

B 1 25859

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL

STATE PERMIT NUMBER

Ho-15-0243

558571-1 please type

fill in this form completely

Date Received (APA)

07/01/16

OWNER INFORMATION

Green Leaf Builders, 1601 Jackson Street, Baltimore MD 21230

B 3

LOCATION OF WELL

Howard County, 23 Subdivision, Section 44-46, Lot 48-50, Nearest Town: Fulton

B 4

SOURCES OF DRILLING WATER

1 well

11865 Lime Kiln Rd

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



34 200 37 DISTANCE FROM ROAD FT

ENTER FT OR MI 38 39

TAX MAP: 46 BLK: 2A PARCEL 14785

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)

- Domestic Potable Supply & Residential Irrigation, Farming (Livestock Watering & Agricultural Irrigation), Industrial, Commercial, Dewatering, Public Water Supply Well, Test, Observation, Monitoring, Open Loop Geothermal, Closed Loop Geothermal

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard County, State Signature, Date Issued 7/22/16, Co Signature, Exp. Date 4/12/17

APPROXIMATE DEPTH OF WELL 300 FEET, APPROXIMATE DIAMETER OF WELL 6 INCH

METHOD OF DRILLING (circle one)

- Bored (or Augered), Jetted & Driven, Air-Rotary, Air-PerCUSSION, Rotary (Hydraulic Rotary), Cable, REVERSE-ROtary, Drive-POINT

REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)

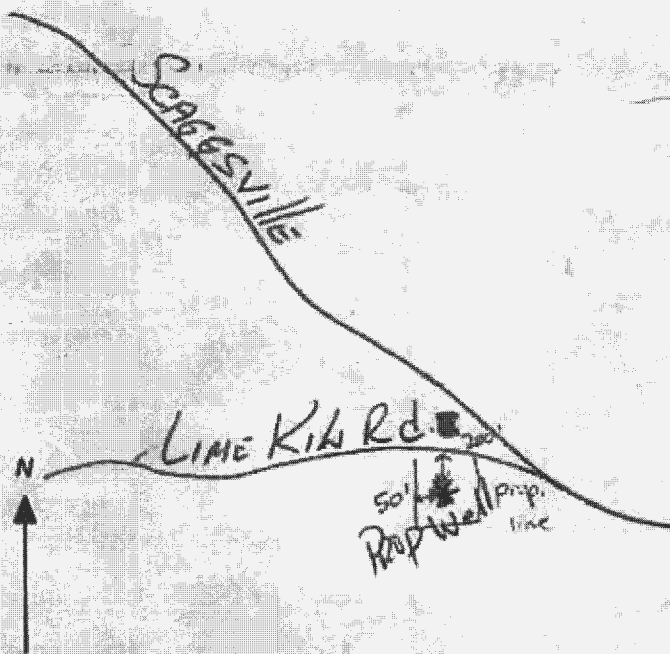
- This well will not replace an existing well, This well will replace a well that will be abandoned and sealed, This well will replace a well that will be used as a standby-contact local approving authority for policy on standby wells, This well will deepen an existing well

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

APPROP. PERMIT NUMBER G, PERMIT No. 40-15-0243

SPECIAL CONDITIONS see attached memo

PROPOSED LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURES SUCH AS BUILDINGS, SEPTIC SYSTEM, ROADS AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCE MEASUREMENTS TO WELL



For Service Call

Office #
410-876-5100

CARROLL WATER SYSTEMS

www.carrollwater.com

1-800-978-5100



HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH
PTIC PROGRAM
FAX: (410)313-2648

- ★ WATER TREATMENT ★ WELL PUMPS ★
- ★ PRESSURE TANKS ★ WATER HEATERS ★
- ★ WATER TESTING ★

Brian Smith

Well Pump, Pitless Adapter, and Supply Piping

NOTE: The installer is responsible for requesting an inspection prior to 9 am on the day of the desired inspection. No work is to be covered until approved by the Health Department. All installations must comply with the National Standard Plumbing Code (NSPC, as amended locally) and COMAR 26.04.04 (MD Well Construction Regulations). Submission of a complete form is required prior to Use and Occupancy approval.

