

# PERMIT

03-312321

## SEWAGE DISPOSAL SYSTEM

### DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 58150

A 38125

DISTRICT 3rd

#### HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXXXX~~

313-2640

DATE 5/13/97

DATE SYSTEM APPROVED 10/7/97

INSPECTOR ALM

INDEXED

Fogle's Septic Clean, Inc.

IS PERMITTED TO INSTALL  ALTER

ADDRESS 558 Obrecht Road, Sykesville, Maryland 21784

PHONE 795-5674

SUBDIVISION Meadowood

LOT 17

ROAD 12107 Mayapple Trail

PROPERTY OWNER Wayne & Debi Cossentino

ADDRESS \_\_\_\_\_

SEPTIC TANK CAPACITY 1500 GALLONS

NUMBER OF BEDROOMS 5

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 262

TRENCHES - Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 4 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Place the distribution box 195 feet down the 474.84' lot line and 75 feet off that same lot line. Run trenches <sup>first to target then</sup> in both directions along contour.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK AL 4/21/97

PLANS APPROVED BY Glen Savage

DATE 04/15/97

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.

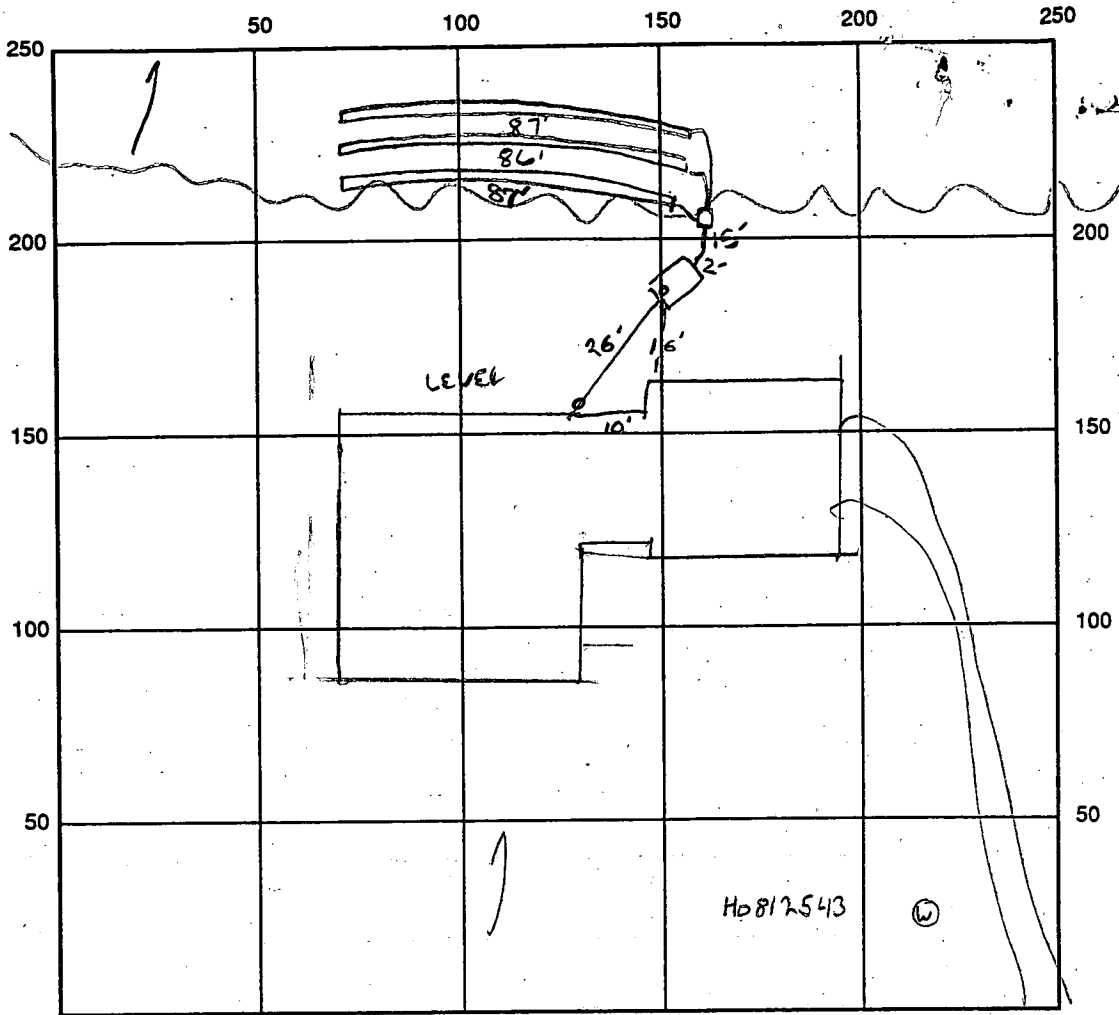
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

HD-260(6-90)

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

A  
38125



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE  
 MAT APPLE TRAIL

SEPTIC TANK LEVEL ok 8500 gallon CLEANOUTS 1 on tank, 1 at wall

DISTRIBUTION BOX LEVEL ok baffle 15 in

DRAIN FIELD/TITLE DEPTH 8.0 FT. TRENCH WIDTH 2.0 FT. INLET DEPTH 4.0 FT.

