

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

04-361539

P 511914

A 57313-D

DISTRICT _____

HOWARD COUNTY HEALTH DEPARTMENT

DATE 6/1/99

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXX~~ 410-313-2640

DATE SYSTEM APPROVED 6/4/99

INDEXED

INSPECTOR M. Riffkin

Fogle's Septic Clean, Inc.

IS PERMITTED TO INSTALL ALTER _____

ADDRESS 580 Obrecht Road, Sykesville, MD 21784

PHONE 410-795-5670

SUBDIVISION Sycamore Valley II LOT 4 ROAD 3788 Championship Drive

PROPERTY OWNER Catonsville Builders

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

240 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 320

TRENCHES - Trench to be 3 feet wide. Inlet 3.0 feet below original grade. Bottom maximum depth 5.0 feet below original grade. Effective area begins at 3.0 feet below original grade. 2.0 feet of stone below distribution pipe.

LOCATION - Begin trenches 150 feet down the right lot line and 10 feet off that same lot line as seen when facing the lot from Championship Drive. Run trenches on contour towards the 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/MR

ALL PERMITS SIGNED AND RETURNED 3-17-99
800 134868 - 16 POOL
DATE 5-06-1999

PLANS APPROVED BY Amy McMillen

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

ALL PERMITS SIGNED AND RETURNED 11-5-99

PERMIT VOID AFTER TWO YEARS

Serial # BM 120503
Install - underground
1-1000 gal pipe/corb

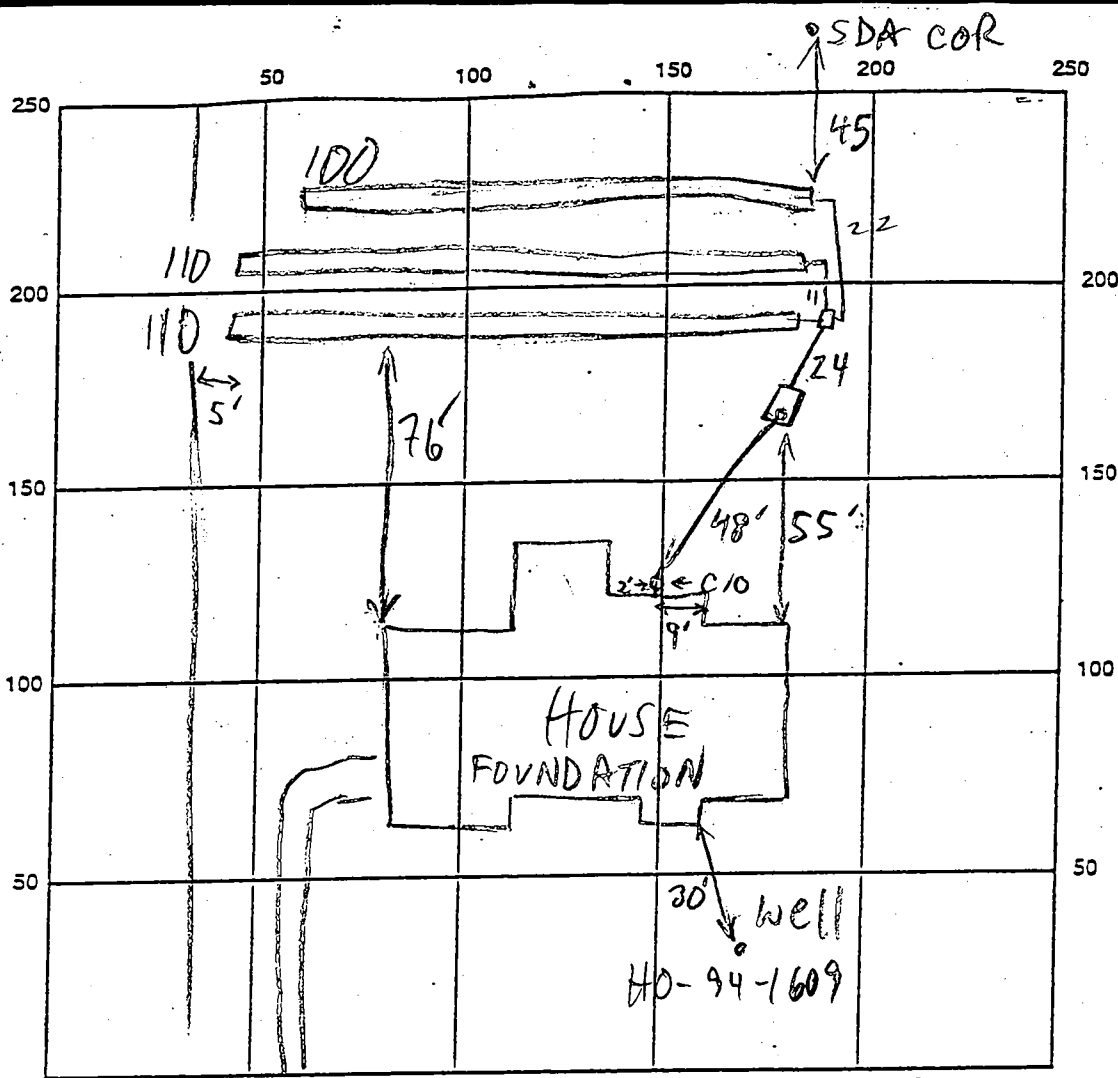
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON, CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

57313-D



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1250 GAL CLEANOUTS INLINE & S.T. - OK
 DISTRIBUTION BOX LEVEL OK - BAFFLE IN
 DRAIN FIELD/TITLE DEPTH 5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 FT.
 EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 320 FT.
 NUMBER OF TRENCHES 3 ~~ONE SIDEWALL~~ BOTTOM AREA 960 SQ. FT.
 DRYWALL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.
 ABSORBENT AREA SQ. FT.

REMARKS: 6/4/99 OK TO COVER ALL; HOUSE CONN OK (MR)

DATE SYSTEM APPROVED 6/4/99 INSPECTOR M. Ripkin

APPLICATION

PERCOLATION TESTING

A 57313

P _____

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

DISTRICT _____

DATE 10/9/96

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 Frances Devlin Catonsville Builders

ADDRESS 10805 Hickory Ridge Rd Ste 215 PHONE 740-2100
Cal. MD 21024

AGENT OR PROSPECTIVE BUYER Law Design and Development

ADDRESS 10805 Hickory Ridge Rd Ste 215 PHONE 740-2100
Cal. MD 21017

PROPERTY LOCATION:

SUBDIVISION Devlin Property LOT NO. 4

ROAD AND DESCRIPTION Sycamore Run Road
(3798 Championship Drive)

ORIG. PERMIT SIGNED
AND RETURNED 5-6-99
Joseph B. Williams
SFD-4Bum

TAX MAP _____ PARCEL # _____

SIZE OF LOT 10 x 1 acre TYPE BLDG. Single
(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]
(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

