

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 511958-H

A56429-H

DISTRICT _____

DATE 6/18/99

DATE SYSTEM APPROVED 8/30/99

INSPECTOR B.B.

7/26/99
2/3
7/27/99
10 am. C.O.
7/28/99
2pm
7/26/99
2pm
Septic Pump
Test
8/30/99
11-11:30

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH
~~XXXXXXX~~ 410-313-2640

03-325989

INDEXED

8/30/99
11:00

South Carroll Backhoe, Inc IS PERMITTED TO INSTALL X ALTER _____

ADDRESS 4410 Salem Bottom Road, Westminster, MD 21157 PHONE 410-875-4197

SUBDIVISION Gaither Hunt, Section I LOT 8 ROAD 11029 Dorsch Farm Road

PROPERTY OWNER NV Homes

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

PUMPED SEPTIC SYSTEM PROPOSED

NUMBER OF BEDROOMS 4

INSTALL: 1-1250 Gallon Pump Chamber
NOTES: - Septic pump detail to be provided by installer prior to issuance of septic permit.
- Pump performance test is necessary prior to Health Department approval of pumped septic permit.

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

TRENCHES - Trench to be 3 feet wide. Inlet $3\frac{1}{2}$ feet below original grade. Bottom maximum depth $5\frac{1}{2}$ feet below original grade. Effective area begins at $3\frac{1}{2}$ feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Place the distribution box 155 feet off the left (86.57') lot line and 10 feet off the front lot line. Run trenches on contour away from Dorsch Farm Road.

NOTES: - REQUIRED TRENCH LAYOUT: 45', 55', 60', 80'. MAINTAIN A MINIMUM OF 100 FEET TO THE WELL. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

oil stopper DS

PLANS APPROVED BY Mark E. Rifkin DATE 4-15-1999

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.

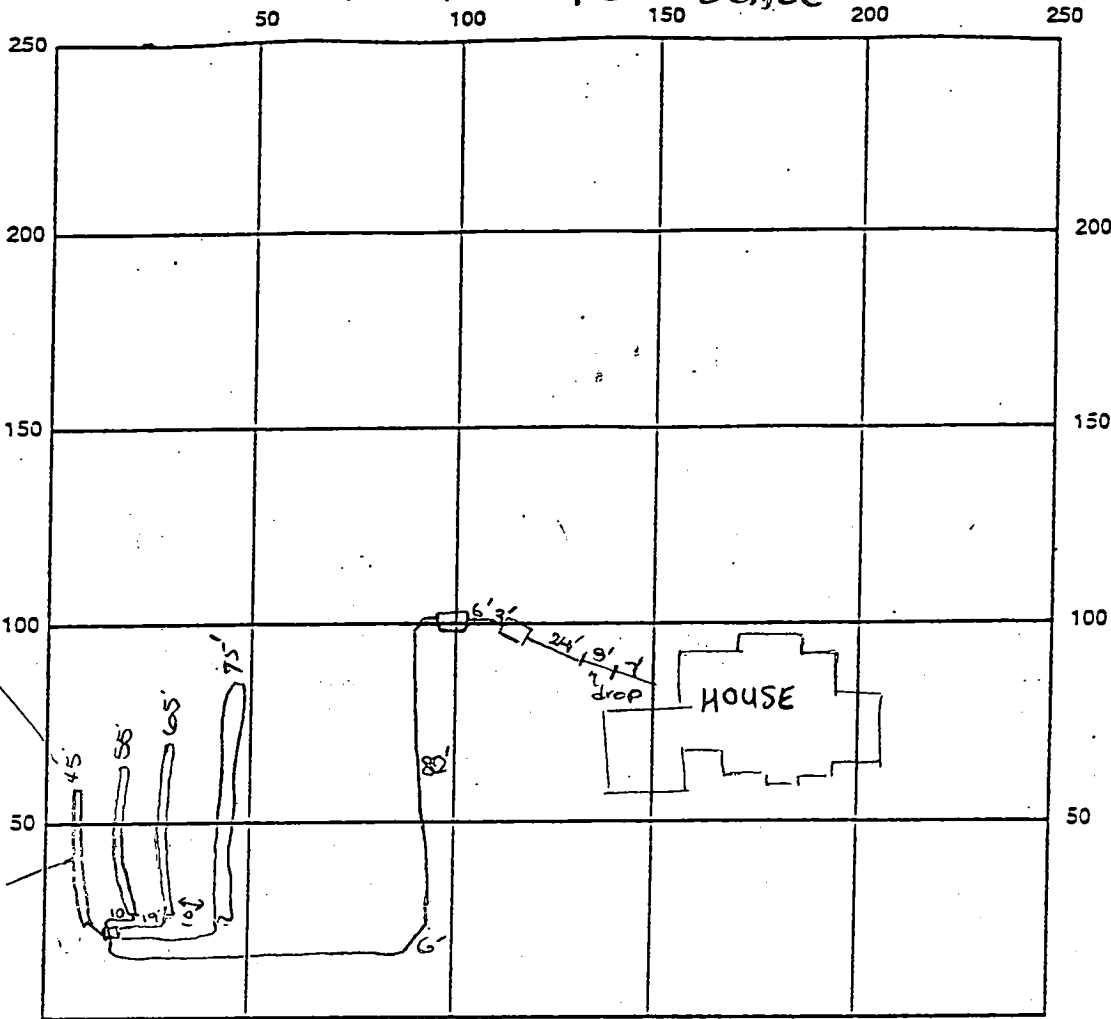
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

***CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.**

A56429-H

NOT TO SCALE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

Dorsen Farm Road

SEPTIC TANK LEVEL OK 1250 gal st. CLEANOUTS one on St. marked on p.p.

