

5/22/90 ASAP
5/23/90 noon
12/5/90 10AM

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

P 45794
A 31110
DISTRICT 4th

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

04-348877

DATE 04/18/90

DATE SYSTEM APPROVED 12/7/90

INSPECTOR C. B. D.

INDEXED

Walter W. King Plumbing Contractors, Inc. IS PERMITTED TO INSTALL ALTER

ADDRESS 5305 King's Court, Frederick, Maryland 21701 PHONE 1-301-662-6990

SUBDIVISION Ellerslie Estates ROAD 3107 Ellerslie Court LOT 13

PROPERTY OWNER Pulte Homes

ADDRESS _____

* PUMPED SEPTIC SYSTEMS: INSTALL 1000 GALLON PUMP PIT WITH ALTERNATING EFFLUENT PUMPS AND ALARMS.

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 210 sq. ft. per bedroom. Trench to be 3 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 5.5 feet below original grade. Effective area begins at 4 feet below original grade. 1.5 feet of stone below distribution pipe.

LOCATION - Start the first trench 90 ft. off the rear (545.41') lot line and 90 ft. off the left lot line as seen when facing the lot from Ellerslie Ct. Run trenches on contour toward the left front of lot.

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

PLANS APPROVED BY Sid Abel cm DATE 05/23/89

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

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 DRAIN 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 FROM GRADE IT MUST BE APPROVED

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES 5504 80014778-SUNROOM

BUILDING PERMIT SIGNED AND RETURNED

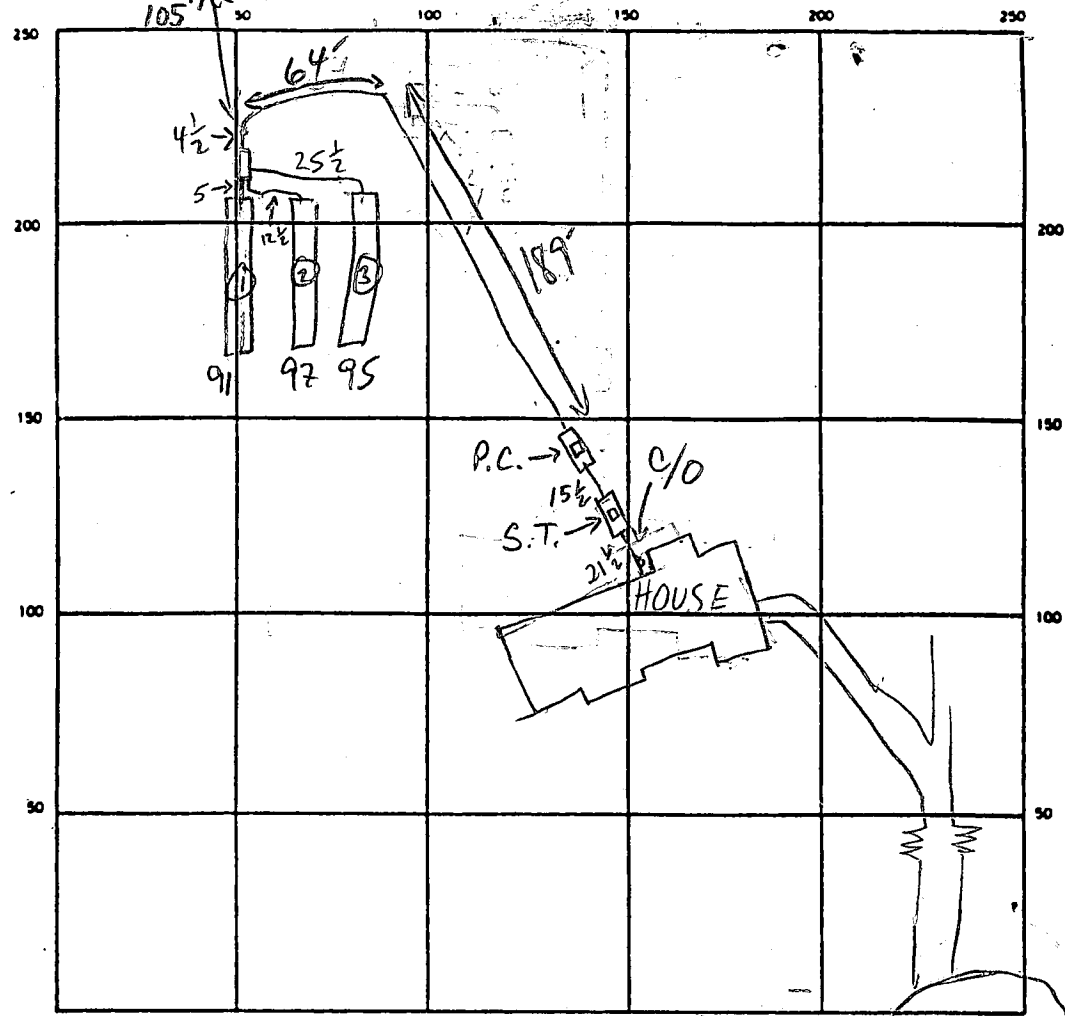
OLD PERMIT MOVES AND RETURNED 32202 800134949 GARAGE

