

LAYOUT 5/30/02 PM INSP 4 6/7/02 1:00
 INSP 2 6/4/02 3:00 INSP 5 6/11/02 2-3
 INSP 3 6/5/02 1:00 INSP 6 6/12/02 ~~1:00~~ NOON

6/13/02 10-11
7/19/02 pm pump test
8/26/02 NOON pump + alarm

ISSUE DATE: 5/23/2002
 APPROVAL DATE: 8/26/02

**PERMIT
INDEXED**

P 516990
 A 59915-D

04-363442

**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, Sykesville PHONE NUMBER: 410-795-5670
 SUBDIVISION: Monticello LOT NUMBER: 2
 ADDRESS: 1706 Oakdale Drive PROPERTY OWNER: D. R. Horton
 SEPTIC TANK CAPACITY (GALLONS): 1250 OUTLET BAFFLE FILTER REQUIRED
 PUMP CHAMBER CAPACITY (GALLONS): 1250 COMPARTMENTED TANK REQUIRED
 NUMBER OF BEDROOMS: 4
 SQUARE FEET PER BEDROOM: 180
 LINEAR FEET OF TRENCH REQUIRED: 240

| | |
|-----------|---|
| TRENCHES: | Trench to be 3.0 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: | Place distribution box as shown on approved site plan. Run trenches on contour in both directions. System layout may be altered at time of layout inspection. |
| NOTES: | No Basement service by gravity. |

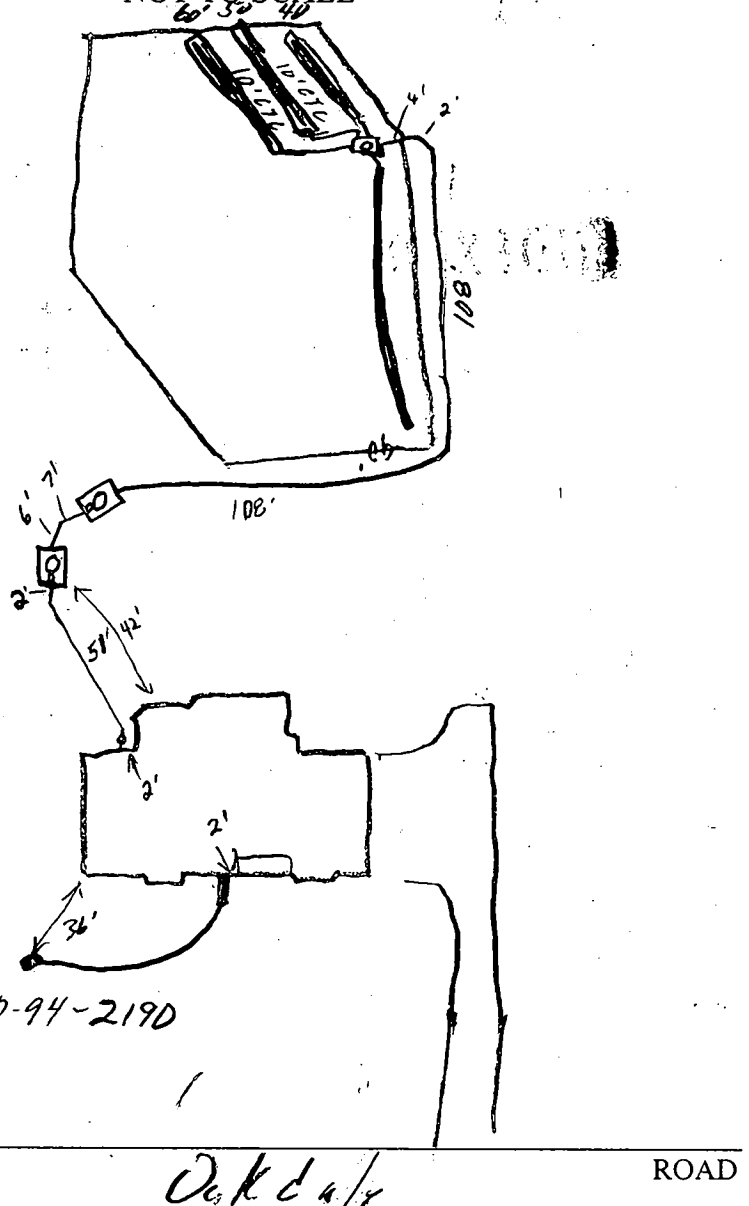
PLANS APPROVED: Steven R. Krieg / KG 2-7-02 DATE: 2/06/2002

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
 PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT
 ALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM**

A59915-D

NOT TO SCALE



| TRENCH/DRAINFIELD DATA | | |
|-------------------------|-------|--------|
| WIDTH | INLET | BOTTOM |
| 3' | 3' | 5' |
| NUMBER OF TRENCHES | | 4 |
| TOTAL LENGTH | | 240' |
| ABSORPTION AREA | | 7204 |
| DISTRIBUTION BOX LEVEL | | ✓ |
| DISTRIBUTION BOX BAFFLE | | ✓ |
| DISTRIBUTION BOX PORT | | — |

| SEPTIC TANK DATA | |
|-----------------------|----------|
| SEPTIC TANK 1 LEVEL ✓ | |
| CAPACITY | 1258 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 | 1250 GAL |
| SEAM LOC | Top |
| TANK LID DEPTH | 3' |
| BAFFLES | ✓ |
| BAFFLE FILTER | — |
| MANHOLE LOC | Center |
| 6" PORT LOC | Front |
| WATERTIGHT TEST | — |

PRE-CONSTRUCTION 5/30/02 Lot staked. Layout per B.P. w/ (2) 40', (2) 50' (SO)

(1) 60' trench (SO) 10' C7C

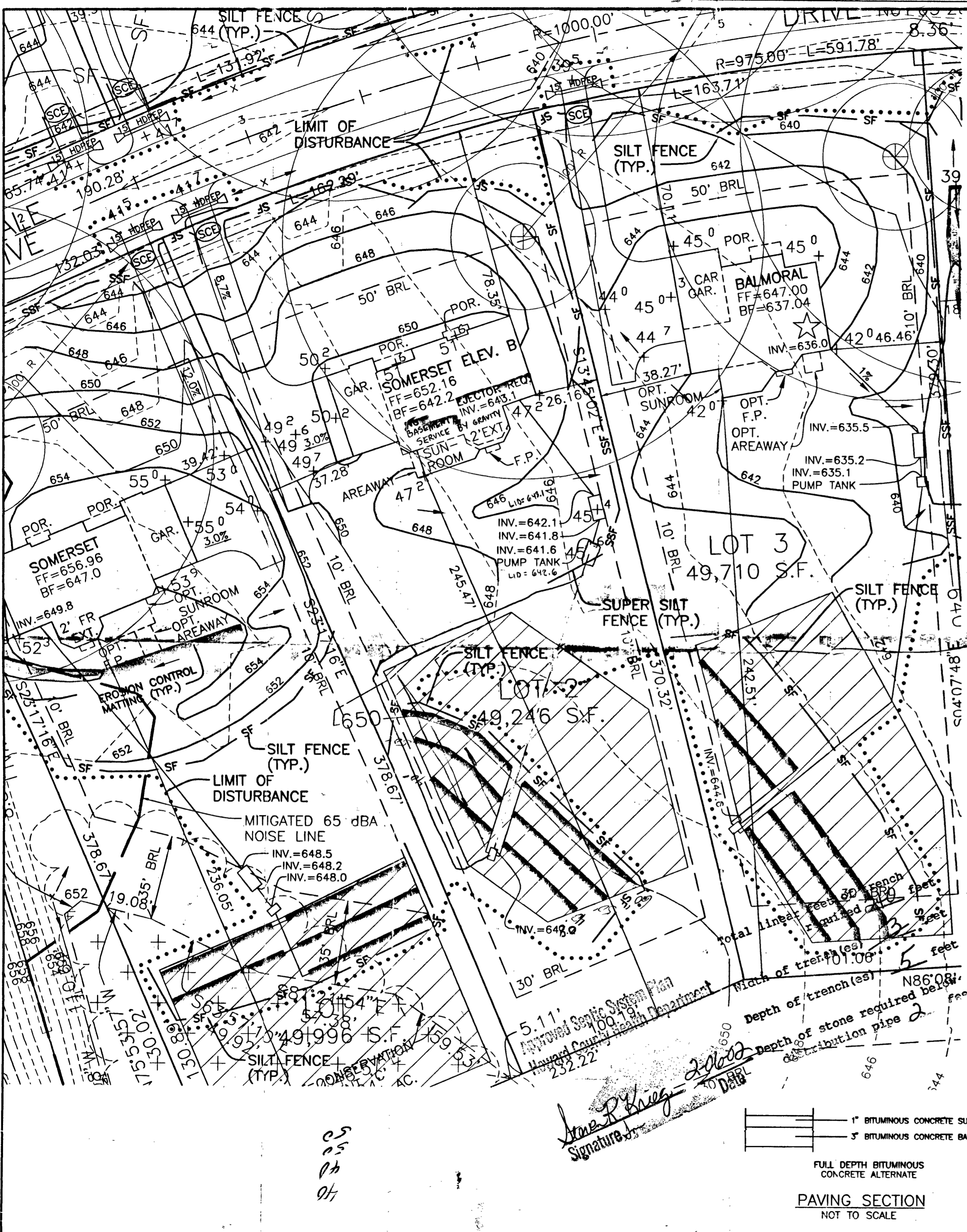
INSTALLATION 6/4/02 Tanks set, ok to cover (SO) 6/5/02 Dosing line installed (SO) 6/7/02 No addition work (SO) 6/11/02 No work done (SO)

