

1/5/94
Noon

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

04-354230

P 50427F

A 43432

DISTRICT 4th

DATE 12/5/94

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~461-9933~~ 313-2640

DATE SYSTEM APPROVED 11/15/94

INSPECTOR DKS

INDEXED

Jack Fyock septic Service

IS PERMITTED TO INSTALL ALTER

ADDRESS _____ PHONE 988-9270

SUBDIVISION Cabin Branch Farm LOT 51 ROAD 3226 Hayloft Court

PROPERTY OWNER JAMES M. Smola Regency Development Group, Inc.

ADDRESS **BUILDING PERMIT SIGNED**

SEPTIC TANK CAPACITY 1000 GALLONS **AND RETURNED**
9-3-03 800143818 - LP TANK

NUMBER OF BEDROOMS 3

OLD PERMIT SIGNED
AND RETURNED 4-1-99
Serial # B00 116987
Sumner

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 180

TRENCHES - Trench to be 3 feet wide. Inlet ^{2.5} 1 1/2 feet below original grade. Bottom maximum 4.5 depth 3 1/2 feet below original grade. Effective area begins at 1 1/2 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Starting from the lot corner at the end of the flag-stem, place the distribution box 250 feet down the front (580') lot line and 45 feet off this same lot line.

Run trenches on contour ~~in both directions.~~

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 3/23/94 DKS

PLANS APPROVED BY Mark Rifkin DATE 3/18/94

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

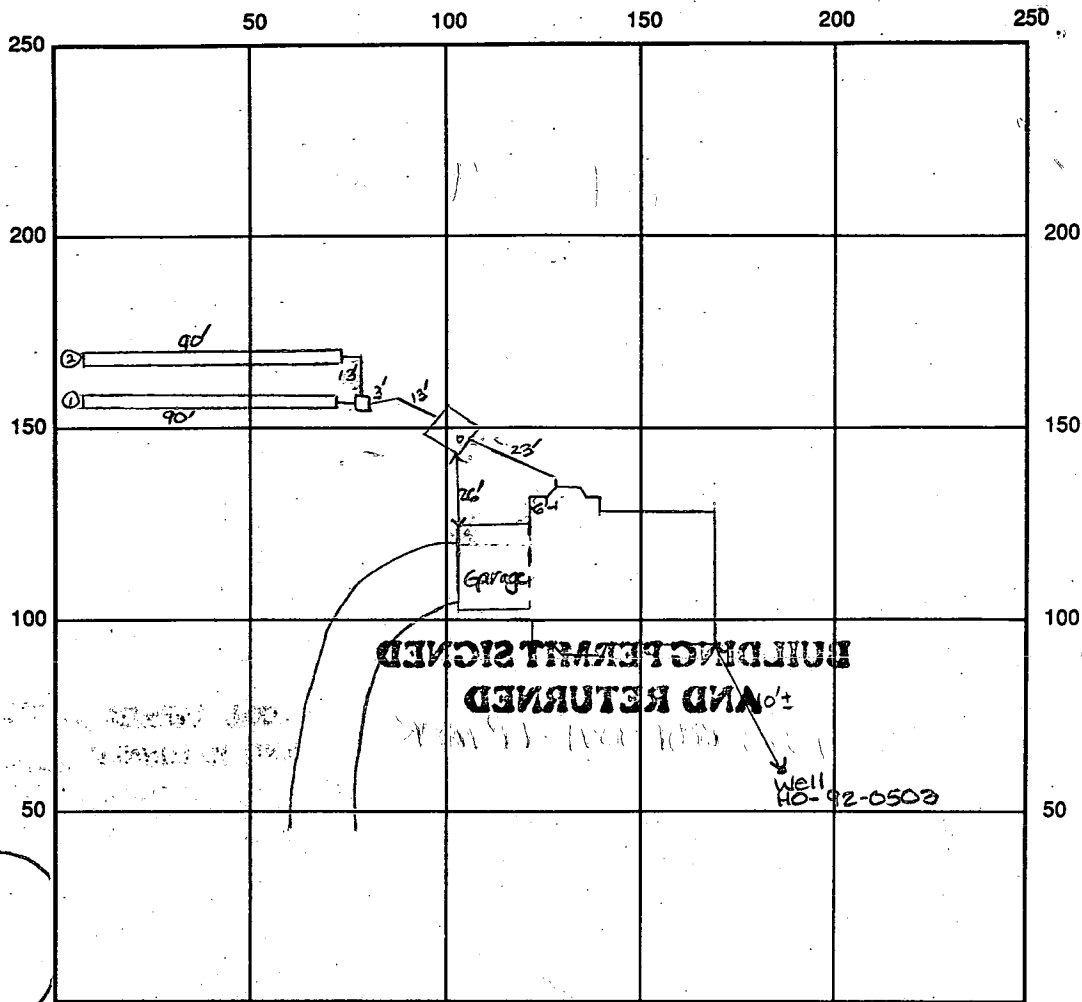
OLD PERMIT SIGNED
AND RETURNED 4/8/97
Serial # B00 105016

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. detached garage

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

A
43432



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL OK - 1000 gal CLEANOUTS one on s.t.

