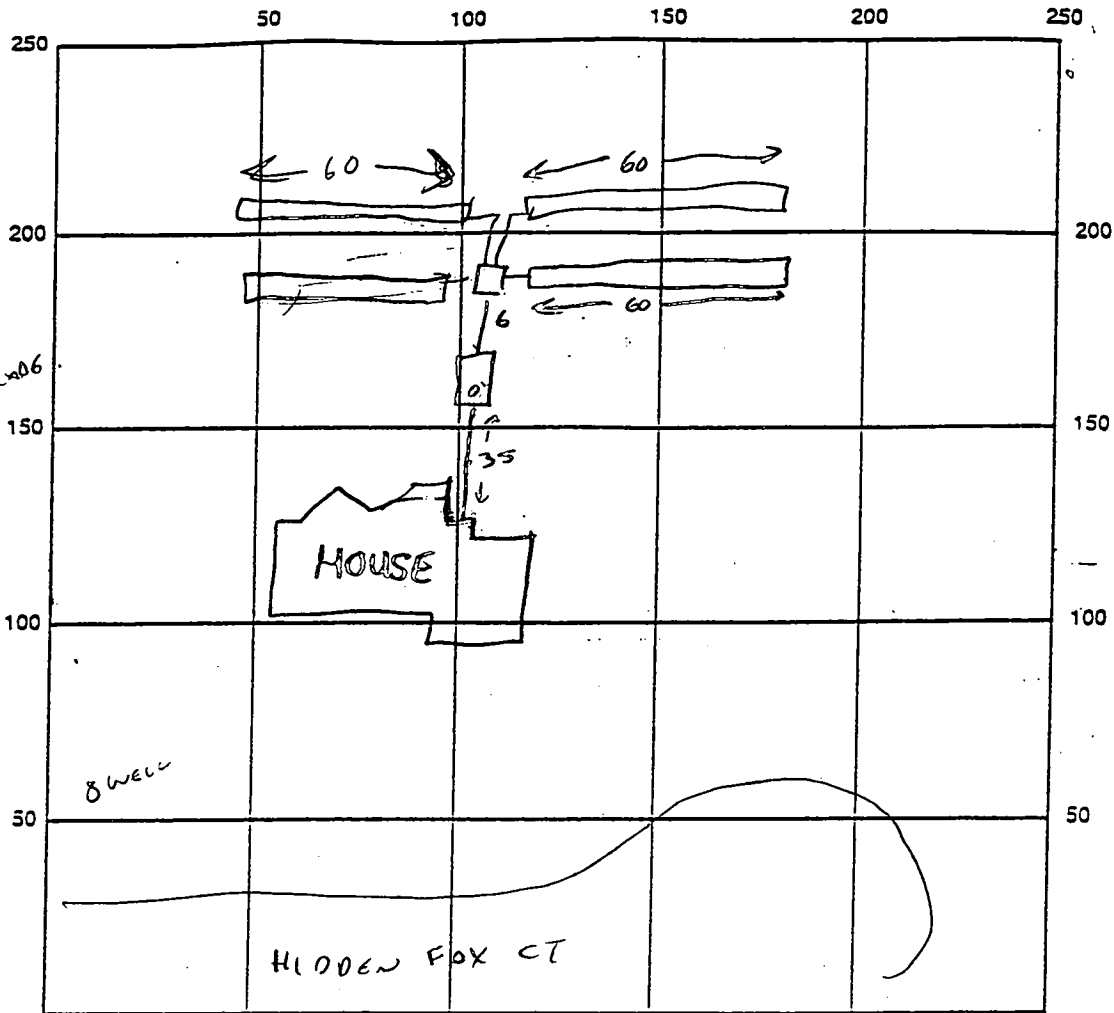




NOT TO SCALE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL  CLEANOUTS 1st

DISTRIBUTION BOX LEVEL

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

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 240 FT.

NUMBER OF TRENCHES 4 @ 60' ONE SIDEWALL/BOTTOM AREA 960 SQ. FT.

DRYWELL DRYWELL INSIDE DIAMETER N/A FT. EFFECTIVE DEPTH BELOW INLET N/A FT.

ABSORBENT AREA N/A SQ. FT.

