

Tax ID - 03 - 317684

LAYOUT 7/8/03 12:30 INSP 4 _____
INSP 2 7/9/03 3PM INSP 5 _____
INSP 3 10 AM 10/9/03 PM INSP 6 _____

ISSUE DATE: 12/4/2002

APPROVAL DATE: 12/9/03

PERMIT INDEXED

P 518014

A 39716

ON-SITE SEWAGE DISPOSAL SYSTEM HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH 3525-H ELLICOTT MILLS DRIVE, ELLICOTT CITY, MD 21043

Fogles Septic Clean IS PERMITTED TO INSTALL ALTER

ADDRESS: 580 Obrecht Road, Sykesville PHONE NUMBER: 410-795-5670

SUBDIVISION: Hawksfield Estates LOT NUMBER: 13

ADDRESS: 3149 Old Oak Drive PROPERTY OWNER: Ager Residence

SEPTIC TANK CAPACITY (GALLONS): 1250 ~~1000~~ OUTLET BAFFLE FILTER REQUIRED

PUMP CHAMBER CAPACITY (GALLONS): 1250 ~~1000~~ COMPARTMENTED TANK REQUIRED

NUMBER OF BEDROOMS: 4

SQUARE FEET PER BEDROOM: 180

LINEAR FEET OF TRENCH REQUIRED: 240 HOUSE SERVED BY PUBLIC WATER

TRENCHES:	Trench to be 3.0 feet wide. Inlet 5.0 feet below original grade. Bottom maximum depth 7.0 feet below original grade. Effective area begins at 5.0 feet below original grade. 2.0 feet of stone below distribution pipe.
LOCATION:	Place the distribution box and septic tanks per site plan (see attached). <u>Pump system - see plan</u>
NOTES:	<u>Basement service - injector pump.</u>

PLANS APPROVED: MR/KN OK SRK 11/25/02 DATE: 10/02/2002

NOTES: PERMIT VOID AFTER 2 YEARS
CONTRACTOR IS RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
WATERTIGHT SEPTIC TANKS REQUIRED
ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL UNLESS SPECIFICALLY AUTHORIZED
MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS UNLESS SPECIFICALLY AUTHORIZED
CONTRACTOR RESPONSIBLE FOR COMPLIANCE WITH APPLICABLE REGULATIONS, GUIDELINES AND THE TERMS OF THIS PERMIT

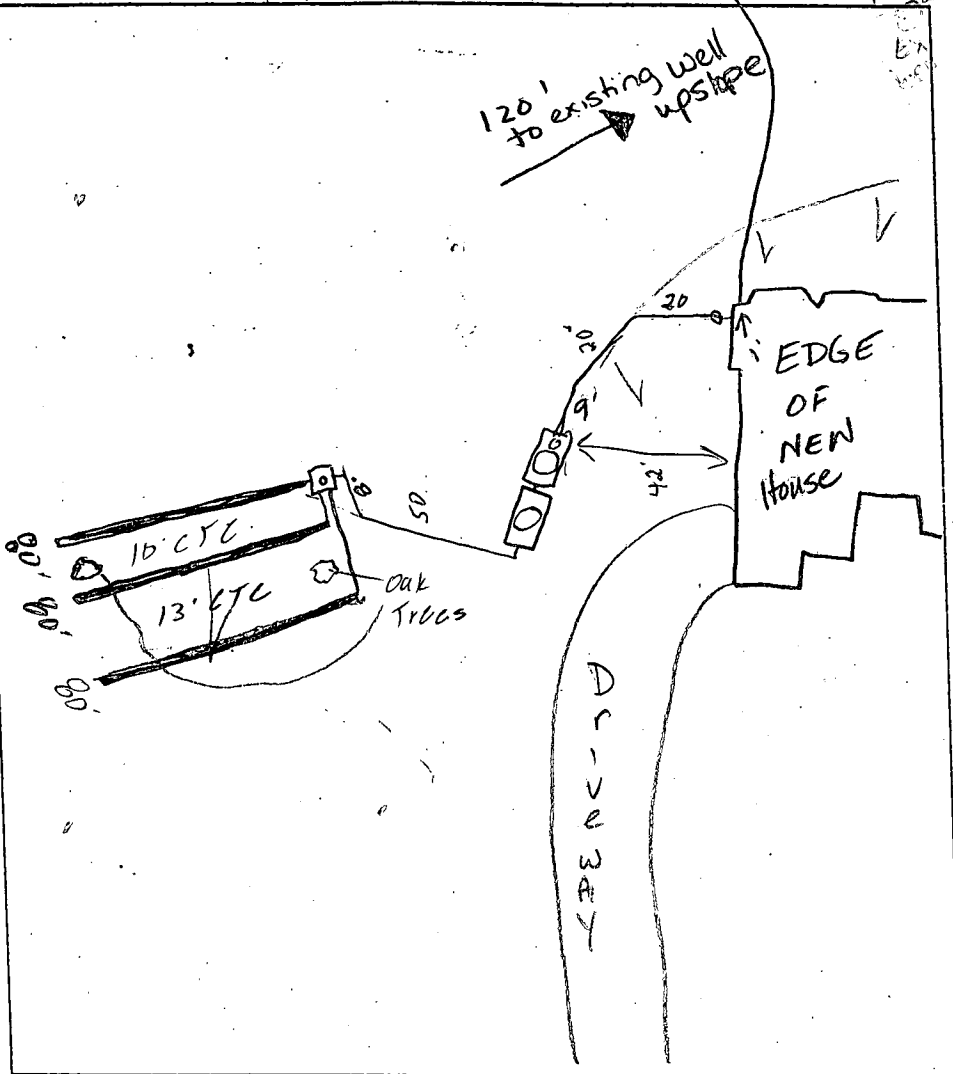
NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM DO NOT LEAVE ANY REQUEST FOR INSPECTION ON VOICEMAIL

A 39716

NOT TO SCALE

HO-94-2345

120' to existing well upslope



TRENCH DATA	
TRENCH WIDTH	3'
TRENCH INLET DEPTH	5'
TRENCH BOTTOM DEPTH	7'
DEPTH OF STONE	2'
NUMBER OF TRENCHES	3
TOTAL TRENCH LENGTH	240
ABSORBENT AREA	720 sq
DISTRIBUTION BOX LEVEL	<input checked="" type="checkbox"/>
BAFFLE IN DISTRIBUTION BOX	<input checked="" type="checkbox"/>

SEPTIC TANK DATA	
SEPTIC TANK	1250 TS GALLONS
MANHOLE RISER	Center
6 INCH INSPECTION PORT	Front
PUMP CHAMBER DATA	
PUMP CHAMBER GALLONS	1250 TS
MANHOLE RISER	Center
ALARM	OK
PUMP PERFORMANCE TEST	OK

PRE-CONSTRUCTION INSPECTION: 7/8/03 line coming ~ 18" below grade out of wall. STA Staked, topo correct. Discussed S.Tank location to ensure 3' or less cover

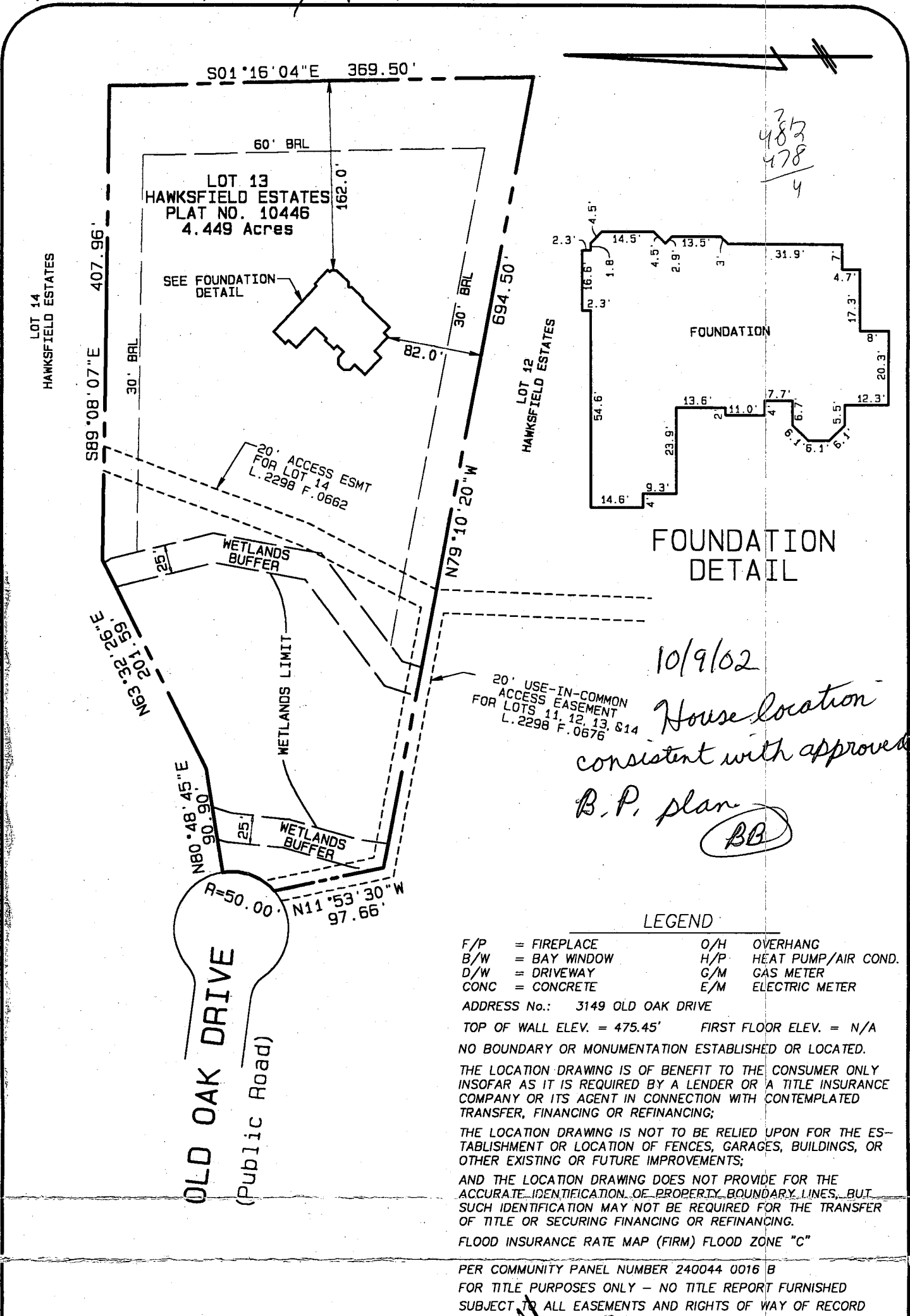
INSPECTION COMMENTS: maintain 10' distance from house (KN) 7/9/03 OK to cover all work Pump & Alarm tests needed SO 12/9/03 S.O. called from field - Pump & Alarm test OK (KN)

