

9/24/97 needs house conn (KM)

# PERMIT

## SEWAGE DISPOSAL SYSTEM

### DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 58973-D

A 49646-P

DISTRICT 4th

DATE 9-13-97

DATE SYSTEM APPROVED 11/26/97

INSPECTOR ALM

9/24/97  
open trench 10:00ish → 2:00  
11/25/97  
a.m. CD.

HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
461-9933

04-359-526

INDEXED

Fogle's Septic Clean, Inc.

IS PERMITTED TO INSTALL X ALTER

ADDRESS 558 Obrecht Road Sykesville, Maryland 21784 PHONE (410) 795-5674

SUBDIVISION Cattail Woods LOT 44 ROAD 1737 Cattail Woods Lane

PROPERTY OWNER JOEL & KAREN G WIENER

ADDRESS \_\_\_\_\_

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 280

AND RETURNED 6-5-98  
Serial # B10 112200 - ded

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 115 feet up the left (396.30) lot line and 15 feet off that same lot line as seen when facing the lot from Cattail Woods Lane. Run trenches on contour toward the right 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 9/9/97

PLANS APPROVED BY Amy McMillen / revised Glen Savage

DATE 8/28/97

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

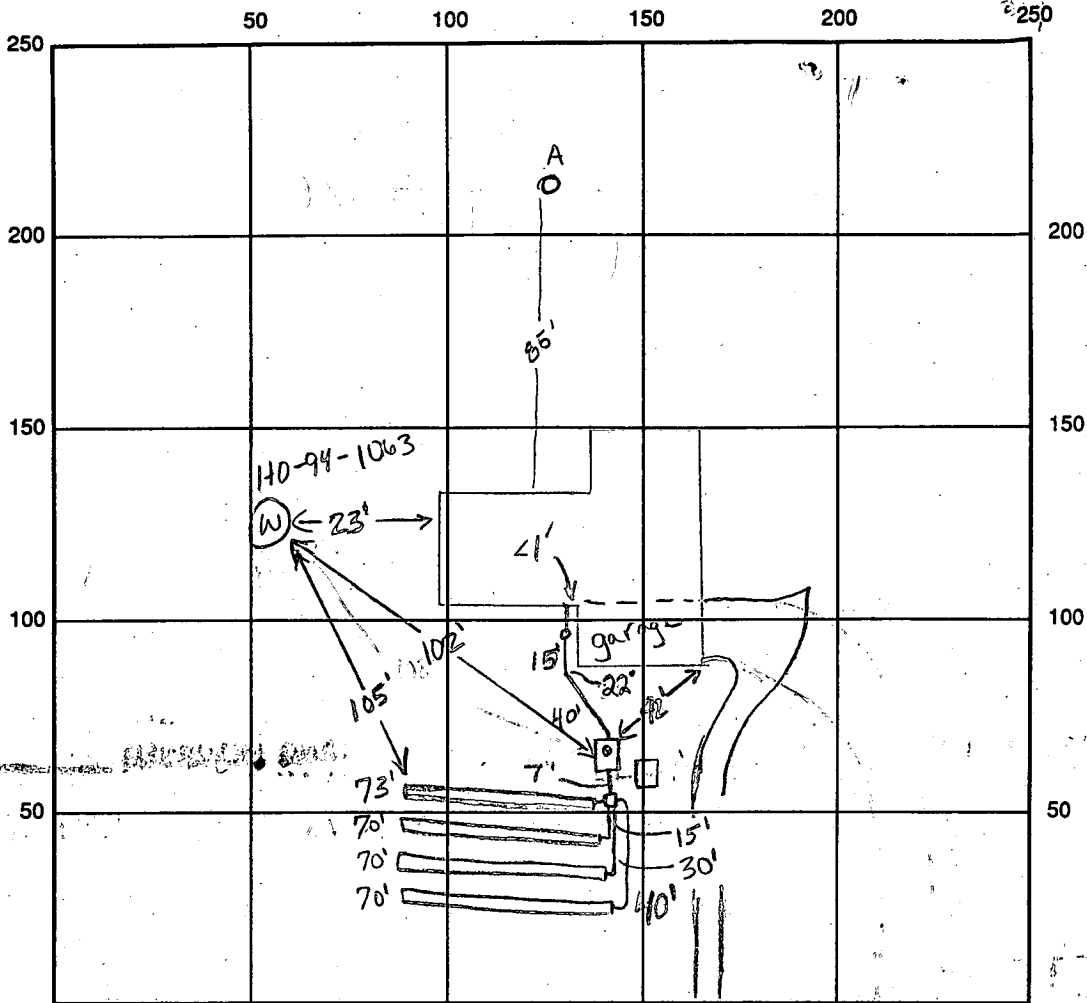
LOG. PERMIT SIGNED

AND RETURNED 1-13-99

Serial # B10 115743

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

A 49646-P



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE CATTAIL WOODS LN

A  
red brn  
cl silm  
20  
1gt red  
to brn  
sil silm  
2070  
Rx  
11.0

SEPTIC TANK LEVEL OK CLEANOUTS 1 on tank, 1 at house  
 DISTRIBUTION BOX LEVEL OK, baffle in  
 DRAIN FIELD/TITLE DEPTH 7.0 FT. TRENCH WIDTH 2.0 FT. INLET DEPTH 3.0 FT.  
 EFFECTIVE GRAVEL DEPTH 4.0 FT. TOTAL LENGTH 70x4 FT.  $\rightarrow 280$   
 NUMBER OF TRENCHES 4 ONE SIDEWALL/BOTTOM AREA 1120 SQ. FT.  
 DRYWALL INSIDE DIAMETER      FT. EFFECTIVE DEPTH BELOW INLET      FT.  
 ABSORBENT AREA      SQ. FT.

REMARKS: 9/24/97 needs house connection; ok to stone trench leaving ends  
open (km)  
9/24/97 (pm) ok to cover all work (km)  
11/4/97 HOUSE CONN OK TO COVER: HOLD FOR RESOLUTION  
OF SECOND S.T. ISSUE (MR) 11/20/97 Test hole dug @ rear of prop  
to establish repair area there - test OK - set 2nd tank for future repair in  
this area. contractor to scrt diagram of 2nd tank installation  
 DATE SYSTEM APPROVED 11/26/97 INSPECTOR A M Melle

# APPLICATION

PERCOLATION TESTING

A 49646P

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 Homes Corp.

ADDRESS 15298 Union Chapel Road Woodbine, MD 21797 PHONE (410) 442-2101

AGENT OR PROSPECTIVE BUYER Engineer: TSA Group, Inc.

ADDRESS 8480 Baltimore National Pike, Ste. 418 Ellicott City, MD 21043 PHONE (410) 465-6105

PROPERTY LOCATION:

SUBDIVISION Cattail Woods - Section 2 LOT NO. 44

ROAD AND DESCRIPTION End of Brittle Branch Way (1737 Cattail Woods Lane)

TAX MAP 7 PARCEL # 137

SIZE OF LOT 1 Ac +/- 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. 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'


SOIL PROFILE

0'

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 49646P

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 Cattail Woods Sec II LOT NO. 44

