

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

INDEXED

P 510671

A 59902

DISTRICT 4th

DATE 9/4/98

DATE SYSTEM APPROVED 1-13-99

INSPECTOR AU

04-353080

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXXXX~~ 410-313-2640

Olen Ketterman IS PERMITTED TO INSTALL ALTER

ADDRESS 14960 Route 144 Woodbine, Maryland 21797 PHONE 442-1336

SUBDIVISION Cattail Woods LOT 2 ROAD 15835 Bellis Drive

PROPERTY OWNER Mark Brandenburg

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS ***TOP SEAMED SEPTIC TANK REQUIRED***

NUMBER OF BEDROOMS 4

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 280

TRENCHES - Trench to be 3 feet wide. Inlet 5.5 feet below original grade. Bottom maximum (6.5-7) depth 7 feet below original grade. Effective area begins at 5.5 feet below original grade. 1.5 feet of stone below distribution pipe.

LOCATION - Starting at the intersection of the 251.92' and the 399.60' lot lines, place the distribution box 100 feet down the 399.60' lot line and 190 feet off this same lot line as seen when facing the lot from the pipestem. Run trenches along contour towards the 399.60' 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. *5/14/98 OK AU*

**1/4/98 Top seamed tank not required due to change in plumbing depth (DKS)*

PLANS APPROVED BY Donna K. Soe DATE 5/11/98

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

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 PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

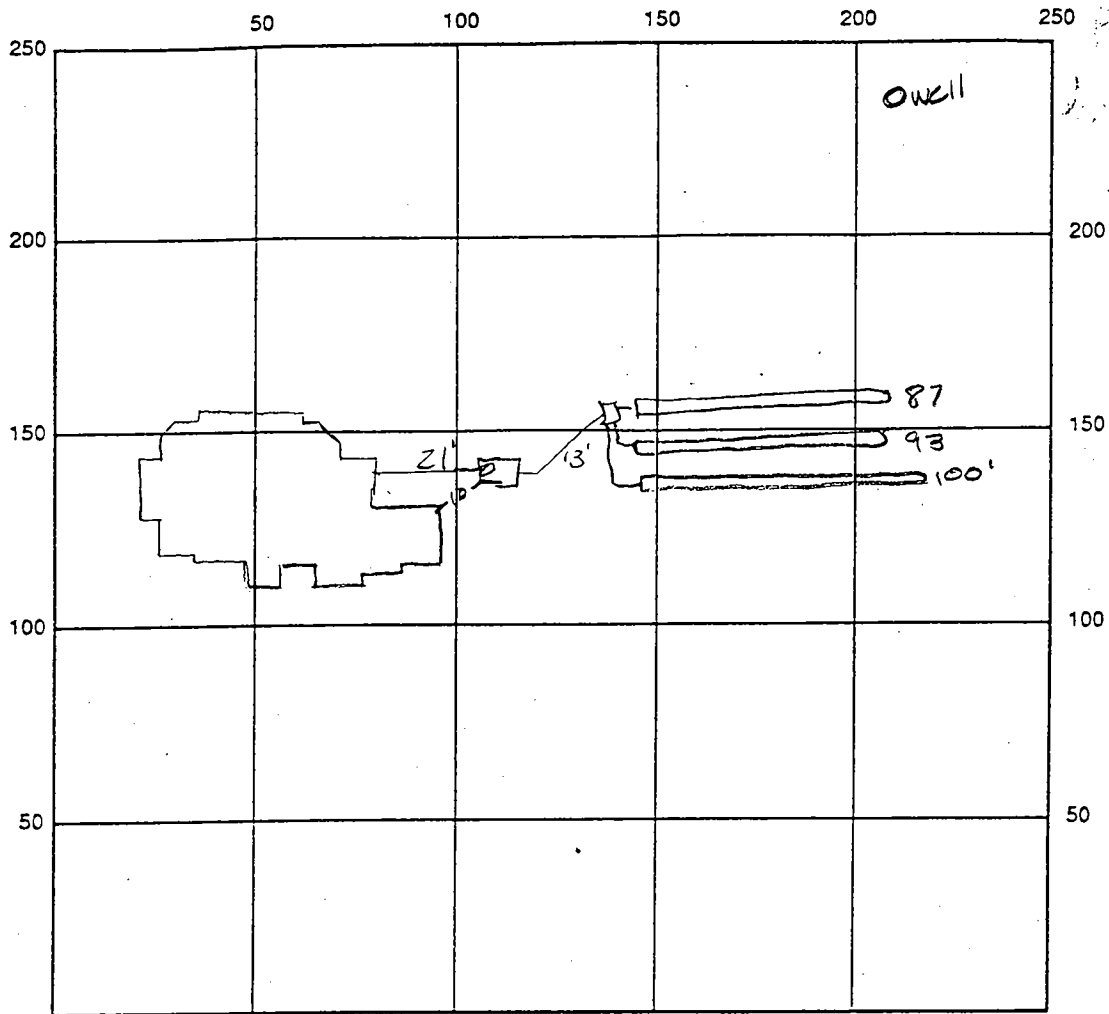
***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

HD-260(6-90)

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

BUILDING PERMIT SIGNED AND RETURNED
5/24/02
800136638 - GARAGE

A 59902



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL OK - 1500 gal CLEANOUTS OK

DISTRIBUTION BOX LEVEL OK

DRAIN FIELD/TITLE DEPTH 7.0 FT. TRENCH WIDTH 3.0 FT. INLET DEPTH 5.0 FT.

EFFECTIVE GRAVEL DEPTH 2.0 FT. TOTAL LENGTH 280 FT.

NUMBER OF TRENCHES 3.0 ONE SIDEWALL/BOTTOM AREA 720 SQ. FT.

DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET 2.0 FT.

ABSORBENT AREA — SQ. FT.

REMARKS: 12/13/99 OK to cover all work final

BUILDING PERMIT SIGNED

AND RETURNED

8/23/99 WPE - well line, P.A. 4.5' below grade, well casing 9" above grade, PVC conduit OK, 2PC cap OK; Need to secure safety rope.

DATE SYSTEM APPROVED 1/13/99 INSPECTOR JMC Melle

inside casing then OK to cover

APPLICATION

4/6/98
10:00

PERCOLATION TESTING

A 59907

Reperc to accommodate preferred house site

P _____

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

DISTRICT _____

DATE 3/26/98

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 MARK BRANDENBURG

ADDRESS 4822 HALE HAVEN DR Ellcott City PHONE 410-465-1587

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION CATAL WOODS, SEC 1 LOT NO. 2

ROAD AND DESCRIPTION 15835 Bellis RD, Lisbon - Follow Bellis RD to DEAD END LEFT ON to GRAVEL RD Lot ON LEFT SIDE

OLD PERMIT SIGNED AND RETURNED 5-11-98
Serial # BTD 11/612

TAX MAP 7 PARCEL # 137

SIZE OF LOT 3.409 ACRES TYPE BLDG. 2 STORY SINGLE FAMILY - 4 Bdr
(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.

