

11/18/88 AM

04-340221

N

# PERMIT

P 42965

SEWAGE DISPOSAL SYSTEM

A 37855

MARYLAND STATE DEPARTMENT OF HEALTH

DISTRICT 4th

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH

461-9933

## INDEXED

DATE 11/9/88

DATE SYSTEM APPROVED 11/27/88

INSPECTOR RH

Donald Parlette

IS PERMITTED TO INSTALL  ALTER

ADDRESS 6575 Route 32, Clarksville, Maryland PHONE 531-2140

SUBDIVISION Whiteley Property ROAD 2229 Daisy Road LOT \_\_\_\_\_

PROPERTY OWNER Alan Whiteley

ADDRESS \_\_\_\_\_

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES \_\_\_\_\_ NO X

SEPTIC TANK CAPACITY 1000 GALLONS NUMBER OF BEDROOMS 3

TRENCHES - 200 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 4 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Place the first trench 195 feet up the left (370.95') lot line and 80 feet off the same lot line as seen when facing the property from Daisy Road. Run trenches on contour toward the left lot line.

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

PLANS APPROVED BY Sid Abel DATE 8/04/88

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 TRENCH(IES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(IES)

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

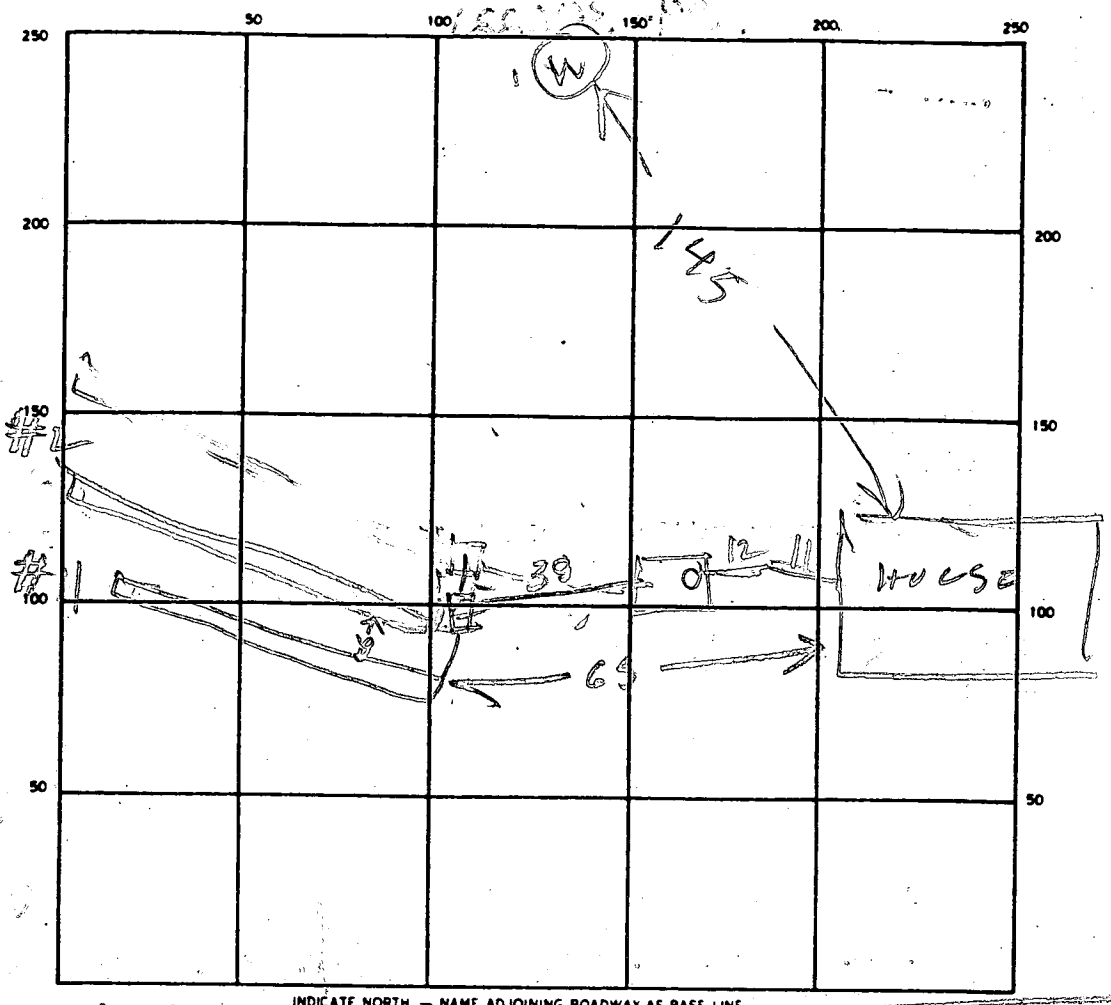
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

\*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

A 37855



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

DAISY RD

ST  
O/C

SEPTIC TANK LEVEL 1500

CLEANOUTS ST O/C

DISTRIBUTION BOX LEVEL \_\_\_\_\_

DRAIN FIELD/TILE FIELD DEPTH 9.9 FT. TRENCH WIDTH 2.2 FT. INLET DEPTH 4.5 FT.

EFFECTIVE GRAVEL DEPTH 4.5 FT. TOTAL LENGTH 67.9 FT. 6 INSTALLED / REPAIR

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 283 / 343 SQ FT 626 / 500

DRYWELL INSIDE DIAMETER \_\_\_\_\_ FT. EFFECTIVE DEPTH BELOW INLET \_\_\_\_\_ FT.

ABSORBENT AREA \_\_\_\_\_ SQ. FT.

