

8/2/95  
ASAP - layout check

# PERMIT

## SEWAGE DISPOSAL SYSTEM

### DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 50808

A 37779

DISTRICT 5th

DATE 8-1-95

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~461-9933~~ 313-2640

# INDEXED

DATE SYSTEM APPROVED 8/2/95

INSPECTOR CW

Fogle's Septic Clean, Inc.

IS PERMITTED TO INSTALL  ALTER

ADDRESS 558-Obrecht Road, Sykesville, MD 21784

PHONE 795-5674

SUBDIVISION Clearview Estates LOT 19 ROAD 11901 Evening Court

PROPERTY OWNER Dr. & Dr. Gerard Apollon

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 4 feet below original grade. Bottom maximum depth 6 feet below original grade. Effective area begins at 4 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Beginning from the intersect of the 100.66 ft. lot line and 446.40' lot line, place the first trench 160 feet down the 446.40' lot line and 100 feet off the same lot line as seen when facing the lot from Evening 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 12/19/94 DKS*

PLANS APPROVED BY Sid Abel/Mark Rifkin

REVISED \_\_\_\_\_

DATE 12/12/84

COVER NO WORK UNTIL INSPECTED AND APPROVED

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

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS, 90° ELBOWS NOT ACCEPTABLE.

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

PERMIT VOID AFTER TWO YEARS

NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON, CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

A  
37779



# APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 37779

P \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SERVICES  
P. O. BOX 473 ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 992-2330

DISTRICT 10/09/86

DATE June 30, 1986

*10/29/86  
perc OK'd*

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 Dr. + Dr. GEREAD Apollon Martha V. Langenfelder  
Conrad J. and Patricia Langenfelder  
ADDRESS 11904 Clarksville Road 5511 Hamilton Avenue  
Clarksville, Maryland 21029 Baltimore, Maryland 21206  
PHONE 410-796-8257  
PROPERTY LOCATION: Clearview Assoc. Limited Partnership

SUBDIVISION Langenfelder Farm Clearview Est. Sec. 1 LOT NO. 10/9 Prelim  
19 on Final

ROAD AND DESCRIPTION Maryland Route 108 and Shepherd Lane  
11907 KAREN COURT BLDG. PERMIT SIGNED  
AND RETURNED 12/2/84

SIZE OF LOT 3.67 AC. 11901 Evening Court TYPE BLDG. Residential  
Sewer # 5703-SFD  
(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.  
Steven P. Murray  
(SIGNATURE OF APPLICANT)

APPROVED BY Sid Abul FOR Shallow trenches DATE 9-14-88

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

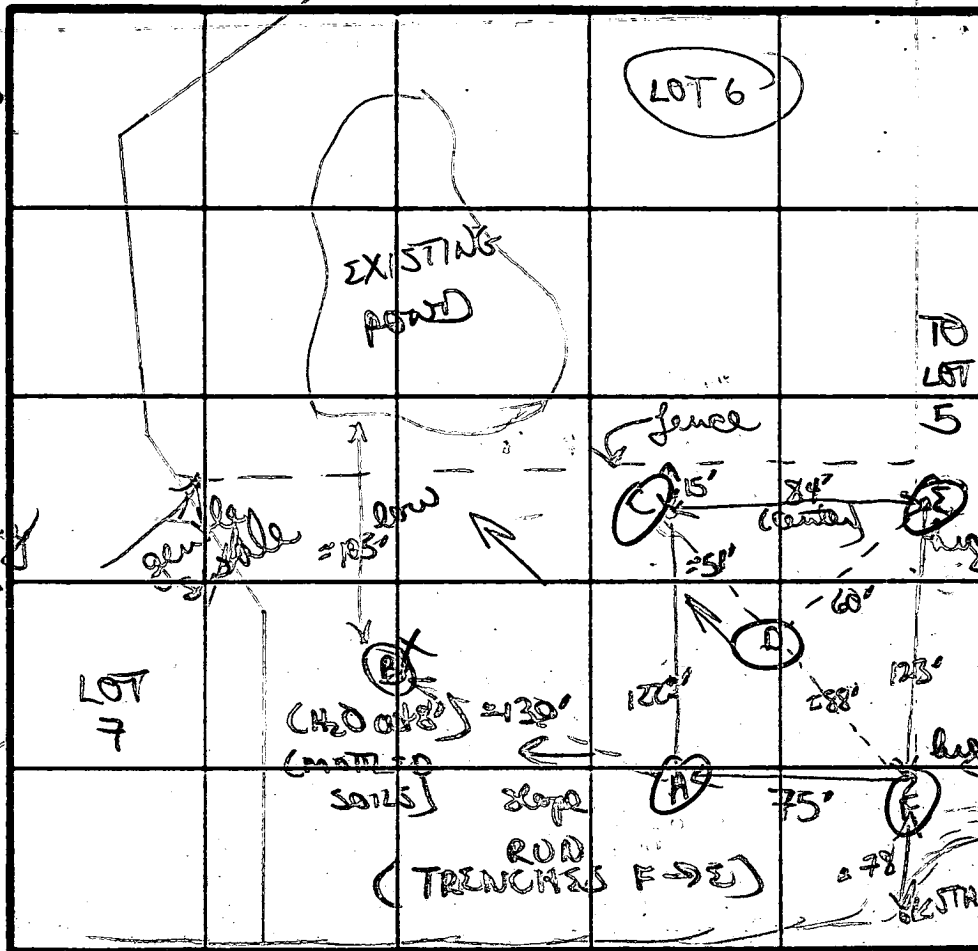
HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING for adjusted lot line proposal w/ new possible house & well site plus field work holes

BLDG. PERMIT SIGNED AND RETURNED 9-14-88 Sidul BP  
21269

# THIS IS NOT A PERMIT

INLET 4'  
 MAX 8'6"  
 100' 11' 11" SOIL PROFILE



mix getting chunky red brown clay sand loc

quickly to -4' grey powdery to tan brown powdery silty loc w/ crushed areas of sandstone

