

LAYOUT 5/14/02 11:00 INSP 4 _____
 INSP 2 5/23/02 AM INSP 5 _____
 INSP 3 _____ INSP 6 _____

OK-365712

ISSUE DATE: 4/18/2002
 APPROVAL DATE: 5/23/02 JB

PERMIT INDEXED

P 516937
 A 59946Q

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

Miller Excavating Company, Inc IS PERMITTED TO INSTALL ALTER

ADDRESS: 13850 W Old Baltimore Rd, Boyds PHONE NUMBER: 301-349-4400

SUBDIVISION: Westwoods at Cherry Grove LOT NUMBER: 20

ADDRESS: 16925 Old Sawmill Road PROPERTY OWNER: D.R. Horton

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: 240 HOUSE SERVED BY PUBLIC WATER

TRENCHES:	Trench to be <u>20</u> feet wide. Inlet <u>3.0</u> feet below original grade. Bottom maximum depth <u>4.5</u> feet below original grade. Effective area begins at 1.5 feet below original grade. 1.5 feet of stone below distribution pipe.
LOCATION:	Facing the lot from the road, place the distribution box 20' from the left lot line and 110' from the back lot line, running trenches on contour.
NOTES:	Garvity basement service not proposed. SHALLOW SYSTEM ONLY due to water table concerns. Exact trench lengths and orientation to be determined during layout inspection.

PLANS APPROVED: SRK MODIFIED BY MR 3/13/02 OK DATE: 2-12-02

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

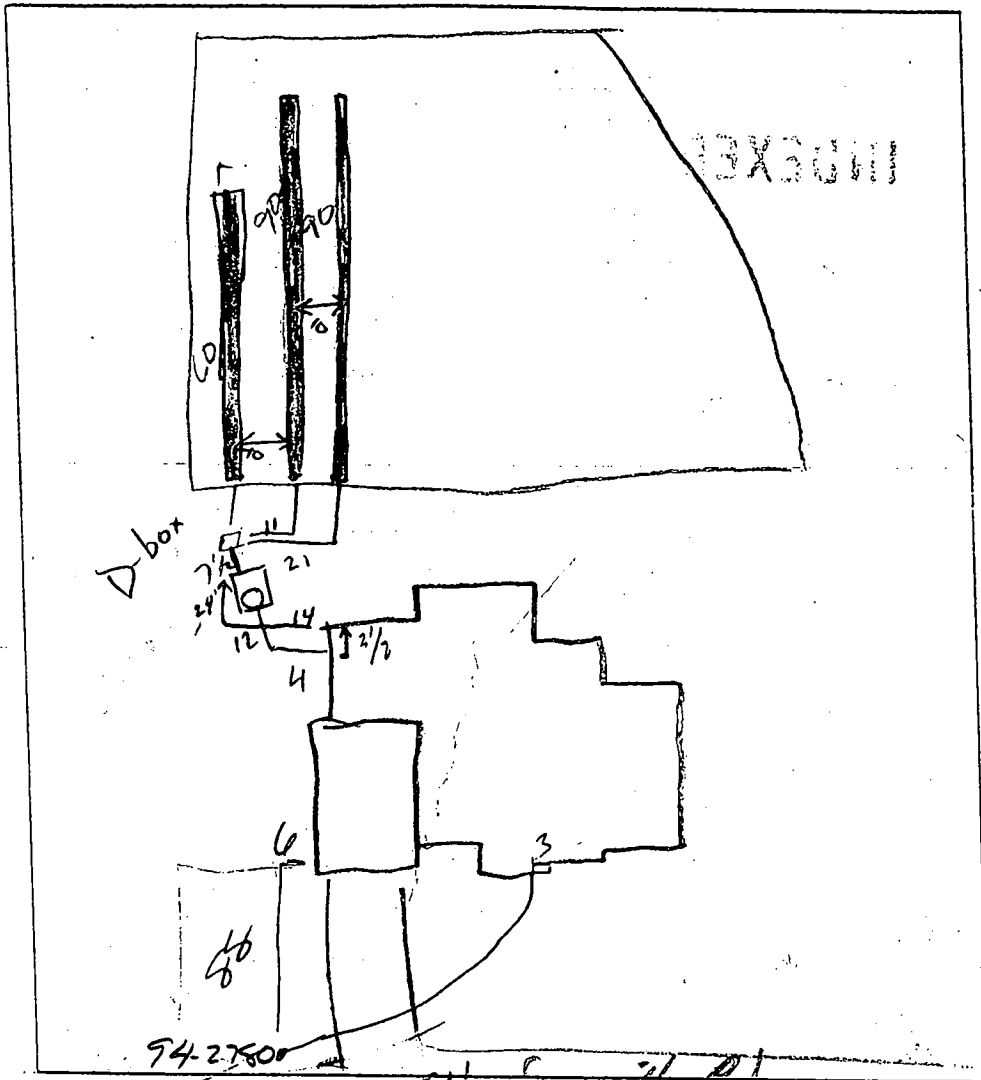
BUILDING PERMIT SIGNED AND RETURNED

9/6/2002 000137190 UG PROPANE TANK

A59946Q

240
3
720

NOT TO SCALE



TRENCH DATA	
TRENCH WIDTH	3
TRENCH INLET DEPTH	3
TRENCH BOTTOM DEPTH	4 1/2
DEPTH OF STONE	1 1/2
NUMBER OF TRENCHES	3
TOTAL TRENCH LENGTH	240
ABSORBENT AREA	720
DISTRIBUTION BOX LEVEL	<input checked="" type="checkbox"/>
BAFFLE IN DISTRIBUTION BOX	<input checked="" type="checkbox"/>

SEPTIC TANK DATA	
SEPTIC TANK	1500 GALLONS
MANHOLE RISER	front (to grade)
6 INCH INSPECTION PORT	1 1/2
PUMP CHAMBER DATA N/A	
PUMP CHAMBER GALLONS	
MANHOLE RISER	
ALARM	
PUMP PERFORMANCE TEST	

PRE-CONSTRUCTION INSPECTION: 5/15/02 Lot staked, contours as shown. Install 60' x 90' x 90' trenches on contour. (S6)

INSPECTION COMMENTS: 5/22/02 inspected system installed a 60' x 90' x 90' w/ 10' centers, O.K. to cover JB

INSPECTOR John

DATE SYSTEM APPROVED 3/23/03 **BUILDING PERMIT SIGNED AND RETURNED**

Building Address 16925 Old Sawmill Rd
Woodbine, MD 21797

Suite/Apt. # _____ SDP/WPI/Petition # _____

Census Tract 604002 Subdivision Westwoods @ Cherry Grove

Section _____ Area _____ Lot 20

Tax Map 13 Parcel 341 Grid 1E

Zoning RC Map Coordinates 844 Lot size _____

Existing Use Single Family Home

Proposed Use same

Estimated Construction Cost \$ 3000

Description of Work Installation of
1000 gallon underground propane
tank

Occupant or Tenant _____

Contact Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Property Owner's Name DR Horton ^{Mark} 240-876-5439

Address 1370 Piccard Dr # 720

City Rockville State MD Zip Code 20850

Home Phone _____ Work Phone 670-6144

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

Phone mgr Troy Sahaydak Fax _____

Contractor Company United Firepane, Inc.