REMARKS: HOUSE - TANK - DB - COMPLETE - OK TO COVER. 1ST TRENCH EXCAVATED 2/23/99 CW

1<sup>ST</sup> & 2<sup>ND</sup> TRENCHES COMPLETE AND COVERED. (CW)

2<sup>ND</sup> TWO TRENCHES COMPLETE OK TO COVER ALL. (CW) 2/24/99

2/25/99 WPI 4.0' below grade - PVC conduit & 2 piece cap - OK - NO WPI form ALL

DATE SYSTEM APPROVED 2/24/99 INSPECTOR CW

# APPLICATION

PERCOLATION TESTING

A 56429

P. \_\_\_\_\_

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

DISTRICT \_\_\_\_\_

DATE \_\_\_\_\_

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 Scrivener NV Homes

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

AGENT OR PROSPECTIVE BUYER Donald R. Reuser Jr

ADDRESS 10805 Hickory Ridge Rd PHONE \_\_\_\_\_  
21044

PROPERTY LOCATION:

SUBDIVISION \_\_\_\_\_ LOT NO. 93 17

ROAD AND DESCRIPTION (11009 Hidden Fox Court)

TAX MAP 29 PARCEL # 21

LOG. PERMIT SIGNED  
AND RETURNED 8-26-98  
Serial # B70 113084

SIZE OF LOT 1+ Acres TYPE BLDG. SFD - 4 Bed  
(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.

Donald R. Reuser Jr  
(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

COUNTY #

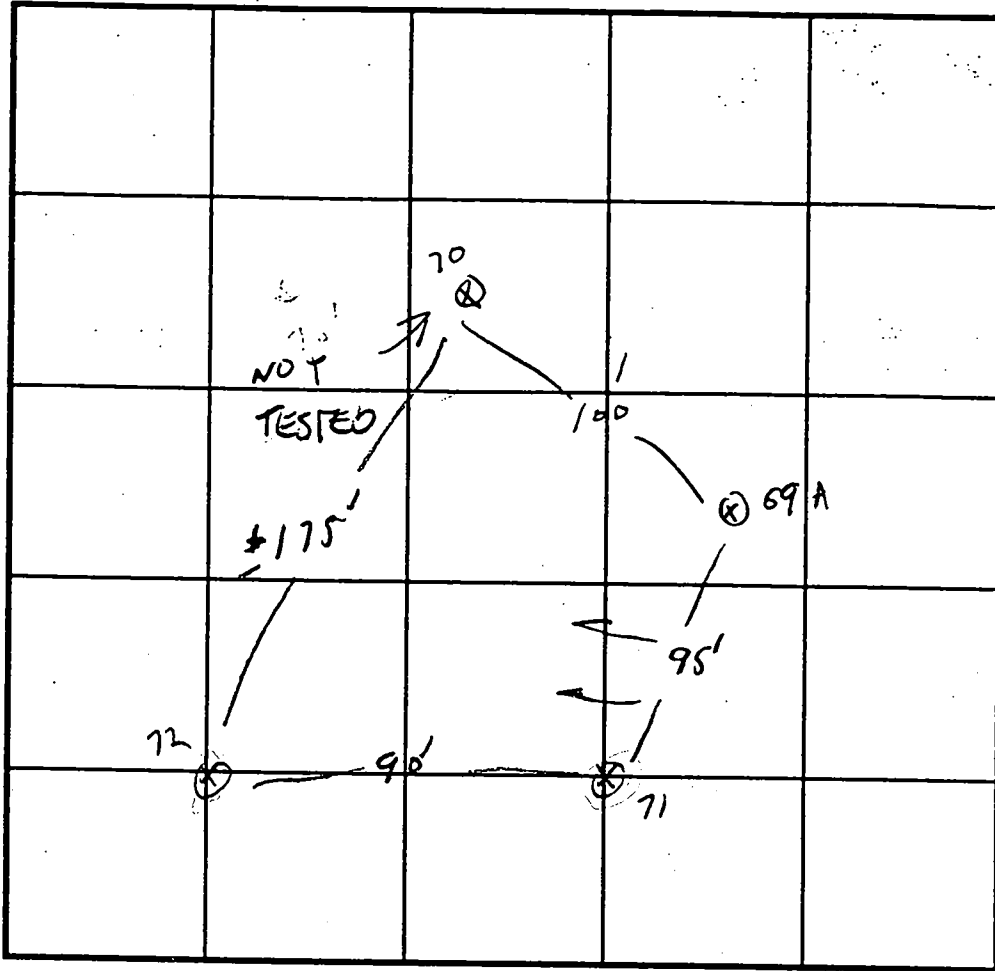
SOIL PROFILE

0'

Empty rectangular box for soil profile notes.

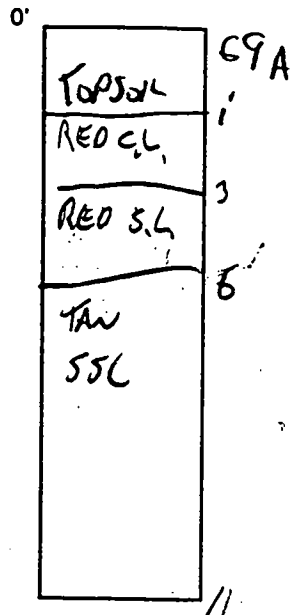
Empty rectangular box for soil profile notes.

Empty rectangular box for soil profile notes.