DISTRIBUTION BOX LEVEL OK - baffle in

DRAIN FIELD/TITLE DEPTH 4.5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 2.5 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH ① 90' FT. → 180' total

NUMBER OF TRENCHES 2 ~~ONE SIDE~~ / BOTTOM AREA 540 SQ. FT.

DRYWALL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA 540 SQ. FT.

REMARKS: 11/15/94 PM. OK to continue. DKS

11/15/94 later final - OK to cover all work. DKS

DATE SYSTEM APPROVED 11/15/94

INSPECTOR Sonnet Joe

APPLICATION

PERCOLATION TESTING

A 43432

P _____

DISTRICT R

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

ADDRESS 1200 18th Street, NW, Washington, DC 20036 PHONE 529-5784 (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. 56 51

ROAD AND DESCRIPTION Rte 94 (Ellicott Road) Approximately 2 miles North East
from Damascus Road (3226 Hayloft 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 4/18/89 Perc OK But lot line
must be changed B.H. BLDG. PERMIT SIGNED
AND RETURNED 3/18/94
Serial # 63929
SFD - 3 Bems

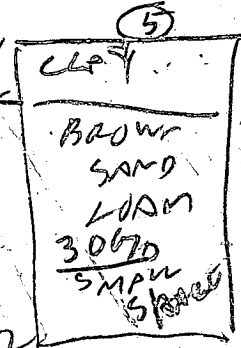
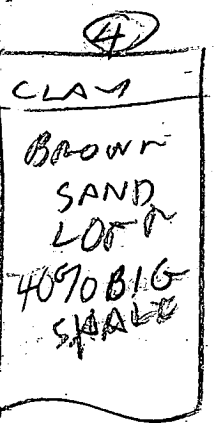
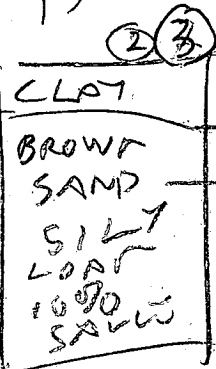
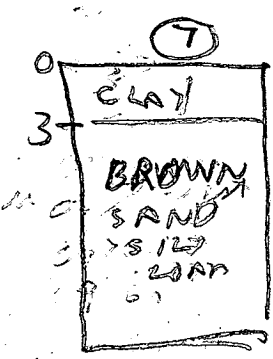
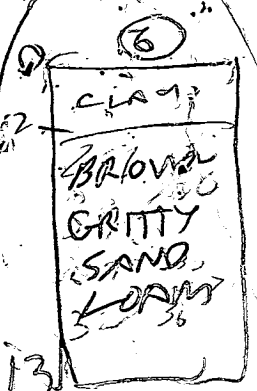
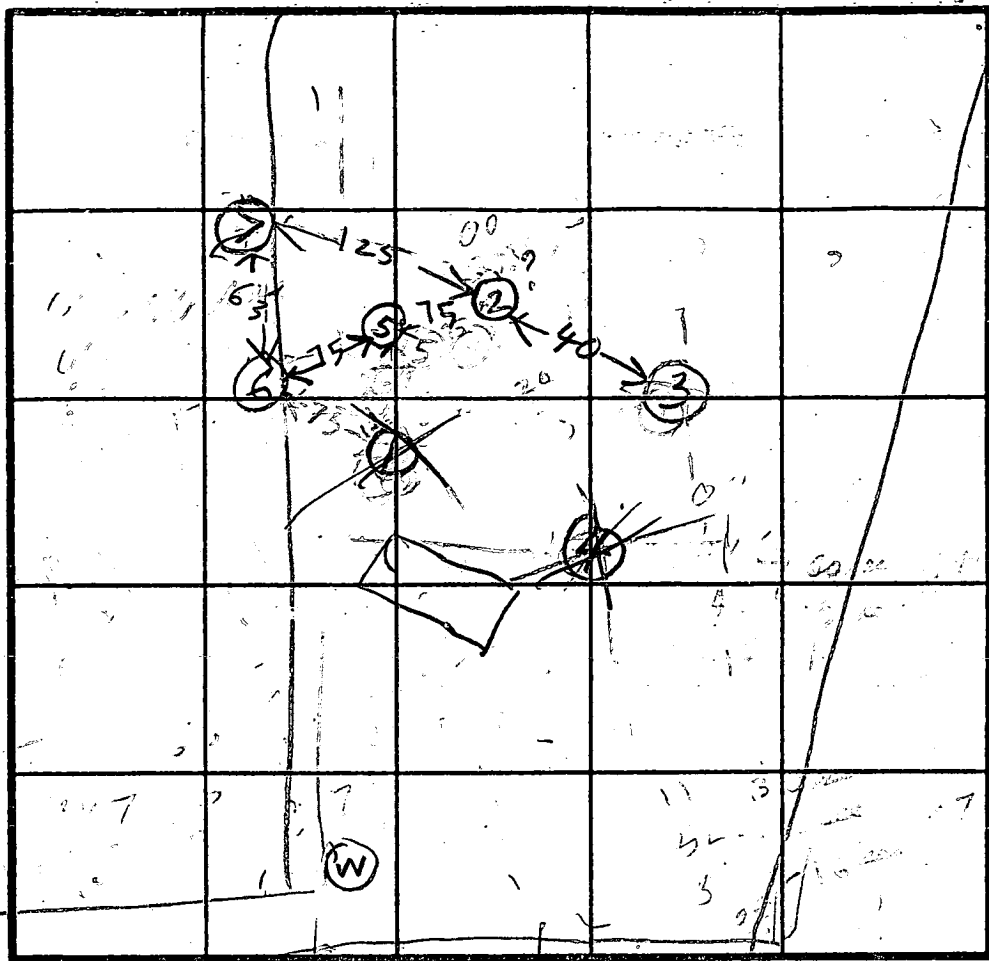
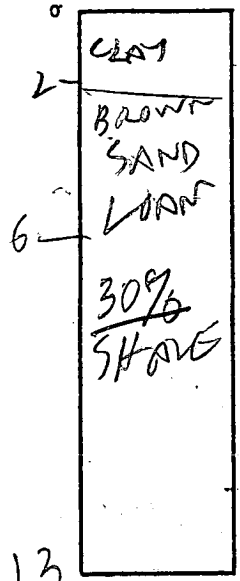
HD-216

