

10-11-94
Dm: cfo
10:00 a.m.
R.S.P.S.
11/25/94

PERMIT

03-314537

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 50236

A 39579

DISTRICT 3rd

DATE 8/25/94

DATE SYSTEM APPROVED 10-12-94

INSPECTOR Alm

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

461-9933 313-2640

INDEXED

South Carroll Backhoe, Inc. IS PERMITTED TO INSTALL ALTER

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

SUBDIVISION Crystal Clear LOT 21 ROAD 13885 Kennard Drive

PROPERTY OWNER Wm. Kight ~~Crystal Clear General Partnership~~ / Joe Gray

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 280

210
280
31840
24

LDG. PERMIT SIGNED
AND RETURNED 10-29-98
Serial # 510114791
6- stall Pre-Burn

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

LOCATION - Place the distribution box 30 feet from the North (left or 471.19') lot line and 185 feet from the intersection of the 290 foot panhandle line and the 367.68' front (West) lot line as viewed from the right of way access off Kennard Drive. Install trenches on contour toward the North (left) lot line.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 8/23/94 DKS

PLANS APPROVED BY Ronald J. Pinkley DATE 05/07/94

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

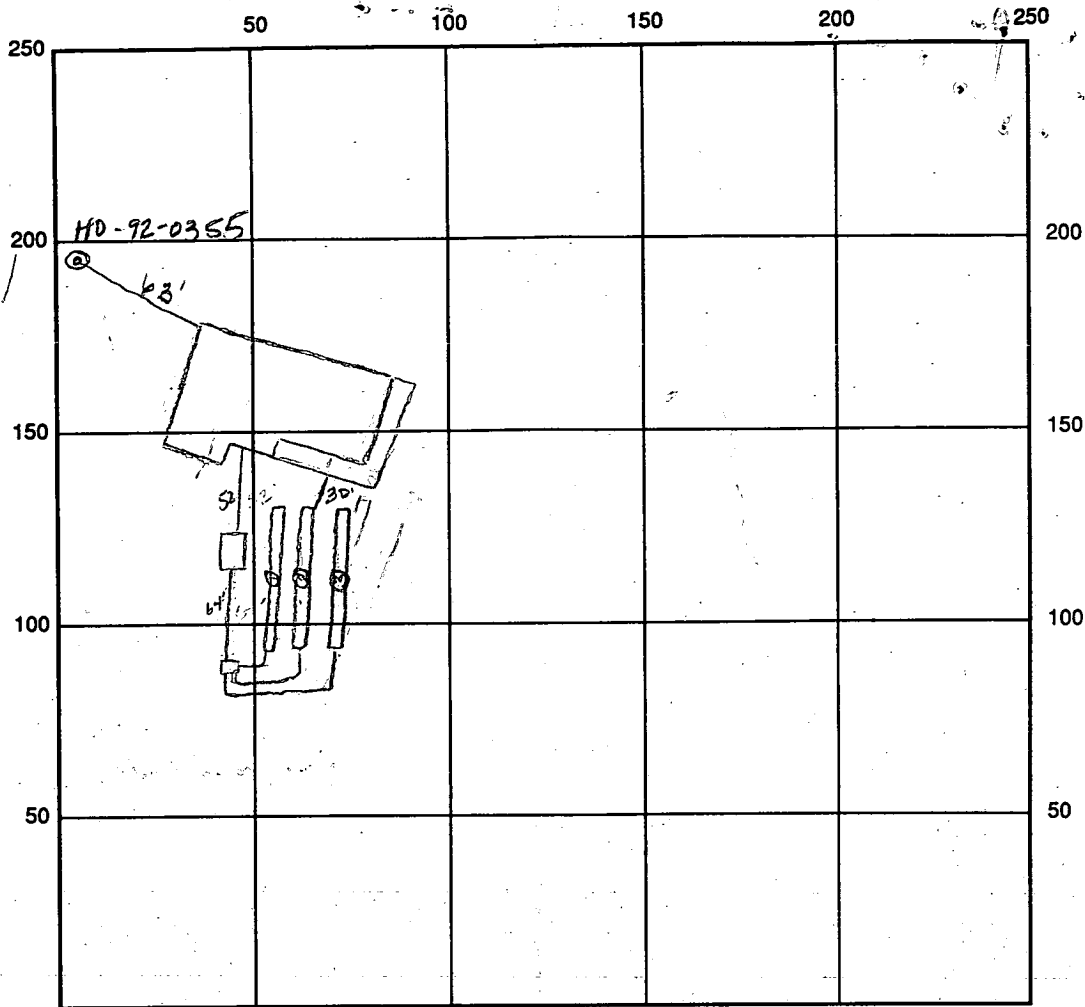
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON. CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

LDG PERMIT SIGNED
AND RETURNED 5/17/94
Serial # 510114791

A
39579



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1500 gal CLEANOUTS OK

DISTRIBUTION BOX LEVEL DK baffle 1211

DRAIN FIELD/TITLE DEPTH 5' FT. TRENCH WIDTH 3' FT. INLET DEPTH 3' FT.

EFFECTIVE GRAVEL DEPTH 2' FT. TOTAL LENGTH 290 FT. = 280 linear feet

NUMBER OF TRENCHES 3' ONE SIDEWALL/BOTTOM AREA 840 SQ. FT.

$$\frac{280}{3} = 840$$

DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA — SQ. FT.

REMARKS: 10-11-94 - OK to cover all work, call for inspection when house connection is made Aug 10-12-94 House connection made Aug

10-11-94 No WPI Aug 10-12-94 WPI OK to cover Aug

DATE SYSTEM APPROVED 10-12-94 INSPECTOR Amy McMillen

APPLICATION

2/22/93

PM

PERCOLATION TESTING

A 39599
P (Retest 2/22/93)

PLATTED EASTMONT
NOT ACCEPTABLE.

page 1

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

"DOESN'T PERC"
NO FEE RETEST
TO ESTABLISH
ALTERNATE AREA
CW

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 CRYSTAL CLEAR LIMITED PARTNERSHIP

ADDRESS 18205-D Flower Hill Way Gaithersburg MD # 20879
~~7605-D~~ PHONE 301-975-1020

AGENT OR PROSPECTIVE BUYER CHARLIE GALEANO

ADDRESS _____ PHONE 975-1020

PROPERTY LOCATION:

SUBDIVISION CRYSTAL CLEAR LOT NO. 21

ROAD AND DESCRIPTION KENNARD DRIVE (13885 KENNARD DRIVE)

TAX MAP _____ PARCEL # _____

BLDG. PERMIT SIGNED

AND RETURNED 7/1/94

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

Serial # 54910 - STD 5 Bedw

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. By Charles J. Galeano
(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' Test Hole B

1' 0" to 1' 6" Dark Brn. Loam Sil (19) to soil

1' 6" to 3' 1" Mix. Lt. Brn. + Red Sil / yel. P. mica loam

3' 1" to 3' 3/2" Thin Red Brn. HL mica loam

3' 3/2" to 11' Variegated gray + Lt. gray (mostly) some yel. + red brn mica loam with pocket of mica beds (15%)