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

TYPICAL SOIL PROFILE



DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4-11-96	71	5' / 11'	SEE	LOT 3	NOTE		3 MW
	72	5' / 11'	"	"	"		4 MW
	69A	5' / 11'	12:04	12:06	12:06	12:08	2 MW
	70	4' / 9'	3:54	3:54	3:56	3:58	2 MW

REMARKS LOT 4 REC. RECONFIGURATION PLAN AS SAVED

TYPE OF SOIL

TESTED BY G. SAVAGE ALSO PRESENT MIKE + MIKE

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME TRENCH WIDTH

INLET DEPTH MAXIMUM BOTTOM DEPTH SQ. FT./BEDROOM

# APPLICATION

PERCOLATION TESTING

A 56429

P \_\_\_\_\_

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

DISTRICT \_\_\_\_\_

DATE 4-11-96

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 Scrivener

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

AGENT OR PROSPECTIVE BUYER Donald R. Reuwer Jr

ADDRESS 10805 Hickory Ridge Rd PHONE \_\_\_\_\_  
21044

PROPERTY LOCATION:

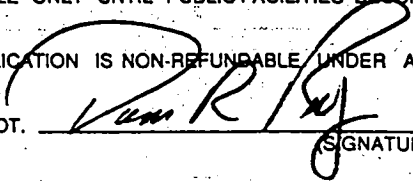
SUBDIVISION \_\_\_\_\_ LOT NO. 40 3 17

ROAD AND DESCRIPTION \_\_\_\_\_

TAX MAP 29 PARCEL # 21

SIZE OF LOT 1+ 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.



(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

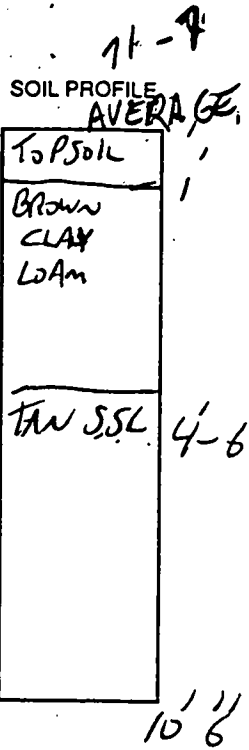
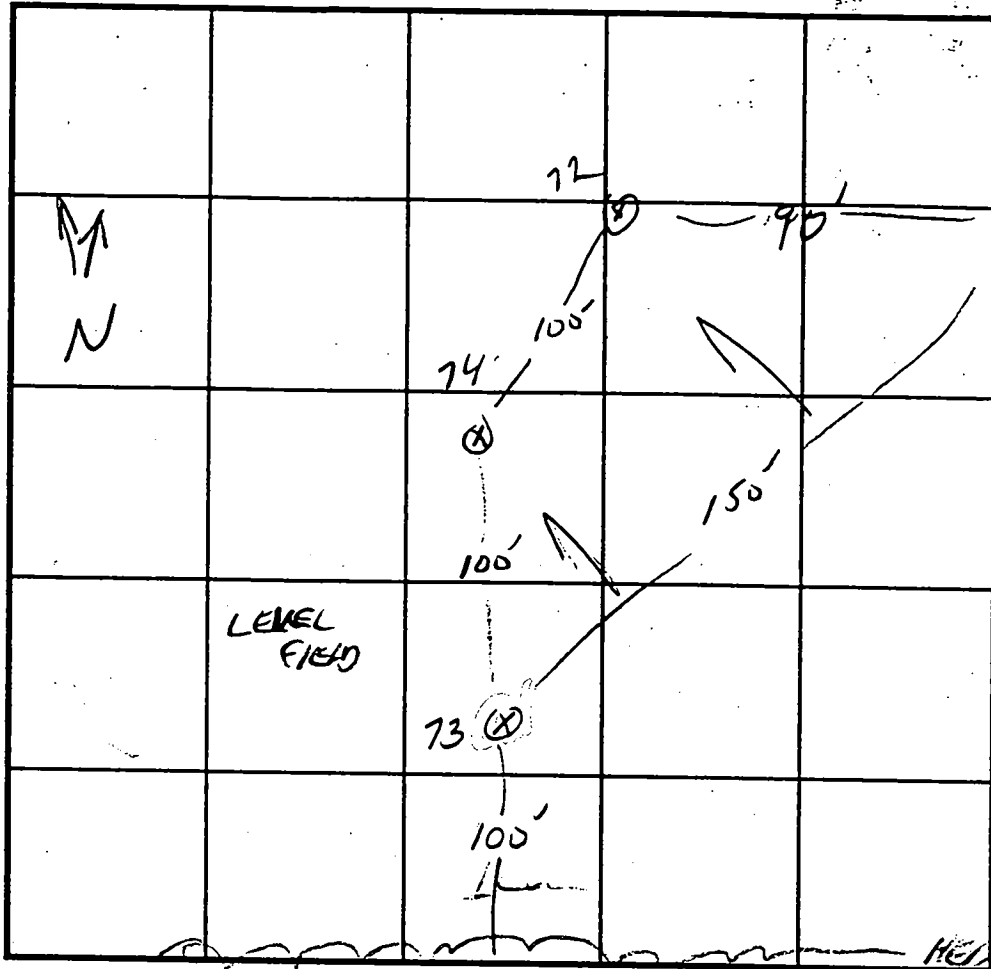
COUNTY #

