

05-412048

4/28 (2) P.C.O. C. Bell

PERMIT

File

SEWAGE DISPOSAL SYSTEM

P 49196

A 37507

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT 5th

DATE 4-26-93

HOWARD COUNTY HEALTH DEPARTMENT

INDEXED

BUREAU OF ENVIRONMENTAL HEALTH

DATE SYSTEM APPROVED 4/29/93

~~461-9933~~ 313-2640

INSPECTOR C. Bell

C. C. Cissel

IS PERMITTED TO INSTALL ALTER

ADDRESS 14079 Brighton Dam Road, Clarksville, Maryland 21029 PHONE 854-2006

SUBDIVISION Chapel Woods II LOT 10 ROAD 11822 Chapel Estates Drive

PROPERTY OWNER Thomas Schaeve

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 144

TRENCHES - Trench to be 2 feet wide. Inlet 3 1/2 feet below original grade. Bottom maximum depth 8 1/2 feet below original grade. Effective area begins at 3 1/2 feet below original grade. 5 feet of stone below distribution pipe.

LOCATION - Place the distribution box 210 feet from the front lot line and 105 feet from the right lot line. Run trenches along 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 7/21/92 RB*

PLANS APPROVED BY C. Williams

DATE 6/25/92

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

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

A 37507

2/8/93 AM 4:17 PM

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
Replacement

Receipt # 0
Date 1/28/93

Name of Installer David F. Rickle Plumbing & Heating

Telephone 410-441-8090

License Number Ha. Co. # 5335

Certified Well Pump Installer Well Driller Registered Plumber

Name of Property Owner Mr./Mrs. Thomas Schover

Telephone 410-381-4792

Subdivision Chapel Woods II Lot # 10

Well Tag # HO - 88 - 0928

Site Address 11822 Chapel Estate Drive

Pump

- Type
 - Deep well jet
 - Shallow well jet
 - Submersible
- Make Goulds
- Model # 7EH07412
- Capacity 7 GPM
- Pump exceeds well capacity Yes No
- If Yes, is low pressure cutoff switch installed? Yes No
- What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors Cable guards Other

Motor

- Horsepower 3/4
- RPM 3450
- Voltage
 - 110
 - 220

Pitless Adapter

- Make Markisa
- Model # B-10X
- Depth 4 ft.

Tank

- Capacity 45 gallons
- Pressure relief valve? 75#
12.1 gallon drawdown @ 40/60

Piping

- Type Black Coil
- Size 1"
- NSF and/or BOCA Code approved
- Depth of supply line 9'-0" ±

Well data

- Depth 225 ft.
- Yield 10 GPM
- Static water level 49 ft.
- Will water supply be disinfected by installer? Yes

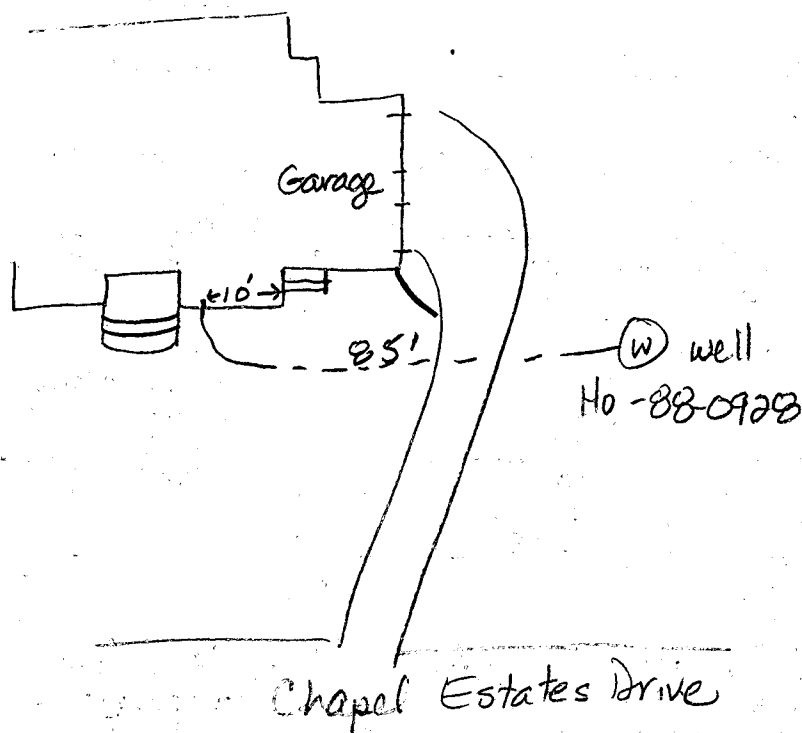
I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

