

4/19/85
10-12 noon Inspt.

05-386716

APPROVED
4/19/85
P-34718
RH
A-26084

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
992-2330

ELLICOTT CITY
DISTRICT 5th
DATE 12/28/84

INDEXED

Robert L. Orndorff IS PERMITTED TO INSTALL ALTER

ADDRESS 7469 Flamewood Drive, Clarksville, MD PHONE 776-0444

SUBDIVISION Simpson Woods ROAD 7275 Meadow Wood Way LOT 1, Sec. 3

PROPERTY OWNER John McDonough Builders Mr. & Mrs. William Leppin
William Leppin
ADDRESS _____

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES NO

BLDG. PERMIT SIGNED
AND RETURNED 5/25/84 06/3/84
Serial 55036

SEPTIC TANK CAPACITY 2000 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 220 sq. ft. per bedroom with garbage disposal. Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth ~~2~~ feet below original grade. Effective area begins at 4 feet below original grade. ~~2~~ feet of stone below distribution pipe. LOCATION: Begin first trench 85 feet from Meadow Wood Way and 195 feet from the left lot line as seen when facing from Meadow Wood Way. Run trench along level ground toward right lot line. If additional trenches are required, use a distribution box and run additional trenches toward right lot line and run parallel and 10 feet away from first trench. when facing from Meadow Wood Way. Place additional trenches on level ground. NOTE: no trench to exceed 100 feet in length. Call for inspection trench(s) before and after gravel is installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

2/60 needed
Addition - Deck
BLDG. PERMIT SIGNED
AND RETURNED 11-8-95
Serial # 62582

BLDG. PERMIT SIGNED
AND RETURNED 4/21/94
Serial # 53464
Interior Alteration
DATE 12/10/84

PLANS APPROVED BY Sid Abel

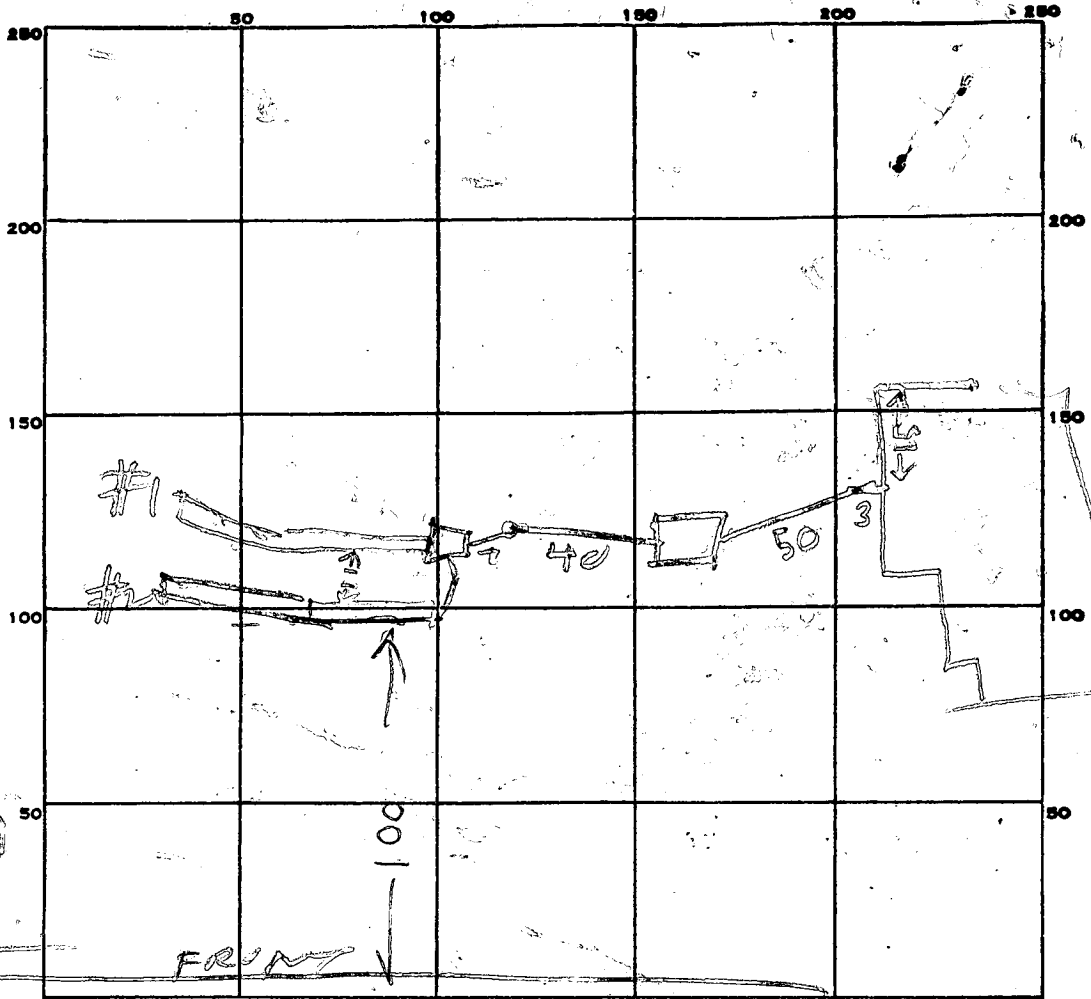
COVER NO WORK UNTIL INSPECTED AND APPROVED.

