

8-19-98
C.O. 2:00
8-20-98
C.O. 1200
WPI
8/24/98
P.A.M.

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

05-425921

P 510600A

A 49989-F

DISTRICT 5th

DATE 8-4-98

DATE SYSTEM APPROVED 8/20/98

INSPECTOR DKS

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXXX~~ 410-313-2640

INDEXED

Jack Fyock Septic Services IS PERMITTED TO INSTALL X ALTER

ADDRESS P.O. Box 89, Glenelg, MD 21797 PHONE 410-988-9270

SUBDIVISION Hyde Property LOT 6 ROAD 12300 Hydeaway Court

PROPERTY OWNER Cornerstone Homes Peller

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 4 feet below original grade. Bottom maximum depth 6 feet below original grade. Effective area begins at 4 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Place the distribution box 150 feet down the right lot line and 75 feet off that same lot line. Run trenches on contour in both directions as seen from Hydeaway Court. SEPTIC TANK TO BE OUTSIDE OF 100' WELL RADIUS.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. 6/18/98

8/18/98 OK FOR (2) 120' TRENCHES (MR)

PLANS APPROVED BY Glen Savage/Kim Maiste REVISED DATE 6/17/98

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) AND RETURNED 11/9/00

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

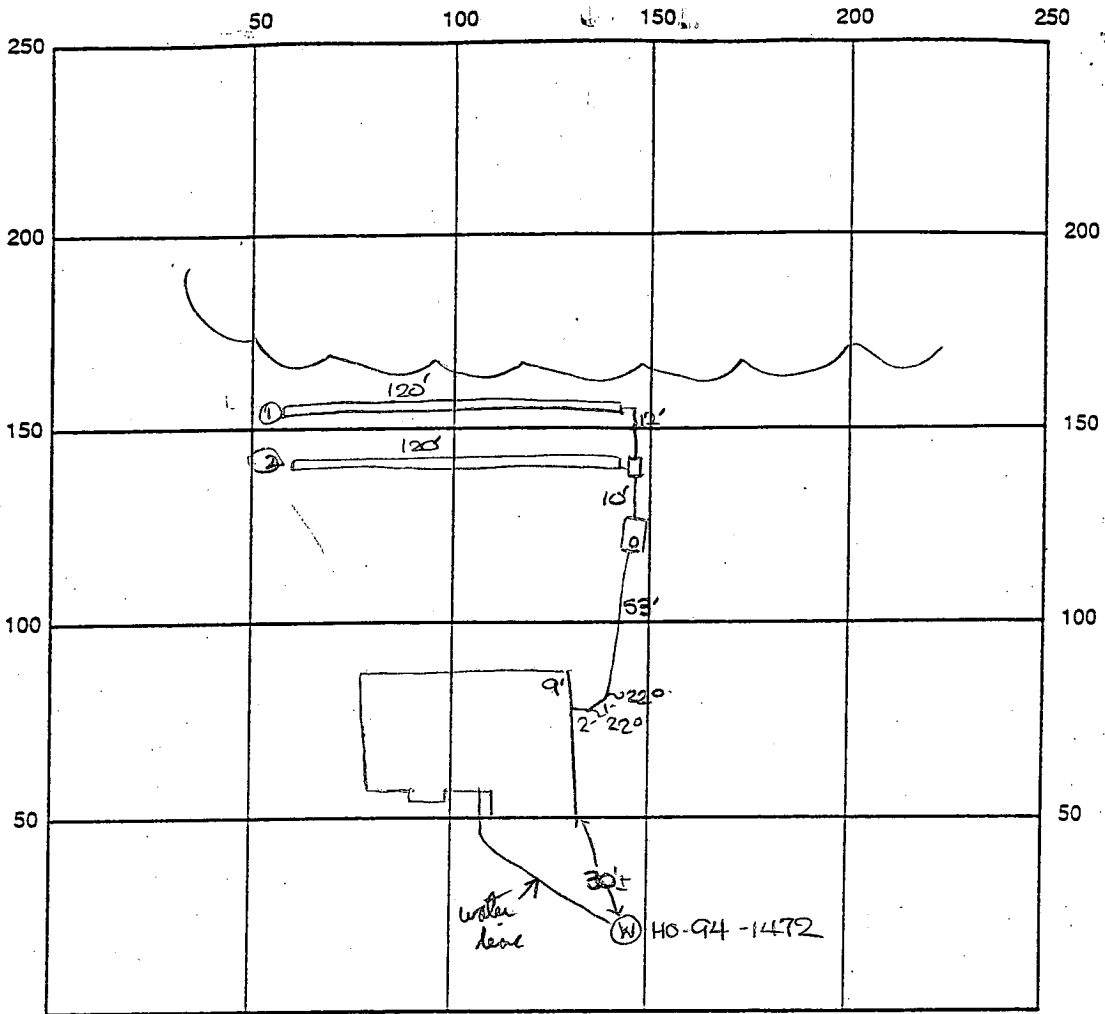
PERMIT VOID AFTER TWO YEARS

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. duh

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

A 49989-F



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

Hydeaway Court

SEPTIC TANK LEVEL OK - 1250 gal CLEANOUTS one on st.

DISTRIBUTION BOX LEVEL OK

DRAIN FIELD/TILE DEPTH 6 FT. TRENCH WIDTH 3 FT. INLET DEPTH 4 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH ①120 FT. → 240

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 720 SQ. FT.

DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA — SQ. FT.

REMARKS: 8/19/98 OK to cover from house to dist. box and 1st trench. OK to continue. DKS

8/20/98 FINAL INSP - OK to cover all work. DKS

8/24/98 W/P - All work depth OK @ 3 1/2 ft well work

DATE SYSTEM APPROVED 8/20/98 INSPECTOR [Signature]

8/24/98
A.M.

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

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation _____ Receipt # _____
Replacement _____ Date _____

Name of Installer _____ Telephone _____

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

Name of Property Owner _____ Telephone _____
Subdivision Hyde Property Lot # 6 Well Tag # FD-94-1472
Site Address 12300 Hydraway Ct.

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

8/24/98 Pitless adapter ok @ 3 1/2 ft PJP

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.

B 1 2443 SEQUENCE NO. (MDE USE ONLY)

1 2 3 4 5 6
 (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 - 1472
 70 fill in this form completely 79

Date Received (APA) 2/18/98
 8 MM DD YY 13

OWNER INFORMATION RN 7371

15 Cornerstone Homes Last Name Owner First Name 34
9591 Norfolk Ave Street or RFD 55
Laurel, Md. 20723 Town 70 State 72 Zip 76

B 3 LOCATION OF WELL CC#

8 Howard COUNTY 21
Hydeway Manor Hyde Property 23 SUBDIVISION 42
 SECTION 6 LOT 6
 44 46 48 50
Fulton 52 NEAREST TOWN 71
 MILES FROM TOWN (enter 0 if in town) 1 M I
 73 76 77 78.

DRILLER INFORMATION

George F. Easterday M WD 040
 76 License No. 81

L. Franklin Easterday, Inc. Firm Name
9265 Brown Church Rd., MT. Airy, Md. 21771 Address
George F. Easterday 2/14/98 Signature Date

B 4

1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

Hydeway Ct (12300) 11 NEAR WHAT ROAD 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

50 34 37 38 39
 DISTANCE FROM ROAD ENTER FT OR MI Ft

TAX MAP: 40 BLK: 18 PARCEL 133

B 2 WELL INFORMATION

1 2 APPROX. PUMPING RATE 5
 (GAL. PER MIN.) 8 12

AVERAGE DAILY QUANTITY NEEDED 500
 (GAL. PER DAY) 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)

FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)

22 INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)

PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE APPROVAL)

TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard COUNTY NAME A 49989F COUNTY NO.
 STATE SIGNATURE INSERT S → 41
 DATE ISSUED 03/1/98 Howard 3/1/99
 43 MM DD YY 48 CO SIGNATURE EXP. DATE
 NORTH GRID 482 0 0 0 EAST GRID 0815 0 0 0
 50 55 57 63

APPROXIMATE DEPTH OF WELL 300 FEET
 24 28

APPROXIMATE DIAMETER OF WELL 8 INCH NEAREST

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

1. wells

2.

3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E 810 5
 N 480 2

10:00 4/3/98

No Insp. A X

000 000

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN

AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)

37 CABLE REVERSE-ROTARY DRIVE-POINT

other

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

39 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

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION

MAP 18 E3

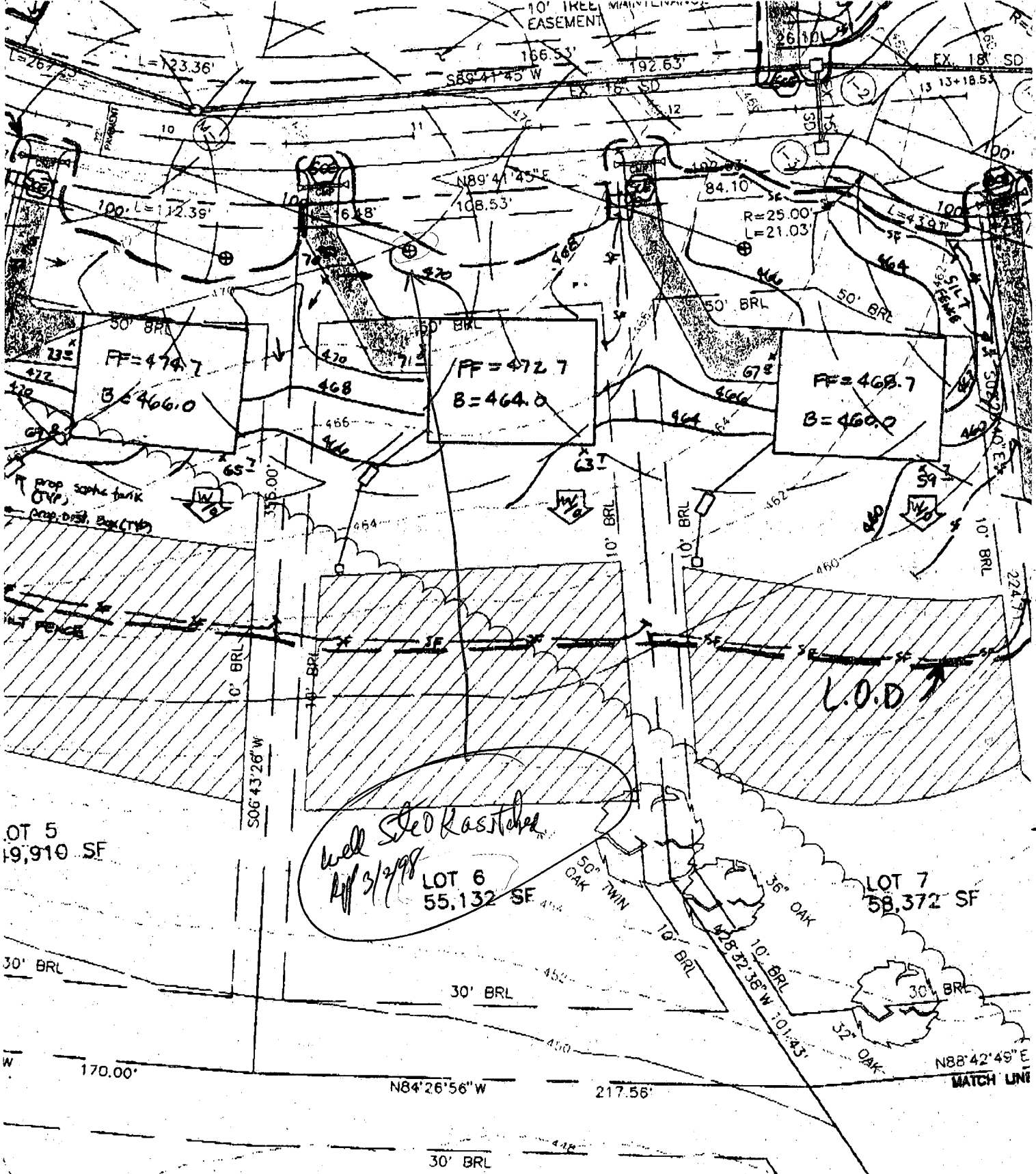
Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROP. PERMIT NUMBER 11206 GAP 013 54 63

