

10/2/91

PERMIT 03-314731

P 47476

SEWAGE DISPOSAL SYSTEM

A 39036

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT 3rd

INDEX-TIME EXPIRED

DATE 9/13/91

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

461-9933

FOR F.C.O.P.

DATE SYSTEM APPROVED 10-4-91

INDEXED COMPLIANCE

9/13/93 INSPECTOR JEN
C. Williams / C. B.

Paul Schissler/South Carrol Backhoe, Inc. IS PERMITTED TO INSTALL ALTER

ADDRESS 4410 Salem Bottom Road, Westminster, Maryland 21157 PHONE 875-4197

SUBDIVISION Amberwoods LOT 4 ROAD 12819 Amberwoods Way

PROPERTY OWNER Grayson Homes, Inc.

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

220 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 293

ROCK THROUGHOUT DESIGNATED SEPTIC AREA,
GOOD SOIL TO RIGHT AND REAR OF HOUSE,
PLACE TANK 10' FROM HOUSE, BEHIND GARAGE,
TRENCHES 2' WIDE
INLET 3' DEEP
MAX DEPTH 8'
5' STONE BELOW DIST. PIPE

176 LINEAR FT
TRENCH REQ'D,
10/2/91 C.W.

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

LOCATION - Start the first trench 180' down the right lot line and 40' off that lot line. Run trenches on contour toward front of lot, no closer than 100' to the well.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and ap to grade or above on septic tank. OK 8/15/91 RH

