

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

04-355059

12/22
(Needs
Moore
Connection
done 2/13/95)
12/22(a) P.C.O. *CAF*

P 50397A
A 41971

DISTRICT 4th

DATE 11/16/94

DATE SYSTEM APPROVED 2/13/95

INSPECTOR *DKS*

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH
~~XXXXXXXXXX~~ 313-2640

INDEXED

South Carroll Backhoe, Inc. IS PERMITTED TO INSTALL ALTER

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

SUBDIVISION ~~Rover Mill Estates~~ Choi Property LOT 8 ROAD ~~3163~~ ³³²⁷ Danmark Drive

PROPERTY OWNER Michael and Donna Collins

ADDRESS

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 210

**BUILDING PERMIT SIGNED
AND RETURNED 5-15-02**
BOD130191 - FINISH BASEMENT
7-16-03 BOD143042 - SW ROOM

TRENCHES - Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 7 feet below original grade. Effective area begins at 3 feet below original grade. 4 feet of stone below distribution pipe. ⁷⁰

LOCATION - Place the distribution box 275 feet down the left lot line and 70 feet off the same lot line as seen when facing the lot from Danmark Drive. Run trenches along contour towards the front lot line.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. *OK 10/24/94 DKS*

PLANS APPROVED BY Donna K. Soe/Mark Rifkin REVISED DATE 08/11/94

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

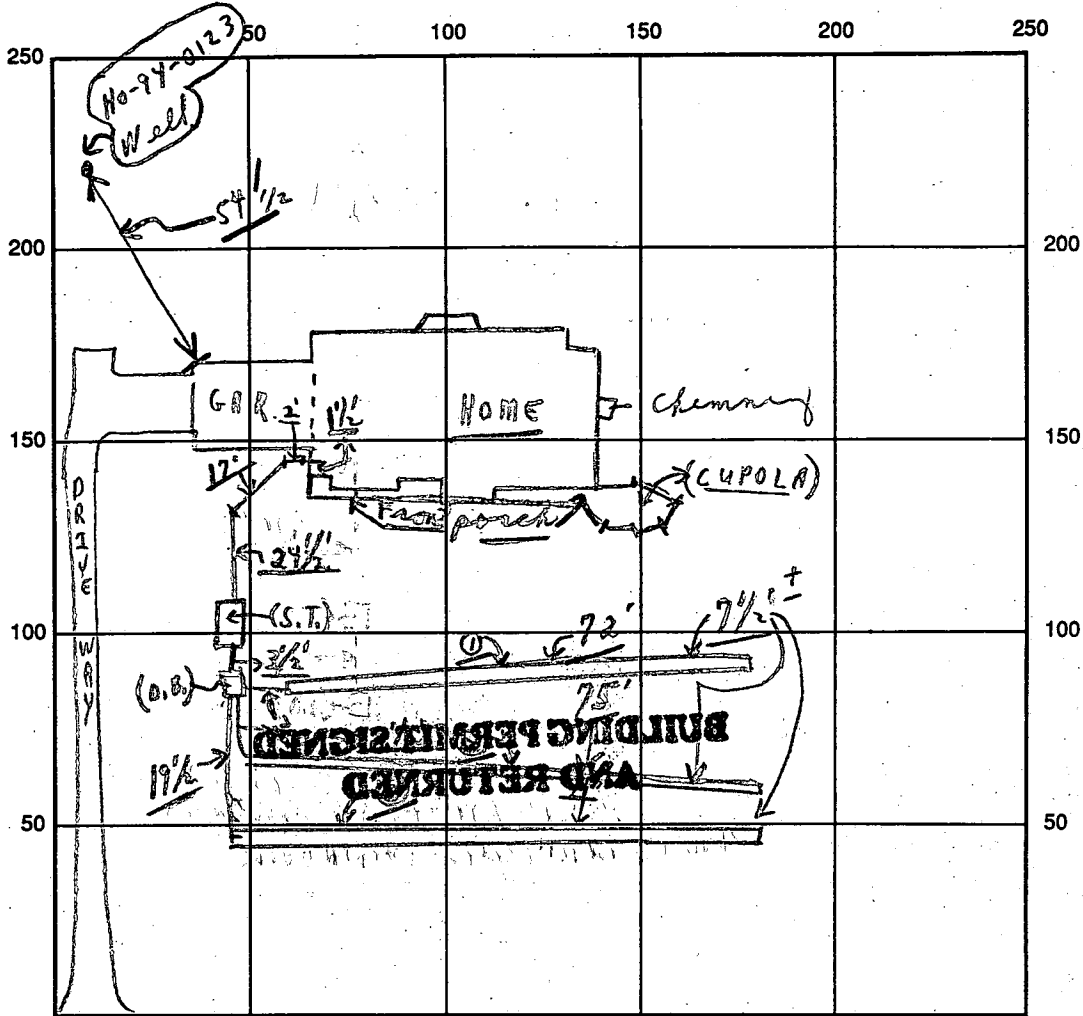
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON. CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

A 41971

12/22/94
close 11:00, later
2/13/95
A.M. final
for insp.



