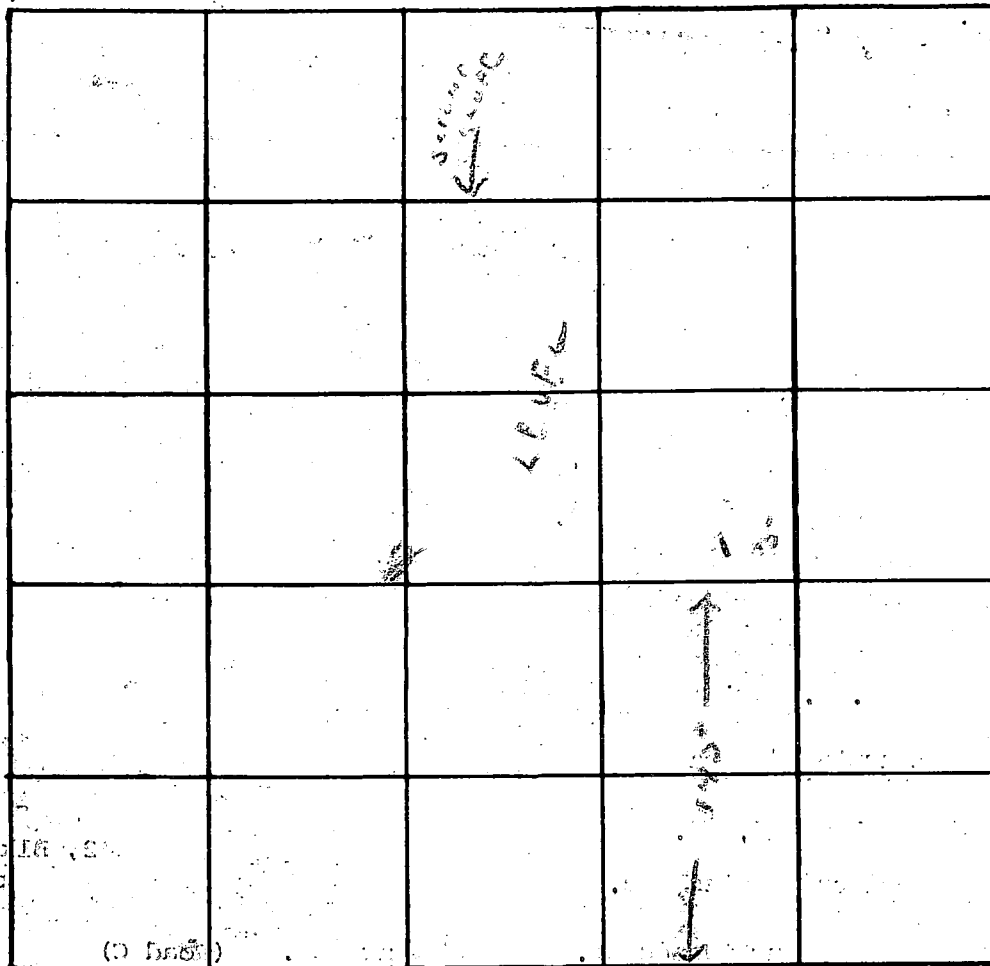
APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS R. Tones DATE _____

REASONS FOR REJECTION OR HOLDING Not suitable area on this lot

THIS IS NOT A PERMIT



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
11/17/73	1	11 1/4"	Water	-	clay	fer	5-5 1/2	
	2	10 1/2"	Water	-	clay	fer	5-5 1/2	
	3							
	4							

REMARKS _____

TYPE OF SOIL _____

APPLICATION

A 18356

SEWAGE DISPOSAL TESTING

P _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DISTRICT 3

DATE _____

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 _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

2, Blk. D, Sec. 32

SUBDIVISION _____ LOT NO. xxx

ROAD AND DESCRIPTION _____ (Road C)

SIZE OF LOT XXXXXXXXXX 44,250 sq. ft. TYPE BLDG. 3 or 4
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ John Boender