Signature of Applicant: David F. Rickle

Date: January 28, 1993

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



2-893 Pitless adaptor at 50 inches below grade. Ground line in place but not attached. Pump tank in place with relief valve. House connection ok, well line at 52 inches below grade, JENadeau

C1 1062

SEQUENCE NO. (DENY USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

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

COUNTY NUMBER A-37507

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED 110989

Depth of Well 22975 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-88-0928

OWNER: last name CHAPEL WOODS DA first name JIM INC TOWN: CROWNVILLE SUBDIVISION: CHAPEL WOODS II SECTION: LOT: 10

WELL LOG Not required for driven wells STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

Table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Includes handwritten entries: SANDstone 0-24, GRAY MIC Rock 24-225, DRY WELL HOOD, FILLED IN with, MATERIALS.

GROUTING RECORD WELL HAS BEEN GROUTED (YES Y NO N) TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE CLAY BC NO. OF BAGS 7 NO. OF POUNDS 658 GALLONS OF WATER 40 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 0 ft.

CASING RECORD casing types insert appropriate code below ST CO PL OT STEEL CONCRETE PLASTIC OTHER MAIN CASING TYPE Nominal diameter top (main) casing (nearest inch) Total depth of main casing (nearest foot) 54 6 29

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

SCREEN RECORD screen type or open hole insert appropriate code below ST BR HO PL OT STEEL BRASS OPEN HOLE PLASTIC OTHER

DEPTH (nearest ft.) 110 27 225 EACH SCREEN 1 2 3 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

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q TELESCOPE LOG OTHER DATA CASING INDICATOR

PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min. to nearest gal.) 10 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING WHEN PUMPING TYPE OF PUMP USED (for test) air piston turbine centrifugal rotary other (describe below) jet 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: CAPACITY: GALLONS PER MINUTE (to nearest gallon) PUMP HORSE POWER PUMP COLUMN LENGTH (nearest ft.) CASING HEIGHT (circle appropriate box and enter casing height) LAND SURFACE

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) See Attached D Well Location

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 28.04.04 "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 IDENT. NO. 238 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

B 1 **8712** SEQUENCE NO. (DP USE ONLY)
THIS NUMBER IS TO BE PUNCHED IN COLUMNS 3-6 ON ALL CARDS

STATE OF MARYLAND
PERMIT TO DRILL WELL

please print or type

STATE PERMIT NUMBER

HO-88-0928
fill in this form completely

Date Received (APA)

061689

OWNER INFORMATION

J. J. M. INC

5510 SHERROTT PLACE

COLUMBIA MARYLAND 21044

DRILLER INFORMATION

Joseph L MAYNE **238**

Joseph L. Mayne Well Drilling

5510 BILGE RD. MT. AIRY 21771

Joseph L. Mayne 6/14/89

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) **5**

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **500**

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)

APPROXIMATE DEPTH OF WELL **300** FEET

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

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
- THIS WELL WILL DEEPEM AN EXISTING WELL

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

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

APPROP. PERMIT NUMBER **GAP 51**

FORCE **SA** PERMIT No. **HO-88-0928**

SPECIAL CONDITIONS

LOCATION OF WELL

HOWARD

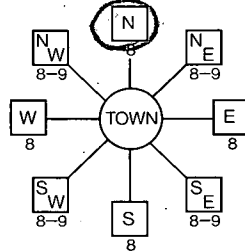
CHAPL WOODS

SECTION **10** LOT **10**

CLARKSVILLE

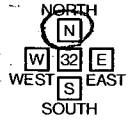
MILES FROM TOWN (enter 0 if in town) **3** MI

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



CHapel Woods Dr. NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



65 DISTANCE FROM ROAD

ENTER FT or MI **FT**

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard **37507**
COUNTY NAME COUNTY NO.

