

3/22/95
2 a.m.
3/23/95
11:00

X40

PERMIT

03-309665

SEWAGE DISPOSAL SYSTEM

P 50570

A 33546

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT _____

INDEXED

HOWARD COUNTY HEALTH DEPARTMENT

DATE 03/07/95

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXXX~~ 313-2640

DATE SYSTEM APPROVED 3/23/95

3/17/95

agent for owner

Kenneth G. Chamberlain

South Carroll
Backhoe

3/17/95

INSPECTOR DKS

Douglas E. Chamberlain/Storage USA IS PERMITTED TO INSTALL ALTER

ADDRESS 10440 Little Patuxent Parkway, Columbia, MD 21044 PHONE (410) 730-6806

SUBDIVISION Woodmark - Section III LOT 37 Blk. F ROAD 12235 Heathcliff Court

PROPERTY OWNER Douglas E. & Stephanie A. Chamberlain

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS required for 4 bedrooms or two standard 1000 gallon tank in series are suitable. Install pump pit on 2nd tank in series to all future repair as pumped system, if needed.

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

BLDG. PERMIT SIGNED
AND RETURNED 4/23/97
Serial # B1105207
J. Conigan

BLDG. PERMIT SIGNED
AND RETURNED 4/23/97
Serial # B1105208
include pool

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

LOCATION - Place distribution box 210 feet from the South (524') lot line and approximately 65 feet from the West (550') lot line. Object is to install trenches as high in the modified sewage disposal easement as can be accomplished by gravity flow from the existing house foundation. Run trenches along contour toward southwest corner of property.

NOTES - No trench to exceed 100 feet in length. provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 3/10/95 DKS

PLANS APPROVED BY C. Williams DATE 01/17/94

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.

BUILDING PERMIT SIGNED

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

AND RETURNED

6/13/2002 800 136897 INGROUND POOL

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

BLDG. PERMIT SIGNED

AND RETURNED 3/21/95

PERMIT VOID AFTER TWO YEARS

Serial # 58537

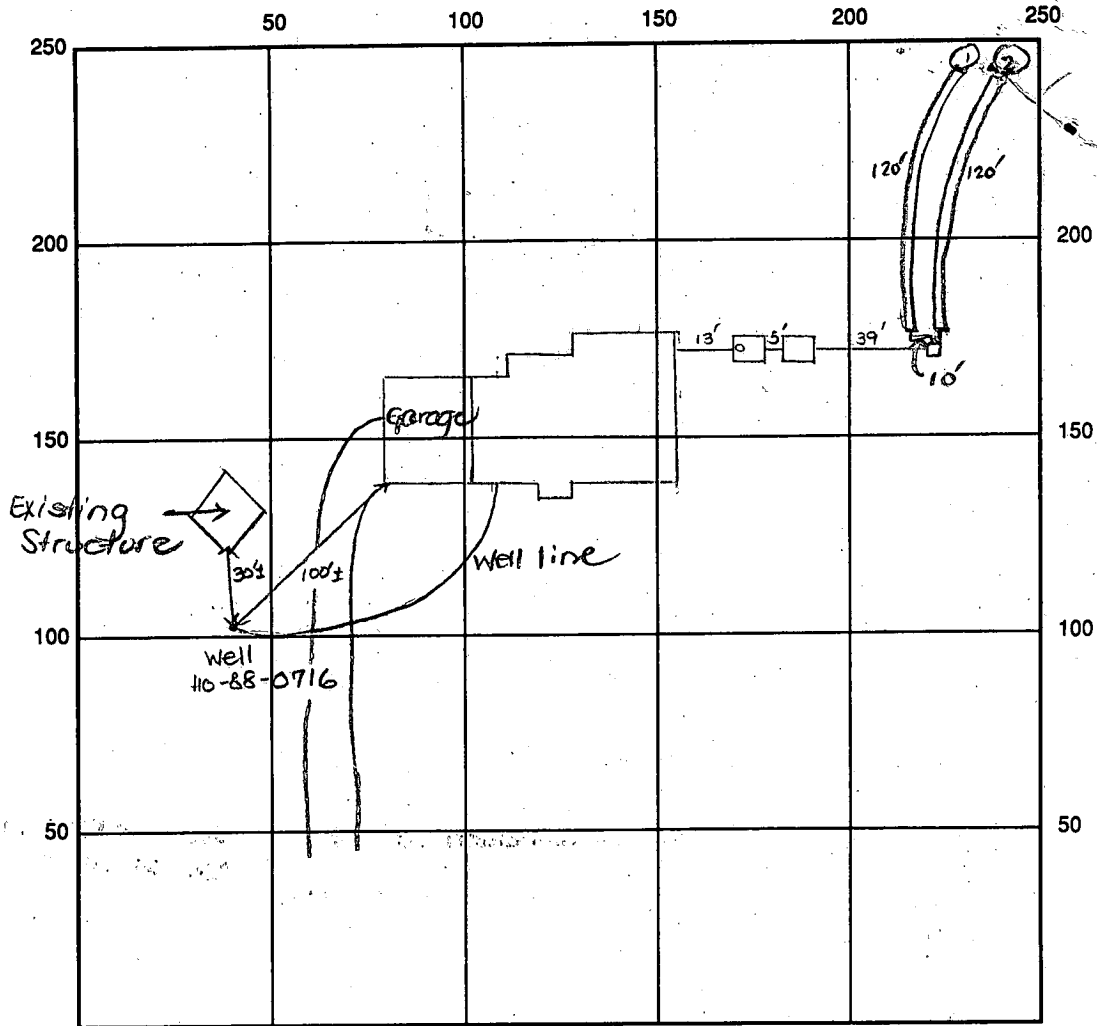
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON. CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

propellant

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

A 33546



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

Heathcliff Ct.

SEPTIC TANK LEVEL 1000 gal s.t., 1000 pump CLEANOUTS one on s.t.

DISTRIBUTION BOX LEVEL OK - baffle in

DRAIN FIELD/TITLE DEPTH 5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH ① 120' ② 120' FT. → 240' total

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 720 SQ. FT.

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

ABSORBENT AREA 720 SQ. FT.

REMARKS: 3/21/95 a.m. OK to continue work. DKS

3/22/95 p.m. OK to cover from house to d.b. and continue work. DKS

3/23/95 Final - OK to cover all work. DKS

DATE SYSTEM APPROVED 3/23/95

INSPECTOR Samuel Joe

APPLICATION

Prel.
2/15/84
9:30 AM.

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 33546

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

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

DISTRICT 3rd

DATE 2/15/84

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 JTR Homebuilders Inc.

ADDRESS 608 Baltimore Ave PHONE 821-6262
997-7257

PROPERTY LOCATION:

REAR LOT

SUBDIVISION Woodmark sec. 11 LOT NO. Parcel "A" 9.933 AC.

ROAD AND DESCRIPTION HEATH CLIFF CT. (THERE IS A FRONT LOT AND A REAR LOT)

(TO BE CALLED Lot 37 Sect 11)

SIZE OF LOT 9.933 AC. TYPE BLDG. 3 or 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.

Clayton A. Marshall
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

~~ALL PERMITS MUST BE RETURNED TO THE ISSUING OFFICE~~
~~ALL PERMITS MUST BE RETURNED TO THE ISSUING OFFICE~~
~~ALL PERMITS MUST BE RETURNED TO THE ISSUING OFFICE~~

BP 516260 AND RETURNED 11/15/91
SERIAL # 51134
4 BA

THIS IS NOT A PERMIT

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 33544
P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

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

DISTRICT _____

DATE _____

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

Clayton Marshall

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER TTR Homebuilders, Inc.
ADDRESS 608 Baltimore Ave PHONE 821-6262
997-7257

PROPERTY LOCATION:

REAR LOT

SUBDIVISION WOODMARK Sec. 11 LOT NO. Parcel "A" 9.933 AC.

