

4-28-85
Approved
S. Hunt

PERMIT

P 316810
A 35983

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
~~3330XX~~
461-9933

INDEXED
01-163981

ELLICOTT CITY
DISTRICT 1st
DATE 4/15/86

Arnold Septic Tank Service IS PERMITTED TO INSTALL ALTER

ADDRESS jacobs Road, Mt. Airy, MD 21771 PHONE 795-7873

SUBDIVISION Kenn Wessel Property ROAD 6860 Norris Lane LOT Map 31, Parcel 145

PROPERTY OWNER Kenneth W. Wessel ELKRIDGE 21705

ADDRESS _____

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

GARBAGE GRINDER? YES NO

SEPTIC TANK CAPACITY 1000 GALLONS NUMBER OF BEDROOMS 3

TRENCHES - 180 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 7 feet below original grade. Effective area begins at 3 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Place distribution box 200 feet from the front lot line and 180 feet from the left lot line as seen when facing the property from Norris Lane. Run trenches along level ground toward either side lot line.

NOTE - No trench to exceed 100 feet in length. If more than one trench used, a distribution box is required. Call for inspection of trench(s) before and after gravel is installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK

**BUILDING PERMIT SIGNED
AND RETURNED**

57504 B00147481-DECK
62404 B00147481

PLANS APPROVED BY C. Williams DATE 8/18/85

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: IF TRENCH IS USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH.

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 40 PVC OR ABS.

PERMIT VOID AFTER THREE 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.

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

~~CALL 992-2930~~ FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

A 35983

C1 06496

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

DATE RECEIVED

DATE WELL COMPLETED

DEPTH OF WELL

PERMIT NO. FROM "PERMIT TO DRILL WELL"

DATE RECEIVED grid

DATE WELL COMPLETED grid: 09 26 85

DEPTH OF WELL grid: 400

PERMIT NO. grid: 40-81-1174

OWNER: Wessol Kenneth Morris Lane

STREET OR RFD: Morris Lane TOWN: SECTION: LOT:

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, FEET FROM, FEET TO, Check if water bearing. Rows include Top Soil, Shale, Sand Stone, Mica brown shale, Mica Flint, Mica Flint, Mica.

GROUTING RECORD WELL HAS BEEN GROUTED (Y) NO (N) TYPE OF GROUTING MATERIAL CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 8 NO. OF POUNDS 800

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) (ST) 6 28

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 BRONZE PLASTIC OPEN HOLE OTHER

DEPTH (nearest ft.) grid: H 0 26 400

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

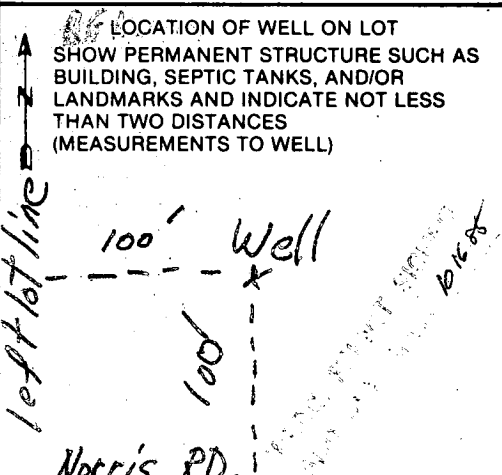
PUMPING TEST HOURS PUMPED (nearest hour) 6 PUMPING RATE (gal. per min. to nearest gal.) METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 68 WHEN PUMPING 93 TYPE OF PUMP USED (for test) S submersible

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)

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, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS IDENT. NO. 41 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)



8:00

Review OK 11/15/85 Chullin

Page 1 of 1
Date 9/26/85

FIELD DATA SHEET
MONTGOMERY COUNTY WELL YIELD TEST

Well Permit No. BA-40-81-1174 Election District _____
Location of property (road) Down Lane
Subdivision _____ Lot _____ Block _____ Plat _____ Sec. _____
Well Driller Costaday Owner Kenneth Miesel

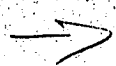
Depth of well 400 16 PM
Distance of measuring point (M.P.) above ground 12"
Static water level (S.W.L.) below M.P. 68'

I. High rate pumping -- reservoir drawdown

Time pump started 9:15 Pumping rate 10 GPM
Total time 15 min to reach pumping water level 111' ft. below M.P.

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

TIME	WATER LEVEL below M.P.	PUMPING RATE time to fill gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
9:45	111'	55 sec	<u>gpm</u>	1 1/4 GPM
10:00	108'	55 sec		1 1/4 GPM
10:15	105'	55 sec		1 1/4 GPM
10:30	101'	55 sec		1 1/4 GPM
10:45	97'	60 sec		1 GPM
11:00	95'	60 sec		1 GPM
11:15	95'	60 sec		1 GPM
11:30	95'	60 sec		1 GPM
11:45	95'	60 sec		1 GPM
12:00	94'	60 sec		1 GPM
12:15	94'	60 sec		1 GPM
12:30	93'	60 sec		1 GPM
12:45	93'	60 sec		1 GPM
1:00	93'	60 sec		1 GPM
1:15	93'	60 sec		1 GPM
1:30	93'	60 sec		1 GPM



RECEIVED
HOWARD COUNTY
HEALTH DEPT
ELICOTT CITY, MD.

