

LAYOUT 9/4/2002 11AM INSP 4 11/15/02 10AM Pump Test
 INSP 2 9/5/02 3:00 INSP 5 _____
 INSP 3 11/15/02 Pump Test 10am INSP 6 _____

ISSUE DATE: 8/28/2002

P 517439

APPROVAL DATE: 11/15/02

A 514251-B

PERMIT

INDEXED

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

*RPS#
335240*

Hatfields Equipment IS PERMITTED TO INSTALL ALTER

ADDRESS: 13785 Burntwoods Road, Glenelg PHONE NUMBER: 301-854-6172

SUBDIVISION: Ferguson Property LOT NUMBER: 2

ADDRESS: 3035 Merlin Court PROPERTY OWNER: Williamsburg Group, LLC

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

PUMP CHAMBER CAPACITY (GALLONS): 1250 COMPARTMENTED TANK REQUIRED

NUMBER OF BEDROOMS: 4

SQUARE FEET PER BEDROOM: 180

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

TRENCHES:	Trench to be 3.0 feet wide. Inlet 3.0 feet below original grade. Bottom maximum depth 5.0 feet below original grade. Effective area begins at 3.5 feet below original grade. 2.0 feet of stone below distribution pipe.
LOCATION:	Place the distribution box 45 feet from the 127.03 foot long lot line and 6 feet from the 371.71 foot long lot line. Start the first trench 10 feet from the 127.03 foot long lot line and 25 feet from the 371.71 foot long lot line. Dig trench #1 on level ground.
NOTES:	Place successive trenches parallel to the first trench. Sleeve pump line under driveway. Existing septic system and old well to be abandoned or sealed if not already done.

PLANS APPROVED: Frank Skinner *OK 5/2/02* SG DATE: 4/16/2002

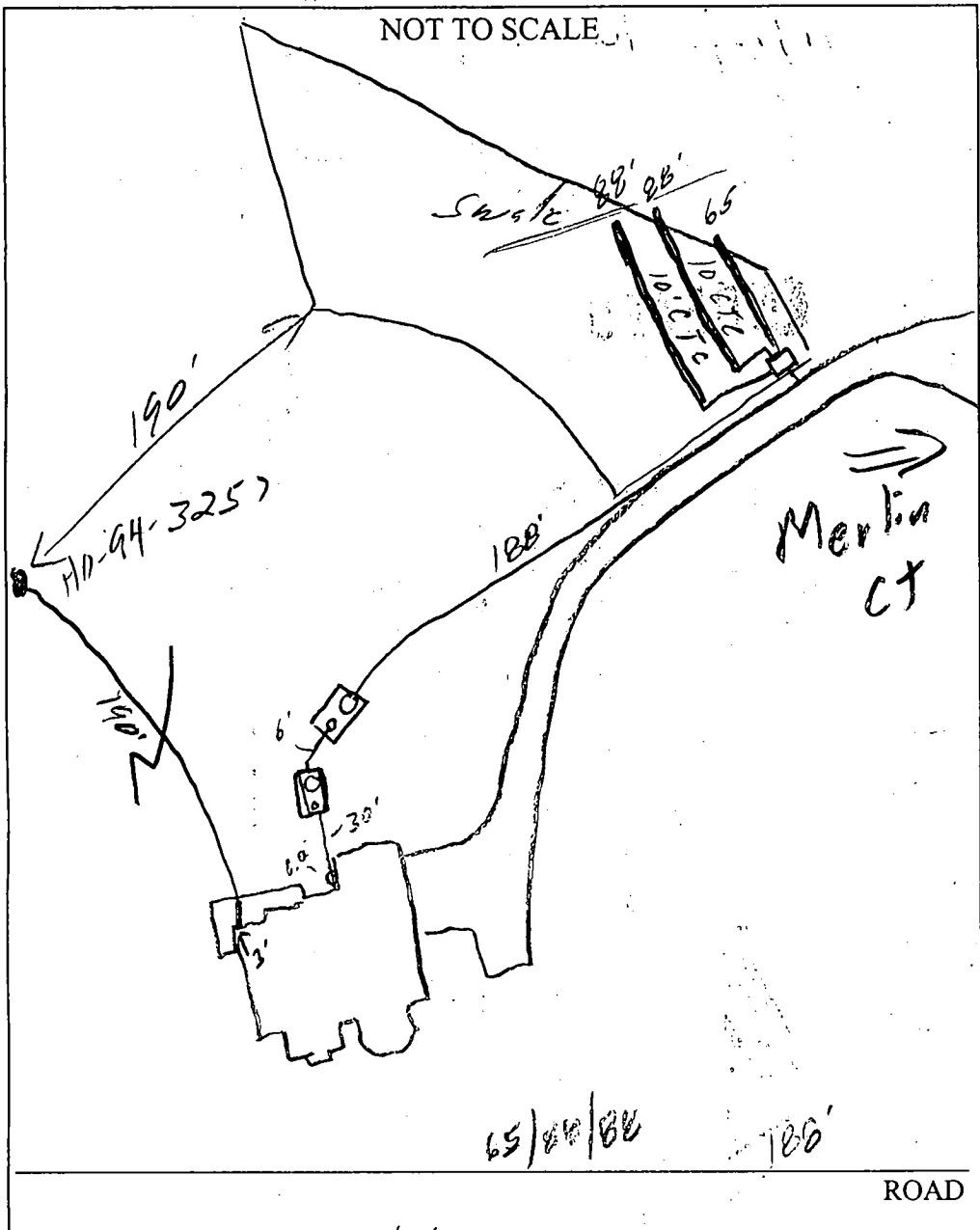
NOTES: PERMIT VOID AFTER 2 YEARS
 CONTRACTOR IS RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
 WATERTIGHT SEPTIC TANKS REQUIRED
 ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL UNLESS SPECIFICALLY AUTHORIZED
 MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS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

519-04 B00147175-POACH/DECK

A514251-B

NOT TO SCALE



TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
3'	3'	5'
NUMBER OF TRENCHES		3
TOTAL LENGTH		24'
ABSORPTION AREA		723 ft ²
DISTRIBUTION BOX LEVEL		✓
DISTRIBUTION BOX BAFFLE		✓
DISTRIBUTION BOX PORT		

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

PRE-CONSTRUCTION 9/4/02 Lot staked, contain a little off BP. Justified
 (2) 50' (1) 60' trenches (SO)
 INSTALLATION 9/5/02 OK to cover all work. Pump & Alarm tests needed (SO)
 11/15/02 Pump and alarm working (BB)

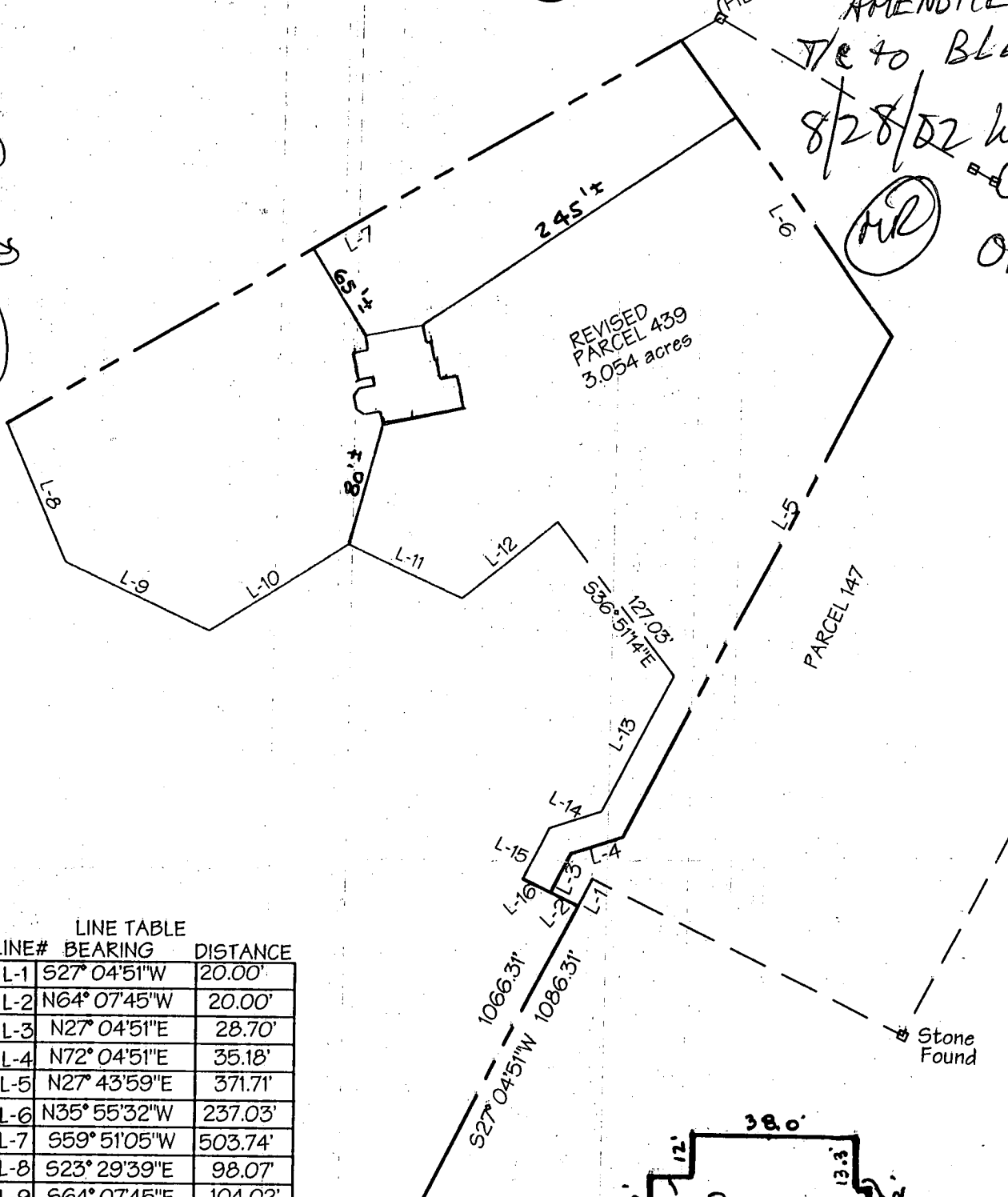
GENERAL CONTRACTOR
 AND RETURNED

FINAL INSPECTOR B. Baker DATE OF APPROVAL 11/15/02

PROPERTY KNOWN AS: **PARCEL 439**
FERGUSON PROPERTY
3RD DISTRICT HOWARD CO., MD.

