

PUB. SEWER STATUS VERIFIED BY _____

ISSUE DATE: 7/14/05

P 522930

APPROVAL DATE: 7/29/05

A REPAIR

**PERMIT
INDEXED**

03-287882

**ON-SITE SEWAGE DISPOSAL SYSTEM
HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH**

Jenkins Bros. IS PERMITTED TO INSTALL ALTER

ADDRESS: 7670 Smiths Private Road PHONE NUMBER: 410-461-9282

SUBDIVISION: _____ LOT NUMBER: _____

ADDRESS: 12350 Frederick Road PROPERTY OWNER: William Johnson

SEPTIC TANK CAPACITY (GALLONS): _____

PUMP CHAMBER CAPACITY (GALLONS): _____

NUMBER OF BEDROOMS: 5

SQUARE FEET PER BEDROOM: 180

LINEAR FEET OF TRENCH REQUIRED: 140

*Inlet 4'
Bottom 9'
5' Stone Below Pipe
Trenches 2' Wide*

TRENCHES:	Trench to be _____ feet wide. Inlet _____ feet below original grade. Bottom maximum depth _____ feet below original grade. Effective area begins at _____ feet below original grade. _____ feet of stone below distribution pipe.
LOCATION:	_____
PURPOSE:	Existing septic system has failed. Call for inspection when ground is opened so sanitarian can recommend repair.

PLANS APPROVED: _____ DATE: _____

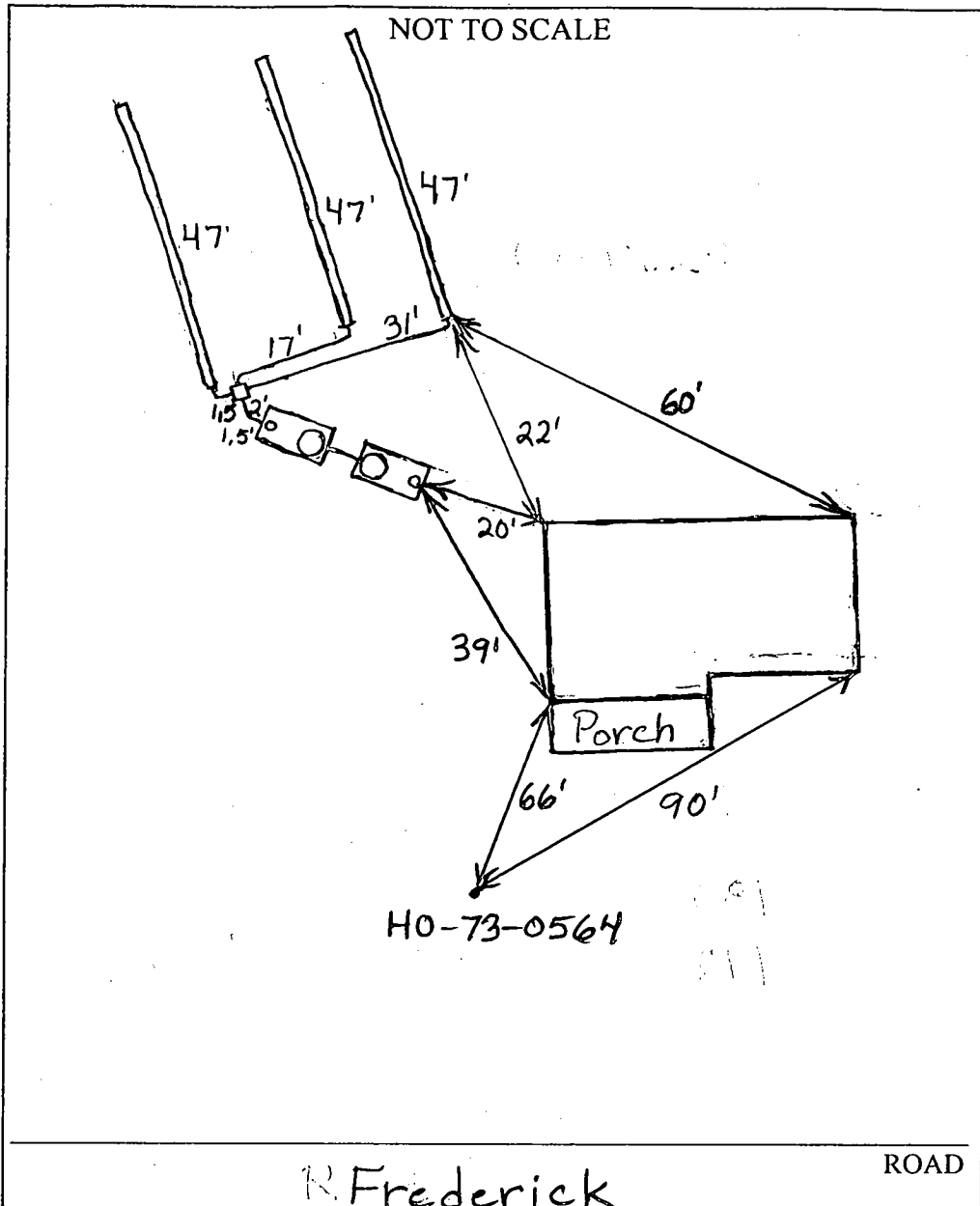
- NOTE: PERMIT VOID AFTER 2 YEARS
- NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
- NOTE: WATERTIGHT SEPTIC TANKS REQUIRED
- NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL
- NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS

**NEITHER THE HOWARD COUNTY COUNCIL OR THE HEALTH DEPARTMENT IS
RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM
PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT
CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM**

**BUILDING PERMIT SIGNED
AND RETURNED**

10/11/05 B00156065 Enclosed riding arena + Barn

A57252-B



TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
2'	4'	9'
NUMBER OF TRENCHES		3'
TOTAL LENGTH		141'
ABSORPTION AREA		705 sq. ft.
DISTRIBUTION BOX LEVEL		Levelers
DISTRIBUTION BOX BAFFLE		Yes
DISTRIBUTION BOX PORT		No

SEPTIC TANK DATA	
SEPTIC TANK 1 LEVEL	
CAPACITY	Existing GAL
SEAM LOC	Midseam
TANK LID DEPTH	0.5'-1'
BAFFLES	Yes
BAFFLE FILTER	No
MANHOLE LOC	Rear
6" PORT LOC	Front
WATERTIGHT TEST	No
SEPTIC TANK 2 LEVEL	
CAPACITY	1500 GAL
SEAM LOC	Top
TANK LID DEPTH	1'-1.5'
BAFFLES	Yes
BAFFLE FILTER	No
MANHOLE LOC	Front
6" PORT LOC	Rear
WATERTIGHT TEST	No

2-Comp. Babylon

PRE-CONSTRUCTION 7/27/05 Fill in drywell with dirt after pumping it out. Install 3 short trenches on contour

INSTALLATION below the drywell on the other side of the fence (BB)

7/29/05 System finished. O.K. to cover everything. Second septic tank installed per homeowner's request. (BB)

FINAL INSPECTOR B. Baker DATE OF APPROVAL 7/29/05

BUILDING DEPARTMENT
CITY OF BAYLON



HOWARD COUNTY HEALTH DEPARTMENT

A 523424

DATE
10 / 5 / 2005

301 440 1661

PHONE # ~~301 776~~

Received From William C Johnson

~~10705 Swinlock Road, Laurel MD 20723~~ 12350 Friendship Rd
12350 Friendship Rd
21799

For Pesc Application

- CASH
- CHECK

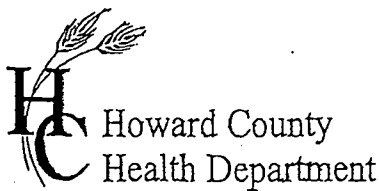
12350 Friendship Rd

NO.
3955

Three hundred six and 00/100 Dollars

\$ 506 00

Received By Mary L Bugis



APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) _____ TEST TIME _____

AP 523424

AGENCY REVIEW: _____

DATE 10/5/2005

DO NOT WRITE ABOVE THIS LINE

I HEREBY APPLY FOR THE NECESSARY TESTING/EVALUATION PRIOR TO ISSUANCE OF SEWAGE DISPOSAL SYSTEM PERMIT(S) TO:

CHECK AS NEEDED:

- CONSTRUCT NEW SEPTIC SYSTEM(S)
- REPAIR/ADD TO AN EXISTING SEPTIC SYSTEM
- REPLACE AN EXISTING SEPTIC SYSTEM

CHECK AS NEEDED:

- NEW STRUCTURE(S)
- ADDITION TO AN EXISTING STRUCTURE
- REPLACE AN EXISTING STRUCTURE

CHECK ONE:

- CREATE NEW LOT(S)
- BUILD ON AN EXISTING LOT IN A SUBDIVISION
- BUILD ON AN EXISTING PARCEL OF RECORD

IS THE PROPERTY WITHIN 2500' OF ANY RESERVOIR?

- YES
- NO

THE TYPE OF STRUCTURE IS:

- RESIDENTIAL WITH 5 PROPOSED BEDROOMS IN THE COMPLETED STRUCTURE (NOTE UNKNOWN IF APPROPRIATE)
- COMMERCIAL (PROVIDE DETAIL OF NUMBERS AND TYPES OF EMPLOYEES/ CUSTOMERS ON ACCOMPANYING PLAN)
- INSTITUTIONAL/GOVERNMENT (PROVIDE DETAIL OF NUMBERS AND TYPES OF EMPLOYEES/USERS ON ACCOMPANYING PLAN)

PROPERTY OWNER(S) WILLIAM AND NANCY JOHNSON

DAYTIME PHONE _____ CELL 301-440-4808 FAX _____

MAILING ADDRESS 12350 FREDERICK RD. WEST FRIENDSHIP MD. 21794
STREET CITY/TOWN STATE ZIP

APPLICANT Charles M Jenkins (Jenkins Bros Septic Svc. Inc.)

DAYTIME PHONE 410 781-7133 CELL 410 971-8104 FAX 410 552-1100

MAILING ADDRESS 7670 Smiths Private Rd. Sykesville, Md 21784
STREET CITY/TOWN STATE ZIP

APPLICANT'S ROLE: DEVELOPER BUILDER BUYER RELATIVE/FRIEND REALTOR **CONSULTANT Contractor**

PROPERTY LOCATION
SUBDIVISION/PROPERTY NAME _____ LOT NO. _____

PROPERTY ADDRESS 12350 FREDERICK RD. WEST FRIENDSHIP, MD. 21794
STREET TOWN/POST OFFICE

TAX MAP PAGE(S) 15 GRID 12 PARCEL(S) 63 PROPOSED LOT SIZE 5Ac. ±

AS APPLICANT, I UNDERSTAND THE FOLLOWING: THE SYSTEM INSTALLED SUBSEQUENT TO THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC SEWERAGE IS AVAILABLE. THIS APPLICATION IS COMPLETE WHEN ALL APPLICABLE FEES AND A SUITABLE SITE PLAN HAVE BEEN RECEIVED. I ACCEPT THE RESPONSIBILITY FOR COMPLIANCE WITH ALL M.O.S.H.A. AND "MISS UTILITY" REQUIREMENTS. APPROVAL IS BASED UPON SATISFACTORY REVIEW OF A PERC CERTIFICATION PLAN.

TEST RESULTS WILL BE MAILED TO APPLICANT. Charles M Jenkins
SIGNATURE OF APPLICANT

HOWARD COUNTY HEALTH DEPARTMENT, BUREAU OF ENVIRONMENTAL HEALTH, WELL AND SEPTIC PROGRAM
3525-H ELLICOTT MILLS DRIVE, ELLICOTT CITY, MARYLAND 21043-4544 (410) 313-1771 FAX (410) 313-2648
TDD (410) 313-2323 TOLL FREE 1-877-4MD-DHMH

A/P _____

Empty rectangular box for notes or identification.

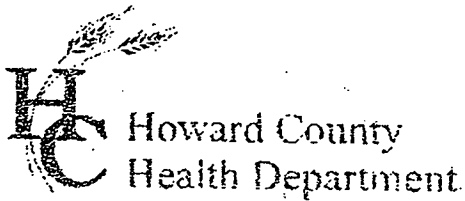
Empty rectangular box for notes or identification.

Empty rectangular box for notes or identification.

Empty rectangular box for notes or identification.

Empty rectangular box for notes or identification.

Empty rectangular box for notes or identification.



DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2nd INCH	P/F/H

REMARKS _____

SANITARIAN _____ BACKHOE _____ OTHERS _____

TEST HOLES USED IN SDA _____ AVG. PERC TIME _____ SQ. FT/BR _____

TRENCH WIDTH _____ INLET DEPTH _____ MAX. BOT DEPTH _____ EFFECTIVE SW _____



APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

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PROPERTY OWNER(S) _____

DAYTIME PHONE _____ CELL _____ FAX _____

MAILING ADDRESS _____
STREET CITY/TOWN STATE ZIP

APPLICANT _____

DAYTIME PHONE _____ CELL _____ FAX _____

MAILING ADDRESS _____
STREET CITY/TOWN STATE ZIP

APPLICANT'S ROLE: DEVELOPER BUILDER BUYER RELATIVE/FRIEND REALTOR CONSULTANT

PROPERTY LOCATION
SUBDIVISION/PROPERTY NAME _____ LOT NO. _____

PROPERTY ADDRESS _____
STREET TOWN/POST OFFICE

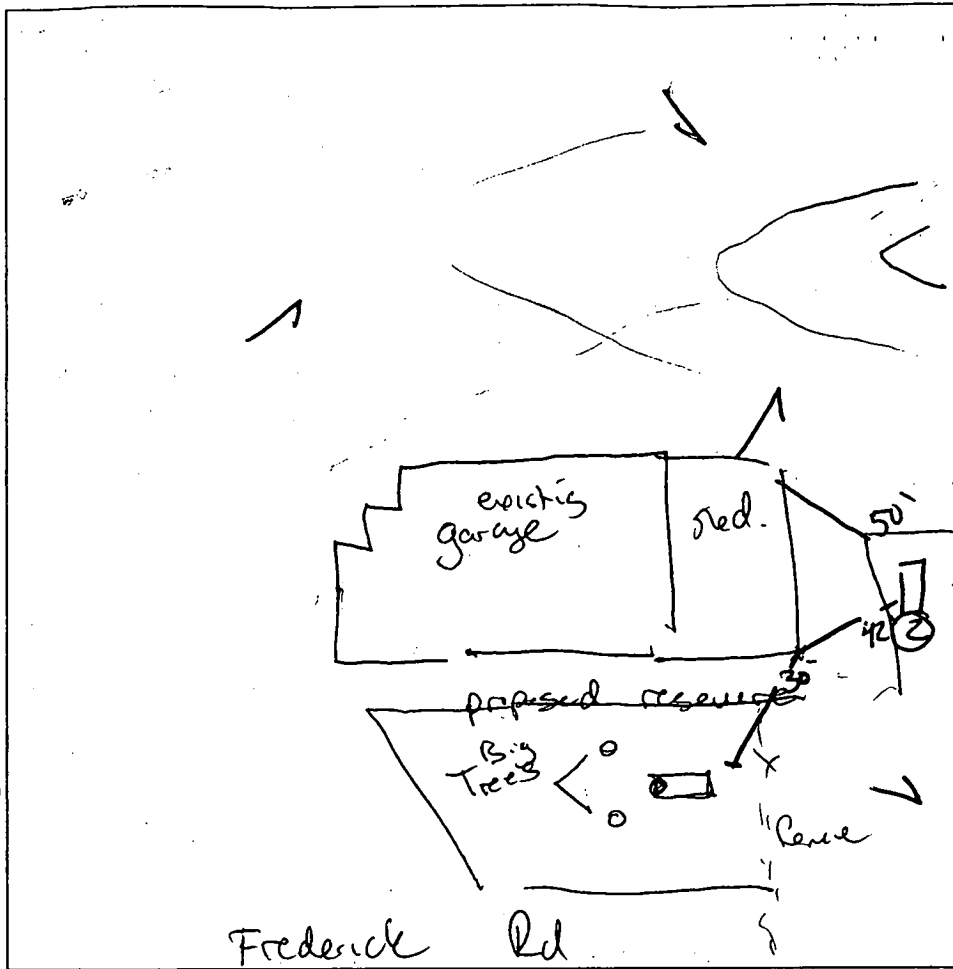
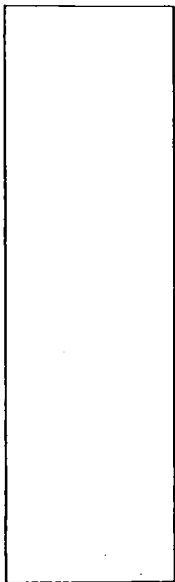
TAX MAP PAGE(S) _____ GRID _____ PARCEL(S) _____ PROPOSED LOT SIZE _____

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HOWARD COUNTY HEALTH DEPARTMENT, BUREAU OF ENVIRONMENTAL HEALTH, WELL AND SEPTIC PROGRAM
3525-H ELLICOTT MILLS DRIVE, ELLICOTT CITY, MARYLAND 21043-4544 (410) 313-1771 FAX (410) 313-2648
TDD (410) 313-2323 TOLL FREE 1-877-4MD-DHMH



3 1/2

①
 dark brown l
 orange red brown silty
 1 (rock)
 3
 15 to 16 ft
 4-b
 coarse
 silty
 6-
 4-b
 ls/sil (med)
 11-
 5% cherty frags
 13

②
 brown rocky ben
 1
 4-a-b
 silty
 8 1/2
 4-b
 silty
 silty
 8
 cherty frags
 9
 white silty
 w/ cobble frags (20%)
 15

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2nd INCH	P/F/H
10/12/05	①	1.3	visual				P
	②	3 1/2 ft	12:03	12:06	12:09	3	P

(New system recently installed - 1/3 of 10,000)
 REMARKS Soils consistent w/ old notes.
 SANITARIAN RAY BACKHOE Seaburg Bros OTHERS _____
 TEST HOLES USED IN SDA 2 AVG. PERC TIME _____ SQ. FT/BR _____
 TRENCH WIDTH _____ INLET DEPTH _____ MAX. BOT DEPTH _____ EFFECTIVE SW _____

PR - 10/4/05
retraced

William and Nancy Johnson
12350 Frederick Road
West Friendship, Maryland 21794
410 489 9452
w: 410 964 0300

CK #	<u>3956</u>
CR #	<u>97879</u>
DATE #	<u>10/5/05</u>
	<u>125.00</u>

October 5, 2005

Ms. Avis L. Corbin, Chief
Licenses & Permits Division
Department of Inspections, Licenses & Permits
George Howard Building
3430 Court House Drive
Ellicott City, Maryland 21043

Re: Nancy L. Johnson
12350 Frederick Road, West Friendship
Grading Permit #98756
Building Permit #98755 *B-156-65*

Dear Ms. Corbin:

Attached for submission are 5 copies of the revised Site Plan for the above-referenced permit numbers. The revised plan reflects a reserved septic easement requested by the Health Department. Also enclosed is a copy of the receipt reflecting application for the perc test associated with this septic easement.

If you require additional information, please do not hesitate to get in touch with me.

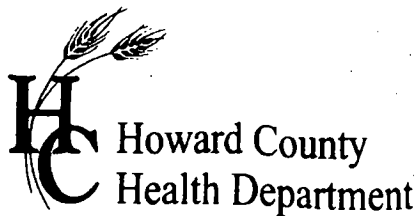
Thank you for your attention and assistance in this matter.

Sincerely,

Nancy L. Johnson
Nancy L. Johnson

enclosures

*cc Health Dept
Eng
DPR*



APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) _____ TEST TIME _____ AP 57252-B

AGENCY REVIEW: _____ DATE _____

DO NOT WRITE ABOVE THIS LINE

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- YES
- NO

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PROPERTY OWNER(S) William Johnson

DAYTIME PHONE _____ CELL _____ FAX _____

MAILING ADDRESS _____
STREET CITY/TOWN STATE ZIP

APPLICANT _____

DAYTIME PHONE _____ CELL _____ FAX _____

MAILING ADDRESS _____
STREET CITY/TOWN STATE ZIP

APPLICANT'S ROLE: DEVELOPER BUILDER BUYER RELATIVE/FRIEND REALTOR CONSULTANT

PROPERTY LOCATION
SUBDIVISION/PROPERTY NAME _____ LOT NO. _____

PROPERTY ADDRESS 12350 Frederick Road
STREET TOWN/POST OFFICE

TAX MAP PAGE(S) _____ GRID _____ PARCEL(S) _____ PROPOSED LOT SIZE _____

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TEST RESULTS WILL BE MAILED TO APPLICANT.

SIGNATURE OF APPLICANT

HOWARD COUNTY HEALTH DEPARTMENT, BUREAU OF ENVIRONMENTAL HEALTH, WELL AND SEPTIC PROGRAM
3525-H ELLICOTT MILLS DRIVE, ELLICOTT CITY, MARYLAND 21043-4544 (410) 313-1771 FAX (410) 313-2648
TDD (410) 313-2323 TOLL FREE 1-877-4MD-DHMH

A/P (A)

Red Br Sa
Cl Loam
Trace Rock

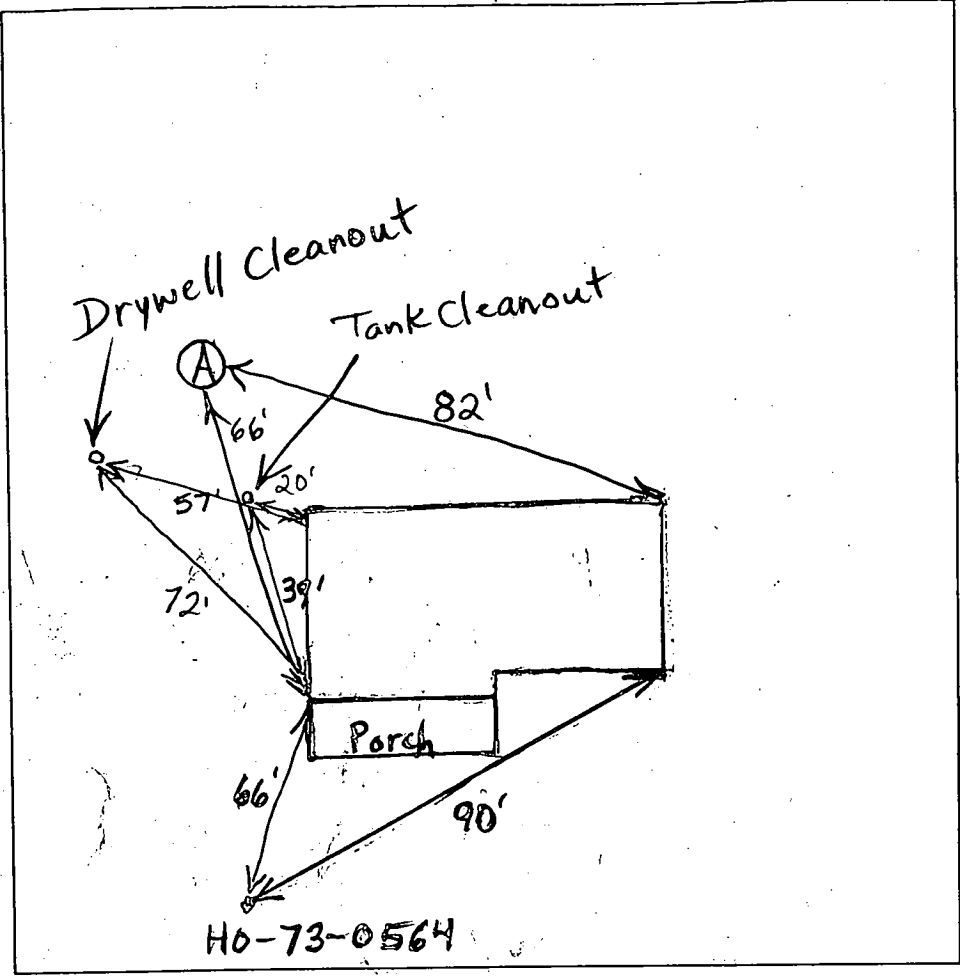
2'-5'

Tan Loamy
Sand

~25% Rock and
Saprolite

~40% Rock
Near Bottom

15'



DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2nd INCH	P/F/H
7/27/05	A	4' / 15'	10:23	10:24	10:26	2	P

REMARKS Rate Too Fast in Bottom of Hole
 SANITARIAN B. Baker BACKHOE Jenkins OTHERS _____
 TEST HOLES USED IN SDA A AVG. PERC TIME 2 SQ. FT/BR 180
 TRENCH WIDTH 2 INLET DEPTH 4 MAX. BOT DEPTH 9 EFFECTIVE SW 5

NO RECORD FOUND

A57252-B

SEWAGE DISPOSAL SYSTEM
MARYLAND STATE DEPARTMENT OF HEALTH
HOWARD COUNTY
INDEXED
ELLIOTT CITY
DISTRICT
DATE

File

Liberty Sewer Service IS PERMITTED TO INSTALL & MAINTAIN

ADDRESS Strangles Road, Dist #1A, Newville, Md. PHONE 771-222 2026

A SEWAGE DISPOSAL SYSTEM LOCATED AT

SUBDIVISION 12350
ROAD Strangles Road

PROPERTY OWNER WESTON BUDIN DAVID NODAR

ADDRESS West Friendship, Maryland

SPECIFICATIONS 3 bedrooms

DRAIN FIELD DEPTH FEET BOTTOM AREA SQ. FT.

SEEPAGE PITS ABSORBENT SIDEWALL AREA SQ. FT.

SEPTIC TANK CAPACITY 1200 GALLONS

FOR GARBAGE GRINDER, MICROWAVE DISPOSAL AREA IS 1/2 TANK CAPACITY

OTHER DRY WELL - 100 G.G. FT. ABSORBENT SIDEWALLS NOT INSTALLED TO BEHIND HOUSE
SEE PLAN. Maximum depth permitted for any well is 12 ft. Locate dry well
22 ft. from left side line and 2 1/2 ft. from front lot line of 1200 Cap. Tank

NOTE: ALL PIPE FROM HOUSE TO DRY WELL MUST BE CAST IRON.
PERMIT VOID AFTER THREE YEARS

NOTE: INSTALL BRAND PIPE ON SEPTIC TANK AND DRY WELL.

PLANS APPROVED BY Robert V. Toffo DATE 8/20/73

FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

NEITHER THE HOWARD COUNTY COMMISSIONERS NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

BLDG. PERMIT SIGNED AND RETURNED 10/11/76
Serial # BR102596
add - second story
4 bedrooms

BLDG. PERMIT SIGNED AND RETURNED 9/22/76
Serial # 72972
deck

18623

A-57252-B

DATE SYSTEM APPROVED

PROPERTY OWNER	ROBERT J. JONES
ADDRESS	12345678
SECTION	2
DEPTH	4 FT.
AREA	144 SQ. FT.
DATE	10/25/73
DISTRICT	1
CITY	ELICOTT

34
357

SEPTIC TANK CAPACITY 1000 GALLONS

SEPTIC TANK LEVEL Normal

DISTRIBUTION BOX LEVEL Normal

TILE FIELD, DEPTH 12 FT. TRENCH WIDTH 9 FT.

GRAVEL DEPTH 12 IN. TOTAL LENGTH 12 FT.

NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA 144 SQ. FT.

SEPTAGE PITS, INSIDE DIAMETER 12 FT. DEPTH BELOW INLET 9 FT.

ABSORBENT AREA 251 SQ. FT.

PLANS APPROVED BY Robert J. Jones

REMARKS: UNTIL INSPECTED AND APPROVED.

NEITHER THE HOWARD COUNTY COMMISSIONERS NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

DATE SYSTEM APPROVED 11/7/73 INSPECTOR R. Tom

SEWAGE DISPOSAL SYSTEM

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH SERVICES

P. O. BOX 476, ELLICOTT CITY, MARYLAND 21113

TELEPHONE: 410-5866, EXT 113

sidewalk area per bedroom to begin below the subject.

Maximum depth permitted from dry well is 12 ft. Located

dry well 30 ft from left side lot and 5'45" ft from

front lot line as seen from 194.

TO: THE COUNTY HEALTH OFFICE
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Bob of Home

ADDRESS West Friendship, Md.

PROPERTY LOCATION:

SUBDIVISION W.P. 25 LOT NO. 1

ROAD AND DESCRIPTION Route 111 - 1 mile west of Route 92

SIZE OF LOT 5.0000 ACRES

IF NOT SINGLE RESIDENCE DESCRIBE 66 411 1 81518

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT M. Marshall [Signature]

APPROVED BY Robert V. Toner FOR Dry Well DATE 8/8/73

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

MARLAND STE. 144

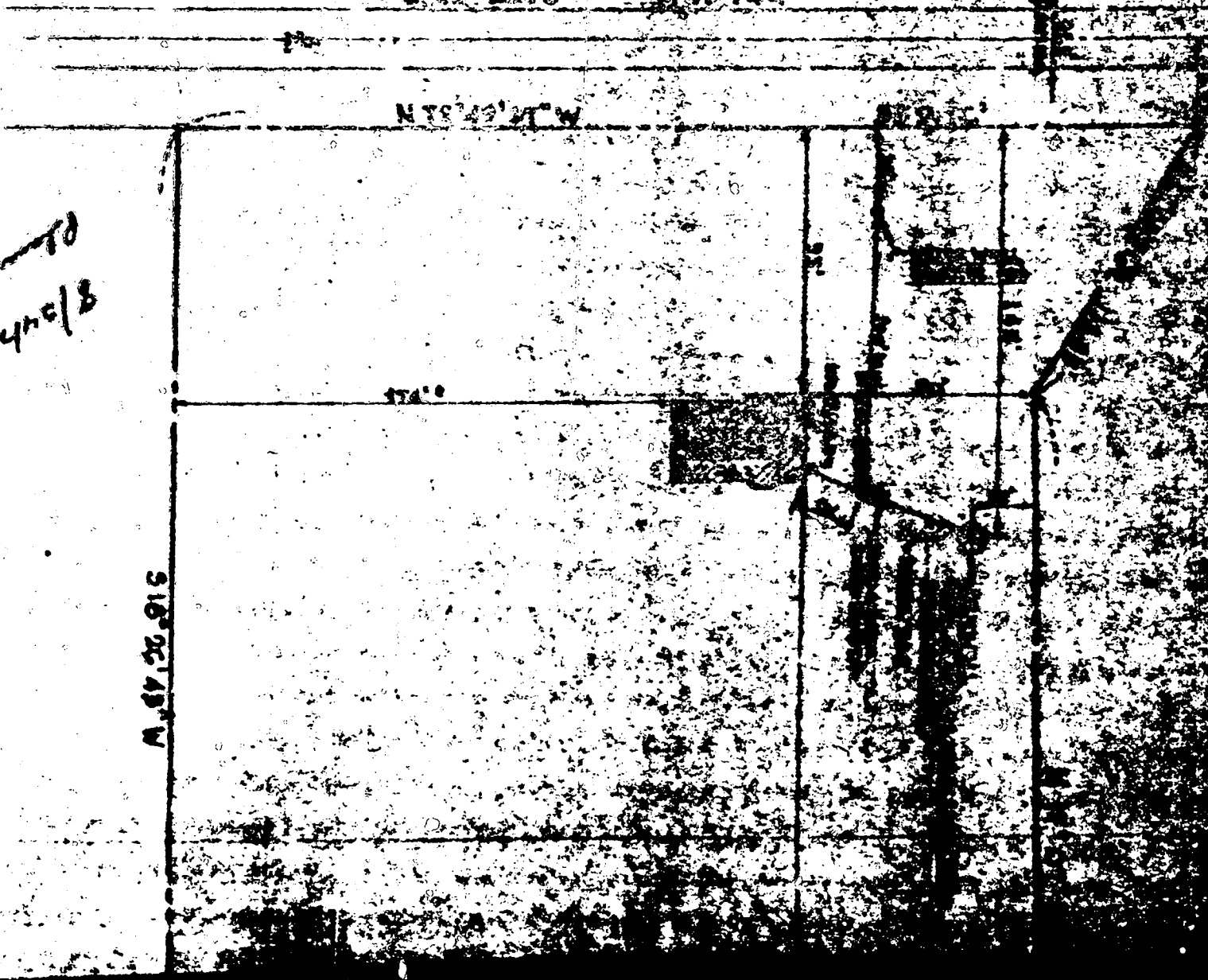
N 78° 43' 21" W

174' 0"

S 16° 22' 43" W

8/34/43
original
RTM

Plot
Plot



DATE RECEIVED: 11/17/73
 WELL NO.: 11447
 OWNER: Hudson
 STREET OR RFD: [unclear]
 POST OFFICE: [unclear]

WELL LOG

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING.

DESCRIPTION (USE APPROPRIATE CODES)	DEPTH FROM	TO	THICKNESS
Brown Nica	0	60	60
Blue Granite	60	115	55

GROUT RECORD

WELL HAS BEEN GRouted (CHECK APPROPRIATE BOX)

TYPE OF GROUTING MATERIAL (CHECK ONE):
 CM CEMENT
 OC GASTRITIC CLAY

NO. OF BAGS: 17 NO. OF POUNDS: 1656

GALLONS OF WATER: 102

DEPTH OF GROUT SEAL (TO NEAREST FOOT):
 FROM 0 FT. TO 49 FT.

CASING RECORD

INSERT APPROPRIATE CODE BELOW

MAIN CASING TYPE: S STEEL

DIAMETER (NEAREST INCH): 4

TOTAL DEPTH OF MAIN CASING (NEAREST FOOT): 51

OTHER CASING (IF USED):
 DIAMETER (INCH): [] DEPTH (FEET): []

SCREEN RECORD

INSERT APPROPRIATE CODE BELOW

TYPE OF SCREEN: ST STEEL

DIAMETER (NEAREST INCH): []

DEPTH (NEAREST FOOT): []

PLASTIC OTHER: PL OT

WATER-BEARING

DEPTH (NEAREST WHOLE FOOT) FROM TO

1	2	3	4	5	6	7	8	9	10
0	10	20	30	40	50	60	70	80	90

DIAMETER OF SCREEN (NEAREST INCH) FROM TO

GRAVEL PACK: []

IF WELL DRILLED WAS A FLOWING WELL CHECK ONE: YES

TESTING

WATER LEVELS (INDICATE FROM LAND SURFACE):
 BEFORE PUMPING: 50
 AFTER PUMPING: 71

TYPE OF PUMP USED (CHECK APPROPRIATE BOX):
 A PERISTALTIC
 B OTHER
 C CENTRIFUGAL
 D OTHER

PUMP DETAILS

TYPE OF PUMP (CHECK APPROPRIATE LETTER IN SEE - SEE ABOVE): A

DRILLER SHALL INSTALL PUMP (CHECK APPROPRIATE BOX): YES

CAPACITY: []

PUMP CODE POWER: []

PUMP COLOR (NEAREST FOOT): []

CASING HEIGHT (CHECK APPROPRIATE BOX AND ENTER FEET NEAREST):
 ABOVE
 BELOW

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURES, GOLF GREENS, SEPTIC TANKS, AND/OR OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO DISTANCED MEASUREMENTS TO WELL.

Rt. 140

Rt. 32

6/10 mi.

Rt. 144

CIRCLE APPROPRIATE BOXES

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 I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CAPTIONED "PERMIT TO DRILL WELL" AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

DRILLER'S NAME: []

PLEASE PRINT: Dana Kyker

SIGNATURE: Dana Kyker (P3)

TELESCOPE CASING: YES NO

LOG INDICATOR: YES NO

OTHER DATA AVAILABLE: []

SITE INSPECTION SHEET

10/8/96
11:00 meet
owner

OWNER: DAVE NOBAR

DATE REQUESTED: 10/7/96

ADDRESS: 12350 Fredrick Rd
566-2658

DRILLER: _____

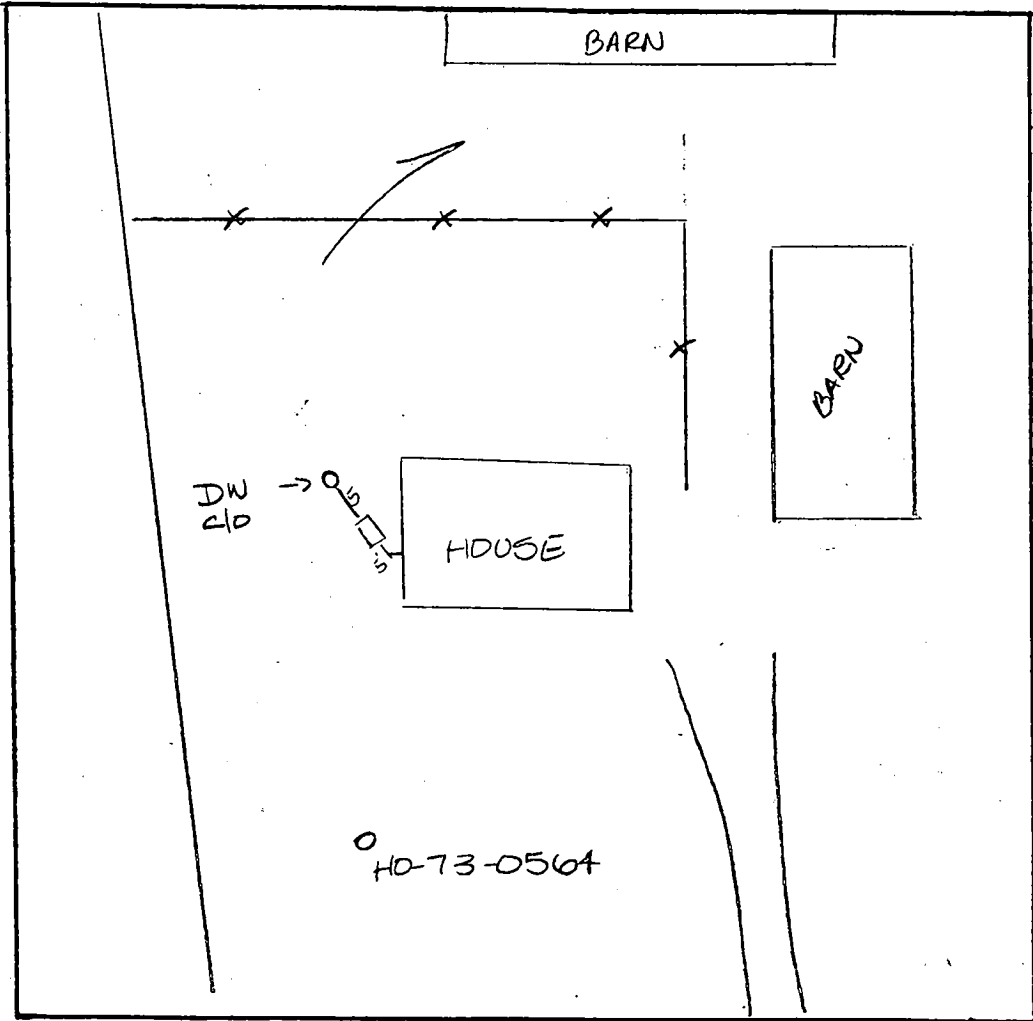
WELL TAG # H0-73-0564

COUNTY # _____

PROPOSAL: Addition of 1-2 bedroom addition

LOCATION DIAGRAM

WELL INFO
WOODROW
HUDSON
DRILLED BY
DANA KYKER
115'
89pm
A18623
P19083

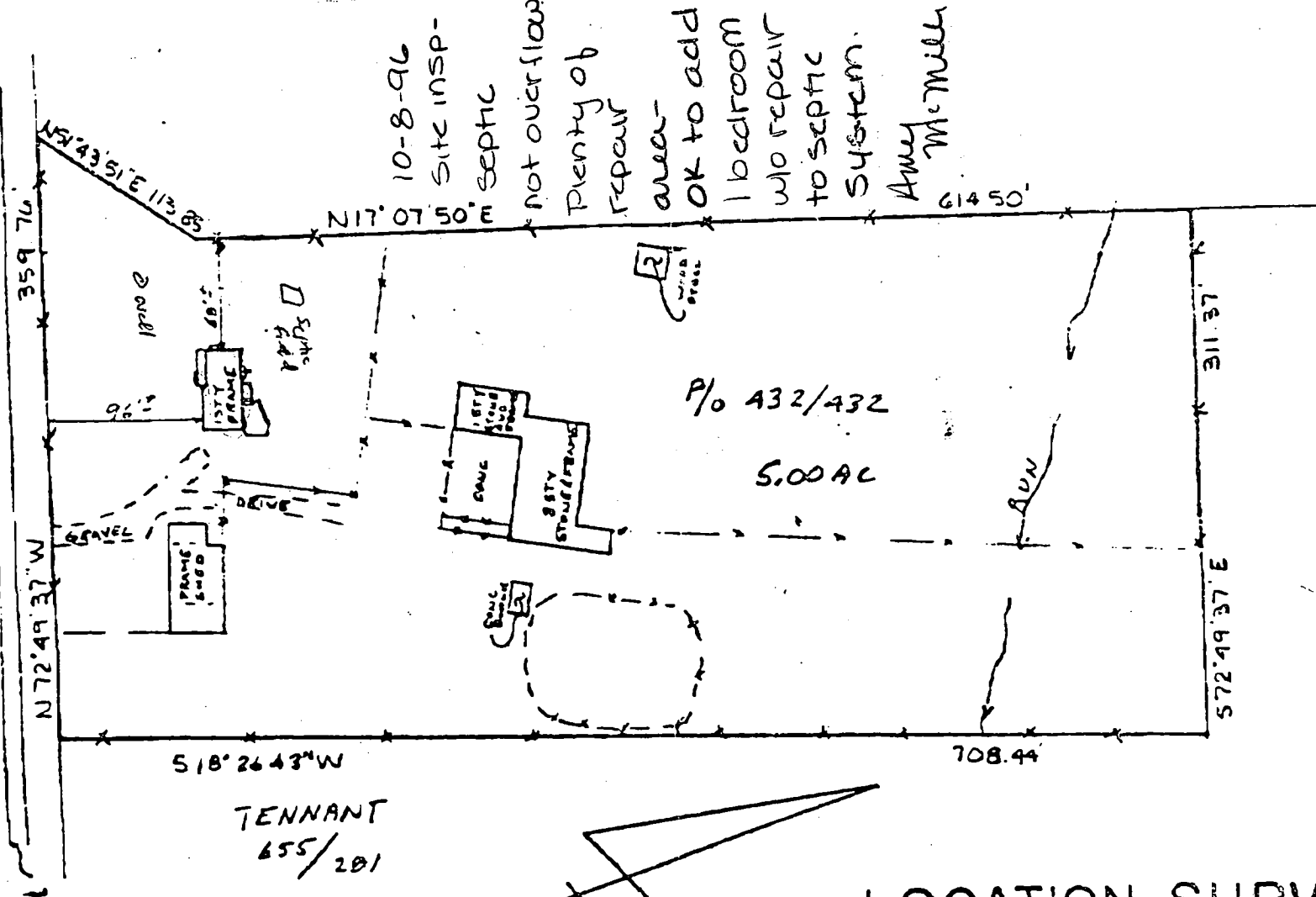


COMMENTS: 1 Bedroom addition OK - repair necessary for
2 bedrooms - No obvious failure

DATE: 10/8/96

INSPECTOR: A McMillen

FREDERICK ROAD
MD. ROUTE 144

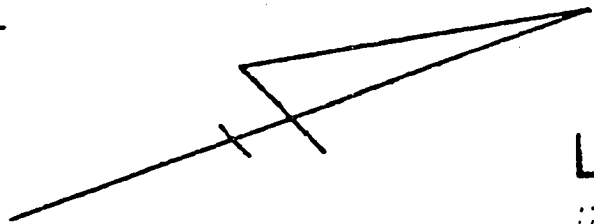


10-8-96
SITE INSP-
SEPTIC
not overflow
Plenty of
Repair
area-
OK to add
1 bedroom
w/o repair
to septic
system.
Amy
McMill

P/O 432/432
5.00 AC

TENNANT
655/201

10/11/16
Proposed addition
will have no impact
to the existing well
and/or septic
OK to proceed.

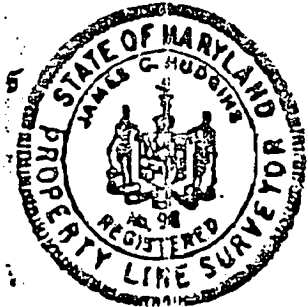


LOCATION SURVEY

12350 MARYLAND ROUTE 144
3RD ELECTION DISTRICT
HOWARD COUNTY, MD

This is to certify that I have surveyed the property shown hereon, being part of the property conveyed by Stanford Hoff to M. Woodrow Hudson by deed dated March 1, 1964 and recorded among the land records of Howard County, Maryland in Liber 432 at Folio 435 for the purpose of locating the improvements thereon.

Paul H. ...



THIS PLAT SHOWS ONLY THAT THE IMPROVEMENTS ARE CONTAINED WITHIN THE OUTLINES OF THE LOT AND IS NOT TO BE USED TO ESTABLISH PROPERTY LINES.

NTI ASSOCIATES INC. 16205 OLD FREDERICK ROAD
MT. AIRY, MARYLAND PHONE 646-5521 or 442-2031

SCALE = 100'	FIELD BY JCH	DRAWING NUMBER
DATE 11-1-88	DRAWN BY P.K.	...

