

LAYOUT 9/9/02 3:00 INSP 4 _____

INSP 2 10/11/02 2pm INSP 5 _____

INSP 3 _____ INSP 6 _____

ISSUE DATE: 8/12/2002

P 517410

APPROVAL DATE: 11/7/02 SHARED HOUSE CONN. & GRINDER PUMP INSTALL

A 59907-J

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

INDEXED 03-337421

Williamsburg Group, LLC IS PERMITTED TO INSTALL ALTER

ADDRESS: P. O. Box 1018 Columbia, MD PHONE NUMBER: (410) 997-8800

SUBDIVISION: Friendship Lakes LOT NUMBER: 12

ADDRESS: 2935 New Rover Road PROPERTY OWNER: Williamsburg Group

SEPTIC TANK CAPACITY (GALLONS): 1230 OUTLET BAFFLE FILTER REQUIRED

PUMP CHAMBER CAPACITY (GALLONS): N/A COMPARTMENTED TANK REQUIRED

NUMBER OF BEDROOMS: 5 4

SQUARE FEET PER BEDROOM: 180

LINEAR FEET OF TRENCH REQUIRED: 240

TRENCHES:	Trench to be 3.0 feet wide. Inlet 2.0 feet below original grade. Bottom maximum depth 4.0 feet below original grade. Effective area begins at 3.0 feet below original grade. 2.0 feet of stone below distribution pipe.
LOCATION:	Install 4" house connection sewer line per approved plan.
NOTES:	This permit is limited to the installation of the individual house connection sewer line and installation of the grinder pump. The Howard County Bureau of Utilities must be contacted prior to scheduling and inspection of these items.

PLANS APPROVED: Brian Baker OK SRK 7/19/02 DATE: 6/7/02

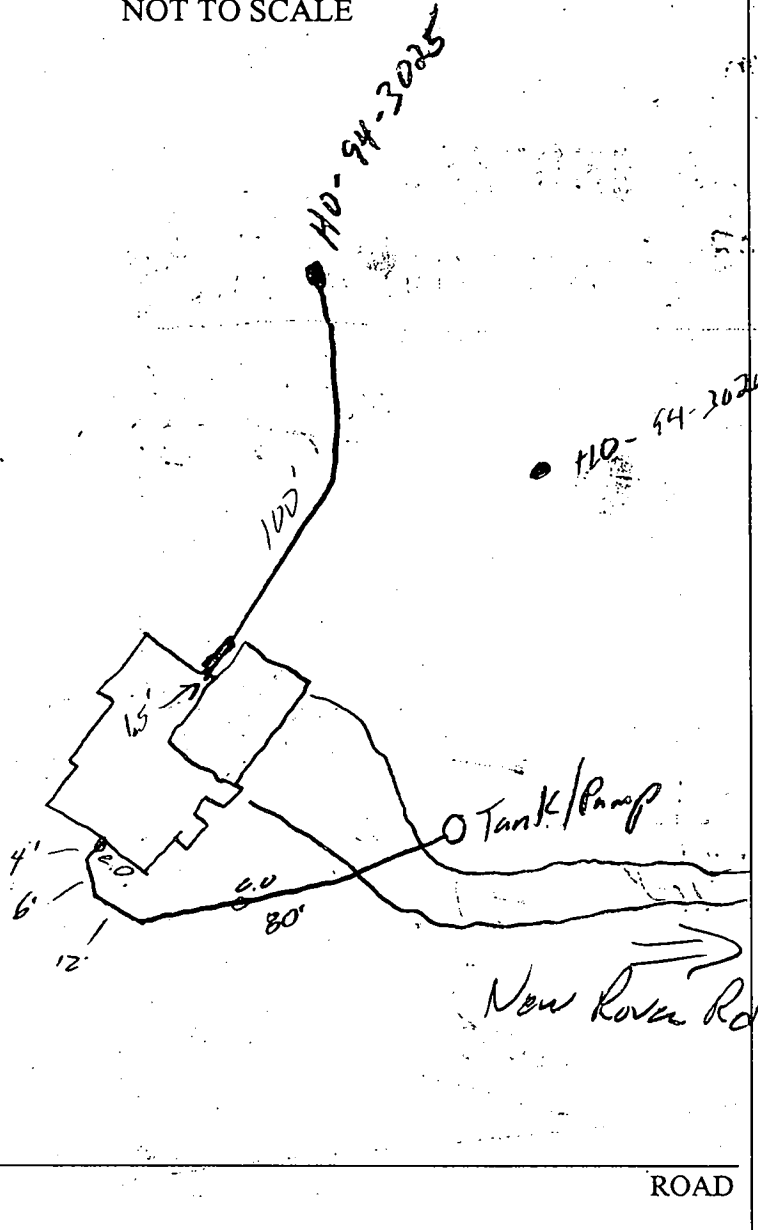
- NOTE: PERMIT VOID AFTER 2 YEARS
- NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
- NOTE: WATERTIGHT SEPTIC TANKS REQUIRED
- NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL?
- NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND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

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM BUILDING PERMIT SIGNED AND RETURNED RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

10-9-02 B00138714 - 46 PROpane TANK
9-25-03 B00144255 - PORCH + DECK

459907-5

NOT TO SCALE



TRENCH/DRAINFIELD DATA

WIDTH _____ INLET _____ BOTTOM _____

NUMBER OF TRENCHES _____

TOTAL LENGTH _____

ABSORPTION AREA _____

DISTRIBUTION BOX LEVEL _____

DISTRIBUTION BOX BAFFLE _____

DISTRIBUTION BOX PORT _____

SEPTIC TANK DATA

SEPTIC TANK 1 LEVEL _____

CAPACITY _____ GAL

SEAM LOC _____

TANK LID DEPTH _____

BAFFLES _____

BAFFLE FILTER _____

MANHOLE LOC _____

6" PORT LOC _____

WATERTIGHT TEST _____

SEPTIC TANK 2 LEVEL _____

CAPACITY _____ GAL

SEAM LOC _____

TANK LID DEPTH _____

BAFFLES _____

BAFFLE FILTER _____

MANHOLE LOC _____

6" PORT LOC _____

WATERTIGHT TEST _____

PRE-CONSTRUCTION _____

INSTALLATION 9/9/02 Line from house to Tank/Pump installed.
 OK to cover all work (SC)

10/10/02 Grinder pump installed. Pump & Absorb OK (SC)

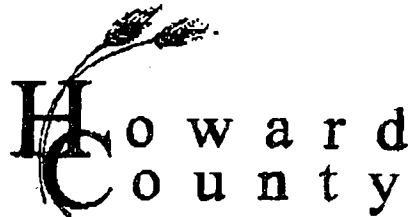
11/7/02 - PER MATT TUDER OK TO FINAL SEPTIC (SRK)

