

4/4/88  
AM  
4/6/88 12:30

P 41220  
A 34834

# PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH DISTRICT \_\_\_\_\_

HOWARD COUNTY  
BUREAU OF ENVIRONMENTAL HEALTH  
461-9933

05-398231  
INDEXED

DATE 3-17-88

DATE SYSTEM APPROVED 4-6-88

INSPECTOR JEN

Delbert Glover

IS PERMITTED TO INSTALL  ALTER \_\_\_\_\_

ADDRESS 4332 Louisville Rd PHONE 795 1133

SUBDIVISION Pheasant landing ROAD 4405 Linthicum Rd LOT 10

PROPERTY OWNER Jeffery Herwig 522-7088

ADDRESS 3707 Fait Ave B. Md. 21224

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

GARBAGE GRINDER? YES \_\_\_\_\_ NO

SEPTIC TANK CAPACITY 1000 GALLONS 1250 NUMBER OF BEDROOMS 4

CHANGE IN #BEDROOMS  
& TANK SIZE CALLED  
IN BY OWNER  
3/23/88 CW

Trench 2' wide, 4 1/2' stone below dist. pipe 174 sq. ft. per bedroom

Inlet 3 1/2' max. depth below original grade, bottom 8' max. depth.

Place 1st Trench 120 ft. from back (205' line) and 40 ft. from the left (700')

lot line as seen when facing the property from Linthicum Rd. Run

trenches along contour (towards the right lot line, be sure to

keep the system at least 100' from the well - MANHOLE TO GRADE

Required per C.P. Summitt DATE 3-17-88

PLANS APPROVED BY \_\_\_\_\_ DATE \_\_\_\_\_

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.

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 TRENCHES ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCHES.

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER. NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH.

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 40 PVC OR ABS.

PERMIT VOID AFTER 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 PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES.

LOG. PERMIT SIGNED  
AND RETURNED 4/6/88  
Serial # 24575-Prod

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

\*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

A 34834



# APPLICATION

SEWAGE DISPOSAL TESTING.

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 34834

P \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SERVICES

P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 992-2330

DISTRICT 5th

DATE 1/17/85

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. Jeffrey Herwig

ADDRESS 14663 Triadelphia Road  
Glenelg, Maryland 21737 PHONE Don Reuwer - 465-4920

PROPERTY LOCATION:  
SUBDIVISION Warfield Property LOT NO. LOT 10 RESUBDIVISION OF LOT 4

ROAD AND DESCRIPTION 4405 Linthicum Road

SIZE OF LOT \_\_\_\_\_ TYPE BLDG. 3 or 4 Bedrooms  
(NUMBER OF BEDROOMS)

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. /s/ Kennard Warfield, Jr.  
(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING 1-28-85 perc. ok, hold for artificial hole plat. SAbel/RHodges

BLDG. PERMIT SIGNED  
AND RETURNED 12-9-87  
BP15803  
SA

# THIS IS NOT A PERMIT

A 34834

① SOIL PROFILE

0' AP

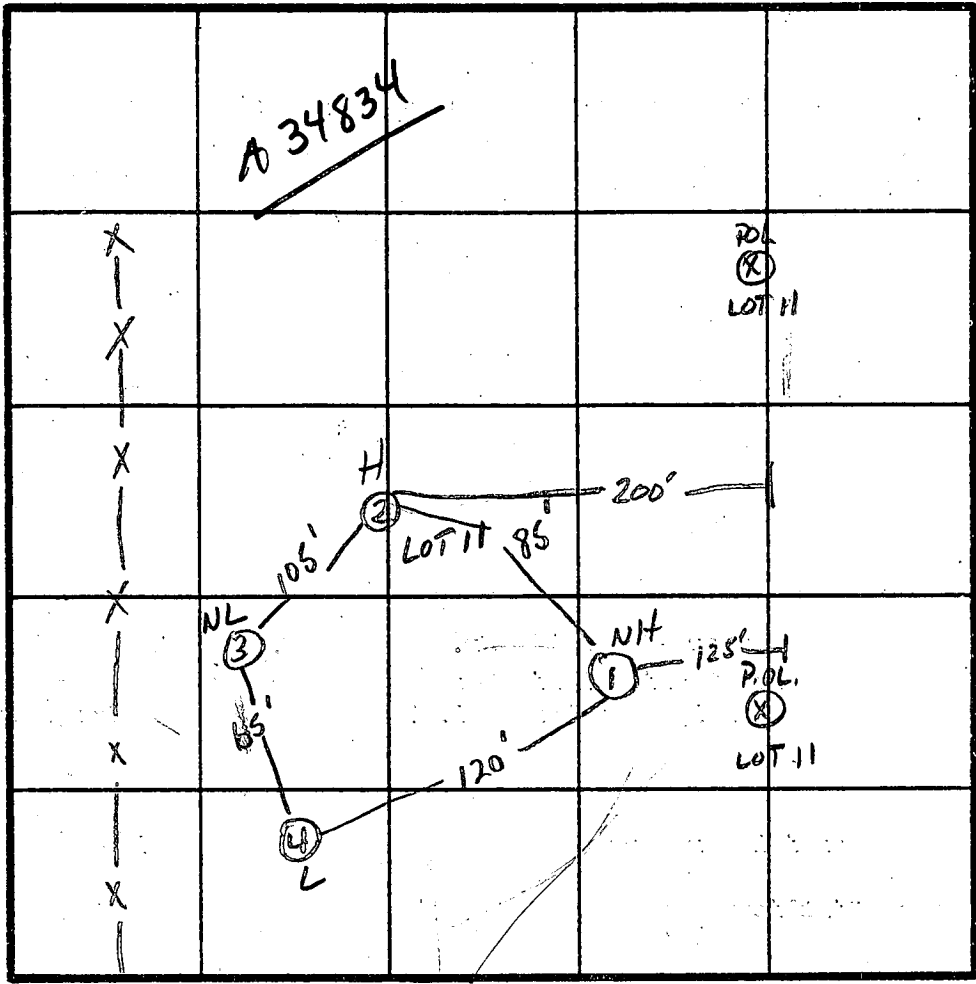
1' B Red BROWN CLAY LOAM 10% SAPROLITE

5' SAND LOAM 20-30% SAPROLITE GRANULAR

8' SAND LOAM 40-50% SAPROLITE GRANULAR

12' 75% SAPROLITE MEDIUM SIZE

13'



2/19/86

Slope really in this direction

Drawing inaccurate

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.  
LITHIUM Rd

② ③

AP

RED BROWN CLAY LOAM 10% SAPROLITE

SANDY LOAM 30-40% SAPROLITE

12'

④

AP

RED BROWN CLAY 10% SAPROLITE

4' SANDY LOAM 20-30% SAPROLITE

6' SANDY LOAM 75% SAPROLITE

13'

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
1/28/85	1S	4.5'	3:19	3:23	3:23	3:32	9min
	1V	13' SAPROLITE MED SIZE AT 13'					
	2S	4.5'	3:21	3:24	3:24	3:28	4min
	2V	12' GOOD SOIL STRUCTURE TO 12'					
	3S	4.5'	3:25	3:27	3:27	3:33	6min
	3V	12' GOOD SOIL STRUCTURE TO 12'					
	4S	4'	3:29	3:31	3:31	3:35	4min
	4V	12' GOOD SOIL STRUCTURE TO 12'					

REMARKS No limitations to 10'

TYPE OF SOIL Olenaly association

TESTED BY S. Abel / R. Hodges

ALSO PRESENT Glen KETTERMAN  
DUNIT BAILLARD

# APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SERVICES

P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 992-2330

A 34834

P \_\_\_\_\_

DISTRICT 5TH

DATE 6-21-85

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 Philadelphia Rd. Glenelg Md. 21737 PHONE Don Reuver 465-4920

PROPERTY LOCATION:

SUBDIVISION WARFIELD PROPERTY LOT NO. LOT 10 REBID

ROAD AND DESCRIPTION Linthicum Rd. 6-21-85

SIZE OF LOT \_\_\_\_\_ TYPE BLDG. \_\_\_\_\_ (NUMBER OF BEDROOMS)

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 \_\_\_\_\_

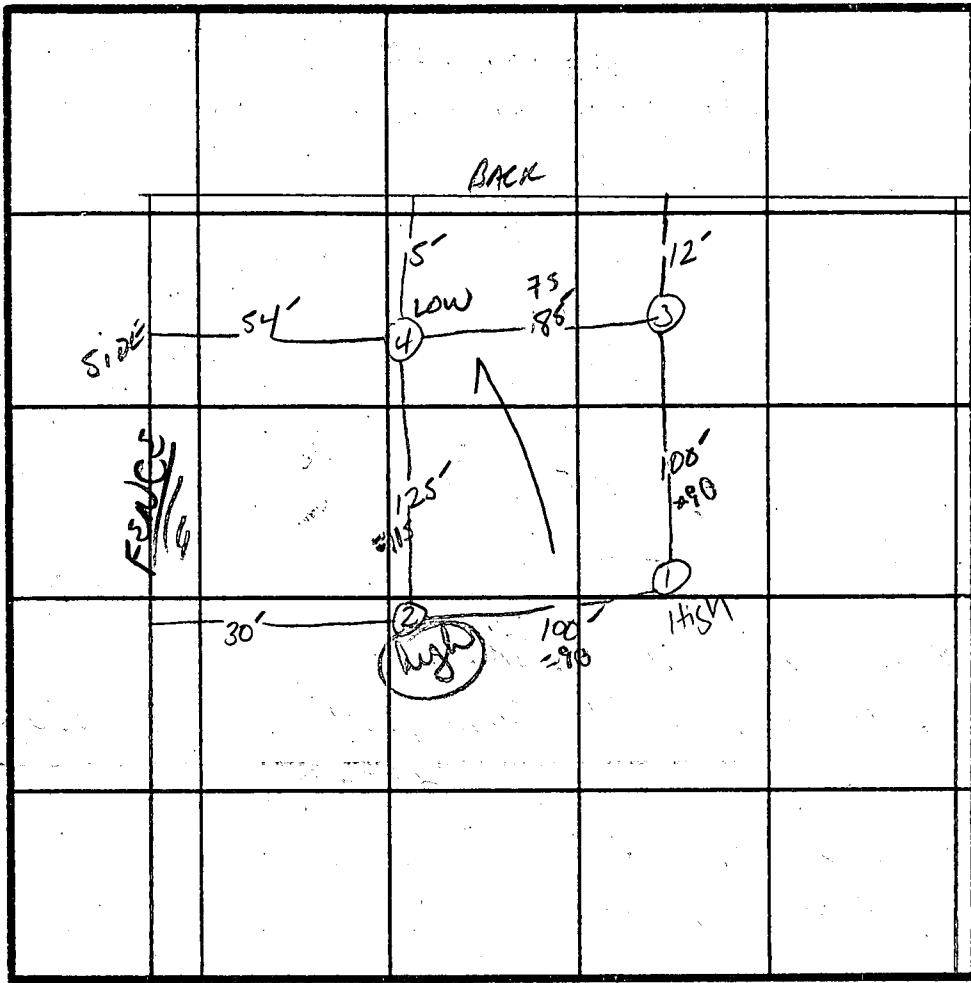
REASONS FOR REJECTION OR HOLDING 6-21-85 Perc. Satisfactory, Hold for Certified Subdivision Plat. S.A.M.

# THIS IS NOT A PERMIT

① ② ③

SOIL PROFILE

0	AP
9"	Yellow Br. Clay loam <100% SAPROLITE
2.5'	Brown micaceous SAND LOAM 10-20% SAPROLITE
12'	



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Lithium Rd.

0	#	AP
9"		Yellow Led Clay loam <10% SAPROLITE
3.5'		Yellow Br. SAND LOAM <100% SAPROLITE
12'		

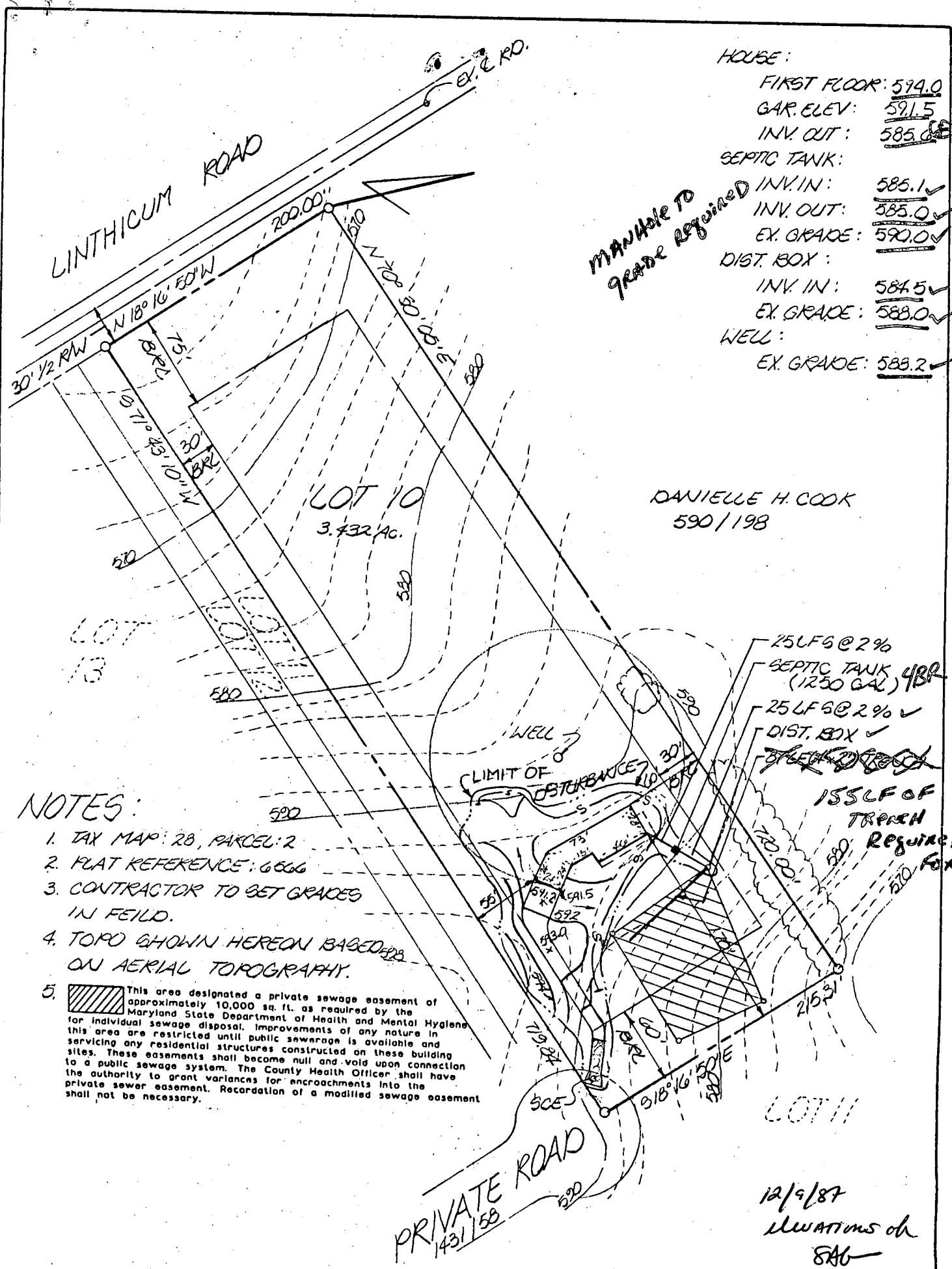
DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
6/21/85	1 ✓	3" 12"	2:07	2:08	2:08	2:12	4min
	2 ✓	3" 12.5"	2:12	2:15	2:15	2:20	5min
	3 ✓	3.5" 12"	2:21	2:24	2:24	2:30	6min
	4 ✓	3.5" 12"	2:16	2:18	2:18	2:22	4min

REMARKS \_\_\_\_\_

TYPE OF SOIL Slender

TESTED BY S Abel

ALSO PRESENT KETTERMAN




HOUSE:  
 FIRST FLOOR: 594.0  
 GAR. ELEV: 591.5  
 INV. OUT: 585.0 ~~585.0~~ **585.0**  
 SEPTIC TANK:  
 INV. IN: 585.1 ✓  
 INV. OUT: 585.0 ✓  
 EX. GRADE: 590.0 ✓  
 DIST. BOX:  
 INV. IN: 584.5 ✓  
 EX. GRADE: 588.0 ✓  
 WELL:  
 EX. GRADE: 588.2 ✓

MANHOLE TO  
GRADE REQUIRED

DANIELLE H. COOK  
590/198

NOTES:

- TAX MAP: 28, PARCEL: 2
- PLAT REFERENCE: 6666
- CONTRACTOR TO GET GRADES IN FIELD.
- TOPO SHOWN HEREON BASED ON AERIAL TOPOGRAPHY.
-  This area designated a private sewage easement of approximately 10,000 sq. ft. as required by the Maryland State Department of Health and Mental Hygiene for individual sewage disposal. Improvements of any nature in this area are restricted until public sewerage is available and servicing any residential structures constructed on these building sites. These easements shall become null and void upon connection to a public sewage system. The County Health Officer shall have the authority to grant variances for encroachments into the private sewer easement. Recordation of a modified sewage easement shall not be necessary.

25 LF @ 2%  
 SEPTIC TANK (1250 GAL) 4BR  
 25 LF @ 2% ✓  
 DIST. BOX ✓  
 155 LF OF TRENCH Required For 4BR

12/9/87  
 Illustrations of  
 SAG

BLDG. PERMIT SIGNED  
 AND RETURNED 12-9-87  
 BP15803  
 SAG

TITLE: LOT GRADING PLAN				
PROJECT: PHEASANT LANDING- LOT 10				
LOCATION: 5 TH ELECTION DISTRICT HOWARD CO., MD.				
SCALE: 1"=100'	DESIGNED BY: E.U.A.	DRAWN BY: J.C.O.	CHECKED BY: L.E.B.	DATE: 12-1-87
FIELD BOOK:	PAGE NO.:	JOB NO.: 87197	DRAWING NO.: 1 OF 1	

**boender associates**  
 inc.  
 consulting engineers  
 land surveyors  
 land planners

COURTHOUSE SQUARE  
 3565 ELLICOTT MILLS DRIVE  
 ELLICOTT CITY, MD. 21043  
 (301) 465-7777

B 1 6165 SEQUENCE NO. (OEP USE ONLY)

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

STATE OF MARYLAND  
 PERMIT TO DRILL WELL

please print or type

OEP PERMIT NUMBER

HO-81-1326

fill in this form completely

Date Received 2/14/86

OWNER INFORMATION

HERWIG JEFFREY  
 Last Name Owner First Name

100 LIGHT STREET  
 Street or RFD

BALTIMORE MD 21202  
 Town State Zip

B 3 LOCATION OF WELL

HOWARD COUNTY

PHEASANT LAUNING SUBDIVISION

SECTION 44 LOT 10

GLENELG NEAREST TOWN

MILES FROM TOWN (enter 0 if in town) 1 MI

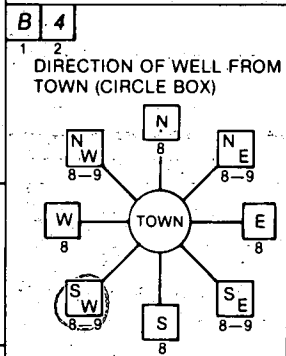
DRILLER INFORMATION

Saman B Cochran License No. 120

G. EDGAR HARR SOAS CORP. Firm Name

12047 Falls Rd. Cockeysville 21030 Address

[Signature] 1-13-86 Date



LINTHICUM ROAD NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

NORTH  
 WEST  
 EAST  
 SOUTH

800 DISTANCE FROM ROAD

ENTER FT or MI 7

B 2 WELL INFORMATION

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

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 750

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

HOWARD COUNTY NAME

A-34834 COUNTY NO.

OEP SIGNATURE B. Nixon DATE ISSUED 07/27/86

CO SIGNATURE B. Nixon EXP. DATE 07/27/86

NORTH GRID 516 000 EAST GRID 0802 000

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 200 FEET

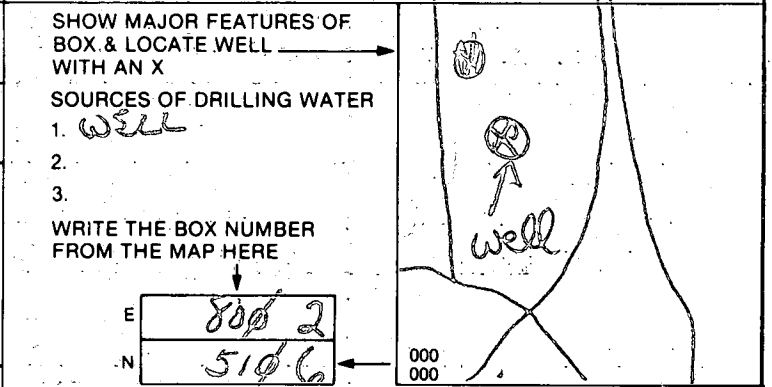
APPROXIMATE DIAMETER OF WELL 6 INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) AIR-PERCussion JETTED Jetted & DRIVEN

AIR-ROTary ROTARY (Hydraulic Rotary)

CABLE REVERSE-ROTary DRIVE-POINT



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

THIS WELL WILL DEEPEN AN EXISTING WELL

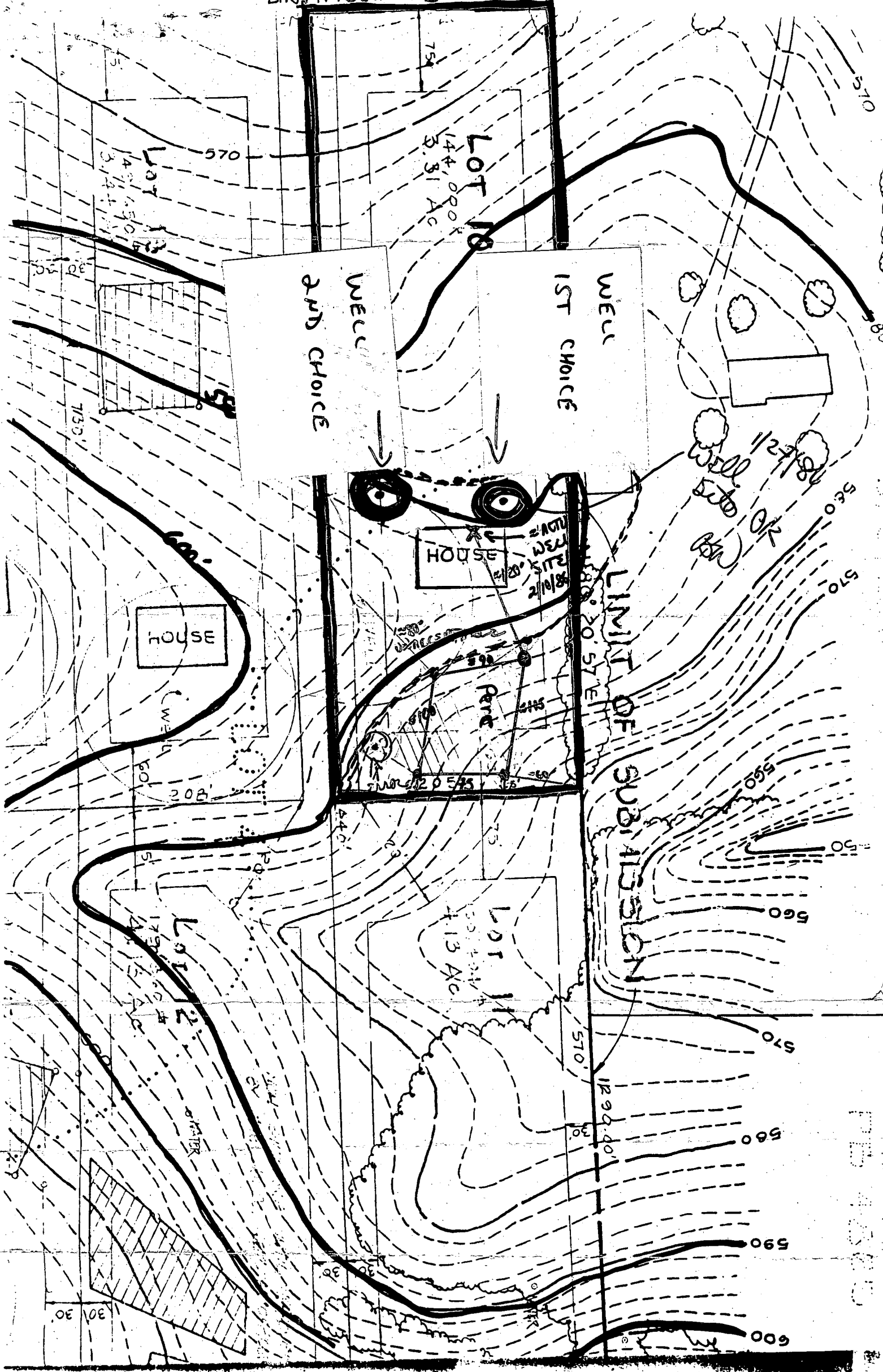
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)

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

APPROP. PERMIT NUMBER G A P

FORCE 1 WRITE INITIALS IN BOX PERMIT NO. HO-81-1326

SPECIAL CONDITIONS



\* RED REPRESENTS  
FIELD LOCATIONS OF  
PERC HOLES

C1 00861 SEQUENCE NO. (OEP USE ONLY)  
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND  
 WELL COMPLETION REPORT  
 FILL IN THIS FORM COMPLETELY  
 PLEASE PRINT OR TYPE

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.  
 COUNTY NUMBER A 34834

DATE RECEIVED: [ ] [ ] [ ] [ ] [ ] [ ] DATE WELL COMPLETED: 02 26 86  
 DEPTH OF WELL: 275 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL"  
HO-81-1320

OWNER: HERWIG DEFRY  
 STREET OR RFD: LINTHICUM RD. TOWN: GLENELG  
 SUBDIVISION: PHOENIX LANDING SECTION: [ ] LOT: 10

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

DESCRIPTION (Use additional sheets if needed)	FEET		Check if water bearing
	FROM	TO	
OVERBURDEN	0	27	
SHALE w/ EARTH	27	45	
GRAY ROCK	45	275	X

GROUTING RECORD  
 WELL HAS BEEN GROUTED (Circle appropriate box)  YES  NO

TYPE OF GROUTING MATERIAL  
 CEMENT  BENTONITE CLAY   
 NO. OF BAGS: 9 NO. OF POUNDS: 400  
 GALLONS OF WATER: 34  
 DEPTH OF GROUT SEAL (to nearest foot)  
 from 0 ft. to 48 ft.

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

MAIN CASING TYPE:  ST  
 Nominal diameter (nearest inch): 6  
 Total depth (nearest foot): 48

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

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

DEPTH (nearest ft.)  
 EACH SCREEN: HO 48 275

CIRCLE APPROPRIATE LETTER A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED  
 E ELECTRIC LOG OBTAINED  
 P TEST WELL CONVERTED TO PRODUCTION WELL

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 10.17.13 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS IDENT. NO. 120  
 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)  
Harold Wood  
 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

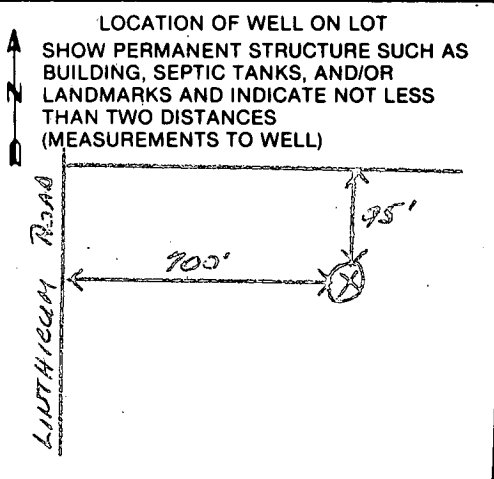
GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)  
 T (E.R.O.S.) WQ  
 TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3  
 1 2

PUMPING TEST  
 HOURS PUMPED (nearest hour) 3  
 PUMPING RATE (gal. per min. to nearest gal.) 100  
 METHOD USED TO MEASURE PUMPING RATE: SUBMERSIBLE  
 WATER LEVEL (distance from land surface) BEFORE PUMPING: 259"  
 WHEN PUMPING: 1029"  
 TYPE OF PUMP USED (for test)  
 A air  P piston  T turbine  
 C centrifugal  R rotary  O other (describe below)  
 J jet  S submersible

PUMP INSTALLED  
 DRILLER WILL INSTALL PUMP YES  NO   
 IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE  
 TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE:  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 } LAND SURFACE (nearest foot) 7  
 - below }



4/4/88

HOWARD COUNTY HEALTH DEPARTMENT  
Bureau of Environmental Health  
3525-H Ellicott Mills Drive  
Ellicott City, MD 21043  
461-9933

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation  Replacement  Receipt # 41221  
 Date 3-17-88  
 Name of Installer South Carroll Mechanical Telephone 795-1133  
 License Number 2486  
 Certified Well Pump Installer  Well Driller  Registered Plumber   
 Name of Property Owner Jeffery C. Herwig Telephone 522-7088  
 Subdivision Pleasant Landings Lot # 10 Well Tag # HD-81-1326  
 Site Address 4465 LITTLEWOOD RD, DAYTON MD 21036

**Pump**  
 1. Type  
 a. Deep well jet   
 b. Shallow well jet   
 c. Submersible   
 2. Make Grund  
 3. Model # \_\_\_\_\_  
 4. Capacity 7 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

**Pitless Adapter**  
 1. Make \_\_\_\_\_  
 2. Model # \_\_\_\_\_  
 3. Depth 42"

**Tank**  
 1. Capacity 42 gal equivalent  
 2. Pressure relief valve? 75 lb

**Piping**  
 1. Type Polyethylene  
 2. Size 1"  
 3. NSF and/or BOCA Code approved \_\_\_\_\_  
 4. Depth of supply line 42"

**Well data**  
 1. Depth 225 ft.  
 2. Yield \_\_\_\_\_ 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).

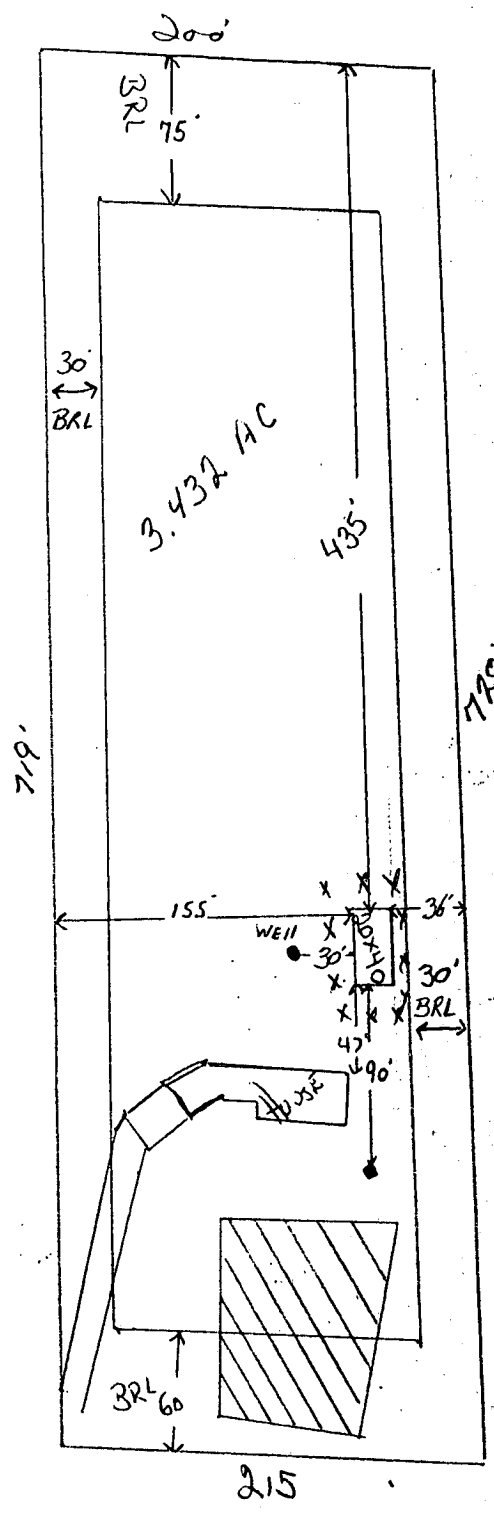
All information given above is true to the best of my knowledge.

Signature of Applicant: [Signature]

Date: 3-17-88

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

4/4/89 - COVER OUTSIDE WORK PRESSURE TANK NOT INSTALLED RH



JEFFREY C. & MICHELE J. HERWIG  
 4405 LINTHICUM RD  
 DAYTON MD 21036  
 xxx Proposed fence

4/6/89  
 OK to sign  
 B. [Signature]