

C.O. 3-12-96
3/13 ASRA

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

05-419549

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

461-9933 313-2640

P 5646913
49288
A 49289

DISTRICT 5th

DATE 3-5-96

DATE SYSTEM APPROVED 3-13-96

INSPECTOR JB

INDEXED

Jack Fyock Septic Service IS PERMITTED TO INSTALL X ALTER

ADDRESS 13775 Triadelphia Road, Glenelg, MD 21737 PHONE 988-9270

SUBDIVISION Bucks Haven Manor LOT 8 ROAD 7421 Bucks Haven Lane

PROPERTY OWNER Cornerstone Homes / Thomas Patz

ADDRESS

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

TRENCHES - Trench to be 3 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 5 feet below original grade. Effective area begins at 3 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Place distribution box 135' from rear (159.01') lot line and 30' from left (301.64') property line. Install trench on contour toward rear property line.

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

OIL 12/14/95 CAS

PLANS APPROVED BY Ronald Pinkley DATE 3/3/95

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)

BLDG. PERMITS ISSUED
AND RETURNED 7/19/2000
B00125536
DECK + SCREENED IN PORCH

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

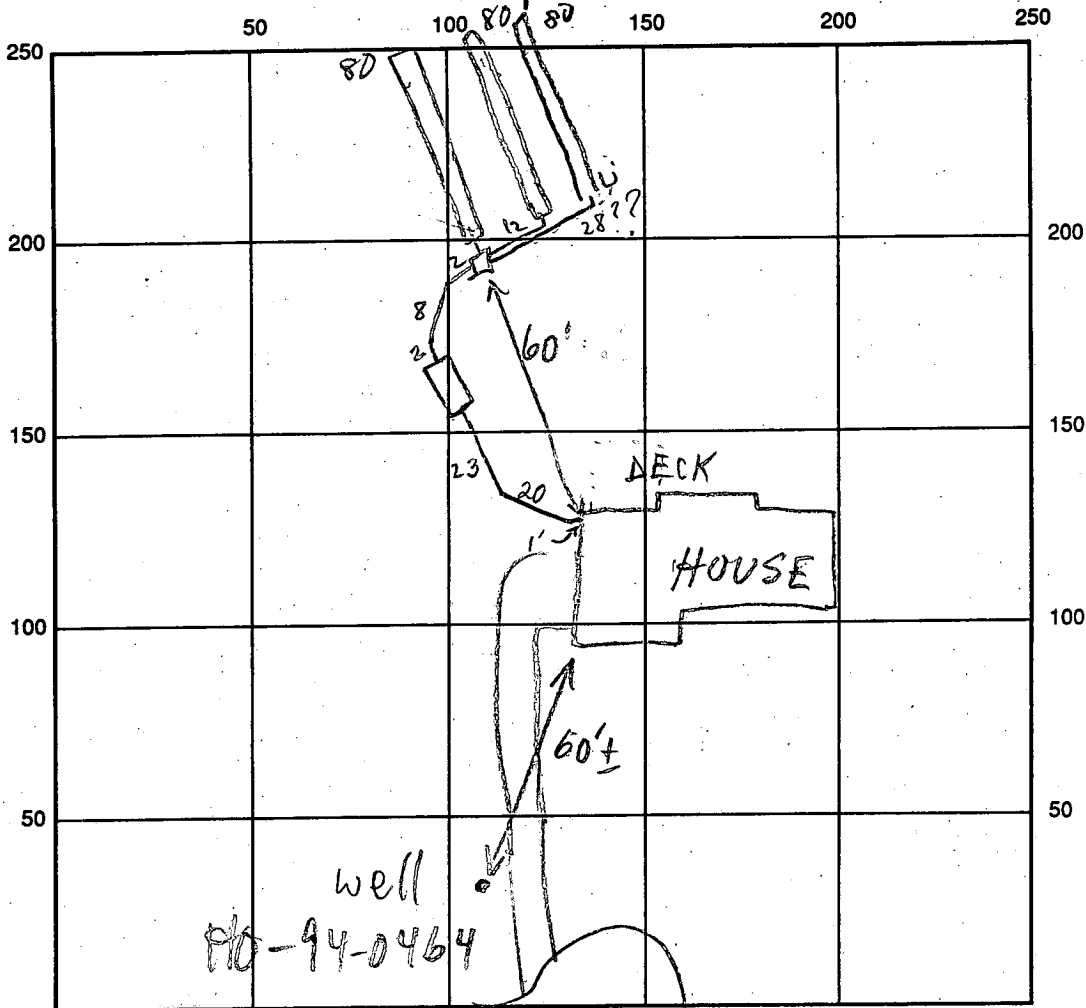
PERMIT VOID AFTER TWO YEARS

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
49288



BUCKS HAVEN, INDCATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1250 GAL - OK CLEANOUTS 1 ON TANK

DISTRIBUTION BOX LEVEL OK - BAFFLE IN

DRAIN FIELD/TITLE DEPTH 5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 3 @ 80 FT.

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 3 @ 240 SQ. FT.

DRYWALL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA SQ. FT.