Contact Person Alice E Garrett

Address 106 W. Kinnegrove Blvd

City MD State MD Zip Code 21771

License No. 61475

Phone 301-823-2828 Fax 301-279-3944

Engineer or Architect Company _____

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

Building Characteristics

Height: _____

No. of stories: _____

Gross area, sq. ft. per floor: _____

Use group: _____

Construction type:
 Reinforced Concrete
 Structural Steel
 Masonry
 Wood Frame
 State Certified Modular

Utilities

Water Supply:
 Public
 Private

Sewage Disposal:
 Public
 Private

Electric Yes No
 Gas Yes No

Heating System:
 Electric Oil
 Natural Gas
 Propane Gas

Sprinkler system: N/A
 Full
 Partial
 Other Suppression
 # of Heads

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics

SF Dwelling SF Townhouse
Depth Width

1st floor: _____

2nd floor: _____

Basement: _____

Finished Basement Unfinished Basement
 Craw space Slab on Grade
 No. of Bedrooms: _____

Multi-family dwellings:
 No. of efficiency units: _____
 No. of 1 BR units: _____
 No. of 2 BR units: _____
 No. of 3 BR units: _____

Other Structure: _____
 Dimensions: _____
 Footings: _____
 Roof: _____

State Certified Modular
 Manufactured Home

Utilities

Water Supply:
 Public
 Private

Sewage Disposal:
 Public
 Private

Electric Yes No
 Gas Yes No

Heating System:
 Electric Oil
 Natural Gas
 Propane Gas

Sprinkler system: N/A
 NFPA #13D
 NFPA #13R
 Other:

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THEREOF; (4) THAT HE/SHE WILL PERFORM ANY WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSES OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature [Signature] Print Name Alice E Garrett
 Title/Company Master Gas Fitter Date 6/24/07

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
**** PLEASE WRITE NEATLY AND LEGIBLY ****

FOR OFFICE USE ONLY

AGENCY	DATE	SIGNATURE APPROVAL	PROPERTY ID
Land Development			22-358
State Highway			
Building Official			
Dev Engineering			
Health			
Air Pollution			
Settlement/Contract Approval (required prior to issuance)			
YES <input type="checkbox"/> NO <input type="checkbox"/>			
CONTINGENCY CONSTRUCTION START <input type="checkbox"/>			
ONE STOP SHOP <input type="checkbox"/>			

RECEIVED

Front Yard Setback Information: _____

Minimum setbacks met: _____

Setback permit required: _____

SDP/Redline approval date: _____

Property ID: 22-358

Filing fee: \$100.00

Permit fee: _____

Excise tax: _____

Add. per fees: _____

TOTAL FEES: _____

Sub-total paid: _____

Balance due: _____

Check # 1170

Validation: _____

Accepted by: _____

Distribution of Copies: _____

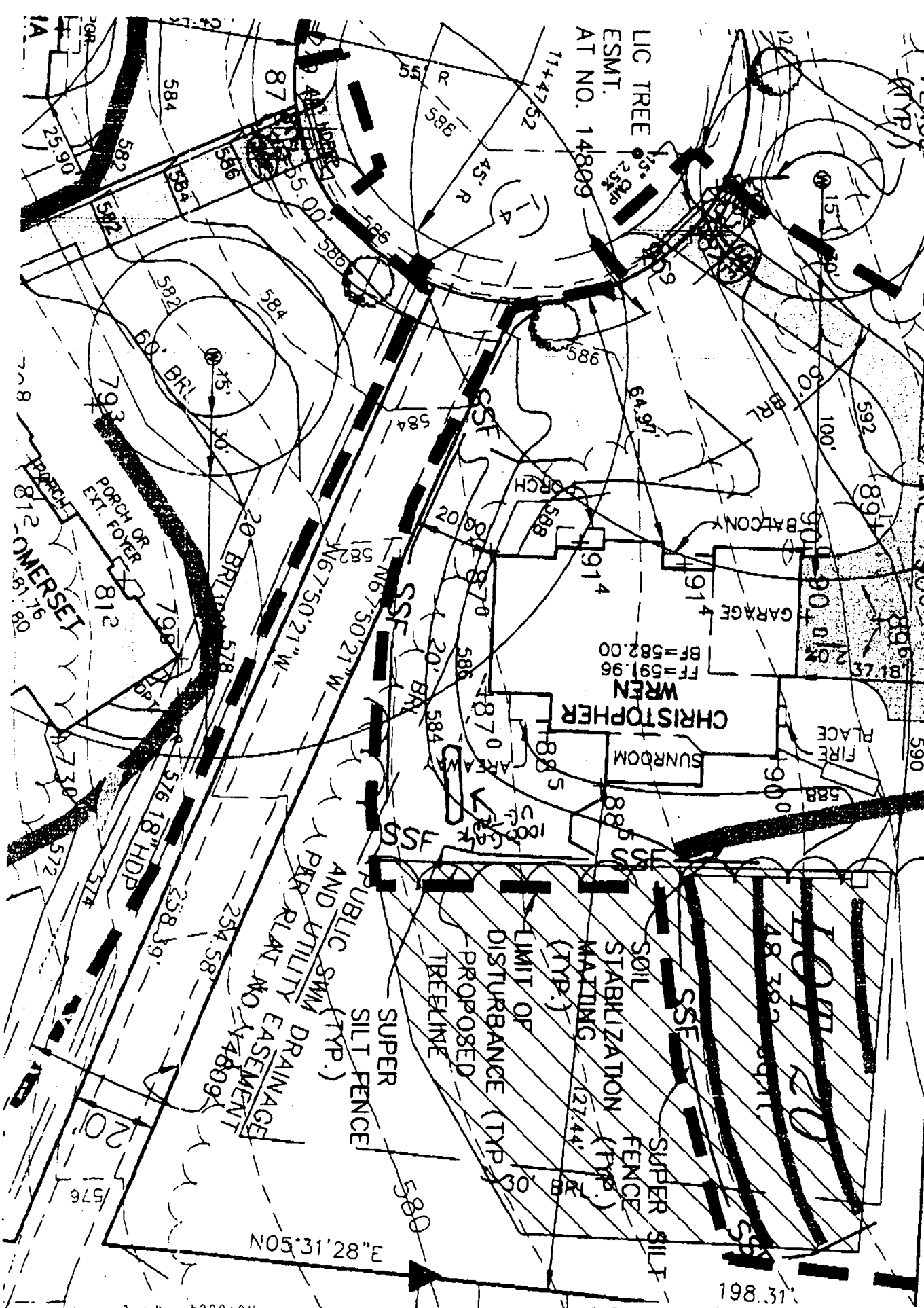
Form PERMIT-FRM _____

Called 8/17/07 for new, agreed tank location

9/16/02

Not to Scale. Have tried numerous x decent numbers but a decent plan was not possible. I've tried numerous but a decent plan was not possible. I've tried numerous but a decent plan was not possible.

MATCH LINE SEE SHEET



'52" E

MATCH LINE SEE SHEET 2

1:30

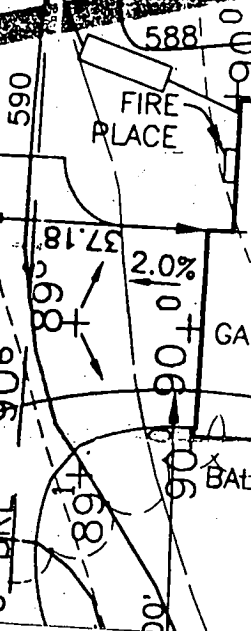
FOREST CONSERVATION EASEMENT AREA RETENTION

EX. GRADE AT DISTRIBUTION BOX = 589.0
INV. DISTR. BOX = 586.0
INV. OUT TANK = 586.5
INV. IN TANK = 586.8
INV. HOUSE = 587.0
EJECTOR REQ.