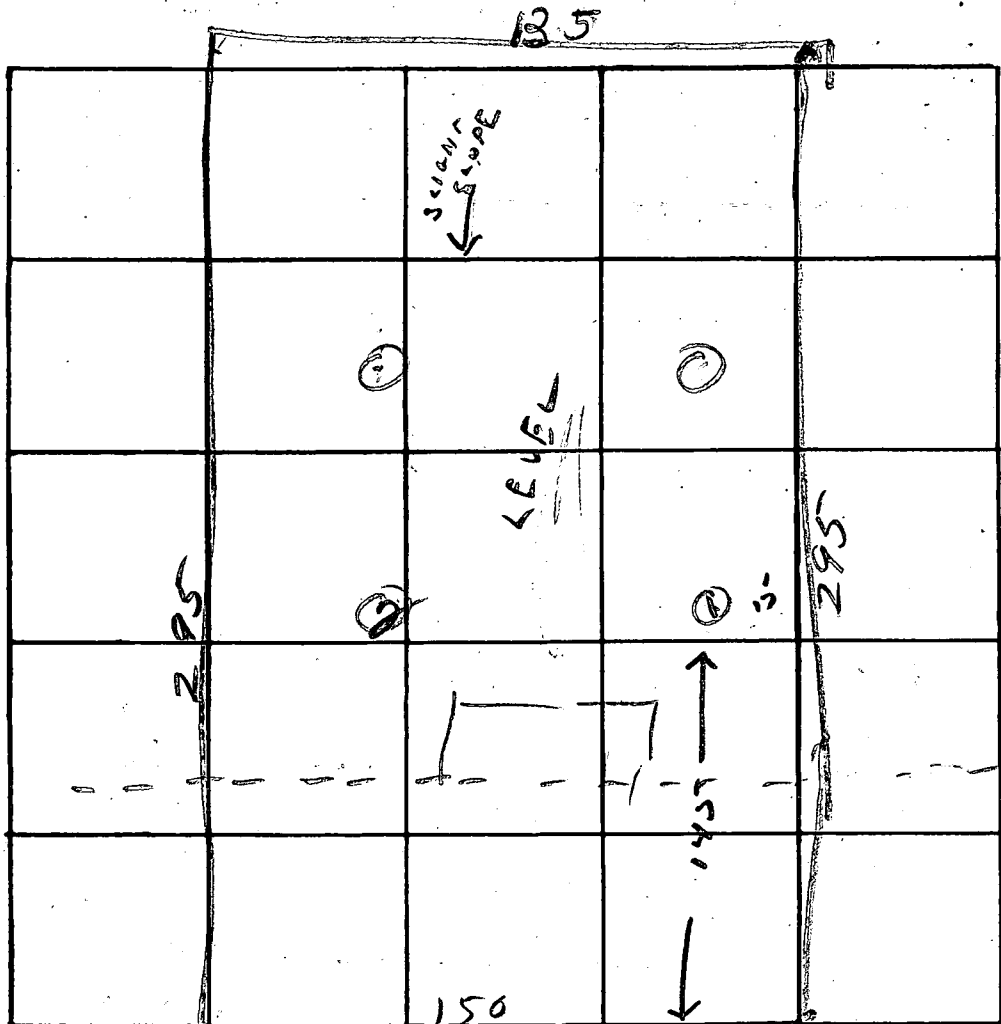
APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH NAME ADJOINING ROADWAY AS BASE LINE.

UNNAMED ST

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11/13/73	1	11 ft.	Water	-	clay	for	5-5 1/2 ft.
	2	10 1/2 ft.	Water	-	clay	for	6 ft.
	3						
	4						

REMARKS _____

TYPE OF SOIL _____

2 Part 1

APPLICATION

A _____

P _____

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DISTRICT Third & Fourth
DATE October 30, 1973

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 Mr. Weldon L. Boring

ADDRESS Burntwoods Road, Glenwood, Maryland PHONE 442-2483

PROPERTY LOCATION:

SUBDIVISION Gwenlee Estates-Section II LOT NO. 2, Block D

ROAD AND DESCRIPTION East side of Gwenlee Circle

SIZE OF LOT 125' x 300' TYPE BLDG. TWO
NUMBER OF BEDROOMS _____

IF NOT SINGLE RESIDENCE DESCRIBE _____

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT William R. Hopkins

APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

APPLICATION

A 18357

P _____

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DISTRICT 3

DATE _____

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 _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Greenlee Estate LOT NO. 3, Blk. D, Sec. #2
~~XX~~

ROAD AND DESCRIPTION _____ Road C

SIZE OF LOT ~~XXXXXXXXXX~~ 44,250 sq. ft. TYPE BLDG. 3 or 4 bedrooms
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ John Roender

