

LAYOUT 2/17/04 INSP 4 _____
 INSP 2 2/18/04 INSP 5 _____
 INSP 3 _____ INSP 6 _____

ISSUE DATE: 2/15/2005

APPROVAL DATE: 7/8/05

**PERMIT
INDEXED**
03334708

P 521994

A 511441-I

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

Fogles Septic Clean, Inc IS PERMITTED TO INSTALL ALTER

ADDRESS: 580 Obrecht Road PHONE NUMBER: 410-795-5670

SUBDIVISION: Estates @ Sandhill LOT NUMBER: 33

ADDRESS: 11917 Mekenie Court PROPERTY OWNER: Oak Hill Properties, LLC

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: 118 HOUSE SERVED BY PUBLIC WATER

TRENCHES:	Trench to be 3.0 feet wide. Inlet 5.0 feet below original grade. Bottom maximum depth 9.0 feet below original grade. Effective area begins at 5.0 feet below original grade. 4.0 feet of stone below distribution pipe.
LOCATION:	Place the distribution box where it is indicated on the approved building permit plan. Ok to extend past SDA. <i>Run trenches on contour (2-60') 12' CTC</i>
NOTES:	

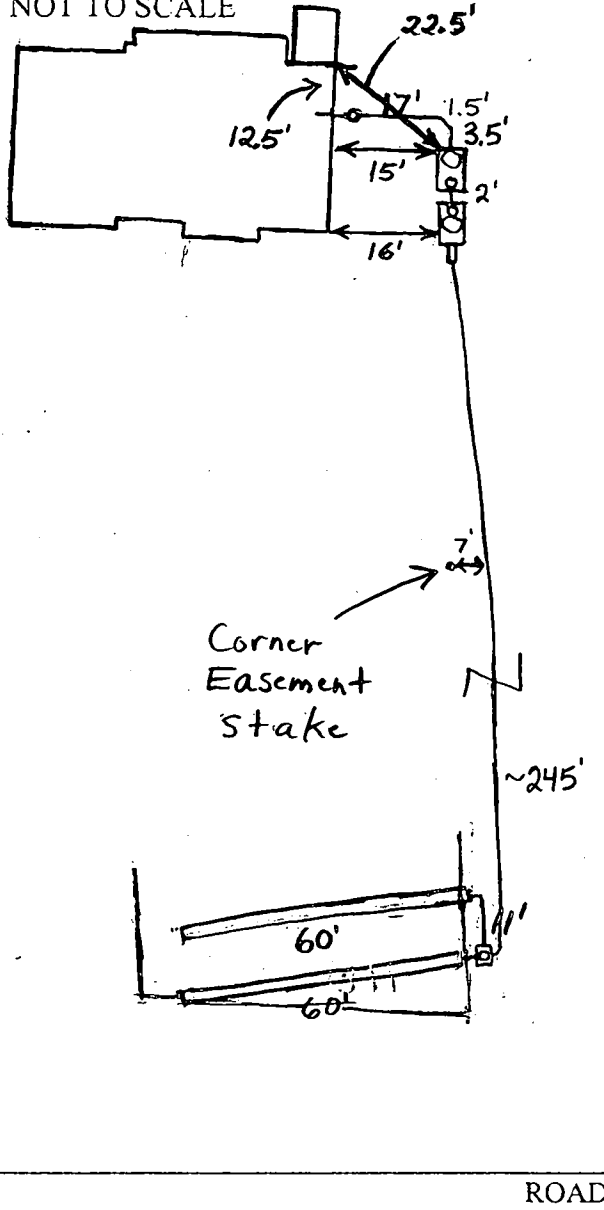
PLANS APPROVED: Kevin J. Bell  DATE: 5/11/04

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 OR 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
 DO NOT LEAVE ANY REQUEST FOR INSPECTION ON VOICEMAIL**

A511441-I

NOT TO SCALE



TRENCH/DRAINFIELD DATA

WIDTH	INLET	BOTTOM
3'	5'	9'
NUMBER OF TRENCHES		2
TOTAL LENGTH		120'
ABSORPTION AREA		480'+Sidewall
DISTRIBUTION BOX LEVEL		Levelers
DISTRIBUTION BOX BAFFLE		Elbow
DISTRIBUTION BOX PORT		Yes

SEPTIC TANK DATA

SEPTIC TANK 1 LEVEL	✓
2-Comp. CAPACITY	1500 GAL
SEAM LOC	Top
TANK LID DEPTH	1.5'-2'
BAFFLES	Yes
BAFFLE FILTER	No
MANHOLE LOC	Front
6" PORT LOC	Rear
WATERTIGHT TEST	No
SEPTIC TANK 2 LEVEL	✓
CAPACITY	1250 GAL
SEAM LOC	Top
TANK LID DEPTH	2.5'-3'
BAFFLES	Yes
BAFFLE FILTER	No
MANHOLE LOC	Middle
6" PORT LOC	Front
WATERTIGHT TEST	No

PRE-CONSTRUCTION 2/17/04 Easement staked. Contour accurate.
 Tanks set. O.K. to install 2-60' trenches at top of easement.
 INSTALLATION Need house connection. (BB) 2/18/05 Trenches done. O.K.
 to cover everything. Need house connection, pump test and alarm test. (BB)
 5/26/05 P&A Alarm - no electricity on to test P&A 7/8/05 Pump and
 alarm working (BB)

FINAL INSPECTOR B. Baber DATE OF APPROVAL 7/8/05

LOT 33
THE ESTATES AT
SAND HILL

PLAT NO. 14585
 ELECTION DISTRICT NO. 3
 HOWARD COUNTY, MARYLAND



PRES. PARCEL 'A'

LOT 32

LOT 33

LOT 34

2/15/05
Wall Check OK
(KN)
 LOT 30

Public
H₂O

CURVE TABLE						
No.	Radius	Length	Delta	Tan.	Direction	Chord
C2	55.00	12.56	13°05'05"	6.31	S83°04'04"W	12.53

TOP OF WALL ELEV. = 580.8'±0.2'

FIRST FLOOR ELEV. =

ADDRESS: 11917 MEKENIE COURT

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 OF FENCES, GARAGES, BUILDINGS, OR OTHER EXISTING OR FUTURE IMPROVEMENTS.