Open Street LOT

Total linear feet of trench required 240 feet
Width of trench (es) 2 feet
Depth of trench (es) 5 feet
Depth of stone required below distribution pipe 18" HDP

429.10'



CHRISTOPHER WREN
FF=591.96
BF=582.00
BASEMENT SERVICE BY GRAVITY NOT PROPOSED

SUPER SILT FENCE
SOIL STABILIZATION MATTING (TYP.)
LIMIT OF DISTURBANCE (TYP.)
PROPOSED TREE LINE

PUBLIC SWM DRAINAGE AND UTILITY EASEMENT PER PLAT NO. 14809

8/20/02 - Met with Tom Tattersson about moving propane tank another 14' from the SDA. Currently 6' away.
8/27/02
(KN)

Approved Septic System Plan
Howard County Health Department

ARVHA WASHINGTON
=586.96
=577.00

PUBLIC ANT. ESM PLAT

5/23/02
AM

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: Ben Lewis Telephone #: 3014283500
Address: 23407 Frederick Rd
Chesapeake, md

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer
License # and name of individual responsible for the field installation:
Name (Print): FRANK NINKLE License# 17867
*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: D.R. Newton Telephone #: 6706144
Subdivision: Cherry Grove Lot #: 20 Well Tag #: HO 94-2780
Site Address: 16905 Old Seaboard Ct

Submersible Pump Data Pitless Adapter Well Cap and Electric Conduit
Make: Smells Make: Campbell Two piece watertight cap:
Model #: Model#: Screened, vented well cap:
Pump Capacity 13 GPM Depth: 36 (36" min) Cap secured to casing:
Well Yield: 7 GPM NSF approved: Conduit min 18" B.G.:
Depth of well encountered at time of pump installation: (feet) Conduit secured to well cap:
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: PEX 1" PVC sleeved to undisturbed soil at wall penetration:
PSI: 200 (160 psi min) Approximate length of sleeve:
Depth of supply line: 30 (36" min) Sleeve caulked and sealed properly:

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.

Mike Boreas 5/23/02
Signature of company representative responsible for installation date

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

Date Insp. Requested: 5/23/02 Date Insp. Approved: 5/23/02
Inspection Data: Pitless adapter and water supply line at least 36" below grade
Two piece cap installed and attached to casing securely (SB)
Elec. conduit extends at least 18" below grade/attached to cap properly
Safety rope installed inside of well 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

C 1 07869 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 OK 88 SRM 10/25/00

ST/CO USE ONLY DATE Received MM DD YY 8 13

DATE WELL COMPLETED MM DD YY 9 27 2000 Depth of Well 22 440' 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-2780 28 29 30 31 32 33 34 35 36 37

OWNER GROUPEMONT DEVELOPMENT STREET OR RFD OLD SAWMILL RD. TOWN LISBON SUBDIVISION WESTWOODS AT CHEERY GROVE SECTION LOT 16

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 FROM TO check if water bearing. Brown Shale 0 50 Yellow clay 50 58 Brown Shale 58 72 Blue Rock 72 440 ✓

GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL (Circle one) CEMENT CM BENTONITE CLAY BC NO. OF BAGS 17 NO. OF POUNDS 1578 GALLONS OF WATER 102 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 70 ft.

CASING RECORD casing types insert appropriate code below. MAIN CASING TYPE ST 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 PL OT

NUMBER OF UNSUCCESSFUL WELLS: 0 WELL HYDROFRACTURED YES Y NO 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. 1 MS D224 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. 1 D

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

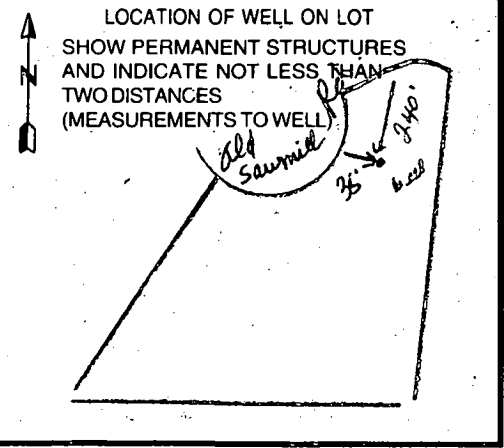
DEPTH (nearest ft.) T 2 HO 74 440. A C H S R E N. SLOT SIZE 1 2 3. DIAMETER OF SCREEN (NEAREST INCH) 56 60 from to

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

PUMPING TEST HOURS PUMPED (nearest hour) 6 PUMPING RATE (gal. per min.) 3 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 50 ft. WHEN PUMPING 296 ft. TYPE OF PUMP USED (for test) S submersible

PUMP INSTALLED DRILLER INSTALLED PUMP (CIRCLE) (YES or 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. 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 - below 2 (nearest foot)



B 1	5972	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL	STATE PERMIT NUMBER
Please print or type W 514151			HO - 94 - 2780	
fill in this form completely				

OWNER INFORMATION

Date Received (APA) _____

8 MM DD YY 13

G Government Development LLC
15 Last Name Owner First Name 34

P.O. Box 417
36 Street or RFD 55

Ellicott City Md 21041
57 Town 70 State 72 Zip 76

LOCATION OF WELL

Howard
8 COUNTY 21

The Westwoods of Cherry Grove
23 SUBDIVISION 42

SECTION 44 LOT 16
44 45 48 50

Lisbon
52 NEAREST TOWN 71

MILES FROM TOWN (enter 0 if in town) 5 M I
73 76 77 78

DRILLER INFORMATION

Driller's Name Joseph L. Mayre M S D 024
76 License No. 81

Joseph L. Mayre Well Drilling
Firm Name

5512 Ridge Rd Mt. Airy 21771
Address

Joseph L. Mayre 7/26/2000
Signature Date

B 4

1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

Old Sawmill Rd.
11 NEAR WHAT ROAD 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

34 35 37
DISTANCE FROM ROAD ENTER FT OR MI FT 38 39

TAX MAP: _____ BLK: _____ PARCEL: _____

B 2 WELL INFORMATION

APPROX. PUMPING RATE 5
1 2 (GAL. PER MIN.) 8 12

AVERAGE DAILY QUANTITY NEEDED 500
3 4 (GAL. PER DAY) 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION

F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)

I INDUSTRIAL, COMMERCIAL, DEWATERING

P PUBLIC WATER SUPPLY WELL

T TEST, OBSERVATION, MONITORING

G GEO-THERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

HOWARD 13
COUNTY NAME COUNTY NO.

STATE SIGNATURE _____ INSERT S → 41

DATE ISSUED 08 09 00 C. Will 8/8/01
43 MM DD YY 48 CO SIGNATURE EXP DATE

NORTH GRID 531 000 EAST GRID 0772 000
50 55 57 63

APPROXIMATE DEPTH OF WELL 300 FEET
24 28

APPROXIMATE DIAMETER OF WELL 6 INCH
NEAREST INCH

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

1. well

2.

