

12/4/86
late possible
final

04-329643

PERMIT

12/5/86
Septic OK'd
(Signature)

P 38193
A 36640

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
992-2330X
461-9933

INDEXED

ELLICOTT CITY
DISTRICT 4th
DATE 12/2/86

Dave Hopkins IS PERMITTED TO INSTALL ALTER

ADDRESS 17550 Old Frederick Road, Mt. Airy, Maryland PHONE 831-7257

SUBDIVISION Tharp and Zirn ROAD 15848 A. E. Mullinix LOT 11

PROPERTY OWNER Larry Wingate

ADDRESS _____

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

GARBAGE GRINDER? YES _____ NO

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 180 sq. ft. per bedroom. Trench to be 3 feet wide. Inlet 3.5 feet below original grade. Bottom maximum depth 5 feet below original grade. Effective area begins at 3.5 feet below original grade. 1.5 feet of stone below distribution pipe.

LOCATION - Place the distribution box approximately 135 feet from the front (265') lot line and 110 feet from the right (621.89') lot line as seen when facing the lot from A. E. Mullinix Road. Run trenches on contour toward the left lot line.

NOTE - No trench to exceed 100 feet in length. If more than one trench used, a distribution box is required. Call for inspection of trench(s) before and after gravel is installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

(Signature)

PLANS APPROVED BY S. Abel DATE 8/13/86

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: IF TRENCH IS USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH.

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 THREE YEARS.

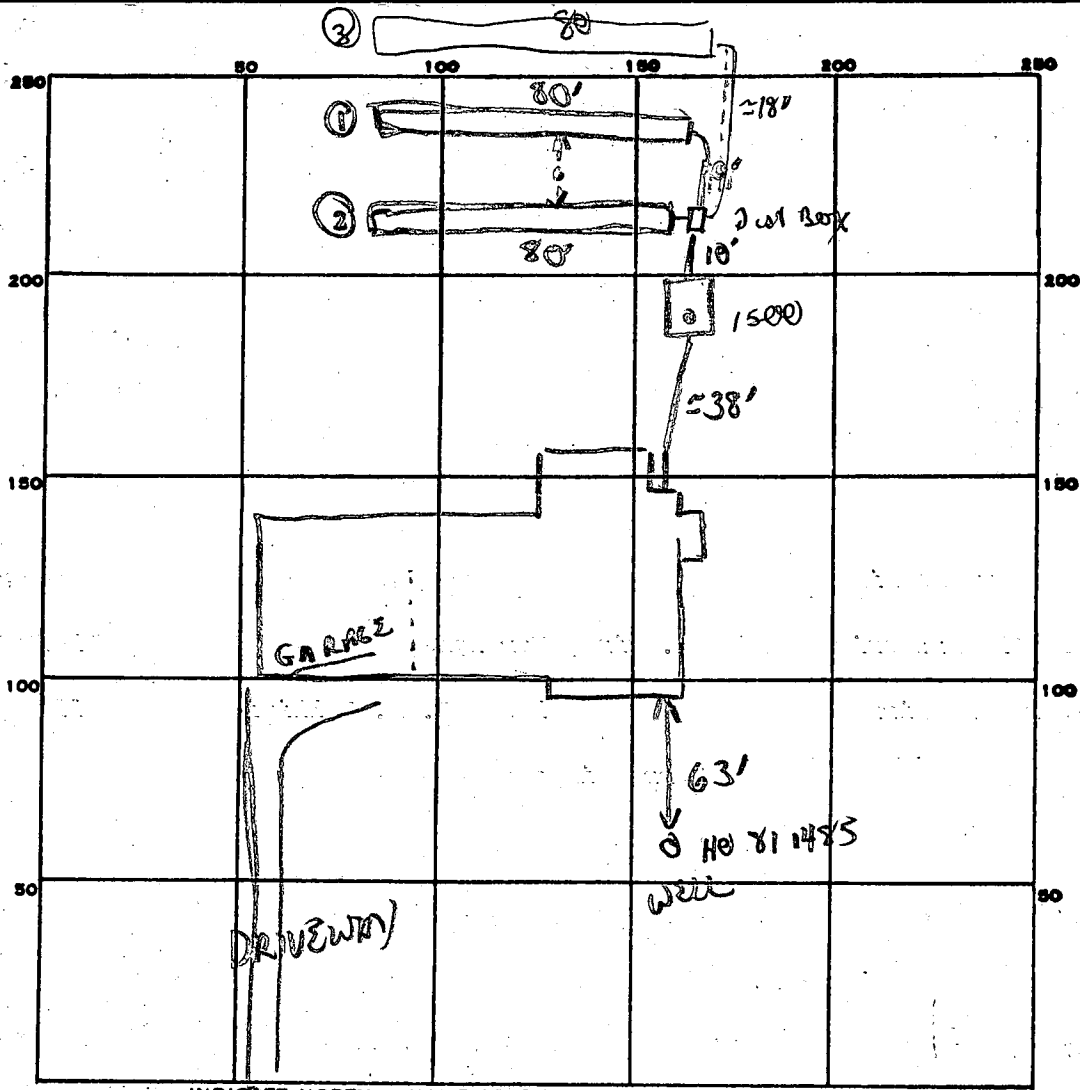
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

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

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

A
36640



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD fund

SEPTIC TANK, LEVEL 1500 gal CLEANOUTS 1 ST

DISTRIBUTION BOX, LEVEL ✓ (w/baffle)

TILE FIELD, DEPTH ① 5' ② 5' ③ FT. TRENCH WIDTH 3 FT.