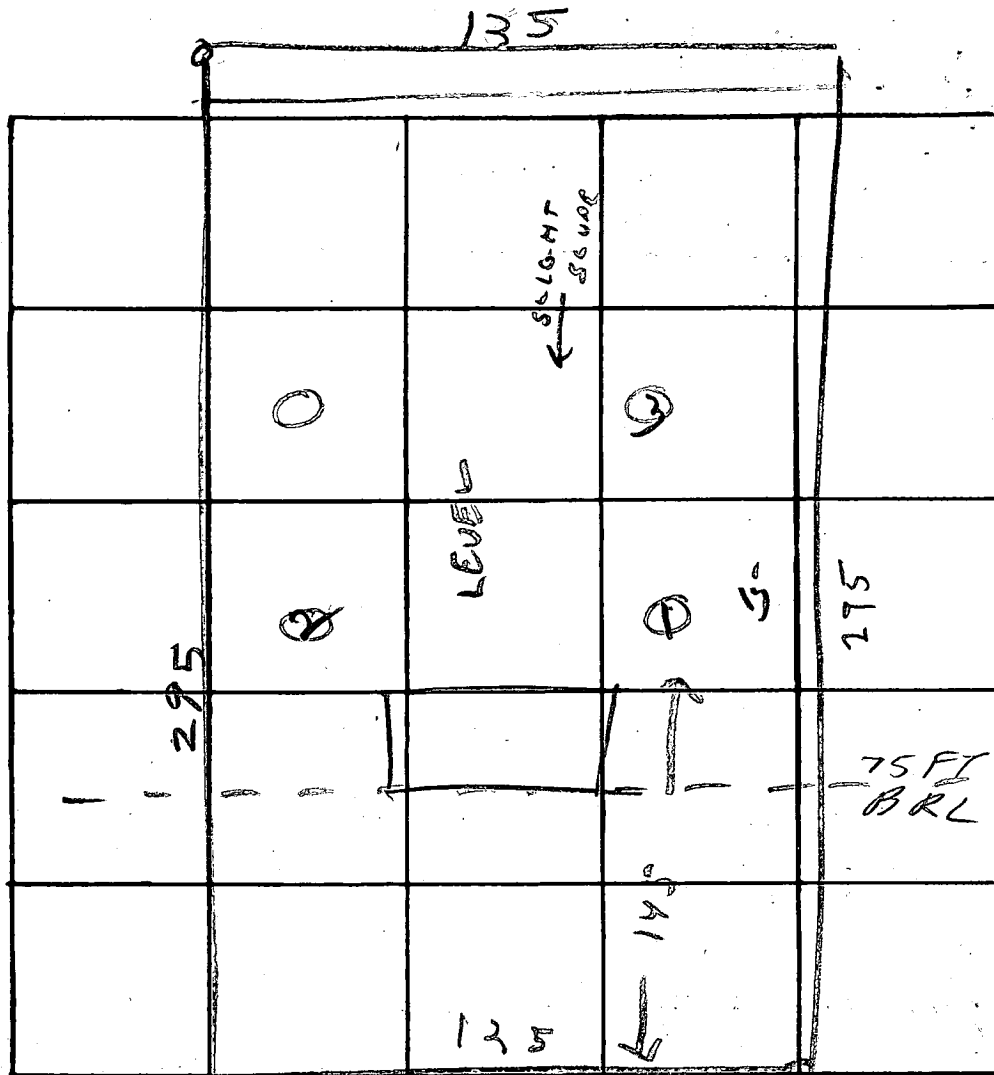
APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PEAD END UNNAMED ST

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11/12/73	1	10ft.	Water	+ mostly clay			
	2	10ft.	No water	Deep clay line			
	3	7ft.	clayish				

REMARKS

TYPE OF SOIL

3 Dsect 1

APPLICATION

A 19120

SEWAGE DISPOSAL TESTING

P _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DISTRICT Third & Fourth

DATE October 30, 1973

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 Mr. Weldon L. Boring

ADDRESS Burntwoods Road, Glenwood, Maryland PHONE 442-2483

PROPERTY LOCATION:

SUBDIVISION Gwenlee Estates - Section II LOT NO. 4, Block D

ROAD AND DESCRIPTION East side of Gwenlee Circle

SIZE OF LOT 125' x 300'

TYPE BLDG.

3 or 4 bedrooms
Two

NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT William R. Hopkins 465-8891

APPROVED BY _____

FOR _____

DATE _____

(KIND OF SYSTEM)

REJECTED BY _____

FOR _____

DATE _____

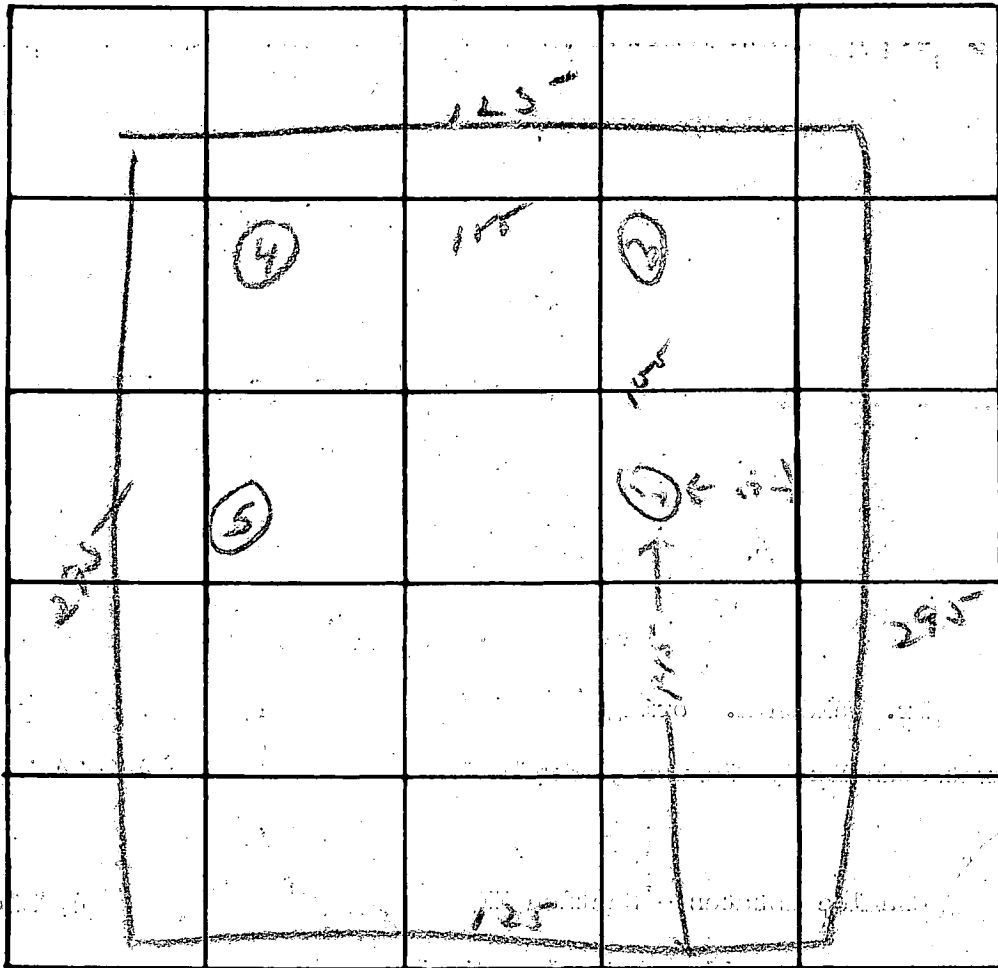
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS R. Tom

