

05411890

LAYOUT 10:30 6/1/04 INSP 4 _____

INSP 2 6/2/04 - INSP 5 _____

INSP 3 6/3/04 - AM INSP 6 _____

ISSUE DATE: 5/28/2004

APPROVAL DATE: 6/3/04

**PERMIT
INDEXED**

P 502386

A 40622

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

Fogle's Septic Clean, Inc. _____ IS PERMITTED TO INSTALL ALTER

ADDRESS: 580 Obrecht Rd., Sykesville, MD PHONE NUMBER: 410-795-5670

SUBDIVISION: Hedgerow LOT NUMBER: 27

ADDRESS: 13610 Gilbride Lane PROPERTY OWNER: Sean Glóth

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

PUMP CHAMBER CAPACITY (GALLONS): 2000 COMPARTMENTED TANK REQUIRED

NUMBER OF BEDROOMS: 6

SQUARE FEET PER BEDROOM: 180

LINEAR FEET OF TRENCH REQUIRED: 270 HOUSE SERVED BY PUBLIC WATER

TRENCHES:	Trench to be 2.0 feet wide. Inlet 4.0 feet below original grade. Bottom maximum depth 8.0 feet below original grade. Effective area begins at 4.0 feet below original grade. 4.0 feet of stone below distribution pipe.
LOCATION:	Place distribution box 255' down the left lot line and 65' off this same lot line as shown on plan. Run (4) 70' trenches on contour as shown.
NOTES:	Install second septic tank for future pump installation.

PLANS APPROVED: MER DATE: 8/7/03

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
BUILDING PERMIT SIGNED FOR INSPECTION OF SEPTIC SYSTEM
DO NOT LEAVE ANY REQUEST FOR INSPECTION ON VOICEMAIL
AND RETURNED**

8/7/2003

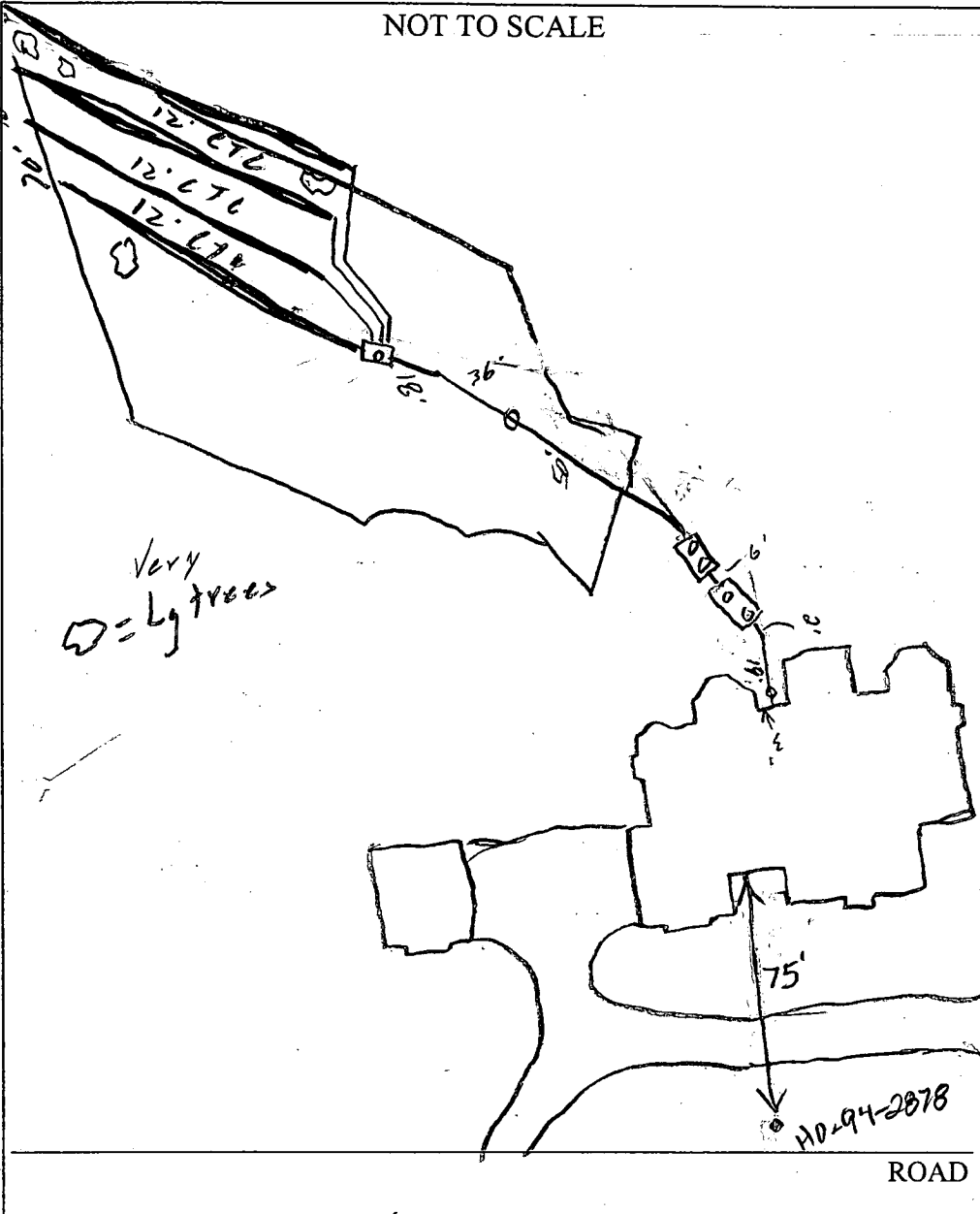
B00143133 DETACHED GARAGE

Approved MR

11-08-04 Bob 157031 - SUNDELL

A40622

NOT TO SCALE



TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
3'	4'	8'
NUMBER OF TRENCHES		4
TOTAL LENGTH		280'
ABSORPTION AREA		
DISTRIBUTION BOX LEVEL		✓
DISTRIBUTION BOX BAFFLE		✓
DISTRIBUTION BOX PORT		✓