ROAD AND DESCRIPTION HEATHCLIFF CT. 12235 Heathcliff Ct.
CTOBBE CAVED LOT
37 SECT 11

SIZE OF LOT 9.933 AC. TYPE BLDG. 324
(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.

Clayton H. Marshall
(SIGNATURE OF APPLICANT)

APPROVED BY Frank Skinn FOR Shallow trench DATE 2/22/84

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

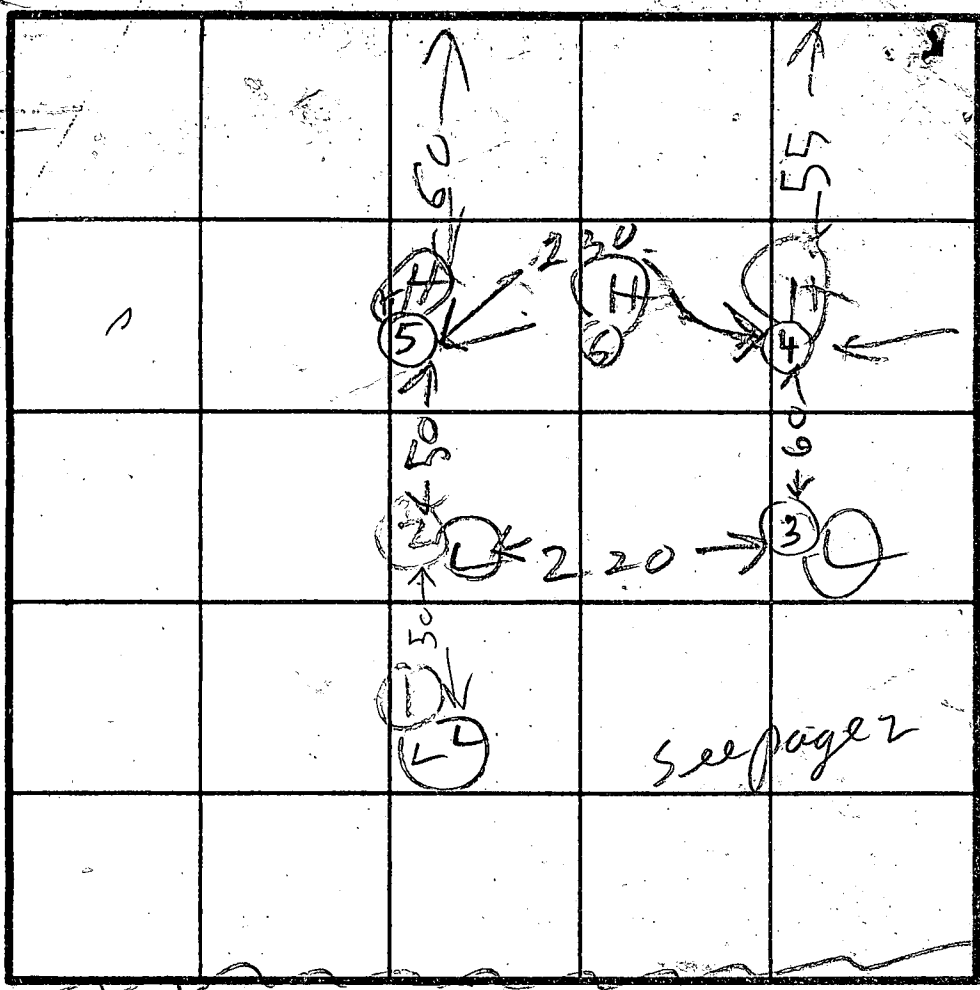
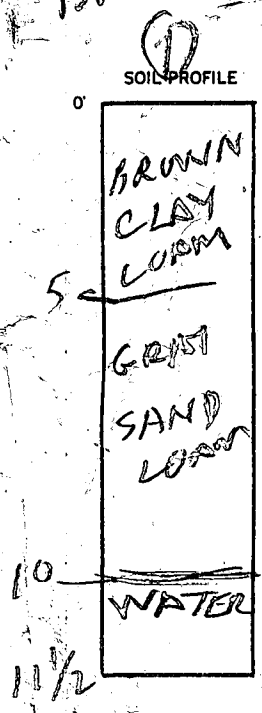
REASONS FOR REJECTION OR HOLDING 2/15/84 HOLD FOR REVIEW
WATER BH. 25/11/84 - PERCOLATION PASSABLE IN
ONLY ONE OUT OF THREE EXTRA HOLES HOLD FOR REVIEW R/A

THIS IS NOT A PERMIT

SEWERAGE
TWO FOR
NEATER
DRAWING

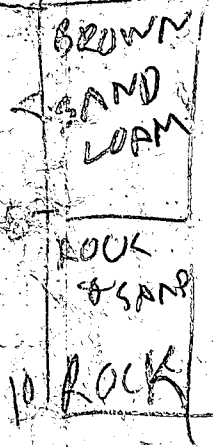
BUILT UP POINTS

Page 1



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

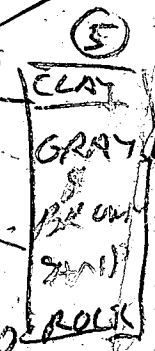
WOODS



DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2/15/84	1V	1 1/2	WATER 10 FT				
	2S	3	1042	1040	1048	1049	4
	2D	7	1042	1043	1043	1044	7
	2V	10	LOOKS OK ROCK BOTTOM				
	3S	3 1/2	1101	1112	1112	1137	25
	3D	6 1/2	1102	1104	1104	1107	3
	3V	11 1/2	LOOKS OK				
	4S	3	1123	1150	1150	1216	26
	4D	6 1/2	1123	1137	1137	1200	23
	4V	11	OK				
	5S	4	1145	1185	1140	1148	2
	5D	7	1145	1146	1140	1148	2
	5V	10	LOOKS OK ROCK BOTTOM				
2	6V	11	ALL SAND IS OK				



INLET 3'
BOTTOM AT 5'
180/BD



EH-12-1079

REMARKS: RAIN TO DAY SITE 2/15/84

TYPE OF SOIL: CLAY

TESTED BY: B HODGES

DON PARLETTI
ALSO PRESENT
RUS SMITHALL

Lot 37 Woodmark

Perc test 1/13/95

	START TIME	STOP TIME	STOP TIME	START TIME
A	10:34	>30 min		—

HEATHCLIFF DRIVE

9

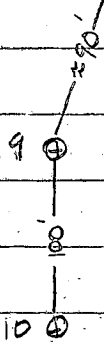
2.5	orange CL
6.5	yellow + tan c
12'	grey s orange mottled sil to sand

GARAGE FOUNDATION

EXISTING House foundation

10

1'	topsoil
5'	yellow brn CSL
8.5'	grey s brn mottled sil
9'	20% rock sand brn
12'	water



MIDDLE

PATON

650.42

101.425

S 42° 40' 55" E

APPROX. LIMIT 100 YEAR FLOOD PLAIN

HOLE'S 1 THAW 8 DUG
FEB 4 APR 1984

HOLE'S 9x10 JUNE 95
11/3/95

PROPR. WELL
11/3/95

LOT 37
6.6624 AC.

PROPR. 10,000
SEPTIC ENLARGEMENT

PROPR. DWLG.



MARGINAL

GOOD

GOOD

MARGINAL DEEP CLAY

GOOD

OR OTHER PROG
MARGINAL (DEEP CLAY)

7 - VERY MARGINAL
MAY BE SHOULD HAVE FAILED

8 - MARGINAL (DEEP CLAY)

9 VARIABLE CLAY/LOAM THROUGHOUT
TOO SLOW AT 7'

GREY - POSSIBLE WATER AT 9'

10 VARIABLE CLAY/LOAM THROUGHOUT
NO TEST
WATER AT 8'

LOT 36

360

362

364

366

368

370

372

374

376

378

380

382

213

28



HOWARD COUNTY HEALTH DEPARTMENT

Joyce M. Boyd, M.D., County Health Officer

January 18, 1995

Ms. Stephanie Chamberlain
831 Dividing Road
Severna Park, MD 21146

RE: Septic System Plans
Woodmark, Lot #37
12235 Heathcliff Court

Dear Ms. Chamberlain:

This is to confirm that your request to modify the septic system plans for this property to a gravity service system have been accepted.