Mark Brandenburg
(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

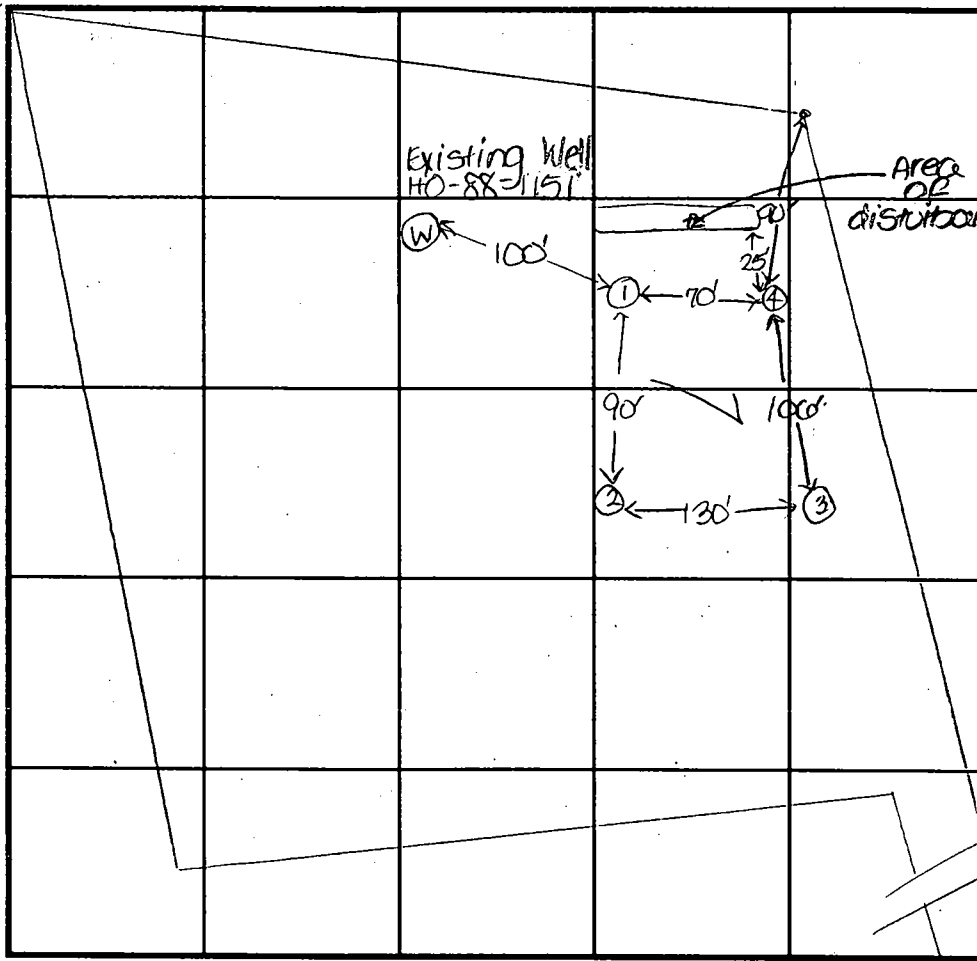
59902
COUNTY #

SOIL PROFILE

0' (1)/(2)
1' topsoil
org red
brn
cl lm
5'
14 org
brn
sa lm
25% sapr
sh
13'

SOIL PROFILE

0'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Bellis Drive

0' (3)/(4)
1' topsoil
red brn
cl lm
5'
red brn
sa lm
30-35%
sapr
sh
12.5'

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4-6-98	1	13.0'D	11:50				OK
	2	4.5'S	11:04	11:08	11:08	11:12	4
		8.0'M	11:03	11:07	11:07	11:12	6
		12.5'D	Visual				OK
	3	4.0'S	11:14	11:24	11:24	11:41	17
		12.5'D	Visual				OK
	4	4.5'S	11:19	11:26	11:20	11:43	17
		13.0'D	Visual				OK

REMARKS: test holes not staked

TYPE OF SOIL

TESTED BY: D. Sre ALSO PRESENT: Roger Bullen, Olen

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME: 11 TRENCH WIDTH: 3

INLET DEPTH: 4.5 MAXIMUM BOTTOM DEPTH: 6.57 SQ. FT./BEDROOM: 210

APPLICATION

7/27 4/15 finish

PERCOLATION TESTING

A 38984
P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

DISTRICT _____

DATE 3/24/87

*5-22-87
Perce Pending
plat Approval JEN*

page 1/2

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 BRUCE BRENDE / BRENDE FARMS INC. / PARCEL 137 INC.

ADDRESS 15298 UNION CHAPEL ROAD PHONE 442-2101
WOODBINE, MARYLAND 21797 489-4082

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION CAT TAIL WOODS LOT NO 2

ROAD AND DESCRIPTION DAISY ROAD AND BELLIS DENE

TAX MAP 7 PARCEL # 137

SIZE OF LOT 3 ACRES TYPE BLDG SINGLE FAMILY DWELLING
(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. Bruce Brendle / JEN TRG
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

