

LAYOUT 11/26/02 2pm INSP 4 \_\_\_\_\_  
 INSP 2 11/27/02 10AM INSP 5 \_\_\_\_\_  
 INSP 3 12/2/02 AM INSP 6 \_\_\_\_\_

ISSUE DATE: 1/26/2002

APPROVAL DATE: 3/3/03

**PERMIT  
INDEXED**

P 517936

A 510571-R

337278

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

Farm & Home Excavating, Inc IS PERMITTED TO INSTALL  ALTER

ADDRESS: 901 Driver Road, Marriottsville PHONE NUMBER: 410-442-2139

SUBDIVISION: Brantwood 3/1 LOT NUMBER: 16

ADDRESS: 11357 Cotswold Spring Farm Lane PROPERTY OWNER: Nantucket Homes/Dorsey

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 2.5 feet below original grade. Bottom maximum depth 4.5 feet below original grade. Effective area begins at 3.0 feet below original grade. 2.0 feet of stone below distribution pipe.
LOCATION:	Place the distribution box midway between the two upper corner easement stakes. Run 3-80' trenches on contour toward the house.
NOTES:	

PLANS APPROVED: Brian Baker OK 6/7/02 (SC) DATE: 5/30/2002

- 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

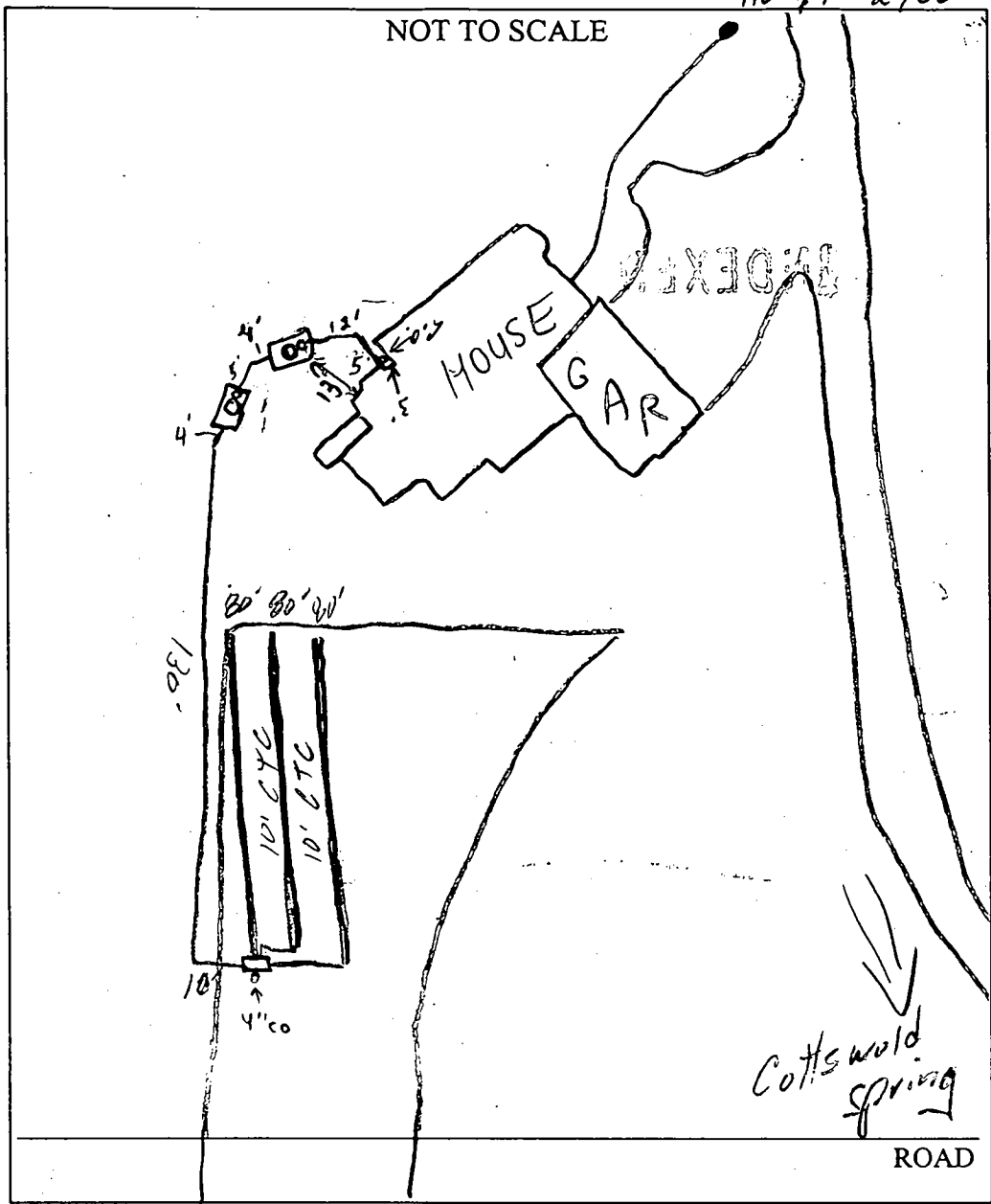
**NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM**

**BUILDING PERMIT SIGNED AND RETURNED**  
11-27-02 B00139554-FINISH BASEMENT

A510571-R

HD-94-2960

NOT TO SCALE



TRENCH/DRAINFIELD DATA

WIDTH	INLET	BOTTOM
3	2.5	4.5
NUMBER OF TRENCHES		3
TOTAL LENGTH		240
ABSORPTION AREA		720 <del>sq</del>
DISTRIBUTION BOX LEVEL		✓
DISTRIBUTION BOX BAFFLE		✓
DISTRIBUTION BOX PORT		4" on DECK

SEPTIC TANK DATA

SEPTIC TANK 1 LEVEL	✓
CAPACITY	1500 GAL
SEAM LOC	Top
TANK LID DEPTH	1.5'
BAFFLES	✓
BAFFLE FILTER	—
MANHOLE LOC	Center
6" PORT LOC	—
WATERTIGHT TEST	—
SEPTIC TANK 2 LEVEL	✓
CAPACITY	1250 GAL
SEAM LOC	Top
TANK LID DEPTH	2'
BAFFLES	✓
BAFFLE FILTER	—
MANHOLE LOC	Center
6" PORT LOC	Front
WATERTIGHT TEST	NA

