

8/14/89 AM
8/15/89 11 AM

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH DISTRICT 5th

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

P 44168
35535
A 35536

DATE 5/05/89

DATE SYSTEM APPROVED 87589

INSPECTOR SAL

INDEXED

05-399467

Alan Whitworth

IS PERMITTED TO INSTALL X ALTER

ADDRESS 12680 Clarksville Pike, Clarksville, Maryland PHONE 854-2513

SUBDIVISION Buckskin Wood ROAD 4229 Buckskin Wood Drive LOT 12
4242 Buckskin Lake Dr

PROPERTY OWNER Paul Bylis Buckskin Wood Drive

ADDRESS _____

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES X NO _____

SEPTIC TANK CAPACITY 2000 GALLONS NUMBER OF BEDROOMS 4

Addition - Swimming Pool
BLDG. PERMIT SIGNED
AND RETURNED 11-9-95
Serial # 62513

TRENCHES - 220 sq. ft. per bedroom with garbage disposal. Trench to be 3 feet wide Inlet 3.5 feet below original grade. Bottom maximum depth 5 feet below original grade. Effective area begins at 4.0 feet below original grade. 1.5 feet of stone below distribution pipe.

LOCATION - Place the distribution box 110 feet from the back (374.25') lot line and 185 feet from the right (405') lot line as seen when facing the lot from Buckskin Lake Drive. Run trenches on contour toward the left front lot line.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. *AK/CW*

PLANS APPROVED BY Sid Abel *Addition*
BLDG. PERMIT SIGNED
AND RETURNED 6-5-96 DATE 2/11/86
Serial # B00100443

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

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 TRENCHES ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCHES)

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH. BLDG. PERMIT SIGNED
AND RETURNED 9/3/91
Serial # 39507 *Pouch/Heck*

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 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 PVC 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 APROVAL ON THIS PERMIT**

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

35535

SUBDIVISION: BUCKSKIN WOOD

LOT NUMBER: 12

DRY WELL OR DRY WELL AND TRENCH

	Septic Tank	sq. ft./bedroom	Minimum Total square Feet
3 bedroom	1000 gallon		_____
4 bedroom	1250 gallon		_____
5 bedroom	1500 gallon		_____

Inlet _____ feet below original grade.
 Bottom maximum depth _____ feet below original grade.
 Effective area begins at _____ feet below original grade.

NOTE: If trench is used to make up absorbent area, run the trench on level ground and leave a 5 foot earth buffer between dry well and trench. No trench is to exceed 100 feet in length. Trench inlet to be same as dry well, with _____ feet of stone below distribution pipe.

TRENCHES

180 sq. ft./bedroom
220 sq. ft./bedroom with
46MBP J.D.

Trench to be 3 wide.
 Inlet 3.5 feet below original grade.
 Bottom maximum depth 5 feet below original grade.
 Effective area begins at 4.0 feet below original grade.
1.5 feet of stone below distribution pipe.

- NOTE:
- (1) No trench to exceed 100 feet in length.
 - (2) If more than one trench used, a distribution box is required.
 - (3) Trenches to be installed on level ground.
 - (4) Call for inspection of trench before gravel is installed.
 - (5) Provide 6"-8" diameter cleanout and cap to grade or above on septic tank and drywell.
 - (6) If a Garbage disposal is used, increase septic tank capacity by 50% and increase absorbant sidewall area by 22%.

LOCATION: PLACE THE DISTRIBUTION BOX 110 FT FROM THE BACK (374.25') LOT LINE AND 185 FT FROM THE RIGHT (405') LOT LINE AS SEEN WHEN FACING THE LOT FROM BUCKSKIN LAKE DR. RUN TRENCHES ON CONTOUR TOWARD THE LEFT FRONT LOT LINE. 2-11-86 S. Abel

APPLICATION

SEWAGE DISPOSAL TESTING

A 35535

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT 5

DATE MAY 6 1985

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.

Paul Bylis

PROPERTY OWNER DALE Z. MAISEL c/o HOWARD COUNTY LAND SERVICES 890-1512

ADDRESS 10176 BALTO NAT'L PIKE 21043 PHONE 465-4920

PROPERTY LOCATION: FOLLY QUARTER

SUBDIVISION BUCKSKIN WOODS LOT NO. NEW LOT 12

ROAD AND DESCRIPTION FOLLY QUARTER RD 1/4 MILE WEST OF GLENBEG COUNTRY SCHOOL 4242 BUCKSKIN LAKE DR.

SIZE OF LOT 3 ACRES TYPE BLDG. 4
(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.