1153 1138

0' dark red brown silclm

3.0 dark orange silm
20% Rock

10.0 refusal

1125

bright red silclm very damp

4.0 dull pink salm
Some orange mix

11.0

1127

dark brn silclm

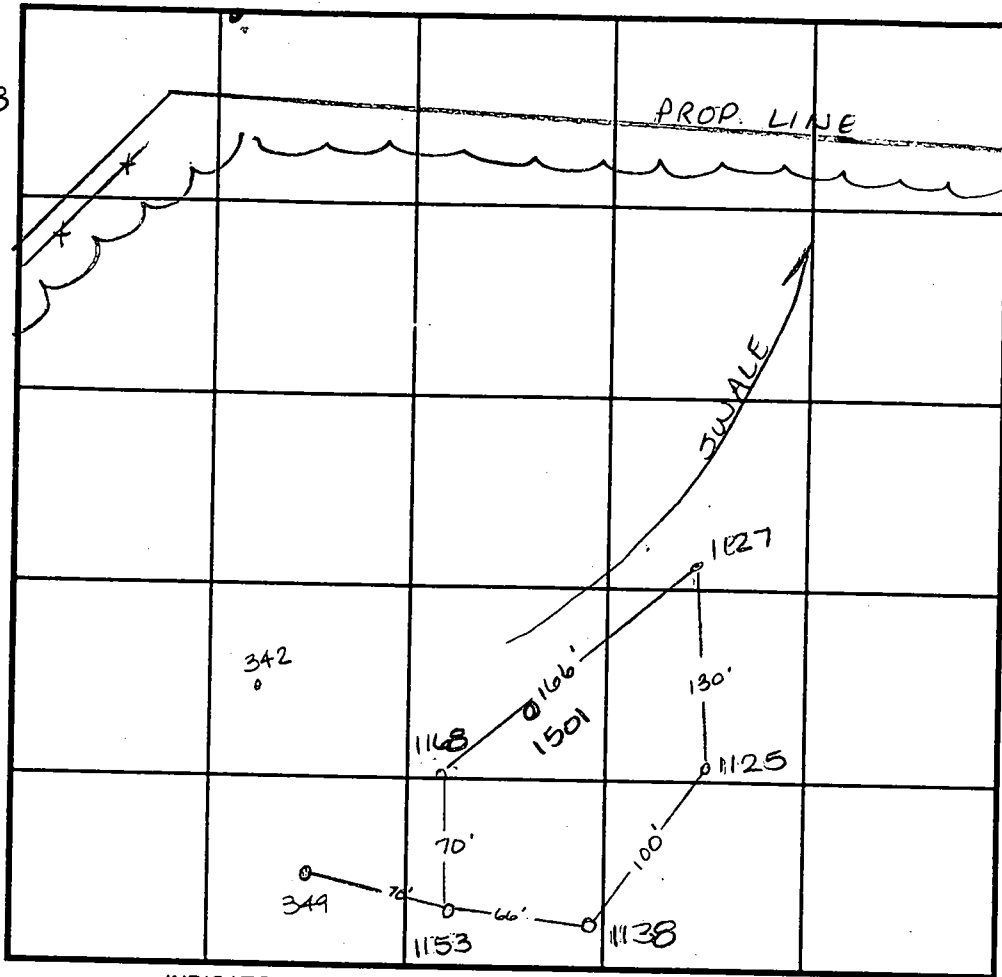
4.0 dark grey silm

micaceous

8.0 mottled micaceous

grey green silm

10.0



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE

1168

0' dark red silclm

3.5 beige tan silm mixed w/ orange salm
10% Rx

11.0

1501

orange brown silclm

3.0 dark orange silclm

5.0 lt pink orange sildry

11.5

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
10-29-96	1153	3.5 V10.0	1:59	2:02	2:02	2:06	4min	
	1138	4.0 V11.5	2:09	2:16	2:16	2:32	16min	
	1125	4.0 V11.0	2:27	>30 min			slow	
	1127	4.0 V10.0	2:27	2:32	2:32	2:42	10min	
	1168	4.0 V11.0	2:53 ³⁰	2:57	2:57	3:06	9min	
1-22-97	1501	Visual to 11.5 - see profile OK					OK	
		Hole open 2 hrs						

REMARKS wet season tested needed

TYPE OF SOIL

TESTED BY Amy McMillen

ALSO PRESENT Don Rauwer

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

TRENCH WIDTH

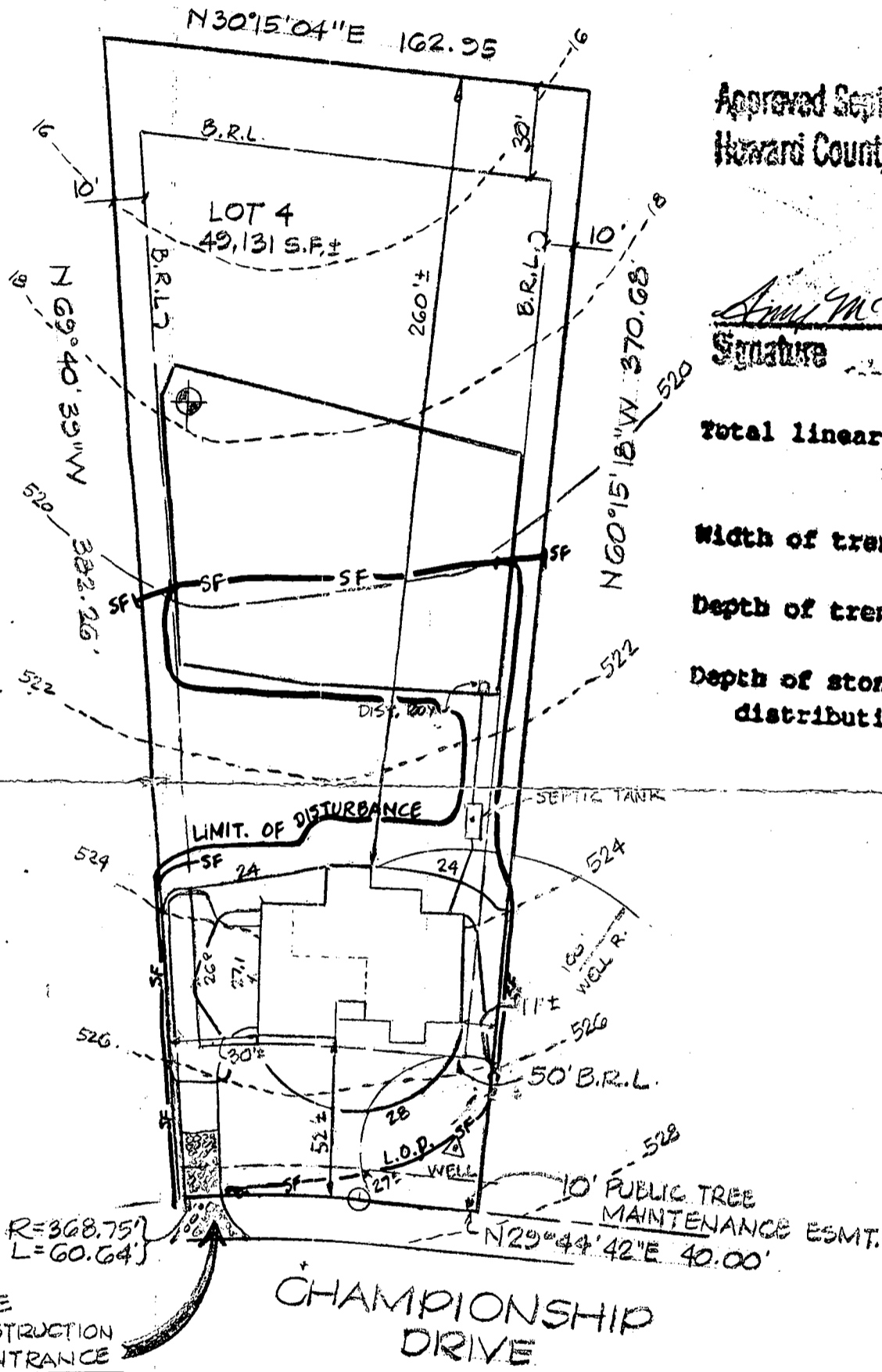
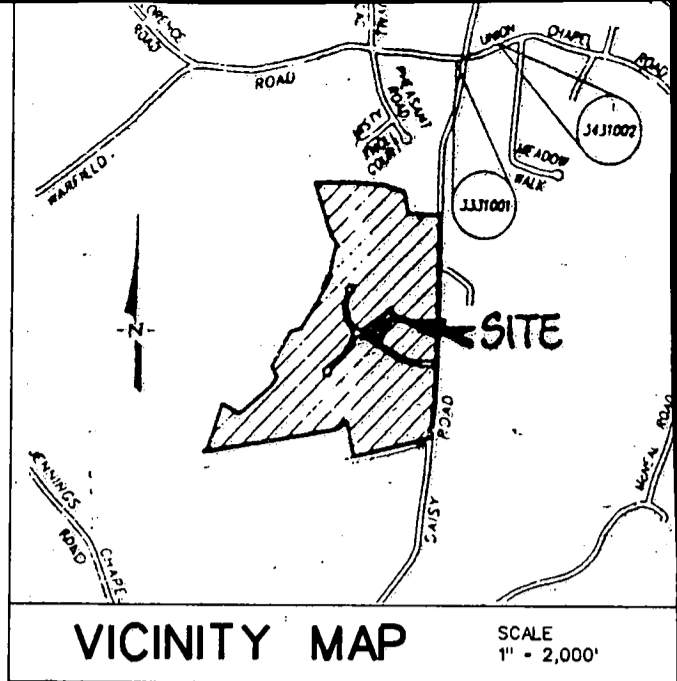
INLET DEPTH