3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E 770
N 530

000 x
000

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)

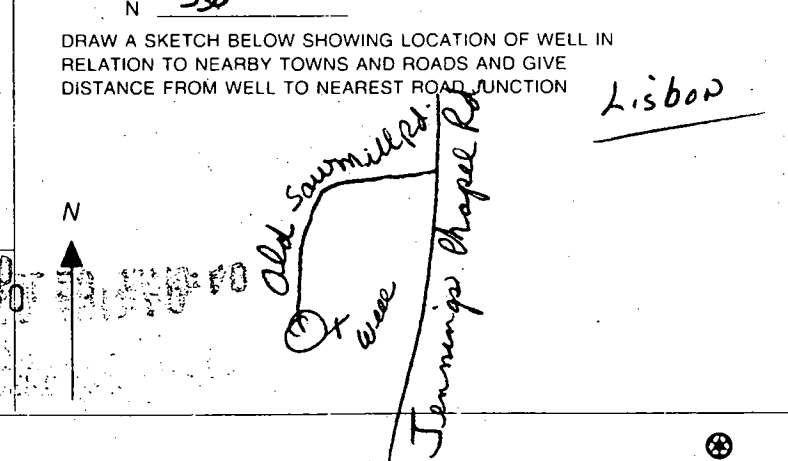
N THIS WELL WILL NOT REPLACE AN EXISTING WELL

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-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS

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 (MDE OR COUNTY USE ONLY)

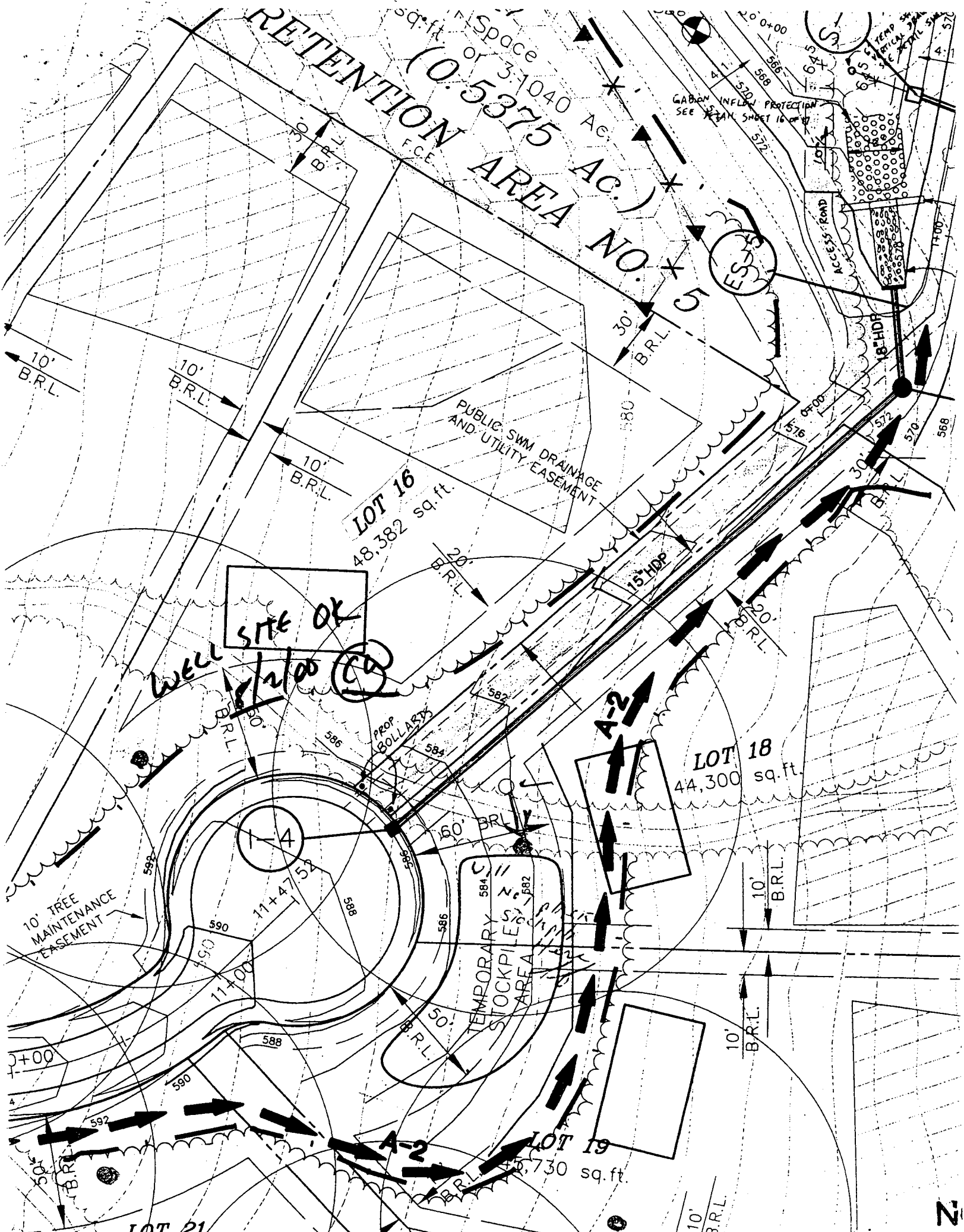
APPROX. PERMIT NUMBER _____

PERMIT No. HO 94 2780
70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITY SHOULD USE SEPARATE SHEET IF NEEDED

sq. ft. Space (0.5375 AC.)
RETENTION AREA NO. 5



N

APPLICATION

PERCOLATION TESTING

A 59946

P _____

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

DISTRICT _____

DATE _____

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 MARSHALL W. NICHOLS
2937 JENNINGS CHAPEL ROAD
ADDRESS WOODRINE, MD 21797 PHONE _____

AGENT OR PROSPECTIVE BUYER DAVID E. WILKINSON @ MACRO LTD. REAL ESTATE SERVICES
5301 BUCKEYSTOWN PIKE, SUITE 300
ADDRESS FREDERICK, MD 21704 PHONE (301) 698-9696

PROPERTY LOCATION:
SUBDIVISION NICHOLS' PROPERTY LOT NO. _____
ROAD AND DESCRIPTION JENNINGS CHAPEL ROAD, HOWARD COUNTY

TAX MAP 13 PARCEL # P/046
SIZE OF LOT 40,000 - 60,000 sq. ft. 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. [Signature]
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