Copies of the revised septic system plan and specifications are enclosed. Please have your contractor contact this office to request the installation permit.

After installation is completed, submittal of an as built plan would be appropriate.

If you have any questions regarding this matter, please feel free to contact me at the above address or by calling 313-2640.

Very truly yours,

Craig Williams, Program Director
Water and Sewerage Program

CW:vr

Enclosures:

cc: South Carroll Backhoe, Inc.
File

"BLIND" COPY

TO

PAUL SCHISSEK

SOUTH CANAL

2/8

(CW)



HOWARD COUNTY HEALTH DEPARTMENT

Joyce M. Boyd, M.D., County Health Officer

February 8, 1995

Mr. Doug Chamberlain
831 Dividing Road
Severna Park, Maryland 21146

RE: Septic System Plans
Woodmark, Lot #37
12235 Heathcliff Court

Dear Mr. Chamberlain:

Previously we met in the field to discuss proposed modifications to your septic installation. Your request was for a gravity flow system rather than a pumped system. Lacking specific elevation detail, we had agreed to a rather loose "do the best you can" arrangement based upon your intent to install the house sewer line as shallow as practical below your first floor level.

As per my letter of January 15, 1995, we were prepared to issue the septic permit to the contractor who represented you in the field that date. From the contacts we have been receiving, apparently you have elected to put the project out to bid. Our current arrangement of "do the best you can" is not specific enough to release septic system specifications to the general public.

If you wish septic system specifications to be released so that competitive bids can be obtained, it will be necessary for you to submit a more specific site plan with elevation detail. Only on that basis, can specifications be issued for a configuration that is compatible with the as-built house location. At this point I would prefer to issue the installation permit in your name, then you will be free to contact as many contractors as you prefer.

Please contact me at the above address or by calling 313- 2640, to confirm your plans so that we may provide the service you require.

Very truly yours,

Craig Williams, Program Director
Water and Sewerage Program

CW:vr

cc: File

Bcc: Mr. Paul Schissler



HOWARD COUNTY HEALTH DEPARTMENT

Joyce M. Boyd, M.D., County Health Officer

November 22, 1994

Ms. Stephanie Chamberlain
831 Dividing Road
Severna Park, MD 21146

RE: Percolation Testing
Woodmark, Lot # 37
12235 Heathcliff Court

*VOID
"NO FEE"
OBSERVATION
HOLD OK
1/13/95
GRAVITY SYSTEM TO BE
INSTALLED TO MID-POINT
OF EXHAUSTION.
(CW)*

Dear Ms. Chamberlain:

A "wet season" percolation test date has been reserved for February 15, 1994 pending submission of test fees in the amount of \$225, not less than 2 weeks prior to the scheduled test date.

The purpose of the testing is to determine if the septic area can be adjusted sufficiently to allow conversion from a planned pumped septic system to a gravity service system. If you choose not to pursue the testing, or if the testing is unsuccessful, then the plan for a pumped system shall remain in effect.

You will be responsible for having a contractor on-site to excavate test holes at the corners of proposed percolation area.

Please call this office between 8:30 a.m. and 4:30 p.m., Monday through Friday, to confirm your acceptance of this percolation test date.

Thank you for your cooperation in this matter.

Very truly yours,

Craig Williams, Program Director
Water and Sewerage Program

CW: at

B 1 **2337** SEQUENCE NO. (DP 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

STATE PERMIT NUMBER
HO-88-0716
 fill in this form completely

Date Received (APA) **053089**
 OWNER INFORMATION
HES URBAN SYSTEMS INC.
6216 LIGHT POINT PL
COLUMBIA MD 21046

B 3 LOCATION OF WELL
HOWARD COUNTY
WOODMARK SUBDIVISION
 SECTION **7E** LOT **37**
GLENEIG NEAREST TOWN
 MILES FROM TOWN (enter 0 if in town) **4** MI

DRILLER INFORMATION
Dana Kyker, Jr. II
Westminster Rotary Well Drilling, Inc.
P.O. Box #861, Westminster, Md. 21157
 Address: **W. ... TRT** Date: **05/26/89**

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
 NEAR WHAT ROAD: **HEATHCLIFF DR.**
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): **S**
 DISTANCE FROM ROAD: **550** FT or MI **57**

B 2 WELL INFORMATION
 APPROX. PUMPING RATE (GAL. PER MIN.) **5**
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **550**

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
 COUNTY NAME: **HOWARD** COUNTY NO. **A33546**
 STATE SIGNATURE: **Chai Willem** DATE ISSUED: **12/9/89**
 NORTH GRID: **524000** EAST GRID: **0819000**

APPROXIMATE DEPTH OF WELL **150** FEET

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

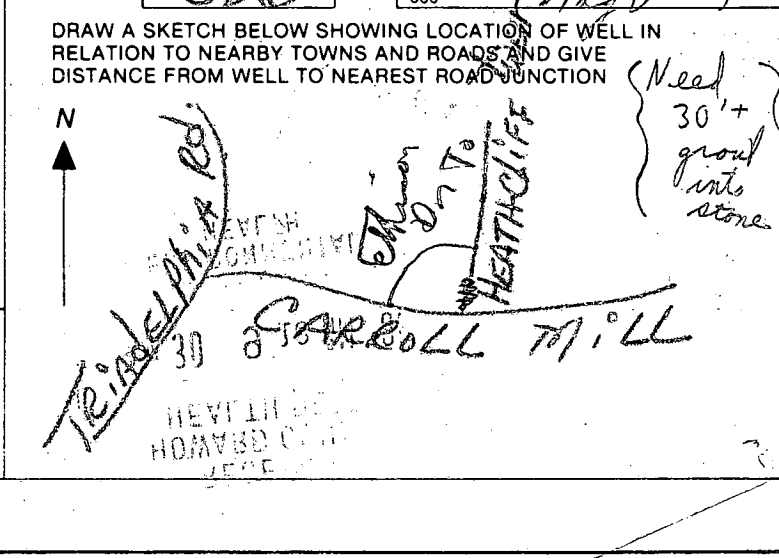
METHOD OF DRILLING (circle one)
 BORED (or Augered) JETTED Jetted & DRIVEN
 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)
 CABLE REVERSE-ROTARY DRIVE-POINT
 other _____

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) _____

Not to be filled in by driller (OEP USE ONLY)
 APPROP. PERMIT NUMBER _____ GAP _____
 FORCE **CW** WRITE INITIALS IN BOX PERMIT No. **HO-88-0716**

SPECIAL CONDITIONS **KUSS MARSHAL**
0-997-7257 + A381-3345

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
 SOURCES OF DRILLING WATER:
 1. **CITY water 4/22**
 2. **2 1/2' from surface**
 3. **36' casing**
 WRITE THE BOX NUMBER FROM THE MAP HERE: **8100**
5200



C1 9953

SEQUENCE NO. (DENV USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

COUNTY NUMBER A33546

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED 062289

Depth of Well 302 (TO NEAREST FOOT)

PERMIT NO. FROM PERMIT TO DRILL WELL No-88-0716

OWNER RESIDENTIAL URBAN SYSTEMS last name HEATHCOTE first name TOWN GLENVIEW SUBDIVISION WOODBINE SECTION 11 LOT 37

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, TO), Check if water bearing. Rows include Dirt, Clay, Bank Sand, Blue & Brown Sandstone, Brown Sandstone, Blue Sandstone, Brown Sandstone, Blue Sandstone.

