

5/5/97
C.O. anytime

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

INDEXED

03-320596

P 58115

A 50294-C

DISTRICT _____

DATE 4/30/97

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXXXX~~ 313-2640

DATE SYSTEM APPROVED 5/5/97

INSPECTOR DKS

Adamson Plumbing and Heating _____ IS PERMITTED TO INSTALL X ALTER _____

ADDRESS 7825 McCellan Avenue, Boonsboro, Maryland 21713 PHONE (301) 416-3968

SUBDIVISION Benson Branch Estates LOT 18 ROAD 3705 Park Overlook Court

PROPERTY OWNER ALVAN BEALL III ~~Hamilton Reed, LLC~~

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

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

LOCATION - Place the distribution box 60 feet from the intersection of the (204.47' and 209.04') South Lot Lines, and 50 feet from the (167.30') West Lot Line. Install trenches on contour toward the South Lot Line (204.47')

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

OK 2-25-97 KM

PLANS APPROVED BY Ronald J. Pinkley DATE 02/19/97

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.

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 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

LOG. PERMIT SIGNED

AND RETURNED 9-18-97

Serial # Bro 107976

PERMIT VOID AFTER TWO YEARS

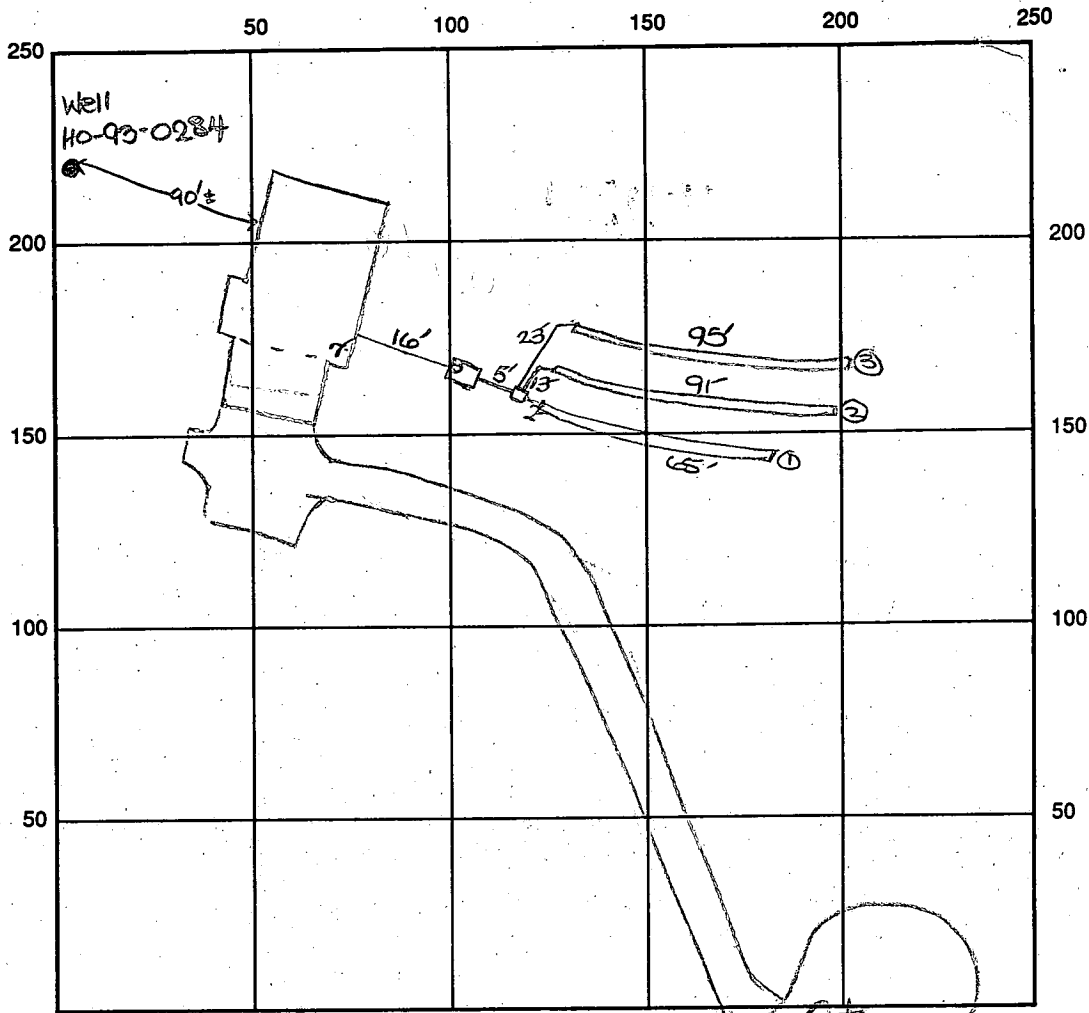
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON. CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

2-level deck

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

A 50294C



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL OK-1250 gal Park Overlook CLEANOUTS one on s.t.

