

LAYOUT 6/18/02 1:00 INSP 4 _____
 INSP 2 6/18/02 INSP 5 _____
 INSP 3 6/20/02 3:00 INSP 6 _____

ISSUE DATE: 5/22/2002
 APPROVAL DATE: 6/20/02

P 516988
 A 50211-K

PERMIT INDEXED

ON-SITE SEWAGE DISPOSAL SYSTEM HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH

Hatfield's Equipment IS PERMITTED TO INSTALL ALTER

ADDRESS: 13785 Burntwoods Road, Glenelg PHONE NUMBER: 301-854-6172
 SUBDIVISION: Chapel Woods III LOT NUMBER: 36
 ADDRESS: 11750 Chapel Estates Drive PROPERTY OWNER: Williamsburg Group, LLC
 SEPTIC TANK CAPACITY (GALLONS): 1250 OUTLET BAFFLE FILTER REQUIRED
 PUMP CHAMBER CAPACITY (GALLONS): N/A COMPARTMENTED TANK REQUIRED
 NUMBER OF BEDROOMS: 4
 SQUARE FEET PER BEDROOM: 210
 LINEAR FEET OF TRENCH REQUIRED: -280 HOUSE SERVED BY PUBLIC WATER

TRENCHES:	Trench to be 3.0 feet wide. Inlet 2.0 ^{2.0 3} feet below original grade. Bottom maximum depth 5.0 feet below original grade. Effective area begins at 3.0 feet below original grade. 2.0 feet of stone below distribution pipe.
LOCATION:	Place the distribution box 95' from the rear lot line and 120' from the left 251.18' lot line. Run trenches on contour towards the right lot line. Trenches should be 10' center to center.
NOTES:	

PLANS APPROVED: Brian Baker OK SRK 6/18/02 DATE: 3/11/2002

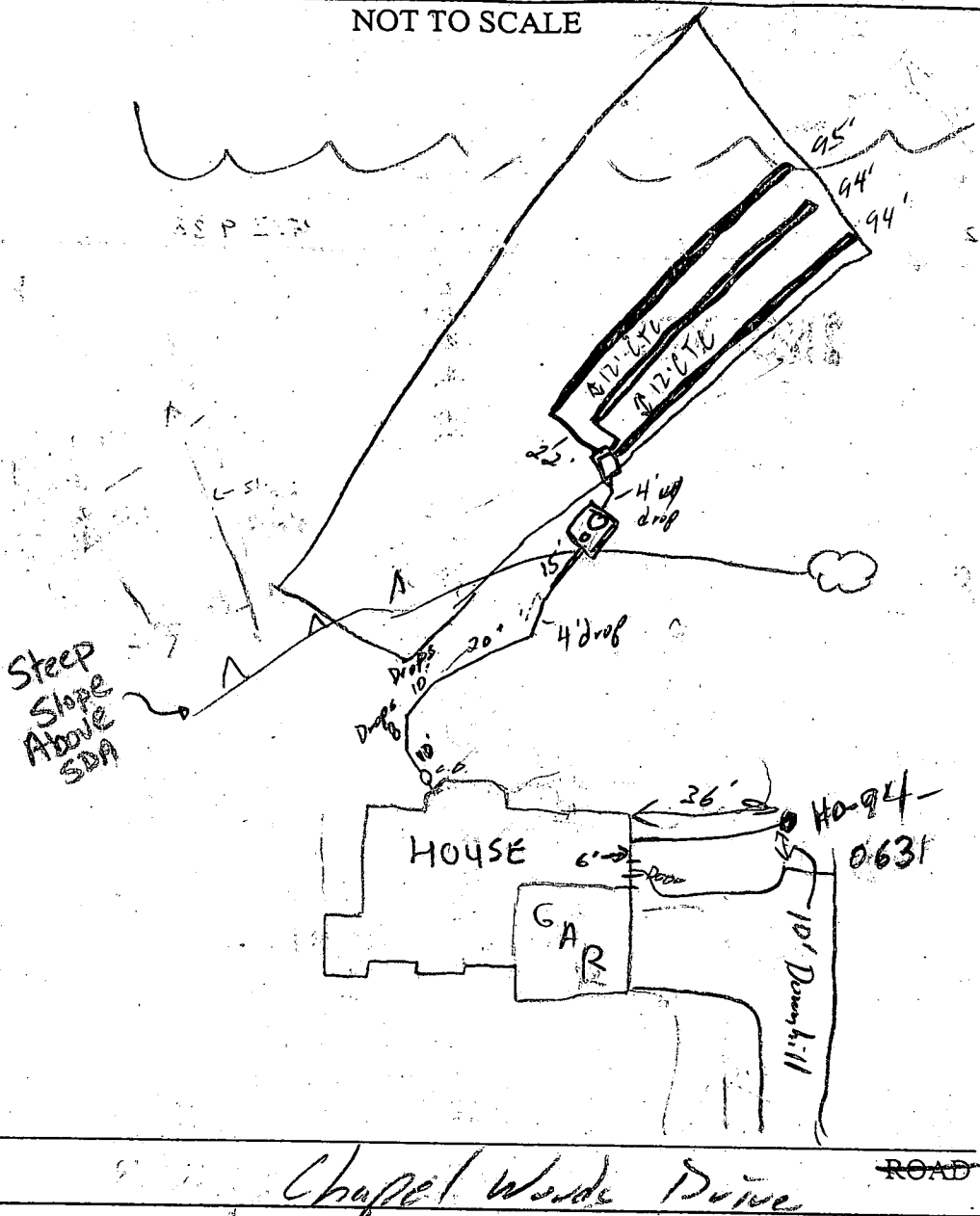
NOTES: PERMIT VOID AFTER 2 YEARS
 CONTRACTOR IS RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
 WATERTIGHT SEPTIC TANKS REQUIRED
 ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL UNLESS SPECIFICALLY AUTHORIZED
 MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS UNLESS SPECIFICALLY AUTHORIZED
 CONTRACTOR RESPONSIBLE FOR COMPLIANCE WITH APPLICABLE REGULATIONS, GUIDELINES AND THE TERMS OF THIS PERMIT

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM PERMITTED RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT
 ALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

BUILDING PERMIT SIGNED AND RETURNED
 3-6-03 800140561-DECK
 9-8-04 800150237-FINISH BASEMENT
 11-17-04 800151184-26 POOL

A50211-K

NOT TO SCALE



TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
<u>3</u>	<u>3</u>	<u>5</u>
NUMBER OF TRENCHES		<u>3</u>
TOTAL LENGTH		<u> </u>
ABSORPTION AREA		<u> </u>
DISTRIBUTION BOX LEVEL		<input checked="" type="checkbox"/>
DISTRIBUTION BOX BAFFLE		<input checked="" type="checkbox"/>
DISTRIBUTION BOX PORT		<u> </u>

SEPTIC TANK DATA	
SEPTIC TANK 1 LEVEL	<input checked="" type="checkbox"/>
CAPACITY	<u>1250</u> GAL
SEAM LOC	<u>Top</u>
TANK LID DEPTH	<u>2-3'</u>
BAFFLES	<input checked="" type="checkbox"/>
BAFFLE FILTER	<u> </u>
MANHOLE LOC	<u>Back</u>
6" PORT LOC	<u>Front</u>
WATERTIGHT TEST	<u> </u>
SEPTIC TANK 2 LEVEL	<u> </u>
CAPACITY	<u> </u> GAL
SEAM LOC	<u> </u>
TANK LID DEPTH	<u>N/A</u>
BAFFLES	<u>N/A</u>
BAFFLE FILTER	<u> </u>
MANHOLE LOC	<u> </u>
6" PORT LOC	<u> </u>
WATERTIGHT TEST	<u> </u>

PRE-CONSTRUCTION 6/18/02 - SDA STAKED. TOP correct. ST-50' From house according to plan. Ensure 20' sep. dist from placement of installation future road. OK TO START - (KN)

6/19/02 - ALLOWED INLET TO DROP BACK TO 1" & BOTTOM AT 5' T/C W. JEFF FROM HATFIELDS - (SRK)

6/20/02 OK to cover all work (SO)

9/22/02 checked on well location (SO)

FINAL INSPECTOR [Signature] DATE OF APPROVAL 6/20/02

BUILDING PERMIT DIVISION
AND PERMITS UNIT

6/24/02
Anytime

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
WATER AND SEWERAGE PROGRAM
TEL: (410)313-2640 FAX: (410)313-2648

Information Form for the Installation of the Well Pump, Pitless Adapter, and Supply Piping

NOTE: The installer is responsible for requesting an inspection prior to 9 am on the day of the desired inspection. No work is to be covered until approved by the Health Department. All installations must comply with the National Standard Plumbing Code (NSPC, as amended locally) and COMAR 26.04.04 (MD Well Construction Regulations). Submission of a complete form is required prior to Use and Occupancy approval.