DALE Z. MAISEL
(SIGNATURE OF APPLICANT)

APPROVED BY Sichny Abel FOR Shallow Trenches DATE 2-11-86

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 6-4-85 Perc. Satisfactory; hold for review WATER ONE hole; hold for certified subdivisions PERC. Sabel 1-3-86 OK for shallow system

CHRG. PERMIT SIGNED
AND RETURNED 3-6-89
BP 23888 DA

THIS IS NOT A PERMIT

SOIL PROFILE

6" A1-3
Orange Brown
CLAY LOAM
L10%
SAPROLITE

4" Brown
micaceous
Silty SAND
L10%
SAPROLITE

12.5'

6" A1-3
RED BROWN
CLAY LOAM
L10%
SAPROLITE

3" RED BROWN
Silty SAND
LOAM
L10%
SAPROLITE

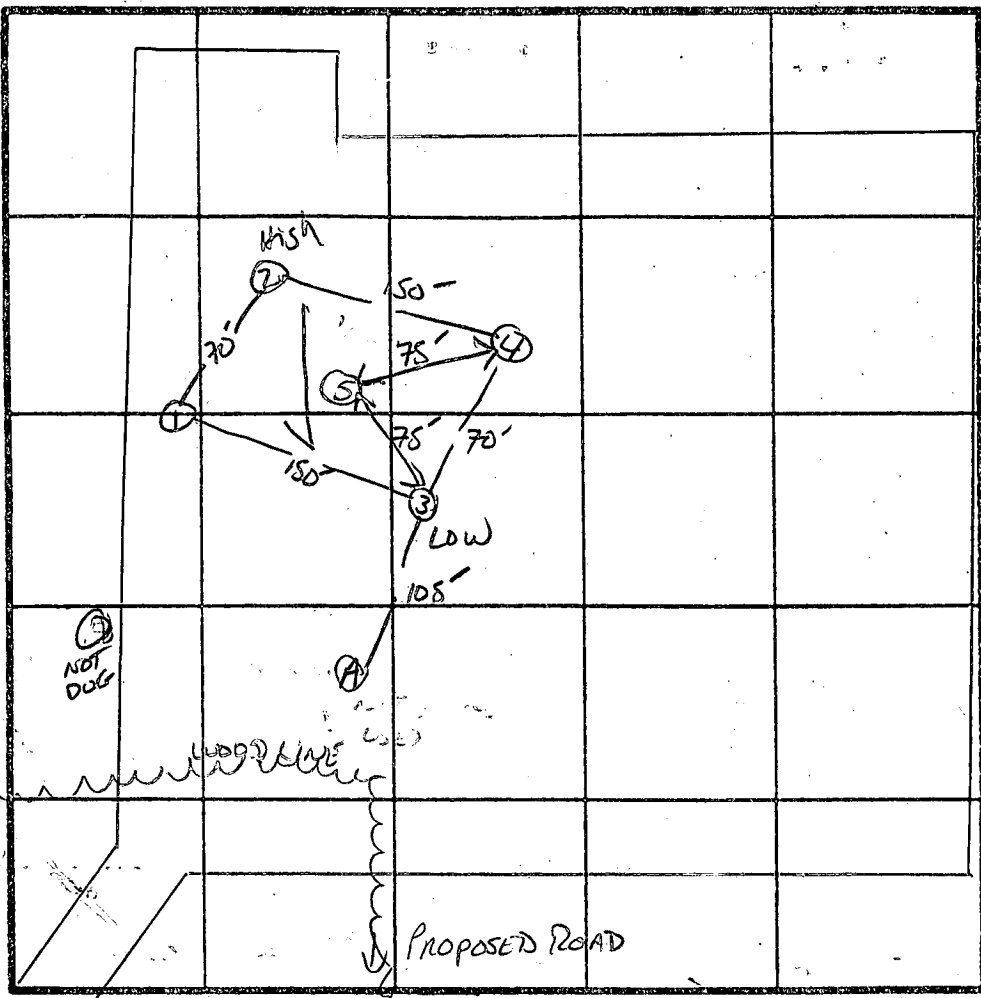
12.5'

6" A1-3
Orange Brown
CLAY LOAM
L10% SAPROLITE

5" Yellow Brown
micaceous
Silty SAND
10-20%
SAPROLITE

13'

15'



INDICATE NORTH NAME ADJOINING ROADWAY AS BASE LINE.

6" A1-3
RED BROWN CLAY
LOAM L10%
SAPROLITE

4" Yellow Brown
SAND LOAM
L10%
SAPROLITE

12'

6" A1-3
RED BROWN
CLAY LOAM
L10% SAPROLITE

2.5" Brown
micaceous
Silty SAND
L10%
SAPROLITE

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	REMARKS	
			START	STOP	START	STOP			
6/4/85	1 S	4" 12.5'	12:48	12:50	12:50	12:56	6min	X REC TIME 9 INLET 3.5 BOTTOM MAY S.D 163 #/BR	
	2 S	4" 12.5'	12:52	12:54	12:54	12:59	5min		
	3 S	5" 15'	12:57	1:00	1:00	1:06	6min		
	4 S	4" 12'	1:06	1:12	1:12	1:30	18min		
	5 S	13"							
	A		WATER AT 8' MOTILED AT 7' CLAY TO 8'						