GROUTING RECORD WELL HAS BEEN GROUTED (Y) TYPE OF GROUTING MATERIAL CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 15 NO. OF POUNDS 1410

CASING RECORD casing types insert appropriate code below MAIN CASING TYPE S T Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 36

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

SCREEN RECORD screen type or open hole insert appropriate code below S T B R H O STEEL BRASS BRONZE PLASTIC OPEN HOLE OTHER

DEPTH (nearest ft.) 302 SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH)

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. 256 Dana Kyker, Jr. II

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.) W Q LOG INDICATOR OTHER DATA

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 8 WHEN PUMPING 175 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 2 (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) CARROLL M. L.

3/23/95
a.m.

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
Name of Installer AI Pump Service
Name of Installer Leland W Johnson
License Number P10057
Certified Well Pump Installer Well Driller Registered Plumber
Name of Property Owner Douglas Chamberlin
Subdivision Wood Mark Lot # 37 Well Tag # -
Site Address 12235 HEART CLIFF COURT
ELICOTT CITY MD. 21042.

Receipt # _____
Date _____
Telephone 410 6794622

Pump
1. Type
a. Deep well jet _____
b. Shallow well jet _____
c. Submersible
2. Make MYERS
3. Model # 3/4hp
4. Capacity 5 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 _____

Motor
1. Horsepower 3/4hp
2. RPM 3600
3. Voltage 220
a. 110 _____
b. 220

Pitless Adapter
1. Make _____
2. Model # _____
3. Depth 42"

Tank
1. Capacity 250
2. Pressure relief valve? yes

Piping
1. Type plastic
2. Size 1"
3. NSF and/or BOCA Code approved
4. Depth of supply line 42"

Well data
1. Depth 302 ft.
2. Yield 10 GPM
3. Static water level 20 ft.
4. Will water supply be disinfected by installer? yes

3/23/95
COP: 4.5' below grade
1.5' above " OK to cover DKS

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: Leland W Johnson

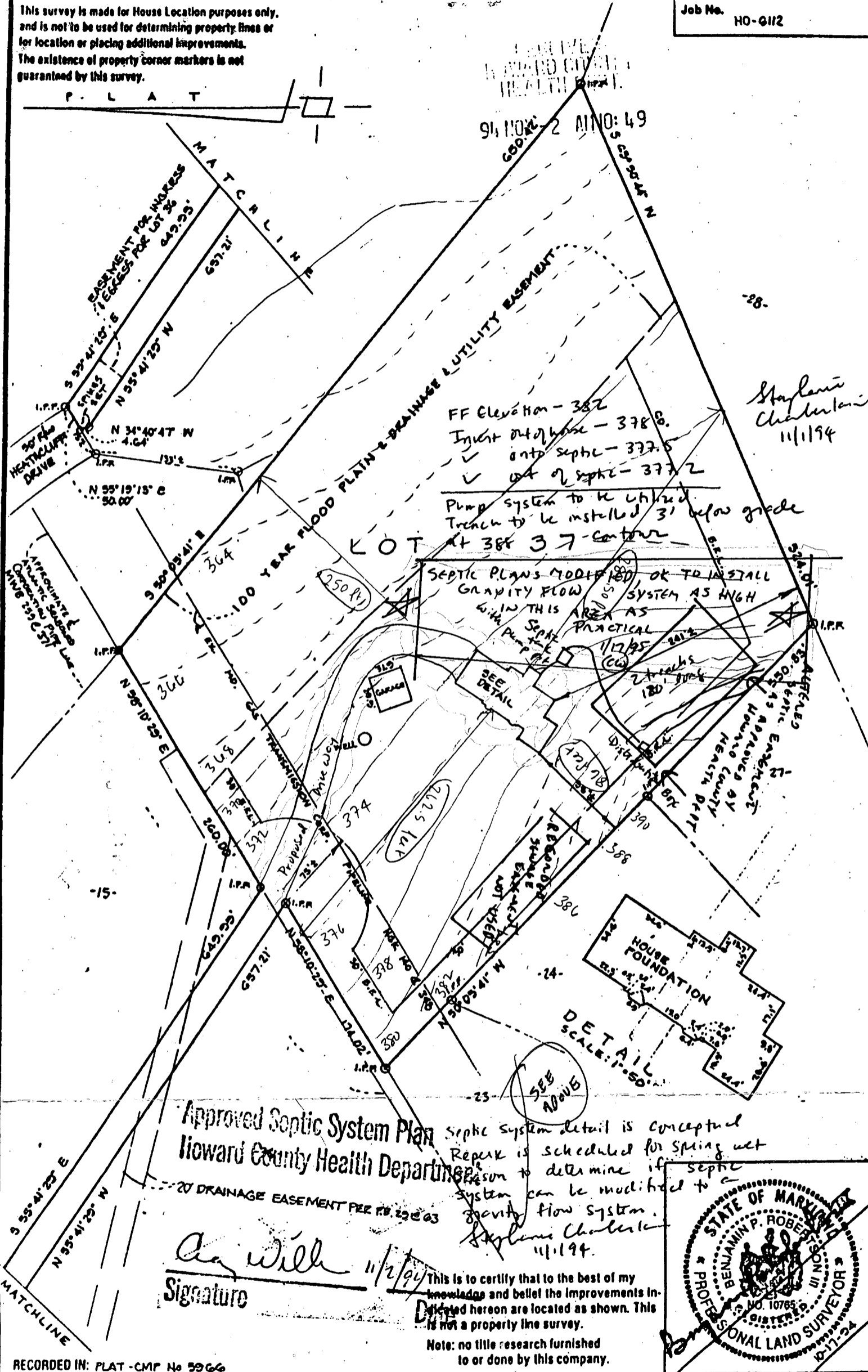
Date: 3, 24, 95

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

This survey is made for House Location purposes only, and is not to be used for determining property lines or for location or placing additional improvements. The existence of property corner markers is not guaranteed by this survey.

Job No. HO-0112

P L A T



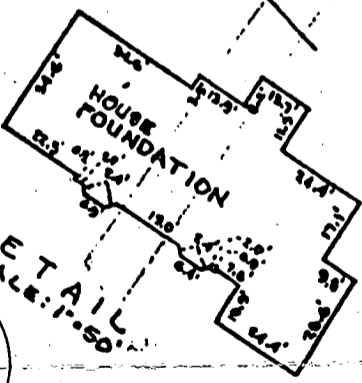
-28-

Stephanie
Charlton
11/194

FF Elevation - 382
Inlet out of house - 378.8
✓ onto septic - 377.5
✓ out of septic - 377.2
Pump system to be utilized
Trench to be installed 3' below grade
at 384.37 contour

SEPTIC PLANS MODIFIED OR TO INSTALL
GRAVITY FLOW SYSTEM AS HIGH
AS PRACTICAL
WITH PUMP

APPROVED BY HOWARD COUNTY HEALTH DEPT
11/2/94



Approved Septic System Plan
Howard County Health Department

Septic system detail is conceptual
Repair is scheduled for spring wet
season to determine if septic
system can be modified to a
gravity flow system.
Stephanie Charlton
11/194

Signature
11/2/94

This is to certify that to the best of my
knowledge and belief the improvements in-
dicated hereon are located as shown. This
is not a property line survey.

Note: no title research furnished
to or done by this company.



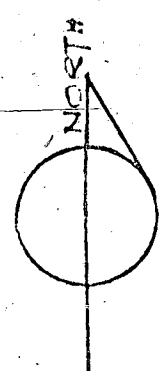
RECORDED IN: PLAT - CMP No 5966

WALL CHECK

LOT 37 BLOCK F SECTION II

WOODMARK

RDA
REAL ESTATE DEVELOPMENT TECHNOLOGY ASSOCIATES INC.
ENGINEERS • LAND PLANNERS • LAND SURVEYORS
15207A MARLBORO PIKE • FORD OFFICE BUILDING



NOTE: SEE SURVEY BY G. SCOTT SHANABERGER, 4-6-84 FOR LOT 87, SECTION 11, "WOODMARK", HOWARD CO., MD. FOR ADDITIONAL SITE INFORMATION.

