

LAYOUT 12/20/02 10:30-11 INSP 4 12/21/02 1pm
 INSP 2 12/23/02-2:30 INSP 5 1/23/03 2:00
 INSP 3 12/26/02 2:30 INSP 6 -3:00

ISSUE DATE: 12/06/2002

APPROVAL DATE: 1/23/03

PERMIT INDEXED

P 518048

A 510572-B

RPS#
338703

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

South Carroll Backhoe, Inc. IS PERMITTED TO INSTALL ALTER

ADDRESS: 4410 Salem Bottom Rd., Westminster PHONE NUMBER: 410-875-4197

SUBDIVISION: Brantwood 3/2 LOT NUMBER: 18

ADDRESS: 11311 Cotwold Spring Farm Lane PROPERTY OWNER: NVR Inc.

SEPTIC TANK CAPACITY (GALLONS): 1250 OUTLET Baffle FILTER REQUIRED

PUMP CHAMBER CAPACITY (GALLONS): 1250 ~~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 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 the distribution box 10' from front property line and 122' from front right property line as shown on the approved building permit plan.
NOTES:	Well location must be field verified prior to installation.

PLANS APPROVED: John A. Boris *o/c* 7/22/02 DATE: 7/10/2002

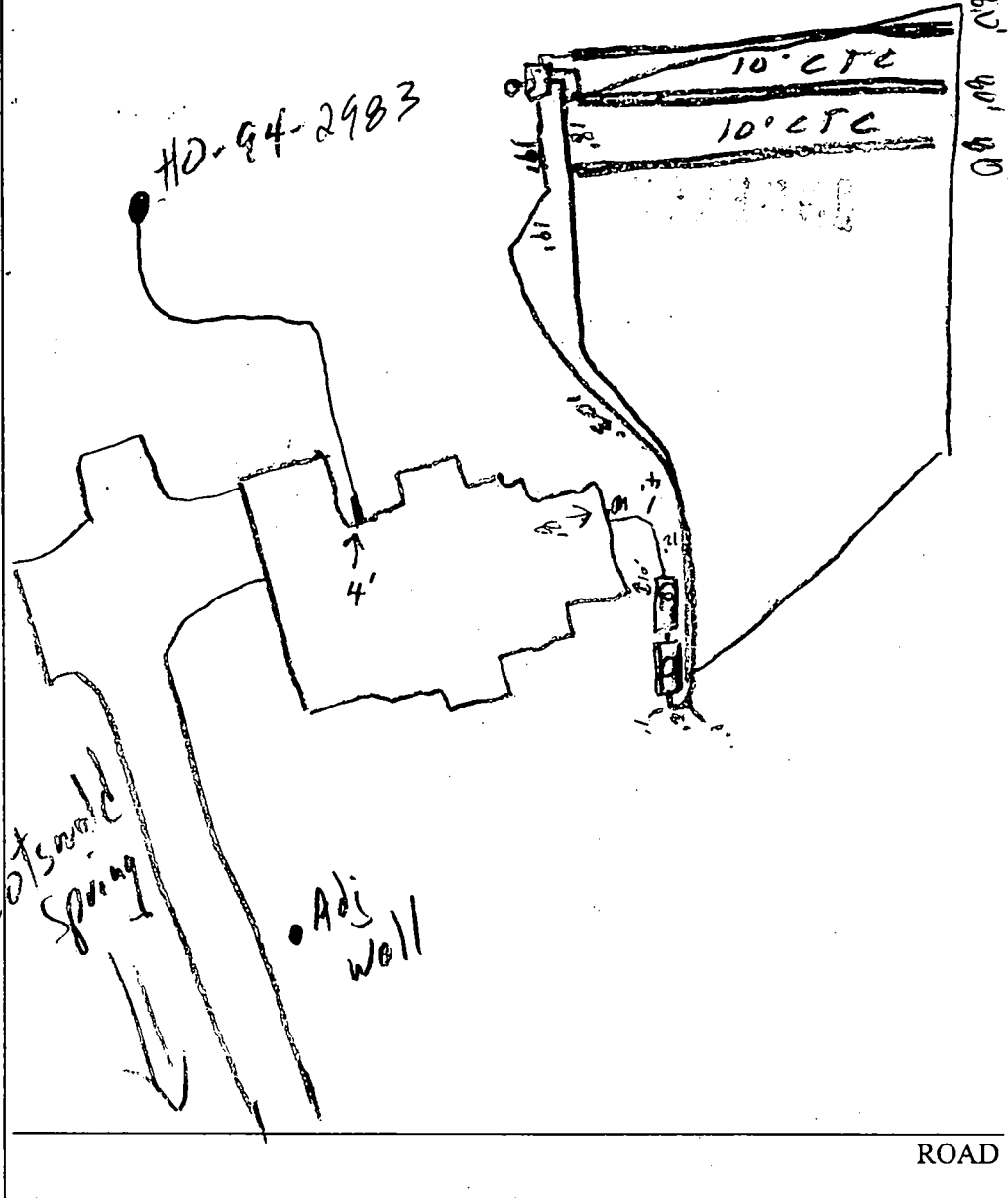
NOTES: PERMIT VOID AFTER 2 YEARS
 CONTRACTOR IS RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
 WATERTIGHT SEPTIC TANKS REQUIRED
 ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL UNLESS SPECIFICALLY AUTHORIZED
 MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS 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 BUILDING PERMIT SIGNED AND RETURNED ALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

811-04 800149833-DECKS

4510572-B

NOT TO SCALE



TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
3'	3'	5'
NUMBER OF TRENCHES		3
TOTAL LENGTH		240'
ABSORPTION AREA		720 sq'
DISTRIBUTION BOX LEVEL		✓
DISTRIBUTION BOX BAFFLE		✓
DISTRIBUTION BOX PORT		✓

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

PRE-CONSTRUCTION 12/20/02 House conn changed, keep tank w/ less than 3' of cover. Topo accurate, Trenches per P&P. Measure (2) 100'

INSTALLATION radius (SD) 12/23/02 Tanks just arrived (SD)

12/26/02 Tanks set, 3 trenches installed, OK to cover (SD)

12/27/02 OK to cover all work. Pump & Alarm test needed (SD)

1/23/03 Pump & Alarm tests OK (SD)

FINAL INSPECTOR Steve [Signature]