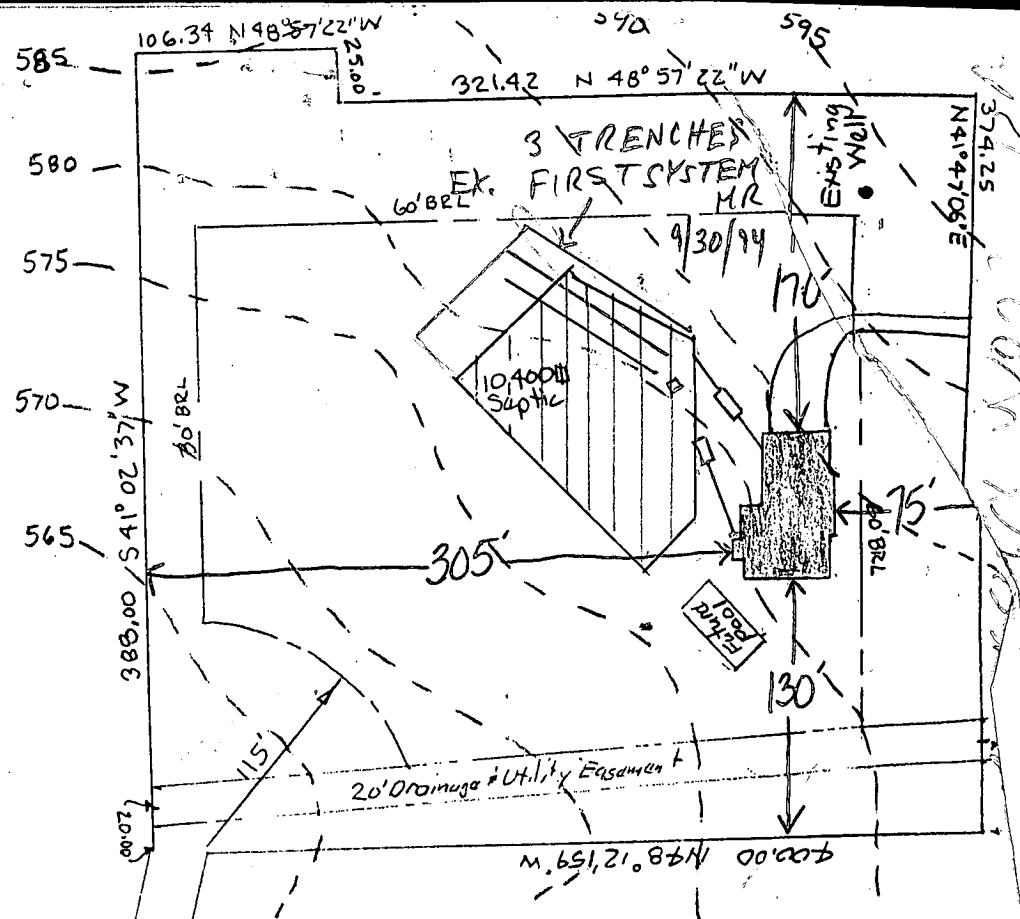
REMARKS: Rec. ALONG A FOR WATER / WET SEASON OR TEST HIGHER.
OK for Shallow System

TESTED BY: Sabel

LSO PRESENT: O-Kettner

E11 12' 1079

BYLIS RESIDENCE
 LOT 12
 BUCKSKIN WOODS
 RCM CORPORATION
 5520 CEDAR LANE
 COLUMBIA MARYLAND
 21044
 9950133



Elev. Well	593.0 ✓
Grnd at Field	583.5 ✓
Into Field	580.0 ✓
Out of Tank	580.4 ✓
Into Tank	580.6 ✓
Out of Hse	581.0 ✓ - BSMT
Basement	578.0 ✓
1st Floor	587.0 ✓

BLDG. PERMIT SIGNED
 AND RETURNED 3-6-89
 BP 23888
 JAL

25.05 BUCKSKIN LANE
 R=600.00 DRIVE

B 7 **2196** SEQUENCE NO. (OEP 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

OEP PERMIT NUMBER
40-81-1898
fill in this form completely

Date Received

8 [] [] [] [] [] [] [] [] 13

OWNER INFORMATION

RAWSON JAMES
15 Last Name Owner First Name 34

3421 BLACKBERRY LA
36 Street or RFD 55

ELLICOTT CITY MD 21043
57 Town 70 State 72 Zip 76

DRILLER INFORMATION

Ralph MAYNE 273
77 License No. 80

Ralph Mayne (well drilling)
Firm Name

9120 Brown Church Rd Mt Airy
Address

Ralph Mayne 1/26/87
Signature Date

B 3

LOCATION OF WELL

HOWARD
8 COUNTY 21

BUCKSKIN LAKE
23 SUBDIVISION 42

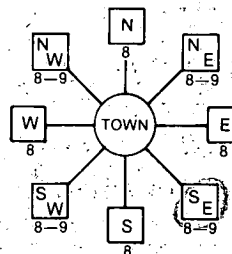
SECTION **44-46** LOT **12**
44 46 48 50

ELLENDALE
52 NEAREST TOWN 71

MILES FROM TOWN (enter 0 if in town) **1** M I
73 76 77 78

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Buckskin Rd
11 NEAR WHAT ROAD 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



900
34 DISTANCE FROM ROAD 37

ENTER FT. or MI **FT**
38 39

B 2

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) **5**
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 **A35535**
COUNTY NAME COUNTY NO.

