

1/6/98
2:00
1/8/98
anytime

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 59270-A

A 49337-J

DISTRICT 5th

DATE 12-17-97

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

XXXX-XXXX 410-313-2640

DATE SYSTEM APPROVED 1/8/98

INSPECTOR KM

INDEXED

Adamson Plumbing & Heating IS PERMITTED TO INSTALL X ALTER

ADDRESS 7825 McCellan Avenue, Boonsboro, Maryland 21713 PHONE 301-416-3968

SUBDIVISION Fulton Manor LOT 39 ROAD 12329 Pleasant View Drive

PROPERTY OWNER Jamestown Builders

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 180

NOTE: HEALTH DEPARTMENT WILL NEED CONFIRMATION THAT TANK AND SERVICE LINES ARE INTENDED TO BE UNDISTURBED SOILS PRIOR TO INSTALLATION OF SEPTIC SYSTEM.

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.

LOCATION - Place distribution box 83 feet up the left lot line (287.18') and 15 feet off same lot line as seen when facing the lot from Pleasant View Drive. 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 BY 9/26/97

GRAVITY SERVICE NOT POSSIBLE AS SHOWN, INSTALL TOP SEAM 1250 GAL TANK FOR FUTURE RAINWATER

PLANS APPROVED BY Amy McMillen/Glen Savage REVISED _____ DATE 09/18/97

COVER NO WORK UNTIL INSPECTED AND APPROVED *RELOCATE EXIST BOX TO ABOUT 45' OFF ST, RUN TRENCHES ON CONTOUR TOWARDS L. LOT LINE*

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

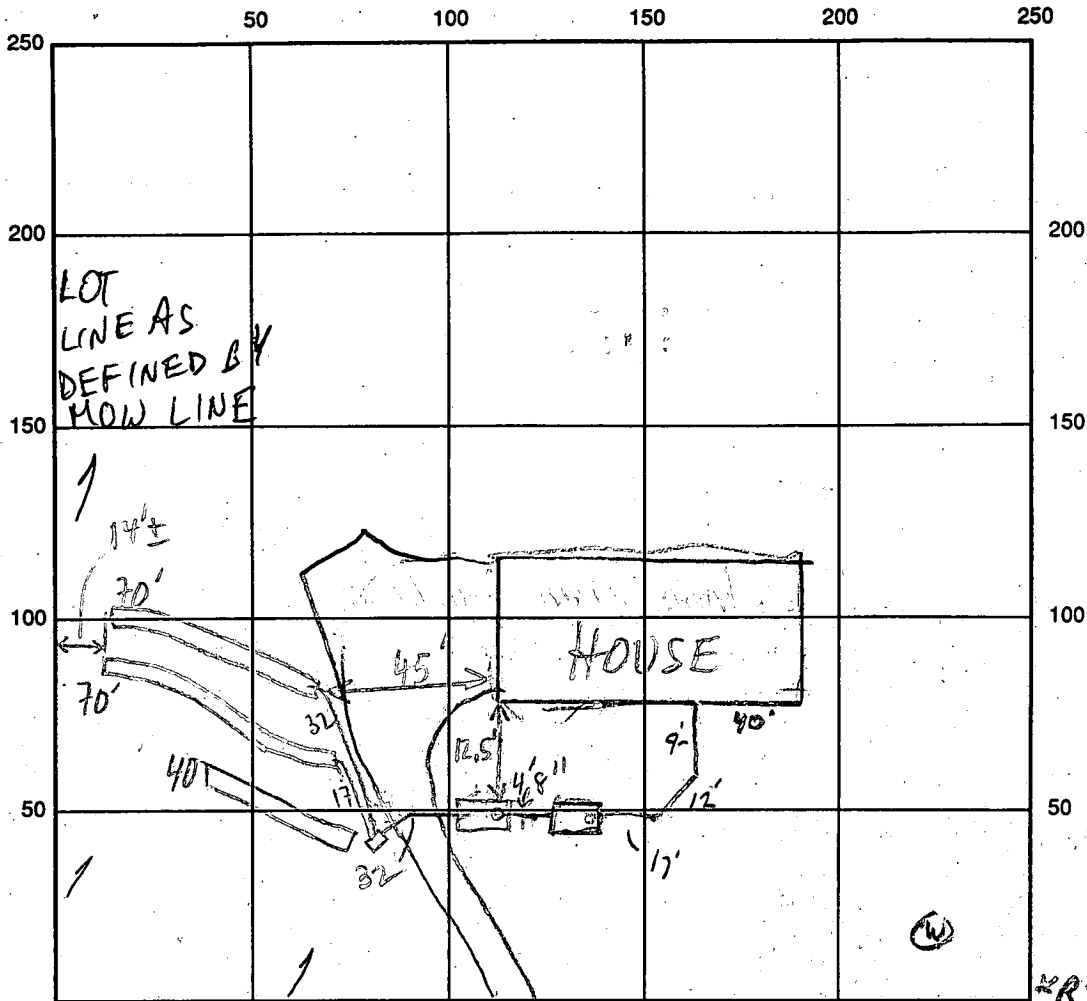
PERMIT VOID AFTER TWO YEARS

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 49337-J



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
 PLEASANT VIEW DR

MRP LOT COR.

SEPTIC TANK LEVEL OK - 1250 CLEANOUTS 10w 1st Tank, Cleanout on 2nd tank

DISTRIBUTION BOX LEVEL OK - BAFFLE IN

DRAIN FIELD/TITLE DEPTH $\frac{1}{7} \frac{2}{7} \frac{3}{7}$ FT. TRENCH WIDTH 2 FT. INLET DEPTH $\frac{1}{3} \frac{2}{3} \frac{3}{3}$ FT.

EFFECTIVE GRAVEL DEPTH $\frac{1}{4} \frac{2}{4} \frac{3}{4}$ FT. TOTAL LENGTH ① 70 ② 70 ③ 40 FT.

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 720 SQ. FT.

DRYWALL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA SQ. FT.

REMARKS: 12/30/97 topography NOT AS SHOWN, ADD 2ND TANK FOR COVER AND PLACE
DIST BOX AS SHOWN, RUN TRENCHES ON COVER, 1ST TANK + LINES OK TO COVER. 1ST SYSTEM
WILL BE GRAVITY, AS SPECIFIED, IN REISED LOCATION. 11/6/98 OK TO STONE
TRENCHES, COVER TO D.B.: NO GRAVITY REPAIR AREA REMAINING (WR)
1/8/98 ok to cover ends of trenches KM/PP

DATE SYSTEM APPROVED 1/8/98 INSPECTOR Kimberly Maisto

APPLICATION

PERCOLATION TESTING

A 49337J

P _____

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

DISTRICT Fifth

DATE JUNE 8, 1993

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 OTHA D. UPCHURCH FRANK PERSICO

ADDRESS 457 Old Orchard Circle PHONE _____

AGENT OR PROSPECTIVE BUYER SAME AS OWNER

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION UPCHURCH PROPERTY LOT NO. 39

ROAD AND DESCRIPTION 12276 Hall Shop Road (12329 Pleasant View Drive)

HIGHLAND MARYLAND BLDG. PERMIT SIGNED AND RETURNED 9-18-97
Smith B-110790

TAX MAP 40 PARCEL # 1646205

SIZE OF LOT 60,000^{sq} TYPE BLDG. SINGLE FAMILY DWELLING - 4 Brn
(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 _____

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

A 49337 T

Unnamed Road

Hill
Shy
Kd

COUNTY #
LOT 13
SOIL PROFILE
Hole 6

0' to 5'
Clay
5' to
Sandy
Loam

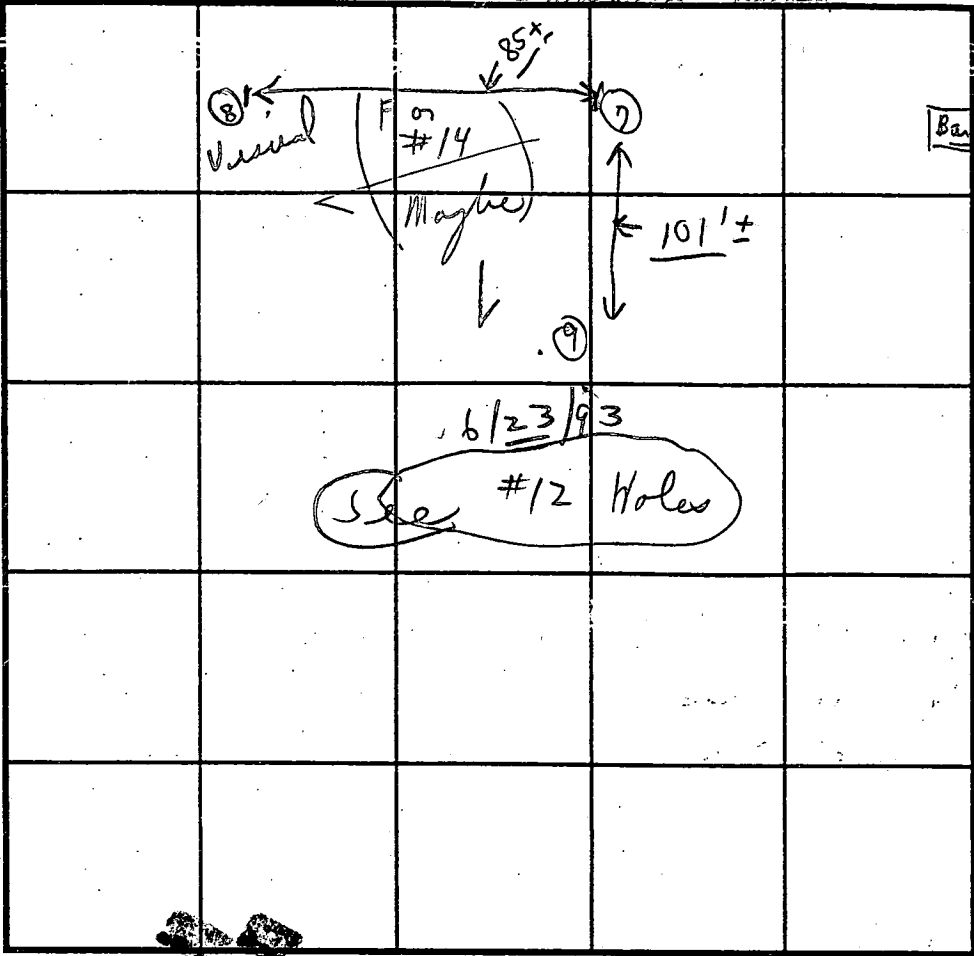
DRY
13'

Hole 7
#695
0' to 4'
Clay
4'
Sandy
Loam

11'

Hole 8
0' to 4'
Clay
4' to
Sandy
Loam

12 1/2'



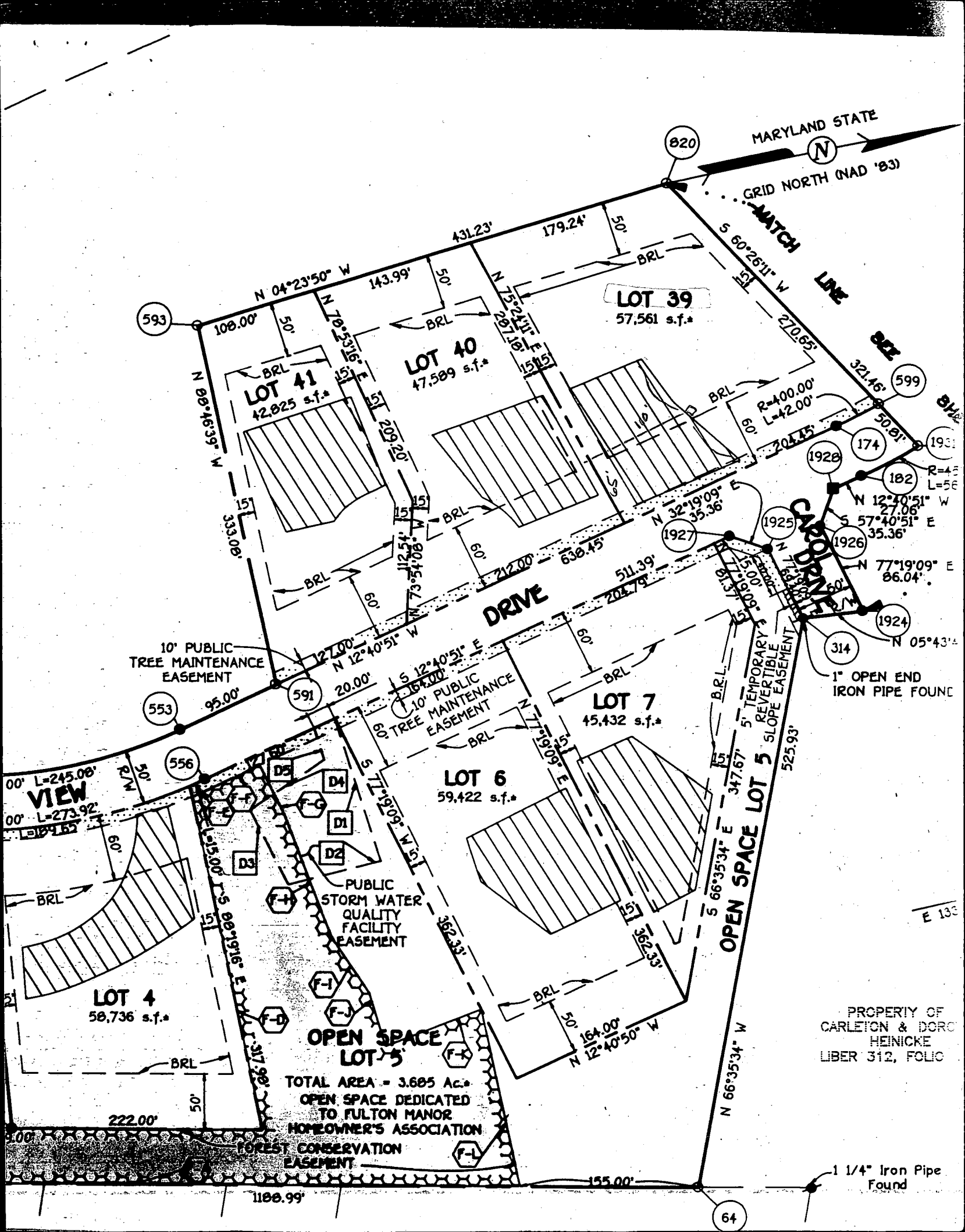
SOIL PROFILE
Hole 9
0' - 3 1/2'
Clay
3 1/2'
(Loam)

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

| DATE | TEST NO. | DEPTH | PRE-WET START | PRE-WET STOP | TEST - 1" DROP START | TEST - 1" DROP STOP | TIME |
|-----------|----------|---------------|---------------------------------|--------------|----------------------|---------------------|-------|
| 6/23/93 | ④ | 0'-5' (Clay) | | | | | |
| Wednesday | No. test | 13' | 0'-5' | | | | |
| | ② | 4' | 11:07 | 11:10 | 11:10 | 11:16 | 6 min |
| | #695 | 11' | 0'-4' Clay 4'-11' Sandy Loam | | | | |
| | ⑧ | 0'-4' clay | | | | | |
| | ⑨ | 12 1/2' | 0'-4' Clay 4'-12 1/2' | | | | |
| | ⑨ | 3 1/2' | 11:13 | 11:15 | 11:15 | 11:20 | 5 min |
| | | 11'± (Recall) | | | | | |

See #12 Lot Tests

REMARKS Tests in open ; tests per stake ;
 TYPE OF SOIL Loam below clay ;
 TESTED BY C. R. D. ALSO PRESENT { 0 Ketterman }
 TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 5 min TRENCH WIDTH 2'
 INLET DEPTH 3' MAXIMUM BOTTOM DEPTH 7' SQ. FT/BEDROOM 180 ft²



MARYLAND STATE
 GRID NORTH (NAD '83)

MATCH LINE

LOT 39
 57,561 s.f.*

LOT 40
 47,589 s.f.*

LOT 41
 42,825 s.f.*

LOT 7
 15,432 s.f.*

LOT 6
 59,422 s.f.*

LOT 4
 58,736 s.f.*

OPEN SPACE LOT 5

TOTAL AREA = 3.685 Ac.*
 OPEN SPACE DEDICATED
 TO FULTON MANOR
 HOMEOWNER'S ASSOCIATION
 FOREST CONSERVATION
 EASEMENT

PROPERTY OF
 CARLETON & DORC
 HEINICKE
 LIBER 312, FOLIO

1 1/4" Iron Pipe Found

10' PUBLIC TREE MAINTENANCE EASEMENT

10' PUBLIC TREE MAINTENANCE EASEMENT

PUBLIC STORM WATER QUALITY FACILITY EASEMENT

5' TEMPORARY REVERSIBLE SLOPE EASEMENT

1" OPEN END IRON PIPE FOUND

VIEW
 00' L=245.08'
 00' L=273.92'

222.00'

1188.99'

155.00'

64

E 138

593

553

556

591

1927

1928

174

1931

182

1932

1925

1926

1924

314

1924

1924

1924

1924

1924

1924

1924

1924

1924

1924

1924

1924

1924

1924

1924

1924

| | | | | |
|------------|-------------|-------------------------------|---|---|
| B 1 | 1273 | SEQUENCE NO. (DP USE ONLY) | STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please print or type | STATE PERMIT NUMBER HO-94-0374 <small>70 fill in this form completely 79</small> |
|------------|-------------|-------------------------------|---|---|

OWNER INFORMATION

Date Received (APA) **022495**

EISHER COLLINS CARTER
Last Name Owner First Name

9121 BALT WATL PIKE
Street or RFD

ELLICOTT CITY MD 21042
Town State Zip

DRILLER INFORMATION

Ralph Mayne MSD/MGD/MWD License No. **116**

Driller's Name **Ralph Mayne (well drilling)**

Firm Name **9120 Brown Church Rd. Mt. Airy**

Address **Ralph Mayne 2/22/95**

Signature Date

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 (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)

APPROXIMATE DEPTH OF WELL **150** FEET

APPROXIMATE DIAMETER OF WELL **6"** NEAREST INCH

METHOD OF DRILLING (circle one)

AIR-ROTARY **JETTED** **Jetted & DRIVEN**

CABLE **AIR-PERCussion** **ROTARY (Hydraulic Rotary)**

REVerse-ROTary **DRive-POINT**

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-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS

D THIS WELL WILL DEEPEIN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) _____

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

APPROX. PERMIT NUMBER **GAP**

FORCE **DS** WRITE INITIALS IN BOX PERMIT No. **HO-94-0374**

SPECIAL CONDITIONS

NOTE = APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED =

LOCATION OF WELL

HOWARD COUNTY

UP CHURCH PROP SUBDIVISION

SECTION **44** LOT **39**

HASHLAND NEAREST TOWN

MILES FROM TOWN (enter 0 if in town) **2** MI

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

PLEASANT VIEW DR. NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

W **E**

DISTANCE FROM ROAD **20** ENTER FT OR MI **FT**

TAX MAP: _____ BLK: _____ PARCEL _____

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard COUNTY NAME **A 49337J** COUNTY NO.

STATE SIGNATURE _____ DATE ISSUED **022895** INSERT S EXP. DATE **02/28/96**

Wanda K Sol SIGNATURE

NORTH GRID **490000** EAST GRID **0817000**

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

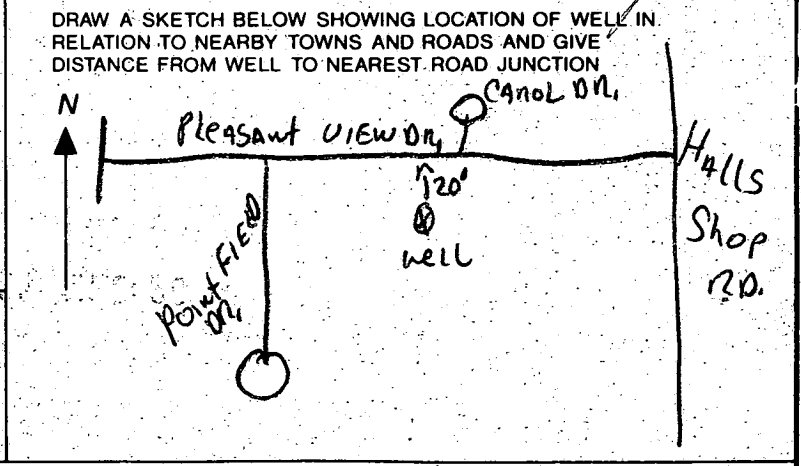
- well
-
-

WRITE THE BOX NUMBER FROM THE MAP HERE

8107

490

3/6/95 bore #2 10:00
13# bags of cement
42' of casing
35' of gravel
2' of casing above ground



COUNTY

C1 3574

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 A 49337J

ST/CO USE ONLY DATE RECEIVED 032195

DATE WELL COMPLETED 030695

Depth of Well 185 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" H0-94-0374

OWNER Fisher Collins & Carter last name Pleasant View Drive first name TOWN Highland SUBDIVISION Fulton Manor SECTION LOT 39

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), Check if water bearing. Rows include Top Soil, Sandy, Sand Stone, MICKA, Sand Stone, MICKA.

GROUTING RECORD: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL CEMENT (CM), BENTONITE CLAY (BC), NO. OF BAGS 13, NO. OF POUNDS 1300, GALLONS OF WATER 78, DEPTH OF GROUT SEAL 35 ft.

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

MAIN CASING TYPE: PL 6 42. Nominal diameter top (main) casing (nearest inch) 6, Total depth of main casing (nearest foot) 42.

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

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

IN HARD ROCK AREAS, IDENTIFY SPECIFICALLY WHERE SATURATED FRACTURES WERE OBSERVED. WELL HYDROFRACTURED YES (Y) NO (N).

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. 116. DRILLERS SIGNATURE (Must match signature on application).

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

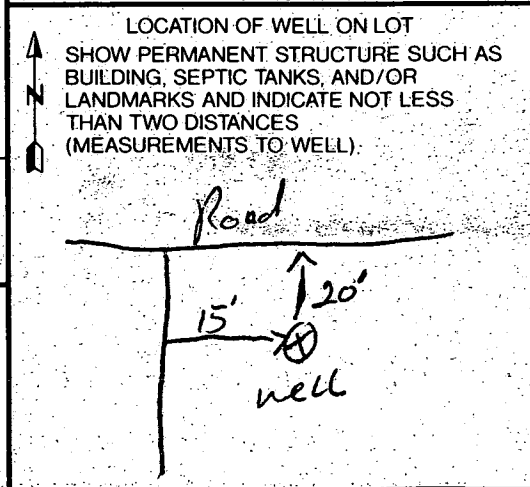
SCREEN RECORD table with columns: DEPTH (nearest ft.), E A C H S C R E E N. Rows 1-3 with depth values 40, 185.

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.

PUMPING TEST: HOURS PUMPED 3, PUMPING RATE 10 gal. per min. to nearest gal., METHOD USED TO MEASURE PUMPING RATE Bucket, WATER LEVEL 22 ft. before pumping, 45 ft. when pumping. 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: 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, (-) below LAND SURFACE 2 (nearest foot).



HOWARD COUNTY HEALTH DEPARTMENT
 Bureau of Environmental Health
 3535-N Ellicott Mills Drive
 Ellicott City, MD 21043
 461-9633

1/14/98
 P.M.

1/14/98
 Fernco
 Coupling on lined well
 P.A. 3.0' below grade
 Casing 1.5' above grade
 has 2 piece cap
 line steeved
 (cm)

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

Now Installation
 Replacement

Receipt # _____
 Date _____

Name of Installer Willoughby Plumbing

Telephone 410-981-7051

Licence Number _____

Certified Well Pump Installer _____

Well Driller _____

Registered Plumber

Name of Property Owner FRANK PERSICO

Telephone 202 319-4004

Subdivision FULTON MANOR

Lot # 39

Well Tag # MD 311-0374

Site Address 1329 PLEASANT VIEW

FULTON, MD 21029

Pump

Motor

Pitless Adaptor

1. Type

- a. Deep well jet _____
- b. Shallow well jet _____
- c. Submersible

1. Horsepower 1/2 hp

- 2. RPM _____
- 3. Voltage _____
 - a. 110 _____
 - b. 220

1. Make ARMCO

- 2. Model # _____
- 3. Depth 3'

2. Make TRUZZI

3. Model # _____

4. Capacity 7 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 TAPE

Tank

Piping

Well data

- 1. Capacity 4 gal.
- 2. Pressure relief valve? YES

- 1. Type CRESTLINE
- 2. Size 1"
- 3. NSF and/or BOCA Code approved YES
- 4. Depth of supply line 4'

- 1. Depth 185 ft.
- 2. Yield 10 GPM
- 3. Static water level _____ ft.
- 4. Will water supply be disinfected by installer? NO

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: _____

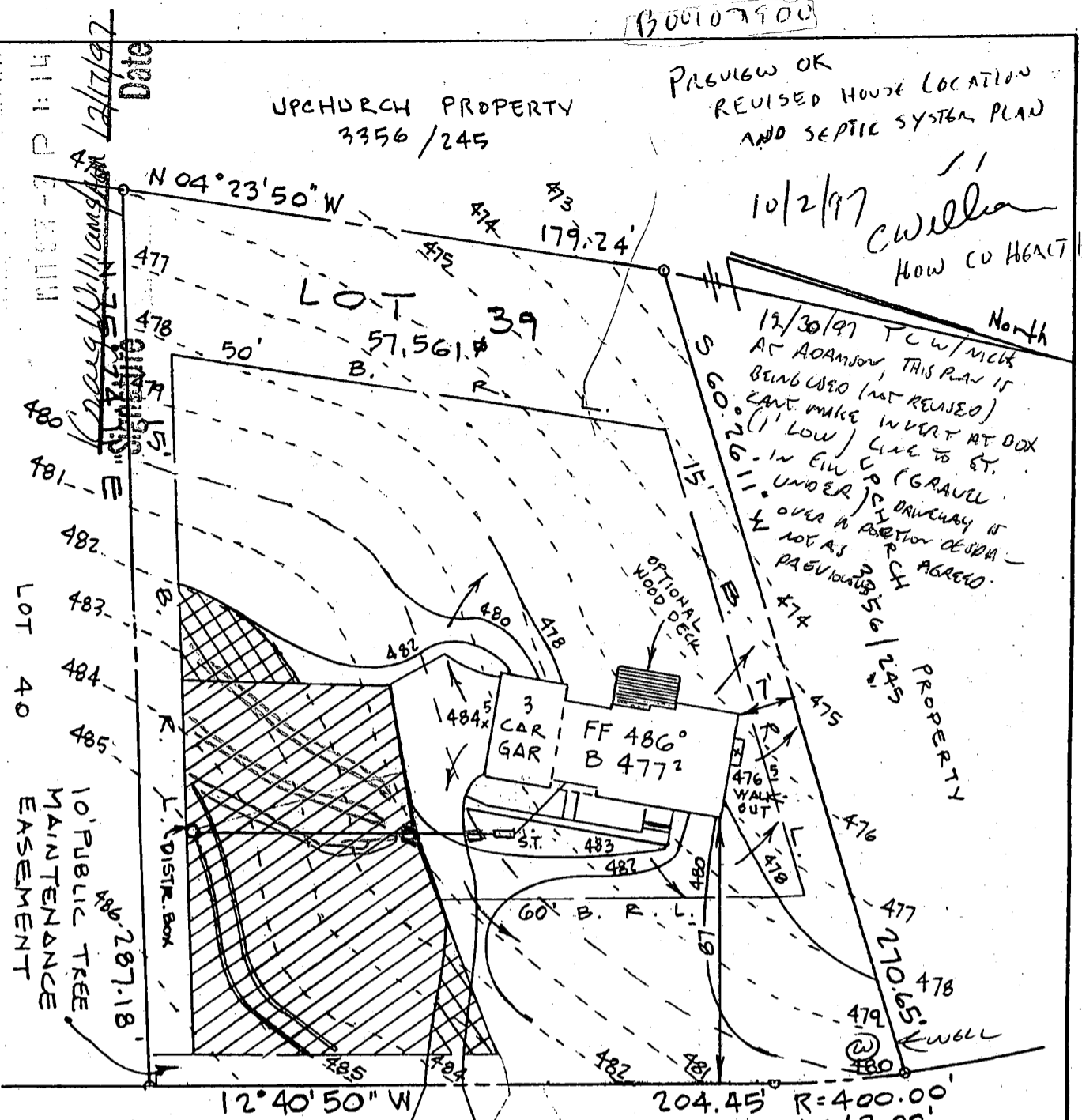
Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.

300107900

UPCHURCH PROPERTY
3356 / 245

PREVIEW OK
REVISED HOUSE LOCATION
AND SEPTIC SYSTEM PLAN

10/2/97 CWilla
HOW CO HEALTH



12/30/97 TC W/ NICK
AT ADAMSON, THIS PLAN IS
BEING USED (NOT REVISED)
CANT MAKE INVERT AT DOX
(1' LOW) LINE TO ST.
IN EIL C (GRAVEL
UNDER) DRIVEWAY IS
OVER IN POSITION DESIGN -
NOT AS PREVIOUSLY AGREED.

PLEASANT VIEW DRIVE
22' PAVING
50' R/W

SEPTIC DATA

| | |
|----------------|-------|
| HOUSE FIN. FL. | 486° |
| " BSK'T | 477.2 |
| " SEWER IN | 483.7 |
| SEPTIC INV. IN | 483.3 |
| TANK INV. OUT | 483° |
| " FIN. GR. | 484.5 |
| DISTR. INV. IN | 482° |
| BOX FIN. GR. | 485° |
| WATER EX. GR. | 479.5 |
| WELL FIN. GR. | 479.5 |

12/30/97 SITE INVD.
ORIGINAL DIST. BOX LOC. SHOWN IS 2' TOO DEEP, SOA
AREA BY ROAD B WILL REQUIRE PUMP, I SYSTEM
MAY BE MORE POSSIBLE BY GRAVITY

NOTE: (HO. CO. HEALTH DEPT.)
IF TRENCH LOCATION SHOWN
CANNOT BE ACHIEVED BY A
GRAVITY SYSTEM, A PUMP-UP
SYSTEM WILL THEN BE NECESSARY -

NOTE: TRENCH LENGTH TO BE
DETERMINED AT TIME OF SEPTIC
PERMIT ISSUANCE.

ENGINEER
JOHN L. SCHNEIDER, P.E.
100 N. ROLLING RD.
CATONSVILLE, MD. 21228
410-744-1945

RECORD PLAT N° 11568

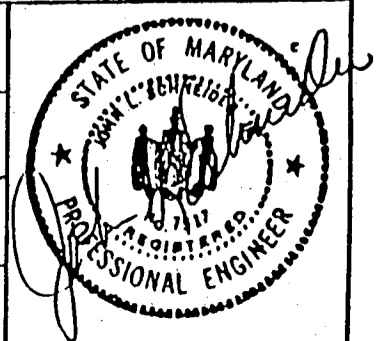
GRADING STUDY

LOT 39 "FULTON MANOR"

5th ELECTION DISTRICT
HOWARD COUNTY - MARYLAND

SCALE: 1" = 50'