*SEE ATTACHMENT FOR REVISED SEWAGE DISPOSAL EASEMENT

PLANS APPROVED BY Craig Williams cm DATE 9/15/89

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**

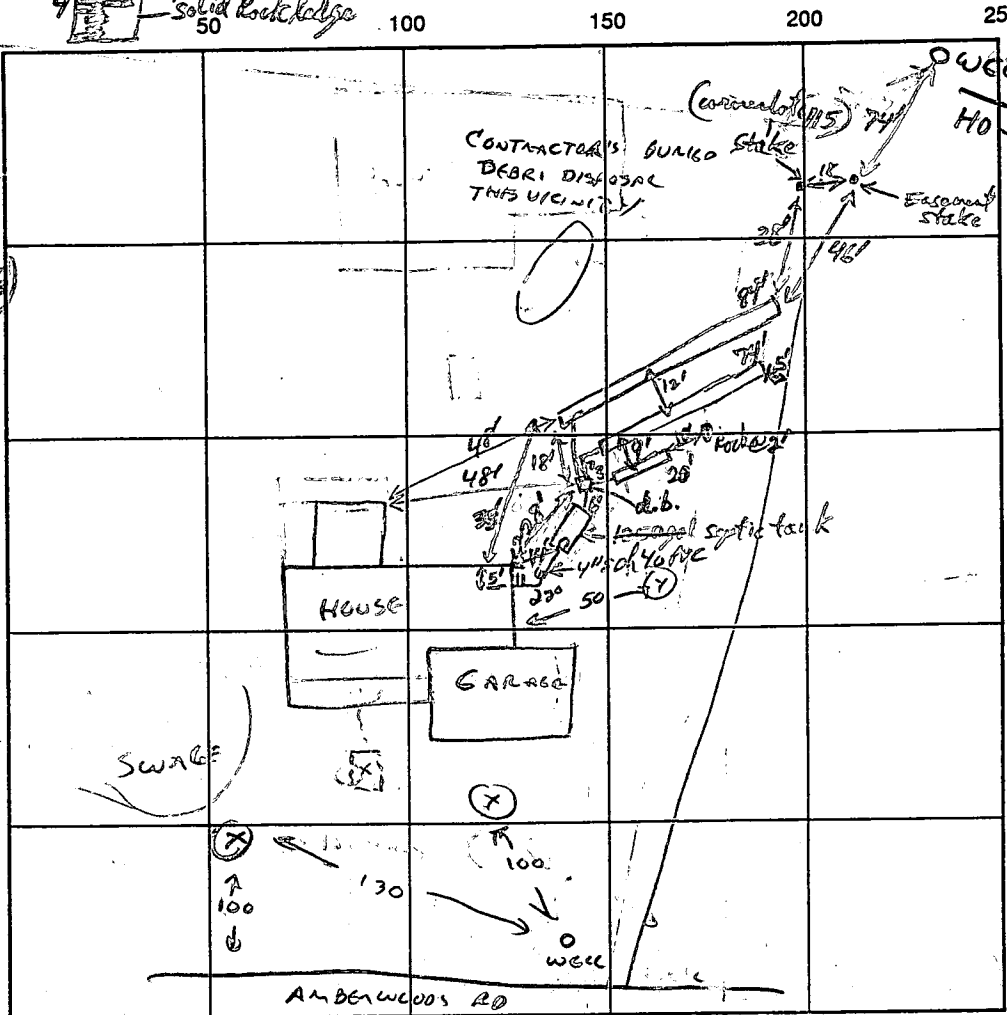
A 39036

Long II

short to end granitic gneiss
2' diggable solid rock >90%
4' solid rock ledge

Brn 10R 3/4 mfr
 L-S 2+50k
 (18% clay)
 Red Brn 57R 1/6 3/4
 HL mfr 2+50k
 Red Brn 10R 4/8
 hSL massive
 mfr spongy
 Gray Tan (10R 3/4)
 light SL + 6/8
 (pegs at 4ft
 in Tr 84)

3 HOLES
 (X)
 3-5'
 FRACTURED
 ROCK
 > 70%



(Y)
 CLAY LOAM
 2
 SAND SILT LOAM
 NO ROCK
 12

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

Sch 40 Topseam 1500gal
 SEPTIC TANK LEVEL Top is 2-2 1/2 ft below grade CLEANOUTS (inlet side) 1 on S Tank
 DISTRIBUTION BOX LEVEL Top is 2ft below grade Baffle ok
 DRAIN FIELD/TITLE DEPTH 8 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3 FT.
 EFFECTIVE GRAVEL DEPTH 5 FT. TOTAL LENGTH 178 FT. L-20' 1/4 1/84
 NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 100/370/42 SQ. FT.
 DRYWALL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.
 ABSORBENT AREA 890 SQ. FT.

REMARKS: 10/2/91 SEVERE ROCK PROBLEMS AT PLANNED TANK LOCATION AND 2 TEST HOLES (X)
GOOD SOILS ESTABLISHED TO REAR + RIGHT OF HOUSE - INSTALL SYSTEM THIS LOCATION (Y) CW.

10-3-91 Note - Backfill short trench within 10ft of Rock outcrop (leaving only 20ft of gravel fill in this trench. 74'+84" trenches free of Rock (loose sandy soils in bottom 3-4ft) OK to cover long Trenches. Call for db + short trench Tomorrow. Play adjust db. flows to favor longest two trenches. RPP 10-3-91

2ft - Massive Rock ledge 30ft from beginning of short trench. 10-4-91 OK to cover all work. JEN
 DATE SYSTEM APPROVED 10-4-91 INSPECTOR Gene G. Hadesan

6/8/92 pm

APPLICATION

PERCOLATION TESTING

A _____
P _____

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

2ND PERTEST
TO EST. 10,000 SQ FT EASEMENT

DISTRICT _____
DATE _____

EXCESS ROCK IN ORIGINAL PLATTED EASEMENT,
SEPTIC SYSTEM INSTALLED BEHIND HOUSE,
FUTURE REPAIR AREA TO BE ESTABLISHED,
C.W.

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 GRAYSON HOMES

ADDRESS _____ PHONE _____

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION AMBERWOODS LOT NO. LOT 4

ROAD AND DESCRIPTION 12819 AMBERWOODS WAY

TAX MAP _____ PARCEL # _____

SIZE OF LOT _____ TYPE BLDG _____
(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.