DESIGNED AND RETURNED

FINAL INSPECTOR Steven R. King

DATE OF APPROVAL 11/7/02

FAX
cover sheet



Bureau of Utilities
8270 Old Montgomery Rd.
Columbia, Md. 21045
Tel. : 410 313 4900
Fax : 410 313 4989

To: Water and Sewer Program

Date: 11/7/02 Number of pages including this one one

Fax Number: 2648

From: Matt Tudor

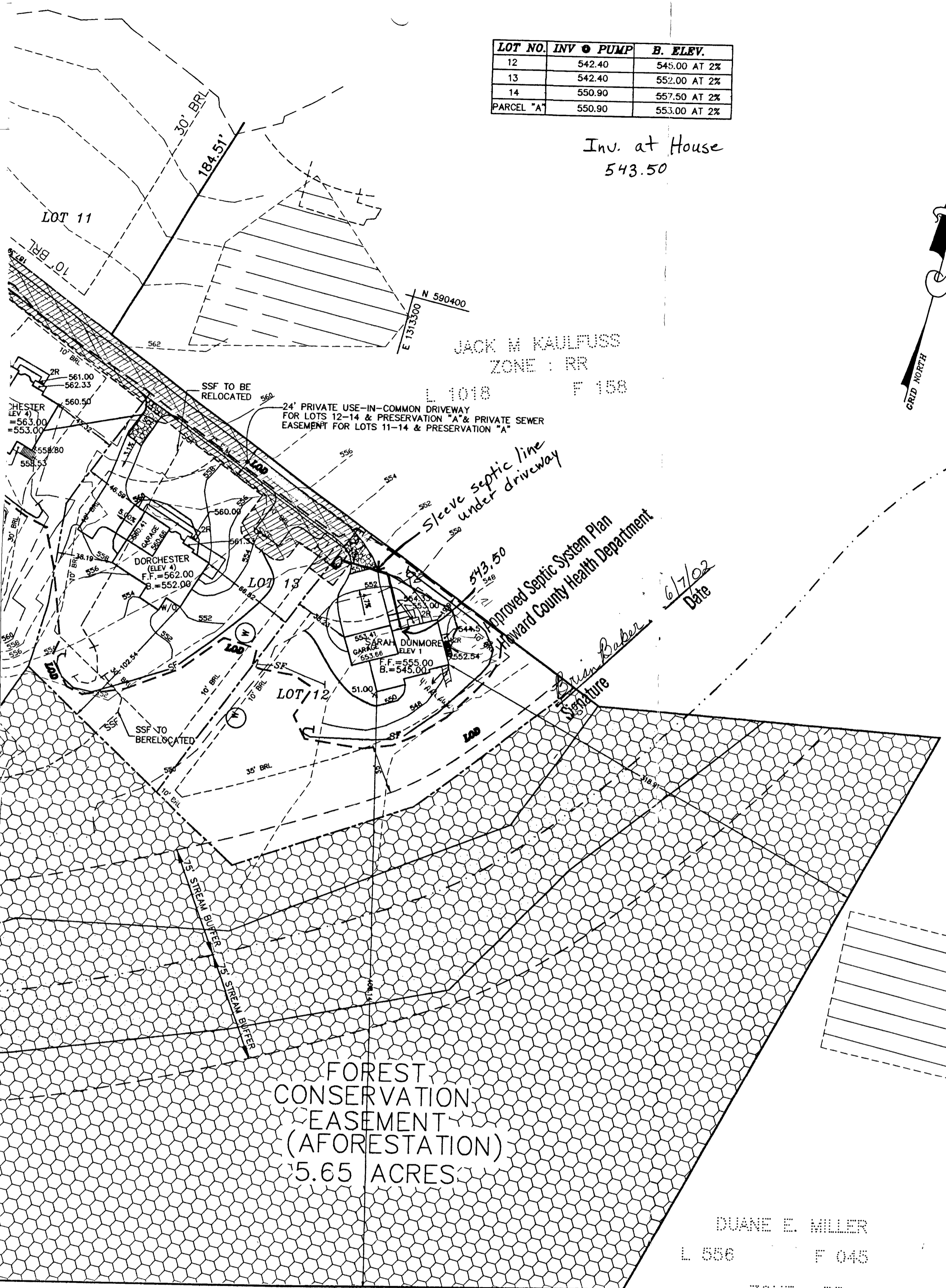
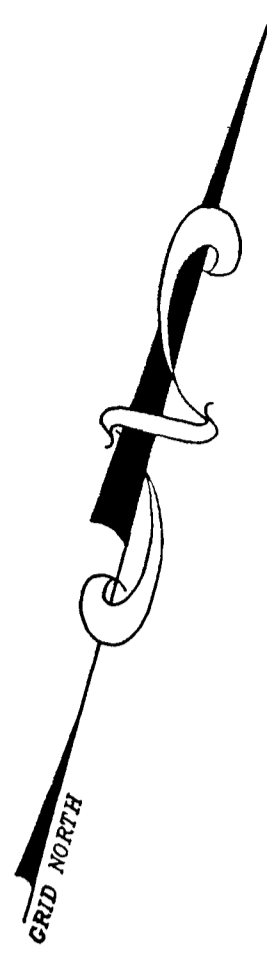
Comments: Friendship Lakes Shared Septic

Williamsburg Homes Lot 12
7935 New River Road

The Bureau of Utilities is releasing the above property for U#0. I have spoken with Mr. Mitch Miller, Williamsburg Homes Superintendent. He will complete grading and stabilization work surrounding the pump chamber prior to Lot 13 being considered for release.

LOT NO.	INV @ PUMP	B. ELEV.
12	542.40	545.00 AT 2%
13	542.40	552.00 AT 2%
14	550.90	557.50 AT 2%
PARCEL "A"	550.90	553.00 AT 2%

Inv. at House
543.50



JACK M KAULFUSS
ZONE : RR

L 1018 F 158

Approved Septic System Plan
Howard County Health Department

Arvin Baber
Signature

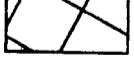






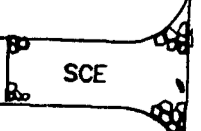
6/7/02
Date

FOREST
CONSERVATION
EASEMENT
(AFORESTATION)
5.65 ACRES

FARNANDIS FARM INC.
L 717 F 437
ZONE : RR

DUANE E. MILLER
L 556 F 045
ZONE : RR

LEGEND

-  EXISTING SEPTIC EASEMENT UNDER F-01-12
-  EXISTING WELL (DUG PER APPROVED F-01-12)
-  EXISTING OFF SITE WELL
-  LIMIT OF DISTURBANCE
-  EXISTING SUPER SILT FENCE
-  NEW SUPER SILT FENCE
-  NEW SILT FENCE
-  STABILIZED CONSTRUCTION ENTRANCE

project	date	description	no.	date
99010	APR. 2001	illustration	SAA/MMT	1" = 50'
		engineering	SAA	approval
				RJH