GRAVEL DEPTH ① 18" ② 18" ③ TOTAL LENGTH ① 80 ② 80 ③ 80 FT.

NUMBER OF TRENCHES 3 TOTAL BOTTOM AREA 240 + 240 + 240

SEEPAGE PITS, INSIDE DIAMETER — FT. DEPTH BELOW INLET — FT.

ABSORBENT AREA 720 SQ. FT.

REMARKS 12/7/86 OK to cover trenches 1+2, OK to finish #3 + add stone
pipe paper, line from house to tank supported by brick blocks - needs to be packed around + under
pipng. Check cement job carefully, + that baffle in Dist Box.
12/15/86 Baffle in Dist box per outlet - OK. All lines cemented OK'd.
Line from house to tank supported - OK, OK to cover trench #3 + all
work

DATE SYSTEM APPROVED 12/15/86 INSPECTOR B N Yahr

180
4
520
80
3
240
240
720

SUBDIVISION: THARP ZIRN

LOT NUMBER: 11

15848 A.E. Mullinix Rd.

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 3 wide.
 Inlet 3.5 feet below original grade.
 Bottom maximum depth 5 feet below original grade.
 Effective area begins at 3.5 feet below original grade.
1.5 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 absorbant sidewall area by 22%.

LOCATION: PLACE THE DISTRIBUTION BOX APPROX 135 FT FROM THE FRONT
(265') LOT LINE AND 110 FT FROM THE RIGHT (621.89') LOT LINE
AS SEEN WHEN FACING THE LOT FROM A.E. MULLINIX RD. CON TRENCHES ON
CONTOUR TOWARD THE LEFT LOT LINE. S. A&P 8-13-84

BP # 71580

To _____

Date _____ Time _____ A.M.
P.M.

WHILE YOU WERE OUT

M _____

of _____

Phone _____

Area Code

Number

Extension

TELEPHONED		PLEASE CALL	
CALLED TO SEE YOU		WILL CALL AGAIN	
WANTS TO SEE YOU		URGENT	

RETURNED YOUR CALL

Message _____

Operator _____

To Reorder Item L1-A2334
Call: Boise Cascade 301 953-0400

S11)

only 1 of 4 holes passable
but back hoe not
present at time of test.
Therefore, no extra holes
could be dug.

I told him where to
have holes dug.

He's going to call
Monday (11/24) to see
about follow up state
(I gave him some optimism
for the next couple of weeks
but no guarantee.

4-9-86
1130

APPLICATION

PERCOLATION TESTING

4/9/86
perc test approved
pending certified
plot
(initials)

A 36690

P _____

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

DISTRICT _____

DATE 3/11/86

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 Thorp and Zirw

ADDRESS LARRY WINGATE PHONE _____

PROSPECTIVE BUYER Tom Wolfrey c/o SHANNON/LOCHS 10058 DANNSTOWN RD

ADDRESS 15848 A.E. Mullinix Rd PHONE 340-6939

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 11

ROAD AND DESCRIPTION 15848 A.E. Mullinix Road

TAX MAP 13 PARCEL # 153

SIZE OF LOT 5 Acres TYPE BLDG. _____
(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.

Luis Cissel
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING for field located certified plot