13'D

heavy red brown gritty chunky clay/clay sand loc

Brown/red gritty, hard chunky clay/sand loc

45' changing to grey powdery silty loc w/ few small scattered sandstone

13'D

Brown powdery silty loc

45' small frags -3'

grey tan powdery silty loc

11' small weathered frags

11' 12'D

Mix of brown orange powdery silty loc w/ brown chunky clay -3'

fine powdery silty loc w/ crushed & small frags sandstone

12'D

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
12/29/86	✓ D	5' 5"	113	120	120	128	8 MIN	
		13'D	bottom (see profile)					
	✓ C	4' 5"	114	115	115	116	1 MIN	
		11' 12'D	bottom (see profile)					
	✓ E	4' 5"	120	121	121	122	1 MIN	
		12' 12'D	bottom (see profile)					
	✓ A	4' 5"	1258	100	100	103	3 MIN	
		8' 12'D	1258	1259	1259	101	2 MIN	
		13'D	bottom (see profile)					
	✓ F	5' 5"	111	128	128	136	30 MIN	
		9' 12'D	111	125	125	153	20 MIN	
		13'D	bottom (see profile)					

5' gritty sandy mix to grey brown silty loc w/ patches sandstone

13'D

(hole E the except to others unless)

REMARKS: shifted perc uphill; 10'D on loc hole (B). Holes E & F may be just over lot line onto lot 5 & if so, need adjustments to lot for house + well slot

TYPE OF SOIL: ~~...~~ below mostly powdery silty loc

TESTED BY: B Nijm

ALSO PRESENT: Jane

# APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 37780  
P \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SERVICES  
P. O. BOX 473 ELLICOTT CITY, MARYLAND 21043  
TELEPHONE. 992-2330

DISTRICT \_\_\_\_\_  
DATE 10/10/86  
June 30, 1986

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 Conrad J. and Patricia Langenfelder Martha V. Langenfelder  
11904 Clarksville Road 5511 Hamilton Avenue  
ADDRESS Clarksville, Maryland 21029 PHONE Baltimore, Maryland 21206

PROPERTY LOCATION:

SUBDIVISION Langenfelder Farm LOT NO. X

ROAD AND DESCRIPTION Maryland Route 108 and Shepherd Lane

SIZE OF LOT 3.0 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.

Steven M. Gray  
(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

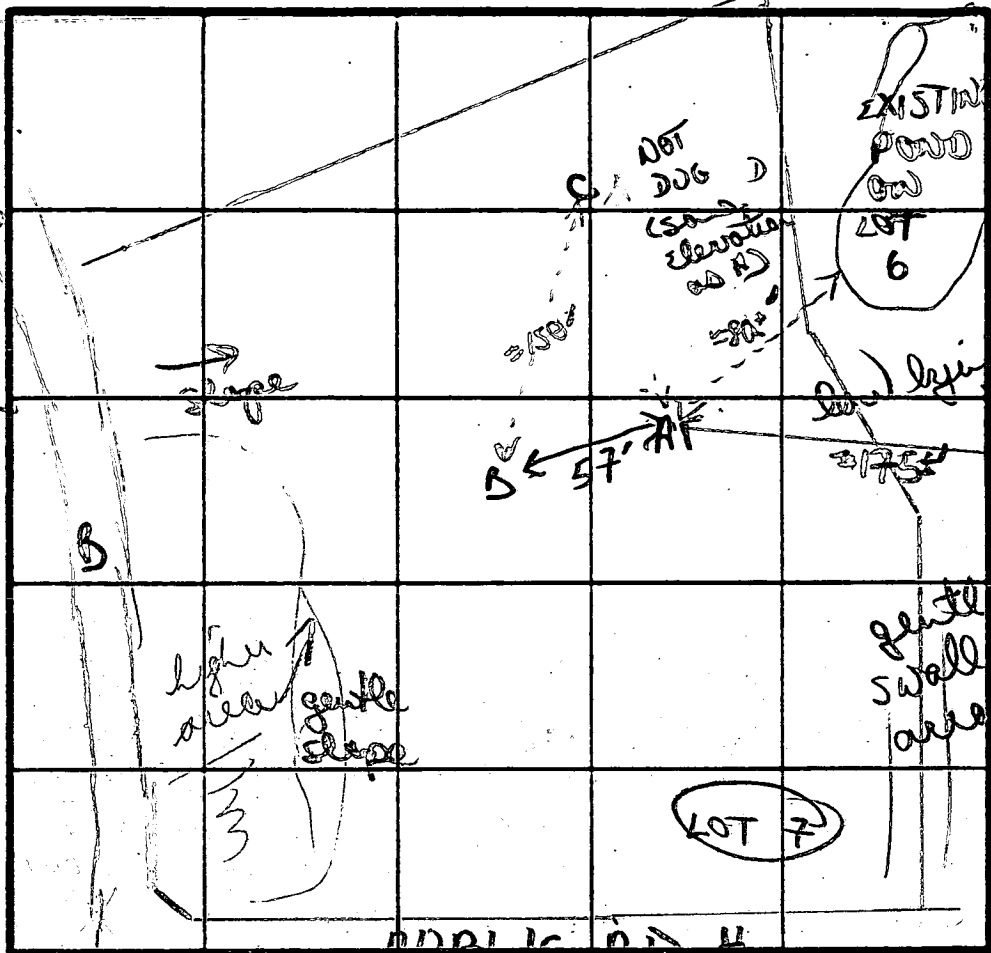
HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING \_\_\_\_\_

## THIS IS NOT A PERMIT

**A**  
SOIL PROFILE

AP 2012 30'  
brown to dark brown silty clay  
22' clay silty brown w/ blue/grey clay mottled soils  
150 5'



INDICATE NORTH NAME ADJOINING ROADWAY AS BASE LINE

Similar to soils/mottling to A  
150 6-6 1/2'

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
10/3/86	7A	H <sub>2</sub> O	at 5'	(see profile)			failed
	B	H <sub>2</sub> O	16'-6 1/2'	(see profile)			

REMARKS: Low lying area + near pond H<sub>2</sub>O mottled soils in holes dug. Lot readjustment probably needed to get sufficient area

TYPE OF SOIL: \_\_\_\_\_

TESTED BY: \_\_\_\_\_ ALSO PRESENT: \_\_\_\_\_

EMT 10/9

C1 9669

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 37779

DATE RECEIVED

DATE WELL COMPLETED 06/27/88

DEPTH OF WELL

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-88-0007

OWNER RANDALL CONSTRUCTION

STREET OR RFD last name KAREN COURT first name TOWN CLARKSVILLE

SUBDIVISION CLEARVIEW EST SECTION 1 LOT 219

WELL LOG

Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (Use additional sheets if needed) FEET FROM TO Check if water bearing

Table with columns for Description, Feet (From, To), and Check if water bearing. Includes handwritten entries: SAND 0-45, Gravelly rock 45-205.