DATE OF APPROVAL 1/23/03

FREDERICK ROAD - MD RTE. 144

VEHICULAR INGRESS AND EGRESS IS RESTRICTED

SEWAGE SYSTEM DESIGN DATA / LOT 18: AKA 2

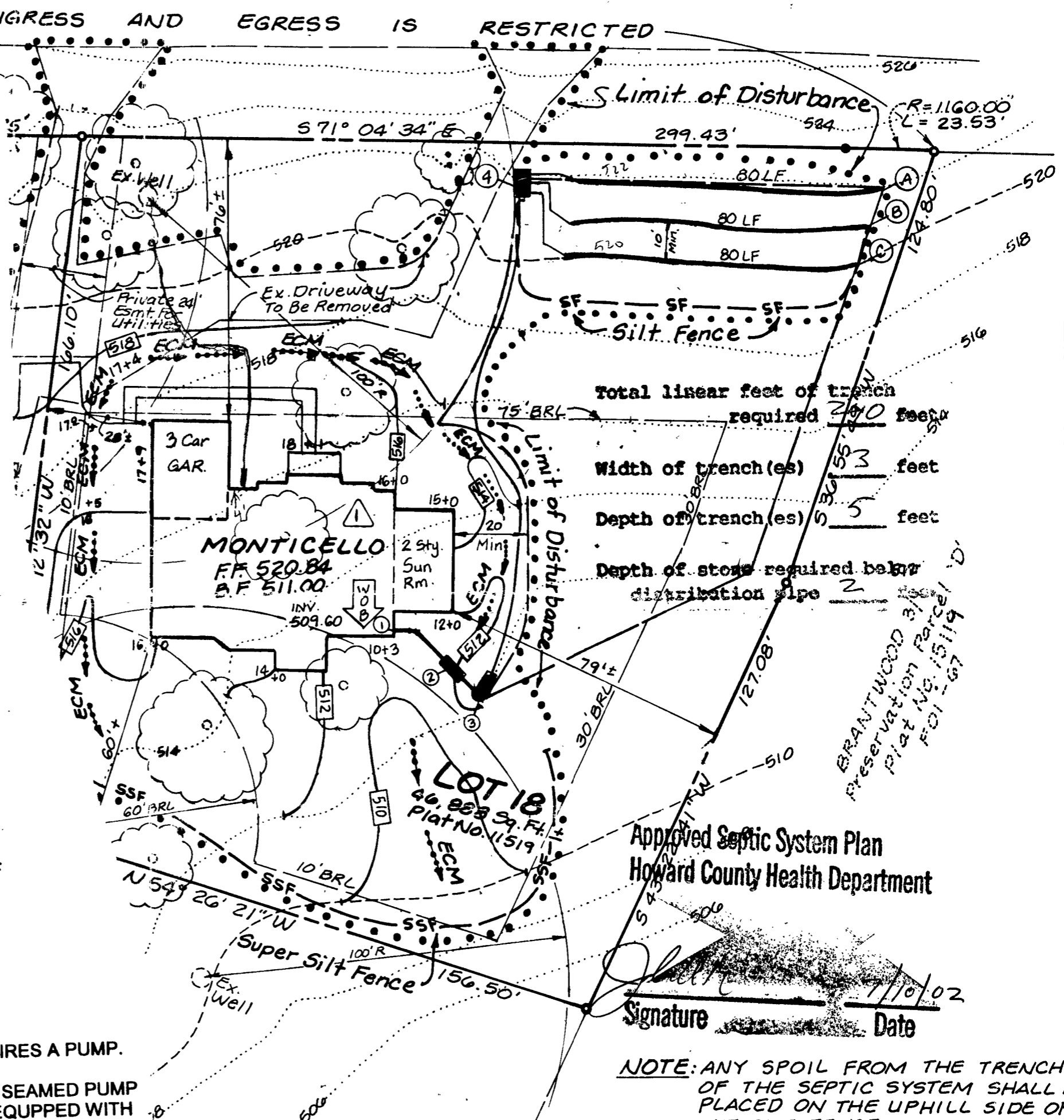
- ① Invert at foundation wall: 509.60 (Basement Service)
- ② 1500 Gallon Septic Tank (4 Bedrooms)
Provide Manhole to Finished Grade
 - A. Ex. Ground Over Tank: 512.20
 - B. Prop. Grade Over Tank: 512.00
 - C. Invert In: 509.40
 - D. Invert Out: 509.10
- ③ 1000 Gallon Pump Pit
 - A. Ex. Ground over Pit: 512.00
 - B. Prop. Grade over Pit: 512.00
 - C. Invert In: 509.00
 - D. Invert Out: 509.50
- ④ Distribution Box: (Provide 3 Outlets Minimum)
 - A. Ex. Ground Over Box: 522.00
 - B. Prop. Grade Over Box: 522.00
 - C. Invert In: 519.00
- ⑤ Trench Design: 60 LF/Bedrm. X 4 Bedrm. = 240 LF

	(A)	(B)	(C)
Ex. Ground			
Over Trench:	521.70	520.85	520.00
Inv. Trench:	518.70	517.85	517.00
Botm. Trench:	516.70	515.85	515.00
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.

NOTES: / LOT 18

1. THE PROPOSED SEPTIC SYSTEM FOR THIS LOT REQUIRES A PUMP.
- ** 2. PUMP CHAMBER TO BE A MINIMUM 1000 GALLON TOP SEAMED PUMP PIT WITH SINGLE EFFLUENT PUMP. PUMP SHALL BE EQUIPPED WITH AUDIBLE AND VISUAL ALARM SYSTEM FOR HIGH WATER AND PUMP MALFUNCTION. ALARM SYSTEM SHALL BE INSTALLED ON A SEPARATE ELECTRICAL CIRCUIT. INSTALL CHECK VALVES AS REQUIRED.
3. PROVIDE MANHOLE CLEANOUT TO FINISHED GRADE AT PROPOSED SEPTIC TANK AND THE PUMP CHAMBER.
4. DETAILS AND SPECIFICATIONS OF THE PROPOSED PUMP WITHIN THE PUMP PIT TO BE SUPPLIED BY THE CONTRACTOR FOR REVIEW AND APPROVAL BY THE HOWARD COUNTY HEALTH DEPARTMENT PRIOR TO ISSUANCE OF A SEPTIC PERMIT.



Total linear feet of trench required **240** feet
 Width of trench(es) **3** feet
 Depth of trench(es) **5** feet
 Depth of stone required below distribution pipe **2**

GRANTWOOD
 Preservation Parcel
 Plat No. 15119
 FOI - 67

Approved Septic System Plan
 Howard County Health Department

Signature _____ Date 7/10/02

NOTE: ANY SPOIL FROM THE TRENCHING OF THE SEPTIC SYSTEM SHALL BE PLACED ON THE UPHILL SIDE OF THE SILT FENCE.

LEGEND

--- 520 --- EXISTING GROUND

PROPERTY KNOWN AS:

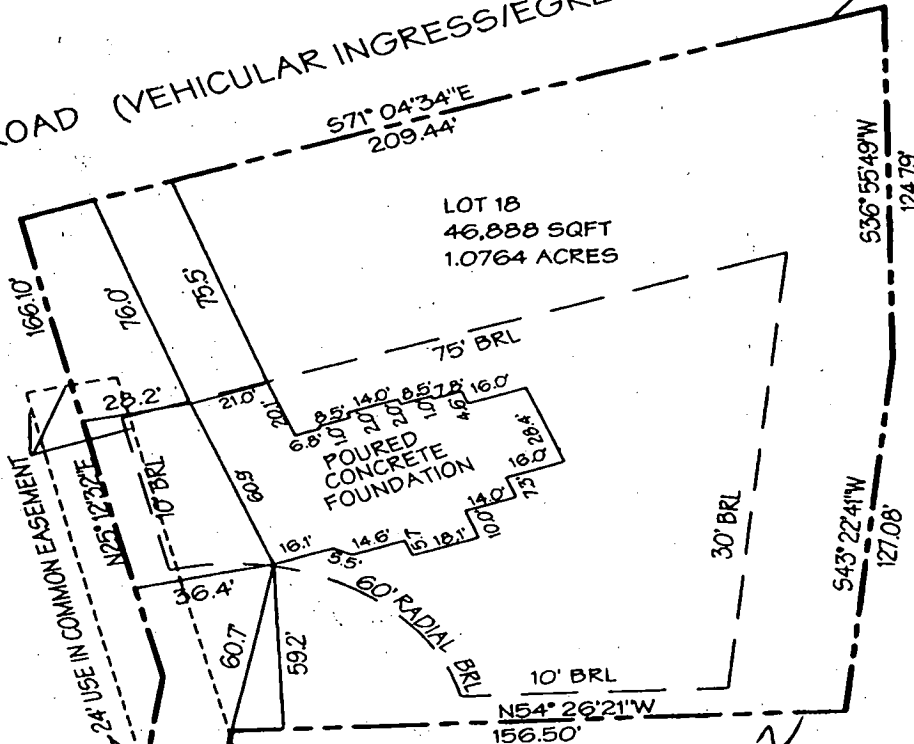
LOT 18
BRANTWOOD SECTION 3 AREA 2
PLAT NO. 15119
HOWARD COUNTY, MARYLAND

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

FREDERICK ROAD (VEHICULAR INGRESS/EGRESS RESTRICTED)

$R=1160.00'$ $D=1^{\circ}09'44''$ $L=23.53'$
 $Chd=570^{\circ}29'38''E$ $23.53'$

LOT 18
46,888 SQFT
1.0764 ACRES



BRANTWOOD 3/1 PRESERVATION PARCEL D

*12602 House site OK
location same as site system layout.
KW*

COTSWALD SPRING FARM LANE (40' RW)
 $R=70.00'$ $D=18^{\circ}14'21''$ $L=22.28'$
 $Chd=N18^{\circ}54'10''W$ $22.19'$

LOCATION DRAWING

TOP WALL ELEV= 520.1'

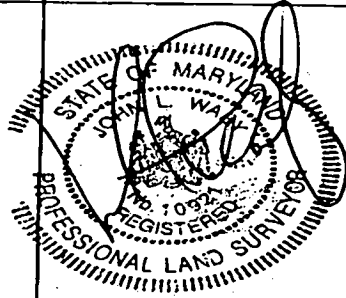
CERTIFICATION

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

LOT 18 COTSWALD SPRING FARM LANE

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.

