

PERMIT 05-412069

P 47242

SEWAGE DISPOSAL SYSTEM

A 37509

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT 5th

INDEXED

DATE 6/17/91

HOWARD COUNTY HEALTH DEPARTMENT

DATE SYSTEM APPROVED 7/25/91

BUREAU OF ENVIRONMENTAL HEALTH

INSPECTOR M. Riffin

461-9933

Van Sant Plumbing & Heating, Inc. IS PERMITTED TO INSTALL ALTER

ADDRESS 3 North Main Street, Mt. Airy, Maryland 21771 PHONE 829-0444

SUBDIVISION Chapel Woods II LOT 12 ROAD 11834 Chapel Estates Woods Drive

PROPERTY OWNER Williamsburg Builders JAMES MILLER

ADDRESS

SEPTIC TANK CAPACITY 1500 GALLONS

NUMBER OF BEDROOMS 5

180 SQUARE FEET PER BEDROOM 900 sq. ft. for 5 bedrooms.

LINEAR FEET OF TRENCH REQUIRED 225 Linear Feet for 5 bedrooms.

TRENCHES - 180 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 3.5 feet below original grade. Bottom maximum depth 7.5 feet below original grade. Effective area begins at 3.5 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Start the first 245 feet from the front lot line and 65 feet from the left lot line as seen when facing the lot from Chapel Woods Drive. Run trenches on contour the rear.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. 5/29/91 OK RH

PLANS APPROVED BY Sid Abel cm DATE 03/20/91

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 BLDG. PERMIT SIGNED AND RETURNED 10/2/92 Serial # 45625 - Prol

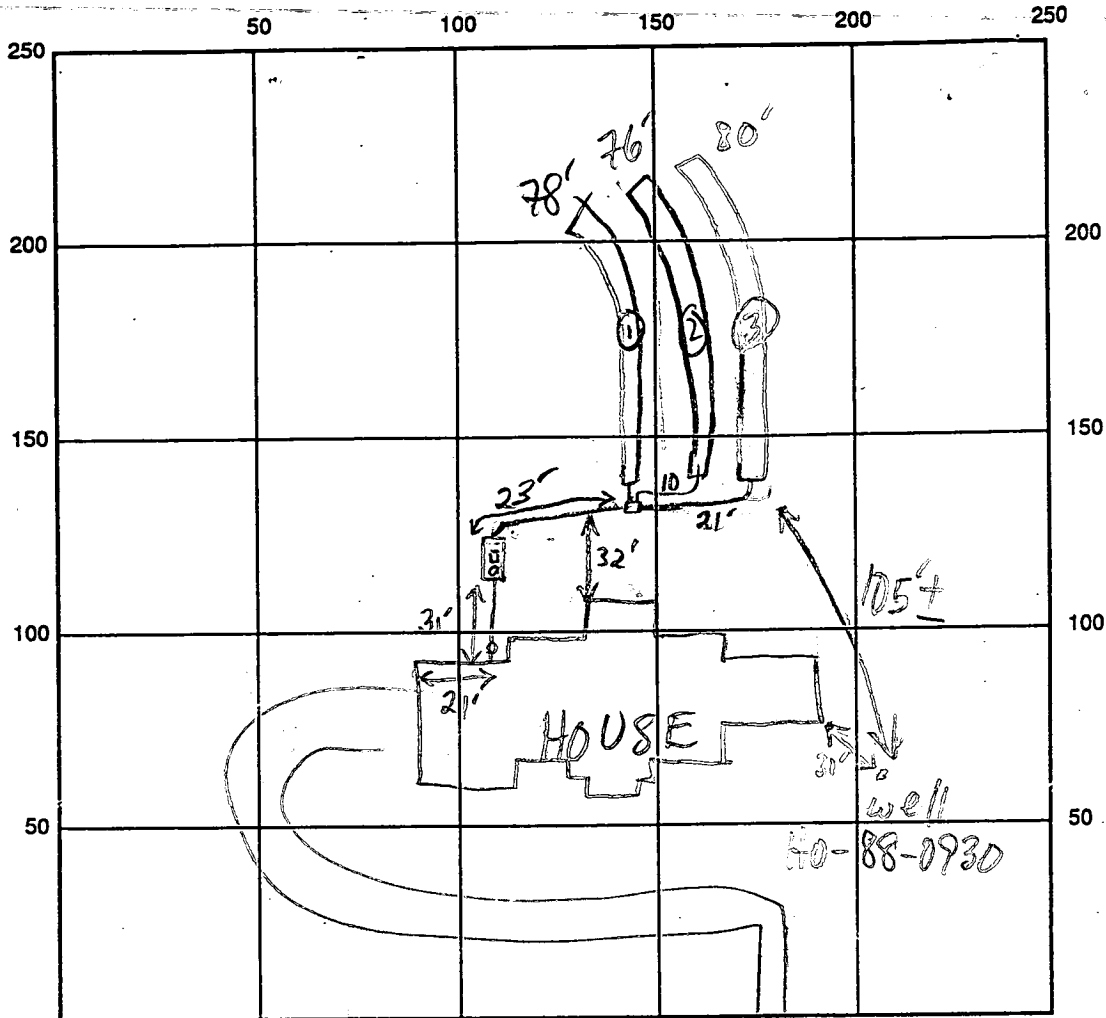
PERMIT VOID AFTER TWO YEARS

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 37509



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

CHAPEL WOODS DR

SEPTIC TANK LEVEL 1500 GAL - OK

CLEANOUTS MANHOLE & 8" PVC ON S.T.

DISTRIBUTION BOX LEVEL OK - BAFFLE IN

DRAIN FIELD/TITLE DEPTH $\frac{1}{7.5}$ $\frac{2}{7.5}$ $\frac{3}{7.5}$ FT.