3110

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

well HO-88-0500



ELLERSLIE CT

SEPTIC TANK LEVEL 1000 GAL PUMP CH. 1250 GAL S.T. CLEANOUTS IN LINE - OK
S.T. & P.C. - MANHOLE - OK

DISTRIBUTION BOX LEVEL _____

DRAIN FIELD/TILE FIELD DEPTH 5.5-6 FT TRENCH WIDTH 3 FT INLET DEPTH 4 FT

EFFECTIVE GRAVEL DEPTH 1 1/2 FT TOTAL LENGTH (1) 91 (2) 97 (3) 95 FT

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA (1) 273 (2) 291 (3) 285 SQ FT

DRYWELL INSIDE DIAMETER _____ FT EFFECTIVE DEPTH BELOW INLET _____ FT

ABSORBENT AREA 849 SQ FT

REMARKS 5/22/90 OK TO STONE TRENCHES, COVER ALL EXC.
TRENCH ENDS MR
5/23/90 OK TO COVER ALL EXC. PUMPS REQUIRE CO.
12/5/90 NO APPROVAL - PUMPS NOT OPERATING MR
12/7/90 PUMPS + SWITCHES ARE OK TOX (2) OF Mr. Kiniss Men.
+ SUPERINTENDENT OF PULTE, present at vent of distributory lines
inspected - Found left side of PULTE

DATE SYSTEM APPROVED 12/2/90 INSPECTOR Charles Benjamin

C1 2337 SEQUENCE NO. (DENV USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND WELL COMPLETION REPORT
 FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
 COUNTY NUMBER **A-3110**

DATE Received [] DATE WELL COMPLETED **060689** Depth of Well **340** (TO NEAREST FOOT) PERMIT NO. FROM "PERMIT TO DRILL WELL" **HO-EX-0500**

OWNER **KONEN DEVELOPMENT** last name **SILVER** first name **CLAY** TOWN **CLANWON**
 STREET OR RFD **SILVER CT** SUBDIVISION **SILVER** SECTION **13** LOT **13**

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 | |
| Top Soil | 0 | 1 | |
| RED CLAY | 1 | 6 | |
| BRN MICA | 6 | 90 | L |
| GREEN MICA | 90 | 140 | L |
| Blue MICA | 140 | 160 | |
| BRN MICA | 160 | 165 | L |
| Blue MICA | 165 | 370 | |

GROUTING RECORD
 WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**
 TYPE OF GROUTING MATERIAL
 CEMENT **CM** BENTONITE CLAY **BC**
 NO. OF BAGS **82** NO. OF POUNDS **3300**
 GALLONS OF WATER **165**
 DEPTH OF GROUT SEAL (to nearest foot) from **0** ft. to **87** ft.
 (enter 0 if from surface)

CASING RECORD
 casing types insert appropriate code below
ST **CO** **PL** **OT**
 STEEL CONCRETE PLASTIC OTHER
 MAIN CASING TYPE **ST** Nominal diameter top (main) casing (nearest inch) **6** Total depth of main casing (nearest foot) **101**

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 OPEN HOLE PLASTIC OTHER

C2

| EACH CASING SCREEN | DEPTH (nearest ft.) | |
|--------------------|---|---|
| | 1 | 2 |
| 1 | HO 101 | 340 |
| 2 | [] [] [] [] [] [] [] [] [] [] | [] [] [] [] [] [] [] [] [] [] |
| 3 | [] [] [] [] [] [] [] [] [] [] | [] [] [] [] [] [] [] [] [] [] |

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 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. **411**
 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) **Glenn R. Jones**
 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

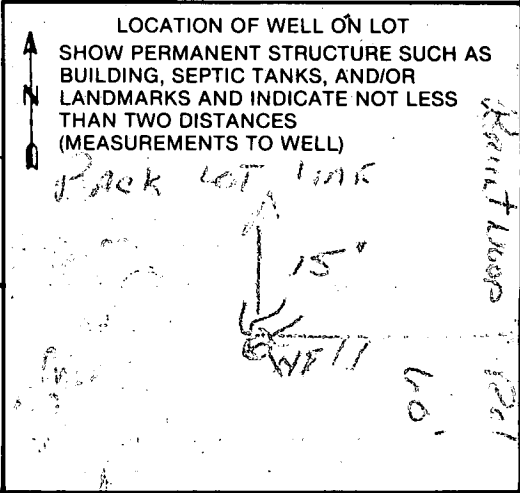
GRAVEL PACK [] from [] to []
 IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68 **68**

TELESCOPE CASING T **70** (E.R.O.S.) **72** W.Q. **74** **75** **76**
LOG INDICATOR **OTHER DATA**

C3

PUMPING TEST
 HOURS PUMPED (nearest hour) **3**
 PUMPING RATE (gal. per min. to nearest gal.) **8**
 METHOD USED TO MEASURE PUMPING RATE **Bucket**
 WATER LEVEL (distance from land surface) BEFORE PUMPING **21** WHEN PUMPING **110**
 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: **29**
 CAPACITY: GALLONS PER MINUTE (to nearest gallon) [] [] [] [] [] [] [] [] [] []
 PUMP HORSE POWER [] [] [] [] [] [] [] [] [] []
 PUMP COLUMN LENGTH (nearest ft.) [] [] [] [] [] [] [] [] [] []
 CASING HEIGHT (circle appropriate box and enter casing height) **+** above } LAND SURFACE **2** (nearest foot) **-** below }