Company Name: Charles A. Klein & Son, Inc. Telephone #: (410) 549-6960
Address: 5320 Klein Mill Road
Lysburnville, MD 21784

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer
License # and name of individual responsible for the field installation:
Name (Print): Charles A. Klein Jr License# 6521
*A licensed individual must perform the actual installation. Apprentices must be under the direct supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification.

Name of Property Owner: Williamburg Property Telephone #: (410) 997-8808
Subdivision: Chapel Woods Lot #: 36 Well Tag #: HO-84-0091
Site Address: 11750 Chapel Estates Drive
Clarksville, MD 21029

Submersible Pump Data Pitless Adapter Well Cap and Electric Conduit
Make: Jacuzzi Make: Harvard Two piece watertight cap:
Model #: 5345-13P-52 Model#: PT-800 Screened, vented well cap:
Pump Capacity 5 GPM Depth: 42" (36" min) Cap secured to casing:
Well Yield: 10.3 GPM WSC NSF approved: Conduit min 18" E.G.:
Depth of well encountered at time of pump installation: 150 (feet) Conduit secured to well cap:
If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4
Torque arrestors or Cable guards are required - Must circle one
Safety rope, if used, attached to inside of well casing with eye bolt

Piping to house House Connection
Type: Polyethylene PVC sleeved to undisturbed soil at wall penetration:
PSI: 2" (160 psi min) Approximate length of sleeve: _____
Depth of supply line: (36" min) Sleeve caulked and sealed properly:

The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Charles A. Klein Jr _____
Signature of company representative responsible for installation date 4/8/02

For Health Department Use Only - Not to be completed by Installer

Date Insp. Requested: _____ Date Insp. Approved: 6/25/02
Inspection Data: Pitless adapter and water supply line at least 36" below grade
Two piece cap installed and attached to casing securely
Elec. conduit extends at least 18" below grade/attached to cap properly
Safety rope installed inside of well casing
Correct well tag attached properly and casing 8" above finished grade
Water supply line sleeved adequately at house connection
Adequate grout observed below pitless adapter

9/24/02
Well 10'
From Driveway
OK (BR)

6/24/02 Spoke to builder about sleeve
Need to check distance from drive
to well after blacktop is laid. (C)
6/25/02 Barricade still needed? (C)

C1 **5143** SEQUENCE NO. (MDE USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)
 DATE WELL COMPLETED **100395**

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
 PERMIT NO. FROM "PERMIT TO DRILL WELL" **H0-94-0631**

OWNER **JJM Inc.** (last name) **Chapel Estates Drive** (first name) TOWN **Clarksville, Md** 21029
 SUBDIVISION **Chapel Woods III** SECTION _____ LOT **36**

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 FROM TO check if water bearing
 Overburden 0 15
 Gray Rock 15 250 x
 water was encountered at 220'
 Well #1 400' Dry (backfilled)

GROUTING RECORD yes no
 WELL HAS BEEN GROUTED (Circle Appropriate Box)
 TYPE OF GROUTING MATERIAL (Circle one)
 CEMENT BENTONITE CLAY
 NO. OF BAGS **6** NO. OF POUNDS **600**
 GALLONS OF WATER **36**
 DEPTH OF GROUT SEAL (to nearest foot)
 from **0** ft. to **20** ft.
 (enter 0 if from surface)

CASING RECORD
 casing types insert appropriate code below
 ST STEEL CO CONCRETE
 PL PLASTIC OT OTHER

MAIN CASING TYPE
 Nominal diameter top (main) casing (nearest inch)! Total depth of main casing (nearest foot)
 ST 6 20

OTHER CASING (if used)
 diameter inch depth (feet) from to
 C A S I N G

SCREEN RECORD
 screen type or open hole insert appropriate code below
 ST STEEL BR BRASS PL PLASTIC HO OPEN HOLE OT OTHER

NUMBER OF UNSUCCESSFUL WELLS: **1**
 WELL HYDROFRACTURED yes no

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.

TYPE: MWD/MSD/MGD
 DRILLERS LIC. NO. **399**
 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. **MSD017**
 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

C 2
 DEPTH (nearest ft.)
 1 2 3
 A 1 40 20 250
 E 2
 C 3
 S 38 39 41 45 47 51
 R
 E
 N
 SLOT SIZE 1 2 3
 DIAMETER OF SCREEN (NEAREST INCH)
 56 60

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

MDE USE ONLY
 (NOT TO BE FILLED IN BY DRILLER)
 T (E.R.O.S.) W Q
 70 72 74 75 76
 TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3
PUMPING TEST
 HOURS PUMPED (nearest hour) **3**
 PUMPING RATE (gal. per min.) **10.3**
 METHOD USED TO MEASURE PUMPING RATE **Submersible**
 WATER LEVEL (distance from land surface)
 BEFORE PUMPING **75** ft.
 WHEN PUMPING **92** ft.
 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.
 TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29
 CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 35
 PUMP HORSE POWER 37 41
 PUMP COLUMN LENGTH (nearest ft.) 43 47
 CASING HEIGHT (circle appropriate box and enter casing height)
 + above
 - below
 LAND SURFACE (nearest foot) 50 51

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)
 NA

B 1 1711 SEQUENCE NO. (MDE 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
 40-94-0631
 fill in this form completely

Date Received (APA) 07/19/95

OWNER INFORMATION

JJM INC
 5570-205 STERKETT PI
 COLUMBIA MD 21044

B 3 LOCATION OF WELL

HOWARD
 CHAPEL WOODS
 CLARKSVILLE
 MILES FROM TOWN 2 MI

DRILLER INFORMATION
 Paul M. Fabiszak
 G. Edgar Harr Sons' Corp.
 12047 Falls Road, Cockeysville 21030
 7/14/95

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

CHAPEL ESTATES DR
 NEAR WHAT ROAD
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 DISTANCE FROM ROAD 200 FT
 ENTER FT OR MI AA

B 2 WELL INFORMATION

APPROX. PUMPING RATE (GAL PER MIN.) 5
 AVERAGE DAILY QUANTITY NEEDED (GAL PER DAY) 750

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 County A50211K
 COUNTY NAME COUNTY NO.
 STATE SIGNATURE DATE ISSUED 072595 A.M. Miller 7-25-95
 NORTH GRID 509000 EAST GRID 0820000

APPROXIMATE DEPTH OF WELL 200 FEET
 APPROXIMATE DIAMETER OF WELL 6 INCH

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

WRITE THE BOX NUMBER FROM THE MAP HERE

8/8/95 10:30 GROUT
 NO INSP
 8-25-95 11:00 GROUT & BAGS
 20' CASING 17' OPEN

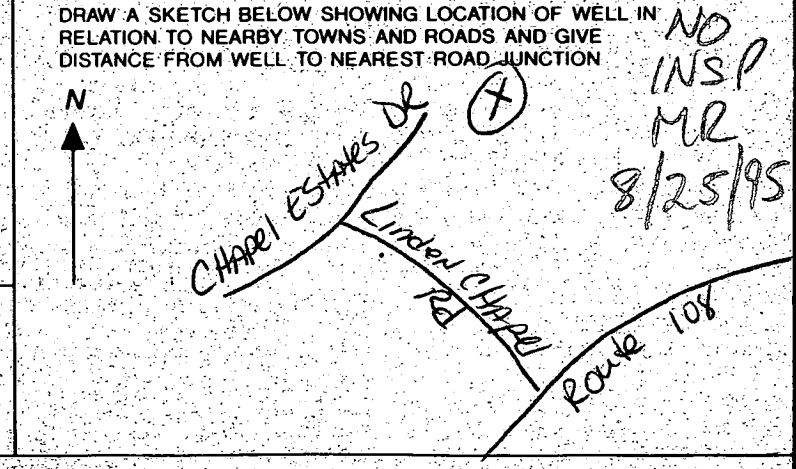
METHOD OF DRILLING (circle one)

