

B13003233

Building Address: 6215 Heathy Glen Way
Clarkville, MD 21029

Suite/Apt. # _____ SDP/WP/BA #: _____
 Plan: GP-14-004 Subdivision: Preserves of Clarkville

Section: _____ Area: _____ Lot: 31

Tax Map: 34 Parcel: 77 Grid: 11

Zoning: RR-DEO Map Coordinates: _____ Lot Size: 50,141

Property Owner's Name: Williamsbury Group, LLC
 Address: 5485 Harpers Farm Rd #200
 City: Columbia State: MD Zip Code: 21044
 Home Phone: 410-997-0800 Work Phone: _____
 Applicant's Name & Mailing Address (if other than stated herein):
WBG

Phone: _____ Fax: _____
 Email: _____

Existing Use: Vacant Lot
 Proposed Use: Sales Trailer
 Estimated Construction Cost: \$ 500
 Description of Work: Set up & anchor sales trailer
for use in residential sales
activity

Occupant or Tenant: Williamsbury Homes, LLC

Contractor Company: _____
 Contact Person: WBG
 Address: _____
 City: _____ State: _____ Zip Code: _____
 License No.: 155
 Phone: _____ Fax: _____
 Email: _____

Was tenant space previously occupied? Yes No

Contact Name: Bob Corbett
 Address: 5485 Harpers Farm Rd #200
 City: Columbia State: MD Zip Code: 21044
 Phone: 410-997-3343 Fax: 410-997-4358
410-997-3343
 Email: BOBCORBETT@williamsburgllc.com

Engineer/Architect Company: _____
 Responsible Design Prof.: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

BUILDING DESCRIPTION - COMMERCIAL	
Building Characteristics	Utilities
Height:	<u>Water Supply</u>
No. of stories:	<input type="checkbox"/> Public
Gross area, sq. ft./floor:	<input checked="" type="checkbox"/> Private
<u>12 X 54</u>	<u>Sewage Disposal</u>
Area of construction (sq. ft.):	<input type="checkbox"/> Public
	<input checked="" type="checkbox"/> Private
Use group:	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
Construction type:	Heating System
<input type="checkbox"/> Reinforced Concrete	<input checked="" type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Masonry	Sprinkler System:
<input type="checkbox"/> Wood Frame	<input type="checkbox"/> N/A
<input checked="" type="checkbox"/> State Certified Modular	<input type="checkbox"/> Full
<input type="checkbox"/> Roadside Tree Project Permit	<input type="checkbox"/> Partial
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Other Suppression
<input type="checkbox"/> Roadside Tree Project Permit #	No. of Heads:

BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics	Utilities
<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>
Depth Width	<input type="checkbox"/> Public
1 st floor:	<input type="checkbox"/> Private
2 nd floor:	<u>Sewage Disposal</u>
Basement:	<input type="checkbox"/> Public
<input type="checkbox"/> Finished Basement	<input type="checkbox"/> Private
<input type="checkbox"/> Unfinished Basement	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Crawl Space	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Slab on Grade	Heating System
No. of Bedrooms:	<input type="checkbox"/> Electric
Multi-family Dwelling	<input type="checkbox"/> Oil
No. of efficiency units:	<input type="checkbox"/> Natural Gas
No. of 1 BR units:	<input type="checkbox"/> Propane Gas
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	

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: Bob Corbett
 Print Name: Bob Corbett
 Email Address: BOBCORBETT@williamsburgllc.com
 Title/Company: WBG

Print Name: Bob Corbett
 Date: 8/26/13

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
 PLEASE WRITE NEATLY & LEGIBLY
 FOR OFFICE USE ONLY

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health		
Fire Protection		

Is Sediment Control approval required for issuance? Yes No
 CONTINGENCY CONSTRUCTION START
 ONE STOP SHOP

DPZ SETBACK INFORMATION

Front: _____
 Rear: _____
 Side: _____
 Side St.: _____

All minimum setbacks met? Yes No

Is Entrance Permit Required? Yes No

Historic District? Yes No

Lot Coverage for New Town Zone: _____
 SDP/Red-line approval date: _____

Filing Fee	\$
Permit Fee	\$ <u>50.00</u>
Tech Fee	\$ <u>5.00</u>
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$ <u>55.00</u>
Sub-Total Paid	\$
Balance Due	\$



Office of the Health Officer

7178 Columbia Gateway Drive, Columbia, MD 21046-2147

Main: 410-313-6300 | Fax: 410-313-6303

TDD 410-313-2323 | Toll Free 1-866-313-6300

www.hchealth.org

Facebook: www.facebook.com/hocohealth

Twitter: HowardCoHealthDep

Maura J. Rossman, M.D., Health Officer

DATE: August 27, 2013

TO: Chris Wine
Williamsburg Group, LLC
Via-e-mail: CHRISWINE@WILLIAMSBURGLLC.COM

RE: **Building Permit # B13003233**
6215 Heather Glen Way
Clarksville, Maryland 21029

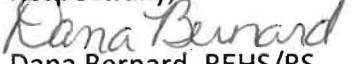
Mr. Wine,

Further review is contingent upon submission of a revised building plan showing the following:

- Your building plan must show the well statement in the general notes.
- Elevations for the septic tank and invert in and out must be included on your building plan along with topography.
- Your property falls within the **Radium** area in Howard County. Given the current findings, 6215 Heather Glen Way will be required to have **Radium** testing. Typically takes up to one month to perform and receive back the **Radium** analyses, plan accordingly. Also note this is in addition to other standard testing parameters (bacteria, nitrate, turbidity and sand) that will still be required to help secure Use and Occupancy.
- As of January 1, 2013, all new construction is required to use the "Best Available Technology" (BAT) for septic installation. Before building permit approval, a BAT site plan must be submitted along with your building application and building plan.

Your building permit will be placed "on hold" until all Health Department requirements are met. If you have any questions or correspondence, I can be reached at the above address or by telephone at (410) 313-2775.

Respectfully,


Dana Bernard, REHS/RS
Environmental Specialist II

Well and Septic Program

Phone (410) 313-2775

E-mail: DBernard@howardcountymd.gov

cc: Well & Septic program file



Building Permit Application

Howard County Maryland
Department of Inspections, Licenses and Permits
3430 Court House Drive
Permits: 410-313-2455
www.howardcountymd.gov

Date Received: 07/31/13

Permit No.: B13002981

Building Address: 6215 Heather Glen Way
 City: Clarksville State: MD Zip Code: 21029
 Suite/Apt. #: _____ SDP/WP/BA #: F06-72
 Census Tract: _____ The Preserve at Clarksville
 Section: CP14-004 Area: _____ Lot: 31
 Tax Map: 34 Parcel: 77 Grid: 11
 Zoning: RR-DEO Map Coordinates: _____ Lot Size: 50,141 sq

Property Owner's Name: Williamsburg Group, LLC
 Address: 5485 Harpers Farm Road
 City: Suite 200 Zip Code: _____
 Phone: _____ Fax: _____
 Email: Columbia, MD 21044

Existing Use: Vacant lot
 Proposed Use: SF Home
 Estimated Construction Cost: \$ 150,000
 Description of Work: Rettledge - 3 car side load
8' Ki + ext, Conservatory, finish
 Occupant or Tenant: _____
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Applicant's Name & Mailing Address, (if other than stated herein)
 Applicant's Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Contractor Company: _____
 Contact Person: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 License No.: 135
 Phone: _____ Fax: _____
 Email: _____

Engineer/Architect Company: _____
 Responsible Design Prof.: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Commercial Building Characteristics	Residential Building Characteristics	
Height:	<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories:	Depth	Width
Gross area, sq. ft./floor:	1 st floor: <u>71</u>	<u>80</u>
Area of construction (sq. ft.):	2 nd floor: <u>55</u>	<u>65</u>
Use group:	Basement: <u>59</u>	<u>80</u>
	<input checked="" type="checkbox"/> Finished Basement	
	<input type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
Construction type:	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms: <u>5</u>	
<input type="checkbox"/> Structural Steel	<u>Multi-family Dwelling</u>	
<input type="checkbox"/> Masonry	No. of efficiency units:	
<input type="checkbox"/> Wood Frame	No. of 1 BR units:	
<input type="checkbox"/> State Certified Modular	No. of 2 BR units:	
	No. of 3 BR units:	
	Other Structure:	
	Dimensions:	
<input checked="" type="checkbox"/> Roadside Tree Project Permit	Footings:	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Roof:	
<input checked="" type="checkbox"/> Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Utilities	
<u>Water Supply</u>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
<u>Sewage Disposal</u>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<u>Heating System</u>	
<input checked="" type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
<u>Sprinkler System:</u>	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number: <u>G13000254</u>	
Building Shell Permit Number:	

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: Chris Wine
 Email Address: chrswine@williamsburgllc.com
 Title/Company: Agent WGLCC

Print Name: Chris Wine
 Date: _____
RECEIVED
 JUL 31 2013
 LICENSES & PERMITS DIVISION

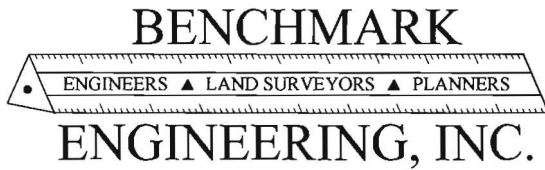
Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
 PLEASE WRITE NEATLY & LEGIBLY
 FOR OFFICE USE ONLY

AGENCY	DATE	SIGNATURE OF APPROVAL
<input checked="" type="checkbox"/> State Highways		
<input checked="" type="checkbox"/> Building Officials		
<input checked="" type="checkbox"/> PSZA (Zoning)		
<input checked="" type="checkbox"/> PSZA (Engineering)		
<input checked="" type="checkbox"/> Health		

Is Sediment Control approval required for issuance? Yes No
 CONTINGENCY CONSTRUCTION START

DPZ SETBACK INFORMATION
Front:
Rear:
Side:
Side St.:
All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permt Required? <input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No
Lot Coverage for New Town Zone:
SDP/Red-line approval date:

Filing Fee	\$ 100.00
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$ 50.00
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	# 236186



Christopher A. Malagari, P.E., President
Donald A. Mason, P.E., L.S., Vice President

Ellicott City, MD Frederick, MD
410-465-6105 301-371-3505
410-465-6644 FAX 301-371-3506 FAX

August 28, 2013

Attn: Dana Bernard
Environmental Specialist II
Well and Septic Program
7178 Columbia Gateway Drive
Columbia, Maryland 21046-2147
410-313-2775

Re: **Preserve at Clarksville**
 Lot 13
 Building Permit #B13002981
 6215 Heather Glen Way
 Clarksville, Maryland 21029

The following is a point-by-point response to comments from your letter dated August 27, 2013:

1. The well statement letter is on the Building Permit Plan. See General Note #6 on sheet 1.
2. Septic Tank inverts are indicated on the Septic Chart to the immediate right of the plan view on sheet 1. Existing and Proposed topography are on the plans.
3. Comment regarding Radium is understood.
4. Bat Site Plan is enclosed.

If you have any questions or require additional information please do not hesitate to call me at 410-465-6105 or e-mail me at dthompson@bei-civilengineering.com.

Sincerely,



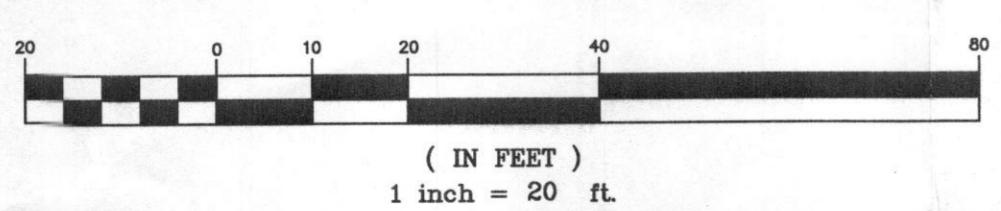
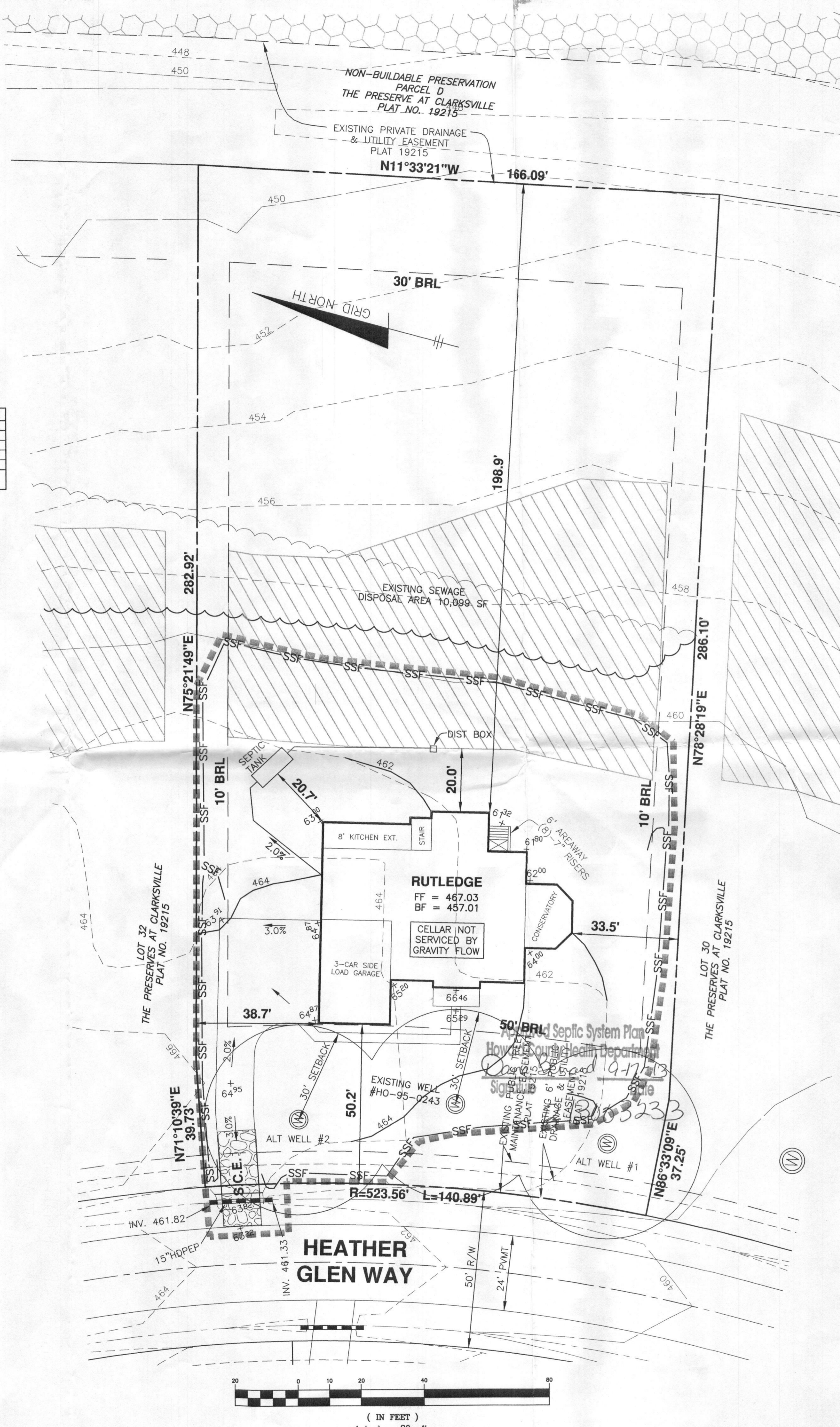
David Thompson
Project Manager

Lot 13_HEALTH Response Letter.docx

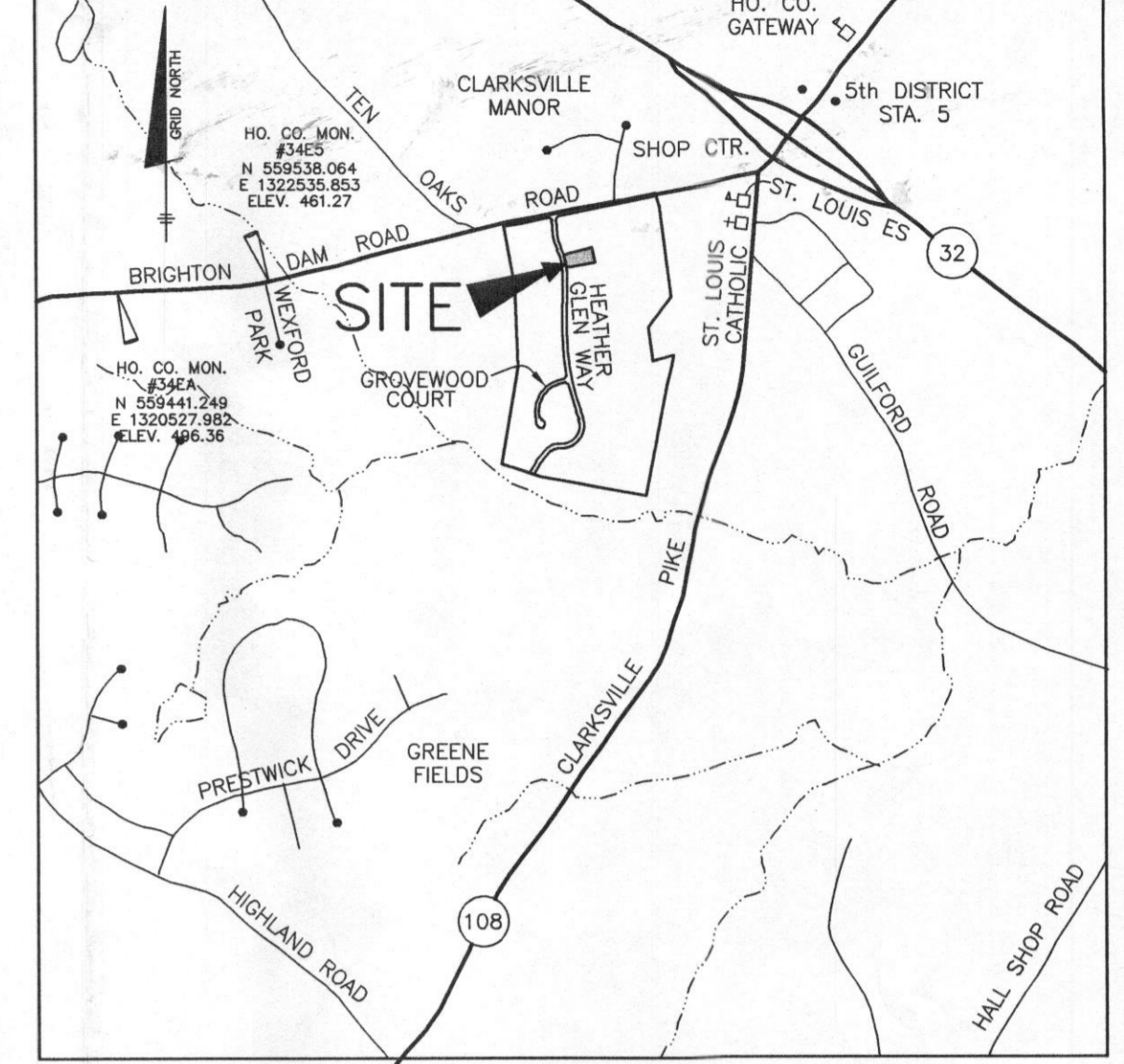
SOILS LEGEND		
MAP SYMBOL	SOIL GROUP	SOIL TYPE
EKA	B	ELJOAK SILT LOAM, 0 TO 3 PERCENT SLOPES
EXB2	B	ELJOAK SILT LOAM, 3 TO 8 PERCENT SLOPES, MODERATELY ERODED
EXC2	B	ELJOAK SILT LOAM, 8 TO 15 PERCENT SLOPES, MODERATELY ERODED
GB2	B	GLENELG LOAM, 3 TO 8 PERCENT SLOPES, MODERATELY ERODED

TAKEN FROM SOIL SURVEY, HOWARD COUNTY, MARYLAND (ISSUED JULY 1968) MAP NO. 23

LEGEND	
	BOUNDARY
	EXISTING TOPO PER F-06-072
	SEWAGE DISPOSAL AREA
	WELL LOCATION
	LIMIT OF DISTURBANCE
	S.C.E. STABILIZED CONSTRUCTION ENTRANCE
	SSF SUPER SILT FENCE



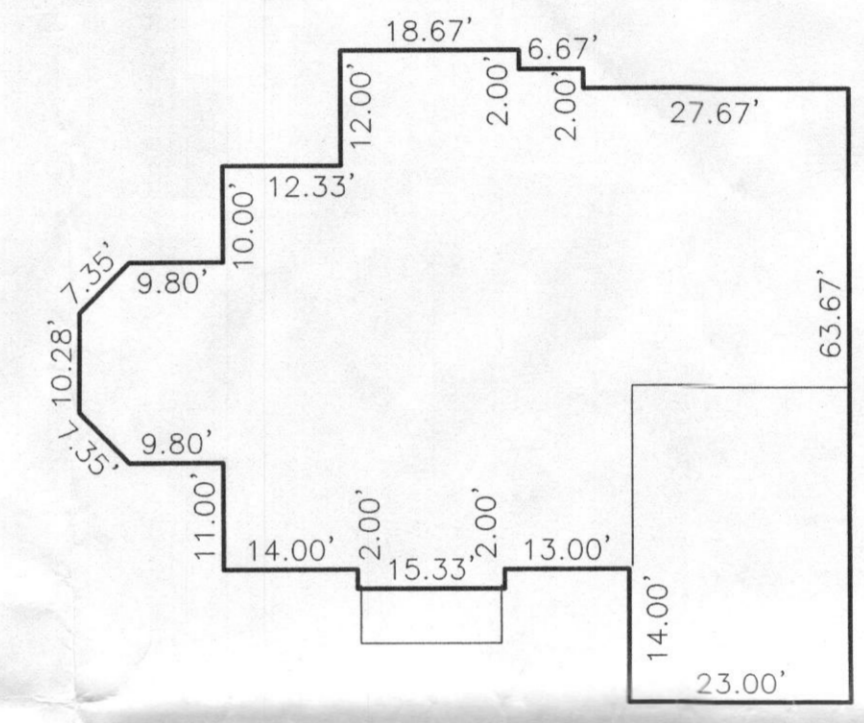
- NOTES:**
1. THE TOPOGRAPHY OF THIS PLAN IS TAKEN FROM FIELD SURVEY BY BENCHMARK ENGINEERING, INC. AND SIGNED F-06-072 PLANS AND IS VERIFIED TO ACCURATELY REPRESENT THE RELATIVE CHANGES ON THE SUBJECT PROPERTY.
 2. THIS AREA DESIGNATES A PRIVATE SEWAGE DISPOSAL AREA OF AT LEAST 10,000 SQUARE FEET AS REQUIRED BY THE MARYLAND DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED. THIS SEWAGE DISPOSAL AREA SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE AUTHORITY TO GRANT ADJUSTMENTS TO THE PRIVATE SEWAGE EASEMENT. RECORDATION OF A REVISED SEWAGE EASEMENT SHALL NOT BE NECESSARY.
 3. THE LOT SHOWN HEREON COMPLIES WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREA AS REQUIRED BY THE MARYLAND DEPARTMENT OF THE ENVIRONMENT.
 4. ANY CHANGES TO THE PRIVATE SEWERAGE EASEMENT SHALL REQUIRE A REVISED PERCOLATION CERTIFICATION PLAN.
 5. ALL WELLS AND SEPTIC SYSTEMS LOCATED WITHIN 100' OF THE LOT BOUNDARIES AND 200' DOWN GRADIENT OF ANY WELLS AND/OR SEPTIC SYSTEMS HAVE BEEN SHOWN.
 6. THE EXISTING WELL ON THIS LOT (TAG NO. HO-95-0243) HAS BEEN FIELD LOCATED BY BENCHMARK ENGINEERING, INC. AND IS ACCURATELY SHOWN.
 7. EXACT LENGTH OF SEPTIC TRENCHES ARE TO BE DETERMINED BY THE HEALTH DEPARTMENT AT THE TIME OF PRECONSTRUCTION INSPECTION.
 8. SPOIL FROM THE TRENCHING OF THE SEPTIC AREA IS TO BE PLACED ON THE UPHILL SIDE OF THE EXCAVATION FOR EACH INDIVIDUAL LOT.
 9. SEDIMENT AND EROSION CONTROLS SHALL BE PER THIS PLAN AND COMPLY WITH THE 2011 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL.
 10. DRIVEWAY CULVERT COMPUTATIONS WERE APPROVED UNDER F-06-072. THE CULVERT SHALL BE A 15" CIRCULAR PIPE OR ELLIPTICAL EQUIVALENT.
 11. STORMWATER MANAGEMENT FOR THIS LOT WAS PROVIDED UNDER F-06-072.



3465 - STAMPED BRASS DISK SET ON TOP OF CONCRETE BASE
 346A - STAMPED BRASS DISK SET ON TOP OF CONCRETE BASE
VICINITY MAP
 SCALE: 1" = 2000'

SEQUENCE OF CONSTRUCTION

- NOTIFY SEDIMENT CONTROL DIVISION 48 HOURS PRIOR TO START OF WORK
1. Obtain grading permit. (day 1)
 2. On-site Pre-Construction meeting. (day 2)
 3. Clear and Grub as necessary to install stabilized construction entrance and perimeter controls (super silt fences) (day 3)
 4. Install the driveway culvert and provide adequate fill cover. (day 4)
 5. Upon approval from the Howard County sediment control inspector, proceed to clear and grub within the perimeter. (day 5)
 6. Excavate for foundation, pour and backfill. (day 5-12)
 7. Install septic lines and tank. (day 13)
 8. Finish house construction. (day 14-90)
 9. Pave driveway. (day 91)
 10. Final grade the lot and stabilize in accordance with the permanent seedbed notes including erosion control matting within all swales as shown on the plan. (day 92)
 11. Upon approval from the Howard County sediment control inspector, remove sediment control devices and stabilize any remaining disturbed areas. (day 93)



**HOUSE FOOTPRINT
 RUTLEDGE MODEL**
 BRICK ON ALL 4 SIDES
 SCALE: 1" = 20'

SEPTIC INVERT CHART	
INV @ HOUSE	459.60
GROUND @ HOUSE	464.00
INV IN SEPTIC TANK	458.78
INV OUT SEPTIC TANK	458.45
TOP OF SEPTIC TANK	459.78
GROUND OVER TANK	462.50
INV IN DIST-BOX	457.45
INV OUT DIST BOX	457.20
GROUND AT DIST-BOX	461.20

ENGINEER'S CERTIFICATE	
I CERTIFY THAT THIS PLAN FOR SEDIMENT AND EROSION CONTROL REPRESENTS A PRACTICAL AND WORKABLE PLAN BASED ON MY PERSONAL KNOWLEDGE OF THE SITE CONDITIONS AND THAT IT WAS PREPARED IN ACCORDANCE WITH THE REQUIREMENTS OF THE HOWARD SOIL CONSERVATION DISTRICT.	
CHRISTOPHER A. MADAGARI	DATE
DEVELOPER'S CERTIFICATE	
I/WE CERTIFY THAT ALL DEVELOPMENT AND CONSTRUCTION WILL BE DONE ACCORDING TO THIS PLAN FOR SEDIMENT AND EROSION CONTROL, AND THAT ALL RESPONSIBLE PERSONNEL INVOLVED IN THE CONSTRUCTION PROJECT WILL HAVE A CERTIFICATE OF ATTENDANCE AT A DEPARTMENT OF THE ENVIRONMENT APPROVED TRAINING PROGRAM FOR THE CONTROL OF SEDIMENT AND EROSION BEFORE BEGINNING THE PROJECT. I ALSO AUTHORIZE PERIODIC ON-SITE INSPECTION BY THE HOWARD SOIL CONSERVATION DISTRICT.	
WILLIAMSBURG HOMES, INC.	DATE
THIS DEVELOPMENT PLAN IS APPROVED FOR SOIL EROSION AND SEDIMENT CONTROL BY THE HOWARD SOIL CONSERVATION DISTRICT.	
HOWARD SOIL CONSERVATION DISTRICT	DATE

BENCHMARK ENGINEERING, INC.
 ENGINEERS • LAND SURVEYORS • PLANNERS
 8480 BALTIMORE NATIONAL PIKE & SUITE 315 • ELICOTT CITY, MARYLAND 21043
 (P) 410-465-6105 (F) 410-465-6644
 60 THOMAS JOHNSON DRIVE • FREDERICK, MARYLAND 21702
 (P) 301-371-3505 (F) 301-371-3506
 WWW.BEI-CIVILENGINEERING.COM

Professional Certification. I hereby certify that these documents were prepared or approved by me, and that I am a duly licensed professional engineer under the laws of the State of Maryland. License No. 22590, Expiration Date: 06-30-2015.

**THE PRESERVE AT CLARKSVILLE
 LOT 31
 6215 HEATHER GLEN WAY**

TAX MAP: 34 GRID: 11 PARCEL: 77
 ZONED: RR-DEO
 ELECTION DISTRICT NO. 5
 HOWARD COUNTY, MARYLAND

**CUSTOM GRADING PLAN &
 BUILDING PERMIT PLAN**

DATE: JULY 29, 2013 BEI PROJECT NO: 1407-W
 DESIGN: DBT DRAWN: DBT SCALE: AS SHOWN SHEET 1 OF 2

NOTE: SHOULD THE STOCKPILE EXCEED 15 FEET IN HEIGHT, IT MUST BE BENCHED.

THE CONTRACTOR SHALL NOTIFY THE DEPARTMENT OF PUBLIC WORKS/BUREAU OF ENGINEERING/CONSTRUCTION INSPECTION DIVISION AT 410-313-1880 AT LEAST FIVE (5) WORKING DAYS PRIOR TO THE START OF ANY WORK.

THE CONTRACTOR SHALL NOTIFY "MISS UTILITY" AT 1-800-257-7777 AT LEAST 48 HOURS PRIOR TO ANY EXCAVATION WORK BEING DONE.