Pre

APPLICATION

A 31110

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P.O. BOX 476 ELLICOTT, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT FOURTH

DATE JANUARY 19, 1981

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 ~~MR. WILLIAM MITCHELL~~ *Pulse Home Corp*

ADDRESS 13071 TRIADELPHIA ROAD, ELLICOTT CITY, MD. 21043 PHONE 988-9207

PROPERTY LOCATION:

SUBDIVISION ROSEBAR *Ellenslie Est* LOT NO. ~~10~~ 11

*Lot 13
HOLD FOR
PRE SK
Plot 2
5/15/81
5/15/81*

ROAD AND DESCRIPTION NORTHWESTERLY CORNER AT THE INTERSECTION OF BURNTWOODS ROAD AND HOBBS ROAD.

13107 Ellenslie Ct.

SIZE OF LOT 3 Ac. +- TYPE BLDG. SINGLE FAMILY

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.

SIGNATURE OF APPLICANT *Charles J. ...*

APPROVED BY *[Signature]* FOR *Stanley ...* DATE *5-23-81*

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

BUDG. PERMIT SIGNED
AND RETURNED *8/11/81 - 3/10/90*
Serial #29152-37397
concrete entrance
manhole

PERMIT SIGNED
AND RETURNED *6-9-81*
SAL BP26036

THIS IS NOT A PERMIT

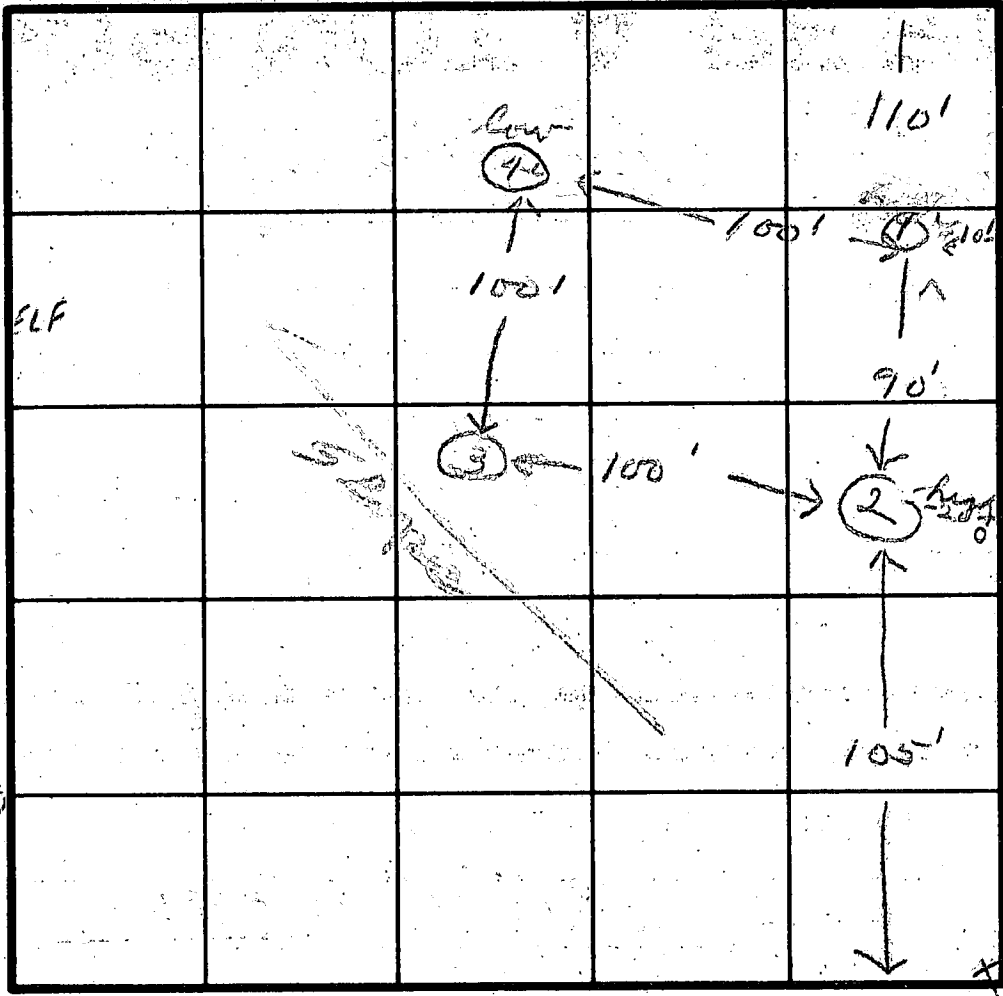
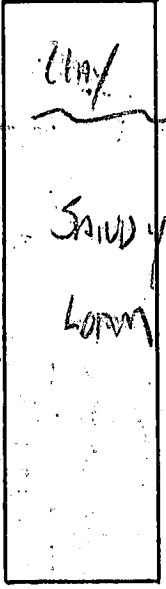
10 stake