TRENCH WIDTH 2 FT.

INLET DEPTH $\frac{1}{3.5}$ $\frac{2}{3.5}$ $\frac{3}{3.5}$ FT.

EFFECTIVE GRAVEL DEPTH $\frac{1}{4}$ $\frac{2}{4}$ $\frac{3}{4}$ FT.

TOTAL LENGTH 0 78 76 80 FT.

NUMBER OF TRENCHES 3

ONE SIDEWALL/BOTTOM AREA 0 312 304 320 SQ. FT.

DRYWALL INSIDE DIAMETER FT.

EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA 936 SQ. FT.

REMARKS: 7/23/91 OK TO DIG & STONE, LEAVE ENDS OPEN. OK TO BACKFILL TO S.T. MR 7/24/91 #1 OK TO FINISH TRENCHES 1 & 2, DIG 3 MR

7/24/91 #2 NO ONE PRESENT. TRENCH 2 OK, TRENCH 3 DUG TO 40'± UNFINISHED MR

7/25/91 OK TO COVER ALL

DATE SYSTEM APPROVED 7/25/91

INSPECTOR M. Ripkin

A 37509

SUBDIVISION: Chapel Woods II

LOT NUMBER: 12

DRY WELL OR DRY WELL AND TRENCH

_____ sq. ft./bedroom

	<u>Septic Tank</u>	<u>Minimum Total Square Feet</u>
3 bedroom	1000 gallon	_____
4 bedroom	1250 gallon	_____
5 bedroom	1500 gallon	_____

Inlet _____ feet below original grade.

Bottom maximum depth _____ feet below original grade.

Effective area begins at _____ feet below original grade.

NOTE: If trench is used to make up absorbent area, run the trench on level ground and leave a 5-foot earth buffer between dry well and trench. No trench is to exceed 100 feet in length. Trench inlet to be same as dry well, with _____ feet of stone below distribution pipe.

TRENCHES

180 sq. ft./bedroom

Trench to be 2 wide.

Inlet 3.5 feet below original grade.

Bottom maximum depth 7.5 feet below original grade.

Effective area begins at 3.5 feet below original grade.

4 feet of stone below distribution pipe.

906 SQ FT FOR 5 BEDROOM
 $\frac{900}{4} = 225$ LINEAR FT FOR 5 BEDROOM

- NOTE:
- (1) No trench to exceed 100 feet in length.
 - (2) If more than one trench used, a distribution box is required.
 - (3) Trenches to be installed on level ground.
 - (4) Call for inspection of trench before gravel is installed.
 - (5) Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank and drywell.
 - (6) If a garbage disposal is used, increase septic tank capacity by 50% and increase absorbent sidewall area by 22%.

LOCATION: START THE FIRST 245 FT FROM THE FRONT LOT LINE AND 65 FT FROM THE LEFT LOT LINE AS SEEN WHEN FACING THE LOT FROM Chapel Woods Dr. RUN TRENCHES ON CONTOUR TOWARD THE POOL. 7-21-89 S. C. W.

REVISED MR 3/20/91

A 37509

SUBDIVISION: Chapel Woods II

LOT NUMBER: 12

DRY WELL OR DRY WELL AND TRENCH

_____ sq. ft./bedroom

	<u>Septic Tank</u>
3 bedroom	1000 gallon
4 bedroom	1250 gallon
5 bedroom	1500 gallon

Minimum Total Square Feet

Inlet _____ feet below original grade.

Bottom maximum depth _____ feet below original grade.

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NOTE: If trench is used to make up absorbent area, run the trench on level ground and leave a 5-foot earth buffer between dry well and trench. No trench is to exceed 100 feet in length. Trench inlet to be same as dry well, with _____ feet of stone below distribution pipe.

TRENCHES

180 sq. ft./bedroom
5

Trench to be 2 wide.

Inlet 3.5 feet below original grade.

Bottom maximum depth 7.5 feet below original grade.

Effective area begins at 3.5 feet below original grade.

4 feet of stone below distribution pipe.

900 SQFT FOR 5 BEDROOMS
900 / 4 = 225 LINEAR FT FOR 5 BEDROOMS

- NOTE:
- (1) No trench to exceed 100 feet in length.
 - (2) If more than one trench used, a distribution box is required.
 - (3) Trenches to be installed on level ground.
 - (4) Call for inspection of trench before gravel is installed.
 - (5) Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank and drywell.
 - (6) If a garbage disposal is used, increase septic tank capacity by 50% and increase absorbent sidewall area by 22%.

LOCATION: START THE FIRST 245 FT FROM THE FRONT LOT LINE AND 65 FT FROM THE LEFT LOT LINE AS SEEN WHEN FACING THE LOT FROM Chapel Woods Dr. RUN TRENCHES ON CONTOUR TOWARD THE REGR. 7-21-89 S. dww

REVISED MR 3/20/91

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 37509

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

P. O. BOX 473 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT _____

DATE 8/13/86

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 J.J.M. Partnership Williamsburg Builders Inc.

ADDRESS 5570-201 Sterrett Place PHONE 740-4466
Columbia, Maryland 21045

PROPERTY LOCATION:
SUBDIVISION Chapel Woods II LOT NO. LOT 13 ON PRELIM
LOT 12 ON 2ND PRELIM

ROAD AND DESCRIPTION West side of Middle Patuxent; North of Route 108-
(11834 Chapel Woods Drive)

SIZE OF LOT 3.98 ac. TYPE BLDG. residential
(NUMBER OF BEDROOMS) _____

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.