DISTRIBUTION BOX LEVEL OK

DRAIN FIELD/TITLE DEPTH 4 FT. TRENCH WIDTH 3 FT. INLET DEPTH 2 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 166 + 95 = 261 FT. → 247'

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 741 SQ. FT.

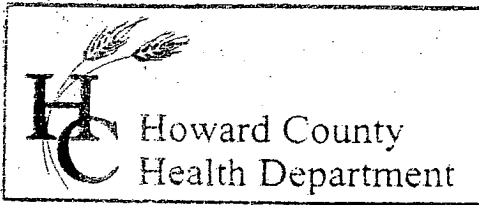
DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA 741 SQ. FT.

REMARKS: 5/5/97 FINAL INSP - OK to cover all work, DKS

5/8/97 WPI insp - 'do not cover at well! Needs conduit pipe and 2-pc watertight cap. P.A., with line 4 below grade, 10' above grade, 10' above grade, 10' above grade'

DATE SYSTEM APPROVED 5/5/97 INSPECTOR [Signature]



3525 H Ellicott Mills Drive, Ellicott City, MD 21043
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

Penny E. Borenstein, M.D., M.P.H., Health Officer
July 17, 2003

Alvan & Willa Beall
3705 Park Overlook Court
Ellicott City, MD 21042

RE: **Replacement Well Issues**
Benson Branch Estates, Lot # 18
3705 Park Overlook Court
Well Permit #: HO-94-3615

Dear Mr. & Mrs. Beall:


This office is requesting that you contact the Community Services Program at (410) 313-1773 to schedule an initial water sampling for the referenced replacement well, as required by the Maryland Well Construction Regulation (COMAR 26.04.04). The sampling is free of charge.

It is preferred that the sample be collected from the indoor primary drinking tap, but if suitable scheduling is not possible, the sample may be taken from an outside tap to complete your sampling obligation. However, the potential for unsuccessful sample results increases when samples are collected from taps exposed to the outside environment.

Additionally, a condition of the well drilling permit was the proper abandonment and sealing of the existing well. This abandonment process is important to restore the subsurface geologic conditions, which existed before the well was drilled and to help protect the groundwater resource from potential contamination. This should be completed as soon as possible to avoid delays in the issuance of potability certification and any future permit approval requests for this property. The well abandonment process must be accomplished by a licensed well driller, who may perform the work without inspection; however, the driller must then file an abandonment report with this office.

If you have any questions, or would like to discuss this matter further, please call me at (410) 313-1771. Thank you for your attention to these important matters.

Sincerely,


Steven R. Krieg
Registered Environmental Sanitarian
Well and Septic Program

cc: Community Services Program
File

C1 14380

SEQUENCE NO. (MDE 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)

FILL IN THIS FORM COMPLETELY PLEASE TYPE

COUNTY NUMBER 50294-C

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED 3/18/03

Depth of Well 400

OK SRK 5/30/03

PERMIT NO. FROM "PERMIT TO DRILL WELL" 110-44-3615

OWNER Beall Van 2905 Park Overlook CT first name TOWN West Friendship 18 SUBDIVISION Bensen Branch Est. 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. Entries: top soil (0-2), Shaley (2-50), Dry mica (50-400)

GROUTING RECORD

WELL HAS BEEN GROUTED (Y) (N) TYPE OF GROUTING MATERIAL (Circle one) CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 22 NO. OF POUNDS 2200 GALLONS OF WATER 132 DEPTH OF GROUT SEAL (to nearest foot) 43

CASING RECORD

ST STEEL CO CONCRETE PL PLASTIC OT OTHER MAIN CASING TYPE SF Nominal diameter top (main) casing (nearest inch)! 6 Total depth of main casing (nearest foot) 60

OTHER CASING (if used)

Table for other casing with columns for diameter and depth.

SCREEN RECORD

ST STEEL BR BRASS PL PLASTIC HO OPEN HOLE OT OTHER

DEPTH (nearest ft.)

Table with columns for depth intervals (1-11, 11-15, 15-17, 17-23, 23-24, 24-26, 26-30, 30-32, 32-38, 38-39, 39-41, 41-45, 45-47, 47-51) and slot size/diameter of screen.