OEP SIGNATURE STATE HEALTH INSERT S

DATE ISSUED **02/1/87** **B Nifon** **08/1/87**
43 48 CO SIGNATURE EXP. DATE

NORTH GRID **516000** EAST GRID **0817000**
50 55 57 63

APPROXIMATE DEPTH OF WELL **150** FEET
24 28

APPROXIMATE DIAMETER OF WELL **6"** NEAREST INCH

METHOD OF DRILLING (circle one)

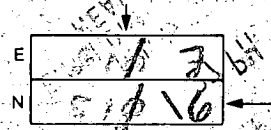
- BORED (or Augered)
- JETTED
- Jetted & DRIVEN
- AIR-ROTARY
- AIR-PERCussion
- ROTARY (Hydraulic Rotary)
- CABLE
- REVerse-ROTary
- DRive-POINT
- other _____

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

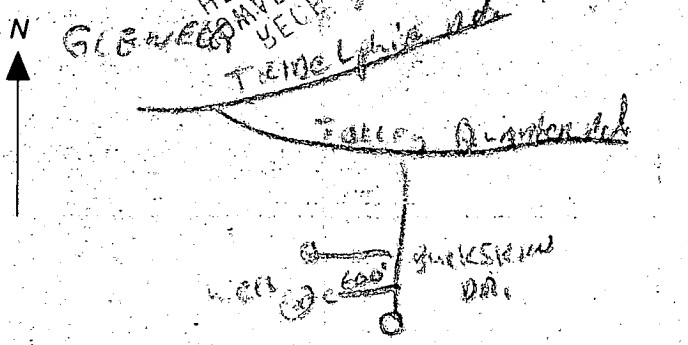
SOURCES OF DRILLING WATER

1. 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



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 DEEPEN AN EXISTING WELL
- PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) [] [] [] [] [] [] [] [] 52

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

APPROP. PERMIT NUMBER [] [] [] [] [] [] [] [] **GAP** [] [] [] [] [] [] 63

FORCE **12** WRITE INITIALS IN BOX PERMIT No. **40-81-1898**
67 68 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS **788-5097 (CONTRACT)**

C1 3843

SEQUENCE NO. (OEP USE ONLY)

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 35535

DATE RECEIVED

DATE WELL COMPLETED 02/17/87

DEPTH OF WELL 300 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-81-1818

OWNER LAWSON JAMES STREET OR RFD BUCKSKIN LAKE DRIVE TOWN GLENDELG SUBDIVISION BUCKSKIN LAKES SECTION LOT 12

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. Rows include Top Soil, Sandy, Sand Stone, Micka, Sand Stone, Micka.

GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) YES Y NO N

TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE CLAY BC NO. OF BAGS NO. OF POUNDS GALLONS OF WATER DEPTH OF GROUT SEAL (to nearest foot)

CASING RECORD casing types insert appropriate code below MAIN CASING Nominal diameter Total depth top (main) casing of main casing TYPE (nearest inch) (nearest foot)

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

SCREEN RECORD screen type or open hole insert appropriate code below STEEL BRASS BRONZE PLASTIC OPEN HOLE OTHER

DEPTH (nearest ft.) HO 75 300

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

CIRCLE APPROPRIATE LETTER 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 10.17.13 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT.

DRILLERS IDENT. NO. 273

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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.) WQ

TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3

PUMPING TEST HOURS PUMPED (nearest hour) 6 PUMPING RATE (gal. per min. to nearest gal.) METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING WHEN PUMPING 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) PUMP HORSE POWER PUMP COLUMN LENGTH (nearest ft.) CASING HEIGHT (circle appropriate box and enter casing height) LAND SURFACE (nearest foot)

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) Road 1900 well 650

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-1898
 Location of property (road) LAKE BUCKSKIN LAKE DR.
 Subdivision BUCKSKIN LAKES Lot 12 Block Plat Sec.
 Well Driller RALPH MAYNE Owner LAWSON, JAMES

Depth of well 300ft
 Distance of measuring point (M.P.) above ground 2ft
 Static water level (S.W.L.) below M.P. 27. ft

I. High rate pumping -- reservoir drawdown

Time pump started 8:00 Pumping rate 10 G.P.M
 Total time 1.1 hr to reach pumping water level 205 ft below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes

TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE time to fill I gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
9:00	205 ft	20 sec	60	3 G.P.M
9:15	205	20	$\frac{3}{100}$	3
9:30	205	20	$\frac{2}{360}$	3
9:45	205 ft	20 sec	277	3 G.P.M
10:00	205	20	(637 gals)	3
10:15	205	20	205	3
10:30	205 ft	20 sec	$\frac{27}{178}$	3 G.P.M
10:45	205	20	15	3
10:00	205	20	990	3
11:15	205 ft	20 sec	$\frac{178}{2770}$	3 G.P.M
11:30	205	20		3
11:45	205	20		3
12:00	205	20		3 G.P.M
12:15	205 ft	20 sec		3
12:30	205	20		3
12:45	205	20		3 G.P.M
1:00	205 ft	20 sec		3
1:15	205	20		3
1:30	205	20		3 G.P.M
1:45	205 ft	20 sec		3
2:00	205	20		3
2:15	205	20		3 G.P.M
2:30	205 ft	20 sec		3
2:45	205	20		3
3:00	205 ft	20 sec		3 G.P.M

487 PL 440 Per 012 Ings

10/10/89 1716 R2

10/10/89 2 P.C.O. Partial
See below P.M.
C.B.S.

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 _____
Name of Installer CROUSE P & H Telephone 531-3311
License Number 4450
Certified Well Pump Installer _____ Well Driller _____ Registered Plumber
Name of Property Owner MR. BYLIS Telephone 890-1512
Subdivision BUCKSKIN WOODS Lot # 12 Well Tag # 110-81-1898
Site Address 4242 BUCKSKIN LAKE E.C. MD.
✓ on sign 10/10

10/10 on = well

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
2. Make Goulds a. 110 _____
3. Model # _____ b. 220 _____
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 100gal. 1. Type Plastic 1. Depth _____ ft.
2. Pressure relief valve? yes 2. Size 1" 2. Yield _____ GPM
3. NSF and/or BOCA Code approved _____ 3. Static water level _____ ft.
4. Depth of supply line 42" 4. 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).

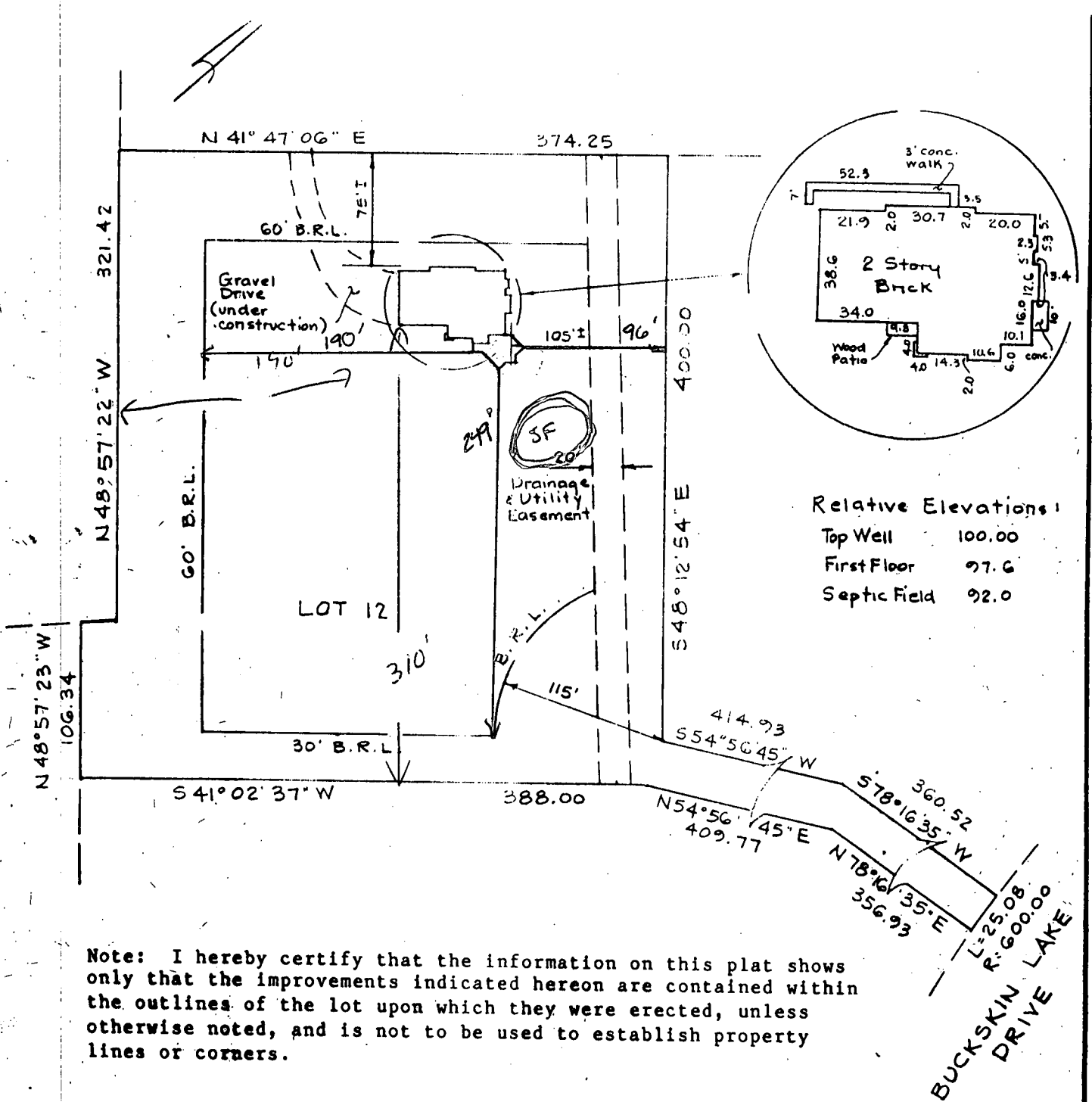
All information given above is true to the best of my knowledge.