GROUTING RECORD

WELL HAS BEEN GROUTED (Y) (N) TYPE OF GROUTING MATERIAL CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 9 NO. OF POUNDS 84 GALLONS OF WATER 54 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 31 ft.

CASING RECORD

casings types insert appropriate code below (S) (T) (C) (O) (P) (L) (O) (T) MAIN CASING Nominal diameter Total depth TYPE top (main) casing of main casing (nearest inch) (nearest foot) (S) (6) (52)

OTHER CASING (if used)

diameter depth (feet) inch from to

SCREEN RECORD

screen type or open hole insert appropriate code below (S) (T) (B) (R) (H) (O) (P) (L) (O) (T) STEEL BRASS OPEN HOLE BRONZE HOLE PLASTIC OTHER

DEPTH (nearest ft.)

Table for depth measurement with handwritten entry: H0 51 205.

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

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

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

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min. to nearest gal.) 12 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 24 WHEN PUMPING 30 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)

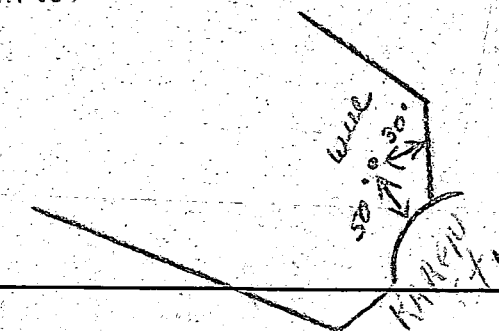
- A CIRCLE APPROPRIATE LETTER A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED E ELECTRIC LOG OBTAINED P TEST WELL CONVERTED TO PRODUCTION WELL

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 10.17.13 "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. 238 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

DRILLER County



STATE OF MARYLAND  
DEPARTMENT OF HEALTH AND MENTAL HYGIENE  
Laboratories Administration

201 W. Preston St.  
P.O. Box 2355, Baltimore, Maryland 21203  
J. Mehsen Joseph, Ph.D., Director

CO165501808

Lab No. \_\_\_\_\_

WATER ANALYSIS

Bottle Number: W1552 Name: CONST., RANDALL County: HOWARD

Source of Sample: LOT 5 3201 CLEARVIEW EST Street: KARSON COURT Collector: BAJIXOR

Sample Type (Circle): Community Source  Non-Community Distribution  Private MCL  Emergency Recheck  Routine

Remarks: NO 28 0007 (slight tint of sediment)

NOTE SAMPLE TAKEN DURING DRAWDOWN: A FACTOR FOR TURBIDITY IRON LEVELS

County: 13 Plant No.      Sampling Station      Date Collected 062788 Time 12:00 Acid  Iced

Field Data: pH\*      Chlorine Residual      Free      Total      Specific Conductance     

✓	ANALYSIS	CODE	RESULTS	✓	ANALYSIS	CODE	RESULTS
	pH*	00403			Arsenic	01002	
	Alkalinity (Total)	00410			Barium	01007	
	pH*, Ca CO <sub>3</sub> SAT.	70311			Cadmium	01027	
	Alkalinity, Ca CO <sub>3</sub> SAT.	74023			Chromium	01034	
	Hardness	00900			Lead	01051	
	Ammonia-N	00608			Mercury	71900	
X	Nitrate-Nitrate N	00630	<u>1210</u>		Selenium	01147	
	Nitrite N	00615			Silver	01077	
	MBAS	38260					
	Chloride	00940			Aluminum	01105	
	Fluoride	00951			Calcium	00916	
X	Color <u>10</u>	00081	<u>4</u>		Copper	01042	
X	Turbidity*	00076	<u>100</u>	X	Iron	01045	<u>442</u>
	Conductance*, SPEC	00095			Magnesium	00927	
	Sulfate	00945			Manganese	01055	
	Total Solids	00500			Nickel	01067	
	Dissolved Solids	70300			Potassium	00937	
					Sodium	00929	
					Zinc	01092	

\*Results reported in units, all others in milligrams per liter (ppm)

Date Received JUN 28 1988 Date Reported JUL 8 1988 Chemist

# 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

July 21, 1988

Randall Construction  
5501 Twin Knolls  
Columbia, Maryland 21045

RE: Clearview Estates - Lot 5  
Karen Court  
Well Tag Number: HO-88-0007

To Whom It May Concern:

The water sample recently submitted for testing from the above referenced water supply revealed that nitrate-nitrogen was present at a concentration of 21.0 parts per million. COMAR 10.17.13.09 prohibits approval of any water supply with a nitrate-nitrogen contaminant level in excess of 10 parts per million.

This department will grant a Permanent Deviation from that regulation if a nitrate removal device is installed that effectively maintains the nitrate-nitrogen contaminant level below the 10 parts per million requirements. Once this device is installed, it will be necessary for you to comply with the following conditions before a Final Certificate of Potability can be issued:

1. Within six months, you must have your water re-tested to insure that the installed nitrate removal system is operating properly. Thereafter a yearly nitrate analysis is recommended.
2. There must be continuing service contract with a plumbing contractor or water treatment service company to maintain the efficiency of the nitrate removal device. You must supply this Department with a copy of that contract.
3. If in the future, you decide to sell or rent your home, you must make any potential buyer/tenant aware of the above condition.

If you have any questions relative to this matter, or if the device has been installed and you are ready for resampling, please call me at 461-9933.

Very truly yours,

A handwritten signature in cursive script that reads "Sean Baker".

Sean Baker, Sanitarian  
Water and Sewerage Program

SB:JR

FOUNTAIN VALLEY ANALYTICAL LABORATORY, INC.

