

LAYOUT 5/9/03 11am INSP 4 _____
 INSP 2 5/13/03 2pm INSP 5 _____
 INSP 3 _____ INSP 6 _____

04-367235

ISSUE DATE: 4/3/2003
 APPROVAL DATE: 5/13/03

**PERMIT
INDEXED**

P 518611
 A 510610-N

**ON-SITE SEWAGE DISPOSAL SYSTEM
 HOWARD COUNTY HEALTH DEPARTMENT
 BUREAU OF ENVIRONMENTAL HEALTH
 3525-H ELLICOTT MILLS DRIVE, ELLICOTT CITY, MD 21043**

South Carroll Backhoe IS PERMITTED TO INSTALL ALTER

ADDRESS: 4410 Salem Bottom Road - 21157 PHONE NUMBER: 410-875-4197

SUBDIVISION: Maple Ridge LOT NUMBER: 14

ADDRESS: 16192 Carrs Mills Road PROPERTY OWNER: NVR, Inc.

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: 210

LINEAR FEET OF TRENCH REQUIRED: 280 HOUSE SERVED BY PUBLIC WATER

TRENCHES:	Trench to be 3.0 feet wide. Inlet 4.0 feet below original grade. Bottom maximum depth 6.0 feet below original grade. Effective area begins at 5.0 feet below original grade. 2.0 feet of stone below distribution pipe.
LOCATION:	Distribution to be located in field at time of layout.
NOTES:	Install 4-70' long trenches with 9' edges to edge separation.

PLANS APPROVED: John Boris DATE: 3/12/2003

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

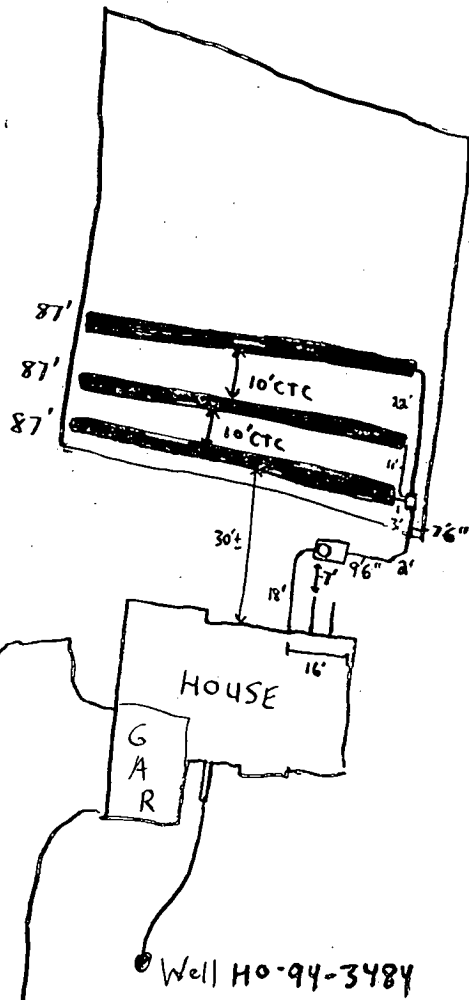
NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

BUILDING PERMIT SIGNED AND RETURNED 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM
 DO NOT LEAVE ANY REQUEST FOR INSPECTION ON VOICEMAIL

5-13-03 800141030-UG PROPANE TANK
 11-13-03 800144800-DECK

AS10610-N

NOT TO SCALE



Courts Mill

ROAD

TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
3'	4'	6"
NUMBER OF TRENCHES		3
TOTAL LENGTH		261'
ABSORPTION AREA		783 ft ²
DISTRIBUTION BOX LEVEL		✓
DISTRIBUTION BOX BAFFLE		✓
DISTRIBUTION BOX PORT		NA

SEPTIC TANK DATA	
SEPTIC TANK 1 LEVEL	✓
CAPACITY	1500 GAL
SEAM LOC	Top
TANK LID DEPTH	2'±
BAFFLES	✓
BAFFLE FILTER	NA
MANHOLE LOC	Front
6" PORT LOC	
WATERTIGHT TEST	NA
SEPTIC TANK 2 LEVEL	NA
CAPACITY	_____ GAL
SEAM LOC	_____
TANK LID DEPTH	_____
BAFFLES	_____
BAFFLE FILTER	_____
MANHOLE LOC	_____
6" PORT LOC	_____
WATERTIGHT TEST	_____

PRE-CONSTRUCTION 5/9/03 - SDA STAKED, INSTALL PER PLAN - (50) ^{SRK}

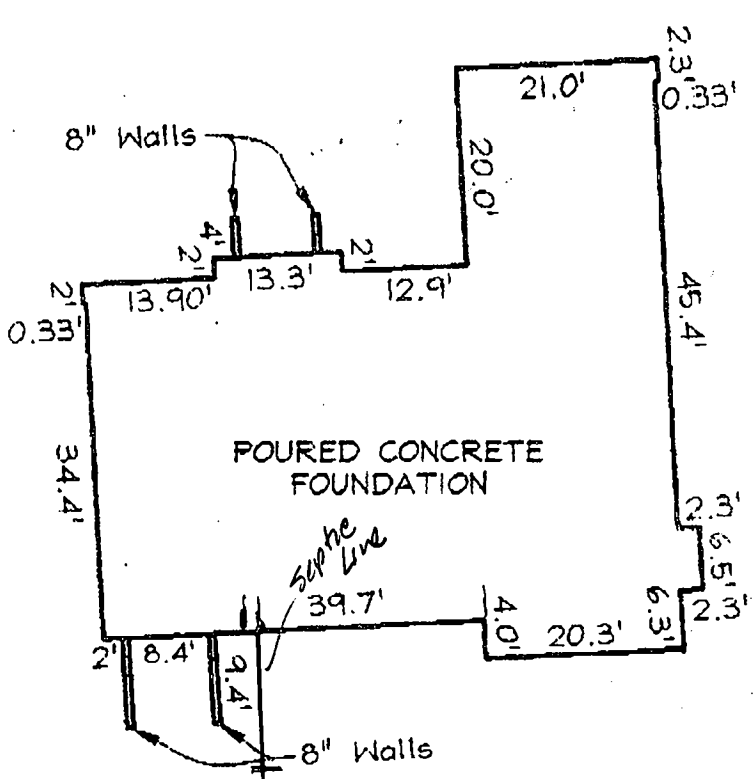
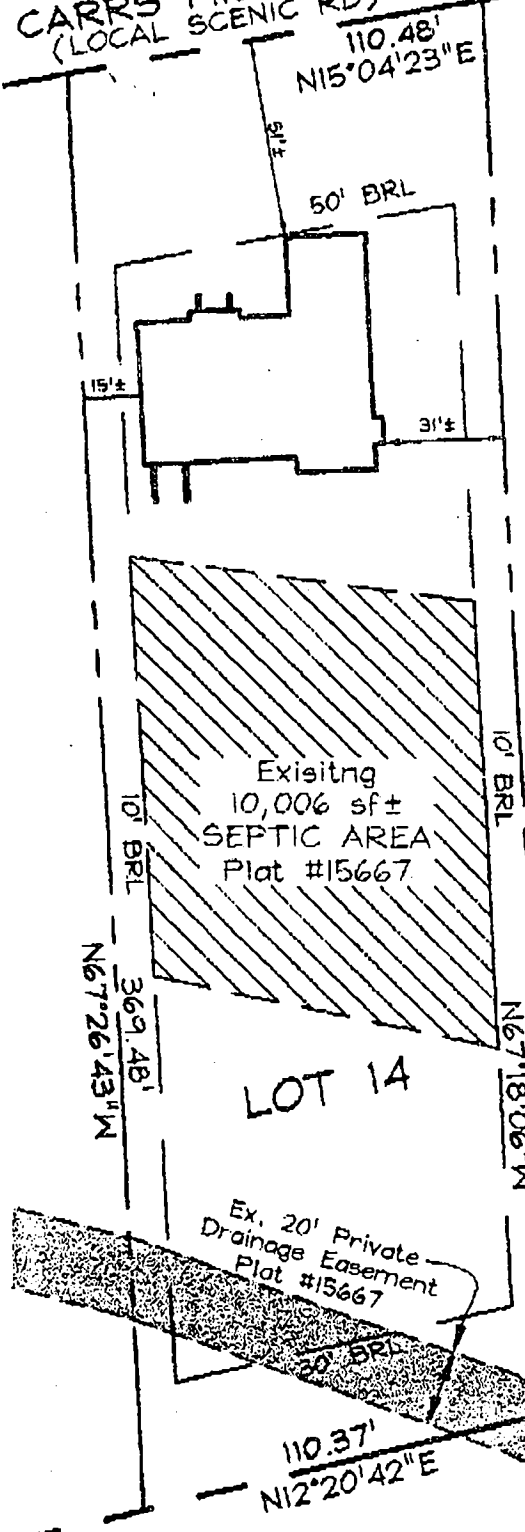
INSTALLATION 5/13/03 - OK TO COVER ALL WORK - (SRK)

RECEIVED AND RETURNED

FINAL INSPECTOR Steven R. Krieg

DATE OF APPROVAL 5/13/03

CARRS MILL RD
(LOCAL SCENIC RD)



FOUNDATION DETAIL
SCALE: 1"=20'

4/13/03
Wall Check
OK (KN)

Maryland State Grid (NAD 83/91)

LEGEND

F/P	• FIREPLACE	O/H	OVERHANG
B/W	• BAY WINDOW	H/P	HEAT PUMP/AIR COND.
D/W	• DRIVEWAY	G/M	GAS METER
CONC	• CONCRETE	E/M	ELECTRIC METER

PLAN VIEW
SCALE: 1"=50'

ADDRESS No. 16192 CARRS MILL ROAD
TOP OF WALL ELEV. = 553.97 FIRST FLOOR ELEV. = N/A
THE LOCATION DRAWING IS OF BENEFIT TO THE CONSUMER ONLY INsofar AS IT IS REQUIRED BY A LENDER OR A TITLE INSURANCE COMPANY OR ITS AGENT IN CONNECTION WITH CONTEMPLATED TRANSFER, FINANCING OR REFINANCING;

FSH Associates
Engineers' Planners Surveyors
8318 Forrest Street Ellicott City, MD 21043
Tel: 410-750-2251 Fax: 410-750-7350
E-mail: FSHAssociates@cs.com

THE LOCATION DRAWING IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATION OF FENCES, GARAGES, BUILDINGS, OR OTHER EXISTING OR FUTURE IMPROVEMENTS;
AND THE LOCATION DRAWING DOES NOT PROVIDE FOR THE ACCURATE IDENTIFICATION OF PROPERTY BOUNDARY LINES, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING OR REFINANCING.