DATE: 9/8/97 *



* REVISED 10/1/97 TO RESITE HOUSE PER HOME BUYER REQUEST



HOWARD COUNTY HEALTH DEPARTMENT

Joyce M. Boyd, M.D., County Health Officer

9/11/97

TO: Christopher Carlyle
Jamestown Builders

FROM: Amy McMillen

RE: Fulton Manor - Lot 39

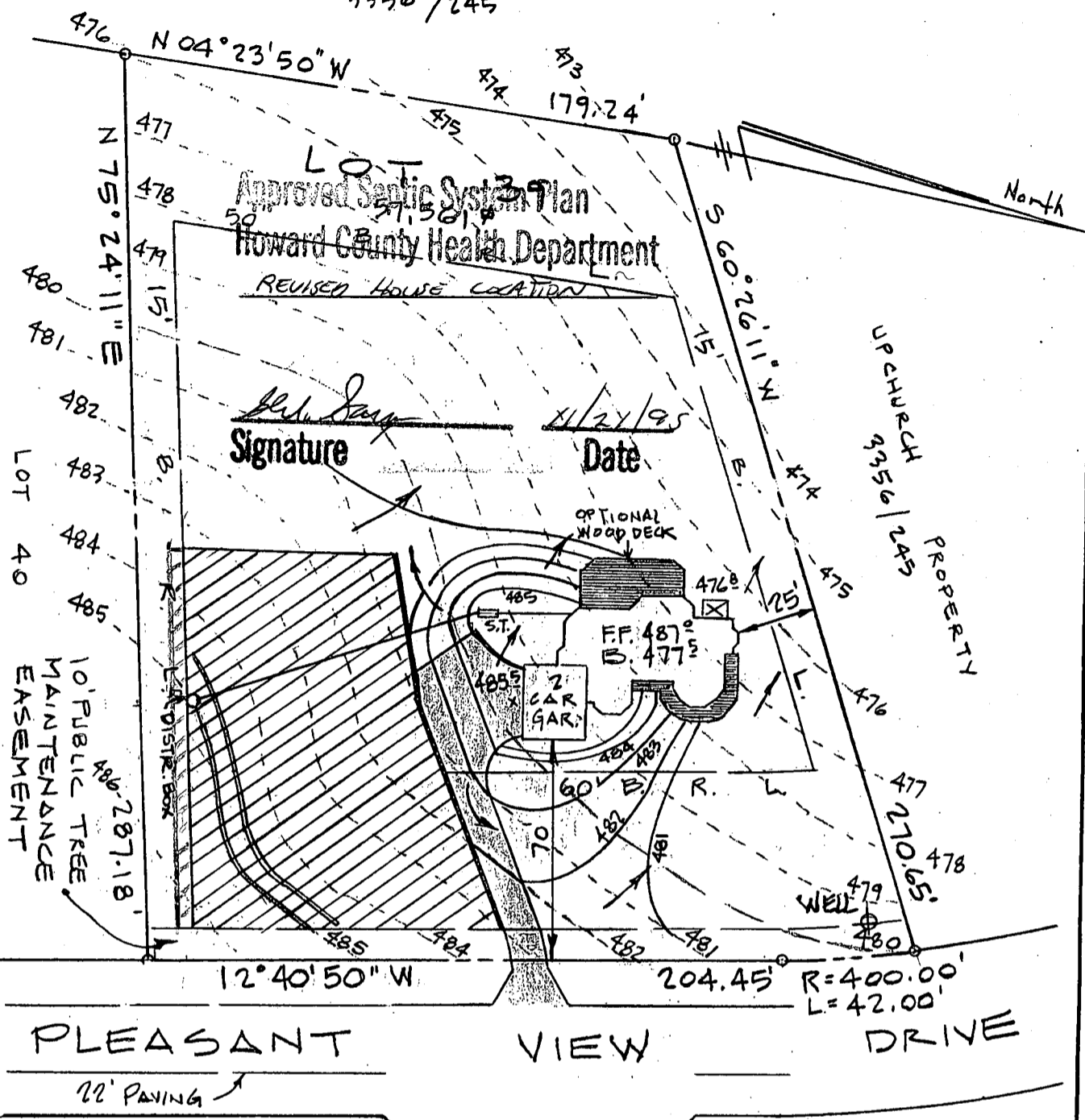
OWNER WILL
LOOK TO "MINIMIZE"
IMPACT, BUT
DOESNT WANT
DRIVEWAY
TO BE DIRECTLY
OPPOSITE
CAROL PA.
WILL PRESENT
A MINIMAL
GRADING PLAN
FOR CONSIDERATION
IF OK - INSTALL
TREES UNDER
DRIVEWAY

The driveway as proposed on the plan submitted 9/10/97 is unapprovable as shown - Approximately 25% of the sewage disposal easement would be unusable if the driveway were laid as proposed. See the previously approved driveway location from B62532 (11/95) for a similar approvable location.

First
9/12/97
(CW)

Number of pages (including cover sheet): 2

UPCHURCH PROPERTY
3356 / 245



SEPTIC DATA

| | |
|----------------|-------|
| HOUSE FIN.FL. | 487° |
| " BSMT | 477.5 |
| " SEWER IN | 483.7 |
| SEPTIC INV. IN | 483.2 |
| TANK INV. OUT | 482.9 |
| " FIN. GR. | 485° |
| DISTR. INV. IN | 482° |
| BOX FIN. GR. | 485° |
| WATER EX. GR. | 479.5 |
| WELL FIN. GR. | 479.5 |

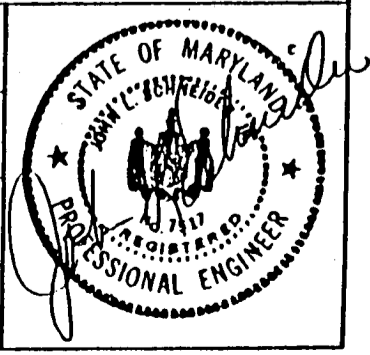
NOTE: TRENCH LENGTH TO BE DETERMINED AT TIME OF SEPTIC PERMIT ISSUANCE.

NOTE: (HO. CO. HEALTH DEPT.)
IF TRENCH LOCATION SHOWN CANNOT BE ACHIEVED BY A GRAVITY SYSTEM, A PUMP-UP SYSTEM WILL THEN BE NECESSARY -

ENGINEER
JOHN L. SCHNEIDER, P.E.
100 N. ROLLING RD.
CATONSVILLE, MD. 21228
410-744-1945

RECORD PLAT N° 11568

| | |
|---|------------------|
| GRADING STUDY | |
| LOT 39 "FULTON MANOR" | |
| 5TH ELECTION DISTRICT HOWARD COUNTY-MARYLAND | |
| SCALE: 1" = 50' | DATE: 10/31/95 * |



* REVISED: 11/21/95 TO REPOSITION HOUSE TO FRONT OF LOT

CST L.C. T/A JAINSTOWN BUILDERS
 10801 NICKORY RIDGE ROAD
 SUITE 210
 COLUMBIA, MARYLAND 21044
 PHONE (410) 992-9300 FAX (410) 992-5374

FACSIMILE COVER SHEET

DATE: September 10, 1997 FAX NUMBER: 410-313-2648

TO: Amy

REFERENCE Placement of driveway & home for Lot #39, Fulton Manor

SENT FROM: Christopher Carlyle

TOTAL NUMBER OF PAGES (including cover page): 2

FAX OPERATOR Tekky

REMARKS _____

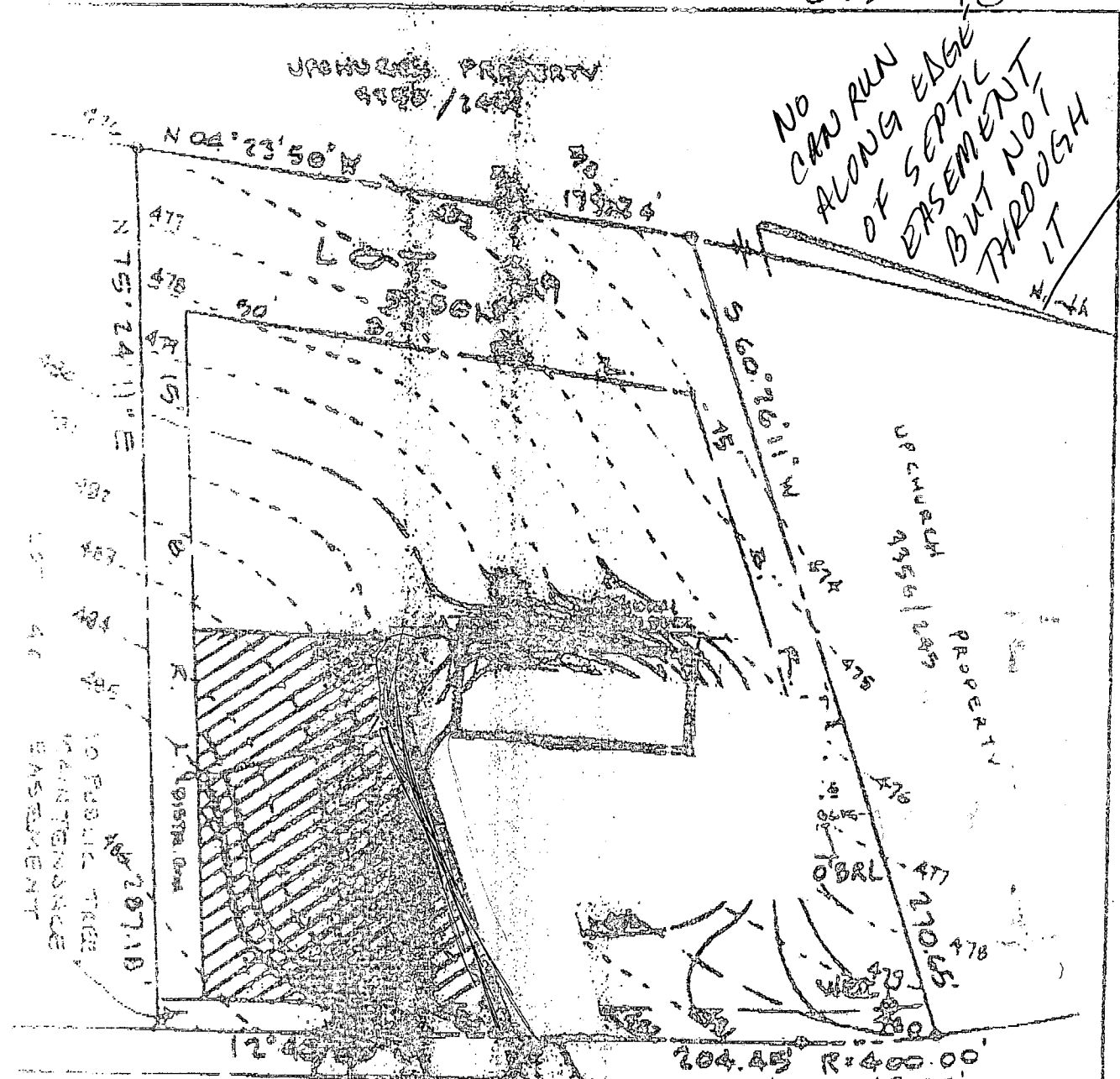
Dear Amy:

Please comment on the proposed grading study.

Thanks

Chris

3132648



PLEASANT VIEW DRIVE
 22' PAVING

SEPTIC DATA

| | | |
|--------|----------|-------|
| HOUSE | VIN. FL. | 4000' |
| | CEMENT | 4975' |
| | SEWER IN | 4039' |
| SEPTIC | INV. IN | 4039' |
| TANK | INV. OUT | 4039' |
| | FIN. GR. | 4000' |
| WATER | INV. IN | 4000' |
| POU | FIN. GR. | 4039' |
| WATER | EXGR. | 4790' |
| WELL | FIN. GR. | 4790' |

CAROL DRIVE

NOTE: (No. CO. HEALTH DEPT.)
 IF TRENCH LOCATION SHOWN
 CANNOT BE ACHIEVED BY A
 GRAVITY SYSTEM, A PUMP-UP
 SYSTEM WILL THEN BE NECESSARY -

ENGINEER