Signature of Applicant: Robert Hofstetter
Date: 7/19/89

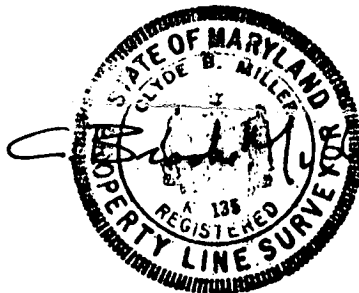
Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.

HD-215

10/10/89 P.M. (1) Trench dug only at 12:45 P.M.
Notes: Water well line and pitless adapter
(2) (2:30 to 3:00) is ok only C.B.S.



Note: I hereby certify that the information on this plat shows only that the improvements indicated hereon are contained within the outlines of the lot upon which they were erected, unless otherwise noted, and is not to be used to establish property lines or corners.



9/3/91
PLANS OK
RH

Update 12-14-89

Final Survey
LOT 12 - BUCKSKIN WOODS
Plat Ref. # 6696

RBA ENGINEERS • ARCHITECTS • PLANNERS

5th ELECTION DISTRICT Howard COUNTY, MD.
SCALE: 1" = 100' DATE: April 25, 1992

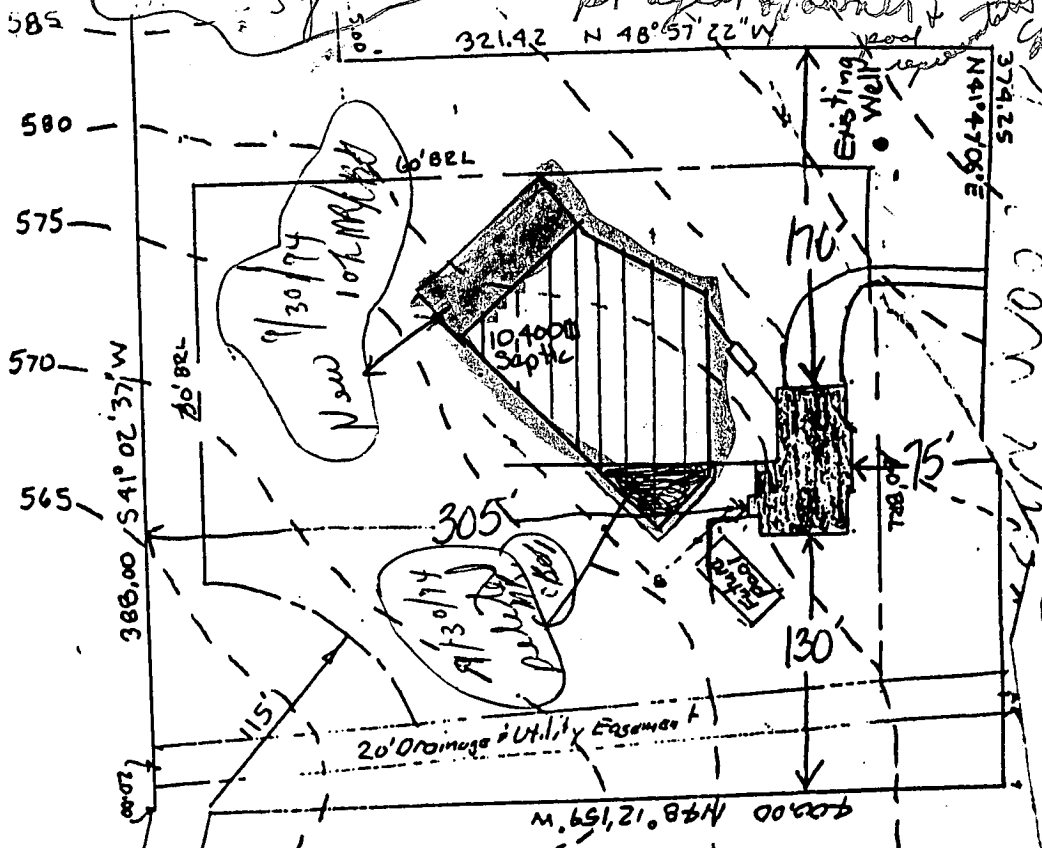
6800 STERRETT PLACE
COLUMBIA, MARYLAND 21044
(301)780-7860 / 681-8060

