

12/6/94  
PM  
12/7/94 2:00

# PERMIT

## SEWAGE DISPOSAL SYSTEM

P 50427C

A 43419

### DEPARTMENT OF HEALTH AND MENTAL HYGIENE

\* Time expired for F.C.D.P. Compliance

DISTRICT 4th

DATE 12/5/94

### HOWARD COUNTY HEALTH DEPARTMENT

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

04-354109

DATE SYSTEM APPROVED 12-7-94

INSPECTOR Aur

## INDEXED

Jack Fyock Septic Service IS PERMITTED TO INSTALL  ALTER

ADDRESS \_\_\_\_\_ PHONE 988-9270

SUBDIVISION Cabin Branch Farm LOT 39 ROAD 3200 Brighton Court

PROPERTY OWNER Regency Devel. Group, Inc. Richard Keller

ADDRESS \_\_\_\_\_

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

210 240 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 280 320

TRENCHES - Trench to be 3 feet wide. Inlet <sup>3</sup> 4 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 4 feet below original grade. 1.5 feet of stone below distribution pipe. 3

LOCATION - Place distribution box 110 feet from front lot line (520.81') and 45 feet from left (240.00') lot line as viewed from Brighton Court. Install trenches on contour in both directions. NOTE: MAINTAIN 100 FEET WELL TO SEPTIC SEPARATION distance.

NOTES - No trench to exceed 100 feet in length. provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 7/20/94 DKS

12/7/94 SPECS REVISED FOR 2x @ S.T. @ 8-9' HARD BOT

PLANS APPROVED BY Ronald J. Pinkley/Amy McMillen REVISED DATE 05/26/94

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.

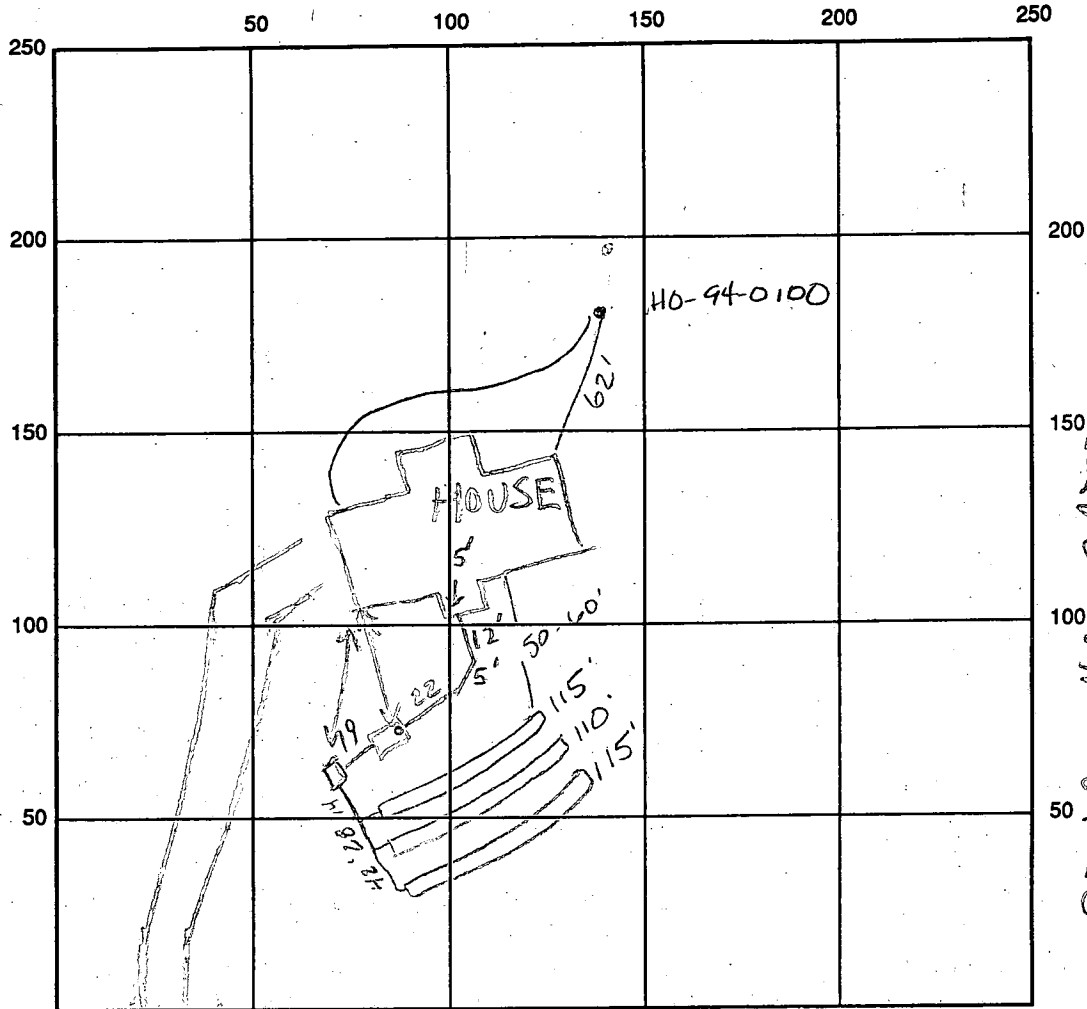
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