EFFECTIVE GRAVEL DEPTH 4.0 FT. TOTAL LENGTH 260 FT.

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 1040 SQ. FT.  $\frac{260 \times 4}{1040}$

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

ABSORBENT AREA — SQ. FT.

REMARKS: 8/22/97 ok to cover lines and tank 10/3/97 ok to stone  
trenches as they are dug due to caving ALM 10/7/97 ok to cover  
all work final ALM

DATE SYSTEM APPROVED 10/17/97 INSPECTOR A McMullen

# APPLICATION

PERCOLATION TESTING

A 38/25

P \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 461-9933

DISTRICT \_\_\_\_\_

DATE 11/28/86

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.

PROPERTY OWNER Springhill Associates - c/o D.S. Thaler & Associates, Inc.  
*Wayne + Debi Cossetino*

ADDRESS 11 Warren Road, Baltimore, MD 21208 PHONE (301) 484-4100

PROSPECTIVE BUYER N/A

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

PROPERTY LOCATION:

SUBDIVISION Meadowood LOT NO. 1817  
*(12107 MAYAPPLE TRAIL)*

ROAD AND DESCRIPTION Henryton Road - approximately 4000' north of Tunnel Road  
Howard County, Maryland

TAX MAP 10 PARCEL # 139

**BLDG. PERMIT SIGNED**  
**AND RETURNED 4-15-97**  
*Serial # B 4104861*

SIZE OF LOT 3+ Acres TYPE BLDG. Single Family 5 Brms  
(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.

*Mike Seelye*  
(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

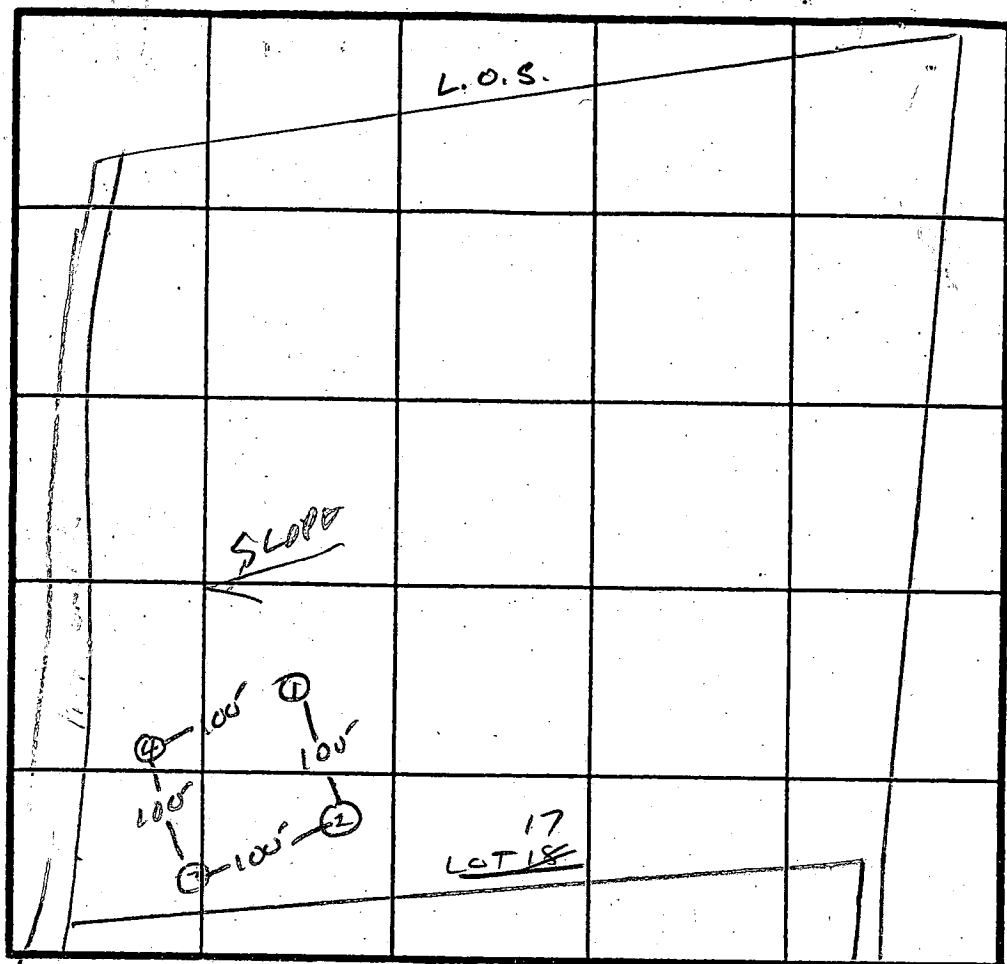
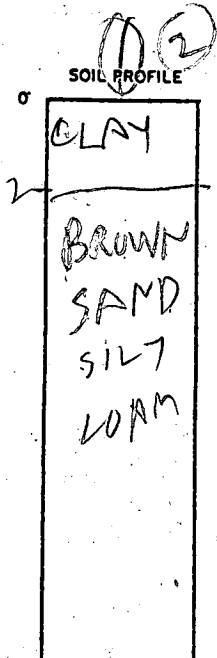
HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