FORCE RP WRITE INITIALS IN BOX PERMIT No. 94-1472 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -



LOT 5
19,910 SF

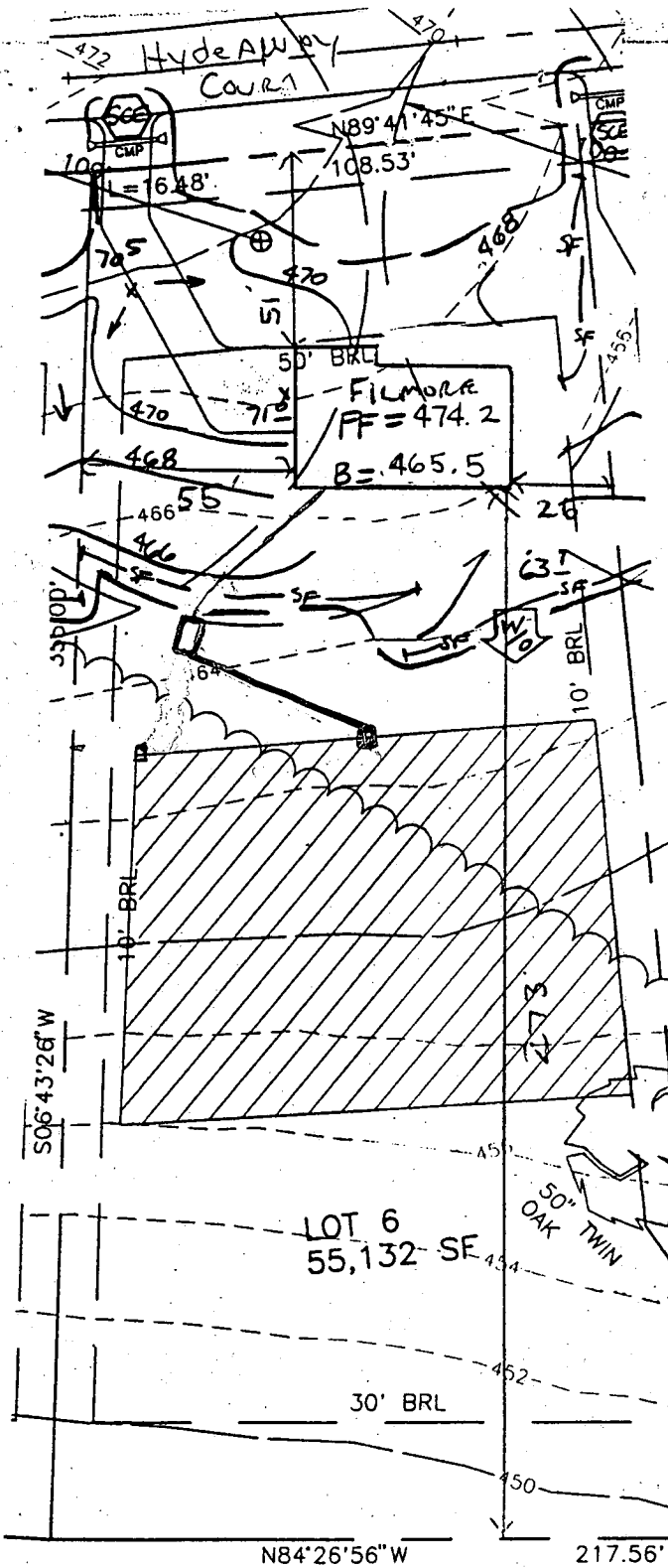
LOT 6
55,132 SF

LOT 7
58,372 SF

well steel kasstake
Apr 3/1998

L.O.D.