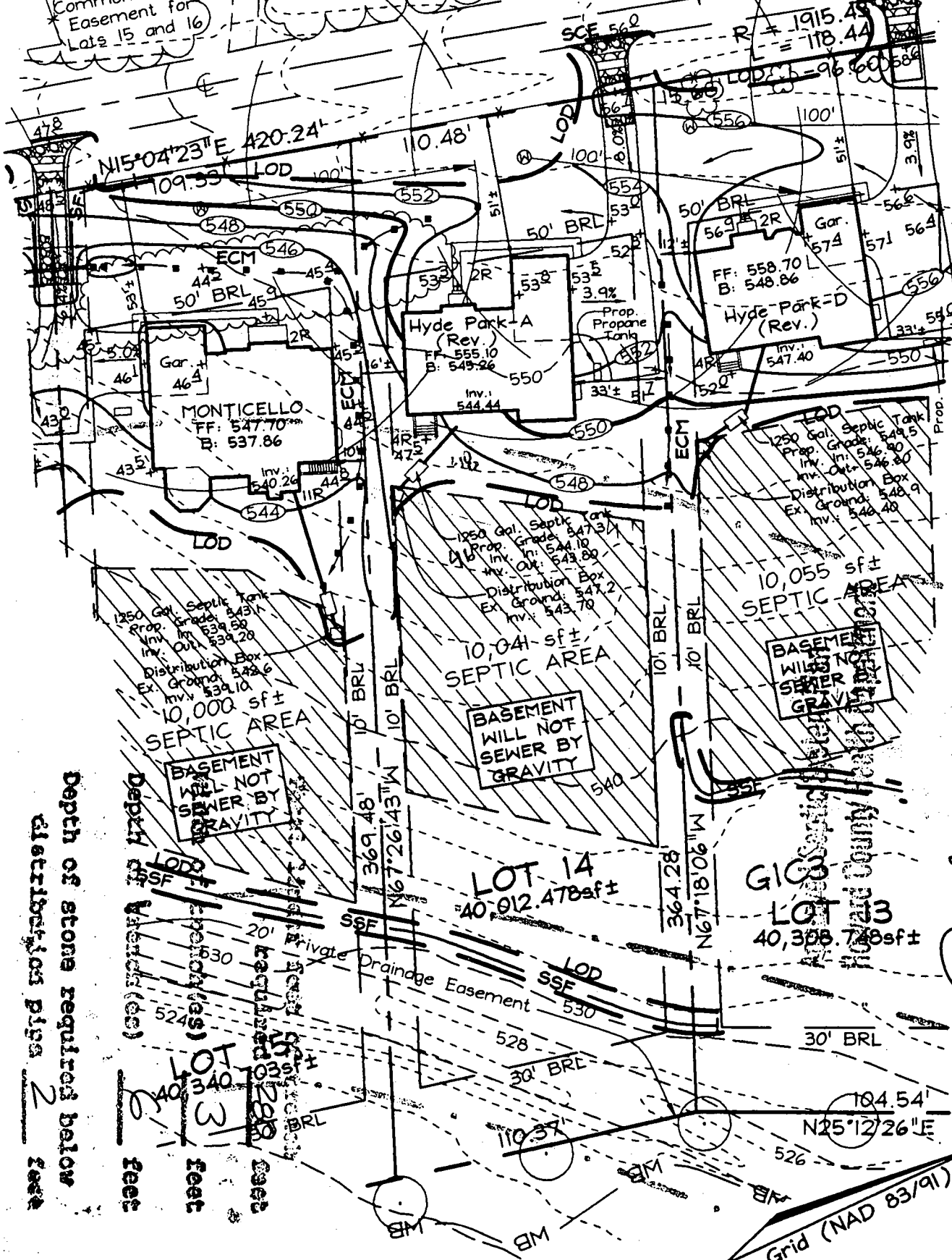
LOCATION DRAWING	
FOUNDATION	Date: 03/25/03
FINAL	Date:
DRAWN BY:	Slim
SCALE:	As Shown
W.O. No.:	3138



WALL CHECK
LOT 14
MAPLE RIDGE
PLAT No. 15667
4TH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND

CARRS MILL ROAD
(LOCAL SCENIC ROAD)

24' Use-in-Common Access Easement for Lots 15 and 16



John T. Ficht
Signature

3/12/03
Date

FSH Associates

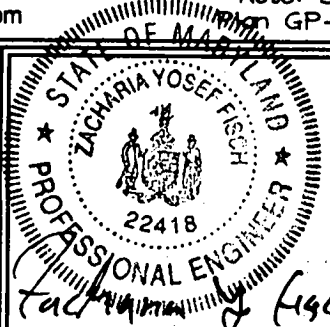
Engineers Planners Surveyors
8318 Forrest Street - Ellicott City, MD 21043
Tel: 410-750-2251 Fax: 410-750-7350
E-mail: FSHAssociates@cs.com

OWNER/DEVELOPER

NV HOMES
2200 Defense Highway, Suite 301
Crofton, Maryland 21114
301.858.0522

Note: See Approved Grading GP-03-16 for Entire Site.

DESIGN BY: PS
DRAWN BY: Slim
CHECKED BY: ZYF
SCALE: 1"=50'
DATE: Feb. 21, 2003
W.O. No.: 3138
SHEET No.: 1 OF 1



LOT RESITE
LOT 14
MAPLE RIDGE

TAX MAP 8 GRID 12 & 20
4TH ELECTION DISTRICT

PARCEL 51 & 378
HOWARD COUNTY, MARYLAND

G0000.269

Building Address 16192 Carrs Mill Rd
Walkersville, MD 21797

Suite/Apt. #: _____ SDP/WP/Petition #: _____

Census Tract 604001 Subdivision _____

Section N/A Area N/A Lot 14

Tax Map _____ Parcel 11 Grid 11

Zoning R012 Map Coordinates 3412 Lot size _____

Property Owner's Name MM LLC

Address 2200 Defense Hwy - Apt 301

City Crofton State MD Zip Code 21114

Home Phone _____ Work Phone 410 472 2193

Applicant's Name & Mailing Address (if other than stated hereon):
Kim Cecil - Permitted by Under License
1547 Gray Fox Rd
Odenton, MD 21113
 Phone 410-994-9000

Existing Use Vacant Lot

Proposed Use Shop

Estimated Construction Cost \$ _____

Description of Work 10K-3FB-1H3-F.P.-Furnish
3 Carbay - 4 BR

Contractor Company NMK LLC

Contact Person Kimberly Cecil

Address 1547 11468 Lewinville Rd

City Melrose State VA Zip Code 21024

License No. _____

Phone 413-994-462 Fax _____

Occupant or Tenant _____

Contact Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Engineer or Architect Company _____

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

BUILDING DESCRIPTION - <u>COMMERCIAL</u>	
Building Characteristics	Utilities
Height: _____	Water Supply: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private
No. of stories: _____	Sewage Disposal: _____ <input type="checkbox"/> Public <input 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"/>
Use group: _____	Heating System: _____ <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <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	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression # of Heads _____
<input type="checkbox"/> State Certified Modular	

BUILDING DESCRIPTION - <u>RESIDENTIAL</u>	
Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply _____ <input type="checkbox"/> Public <input type="checkbox"/> Private
1st floor: _____ Depth <u>52</u> Width <u>60</u>	Sewage Disposal: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private
2nd floor: _____ Depth <u>36</u> Width <u>60</u>	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement _____ Depth <u>42</u> Width <u>60</u>	Heating System: _____ <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/>	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other
Crawl space <input type="checkbox"/> On Grade <input type="checkbox"/>	
No. of Bedrooms <u>7</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 _____	
<input type="checkbox"/> State Certified Modular	
<input type="checkbox"/> 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 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 THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature _____ Print Name _____

Title/Company _____ Date _____

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

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#
Land Development, DPZ			Front: _____	57572
State Highways			Rear: _____	Filing fee \$ <u>00</u>
Building Official			Side: _____	Plan fee \$ _____
City Engineering, DPZ			Side St: _____	Excise tax \$ _____
Health			All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	Add'l per. fee \$ _____
Fire Protection			Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>			Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
CONTINGENCY CONSTRUCTION START <input type="checkbox"/>			Lot Coverage for New Town Zone _____	Balance due \$ <u>50</u>
ONE STOP SHOP: <input type="checkbox"/>			SDP/Red-line approval date _____	Check # <u>2108151</u>
				Valuation \$ _____
				Accepted by _____

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 26.04.03 (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 #: 410-731-4655
Address: 6301 Barnett Ave.
Sykesville, 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): 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: NV Homes Telephone #: 410-721-9703
Subdivision: Maple Ridge Lot #: 14 Well Tag #: HO-94-3989
Site Address: 16192 Capt. M. D. Rd
Woodhull, MD 21797

Submersible Pump Data Pitless Adapter Well Cap and Electric Conduit
Make: Sta-Rite Make: Campbell Two piece watertight cap:
Model #: 7PYD02HL Model #: PT 800 Screened, vented well cap:
Pump Capacity 7 GPM Depth: 42" (36" min) Cap secured to casing:
Well Yield: 15 GPM NSF approved: Conduit min 1 1/2" B.G.:
Depth of well encountered at time of pump installation: 304 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: Poly PVC sleeved to undisturbed soil at wall penetration:
PSI: 160 (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.

Signature of company representative responsible for installation: Robert L. Feezer Date: _____

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

Date Insp. Requested: 5/14/03 Date Insp. Approved: 5/14/03 **SRK**
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

C-1 14233

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

COUNTY NUMBER AS10010

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

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED 9/6/02

Depth of Well 300 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-3484

OWNER LANDSCAPE DEVELOPMENT STREET OR RFD CHARRS MILL ROAD TOWN LISBON SUBDIVISION MAPLE RIDGE SECTION LOT 14

WELL LOG

Not required for driven wells

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

Table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Rows include Topsoil, red rocky clay, Brown shale, reddish brown shale, Brown slate, Blueish/gay slate.