Test Hole C

8" Typical Brn Sil

2 1/2' Str Brn L Sil

5' 7" to 10' 1" 10YR 6/4 SL

10' 1" to 10' 5" 10YR 7.5/4 SL + F 3d Red Brn CL v. micaceous

5' 5" to 5' 11" DK Red Brn SL

5' 11" to 6' 7" Blue Gray v. SL Sil v. micaceous

6' 7" to 9' Mix gray / yel + red brn L-SL

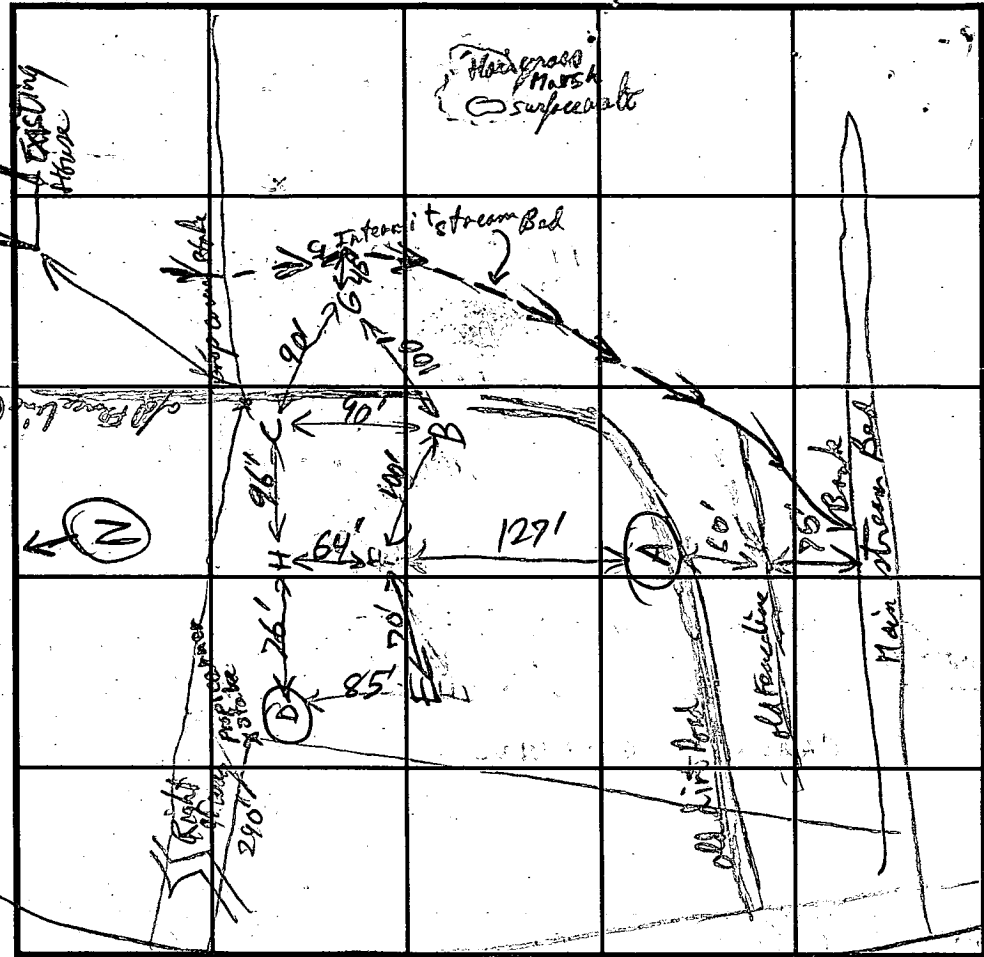
9' to 10' 1/2" yel Brn + Van yel red SL Moist

Test Hole F

11' 0" to 11' 1" DK Brn Sil

11' 1" to 11' 2 1/2" Red Brn HL-SCL

11' 2 1/2" to 10' 1/2" Mix Light gray Lt yel Brn yel + red Brn FSL-LS v. micaceous mifer-LS



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

Lehnard Dr

Test Hole F

SOIL PROFILE

0' to 1' 2" Str. Brn HL-SIL

1' 2" to 4' 5" yel + yel red mixed silty gray fine SL-LS

4' 5" to 10' variegated transition to red + red brn + variegated m-co SL

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2/22/93	C	@ 4'	11:07:40	11:24:40	11:24:40	11:52:00	28 min
		@ 8' w 10 1/2"	11:06:30	11:08:30	11:08:30	11:12:00	3 min
	B	@ 3'	11:32:40	11:35:40	11:35:40	11:39:50	4 min
		@ 7' v 11"	11:37:20 11:32:00	11:41:30 11:33:30	11:41:30 11:33:30	11:44:00 11:35:12	2 1/2 min (1 1/2 min)
	F	@ 3'	12:14:00	12:18:00	12:18:00	12:24:00	6 min
	G	@ 3 1/2' ^{Report}	11:17:10	11:21:40	11:21:40	11:25:42	4 min
		@ 6 1/2'	1:15:15	1:15:37			
		v 10'	1:15:55	1:18:52	1:18:52	1:24:25	5 min

REMARKS Test holes melting snow dripping over edge of holes was only water observed (Test Hole A + D had water table)

TYPE OF SOIL Chester gravelly silt loam; Baile silt loam

TESTED BY R. P. Kelly ALSO PRESENT Olen Ketterman R+K Excavating

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 11 min TRENCH WIDTH 3'

INLET DEPTH 3' MAXIMUM BOTTOM DEPTH 5' SQ. FT./BEDROOM 210

APPLICATION

PERCOLATION TESTING

A 37579
P (Petit & Griffin)

page 2

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 Crystal Clear Limited Partnership

ADDRESS 18205-D Flower Hill Way, Gaithersburg, MD PHONE 301-995-1020

AGENT OR PROSPECTIVE BUYER Charlie Galeano (Petit & Griffin, Inc)

ADDRESS _____ PHONE 975-1020

PROPERTY LOCATION:

SUBDIVISION Crystal Clear LOT NO. 21

ROAD AND DESCRIPTION Kennard Drive

TAX MAP _____ PARCEL # _____

SIZE OF LOT _____ 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

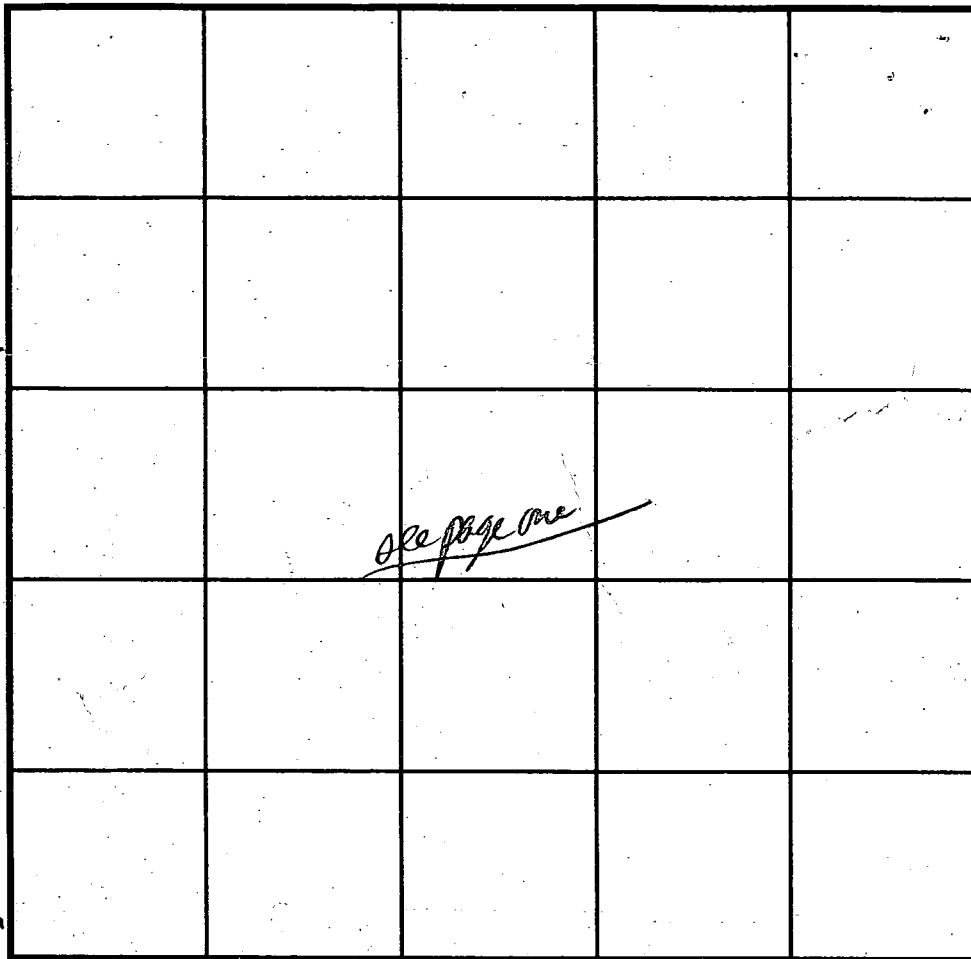
COUNTY #

Test Hole D
SOIL PROFILE

0' Blk. Red Lorn
6" (B2) Dark Br
1 1/2' 2" H Sil (mica)
Str Brn -
Yel Str Brn
H Sil
4 1/2' Blue Gray
E C3 & Yel (75-100% 75)
SIL - SL
4 1/2' Variegated
Brn & Gray
Hcl Brn +
Blk Brn Stained
Mica Lorn
15% Rich
to hard gravelly
8' Water

Test Hole H
6" Dark Br H Sil
(A)
1 1/2' Str Brn - H Sil
1 1/2' Yel Brn (100% 90)
E C2d mid gray
& bl gray
Mica & clg Red Brn
H Sil (Plot)
4 1/2' Gray - Blue Gray
(100% 75-75% 90)
E C2d Brn - Yel Brn
Mica
7' Yel Brn
Red Brn
Yel Red Brn
Mica Lorn
9' Dark Brn
Blk Brn
Mica Lorn
15% rich

Hole G
6" Blk Topsoil
Lorn
1 1/2' H Sil
3 1/2' var bl gray (100% 75)
E Yel/Yel Brn
SL - mica Lorn
4 1/2' Red Brn
Variegated
E Yel Brn
Mica Lorn
10' Variegated
Yel/Yel Brn
Mica Lorn
6% rich



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Test Hole A

SOIL PROFILE

0' Blk - vlt top
Sil topsoil
1' dk gray (100% 40)
1 1/2' wet SL
1 1/2' gray wet
H SL - SCL
2 1/2' Yel Red
Mica Lorn
3' Red SL
4 1/2' DK
4 1/2' Variegated
Yel/Yel Red
Tan/gray
Mica Lorn
to SL
8' Water 1/2

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2/22/97	D	10'	Water @ 8'	Mottle @ 4'			Fail
	A	8'	Water @ 6 1/2'	Season @ 4-8'			Fail
	E	10'	grayed perched @ 1 1/2 - 2 1/2'	+ water Season			
			Visual only				OK
	H	@ 4 1/2'	12:37:25	12:42:40	12:42:40	12:48:40	6 min
		@ 8' vis 11'	12:38:00	12:40:00	12:42:20	12:49:50	8 min

REMARKS _____

TYPE OF SOIL clayey gravelly loam; Bare Silty loam

TESTED BY R. P. Purdy ALSO PRESENT KTK Excavating

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 11 min TRENCH WIDTH 3

INLET DEPTH 2 1/2 - 3' MAXIMUM BOTTOM DEPTH 5' SQ. FT./BEDROOM 210

see wet Season ADVISORY

in gray
SL
color
Yel Red

APPLICATION

PERCOLATION TESTING

A 39579

P _____

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

DISTRICT 5TH

DATE 6-12-87

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 Kennard Warfield Jr.

ADDRESS 14663 Tridelphia Rd Glenely 21737 PHONE 442-2337

PROSPECTIVE BUYER N/A

ADDRESS _____ PHONE LOT 21

PROPERTY LOCATION:

SUBDIVISION Crystal Clear LOT NO. 36

ROAD AND DESCRIPTION West side Ivory Rd North side Tridelphia Rd

TAX MAP 22 PARCEL # 533

SIZE OF LOT 3 ± acres TYPE BLDG. SFD
(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.