DATE _____

REASONS FOR REJECTION OR HOLDING Not suitable area on this lot.

THIS IS NOT A PERMIT



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

Rd

DATE	TEST NO.	DEPTH.	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11/13/73	1	5 1/2"	3:55	3:04	3:04	Pulled	
	2	11"	2:55	3:04		Pulled	
	3	12"	Water - At least 8" depth				
	4	10"	No Rain - 19" with				
	5	11 1/2"	Good hole				

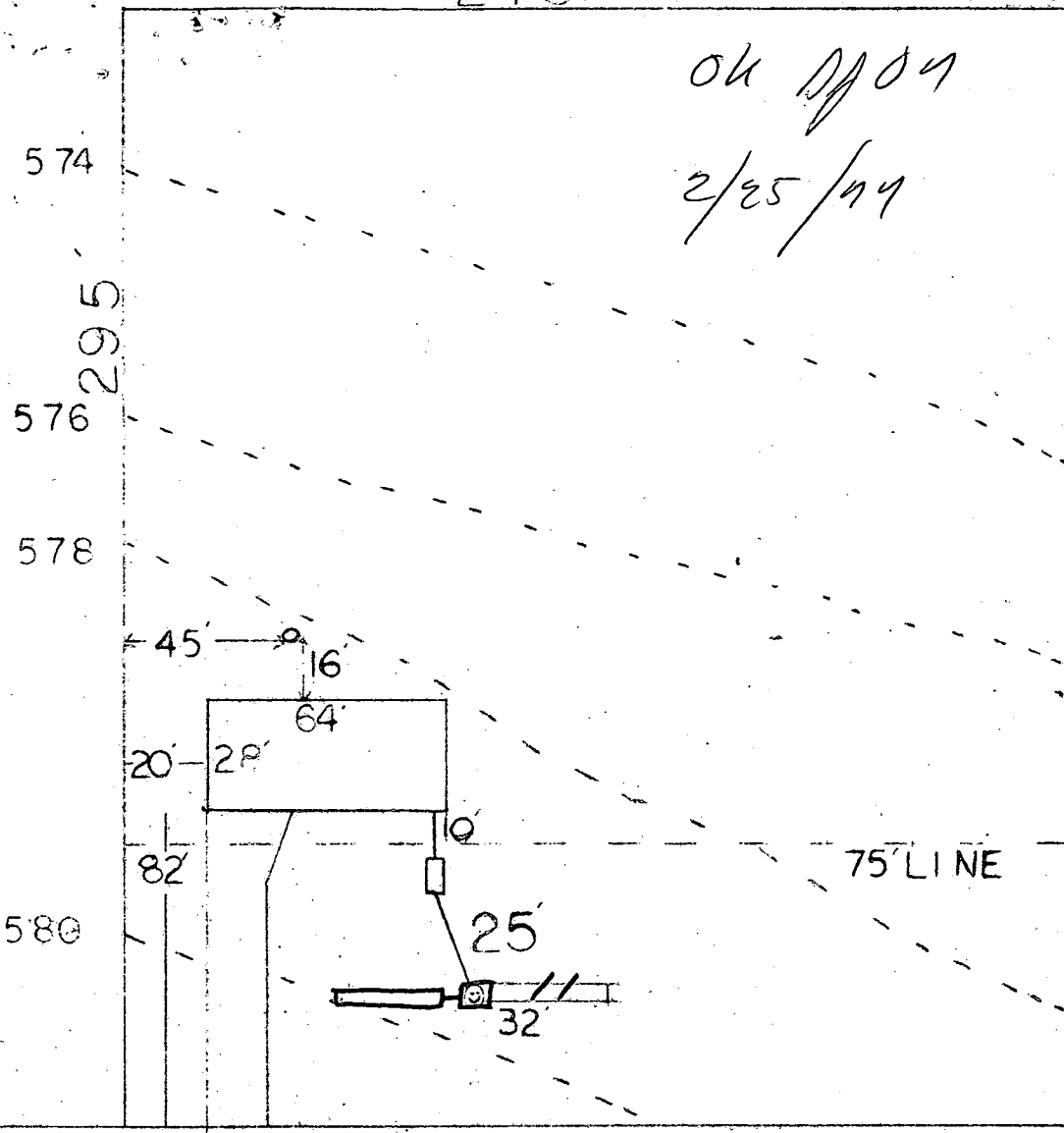
REMARKS R.T. Not measured

TYPE OF SOIL _____

248.

OK DJ 09
2/25/99

FIRST FLOOR - 582
BASEMENT - 576
INVERT - 5775
TANK INLET - 577.25
TANK EL: 579
PERKEL: 580
DRYWELL IN - 578
TRENCH IN - 576
WELL - 578



Change OK
Bill Young

50 R/W 32 75 GWENLEE CIRCLE

PLOT PLAN

LOT 2D SEC 2 GWENLEE ESTATES

COSTELLO

G 7-22

C 1 3846

SEQUENCE NO. (WRA USE ONLY)

(THIS NUMBER IS TO BE PUNCHED IN GOLS. 3 OF ALL CARDS)

STATE OF MARYLAND WATER RESOURCES ADMINISTRATION TAWES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401 WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER

DATE RECEIVED (WRA USE ONLY) 3-22-77

DEPTH OF WELL 150 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" MD-73-1885

OWNER: Northern Home LAST NAME: FIRST NAME: WOODVILLE MD STREET OR RFD: POST OFFICE

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), CHECK IF WATER BEARING. Includes handwritten entries: SAND 0-45, GRAY SANDSTONE 45-150.

GROUTING RECORD YES NO [X] [] WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX)

TYPE OF GROUTING MATERIAL (CIRCLE BOX) CEMENT [X] BENTONITE CLAY [] NO. OF BAGS 7 NO. OF ROUNDS 638 GALLONS OF WATER 42 DEPTH OF GROUT SEAL (TO NEAREST FOOT) FROM 10 FT. TO 35 FT.