SEPTIC TANK DATA	
SEPTIC TANK 1 LEVEL	✓
CAPACITY	2000 GAL
SEAM LOC	Top
TANK LID DEPTH	1.5-2'
BAFFLES	✓
BAFFLE FILTER	—
MANHOLE LOC	F&B
6" PORT LOC	—
WATERTIGHT TEST	✓
SEPTIC TANK 2 LEVEL	✓
CAPACITY	2000 GAL
SEAM LOC	Top
TANK LID DEPTH	1.5-2'
BAFFLES	✓
BAFFLE FILTER	—
MANHOLE LOC	F&B
6" PORT LOC	—
WATERTIGHT TEST	—

Very lg trees
 = lg trees

HD-94-2878

ROAD

PRE-CONSTRUCTION 6/1/04 - Upper corners of SRA, trenches & D.B. staked
 Check D.B. off 2nd garage location OK. Very lg trees that will need to
 INSTALLATION be worked around Install (2) 2000 gal tanks, PT for future
 use, (4) 70' trenches on contour. (SO) 6/2/04 - Tanks set,
 1/2 of first trench installed. OK to cover work completed.
 6/3/04 - Complete system installed. OK to cover
 all work (SO)

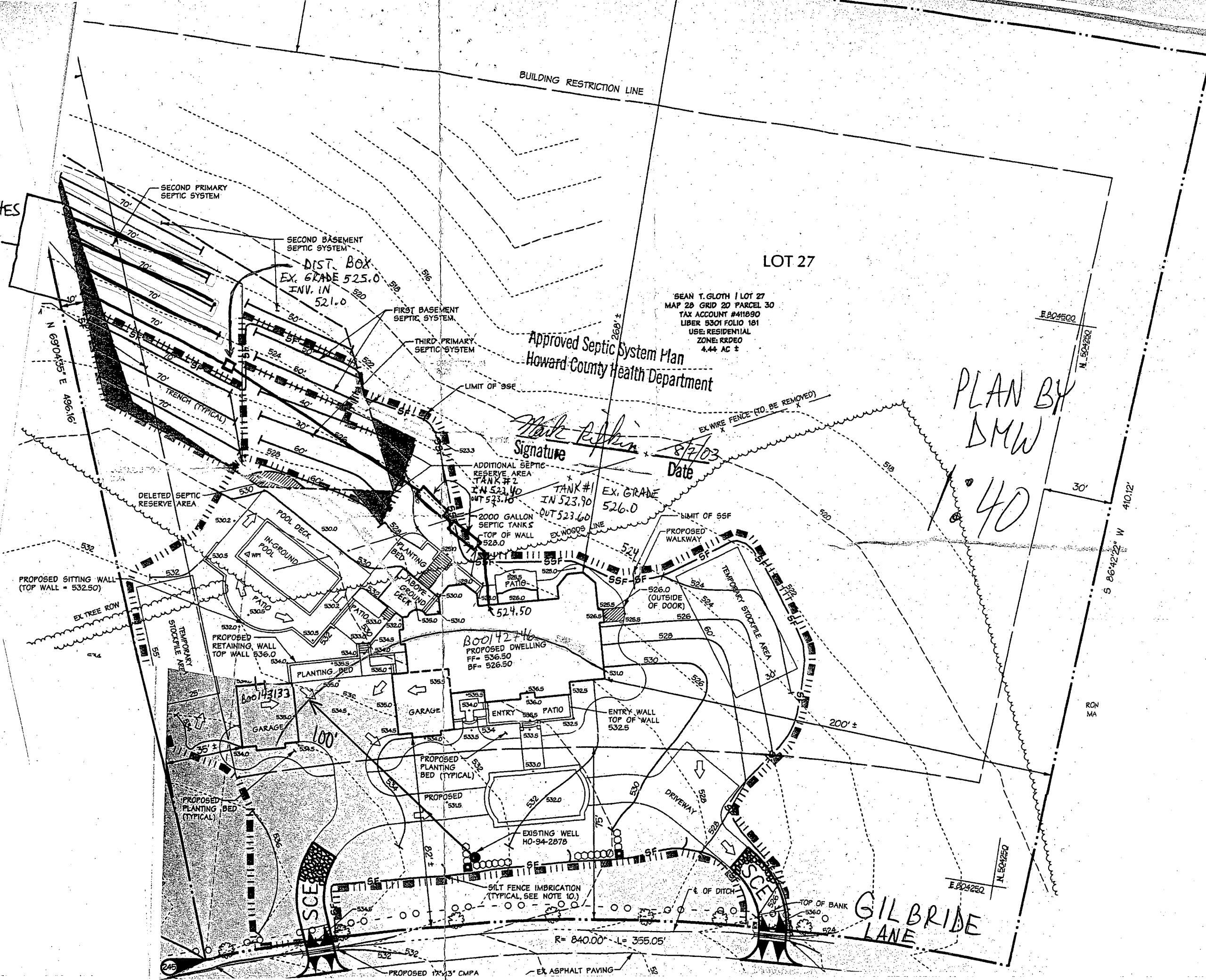
AND RETURNED
 BUILDING PERMITS DIVISION

FINAL INSPECTOR

DATE OF APPROVAL

6/3/04

4 TRENCHES
70' EACH



LOT 27

SEAN T. GLOTH | LOT 27
 MAP 28 GRID 20 PARCEL 30
 TAX ACCOUNT #411890
 LIBER 5301 FOLIO 181
 USE: RESIDENTIAL
 ZONE: RRDEO
 4.44 AC ±

