

LAYOUT 4/28/03 10 AM INSP 4 _____
 INSP 2 4/29/03 12 PM INSP 5 _____
 INSP 3 _____ INSP 6 _____

ISSUE DATE: 4/9/2003

APPROVAL DATE: 4/29/03

PERMIT

03-331989

P 518619

A 512694-W

INDEXED

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

Farm & Home Excavating, Inc IS PERMITTED TO INSTALL ALTER

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

SUBDIVISION: Brantwood 2/1 LOT NUMBER: 21

ADDRESS: 3025 Seneca Chief Trail PROPERTY OWNER: Nantucket Homes

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 2.0 feet below original grade. Bottom maximum depth 4.0 feet below original grade. Effective area begins at 2.0 feet below original grade. 2.0 feet of stone below distribution pipe.
LOCATION:	Place the distribution box as shown on the approved site plan. Run 4-60' trenches in both directions.
NOTES:	Contractor to verify 100' well radius prior to setting septic tank. Basement service by gravity is proposed.

PLANS APPROVED: Steven R. Krieg *OK 4/22/02 (SO)* DATE: 7/22/2002

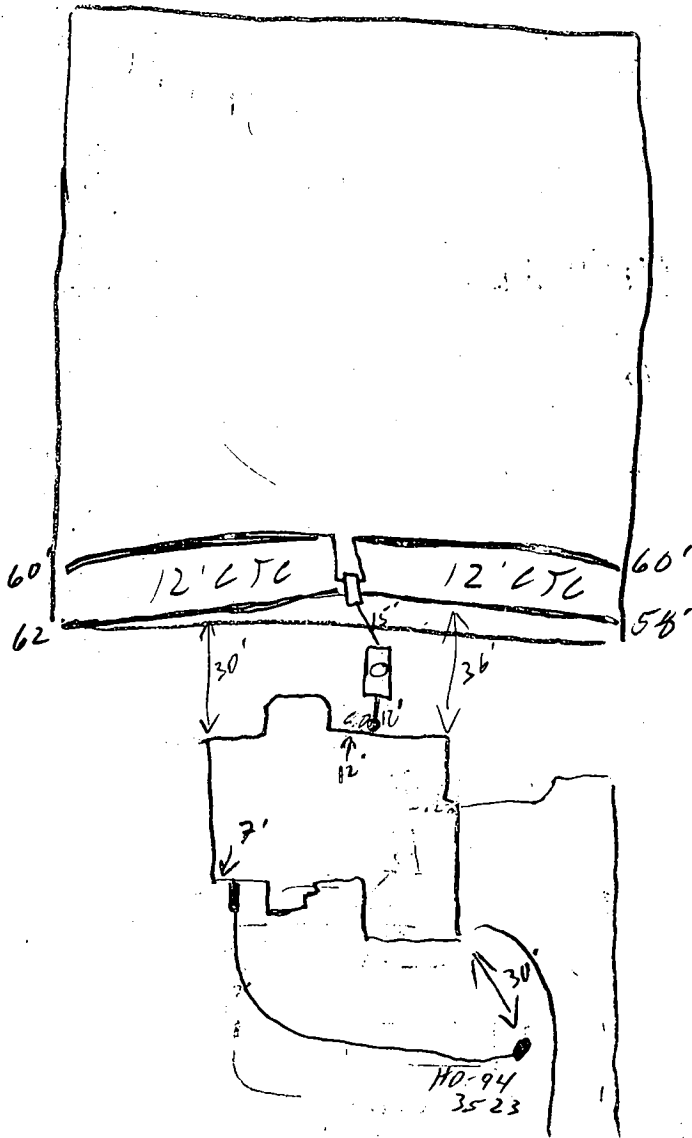
NOTES: PERMIT VOID AFTER 2 YEARS
 CONTRACTOR IS RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
 WATERTIGHT SEPTIC TANKS REQUIRED
 ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL UNLESS SPECIFICALLY AUTHORIZED
 MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS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

7/21/04 800149493 - DECK + POOLCA

AS12694W

NOT TO SCALE



SENECA CHIEF

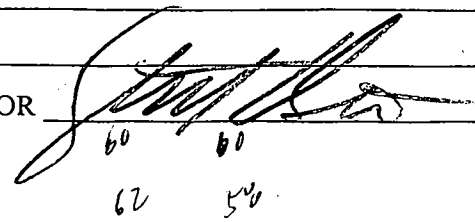
ROAD

TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
3'	2'	4'
NUMBER OF TRENCHES		4
TOTAL LENGTH		240'
ABSORPTION AREA		720 0
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	yes
CAPACITY	1250 GAL
SEAM LOC	TOP
TANK LID DEPTH	18"
BAFFLES	<input checked="" type="checkbox"/>
BAFFLE FILTER	<input type="checkbox"/>
MANHOLE LOC	Center
6" PORT LOC	front
WATERTIGHT TEST	<input type="checkbox"/>
SEPTIC TANK 2 LEVEL	
CAPACITY	_____ GAL
SEAM LOC	_____
TANK LID DEPTH	_____
BAFFLES	1/1
BAFFLE FILTER	<input type="checkbox"/>
MANHOLE LOC	_____
6" PORT LOC	_____
WATERTIGHT TEST	<input type="checkbox"/>

PRE-CONSTRUCTION 4/28/03 Topo OK. Staked SDA. TRENCHES ON RT 65', trenches on left 55'. No sunroom on house as shown on site plan. OK TO START INSTALLATION MAY NEED WELL HEAD PROTECTION (KN) OK TO COVER ALL WORK (SO)

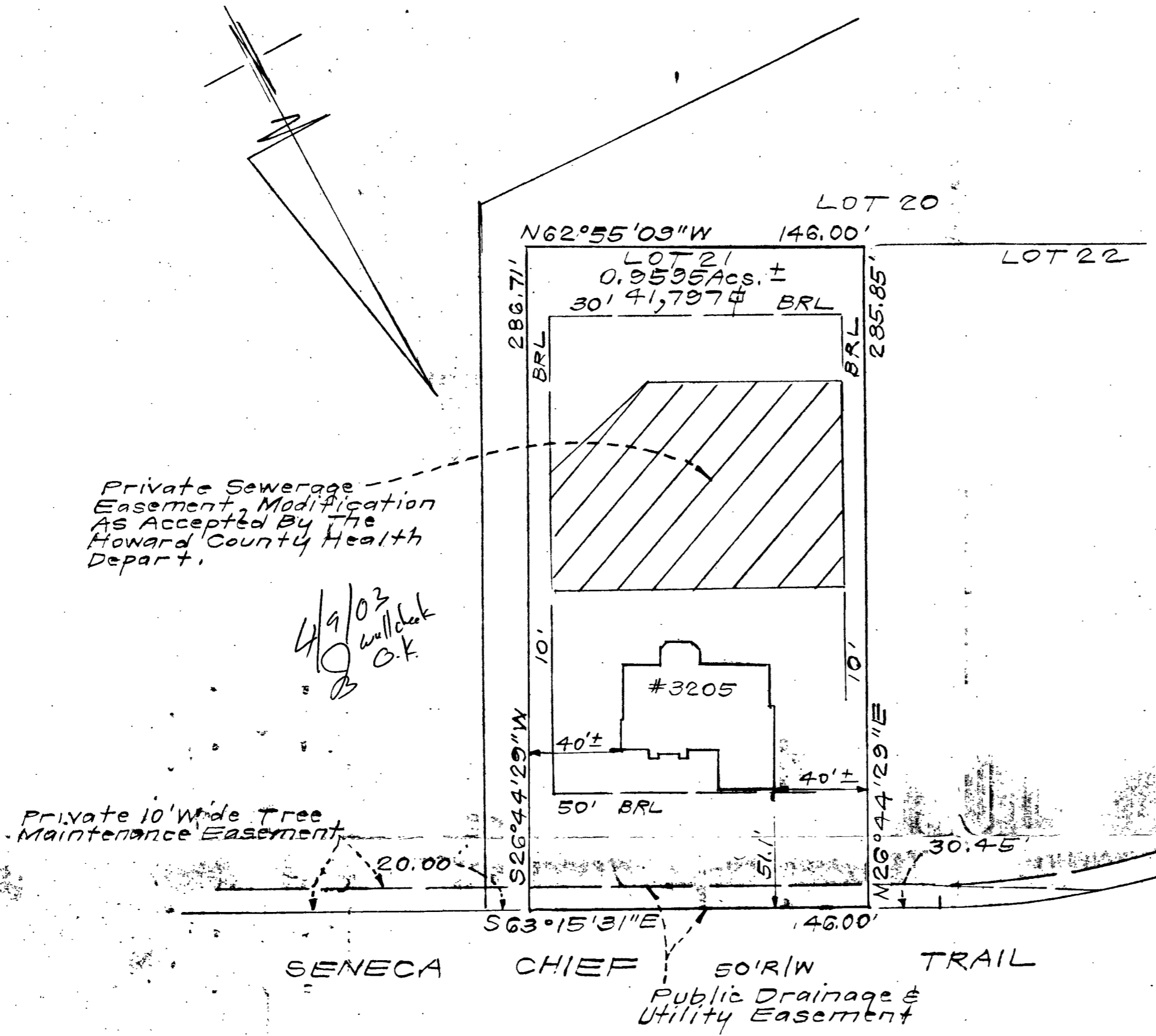
AND RETURNED
CONSTRUCTION

FINAL INSPECTOR 

DATE OF APPROVAL 4/29/03

NOTE: This lot appears to lie in an area classified as Zone C, area of minimal flooding, as shown on FIRM MAP of Howard County, Maryland, Community Panel Numbers 2400440016B & 22B, Panels 16 & 22 of 45, dated December 4, 1986.

Wall Check: 10-4-02
Top of Wall Elev.: 532.4

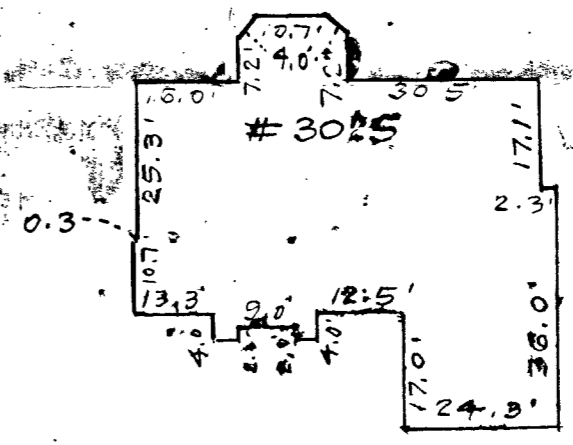


Private Sewerage Easement, Modification AS Accepted By The Howard County Health Depart.

4/9/03
wall check
O.K.

Private 10' Wide Tree Maintenance Easement

SENECA CHIEF 50'R/W TRAIL
Public Drainage & Utility Easement



SCALE: 1" = 30'

CONSUMER INFORMATION

1. This plat is of benefit to the consumer only insofar as it is required by a lender of a title insurance company or its agent in connection with contemplated transfer, financing or refinancing purposes;
2. This plat is not to be relied upon for the establishment or location of fences, garages, buildings or other existing or future structures;
3. This plat does not provide for the accurate identification of property boundary lines, but such identification may not be required for the transfer of title or for securing financing or refinancing.

SURVEYOR'S CERTIFICATE

I hereby certify that a field survey of this property has been made under my supervision for the purpose of locating the improvements shown hereon, and that they are located as shown.

10-11-02
DA

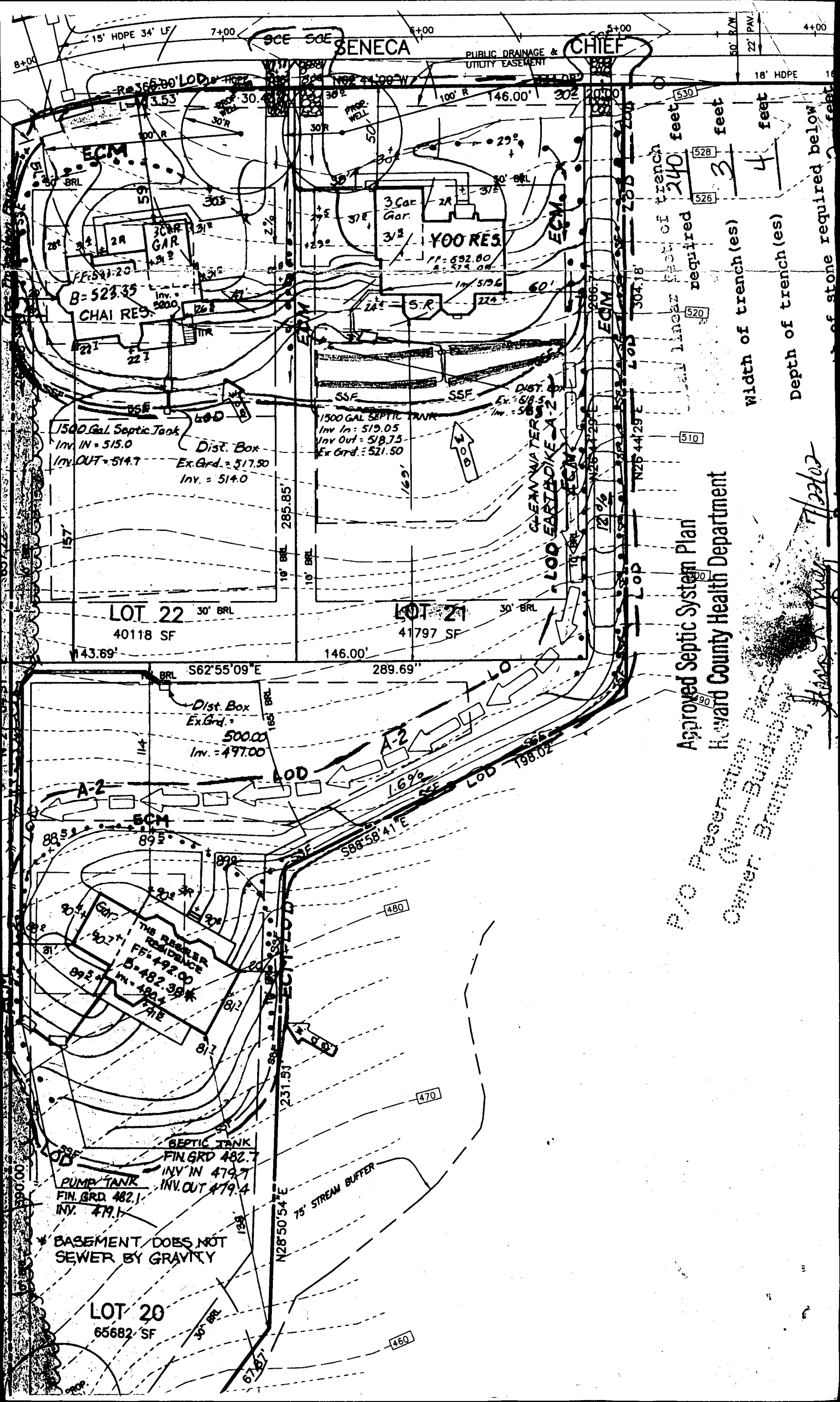
NOTES:

1. The ± setback distance accuracy = 1'

Plat Reference: PLAT NUMBER 14135

		CLARK • FINEFROCK & SACKETT, INC. ENGINEERS • PLANNERS • SURVEYORS 7135 MINSTREL WAY • COLUMBIA, MD 21045 • (410) 381-7500 BALT. • (301) 621-8100 WASH.			
		DESIGNED	LOCATION DRAWING 3025 SENECA CHIEF TRAIL LOT 21 BRANTWOOD SECTION TWO AREA ONE LOTS 1 THRU 30 AND PRESERVATION PARCELS 'E' & 'F' A RESUBDIVISION OF PART OF "BRANTWOOD-SECTION ONE" NON-BUILDABLE BULK PARCEL "E" THIRD ELECTION DISTRICT HOWARD COUNTY, MARYLAND	SCALE 1" = 50'	
DRAWN	KWC	CHECKED	PAS	DRAWING	
DATE	0-9-02	JOB NO.		FILE NO.	99-089-0

Fam + Home
3025 Seneca Chief



width of trench (es) 3 4
 Depth of trench (es) 240 feet
 Linear feet required

Approved Septic System Plan
 Howard County Health Department

P/O Preservation Products
 Owner: Brantwood, Anne A. May 7/22/02

* BASEMENT DOES NOT SEWER BY GRAVITY

LOT 20
 65682 SF

460

470

480

510

520

526

528

530

8+00 7+00 6+00 5+00 4+00
 15' HDPE 34' LF
 SENECA CHIEF
 PUBLIC DRAINAGE & UTILITY EASEMENT
 18' HDPE

SRK

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 B00137486
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Building Address 14540 Old Frederick Rd 3025
Seneca Chief Trail Ellicott City
 Suite/Apt. #: _____ SDP/WP/Petition #: 0136
 Census Tract 603000 Subdivision Briantwood
 Section 2 Area 1 Lot 21
 Tax Map 16 Parcel 436 Grid 21
 Zoning RC Map Coordinates 11A6 Lot size 41797

Property Owner's Name Nantuckelt Homes
 Address 13010 Old Frederick Rd #322
 City Sylusville State MD Zip Code 21784
 Home Phone 410/4485000 Work Phone _____
 Applicant's Name & Mailing Address, (if other than stated hereon):
 Phone _____ Fax 410/4485001

Existing Use Vacant lot
 Proposed Use Single Family Home
 Estimated Construction Cost \$ 325,000
 Description of Work 2 story 3 car garage, 3 car lift
wet bar kit in basement, 4 barm
3.5 BA, 1 fireplace, decl. 10/17

Contractor Company same
 Contact Person Amy Wheeler
 Address _____
 City _____ State _____ Zip Code _____
 License No. 322 Phone _____ Fax _____

Occupant or Tenant _____
 Contact Name _____
 Address _____
 City _____ State _____ Zip Code _____
 Phone _____ Fax _____

Engineer or Architect Company Clarke Mitchell
 Contact Person Brian Uchida
 Address 7135 Minstrel Way
 City Columbia State MD Zip Code 21145
 Phone 410-381-7500 Fax 410-

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

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 <input type="checkbox"/> # of Heads

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth Width 1st floor: <u>63'</u> <u>63'6"</u> 2nd floor: <u>36'</u> <u>65'6"</u> Basement: <u>63'4"</u> <u>65'6"</u> 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> 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: <u>concrete</u> Roof: <u>asph/flu</u> <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: N/A <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> 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 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 Phillip H Dorsey
Nantuckelt Homes
 Title/Company

Print Name Phillip H Dorsey
 Date 7/14/02

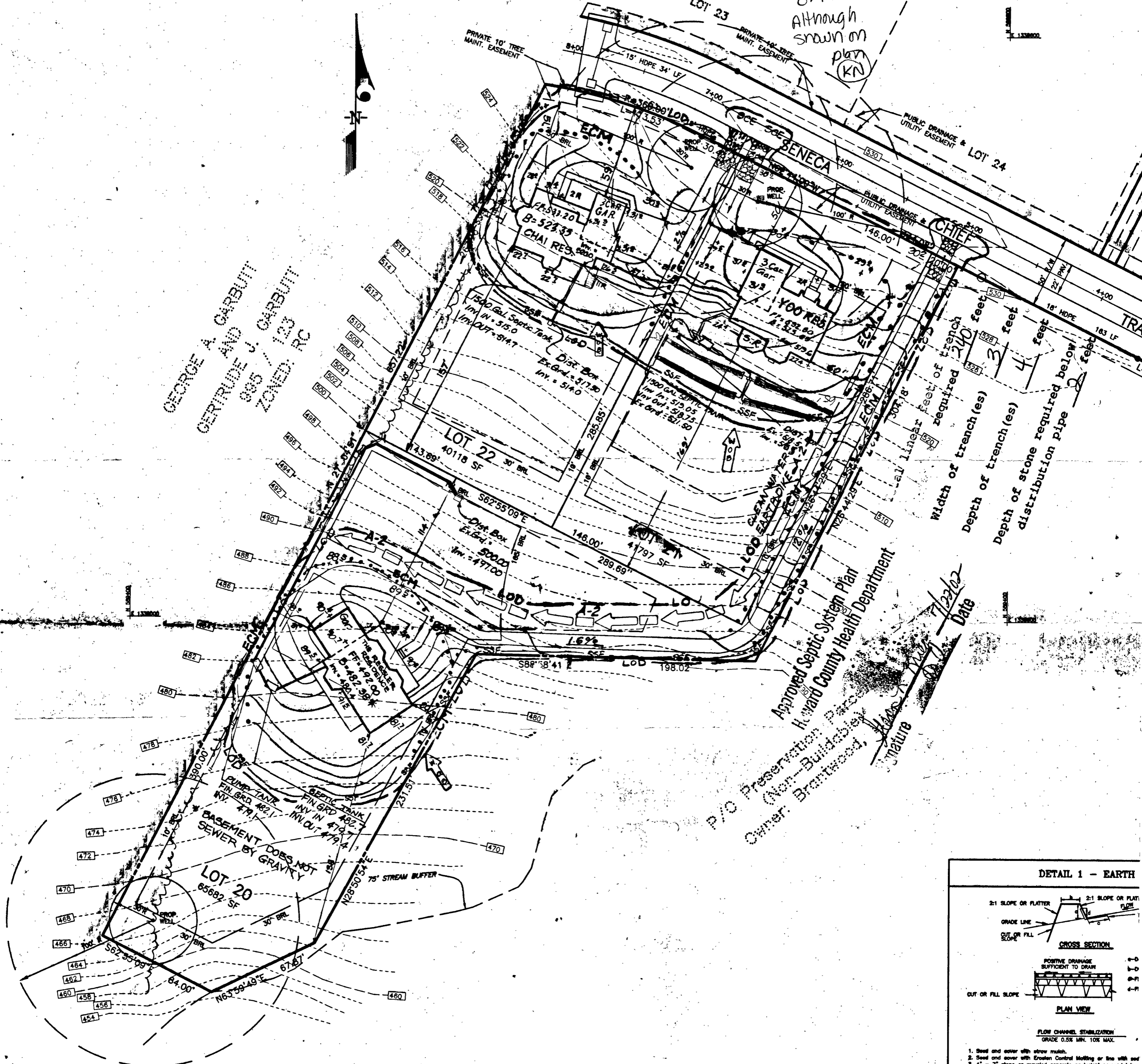
Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
 ** PLEASE WRITE NEATLY AND LEGIBLY. **
 - FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION
Land Development, DPZ State Highways Building Official Dev. Engineering, DPZ Health Fire Protection Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>	<u>7/22/02</u>	<u>Steven R. Krieg</u>	Front: _____ Rear: _____ Side: _____ Side St.: _____ All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/> Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/> Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/> Lot Coverage for New Town Zone _____ SDP/Red-line approval date _____

PROPERTY ID# 55550
 Filing fee \$ _____
 Permit fee \$ _____
 Excise tax \$ _____
 Sub-total paid \$ _____
 Add'l permit fee \$ _____
 TOTAL FEES \$ _____
 Balance due \$ _____
 Check # 3014
 Validation # 54306

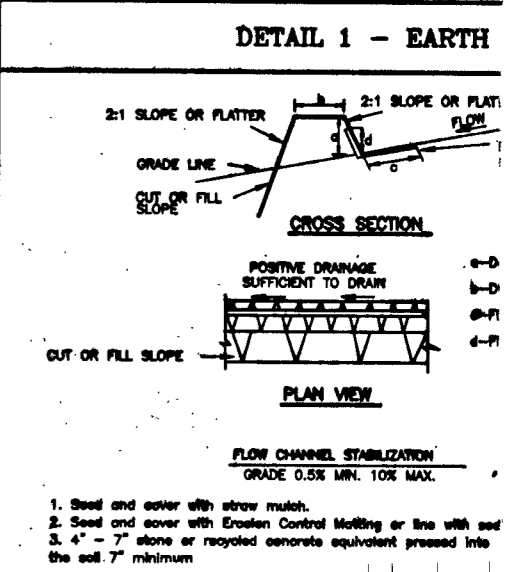
4/28/03
 No sunroom
 on house
 Although
 shown on
 plan
 (KN)

GEORGE A. CARBUTT
 GERTRUDE AND
 895 J. CARBUTT
 ZONED: RC



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

Approved Septic System Plan
 Howard County Health Department
 P/O Presentation Patricia
 Owner: Brantwood,
 Signature: *[Signature]*
 Date: 7/22/02



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: RL Feezer Co, Inc Telephone #: 410-781-4655
Address: 6321 Barnett Ave
Sykesville, Md. 21784

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer
License # and name of individual responsible for the field installation:
Name (Print): Robert L. Feezer License# 2122

*A licensed individual must perform the actual installation. Apprentices must be under the direct supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification.

Name of Property Owner: Nantuxet - Dorsey, Inc Telephone #:
Subdivision: Brantwood II Lot #: 21 Well Tag #: HO-94-3523 ✓
Site Address: 3025 Seneca Chief Trail
Ellicott City, Md. 21042

Submersible Pump Data Pitless Adapter Well Cap and Electric Conduit
Make: Starite Make: Campbell Two piece watertight cap: ✓
Model #: SSP4DOSH Model #: PA800 Screened, vented well cap: ✓
Pump Capacity 5 GPM Depth: 42" (36" min) Cap secured to casing: ✓
Well Yield: 20 GPM NSF approved: ✓ Conduit min 18" B.G.: ✓
Depth of well encountered at time of pump installation: 280 (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 on 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: 1" Poly PVC sleeved to undisturbed soil at wall penetration: ✓
PSI: 160 (160 psi min) Approximate length of sleeve: 5'
Depth of supply line: ✓ (36" min) Sleeve caulked and sealed properly: ✓

The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Robert L. Feezer 3/26/03
Signature of company representative responsible for installation date

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

Date Insp. Requested: 3/27/03 Anytime Date Insp. Approved: 3/27/03 508SRK
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 ✓ ← Elec taped on
Water supply line sleeved adequately at house connection ✓ ← See picture
Adequate grout observed below pitless adapter ✓

SRK
3/27/03
50

C1 14275

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.

COUNTY NUMBER 13

1 2 3 4 5 6 (THIS NUMBER IS TO BE PUNCHED IN COLS 3-6 ON ALL CARDS)

ST/CO USE ONLY DATE RECEIVED 7/30/02

DATE WELL COMPLETED 10/28/02

Depth of Well 280 (TO NEAREST FOOT)

PERMIT NO. FROM 'PERMIT TO DRILL WELL' 40-94-3523

OWNER NANTUCKETT HOMES STREET OR RFD 3025 SENECA CHIEF TRAIL TOWN WEST FRIENDSHIP SUBDIVISION BRANTWOOD II SECTION LOT 21

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entries for Sand (0-84) and Gray mica Rock (84-280).

GROUTING RECORD form including: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL (CM), NO. OF BAGS (23), NO. OF POUNDS (2162), GALLONS OF WATER (138), DEPTH OF GROUT SEAL (0-81).

CASING RECORD form including: casing types (ST, CO, PL, OT), MAIN CASING TYPE (ST), Nominal diameter (6), Total depth (88).

OTHER CASING (if used) form with fields for diameter and depth.

SCREEN RECORD form including: screen type (ST, BR, HO, PL, OT), DIAMETER OF SCREEN (58-60), DEPTH (86-280).

PUMPING TEST form including: HOURS PUMPED (3), PUMPING RATE (20), METHOD USED (Bucket), WATER LEVEL (65-73), TYPE OF PUMP USED (S).

PUMP INSTALLED form including: DRILLER INSTALLED PUMP (NO), TYPE OF PUMP INSTALLED (29), CAPACITY: GALLONS PER MINUTE (31-35), PUMP HORSE POWER (37-41), PUMP COLUMN LENGTH (43-47), CASING HEIGHT (above).

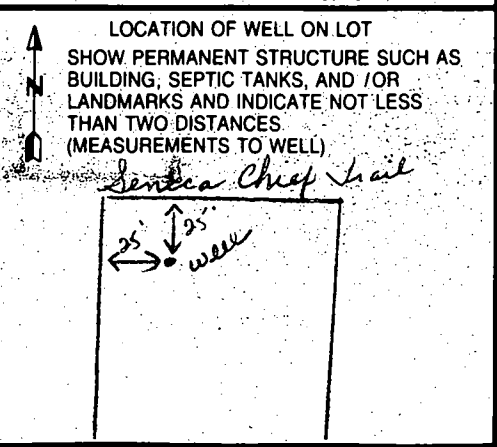
NUMBER OF UNSUCCESSFUL WELLS (0), WELL HYDROFRACTURED (N).

CIRCLE APPROPRIATE LETTER: A (well abandoned), E (electric log), P (test well converted).

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

DRILLERS LIC. NO. MS DO 24, DRILLERS SIGNATURE Joseph L. Mayne, LIC. NO. D

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL (F), MDE USE ONLY (T, W, Q), TELESCOPE CASING, LOG INDICATOR, OTHER DATA.



B 1 6797

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL

please type

STATE PERMIT NUMBER

HD-94-3523 fill in this form completely

Date Received (APA) 09/27/02

OWNER INFORMATION

15 Last Name Owner First Name 34
13090 Old Frederick Rd
Sykesville Md 21784

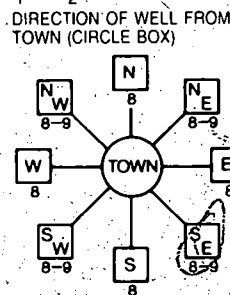
LOCATION OF WELL

B 3 Howard
8 COUNTY 21
Branterood
23 SUBDIVISION 42
SECTION 44 46 LOT 21 48 50
West Friendship
52 NEAREST TOWN 71
MILES FROM TOWN (enter 0 if in town) 4 MI 73 76 77 78

DRILLER INFORMATION

Joseph L. Magna M.S.D. 24
Driller's Name 76 License No. 81
Joseph L. Magna Drilling
5512 Ridge Rd. Mt Airy, Md 21771
Address
Joseph L. Magna 9/26/02
Signature Date

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



3025 Seneca Chief Trail
11 NEAR WHAT ROAD 30
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
NORTH
WEST EAST
34 400 37
DISTANCE FROM ROAD FT
ENTER FT OR MI 38 39
TAX MAP 10423 BLK. PARCEL 214

B 2 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
COUNTY NAME COUNTY NO. 13
STATE SIGNATURE INSERT S
DATE ISSUED 10/15/02 Karen Nanan 10/15/03
CO SIGNATURE EXP. DATE
NORTH GRID 520 000 EAST GRID 820 000

APPROXIMATE DEPTH OF WELL 300 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST

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)

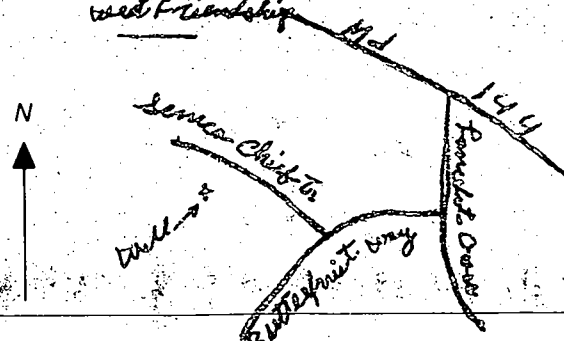
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

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

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)

APPROX. PERMIT NUMBER G
PERMIT No. HD-94-3523

SPECIAL CONDITIONS

NOTE: APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

APPLICATION

PERCOLATION TESTING

A _____

P _____

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

DISTRICT _____

DATE 8/15/95

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 Feaga Family

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER Land Marketing Inc. C/O Tim Feaga

ADDRESS 3243 Bethany Lane Ellicott City 21042 PHONE 313-8808

PROPERTY LOCATION:

SUBDIVISION Feaga Property LOT NO. 69 73

ROAD AND DESCRIPTION Rt 144 + Folly Quarter Rd

TAX MAP 16 + 23 PARCEL # 34 + 63

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. Mark A. Reich
(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

Property line

COUNTY #

SOIL PROFILE

1213

0' bright red SiClm

4' lighter red Si Salm strong. Sub- & blocky struct.

6' Mottled white/orange red Salm and black white from decayed quartzite

12.5' orange brn SiClm 50% (pithy) struct. not strong. decayed quartzite

3' medium brown Salm 15% decayed mica shale

12' mottled Salm orange/white

13' 1214 light orange tan

1.5' medium brown orange Salm

6' mottled orange and white Salm micaceous

SOIL PROFILE

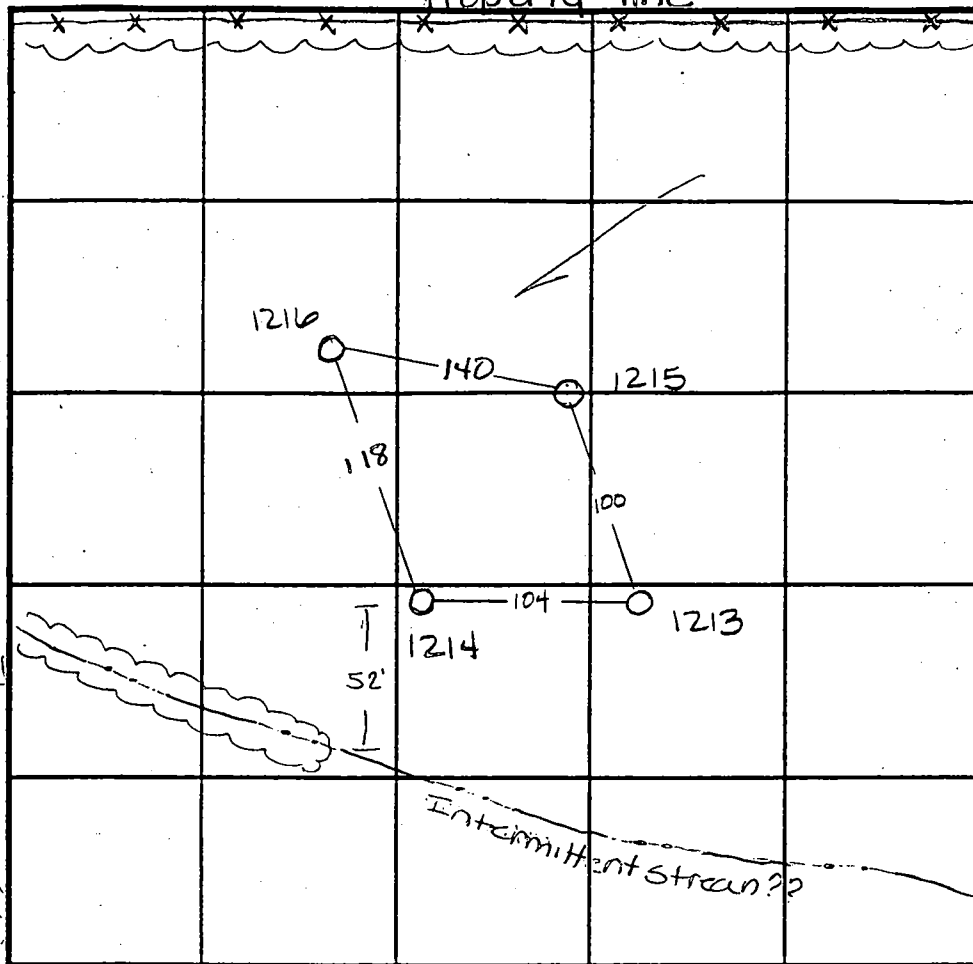
1216

0' lgt orange SiClm

1' red SiClm

2' yellow orange to red orange Salm

10' lgt brn to grey Salm 100% decayed



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
9-20-95	1213	4.5' V125	10:54	10:55 ³⁰	10:55 ³⁰	10:57 ³⁰	2min
	1215	3' V13	10:47	10:48	10:48	10:49	1min
	1215	7' V13	10:49	11:00	11:00	11:15	15min
	1214	3' V12.5	10:59	11:00 ¹⁵	11:00 ¹⁵	11:02 ³⁰	2 1/4 min
	1216	Visual to 12'					OK

REMARKS 1214- Too close to stream?? Is it a stream?? wet season

TYPE OF SOIL _____

TESTED BY Amy McMillen ALSO PRESENT Tim Feaga

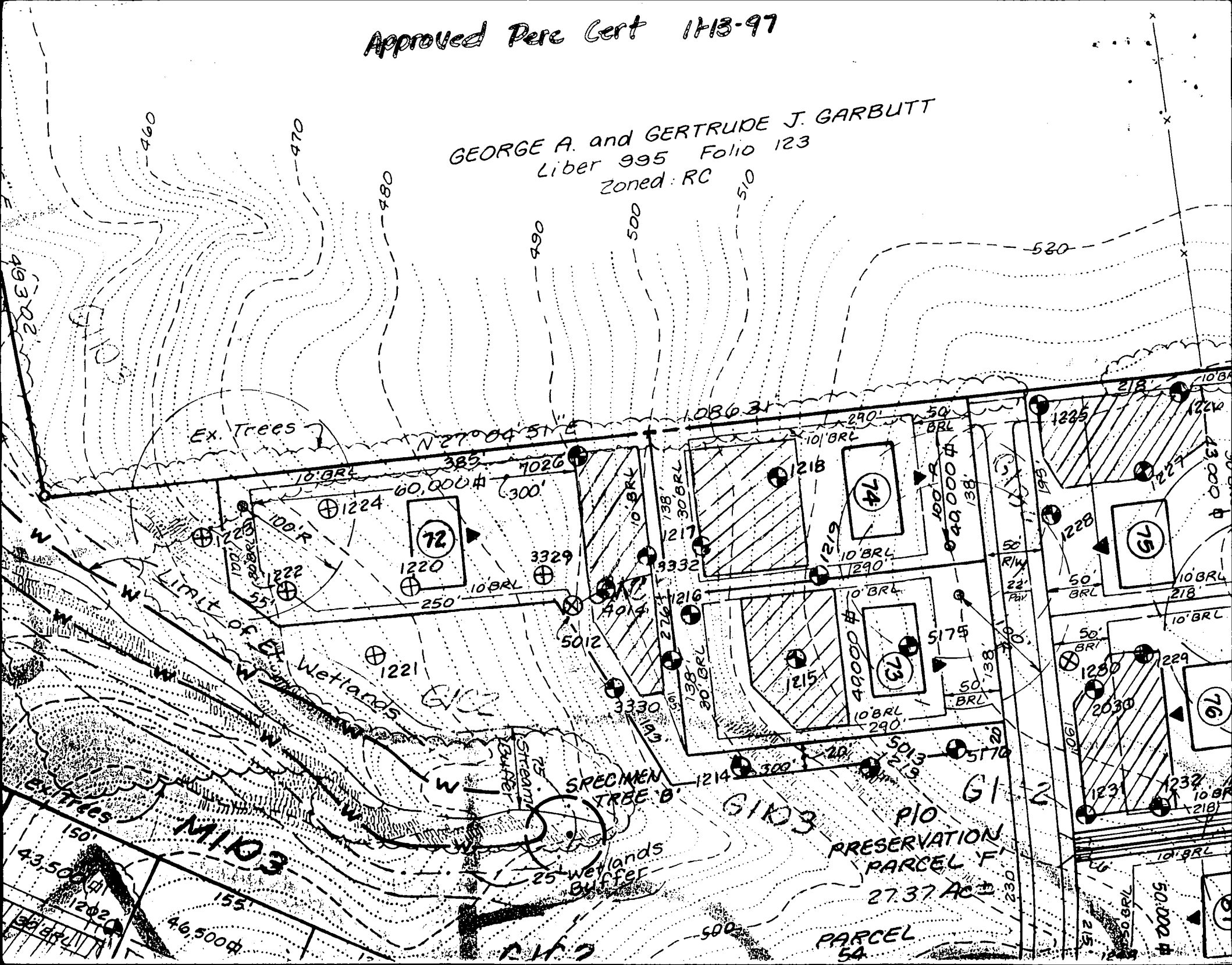
TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

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

12.5'

Approved Pere Cert 1413-97

GEORGE A. and GERTRUDE J. GARBUTT
Liber 995 Folio 123
Zoned: RC



ERS
214

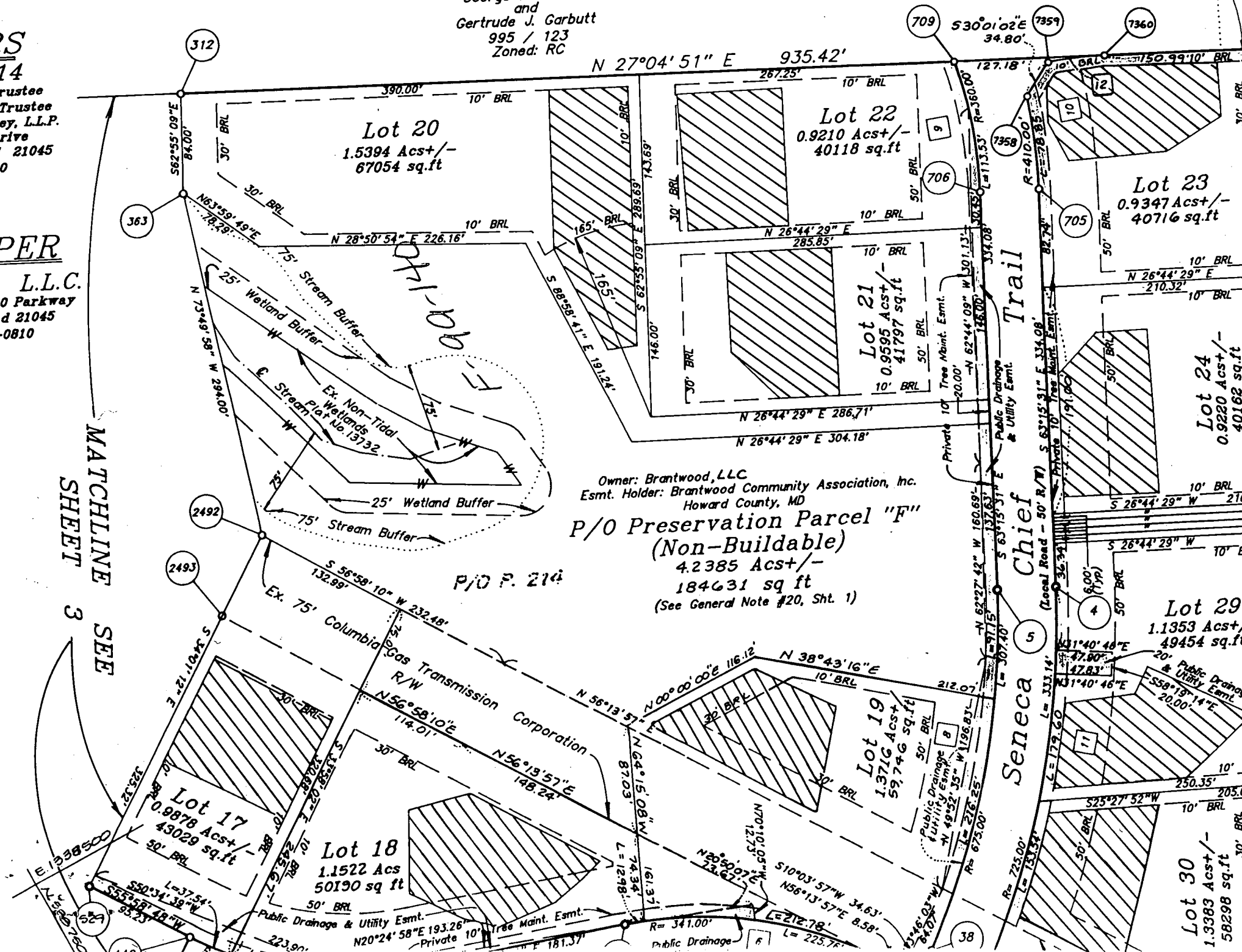
ey, Trustee
ber, Trustee
Carney, L.L.P.
ter Drive
yland 21045
0-4600

OPER
OD, L.L.C.
ia 100 Parkway
yland 21045
730-0810

George A. Garbutt
and
Gertrude J. Garbutt
995 / 123
Zoned: RC

Private 10 Tree Maintenance
Esmt. & Reversible Grading Esmt.

MATCHLINE
SHEET 3
SEE



Lot 20
1.5394 Acst+/-
67054 sq.ft

Lot 22
0.9210 Acst+/-
40118 sq.ft

Lot 23
0.9347 Acst+/-
40716 sq.ft

Lot 21
0.9595 Acst+/-
41797 sq.ft

Lot 24
0.9220 Acst+/-
40162 sq.ft

Owner: Brantwood, LLC
Esmt. Holder: Brantwood Community Association, Inc.
Howard County, MD
P/O Preservation Parcel "F"
(Non-Buildable)
4.2385 Acst+/-
184631 sq ft
(See General Note #20, Sht. 1)

Lot 17
0.9878 Acst+/-
43029 sq.ft

Lot 18
1.1522 Acst+/-
50190 sq ft

Lot 19
1.3716 Acst+/-
59746 sq.ft

Lot 29
1.1353 Acst+/-
49454 sq.ft

Lot 30
1.3383 Acst+/-
58298 sq.ft

Seneca Chief Trail

Gas Transmission Corporation
R/W

Public Drainage & Utility Esmt.
Private 10' Tree Maint. Esmt.

Private 10' Tree Maint. Esmt.
Public Drainage & Utility Esmt.

Public Drainage & Utility Esmt.

Public Drainage & Utility Esmt.

Public Drainage

7/21/04

VARIANCE
DUE TO
Deck Height
OK'd

APPROVED

WALK-THRU BUILDING PERMIT
00149493 A# 0510619
PT. SAN KN DATE: 7/21/04
DESC. OF WORK: Deck 10'
ELEVATION EDGE OF ST

Not affected
by posts
(KN)

CHIEF

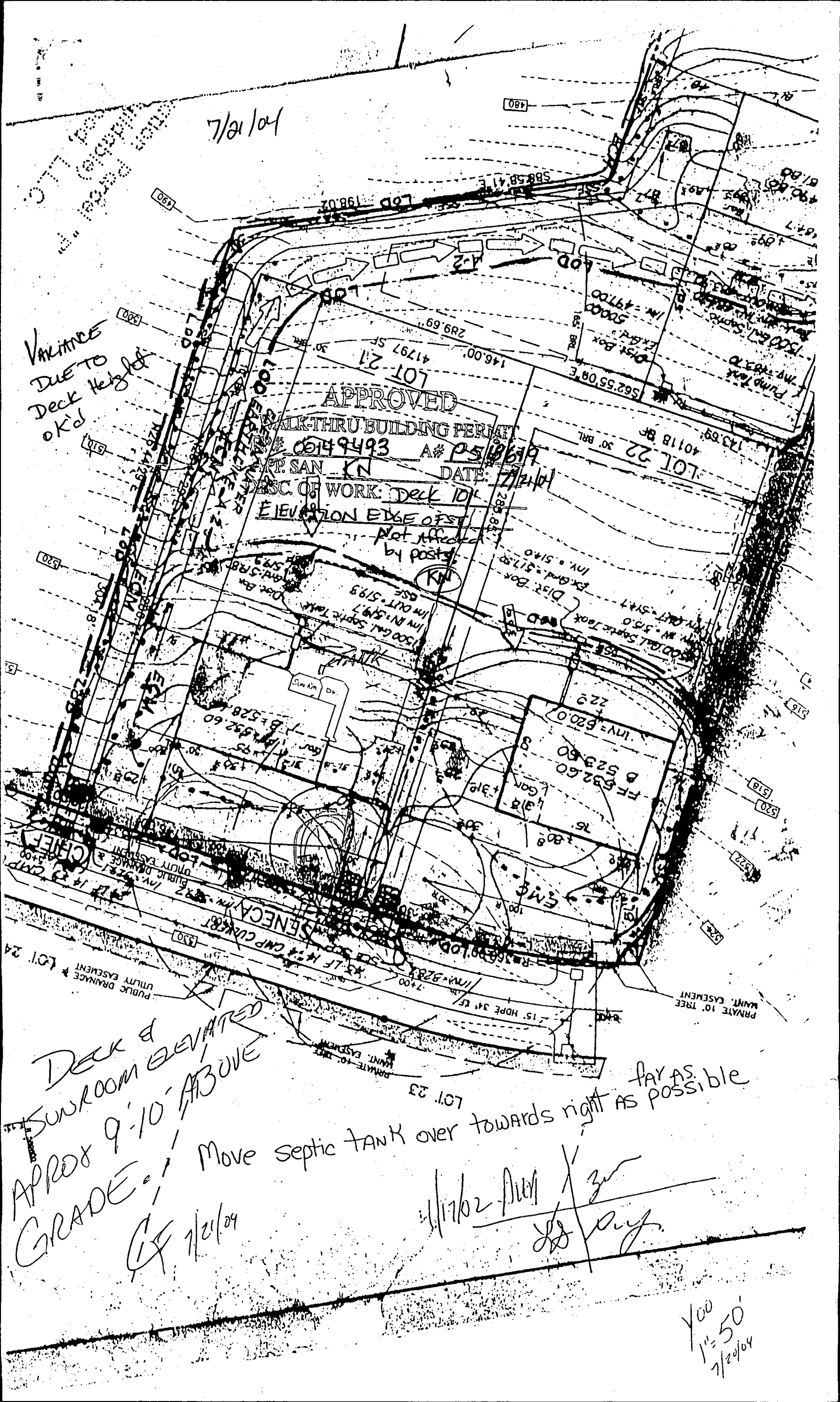
Deck &
Sunroom ELEVATED
APPROX 9'-10" ABOVE
GRADE

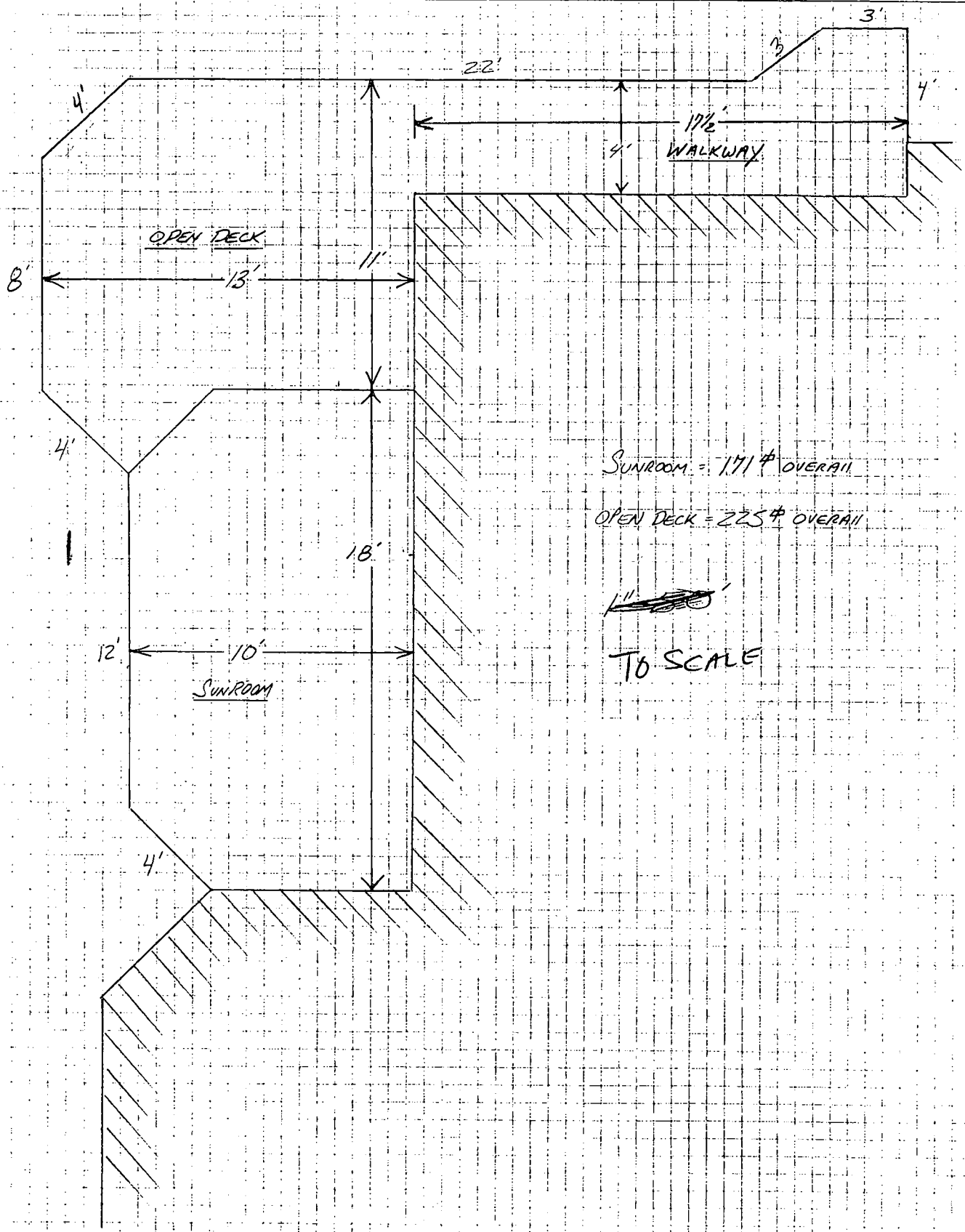
Move septic tank over towards right AS POSSIBLE

7/21/04

1/17/02 [Signature]

100
1" = 50'
7/21/04





Client: yoo # 31416

Date: 7-20-04

Designer: G

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Not to Scale
Conceptual Drawings Only