# THIS IS NOT A PERMIT

LOT 19



Hole Elevation

① HIGHEST

② HIGH

④ LOWEST

③ LOW

X PENE TRAC

1/4 MIN

200 LB BROOM

IN LOT 4

BOTTOM 8

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

↓ TO HENRYTON Rd.

- ③ BROWN CLAY
- RED BROWN SANDY LOAM
- BEIGE SAND LOAM & COBBLES
- ④ BROWN CLAY
- BROWN SAND SILT LOAM

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
12/6/86	1 S	3.5	209	212	212	214	2
	1 N	8	208	210	210	214	4
	IV	H	OK				
	2 S	4	217	218	218	220	
	2 V	11.5	OK				
	3 S	3.5	224	232	232	302	28
	3 V	11	OK				
	4 S	4	227	244	244	303	19
	4 V	11	OK				

REMARKS \_\_\_\_\_

TYPE OF SOIL \_\_\_\_\_

TESTED BY R. Hodger ALSO PRESENT Francis Rocky Bill

EH-12-1079

16  
3

B 1 2297 SEQUENCE NO. (OEP USE ONLY) (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND PERMIT TO DRILL WELL please print or type

OEP PERMIT NUMBER 40-81-2543 fill in this form completely

Date Received 7/22/88 12:10 Noon OWNER INFORMATION SPRING HILL ASSOC 1432 RT 32 W FRIENDSHIP MD 21794

B 3 LOCATION OF WELL R 396 45 HOWARD MEADOWOOD SECTION 1 LOT 17 SYRACUSEVILLE MILES FROM TOWN 4 MI

DRILLER INFORMATION George F. Easterday L. Franklin Easterday, Inc. 9265 Br. Ch. Rd., Mt. Airy, Md. 21771

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX) MAY APPLE DRIVE NEAR WHAT ROAD ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) DISTANCE FROM ROAD 40 FT

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)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL HOWARD COUNTY NAME A 38125 COUNTY NO. OEP SIGNATURE DATE ISSUED 021088 R Nifon 08/10/88 CO SIGNATURE EXP. DATE NORTH GRID 548000 EAST GRID 0819000

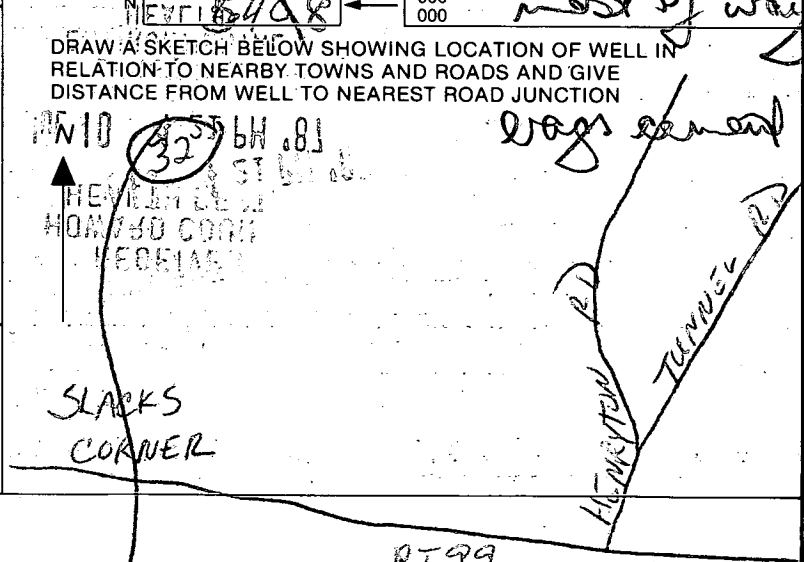
APPROXIMATE DEPTH OF WELL 200 FEET

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. WELL 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE 819 9 NEVIG 5408

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 DEEPEN 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 INITIALS PERMIT No. 40-81- SPECIAL CONDITIONS







