

LAYOUT 7/18/02 2:00 INSP 4 _____
 INSP 2 7/19/02 12-1 INSP 5 _____
 INSP 3 _____ INSP 6 _____

03-334023

ISSUE DATE: 7/15/2002
 APPROVAL DATE: 7/19/02

**PERMIT
INDEXED**

P 517365
 A 59868-FF

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

Fogles Septic Clean, Inc IS PERMITTED TO INSTALL ALTER
 ADDRESS: 580 Obrecht Road PHONE NUMBER: 410-795-5670
 SUBDIVISION: The Paddocks LOT NUMBER: 29
 ADDRESS: 13700 Bold Venture Drive PROPERTY OWNER: Pulte Homes, Inc.
 SEPTIC TANK CAPACITY (GALLONS): 1250 OUTLET BAFFLE FILTER REQUIRED
 PUMP CHAMBER CAPACITY (GALLONS): N/A COMPARTMENTED TANK REQUIRED
 NUMBER OF BEDROOMS: 4
 SQUARE FEET PER BEDROOM: 180
 LINEAR FEET OF TRENCH REQUIRED: 255 HOUSE SERVED BY PUBLIC WATER

TRENCHES:	Trench to be 3.0 feet wide. Inlet 3.5 feet below original grade. Bottom maximum depth 5.5 feet below original grade. Effective area begins at 4.0 feet below original grade. 2.0 feet of stone below distribution pipe.
LOCATION:	Place the distribution box approximately 50' from the upper corner easement stake (as shown on the building permit plan).
NOTES:	Trenches to be 10' center to center.

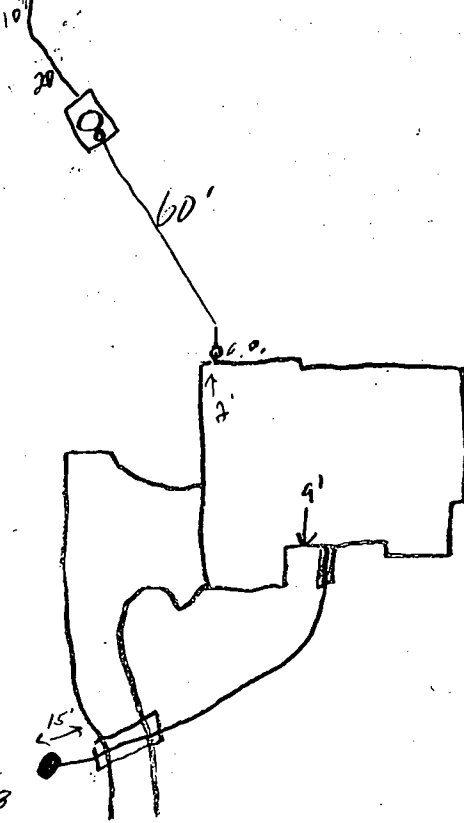
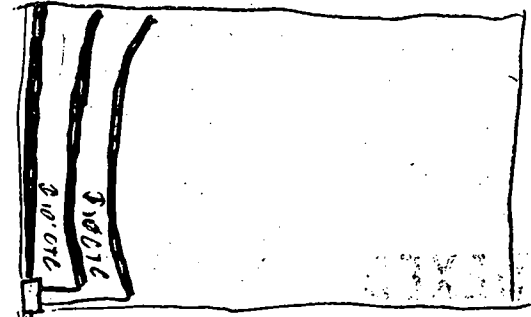
PLANS APPROVED: Brian Baker *OK 5/2/02* (SD) DATE: 4/15/2002

NOTES: PERMIT VOID AFTER 2 YEARS
 CONTRACTOR IS RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
 WATERTIGHT SEPTIC TANKS REQUIRED
 ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL UNLESS SPECIFICALLY AUTHORIZED
 MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS UNLESS SPECIFICALLY AUTHORIZED
 CONTRACTOR RESPONSIBLE FOR COMPLIANCE WITH APPLICABLE REGULATIONS, GUIDELINES AND THE TERMS OF THIS PERMIT

**NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS
 RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM
 PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT
 ALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM**

A59868-FF

80' 80' 80'
NOT TO SCALE



HD-94-2558

Bold Venture Drive ~~ROAD~~

TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
3	3.5	5.5
NUMBER OF TRENCHES		3
TOTAL LENGTH		240'
ABSORPTION AREA		720 sq
DISTRIBUTION BOX LEVEL		✓
DISTRIBUTION BOX BAFFLE		✓
DISTRIBUTION BOX PORT		—

SEPTIC TANK DATA	
SEPTIC TANK 1 LEVEL	✓
CAPACITY	1250 GAL
SEAM LOC	Top
TANK LID DEPTH	2'
BAFFLES	✓
BAFFLE FILTER	—
MANHOLE LOC	Center
6" PORT LOC	Front
WATERTIGHT TEST	—
SEPTIC TANK 2 LEVEL	—
CAPACITY	— GAL
SEAM LOC	—
TANK LID DEPTH	—
BAFFLES	N/A
BAFFLE FILTER	—
MANHOLE LOC	—
6" PORT LOC	—
WATERTIGHT TEST	—