PRE-CONSTRUCTION 11/26/02 - UNABLE TO MAKE INSP, TOLD INSTALLER TO CONTINUE W/O LAYOUT - (SRK)

INSTALLATION 11/27/02 OK to cover tanks (SO) 11/27/02 - 1ST Two trenches installed, OK to cover (SO) 12/2/02 OK to cover all work. Pump & Alarm tests needed (SO)

3/3/03 - PUMP & ALARM OPERATIONAL - (SRK)

FINAL INSPECTOR

Steven R. King

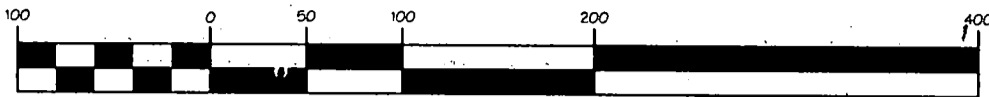
DATE OF APPROVAL

11/15/03

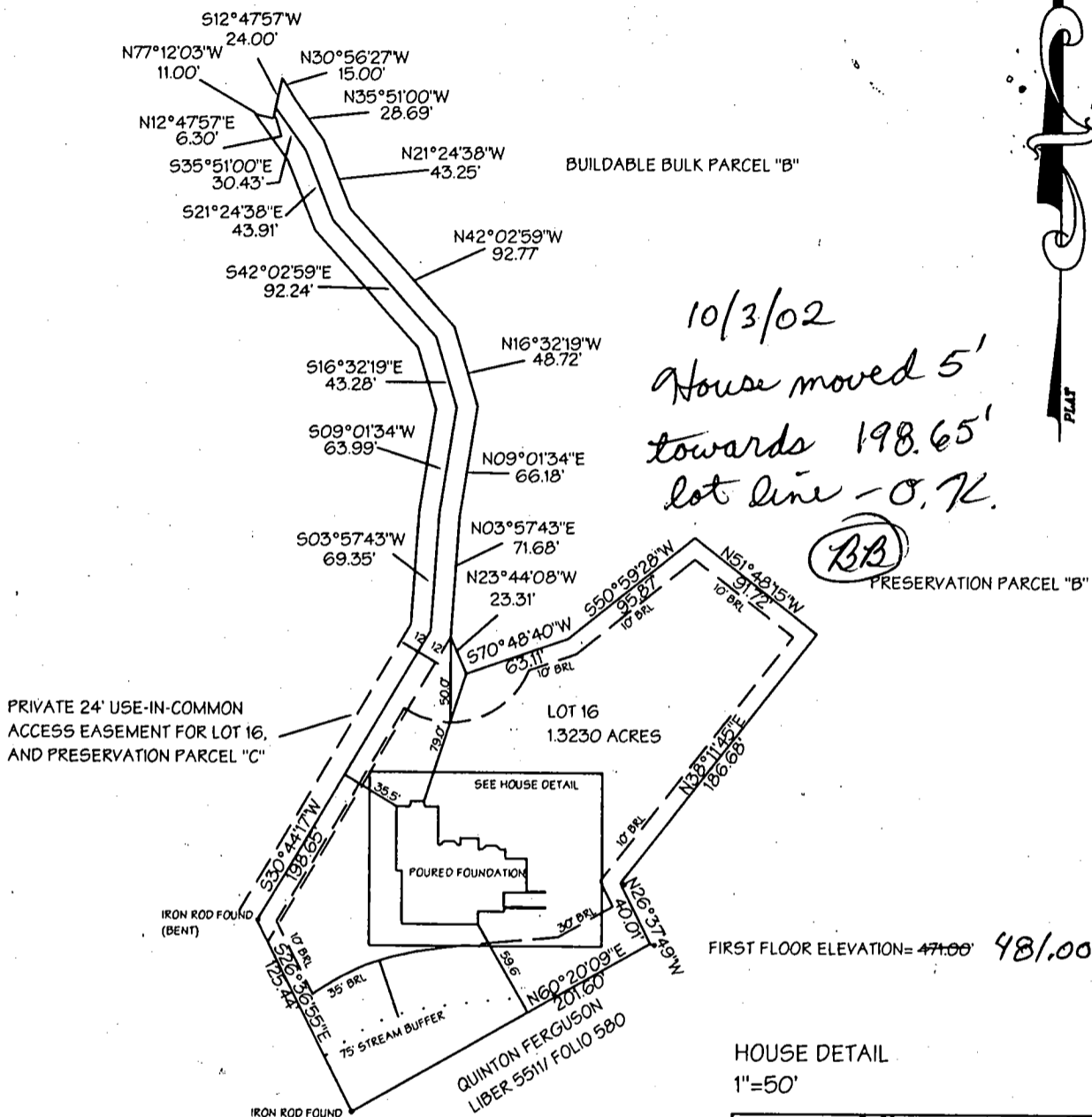
PROPERTY KNOWN AS:  
 LOT 16 "BRANTWOOD"  
 PLAT NUMBER 14881  
 HOWARD COUNTY, MARYLAND

THIS PLAT CAN NOT BE USED TO ESTABLISH  
 PROPERTY LINES OR CORNERS.

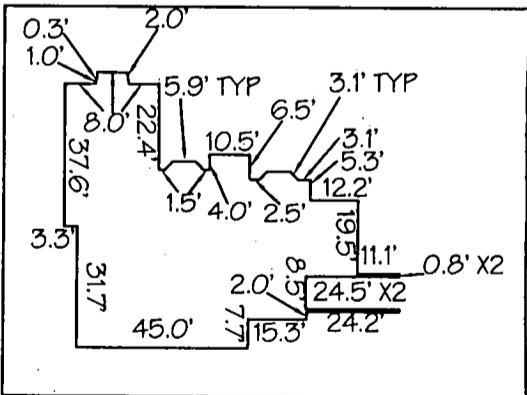
GRAPHIC SCALE



( IN FEET )  
 1 inch = 100 ft.