John Mikolasko
(SIGNATURE OF APPLICANT)

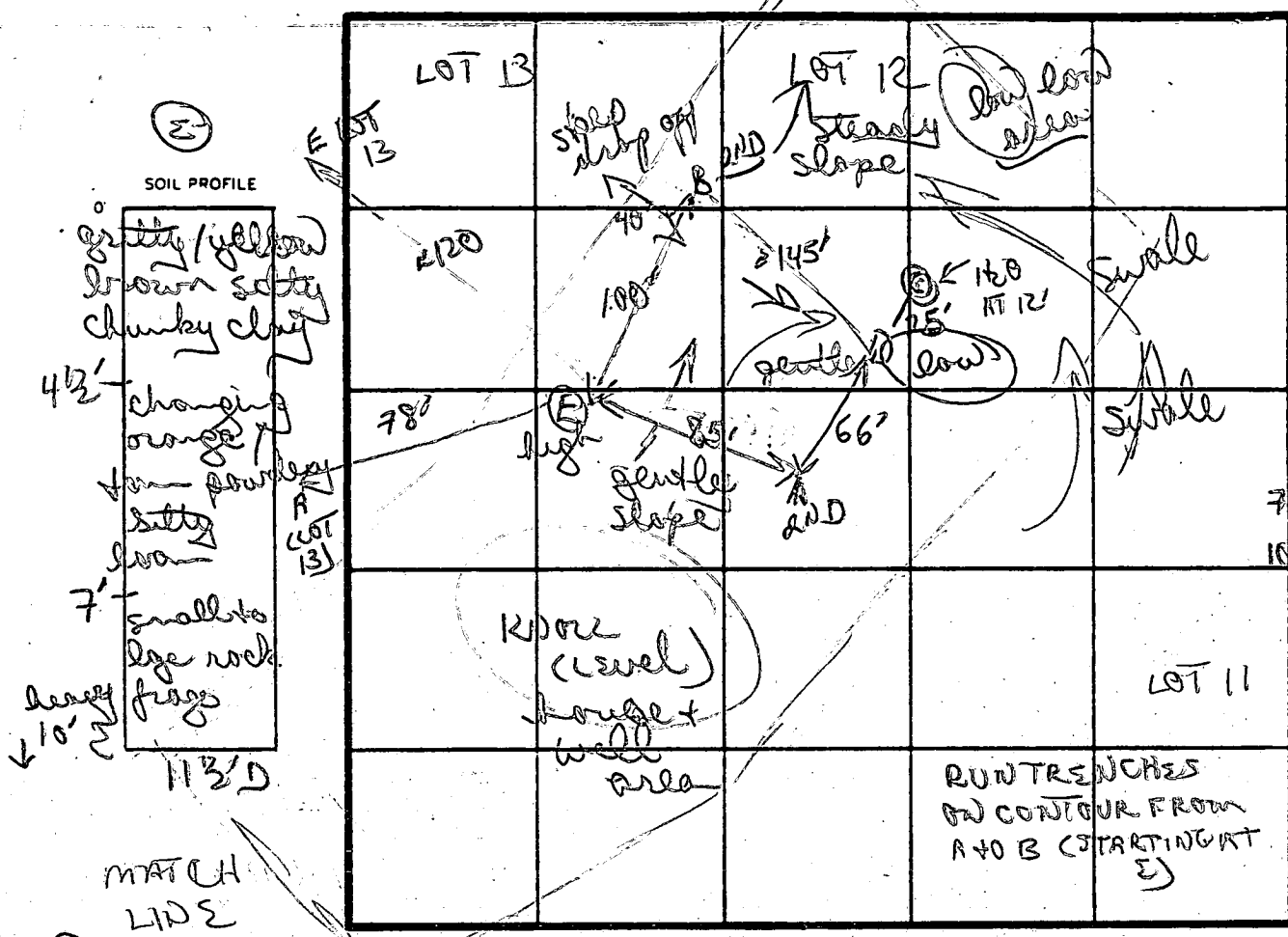
APPROVED BY Sady Abdel FOR Deep trenches DATE 7-21-89
Shallow Trenches

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING for field located holes + s/p plot
(shallow system only) BLDG. PERMIT SIGNED
AND RETURNED 5/15/91
Serial # 37663-
SFP

THIS IS NOT A PERMIT



(A)
orange/yellow brown silty chunky clay loam
3 1/2' changing to predominantly yellow to tan brown silty loam
5-10% rock frags
12 1/2' D

(D)
Chester gravelly orange/brown silty/clay loam
3-5' 15-20% small med frags changing to brown tan
12 1/2' D

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

(B)
powdery/gritty orange/brown silty loam
changing to orange tan brown silty loam w/ 10% small rock 5-7' back to loam
11 1/2' D

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
9/5/86	B	3' 5"	1238	1239	1239	1240	1 MIN	
		7 1/2' M	1234	1236	1236	1240	4 MIN	
		11 1/2' D	bottom (see profile)					
	E	4' 5"	1225	1233	1233	1254	2.1 MIN	
		7 1/2' M	1220	1222	1222	1225	3 MIN	
		12 1/2' D	bottom (see profile)					
	A	3'	1249	1253	1253	105	12 MIN	
		12 1/2'	bottom (see profile)					
	D	4' 5"	1258	102	102	108	10 MIN	
		12' 0"	bottom (see profile)					