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

Danmark Drive

S.T.

SEPTIC TANK LEVEL OK CLEANOUTS OK

DISTRIBUTION BOX LEVEL OK (Baffle's in)

DRAIN FIELD/TITLE DEPTH 7⁺ (average) FT. TRENCH WIDTH 2 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 4⁺ FT. (① 72'; ② 75'; ③ 71' TOTAL LENGTH 218 FT.)

NUMBER OF TRENCHES 3 ONE SIDEWALL/AREA 872⁺ SQ. FT.

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

ABSORBENT AREA 872⁺ SQ. FT.

REMARKS: (A.M.) 12/22/94 Partial - Needs - house connection 1/2" pipe
 ok to cover 1' out from house to dist. box; ok
 to finish 2 trenches on ends; & do ③ trench -
 like the other - 2' cks; P.M. Finish - except HOUSE
 CONNECTION - ok to cover as finish - material on
 12/22/94 W.P.I. ← No A.M. 2 1/2 site cks 2/13/95 house conn. OK. DKS

DATE SYSTEM APPROVED 2/13/95 ^{CD} INSPECTOR [Signature]

APPLICATION

PERCOLATION TESTING

A 41971

P _____

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

DISTRICT 4TH

DATE March 10, 1988

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 Sang Ho Company, Inc.

ADDRESS 8100 Cooper Street, Alexandria, Va. 22309 PHONE (703) 239-7541

PROSPECTIVE BUYER Unknown

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Choi Property LOT NO. 8

ROAD AND DESCRIPTION North side of Burrowswood Rd., 1890' East of Hobbs Road.

TAX MAP 14 PARCEL # 106

SIZE OF LOT 3.00 Acre Minimum TYPE BLDG S.F.O.
(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.

Dennis M. Ryals
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

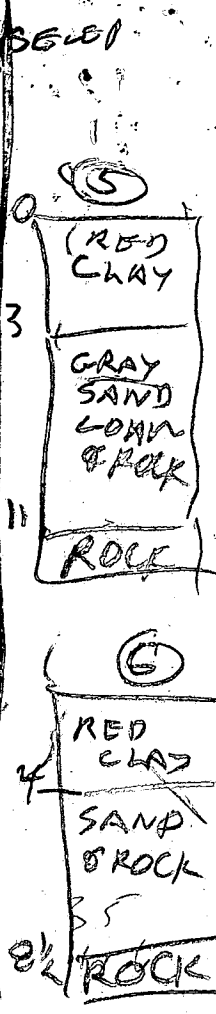
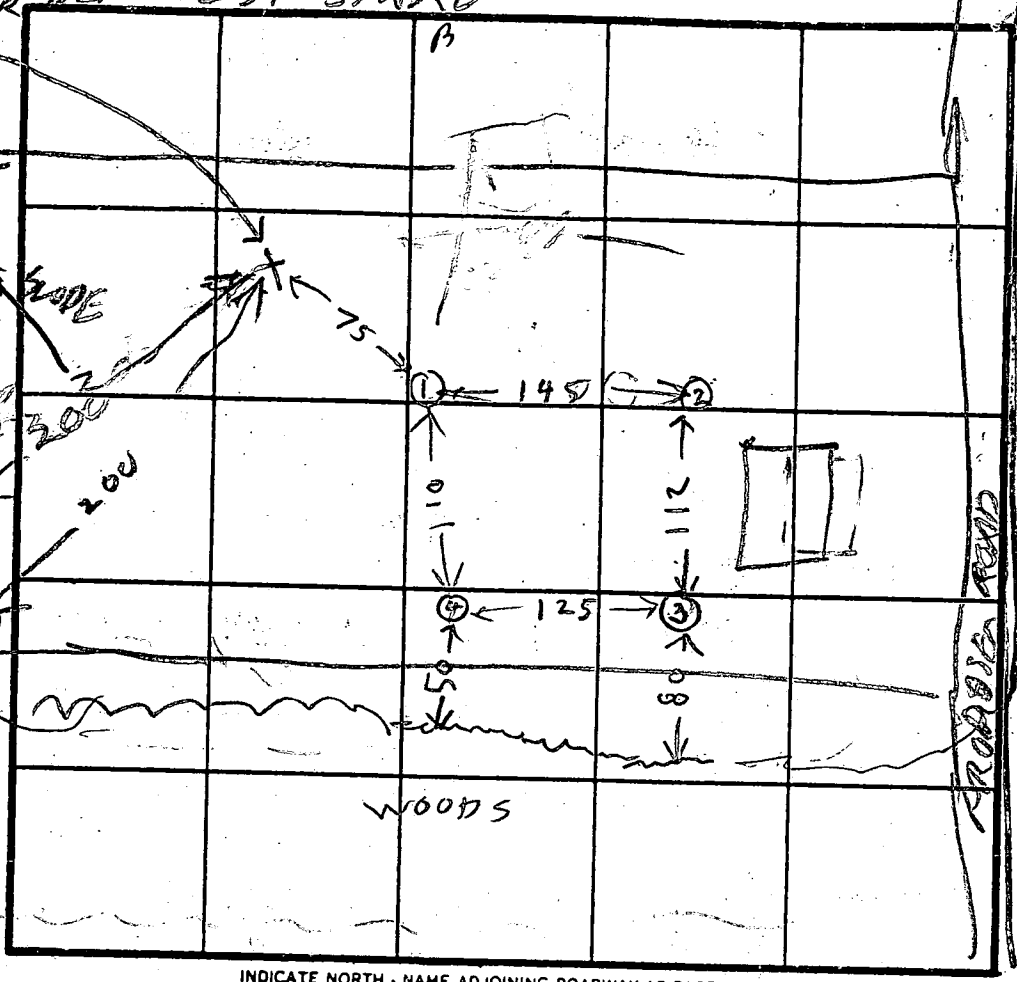
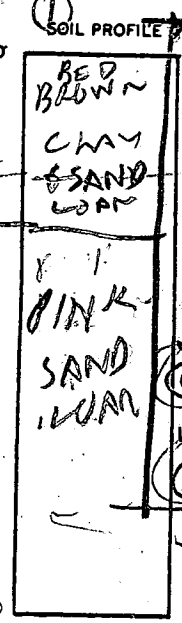
HD-216