SOIL PROFILE

0' [Empty box for soil profile data]

[Empty box for soil profile data]

[Empty box for soil profile data]



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/11/96	73	4' 6" / 16' 6"	11:32	11:36	11:36	11:43	1AW
	74	4' 6" / 11' 6"	11:41	11:41	11:41	11:44	3AW
	71	5' / 11'	11:48	11:50	11:50	11:53	3AW
	72	5' / 11'	11:54	11:57	11:57	12:01	4AW

REMARKS LOT 3 RECONFIGURATION PLAN DUG AS STATED

TYPE OF SOIL

TESTED BY G. SAVAGE

ALSO PRESENT DON REUWER, MIKE + MIKE

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME TRENCH WIDTH

INLET DEPTH MAXIMUM BOTTOM DEPTH SQ. FT./BEDROOM

Total linear feet of trench

Required 240 feet

Width of trench (es) 3 feet

Depth of trench (es) 5 feet

Depth of stone required below distribution pipe 2 feet

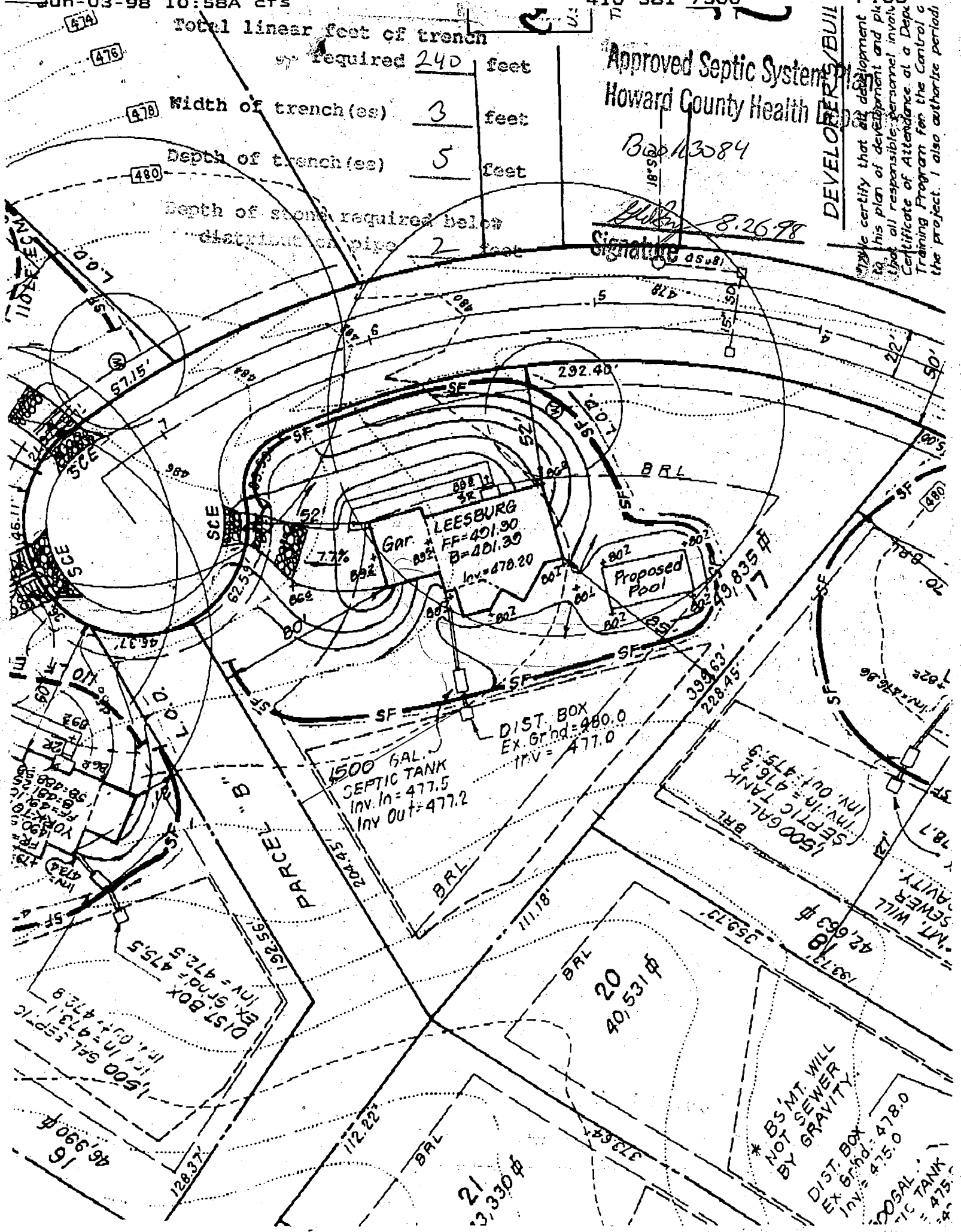
Approved Septic System  
Howard County Health Department