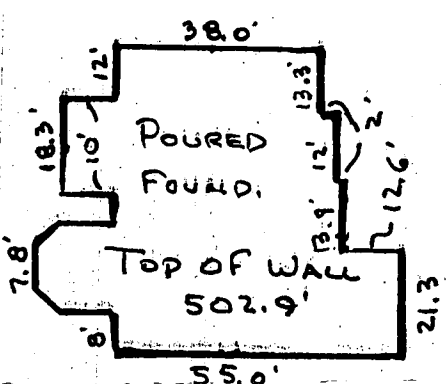
THIS PLAT CAN NOT BE USED TO ESTABLISH
 PROPERTY LINES OR CORNERS.

7/23/02 HOUSE SIGNIFICANTLY
 DIFF THAN BP-PLAN
 NOT APPROVED w/o
 AMENDMENT
 MON (FIELD)
 Tie to BLDG
 8/28/02 WALL
 CHECK
 OK



LINE TABLE

LINE#	BEARING	DISTANCE
L-1	S27° 04' 51" W	20.00'
L-2	N64° 07' 45" W	20.00'
L-3	N27° 04' 51" E	28.70'
L-4	N72° 04' 51" E	35.18'
L-5	N27° 43' 59" E	371.71'
L-6	N35° 55' 32" W	237.03'
L-7	S59° 51' 05" W	503.74'
L-8	S23° 29' 39" E	98.07'
L-9	S64° 07' 45" E	104.02'
L-10	N56° 59' 20" E	107.30'
L-11	S64° 28' 43" E	81.90'
L-12	N50° 24' 43" E	79.85'
L-13	S27° 43' 59" W	100.00'
L-14	S72° 04' 51" W	35.32'
L-15	S27° 04' 51" W	37.41'
L-16	S64° 07' 45" E	20.00'



LOCATION DRAWING

DETAIL - NO SCALE

CERTIFICATION

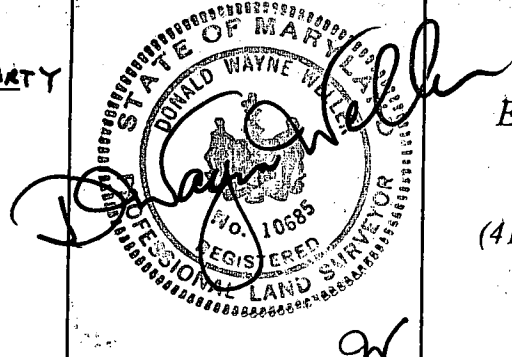
SEAL

SCALE 1" = 100'

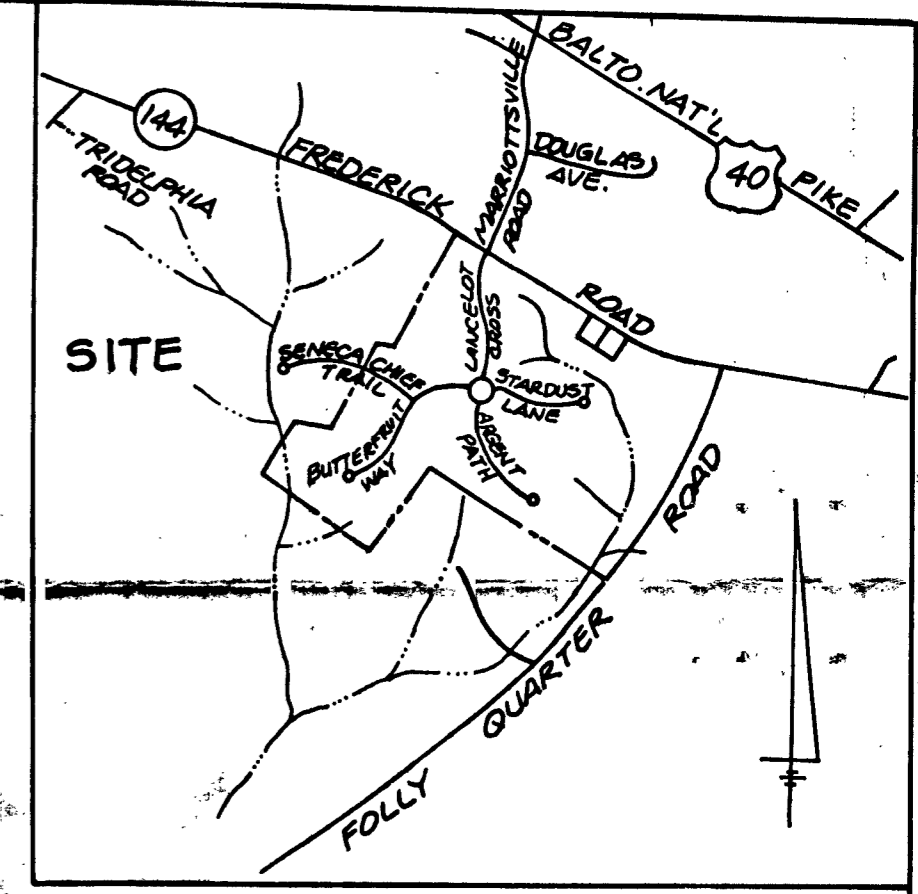
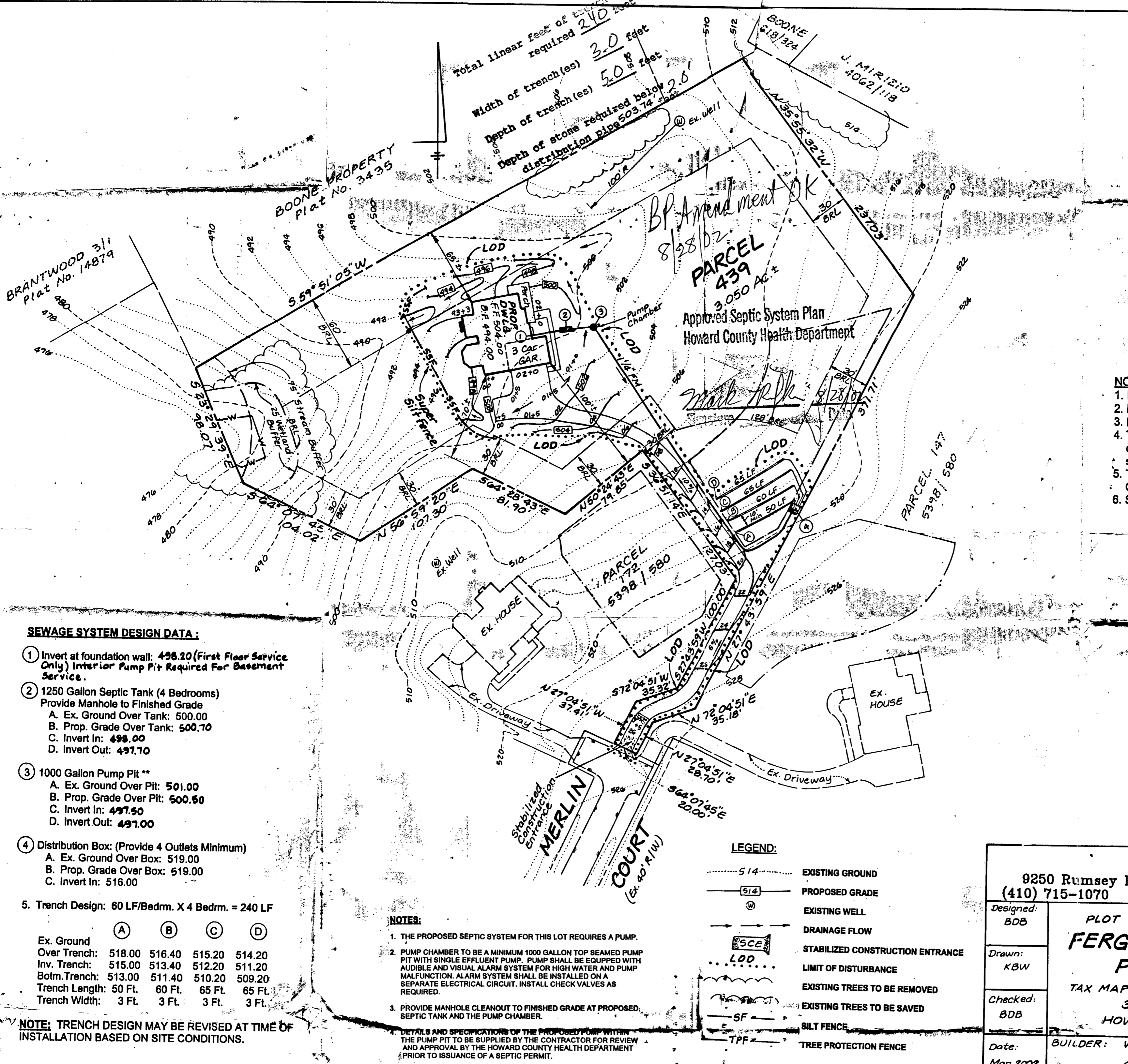
DATE 07/18/02