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 \_\_\_\_\_

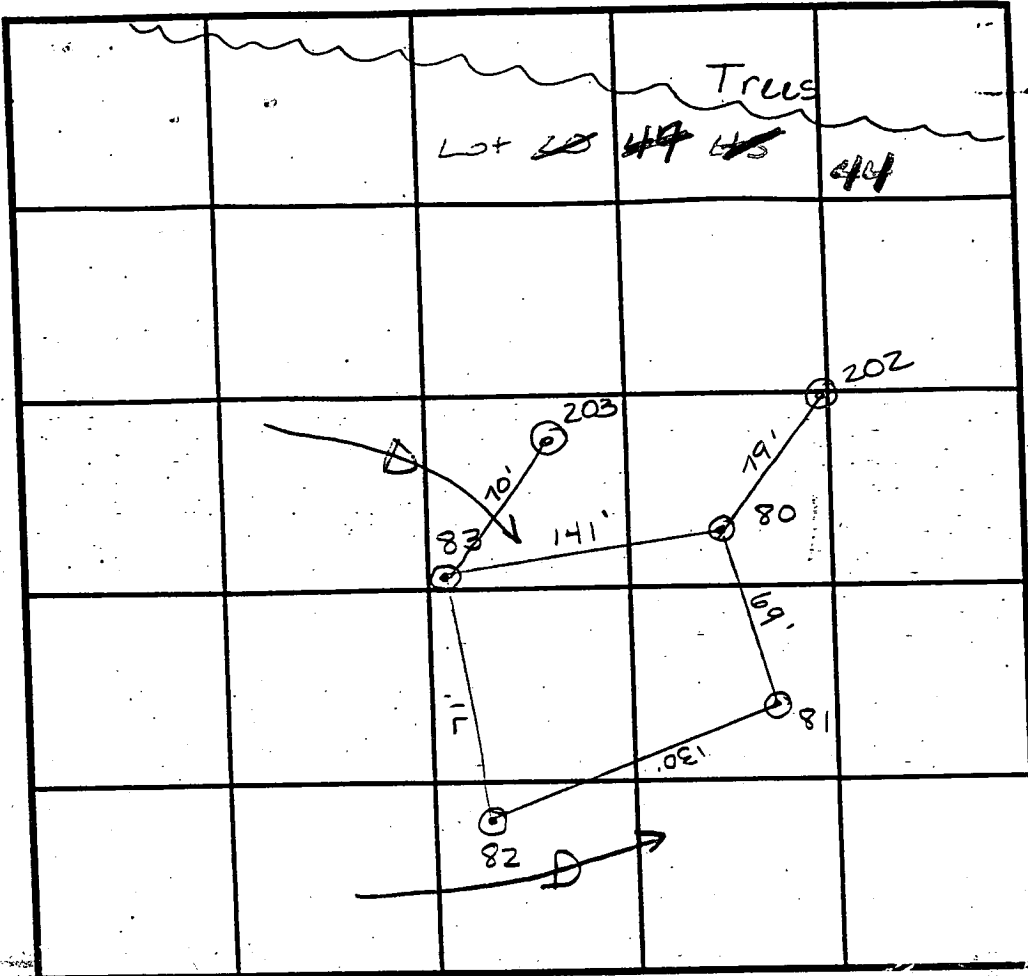
# THIS IS NOT A PERMIT

A49646P

COUNTY #

SOIL PROFILE

1' 0" 80  
red  
C  
3'  
reddish  
lgt brn  
Si SL  
(mica)  
w/  
yellow/  
tan  
streaks  
Some  
Saprolite  
12'



SOIL PROFILE

82  
0'  
brn/  
red C  
4'  
brn w/  
slight  
tint  
of red  
SiL  
Some  
Saprolite  
throughout  
(OK)  
12'  
203  
reddish CL  
4'  
tan SSiL  
Saprolite  
mixed  
throughout  
5%  
13'  
202  
red brn  
SiCL  
2 1/2'  
orange brn  
SSiL  
13'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

81  
orange/  
brn  
C  
4'  
orange  
brn  
SiL  
some  
Saprolite  
12'

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11/30/93	(81)	4 1/2' V12'	1:52 <sup>30</sup>	1:56 <sup>30</sup>	1:56 <sup>30</sup>	2:03	6 1/2 min
	(80)	3' V12'	1:50	1:54	1:54	2:02	8 min
	(83)	3' V12 1/2'	1:03	1:06	1:06	1:12	6 min
	(82)	4' V12'	1:00	1:05 <sup>10</sup>	1:05 <sup>10</sup>	1:15	9 3/4 min
3/15/94	(203)	4' V13'	10:54	10:59	10:59	11:08 <sup>30</sup>	9 1/2 min
3/15/94	(202)	2 1/2' V13'	10:45	10:47 <sup>30</sup>	10:47 <sup>30</sup>	10:52	4 1/2 min

83  
tan  
C  
3'  
tan  
SSiL  
12'

REMARKS Hold 81-82 for wet season perc's wet done on adjacent  
10+ - OK  
 TYPE OF SOIL Glenelg Loam  
 TESTED BY A. McMillen / C. Williams ALSO PRESENT B. Sanders  
 TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 70 min TRENCH WIDTH 28'  
 INLET DEPTH 30' MAXIMUM BOTTOM DEPTH 70' SQ. FT./BEDROOM 210 ft<sup>2</sup>

COUNTY #

SOIL PROFILE 87

10' orange/red c

3' tan/brn SIL

5' Saprolite shelf mostly soil OK

12 1/2'

86

orange/red c

3' tan/brn SIL

10' Saprolite

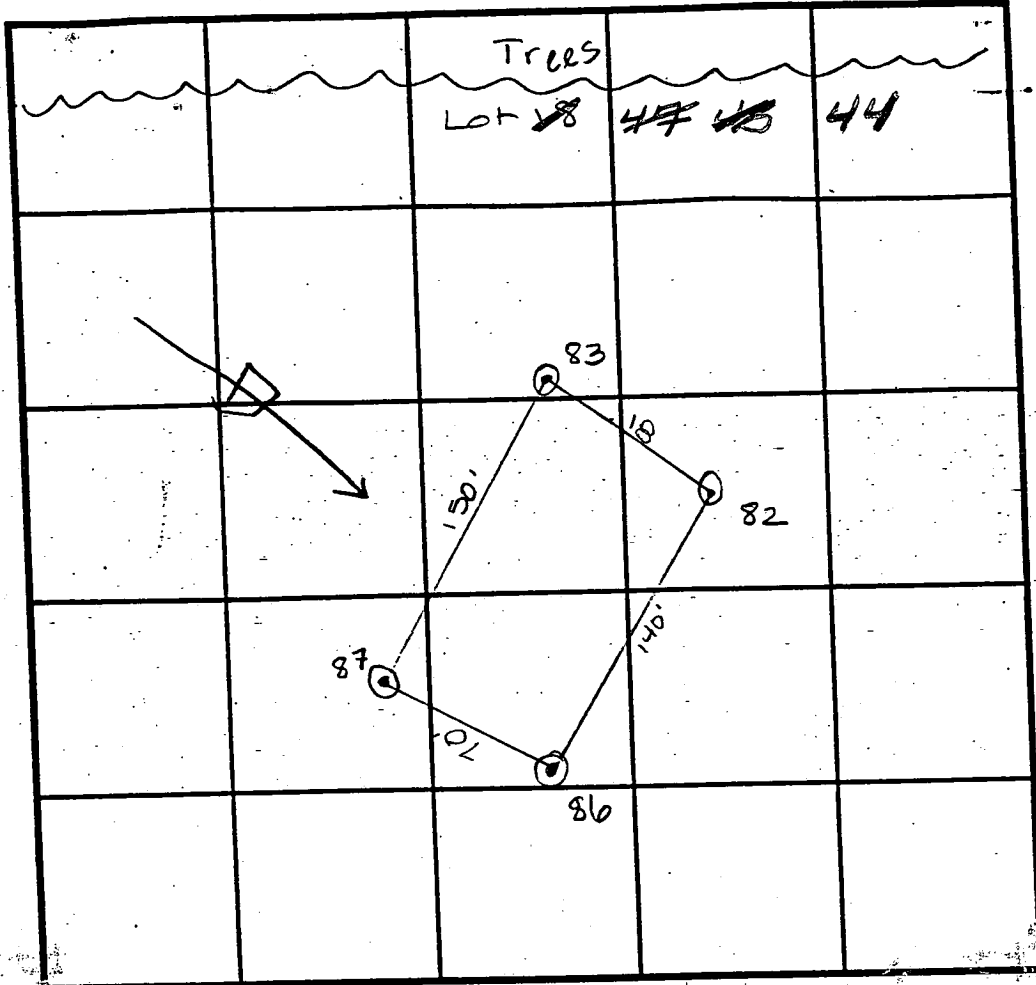
82

brn/red c

4' brn w/ slight tint of red SIL

asomo Saprolite

12'



SOIL PROFILE 83

0' tan c

3' tan SSIL



12 1/2'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11/30/93	87	3' / 12 1/2'	12:22	12:34	12:34	12:46	12 min
	86	3' / 12 1/2'	12:32	12:39	12:39	12:49	9 min
	(82)	4' / 12'	1:00	1:05 <sup>15</sup>	1:05 <sup>15</sup>	1:15	9 3/4 min
	(83)	3' / 12 1/2'	1:03	1:06	1:06	1:12	6 min
	87	6 1/2' / 12 1/2'	2:53 <sup>30</sup>	2:55 <sup>30</sup>	2:55 <sup>30</sup>	2:59	3 1/2 min

REMARKS 86-82 wet season perc

TYPE OF SOIL Glendy Loam

TESTED BY Amy McMillan / CRAIG WILLIAMS ALSO PRESENT B. SANDERS

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 8 min TRENCH WIDTH 3'

INLET DEPTH 20' MAXIMUM BOTTOM DEPTH 40' SQ. FT./BEDROOM 210 ft<sup>2</sup>

COUNTY #

SOIL PROFILE 183

1'0" orange/brn C

2' orange/brn SIL w/ red and yellow streaks

8' shelf of shale w/ verticle fractures

12'

would per at 2'

SOIL PROFILE 180-178

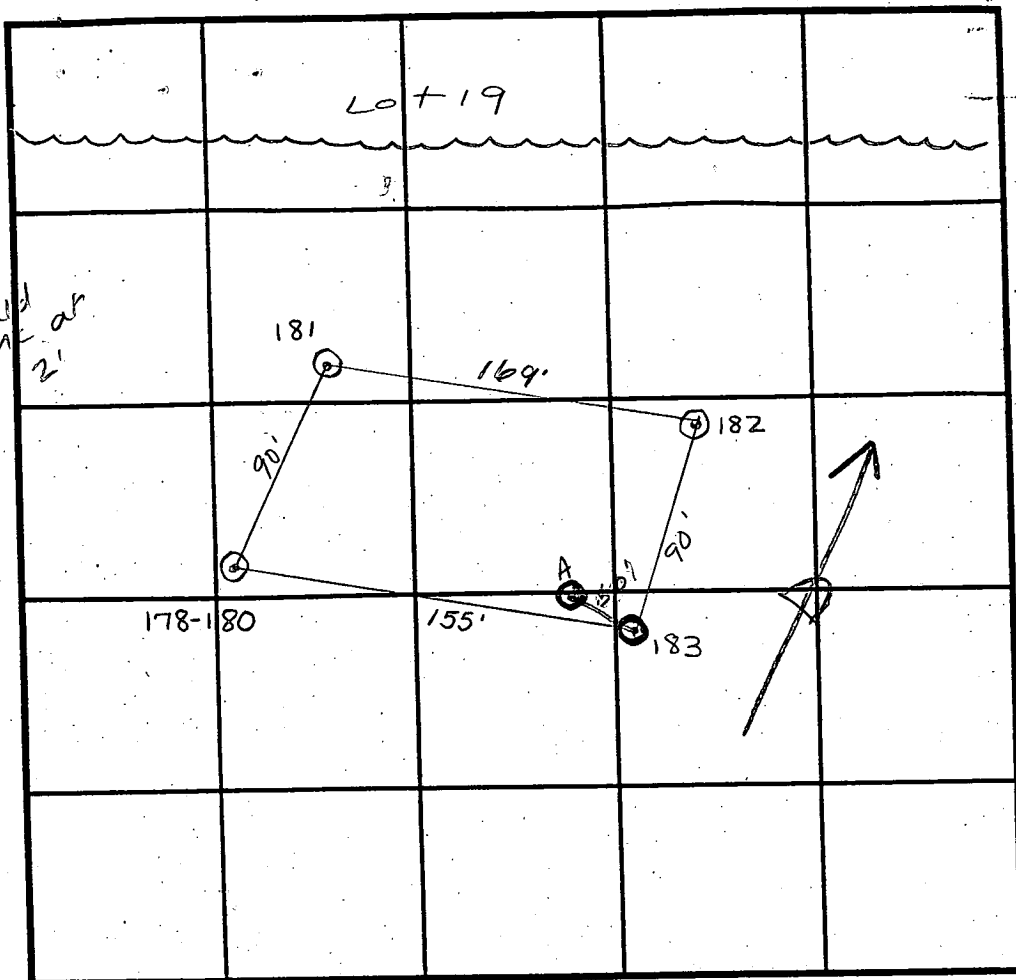
0' yel brn C

3' ~~decayed~~ shale throughout

yel brn SIL shale

decayed shale more pronounced at 2' on

12' lower end of hole (towards lot 19)



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

A orange/brn C

2 1/2' red/brn SIL

6 1/2' shelf of shale

14'

182

brn w/ red streaked C

2 1/2' orange/brn SIL w/ saprolite - shale pockets

3'

7' shelf of shale

1 1/2'

181

vell orange/brn C

2 1/2' brn (slightly orange) SIL

12'

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
12/1/93	183	2 1/2' V 12'	10:54	10:55	10:55	10:58	3 min	F
	182	2 1/2'-3' V 11 1/2'	11:00	11:03 <sup>30</sup>	11:03 <sup>30</sup>	18:08	4 1/2 min	OK
	183	7' V 12'	11:05 <sup>55</sup>	11:07 <sup>10</sup>	11:07 <sup>10</sup>	11:11 <sup>20</sup>	4 min	F
	181	3' V 12'	11:06	11:10 <sup>30</sup>	11:10 <sup>30</sup>	11:24 <sup>30</sup>	14 min	OK
	180-178	3' V 12'	11:10	10:13	11:13	11:17 <sup>30</sup>	4 1/2 min	OK
12/13/93	A	2 1/2' V 14'	1:54	1:56	1:56	1:58 <sup>15</sup>	2 1/4 min	F
		6' 14'	2:04 <sup>30</sup>	2:06	2:06	2:09 <sup>30</sup>	3 1/2 min	TOO FAST FOR AMT OF ROCK PRESENT SAME AS 183

REMARKS \_\_\_\_\_

TYPE OF SOIL Gleneta Loam

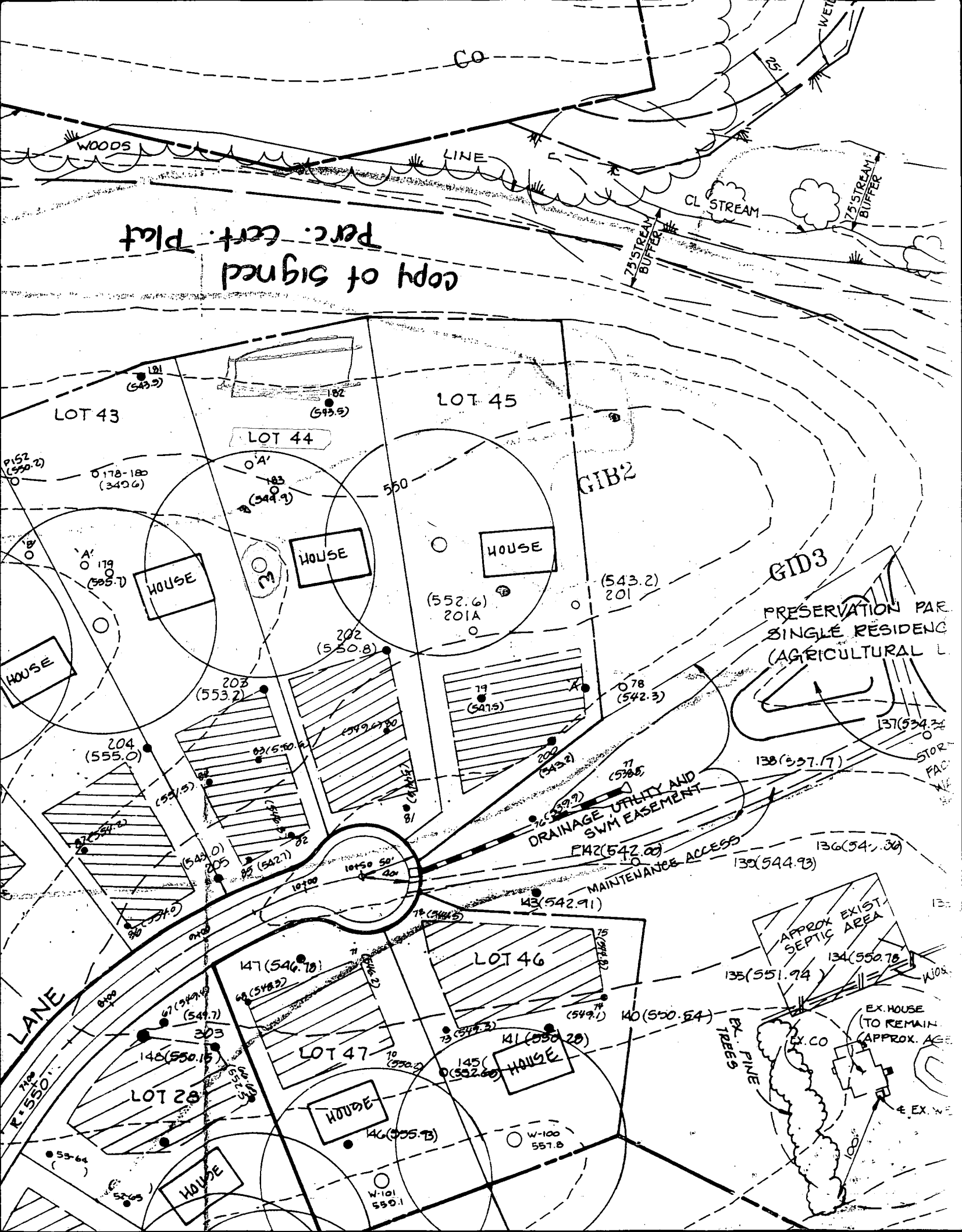
TESTED BY A. McMillen / C. Williams ALSO PRESENT B. SANDERS

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME \_\_\_\_\_ TRENCH WIDTH \_\_\_\_\_

INLET DEPTH \_\_\_\_\_ MAXIMUM BOTTOM DEPTH \_\_\_\_\_ SQ. FT./BEDROOM \_\_\_\_\_



copy of signed  
perc. cert. Plat



LOT 43

LOT 45

LOT 44

LOT 46

LOT 28

LOT 47

APPROX EXIST SEPTIC AREA

PRESERVATION PARCEL SINGLE RESIDENCE (AGRICULTURAL L)

LANE  
R. 550.1

HOUSE

HOUSE

HOUSE

HOUSE

HOUSE

HOUSE

HOUSE

HOUSE

DRAINAGE UTILITY AND SWM EASEMENT

MAINTENANCE ACCESS

CL. STREAM

25' STREAM BUFFER

75' STREAM BUFFER

GID3

GIB2

181 (543.2)

182 (543.5)

183 (544.9)

201A (552.6)

201 (543.2)

19 (541.5)