THIS IS NOT A PERMIT

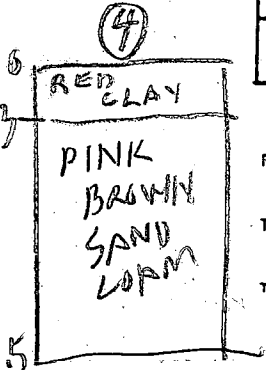
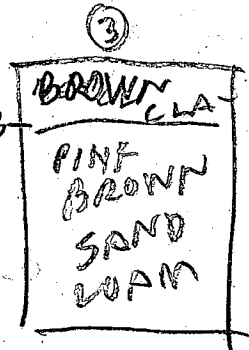
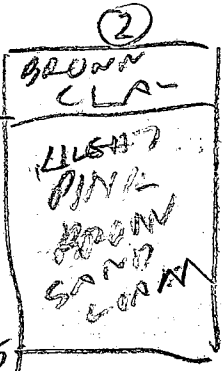
BURNT WOODS RD

SURVEYOR HERE TEST STAKE

LOT 8
A 41971



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

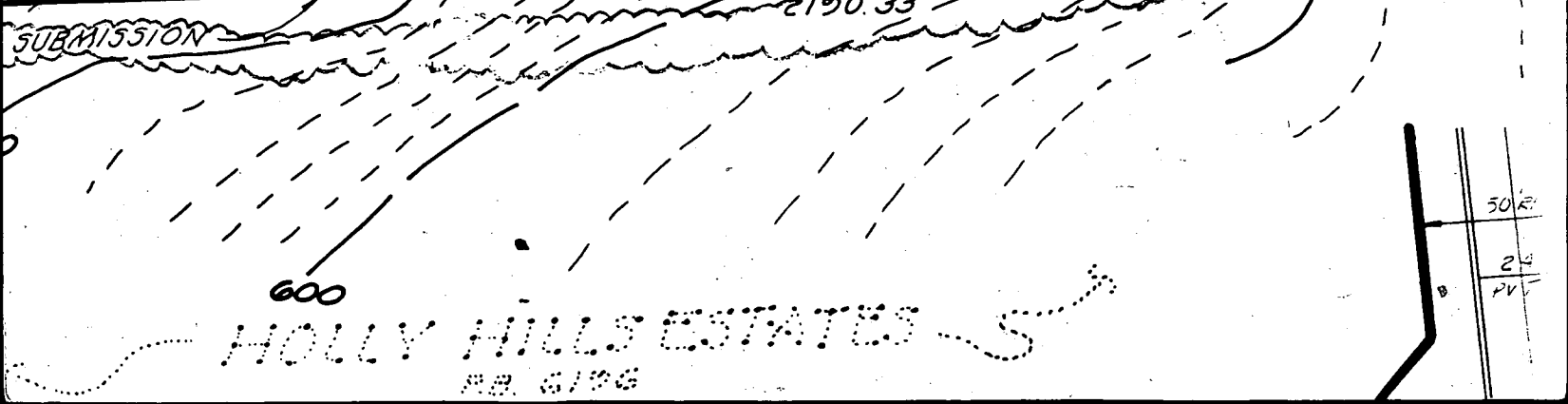
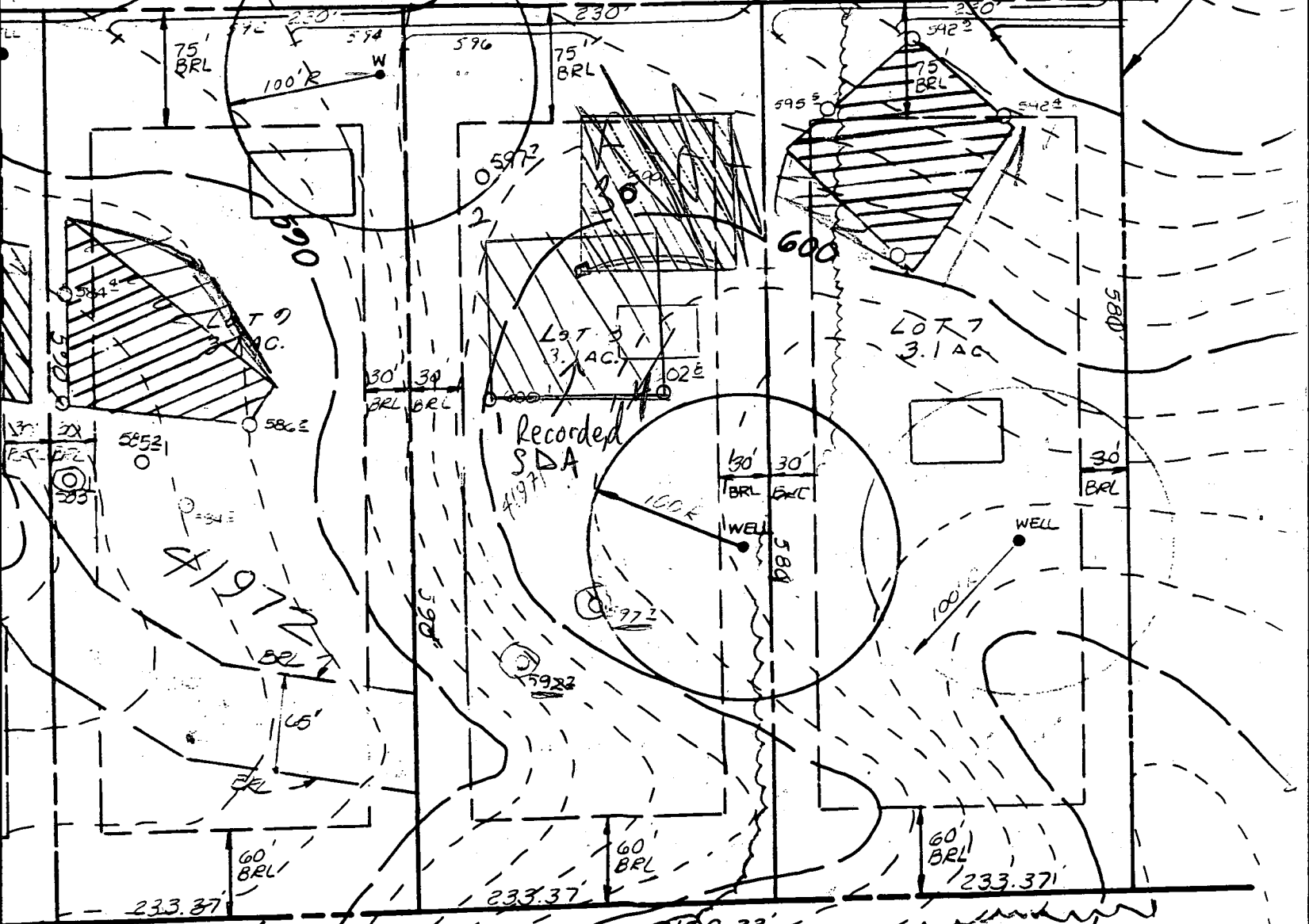
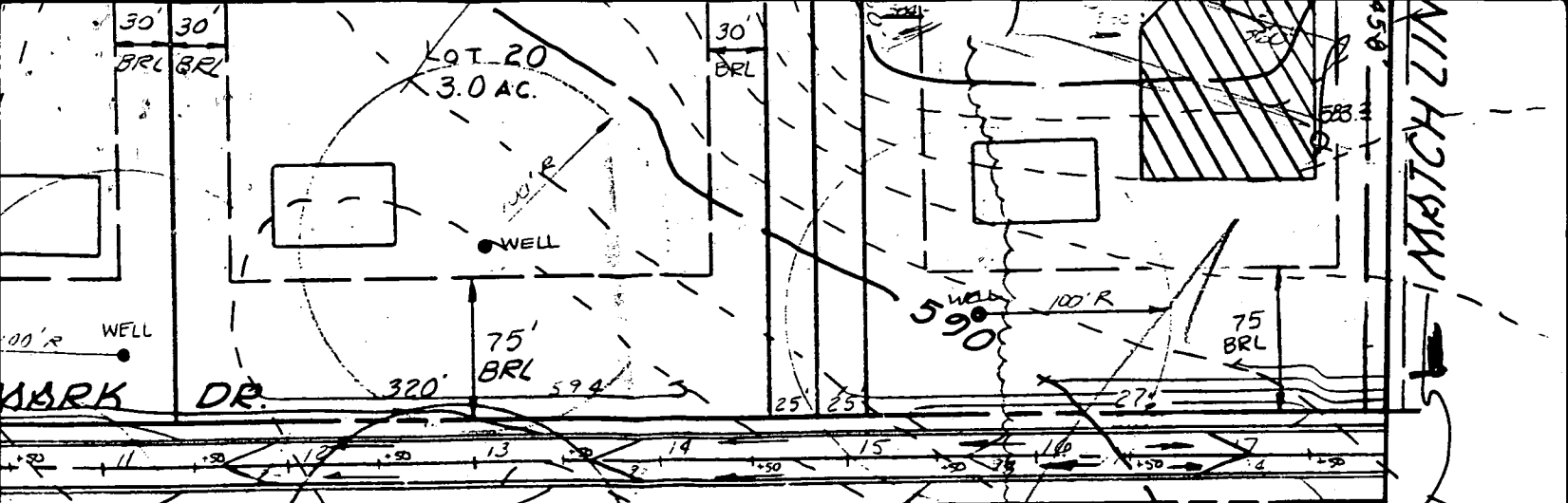


DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
8/30/88	1S	4.5	949	1035	1035	48	5 MIN	
	1D	8	949	952	952	957	5	
8/31/88	1V	12.5	OK					
	2S	4	1000	1009	1009	1020	11	
	2V	12.5	OK					
	3S	4.5	1003	1007	1007	1011	4	
	3V	12	OK					
	4V	12.5	OK					
	(5V)	11	UNSAT	ROCK				
8/31/88	(6V)	8 1/2	UNSAT	ROCK				
	1M	6	1042	1054	1054	1114	24	

X 10 MIN
210#/BR
INLET 3'
BOTTOM 1'

Hole (5) & (6) Dug per Test Plot

REMARKS: (1) (2) (3) (4) Dug Differently from Test Plot
Well sites on list be changed to HOUSE SITE
TESTED BY: R. Hodges
ALSO PRESENT: WILLY SIKIP OF F-700F



MATCH LINE

5137

SEQUENCE NO. (DENV 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.

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

COUNTY NUMBER A 41974

ST/CO USE ONLY
DATE Received

DATE WELL COMPLETED

07/19/94

Depth of Well

22 250 26
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
40-94-0123

OWNER Jacobson Construction
STREET OR RFD Danmark Dr first name Stevig TOWN
SUBDIVISION Chci Property SECTION LOT 8

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

DESCRIPTION (Use additional sheets if needed)	FEET FROM	TO	Check if water bearing
top soil	0	2	
shale	2	54	
Brown mica	54	67	<input checked="" type="checkbox"/>
fine mica	67	250	

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) Y N

TYPE OF GROUTING MATERIAL

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 17 NO. OF POUNDS 1700

GALLONS OF WATER 85

DEPTH OF GROUT SEAL (to nearest foot)
from 0 ft. to 5 1/2 ft.
(enter 0 if from surface)

CASING RECORD

casing types insert appropriate code below
 ST CO
STEEL CONCRETE
 PL OT
PLASTIC OTHER

MAIN CASING TYPE Nominal diameter top (main) casing (nearest inch) Total depth of main casing (nearest foot)
 ST C 60

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

SCREEN RECORD

screen type or open hole insert appropriate code below
 ST BR HO
STEEL BRASS OPEN HOLE
 PL OT
PLASTIC OTHER