CASING RECORD (INSERT APPROPRIATE CODE BELOW) STEEL [X] CONCRETE [] PLASTIC [] OTHER [] MAIN CASING TYPE [ST] NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) 6 TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) 57

OTHER CASING (IF USED) DIAMETER (INCH) DEPTH (FEET) FROM TO

SCREEN RECORD (INSERT APPROPRIATE CODE BELOW) STEEL [] BRASS OR BRONZE [] OPEN HOLE [X] PLASTIC [] OTHER []

DEPTH (NEAREST WHOLE FOOT) FROM 57 TO 150

DIAMETER OF SCREEN 56 (NEAREST INCH) FROM TO GRAVEL PACK IF WELL DRILLED WAS A FLOWING WELL (CIRCLE BOX) [X]

WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER) TELESCOPE CASING LOG INDICATOR OTHER DATA AVAILABLE

PUMPING TEST 1 2 3 (SEQ. NO.) 6

HOURS PUMPED (TO NEAREST HOUR) 2 PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 6 METHOD USED TO MEASURE PUMPING RATE ROTARY

WATER LEVEL: (DISTANCE FROM LAND SURFACE) BEFORE PUMPING 30 (NEAREST FOOT) WHEN PUMPING 145 (NEAREST FOOT)

TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST) [X] CENTRIFUGAL [] ROTARY [] OTHER (DESCRIBE BELOW)

PUMP INSTALLED TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: A, C, J, P, R, S, T, O)

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) YES [X] NO [] CAPACITY: GALLONS PER MINUTE (TO NEAREST GALLON) 31-35 PUMP HORSE POWER 37-41 PUMP COLUMN LENGTH (NEAREST FOOT) 43-47

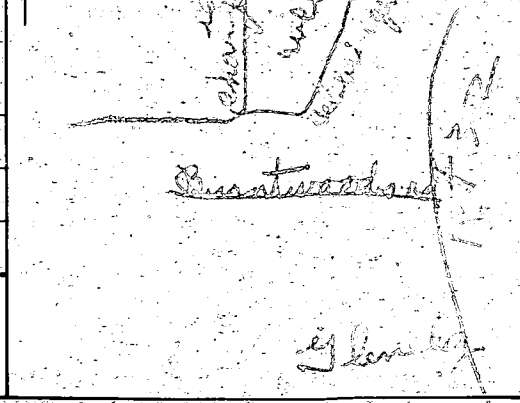
CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT) [X] ABOVE [] BELOW LAND SURFACE (NEAREST FOOT)