17 (538.8)

0178-180 (340.6)

179 (545.7)

203 (553.2)

202 (550.8)

204 (555.0)

205 (543.0)

10100

142 (542.0)

138 (537.17)

136 (541.36)

139 (544.93)

147 (546.78)

148 (550.15)

145 (552.6)

140 (550.54)

135 (551.74)

134 (550.78)

146 (555.93)

W-100 557.8

W-101 550.1

EX. HOUSE (TO REMAIN APPROX. AGE)

EX. PINE TREES

EX. WETLAND



copy of signed  
Prelim. Plan

STORMWATER MANAGEMENT  
FACILITY No. 2 DETENTION  
HAZARD CLASS 'A'  
WATER QUALITY BY  
EXTENDED DETENTION  
(PUBLIC)

DRAINAGE UTILITY &  
FOREBAY  
540  
MAINTENANCE ACCESS

ODS

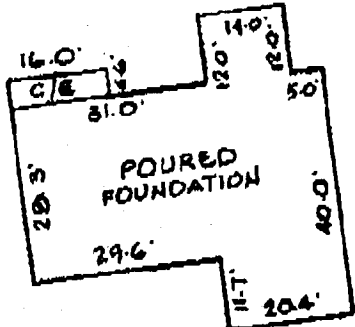
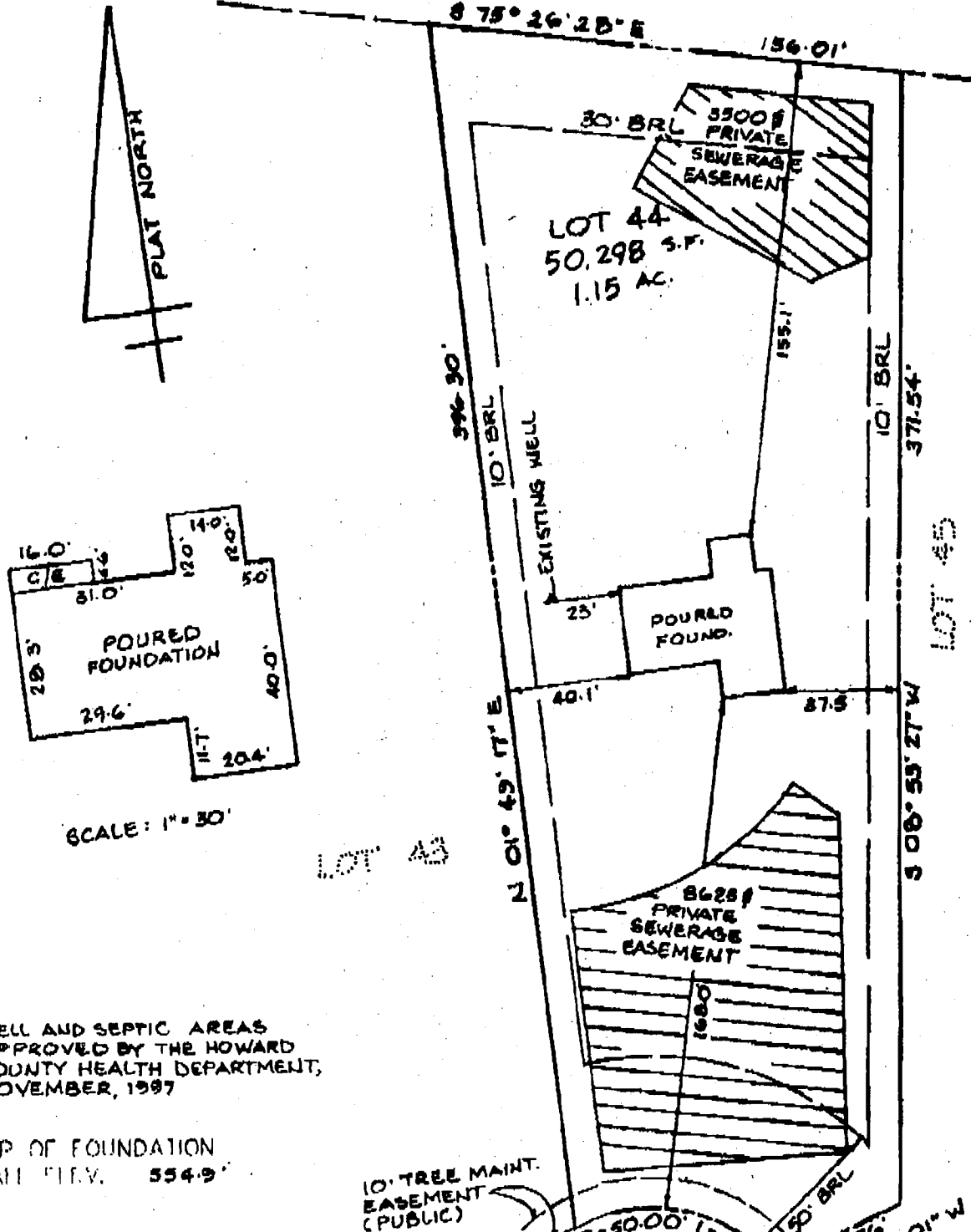
E-6  
5

I-1

EX. EVERGREEN



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.



SCALE: 1" = 30'

WELL AND SEPTIC AREAS APPROVED BY THE HOWARD COUNTY HEALTH DEPARTMENT, NOVEMBER, 1997

TOP OF FOUNDATION WALL ELEV. 554.9'

**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 FIRM 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



RECORD PLAT No. 12504  
 FEMA FIRM No. 240044 0007 B  
 DATED DECEMBER 4, 1986

LOCATION DRAWING  
 CATTAIL WOODS  
 SECTION 2  
 LOT 44  
 1737 CATTAIL WOODS LA.

**TSA GROUP, INC.**  
 planning • architecture • engineering • surveying  
 8480 BALTIMORE NATIONAL PIKE SUITE 418  
 ELLICOTT CITY, MARYLAND 21043  
 (410) 485-8105

4<sup>TH</sup> ELECTION DISTRICT  
 HOWARD COUNTY, MARYLAND  
 SCALE: 1" = 50' DATE: 9.10.97

Kim

FYI - this was  
sent to DR. Boyd  
for signature but  
they have lost it

AW

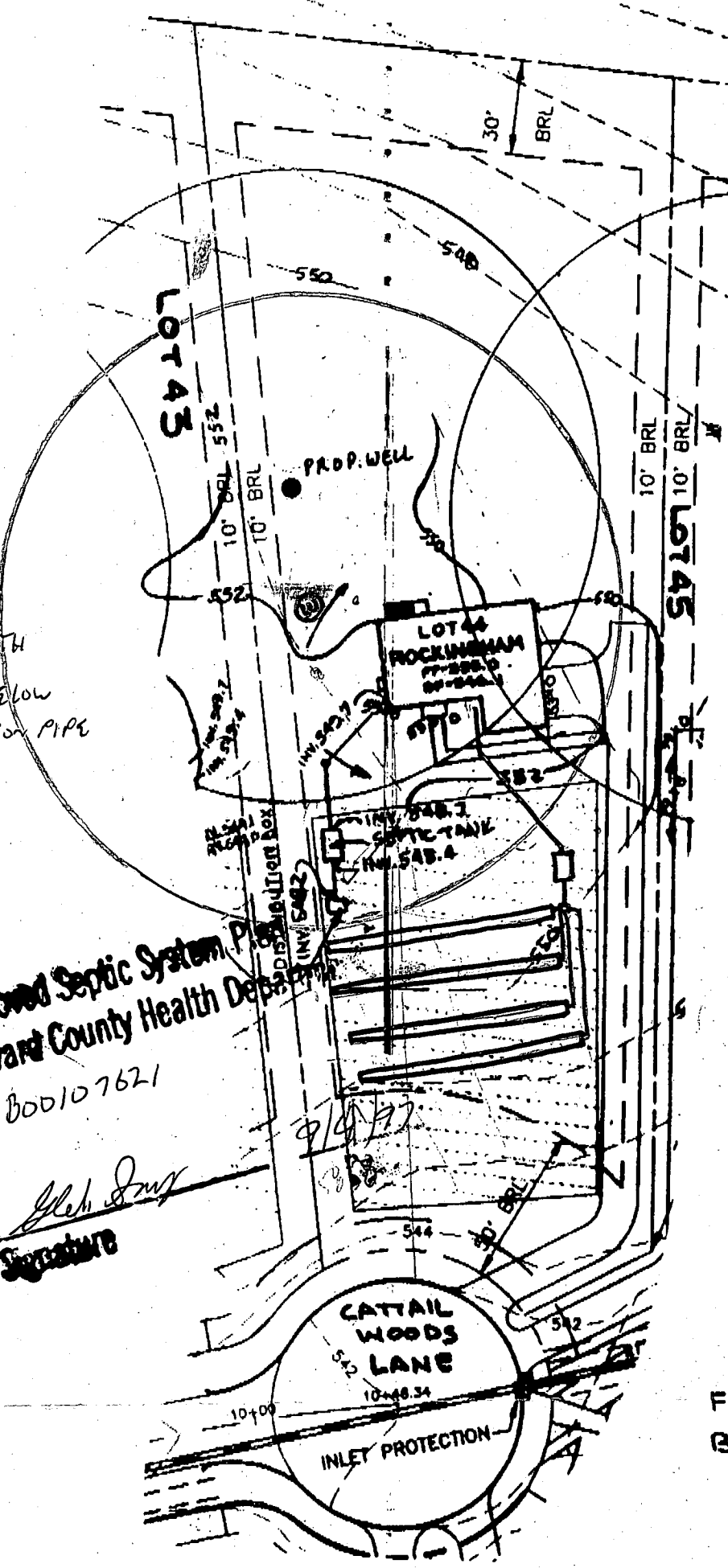
12/19/97

Rec'd 12-2-97  
by fax  
from Bonnie @ inspections

TRENCH:  
 INLET 3'  
 BOTTOM 7'  
 280' LENGTH  
 4' STONE BELOW  
 DISTRIBUTION PIPE

Approved Septic System Plan  
 Howard County Health Department  
 000107621

*Glen Dwyer*  
 Signature



FF=555.0  
 BF=546.1

NOTE:  
 FOR SEDIMENT CONTROL FEATURES SEE APPROVED  
 GRADING PLAN GP-97-130.

T S A GROUP INC.  
 8480 BALTIMORE NATIONAL PIKE, SUITE 418  
 ELLICOTT CITY, MARYLAND 21043  
 (410) 465 - 6105

PLOT PLAN  
**CATTAIL WOODS**  
 LOT 44  
 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: SEPT. 4, 1997

Schedule of events for correction of well being drilled in the wrong location

9/24/97 K. Meiste noticed that the well may be ~~drilled~~ drilled in the wrong location

9/29/97 Spoke w/ Jennifer of TSA to obtain a wall check - she will FAX immediately.

ALM

9/30/97 Peter Dare of TSA gave me wall check well was drilled where KM predicted due to surveying error. I made field inspection to determine the extent of road grading on TSA's proposed adjustment to SDA

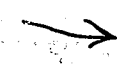
Resolved  
11/26/97

10/1/97 Review of wall check & field insp shows adequate reserve area for only one repair - Recommend redrilling the well

ALM

10/6/97 Spoke w/ Peter Dare - Going to have to drill a new well - if they can see any way out - OK to present ALM

10-7-97 Peter Dare proposed additional septic @ back of lot - Told him -  
- additional testing



- 2<sup>nd</sup> septic tank for future pumping necessary
- conversation & acknowledgement of homeowners (consent also)

10-16-97 Suggested second tank be placed above existing tank, along the 100' well radius - additional testing to be done at convenience of septic contractors - while they are installing a septic on another lot. ALM

11-13-97 Contacted Peter Dare to ask for update - He will contact Pulte Homes for an update on their plan of action. ALM

11-20-97 Additional test hole dug at high edge of 2<sup>nd</sup> septic easement in the back of the lot - OK to 11.0' - Area accepted for make-up area lost due to well location. Installer will set 2<sup>nd</sup> septic tank to be used for future pump pit. New plat to be submitted and sent to Dr. Boyd for signature AU

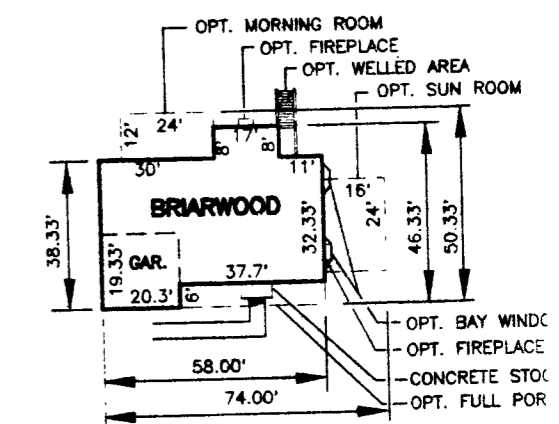
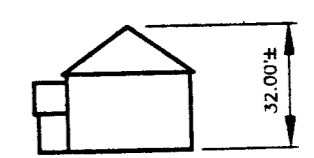
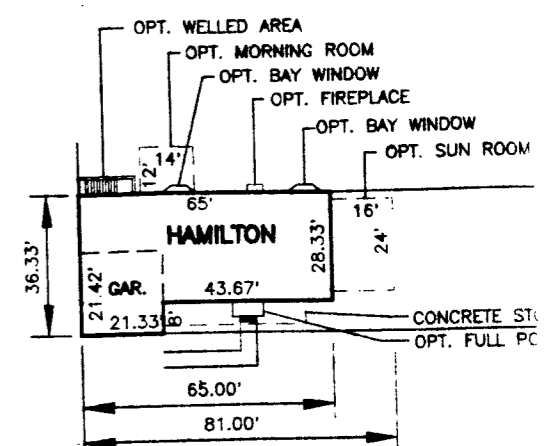
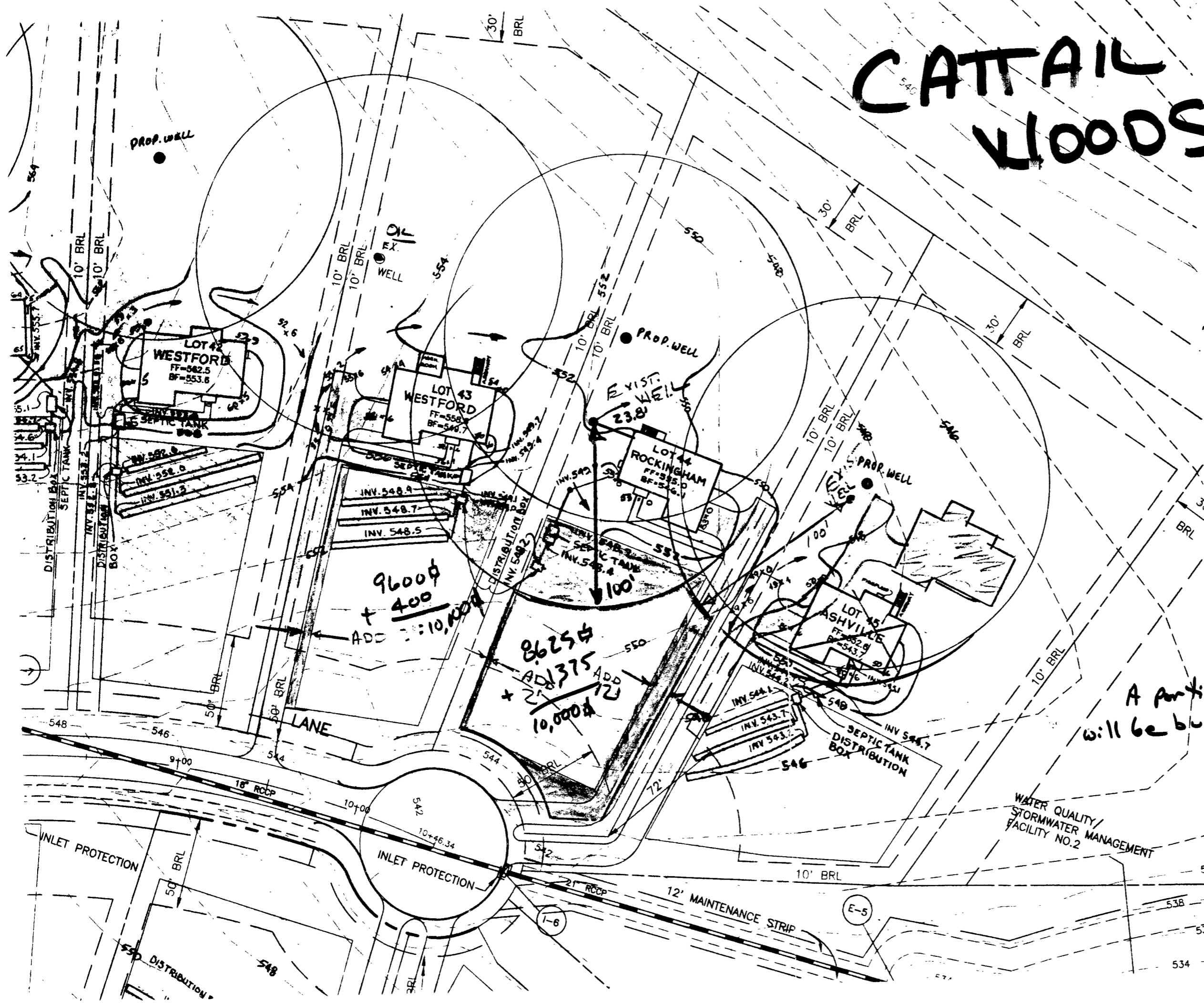
11-21-97 Spoke w/ Peter Dare, TSA - they will submit a plat of adjusted perc area for H.O. signature AU