2/23/98 - No well steel kasstake



Septic ELEVATIONS

- INV OUT HOUSE - 463⁵
- INV IN TANK - 462⁰
- INV OUT TANK - 461⁰
- INV IN BOX - 460⁰
- EX GRADE AT BOX - 463⁰

Approved Septic System Plan
Howard County Health Department

B00112405

Glen Perry 6-18-98
Signature Date

Total linear feet of trench required 240 feet
 Width of trench (as) 3 feet
 Depth of trench (as) 6 feet
 Depth of stone required below distribution pipe 2 feet

BUILDER:

CORNERSTONE HOMES, INC
 9691 NORFOLK AVENUE
 LAUREL, MD 20723
 (410) 792-2565

PROJECT:

HYDE PROPERTY
 LOT 6 12300 Hydeaway CT

LOCATION:

TAX MAP 40 - PARCEL 133
 5th ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND

TITLE:

PLOT PLAN

DATE:

MAY, 1997

DRAWING

2 OF 3

APPLICATION

PERCOLATION TESTING

A 49989F

P _____

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

DISTRICT _____

DATE 4/26/94

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 ~~H & A CONSTRUCTION INC~~ ^{CORNERSTONE HOMES} to AL PROCOPIO

ADDRESS 1046 Annapolis Rd. Gambrills MD PHONE (301) 621-7888

AGENT OR PROSPECTIVE BUYER FISHER COLLINS & CARTER INC. ²¹⁰⁵⁴

ADDRESS 9171 Balto. Natl. pike ellcott city MD. 21042 PHONE 461-2855

PROPERTY LOCATION: HYDE PROP.

SUBDIVISION MD. RT 216 & PETRILLO DRIVE LOT NO. 6

ROAD AND DESCRIPTION (12300 Hydeaway Court)

RECEIVED
AND RETURNED 6-16-98
Serial # 4870112405

TAX MAP 40 PARCEL # 133

SIZE OF LOT 1 AC. TYPE BLDG. S.F.D. - 4Brm
(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. Zacharia y. Fisch
(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

APPLICATION

PERCOLATION TESTING

A _____
P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

DISTRICT _____

DATE _____

page 2

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Margaret Hyde c/o Mr Dick Talkin

ADDRESS _____ PHONE _____

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Hyde Property LOT NO. 7 and 8 SDA's

ROAD AND DESCRIPTION 12300 Block of Scaggsville Rd
Fulton, Md.

TAX MAP 40 PARCEL # 129

SIZE OF LOT _____ TYPE BLDG. _____
(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 _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

HD-216

THIS IS NOT A PERMIT

Hole 5E
SOIL PROFILE

0'	Red SCLC
3'	Mix Brn + Red Brn NSL-SCL
5'	orange variegated dk grey/lt brown clay SL Spherulite (massive)
13'	

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Note: There is a discontinuous band of strong Brn SiCL with m3p gray (7.5% Si) north is? promote form @ 2 1/2 - 4 ft; but horizon disappears into bed sandy cl on both sides (No little in bed) and none above or below. Band is only 10' long and prominent on East wall of N/S Trench - West wall has brown color & texture but pur grey mottles. (This is near area of soggy surface mottles from water. Testing where water level on surface largest.)