# SEPTIC SYSTEM DATA

INV. AT HOUSE : 541.7

## SEPTIC TANK

EX. GRADE: 546  
 FIN. GRADE: 545.0  
 INV. IN : 541.5  
 INV. OUT: 541.2

## DISTRIBUTION BOX

EX. GRADE: 545.0  
 FIN. GRADE: 544.2  
 INV. IN : 540.7  
 INV. OUT: 540.7

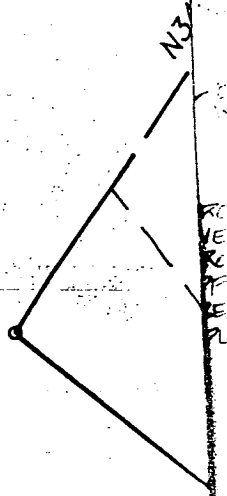
## TRENCHES

	#1	#2	#3	#4
EX. GRADE :	543.8	543.8	542.7	542.0
FIN. GRADE:	543.1	543.5	542.7	542.0
INV. IN :	539.1	539.9	538.7	538.0
BOTTOM:	535.1	535.5	534.7	534.0
LENGTH :	50'	50'	50'	50'

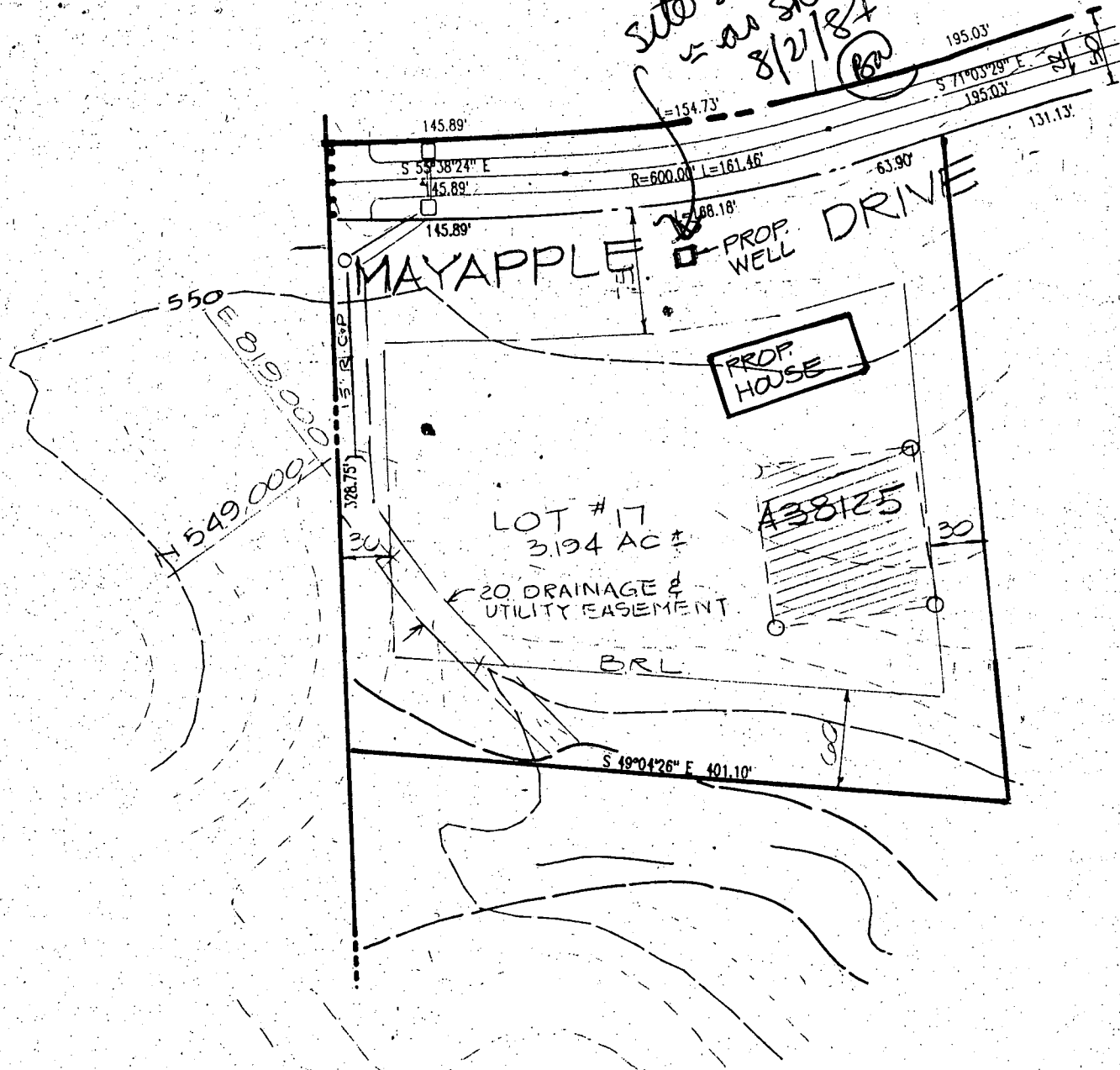
Approved Septic System Plan  
 Howard County Health Department

