

4/9/90 PM
5/9/90 AM

House connection REC'D

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

04-343334

P 45755

A 31878

DISTRICT 4th

DATE 3/29/90

DATE SYSTEM APPROVED 5/25/90

INSPECTOR R/H

INDEXED

Allen's Equipment Rental IS PERMITTED TO INSTALL ALTER

ADDRESS 15050 Carr's Mill Road, Woodbine, Maryland 21797 PHONE 854-6561

SUBDIVISION Tim Dowd Property ROAD 15530 Carr's Mill Road LOT 1

PROPERTY OWNER Mr. James Mullins

ADDRESS

~~IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 60% AND ABSORPTION AREA BY 25%~~

GARBAGE GRINDER YES NO

SEPTIC TANK CAPACITY 1000 GALLONS NUMBER OF BEDROOMS 3

TRENCHES - 220 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 9 feet below original grade. Effective area begins at 4 feet below original grade. 5 feet of stone below distribution pipe.

LOCATION - Place the distribution box 115' from the rear lot line and 65' from the right lot line as seen when facing the property from Carr's Mill Road. Run trenches along contour toward right side of property.

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

PLANS APPROVED BY Craig Williams cm DATE 03/29/90

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

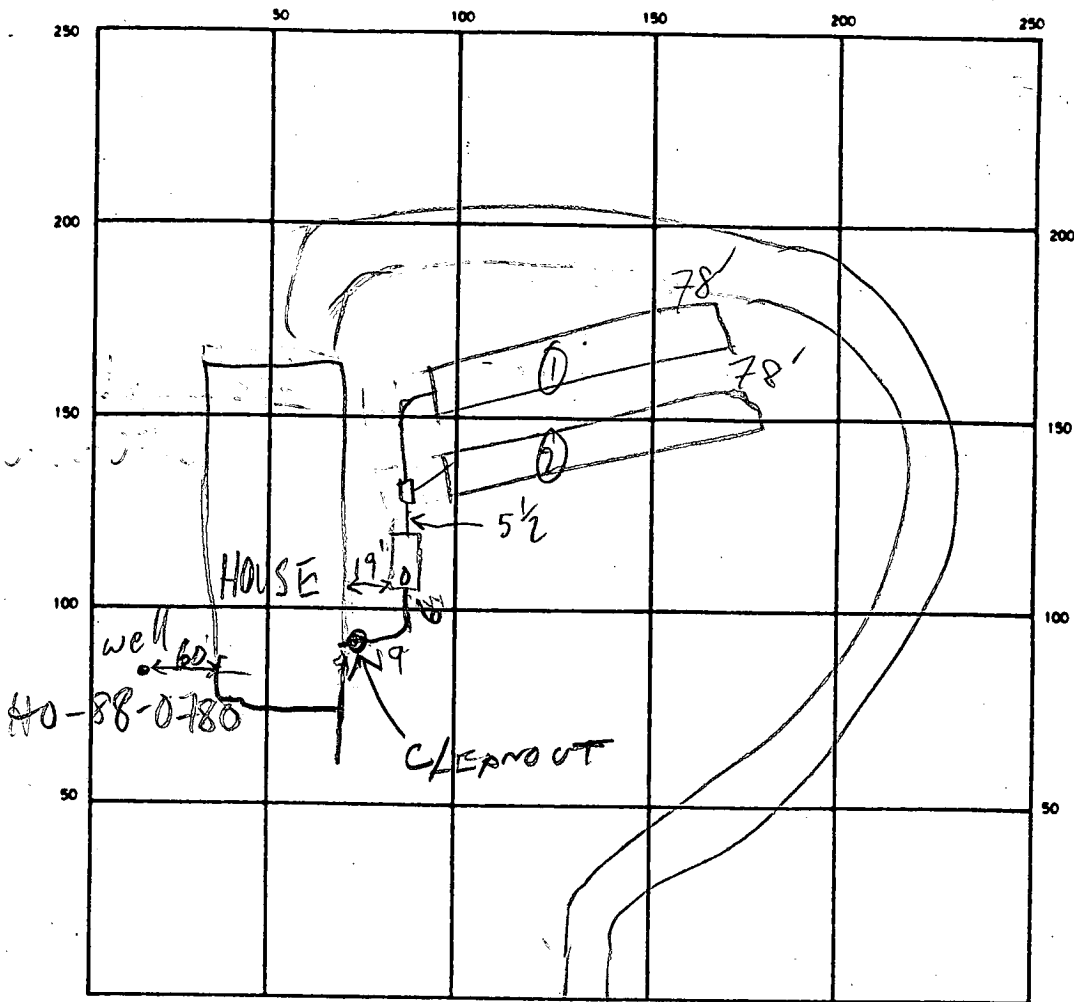
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

A 31878



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

CARR'S MILL RD

SEPTIC TANK. LEVEL 1000 GAL - OK CLEANOUTS OK

DISTRIBUTION BOX. LEVEL OK - BAFFLE IN

DRAIN FIELD/TILE FIELD. DEPTH 9 FT. TRENCH WIDTH 2 FT. INLET DEPTH 4 FT.