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)

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 - CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
 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 (MDE OR COUNTY USE ONLY)

APPROX. PERMIT NUMBER GAP
 FORCE INITIALS PERMIT No. 40-94-0631

PROPERTY OF
THE CHASE
LOT 48
PLAT NO. 7284
ZONED RC

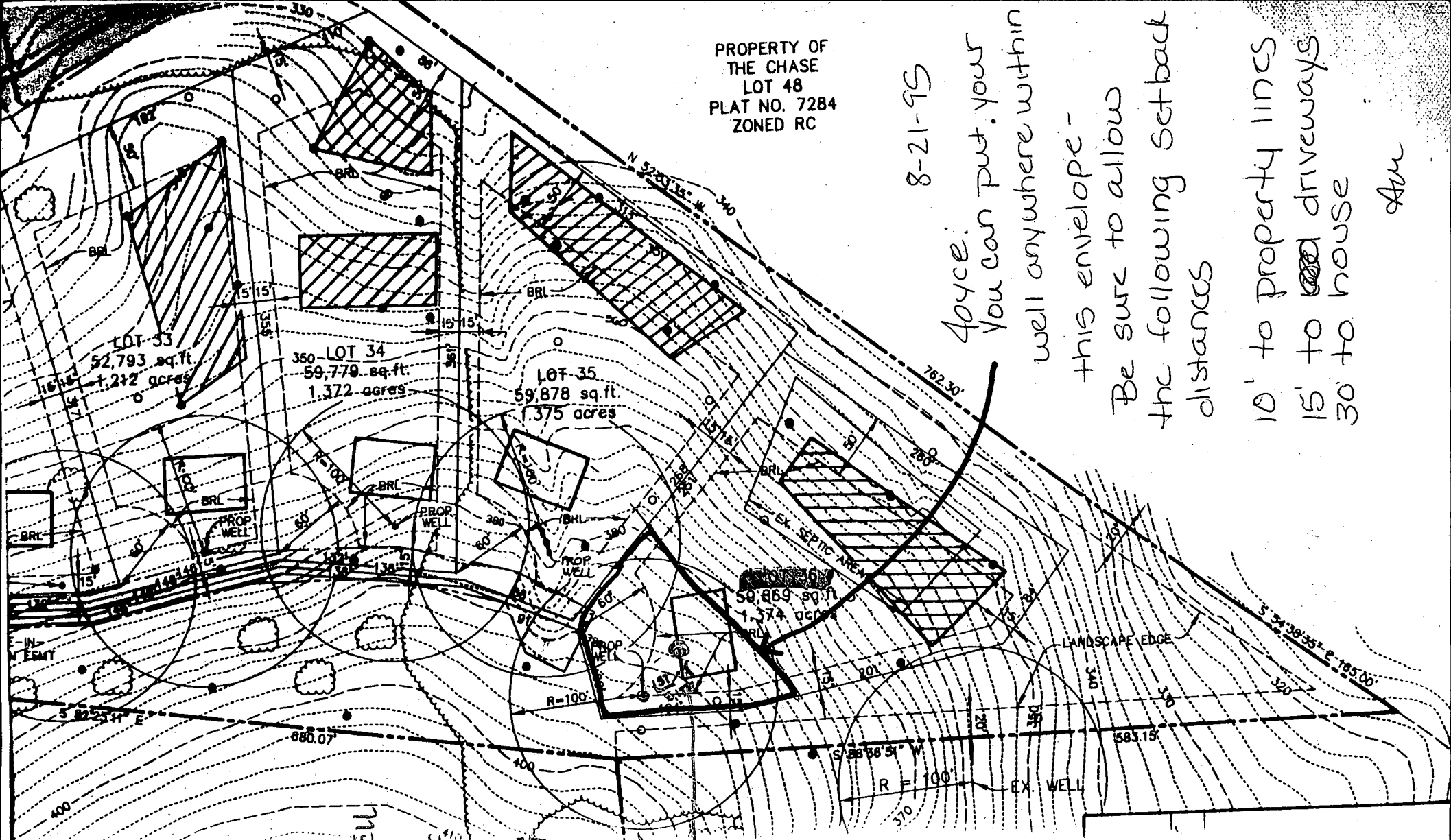
8-21-95

40yce.
You can put your
well anywhere within

this envelope -
Be sure to allow
the following setback
distances

10' to property lines
15' to ~~road~~ driveways
30' to house

Am



8-21-95

New well to be drilled - 1st well had 1.79pm - prospective owner not satisfied.

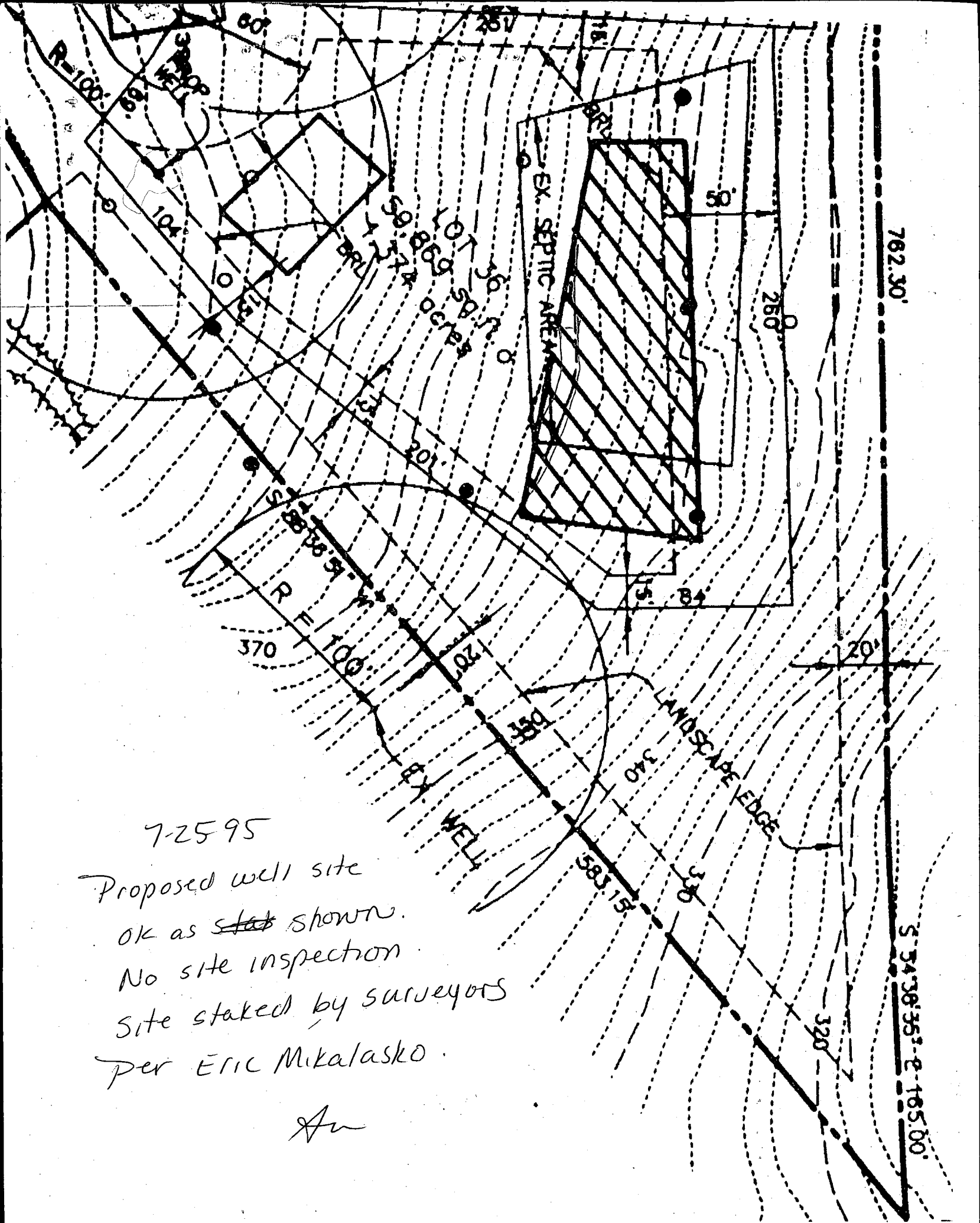
Am

1st WELL
HAS
INSUFF.
FLOW
FOR
OWNER
OF
NEW
2ND
WELL
SITE

copy of signed preliminary Plan
P. 95-19

Chapel Woods Lot 36
well site

8-21-95 sent to
copy and
Am



7-25-95
 Proposed well site
 OK as ~~stab~~ shown.
 No site inspection
 Site staked by surveyors
 Per Eric Mikalasko