REMARKS  
11/18/88 LOCATION LOOKS OK PER PLAN TRENCHES DUG  
 OK TO COVER TANK & HOUSE SEWER ADD STONE BY CALL RH  
11/21/88 - STONE AREA TO TRENCHES OK TO  
 COVER

DATE SYSTEM APPROVED 11/21/88

INSPECTOR Raymond Hodges

SUBDIVISION: WITTELEY PROPERTY

LOT NUMBER:

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

200 sq. ft./bedroom

Trench to be 2 wide.

Inlet 4 feet below original grade.

Bottom maximum depth 8 feet below original grade.

Effective area begins at 4 feet below original grade.

4 feet of stone below distribution pipe.

- 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: PLACE THE FIRST TRENCH 195 FE UP THE LEFT (370.95)  
LOT LINE AND 80 FE OFF THE SAME LOT LINE AS SHOWN WHEN  
FACING THE PROPERTY FROM DAISY RD. RUN TRENCHES ON  
CONTOUR TOWARD THE LEFT LOT LINE. 8-4-88 SAW

10/15/86  
1:30

# APPLICATION

PERCOLATION TESTING

A 37855

P \_\_\_\_\_

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

DISTRICT \_\_\_\_\_

DATE 10/14/86

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 ALAN L. WHITELEY ✓

ADDRESS 8429 SNOWDEN OAKS, LAUREL, MD PHONE 776-2066

PROSPECTIVE BUYER \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

PROPERTY LOCATION:

SUBDIVISION MAP 14 Block 1 P 102 LOT NO. \_\_\_\_\_

ROAD AND DESCRIPTION 2229 Baisy Rd ✓

TAX MAP 14 PARCEL # P102

SIZE OF LOT 5+ AC. TYPE BLDG. Single Fam.  
(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.

Alan L. Whiteley  
(SIGNATURE OF APPLICANT)

APPROVED BY Sidney Abul FOR Deys Funches DATE 8-4-88

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

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

REASONS FOR REJECTION OR HOLDING 10/13/86 Perc OK Holed for Certificate  
Hole Plat leave lot 3 out of Area  
Send standard Form Letter to Whiteley

BUDG. PERMIT SIGNED  
AND RETURNED 8/9/88  
BP 20458  
S. Abul

# THIS IS NOT A PERMIT

SOIL PROFILE

0  
4

BROWN CLAY TOPSOIL

PINK BROWN SAND LOAM

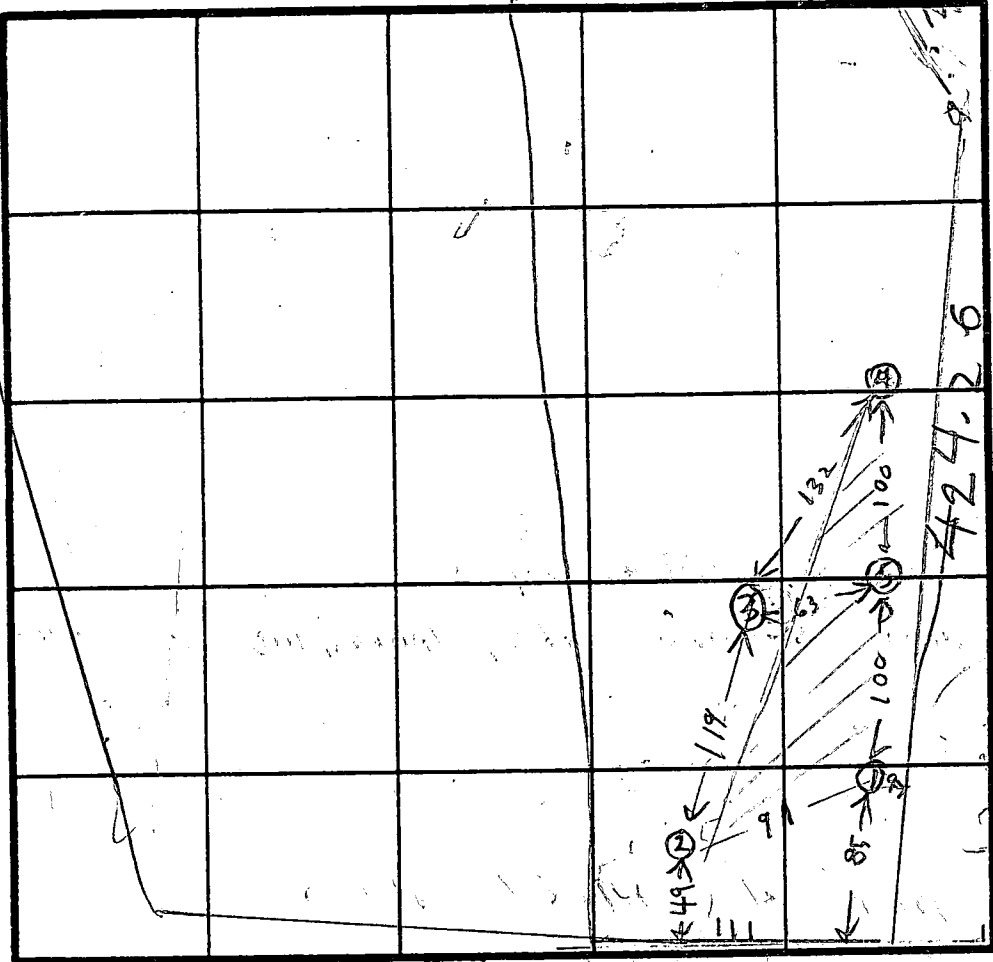
(5)

BROWN CLAY

4

PINK BROWN SAND LOAM

12



SEE PL7

HOLE ELEVATION

(1) LOWEST

(2) NEXT LOWEST

(4) HIGHEST

(5) (3) MEDIUM

(2)

BROWN SILT CLAY

BROWN SAND SILT LOAM

(3)

BROWN CLAY

BROWN HARD SILT SAND LOAM

(4)