REMARKS: 3/12/96 S.T. FIRST TWO TRENCHES OK, OK TO DIG +
STONE LAST TRENCH MR 3-13-96 SYSTEM FINISHED, OK
TO COVER. ll

DATE SYSTEM APPROVED 3-13-96

INSPECTOR [Signature]

APPLICATION

PERCOLATION TESTING

A 49288

P _____

DISTRICT Fifth

DATE May 26, 1993

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 CATHERINE CLEVERGER

ADDRESS 12459 SCAGGSVILLE ROAD PHONE 531-5991

AGENT OR PROSPECTIVE BUYER SAME AS ABOVE

ADDRESS _____ PHONE _____

PROPERTY LOCATION: Final Backs Haven Manor

SUBDIVISION CLEVERGER PROPERTY LOT NO. 8 Prelim Lot # Final Lot #

ROAD AND DESCRIPTION 1400'± Northwest from Intersection of Browns Bridge Road and Maryland Route 216

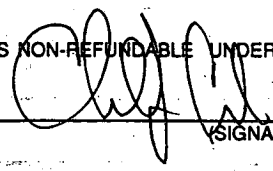
TAX MAP 40 PARCEL # 138

Add-on Deck
BLDG. PERMIT SIGNED
AND RETURNED 4-2-96
Serial # 64164

BLDG. PERMIT SIGNED
AND RETURNED 12-6-95
Serial # 62841

SIZE OF LOT 56,000 Sq. Ft. TYPE BLDG. SINGLE FAMILY 4 BRMS
(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 _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING 6/16/93 PERC AREA OK LOT LINES & PERC HOLES CHANGED FROM BOTH

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # NEW & OLD TEST PLATS RH DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

APPLICATION

PERCOLATION TESTING

A 49258

*copy use for lot 8
Test holes 2/3, C and A*

P _____

DISTRICT Fifth

DATE May 26 1993

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

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 CATHERINE CLEVENGER

ADDRESS 12459 SCAGGSVILLE ROAD PHONE 531-5991

AGENT OR PROSPECTIVE BUYER SAME AS ABOVE

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION CLEVENGER PROPERTY LOT NO. 7 Prelim lot 7 final lot 7

ROAD AND DESCRIPTION 1400th NORTHWEST FROM INTERSECTION OF BROWN'S BRIDGE ROAD AND MARYLAND ROUTE 216

TAX MAP 40 PARCEL # 138

SIZE OF LOT 53,000 Sq. Ft. 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.

[Signature]
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING 6/16/93 PERC ARE OK BUT LOT LINES & PERC HOLES CHANGED FROM BOTH NEW & OLD

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

TEST PLATS BY
SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

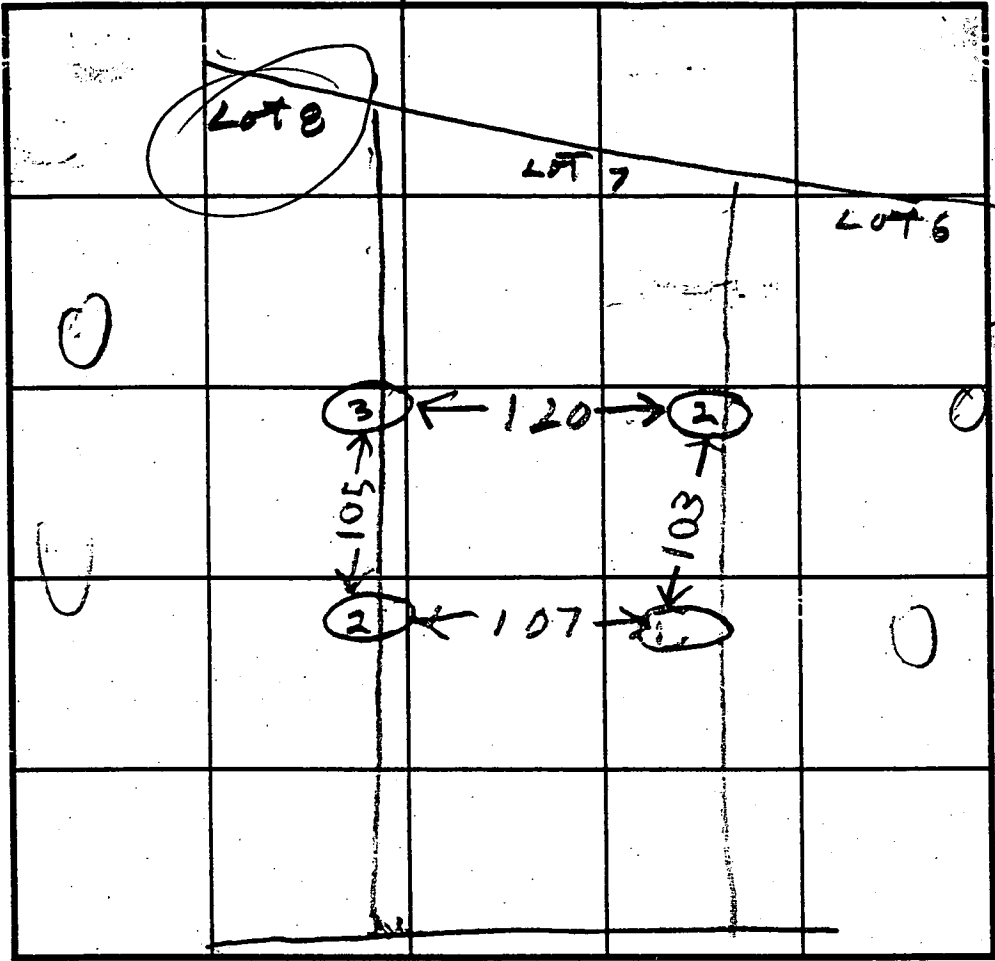
THIS IS NOT A PERMIT

49288

LOT NEW 7

COUNTY OF LA
SOIL PROFILE

ONLY ONE
SOIL PROFILE
(2)