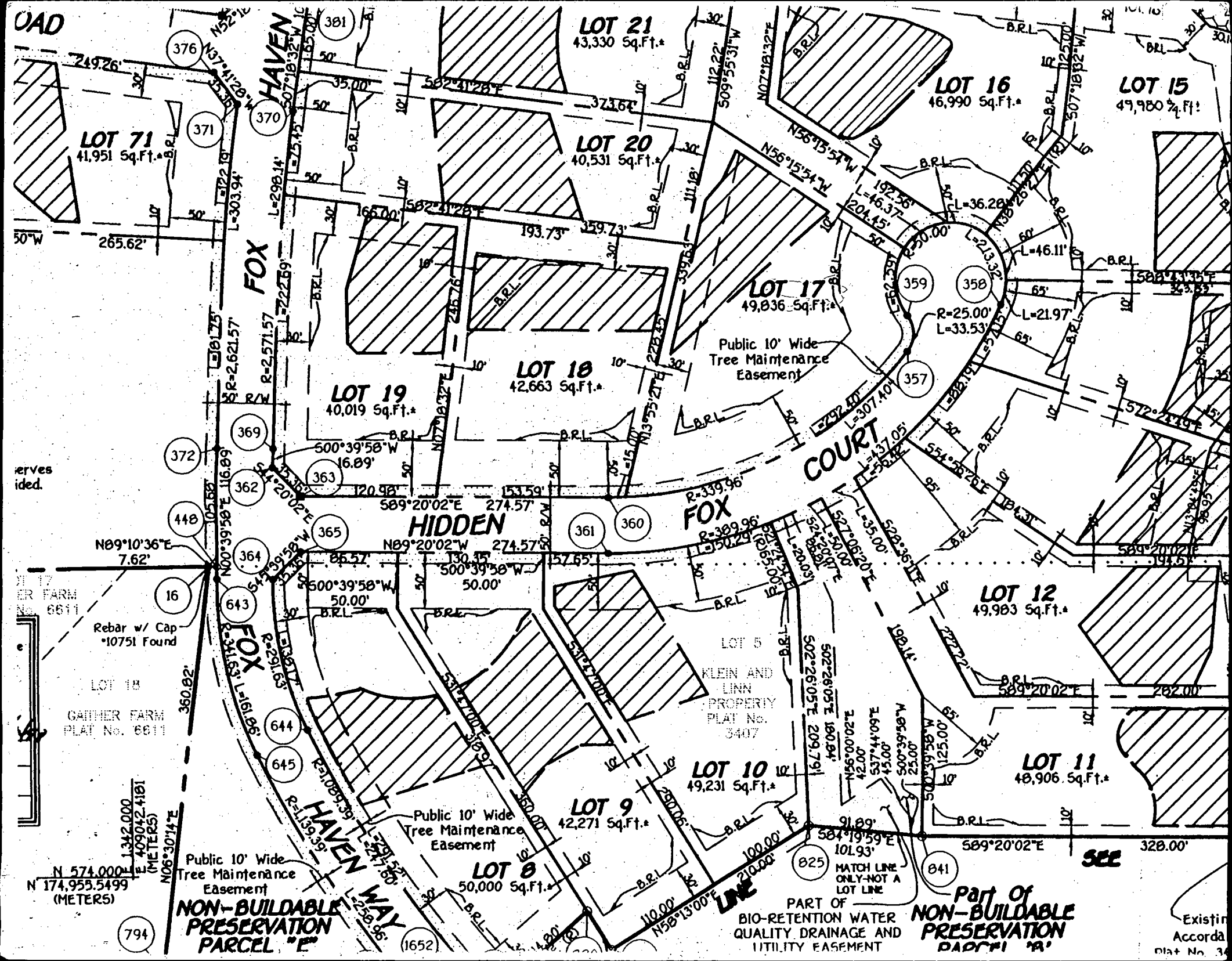
Prop 113084

DEVELOPER/BUILD

I hereby certify that all development on this plan of development and plan that all responsible personnel involved are in compliance with the Health Department Certificate of Attendance at a Department Training Program for the Control of the project. I also authorize periods