MICROBIOLOGICAL \* CHEMICAL \* PHYSICAL WATER ANALYSIS

1413 Old Taneytown Road  
Westminster, MD 21158

MD State Certification #133  
(410) 848-1014 or 876-4554

WATER ANALYSIS REPORT

ACCOUNT NUMBER: 1620  
LABORATORY ID NUMBER: 18675  
LOCATION: 11901 Evening Court

COMPANY: Davies Development  
REQUESTED BY: Bob Watson  
SOURCE: Well  
SITE: Hose From Holding Tank  
COLLECTED BY: D.K. 95-621 (FVAL)  
@ RESIDUAL CHLORINE: None Detected  
WATER SUPPLY TREATED: NO  
TYPE OF TREATMENT: NONE

CLARKSVILLE, HO, MD, 21029

DATE/TIME COLLECTED: 12-13-1995, 1315

DATE/TIME REC'D LAB: 12-13-1995, 1450

WELL NUMBER: NO TAG

PARAMETER	RESULTS	REFERENCE	UNITS
pH RESULTS @	<u>5.8</u>	6.5 - 8.5	pH Units
NITRATES	<u>12.9</u>	10 OR LESS	mg/L (PPM)

MULTIPLE TUBE ONPG/MUG TEST:

COLIFORMS, TOTAL	<u>1</u> <u>1.1</u>	0 tubes out of 10 Less than 1.1	MPN/100ml
COLIFORMS, FECAL	<u>0</u> <u>&lt;1.1</u>	0 tubes out of 10 Less than 1.1	MPN/100/ml

ADDITIONAL TEST:

PARAMETER	RESULTS	REFERENCE	UNITS
Sand Turbidity	<u>None</u> <u>2.2</u>	None Less Than 10	NTU

PLEASE NOTE: A SATISFACTORY TEST RESULTS INDICATES THAT THE PARAMETER(S) TESTED FOR WERE WITHIN POTABLE WATER LIMITS AT THE TIME OF SAMPLING.

@ DENOTES SAMPLE ANALYZED IN THE FIELD.

DATE REPORTED: 12-14-1995

LABORATORY DIRECTOR:

*Chas Mooshian*  
Charles Mooshian, BS, MT(HHS)

COMMENTS: Use & Occupancy.

Sample Analyzed As Received



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## HOWARD COUNTY HEALTH DEPARTMENT

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

December 15, 1995

Dr. and Dr. Gerard Apollon  
6303 Roan Stallion Lane  
Columbia, Maryland 21045

RE: Clearview Estates, Lot #19  
11901 Evening Court  
Well Permit #HO-88-0007

Dear Dr. and Dr. Apollon:

This to advise you that the septic system for the above referenced property was installed, inspected and approved on August 2, 1995.

The water sample recently submitted for testing was free of coliform and fecal coliform bacteria at the time of sampling and is bacteriologically safe for drinking.

The nitrate sample result was documented to be 12.9 ppm on December 13, 1995. A nitrate device has not been installed to treat the excessive nitrate contamination. COMAR 26.04.04.09 prohibits approval of any water supply with a nitrate-nitrogen contaminant level in excess of 10 parts per million. This department will grant a temporary deviation to that section of the regulation on condition that the nitrate removal system is installed within a period of 30 days from receipt of this letter. The nitrate removal system must effectively maintain the nitrate-nitrogen contaminant level below 10 parts per million.

Furthermore, it will be necessary for you to comply with the following conditions:

1. The system must be properly operated and maintained continuously in accordance with the service contract for the life of the residence.
2. A yearly nitrate analysis should be performed by a laboratory certified for water testing.
3. If you decide to sell or rent your home in the future, you should make any potential buyer/tenant aware of the above condition.

Dr. and Dr. Apollon

Clearview Estates, Lot #19

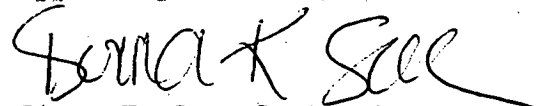
### INTERIM CERTIFICATE OF POTABILITY

This certifies that the initial sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under permit #HO-88-0007. No guarantee can be given for health protection beyond this date of issue. Based upon satisfactory investigation and evaluation by the Howard County Health Department, the Department of the Environment accepts this well system as required by COMAR 26.04.04.09.

This certificate may become final upon completion of the final bacteriological and nitrate tests which are to be taken by the county health department within six months of the date of this letter. Additionally, this certificate may become final upon acceptance by the owner of the requirement to install a nitrate removal device and conditions pertaining to the device.

Date of Water Sample: December 13, 1995  
Date of Well Completion: June 27, 1988

Approving Authority



Donna K. Soe, Sanitarian  
Water and Sewerage Program

DKS

cc: Building Inspector's office  
file

C303056 E12 8

WATER ANALYSIS

Do not write above this line.

S  
A  
M  
P  
L  
E  
I  
D

Bottle Number HO-13-125 Name Dr. Appolon County Howard County Code 13

Source: Kitchen Nitrate system - 11901 Evening Ct Date Category Code 44

Collected: Date 3/12/96 Time 9:30 Collector & Phone B. Canning-313-2640 Submitter Code 11

CHECK (one per box):

Drinking Water <input checked="" type="checkbox"/>	Community <input type="checkbox"/>	Source (raw water) <input checked="" type="checkbox"/>	Emergency <input type="checkbox"/>	Federal Project <input type="checkbox"/>
Landfill <input type="checkbox"/>	Non-community <input type="checkbox"/>	Distribution (treated) <input type="checkbox"/>	Routine <input type="checkbox"/>	
Stream <input type="checkbox"/>	Private <input type="checkbox"/>	MCL <input type="checkbox"/>	Recheck <input type="checkbox"/>	
Other <input type="checkbox"/>	Other <input type="checkbox"/>		Special <input type="checkbox"/>	

F  
I  
E  
L  
D

Plant No.            Sampling Station            Preservation: Iced  Acid  Type of Acid H2504

pH 7.0 Chlorine: Free 0.0 Total 0.0 Specific Conductance           

Notes to Lab/Remarks:           