MAXIMUM BOTTOM DEPTH

SQ. FT/BEDROOM

GENERAL NOTES

1. SEPTIC EASMENT SUBJECT TO HOWARD COUNTY HEALTH DEPARTMENT No.
2. PROPOSED 1500 GALLON SEPTIC TANK.
3. A. FIRST FLOOR ELEVATION:
 B. BASEMENT ELEVATION: 521.14
 C. INVERT OF SEPTIC SYSTEM AT HOUSE: 520.0
 D. INVERT AT SEPTIC TANK: 519.50
 E. INVERT OUT AT SEPTIC TANK: 519.30
 F. PROPOSED GRADE OVER SEPTIC TANK: 523.0
 G. INVERT AT DISTRIBUTION BOX: 518.60
 H. EXISTING GROUND OVER DISTRIBUTION BOX: 521.7
4. LENGTH OF TRENCH TO BE DETERMINED AT TIME OF SEPTIC PERMIT ISSUANCE.
5. CONTRACTOR / BUILDER TO VERIFY ELEVATIONS IN FIELD BEFORE BEGINNING ANY CONSTRUCTION.



**Approved Septic System Plan
Howard County Health Department**

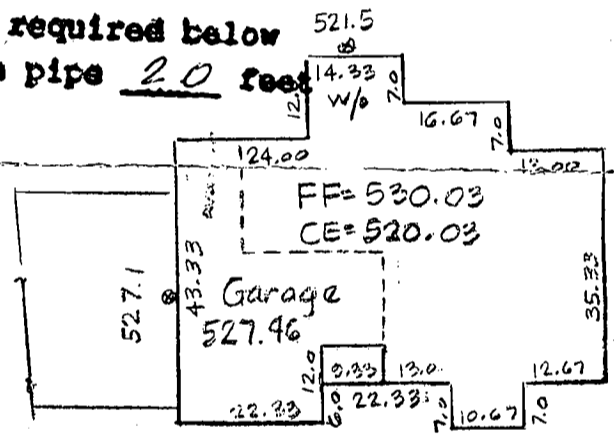
Ann M. Mill 5/6/99
Signature Date

Total linear feet of trench required 320 feet

Width of trench(es) 3.0 feet

Depth of trench(es) 5.0 feet

Depth of stone required below distribution pipe 2.0 feet



PROPOSED DWELLING
Scale: 1" = 30'

GP. 99-181

CLSI

Carroll Land Services
Incorporated

Engineers * Surveyors * Land Development Consultants
Landscape Architects * Environmental Specialists

439 East Main Street Westminster, MD 21157-5539

(410) 876-2017 FAX (410) 876-0009

Surveyed By:

Drawn By: B.D.



Dennis E. Meckley
Property Line Surveyor
Registration No. 10844

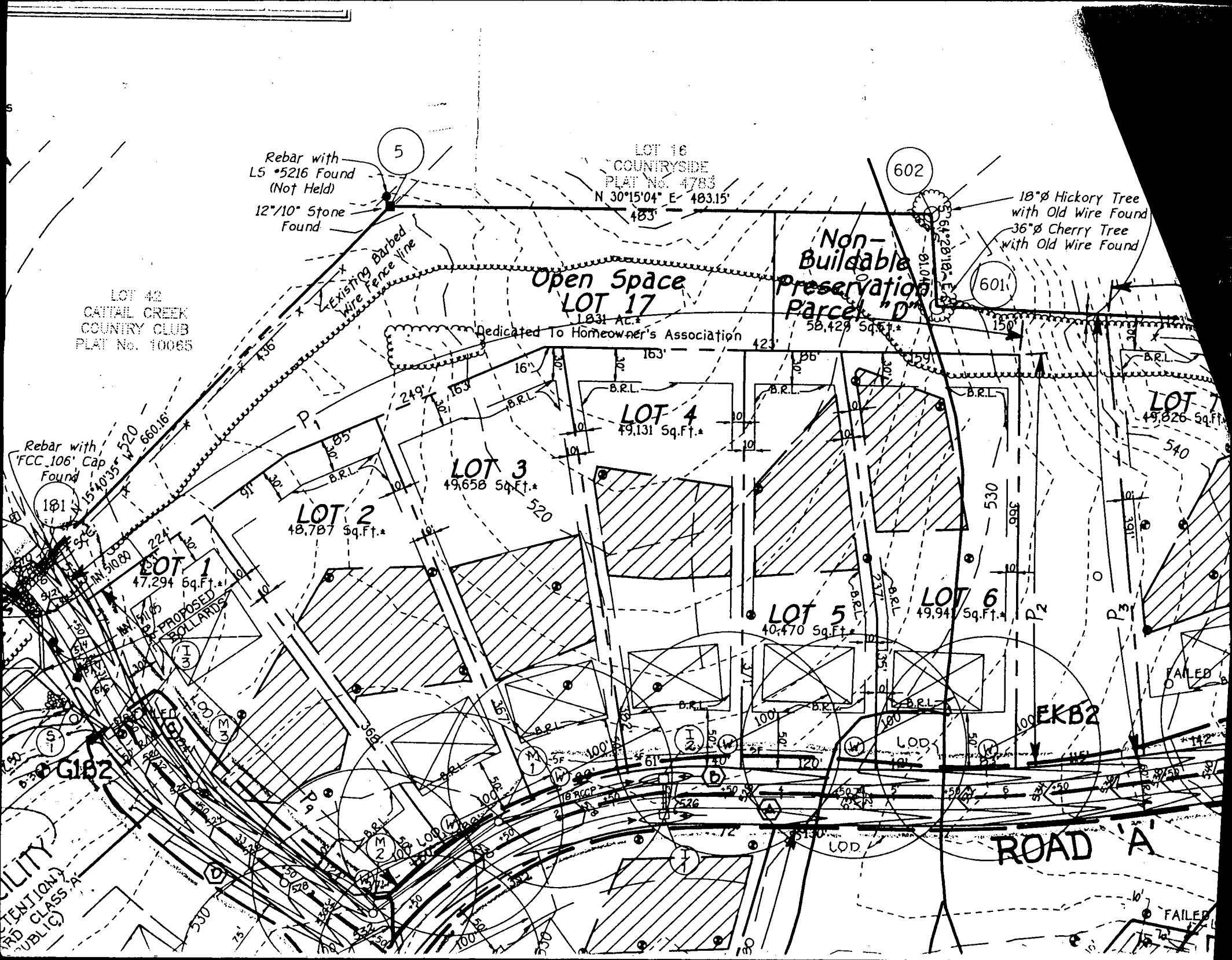
Date: April 9, 1999

Drawing No.: 08201

PLAN TO ACCOMPANY APPLICATION
FOR BUILDING PERMIT
YCAMORE VALLEY II

LOT 4

4TH ELECTION DIST. HOWARD CO., MD. PARCEL 7
TAX MAP 21



LOT 42
CAITAL CREEK
COUNTRY CLUB
PLAT No. 10085

Rebar with
L5 #5216 Found
(Not Held)
12"/10" Stone
Found

LOT 16
COUNTRYSIDE
PLAT No. 4783
N 30°15'04" E- 483.15'
483'