INSPECTOR Stuart Oster (KN) DATE SYSTEM APPROVED 12/9/03

WALL CHECK LOT 13 HAWKSFIELD ESTATES

B00138131

GREENFIELD HOMES / FOGLES INSTALLER



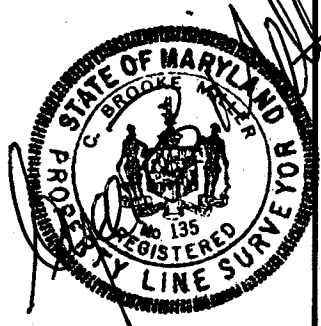
LEGEND

- F/P = FIREPLACE
- B/W = BAY WINDOW
- D/W = DRIVEWAY
- CONC = CONCRETE
- O/H = OVERHANG
- H/P = HEAT PUMP/AIR COND.
- G/M = GAS METER
- E/M = ELECTRIC METER

ADDRESS No.: 3149 OLD OAK DRIVE
 TOP OF WALL ELEV. = 475.45' FIRST FLOOR ELEV. = N/A
 NO BOUNDARY OR MONUMENTATION ESTABLISHED OR LOCATED.
 THE LOCATION DRAWING IS OF BENEFIT TO THE CONSUMER ONLY INsofar AS IT IS REQUIRED BY A LENDER OR A TITLE INSURANCE COMPANY OR ITS AGENT IN CONNECTION WITH CONTEMPLATED TRANSFER, FINANCING OR REFINANCING;
 THE LOCATION DRAWING IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATION OF FENCES, GARAGES, BUILDINGS, OR OTHER EXISTING OR FUTURE IMPROVEMENTS;
 AND THE LOCATION DRAWING DOES NOT PROVIDE FOR THE ACCURATE IDENTIFICATION OF PROPERTY BOUNDARY LINES, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING OR REFINANCING.
 FLOOD INSURANCE RATE MAP (FIRM) FLOOD ZONE "C"

PER COMMUNITY PANEL NUMBER 240044 0016 B
 FOR TITLE PURPOSES ONLY - NO TITLE REPORT FURNISHED
 SUBJECT TO ALL EASEMENTS AND RIGHTS OF WAY OF RECORD

LOCATION DRAWING	
FOUNDATION	DATE: 10/08/02
FINAL	DATE:
DRAWN BY: BRD	SCALE: 1"=100'
PROJECT No.: 1829	



C.B. Miller and Associates, Inc.
 Registered Land Surveyors

3 Dinaden Circle
 Pikesville, Maryland 21208
 (410) 486-7223
 FAX(410) 486-6646

SYMBOL	NAME / DESCRIPTION
ChB2	CHESTER SILT LOAM 3 TO 8 PERCE
CgC2	CHESTER GRAVELLY SILT LOAM, 8

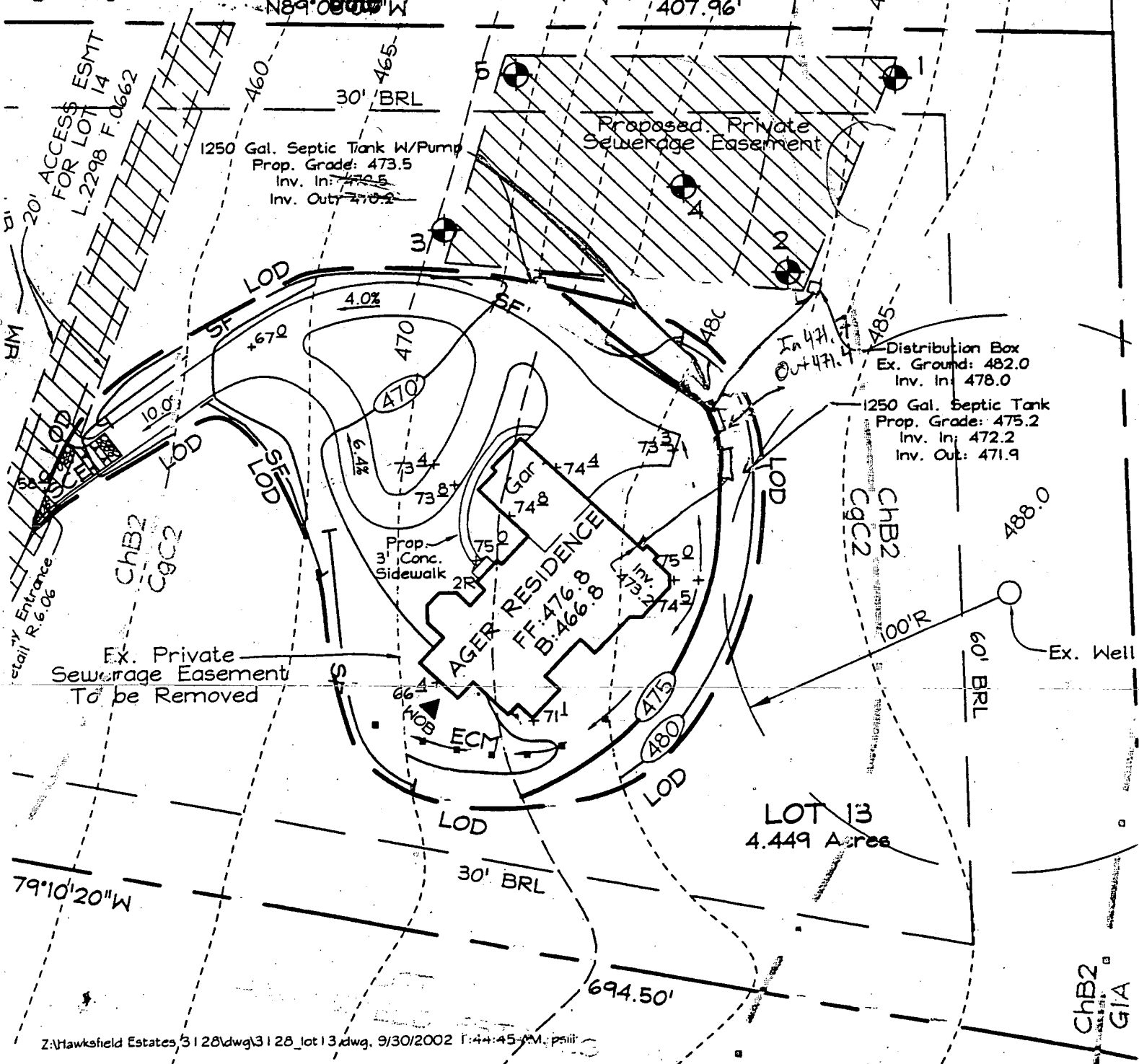
*w/ Rick Minor
10/2/02* (SRW)

Total linear feet of _____ required 240 feet

Approved Septic System Plan
Howard County Health Department

Mark Riffkin (SRW)
Steven R. King
Signature _____ Date 10/2/02

Width of trench(es) 3 feet
Depth of trench(es) 7 feet
Depth of stone required below distribution pipe 2 feet



**HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
WATER AND SEWERAGE PROGRAM
TEL: (410)313-2640 FAX: (410)313-2648**

Information Form for the Installation of the Well Pump, Pitless Adapter, and Supply Piping

NOTE: The installer is responsible for requesting an inspection prior to 9 am on the day of the desired inspection. No work is to be covered until approved by the Health Department. All installations must comply with the National Standard Plumbing Code (NSPC, as amended locally) and COMAR 26.04.04 (MD Well Construction Regulations). Submission of a complete form is required prior to Use and Occupancy approval.

Company Name: Gartland Plumbing Inc Telephone #: 410-825-5303
Address: 1620 W. Old Liberty Rd
Sykesville MD 21784

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer
License # and name of individual responsible for the field installation:
Name (Print): Joseph Gartland License# 6352

*A licensed individual must perform the actual installation. Apprentices must be under the direct supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification.

Name of Property Owner: Agel Greg & Suzanne Telephone #: 410-281-6782
Subdivision: Hawksfield Estate Lot #: 13 Well Tag #: HO-94-2345
Site Address: 3149 Old Oak Drive
Elliot City, MD 21042

Submersible Pump Data	Pitless Adapter	Well Cap and Electric Conduit
Make: <u>Geilds</u>	Make: <u>Campbell</u>	Two piece watertight cap: <input checked="" type="checkbox"/>
Model #: <u>2G510</u>	Model #: <u>PA-800</u>	Screened, vented well cap: <input checked="" type="checkbox"/>
Pump Capacity <u>10</u> GPM	Depth: <u>48</u> (36" min)	Cap secured to casing: <input checked="" type="checkbox"/>
Well Yield: <u>10</u> GPM	NSF approved: <u>Yes</u>	Conduit min 18" B.G.: <input checked="" type="checkbox"/>
Depth of well encountered at time of pump installation: <u>500</u> (feet)		Conduit secured to well cap: <input checked="" type="checkbox"/>

If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4
Torque arrestors of Cable guards are required - Must circle one
Safety rope, if used, attached to inside of well casing with eye bolt Yes

Piping to house	House Connection
Type: <u>Poly</u>	PVC sleeved to undisturbed soil at wall penetration: <u>Yes</u> } <u>Sleeved and footer</u>
PSI: <u>Yes</u> (160 psi min)	Approximate length of sleeve: _____
Depth of supply line: <u>48</u> (36" min)	Sleeve caulked and sealed properly: _____

The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Signature of company representative responsible for installation: _____ date: Aug 7, 2002

For Health Department Use Only - Not to be completed by Installer

Date Insp. Requested: 7/31/03 Date Insp. Approved: 7/31/03 (50) SRK
Inspection Data: Pitless adapter and water supply line at least 36" below grade
Two piece cap installed and attached to casing securely:
Elec. conduit extends at least 18" below grade/attached to cap properly:
Safety rope installed inside of well casing:
Correct well tag attached properly and casing 8" above finished grade:
Water supply line sleeved adequately at house connection:
Adequate grout observed below pitless adapter:

C1 06654

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE

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

COUNTY NUMBER A39716

STACO USE ONLY

DATE RECEIVED MM DD YY

DATE WELL COMPLETED

09 01 99

Depth of Well

505 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL"

HO-94-2345

OWNER: Digi Data, STREET OR RFD: Old Oak DR, TOWN: W Friendship, SUBDIVISION: Hawksfield, SECTION: , LOT: 13

WELL LOG

Not required for driven wells

GROUTING RECORD

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

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT [CM] BENTONITE CLAY [BC]

NO. OF BAGS 19 NO. OF POUNDS 1786

GALLONS OF WATER 114

DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 22 ft.