Signature [Signature] 8.26.98





OAD

LOT 71  
41,951 Sq.Ft.▲

LOT 21  
43,330 Sq.Ft.▲

LOT 16  
46,990 Sq.Ft.▲

LOT 15  
49,980 Sq.Ft.▲

LOT 20  
40,531 Sq.Ft.▲

LOT 17  
49,036 Sq.Ft.▲

LOT 18  
42,663 Sq.Ft.▲

LOT 19  
40,019 Sq.Ft.▲

HIDDEN

FOX COURT

LOT 12  
49,903 Sq.Ft.▲

LOT 10  
49,231 Sq.Ft.▲

LOT 11  
48,906 Sq.Ft.▲

LOT 9  
42,271 Sq.Ft.▲

LOT 8  
50,000 Sq.Ft.▲

LOT 18  
GATHER FARM  
PLAT No. 6611

LOT 5  
KLEIN AND  
LINN  
PROPERTY  
PLAT No.  
3407

LOT 18  
GATHER FARM  
PLAT No. 6611

NON-BUILDABLE  
PRESERVATION  
PARCEL "E"

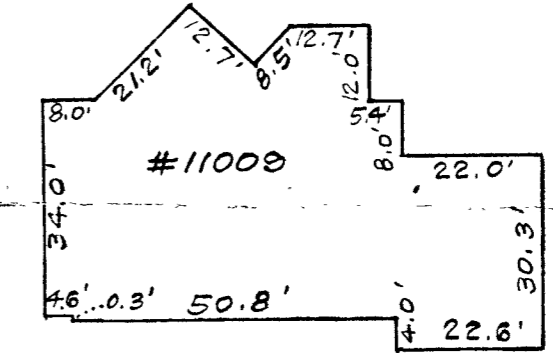
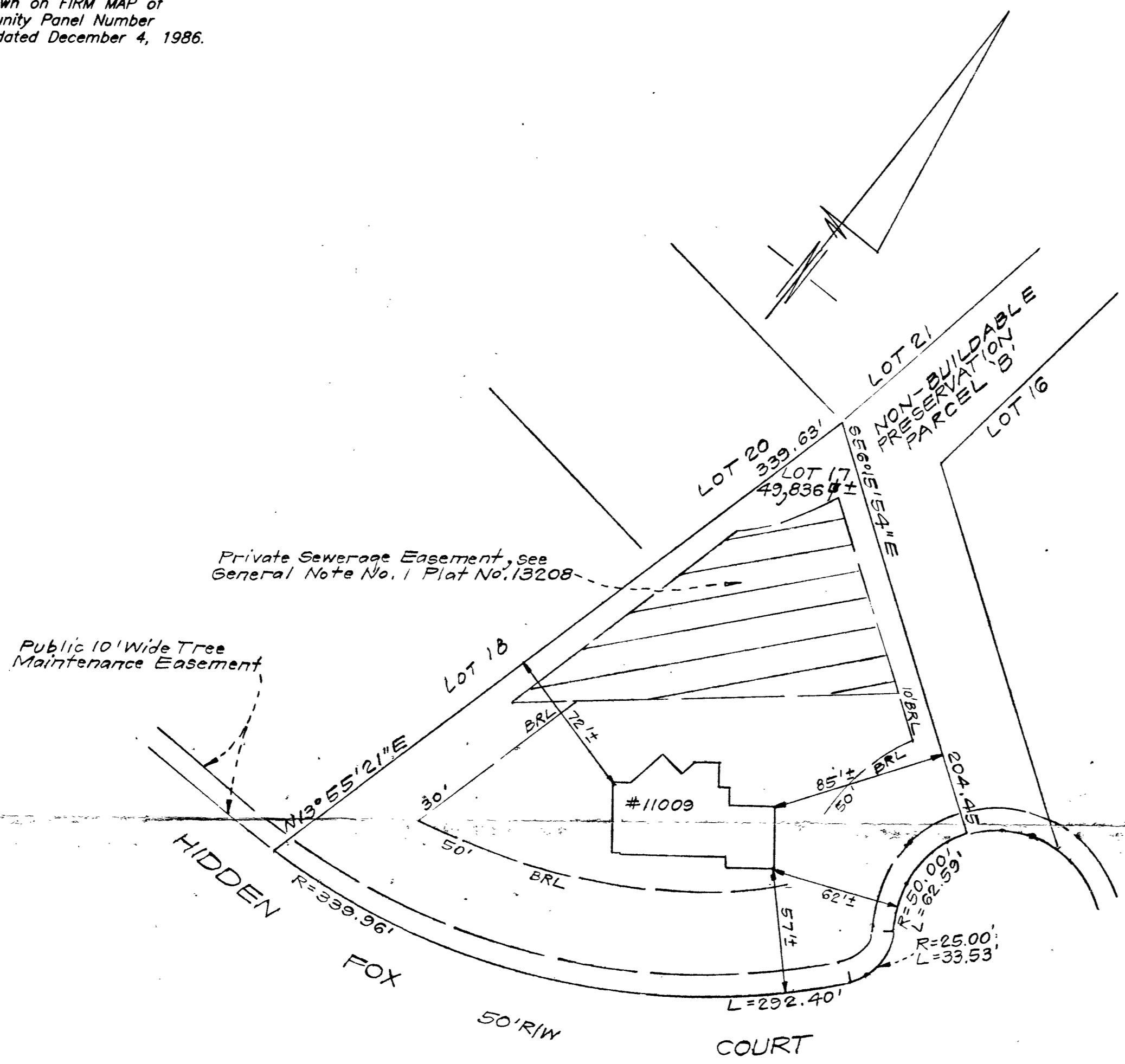
PART OF  
BIO-RETENTION WATER  
QUALITY DRAINAGE AND  
UTILITY EASEMENT