DISTRIBUTION BOX LEVEL OK 1250 gal pump p.p.

DRAIN FIELD/TILE DEPTH 5 1/2 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 1/2 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 240 FT.

NUMBER OF TRENCHES 4 ⁴⁵/₅₅ ONE SIDEWALL/BOTTOM AREA 720 SQ. FT.

DRYWELL INSIDE DIAMETER 75 FT. EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA SQ. FT.

REMARKS: 7/23/99 OK to cover from 3' off house to dist box. OK
to continue. Needs house connection. DKS 7/26/99 OK to
cover 1st 3 trenches & continue at 7/27/99 - final trench OK to complete & cover
8/30/99 Pump and alarm O.K. (B.B.) HOUSE CONN VERIFIED VIA
T/C w/so. Carroll Backhoe (MR)

DATE SYSTEM APPROVED 8/30/99 INSPECTOR B. Baber



2-26-98

SUGGESTED REVISION
 LOTS 8, 9 THE OBJECTIVE
 IS TO KEEP THE S.O.A.
 AS HIGH AS
 POSSIBLE ON LOT
 OUT OF DRAINAGE
 FEATURE

3/2/98
 PROPOSED WALKWAYS LOTS
 8, 9 STAYED AS REVISED
 OK

WATER
 AT 11
 PICK UP 2/26 T.C. W/ ZACH
 ON 2/27 PROPOSED HOUSE LOCATION
 IS BEING REVISOR, THEY MAY
 WANT TO PUSH REVISION OF SOA
 CLATHER INTO SOA THAN
 ACCURABLE W/ WET SEASON
 TESTING. EITHER WAY
 WE'LL NEED RE-STARING (ALLOW)
 HOW/EOA PLAT

PARCEL

PUBLIC TREE
 MAINTENANCE
 ELEMENT

LOT 7
 19,981 SF

LOT 8
 50,000 SF

LOT 9
 12,271 SF

LOT 10
 18,910 SF

LOT 11
 18,906 SF

PROPOSED PAVING

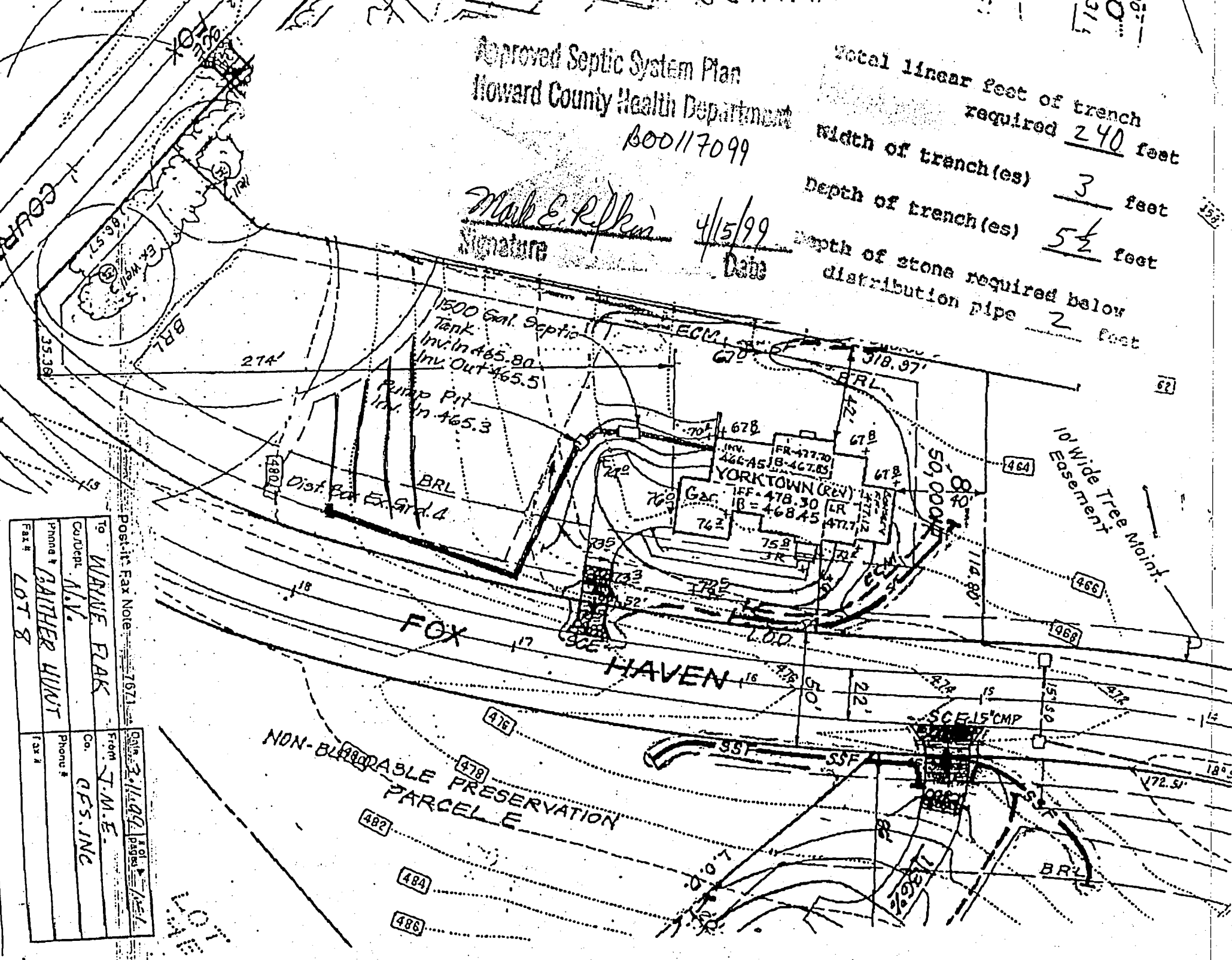
ROAD

WETLAND
 AREA

Approved Septic System Plan
 Howard County Health Department
 800117099

Total linear feet of trench required 240 feet
 Width of trench(es) 3 feet
 Depth of trench(es) 5 1/2 feet
 Depth of stone required below distribution pipe 2 feet