BLDG. PERMIT STAMP
AND RETURNED 8/3/86 SAH

BP # 71980

THIS IS NOT A PERMIT

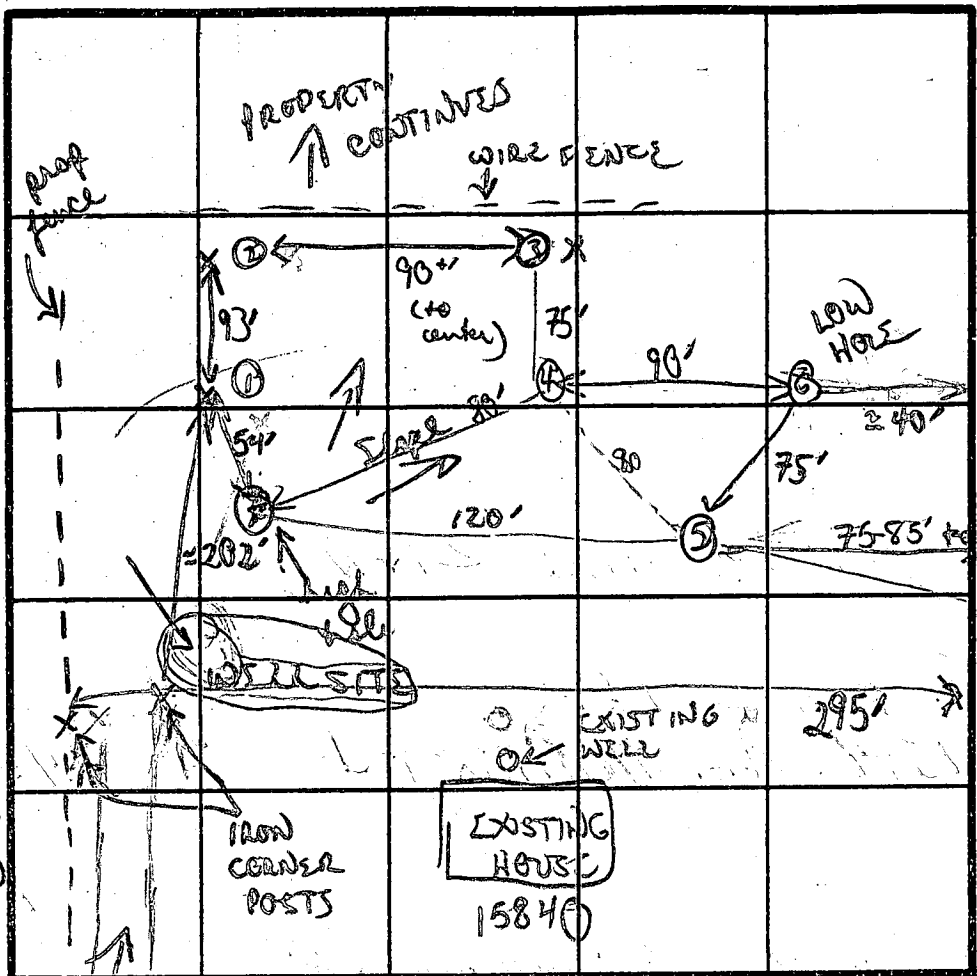
SOIL PROFILE

0' Brown/red med coarse grain clay/loam

3 1/2' Red/brown med/coarse grain sandy/clay loam with 20% 1-4" frags of shale

10' Rock bottom

15860



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.
 FUTURE EXISTING DRIVEWAY A2 MULLINEX

4 1/2' Brown/red med/coarse grain sandy/clay loam with med shale content (up to 20% 1-3" frags to bottom)

9'

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
4/9/86	1	HORIZES	NOT TESTED		DUE TO TOP			
	2	MUCH SHALE IN SOIL (FROM 2' TO						
	3	9-10' ROCK BOTTOMS)						
	4	3' 5"	220	227	227	236	9 MIN	
		8' M	222	225	225	229	4 MIN	
		10' D	rock bottom (see profile)					
	5	3 1/2' S	238	248	248	304	16 MIN	
		9' D	hard bottom (see profile)					
	6	3 1/2' S	256	259	259	303	4 MIN	
		9' D	bottom (see profile)					

tan powdery sandy silt loam

uniform

start bottom rock frags 25%

9'

Core hole

SHALLOW SYSTEMS ONLY

REMARKS: Red/brown clay loams top 3-4 ft (except #6) rock frags from 5' down as well as 20% in tested holes

TESTED BY: B. N. Upton

ALSO PRESENT: Claude Casel/partner, Larry Wengert

APPLICATION

PERCOLATION TESTING

A 36640

P _____

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

DISTRICT _____

DATE 3/11/86

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 Tharp and Zian

ADDRESS _____ PHONE _____

PROSPECTIVE BUYER Tom Wolf Fry

ADDRESS 15848 A.E. Mullinix Rd. PHONE 340-6939

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 11

ROAD AND DESCRIPTION 15848 A.E. Mullinix Road

TAX MAP 13 PARCEL # 153

SIZE OF LOT 5 ACRES TYPE BLDG. _____
(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. Jos. Cissel
(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

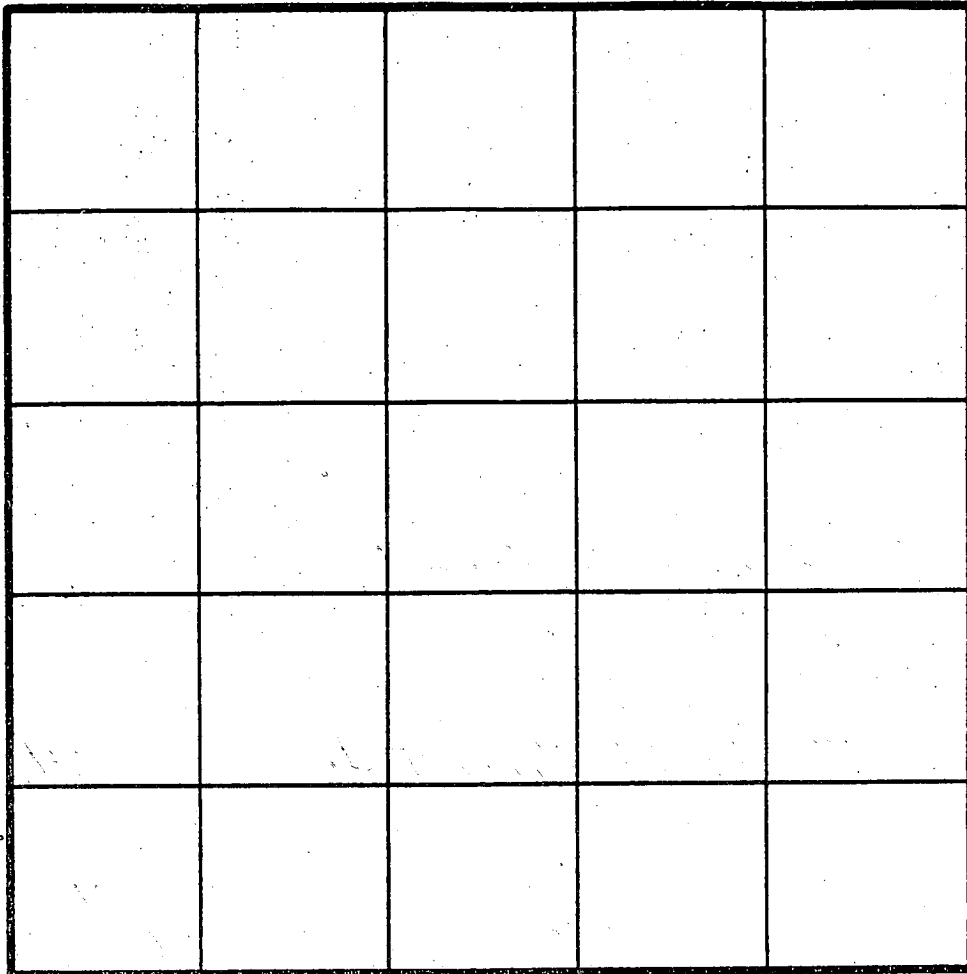
7

SOIL PROFILE

0'
 red/brown
 med/coarse
 gran
 loam

4'
 med/coarse
 shaly
 content
 (upwards
 20%
 from 5'
 down
 (frag 1-5"))