Approved Septic System Plan
 Howard County Health Department

Mark P. [unclear]
 Signature
 8/7/03
 Date

PLAN BY
 DMW
 40

TANK #1
 IN 523.90
 OUT 523.60
 EX. GRADE 526.0

PROPOSED DWELLING
 PF = 536.50
 BF = 526.50

GILBRIDE
 LANE

R = 840.00 L = 355.05

PROPOSED 17' x 13' CMPA

EX ASPHALT PAVING

1" = 30'

MR

11/2/03
w/ TONY VITTI (ENGR)
S.S. LAYOUT TO ACCOMMODATE
GRAVITY BSMT. SVCE. -
ROOM FOR 3 PRIMARY SYSTEMS
@ 270G/EA + 2 BSMT SYSTEMS
@ 100-130 EA.
6 BR HOUSE

DUE SOUTH 549.00'

BF 526.50
INV. OUT 524.50
INV INTO ST. 523.30
INV OUT 523.00
INV INTO DI. 522.90
INV OUT 522.60

522.30

E 80450.0 519.9

N 69°04'35" E 496.16'

526

528

530

532

ADDZ
ST
primary

DELETED
AREA

2 MENTIONS
BASEMENTS
SYSTEMS

PRIMARY SYSTEM
INV 526.5
ST. 525.5
OUT 525.2
@ 524.8

WSE 24-50
EX. ST. GP 523.0
INV ST. 520.0 - 520.5
DB 519.5

WIRE FENCE

W/O

BF 208

FF 3.6

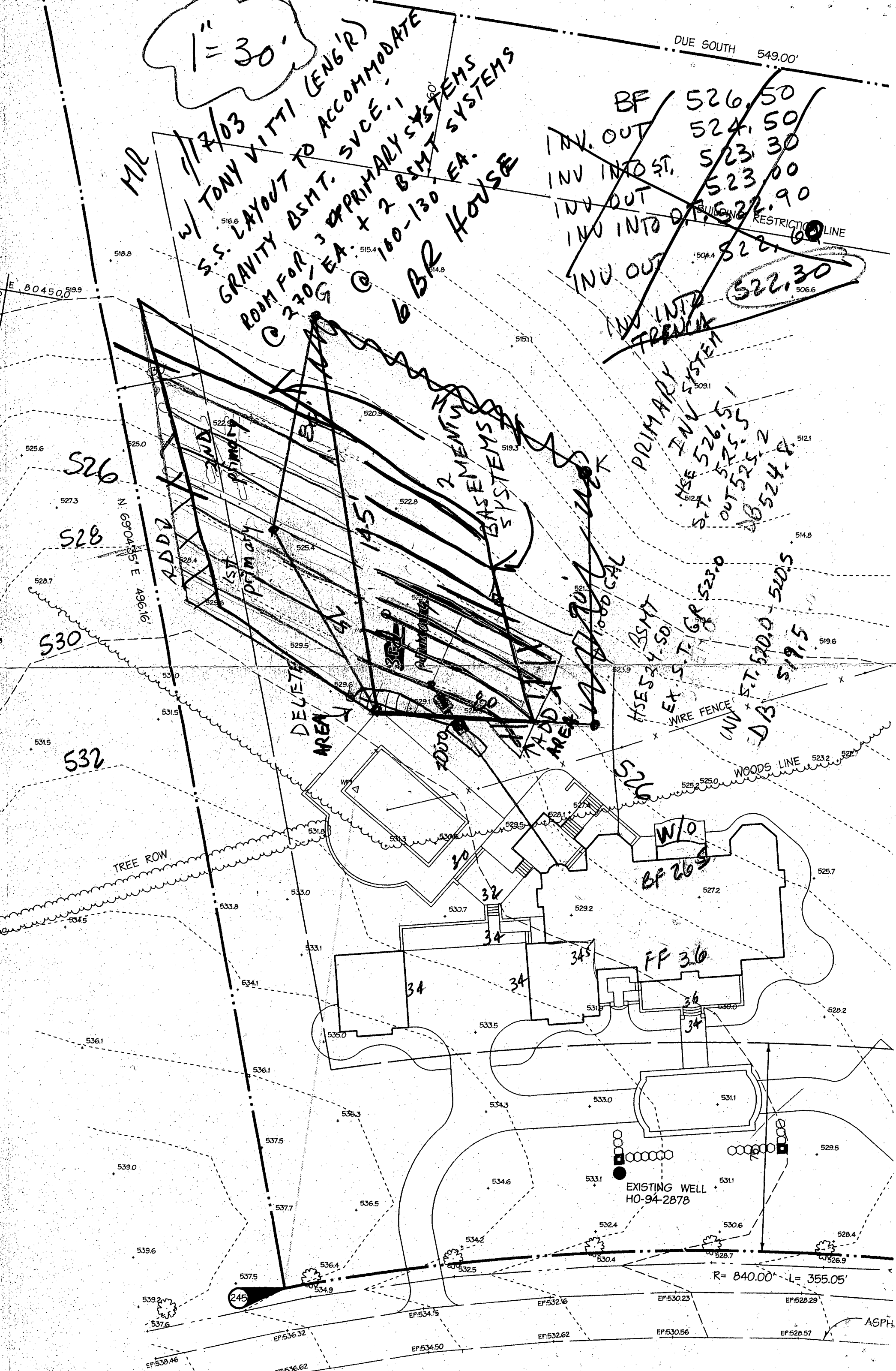
TREE ROW

WOODS LINE

EXISTING WELL
HO-94-2878

R= 840.00 L= 355.05'

ASPH.



08062 SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED AFTER WELL IS COMPLETED. COUNTY NUMBER 13 A 40622

DATE RECEIVED 12/8/00 DATE WELL COMPLETED 12/8/00 DEPTH OF WELL 400 PERMIT NO. H0-94-2878

OWNER Gloth, Jean STREET OR RFD. Gilbride Lane TOWN Clarksville SUBDIVISION Hedge row SECTION LOT 27

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entries for Top soil, Clay, Shale, Sandstone, Soapstone, Grand, Brown Mica, Chen, Brown Mica, Gray Mica.

GROUTING RECORD: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL (CM), NO. OF BAGS 39, NO. OF POUNDS 3700, GALLONS OF WATER 234, DEPTH OF GROUT SEAL 65.

CASING RECORD: MAIN CASING TYPE ST, Nominal diameter 6, Total depth 72.

OTHER CASING (if used) section with diameter and depth fields.

SCREEN RECORD: screen type or open hole (HO), DEPTH (nearest ft.) HO 70, 400.

NUMBER OF UNSUCCESSFUL WELLS: WELL HYDROFRACTURED (Y)

CIRCLE APPROPRIATE LETTER: A, E, P

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

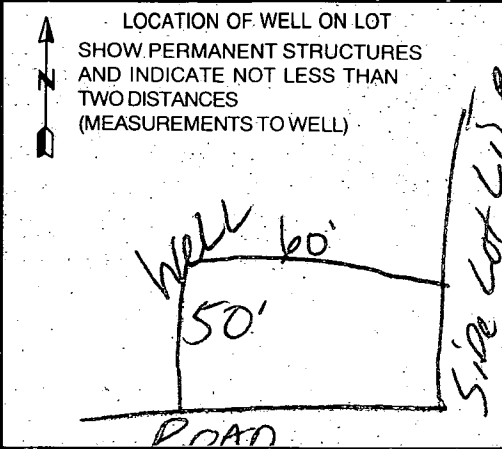
DRILLERS LIC. NO. 1 MWD 040, DRILLERS SIGNATURE, LIC. NO. 1 JWD 328, SITE SUPERVISOR

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

PUMPING TEST: HOURS PUMPED 3, PUMPING RATE 4.6, METHOD USED TO MEASURE PUMPING RATE Bucket, WATER LEVEL 24, WHEN PUMPING 106, TYPE OF PUMP USED (S) submersible.

PUMP INSTALLED: DRILLER INSTALLED PUMP (NO), TYPE OF PUMP INSTALLED PLACE (S), CAPACITY: GALLONS PER MINUTE 31, PUMP HORSE POWER 37, PUMP COLUMN LENGTH 43, CASING HEIGHT (+) above, LAND SURFACE (2) (nearest foot).



B 1 **01500**

SEQUENCE NO. (MDE USE ONLY)

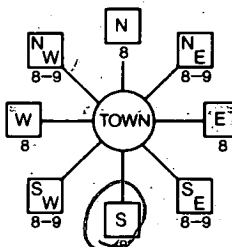

STATE OF MARYLAND
PERMIT TO DRILL WELL
please print or type

STATE PERMIT NUMBER
HO - 94 - 2878
fill in this form completely

Date Received (APA) **8417**
OWNER INFORMATION
8 MM DD YY 13
Gloth **Dr. Jean**
15 Last Name Owner First Name 34
2310 River Mist Dr
36 Street or RFD 55
Finksburg, Md 21048-1738
57 Town 70 State 72 Zip 76

B 3 LOCATION OF WELL
Howard CC#
8 COUNTY 21
Hedgerow
23 SUBDIVISION 42
SECTION **27** LOT **48 50**
44 46 48 50
Dayton
52 NEAREST TOWN 71
MILES FROM TOWN (enter 0 if in town) **2** M. I.
73 76 77 78

DRILLER INFORMATION
George F. Easterday M WD **040**
Driller's Name 76 License No. 81
L. Franklin Easterday, Inc.
Firm Name
9265 Brown Church Rd., MT. Airy, Md. 21771
Address
George F. Easterday **10/31/2000**
Signature Date

B 4
1 2
DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

23 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

11 NEAR WHAT ROAD 30
Gilbride Lane
34 **700** 37
DISTANCE FROM ROAD Ft. 38 39
ENTER FT OR MI
TAX MAP: **28** BLK: **20** PARCEL **30**

B 2 WELL INFORMATION **5**
1 2
APPROX. PUMPING RATE (GAL. PER MIN.) 8 **500** 12
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 **500** 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)
 D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
 F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
22 I INDUSTRIAL, COMMERCIAL, DEWATERING
 P PUBLIC WATER SUPPLY WELL
 T TEST, OBSERVATION, MONITORING
 G GEO-THERMAL