Company Name: Carroll Water Telephone #: 410-876-5100
 Address: 66 ALLETON COURT
STE 3 WESTMINSTER
MD 21157

(Must circle one) Licensed Plumber _____ Licensed Well Driller _____
 License # and name of individual responsible for the field installation:
 Name (Print): Ron Smith License# PI0074
 Licensed Well Pump Installer _____

*A licensed individual must perform the actual installation. Apprentices must be under the supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification. Unlicensed individuals may be reported to the appropriate licensing agency.

Name of Property Owner: _____ Telephone #: _____
 Subdivision: _____ Lot #: _____ Well Tag #: HO-15-0243 ✓
 Site Address: 11865 Lime Kiln Rd
Fulton MD 20759

Submersible Pump Data	Pitless Adapter	Well Cap and Electric Conduit
Make: <u>BOLCKELY</u>	Make: <u>CAMPBELL</u>	Two piece watertight cap: <input checked="" type="checkbox"/>
Model #: <u>BP4M510 221-02</u>	Model #: <u>PA800LF</u>	Screened, vented well cap: <input checked="" type="checkbox"/>
Pump Capacity: <u>50 GPM</u>	Depth: <u>45"</u> (36" min)	Cap secured to casing: <input checked="" type="checkbox"/>
Well Yield: _____ GPM	NSF/WSC approved: _____	Conduit min 18" B.G.: <input checked="" type="checkbox"/>
Depth of well encountered at time of pump installation: <u>500</u> (feet)		Conduit secured to well cap: <input checked="" type="checkbox"/>

If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4
 Torque arrestors, Cable guards, or other acceptable method used - Must circle one
 Safety rope, if used, attached to brass rope adapter or other acceptable method inside of well casing ✓

Piping to house	House Connection
Type: _____	PVC sleeve to undisturbed soil at wall penetration: <input checked="" type="checkbox"/>
PSI: <u>200</u> (160 psi min)	Length of sleeve (5' minimum from foundation): <input checked="" type="checkbox"/>
Depth of supply line: <input checked="" type="checkbox"/> (36" min)	Sleeve sealed properly: <input checked="" type="checkbox"/> <u>Silicone</u>

The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Signature of company representative responsible for installation: _____ date: 7/7/16

For Health Department Use Only - Not to be completed by Installer

Date Insp. Requested: 7/7/16 Date Insp. Approved: 7/7/16 Inspector: RW

Inspection Data: Pitless adapter watertight & water supply line at least 36" below grade	<input checked="" type="checkbox"/>
Two piece cap installed and attached to casing securely	<input checked="" type="checkbox"/>
Elec. conduit extends at least 18" below grade/attached to cap properly	<input checked="" type="checkbox"/>
Safety rope not outside of well cap/casing	<input checked="" type="checkbox"/>
Correct well tag attached properly and casing 8" above finished grade	<input checked="" type="checkbox"/>
Water supply line sleeved adequately at house connection	<input checked="" type="checkbox"/>
Adequate grout observed below pitless adapter	<input checked="" type="checkbox"/>

RW
Ray-wenger@yahoo.com

Heather

Hdori^o @ Carroll water.com

CARROLL WATER SYSTEMS
60 AILERON COURT, SUITE #3
WESTMINSTER, MD 21157
410-876-5100

HOWARD COUNTY YIELD TEST REPORT

Date Test Performed: 05-17-2016
 Address: 11865 Lime Kiln Rod
 Owner Name: Green Leaf Builders
 Well Depth: 500 Ft

Permit Number: HO-15-0243
 Subdivision:
 Election District:
 Static Water Level: 6 Ft

Time	Water Level	PSI Existing Pump	Pumping Rate Seconds to fill 1 gallon bucket	Calculated Flow-Gallons Per Minute
1145	6 ft	68 psi	3 sec	20.00
1200	144	48	4	15.00
1215	286	25	4	15.00
1230	308	65	36	1.67
1245	308	65	36	1.67
1300	308	65	36	1.67
1315	312	68	52	1.15
1330	312	68	52	1.15
1345	312	68	52	1.15
1400	312	68	52	1.15
1415	312	68	52	1.15
1430	312	68	52	1.15
1445	312	68	52	1.15
1500	312	68	52	1.15
1515	312	68	52	1.15
1530	312	68	52	1.15
1545	312	68	52	1.15
1600	312	68	52	1.15
1615	312	68	52	1.15
1630	312	68	52	1.15
1645	312	68	52	1.15
1700	312	68	52	1.15
1715	312	68	52	1.15
1730	312	68	52	1.15
1745	312	68	52	1.15
1800	312	68	52	1.15
1815	312	68	52	1.15
1830	312	68	52	1.15
1845	312	68	52	1.15