9" bottom



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/9/86	7	3 1/2 S	245	248	248	252	4mm ✓
		9' D	hard	bottom	(see profile)		

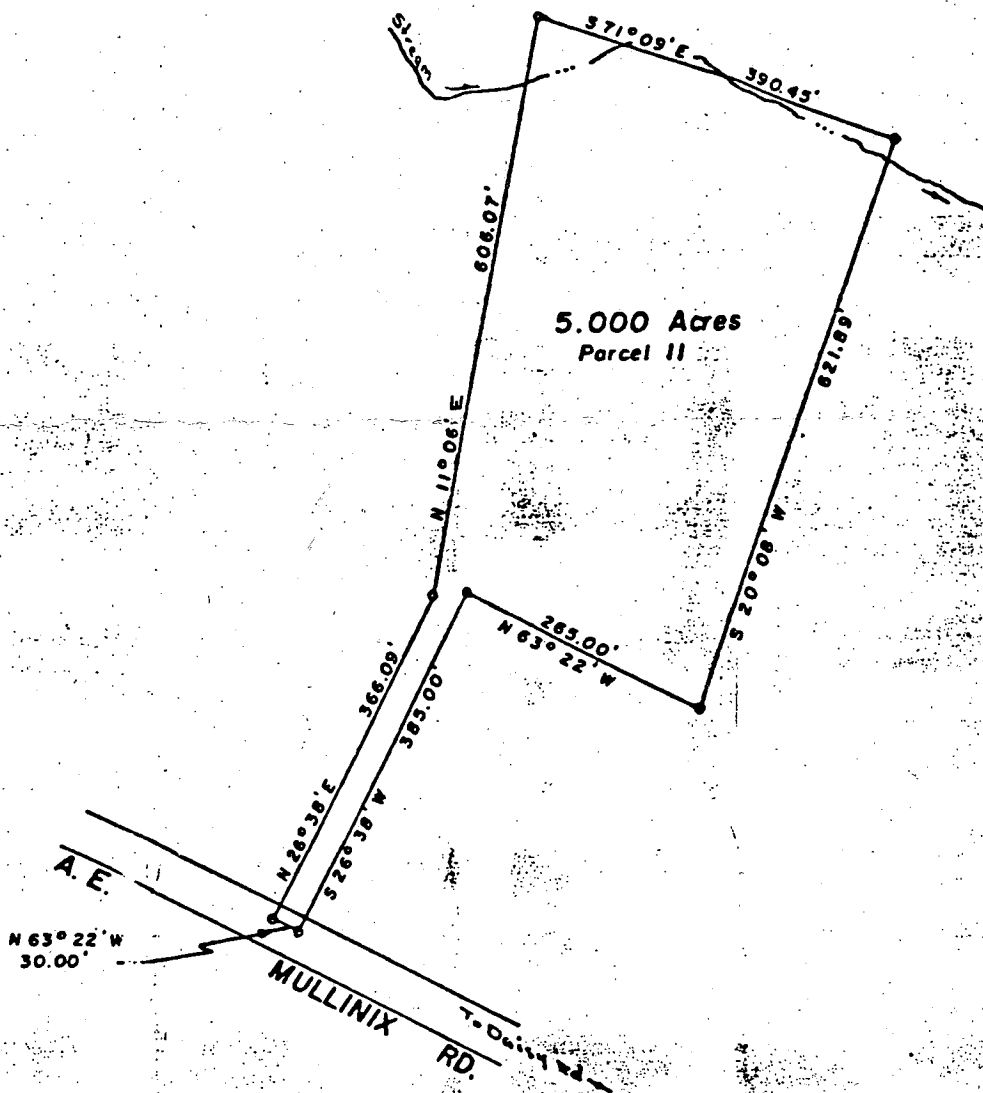
EH-12-1079

REMARKS _____

TYPE OF SOIL _____

TESTED BY _____ ALSO PRESENT _____

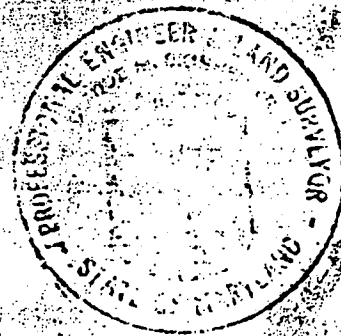
Z 174



PLAT OF SURVEY
 FOR
 CHARLES W. SLAGLE
 FOURTH ELECTION DISTRICT OF HOWARD COUNTY
 WOODBINE, MARYLAND
 SCALE: 1 IN. = 200 FT. FEBRUARY 1, 1971

Claude M. Skinner Jr.

Claude M. Skinner Jr. Reg. Engineer & Land Surveyor No. 2237



4/30/86

Mr. Williams

Attached please find the plot plan. This is submitted in response to your letter dated April 16, 1986.

If there are any problems with the plot please contact me and I will have it revised appropriately. The approved perk holes are No. 4, 5, 6, & 7.