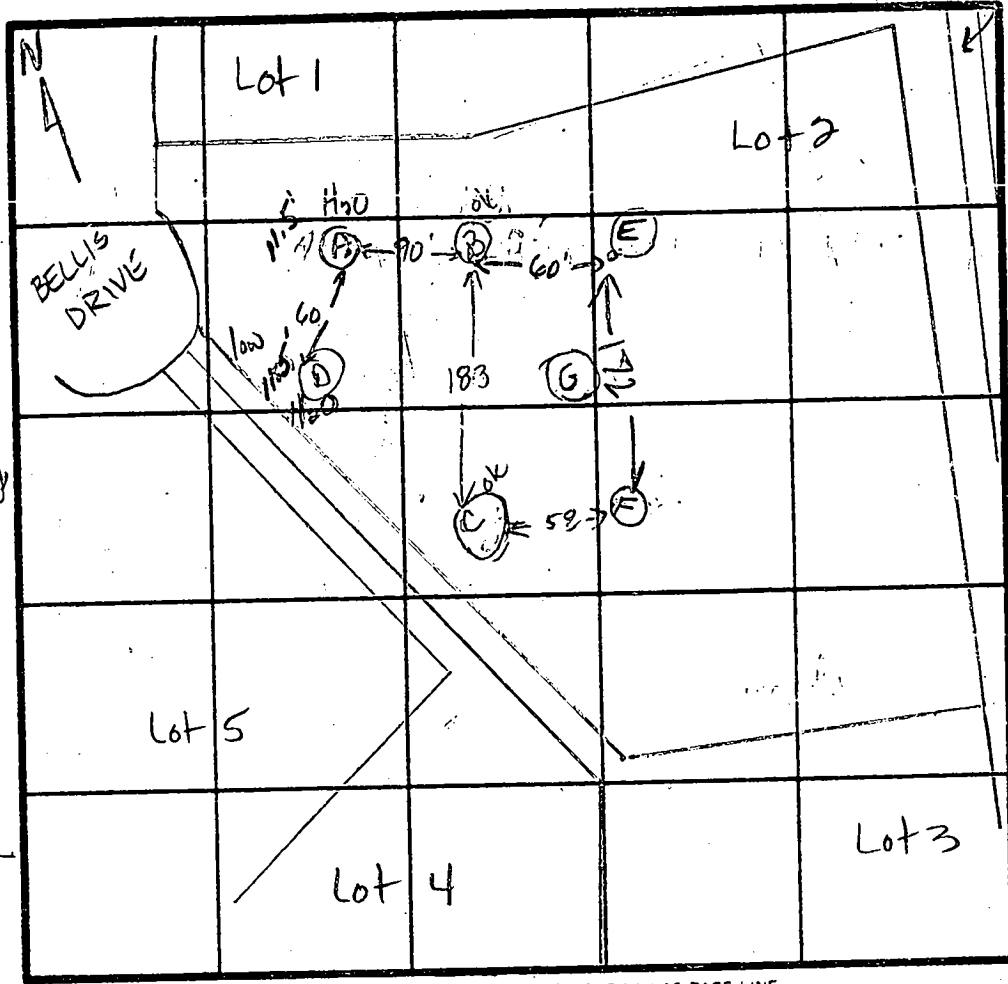
REASONS FOR REJECTION OR HOLDING For approval of subdivision plat. Perce ok. 5-22-87 JEN
12-12-88 SHALLOW SYSTEM ONLY JEN RH
1-8-90 Deep trench ok for initial system; Shallow only for repairs JEN

THIS IS NOT A PERMIT

A 38984

DAISY RD.

(C)



- 0-5.0 Br. rsi cl lm
- 5.0-8.0 Rd-br si cl lm
- 8.0-11.0 Tan sa si lm
- 11.0-13.0 Dk br si lm, trc rx frags (schist)
- 13.0 Bottom

SHALLOW ONLY

$\bar{x} = 16$ min
 Inlet = 6.0 ft
 Bottom = 8.0 ft
 240 sqft/bdrm

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

(A) SOIL PROFILE

0-5.5' Yell br si cl lm
 5.5-11.5 Pink, br si lm, trc rx frag schist
 11.5 Bottom
Water at 11.5

(D)

0-7.0 Yell br si cl lm
 7.0-11.5 Pink br si tr rx frag
 11.5 Bottom
Water at 11.5

(B)

0-6.5 Rd br si lm
 6.5-12.0 Rd br si lm, some rx frags schist
 14.0 Bottom

DATE	TEST NO	DEPTH	PRE-WET		TEST - 1' DROP		TIME	
			START	STOP	START	STOP		
5-22-87	(A)	11.5' ✓	bottom	(see profile)	water at 11.5'		unsatisf.	
	(D)	12.0' ✓	bottom	(see profile)	water at 11.5'		unsatisf.	
	B	4.0' S	11:15	11:33	11:33	12:03	for 3/4 in slow perc	unsatisf.
		14.0' D	bottom	(see profile)				
	C	4.0' S	11:22	11:48	for 1/4 in	slow perc,		unsatisf.
		13.0' D	bottom	(see profile)				
		6.0' M	11:57	12:07	12:07	12:31	24 min	ok
	B	6.0' M	12:16	12:19	12:19	12:27	8 min	ok
	FS	4.5	2:05	2:18	2:18	2:38	2:0	OK
	FV	12						
5/22/87	ES	4.5	2:15	2:21	2:21	2:31	10	OK
	EV	12.5						

HOLES (E) & (E) NOT DUG PER TEST PLAN
 Holes (A)(B)(C)(D) excavated on antest plat. Wooded lot. Ferns btwn (A)(B)

REMARKS: Rock frags are large but not unrippable.
 TYPE OF SOIL: Yellow, red br si cl lm; pink br si lm trc rx frags
 TESTED BY: (R. HODGES & J. NAD)
 ALSO PRESENT: WE BARNES ROCK HOB
 JEFF FENCING
 BRUCE BRYAN
 OWNER: PHILLIP BRYAN

EH-12-1079

APPLICATION

PERCOLATION TESTING

A 38984

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
PO BOX 476 ELLICOTT CITY MARYLAND 21043
TELEPHONE 461-9933

DISTRICT _____

DATE 3-24-87

pg 2/2

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 _____

ADDRESS _____ PHONE _____

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Cat Tail Woods LOT NO 2

ROAD AND DESCRIPTION _____

TAX MAP _____ PARCEL # _____

SIZE OF LOT _____ TYPE BLDG _____
(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 OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

HD-216

THIS IS NOT A PERMIT

A 38984

(E)

SOIL PROFILE

0
 BROWN SAND LOAM
 BROWN SAND SHIST LOAM
 FEW FRACS
 12.5

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

(F)

4
 BROWN SAND SHIST LOAM
 FEW FRACS
 12

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
5-22-87	GV	11.5	OK				

(G)

3
 BROWN CLAY
 PINK BROWN SAND SHIST LOAM
 11.5

REMARKS _____

TYPE OF SOIL _____

TESTED BY R HODGEC & J NADUE

BRUCE BRADLEY
 PHILIP IL
 ALSO PRESENT
 W.E. BARNES BACKHOE
 JEFF GOODWIN ENGINEER

C1 **1294** SEQUENCE NO. (DENV 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 38786**

ST/CO USE ONLY
 DATE RECEIVED

DATE WELL COMPLETED
021090

Depth of Well
303
 (TO NEAREST FOOT)

PERMIT NO.
 FROM "PERMIT TO DRILL WELL"
MD-88-1151

OWNER **Roadie** last name **Bruce** first name
 STREET OR RFD **Roadie**
 SUBDIVISION **CAT TAIL WOODS** SECTION **1** TOWN **LISBON** LOT **2**

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	
Dirt	0	10	
Soft Br. Mica	10	50	
Soft Br. Mica	50	51	X
Soft Br. Mica	51	70	
Blue Shiest	70	127	
Br. Mica & Shiest	127	128	X
Blue Shiest	128	230	
Opening	230	231	X
Blue Shiest	231	303	