(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

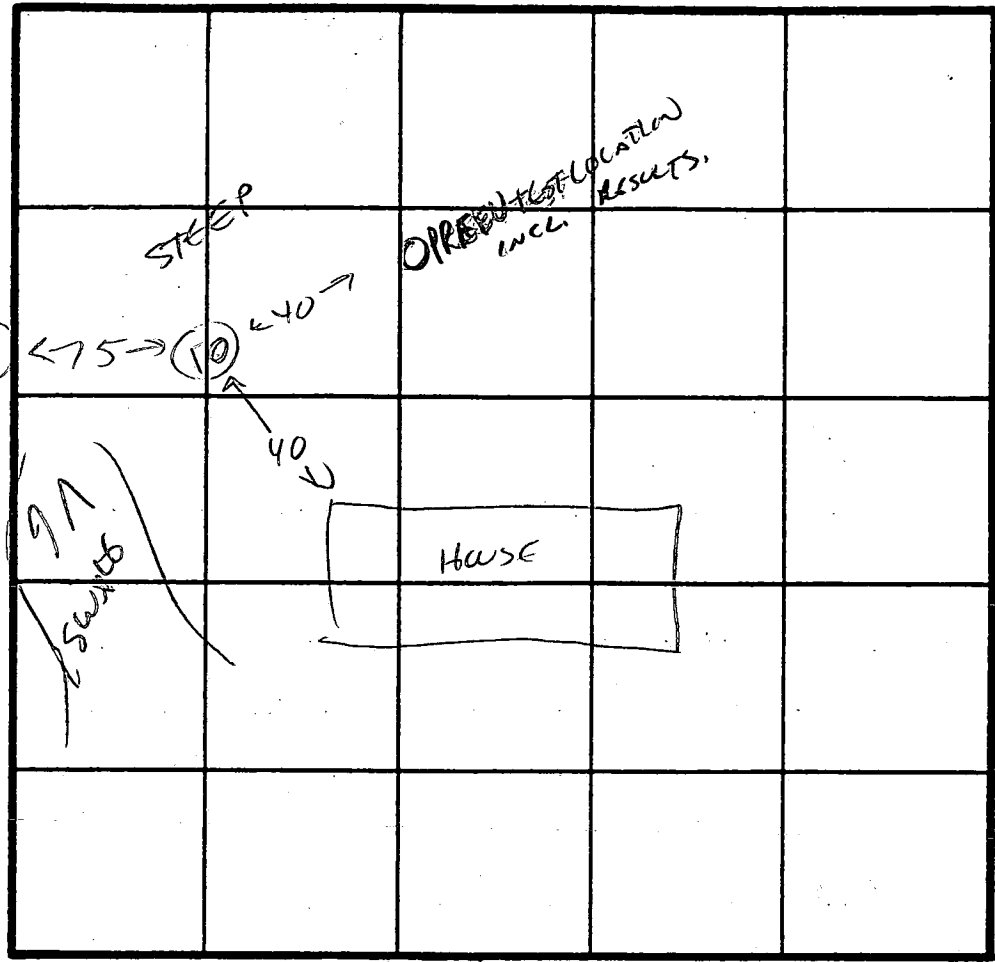
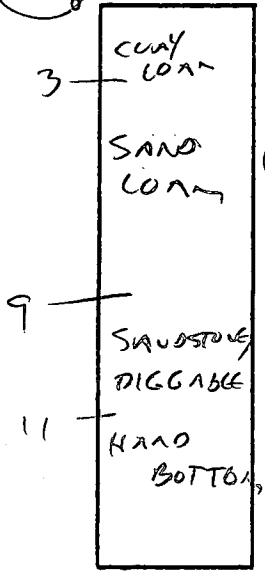
REASONS FOR REJECTION OR HOLDING _____

HD-216

THIS IS NOT A PERMIT

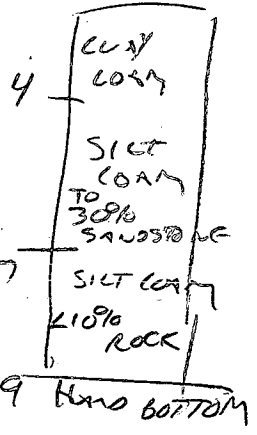
#10

SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

#11



DATE	TEST NO.	DEPTH.	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
6/8/92	10	3 9	VIS OK	LOAM	3-9'		OK SHALLOW	
		11	BRANDSTONE AT 9'					
6/8/92	11	4 9	VIS OK	4-9' ONLY				
			HARD BOTTOM					
			HOLE 11 IN QUESTIONABLE LOCATION					
			SOIL PASSABLE, BUT TOPOGRAPHY LIMITING					
			REVIEW PLOT CAREFULLY,					
			COMBINE WITH PREVIOUS TEST RESULTS					

REMARKS TOPOGRAPHY LIMITING - SWALE, STEEP SLOPE, VARIABLE DEPTH TO BEDROCK

TYPE OF SOIL SAND SILT LOAM

TESTED BY CAROLAN ALSO PRESENT HOMESOWNER (INSIDE)

4/28/87

APPLICATION

PERCOLATION TESTING

A 39036

P _____

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

DISTRICT 3

DATE 3/4/87

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 Richard Arrington Grayson Homes, Inc.