HOUSE DETAIL  
 1"=50'



LOCATION DRAWING

CERTIFICATION

SEAL

SCALE 1" = 100'

DATE 07/01/02

This is to certify that I have surveyed the property known as:

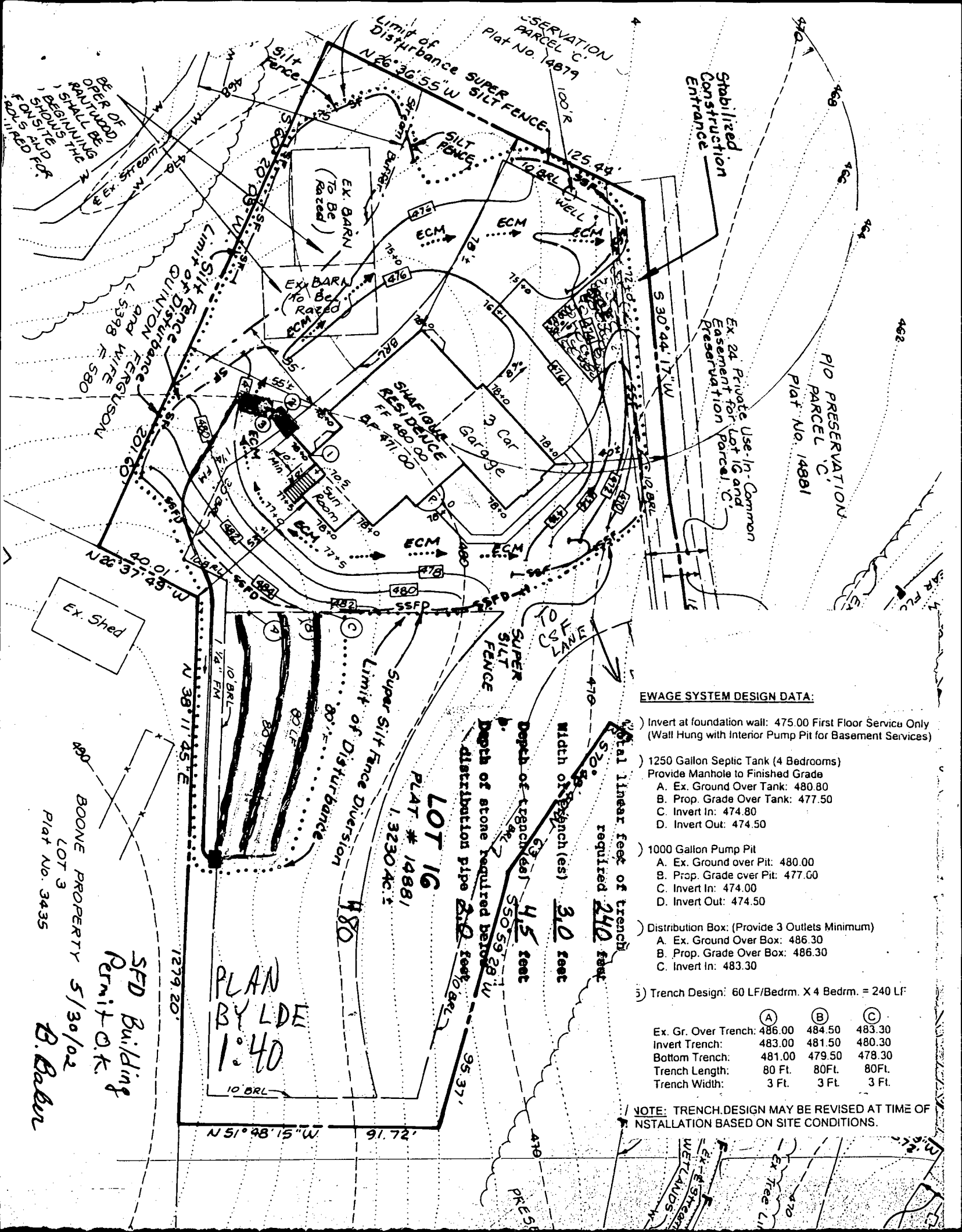
LOT 16 BRANTWOOD

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 for Fences, Garages, Buildings, or other Existing or Future Improvements.

**LDE Inc.**  
 Engineers, Surveyors, Planners

9250 Rumsey Road, Suite 106  
 Columbia, Maryland - 21045  
 (410) 715-1070 - (410) 715-9540 Fax

aw



OPER OF  
RAILROAD  
SHALL BE  
BEGINNING  
SHOWS THE  
FOR SITE AND FOR  
WIRE FOR

BOONE PROPERTY 5/30/02  
LOT 3  
Plat No. 3435  
SFD Building  
Permit OK.  
B. Baber

PLAN  
BY LDF  
1:40

**SEWAGE SYSTEM DESIGN DATA:**

- 1) Invert at foundation wall: 475.00 First Floor Service Only  
(Wall Hung with Interior Pump Pit for Basement Services)
- 2) 1250 Gallon Septic Tank (4 Bedrooms)  
Provide Manhole to Finished Grade
  - A. Ex. Ground Over Tank: 480.80
  - B. Prop. Grade Over Tank: 477.50
  - C. Invert In: 474.80
  - D. Invert Out: 474.50
- 3) 1000 Gallon Pump Pit
  - A. Ex. Ground over Pit: 480.00
  - B. Prop. Grade over Pit: 477.00
  - C. Invert In: 474.00
  - D. Invert Out: 474.50
- 4) Distribution Box: (Provide 3 Outlets Minimum)
  - A. Ex. Ground Over Box: 486.30
  - B. Prop. Grade Over Box: 486.30
  - C. Invert In: 483.30
- 5) Trench Design: 60 LF/Bedrm. X 4 Bedrm. = 240 LF
 

	(A)	(B)	(C)
Ex. Gr. Over Trench:	486.00	484.50	483.30
Invert Trench:	483.00	481.50	480.30
Bottom Trench:	481.00	479.50	478.30
Trench Length:	80 Ft.	80 Ft.	80 Ft.
Trench Width:	3 Ft.	3 Ft.	3 Ft.

NOTE: TRENCH DESIGN MAY BE REVISED AT TIME OF INSTALLATION BASED ON SITE CONDITIONS.

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: Robert L. Feezer Co., Inc. Telephone #: 410-781-4655  
Address: 6321 Barnett Ave.  
Swesville, 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): Robert L. Feezer License# 2122  
\*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: Nantucket Builders Telephone #: 410-442-8200  
Subdivision: Bronwood Lot #: 16 Well Tag #: HO-94-2960  
Site Address: 11357 Cotswold Spring Farm Rd  
Ellicott City

1.39  
Submersible Pump Data Pitless Adapter Well Cap and Electric Conduit  
Make: SIORITE Make: CAMPBELL Two piece watertight cap:   
Model #: SP4000W Model #: PT800 Screened, vented well cap:   
Pump Capacity 5 GPM Depth: 42 (36" min) Cap secured to casing:   
Well Yield: 129 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: Flex PVC sleeved to undisturbed soil at wall penetration:   
PSI: \_\_\_\_\_ (160 psi min) Approximate length of sleeve: 5'  
Depth of supply line: 42 (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.

