

LAYOUT 3/12/10 INSP 4 _____
INSP 2 3/17/10 INSP 5 _____
INSP 3 _____ INSP 6 _____

ISSUE DATE: 1/27/2010

PERMIT

P 532509

APPROVAL DATE: 3/18/2010

A 516084

Tax ID # 03345068

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

HATFIELD'S EQUIPMENT IS PERMITTED TO INSTALL ALTER

ADDRESS: _____ PHONE NUMBER: 410-984-0047

SUBDIVISION: Riverwood LOT NUMBER: 3

ADDRESS: 4834 Castlebridge Road PROPERTY OWNER: Winchester Homes

SEPTIC TANK CAPACITY (GALLONS): 2000 OUTLET BAFFLE FILTER REQUIRED

PUMP CHAMBER CAPACITY (GALLONS): _____ COMPARTMENTED TANK REQUIRED

NUMBER OF BEDROOMS: 4 APPLICATION RATE: 0.8

SQUARE FOOTAGE OF HOUSE: Unkwn

LINEAR FEET OF TRENCH REQUIRED: 200'

5-9
165'

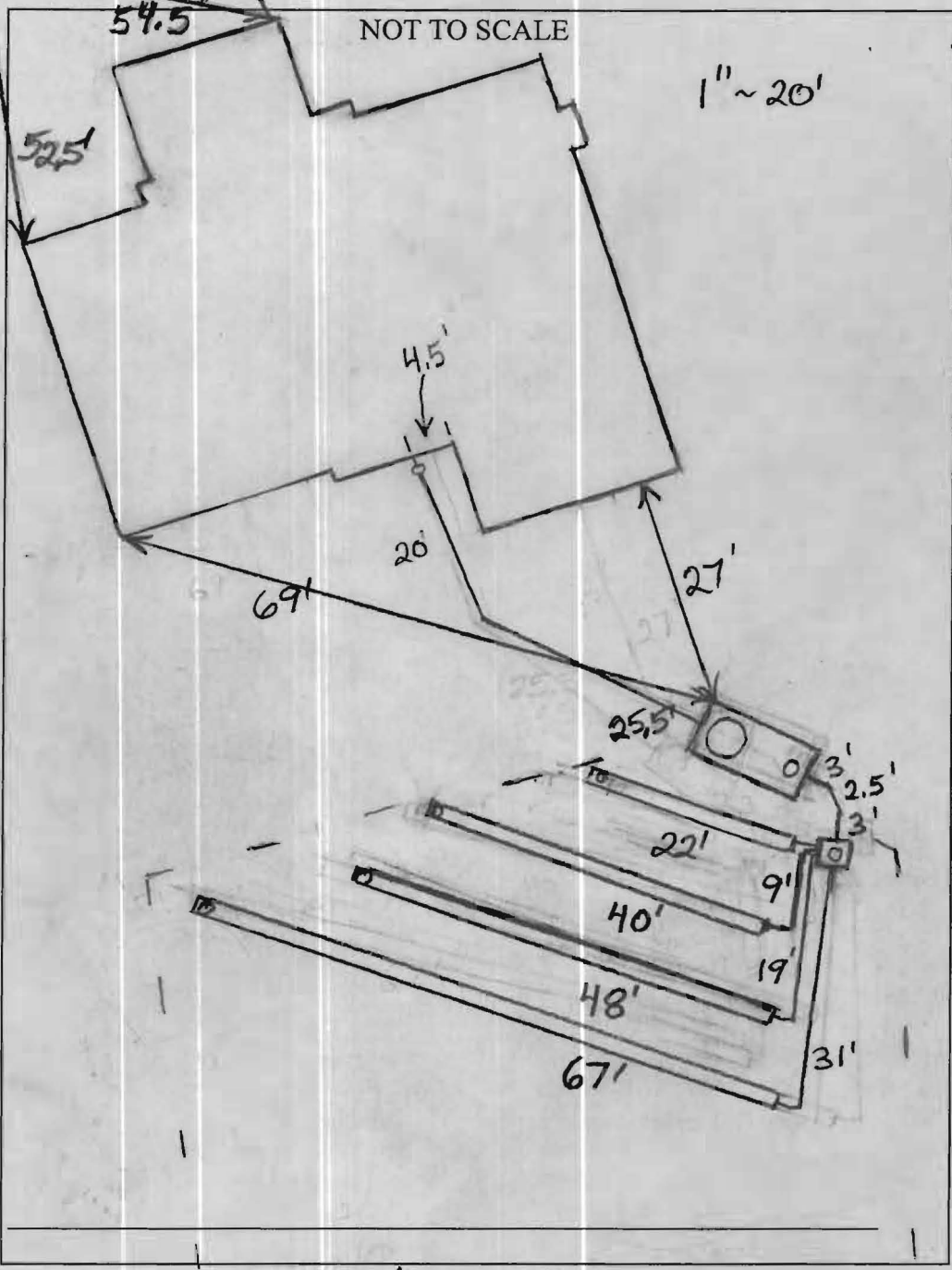
TRENCHES:	Trenches to be 3.0 feet wide. Inlet 5.0 feet below original grade. Bottom maximum depth 6.0 feet below grade. Effective area begins at <u>5.0</u> feet below original grade with 1.0 feet of stone below distribution pipe. <u>5.5-6</u>
LOCATION:	Set distribution box per layout inspection. Install 200 feet of trench on contour (4) four- 50' trenches per layout inspection. Distribution box should be installed at the highest point of easement. These specs are only for initial system.
NOTES:	Stake septic easement corners. Call for layout inspection. Mark utilities. Gravel tickets must be available for Environmental Sanitarians. Stone must be approved by the Howard County Health Department.

PLANS APPROVED: Dana Bernard DATE: 1/12/10

- NOTE: PERMIT VOID AFTER 2 YEARS
- NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
- NOTE: WATERTIGHT SEPTIC TANKS REQUIRED
- NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL
- NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS

NEITHER THE HOWARD COUNTY COUNCIL OR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT CALL 410-313-1771 FOR INSPECTION OF SEPTIC SYSTEM

HO-94-4004



NOT TO SCALE

1" ~ 20'

TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
2'	5'	8.5'
NUMBER OF TRENCHES	4	
TOTAL LENGTH	177'	
ABSORPTION AREA	531+	
DISTRIBUTION BOX LEVEL	Levelers	
DISTRIBUTION BOX BAFFLE	Yes	
DISTRIBUTION BOX PORT	Yes	

SEPTIC TANK DATA	
SEPTIC TANK I LEVEL	Yes
MANUFACTURER	Babylon
CAPACITY	2000 GAL
SEAM LOC	Top
TANK LID DEPTH	1.5-4'
BAFFLES	Yes
BAFFLE FILTER	No
MANHOLE LOC	Front
6" PORT LOC	Rear
WATERTIGHT TEST	No
SLOTTED	Yes

PUMP/SEPTIC TANK LEVEL	
LEVEL	N/A
MANUFACTURER	
CAPACITY	GAL
SEAM LOC	
TANK LID DEPTH	
BAFFLES	
BAFFLE FILTER	
MANHOLE LOC	
6" PORT LOC	
WATERTIGHT TEST	
SLOTTED	

PRE-CONSTRUCTION
 3/12/2010 Layout done. Utilities may be in easement. Utility lines to be marked. (BB)

3/17/2010 Utility lines running through part of easement near driveway. Had to relocate trenches and tank. (BB)
 INSTALLATION: 3/18/2010 System finished. O.K. to backfill. (BB)

FINAL INSPECTOR B. Baker DATE OF APPROVAL 3/18/2010

NON-BUILDABLE
PRESERVATION PARCEL C
DEDICATED TO HOWARD COUNTY, MARYLAND
HOMEOWNERS ASSOCIATION EASEMENT HOLDER

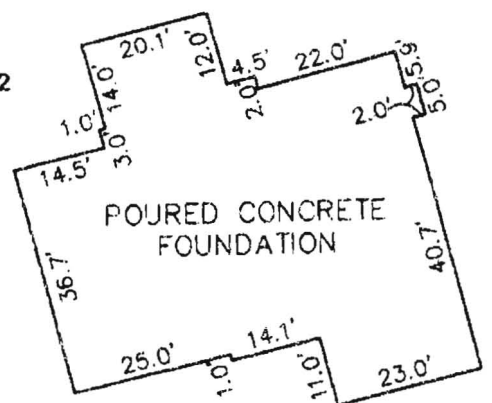
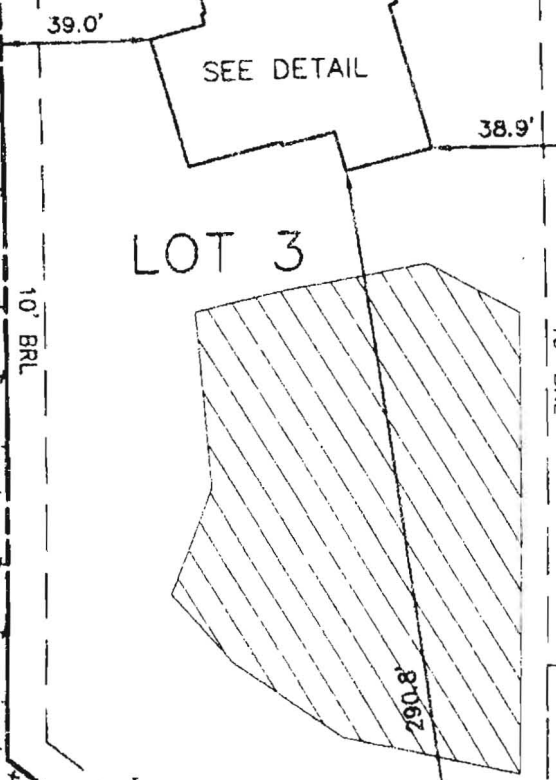
*Wall Check
OK 1-27-10
JTB*

S15°04'56"E

WELL (W)
HO-94-4004

GRID NORTH

NON-BUILDABLE
PRESERVATION PARCEL C
DEDICATED TO HOWARD COUNTY, MARYLAND
HOMEOWNERS ASSOCIATION EASEMENT HOLDER



FOUNDATION DETAIL
SCALE: 1" = 30'

FOREST
CONSERVATION
EASEMENT
RESERVATION

24' PRIVATE ACCESS
EASEMENT FOR LOTS 2 AND 3

NON-BUILDABLE
PRESERVATION PARCEL C
DEDICATED TO HOWARD COUNTY, MARYLAND
HOMEOWNERS ASSOCIATION EASEMENT HOLDER

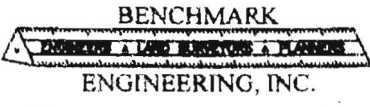
CASTLEBRIDGE ROAD
(50' R/W)

SURVEYOR'S CERTIFICATE

I HEREBY CERTIFY TO THE BEST OF MY PROFESSIONAL KNOWLEDGE, INFORMATION AND BELIEF THAT THE DIMENSIONS OF THE BUILDING WALLS SHOWN HEREON ARE CORRECT; THAT THEY ARE BASED ON A FIELD SURVEY PERFORMED BY BENCHMARK ENGINEERING, INC. ON 01/19/10.

TOP OF FOUNDATION WALL ELEVATION = 434.2'
OFFSET DIMENSIONS TO PROPERTY LINES ARE ± 0.2'

Donald A. Mason
DONALD A. MASON
PROFESSIONAL LAND SURVEYOR
MD REG. No. 21320
FOR BENCHMARK ENGINEERING, INC.
MD REG. No. 351
FEMA FIRM No. 240044 0027 B
ZONE: C
DATED: 12/04/86



8480 BALTIMORE NATIONAL PIKE • SUITE 418
ELLCOTT CITY, MARYLAND 21043
phone: 410-465-6105 • fax: 410-465-6644
www.bel-civilengineering.com

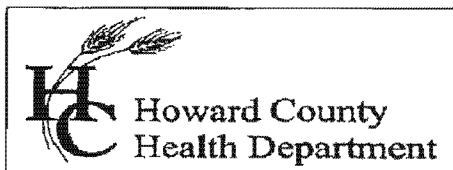
WALL CHECK
RIVERWOOD
PHASE 1
PLAT No. 18035
LOT No. 3

4834 CASTLEBRIDGE ROAD

3RD ELECTION DISTRICT
HOWARD COUNTY, MARYLAND

FIELD OBS. BY CH&AS
COMP. BY EWF
DRAWN BY EWF

SCALE: 1" = 50' DATE: 01/19/10



Bureau of Environmental Health
7178 Gateway Drive Columbia, MD 21046
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

Peter L. Beilenson, M.D., M.P.H., Health Officer

**AGREEMENT FOR APPROVAL OF AN INDIVIDUAL DRINKING WELL WITH AN
ON-SITE TREATMENT SYSTEM**

This agreement is entered into by and between the Howard County Health Department ("the Health Department") and Shelil Kados, ("the Owner").

WHEREAS, the Owner owns a tract of land at street address 4834 Castle Bridge Rd.
Ellicott City, MD and the deed and subdivision plat of the property is recorded among the
Land Records of Howard County, Maryland, Tax Map # 29, Block # 34910, Parcel # 20,
Deed Reference # 10101305 and Tax Account # 345068 ("the Property").
District 3

WHEREAS, the Property lacks an available public drinking water source and is required to have and individual well as the source of drinking water for the residence of the property.

WHEREAS, the Owner has installed a residential drinking well under well permit HO 94-4004 that has been tested by the Health Department (or a private laboratory certified to perform testing) for radionuclide particles. The results of the tests have shown that the gross alpha particle content and/or the gross beta particle content and/or the combined radium 226/228 levels exceeds the standards of 15 picocuries per liter (pCi/L), 4 millirems per year (mrem/yr) and/or 5pCi/L respectively.

WHEREAS, The Maryland Department of the Environment (MDE) has promulgated rules and regulations under which a Certificate of Potability may be issued and has delegated the authority to issue such Certificate to the Health Department.

WHEREAS, MDE regulations permit the Health Department to issue as a special condition, a permanent deviation to the Certificate of Potability for individual wells where treatment has been installed to meet the maximum contaminate levels (MCL's) for radionuclides.

WHEREAS, MDE has determined that radium can be effectively removed from the drinking water by the use of treatment devices (e.g., ion exchange or reverse osmosis).

WHEREAS, the Owner is requesting that the Health Department issue a Certificate of Potability contingent upon installation and maintenance of a water treatment device to reduce radionuclides.

WHEREAS, neither the Owner nor the Health Department has knowledge of an alternative safe source of water for the Property.

NOW THEREFORE, the parties have agreed to the following terms and conditions:

1. The Owner will record this Agreement among the Land Records of Howard County, Maryland and provide confirmation to the Health Dept.
2. The Owner agrees to install and maintain a water treatment device, which effectively reduces the gross alpha, gross beta and radium levels to below their respective MCL. The Health Department shall verify that the treatment device is operating effectively and the Owner agrees to allow access to the Health Department to collect a follow-up sample(s).
3. The Health Department shall issue a Certificate of Potability for the well once follow-up sampling shows acceptable gross alpha, gross beta (short and long term) and radium 226 / 228 levels.
4. The Owner agrees that there shall be no liability on part of the Health Department for any immediate or long term impacts to health or property, under any circumstance or including, but not limited to, treatment device failure, improper maintenance or installation, or defect. The Health Department does not warrant nor guarantee that the device will adequately or properly function and the Owner agrees to implement and pay for any necessary changes or corrections.
5. The Owner acknowledges and agrees that neither the Health Department nor any of its agents or employees, either officially or individually, underwrites the operation of any system or treatment device.
6. This Agreement shall not be construed to limit any authority of the Health Department to protect the public health, safety or enjoyment of property or to issue any other orders to take any other action, which is now or may hereafter be within its authority.
7. This agreement contains the entire agreement and understanding between the Health Department and the Owner. There are no additional terms other than as contained in this Agreement. This Agreement may not be modified except in writing signed by each of the parties or their authorized representatives.
8. The Agreement shall run with the land and binds the Owner, his heirs, successors, and assigns. The owner agrees to provide a copy of this agreement to any purchaser or lessee of the property.
9. The laws of the State of Maryland govern the provisions of all transactions.

The parties have signed and sealed this Agreement on the dates set forth below.

6/3/10
Date

6/3/10
Date

Date

[Signature]
Witness

Witness

[Signature]

Owner
Hejand Q. Kods

Owner
Blair Nefer

Howard County Health Department

6/3/10