GROUTING RECORD

WELL HAS BEEN GROUTED (Y) (N) TYPE OF GROUTING MATERIAL (C) (M) (B) (C) NO. OF BAGS 17 NO. OF POUNDS 14700

CASING RECORD (S) (T) (C) (O) (P) (L) (O) (T) MAIN CASING TYPE (S) Nominal diameter 6 Total depth 62

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

SCREEN RECORD (S) (T) (B) (R) (H) (O) (P) (L) (O) (T) screen type or open hole (S) (T) (B) (R) (H) (O) (P) (L) (O) (T)

DEPTH (nearest ft.) 1 140 60 300

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED (Y) (N)

CIRCLE APPROPRIATE LETTER A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION"

DRILLERS LIC. NO. 1 M W D 040 George F. Eastenbury

LIC. NO. J W D 227

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

Table with columns: A, C, H, S, R, E, N. Rows: 1, 2, 3. Includes slot size and diameter of screen.

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 LOG INDICATOR OTHER DATA

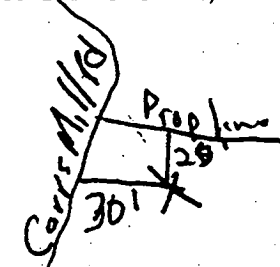
PUMPING TEST

HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 15. METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 57 ft. WHEN PUMPING 109 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 35 PUMP HORSE POWER 37 41 PUMP COLUMN LENGTH (nearest ft.) 43 47 CASING HEIGHT (circle appropriate box and enter casing height) (+) above (2) below LAND SURFACE (2) (nearest foot)

LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)



9-6-03 review OK MR 9/27/02

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 94-3484
Location of property (road) CARRS MILL ROAD
Subdivision MAPLE RIDGE Lot 14 Block _____ Plat _____ Sec. _____
Well Driller L. FRANKLIN EASTDAY INC Owner _____

Depth of well 300 - 8
Distance of measuring point (M.P.) above ground 2 FT
Static water level (S.W.L.) below M.P. 57 FT

I. High rate pumping -- reservoir drawdown

Time pump started 12:00 PM Pumping rate 15 GPM
Total time _____ to reach pumping water level 57 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) Pump Rate	CALCULATED FLOW (gallons per minute)
12:00	57 FT	4 sec	290	15 GPM
12:15	95 FT	4 sec	290 FT	15 GPM
12:30	104 FT	4 sec	290 FT	15 GPM
12:45	106 FT	4 sec	290 FT	15 GPM
1:00	108 FT	4 sec	290 FT	15 GPM
1:15	108 FT	4 sec	290 FT	15 GPM
1:30	108 FT	4 sec	290 FT	15 GPM
1:45	108 FT	4 sec	290 FT	15 GPM
2:00	108 FT	4 sec	290 FT	15 GPM
2:15	108 FT	4 sec	290 FT	15 GPM
2:30	109 FT	4 sec	290 FT	15 GPM
2:45	109 FT	4 sec	290 FT	15 GPM
3:00	109 FT	4 sec	290 FT	15 GPM

TESTED BY Dick's

9/6/02 NO INSP

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 94-3484
 Location of property (road) CARRS MILL ROAD
 Subdivision MAPLE RIDGE Lot 14 Block _____ Plat _____ Sec. _____
 Well Driller L. FRANKUN EASTMAN, INC Owner _____

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

I. High rate pumping -- reservoir drawdown

Time pump started _____ Pumping rate _____
 Total time _____ to reach pumping water level _____ 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)

B 1 2175

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type

STATE PERMIT NUMBER

HO-94-3484 fill in this form completely

Date Received (APA)

07-16-02

OWNER INFORMATION

9120

Landscape Development 16307 Carrs Mill Road Woodbine, Md 21797

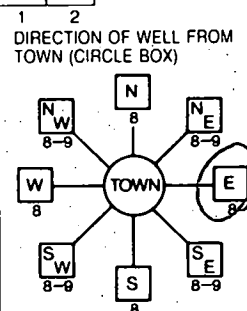
LOCATION OF WELL

Howard CC# Maple Ridge SECTION 44 46 LOT 48 50 Lisbon NEAREST TOWN MILES FROM TOWN

DRILLER INFORMATION

George F. Easterday M VD 040 L. Franklin Easterday, Inc. 9255 Brown Church Rd., MT. Airy, Md. 21771

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Carrs Mill Road NEAR WHAT ROAD ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) DISTANCE FROM ROAD 35 Ft TAX MAP: BLK: PARCEL:

WELL INFORMATION

APPROX. PUMPING RATE 5 (GAL. PER MIN) AVERAGE DAILY QUANTITY NEEDED 500 (GAL. PER DAY)

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

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

HOWARD AS10610 COUNTY NAME COUNTY NO. STATE SIGNATURE DATE ISSUED 08-15-02 Mark E. Pallen 08/15/03 NORTH GRID 543 000 EAST GRID 785 000

APPROXIMATE DEPTH OF WELL 300 FEET

APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary) CABLE REVerse-ROTary Drive-POINT other

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

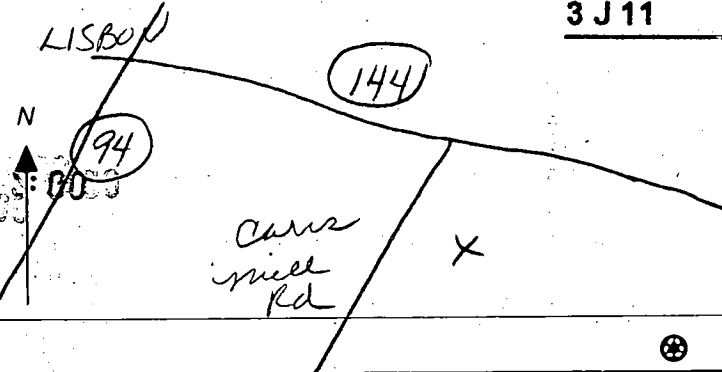
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

- SOURCES OF DRILLING WATER 1. wells 2. 3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E 785 543 N 000 000

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

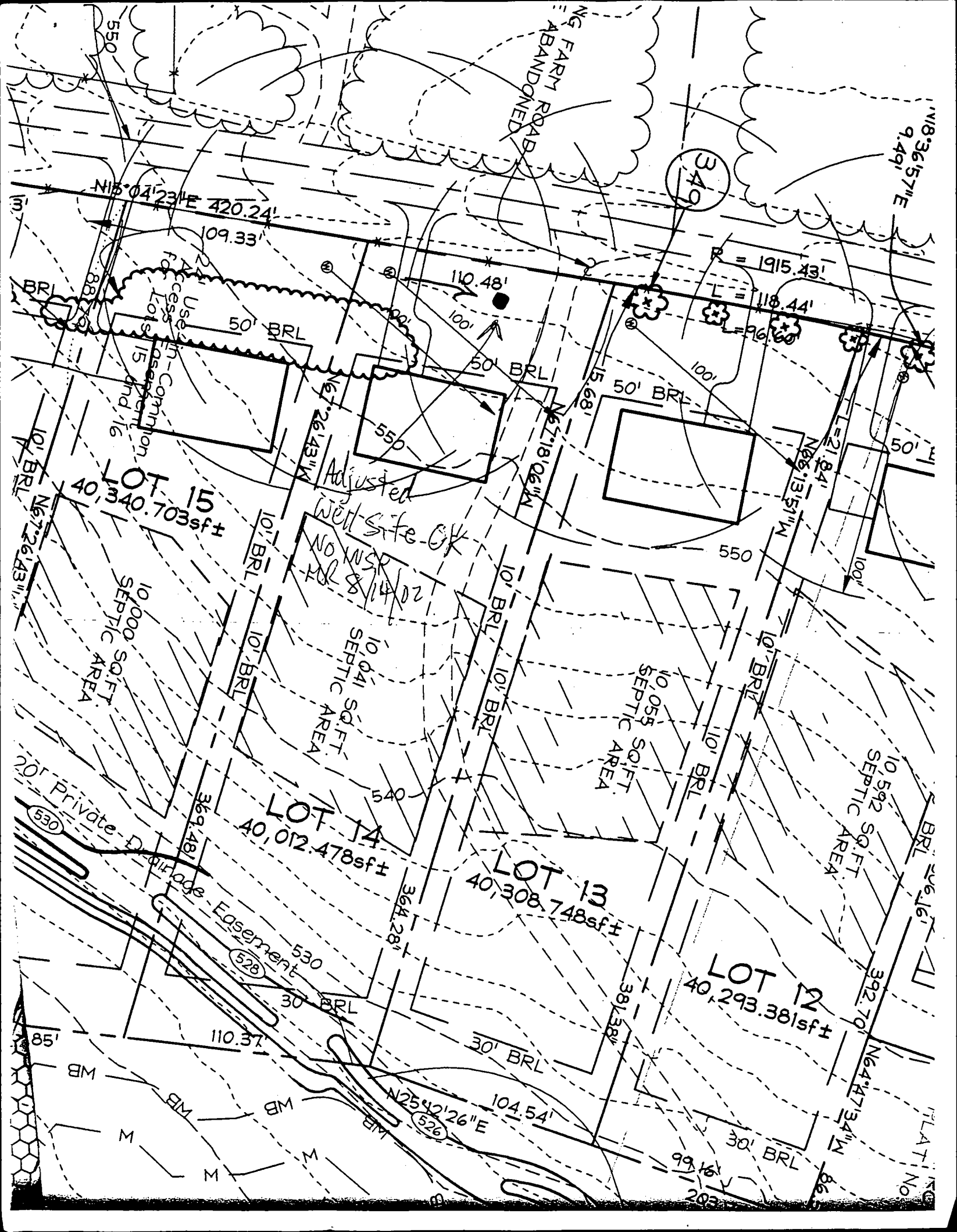


Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROX. PERMIT NUMBER HO-94-3484 PERMIT No. 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED



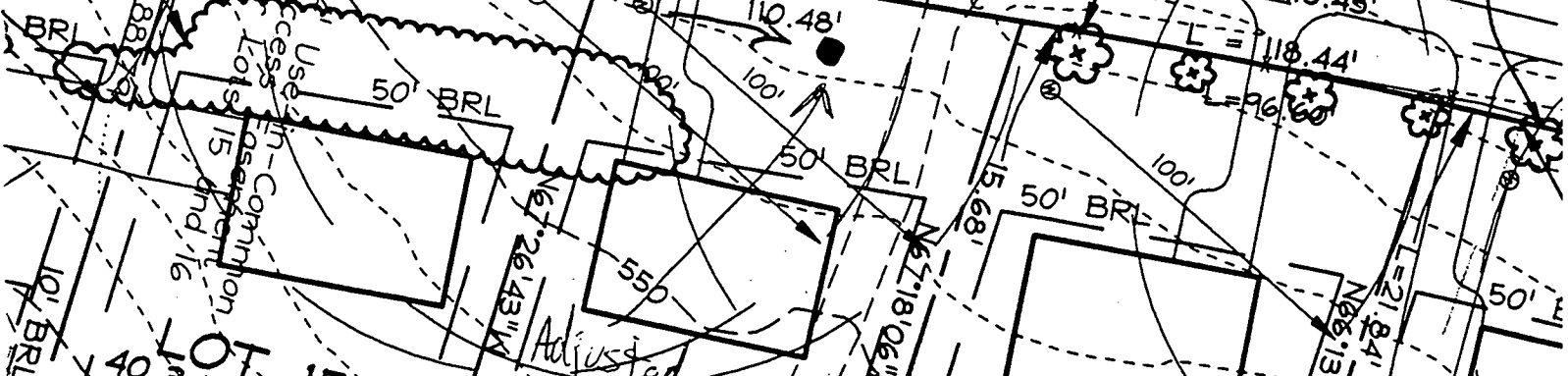
NG FARM ROAD
ABANDONED

N18°36'57\"/>

349

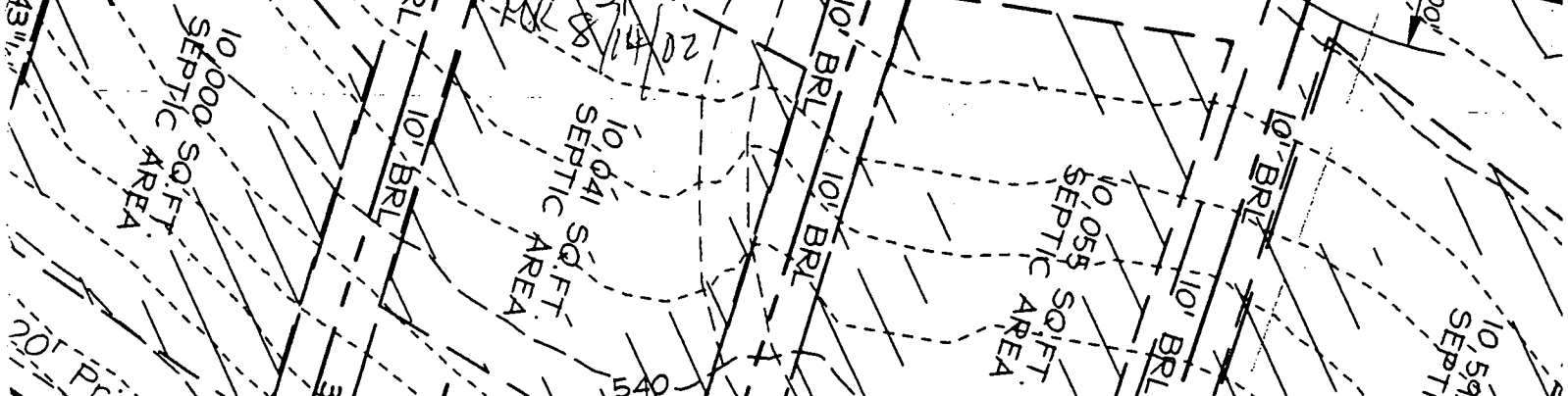
N15°04'23\"/>

R = 1915.43'
L = 118.44'
L = 96.60'



LOT 15
40,340.703sf±

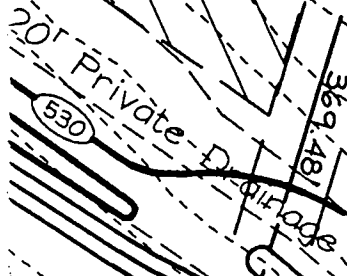
Adjusted
Well site OK



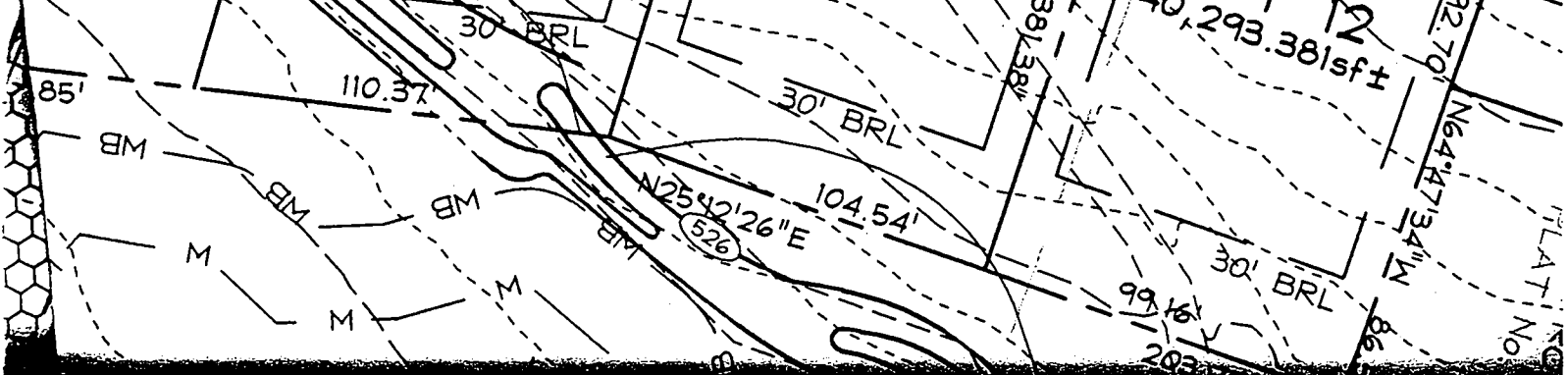
LOT 14
40,012.478sf±

LOT 13
40,308.748sf±

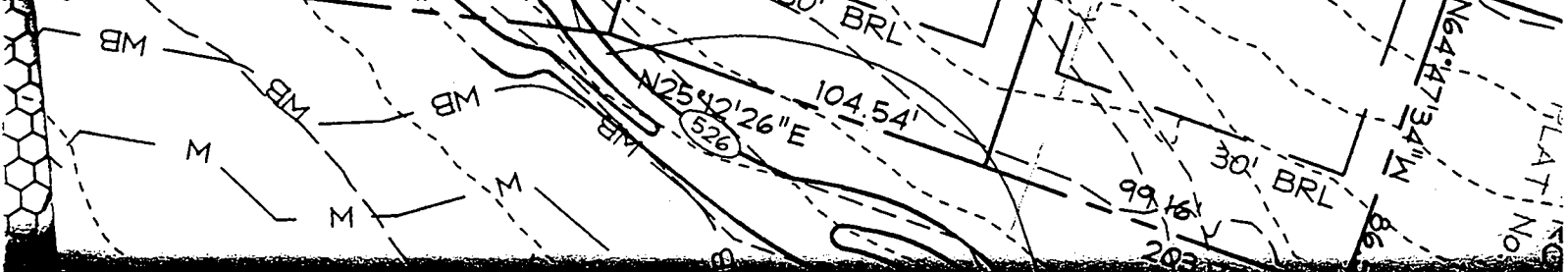
LOT 12
40,293.381sf±



Private Drainage Easement



N25°42'26\"/>



MB
MB
MB
MB
MB

APPLICATION

PERCOLATION TESTING

A _____

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2840

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 James Ward

ADDRESS 16307 Carrs Mill Road PHONE (410) 442-2033
WOODBINE MD. 21797

AGENT OR PROSPECTIVE BUYER for Zacharia Fisch FISHER COLLINS & CARTER

ADDRESS 10272 Baltimore national pike PHONE (410) 461-2855
ELLICOTT CITY MD. 21042

PROPERTY LOCATION:

SUBDIVISION Ward prop. LOT NO. 3/ 13, 14

ROAD AND DESCRIPTION Carrs Mill Road.

TAX MAP 8 PARCEL # 51 338

SIZE OF LOT 1 AC. ± TYPE BLDG. S.F.D.
(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND 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.

Zacharia Y. Fisch (agent)
(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
2525