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

TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3

PUMPING TEST

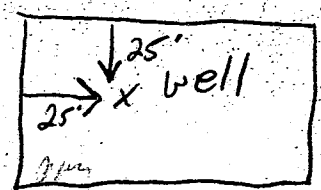
HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 1.5 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 50 WHEN PUMPING 400 TYPE OF PUMP USED (for test) A air P piston T turbine C centrifugal R rotary O other J jet S submersible

PUMP INSTALLED

DRILLER INSTALLED PUMP (CIRCLE) (YES/NO) 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 49 below 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)



NUMBER OF UNSUCCESSFUL WELLS 0

WELL HYDROFRACTURED (Y) (N)

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...

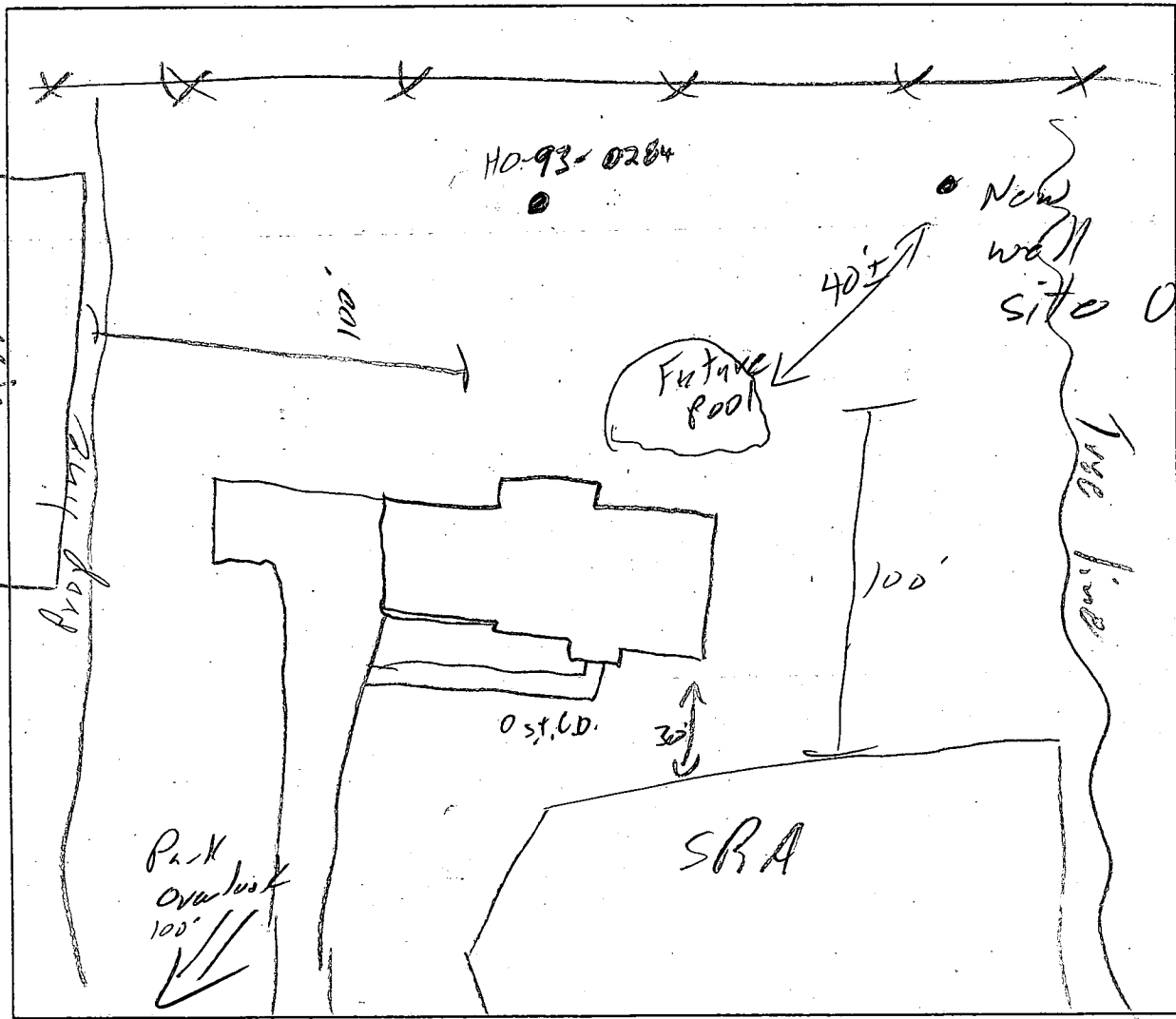
DRILLERS LIC. NO. MWD 040 George F. Kuntentung DRILLERS SIGNATURE LIC. NO. MWD 481