ADDRESS 1050 Sykesville Rd. West Friendship MD PHONE 301-776-7454
461-5900

PROSPECTIVE BUYER Amberwoods Limited Partnership

ADDRESS 1420 Fenwick Lane Silver Spring MD PHONE 301-587-5455

PROPERTY LOCATION:

SUBDIVISION Amberwoods (S-87-42) LOT NO. 4

ROAD AND DESCRIPTION Rt 32 North of MD 99.
12819 Amberwoods Way - 21784

TAX MAP 9 PARCEL # 4

SIZE OF LOT 3.0 Ac TYPE BLDG. Single Family
(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.

Sam Negalle
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

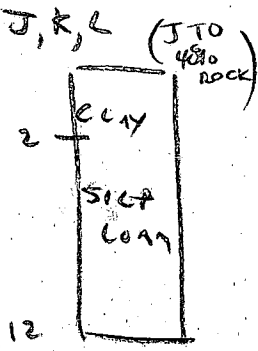
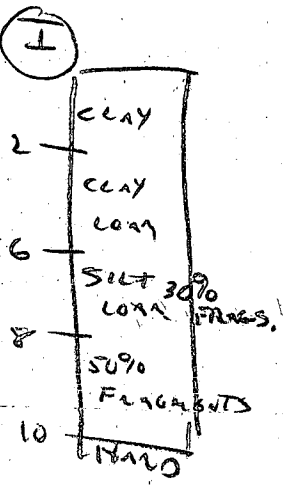
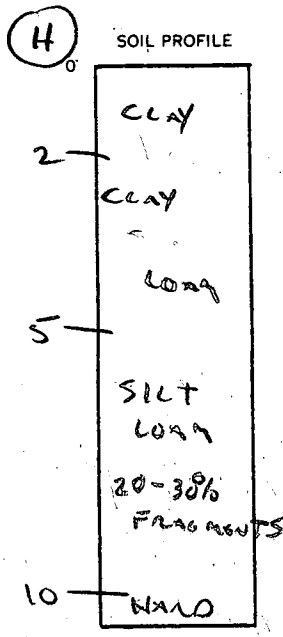
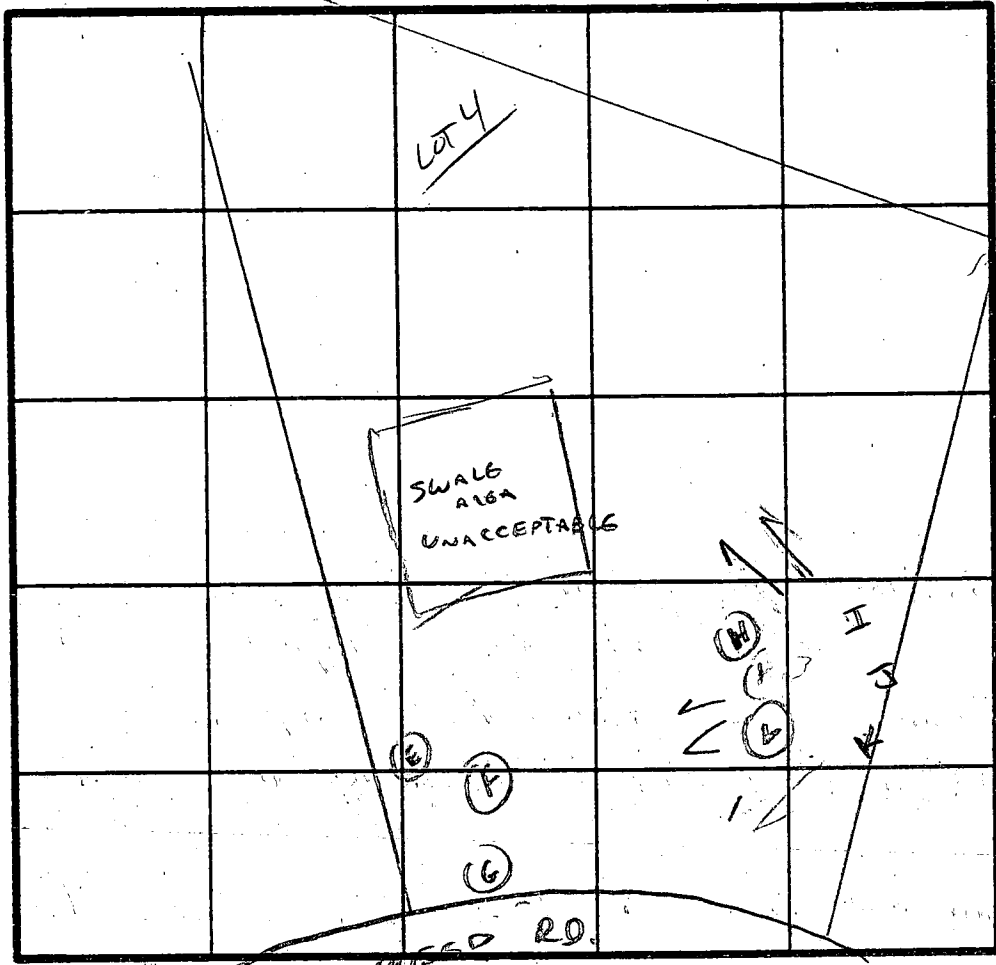
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING ADJUSTMENT FOR WELL SITE 150'D.