EFFECTIVE GRAVEL DEPTH 5 FT. TOTAL LENGTH ① 78
② 78 FT.
NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA ① 390
② 390 SQ. FT.

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

ABSORBENT AREA 780 SQ. FT.

REMARKS 4/10/90#1 OK TO STONE TRENCHES & COVER MIDDLES;
TRENCHES NOT PER SEPTIC LAYOUT DIAGRAM - CONTOURS
SHIFTED TO RIGHT IN DIAGRAM MR 4/10/90#2 OK TO
COVER TRENCHES. REMAINDER OF WORK IN A FEW WKS. MR
5/9/90 OK TO COVER S.T. & DB - NO HOUSE CONN MR
5/25/90 HOUSE SEWER OK RIL

DATE SYSTEM APPROVED 5/25/90

INSPECTOR Raymond Hodges

PRELIMINARY

APPLICATION

31878

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

P. O. BOX 473 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT 4th

DATE 4/15/82

A _____
P _____

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 Tim Dowd

ADDRESS 15535 Carr's Mill Road, Woodbine, Md. 21797 PHONE 854-6651

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 1

ROAD AND DESCRIPTION Carr's Mill Road

SIZE OF LOT 3 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.

R. Timothy Dowd
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

TIM DOWD
LOT 1 CARRSMILL RD

218.42

HOLE ELEVATION

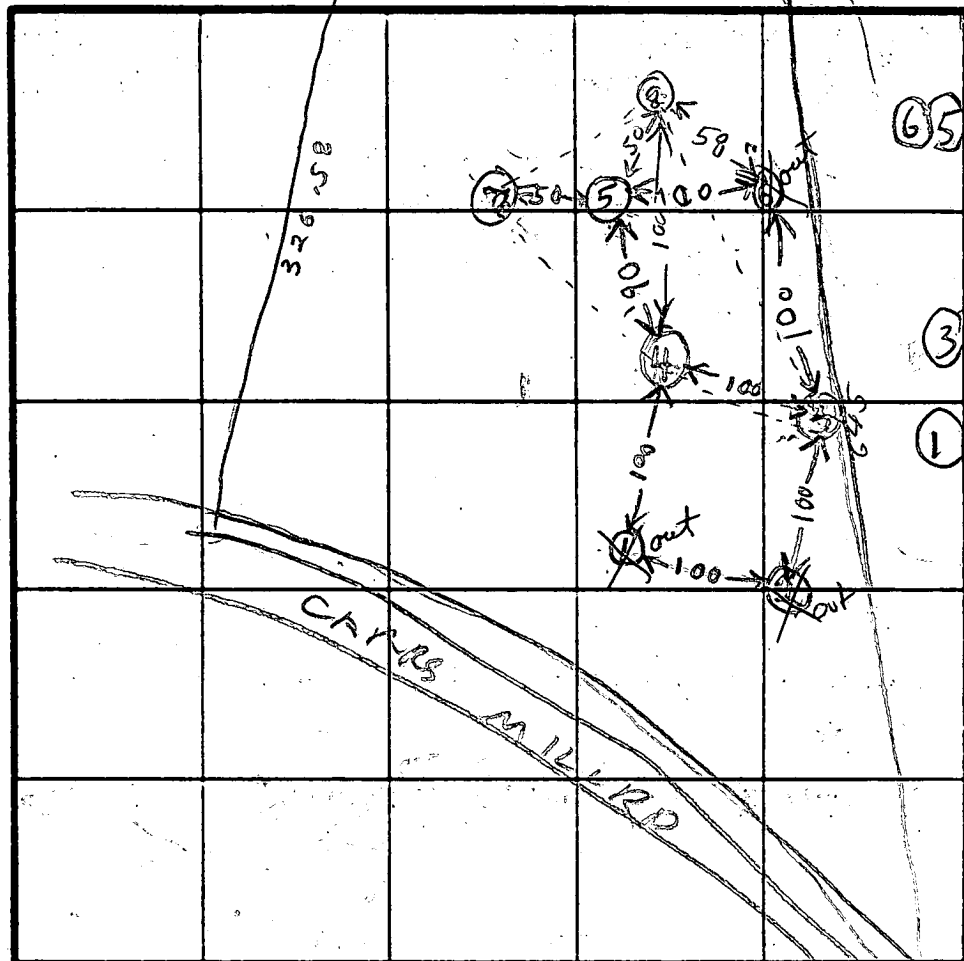
65-78 HIGH

USE ② FOR DRYWELL

③ ④ = MEDIUM

① ② = LOW

SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
5/3/82	1V	7	TOP	5 FT	CLAY	5 FT	FROM GRADE	X
	2V	12	WATER		ALL CLAY	11 FT	FROM GRADE	X
	3-5	4	1054	1101	1101	1120	19	
	3-D	8	1057	1101	1101	1115	14	
	3V	12	TOP	4 FT	CLAY			OK
	4-5	5	1128	1133	1133	1152	17	
	4-D	9	1127	1139	1139	1147	8	OK
	4V	12	TOP	3 FT	CLAY			
	5-5	5	1155	1203	1203	1216	13	
	5-D	9 1/2	1155	1201	1201	1208	7	OK
	5V	11 1/2	TOP	3 FT	CLAY			
	6V	10	TOP	7 FT	CLAY		TRAPPED WATER	
	7-5	4	156	159	159	203	4	
	7V	12	TOP 3 FT	CLAY	TOP	9 FT	SANDY	
	8-5	4 1/2	229	238	238	257	9	

5/3/82 8V 12 TOP 3 FT CLAY BOTTOM 9 FT SANDY

TYPE OF SOIL: P&M 11/82 OK use ③ ④ ⑤ ⑥ ⑦ ⑧ at 10,000 ft area F&S.