0' BROWN CLAY
3' BLUE SAND LOAM
9' HARD
ONLINE (2)
BROWN CLAY
3' BROWN SAND LOAM

0' TOPSOIL RED CLAY
4' TAN & BROWN SAND LOAM
13'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

← TO RE 216 RD

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
6/16/93	13	4	25	25 1/2	254	258	4
	25	9	OK	SHALLOW			
	25	3	252	250	258	303	5
	25	7.5	OK	SHALLOW			
	35	3	105	106	106	108	2
	35	12	OK				
	25	13	OK				
5/20/94	604 B	v12	5 1/2	Clay down to 5'			5 min
	(C)	v11	3 1/2	OK below 2 1/2'			6 1/2 min
	(604 A)	v10'		water @ 8', Clay to 4 1/2'			(Fail)

9' HARD
ONLINE (3)
TOPSOIL CLAY
OLIVE BROWN SAND LOAM
12'

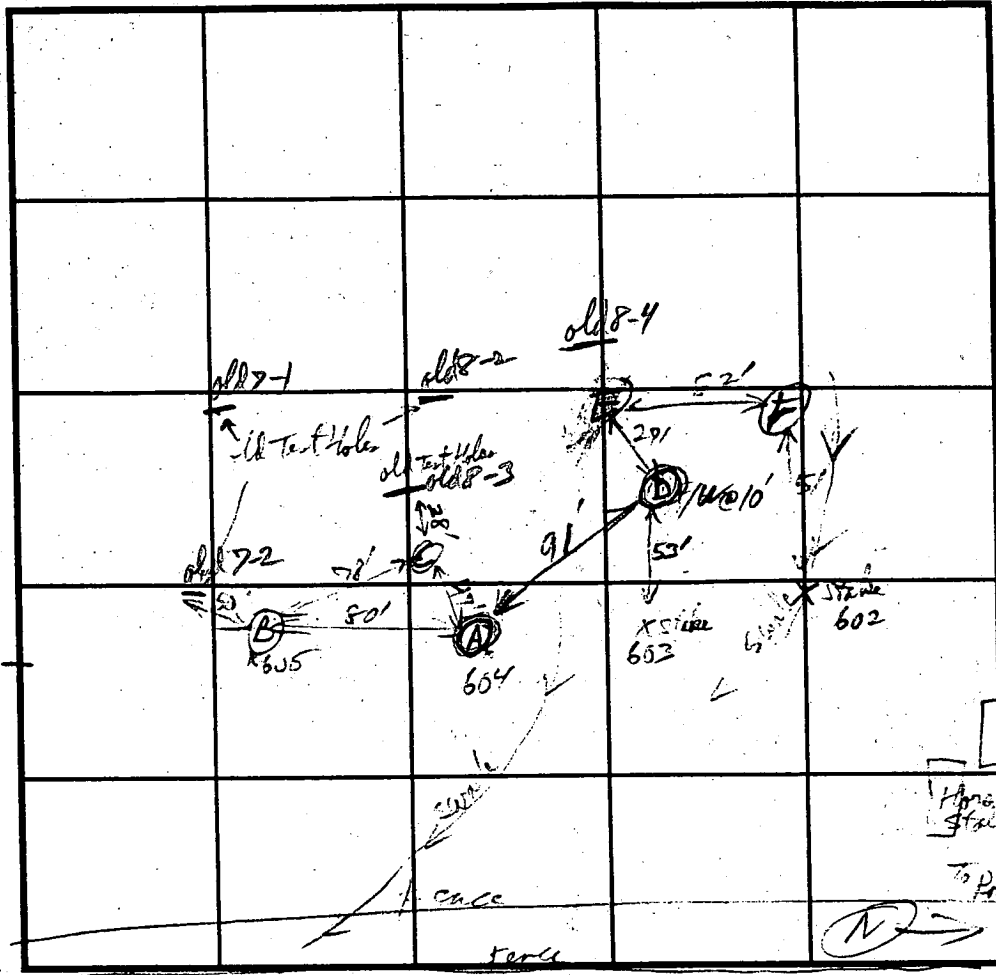
REMARKS LOT LINES CHANGED BECAUSE OF ROAD CHANGE SEE EXPLANATION

TYPE OF SOIL _____
TESTED BY _____ ALSO PRESENT _____
TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 5 min TRENCH WIDTH 3
INLET DEPTH 3 MAXIMUM BOTTOM DEPTH 5 SQ. FT./BEDROOM _____

C CROWD CHANGED LOT LINES & PERC HOLES IN FIELD

Prelim Final lot 7, 8, 9 (A49258-290)
 4/11, 12/13 Buckshaven Manor

COUNTY #
 SOIL PROFILE
 0' 605-B
 Rd Clay -ACL
 23' Rd hL-CL
 micaceous m fr
 5' Rd - light brown
 7' L-CL
 12' No Stone C
 2-3' Rd CL
 yel, yel brn + grey, brn
 Micaceous