GROUTING RECORD
 WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**
 TYPE OF GROUTING MATERIAL
 CEMENT **CM** BENTONITE CLAY **BC**
 NO. OF BAGS **26** NO. OF POUNDS **2,444**
 GALLONS OF WATER **156**
 DEPTH OF GROUT SEAL (to nearest foot)
 from **0** ft. to **74** ft.
 (enter 0 if from surface)

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

MAIN CASING
 Nominal diameter top (main) casing (nearest inch) **6**
 Total depth of main casing (nearest foot) **76**

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

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

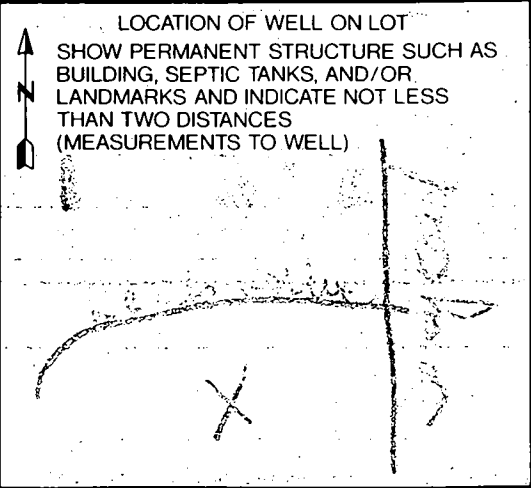
C2
 DEPTH (nearest ft.)
 EACH SCREEN
HO **76** **303**
 SLOT SIZE 1 2 3
 DIAMETER OF SCREEN (NEAREST INCH)
 from to

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.) W Q
 70 72 74 75 76
 TELESCOPE CASING LOG INDICATOR OTHER DATA

C3
PUMPING TEST
 HOURS PUMPED (nearest hour) **3**
 PUMPING RATE (gal. per min. to nearest gal.) **15**
 METHOD USED TO MEASURE PUMPING RATE **Submersible**
 WATER LEVEL (distance from land surface)
 BEFORE PUMPING **33**
 WHEN PUMPING **143**
 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
 CAPACITY:
 GALLONS PER MINUTE (to nearest gallon)
 PUMP HORSE POWER
 PUMP COLUMN LENGTH (nearest ft.)
 CASING HEIGHT (circle appropriate box and enter casing height)
+ above LAND SURFACE **2** (nearest foot)
- below



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 IDENT. NO. **256**
Dana Kyker Jr. II
 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)
 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

B 1 3220 SEQUENCE NO. (DP USE ONLY)
1 2 3 4 5 6
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

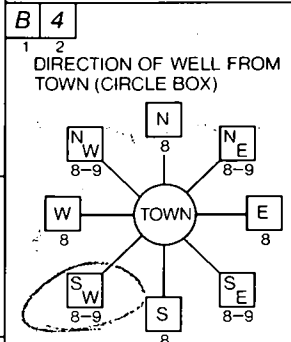
STATE OF MARYLAND
PERMIT TO DRILL WELL
please print or type

STATE PERMIT NUMBER
40-88-1151
70 fill in this form completely 79

Date Received (APA) 112289
OWNER INFORMATION
8 13
15 Last Name 34
BRENDEL BRUCE
Owner First Name
36 55
15298 UNION CHAPEL RD
Street or RFD
57 76
TOWN STATE ZIP
WINDBORNE MD 21797

B 3 LOCATION OF WELL
1 2
HOWARD
8 COUNTY 21
CAT TAIL WOODS
23 SUBDIVISION 42
SECTION 44 46 LOT 48 50
LISBON
52 NEAREST TOWN 71
MILES FROM TOWN (enter 0 if in town) 1 MI
73 76 77 78

DRILLER INFORMATION
Dana Kyker, Jr. II
Driller's Name 256
Westminster Rotary Well Drilling, Inc.
Firm Name
P.O. Box #861., Westm. Md. 21157
Address
Signature Date 11/20/89



11 30
DAISY RD.
NEAR WHAT ROAD
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
NORTH
N
WEST
EAST
SOUTH
34 37
DISTANCE FROM ROAD
ENTER FT or MI 1/1
38 39

B 2 WELL INFORMATION
1 2
APPROX. PUMPING RATE (GAL. PER MIN.) 6
8 12
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 400
14 20

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
Howard
COUNTY NAME
A 38986
COUNTY NO.
STATE SIGNATURE DATE ISSUED INSERT S
011790 Mark E. Reikin 7/7/90
43 48 CO SIGNATURE EXP DATE
NORTH GRID 542000 EAST GRID 0781000
50 55 57 63

USE FOR WATER (CIRCLE APPROPRIATE BOX)
D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

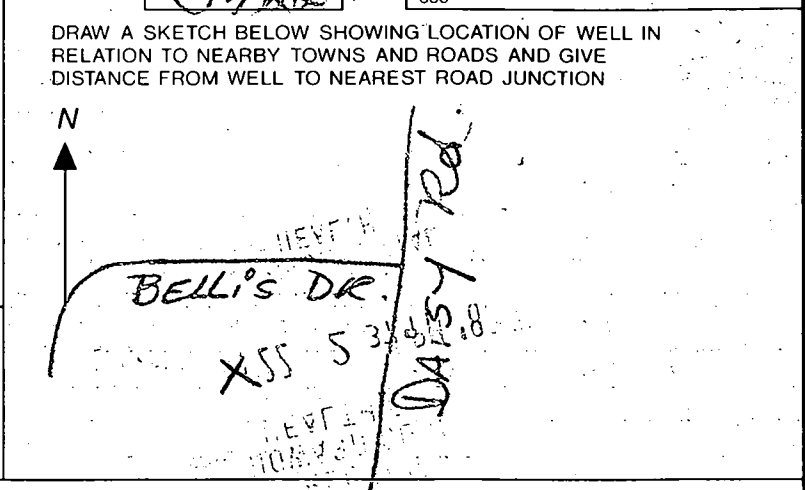
APPROXIMATE DEPTH OF WELL 200 FEET
24 28

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
2/10/90 NUNSP
SOURCES OF DRILLING WATER
1. CITY
2.
3.
WRITE THE BOX NUMBER FROM THE MAP HERE
E 7801
N 5402
000
000