Part of  
NON-BUILDABLE  
PRESERVATION  
PARCEL "A"

Existin  
Accord  
Plat No. 34

NOTE: This lot appears to lie in an area classified as Zone C, area of minimal flooding, as shown on FIRM MAP of Howard County, Maryland, Community Panel Number 2400440027B, Panel 27 of 45, dated December 4, 1986.

Wall Check: 12-11-98  
Top of Wall Elev.: 488.8



SCALE: 1"=30'

HOUSE MOVED ~10' TO LEFT  
AND ~10' TO REAR  
NO IMPACT (MR) 1/21/99

CONSUMER INFORMATION

1. This plat is of benefit to the consumer only insofar as it is required by a lender of a title insurance company or its agent in connection with contemplated transfer, financing or refinancing purposes;
2. This plat is not to be relied upon for the establishment or location of fences, garages, buildings or other existing or future structures;
3. This plat does not provide for the accurate identification of property boundary lines, but such identification may not be required for the transfer of title or for securing financing or refinancing.

SURVEYOR'S CERTIFICATE

I hereby certify that a field survey of this property has been made under my supervision for the purpose of locating the improvements shown hereon, and that they are located as shown.

12-16-98 DATE *Paul A. [Signature]*  
STATE OF MARYLAND  
PAUL A. ADOLPHUS, JR.  
REGISTERED  
PROPERTY LINE SURVEYOR

NOTES:

1. The ± setback distance accuracy = 1'.

RECEIVED DEC 17 1998

Plat Reference: PLAT No. 13210 Gaither Hunt Lot #17

		<b>CLARK • FINEFROCK &amp; SACKETT, INC.</b> ENGINEERS • PLANNERS • SURVEYORS 7135 MINSTREL WAY • COLUMBIA, MD 21045 • (410) 381-7500-BALT. • (301) 621-8100 WASH.	
		DESIGNED DRAWN CHECKED DATE	LOCATION DRAWING 11009 HIDDEN FOX COURT LOT 17 <b>GAITHER HUNT</b> Section 1, Area 1, Lots 1 - 33, Lots 63 - 71, Preservation Parcels 'B' Thru 'E' And Bulk Parcel 'F', A Resubdivision of Lots 4 and 5, Klein and Linn Property, (Plat No. 3407) And Liber 4208 At Folio 436 SECOND ELECTION DISTRICT HOWARD COUNTY, MARYLAND
12-14-98	PAS	98-008-0	98-008-0

C1 4369

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED AFTER WELL IS COMPLETED. COUNTY NUMBER A 56429Q

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED 08 14 98

Depth of Well 175 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO 94 1639

OWNER RUSSELL DEVELOPMENT LLC STREET OR RFD HIDDEN FOX WAY TOWN WILDE LAKE SUBDIVISION GATHER HUNT SECTION 1 LOT 17

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entries for Brown mica soil, Gray Granite, Green Granite, and Gray Granite.

GROUTING RECORD form including fields for WELL HAS BEEN GROUTED, TYPE OF GROUTING MATERIAL (CEMENT, BENTONITE CLAY), NO. OF BAGS, NO. OF POUNDS, GALLONS OF WATER, DEPTH OF GROUT SEAL.

CASING RECORD form including fields for casing types insert appropriate code below, MAIN CASING TYPE, Nominal diameter, Total depth.

OTHER CASING (if used) form with fields for diameter and depth.

SCREEN RECORD form including fields for screen type or open hole, insert appropriate code below, and various material options.

NUMBER OF UNSUCCESSFUL WELLS: 0. WELL HYDROFRACTURED: YES (Y) NO (N)

- 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 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT...

DRILLERS LIC. NO. 1 MWD 355. DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION). LIC. NO. 1 JWD 341. Max B. Jones

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

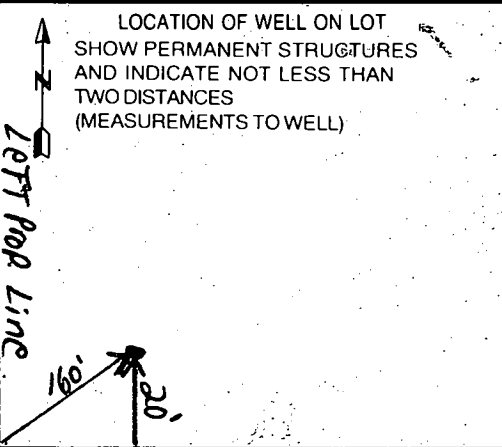
DEPTH (nearest ft.) table with columns for casing depth and screen depth. Includes rows for HO, A, C, H, S, R, E, N.