OCT 7 12 01 PM '85

Time	Water Level Below M.P.	Pumping Rate	Calculated Flow
1:45	93'	60 SEC	1 GPM
2:00	93'	60 SEC	1 GPM
2:15	93'	60 SEC	1 GPM
2:30	93'	60 SEC	1 GPM
2:45	93'	60 SEC	1 GPM
3:00	93'	60 SEC	1 GPM
3:15	93'	60 SEC	1 GPM
3:30	93'	60 SEC	1 GPM

B 1 **7160** 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
HO-81-1174
 fill in this form completely

Date Received *9/24/85 10:00 AM*
OWNER INFORMATION
 Last Name: **Wessell** Owner: **Kenneth** First Name: **H**
 Street or RFD: **5321 Kercker Rd**
 Town: **ELK RIDGE CITY** State: **MD** Zip: **211043**

B 3 **LOCATION OF WELL**
 County: **Howard**
 Subdivision: **MAP 31 PARCELS 195**
 SECTION: **44** LOT: **48**
 NEAREST TOWN: **ELK RIDGE**
 MILES FROM TOWN: **3** MI

DRILLER INFORMATION
 Driller's Name: **L. Daniel Easterday** License No. **411**
 Firm Name: **L. Franklin Easterday Inc.**
 Address: **2265 Brown Church Rd. Mt. Airy, MD 21771**
 Signature: *L. Daniel Easterday* Date: **9/9/85**

B 4 **DIRECTION OF WELL FROM TOWN (CIRCLE BOX)**
 (Map showing directions N, NE, E, SE, S, SW, W, NW)
NEAR WHAT ROAD: **Norris Rd.**
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 (Map showing directions N, NE, E, SE, S, SW, W, NW)
DISTANCE FROM ROAD: **100** FT
 ENTER FT or MI **FT**

B 2 **WELL INFORMATION**
 APPROX. PUMPING RATE (GAL. PER MIN.): **5**
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY): **500**

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
 County Name: **Howard** County No. **A35763**
 OEP SIGNATURE: _____ STATE HEALTH INSERT S
 DATE ISSUED: **09/17/85** CO SIGNATURE: *Co. William* EXP. DATE: **3/17/86**
 NORTH GRID: **510000** EAST GRID: **087000**

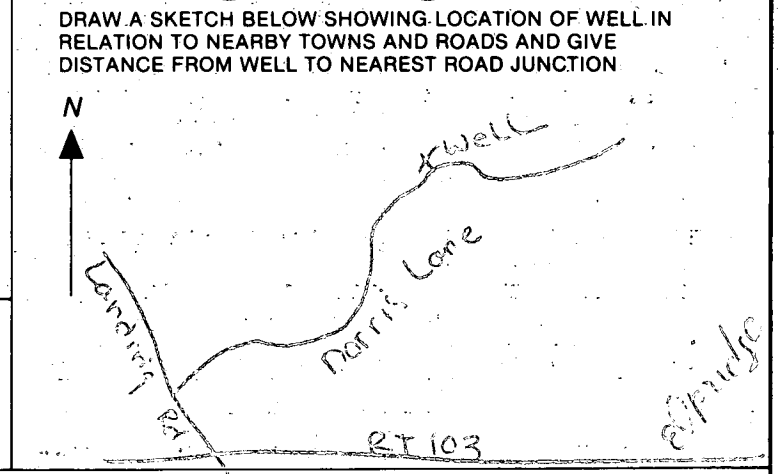
APPROXIMATE DEPTH OF WELL: **200** FEET

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**
 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
 (Map showing box numbers 870 and 510, with a circled 870 and a circled 510 labeled 'WELL')