MEKENIE COURT

MILDENBERG
BOENDER, & ASSOC., INC.

Engineers Planners Surveyors
 5072 Dorsey Hall Drive, Suite 202, Ellicott City, Maryland 21042
 (410) 997-0296 Balt. (301) 621-5521 Wash. (410) 997-0298 Fax.



JOHN MILDENBERG
 PROFESSIONAL SURVEYOR
 MARYLAND No. 10718

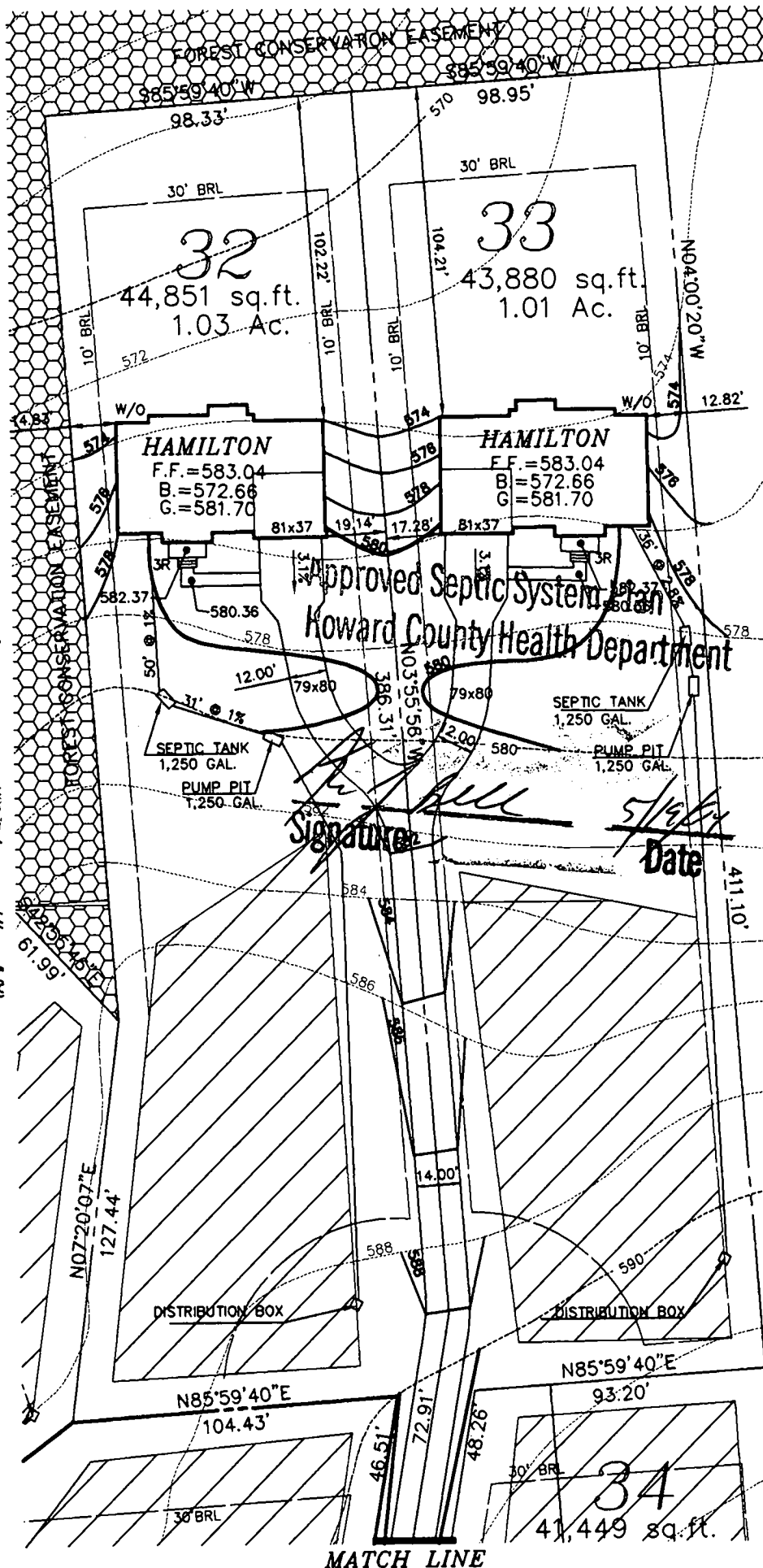
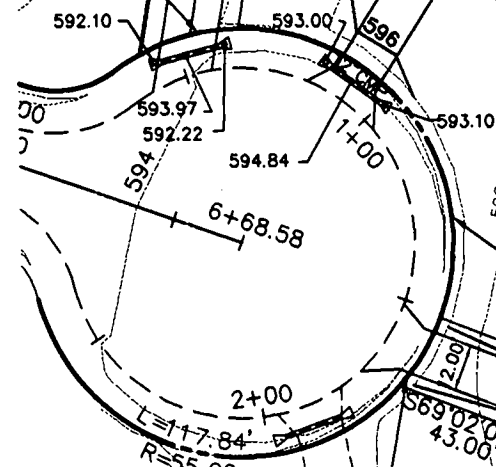
FOUNDATION	DATE: 2/09/05	FINAL	DATE:
DRAWN BY: T. HILL	SCALE: 1" = 60'		
PROJECT NO.: 2000-074	LOCATION DRAWING		

MATCH LINE

277 sq. ft.
.04 Ac.

S09°50'26"W
205.00'

L=26.54'
R=55.00'



HAMILTON
F.F.=583.04
B.=572.66
G.=581.70

33
43,880 sq. ft.
1.01 Ac.