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

SITE INSPECTION SHEET

OWNER: Van Beall PHONE #: 410-531-7170
 ADDRESS: 3705 Park Overlook Ct CONTRACTOR: Easterday
 WELL TAG #: _____
 SUBDIVISION: Benson Branch Est LOT: 18 COUNTY #: _____
 PROPOSAL: Out of water/well caved in

LOCATION DIAGRAM



COMMENTS: _____

DATE: 12/20/02 INSPECTOR: [Signature]

B 1 8426 SEQUENCE NO. (MDE USE ONLY) 12/20/02

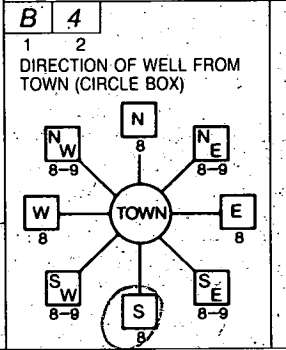
STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type

STATE PERMIT NUMBER HD-94-3615 fill in this form completely

8 12/20/02 Date Received (APA) OWNER INFORMATION 9377 BEALL VAN 3705 PARK OVERLOOK COURT ELLICOTT CITY, MD 21042

B 3 HOWARD LOCATION OF WELL CC# 8 COUNTY 21 Brinson Park Est. 23 SUBDIVISION 42 5/30/03 SECTION 44 46 LOT 48 50 West Friendship 52 NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) 2 M I 73 76 77 78

DRILLER INFORMATION George F. Easterday M MD 040 Driller's Name 76 License No. 81 L. Franklin Easterday, Inc. Firm Name 9265 Brown Church Rd., MT. Airy, Md. 21771 Address George F. Easterday Signature 12/20/2002 Date



3705 Park Overlook Court 11 NEAR WHAT ROAD 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH N WEST W EAST E SOUTH S 34 60 37 DISTANCE FROM ROAD Ft. ENTER FT OR MI 38 39 TAX MAP: 22 BLK: 10 PARCEL 550

B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 5 8 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 500 20

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL Howard 50294-CB COUNTY NAME 50294 COUNTY NO. STATE SIGNATURE INSERT S 41 DATE ISSUED 12/20/02 12/20/03 CO SIGNATURE EXP DATE NORTH GRID 50 000 EAST GRID 57 000

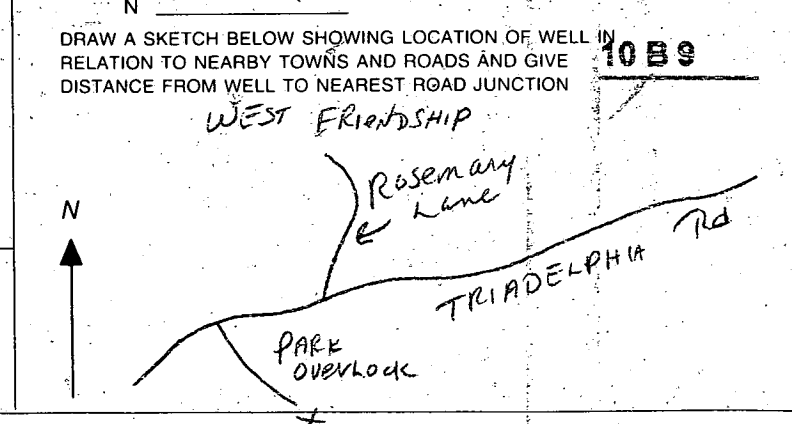
USE FOR WATER (CIRCLE APPROPRIATE BOX) D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) I INDUSTRIAL, COMMERCIAL, DEWATERING P PUBLIC WATER SUPPLY WELL T TEST, OBSERVATION, MONITORING G GEO-THERMAL

APPROXIMATE DEPTH OF WELL 300 FEET APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X 3/10/03 2:30 SO Casing 60' Annular 43' Bags 22 SOURCES OF DRILLING WATER 1. wells 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE E 5204 N 5204

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) 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-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS D THIS WELL WILL DEEPEM AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 40-93-028452