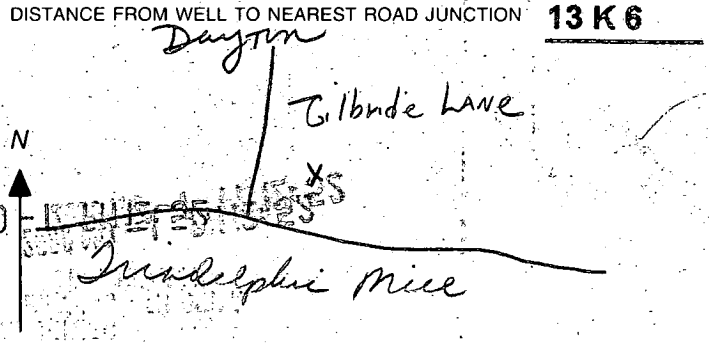
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
Howard **(13) A40622**
COUNTY NAME COUNTY NO.
STATE SIGNATURE INSERT S →
DATE ISSUED **11/08/2000 Brian Baker 11/8/2001** 41
43 MM DD YY 48 CO SIGNATURE EXP. DATE
NORTH GRID **504** 0 0 0 EAST GRID **804** 0 0 0
50 55 57 63

APPROXIMATE DEPTH OF WELL **300** FEET
24 28
APPROXIMATE DIAMETER OF WELL **6** INCH
NEAREST

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
SOURCES OF DRILLING WATER
1. **wells**
2.
3. **X**
WRITE THE BOX NUMBER FROM THE MAP HERE
E **8004**
N **5004** ←
000
000

METHOD OF DRILLING (circle one)
BORED (or Augered) JETTED Jetted & DRIVEN
36 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)
37 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
39 S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
 D THIS WELL WILL DEEPEM AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION **13 K 6**


Not to be filled in by driller (MDE OR COUNTY USE ONLY)
APPROP. PERMIT NUMBER 54 _____ 63
PERMIT No. **HO - 94 - 2878**
70 71 72 73 74 75 76 77 78 79

APPLICATION

PERCOLATION TESTING

A 40622

P _____

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

DISTRICT _____

DATE 12/7/87

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 _____

ADDRESS _____ PHONE _____

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION TEN OWNS LOT NO. 29

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 _____

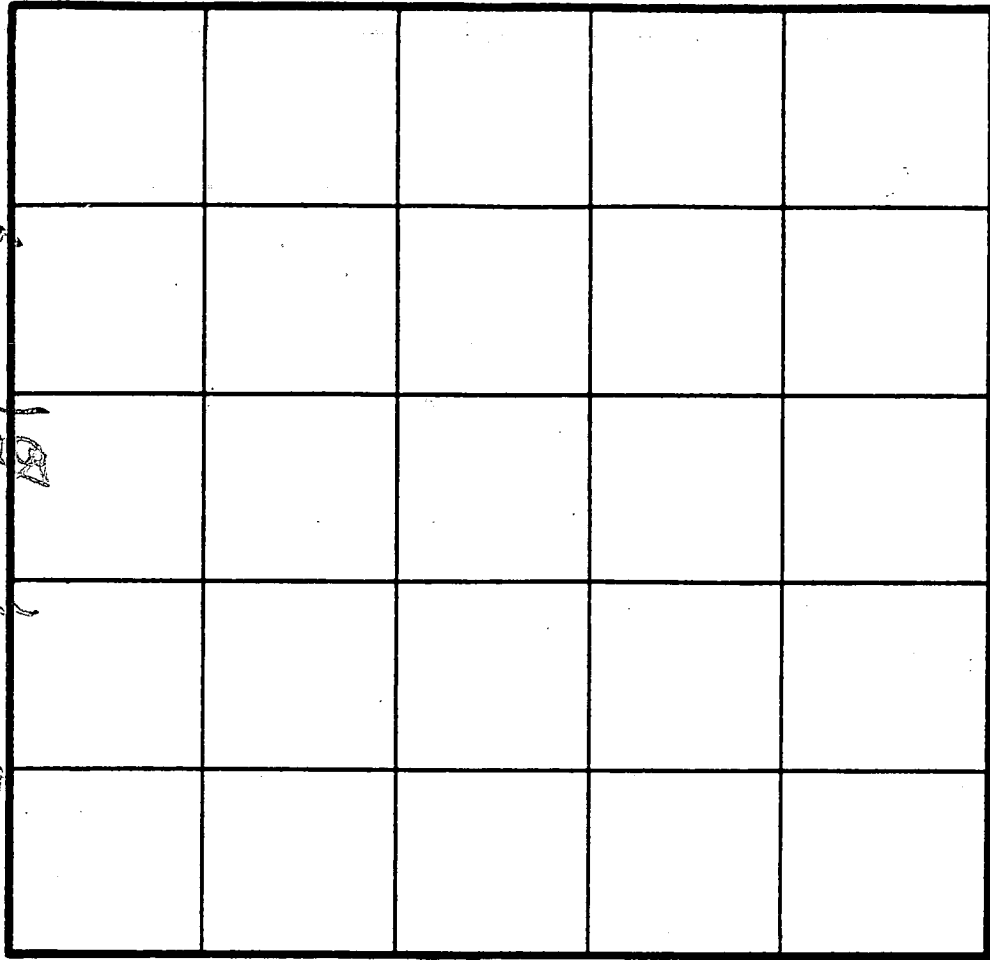
REASONS FOR REJECTION OR HOLDING _____

HD-216

THIS IS NOT A PERMIT

B
SOIL PROFILE

0'
Heavy clayey
gravelly
5 1/2'
to orange to
pewdering silty
brown
Darker brown
silty loam
11'
slump 11'
No bulking
12' D