6/12/02 Side of SRA closest to house, contour not as shown. Run (1) 80-90' trench on contour (SO) 6/13/02 ok to cover all work

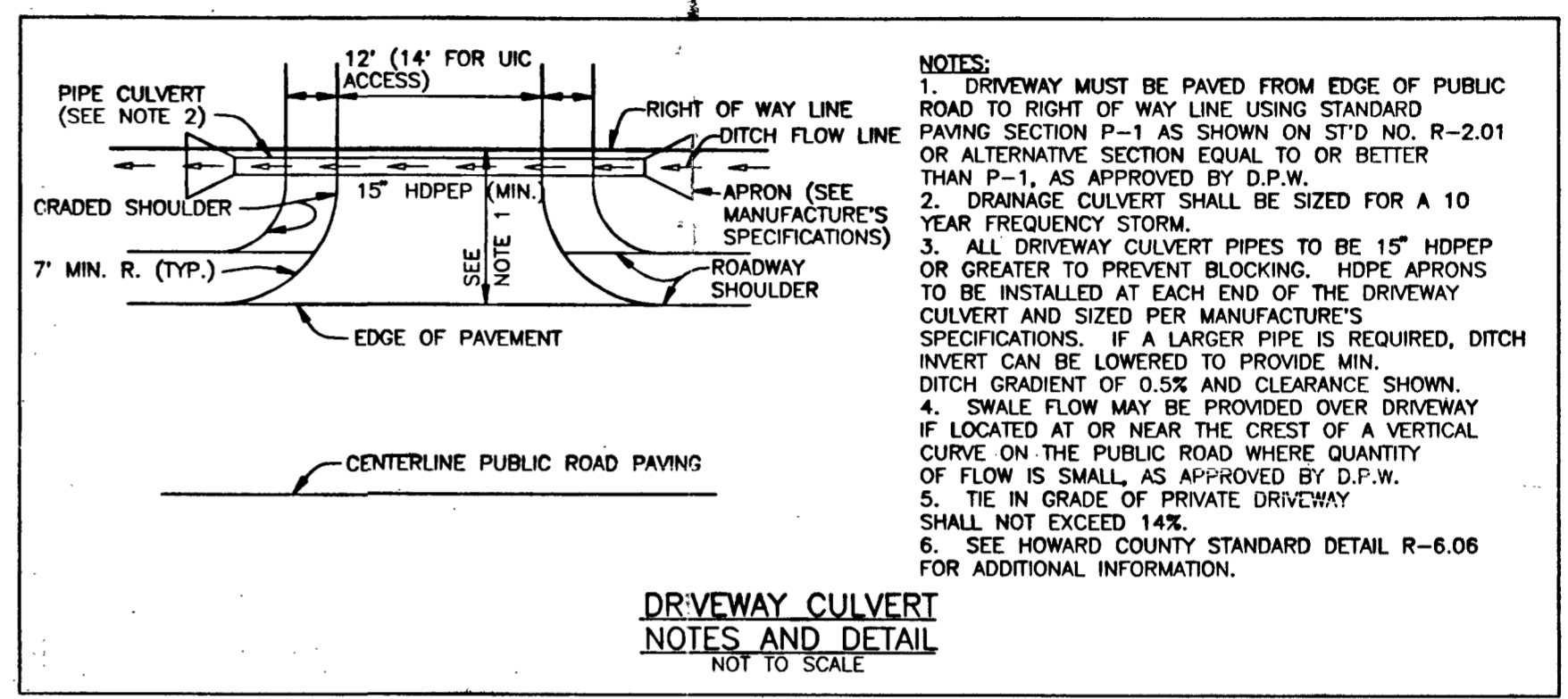
Pump & alarm tests needed (SO) 7/19/02 No power (SO)

8/26/02 Pump & Alarm tests OK (SO)

FINAL INSPECTOR [Signature] DATE OF APPROVAL 8/26/02



- NOTES:**
1. THE LOT SHOWN HEREON WAS RECORDED ON PLAT NUMBER 14086, REFER TO THE PLAT FOR LOT DIMENSIONS, LOT AREAS, ALL EASEMENTS AND BUILDING RESTRICTIONS.
 2. THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF 10,000 SQUARE FEET AS REQUIRED BY THE STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWER DISPOSAL IMPROVEMENTS OF ANY NATURE IN THIS AREA IS RESTRICTED UNTIL PUBLIC SEWER IS AVAILABLE. THIS EASEMENT SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENT INTO THE PRIVATE SEWERAGE EASEMENT. RECORDATION OF A MODIFIED SEWERAGE EASEMENT PLAT SHALL NOT BE NECESSARY.
 3. SEDIMENT AND EROSION CONTROLS WERE APPROVED BY HOWARD SOIL CONSERVATION DISTRICT UNDER GP-00-92 AND MODIFIED FOR THIS SPECIFIC HOUSE.
 4. TOPOGRAPHY SHOWN HEREON IS TAKEN FROM THE APPROVED ROAD CONSTRUCTION PLANS.
 5. EXACT LENGTH OF SEPTIC TRENCHES ARE BE DETERMINED BY THE HEALTH DEPARTMENT AT THE TIME OF PERMIT ISSUANCE.
 6. SPOIL FROM THE TRENCHING OF THE SEPTIC AREA IS TO BE PLACED ON THE UPHILL SIDE OF THE EXCAVATION FOR EACH INDIVIDUAL LOT.
 7. ALL SEDIMENT AND EROSION CONTROL FEATURES USED ON THIS SITE SHALL COMPLY WITH 1994 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL.
 8. ALL STORMWATER MANAGEMENT FEATURES USED ON THIS SITE MUST COMPLY WITH THE APPROVED ROAD CONSTRUCTION PLANS.



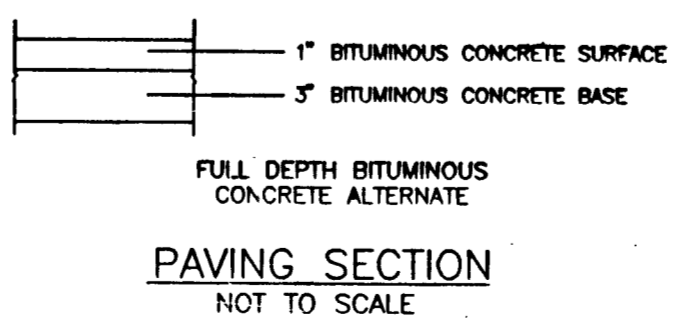
- LEGEND**
- LIMIT OF DISTURBANCE
 - EX. SILT FENCE
 - PROP. SILT FENCE
 - EX. SUPER SILT FENCE
 - PROP. SUPER SILT FENCE
 - EX. EARTH DIKE
 - PROP. EARTH DIKE
 - STABILIZED CONSTRUCTION ENTRANCE
 - EXISTING CONTOUR
 - PROPOSED CONTOUR
 - EROSION CONTROL MATTING

| NO. | DATE | REVISION |
|-----|------|----------|
| | | |

BENCHMARK
ENGINEERS & LAND SURVEYORS & PLANNERS
ENGINEERING, INC.

