

Property listed as 1551 Old Annapolis Road is not the correct address.  
The corrected address is **1515 Old Annapolis Road.**

Thank you and sorry for the confusion

KMW

(12/5/19)

## Real Property Data Search ( w2)

## Search Result for HOWARD COUNTY

<a href="#">View Map</a>	<a href="#">View GroundRent Redemption</a>	<a href="#">View GroundRent Registration</a>
Tax Exempt: None		Special Tax Recapture: None
Exempt Class: None		
Account Identifier: District - 04		Account Number - 309731
Owner Information		
Owner Name:	PARSLEY RANDY N PARSLEY MARIA E	Use: Principal Residence: RESIDENTIAL YES
Mailing Address:	1515 OLD ANNAPOLIS RD WOODBINE MD 21797-8209	Deed Reference: /03392/ 00151
Location & Structure Information		
Premises Address:	1515 OLD ANNAPOLIS RD WOODBINE 21797-0000	Legal Description: 5.583 A 1515 OLD ANNAPOLIS RD WOODBINE
Map: 0007	Grid: 0014	Parcel: 0331
Neighborhood: 4010102.14	Subdivision: 1002	Section:
Block:	Lot:	Assessment Year: 2020
Plat No:		Plat Ref:
Special Tax Areas: None		Town: None
		Ad Valorem: 100
		Tax Class: None
Primary Structure Built: 1995	Above Grade Living Area: 3,024 SF	Finished Basement Area:
		Property Land Area: 5.5800 AC
County Use:		
Stories: 2	Basement: YES	Type: STANDARD UNIT
Exterior: SIDING/	Quality: 4	Full/Half Bath: 2 full/ 1 half
Garage: 1 Attached	Last Notice of Major Improvements	
Value Information		
	Base Value	Value
		As of 01/01/2017
		Phase-in Assessments
		As of 07/01/2019
		As of 07/01/2020
Land:	239,300	239,300
Improvements:	251,300	251,300
Total:	490,600	490,600
Preferential Land:	0	490,600
Transfer Information		
Seller: BERGER JUNIUS C	Date: 11/23/1994	Price: \$83,600
Type: ARMS LENGTH VACANT	Deed1: /03392/ 00151	Deed2:
Seller:	Date:	Price:
Type:	Deed1:	Deed2:
Seller:	Date:	Price:
Type:	Deed1:	Deed2:
Exemption Information		
Partial Exempt Assessments:	Class	07/01/2019
County:	000	0.00
State:	000	0.00
Municipal:	000	0.00  0.00
Tax Exempt: None		Special Tax Recapture: None
Exempt Class: None		
Homestead Application Information		
Homestead Application Status: Approved 05/07/2008		
Homeowners' Tax Credit Application Information		
Homeowners' Tax Credit Application Status: No Application		Date:

4-10-95  
Leto 2:00

# PERMIT

## SEWAGE DISPOSAL SYSTEM

### DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 50633B

A 49743

DISTRICT 4th

DATE 4/6/95

DATE SYSTEM APPROVED 4/10/95

INSPECTOR C. B. A.

# INDEXED

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~X487993~~ 313-2640

Fogle's Septic Clean IS PERMITTED TO INSTALL  ALTER

ADDRESS 558 Obrecht Road, Sykesville, Maryland 21784 PHONE 795-5674

SUBDIVISION Burger Property LOT 10 ROAD 1551 Old Annapolis Road

PROPERTY OWNER Mr. and Mrs. Randy Parsley

ADDRESS \_\_\_\_\_

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

TRENCHES - Trench to be 3 feet wide. Inlet 3 1/2 feet below original grade. Bottom maximum depth 5 1/2 feet below original grade. Effective area begins at 3 1/2 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Place distribution box 280 feet down the right back lot line (415.89') and 110 feet off that same lot line when facing the lot from the right of way. Run trenches on contour in both directions.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 2/23/95 DKS

PLANS APPROVED BY Amy McMillen DATE 10/21/94

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: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS, 90° ELBOWS NOT ACCEPTABLE.

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

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 35/40 PVC OR ABS

PERMIT VOID AFTER TWO 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 PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