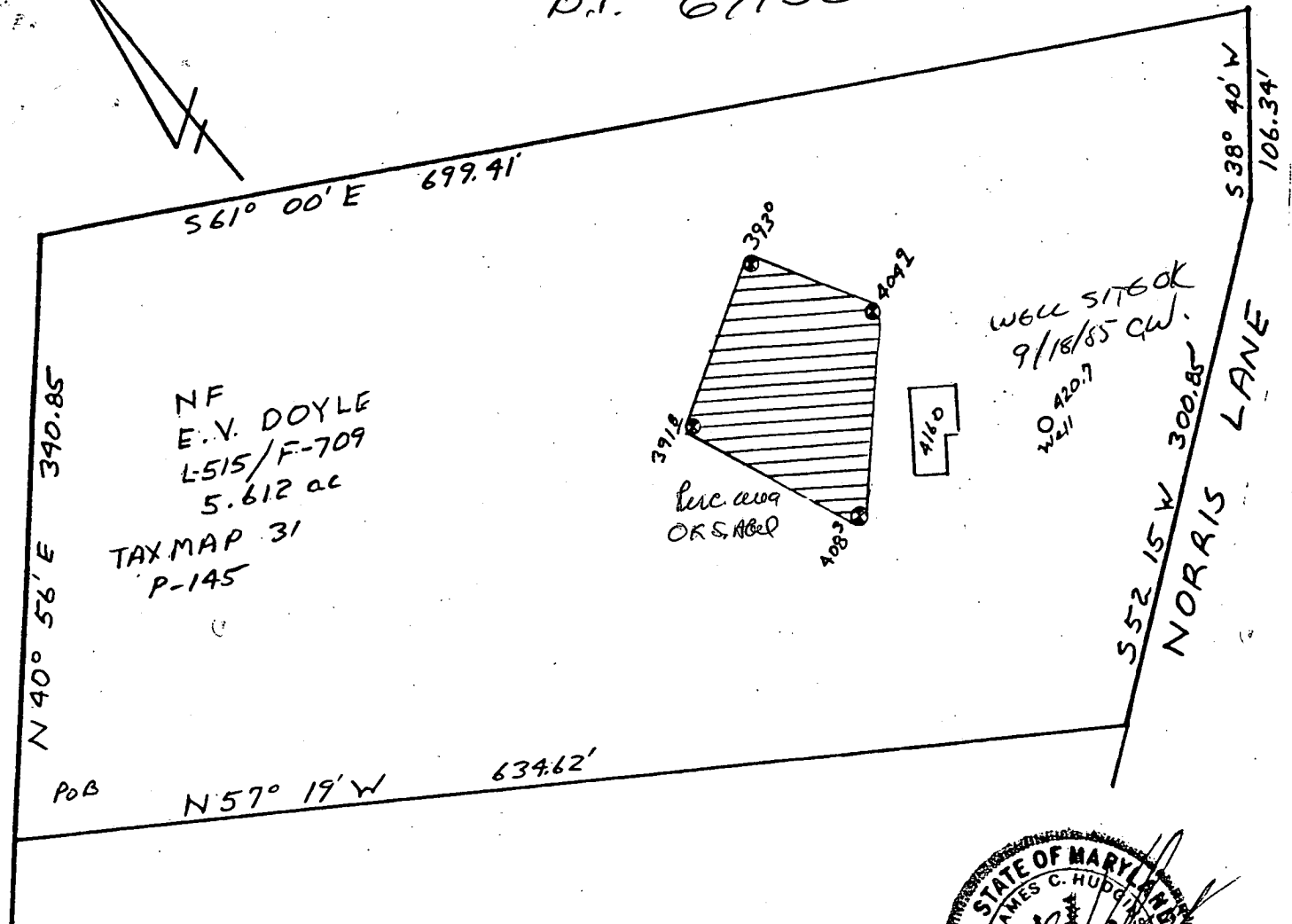
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)
 N THIS WELL WILL NOT REPLACE AN EXISTING WELL.
 Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
 S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
 D THIS WELL WILL DEEPEM AN EXISTING WELL
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE): _____



Not to be filled in by driller (OEP USE ONLY)
 APPROP. PERMIT NUMBER: _____ GAP _____
 FORCE: **CG** WRITE INITIALS IN BOX PERMIT No. **HO-81-1174**

SPECIAL CONDITIONS

B.P.# 67158




NF
 E.V. DOYLE
 L-515/F-709
 5.612 ac
 TAX MAP 31
 P-145

WELL SITE OK
 9/18/85 CW
 420.7

4140

552.15 W 300.85
 NORRIS LANE



 This area designates a private sewage easement of 10,000 square feet as required by the Maryland State Department of Health and Mental Hygiene for individual sewage disposal. Improvements of any nature in this area are restricted until public sewage is available. These easements shall become null and void upon connection to a public sewage system. The County Health Officer shall have the authority to grant variances for encroachments into the private sewage easement. Recordation of a modified sewage easement shall not be necessary.

Percolation test holes shown hereon have been field located and shown as "⊕".

The lots shown hereon comply with the minimum ownership width and lot areas as required by the Maryland State Department of Health and Mental Hygiene.

Percolation areas and water wells for adjoining lots have been shown where pertinent.

APPROVED: For Private Water and Private Sewage Systems

SENT FOR SIGNATURE 9/18/85 CW
 County Health Officer _____ Date _____

PERCOLATION TEST PLAT
 PROPERTY OF
 KENNETH WESSEL & WIFE
 TAX MAP 31 PARCEL 145

1st Election District
 Howard County, Maryland
 Scale 1"=100'
 Date 8/9/85

NTT Associates
 101 Sterrett Place
 Columbia, MD 21044
 442-7031

Permit
6-26-85
3pm

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 35983

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

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

DISTRICT 1st

DATE 9/19/85

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 Kenneth W. Wessel 465-9640
ADDRESS 5321 Kerger Rd. E.C. 21043 PHONE ~~788-7123~~

PROPERTY LOCATION:
SUBDIVISION _____ LOT NO. _____
6860
ROAD AND DESCRIPTION Morris Lane

SIZE OF LOT 5.6 Acres TYPE BLDG. 3 or 4 Bedrooms
(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.