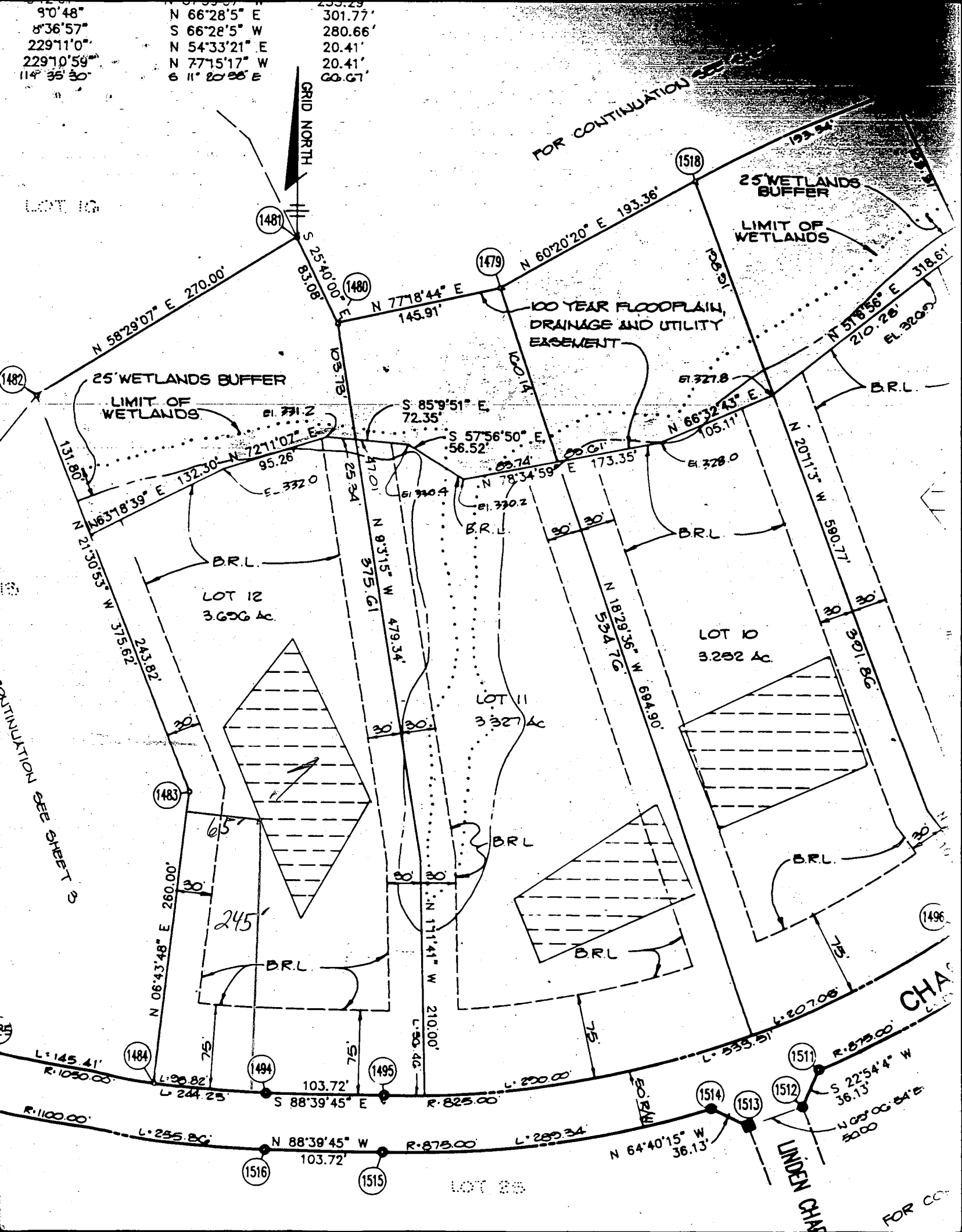
X=8 1/2 min
INLET 3 1/2
MAX D 6
SHALLOW ONLY

REMARKS: perc field adjusted uphill slightly (H₂O + swale)
TYPE OF SOIL: orange, yellow brown gritty, chunky silty loam; below silty loam w/

TESTED BY: INLET 3' MAX 7 180/130 ROOM (REPAIR AREA SHALLOW SYSTEM)

EH 12 1079

97°48' W
 8°36'57" S
 229°11'0" E
 229°10'59" E
 114°35'30" W
 N 66°28'5" E
 S 66°28'5" W
 N 54°33'21" E
 N 77°15'17" W
 6 11° 20' 28" E
 255.29'
 301.77'
 280.66'
 20.41'
 20.41'
 60.67'



LOT 16

FOR CONTINUATION

25' WETLANDS BUFFER
LIMIT OF WETLANDS

100 YEAR FLOODPLAIN, DRAINAGE AND UTILITY EASEMENT

25' WETLANDS BUFFER
LIMIT OF WETLANDS

LOT 12
3.606 Ac

LOT 10
3.282 Ac

LOT 11
3.327 Ac

CONTINUATION SEE SHEET 3

CHA...

LINDEN CHASE

FOR CO...

LOT 25

HOWARD COUNTY

PERMIT APPLICATION

DEPARTMENT OF PUBLIC WORKS
BUREAU OF INSPECTIONS LICENSES & PERMITS

3430 COURT HOUSE DRIVE, ELLICOTT CITY, MARYLAND 21043

SERIAL NUMBER

37663

APPLICATION

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

11834 Chapel ~~Street~~ Dr. NE
Macksville Maryland 21029

GRADING/SEDIMENT CONTROL YES NO

DESCRIPTION OF WORK AUTHORIZED

Model 2 story full
basement 13 rooms, 4 full
baths, 1 half bath, 2 IP
garage, sun room (SBR)

LOT NO. PARCEL NO. SEC. AREA BLOCK NO. LIBER FOLIO

12 86 13

MAP DIVISION ZONE ZONE MAP ELEC. DIST. CENSUS TR.

Map Needs II R 5th 1A510

OWNER'S NAME AND ADDRESS PHONE NO.

Williamburg Builders, Inc.
P.O. Box 1018, Md. Rd 21044 99000

SIZE OF BLDG.	FRONT	DEPTH	HEIGHT
1	60'	5'	12'
2	118'	33'	12'
3	118'	53'	12'

OCCUPANT'S NAME AND ADDRESS PHONE NO.

Same as owner

TYPE OF BLDG.	AREA	VOLUME	ROOF
B. ROOMS	5825	33736	Asph. Flt.
ROOMS	3227	38994	Shed
BATHS	2777	27344	Asph. Flt.