THIS IS NOT A PERMIT

Lot 56
A 43432

25
5

SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

39 INCHES
X 3 MIN

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/10/69	15	3	1212	1st inch	30 sec	2nd inch	60 sec
	15 Reprun	3	1214	1st inch	60 sec	2nd inch	125 sec
	15	8	1220	1st inch	40 sec	2nd inch	90 sec
	15 Reprun	8	1223	1st inch	30 sec	2nd inch	76 sec
	(13)		FALL	TOO FAST	SHALE		
	25	4	1230	1st inch	37 sec	2nd	77 sec
	25 Reprun	4	1233	1235	1235	1239	33 min
	25	13.5	OK				
	3V	13	OK				
	43	3	1242	1st inch	35 sec	2nd inch	44 sec
	43 Reprun	3	1245	1st	60 sec	nd	77 sec
	43	7	100	1st inch	5 sec		
	43	13	FALL	TOO FAST	SHALE		
	5S	4	145	146	146	149	3
	5V	12	OK				
6S	4.5	150	150	152	157	5	
6V	13	OK					
7S	4	257	200	200	208	8	
7V	13	OK					

REMARKS

TYPE OF SOIL

TESTED BY

R. HADLEY

ALSO PRESENT

KENNY BRUCKER
ROCKY BRUCKER
JIM BRUCKER

3/7/94
1:30

APPLICATION

HEALTH DEPT
PERCOLATION TESTING
REQUESTS

REVALIDATION

NO 866

(CW)

T651

A 43432

P _____

DISTRICT 4

DATE 2-24-94

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

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 Regency Development Group Inc %o Gregg Rice

ADDRESS P.O. Box 618, Piva, Md 21140 PHONE 410-573-5764

Permit
AGENT OR PROSPECTIVE BUYER BPS Inc - Pat Onla

ADDRESS 9533 Below Rd Suite #201, Pkto, Md 21236 PHONE 410-529-8383

PROPERTY LOCATION:

SUBDIVISION Cabin Branch Farm LOT NO. 51

ROAD AND DESCRIPTION 3226 Hayloft Ct

TAX MAP 13 PARCEL # 42

SIZE OF LOT 3.9/165 ac 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. [Signature]
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING PERC OK - NO PLAT REQ'D MR 3/6/94