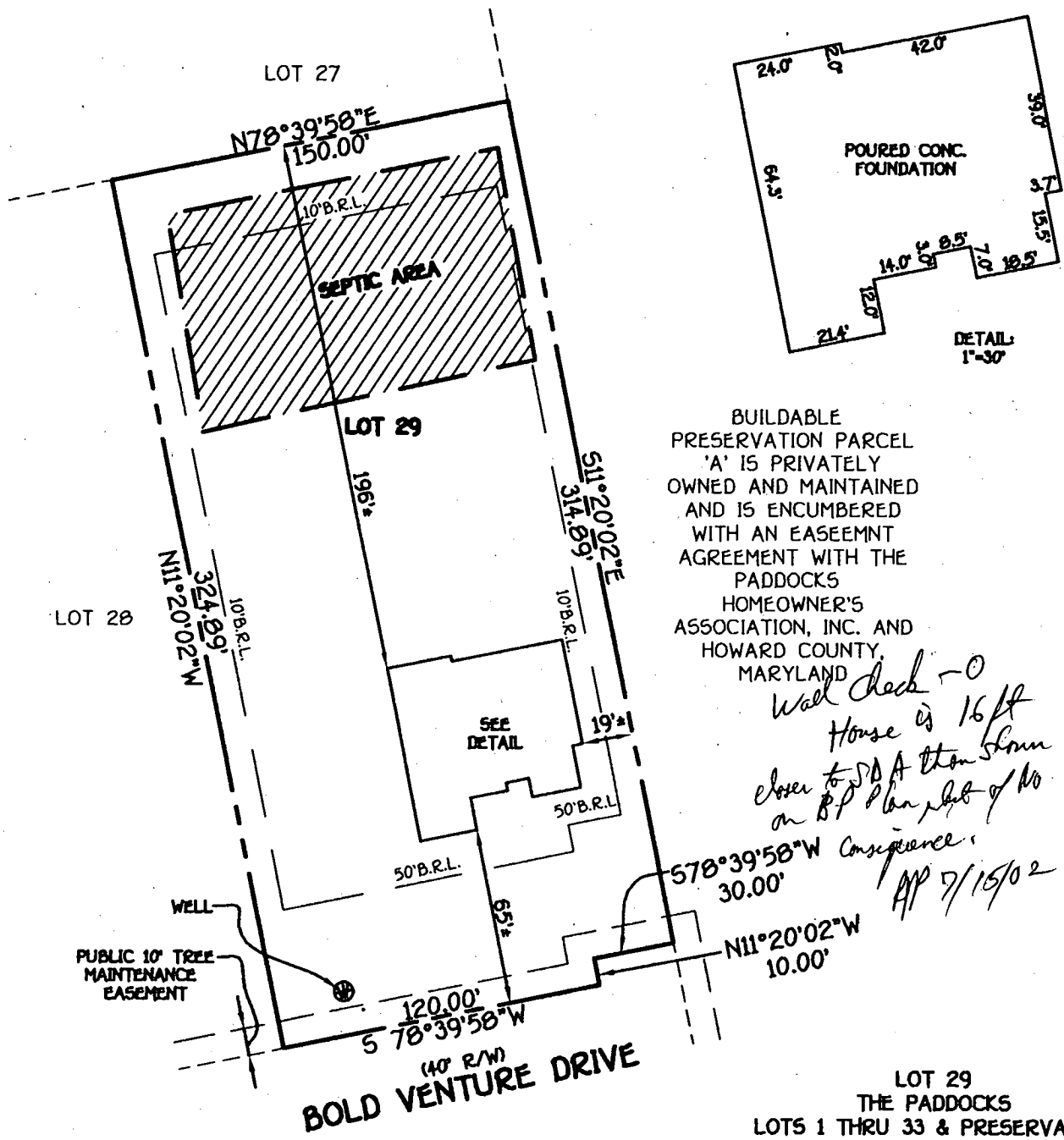
PRE-CONSTRUCTION 7/18/02 Lot staked contour met as shown, OK to run (3) 80' trench on contour, 10' CTC (SD)

INSTALLATION 7/19/02 OK to cover all work (SD)

FINAL INSPECTOR [Signature] DATE OF APPROVAL 7/19/02

GENERAL NOTES:

- 1) THIS LOCATION DRAWING IS PREPARED FOR THE BENEFIT OF THE CLIENT SIGNING THE HOUSE LOCATION SURVEY APPROVAL FORM INsofar AS IT IS REQUIRED BY A LENDER OR TITLE INSURANCE COMPANY OR ITS AGENTS IN CONNECTION WITH THE COMTEMPLATED TRANSFER, FINANCING OR REFINANCING OF THE PROPERTY SHOWN HEREON. UNLESS INDICATED AS BEING A BOUNDARY SURVEY, THIS LOCATION DRAWING IS NOT INTENDED FOR USE IN THE ESTABLISHMENT OF PROPERTY LINES AND IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATIONS OF FENCES, GARAGES, BUILDINGS OR OTHER EXISTING OR FUTURE IMPROVEMENTS. AS A RESULT, THIS LOCATION DRAWING DOES NOT PROVIDE FOR ACCURATE IDENTIFICATION OF PROPERTY LINES, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING FOR RE-FINANCING.
- 2) SUBJECT PROPERTY IS SHOWN IN ZONE C ON THE NATIONAL FLOOD INSURANCE PROGRAM FLOOD INSURANCE RATE MAP OF HOWARD COUNTY, MARYLAND, COMMUNITY PANEL No. 2400440012 B EFFECTIVE DEC. 4, 1986.
- 3) THE OFFSETS FROM BUILDING LINE TO PROPERTY LINE AS SHOWN ON THE PLAT HEREON ARE TO AN ACCURACY OF PLUS OR MINUS 1' (+)
- 4) NO TITLE REPORT FURNISHED. SUBJECT TO ALL EASEMENTS, RIGHTS OF WAY AND CONDITIONS OF RECORD.



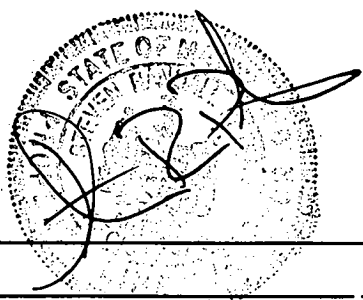
BUILDABLE PRESERVATION PARCEL 'A' IS PRIVATELY OWNED AND MAINTAINED AND IS ENCUMBERED WITH AN EASEMENT AGREEMENT WITH THE PADDOCKS HOMEOWNER'S ASSOCIATION, INC. AND HOWARD COUNTY, MARYLAND

*Well check - 0
House is 16ft
closer to SDA than shown
on BP plan plat of No.
Consequence.
AP 7/15/02*



LOT 29
THE PADDOCKS
LOTS 1 THRU 33 & PRESERVATION PARCELS 'A' THRU 'B'
(A SUBDIVISION OF LIBER No. 5006 AT FOLIO 347 AND LIBER No. 440 AT FOLIO 463)
THIRD ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
PLAT No. 14483
B.R.L.=BUILDING RESTRICTION LINE
TOP OF FOUNDATION ELEV. 618.2±

FISHER, COLLINS & CARTER, INC.
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS
CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE
ELLCOTT CITY, MARYLAND 21042
(410) 461 - 2955