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

- NOTE: IF TRENCH IS USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH.
- NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER. NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH.
- NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 40 PVC OR ABS.
- PERMIT VOID AFTER THREE YEARS.
- NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT**

A 26084



INDICATE NORTH — NAME ADJOINING ROADWAY AS BASE LINE

M. EADON 4008 MAY 57

PERMIT CARD

SEPTIC TANK, LEVEL OK 2000

CLEANOUTS OK

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH

#1	#2
10	10

 FT. TRENCH WIDTH

#1	#2
3	3

 FT.

GRAVEL DEPTH

#1	#2
6	5

 IN. TOTAL LENGTH

#1	#2
24	25

 FT.

NUMBER OF TRENCHES 2 TOTAL BOTTOM AREA

#1	#2
504	325

 TOTAL 829

SEEPAGE PITS, INSIDE DIAMETER _____ FT. DEPTH BELOW INLET _____ FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS 4/9/85 - AM - FINISH TRENCHES & CALL

TRENCHES EXTRA WIDE

4/9/85 PM 4x 220 880 SPD FT REQUIRED

829 SQ FT INSTALLED BUT TRENCH

EXTRA WIDE

DATE SYSTEM APPROVED

4/9/85

INSPECTOR

Raymond Thorne

C1 **2885** SEQUENCE NO. (OEP USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

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

THIS REPORT MUST BE SUBMITTED WITHIN
 45 DAYS AFTER WELL IS COMPLETED.
 COUNTY NUMBER **A 26084**

DATE Received [] [] [] [] [] [] DATE WELL COMPLETED **701284** Depth of Well **400** (TO NEAREST FOOT) PERMIT NO. FROM "PERMIT TO DRILL WELL" **HO-81-0712**

OWNER **JOHN Mc DONOUGH BLDGS.** last name **MEADOWWOOD WAY** first name TOWN **HIGHLAND**
 SUBDIVISION **SIMPSON WOOD** SECTION **3** LOT **1**

WELL LOG
 Not required for driven wells
 STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (Use additional sheets if needed)	FEET		Check if water bearing
	FROM	TO	
Top soil	0	2	
Shaley	2	10	
Sand Stone	10	25	
Mica	25	30	
Shaley	30	45	✓
Mica	45	85	
Flint	85	87	✓
Mica	87	400	

GROUTING RECORD
 WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**
 TYPE OF GROUTING MATERIAL
 CEMENT **CM** BENTONITE CLAY **BC**
 NO. OF BAGS **6** NO. OF POUNDS **600**
 GALLONS OF WATER **30**
 DEPTH OF GROUT SEAL (to nearest foot) from **0** ft. to **25** ft.
 (enter 0 if from surface)

CASING RECORD
 casing types insert appropriate code below
ST CO STEEL CONCRETE
PL OT PLASTIC OTHER
 MAIN CASING TYPE **ST** Nominal diameter **6** inch top (main) casing (nearest inch) Total depth of main casing (nearest foot) **28**
57 **6** **28**

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

SCREEN RECORD
 screen type or open hole insert appropriate code below
ST BR HO STEEL BRASS OPEN HOLE
PL OT PLASTIC OTHER

C2

EACH SCREEN	DEPTH (nearest ft.)	
	1	2
1	70	26
2		
3		

CIRCLE APPROPRIATE LETTER
A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED.
E ELECTRIC LOG OBTAINED
P TEST WELL CONVERTED TO PRODUCTION WELL

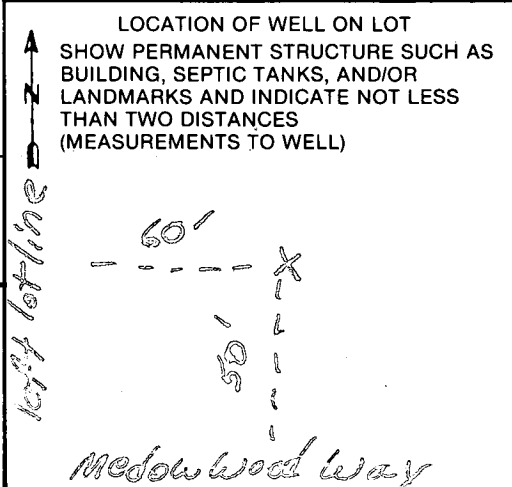
I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 10.17.13 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS IDENT. NO. **41**
 DRILLERS SIGNATURE **J. Land yesterday**
 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68
 OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)
 T (E.R.O.S.) WQ
 TELESCOPE CASING LOG INDICATOR OTHER DATA