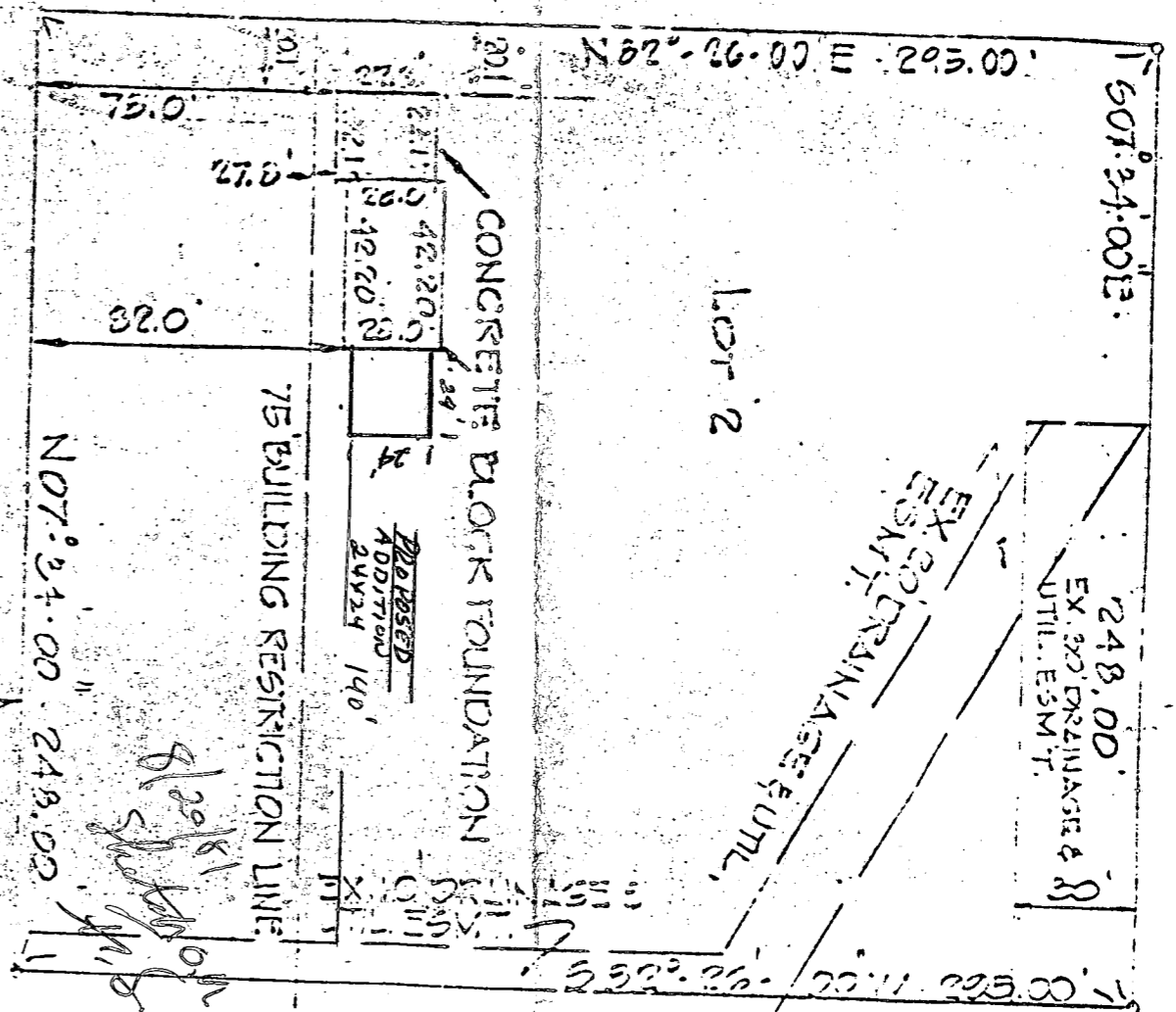
LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS BUILDINGS, SEPTIC TANKS, AND/OR OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL).

CIRCLE APPROPRIATE BOXES [X] 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 I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CAPTIONED "PERMIT TO DRILL WELL", AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

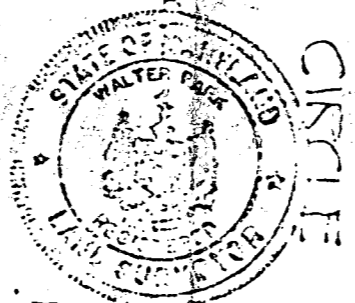
DRILLERS NAME: CA CROMWELL SIGNATURE: CA Cromwell