PROFESSIONAL LAND SURVEYOR DATE 7/02/02
REG. # 582

HOUSE LOCATION DRAWING

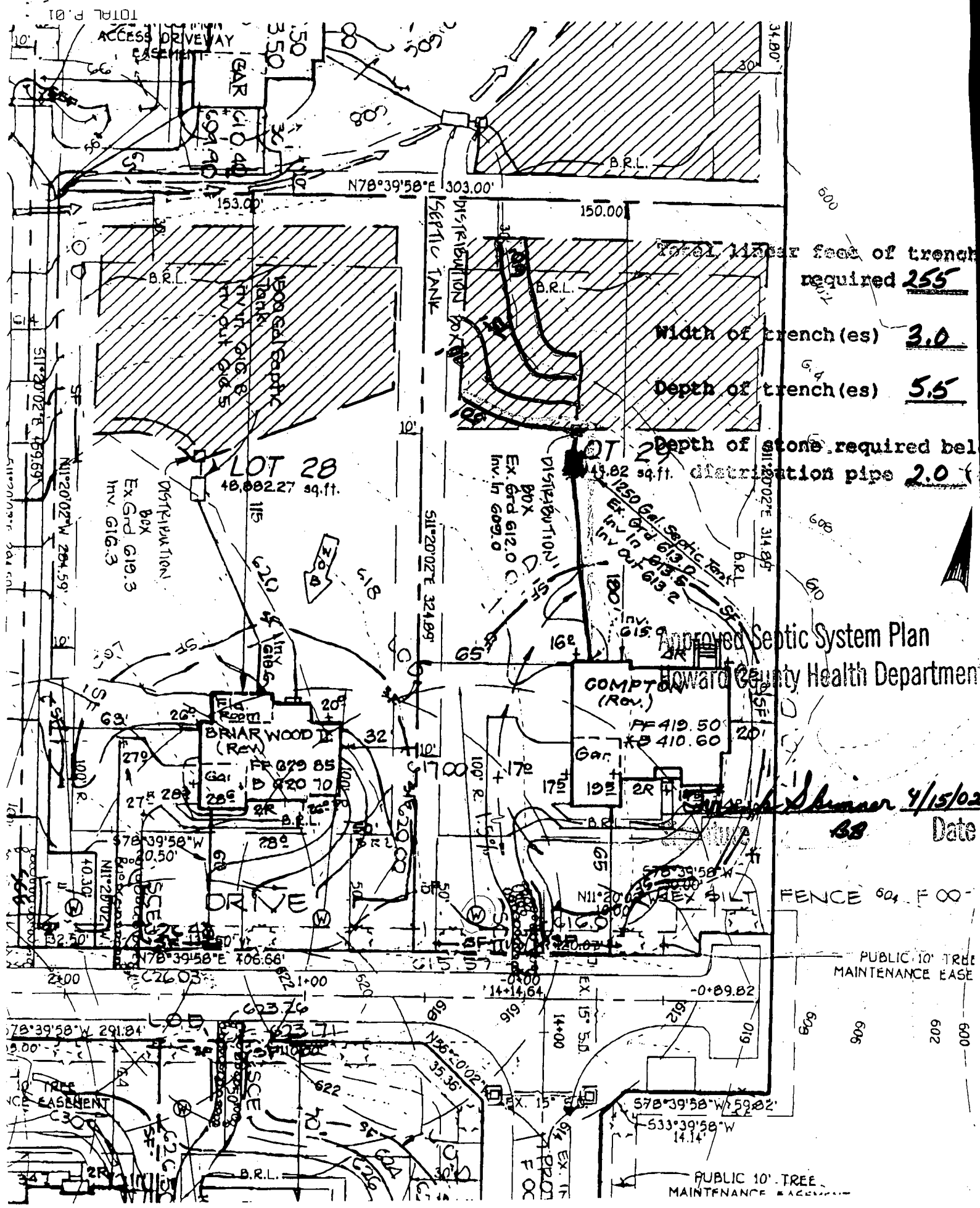
FOUNDATION LOCATION: 6/28/02
FINAL LOCATION: _____
BOUNDARY SURVEY: _____

SCALE: 1"=60'
DATE: 7/02/02
DRAWN BY: D.B.
CHECKED BY: _____
PROJECT No.: 30664

Lot 29 Paddocks

4-15-02
Shelley OK
Shelley

13700 Bold Venture Drive



Total linear feet of trench required **255**
 Width of trench (es) **3.0**
 Depth of trench (es) **5.5**
 Depth of stone required below distribution pipe **2.0**

Approved Septic System Plan
 Howard County Health Department

Shelley 4/15/02
 BB Date

FENCE 60' F 00'

PUBLIC 10' TREE MAINTENANCE EASE

PUBLIC 10' TREE MAINTENANCE EASE

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
WATER AND SEWERAGE PROGRAM
TEL: (410)313-2640 FAX: (410)313-2648

Information Form for the Installation of the Well Pump, Pitless Adapter, and Supply Piping

NOTE: The installer is responsible for requesting an inspection prior to 9 am on the day of the desired inspection. No work is to be covered until approved by the Health Department. All installations must comply with the National Standard Plumbing Code (NSPC, as amended locally) and COMAR 26.04.04 (MD Well Construction Regulations). Submission of a complete form is required prior to Use and Occupancy approval.

Company Name: Fogles Well Drilling Telephone #: 410-795-5670
Address: 580 Obrecht Rd
Stylesville, Md 21154

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer

License # and name of individual responsible for the field installation:
Name (Print): Allen Compton License#: MSD009

*A licensed individual must perform the actual installation. Apprentices must be under the supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification. Unlicensed individuals may be reported to the appropriate licensing agency.

Name of Property Owner: Prole Telephone #: _____
Subdivision: The Addocks Lot #: 29 Well Tag #: HO 94-2538
Site Address: 13700 Bold Venture Dr

Submersible Pump Data

Make: Goulds Brunel
Model #: 85B07
Pump Capacity: 7 GPM
Well Yield: 15 GPM

Pitless Adapter

Make: Campbell
Model #: _____
Depth: 42" (36" min)
NSF/WSC approved: yes

Well Cap and Electric Conduit

Two piece watertight cap: yes
Screened, vented well cap: yes
Cap secured to casing: yes
Conduit min 1 1/2" B.G.: yes
Conduit secured to well cap: yes

Depth of well encountered at time of pump installation: 302 (feet)

If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4

Torque arrestors, Cable guards, or other acceptable method used - Must circle one

Safety rope, if used, attached to brass rope adapter or other acceptable method inside of well casing N/A

Piping to house

Type: 1" Black Plastic
PSI: 160 (160 psi min)
Depth of supply line: 42 (36" min)

House Connection

PVC sleeve to undisturbed soil at wall penetration: yes
Approximate length of sleeve: yes
Sleeve caulked and sealed properly: yes

The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Signature of company representative responsible for installation: _____ date: 8/27/02

For Health Department Use Only - Not to be completed by Installer

Date Insp. Requested: 8-14-02 Date Insp. Approved: 8/14/02 Inspector: (Signature)
Inspection Data: Pitless adapter watertight & water supply line at least 36" below grade ✓
Two piece cap installed and attached to casing securely ✓
Elec. conduit extends at least 18" below grade/attached to cap properly ✓
Safety rope not seen outside of well cap/casing ✓
Correct well tag attached properly and casing 8" above finished grade ✓
Water supply line sleeved adequately at house connection ✓
Adequate grout observed below pitless adapter ✓

C1 **07605** SEQUENCE NO. (MDE USE ONLY)

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

THIS REPORT MUST BE SUBMITTED AFTER WELL IS COMPLETED.
 COUNTY NUMBER **13**

ST/CO USE ONLY DATE Received MM DD YY 8 13
 DATE WELL COMPLETED MM DD YY 02 09 00
 Depth of Well 22 **300** 26 (TO NEAREST FOOT) *ck/cw 4/27/00*
 PERMIT NO. FROM "PERMIT TO DRILL WELL" **H0-94-2558**
 28 29 30 31 32 33 34 35 36 37