WATER WELL ABANDONMENT-SEALING REPORT FORM

SUBMIT COPIES OF COMPLETED FORM TO:

- COUNTY ENVIRONMENTAL AGENCY (contact MDE, WMA if address needed)
- WELL OWNER
- MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

OK
1/29/18 Jc

DATE WELL ABANDONED: 7-28-16 (month/day/year)

• PERMIT NUMBER OF ABANDONED WELL (if any) _____

• PERMIT NUMBER OF REPLACEMENT WELL: _____

• PERSON ABANDONING WELL: Sandy B. Cochran WELL DRILLER'S LICENSE NUMBER: 120

CIRCLE: MWD / ~~MD~~ / MGD

• OWNER'S NAME: Greenleaf Builders

• WELL LOCATION:

COUNTY: Howard

NEAREST TOWN: _____

TAX MAP _____ BLOCK _____ PARCEL _____

SUBDIVISION: _____

SECTION: _____ LOT: _____

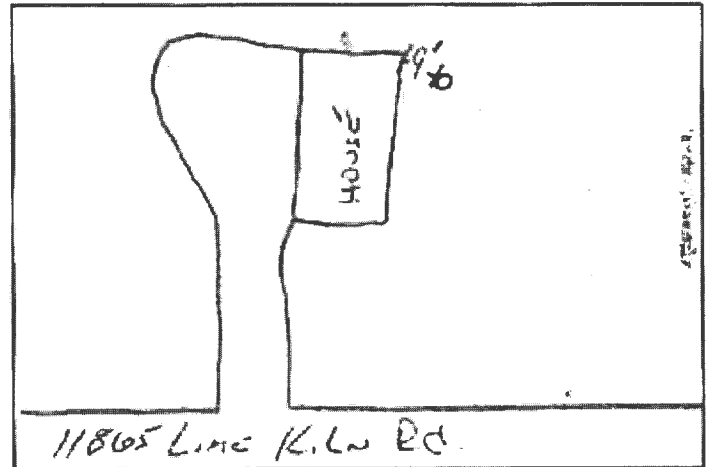
STREET ADDRESS: 11865 Lime Kiln Road

LATITUDE 39.150680

LONGITUDE 76.925471

Sandy B. Cochran
MSD 120

SITE LOCATION MAP



• TYPE OF WELL BEING ABANDONED:

- DRILLED _____ JETTED _____
 BORED _____ HAND DUG _____
 OTHER (specify) _____

• USE CODE: DOMESTIC

- _____ IRRIGATION _____ MUNICIPAL/PUBLIC
 _____ TEST/OBSERVATION _____ INDUSTRIAL
 _____ _____ GEOTHERMAL

• TYPE OF CASING:

- STEEL _____ PLASTIC _____
 CONCRETE _____ OTHER (specify) _____

SIZE OF CASING: 6 INCHES IN DIAMETER

DEPTH OF WELL: 100 FEET DEEP

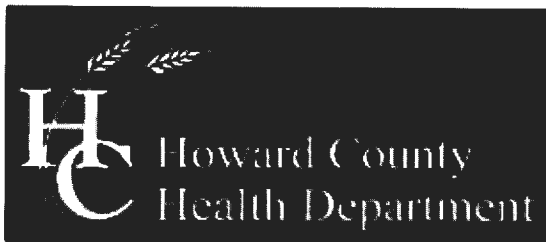
WAS ANY CASING REMOVED? YES NO

If yes, length removed, in feet: _____

WAS CASING RIPPED OR PERFORATED? YES NO

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
Crushed Stone	100	50
Portland type II Cement	50	0
VOLUME OF MATERIAL USED		
4 Bags Cement		



Bureau of Environmental Health

8930 Stanford Blvd, Columbia, MD 21045

Main: 410-313-2640 | Fax: 410-313-2648

TDD 410-313-2323 | Toll Free 1-866-313-6300

www.hchealth.org


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Twitter: [HowardCoHealthDep](https://twitter.com/HowardCoHealthDep)

Maura J. Rossman, M.D., Health Officer

MEMORANDUM

TO: G. Edgar Harr Sons Corp.
Attn: Sandy Cockran, MSD 120

FROM: Kevin M. Wolf, L.E.H.S., REHS/RS, Supervisor 
Groundwater Mgmt. Sec.
Well & Septic Program

DATE: April 21, 2016

RE: **11865 & 11859 Lime Kiln Road – Well Permits
Special Condition**

The following comments apply to the above referenced Well Permit Applications. Please read through and complete as needed.