CASING RECORD

MAIN CASING TYPE: ST (STEEL), PL (PLASTIC), CO (CONCRETE), OT (OTHER)

Nominal diameter top (main) casing (nearest inch): 6, Total depth of main casing (nearest foot): 84

OTHER CASING (if used)

PL 4 inch diameter, 220 to 370 depth (feet); PL 4 inch diameter, 400 to 480 depth (feet); PL 4 inch diameter, 490 to 505 depth (feet)

SCREEN RECORD

screen type or open hole: ST (STEEL), BR (BRASS), HO (OPEN HOLE), PL (PLASTIC), OT (OTHER)

DEPTH (nearest ft.)

Slot size: 1: 0.010, 2: 0.010, 3: 0.010; Diameter of screen: 4 (nearest inch); from 72 to 505

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

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q

TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min.) 10

METHOD USED TO MEASURE PUMPING RATE: Submersible

WATER LEVEL (distance from land surface)

BEFORE PUMPING: 74 ft.

WHEN PUMPING: 159 ft.

TYPE OF PUMP USED (for test)

Air, piston, turbine, centrifugal, rotary, other, jet, submersible

PUMP INSTALLED

DRILLER WILL INSTALL PUMP (CIRCLE) (YES OR NO)

IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.

TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29

CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 to 35

PUMP HORSE POWER 37 to 41

PUMP COLUMN LENGTH (nearest ft.) 43 to 47

CASING HEIGHT (circle appropriate box and enter casing height)

LAND SURFACE: 2 (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)

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

Table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entries like Soft Br mica, Blue mica, Hard Blue Br, Sandstone, etc.

NUMBER OF UNSUCCESSFUL WELLS: 1

WELL HYDROFRACTURED YES [Y] NO [N]

CIRCLE APPROPRIATE LETTER: A (ABANDONED), E (ELECTRIC LOG), P (TEST WELL CONVERTED)

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION"

DRILLERS LIC. NO. MW D 296, Ronald Kuyler

LIC. NO. MW D 334, [Signature]

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

Handwritten notes: Old Oak Drive, good well

B 1 **8563** SEQUENCE NO. (MDE 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
H0-94-2345
fill in this form completely

Date Received (APA) **07/20/99**

OWNER INFORMATION

DIGI-DATA HANDINGS

9881 BROWN LANDS PKWY

COLUMBIA MD 21046

B 3 LOCATION OF WELL

HOWARD

HAWKS FIELD ESTATE

SECTION **1** LOT **13**

WEST FRIENDSHIP

MILES FROM TOWN (enter 0 if in town) **2** MI

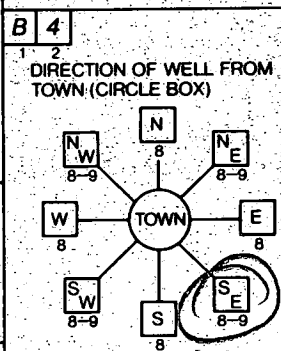
DRILLER INFORMATION

Donald Kifer License No. **296**

Westminster Rotary Well Drilling

PO Box 86, Westminster, Md 21158

Donald Kifer Date **7/9/99**



Old Oak Drive

NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

770

DISTANCE FROM ROAD

ENTER FT OR MI **FT**

TAX MAP: **16** BLK: **20** PARCEL: **258**

B 2 WELL INFORMATION

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

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **450**

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 Co COUNTY NAME

A39716 COUNTY NO.

STATE SIGNATURE _____ INSERT S _____

DATE ISSUED **07/30/99** AMcMulle **7/30/00**

NORTH GRID **530000** EAST GRID **820000**

APPROXIMATE DEPTH OF WELL **200** FEET

APPROXIMATE DIAMETER OF WELL **6** 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 _____

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 DEEPEM AN EXISTING WELL

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

Not to be filled in by driller. (MDE OR COUNTY USE ONLY)

APPROX. PERMIT NUMBER **GAP**

FORCE **AM** WRITE INITIALS IN BOX PERMIT No. **H0-94-2345**

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

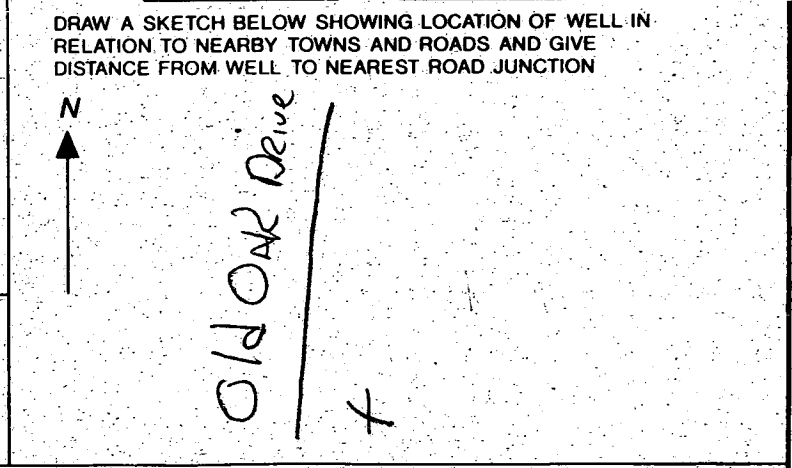
- City**
-
-

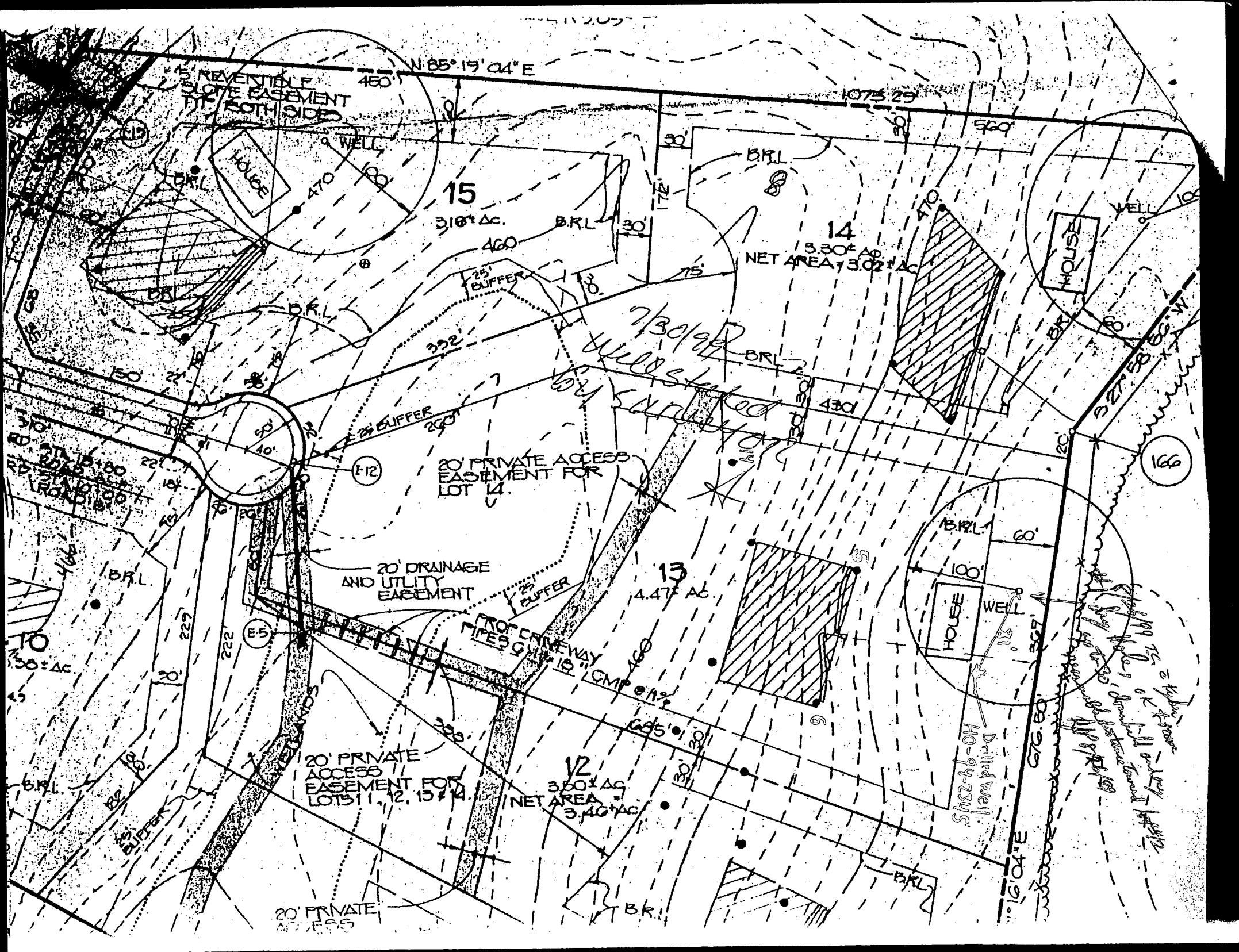
WRITE THE BOX NUMBER FROM THE MAP HERE

820

530

000
000





REVENTIBLE SLOPE EASEMENT ON BOTH SIDES

N 85° 19' 04" E

1073.29

15
3.16 AC.

14
3.30 AC.
NET AREA 3.02 AC

13
4.47 AC

12
3.50 AC
NET AREA 3.46 AC

20' PRIVATE ACCESS EASEMENT FOR LOT 14.

20' DRAINAGE AND UTILITY EASEMENT

20' PRIVATE ACCESS EASEMENT FOR LOTS 11, 12, 13 & 14.

PROPOSED DRIVEWAY TYPES C & D 12"

Handwritten: Well started by survey

Dilled Well HO-94-2345

Handwritten notes: 2' Easement...
10/19/19...
10/19/19...
10/19/19...