HAMILTON
F.F.=583.04
B.=572.66
G.=581.70

Approved Septic System Plan
Howard County Health Department

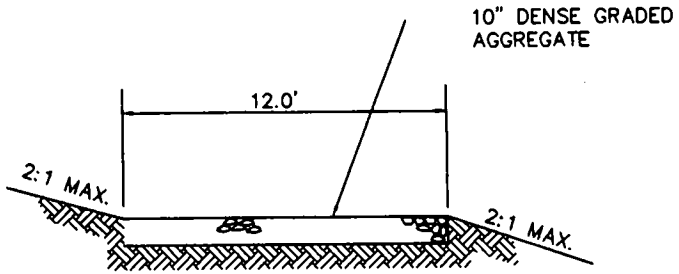
[Signature]
Date 5/14/04



- FIRST FLOOR EL. = 583.04
- INV. OUT OF HOUSE = 576.00
- INV. IN SEPTIC TANK = 575.30
- INV. OUT OF SEPTIC TANK = 575.05
- EXIST. EL. AT SEPTIC TANK = 578.00
- PROP. EL. AT SEPTIC TANK = 578.30
- PROP. EL. AT PUMP PIT = 578.80
- INV. IN PUMP PIT = 574.80
- EXIST. EL. AT DIST. BOX = 591.00
- INV. IN DIST. BOX = 587.00

G.P.# 02-07

PLAT # 14580-14585 NO GRAVITY SEWER TO BASEMENT



TYPICAL DRIVEWAY SECTION

THE ESTATES AT SAND HILL

PLOT PLAN LOT # 33
11917 MEKENIE COURT

ELECTION DISTRICT: 3	TAX MAP: 16	HOWARD COUNTY, MARYLAND
DRAWN BY: MMT	SCALE: 1"=50'	DATE: MARCH 14, 2004

**MILDENBERG,
BOENDER & ASSOC., INC.**
Engineers Planners Surveyors

6072 Dorsey Hall Drive, Suite 202, Ellicott City, Maryland 21042
(410) 997-0296 Balt. (301) 621-5521 Wash. (410) 997-0298 Fax.

**HOWARD COUNTY
PERMIT APPLICATION**

PERMIT NUMBER
B-00147017 KJB

Building Address 11917 McLELLAN CT
Frederick, MD 21703
Suite/Apt. #: _____ SDP/WP/Petition #: _____
Census Tract 6057 Subdivision oak hill
Section _____ Area _____ Lot _____
Tax Map 16 Parcel 3 Grid 2
Zoning R2 DED Map Coordinates 1047 Lot size _____

Property Owner's Name Oak Hill Properties, L.L.C.
Address 5305 Jefferson Pike
Frederick, MD 21703-6917
City _____ State _____ Zip Code _____
Home Phone 301-662-4435 Work Phone _____
Applicant's Name & Mailing Address, (if other than stated hereon):
KIRK PETERS 410-984-6705
Phone 112-0435 Fax 473-7123

Existing Use vacant lot
Proposed Use new home
Estimated Construction Cost \$ 75,000
Description of Work CONSTRUCT A 1100 SQ FT
2 STORY, FULL BSMT, 12 R 31A
1 1/2 BA (LOUNGE (4 BR))

Contractor Company _____
Contact Person Oak Hill Properties, L.L.C.
5305 Jefferson Pike
Frederick, MD 21703-6917
City _____ State _____ Zip Code _____
License No. MD 4165
Phone 301-662-4435 Fax 301-662-7123

Occupant or Tenant _____
Contact Name Oak Hill Properties, L.L.C.
5305 Jefferson Pike
Frederick, MD 21703-6917
City _____ State _____ Zip Code _____
Phone 301-662-4435 Fax _____

Engineer or Architect Company _____
Contact Person _____
Address _____
City _____ State _____ Zip Code _____
Phone 442-0000 Fax 992-0000

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

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

Print Name _____
Date _____

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

AGENCY	DATE	SIGNATURE APPROVAL
<input checked="" type="checkbox"/> State Highways		
<input checked="" type="checkbox"/> Building Official		
<input checked="" type="checkbox"/> Dev. Exemptions, DPZ		

DPZ SETBACK INFORMATION	PROPERTY ID: <u>61431</u>
Front: _____	Filing fee \$ _____
Side St.: _____	Add'l per. fee \$ _____
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
Lot Coverage for NewTown Zone _____	Check <u>9356</u>
SDP/Red-line approval date <u>MAY 14 2004</u>	Van <u>4441</u>

Is Sediment Control approval required prior to issuance?
YES NO
CONTINGENCY CONSTRUCTION START:
ONE STOP SHOP:

Accepted by _____

APPLICATION

PERCOLATION TESTING

A 511435

P _____

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

DISTRICT _____

DATE 2/24/99

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 R. Jeanette Miller, Trustee; Clyse Day Pendleton, Et Al

ADDRESS 14965 Frederick Road, Woodbine, MD 21797 PHONE _____

AGENT OR PROSPECTIVE BUYER Oak Hill Properties, LLC; Attn: Mr. Kevin Rogers

ADDRESS 107 Loudoun Street, SE, Leesburg, VA. 20175 PHONE 703 443 0400

PROPERTY LOCATION:

IBDIVISION Sand Hill Property LOT NO. 1 though 78

ROAD AND DESCRIPTION East side intersection of Sand Hill Road and Mt. View Road

TAX MAP 16 PARCEL # 3

SIZE OF LOT 40,000 to 60,000 S.F. TYPE BLDG. Single Family Dwelling
(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT. Oak Hill Properties, LLC
Kevin B. Rogers
(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' 41g 38f