In order to preserve the quality of ground drinking water, a special condition has been set for the above referenced wells. This condition will require the driller to seal off upper strata by placing a minimum of **50 feet of steel casing OR 10 feet** into competent bedrock (whichever comes first). For example, if you hit a water-bearing fracture or bedrock at 70 feet, then there should be at least 72 feet of casing or enough casing to get below that fracture. **Any deviations to this condition are to be prior approved by the Health Department.**

Both of these wells will also require sampling at the time of the yield test. Sampling will include but not limited to, Volatile Organic Compounds (VOC's), Total Dissolved Solids (TDS), Chlorides, and Sodium. When calling in the yield and grout on a pre-scheduled day, please make a note that a certified water testing lab and/or the Health Department must be present in order to collect the recommended samples. Please allow 24hrs notification when drilling commences and when the yield/grouts take place.

If you have any questions regarding the above mentioned information, please feel free to contact me at 410.313.2645 or email kwolf@howardcountymd.gov.

KMW

Cc: Stephen Forney, Green Leaf Builders, hrbuilder@comcast.net
file

Fwd: Final Answer

From : Steve Fomey <stephen.fomey@gmail.com>

Fri, Jan 29, 2016 10:29 AM

Subject : Fwd: Final Answer**To :** Stephen Fomey <hrbuilder@comcast.net>

Please verify if they spoke with anyone. I will be happy to reach out to Mr. Atwell once we are able to find out.

Thanks - Steve

His response is below.

----- Original message -----

From: Andrew Atwell

Date: 01/27/2016 12:02 AM (GMT-05:00)

To: Steve Fomey

Subject: Final Answer

I visited the health department with Mr. Reed last week. When I asked why the well hasn't been fouled in these past decades, they said there is good vertical column soil quality toward that corner, where the drain field ends. It was very informative, but the greater issue was not changed. So I will have to decline your offer.

They did inform me that the septic for the existing house could be redone to run more westerly, then southern as it is now toward my property line. I would suggest if taking whatever funds for allocated for well drilling and using them for redoing the septic. I realize to the letter of the law, you are in no way obligated to. Be if the impetus for this whole effort was to be more neighborly, that seems like the best compromise to start off on a good foot.

READ
PLEASE

MARYLAND DEPARTMENT OF THE ENVIRONMENT, WATER MANAGEMENT ADMINISTRATION
1800 Washington Blvd., Baltimore, Maryland 21230 (410) 537-3784

WATER WELL ABANDONMENT-SEALING REPORT FORM

SUBMIT COPIES OF COMPLETED FORM TO:

- COUNTY ENVIRONMENTAL AGENCY (contact MDE, WMA if address needed)
- WELL OWNER
- MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

OK
1/29/02

DATE WELL ABANDONED: 7-28-14 (month/day/year)