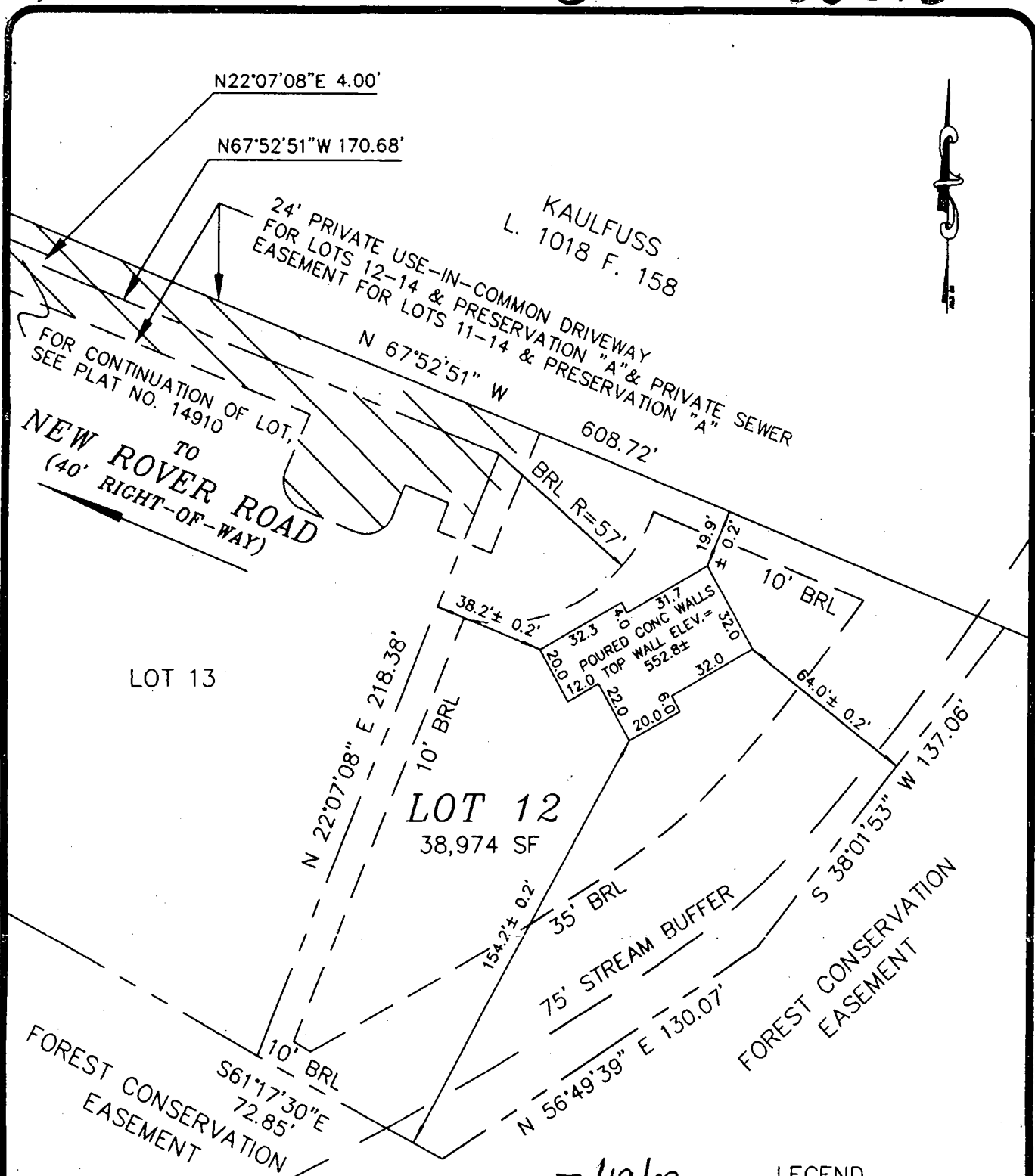
no.	description	revisions	date

FRIENDSHIP LAKES, LOTS 12-14 AND PRESERVATION PARCEL "A"
THIRD ELECTION DISTRICT
TAX MAP 15, PARCEL 175
HOWARD COUNTY, MARYLAND
PLOT PLAN

Sam (410) 997-0298

MILDENBERG, BOENDER & ASSOC., INC.
Engineers Planners Surveyors
5072 Dorsey Hall Drive, Suite 202, Ellicott City, Maryland 21042
(410) 997-0296 Balt. (301) 621-5521 Wash. (410) 997-0298 Fax.

BP# B00135873



LOT 12
FRIENDSHIP LAKES
LOTS 5 THRU 15
& PRES. PARCELS A&B
A RESUBDIVISION OF FRIENDSHIP LAKES
LOTS 1, 2, & 4
TAX MAP 15, PARCEL NO. 175

7/19/02 -
 Wall Check
 OKSRK

- LEGEND**
- O/H = OVERHANG
 - A/C = HEAT PUMP/AIR COND.
 - G/M = GAS METER
 - E/M = ELECTRIC METER
 - C = CHIMNEY
 - B/W = BAY WINDOW
 - D/W = DRIVEWAY
 - CONC = CONCRETE
 - S = CONC STOOP

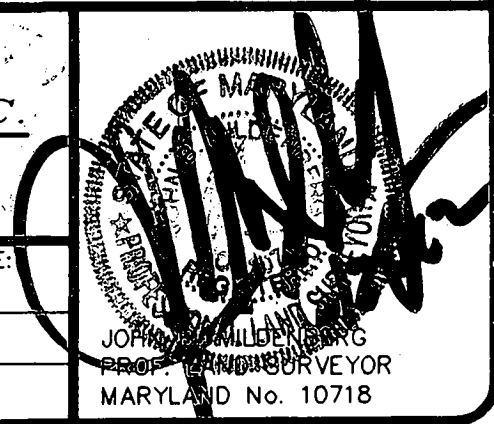
ADDRESS: NEW ROVER ROAD

ELECTION DISTRICT No. 3
 HOWARD COUNTY, MARYLAND

THE INFORMATION SHOWN HAS BEEN ESTABLISHED BY CURRENT ACCEPTABLE SURVEY PROCEDURES AND FROM AVAILABLE RECORD INFORMATION. THIS DRAWING IS TO BE USED FOR TITLE TRANSFER FINANCING, OR REFINANCING ONLY AND IS NOT TO BE USED FOR THE ESTABLISHMENT OF PROPERTY LINES, LOCATION OF FENCES, GARAGES, BUILDINGS, OR OTHER EXISTING OR FUTURE IMPROVEMENTS.