OWNER **MOBBERY** **GATCH**
 STREET OR RFD **PFEFFERKONN RD** TOWN **CLEVELG**
 SUBDIVISION **MOBBERY PROPERTY** SECTION _____ LOT **29**

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	
over burden	0	53	
Gray	53	105	
white	105	106	✓
Limestone	106	285	
white	285	286	✓
Limestone	286	300	

GROUTING RECORD yes no
 WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**
 TYPE OF GROUTING MATERIAL (Circle one)
 CEMENT **CM** BENTONITE CLAY **BC**
 NO. OF BAGS **29** NO. OF POUNDS **2726**
 GALLONS OF WATER **174**
 DEPTH OF GROUT SEAL (to nearest foot)
 from **0** ft. to **56** ft.
 (enter 0 if from surface)
 48 TOP 52 54 BOTTOM 58

CASING RECORD
 casing types insert appropriate code below
ST **CO**
 STEEL CONCRETE
PL **OT**
 PLASTIC OTHER
 MAIN CASING TYPE **ST** Nominal diameter top (main) casing (nearest inch!) **06** Total depth of main casing (nearest foot) **61**
 60 61 63 64 66 70

OTHER CASING (if used)
 diameter inch depth (feet) from to
 E A C H I N G

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

C 2 DEPTH (nearest ft.)
 1 **HO** **56** **300**
 2
 3
 4
 5
 6
 7
 8
 9
 10
 11
 12
 13
 14
 15
 16
 17
 18
 19
 20
 21
 22
 23
 24
 25
 26
 27
 28
 29
 30
 31
 32
 33
 34
 35
 36
 37
 38
 39
 40
 41
 42
 43
 44
 45
 46
 47
 48
 49
 50
 51
 52
 53
 54
 55
 56
 57
 58
 59
 60
 61
 62
 63
 64
 65
 66
 67
 68
 69
 70
 71
 72
 73
 74
 75
 76
 77
 78
 79
 80

C 3
PUMPING TEST
 HOURS PUMPED (nearest hour) **03**
 8 9
 PUMPING RATE (gal. per min.) **15**
 11 15
 METHOD USED TO MEASURE PUMPING RATE **15GL**
 WATER LEVEL (distance from land surface)
 BEFORE PUMPING **25** ft.
 17 20
 WHEN PUMPING **61** ft.
 22 25
 TYPE OF PUMP USED (for test)
A air **P** piston **T** turbine
 27 27 27
C centrifugal **R** rotary **O** other (describe below)
 27 27 27
J jet **S** submersible
 27 27

PUMP INSTALLED
 DRILLER INSTALLED PUMP (CIRCLE) (YES or NO) YES **NO**
 IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.
 TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29. **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
 49 below } **01** (nearest foot)
 49 50 51

LOCATION OF WELL ON LOT
 SHOW PERMANENT STRUCTURES AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)
 NO Survey States

NUMBER OF UNSUCCESSFUL WELLS: _____
 WELL HYDROFRACTURED yes no **Y** **N**

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 LIC. NO. **M 3 D 0 0 9**
Allen Compton
 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)
 LIC. NO. **D**

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68 _____
 MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)
 T (E.R.O.S.) W Q
 70 72 74 75 76
 TELESCOPE CASING LOG INDICATOR OTHER DATA

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

B 1 19896

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL please print or type

STATE PERMIT NUMBER

Ho-94-2558 fill in this form completely

Date Received (APÄ)

OWNER INFORMATION

mobberley Gretchen Route 144 West Friendship MD. 21794

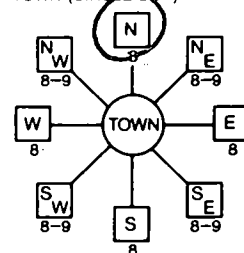
LOCATION OF WELL

Howard MOBBERLEY PRO. GLEBELG 4 MILES FROM TOWN

DRILLER INFORMATION

Aiken Compton MS D 009 Fogle's Well Drilling 580 Obrecht rd. Sykesville Allen Compton 1-13-00

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



PFEFFERKORN NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 975 FT DISTANCE FROM ROAD

TAX MAP: 22 BLK: 1-7 PARCEL: 41-234

WELL INFORMATION

APPROX. PUMPING RATE 5 APPROX. PER MIN. AVERAGE DAILY QUANTITY NEEDED 500 GAL. PER DAY

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard 13 COUNTY NAME COUNTY NO. DATE ISSUED 01 19 00 EXP. DATE 1/18/01

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION (circled) FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) INDUSTRIAL, COMMERCIAL, DEWATERING PUBLIC WATER SUPPLY WELL TEST, OBSERVATION, MONITORING GEO-THERMAL

APPROXIMATE DEPTH OF WELL 200 FEET

APPROXIMATE DIAMETER OF WELL 6" NEAREST INCH

METHOD OF DRILLING (circle one)