Mark E. Riffkin 4/15/99
 Signature Date



TO: WARNE FAR		DATE: 3/11/99	
COURT: M.V.		PAGE: 1/1	
PHONE & FAX: PAIHER UNIT		FROM: J.M.E.	
LOT: LOT 8		CO.: GES, INC	
FAX #		PHONE #	
FAX #		FAX #	

Position Fax Note 7671

MAY 1999 66-11-1-REV

HIDDEN

FOX

HAVE

FOX

ROCK

LOT 72
48,890 SF

P.I.=19+95.45

PC=3+24.5715'

P.T.=19+45.96

P.R.C.=17+95.95

10' PUBLIC TREE
MAINTENANCE
EASEMENT

49,981 SF

LOT
49,889 SF

SEPTIC AREA
10,018 Sq.Ft.

SEPTIC AREA
10,015 Sq.Ft.

LOT 8
50,000 SF

P.C.C. 14+97.74

LOT 10
48,910 SF

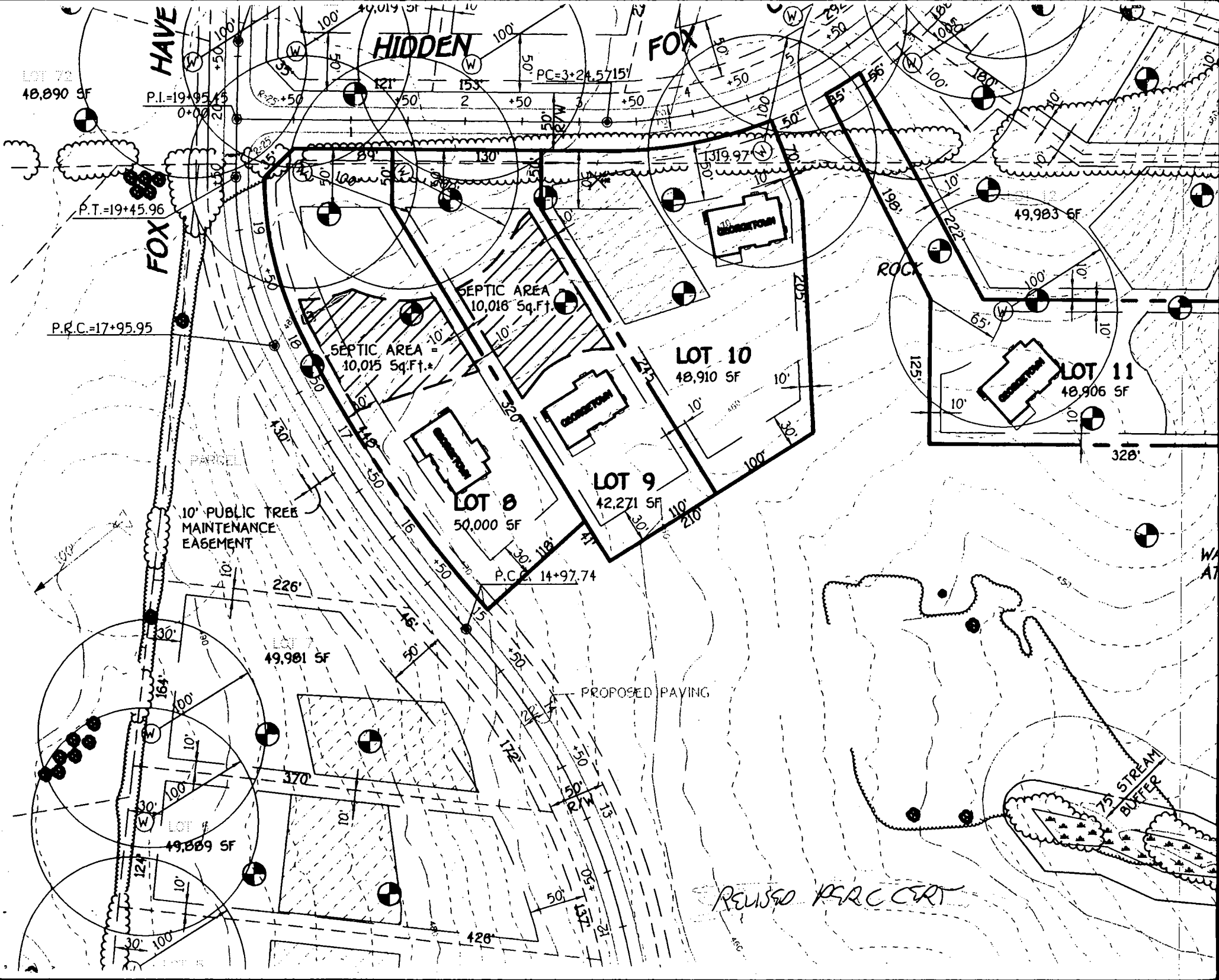
LOT 9
42,271 SF

LOT 11
48,906 SF

PROPOSED PAVING

75' STREAM
BUFFER

REVISO PARC CRT



SITE INSPECTION SHEET

OWNER: NV Homes

DATE REQUESTED: 7/23/99

ADDRESS: Gaither Hunt - 1018
11029 Dorsch Farm Rd

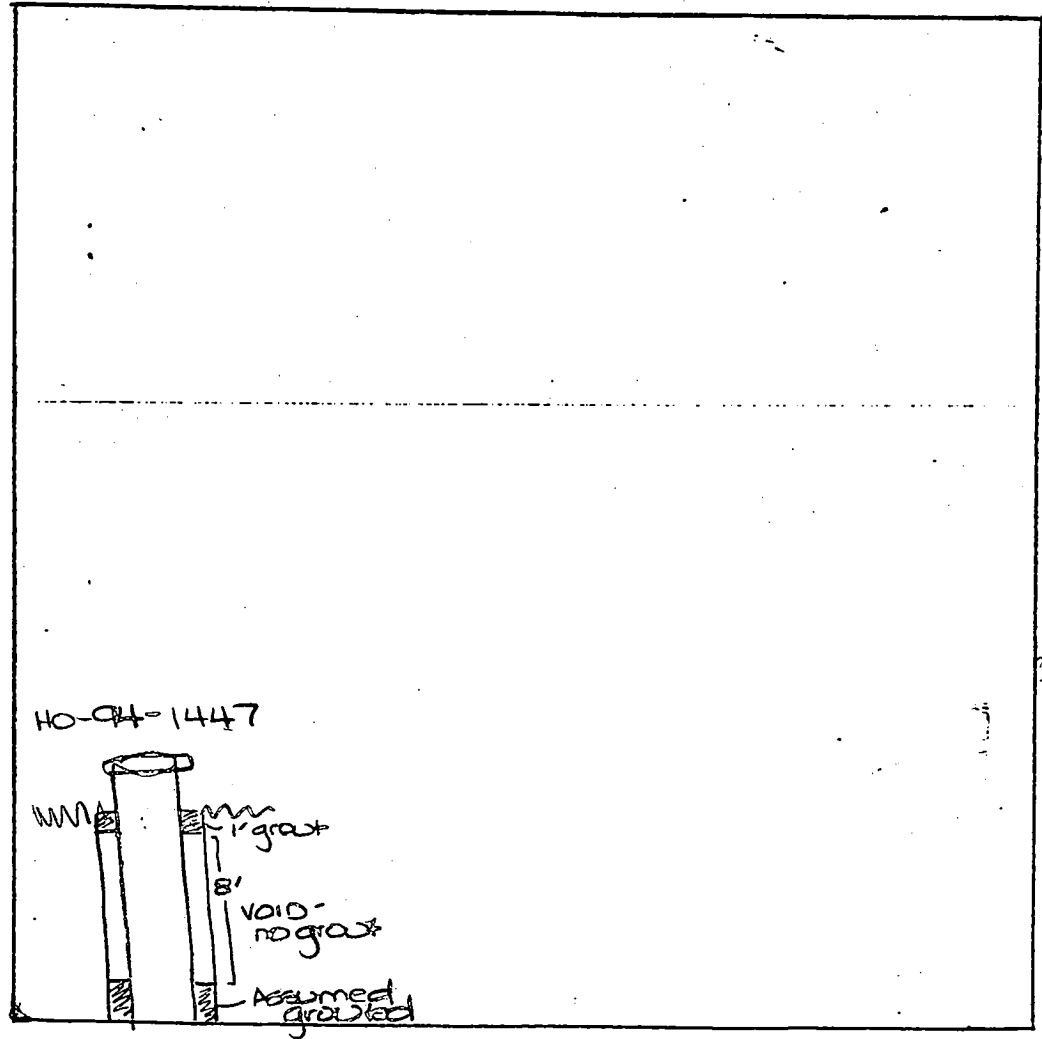
DRILLER: R. Mayne

WELL TAG # _____

COUNTY # _____

PROPOSAL: inspection requested for pitless adapter
installation

LOCATION DIAGRAM

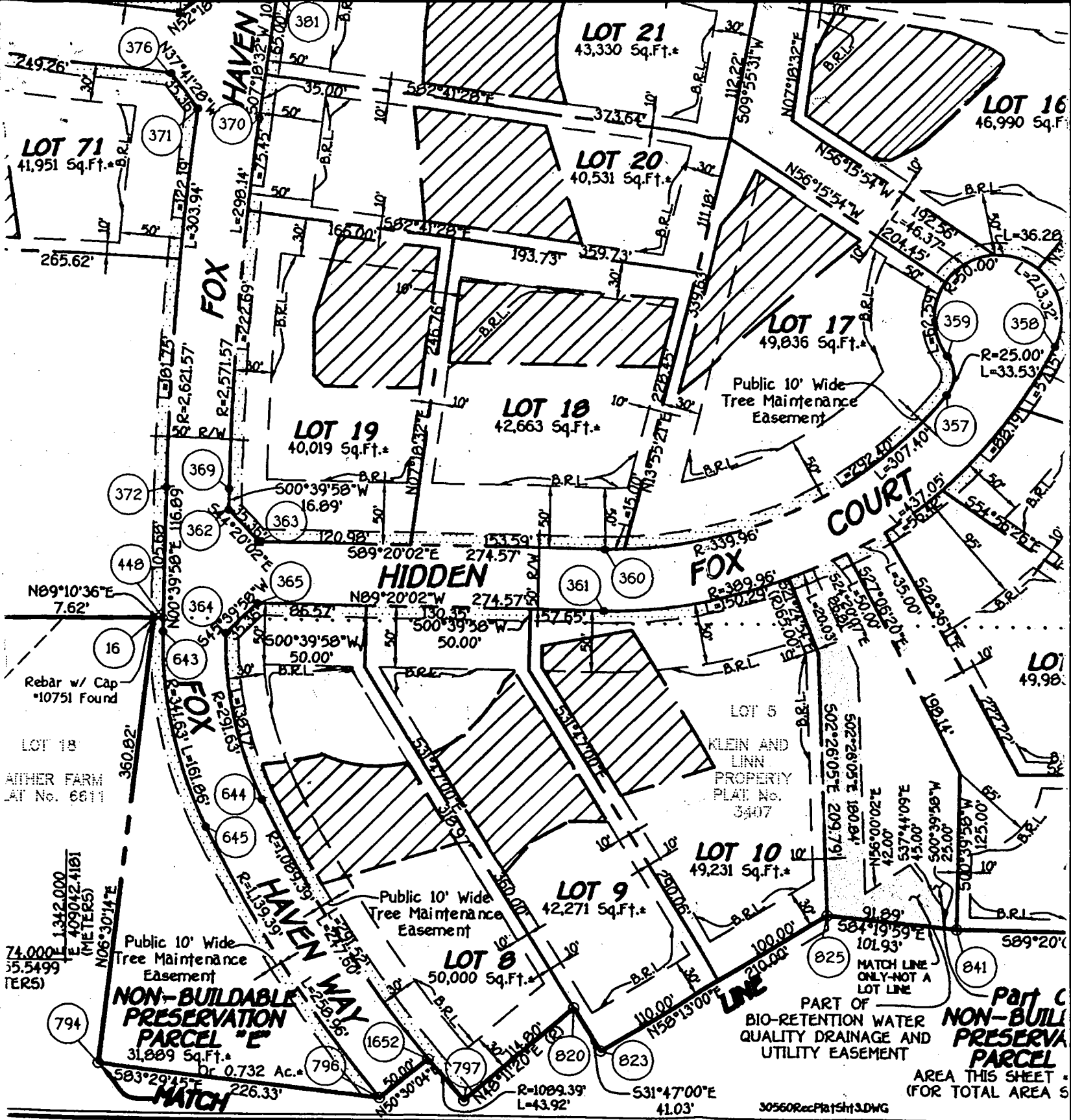


7/23/99
WPI -
well line, PA 4'bg
casing 1' ag
2pc cap or
PVC conduit
OK
DJO

COMMENTS: No grout in area indicated ("void") - need to
contact well driller to properly complete grouting of well.
Spoke to Ralph Mayne 8/24/99 additional grout added