SEAL



SCALE 1" = 50'

DATE 11/24/02

LDE Inc.
Engineers, Surveyors, Planners

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

PLAT NO. 15119 SECTION 3 AREA 2 BRANTWOOD HOWARD COUNTY MARYLAND

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: Van Sant Plumbing Telephone #: 301-829-0444
Address: 300 Main St
Middleburg Heights, OH 44130

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer
License # and name of individual responsible for the field installation:
Name (Print): Donald Van Sant License# 14467

*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: DN James Telephone #: _____
Subdivision: Brownwood Sec 3 Lot #: 18 Well Tag #: HO-94-2983
Site Address: 11311 Colswold Spring Farm Lane
Middleburg Heights, OH 44130

Submersible Pump Data Pitless Adapter Well Cap and Electric Conduit
Make: Goulds Make: Campbell Two piece watertight cap:
Model #: 5350722 3/4HP Model#: 5102 Screened, vented well cap:
Pump Capacity _____ GPM Depth: 42 (36" min) Cap secured to casing:
Well Yield: _____ GPM NSF approved: Yes Conduit min 18" B.G.:
Depth of well encountered at time of pump installation: 300 (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 NO

Piping to house House Connection
Type: Polyethylene PVC sleeved to undisturbed soil at wall penetration: 5
PSI: 200 (100 psi min) Approximate length of sleeve: 15
Depth of supply line: 2 (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.

Signature of company representative responsible for installation: Donald Van Sant date: 1/13/03

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

Date Insp. Requested: _____ Date Insp. Approved: 12/10/02 SO
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

ST/CO USE ONLY DATE Received MM DD YY DATE WELL COMPLETED MM DD YY 15 6 13 2001 Depth of Well 22 600 26 (TO NEAREST FOOT) PERMIT NO. FROM "PERMIT TO DRILL WELL" HO 94-2983

OWNER Brantwood LLC STREET OR RFD Cotuitold Spring Farm LA TOWN West Friendship SUBDIVISION Brantwood SECTION 3 Area 2 LOT 2

WELL LOG
Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (Use additional sheets if needed)	FEET		check if water bearing
	FROM	TO	
Sand	0	55	
Gray Mica Rock	55	600	✓

GROUTING RECORD
WELL HAS BEEN GROUTED (Circle Appropriate Box) Y N
 TYPE OF GROUTING MATERIAL (Circle one)
 CEMENT CM BENTONITE CLAY BC
 NO. OF BAGS 17 NO. OF POUNDS 7598
 GALLONS OF WATER 102
 DEPTH OF GROUT SEAL (to nearest foot)
 from 0 ft. to 52 ft.
 (enter 0 if from surface)

CASING RECORD
casing types insert appropriate code below
 ST STEEL CO CONCRETE
 PL PLASTIC OT OTHER
 MAIN CASING TYPE ST
 Nominal diameter top (main) casing (nearest inch)! 6
 Total depth of main casing (nearest foot) 60

OTHER CASING (if used)
 diameter inch depth (feet) from to
 E A C H C A S I N G

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

NUMBER OF UNSUCCESSFUL WELLS: 2
 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. MSD024
 DRILLERS SIGNATURE David E. Mayne
 (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. MSD027
 DRILLERS SIGNATURE David E. Mayne

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

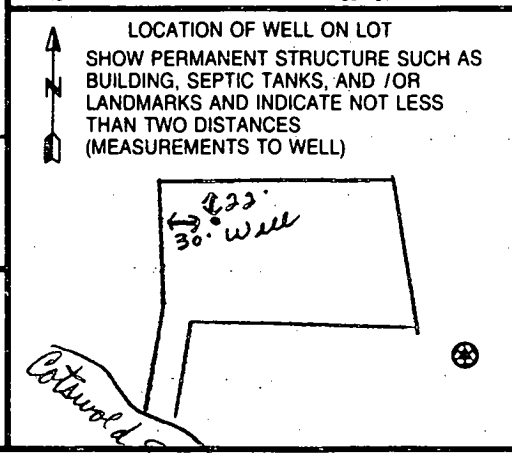
C2 DEPTH (nearest ft.)
 T 2
 1 HO 57 600
 E A C H S R E E N
 8 9 11 15 17 21
 23 24 26 30 32 36
 38 39 41 45 47 51
 SLOT SIZE 1 2 3
 DIAMETER OF SCREEN (NEAREST INCH)
56 60
 from to

GRAVEL PACK IF WELL DRILLED - WAS FLOWING WELL - INSERT F IN BOX 68 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) 6
 PUMPING RATE (gal. per min.) 1.5
 METHOD USED TO MEASURE PUMPING RATE Bucket
 WATER LEVEL (distance from land surface)
 BEFORE PUMPING 26 ft.
 WHEN PUMPING 296 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 PLACE (A,C,J,P,R,S,T,O) IN BOX 29 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 } 3 (nearest foot)



Page _____ of _____
 Date 6/13/2001

Review OK SRK
7/2/01

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 94-2983
 Location of property (road) Cotswold Spring Farm Lane
 Subdivision Brentwood Lot 2 Block _____ Plat _____ Sec. 3 Area 2
 Well Driller Joseph & Mayne Owner Brentwood LLC - Brantley Development Group
 Depth of well 600'
 Distance of measuring point (M.P.) above ground 3'
 Static water level (S.W.L.) below M.P. 26'

I. High rate pumping -- reservoir drawdown

Time pump started 6:45 Pumping rate 20 gpm
 Total time 45 min to reach pumping water level 296 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 5' gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
7:00	138'	3 sec		20 gpm
7:15	220'	4		15
7:30	296	5		12
7:45	296	40		1.5
8:00	296	40		1.5
8:15	296	40		1.5
8:30	296	40		1.5
8:45	295	40		1.5
9:00	295	40		1.5
9:15	295	40		1.5
9:30	295	40		1.5
9:45	295	40		1.5
10:00	295	40		1.5
10:15	295	40		1.5
10:30	295	40		1.5
10:45	295	40		1.5
11:00	295	40		1.5
11:15	295	40		1.5
11:30	295	40		1.5
11:45	295	40		1.5
12:00	295	40		1.5
12:15	295	40		1.5
12:30	295	40		1.5
12:45	295	40		1.5
1:00	295	40		1.5
1:15	295	40		1.5
1:30	295	40		1.5
1:45	295	40		1.5

B1 03702

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

STATE PERMIT NUMBER

HO-94-2983

W514919 please print or type

fill in this form completely

Date Received (APA) 2/16/01

OWNER INFORMATION

Brantwood, L.L.C. 8835P Columbia 100 Parkway Columbia Md 21045

LOCATION OF WELL

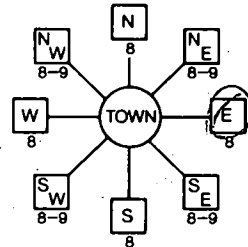
Howard Brantwood West Friendship

MILES FROM TOWN (enter 0 if in town) 3 1/2

DRILLER INFORMATION

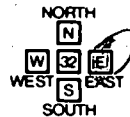
Joseph P. Mayne MSD024 Joseph P. Mayne Well Drilling 5512 Ridge Rd Mt. Airy Md 21771

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Cotowold Spring Farm La

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



DISTANCE FROM ROAD 180

TAX MAP: BLK: PARCEL

WELL INFORMATION

APPROX. PUMPING RATE 5 AVERAGE DAILY QUANTITY NEEDED 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- Domestic Potable Supply & Residential Irrigation (circled), Farming, Industrial, Public Water Supply Well, Test, Observation, Monitoring, Geo-thermal

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard CO 13 COUNTY NAME COUNTY NO. STATE SIGNATURE DATE ISSUED 2/12/01