Am

SEPT 13, 1994

APPLICATION

PERCOLATION TESTING

A 50211K

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

DISTRICT 5th

DATE August 11, 1994

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 Eric M. Kolaska, c/o Jgm Inc.
5570 Herrett Place, Suite 205
ADDRESS Columbia, MD 21044 PHONE _____

PROSPECTIVE BUYER NA
ADDRESS _____ PHONE _____

PROPERTY LOCATION:
SUBDIVISION Chapel Woods III LOT NO. 36
ROAD AND DESCRIPTION Chapel Woods Drive off Route 108

TAX MAP 29 PARCEL # 86
SIZE OF LOT _____ TYPE BLDG. SFD - common
and septic field
(SINGLE FAMILY DWELLING OR COMMERCIAL)

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.

Christine A. Richards, Agent
(SIGNATURE OF APPLICANT) Remond Smugg

APPROVED BY _____ FOR _____ DATE _____
REJECTED BY _____ FOR _____ DATE _____
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

HD-216

THIS IS NOT A PERMIT

COUNTY #

SOIL PROFILE

0' PT 1AV 5
brn sa
cl lm
20%
Flagstone
1' brn sa
cl lm
10% frags
3' brn tan
sand
10-20%
frags

PT 3

brn sa
cl lm
15% frags
brn tan
sa lm
20% frags

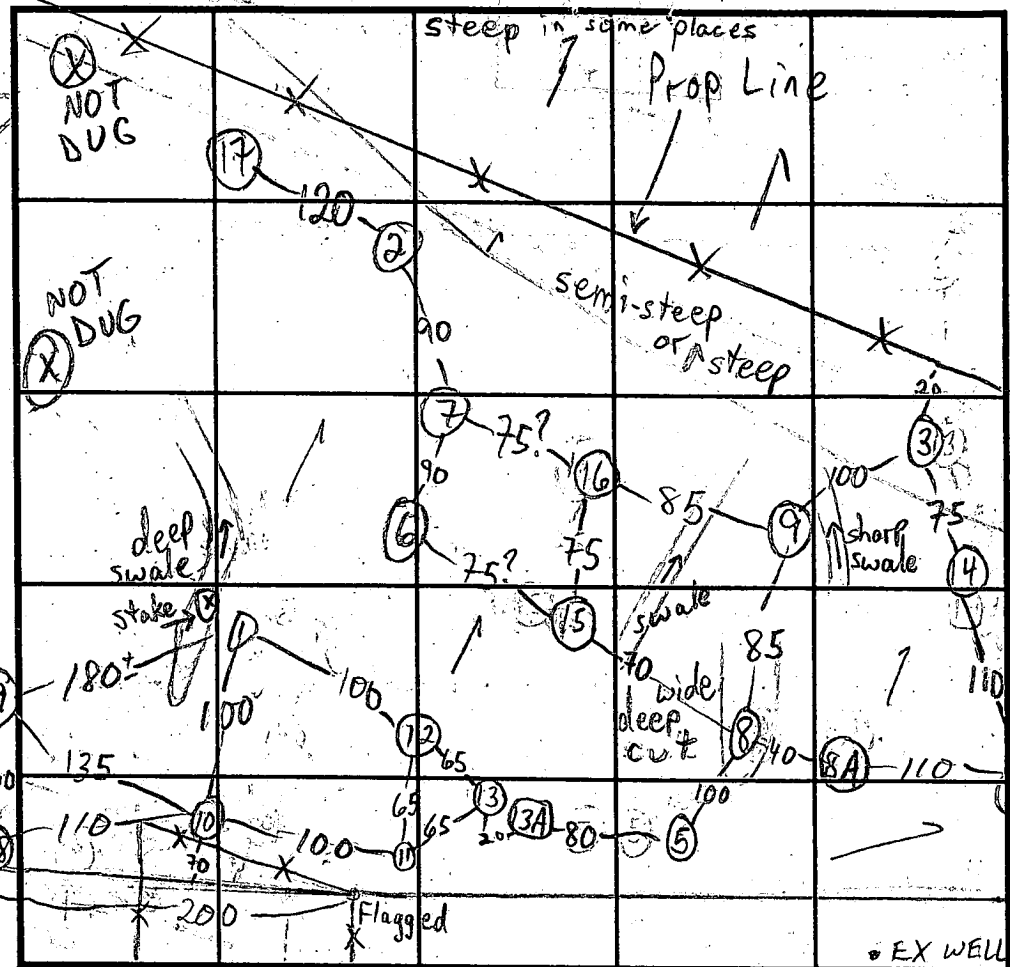
brn sa
sa lm
40-50%
structured
frags
many
large

PT 2

brn sa
cl lm
10% frags

tan
sa lm
25% frags

beige
sa lm
15%
frags



SOIL PROFILE

0'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE. (NOT FOUND)

Prop.
Line
FOR EX. HOUSE
EX. HOUSE

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
9/14/94	PT 8AS	4 1/2	10:30:30	10:31:00	10:31:00	10:32:15	1 min +
	PT 8AV	13	10:33:10	10:34:25	10:34:25	10:36:45	2 min +
	PT 4M	5	10:42:15	10:42:40	10:42:40	10:43:05	FAST
	PT 4V	11	10:43:45	10:44:20	10:44:20	10:45:00	4/8 sec
	PT 4M	5	10:46:25	10:47:15	10:47:15	10:48:15	1 min
	PT 5M	5	10:57:00	10:57:40	10:57:40	10:58:20	FAST
	PT 5V	12 1/2	10:58:55	10:59:40	10:59:40	11:00:40	1 min
9/15/94 9/14/94	PT 5S	2 1/2	2:24:45	2:26:40	2:26:40	2:30	4 min I
	PT 3S	4	11:09:45	11:10:30	11:10:30	11:11:30	1 min
	PT 3V	8'9"	40-50% Rx			FAIL	
9/14/94 9/19/94	PT 2S	4'9"	11:25:20	11:28	11:28	11:33	5
	PT 2M	2'3"	11:16	11:18	11:18	11:21	3
9/14/94	PT 2V	10 1/2					

REMARKS Holes used on Prelim. Plan 8A, 9, 14, 16
 TYPE OF SOIL _____
 TESTED BY M. Ripkin ALSO PRESENT Eric M. hoeman
 TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____
 INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____

102

SEPT 13, 1994

APPLICATION

PERCOLATION TESTING

A 50211

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

DISTRICT 5th

DATE August 11, 1994

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 Louis M. Polaska, c/o Jgm Inc.
5570 Herrett Place, Suite 205
ADDRESS Columbia, MD 21044 PHONE _____

PROSPECTIVE BUYER NA
ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Chapel Woods III LOT NO. 28, 30, 31, 32, 33, 34, 35 + 36
ROAD AND DESCRIPTION Chapel Woods Drive off Route 108

TAX MAP 29 PARCEL # 86 TYPE BLDG. SFD - common area septic field
(SINGLE FAMILY DWELLING OR COMMERCIAL)

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.