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

COUNTY #

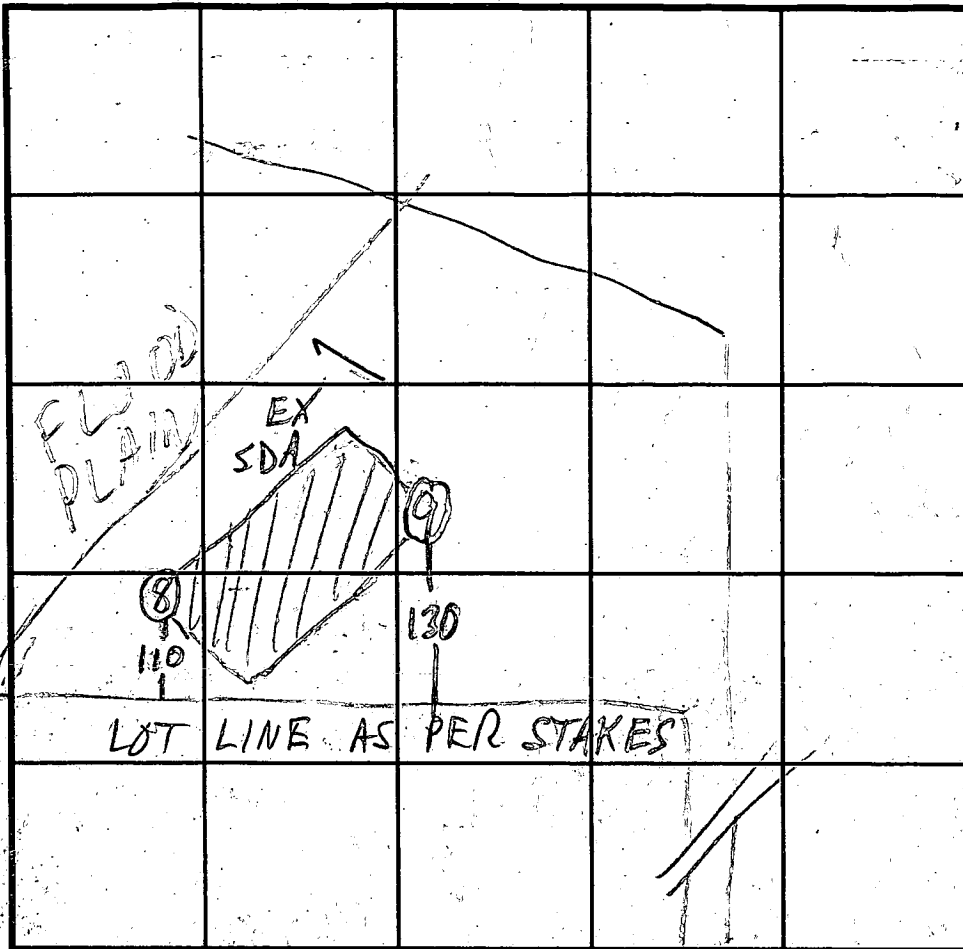
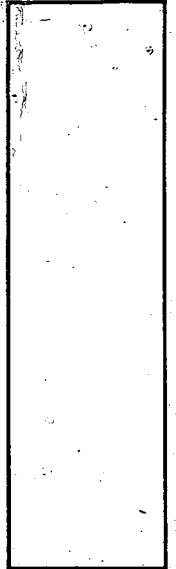
SOIL PROFILE

0'



SOIL PROFILE

0'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

HAYLOFT CT

6 1/2

brn
sa cl
cl lm

brn
red
st lm
5% frags

12

9

red brn
sa cl lm
15% frags
brn sa
loam
25%
small
structure
frags

2

12

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
3/1/94	8 S	5 6	11:38 11:57	11:42 11:59	3/4" x 3/4" REDIG 1/2" REDIG	12:06	12:12	6
	8 V	6-9" 12	see	profile		12:06		
	9 S	4 1/2	12:30:30				12:31:00	FAST
	9		12:32:15	12:32:40	12:32:40	12:33:00		20 sec
			12:32:25	12:33:00	12:33:50	12:34:15		25 sec
			12:34:50	12:35:15	12:35:15	12:35:45		30 sec
			12:36:30	12:36:55	12:36:55	12:37:30		35 sec
	9 V	12						

REMARKS

TYPE OF SOIL

TESTED BY M. Rifkin

ALSO PRESENT G. Rice, Fyock crew

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

TRENCH WIDTH 3

INLET DEPTH 1 1/2

MAXIMUM BOTTOM DEPTH 3 1/2

SQ. FT/BEDROOM 180

C1 8791

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.

COUNTY NUMBER A 43 93 2

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

DATE Received grid

DATE WELL COMPLETED grid: 123093

Depth of Well grid: 2200 (TO NEAREST FOOT)

PERMIT NO. grid: 40-92-0503

OWNER DEVELOPMENT AGENCY last name HAYLOF first name CT TOWN LISBON SUBDIVISION CABIN BRANCH FARMS SECTION LOT 5-1

WELL LOG table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Entry: Overburden Blue Slate, 0-25, 25-200, X

GROUTING RECORD: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL: CEMENT (CM), BENTONITE CLAY (BC), NO. OF BAGS: 7, NO. OF POUNDS: 100, GALLONS OF WATER: 42, DEPTH OF GROUT SEAL: 0-30 ft.

