

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

B00144305-MER

Building Address 15084 Bushy Park Rd
Woodbine, MD 21797

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

Census Tract 6090.01 Subdivision The Oaks

Section _____ Area _____ Lot 2

Tax Map 8 Parcel 666 Grid 21

Zoning R-c Map Coordinates B513 Lot size 1.5 acres

Property Owner's Name Steven and Ann Leaf

Address 4540 Ten Oaks Rd

City Dayton State MD Zip Code 21036

Home Phone 410 917 6070 Work Phone 410 917 6070

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

Phone _____ Fax 410-489-6145

Existing Use unimproved lot/existing home

Proposed Use single family home

Estimated Construction Cost \$ 350,000

Description of Work construct two story single family home, 5 BR 4F, 1/2 Bath, unfinished basement, attached two car garage, 2 gas units,

Contractor Company _____

Contact Person Steven Leaf

Address 4540 Ten Oaks Rd

City Dayton State MD Zip Code 21036

License No. _____

Phone 410 917 6070 Fax 410 531 0420

Occupant or Tenant _____

Contact Name Steven or Ann Leaf

Address 4540 Ten Oaks Rd

City Dayton State MD Zip Code 21036

Phone 410 917 6070 Fax 410 917 4588

Engineer or Architect Company (mail order plan)

Contact Person Steven Leaf

Address 4540 Ten Oaks Rd Dayton

City 410 917 6070 MD Zip Code 21036

Phone 410 531 5874 Fax 410 531 0420

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: _____	Water Supply: _____ Public _____ Private <input checked="" type="checkbox"/>
No. of stories: _____	Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/>
Gross area, sq. ft. per floor: _____	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: _____ Electric <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> <u>+ electric</u>
Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____	Sprinkler system: <u>N/A</u> <input checked="" type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____
State Certified Modular _____	

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: _____ Public _____ Private <input checked="" type="checkbox"/>
1st floor: Depth <u>31'</u> Width <u>70'6"</u>	Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/>
2nd floor: Depth <u>31'</u> Width <u>70'6"</u>	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Basement: <u>31' garage 70'6"</u>	Heating System: _____ Electric <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input checked="" type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/>	Sprinkler system: <u>N/A</u> <input checked="" type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	
No. of Bedrooms <u>5</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>poured concrete</u> Roof: <u>asphalt shingle</u>	
State Certified Modular _____ 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.

Ann Leaf, Steven Leaf
 Applicant's Signature

Ann Leaf, Steven Leaf
 Print Name

9/28/03
 Date

10/23/03 MR
 Title/Company

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

1. THE CONTOURS SHOWN HEREON ARE BASED ON HOWARD COUNTY AERIAL PHOTOGRAPHY DATED APRIL, 1998 AND VERIFIED BY ON SITE SURVEYS.

2. SITE ADDRESS: 15084 BUSHY PARK ROAD WOODBINE, MARYLAND 21797

3. EXISTING ZONING IS RCDEO

5. OWNER/BUILDER: ~~FRAGMENT-ROSES~~ Steven and Ann leaf

4540 TEN OAKS ROAD DAYTON, MARYLAND 21036

6. THE LOTS SHOWN HEREON COMPLY WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREA AS REQUIRED BY THE MARYLAND DEPARTMENT OF THE ENVIRONMENT.