Mal S. Reis
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

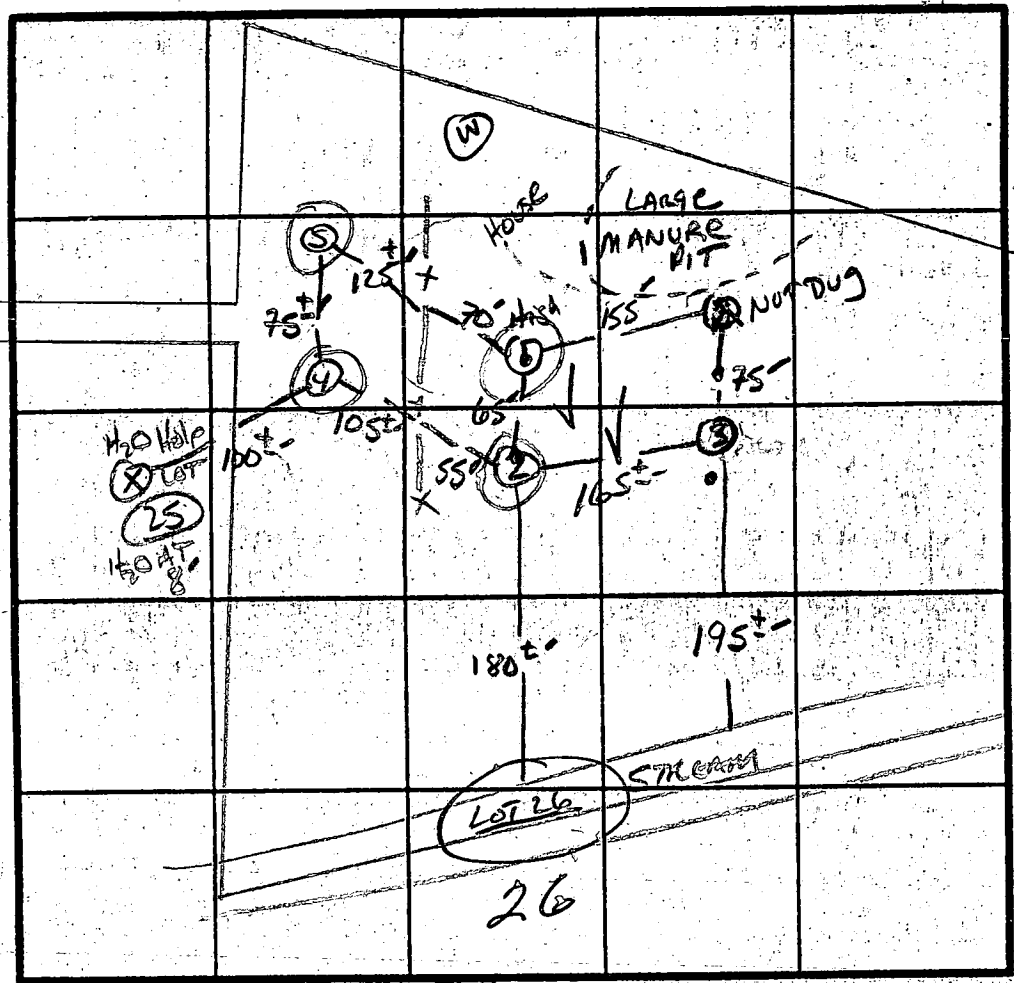
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING: 7/20/87 Pere Satisfactory hold for Subdivision Plat. 876
LOT LINE will need adjustment. 876; 5-81-88 STREAM SHOWN ON LOT 20
CLOSE TO PERC AREA DOES NOT EXIST. S.M.H.

THIS IS NOT A PERMIT

① ④ ⑥
SOIL PROFILE

AP HX
6"
BROWN →
Yellow BR
Silty CLAY
LOAM
41% FRASS
3"
Yellow BR
Sandy
Silt CLAY
15-25%
FRASS



X Perc 6 min
180 φ / BA
INLET 3"
BOTTOM 5"

INDICATE NORTH · NAME ADJOINING ROADWAY AS BASE LINE
TRIADELPHIA

②
HX AP
5"
Yellow BR
Silty CLAY
LOAM 10-15%
FRASS
4"
Thin layer of
QUARTZITE
5"
Yellow BR
Silty SAND
LOAM light
AT 9-12"
MICACOUS
SHINY AT 12"

DATE	TEST NO.	DEPTH	PRE-WET		TEST 1" DROP		TIME
			START	STOP	START	STOP	
7/24/87	✓ 1 S	3.5"	1:42	1:46	1:46	1:55	9 MIN
	✓ 1 M	7.0"	1:48	1:50	1:50	1:54	4 MIN
	✓ 1 V	12.0"	UNIFORM SOIL below ~3.0"				
	✓ 2 S	4.0"	1:38	1:41	1:41	1:48	7 MIN
	✓ 2 V	12.5"	UNIFORM SOIL below 3.5" INLET AT ~9"				
	3 V	DUE TO MANURE PIT ABOVE OLD PITS (EXTRACTED TO 3" MOTTLES AT SURFACE)					
	✓ 4 S	4"	2:12	2:13	2:13	2:17	4 MIN
	✓ 4 V	12.5"	UNIFORM SOIL below 3.5"				
	✓ 5 V	UNIFORM SOIL below 3-3.5" DEPTH ~12"					

REMARKS Holes 4+S ARE ON LOT 25 ORIGINAL HOLES 1+2 DIFF THAN OUR LOT HOLES # ARE ORIGINAL TEST OTHERS DIFFERENT / Shallow Syst only

TYPE OF SOIL Chester
TESTED BY S. Abel ALSO PRESENT MARK, K+E

2/22/90
11:30

APPLICATION

PERCOLATION TESTING

A 38579
P _____

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

PN6016W

ORIGINAL TEST RECORDS
IN DOUBT.

DISTRICT _____

DEVELOPER'S TEST HOLE AT

DATE _____

LOW END OF 36" TIE RABX CONFIRMS WATER TABLE PROBLEM.

COMPLETE RE-TEST REQ'D.

C. Williams

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 CRYSTAL CLEAR PARTNERSHIP - CHRIS CORE

ADDRESS 13885 PHONE 670-9114

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION CRYSTAL CLEAR LOT NO. 21

ROAD AND DESCRIPTION 13885 KENNARD DR.

TAX MAP _____ PARCEL # _____

SIZE OF LOT 6 ACRES TYPE BLDG. S.F.D.
(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 _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 2/22/90 HOLD FOR REVIEW MR