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

METHOD OF DRILLING (circle one)

BORED (or Augered) AIR-ROTary (circled) JETTED ROTARY (Hydraulic Rotary) CABLE Drive-POINT

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

- THIS WELL WILL NOT REPLACE AN EXISTING WELL (circled), 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 DEEPEMED AN EXISTING WELL

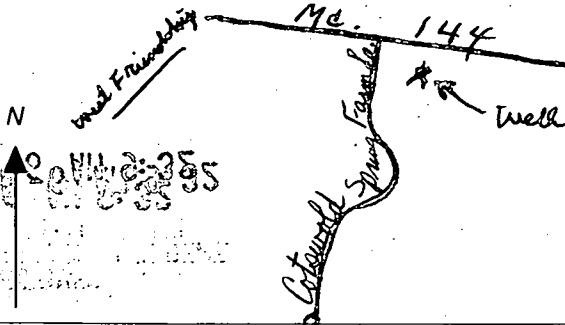
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER 1. Well

WRITE THE BOX NUMBER FROM THE MAP HERE

E 820 N 520

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 HO 98 GAP 6005 PERMIT NO. HO-94-2983

SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

APPLICATION

PERCOLATION TESTING

A 510571A

P _____

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

DISTRICT _____

DATE 7/17/98

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 George A. Garbutt

ADDRESS 11363 Frederick Rd., Ellicott City, MD 21042 PHONE _____

AGENT OR PROSPECTIVE BUYER Heritage Land Development

ADDRESS 3243 Bethany Lane, Ellicott City, MD 21042 PHONE 410-313-8808

PROPERTY LOCATION:

SUBDIVISION Brantwood II LOT NO. 1218

ROAD AND DESCRIPTION 11363 Frederick Road, Ellicott City, MD 21042

TAX MAP 16 PARCEL # 172

SIZE OF LOT 1 acre 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]
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING Hold for wet season testing

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

510571 A

COUNTY #

SOIL PROFILE

102

orange
cl lm

orange
brown
silt
mica
flocs
quartz
boulders
100%

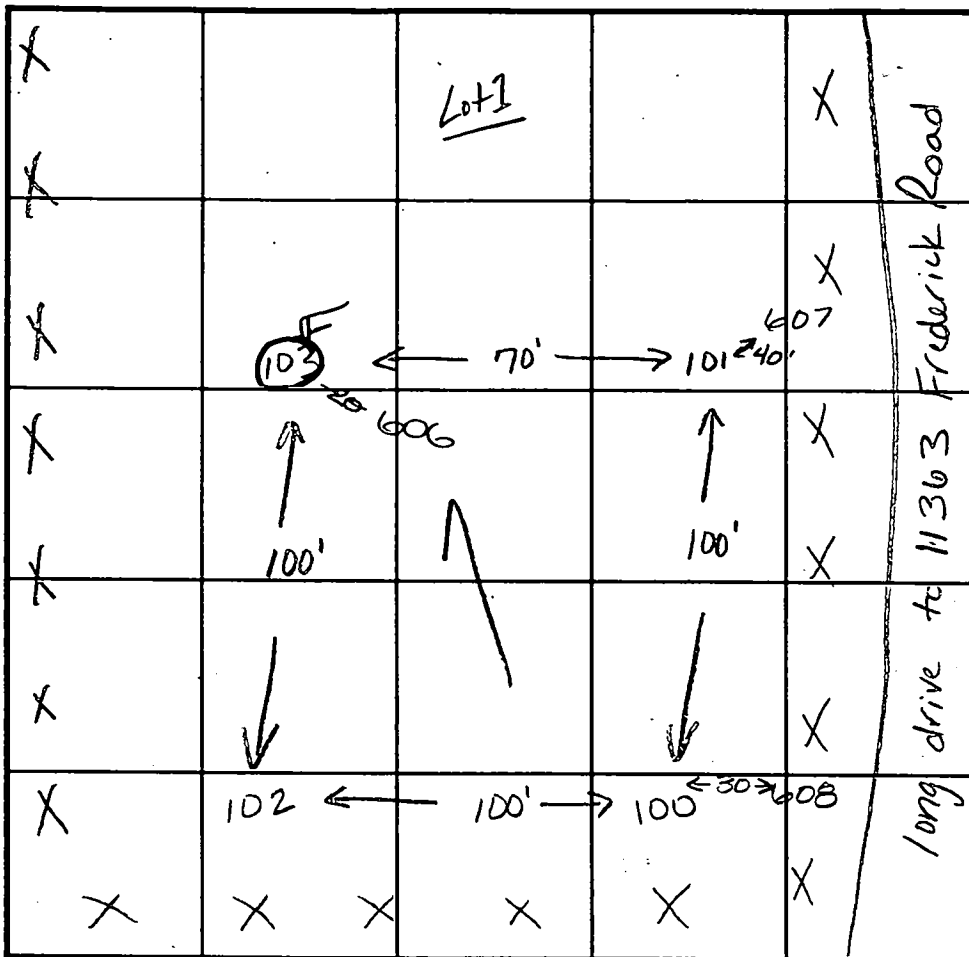
103

Same
as
test
hole
102

101

orange
cl lm

beige
orange
silt
mica
flocs
quartz
boulders



SOIL PROFILE

100

orange
cl lm

tan/
pink
silt
mica
flocs

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE. Route 144

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
8-26-98	102	3.0'S	10:21:30	10:22:30	10:22:30	10:24:30	4min	
		10.0'D	Visual ok - see profile					
	101	2.5'S	10:27:10	10:30:15	10:30:15	10:35:15	5min	
		11.0'D	Visual ok - see profile					
	100	10.0'D	Visual only - ok see profile					
	(103)	10.0'D	Visual only - ok see profile					
			WATER AT 10.0'					F