• PERMIT NUMBER OF ABANDONED WELL (if any) _____

• PERMIT NUMBER OF REPLACEMENT WELL: _____

• PERSON ABANDONING WELL: Sandy B. Cochran WELL DRILLER'S LICENSE NUMBER: 120
CIRCLE: MWD / MGD

• OWNER'S NAME: Greenleaf Builders

• WELL LOCATION:
COUNTY: Howard

NEAREST TOWN: _____

TAX MAP _____ BLOCK _____ PARCEL _____

SUBDIVISION: _____

SECTION: _____ LOT: _____

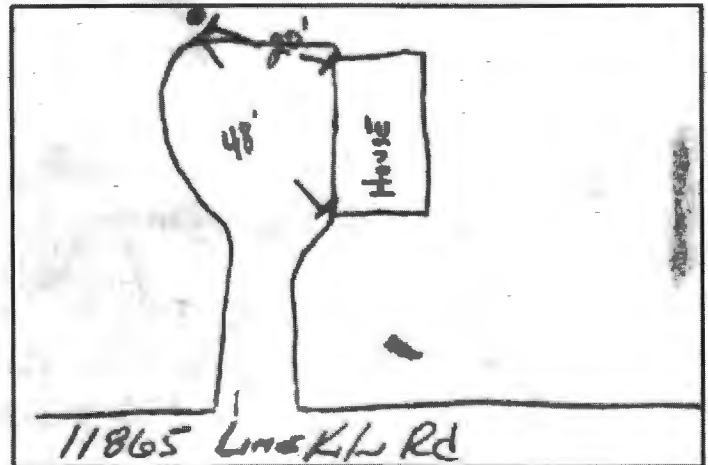
STREET ADDRESS: 11865 Lime Kiln Road

LATITUDE 39.150911

LONGITUDE 76.925411

Sandy B. Cochran
MSB 120

SITE LOCATION MAP



- TYPE OF WELL BEING ABANDONED:
- DRILLED JETTED
- BORED HAND DUG
- OTHER (specify) _____

- USE CODE: DOMESTIC
- IRRIGATION MUNICIPAL/PUBLIC
- TEST/OBSERVATION INDUSTRIAL
- _____ GEOTHERMAL

- TYPE OF CASING:
- STEEL PLASTIC
- CONCRETE OTHER (specify) _____

SIZE OF CASING: 6 INCHES IN DIAMETER

DEPTH OF WELL: 400 FEET DEEP

WAS ANY CASING REMOVED? YES NO
If yes, length removed, in feet: 1 1/2 FT

WAS CASING RIPPED OR PERFORATED? YES NO

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
Crushed stone	400	50
Portland Type II Cement	50	0
VOLUME OF MATERIAL USED		
<u>9 Bags Cement</u>		

WATER WELL ABANDONMENT-SEALING REPORT FORM

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- COUNTY ENVIRONMENTAL AGENCY (contact MDE, WMA if address needed)
- WELL OWNER
- MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

OK
1/30/12 SC

DATE WELL ABANDONED: 5/17/16 (month/day/year)

PERMIT NUMBER OF ABANDONED WELL (if any) _____

PERMIT NUMBER OF REPLACEMENT WELL: _____

PERSON ABANDONING WELL: Sandy B. Cochran WELL DRILLER'S LICENSE NUMBER: 120

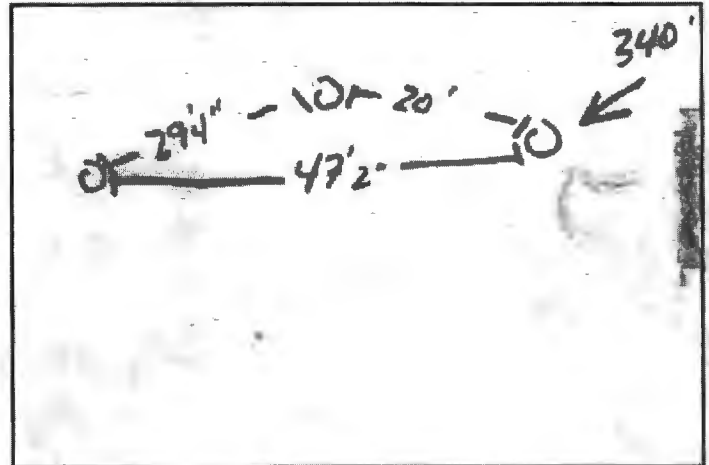
CIRCLE: MWD / MSD / MGD

OWNER'S NAME: Green Leaf Builders

WELL LOCATION:

COUNTY: Howard
 NEAREST TOWN: Fulton
 TAX MAP _____ BLOCK _____ PARCEL _____
 SUBDIVISION: _____
 SECTION: _____ LOT: _____
 STREET ADDRESS: 11865 Lime Kiln Rd

SITE LOCATION MAP



LATITUDE 39.150544

LONGITUDE 76.925517

Sandy Cochran
MOD RD

TYPE OF WELL BEING ABANDONED:

- DRILLED JETTED
- BORED HAND DUG
- OTHER (specify) _____

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
Rock Cutting	340	45
Portland Type I Cement	45	0
VOLUME OF MATERIAL USED		
13 Bags		