*J.L.S.*

CHECK TESTS	TESTS	CODES	ERROR CODE	G/L	RESULTS	DATE ANALYZED	ANALYST INITIALS
	Alkalinity (Total)	00410					
	Alkalinity, Ca CO <sub>3</sub> Sat.	74023					
	Ammonia - N	00608					
	Chloride	00940					
	Color*	00081					
	Conductance*, spec.	00095					
	Dissolved Solids	70300					
	Hardness	00900					
	Fluoride	00951					
	Nitrite, N	00615					
✓	Nitrate - Nitrate, N	00630			1.5	3-13-96	BK
	pH*, Ca CO <sub>3</sub> SAT.	70311					
	Sulfate	00945					
	Total Solids	00500					
	Turbidity*	00076					
	Other:						

\* Results reported in Units, all others in milligrams per liter (ppm)

Number of Tests Requested           

Section Chief Asoka I. Katumuluwa

Date Reported

MAR 13 1996

**Partial List of Submitter Codes**

96 MAR 18 AM 9:17

<u>Code</u> <u>Description</u>	<u>Code</u> <u>Description</u>
1-30 County Codes	53 Chesapeake Bay & Special Projects
41 Individual Septics & Wells Program	59 Standard & Certification Program
42 Water Supply Program	63 Division of Food Control
43 Recreational Sanitation & Migrant Camps, DHMH	64 Engineering & Maintenance, DHMH
44 STP Inspection Division	65 Division of Community Services
45 Hazardous & Solid Waste Admin. (Landfill Samples)	66 Office of Attorney General
46 Pre-Treatment Enforcement Division	67 Dept. of General Services
48 Licensing and Certification, DHMH	77 E.P.A.
52 Water Quality Monitoring Program	91 State Highway Administration
	96 L.U.S.T./U.S.T./CERCLA
	99 Unknown

**Codes for Federally Funded Projects (leave box blank if not federal)**

<u>Code</u> <u>Description</u>	<u>Code</u> <u>Description</u>
S Safe Drinking Water Act (SDWA)	N National Pollution Discharge Elimination System (NPDES)
R Resource Conservation and Recovery Act (RCRA)	M Miscellaneous (Other)

**Partial List of Data Category Codes**

<u>Code</u> <u>Description</u>	<u>Code</u> <u>Description</u>
1F Sediment Samples	2F Innovative Disposal
2A Industrial Effluents/Compliance	5A Solid Waste/Landfills
2B Industrial Grab	5B Kidney Dialysis
2C Municipal Compliance	5C Commercial Bottled Waters
2D Municipal Grab	5D Misc. Wastewaters
4A MCL Surveys	5E Misc. River/Stream
4B Routine Monitoring & Other Communities	5F Misc. Drinking Water
4D Potable - County Community	5G Swimming Pools
4E Potable - Non Community	5H Marine or Estuarine Natural Bathing Areas
4F Potable - Private Wells	
4G Real Estate Trans./Charge Samples	

**Partial List of Error Codes**

<u>Code</u> <u>Description</u>	<u>Code</u> <u>Description</u>
A Laboratory Accident	J Wrong sample type
C Mechanical/Materials failure	RR No sample received
D Insufficient Sample	X Improper preservation
E Sample past holding time	LL Mislabelled sample



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HOWARD COUNTY HEALTH DEPARTMENT

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

July 8, 1996

Dr. and Dr. Gerald Apollon  
11901 Evening Court  
Clarksville, Maryland 21029

RE: Clearview Estates, Lot #19  
11901 Evening Court  
Well Permit #HO-88-0007

Dear Dr. and Dr. Apollon:

A review of our records indicates that a nitrate treatment device is installed at the above referenced property. Therefore, it will be necessary for you to schedule a final appointment so that a sample for nitrate testing can be taken from a tap treated for nitrates. This sample is required to verify that the nitrate treatment device is operating properly. You will receive a final approval for your well water supply, with the nitrate treatment device in use, provided that the sample results show nitrates at an acceptable level.

Please call this office at (410) 313-2640 to schedule the final water sample appointment. Thank you in advance for your prompt attention to this matter. We apologize for any inconvenience.

Sincerely,

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

DKS

C300333 #22 5

WATER ANALYSIS

Do not write above this line.

S Bottle Number 10-13-142 Name ADOLPH County Howard County Code 13  
 M Source 11901 Evening Ct. - Kitchen Nitrate System Date Category Code 4F  
 P Collected: Date 7/2/96 Time 9:30 Collector & Phone B. Canning - 313-2640 Submitter Code       
 E CHECK (one per box)  
 I Drinking Water  Landfill  Stream  Other   
 D Community Non-community  Private  Other   
 Source (raw water)  Distribution (treated)  MCL   
 Emergency Routine  Recheck  Special  Federal Project  S

F Plant No.      Sampling Station      Preservation: Iced  Acid  Type of Acid H2SO4  
 I pH 7.0 Chlorine: Free 0.0 Total 0.0 Specific Conductance       
 E Notes to Lab/Remarks: F.C.O.P.  
 L J.L.  
 D

CHECK TESTS	TESTS	CODES	ERROR CODE	G/L	RESULTS	DATE ANALYZED	ANALYST INITIALS
	Alkalinity (Total)	00410					
	Alkalinity, Ca CO <sub>3</sub> Sat.	74023					
	Ammonia - N	00608					
	Chloride	00940					
	Color*	00081					
	Conductance*, spec.	00095					
	Dissolved Solids	70300					
	Hardness	00900					
	Fluoride	00951					
	Nitrite, N	00615					
✓	Nitrate - Nitrate, N	00630			1.5	7-23-96	BR
	pH*, Ca CO <sub>3</sub> SAT	70311					
	Sulfate	00945					
	Total Solids	00500					
	Turbidity*	00076					
	Other:						

\* Results reported in Units, all others in milligrams per liter (ppm)