APPROXIMATE DIAMETER OF WELL 6" NEAREST INCH

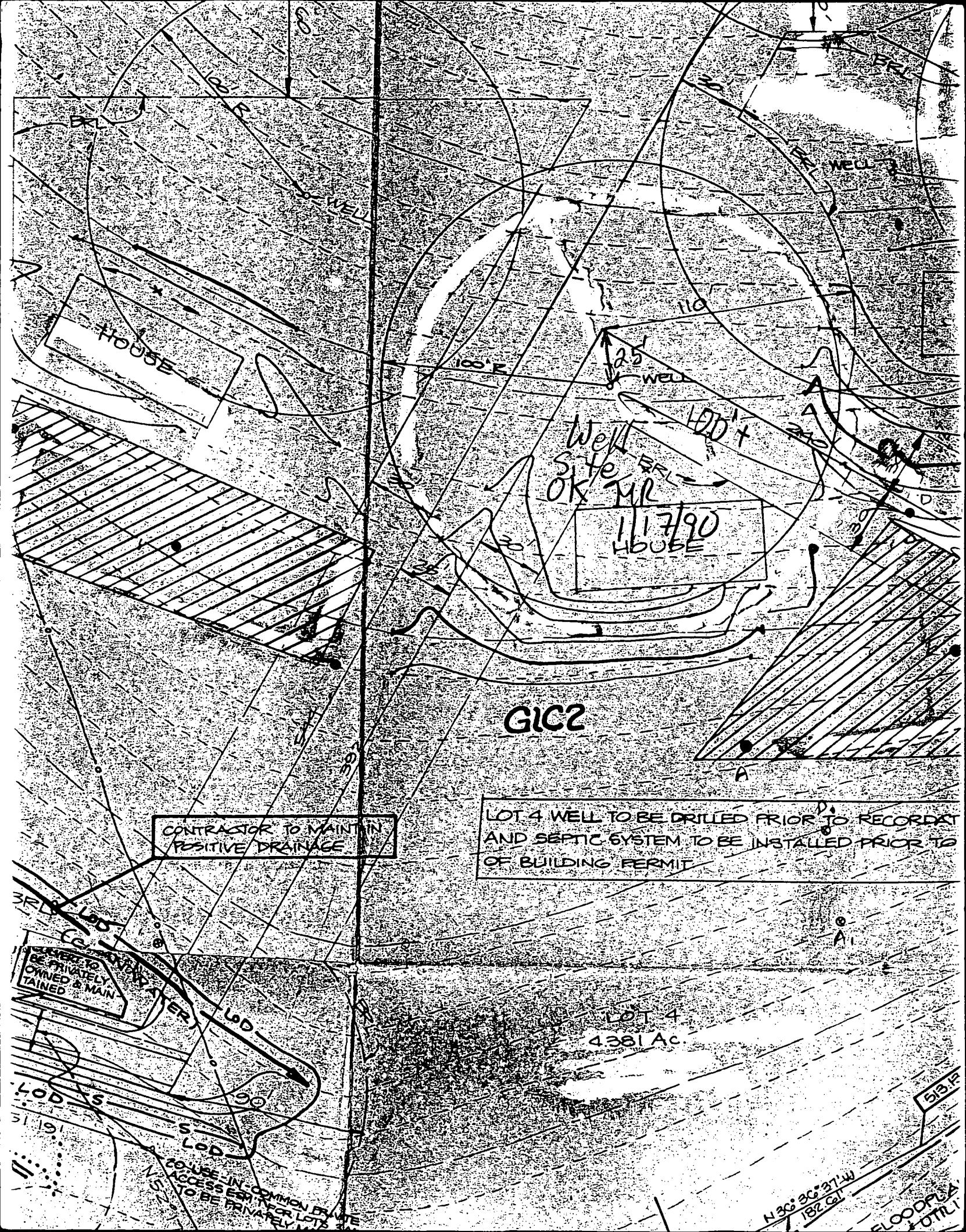
METHOD OF DRILLING (circle one)
BORED (or Augered) JETTED Jetted & DRIVEN
AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)
CABLE REVerse-ROTARY Drive-POINT
other

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)
N THIS WELL WILL NOT REPLACE AN EXISTING WELL
Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
D THIS WELL WILL DEEPEM AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52



Not to be filled in by driller (OEP USE ONLY)
APPROX. PERMIT NUMBER 54 GAP 63
FORCE MR WRITE INITIALS IN BOX PERMIT No. 40-88-1151
67 68 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS
442-2101



CONTRACTOR TO MAINTAIN POSITIVE DRAINAGE

LOT 4 WELL TO BE DRILLED PRIOR TO RECORDAT AND SEPTIC SYSTEM TO BE INSTALLED PRIOR TO OF BUILDING PERMIT

USE IN COMMON DRIVE ACCESS FOR LOTS TO BE PRIVATELY OWNED & MAINTAINED

LOT 4 4381 AC.

USE IN COMMON DRIVE ACCESS FOR LOTS TO BE PRIVATELY OWNED & MAINTAINED

N 26° 36' 37" W 182.61

FLOODPLAIN OTTL

Kim Soe

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

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation X Receipt # _____
 Replacement _____ Date _____
 Name of Installer J.A. Smith & Co. Inc. Telephone 410-796-7533
 License Number 5581
 Certified Well Pump Installer _____ Well Driller _____ Registered Plumber X
 Name of Property Owner Mark Brandenburg Telephone 410-465-1587
 Subdivision Cattail Woods Lot # 112 Well Tag # 40-97-1151
 Site Address 15835 Belle Grove

Pump
 1. Type
 a. Deep well jet _____
 b. Shallow well jet _____
 c. Submersible ✓
 2. Make Cosmic
 3. Model # 38310412L
 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 _____

Tank
 1. Capacity 62.322
 2. Pressure relief valve 75 ft
Piping
 1. Type Black Riv
 2. Size 2"
 3. NSF and/or BCCA Code approved ✓
 4. Depth of supply line 200
Well data
 1. Depth 303 ft.
 2. Yield 15 GPM
 3. Static water level 45 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: 8-23-99