CLAY

PINK BROWN SAND LOAM

10/6 SAPROLITE

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DAISY RII

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
10/9/86	1S	4.5	150	210	210	237	27
	1V	12	OK				
	2S	5.5	215	230	330	348	18
	2V	13	OK				
	3V	4.5	255	309	309	354	5 LOW
		10 1/2	OK BELOW		6 FT		
	4D	8	328	328 1/2	328 1/2	329	1/2
	4	4.5	335	340	340	348	
	4V	13	OK				
	5V	12	OK				

REMARKS \_\_\_\_\_

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

TESTED BY B. Hodges ALSO PRESENT WHITLEY PAPLET

009/6

051

# APPLICATION

A 23241

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 4

DATE 5/10/76

$\bar{t} = 11 \text{ min} \Rightarrow 120 \text{ } \cancel{\text{A}} / \text{BR} \quad 124 \cancel{\text{A}}$   
 $\rightarrow 145 \cancel{\text{A}} / \text{BR}$

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 M. G. Filling Ted Johnson  
7852 Cindy Drive

ADDRESS Daisy Road, Woodbine, Md. Glen Burnie, Md. PHONE Any questions call: John Gary 788-2618

PROPERTY LOCATION:

SUBDIVISION \_\_\_\_\_ LOT NO. 2 ac lot

ROAD AND DESCRIPTION Daisy Road - approx. 3 miles from Route 144 on Daisy Road - left side before Bushey Park Road

SIZE OF LOT 40,000 sq. ft. 2 ac ± TYPE BLDG. 3 or 4

IF NOT SINGLE RESIDENCE DESCRIBE \_\_\_\_\_ NUMBER OF BEDROOMS (Single Fmly. Dwlg.)

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

SIGNATURE OF APPLICANT /s/ Mr. Lancelotta

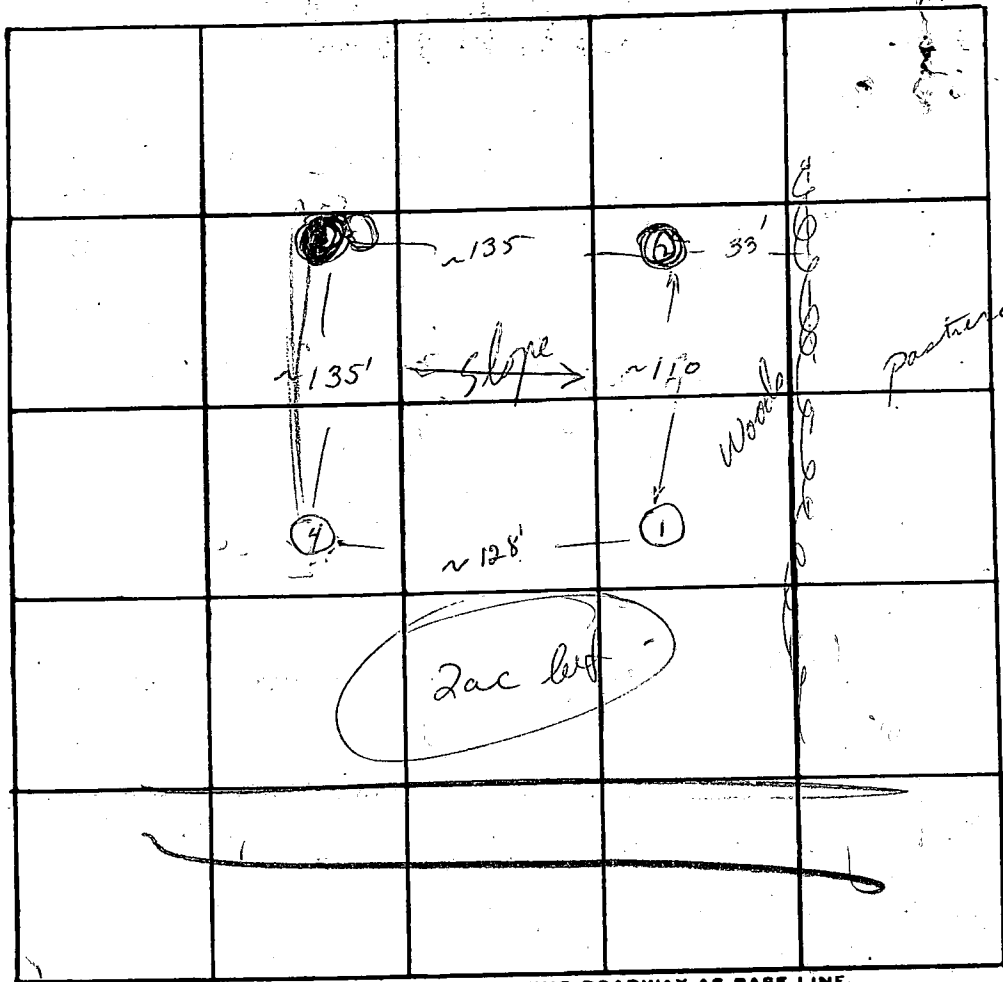
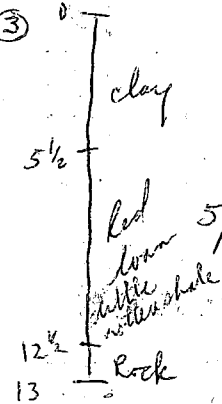
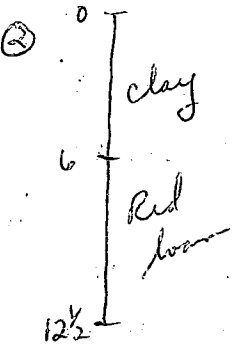
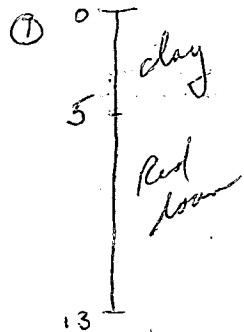
APPROVED BY William H. Zupp FOR DW + trench DATE 10/3/77  
(KIND OF SYSTEM)