MILDENBERG
BOENDER, & ASSOC., INC.

Engineers Planners Surveyors
 5072 Dorsey Hall Drive, Suite 202, Ellicott City, Maryland 21042
 (410) 997-0296 Balt. (301) 621-5521 Wash. (410) 997-0298 Fax.



FOUNDATION	DATE: 06/24/02	FINAL LOCATION	DATE:
DRAWN BY: M.S.	SCALE: 1" = 50'		
PROJECT NO.: 99010	LOCATION DRAWING		

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTHY
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: CHARLES A. KLEIN & SONS, INC Telephone #: (410) 549-6960
Address: 5200 KLEIN'S MILL ROAD
SUKKESVILLE, MD 21784

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer
License # and name of individual responsible for the field installation:
Name (Print): CHARLES A. KLEIN, JR. License# 6521
*A licensed individual must perform the actual installation. Apprentices must be under the direct supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification.

Name of Property Owner: WILLIAM BURG GROUP LLC Telephone #: (410) 997-8800
Subdivision: FRIENDSHIP LAKES Lot #: 12 Well Tag #: HO-94-3024
Site Address: 2135 NEW ROVER ROAD
WEST FRIENDSHIP MD 21784

Submersible Pump Data Pitless Adapter Well Cap and Electric Conduit
Make: JACUZZI Make: HOWARD Two piece watertight cap: [checked]
Model #: 5S45-13P-52 Model #: PT-800 Screened, vented well cap: [checked]
Pump Capacity 5 GPM Depth: 42 (36" min) Cap secured to casing: [checked]
Well Yield: 5 GPM NSF approved: Conduit min 18" B.G.: [checked]
Depth of well encountered at time of pump installation: 340 (feet) Conduit secured to well cap: [checked]
If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4
Torque arrestors or Cable guards are required - Must circle one
Safety rope, if used, attached to inside of well casing with eye bolt

Piping to house House Connection
Type: POLYETHYLENE PVC sleeved to undisturbed soil at wall penetration: Yes
PSI: (160 psi min) Approximate length of sleeve:
Depth of supply line: 42 (36" min) Sleeve caulked and-sealed properly: [checked]

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: Charles Klein, Jr. date: 6/12/02

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

Date Insp. Requested: 9/13/02 Any Date Insp. Approved: 9/13/02 (SD)
Inspection Data: Pitless adapter and water supply line at least 36" below grade [checked]
Two piece cap installed and attached to casing securely [checked]
Elec. conduit extends at least 18" below grade/attached to cap properly [checked]
Safety rope installed inside of well casing [checked]
Correct well tag attached properly and casing 8" above finished grade [checked]
Water supply line sleeved adequately at house connection [checked]
Adequate grout observed below pitless adapter [checked]

Any time

ST/GO USE ONLY DATE Received MM DD YY DATE WELL COMPLETED MM DD YY Depth of Well *HO-94-3024* PERMIT NO. FROM "PERMIT TO DRILL WELL" *HO-94-3024*

8 13 15 20 22 340 26 (TO NEAREST FOOT) 28 29 30 31 32 33 34 35 36 37

OWNER *Rover Mill LLC* STREET OR RFD *New Rover Road* TOWN *Giteneig* SUBDIVISION *Friendship Lakes* SECTION _____ LOT *12*

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	
<i>Top So. L</i>	<i>0</i>	<i>2</i>	
<i>Sandy</i>	<i>2</i>	<i>80</i>	<input checked="" type="checkbox"/>
<i>Sand Stone</i>	<i>80</i>	<i>85</i>	
<i>MICKA</i>	<i>85</i>	<i>110</i>	
<i>Sand Stone</i>	<i>110</i>	<i>115</i>	<input checked="" type="checkbox"/>
<i>MICKA</i>	<i>115</i>	<i>340</i>	

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 *35* NO. OF POUNDS *350*
GALLONS OF WATER *210*
DEPTH OF GROUT SEAL (to nearest foot)
from *0* ft. to *30* ft. (enter 0 if from surface)

CASING RECORD
casing types insert appropriate code below
STEEL ST CONCRETE CO
PLASTIC PL OTHER OT
MAIN CASING TYPE *PL* Nominal diameter top (main) casing (nearest inch)! *6* Total depth of main casing (nearest foot) *95*

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

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

NUMBER OF UNSUCCESSFUL WELLS: *0*
WELL HYDROFRACTURED 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 SD 117*
DRILLERS SIGNATURE *[Signature]*
LIC. NO. *M D*

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

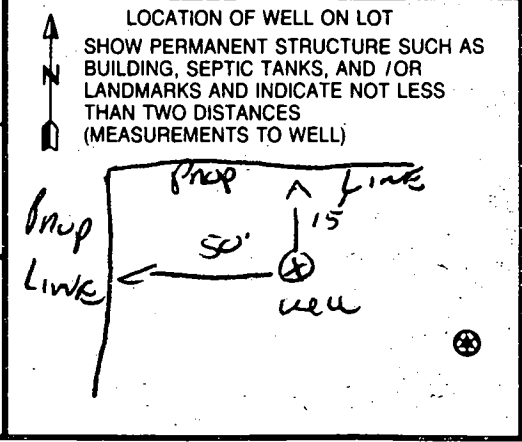
C2 DEPTH (nearest ft.)
1 *HO* 2 *92* 3 *340*
E 8 9 11 15 17 21
A 23 24 26 30 32 36
C 3
S 38 39 41 45 47 51
R
E
N
SLOT SIZE 1 _____ 2 _____ 3 _____
DIAMETER OF SCREEN (NEAREST INCH) _____
from _____ to _____

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

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

C3 **PUMPING TEST**
HOURS PUMPED (nearest hour) *3*
PUMPING RATE (gal. per min.) *5*
METHOD USED TO MEASURE PUMPING RATE *Bucket*
WATER LEVEL (distance from land surface)
BEFORE PUMPING *25* ft.
WHEN PUMPING *80* ft.
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 INSTALLED PUMP (CIRCLE) (YES OR NO) YES NO
IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.
TYPE OF PUMP INSTALLED IN PLACE (A,C,J,P,R,S,T,O) IN BOX 29. _____
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
 - below } *3* (nearest foot)



B 1 04785

SEQUENCE NO. (DP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

STATE PERMIT NUMBER

40-94-3024

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

W514954 please print or type

Date Received (APA)