This is to certify that I have surveyed the property known as:
PARCEL 439 FERGUSON PROPERTY

The information shown has been established by current acceptable survey procedures and from available record information. This drawing is to be used for Title Transfer Financing, or Refinancing Only and IS NOT to be used for the Establishment of Property Lines, Location for Fences, Garages, Buildings, or other Existing or Future Improvements.



LDE Inc.
 Engineers, Surveyors, Planners
 9250 Rumsey Road, Suite 106
 Columbia, Maryland - 21045
 (410)715-1070 - (410)715-9540 Fax



VICINITY MAP
Scale: 1" = 200'

- NOTES:**
- Existing Zoning: RC (Rural Conservation)
 - Deed Reference: L. 5511 F. 580
 - Limit of Disturbance: 29,490 Sq. Ft. +/-
 - The proposed driveway for this lot shall be a minimum of 10 feet wide, 6" crusher run with 2 1/2" macadam surface.
 - The topography shown is taken from the Howard County aerial photogrammetry.
 - See architectural plans for building dimensions.

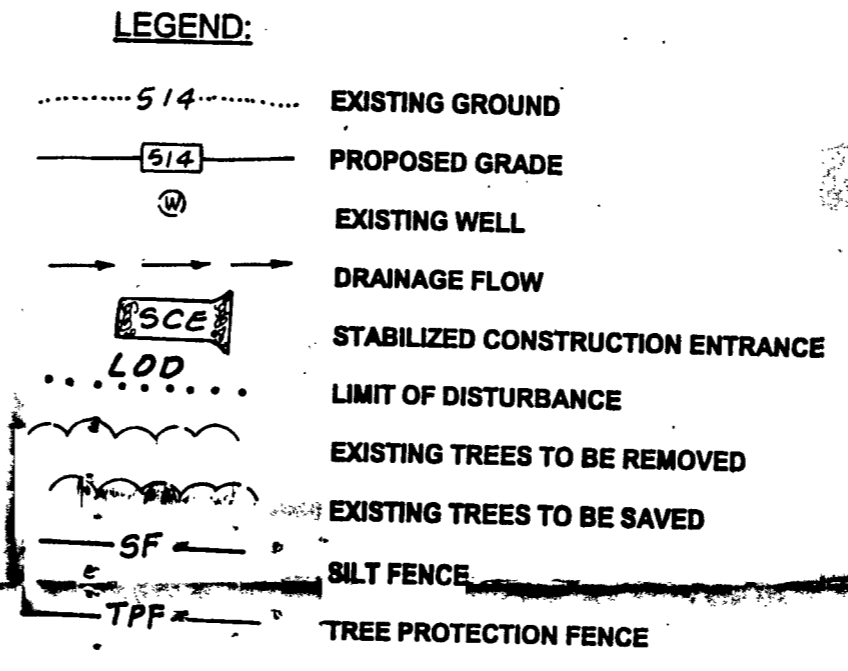
SEWAGE SYSTEM DESIGN DATA:

- Invert at foundation wall: 498.20 (First Floor Service Only) Interior Pump Pit Required For Basement Service.
- 1250 Gallon Septic Tank (4 Bedrooms)
Provide Manhole to Finished Grade
A. Ex. Ground Over Tank: 500.00
B. Prop. Grade Over Tank: 500.70
C. Invert In: 498.00
D. Invert Out: 497.70
- 1000 Gallon Pump Pit **
A. Ex. Ground Over Pit: 501.00
B. Prop. Grade Over Pit: 500.50
C. Invert In: 497.50
D. Invert Out: 497.00
- Distribution Box: (Provide 4 Outlets Minimum)
A. Ex. Ground Over Box: 519.00
B. Prop. Grade Over Box: 519.00
C. Invert In: 516.00

5. Trench Design: 60 LF/Bedrm. X 4 Bedrm. = 240 LF

	(A)	(B)	(C)	(D)
Ex. Ground				
Over Trench:	518.00	516.40	515.20	514.20
Inv. Trench:	515.00	513.40	512.20	511.20
Botm. Trench:	513.00	511.40	510.20	509.20
Trench Length:	50 Ft.	60 Ft.	65 Ft.	65 Ft.
Trench Width:	3 Ft.	3 Ft.	3 Ft.	3 Ft.

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



NOTE: TRENCH DESIGN MAY BE REVISED AT TIME OF INSTALLATION BASED ON SITE CONDITIONS.

B00135221
REVISED
Date: 6-5-02
Comments: Custom House Relocation

LDE, INC.		
9250 Rumsey Road, Suite 106, Columbia, MD. 21045 (410) 715-1070 (301) 596-3424 (410) 715-9540 (Fax)		
Designed: BDB	PLOT PLAN FOR BUILDING PERMIT	Scale: 1" = 50'
Drawn: KBW	FERGUSON PROPERTY	Drawing 1 of 1
Checked: BDB	PARCEL 439	Job No. 01-052
Date: Mar. 2002	TAX MAP 1G BLOCK 20 PARCEL 439 3RD ELECTION DISTRICT HOWARD COUNTY, MARYLAND	File No.
	BUILDER: WILLIAMSBURG GROUP P.O. BOX 1018 COLUMBIA, MD 21044 Phone: (410) 997-8800	

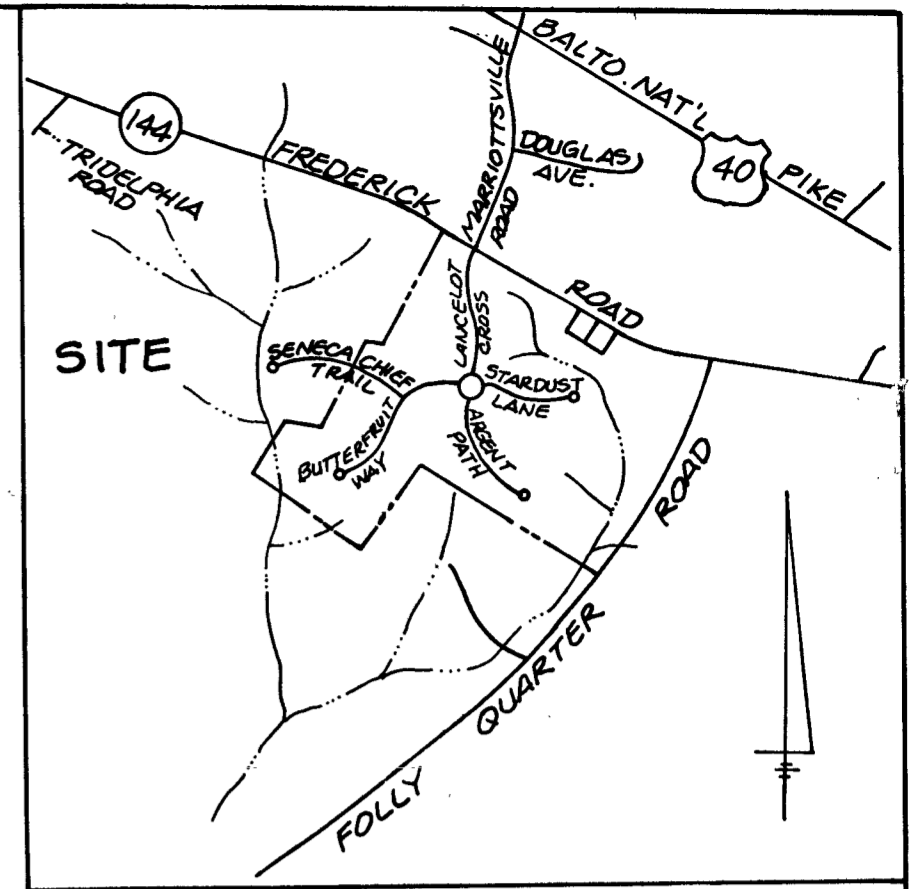
Approved Septic System Plan
Howard County Health Department
as revised

F. Skinn
Signature

4-16-02
Date

BOONE PROPERTY
Plat No. 3435

BRANTWOOD 311
Plat No. 14879



VICINITY MAP
Scale: 1" = 2000'

NOTES:

- Existing Zoning: RC (Rural Conservation)
- Deed Reference: L. 5511 F. 580
- Limit of Disturbance: 32,860 Sq. Ft. +/-
- The proposed driveway for this lot shall be a minimum of 10 feet wide, 6" crusher run with 2 1/2" macadam surface.
- The topography shown is taken from the Howard County aerial photogrammetry.
- See architectural plans for building dimensions.

SEWAGE SYSTEM DESIGN DATA:

- Invert at foundation wall: 496.70 Basement Service (Provide Sleeve Through Footing)
- 1250 Gallon Septic Tank (4 Bedrooms)
Provide Manhole to Finished Grade
A. Ex. Ground Over Tank: 500.00
B. Prop. Grade Over Tank: 498.00
C. Invert In: 496.50
D. Invert Out: 496.20
- 1000 Gallon Pump Pit **
A. Ex. Ground Over Pit: 499.00
B. Prop. Grade Over Pit: 499.00
C. Invert In: 496.00
D. Invert Out: 496.50
- Distribution Box: (Provide 4 Outlets Minimum)
A. Ex. Ground Over Box: 519.00
B. Prop. Grade Over Box: 519.00
C. Invert In: 516.00
- Trench Design: 60 LF/Bedrm. X 4 Bedrm. = 240 LF

	A	B	C	D
Ex. Ground				
Over Trench:	518.00	516.40	515.20	514.20
Inv. Trench:	515.00	513.40	512.20	511.20
Botm. Trench:	513.00	511.40	510.20	509.20
Trench Length:	50 Ft.	60 Ft.	65 Ft.	65 Ft.
Trench Width:	3 Ft.	3 Ft.	3 Ft.	3 Ft.

NOTE: TRENCH DESIGN MAY BE REVISED AT TIME OF INSTALLATION BASED ON SITE CONDITIONS.

NOTES:

- THE PROPOSED SEPTIC SYSTEM FOR THIS LOT REQUIRES A PUMP.
- PUMP CHAMBER TO BE A MINIMUM 1250 GALLON TOP SEAMED PUMP PIT WITH SINGLE EFFLUENT PUMP. PUMP SHALL BE EQUIPPED WITH AUDIBLE AND VISUAL ALARM SYSTEM FOR HIGH WATER AND PUMP MALFUNCTION. ALARM SYSTEM SHALL BE INSTALLED ON A SEPARATE ELECTRICAL CIRCUIT. INSTALL CHECK VALVES AS REQUIRED.
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- DETAILS AND SPECIFICATIONS OF THE PROPOSED PUMP WITHIN THE PUMP PIT TO BE SUPPLIED BY THE CONTRACTOR FOR REVIEW AND APPROVAL BY THE HOWARD COUNTY HEALTH DEPARTMENT PRIOR TO ISSUANCE OF A SEPTIC PERMIT.

LEGEND:

- 514 EXISTING GROUND
- 514 PROPOSED GRADE
- EXISTING WELL
- DRAINAGE FLOW
- STABILIZED CONSTRUCTION ENTRANCE
- LOD LIMIT OF DISTURBANCE
- EXISTING TREES TO BE REMOVED
- EXISTING TREES TO BE SAVED
- SILT FENCE
- TREE PROTECTION FENCE

LDE, INC.		
9250 Rumsey Road, Suite 106, Columbia, MD. 21045 (410) 715-1070 (301) 596-3424 (410) 715-9540 (Fax)		
Designed: BDB	PLOT PLAN FOR BUILDING PERMIT FERGUSON PROPERTY PARCEL 439	Scale: 1" = 50'
Drawn: KBW	TAX MAP 16 BLOCK 20 PARCEL 439 3RD ELECTION DISTRICT HOWARD COUNTY, MARYLAND	Drawing 1 of 1
Checked: BDB		Job No. 01-052
Date: Mar. 2002	BUILDER: WILLIAMSBURG GROUP P.O. BOX 1018 COLUMBIA, MD 21044 Phone: (410) 997-8800	File No.

9/9/02
Anytime

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: CHARLES A. KLEIN & SONS, Inc Telephone #: (410) 549-6960
Address: 5220 RICE'S MILL ROAD
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): CHARLES A. KLEIN, JR. License# 2336

*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: Williamsburg Group LLC Telephone #: (410) 997-8800
Subdivision: Ferguson Property Lot #: 439 Well Tag #: HO-94-3257
Site Address: 3035 MERLIN COURT
ELLICOTT CITY, MD 21042

Submersible Pump Data **Pitless Adapter** **Well Cap and Electric Conduit**
Make: Jacuzzi Make: HARVARD Two piece watertight cap: ✓
Model #: 5343-13P-52 Model#: PT-800 Screened, vented well cap: ✓
Pump Capacity 5 GPM Depth: 42" (36" min) Cap secured to casing: ✓
Well Yield: 13.78 GPM NSF approved: _____ Conduit min 18" B.G.: ✓
Depth of well encountered at time of pump installation: 200 (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: Polysthane PVC sleeved to undisturbed soil at wall penetration: yes
PSI: 1" (60 psi min) Approximate length of sleeve: _____
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.

Signature of company representative responsible for installation: Charles A. Klein, Jr. date: 6/26/02

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

Date Insp. Requested: _____ Date Insp. Approved: 9/9/02 (60)
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 ✓

SEQUENCE NO. (MDE USE ONLY) 0523

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.

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

COUNTY NUMBER A514251-B

DATE RECEIVED MM DD YY 10 30 2001

DATE WELL COMPLETED MM DD YY 10 30 2001

DEPTH OF WELL 22 200 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 3/4/2002 OK BB #0-94-3257

OWNER Brantly Development Seneca Chief Trail TOWN W. Friendship SUBDIVISION FERBUSON PROP SECTION LOT 2

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entries for Overburden, Gray Rock, and water at 72'.

GROUTING RECORD form with fields for YES/NO, CEMENT (CM), BENTONITE CLAY (BC), NO. OF BAGS (15), NO. OF POUNDS (1500), GALLONS OF WATER (90), DEPTH OF GROUT SEAL (0 to 52 ft).

CASING RECORD form with fields for casing types (ST, CO, PL, OT), MAIN CASING TYPE (PL), Nominal diameter (60-61), Total depth (52-70).

OTHER CASING (if used) table with columns for diameter and depth.

SCREEN RECORD form with fields for screen type (ST, BR, HO, PL, OT) and DEPTH (nearest ft.)

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED YES (Y) NO (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. MWD 399, DRILLERS SIGNATURE (Wann Pavell)

LIC. NO. MWD 241, SIGNATURE (Wann Pavell)

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

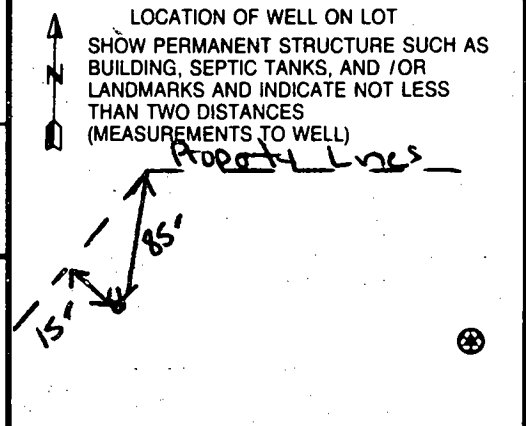
Table with columns for casing depth (nearest ft.) and diameter of screen (nearest inch).

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) TELESCOPE CASING, LOG INDICATOR, OTHER DATA

PUMPING TEST form with fields for PUMPING TEST (C3), HOURS PUMPED (3), PUMPING RATE (14.2), METHOD USED TO MEASURE PUMPING RATE (Submersible), WATER LEVEL (41 ft before, 8 ft when pumping), TYPE OF PUMP USED (S submersible).

PUMP INSTALLED form with fields for DRILLER INSTALLED PUMP (YES), TYPE OF PUMP INSTALLED (S), CAPACITY (GALLONS PER MINUTE), PUMP HORSE POWER, PUMP COLUMN LENGTH, CASING HEIGHT (above/below land surface).



B 1 9422

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

STATE PERMIT NUMBER

HO-94-3257

W515974 please print or type

fill-in this form completely

Date Received (APA)

08 06 01

OWNER INFORMATION

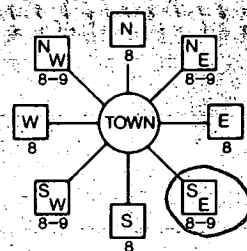
Brantly Development, 8835 P Columbia 100 PKWY, Columbia MD 21045

B 3 LOCATION OF WELL

Howard, Ferguson Property, West Friendship

MILES FROM TOWN (enter 0 if in town) 2

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Seneca Chief Trail, NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



700, 300, DISTANCE FROM ROAD ENTER FT OR MI

TAX MAP: 16 BLK: 20 PARCEL 147

DRILLER INFORMATION

Paul M. Fabiszak, MWD 399, G. Edgar Harr Sons' Corp, 12047 Falls Rd, Cockeysville 21030, 8/3/01

B 2 WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 5, AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 750

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, AS14251B, COUNTY NAME, COUNTY NO

STATE SIGNATURE, DATE ISSUED 10/23/01, CO SIGNATURE, EXP DATE 10/23/02, NORTH GRID 530 000, EAST GRID 0826 000

APPROXIMATE DEPTH OF WELL 250 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH

METHOD OF DRILLING (circle one)

Bored (or Augered), Jetted, Jetted & Driven, Air-Rotary, Air-PerCussion (circled), Rotary (Hydraulic Rotary), Cable, Reverse-Rotary, Drive-Point

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

- This well will not replace an existing well (circled), This well will replace a well that will be abandoned and sealed, This well will replace a well that will be used as a standby-contact local approving authority for policy on standby wells, This well will deepen an existing well

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

APPROX. PERMIT NUMBER G, PERMIT No. HO-94-3257

SPECIAL CONDITIONS, NOTE - APPROVING AUTHORITY'S SHOULD USE SEPARATE SHEET IF NEEDED

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

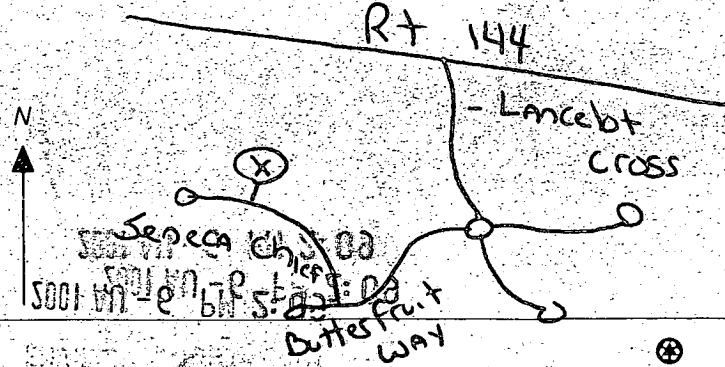
- SOURCES OF DRILLING WATER: 1. Well

WRITE THE BOX NUMBER FROM THE MAP HERE

E 826, N 530

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



APPLICATION

PERCOLATION TESTING

A 514251-B

Proposal - subdivision
Intent regarding ex.
house is uncertain

P _____

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

DISTRICT 3RD

DATE 9/12/00

81/3

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 QUINTON FERGUSON (STANLEY)

11345 FREDERICK ROAD

ADDRESS ELLICOTT CITY, MD 21042 PHONE 410 531-2549

AGENT OR PROSPECTIVE BUYER BRANTWOOD LLC

8835-D COLUMBIA 100 PARKWAY

ADDRESS COLUMBIA, MD 21045 PHONE 410 730-5612

PROPERTY LOCATION:

SUBDIVISION FERGUSON PROPERTY LOT NO. 2

ROAD AND DESCRIPTION SOUTH SIDE OF FREDERICK ROAD (ROUTE 144) 500'± WEST OF
MARRIOTTSVILLE ROAD

TAX MAP 16 PARCEL # 147 6d 20

SIZE OF LOT 3 ACRE + TYPE BLDG. SINGLE FAMILY DETACHED
(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.

Mugh T. Cole, Jr.
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

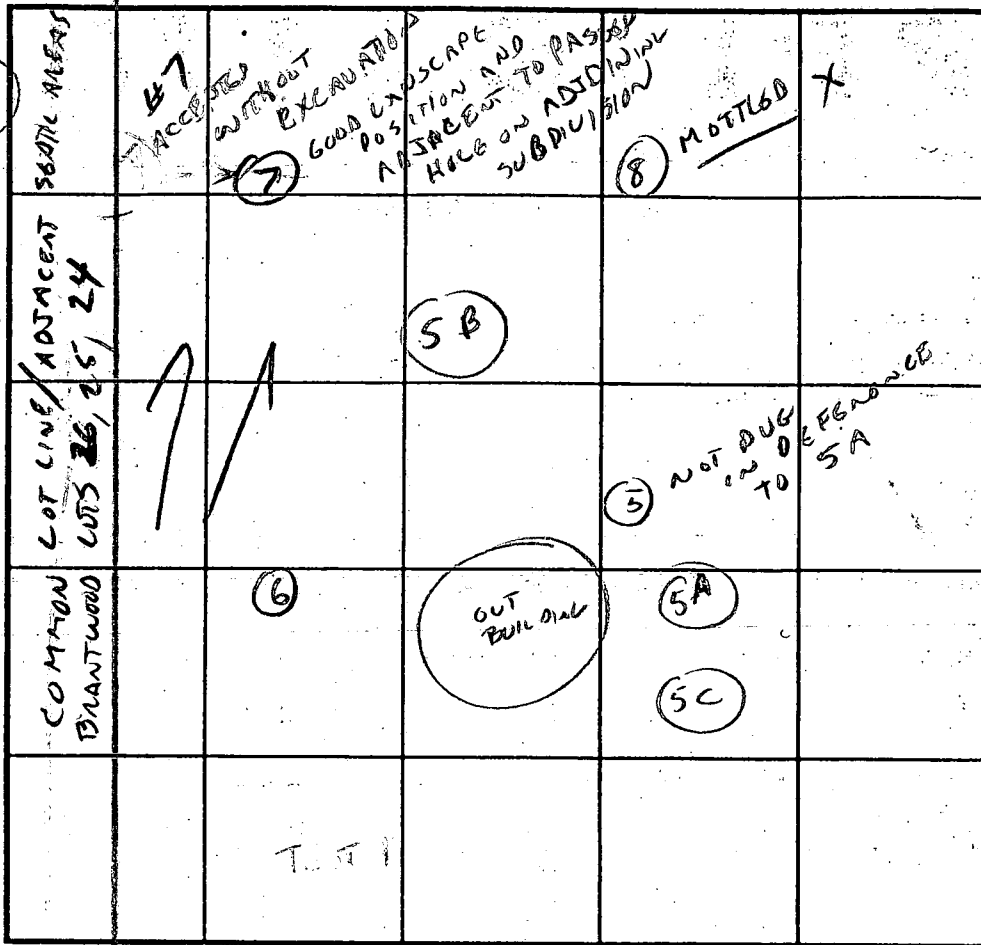
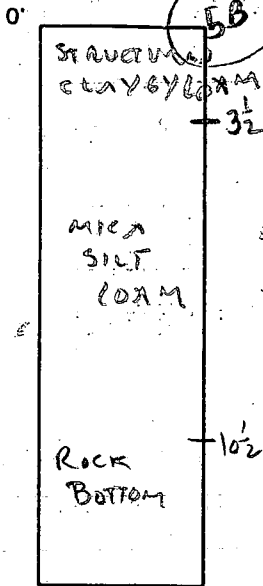
PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

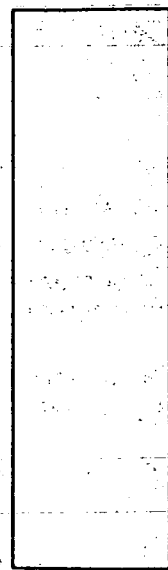
THIS IS NOT A PERMIT

COUNTY #

SOIL PROFILE



SOIL PROFILE



SHEET 1/3

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
10/11/00	5B	3 1/2'	3:05	3:07	3:07	3:09	2 min	
		VIS OK 3 - 10 1/2'						
	8	CLAYGY BEYOND 6' - MOTTLED			(a) 8 - 8 1/2'		X	
	7	NOT EXCAVATED; PRESUMED OK.						
	5A	ABANDONED - BOULDERS			(a) 1'		X	
	5C	ABANDONED - DEEP CLAY - BOULDERS			(a) 8'		X	
	6	NOT EXCAVATED						
		EFFORT TO ESTABLISH 10,000 SQ FT						
		ABANDONED IN FAVOR OF ALTERNATE SITE.						
	#7	IMMEDIATE ADJACENT TO RECENT PASSING TEST IN ADJOINING SUBDIVISION						

REMARKS INSUFFICIENT AREA - POOR LANDSCAPE (LOWING LYING) POSITION AT BOTTOM OF TEST AREA - STEEP AND ROCKY TO INSIDE OF AREA, OUT BOUNDARIES ABOVE

TYPE OF SOIL

TESTED BY C. Wellen ALSO PRESENT HUGH COLE

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

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

SEE SHEET 2/3 FOR PASSING TESTS AT ALT. LOCATION
SEE SHEET 3/3 FOR NOTES ON DEFICIENCIES OF EXISTING WELL & SEPTIC

APPLICATION

PERCOLATION TESTING

A 514251-B

Proposal - subdivision
Intent regarding ex.
house is uncertain

P _____

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

DISTRICT 3RD

DATE 9/12/00

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

P 2/3

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER QUINTON FERGOUSON
11345 FREDERICK ROAD
ADDRESS ELLICOTT CITY, MD 21042 PHONE 410 531-2549

AGENT OR PROSPECTIVE BUYER BRANTWOOD LLC
8835-D COLUMBIA 100 PARKWAY
ADDRESS COLUMBIA, MD 21045 PHONE 410 730-5612

PROPERTY LOCATION:

SUBDIVISION FERGOUSON PROPERTY LOT NO. _____

ROAD AND DESCRIPTION SOUTH SIDE OF FREDERICK ROAD (ROUTE 144) 500'± WEST OF
MARRIOTTSVILLE ROAD

TAX MAP 16 PARCEL # 147 GD 20

SIZE OF LOT 3 ACRES ± TYPE BLDG. SINGLE FAMILY DETACHED
(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.