Ann McMill  
 Signature

10/26/97  
 Date



Site staked  
 as shown  
 8/21/87



**OWNER**  
 SPRING HILL ASSOCIATES  
 RUTH H. WESTON  
 1427 ROUTE 32  
 SYKESVILLE, MD. 21784

**DEVELOPER**  
 KOREN DEVELOPMENT CORP. INC.  
 5423 WATERCRESS PLACE  
 COLUMBIA, MARYLAND 21045

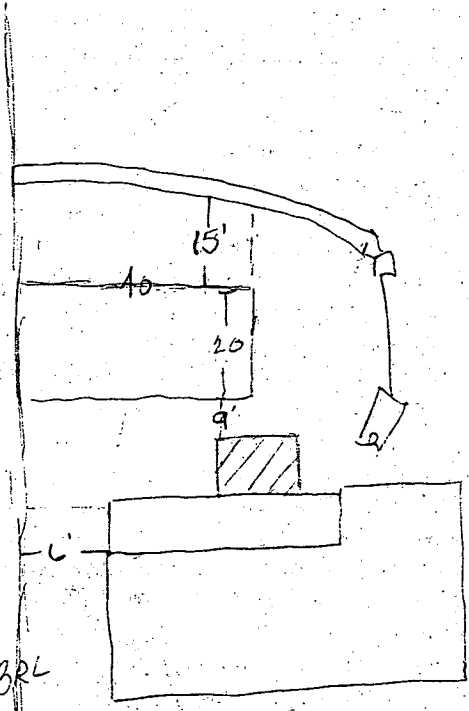
RECEIVED  
 JUN 30 1987  
 L.F. EASTERDAY, INC.

D.S. Thaler & Assoc. Inc.  
 CIVIL ENGINEERS · SURVEYORS  
 LANDSCAPE ARCHITECTS  
 11 WARREN ROAD  
 BALTIMORE, MARYLAND 21208  
 (301) 484-4100

LOT # 17  
**MEADOWOOD**  
 SECTION ONE  
 TAP MAP 10  
 3RD ELECTION DISTRICT  
 SCALE: 1"=100'  
 PARCEL 139  
 HOWARD COUNTY, MARYLAND  
 DATE: JUNE 25, 1987



7/20/99  
OK to install  
20x40 pool - it will  
be approx 15' off  
trenches - OK to  
proceed sewage  
flowing away from pool  
A. McMill

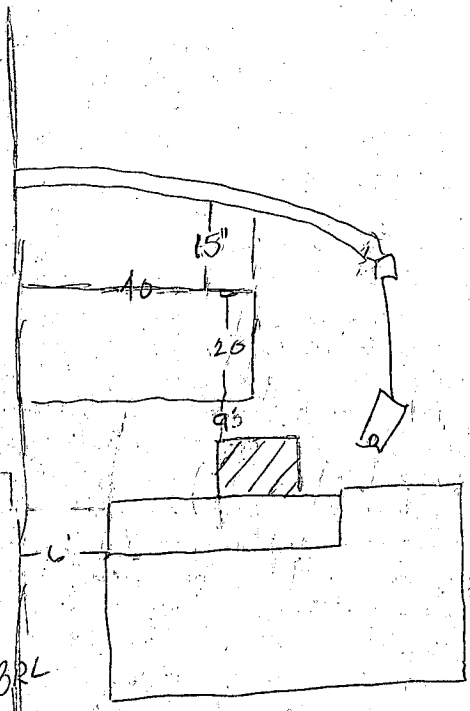


RECEIVED

JUL 01 1999



7/20/99  
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proceed sewage  
flowing away from pool  
BRL  
A McMill



RECEIVED

JUL 01 1999

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3430 COURT HOUSE DRIVE ELLICOTT CITY, MD 21043 PERMITS (410)313-2455 INSPECTIONS (410)313-1810 AUTOMATED INFORMATION (410) 313-3800	<b>HOWARD COUNTY</b> <b>PERMIT APPLICATION</b>	<b>PERMIT NUMBER</b> <b>B00120312</b>
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Building Address 12107 MAYAPPLE TRAIL  
MARRIOTTVILLE, MARYLAND 21104

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

Census Tract        Subdivision MEADOWOOD

Section 1 Area        Lot 17

Tax Map        Parcel        Grid       

Zoning        Map Coordinates        Lot size 3,0482

Property Owner's Name WAYNE & DEBRA COSSENTINO

Address 12107 MAYAPPLE TRAIL

City MARRIOTTVILLE State MD Zip Code 21104

Home Phone (410) 442-2555 Work Phone (410) 442-0000

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

Phone        Fax       

Existing Use SINGLE FAMILY DWELLING

Proposed Use SAME, WITH POOL

Estimated Construction Cost \$ 28,000.00

Description of Work CONCRETE INGROUND POOL WITH DE-FILTER. POOL TO BE FILLED BY TRUCK. 22' WIDE BY 48' LONG, 3' TO 8' DEEP WITH 2" BOARD TOTAL S.F. = 908

425 L.F. OF 48" HIGH WOOD PICKET FENCE.

Contractor Company ANTHONY & SYLVAN POOLS, INC.

Contact Person GEORGE A. SCHWEICH - AGENT FOR CONTRACTOR

Address 10840 GUILFORD ROAD, SUITE 407

City ANNAPOLIS State MD Zip Code 20701

License No. 19347

Phone (301) 490-1930 Fax (410) 792-2818

Occupant or Tenant SAME AS OWNER

Contact Name       

Address       

City        State        Zip Code       

Phone        Fax       

Engineer or Architect Company N/A

Contact Person       

Address       

City        State        Zip Code       

Phone        Fax       

**BUILDING DESCRIPTION - COMMERCIAL**

**BUILDING DESCRIPTION - RESIDENTIAL**

Building Characteristics	Utilities
Height: <u>      </u>	Water Supply: <u>      </u>
No. of stories: <u>      </u>	Public <input type="checkbox"/>
Gross area, sq. ft. per floor: <u>      </u>	Private <input type="checkbox"/>
Use group: <u>      </u>	Sewage Disposal: <u>      </u>
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 <input type="checkbox"/>
	Partial <input type="checkbox"/>
	Other Suppression <input type="checkbox"/>
	# of Heads <u>      </u>

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: <u>      </u>
<u>Depth</u> <u>      </u> <u>Width</u> <u>      </u>	Public <input type="checkbox"/>
1st floor: <u>      </u>	Private <input checked="" type="checkbox"/>
2nd floor: <u>      </u>	Sewage Disposal: <u>      </u>
Basement: <u>      </u>	Public <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/>	Private <input checked="" 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 <u>      </u>	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Multi-family dwellings:	Heating System:
No. of efficiency units: <u>      </u>	Electric <input type="checkbox"/> Oil <input type="checkbox"/>
No. of 1 BR units: <u>      </u>	Natural Gas <input type="checkbox"/>
No. of 2 BR units: <u>      </u>	Propane Gas <input type="checkbox"/>
No. of 3 BR units: <u>      </u>	Sprinkler system: N/A <input type="checkbox"/>
Other Structure: <u>INGROUND POOL</u>	Full <input type="checkbox"/>
Dimensions: <u>22' W BY 48' LWC</u>	Partial <input type="checkbox"/>
Footings: <u>      </u>	Other Suppression <input type="checkbox"/>
Roof: <u>      </u>	# of Heads <u>      </u>
<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.

George A. Schweich  
 Applicant's Signature  
AGENT FOR CONTRACTOR  
 Title/Company

GEORGE A. SCHWEICH  
 Print Name  
SEPTEMBER 8, 1999  
 Date

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

AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official		
Dev. Engineering, DPZ		
Health	<u>9/8/99</u>	<u>A. McMiller</u>
Fire Protection		

Is Sediment Control approval required prior to issuance?  
 YES  NO

CONTINGENCY CONSTRUCTION START:

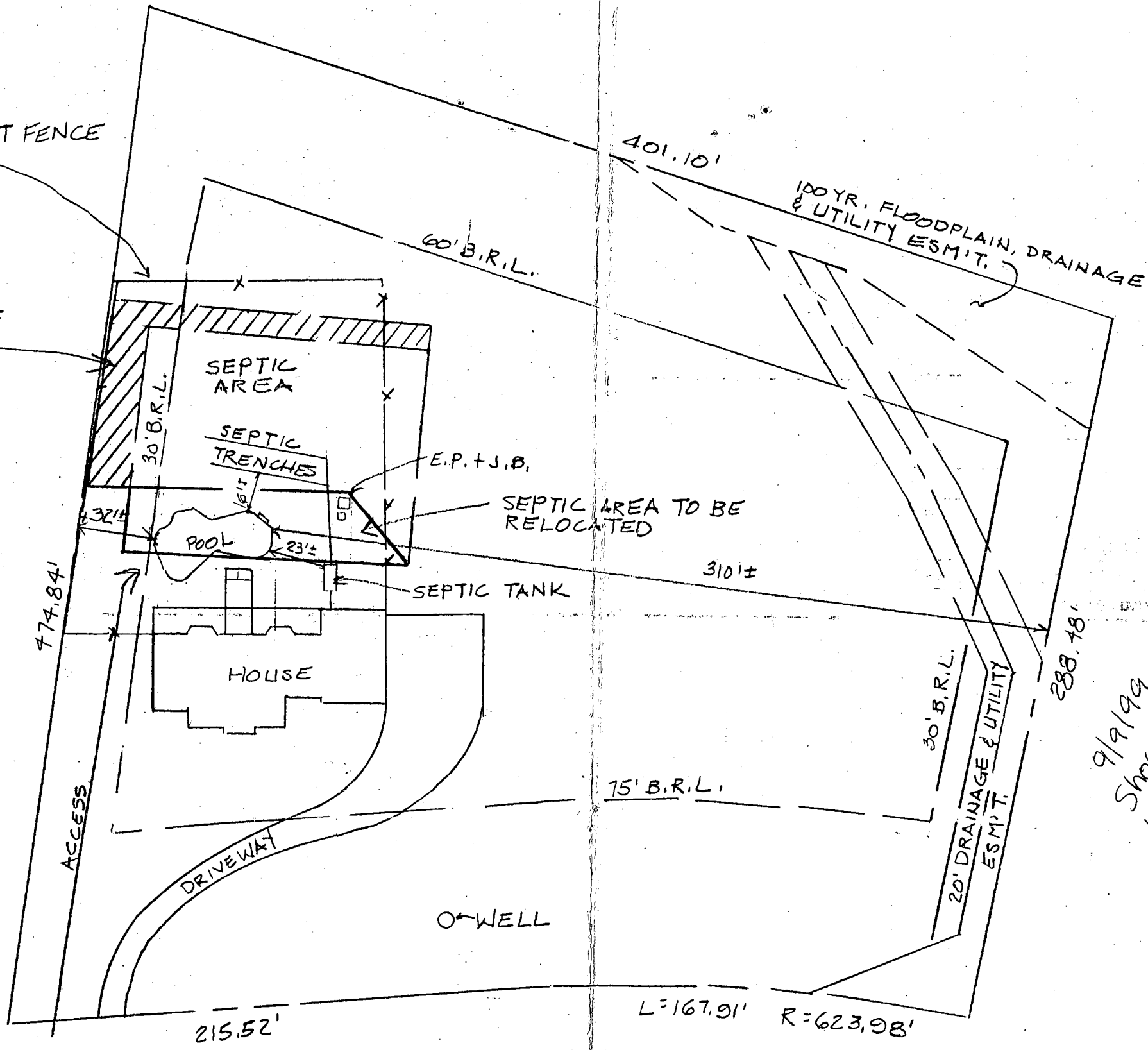
ONE STOP SHOP:

DPZ SETBACK INFORMATION	PROPERTY ID#:
Front: <u>      </u>	Filing fee \$ <u>      </u>
Rear: <u>      </u>	Permit fee \$ <u>      </u>
Side: <u>      </u>	Excise tax \$ <u>      </u>
Side St.: <u>      </u>	Sub-total paid \$ <u>      </u>
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	Add'l permit fee \$ <u>      </u>
Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ <u>      </u>
Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ <u>      </u>
Lot Coverage for NewTown Zone <u>      </u>	Check # <u>      </u>
SDP/Red-line approval date <u>      </u>	Validation # <u>      </u>
Accepted by <u>      </u>	

Distribution of Copies- White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA

HIGH PICKET FENCE  
PER CODE

LOCATION OF  
AREA



9/9/99  
 Shown Pool  
 location OK as  
 Shown OK as  
 Inspection see site  
 notes 7/20/99  
 [Signature]

MAYAPPLE TRAIL

SEPTIC SYSTEM DATA

INV. AT HOUSE : 941.7

SEPTIC TANK

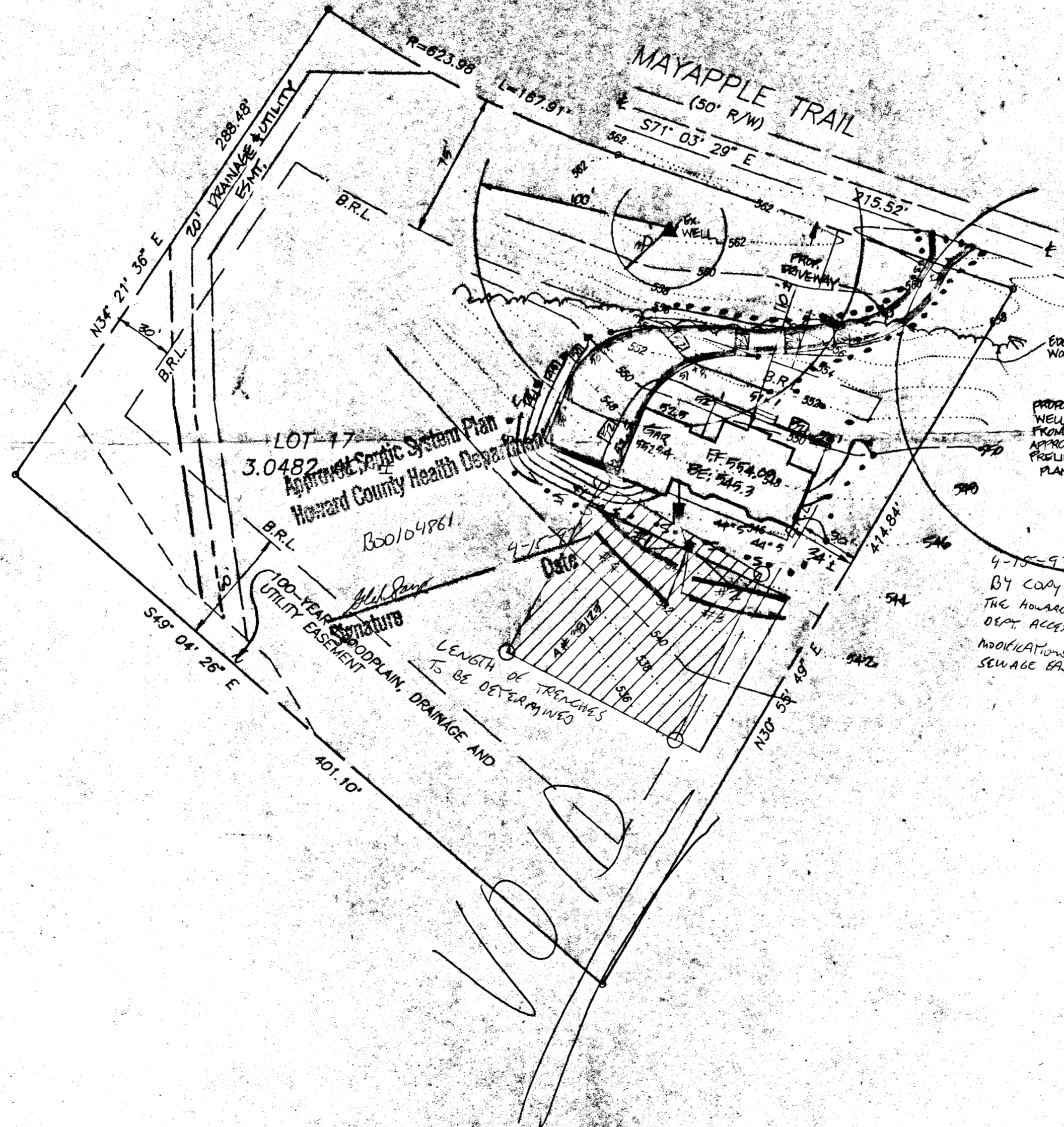
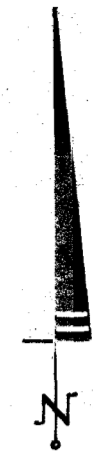
EX. GRADE: 946  
 FIN. GRADE: 945.0  
 INV. IN : 941.5  
 INV. OUT: 941.2

DISTRIBUTION BOX

EX. GRADE: 945.0  
 FIN. GRADE: 944.2  
 INV. IN : 940.7  
 INV. OUT: 940.7

TRENCHES

	#1	#2	#3	#4
EX. GRADE:	943.8	943.8	942.7	942.0
FIN. GRADE:	943.1	943.0	942.7	942.0
INV. IN :	939.1	939.0	938.7	938.0
BOTTOM:	935.1	935.0	934.7	934.0
LENGTH:	50'	50'	50'	50'



NOTES:

1. THE TOPOGRAPHY SHOWN HEREON WAS FIELD RUN BY SHANABERGER & LANE IN JANUARY OF 1997.
2. [Hatched area symbol] DESIGNATES SEWAGE DISPOSAL AREA PER PLAT # 7809  
 [Dotted area symbol] DESIGNATES PROPOSED REVISED SEWAGE DISPOSAL AREA  
 [Dashed line symbol] DESIGNATES LIMIT OF DISTURBANCE  
 [Solid line symbol] B.R.L. DESIGNATES BUILDING RESTRICTION LINE  
 [Dotted line symbol] S.S.S. DESIGNATES SILT FENCE
3. TOTAL AREA DISTURBED: 19,040 sq ft
4. SUBJECT PROPERTY ZONED: RR-DEO
5. GRAVITY SEWER SERVICE TO BASEMENT IS PROVIDED.

4-15-97  
 BY COPY OF THIS PLAN  
 THE HOWARD COUNTY HEALTH  
 DEPT. ACCEPTS THE PROPOSED  
 MODIFICATIONS TO THE  
 SEWAGE EASEMENT. [Signature] SANITARIAN

SHANABERGER & LANE  
 8726 TOWN & COUNTRY BLVD.  
 SUITE 104  
 ELLICOTT CITY, MD. 21043  
 (410) 461-9563

SITE PLAN  
 LOT 17  
 MEADOWOOD SECTION ONE

SHEET 4 OF 6  
 PLAT #7809

THIRD ELECTION DISTRICT, HOWARD COUNTY, MD.  
 SCALE: 1"=50'  
 JANUARY 20, 1996  
 REL. 2/12/97