TESTED BY: B. DODGES

ALSO PRESENT: BOENNER CO DOWD H S IRK

SEND COPY TO BOENNER.

EHI 12 1079

PRELIMINARY

APPLICATION

A 31879
P _____

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

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

DISTRICT 4th

DATE 4/15/82

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 Tim Dowd

ADDRESS 15535 Carr's Mill Road, Woodbine, Md. 21797 PHONE 854-6651

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 2

ROAD AND DESCRIPTION Carr's Mill Road

SIZE OF LOT 3 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.

R. Timothy Dowd
(SIGNATURE OF APPLICANT)

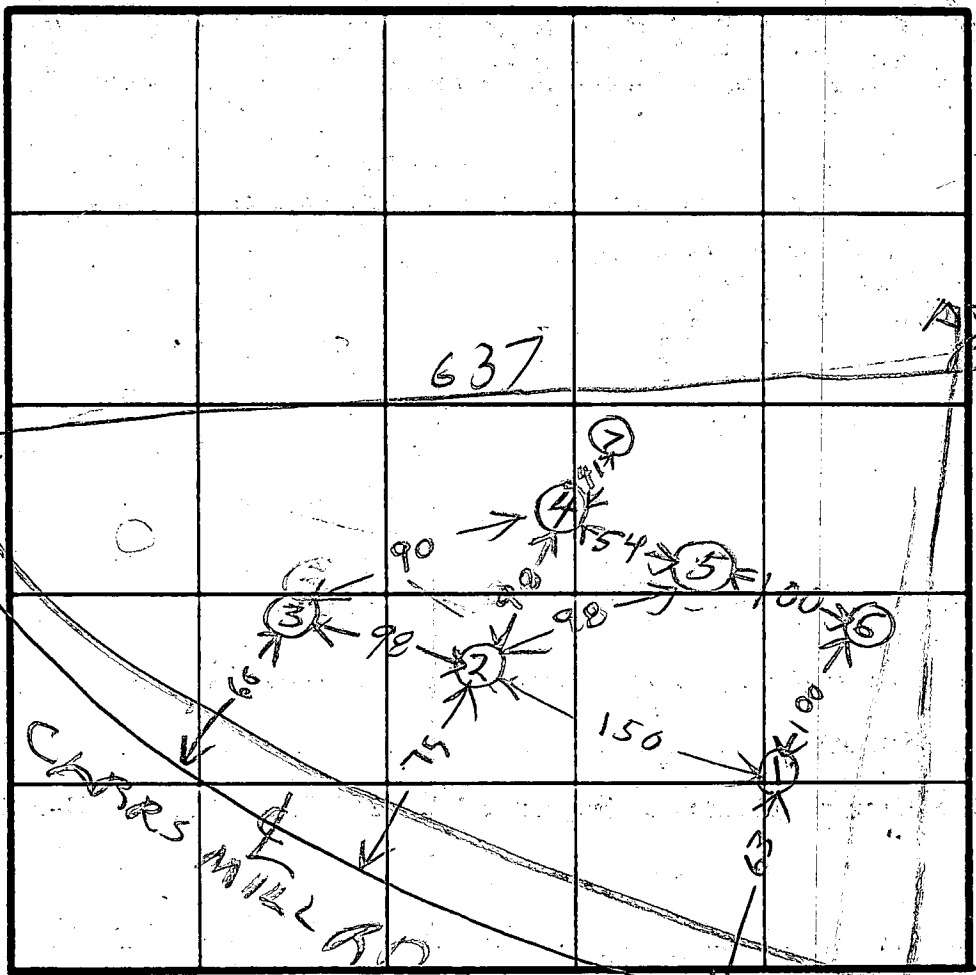
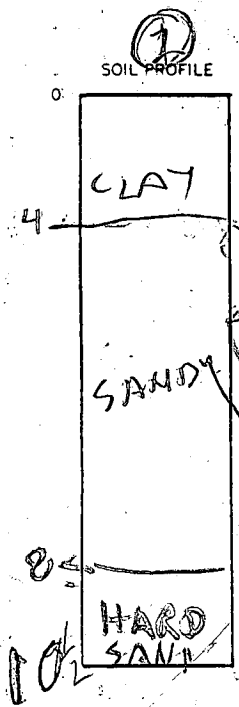
APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