Also, ~~can~~ ^{can} this plot be given to a well driller?

I would appreciate it if you could call me concerning this.

Thank you
Larry Wright
work 765 6619
Between 8 & 5

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

April 16, 1986

Mr. Thomas Wolfry
c/o Shannond & Luchs
10058 Darnestown Road
Rockville, Maryland 20850

RE: Percolation Test Results
Lot 11 Charles Slagle Property
A. E. Mullinix Road
Tax Map 13 Parcel 153

Dear Mr. Wolfry:

Percolation testing conducted April 9, 1986 on the above referenced lot indicated satisfactory soil conditions.

Approval of the lot is contingent upon submission by a registered engineer of a plat showing certified test hole locations and a suitable house and well site.

This should be submitted within sixty (60) days to allow field verification if necessary.

If you have any questions regarding this matter, please feel free to contact me at the above address or by calling 461-9933.

Very truly yours,

Craig Williams, Director
Water and Sewerage Program

CW:JR

OFF

340-3080

762-4221

April 16, 1986

Mr. Thomas Wolfry
c/o Shannond & Luchs
10058 Darnestown Road
Rockville, Maryland 20850

RE: Percolation Test Results
Lot 11 Charles Slagle Property
A. E. Mullinix Road
Tax Map 13 Parcel 153

Dear Mr. Wolfry:

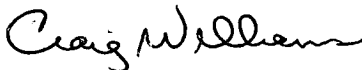
Percolation testing conducted April 9, 1986 on the above referenced lot indicated satisfactory soil conditions.

Approval of the lot is contingent upon submission by a registered engineer of a plat showing certified test hole locations and a suitable house and well site.

This should be submitted within sixty (60) days to allow field verification if necessary.

If you have any questions regarding this matter, please feel free to contact me at the above address or by calling 461-9933.

Very truly yours,


Craig Williams, Director
Water and Sewerage Program

CW:JR

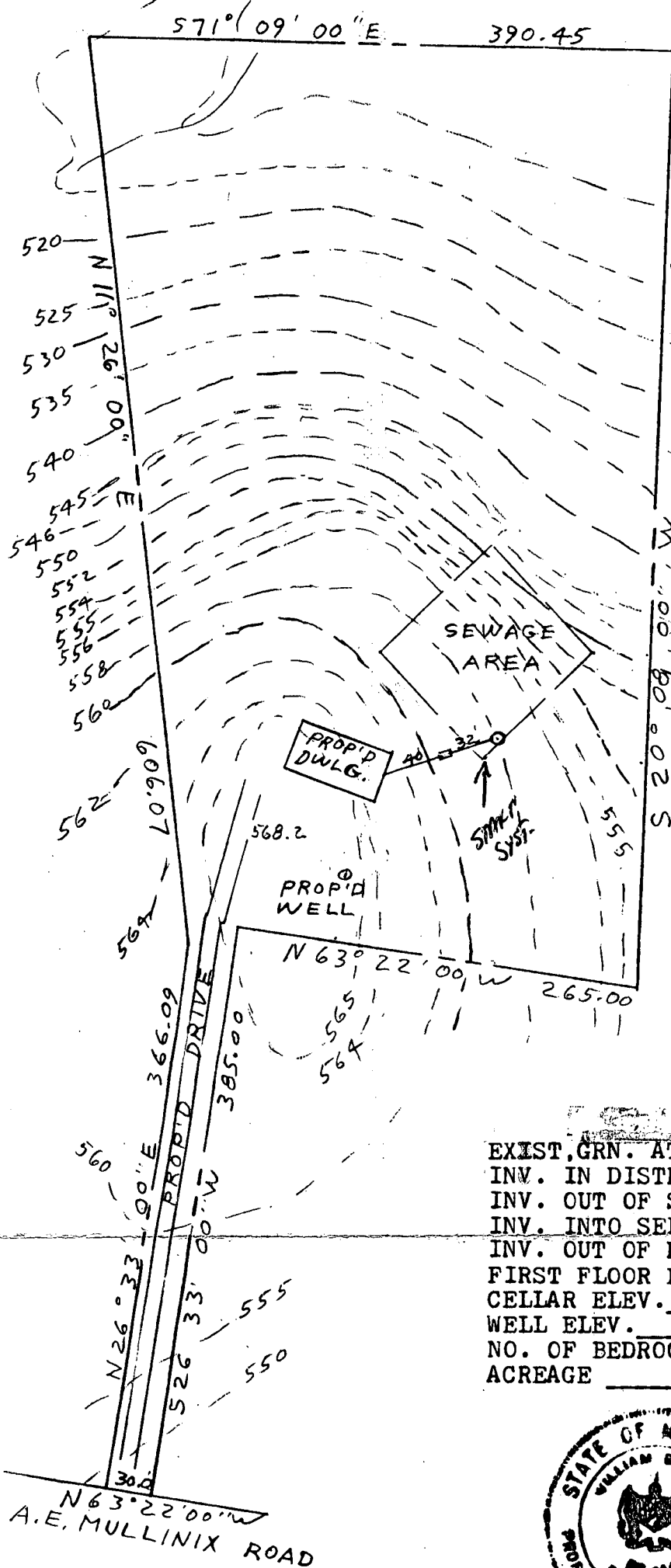
William E. Doyle

15848 MULLINIX RD.
BUILDING PERMIT # 71980

765-6619
LARRY W. NORTON

LAND SURVEYOR 8440

5312 EMERALD DRIVE SYKESVILLE, MARYLAND 21784 PHONE (301) 795-2210



8/13/86
elevation of
S. Area

3-5
180Φ/BR
180 FE TRENCH
needed

PLOT PLAN
THARP/ZIRN PROPERTY
A.E. MULLINIX ROAD
TAX MAP 13, PARCEL 153
LIBER 551, FOLIO 405
ELECTION DISTRICT 4
HOWARD COUNTY MD.