0'
dark
orange
brown
SiClM

5.5'
orange
tan
SiLm
very
dry

11.5'
2524

lgt or
SiClM



3.0'
dk red
SiClM
25%
shale

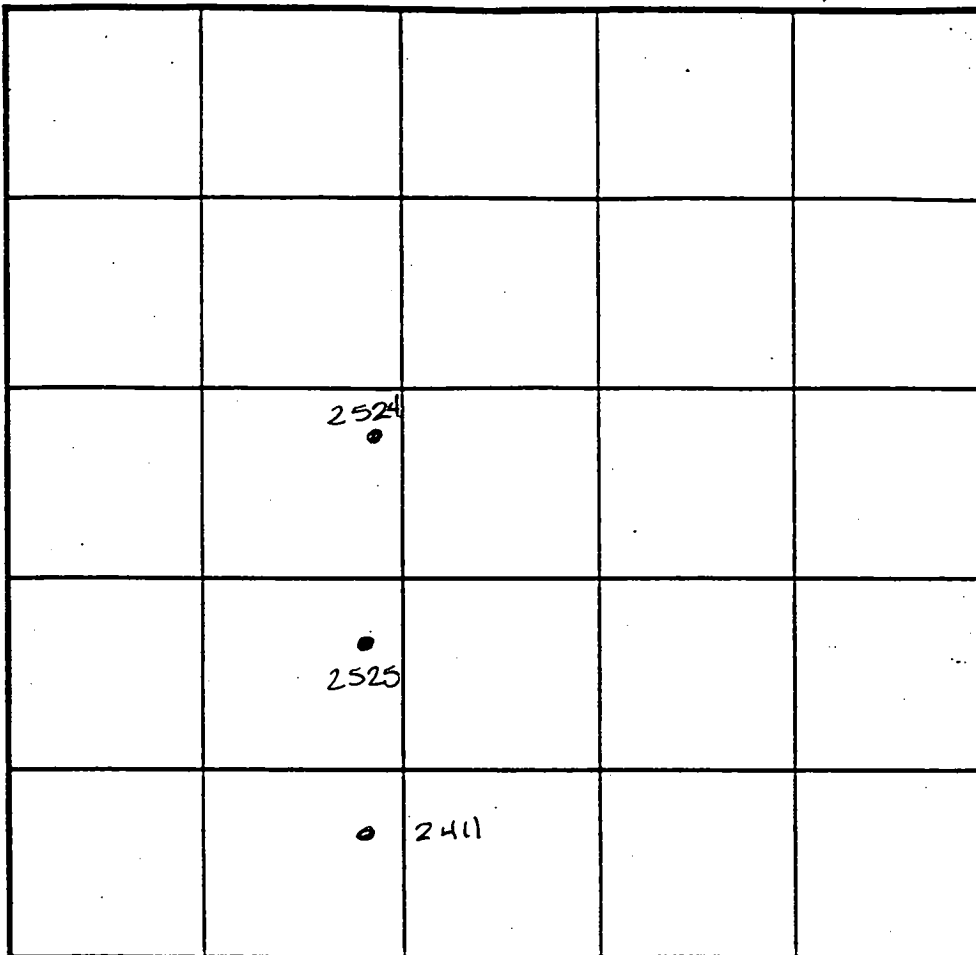
6.5'
dark brn
mottled
SiLm
probable
H2O

9.5'
2411

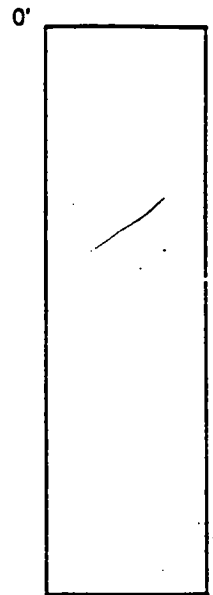
dark
red
SiClM

5.0'
red
brown
SiLm
30%
Tx

11.5'



SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
9-17-98	2525	6.0 / 11.5	12:55	1:00	1:00	1:07	7min
		8.5 / 11.5	12:55	12:58	12:58	1:03	5min
	2524	Evidence of	H2O @		6.5' - see prof		wet
	2411	Visual	to 11.5' - see		profile		OK

REMARKS Holes not tested as staked

TYPE OF SOIL _____

TESTED BY _____ ALSO PRESENT _____

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

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

APPLICATION

PERCOLATION TESTING

A _____

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2840

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 James Ward

ADDRESS 16307 Carrs Mill Road PHONE (410) 442-2033
WOODBIKE MD. 21797

AGENT OR PROSPECTIVE BUYER FISHER COLLINS & CARTER
c/o Zacharia Fisch

ADDRESS 10272 Baltimore National Pike PHONE (410) 461-2855
ELLICOTT CITY MD. 21042

PROPERTY LOCATION:

SUBDIVISION Ward prop. LOT NO. 3/14, 15, 16

ROAD AND DESCRIPTION Carrs Mill Road.

TAX MAP 8 PARCEL # 51 3378

SIZE OF LOT 1 AC. ± TYPE BLDG. S.F.D.
(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND 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.

Zacharia Y. Fisch (agent)
(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

904

dark red
silm

pink
salm

20-30%
Rx



903

like
904

916

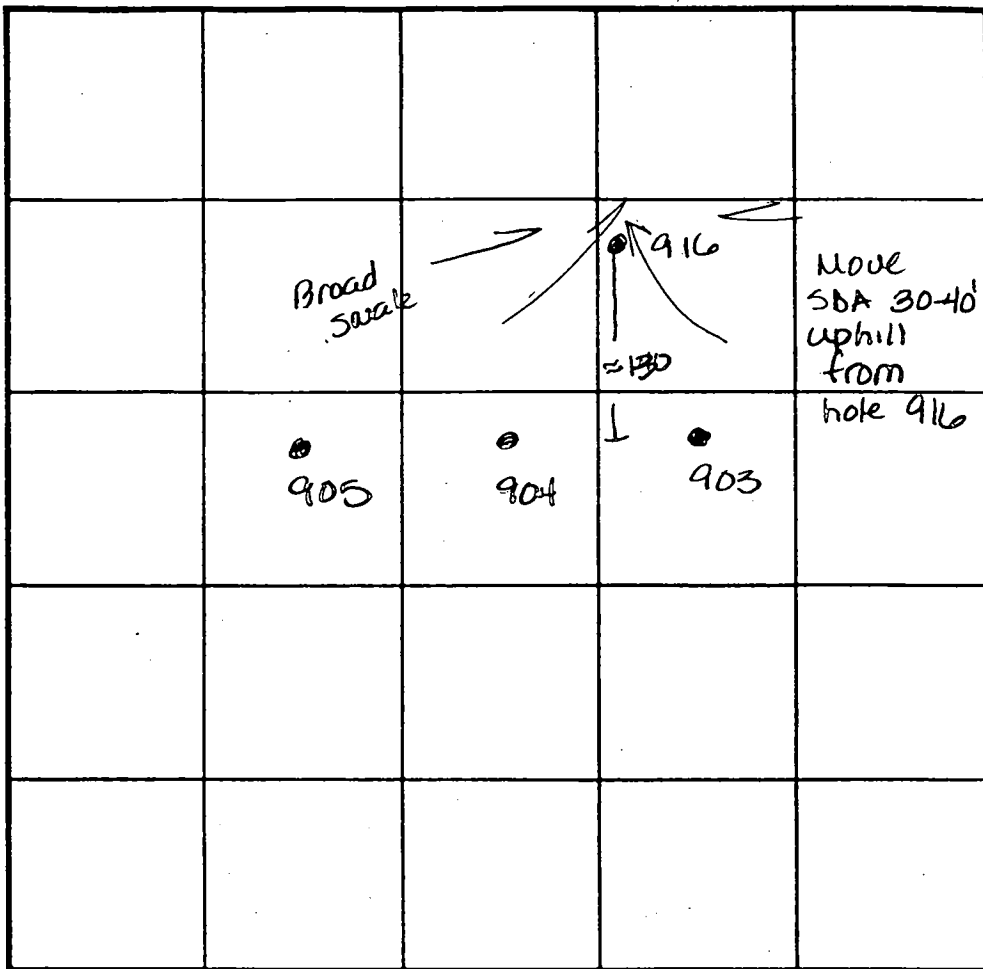
dark
brown
cilm

orange
brn
salm

Saprotic
salm
100% Rx
very
decayed

no H₂O indications

SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1' DROP		TIME
			START	STOP	START	STOP	
9-11-00	904	Visual	to 12.0	- see	profile	—	OK
	903	Visual	to 13.0	- see	profile	—	OK
	916	Visual	to 12.0	- see	profile	—	OK

REMARKS _____

TYPE OF SOIL _____

TESTED BY A McMillen D Kerr A Welby ALSO PRESENT 2 Fish

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SO FT/BEDROOM _____

COUNTY #

SOIL PROFILE
2408

dark orange red clay to 6.0

mottled silty water @ 3.5

2526

dark orange red silty

light orange brown silty

2527 2529

No distinct clay layer light pink silty <5% Rx

SOIL PROFILE
2528

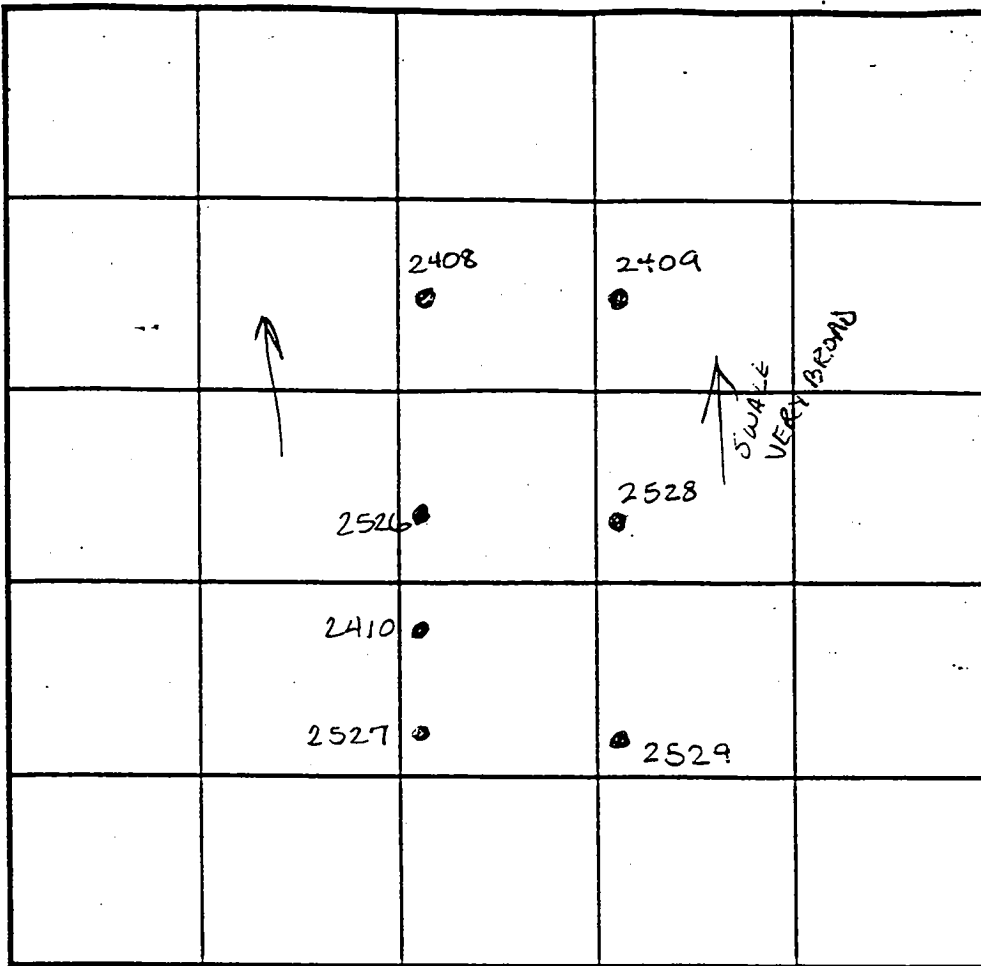
light tan silty

light or pink silty

possible high to dull brown silty no mottling

2409

like 2408 but evidence of H₂O @ 6.5' visual to 11.0



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2-17-98	2408	Visual	to 8.5	-insufficient depth to H ₂ O			F
	2409	Visual	to 10.0	-hold for wet			OK
	2401	Visual	to 11.5	-see profile			OK
	2527	Visual	to 12.0	-see profile			OK
	2529	5.0 V12.0	1:25	1:29	1:29	1:34	5min
		8.0 V12.0	1:23	1:27	1:27	1:33	6min
	2528	5.5 V11.0	1:27	1:28	1:28	1:30	2min
	2526	4.5 V10.0	1:17	1:20	1:20	1:25	5min