REMARKS test holes staked by surveyor

TYPE OF SOIL

TESTED BY

Kim Maiste

ALSO PRESENT

Tim Feaga

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

4-5 minutes

TRENCH WIDTH

3

INLET DEPTH

3

MAXIMUM BOTTOM DEPTH

5

SQ. FT/BEDROOM

180

A510571A

Brantwood III

COUNTRY #

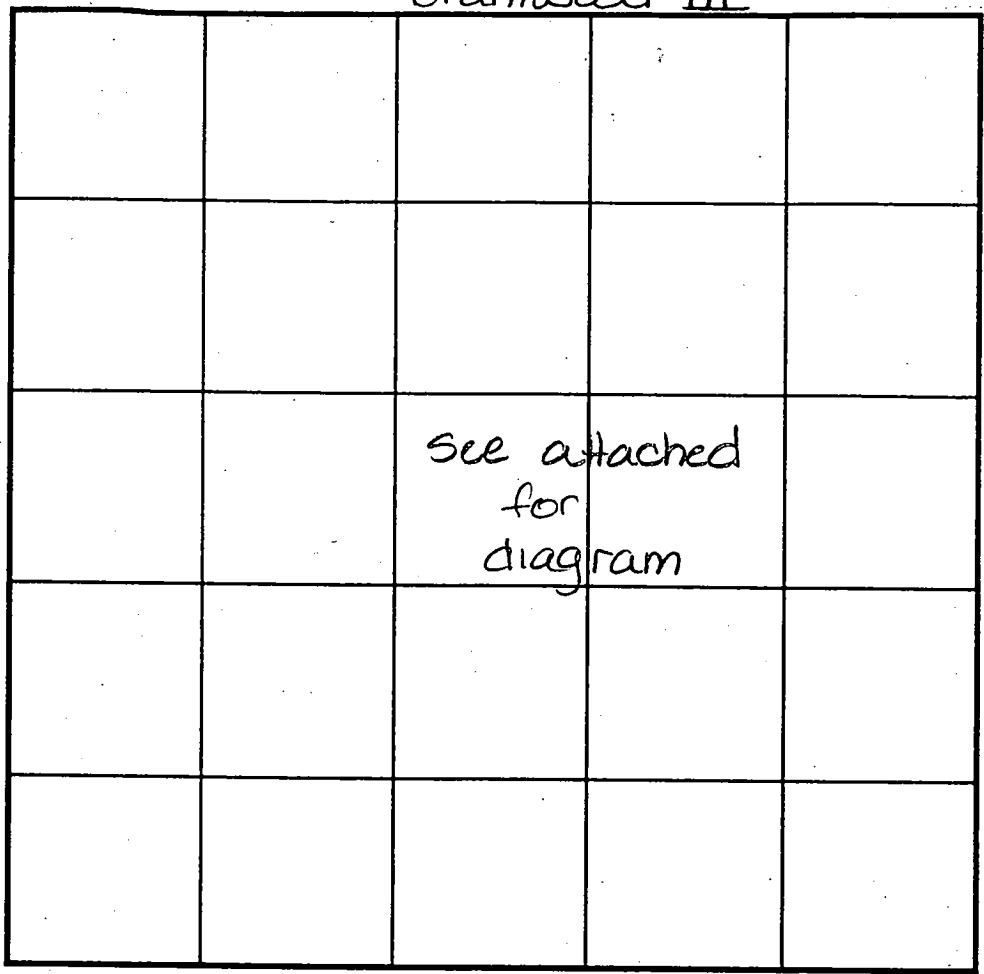
SOIL PROFILE

0' 606
 bright red Sicilm

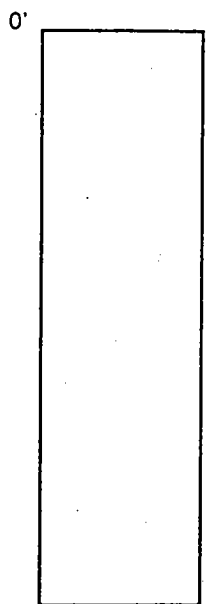
4.0
 bright red Salm micaceous

8.5
 dull mottled Salm micaceous

12.0



SOIL PROFILE



608
 topsoil

1.0
 lgt yellow tan Salm

6.0
 dark red Salm micaceous
 15% Shale

12.0

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
3-31-99	<u>606</u>	Visual	to 12.0	- see profile			OK - marginal
	<u>607</u>	Visual	to 12.0	- see profile			OK
	<u>608</u>	Visual	to 12.0	- see profile			OK

607
 heavy or red Sicilm

4.5
 lgt orange w/ white Salm

7.0
 dark red Salm gritty micaceous

12.0

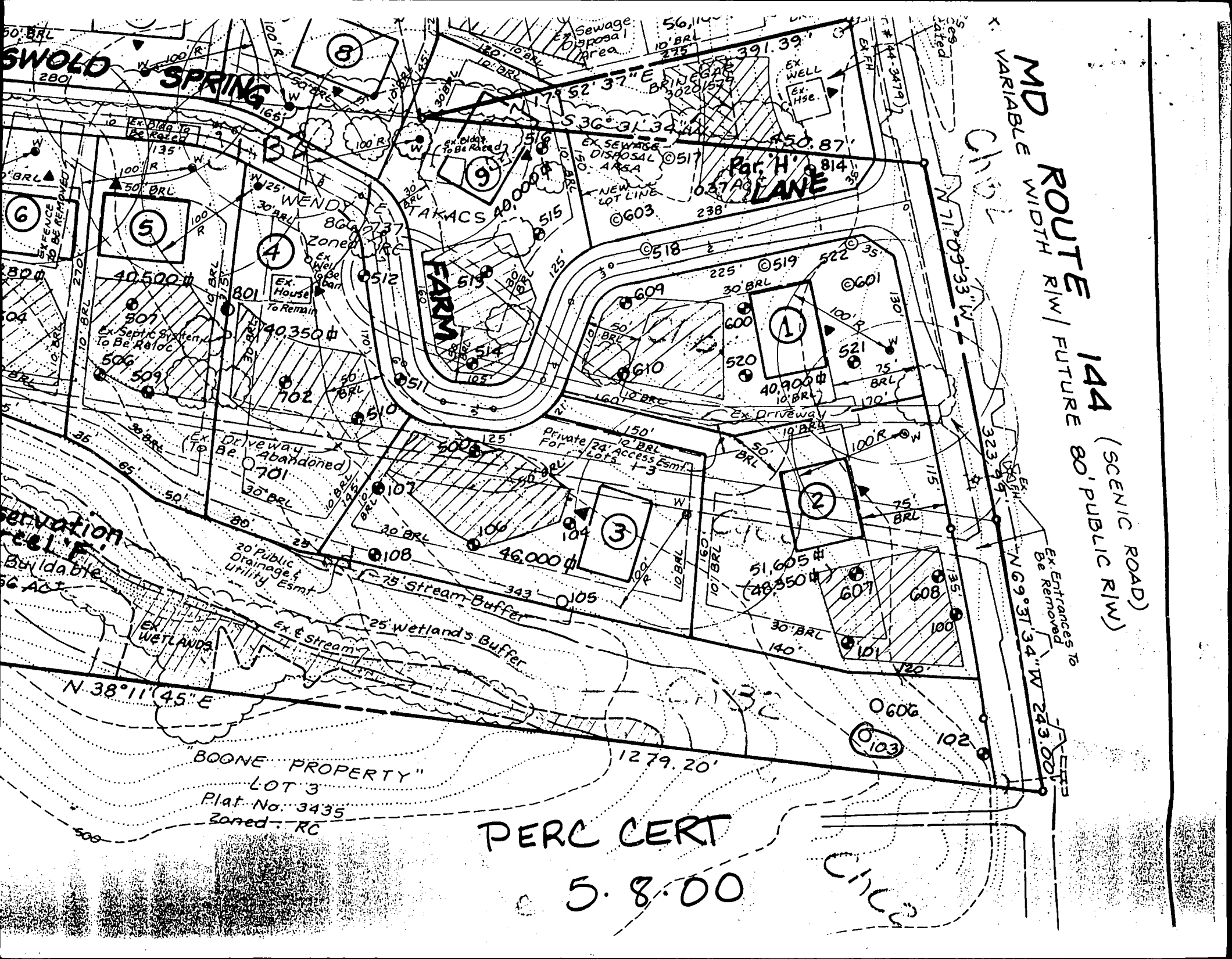
REMARKS _____

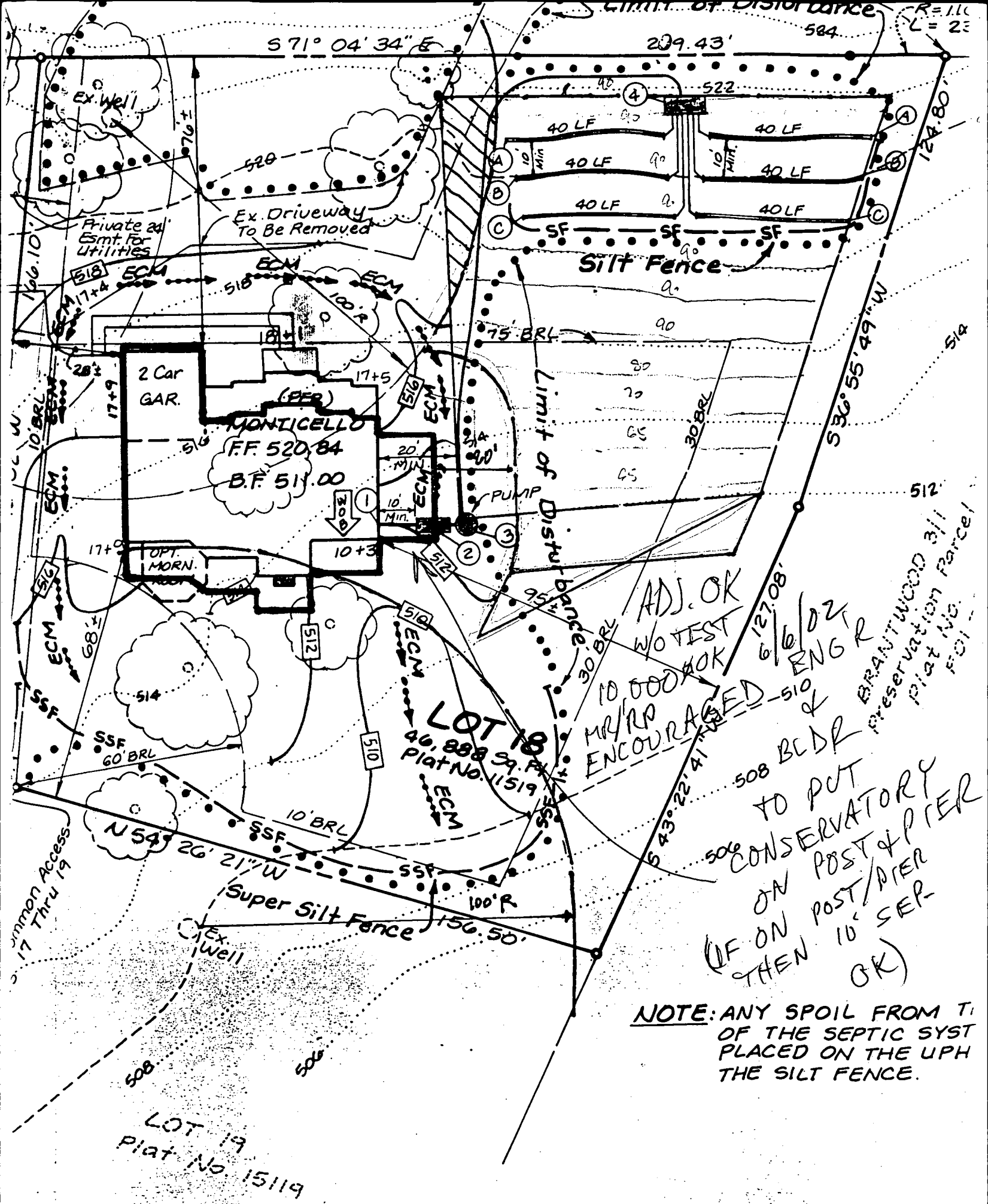
TYPE OF SOIL _____

TESTED BY Amy McMillen ALSO PRESENT _____

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 5min TRENCH WIDTH 3.0

INLET DEPTH 2.0 MAXIMUM BOTTOM DEPTH 4.0 SQ. FT./BEDROOM 180





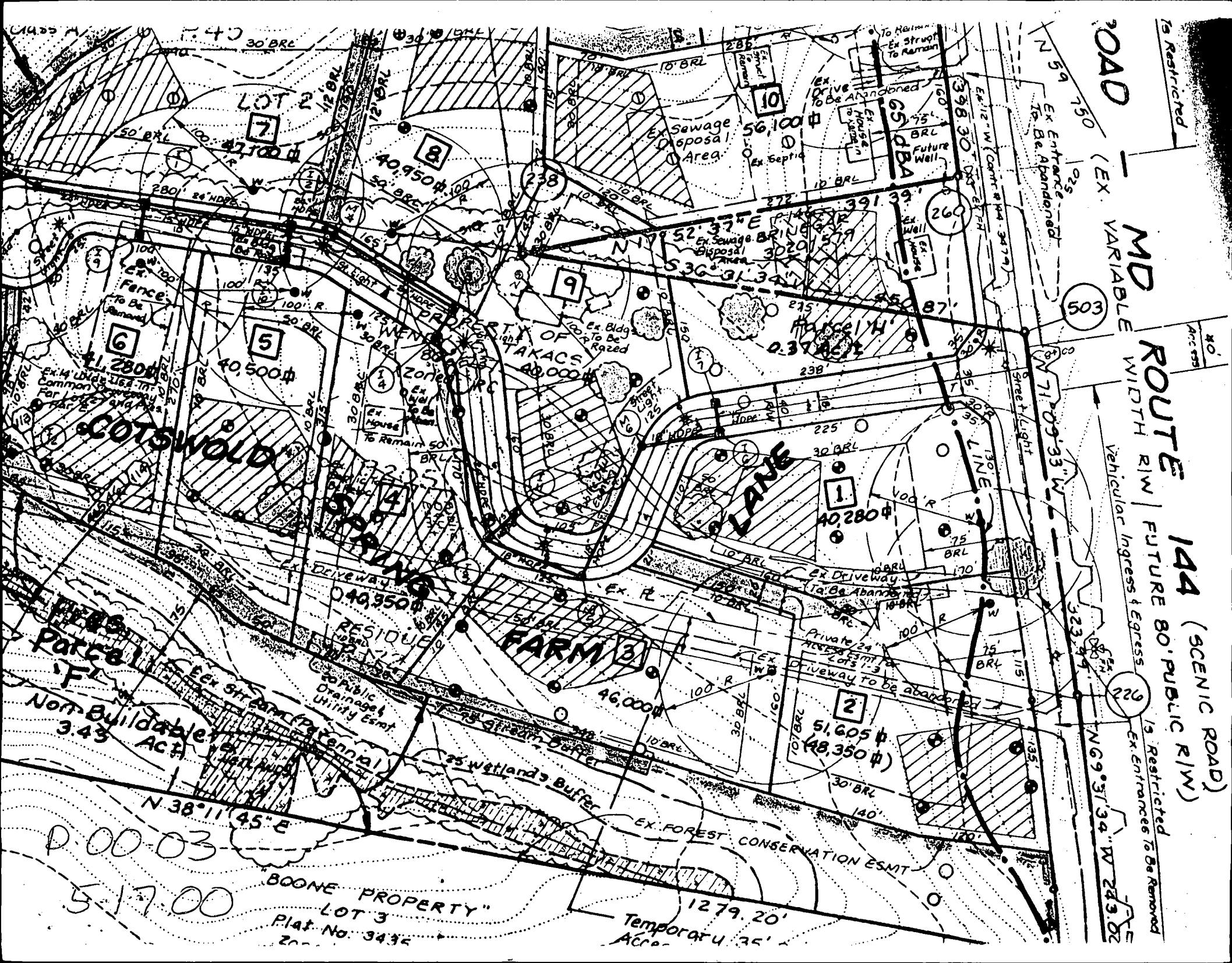
ADJ. OK
 WO TEST
 10 000
 MR/PP
 ENCOURAGED -510
 6/6/02
 ENG R
 BRANTWOOD 3/1
 Preservation Parcel
 Plat No. 1501

508 BCDR
 TO PUT
 CONSERVATORY
 ON POST & PIER
 (IF ON POST/PIER
 THEN 10' SEP.
 OK)

**NOTE: ANY SPOIL FROM T1
 OF THE SEPTIC SYST
 PLACED ON THE UPH
 THE SILT FENCE.**

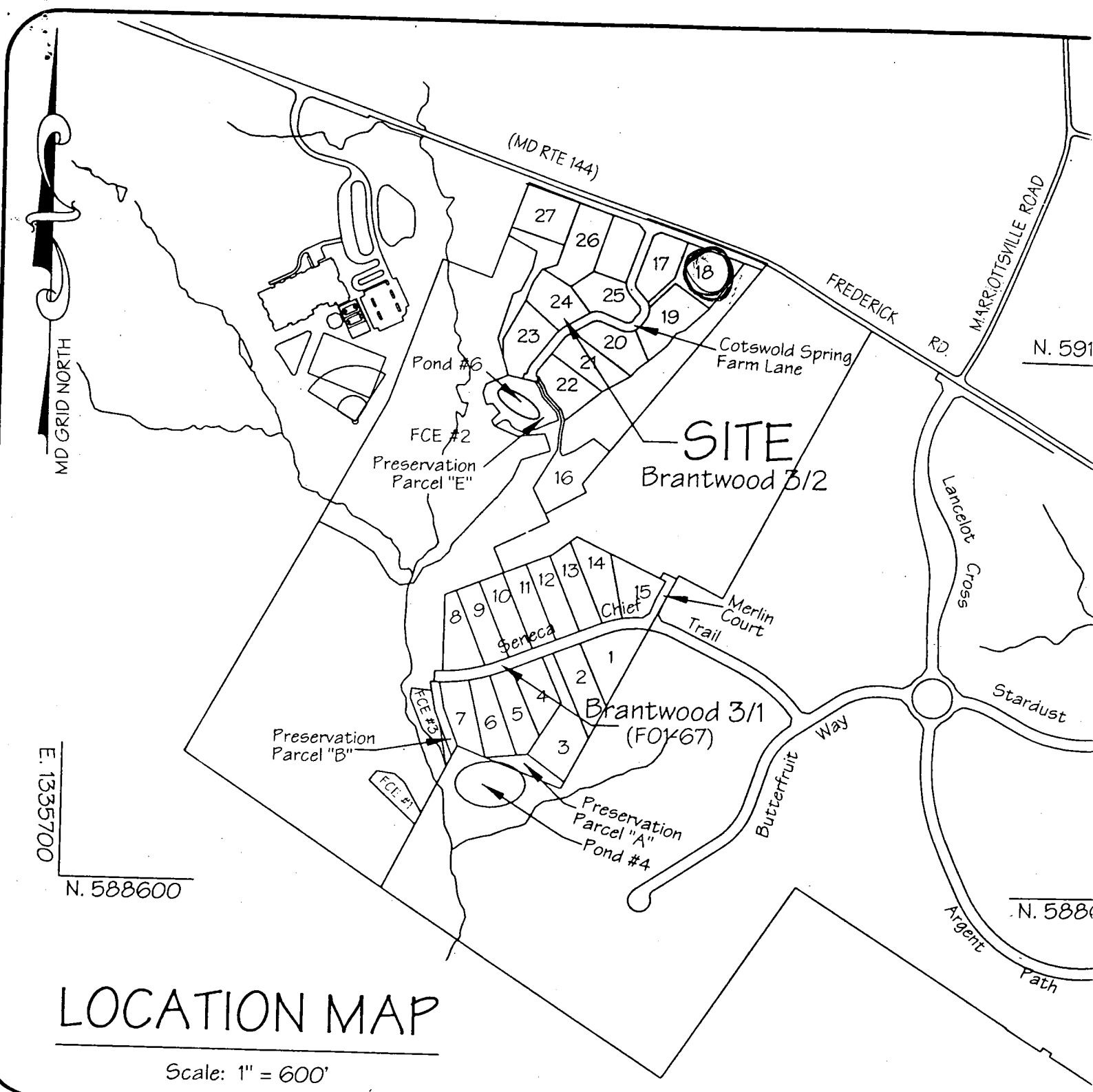
LOT 19
 Plat No. 15119

LEGEND



Restricted
 ROAD (EX. VARIABLE WIDTH R/W | FUTURE 80' PUBLIC R/W)
 MD ROUTE 144 (SCENIC ROAD)
 Vehicular Ingress & Egress
 503
 226
 Restricted
 EX. Entrances To Be Removed
 N 69°31'34" W 243.02'

BOONE PROPERTY
 LOT 3
 Plat No. 3435
 P. 00.03
 5.17.00
 1279.20'
 TEMPORARY ACC



LOCATION MAP

Scale: 1" = 600'

OWNER:
 Parcel 45/205
 Richard B. Talkin, Trustee
 9175 Guilford Road, Suite 301
 Columbia, Md. 21046

DEVELOPER:
 BRANTWOOD, L.L.C.
 8835 P - Columbia 100 Parkway
 Columbia, Md. 21045

The requirements of 3-108, The Real Property Article, Annotated Code of Maryland, 1988 replacement volume, (as supplemented) as far as they relate to the making of this plat and the setting of markers have been complied with.

D. Wayne Weller
 D. Wayne Weller MD No. 10685 Date

8/13/01

Richard B. Talkin TRUSTEE
 Richard B. Talkin, Trustee Date

its
 shown on this
 odplains,
 onervation Area")
 y and all
 herein reserved,
 Developer shall

LEGEND

Iron Pipe/Rebar Foundation
 Stone/Concrete Monument
 Rebar w/ Identification
 Concrete Monument

F:\Land Projects\R2\BRANTWOOD\dwg\Section3

APPROVED: For Private Water and Private Sewerage Systems Howard County Health Department.

Dine Mates
 Howard County Health Officer *J.S. Doe*

11/5/01

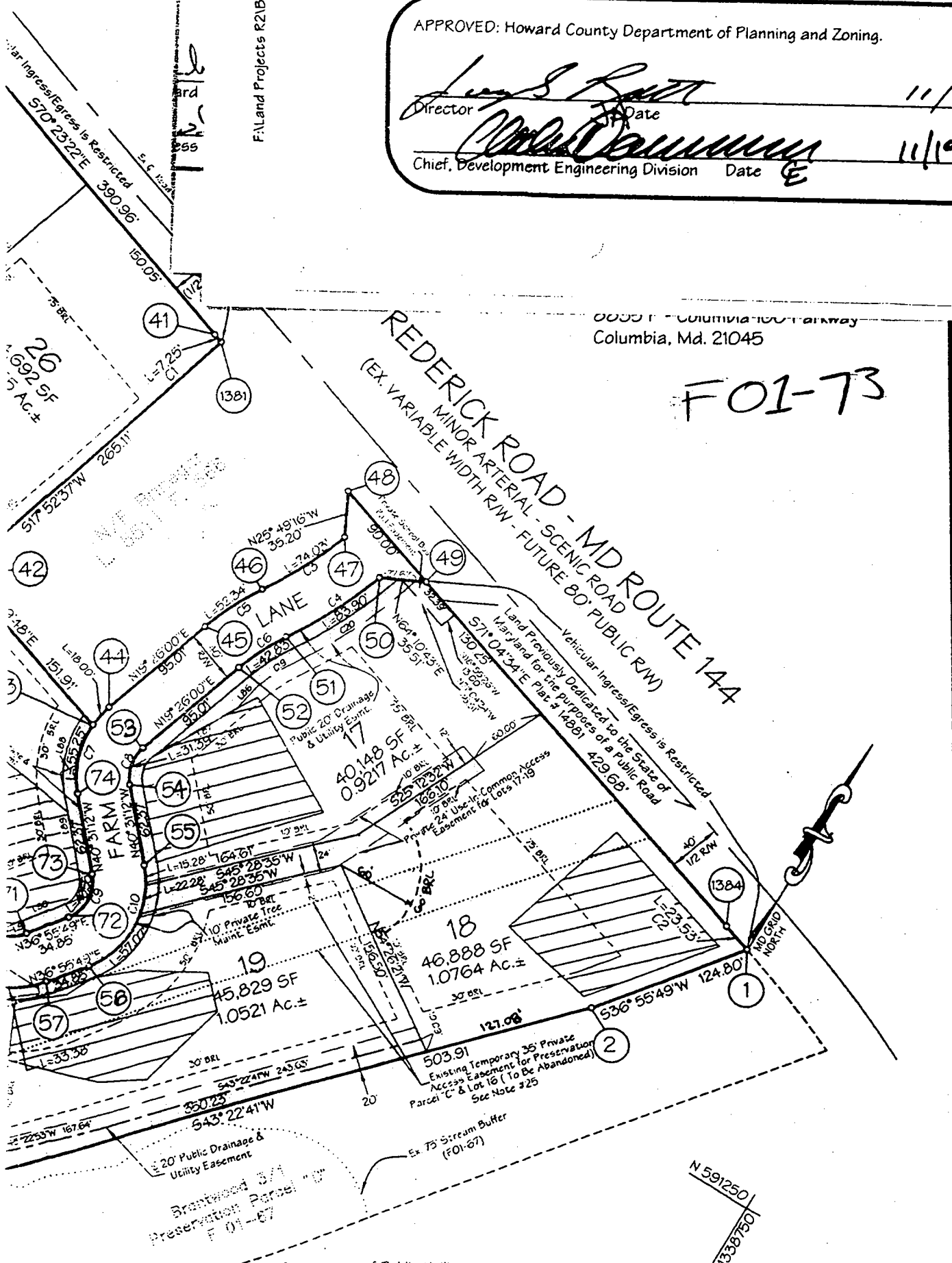
APPROVED: Howard County Department of Planning and Zoning.

James R. Pitt
 Director *J.R. Pitt*

11/30/01

Chris Cummings
 Chief, Development Engineering Division *E*

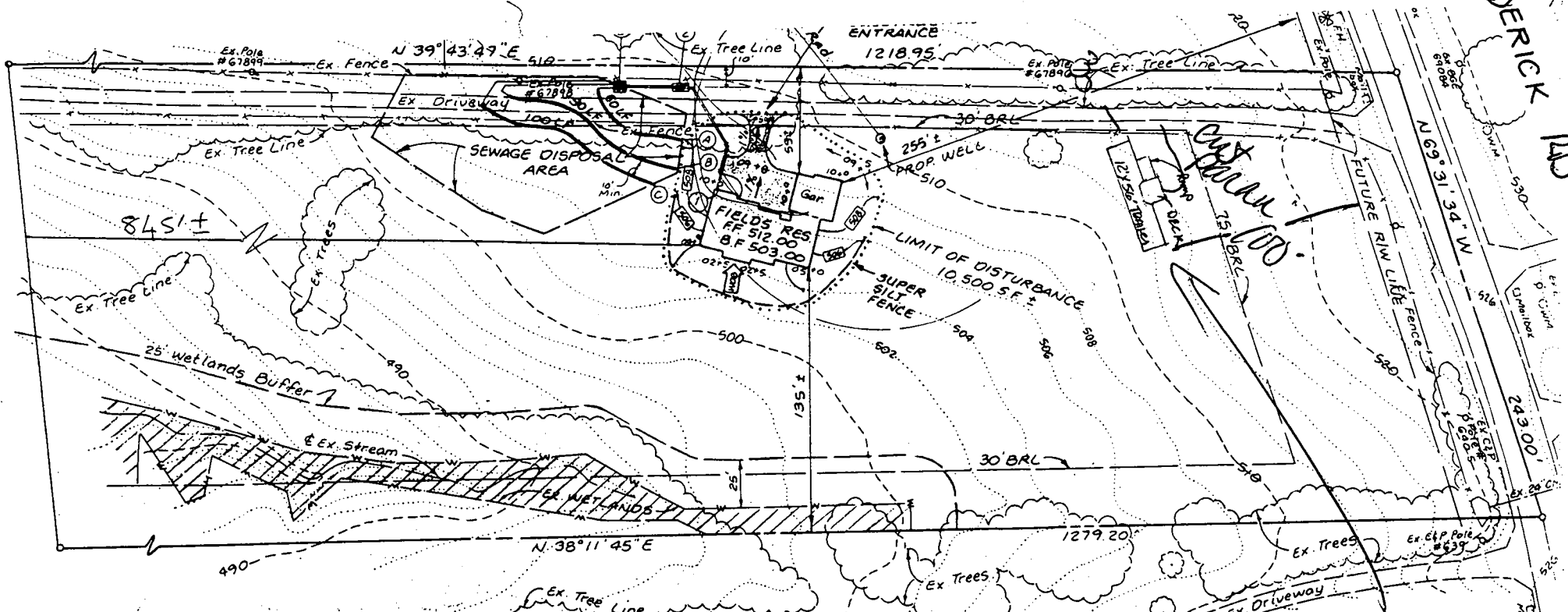
11/19/01



0000 Columbia Parkway
 Columbia, Md. 21045

FOI-73

by
 la:
 be
 ac



FREDERICK RD

SEWAGE SYSTEM DESIGN DATA:

- ① Invert @ foundation wall: 507.10 First Floor Service Only
(Wall Hung with Interior Pump Pit For Basement Service)*
- ② 1250 Gallon Septic Tank (4 Bedrooms)
Provide Manhole To Finished Grade
 - A. Ex. Ground Over Tank : 509.20
 - B. Prop. Grade Over Tank:
 - C. Invert In: 506.50
 - D. Invert Out: 506.20
- ③ Distribution Box: (Provide 3 Outlets Minimum)
 - A. Ex. Ground Over Box: 508.50
 - B. Prop. Grade Over Box: 508.50
 - C. Invert In: 505.00
- 4. Trench Design: 60 LF/Bedrm. X 4 Bedrm. = 240 LF

	(A)	(B)	(C)
Ex. Gr. Over Trench:	508.00	507.00	506.00
Invert Trench:	504.50	503.50	502.50

CUSTOMER
 1250 GALLON SEPTIC TANK
 1250 GALLON SEPTIC TANK
 SALES TRAILER OK
 APR 11/28/07
 TRAILER
 300 LOCATED
 ON LOT 18
 (OLD LOT 2)

DESIG:	
ED:	
DRAW:	
ED:	

Call Amy 410440-8000 WWT/ready 88 ml

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3430 COURT HOUSE DRIVE ELLICOTT CITY, MD 21043 PERMITS (410)313-2455 INSPECTIONS (410)313-1810 AUTOMATED INFORMATION (410)313-3800		HOWARD COUNTY PERMIT APPLICATION		PERMIT NUMBER 300133381	
Building Address <u>13510 Old Frederick Rd</u> <u>Ellicott City, Md 21042</u>			Property Owner's Name <u>Philip H. Dorsey</u> Address <u>13510 Old Frederick Rd</u> City <u>Sylusville</u> State <u>Md</u> Zip Code <u>21784</u>		
Suite/Apt. #: _____ SDP/WP/Petition #: <u>1-3</u> Census Tract <u>110210</u> Subdivision <u>110210</u>			City <u>Sylusville</u> State <u>Md</u> Zip Code <u>21784</u> Home Phone <u>410440-8000</u> Work Phone _____ Applicant's Name & Mailing Address, (if other than stated hereon): <u>8835 COMMUNICADO AVE</u> <u>410730-0510</u> call Amy Phone <u>410-440-8000</u> Fax <u>410(440)-8111</u>		
Section <u>2</u> Area <u>1</u> Lot _____ Tax Map <u>110</u> Parcel <u>1416</u> Grid <u>3A</u>			Contractor Company <u>Barter Nantucket Home</u> Contact Person <u>Amy Wheeler</u> Address <u>13510 Old Frederick Rd</u> City <u>Sylusville</u> State <u>Md</u> Zip Code <u>21784</u> License No. <u>MS1013 3A</u> Phone <u>410440-8000</u> Fax _____		
Existing Use <u>vacant</u> Proposed Use <u>Temp. const trailer</u> Estimated Construction Cost \$ <u>500.00</u> Description of Work <u>12x56 Temp. const trailer</u> <u>W/Deck, 8x8 frame, ramp, &</u>			Occupant or Tenant <u>Barter Nantucket Home</u> Contact Name <u>Amy Wheeler</u> Address <u>13510 Old Frederick Rd</u> City <u>Sylusville</u> State <u>Md</u> Zip Code <u>21784</u> Phone <u>410440-8000</u> Fax <u>410440-8000</u>		
Zoning <u>R2</u> Map Coordinates _____ Lot size _____			Engineer or Architect Company _____ Contact Person _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____		

BUILDING DESCRIPTION - COMMERCIAL		BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics	Utilities	Building Characteristics	Utilities
Height: _____	Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private	SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
No. of stories: _____	Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private	1st floor: _____ 2nd floor: _____ Basement: _____	Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>	Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>	Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Construction type: <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular	Sprinkler system: N/A <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression # of Heads _____	Other Structure: _____ Dimensions: _____ Footings: _____ Roof: _____ <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	Sprinkler system: N/A <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R Other: _____

I, 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 THERE TO; (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 THE PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature Philip H. Dorsey Print Name 11 27-01
 Title/Company _____ Date _____

Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
 ** PLEASE WRITE NEATLY AND LEGIBLY. **
 - FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#
Land Development, DPZ			Front: _____ Rear: _____ Side: _____ Side St: _____ All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	55-1340
State Highways			Is Entrance Permit required? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Filing fee \$ <u>100</u>
Building Official			Historic District? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Permit fee \$ _____
Dev. Engineering, DPZ	<u>11/26/01</u>	<u>Mark Kipper</u>	Lot Coverage for New Town Zone _____ SDP/Red-line approval date _____	Excise tax \$ _____
Health				Sub-total paid \$ _____
Fire Protection				Add'l permit fee \$ _____
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>				TOTAL FEES \$ _____
				Balance due \$ _____
				Check # <u>4196</u>
				Validation # _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>				
ONE STOP SHOP: <input type="checkbox"/>				
				Accepted by <u>CWC</u>