EXIST. GRN. AT DISTR. BOX	558.00 ✓
INV. IN DISTR. BOX	554.50 ✓
INV. OUT OF SEPTIC TANK	555.14 ✓
INV. INTO SEPTIC TANK	555.54 ✓
INV. OUT OF DWELLING	556.34 ✓
FIRST FLOOR ELEV.	569.00 ✓
CELLAR ELEV.	560.00 ✓
WELL ELEV.	566.00 ✓
NO. OF BEDROOMS	3
ACREAGE	5.00 ACRES



BLDG. PERMIT SIGNED
AND RETURNED 8/13/86 Sabel

BP# 71980

I CERTIFY THE ABOVE MEASUREMENTS
AND ELEVATIONS ARE ACTUAL AND
CORRECT FOR THIS PROPERTY

signed William E. Doyle

William E. Doyle

SCALE: 1" = 100'

DRAWN: AUGUST 7, 1986

FILE NO. 156-37

B 1 2844

SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

OEP PERMIT NUMBER

MD-81-1484

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

please print or type

fill in this form completely

Date Received

6/12/86

OWNER INFORMATION

WINGATE LARRY

635 ALDEGASHOT RD

BALTIMORE MD 21229

B 3

LOCATION OF WELL

HOWARD

MAP 13 P153

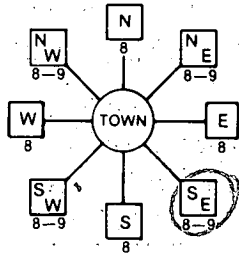
SECTION 11 LOT 11

LISBON

MILES FROM TOWN (enter 0 if in town) 3 MI

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



A.E. MULLIN RD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



450 DISTANCE FROM ROAD

ENTER FT or MI 1.7

B 2

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 5

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- Home (single or double household unit only)
Farming (livestock watering & agricultural irrigation)
Industrial, commercial, state and federal gov. other (requires appropriation permit)
Public or private water company (requires appropriation permit and state health department approval)
Test, observation, monitoring (may require appropriation permit)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

HOWARD COUNTY NAME A 36640 COUNTY NO.

OEP SIGNATURE DATE ISSUED

060686 CO-SIGNATURE EXP. DATE

NORTH GRID 537000 EAST GRID 0781000

APPROXIMATE DEPTH OF WELL 200 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH

METHOD OF DRILLING (circle one)

- Bored (or Augered) Jetted Jetted & Driven
AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)
CABLE REVERSE-ROTARY Drive-POINT

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

- 1. WELL
2.
3.

WRITE THE BOX NUMBER FROM THE MAP HERE

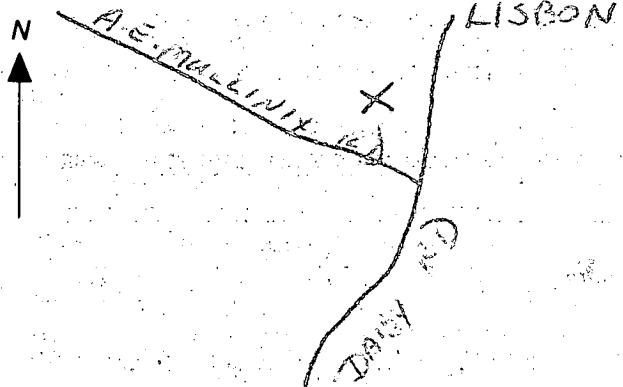
7801
5307

Well 4/12/86
45 FE CASING
35 OPEN HOLE
Well location OK
Water samples
8 BAGS (COMMON) TAG PRESENT
S Abel

