

9/20/93
11:00 am
9/20/93

Tap ID - 41405

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 49603

A 37800

DISTRICT 5th

DATE 9/10/93

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH

INDEXED

~~461-9933~~ 313-2640

DATE SYSTEM APPROVED _____

see attached

INSPECTOR _____

South Carroll Backhoe, Inc. IS PERMITTED TO INSTALL X ALTER _____

ADDRESS 4410 Salem Bottom Road, Westminster, Maryland PHONE 875-4197

SUBDIVISION Clearview Estates, Sec. 2 LOT 43 ROAD 12043 Broad Meadow Lane

PROPERTY OWNER Altiera Homes / Louis + Carole Potts Paul Jones

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

240 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

BLDG. PERMIT SIGNED
AND RETURNED 1-21-98
Serial # B10109560
Interior Alterations - Permit

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

LOCATION - Place distribution box 170 feet from front lot line and 100 feet from right lot line as viewed from Broad Meadow Lane. Install trenches on contour toward 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. 11/4/93 RT

BLDG. PERMIT SIGNED
AND RETURNED 12-1-98
Serial # B10115231
Deck

PLANS APPROVED BY Ronald Pinkley DATE 6/05/92

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

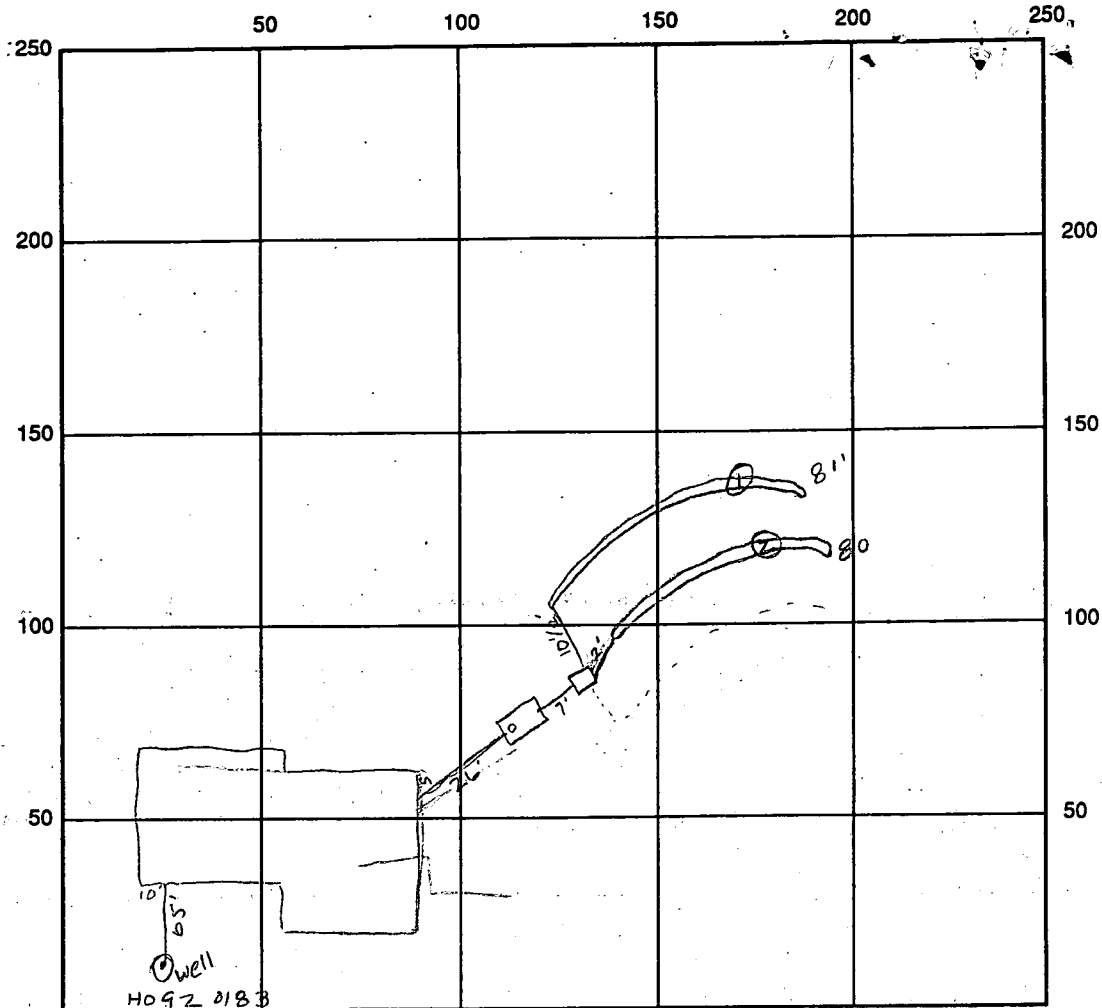
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON. CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

BLDG. PERMIT SIGNED
AND RETURNED 5-27-98
Serial # B10118247
Ground Pk

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

A 37800



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
 Broad Meadow Ln

SEPTIC TANK LEVEL OK 1500 gal CLEANOUTS OK

DISTRIBUTION BOX LEVEL OK baffle is in

DRAIN FIELD/TITLE DEPTH 7 1/2-8 FT. TRENCH WIDTH 2 FT. INLET DEPTH 4 1/2 FT.

EFFECTIVE GRAVEL DEPTH 4 FT. TOTAL LENGTH 81' 30" FT.

NUMBER OF TRENCHES _____ ONE SIDEWALL/BOTTOM AREA _____ SQ. FT.

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

ABSORBENT AREA _____ SQ. FT.

REMARKS: 9/20/93 11:00 Put baffle in, work OK continue ALM 3:30 OK to cover trench #1 & 2 baffle is in ALM

9/20/93 WLI (Feinzer) OK to cover ALM

DATE SYSTEM APPROVED _____ INSPECTOR _____

9/20/93
10/30

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INSPECTOR _____
 RETURN FILE TO P _____
 ANY A _____
 FOR DISTRICT _____
 FINAL DISPOSITION DATE _____
 DATE SYSTEM APPROVED 9/21/93
 INSPECTOR BH

SOUTH CAROL

IS PERMITTED TO INSTALL _____ ALTER _____

ADDRESS _____ PHONE _____

SUBDIVISION CLG 221160 LOT 43 ROAD _____

PROPERTY OWNER _____

ADDRESS BROADWAY DRIVE

SEPTIC TANK CAPACITY _____ GALLONS

NUMBER OF BEDROOMS _____

_____ SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED _____

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

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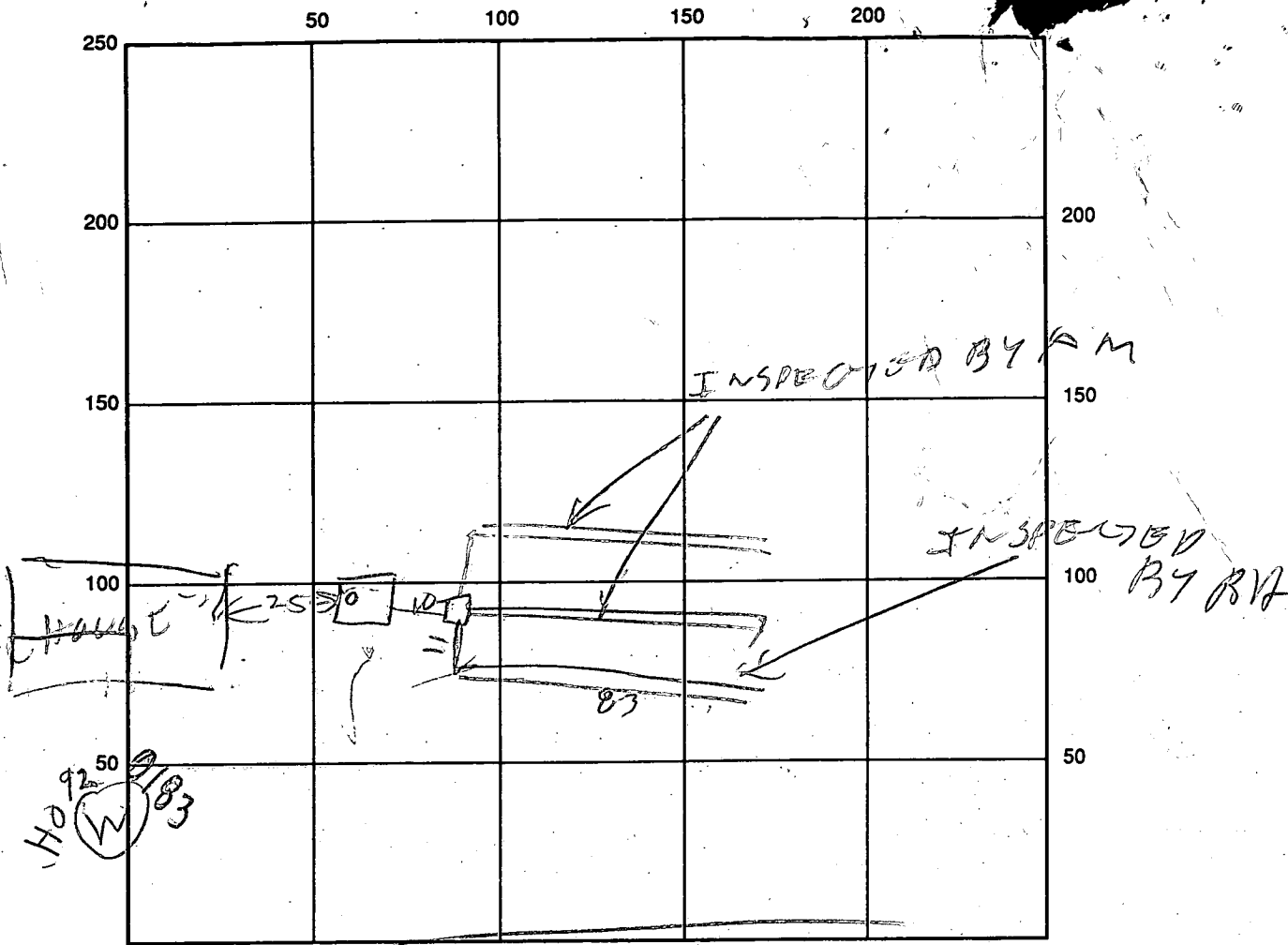
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PERMIT VOID AFTER TWO YEARS

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**



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
 BORUP MEADOW LAND

SEPTIC TANK LEVEL _____ CLEANOUTS _____

DISTRIBUTION BOX LEVEL _____

DRAIN FIELD/TITLE DEPTH _____ FT. TRENCH WIDTH _____ FT. INLET DEPTH _____ FT.

EFFECTIVE GRAVEL DEPTH _____ FT. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ ONE SIDEWALL/BOTTOM AREA _____ SQ. FT.

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

ABSORBENT AREA _____ SQ. FT.

REMARKS: 9/24/93 AM inspected Yesterday but we cannot find Records
 Talked to KENNY Trench 9 FT deep Inlet 4 1/2 ft deep
 8 1/2 ft stone 2 FT WIDE 83 FT LONG

DATE SYSTEM APPROVED 9/21/93 INSPECTOR B. Hodger

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 57800

P _____

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

DISTRICT _____

DATE 10/9/86
June 30, 1986

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 Martha V. Langenfelder
~~Conrad J. and Patricia Langenfelder~~ Martha V. Langenfelder
ADDRESS 11904 Clarksville Road 5511 Hamilton Avenue
Clarksville, Maryland 21029 Baltimore, Maryland 21206
PHONE _____

PROPERTY LOCATION:

SUBDIVISION Langenfelder Farm - Clearview Est. Sec. 2 LOT NO. 28 30 42 (43)
ROAD AND DESCRIPTION Maryland Route 108 and Shepherd Lane (12043 Broad Meadow Lane)

SIZE OF LOT 3.4 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 NOT REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.
Steven P. May
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 10-22-86 PERC SATISFACTORY, HOLD FOR SUBDIVISION PLAT -

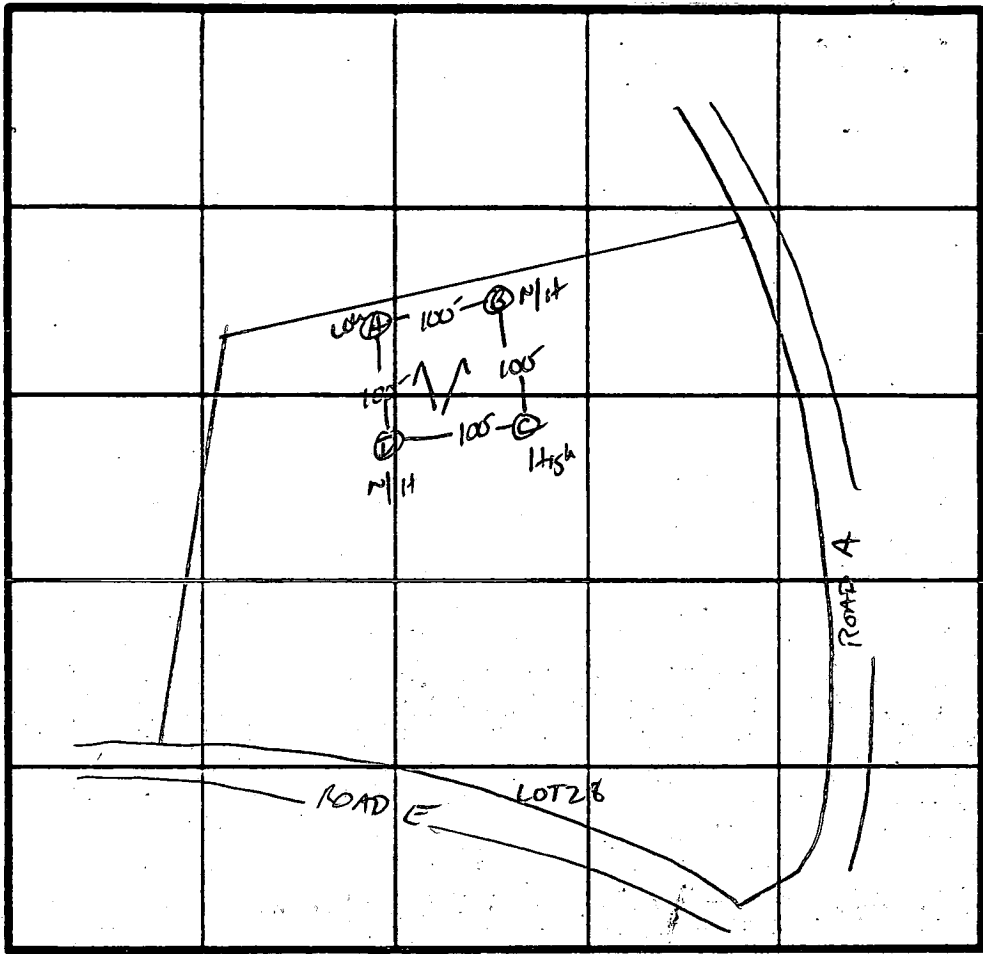
S. Hall
BLDG. PERMIT SIGNED
AND RETURNED 5/24/83
Serial # 48678
SFD - H. Bemo

BLDG. PERMIT SIGNED
AND RETURNED 1/9/82
Serial # 44293 - SFD
4 Bedrooms

THIS IS NOT A PERMIT

SOIL PROFILE

AP
 RED yellow
 silt loam
 12-15% CLM
 20-25% FRSS
 4.5'
 yellow br
 → TAN
 silt loam
 15% FRSS
 13'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

V TO 108

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
10/22/66	C S	4"	11:45	12:00	12:00	12:21	21 MIN	
		85"	11:45	11:46	11:46	11:48	2 MIN	
	C V	13'	UNIFORM soil below 4.5'					
	D S	4"	11:54	12:03	12:03	12:30	27 MIN	
		13'	UNIFORM soil below 4.5'					
	A S	5.5"	11:02	11:03	11:03	11:05	2 MIN	
		13'	UNIFORM soil below 4.5'					
	B V	13'	SAME AS OTHER HOLES					

REMARKS: Hole per PLAT DS AT 4' Failed

TYPE OF SOIL: Chester

TESTED BY: S. Abel

ALSO PRESENT: Jane Maduey, Allen Buehler

Neil T. eff

EM 12 10/9

APPLICATION

SEWAGE DISPOSAL TESTING

A 37802

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P _____

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

DISTRICT _____

DATE 10/09/86
June 30, 1986

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 Conrad J. and Patricia Langenfelder Martha V. Langenfelder
11904 Clarksville Road 5511 Hamilton Avenue
ADDRESS Clarksville, Maryland 21029 PHONE Baltimore, Maryland 21206

PROPERTY LOCATION:

SUBDIVISION Langenfelder Farm LOT NO. 30
FAKSDI UNUSOD AREA NOW PART OF LOTS 42

ROAD AND DESCRIPTION Maryland Route 108 and Shepherd Lane

SIZE OF LOT 3.8 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.

Steven M. Murray
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

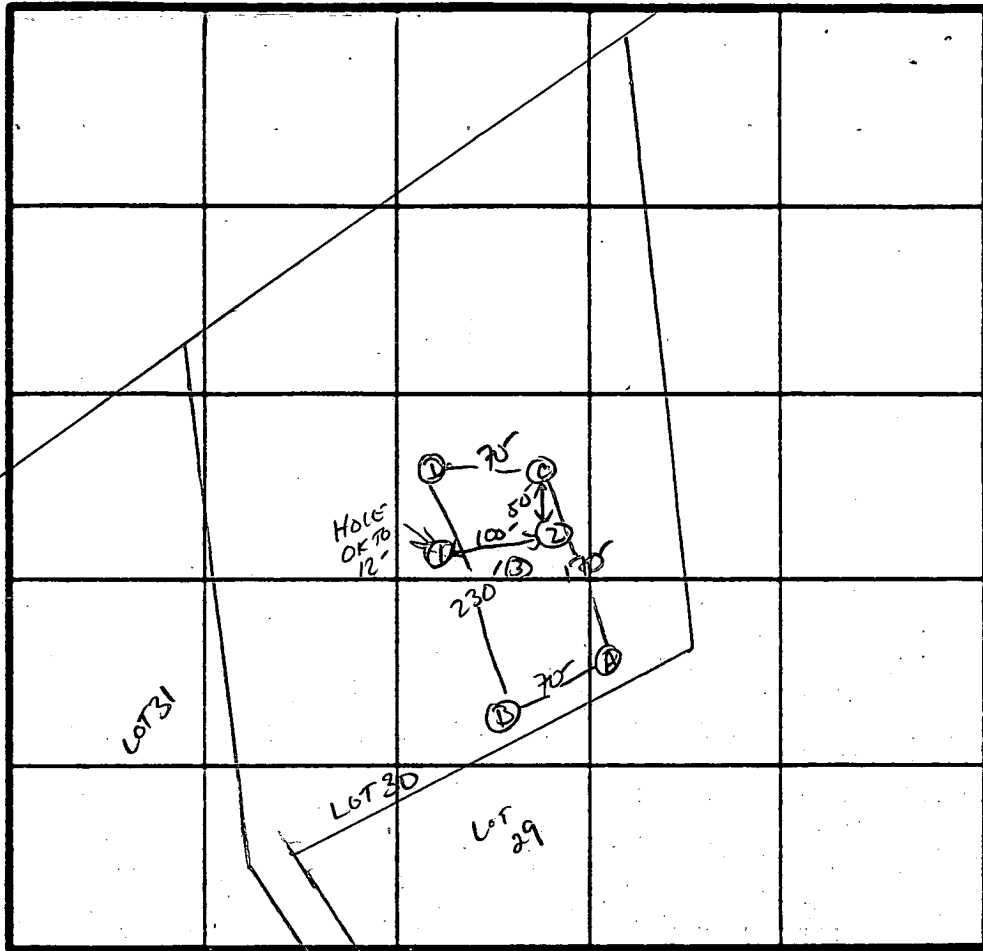
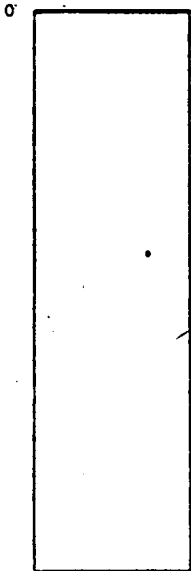
REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 10-29-86 - Perc UNSATISFACTORY; ROCK AT SHALLOW DEPTHS
insufficient area remaining to test as designed. S. Abel

THIS IS NOT A PERMIT

SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

1/1 TO 108

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
	A-	ROCK AT 7.5	Glenside				
	C-	ROCK AT 6'	Glenside				
	D-	ROCK AT 7.5'	CHESTER				
	1-	CLAY TO 4.5'	SANDY LOAM		4.5-12'	CHESTER	
	2-	ROCK AT 6.5'	CHESTER				
	3-	ROCK AT 8.5'	CLAY		CHESTER		

REMARKS Holes Done thru first

TYPE OF SOIL Glenside / Chester

TESTED BY S. King ALSO PRESENT JANE M... ALLAN B...

EHP 2 10/9

B 1 00499

SEQUENCE NO. (DP USE ONLY)

STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL

STATE PERMIT NUMBER

HO-92-0183

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

please print or type

fill in this form completely

Date Received (APA)

090992

OWNER INFORMATION

M U HAMES

15 Last Name 21 Owner 27 First Name 34

36 15215 SW 24 GROVE RD 55

57 ROCKVILLE 70 State 72 MD 76 Zip 76

B 3

LOCATION OF WELL

HOWARD

8 COUNTY 21

CLEARVIEW EST

23 SUBDIVISION 42

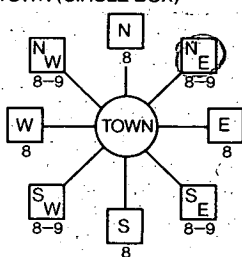
SECTION 44 46 LOT 43 48 50

CLARKSVILLE 52 NEAREST TOWN 71

MILES FROM TOWN (enter 0 if in town) 1 MI 73 76 77 78

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Broad Meadows Lane

11 NEAR WHAT ROAD 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



34 40 37 DISTANCE FROM ROAD

ENTER FT or MI FT 38 39

B 2

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 2

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 800

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

COUNTY NAME

A 37800

COUNTY NO.

STATE SIGNATURE

DATE ISSUED

INSERT S

092892 Mark E. Palkin 3/28/93

NORTH GRID 507000

EAST GRID 0819000

APPROXIMATE DEPTH OF WELL 400 FEET

APPROXIMATE DIAMETER OF WELL 6 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)

- N THIS WELL WILL NOT REPLACE AN EXISTING WELL
Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
D THIS WELL WILL DEEPEM AN EXISTING WELL

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

APPROP. PERMIT NUMBER: GAP

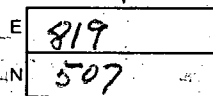
FORCE M/R PERMIT No. HO-92-0183

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

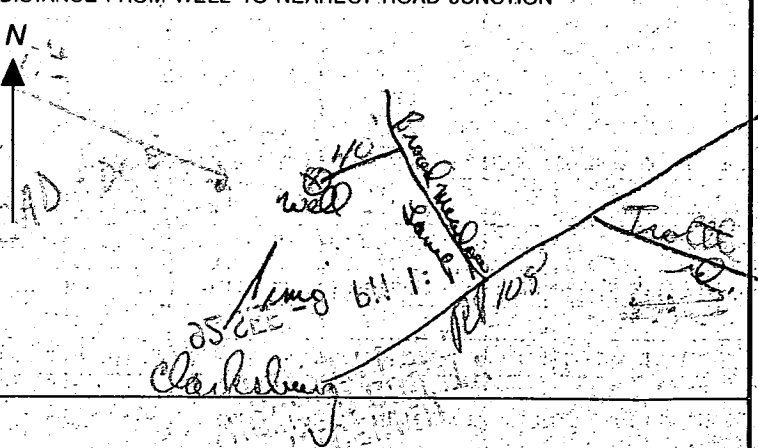
SOURCES OF DRILLING WATER

- 1. well
2.
3.

WRITE THE BOX NUMBER FROM THE MAP HERE



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



C1 **6797** SEQUENCE NO. (DENY USE ONLY)
 1 2 3 4 5 6
 (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 **A37800**

ST/CO USE ONLY
 DATE Received

DATE WELL COMPLETED
10/3/97

Depth of Well
300
 (TO NEAREST FOOT)

PERMIT NO.
 FROM "PERMIT TO DRILL WELL"
HO-92-01A3

OWNER **NV Homes**
 last name first name
 STREET OR RFD **Broad Meadows Lane** TOWN **Clarksville**
 SUBDIVISION **CLEARVIEW EST** SECTION **43** LOT **43**

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	
OB	0	38	
Slate & Sandstone	38	300	

GROUTING RECORD
 WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y**
 TYPE OF GROUTING MATERIAL
 CEMENT **CM** BENTONITE CLAY **BC**
 NO. OF BAGS **24** NO. OF POUNDS **240**
 GALLONS OF WATER **144**
 DEPTH OF GROUT SEAL (to nearest foot)
 from **0** ft. to **62** 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 **ST** Nominal diameter top (main) casing (nearest inch) **6** Total depth of main casing (nearest foot) **63**

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

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

DEPTH (nearest ft.)
HO 62 300

SCREEN

1	2	3	4	5	6	7	8	9	10
8	9	14	15	17	21	23	24	26	30
32	36	38	39	41	45	47	51		

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

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. **144**
Austin Barrow
 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)
Austin Barrow
 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

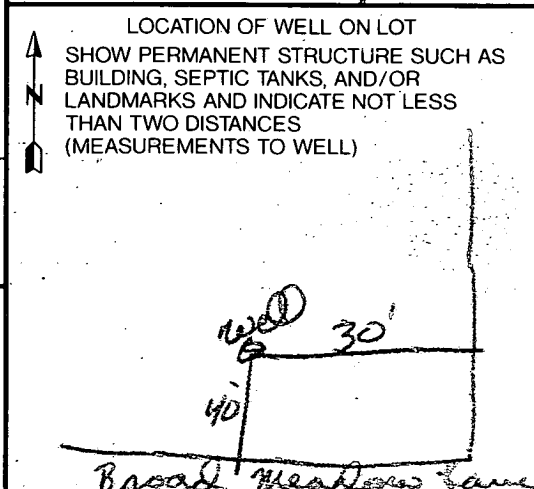
GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

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

C 3

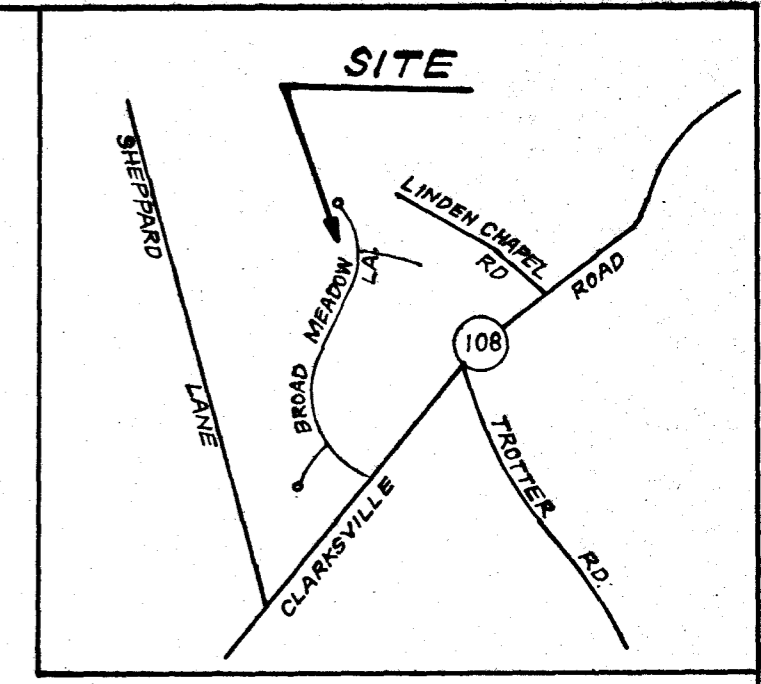
PUMPING TEST
 HOURS PUMPED (nearest hour) **3**
 PUMPING RATE (gal. per min. to nearest gal.) **8**
 METHOD USED TO MEASURE PUMPING RATE **Becked**
 WATER LEVEL (distance from land surface)
 BEFORE PUMPING **63**
 WHEN PUMPING **69**
 TYPE OF PUMP USED (for test)
A air **P** piston **T** turbine
C centrifugal **R** rotary **O** other (describe below)
J jet **S** submersible

PUMP INSTALLED
 DRILLER WILL INSTALL PUMP (CIRCLE) (YES or NO) 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)
A above } LAND SURFACE
B below } (nearest foot)