Number of Tests Requested 01

Section Chief Asoka I. Katumuhwa

Date Reported JUL 23 1996

RECEIVED  
HOWARD CO. HEALTH DEPT.  
ENVIRONMENTAL HEALTH

1996 JUL 26 P 12: 54

**Partial List of Submitter Codes**

<u>Code</u>	<u>Description</u>	<u>Code</u>	<u>Description</u>
1-30	County Codes	53	Chesapeake Bay & Special Projects
41	Individual Septics & Wells Program	59	Standard & Certification Program
42	Water Supply Program	63	Division of Food Control
43	Recreational Sanitation & Migrant Camps, DHMH	64	Engineering & Maintenance, DHMH
44	STP Inspection Division	65	Division of Community Services
45	Hazardous & Solid Waste Admin. (Landfill Samples)	66	Office of Attorney General
46	Pre-Treatment Enforcement Division	67	Dept. of General Services
48	Licensing and Certification, DHMH	77	E.P.A.
52	Water Quality Monitoring Program	91	State Highway Administration
		96	L.U.S.T./U.S.T./CERCLA
		99	Unknown

**Codes for Federally Funded Projects (leave box blank if not federal)**

<u>Code</u>	<u>Description</u>	<u>Code</u>	<u>Description</u>
S	Safe Drinking Water Act (SDWA)	N	National Pollution Discharge Elimination System (NPDES)
R	Resource Conservation and Recovery Act (RCRA)	M	Miscellaneous (Other)

**Partial List of Data Category Codes**

<u>Code</u>	<u>Description</u>	<u>Code</u>	<u>Description</u>
1F	Sediment Samples	2F	Innovative Disposal
2A	Industrial Effluents/Compliance	5A	Solid Waste/Landfills
2B	Industrial Grab	5B	Kidney Dialysis
2C	Municipal Compliance	5C	Commercial Bottled Waters
2D	Municipal Grab	5D	Misc. Wastewaters
4A	MCL Surveys	5E	Misc. River/Stream
4B	Routine Monitoring & Other Communities	5F	Misc. Drinking Water
4D	Potable - County Community	5G	Swimming Pools
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**Partial List of Error Codes**

<u>Code</u>	<u>Description</u>	<u>Code</u>	<u>Description</u>
A	Laboratory Accident	J	Wrong sample type
C	Mechanical/Materials failure	RR	No sample received
D	Insufficient Sample	X	Improper preservation
E	Sample past holding time	LL	Mislabeled sample



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## HOWARD COUNTY HEALTH DEPARTMENT

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

August 5, 1996

Dr. Gerald Apollon and Dr. Apollon  
11901 Evening Court  
Clarksville, Maryland 21029

RE: Clearview Estates, Lot #19  
11901 Evening Court  
Well Permit #HO-88-0007

Dear Drs. Apollon:

This is to advise you that the septic system for the above referenced property was installed, inspected, and approved on August 2, 1995.

The water sample recently submitted for testing was free of coliform and fecal coliform bacteria at the time of sampling and is bacteriologically safe for drinking.

A nitrate device has been installed to treat the previously documented excessive nitrate contamination. The nitrate removal system appears to be operating properly as evidenced by the recent water sample taken on July 12, 1996.

COMAR 26.04.04.09 prohibits approval of any water supply with a nitrate-nitrogen contaminant level in excess of 10 parts per million. This department will grant a Permanent Deviation to that section of the regulation on condition that the nitrate removal system effectively maintains the nitrate-nitrogen contaminant level below the 10 parts per million requirement.

### FINAL CERTIFICATE OF POTABILITY

This certifies that all sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under permit(s) #HO-88-0007. It will be necessary for you to continue to comply with the following conditions:

Drs. Apollon

Clearview Estates, Lot #19

1. The system should be properly operated and maintained continuously, in accordance with the service contract for the life of the residence.
2. A yearly nitrate analysis should be performed by a private laboratory certified for water testing.
3. If you decide to sell or rent your home in the future, you should make any potential buyer/tenant aware of the above condition.

Dates of Water Samples:    March 12, 1996  
                                  June 17, 1996 (Bacteriological)  
                                  July 12, 1996 (Nitrates)