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

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) form including fields for T, LOG INDICATOR, OTHER DATA.

PUMPING TEST form including fields for HOURS PUMPED, PUMPING RATE, METHOD USED TO MEASURE PUMPING RATE, WATER LEVEL, BEFORE PUMPING, WHEN PUMPING, TYPE OF PUMP USED.

PUMP INSTALLED form including fields for DRILLER INSTALLED PUMP, TYPE OF PUMP INSTALLED, PLACE, CAPACITY, GALLONS PER MINUTE, PUMP HORSE POWER, PUMP COLUMN LENGTH, CASING HEIGHT.



<b>B 1</b>	<b>4799</b>	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER <b>HO-94-1635</b> fill in this form completely
------------	-------------	--------------------------------	---	--

Date Received (APA) **7 15 98**

**OWNER INFORMATION**

**RUSSELL DEVELOPMENT LLC**  
Last Name Owner First Name

**8808 CENTRE PARK DRIVE SUITE 108**  
Street or RFD

**COLUMBIA MARYLAND 21045**  
Town State Zip

**B 3** LOCATION OF WELL

**HOWARD** COUNTY

**GAITHER HUNT** SUBDIVISION

SECTION **1** LOT **17**

**WILD LAKE** NEAREST TOWN

MILES FROM TOWN (enter 0 if in town) **4** M I

**DRILLER INFORMATION**

**MICHAEL BARLOW MWD 355**  
Driller's Name License No.

**MICHAEL BARLOW WELL DRILLING SO INC**  
Firm Name

**912 FAUN COURT JOPPA, MD 21085**  
Address

*[Signature]* **6-17-98**  
Signature Date

**B 4** DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

**ROAD A** NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

**20** DISTANCE FROM ROAD FT

TAX MAP: **29** BLK: **5** PARCEL **21**

**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 APPROVAL)

TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER; HEALTH DEPARTMENT APPROVAL

**HOWARD** COUNTY NAME **A-564290** COUNTY NO.

STATE SIGNATURE \_\_\_\_\_ INSERT S \_\_\_\_\_

DATE ISSUED **7 21 98** CO SIGNATURE *[Signature]* EXP. DATE **7 21 99**

NORTH GRID: **515 000** EAST GRID: **830 000**

APPROXIMATE DEPTH OF WELL **200** FEET

APPROXIMATE DIAMETER OF WELL **6** NEAREST INCH

**METHOD OF DRILLING** (circle one)

BORED (or Augered)  JETTED  Jettied & 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 DEEPEM AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) \_\_\_\_\_

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

- Grout 12pm**
- 
- 

WRITE THE BOX NUMBER FROM THE MAP HERE

E **830 830**

N **830 515**

8-14-98

*[Signature]*

NO INSP

Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROP. PERMIT NUMBER **GS** G A P

FORCE **65** WRITE INITIALS IN BOX PERMIT No. **HO-94-1635**

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

**DOUGLAS PATRICKSON**  
ENGINEER  
40 AVENUE COLUMBIA HEALTH DEPT  
RECEIVED

*[Signature]*

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 \_\_\_\_\_

Name of Installer Robert L. Feezer Co. Inc Telephone \_\_\_\_\_

License Number 2122  
Certified Well Pump Installer  Well Driller \_\_\_\_\_ Registered Plumber

Name of Property Owner NV Homes Telephone 410 721-4703  
Subdivision Orchard Hunt Lot # 17 Well Tag # HO-94-1635  
Site Address Hidden Fox Court

Pump

- 1. Type
  - a. Deep well jet \_\_\_\_\_
  - b. Shallow well jet \_\_\_\_\_
  - c. Submersible

Motor

- 1. Horsepower 1/2
- 2. RPM 3450
- 3. Voltage \_\_\_\_\_
  - a. 110 \_\_\_\_\_
  - b. 220 X

Pitless Adapter

- 1. Make Florida
- 2. Model # FM10
- 3. Depth 42"

- 2. Make \_\_\_\_\_
- 3. Model # \_\_\_\_\_
- 4. Capacity \_\_\_\_\_ 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 \_\_\_\_\_

Tank

- 1. Capacity Capacity Air 36 gallon
- 2. Pressure relief valve? Yes

Piping

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

Well data

- 1. Depth 170 ft.
- 2. Yield \_\_\_\_\_ GPM
- 3. Static water level \_\_\_\_\_ ft.
- 4. Will water supply be disinfected by installer? Yes

INSPECTION COMPLETED  
OK (ALM) SRH 2/25/99

SEE SEPTIC RECORD

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: Robert L. Feezer

Date: 2/26/99

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