Non-
Buildable
Preservation
Parcel "D"

18" ø Hickory Tree
with Old Wire Found
36" ø Cherry Tree
with Old Wire Found

Open Space
LOT 17
1.83 Ac.*

Dedicated To Homeowner's Association

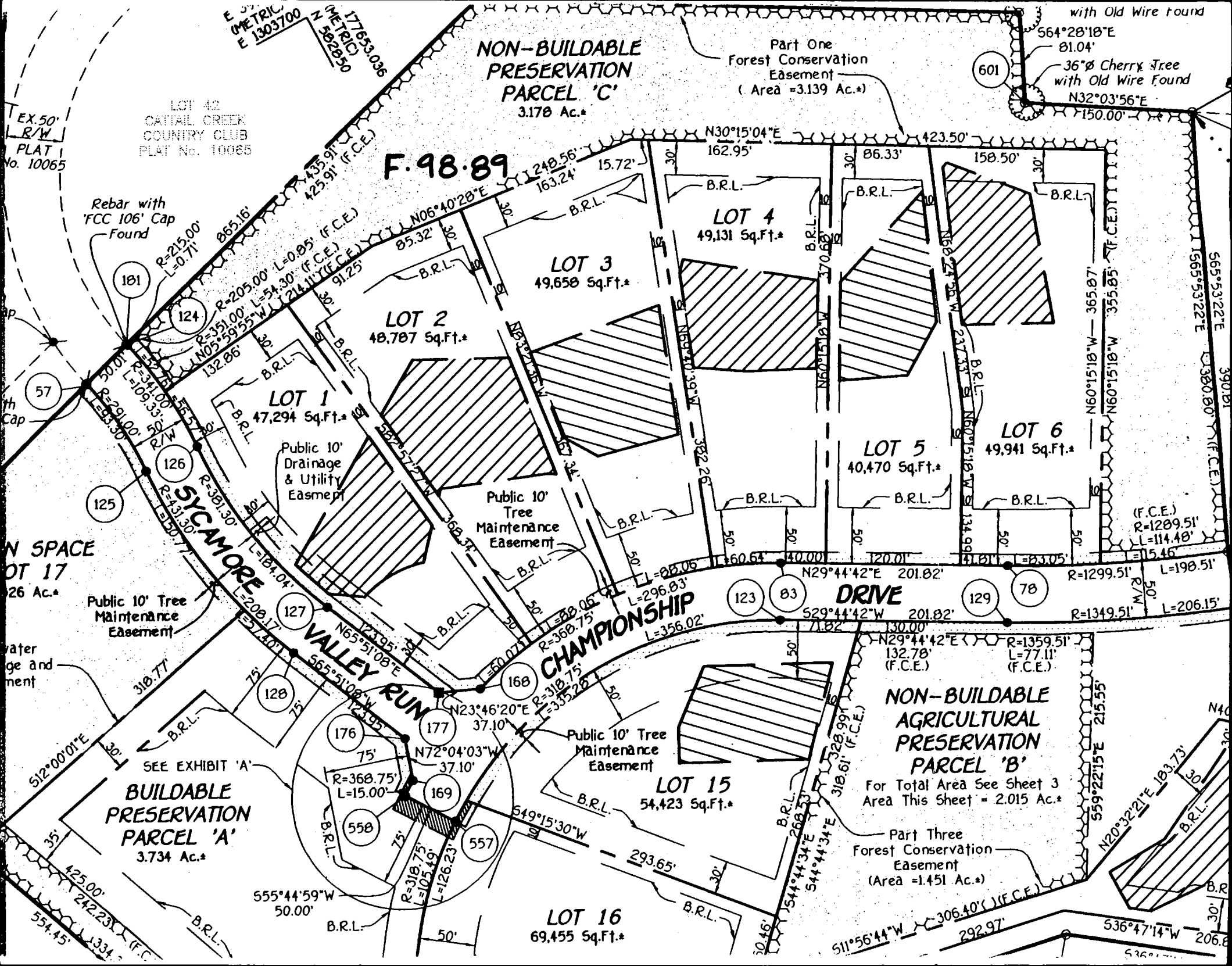
Rebar with
FCC 106" Cap
Found

PROPOSED
ROLLARS

ROAD 'A'

CITY
ATTENTION
PUBLIC CLASS 'A'

FAILED



EX. 50' R/W PLAT No. 10065

LOT 42 CANTAL CREEK COUNTRY CLUB PLAT No. 10065

NON-BUILDABLE PRESERVATION PARCEL 'C'
3.170 Ac.±

Part One Forest Conservation Easement (Area = 3.139 Ac.±)

601

564°28'10"E 81.04'
36"Ø Cherry Tree with Old Wire Found
N32°03'56"E 7150.00'

F. 98.89

LOT 4
49,131 Sq.Ft.±

LOT 3
49,650 Sq.Ft.±

LOT 2
48,787 Sq.Ft.±

LOT 1
47,294 Sq.Ft.±

LOT 5
40,470 Sq.Ft.±

LOT 6
49,941 Sq.Ft.±

IN SPACE LOT 17 26 Ac.±

Public 10' Tree Maintenance Easement

Public 10' Tree Maintenance Easement

CHAMPIONSHIP DRIVE

NON-BUILDABLE AGRICULTURAL PRESERVATION PARCEL 'B'
For Total Area See Sheet 3
Area This Sheet = 2.015 Ac.±

Part Three Forest Conservation Easement (Area = 1.451 Ac.±)

SEE EXHIBIT 'A'
BUILDABLE PRESERVATION PARCEL 'A'
3.734 Ac.±

LOT 16
69,455 Sq.Ft.±

LOT 15
54,423 Sq.Ft.±

Waterage and ment

Public 10' Tree Maintenance Easement

555°44'59"W 50.00'

511°56'44"W 306.40' (F.C.E.)

536°47'14"W 206.8'

C1 04003 SEQUENCE NO. (MDE 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)

FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE

COUNTY NUMBER A57313

ST/CO USE ONLY DATE RECEIVED MM 07 31 99

DATE WELL COMPLETED MM 07 17 98

Depth of Well 22 185' 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-1609

OWNER Cottonsville Homes last name Sycamore Valley Rd first name TOWN Glenwood SUBDIVISION Devlin Prop SECTION LOT 4

WELL LOG Table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), check if water bearing. Includes entries for Top Soil, Sandy, Sand Stone, MICKA, Sand Stone, MICKA.

GROUTING RECORD Form. Includes fields for WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL (Cement, Bentonite Clay), NO. OF BAGS (14), NO. OF POUNDS (1400), GALLONS OF WATER (84), DEPTH OF GROUT SEAL (0 to 30 ft).

CASING RECORD Form. Includes fields for casing types (Steel, Concrete, Plastic, Other), MAIN CASING TYPE (ST), Nominal diameter (6 inch), Total depth (37 feet).

OTHER CASING (if used) Form. Includes fields for diameter and depth.

SCREEN RECORD Form. Includes fields for screen type (Steel, Brass, Bronze, Plastic, Open Hole, Other), SLOT SIZE (1, 2, 3), DIAMETER OF SCREEN (56 to 60 inch).

Administrative fields: NUMBER OF UNSUCCESSFUL WELLS (0), WELL HYDROFRACTURED (Y), CIRCLE APPROPRIATE LETTER (A, E, P).