bright red Siallm

5.0

red brn (dark) Siallm
1090 Rx

12.0

42e

heavy red brown Siallm

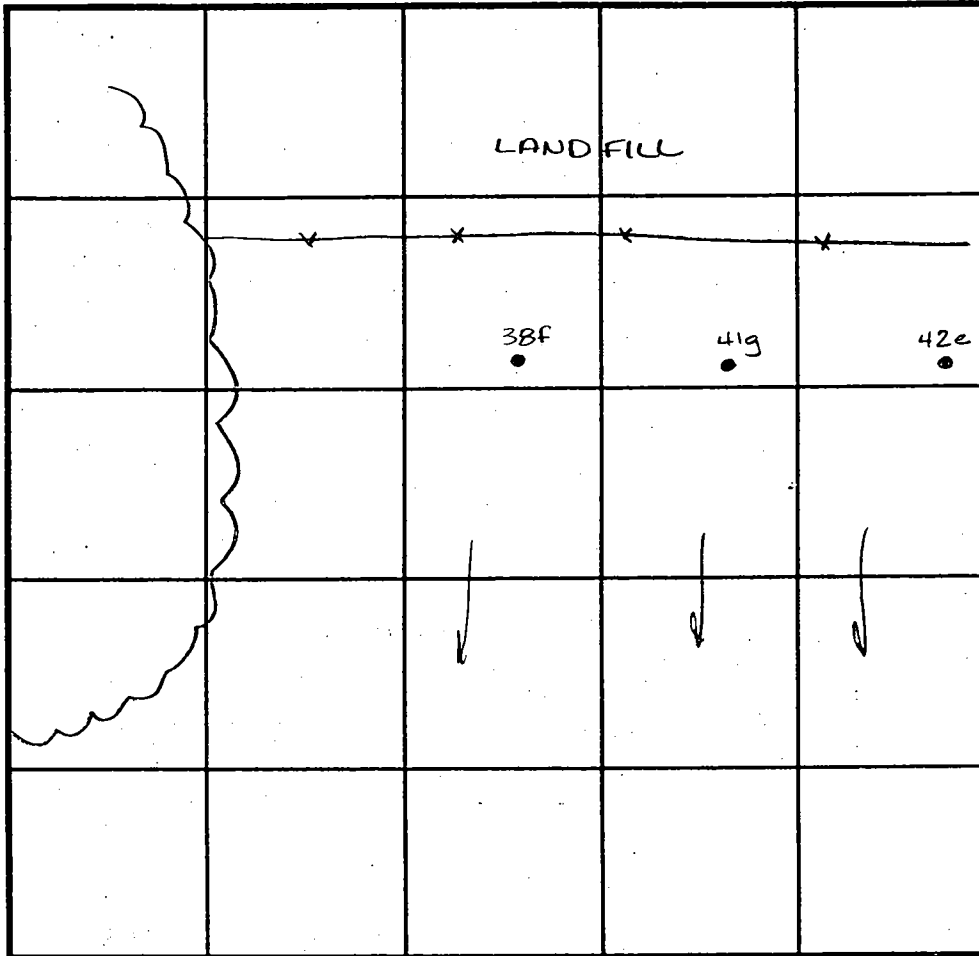
5.0

lgt tan orange Siallm
1090 Rx

12.0

SOIL PROFILE

0'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4-7-99	41g	4.5 V12.0	2:55	2:59	2:59	3:10	11min
		7.5 V12.0	2:56	2:58	2:58	3:00	2min
	42e	Visual	to 12.0	-see profile	---	---	OK
	38f	Visual	to 12.0	-see profile	---	---	OK

REMARKS _____

TYPE OF SOIL _____

TESTED BY Amy McMillen ALSO PRESENT Ketterman

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

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

COUNTY #

SOIL PROFILE
41h

0' red orange SiClm

3.0 bright orange SiSalM
5% shade

12.0

41M

2.0 red brown SiClm

bright orange SalM
20% decayed shale micaceous

10.0 refusal

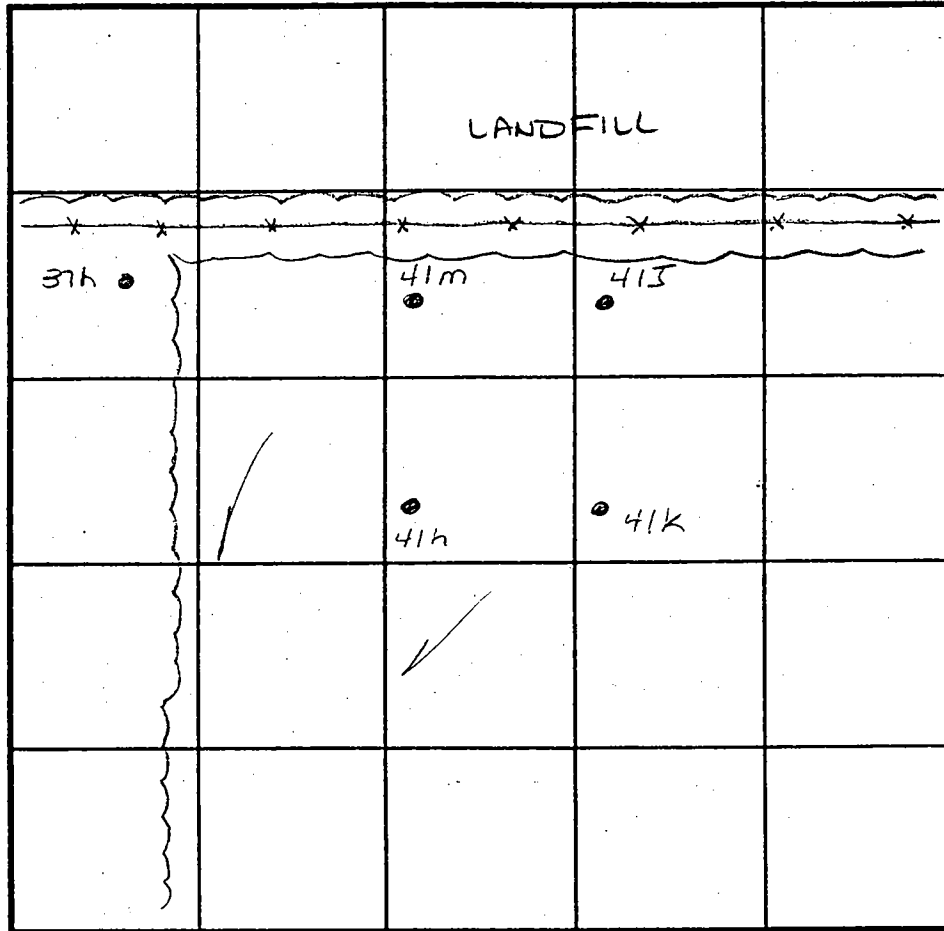
41j 37h

2.0 red brown SiClm

bright orange brn SalM
5% Rx

9.5 bright or SalM
20% Rx

11.0



SOIL PROFILE
41k

0' bright red SiClm

3.0 bright red orange SalM

12.0

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
5/4/99	41h	3.5 / 12.0	1:43	1:46	1:46	1:50	4min
	41m	3.0 / 10.0	1:52	1:54	1:54	1:56	2min
	41j	3.5 / 11.0	2:00	2:01 ³⁰	2:01 ³⁰	2:04	2 1/2 min
		7.5 / 11.0	2:01	2:02 ³⁰	2:02 ³⁰	2:04 ³⁰	2min
	41k	Visual to 12.0	- see profile			---	OK
5/5/99	37h	3.0 / 12.0	10:29	10:30	10:30	10:31	1min

REMARKS _____

TYPE OF SOIL _____

TESTED BY Amy McMillen ALSO PRESENT _____

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

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

COUNTY #

SOIL PROFILE

37g

orange brown silty

0'

5.0'

tan yellow silty

2.0'

37k

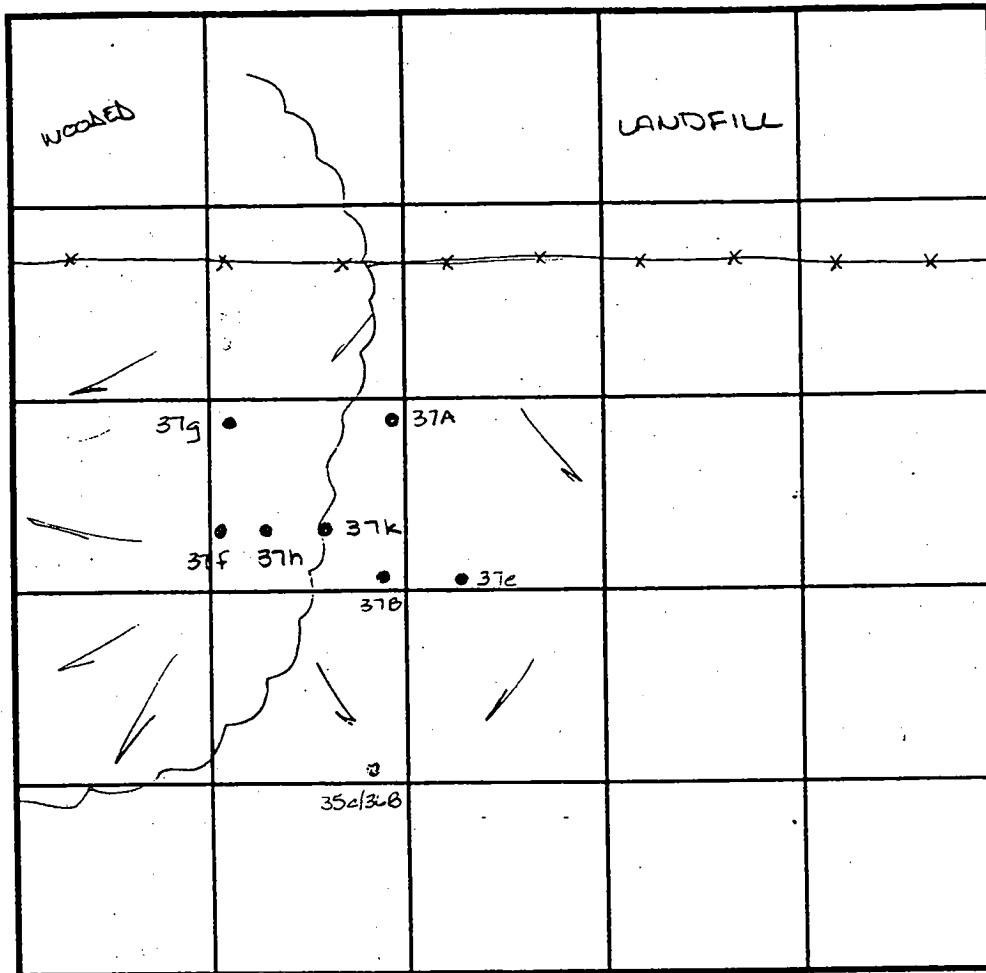
dark orange brown silty

4.0'

orange brown silty
30-70 R_x

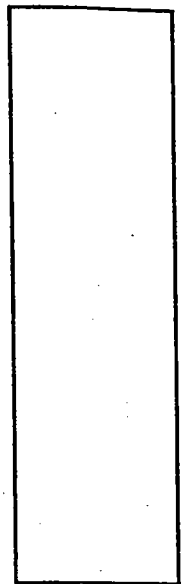
7.0'

refusal



SOIL PROFILE

0'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4-7-99	37f	Insufficient depth to bedrock					
		refusal @ 6.0'					F
	37h	>50% rock beginning @ 5.0'					
		Insufficient depth to bedrock					F
	37g	5.5' / $\sqrt{12.0'}$	3:35	3:36	3:36	3:38	2min
	37k	4.0' / $\sqrt{12.0'}$	11:04	11:10	11:10	11:21	11min

REMARKS

TYPE OF SOIL

TESTED BY Amy McMillen

ALSO PRESENT Ketherman

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

TRENCH WIDTH

INLET DEPTH

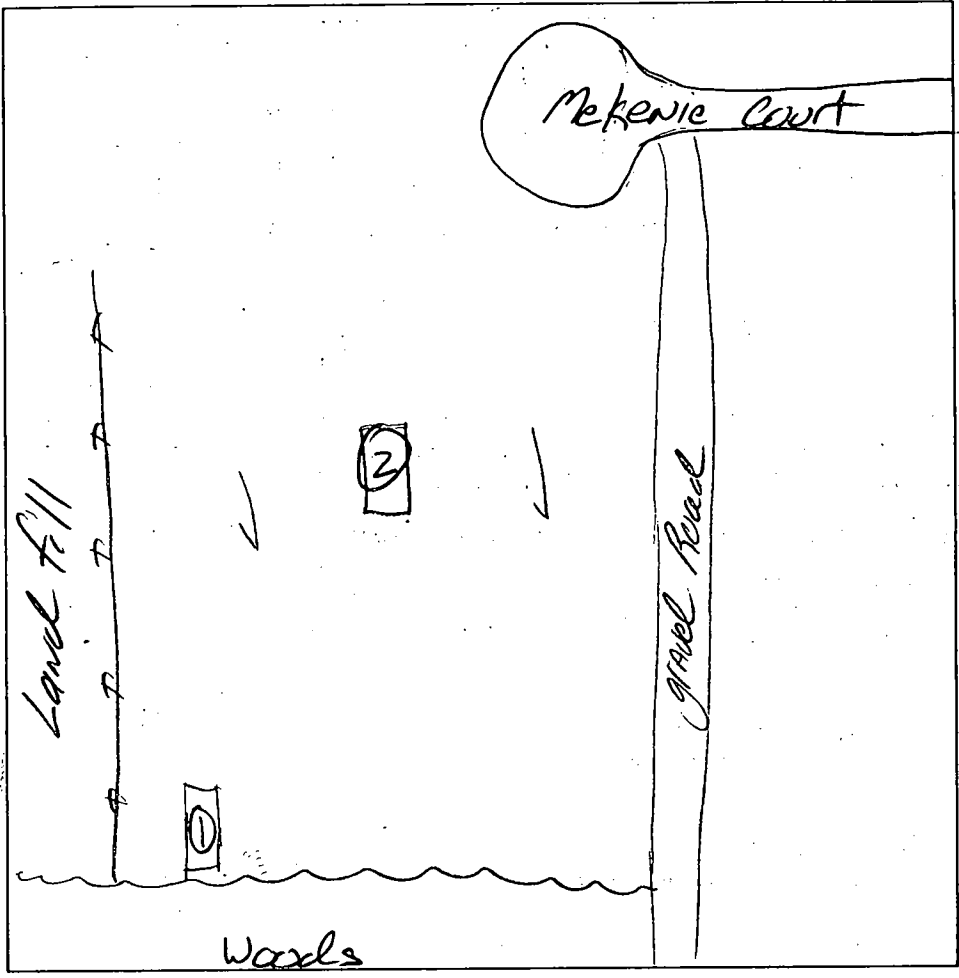
MAXIMUM BOTTOM DEPTH

SQ. FT./BEDROOM

AVP ①

13'
 Buow
 to
 LOAM
 2'
 tan / Red
 Orange / Ban
 micaceous
 sl
 10
 Platy tan
 to -mic-
 20%

②
 Browns loam
 1'
 Red / Orange
 Silty Clay
 LOAM
 micaceous
 4 1/2'
 tan / Browns
 micaceous
 Sand /
 Sand LOAM
 5-10% Rock
 13 1/2'



DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2nd INCH	P/F/H
5/11/04	①	4 1/2' / 13'	9:18	9:30	9:55	25 min	P
	②	5' / 13 1/2'	9:31	9:33	9:35	2 min	P

REMARKS _____
 SANITARIAN _____ BACKHOE _____ OTHERS _____
 TEST HOLES USED IN SDA _____ AVG. PERC TIME _____ SQ. FT/BR _____
 TRENCH WIDTH _____ INLET DEPTH _____ MAX. BOT DEPTH _____ EFFECTIVE SW _____



APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) _____ TEST TIME _____ A/P _____

AGENCY REVIEW: _____ DATE _____

DO NOT WRITE ABOVE THIS LINE

I HEREBY APPLY FOR THE NECESSARY TESTING/EVALUATION PRIOR TO ISSUANCE OF SEWAGE DISPOSAL SYSTEM PERMIT(S) TO:

CHECK AS NEEDED:

- CONSTRUCT NEW SEPTIC SYSTEM(S)
- REPAIR/ADD TO AN EXISTING SEPTIC SYSTEM
- REPLACE AN EXISTING SEPTIC SYSTEM

CHECK AS NEEDED:

- NEW STRUCTURE(S)
- ADDITION TO AN EXISTING STRUCTURE
- REPLACE AN EXISTING STRUCTURE

CHECK ONE:

- CREATE NEW LOT(S)
- BUILD ON AN EXISTING LOT IN A SUBDIVISION
- BUILD ON AN EXISTING PARCEL OF RECORD

IS THE PROPERTY WITHIN 2500' OF ANY RESERVOIR?

- YES
- NO

THE TYPE OF STRUCTURE IS:

- RESIDENTIAL WITH _____ PROPOSED BEDROOMS IN THE COMPLETED STRUCTURE (NOTE *UNKNOWN* IF APPROPRIATE)
- COMMERCIAL (PROVIDE DETAIL OF NUMBERS AND TYPES OF EMPLOYEES/ CUSTOMERS ON ACCOMPANYING PLAN)
- INSTITUTIONAL/GOVERNMENT (PROVIDE DETAIL OF NUMBERS AND TYPES OF EMPLOYEES/USERS ON ACCOMPANYING PLAN)

PROPERTY OWNER(S) _____

DAYTIME PHONE _____ CELL _____ FAX _____

MAILING ADDRESS _____
STREET CITY/TOWN STATE ZIP

APPLICANT _____

DAYTIME PHONE _____ CELL _____ FAX _____

MAILING ADDRESS _____
STREET CITY/TOWN STATE ZIP

APPLICANT'S ROLE: DEVELOPER BUILDER BUYER RELATIVE/FRIEND REALTOR CONSULTANT

PROPERTY LOCATION
SUBDIVISION/PROPERTY NAME _____ LOT NO. _____

PROPERTY ADDRESS _____
STREET TOWN/POST OFFICE

TAX MAP PAGE(S) _____ GRID _____ PARCEL(S) _____ PROPOSED LOT SIZE _____

AS APPLICANT, I UNDERSTAND THE FOLLOWING: THE SYSTEM INSTALLED SUBSEQUENT TO THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC SEWERAGE IS AVAILABLE. THIS APPLICATION IS COMPLETE WHEN ALL APPLICABLE FEES AND A SUITABLE SITE PLAN HAVE BEEN RECEIVED. I ACCEPT THE RESPONSIBILITY FOR COMPLIANCE WITH ALL M.O.S.H.A. AND "MISS UTILITY" REQUIREMENTS. APPROVAL IS BASED UPON SATISFACTORY REVIEW OF A PERC CERTIFICATION PLAN.