DATE	TEST NO.	DEPTH	PRE-WET		TEST 1' DROP		TIME	
			START	STOP	START	STOP		
6/9/82	1V	9	ALL CLAY WATER @ FT FROM GRADE					X
7/12/82	2	9 1/2	SEE SOIL PROFILE					X
	3 S	8	1055	1001	1001	1109	8	
	3 D	8	1055	1109	1109	1032	23	
	3 V	13	TOP 3 FT CLAY BOT 10 FT CLAY SAND MIX					
	4 V	6	ROCK BOTTOM					
	5 D	10 1/2	1222	1227	1227	1242	15	
	5 S	4 1/2	1123	1230	1230	1240	10	
	5 V	13 1/2	TOP 3 FT CLAY BOT 10 1/2 FT SAND					
	6 V	7	ALL CLAY					X
	7 V	4	ROCK BOTTOM					X
	8 V	4	ROCK BOTTOM					X
7/1/82	2 D	10 1/2	250	310	LITTLE PERC FAIL			

REMARKS

TYPE OF SOIL

TESTED BY R. HODGES

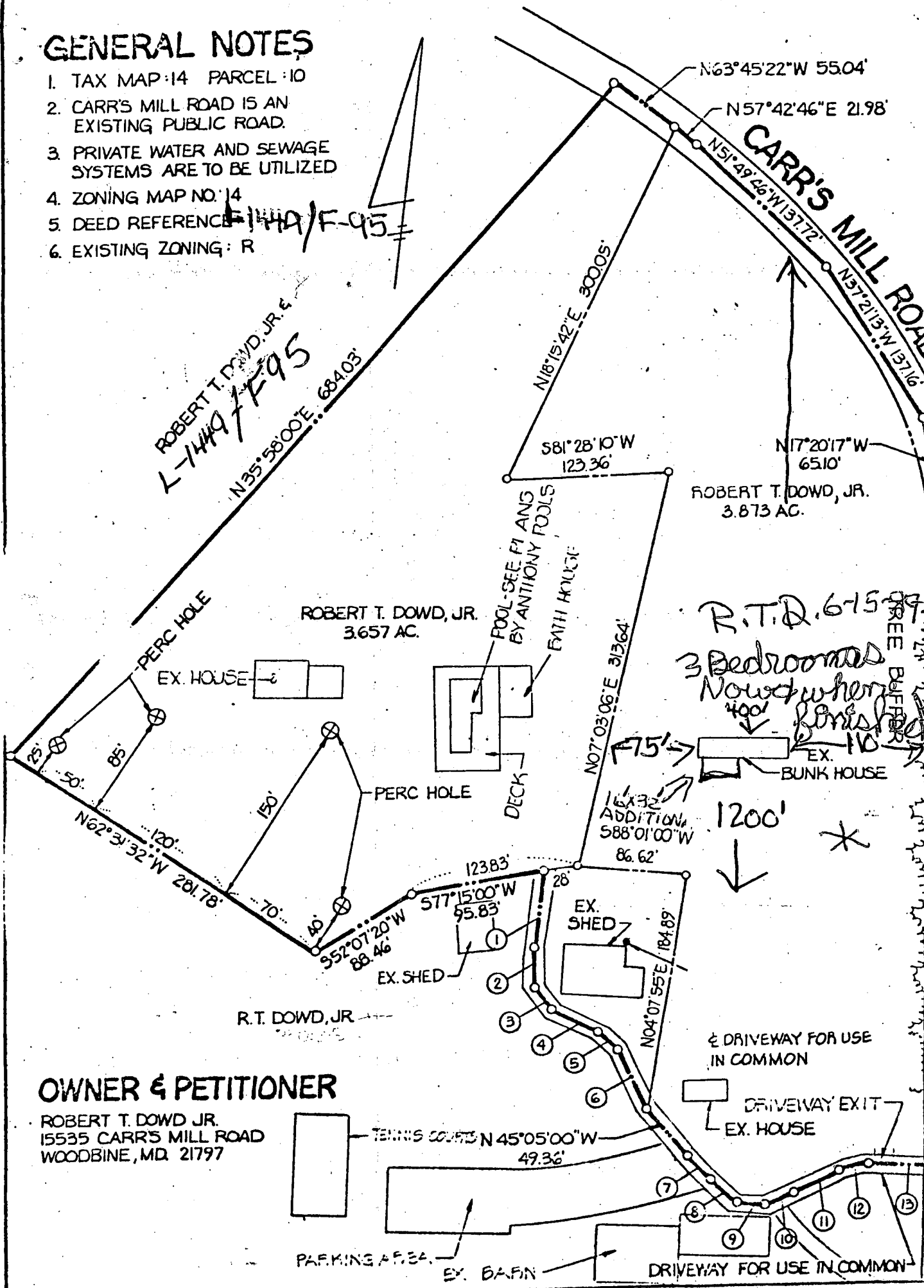
ALSO PRESENT BOENDER LD

FYOCK LD T. DOWD

EH 12 1679

GENERAL NOTES

1. TAX MAP: 14 PARCEL: 10
2. CARR'S MILL ROAD IS AN EXISTING PUBLIC ROAD.
3. PRIVATE WATER AND SEWAGE SYSTEMS ARE TO BE UTILIZED
4. ZONING MAP NO. 14
5. DEED REFERENCE: **L-1449/F-95**
6. EXISTING ZONING: R



ROBERT T. DOWD, JR. &
L-1449/F-95
N35°58'00"E 684.03'

N63°45'22"W 550.4'
N57°42'46"E 21.98'

CARR'S MILL ROAD
N51°49'46"W 137.72'
N37°21'13"W 137.16'

ROBERT T. DOWD, JR.
3.873 AC.