(SIGNATURE OF APPLICANT)
APPROVED BY C. W. Wessel FOR TRENCHES DATE 9/18/85 CW

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

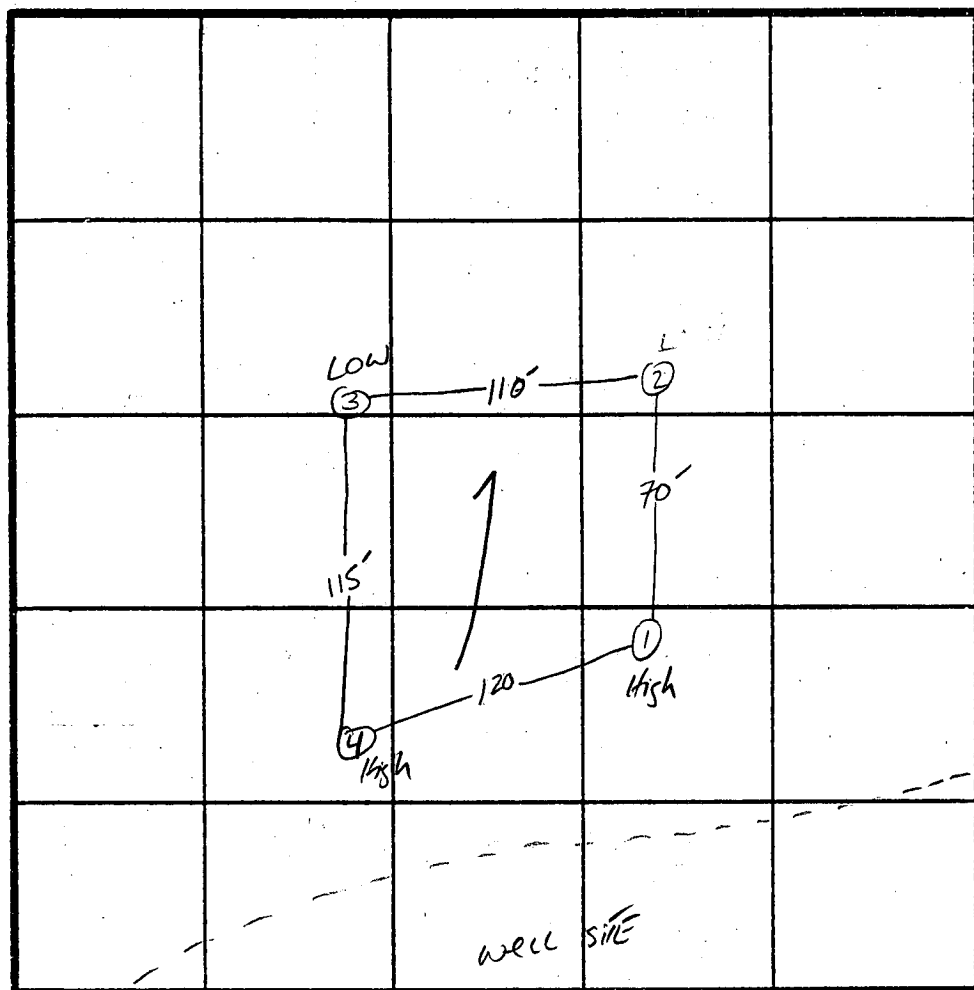
REASONS FOR REJECTION OR HOLDING 6-26-85 Perc. Results Satisfactory - hold for certified hole locations, house and well s. r. i. 5' deep R.P.# 67158

BLDG PERMIT SIGNED
AND RETURNED 10-6-85

THIS IS NOT A PERMIT

① ② ③ ④
SOIL PROFILE

0'	AP
9'	Yellow Br. CLAY LOAM <10% SAPROLITE
2'	Yellow Br. SAND LOAM <10% SAPROLITE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

LOW

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
6/26/85	1 ✓	2' 11' see profile	3:31	3:33	3:33	3:37	4min
	2 ✓	3' 11' see profile	3:33	3:40	3:40	3:52	12min
	3 ✓	3' 13' see profile	3:39	3:49	3:49	4:11	22min
	4 ✓	3' 11' see profile	3:50	3:52	3:52	3:56	4min

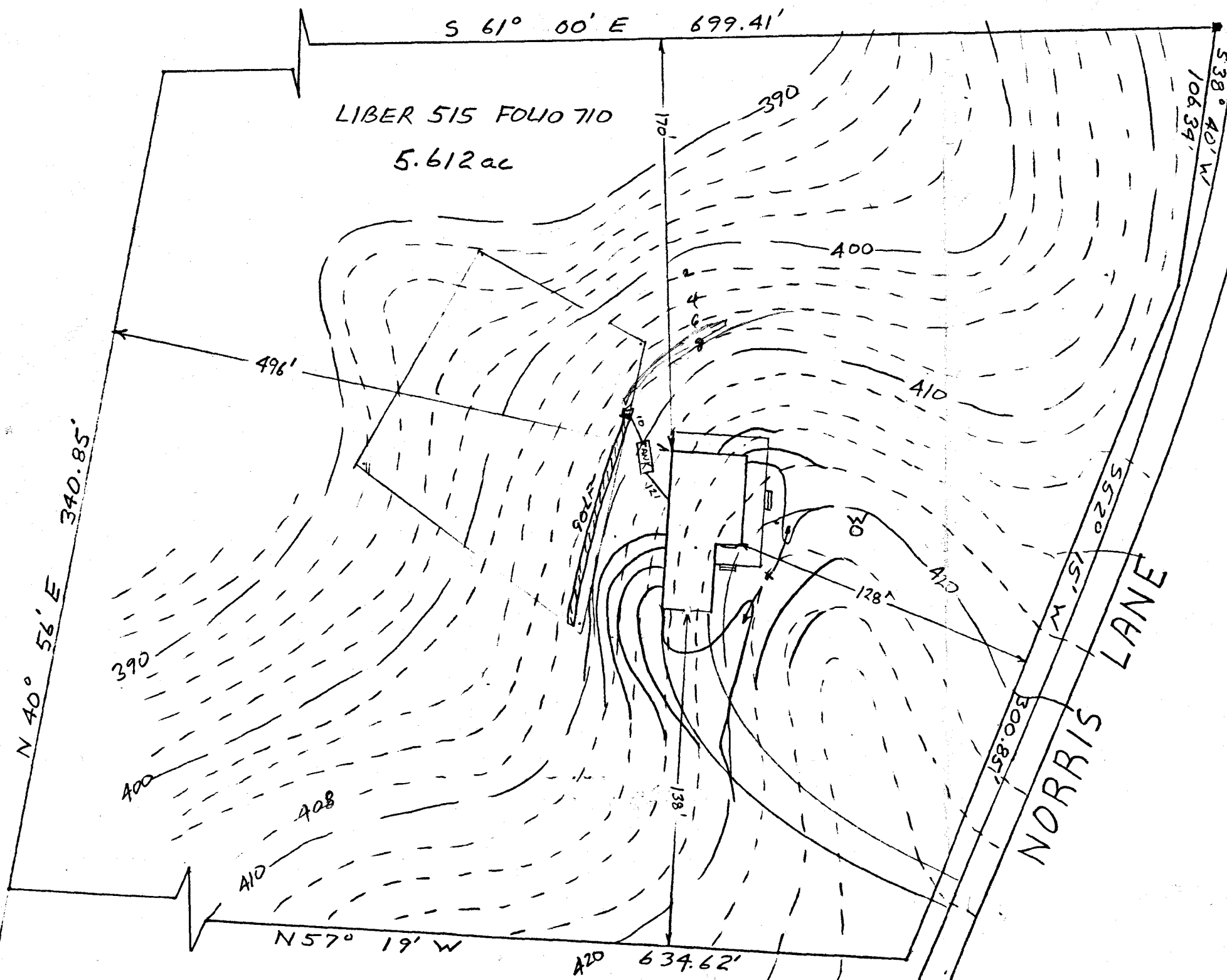
REMARKS Unable to locate lot lines

TYPE OF SOIL _____

TESTED BY SABU

Kettigman, Wassele

ALSO PRESENT _____



HOUSE:			
FIRST FLOOR	422.5		
BASEMENT	413.5		
INVERT	408.00		
SEPTIC TANK:			
EXISTING GRADE	411.0		
PROPOSED GRADE	411.0		
INVERT IN	407.80	407.80	
INVERT OUT	407.55	407.55	
TRENCH:			
EXISTING GRADE	409.0		
INVERT	406.0		
BOTTOM	402.0	402.0	
STONE	5.0		
WIDTH	2.0		
LENGHT	135.0	135	

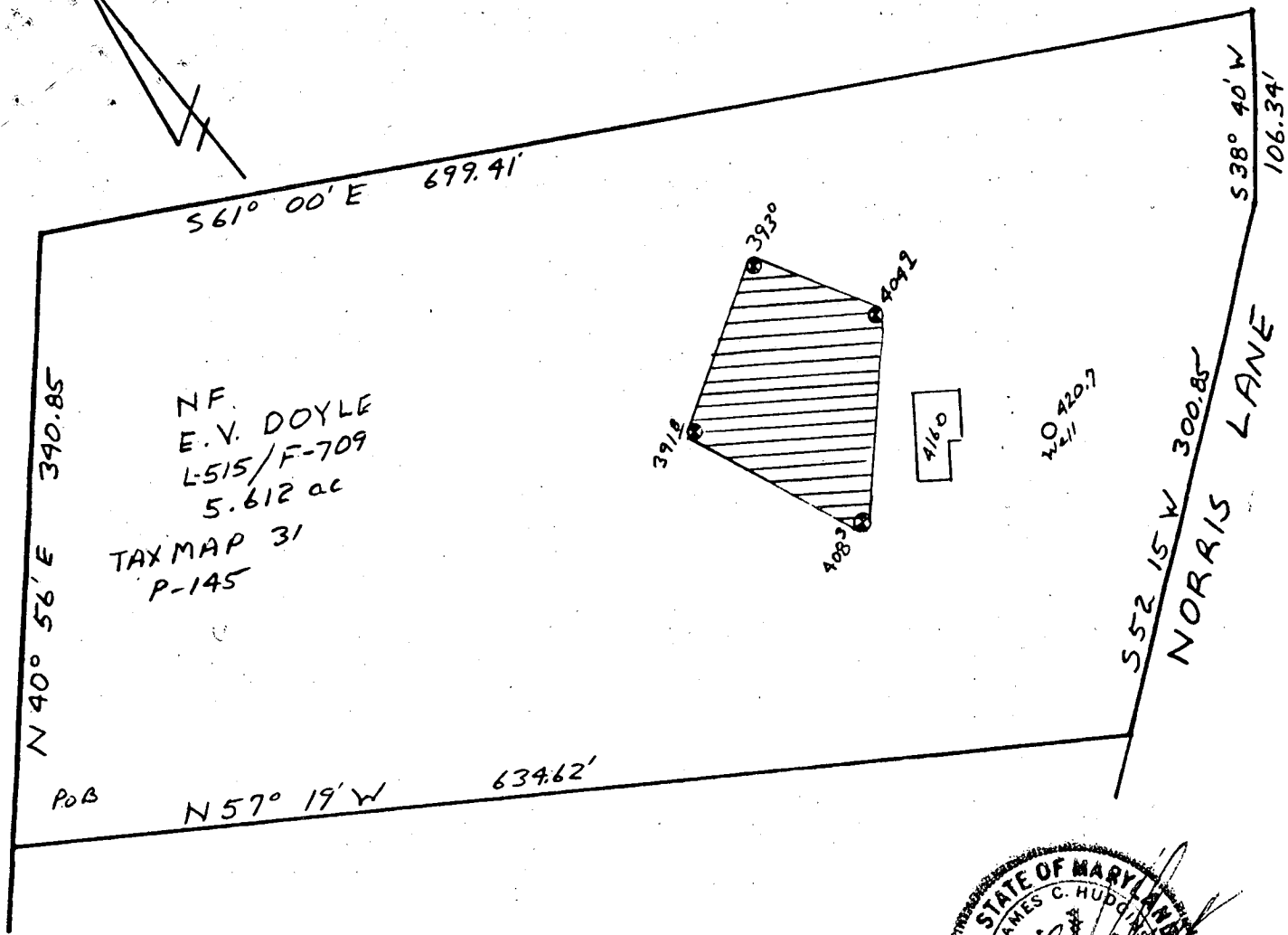
Ry - L
10/16/85

B.P. #64158

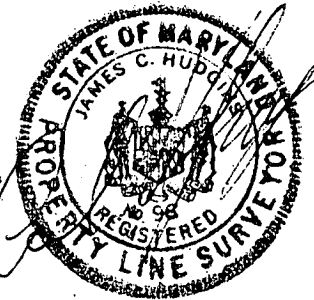
I certify the above measuerments & elevations to be actual and true for this property.

J. Carl Hudgins
J. Carl Hudgins

PLOT PLAN
KENNETH WESSEL PROPERTY
NORRIS LANE
TAX MAP #31 PARCEL #145
1st ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
DATE 8/9/85
SCALE 1"=50'




NF.
E.V. DOYLE
L-515/F-709
5.612 ac
TAX MAP 31
P-145



PERCOLATION TEST PLAT
PROPERTY OF
KENNETH WESSEL & WIFE
TAX MAP 31 PARCEL 145

1st Election District
Howard County, Maryland
Scale 1"=100'
Date 8/9/85

NTT Associates
101 Sterrett Place
Columbia, MD 21044
442 7031

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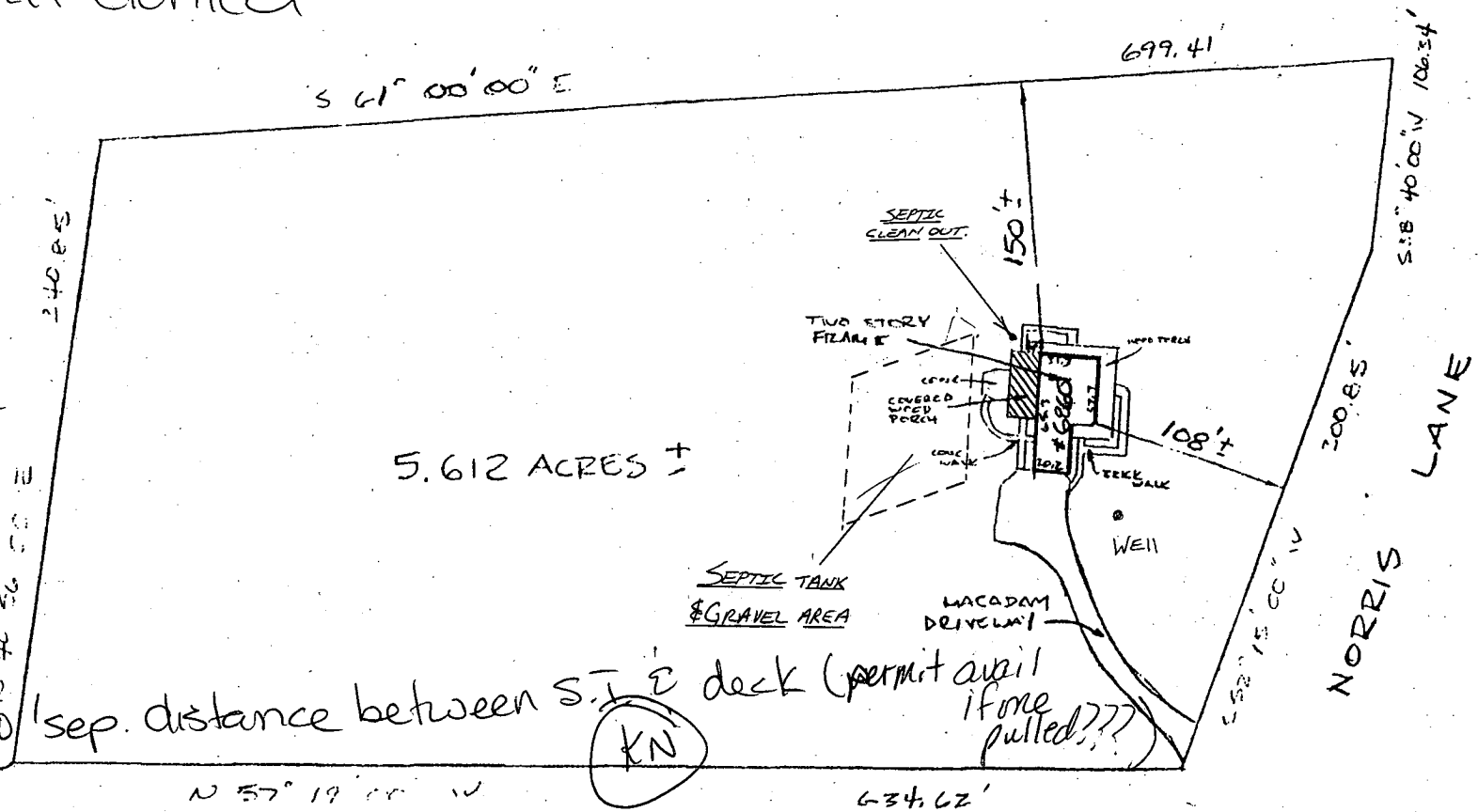
APPROVED: For Private Water and Private Sewage Systems

James C. Hudgins 9-18-85
County Health Officer Date

Permit denied

4-15-04
Existing deck
shows 2 feet
to S.T.
Ex Deck - no
permit on
file.
NEED plan w
10' sep. distance between S.T. & deck (permit avail
if one pulled???)

P.O.B.



subject property is shown in Zone
 in the National Flood Insurance Program
 Flood Insurance Rate Map of HOWARD
 County, Maryland. Panel # 217 F142
 Community Panel # 24114 (197) E
 Effective Date: 10/1/96

WESSEL
31259
4/14/04

This is to certify that I have surveyed the property
known as 6866 NORRIS LANE

Sheet of recorded LIBER 1377 FOLIO 533 among the
and Records of HOWARD County, Maryland for the
purpose of locating the improvements thereon.

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



J. Carl Hudgins PLS#96

LOCATION SURVEY

6866 NORRIS LANE
1ST ELECTION DISTRICT
HOWARD COUNTY, MD

NTI ASSOCIATES, INC.
16205 Old Frederick Road
Mt. Airy, Maryland 21771
Phone 442-2031

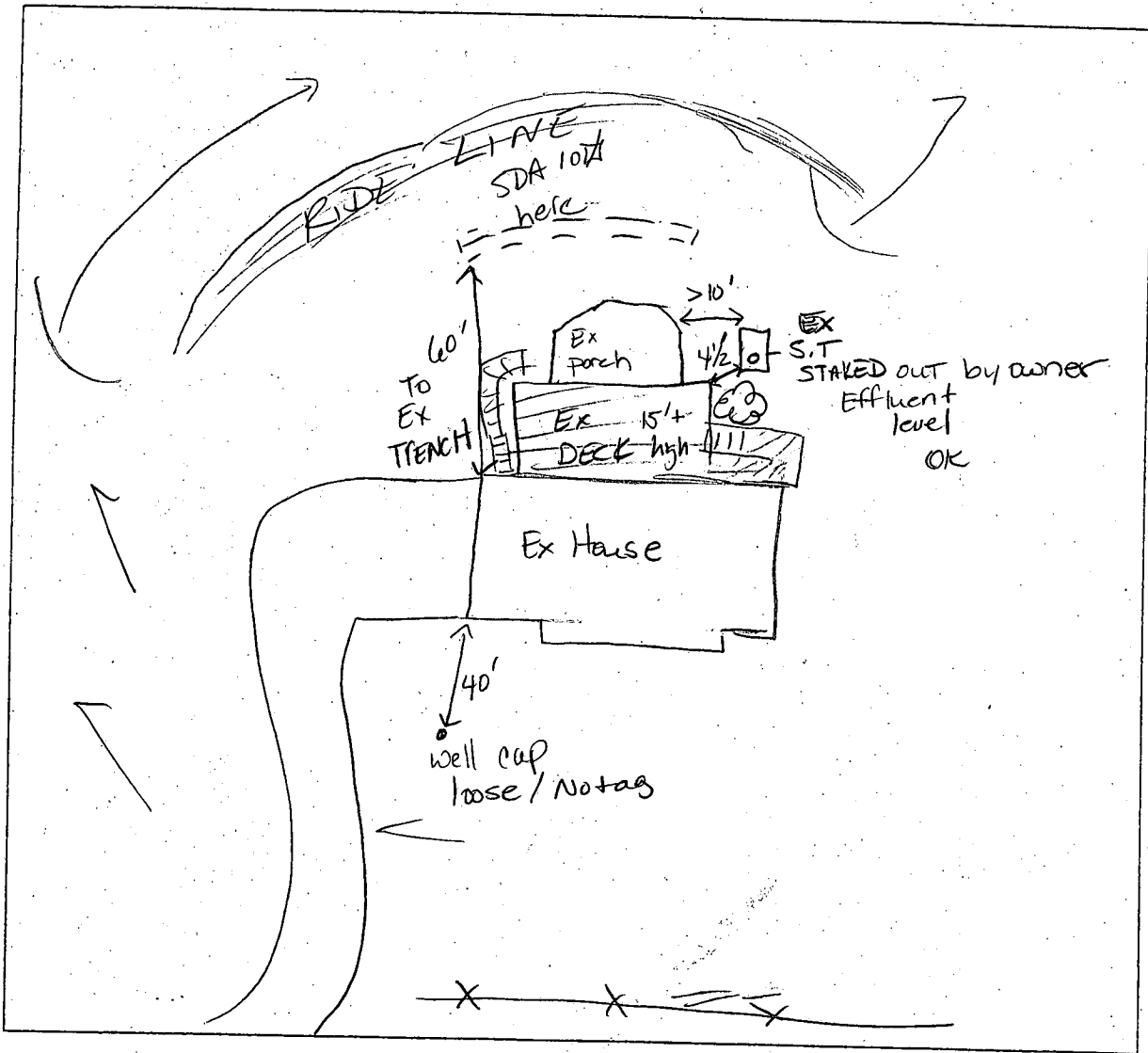
Scale	1" = 100'
Date	AUGUST 11, 1995
Field By	PS
Drawn By	PS
Drawing #	3410 EC

Site Plan
FOR BP 0014 7481

SITE INSPECTION SHEET

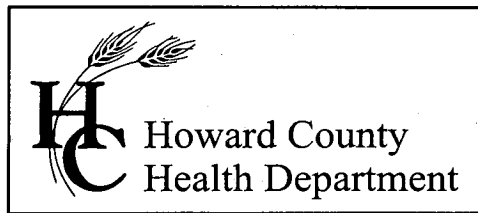
OWNER: Wesse L Property PHONE #: _____
ADDRESS: 6860 Norris Ln CONTRACTOR: _____
EKRIDGE, WELL TAG #: None
SUBDIVISION: _____ LOT: _____ COUNTY #: _____
PROPOSAL: BP for deck upgrade - locate dist to S. Tank

LOCATION DIAGRAM



COMMENTS: 5/15/04 4 1/2' variance from existing deck post to S.T. OK. Deck at least 14' high - NO issues w/ servicing septic tank

DATE: 5/15/04 INSPECTOR: Kacie Noonan



3525 H Ellicott Mills Drive, Ellicott City, MD 21043

(410) 313-2640 Fax (410) 313-2648

TDD (410) 313-2323 Toll Free 1-866-313-6300

website: www.hchealth.org

Penny E. Borenstein, M.D., M.P.H., Health Officer

May 18, 2004

Mr. & Mrs. Wessel
6860 Norris Lane
Elkridge, MD 21705

Re: Site Inspection
BP00147481/ Deck
6860 Norris Lane

Dear Mr. and Mrs. Wessel:

Our office conducted a site inspection for the above mentioned building permit. The location of the septic tank to the existing deck and proposed upgrade on existing slab is not an issue; high elevation of the deck and location of posts have no significant impact on accessibility. The building permit was signed and sent to the permits office.

While on site for the inspection of the septic tank, the existing potable well was also inspected. Our office highly recommends water testing for at least coliform and nitrates to ensure your potable water supply is not contaminated due to a loose well cap. Inside the well were spider webs and insects. Also noted, the well tag is no longer attached to the well casing. Our records indicate the drilled well is HO-81-1174. If you do not have the tag, inform our office and we can order another tag for you.

Enclosed, for your convenience, is a list of some state certified labs. If you have any questions on this matter, contact the Community Health Department at 410-313-1773. Thank you for your time in this important matter.

Sincerely,

Kacie Noonan, R.S.
Well and Septic Program

Enclosures

Cc: Community Health

file

PATIO ENCLOSURES INC...

313 2436 P.R.

June 10, 2004

KAREY MOONAN = 2648
FX 313 2648

Howard County D.L.L.P
3430 courthouse Dr.
Ellicott City, MD 21043

Dear Sir or Madam:

Please accept this letter as a request to revise permit # B00147481 for Kenneth Wessel, located at 6860 Norris Ln. Elkridge, MD 21075. After we obtained the permit to enclose the existing porch for a sun room, it was determined that the existing wood framed porch has structural issues, requiring us to demo the porch and wood foundation and construct new. The porch will be replaced with the same size porch (38' x16') in the same location. Some of the existing footing will be utilized in the construction of the new porch. The new contract amount for the project is \$59,590. The new description of work should read as follows, "Demo existing 38' x 16' screen porch and construct new sun room, same size and location".

Sincerely,

Gregory A. Falter
Permits and variances

Post-It® Fax Note	7671	Date	6/24	# of pages	▶
To	KAREY MOONAN	From	GREG FALTER		
Co./Dept.	HEALTH	Co.	4		
Phone #		Phone #	410 760 1919		
Fax #		Fax #			

6/24/04
Spoke w/
Greg on phone &
reviewed notes
OK to remove
existing patio
slab & repour
new
KN