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_  
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS WWZ DATE 5/11/76

REASONS FOR REJECTION OR HOLDING certified, field located test holes

# THIS IS NOT A PERMIT



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.  
 N ← DALST RD →

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
5/11/76	1	5	10:12	10:18	10:18	10:35	17	
	1-A	13	10:12	10:16	10:16	10:26	10	
	2	6	10:14	10:19	10:19	10:31	12	
	2-A	12 1/2	10:14	10:19	10:19	10:30	11	
	3	5 1/2	10:28	10:34	10:34	10:44	10	
	3-A	12 1/2	10:28	10:31	10:31	10:37	6	
	4	12	Visual; sim. soil; dry					

5  
10

27

23

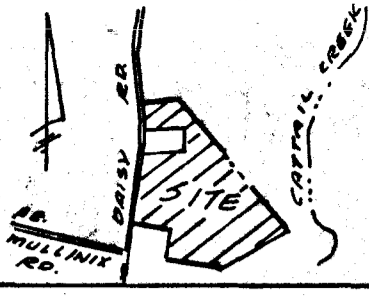
16

11  
6/66

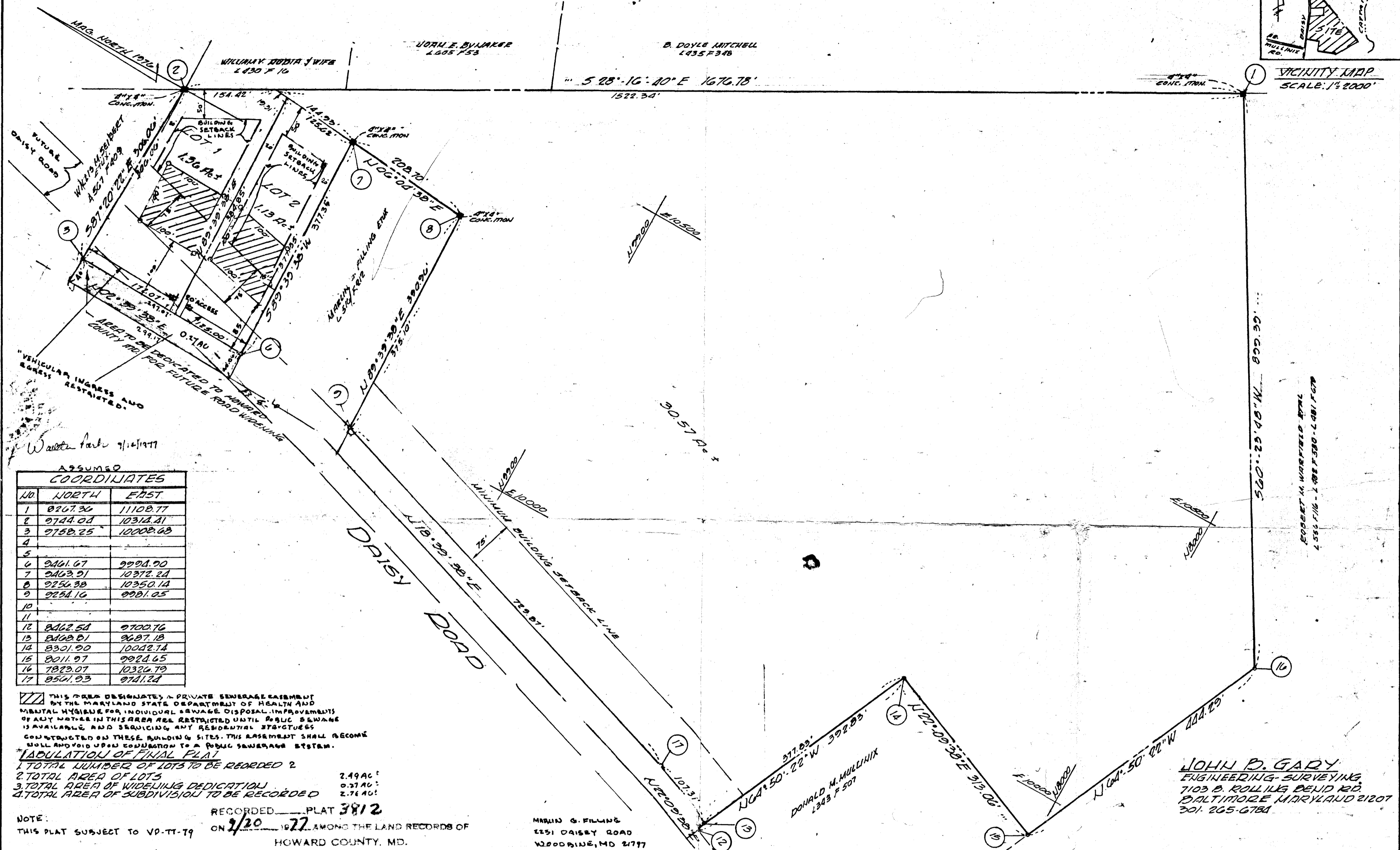
REMARKS System in either 3 or 4 (same elev.)

TYPE OF SOIL Red loam after 5-6 clay

TESTED BY WNZ ALSO PRESENT: Fyock's Co.