ARCHITECT OR ENGINEER'S NAME AND ADDRESS PHONE NO.

L.W. Taylor
10000 Howard Drive
Ellicott City, Md 21043 904 1181

FOOTINGS	FOUNDATION	2 WALLS
20x20	6x16cm	6x6
12x12	6x6	4x4

CONTRACTOR'S NAME AND ADDRESS PHONE NO.

Same as owner

UTILITIES			
WATER/WELL	SEWER/SEPTIC	GAS	ELECTRICITY
X	X	X	X

I have carefully examined and read this application and know the same is true and correct, and that in 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 Bureau of Inspections, and Permits twenty-four hours in advance when I am ready for the inspections called for elsewhere in this application; and that no work will be covered up until such inspections have been complied with.

EXISTING USE PROPOSED USE

Vacant lot Single Family Dwelling

SIGNATURE DATE
4-3-50

EST. CONSTRUCTION COST LICENSE NUMBER PERMIT FEE

90000

W/S CODE 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)

DISTANCE IN FEET FROM SIDE STREET R/W LINE

TO SIDE BUILDING LINE

DISTANCE IN FEET, REAR YD. REQUIRING SET

BACK CONDITIONS (IF ANY) (CORNER LOT ONLY)

SDP #

Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING		
SHA		
SEDIMENT/GRADING		
BUILDING OFFICIAL		
WATER & SEWER		
HEALTH DEPT.	4/5/50	B. Hodger
FIRE PROTECTION		
STORM WATER MGM.		

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.

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

LP-69 Revised

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

CHAPEL WOODS II

Drawing: ROAD

Fri Nov 10 12:06:25 1989

EXISTING WELL LOCATIONS

LISTING OF CURRENTLY SET COORDINATE POINTS

Point	Coordinates	Elevation	Desc / Type
10013	N E	509582.360 819993.817	Well (Lot-13) CPNT
10010	N E	509708.039 820769.688	Well (Lot-10) CPNT
10009	N E	509759.416 820927.058	Well (Lot-9) CPNT
10008	N E	509942.705 821097.558	Well (Lot-8) CPNT

(LOT 11) WELL CAME IN @ ORIG. POINT STAKED BY (LOT 11)
REIMER, MUGGE ASSOC.

LOT 12 - TWO DRY HOLES - TO DATE

HOWARD COUNTY HEALTH DEPARTMENT

JOYCE M. BOYD, M.D., M.P.H.
COUNTY HEALTH OFFICER



Bureau of Environmental Health
3525 Ellicott Mills Drive
Ellicott City, Maryland 21043

Director - 461-9956
Water & Sewerage, Permits - 461-9933
Community Environmental Health - 461-9944
Technical Services - 461-9955

TO: CLARK FINE FLOCK & SACKETT
7135 MINSTREL WAY
COLUMBIA MD 21045

FROM:

DATE: 10 MAY 91

This office has received your building permit # 37663.
We are unable to approve your permit for the following reason(s):

- No septic elevations/site plans provided (example and septic specification enclosed).
- Incorrect septic specs. (See enclosure.)
- No invert elevation at _____.
- No existing grade at _____.
- No elevation at well.
- Invert at trench(s) incorrect. (See enclosed.)
- House too small.
- House to _____ less than _____ feet.
- Well to SEPTIC less than 100 feet.
- Sewage easement location incorrect..
- No well on property.
- Other: ① WELL LOCATION SHOWN MAY NOT BE CORRECT
CALL THIS OFFICE. ② SEPTIC SYSTEM IS
TOO SMALL FOR A 5 BED ROOM HOUSE

If you should have any question, please call RAYMOND HODGES
or _____ at 461-9933.

B 1 8710 SEQUENCE NO. (DP USE ONLY) (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

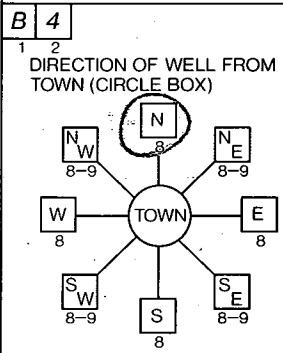
STATE OF MARYLAND PERMIT TO DRILL WELL please print or type

STATE PERMIT NUMBER 40-88-0930 fill in this form completely

OWNER INFORMATION Date Received (APA) 061689 J. J. M. FMC Owner First Name Street or RFD Clarksville MD 21047

LOCATION OF WELL HOWARD COUNTY CHAPEL WOODS IL SUBDIVISION SECTION 44 46 LOT 12 CLARKSVILLE NEAREST TOWN MILES FROM TOWN 3 MI

DRILLER INFORMATION Driller's Name Joseph L. Mayne License No. 038 Firm Name Joseph L. Mayne Well Drilling Address 5512 Hill - 1 D. Mt. Airy 21771 Signature Date 6/14/89



CHapel Woods Dr. NEAR WHAT ROAD ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH [X] SOUTH DISTANCE FROM ROAD 65 FT

WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 50 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

USE FOR WATER (CIRCLE APPROPRIATE BOX) [D] HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) [F] FARMING [I] INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER [P] PUBLIC OR PRIVATE WATER COMPANY [T] TEST, OBSERVATION, MONITORING