C3
PUMPING TEST
 HOURS PUMPED (nearest hour) **6**
 PUMPING RATE (gal. per min. to nearest gal.) **2**
 METHOD USED TO MEASURE PUMPING RATE **bucket**
 WATER LEVEL (distance from land surface) BEFORE PUMPING **20** WHEN PUMPING **100**
 TYPE OF PUMP USED (for test) **S** submersible

PUMP INSTALLED
 DRILLER WILL INSTALL PUMP YES **NO**
 IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE
 TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE:
 CAPACITY: GALLONS PER MINUTE (to nearest gallon) PUMP HORSE POWER PUMP COLUMN LENGTH (nearest ft.)
 CASING HEIGHT (circle appropriate box and enter casing height) **+** above **-** below LAND SURFACE (nearest foot) **2**



FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-0712
 Location of property (road) MEADOW WOOD WAY
 Subdivision SIMPSON WOOD Lot 1 Block _____ Plat _____ Sec. 3
 Well Driller EASTADAY Owner J. McDONOUGH BLDGS

Depth of well 400'
 Distance of measuring point (M.P.) above ground 2'
 Static water level (S.W.L.) below M.P. 25'9"

High rate pumping -- reservoir drawdown
 Time pump started 8:10 Pumping rate 8.6 G.P.M.
 Total time 20 min to reach pumping water level 106'6" ft. below M.P.

1. Recovery pump test data - observations to be recorded every 15 minutes Pump 250'

TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE time to fill 1 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
8:30	106' 6"	40 sec		1 1/2 G.P.M.
8:45	106' 10"	40 sec		1 1/2 G.P.M.
9:00	107'	40 sec		1 1/2 G.P.M.
9:15	107'	40 sec		1 1/2 G.P.M.
9:30	107' 6"	40 sec		1 1/2 G.P.M.
9:45	107' 10"	40 sec		1 1/2 G.P.M.
10:00	107' 8"	40 sec		1 1/2 G.P.M.
10:15	108'	40 sec		1 1/2 G.P.M.
10:30	108' 1"	40 sec		1 1/2 G.P.M.
10:45	108' 4"	40 sec		1 1/2 G.P.M.
11:00	108' 6"	40 sec		1 1/2 G.P.M.
11:15	108' 6"	40 sec		1 1/2 G.P.M.
11:30	108' 6"	40 sec		1 1/2 G.P.M.
11:45	108' 7"	40 sec		1 1/2 G.P.M.
12:00	108' 7"	40 sec		1 1/2 G.P.M.
12:15	108' 9"	40 sec		1 1/2 G.P.M.
12:30	108' 10"	40 sec		1 1/2 G.P.M.
12:45	108' 10"	40 sec		1 1/2 G.P.M.
1:00	108' 10"	40 sec		1 1/2 G.P.M.
1:15	109'	40 sec		1 1/2 G.P.M.
1:30	109'	40 sec		1 1/2 G.P.M.
1:45	108' 9"	40 sec		1 1/2 G.P.M.
2:00	109' 2"	40 sec		1 1/2 G.P.M.
2:15	109' 6"	40 sec		1 1/2 G.P.M.
2:30	109' 6"	40 sec	Bruce	1 1/2 G.P.M.

B 1 **2186** SEQUENCE NO. (OEP USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

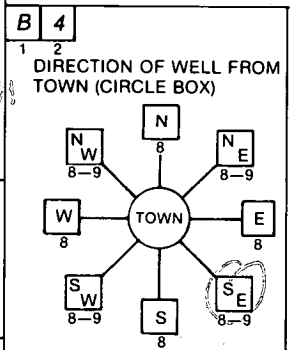
STATE OF MARYLAND *3rd*
 PERMIT TO DRILL WELL
 please print or type

OEP PERMIT NUMBER
40-81-0712
 fill in this form completely

Date Received **10/11/84**
 OWNER INFORMATION
 15 Last Name **JOHN MCDONOUGH** Owner First Name **BULLIERS**
 36 Street or RFD **5829 HANNAKER RD**
 57 Town **COLUMBIA** 70 State **72** Zip **21044** 76

B 3 LOCATION OF WELL
 8 COUNTY **STEARNS** 21
 23 SUBDIVISION **SIMPSON WOOD** 42
 SECTION **3** 44 46 LOT **1** 48 50
 52 NEAREST TOWN **Wichland** 71
 MILES FROM TOWN (enter 0 if in town) **2** 73 **M I** 76 77 78