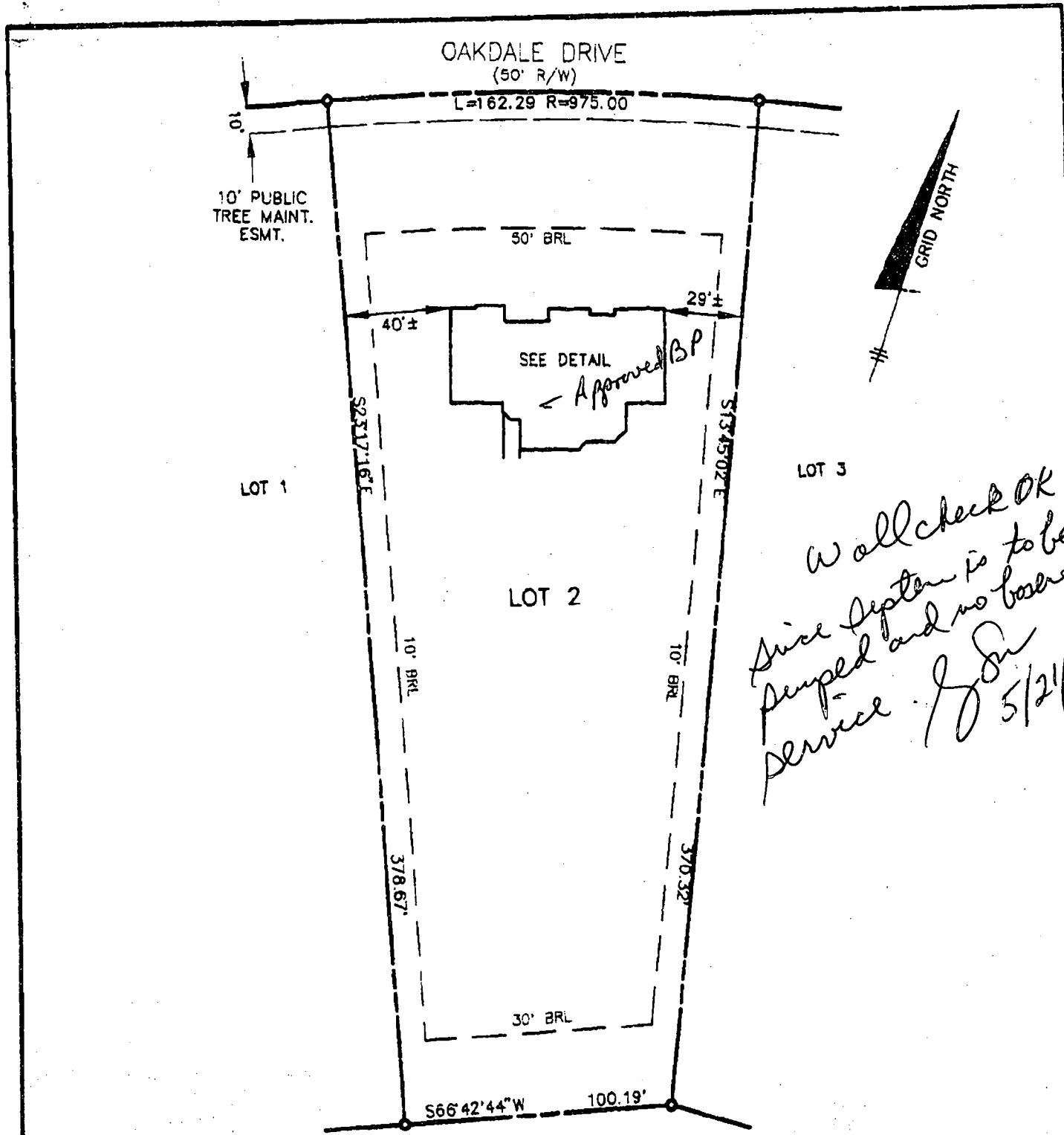
8480 BALTIMORE NATIONAL PIKE & SUITE 418
ELLCOTT CITY, MARYLAND 21043
PHONE: 410-485-8105 & FAX: 410-485-8844
EMAIL: benchmark@ccol.com

| | | | |
|---|--|-------------------------------------|--|
| OWNER/BUILDER: D.R. HORTON, INC. SUITE 230 1370 PICCARD DRIVE ROCKVILLE, MARYLAND 20850 1-301-670-6144 | | PROJECT: MONTICELLO LOT 2 | |
| LOCATION: 1706 OAKDALE DRIVE COOKSVILLE, MD 21723 TAX MAP 14 - BLOCK 19 - P/O PARCEL 246 4th ELECTION DISTRICT OF HOWARD COUNTY, MARYLAND | | TITLE: PERMIT PLAN | |
| HOUSE TYPE: SOMERSET | | DATE: DECEMBER 12, 2001 | |
| DESIGN: JMC | | PROJECT NO. 1304 | |
| DRAFT: JMC | | DRAWING 1 OF 1 | |
| SCALE: 1" = 30' | | | |



Approved Septic System Plan
Howard County Health Department
Signature: *[Signature]*
Date: 12/12/01

CS
PH
07



*Will check OK
since system is to be
pumped and no basement
service. J.D. 5/21/02*

TOP OF FOUNDATION WALL ELEV. = 651.1'
OFFSET DIMENSIONS TO PROPERTY LINES ARE ± 1'

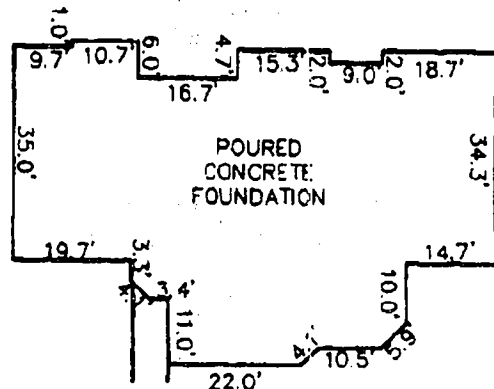
SURVEYOR'S CERTIFICATE

I HEREBY CERTIFY TO THE BEST OF MY PROFESSIONAL KNOWLEDGE, INFORMATION AND BELIEF, THAT THE DIMENSIONS OF THE BUILDING WALLS SHOWN HEREON ARE CORRECT; THAT THEY ARE BASED ON A FIELD RUN SURVEY PERFORMED BY BENCHMARK ENGINEERING, INC. ON APRIL 18, 2002; AND THAT THE PROPERTY OUTLINE SHOWN HEREON IS BASED ON THE PLAT PREPARED BY BENCHMARK ENGINEERING, INC. ENTITLED "MONTICELLO", AND RECORDED AMONG THE LAND RECORDS OF HOWARD COUNTY AS PLAT No. 14088

David N. Harris
DAVID N. HARRIS
REGISTERED PROFESSIONAL LAND SURVEYOR
MD REG. No. 1C978
FOR BENCHMARK ENGINEERING, INC.
MD REG. No. 351
RECORD PLAT No. 14088
FEMA FIRM No. 240044 0009 B
ZONE: C
DATED: 12/04/88

**BENCHMARK
ENGINEERING, INC.**

6480 BALTIMORE NATIONAL PIKE & SUITE 418
ELLSWORTH CITY, MARYLAND 21043
PHONE: 410-488-8100 • FAX: 410-488-0044
WWW.BENCHMARKENR.COM



FOUNDATION DETAIL

SCALE: 1" = 30'

**WALL CHECK
MONTICELLO**

LOT No. 2
1706 OAKDALE DRIVE

4TH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
SCALE: 1" = 50' DATE: 4-18-02
DRAWN BY: KLD

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 25.04.04 (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
Sylkesville 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): Allen Compton License#: MSD009

*A licensed individual must perform the actual installation. Apprentices must be under the supervision of a licensed journeyma 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: D.R. Horton Telephone #: 301-674-4922
Subdivision: Monticello Lot #: 2 Well Tag #: HO-94-2190
Site Address: 1206 Cardale DR

Submersible Pump Data Pitless Adapter Well Cap and Electric Conduit
Make: Goulds Make: Campbell Two piece watertight cap: yes
Model #: 75B07 Model#: Screened, vented well cap: yes
Pump Capacity 7 GPM Depth: 42" (36" min) Cap secured to casing: yes
Well Yield: 12 GPM NSF/WSC approved: yes Conduit min 18" B.G.: yes
Depth of well encountered at time of pump installation: 285(feet) Conduit secured to well cap: yes
If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.5.3
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 no

Piping to house House Connection
Type: 1" Black Plastic PVC sleeve to undisturbed soil at wall penetration: yes
PSI: 60 (160 psi min) Approximate length of sleeve: yes
Depth of supply line: 42 (36" min) 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.

Allen Compton 7-22-02
Signature of company representative responsible for installation Date

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

Date Insp. Requested: 6/17/02 Date Insp. Approved: 6/17/02 Inspector: (50) SRK
Inspection Data: Pitless adapter watertight & water supply line at least 30" 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 9688

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED MM DD YY 4 19 99

Depth of Well 22 285 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-2190

OWNER HIGHLAND Development STREET OR RFD SINOVA TOWN Glenwood SUBDIVISION Knapp Property SECTION LOT 2

WELL LOG Table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entries for Sand (0-59) and Gray Granite (59-285).

GROUTING RECORD Form: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL (CM), CEMENT (CM), BENTONITE CLAY (BC), NO. OF BAGS (20), NO. OF POUNDS (1880), GALLONS OF WATER (120), DEPTH OF GROUT SEAL (0-54).

CASING RECORD Form: casing types (ST), Nominal diameter top (6), Total depth of main casing (64).

OTHER CASING (if used) Form: diameter, depth (feet) from to.

SCREEN RECORD Form: screen type (ST), BR (BRASS), HO (OPEN HOLE), PL (PLASTIC), OT (OTHER).