Howard A-37509 COUNTY NAME COUNTY NO. STATE SIGNATURE DATE ISSUED 072189 Sid, label 7/20/90 EXP. DATE 072090

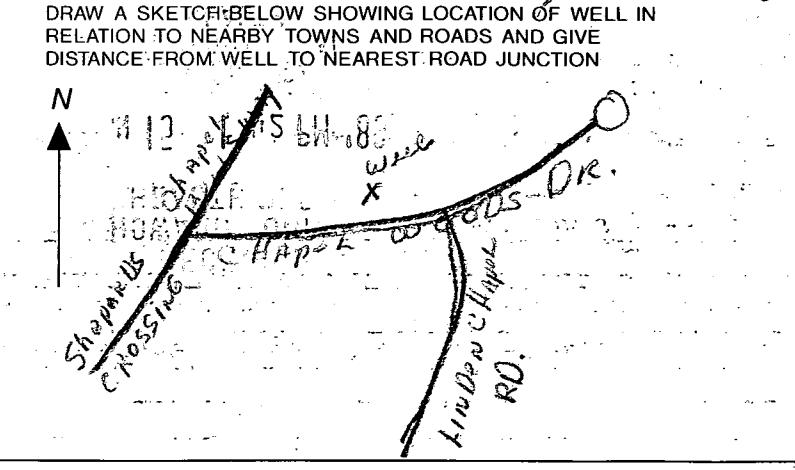
APPROXIMATE DEPTH OF WELL 300 FEET

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

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

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) [N] THIS WELL WILL NOT REPLACE AN EXISTING WELL [Y] THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED [S] THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY [D] 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) APPROX. PERMIT NUMBER GAP FORCE SA PERMIT No. AC-88-0930

SPECIAL CONDITIONS COUNTY Clarksville

C1 1064 SEQUENCE NO. (DENV. USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE

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

COUNTY NUMBER A-37509

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED 05/24/90

Depth of Well 200 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-88-0930

OWNER T T M TAX last name CHARL HARRIS DA first name TOWN CLARKSVILLE SUBDIVISION CHARL HARRIS II SECTION LOT 12

WELL LOG table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Includes handwritten entries: SAND STONE, GRAY MICH ROCK, 4 dug wells 385', 400', 400', 400', Filled in with cement + drilling materials.

GROUTING RECORD WELL HAS BEEN GROUTED (Y) NO (N) TYPE OF GROUTING MATERIAL CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 6 NO. OF POUNDS 564 GALLONS OF WATER 36 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 19 ft.

CASING RECORD casing types insert appropriate code below: ST (STEEL), CO (CONCRETE), PL (PLASTIC), OT (OTHER). MAIN CASING TYPE ST, Nominal diameter top (main) casing 6, Total depth of main casing 24.

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

SCREEN RECORD screen type or open hole insert appropriate code below: ST (STEEL), BR (BRASS), HO (OPEN HOLE), PL (PLASTIC), OT (OTHER).

DEPTH (nearest ft.) table with handwritten entries: 100, 21, 400.

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...

DRILLERS IDENT. NO. 928

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 (74, 75, 76)

TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST HOURS PUMPED (nearest hour) 6 PUMPING RATE (gal. per min. to nearest gal.) 204 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 9 WHEN PUMPING 279 TYPE OF PUMP USED (for test) A air, P piston, T turbine, C centrifugal, R rotary, O other, J jet, S submersible

PUMP INSTALLED DRILLER WILL INSTALL PUMP (CIRCLE) (YES or NO) YES (NO) IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE: CAPACITY: GALLONS PER MINUTE (to nearest gallon) PUMP HORSE POWER PUMP COLUMN LENGTH (nearest ft.) CASING HEIGHT (circle appropriate box and enter casing height) LAND SURFACE (nearest foot)

LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)

See Attached LOCATIONS

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 88-0930
 Location of property (road) Chapel Woods Dr.
 Subdivision Chapel Woods II Lot 12 Block Plat Sec.
 Well Driller J. Mayne Owner JTM, Inc.

Depth of well 400'
 Distance of measuring point (M.P.) above ground 3 1/2
 Static water level (S.W.L.) below M.P. 9'

I. High rate pumping -- reservoir drawdown

Time pump started 7:50 Pumping rate 15 gpm
 Total time 45 min. to reach pumping water level 276' below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes

TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE time to fill 5/1 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
8:05	145'	4 sec.		15
8:20	279	5		12
8:35	276	25		2.4
8:50	276	25		2.4
9:05	276	25		2.4
9:20	276	25		2.4
9:35	276	25		2.4
9:50	274	25		2.4
10:05	274	25		2.4
10:20	275	25		2.4
10:35	274	25		2.4
10:50	274	25		2.4
11:05	274	25		2.4
11:20	274	25		2.4
11:35	274	25		2.4
11:50	274	25		2.4
12:05	274	25		2.4
12:20	274	25		2.4
12:35	274	25		2.4
12:50	274	25		2.4
1:05	274	25		2.4
1:20	274	25		2.4
1:35	274	25		2.4
1:50	274	25		2.4

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 # 47243
Date 6/17/91

Name of Installer Van Sant Plumbing & Heating

Telephone 829-0444

License Number 1467

Certified Well Pump Installer _____ Well Driller _____ Registered Plumber X

Name of Property Owner Williamsburg Builders Telephone 977-8800

Subdivision Chapel Woods Lot # 12 Well Tag # H77-88-0930

Site Address 11834 Chapel Woods Drive

Pump

- Type
 - Deep well jet _____
 - Shallow well jet _____
 - Submersible _____
- Make _____
- Model # _____
- Capacity _____ GPM
- Pump exceeds well capacity Yes _____ No _____
- If Yes, is low pressure cutoff switch installed? Yes _____ No _____
- What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors _____ Cable guards _____ Other _____

Motor

- Horsepower _____
- RPM _____
- Voltage _____
 - 110 _____
 - 220 _____

Pitless Adapter

- Make _____
- Model # _____
- Depth _____

Tank

- Capacity _____
- Pressure relief valve? _____

Piping

- Type _____
- Size _____
- NSF and/or BOCA Code approved _____
- Depth of supply line _____