11

H O A B S
RD

11 stake
12
13

SOIL PROFILE



LOT
Half of
10 & 11

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Burntwood Rd

| DATE | TEST NO. | DEPTH | PRE-WET | | TEST - 1' DROP | | TIME |
|---------|----------|-------|---------|-------|----------------|-------|------|
| | | | START | STOP | START | STOP | |
| 1/29/81 | 1S | 4 | 9:52 | 9:57 | 9:57 | 10:04 | 7 |
| | 1M | 9 | 9:52 | 10:00 | 10:00 | 10:05 | 5 |
| | 1DV | 13 | | | | | |
| | 2S | 4 1/2 | 10:05 | 10:08 | 10:08 | 10:15 | 7 |
| | 2M | 8 1/2 | 10:05 | 10:08 | 10:08 | 10:12 | 4 |
| | 2DV | 13 | | | | | |
| | 3S | 3 1/2 | 10:10 | 10:13 | 10:13 | 10:15 | 2 |
| | 3M | 7 1/2 | 10:10 | 10:12 | 10:12 | 10:16 | 4 |
| | 3DV | 13 | | | | | |
| | 4S | 3 1/2 | 10:16 | 10:20 | 10:20 | 10:27 | 7 |
| | 4M | 8 1/2 | 10:16 | 10:18 | 10:18 | 10:25 | 7 |
| | 4DV | 13 | | | | | |
| | | | | | | | |
| | | | | | | | |

REMARKS _____

TYPE OF SOIL _____

TESTED BY SK + JS ALSO PRESENT Fryck

APPLICATION

Prel

A 31110

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

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

DISTRICT FOURTH

DATE JANUARY 19, 1981

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 MR. WILLIAM MITCHELL

ADDRESS 13071 TRIADELPHIA ROAD, ELLICOTT CITY, MD. 21043 PHONE 988-9207

PROPERTY LOCATION:

SUBDIVISION ROSEBAR

LOT NO. 10 New 11

ROAD AND DESCRIPTION NORTHWESTERLY CORNER AT THE INTERSECTION OF BURNTWOODS ROAD AND HOBBS ROAD.

SIZE OF LOT 3 Ac. +-

TYPE BLDG. SINGLE FAMILY

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.

SIGNATURE OF APPLICANT Charles J. Crowder

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

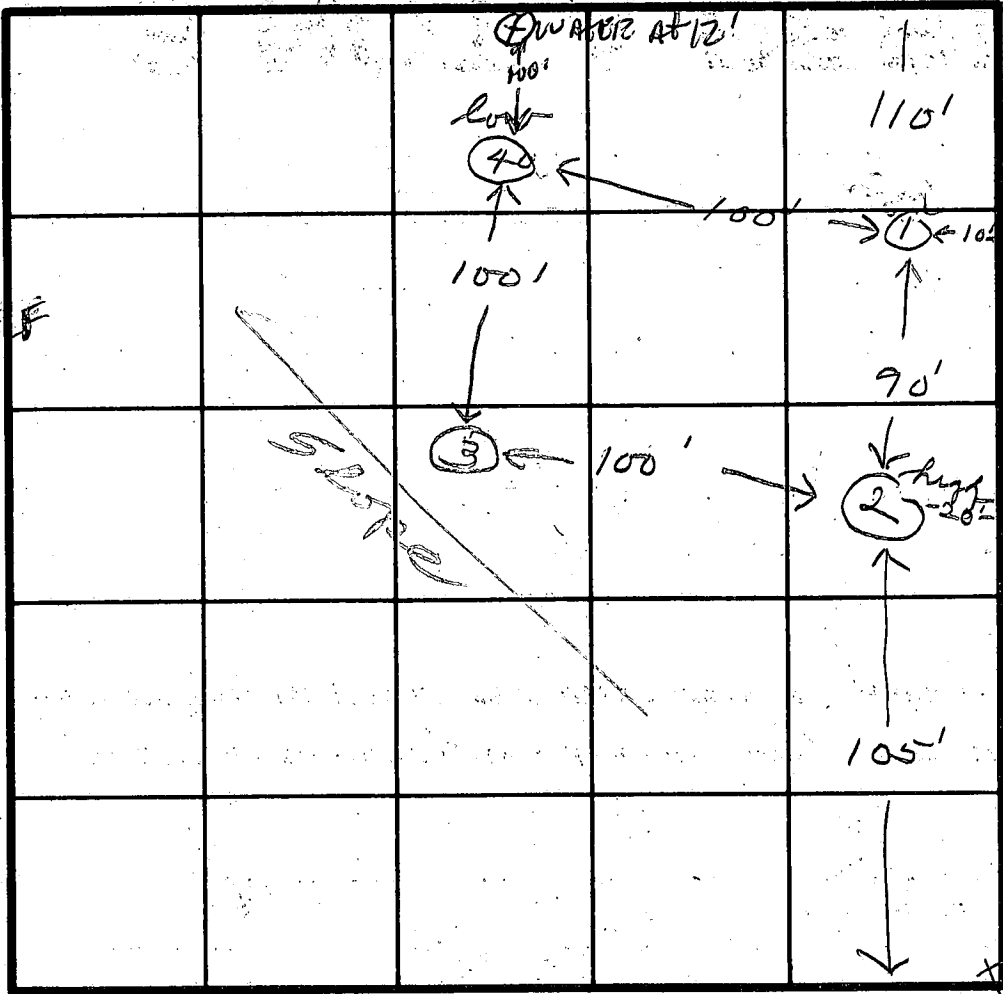
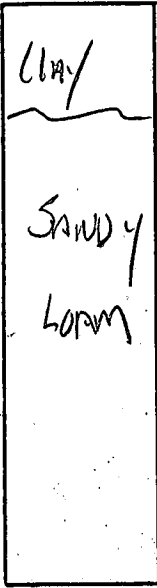
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