BLDG. PERMIT SIGNED
AND RETURNED 8/2/87

Health # 98830 - SFD.
4 Bedrooms

THIS IS NOT A PERMIT



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/28/87	E, F, G	ROCK	2-6'				
	H	2	1:51	1:59	1:59	2:12	13 MIN ✓
	H	7	1:51	1:57	1:57	2:07	10 MIN ✓
		10	ROCK BOTTOM				
	I	MARGINAL ROCK CONTENT		6-8'			X
		EXCESS ROCK		8-10'			
	J	3	1:54	1:58	1:58	2:03	5 MIN ✓
	J	8	1:54	1:57	1:57	2:00	3 MIN ✓
		12	VIS OK - LOAM				
	K	2 1/2	1:55	2:00	2:00	2:08	8 MIN ✓
	K	7 1/2	1:55	1:57	1:57	2:00	3 MIN ✓
		12	VIS OK - LOAM				
	L	3	VIS OK		2-12'		✓
		8	VIS OK				

REMARKS _____

TYPE OF SOIL SILT LOAM - ROCK BOTTOM

TESTED BY William ALSO PRESENT SKIP, ROCKY

EH-12-1079

R47476

A 3903L

10-3-91

Amberwoods lot 4

RHP

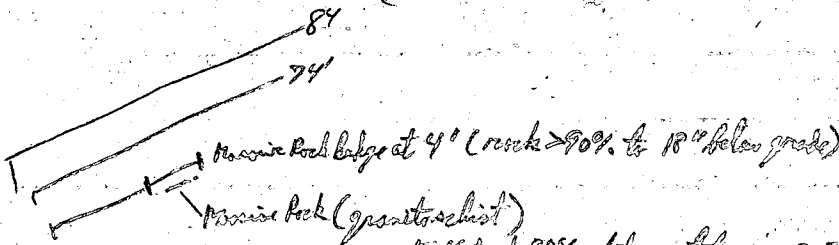
12819 Amberwoods way

(Gross plot area)

Quoted for road

$220 \frac{3}{4} \text{ ft} = \frac{880}{5} = 176 \text{ LF}$

- 0-18" Ben 10/R 3/4 1-SL ^(about 18-clays) mfr 2F-VF SBK
- 18-30" Red Ben 5YR 4/6-3/6 HL (about 24% clay) sL micaceous mfr 1-2F-m SBK
- 30-5 1/2' Red Ben 10R 4/8 hSL massive Saprolite mfr
- 5 1/2'-8' Gray Tan HSL - mfr-ls sands ^(top layer is 5YR 5/8 L-SL loose in trench P4)
 10YR 5/6, 6/3, 5/3 (in Tr 84' sand starts @ 4' below grade)
 (micaceous sandy soil)