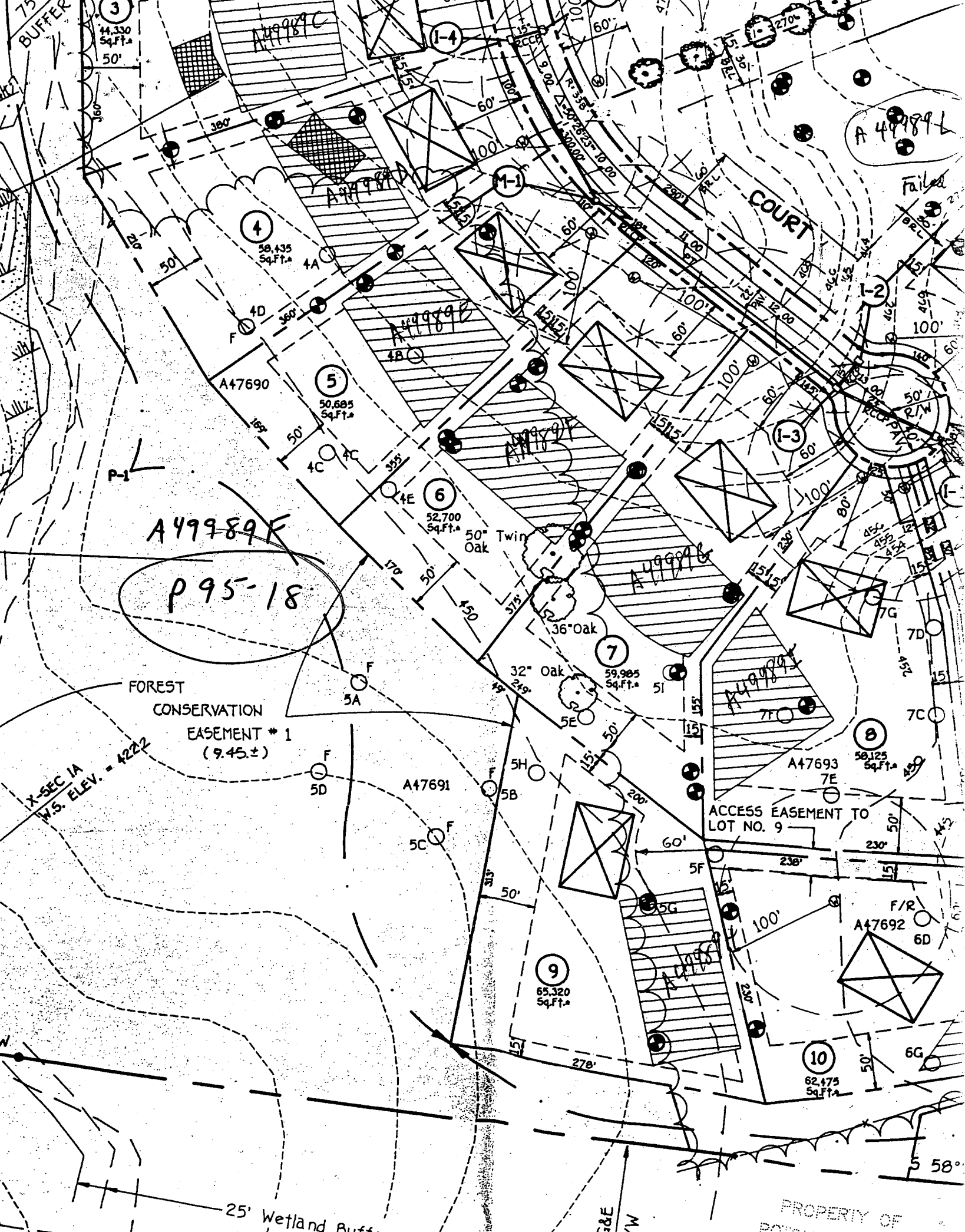
DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
4/14/92	SI	4'	Not Tested (same as other shallow test)				Too Slow (this lot)	
		7'	4:56:00	5:23:00	5:22:10	5:57:00	Too Slow ok deeper than 8 ft	
		13'	No red spherulite grades in @ 7 1/2 to 8 ft (just mottled part level)					

REMARKS _____

TYPE OF SOIL massive / clayey

TESTED BY R.P. Kelly

ALSO PRESENT _____



75' BUFFER

3
44,330
Sq.Ft.
50'

A49989C

1-4

A 49989L

Failed

COURT

4
58,435
Sq.Ft.
4A

A47690

5
50,885
Sq.Ft.
4C 4C

6
52,700
Sq.Ft.
50° Oak
4E

A49989F

P95-18

FOREST
CONSERVATION
EASEMENT # 1
(9.45±)

X-SEC 1A
W.S. ELEV. = 4222

A47691

5D

5C

7
59,985
Sq.Ft.
5I
32° Oak
5E

ACCESS EASEMENT TO
LOT NO. 9

8
58,125
Sq.Ft.
7E

A47693

F/R
A47692
6D

9
65,320
Sq.Ft.
5G

10
62,475
Sq.Ft.
6G

25' Wetland Buff

PROPERTY OF

C1 05148

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

COUNTY NUMBER A49989F

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

ST/CO USE ONLY DATE RECEIVED 4-29-98

DATE WELL COMPLETED 04 03 98

Depth of Well 205 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-99-1472

OWNER Catherstone Homes last name 12300 Hydeaway Ct first name TOWN Fulton SUBDIVISION Hyde Property SECTION LOT 6

WELL LOG Table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entries for Top Soil, red shaly clay, Sand Stone, mica, Sand Stone, mica, Sand Stone, mica.

1990 APR 24 A 11:23

GROUTING RECORD Form: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL (CM, BC), NO. OF BAGS (14), NO. OF POUNDS (1700), GALLONS OF WATER (70), DEPTH OF GROUT SEAL (0 to 33 ft).

CASING RECORD Form: casing types insert appropriate code below (ST, CO, PL, OT), MAIN CASING TYPE (ST), Nominal diameter top (main) casing (6), Total depth of main casing (40).

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

SCREEN RECORD Form: screen type or open hole (ST, BR, HO, PL, OT), insert appropriate code below.

NUMBER OF UNSUCCESSFUL WELLS: WELL HYDROFRACTURED (Y/N)

CIRCLE APPROPRIATE LETTER: A WELL WAS ABANDONED AND SEALED, ELECTRIC LOG OBTAINED, 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 LIC. NO. MW D 040, DRILLERS SIGNATURE: Pearce F. Easterday

LIC. NO. MW D 501, SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

DEPTH (nearest ft.) Table with columns for depth intervals (1-21, 23-32, 38-47, 51-55) and values (HO 38, 205).

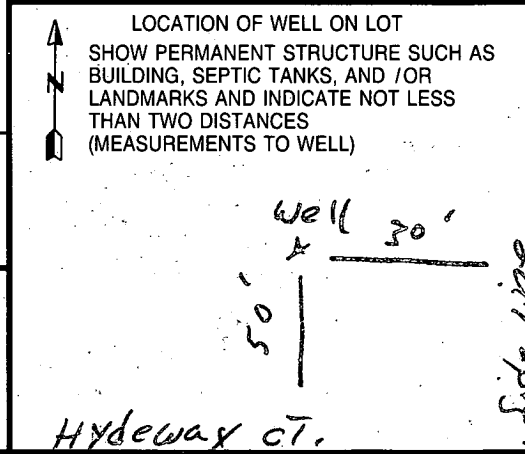
GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

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 Form: HOURS PUMPED (6), PUMPING RATE (3.5 gal. per min.), METHOD USED TO MEASURE PUMPING RATE (Bucket), WATER LEVEL (distance from land surface) BEFORE PUMPING (28 ft), WHEN PUMPING (151 ft).

PUMP INSTALLED Form: DRILLER WILL INSTALL PUMP (YES/NO), TYPE OF PUMP INSTALLED (S), CAPACITY: GALLONS PER MINUTE (2), PUMP HORSE POWER (2), PUMP COLUMN LENGTH (2), CASING HEIGHT (2).



APPLICATION

HOWARD COUNTY

PERMIT APPLICATION

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

SERIAL NUMBER

10825
Bal 368
elt 2946
3339

1300112405

BUILDING ADDRESS (HOUSE NO., STREET, TOWN OR AREA)
12300 Hydeaway Court 36265
Highland, MD 20777

GRADING/SEDIMENT CONTROL YES NO CP 97-116
SDP #

DESCRIPTION OF WORK AUTHORIZED
Two story part basement 9 R
2 FB, 1 HB & garage (4R)
opt. FP "FILMORE"

LOT NO.	PARCEL NO.	SEC.	AREA	BLOCK NO.	LIBER	FOLIO
6	133			24		
SUB DIVISION		ZONE	ZONE MAP	ELEC. DIST.	CENSUS TR.	
Hyde Prop.		RR-100	40	5	6051.02	

SIZE OF BLDG.	FRONT	DEPTH	HEIGHT
1	55' 7"	35'	10'
2	36'	31' 8"	10'
8	35' 7"	30'	10'

OWNER NAME AND ADDRESS
CORNERSTONE HOMES, INC
9691 NORFOLK AVENUE
LAUREL, MD 20723 712 2365

TYPE OF BLDG.	AREA	VOLUME	ROOF
B. ROOMS	4		ASPH
ROOMS	9		
BATHS	2.5		GRBL
FIREPLACES	1		

OCCUPANT'S NAME AND ADDRESS
PHONE NO.

ARCHITECT OR ENGINEER'S NAME AND ADDRESS
TSA
2400 SMT NW RILE
ELLICOTT CITY MD 21047 465 6103

FOOTINGS	FOUNDATION	S. WALLS
24" X 8"	8" Concrete	WD FR

CONTRACTOR'S NAME AND ADDRESS
CORNERSTONE HOMES, INC
9691 NORFOLK AVENUE
LAUREL, MD 20723

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

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.

EXISTING USE
Vacant Lot

PROPOSED USE
New S.F.D.

SIGNATURE
PES
TITLE
DATE 6/15/98

EST. CONSTRUCTION COST
110,000

LICENSE NUMBER

PERMIT FEE

FOR OFFICE USE ONLY

W/S CODE

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

BACK _____ (CORNER LOT ONLY) _____ SDP # _____

FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING	X	
SHA	X	
SEDIMENT/GRADING	X	
BUILDING OFFICIAL	X	
WATER & SEWER		
HEALTH DEPT.	6/16/98	Blalby
FIRE PROTECTION		
STORM WATER MGM.	X	

Check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

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

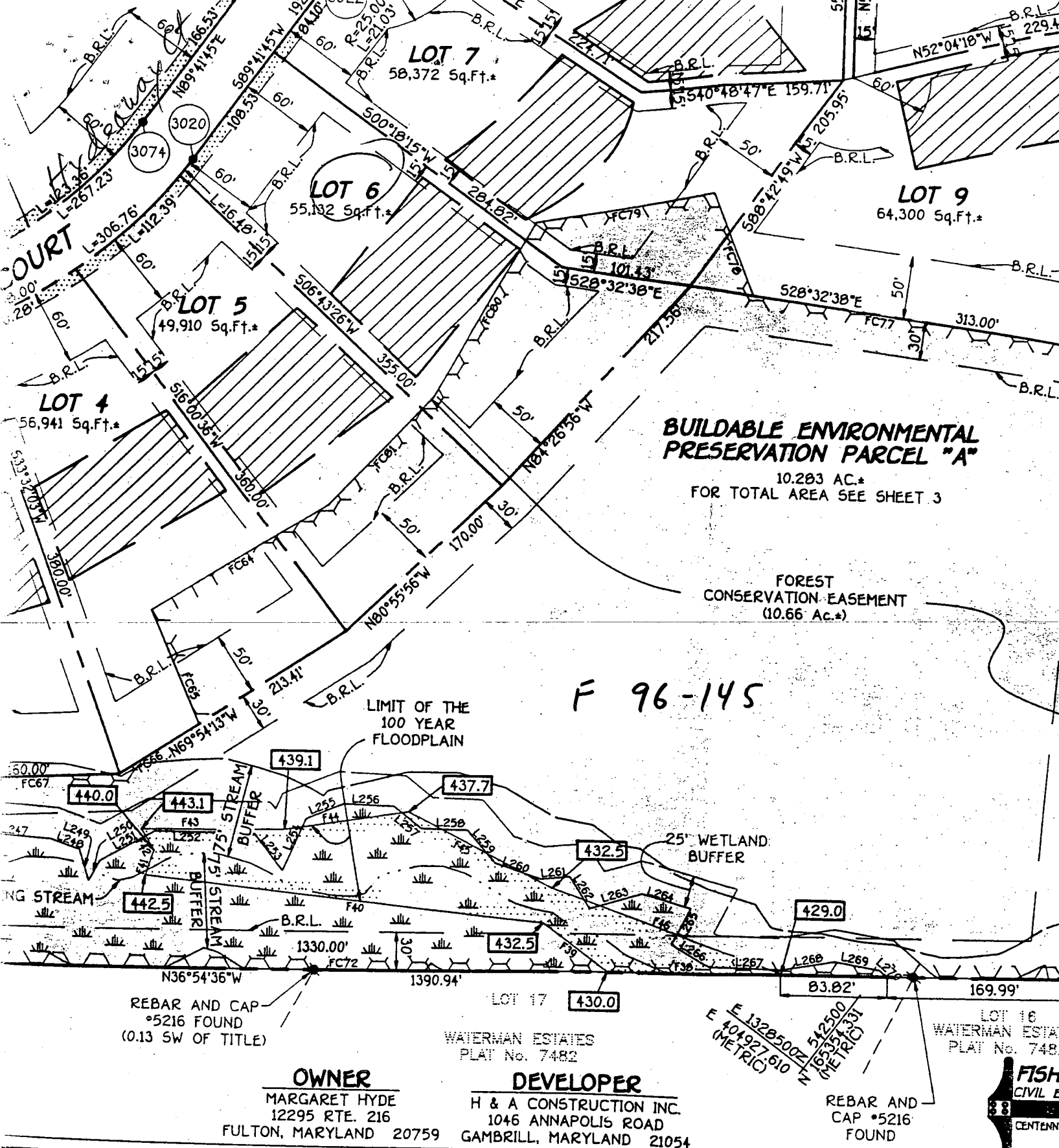
IMPORTANT: PLEASE SHOW ZIP CODES AND AREA CODES WHEREVER REQUIRED.

LP-69-591

APPROVED _____ DATE _____

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

A



BUILDABLE ENVIRONMENTAL PRESERVATION PARCEL "A"

10.283 AC.*
FOR TOTAL AREA SEE SHEET 3

FOREST CONSERVATION EASEMENT (10.66 Ac.*)

F 96-145

REBAR AND CAP #5216 FOUND (0.13 SW OF TITLE)

OWNER
MARGARET HYDE
12295 RTE. 216
FULTON, MARYLAND 20759

DEVELOPER
H & A CONSTRUCTION INC.
1046 ANNAPOLIS ROAD
GAMBRILL, MARYLAND 21054

REBAR AND CAP #5216 FOUND

SURVEYOR'S CERTIFICATE

I HEREBY CERTIFY THAT THE FINAL PLAT SHOWN HEREON IS CORRECT: THAT IT IS A SUBDIVISION COMPRISED OF (1) PART OF THE LANDS CONVEYED BY PERRY C. WESTLAND AND BARBARA L. WESTLAND, TO JOHN P. HYDE AND MARGARET A. HYDE BY DEED DATED MAY 17, 1957 AND RECORDED AMONG THE LAND RECORDS OF HOWARD COUNTY, MARYLAND IN LIBER 299 AT FOLIO 120 AND (2) ALL OF THE LANDS CONVEYED BY JOHN BURDOFT AND JUANITA M. BURDOFT TO JOHN P. HYDE AND MARGARET A. HYDE BY DEED DATED NOVEMBER 8, 1954 AND RECORDED AMONG THE AFORESAID LAND RECORDS IN LIBER 262 AT FOLIO 259 AND THAT ALL MONUMENTS ARE IN PLACE OR WILL BE IN PLACE PRIOR TO

RECORDED AS PLAT No. AMONG THE LAND RECORDS

HYDE

OF SUBDIVISION
ESTABLISH THE
ASSIGNS;
ITIES AND
HEREON;
OODPLAINS AND
RIGHT AND
ADS AND
EDICATION



HOWARD COUNTY HEALTH DEPARTMENT

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

November 10, 1998

Mr. John Conners
Cornerstone Homes
9691 Norfolk Ave.
Laurel, MD 20723

RE: Hyde Property Lot 6
12300 Hydeaway Ct.

Dear Mr. Conners:

This is to advise you that the septic system for the above referenced property was installed, inspected and approved on August 20, 1998.

The water sample recently submitted for testing was free of coliform and fecal coliform bacteria and is bacteriologically safe for drinking. The water sample was found to be in compliance with COMAR water quality standards.

INTERIM CERTIFICATE OF POTABILITY

This certifies that the initial sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under well permit #HO-94-1472. No guarantee can be given for health protection beyond this date of issue. Based upon satisfactory investigation and evaluation by the Howard County Health Department, the Maryland Department of the Environment accepts this well system as required by COMAR 26.04.04.09.