DRILLER INFORMATION
 Driller's Name **James E. ...** 77 License No. **80**
 Firm Name **...**
 Address **265 E. ...**
 Signature **...** Date



11 NEAR WHAT ROAD **...** 30
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 NORTH **N** WEST **W** EAST **E** SOUTH **S**
 34 **50** 37 DISTANCE FROM ROAD
 ENTER FT or MI **7** 38 39

B 2 WELL INFORMATION
 APPROX. PUMPING RATE (GAL. PER MIN.) **...** 8 12
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **500** 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)
 HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
 INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
 PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
 TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
 County Name **HOWARD** COUNTY NO. **A26084**
 OEP SIGNATURE **...** STATE HEALTH INSERT S **41**
 DATE ISSUED **090784** CO SIGNATURE **...** EXP. DATE **3/7/87**
 NORTH GRID **489000** 50 55 EAST GRID **0822000** 57 63

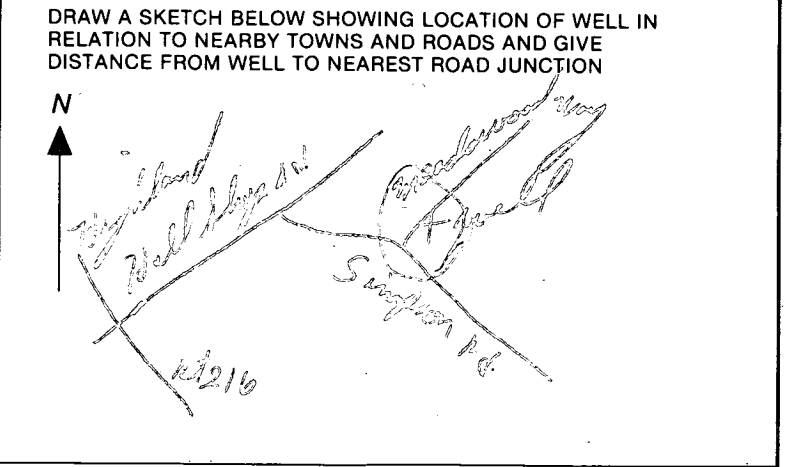
APPROXIMATE DEPTH OF WELL **200** 24 28 FEET

APPROXIMATE DIAMETER OF WELL **6** NEAREST INCH

METHOD OF DRILLING (circle one)
 BORED (or Augered) JETTED Jetted & DRIVEN
 AIR-ROTary AIR-PERcussion ROTARY (Hydraulic Rotary)
 CABLE REVERSE-ROTary Drive-POINT
 other

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
 SOURCES OF DRILLING WATER
 1. **...**
 2. **...**
 3. **...**
 WRITE THE BOX NUMBER FROM THE MAP HERE
 E **820** 2
 N **480** 7
 000 000

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
 THIS WELL WILL DEEPEM AN EXISTING WELL
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 **...** 52



Not to be filled in by driller (OEP USE ONLY)
 APPROP. PERMIT NUMBER **G A P** 54 63
 FORCE **...** WRITE INITIALS IN BOX PERMIT No. **40-81-0712** 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS

APPLICATION

A 26084

SEWAGE DISPOSAL TESTING

P _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

①

DISTRICT 5th

P.O. BOX 475, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 443-3000, EXT. 356

DATE June 8, 1977

Septic SYSTEM
Before Building

Permit

Septic Tank - 3 bedroom - 1000 gal
4" = 1250 gal
Dry Well - 150 sq ft absorbent sidewalk area per bedroom to begin below the first 4' of avg. grade. Min depth permitted for this is 10' below 4' avg. grade.
Place Dry Well 85' from Meadow Wood Way & 195 ft from the left side as seen when facing from Meadow Wood Way.

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

Jack & Peg Cox

PROPERTY OWNER Phase II Ltd. c/o Landborg, Inc.

ADDRESS 1000 Century Plaza, Columbia, Md. 21044 PHONE 730-0500

PROPERTY LOCATION:
SUBDIVISION Simpson Woods (Sect. 3) LOT NO. 10, Block D

①, Sec 3

ROAD AND DESCRIPTION N.E. side of Simpson Rd.; 2000'± West of Pindell School Rd.
Fronting on Road "A" 7275 Meadow Wood Way

SIZE OF LOT 40,000 square feet TYPE BLDG. 3 or 4
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

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

SIGNATURE OF APPLICANT Phase II, Ltd, c/o Landborg, Pres.