11-26-97 Revised Perc Cert submitted and sent for signature ALM





# CATTAIL WOODS



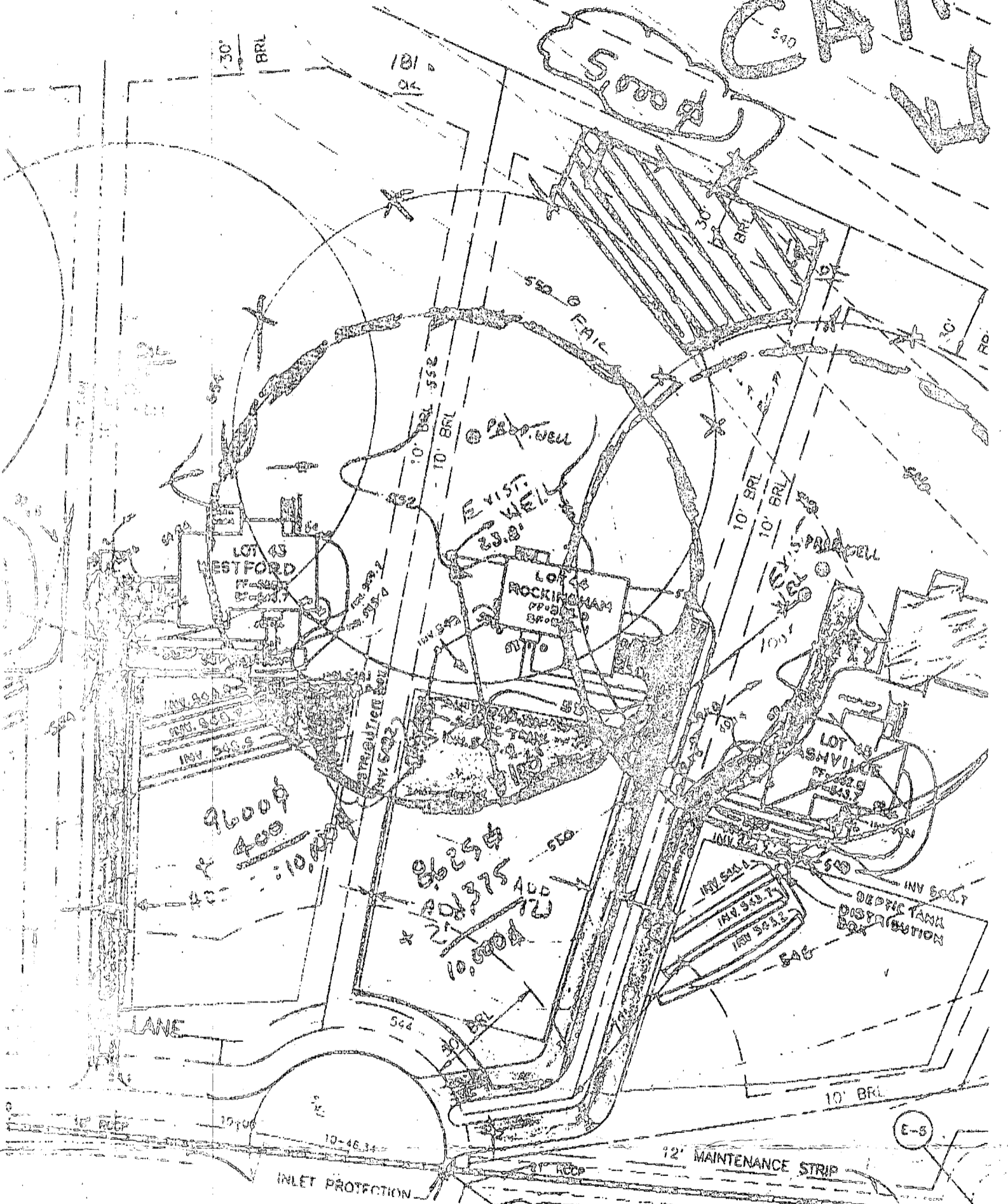
Lot 44 House & Well  
 ARE EXISTING 9/30/97  
 A portion of the future driveway  
 will be built over part of the

By the Developer: **Septic easement**  
 "I/We certify that all development and/or construction by done according to these plans, and that any respc personnel involved in the construction project will have Certificate of Attendance at a Department of the Env Approved Training Program for the Control of Sedimen Erosion before beginning the project. I shall engage ~~registered professional engineer to supervise pond construction and provide the Howard Soil Conservation with an "as built" plan of the pond within 30 days of completion.~~ I also authorize periodic on-site inspect, the Howard Soil Conservation District."  
 DEVELOPER: N. [Signature] Date 2/12/97

WATER QUALITY/  
 STORMWATER MANAGEMENT  
 FACILITY NO.2

10/6/97. PROPOSAL  
CATTAIL WOODS

LOT 44



CRAIG/AMY - SINCE THE WELL ON LOT 44 WAS A DEED ONE, IS IT POSSIBLE, IF BOTH PULTE HOMES AND THE HOME PURCHASOR AGREE TO A BACKUP FIELD AT THE REAR OF THE LOT WHERE WE HAD GOOD ROOTS... CAN WE KEEP THE WELL ??? Thanks for the review.

SEQUENCE NO.  
(FOR USE ONLY)

# STATE OF MARYLAND WELL COMPLETION REPORT

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

FILL IN THIS FORM COMPLETELY  
PLEASE PRINT OR TYPE

COUNTY NUMBER **A 49046 P**

ST/CO USE ONLY  
DATE RECEIVED  
MM/DD/YY  
**3/12/97**

DATE WELL COMPLETED  
MM/DD/YY  
**02/26/97**

Depth of Well  
**228**  
(TO NEAREST FOOT)

PERMIT NO.  
FROM "PERMIT TO DRILL WELL"  
**HO-94-1063**

OWNER **2000 Joint Venture**  
STREET OR RFD **Cattail Woods Lane** TOWN **Woodbine**  
SUBDIVISION **Cattail Woods** SECTION **44** LOT **444**

DESCRIPTION (Use additional sheets if needed)	FEET		check if water bearing
	FROM	TO	
Dirt	0	1	
Soft Br. Shale	1	42	X
Hard Br. Shale	42	51	
Soft Br. Shale	51	74	
Soft Blue Shale	74	77	
Hard Blue Shale	77	94	
Hard Grey Shale	94	97	X
Hard Blue Shale	97	137	
Hard Br. Schist	137	141	X
Hard Blue Schist	141	157	
Hard Br. Schist	157	160	X
Hard Blue Schist	160	228	

**WELL LOG**  
Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

**GROUTING RECORD**  
WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**  
TYPE OF GROUTING MATERIAL (Circle one) **CM** **BC**  
CEMENT **CM** BENTONITE CLAY **BC**  
NO. OF BAGS **40** NO. OF POUNDS **3760**  
GALLONS OF WATER **240**  
DEPTH OF GROUT SEAL (to nearest foot)  
from **0** ft. to **84** ft.  
(enter 0 if from surface)

**CASING RECORD**  
casing types insert appropriate code below  
**ST** **CO**  
STEEL CONCRETE  
**PL** **OT**  
PLASTIC OTHER

MAIN CASING TYPE **S T** Nominal diameter top (main) casing (nearest inch) **6** Total depth of main casing (nearest foot) **86**

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

**SCREEN RECORD**  
screen type or open hole **ST** **BR** **HO**  
STEEL BRASS BRONZE OPEN HOLE  
**PL** **OT**  
PLASTIC OTHER

DEPTH (nearest ft.)  
**H O** **228** **86**

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.

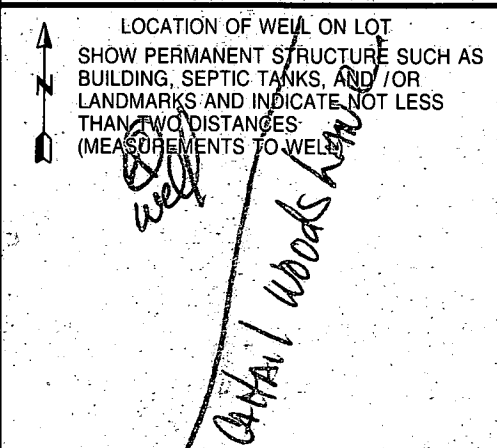
DRILLERS LIC. NO. **M W D 256**  
**Dana Kyker Jr II**  
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)  
LIC. NO. **M W D 334**

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

**C 3**

**PUMPING TEST**  
HOURS PUMPED (nearest hour) **3**  
PUMPING RATE (gal. per min.) **12**  
METHOD USED TO MEASURE PUMPING RATE **submersible**  
WATER LEVEL (distance from land surface)  
BEFORE PUMPING **27** ft.  
WHEN PUMPING **91** 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 (YES or NO) **NO**  
IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.  
TYPE OF PUMP INSTALLED **29**  
PLACE (A,C,J,P,R,S,T,O) IN BOX 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 **49** LAND SURFACE  
**-** below **2** (nearest foot)



GRAVEL-PACK IF WELL DRILLED WAS FLOWING WELL INSERT F. IN BOX 68 **68**

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)  
**T** (E.R.O.S.) **W O**  
**70** **72** **74** **75** **76**  
TELESCOPE CASING LOG INDICATOR OTHER DATA