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...

DRILLERS LIC. NO. MSD116, DRILLERS SIGNATURE, LIC. NO. MSD112, DRILLERS SIGNATURE.

SITE SUPERVISOR (Sign of driller or journeyman responsible for sitework-if different from permittee)

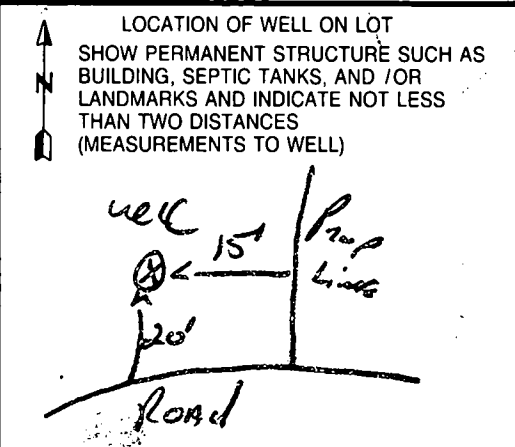
DEPTH (nearest ft.) Table with columns 1-21 and rows A-N. Includes handwritten values: HO 36, 185.

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

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) Form. Includes fields for T (E.R.O.S.), W Q, TELESCOPE CASING, LOG INDICATOR, OTHER DATA.

PUMPING TEST Form. Includes fields for HOURS PUMPED (3), PUMPING RATE (12), METHOD USED TO MEASURE PUMPING RATE (Bucket), WATER LEVEL (28, 30 ft), TYPE OF PUMP USED (Submersible).

PUMP INSTALLED Form. Includes fields for DRILLER WILL INSTALL PUMP (NO), TYPE OF PUMP INSTALLED (Submersible), CAPACITY (31 to 35 GPM), PUMP HORSE POWER (37 to 41), PUMP COLUMN LENGTH (43 to 47 ft), CASING HEIGHT (2 ft below land surface).



FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 94-1609
 Location of property (road) Sycamore Valley Run
 Subdivision Devlin Prop. Lot 4 Block Plat Sec.
 Well Driller Ralph Mayne Owner Catonsville Bldg S

Depth of well 185'
 Distance of measuring point (M.P.) above ground 1'
 Static water level (S.W.L.) below M.P. 28'

I. High rate pumping -- reservoir drawdown

Time pump started 8:00 Pumping rate 12 GPM
 Total time 15 min to reach pumping water level 30 ft. below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes

TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE time to fill <u>5</u> gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)	
8:15	30 <u>H</u>	5 Sec	 	12 <u>GPM</u>	
8:30	30 <u>H</u>	5 Sec		12 <u>GPM</u>	
8:45	30 <u>H</u>	5 Sec		12 <u>GPM</u>	
9:00	30 <u>"</u>	5 "		12 <u>"</u>	
9:15	30 <u>"</u>	5 "		12 <u>"</u>	
9:30	30 <u>"</u>	5 "		12 <u>"</u>	
9:45	30 <u>H</u>	5 Sec		12 <u>GPM</u>	
10:00	30 <u>H</u>	5 Sec		12 <u>GPM</u>	
10:15	30 <u>H</u>	5 Sec		12 <u>GPM</u>	
10:30	30 <u>"</u>	5 "		12 <u>"</u>	
10:45	30 <u>"</u>	5 "		12 <u>"</u>	
11:00	30 <u>H</u>	5 Sec		12 <u>GPM</u>	
11:15	30 <u>H</u>	5 Sec		12 <u>GPM</u>	

B 1 4756 SEQUENCE NO. (MDE USE ONLY) STATE OF MARYLAND PERMIT TO DRILL WELL please print or type STATE PERMIT NUMBER 40-94-1609
1 2 3 6 70 79
 fill in this form completely

OWNER INFORMATION
 Date Received (APA) 06 29 98
8 MM DD YY 13
 Last Name CATTONSVILLE Owner Home's Builders First Name
15 34
 Street or RFD 9025 n. Chevrolet Dr.
36 55
 Town ELLICOTT CITY MD. State MD. Zip 21042
57 70 72 76

LOCATION OF WELL
 B 3 Howard COUNTY
8 21
 SUBDIVISION DEULIN Prop.
23 42
 SECTION 4 LOT 4
44 46 48 50
 NEAREST TOWN GLENWOOD
52 71
 MILES FROM TOWN (enter 0 if in town) 1 M I
73 76 77 78

DRILLER INFORMATION
 Driller's Name RALPH MAYNE License No. MSD16
76 81
 Firm Name Ralph Mayne Well Drilling
 Address 9170 Brown Church Rd. Mt. Airy
 Signature Ralph Mayne Date June 18 1998
57 76

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
 B 4 S
1 2
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
SYCAMORE VALLEY Rm
11 30
 DISTANCE FROM ROAD 900
34 37
 ENTER FT OR MI FT
38 39
 TAX MAP: _____ BLK: _____ PARCEL: _____

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

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
 GEO-THERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
Howard Co COUNTY NAME A 57313 COUNTY NO.
 STATE SIGNATURE _____ INSERT S →
 DATE ISSUED 06 30 98 EXP. DATE 06 30 99
43 MM DD YY 48
 NORTH GRID 522 000 EAST GRID 790 000
50 55 57 63

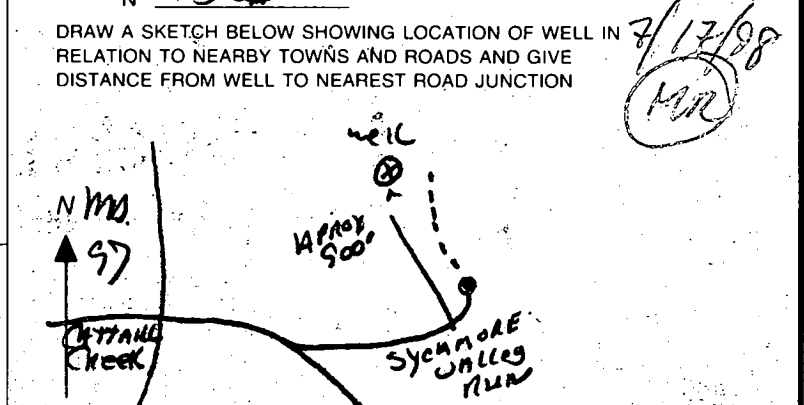
APPROXIMATE DEPTH OF WELL 150 FEET
24 28
 APPROXIMATE DIAMETER OF WELL 6" NEAREST INCH

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
 SOURCES OF DRILLING WATER
 1. well
 2. well
 3. well
 WRITE THE BOX NUMBER FROM THE MAP HERE
 E 790
 N 522
 900000
 900000
 GROUT OR TAG OK
 7/17/98
 MR

METHOD OF DRILLING (circle one)
 BORED (or Augered) AIR-ROTary JETTED ROTARY (Hydraulic Rotary) Jetted & DRIVEN
30 37
 CABLE REVerse-ROTary DRIVE-POINT
 other _____

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-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
 THIS WELL WILL DEEPEM AN EXISTING WELL
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) _____

Not to be filled in by driller (MDE OR COUNTY USE ONLY)
 APPROP. PERMIT NUMBER 40-94-1609
54 63
 PERMIT No. 40-94-1609
70 71 72 73 74 75 76 77 78 79



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 # _____
 Date 6/16/99

Name of Installer GREG C. SPYFOGLE PLUMBING, INC.