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED (Y) Form: 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. 1 M SD0 24 DRILLERS SIGNATURE Joseph Z. Thayer LIC. NO. 1 D

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

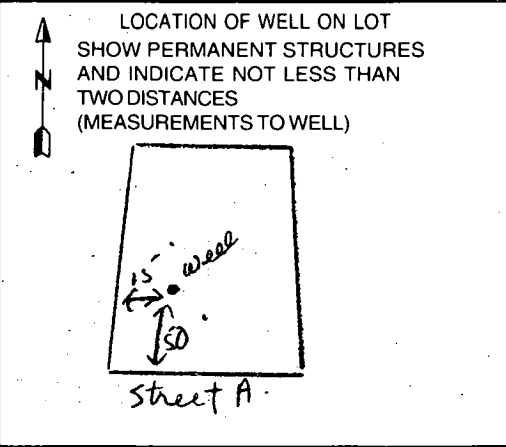
DEPTH (nearest ft.) Form: 1 Ho 62 285, 2, 3, DIAMETER OF SCREEN (56-60), SLOT SIZE 1, 2, 3.

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 O TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST Form: PUMPING TEST (3), HOURS PUMPED (3), PUMPING RATE (12), METHOD USED TO MEASURE PUMPING RATE (Bucket), WATER LEVEL (42), TYPE OF PUMP USED (S).

PUMP INSTALLED Form: DRILLER INSTALLED PUMP (YES), TYPE OF PUMP INSTALLED (S), CAPACITY: GALLONS PER MINUTE (31-35), PUMP HORSE POWER (37-41), PUMP COLUMN LENGTH (43-47), CASING HEIGHT (+ above, - below).



B 7478

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL please print or type

STATE PERMIT NUMBER

HO - 94 - 2190 fill in this form completely

Date Received (APA)

OWNER INFORMATION

Highland Development P.O. Box 228 Clarksville Md. 21029

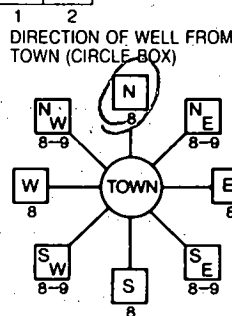
LOCATION OF WELL

Howard Knapps Property Glenwood

DRILLER INFORMATION

Joseph L. Mayne MSD 024 Joseph L. Mayne Well Drilling 5512 Ridge Rd. Mt. Airy Md 21771

DIRECTION OF WELL FROM TOWN (CIRCLE-BOX)



Street A NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) DISTANCE FROM ROAD 40 FT

WELL INFORMATION

APPROX. PUMPING RATE 5 APPROX. DAILY QUANTITY NEEDED 500

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

HOWARD 13 COUNTY NAME COUNTY NO. STATE SIGNATURE DATE ISSUED 03/10/99 CO SIGNATURE EXP. DATE 03/09/00

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- Domestic Potable Supply & Residential Irrigation, Farming, Industrial, Commercial, Dewatering, Public Water Supply Well, Test, Observation, Monitoring, Geo-Thermal

APPROXIMATE DEPTH OF WELL 300 FEET APPROXIMATE DIAMETER OF WELL 6 INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) AIR-ROtary JETTED AIR-PERcussion ROTARY (Hydraulic Rotary) CABLE REVerse-ROtary DRive-POINT

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

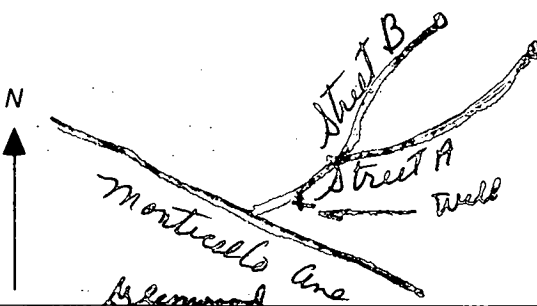
THIS WELL WILL NOT REPLACE AN EXISTING WELL THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. Well

WRITE THE BOX NUMBER FROM THE MAP HERE

E 796 N 5424

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



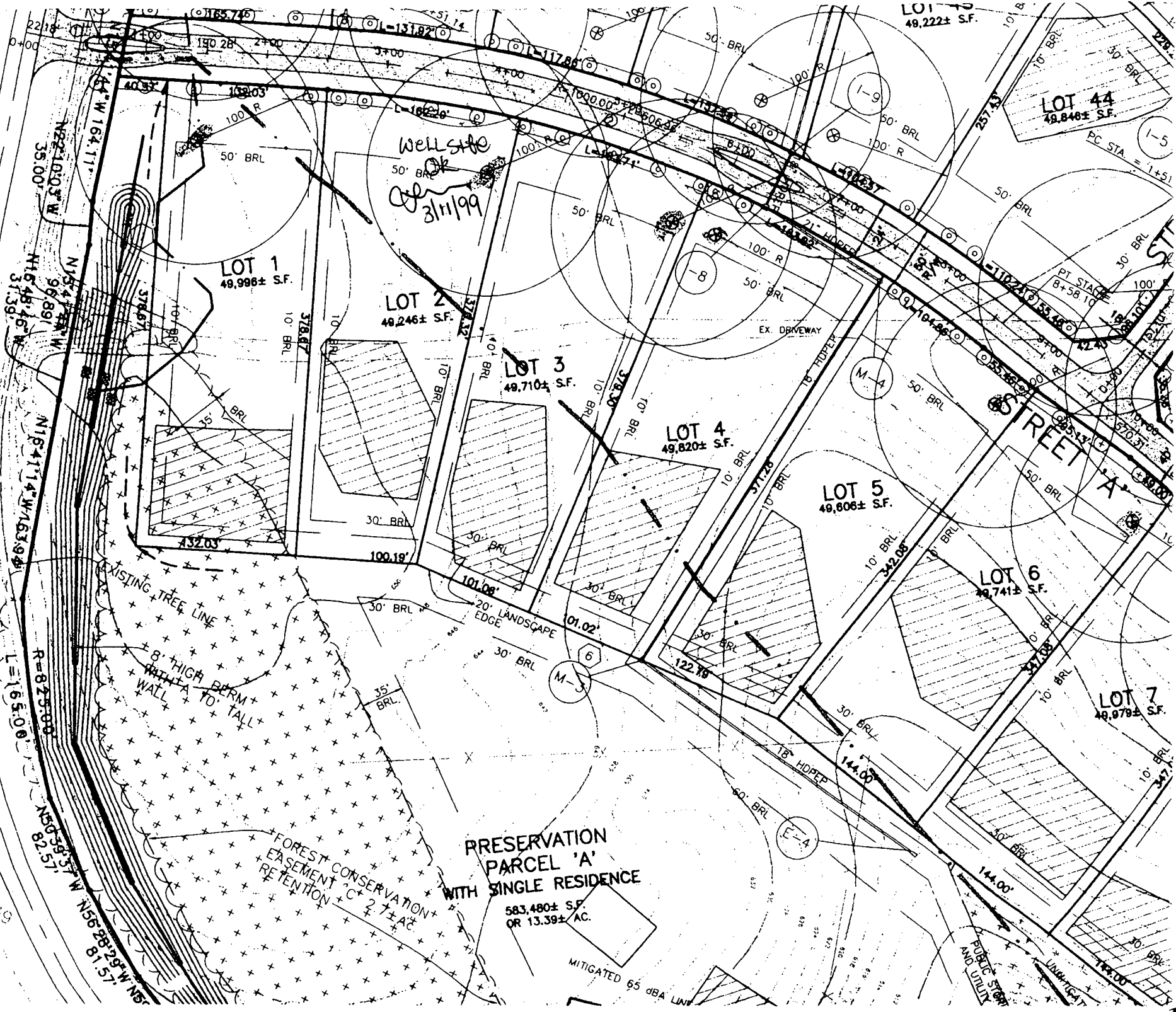
Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROP. PERMIT NUMBER 54 G A P PERMIT NO. HO - 94 - 2190

SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

GRID NORTH



Well Site
3/11/99

LOT 1
49,998± S.F.

LOT 2
48,246± S.F.

LOT 3
49,710± S.F.

LOT 4
49,820± S.F.

LOT 5
49,806± S.F.

LOT 6
49,741± S.F.

LOT 7
49,978± S.F.

PRESERVATION
PARCEL 'A'
WITH SINGLE RESIDENCE
583,480± S.F.
OR 13.39± AC.

LOT 44
49,846± S.F.