ROBERT T. DOWD, JR.
3.657 AC.

R.T.D. 615-97
3 Bedrooms
Now when finished
400'
EX. BUNK HOUSE

1200'

OWNER & PETITIONER

ROBERT T. DOWD JR.
15535 CARR'S MILL ROAD
WOODBINE, MD. 21797

TENNIS COURTS N 45°05'00"W 49.36'

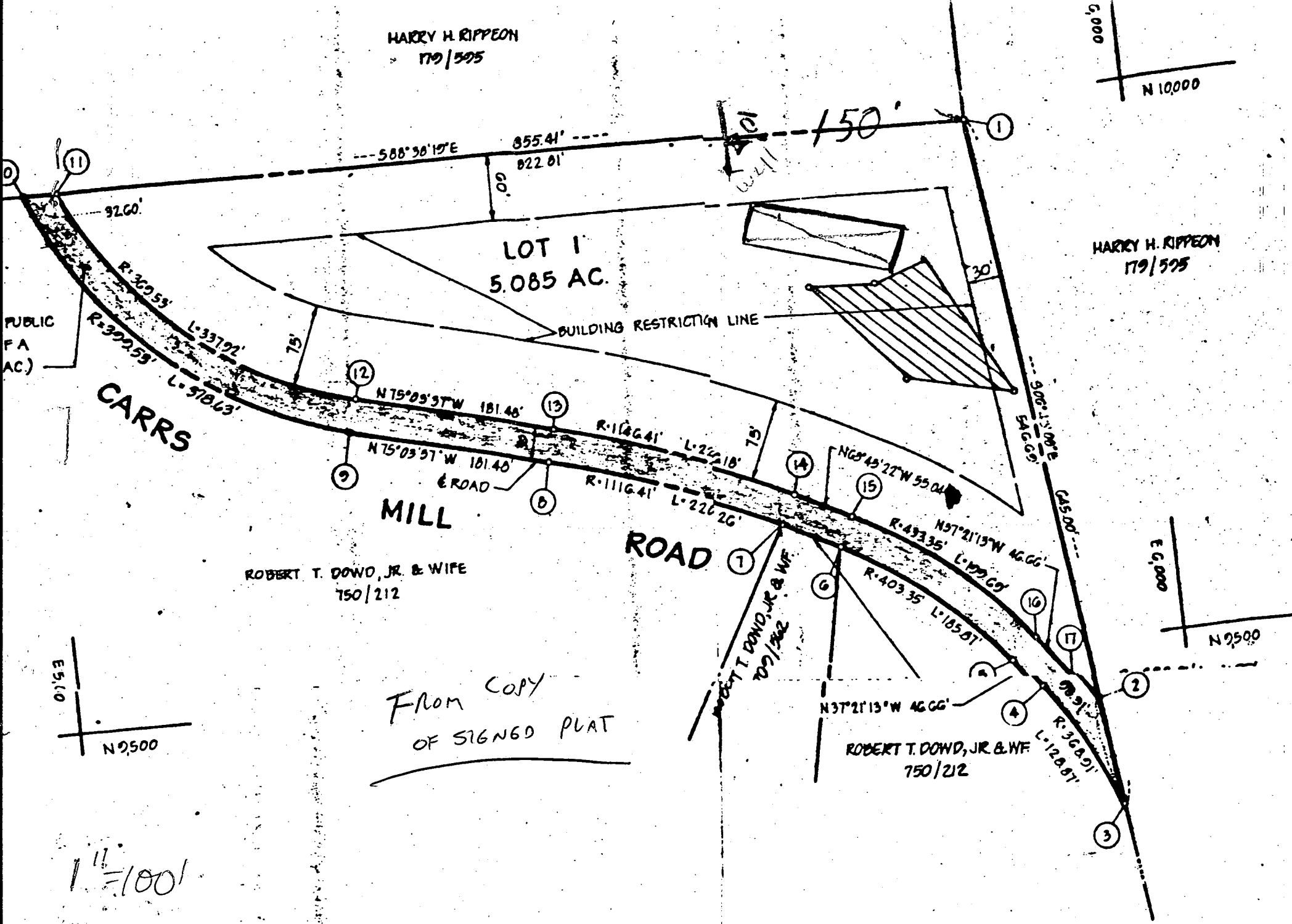
PARKING AREA

EX. BATH

DRIVEWAY FOR USE IN COMMON

HARRY H. RIPPEON
179/595

6,000
N 10,000



LOT 1
5.085 AC.