CASING RECORD: casing types insert appropriate code below. Selections: ST (STEEL), CO (CONCRETE), PL (PLASTIC), OT (OTHER).

MAIN CASING TYPE: ST, Nominal diameter top (main) casing: 6, Total depth of main casing: 30.

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

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

DEPTH (nearest ft.) grid: 1: 140, 30, 200; 2: ; 3: ; SLOT SIZE 1-2-3; DIAMETER OF SCREEN: (NEAREST INCH) grid.

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...

DRILLERS IDENT. NO. [Signature] DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) [Signature] 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.) 70, 72, WQ 74, 75, 76, TELESCOPE CASING, LOG INDICATOR, OTHER DATA

PUMPING TEST: HOURS PUMPED (nearest hour) 3, PUMPING RATE (gal. per min. to nearest gal.) 17, METHOD USED TO MEASURE PUMPING RATE: Submersible, WATER LEVEL (distance from land surface) BEFORE PUMPING 30, WHEN PUMPING 27, TYPE OF PUMP USED (for test) S submersible

PUMP INSTALLED: DRILLER WILL INSTALL PUMP YES (NO), TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE: S, CAPACITY: GALLONS PER MINUTE (to nearest gallon) grid, PUMP HORSE POWER grid, PUMP COLUMN LENGTH (nearest ft.) grid, CASING HEIGHT (circle appropriate box and enter casing height) + above, LAND SURFACE (nearest foot) 1

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)

NO MAP AVAILABLE

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

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation Replacement _____
Receipt # _____
Date 11-16-94
Name of Installer G. Edgar Harr Sons' Corp. Telephone 252-4588
License Number PI0098
Certified Well Pump Installer Well Driller _____ Registered Plumber _____
Name of Property Owner Regency Development Telephone 573-5764
Subdivision Cabin Branch Lot # 51 Well Tag # HO - 92 - 0503
Site Address 3226 Hayloft Court

Pump Motor Pitless Adapter
1. Type 1. Horsepower 1/3 1. Make Campbell
a. Deep well jet _____ 2. RPM _____ 2. Model # _____
b. Shallow well jet _____ 3. Voltage _____ 3. Depth 48"
c. Submersible a. 110 _____
2. Make Morris b. 220
3. Model # S33FM2-5-3
4. Capacity 5 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 _____

Tank Piping Well data
1. Capacity 12 gal 1. Type Poly 160psi 1. Depth 200 ft.
2. Pressure relief valve? yes 2. Size 1" 2. Yield 20 GPM
3. NSF and/or BOCA Code approved Y 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: *Harold Cabin*

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.

11/10/94

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

11/10/94
Chel
OK
See below

APPLICATION FOR PITLESS ADAPTER WELL PUMP AND PRESSURE TANK INSTALLATION
LINE

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 # 51 Well Tag # H0 - 92 - 0503

Site Address 3226 HAYLOFT 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: _____

GREEN

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

11/10/94 all covered except @ water well
G.M. ok on pitless adapter & casing & line Chel
with 10 well SINKY

LOT 48
3.0538 AC.

LOT 49
3.0634 AC.

LOT 50
3.1914 AC.

LOT 51
3.9165 AC.

LOT 60

25' PRIVATE H.O.A. ESMT
FOR EQUESTRIAN TRAILS
(6' MIN. TRAIL WIDTH)