MORE INFORMATION NEEDED AS TO ELEVATIONS SEE SAMPLE

189 VARIATIONS

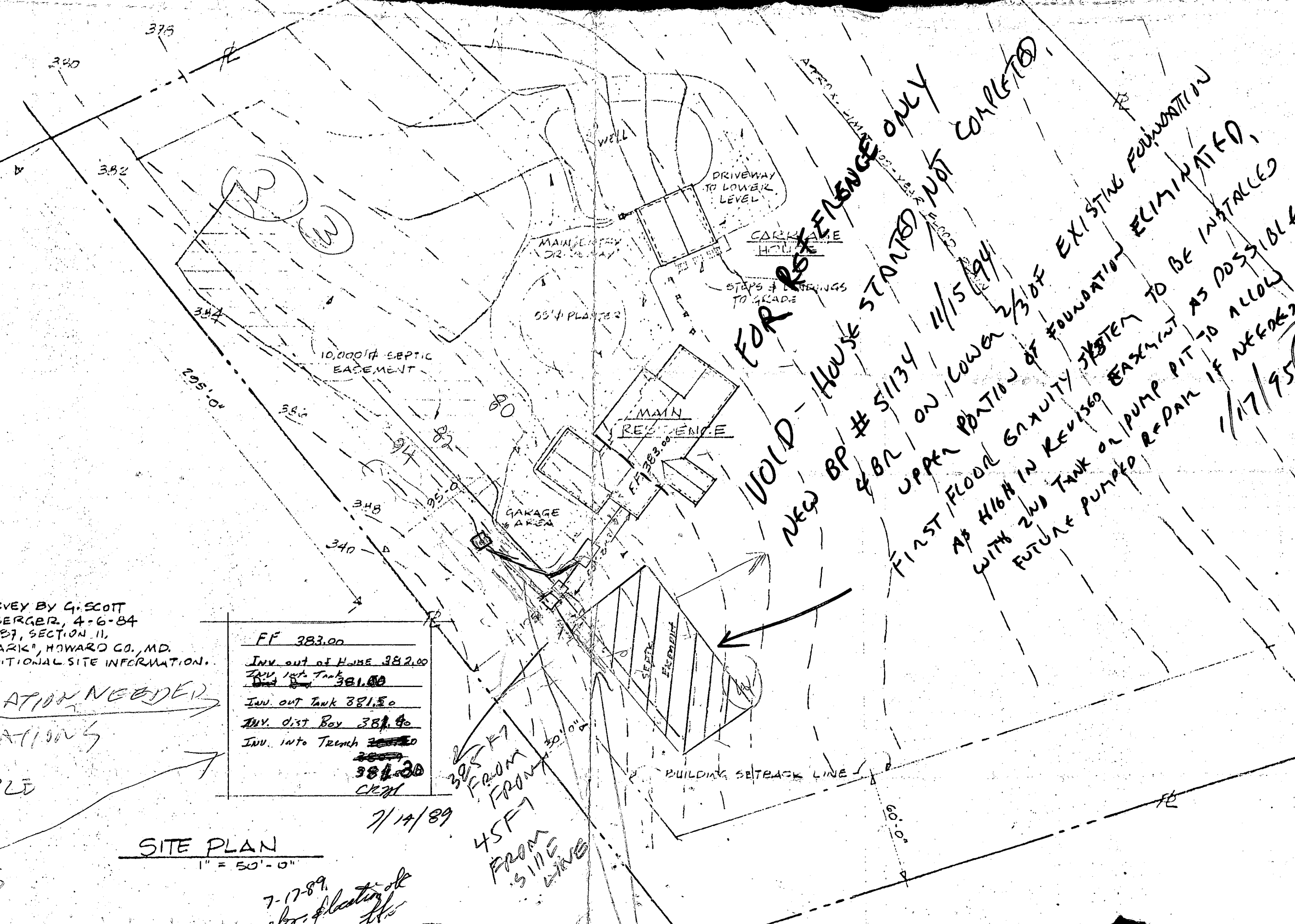
FF	383.00
Inv. out of House	382.00
Inv. Int. Tank	381.00
Inv. out Tank	381.50
Inv. dist. Box	381.40
Inv. into Trench	381.00
	381.30
	CR21

7/14/89

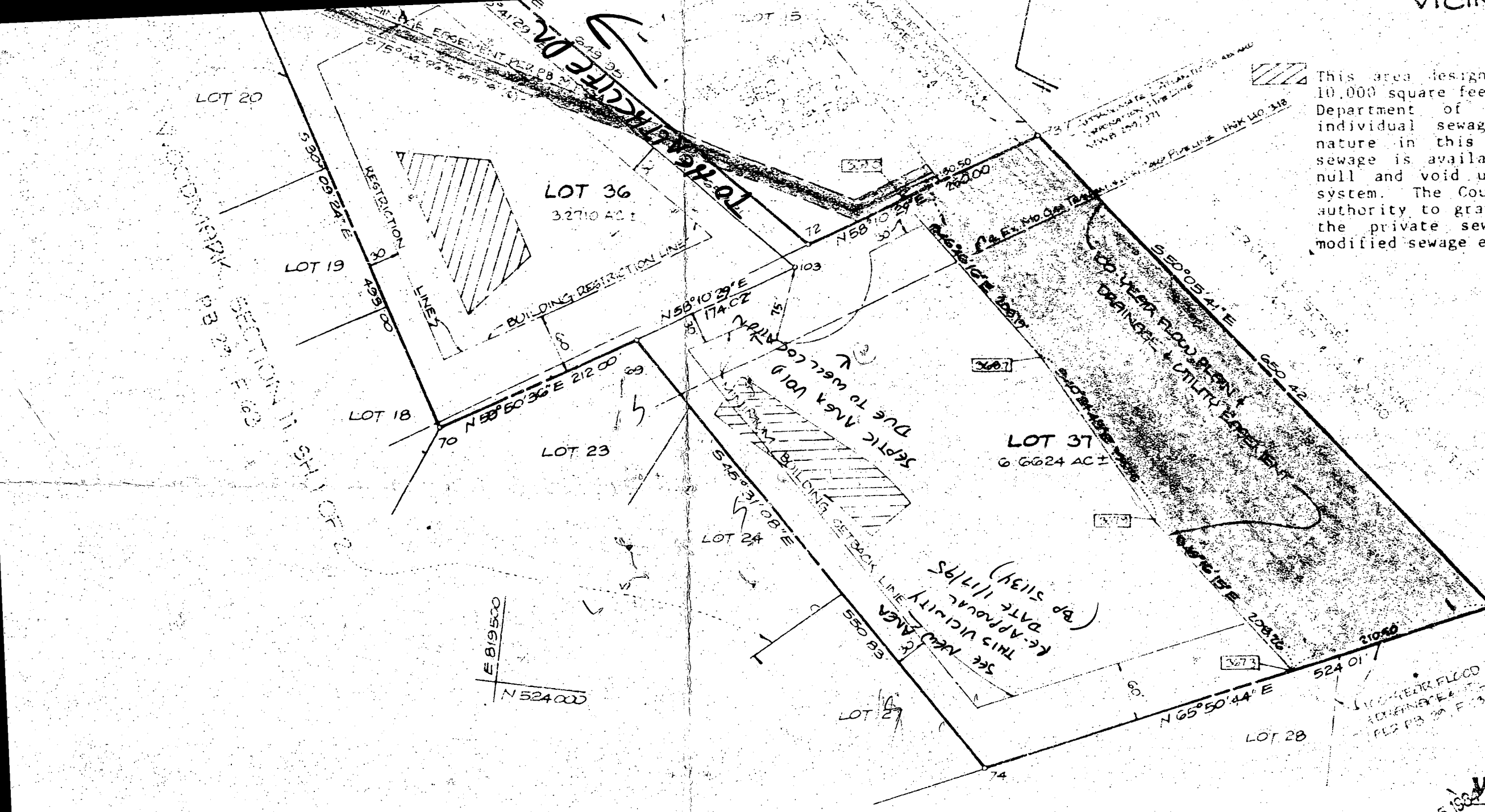
SITE PLAN
1" = 50'-0"

7-17-89
Plotting of
data

305 FF FROM FRONT
45 FF FROM SIDE WINGS



FOR REFERENCE ONLY
 HOUSE STARTED NOT COMPLETED
 NEW BP # 51134 4BR ON LOWER 2/3 OF EXISTING FOUNDATION
 UPPER PORTION OF FOUNDATION ELIMINATED,
 FIRST FLOOR SANITARY SYSTEM TO BE INSTALLED
 AS HIGH IN REVISED EASEMENT AS POSSIBLE,
 WITH 2ND TANK OR PUMP PIT TO ALLOW
 FUTURE PUMPO REPAIR IF NEEDED?
 1/17/95



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 modified sewage easement shall not be necessary.

NOTES

1. THE LOTS SHOWN HEREON COMPLY WITH THE MINIMUM OWNERSHIP WITH LOT AREA AS REQUIRED BY THE M.D. STATE DEPT. OF HEALTH & MENTAL HYGIENE.
2. SUBJECT PROPERTY ZONED RTR PER 10/3/77 COMPREHENSIVE ZONING PLAN.
3. 3685 DENOTES 100-YEAR FLOOD ELEVATION.
4. PLAN SUBJECT TO VP 84-75.
5. FOR FLAG OF PIPESTEM LOTS REFUSE COLLECTION, SNOW REMOVAL AND ROAD MAINTENANCE PROVIDED TO THE JUNCTION OF THE FLAG OR PIPESTEM AND ROAD RIGHT-OF-WAY ONLY AND NOT ONTO THE FLAG OR PIPESTEM.

STATE DEPT. OF ASSESSMENTS & TAXATION
 HOWARD COUNTY
 RECEIVED BY: *[Signature]*
 DATE: *10/1/84* PLAT: _____

W. DUVALL & ASSOCIATE

Engineers / Land Planning Consultants
 416 E. Joppa Road / Towson, Maryland 21204 / (301) 581-1000

HOWARD COUNTY
 DATE: *10-1-84*
 PRIVATE SEWERAGE AND DRAINAGE SYSTEMS & UTILITY DEPARTMENT
 DATE: *10-1-84*
 ZONING & ZONING DEPARTMENT
 DATE: *10-1-84*

DEDICATION FOR CORPORATION

WE, TTR HOME BUILDERS, INC., A MARYLAND CORPORATION, BY CLAYTON R. MARSHALL, PRESIDENT, AND THEODORE J. POTTHAST, VICE PRESIDENT AND SECRETARY, OWNERS OF THE PROPERTY SHOWN AND DESCRIBED HEREON, HEREBY ADOPT THIS PLAN OF SUBDIVISION, AND IN CONSIDERATION OF THE APPROVAL OF THIS FINAL PLAT BY THE OFFICE OF PLANNING AND ZONING, ESTABLISH THE MINIMUM BUILDING RESTRICTION LINES AND GRANT UNTO HOWARD COUNTY MARYLAND, ITS SUCCESSORS AND ASSIGNS, (1) THE RIGHT TO LAY, CONSTRUCT AND MAINTAIN SEWERS, DRAINS, WATER PIPES AND OTHER MUNICIPAL UTILITIES AND SERVICES, IN AND UNDER ALL ROADS AND STREET RIGHT-OF-WAYS AND THE SPECIFIC EASEMENTS AREAS SHOWN HEREON; (2) THE RIGHT TO REQUIRE DEDICATION FOR PUBLIC USE THE BEDS OF THE STREETS AND/OR ROADS AND FLOODPLAINS AND OPEN SPACE WHERE APPLICABLE, AND FOR GOOD AND OTHER VALUABLE CONSIDERATION, HEREBY GRANT THE RIGHT AND OPTION TO HOWARD COUNTY TO ACQUIRE THE FEE SIMPLE TITLE TO THE BEDS OF THE STREETS AND/OR ROADS AND FLOODPLAINS, STORM DRAINAGE FACILITIES AND OPEN SPACE WHERE APPLICABLE; (3) THE RIGHT TO REQUIRE DEDICATION OF WATERWAYS AND DRAINAGE EASEMENTS FOR THE SPECIFIC PURPOSE OF THEIR CONSTRUCTION, REPAIR AND MAINTENANCE, AND (4) THAT NO BUILDING OR SIMILAR STRUCTURE OF ANY KIND SHALL BE ERECTED ON OR OVER THE SAID EASEMENTS AND RIGHT-OF-WAYS.

WITNESS OUR HAND AND THE 23RD DAY OF APRIL, 1984.

[Signature] DATE: _____

SURVEYOR'S CERTIFICATE

I HEREBY CERTIFY THAT THE FINAL PLAT SHOWN HEREON IS CORRECT; THAT IT IS ALL OF THE LAND OBTAINED BY TTR HOME BUILDERS, INC. FROM WOODMARK, INC., BY DEED DATED DECEMBER 9, 1983 AND RECORDED AMONG THE LAND RECORDS OF HOWARD COUNTY, MARYLAND IN LIBER 1222 AT FOLIO 228 AND THAT ALL MONUMENTS ARE IN PLACE, OR WILL BE IN PLACE, PRIOR TO ACCEPTANCE OF THE STREETS IN THE SUBDIVISION BY HOWARD COUNTY, AS SHOWN IN ACCORDANCE WITH THE ANNOTATED CODE OF MARYLAND, AS AMENDED.

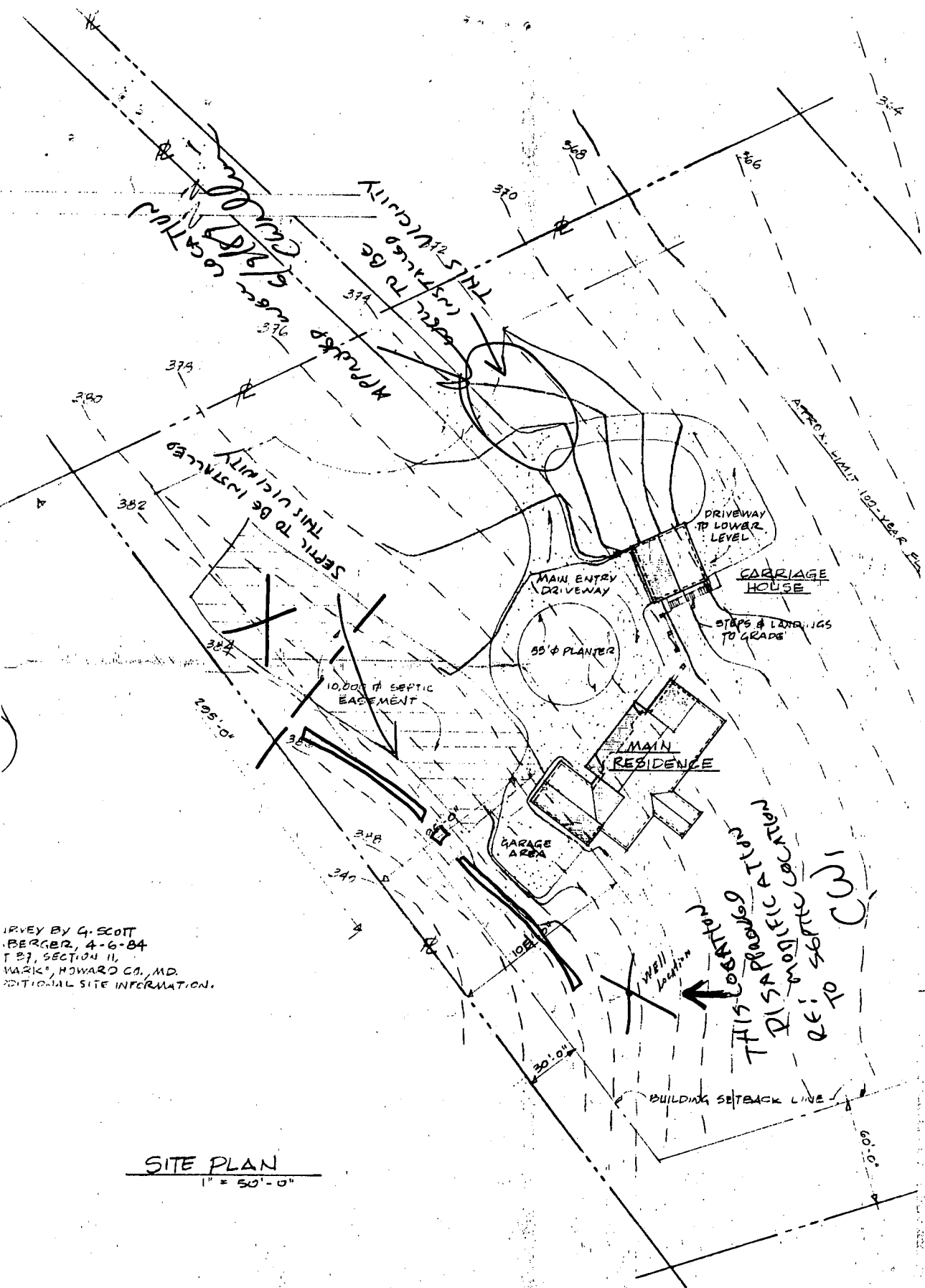
[Signature] DATE: _____

RECORDED AMONG THE LAND RECORDS OF HOWARD COUNTY, MARYLAND ON _____ (3) PLAT NUMBER _____

FINAL PLAT

LOTS 36 & 37, BLOCK 'F' SECTION 11 WOODMARK

A RESUBDIVISION OF PARCEL 'A' BLOCK 'F', SECTION 11, WOODMARK 3RD ELECTION DISTRICT HOWARD COUNTY, MD. TAX MAP PARCEL SCALE: 1" = 100' APRIL 1, 1984



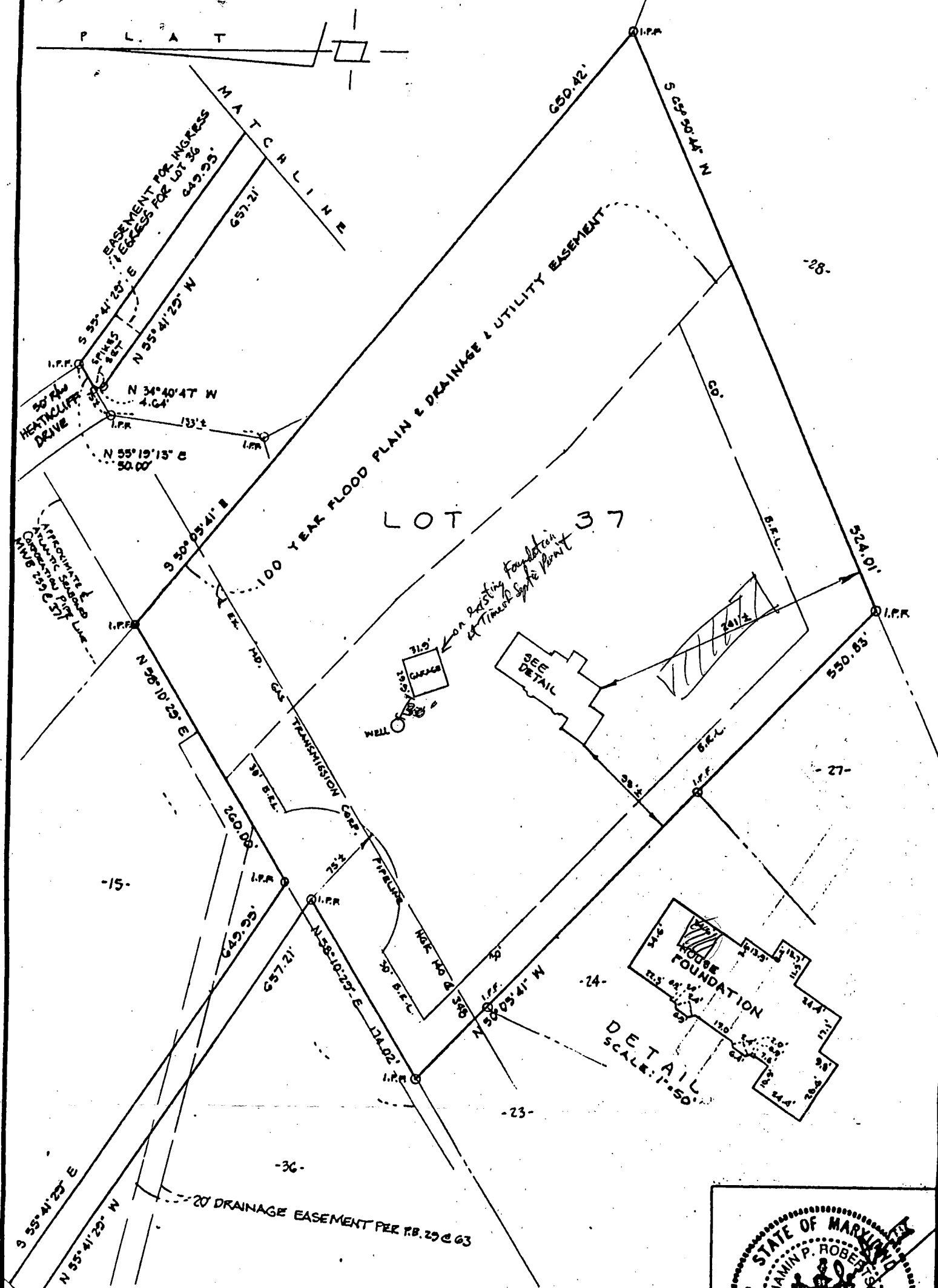
IRVEY BY G. SCOTT
 BERGER, 4-6-84
 T 27, SECTION II,
 MARIK, HOWARD CO., MD.
 ADDITIONAL SITE INFORMATION.

SITE PLAN
 1" = 50'-0"

LEON BRID
 ARCHITE
 720 EAST PR
 BALTIMORE

This survey is made for House Location purposes only, and is not to be used for determining property lines or for location or placing additional improvements.

Job No. HO-G112



This is to certify that to the best of my knowledge and belief the improvements indicated hereon are located as shown.

Note: no title research furnished to or done by this company.



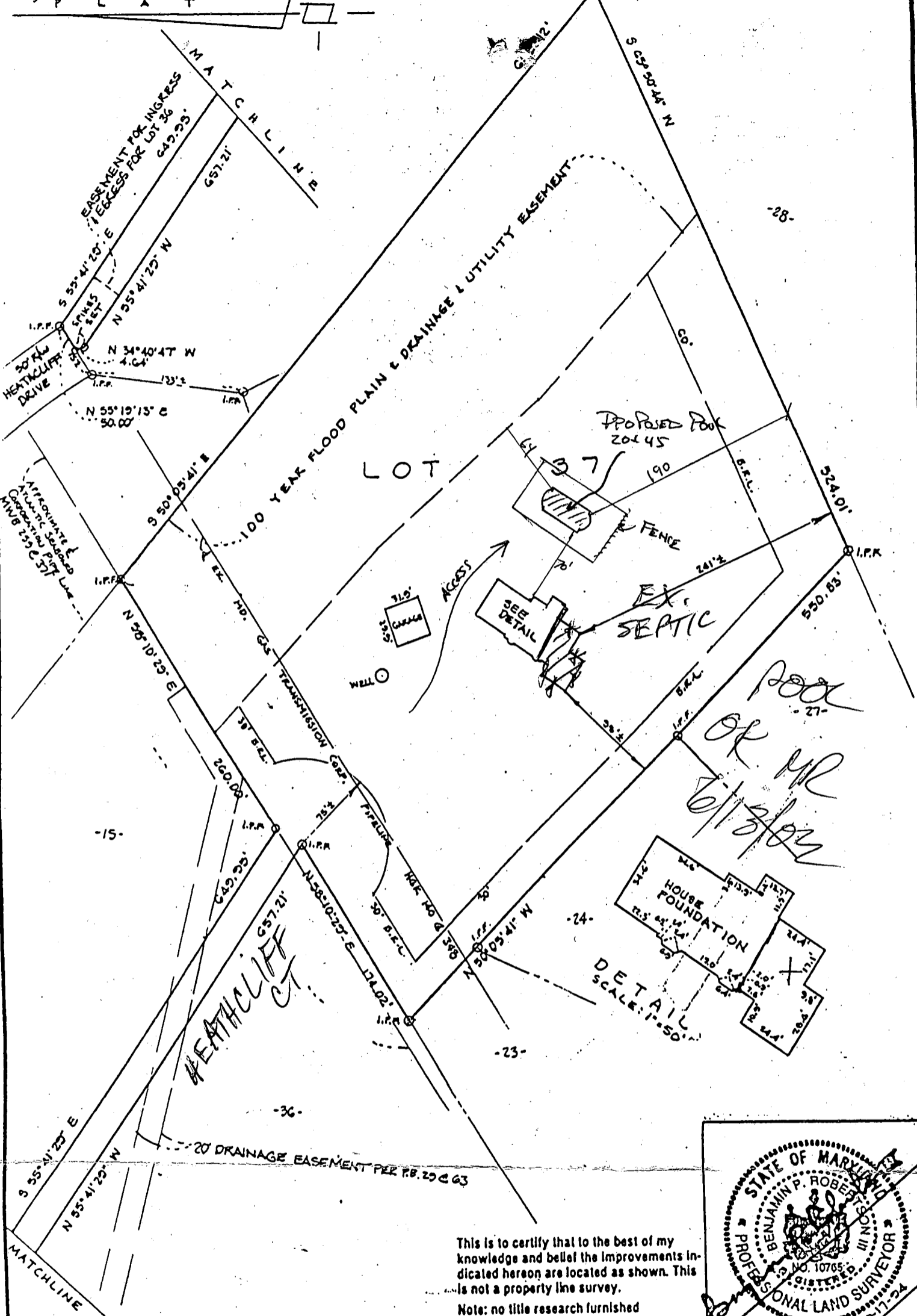
P 50590
A33546

RECORDED IN: PLAT - CMP No 5966

WALL CHECK
LOT 37 BLOCK F SECTION 11
WOODMARK
HOWARD COUNTY, MARYLAND

RDA
REAL ESTATE DEVELOPMENT TECHNOLOGY ASSOCIATES INC.
 ENGINEERS • LAND PLANNERS • LAND SURVEYORS
 15207A MARLBORO PIKE • FORD OFFICE BUILDING
 UPPER MARLBORO, MARYLAND 20772
 PHONE (301) 827-3100

This survey is made for house location purposes only, and is not to be used for determining property lines or for location of placing additional improvements. The existence of property corner markers is not guaranteed by this survey.



This is to certify that to the best of my knowledge and belief the improvements indicated hereon are located as shown. This is not a property line survey.

Note: no title research furnished to or done by this company.



RECORDED IN: PLAT - CMP No 5966

WALL CHECK
LOT 37 BLOCK F SECTION 11
WOODMARK
HOWARD COUNTY, MARYLAND
For: DOUG CHAMBERLAIN

Scale: 1"=100'

RDA
 REAL ESTATE DEVELOPMENT TECHNOLOGY ASSOCIATES INC.
 ENGINEERS • LAND PLANNERS • LAND SURVEYORS
 15207A MARLBORO PIKE • FORD OFFICE BUILDING
 UPPER MARLBORO, MARYLAND 20772
 PHONE (301) 627-3100

BO036897

Building Address 12235 Heathcliff Ct.
Ellicott City MD 21042

Suite/Apt. #: _____ SDP/WP/Petition #: _____

Census Tract 603000 Subdivision Woodma LK

Section 11 Area _____ Lot 37

Tax Map 23 Parcel 109 Grid 7

Zoning RR Map Coordinates _____ Lot size _____

Property Owner's Name Doug & Stephanie Chamberlain

Address 12235 Heathcliff Ct

City Ellicott City State MD Zip Code 21042

Home Phone 410 203 2460 Work Phone _____

Applicant's Name & Mailing Address, (if other than stated hereon):

Rowan Landscape Co Inc.

8671 Reservoir Road Fulton MD 20759

Phone 301 206 9150 Fax 301 206 3260

Existing Use Single Family Home

Proposed Use Inground, swimming pool

Estimated Construction Cost \$ 20,000.00

Description of Work 200 sq ft inground, swimming

pool 20'x45' / 3'x8' deep.

Filled with water by truck.

Contractor Company Rowan Landscape Co Inc

Contact Person Kari Rowan

Address 8671 Reservoir Rd

City Fulton State MD Zip Code 20759

License No. CTR03729

Phone 301 206 9150 Fax 301 206 3260

Occupant or Tenant Doug and Stephanie Chamberlain

Contact Name _____

Address 12235 Heathcliff Ct

City Ellicott City State MD Zip Code 21042

Phone 410 203 2460 Fax 410 203 2461

Engineer or Architect Company Rowan Landscape Co.

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics

Utilities

Height: _____
No. of stories: _____
Gross area, sq. ft. per floor: _____
Use group: _____
Construction type:
 Reinforced Concrete
 Structural Steel
 Masonry
 Wood Frame
 State Certified Modular

Water Supply:
 Public
 Private
Sewage Disposal:
 Public
 Private
Electric Yes No
Gas Yes No
Heating System:
Electric Oil
Natural Gas
Propane Gas
Sprinkler system: N/A
 Full
 Partial
 Other Suppression
 # of Heads

Building Characteristics

Utilities

SF Dwelling SF Townhouse
Depth _____ Width _____
1st floor: _____
2nd floor: _____
Basement: _____
Finished Basement Unfinished Basement
Crawl space Slab on Grade
No. of Bedrooms _____
Multi-family dwellings:
No. of efficiency units: _____
No. of 1 BR units: _____
No. of 2 BR units: _____
No. of 3 BR units: _____
Other Structure: _____
Dimensions: _____
Footings: _____
Roof: _____
 State Certified Modular
 Manufactured Home

Water Supply:
 Public
 Private
Sewage Disposal:
 Public
 Private
Electric Yes No
Gas Yes No
Heating System:
Electric Oil
Natural Gas
Propane Gas
Sprinkler system: N/A
 NFPA #13D
 NFPA #13R
 Other:

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE HERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature _____
President - (Rowan Landscape Co)
Title/Company _____

Print Name Timothy M. Rowan
6/13/02
Date _____

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**

**** PLEASE WRITE NEATLY AND LEGIBLY. ****

- FOR OFFICE USE ONLY -

AGENCY: Land Development, DPZ DATE: _____ SIGNATURE APPROVAL: _____ DPZ SETBACK INFORMATION: _____ PROPERTY ID#: 9361

MP 6/13/02