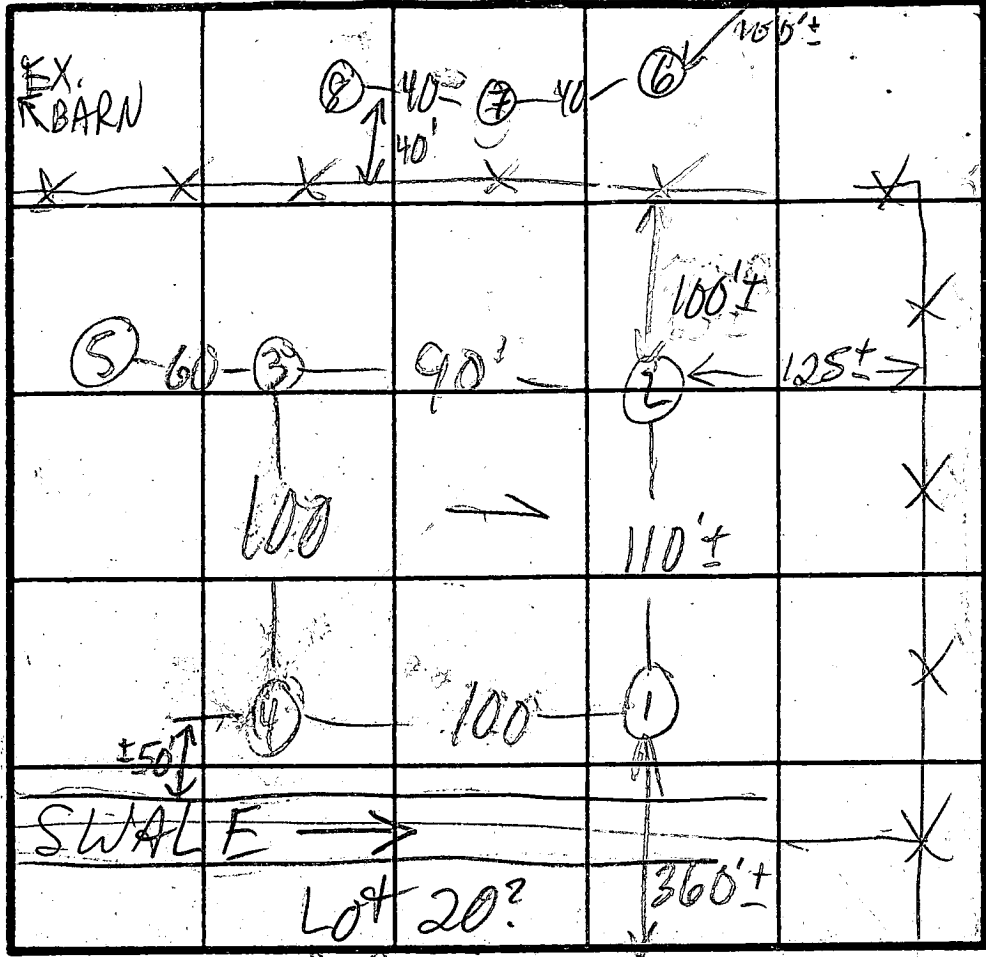
HD-216

THIS IS NOT A PERMIT

prev. stream → stream

SOIL PROFILE

brn/ory mixed clay loam mottles thruout seepage at 8' WATER



3 mixed clay mica loam orq & brn mottles thruout WATER

4 wet soil structure hole collapsed at 3' unable to get other info

KENNARD DR INDICATE NORTH NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2/22/90	1	WATER AT 10'					
	2	WATER AT 7'			CLAY TO 3'		
	4	see profile					
	3	WATER AT 9'			see profile		
	5	WATER AT 10 1/2'			CLAY TO 6'		
	6	WATER AT 11 1/2'			sim to (5) grey mottling 4'		
	7	WATER AT 10'			see profile		
	8	WATER AT 12'			sim to (5) grey at 4'		

brn orq & beige clay & clay loam
6 dk. red & org sand loam high mica
9 orq & brn mottles
10 WATER

7 org red sand clay loam thruout WATER

REMARKS _____
 TYPE OF SOIL _____
 TESTED BY M. RIFKIN ALSO PRESENT CW, Budder 10 WATER

B 1 **05408** SEQUENCE NO. (DP USE ONLY)
1 2 3 4 5 6
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
PERMIT TO DRILL WELL
please print or type

STATE PERMIT NUMBER
40-92-0255
70 fill in this form completely 79

Date Received (APA) **032693**
OWNER INFORMATION
15 Last Name **PETTIT** 13
Owner **GRIFEIM** 34
Street or RFD **18205 D FLOWER HILL W** 55
Town **GAITHERSBURG** 70 State 72 **MD** 74 Zip **20879** 76

DRILLER INFORMATION
Driller's Name **George F. Easterday** 77 License No. 80 **40**
L. Franklin Easterday, Inc.
Site Name **Stown Church Rd. Mt. Airy, Md. 21111**
Address **224-93**
Signature **George F. Easterday** Date

B 3 LOCATION OF WELL
1 2
Howard 8 COUNTY 21
NEVSTAR CLEAR 23 SUBDIVISION 42
SECTION **44** 46 LOT **51** 50
CLEMLEG 52 NEAREST TOWN 71
MILES FROM TOWN (enter 0 if in town) **1** 73 **MI** 76 77 78

B 2 WELL INFORMATION
1 2
APPROX. PUMPING RATE (GAL. PER MIN.) **5** 8 12
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **500** 14 20

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
NORTH N
WEST W
EAST E
SOUTH S
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
NORTH N
WEST W
EAST E
SOUTH S
DISTANCE FROM ROAD **650** 34 37
ENTER FT or MI **FT** 38 39

USE FOR WATER (CIRCLE APPROPRIATE BOX)
 D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
 F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
 I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
 P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
 T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

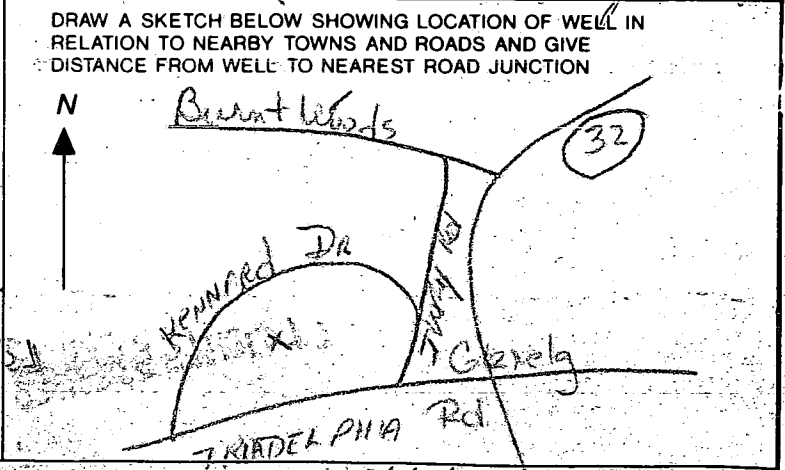
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
Howard COUNTY NAME
A3959 COUNTY NO.
STATE SIGNATURE _____ INSERT S 41
DATE ISSUED **042892** 43
CO SIGNATURE **Paul Willey** 48 EXP. DATE **4-28-96** 49
NORTH GRID **522000** 50 55 EAST GRID **0801000** 57 63

APPROXIMATE DEPTH OF WELL **300** 24 28 FEET
APPROXIMATE DIAMETER OF WELL **6** INCH NEAREST INCH

METHOD OF DRILLING (circle one)
BORED (or Augered) JETTED Jettied & DRIVEN
 AIR-ROtary 30 37 AIR-PERcussion ROTARY (Hydraulic Rotary)
CABLE REVERSE-ROtary DRIVE-POINT
other _____

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
SOURCES OF DRILLING WATER
1. well (jetted) 30"
2. 125' casing
3. 58' 10" open casing above ground
WRITE THE BOX NUMBER FROM THE MAP HERE
E **8001**
N **5202**
000
000
000
DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION

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
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52



Not to be filled in by driller (OEP USE ONLY)
APPROX. PERMIT NUMBER _____ 54
FORCE WRITE INITIALS IN BOX 67 68 PERMIT No. **401-92-0255** 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS
5/4/93 as seen - Well drilled near well stake
COUNTY

C1 7842

SEQUENCE NO. (DENV 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)

COUNTY NUMBER 139579

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED 050493

Depth of Well 2240 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 10-92-0355

OWNER: Kottitt, Gertrude last name first name STREET OR RFD: ... TOWN: Glendale SUBDIVISION: Crystal Clear SECTION: ... LOT: 21

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. Includes handwritten entries: top soil, shale, sand, gravel, etc.

GROUTING RECORD

WELL HAS BEEN GROUTED (Y/N) TYPE OF GROUTING MATERIAL CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 78 NO. OF POUNDS 1700 GALLONS OF WATER 270 DEPTH OF GROUT SEAL (to nearest foot) from 0 to 30 ft.

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

MAIN CASING TYPE Nominal diameter top (main) casing (nearest inch) Total depth of main casing (nearest foot)

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

SCREEN RECORD screen type or open hole insert appropriate code below: ST (STEEL), BR (BRASS), HO (OPEN HOLE), PL (PLASTIC), OT (OTHER)

DEPTH (nearest ft.) table with columns for depth intervals (8-9, 11, 15, 17, 21, 23-24, 26, 30, 32, 36, 38-39, 41, 45, 47, 51) and rows for casing sections 1, 2, 3.

SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH) GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

PUMPING TEST

HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min. to nearest gal.) 10 METHOD USED TO MEASURE PUMPING RATE ... WATER LEVEL (distance from land surface) BEFORE PUMPING ... WHEN PUMPING ... TYPE OF PUMP USED (for test) 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 ... CAPACITY: GALLONS PER MINUTE (to nearest gallon) PUMP HORSE POWER PUMP COLUMN LENGTH (nearest ft.) CASING HEIGHT (circle appropriate box and enter casing height) 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)

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

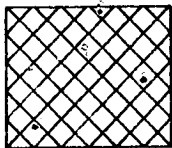
I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS IDENT. NO. 40 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

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

TELESCOPE CASING LOG INDICATOR OTHER DATA



This area designates a private sewage easement of 10,000 square feet as required by the Maryland Department of the Environment for individual sewage disposal improvements of any nature in this area are restricted until public sewage is available. This easement shall be null and void upon connection to a public sewage system.

APPROVED:
HOWARD COUNTY HEALTH DEPT.

4/26/93
DATE

Joyce M. Boylston
APPROVING AUTHORITY



LOT 26

LOT 27

S21°00'00"E
345.00

N63°30'00"E
470.00

LOT 21
5.8577 acres

PROPOSED WELL LOCATION

EXIST. SEPTIC AREA

100 YEAR FLOOD PLAN EASEMENT
S64°17'37"W
712.03

LOT 19

REVISED SEPTIC AREA

LOT 21

N85°48'04"E
471.18

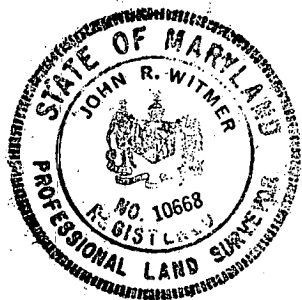
N13°23'23"W
367.68

LOT 20

S85°48'03"W
290.00

N 02° 00' 00" E
50.30

KENNARD ROAD
50' R/W



SURVEYOR'S CERTIFICATE

I certify this plat is correct: that it is the result of an actual field survey of Lot 21, Crystal Clear as shown on a Subdivision Plat recorded as Plat 8445 among the Land Records of Howard County, Maryland.

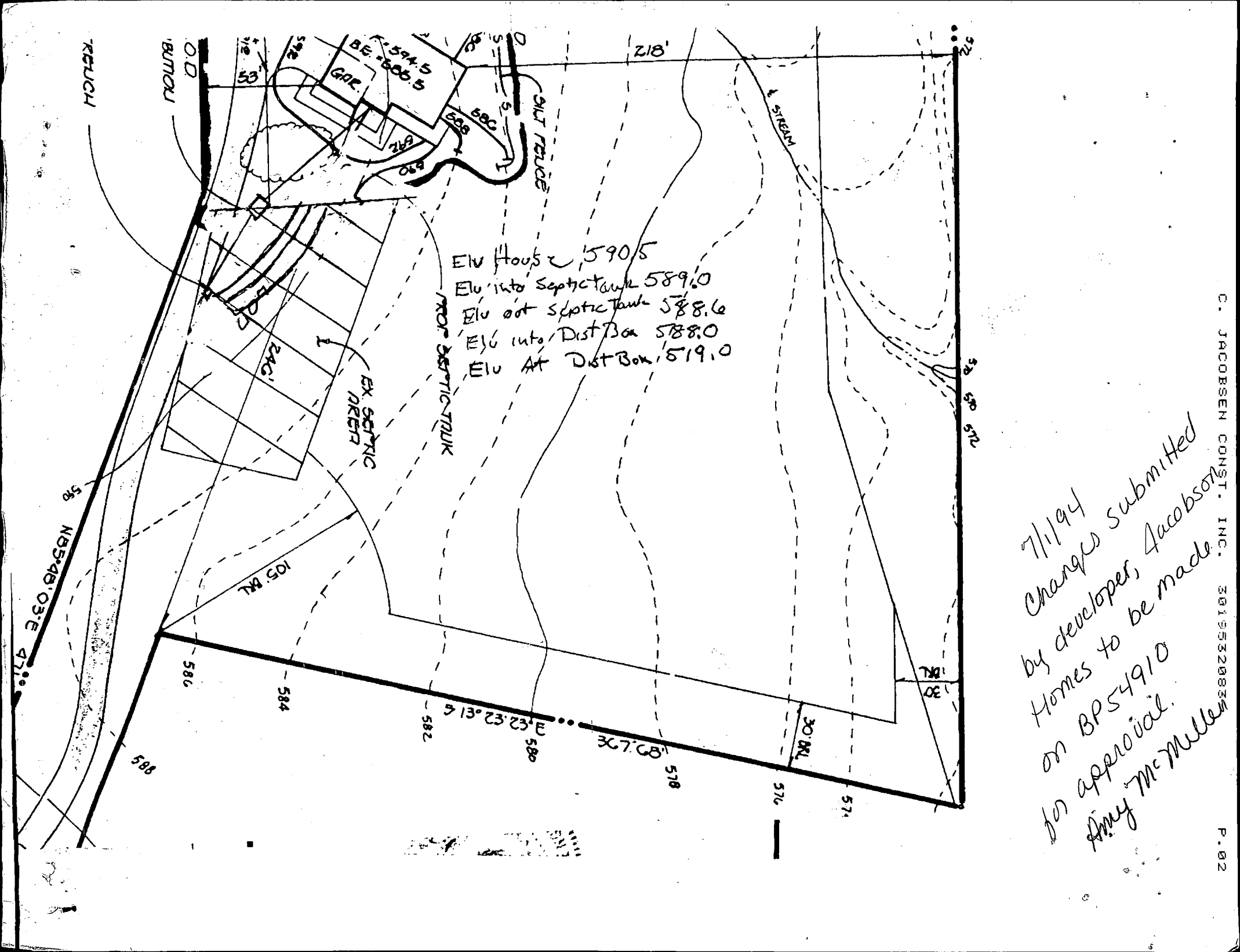
March 12, 1993

John R. Witmer
John R. Witmer
Professional Land Surveyor
Maryland No. 10668

PLOT PLAN
REVISED SEPTIC AREA
LOT 21
CRYSTAL CLEAR
3rd ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
SCALE 1" = 100' MARCH, 1993

LANIER/WITMER ASSOCIATES
ENGINEERING + SURVEYING + PLANNING
224 NORTH ADAMS STREET
ROCKVILLE, MARYLAND 20850
(301) 251-6730

L/WA PROJ NO. 91010

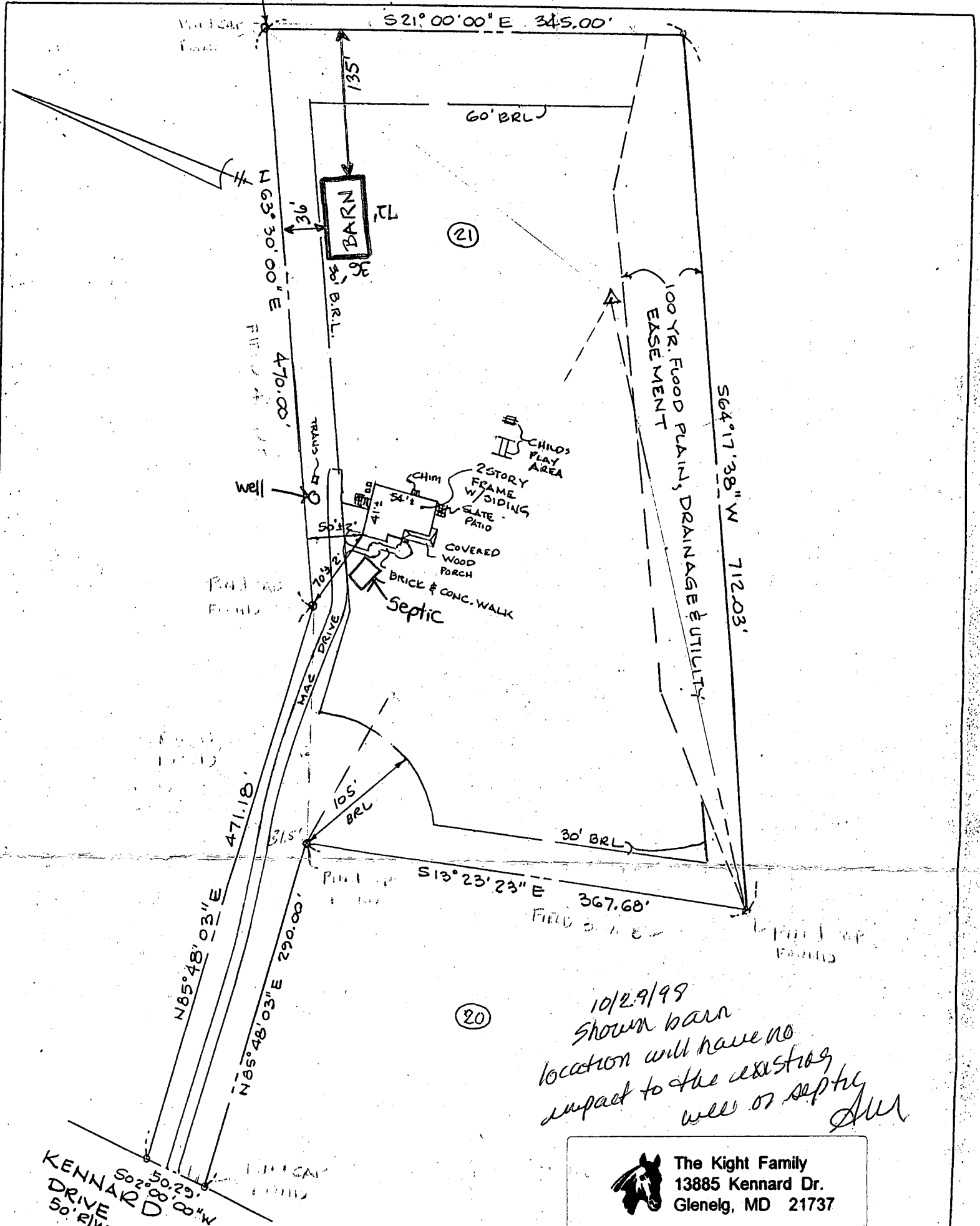


Elev House 590.5
 Elev into Septic Tank 589.0
 Elev out Septic Tank 588.6
 Elev into Dist Box 588.0
 Elev At Dist Box 519.0


7/1/94
 Changes submitted
 by developer, Jacobson
 Homes to be made
 on BP 54910
 for approval.
 Amy McMullen

#13825

EXIST HOUSE



10/29/99
 Shown barn location will have no impact to the existing well or septic
 AM

 The Kight Family
 13885 Kennard Dr.
 Glenelg, MD 21737

The plat is of benefit to a consumer only insofar as it is required by a lender or a title insurance company or its agent in connection with contemplated transfer, financing or refinancing. The plat is not to be relied upon for the establishment or location of fences, garages, buildings, or other existing or future improvements. The plat does not provide for the accurate...

#13885 KENNARD DRIVE
 LOT 21 "CRYSTAL CLEAR" LOTS 1-29

39579

Building Address <u>13885 Keenard Dr</u> <u>Green Ely MD 21737</u>	Property Owner's Name <u>William P. Laurie Kight</u> Address <u>13885 Keenard Dr</u>
Suite/Apt. #: _____ SDP/WP/Petition #: _____ Census Tract <u>6030</u> Subdivision <u>Crystal Clear</u>	City <u>Green Ely</u> State <u>MD</u> Zip Code <u>21737</u>
Section _____ Area _____ Lot <u>21</u> Tax Map <u>22</u> Parcel <u>533</u> Grid <u>7</u>	Home Phone <u>410-489-5239</u> Work Phone _____ Applicant's Name & Mailing Address, (if other than stated hereon): <u>Dana C. Krawczyk</u> MARYLAND POOLS 9515 GERWIG LANE, SUITE 119 COLUMBIA, MD 21046 Phone _____ Fax _____
Zoning <u>RR DEO</u> Map Coordinates <u>969</u> Lot size <u>5.55 ac</u>	Contractor Company _____ Contact Person _____ MARYLAND POOLS Address <u>9515 GERWIG LANE, SUITE 119</u> COLUMBIA, MD 21046 City _____ State _____ Zip Code _____ License No. <u>6690</u> Phone <u>410-995-6600</u> Fax _____

Existing Use <u>STD</u> Proposed Use <u>SFD w/ pool & fence</u> Estimated Construction Cost <u>\$ 20,000</u> Description of Work <u>40x25' 6x2' in ground concrete pool</u> <u>3'-8" deep concrete filled by truck</u> <u>700' of 4" high wood fence</u>	Contractor Company _____ Contact Person _____ MARYLAND POOLS Address <u>9515 GERWIG LANE, SUITE 119</u> COLUMBIA, MD 21046 City _____ State _____ Zip Code _____ License No. <u>6690</u> Phone <u>410-995-6600</u> Fax _____
Occupant or Tenant _____ Contact Name <u>Dana Krawczyk</u> Address _____ City _____ State _____ Zip Code _____ Phone <u>410-995-6600</u> Fax _____	Engineer or Architect Company _____ Contact Person _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL		BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics Height: _____ No. of stories: _____ Gross area, sq. ft. per floor: _____ Use group: _____ Construction type: <input checked="" type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular	Utilities Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads _____	Building Characteristics SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> <u>Depth</u> <u>Width</u> 1st floor: _____ 2nd floor: _____ Basement: _____ Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms: _____ Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____ Other Structure: _____ Dimensions: _____ Footings: _____ Roof: _____ <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	Utilities Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other: _____

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

<u>Dana L Krawczyk</u> Applicant's Signature <u>Dana L Krawczyk</u> Title/Company	<u>Dana L Krawczyk</u> Print Name <u>10/4/00</u> Date
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Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
 ** PLEASE WRITE NEATLY AND LEGIBLY. **
 - FOR OFFICE USE ONLY -

AGENCY <input checked="" type="checkbox"/> Land Development, DPZ <input type="checkbox"/> State Highways <input checked="" type="checkbox"/> Building Official <input checked="" type="checkbox"/> Dev. Engineering, DPZ <input type="checkbox"/> Health <input type="checkbox"/> Fire Protection Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>	DATE <u>10/11/00</u> SIGNATURE APPROVAL <u>[Signature]</u> <u>[Signature]</u> <u>[Signature]</u> <u>[Signature]</u> CONTINGENCY CONSTRUCTION START: <input type="checkbox"/> ONE STOP SHOP: <input type="checkbox"/>	DPZ SETBACK INFORMATION Front: <u>105 FT</u> Rear: <u>10 FT</u> Side: <u>30 FT</u> Side St.: _____ All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/> Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/> Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/> Lot Coverage for New Town Zone <u>0%</u> SDP/Red-line approval date <u>N/A</u>	PROPERTY ID#: <u>10916</u> Filing fee \$ _____ Permit fee \$ <u>125</u> Excise tax \$ _____ Sub-total paid \$ _____ Add'l permit fee \$ _____ TOTAL FEES \$ <u>125</u> Balance due \$ _____ Check # <u>2654</u> Validation # <u>3538</u>
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PRIVATE WELL
& SEPTIC

NOTE: A VACUUM BREAKER
WILL BE INSTALLED
ON JOB AS PER
CODE.

SQ.FT. CONC. DECK
BY MPI

HIGH WOOD FENCE AS
CODE -BY MPI
60 LIN. FT.)

SEPTIC TANK

EX. WELL

FILTER PAD

23'X40' SWIMMING POOL

BARN

HOUSE

LOT 21
5.85 AC. +/-

FRONT

SEPTIC
RESERVE

DRIVEWAY
N85°48'3"E

105' BRL

367.68'

30' MIN. BRL

S13°23'23"E

60' MIN. BRL

313'

30' MIN. BRL

79'

59'

134'

34'

131'

50'

362'

265'

223'

712.03'

100 YR. FLOOD PLAIN,
DRAINAGE
& UTILITY EASEMENT

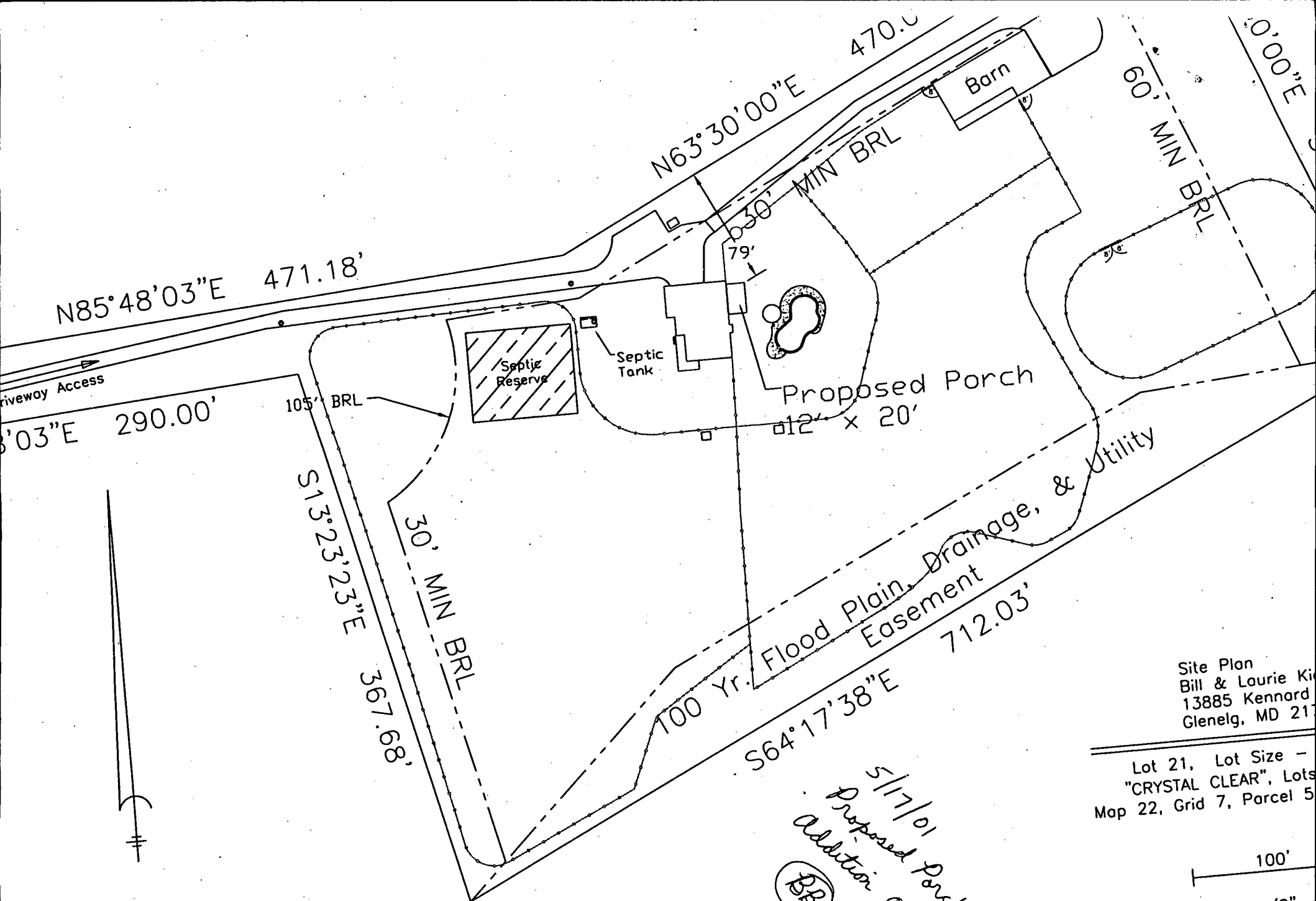
1-100

10/4/00

POOL OK

(MP)

TO KENNARD
DRIVE



Driveway Access



Site Plan
 Bill & Laurie Ki
 13885 Kennard
 Glenelg, MD 21

Lot 21, Lot Size -
 "CRYSTAL CLEAR", Lots
 Map 22, Grid 7, Parcel 5

5/17/01
 Proposed Porch Deck
 Addition O.K.
 (BB)

100'
 Scale : 1/8"