Robert L. Feezer, Reg. Mstr. Plbr. 1/17/02  
Signature of company representative responsible for installation date

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

Date Insp. Requested: \_\_\_\_\_ Date Insp. Approved: 1/17/03 (50)  
Inspection Data: Pitless adapter and water supply line at least 36" below grade \_\_\_\_\_  
Two piece cap installed and attached to casing securely   
Elec. conduit extends at least 18" below grade/attached to cap properly   
Safety rope 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

11/2/02  
Well 11/2/02  
Con covered  
Lot 16  
Swesville

C1 0283

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

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

COUNTY NUMBER A510571R

ST/CO USE ONLY DATE RECEIVED MM DD YY

DATE WELL COMPLETED MM DD YY 04 17 2002

Depth of Well 22 400 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-2920

OWNER: Brantwood LLC COTSWALD SPRING FARM LANE STREET OR RFD Seneca Circle Trail TOWN ELICOTT CITY SUBDIVISION Brantwood SECTION 3/1 LOT 16

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entry for Overburden Gray Rock and water at 350'.

GROUTING RECORD: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL (CM, BC), NO. OF BAGS (8), NO. OF POUNDS (800), GALLONS OF WATER (48), DEPTH OF GROUT SEAL (0 to 32 ft).

CASING RECORD: casing types insert appropriate code below (PL, ST, CO, OT), MAIN CASING TYPE (PL), Nominal diameter top (main) casing (6), Total depth of main casing (40).

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

SCREEN RECORD: screen type or open hole (HO), insert appropriate code below (ST, BR, HO, PL, OT).

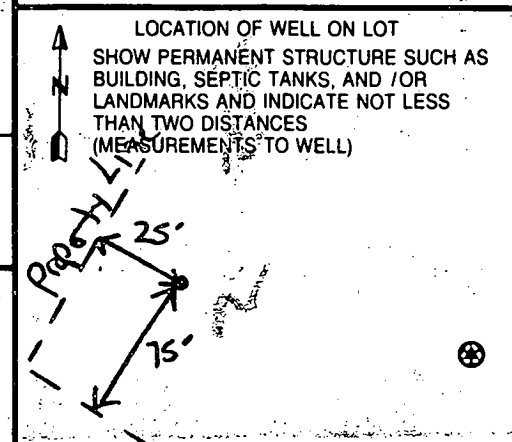
DEPTH (nearest ft.) table with rows A-C3 and columns 8-51. Includes SLOT SIZE 1, 2, 3 and DIAMETER OF SCREEN (NEAREST INCH) 56 to 60.

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.) 1.39, METHOD USED TO MEASURE PUMPING RATE Submersible, WATER LEVEL (distance from land surface) BEFORE PUMPING 17 ft, WHEN PUMPING 28 ft, TYPE OF PUMP USED (for test) S submersible.

PUMP INSTALLED: DRILLER INSTALLED PUMP YES (NO), IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS. TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29. CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 to 35. PUMP HORSE POWER 37 to 41. PUMP COLUMN LENGTH (nearest ft.) 43 to 47. CASING HEIGHT (circle appropriate box and enter casing height) (+) above, (-) below, LAND SURFACE (nearest foot) 1.



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.

DRILLERS LIC. NO. M D 3 9 9

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. J S D 0 4 9

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



FIELD DATA SHEET  
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 94 2960  
 Location of property (road) ~~Seneca Creek Trail~~ COTSWOLD SPRING FARM LANE  
 Subdivision Brantwood 3/1 Lot 16 Block \_\_\_\_\_ Plat \_\_\_\_\_ Sec. \_\_\_\_\_  
 Well Driller Michael Barlow Owner Brantwood LLC

Depth of well 400'  
 Distance of measuring point (M.P.) above ground 1'  
 Static water level (S.W.L.) below M.P. 17'

I. High rate pumping -- reservoir drawdown

Time pump started 0830 Pumping rate 14.28gpm  
 Total time 1hr to reach pumping water level 278'5 ft. below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes

TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE time to fill 4 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
0830	17'	4		15.00
0845	106'	5		12.00
0900	178'	6		10.00
0915	232'	8		7.50
0930	270'	10		6.00
0945	278'5	30		2.00
1000	279'	39		1.53
1015	279'2	40		1.50
1030	279'5	41		1.46
1045	279'8	42		1.42
1100	279'11	43		1.39
1115	280'	43		1.39
1130	280'	43		1.39
1145	280'	43		1.39
1200	280'	43		1.39
1215	280'	43		1.39
1230	280'	43		1.39
1245	280'	43		1.39
1300	280'	43		1.39
1315	280'	43		1.39
1330	280'	43		1.39
1345	280'	43		1.39
1400	280'	43		1.39
1415	280'	43		1.39



410-730-0810

EMERGENCY/TEMP NO. IF ANY

B 1 03022

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND  
PERMIT TO DRILL WELL  
please print or type

STATE PERMIT NUMBER

HO-94-2960

fill in this form completely

Date Received (APA)  
11/10/01

1/2 NICK LIPARINI

OWNER INFORMATION

BRANTWOOD LLC  
8835-P Columbia 100 Parkway  
Columbia MD 21045

B 3 LOCATION OF WELL

Howard  
Brantwood  
MAYFIELD

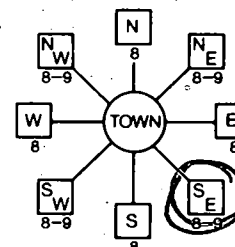
DRILLER INFORMATION

Transferred to Art  
Michael Bartow MD 355 3/32/02  
Michael Bartow Well Drilling  
522 Underwood Lane Bel Air Md  
21014  
1-11-2001

MILES FROM TOWN (enter 0 if in town)

2  
Sereca Chief Trail  
Butterfroot Way  
Cotswold Spring Farm  
500  
500

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



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)

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

3/13/02  
Permit given  
6 month extension  
to 7/25/02

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard CO A510571R  
COUNTY NAME COUNTY NO.  
STATE SIGNATURE INSERT S  
DATE ISSUED 1/25/01 BY Michael 1/25/02  
CO SIGNATURE EXP. DATE  
NORTH GRID 520 000 EAST GRID 820 000

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

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X  
SOURCES OF DRILLING WATER  
1. 820  
2. 520  
3.