BUDG. PERMIT SIGNED  
AND RETURNED 5-28-97  
Serial # BR105902

*detached gazebos*

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

A  
43419



BRIGHTON CT INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL OK 1250 gal CLEANOUTS S.T. - OK

DISTRIBUTION BOX LEVEL OK - BAFFLE IN

DRAIN FIELD/TITLE DEPTH 4.5 FT. TRENCH WIDTH 3' FT. INLET DEPTH 3' FT.

EFFECTIVE GRAVEL DEPTH 1.5 FT. TOTAL LENGTH  $\frac{0115}{0110} = 340$  linear FT.

NUMBER OF TRENCHES 3 ONE-SIDEWALL/BOTTOM AREA 1020 SQ. FT.  $\frac{340}{1020}$

DRYWALL INSIDE DIAMETER      FT. EFFECTIVE DEPTH BELOW INLET      FT.

ABSORBENT AREA      SQ. FT.

REMARKS: 12/6/94 OK TO COVER S.T.; SPECS REVISED TO SHALLOW SYSTEM DUE TO ROCK @ 8-9' @ S.T. HOLE

12-7-94 OK to cover all work final sum

DATE SYSTEM APPROVED 12-7-94 INSPECTOR Amy McMillen

# APPLICATION

PERCOLATION TESTING

A 4399

P \_\_\_\_\_

R \_\_\_\_\_

DISTRICT \_\_\_\_\_

DATE 12/19/88

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

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 Oakton Associates, Inc. *REGENCY DEVEL. Group Inc*

ADDRESS 1200 18th Street, NW, Washington, DC 20036 PHONE (202) 457-8637

PROSPECTIVE BUYER Anchor Capital Group

ADDRESS 133 Defense Highway, Suite 206 PHONE (301) 261-8727  
Annapolis, MD 21401

PROPERTY LOCATION:

SUBDIVISION Cabin Branch Farm LOT NO. 4339

ROAD AND DESCRIPTION Rte 94 (Ellicott Road) Approximately 2 miles North East  
from Damascus Road (3200 Brighton Court)

TAX MAP 13 PARCEL # 42

SIZE OF LOT 3 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. James Hanna  
(SIGNATURE OF APPLICANT)