EB. 84
5/10/89

Mr. Ralph Watson
Sylvan Pools

second
Hold for revised
area of 10,000 sqft.
per agent of owner

BYLIS RESIDENCE
LOT 12
BUCKSKIN WOODS
RCM CORPORATION
5520 CEDAR LANE
COLUMBIA MARYLAND
21044
9950133



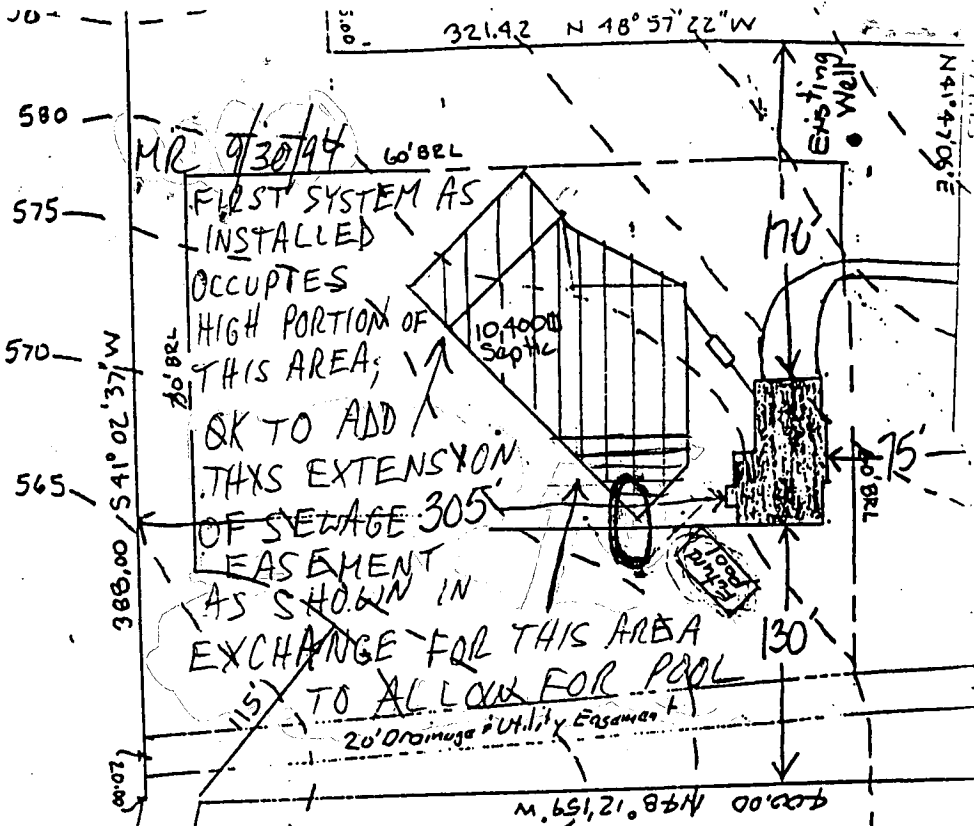
Elev. Well	593.0 ✓
Grnd at Field	583.5 ✓
Into Field	580.0 ✓
Out of Tank	580.4 ✓
Into Tank	580.6 ✓
Out of Hse	581.0 ✓
Basement	578.0 ✓
1st Floor	587.0 ✓

EX. 583.5
- BSMT

5780.16' 35"W
356.93
360.52
25.09

BLDG. PERMIT SIGNED
AND RETURNED 3-6-89
BP 23888
EAL

BYLIS RESIDENCE
 LOT 12
 BUCKSKIN WOODS
 RCM CORPORATION
 5520 CEDAR LANE
 COLUMBIA MARYLAND
 21044
 9950133



Elev. Well	593.0 ✓
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Into Tank	580.6 ✓
Out of Hse	581.0 ✓ - BSMT
Basement	578.0 ✓
1st Floor	587.0 ✓

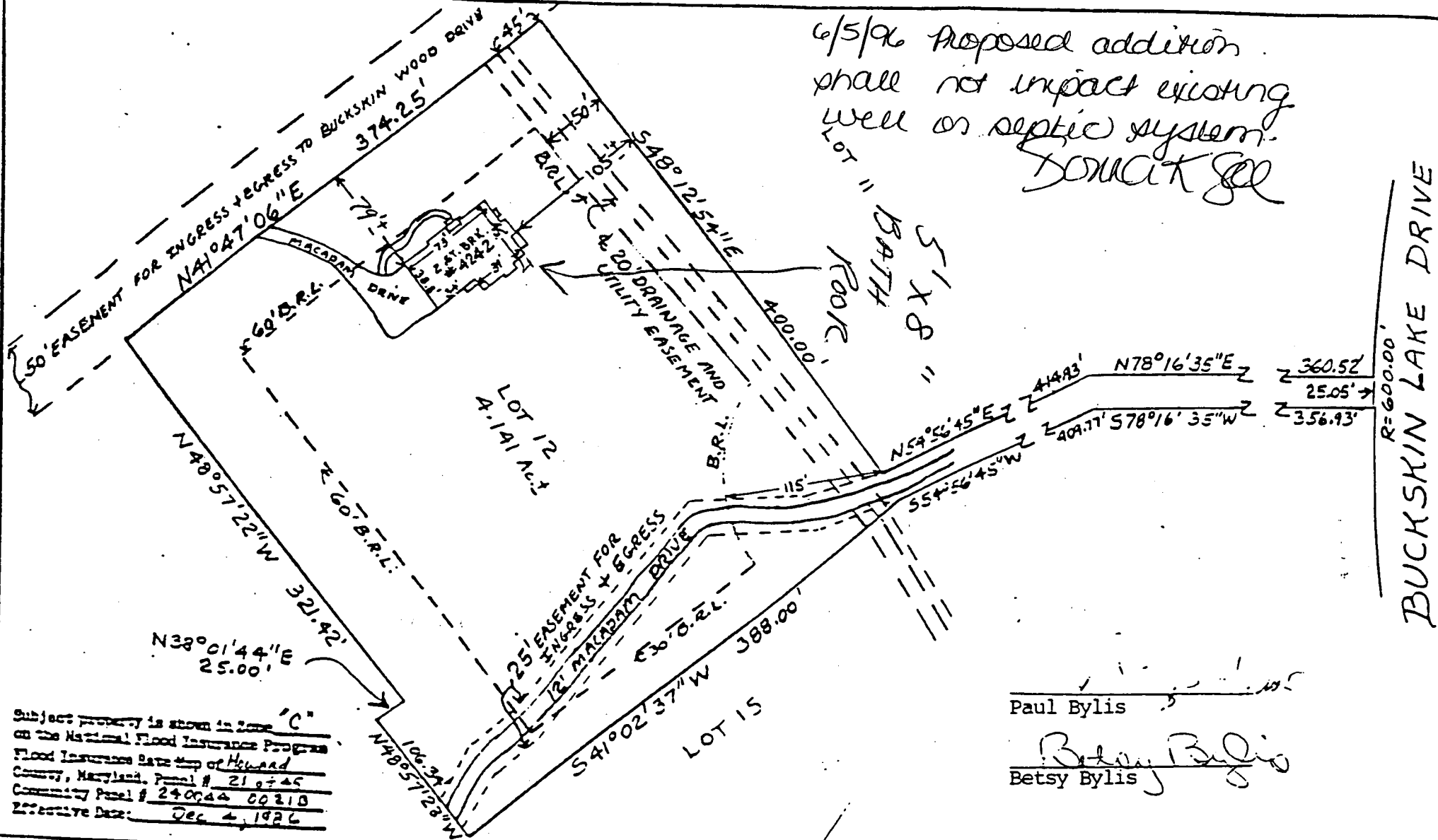
EX. 583.5

S 59° 56' 14" W 409.77
 N 4° 14' 13" E 414.93

578° 16' 35" W 355.193
 S 36° 05' 2" E 250.92

BLDG. PERMIT SIGNED
 AND RETURNED 3-6-89
 BP 23888
 SAJ

6/5/96 Proposed addition
 shall not impact existing
 well or septic system.
 DONALD JEE



Subject property is shown in Zone "C"
 on the National Flood Insurance Program
 Flood Insurance Rate Map of Howard
 County, Maryland. Panel # 210745
 Community Panel # 240044 00210
 Effective Date: Dec 4, 1986

Paul Bylis
 Betsy Bylis

This is to certify that I have surveyed the property
 known as Lot 12, on a plat entitled:
 "BUCKSKIN WOODS, Section 1"
 sheet 5 of 7 recorded in Plat # 6696 among the
 Land Records of Howard County, Maryland for the
 purpose of locating the improvements thereon.



LOCATION SURVEY
 4242 Buckskin Wood Drive
 Howard County, Md.

THIS PLAT SHOWS ONLY THAT THE IMPROVEMENTS ARE
 CONTAINED WITHIN THE OUTLINES OF THE LOT AND IS
 NOT TO BE USED TO ESTABLISH PROPERTY BOUNDARIES

NTS ASSOCIATES, INC.
 16205 Old Frederick Road
 Mt. Airy, Maryland 21771

Scale	1" = 100'
Date	9-24-91
Field By	JCH