1/2 stake
11

SOIL PROFILE



Lot
Half 10 & 11

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Burntwood Rd

| DATE | TEST NO. | DEPTH | PRE-WET | | TEST - 1" DROP | | TIME |
|---------|----------|-------|---------|-------|----------------|-------|------|
| | | | START | STOP | START | STOP | |
| 1/29/81 | 1S | 4 | 9:52 | 9:57 | 9:57 | 10:04 | 7 |
| | 1M | 9 | 9:52 | 10:00 | 10:00 | 10:05 | 5 |
| | 1DV | 13 | | | | | |
| | 2S | 4 1/2 | 10:05 | 10:08 | 10:08 | 10:15 | 7 |
| | 2M | 8 1/2 | 10:05 | 10:08 | 10:08 | 10:12 | 4 |
| | 2DV | 13 | | | | | |
| | 3S | 3 1/2 | 10:10 | 10:13 | 10:13 | 10:15 | 2 |
| | 3M | 7 1/2 | 10:10 | 10:12 | 10:12 | 10:16 | 4 |
| | 3DV | 13 | | | | | |
| | 4S | 3 1/2 | 10:16 | 10:20 | 10:20 | 10:27 | 7 |
| | 4M | 8 1/2 | 10:16 | 10:18 | 10:18 | 10:25 | 7 |
| | 4DV | 13 | | | | | |
| 3/17/81 | 5⊗ | 12 | WATER | | | | |