166

APPLICATION

ADJUSTMENT
OF PLATTED
SEWAGE
EASEMENT

PERCOLATION TESTING

A 517401

P _____

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

DISTRICT _____

DATE 8-7-02

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 GREENFIELD HOMES INC

ADDRESS 6656 LUSTER DR. HIGHLAND MD 20777 PHONE 410-781-6782/410-365-3702-c

AGENT OR PROSPECTIVE BUYER AS ABOVE

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION HAWKSFIELD ESTATES LOT NO. 13

ROAD AND DESCRIPTION 3149 OLD OAK DR. ELLICOTT CITY MD

TAX MAP _____ PARCEL # _____

SIZE OF LOT 3 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.

Richard Miner
(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

8/15/02
9:00

COUNTY #

SOIL PROFILE

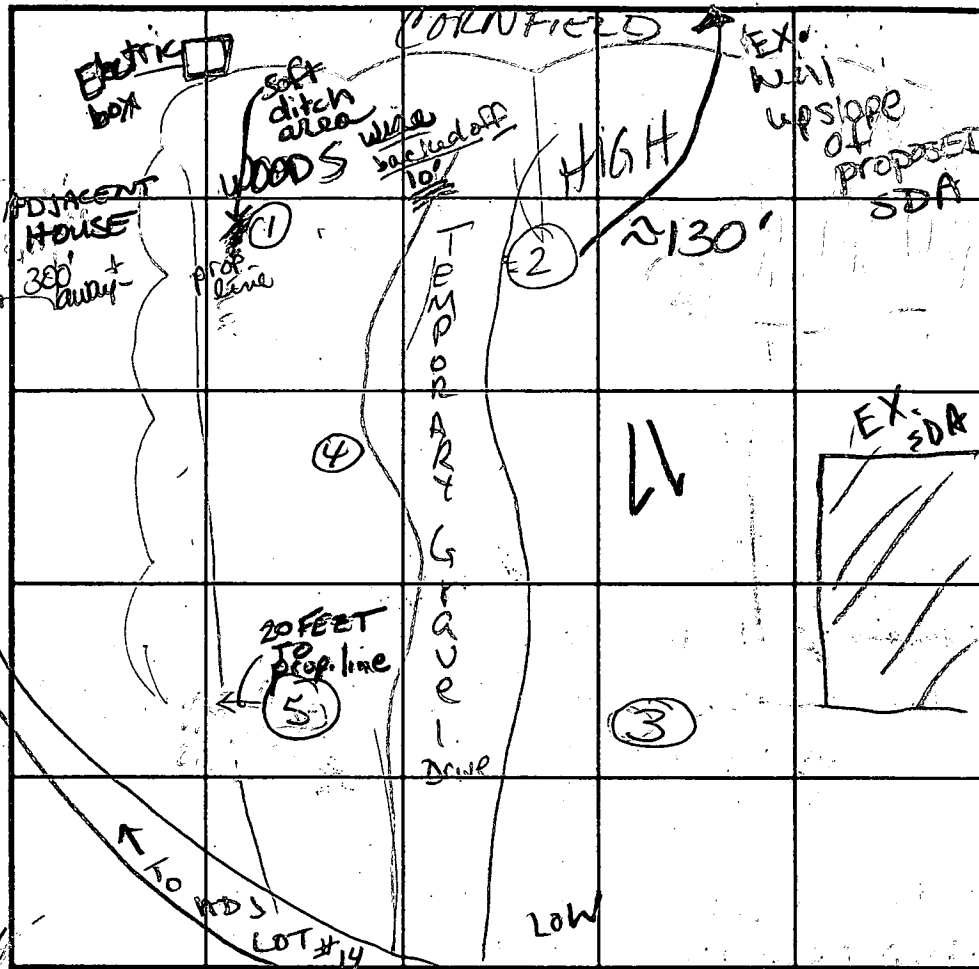
0' (3)
 wk org
 org brn
 hvy loam
 strong rd. org brn
 med grained
 sand
 micaceous
 fr. saprolite
 + hard
 Saprolite
 @ bottom
 @ 30%
 From 5'
 to bottom
 20%+
 H. Bottom

1 (5)
 Strong
 brn
 wk y brn
 some platy
 structure
 S loam
 Rx 5-10%
 4 1/2'

(massive
 structure)
 brn
 lt brn
 micaceous
 sand
 v. fr.
 Saprolite
 ≤ 5%
 13 1/2'

2
 strong rd brn
 Rx 10%
 Few lg
 Quartz
 mini boulders
 hvy Lm
 (CLAYISH)
 5'

6'
 platy
 silt
 25-30%
 11'
 Micaceous
 Sand
 Bottom 13 1/2'



SOIL PROFILE

0' (4)
 strong
 org brn
 sticky (clayish)
 hvy loam
 5 1/2'
 Compacted
 soils
 Loam-
 S loam
 Rocks 5%
 13 1/2'
 Bottom

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

TO OLD OAK DRIVE

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8-15-02	(5)	Visual	Best hole in field				OK
	(3)	4' / 10 1/4"	12:07	12:18	12:18	12:30	12 min
	(4)	3 1/8"	11:12:33	TOO SLOW			
	(1)	6 1/2'S	11:30:00	11:35	11:35	11:42	7 min OK
TESTED IN ROCK	(2)	Will go to 8' M / 13 1/2"	11:46:22	11:49:32	11:48:22	11:51:10	2+ min OK
			Perched in saprolite				
	(1)	PEES	Backhoe operator said looks same as #5				

REMARKS STAKED PER PLAN - HOLES DUG PER PLAN

TYPE OF SOIL

TESTED BY Kacie ALSO PRESENT Kenny Mayne

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 7 TRENCH WIDTH 3

INLET DEPTH 5 MAXIMUM BOTTOM DEPTH 7 SQ. FT/BEDROOM 180

APPLICATION

PERCOLATION TESTING

A 39716

P _____

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

*6/9/88
perc adjusted
OR'd pending
plst @*

DISTRICT _____

DATE 6/9/88

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 _____

ADDRESS _____ PHONE _____

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

(part of my lots 14 + 13)

SUBDIVISION HAWKSFIELD LOT NO. REVISED 12 LOT 13 Preliminary

ROAD AND DESCRIPTION _____

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 for field located holes + STD plan

HD-216

THIS IS NOT A PERMIT

APPLICATION

PERCOLATION TESTING

A 39716
P _____

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

DISTRICT _____

DATE 7/15/89

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 RONALD S. LANEVE

ADDRESS 11799 TRIADELPHIA ROAD PHONE 301-531-6161
ELLICOTT CITY, MARYLAND 21043

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION

SUBDIVISION _____ LOT NO. 13

ROAD AND DESCRIPTION SOUTH OF MARYLAND ROUTE 144 AND SOUTHEAST OF
TRIADELPHIA ROAD

TAX MAP 16823 PARCEL # 40

SIZE OF LOT 3 ACRES TYPE BLDG. SFD
(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.

Ronald S. Laneve
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 8-14-89 Perc. Satisfactory hold for plot. etc.

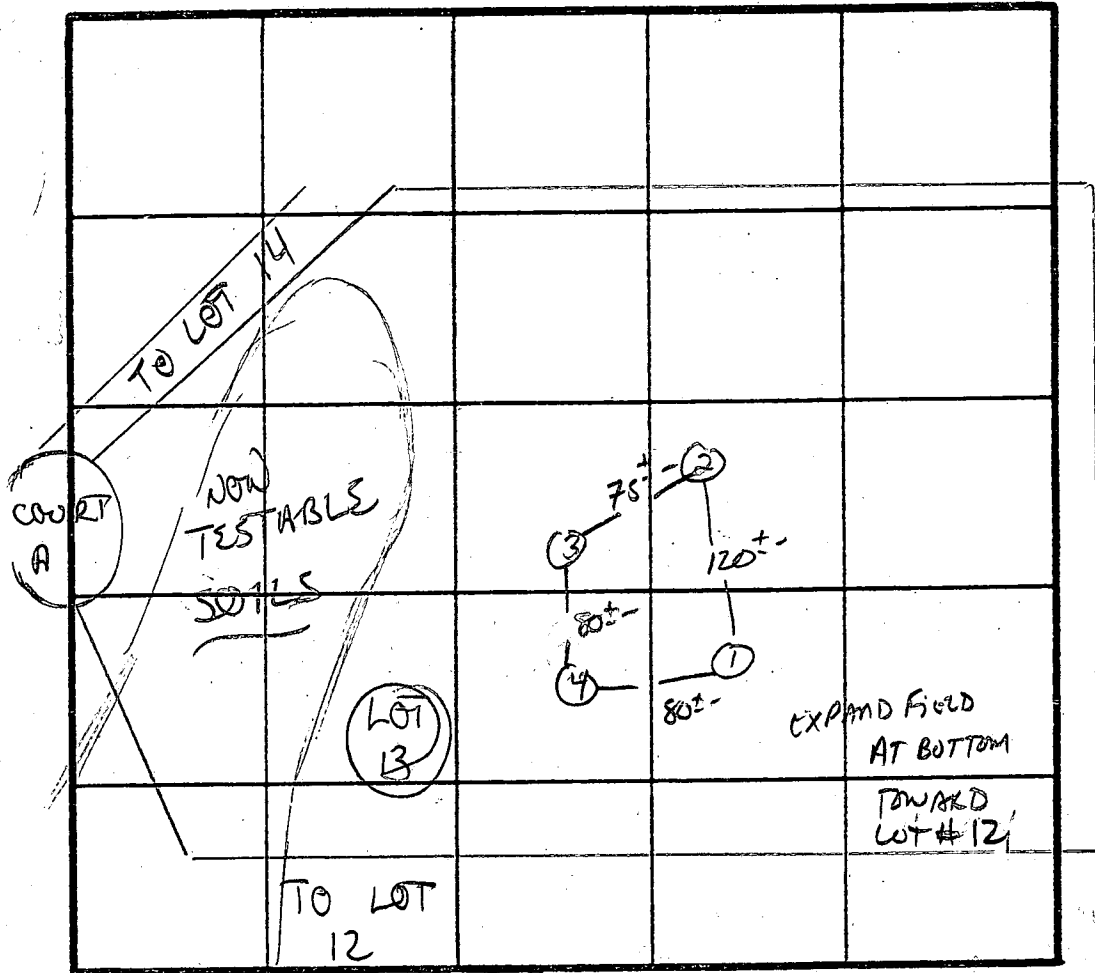
THIS IS NOT A PERMIT

SOIL PROFILE

3" A1-3
Yellow Red
(orange)
Silt loam
Clayey

3.5-4.0 TAN
Silt loam
10-15%
FRASS

13-135



2 Perc 3 min
160 #/BR
TINLET 3.5
BOTTOM 7.5

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8/14/87	1 S	4.5	1105	1106	1106	1108	2 min
	1 M	7.5	1105	1106	1106	1108	2 min
	1 V	13.5	UNIFORM soil below 8.5				
	2 S	6.0	1112	1113	1113	1116	3 min
	2 V	13.0	UNIFORM soil below 4.0				
	3 S	4.5	1116	1118	1118	1122	4 min
	3 V	13.0	UNIFORM soil below 3.5				
	4 S	5.0	1123	1124	1124	1126	2 min
	4 V	13	UNIFORM soil below 4.0				