GWENLEE CIRCLE

GWENLEE ESTATES SEC 2
 PLAT BOOK 3324



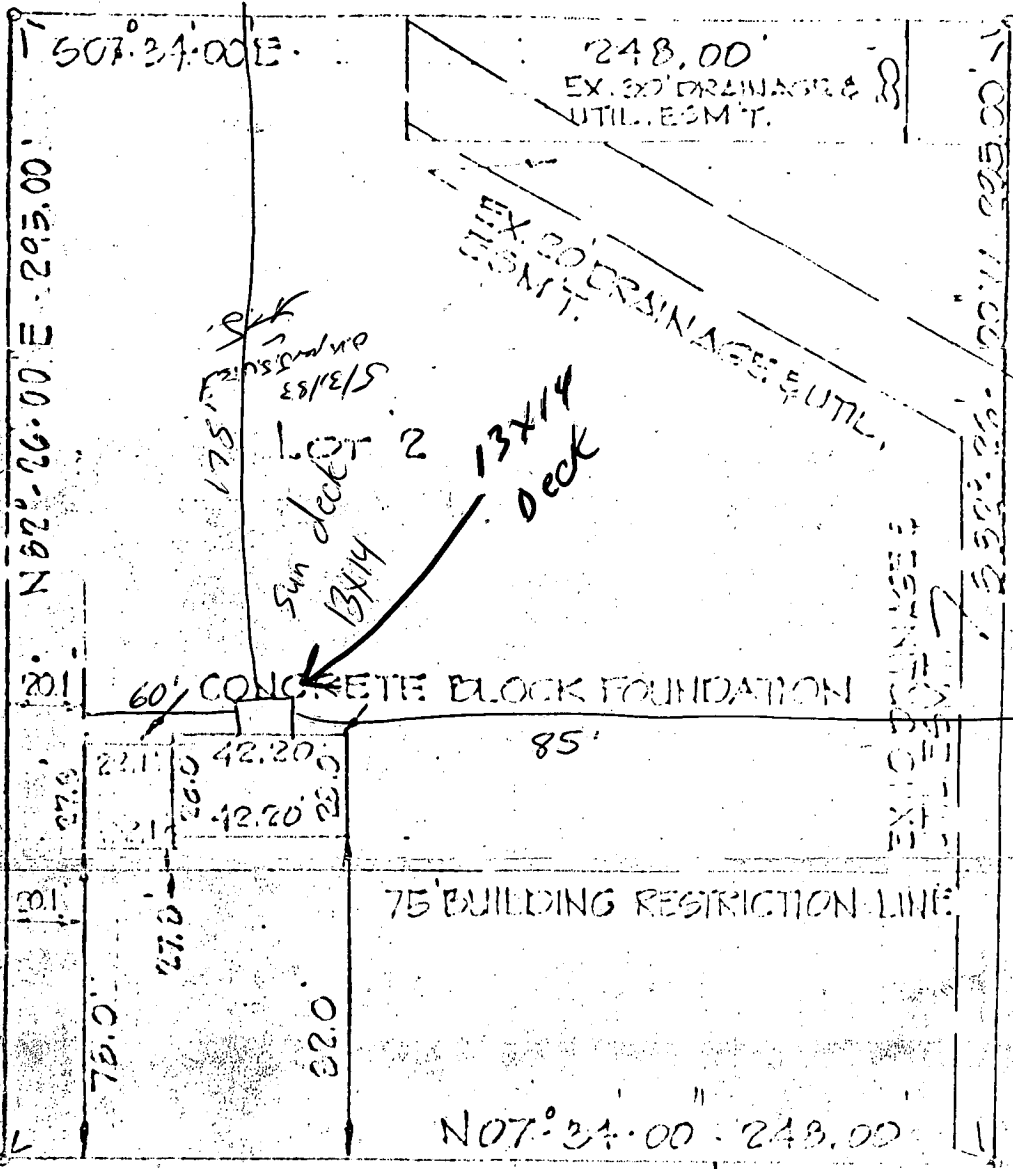
THIS IS TO CERTIFY THAT WE HAVE MADE A LOCATION SURVEY OF THE IMPROVEMENTS SHOWN AND THAT THEY ARE LOCATED ON THE LOT AS SHOWN HEREON.

Walter Park

3/31/1977
 DATE

FOUNDATION CERTIFICATION	
LOT 2, BLOCK D, GWENLEE ESTATES SEC 2 334TH DIST. NO. CO. MO.	
SCALE 1" = 50'	APPROVED BY:
DATE MAR. 31. 77	DRAWN BY T.K.S
PLAT BY LAND DEVELOPMENT CONSULTANTS	
2038-B TOWN & COUNTY BLVD.	
SPRINGFIELD CITY, MO. 65804 432-3513	
DRAWING NUMBER	

1143194107



FOUNDATION CERTIFICATION
 LOT 2 BLOCK 2 GWENLEE CIRCLE
 GWENLEE ESTATES SEC 2 34TH DIST. NO. 30, MO.
 SCALE 1" = 20'
 DATE MAR 31 1977
 APPROVED BY: [Signature]
 DRAWN BY: T.K.S.
 REVIEWED:
 PLATEY LAND DEVELOPMENT CONSULTANTS
 3035-B TOWN & COUNTY BLDG.
 INDEPENDENT CITY, MO. 64616-2552