APPROVED BY [Signature] FOR Dry Well DATE 6-4-80
(KIND OF SYSTEM)

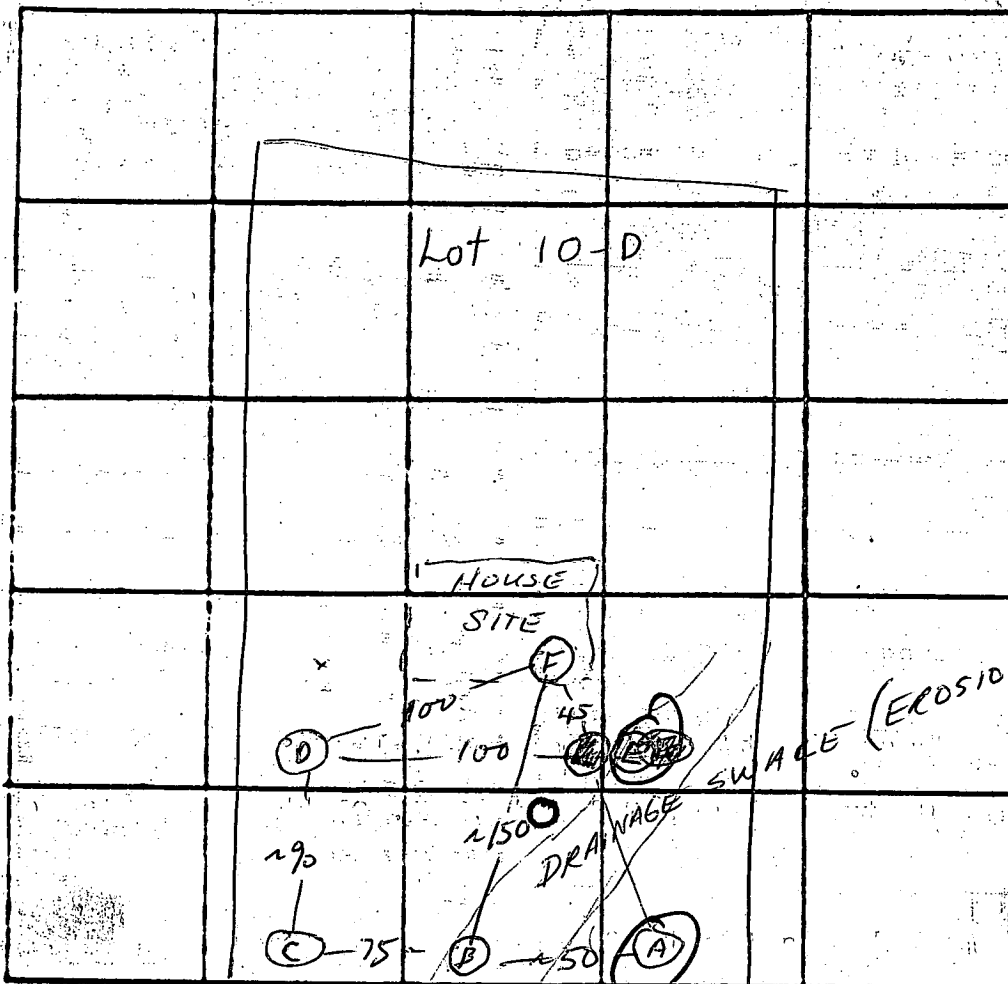
REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS WWZ DATE 6/20/77

REASONS FOR REJECTION OR HOLDING prelim & final plans w certified test
notes [Signature] BR#61499

BLDG. PERMIT SIGNED
AND RETURNED 10-30-80

THIS IS NOT A PERMIT



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.
 UNNAMED RD

DATE	TEST NO.	DEPTH °	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
6/15/77	C	5	11:45	11:49	11:49	11:53	4
	C-1	12	11:45	11:49	11:49	11:55	6
	D	3 1/2	12:00	12:02	12:02	12:07	5
	D-1	12	12:00	12:08	12:08	12:25	17
	E	3 1/2	12:07	NO MOVEMENT			
	E-1	10 1/2	VISUAL	Rock	good soil down to rock		
	B	12 1/2	VISUAL	GOOD SOIL FROM 5'; HARD BOTTOM			
	A						
	A-1	10 1/2	Solid rock	top 6 1/2' clay			
	B	4	1:42	1:51	1:51	2:05	14
B-1	12 1/2	1:44	1:58	1:58	2:24	26	
F	4 1/2	2:16	2:19	2:19	2:30	11	
F-1	12 1/4	2:16	2:19	2:19	2:25	6	

REMARKS F → pt 40' uphill fr D
 System in ~~to~~ → ~~to~~; DW & trench

TYPE OF SOIL Red sandy loam

TESTED BY WNB

ALSO PRESENT: Boy, Ketterma, C

11/03
APPLICATION

20084

HOWARD COUNTY

PERMIT APPLICATION

DEPARTMENT OF INSPECTIONS, LICENSES & PERMIT
3430 COURT HOUSE DRIVE, ELLICOTT CITY, MARYLAND 21043

SERIAL NUMBER

53114

1082503
Bal 47.50
122.50/d

BUILDING ADDRESS (HOUSE NO., STREET, TOWN OR AREA)