AIR-ROTARY (circled) JETTED DRIVE JETTED & DRIVEN AIR-PERCussion ROTARY (Hydraulic Rotary) CABLE REVerse-ROTary Drive-POINT other

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

- THIS WELL WILL NOT REPLACE AN EXISTING WELL (circled) 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)

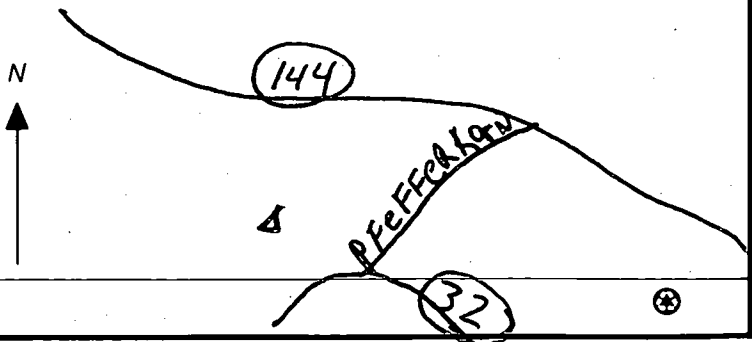
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

WRITE THE BOX NUMBER FROM THE MAP HERE

8003 5206

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION



Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROX. PERMIT NUMBER 54 G A P 63 PERMIT No. Ho-94-2558

SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -

F-00-71 THE PADDOCKS

N80°03'32"E 2055.32'

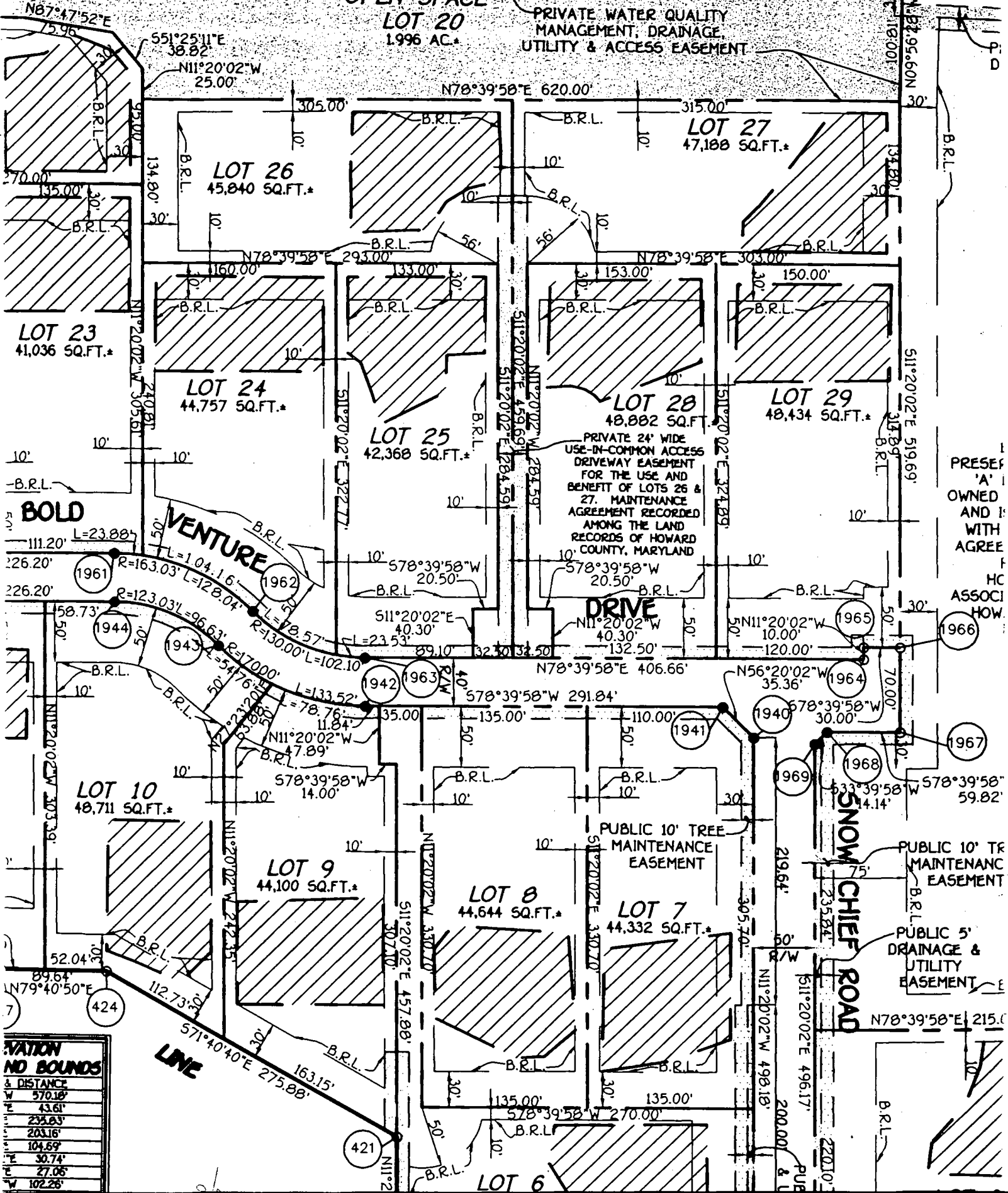
EXISTING PUB
UTILITY

Lot 20 Owned By The Paddocks
owner's Association, Inc.