HUGH OTTO DEFRIES
L. 444
F. 656

*Test Hubs
Drawn from
from original
and field
Notes of
J.R.H.*

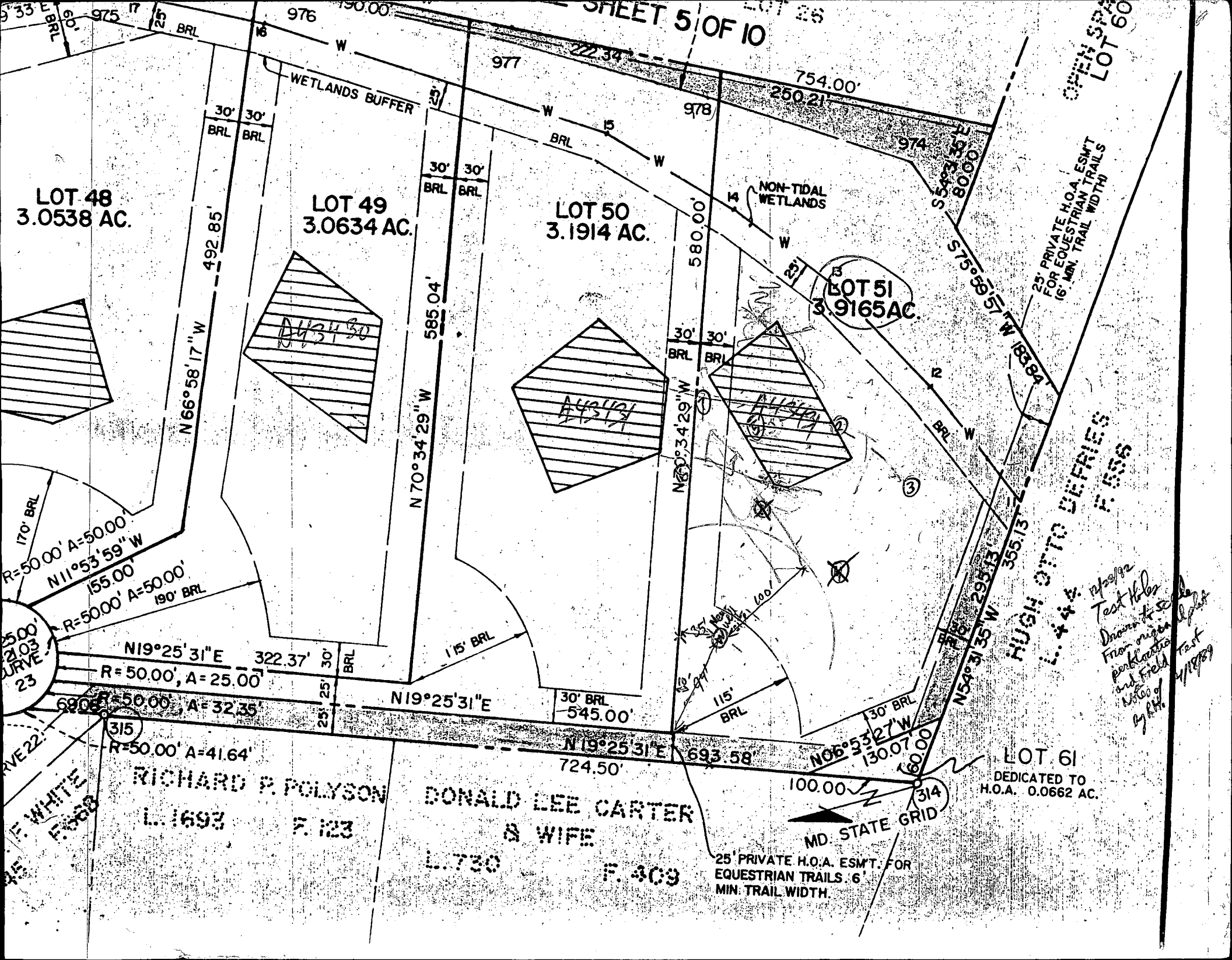
LOT 61
DEDICATED TO
H.O.A. 0.0662 AC.

DONALD LEE CARTER
& WIFE
L. 730
F. 309

RICHARD P. POLYSON
L. 1693
F. 123

25' PRIVATE H.O.A. ESMT. FOR
EQUESTRIAN TRAILS .6'
MIN. TRAIL WIDTH.