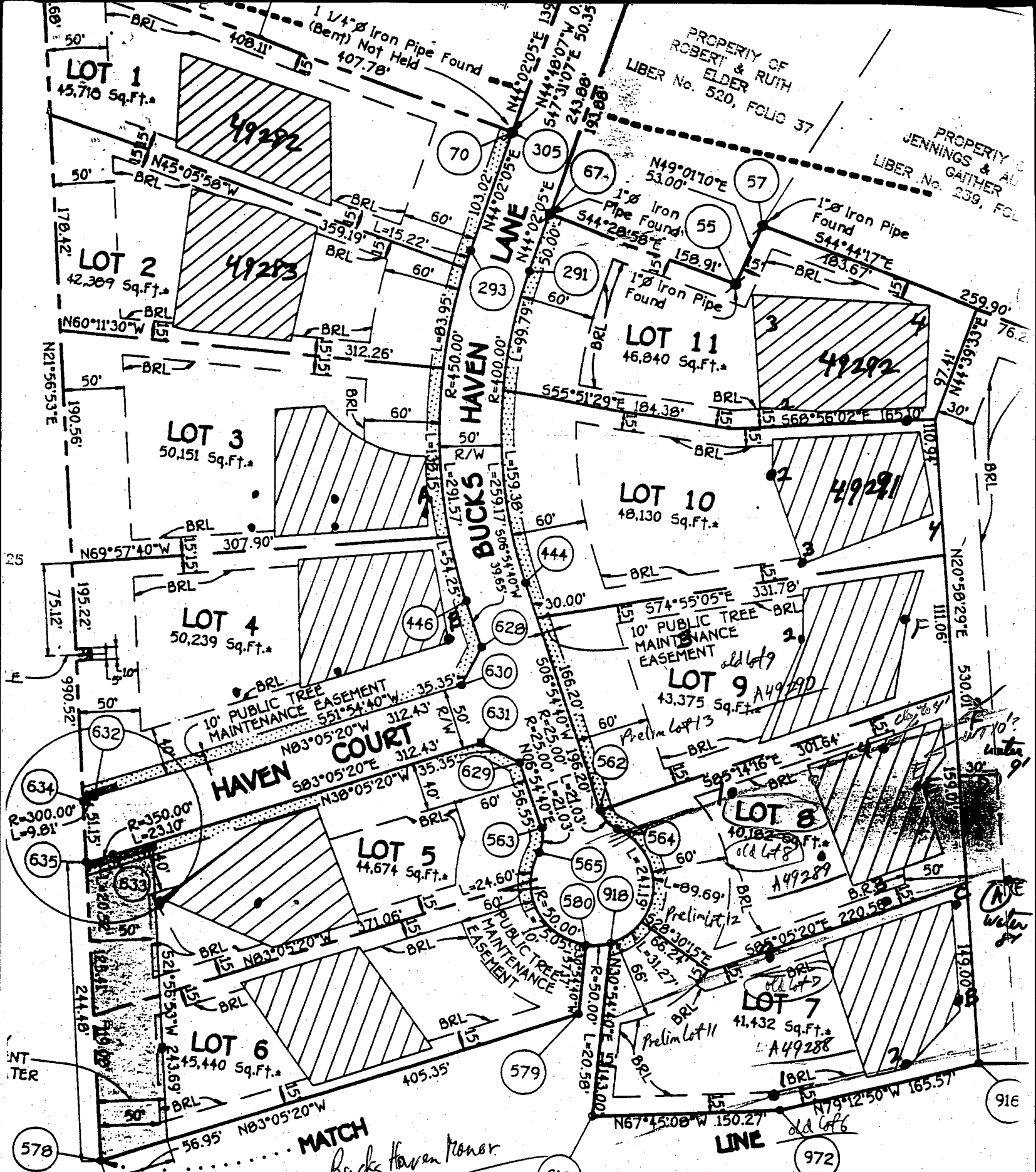
SOIL PROFILE
 0' F
 Rd - hL brn
 Si-CL
 2' yel brn
 Si-CL
 4' Rd SCL
 micaceous
 6' Mix yel, cream + orange
 SL
 10'
 Red Clay-CL
 yel, yel brn
 micaceous
 yel + white
 wet mica SL
 2' dark brown

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
5/20/04	604 (A)	v10'	Water @ 8 ft, Chlor @ 4 1/2'				(Fail)
	605 B	v12'	11:48	12:08:00	12:08:00	12:13:00	5 min
	No Stone C	v11 3/2'	11:41:40	11:47:00	11:47:30	11:53:30	6 1/2 min
	(D)	v11 1/2'	Water @ 11' water seepage @ 9'				(Fail)
	E	v10 1/2'	12:16:00	12:19:30	12:19:30	12:24:50	6 min Shallow
	F	5'	12:28:00	12:33:20	12:30:20	12:33:30	3 min

REMARKS _____
 TYPE OF SOIL _____
 TESTED BY R. P. Kelly ALSO PRESENT O. Ketterman
 TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____
 INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____