55% dark 50% white particles are 3-5 mm thick

weathered red massive saprolite will crumble w/ some effort

is found 5' in 5' of rock or in upper profile 5' in 15' of rock

B 1 1208 SEQUENCE NO. (DP USE ONLY)
THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS

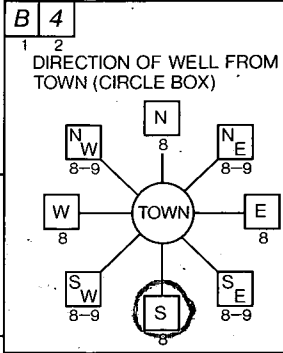
STATE OF MARYLAND
PERMIT TO DRILL WELL
please print or type

STATE PERMIT NUMBER
HO-88-0674
fill in this form completely

Date Received (APA) 04-24-89
OWNER INFORMATION
KOREN DEVELOPMENT
1 CENTRE PARK DR
COLUMBIA MD 21045

B 3 LOCATION OF WELL R-44042
HOWARD
AMBERWOODS
SYKESVILLE
MILES FROM TOWN 2 MI

DRILLER INFORMATION
George F. Easterday
L. Franklin Easterday, Inc.
9265 Brown Church Rd., Mt. Airy, Md. 21771
Signature: George F. Easterday Date: 3-31-89



B 4 (RT 32) AMBERWOODS WAY
DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
DISTANCE FROM ROAD 250 FT
ENTER FT OR MI FT

B 2 WELL INFORMATION
APPROX. PUMPING RATE (GAL. PER MIN.) 5
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
Howard A 39036
COUNTY NAME COUNTY NO.
STATE SIGNATURE DATE ISSUED 060289
CO SIGNATURE EXP. DATE 12/2/89
NORTH GRID 548000 EAST GRID 0811000

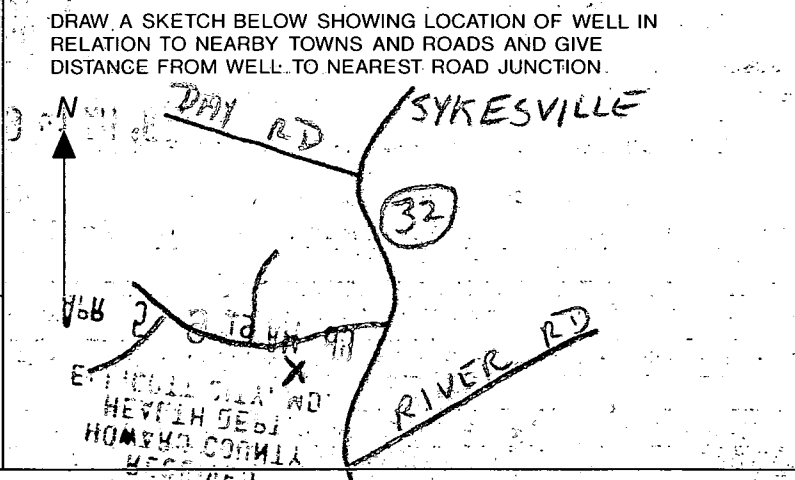
USE FOR WATER (CIRCLE APPROPRIATE BOX)
D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

APPROXIMATE DEPTH OF WELL 200 FEET
APPROXIMATE DIAMETER OF WELL 6 INCH

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
E 810
N 300 48
000 000

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)
N THIS WELL WILL NOT REPLACE AN EXISTING WELL
Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
D THIS WELL WILL DEEPEM AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41



Not to be filled in by driller (OEP USE ONLY)
APPROX. PERMIT NUMBER GAP
FORCE INITIALS IN BOX PERMIT No. HO-88-0674

SPECIAL CONDITIONS

COUNTY

C1 9922

SEQUENCE NO. (DENV USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

COUNTY NUMBER A 39036

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED

Depth of Well (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL"