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

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

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

REASONS FOR REJECTION OR HOLDING 4/24/89 - Perc OK BUT HOUSE SITE WOULD BE

& MAY BE LOTS MUST BE CHANGED

BLDG. PERMIT SIGNED  
AND RETURNED 5/24/89  
Serial # 57362 -  
SFD - Hanna

HD-216

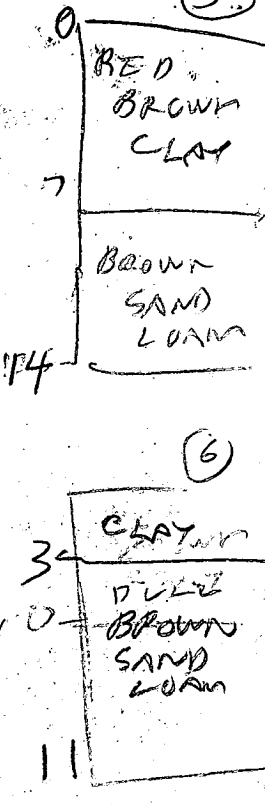
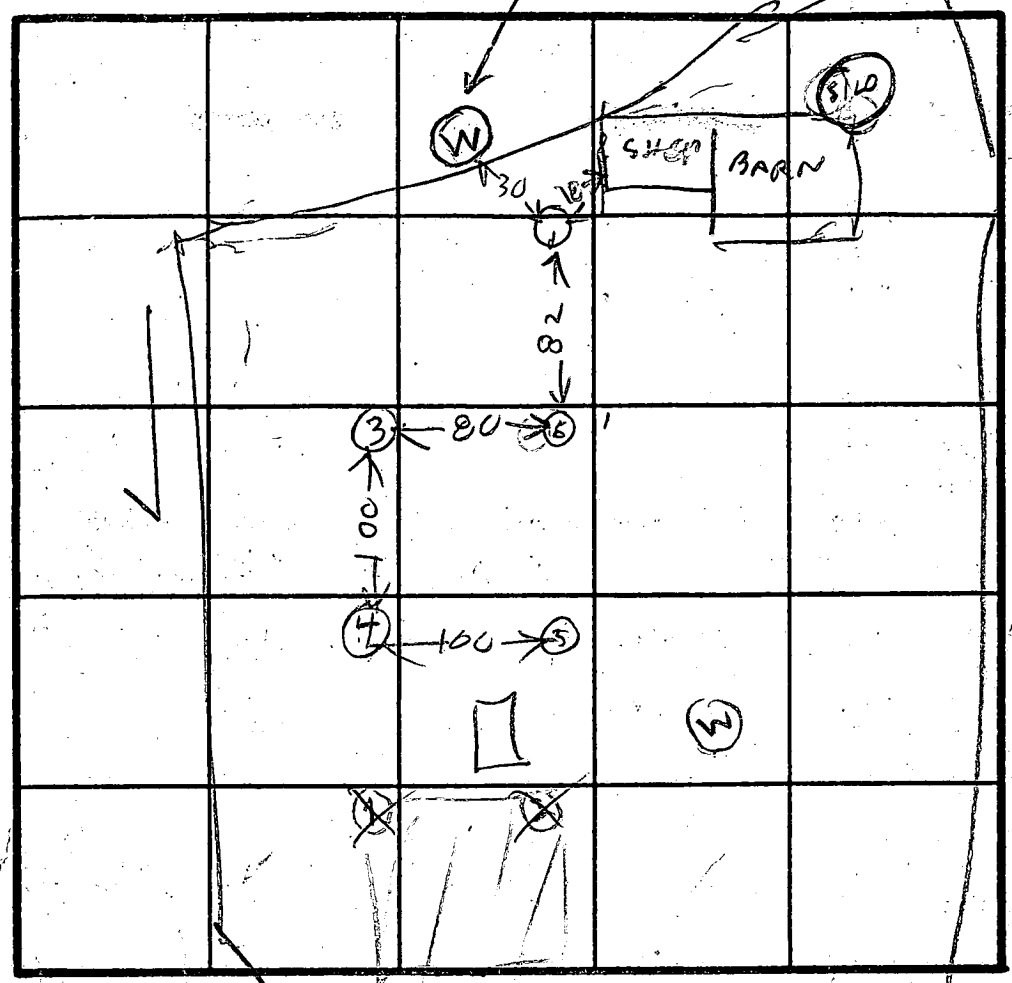
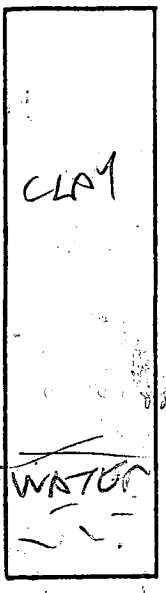
# THIS IS NOT A PERMIT

43 419  
43 419

EXISTING WELLS

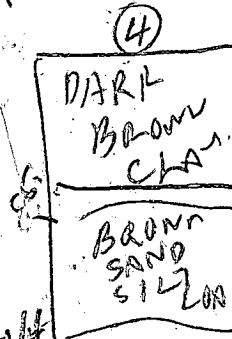
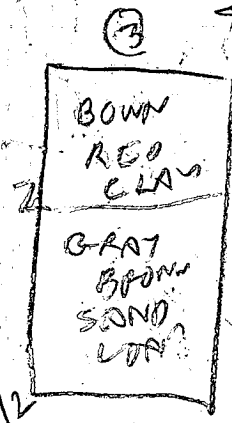
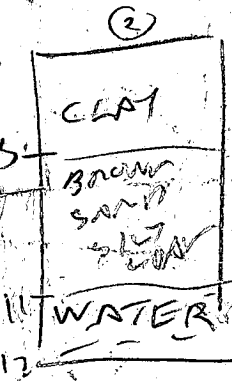
(5)

SOIL PROFILE



INLET 4' X 12 MIN

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE



DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/24/89	1V	9	WATER	7 F 7	(FAIL)		
4/24/89	2V	12	WATER	11 F 7	(FAIL)		
4/26/89	3S 3D	3.5 6	241 242	310 3:00	3:00	3:10	10
4/26/89	3V	14 1/2	OK	Deep Trench			
	4S	5	246	310	LITTLE NOEC		
	4V	14.5	OK	DEEP			
	5S	4.5	249	310	1st inch 21 min		
	5V	11.5	OK	DEEP Trench			
	6S	4	315	325	325	340	15
	6D	7.5	316	320	320	326	6
	6V	11	OK	Deep Trench			
	4ES	6	322	329	327	336	8
	5ES	6.5	320	334	334	342	8