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11/2/86	B	6'S	236	241	241	249	8:15 AM
		11 1/2 D	bottom (see profile)				← 11:00 later @ 11'
	F	5'S	245	325	< 1"		
		12' D	bottom (see profile)				

REMARKS _____

TYPE OF SOIL _____

TESTED BY _____ ALSO PRESENT _____

APPLICATION

PERCOLATION TESTING

A 40622

P _____

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

*1/12/88
perc unsatisfactory*

DISTRICT: 5TH

DATE 12-07-87

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 LOWRIE SARGENT

ADDRESS 13243 WESTHEATH LANE PHONE 301-498-4334
CLARKSVILLE MARYLAND 21029

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION TEW OAKS LOT NO. LOT 29

ROAD AND DESCRIPTION WEST OF HIGHLAND ROAD; NORTH OF TRIADDELPHIA ROAD

TAX MAP 28+34 PARCEL # 59,60,30,64

SIZE OF LOT 3.0 ACRES 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.

L.B. Sargent
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

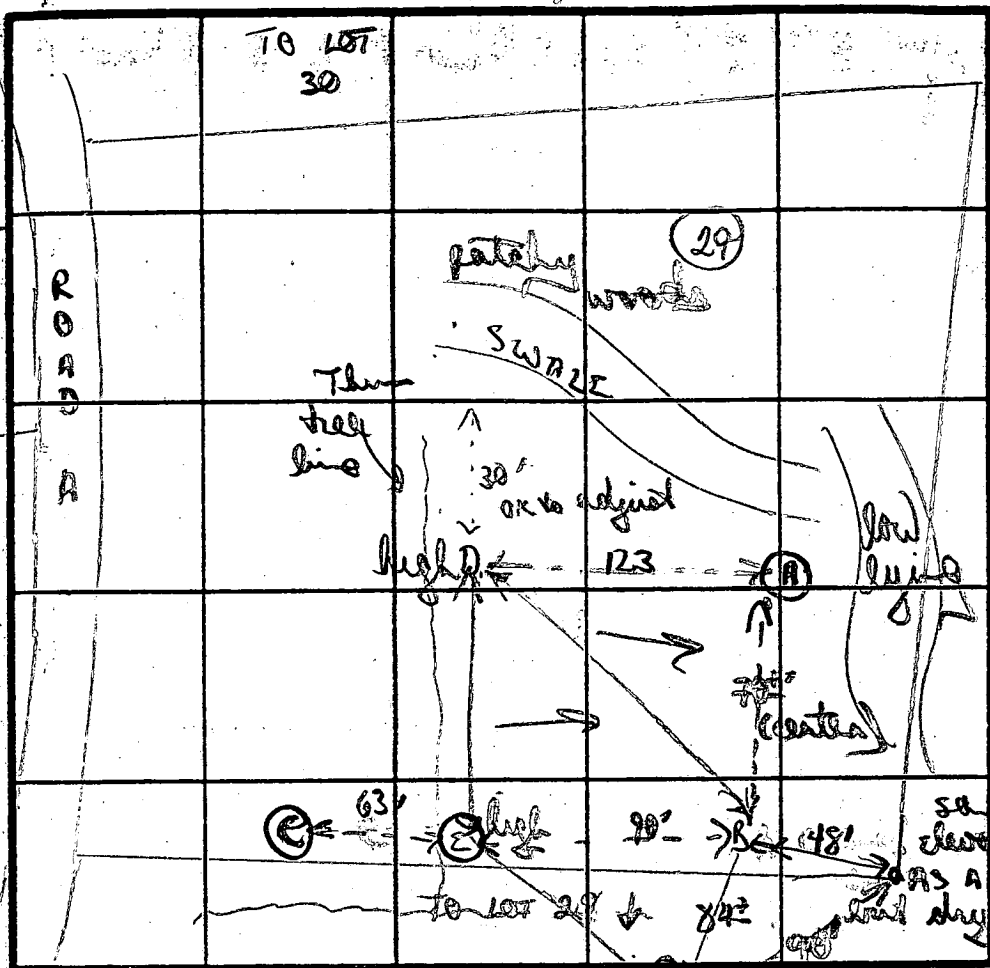
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING heavy clays; H₂O in lower holes

THIS IS NOT A PERMIT

C
SOIL PROFILE

Orange/yellow
chester
gravelly
4 1/2'
gradually
changing
to clay
sett
71' TO
TO
LOT
27
←
to mostly
orange
clay
sett
12' D
D
bright orange
patchy heavy
clay
3'
used w/ to
sett
4 1/2'
to patchy
tan sett
sett
↓
12' D
Z
heavy orange
chester gravelly
4 1/2'
changing to



NOTE: HERE
"E" DUG ON
LOT 28 W/
INITIAL
INTENTION OF
ADJUSTING
LOT LINES.
HOWEVER,
HERE ALSO
FAILED.