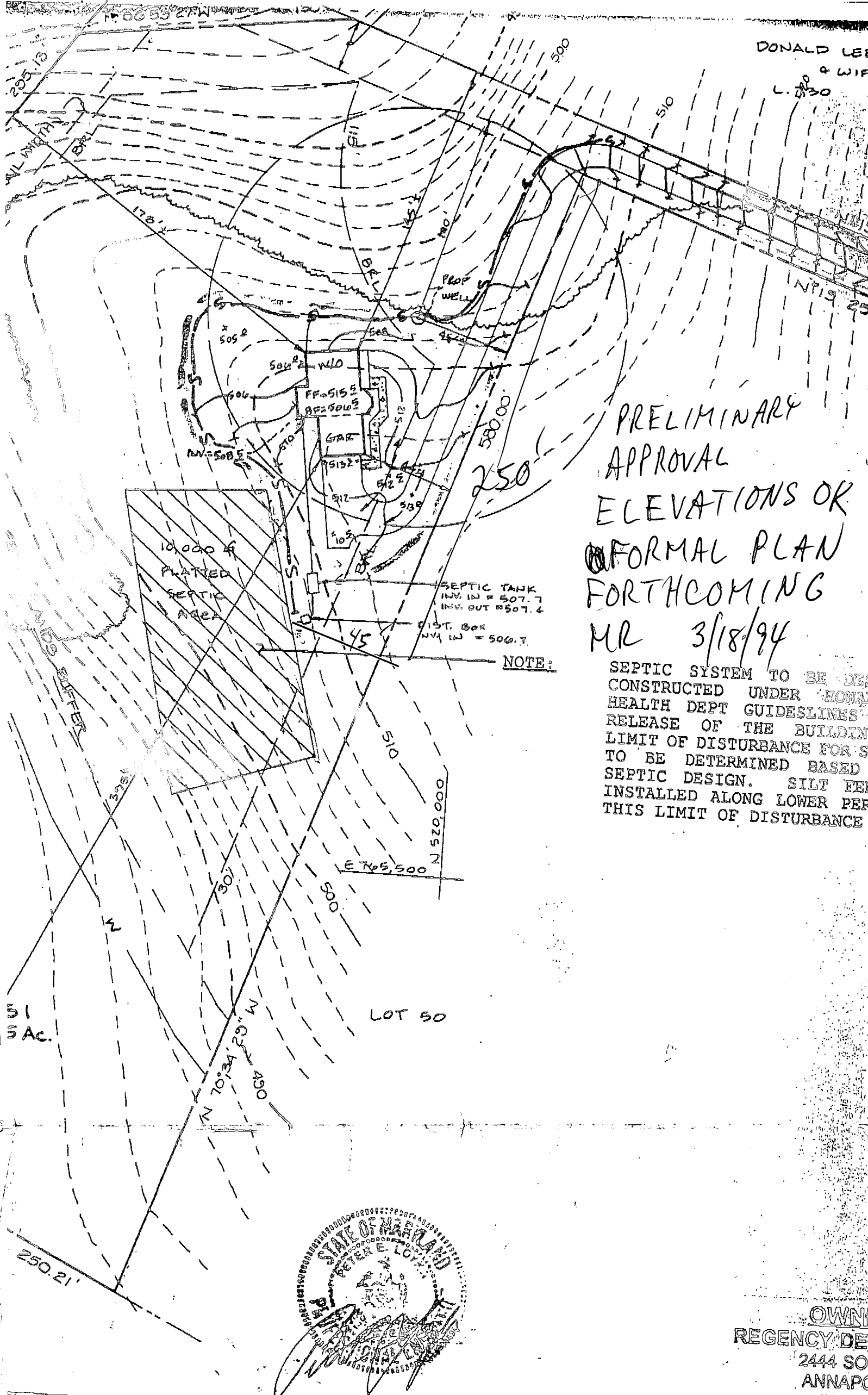
MD STATE GRID



DONALD LEE

& WIFE

L. 830



PRELIMINARY
 APPROVAL
 ELEVATIONS OK
 FORMAL PLAN
 FORTHCOMING
 MR 3/18/94


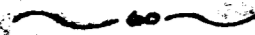
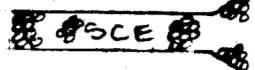



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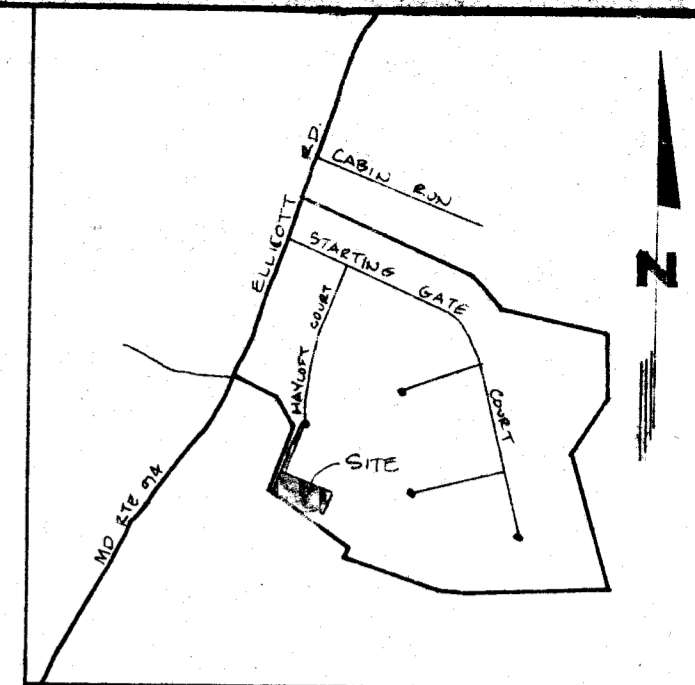
SEPTIC SYSTEM TO BE DESIGNED
 CONSTRUCTED UNDER HOWARD
 HEALTH DEPT GUIDELINES
 RELEASE OF THE BUILDING
 LIMIT OF DISTURBANCE FOR SITE
 TO BE DETERMINED BASED
 SEPTIC DESIGN. SILT FEN
 INSTALLED ALONG LOWER PER
 THIS LIMIT OF DISTURBANCE