Well data

- Depth _____ ft.
- Yield _____ GPM
- Static water level _____ ft.
- Will water supply be disinfected by installer? _____

P.A. OK 4' B.G.
MR 7/24/91

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: Stanford A. Van Sant

Date: 6/22/91

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

31 JUN 15 11:15
HEALTH DEPT
HOWARD COUNTY
RECEIVED

PHONE # OF FAX 461-5738

FACSIMILE TRANSMISSION COVER SHEET

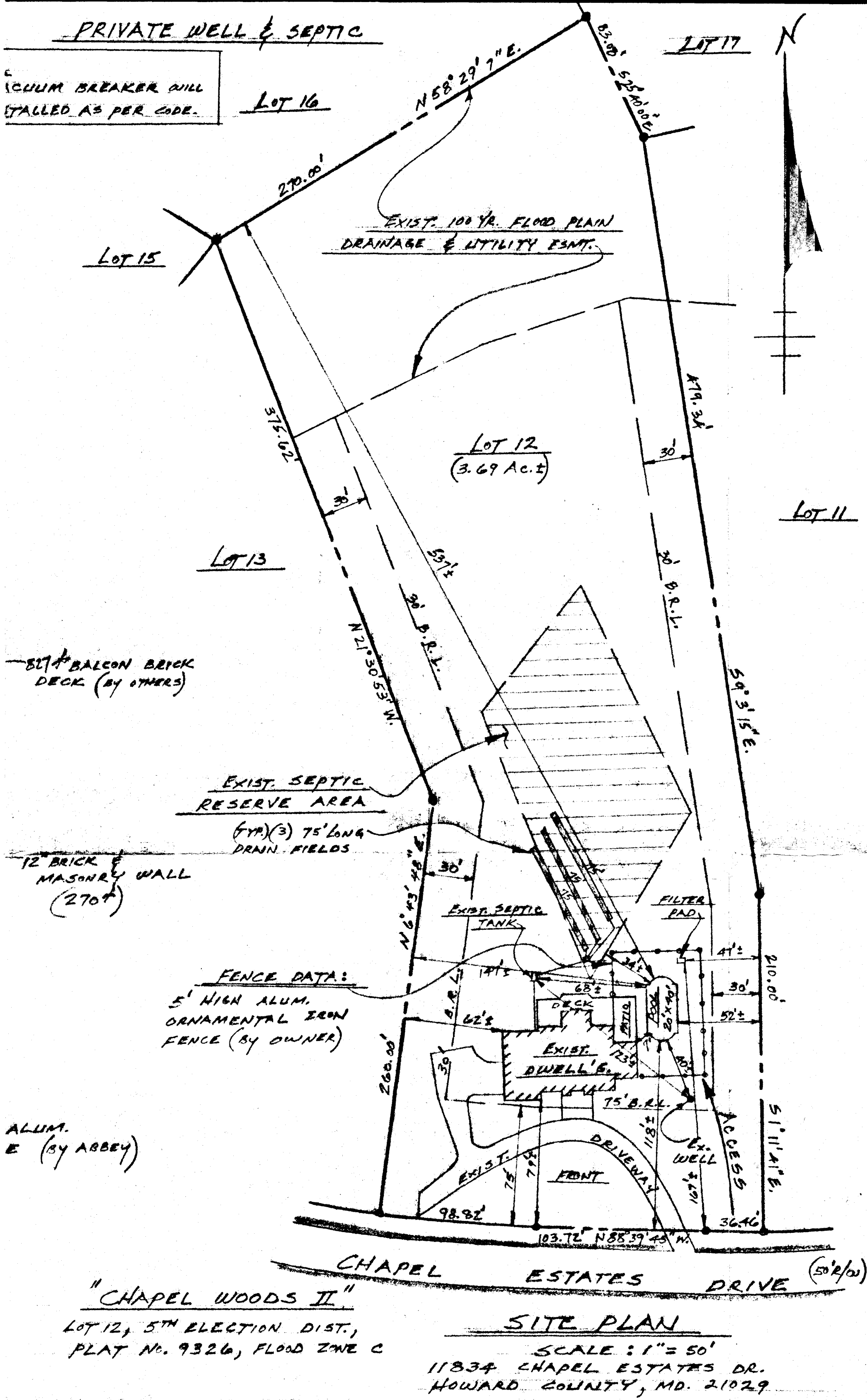
PLEASE TRANSMIT THE FOLLOWING PAGES TO:

NAME: _____

FIRM: Howard County Health Dept

FROM:

NAME: ShurleyUNIVERSITY MICRO REFERENCE LABORATORY, INC.
611 (P) HAMMONDS FERRY ROAD
LINTHICUM, MARYLAND 21090TOTAL NUMBER OF PAGES 2 INCLUDING COVER SHEET.IF YOU DO NOT RECEIVE ALL OF THE PAGES, PLEASE CALL BACK AS SOON AS POSSIBLE.
THANK YOU.OPERATOR (301) 789-3636
(301) 789-3637
OUR FAX # (301) 789-3638*Please mail permit to**Williamsburg Bldgs
PO Box 1018
Columbia, MD 21044*