Telephone 410-875-0300

License Number 9081

Certified Well Pump Installer _____ Well Driller _____ Registered Plumber

Name of Property Owner CATONSVILLE BORG

Telephone 410-750-1200

Subdivision SYCAMORE VALLEY Lot # 4

Well Tag # HO-94-1609

Site Address 3788 CHAMPIONSHIP DRIVE

- | Pump | Motor | Pitless Adapter |
|---|--|-------------------------|
| 1. Type | 1. Horsepower <u>1/2 HP</u> | 1. Make <u>HARVARD</u> |
| a. Deep well jet _____ | 2. RPM _____ | 2. Model # <u>PT200</u> |
| b. Shallow well jet _____ | 3. Voltage _____ | 3. Depth <u>42"</u> |
| c. Submersible <input checked="" type="checkbox"/> | a. 110 _____ | |
| 2. Make <u>JACUZZI</u> | b. 220 <input checked="" type="checkbox"/> | |
| 3. Model # <u>SANDHANDLER</u> | | |
| 4. Capacity _____ GPM | | |
| 5. Pump exceeds well capacity Yes _____ No <input checked="" type="checkbox"/> | | |
| 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 <input checked="" type="checkbox"/> Other _____ | | |

- | Tank | Piping | Well data |
|--|--|---|
| 1. Capacity <u>WK203</u> | 1. Type <u>POLYETHYLENE</u> | 1. Depth <u>105</u> ft. |
| 2. Pressure relief valve? <u>YES</u> | 2. Size <u>1"</u> | 2. Yield <u>12</u> GPM |
| <u>WPI - Pitless adapter with line OK @ 3 1/2 ft</u> | 3. NSF and/or BOCA Code approved <input checked="" type="checkbox"/> | 3. Static water level _____ ft. |
| <u>PVC Casing 2 pieces OK AP 6/17/99</u> | 4. Depth of supply line <u>42"</u> | 4. Will water supply be disinfected by installer? <u>No</u> |

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.

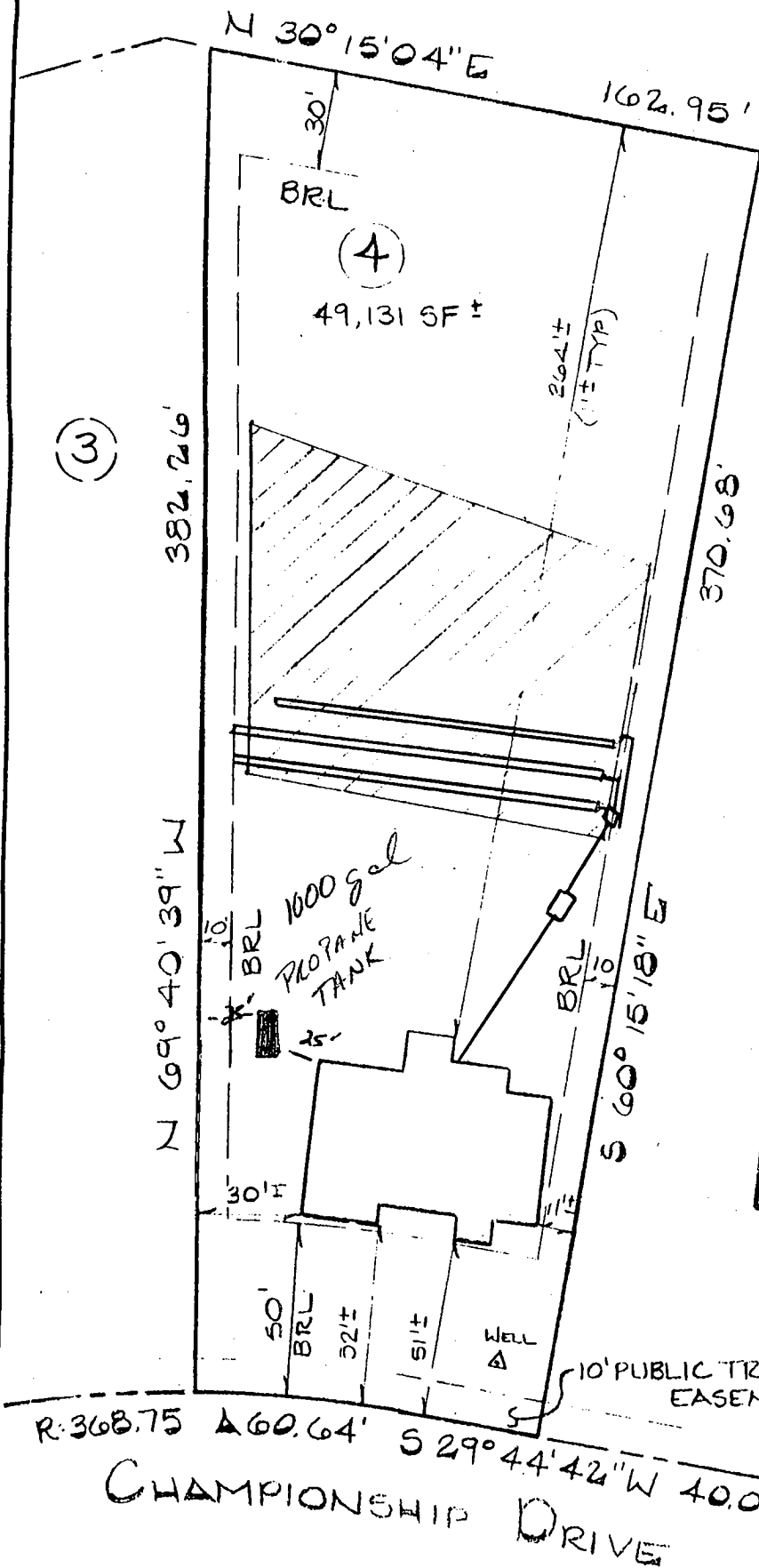
Signature of Applicant: _____

Date: 6/16/99

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

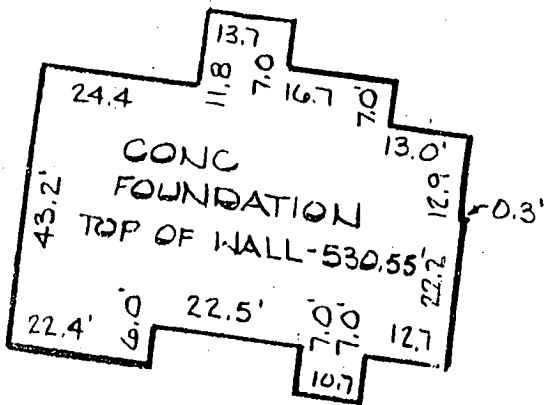
PART ONE
FOREST CONSERVATION
EASMENT

mailed to inspector
7/29/99



10/5/99
Shown propane
tank location will
(5) have no impact on
the existing well or
septic. *A*

DETAIL SCALE
1" = 30'



LOCATION DRAWING

LOT 4

SYCAMORE VALLEY II
4TH ELEC DIST. CARROLL CO MD

I hereby certify that I have surveyed the property shown hereon for the sole purpose of locating the improvements. This plan is a benefit to the consumer only in so far as it is required by a lender or a title insurance company or its agent in connection with contemplated transfer, financing or refinancing. It is not to be relied upon for the establishment of boundary, easement or right-of-way lines for any reason, such as the location of fences, garages, buildings, or other existing or future improvements.

By Dennis E. Meckley Date 6/3/99
Dennis E. Meckley Property Line
Surveyor No. 10844

The improvements shown hereon lie within Flood Hazard Zone "C", (area of minimal flooding), as designated on National Flood Insurance Program Flood Insurance Rate Map, Panel 22 of 45 Community-Panel Number 240044/0022 prepared by the Federal Emergency Management Agency.