to just below the pitless adapter. DKS

DATE: 7/23/99

INSPECTOR: DJO



OWNER'S CERTIFICATE

Family Corporation, By Philip Carroll, Vice-President, Mary Arminja Bloom, Charles A. Klein, Jr., John J. Klein, in And William F. Klein, Owners Of The Property Shown And Described Hereon, Hereby Adopt This Plan Of And In Consideration Of The Approval Of This Final Plat By The Department Of Planning And Zoning, Establish The Restriction Lines And Grant Unto Howard County, Maryland, Its Successors And Assigns; (1) The Right To Lay, and Maintain Sewers, Drains, Water Pipes And Other Municipal Utilities And Services In And Under All Roads And Easements And The Specific Easement Areas Shown Hereon; (2) The Right To Require Dedication For Public Use Of The Streets And/Or Roads And Floodplains And Open Space Where Applicable And For Good And Other Valuable Purposes; (3) The Right To Require Dedication For Public Use Of The Streets And/Or Roads And Floodplains, Storm Drainage Facilities And Open Space Where Applicable; (4) The Right To Require Waterways And Drainage Easements For The Specific Purpose Of Their Construction, Repair And Maintenance. No Building Or Similar Structure Of Any Kind Shall Be Erected On Or Over The Said Easements And

I Hereby Certify That This Subdivision Of Trustee Under Deed Of Philip Carroll, Mary Arminja Bloom, Charles A. Klein, Jr., John J. Klein, William F. Klein, Being Known As 'The Klein & Linn Property Plat No. 3407' That Land Conveyed By Deed Dated January 19, 1988, And Recorded In Lib. 10, Page 10, Or Will Be In

APPLICATION

PERCOLATION TESTING

A 56429H

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

DISTRICT _____

DATE 3-26-96

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER J Thomas Scribner NV Homes

ADDRESS c/o Land Design & Development PHONE 410 740 5176

AGENT OR PROSPECTIVE BUYER Donald R. Reuver Jr

ADDRESS 10805 Hickory Ridge Rd PHONE _____
21044

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 1381

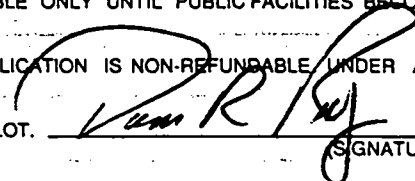
ROAD AND DESCRIPTION (11029 Dorsch Farm Road)

TAX MAP 29 PARCEL # 21

SIZE OF LOT 1+ Acres TYPE BLDG. _____
(SINGLE FAMILY DWELLING OR COMMERCIAL)

BLDG. PERMIT SIGNED
AND RETURNED 4-15-99
Serial # B10117099
SFD - 4 Burn

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.



(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

LEVEL

A 56429H

HEDGEROW

COUNTY #

SOIL PROFILE 36

TOPSOIL
ORANGE CL
TAN S.S.L.