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

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

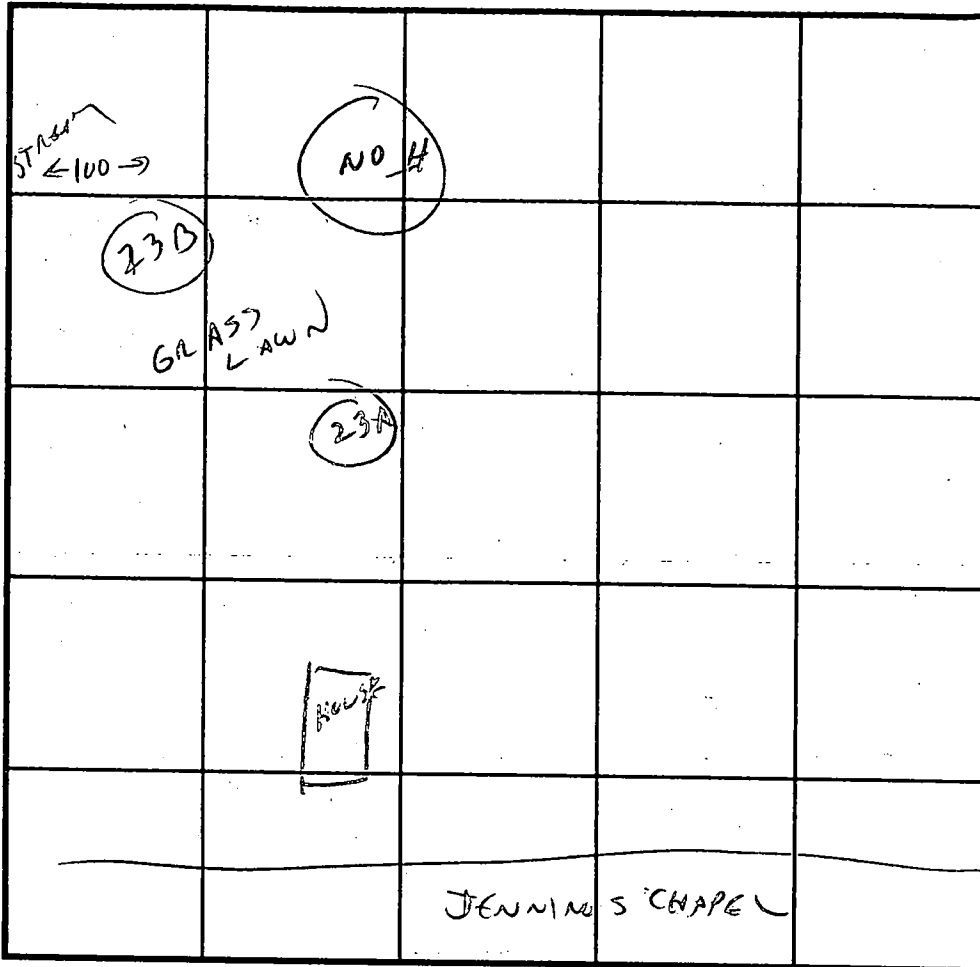
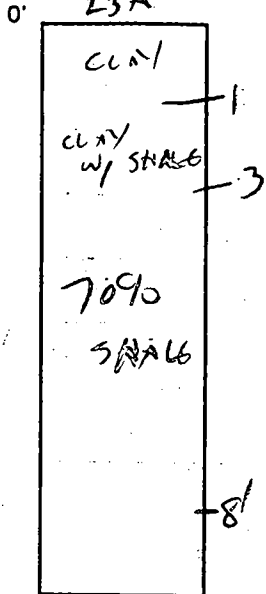
THIS IS NOT A PERMIT

NICHOLS SUBD.

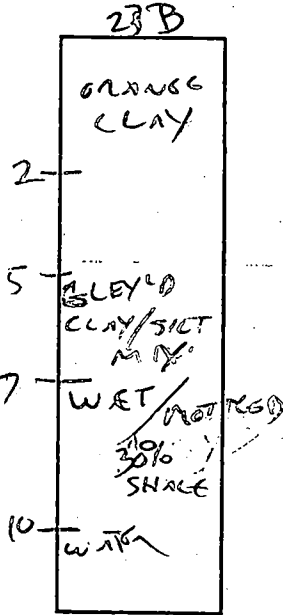
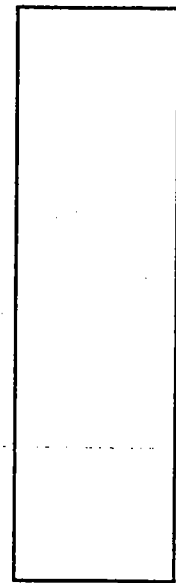
A 59946

COUNTY #

SOIL PROFILE
23A



SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/16/98	23A	ROCK	ABANDONED				
	23B	WATER	ABANDONED				
	NO#	ROCK @ 3'	ABANDONED				

REMARKS _____

TYPE OF SOIL _____

TESTED BY Cwill ALSO PRESENT SHARP

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

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

NICHOLS SUBD.

AS9946

COUNTY #

SOIL PROFILE
22B

0'
2 1/2'
CLAY
RED BROWN
MICA
SILT
LOAM
1090
SAPONITE

22C/24B

CLAY
MICA
SILT
LOAM
5%
SAPONITE

23D

Brown
LOAM
4
Brown
+
R1300, 24
Brown
MICA
LOAM
290
SAPONITE

SOIL PROFILE
23C

0'
CLAY
COLLAPSED
MOTTLED
266 P.P.C.
WAB

23D

CLAY
MICA
SILT
LOAM
1090
SAPONITE

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
7/16/98	22B	3 1/2	1:21	1:27	1:27	1:35	8 min	
	22C/24B	4	1:28	1:44	1:44	1/2 INCH @ 2:00		
	23D	4	VIS OK BY 5:1					
		4 1/2	2:24	2:26	2:26	2:28	2 min	
	23C	ABANDONED BY CONTRACTOR - WAB						X
		2 1/2						
		4 1/2						

SLOW BUT OK 5'

REMARKS _____

TYPE OF SOIL _____

TESTED BY Cwill ALSO PRESENT SHARP

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

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

APPLICATION

PERCOLATION TESTING

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P _____

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ADDRESS 2937 JENNINGS CHAPEL ROAD
WOODBINE, MD 21797 PHONE _____

AGENT OR PROSPECTIVE BUYER DAVID E. WILKINSON @ MACRO LTD. REAL ESTATE SERVICES
ADDRESS 5301 BUCKEYSTOWN PIKE, SUITE 300
FREDERICK, MD 21704 PHONE (301) 698-9696

PROPERTY LOCATION:

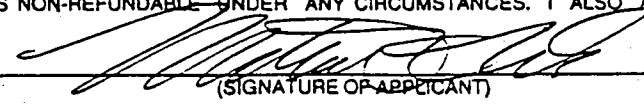
IBDIVISION NICHOLS' PROPERTY LOT NO. _____

ROAD AND DESCRIPTION JENNINGS CHAPEL ROAD, HOWARD COUNTY

TAX MAP 13 PARCEL # P/O 46

SIZE OF LOT 40,000 - 60,000 sq. ft. 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.