B 1 **4646** 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  
**HO-94-1063**  
 fill in this form completely

Date Received (APA) **021197**  
 OWNER INFORMATION  
**206 JOINT VENTURE**  
 15 Last Name Owner First Name 34  
**15555 UNION CHAPEL RD**  
 36 Street or RFD 55  
**Woodbine** **MD21797**  
 57 Town 70 State 72 Zip 76

B 3 LOCATION OF WELL  
**HOWARD**  
 8 COUNTY 21  
**CATTAIL Woods**  
 23 SUBDIVISION 42  
 SECTION **2** LOT **44**  
 44 46 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 Kyker Jr** **256**  
 Driller's Name 77 License No. 80  
**Westminster Rotary Well Drill Inc**  
 Firm Name  
**PO Box 861 Westminster MD 21157**  
 Address  
**Dana Kyker Jr II** **2-7-97**  
 Signature Date

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  
  
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
  
**CATTAIL Woods AVE**  
 11 NEAR WHAT ROAD 30  
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
 34 **300** 37  
 DISTANCE FROM ROAD  
 ENTER FT OR MI **FT**  
 38 39  
 TAX MAP **7** BLK. PARCEL **137**

B 2 WELL INFORMATION  
 APPROX. PUMPING RATE (GAL. PER MIN.) **5**  
 2 8 12  
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **500**  
 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** **A 49646P**  
 COUNTY NAME COUNTY NO  
 STATE SIGNATURE INSERT S  
 DATE ISSUED **022097** **Donna K. Soe** **2/19/98**  
 43 48 CO. SIGNATURE EXP. DATE  
 NORTH GRID **542000** EAST GRID **0781000**  
 50 55 57 63

APPROXIMATE DEPTH OF WELL **119.5** FEET  
 24 28

APPROXIMATE DIAMETER OF WELL **6"** 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 DEEPEN AN EXISTING WELL  
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) \_\_\_\_\_

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION  
  
 2-26-97 X well  
 groud ok KM  
 40 bags Portland Type II  
 86' casing

Not to be filled in by driller (MDE OR COUNTY USE ONLY)  
 APPROP. PERMIT NUMBER **GAP**  
 54 63  
 FORCE **DS** WRITE INITIALS IN BOX PERMIT No. **HO-94-1063**  
 67 68 70 71 72 73 74 75 76 77 78 79

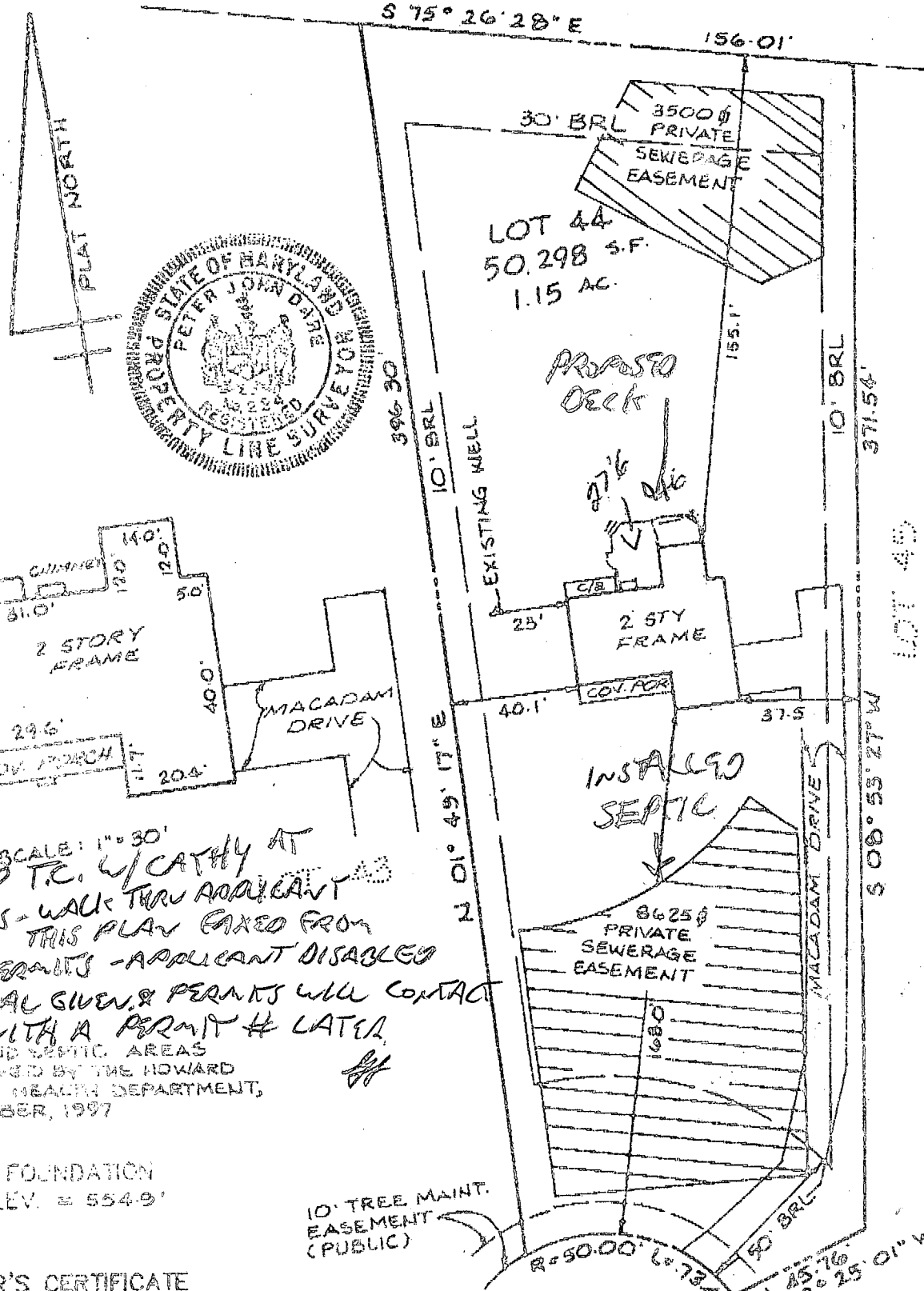
Post-It Fax Note

7/011

6/4/98 pages 1

To: <i>Strom</i>	From: <i>FAM</i>
Co./Dept.: <i>Env. Health</i>	Co.: <i>210 &amp; Pdv</i>
Phone #:	Phone #:
Fax #: <i>3298</i>	Fax #: <i>3298</i>

THIS LOCATION DRAWING IS OF BENEFIT TO THE TITLE INSURANCE COMPANY, OR ITS AGENT OR PERSON. THIS DRAWING IS NOT TO BE RE-USED FOR THE CONSTRUCTION OF IMPROVEMENTS SUCH AS CONCRETE FOUNDATIONS OR FOUNDATION WALLS, BUT BEING INSUFFICIENT FOR THESE PURPOSES.



SCALE: 1" = 30'  
 6/4/98 T.C. W/CATHY AT  
 PERMITS - WORK THRU APPLICANT  
 THIS PLAN FAXED FROM  
 PERMITS - APPLICANT DISABLED

VEROAC APPROVAL GIVEN & PERMITS WILL CONTACT  
 US WITH A PERMIT # LATER.  
 WELL AND SEPTIC AREAS  
 APPROVED BY THE HOWARD  
 COUNTY HEALTH DEPARTMENT,  
 NOVEMBER, 1997

TOP OF FOUNDATION  
 WALL ELEV. = 554.9'

**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 OR THE FEMA FIRM IDENTIFIED BELOW. AT THE WRITTEN REQUEST OF THE PURCHASER, NO PROPERTY CORNER MARKERS HAVE BEEN SET.