REMARKS: Hole (10) Per Test Plant Hole (3)(4)(5)(6) deg different

TYPE OF SOIL \_\_\_\_\_  
TESTED BY R J Hodger ALSO PRESENT Jim James Jeff

B 1 03927

SEQUENCE NO. (DP USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL

STATE PERMIT NUMBER

H0-92-0255

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

please print or type

fill in this form completely

Date Received (APA)

090392

OWNER INFORMATION

FRANK DEVELOPERS

15 Last Name 13 Owner 34 First Name

AGX 6519

36 Street or RFD 55

MT AIRY MD 2171

57 Town 70 State 72 Zip 76

DRILLER INFORMATION

Joseph L. Mayne

Driller's Name

288

77 License No. 80

Joseph L. Mayne Well Drilling

Firm Name

5512 Ridge Rd. Mt. Airy 2171

Address

Joseph L. Mayne 9/2/92

Signature

Date

B 3

LOCATION OF WELL

HOWARD

8 COUNTY 21

CAPIN ARANCA FARM

23 SUBDIVISION 42

SECTION 44 46

LOT 39 48 50

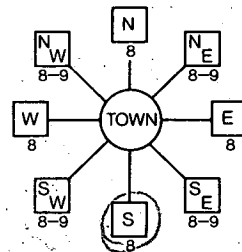
LISRON

52 NEAREST TOWN 71

MILES FROM TOWN (enter 0 if in town) 4 MI 73 76 77 78

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Brighton Ct. NEAR WHAT ROAD 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



11/93 Log Let'd & Destroyed 34 200 37

DISTANCE FROM ROAD ENTER FT or MI FA 38 39

B 2

WELL INFORMATION

APPROX. PUMPING RATE (GAL PER MIN) 5

AVERAGE DAILY QUANTITY NEEDED (GAL PER DAY) 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
F FARMING LIVESOCK 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)
TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard COUNTY NAME A 43419 COUNTY NO.

STATE SIGNATURE DATE ISSUED INSERT S

112592 CO SIGNATURE 5/25/93 EXP. DATE

NORTH GRID 531000 EAST GRID 0967000

APPROXIMATE DEPTH OF WELL 50 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST

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)

Not to be filled in by driller (OEP USE ONLY)

APPROX. PERMIT NUMBER GAP DS FEB-3

FORCE RP WRITE INITIALS IN BOX PERMIT No. H0-92-0255

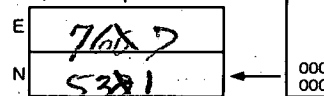
SPECIAL CONDITIONS

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

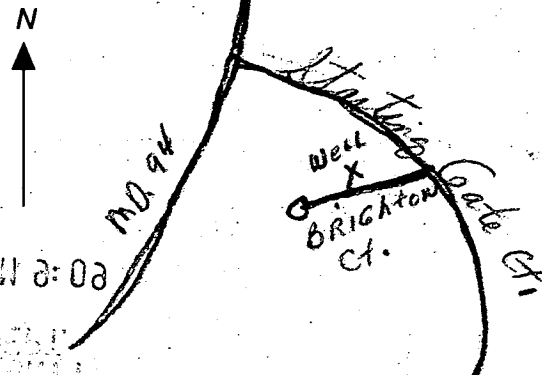
SOURCES OF DRILLING WATER

- 1. Well
2.
3.

WRITE THE BOX NUMBER FROM THE MAP HERE



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



C1 5187

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

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

ST/GO USE ONLY DATE Received

DATE WELL COMPLETED

Depth of Well (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL"

OWNER last name first name TOWN 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. Rows include Overburden, Soft Shale, and Gray Rock.

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL CEMENT BENTONITE CLAY NO. OF BAGS NO. OF POUNDS

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

CASING RECORD casing types insert appropriate code below MAIN CASING TYPE Nominal diameter top (main) casing Total depth of main casing

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

SCREEN RECORD screen type or open hole insert appropriate code below

DEPTH (nearest ft.) HO 65 225

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.

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)

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 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)

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 X  
Replacement \_\_\_\_\_  
Name of Installer G. Edgar Harr Sons' Corp. Telephone 252-4588  
License Number PI0098  
Certified Well Pump Installer X Well Driller \_\_\_\_\_ Registered Plumber \_\_\_\_\_  
Name of Property Owner Regency Development Telephone 573-5764  
Subdivision Cabin Branch Lot # 39 Well Tag # HO -94 - 0100  
Site Address 3200 Brighton Court

Pump Motor Pitless Adapter  
1. Type 1. Horsepower 1/2 1. Make Campbell  
a. Deep well jet \_\_\_\_\_ 2. RPM \_\_\_\_\_ 2. Model # \_\_\_\_\_  
b. Shallow well jet \_\_\_\_\_ 3. Voltage \_\_\_\_\_ 3. Depth 48"  
c. Submersible x a. 110 \_\_\_\_\_  
2. Make Morris b. 220 x  
3. Model # S50FM2-5-3  
4. Capacity 5 GPM  
5. Pump exceeds well capacity Yes \_\_\_\_\_ No x  
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 x Other \_\_\_\_\_

Tank Piping Well data  
1. Capacity 12 gal 1. Type Poly 160psi 1. Depth 225 ft.  
2. Pressure relief valve? yes 2. Size 1" 2. Yield 9 GPM  
3. NSF and/or BOCA Code approved yes 3. Static water level 30 ft.  
4. Depth of supply line 48" 4. Will water supply be disinfected by installer? yes

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: 11/16/94

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

**Environmental Testing Lab, Inc.**

1993 Moreland Parkway, #203  
Annapolis, Maryland 21401  
1-800-222-4833

No 94 0100

37

State Certified Water Quality Laboratory  
Certification #106

Regency Development  
P.O. Box 618  
Riva, MD 21140  
ATTN: Greg Rice

01/20/95

CASE#: 950116

RE: 3200 Brighton Court, Lot 39  
Woodbine, MD 21797

DATE COLLECTED: 01/19/95  
DATE TESTED: 01/19/95

**BACTERIOLOGICAL TEST RESULTS**  
ONPG MMO-MUG Determination  
Standard Method 9223 A  
Presence-Absence

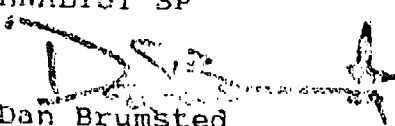
Results: ✓ PASSED, coliform bacteria absent.

This sample was collected and delivered to this laboratory  
by a state certified technician.

The sample tested negative for chlorine.

No coliform bacteria were found using the ONPG MMO-MUG  
Determination test as prescribed by the State of Maryland  
Health Department.

TECHNICIAN: G. Turlington  
CERTIFICATION #: 92-552  
ANALYST SP

  
Dan Brumsted  
Laboratory Director

11/10/94

11/10/94  
Permit  
C. KO  
20K

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

LIVE

New Installation \_\_\_\_\_  
Replacement \_\_\_\_\_

Receipt # -0-  
Date 11/10/94

Name of Installer HARR

Telephone \_\_\_\_\_

License Number \_\_\_\_\_  
Certified Well Pump Installer \_\_\_\_\_ Well Driller  Registered Plumber \_\_\_\_\_

Name of Property Owner \_\_\_\_\_ Telephone \_\_\_\_\_  
Subdivision CABIN BRANCH Lot # 39 Well Tag # HO - 94 - 0100  
Site Address 3200 BRIGHTON CT

Pump

- Type
  - Deep well jet \_\_\_\_\_
  - Shallow well jet \_\_\_\_\_
  - Submersible \_\_\_\_\_
- Make \_\_\_\_\_
- Model # \_\_\_\_\_
- Capacity \_\_\_\_\_ 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 \_\_\_\_\_
- RPM \_\_\_\_\_
- Voltage \_\_\_\_\_
  - 110 \_\_\_\_\_
  - 220 \_\_\_\_\_

Pitless Adapter

- Make \_\_\_\_\_
- Model # \_\_\_\_\_
- Depth \_\_\_\_\_

Tank

- Capacity \_\_\_\_\_
- Pressure relief valve? \_\_\_\_\_

Piping

- Type \_\_\_\_\_
- Size \_\_\_\_\_
- NSF and/or BOCA Code approved \_\_\_\_\_
- Depth of supply line \_\_\_\_\_

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: \_\_\_\_\_

Date: \_\_\_\_\_

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

Note: 11/10 (all covered except for water well)  
(2) ok as seen on well casing CBR

Lot 42  
E.O.A. EASEMENT FOR EQUESTRIAN TRAILS 6' MIN. WIDTH TRAIL  
RESTRICTION LINE

A4342

Lot 8  
A4338

LOT 38  
3.06 Ac.±

Lot 41

Lot 40

MATCH

LINE

SEE NOTE THIS SHEET

LOT 39  
3.06 Ac.±

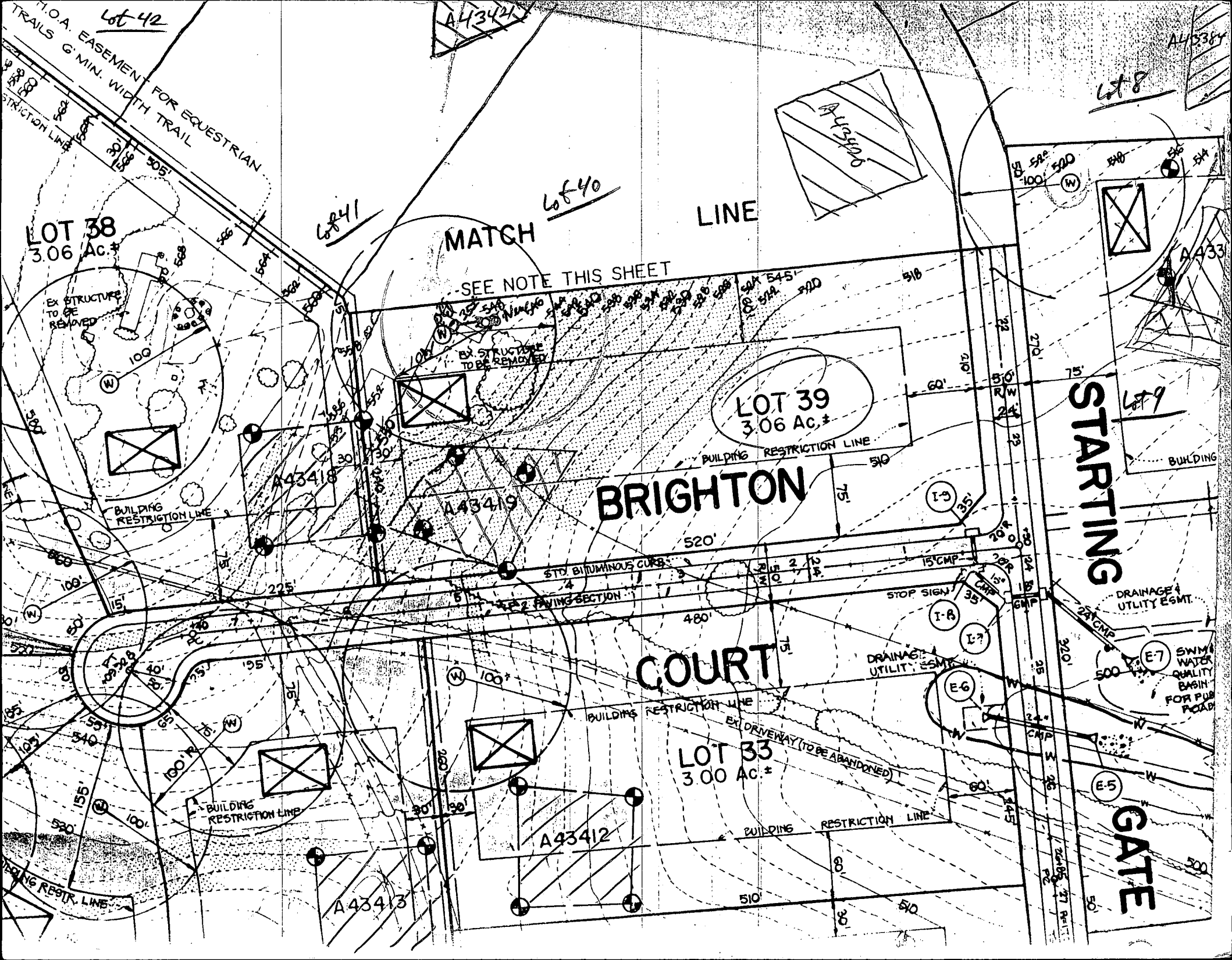
Lot 9  
STARTING

BRIGHTON

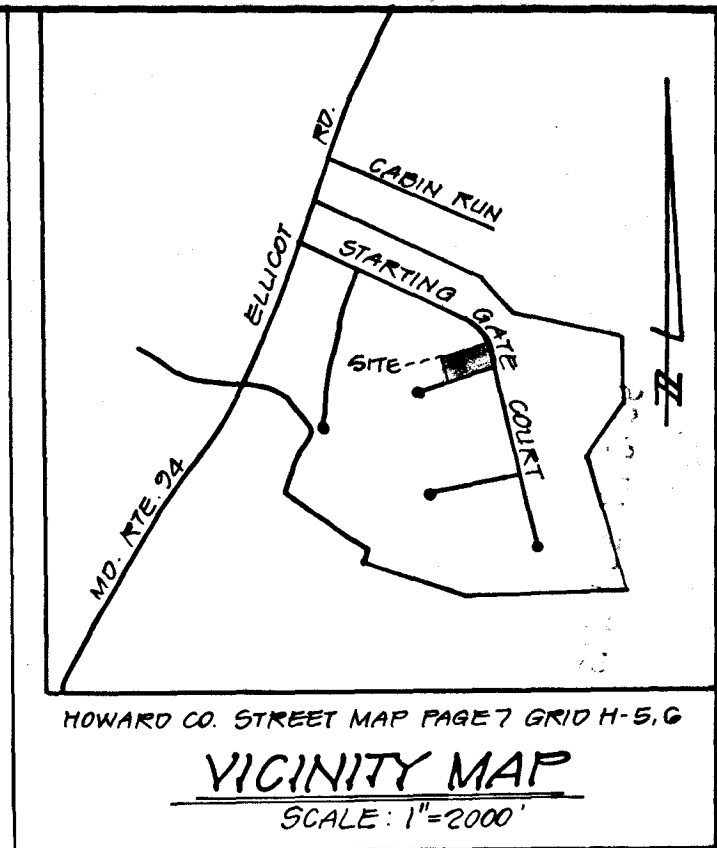
COURT

LOT 33  
3.00 Ac.±

GATE



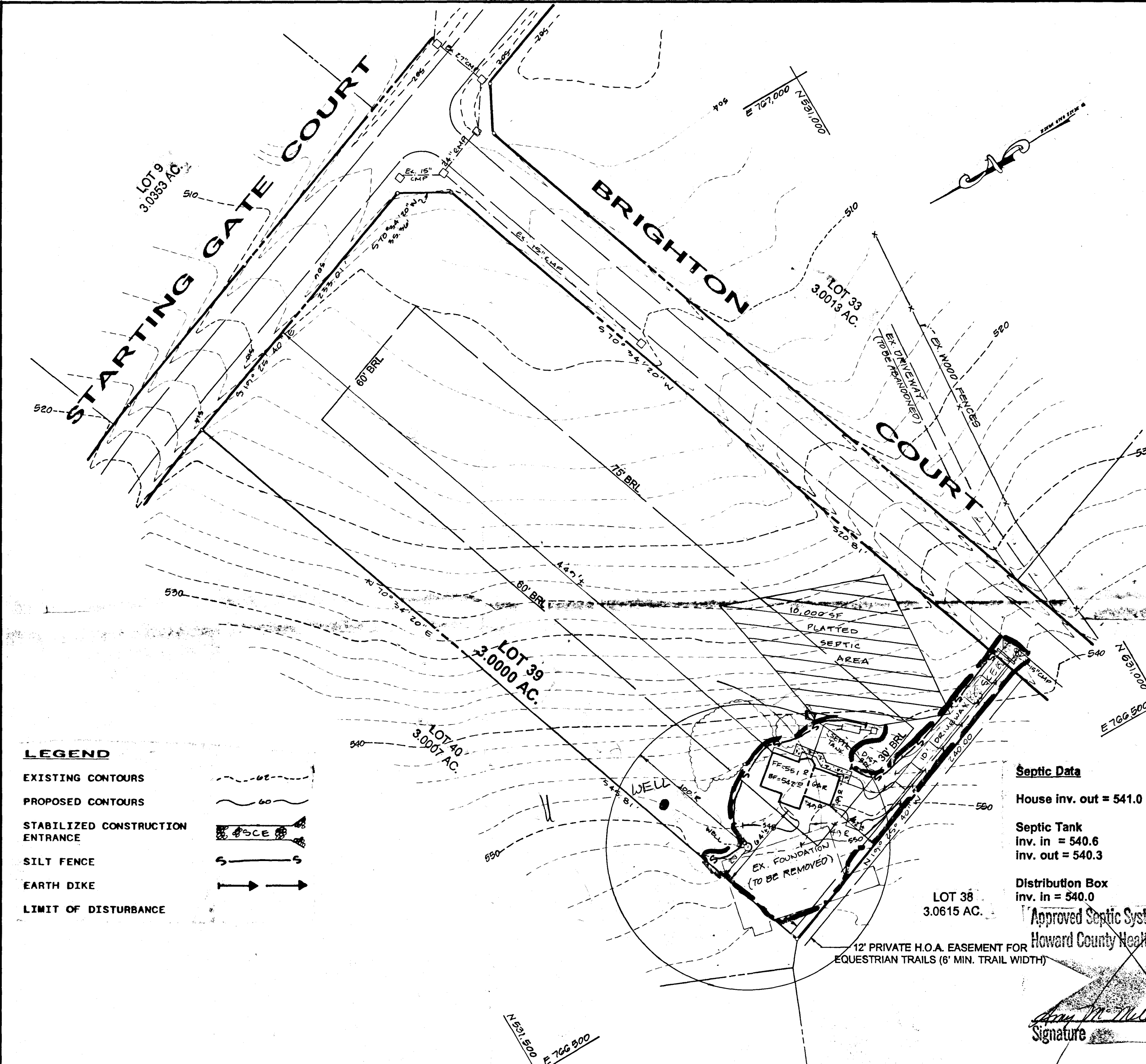




PRELIMINARY PLAN  
PERCOLATION TEST DATA

NEW LOT NO.	OLD LOT NO.	AVERAGE PERC. TIME IN MINUTES PER SECOND INCH	MAX. DEPTH PERMITTED FOR EFFLUENT PIPE TO ENTER SEWAGE DISPOSAL AREA AT ITS HIGHEST ELEV. WITH REFERENCE TO EX. GRADE AT TIME OF PERC. TEST
39	43	12 MINUTES	INLET DEPTH 4.0'