7. PAVEMENT SPECIFICATIONS: 4" #2 STONE
3" CR6
3" ASPHALT

8. PROPERTY DATA: FIRST PARCEL RECORDED AMONG THE LAND RECORDS OF HOWARD COUNTY, IN LIBER 319 AT FOLIO 572.

LEGEND

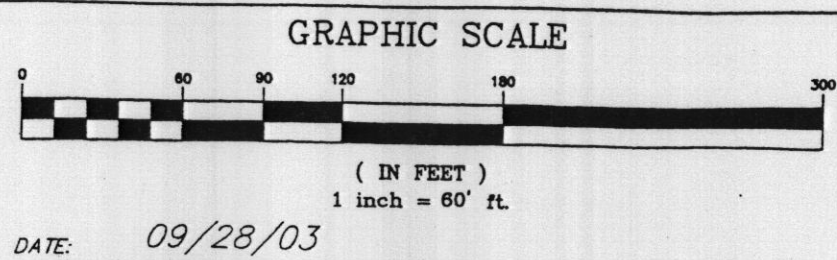
EXISTING 10 FOOT CONTOURS ——— 282

DIRECTION OF DRAINAGE FLOW ———

EXISTING 2 FOOT CONTOUR - - - - -

SILT FENCE ——— S.F. ———

LIMIT OF DISTURBANCE ——— LOB ———



ELEVATIONS

EXISTING	PROPOSED
ELEVATION OF WELL AT GRADE	607.9'
FIRST FLOOR BASEMENT	608.0'
INVERT OUT OF HOUSE	600.0'
GRADE AT SEPTIC TANK	601.5'
INVERT INTO SEPTIC TANK	599.1'
GRADE AT DISTRIBUTION BOX	600.6'
INVERT INTO SEPTIC TANK	597.8'
GRADE AT TRENCHES	600.6'
INVERT INTO DISTRIBUTION BOX	597.4'
INVERT OUT OF DISTRIBUTION BOX	597.2'
INVERT INTO TRENCH	597.1'

APPROVED

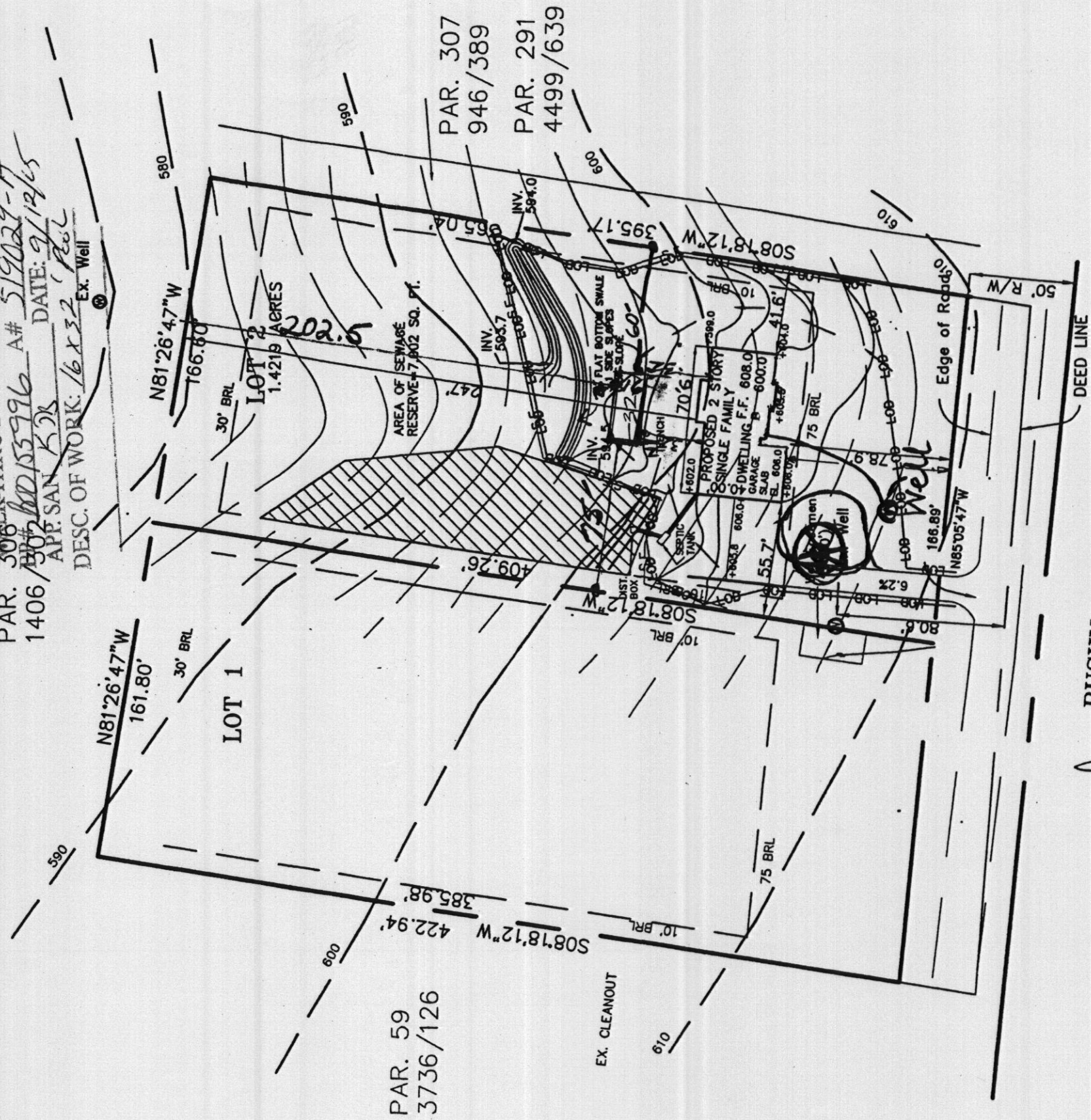
306 WALK-THRU BUILDING PERMIT

PAR. 306 / 1406 / 302 / 155996 A# 519029-A

DATE: 9/12/03

APP. SAN. B.28

DESC. OF WORK: 16 X 32' Ex. Well



MARKS & ASSOCIATES L.L.C.

SURVEYING-ENGINEERING-LAND PLANNING
4531 COLLEGE AVENUE ELlicOTT CITY, MARYLAND
TELEPHONE (410)747-8738 FAX (410)747-8739

PLOT PLAN

THE OAKS AT BUSHY PARK
LOT 2

(PLAN IDENTIFICATION NO. PC 519029)

TAX MAP #8
4TH ELECTION DISTRICT

PARCEL 66
HOWARD COUNTY, MARYLAND



[Handwritten signature]

REVISED

Date: 10/28/03

Comments: 1600144 305

COUNTY HEALTH OFFICER

APPROVED: FOR PRIVATE WATER AND SEWAGE SYSTEMS ON LOTS 1 & 2

DATE

[Handwritten signature]

Revision O.K.'d by H.D. 10/28/03 *[Handwritten signature]*

**HOWARD COUNTY
 PERMIT APPLICATION**

PERMIT NUMBER

B00149459K2

Building Address **15084 BUSHY PARK RD**
Woodbine, MD, 21797
 Suite/Apt. #: _____ SDP/WP/Petition #: _____
 Census Tract **604001** Subdivision **The Oaks**
 Section _____ Area _____ Lot **2**
 Tax Map **8** Parcel **46** Grid **21**
RCDEO
 Zoning _____ Map Coordinates **3513** Lot size _____

Property Owner's Name **Steven Leaf**
 Address **15084 Bushy Park Rd.**
 City **Woodbine** State **MD** Zip Code **21797**
 Home Phone **410-489-6145** Work Phone _____
 Applicant's Name & Mailing Address, (if other than stated hereon): _____

Existing Use _____
 Proposed Use **Dwelling**
 Estimated Construction Cost \$ **1500.**
 Description of Work **Install 500 gal underground propane tank with gaslines to house stub installed by others**

Contractor Company **Carroll Fuel Co.**
 Contact Person **Leon Kucharski**
 Address **2700 Park Lane Rd**
 City **Bald** State **MD** Zip Code **2128**
 License No. **60353**
 Phone **410-235-1866** Fax **410-235-8511**

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

Engineer or Architect Company _____
 Contact Person _____
 Address _____
 City _____ State _____ Zip Code _____
 Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics		Utilities	
Height:		Water Supply:	
No. of stories:		Public <input type="checkbox"/>	
Gross area, sq. ft. per floor:		Private <input type="checkbox"/>	
Use group:		Sewage Disposal:	
Construction type:		Public <input type="checkbox"/>	
<input type="checkbox"/> Reinforced Concrete		Private <input type="checkbox"/>	
<input type="checkbox"/> Structural Steel		Electric Yes <input type="checkbox"/> No <input type="checkbox"/>	
<input type="checkbox"/> Masonry		Gas Yes <input type="checkbox"/> No <input type="checkbox"/>	
<input type="checkbox"/> Wood Frame		Heating System:	
<input type="checkbox"/> State Certified Modular		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"/>	
		Full _____	
		Partial _____	
		Other Suppression _____	
		# of Heads _____	

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

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERE TO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THE PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Leon Kucharski
 Applicant's Signature
Carroll Fuel Co
 Title/Company

LEON KUHARSKI
 Print Name
7-16-04
 Date

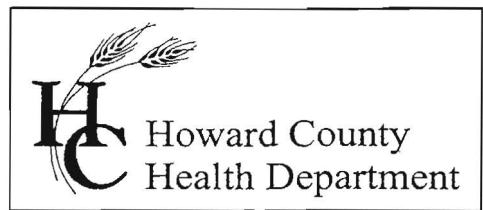
Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
**** PLEASE WRITE NEATLY AND LEGIBLY ****
- FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#
Land Development, DPZ			Front: _____	576666
State Highways			Rear: _____	Filing fee \$ 100
Building Official			Side: _____	Permit fee \$ 10
Dev. Engineering, DPZ			Side St.: _____	Excise tax \$ _____
Health	8/10/04	Kaci Norman	All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	Add'l per fee \$ _____
Fire Protection			Is Entrance Permit required? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOTAL FEES \$ 110
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>			Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
CONTINGENCY CONSTRUCTION START <input type="checkbox"/>			Lot Coverage for New Town Zone _____	Balance due \$ _____
ONE STOP SHOP <input type="checkbox"/>			SDP/Red-line approval date _____	Check 9634
				Validation 7354
				Accepted by DZ

B00149459

15084 Booby Park Dr.

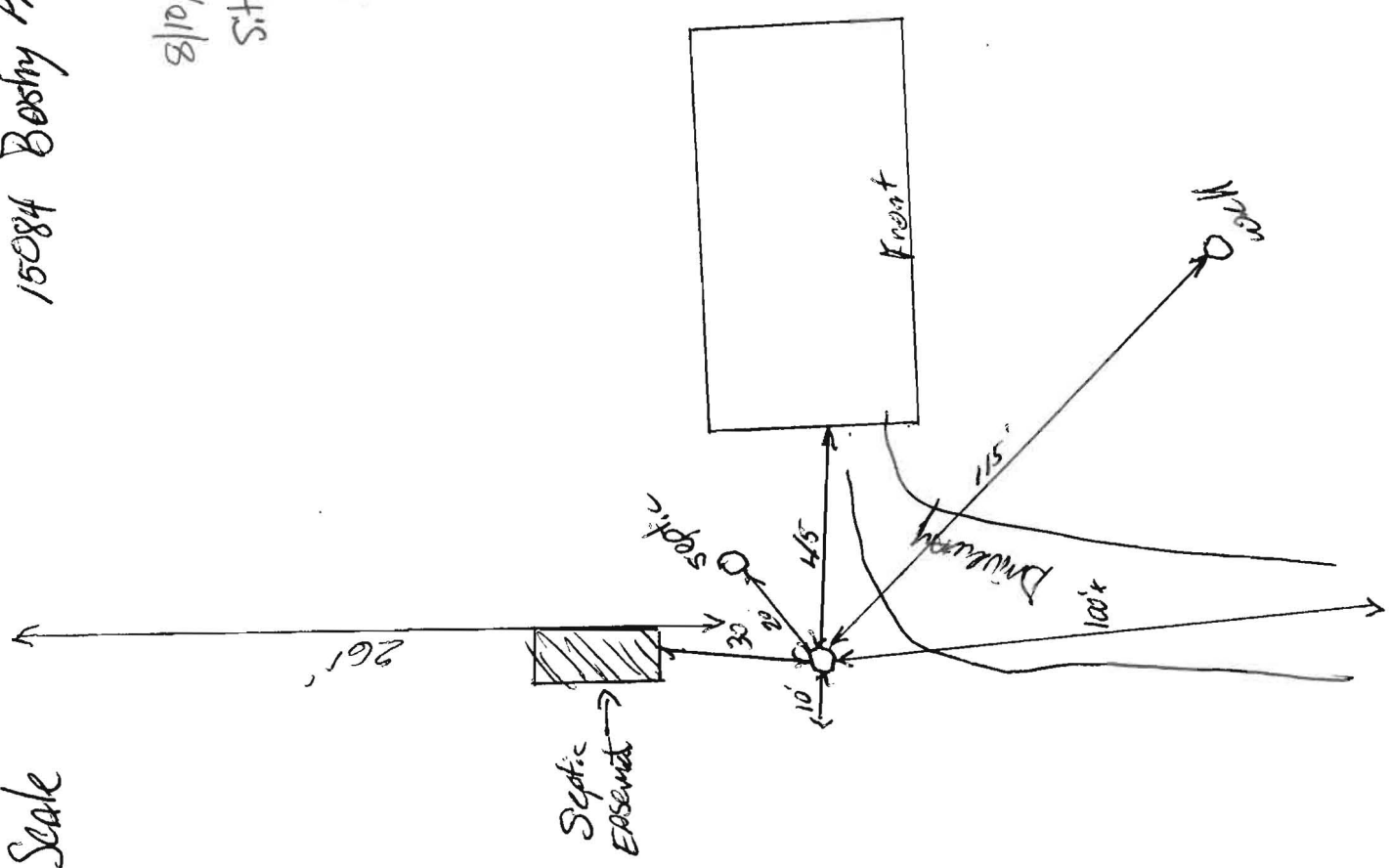
40 - Scale



3525 H Ellicott Mills Drive, Ellicott City, MD 21043
 (410) 313-2640 Fax (410) 313-2648
 TDD (410) 313-2323 Toll Free 1-866-313-6300
 website: www.hchealth.org

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

8/10/04
 Site plan to
 scale
 BPO0149459 OK
 for LP tank (XN)



HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

B00149091

Building Address <u>15084 Bushy Park Rd</u> <u>Woodbine Md 21797</u> Suite/Apt. #: _____ SDP/WP/Petition #: _____ Census Tract <u>60400</u> subdivision <u>The Oak at Bushy Park</u> Section _____ Area _____ Lot <u>2</u> Tax Map <u>18</u> Parcel <u>66</u> Grid <u>21</u> Zoning <u>RCDER</u> Map Coordinates <u>3313</u> Lot size _____	Property Owner's Name <u>Steven Alan Leaf</u> Address <u>15084 Bushy Park Rd</u> City <u>Woodbine</u> State <u>Md</u> Zip Code <u>21797</u> Home Phone <u>410-489-6154</u> Work Phone <u>Same</u> Applicant's Name & Mailing Address, (if other than stated hereon): _____ Phone _____ Fax _____
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Existing Use <u>SFD</u> Proposed Use <u>Same with Deck</u> Estimated Construction Cost \$ <u>2,000</u> Description of Work <u>16x34 Deck AT Rear</u> <u>with steps to grade</u>	Contractor Company <u>Owner</u> Contact Person _____ Address _____ City _____ State _____ Zip Code _____ License No. _____ Phone _____ Fax _____
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Occupant or Tenant <u>Owner</u> Contact Name _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____	Engineer or Architect Company _____ Contact Person _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____
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BUILDING DESCRIPTION - <u>COMMERCIAL</u>		BUILDING DESCRIPTION - <u>RESIDENTIAL</u>	
Building Characteristics 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	Utilities Water Supply: <input checked="" 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 type="checkbox"/> No <input type="checkbox"/> Heating System: Electric <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input checked="" type="checkbox"/> Sprinkler system: N/A <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression # of Heads _____	Building Characteristics 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	Utilities Water Supply: <input checked="" 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 type="checkbox"/> No <input type="checkbox"/> Heating System: Electric <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input checked="" type="checkbox"/> Sprinkler system: N/A <input checked="" 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.

Applicant's Signature <u>Steven A. Leaf</u> Title/Company _____	Print Name <u>Steven G. Leaf</u> Date <u>6/23/04</u>
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Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
**** PLEASE WRITE NEATLY AND LEGIBLY. ****
- FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL
<input checked="" type="checkbox"/> Land Development, DPZ	<u>6-24-04</u>	<u>[Signature]</u>
<input checked="" type="checkbox"/> State Highways		
<input checked="" type="checkbox"/> Building Official	<u>6/24/04</u>	<u>[Signature]</u>
<input checked="" type="checkbox"/> Dev. Engineering, DPZ		
<input checked="" type="checkbox"/> Health	<u>6/24/04</u>	<u>[Signature]</u>
<input type="checkbox"/> Fire Protection		

Is Sediment Control approval required prior to issuance?
 YES NO

CONTINGENCY CONSTRUCTION START:
 ONE STOP SHOP:

DPZ SETBACK INFORMATION

Front: 75
 Rear: 30
 Side: 10
 Side St.: _____

All minimum setbacks met? YES NO

Is Entrance Permit required? YES NO

Historic District? YES NO

Lot Coverage for NewTown Zone _____
 SDP/Red-line approval date _____

PROPERTY ID#: 59666

Filing fee \$	_____
Permit fee \$	<u>50</u>
Excise tax \$	_____
Add'l per. fee \$	<u>5</u>
TOTAL FEES \$	<u>55</u>
Sub-total paid \$	_____
Balance due \$	_____
Check #	<u>6790</u>
Validation #	<u>7155</u>

Accepted by: [Signature]

APPROVED

WALK-THRU BUILDING PERMIT

BP# 0049091 A# 51908914

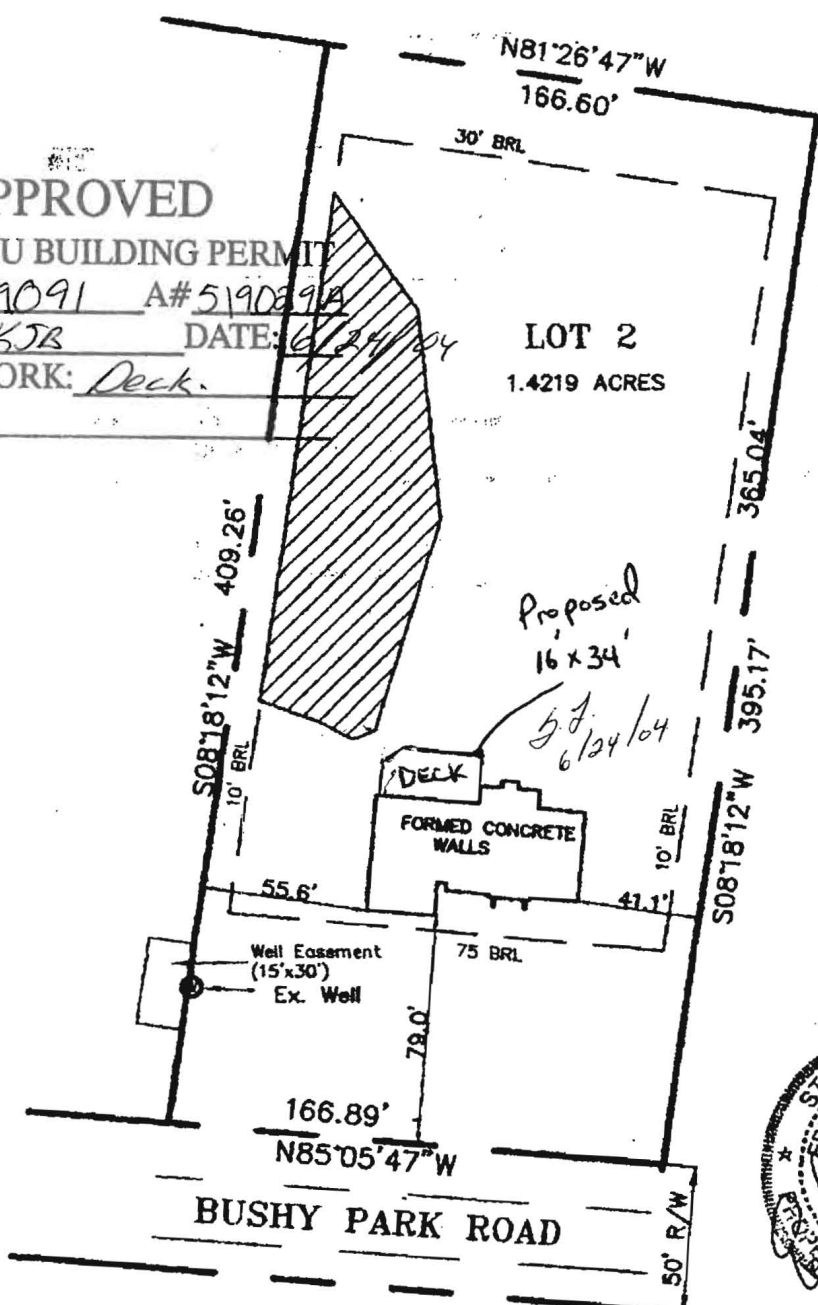
APP. SAN KJR DATE: 6/24/04

DESC. OF WORK: Deck

LOT 2

1.4219 ACRES

MD. STATE GRID MERIDIAN



TOP OF WALL ELEVATION: 607.7'

RECORD REFERENCES	
LIBER/FOLIO	_____
PLAT BOOK	_____
PLAT NO./FOLIO	_____
SCALE	1"=60'
DATE	11/15/03

WALL CHECK	
15084 BUSHY PARK ROAD	_____
HOWARD COUNTY, MARYLAND	_____

MARKS & ASSOCIATES LLC
ENGINEERING - SURVEYING - LAND PLANNING
4331 COLLEGE AVENUE ELICOTT CITY, MARYLAND
TELEPHONE (410)747-8738 FAX (410)747-8739

I HEREBY CERTIFY, THAT THE IMPROVEMENTS ARE LOCATED AS SHOWN HEREIN AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THERE ARE NO ENCROACHMENTS EXCEPT AS SHOWN.

Erik C. Marks
ERIK C. MARKS R.P.L.S. 0607

October 27, 2003

Avis Corbin, Chief
License + Permits

Dear Avis,

The original site plan that we submitted had a small error on the front elevation detail. We are re-submitting the correct detail.

Sincerely,

cc Health
Dept

Alex + Steven Leaf

BP# 00144305 applied for on 9/28/03
15084 Bushy Park Rd
Woodbine, MD

Cell 410-917-6070
Home 410-531-5874

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John
Bois

- 5. OWNER/BUILDER: ~~TRADITION-HOMES~~ Steven and Ann Leaf
4540 TEN OAKS ROAD
DAYTON, MARYLAND 21036
- 6. THE LOTS SHOWN HEREON COMPLY WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREA AS REQUIRED BY THE MARYLAND DEPARTMENT OF THE ENVIRONMENT.
- 7. PAVEMENT SPECIFICATIONS: 4" #2 STONE
3" CR6
3" ASPHALT
- 8. PROPERTY DATA: FIRST PARCEL RECORDED AMONG THE LAND RECORDS OF HOWARD COUNTY, IN LIBER 319 AT FOLIO 572.

DIRECTION OF DRAINAGE FLOW ———

EXISTING 2 FOOT CONTOUR ———

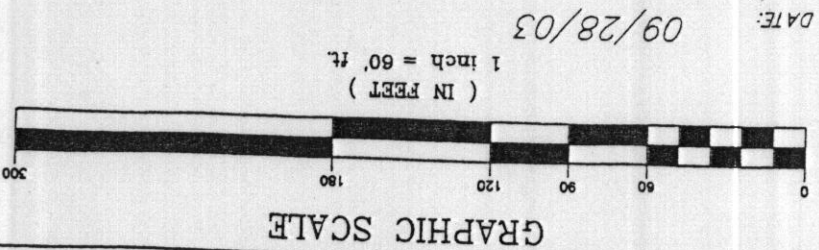
SILT FENCE 1' S.F.

LIMIT OF DISTURBANCE LOB

ELEVATIONS

EXISTING	PROPOSED	
ELEVATION OF WELL AT GRADE	607.9'	608.0'
FIRST FLOOR:		600.0'
BASEMENT:		599.1'
INVERT OUT OF HOUSE		599.1'
INVERT INTO SEPTIC TANK		597.8'
INVERT OUT OF SEPTIC TANK		597.6'
INVERT INTO DISTRIBUTION BOX		597.4'
INVERT OUT OF DISTRIBUTION BOX		597.2'
INVERT INTO TRENCH		597.1'

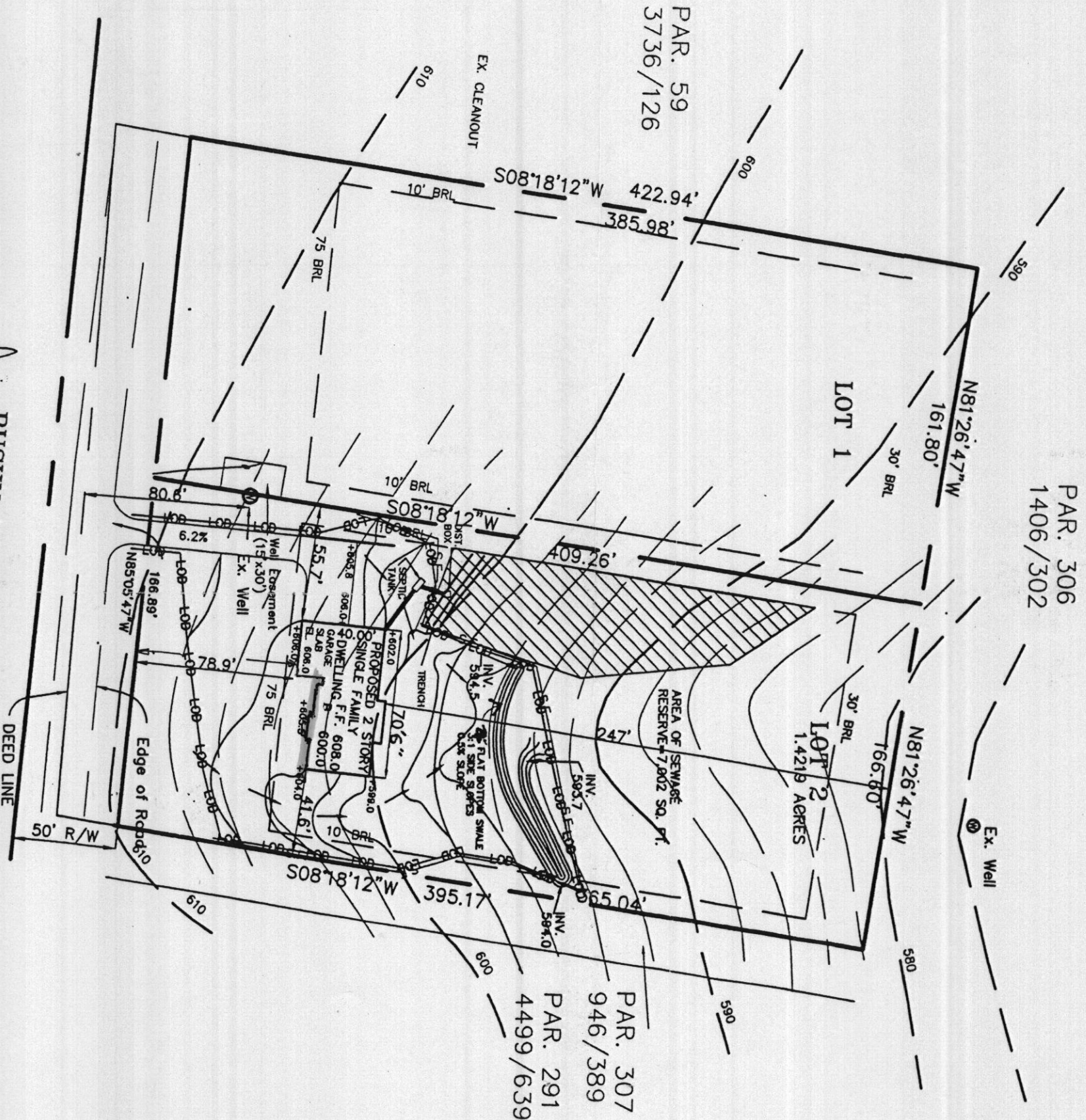
MD. STATE GRID MERIDIAN



MARKS & ASSOCIATES L.L.C.
SURVEYING-ENGINEERING-LAND PLANNING
4531 COLLEGE AVENUE ELLICOTT CITY, MARYLAND
TELEPHONE (410)747-8738 FAX (410)747-8739

THE OAKS AT BUSHY PARK
LOT 2
PLOT PLAN
TAX MAP #8
4TH ELECTION DISTRICT
PARCEL 66
HOWARD COUNTY, MARYLAND

(PLAN IDENTIFICATION NO. PG 519029)



BUSHY PARK ROAD

APPROVED: FOR PRIVATE WATER AND SEWAGE SYSTEMS ON LOTS 1 & 2

COUNTY HEALTH OFFICER

REVISED

Date: 10/28/03

Comments: K600144 305

Revised O.K'd by H.D. 10/28/03 [Signature]