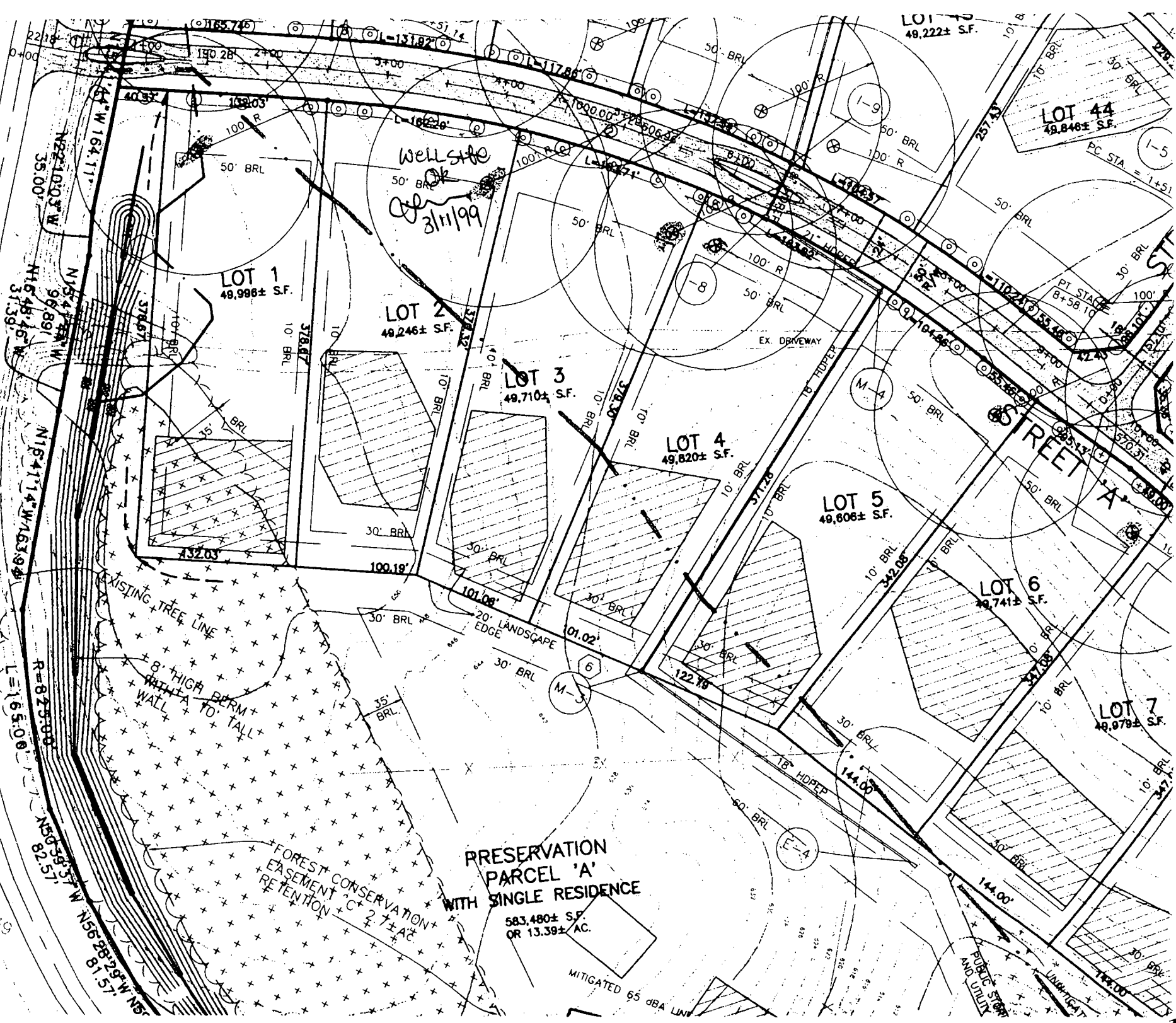
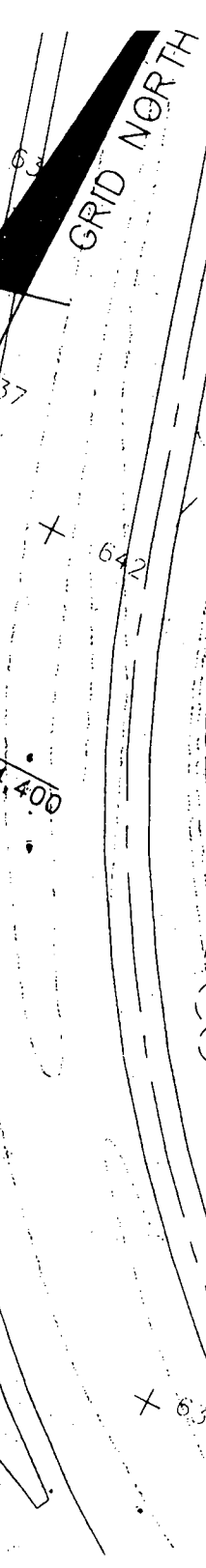
LOT 15
49,222± S.F.

637

007

04,400

639



PC STA. = 1+51

PT. STAKE
B+56.10

STREET 'A'

144.00'

144.00'

MITIGATED 65 dBA LINE

PUBLIC STORM
AND UTILITY

UNWARRANTED

4/21/98 - 4/28
5/19/98 - 5/22

APPLICATION

PERCOLATION TESTING

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

56 LOTS
EXISTING HOUSE(S) - 26605-52671 CS
TO BE RECONSTRUCTED
4 DAYS FOR PERMITS
WET SEASON TESTING
4 DAY 1500
FOLLOW-UP TESTING
WILL PARTICIPATE IN TESTING
IMPROVED PLAN/
APPLICATOR (CW)

A 59914

P _____

DISTRICT _____

DATE 4/3/98

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 ALFRED KNAPP

ADDRESS MONTICELLO AVE / SYKESVILLE PHONE 410-465-4242

AGENT OR PROSPECTIVE BUYER CLARK SPERRY / SOC GROUP

ADDRESS 3430 BALLMAN NOT. PIKE PHONE 410-465-4244

PROPERTY LOCATION:

SUBDIVISION Knapp Prop. LOT NO. _____

ROAD AND DESCRIPTION M

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] SECURITY DIV.
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR STEVE SHIPLE - TSA DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

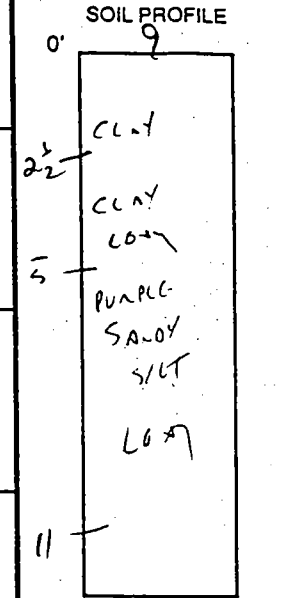
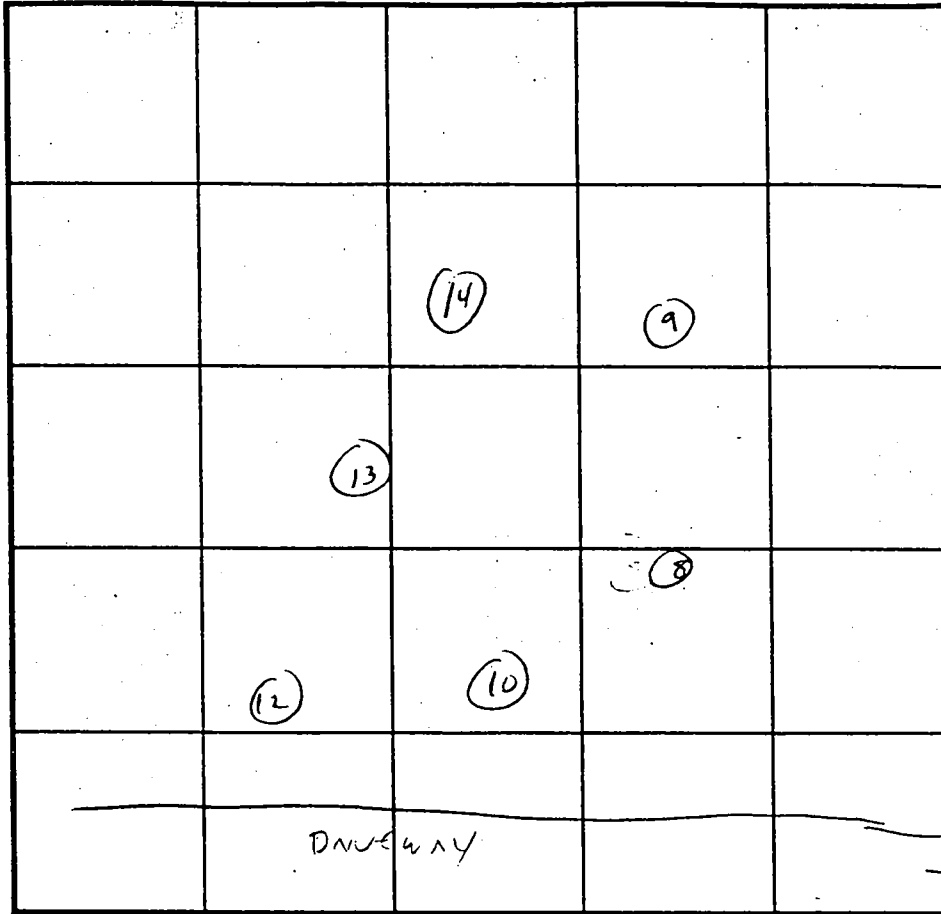
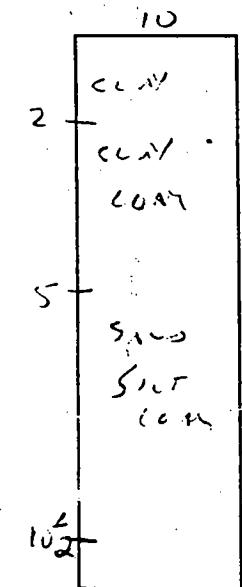
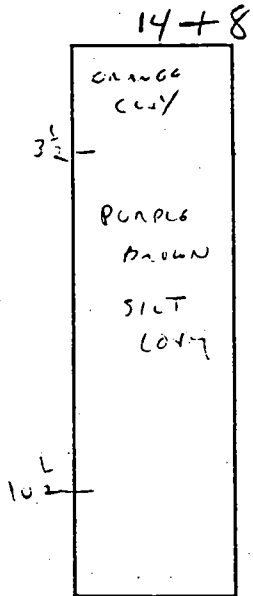
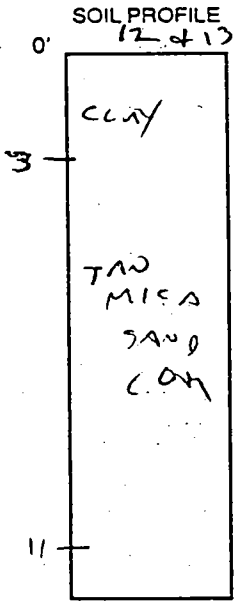
REASONS FOR REJECTION OR HOLDING _____