USE CODE: DOMESTIC

- IRRIGATION MUNICIPAL/PUBLIC
- TEST/OBSERVATION INDUSTRIAL
- _____ GEOTHERMAL

TYPE OF CASING:

- STEEL PLASTIC
- CONCRETE OTHER (specify) _____

SIZE OF CASING: 6 INCHES IN DIAMETER

DEPTH OF WELL: 340 FEET DEEP

WAS ANY CASING REMOVED? YES NO

If yes, length removed, in feet: 2

WAS CASING RIPPED OR PERFORATED? YES NO

WILLIAM AND MARTHA REED
11865 LIME KILN ROAD
TAX MAP 46, GRID 2, PARCEL 147
4929/691

Well P.T.
To be Abandoned

To be Abandoned

APPROX.
LOCATION EX.
WELL

PROPOSED
WELL AREA

Well location approved
by Sharabzoy & Son
- Home

FUTURE
WELL

DO NOT REMOVE THIS TAG
DEPARTMENT OF THE ENVIRONMENT
WELL PERMIT NUMBER

HO-15-0243

FOR INFORMATION GIVE NUMBER AND WRITE
1800 WASHINGTON BLVD.
BALTIMORE, MARYLAND 21230



Bureau of Environmental Health

7178 Columbia Gateway Drive, Columbia, MD 21046-2147

Main: 410-313-2640 | Fax: 410-313-2648

TDD 410-313-2323 | Toll Free 1-866-313-6300

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Maura J. Rossman, M.D., Health Officer

July 8, 2016

Homeowner: William & Martha Reed
11865 Lime Kiln Rd
Fulton, MD 20759

RE: Replacement Well
11865 Lime Kiln Rd
Well Permit # HO-15-0243

Dear Homeowner:

According to our records, your replacement well has been connected to the dwelling. We request that you contact the Community Hygiene Program at (410) 313-1773 to schedule initial water sampling for the above referenced replacement well, as required by the Maryland Well Construction Regulation (COMAR 26.04.04). This sampling includes testing for **bacteria, nitrates, turbidity, and sand**. There is currently no charge for the sampling and it is to your benefit to have it tested. Sampling of the new well should be collected from the primary indoor drinking tap, but if suitable scheduling is not possible, the sample may be taken from an outside tap to complete your sampling obligation. However, the potential for unsuccessful sample results increases when samples are collected from taps exposed to the outside environment. If sampling has already been performed by an outside lab, please help us by forwarding the results of the samples to our office.

The old well (No Tag Number) located near the driveway must be properly sealed and abandoned by a MD Licensed Well Driller per *COMAR 26.04.04.34*. Documentation is to be submitted by the driller to all appointed authorities that this task has been completed. If you'd like to retain the well located near the driveway to run in series with the new well or retain it as an irrigation well a formal written request must be submitted to this office for review. Please note that a variance to allow this well to be downgradient of the sewage disposal area on 11859 Lime Kiln Rd has not been approved. Should you request to retain this well, the Health Department would subsequently notify the owner that the sewage disposal area may not be used unless you choose to properly abandon and seal this well.

During the installation of the well line for the replacement well, a pit well was located on the west side of the garage. This well must be properly sealed and abandoned by a MD Licensed Well Driller per *COMAR 26.04.04.34*. Documentation is to be submitted by the driller to all appointed authorities that this task has been completed.

Please provide the above referenced documentation for the old well abandonment within 30 days of the receipt of this letter. If you have any further questions, you can call me at 410-313-1781. Otherwise, call Community Hygiene at 410-313-1773 to schedule or arrange for them to collect the required water samples.

Sincerely,

Ryan Rappaport, LEHS
Well & Septic Program

Cc: Community Hygiene Program
Carroll Water Systems, Sandy Cochran MSD 120
File

Green Leaf
Builders

December 22, 2015

Bureau of Environmental Health, Howard County MD
8930 Stanford Blvd
Columbia, MD 21045

Re: Replacement Well -8020 Hunterbrooke Lane. Fulton, MD 20759

To whom it may concern;

This letter is to serve notice that we are requesting to drill a replacement well at the property listed above 8020 Hunterbrooke Lane. This replacement well will have to meet today's standards per the Howard County Health Department. We intend to drill the replacement well, install a new pump and pressure tank, all necessary permits and inspections, any necessary wiring, also grading and seeding of the disturbed areas. There will be no cost to the current residents for this proposed work. All costs to be taken care of by Surjit Singh, the property owner of 11859 and 11855 Lime Kiln Rd. Fulton MD, 20759. By signing this letter you are acknowledging receipt and notice of the proposal.