BUILDING RESTRICTION LINE

CARRS
MILL
ROAD

ROBERT T. DOWD, JR. & WIFE
750/212

HARRY H. RIPPEON
179/595

ROAD

ROBERT T. DOWD, JR. & WIFE
750/212

FROM COPY
OF SIGNED PLAT

E 5,100
N 2,500

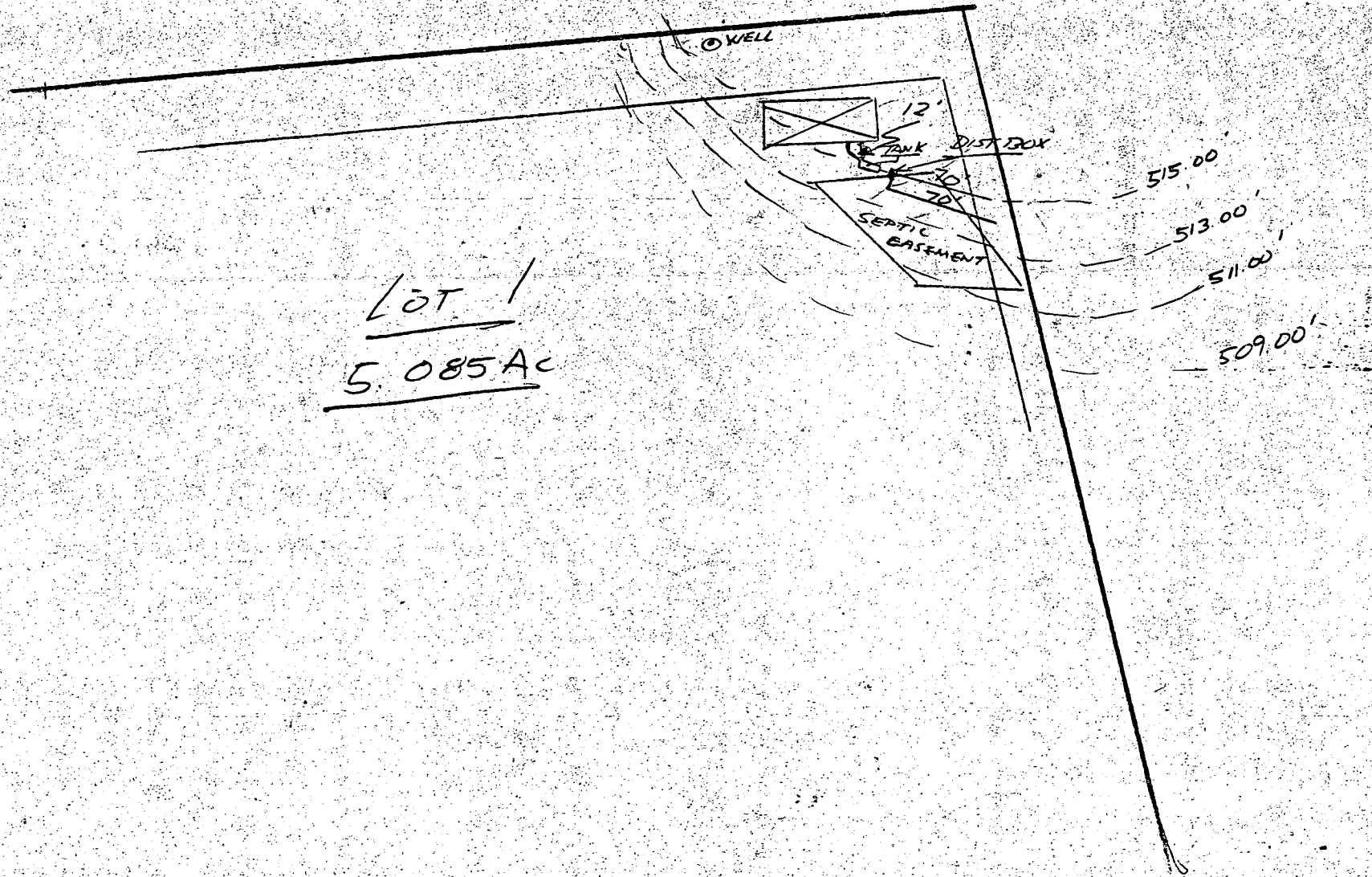
E 6,000
N 2,500

1" = 100'

SEPTIC LAYOUT
DIAGRAM OK

3/29/90

✓
Cullha



LOT 1
5.085 Ac

5-25-90 am

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 MR. BOB WALTZ
PROCESNICK MD

Telephone 662-3588

License Number _____
Certified Well Pump Installer _____ Well Driller _____ Registered Plumber _____

Name of Property Owner James Mullins Telephone _____
Subdivision Tim Dowd Property Lot # 1 Well Tag # 42-88-0780
Site Address 15530 Carrs Mill Road

Pump

- Type
 - Deep well jet _____
 - Shallow well jet _____
 - Submersible _____
- Make _____
- Model # _____
- Capacity _____ 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 _____
- RPM _____
- Voltage _____
 - 110 _____
 - 220 _____

Pitless Adapter

- Make _____
- Model # _____
- Depth _____

Tank

- Capacity _____
- Pressure relief valve? _____

Piping

- Type _____
- Size _____
- NSF and/or BOCA Code approved _____
- Depth of supply line _____

Well data

- Depth _____ ft.
- Yield _____ GPM
- Static water level _____ ft.
- 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: _____

Date: _____

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

HD-215 5/25/90 OK COVER WORK MUST CHECK TO
SEE IF PERMIT TAKEN OUT R. Hodge
ALREADY PAID ON 6/9/90 (EASTER DAY)

B 1 9191

SEQUENCE NO. (DP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

STATE PERMIT NUMBER

40-88-0780

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

please print or type

fill in this form completely

Date Received (APA)

7/3/89

060589

OWNER INFORMATION

HOWARD TIMOTHY

15535 CARRS MILL RD

WOODBRINE MD 21797

B 3

LOCATION OF WELL

6/6/89

HOWARD

40.00

12-44469

8 COUNTY

23 SUBDIVISION

SECTION LOT

LISBON

52 NEAREST TOWN

MILES FROM TOWN (enter 0 if in town) 2 MI

DRILLER INFORMATION

George F. Easterday

40

L. Franklin Easterday, Inc.

77 License No. 00

Firm Name

9265 Brown Church Rd., Mt. Airy

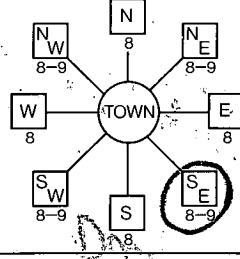
Address

George F. Easterday 6-7-89

Signature Date

B 4

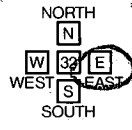
DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



CARRS MILL RD

NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



34 200 37 DISTANCE FROM ROAD

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)

- 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

A 31878

COUNTY NAME

COUNTY NO.

STATE SIGNATURE

INSERT S

DATE ISSUED

06/19/89 Craig William 12/19/89

43 NORTH GRID 538000

48 CO SIGNATURE EAST GRID 0786000

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

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 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)

APPROX. PERMIT NUMBER GAP

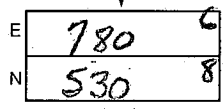
FORCE CW PERMIT No. 40-88-0780

SPECIAL CONDITIONS

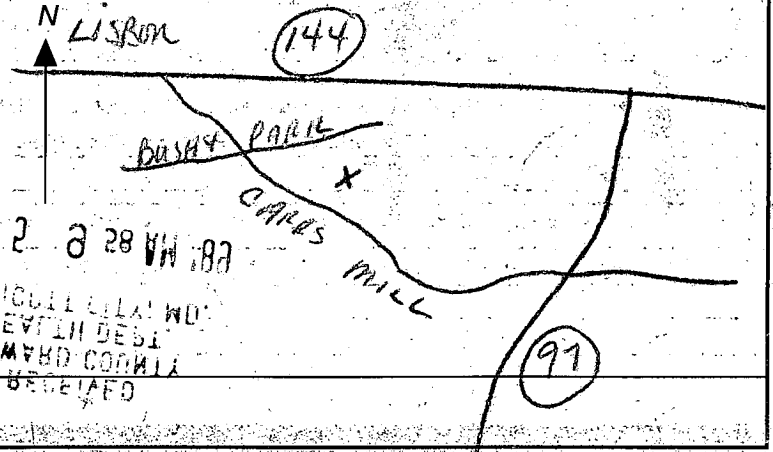
- SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
SOURCES OF DRILLING WATER
1. well
2.
3.

8/2/89 10:00
well not grouted
25 of 12N. X
SAK

WRITE THE BOX NUMBER FROM THE MAP HERE



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



C1 9955

SEQUENCE NO. (DENV USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

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

COUNTY NUMBER

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED

Depth of Well (TO NEAREST FOOT)

PERMIT NO. FROM PERMIT TO DRILL WELL

OWNER STREET OR RD. SUBDIVISION 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 (Use additional sheets if needed), FEET (FROM TO), Check if water bearing. Includes handwritten notes like 'Top soil' and 'Shale'.

GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box)

TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE CLAY BC NO. OF BAGS NO. OF POUNDS GALLONS OF WATER DEPTH OF GROUT SEAL

CASING RECORD casing types insert appropriate code below STEEL CONCRETE PLASTIC OTHER

MAIN CASING TYPE Nominal diameter top (main) casing (nearest inch) Total depth of main casing (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 OPEN BRONZE HOLE PLASTIC OTHER

DEPTH (nearest ft) SLOT SIZE DIAMETER OF SCREEN (NEAREST INCH)

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. TELESCOPE CASING LOG INDICATOR OTHER DATA

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

PUMP INSTALLED DRILLER WILL INSTALL PUMP YES NO (CIRCLE) (YES or 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)

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)

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

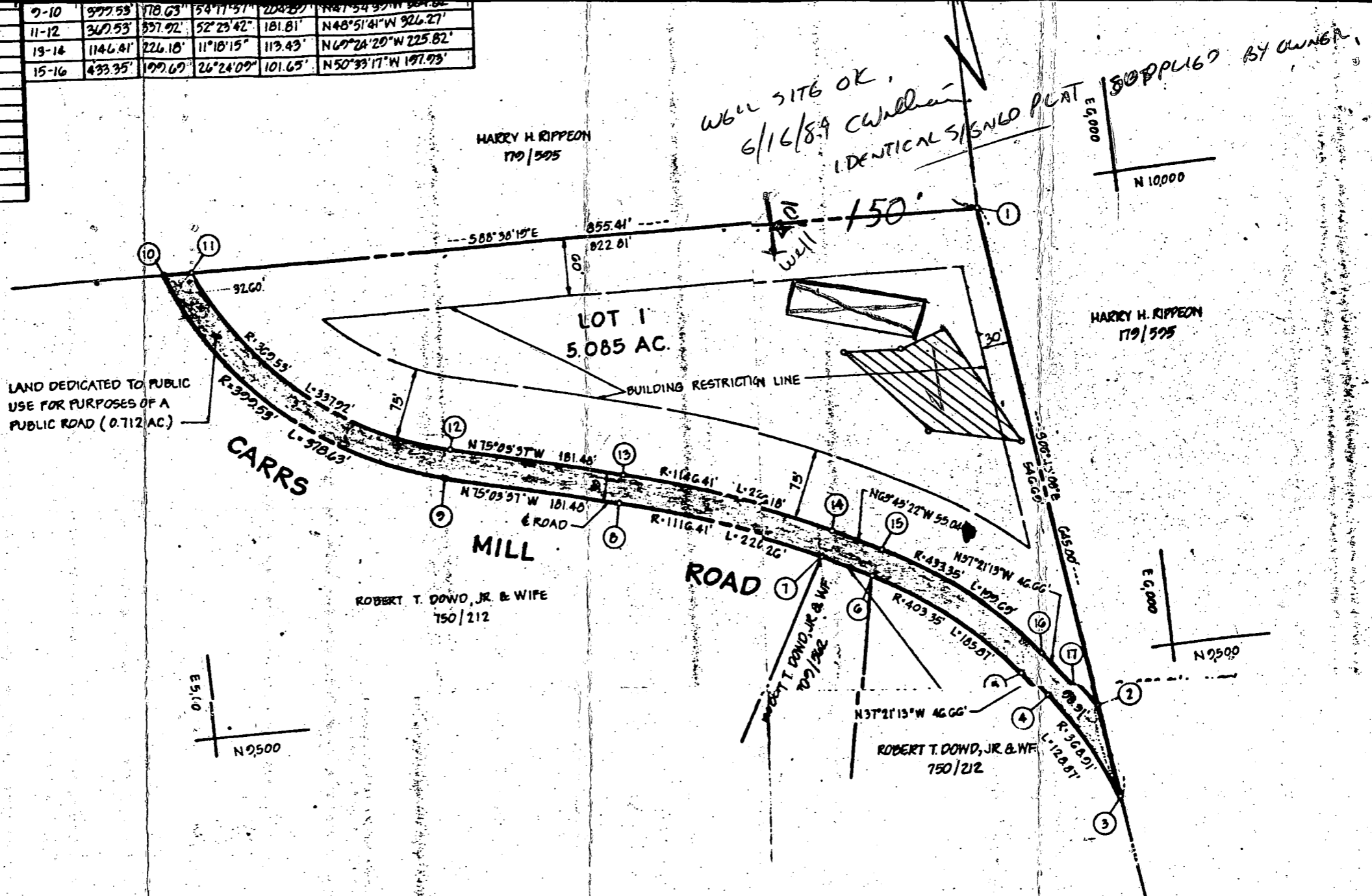
I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS IDENT. NO.

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

763	5043.73	9-10	977.53	178.63	54°11'51"	204.23	N47°54'37"W	304.62
750	5101.169							
668	5691.802	11-12	367.53	337.92	52°23'42"	181.81	N48°51'41"W	926.27
811	5445.940	19-14	1146.81	226.18	11°18'15"	113.43	N67°24'20"W	225.82
597	5210.925	15-16	433.35	177.67	26°24'09"	101.65	N50°33'17"W	197.93
000	5000.000							
224	5032.602							
584	5278.329							
798	5453.675							
376	5665.088							
057	5714.484							
285	5867.287							
195	5895.590							



1. TAX MAPS
2. DEED RECORDS
3. COORDINATE STATE CORNER
4. SUBJECT PROPERTY COMPREHENSIVE
5. THE LOT OWNERS THE MATERIAL
6. AS REQUIRED BY OWNER DISPOSABLE AREA AVAILABLE FOR CONSTRUCTION SHALL BE PUBLIC HAVE THE PRIVATE EASEMENTS
7. ALL PERMITS LOCATED
8. BOUNDARIES BY CLAIM

TABULATIONS

NUMBER OF LOTS: 1
 AREA OF LOTS: 5.085 AC.
 AREA OF RIGHT-OF-WAY DEDICATION: 0.712 AC.
 AREA OF FLOOD PLAIN DEDICATION: NONE
 AREA OF PLAT: 5.797 AC.