

EHW-2025-00750 - 6651 Ormond rd Springfield

Menu Reports Help

File Date: 12/03/2025

Application Status: Permit Issued

Assigned To:

Description of Work: Test Well 1

Workflow Status:	Task	Assigned To	Status	Status Date	Action By
	Application Intake	Nicole Pintrick	Accepted	12/04/2025	Nicole Pintrick
	Permit Recommendation	Mike Morris	Issued	12/04/2025	Mike Morris
	Permit Review	Kevin Paladino	Issued	12/04/2025	Kevin Paladino
	Permit Issuance		Completed	12/05/2025	Deb Myers
	Not Issued				
	Final Recommendation				
	Final Review				
	Rescind				
	Letter Distribution				
	Disapproved				

Application Type: Water Well Permit

Application Name: 6651 Ormond rd Springfield

Address: 6651 Ormond Rd, Davisburg, MI 48350

Parcel No: 0719401007

Contact Info:	Name	Organization Name	Contact Type	Contact Primary Address	Status
	LWD, Inc.	LWD, Inc.	Applicant	Mailing, 3159 E Bristo...	Active

Total Fee Assessed: \$270.92

Total Fee Invoiced: \$270.92

Balance: \$0.00

Application Comments:	View ID	Comment	Date
	DIVITOL@O...	partial refund of 41\$ for additional well approved	12/08/2025
	MYERSDL@O...	Mailed permit and sketch / dm	12/05/2025
	DIVITOL@O...	refund requested for additional well fee only.	12/04/2025
	PINTRICKN...	Notified client to apply for second test well. ...	12/04/2025
	PINTRICKN...	Assigned initial site visit to MikeM Np	12/04/2025
	PINTRICKN...	Well ATN 63350796 No septic records found Np	12/04/2025

Documents:	File Name	Document Group	Category	Description	Type	Docun
	Show all					

Custom Fields: Well Summary Information

Well Application Information

Well Type

[Test Well](#)

Number of wells

1

Is this an Emergency Replacement Well?

[No](#)

Existing well on site?

[No](#)

Properly abandon existing well

Is it a flowing well?

Well water from old be used after

[No](#)

Existing well retain use certifi

Type of Drilling

[Rotary](#)

Is there a Deviation from the Minimum Requirements?

[No](#)

Approx Distance from Contamination Sources (Existing or Proposed from Well)

Septic Tank

Disposal Field

-

-

Grinder Pump

Sewer Line

-

-

Other

-

Amendment Information

Is this an Amendment?

Subdivision Name

-

Predrilling Site Evaluation

Check if completing Predrilling Site Evaluation task

✓

Sketch Reviewed?

Yes

Sketch Comments

-

Existing well log available?

No

Does existing well penetrate bedrock?

Unknown

Known ground water contamination site?

No

Known ground water contamination site comments

-

Was a hydrogeological study submitted?

No

Flowing well area?

Unknown

Other potential sources of contamination on adjacent parcel reviewed?

No

Other aquifer concern comments

-

Special sampling?

No

Special sampling requirement

-

Sampling frequency

-

Site Considerations

Is municipal water available?

No

Proposed water well location approved?

Yes

If well location is NOT approved, is there an acceptable location?

Not Applicable

Is well location acceptable in terms of potential for flooding?

Yes

Will proposed well be accessible for maintenance after site development?

Yes

Existing well on site?

No

If no, intended well use

-

Is deviation granted?

Not Applicable

Existing well will be abandoned?

Not Applicable

Site Evaluation Comments

TEST WELL to gather water quality baseline

Well Permit Comments

Pumping capacity shall not exceed 70 GPM.

Owner may be required to comply with other applicable laws, regulations, ordinances, and codes related to the water supply at this location.

Final Inspection Details

Check if completing Final Inspection task

Water Well Location

Same Location as approved on permit?

Accessible for maintenance/Repair

Casing Terminates

Ht. above grade

-

-

Casing Material

Casing Size

-

-

Minimum Well Depth Met

Well Depth

-

-

Well Cap

Annular space or casing absent around casing

Electrical Conduit

Sample Tap

Min 160psi pressure rating
Flowing Well properly constructed

Pump Type

Pump type approved?

Storage Tank Type

Storage Tank Type Approved?

H2O piping material present/approved?

H2O PI

Protected Suction Line

Is Pressure relief valve approved?

Were there any construction violations observed?