STATE SIGNATURE DATE ISSUED

072189 **Seelye** **01-20-90**

NORTH GRID **509000** EAST GRID **0820000**

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

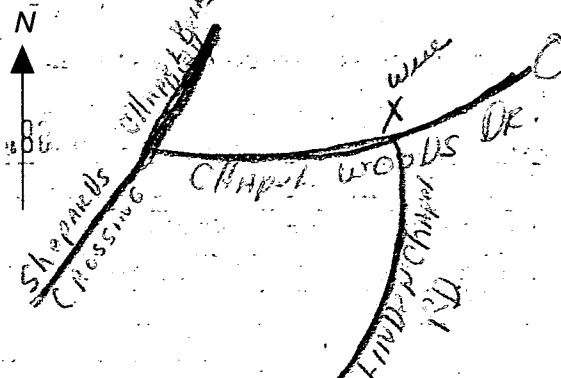
1. **WELL**
- 2.
- 3.

WRITE THE BOX NUMBER FROM THE MAP HERE

820
5709

11/2/89 9:30 already grouted
2 Bags of cement
29' Well casing
25' Well grout - open
1 1/2' casing above ground
C Bid.
(Taylor site div)

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



APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND · DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 37507
P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 473 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT _____
DATE 8/13/86

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 J.J.M. Partnership Thomas + ANNA MARIE SCHAEFF
5570-201 Sterrett Place 381-4792
ADDRESS Columbia, Maryland 21045 PHONE 740-4466

PROPERTY LOCATION: _____
SUBDIVISION Chapel Woods II LOT NO. 10 LOT 10 on Prelim
LOT 10 on 2nd Prelim

ROAD AND DESCRIPTION West side of Middle Patuxent; North of Route 108
(11822 Chapel Estates Drive)

SIZE OF LOT 4.8 ac. TYPE BLDG. residential
(NUMBER OF BEDROOMS) _____

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. John Mikolasko
(SIGNATURE OF APPLICANT)

APPROVED BY Sichay Alul FOR Dep trenches DATE 7-21-89

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

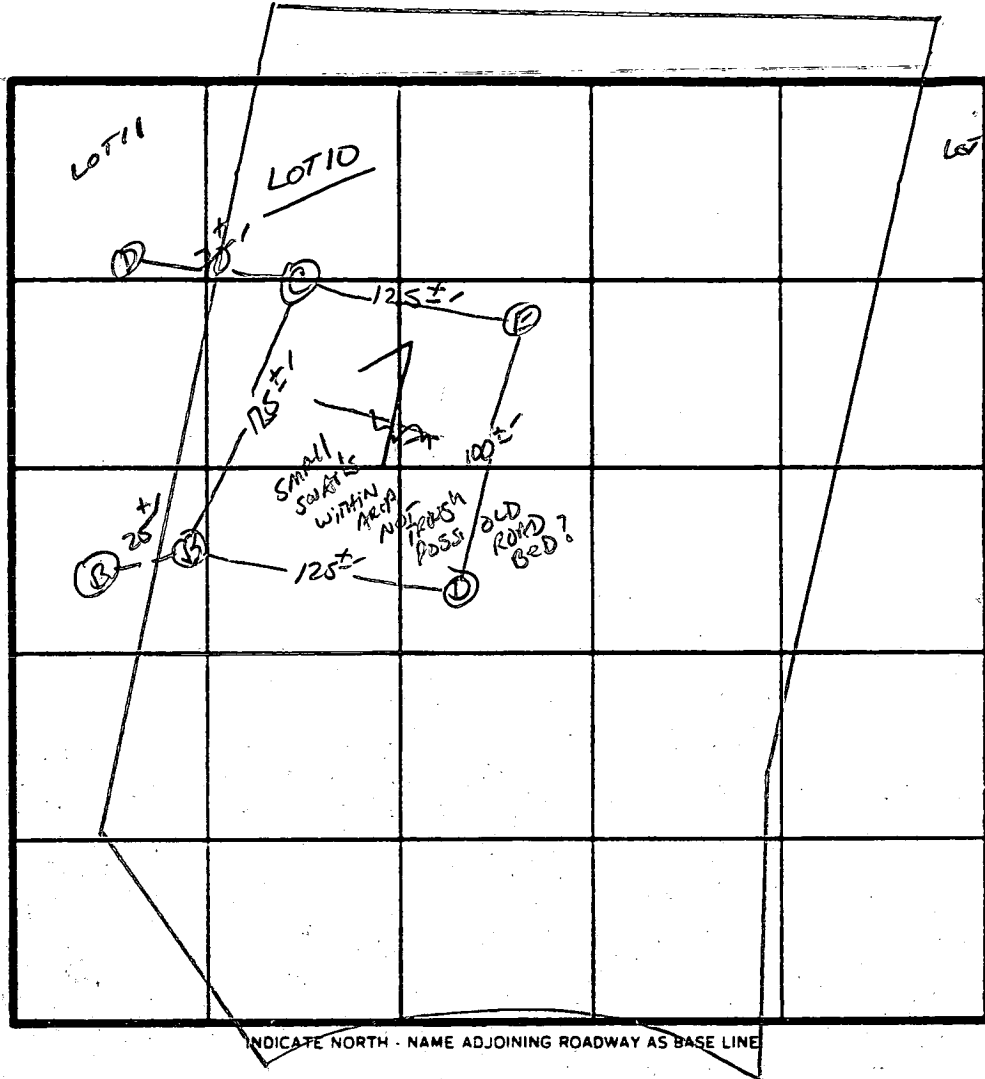
REASONS FOR REJECTION OR HOLDING 9-9-86 Rec Satisfactory; hold for subdivision plat. S. Alul

BLDG. PERMIT SIGNED
AND RETURNED 6/19/92
Serial # 43792 - SFD - 4 Bedroom

THIS IS NOT A PERMIT

DBCE
SOIL PROFILE

0'	A-3
4"	Yellow BK Silt loam 9-12% clay <10% FRAGS
4'	Yellow BK Silt loam 10-15% FRAGMENTS



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

$\bar{X} = 3 \text{ MIN}$
INLET 3K
MAX D 8 1/2

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
9/9/86	C S	4"	11:30	11:31	11:31	11:33	2 min	
	C M	8"	11:31	11:33	11:33	11:35	2 min	
	C V	13"	UNIFORM soil Below 4"					
	B S	4"	11:50	11:51	11:51	11:52	1 min	
	B V	12.5"	UNIFORM soil below 3.5"					
	D S	3"	11:46	11:47	11:47	11:48	1 min	
	D V	12.5"	UNIFORM soil below 3.5"					
	E S	3.5"	11:36	11:38	11:38	11:45	7 min	
	E V	12.5"	UNIFORM soil below 4" w/ FEW SMALL STONES					

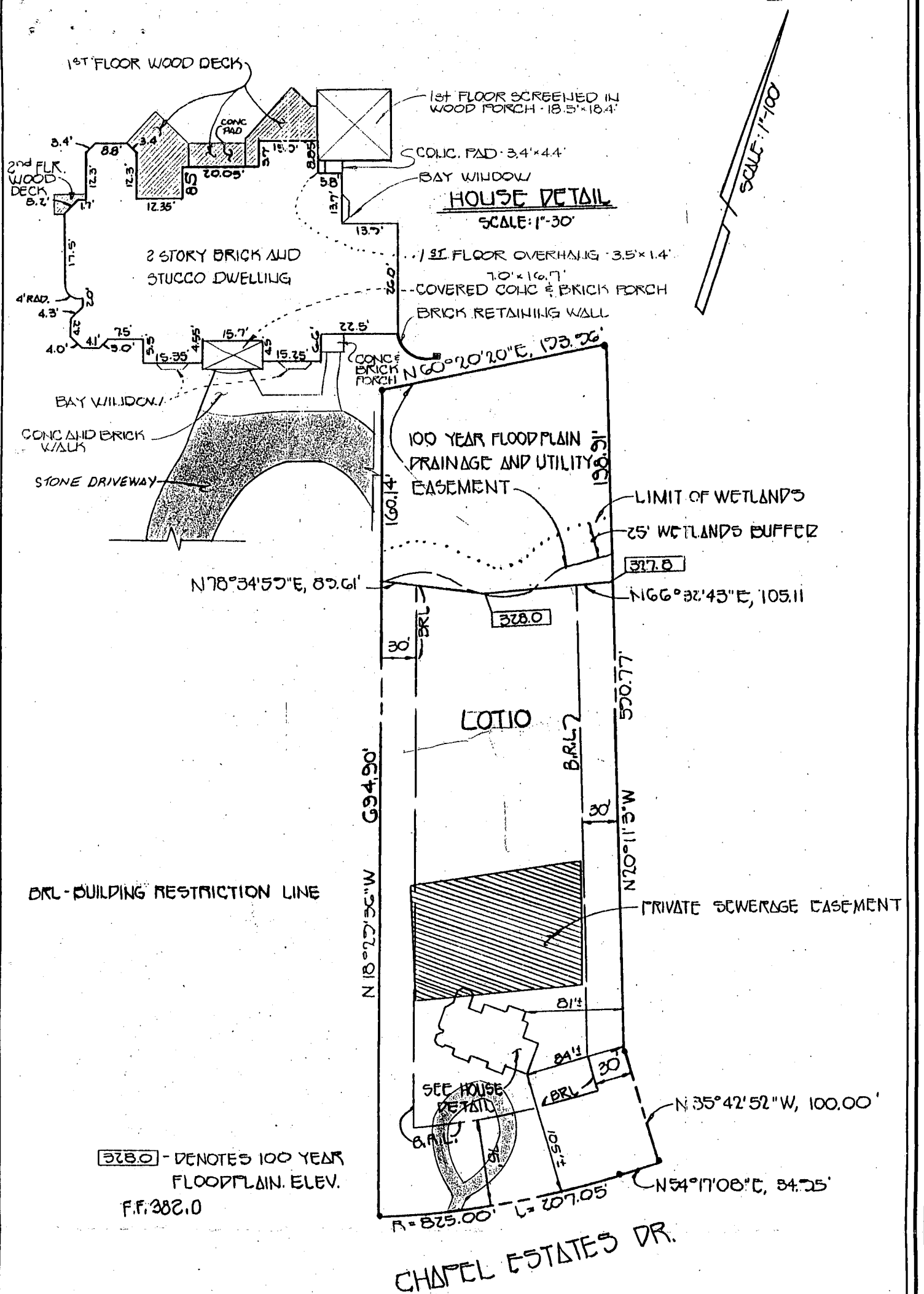
REMARKS Holes per Plat

TYPE OF SOIL Glenelder / Chester

TESTED BY S. Abel

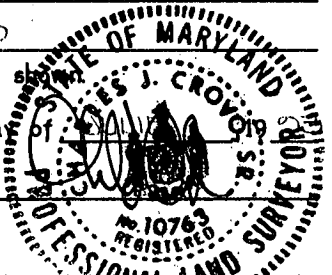
ALSO PRESENT Rel/owner/ Develop

EH 12 1079



This is to certify that I have surveyed the property known as: LOT 10 OF "CHAPEL WOODS II" RECORDED AS PLAT # 2326 AMONG THE LAND RECORDS OF HOWARD COUNTY, MARYLAND for the purpose of locating the improvements thereon, and the improvements are located as shown on this plat.

Signed this 20th day of _____ 2019



This plat is not intended for use in the establishment of property lines.

FISHER, COLLINS & CARTER, INC.
 CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS
 9771 BALTIMORE NATIONAL PKL, SUITE 100
 ELLICOTT CITY, MARYLAND 21042
 (410) 401-2825



HOWARD COUNTY HEALTH DEPARTMENT

Diane L. Matuszak, M.D., M.P.H., County Health Officer

May 10, 2000

Mr. Tom Schovee
11822 Chapel Estates Drive
Clarksville, Maryland 21029

RE: Percolation Test Results

Proposal: Relocation of existing septic reserve area
Property ID: Chapel Wood II, Lot #10
11822 Chapel Estates Drive
Tax Map: 29 Parcel #41

Dear Sir:

Percolation testing was conducted on the above referenced property April 20, 2000. A copy of the test results is enclosed for your records. The test holes evaluated were found to be unsatisfactory due to insufficient depth to groundwater table. Additionally, the proposal was not acceptable due to existing landscape features, including the numerous drainage swales located immediately downslope of the existing septic reserve area.

Should you wish to further pursue an attempt to establish a sewage disposal area to accommodate the proposed pool on the lot, it shall be necessary for a registered engineer to submit a revised percolation test plan. This test plan should include actual locations and elevations of all excavated test holes and relevant landscape features, along with a revised proposal.

This plan should be submitted within sixty (60) days to allow field verification if necessary. If you have any questions regarding this matter, please contact me at the address below or by calling (410) 313-2640.