CLSI

Carroll Land Services
Incorporated
Engineers • Surveyors • Land Development Consultants
Landscape Architects • Environmental Specialists
439 East Main Street Westminster, MD 21157-3539
(410) 876-2017 FAX (410) 876-0009

DRAWN BY:	J.R.
DESIGN BY:	
REVIEW BY:	D.E.M.
DATE:	6-2-99
SCALE:	1" = 50'
JOB NO.:	98201
SHEET:	1 of 1

Building Address 3788 Championship Dr.
Glenwood, MD 21738

Suite/Apt. #: _____ SDP/WP/Petition #: _____

Census Tract 6040 Subdivision Spanaway Valley II

Section _____ Area 2 Lot 4

Tax Map 21 Parcel 7 Grid 10

Zoning EDD Map Coordinates 9A9 Lot size 49,131

Property Owner's Name Steve Edmanson

Address 3788 Championship Dr

City Glenwood State MD Zip Code 21738

Home Phone 410-489-1180 Work Phone 410-757-1208

Applicant's Name & Mailing Address, (if other than stated hereon): _____

Phone 410-757-1200 Fax 410-750-2596

Existing Use SFD

Proposed Use add deck

Estimated Construction Cost \$ 3000

Description of Work 18x16, 16x16, 4x14 deck
w/2 sets of steps, treated lumber
48x16 Trex

Contractor Company OWNER

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

License No. _____

Phone _____ Fax _____

Occupant or Tenant owner

Contact Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Engineer or Architect Company OWNER

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

Building Characteristics	Utilities
Height: _____	Water Supply: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private
No. of stories: _____	Sewage Disposal: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Construction type: _____ <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <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 # of Heads _____

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: _____ <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
Depth _____ Width _____	Sewage Disposal: _____ <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
1st floor: _____	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
2nd floor: _____	Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Basement: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/>	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R Other: _____
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: _____	
State Certified Modular _____	
Manufactured Home _____	

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 THEREIN; (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 PURPOSES OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

[Signature]
 Applicant's Signature
M. Waller / Catonsville Builders
 Title/Company

Sandy Stanton
 Print Name
3/30/00
 Date

Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
 ** PLEASE WRITE NEATLY AND LEGIBLY. **
 - FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL
<input checked="" type="checkbox"/> Land Development, DPZ		
<input checked="" type="checkbox"/> State Highways		
<input checked="" type="checkbox"/> Building Official		
<input checked="" type="checkbox"/> Dev. Engineering, DPZ		
<input checked="" type="checkbox"/> Health	<u>3/30/00</u>	<u>Steven R. Krug</u>
<input checked="" type="checkbox"/> Fire Protection		

DPZ SETBACK INFORMATION

Front: 50' Min

Rear: 30' Min

Side: 10' Min

Side St.: 10' Min

All minimum setbacks met? YES NO

Is Entrance Permit required? YES NO

Historic District? YES NO

Lot Coverage for New Town Zone _____

SDP/Red-line approval date _____

PROPERTY ID: 40927

Filing fee	\$ _____
Permit fee	\$ _____
Excise tax	\$ _____
Sub-total paid	\$ _____
Add'l permit fee	\$ _____
TOTAL FEES	\$ _____
Balance due	\$ _____
Check #	<u>1786</u>
Validation #	<u>30587</u>

Accepted by [Signature]

CONTINGENCY CONSTRUCTION START:

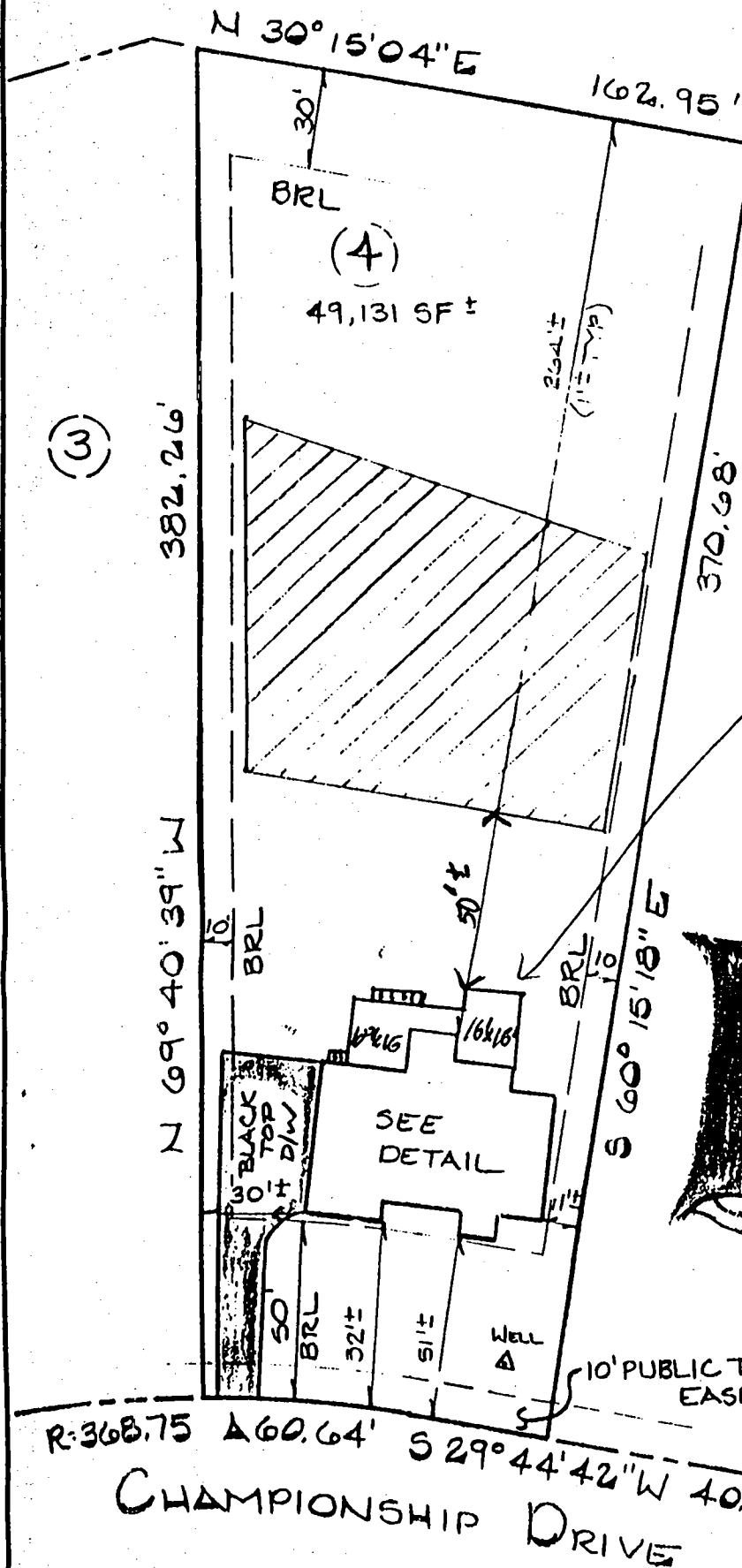
ONE STOP SHOP:

PART ONE
FOREST CONSERVATION
EASMENT

DECK
3788

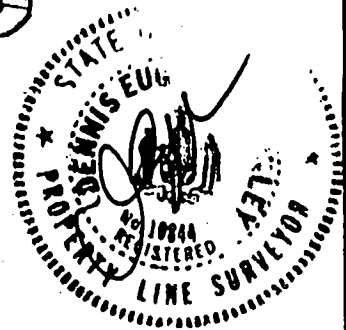
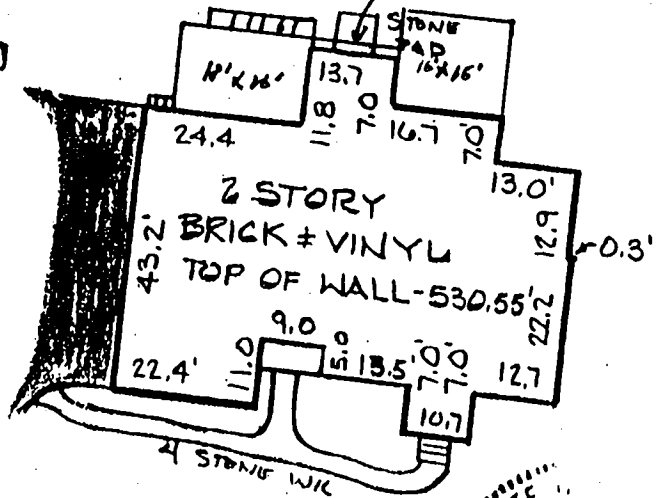
CHAMPIONSHIP DRIVE