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

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



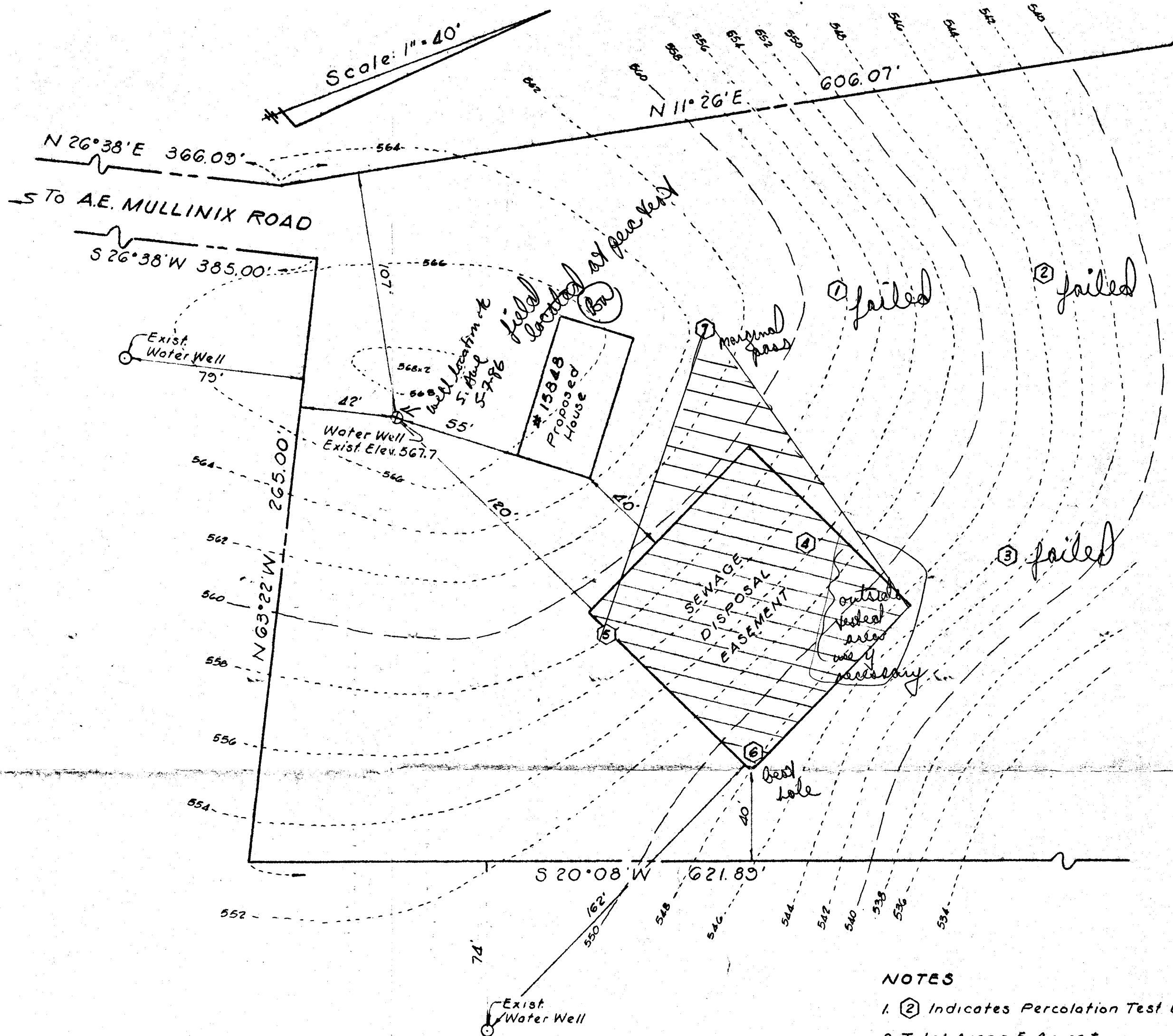
Not to be filled in by driller (OEP USE ONLY)

APPROP. PERMIT NUMBER GAP

FORCE IN BOX PERMIT No. MD-81-1484

SPECIAL CONDITIONS

Scale: 1" = 40'

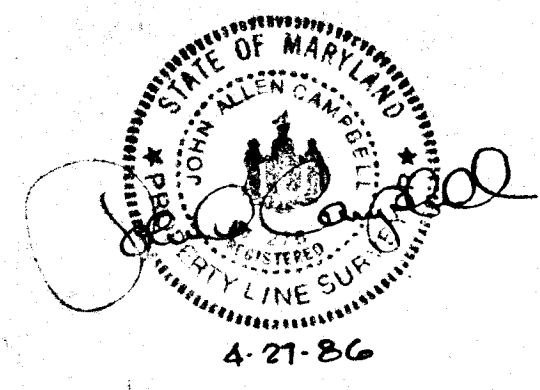
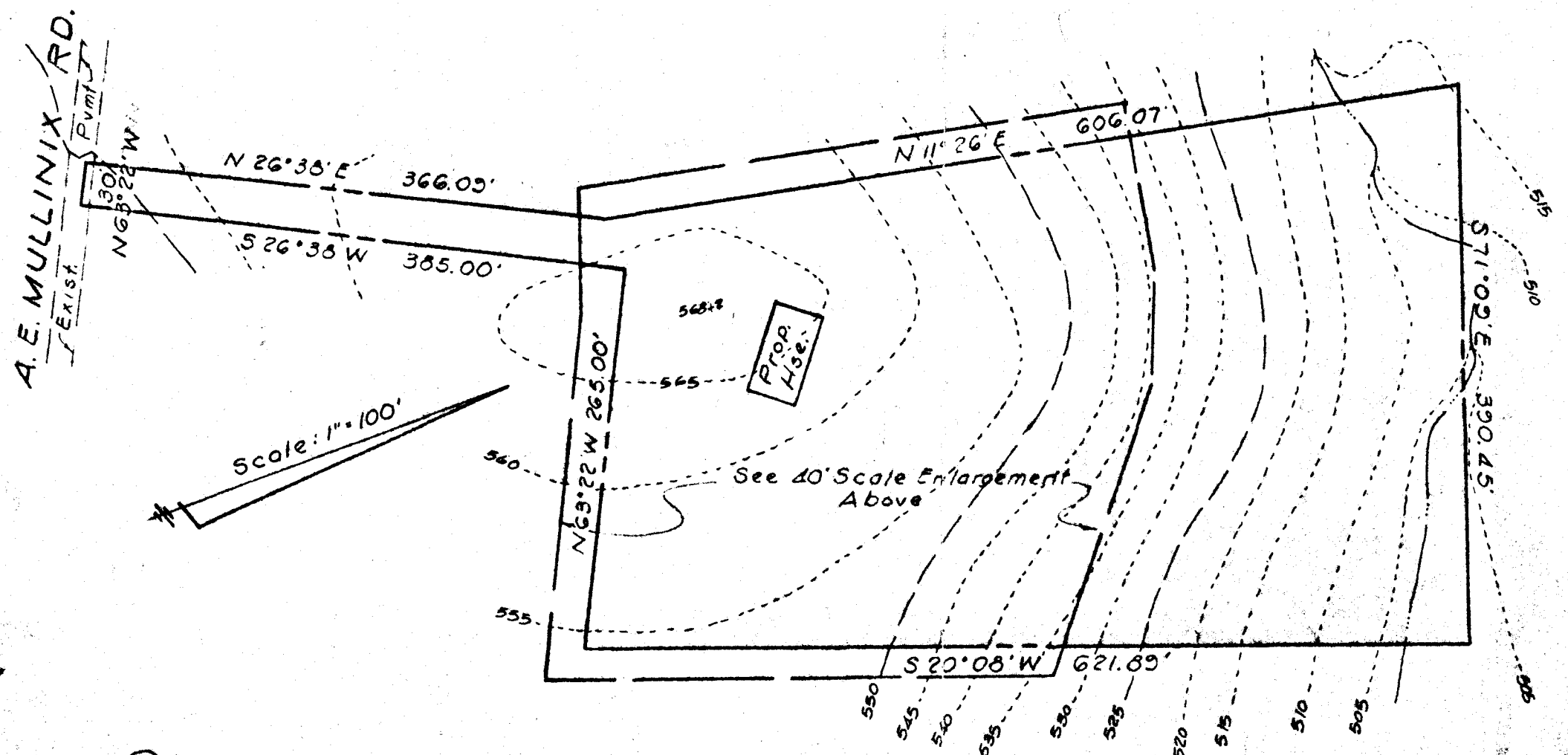