Augh T. Cole, Jr.
(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

SOIL PROFILE

0' - CLAYEY

4 1/2' - MICA SILT COAM FEW FRAGMENTS

13' - CLAYEY

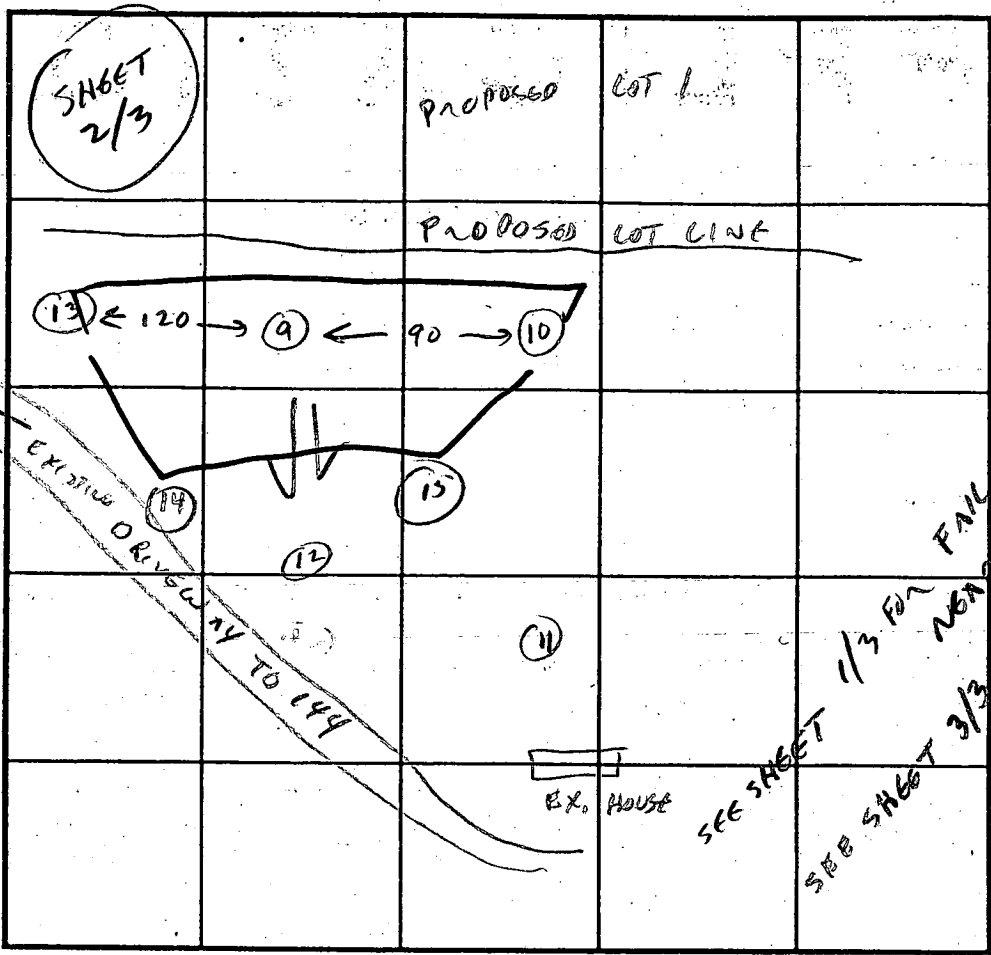
3 1/2' - MICA SANDY COAM

5% QUARTZITE CHUNKS

13' - CLAYEY

1 1/2' - SANDY MICA COAM

13' -



SOIL PROFILE

0' -

SEE SHEET 1/3 FOR FAILURE RESULTS FOR NEAR HOUSE

SEE SHEET 3/3 FOR DEFICIENCIES OF EXISTING WELL

562TK

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
10/1/00	9	5'	2:22	2:23	2:23	2:24:30	1 1/2 MIN ✓
		OK 4 1/2'	-13'				
	10	4'	2:25	2:26	2:26	2:27:30	1 1/2 MIN ✓
		OK 3 1/2'	-13'				
	12	ABANDONED	CLAYEY TO 5'	SOLID ROCK @ 7'			
	11	ABANDONED - CLAY TO BEYOND 6'	(SANDY BELOW)				
	13	VIS OK 4 1/2' - 13'	(PROFILES INTERMEDIATE BETWEEN)	HOLE 9 & 10			✓
	14	3 1/2'	2:42	2:45	2:45	2:48	3 MIN ✓
	15	VIS OK 3 1/2' - 13'					✓

REMARKS THIS ACT. LOCATION

TYPE OF SOIL _____

TESTED BY C. Williams ALSO PRESENT HUGH COLE

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 2 MIN TRENCH WIDTH 3

INLET DEPTH 3 1/2 MAXIMUM BOTTOM DEPTH 5 1/2 SQ. FT./BEDROOM 180

APPLICATION

PERCOLATION TESTING

A 514251-B

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

Proposal - subdivision
Intent regarding ex.
house is uncertain

P _____
DISTRICT 3RD

DATE 9/12/00

(P 3/3)

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 QUINTON FERGUSON
11345 FREDERICK ROAD
ADDRESS ELLICOTT CITY, MD 21042 PHONE 410 531-2549

AGENT OR PROSPECTIVE BUYER BRANTWOOD LLC
8835-D COLUMBIA 100 PARKWAY
ADDRESS COLUMBIA, MD 21045 PHONE 410 730-5612

PROPERTY LOCATION:

SUBDIVISION FERGUSON PROPERTY LOT NO. _____

ROAD AND DESCRIPTION SOUTH SIDE OF FREDERICK ROAD (ROUTE 144) 500'± WEST OF
MARRIOTTSVILLE ROAD

TAX MAP 16 PARCEL # 147 GD 20

SIZE OF LOT 3 ACRE + TYPE BLDG. SINGLE FAMILY DETACHED
(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.

Hugh F. Cole, Jr.
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

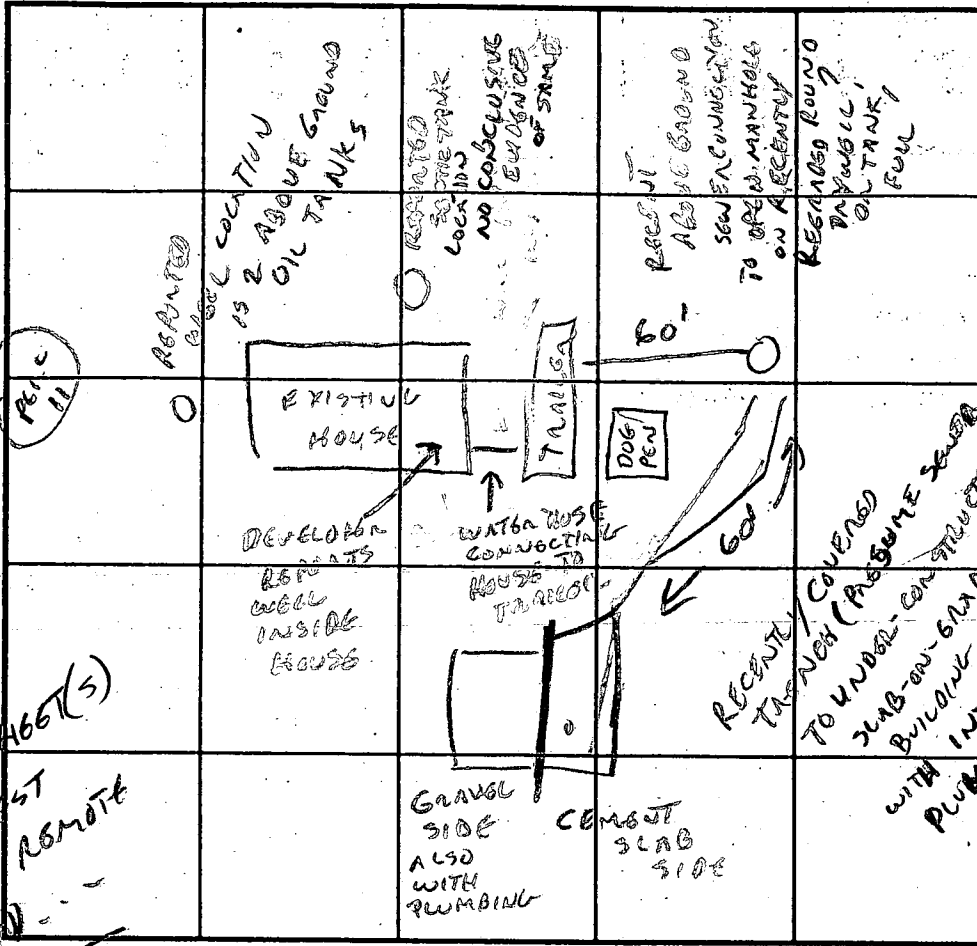
REASONS FOR REJECTION OR HOLDING _____

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

SHEET 3/3



SEE SEPARATE SHEET(S) FOR PERC TEST NOTES @ REMOTE LOCATION

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
10/11/00							
SITE INSPECTION OF EXISTING HOUSE RELATIVE TO PROPOSED SUBDIVISION PLAN SEPTIC & WELL LOCATION NOT AS SHOWN SEPTIC & WELL TEST APPLICATION BOTH FROM TANKS; CONNECTION TO UNDERWAY CONSTRUCTION SUBJECT TO PERMIT REQUIREMENTS							

REMARKS

TYPE OF SOIL

TESTED BY *C. Walker*

ALSO PRESENT *HUGH COLE*

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

TRENCH WIDTH

INLET DEPTH

MAXIMUM BOTTOM DEPTH

SQ. FT./BEDROOM

APPLICATION

PERCOLATION TESTING

A 514273

P _____

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

DISTRICT 3RD

DATE 9/28/00
9/27/00

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 QUINTON FERGUSON
11345 FREDERICK ROAD
ADDRESS ELLICOTT CITY, MD 21042 PHONE 410 531-2549

AGENT OR PROSPECTIVE BUYER BRANTWOOD LLC
8835-P COLUMBIA 100 PARKWAY
ADDRESS COLUMBIA, MD 21045 PHONE 410 730-5612

PROPERTY LOCATION:

SUBDIVISION FERGUSON PROPERTY LOT NO. 2

ROAD AND DESCRIPTION SOUTH SIDE OF FREDERICK ROAD (ROUTE 144) 500'± WEST OF
MARRIOTTSVILLE ROAD

TAX MAP 16 PARCEL # 147

SIZE OF LOT 5.0 AC± TYPE BLDG. SINGLE FAMILY DETACHED
(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.

Mary F. Cole
(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'

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	

REMARKS _____

TYPE OF SOIL _____

TESTED BY _____ ALSO PRESENT _____

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

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

3/324

S59°20'40"E

192.22'

S59°20'

Signed Revised
Per/Cert

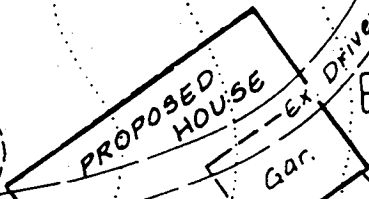
QUINTON FERGUSON
227/335
Zoned RC

ChB2

LOT 2
3.07 Ac ±

LOT 1
3.32 Ac ±

Ex Fence
to be
Removed



DRIVEWAY to be Removed

A514251 B
PREV. APPROVED
11/29/00

Reported
Ex. Well Located
in Ex. Dwelling
To Be Abandoned
#11 Clay

Ex. Dwelling
to be
Razed

Ex. Trailer
to be
Razed

ptic.
For
(in Use)
Abandoned

ChC2

LOT 3
3.00 AC ±

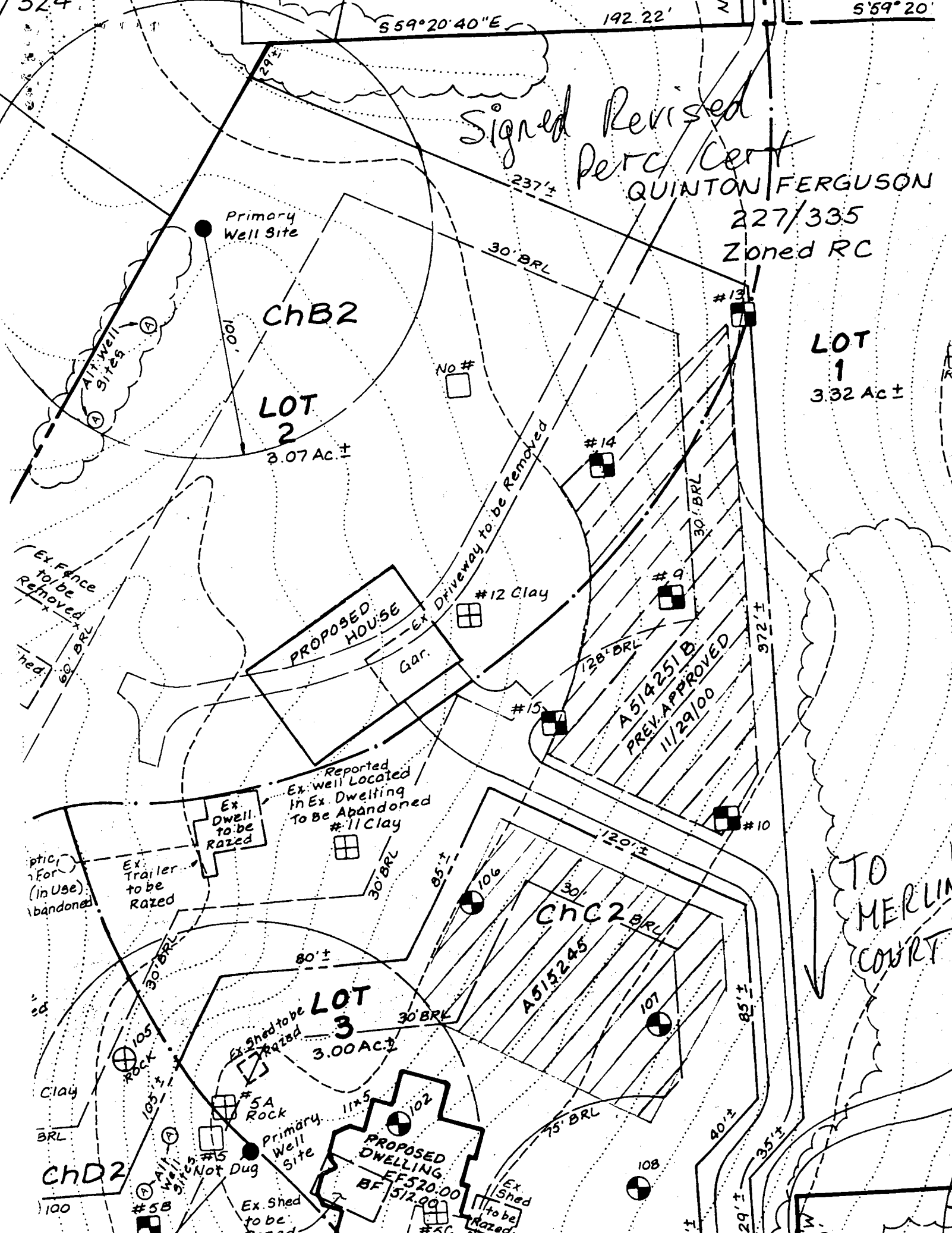
PROPOSED
DWELLING
FF520.00
BF512.00

TO MERLIN
COURT

ChD2

Primary Well Site
#5A Rock
#5B Not Dug

Ex. Shed
to be
Razed



N 58° 30' W 208.72' (Deed)

N 58° 30'

QUINTON FERGUSON
227/335
Zoned RC

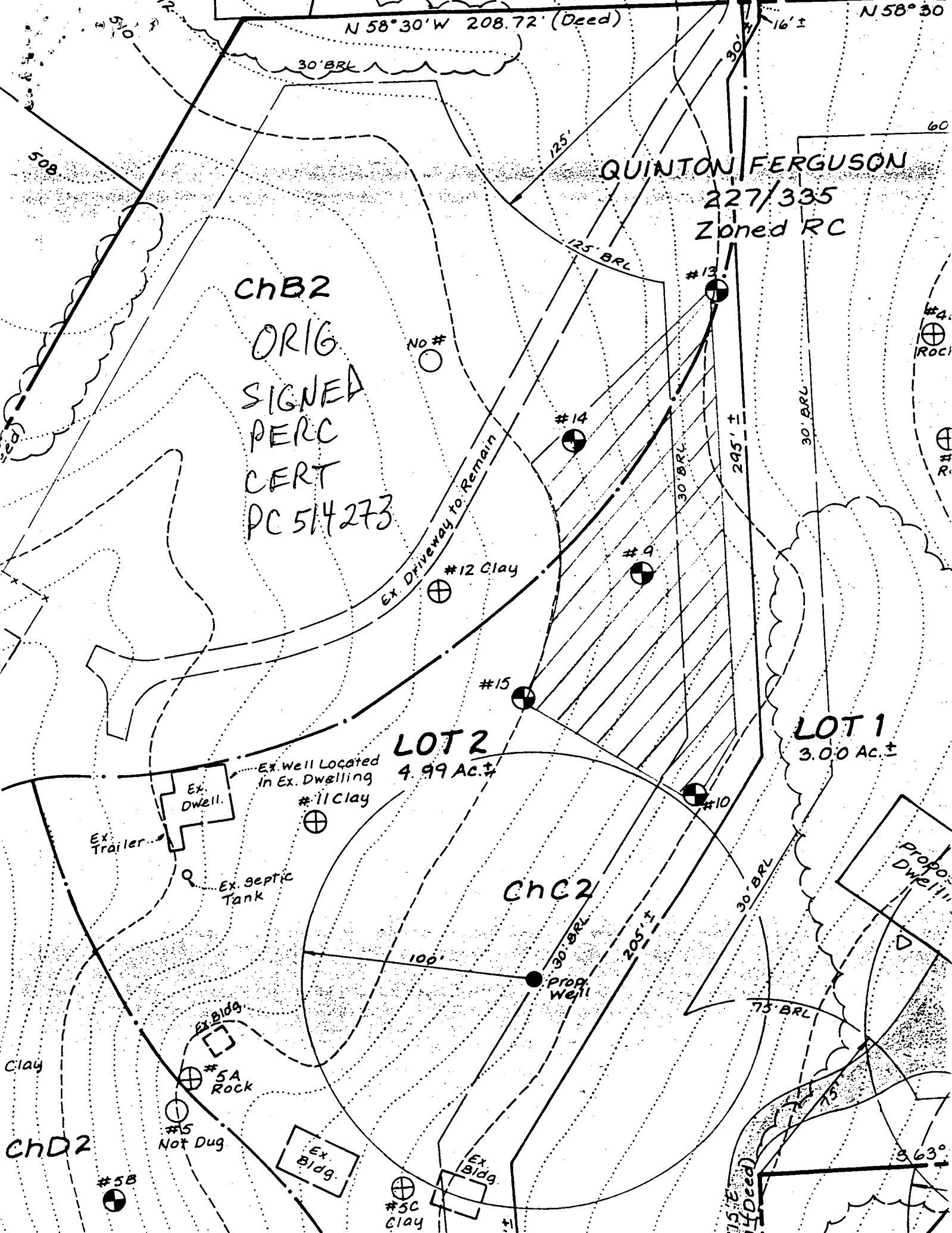
ChB2
ORIG
SIGNED
PERC
CERT
PC 514273

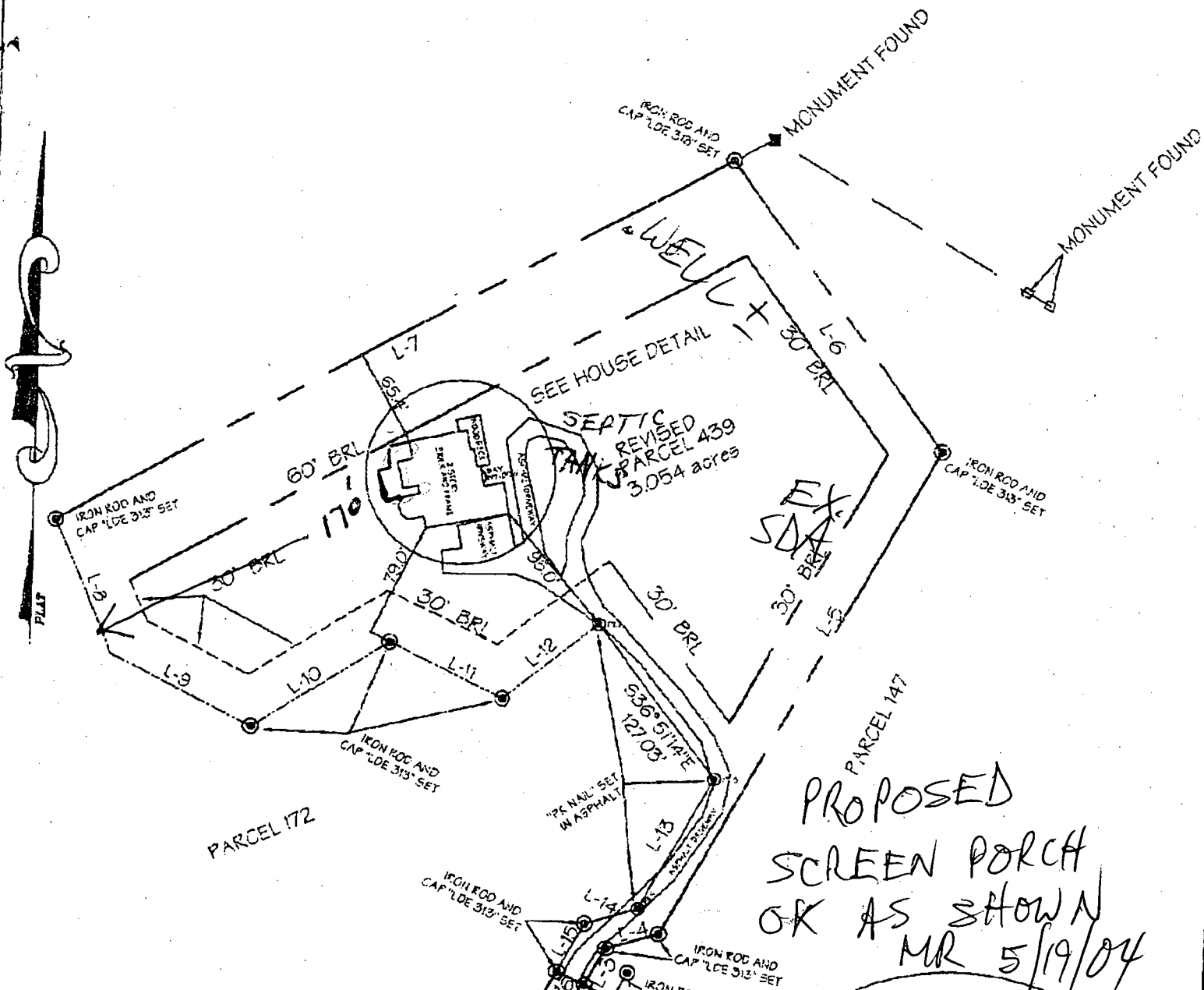
LOT 2
4.99 Ac. ±

LOT 1
3.00 Ac. ±

ChC2

ChD2



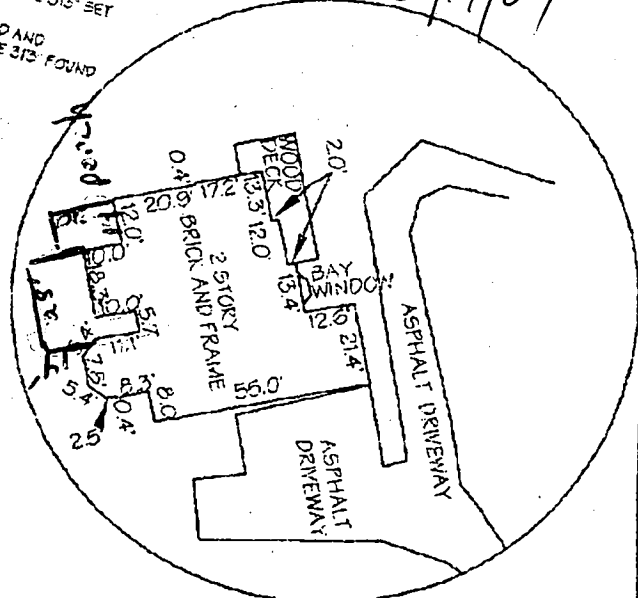


PARCEL 172

PROPOSED
SCREEN PORCH
OR AS SHOWN
MR 5/19/04

LINE TABLE

LINE#	BEARING	DISTANCE
L-1	S27° 04' 51" W	20.00'
L-2	N64° 07' 45" W	20.00'
L-3	N27° 04' 51" E	28.70'
L-4	N72° 04' 51" E	35.18'
L-5	N27° 43' 59" E	371.71'
L-6	N35° 55' 32" W	237.03'
L-7	S59° 51' 05" W	503.74'
L-8	S23° 29' 39" E	98.07'
L-9	S64° 07' 45" E	104.02'
L-10	N56° 59' 20" E	107.30'
L-11	S64° 28' 43" E	81.90'
L-12	N50° 24' 43" E	79.85'
L-13	S27° 43' 59" W	100.00'
L-14	S72° 04' 51" W	35.32'
L-15	S27° 04' 51" W	37.41'
L-16	S64° 07' 45" E	20.00'



HOUSE DETAIL
1"=50'

FINAL LOCATION DRAWING FOR PARCEL 439

CERTIFICATION

SEAL

**HOWARD COUNTY
 PERMIT APPLICATION**

PERMIT NUMBER

B-00147175/A

Building Address 3039 Mealin CT
Ellicott City, Md

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

Census Tract 603050 Subdivision Ellicott Manor

Section _____ Area _____ Lot 21

Tax Map 12 Parcel 439 Grid 20

Zoning R6 Map Coordinates 11AV Lot size _____

Property Owner's Name Chris Dinoto

Address 3035 Mealin CT

City Ellicott State Md Zip Code 21042

Home Phone 410-525-8774 Work Phone _____

Applicant's Name & Mailing Address, (if other than stated hereon): _____

Phone _____ Fax _____

Existing Use Single Family Dwell

Proposed Use Screen Porch / Deck

Estimated Construction Cost \$ 38,500

Description of Work 20'x14' Screen Porch
and 20'x14' Deck with steps

Contractor Company Blake Contractors

Contact Person Paul Blake

Address 4421 Walther Ave

City Baltimore State Md. Zip Code 21214

License No. 12145

Phone 410-254-8447 Fax Same

Occupant or Tenant _____

Contact Name Same

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Engineer or Architect Company _____

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

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 - RESIDENTIAL

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
1st floor: _____	Sewage Disposal: <input type="checkbox"/> Public <input checked="" 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: <input checked="" 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"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms _____	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R 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: <u>ASER/AST</u> 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 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.

Larry Tupis
 Applicant's Signature

MR 5/19/04
 Title/Company

Larry Tupis
 Print Name

4/1/04
 Date

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