TEST RESULTS WILL BE MAILED TO APPLICANT. _____
SIGNATURE OF APPLICANT

HOWARD COUNTY HEALTH DEPARTMENT, BUREAU OF ENVIRONMENTAL HEALTH, WELL AND SEPTIC PROGRAM
3525-H ELLICOTT MILLS DRIVE, ELLICOTT CITY, MARYLAND 21043-4544 (410) 313-1771 FAX (410) 313-2648
TDD (410) 313-2323 TOLL FREE 1-877-4MD-DHMH

SITE INSPECTION SHEET

OWNER: _____ PHONE #: _____

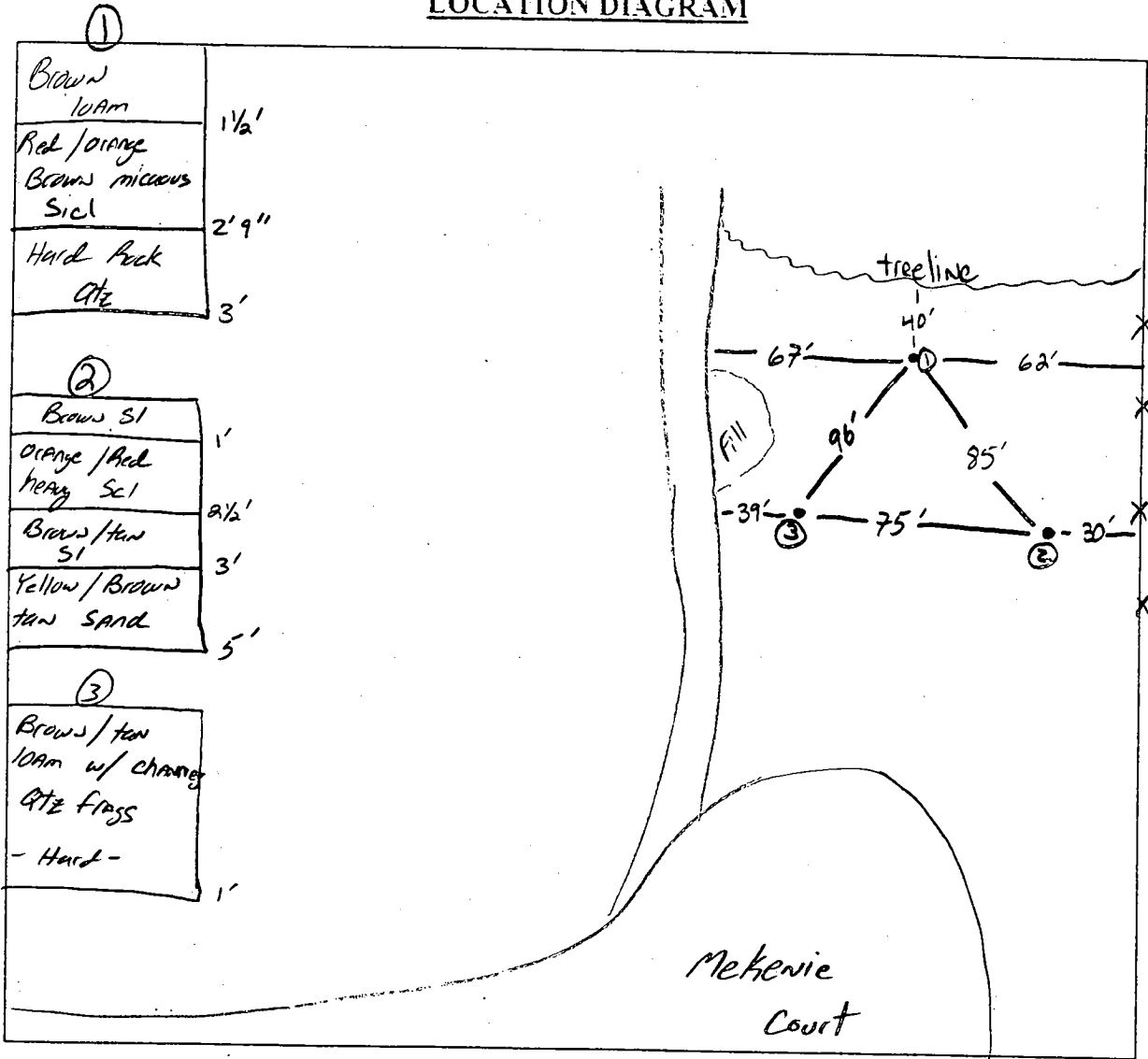
ADDRESS: Sandhill CONTRACTOR: _____

WELL TAG #: _____

SUBDIVISION: _____ LOT: 53 COUNTY #: _____

PROPOSAL: _____

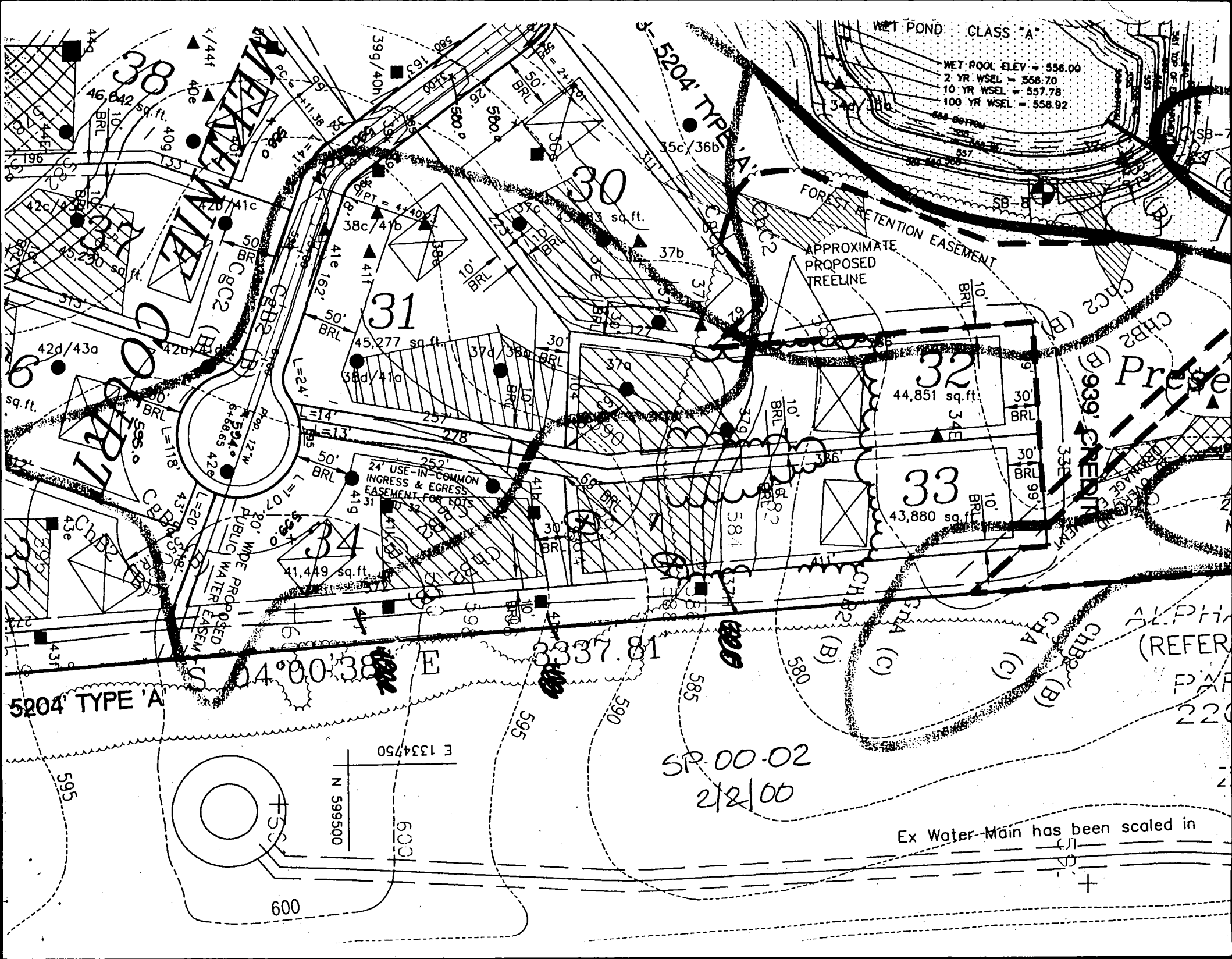
LOCATION DIAGRAM



COMMENTS: Augered holes not enough need to get a backhoe on site.

DATE: 4/30/04

INSPECTOR: KJB



WET POND CLASS "A"

WET POOL ELEV = 556.00
 2 YR WSEL = 558.70
 10 YR WSEL = 557.78
 100 YR WSEL = 558.92

31

30

32

44,851 sq. ft.

33

43,880 sq. ft.

34

41,449 sq. ft.

24' USE-IN-COMMON
 INGRESS & EGRESS
 EASEMENT FOR LOTS

PUBLIC WATER EASEMENT

APPROXIMATE
 PROPOSED
 TREELINE

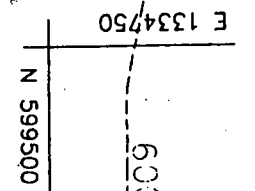
FOREST RETENTION EASEMENT

CREDIT

5204' TYPE 'A'

SP-00-02
 2/2/00

Ex Water-Main has been scaled in



ALPHA
 (REFER
 220

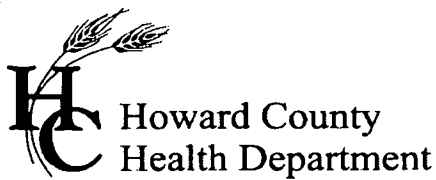
FILE INQUIRY FORM 017 370047

10 ⁴³ Property Address: 11917 MEVENIE CT

3/3/04 ~~Refused~~ on the grounds that
there are no passing perc holes

on or near the septic easement. (FA)
No perc cert.

2/4/04 Also no copy of perc cert in file (FA)
3/3/04 Forced copy of well log verification
form to
NEVER MIND PUBLIC UTILITIES (FA)
PROPOSED



3525 H Ellicott Mills Drive, Ellicott City, MD 21043
(410) 313-1771 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

Penny E. Borenstein, M.D., M.P.H., Health Officer

July 12, 2005

Oak Hill Properties, LLC
5305 Jefferson Pike
Frederick, MD 21703

SENT VIA FAX TO 301-473-7143

RE: The Estates at Sandhill, Lot 33
11917 Mekenie Court
Marriottsville, MD 21104
BP# B00147017
PUBLIC WATER

Dear Sir/Madam:

This is to advise you that the septic system for the above referenced property has been installed and inspected. **Final approval of the septic system was granted on 07/08/2005.**

The property is served by public water and is therefore exempt from the Health Department water sampling requirements.

By issuance of this letter, this office recommends release of the Use and Occupancy permit for the referenced property.

Approving Authority,

Brian Baker, R. S.
Well & Septic Program

mlb
cc: Building Inspector's Office
File