Were there any construction violations corrected?

Well Construction Comments

-

Existing Well Information

Existing well on site?

Existing well properly abandoned?

No

Have you received the Verification of Serviceable Use?

Not Applicable

Plugging material approved?

What is volume of plugging material

-

Existing Well Comments

-

Well Log Information

Complete and accurate well log Received?

Well Log Date Received

Well Log Date Accepted

-

Abandonment Log Received?

Abandonment Well Log Date Receive

-

Well Abandonment Driller

Abandonment Well Date Plugged

-

Well Log Comments

-

MINIMUM ISOLATION DISTANCE

Minimum Isolation Distance Comments Approval

Greater than 50 feet from storm drains.

50 feet from any septic tank or drainfield.

10 feet from any surface water (lake, stream, pond, ditch, etc.)

SUBDIVISION REQUIREMENT

Subdivision Requirement Approval Comments

SPECIAL CONDITIONS

Special Conditions – New Permit Special Conditions – New Permit – Approval Special Conditions – New Permit - Comments

SAMPLE INFORMATION

Sample Number Analysis Type Collection Date Collection Time Collected By Collected By Phone Sample Source Sample P

BACTI SAMPLE RESULTS

Letter Sample Number Lab Sample Number Analysis Date Analysis Time Reported By T. Coliform E. Coll Heterotrophic Pl

CHEMICAL ANALYSIS SAMP RESULTS

Letter Sample Number Lab Sample Number Analysis Date Analysis Time Reported By Fluoride Chloride Nitrate Nitrite Su

LEAD ANALYSIS SAMPLE RESULTS

Letter Sample Number Lab Sample Number Analysis Date Analysis Time Reported By Lead Test Setup Date Test Setup Ti

COPPER ANALYSIS SAMPLE RESULTS

Letter Sample Number Lab Sample Number Analysis Date Analysis Time Reported By Copper Test Setup Date Test Setup

ARSENIC ANALYSIS SAMPLE RESULT

Letter Sample Number Lab Sample Number Analysis Date Analysis Time Reported By Arsenic Test Setup Date Test Setup

OUTSIDE LAB SAMPLE RESULTS

Letter Sample Point Lab Name Lab Name Other Collected By Collection Date Reason T. Coliform E. Coll Heterotrophic Pl

Scheduled/Pending Inspections:		Inspection Type	Scheduled Date	Inspector	Status	Comments
Resulted Inspections:		Inspection Type	Inspection Date	Inspector	Status	Comments
		Site Visit	12/03/2025	Mike Morris	Approved	



EHSI-2023-00053



EHFSPR-1112-1854



EHW-2025-00753



More

EHW-2025-0... **STATUS** **LOCATION** **CONTACT** **WORKFLOW**
 6651 Ormond rd ... > Permit Issued > 6651 Ormond... > LWD, Inc. > 10 total Task
 Test Well 1 12/05/2025 b... Davisburg, MI... ●...

EHW-2025-00750 - 6651 Ormond rd Springfield

Menu New New from Scan Look Up Manage Documents Help Refresh

Record Attachments People Attachments

<input type="checkbox"/> File Name	Actions	Entity Type	Category	Department	Description	Mc
<input type="checkbox"/> CCF_000009.pdf	Actions ▼	Record	Applicant Sketch		Drawing provide...	LW
<input type="checkbox"/> site sketch 12/4/25	Actions ▼	Record	Sketch	Sanitarian		Mil
<input type="checkbox"/> partial refund request	Actions ▼	Record	Correspondence	Clerical		Lin
<input type="checkbox"/> ID002 WellPermit 20251205 085347.pdf	Actions ▼	Record	Permit	Clerical		De
<input type="checkbox"/> approved partial refund request	Actions ▼	Record	Correspondence	Clerical		Lin

6651 Ormond Rd., Springfield Twp., 07-19-401-007

Legend

Well - Site

- Proposed Well
- ↔ Dimension Line - Site
- OC Tax Parcel



0 0.02 0.04 mi

DiVito, Lindsay Maria

From: DiVito, Lindsay Maria
Sent: Thursday, December 4, 2025 3:53 PM
To: Joel Diamond; Pintrick, Nicole Julia
Cc: EHClerks; Morris, Mike
Subject: RE: Test well EHSI-2025-00750