Thank you,

Stephen Forney
Green Leaf Builders LLC
443-250-5483

Surjit Singh 12-24-15
Surjit Singh/Date

[Signature]
Witness

SURJIT SINGH
Print Name

Stephen Forney
Print Name

Atwell 8020 Hunterbrooke Ln

Witness

Print Name

Print Name

11865 Limekiln Rd.
Well documents

Wolf, Kevin

From: Wolf, Kevin
Sent: Monday, January 22, 2018 10:43 AM
To: hrbuilder@comcast.net
Subject: 11859 Lime Kiln Road
Attachments: 20180122105101021.pdf

Steve,

I am in review of the above property file for an Interim Certificate of Potability (ICOP). The attached water tests are inconclusive for the parameters of Turbidity. The Maximum Containment Level (MCL) for Turbidity is 10NTU's. The water test results indicated a level of 46.6 NTU's. Given that all other enforceable parameters were passing, we must sample again for turbidity, but on this test it must **un-treated** and we need to include testing for Iron, Manganese and Total Dissolved Solids (TDS). According COMAR 26.04.04.16 E. (b) states Every well shall be developed in order to obtain the full yield of the well and water quality that meets...: *Has a turbidity of less than 10 NTU's as determined by methods designated in 40 CFR 141.74(a)(1), except if the turbidity is due to the oxidation of dissolved iron or manganese naturally occurring in the water.*

I see that you have a treatment device in place. For convenience of time, you may test for Turbidity, Iron, Manganese and TDS before (raw) treatment and after (post) treatment. Please forward me the results once they come in. Let me know if you have any questions.

Thanks,

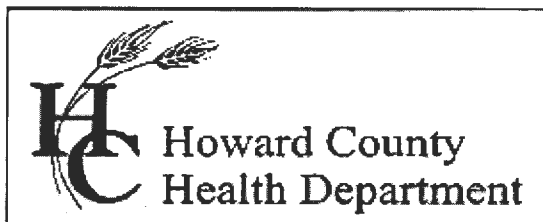
Kevin M. Wolf, LEHS, REHS/RS
Groundwater Mgmt. Sec. Supervisor
Well & Septic Program
Bureau of Environmental Health
8930 Stanford Blvd.
Columbia, MD 21045
(o) 410-313-2645
(f) 410-313-2648



kwolf@howardcountymd.gov

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Bureau of Environmental Health

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www.hchealth.org

Facebook: www.facebook.com/hocohealth

Twitter: HowardCoHealthDep

Maura J. Rossman, M.D., Health Officer

June 26, 2017

Surjit Singh and Kamaljit Kaur, Owners
2634 Raptor Drive, Odenton, MD 21113

RE: 11855 Lime Kiln Road, nuisance condition

Dear Mr. Singh and Ms. Kaur,

During a site inspection on June 21, myself and another Environmental Health Specialist noticed a condition on the property at 11855 Lime Kiln Road (Parcel 182) that requires immediate abatement. The pit remains where a well had been abandoned and it is filling with water. The pit should have been properly abandoned at the time that the well was abandoned. As it was not abandoned, the pit has become a breeding pool for mosquitos. This condition presents a public health nuisance that must be eliminated.

The pit cannot simply be filled with soil to eliminate the condition. At least one wall of the pit must be demolished to below the level of the three pit walls that remain under the back porch. By demolishing a pit wall to the described depth, any precipitation that falls onto the pit area can drain into the soil around the pit. After demolishing a pit wall, the pit should be filled with clean earth materials.

Contact me immediately upon receiving this letter. I need to know what your timeline is for draining the pit and filling it with clean earth materials, thereby eliminating the public health nuisance that exists at this time. You may contact me by phone, 410-313-2691, or by email (rbricker@howardcountymd.gov).

Respectfully,

Robert Bricker, REHS/R.S., L.E.H.S.

Environmental Sanitarian II

Bureau of Environmental Health, Well and Septic Program

Howard County Health Department

8930 Stanford Boulevard

Columbia, MD 21045

Copy: File