APPROVED FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS, HOWARD COUNTY HEALTH DEPARTMENT  
9/21/89



- LEGEND**
- EXISTING CONTOURS
  - PROPOSED CONTOURS
  - STABILIZED CONSTRUCTION ENTRANCE
  - SILT FENCE
  - EARTH DIKE
  - LIMIT OF DISTURBANCE

**Septic Data**

House inv. out = 541.0

Septic Tank  
inv. in = 540.6  
inv. out = 540.3

Distribution Box  
inv. in = 540.0

**NOTE:** SEPTIC SYSTEM TO BE DESIGNED AND CONSTRUCTED UNDER HOWARD COUNTY HEALTH DEPT GUIDELINES ISSUED AT RELEASE OF THE BUILDING PERMIT. LIMIT OF DISTURBANCE FOR SEPTIC AREA TO BE DETERMINED BASED ON FINAL SEPTIC DESIGN. SILT FENCE TO BE INSTALLED ALONG LOWER PERIMETER OF THIS LIMIT OF DISTURBANCE.

MAINTAIN 1-2% GRADE PRIOR TO SEPTIC TANK.

Approved Septic System Plan  
Howard County Health Department

*Ann M. McLean*  
Signature Date

**OWNER / DEVELOPER**  
REGENCY DEVELOPMENT GROUP INC.  
2444 SOLOMONS ISLAND ROAD  
ANNAPOLIS, MARYLAND 21401  
PHONE NO. (410) 573-5764

**SITE, GRADING, SEDIMENT AND EROSION CONTROL PLAN**  
**LOT 39**  
**CABIN BRANCH FARM**  
TAX MAP 13 PARCEL 42  
RP# 10476 (9/1/92)  
FOURTH ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND  
ZONED R (RURAL) MARCH, 1994  
SCALE: 1" = 50' SHEET 1 OF 2

**THE TECH GROUP, INC.**  
147 Old Solomons Island Road  
4th Floor  
Annapolis, Maryland 21401  
ph. (410) 266-3033  
Fax (410) 266-7407

ENGINEERS • PLANNERS • SURVEYORS  
GEOTECHNICAL • ENVIRONMENTAL  
MATERIALS CONSULTANTS • FACILITIES



BRIGHTON

COURT

MAY 16 '94 14:48

5/28/97 WALK THROUGH BLOWN PERMIT  
 FOR DECK/GAZEBO, HEALTH DEPT.  
 RECORDS INDICATE WELL FURTHER  
 FROM FRONT LOT LINE, AND NOT  
 INTERFERING WITH PROPOSAL,  
 OK TO PROCEED, SEE NOTE BELOW. *Richard R.S.*

*Richard Keller* AGREE TO  
 MAINTAIN 30' DISTANCE FROM WELL

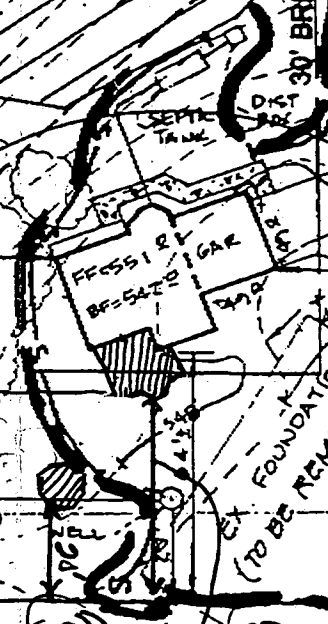
75' BRL

60' BRL

LOT 39  
3.0000 AC.

LOT 40

10,000 SF  
PLATTED  
SEPTIC  
AREA



10' DRIVEWAY SEE PLAN

240.90

N 19° 25' 40" W

560

12' PRIVATE EQUESTRIAN

N 53

S 80° 15' 00" W

12' PRIVATE EQUESTRIAN

ABANDONED

EX. 15' CURB

EX. 15' CURB

S 70° 34' 20" W

S 70° 34' 20" W

N 55° 10' 20" W

N 55° 10' 20" W

N 55° 10' 20" W

N 70° 34' 20" E

S 70° 34' 20" E

N 25° 21' 55" E

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