030707

OWNER INFORMATION

OWNER MILL LLC

808 CENTRE PARK DR

COLUMBIA MD 21045

B 3

LOCATION OF WELL

HOWARD

FRIENDSHIP CANNIS

SECTION 44 46 LOT 12

GLENELG

52 NEAREST TOWN

MILES FROM TOWN (enter 0 if in town) 2 MI

DRILLER INFORMATION

Ralph E. Mayne well drilling

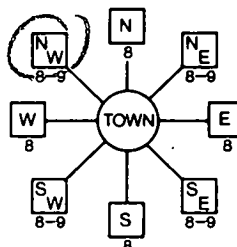
12024 Handy Rd. Mt Airy MD

Address: Ralph E. Mayne 2125101

Signature Date

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



new hoven rd

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



DISTANCE FROM ROAD 160

ENTER FT or MI 24

B 2

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 5

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- Home (single or double household unit only)
Farming (livestock watering & agricultural irrigation)
Industrial, commercial, state and federal gov. other (requires appropriation permit)
Public or private water company (requires appropriation permit and state health department approval)
Test, observation, monitoring (may require appropriation permit)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard Co 1594075

DATE ISSUED 030707

CO SIGNATURE 14M Well 3/5/02

NORTH GRID 530000 EAST GRID 770000

APPROXIMATE DEPTH OF WELL 150 FEET

APPROXIMATE DIAMETER OF WELL 6" NEAREST INCH

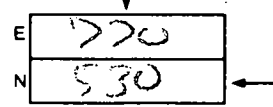
METHOD OF DRILLING (circle one)

- Bored (or Augered)
Jetted
Jetted & Driven
Air-Rotary
Air-PerCussion
Rotary (Hydraulic Rotary)
Cable
Reverse-Rotary
Drive-Point

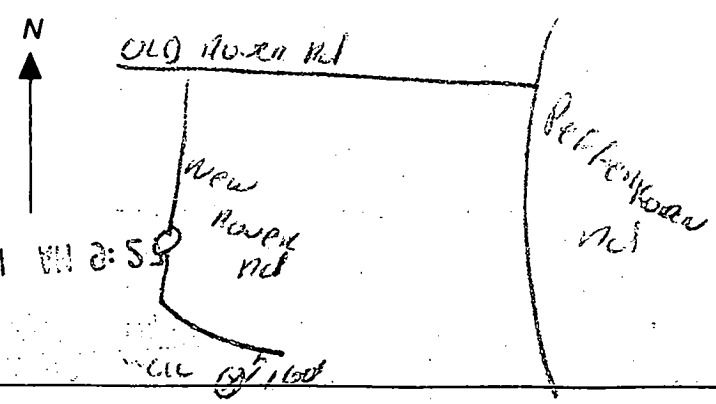
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER 1. well

WRITE THE BOX NUMBER FROM THE MAP HERE



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



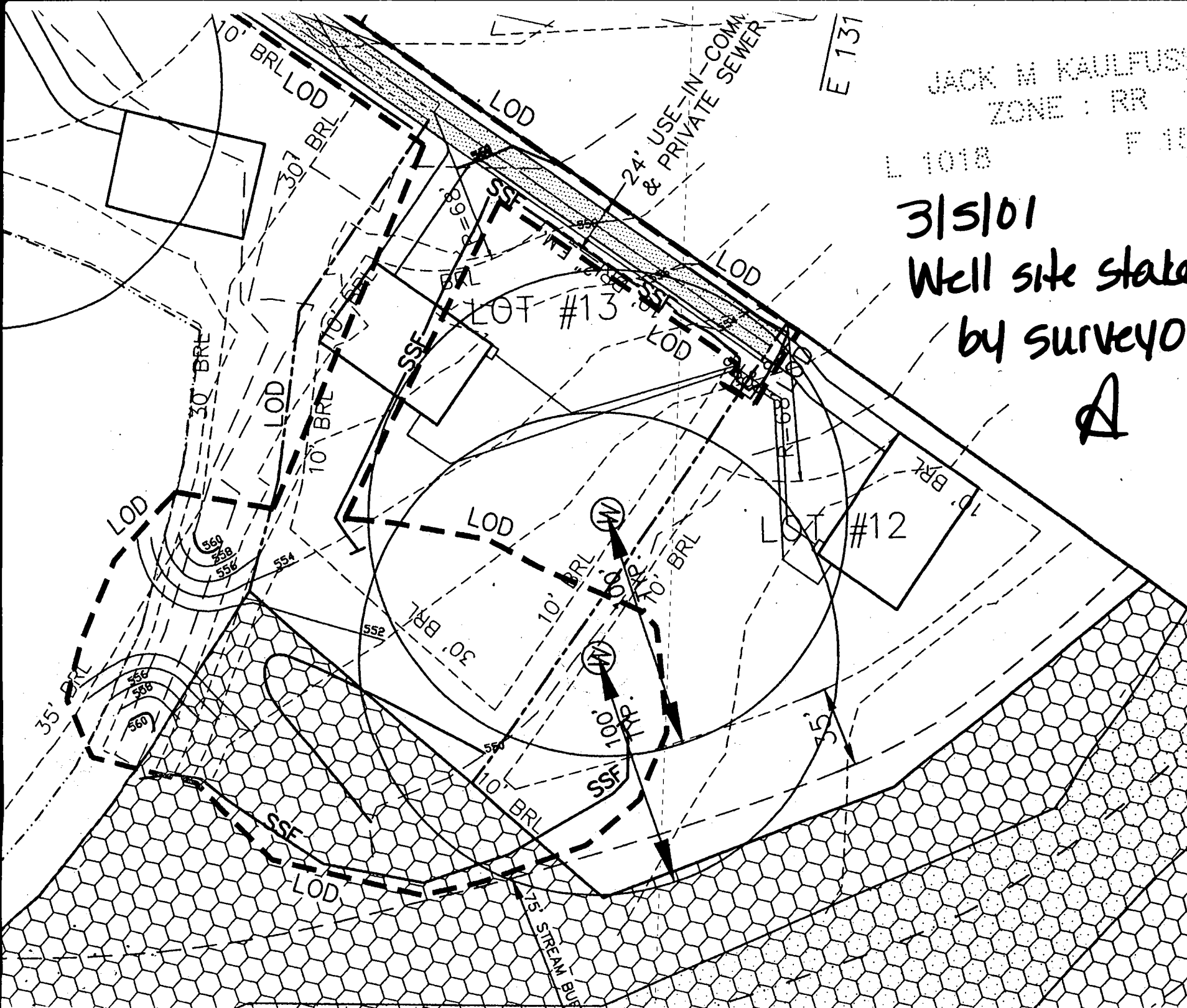
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

- 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
This well will deepen an existing well

APPROX. PERMIT NUMBER 1000 GAP 203001 MB

FORCE 201 PERMIT No. 40-94-3024

SPECIAL CONDITIONS



JACK M KAULFUS
 ZONE : RR

L 1018

F 15

3/5/01
 Well site stated
 by surveyor

A

E 131

24' USE-IN-COMM
 & PRIVATE SEWER

LOT #13

LOT #12

100' N.P.