VICINITY MAP  
SCALE: 1" = 2000'



ASSUMED COORDINATES

NO.	NORTH	EAST
1	0267.36	11108.77
2	0744.04	10312.41
3	0758.25	10008.68
4		
5		
6	0461.67	0994.90
7	0463.91	10372.24
8	0250.38	10350.14
9	0254.16	0981.05
10		
11		
12	0462.58	0700.76
13	0468.01	0687.18
14	0301.00	10042.74
15	0011.97	0982.65
16	7829.07	10326.79
17	0501.93	0741.24

THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT BY THE MARYLAND STATE DEPARTMENT OF HEALTH AND MENTAL HYGIENE FOR INDIVIDUAL SEWAGE DISPOSAL IMPROVEMENTS OF ANY NATURE IN THIS AREA BE RESTRICTED UNTIL PUBLIC SEWAGE IS AVAILABLE AND SECURING ANY RESIDENTIAL STRUCTURES CONSTRUCTED ON THESE BUILDING SITES. THIS EASEMENT SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM.

**ABDUCTION OF FINAL PLAT**  
 1. TOTAL NUMBER OF LOTS TO BE RECORDED 2  
 2. TOTAL AREA OF LOTS 2.49 AC.  
 3. TOTAL AREA OF WIDENING DEDICATION 0.27 AC.  
 4. TOTAL AREA OF SUBDIVISION TO BE RECORDED 2.76 AC.

NOTE: THIS PLAT SUBJECT TO VP-TT-79  
 RECORDED PLAT 3812  
 ON 7/20/77 AMONG THE LAND RECORDS OF HOWARD COUNTY, MD.

MARLIN G. FILLING  
 1251 DAISY ROAD  
 WOODBINE, MD 21777

JOHN B. GARY  
 ENGINEERING-SURVEYING  
 7103 B. ROLLING BEND RD.  
 BALTIMORE MARYLAND 21207  
 301-265-6784

APPROVED: For private water and private sewerage systems  
 Howard County Health Department  
*John J. Jones* 9-11-77  
 COUNTY HEALTH OFFICER DATE

APPROVED: HOWARD COUNTY OFFICE OF PLANNING AND ZONING  
*Thomas L. Harris* 9-16-77  
 DIRECTOR DATE

APPROVED: For Storm Drainage Systems and Public Roads  
 HOWARD COUNTY DEPARTMENT OF PUBLIC WORKS  
*TJ Regan* 9-16-77  
 DIRECTOR DATE

**DEDICATION FOR INDIVIDUALS** - We MARLIN G. FILLING and VELVA M. FILLING his wife, 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 right of ways and the specific easement areas as shown hereon; (2) dedicate to public use the beds of the streets and/or roads and floodplains and open space where applicable and for the better (3) in consideration, hereby grant the right and option to Howard County to acquire the fee simple title to the land, the streets and/or roads and floodplains and open space where applicable; (4) that no building or similar structure of any kind shall be erected on or over the said easements and right of ways; and (4) it is further agreed that maintenance of all waterways, drainage easements and/or floodplains shown hereon are the responsibility of the property owner, its successors and assigns. Witness our hands this 20th day of July 1977.

*Marlin G. Filling* *Velva M. Filling*  
 MARLIN G. FILLING VELVA M. FILLING

**SURVEYORS CERTIFICATE**

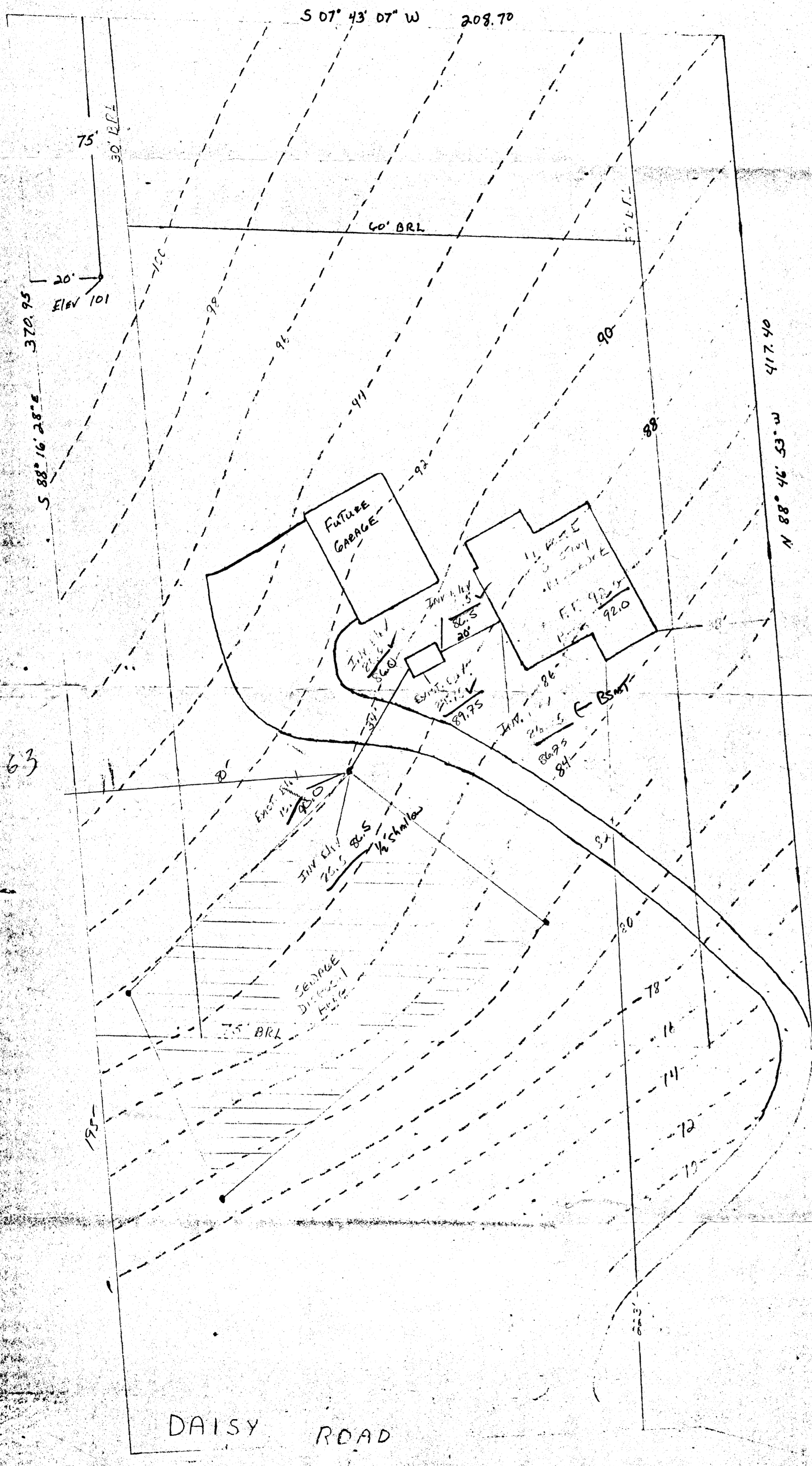
I hereby certify that the FINAL PLAT shown hereon is correct, that it is a subdivision of the lands conveyed by ANNIE MAY KNILL, widow to MARLIN G. FILLING and VELVA M. FILLING, his wife, by deed dated 18 November 1958 and recorded in the Land Records of Howard County Maryland in Liber 343 Folio 507, and that all monuments shown thereon are in place, and in accordance with the Annotated Code of Maryland, as amended.

