

LAYOUT 12/16/2002 11-11:30 INSP 4 _____

INSP 2 12/17/02 12-1 INSP 5 _____

INSP 3 12/18/02 10:30AM INSP 6 _____

ISSUE DATE: 10/23/2002

APPROVAL DATE: 12/18/02

**PERMIT
INDEXED**

04-366514

P 517 970

A 511939-E

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

K & K Excavating IS PERMITTED TO INSTALL ALTER

ADDRESS: 14960 Frederick Road, Woodbine PHONE NUMBER: 410-442-1336

SUBDIVISION: Wellington III LOT NUMBER: 6

ADDRESS: 3200 Huntersworth Way PROPERTY OWNER: Selfridge Builders

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

PUMP CHAMBER CAPACITY (GALLONS): N/A COMPARTMENTED TANK REQUIRED

NUMBER OF BEDROOMS: 4

SQUARE FEET PER BEDROOM: 180

LINEAR FEET OF TRENCH REQUIRED: 240 HOUSE SERVED BY PUBLIC WATER

TRENCHES:	Trench to be 3.0 feet wide. Inlet 4.0 feet below original grade. Bottom maximum depth 6.0 feet below original grade. Effective area begins at 4.0 feet below original grade. 2.0 feet of stone below distribution pipe.
LOCATION:	Start the first trench 120 feet from rear lot line and 80 feet from the leftside line as seen when facing the lot from Hunterworth Way. Place second trench parallel to and 9 feet from (edge to edge) the first trench. All trenches to be placed on a level grade for even distribution of effluent.
NOTES:	

PLANS APPROVED: Frank Skinner *OK 10/1/02 (SC)* DATE: 9/10/2002

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

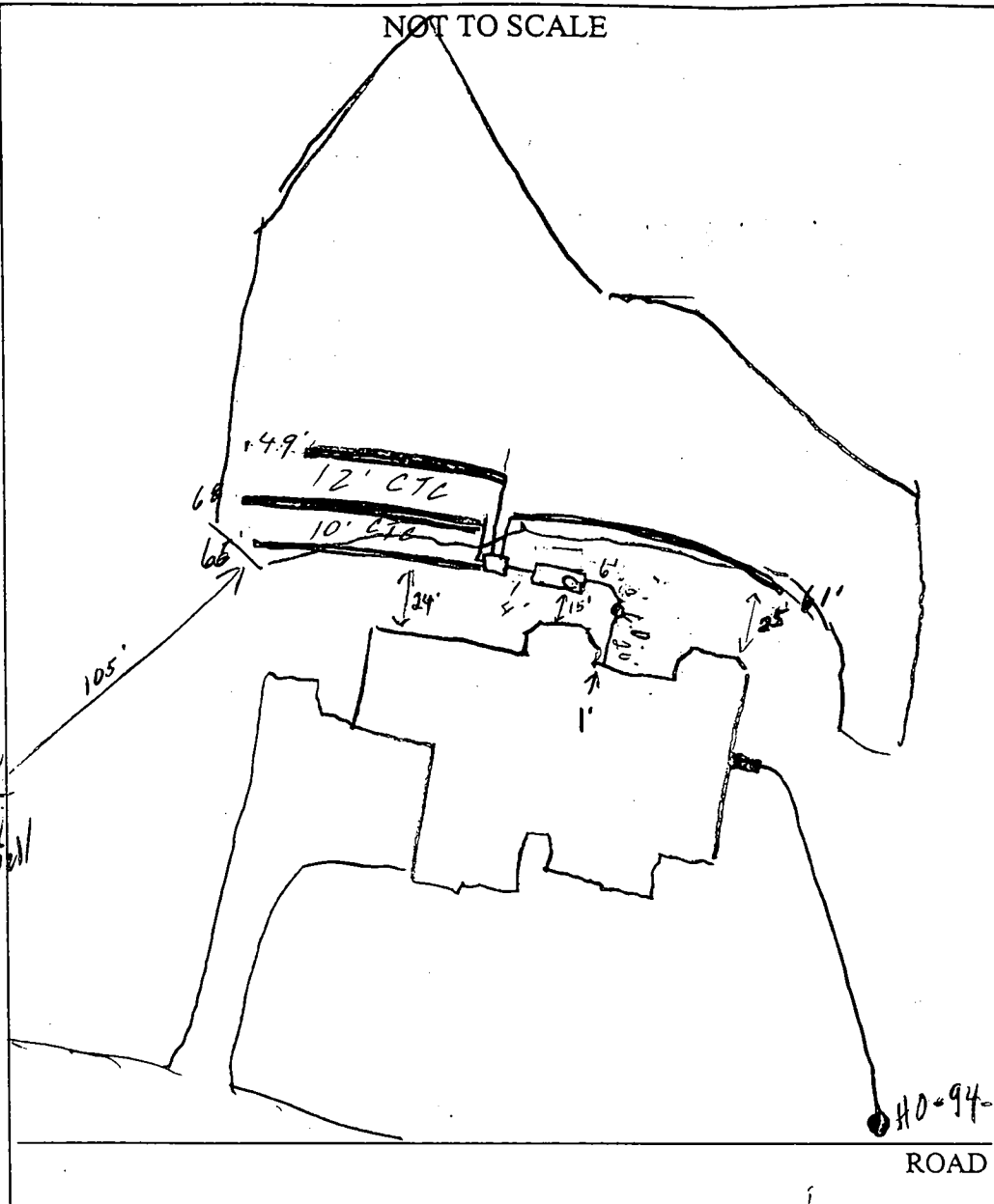
BUILDING PERMIT SIGNED AND RETURNED

**PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT
CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM**

7-18-03-800143046-DECK

A511939-E

NOT TO SCALE



TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
3'	4'	6'
NUMBER OF TRENCHES		4
TOTAL LENGTH		244'
ABSORPTION AREA		7324
DISTRIBUTION BOX LEVEL		<input checked="" type="checkbox"/>
DISTRIBUTION BOX BAFFLE		<input checked="" type="checkbox"/>
DISTRIBUTION BOX PORT		<input type="checkbox"/>

SEPTIC TANK DATA	
SEPTIC TANK 1 LEVEL	<input checked="" type="checkbox"/>
CAPACITY	1500 GAL
SEAM LOC	Top
TANK LID DEPTH	1-2'
BAFFLES	<input checked="" type="checkbox"/>
BAFFLE FILTER	<input type="checkbox"/>
MANHOLE LOC	Front
6" PORT LOC	<input type="checkbox"/>
WATERTIGHT TEST	<input checked="" type="checkbox"/>
SEPTIC TANK 2 LEVEL	<input type="checkbox"/>
CAPACITY	_____ GAL
SEAM LOC	_____
TANK LID DEPTH	_____
BAFFLES	N/A
BAFFLE FILTER	<input type="checkbox"/>
MANHOLE LOC	_____
6" PORT LOC	_____
WATERTIGHT TEST	<input type="checkbox"/>

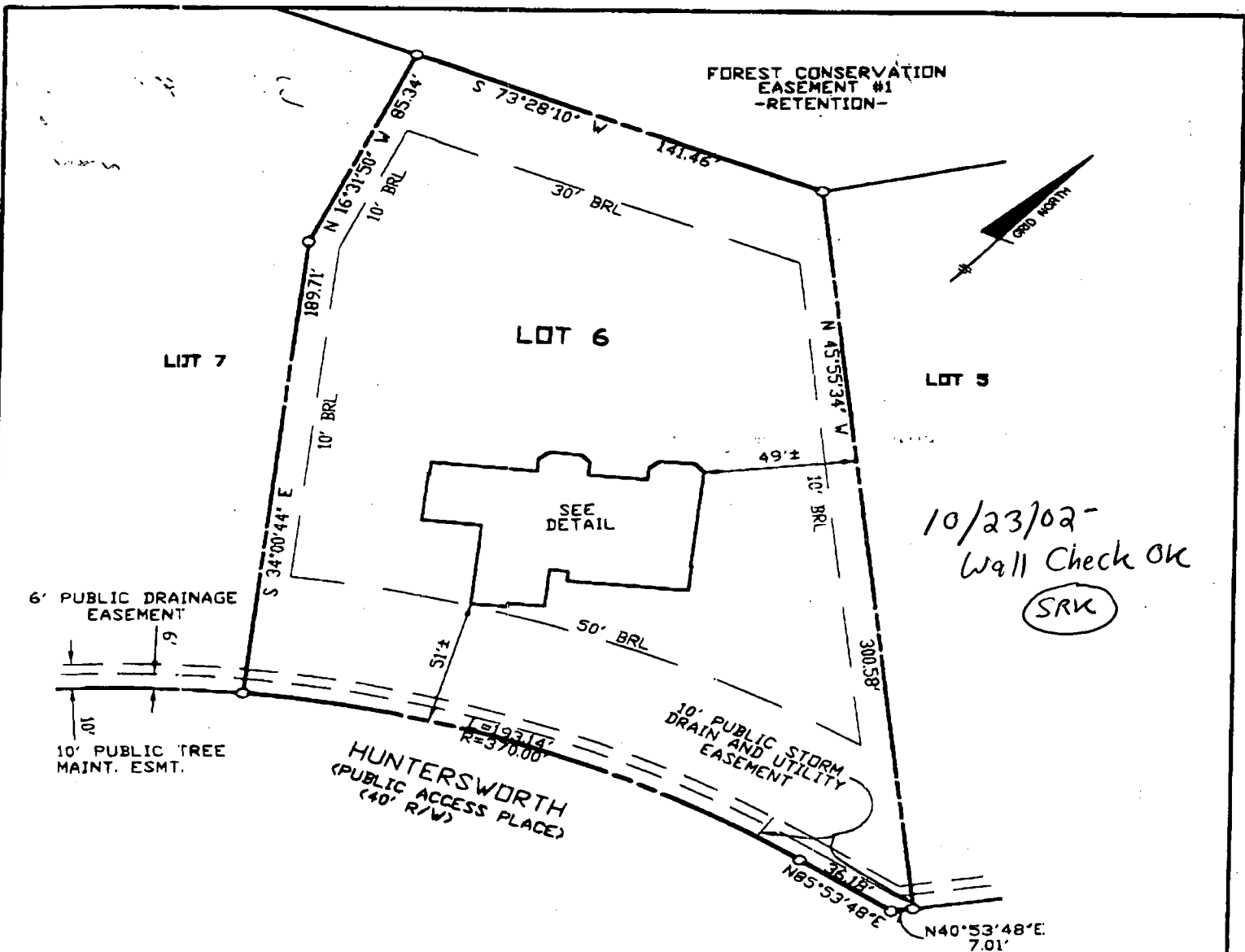
PRE-CONSTRUCTION 12/16/02 Contours appears accurate, Lay out B.P., 10' CTC Measure 100' off adj well to trenches (SD) 12/17/02 Not Rec'd (SD)

INSTALLATION 12/17/02 Tank set, 2 trenches installed (SD)

12/18/02 OK to cover all work (SD)

BUILDING PERMIT SIGNED AND RETURNED

FINAL INSPECTOR [Signature] DATE OF APPROVAL 12/18/02



TOP OF FOUNDATION WALL ELEVATION = 534.0'
 OFFSET DIMENSIONS TO PROPERTY LINES ARE ±1'

SURVEYOR'S CERTIFICATE

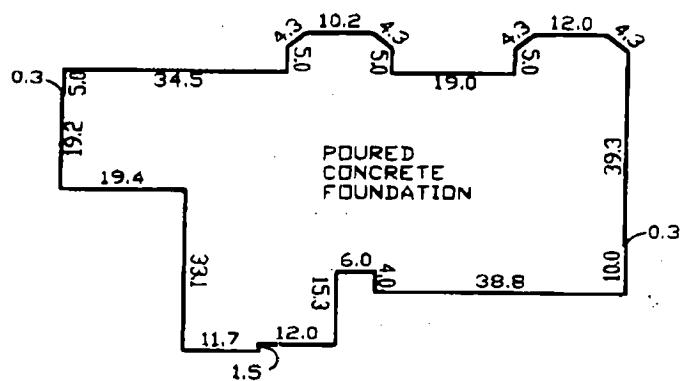
I HEREBY CERTIFY TO THE BEST OF MY PROFESSIONAL KNOWLEDGE, INFORMATION AND BELIEF, THAT THE DIMENSIONS OF THE BUILDING WALLS SHOWN HEREON ARE CORRECT; THAT THEY ARE BASED ON A FIELD RUN SURVEY PERFORMED BY BENCHMARK ENGINEERING, INC. ON 10/14/02; AND THAT THE PROPERTY OUTLINE SHOWN HEREON IS BASED ON THE PLAT PREPARED BY BENCHMARK ENGINEERING, INC. ENTITLED "THE WOODS OF WELLINGTON LOTS 1-24 AND NON-BUILDABLE PRESERVATION PARCELS "A" THRU "O", AND RECORDED AMONG THE LAND RECORDS OF HOWARD COUNTY AS PLAT No. 15288

David M. Harris
 DAVID M. HARRIS
 REGISTERED PROFESSIONAL LAND SURVEYOR
 MD REG. No. 10978
 FOR BENCHMARK ENGINEERING, INC.
 MD REG. No. 351

RECORD PLAT No. 15288
 FEMA FIRM No. 240044 0014 B
 ZONE: C
 DATED: 12/04/88

BENCHMARK
ENGINEERING, INC.

4400 BALTIMORE NATIONAL PIKE • SUITE 018
 ELICOTT CITY, MARYLAND 21043
 phone: 410-442-8105 & fax: 410-442-8864
 web: lharrish@benchmark.com



FOUNDATION DETAIL

SCALE: 1" = 30'

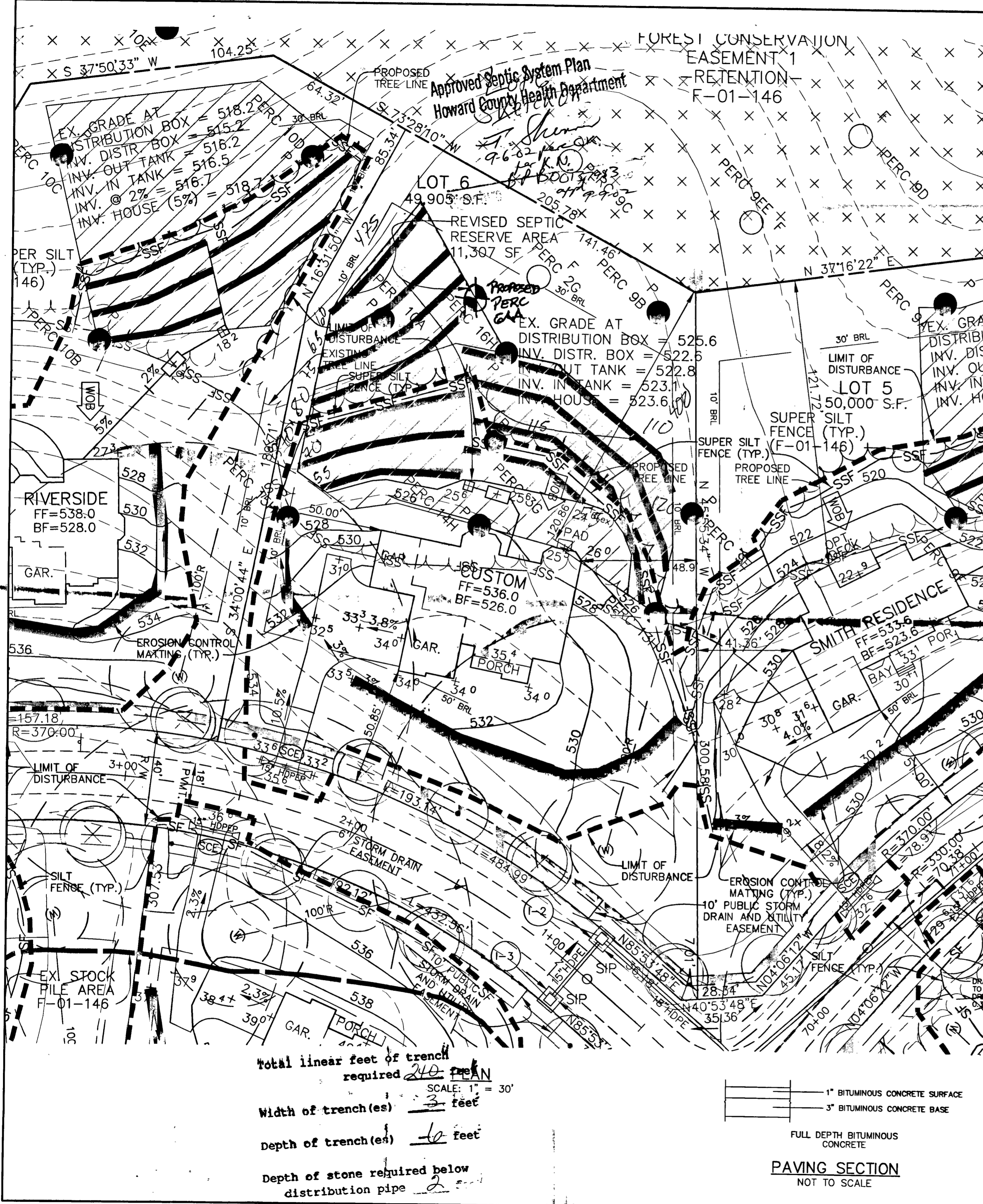
WALL CHECK
THE WOODS OF WELLINGTON
LOTS 1-24
LOT No. 6

3200 HUNTERS WORTH

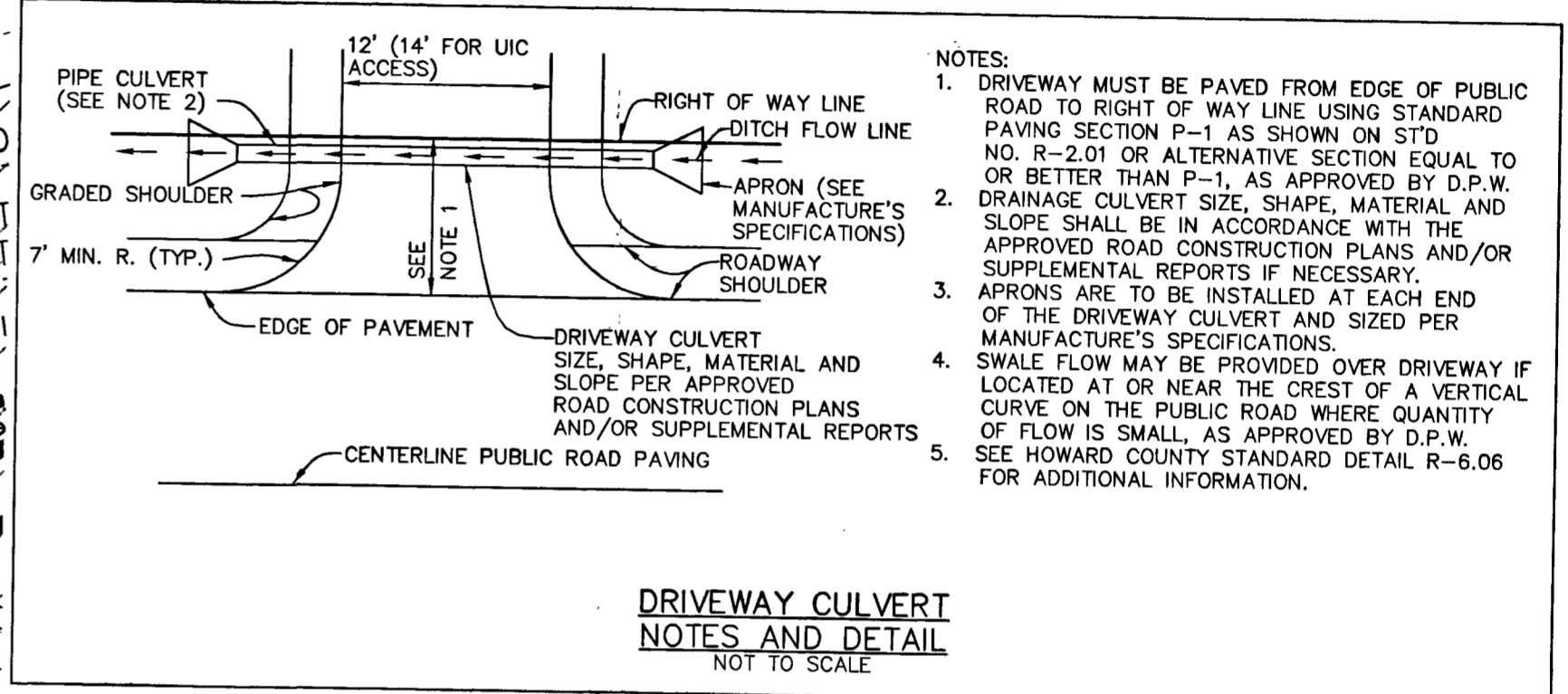
4TH ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND

SCALE: 1" = 50' DATE: 10/14/02

BENCHMARK ENGINEERING 2:13PM 2002-10-22



- NOTES:**
1. THE LOT SHOWN HEREON WAS RECORDED BY PLAT NUMBER 15288, REFER TO THE RECORD PLAT FOR LOT DIMENSIONS, LOT AREAS, ALL EASEMENTS AND BUILDING RESTRICTIONS.
 2. THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF 10,000 SQUARE FEET AS REQUIRED BY THE STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWERAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA IS RESTRICTED UNTIL PUBLIC SEWER IS AVAILABLE. THIS EASEMENT SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENT INTO THE PRIVATE SEWERAGE EASEMENT. RECORDATION OF A MODIFIED SEWERAGE EASEMENT PLAT SHALL NOT BE NECESSARY.
 3. SEDIMENT AND EROSION CONTROLS WERE APPROVED BY HOWARD SOIL CONSERVATION DISTRICT UNDER GP-02-48 AND MODIFIED FOR THIS SPECIFIC HOUSE.
 4. TOPOGRAPHY SHOWN HEREON IS TAKEN FROM THE APPROVED ROAD CONSTRUCTION PLANS. EXACT LENGTH OF SEPTIC TRENCHES ARE TO BE DETERMINED BY THE HEALTH DEPARTMENT AT THE TIME OF TRENCH LAYOUT AND INSPECTION.
 5. SPOIL FROM THE TRENCHING OF THE SEPTIC AREA IS TO BE PLACED ON THE UPHILL SIDE OF THE EXCAVATION FOR EACH INDIVIDUAL LOT.
 6. ALL SEDIMENT AND EROSION CONTROL FEATURES USED ON THIS SITE SHALL COMPLY WITH 1994 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL.
 7. ALL STORMWATER MANAGEMENT FEATURES USED ON THIS SITE MUST COMPLY WITH THE APPROVED ROAD CONSTRUCTION PLANS.
 8. ALL DRAINAGE AND STORMWATER MANAGEMENT FEATURES USED ON THIS SITE MUST COMPLY WITH THE APPROVED ROAD CONSTRUCTION PLANS (F-01-146).

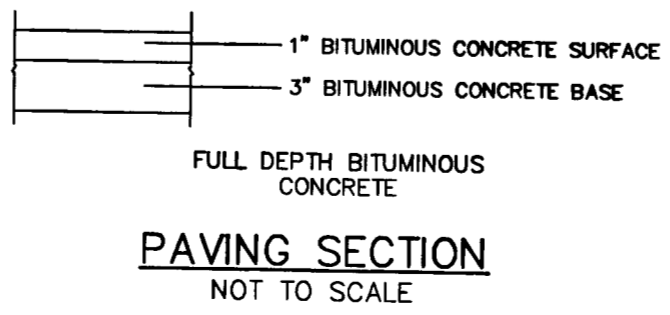


- NOTES:**
1. DRIVEWAY MUST BE PAVED FROM EDGE OF PUBLIC ROAD TO RIGHT OF WAY LINE USING STANDARD PAVING SECTION P-1 AS SHOWN ON STD. NO. R-2.01 OR ALTERNATIVE SECTION EQUAL TO OR BETTER THAN P-1, AS APPROVED BY D.P.W.
 2. DRAINAGE CULVERT SIZE, SHAPE, MATERIAL AND SLOPE SHALL BE IN ACCORDANCE WITH THE APPROVED ROAD CONSTRUCTION PLANS AND/OR SUPPLEMENTAL REPORTS IF NECESSARY.
 3. APRONS ARE TO BE INSTALLED AT EACH END OF THE DRIVEWAY CULVERT AND SIZED PER MANUFACTURE'S SPECIFICATIONS.
 4. SWALE FLOW MAY BE PROVIDED OVER DRIVEWAY IF LOCATED AT OR NEAR THE CREST OF A VERTICAL CURVE ON THE PUBLIC ROAD WHERE QUANTITY OF FLOW IS SMALL, AS APPROVED BY D.P.W. SEE HOWARD COUNTY STANDARD DETAIL R-6.06 FOR ADDITIONAL INFORMATION.

- LEGEND**
- LIMIT OF DISTURBANCE
 - EX. SILT FENCE
 - PROP. SILT FENCE
 - EX. SUPER SILT FENCE
 - PROP. SUPER SILT FENCE
 - EX. EARTH DIKE
 - PROP. EARTH DIKE
 - STABILIZED CONSTRUCTION ENTRANCE
 - EXISTING CONTOUR
 - PROPOSED CONTOUR
 - EROSION CONTROL MATTING
 - Passing Perc Test
 - Failing Perc Test
 - PROPOSED TEST
- SF
 SF
 SSF
 SSF
 SCE
 612
 P PERC 16H
 FO PERC 2G
 PERC 6AA

total linear feet of trench required 210 feet
 Width of trench(es) 3 feet
 Depth of trench(es) 10 feet
 Depth of stone required below distribution pipe 2 feet

SCALE: 1" = 30'



NO.	DATE	REVISION

BENCHMARK
 ENGINEERS • LAND SURVEYORS • PLANNERS
ENGINEERING, INC.
 8480 BALTIMORE NATIONAL PIKE • SUITE 418
 ELLICOTT CITY, MARYLAND 21043
 PHONE: 410-465-8105 • FAX: 410-465-8644
 EMAIL: benchmark@cats.com

OWNER/BUILDER: JAMES H. SELFRIDGE BUILDERS 14045 GARED DRIVE GLENWOOD, MD 21738 PHONE: 410-531-8930 FAX: 410-531-8939	PROJECT: THE WOODS OF WELLINGTON LOT 6
LOCATION: 3200 HUNTERS WORTH GLENWOOD, MD 21738 TAX MAP 14 - BLOCK 20 - P/O PARCEL 246 4th ELECTION DISTRICT OF HOWARD COUNTY, MARYLAND	TITLE: PERC TESTING PLAN
HOUSE TYPE: CUSTOM HOUSE TYPE	DATE: AUGUST, 2002
DESIGN: JMC	DRAFT: JMC
SCALE: 1" = 30'	PROJECT NO. 1430 DRAWING 1 OF 1

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: Pipe Rite Plumbing Telephone #: 410-788-3080
Address: 405 Lafayette Ave
Baltimore MD 21228

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer
License # and name of individual responsible for the field installation: License # 2214
Name (Print): George Baker

*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: BUCH Telephone #: _____
Subdivision: Woods of Wellington Lot #: 6 Well Tag #: HO-94-2940
Site Address: 3200 HERTFORDSWORTH WAY
Colanwood, MD 21238

Submersible Pump Data **Pitless Adapter** **Well Cap and Electric Conduit**
Make: Muscoli Make: Macterson Two piece watertight cap:
Model #: 25F92-5 Model #: 2102 Screened, vented well cap:
Pump Capacity 5 GPM Depth: 18 (36" min) Cap secured to casing:
Well Yield: 6.5 GPM NSF approved: Conduit min 1 1/2" B.G.:
Depth of well encountered at time of pump installation 24.5 (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 arrestor or Cable guard) are required - Must circle one
Safety rope, if used, attached to inside of well casing with eye bolt

Piping to house **House Connection**
Type: Pitless PVC sleeved to undisturbed soil at wall penetration:
PSI: 160 (160 psi min) Approximate length of sleeve: 5
Depth of supply line: 1/2 (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: George Baker date: 4-18-03

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

Date Insp. Requested: 3/14/03 Date Insp. Approved: 3/14/03 (SO) 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

C1 0260 SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE TYPE

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED. OK COUNTY NUMBER 13 SRH 4/24/01

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

DATE WELL COMPLETED MM DD YY 4 10 01 15 20

Depth of Well 245 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 10-94-2940

OWNER SDC STREET OR RFD Hunterworth TOWN Glenwood SUBDIVISION Wellington, Sect. III SECTION LOT 6

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entries for Sand, Yellow clay, Sand, and Gray Mica Rock.

GROUTING RECORD: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL (CM), NO. OF BAGS 22, NO. OF POUNDS 2068, GALLONS OF WATER 132, DEPTH OF GROUT SEAL 83 ft.

CASING RECORD: MAIN CASING TYPE ST, Nominal diameter 6, Total depth of main casing 91.

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

SCREEN RECORD: screen type or open hole (ST), BRONZE (BR), PLASTIC (PL), HO (HOLE), OT (OTHER).

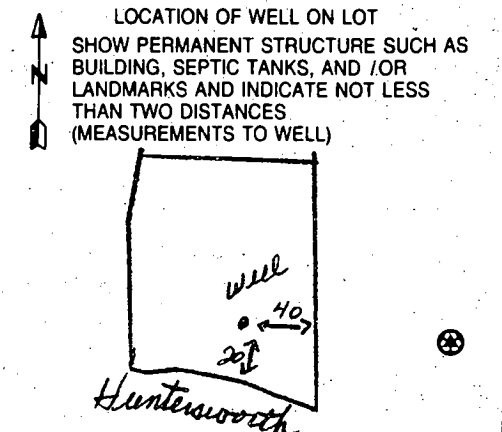
NUMBER OF UNSUCCESSFUL WELLS: 0. WELL HYDROFRACTURED (Y). A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED. DRILLERS LIC. NO. M SDO 24. DRILLERS SIGNATURE. LIC. NO. M D. SITE SUPERVISOR.

DEPTH (nearest ft.) 245. Slot size 1, 2, 3. DIAMETER OF SCREEN (NEAREST INCH) 58 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. TELESCOPE CASING LOG INDICATOR OTHER DATA.

PUMPING TEST: HOURS PUMPED 3, PUMPING RATE 6.5 gal. per min., METHOD USED TO MEASURE PUMPING RATE Bucket, WATER LEVEL 48 ft. BEFORE PUMPING, 181 ft. WHEN PUMPING. 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 2 (nearest foot).



B 1 03759

SEQUENCE NO. (MDE USE ONLY)

STATE-OF MARYLAND PERMIT TO DRILL WELL

STATE PERMIT NUMBER

10-94-2940 fill in this form completely

W51470 Please print or type

Date Received (APA)

12/2/00

OWNER INFORMATION

Security Development Group P.O. Box 417 Ellicott City Md 21041

LOCATION OF WELL

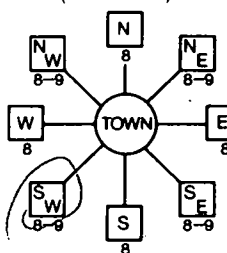
Howard Wellington Glenwood

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

DRILLER INFORMATION

Joseph L Mayne M S D O 24 Joseph L Mayne Well Drilling 5512 Ridge Rd Mt Airy 21771

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Hunterswood NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 2.5 FT

WELL INFORMATION

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

TAX MAP: BLK: PARCEL

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- Domestic Potable Supply & Residential Irrigation (circled) 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 13 COUNTY NAME COUNTY NO. STATE SIGNATURE DATE ISSUED 01/24/01 CO SIGNATURE EXP DATE NORTH GRID 528 000 EAST GRID 0786 000

APPROXIMATE DEPTH OF WELL 260 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH

METHOD OF DRILLING (circle one)

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

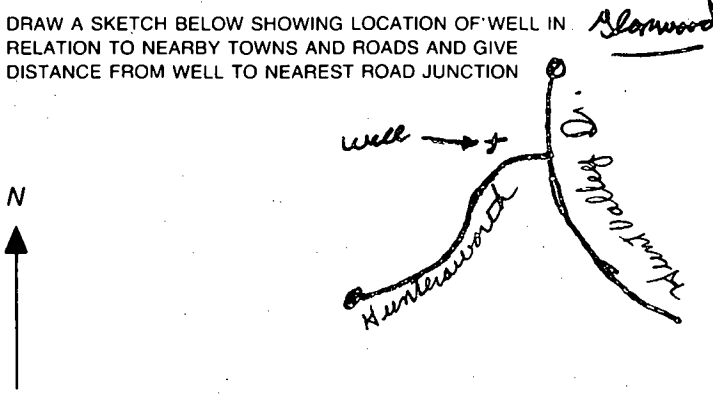
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

- 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 deepen an existing well

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

APPROX. PERMIT NUMBER 10 000 GAP 01301 PERMIT No. 10-94-2940

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. well 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE E 786 N 520



SPECIAL CONDITIONS

NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

LOT C

393

FOREST CONSERVATION EASEMENT 1 RETENTION

Handwritten note: All of the wooded area of this parcel is to be preserved.

LOT A
50,000 S.F.

LOT 6
49,805 S.F.

LOT 5
50,000 S.F.

LOT 3
50,000 S.F.

LOT 2
50,000 S.F.

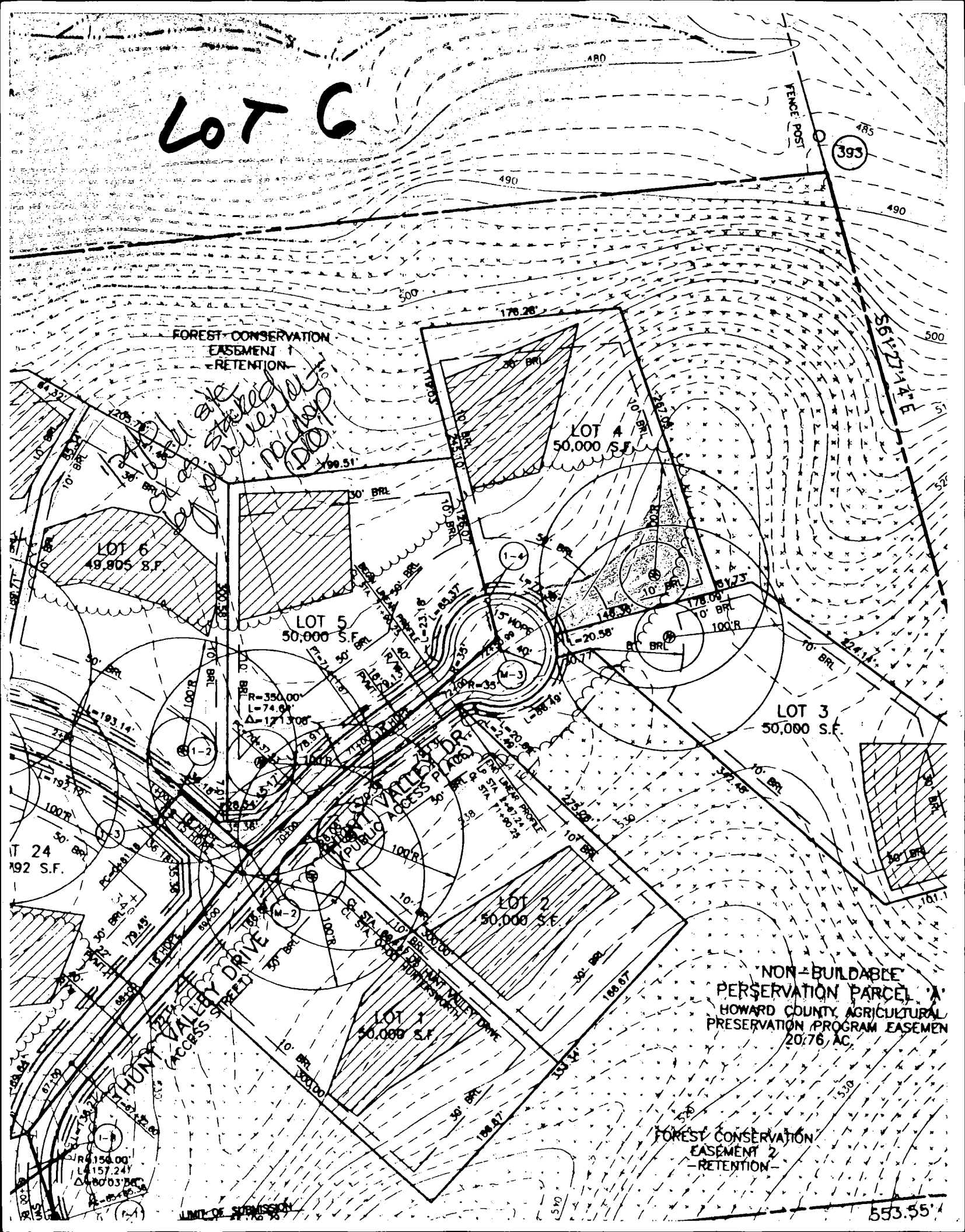
LOT 1
50,000 S.F.

NON-BUILDABLE PRESERVATION PARCEL 'A'
HOWARD COUNTY AGRICULTURAL PRESERVATION PROGRAM EASEMENT
20/76 AC

FOREST CONSERVATION EASEMENT 2 RETENTION

LIMIT OF SUBMISSION

553.55'



APPLICATION

PERCOLATION TESTING

A 517406

P _____

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

DISTRICT _____

DATE 8/9/02

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 H. Selfridge Builders

ADDRESS 14045 Gared Dr., Glenwood MD 21738 PHONE 410-531-8930

AGENT OR PROSPECTIVE BUYER Nancy Boone

ADDRESS Same PHONE 410-531-8930 X. 24

PROPERTY LOCATION:

SUBDIVISION Woods of Wellington LOT NO. 6

ROAD AND DESCRIPTION 3200 Hundersworth
Glenwood, MD 21738

TAX MAP 14 PARCEL # 246

SIZE OF LOT 1.14 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.

Nancy M Boone
(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

9/6/02
9-00

COUNTY #

SOIL PROFILE

GAA

0'

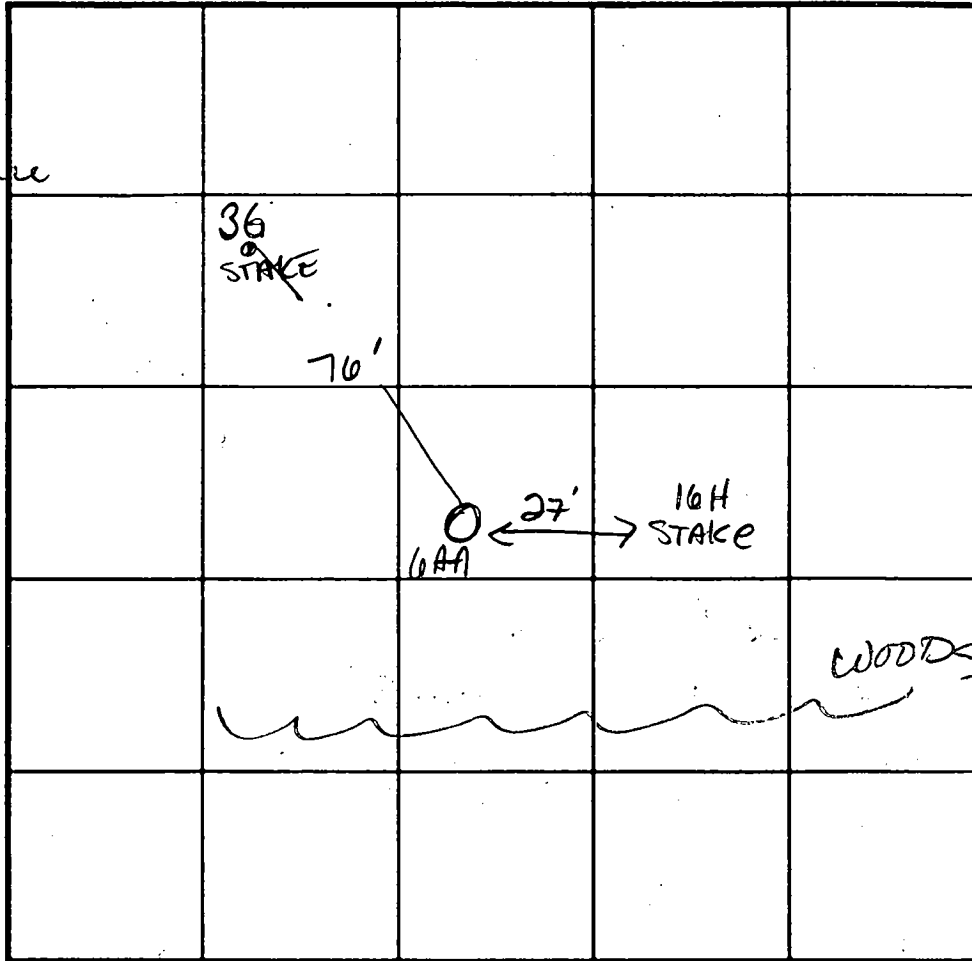
massive structure
 strong brn
 hvy loam
 Rv 10%
 4'

lt brn
 fine
 sand
 rock
 10-15%
 v. weak

bottom 4'

SOIL PROFILE

0'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

HUNTERS WORTH DR.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
9-5-09	GAA	4 1/2' / 14"	9:46	9:47:30	9:47:30	9:52	5 min
Additional soil analysis for adjusting house site							

REMARKS _____

TYPE OF SOIL _____

TESTED BY Kace ALSO PRESENT _____

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

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

APPLICATION

PERCOLATION TESTING

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

APRIL 27-28
MAY 13-14
12-

A _____

P _____

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 Mike Curvey

ADDRESS P.O. Box 417 EC, Md 2104 PHONE 410-465-4244

AGENT OR PROSPECTIVE BUYER ~~Hunt Valley~~ SDC Group

ADDRESS _____ PHONE 410-443-2509931

PROPERTY LOCATION:

DIVISION Wellington 3 LOT NO. Lot-1 thru 20 (12) (3)

ROAD AND DESCRIPTION End of Hunt Valley Dr. Glenwood Md

TAX MAP 14 PARCEL # 746

SIZE OF LOT 1 acre 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. DM Carey DM
(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

10A

0' topsoil
 1' org brn cl Lm
 4' pale org tan si Lm
 25% rock frag

10D

0' topsoil
 1' org brn cl Lm
 4' pale org tan si Lm
 20% rock frag

10B

0' topsoil
 1' org red brn cl Lm
 4.5' pale org brn si Lm
 15%+ rock frag

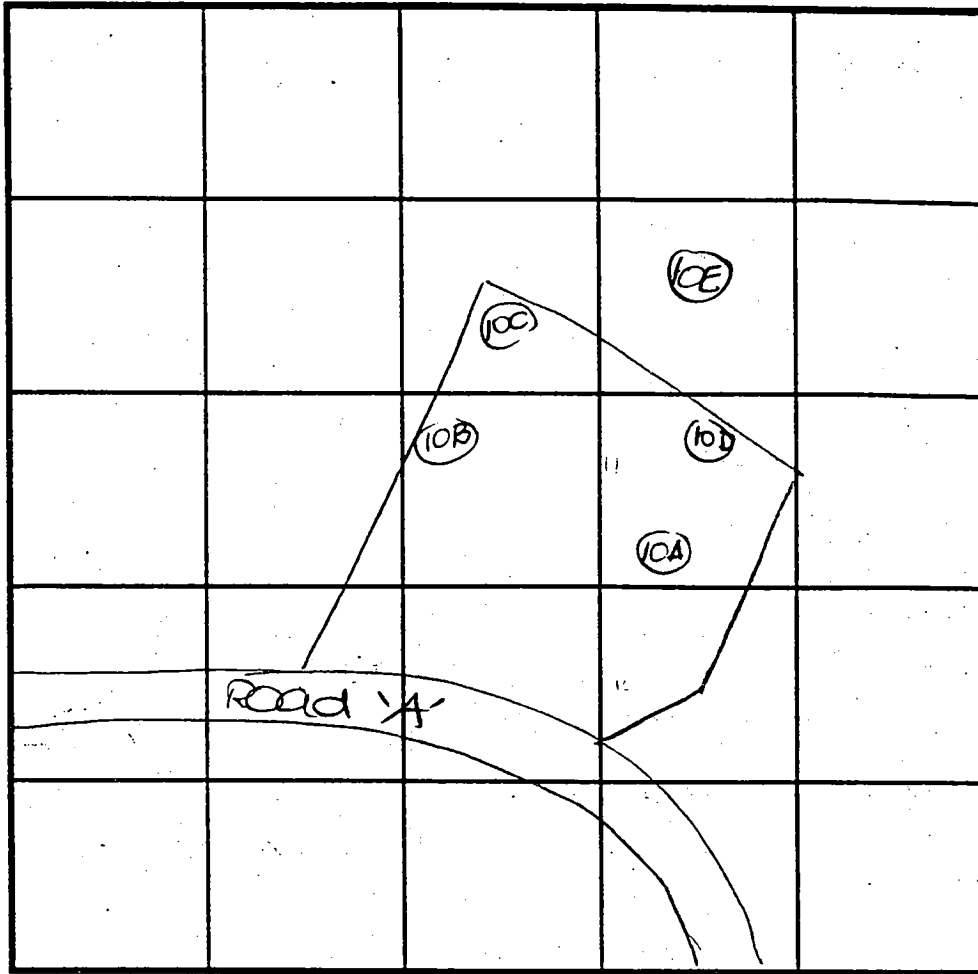
SOIL PROFILE

10C

0' topsoil
 1' org red brn cl Lm
 4' pale org tan si Lm
 15% rock (few lg boulders)

10E

0' topsoil
 1' org brn cl Lm
 4' beige si Lm
 10-15% rock



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4-28-99	10A	4.5'S	12:22	12:27	12:27	12:32	5
		12.5'D	Visual	- see	profile		OK
	10D	5.0'S	12:35	12:36	12:36	12:38	2
		12.5'D	Visual	- see	profile		OK
	10B	5.0'S	12:41	12:45	12:45	12:50	5
		12.5'D	Visual	- see	profile		OK
	10C	5.0'S	12:47	12:52	12:52	12:57	7
		12.0'D	Visual	- see	profile		OK
	10E	4.0'S	11:30	11:31.3	11:31.3	11:34.3	3
		12.5'D	Visual	- see	profile		OK

REMARKS _____

TYPE OF SOIL _____

TESTED BY D. See

ALSO PRESENT Hatfield's

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____

TRENCH WIDTH _____

INLET DEPTH _____

MAXIMUM BOTTOM DEPTH _____

SQ. FT./BEDROOM _____

LOT 6

COUNTY # _____

SOIL PROFILE

2G

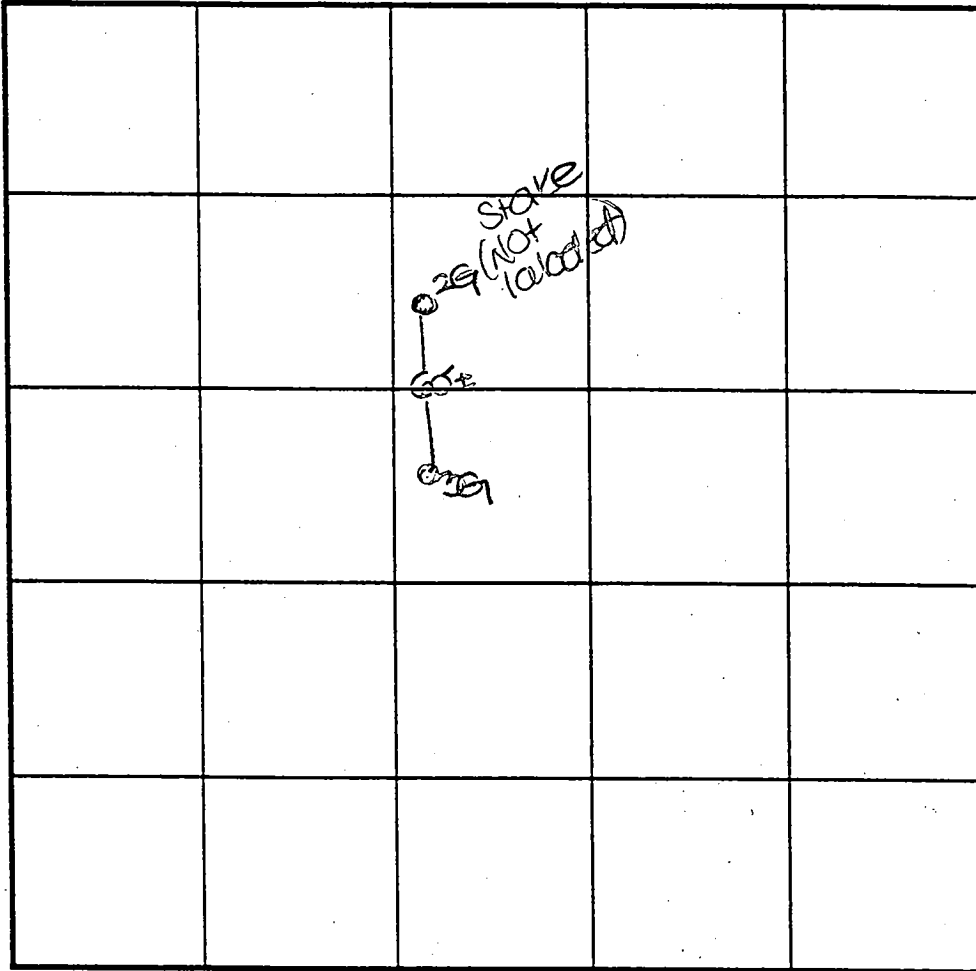
0' topsoil
 1' org brn
 4' cl lm
 beige
 sil m
 w/ hard
 shale
 55' >50%
 hard
 shale
 ↓
 35'

3G

0' topsoil
 1' red brn
 4' cl lm
 pale
 org beige
 sil m
 25%+
 hard
 shale
 14'

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	
9-27-99	2G	8.5'D	REFUSED - SEE profile				FAIL
	3G	5.0'S	3:28	3:29	3:29	3:32	3
		14.0'D	visual - see profile				OK

REMARKS holes tested as stated

TYPE OF SOIL _____

TESTED BY D. See ALSO PRESENT Hartfield's

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

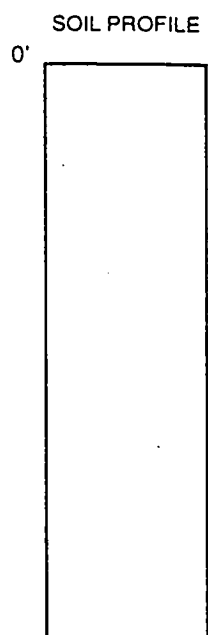
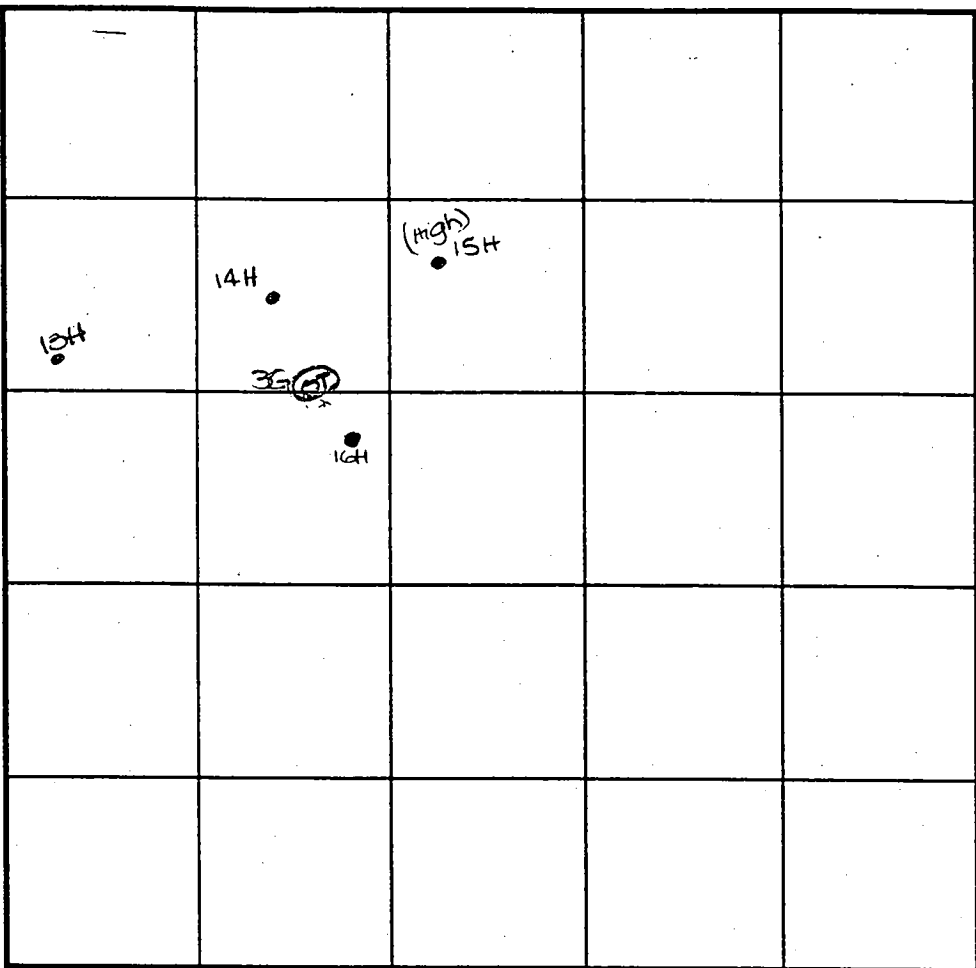
INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____

LOT 6

COUNTY # _____
 SOIL PROFILE
 16H
 0' topsoil
 3.9' org red
 4' brn
 cl Lm
 pale
 org
 beige
 si Lm
 25%+
 hard
 rock
 11.5'

15H
 0' topsoil
 1' org brn
 cl Lm
 4' tan
 si Lm
 30%
 rock
 frag
 9' 20%
 10' rock
 path

14H/13H
 0' topsoil
 1' org brn
 cl Lm
 4' pale
 org
 beige
 si Lm
 15%+
 hard
 rock
 12'



* (X) = old test hole

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11-19-99	16H ✓	4.5' S	10:47	10:48 ₃	10:48 ₂	10:51	3
		11.5' D	Visual	- see	profile		OK
	15H ✓	4.0' S	10:56	11:03	11:03	11:11	8
		10.0' D	Visual	- see	profile		OK
	14H ✓	4.5' S	11:15	11:17	11:17	11:21	4
		12.0' D	Visual	- See	profile		OK
	13H ✓	4.5' S	11:22	11:26	11:26	11:34	8
		12.5' D	Visual	- see	profile		OK

REMARKS roles tested as staked

TYPE OF SOIL _____

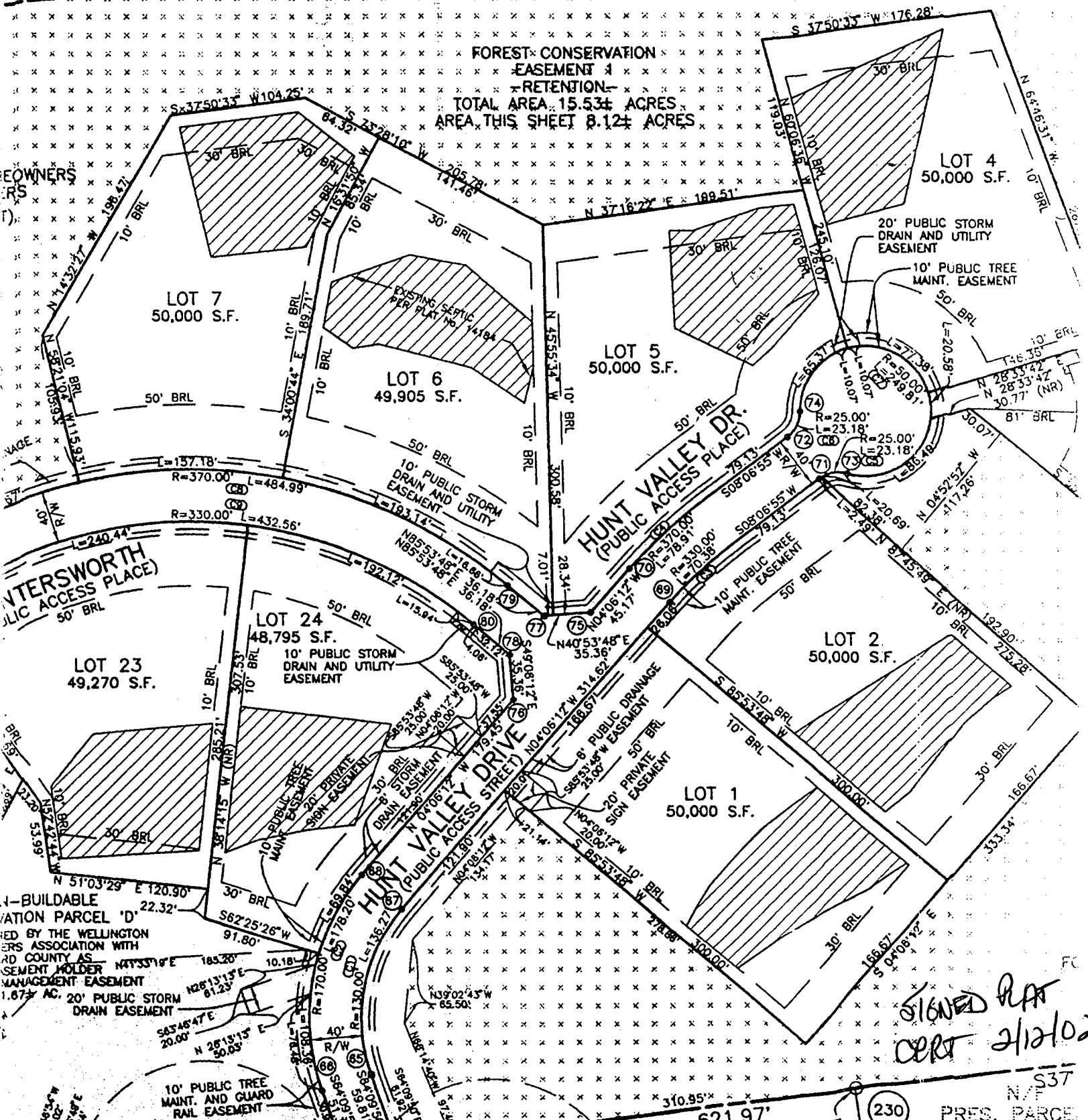
TESTED BY DKS ALSO PRESENT Hatfield's

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 6 TRENCH WIDTH 3

INLET DEPTH 4 MAXIMUM BOTTOM DEPTH 6 SQ. FT./BEDROOM 180

1738.38'

FOREST CONSERVATION
EASEMENT
RETENTION
TOTAL AREA 15.53± ACRES
AREA THIS SHEET 8.12± ACRES



OWNERS
RS

LOT 7
50,000 S.F.

LOT 6
49,905 S.F.

LOT 5
50,000 S.F.

LOT 4
50,000 S.F.

LOT 23
49,270 S.F.

LOT 24
48,795 S.F.

LOT 2
50,000 S.F.

LOT 1
50,000 S.F.

BUILDBLE
PORTION PARCEL 'D'
DEDICATED BY THE WELLINGTON
ERS ASSOCIATION WITH
RD COUNTY AS
EMENT HOLDER
MANAGEMENT EASEMENT
1.87± AC. 20' PUBLIC STORM
DRAIN EASEMENT

SIGNED PLAT
CERT 2/12/02

230

PRES. PARCE

S37
N/V



RECEIVED

JUL 31 2002

HOWARD COUNTY HEALTH DEPT.
BUREAU OF ENVIRONMENTAL HEALTH

1 August, 2002

Mr. Mark Rifkin
Howard County Health Department
Ellicott City, MD 21042

RE: Septic Field - Woods of Wellington, Lot 6 (Well. III)

Dear Mr. Rifkin:

We are beginning the process of applying for a building permit to build a residential house on the above-reference lot in Woods of Wellington and realize the proposed house will not fit on the lot as the current septic field is located. Attached is a proposal for abandoning and relocating the abandoned area per the approved perc plan, that I would like to get your professional opinion on. I have included a copy of the lot in question from the approved perc plan dated 02/23/00.

Could you take a quick look at this proposal (with a scaled footprint of the proposed house and let me know if this is acceptable. I will then have our Engineer plot the actual footprint with the proposed relocation of the septic for submittal to your Department along with the building permit application.

If you could give me a call as soon as possible at (410) 531-8930, ext. 24, I would greatly appreciate it.

Thank you in advance for your assistance in this matter.

Sincerely yours,

Nancy M. Boone
Project Manager

8/5/02 REVIEW: (MR)
POTENTIALLY OK, BUT
NEED PERCS TO FIND
EDGE OF ROCK @
Attachment
REAR OF EX. SDA;
NEED PLAN, FEE, APPL.

8/6/02 MTG. w/ Nancy Boone
(MR) Best to perc for
red line as shown,
by following Rx from
failed test hole 2G

F-01-146

PROPOSED
RECEIVED
WOODS OF WELLINGTON

EX. GRADE AT
DISTRIBUTION BOX = 518.2
INV. DISTR. BOX = 515.2
INV. OUT TANK = 516.2
INV. IN TANK = 516.5
INV. HOUSE (2%) = 516.7
INV. HOUSE (5%) = 518.2

EX. SUPER SILT
FENCE (TYP.)
(F-01-146)

EX. GRADE AT
DISTRIBUTION BOX = 526.2
DISTR. BOX = 523.2
OUT TANK = 523.4
INV. IN TANK = 523.7
INV. HOUSE = 524.3
EJECTOR PUMP REQ.

LOT 7
50,000 S.F.

LOT 5
50,000 S.F.
SUPER SILT
FENCE (TYP.)
(F-01-146)
PROPOSED
TREE LINE

PROPOSED
FIBERBOARD
REVERSE
FF=538.0
BF=528.0

EX. STOCK
PILE AREA
F-01-146

RECEIVED
HAWAIIAN
HERITAGE VIEW

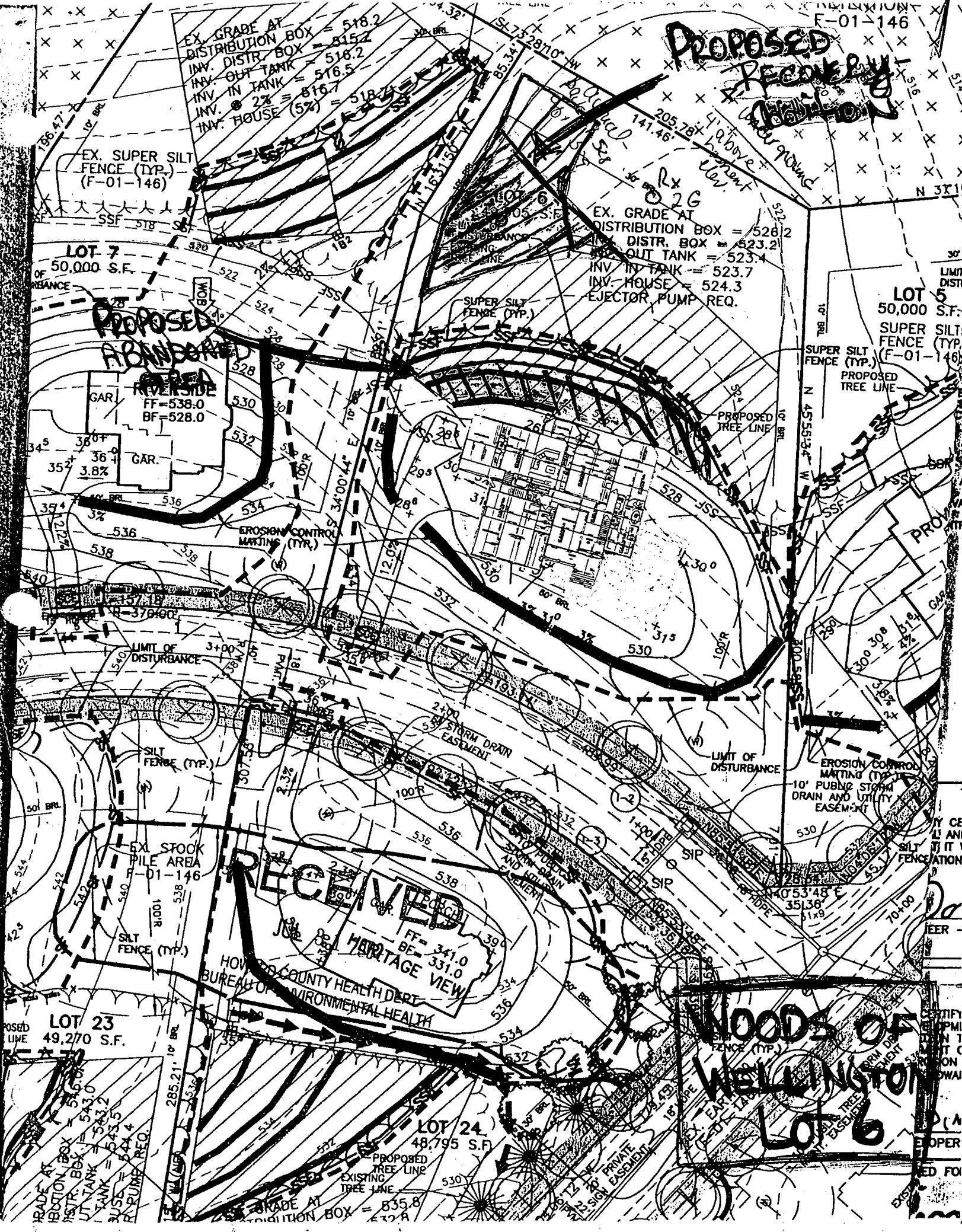
WOODS OF
WELLINGTON
LOT 6

LOT 23
49,270 S.F.

LOT 24
48,795 S.F.

EX. GRADE AT
DISTRIBUTION BOX = 516.5
DISTR. BOX = 513.0
OUT TANK = 513.2
INV. IN TANK = 513.5
INV. HOUSE = 514.4
EJECTOR PUMP REQ.

EX. GRADE AT
DISTRIBUTION BOX = 835.8



HONOLULU COUNTY HEALTH DEPT
BUREAU OF ENVIRONMENTAL HEALTH

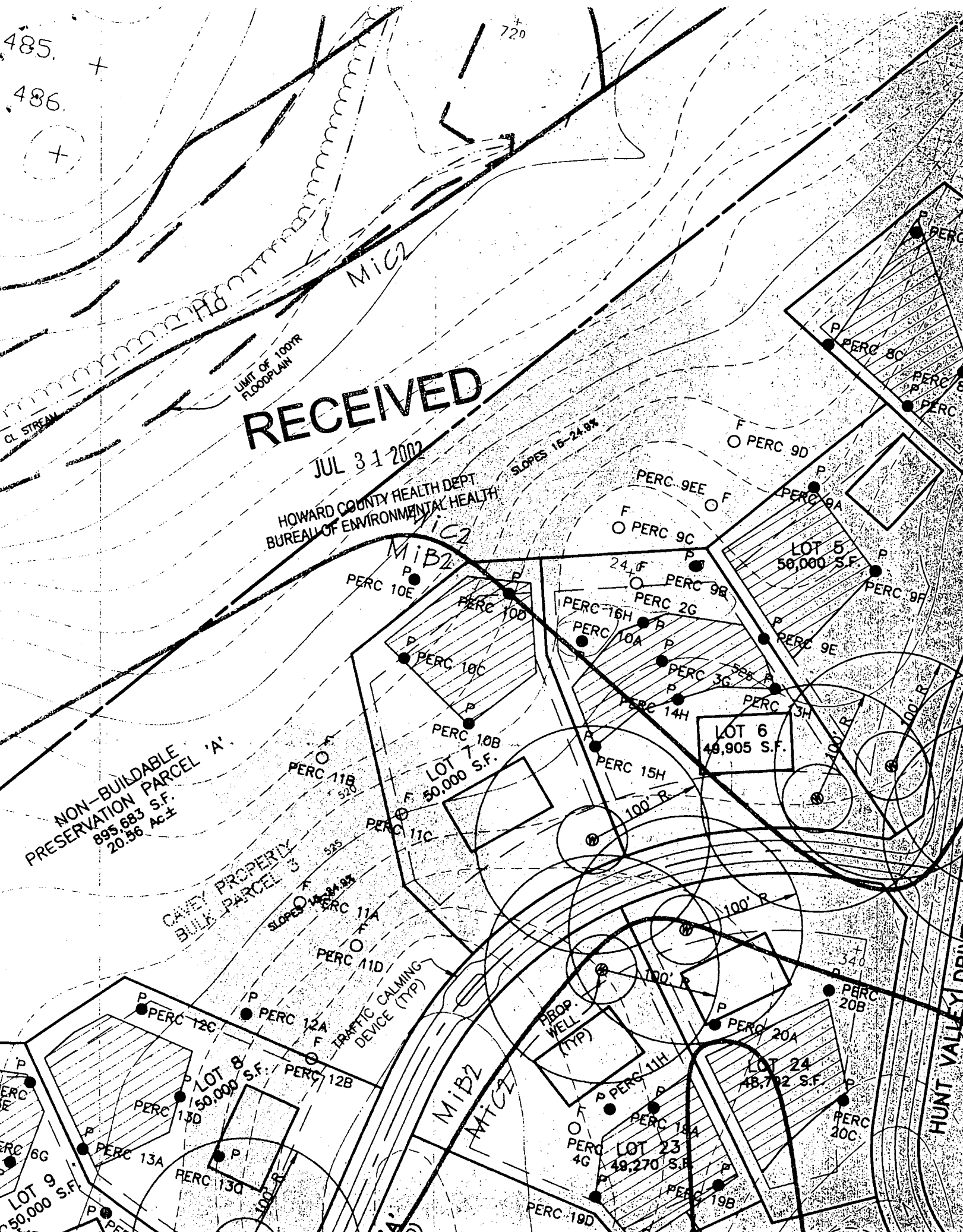
CERTIFY
EMPI
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485.
486.

720

RECEIVED
JUL 31 2002

HOWARD COUNTY HEALTH DEPT
BUREAU OF ENVIRONMENTAL HEALTH



NON-BUILDABLE
PRESERVATION PARCEL 'A'
895,883 S.F.
20.56 AC±

CAVEY PROPERTY
BULK PARCEL 'B'
525 S.F.

LOT 5
50,000 S.F.

LOT 7
50,000 S.F.

LOT 9
50,000 S.F.

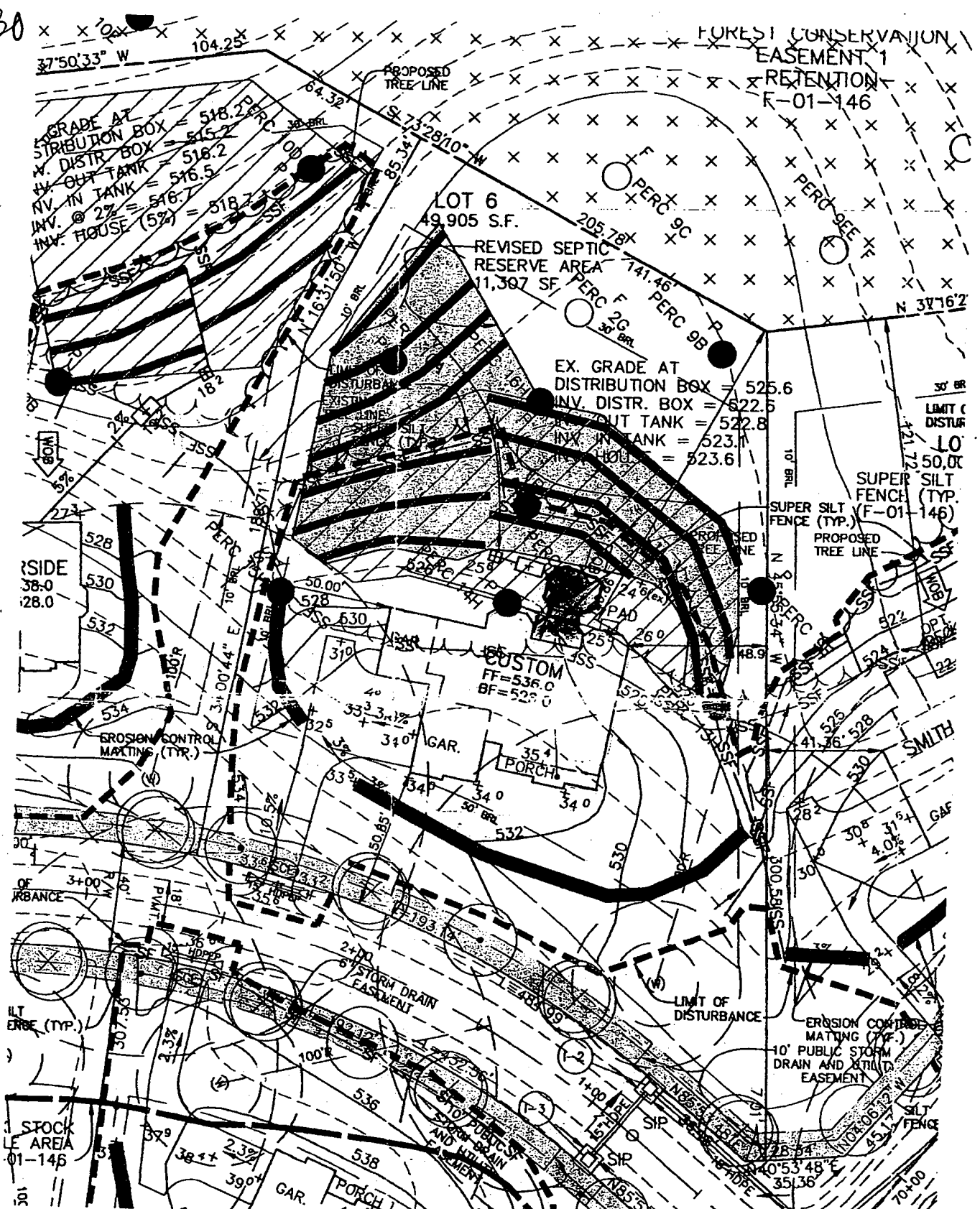
LOT 8
50,000 S.F.

LOT 23
49,270 S.F.

LOT 24
48,792 S.F.

HUNT VALLEY DRIVE

7/18/03 9:30
 Meet Contr.



7/16/03 WALK-THRU FOR DECK NOT APPROVED, CLEARANCE TO EX. S.T. NOT CONFIRMED, INSP REQ'D
 MR

7/18/03 FURTHER REVIEW INDICATES 8-10' SEPARATION MAINTAINED BETWEEN EX. S.T. AND PROP. DECK; BP SIGNED (MR)
 NO INSP

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

100143046

Building Address <u>3200 H. Adams North</u> <u>Ellicott City MD 21738</u> Suite/Apt. #: _____ SDP/WP/Petition #: _____ Census Tract _____ Subdivision _____ Section _____ Area _____ Lot _____ Tax Map _____ Parcel _____ Grid _____ Zoning _____ Map Coordinates _____ Lot size _____	Property Owner's Name <u>Michael Koch</u> Address <u>3200 H. Adams North</u> City <u>Ellicott City</u> State <u>MD</u> Zip Code <u>21738</u> Home Phone <u>240 375 6299</u> Work Phone _____ Applicant's Name & Mailing Address, (if other than stated hereon): _____ Phone _____ Fax _____
Existing Use <u>Single Family Detached</u> Proposed Use <u>Single Family Detached - Deck</u> Estimated Construction Cost \$ <u>300,000</u> Description of Work <u>2 new decks 12'6" x 10' = 10'6" x 10'6"</u>	Contractor Company <u>Milner Construction & Renovations, LLC</u> Contact Person <u>Ken Mauck</u> Address _____ City _____ State _____ Zip Code _____ License No. <u>0333</u> Phone <u>410 776 1100</u> Cell <u>443-277-3432</u> Fax <u>201 776 1136</u>
Occupant or Tenant <u>Michael Koch</u> Contact Name <u>Mike Koch</u> Address <u>3200 Adams SWING</u> City _____ State _____ Zip Code _____ Phone _____ Fax _____	Engineer or Architect Company _____ Contact Person _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____

RECEIVED
 BUREAU OF ENVIRONMENTAL HEALTH DEPT. 11

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

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE 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.

Kenneth D Mauck
 Applicant's Signature _____ Print Name _____
Ken Mauck
 Title/Company _____ Date 7-16-03

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