GLENWOOD MD.
21738



3/30/00
Proposed Deck
Addition no real
impact to well or
septic
keep 4\" cleanout
accessible

DETAIL SCALE
1" = 30' 4\"/>



R: 368.75 A 60.64' S 29° 44' 42\"/>

LOCATION DRAWING
LOT 4

SYCAMORE VALLEY II
4TH ELEC DIST. CARROLL CO MD

UPDATE 10-28-99

I hereby certify that I have surveyed the property shown hereon for the sole purpose of locating the improvements. This plan is a benefit to the consumer only in so far as it is required by a lender or a title insurance company or its agent in connection with contemplated transfer, financing or refinancing. It is not to be relied upon for the establishment of boundary, easement or right-of-way lines for any reason, such as the location of fences, garages, buildings, or other existing or future improvements.

By Dennis E. Meckley Date 6/3/99
Dennis E. Meckley Property Line
Surveyor No. 10844

The improvements shown hereon lie within Flood Hazard Zone "C", (area of minimal flooding), as designated on National Flood Insurance Program Flood Insurance Rate Map, Panel 22 of 45 Community-Panel Number 240044 prepared by the Federal Emergency Management Agency.

CLSI

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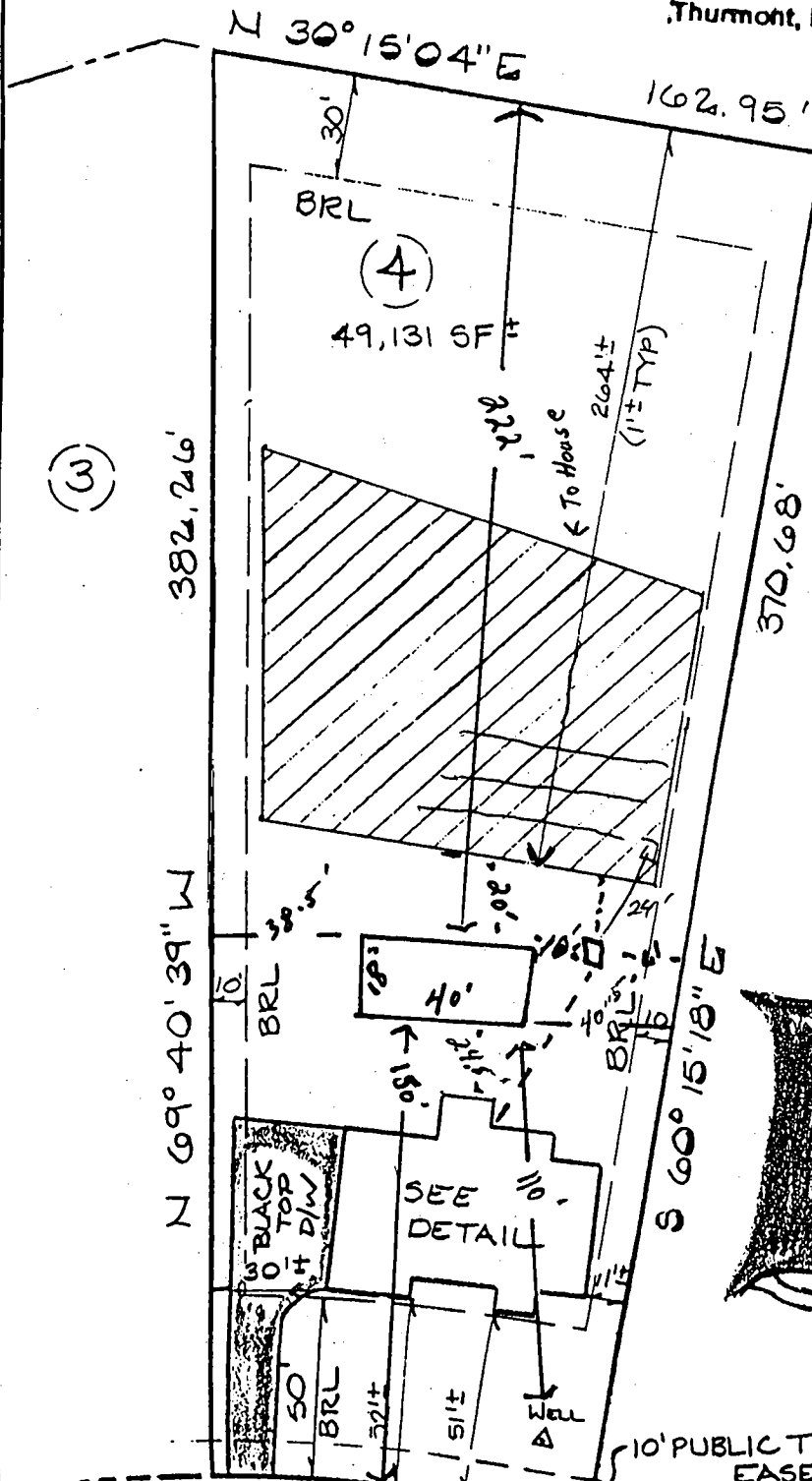
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PART ONE
FOREST CONSERVATION
EASMENT

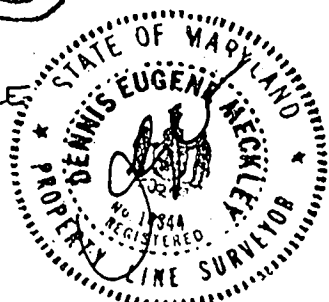
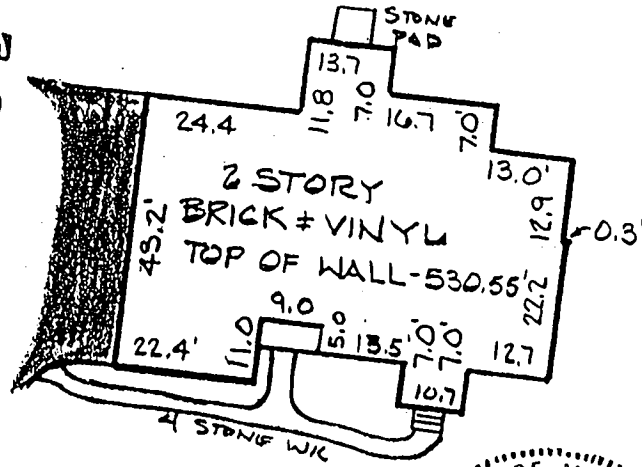
Tri-County Pools, Inc
13410 Moser Road
Thurmont, MD 21788

18' x 40' concrete
3' to 8' deep

House 24.5
Well 110'
Septic Tank 10'
Septic Field 20'
Left 38.5
Right 40.5
Rear 222'
Front 150'



(5) B00134868 (Pool)
3788 Championship Dr
SYCAMORE VALLEY II 684 Sect 2
No Conflict w/ well or septic
Recommend Approval.
DETAIL SCALE App 3/14/02
1" = 30'



R: 368.75 Δ 60.64' S 29° 44' 42" W 40.00
CHAMPIONSHIP DRIVE

LOCATION DRAWING
LOT 4

SYCAMORE VALLEY II
4TH ELEC DIST. CARROLL CO MD

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By Dennis E. Meckley Date 6/3/99
Dennis E. Meckley Property Line
Surveyor No. 10844

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