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

NOTES

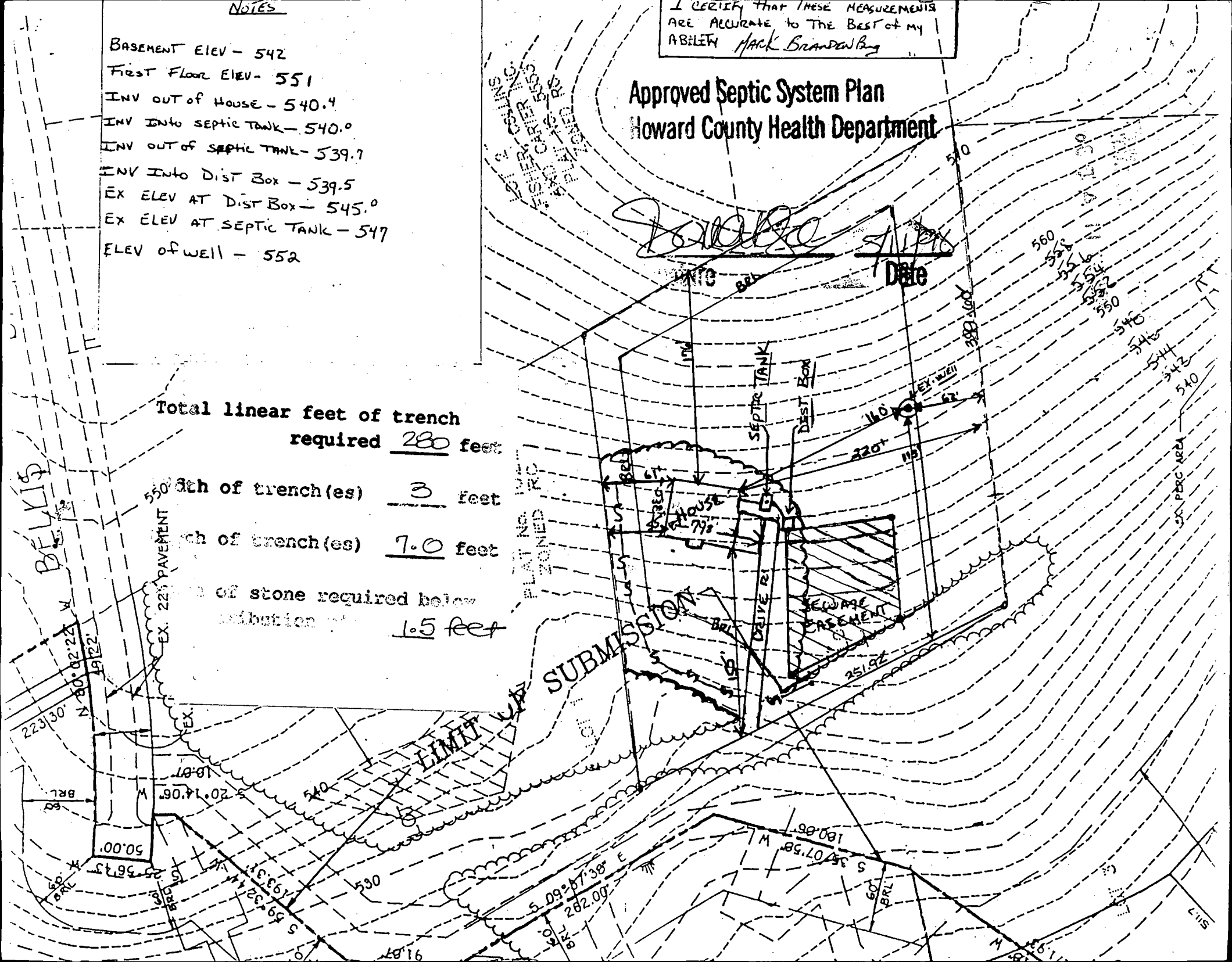
BASEMENT ELEV - 542
 FIRST FLOOR ELEV - 551
 INV OUT OF HOUSE - 540.4
 INV INTO SEPTIC TANK - 540.0
 INV OUT OF SEPTIC TANK - 539.7
 INV INTO DIST BOX - 539.5
 EX ELEV AT DIST BOX - 545.0
 EX ELEV AT SEPTIC TANK - 547
 ELEV OF WELL - 552

I CERTIFY THAT THESE MEASUREMENTS ARE ACCURATE TO THE BEST OF MY ABILITY
 MARK BRANDENBERG

Approved Septic System Plan
 Howard County Health Department

[Signature]
 Date 7/1/10

Total linear feet of trench required 280 feet
 Depth of trench (es) 3 feet
 Width of trench (es) 7.0 feet
 Quantity of stone required below distribution (es) 1.5 feet



CURVE DATA

ANGENT	CHORD	BEARING	DELTA
96.83'	191.18'	S 73°13'34" E	18°20'05"
19.89'	39.76'	S 65°48'43" E	03°30'22"
84.59'	167.76'	S 74°58'45" E	14°49'43"
04.90'	207.11'	N 73°13'34" W	18°20'05"