955.20'

OPEN SPACE
LOT 20
1996 AC.*

PRIVATE WATER QUALITY
MANAGEMENT, DRAINAGE,
UTILITY & ACCESS EASEMENT



**BOUNDARY
NO BOUNDS
& DISTANCE**

W	570.16'
E	43.61'
N	234.63'
S	203.16'
E	104.69'
E	30.74'
E	27.06'
W	102.28'

PRESE
'A'
OWNED
AND I
WITH
AGREE
F
HC
ASSOCI
HOW.

SNOW CHIEF ROAD

LINE

DRIVE

VENTURE

BOLD

PRIVATE 24' WIDE
USE-IN-COMMON ACCESS
DRIVEWAY EASEMENT
FOR THE USE AND
BENEFIT OF LOTS 26 &
27. MAINTENANCE
AGREEMENT RECORDED
AMONG THE LAND
RECORDS OF HOWARD
COUNTY, MARYLAND

PUBLIC 10' TREE
MAINTENANCE
EASEMENT

PUBLIC 10' TR
MAINTENANC
EASEMENT

PUBLIC 5'
DRAINAGE &
UTILITY
EASEMENT

LOT 6

LOT 7

LOT 8

LOT 9

LOT 10

LOT 23

LOT 24

LOT 25

LOT 26

LOT 27

LOT 28

LOT 29

LOT 20

APPLICATION

PERCOLATION TESTING

A 59868

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2840

DISTRICT _____

DATE 3/9/98

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 _____

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER WINCHESTER HOMES INC. c/o MR. KEITH KUBISTA

ADDRESS 6305 IVY LANE SUITE 800 PHONE (301) 489-1120
GREENBELT MD. 20770

PROPERTY LOCATION: _____

SUBDIVISION MOBBERLY PROPERTY LOT NO. 32

ROAD AND DESCRIPTION BURNT WOODS ROAD

TAX MAP 22 PARCEL # 141, 2, 234 & 530

SIZE OF LOT 1 AC. CLUSTER 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. Zacharia Y. Fisch
(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