INDICATE NORTH - NAME ADJOINING ROADWAY

PERC
HERE
28

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
1/12/86	C	4 1/2 S	203	LITTLE	PERC		DONT USE	
		71 M	157	202	202	212	10 MIN	
		12' D	bottom (see profile)					
	D	4' S	213	215	215	219	4 MIN	
		12' D	bottom (see profile)					
	A	3 1/2 S	219	222	222	225	3 MIN	
		11' D	H2O at 8' 6" bottom (see profile)					
	Z	5' S	232	← 32" at 30 MIN				
		13' D	bottom (see profile)					
		5' S					(page 2)	

REMARKS: Dug + tested as stated - added Z (high clay in hole C) well have to extend area towards lot 30 ONLY heavy chester clays (some gravelly); H2O in lower holes

TESTED BY: B Nixon

ALSO PRESENT: John S., Keith

APPLICATION

PERCOLATION TESTING

A 40622

P _____

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

*1/22/88
perc OK'd pending
approved plat
@*

DISTRICT _____

DATE 12/07/87

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 _____

ADDRESS _____ PHONE _____

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 2927 on Prelim

ROAD AND DESCRIPTION perc shifted to opposite side of swale (near lot 30). Orig test near lot 28 line all bad.

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 location (good & bad holes) & 3/10 plat

HD-216

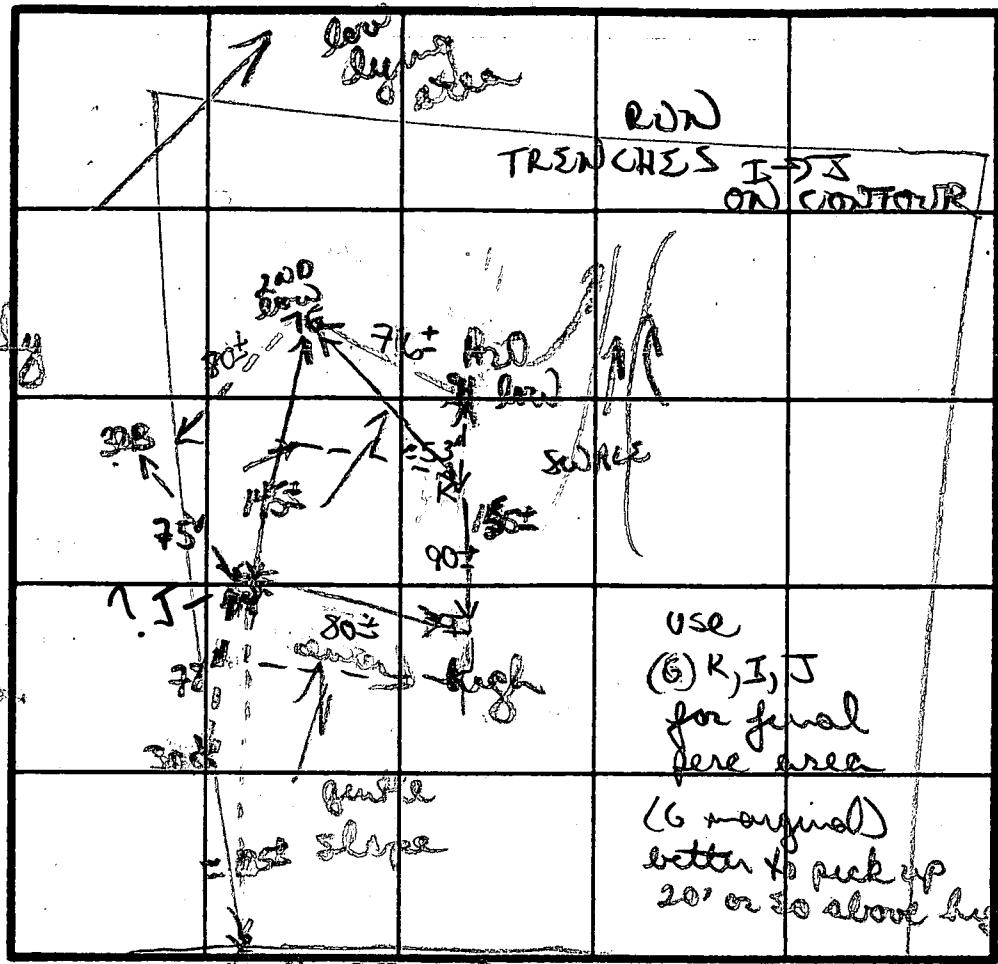
THIS IS NOT A PERMIT

INLET 4"
 MAX D 8"
 X=9+ MIN
 187 B/BD
 180 G

LOT 27

SOIL PROFILE

orange
 purple
 clay/gravelly
 heavy 4 1/2'
 to purple
 clay silty
 6'
 to purple
 silty area
 12'D



H
 yellow/orange
 clay (heavy
 to 5') at 10'
 clay heavy
 6 1/2'
 changes
 to silty
 low w/
 few scattered
 frags
 12 1/2' to 13'
 13'D

orange/orange
 clay/silty
 low 2 1/2'
 brown then
 purple/orange
 brown silty
 area low
 w/ 210% small
 med med
 shud frags
 6
 12'D
 I

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
11/21/88	G	6 1/2 S	1213	1218	1218	1225	7 MIN	
		12'D	bottom - (see profile)					
	H	6'S	1218	1224	1224	1245	21 MIN	
		13'D	bottom - (see profile)					H2O
	J	4'S	1222	1224	1224	1228	4 MIN	
		12'D	bottom - (see profile)					
	I	4 1/2 S	1251	100	100	114	14 MIN	
		7' M	1246	1249	1249	1253	4 MIN	
		12'D	bottom - (see profile)					
	K	14'S	110	113	113	118	5 MIN	
		13'D	bottom - (see profile)					