5'

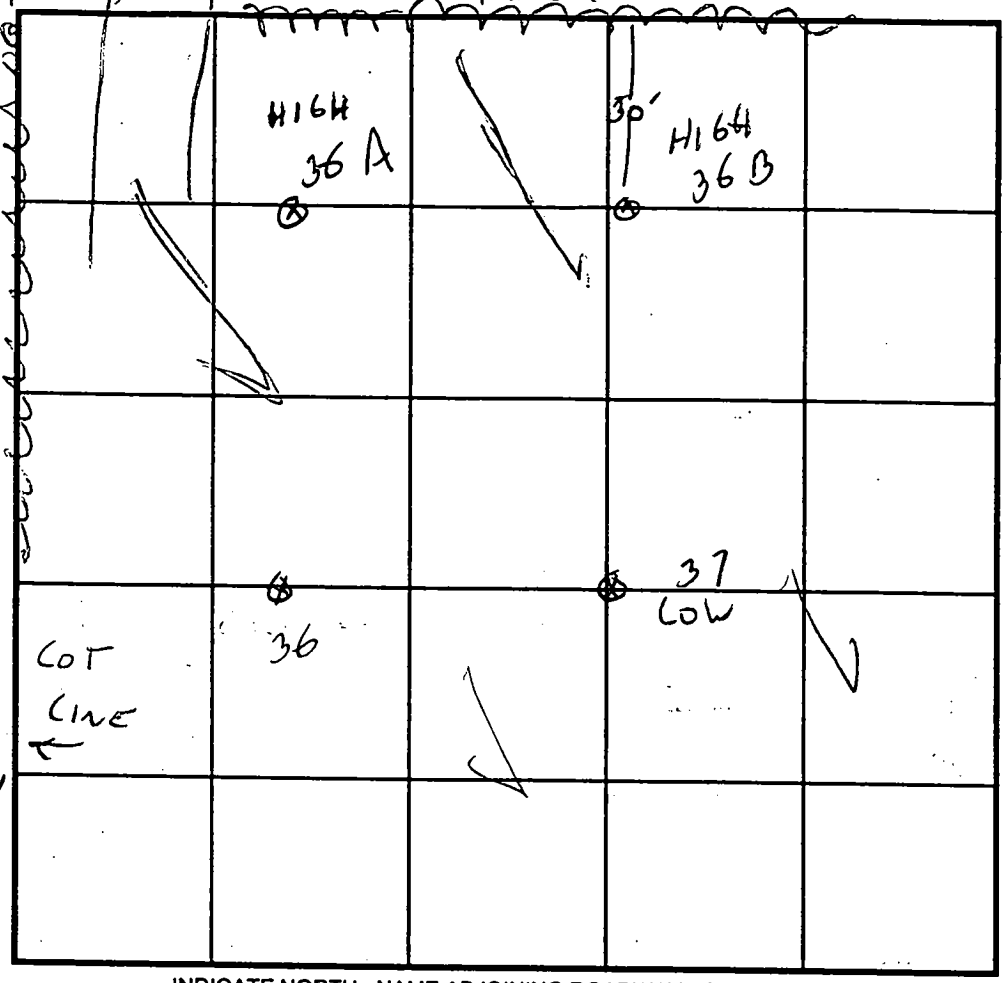
12

37 + 36 B

TOPSOIL
BROWN CLAY LAM
BROWN COARSE SANDY CLAY

6"

3'



SOIL PROFILE 36

TOPSOIL 8"
MED BROWN CL
TAN MUCKEAW S.S.L.

3'

12

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
3-26-96	36 A	4'	1:38	1:43	1:43	1:48	SAW
	36	4'	1:44	1:47	1:47	1:52	SAW
	37	4'	1:55	1:56	1:56	1:57	1 MLW
	36 B	4'	2:00	2:01	2:01	2:04	3AW
	37	REQ'D 6'	2:21	2:24	2:24	2:29	5MIN

REMARKS LOT 8

TYPE OF SOIL _____

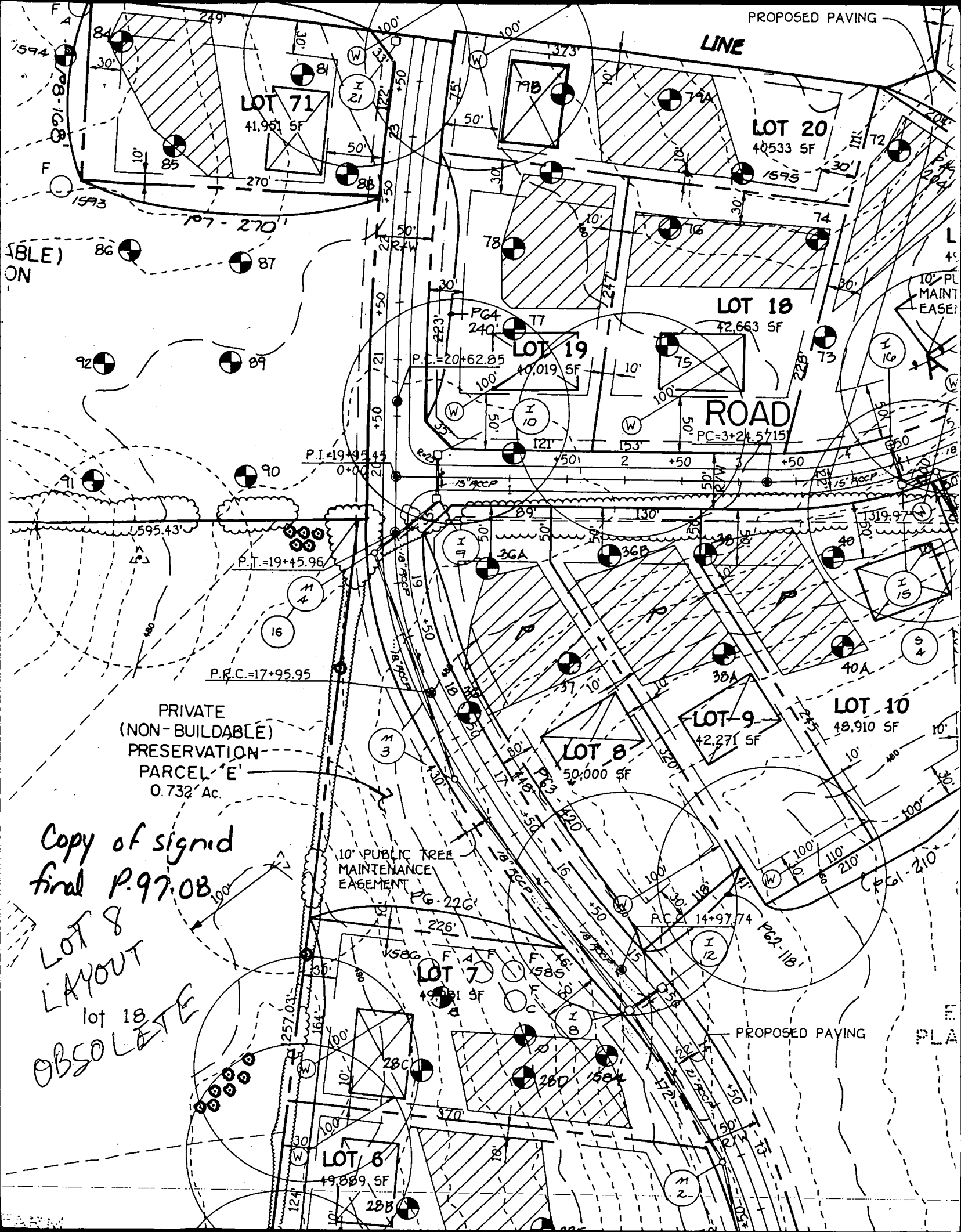
TESTED BY G. SAVAGE ALSO PRESENT _____

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 5 TRENCH WIDTH 3'

INLET DEPTH 3' MAXIMUM BOTTOM DEPTH 5' SQ. FT./BEDROOM 180

PROPOSED PAVING

LINE



PRIVATE
(NON-BUILDABLE)
PRESERVATION
PARCEL 'E'
0.732 Ac.

Copy of signed
final P.97.08
LOT 8
LAYOUT
lot 18
OBSOLETE

10' PUBLIC TREE
MAINTENANCE
EASEMENT

PROPOSED PAVING

PLA

C1 05168 SEQUENCE NO. (MDE 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)

FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE

COUNTY NUMBER A. 56429H

ST/CO USE ONLY DATE RECEIVED MM DD YY

DATE WELL COMPLETED MM DD YY 03 06 98

Depth of Well 22 185 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 10-99-1947

OWNER WOODLOT ENTERPRISES STREET OR RFD DORSCH EARL ROAD TOWN ELLICOTT CITY SUBDIVISION GAITHER OVERLOOK SECTION LOT 8

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entries for Top Soil, Clay, Sandy, Sand Stone, MICKA, Sand Stone, MICKA.

GROUTING RECORD WELL HAS BEEN GROUTED (Y) (N) TYPE OF GROUTING MATERIAL (C) (M) (B) (C) NO. OF BAGS 15 NO. OF POUNDS 1500

CASING RECORD MAIN CASING TYPE (S) (T) (G) (6) (60) (60) (61) (63) (64) (66) (70)

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

SCREEN RECORD screen type or open hole (S) (T) (H) (O) (B) (R) (P) (L) (O) (T)

NUMBER OF UNSUCCESSFUL WELLS: 0 WELL HYDROFRACTURED (Y) (N)

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, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS LIC. NO. 1 M S D 116 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. 1 M S D 112

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

DEPTH (nearest ft.) table with columns 1-21 and rows A-E. Includes handwritten values: HO, 58, 185.

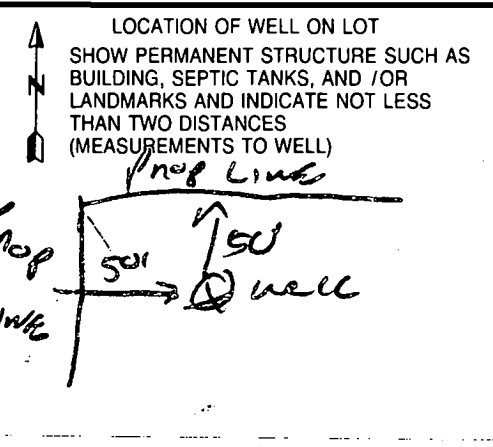
SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH) 56 60 from to

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

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q 70 72 74 75 76 TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST HOURS PUMPED (nearest hour) 3 8 9 PUMPING RATE (gal. per min.) 10 11 15 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 25 17 20 ft. WHEN PUMPING 55 22 25 ft. 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. TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29. CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 35 PUMP HORSE POWER 37 41 PUMP COLUMN LENGTH (nearest ft.) 43 47 CASING HEIGHT: (circle appropriate box and enter casing height) (+) above () below LAND SURFACE 2 (nearest foot)



B 1 8741 SEQUENCE NO. (MDE USE ONLY) STATE OF MARYLAND PERMIT TO DRILL WELL STATE PERMIT NUMBER 10-94-1447
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS) please print or type fill in this form completely

Date Received (APA)
OWNER INFORMATION
WOODLOT ENTERPRISES
 15 Last Name Owner First Name 34
SOZB OONSRY HALL RD
 36 Street or RFD 55
BELLICOHA CITY MD 21042
 57 Town 70 State 72 Zip 76

DRILLER INFORMATION CIRCLE: MSD/MGD/MWD
Ralph MAYNE
 116
 77 License No. 80
 Driller Name Ralph MAYNE well drilling
 Firm Name 5120 Brown Church Rd. Mt Airy
 Address Mt Airy Feb 4 1998
 Signature Date

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)

APPROXIMATE DEPTH OF WELL 150 FEET
 APPROXIMATE DIAMETER OF WELL 6" NEAREST INCH

METHOD OF DRILLING (circle one)
 BORED (or Augered) JETTED Jetted & DRIVEN
 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)
 CABLE REVerse-ROTary DRive-POINT
 other _____

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)
 THIS WELL WILL NOT REPLACE AN EXISTING WELL
 THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
 THIS WELL WILL DEEPEAN AN EXISTING WELL
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52

Not to be filled in by driller (MDE OR COUNTY USE ONLY)
 APPROX. PERMIT NUMBER _____ GAP _____
 FORCE GJ WRITE INITIALS IN BOX PERMIT No. 10-94-1447
 67 68 70 71 72 73 74 75 76 77 78 79

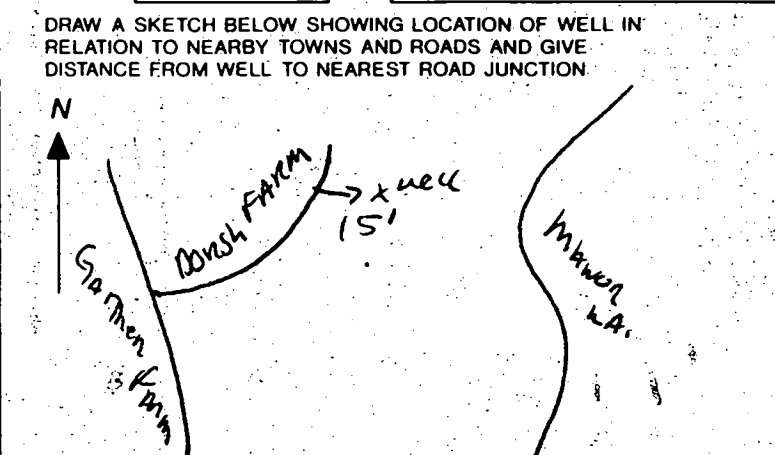
SPECIAL CONDITIONS
 NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -

B 3 LOCATION OF WELL
HOWARD
 8 COUNTY 21
GAITHER OVERLOOK
 23 SUBDIVISION 42
 SECTION _____ LOT 8
 44 46 48 50
ELCCICOTT CITY
 52 NEAREST TOWN 71
 MILES FROM TOWN (enter 0 if in town) 9 MI
 73 76 77 78

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
 NORTH
 NW 8-9 NE 8-9
 W 8 E 8
 TOWN
 SW 8-9 S SE 8-9
 SOUTH
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 WEST EAST
 SOUTH
 DISTANCE FROM ROAD 115
 34 37
 ENTER FT OR MI FT
 38 39
 TAX MAP: 29 BLK: 11 PARCEL 322

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
HOWARD A56429-H
 COUNTY NAME COUNTY NO.
 STATE SIGNATURE _____ INSERT S _____
 DATE ISSUED 3/3/98 3/3/98
 43 48 CO SIGNATURE EXP. DATE
 NORTH GRID 830000 EAST GRID 519000
 50 55 57 63

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
 E 520/4
 N 830
 000 OK
 000



GALTHER HUNT REVISION 10/29/98

CONFERENCE: ZACH FISH JOEY ECKER WAYNE BLACK

LOTS 67 OK MINOR TO REAR-
SDA REVIEW NO TEST NEEDED

LOT 66 - WET SEASON TEST

LOT 68 OK

WELLS TO BE UNCHANGED

LOT 8 TO STAY W RE-CERTIFICATION
NO LOWER AOS-WALLO REQUIRE WET SEASON TEST, STAY OUT OF SWALE

LOT 66 PROPOSAL TO PUSH SDA
TOWARDS FRONT OF LOT
OK W 1 + 2 TEST NO CBS
TEST ANYTIME

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043

Fax 313-2648 313-2640

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation
Replacement

Receipt # _____
Date 8/27/99

Name of Installer ROBERT L. FEEZER CO, Inc

Telephone 410 781-4655

License Number 2122

Certified Well Pump Installer Well Driller Registered Plumber

Name of Property Owner NV Homes

Telephone 410 795-1405

Subdivision Cathlamet Lot # 8

Well Tag # HR-94-1447

Site Address Dorsch Farm Road

Pump

- 1. Type
 - a. Deep well jet
 - b. Shallow well jet
 - c. Submersible
- 2. Make AERMEYER
- 3. Model # AS-5550
- 4. Capacity 8 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 1/2
- 2. RPM 3450
- 3. Voltage _____
 - a. 110 _____
 - b. 220 X

Pitless Adapter

- 1. Make HARVARD
- 2. Model # PT-800
- 3. Depth 42" +

Tank

- 1. Capacity WPT-205
- 2. Pressure relief valve? YES

Piping

- 1. Type POLY
- 2. Size 1"
- 3. NSF and/or BOCA Code approved
- 4. Depth of supply line 42"

Well data

- 1. Depth 185 ft.
- 2. Yield 10 GPM
- 3. Static water level _____ ft.
- 4. Will water supply be disinfected by installer? YES

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.

7/23/99-ON SRW
DUS SRW

Signature of Applicant: Robert L. Feezer

Date: 8/27/99

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