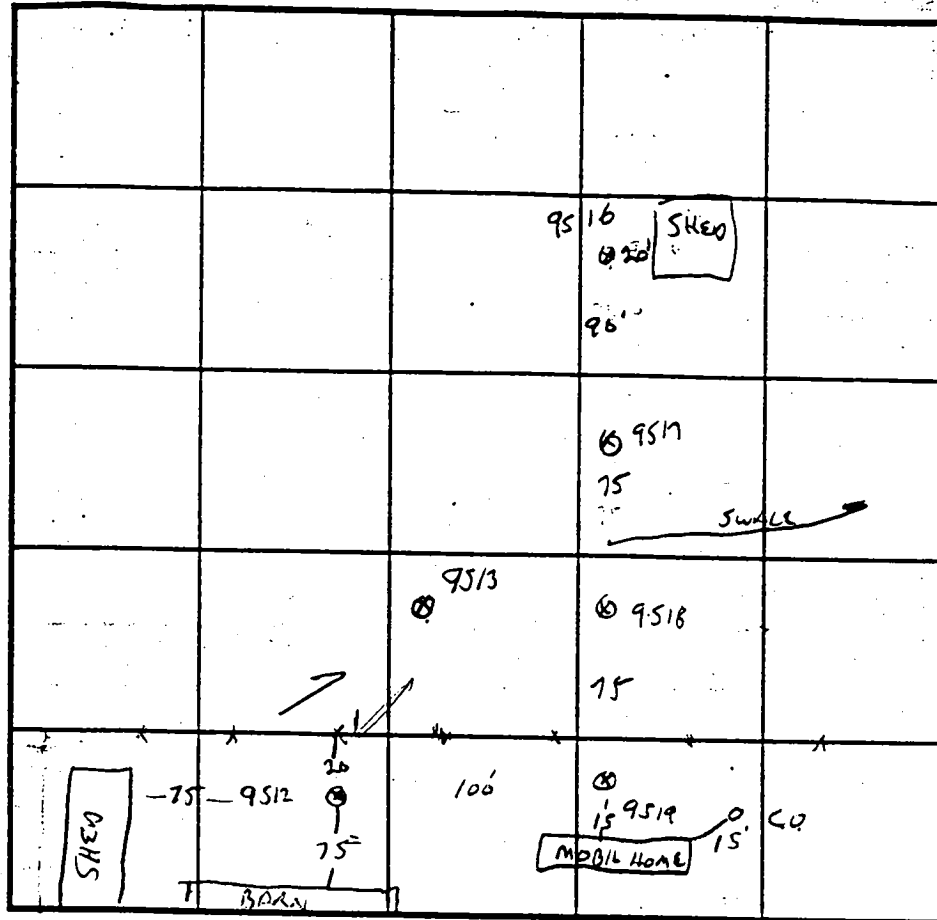
A59868
COUNTY #

SOIL PROFILE
9516

LOAM
2'
DRY
SCL

SOIL PROFILE
9519

TOPSOIL
19 IS SIMILAR
2'
RED BROWN
SCL
5'
YELLOW BROWN
LOAMY SAND
FEW BLACK
CONTENTS



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

LOT 32

9518
TOPSOIL
BROWN
GRAVELLY
LOAM
5'
GRAY
BROWN
LOAMY
SAND
SOFT SCL
PART
NATURAL
2 B BLACK
CONTENTS
FEW
DRY

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/16/98	9512	5/12 V	11:24	11:27	→	11:32	5 MW
	9513	4/13	12:22	12:23	→	12:25	2 MW
	9519	5'8" / 13	11:35	≤ 1 MW	→	11:37	2 MW
	9518	5'8" / 12	11:44	11:47	→	11:52	5 MW
LOT 30	9517	4/13	11:50	11:55	→	12:11	16 MW
	9516	3/12' 6"	12:00	12:01	→	12:02	1 MW

9517
SIMILAR
TO 18
RECOGNIZABLE
FEATURES
NEAR
BOTTOM

REMARKS MOBIL HOME HAS H₂O Hookup + SEPTIC, LOT 32

TYPE OF SOIL 13 4-1315 DRY SC

TESTED BY G. SAUSAGE

ALSO PRESENT KEITH G. C. C. 'S

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____

COUNTY #

SOIL PROFILE

8262

red
brown
Siltm

30
lgt
beigh
Siltm
meacous

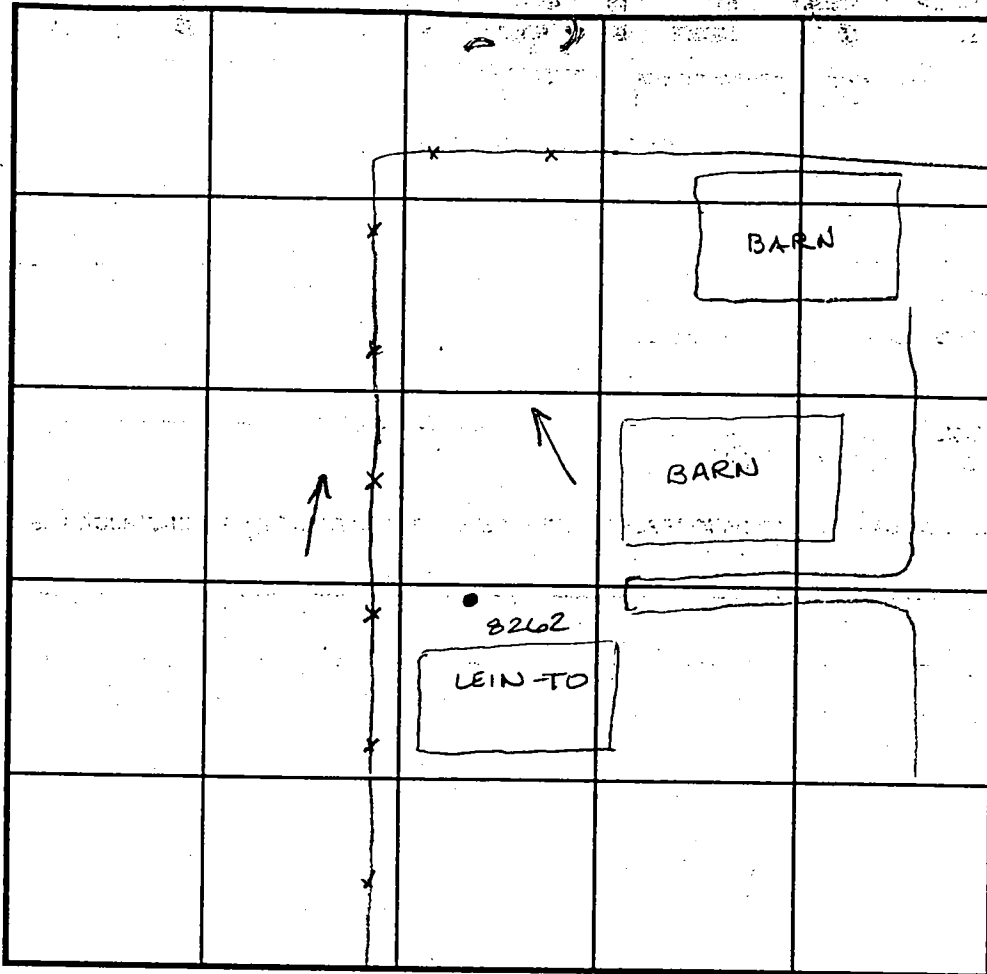
5.0
40%
Rx

7.0
brn
grey
Siltm
meacous
30%
Shale

12.0

SOIL PROFILE

0'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
3-18-99	8262	4.5 √12.0	12:35	12:38	12:38	12:43	5min

REMARKS _____

TYPE OF SOIL _____

TESTED BY Amy McMillen ALSO PRESENT Mike Fitzgerald-Poite

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT/BEDROOM _____