Date of Well Completion:    June 27, 1988

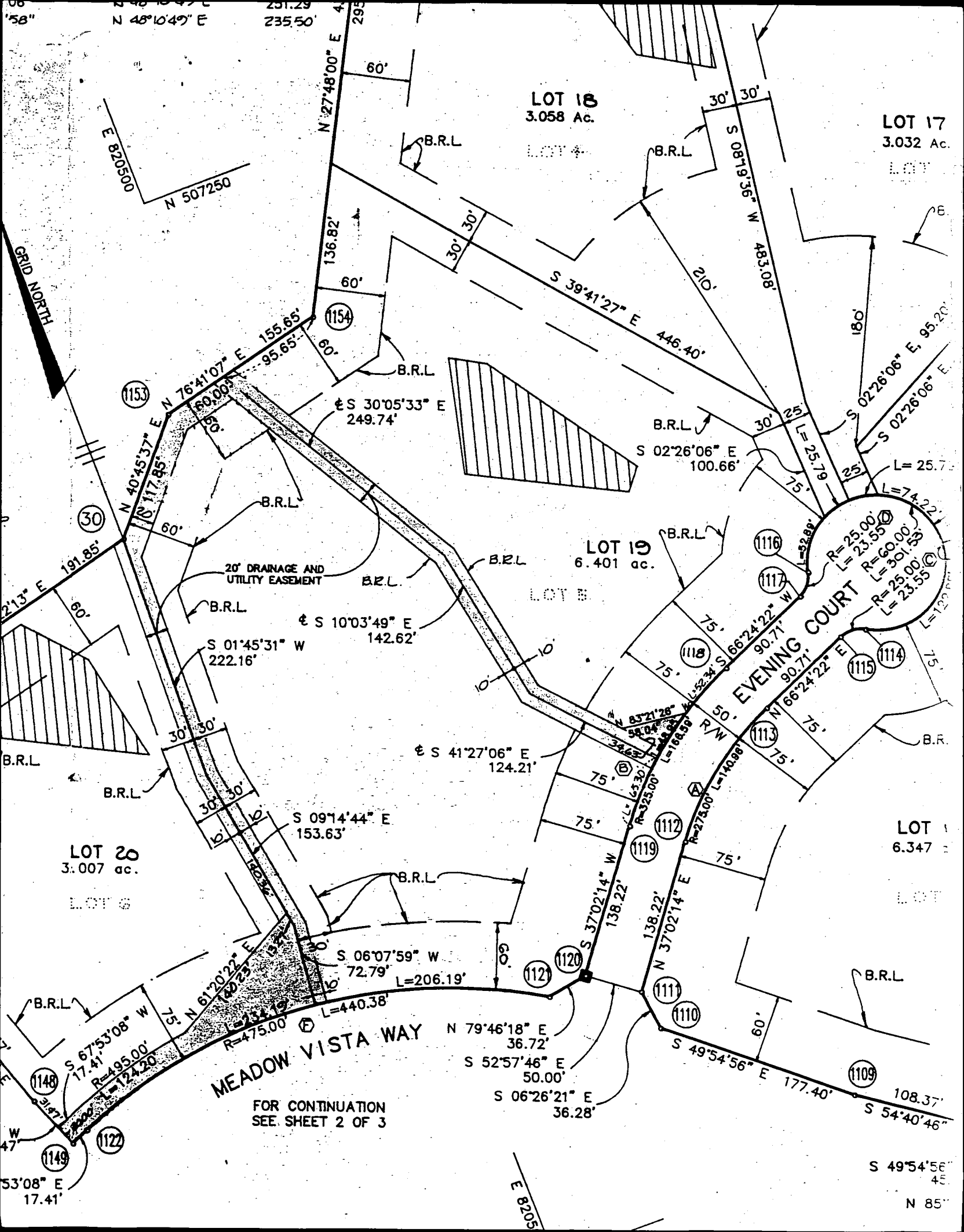
Approving Authority

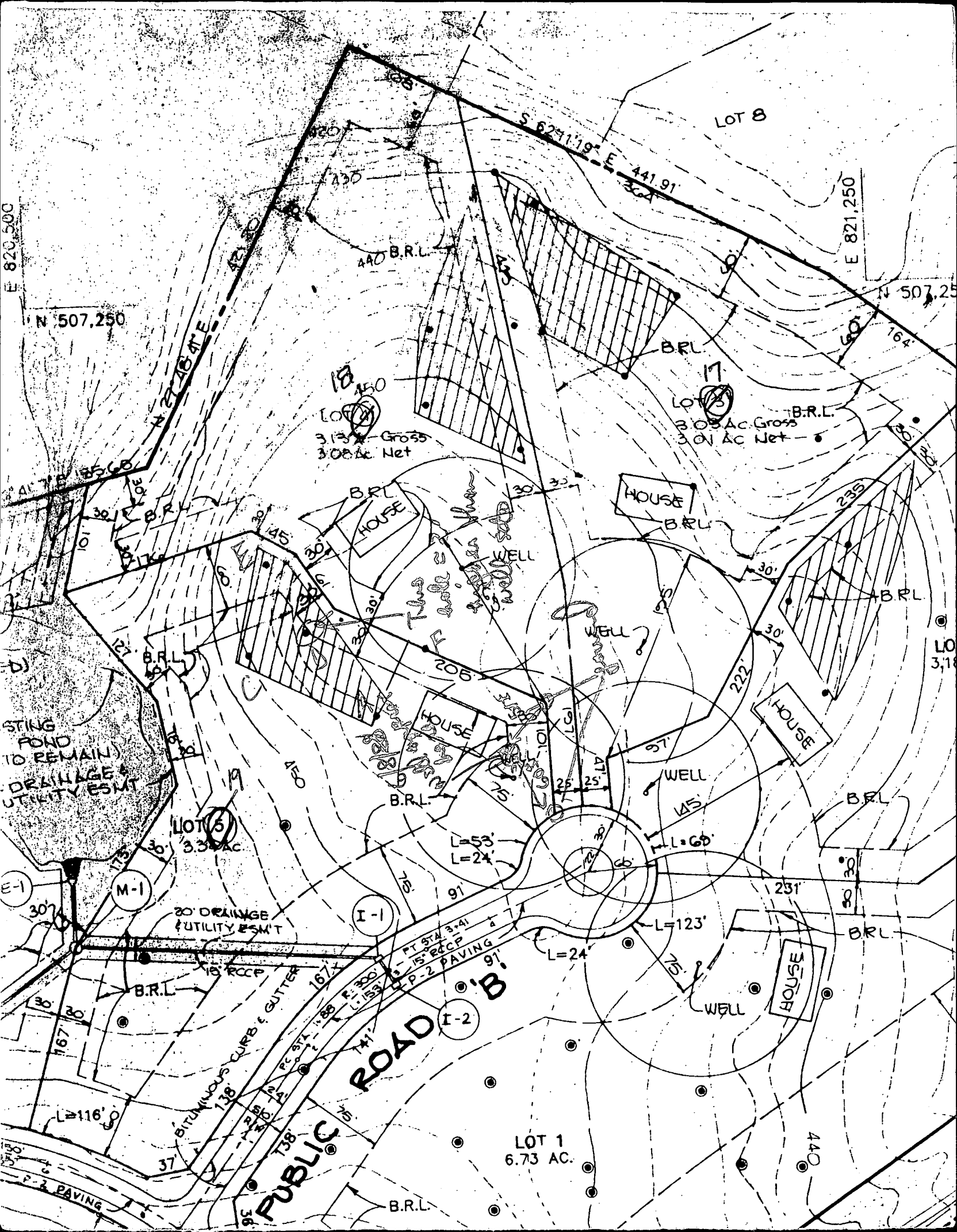


Donna K. Soe, R.S.  
Water and Sewerage Program

DKS

cc: file



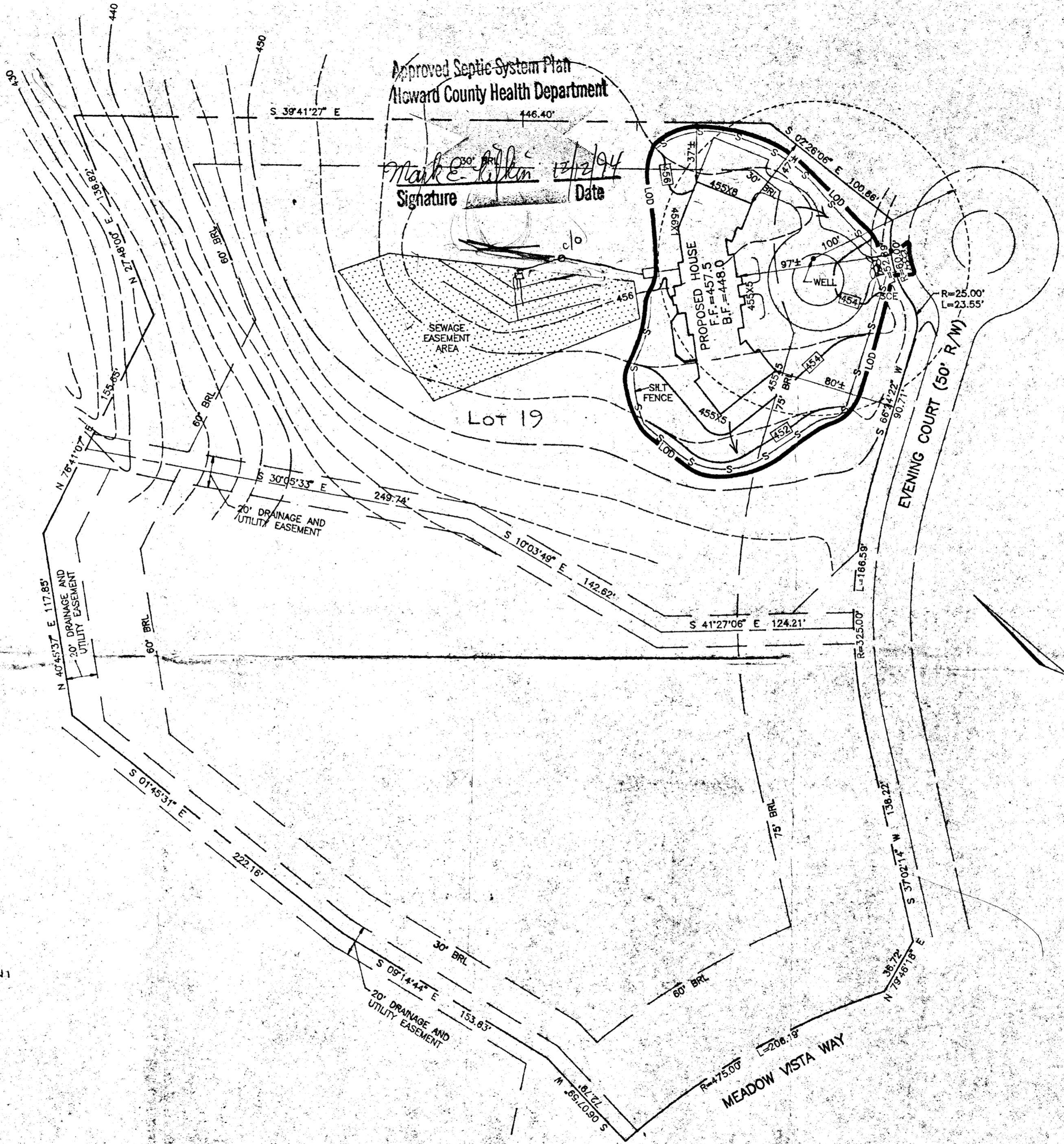


4 BEDROOMS = 280 LF OF TRENCH

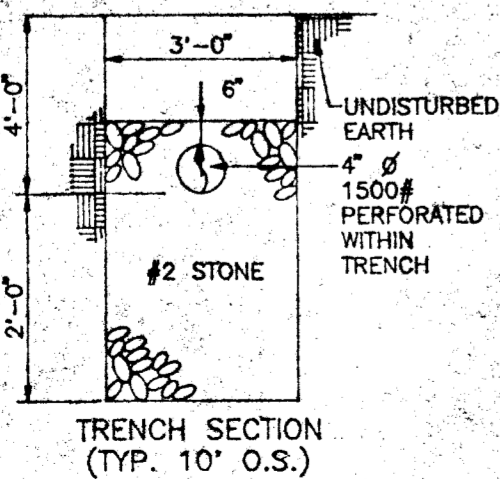
BASEMENT ELEV.: 448.0  
 FIRST FLOOR ELEV.: 457.5  
 INV. OUT OF HOUSE: 454.2  
 INV. INTO SEPTIC TANK: 454.0  
 INV. OUT OF SEPTIC TANK: 453.7  
 INVERT INTO DISTRIBUTION BOX: 452.4  
 INV. INTO TRENCH: 452.1  
 EX GRADE AT SEPTIC TANK: 456.1  
 EX GRADE AT DISTRIBUTION BOX: 456.2  
 EX GRADE AT TRENCH: 456.1  
 ELEV. OF GROUND AT WELL: 454.7

Approved Septic System Plan  
 Howard County Health Department

Mark E. Vogel  
 Signature Date 11/2/94



NOTE  