No unfortunately there is no way to apply it to the next application, I can get the 41.00 refunded and the processing fees cant be refunded at all. Ill go ahead and submit the refund request for the 41.00

Lindsay DiVito, BS
Office Supervisor
Oakland County Health Division
Health and Human Services
Oakland County, Michigan
All ways, moving forward

Phone: (248) 858-1312
Fax: (248) 452-9758
Email: divitol@oakgov.com

Health Division Building 34E
1200 N. Telegraph Rd. | Pontiac, MI 48341
OakGov.com/Health

From: Joel Diamond <lyonswelldrilling@yahoo.com>
Sent: Thursday, December 4, 2025 12:17 PM
To: Pintrick, Nicole Julia <pintrickn@oakgov.com>
Cc: EHClerks <ehclerks@oakgov.com>; Morris, Mike <morrism@oakgov.com>
Subject: Re: Test well EHSI-2025-00750

CAUTION: This message is from a sender outside of the Oakland County organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Good afternoon Nicole,

Thank you for letting me know. Is there a way to refund or reapply the additional well fee and part of the service fee already paid to a new permit?

Thanks,
Marnie

Lyons Well Drilling
3159 E Bristol Rd
Burton, MI 48529
810-686-3980
lyonswelldrilling@yahoo.com

On Thursday, December 4, 2025 at 12:07:41 PM EST, Pintrick, Nicole Julia <pintrickn@oakgov.com> wrote:

Hello there! You have applied for a test well with record EHSI-2025-00750. On the application it says for TWO wells. This application will only cover ONE well, each well needs its own application. Please re-apply for other test well. Thank you!

Nicole Pintrick

Public Health Clerk III

Oakland County Health Division

Health and Human Services

Oakland County, Michigan

All ways , moving forward

Phone: (248) 858-1312

Fax: 248-452-9758

Email: pintrickn@oakgov.com

Health Division Building 34E

1200 N. Telegraph Rd. | Pontiac, MI 48341

OakGov.com/Health

Oakland County
1200 N TELEGRAPH RD, BLDG 34E
PONTIAC, MI 48341
Telephone: 248-858-1312

Receipt No.: **49555**
Receipt Date: **12/03/2025**

RECEIPT

RECORD & PAYER INFORMATION

Record ID: EHW-2025-00750
Record Type: Water Well Permit
Property Address: 6651 Ormond Rd, Davisburg, MI 48350
Description of Work: Test Well
Payer: Marnie Farran
Applicant: LWD, Inc.

PAYMENT DETAIL

Date	Payment Method	Reference	Cashier	Comments	Amount
12/03/2025	Credit Card		PUBLICUSER564 631		\$311.92

FEE DETAIL

Fee Description	Invoice #	Quantity	Fee Amount	Current Paid
Service Fee	53077	311.92	\$10.92	\$10.92
Additional Wells	53077	1.00	\$41.00	\$41.00
Test Well	53077	1.00	\$260.00	\$260.00
			<hr/>	
			\$311.92	\$311.92

HEALTH DIVISION

Kate Guzmán, Health Officer
(248) 858-1280 | health@oakgov.com

PERMIT TO INSTALL AN ONSITE WELL

PERMIT #: EHW-2025-00750

Issue Date: 12/05/2025

APPLICATION RECEIPT DATE: 12/03/2025

PARCEL ID #: 0719401007

PROPERTY ADDRESS: 6651 ORMOND RD
DAVISBURG, MI 48350

WELL INFORMATION: Type of Well: Test Well

OWNER:

Name: EDWARD C LEVY COMPANY

Address: 9300 DIX
DEARBORN, MI 48120

Phone:

APPLICANT:

Name: LWD, INC.

Address: 3159 E BRISTOL RD
BURTON, MI 48529

Phone: (81-0) -686-

PERMIT APPROVED SUBJECT TO THE FOLLOWING CONDITIONS:

Minimum Isolation Distances:

Greater than 50 feet from storm drains.

50 feet from any septic tank or drainfield.

10 feet from any surface water (lake, stream, pond, ditch, etc.)

Subdivision Requirements:

Deviation Granted:

Not Applicable

Comments:

Pumping capacity shall not exceed 70 GPM.

Owner may be required to comply with other applicable laws, regulations, ordinances, and codes related to the water supply at this location.

Special Sampling:

Sampling Frequency:

THIS PERMIT IS VOID AFTER TWO (2) YEARS FROM DATE OF ISSUE

Sanitarian: Mike Morris

Supervisor: Kevin Paladino

SEE NEXT SECTION FOR OTHER CONDITIONS

HEALTH DIVISION

Kate Guzmán, Health Officer
(248) 858-1280 | health@oakgov.com

PERMIT#: EHW-2025-00750

Parcel ID: 0719401007

Property Address:

6651 ORMOND RD
DAVISBURG, MI 48350

OTHER PERMIT CONDITIONS:

- CALL FOR GROUT INSPECTION WHEN WORK BEGINS
- Required isolation distances must be met.
- Well log and/or abandonment records must be submitted within 60 days of well completion and/or plugging activity.
- Installation must comply with Michigan Water Well Construction and Pump Installation Code, Part 127, Act 368 of the Public Acts of 1978 as amended, and rules, and Act 399 of 1976 as amended and administrative rules.
- If applicable, proper abandonment of a flowing well shall stop the flow by plugging the well with neat cement or concrete grout.
- If applicable, any existing or unused water wells onsite must be properly abandoned with proper documentation submitted in compliance with Michigan Water Well Construction and Pump Installation Code, Part 127, Act 368 of the Public Acts of 1978 as amended, and rules, and Act 399 of 1976 as amended and administrative rules; or certified in writing as usable for intended purposes.
- This Onsite Well Permit does not ensure an Onsite Wastewater Treatment System Permit. An Onsite Well installation may reduce or eliminate an approved onsite wastewater treatment system area resulting in denial of an application for an Onsite Wastewater Treatment System Permit.
- Act 53, P.A. 1974 requires the applicant to notify the public utilities prior to excavation. In addition, you must call 1-800-MISS DIG to locate public underground utilities.
- Owner may be required to comply with other applicable laws, regulations, ordinances, and codes related to the water supply at this location.

Disclaimer : The Oakland County Health Division will not deny participation in its programs based on race, sex, religion national origin, age or disability. State and federal eligibility requirements apply for certain programs.

DiVito, Lindsay Maria

From: Riddell, Laura
Sent: Thursday, December 4, 2025 6:03 PM
To: DiVito, Lindsay Maria
Subject: RE: Refund request - Test well EHSI-2025-00750

Hi Lindsay,

The refund for the \$41.00 is approved.

Thanks,
Laura

Laura Riddell, RS, MS

she/her/hers

Chief Public Health
Health Division
Health & Human Services
Oakland County, Michigan
All ways, moving forward

Mobile: (248) 343-5185
Email: riddelll@oakgov.com

1200 N. Telegraph Rd, Building 34E
Pontiac, MI, 48341

[OakGov.com/health](https://oakgov.com/health)

From: DiVito, Lindsay Maria <divitol@oakgov.com>
Sent: Thursday, December 4, 2025 4:08 PM
To: Riddell, Laura <riddelll@oakgov.com>
Subject: Refund request - Test well EHSI-2025-00750

Please see attached, this would be the additional 41.00 only

Lindsay DiVito, BS

Office Supervisor
Oakland County Health Division
Health and Human Services
Oakland County, Michigan
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EHSI-2023-00053



EHFSPR-1112-1854



EHW-2025-00753



More

EHW-2025-0...	STATUS	LOCATION	CONTACT	WORKFLOW
6651 Ormond rd ... Test Well 1	> Permit Issued 12/05/2025 b...	> 6651 Ormond... Davisburg, MI...	> LWD, Inc.	> 10 total Task ●...

EHW-2025-00750 - 6651 Ormond rd Springfield

Menu New Help

Date	Comment	View ID
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12/05/2025	<u>Mailed permit and sketch / dm</u>	MYERSDL@O...
12/04/2025	<u>refund requested for additional well fee only.</u>	DIVITOL@O...
12/04/2025	<u>Notified client to apply for second test well, this applica... (CONT'D NEXT PG)</u>	PINTRICKN...
12/04/2025	<u>Assigned initial site visit to MikeM Np</u>	PINTRICKN...
12/04/2025	<u>Well ATN 63350796 No septic records found Np</u>	PINTRICKN...



EHSI-2023-00053



EHFSPR-1112-1854



EHW-2025-00753



More

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EHW-2025-00750 - 6651 Ormond rd Springfield

Submit Reset Cancel Help

Comment Standard Comment

A

Notified client to apply for second test well, this application only covers one. Np

check spelling