C 2

EACH CASING	DEPTH (nearest ft.)	
	diameter	depth
1	<u>58</u>	<u>250</u>
2		
3		

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. 40
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

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

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)
T (E.R.O.S.) W Q
74 75 76
TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3 Corrected

PUMPING TEST

HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min. to nearest gal.) 6

METHOD USED TO MEASURE PUMPING RATE Buckets

WATER LEVEL (distance from land surface) BEFORE PUMPING 39

WHEN PUMPING 701

TYPE OF PUMP USED (for test)
 A air P piston T turbine
 C centrifugal R rotary O other (describe below)
 J jet S submersible

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: 29

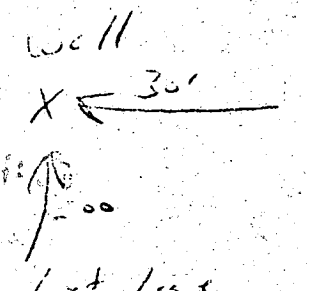
CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 35

PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH (nearest ft.) 43 47

CASING HEIGHT (circle appropriate box and enter casing height)
 above } LAND SURFACE
 below } 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)



DRILLER

C1 5137

SEQUENCE NO. (DENV 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.

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

COUNTY NUMBER A 41974

ST/CO USE ONLY

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

DATE RECEIVED grid

07 19 94

22 250 26 (TO NEAREST FOOT)

40-94-0123

OWNER Jacobson Construction last name first name TOWN Glenelig SUBDIVISION Chis Property SECTION LOT 8

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, FEET (FROM, TO), Check if water bearing. Rows: Top Soil (0-2), Shale (2-54), Brown sand (54-67), Fine M.S.A (67-250)

GROUTING RECORD WELL HAS BEEN GROUTED (Y/N) TYPE OF GROUTING MATERIAL CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 47 NO. OF POUNDS 1700

CASING RECORD casing types insert appropriate code below MAIN CASING TYPE S (60-61) Nominal diameter top (main) casing (nearest inch) 6 (63-64) Total depth of main casing (nearest foot) 60 (66-70)

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

SCREEN RECORD screen type or open hole insert appropriate code below ST (STEEL) BR (BRASS) HO (OPEN HOLE) PL (PLASTIC) OT (OTHER)

Table with columns: E A C H C A S I N G, S C R E E N, DEPTH (nearest ft.), SLOT SIZE, DIAMETER OF SCREEN

CIRCLE APPROPRIATE LETTER 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...

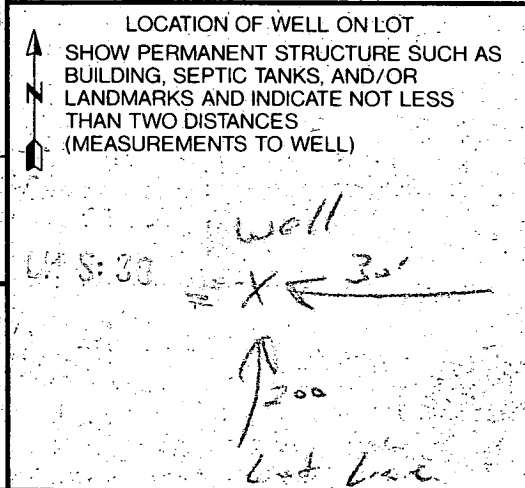
DRILLERS IDENT. NO. 40 DRILLERS SIGNATURE SITE SUPERVISOR

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

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min. to nearest gal.) 12 METHOD USED TO MEASURE PUMPING RATE Before TYPE OF PUMP USED (for test) S submersible

PUMP INSTALLED DRILLER WILL INSTALL PUMP YES 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) above below LAND SURFACE (nearest foot)



B 1 07769

SEQUENCE NO. (DP USE ONLY)

7/19/97
S.W.

STATE OF MARYLAND
PERMIT TO DRILL WELL
please print or type

STATE PERMIT NUMBER

40-94-0123
fill in this form completely

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

Date Received (APA)
062094

OWNER INFORMATION

JACOBSEN CONST
7909 ELIZABETH DR
FULTON MD 20759

B 3

LOCATION OF WELL

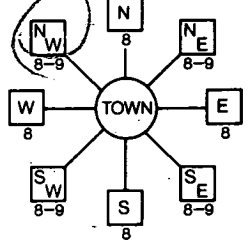
HOWARD
8 COUNTY
CHOT PROPERTY
23 SUBDIVISION
SECTION 44 46 LOT 8 48 50
SIEBELS
52 NEAREST TOWN
MILES FROM TOWN (enter 0 if in town) 2 MI

DRILLER INFORMATION

George F. Easterday
L. Franklin Easterday, Inc.
Brown Church Rd., MT. Airy, Md. 21771
6/16/94

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



DAWMARK DR
NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



3005
DISTANCE FROM ROAD
ENTER FT or MI 57

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.)
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

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)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL 441971

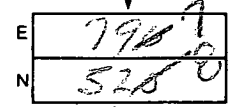
Howard
COUNTY NAME
DATE ISSUED 070594
CO-SIGNATURE
NORTH GRID 528000 EAST GRID 0797000

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

METHOD OF DRILLING (circle one)

- BORED (or Augered) JETTED Jettied & DRIVEN
AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary)
CABLE REVerse-ROTary Drive-POINT

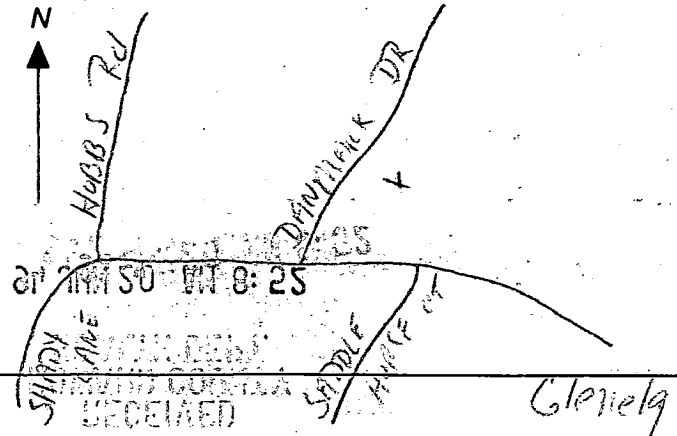
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
SOURCES OF DRILLING WATER well



REPLACEMENT OR DEEPEINED 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 DEEPEIN AN EXISTING WELL

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



APPROX. PERMIT NUMBER GAP
FORCE DS PERMIT No. 40-94-0123

SPECIAL CONDITIONS

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

12/27
F. [unclear]
C. B. [unclear]

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation _____ Receipt # _____
Replacement _____ Date _____

Name of Installer _____ Telephone _____

License Number _____
Certified Well Pump Installer _____ Well Driller _____ Registered Plumber _____

Name of Property Owner _____ Telephone _____

Subdivision CHOI PROPERTY Lot # 8 Well Tag # HO-94-0123

Site Address 3317 Dumont Dr. passage at entrance *CS*

Pump
1. Type
a. Deep well jet _____
b. Shallow well jet _____
c. Submersible _____
2. Make _____
3. Model # _____
4. Capacity _____ GPM
5. Pump exceeds well capacity Yes _____ No _____
6. If Yes, is low pressure cutoff switch installed? Yes _____ No _____
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors _____ Cable guards _____ Other _____

Motor
1. Horsepower _____
2. RPM _____
3. Voltage _____
a. 110 _____
b. 220 _____

Pitless Adapter
1. Make _____
2. Model # _____
3. Depth _____

Tank
1. Capacity _____
2. Pressure relief valve? _____

Piping
1. Type _____
2. Size _____
3. NSF and/or BOCA Code approved _____
4. Depth of supply line _____

Well data
1. Depth _____ ft.
2. Yield _____ GPM
3. Static water level _____ ft.
4. 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.

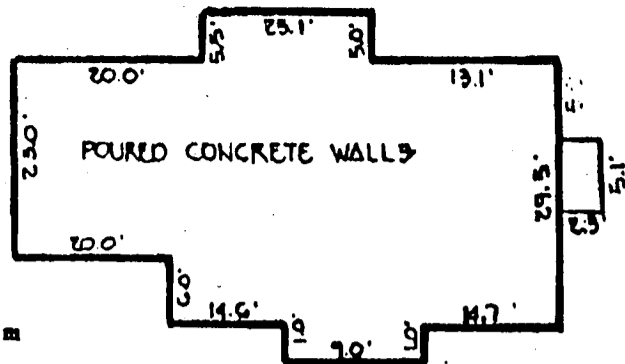
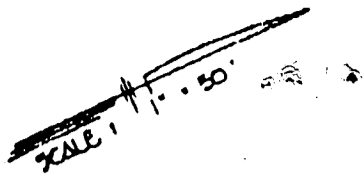
Signature of Applicant: _____