REMARKS wet season no 2523

TYPE OF SOIL _____

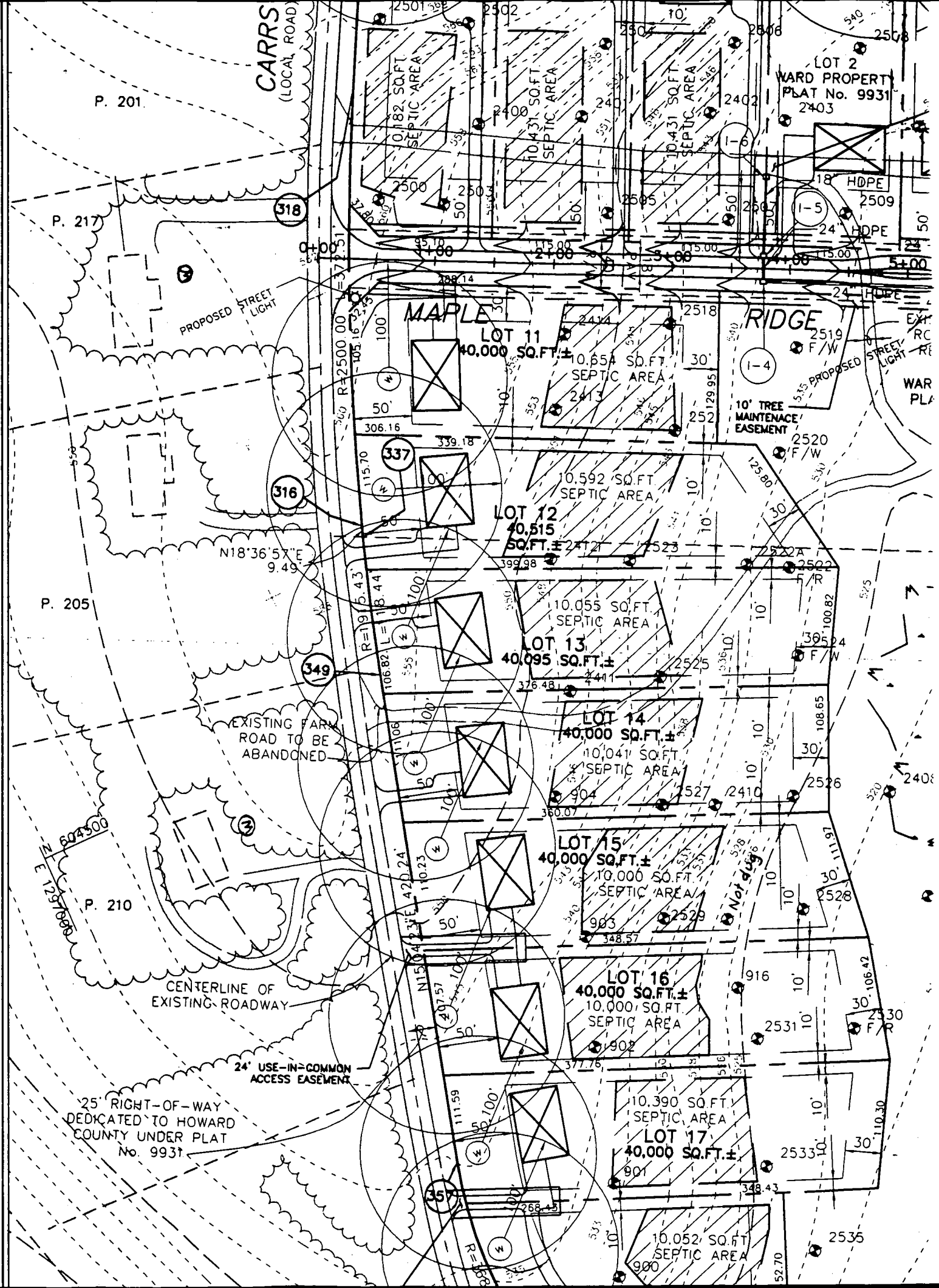
TESTED BY _____ ALSO PRESENT _____

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

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

2.0

APPROVED PERC CERT 6/20/01



6/20/01

P.01.005

P. 201

P. 217

P. 205

P. 210

CARR (LOCAL RD.)

LOT 2
WARD PROPERTY
PLAT No. 9931
2403

PROP. CONC.
PEDESTRIAN
STANDING PAD

PROPOSED STREET LIGHT

RIDGE

N18°36'57"E
9.49'