REMARKS Holes DIFF. THAN PLAT

TYPE OF SOIL Choker Lm - Gravelly LOAM

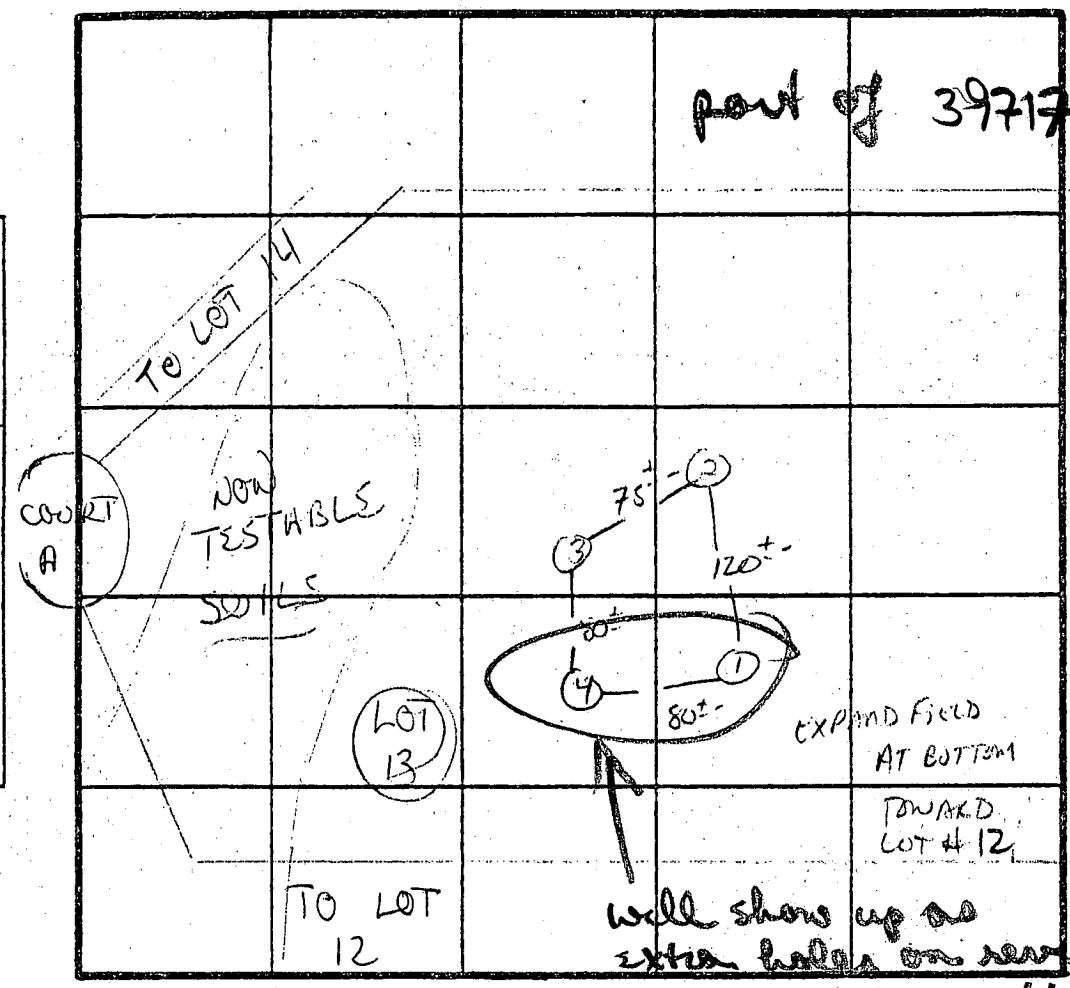
TESTED BY S. Ash ALSO PRESENT lager

EIP 12-1079

part of 39717

SOIL PROFILE

0	A1-3
3'-11"	Yellow Red (orange) Silt loam Clayey
3.5-4.0'	tan Silt loam 10-15% frags



~~Expand at~~
~~160' x 131'~~
~~SWET 3.5'~~
~~BOTTOM 7.5'~~

LOS

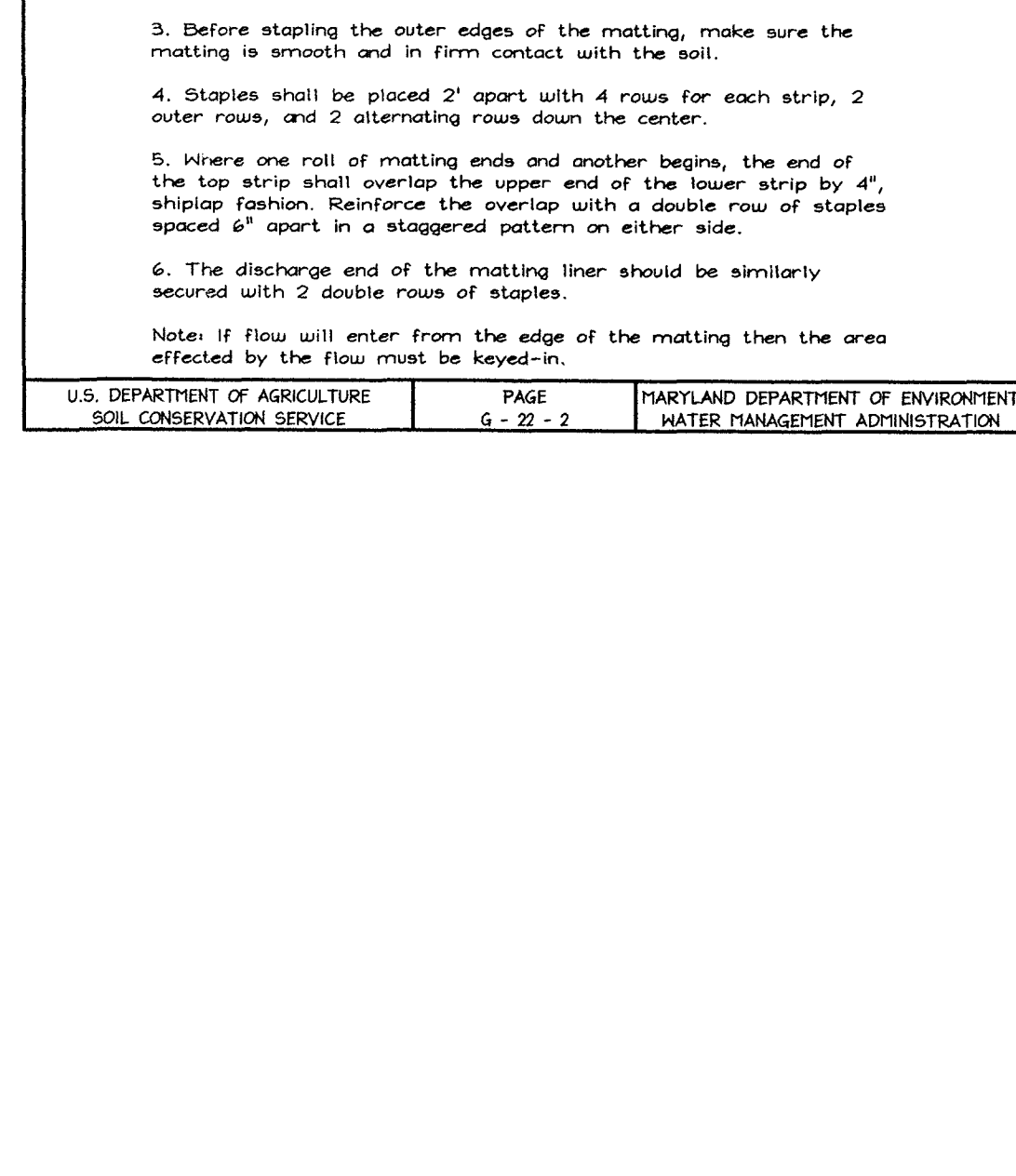
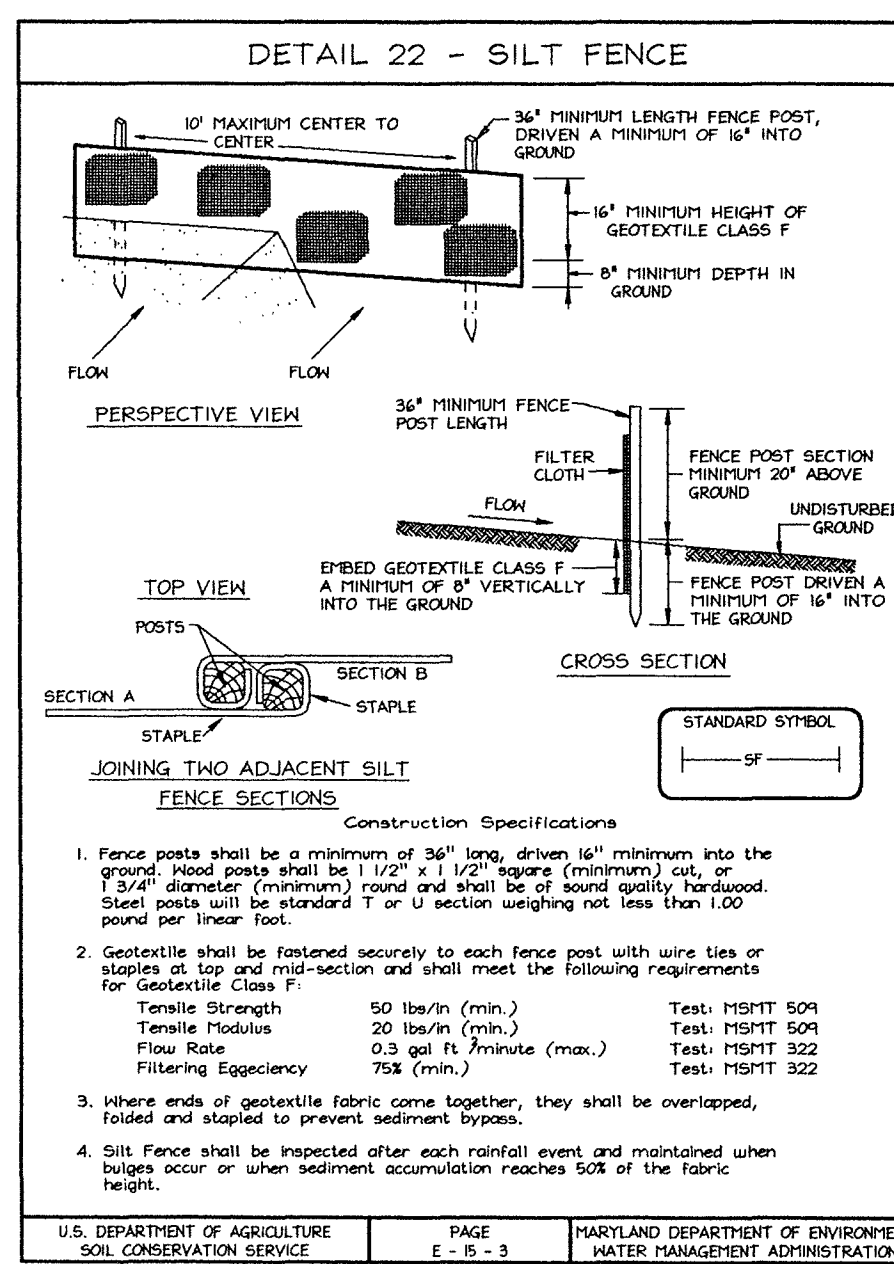
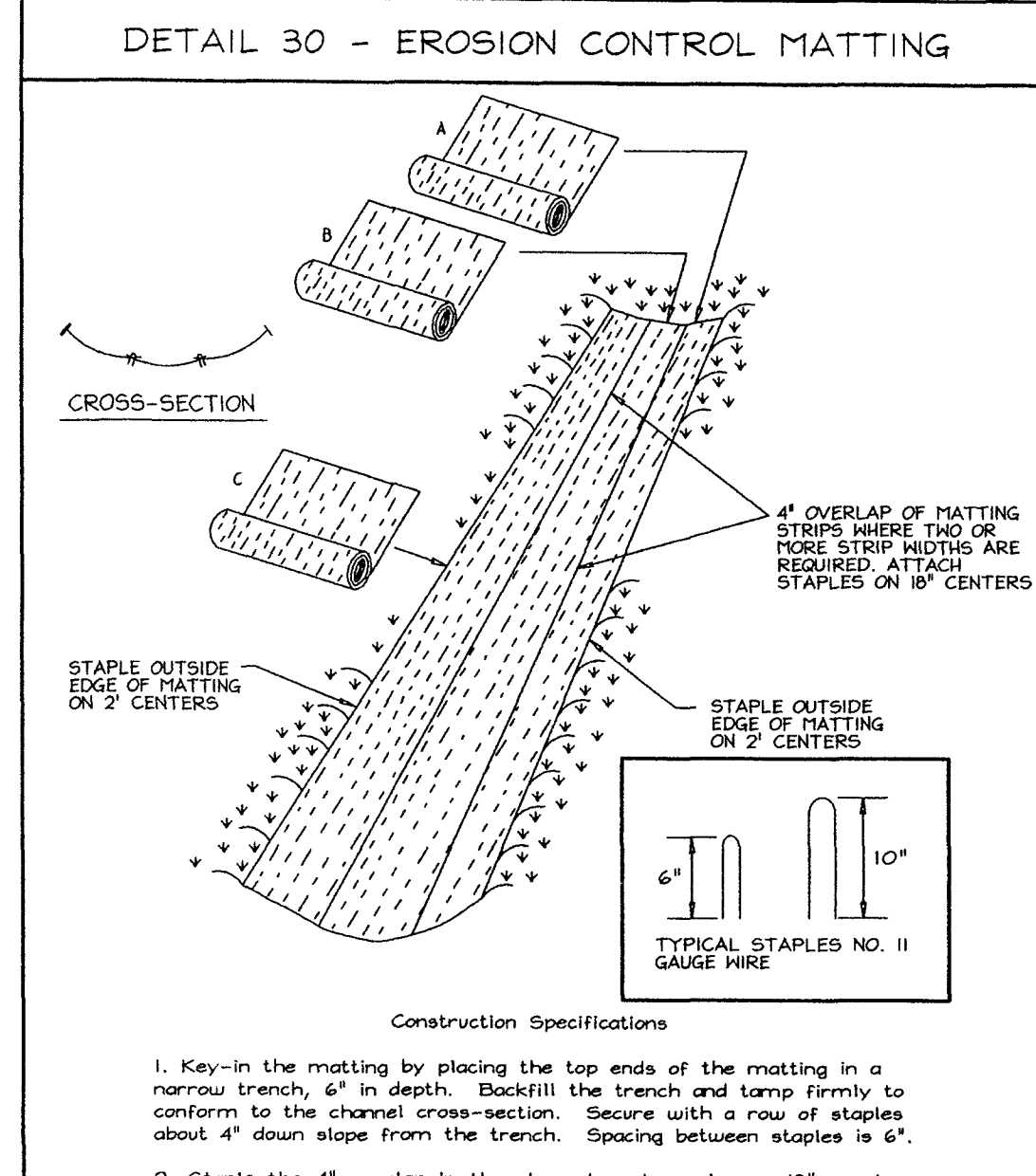
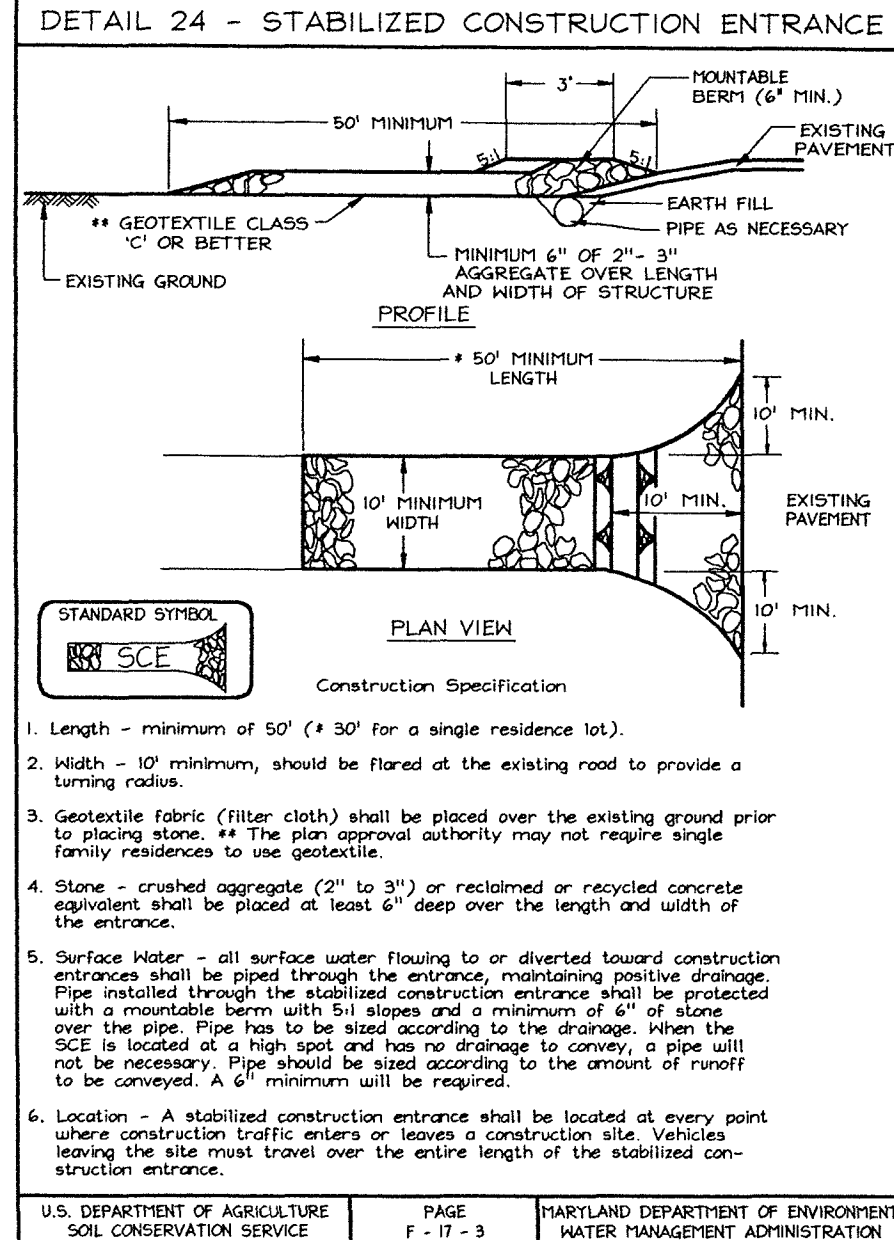
will show up as extra holes on revised lot 11 (checked 6/19/88)

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8/14/87	1 S	4.5	1105	1106	1106	1108	2 min
	1 M	7.5	1105	1106	1106	1108	2 min
	1 V	13.5'	uniform	soil below 8.5'			
	2 S	6.0'	1112	1113	1113	1116	3 min
	2 V	13.0'	uniform	soil below 4.0'			
	3 S	4.5'	1116	1118	1118	1122	4 min
	3 V	13.0'	uniform	soil below 3.5'			
	4 S	5.0'	1123	1124	1124	1126	2 min
	4 V	13'	uniform	soil below 4.0'			

REMARKS: Holes diff. than plat
 TYPE OF SOIL: Chester Lm - gravelly loam
 TESTED BY: S. Abner
 ALSO PRESENT: Legall

EH-12-1079



20.0 STANDARDS AND SPECIFICATIONS FOR TOPSOIL

Definition
Placement of topsoil over a prepared subsoil prior to establishment of permanent vegetation.

Purpose
To provide a suitable soil medium for vegetable growth. Soil of concern has low moisture content, low nutrient levels, low pH, materials toxic to plants, and/or unacceptable soil gradation.

Conditions Where Practice Applies

- This practice is limited to areas having 2:1 or flatter slopes where:
 - The texture of the exposed subsoil/parent material is not adequate to produce vegetative growth.
 - The soil material is so shallow that the rooting zone is not deep enough to support plants or furnish continuing supplies of moisture and plant nutrients.
 - The original soil to be vegetated contains material toxic to plant growth.
 - The soil is so acidic that treatment with limestone is not feasible.
- For the purpose of these Standards and Specifications, areas having slopes steeper than 2:1 require special consideration and design for erosion control. Areas having slopes steeper than 2:1 shall have the appropriate stabilization shown on the plans.