75' STREAM BUF

10' BRL
 LOD

30' BRL

LOD

LOD

LOD

LOD

10' BRL

10' BRL

10' BRL

30' BRL

10' BRL

LOD

30' BRL

LOD

10' BRL

LOD

35' BRL

30' BRL

SSF

LOD

554

552

556

558

560

89

87

85

83

81

79

77

75

73

71

69

67

65

63

61

59

57

CONVENTIONAL TRENCH SEPTIC SPECIFICATIONS WORKSHEET

PROPERTY ID: Friendship Lakes

TAX MAP: 15

A 59907 J

STREET NAME: New Rover Rd

PARCEL #: 175

LOT NUMBER: 12

AVERAGE PERCOLATION RATE: _____

SQUARE FEET PER BEDROOM _____

NUMBER OF BEDROOMS: _____

LINEAR FEET OF TRENCH PER BEDROOM _____

TOTAL LINEAR FEET OF TRENCH _____

SEPTIC TANK CAPACITY: _____

TOP SEAMED TANK REQUIRED? YES NO

COMPARTMENTED TANK REQUIRED? YES NO

TRENCH DESIGN: 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.

SHARED SEPTIC SYSTEM

PUMPED SYSTEM PROPOSED: YES NO

PUMPED SEPTIC SYSTEM DETAIL: _____ gallon pump chamber

YES NO top seamed pump chamber required?

LOCATION:

ADDITIONAL NOTES:

REVIEWER: _____

DATE: _____

APPLICATION

PERCOLATION TESTING

A 59907

P _____

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

DISTRICT _____

DATE 4/1/98

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 Louis Auxier, et al

ADDRESS 18612 MENDON LAKE TERRACE, OLNEY, MD 20832 PHONE (301) 570-6083

AGENT OR PROSPECTIVE BUYER SAM ECKER

ADDRESS P.O. BOX 187 WESTERFRIENDSHIP, MD 21794 PHONE (410) 942-8486

PROPERTY LOCATION:

SUBDIVISION RE-SUB OF FRIENDSHIP LAKE LOT NO. NEW LOT #6

ROAD AND DESCRIPTION 13721 OLD ROVER ROAD W. FRIENDSHIP, MD 21794

LOTS 1, 2, 4

TAX MAP 15 PARCEL # 175

SIZE OF LOT 41,037 # TYPE BLDG. SFD
(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 _____

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

0' 28 102

Brown
CLAY

TAN / SLIGHT
YELLOW

SILT LOAM

14'

30

CLAY

VIEW

3-9"

SANDSTONE
CONCRETE

7-9"

30% - 40%

SUBSTRATE
BY SOIL - OK

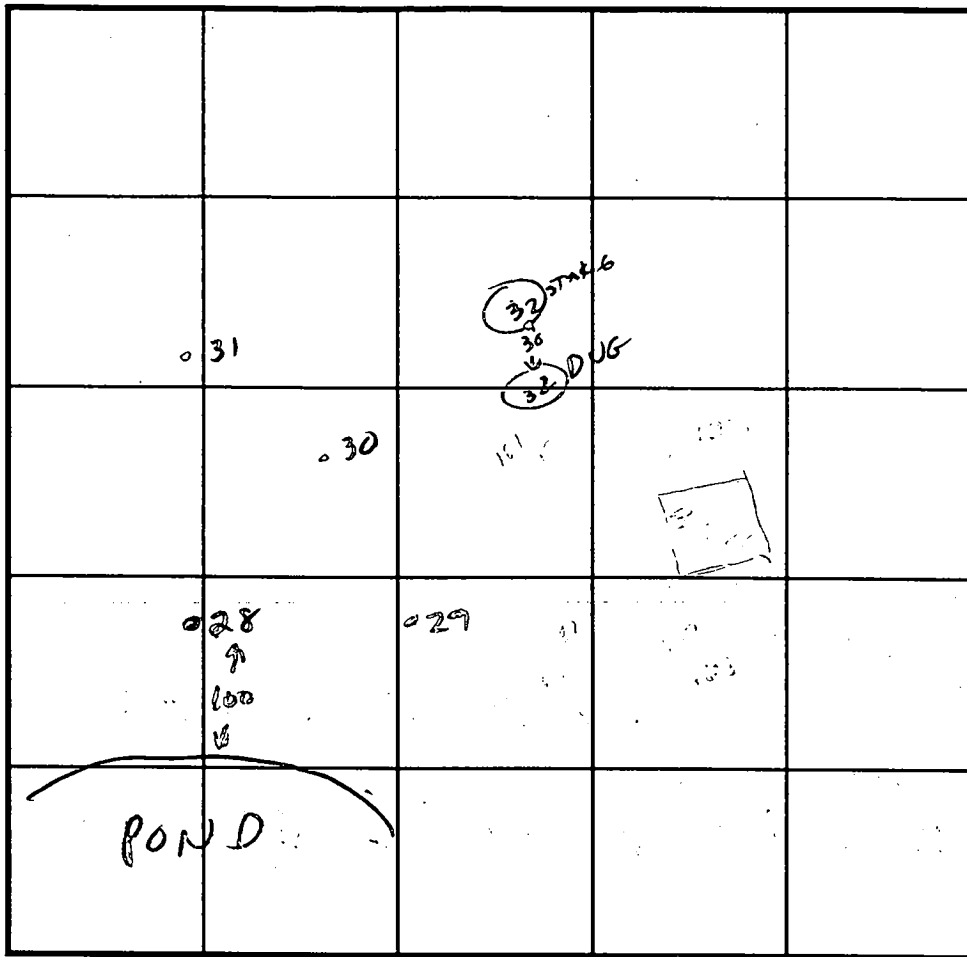
12'

31/32

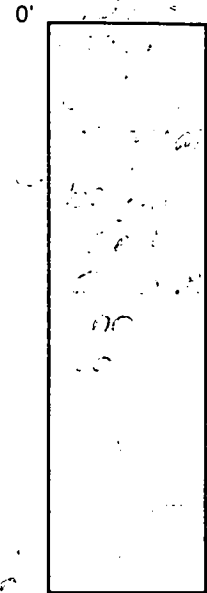
TOPSOIL

CLAY

CLAYEY
SILT
LOAM



SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4-13-98	28	4	6:16	6:20	6:20	6:29	9 MIN
				15:45			
4-13-98	29	5	6:15	6:27	6:27	6:40	13 MIN
4-13-98	30	4 1/2	6:20	6:28	6:28	POND	
						DID NOT BACK	
4-13-98	31	4 1/2	6:25	6:39	6:37	6:39	2 MIN
4-13-98	32	VISOR	SAME	AS 31			