*John B. Gary* 7/20/77  
 JOHN B. GARY PLS. 66 Date

FINAL SUBDIVISION PLAT  
**MARLIN G. FILLING**  
 PROPERTY  
 LOTS 1 AND 2  
 8TH ELECTION DISTRICT, HOWARD CO. MD.  
 SCALE: 1" = 100' JULY 22, 1976

F.77.20

WHITELY MOPT  
D. L. MOPT  
J. E. MOPT



8/4/88  
Elevations  
in  
Sub

BLDG. PERMIT SIGNED  
AND RETURNED 8-4-88  
BP 20588  
Sullivan

DAISY ROAD

B 1	0926	SEQUENCE NO. (WRA USE ONLY)	<b>STATE OF MARYLAND</b> <b>WATER RESOURCES ADMINISTRATION</b> <b>TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401</b> <b>APPLICATION FOR PERMIT TO DRILL WELL</b>	<b>WRA PERMIT NUMBER</b> <span style="font-size: 24pt;">40-73-2363</span>
1 2 3 (SEQ. NO.) 6 (THIS NUMBER IS TO BE PUNCHED IN COUS. 3-6 ON ALL CARDS)			FILL IN THIS FORM COMPLETELY	

DATE RECEIVED (WRA USE ONLY)	OWNER		
8/11/79 9:30 A.M.	Johnson		
STREET OR RFD	COL 15 LAST NAME	FIRST NAME	COL. 34
POST OFFICE	COL. 36	COL. 55	COL. 76
COL. 57	7952 Cindy Dr Glen Burnie, Md 21061		

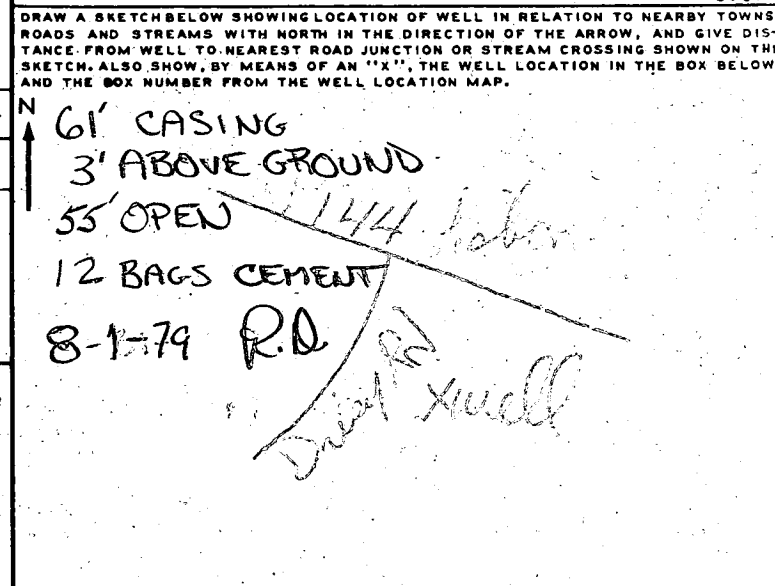
B 1	CONTINUED	DRILLER INFORMATION
1 2 3 (SEQ. NO.) 6		
DATE	LICENSE NUMBER	77 80
6-20-79	4A	
FIRST NAME	DRILLER	LAST NAME
George Easterday		
George Easterday		

B 3	LOCATION OF WELL
1 2 3 (SEQ. NO.) 6	
COUNTY	8 (DO NOT ABBREVIATE COUNTY NAME) 21
SUBDIVISION	23 42
SECTION	44 46 48 50
NEAREST TOWN	52 71
MILES FROM TOWN (ENTER 0 IF IN TOWN)	79 76 77 78

B 2	WELL INFORMATION
1 2 3 (SEQ. NO.) 6	
MAXIMUM PUMPING RATE (GALLONS PER MINUTE)	8 12
AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY)	14 20
5	
1000	
USE FOR WATER (CIRCLE APPROPRIATE BOX)	
<input checked="" type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)	
<input type="checkbox"/> FARMING, AGRICULTURE, IRRIGATION	
<input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT.	
<input type="checkbox"/> MUNICIPAL WATER SUPPLY	
<input type="checkbox"/> PRIVATE WATER COMPANY	
<input type="checkbox"/> TEST	
MUST HAVE STATE HEALTH DEPT. APPROVAL	

B 4	DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)		
1 2 3 (SEQ. NO.) 6			
<input type="checkbox"/> NORTH	<input type="checkbox"/> EAST	<input type="checkbox"/> NE NORTHEAST	<input type="checkbox"/> SE SOUTHEAST
<input checked="" type="checkbox"/> SOUTH	<input type="checkbox"/> WEST	<input type="checkbox"/> NW NORTHWEST	<input type="checkbox"/> SW SOUTHWEST
NEAR WHAT ROAD			
Daisy Rd			
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)			
<input type="checkbox"/> NORTH	<input type="checkbox"/> SOUTH	<input type="checkbox"/> EAST	<input type="checkbox"/> WEST
<input type="checkbox"/> 32	<input type="checkbox"/> 32	<input checked="" type="checkbox"/> 32	<input type="checkbox"/> 32
DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX)			
34 1000 37 38 39			

APPROXIMATE DEPTH OF WELL	24 28 FEET
APPROXIMATE DIAMETER OF WELL	6" (NEAREST INCH)
METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)	
BORED (OR AUGERED) JETTED DRIVEN	
30-37 AIR-ROTARY AIR-PERCUSSION ROTARY (HYDRAULIC ROTARY)	
CABLE REVERSE-ROTARY DRIVE-POINT	
OTHER (DESCRIBE)	
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)	
<input type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL	
<input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED	
<input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY.	
<input type="checkbox"/> THIS WELL WILL DEEPEM AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)	



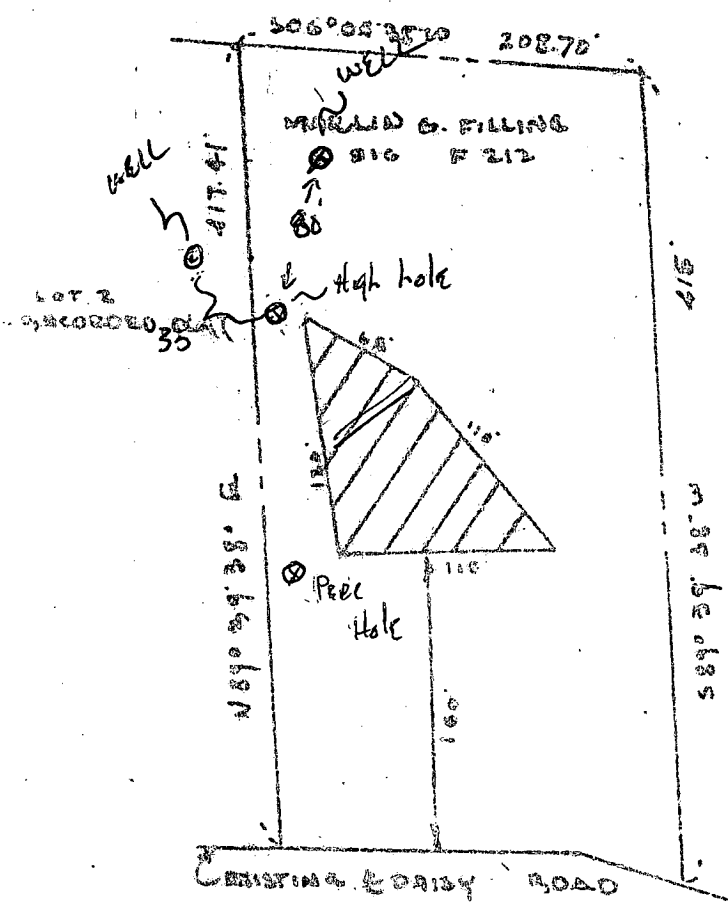
NOT TO BE FILLED IN BY DRILLER (WRA USE ONLY)	
APPROPRIATION PERMIT NUMBER	ENGINEER REVIEW DISTRICT NO.
54	63
FORCE	A E N S G W Q C L U
WRITE INITIALS IN BOX	CONDITIONS
67 68	70 71 72 73 74 75 76 77 78 79

B 4	CONTINUED	HEALTH DEPARTMENT APPROVAL	BOX NUMBER
1 2 3 (SEQ. NO.) 6			E 776
41			N 540
STATE HEALTH (CIRCLE BOX)			0/5
COUNTY NAME			5/5 X
COUNTY NO.			
DATE			
APPROVED BY			
SPECIAL CONDITIONS 8-63			
WELL HEAD (FEET)			
65 66 67 68			

B 4	CONTINUED	HEALTH DEPARTMENT APPROVAL
1 2 3 (SEQ. NO.) 6		
41		
STATE HEALTH (CIRCLE BOX)		
COUNTY NAME		
COUNTY NO.		
DATE		
APPROVED BY		
SPECIAL CONDITIONS 8-63		
WELL HEAD (FEET)		
65 66 67 68		

B 5	SPECIAL CONDITIONS 8-63 (WRA USE ONLY)
1 2 3 (SEQ. NO.) 6	

1123241



*Blue & yellow clay  
larger on 3' pipe*

MARLIN G. FILLING  
1343 F 507

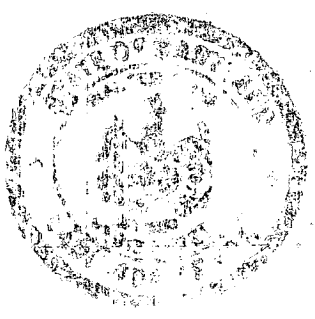
Jan, 1982.  
Measurements  
From Newly surveyed Lines  
of water Parks

TAX MAP 14 P. 102

FIELD LOCATED PERC HOLES  
MARLIN FILLING PROPERTY  
RAINY ROAD  
14th ELECTION DISTRICT HOWARD CO., MD  
SCALE 1"=200' AUG. 31, 1977

THE LOT SHOWN HEREON COMPLIES WITH  
THE MINIMUM OWNERSHIP WIDTH AND  
LOT AREA AS REQUIRED BY THE  
MONTGOMERY STATE DEPARTMENT OF HEALTH  
AND NEURAL ENGINEER.