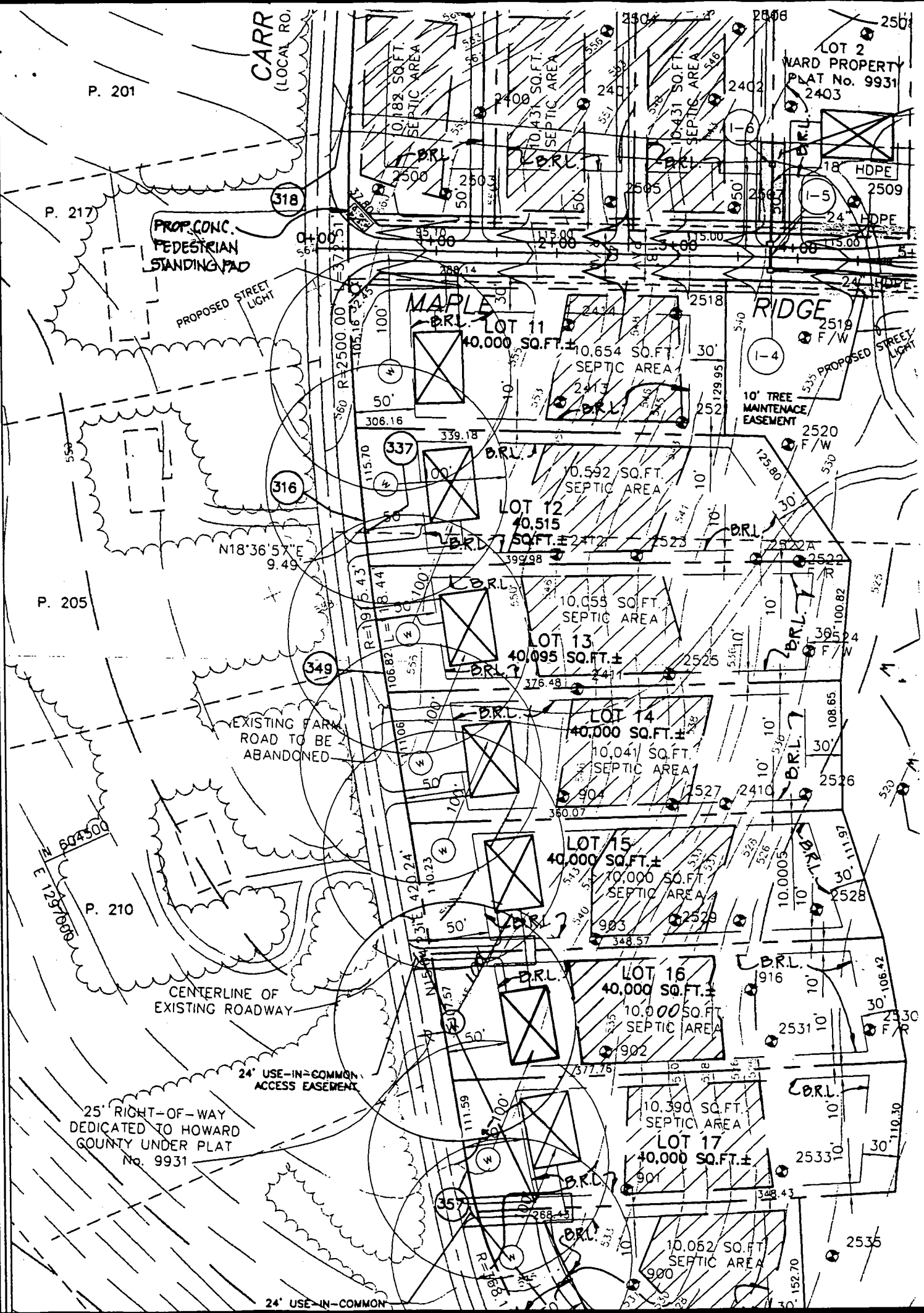
EXISTING FARM
ROAD TO BE
ABANDONED

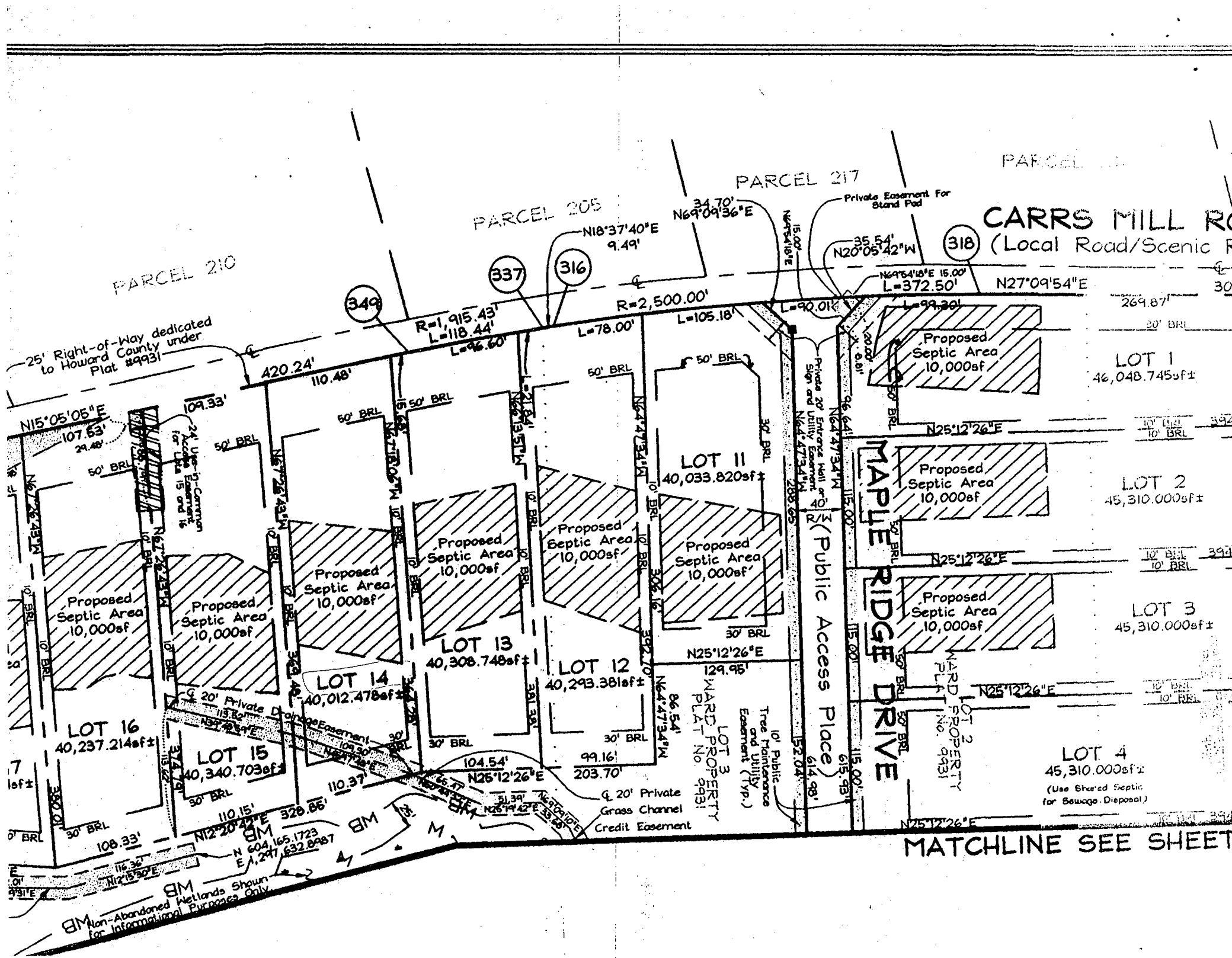
CENTERLINE OF
EXISTING ROADWAY

24' USE-IN-COMMON
ACCESS EASEMENT

25' RIGHT-OF-WAY
DEDICATED TO HOWARD
COUNTY UNDER PLAT
No. 9931

24' USE-IN-COMMON





PARCEL 210

PARCEL 205

PARCEL 217

PARCEL 218

CARRS MILL RD
(Local Road/Scenic R

25' Right-of-Way dedicated to Howard County under Plat 89931

N15°05'05"E
107.63'
21.48'

109.33'
50' BRL

420.24'
110.48'

R=1,915.43'
L=118.44'

L=78.00'

L=105.18'

L=90.01'

N69°54'10"E 15.00'
L=372.50'

N27°09'54"E

269.87'

LOT I
46,048.745sf±

LOT 2
45,310.000sf±

LOT 3
45,310.000sf±

LOT 4
45,310.000sf±

(Use Shared Septic for Sewage Disposal)

MAPLE RIDGE DRIVE

Public Access Place

LOT II
40,033.820sf±

Proposed Septic Area
10,000sf

Proposed Septic Area
10,000sf

Proposed Septic Area
10,000sf

LOT 13
40,308.748sf±

LOT 12
40,293.381sf±

LOT 16
40,237.214sf±

LOT 15
40,340.703sf±

LOT 14
40,012.478sf±

LOT 3
WARD PROPERTY
PLAT No. 9931

116.34'
N12°15'30"E

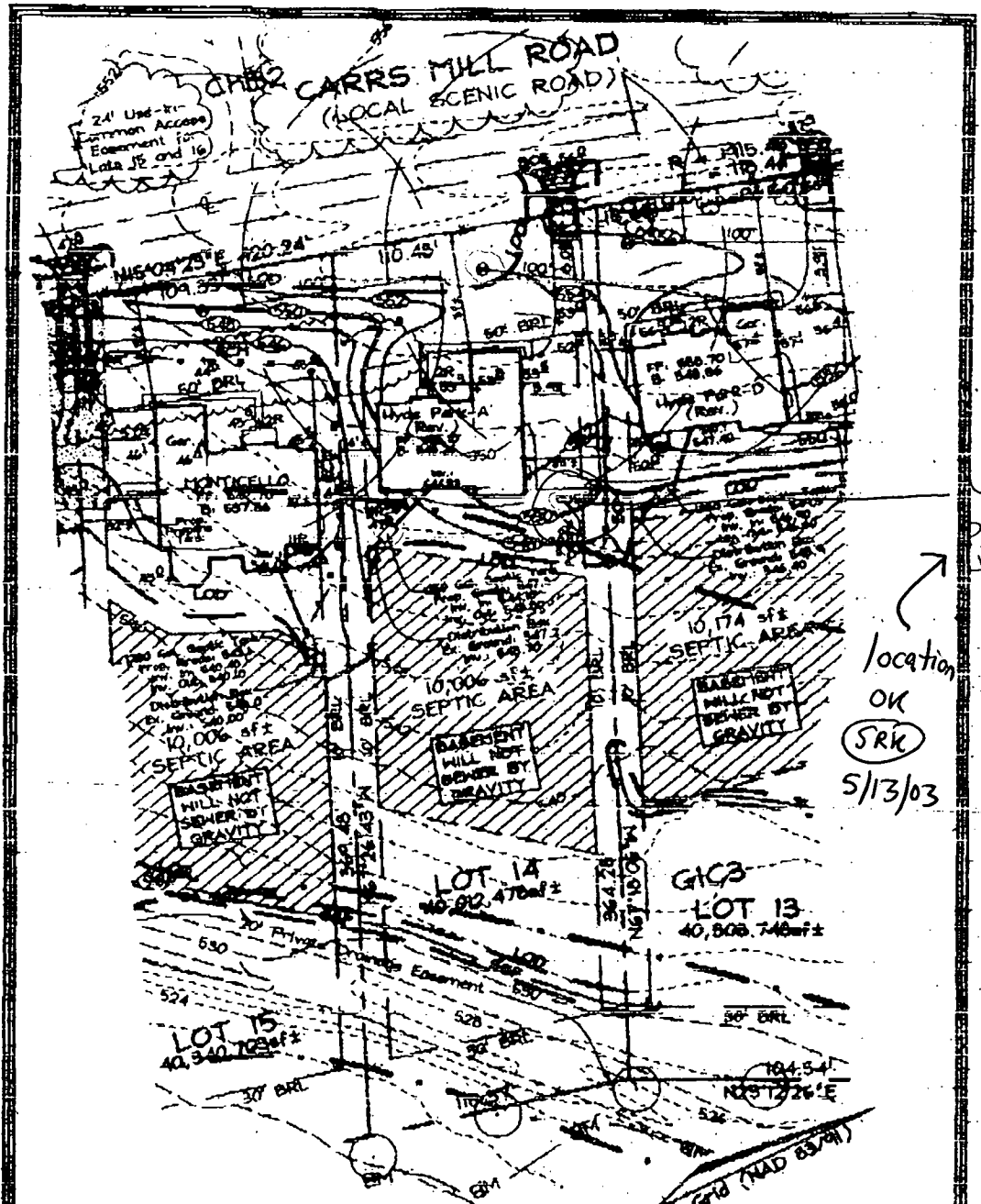
N 604,165.1723
E 1,247,632.8987

Non-Abandoned Wetlands Shown for Informational Purposes Only

MATCHLINE SEE SHEET

B0014/030

45.26
 - 33
 44.93
 44.53
 45.26
 - .66
 44.60
 44.53
 JJ



UG
 pipe
 tank

Location
 OK
 SRK
 5/13/03

FSH Associates

Engineers Planners Surveyors
 8318 Fenwick Street, Ellicott City, MD 21043
 Tel: 410-750-2261 Fax: 410-750-7350
 E-mail: FSHAssociates@aol.com

OWNER/DEVELOPER

NV HOMES
 2200 Defense Highway, Suite 301
 Crofton, Maryland 21114
 301.660.0522

Note: See Approved Grading Plan GP-05-16 for Entire Site.

DESIGN BY: PS
 DRAWN BY: Slrn
 CHECKED BY: ZTP
 SCALE: 1"=50'
 DATE: Mar 14, 2003
 W.C. No.: 3138
 SHEET No.: 1 OF 1

LOT RESITE
LOT 14
MAPLE RIDGE

TAX MAP 5 GRID 12 & 20
 4TH ELECTION DISTRICT

PARCEL 51 & 578
 HOWARD COUNTY, MARYLAND

M:\Mapa Ridge 3138\dwg\resite\lot 14\resite22105.dwg Revised on 03-19-03 1:30 PM 148 dwg 3/19/2003 4:19:30 PM 03-16