METHOD OF DRILLING (circle one)

- BORED (or Augered) JETTED Jetted & DRIVEN
- AIR-ROTARY 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
- THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
- THIS WELL WILL DEEPEAN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)

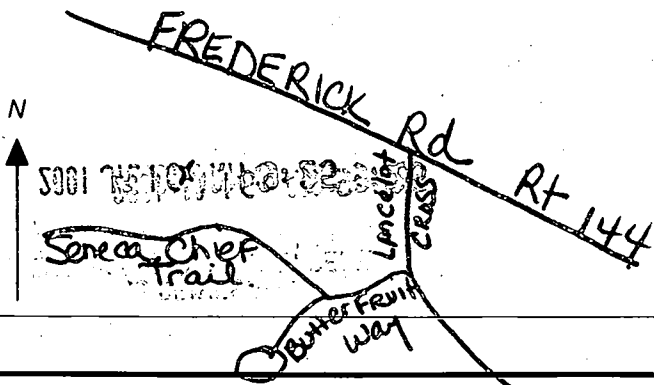
Not to be filled in by driller (MDE OR COUNTY USE ONLY)

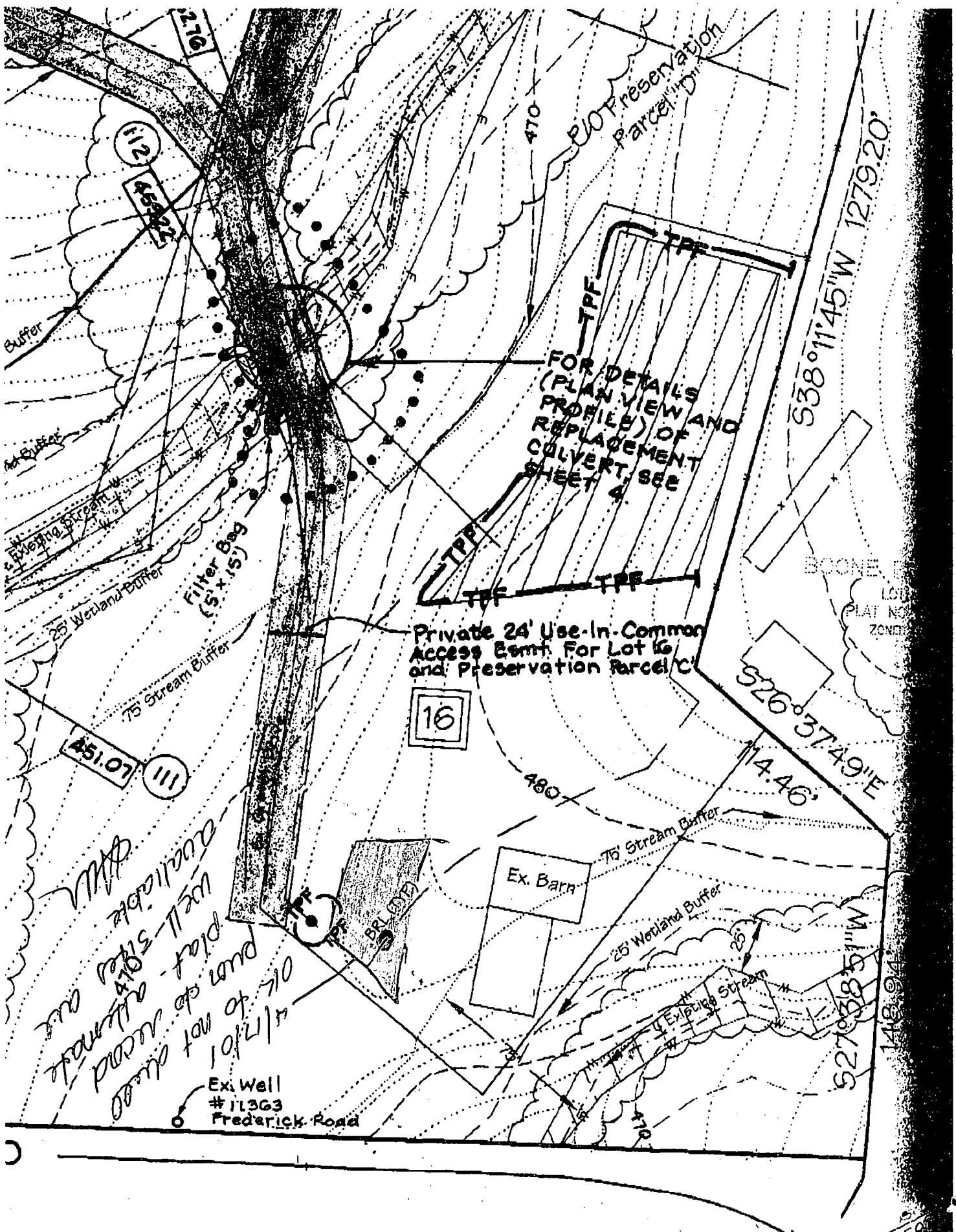
APPROX. PERMIT NUMBER H098 GAR 63003(2)  
PERMIT No. HO-94-2960

SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

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





FOR DETAILS  
(PLAN VIEW AND  
PROFILES) OF AND  
REPLACEMENT OF  
CULVERT, SEE  
SHEET 4

Private 24' Use-In-Common  
Access Easmt. For Lot 16  
and Preservation Parcel C

16

*Handwritten notes:*  
 no more available  
 water from well  
 plat #11363  
 OK to not check  
 10/17/17

Ex. Well  
#11363  
Frederick Road

# APPLICATION

PERCOLATION TESTING

A \_\_\_\_\_

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 \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

AGENT OR PROSPECTIVE BUYER \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

PROPERTY LOCATION:

SUBDIVISION \_\_\_\_\_ LOT NO. <sup>17</sup> *Near existing house*

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 \_\_\_\_\_

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'  
br/red  
cl 1m

3'  
beigel  
burnt  
orange  
sac 1m  
10%  
shale  
frags

10.5'