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

KNAPP SUBD.
A59915
COUNTY #



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

| DATE | TEST NO. | DEPTH | PRE-WET | | TEST - 1" DROP | | TIME |
|---------|----------|--------|---------|------|----------------|------|-------|
| | | | START | STOP | START | STOP | |
| 4/23/56 | 12 | 4 | 3:57 | 4:00 | 4:00 | 4:05 | 5 MIN |
| | 13 | VIS CK | 3-11 | ' | | | |
| | 14 | 4 | 4:00 | 4:01 | 4:01 | 4:03 | 2 MIN |
| | 10 | 4 1/2 | 4:04 | 4:07 | 4:07 | 4:12 | 5 MIN |
| | 8 | 3 1/2 | 4:05 | 4:07 | 4:07 | 4:11 | 4 MIN |
| | 9 | 4 1/2 | 4:07 | 4:08 | 4:08 | 4:10 | 2 MIN |

REMARKS _____
 TYPE OF SOIL _____
 TESTED BY C. Willa ALSO PRESENT SPERRY
 TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____
 INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____

4/21/98 - 4/28
5/19/98 - 5/22

APPLICATION

PERCOLATION TESTING

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

56 LOTS
EXISTING HOUSE(S) - W6665-5207165
TO BE PERMITTED
4 DAYS FOR PERMITS
WET SEASON TESTING
4 DAY FOR
FOLLOW-UP TESTING
will provide submit
FEE'S &
IMPROVEMENT PLAN/
APPLICATION (CW)

A 59914
P _____

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

DATE 4/3/98

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER ALFRED KNAPP

ADDRESS MONTICELLO AVE / SYKESVILLE PHONE 410-465-4242

AGENT OR PROSPECTIVE BUYER CLARK SPERRY / SOC GROUP

ADDRESS 8480 BALLEWINE RD. PIKE PHONE 410-465-4244

PROPERTY LOCATION:

SUBDIVISION Knapp Prop. LOT NO. _____

ROAD AND DESCRIPTION M

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.

Steve Shiple SECURITY DIV.
(SIGNATURE OF APPLICANT)
STEVE SHIPLE - TSA

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

Monticello Drive

COUNTY #

SOIL PROFILE

0' 306
or/red
cl lm

3.0' pink
brown
mica
sandy
clay
loam

11.0' ↓

305

3.0' or/red
cl lm

orange
pink
silty
clay
loam
powdery

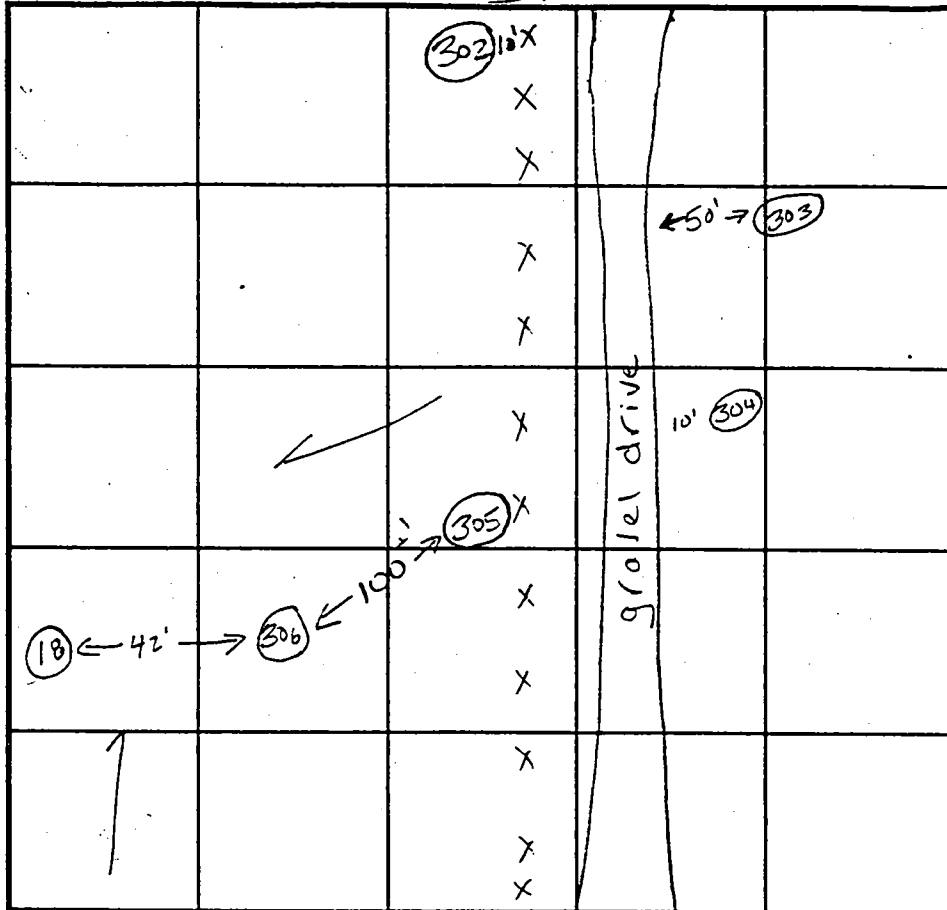
2.0' ↓

304

orange
clay
loam

3.5' pink
yellow
silty
clay
loam

12.0' ↓



SOIL PROFILE

~~305~~ 302

0' or/red
cl lm

3.0' tan
orange
silty
clay
lm

2.0' ↓

303

orange
clay
lm

3.0' pink, tan,
yellow
silty
clay
20% rx
frags

11.5' ↓

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

| DATE | TEST NO. | DEPTH | PRE-WET | | TEST - 1" DROP | | TIME | |
|---------|----------|--------|-----------------------|-----------------------|---------------------|---------------------|-------|--|
| | | | START | STOP | START | STOP | | |
| 5.19.98 | 306 | 4.0'S | 10:02 | 10:03 ³⁰ | 10:03 ³⁰ | 10:05 ³⁰ | 2 min | |
| | | 11.0'D | visual | ok - see profile | | | | |
| | 305 | 12.0'D | visual | only - see profile | | | | |
| | 304 | 4.0'S | 10:14 ¹⁵ | 10:18 | 10:18 | 10:24 ³⁰ | 6:30 | |
| | | 12.0'D | visual | ok - see profile | | | | |
| | 303 | 11.5'D | visual | only - ok see profile | | | | |
| | 302 | 3.5'S | 10:52 | 10:52 ³⁰ | 10:52 ³⁰ | 10:53 | 5 sec | |
| | | 12.0'D | visual | ok - see profile | | | | |
| | | | hole repaired 3 times | | | | | |

REMARKS test holes staked

TYPE OF SOIL lim Maiste

TESTED BY Jim Maiste ALSO PRESENT Clark Sperry

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 4 1/2 minutes TRENCH WIDTH _____

INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT/BEDROOM 180

4/21/98 - 4/28
5/19/98 - 5/22

APPLICATION

PERCOLATION TESTING

A 59915

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

56 LOTS
EXISTING HOUSE(S) - WELLS - 56071
TO BE ELIMINATED
4 DAYS FOR PERMITS
WET SEASON TESTING
4 DAY 1500
FOLLOW-UP TESTING
will promptly submit
IMPA

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

DATE 4/3/98

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PLAN/
APPLICATION
(CW)

PROPERTY OWNER ALFRED KNAPP

ADDRESS MONTICELLO AVE / SYKESVILLE PHONE 410-465-4212

AGENT OR PROSPECTIVE BUYER CLARK SPERRY / SOC GROUP

ADDRESS 8480 Ballenger Not. PIKE PHONE 410-465-4214

PROPERTY LOCATION:

SUBDIVISION Knapp Prop. LOT NO. _____

ROAD AND DESCRIPTION M

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 UNDERSTAND THE

FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCE ALSO AGREE TO

COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT. _____ (SIGNATURE OF APPLICANT) COUNTY OFF.

APPROVED BY _____ FOR STEVE SHIPLE - TS DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

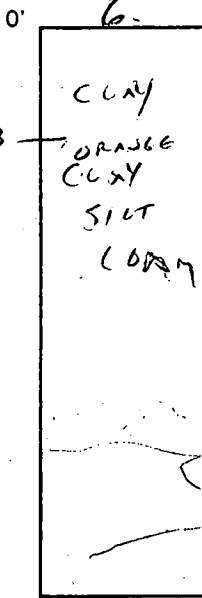
PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

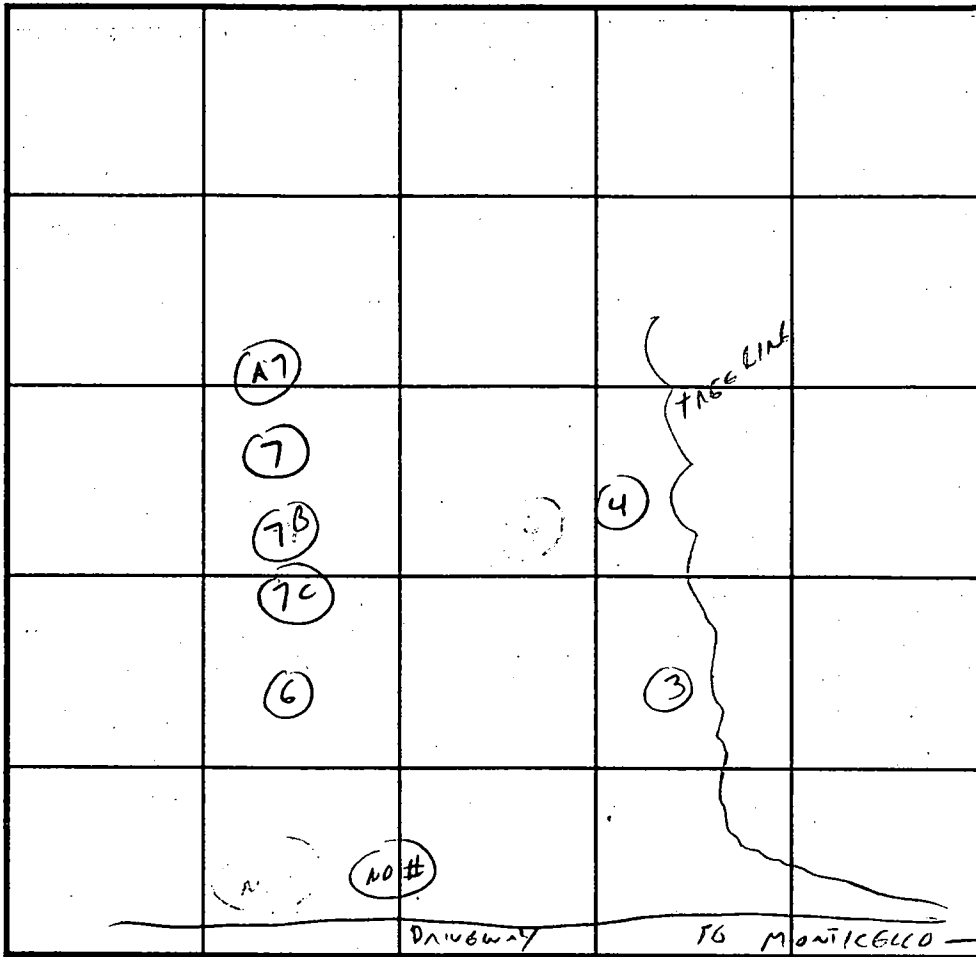
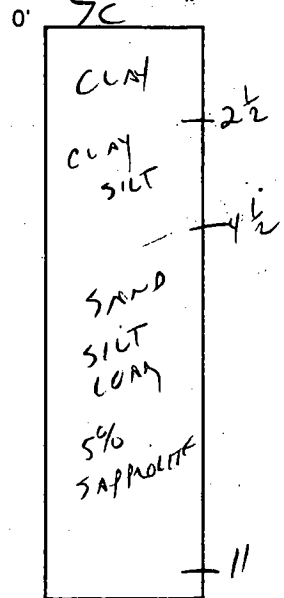
THIS IS NOT A PERMIT

KNAPP SUBD.
A59914/5
COUNTY#

SOIL PROFILE



SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

| DATE | TEST NO. | DEPTH | PRE-WET | | TEST - 1" DROP | | TIME |
|---------|----------|---|---------|------|----------------|------|------|
| | | | START | STOP | START | STOP | |
| 4/23/98 | 6 | 5 | 4:11 | 4:16 | 4:16 | 4:23 | 7MIN |
| | A7C | VIS OK | 4-11' | | | | |
| | 7 | NOT SEEN - ABANDONED BY CONTRACTOR - ROCK | | | | | |
| | 7B | NOT SEEN - ABAN | | | | | |
| | 7C | VIS OK | 4-11' | | | | |
| | (303) | VIS OK | 3-11' | | | | |
| | NO# | VIS OK | 3-11' | | | | |
| | 1 | | | | | | |
| | | | | | | | |
| | | | | | | | |

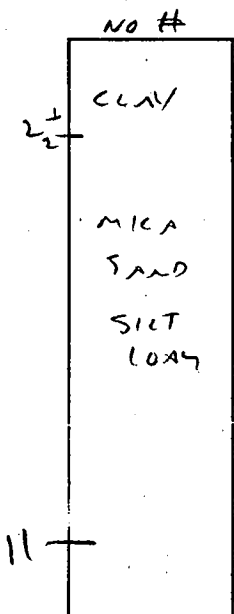
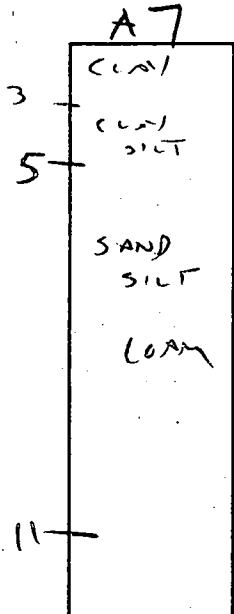
REMARKS _____

TYPE OF SOIL _____

TESTED BY CWILLIAMS ALSO PRESENT SPERRY

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

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



Perc Holes That Correspond To Different
Lots For Knapp Property - (Lots 1-28)

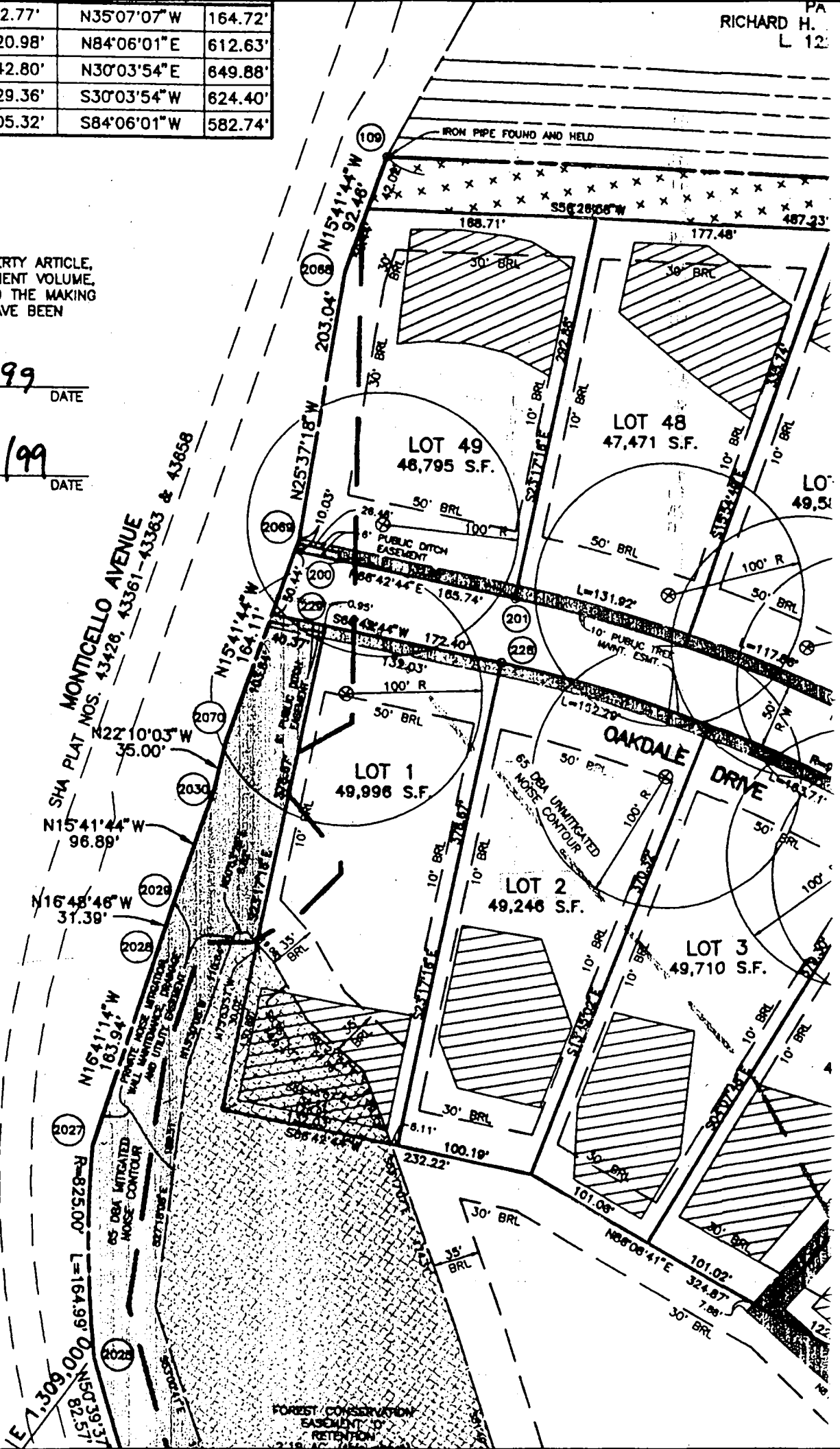
| <u>Lot # -</u> | <u>Perc Hole Numbers for Lot -</u> |
|----------------|---------------------------------------|
| 1 | 1, 2, 2A, 3, 4, 5, 7C, 302 |
| 2 | 6, 7B, 7C, 8, 303 |
| 3 | 6, 8, 9, 10, 304 |
| 4 | 10, 11, 12, 13, 14, 305 |
| 5 | 13, 14, 15, 16, 17 |
| 6 | 15, 16, 18, 19, 306 |
| 7 | 18, 19, 20, 21, 22, 23 |
| 8 | 23, 24, 25, 26, 27 |
| 9 | 37, 38, 39, 40 |
| 10 | 39, 40, 41, 42, 43, 44 |
| 11 | 43, 44, 45, 46, 47, 48 |
| 12 | 47, 48, 49, 50, 51, 52 |
| 13 | 51, 52, 53, 54, 55, 56 |
| 14 | 55, 56, 57, 58 |
| 15 | 59, 60, 61, 62 |
| 16 | 62, 63, 64, 65, 317 |
| 17 | 69, 70, 71, 72, 314, 315, 315A, 316 |
| 18 | 72, 73A, 74, 312, 313, 314 |
| 19 | 78, 78A, 80, 311, 311A, 312, 313 |
| 20 | 80, 81, 82, 83, 84, 310 |
| 21 | 83, 84, 85, 86, 87, 309, 310 |
| 22 | 85, 86, 87, 87A, 88, 89, 90, 91A, 309 |
| 23 | 90, 91, 91A, 92, 93 |
| 24 | 91, 92, 94, 95, 96, 308 |
| 25 | 95, 96, 97, 101, 103, 308 |
| 26 | 100, 101, 102, 103, 105, 320 |
| 27 | 102, 318, 320 |
| 28 | 103, 104, 105, 106, 107, 108, 109 |

| | | | | | |
|--------|---------|-----------|---------|-------------|---------|
| 25.00' | 164.99' | 11'27'32" | 82.77' | N35°07'07"W | 164.72' |
| 25.00' | 622.13' | 34°46'34" | 320.98' | N84°06'01"E | 612.63' |
| 20.00' | 661.41' | 37°09'11" | 342.80' | N30°03'54"E | 649.88' |
| 80.00' | 635.47' | 37°09'11" | 329.36' | S30°03'54"W | 624.40' |
| 75.00' | 591.78' | 34°46'34" | 305.32' | S84°06'01"W | 582.74' |

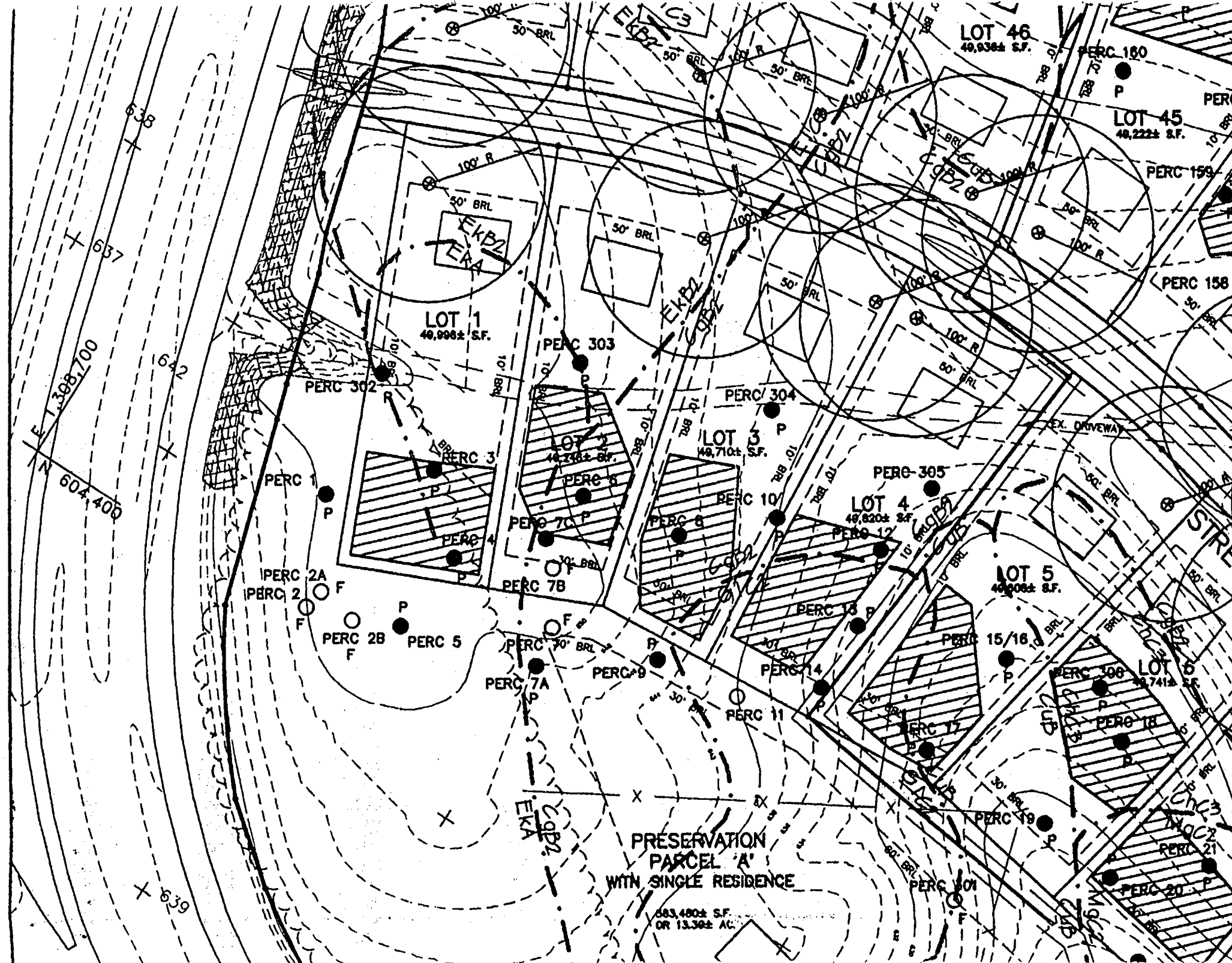
EMENTS § 3-108, THE REAL PROPERTY ARTICLE, CODE OF MARYLAND, 1988 REPLACEMENT VOLUME, (MENTED) AS FAR AS THEY RELATE TO THE MAKING AT AND THE SETTING OF MARKERS HAVE BEEN WITH.

[Signature] 11/4/99
DATE
PROPERTY LINE SURVEYOR #224

[Signature] 11/9/99
DATE
AGENCY, VICE PRESIDENT
INC., INC.



OWNER/DEVELOPER:



LOT 46
49,938± S.F.

LOT 45
49,222± S.F.

LOT 1
49,998± S.F.

LOT 3
49,710± S.F.

LOT 4
49,820± S.F.

LOT 5
49,998± S.F.

LOT 6
49,741± S.F.

PRESERVATION
PARCEL 'A'
WITH SINGLE RESIDENCE

583,480± S.F.
OR 13.39± AC.

638

637

E 1,388.700

604.400

632

631

639

PERC 160

PERC 159

PERC 158

PERC 303

PERC 304

PERC 305

PERC 1

PERC 2A

PERC 2

PERC 2B

PERC 5

PERC 3

PERC 6

PERC 7A

PERC 7B

PERC 9

PERC 7A

PERC 11

PERC 14

PERC 15/16

PERC 18

PERC 17

PERC 19

PERC 21

PERC 20

PERC 306

PERC 18

PERC 17

PERC 19

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