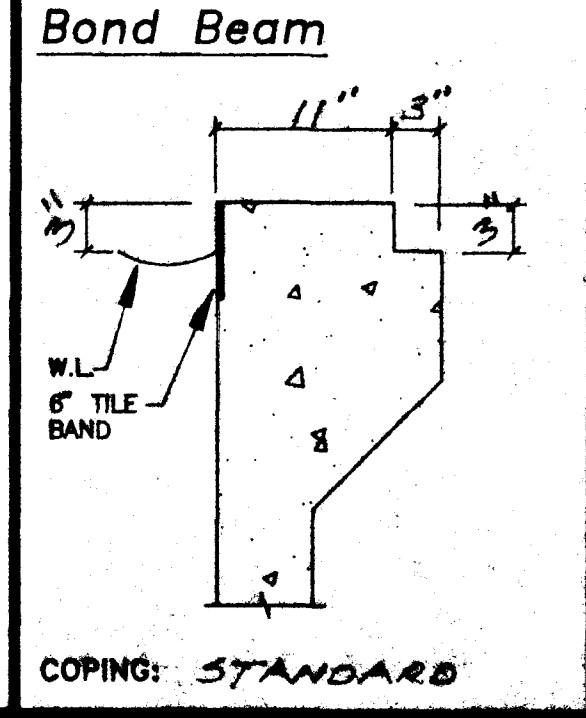
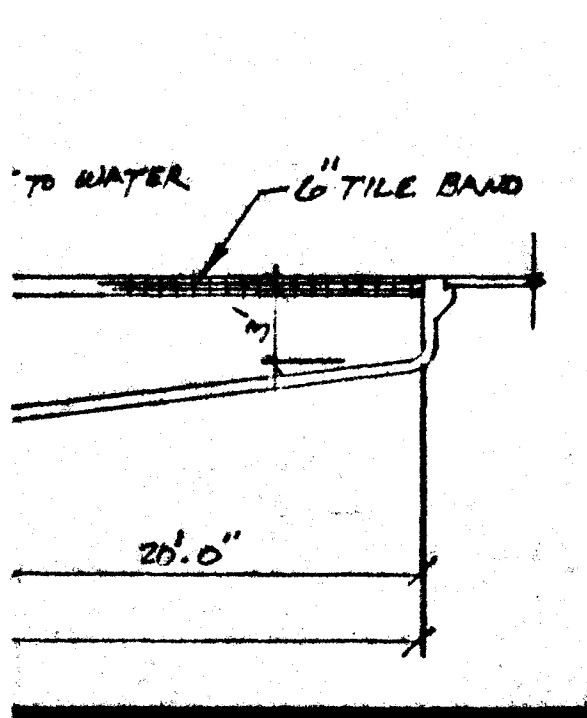
- GENERAL NOTES**
- 1) 100 FT. OF ELECTRIC IN CONTRACT.
 - 2) POOL AREA TO BE FENCED BY OWNER. GATES TO BE SELF CLOSING & LATCHING PER COUNTY CODES.
 - 3) STEPS TO HAVE 12" +/- TREADS & 8.25" RISERS, TOP TREAD TO 18".
 - 4) DO NOT TURN POOL LIGHTS ON WHEN POOL IS EMPTY.
 - 5) DO NOT USE BLACK RUBBER HOSE WHEN FILLING POOL, IT WILL MARK PLASTER & COPING.
 - 6) WET DOWN CONCRETE SHELL AT LEAST TWICE DAILY FOR 7 DAYS WHEN TEMP. EXCEEDS 70 DEGREES.

- SPECIAL NOTES**
- EXCAVATION CREW:
- PLUMBING CREW:
- STEEL CREW:
- GUNITE CREW:
- COPING & TILE:
- DECK CREW:
- PLASTER CREW:

- EQUIPMENT LIST**
- DIRT: ON SITE
- TILE: STB-308
- COPING: STANDARD
- STEPS: INCLUDED STYLE: AS DRAWN
- PLASTER: MARBELITE
- FILTER: DE 60 FW/1 1/2", 2 SPL. PUMP, SEP. TANK
- SAFETY EQ: INCLUDED
- CLEANING EQ: INCLUDED
- VACUUM EQ: INCLUDED
- DIVING EQ: 8' LONG (ROMAN)
- LADDERS: NONE
- GRABRAILS: NONE
- LIGHTS: ONE
- WATTS: 500 VOLTS: 110
- HEATER: "LAARS" (NAT GAS) (MOD. 250)
- SPA: NONE
- LOVESEAT: (TWO) (4' LONG) (INSIDE)
- DECKING: (BY OWNER)
- POOL COVER- WINTER: 25' X 50'
- SOLAR: NONE
- AUTO: NONE
- FENCE: (BY OWNER)
- OTHER ITEMS: \$50 CHEMICAL ALLOWANCE, 12' LONG AQUA BENCH, POLARIS AUTO CLEANER, IONIZER / MAGNETIZER INCL. W/SMART BOX
- HOURS GRADING IN CONTRACT: ONE (1)

POOL DATA

SIZE: 20' X 40'	SHAPE: CUSTOM
AREA- POOL: 732 ^{sq}	OTHER:
TOTAL Sq.Ft.: 732 ^{sq}	
PERIMETER- POOL: 110 LIN.FT.	OTHER:
GALLONAGE: 30,200	



Piping Schedule

Basic Pool	Allow.
Skimmer 2"	25'
Return 1 1/2"	30'
Return 1 1/2"	10'
POLARIS 1 1/2"	25'
RAYVAC 1 1/2"	25'
STUB OUT 1 1/2"	25'
BLOWER 2"	25'
FOUNTAIN 1 1/2"	25'
SPRAY 1 1/2"	10'
SOLAR RETS	-0-
TURBO CLEAN 2"	
ACTUATOR W/I 10' of Pool	25'
POOL COVER DR.	10'
LIGHT CONDUIT	10'
SPA 36 S.F.	60'
SPA 50 S.F.	80'

Revisions

NO 12/19/92

PLANS OK

BP 45625

OR Hodges

NAME: JAMES MILLER

ADDRESS: 11834 CHAPEL ESTATES DR.

CITY: CLARKSVILLE, MD. 21029

COUNTY: HOWARD ZONE: 1

TELEPHONE - HOME: 531-2904

OFFICE:

SCALE: 1/8" = 1'-0"

DATE: 9-23-92

DRAWN BY: D.J.T.

JOB NO: 92-3406 E.G.

11/1/92