(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

NICHOLS SUB O,

A 59946

COUNTY #

SOIL PROFILE
19c/20B

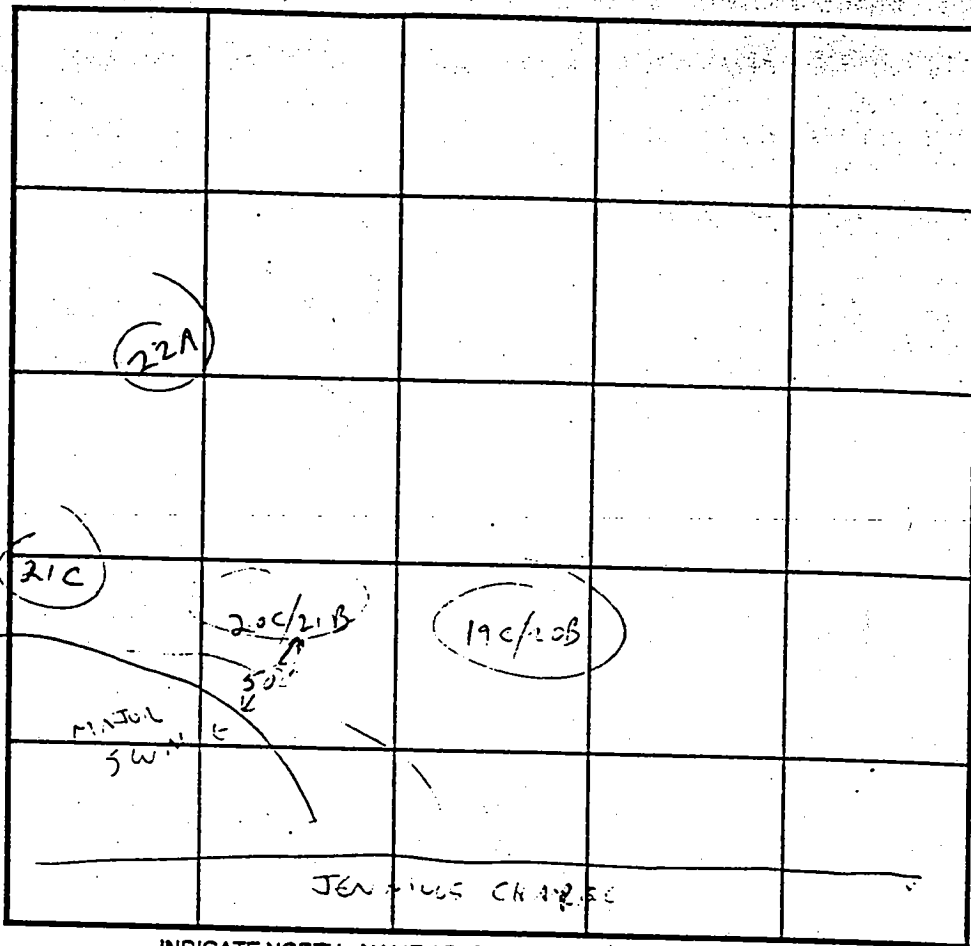
0' -
 1/2" CLAY
 TAN
 CLAY
 TAN
 +
 RED
 BROWN
 MICA
 SILT
 COAR
 10%
 SAND

20c/21B

0' -
 LOW
 CLAY
 TAN
 +
 GRAY
 MICA
 SILT
 COAR
 FAINTLY BUT
 DISTINCTLY
 NOTED
 THROUGHOUT

21C

0' -
 CLAY
 LOW CLAY
 VERY
 FAINTLY
 NOTED
 TAN
 +
 SOME
 GRAY
 SILT
 COAR



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE
22A

0' -
 CLAY
 LIGHT
 GRAY
 BROWN
 MICA
 SILT
 COAR
 10%
 SAND

21D

0' -
 CLAY
 MICA
 SILT
 COAR

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
4/16/98	19c/20B	3 1/2	4:10	4:15	4:15	4:21	11M	
4/16/98	20c/21B	3 1/2						
	???							
			NOTED THROUGHOUT					
			POSSIBLY FULL AREA NEXT TO SWALE BUT 15' TO 35" DIA. TRUCK					
	21C		4:23	4:27	4:27	4:32	5M, 1/2	
	22A	3 1/2	1:16	1:20	1:20	1:28	5M, 1/2	

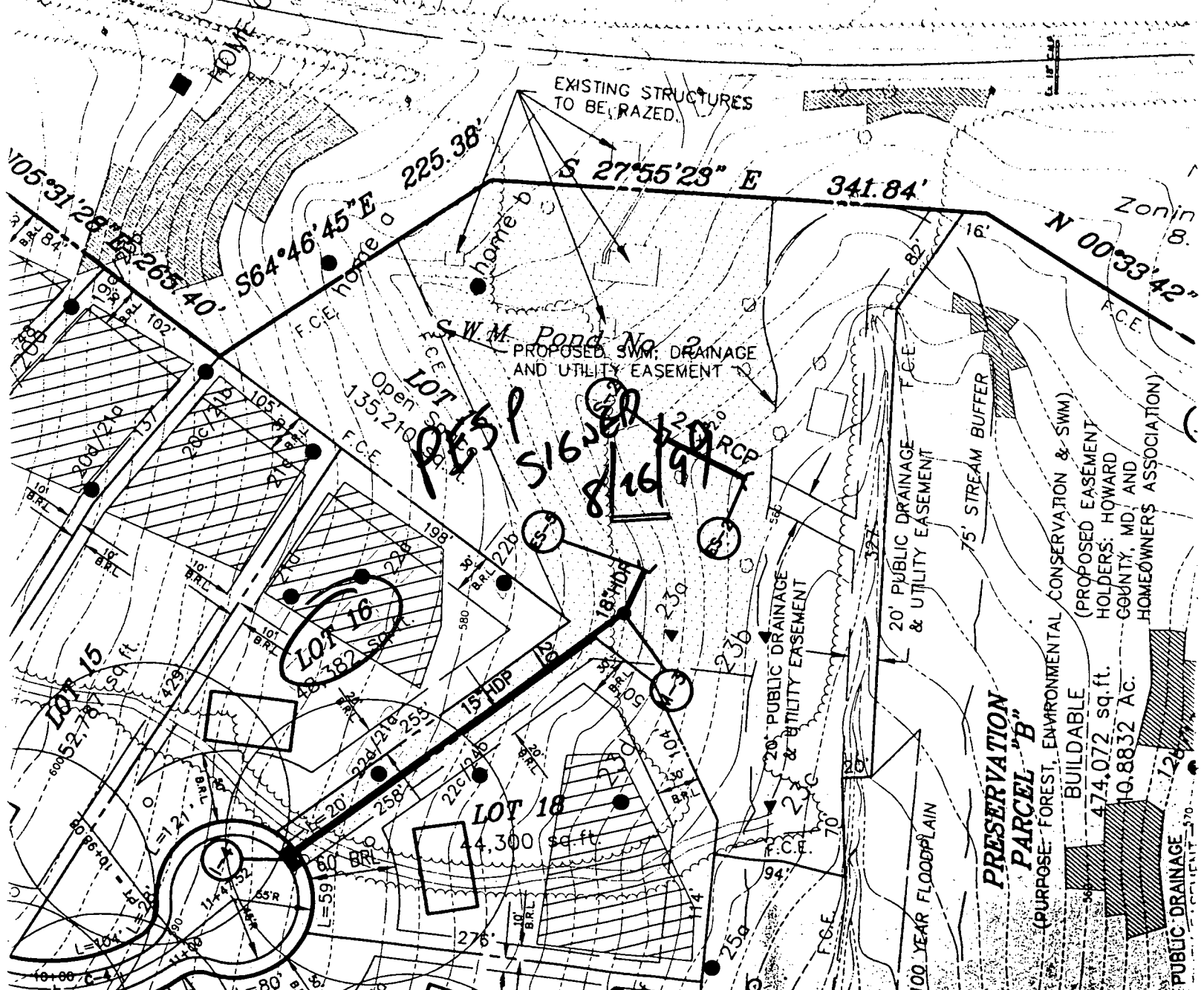
REMARKS (21D) 3 1/2 NOT TEST U/S CR - EST 5 MIN
 TYPE OF SOIL REQUEST RE-EVAL OF AREA 20C-21B
 TESTED BY C. Williams ALSO PRESENT SHARP
 TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____
 INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____

JENNINGS

Grace C. Nichols 590
2090/403
P. 46

CHAPEL

Zoning RC-DEO
Ag. Preservation Parcel MALPF
No. 13-04-80-04-Bex2



PRESERVATION PARCEL "B"
 (PURPOSE: FOREST, ENVIRONMENTAL CONSERVATION & SWM)
 BUILDABLE
 474,072 sq. ft.
 10.8832 AC.
 (PROPOSED EASEMENT HOLDERS: HOWARD COUNTY, MD, AND HOMEOWNERS ASSOCIATION)
 PUBLIC DRAINAGE