This certificate may become final upon completion of the final bacteriological test which is to be taken by the county health department within six months. Please contact Ms. Vicki Fellas at (410) 313-2644 to schedule a final water sample appointment.

Date of Water Sample: November 9, 1998

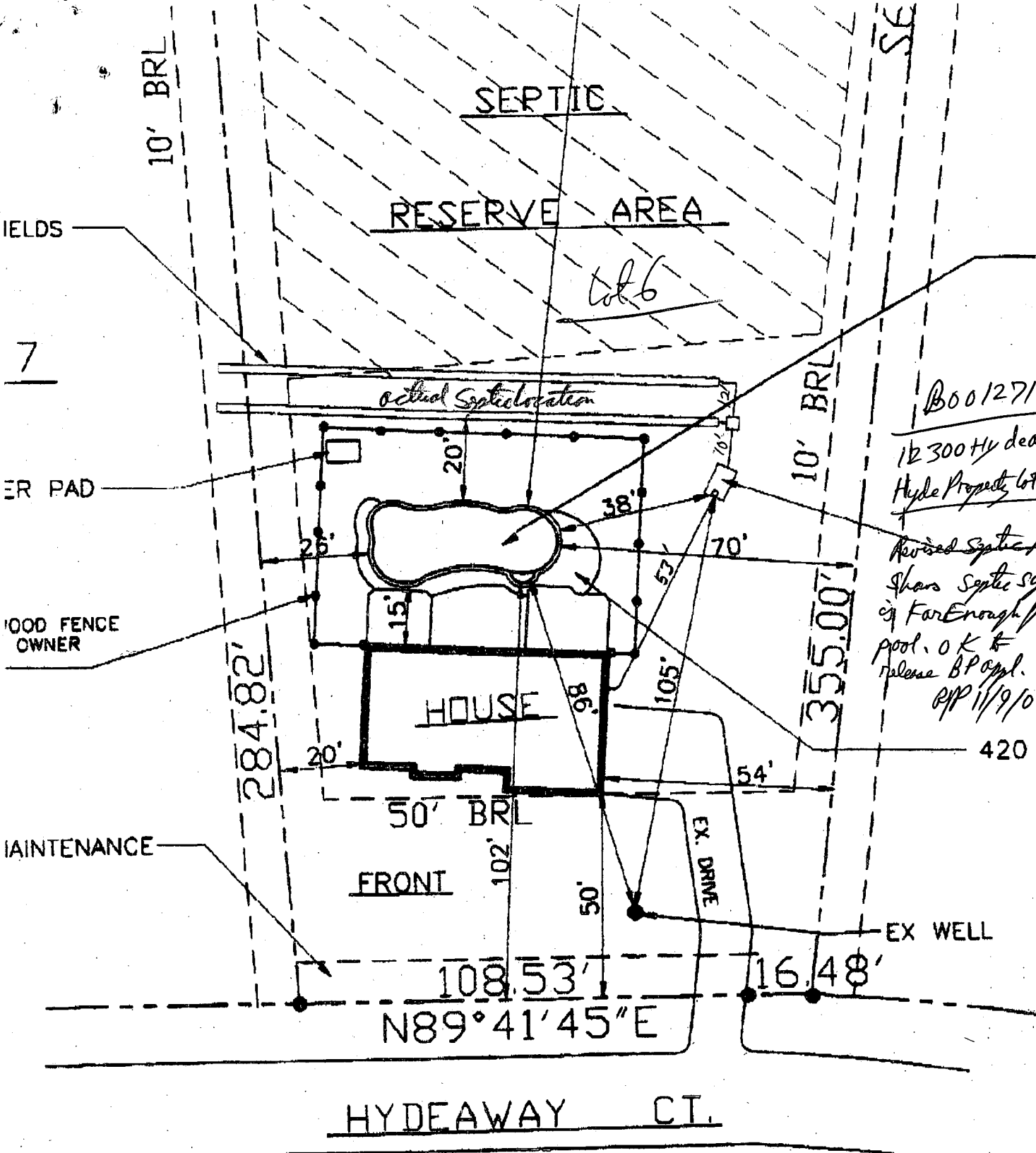
Date of Well Completion: April 3, 1998

Approving Authority

Glen Savage, R.S.
Water and Sewerage Program

GS:gs loop.let

cc: Building Inspector's office
File



SITE PLAN

SCALE: 1" = 30'

12300 HYDEAWAY COURT
HOWARD COUNTY, MARYLAND 20777

HIGHLAND ACRES (Hyde Property)

LOT 6, LOT SIZE- 1.26 AC. +/-
ZONED PDE0

Handwritten initials and date: 11/9/00

Maryland Pools, Inc.



Nov, 20 2000

Howard Co.

INSPECTIONS, LICENSES & PERMITS

3430 COURT HOUSE DR.

ELLCOTT CTRY, MD 21043-4395

RE: PERMIT # B00127143

Dear AVIS CORBIN,

ON BUDG. PERMIT B00127143, AT
12300 HYDEAWAY COURT, HIGHLAND, MD 20777,
THE ORIGINAL LOCATION OF POOL HAS BEEN
MOVED.

Sincerely



John Krawczyk - AGENT

Relocation of pool as per plan
dated 8/16/00 is acceptable.
Kenneth Hibbs, R.S.,
Water & Sewer Program
Howard County Health Dept