FILE INQUIRY FORM

15/
1/10/03

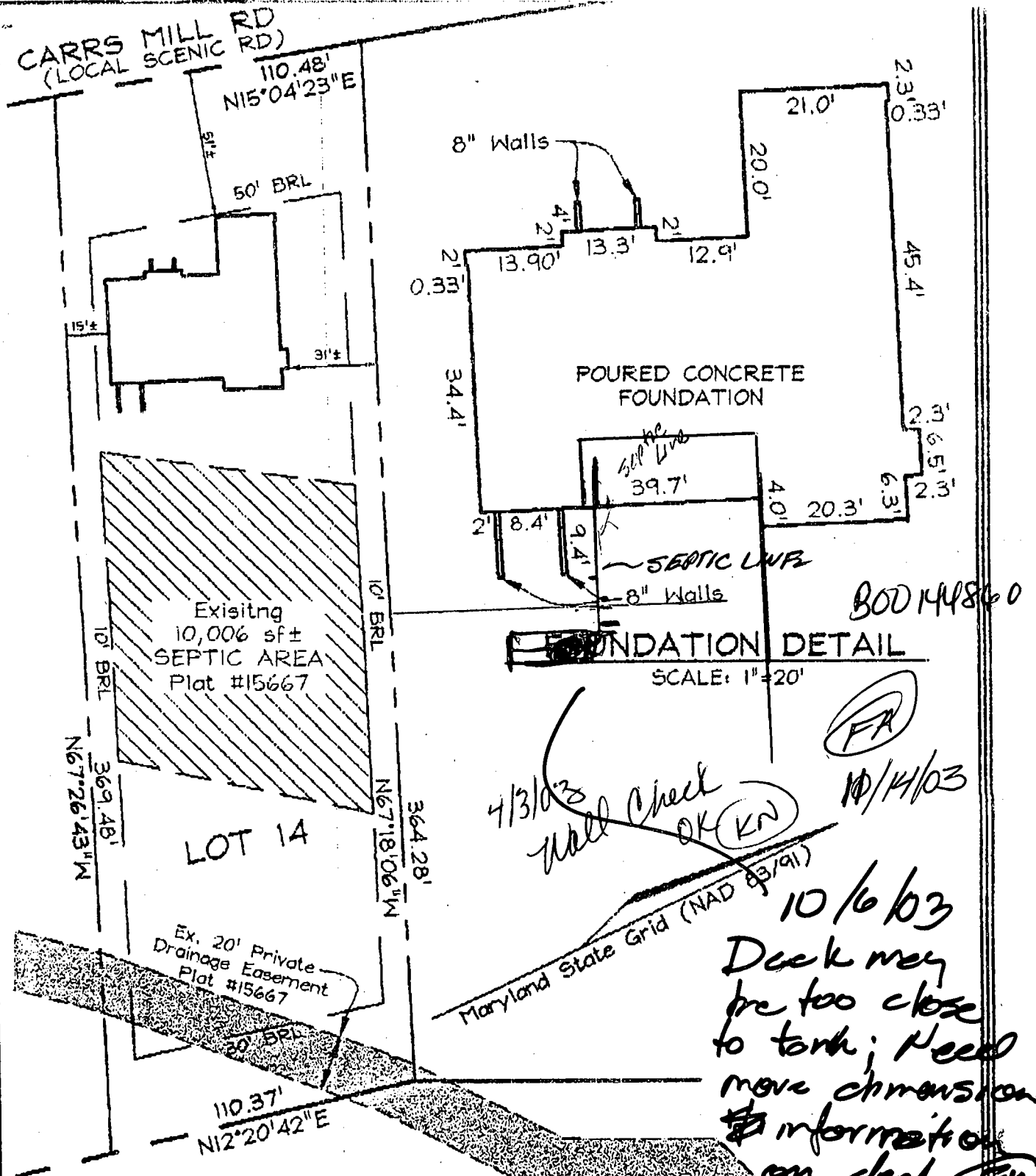
Called Ms Laurie at home (cannot reach @ office number)
I left message. that deck does not appear to
have proper set back from tank &
is directly over septic line. (FA) Not
enough dimensions are given on submit the
plan to determine proper setbacks (FA)

11/7 Frank spoke to DANA LAURIE, SHE WILL SUBMIT A BETTER
PLAN HOPEFULLY BY MONDAY

14
30

1/14/03

Called Ms Laurie and told her I would
release build' permit but warned her that
the sewerage line out of the house is 2 ft
under the deck. Told her that installation of
footings may damage line depending on how
deep they are and where they are placed. (FA)



PLAN VIEW
SCALE: 1"=50'

LEGEND

- F/P ■ FIREPLACE
- B/W ■ BAY WINDOW
- D/W ■ DRIVEWAY
- CONC ■ CONCRETE
- O/H ■ OVERHANG
- H/P ■ HEAT PUMP/AIR COND.
- G/M ■ GAS METER
- E/M ■ ELECTRIC METER

ADDRESS No.: 16192 CARRS MILL ROAD
 TOP OF WALL ELEV. = 553.97 FIRST FLOOR ELEV. = N/A
 THE LOCATION DRAWING IS OF BENEFIT TO THE CONSUMER ONLY INsofar AS IT IS REQUIRED BY A LENDER OR A TITLE INSURANCE COMPANY OR ITS AGENT IN CONNECTION WITH CONTEMPLATED TRANSFER, FINANCING OR REFINANCING;

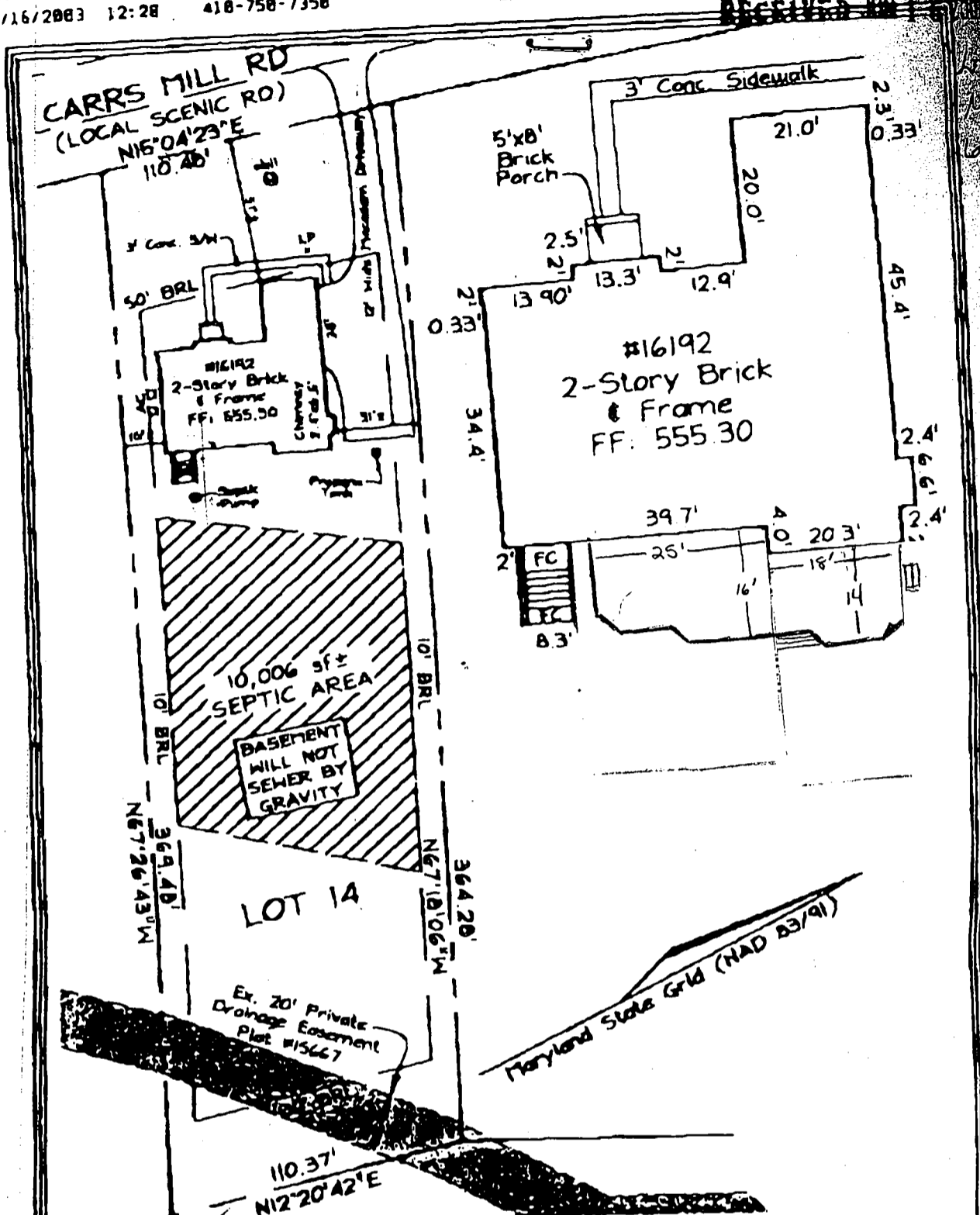
FSH Associates
 Engineers Planners Surveyors
 8318 Forrest Street Ellicott City, MD 21043
 Tel: 410-750-2251 Fax: 410-750-7350
 E-mail: FSHAssociates@cs.com


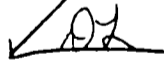
THE LOCATION DRAWING IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATION OF FENCES, GARAGES, BUILDINGS, OR OTHER EXISTING OR FUTURE IMPROVEMENTS;
 AND THE LOCATION DRAWING DOES NOT PROVIDE FOR THE ACCURATE IDENTIFICATION OF PROPERTY BOUNDARY LINES, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING OR REFINANCING.

LOCATION DRAWING	
FOUNDATION	Date: 03/25/03
FINAL	Date:
DRAWN BY:	Slim
SCALE:	As Shown
W.O. No.:	3135



WALL CHECK
 LOT 14
 MAPLE RIDGE
 PLAT No. 15667
 4TH ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND



PLAN VIEW
SCALE: 1"=50'

LEGEND

- | | |
|------------------|---------------------------|
| F/P - FIREPLACE | D/M - OVERHANG |
| B/W - BAY WINDOW | H/P - HEAT PUMP/AIR COND. |
| D/W - DRIVEWAY | G/M - GAS METER |
| CONC - CONCRETE | E/M - ELECTRIC METER |
- DIMENSIONS FROM HOUSE TO PROPERTY LINE ARE 10'

ADDRESS No. 16192 CARRS MILL ROAD
 TOP OF WALL ELEV. - N/A FIRST FLOOR ELEV. - 666.30
 THE LOCATION DRAWING IS OF BENEFIT TO THE CONSUMER ONLY
 INsofar AS IT IS REQUIRED BY A LENDER OR A TITLE INSURANCE
 COMPANY OR ITS AGENT IN CONNECTION WITH CONTEMPLATED
 TRANSFER, FINANCING OR REFINANCING;
 THE LOCATION DRAWING IS NOT TO BE RELIED UPON FOR THE ES-
 TABLISHMENT OR LOCATION OF FENCES, GARAGES, BUILDINGS, OR
 OTHER EXISTING OR FUTURE IMPROVEMENTS;
 AND THE LOCATION DRAWING DOES NOT PROVIDE FOR THE
 ACCURATE IDENTIFICATION OF PROPERTY BOUNDARY LINES, BUT
 SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER
 OF TITLE OR SECURING FINANCING OR REFINANCING

FSH Associates

Engineers Planners Surveyors
 2318 Forest Street Ellicott City, MD 21043
 Tel: 410-750-2251 Fax: 410-750-7358
 E-mail: FSHAssociates@aol.com

LOCATION DRAWING	
FOUNDATION	Date: 04/24/03
FINAL	Date: 06/11/03
DRAWN BY:	gim
SCALE:	As Shown
N.O. No:	3138



LOCATION DRAWING
 LOT 14
 MAPLE RIDGE
 PLAT No. 15667
 4TH ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND