

03 - 280 ~~828~~ 845

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 510578

A A37567

DISTRICT _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
~~XXXXXXXX~~ 410-313-2640

DATE 7-23-98

DATE SYSTEM APPROVED 7/28/98

INSPECTOR (CW)

INDEXED

J. Joseph Gartland IS PERMITTED TO INSTALL ALTER _____

ADDRESS 1835 West Old Liberty Rd, Westminster, MD 21157 PHONE 410-875-2400

SUBDIVISION _____ LOT _____ ROAD 13801 Frederick Road

PROPERTY OWNER Carl Ringley

ADDRESS _____

SEPTIC TANK CAPACITY 1000 GALLONS

NUMBER OF BEDROOMS 3

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 135

Trenches - Trench to be 2' wide. Inlet 4' below original grade. Bottom maximum depth 8' below original grade. Effective area begins at 4' below original grade. 4' of stone below distribution pipe.

LOCATION - Start the first trench 620' from the front lot line and 35' from the right lot line. run trenches along contour toward right-front part of property.

**** SEPTIC TANK TO BE SET AS HIGH AS PRACTICAL: CONTRACTOR TO REQUEST TANK INSPECTION PRIOR TO BEGINNING TRENCH EXCAVATION. OK KM 7-17-98

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

PLANS APPROVED BY _____ DATE _____

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. dick

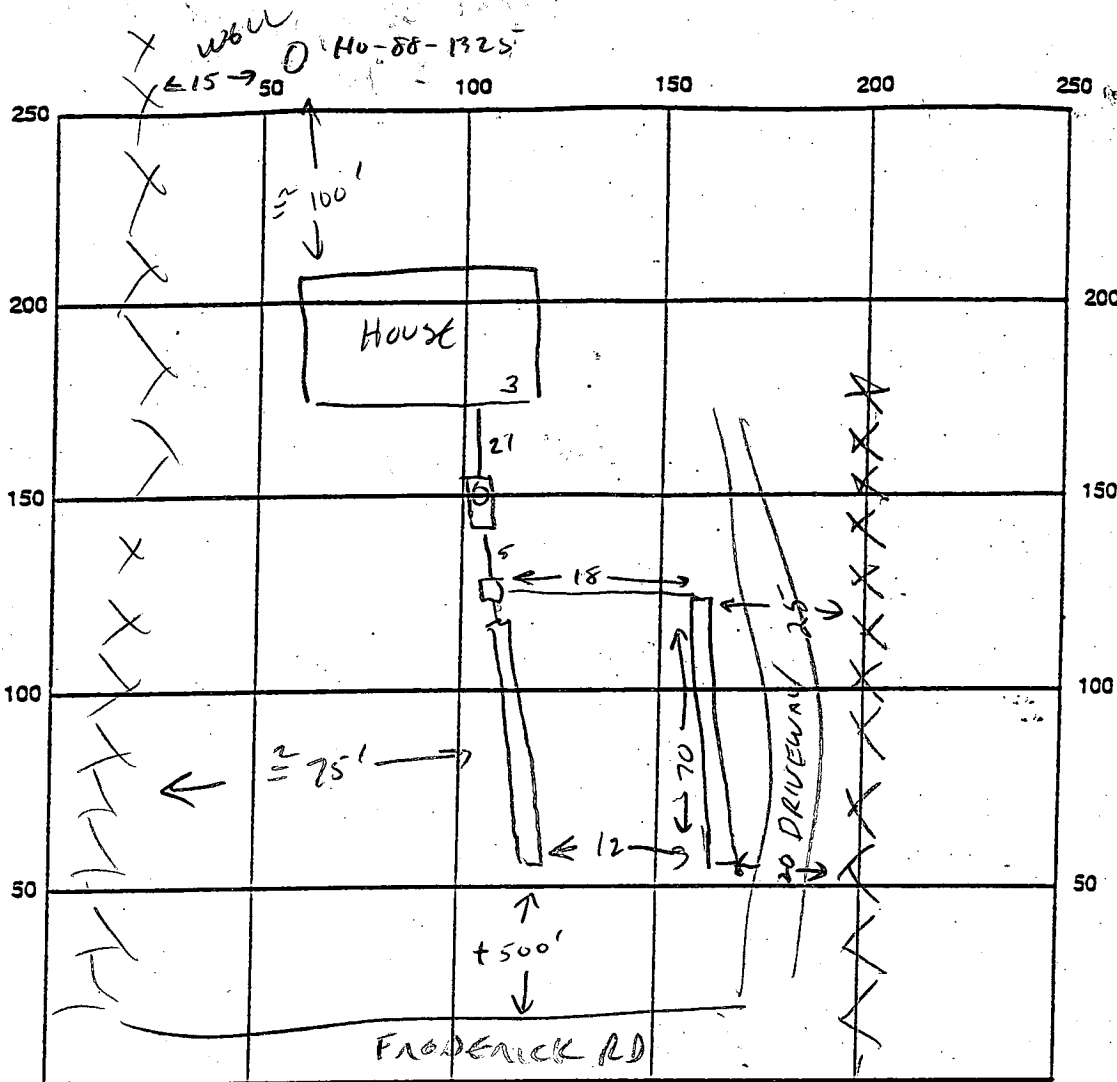
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

A37567

BLDG. PERMIT SIGNED
AND RETURNED 4-19-99
Serial # B70117337



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1000 ✓ CLEANOUTS ST - Manhole

DISTRIBUTION BOX LEVEL ✓

DRAIN FIELD/TITLE DEPTH 9 1/2 / 8 FT. TRENCH WIDTH 2 FT. INLET DEPTH 5 1/2 / 4 FT.

EFFECTIVE GRAVEL DEPTH 4 FT. TOTAL LENGTH 140 FT.

NUMBER OF TRENCHES 2(a) 70 ONE SIDEWALL/BOTTOM AREA 560 SQ. FT.

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

ABSORBENT AREA - SQ. FT.

REMARKS: UPPER TRENCH INLET 5 1/2; BOTTOM AT 9 1/2 - RUNS PARTIALLY UNDER DRIVEWAY (CW) 7/27/98
LOWER TRENCH INLET 4' - BOTTOM 8' 7/28/98 (CW) OK TO COVER ALL
WELLING & PITLESS ADAPTER 40" BELOW GRADE. 2 PIECE CAP. (CW)

DATE SYSTEM APPROVED 7/28/98 INSPECTOR CLW/OLC

APPLICATION

*Bullock
9-4-86
130*

PERCOLATION TESTING

A 37567

P _____

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

DISTRICT 3rd

DATE 8-21-86

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 E. PIERRE BREHM Carl W. Ringley

ADDRESS 13801 RT 144, WEST FRIENDSHIP, 21794 PHONE 489-5026

PROSPECTIVE BUYER CARL W. RINGLEY

ADDRESS 5005 FREDERICK AVE, BALTO. 21229 PHONE _____

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. _____

ROAD AND DESCRIPTION 500ft. East of McKendree Rd on RT 144, South Side
(13801 Frederick Road)

TAX MAP 15 PARCEL # 94

**BLDG. PERMIT SIGNED
AND RETURNED 6-10-86
Serial # B1011941**

SIZE OF LOT _____ TYPE BLDG. SFD-3 Brms
(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.

E. Pierre Brehm
(SIGNATURE OF APPLICANT)

APPROVED BY C. Williams FOR TRENCHES DATE 9/5/86

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING EXISTING HOUSE - SHARED SEPTIC ON ADJACENT LOT,
TESTING TO ESTABLISH REPAIR AREA FOR POSSIBLE
FUTURE HOUSE RELOCATION, 9/5/86 CW

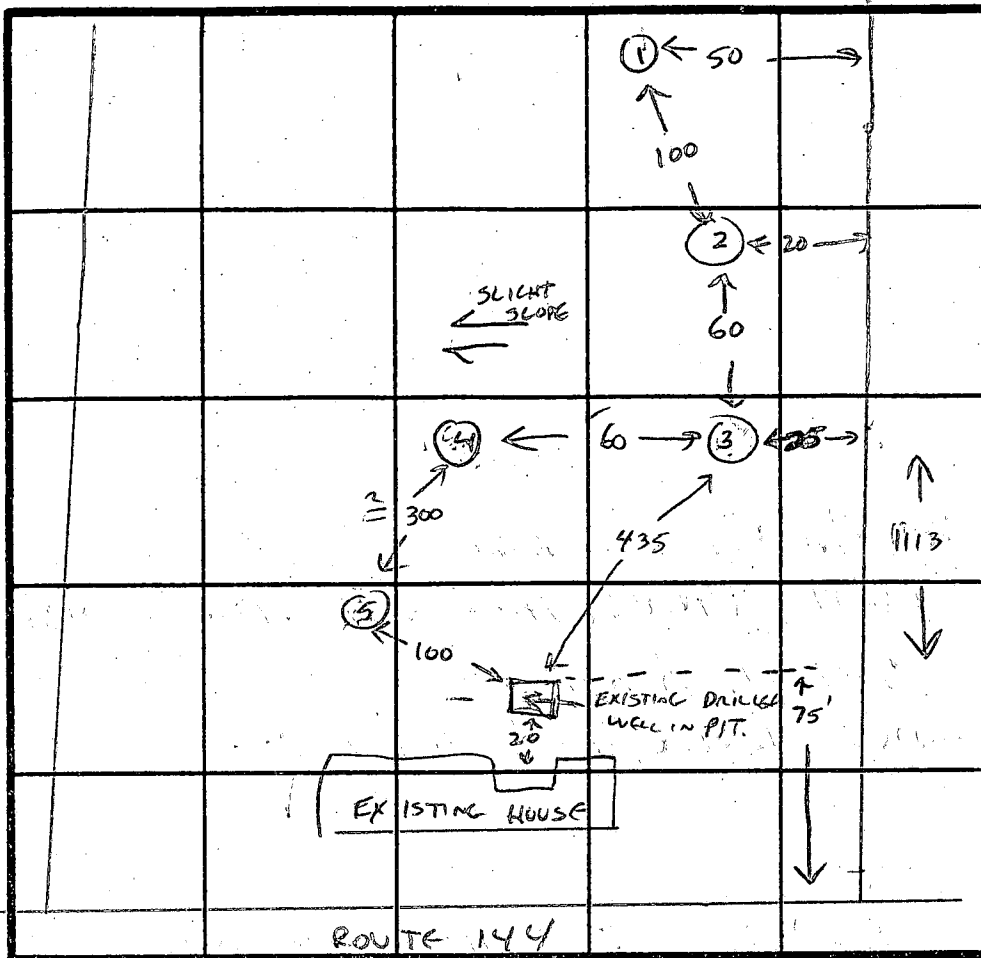
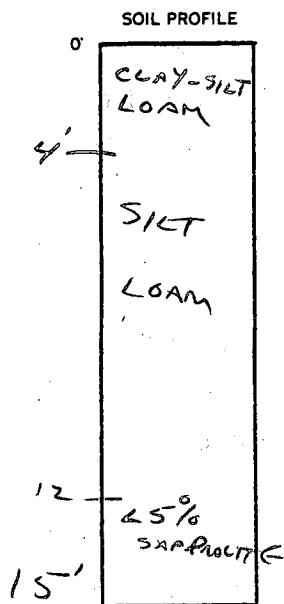
THIS IS NOT A PERMIT

RINGLEY / BNGHM

13801
ROUTE 144

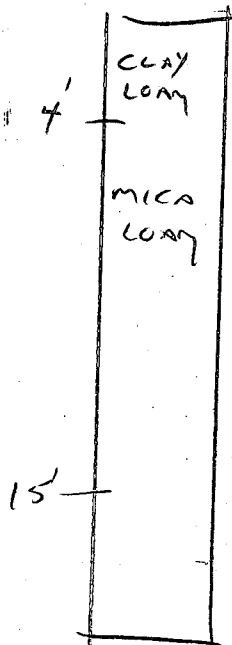
FILE A37567

HOLES 1-4



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

HOLES 5



DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
9/8/88	1	4 15	VIS	OK	SILT-LOAM		
"	2	4 15	2:42 VIS	2:44 OK	2:44	2:47	3 MW
"	3	4 15	VIS	OK	SILT-LOAM		
"	4	4 15	3:00 VIS	3:03 OK	3:03	3:05	3 MW
"	5	4 15	VIS	OK	MICA LOAM		

REMARKS EXISTING WELL SERVES TWO HOUSES.
EXISTING SEPTIC SYSTEM ON ADJACENT PROPERTY SERVES BOTH HOUSES.

TYPE OF SOIL SILT LOAM

TESTED BY C. Williams

ALSO PRESENT RINGLEY

EH-12-1079

B 1 2322 SEQUENCE NO. (DP USE ONLY)
1 2 3 4 5 6 7 8
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
please print or type

STATE PERMIT NUMBER
H0-88-1325
70 fill in this form completely 79

Date Received (APA) 040990
OWNER INFORMATION
8 13
RINGLEY CARL
15 Last Name 34 Owner First Name
13801 AVE 144
36 Street or RFD 55
WEST FRIENDSHIP
57 Town 70 State 72 21794 Zip 76

B 3 LOCATION OF WELL
1 2 HOWARD
8 COUNTY 21
MAP 15 PARCEL 94
23 SUBDIVISION 42
SECTION 44 46 LOT 48 50
WEST FRIENDSHIP
52 NEAREST TOWN 71
MILES FROM TOWN (enter 0 if in town) 2 MI
73 76 77 78

DRILLER INFORMATION
Paul M. Fabiszak 399
Driller's Name 77 License No. 80
G. Edgar Harr Sons' Corp.
Firm Name
12047 Falls Rd., Cockeysville 21030
Address
Signature Date 3-5-90

B 4 1 2
DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
NORTH N
WEST W
EAST E
SOUTH S
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
NORTH N
WEST W
EAST E
SOUTH S
13801 Route 144
11 NEAR WHAT ROAD 30
200
34 DISTANCE FROM ROAD 37
ENTER FT OR MI FT
38 39

B 2 WELL INFORMATION
1 2 APPROX. PUMPING RATE (GAL. PER MIN.) 5
8 12
AVERAGE DAILY QUANTITY NEEDED 750
(GAL. PER DAY) 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)
D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
Howard A 37567
COUNTY NAME COUNTY NO.
STATE SIGNATURE INSERT S
DATE ISSUED 042790 Charles Allen 10/27/90
43 48 CO SIGNATURE EXP. DATE
NORTH GRID 538000 EAST GRID 0801000
50 55 57 63

APPROXIMATE DEPTH OF WELL 200 FEET
24 28

APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH

METHOD OF DRILLING (circle one)
BORED (or Augered) JETTED Jetted & DRIVEN
30 AIR-ROtary AIR-PERcussion ROTARY (Hydraulic Rotary)
37 CABLE REVERSE-ROtary Drive-POINT
other

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
SOURCES OF DRILLING WATER
1.
2.
3.
WRITE THE BOX NUMBER FROM THE MAP HERE
E 800'
N 530'
000 000
1/15/91 20 IN SP.
Page 9 H-2

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)
N THIS WELL WILL NOT REPLACE AN EXISTING WELL
Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
39 S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
D THIS WELL WILL DEEPEN 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
N
McKendree Rd
Rte 144
Pfefferborn Road
HEALTH DEPARTMENT RECEIVED

Not to be filled in by driller (OEP USE ONLY)
APPROX. PERMIT NUMBER 54 GAP 63
FORCE MR WRITE INITIALS IN BOX PERMIT No. H0-88-1325
67 68 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS

C1 **1436** SEQUENCE NO. (DENV 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 **A 37537**

ST/CO USE ONLY
 DATE Received

DATE WELL COMPLETED
012391

Depth of Well
200
 (TO NEAREST FOOT)

PERMIT NO.
 FROM "PERMIT TO DRILL WELL"
40-88-1325

OWNER **RINGOLD CARL**
 last name first name
 STREET OR RFD **13501 ROUTE 144** TOWN **W. Friendship**
 SUBDIVISION **TR 4315 PARCEL 94** SECTION **1** LOT **1 MOD 15, E 74**

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	
Overburden	0	10	
Brown Shale	10	53	
Gray Rock	53	200	X

GROUTING RECORD
 WELL HAS BEEN GROUTED YES NO
 (Circle Appropriate Box)
 TYPE OF GROUTING MATERIAL
 CEMENT BENTONITE CLAY
 NO. OF BAGS **14** NO. OF POUNDS **1400**
 GALLONS OF WATER **84**
 DEPTH OF GROUT SEAL (to nearest foot)
 from **0** ft. to **55** 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 Nominal diameter (nearest inch) Total depth (nearest foot)
 ST 6 55
 60 61 63 64 66 65 70

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

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

C2
 DEPTH (nearest ft.)
 E A C H S C R E E N
 1 **40** **55** **200**
 8 9 11 15 17 21
 2
 23 24 26 30 32 36
 3
 38 39 41 45 47 51

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 IDENT. NO. **399**
 DRILLERS SIGNATURE
 (MUST MATCH SIGNATURE ON APPLICATION)
 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

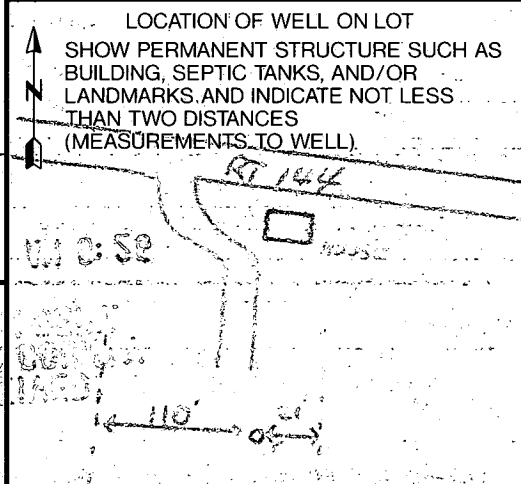
SLOT SIZE 1 2 3
 DIAMETER OF SCREEN (NEAREST INCH)
 from to

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

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

C3
PUMPING TEST
 HOURS PUMPED (nearest hour) **3**
 PUMPING RATE (gal. per min. to nearest gal.) **12**
 METHOD USED TO MEASURE PUMPING RATE **Submersible**
 WATER LEVEL (distance from land surface) BEFORE PUMPING **26** WHEN PUMPING **124**
 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 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) **31** - **35**
 PUMP HORSE POWER **37** - **41**
 PUMP COLUMN LENGTH (nearest ft.) **43** - **47**
 CASING HEIGHT (circle appropriate box and enter casing height).
 above } LAND SURFACE (nearest foot)
 below }



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 # _____
Date 8-31-98

Name of Installer J. Joseph Garland

Telephone 410-875-2400

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

Name of Property Owner Carl W. Ringley Telephone 410-442-1073
Subdivision _____ Lot # _____ Well Tag # _____
Site Address 13801 Rt. 144 West Friendship, MD 21794

Pump

- Type
 - Deep well jet _____
 - Shallow well jet _____
 - Submersible _____
- Make _____
- Model # _____
- Capacity _____ 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 _____
- RPM _____
- Voltage _____
 - 110 _____
 - 220 _____

Pitless Adapter

- Make _____
- Model # _____
- Depth _____

Tank

- Capacity _____
- Pressure relief valve? _____

Piping

- Type _____
- Size _____
- NSF and/or BOCA Code approved _____
- Depth of supply line _____

Well data

- Depth _____ ft.
- Yield _____ GPM
- Static water level _____ ft.
- Will water supply be disinfected by installer? _____

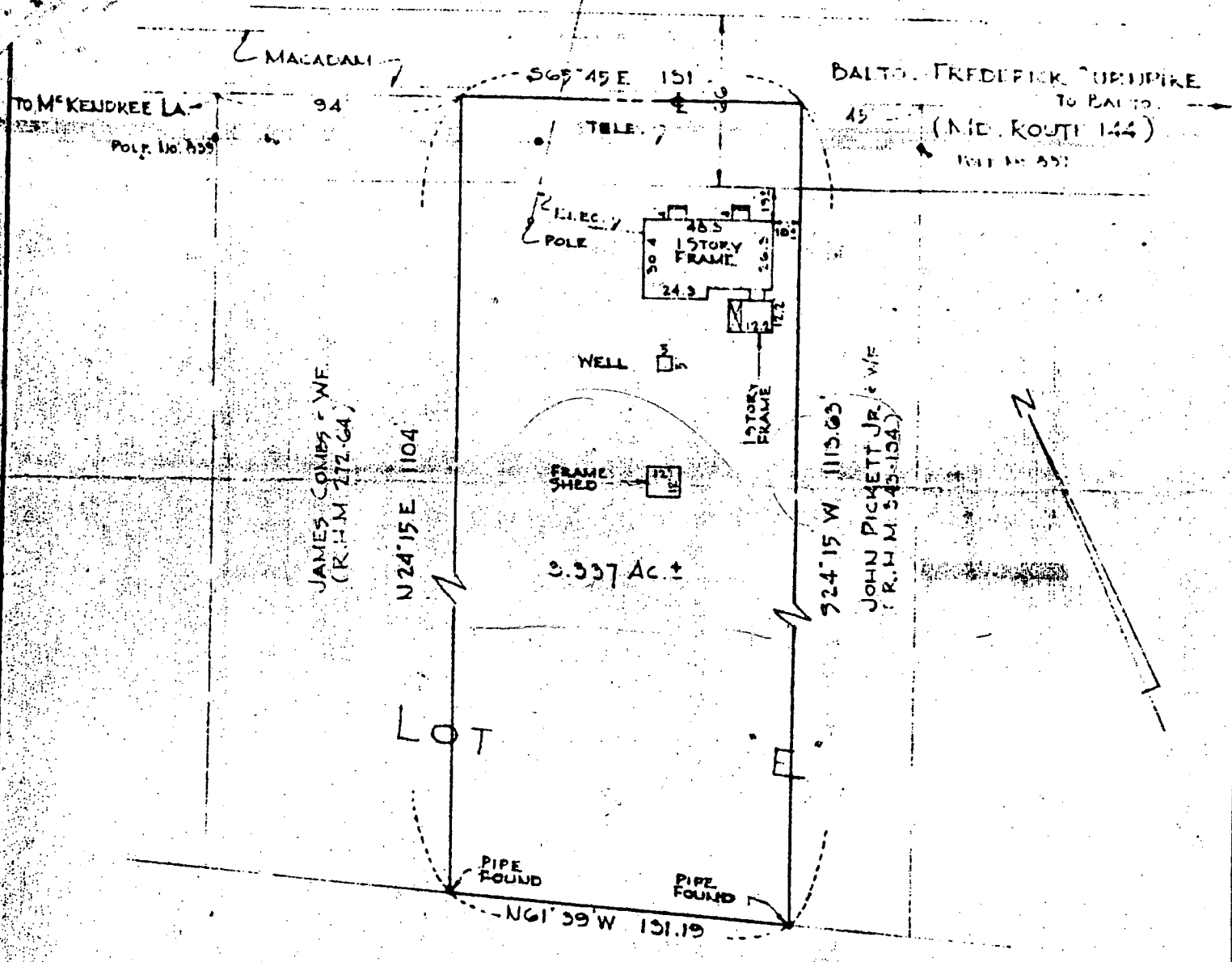
I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

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

Signature of Applicant: Carl W. Ringley

Date: 8-31-98

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



I hereby certify that I have made a survey of this lot for the purpose of locating the improvements thereon and that they are located as shown.

Edward J. Krus

REG. NO. 3384

NOTE: BEING PART OF LOT "F" AS SHOWN ON A PLAT OF THE SUBDIVISION OF THE PROPERTY OF SETH W. WARFIELD WHICH PLAT IS RECORDED AMONG THE LAND RECORDS OF HOWARD CO. IN LIBER H.S.K. No. 141 FOLIO 603

SCALE 1"=60'	LOCATION SURVEY SOUTH SIDE (NEAR COOKSVILLE) DISTRICT NO. 3 BALTO.-FREDERICK TURNPIKE. HOWARD CO., MD.	
DATE 11-30-62	GENERAL SURVEYING CO. LAND & HYDROGRAPHIC SURVEYS 642 ALDWORTH ROAD BALTIMORE 22, MARYLAND	
JOB No. 62284		



FREDERICK ROAD - M
Ex. Pav
N 85° 45' W 131'

*IF 200' INITIAL X 50' 1/2' SEPTIC TANKS
OK IF REALIGNMENT
IF 200' INITIAL X 50' 1/2' SEPTIC TANKS*

6/10/98

G.W. Williams

Exist House
TO BE RAZED

Exist Frame Shed

- DISTRIBUTION BOX
Ex. ELEV. = 96.5
INV. IN = 92.0
- PROP. 1000 GAL. TANK
Ex. ELEV. = 97.0
INV. IN = 93.0
INV. OUT = 92.5
- PROP. HOUSE
F.F. ELEV. = 104.0
B. ELEV. = 95.3
INV. OUT = 94.5

*4/19/99
shown deck location
will have no impact
to the existing well
OK septic ok to
continue
AW*

Not to scale

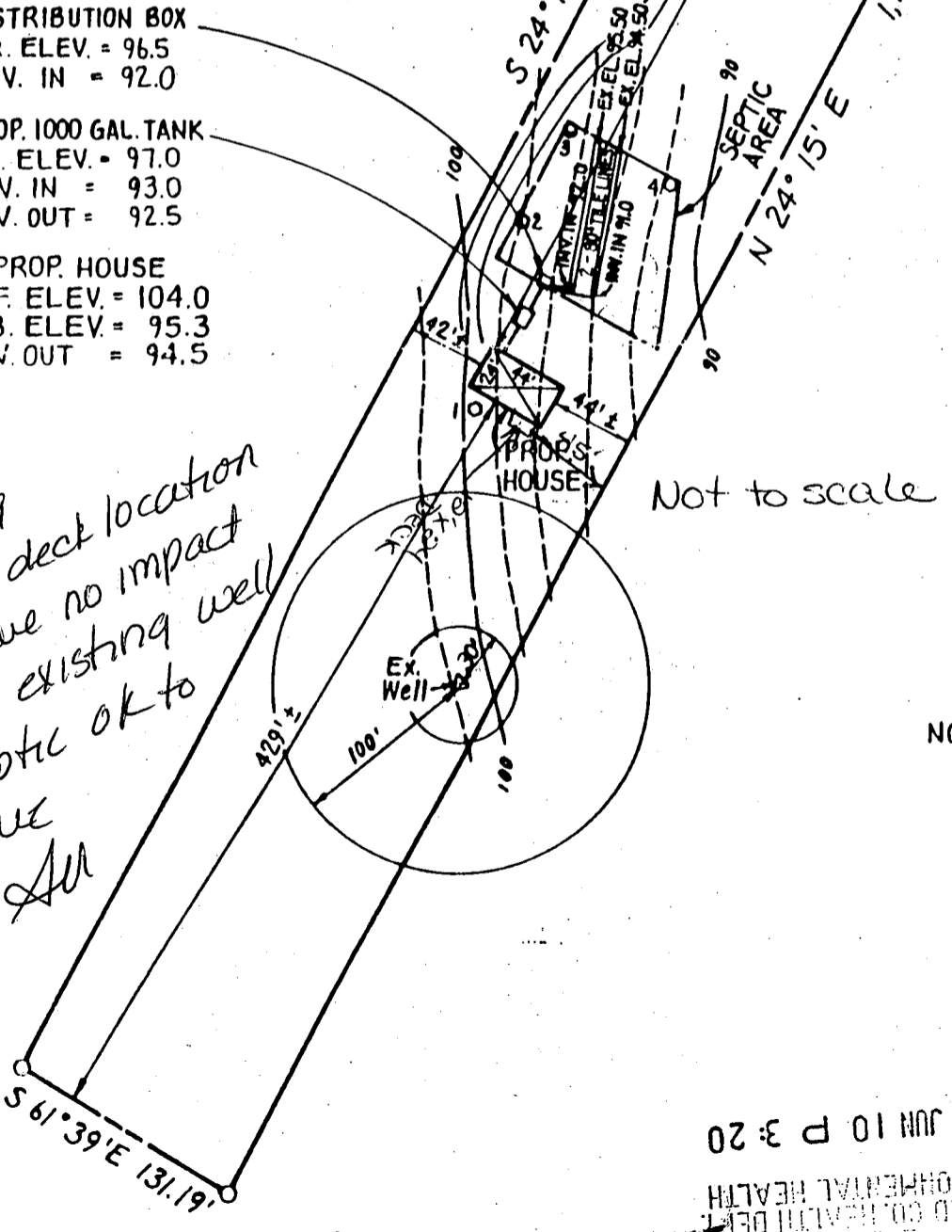
TITLE
CAR
155
OCTO

NOTE: PERC TEST LOC
HOWARD COUNTY
EXACT TRENCH L
AT TIME OF PERM

1998 JUN 10 P 3:20

HOWARD COUNTY DEPT.
ENVIRONMENTAL HEALTH

S 61° 39' E 131.19'





B0011194/ - 3 BR
INSTALL SYSTEM HIGH ENOUGH FOR INITIAL INSTALLATION & REPLACEMENT
IF NOT INITIAL & ONE REPLACEMENT IN SERIES & SEPTIC TANKS INSTALLED

Approved Septic System Plan
 Howard County Health Department

Q. Will 7/16/98
 Signature Date

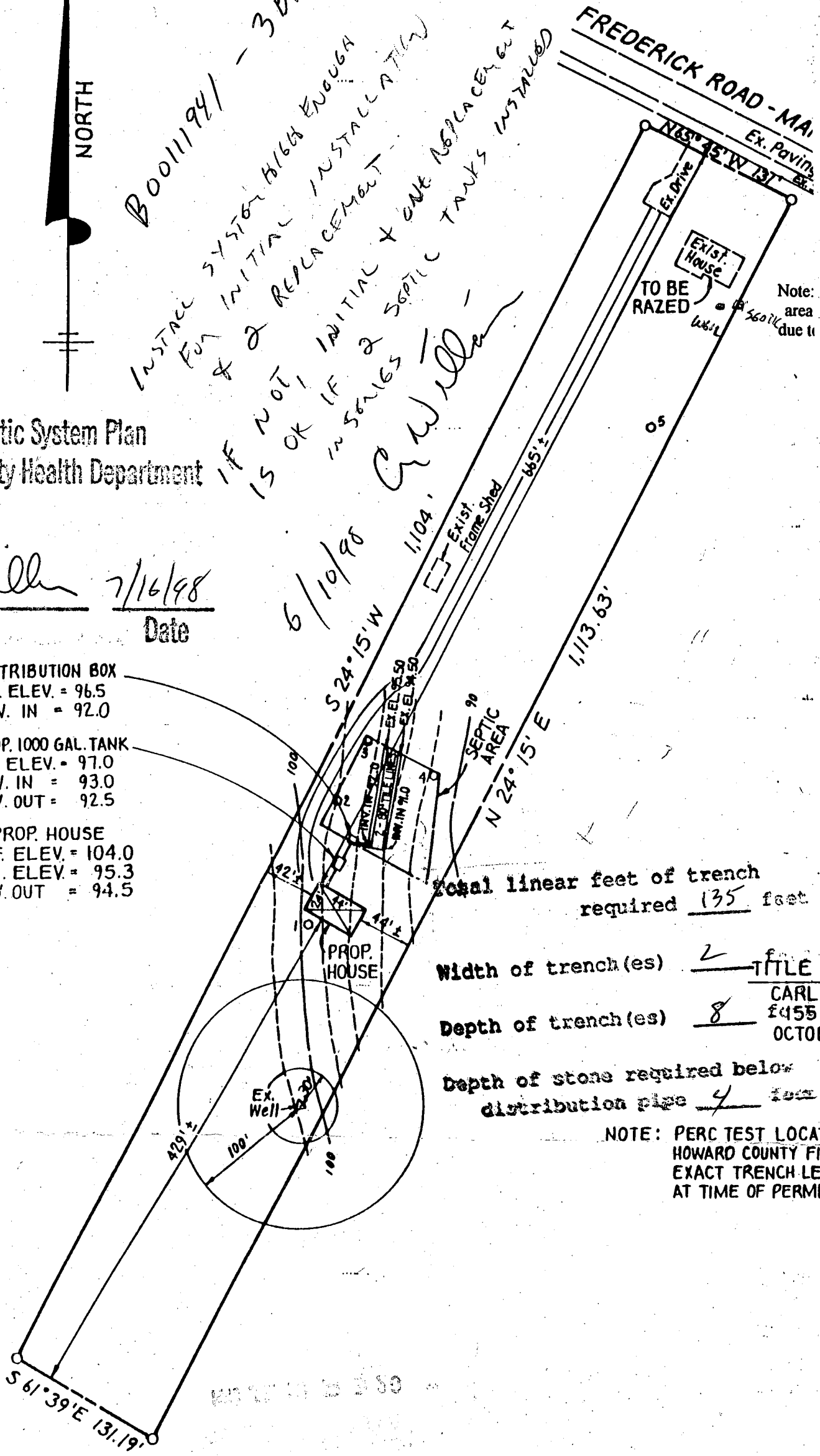
6/10/98

Q. Will

DISTRIBUTION BOX
 Ex. ELEV. = 96.5
 INV. IN = 92.0

PROP. 1000 GAL. TANK
 Ex. ELEV. = 97.0
 INV. IN = 93.0
 INV. OUT = 92.5

PROP. HOUSE
 F.F. ELEV. = 104.0
 B. ELEV. = 95.3
 INV. OUT = 94.5



Total linear feet of trench required 135 feet

Width of trench(es) 2 TITLE I

Depth of trench(es) 8 CARL #4558 OCT08

Depth of stone required below distribution pipe 4 feet

NOTE: PERC TEST LOCATED
 HOWARD COUNTY FIELD
 EXACT TRENCH LENGTH
 AT TIME OF PERMIT

100' 100' 100'

I Carl Ringley plan to abandon existing well & septic
upon occupancy approval of new dwelling

Carl Ringley
6-10-98

HEALTH DEPT REPLY

"ABANDONMENT STANDARDS" FOR WELLS
REQUIRE THE WELL BE SEALED BY
A LICENSED WELL DRILLER, OR IF NOT BY A LICENSED
DRILLER, THEN THE WORK BE SUPERVISED BY A
LICENSED SANITARIAN.

FOR SEPTICS,
THE WORK CAN BE PERFORMED BY
ANY "COMPETENT CONTRACTOR", DETAIL
OF WORK TO BE SUBMITTED TO HEALTH DEPT.

AS A PRACTICAL MATTER
IT IS BEST IF A DRILLER HANDLES
THE ^{WELL} ABANDONMENT AND THE HEALTH
DEPARTMENT WITNESSES THE SEPTIC
ABANDONMENT,

C. Williams

(IF WELL/SEPTIC KEPT
FOR NEIGHBOR USE,
NEED DEEDED AGREEMENT)

RECEIVED
HOWARD CO. HEALTH DEPT.
ENVIRONMENTAL HEALTH
1998 JUN 10 P 3:20



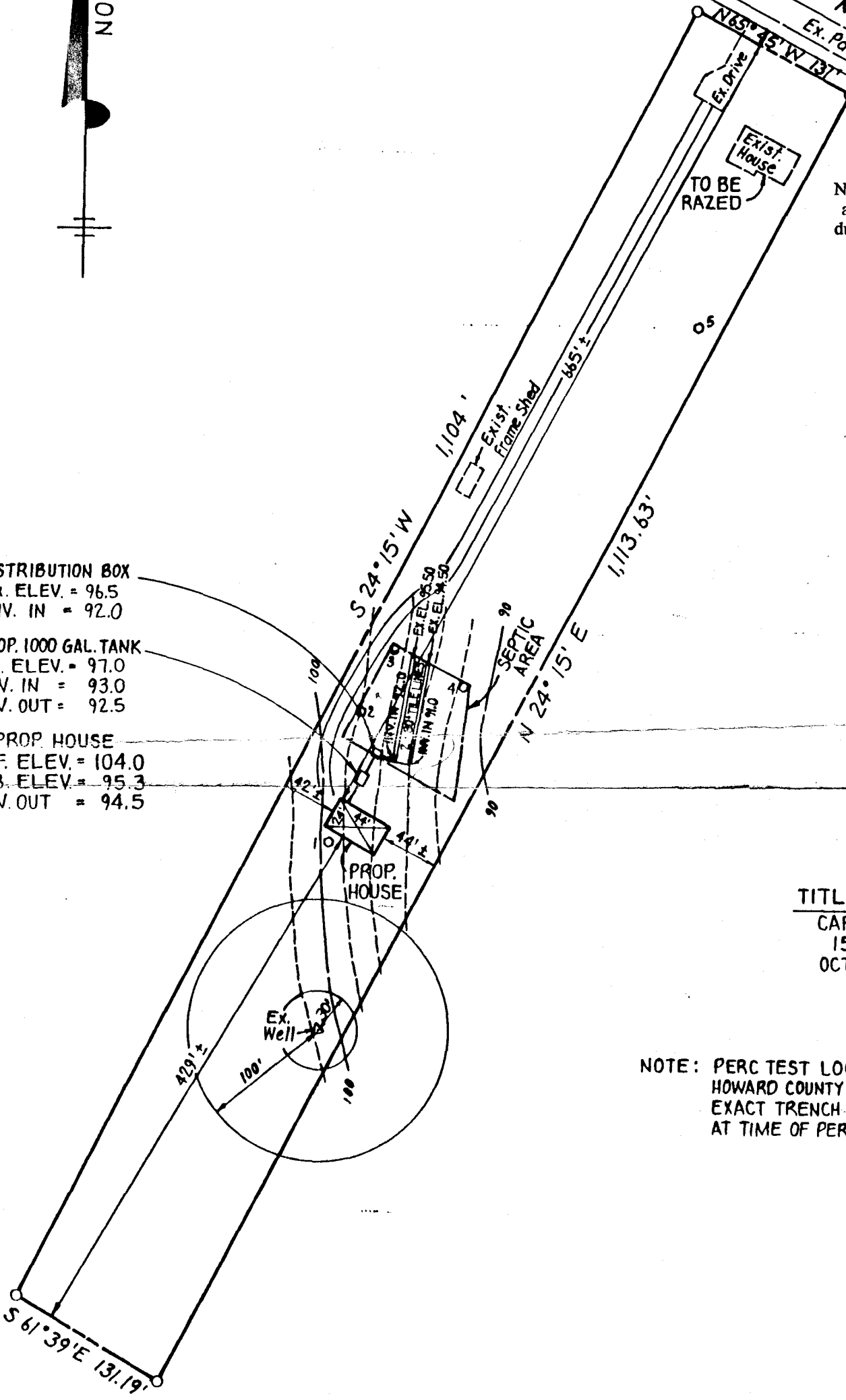
FREDERICK ROAD - MARYLAND ROUTE #144
Ex. Paving
Ex. Shoulder

1500 A 1500 W 00 51
1000 W 00 51

Note: existing well and septic area not shown on this plan due to undetermined location in field

EXIST. HOUSE
TO BE RAZED

DISTRIBUTION BOX
Ex. ELEV. = 96.5
INV. IN = 92.0
PROP. 1000 GAL. TANK
Ex. ELEV. = 97.0
INV. IN = 93.0
INV. OUT = 92.5
PROP. HOUSE
F.F. ELEV. = 104.0
B. ELEV. = 95.3
INV. OUT = 94.5



TITLE REFERENCE:
CARL W. RINGLEY
1558 ~ 552
OCTOBER 24, 1986

NOTE: PERC TEST LOCATIONS TAKEN FROM HOWARD COUNTY FIELD SHEET. EXACT TRENCH LENGTHS TO BE DETERMINED AT TIME OF PERMIT

SITE PLAN
RINGLEY PROPERTY

13801 FREDERICK ROAD
HOWARD CO., MD.
SCALE: 1" = 100' DATE: MAY 18, 1998

NOTE: I CERTIFY THAT THE ABOVE MEASUREMENTS ARE ACTUAL AND CORRECT FOR THIS PROPERTY.

George A. Stroud III
GEORGE A. STROUD III
PROPERTY LINE SURVEYOR No. 256

A.L.S. INC.
194 EAST MAIN STREET
WESTMINSTER, MD. 21157
410-857-0822

77-98-22