B

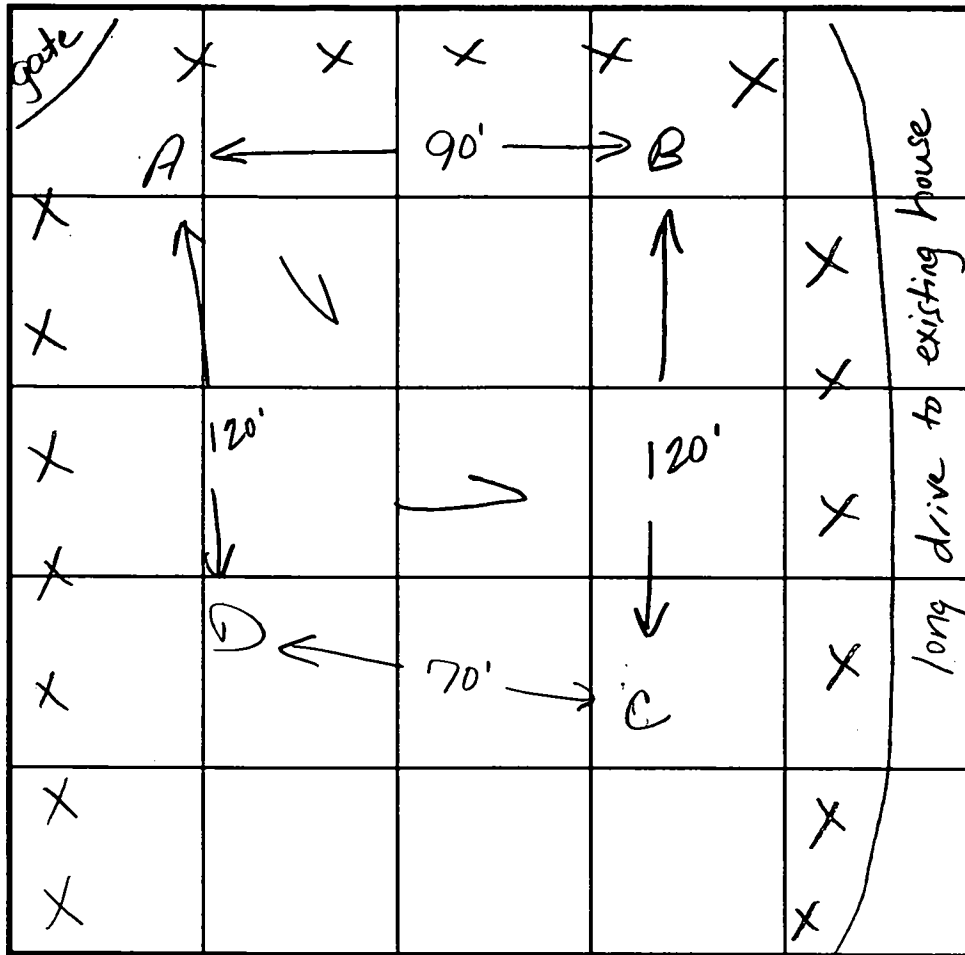
3.5'  
or/br  
cl 1m

beigel  
orange  
sac 1m  
25%  
shale  
frags

12'

C

same  
as  
test  
hole  
#D



SOIL PROFILE

0'  
or/br  
cl 1m

3'  
lt tan/  
orange  
sac 1m  
15%  
rock  
boulders

12'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Frederick Rd.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11-6-98	A	4.0'S	12:3340	12:35	12:35	12:37	2
		10.5'D	visual	ok - see profile			
	B	12.0'D	visual	only - see profile			
	C	10.0'D	visual	only - see profile			
	D	3.5'S	12:38	12:3830	12:3830	fast	fast
		12.0'D	visual	ok - see profile			
		(repour)	12:39	12:3930			fast
		(repour)	12:4010	12:41	12:41	12:4230	130

REMARKS test holes staked

TYPE OF SOIL

TESTED BY Kim Maiste

ALSO PRESENT Tim Feaga

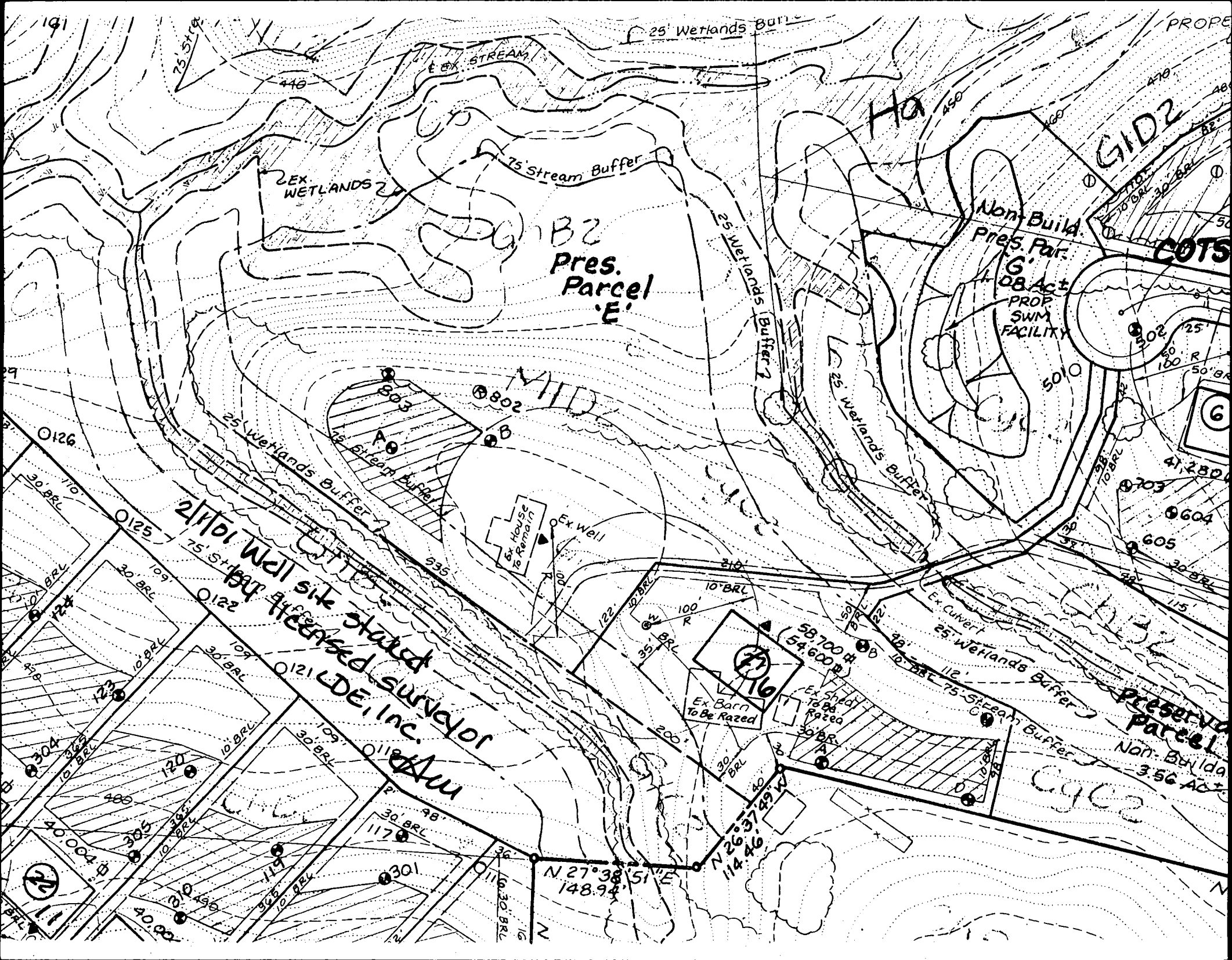
TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 2-3 min