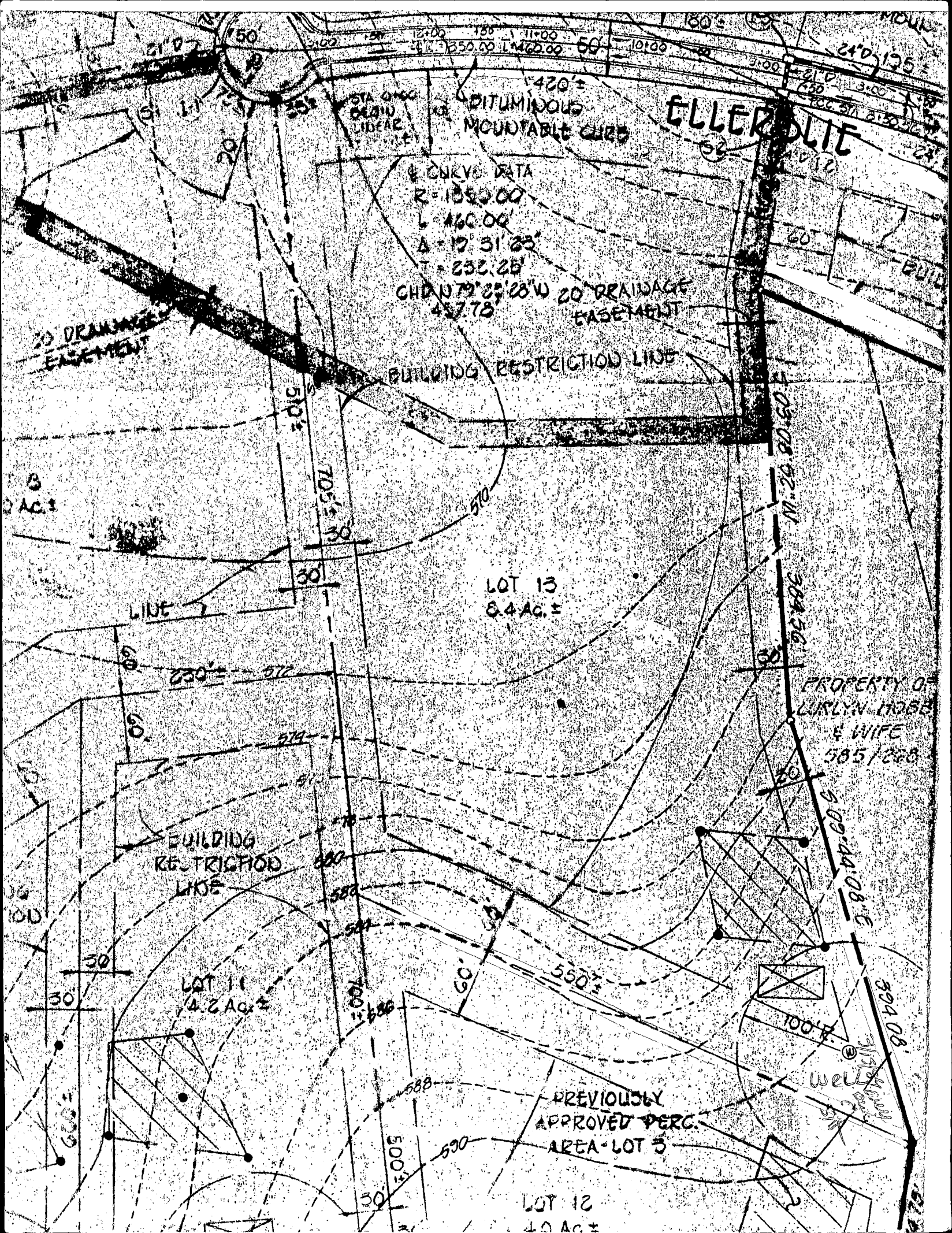
inlet
4'
Not 10'
E=5'
Dry Well
+
Travel

REMARKS _____

TYPE OF SOIL _____

TESTED BY *SK + JS* ALSO PRESENT *Frycob*

3/17/81 JR



ELLERDIE

BITUMINOUS MOUNTABLE CURB

CURVE DATA
R=1350.00
L=1460.00
A=17°31'23"

CHD N 79° 23' 23" W 20' DRAINAGE EASEMENT
457.78

BUILDING RESTRICTION LINE

20' DRAINAGE EASEMENT

LOT 13
8.4 AC. ±

LOT 11
4.2 AC. ±

LOT 12
4.0 AC. ±

PROPERTY OF
LURLYN MOSE
& WIFE
585/268

PREVIOUSLY
APPROVED PERC.
AREA - LOT 3

WELL

3
AC. ±

LINE

324.08

1405.08
52.2 W

382.51
92.58 E

509.44
08.5 E

100.7

505.5

705.5

30

230.5

572

574

580

582

584

586

588

500.5

60

550.5

590

30

60

BUILD

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5/24/90

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 # 45808
Date 04/20/90

Name of Installer W.W.King Plbg. & Htg. Contr., Inc.

Telephone 1-301-662-6990

License Number 2217

Certified Well Pump Installer Well Driller Registered Plumber

Name of Property Owner Pulte Homes

Telephone 1-301-681-5800

Subdivision Ellerslie Est/Glen Manor Lot # 13 Well Tag # HO - 88 - 0500

Site Address 3107 Ellerslie

Pump

- Type
 - Deep well jet
 - Shallow well jet
 - Submersible
- Make Goulds
- Model # 5ES07422
- Capacity 5 GPM
- Pump exceeds well capacity Yes No
- If Yes, is low pressure cutoff switch installed? Yes No
- What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors Cable guards Other

Motor

- Horsepower 3/4
- RPM 3500
- Voltage
 - 110
 - 220

Pitless Adapter

- Make Martinson
- Model # BP-10X
- Depth 42" min
60" max

Tank

- Capacity 80
- Pressure relief valve? yes

Piping

- Type plastic 160#
- Size 1"
- NSF and/or BOCA Code approved
- Depth of supply line 42" min
60" max

Well data

- Depth 240 ft.
- Yield 8 GPM
- Static water level ft.
- Will water supply be disinfected by installer? yes

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).