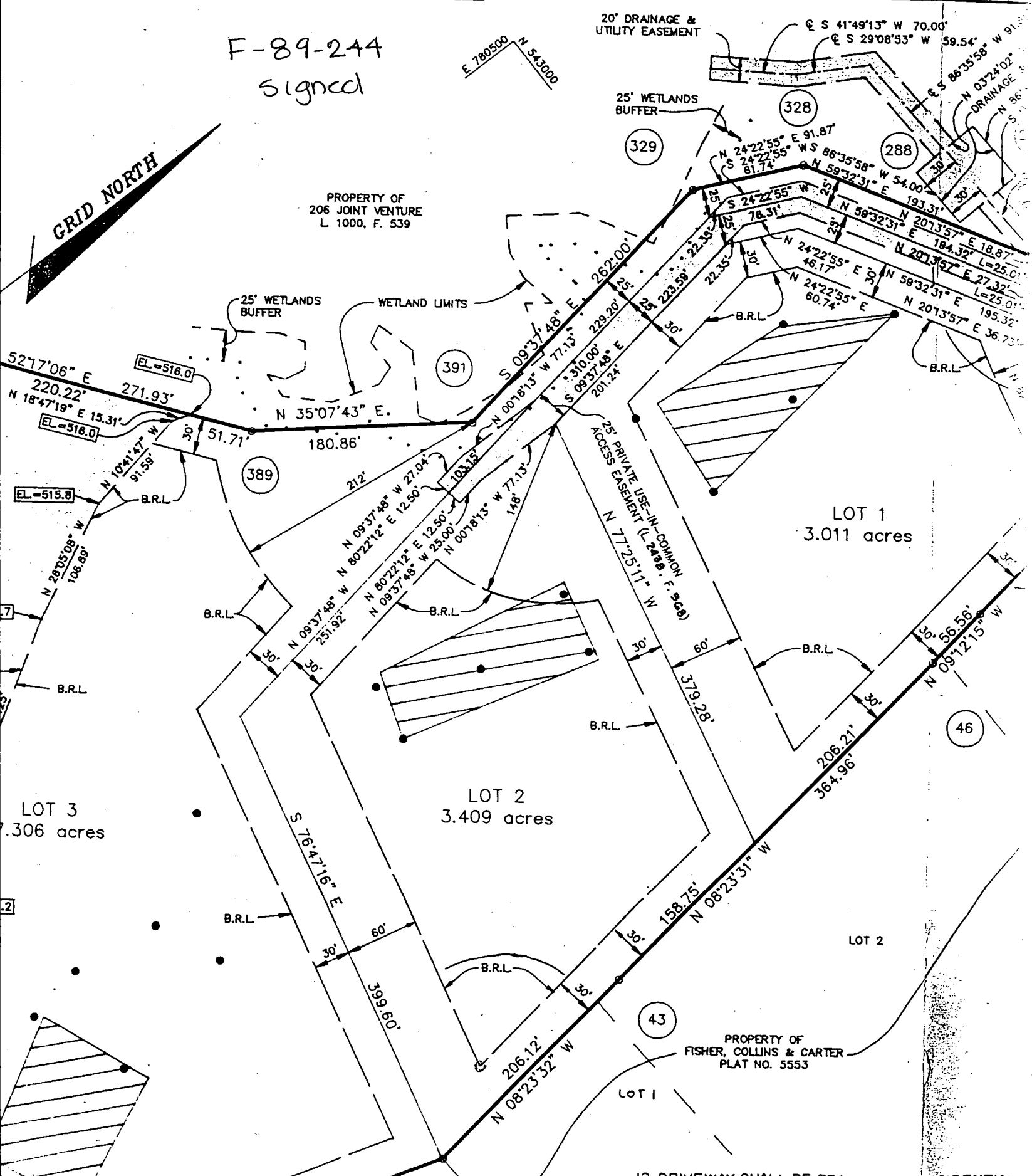
MINIMUM LOT SIZE

LOT NO.	GROSS AREA	LESS PIPESTEM	NET LOT AREA	GROSS
				FLOODPLAIN
2	3.409 Ac.	0.282 Ac.	3.127 Ac.	0
3	7.306 Ac.	0.567 Ac.	6.739 Ac.	1.982 Ac.

F-89-244
signed

GRID NORTH

PROPERTY OF
206 JOINT VENTURE
L 1000, F. 539



PROPERTY OF
FISHER, COLLINS & CARTER
PLAT NO. 5553

NOTES:

- 1) B.U.L. information, if shown, was obtained from existing record plat or local agencies and is not guaranteed by NTT, Inc.
- 2) Sublating line and/or Flood Zone information is subject to the interpretation of the originator.
- 3) NTT, Inc. does not certify to unknown or unrecorded encroachments or overlaps.
- 4) Property markers not found or guaranteed by this location.
- 5) Setbacks do not guarantee accuracy.

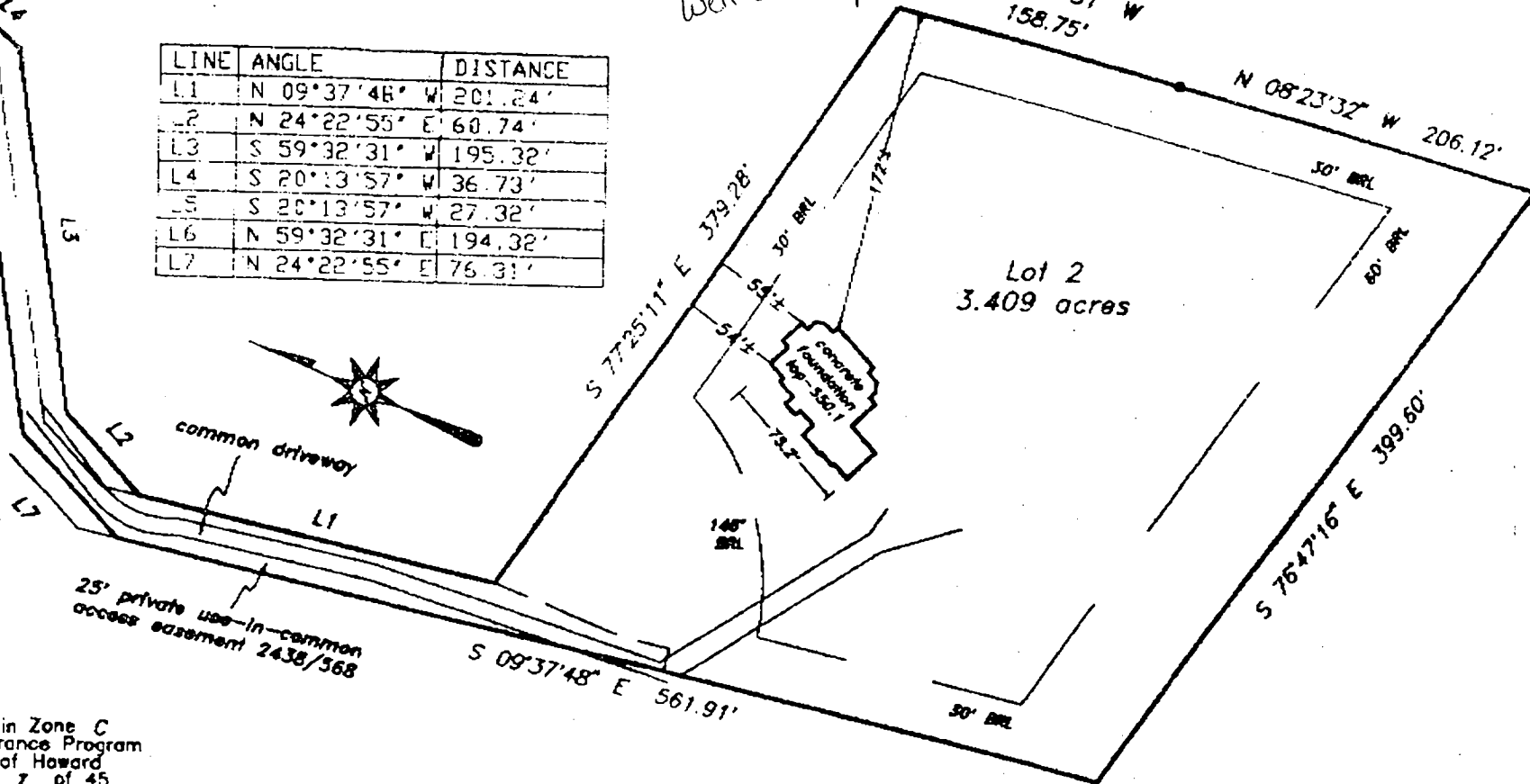
11/23/98
 house shifted slightly,
 will have no impact on
 well and septic as shown. *(KMD)*

Bellis Drive
 50' r/w

R=680.00
 A=23.01'

drainage and
 utility easement

LINE	ANGLE	DISTANCE
L1	N 09°37'48" W	201.24'
L2	N 24°22'55" E	60.74'
L3	S 59°32'31" W	195.32'
L4	S 20°13'57" W	36.73'
L5	S 20°13'57" W	27.32'
L6	N 59°32'31" E	194.32'
L7	N 24°22'55" E	76.31'



Subject property is shown in Zone C
 on the National Flood Insurance Program
 Flood Insurance Rate Map of Howard
 County, Maryland, Panel # 7 of 45
 Community Panel # 240044-88 printed
 Effective date: December 4, 1988

This is to certify that I have surveyed the property shown hereon,
 being known as **Lot 2**
15835 Bellis Drive
 recorded in the Land Records of Howard County, Maryland
 in Plat Bk. **10277** Liber **Folio**
 for the purpose of locating the improvements thereon.