Date: _____

ORANGE

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

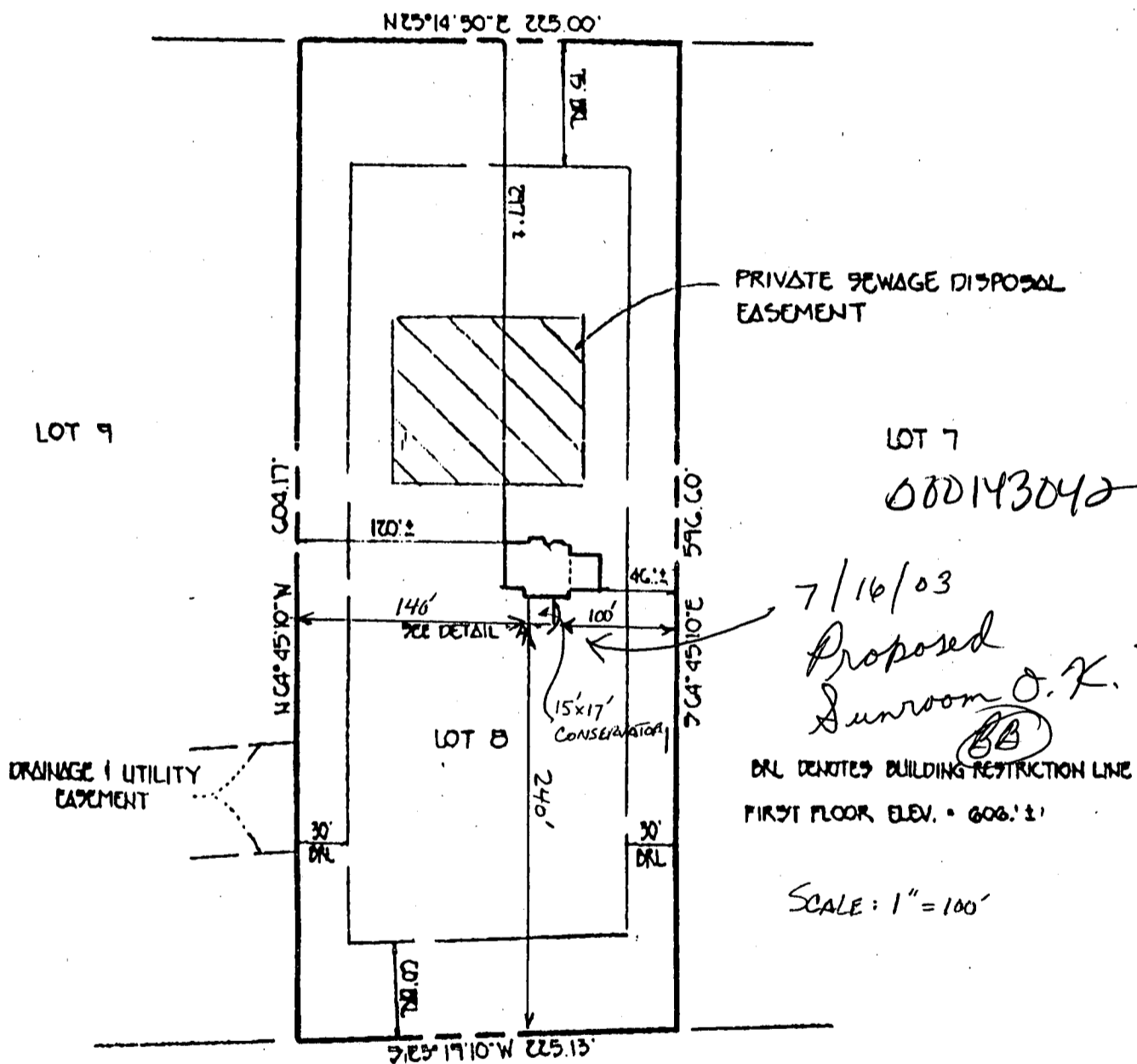
Note: ① No other paperwork with this page. *CS*



DETAIL "A"

Subject property is shown in Zone C on the National Flood Insurance Program Flood Insurance Rate Map of Howard County, Maryland, Panel No. 14 of 45 Community Panel No. 240044004B Effective date: December 4, 1986

DANMARK DRIVE
50' R/W



7/16/03
Proposed
Sunroom O.K.
BB

BRL DENOTES BUILDING RESTRICTION LINE
FIRST FLOOR ELEV. = 606.1'

SCALE: 1" = 100'

HOLLY HILL ESTATES

This is to certify that I have surveyed the property known as: LOT B OF CHOI PROPERTY RECORDED AS PLAT # 10652 AMONG THE LAND RECORDS OF HOWARD COUNTY, MARYLAND for the purpose of locating the improvements thereon, and the improvements are located as shown.



Signed this 22 day of October, 1994
[Signature]

FISHER, COLLINS & CARTER, INC.
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS
927 BALTIMORE NATIONAL PARK BLVD. 2ND
BELLGATE CITY, MARYLAND 21114
410 481-1800

This plat is not intended for use in the establishment of property lines.