LOT 1
 THIS IS TO CERTIFY THAT WE HAVE MADE A
 LOCATION SURVEY OF THE IMPROVEMENTS
 SHOWN AND THAT THEY ARE LOCATED
 ON THE LOT AS SHOWN HEREON.
 [Signature]
 DATE 3/31/1977

GWENLEE



GWENLEE ESTATES SEC 2
 PLAT BOOK 3324

DRAWING NUMBER

Gwenbe Estates Lot 2

GRAVED Drive

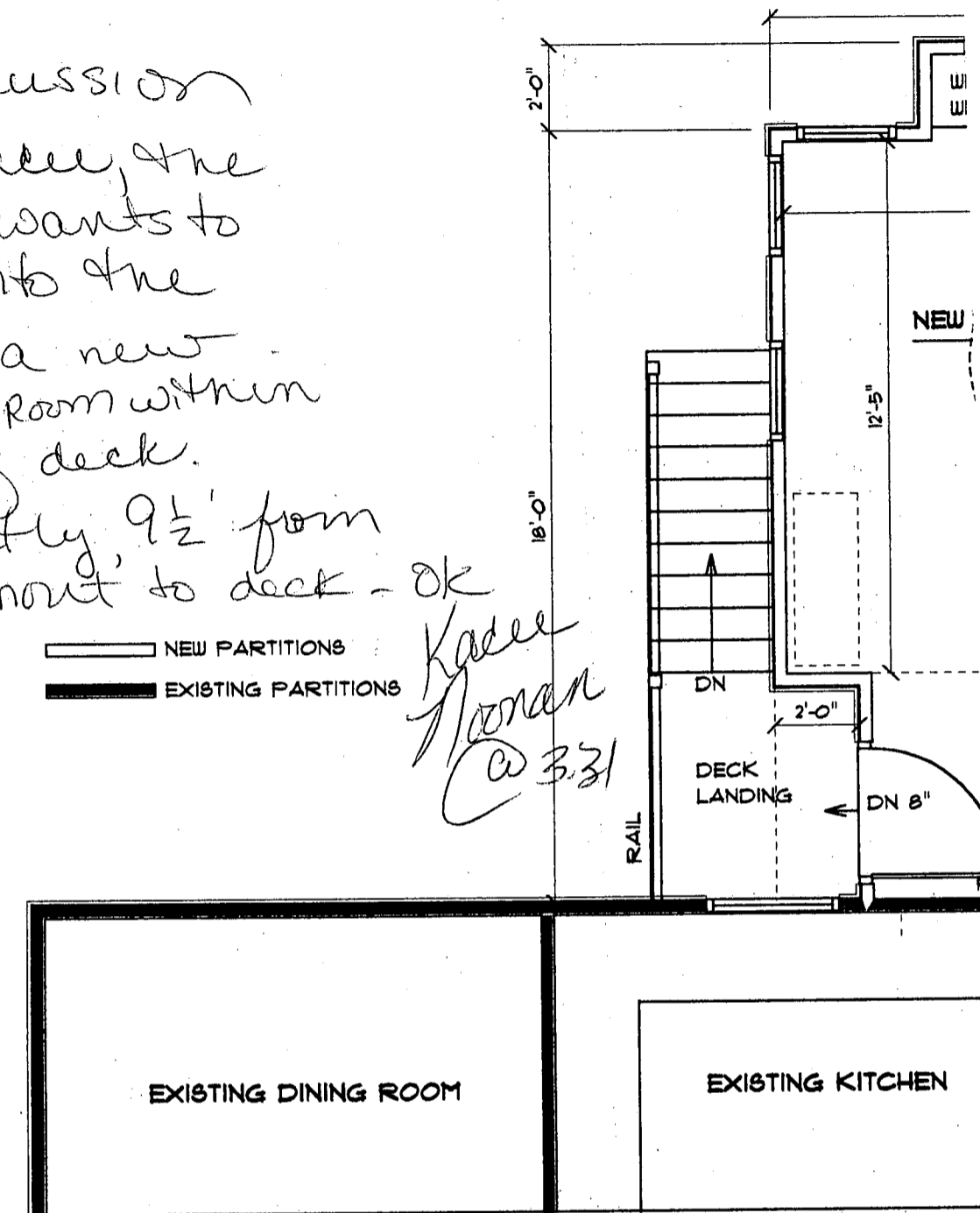
6-10-03

Per discussion with Kasee, the owner wants to place onto the home a new morning room within frame of deck.

Currently, 9 1/2' from S.T. cleanout to deck - ok

NEW PARTITIONS
EXISTING PARTITIONS

Kasee
Moore
C/O 3.31



Future BP
to come

No ↑ in bedrooms,
no issues w/ septic or well location

YUAN RESIDENCE ADDITION - HOWARD COUNTY, M
PRELIMINARY FIRST FLOOR PLAN

AJJA SCHMIDT ARCHITECT, INC.

SCALE: 1/4" = 1'-0"

JUNE 5, 2003

365 SQUARE FEET