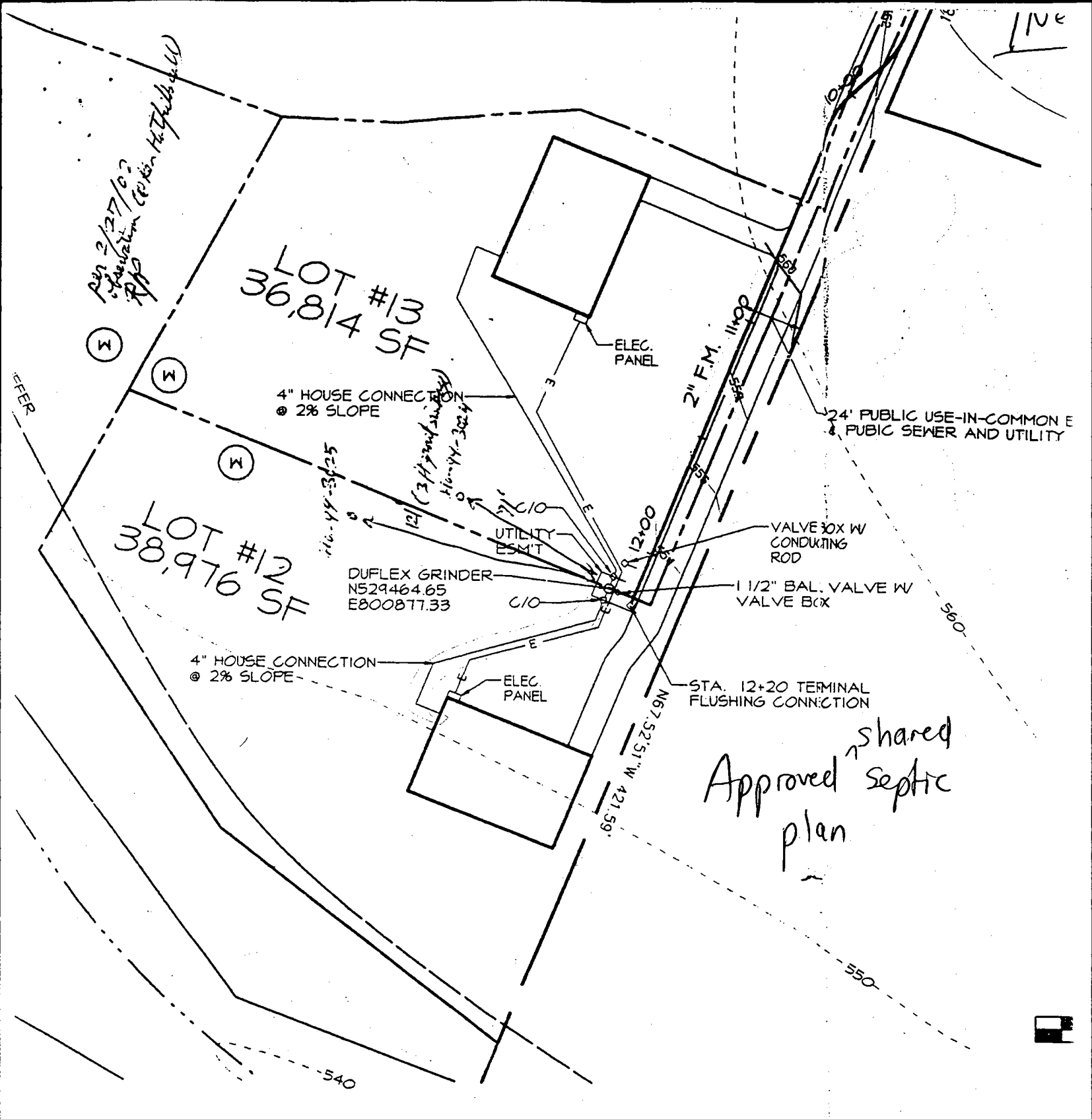
REMARKS _____

TYPE OF SOIL _____

TESTED BY CRAIG WILLIAMS ALSO PRESENT _____

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

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



Rev 2/27/01
 Approved
 H. G. Kelly & Co.

Approved ^{shared} Septic plan

APPROVED FOR THE DISTRICT:
 SOIL CONSERVATION DISTRICT
 REQUIREMENTS

[Signature] 2/5/01
 CONSERVATION SERVICE DATE

APPROVED FOR SOIL EROSION AND SEDIMENT
 CONTROL SOIL CONSERVATION DISTRICT.

[Signature] 2/5/01
 DATE

SHEET IN	
NO.	DESC
1	SHARED SEPTIC S
2	SHARED SEPTIC S
3	PROFILES
4	DETAILS

1/5
STREAM
BUFFER

PRESERVATION PARCEL "A"

642,185 SF
14.74 AC.