TRENCH WIDTH 3

INLET DEPTH 2.5'

MAXIMUM BOTTOM DEPTH 4.5'

SQ. FT./BEDROOM 180



191

25' Wetlands Buffer

EX. STREAM

EX WETLANDS

75' Stream Buffer

B2  
Pres.  
Parcel  
'E'

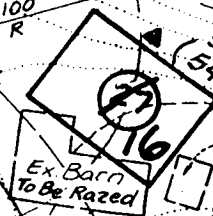
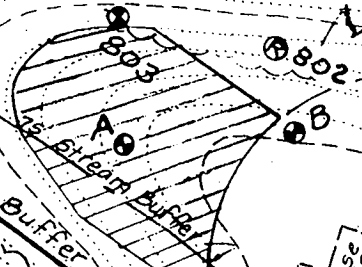
25' Wetlands Buffer 2

HA

Non-Build  
Pres. Par.  
'G'  
0.8 Act  
PROP  
SWM  
FACILITY

GID2

COTS



21/101 Well site stated  
by approved surveyor  
LDE, Inc.

Preserved  
Parcel  
Non-Build  
3.56 Act  
C902

21

N 27° 38' 51" E  
148.94'

N 26° 37' 49" W  
114.46'

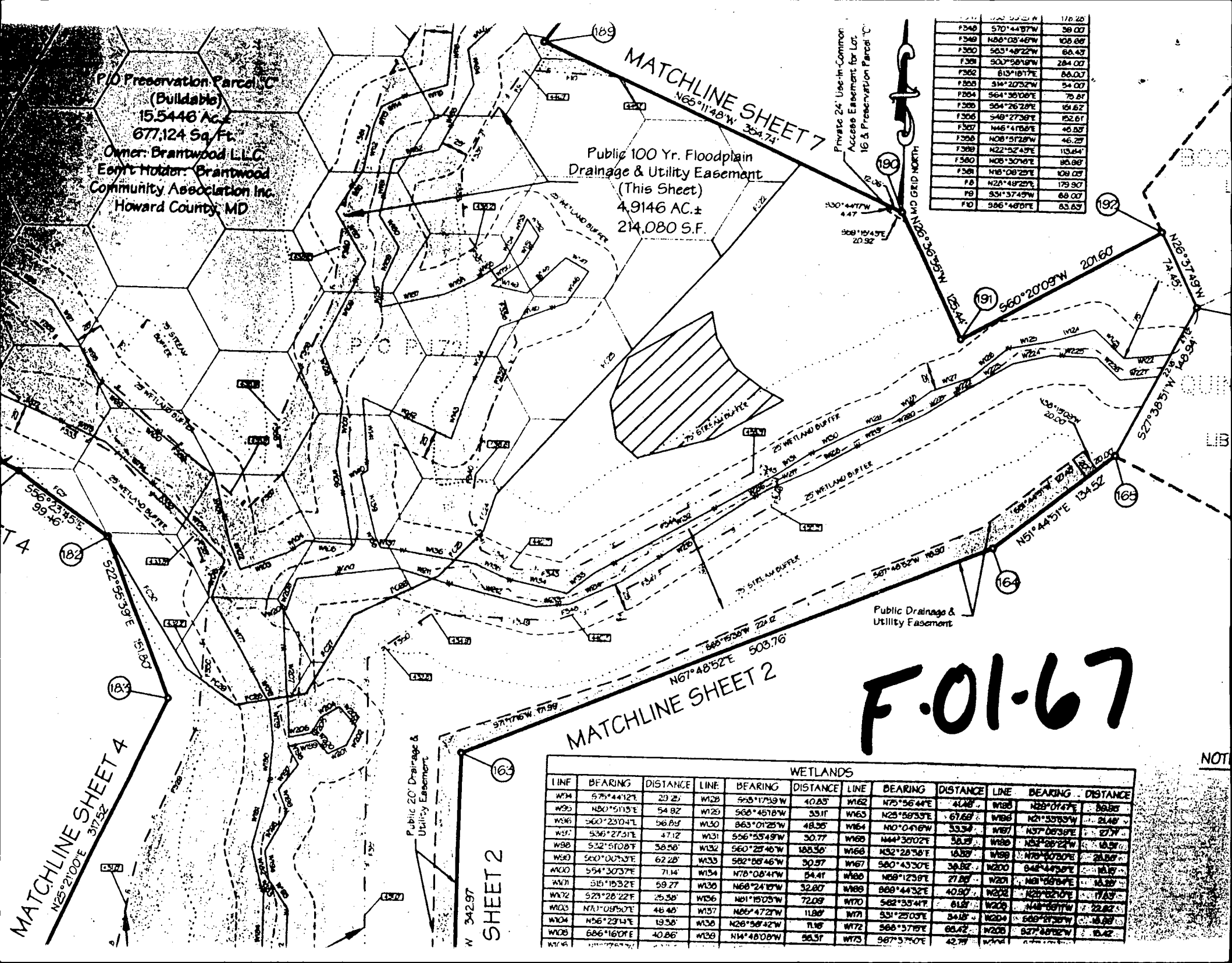


F248	570°44'07"W	58.00
F349	N86°08'46"W	105.00
F350	S63°48'22"W	68.42
F351	S00°58'19"W	28.00
F352	S13°18'17"E	88.00
F353	S14°20'32"W	54.00
F354	S64°56'06"E	75.87
F355	S64°26'22"E	104.62
F356	S48°27'36"E	152.61
F357	N46°41'58"E	45.87
F358	N08°51'28"W	46.29
F359	N22°52'43"E	115.84
F360	N08°30'16"E	85.00
F361	N18°08'29"E	109.00
F362	N28°48'29"E	179.90
F363	S31°37'45"W	68.00
F10	S86°48'07"E	83.83

P10 Preservation Parcel C  
(Bulldable)  
15.5446 Ac.  
677,124 Sq. Ft.  
Owner: Brantwood LLC  
Easmt Holder: Brantwood  
Community Association Inc.  
Howard County, MD

Public 100 Yr. Floodplain  
Drainage & Utility Easement  
(This Sheet)  
4.9146 AC.±  
214,080 S.F.

Private 24' Use-in-Common  
Access Easement for Lot  
16 & Preservation Parcel C



WETLANDS											
LINE	BEARING	DISTANCE	LINE	BEARING	DISTANCE	LINE	BEARING	DISTANCE	LINE	BEARING	DISTANCE
W14	S75°44'12"E	29.25	W120	S53°11'39"W	40.83	W162	N75°56'44"E	41.28	W188	N23°01'47"E	88.85
W15	N80°51'13"E	54.82	W121	S66°45'18"W	33.11	W163	N25°58'33"E	67.69	W189	N2°55'53"W	21.48
W16	S60°23'04"E	56.85	W122	S63°01'25"W	48.55	W164	N10°01'16"W	33.34	W190	N37°03'36"E	27.77
W17	S36°27'31"E	47.12	W123	S56°53'49"W	30.77	W165	N44°30'02"E	38.57	W191	N52°28'22"W	15.57
W18	S32°51'08"E	38.58	W124	S60°23'40"W	188.30	W166	N32°28'38"E	16.89	W192	N76°10'20"E	25.89
W19	S60°00'39"E	62.28	W125	S82°58'46"W	30.57	W167	S80°43'30"E	38.82	W193	S48°44'50"E	18.19
W20	S54°30'37"E	71.14	W126	N78°08'41"W	54.41	W168	N68°12'39"E	27.80	W194	N81°08'04"E	15.29
W21	S15°15'32"E	59.27	W127	N68°24'17"W	32.87	W169	S88°44'32"E	40.50	W195	N28°02'07"E	17.83
W22	S23°28'22"E	25.38	W128	N81°19'03"W	72.09	W170	S82°35'41"E	61.87	W196	N48°08'11"W	22.82
W23	N71°09'50"E	46.46	W129	N65°47'21"W	118.67	W171	S31°25'03"E	34.18	W197	S68°21'30"W	18.89
W24	N56°29'14"E	19.38	W130	N28°58'42"W	71.16	W172	S88°37'19"E	68.42	W198	S27°48'29"W	18.42
W25	S66°16'07"E	40.86	W131	N14°48'08"W	56.57	W173	S87°37'50"E	42.77			

**F.01-67**

NOT

Building Address 11357 Cotswold Springfarm Ln  
Ellicott City, MD

Suite/Apt. #: \_\_\_\_\_ SDP/WP/Petition #: \_\_\_\_\_

Census Tract 6030W Subdivision Brantwood

Section 3 Area 2 Lot 16

Tax Map 21 Parcel 45 Grid 01

Zoning R01FB Map Coordinates \_\_\_\_\_ Lot size \_\_\_\_\_

Property Owner's Name Kantucket Homes/Dorsey

Address 13090 Old Frederick Rd

City Sykesville State MD Zip Code 21784

Home Phone \_\_\_\_\_ Work Phone (410)442-8200

Applicant's Name & Mailing Address, (if other than stated hereon): \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Existing Use Single family custom home

Proposed Use Single family w/ finished basement

Estimated Construction Cost \$ 30,000

Description of Work Finished basement w/  
study, media room family room  
Full bath 1165 sq

Contractor Company Kantucket Homes/Dorsey Inc

Contact Person Phil Dorsey

Address 13090 Old Frederick Rd

City Sykesville State MD Zip Code 21784

License No HHBR 332

Phone (410)442-8200 Fax (410)442-8221

Occupant or Tenant owner

Contact Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Engineer or Architect Company \_\_\_\_\_

Contact Person \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

**BUILDING DESCRIPTION - COMMERCIAL** **BUILDING DESCRIPTION - RESIDENTIAL**

Building Characteristics	Utilities
Height: _____	Water Supply: _____ Public _____ Private _____
No. of stories: _____	Sewage Disposal: _____ Public _____ Private _____
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
State Certified Modular _____	Sprinkler system: N/A <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: _____ Public _____ Private <input checked="" type="checkbox"/>
Depth _____ Width _____	Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/>
1st floor: <u>46</u> <u>48</u>	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
2nd floor: <u>47</u> <u>46</u>	Gas Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Basement: <u>49</u> <u>51</u>	Heating System: _____ Electric <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Propane Gas <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/>	Sprinkler system: N/A <input checked="" type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other _____
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	
No. of Bedrooms <u>4</u>	
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 _____	

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 THERETO; (4) THAT HE/SHE WILL PERFORM NO 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 PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Phil Dorsey  
 Applicant's Signature  
Kantucket Homes  
 Title/Company

Phillip H. Dorsey  
 Print Name  
11-29-02  
 Date

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**

**FOR OFFICE USE ONLY**

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#
Land Development, DPZ			Front: _____	<u>53851</u>
State Highways			Rear: _____	Piling fee \$ _____
Building Official			Side St: _____	Permit fee \$ <u>173.00</u>
Dev. Engineering			All minimum setbacks met?	Excise tax \$ _____
Health			YES <input type="checkbox"/> NO <input type="checkbox"/>	Add'l per. fee \$ _____
Fire Protection			Is Entrance Permit required?	<b>TOTAL FEES</b> \$ <u>191</u>
Is Sediment Control approval required prior to issuance?			YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
CONTINGENCY CONSTRUCTION START <input type="checkbox"/>			Is Entrance District?	Balance due \$ _____
ONE STOP SHOP <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	Checks <u>3871</u>
			Lot Coverage for New Town Zone _____	Validation <u>16579</u>
			SDP Review approval date _____	Accepted by <u>[Signature]</u>

Distribution of Copies: White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA