

7/20/98
10:00
9/17/98
LOPE - Proxtime

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 510568

A 49645-L

DISTRICT 4th

DATE 7-16-98

DATE SYSTEM APPROVED 7/20/98

INSPECTOR DVS

04-359321

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXXX~~ 410-313-2640

Fogle's Septic Clean, Inc.

IS PERMITTED TO INSTALL ALTER

ADDRESS 580 Obrecht Rd, Sykesville, MD 21784

PHONE 410-795-5674

SUBDIVISION Cattail Woods, Sec. II LOT 29 ROAD 1665 Brittle Branch Way

PROPERTY OWNER ~~Pulte Home Corporation~~ Sidney Perry

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS *MANHOLE CLEANOUT REQUIRED IF FINAL COVER OVER TANK IS GREATER THAN 3 FEET*

NUMBER OF BEDROOMS 4

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 280

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 145 feet up the right (294.65') lot line and 80 feet off that same lot line as seen when facing the lot from Brittle Branch Way. Run trenches on contour toward the left 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 KM 6-29-98

PLANS APPROVED BY Amy McMillen/Kim Maiste

DATE 06/19/98

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)

ALL PERMITS SIGNED AND RETURNED 5/11/01
B00129751 Deck

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

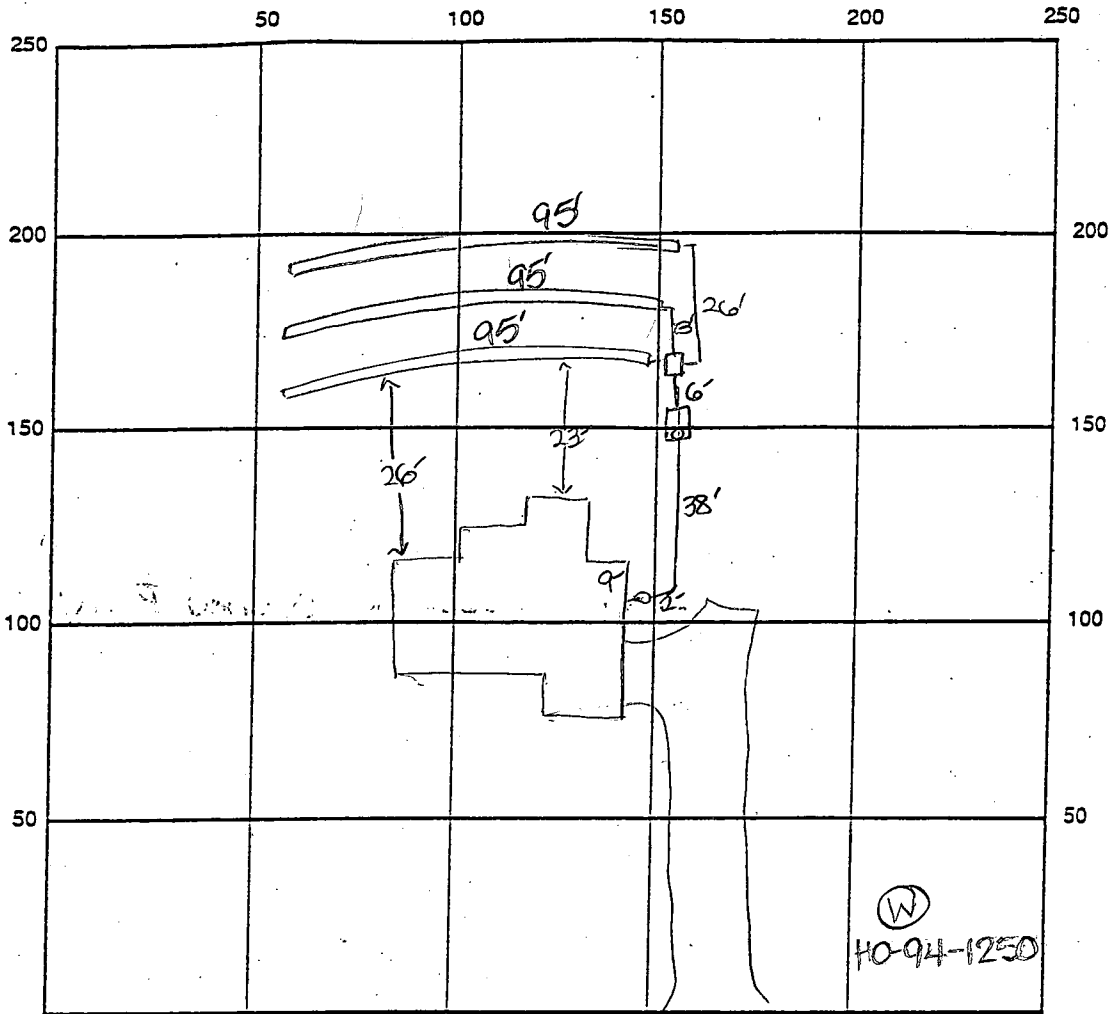
PERMIT VOID AFTER TWO YEARS

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 49645L



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

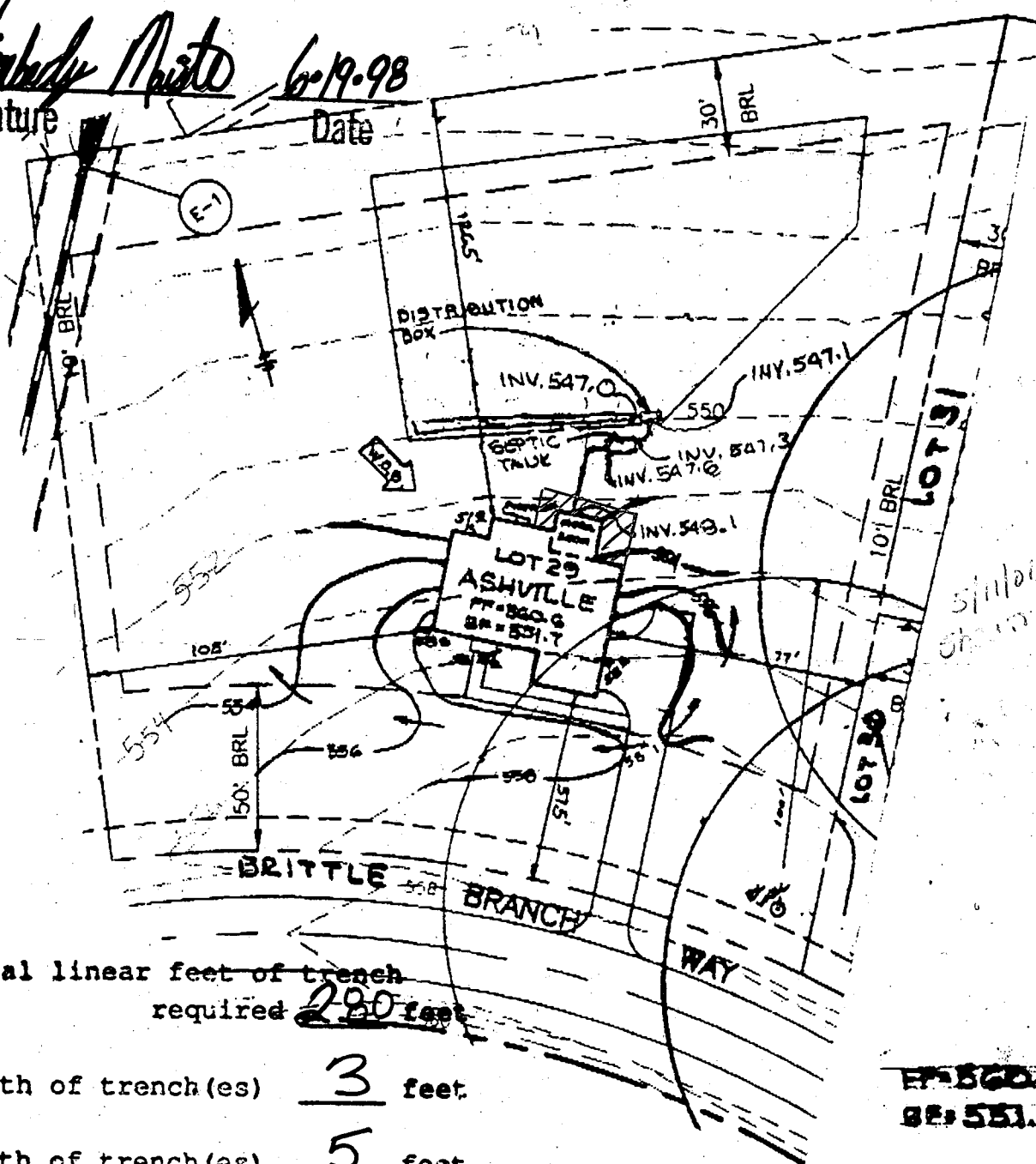
SEPTIC TANK LEVEL OK-1250 gal CLEANOUTS one at house, one on site.
 DISTRIBUTION BOX LEVEL OK
 DRAIN FIELD/TITLE DEPTH 5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 FT.
 EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 3x95 FT. → 285
 NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 855 SQ. FT.
 DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.
 ABSORBENT AREA — SQ. FT.

REMARKS: 7/20/98 FINAL INSP - OK TO COVER. ALL WORK (D/S)
9/17/98 WPI - OK to cover, P.A. 3.5' below grade, 1.5' above grade, has
2 piece caps, safety rope should be inside casing, line covered at house (RM)

DATE SYSTEM APPROVED 7/20/98 INSPECTOR [Signature]

Approved Septic System Plan
Howard County Health Department

Kimberly A. Pinto 6-19-98
Signature Date



Total linear feet of trench required 280 feet

Width of trench(es) 3 feet

Depth of trench(es) 5 feet

Depth of stone required below distribution pipe 2 feet

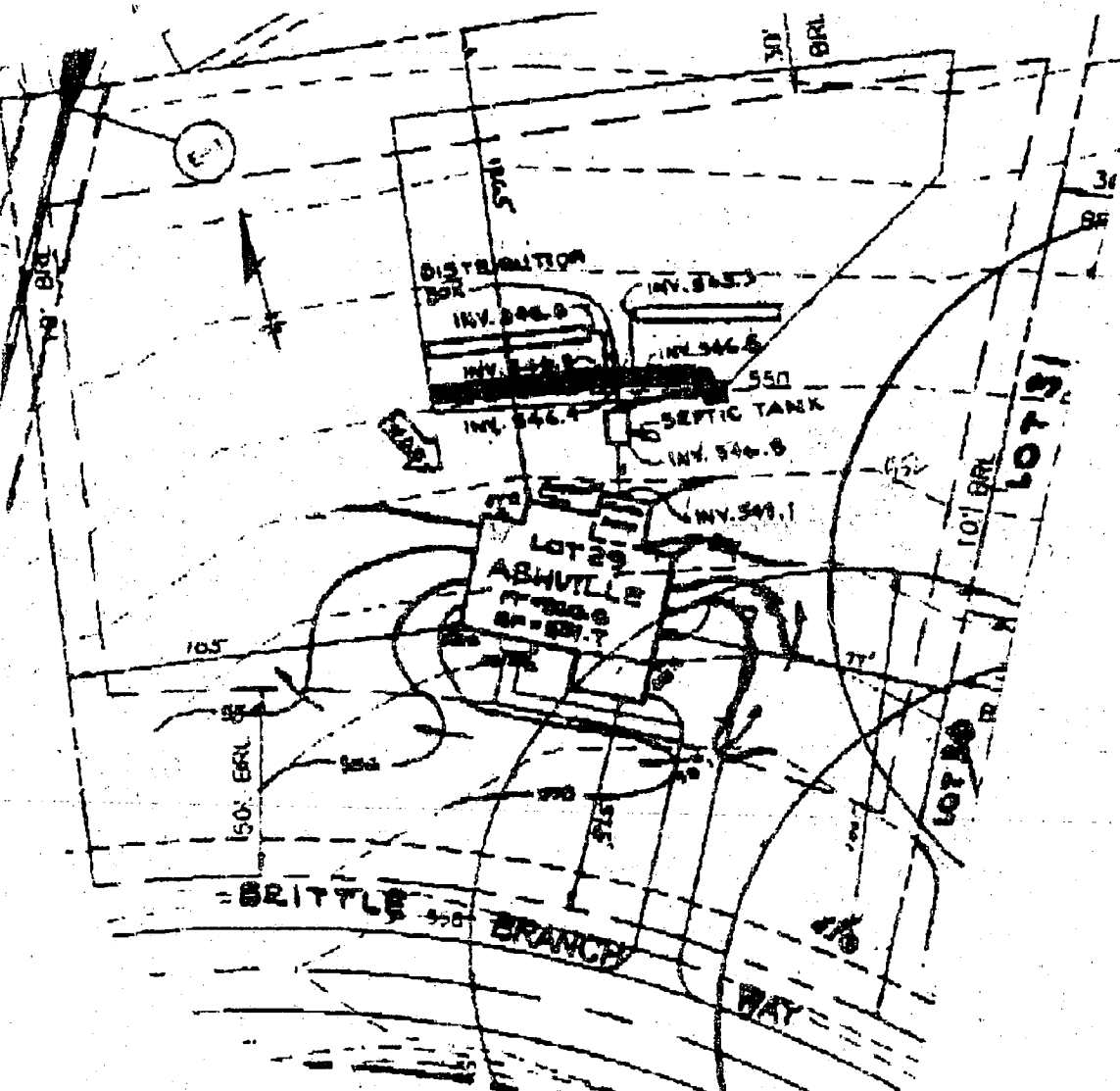
NOTE: FOR SEDIMENT CONTROL FEATURES SEE APPROVED GRADING PLAN GP-87-130.

T S A GROUP INC.
8480 BALTIMORE NATIONAL PIKE, SUITE 418
ELLCOTT CITY, MARYLAND 21043
(410) 485 - 8105

PLOT PLAN
CATTAIL WOODS
LOT 29
SECTION TWO, PARCEL 5

TAX MAP NO.7 PARCEL 137
PLAT NOS. 12500-12802
4TH ELECTION DISTRICT OF HOWARD COUNTY, MARYLAND
SCALE: 1"=50' DATE: 1998

AP-86016
82-531.7



WALL CHECK OK
MR 7/16/98

FP-560.6
BP-551.7

**PLOT PLAN
CATTAIL WOODS**

**LOT 29
SECTION TWO, PARCEL 5**

TAX MAP NO. 7 PARCEL 137
PLAT NOS. 12500-12502

4TH ELECTION DISTRICT OF HOWARD COUNTY, MARYLAND
SCALE: 1"=50' DATE: MAY 18, 1998

MENT CONTROL FEATURES SEE APPROVED
PLAN GP-97-130.

T S A GROUP INC.
BALTIMORE NATIONAL PIKE, SUITE 418
MILCOTT CITY, MARYLAND 21043
(410) 485 - 8105

REQUEST FOR SEPTIC PERMIT ISSUANCE

PROPERTY IDENTIFICATION

Subdivision Cattail Woods Lot # 29

Street Address 1665 Brittle Branch Way

INSTALLER

Company Name Fogles Septic Phone Number 410-795-5674

Company Street Address _____

=====

Date of septic permit request: 7-14-98

Date of septic permit issuance: 7-16-98

Receipt # B P510568

=====

Date copy of certified location drawing (wall check) received: 7/16/98

reviewed: 7/16/98

APPLICATION

HOWARD COUNTY

SERIAL NUMBER

PERMIT APPLICATION

DEPARTMENT OF INSPECTIONS, LICENSES & PERMIT
3430 COURT HOUSE DRIVE, ELLICOTT CITY, MARYLAND 21043

16025
Bldg 2131
-H 3175
3934

B 00112437

BUILDING ADDRESS (HOUSE NO., STREET, TOWN OR AREA)

1665 Brittle Branch Way
Woodbine, MD 21797

36314

GRADING/SEDIMENT CONTROL YES NO

SDP #

DESCRIPTION OF WORK AUTHORIZED

Model: Ashville
Plans on file
2 sty, full bsmt, 10r, 2fb, 1hb,
fp & garage (4br) fin ll, opt deck

LOT NO.	PARCEL NO.	SEG.	AREA	BLOCK NO.	LIBER	FOLIO
29	514	2	18	18	-	-
SUB DIVISION		ZONE	ZONE MAP	ELEC. DIST.	CENSUS TR.	
Cattail Woods		SD	7	4	10040	

OWNER NAME AND ADDRESS
Pulte Home Corporation
1501 S. Edgewood St., #K
Baltimore, MD 21227

PHONE NO.
(410) 644-5603

OCCUPANT'S NAME AND ADDRESS
N/A

PHONE NO.

ARCHITECT OR ENGINEER'S NAME AND ADDRESS
same as owner

PHONE NO.

CONTRACTOR'S NAME AND ADDRESS
same as owner

PHONE NO.

EXISTING USE
Vacant Lot

PROPOSED USE
SFD

EST. CONSTRUCTION COST
117,000.00

LICENSE NUMBER

PERMIT FEE

SIZE OF BLDG.	FRONT	DEPTH	HEIGHT
4344	52'	46'	10'
	52'	30'	10'
	52'	36'	10'

TYPE OF BLDG.	AREA	VOLUME	ROOF
B. ROOMS	1801	"	ASP
ROOMS	1176	"	Gable
BATHS		"	
FIREPLACES	1367	"	

FOOTINGS	FOUNDATION	S. WALLS
16" x 8"	8" conc	Wd frm siding

UTILITIES				
WATER/WELL	SEWER/SEPTIC	GAS	ELECTRICITY	TYPE OF HEAT
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	AC

I have carefully examined and read this application and know the same is true and correct, and that is doing this work, all provisions of Howard County Ordinances and the State Laws of Maryland will be complied with, whether specified or not, and I will notify the Department of Inspections, and Permits twenty-four hours in advance when I am ready for the inspections called for elsewhere in the application, and that no work will be covered up until such inspections have been complied with.

SIGNATURE
Const. Admin. Asst.

TITLE

DATE
6/16/98

FOR OFFICE USE ONLY

DISTANCE IN FEET FROM R/W LINE TO FRONT BUILDING LINE _____

SIDE YARD
(DISTANCE IN FEET FROM SIDE BLDG. LINE TO SIDE PROPERTY LINE)

TO SIDE BUILDING LINE
DISTANCE IN FEET, REAR YD. REQUIRING SET _____

ACK _____ (CORNER LOT ONLY)

SDP # _____

FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING		
SHA		
SEDIMENT/GRADING		
BUILDING OFFICIAL		
WATER & SEWER		
HEALTH DEPT.	6-19-98	Kim Maute
FIRE PROTECTION		
STORM WATER MGMT		

Check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

CAUTION
To begin construction before a permit placard has been issued displayed on the job is a violation of the law.
Use and occupancy permit must be applied for two weeks it will be issued.

PLEASE SHOW ZIP CODES AND AREA CODES WHEREVER REQUIRED.

4 58345

APPROVED _____ DATE _____

Distribution of Copies:
White - Building Official
Green - Planning & Zoning
Yellow - Engineering
Pink - Health Dept.
Gold - S.H.A.

APPLICATION

PERCOLATION TESTING

A 49445 L

P _____

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

DISTRICT 4th

DATE 9/30/93

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 Parcel 137, Inc. Pulte Home Corp.
15298 Union Chapel Road
ADDRESS Woodbine, MD 21797 PHONE (410) 442-2101

AGENT OR PROSPECTIVE BUYER Engineer: TSA Group, Inc.
8480 Baltimore National Pike, Ste. 418
ADDRESS Ellicott City, MD 21043 PHONE (410) 465-6105

PROPERTY LOCATION:
SUBDIVISION Cattail Woods - Section 2 LOT NO. AND RETURNED 6-19-98 Serial # 80012437 29 - SFD-4Bun
ROAD AND DESCRIPTION 1665 End of Brittle Branch Way

TAX MAP 7 PARCEL # 137

SIZE OF LOT 1 Ac +/- TYPE BLDG. Single Family Dwelling
(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. Parcel 137, Inc. Bruce B. Benda President
(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

COUNTY #

SOIL PROFILE

0'

Vertical rectangular box for soil profile notes on the left side.

Vertical rectangular box for soil profile notes in the middle left side.

Vertical rectangular box for soil profile notes at the bottom left side.

SOIL PROFILE

0'

Vertical rectangular box for soil profile notes on the right side.

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	

REMARKS _____

TYPE OF SOIL _____

TESTED BY _____ ALSO PRESENT _____

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT/BEDROOM _____

APPLICATION

PERCOLATION TESTING

A 49645L

P _____

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

DISTRICT _____

DATE 9-27-93

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 Bruce Brendle

ADDRESS 15298 Union Chapel Rd PHONE _____

AGENT OR PROSPECTIVE BUYER Joint Venture

ADDRESS 1555 Union Chapel Rd PHONE _____

PROPERTY LOCATION:

SUBDIVISION CaHail Woods Sec II LOT NO. 29

ROAD AND DESCRIPTION Rt 97 sid

TAX MAP 7 PARCEL # 137

SIZE OF LOT 1 ACRE 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 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 _____

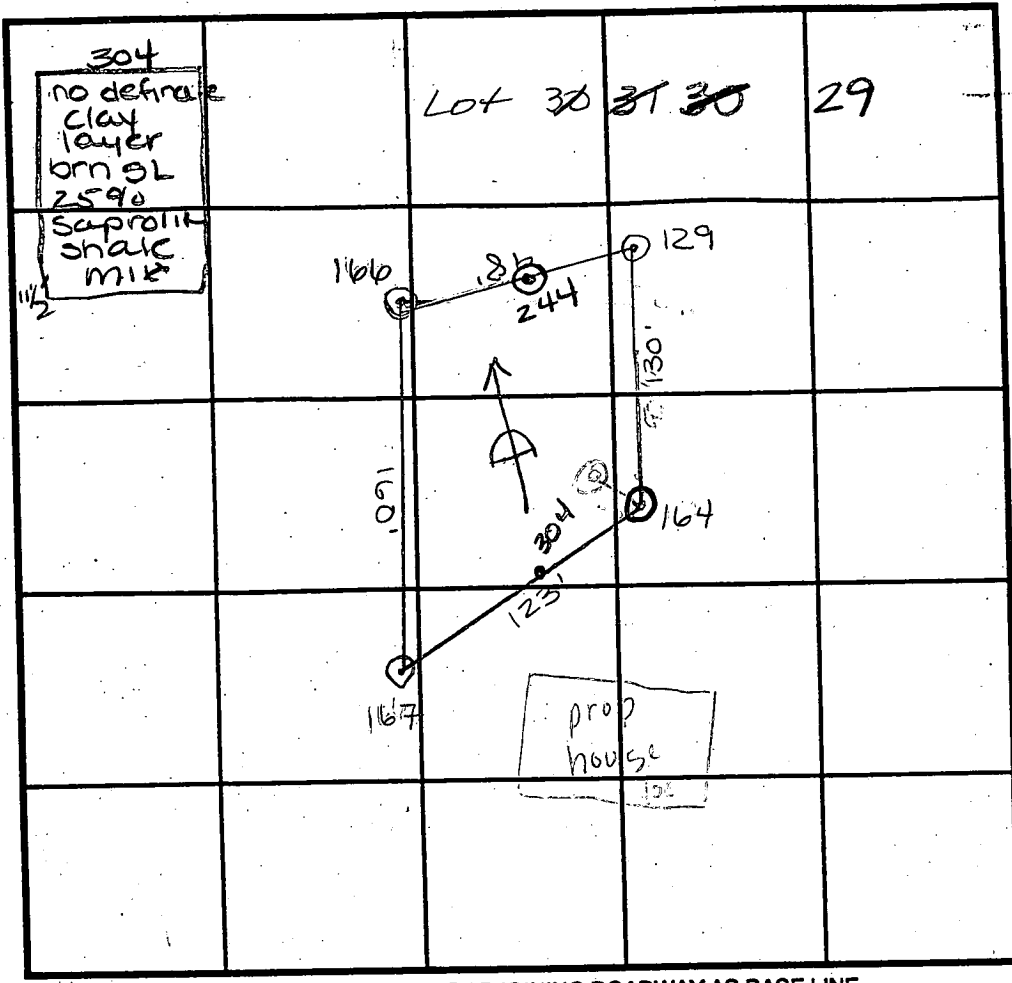
THIS IS NOT A PERMIT

A49645L
COUNTY #

SOIL PROFILE 166
10' brn C
5' lgt brn SIL
6' shelf of Saprolite OK
12 1/2'

167
1 1/2' brn C
brn w/ red & yellow streaks SIL
9' decayed shale horiz. bedding
11'

164
3' Brn/ orange C
red/brn SIL
6' shelf of Saprolite and shale
12'



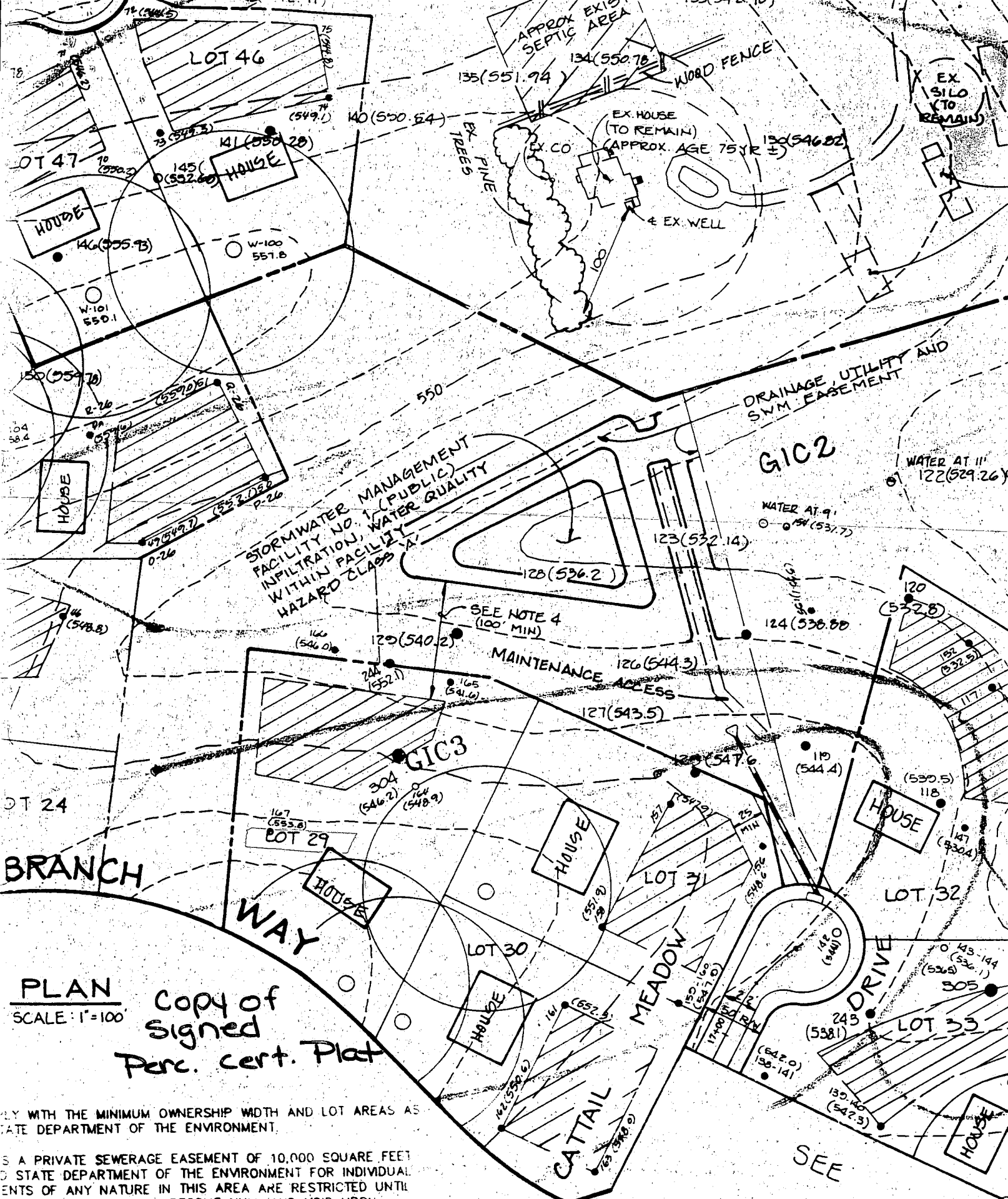
SOIL PROFILE 129
0' 1 1/2' brn C
3' Brn SIL
20% shale
12'
244
brn SCL
1 1/2' lgt brn SIL
some rock Saprolite throughout
Shallow system only
12'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	COR Lot 38 TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
12/1/93	166	5' / VII 1/2'	1:53 ¹⁵	2:03	2:03	2:22	19 min
	167	2 1/2' / VII'	2:04 ⁴⁵	2:04 ⁴⁵	2:04 ⁴⁵	2:10	5 1/4 min
	164	3' / VII 2'	2:35 ³⁰	2:37	2:37	2:41 ³⁰	4 1/2 min
		6 1/2' / VII 2'	2:42 ³⁰	2:43 ³⁰	2:43 ³⁰	1:45	1 1/2 min
11/3/93	129	4' / VII'	3:15 ³⁰	3:16 ³⁰	3:16 ³⁰	3:18 ³⁰	2 min
		6' / VII'	3:21 ³⁰	3:26 ³⁰	3:26 ³⁰	3:35	8 1/2 min
3/15/94	244	Visual to 12'	shallow system only		OK		
3/24/94	304	2' / VII 1/2'	11:34 ⁴⁵	11:36 ³⁰	11:36 ³⁰	11:41 ³⁰	5 min

REMARKS Hold for wet season
 TYPE OF SOIL Glenn Co Loam
 TESTED BY Amy McMillen - CRAIG WILLIAMS ALSO PRESENT B. SANDERS
 TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 10 min TRENCH WIDTH 3'
 INLET DEPTH 3' MAXIMUM BOTTOM DEPTH 5' SQ. FT./BEDROOM 210 ft²

F
Time too fast through Saprolite



PLAN
 SCALE: 1"=100'
 Copy of signed
 Perc. cert. Plat

CONFORM WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREAS AS SET BY THE STATE DEPARTMENT OF THE ENVIRONMENT.

THIS IS A PRIVATE SEWERAGE EASEMENT OF 10,000 SQUARE FEET GRANTED BY THE STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL USE. ALL EASEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL THESE EASEMENTS SHALL BECOME NULL AND VOID UPON THE COMPLETION OF A SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY FOR ENCROACHMENT INTO THE PRIVATE SEWERAGE EASEMENT. A SEWERAGE EASEMENT PLAT SHALL NOT BE NECESSARY.

WELLS OR SEWERAGE EASEMENTS ARE LOCATED WITHIN 100 FEET



copy of signed
 Preliminary Plan

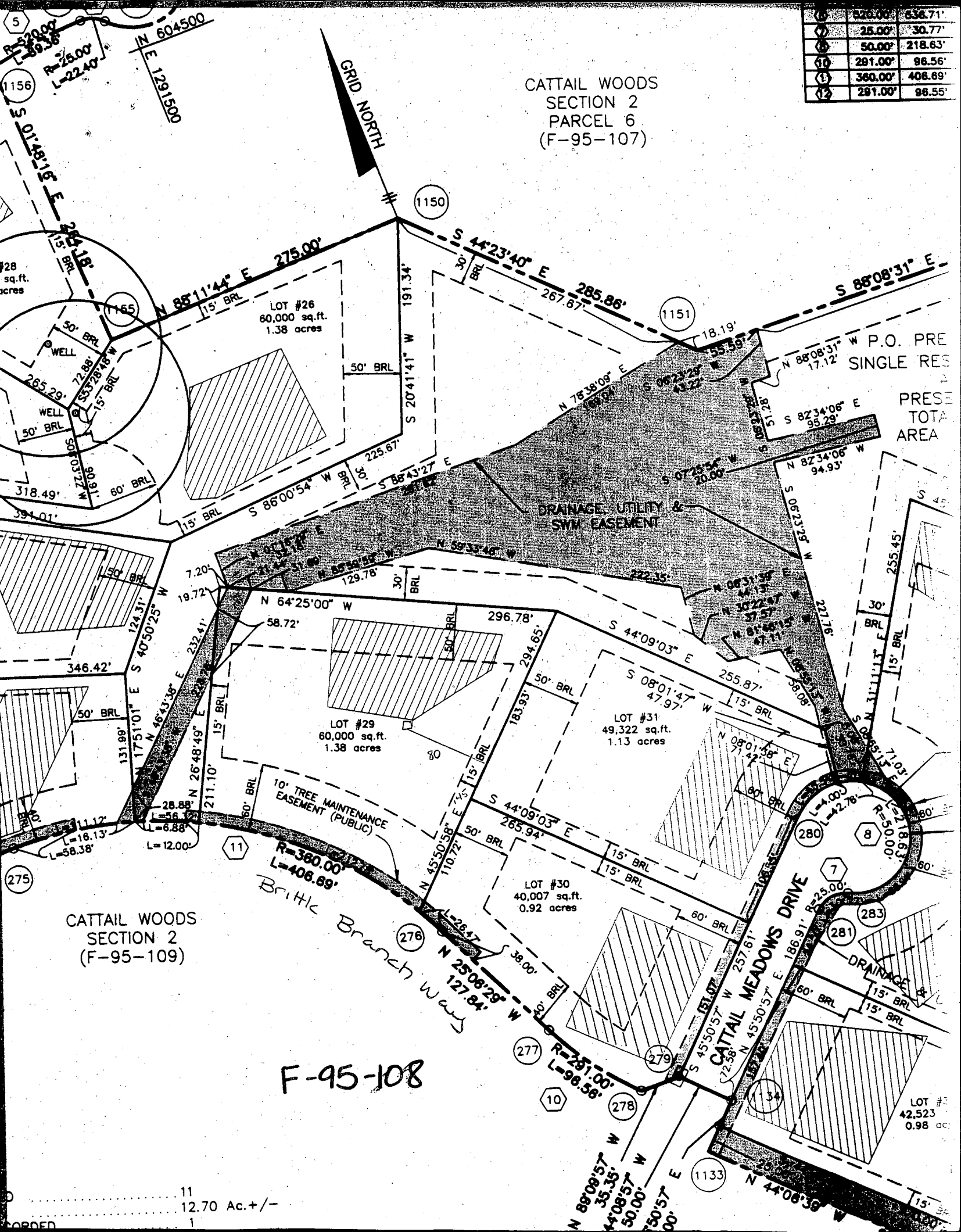
7

LINE

Δ = 64' 43.33"
 R = 378.45'
 L = 378.45'

6	526.00'	636.71'
7	25.00'	30.77'
8	50.00'	218.63'
9	291.00'	98.56'
10	360.00'	406.89'
11	281.00'	98.55'

CATTAIL WOODS
SECTION 2
PARCEL 6
(F-95-107)



CATTAIL WOODS
SECTION 2
(F-95-109)

F-95-108

11
12.70 Ac. +/-
1

C1 9536 SEQUENCE NO. (MDE USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

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 **A49645-L**

DATE RECEIVED
090597

DATE WELL COMPLETED
082697

Depth of Well
170
 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL"
HO-94-1250

OWNER: **Joint Venture**
 STREET OR RFD: **Brittle Branch Way** TOWN: **Lisbon**
 SUBDIVISION: **Cattail Woods** SECTION: _____ LOT: **29**

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	
Dirt	0	1	
Soft Br. Shale	1	69	
Soft Br. Shale	69	70	X
Soft Br. Shale	70	90	
Hard Blue Shale	90	98	
Br. Shale & Quartz	98	99	X
Blue Shale	99	106	
Br. Shale	106	107	X
Blue Schist	107	170	

GROUTING RECORD
 WELL HAS BEEN GROUTED **Y**
 (Circle Appropriate Box)
 TYPE OF GROUTING MATERIAL (Circle one)
 CEMENT **CM** BENTONITE CLAY **BC**
 NO. OF BAGS **29** NO. OF POUNDS **2726**
 GALLONS OF WATER **174**
 DEPTH OF GROUT SEAL (to nearest foot)
 from **0** ft. to **93** ft.
 (enter 0 if from surface)

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): **95**

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: **0**
 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**
 DRILLERS LIC. NO. **MWD256**
Dana Kyker Jr II

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)
Dana Kyker Jr II
 LIC. NO. **MWD256**
 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

DEPTH (nearest ft.)

H	O	9	5	1	7	0
8	9	11	15	17	21	
23	24	26	30	32	36	
38	39	41	45	47	51	

SLOT SIZE 1 _____ 2 _____ 3 _____
 DIAMETER OF SCREEN _____ (NEAREST INCH)
 from _____ to _____

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 _____
 70 _____ 72 _____ 74 _____ 75 _____ 76 _____
 TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST
 HOURS PUMPED (nearest hour) **3**
 PUMPING RATE (gal. per min.) **7.5**
 METHOD USED TO MEASURE PUMPING RATE: **submersible**
 WATER LEVEL (distance from land surface)
 BEFORE PUMPING: **39** ft.
 WHEN PUMPING: **44** 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 **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)
Dwell
Brittle Branch Way

B 1 8793 SEQUENCE NO (MDE USE ONLY)
 THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6, ON ALL CARDS

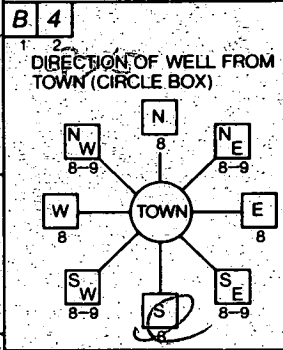
STATE OF MARYLAND
 PERMIT TO DRILL WELL
 please print or type

STATE PERMIT NUMBER
 H0-94-1250
 fill in this form completely

Date Received (APA) 0810497
OWNER INFORMATION
 Venture Joint 2016
 15 Last Name 34 Owner 34 First Name
 1st St Union Chapel Rd
 36 Street or RFD 55
 Woodbine Md 21797
 57 Town 70 State 72 Zip 76

B 3 LOCATION OF WELL
 HOWARD
 8 COUNTY 21
 CATAHAL WOODS
 23 SUBDIVISION 42
 SECTION 44 46 LOT 29 48 50
 LISBON
 52 NEAREST TOWN 71
 MILES FROM TOWN (enter 0 if in town) 1 MI
 73 76 77 78

DRILLER INFORMATION CIRCLE: MSD/MGD/MWD
 DANA KIRK TR II 281
 Driller's Name 7 License No. 80
 Westminster Rotary Well Drilling Co
 Firm Name
 P.O. Box 861 Westminster, Md
 Address
 Dana Kirk II
 Signature Date



B 4 NEAR WHAT ROAD
 WHITE BRANCH WAY
 11 30
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 WEST [X] EAST
 SOUTH
 34 37
 DISTANCE FROM ROAD
 ENTER FT OR MI 1/2
 38 39
 TAX MAP: 7 BLK: PARCEL 157

B 2 WELL INFORMATION
 APPROX. PUMPING RATE (GAL. PER MIN.) 6
 8 12
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 405
 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)
 HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
 INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
 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 H49645-L
 COUNTY NAME COUNTY NO.
 STATE SIGNATURE DATE ISSUED 0810897 Kimberly Maisto 8/8/98
 43 48 CO SIGNATURE EXP. DATE
 NORTH GRID 542000 EAST GRID 0781000
 50 55 57 63

APPROXIMATE DEPTH OF WELL 225 FEET
 24 28

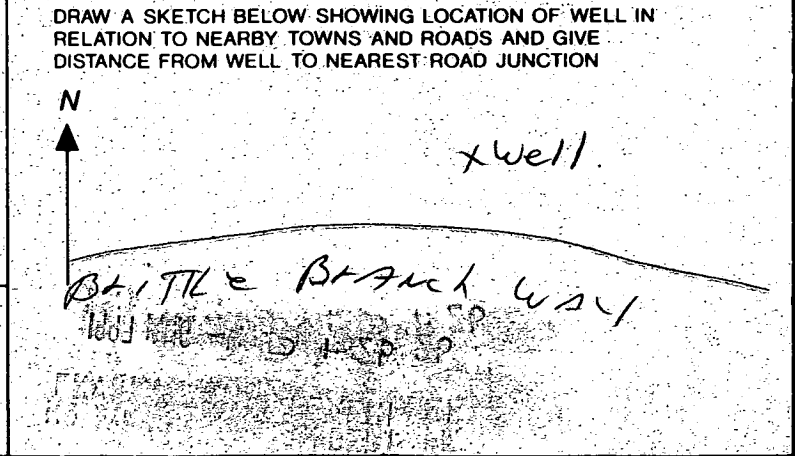
APPROXIMATE DIAMETER OF WELL 6 INCH
 NEAREST INCH

METHOD OF DRILLING (circle one)
 BORED (or Augered) JETTED Jetted & DRIVEN
 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)
 CABLE REVERSE-ROTARY DRIVE-POINT
 other

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
 SOURCES OF DRILLING WATER
 1. CITY
 2.
 3.
 WRITE THE BOX NUMBER FROM THE MAP HERE

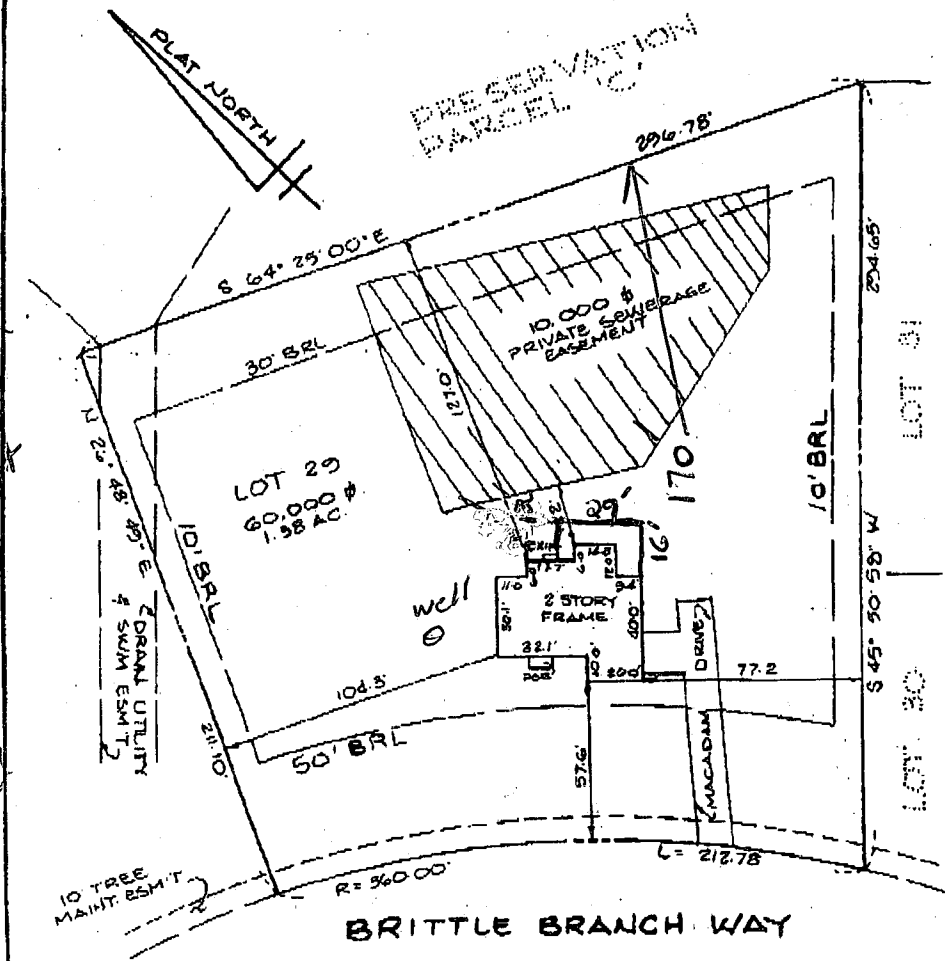
 000
 000

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)
 THIS WELL WILL NOT REPLACE AN EXISTING WELL
 THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY - CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
 THIS WELL WILL DEEPEM AN EXISTING WELL
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52



Not to be filled in by driller (MDE OR COUNTY USE ONLY)
 APPROX. PERMIT NUMBER 54 GAP 63
 FORCE M WRITE INITIALS IN BOX PERMIT No. H0-94-1250
 67 68 70 71 72 73 74 75 76 77 78 79

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 CONFIGURATION AS CURRENTLY RECORDED, BEING SUFFICIENT FOR SETTLEMENT PURPOSES, BUT BEING INSUFFICIENT FOR THE SETTING OF PROPERTY CORNER PINS ON THE GROUND.



3 section deck
9'x16'
14'x12'
6'x10'
29' x IRREGULAR Shape

B00129751
5/11/01
Deck is 70' wide at portion of house closest to trench - 16' to e
trenches - OK to continue - no impact area will not need to be accessed again.
A. McC... M...

TOP OF FOUNDATION WALL ELEV. = 559.5'

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 FIRM 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
10-17-98 FINAL

LOCATION DRAWING
CATTAIL WOODS
SECTION 2
LOT 29
1665 BRITTLE BRANCH
WAY

RECORD PLAT No. 12501
FEMA FIRM No. 240046 0001B
DATED DECEMBER 4, 1986

TSA GROUP, INC.
planning • architecture • engineering • surveying
8400 BALTIMORE NATIONAL PKF, SUITE 418
ELLCOTT CITY, MARYLAND 21043
(410) 465-9100

4TH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
SCALE : 1" = 50' DATE : 7-16-98