EXISTING
POND

*Approved
Peric Cert*

BARN

EXISTING BARN TO
BE REMOVED

LOT #14
34,197 SF

LOT #11
40,000 SF

LOT #10
40,000 SF

LOT #15
39,124 SF

LOT #12
35,818 SF

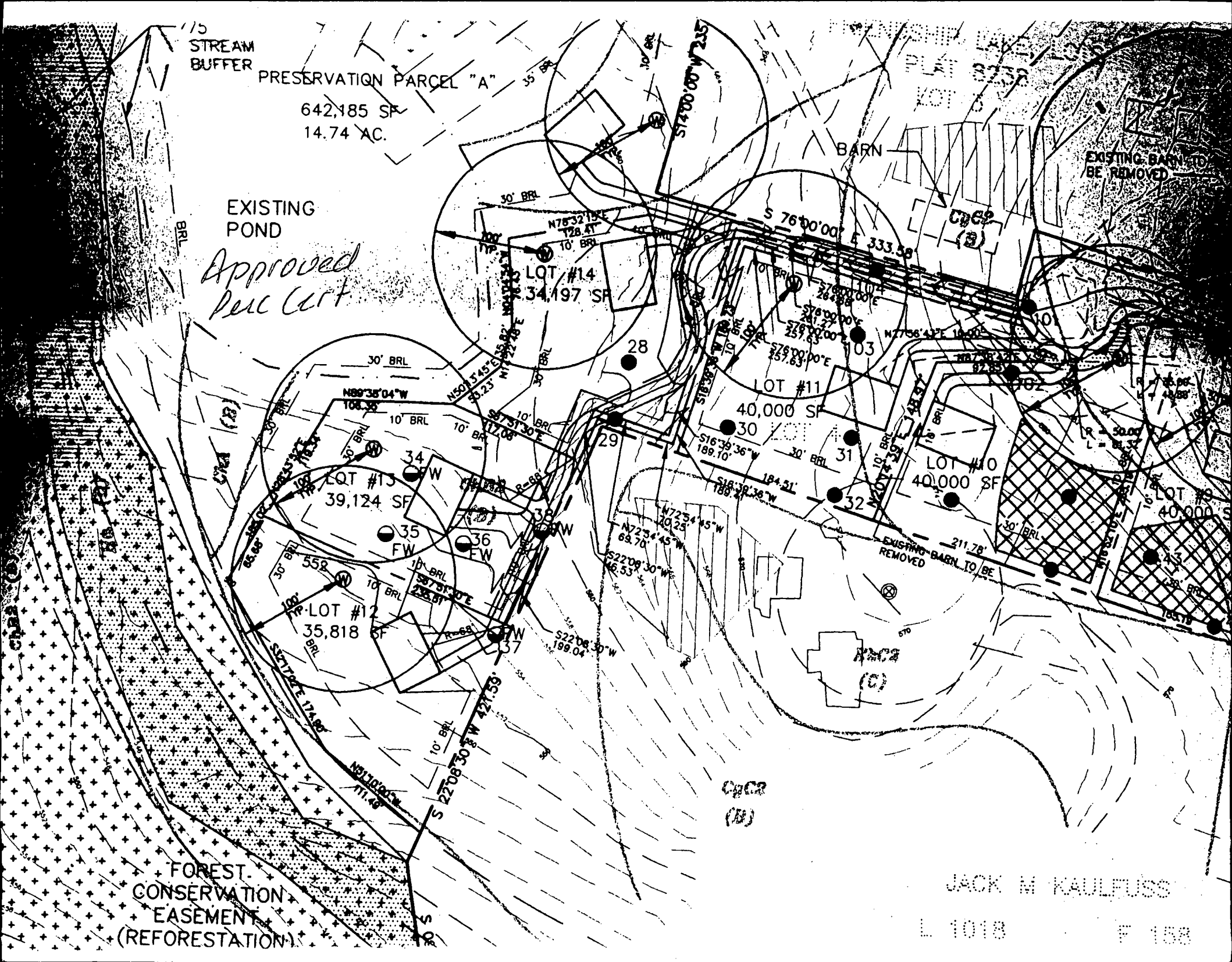
LOT #9
40,000 SF

FOREST
CONSERVATION
EASEMENT
(REFORESTATION)

JACK M KAULFUSS

L 1018

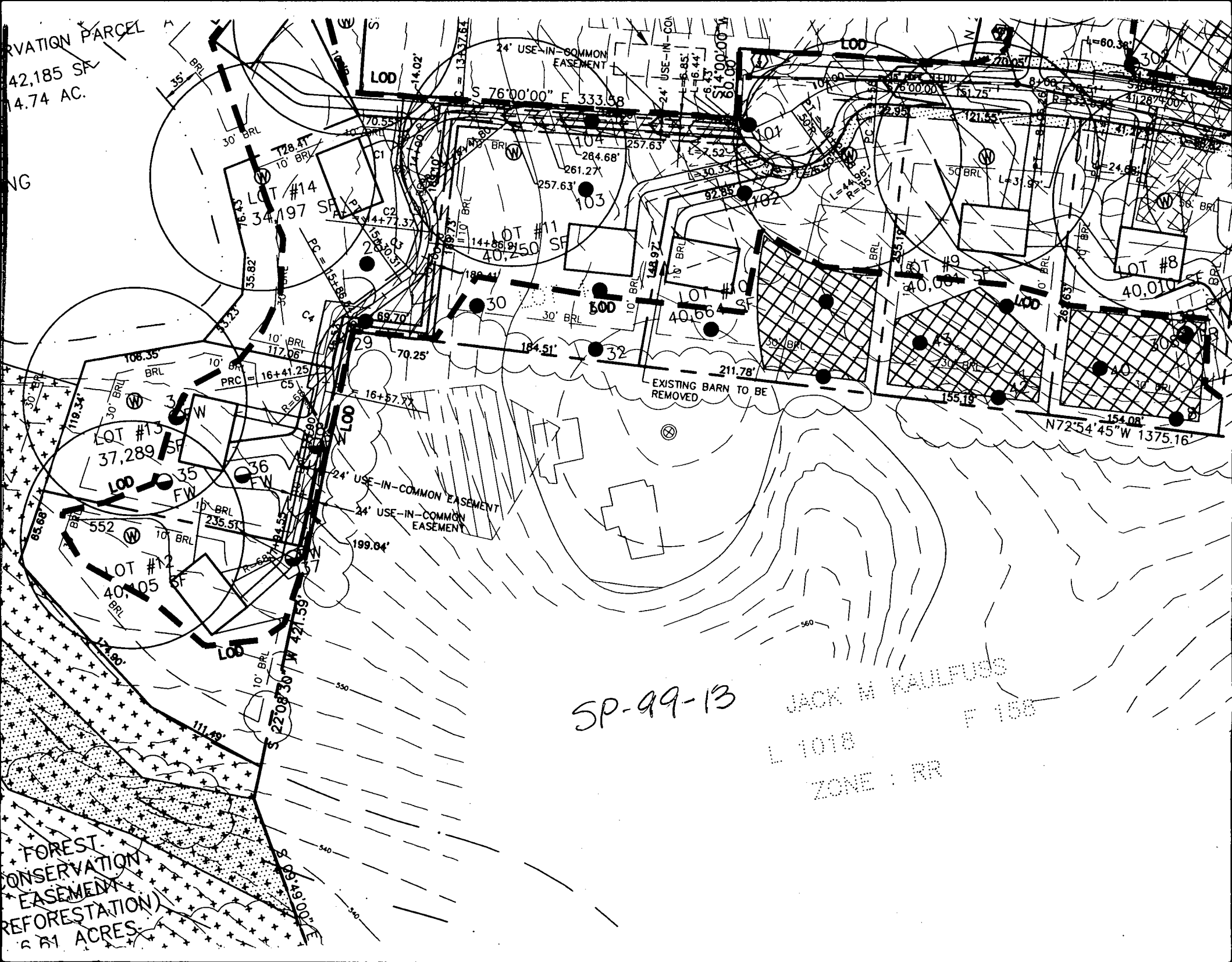
F 158



RESERVATION PARCEL
42,185 SF
4.74 AC.

NG

FOREST
CONSERVATION
EASEMENT
REFORESTATION
6.81 ACRES



SP-99-13

JACK H KAULFUSS

L 1018

ZONE : RR

F 155