*Peter J. Dare* 1-8-98  
 FINAL  
 PETER J. DARE,  
 MD. PROPERTY LINE SURVEYOR #224

RECORD PLAT No. 12504  
 FEMA FIRM No. 240044 0007 B  
 DATED DECEMBER 4, 1986

**TSA GROUP, INC.**  
 planning • architecture • engineering • surveying  
 8480 BALTIMORE NATIONAL PIKE SUITE 418  
 ELLICOTT CITY, MARYLAND 21043  
 (410) 485-8105

CATTAIL WOODS LANE

LOCATION DRAWING  
 CATTAIL WOODS  
 SECTION 2

LOT 44

1737 CATTAIL WOODS LA.

4<sup>TH</sup> ELECTION DISTRICT  
 HOWARD COUNTY, MARYLAND  
 SCALE: 1" = 50' DATE: 9-20-97

*Strom*

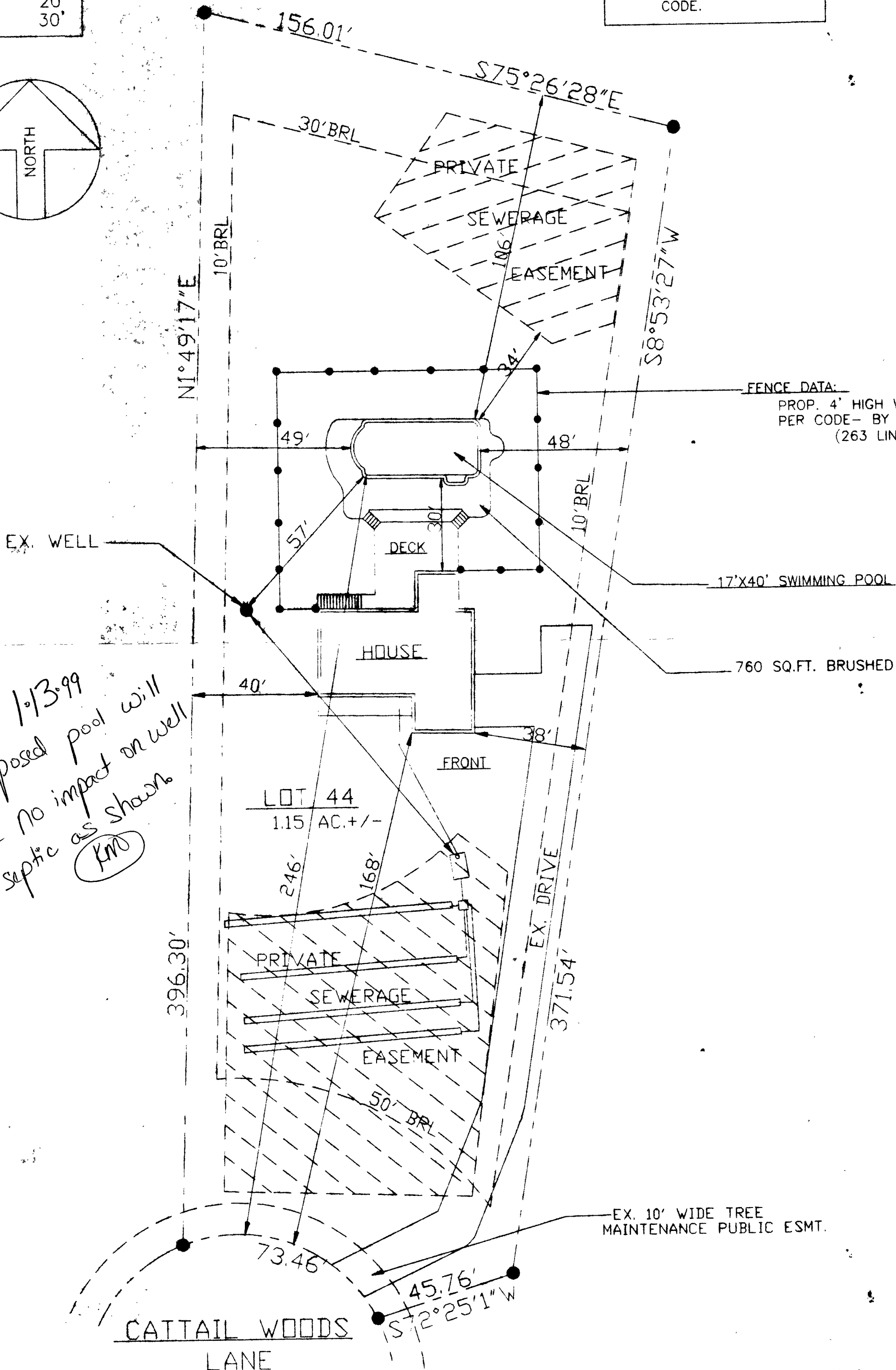
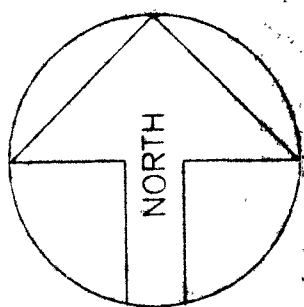
49646P

**SETBACKS:**

REAR PL. 10'  
SIDE PL. 10'  
HOUSE 10'  
SEPTIC 20'  
WELL 30'

**PRIVATE WELL  
& SEPTIC**

NOTE: A VACUUM BREAKER  
WILL BE INSTALLED  
ON JOB AS PER  
CODE.



*1-13-99  
Proposed pool will  
have no impact on well  
and septic as shown  
KNO*

**SITE PLAN**

SCALE: 1" = 30'

1737 CATTAIL WOODS LANE  
HOWARD COUNTY, MD. 21797

**CATTAIL WOODS**

ZONED RC-DEO  
SECTION 2, LOT 44,  
LOT SIZE - 50,298 SQ.FT.  
4TH ELECTION DISTRICT

TAX ACCOUNT # 04-359526

Both Customer and Salesman agree that this drawing, access, elevation & location of all equipment and appurtenances are in agreement. Any changes from this drawing must be approved in writing by the Customer and MPI.

CHECKED BY - SALESMAN \_\_\_\_\_  
CHECKED BY - CUSTOMER \_\_\_\_\_

**DIRECTIONS:** RTE.32 NORTH TO I-70 WEST TOWARDS EXIT, RTE.94, FOLLOW TO LISBON, CONT. TURN LEFT & FOLLOW TO CATTAIL WOODS SITE AT END ON RIGHT SIDE OF COURT

**MAP BOOK:**

Co.: HOWARD  
MAP: 3  
GRID: E12

**MARYLAND POOLS**

9515 GERWIG LA  
COLUMBIA, MARY  
410-995-6600  
301-621-3319



# HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

**B00115743**

Building Address 1737 Cattail Woods Lane  
Woodbine, MD 21797  
 Suite/Apt. #: \_\_\_\_\_ SDP/WP/Petition #: \_\_\_\_\_  
 Census Tract \_\_\_\_\_ Subdivision Cattail Woods  
 Section \_\_\_\_\_ Area \_\_\_\_\_ Lot \_\_\_\_\_  
 Tax Map \_\_\_\_\_ Parcel \_\_\_\_\_ Grid \_\_\_\_\_  
 Zoning \_\_\_\_\_ Map Coordinates \_\_\_\_\_ Lot size \_\_\_\_\_

Property Owner's Name Karen & Joel Wiener  
 Address 1737 Cattail Woods Lane  
 City Woodbine State MD Zip Code 21797  
 Home Phone 410-892-4576 Work Phone \_\_\_\_\_  
 Applicant's Name & Mailing Address, (if other than stated hereon):  
Dana L. Krawczyk  
9515 Gerwig Lane #119  
Columbia MD 21046  
 Phone 410-995-6600 Fax \_\_\_\_\_

Existing Use SFD  
 Proposed Use SFD w/ pool & fence  
 Estimated Construction Cost: \$ 15,000  
 Description of Work Install 17'x40' = 650 sq ft inground  
Swimming pool w/ 760 sq ft Brushed Conc. Deck

Contractor Company Maryland Pools Inc.  
 Contact Person Dana L. Krawczyk  
 Address 9515 Gerwig Lane #119  
 City Columbia State MD Zip Code 21046  
 License No. 66694  
 Phone 410-995-6600 Fax \_\_\_\_\_

Occupant or Tenant Owner  
 Contact Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_

Engineer or Architect Company \_\_\_\_\_  
 Contact Person \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_

**BUILDING DESCRIPTION - COMMERCIAL**

**BUILDING DESCRIPTION - RESIDENTIAL**

Building Characteristics	Utilities
Height: <u>17'x40' inground pool</u>	Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private
No. of stories: _____	Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private
Gross area, sq. ft. per floor: <u>650 sq ft.</u>	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Construction type: <input checked="" type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
1st floor: _____	Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
2nd floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: <input type="checkbox"/> Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms _____	Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other: _____
Other Structure: _____ Dimensions: _____ Footings: _____ Roof: _____ <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION, (2) THAT THE INFORMATION IS CORRECT, (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERE TO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THIS ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION, (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Dana L. Krawczyk  
 Applicant's Signature  
Agent, M.P.I.  
 Title/Company

Dana L. Krawczyk  
 Print Name  
1/13/98  
 Date

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**  
**\*\* PLEASE WRITE NEATLY AND LEGIBLY. \*\***  
**- FOR OFFICE USE ONLY -**

AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official		
Dev. Engineering, DPZ	<u>1/13/99</u>	<u>Kim M. White</u>
Health		
Fire Protection		
Is Sediment Control approval required prior to issuance?		
YES <input type="checkbox"/> NO <input type="checkbox"/>		
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>		
ONE STOP SHOP: <input type="checkbox"/>		

DPZ SETBACK INFORMATION
Front: _____
Rear: _____
Side: _____
Side St.: _____
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>
Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>
Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>
Lot Coverage for New Town Zone _____
SDP/Red-line approval date _____

PROPERTY ID#:	
Filing fee	\$ _____
Permit fee	\$ _____
Excise tax	\$ _____
Sub-total paid	\$ _____
Add'l permit fee	\$ _____
TOTAL FEES	\$ _____
Balance due	\$ _____
Check	# _____
Validation	# _____