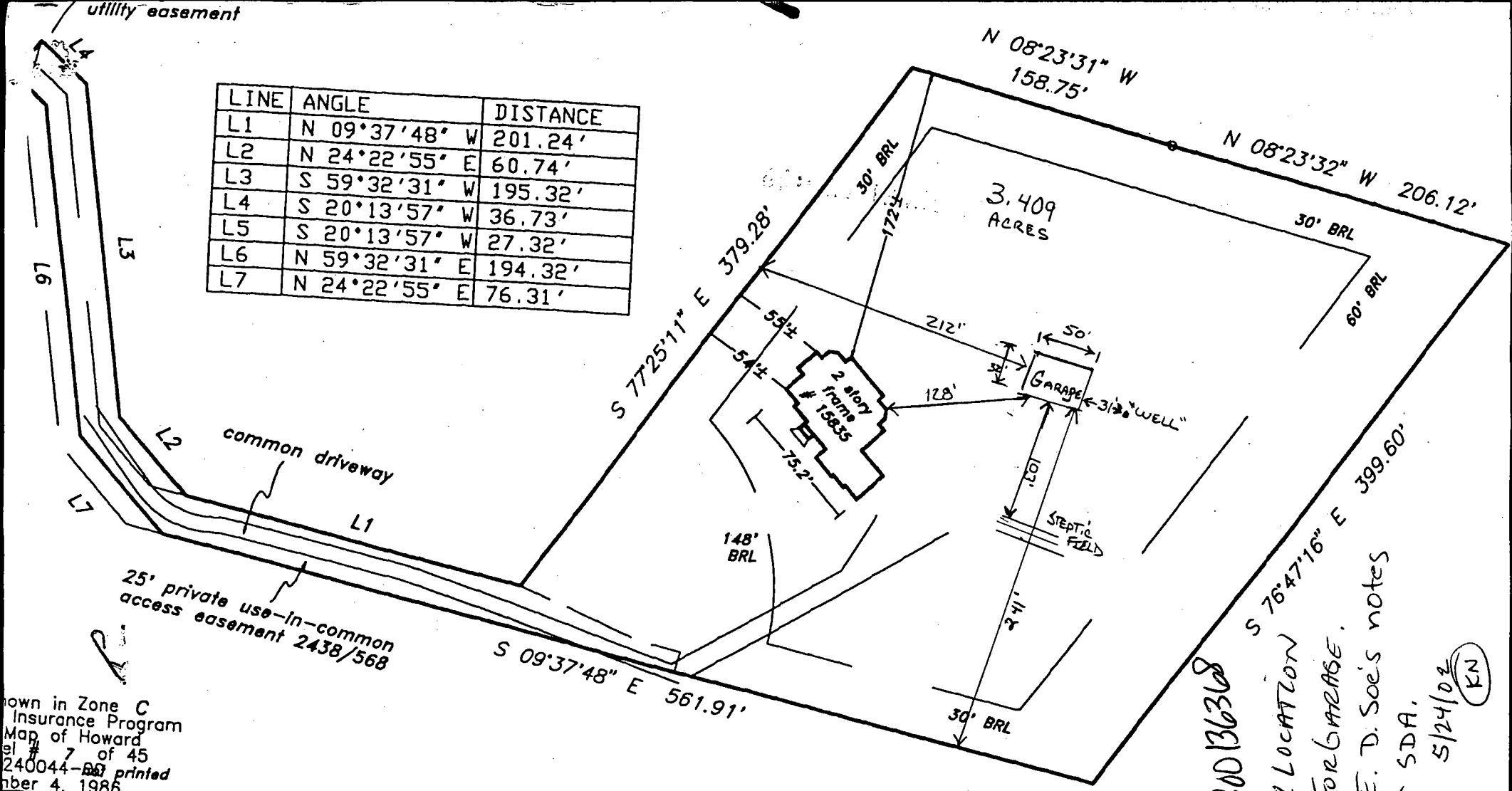
LOCATION DRAWING
 15835 Bellis Drive
 Cattail Woods
 4th election district
 HOWARD COUNTY, MARYLAND

- This plat is of benefit to the consumer only insofar as it is required by a lender or a title insurance company or its agent in connection with contemplated transfer, financing, or refinancing purposes.
- This plat is not to be relied upon for the establishment of location of fences, garages, buildings, or other existing or future structures.
- This plat does not provide for the accurate identification of property boundary lines, but such identification may not be required for the transfer of title or for securing financing or refinancing.

NTT Associates, Inc.
 16205 Old Frederick Road
 Mt. Airy, Maryland 21777
 Ph. (410)442-2031
 Fax No. (410)442-1315

Scale: 1"=100'
 Date: September 2, 1998
 Field by: JLM
 Drawn by: JLM
 Drawing # 110c

LINE	ANGLE	DISTANCE
L1	N 09°37'48" W	201.24'
L2	N 24°22'55" E	60.74'
L3	S 59°32'31" W	195.32'
L4	S 20°13'57" W	36.73'
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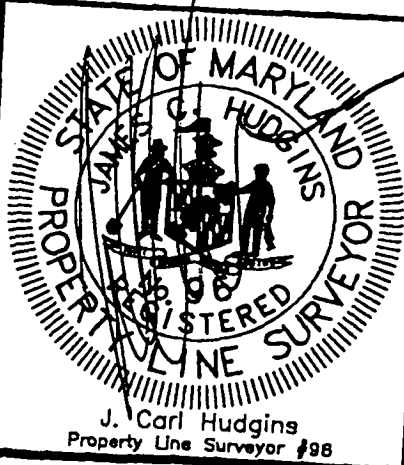


B00136368
 OK LOCATION FOR GARAGE.
 SEE D. Soe's notes for SDA.
 5/24/02
 (KN)

own in Zone C
 Insurance Program
 Map of Howard
 el # 7 of 45
 240044-80 printed
 umber 4, 1986

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 of 2
 15835 Bellis Drive
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 Liber Folio
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 or for securing financing or refinancing.



LOCATION DRAWING
 15835 Bellis Drive
 Cattail Woods
 4th election district
 HOWARD COUNTY, MARYLAND

NTT Associates, Inc.
 16205 Old Frederick Road
 Mt. Airy, Maryland 21771
 Ph. (410)442-2031
 Fax No. (410)442-1315

Scale:	1" = 100'
Date:	October 12, 1999
Field by:	JLM
Drawn by:	JLM
Drawing #	Misc4756