WL2	66.27	S82'22'09"E
WL3	45.34	S71'58'36"E
WL4	46.81	S79'48'41"E
WL5	24.99	S79'21'47"E
WL6	10.22	S76'08'36"E
WL7	4.26	S45'11'23"E
WL8	56.50	N81'00'28"W
WL9	63.23	N74'14'35"W
WL10	51.67	N83'48'15"W
WL11	49.87	N88'04'37"W
WL12	54.53	N77'42'55"E
WL13	31.55	N76'45'25"E
WL14	22.55	S65'15'26"E
WL15	81.30	S54'49'15"E
WL16	26.83	N81'23'22"E
WL17	113.68	N63'15'11"E
WL18	42.73	N60'32'45"E
WL19	16.63	S32'18'35"E
WL20	59.79	S37'59'19"W
WL21	64.91	S44'29'49"W
WL22	49.34	S83'56'14"W
WL23	44.98	N89'47'11"W
WL24	36.49	S46'41'29"W
WL25	30.79	S22'42'59"W
WL26	81.09	S64'24'54"W

F-60-105

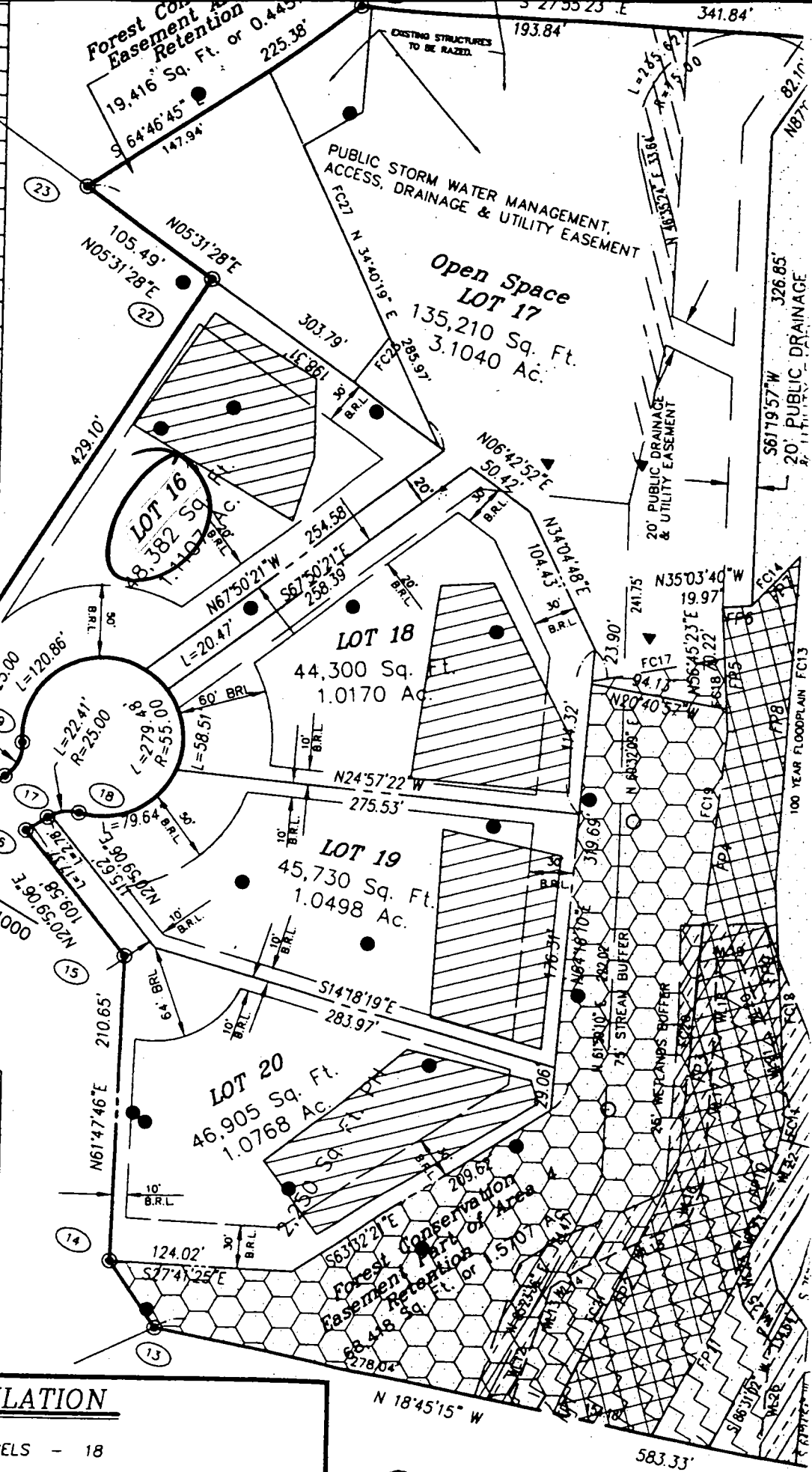
SAWMILL ROAD

Line	Length	Bearing
FP1	9.64	N81'37'46"E
FP2	184.44	N85'08'38"E
FP3	135.07	N64'38'55"E
FP4	164.48	N66'03'05"E
FP5	86.52	M56'45'23"E
FP6	19.97	S35'03'40"E
FP7	47.68	S76'55'38"E
FP8	226.54	S63'13'53"W
FP9	165.40	S57'03'16"W
FP10	5.49	S73'07'20"W
FP10	66.19	S73'07'20"W
FP11	137.09	S87'49'15"W