APPROVED FOR PRIVATE WATER AND  
PRIVATE SEWAGE SYSTEMS.  
HOWARD COUNTY HEALTH DEPARTMENT  
*Joseph Brydie 9-15-77*  
COUNTY HEALTH OFFICER DATE



CEP 1 **1653** SEQUENCE NO. (WRA USE ONLY)

1 2 3 (SEQ. NO.) 6  
 (THIS NUMBER IS TO BE PUNCHED IN COLUMNS 3, 5 ON 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) 8/1/79 DEPTH OF WELL 360 PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-73-3503

DATE WELL COMPLETED 8/1/79 22 (TO NEAREST FOOT) 26  
 28 29 30 31 32 33 34 35 36 37

8-13 15 20 DRILLERS IDENTIFICATION NO. 40

OWNER Johnson, Ted FIRST NAME Glenn LAST NAME Burnie

STREET OR RFD 7852 Cindy Drive POST OFFICE Glenn Burnie, Md.

**WELL DESCRIPTION**

WELL LOG

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

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET		CHECK IF WATER BEARING
	FROM	TO	
Top Soil	0	3	
Brown shale	3	20	
Brown shale	20	50	
Blue slate	50	60	
Brown shale	60	63	
Brown shale	63	66	
Blue slate	66	360	

**GROUTING RECORD**

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX)  Y  N

TYPE OF GROUTING MATERIAL (CIRCLE BOX) CEMENT  M BENTONITE CLAY  B

NO. OF BAGS 12 NO. OF POUNDS 1200

GALLONS OF WATER 60

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM 0 FT. TO 55 FT.  
 (ENTER 0 IF FROM SURFACE)

**CASING RECORD**

CASING TYPES (INSERT APPROPRIATE CODE BELOW)

STEEL  S  T CONCRETE  C  O

PLASTIC  P  L OTHER  O  T

MAIN CASING TYPE ST NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) 6 TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) 61

60 61 63 64 66 70

**OTHER CASING (IF USED)**

EACH CASING	DIAMETER (INCH)		DEPTH (FEET)	
	FROM	TO	FROM	TO
1				
2				

**SCREEN RECORD**

SCREEN TYPE OR OPEN HOLE (INSERT APPROPRIATE CODE BELOW)

STEEL  S  T BRASS OR BRONZE  B  R OPEN HOLE  H  O

PLASTIC  P  L OTHER  O  T

**SCREEN**

C 2 (SEQ. NO.) 6

DEPTH (NEAREST WHOLE FOOT)

FROM 54 TO 360

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

SLOTS SIZE 1, 2, 3

DIAMETER OF SCREEN 56 (NEAREST INCH) FROM 60 TO

GRAVEL PACK

IF WELL DRILLED WAS A FLOWING WELL (CIRCLE BOX)  F

WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER)

T (E.R.O.S.)  W Q

70  72  74 75 76

TELESCOPE LOG INDICATOR OTHER DATA AVAILABLE

**PUMPING TEST**

1 2 3 (SEQ. NO.) 6

HOURS PUMPED (TO NEAREST HOUR) 3

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 2

METHOD USED TO MEASURE PUMPING RATE Brake

**WATER LEVEL: (DISTANCE FROM LAND SURFACE)**

BEFORE PUMPING 50 (NEAREST FOOT) 17 20

WHEN PUMPING 360 (NEAREST FOOT) 22 25

TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST)

AIR  A PISTON  P TURBINE  T

CENTRIFUGAL  C ROTARY  R OTHER (DESCRIBE BELOW)  O

JET  J SUBMERSIBLE  S

**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  Y NO  N

CAPACITY: GALLONS PER MINUTE (TO NEAREST GALLON) 31 39

PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH (NEAREST FOOT) 43 47

**CASING HEIGHT** (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)

ABOVE } LAND SURFACE (NEAREST FOOT) 50 51

BELOW } 49

**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**

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 Glenn Burnie

(PLEASE PRINT) SIGNATURE Glenn Burnie

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

Howard County Health Department  
 Bureau of Environmental Health  
 3525-H Ellicott Mills Drive  
 Court House Square  
 Ellicott City, Md. 21043  
 461-9933

New Installation   
 Replacement

Receipt # 42966  
 Date 10/27/88

Name of Installer ARTHUR M. BLACK

Telephone 776-7520

License number 1557  
 Certified Well Pump Installer  Well Driller  Registered Plumber

Name of Property Owner ALAN WHITELEY  
 Subdivision \_\_\_\_\_ Lot # \_\_\_\_\_  
 Site Address 229 DAISY RD.  
WOODBIDE, MD.

Telephone 776-2066  
 Well tag # HD-73-3363

Pump

- Type
  - Deep well jet
  - Shallow well jet
  - Submersible
- Make Grundfos
- Model # SES
- Capacity 5 GPM
- Pump exceeds well capacity Yes  No
- If Yes, is low pressure cutoff switch installed? Yes  No

Motor

- Horsepower 1/2
- RPM \_\_\_\_\_
- Voltage 220
  - 110 \_\_\_\_\_
  - 220

Pitless Adapter

- Make \_\_\_\_\_
- Model # \_\_\_\_\_
- Depth 42'

Tank

- Capacity 42
- Pressure relief valve?

Piping

- Type Plastic
- Size 1"
- NSF and/or BOCA Code approved
- Depth of supply line 42"

Well data

- Depth 200 ft.
- Yield 2 GPM
- Static water level 30 ft.
- Will water supply be disinfected by installer? NO

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: Arthur M. Black

Date: 10/27/88

11/21/88 OK TO COVER OUTSIDE WORK  
 PRESSURE TANK

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

NOT YET INSTALLED R/H