OWNER, STREET OR RFD, SUBDIVISION, SECTION, LOT

WELL LOG Not required for driven wells STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

Table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing

GROUTING RECORD WELL HAS BEEN GROUDED (Circle Appropriate Box) TYPE OF GROUING MATERIAL CEMENT BENTONITE CLAY

CASING RECORD casing types insert appropriate code below STEEL CONCRETE PLASTIC OTHER

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

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

SCREEN RECORD screen type or open hole insert appropriate code below STEEL BRONZE PLASTIC OPEN HOLE OTHER

DEPTH (nearest ft.) SLOT SIZE DIAMETER OF SCREEN (NEAREST INCH)

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER) TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST HOURS PUMPED (nearest hour) PUMPING RATE (gal. per min. to nearest gal.) METHOD USED TO MEASURE PUMPING RATE WATER LEVEL (distance from land surface) BEFORE PUMPING WHEN PUMPING TYPE OF PUMP USED (for test)

PUMP INSTALLED DRILLER WILL INSTALL PUMP YES NO (CIRCLE) (YES or NO) 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)

CIRCLE APPROPRIATE LETTER A 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, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS IDENT. NO. DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

COUNTY

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043
461-9933

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation
Replacement

Receipt # 47496
Date 9/16/91

Name of Installer J. JOSEPH GARTLAND, INC.

Telephone 875-2400

License Number 1713

Certified Well Pump Installer Well Driller Registered Plumber

Name of Property Owner Gingron Homes, Inc.

Telephone 461-5900

Subdivision Ambleswoods Lot # 4

Well Tag # HO-88-0674

Site Address 12819 Ambleswoods Way

Pump

- Type
 - Deep well jet
 - Shallow well jet
 - Submersible
- Make Goulds
- Model # 10P505W22
- Capacity 10 GPM
- Pump exceeds well capacity Yes No
- If Yes, is low pressure cutoff switch installed? Yes No
- What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors Cable guards Other

Motor

- Horsepower 1/2
- RPM
- Voltage
 - 110
 - 220

Pitless Adapter

- Make Naval
- Model # PT800
- Depth 42"

Tank

- Capacity 42 gal.
- Pressure relief valve? YES

Piping

- Type PLASTIC
- Size 1"
- NSF and/or BOCA Code approved
- Depth of supply line 42"

Well data

- Depth ft.
- Yield GPM
- Static water level ft.
- Will water supply be disinfected by installer?

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

Signature of Applicant: [Signature]

Date: 9/16/91

Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.

AMBERWOODS (50' R/W) WAY

R = 725.00' L = 245.00'

LOT 4
3.2600 AC.



Previously Recorded Sewage Easement Shown on Platbook 9701

2 sty Dwelling BE 544 58

NOTE: There are no wells or septic areas lying within 100 feet of the existing well or septic area on Lot 4, except as shown hereon.

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

This area indicates a private sewage easement with a minimum of 10,000 sq. ft. as required by the Maryland State Department of the Environment for individual disposal. Improvements of any nature in this area are restricted until public sewage is available and servicing any residential structures constructed on those building sites. This easement shall become null and void upon connection to a public sewage system.

NOTE: Parcolation Test Holes shown hereon (H) have been field located.

APPROVED: For Private Water and Private Sewage Systems. Department of Health and Mental Hygiene

Joyce M. Boydinger SSM 7/31/92
Howard County Health Officer

TITLE REVISED PERCOLATION AREA				
PROJECT LOT 4 AMBERWOODS SEC. 1				
LOCATION 3RD ELECTION DISTRICT, HOWARD CO., MD.				
FIELD BOOK 129	PAGE NO. 78	DRAWN BY: BH	CHECKED BY: WGH	DATE: 7-16-92
SCALE 1" = 50'		JOB NO.: 90043		
Plat Reference: Platbook 9701				

William G. Hartel
SIGNATURE

REG. NO. **9436** DATE **7-16-92**

Boender Associates
INCORPORATED
ENGINEERS • PLANNERS • SURVEYORS

3230 BETHANY LANE
ELLCOTT CITY, MD. 21043
(301) 465-7777 FAX: (301) 465-7966