Construction and Material Specifications

- Topsoil salvaged from the existing site may be used provided that it meets the standards set forth in these specifications. Typically, the depth of topsoil to be salvaged for a given soil type can be found in the representative soil profile section in the Soil Survey published by USDA-SCS in cooperation with Maryland Agricultural Experiment Station.
- Topsoil Specifications - Soil to be used as topsoil must meet the following:
 - Topsoil shall be a loam, sandy loam, clay loam, silt loam, sandy clay loam, loamy sand. Other soils may be used if recommended by an agronomist or a soil scientist and approved by the appropriate approval authority. Regardless, topsoil shall not be a mixture of contrasting textures of subsoils and shall contain less than 5% by volume of cinders, stones, slag, coarse fragments, gravel, sticks, roots, trash, or other materials larger than 1 and 1/2" in diameter.
 - Topsoil must be free of plants or plant parts such as Bermuda grass, Spockgrass, Johnsongrass, wildcane, poison ivy, thistle, or others as specified.
 - Where the subsoil is either highly acidic or composed of heavy clays, ground limestone shall be spread at the rate of 4-8 tons/acre (200-400 pounds per 1,000 square feet) prior to the placement of topsoil. Lime shall be distributed until the desired pH is reached or worked into the soil in conjunction with tillage operations as described in the following procedures.
- For sites having disturbed areas under 5 acres:
 - Place topsoil (if required) and apply soil amendments as specified in 20.0 Vegetative Stabilization - Section I - Vegetative Stabilization Methods and Materials.

GENERAL NOTES

- Reference: Plat #10446
- Topography is taken from Howard County aerial topographic survey. All percolation test holes and their elevations have been field located by C.B. Miller and Associates, Registered Land Surveyor, in Aug. 2002.
- Contractor to confirm all dimension, utilities and topography in a field. If any conflicts arise, contact Engineer before beginning any work.
- Driveway entrance to be constructed in accordance with Howard County Standard Detail R.6.06.
- Private water, and sewer will be used within this site.
- Basement will not sewer by gravity. Effluent Pump required in Septic Tank.
- This area designates a private sewage easement of at least 10,000 square feet as required by the Maryland State Department of the Environment for individual sewage disposal (COMAR 26.04.03). 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 adjustments into the private sewage easement. Recordation of a modified sewage easement shall not be necessary.
- All wells and septic systems on adjacent properties within 100' of proposed wells and proposed septic systems have been shown.
- Howard County Soil Map #14
- Septic fields are located on soil types CgC2 and CHB2, as per the soil survey of Howard County.

APPROVED: FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS IN ACCORDANCE WITH THE MASTER PLAN OF HOWARD COUNTY

COUNTY HEALTH OFFICER DATE

PERMANENT SEEDING NOTES

APPLY TO GRADED OR CLEARED AREAS NOT SUBJECT TO IMMEDIATE FURTHER DISTURBANCE WHERE A PERMANENT LONG-LIVED VEGETATIVE COVER IS NEEDED.

SEEDING PREPARATION: Loosen upper three inches of soil by raking, discing or other acceptable means before seeding, if not previously loosened.

SOIL AMENDMENTS: In lieu of soil test recommendations, use one of the following schedules:

- Preferred - Apply 2 tons per acre dolomitic limestone (82 lbs/1000 sq.ft.) and 600 lbs per acre 10-10-10 fertilizer (14 lbs/1000 sq.ft.) before seeding. Harrow or disc into upper three inches of soil. At the time of seeding, apply 600 lbs per acre 30-0-0 ureaform fertilizer (8 lbs/1000 sq.ft.)
- Acceptable - Apply 2 tons per acre dolomitic limestone (82 lbs/1000 sq.ft.) and apply 1000 lbs. per acre 10-10-10 fertilizer (23 lbs/1000 sq.ft.) before seeding. Harrow or disc into upper three inches of soil.

SEEDING: For the periods March 1 thru April 30, and August 1 thru October 15, seed with 60 lbs. per acre (14 lbs/1000 sq.ft.) of Kentucky 31 Tall Fescue. For the period May 1 thru July 31, seed with 60 lbs. Kentucky 31 Tall Fescue per acre and 2 lbs. per acre (0.9 lbs/1000 sq.ft.) of urease inoculant. During the period of October 16 thru February 28, protect site by Option (1) 2 tons per acre well anchored straw mulch and seed as soon as possible in the spring. Option (2) Use sod. Option (3) Seed with 60 lbs/acre Kentucky 31 Tall Fescue and mulch with 2 tons/acre well anchored straw.

MULCHING: Apply 1 1/2 to 2 tons per acre (70 to 90 lbs/1000 sq.ft.) of unrotted small grain straw immediately after seeding. Anchor mulch immediately after application using mulch anchoring tool or 200 gallons per acre (5 gal/1000 sq.ft.) of emulsified asphalt on flat areas. On slopes 3 feet or higher, use 340 gallons per acre (6 gal/1000 sq.ft.) for anchoring.

MAINTENANCE: Inspect all seeded areas and make needed repairs, replacements and reseedings.

TEMPORARY SEEDING NOTES

SEEDING PREPARATION: Loosen upper three inches of soil by raking, discing or other acceptable means before seeding, if not previously loosened.

SOIL AMENDMENTS: Apply 600 lbs. per acre 10-10-10 fertilizer (14 lbs/1000 sq.ft.).

SEEDING: For the periods March 1 thru April 30 and from August 15 thru November 15, seed with 2 1/2 bushel per acre of annual ryegrass (3.2 lbs/1000 sq.ft.). For the period May 1 thru August 14, seed with 3 lbs. per acre of seeding legume (37 lbs/1000 sq.ft.). For the period November 1 thru February 28, protect site by applying 2 tons per acre of well anchored straw mulch and seed as soon as possible in the spring, or use sod.

MULCHING: Apply 1 1/2 to 2 tons per acre (70 to 90 lbs/1000 sq.ft.) of unrotted small grain straw immediately after seeding. Anchor mulch immediately after application using mulch anchoring tool or 200 gallons per acre (5 gal/1000 sq.ft.) of emulsified asphalt on flat areas. On slopes 3 feet or higher, use 340 gallons per acre (6 gal/1000 sq.ft.) for anchoring.

REFER TO THE 1994 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL, FOR RATE AND METHODS NOT COVERED.

SEDIMENT CONTROL NOTES

- A minimum of 48 hours notice must be given to the Howard County Department of Inspection, License and Permits Sediment Control Division prior to the start of any construction (318-1955).
- All vegetation and structural practices are to be installed according to the provisions of this plan and are to be in conformance with the 1994 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL, and revisions thereto.
- Following initial soil disturbance or redistribution, permanent or temporary stabilization shall be completed within: (a) 7 calendar days for all perimeter sediment control structures, dikes, perimeter slopes, and all slopes greater than 3:1, (b) 14 days as to all other disturbed or graded areas on the project site.
- All sediment traps/basins shown must be fenced and warning signs posted around their perimeter in accordance with Vol. 1, Chapter 7, HOWARD COUNTY DESIGN MANUAL, Storm Drainage.
- All disturbed areas must be stabilized within the time period specified above in accordance with the 1994 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL, for permanent seeding, sod, temporary seeding, and mulching (Sec. G). Temporary stabilization with mulch alone shall be done when recommended seeding dates do not allow for proper germination and establishment of grasses.
- All sediment control structures are to remain in place and are to be maintained in operative condition until permission for their removal has been obtained from the Howard County Sediment Control Inspector.
- Site Analysis:

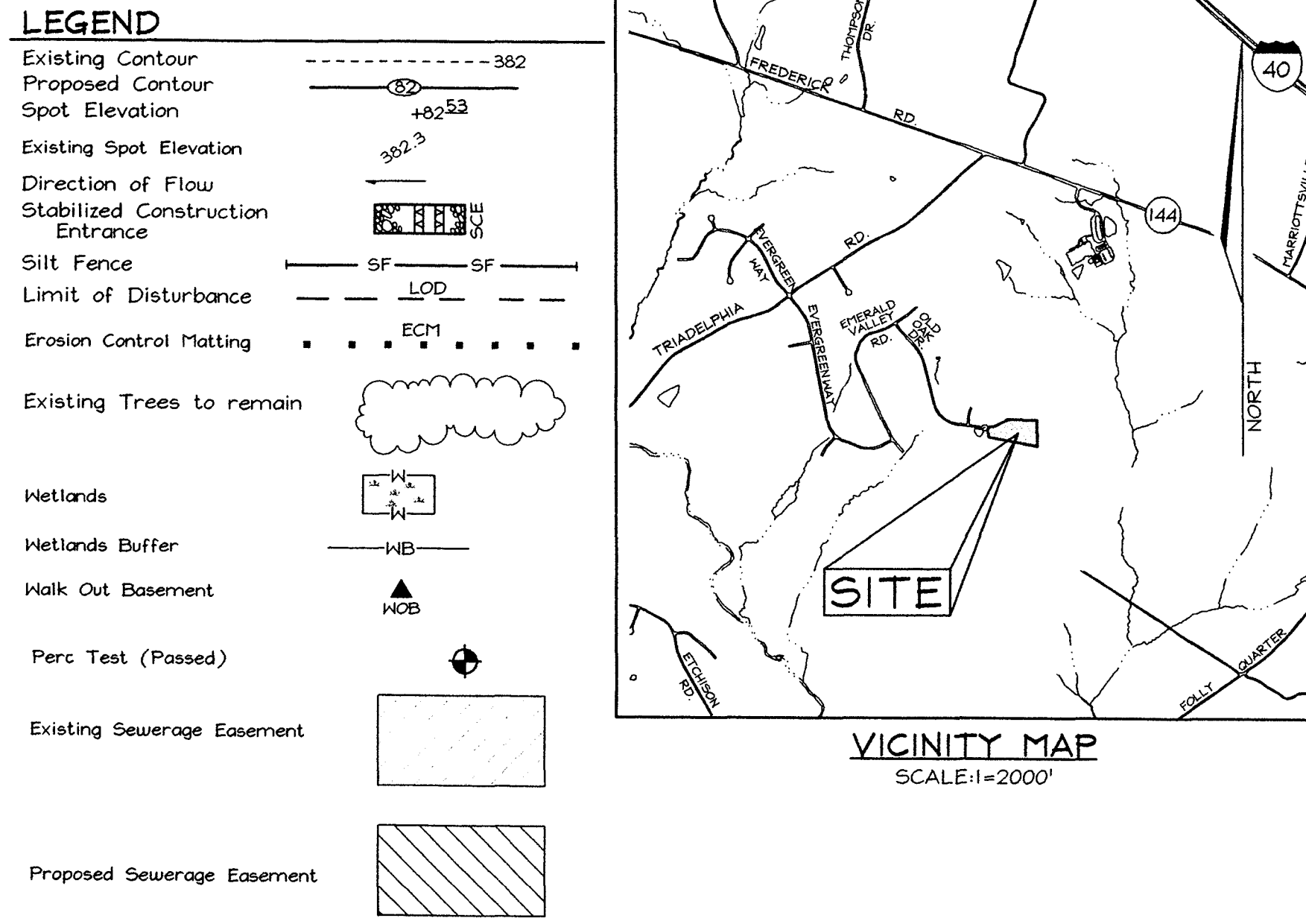
Total Area	4.449 Acres
Area Disturbed	0.601 Acres
Area to be roofed or paved	0.240 Acres
Area to be vegetatively stabilized	0.441 Acres
Total Cut	\$2,763 CY
Total Fill	\$2,078 CY
Offsite waste/borrow area location	??
- Any sediment control practice which is disturbed by grading activity for placement of utilities must be repaired on the same day of disturbance.
- Additional sediment controls must be provided, if deemed necessary by the Howard County Sediment Control Inspector.
- All sites with disturbed areas in excess of 2 acres, approval of the inspection agency shall be requested upon completion of installation of perimeter erosion and sediment controls, but before proceeding with any other earth disturbance or grading. Other building or grading inspection approvals may not be authorized until this initial approval by the inspection agency is made.
- Trenches for the construction of utilities is limited to three pipe lengths or that which shall be back-filled and stabilized within one working day, whichever is shorter.