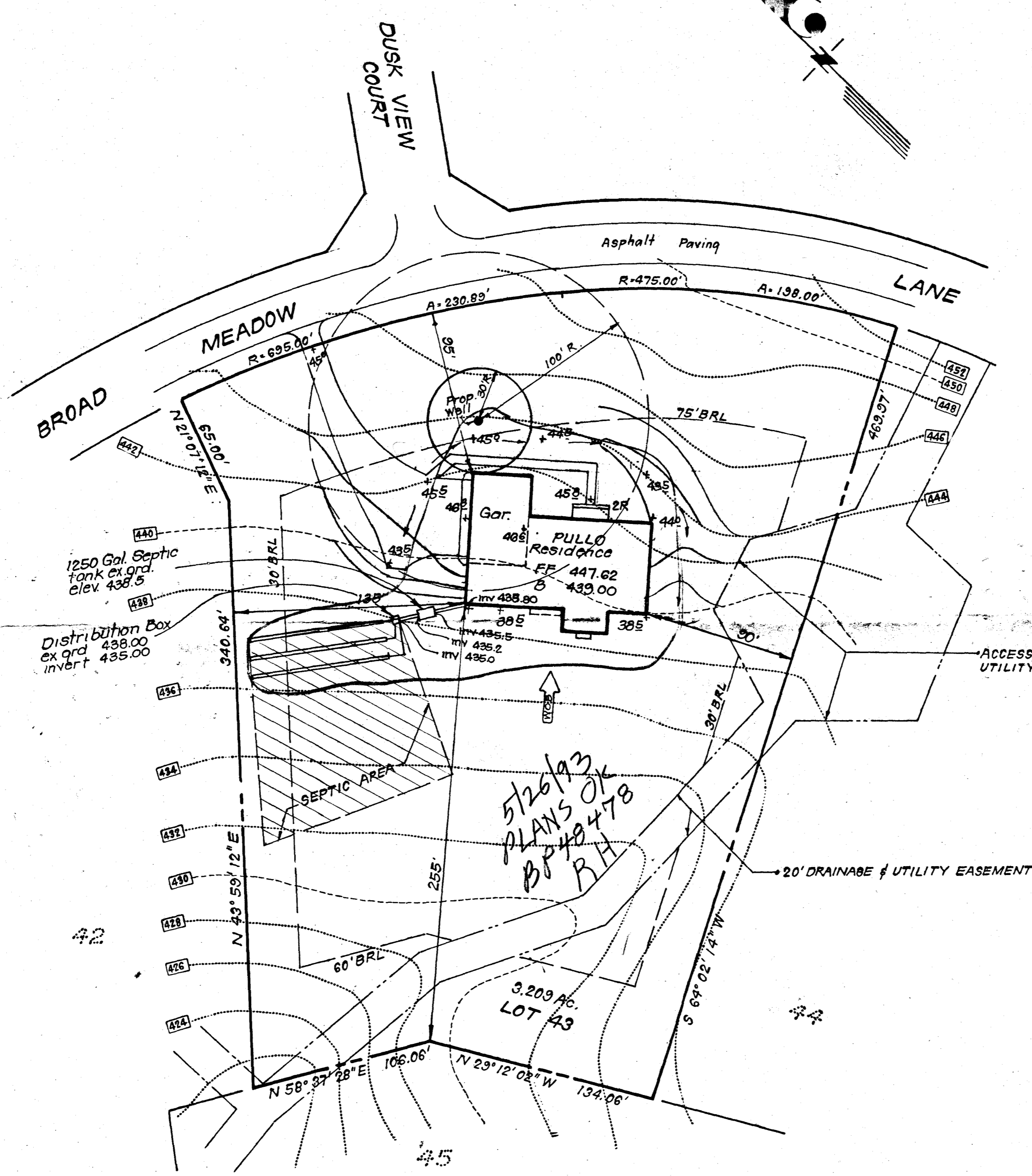


COUNTY

430
430
8-1-93



VICINITY MAP
SCALE: 1"=2000'



GENERAL NOTES

1. Reference: Plat Number 9714.
2. Subject Property is zoned: R.
3. Topography taken from plans prepared by The Riemer Group.
4. Length of trench to be determined at time of permit issuance.

1"=50'

LEGEND

- Contour Interval 2 Ft.
- Existing Contour 380
- Proposed Contour 380
- Spot Elevation + 78[±]
- Walkout Basement WOB

5/26/93
PLANS OK
BP 48478
BH

4 Bedrooms

CLARK • FINEFROCK & SACKETT, INC. ENGINEERS • PLANNERS • SURVEYORS <small>7135 MINSTREL WAY • COLUMBIA, MD. 21045 • (410) 381-7500 - BALTO. • (301) 621-8100 - WASH.</small>		
DESIGNED	SITE DEVELOPMENT PLAN LOT 43	SCALE 1"=50'
DRAWN	CLEARVIEW ESTATES SECTION TWO TAX MAPS 29 & 35 PARCELS 39 & 40 5TH ELECTION DISTRICT HOWARD COUNTY, MARYLAND	DRAWING 1 OF 1
CHECKED		JOB NO.
DATE 5-4-93	FOR: ALTIERI HOMES, INC. 7349 Gardenview Dr. Baltimore, Md. 21227	FILE NO. 93-098-X

5/27/99
Proposed pool
location OK
as shown. (KS)