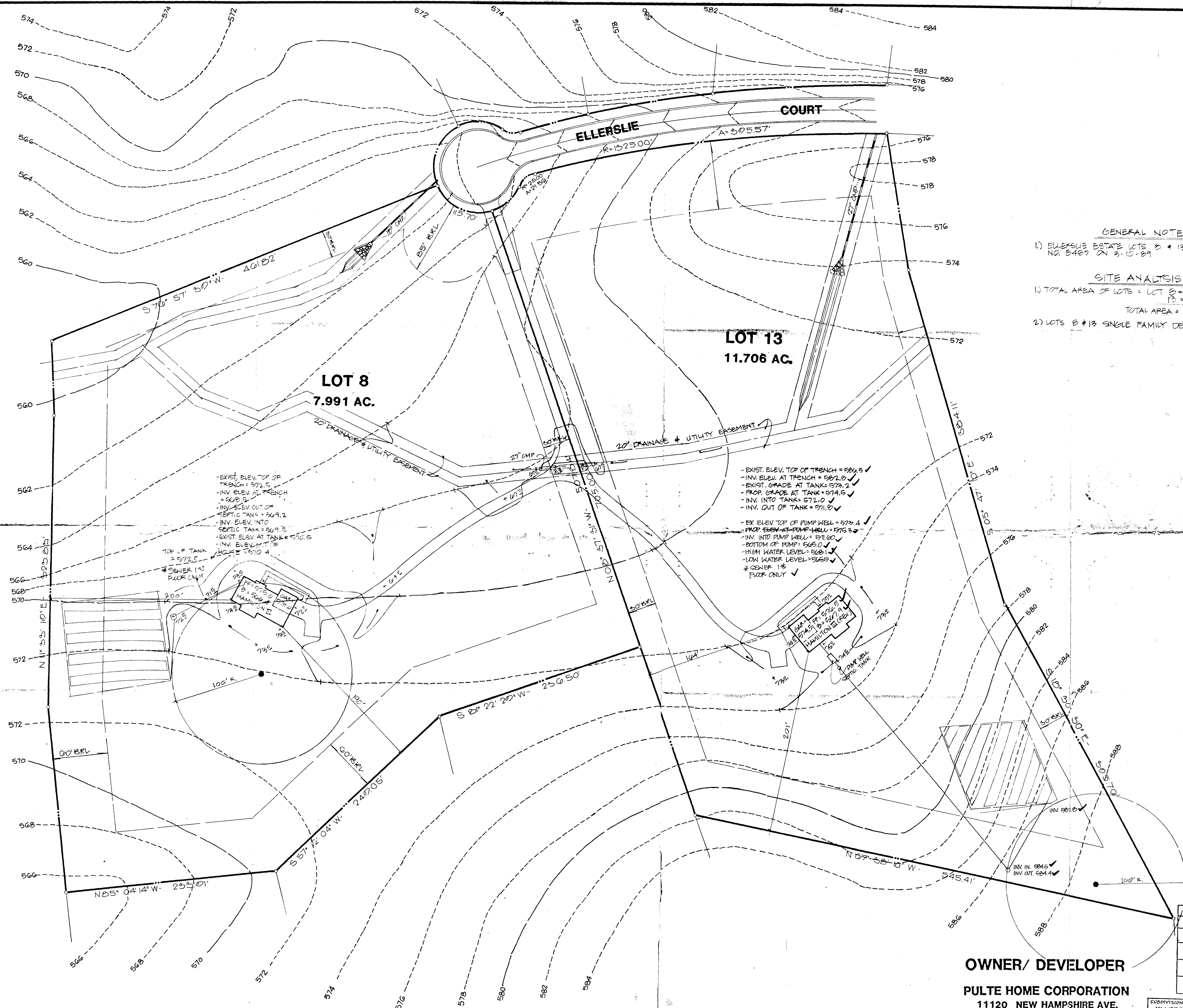
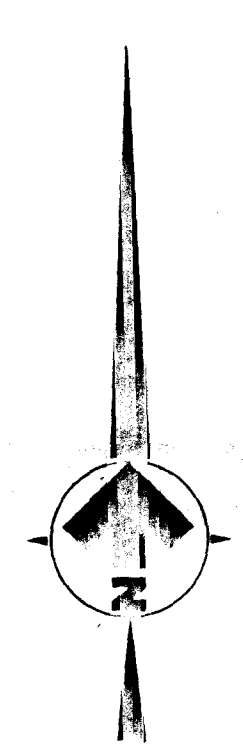
All information given above is true to the best of my knowledge.

Pitless adapter casing, cap, and well head
OK. BDA 5-24-90

Signature of Applicant: Walter W. King

Date: 4-17-90

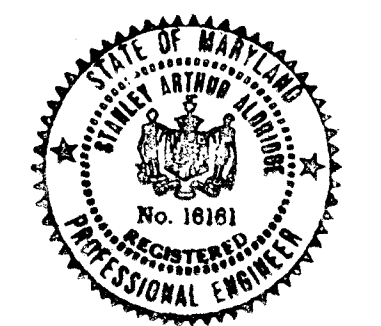
Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.



RPd 7/13/89
 SML
 Amendment to #26036
 Horizontal movement.

THIS PRINT MADE BY
 JUN 20 1989
 ASSOCIATES, INC.

CERTIFIED CORRECT



How. Ordway 5/19/89

| ADDRESS CHART | |
|---------------|----------------------|
| LOT NO. | STREET ADDRESS |
| 8 | 2113 ELLERSLIE COURT |
| 13 | 2107 ELLERSLIE COURT |

OWNER/ DEVELOPER
PULTE HOME CORPORATION
 11120 NEW HAMPSHIRE AVE.
 SILVER SPRING, MARYLAND 20904
 (301) 681-5800

| | | | |
|------------------|-------------------|------------|---------------------------|
| SUBDIVISION NAME | ELLERSLIE ESTATES | SECT./AREA | LOT/PKCEL# |
| PLAT # OR U/P | BOOK # | TAX/ZONE | W/P/BLK. DIST. CENSUS TR. |
| WATER CODE | SEWER CODE | 14 | 45 |

| | |
|---------|----------|
| DESIGN | T S K |
| DRAFT | T S K |
| CHECKED | J E B |
| DATE | 5-18-89 |
| SCALE | 1" = 50' |

| | | | |
|-----|---------------------------------------|---------|-------|
| NO. | REVISION | DATE | BY |
| 1 | REV. LOT 13 + 8 AS PER PLATE COMMENTS | 6/12/89 | T S K |
| 2 | REV. LOT 13 TO CORRECT PLAT DESIGN | 6/14/89 | T S K |
| 3 | REV. D.M. CURVET BETWEEN LOTS 8 + 13 | 6/22/89 | J E B |

ASSOCIATES, INC.
 ENGINEERS • PLANNERS • SURVEYORS
 9200 WIGHTMAN ROAD SUITE 400
 GAITHERSBURG, MARYLAND 20879
 301-950-0525 • Wash. 948-9439

PLOT PLAN
ELLERSLIE ESTATES
 4th. ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND

(E)

PROPOSED
STAIR ELEV. 571.00
PROCEDURE
STAIR ELEV. 571.00
SELECT BACKFILL
TYPE

LOT 13
11.706 AC.

APPROVED SITE PLAN
WALK-THRU BUILDING PERMIT
BP# BUD14778 A# 3111007
APR, SAN 8 DATE 5/5/04
DESC. OF WORK:

Sun room add, Fin

MANAGE + UTILITY
SECTION

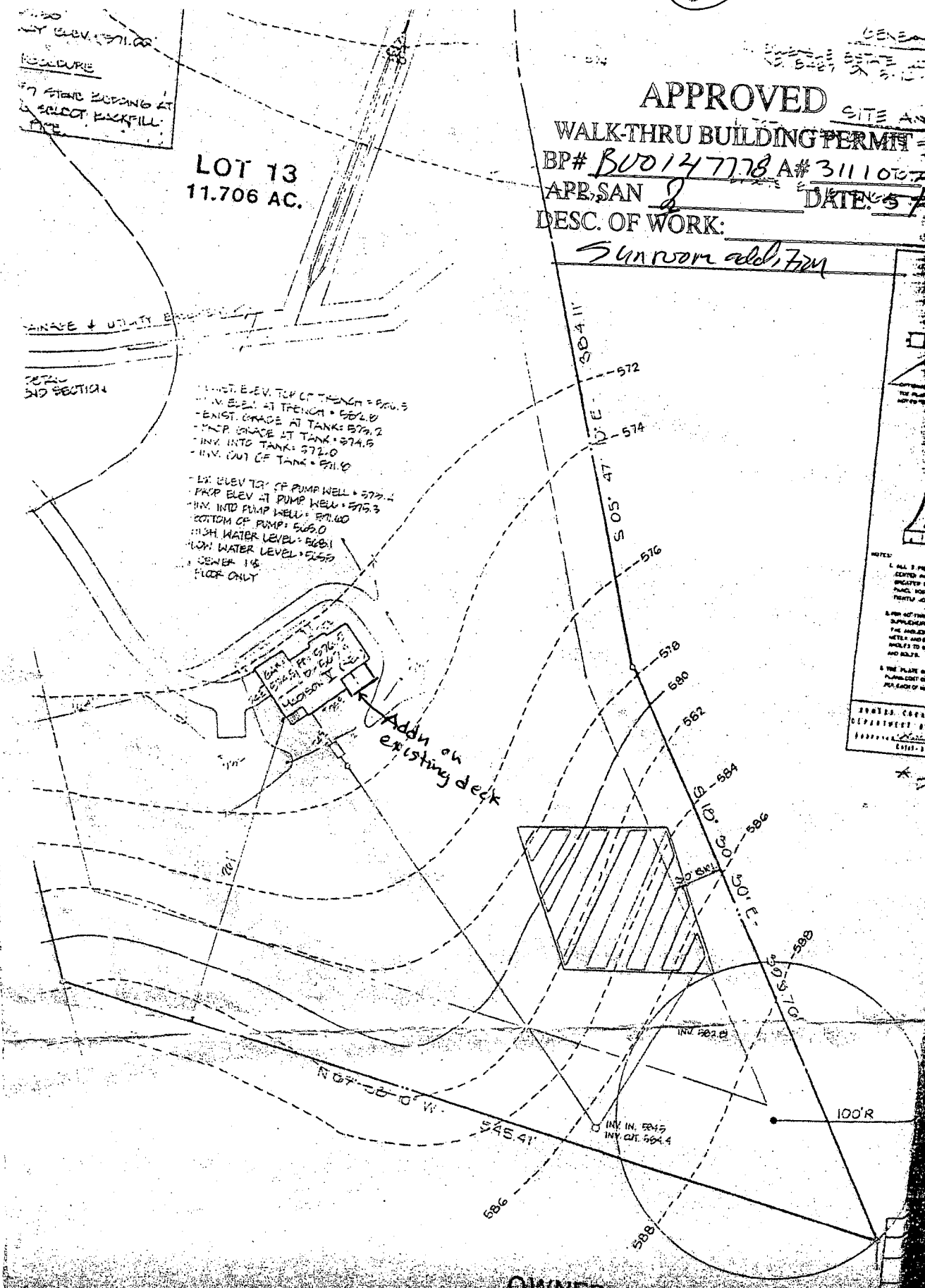
INVERT ELEV. TOP OF TRENCH = 566.5
INVERT ELEV. AT TRENCH = 566.0
EXIST. GRADE AT TANK = 574.2
INSP. GRADE AT TANK = 574.5
INVERT INTO TANK = 572.0
INVERT OUT OF TANK = 571.0

EX. ELEV. TOP OF PUMP WELL = 572.4
PROP. ELEV. AT PUMP WELL = 575.3
INVERT INTO PUMP WELL = 571.00
BOTTOM OF PUMP = 569.0
HIGH WATER LEVEL = 568.1
LOW WATER LEVEL = 565.0
SEWER 14"
FLOOR ONLY

*Add on
existing deck*

NOTES:
1. ALL DIMENSIONS
SHOWN ARE
UNLESS NOTED
OTHERWISE
2. ALL DIMENSIONS
SHOWN ARE
UNLESS NOTED
OTHERWISE
3. THE PLAN ON
PAGE 2 OF 2
IS THE FINAL
DATE: 5/5/04

APPROVED BY
DEPARTMENT OF
PUBLIC WORKS
DATE: 5/5/04



OWNER