BLDG. PERMIT SIGNED  
AND RETURNED 4/12/95

Sevath # 67066 -

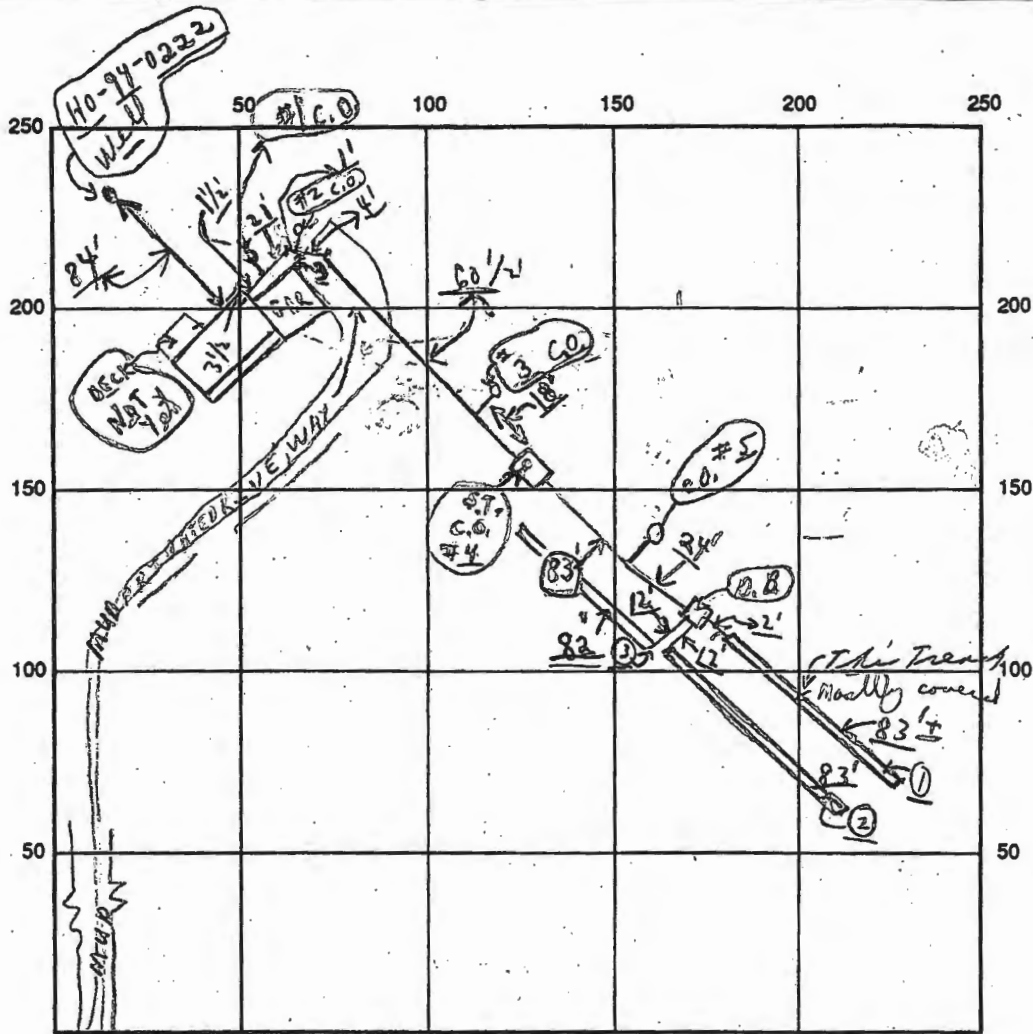
permanent

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

HD-280(6-90)

\*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

A 49743



← INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE →  
 ← OLD ANNAPOLIS ROAD →

SEPTIC TANK LEVEL OK CLEANOUTS (C.O. #4 S.T. OK) (C.O. #2 OK) (C.O. #3 OK) (C.O. #5 OK)

DISTRIBUTION BOX LEVEL OK (Baffle's in)

DRAIN FIELD/TITLE DEPTH 5 1/2 FT. TRENCH WIDTH, 3 FT. INLET DEPTH 3 1/2 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. { ① 83; ② 83; ③ 82 } TOTAL LENGTH (248')

NUMBER OF TRENCHES 3 ONE 50' x 3' BOTTOM AREA 744 SQ. FT.

DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA 244 SQ. FT.

REMARKS: (P.M.) 4/10/95 obs to covers as finished - back trench etc; Wanted red stones arrived; CBS (Material on site). (Rain showers at site)

4/10/95 W.P.I - Final CBS

DATE SYSTEM APPROVED 4/10/95 INSPECTOR Charles Bryan Steakes  
 (as per above)

# APPLICATION

## PERCOLATION TESTING

A 50097

P \_\_\_\_\_

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

? ABUSE OR  
EXISTING LOT -  
RECENT TEST HISTORY - NOT LOCATED.  
APPLICANT PROPOSES TO TEST  
ON OTHER SIDE OF SWILE,  
ADVISED OF POSSIBLE  
WET SEASON REQUIREMENT  
(CW)

DISTRICT \_\_\_\_\_

DATE 4/20/94

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 Berger via Robert Zirkle (Remax)

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

AGENT OR PROSPECTIVE BUYER Randy Parsley Maria Parsley

ADDRESS 4713 Kirkstall Road PHONE 410 750-2470

### PROPERTY LOCATION:

SUBDIVISION Parcel 331 Tax Map 7 LOT NO. \_\_\_\_\_

ROAD AND DESCRIPTION Old Annapolis Road / Enter through 1503 Old Ann. Rd  
at Remax sign / open gate go to end of property.

TAX MAP 7 PARCEL # 331

SIZE OF LOT 5.62 TYPE BLDG. S.F.D  
(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.

Maria Parsley  
(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

7/12/94  
10:00

COUNTY #

SOIL PROFILE

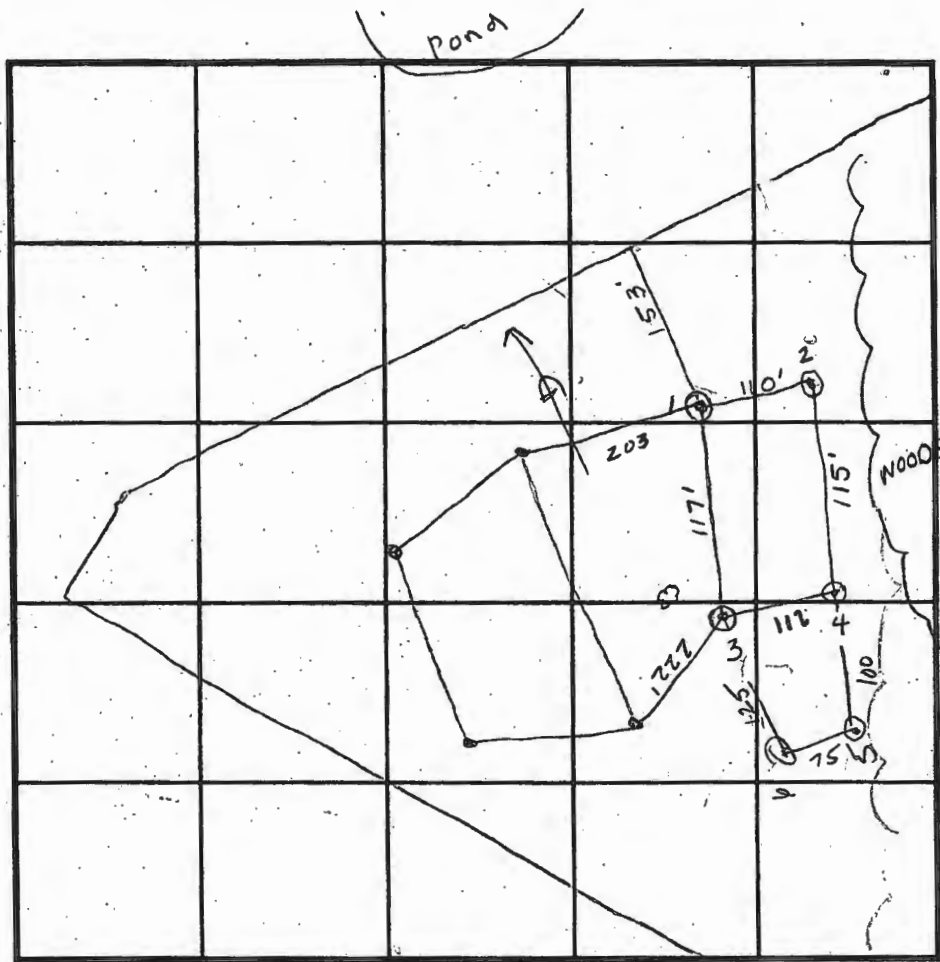
0' tan / orange CL

3' 1gt orange SIL  
30% shale

2.4 tan / orange CL

4' 1gt orange SIL  
10-15% shale

3 Whitish SIL



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE

0' red / orange C

3 1/2' orange brown SIL  
5% rock (shale) frags OR

6 reddish C

2 1/2' orange brown SIL

7 greyish orange SIL

8

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
7/11/94	1	3 1/2' VII'	10:34 <sup>20</sup>	10:37	10:37	10:43 <sup>45</sup>	6 3/4 min
	1	6' VII'	10:38	10:43	10:43	10:48	5 min
	2	7 1/2' VII'	10:45 <sup>15</sup>	10:46 <sup>30</sup>	10:46 <sup>30</sup>	10:48	1 1/2 min
	2	repour	10:48 <sup>30</sup>	10:52	10:52	10:55	3 min
	3	5 1/2' VII'	10:53	10:54	10:54	11:00	6 min
	3	3' VII'	10:50	10:52	10:52	10:54	2 min
	4	4' VII 1/2'	10:22	10:27	10:27	10:32	5 min
8/1/94	5	Visual	to 14				OK
8/1/94	6	3' VII'	10:48	10:51	10:51	10:56	5 min

REMARKS well approx 400-500' away up hill shallow

TYPE OF SOIL

TESTED BY Amy McMillen ALSO PRESENT Maria Parsley

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 5 min TRENCH WIDTH 3'

INLET DEPTH 3 1/2' MAXIMUM BOTTOM DEPTH 5 1/2' SQ. FT/BEDROOM 180 ft<sup>2</sup>

# APPLICATION

PERCOLATION TESTING

A 49743

P \_\_\_\_\_

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

*PERMITS OK  
APPLICANT INDICATES  
NO PRIOR  
PERC HISTORY.  
(CW)*

DISTRICT \_\_\_\_\_

DATE 11/8/93

TO: THE COUNTY HEALTH OFFICER  
ELLICOTT CITY, MARYLAND

*ENTER AT 1503 - BUNGON  
Follow Driveway BACK  
TO GATE BY BARN.*

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

PROPERTY OWNER Martha & Junius Burger Mr. & Mrs. Randy Parsley

ADDRESS 1503 Old Annapolis Rd PHONE 489 77 85

AGENT OR PROSPECTIVE BUYER Bob Zible

ADDRESS 1705 Shofferville Rd PHONE 607-947-750-2474

PROPERTY LOCATION:

SUBDIVISION \_\_\_\_\_ LOT NO. \_\_\_\_\_

ROAD AND DESCRIPTION 155L  
1503 A Old Annapolis Rd  
Woodbine md

TAX MAP 7 PARCEL # 331

SIZE OF LOT 5.62 AC TYPE BLDG. Single Family  
(SINGLE FAMILY DWELLING OR COMMERCIAL)

*BLDG. PERMIT SIDI  
AND RETURNED 1/30/95  
Sept 57961-9704 Bims*

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.

APPROVED BY C. B. [Signature] FOR Shallow [Signature] DATE 11/23/93

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

A 49743

COUNTY #

SOIL PROFILE

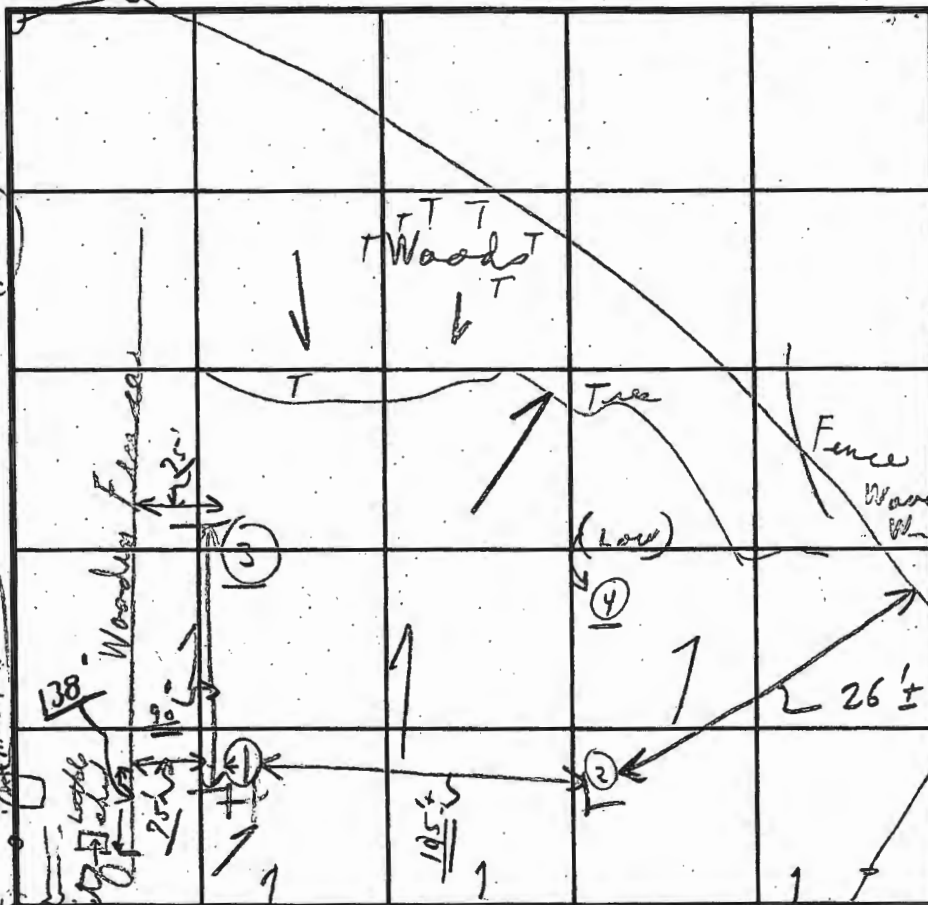
Hole #1

0' to 4' clay  
 4' to 90%+ Loam  
 10%+ Weather shale  
 13 1/2' T. Bottom DRY

SOIL PROFILE

Hole #4

0' to 5 1/2' clay  
 5 1/2' 80% Loam  
 20% Weather shale  
 To Bottom 12' Dry



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

old Annapolis Road

Hole #2

0' to 6' clay  
 6' to 90% Loam  
 10% Weather shale  
 T. 13'-9" Bottom DRY

Hole #3

0' to 5' Clay  
 5' to 90% LOAM  
 Weather shale  
 To 10% Bottom to 14' DRY

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11/23/93	(1)	4'	10:35	10:47	10:47	11:11	24 min ±
	(2A)	13 1/2'	0'-1'	to clay	10% (Weather shale)		
	(3A)	4'	10:30	10:58	10:58	11:00	(Puffed Lowered shelf)
	(3B)	13' 9"	0'-6"	to clay	9% Loam		similar to (1)
	(3)	4'	10:44	11:00	11:00	11:00	lower shelf
	(3A)	14'	4'-5'	5' to clay	(10% weather)		(Loam 90% below)
	(4)	5 1/2'	11:20	11:28	11:28	11:52	24 min
	(7)	12'	0'-5 1/2'	to clay	80% Loam		at
	(28)	6'	11:02	11:03	11:03	11:09	6 min ok
	(3B)	5'	11:09	11:12	11:12	11:19	7 min

REMARKS 11/23/93 Tests in open. Hold for vertical hole

TYPE OF SOIL No stakes field, Test hole being dug as contact arrived

TESTED BY C. B. J. ALSO PRESENT { Mr. Burger }

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 24 TRENCH WIDTH { Mr. Barnes } 2' width

INLET DEPTH 4 MAXIMUM BOTTOM DEPTH 8 SQ. FT./BEDROOM 240+

EMERGENCY/TEMP NO. IF ANY

**B 1** **5396** SEQUENCE NO. (DP USE ONLY) **10/24/94** STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please print or type

STATE PERMIT NUMBER **40-94-0222**  
fill in this form completely

**B 2** Date Received (APA) **100394** OWNER INFORMATION

**PARSLEY** **RAWDY**  
Last Name Owner First Name

**7713KIRASTALK RD**  
Street or RFD

**ELKICOTT CITY MD 21043**  
Town State Zip

**DRILLER INFORMATION** MSD/MGD/MWD

**Joseph L. Mayne** **24**  
Driller Name License No. 80

**Joseph L. Mayne Well Drilling**  
Firm Name

**5512 Ridge Rd. Mt. Airy, Md. 21771**  
Address

**Joseph L. Mayne** **10/3/94**  
Signature Date

**B 2** WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) **5**

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **500**

**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)

APPROXIMATE DEPTH OF WELL **260** FEET

APPROXIMATE DIAMETER OF WELL **6** INCH NEAREST

**METHOD OF DRILLING** (circle one)

BORED (or Augered)  JETTED  Jetted & DRIVEN

AIR-ROTARY  AIR-PERCussion  ROTARY (Hydraulic Rotary)

CABLE  REVERSE-ROTARY  DRIVE-POINT

other: \_\_\_\_\_

**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-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS

THIS WELL WILL DEEPEMED AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) \_\_\_\_\_

Not to be filled in by driller (OEP USE ONLY)

APPROP. PERMIT NUMBER \_\_\_\_\_ GAP \_\_\_\_\_

FORCE **AM** WRITE INITIALS IN BOX PERMIT No. **40-94-0222**

SPECIAL CONDITIONS

**B 3** LOCATION OF WELL

**HOWARD** COUNTY

**10503A OLD ANNAPOLIS RD** SUBSECTION

SECTION \_\_\_\_\_ LOT \_\_\_\_\_ parcel 331

**WoodBlwe** NEAREST TOWN

MILES FROM TOWN (enter 0 if in town) **4** MI

**B 4** DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

**old Annapolis Road** NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

NORTH  WEST  EAST  SOUTH

DISTANCE FROM ROAD **1/2** ENTER FT. OR MI **MI**

TAX MAP: \_\_\_\_\_ BLK: \_\_\_\_\_ PARCEL \_\_\_\_\_

**NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL**

**HOWARD** COUNTY NAME **A49743** COUNTY NO.

STATE SIGNATURE \_\_\_\_\_ INSERT S \_\_\_\_\_

DATE ISSUED **10-11-95** EXP. DATE

**Ann M. Miller** CO SIGNATURE

NORTH GRID **544000** EAST GRID **768000**

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

1. Well

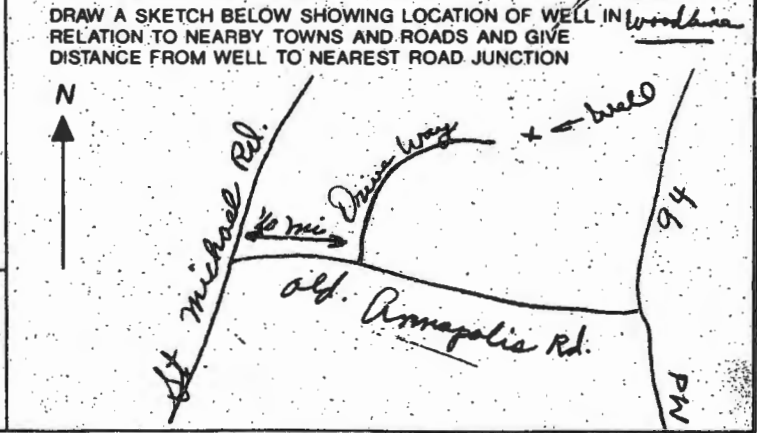
2.

3.

WRITE THE BOX NUMBER FROM THE MAP HERE

**768** **544**

10/25 Granbury p...  
17' Bags of cement  
67' casing  
62' Ground open  
11' casing above ground



NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -

C1 4559

SEQUENCE NO. (DENV USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

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

COUNTY NUMBER A49743

ST/CO USE ONLY DATE Received

100394

DATE WELL COMPLETED

102594

Depth of Well

205 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL"

H0-94-0222

OWNER BANDY PARSLEY

STREET OR RFD 10503A OLD ANNAPOLIS RD TOWN WOODBINE

SUBDIVISION

SECTION

LOT

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 FROM TO Check if water bearing

Table with 3 columns: Description, Feet (From, To), and Check if water bearing. Rows include Brown Shale (0-64) and Blue Rock (64-205).

IN HARD ROCK AREAS, IDENTIFY SPECIFICALLY WHERE SATURATED FRACTURES WERE OBSERVED.

WELL HYDROFRACTURED YES (Y) NO (N)

- 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 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT...

DRILLERS IDENT. NO. 24

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) YES (Y) NO (N)

TYPE OF GROUTING MATERIAL CEMENT (CM) BENTONITE CLAY (BC)

NO. OF BAGS 17 NO. OF POUNDS 1598

GALLONS OF WATER 102

DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 62 ft.

CASING RECORD

ST CO STEEL CONCRETE PL OT PLASTIC OTHER

MAIN CASING TYPE SH Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 69

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

SCREEN RECORD

ST BR HO STEEL BRASS OPEN HOLE PL OT PLASTIC OTHER

Table for screen depth with columns for depth (nearest ft.) and rows for screen sections 1, 2, 3.

SLOT SIZE 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

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min. to nearest gal.) 12

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 42

WHEN PUMPING 78

TYPE OF PUMP USED (for test)

- A air P piston T turbine C centrifugal R rotary O other J jet S submersible

PUMP INSTALLED

DRILLER WILL INSTALL PUMP YES (Y) NO (N)

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)

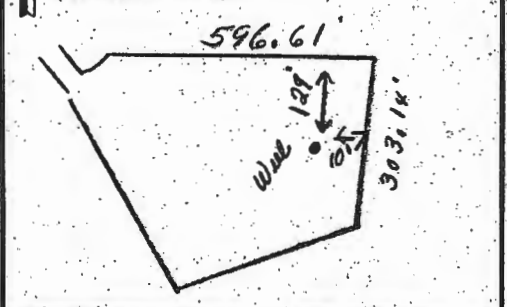
PUMP HORSE POWER

PUMP COLUMN LENGTH (nearest ft.)

CASING HEIGHT (circle appropriate box and enter casing height)

LAND SURFACE (nearest foot)

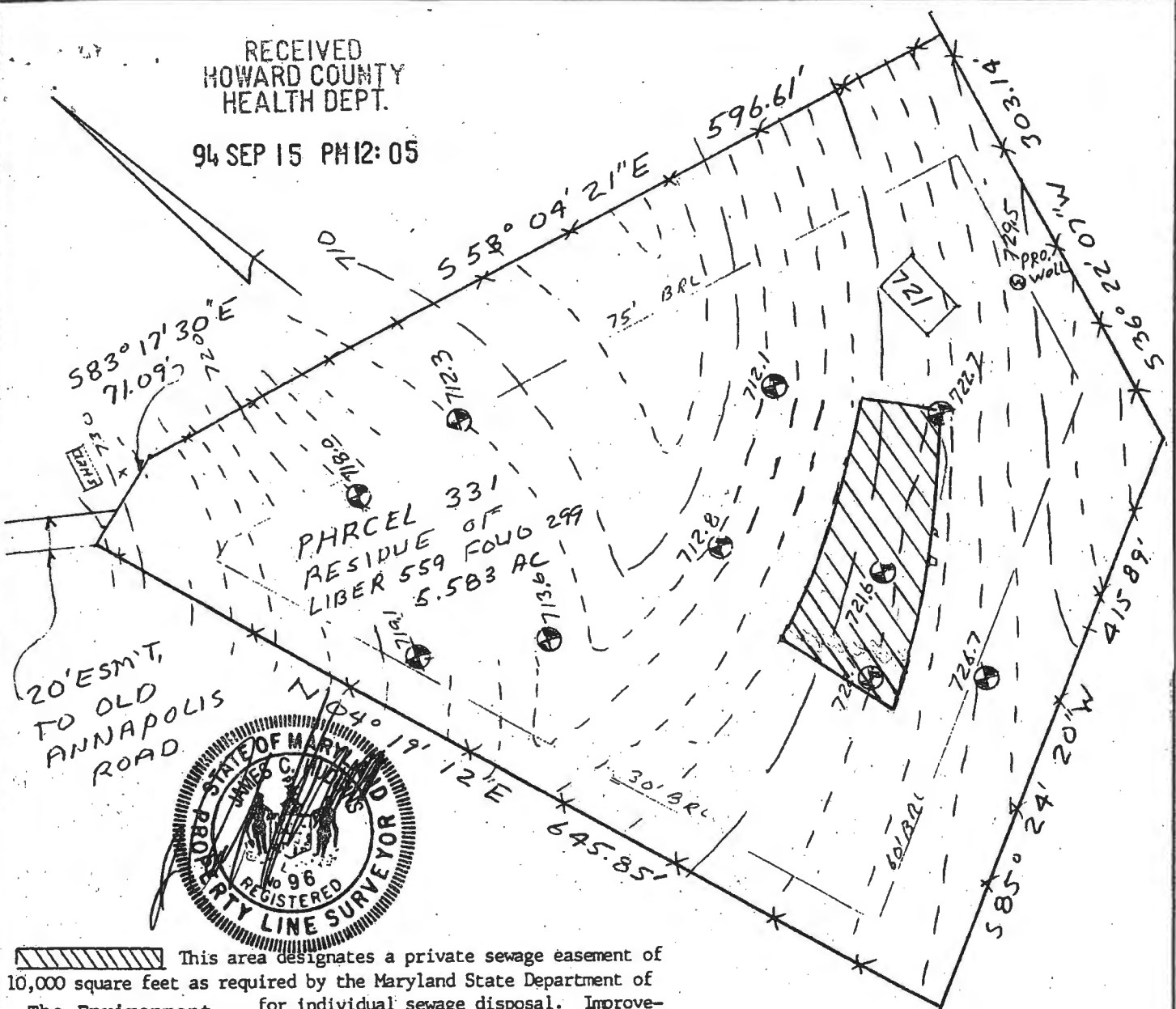
LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)




COUNTY

RECEIVED  
HOWARD COUNTY  
HEALTH DEPT.

94 SEP 15 PM 12:05



 This area designates a private sewage easement of 10,000 square feet as required by the Maryland State Department of The Environment for individual sewage disposal. Improvements of any nature in this area are restricted until public sewage is available. These easements shall become null and void upon connection to a public sewage system. The County Health Officer shall have the authority to grant variances for encroachments into the private sewage easement. Recordation of a modified sewage easement shall not be necessary.

Percolation test holes shown hereon have been field located and shown as "⊕".

The lots shown hereon comply with the minimum ownership width and lot areas as required by the Maryland State Department of The Environment

Percolation areas and water wells for adjoining lots have been shown where pertinent.

APPROVED: For Private Water and Private Sewage Systems

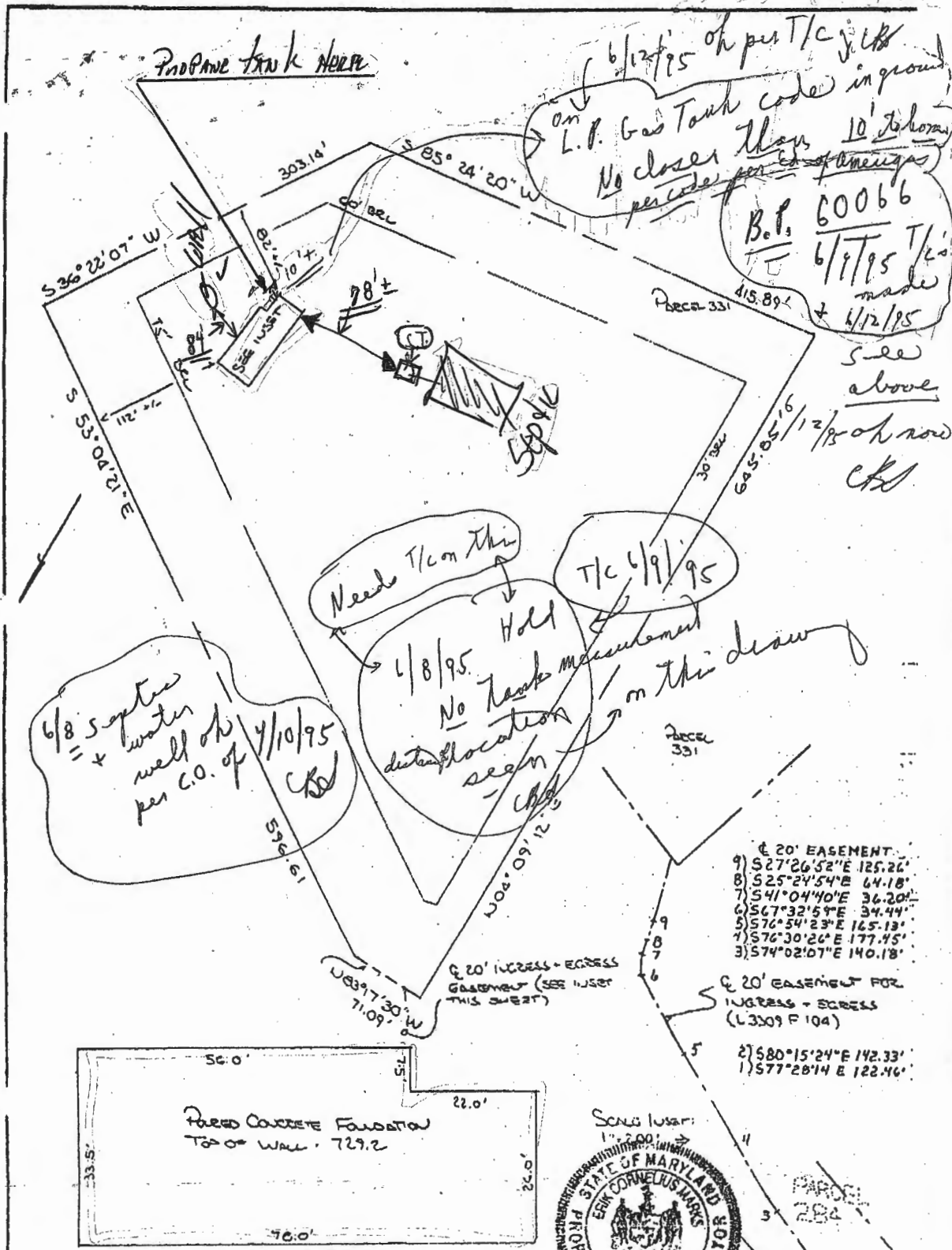
*Joan M. Boydus*  
County Health Officer *AM/cw* 9-29-94  
Date

PERCOLATION TEST PLAT  
PROPERTY OF  
RANDY & MARIA PARSLEY  
TAXMAP 7 PARCEL 331

4th Election District  
Howard County, Maryland  
Scale 1"=100'  
Date 9-8-94

NTT Associates, Inc.  
16205 Old Frederick Road  
Mt. Airy, MD 21771  
(301) 442-2031





**FLOOD CERTIFICATION**

SUBJECT PROPERTY IS SHOWN IN ZONE C AS SHOWN ON COMMUNITY PANEL 240066 007D EFFECTIVE DATE 12/19/86

THIS PLAT IS NOT INTENDED TO BE USED FOR THE PURPOSE OF ESTABLISHING PROPERTY LINES OR POINTS AND WAS PREPARED WITHOUT THE BENEFIT OF A TITLE REPORT

OLD ANNAPOLIS RD.

<p><b>RECORD REFERENCES</b></p> <p>LIBER/FOLIO 3392/151 3309/105</p> <p>PLAT BOOK _____</p> <p>PLAT NO./FOLIO _____</p> <p>SCALE 1"=100'</p> <p>DATE 2/22/95</p>	<p><b>LOCATION SURVEY OF</b></p> <p>1551 Old Annapolis Rd.</p> <p>Foundation Walls</p> <p>HOWARD CO., MARYLAND</p>	<p><b>MARKS-VOGEL ASSOCIATES, INC.</b></p> <p>CONSULTING ENGINEERS-SURVEYORS-PLANNERS</p> <p>3691 PARK AVE. #101 ELLICOTT CITY, MD 21043</p> <p>TELEPHONE (410)461-6828 FAX (410)485-3980</p> <p>I HEREBY CERTIFY THAT THE IMPROVEMENTS ARE LOCATED AS SHOWN HEREON AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THERE ARE NO ENCROACHMENTS EXCEPT AS SHOWN.</p> <p><i>Erik C. Marks</i></p> <p>ERIK C. MARKS R.P.L.S. #807</p>
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