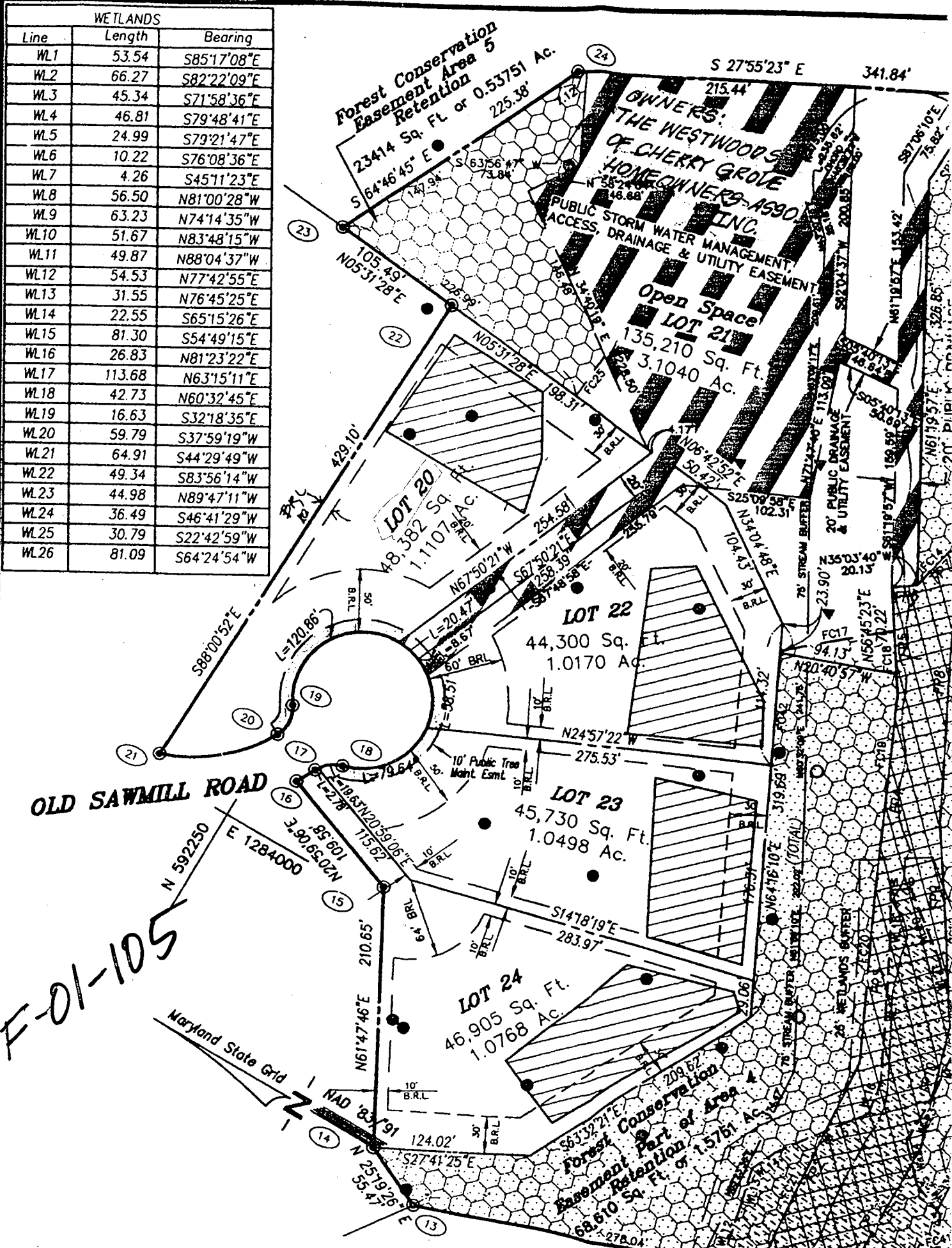
LOT TABULATION

TOTAL No. OF LOTS AND/OR PARCELS - 18
 Buildable Lots - 13
 Open Space - 1
 Buildable Preservation Parcel - 1
 Non-Buildable Preservation Parcels - 2
 Parcels to be conveyed to adjacent owner - 1
 TOTAL AREA OF LOTS AND/OR PARCELS - 135,210 Sq. Ft. or 3.1040 Ac.

SUBMITTED FOR REVIEW



WETLANDS		
Line	Length	Bearing
WL1	53.54	S85°17'08"E
WL2	66.27	S82°22'09"E
WL3	45.34	S71°58'36"E
WL4	46.81	S79°48'41"E
WL5	24.99	S79°21'47"E
WL6	10.22	S76°08'36"E
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WL25	30.79	S22°42'59"W
WL26	81.09	S64°24'54"W



22c/24b
OK as well

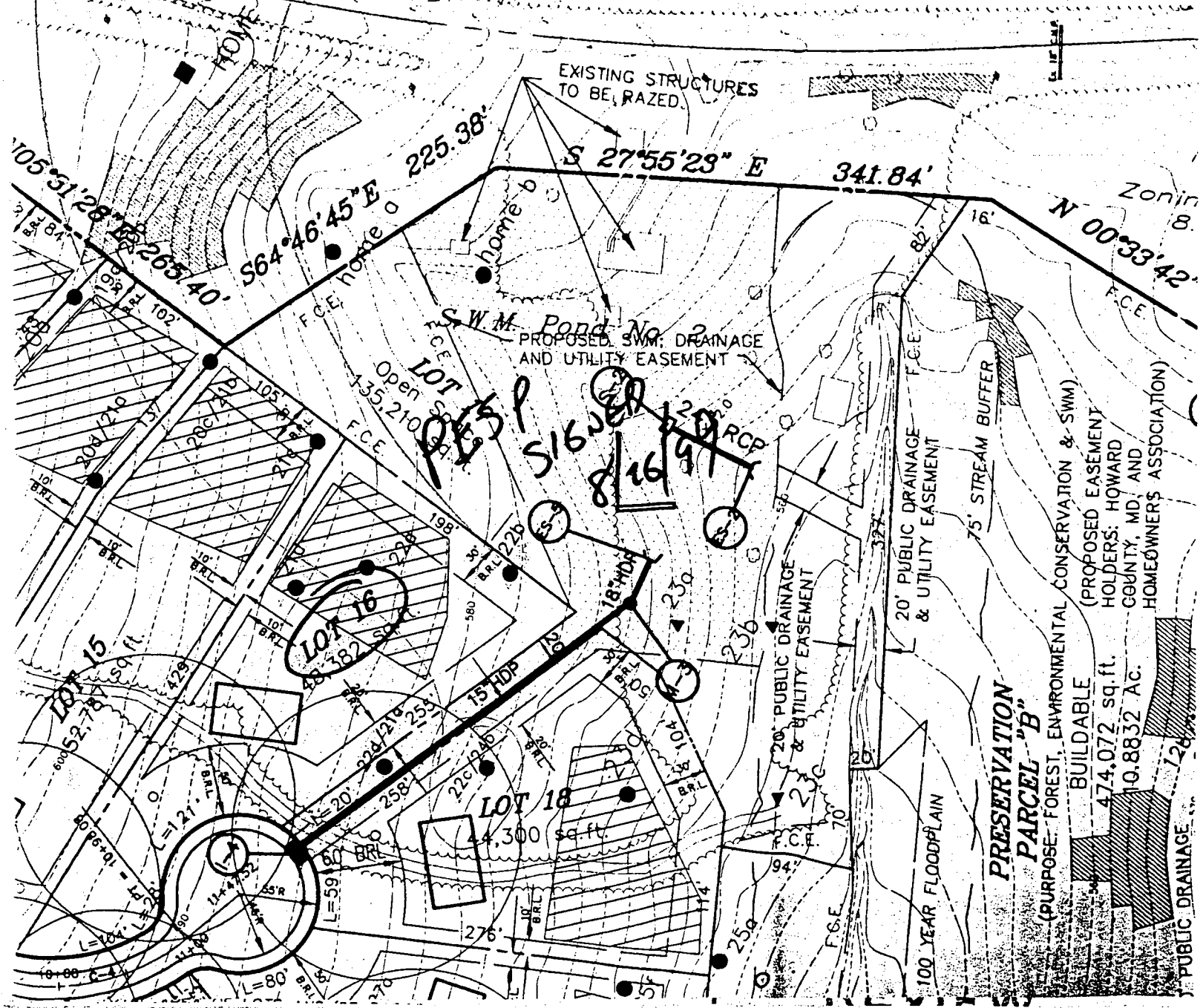
12-10-04
Soils support SDA
Adjustment - No surround.
well issues ADJ SDA for
pool w/20' setback to water's edge
MAINTAIN 10,000# minimum
22b is good soil profile
OK to chap/ADD
SDA

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CHAPEL

Ag. Preservation Parcel MALPF
No. 73-04-80-04-Bex2
Zoning RC-DEO



EXISTING STRUCTURES
TO BE RAZED

S 27°55'23" E 341.84'

Zoning
8
N 00°33'42"

S.W.M. Pond No. 2
PROPOSED SWM, DRAINAGE
AND UTILITY EASEMENT

LOT 16
43,382 sq.ft.
LOT 17
44,300 sq.ft.
LOT 18
44,300 sq.ft.

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HOLDERS: HOWARD
COUNTY, MD, AND
HOMEOWNERS ASSOCIATION

100 YEAR FLOODPLAIN

PUBLIC DRAINAGE