* Earthwork quantities are solely for the purpose of calculating fees. Contractor to verify all quantities prior to the start of construction.

** To be determined by contractor, with pre-approval of the Sediment Control Inspector with an approved and active grading permit.

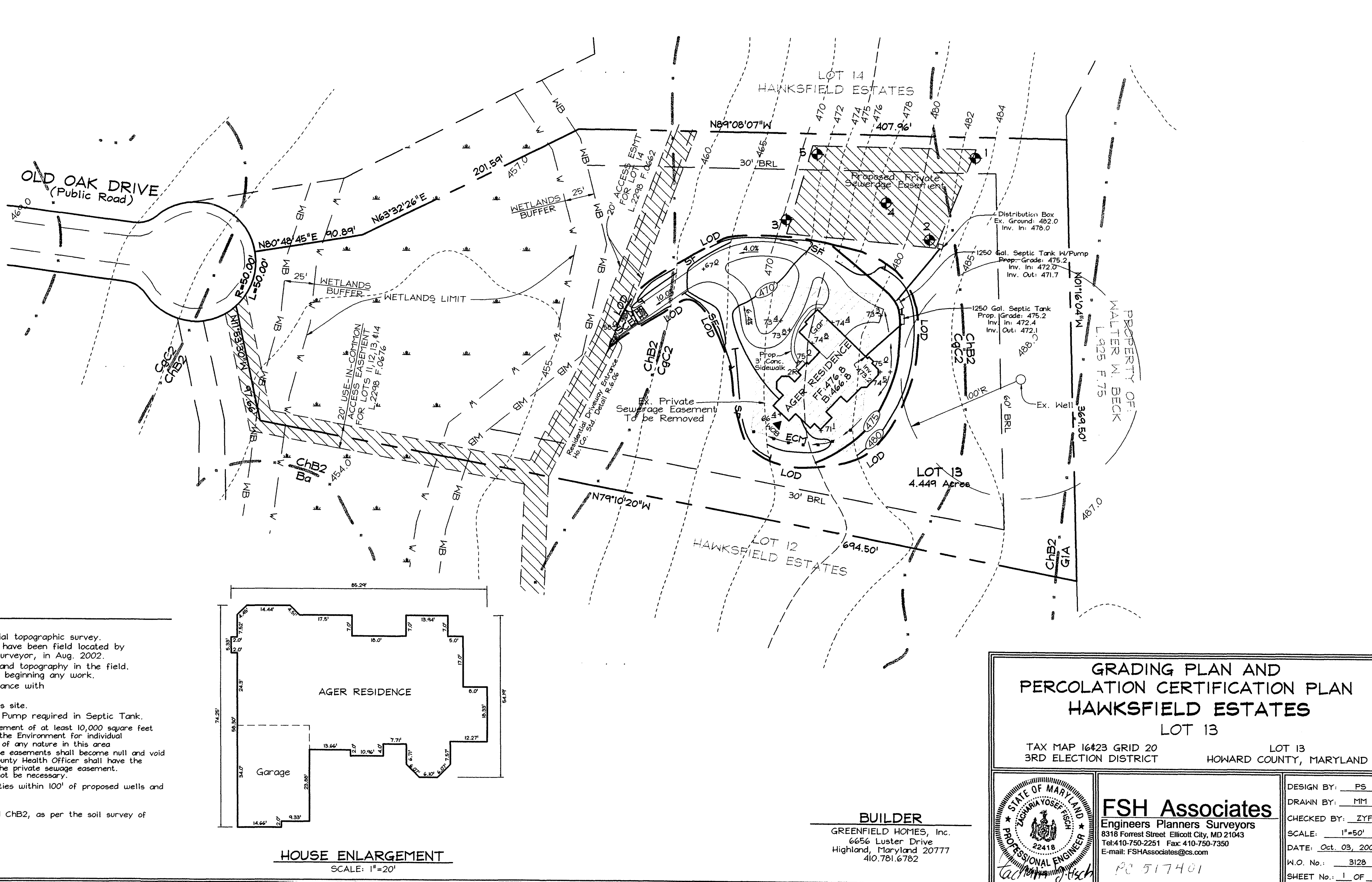
PERC. CHART

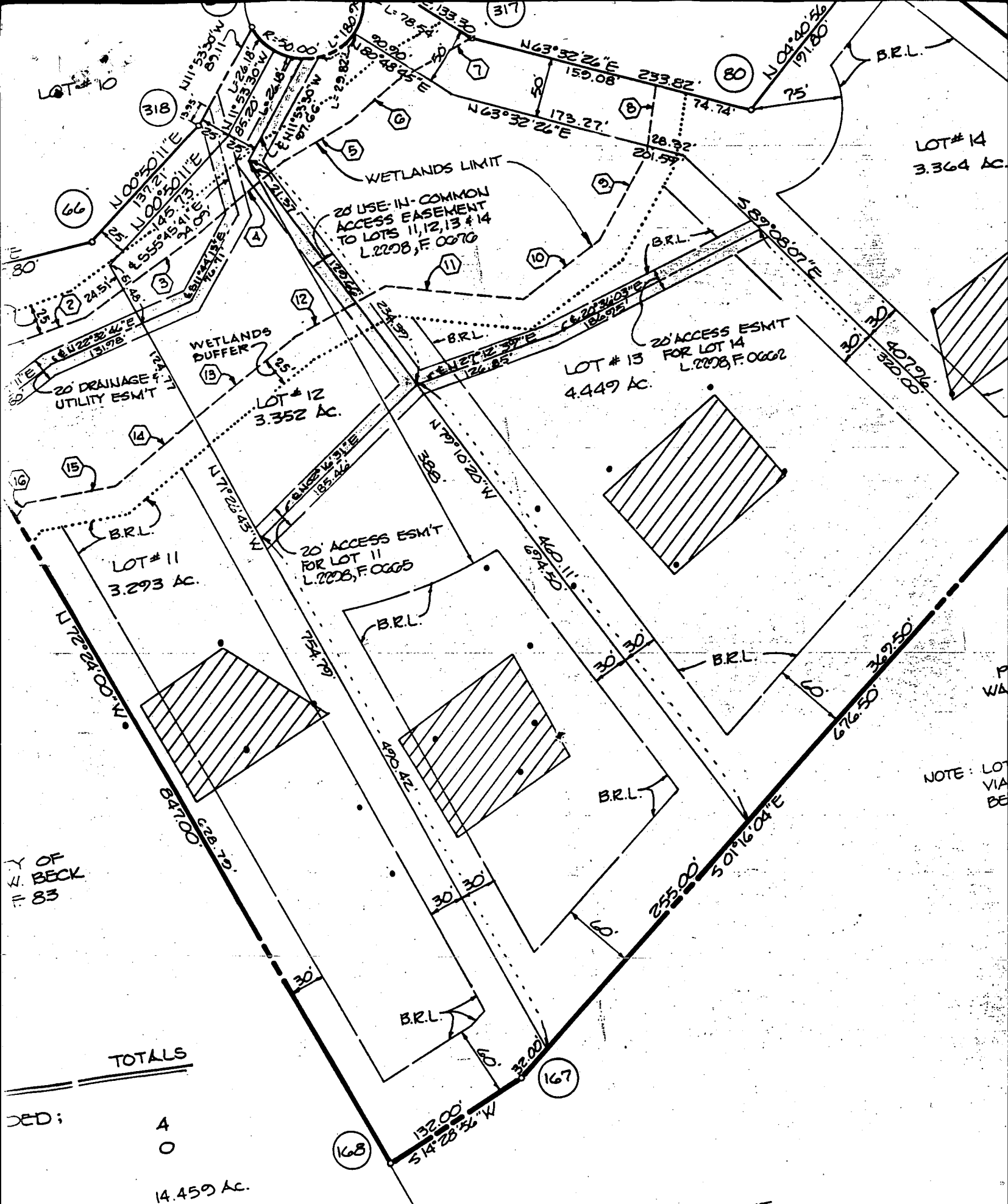
Number	Elevation
1	483.10
2	481.66
3	470.33
4	478.82
5	471.50



SOILS LEGEND

SYMBOL	NAME / DESCRIPTION	SOIL GROUP
CHB2	CHESTER SILT LOAM 3 TO 8 PERCENT SLOPES, MODERATELY ERODED	B
CgC2	CHESTER GRAVELLY SILT LOAM, 8 TO 15 PERCENT SLOPES, MODERATELY ERODED	B





Y OF
W. BECK
F. 83

TOTALS

- DED:
- 4
 - 0
 - 14.459 AC.
 - 0
 - N/A
 - 0

■ DENOTES 4" x 4" x 36" CONCRETE MONUMENT
 ● DENOTES 1/2" Ø PIPE OR IRON PIN SET

NOTE: LOT
VIA
BE

OWNE

DATA CORPORATION, A MARYLAN
TARBOX
OLD V. THE