OR at
 5'
 EXCLUDE
 12' 10"
 K
 purple
 clay 3 1/2'
 to purple
 silty low
 w/ 15%
 med frag
 5'D
 13'

orange/purple
 clay 4 1/2'
 changing to
 purple orange
 silty low w/
 10-15% silt to
 see low rock frags 3-7 1/2'D

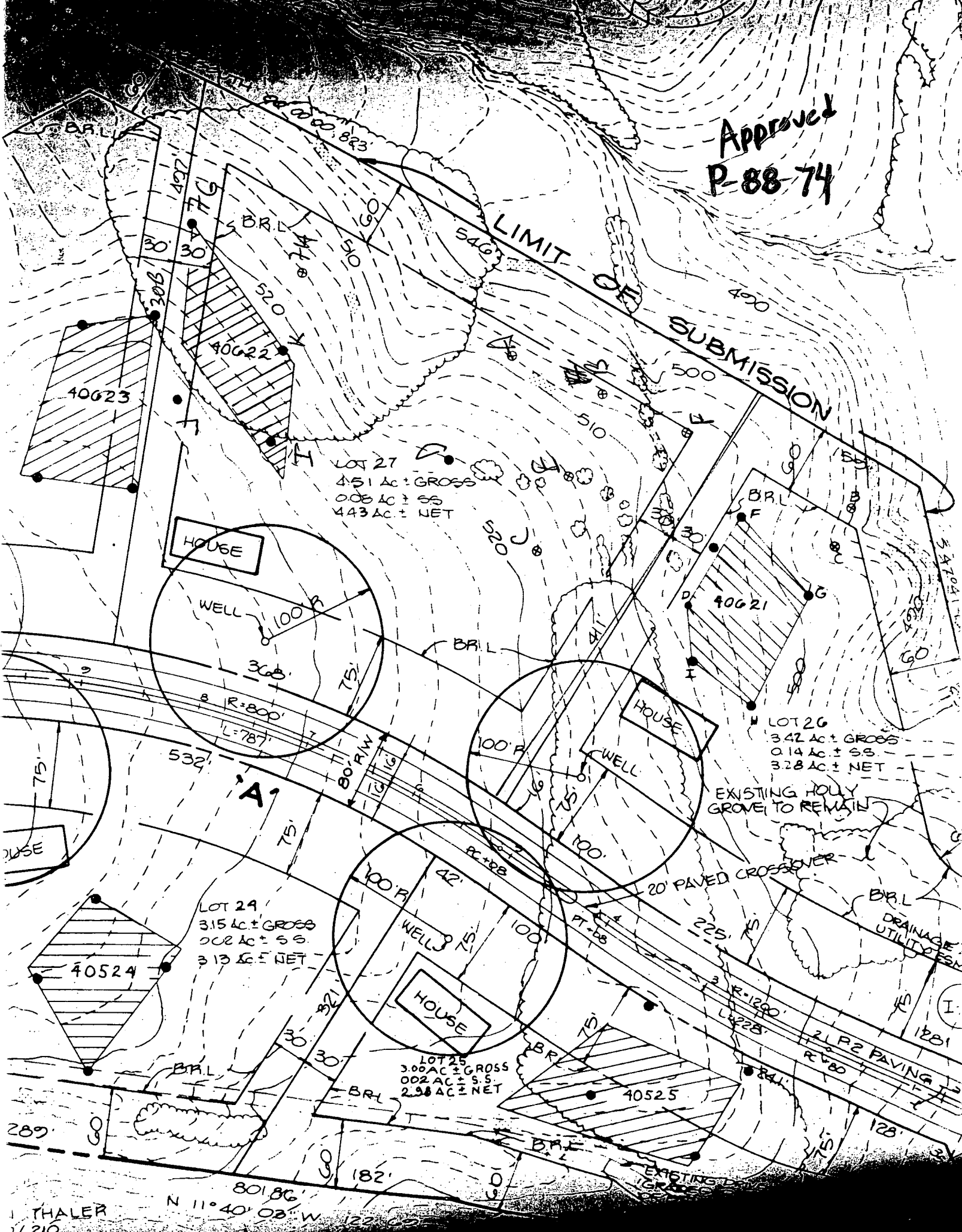
REMARKS: soils better at top, clays get deeper in lower end of field

TYPE OF SOIL: orange purple clays to 6'; mostly silty purple loam below

TESTED BY: B. A. [unclear]

ALSO PRESENT: John S., Sid Reith

Approved
P-88-74



LOT 27
4.51 AC ± GROSS
0.08 AC ± SS
4.43 AC ± NET

LOT 26
3.42 AC ± GROSS
0.14 AC ± SS
3.28 AC ± NET

LOT 24
3.15 AC ± GROSS
0.02 AC ± SS
3.13 AC ± NET

LOT 25
3.00 AC ± GROSS
0.02 AC ± SS
2.98 AC ± NET

I. THALER
1/210

APPROVED
 WALK-THRU BUILDING PERMIT
 BP# B00157032 A# 40622
 APP. SAN P.A. # 4 DATE: 11/3/04
 DESC. OF WORK: 16x18 Deck
Sunroom

BUILDING

Scale
 1:30