Christine A. Richards Agent
(SIGNATURE OF APPLICANT) Remond Mueggli

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

HD-216

THIS IS NOT A PERMIT

COUNTY #

SOIL PROFILE

PT 1
 brn sae 11m
 10% frags
 beige tan coarse sa 1m
 25% quartzite frags

PT 9
 dk. brn sa 1m
 10% frags
 some mica
 beige brn tan sa 1m
 15% frags

PT 8
 dk brn sae 1m
 tan brn sa then tan gran sand
 25% frags
 brn sa 1m
 20% frags

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE

PT 6
 brn sae 1m
 40-50% wh. sa stone + quartzite frags
 tan sa 1m
 50% frags
 tan sa 1m
 35-40% frags
 HARD BOT
 PT 7
 brn sae 1m
 tan sa 1m
 25-30% frags
 brn coarse sa 1m
 45-50% frags

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
9/14/94	PT 1 M	4' 9"	11:47:50	11:48:35	11:48:35	11:49:40	1 min
9/15/94	PT 1 S	2'	11:50:30	11:52:30	11:52:30	11:55	2 min +
9/14/94	PT 1 V	11 1/2'	2:17:20	2:19:00	2:19:00	2:21:00	2 min
9/19/94	PT 9 S	2' 8"	12:41	12:55	12:55	1:39	44 min
9/14/94	PT 9 M	4' 9"	1:25:20	1:35	1:35	2:00	25
	-PT 9 V	12'					
	PT 8 M	5'	1:40:40			1:41:30	FAST
9/19/94	PT 8 S	3'	1:42:20	1:42:50	1:42:50	1:43:30	40 sec
9/14/94	PT 8 V	13'	2:20:00	2:21:45	2:21:45	2:23:45	2 min
9/19/94	PT 6 S	2' 4"	3:07:00	3:07:30	3:07:30	3:08:00	30 sec
			3:08:30	3:09:00	3:09:00	3:10:00	1 min
9/14/94	PT 6 V	11'	2:19:35	2:21:00	2:21:00	2:23:20	2 min +
9/19/94	PT 7 M	4' 3"	3:12:50	3:14:45	3:14:45	3:17:45	3 min
			3:01:00	3:02:00	3:02:00	3:04:00	2 min
	PT 7 V	8'					

REMARKS _____
 TYPE OF SOIL _____
 TESTED BY M. Ripkin ALSO PRESENT Eric M. hoeman
 TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____
 INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____

SEPT 13, 1994

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TO: THE COUNTY HEALTH OFFICER
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PROPERTY OWNER Eric Mikolasko, c/o Jgm Inc.

ADDRESS 5570 Herrett Place, Suite 205
Columbia, MD 21044 PHONE _____

PROSPECTIVE BUYER NA

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Chapel Woods III LOT NO. 28, 30, 31, 32, 33, 34, 35 + 36

ROAD AND DESCRIPTION Chapel Woods Drive off Route 108

TAX MAP 29 PARCEL # 86

SIZE OF LOT _____ TYPE BLDG. SFD - common area septic field
(SINGLE FAMILY DWELLING OR COMMERCIAL)

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.

Christine A. Richards, Agent
(SIGNATURE OF APPLICANT) Remond Muegge

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

HD-216

THIS IS NOT A PERMIT

COUNTY #

SOIL PROFILE
PT 10

0' brn red sa
cl lm
10% frags

2 1/2' tan
beige
brn
sa lm
25-35%
frags

10 1/2' tan brn
sa lm
15-20% frags

SOIL PROFILE
PT 13

0' brn
scl
lm
20% frags

2 1/2' soft
tan
sand
40-50%
frags

↓
equip
failure

PTH

EAST SIDE	WEST SIDE
brn sacl loam 15-20% frags	brn sacl loam 25-40% frags
soft tan brn sand	soft tan brn sand
5-10% frags	45-60% frags
REFUSAL	REFUSAL

PT 12

EAST SIDE	WEST SIDE
brn sa cl loam 15% frags	brn sa cl loam 25% frags
soft tan br sand	soft tan br sand
25-50% frags	45-60% frags
REFUSAL	REFUSAL

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
9/15/94	PT 10 S	2	12:23:15	12:49:15	2 1/2" FAIL		3 +
	PT 10 M	3	12:15:15	12:16:15	12:16:15	12:19:30	
	PT 10 V	14					
	PT 11 S	2 1/2	12:27:20	12:27:40	12:27:40	12:28:10	30 sec
9/19/94	PT 11 M	2 1/2	12:28:45	12:29:20	12:29:20	12:30:05	45 sec
	PT 11 V	13	12:30:45	12:31:35	12:31:35	12:32:25	50 sec
	PT 12 S	2 1/2	12:40:00	12:51:15	12:51:15	1:17:15	26
9/19/94	PT 12 M	5' 9"	12:46:00	12:46:15	12:46:15	12:46:40	25 sec
	PT 12 V	11' 9"	12:47:10	12:47:40	12:47:40	12:48:15	35 sec
	PT 13 V	8					
	PT 14 S	2	11:28:00	11:43	11:43	12:25	42 +
9/19/94	PT 14 M	3	11:41:10	11:41:45	11:41:45	11:42:45	1 min
	PT 14 V	13 1/2	11:43:30	11:44:30	11:44:30	11:46:00	1 1/2 min

REMARKS _____

TYPE OF SOIL _____

TESTED BY M. Riskin ALSO PRESENT Eric M. Hoeman

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____

SEPT 13, 1994

APPLICATION

PERCOLATION TESTING

A 50211

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

DISTRICT 5th

DATE August 11, 1994

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 Eric M. Kolasko, c/o Jgm Inc.

ADDRESS 5570 Herrett Place, Suite 205
Columbia, MD 21044 PHONE _____

PROSPECTIVE BUYER NA

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Chapel Woods III LOT NO. 28, 30, 31, 32, 33, 34, 35 + 36

ROAD AND DESCRIPTION Chapel Woods Drive off Route 108

TAX MAP 29 PARCEL # 86

SIZE OF LOT _____ TYPE BLDG. SFD - common area septic field
(SINGLE FAMILY DWELLING OR COMMERCIAL)

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Christine A. Richards, Agent
(SIGNATURE OF APPLICANT) Remond Mueggli

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

HD-216

THIS IS NOT A PERMIT

COUNTY #

SOIL PROFILE

SOIL PROFILE

0' 15
brn sa
cl lm
25% frags

3 tan sa
25% frags

4 tan sa
40-60%
large
struc.
frags

11 tan sa
20% frags

13

0'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

13A
br sa
topsoil

tan
beige
sand

20-25%
frags

↓

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
9/19/94	PT4 S	2' 4 1/2"	11:52	12:02	2' 4 1/2"	12:54	31 ±
	PT4 M	see	other	test notes	9/14/94		
	PT15 S	2' 3"	1:58	2:13	4 1/2" FA 1 L	2:05	8 min
	PT15 M	4 1/2"	1:54:15	1:57			
	PT15 V	13					
	PT13A V	12	OK	see profile			
	PT16 S	30"	2:43	2:46	2:46	2:53	7 min
	PT16 V	14 1/2"					

16
brn off
sa cl
lm
15% frags

2 1/2 gray
tan
sand
15-25%
frags

14 1/2 ↓

REMARKS _____

TYPE OF SOIL _____

TESTED BY M. Ripkin ALSO PRESENT Eric M. hoeman

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____

SEPT 13/11

APPLICATION

PERCOLATION TESTING

A 50211

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

DISTRICT 5th

DATE August 11, 1994

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 Eric Mikulasko, c/o Jgm Inc.

ADDRESS 5570 Sterrett Place, Suite 205
Columbia, MD 21044 PHONE _____

PROSPECTIVE BUYER NA

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Chapel Woods III LOT NO. 28, 30, 31, 32, 33, 34
35 + 36

ROAD AND DESCRIPTION Chapel Woods Drive off Route 108

TAX MAP 29 PARCEL # 86

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Christine A. Richards, Agent
(SIGNATURE OF APPLICANT) Richard Mueggel

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

HD-216

THIS IS NOT A PERMIT

COUNTY #

SOIL PROFILE

0' 17
 brn sa
 cl. lm
 3- 3 1/2
 tan
 sand
 10-15%
 frags
 ↓

13 18
 brn sa
 cl. lm
 1
 brn
 tan
 sand
 35-45%
 hard
 wh.
 sandstone
 frags

10 19
 2
 brn sa
 cl. lm
 brn
 sand
 10-25%
 frags
 better
 downhill
 ↓

SOIL PROFILE

0'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
9/19/94	PT17M	4' 10" 3 1/2	4:14:40 4:25	4:15:20 4:30	4:15:20 4:30	4:16:30 4:45	1 min 15 min
	PT17V	13					
9/20/94	PT18M	2 1/2 4 1/2	4:05 4:03:45	4:06 4:05:30	4:06 4:05:30	4:07 4:10	1 min 4 min
	PT18V	10 1/2					
	PT19M	3 4 1/2	4:17:40 4:16:45	4:18:30 4:17:20	4:18:30 4:17:30	4:19:05 4:18	1/2 min 1 min
	PT19V	3 13	4:20:00	4:21:00	4:21:00	4:22:30	1 1/2 min

REMARKS

TYPE OF SOIL

TESTED BY M. Rifkin

ALSO PRESENT Eric M. Joe man

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

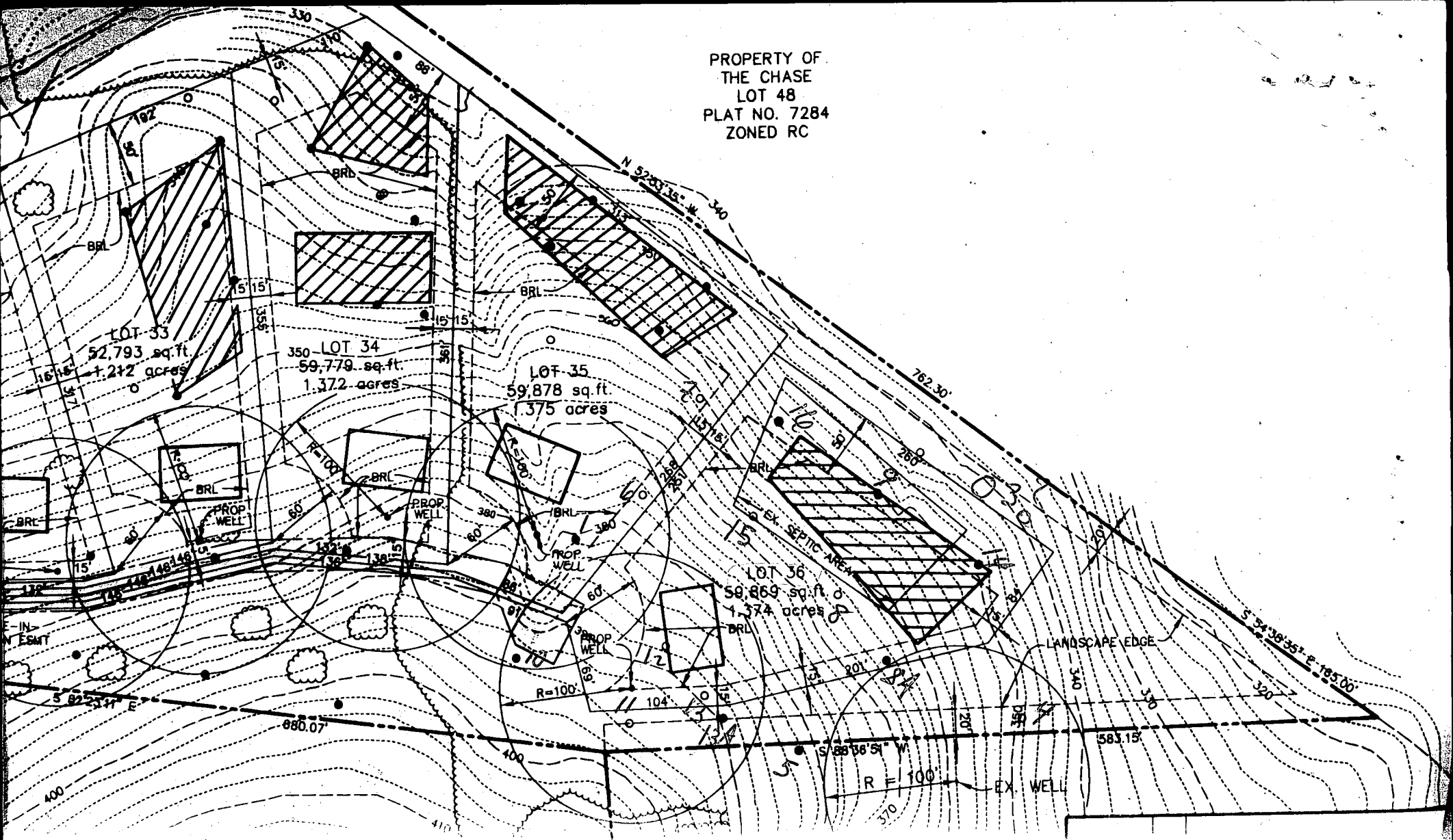
TRENCH WIDTH

INLET DEPTH

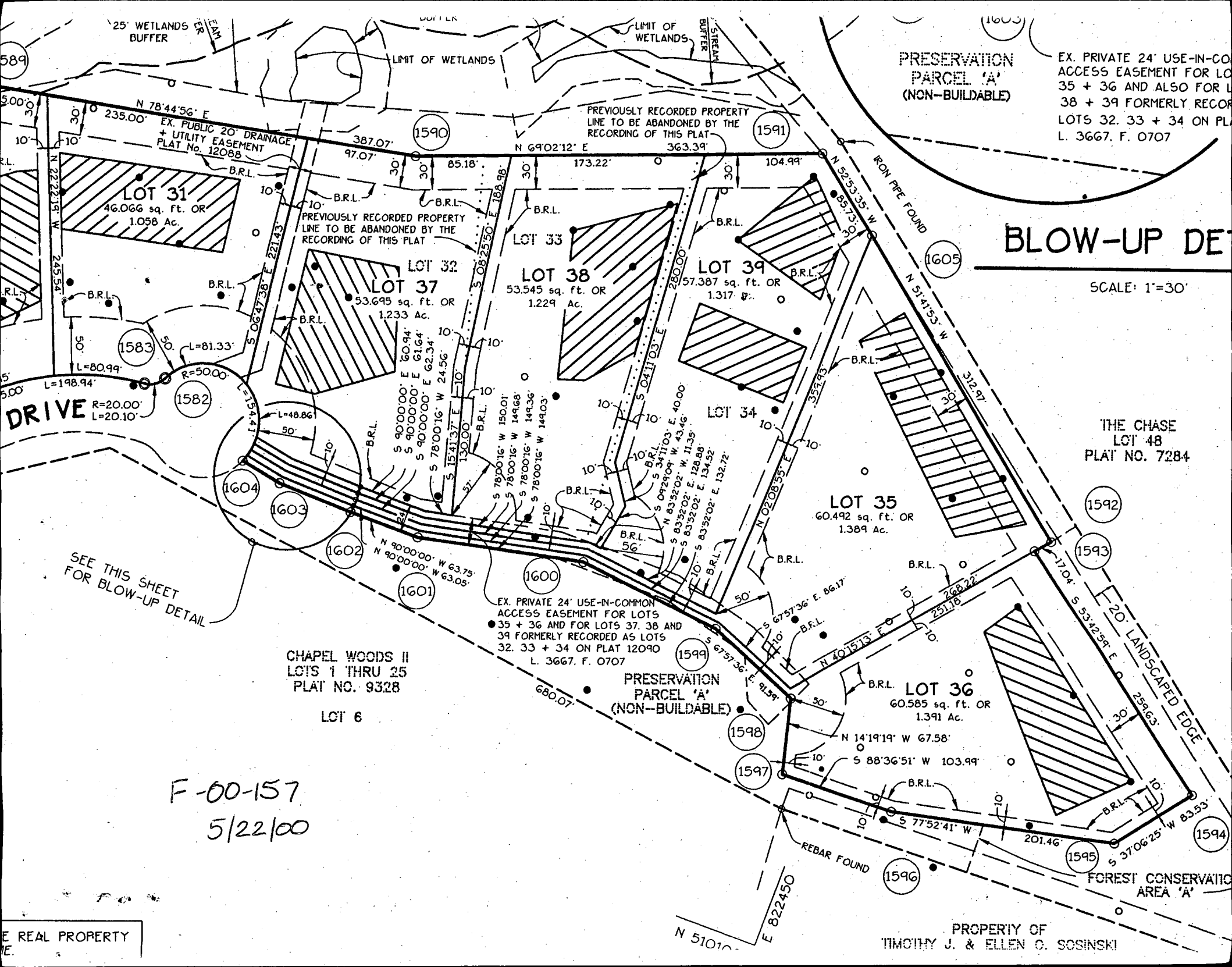
MAXIMUM BOTTOM DEPTH

SQ. FT./BEDROOM

PROPERTY OF
THE CHASE
LOT 48
PLAT NO. 7284
ZONED RC



copy of signed preliminary Plan
P-95-19



PRESERVATION
PARCEL 'A'
(NON-BUILDABLE)

EX. PRIVATE 24' USE-IN-COMMON
ACCESS EASEMENT FOR LOTS
35 + 36 AND ALSO FOR LOTS
38 + 39 FORMERLY RECORDED
AS LOTS 32, 33 + 34 ON PLAT
L. 3667, F. 0707

BLOW-UP DETAIL

SCALE: 1"=30'

THE CHASE
LOT 48
PLAT NO. 7284

CHapel Woods II
LOT'S 1 THRU 25
PLAT NO. 9328

LOT 6

EX. PRIVATE 24' USE-IN-COMMON
ACCESS EASEMENT FOR LOTS
35 + 36 AND FOR LOTS 37, 38 AND
39 FORMERLY RECORDED AS LOTS
32, 33 + 34 ON PLAT 12090
L. 3667, F. 0707

PRESERVATION
PARCEL 'A'
(NON-BUILDABLE)

LOT 36
60,585 sq. ft. OR
1.391 Ac.

LOT 38
53,545 sq. ft. OR
1.229 Ac.

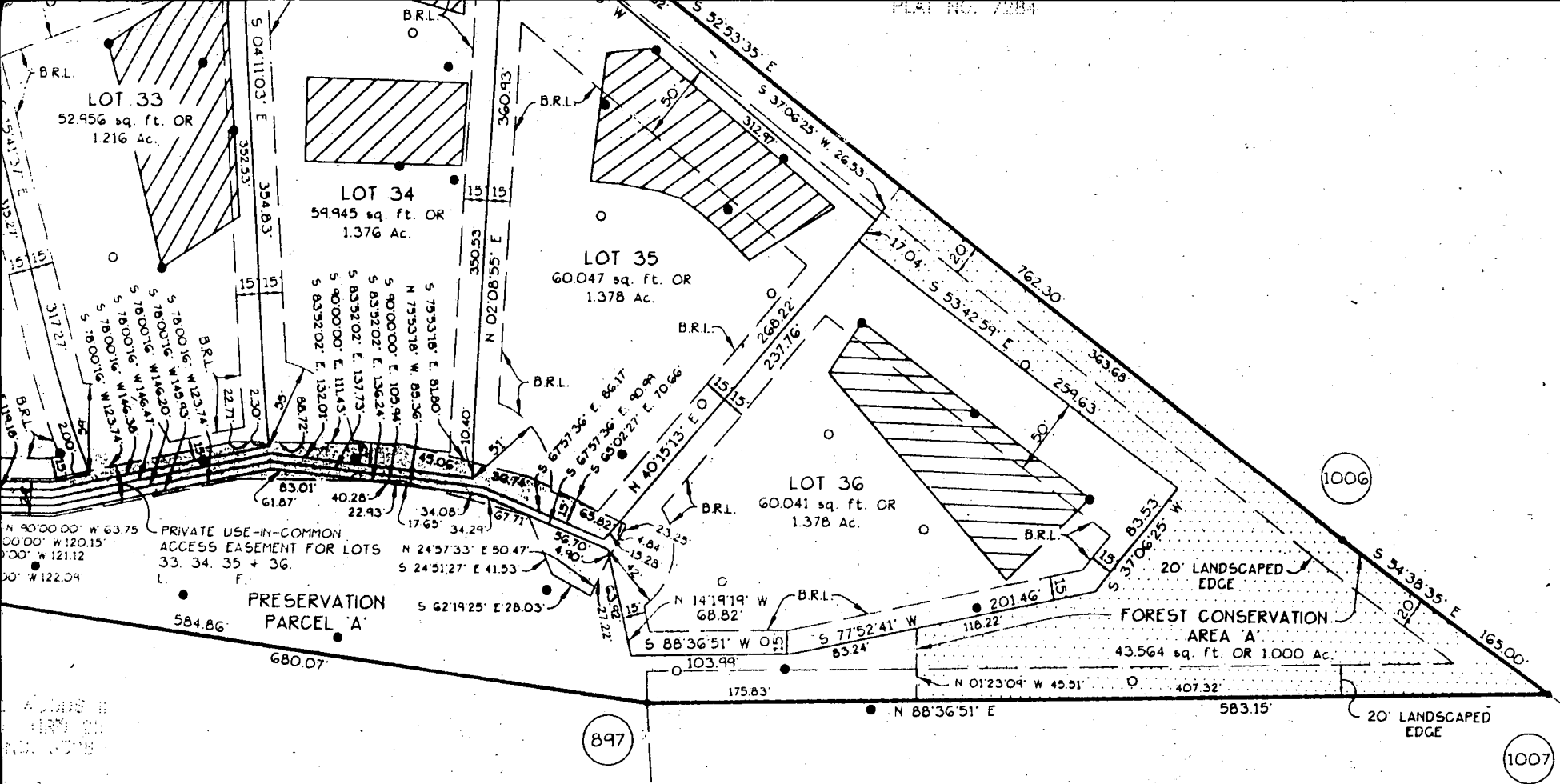
LOT 39
57,387 sq. ft. OR
1.317 Ac.

LOT 35
60,492 sq. ft. OR
1.389 Ac.

F-00-157
5/22/00

PROPERTY OF
TIMOTHY J. & ELLEN G. SOSINSKI

REAL PROPERTY



PROPERTY OF
TIMOTHY J. & ELLEN O. SOSINSKI
L. 1890, F. 548

F-00-157

THE REQUIREMENTS OF SECTION 3-108, THE REAL PROPERTY
OF MARYLAND, 1988 REPLACEMENT VOLUME,
AS FAR AS THEY RELATE TO THE MAKING OF THIS PLAT AND
HAVE BEEN COMPLIED WITH.

0751	DATE
	11 1 95
	DATE
	10 31 95
OKO	DATE

OWNER

ERIC JOHN MIKOLASKO +
DARLENE SANTOS MIKOLASKO
c/o JJM, INC.
5570 STERRETT PLACE
SUITE 205
COLUMBIA, MARYLAND 21045
(410) 740-4466

ENGINEER

RIEMER MUEGGE AND ASSOCIATES, INC.
8818 CENTRE PARK DRIVE
SUITE #200
COLUMBIA, MARYLAND 21045
(410) 997-8900

OWNER'S CERTIFICATE

RECORDED AS PLAT NUMBER _____



CLARK · FINEFROCK & SACKETT, INC.

ENGINEERS · PLANNERS · SURVEYORS

FAX TRANSMISSION

DATE: 1 - 31 - 02

TO: BRIAN

COMPANY: Hb. Co. ENVIROMENTAL HEALTH (410) 313-2648

FROM: KEEFE Q. LEE

SUBJECT: CHAPEL WOODS, SITE DEVELOPMENT PLAN, GP-01-15

COMMENTS: ON BEHALF OF WILLIAMSBURG BUILDERS, LOT
36 HAVE PLANS TO ADD A FUTURE POOL (SEE SHEET)
MY CONCERN IS THE CHANGE IN THE LIMIT OF DISTURBANCE.
WILL THE NEW GRADING WITH THE FUTURE POOL CAUSE ANY
PROBLEMS MY REDLINE REVISION FOR APPROVAL?

PLEASE LET ME KNOW ASAP.

THANK YOU.

2/13/02

KEEFE Q. LEE

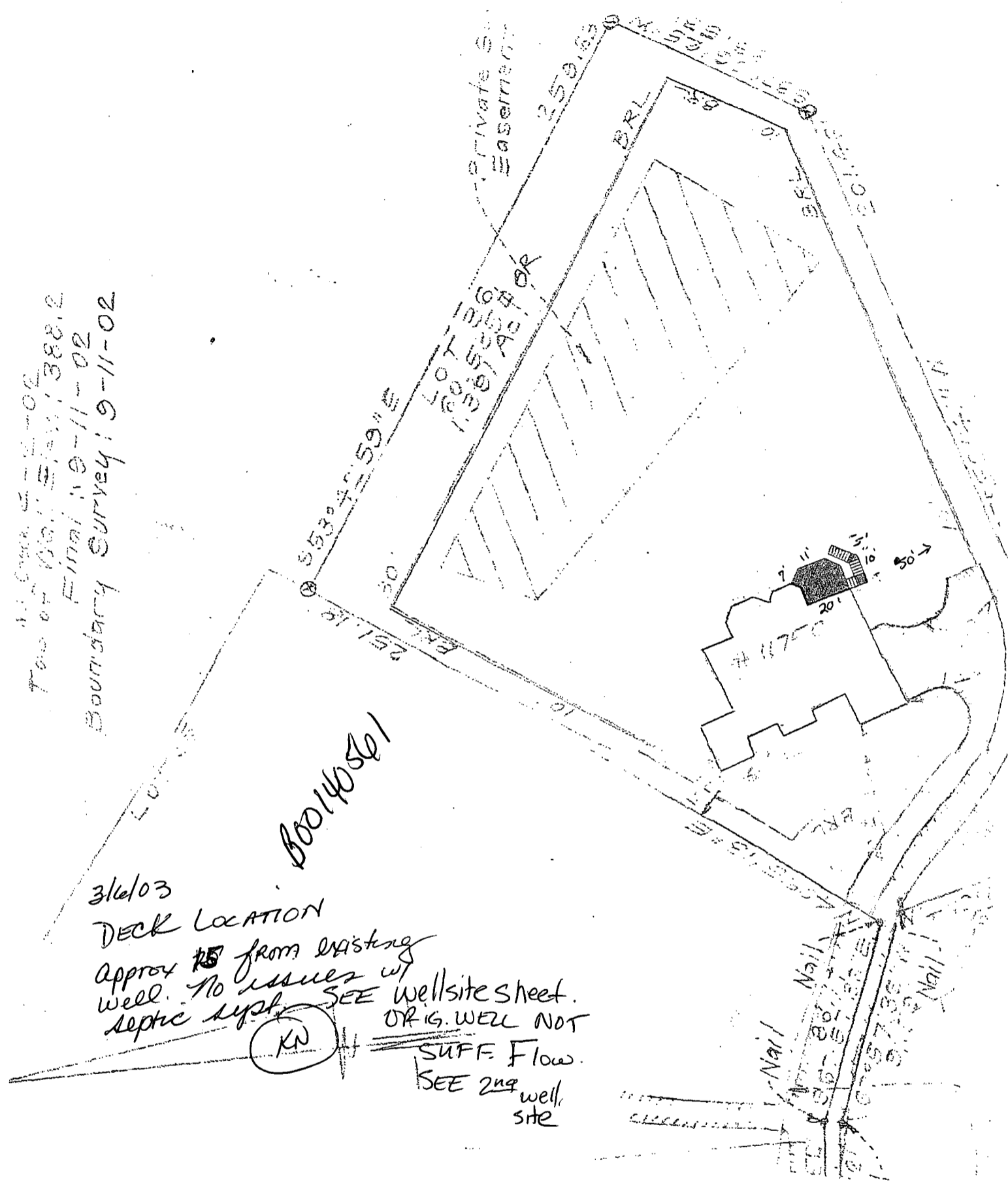
Proposed grading
changes are O.K.
Pool will have little
impact on septic system

(410) 381-7500

BB

Number of pages (including cover sheet): 3

11/11/02
 Top of Deck Easement 388.2
 Final 11-11-02
 Boundary Survey: 9-11-02



3/6/03

DECK LOCATION

Approx 15' from existing
 well. No issues w/
 septic syst. SEE wellsite sheet.
 ORIG. WELL NOT
 SUFF. Flow.
 SEE 2nd well
 site

B00140561

KN

SURVEYOR'S CERTIFICATE

9-17-02

Raymond



2000 SF

APPROVED

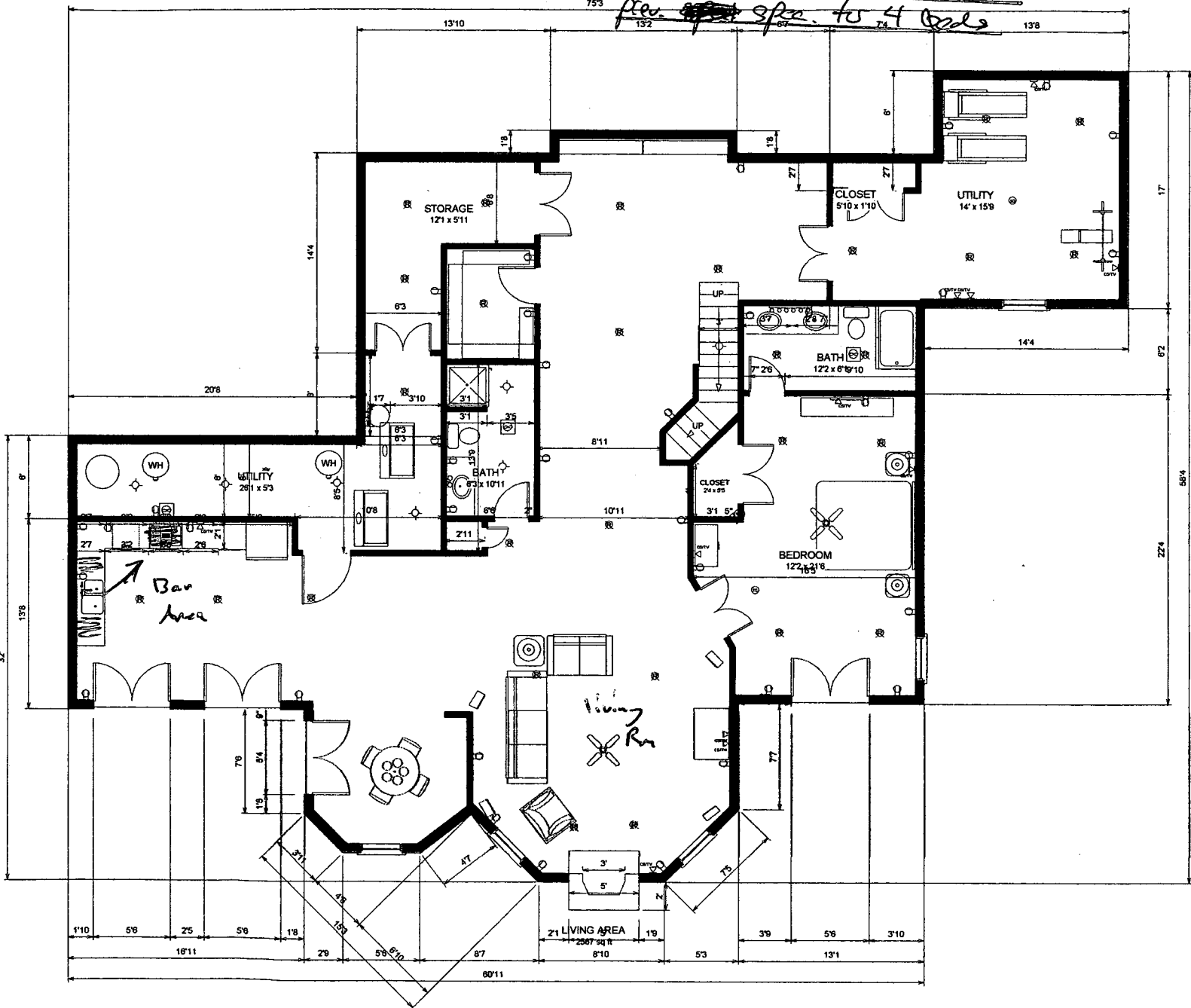
WALK-THRU BUILDING PERMIT

BP# B00150237 A# 50211-K

APP. SAN KJB DATE: 9/8/04

DESC. OF WORK: Finish basement

prev. spec. for 4 beds



Wall Check 4-2-02
 Top of Wall Elev.: 388.2
 Final: 9-11-02
 Boundary Survey: 9-11-02

11-17-04
 PLAN TO SCALE
 DISTANCES TO,
 SDA, S.T., & Well OK
 KN

WALKTHRU BUILDING PERMIT
 BP# 50251184 A# 50211-K
 APP. SAN KN DATE: 11-17-04
 DESC. OF WORK: POOL, INGROUND

APPROVED