Sincerely,

Donna K. Soe, R.S.
Water and Sewerage Program

DKS

Enclosure

Cc: Vogel & Associates

file



HOWARD COUNTY HEALTH DEPARTMENT

Diane L. Matuszak, M.D., M.P.H., County Health Officer

March 17, 2000

Mr. Tom Schovee
11822 Chapel Estates Drive
Clarksville, Maryland 21029

RE: **Wet season percolation test date**
Proposed Use: Relocation of existing septic reserve area
Property ID: Chapel Woods II, Lot #10
11822 Chapel Estates Drive
Tax Map: 29 Parcel #41

Dear Mr. Schovee:

Wet season percolation testing has been tentatively scheduled for the above referenced property for **Thursday, April 20, 2000 at 10:00 a.m.** Please call this office at (410) 313-2640 to confirm your acceptance of these percolation test dates.

You shall be responsible for having a contractor on site to excavate the test holes at the corners of the proposed septic area(s).

In the event of uncertain weather (i.e., precipitation or extremes of temperature), please contact this office prior to 9:00 a.m. on the test date to determine whether or not percolation testing can be performed on that date. If it is not feasible to perform the test, a new test date shall be assigned.

Please be advised that current groundwater levels are considerably lower than levels of previous years. Therefore, a supplemental buffer shall be added to account for this deficiency in the groundwater levels as part of our judgement of the soil suitability for septic systems. This supplemental buffer shall be applied in addition to that which is dictated by state regulatory standards. Furthermore, information gathered during this limited wet season may be subject to further consideration.

Percolation test results may be expected by mail approximately two weeks after the completion of the percolation testing.

Thank you in advance for your cooperation in this matter.

Sincerely,

Donna K. Soe, R.S.
Water and Sewerage Program

Cc: Vogel & Associates
file

APPLICATION

Wet Season Testing Required

PERCOLATION TESTING

A 513246

Proposal - major revision
to existing SDA to
accommodate proposed
pool

P _____

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

DATE 2/1/2000

(BKS)

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 Tom Schavee

ADDRESS 11822 Chapel Estates DR PHONE 410-531-2088

Engineer
AGENT OR PROSPECTIVE BUYER VOGEL & Associates Inc.

ADDRESS 3691 Park Ave, Ellicott City, MD PHONE 410-461-5828

PROPERTY LOCATION:

SUBDIVISION Chapel Woods II LOT NO. 10

ROAD AND DESCRIPTION Chapel Estates DR.

TAX MAP 29 PARCEL # 41

SIZE OF LOT 3.252 Acres TYPE BLDG. Single Family
(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

(SIGNATURE 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 _____

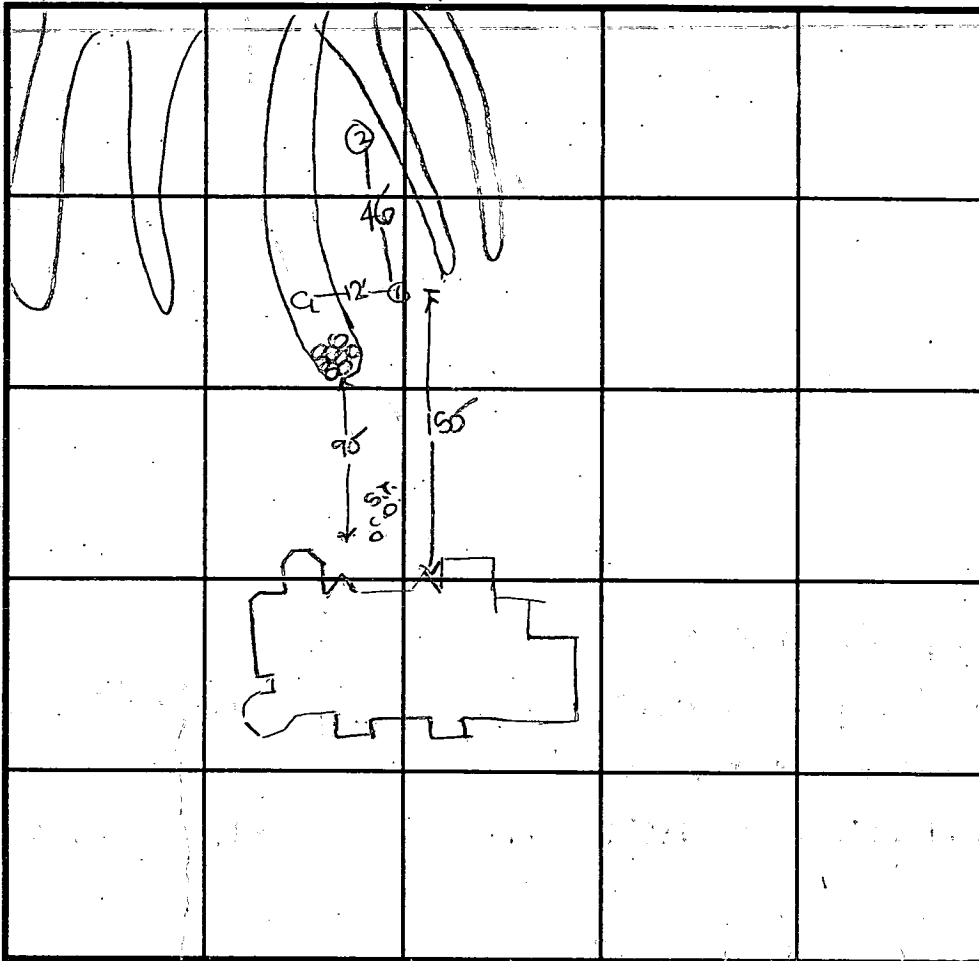
THIS IS NOT A PERMIT

COUNTY #

SOIL PROFILE

0' ①
 top soil
 dk org bn
 clm
 to
 dk brn
 sa cl
 lm
 0.5' water

②
 top soil
 dk org brn
 cl lm
 1.5' seepage
 water



SOIL PROFILE

0'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Chapel Estates Drive

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4-20-00	1	6.5' D	water	-SEP	NOFILE		FAIL
	2	7.0' D	water	-SEP	NOFILE		FAIL

REMARKS _____
 TYPE OF SOIL _____
 TESTED BY DKS ALSO PRESENT Chuck Zepf
 TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____
 INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____

100 YEAR FLOODPLAIN,
DRAINAGE AND UTILITY
EASEMENT AS SHOWN ON
PLAT NO. 9011

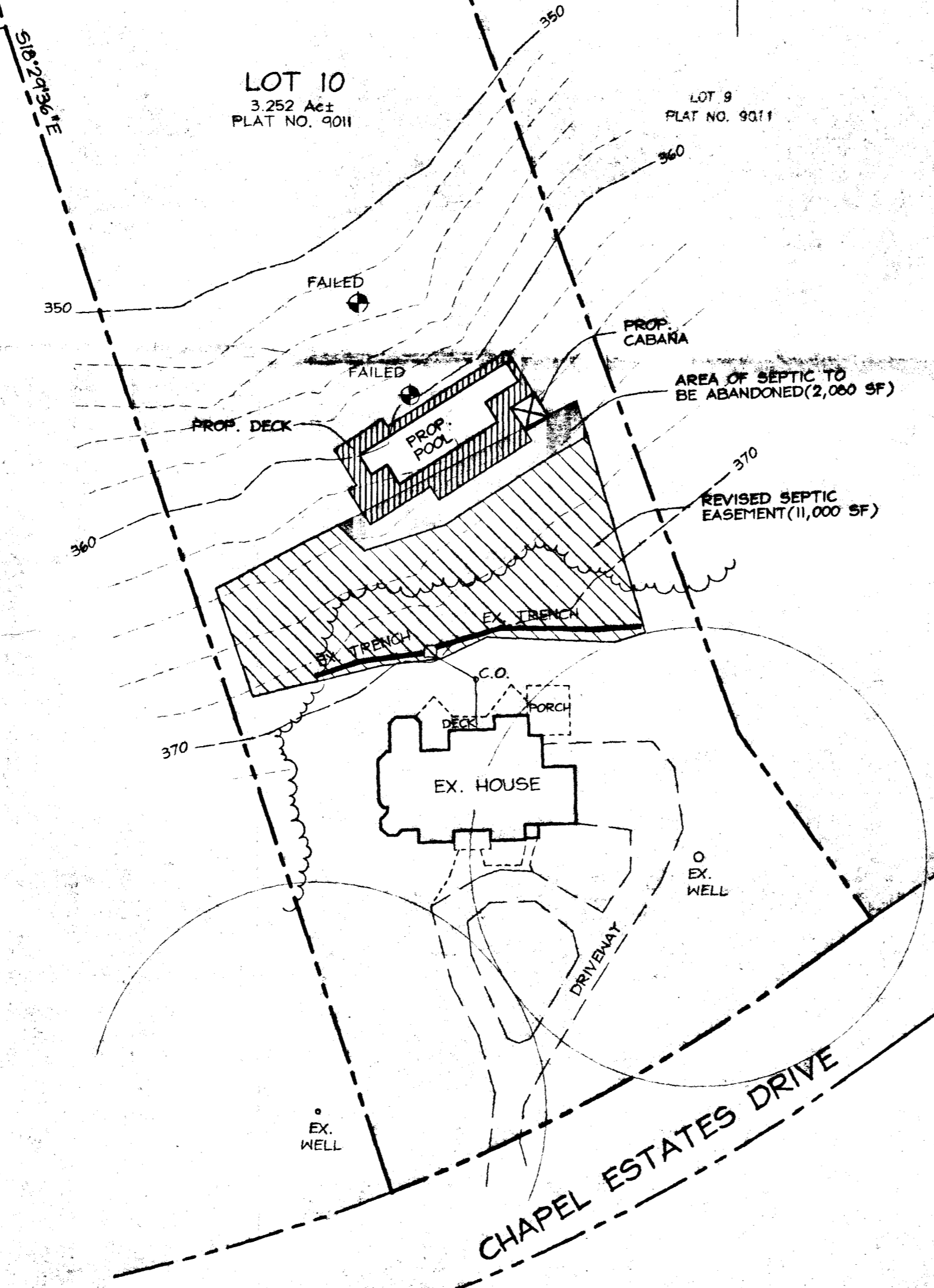
LOT 17
PLAT NO. 9011

LOT 10
3.252 Ac±
PLAT NO. 9011

LOT 9
PLAT NO. 9011

LOT 11
PLAT NO. 9011

MD. STATE GRID MERIDIAN



- NOTES: 1. THE CONTOURS AND ELEVATIONS SHOWN HEREON ARE BASED ON A FIELD RUN SURVEY PERFORMED BY VOGEL & ASSOCIATES, INC. DATED 3/00.
2. THE BOUNDARY LINES SHOWN HEREON ARE BASED ON PLAT 9011.
3. EXISTING SEPTIC LOCATIONS SHOWN ARE BASED ON RECORD PLATS AND APPROVED PLANS.
4. ALL EXISTING WELLS AND SEPTIC AREAS WITHIN 100' OF THE SITE HAVE BEEN SHOWN TO THE BEST OF OUR KNOWLEDGE.
5. THE PURPOSE OF THIS PLAN IS TO ESTABLISH A NEW SEWAGE EASEMENT DUE TO THE LOCATION OF THE PROPOSED POOL.

THIS AREA DESIGNATES A MINIMUM 10,000 SQ FT PRIVATE SEWAGE EASEMENT REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWAGE DISPOSAL IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWAGE IS AVAILABLE. THESE EASEMENTS SHALL BE NULL AND VOID UPON CONNECTION TO A PUBLIC SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENT INTO THE PRIVATE SEWAGE EASEMENT. RECORDATION OF A MODIFIED SEWAGE EASEMENT SHALL NOT BE NECESSARY.

PERCOLATION AREAS AND WATER WELLS WITHIN 100 FEET OF PROPERTY LINES ARE SHOWN ON THIS PLAT.

APPROVED: FOR PRIVATE WATER AND PRIVATE SEWAGE SYSTEMS

Eric M. Matusz 8/21/00
COUNTY HEALTH OFFICER DATE

SEPTIC EXHIBIT
SCHOVEE PROPERTY
11822 CHAPEL ESTATES DRIVE

TAX MAP # 29 LOT 10
5TH ELECTION DISTRICT HOWARD COUNTY, MARYLAND

VOGEL & ASSOCIATES
ENGINEERS SURVEYORS PLANNERS

3691 Park Avenue, Suite 101 • Ellicott City, Maryland 21043
Tel 410.461.5828 Fax 410.465.3966



DESIGN BY: _____
DRAWN BY: JCO
CHECKED BY: RHV
DATE: AUGUST 18, 2000
SCALE: 1"=50'
W.O. NO.: 99-168

ROBERT H. VOGEL, PE No. 16198

1 SHEET OF 1

OWNER
TOM SCHOVEE
11822 CHAPEL ESTATES DRIVE
CLARKSVILLE, MD. 21029