NOTES

1. ② Indicates Percolation Test Location.
2. Total Area - 5 Acres ±
3. Existing contours shown on the 1" = 40' Scale enlargement were field-run on April 26, 1986, using assumed datum and are the same elevations as of the date of testing.
4. Indicates 10,000 square feet area reserved for sewage disposal.

R.P. # 71980

WELL and SEPTIC PLAN
 Percolation Application # 36440
THARP / ZIRN PROPERTY
 Tax Map 13, Parcel 153 Libet 551 / Page 107
 Fourth Election Dist. Howard Co., Md.
 Scale: As Shown April, 1986



John A. Campbell
 250 Cypress Creek Road
 Severna Park, Md. 21146
 301-647-9434

Revised, 4-28-86, to show 10,000 sq. ft. sewage disposal easement.

C1 00540

SEQUENCE NO. (OEP 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-36640

DATE Received

8 13

DATE WELL COMPLETED

06/28/86

Depth of Well

22 36.0 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL"

10-81-1485

OWNER WINGATE LARRY last name first name STREET OR RFD MAP 13 P. 153 TOWN LISBON SUBDIVISION SECTION LOT 11

WELL LOG Not required for driven wells STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

Table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Rows include Top soil, Clay, Shaley, brown Mica, Schist, Mica, Shale, Mica, Flint, Mica, Mica & Quartz, Mica.

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. 40 15 (870) George J. Eustachy DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 8 NO. OF POUNDS 800 GALLONS OF WATER 40 DEPTH OF GROUT SEAL (to nearest foot) from 0 to 35 ft.

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

MAIN CASING TYPE Nominal diameter (nearest inch) 6 Total depth (nearest foot) 36

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

SCREEN RECORD screen type or open hole insert appropriate code below ST BR HO STEEL BRASS OPEN-HOLE PLASTIC OTHER

DEPTH (nearest ft.) HO 43 360 SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH)

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.) WQ TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min. to nearest gal.) 7 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 163 WHEN PUMPING 173

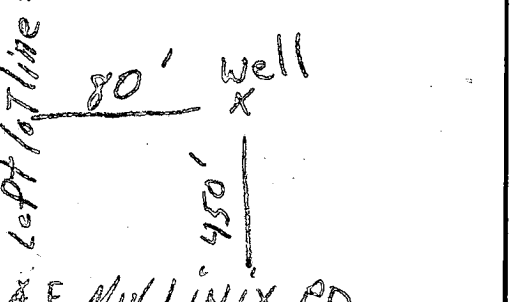
TYPE OF PUMP USED (for test) A air P piston T turbine C centrifugal R rotary O other (describe below) J jet S submersible

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)



12/10/86

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

10

New Installation
Replacement

Receipt # 38234
Date 12/10/86
Telephone 876-6880

Name of Installer Ronald W. Smith
ARROW WATER SYSTEMS INC

License number 874
Certified Well Pump Installer Well Driller Registered Plumber

Name of Property Owner Bartholow Builders Telephone 795-6930

Subdivision THARP 212N Prop Lot # 11 Well tag # -

Site Address 15848 A.F. MULLINEA Rd WoodBriar

Pump
1. Type
a. Deep well jet
b. Shallow well jet
c. Submersible
2. Make CoEwell
3. Model # SFS07422
4. Capacity 5 GPM
5. Pump exceeds well capacity Yes No
6. If Yes, is low pressure cutoff switch installed? Yes No
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors Cable guards Other

Motor
1. Horsepower 3/4
2. RPM 3470
3. Voltage
a. 110
b. 220

Pitless Adapter
1. Make
2. Model #
3. Depth

Tank
1. Capacity 82
2. Pressure relief valve? yes

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

Well data
1. Depth 360 ft.
2. Yield 15 GPM
3. Static water level ft.
4. Will water supply be disinfected by installer?

12-12-86 No inspection work covered

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: Ronald W. Smith

Date: 12/8/86

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

Ct. 8360

Barbara

Grand floor

1 office