7275 MEADOW WOOD WAY
CLARKESVILLE, MD 21029
SIMPSON WOODS

GRADING/SEDIMENT CONTROL YES NO

SDP #

DESCRIPTION OF WORK AUTHORIZED

FINISH CIVIL BASEMENT
INSTALL BATHROOM (ROUGHED
IN DURING CONSTRUCTION)
INCLUDES HOME OFFICE, REAR
5413 ROOMS UTILIZATION

LOT NO.	PARCEL NO.	SEC.	AREA	BLOCK NO.	LIBER	FOLIO
SUB DIVISION		ZONE	ZONE MAP	ELEC. DIST.	CENSUS TR.	
				5		

OWNER NAME AND ADDRESS

Mrs & Mrs WILLIAM LEOGIA (301)
7275 MEADOW WOOD WAY
CLARKESVILLE, MD 21029

PHONE NO.

470-3145

OCCUPANT'S NAME AND ADDRESS

SAME

PHONE NO.

ARCHITECT OR ENGINEER'S NAME AND ADDRESS

PHONE NO.

SIZE OF BLDG.	FRONT	DEPTH	HEIGHT

TYPE OF BLDG.	AREA	VOLUME	ROOF
B. ROOMS			
ROOMS			
BATHS			
FIREPLACES			

FOOTINGS	FOUNDATION	S. WALLS

CONTRACTOR'S NAME AND ADDRESS

WILLIAM W. COOPER
RIDGECREST REMODELING (410)
504 HARBOR ROAD
BALTIMORE, MD 21212

PHONE NO.

377-5977

EXISTING USE	PROPOSED USE
SINGLE FAMILY RESIDENCE	SAME / BSM

EST. CONSTRUCTION COST	LICENSE NUMBER	PERMIT FEE
\$20,000	5726	

UTILITIES					
WATER/WELL	SEWER/SEPTIC	GAS	ELECTRICITY	TYPE OF HEAT	AC

I have carefully examined and read this application and know the same is true and correct, and that in doing this work, all provisions of Howard County Ordinances and the State Laws of Maryland will be complied with, whether specified or not; and I will notify the Department of Inspections, and Permits twenty-four hours in advance when I am ready for the inspections called for elsewhere in the application; and that no work will be covered up until such inspections have been complied with.

SIGNATURE: [Signature]
TITLE: [Title]
DATE: 4/21/94

W/S CODE

FOR OFFICE USE ONLY

DISTRICT IN FEET FROM R/W LINE TO FRONT BUILDING LINE

SIDE YARD (DISTANCE IN FEET FROM SIDE BLDG. LINE TO SIDE PROPERTY LINE)

TO SIDE BUILDING LINE DISTANCE IN FEET, REAR YD. REQUIRING SET

BACK (CORNER LOT ONLY)

SDP #

Check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

CAUTION

To begin construction before a permit placard has been issued and displayed on the job is a violation of the law.

Use and occupancy permit must be applied for two weeks before it will be issued.

FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING		
SHA		
SEDIMENT/GRADING		
BUILDING OFFICIAL		
WATER & SEWER		
HEALTH DEPT.	4/21/94	A. McMiller
FIRE PROTECTION		
STORM WATER MGM.		

APPROVED

DATE

IMPORTANT: PLEASE SHOW ZIP CODES AND AREA CODES WHEREVER REQUIRED.

4/21/94 LP-89-591 Permit was signed with extra bedroom because the septic tank was originally sized for 2000 gal. A.M.

Distribution of Copies:
White - Building Official
Green - Planning & Zoning

Yellow - Engineering
Pink - Health Dept.
Gold - S.H.A.

NOTE: ALL PIPE FROM ROOFS

PERMIT VOID AFTER THREE YEARS.

NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT.**

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

Property known as: LOT 1
 SIMPSON WOODS
 SECT. 3 AREA 1 LOTS 1 THRU 26 SHT. 1 OF 3
 5TH ELECT. DIST. HOWARD CO., MARYLAND

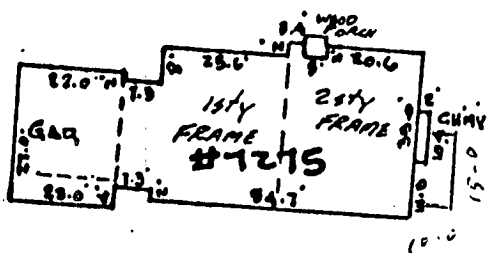
THIS PLAT CANNOT BE USED TO ESTABLISH PROPERTY LINES OR CORNERS.

PLAT # 4562

7275 Meadowwood Way
 Clarksville, MD 21029

William Keeper 301-470-3145
 owner

William W. Cooper T/A
 Ridgecrest Remodeling
 504 Murdock Rd
 Balt, MD 21212
 410-377-5977

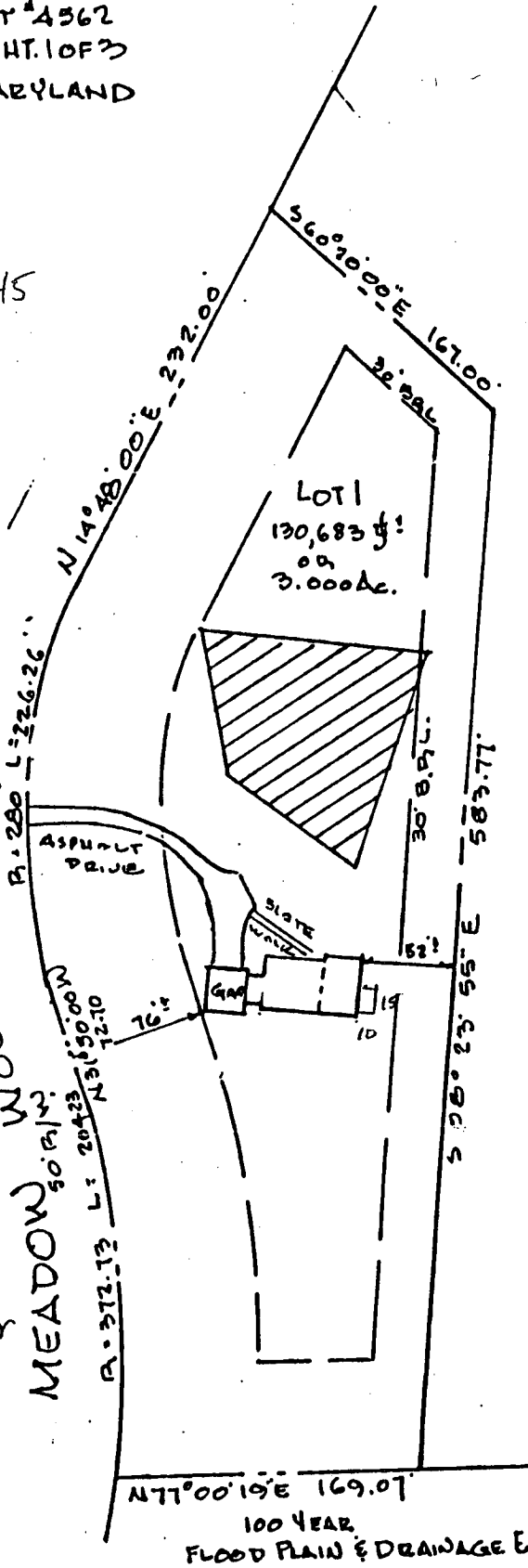


1"=40'

Storage shed Proposed.
 Well location appears to be at ~~corner~~ left side or along side ~~back~~ front lot line. Likelihood of well next to house is small.
 Recommendation for approval of shed facility
 6-23-94 Alan E. Nadeau

WOOD WAY

MEADOW WOOD WAY
 50 FT W



2

LOCATION SURVEY PLAT

5-21-1986

CERTIFICATION

This is to certify that I have surveyed the property known as: #7275

7275 MEADOW WOOD WAY

for the purpose of locating the improvements thereon, and the improvements are located as shown.

SEAL



Walter Park

SCALE: 1"=100' DATE:

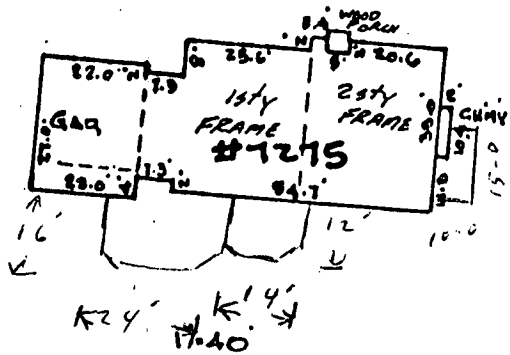
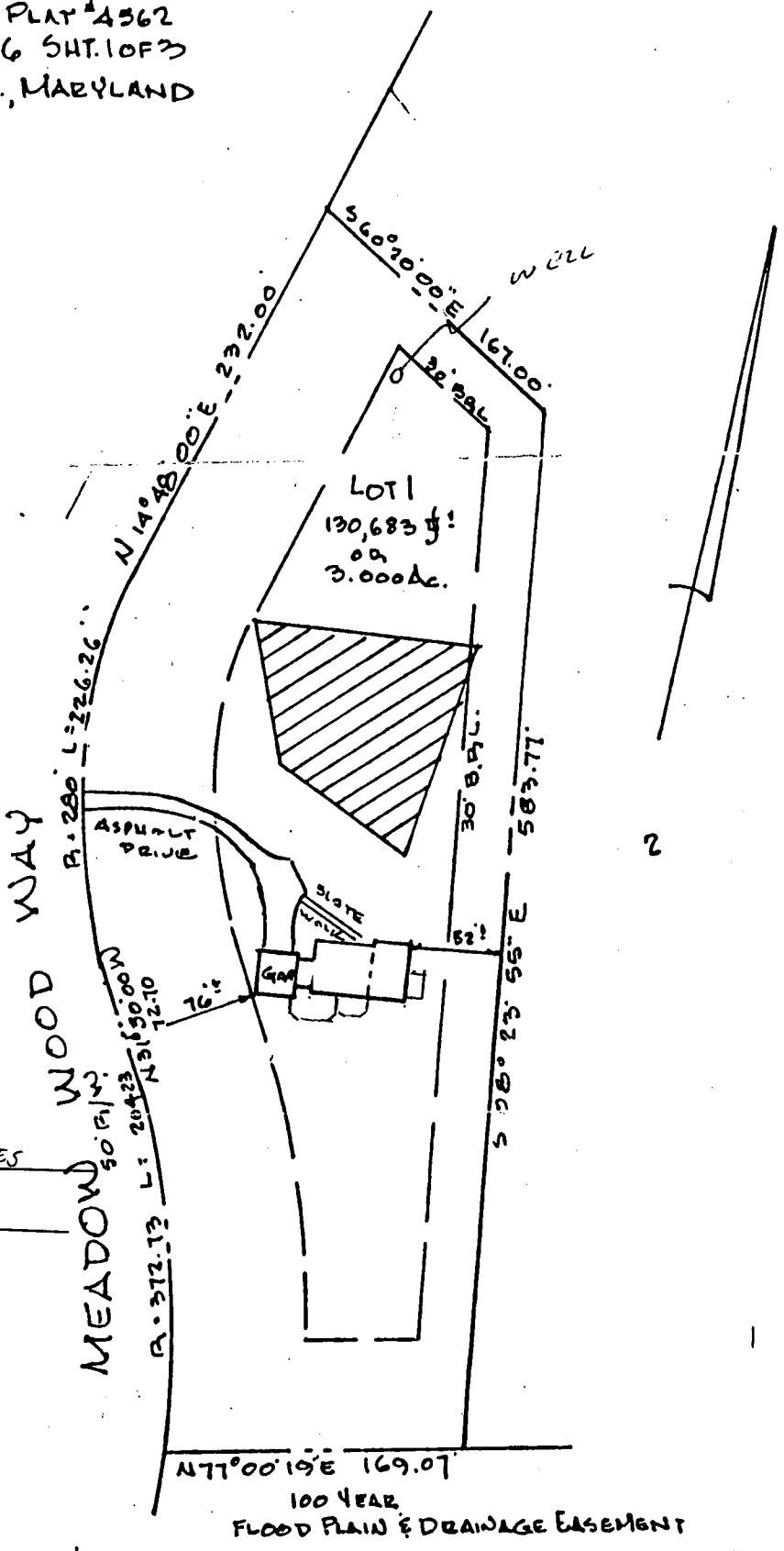
PHONE
 828-9060 TOWSON
 730-9080 COLUMBIA

HUDKINS ASSOCIATES, INC.
 Surveyors and Subdivision Designers

SUITE 231, JOSEPH SQUARE
 5485 HARPERS FARM ROAD
 WALTER PARK, L.S. COLUMBIA, MARYLAND 21044
 # 5537

Property known as: **LOT 1**
SIMPSON WOODS
 SECT. 3 AREA 1 LOTS 1 THRU 26 SHT. 10F33
 5TH ELECT. DIST. HOWARD CO., MARYLAND

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




11-8-95 PROPOSED DECK DEES
 NOT IMPACT WELL OR SEPTIC
 Glen J. Santarian

LOCATION SURVEY PLAT

313-2640

5-21-1986

<p>CERTIFICATION</p>	<p>SEAL</p>	<p>SCALE: 1"=100' DATE:</p>
<p>This is to certify that I have surveyed the property known as: <u>#7275</u></p> <p><u>7275 MEADOW WOOD WAY</u></p> <p>for the purpose of locating the improvements thereon, and the improvements are located as shown.</p>	 <p>Walter Park</p>	<p>PHONE 828-9060 TOWSON 730-9060 COLUMBIA</p> <p>HUDKINS ASSOCIATES, INC. Surveyors and Subdivision Designers</p> <p>SUITE 231, JOSEPH SQUARE 8485 HARPERS FARM ROAD WALTER PARK, L.S. COLUMBIA, MARYLAND 21044 # 5539</p>