11
 E
 yel brn Si-CL
 Rd CL
 4 1/2'
 Var. Mic
 yel, cream,
 Rd Brn, Tan
 mica
 Loom-SL



PROPERTY OF
ROBERT & RUTH
ELDER
LIBER No. 520, FOLIO 37

PROPERTY OF
JENNINGS & AL
GATHER
LIBER No. 239, FOL

THIS SHEET

RECORDED	11
TO BE RECORDED	0
IN PARCELS TO BE RECORDED	11
RECORDED	11.446 Aca
TO BE RECORDED	13.041 Aca
PARCELS TO BE RECORDED	

MATCH
Bucks Haven Honor.
Final Plan #-95-04
with correct perk test
locations 5/3/95 R/P

OWNER & DEVELOPER

MRS. CATHERINE CLEVINGER
12459 ROUTE 216
HIGHLAND, MARYLAND 20777

MR. & MRS. MU SU BAEK
12515 SCAGGERS

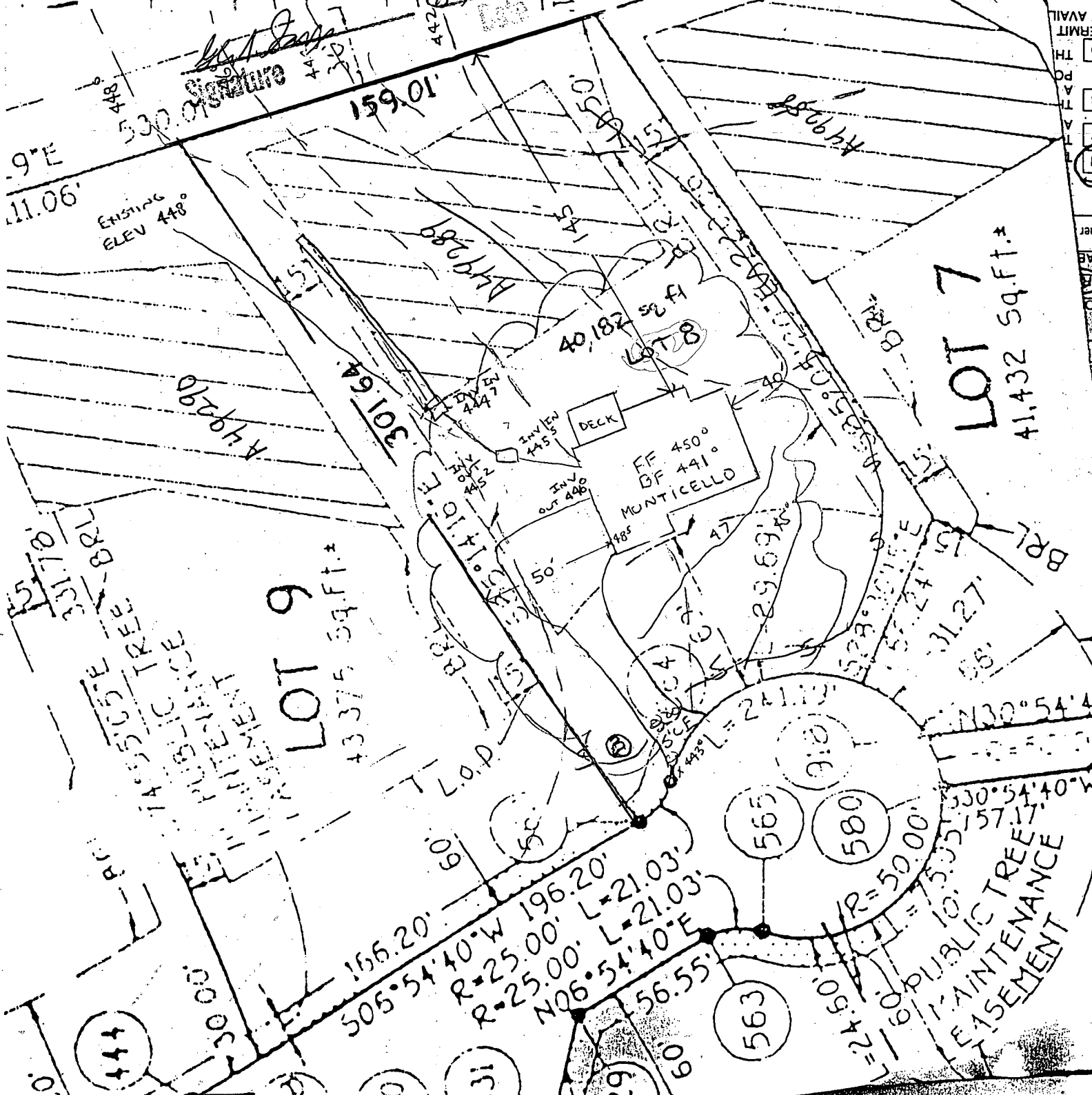
GRADING PLAN / PLOT PLAN

BUCKS HAVEN MANOR

TRENCH LENGTH TO BE DETERMINED AT TIME OF INSTALLATION.

LOT 8
BUCKS HAVEN LANE
Approved Septic System Plan
Howard County Health Department

PARCEL 138
PLAT NO. 11620
5TH ELECTION DISTRICT OF HOWARD COUNTY, MARYLAND
SCALE: 1" = 50' DATE: FEB 12/1995



CICAL CON
CE 67
ROP PEI
AVAIL
ERMIT
TH
PC
PA
TA
VA
A
N
OUT
AB
LO

LOT 7
41,432 Sq. Ft.

LOT 9
43,375 Sq. Ft.

330° 54' 40" W
10' 53' 52" 57.17'
PUBLIC TREE MAINTENANCE LEASEMENT

GRADING PLAN / PLOT PLAN

Main file copy

BUCKS HAVEN MANOR

TRUCK LENGTH TO BE DETERMINED AT TIME OF INSTALLATION.

LOT 8
BUCKS HAVEN LANE *50 Scale*

TAX MAP NO. 40 PARCEL 138

PLAT NO. 11620

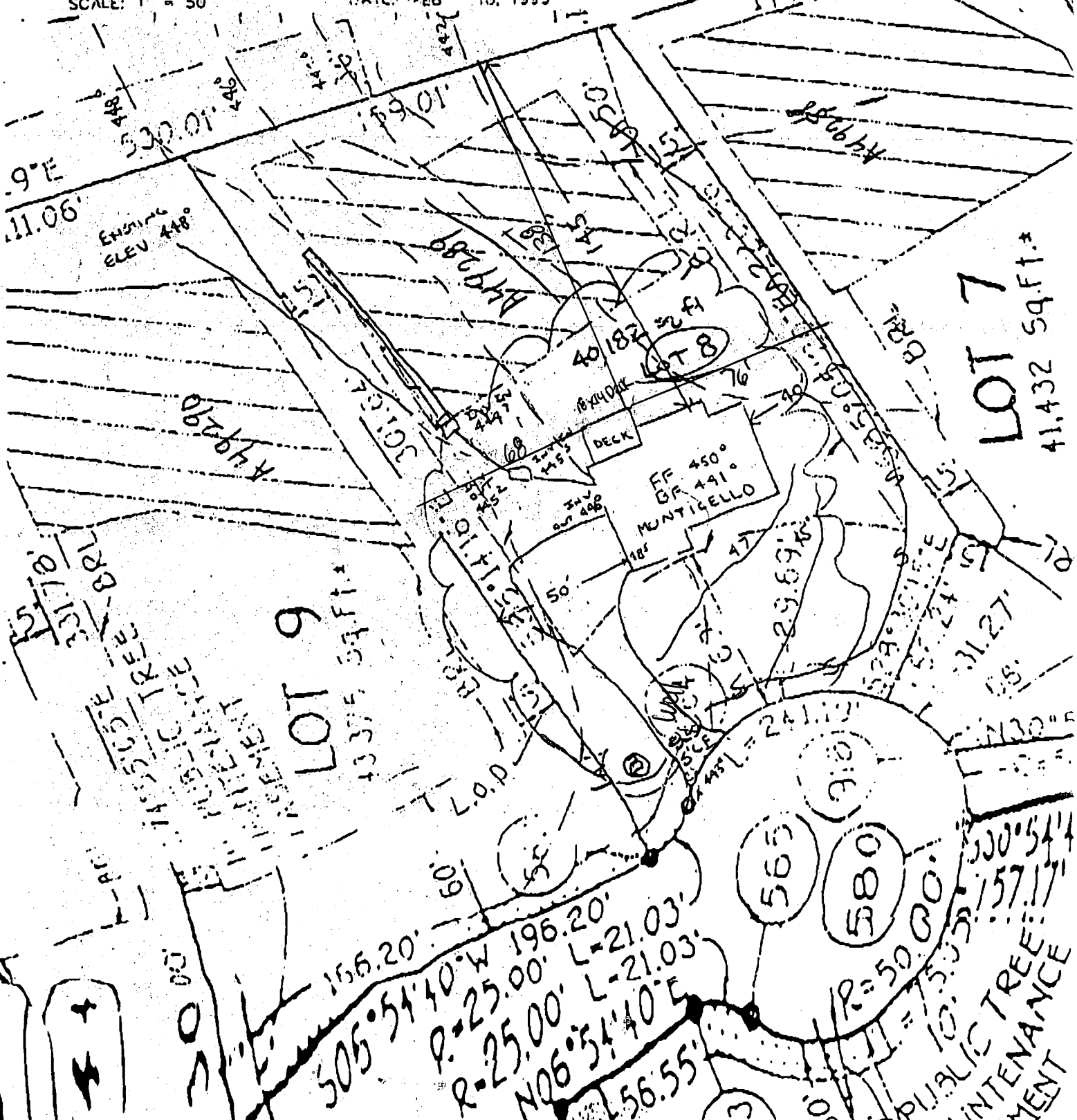
5TH ELECTION DISTRICT OF HOWARD COUNTY, MARYLAND

SCALE: 1" = 50'

DATE: FEB 10, 1995

4-2-96 DECK PROPOSED - NO IMPACT TO WELL OR SEPTIC. Blodgett SAUNDERS

149.00



LOT 7
41,432 SQ. FT.

LOT 9
13,375 SQ. FT.

PUBLIC TREE MAINTENANCE

$156.20'$
 $505^{\circ}54'40''$
 $P=25.00'$
 $R=25.00'$
 $N06^{\circ}54'40''$
 $L=21.03'$
 $L=21.03'$
 $L=56.55'$

565
 580
 $R=50.00'$
 $L=75.00'$
 $L=10.50'$
 $L=157.17'$

300°54'

157.17'

10.50'

75.00'

50.00'

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

COMPLETION REPORT

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

FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE

COUNTY NUMBER **A 49289**

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED **060295**

Depth of Well **205** (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" **HO-94-0469**

OWNER **Bucks Haven Farm**

STREET OR RFD. **Bucks Haven Lane** TOWN **Highland**

SUBDIVISION **Bucks Haven Manor** SECTION **8** 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		check if water bearing
	FROM	TO	
Top Soil	0	2	
Sandy	2	30	✓
Sand Stone	30	35	
MICKA	35	60	
Sand Stone	60	65	✓
MICKA	65	205	

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**

TYPE OF GROUTING MATERIAL (Circle one)
CEMENT **CM** BENTONITE CLAY **BC**

NO. OF BAGS **13** NO. OF POUNDS **1300**

GALLONS OF WATER **78**

DEPTH OF GROUT SEAL (to nearest foot)
from **0** ft. to **35** ft.

CASING RECORD

casing types insert appropriate code below

ST STEEL **CO** CONCRETE
PL PLASTIC **OT** OTHER

MAIN CASING TYPE

Nominal diameter top (main) casing (nearest inch) **6**

Total depth of main casing (nearest foot) **40**

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 BRONZE **HO** OPEN HOLE
PL PLASTIC **OT** OTHER

NUMBER OF UNSUCCESSFUL WELLS: _____

WELL HYDROFRACTURED: **Y** **N**

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.

TYPE: MWD/MSD/MGD **117**

DRILLERS LIC. NO. **117**

DRILLERS SIGNATURE **Ralph Mayne**

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. **116**

DRILLERS SIGNATURE **Ralph S. Mayne**

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

DEPTH (nearest ft.)

HO 38 205

SLOT SIZE 1 _____ 2 _____ 3 _____

DIAMETER OF SCREEN _____ (NEAREST INCH)

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. **20 Bucket**

WATER LEVEL (distance from land surface)

BEFORE PUMPING **20** ft.

WHEN PUMPING **28** ft.

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 (CIRCLE) (YES or NO) **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 **29**

CAPACITY: GALLONS PER MINUTE (to nearest gallon) _____

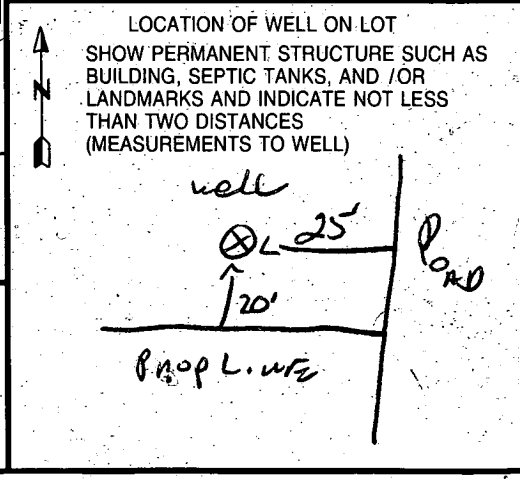
PUMP HORSE POWER _____

PUMP COLUMN LENGTH (nearest ft.) _____

CASING HEIGHT (circle appropriate box and enter casing height)

+ above **-** below

LAND SURFACE **2** (nearest foot)



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

3/15/96
BMT/MP

New Installation Y Receipt # -0-
Replacement _____ Date 03/14/96

Name of Installer Paul Lennan Telephone _____

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

Name of Property Owner CORNERSTONE HOMES Telephone _____
Subdivision Bucks Haven Manor Lot # 8 Well Tag # HO-94-0464
Site Address 7421 Bucks Haven Lane

Pump Motor Pitless Adapter

1. Type 1. Horsepower _____ 1. Make _____
a. Deep well jet _____ 2. RPM _____ 2. Model # _____
b. Shallow well jet _____ 3. Voltage _____ 3. Depth _____
c. Submersible _____ a. 110 _____
2. Make _____ b. 220 _____
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 _____

Tank Piping Well data

1. Capacity _____ 1. Type _____ 1. Depth 205 ft.
2. Pressure relief valve? _____ 2. Size _____ 2. Yield 10 GPM
3. NSF and/or BOCA Code approved _____ 3. Static water level 24 ft.
4. Depth of supply line _____ 4. Will water supply be disinfected by installer? _____

3/19/96 NO IMP 3/15/96
spoke w/ Mr. Lennan - he was bid that it's OK to cover (XKS)

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.

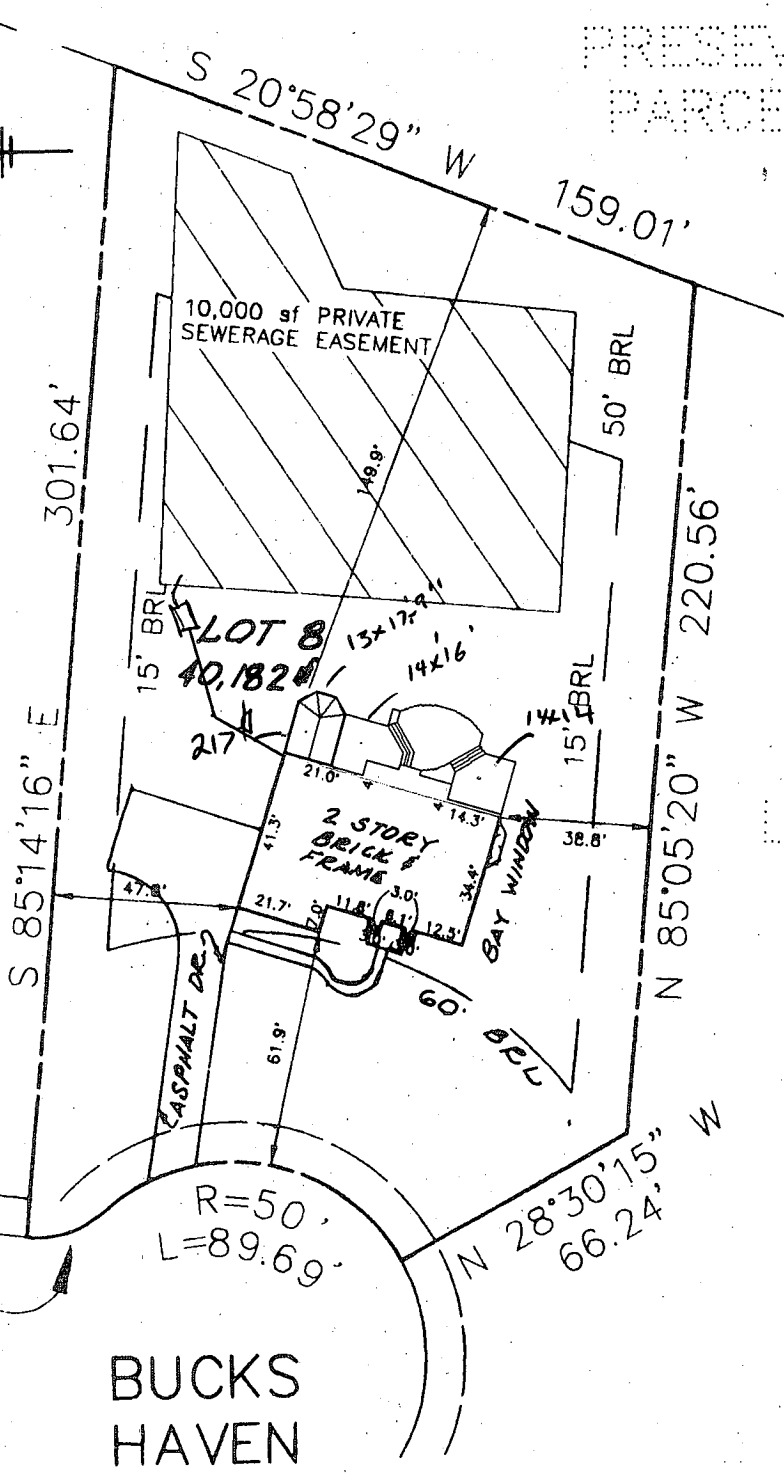
Signature of Applicant: _____

Date: _____

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

THIS LOCATION DRAWING IS OF BENEFIT TO A CONSUMER ONLY INsofar AS IT IS REQUIRED BY A LENDER OR TITLE INSURANCE COMPANY, OR ITS AGENTS, IN CONNECTION WITH FINANCING THE PROPERTY SHOWN HEREON. THIS DRAWING IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OF PROPERTY LINES OR THE CONSTRUCTION OF IMPROVEMENTS SUCH AS FENCES, GARAGES, OR BUILDING ADDITIONS. THIS DRAWING SHOWS THE LOT CONFIGURATION AS CURRENTLY RECORDED, BEING SUFFICIENT FOR SETTLEMENT PURPOSES, BUT BEING INSUFFICIENT FOR THE SETTING OF PROPERTY CORNER PINS ON THE GROUND.

PRESEVATION
PARCEL 'A'



7/19/96
Proposed deck
location as shown
DJS

TREE MAINTENANCE
EASEMENT

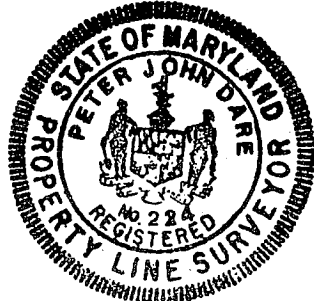
R=25.00' L=21.03'

BUCKS
HAVEN
LANE

TOP OF
FOOTER ELEVATION = 438.7
PER PLOT PLAN

SURVEYOR'S CERTIFICATE

I HEREBY CERTIFY THAT THE LOCATION DRAWING SHOWN HEREON IS CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF; THAT THE IMPROVEMENTS HAVE BEEN LOCATED AS THE RESULT OF A FIELD SURVEY, AND THAT THERE ARE NO VISIBLE ENCROACHMENTS UNLESS SHOWN. THE PROPERTY DOES NOT LIE WITHIN A FLOOD HAZARD AREA ON THE FEMA F.I.R.M. IDENTIFIED BELOW. AT THE WRITTEN REQUEST OF THE PURCHASER, NO PROPERTY CORNER MARKERS HAVE BEEN SET.



Peter J. Dare
PETER J. DARE
MD. PROPERTY LINE SURVEYOR #224

5.21.96
FINAL

LOCATION DRAWING
BUCKS HAVEN MANOR
LOT 8
7421 BUCKS HAVEN LANE

TSA GROUP, INC.
planning • architecture • engineering • surveying
8480 BALTIMORE NATIONAL PIKE SUITE 418
ELLCOTT CITY, MARYLAND 21043
(410) 465-6105

5th ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
SCALE : 1" = 50' DATE : 1/18/96