OWNER
 REGENCY DEPT
 2444 SOI
 ANNAPC
 PHONI

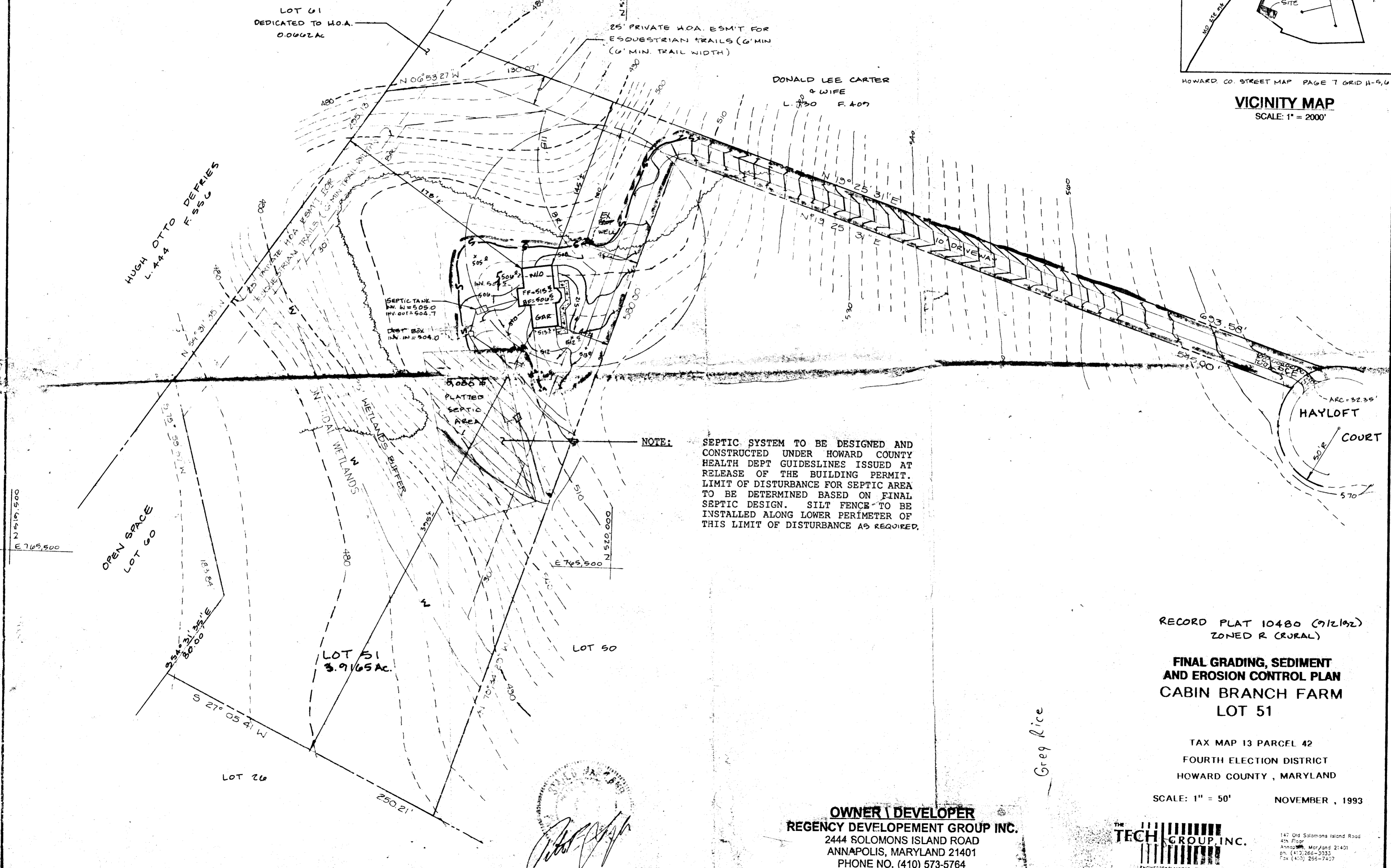
LEGEND

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



HOWARD CO. STREET MAP PAGE 7 GRID H-5,U

VICINITY MAP
SCALE: 1" = 2000'



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 AS REQUIRED.

RECORD PLAT 10480 (9/2/92)
ZONED R (RURAL)

**FINAL GRADING, SEDIMENT AND EROSION CONTROL PLAN
CABIN BRANCH FARM
LOT 51**

TAX MAP 13 PARCEL 42
FOURTH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND

SCALE: 1" = 50' NOVEMBER, 1993

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

THE TECH GROUP, INC.
ENGINEERS, PLANNERS, ARCHITECTS
GEOTECHNICAL, ENVIRONMENTAL,
MATERIALS CONSULTANTS & FACILITIES

147 Old Solomons Island Road
4th Floor
Annapolis, Maryland 21401
ph. (410) 266-3033
fax (410) 266-7427

Greg Rice