 • PERC FIELD & WELL LOCATION ARE FROM HEALTH DEPARTMENT RECORDS.  
 • TOPOGRAPHY SHOWN HEREON SUPPLIED BY CLIENT  
 • PROPERTY OUTLINE OBTAINED FROM CLEARVIEW ESTATES SECTION 1 RECORD PLAT, PROPERTY DOES NOT MATHEMATICALLY CLOSE.



LEGEND  
 -478- EXISTING CONTOUR  
 -478- PROPOSED CONTOUR  
 -S- SILT FENCE  
 -L.O.D.- LIMIT OF DISTURBANCE

PREPARED FOR:  
 DAVIES DEVELOPMENT CORPORATION  
 10176 BALTIMORE NATIONAL PIKE SUITE 210  
 ELLICOTT CITY, MARYLAND 21043  
 TELEPHONE: (410) 750-007

**MV** Marks & Vogel Associates, Inc.  
 Engineers-Surveyors-Planners  
 461-5828

SCALE: 1"=50'  
 DRAWN BY: D.G.H.  
 CHECKED BY: R.H.V.  
 DATE: NOVEMBER, 1994  
 W. O. #

PLOT PLAN  
 FOR  
 LOT 19  
 CLEARVIEW ESTATES SECTION 1  
 HOWARD COUNTY, MARYLAND  
 CLEARVIEW ESTATES SECTION 1  
 5TH ELECTION DISTRICT  
 TAX MAP 29 & 35  
 LOT 19  
 PARCEL 11