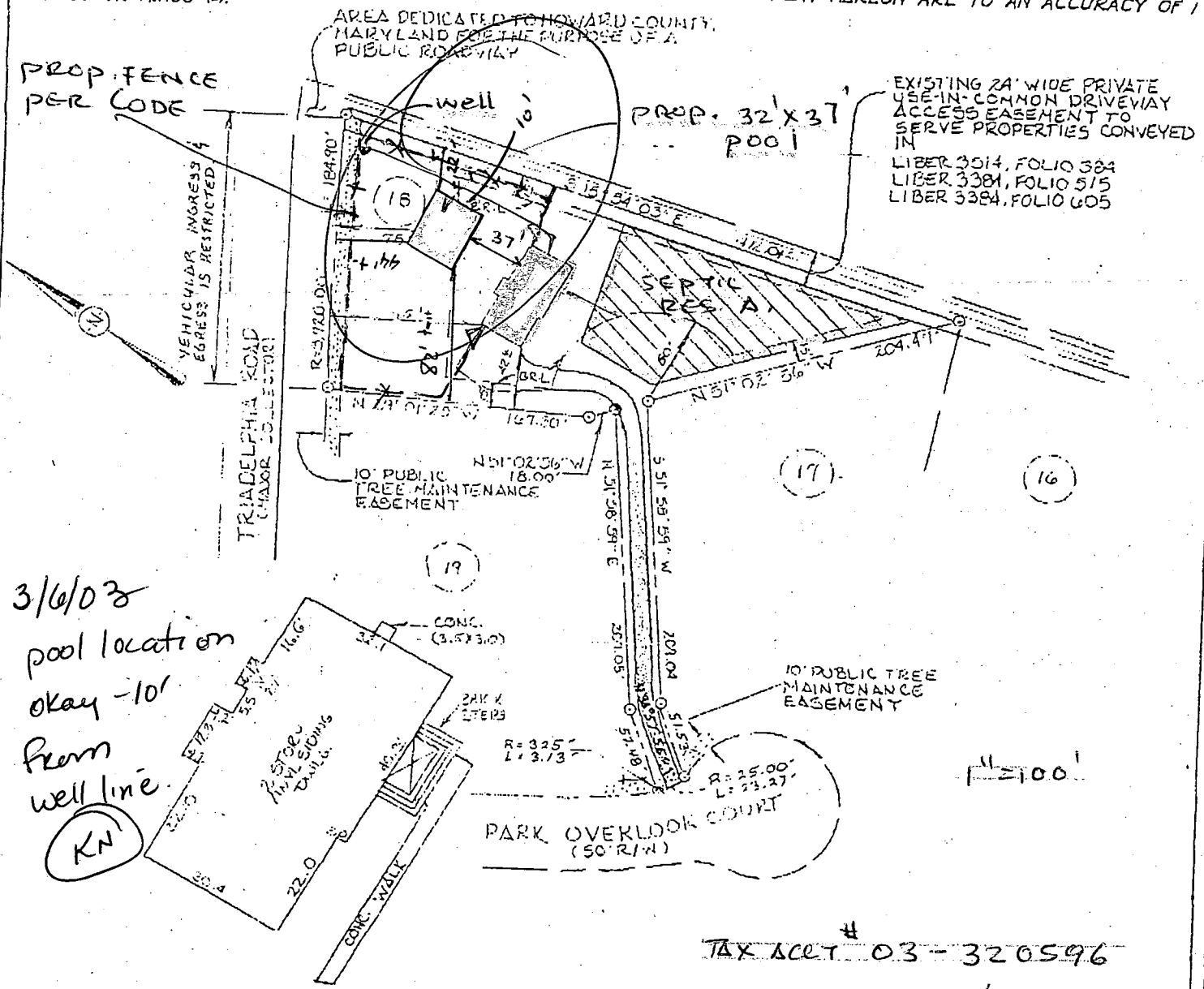


Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER G PERMIT No. HD-94-3615

0858:7

GENERAL NOTES:

- 1) THIS PLAT IS PREPARED FOR THE BENEFIT OF THE CLIENT SIGNING THE HOUSE LOCATION SURVEY APPROVAL FORM INsofar AS IT IS REQUIRED BY A LENDER OR TITLE INSURANCE COMPANY OR ITS AGENTS IN CONNECTION WITH THE CONTEMPLATED TRANSFER, FINANCING OR RE-FINANCING. UNLESS INDICATED AS BEING A BOUNDARY SURVEY, THIS PLAT IS NOT INTENDED FOR USE IN THE ESTABLISHMENT OF PROPERTY LINES AND IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATIONS OF FENCES, GARAGES, BUILDINGS OR OTHER EXISTING OR FUTURE IMPROVEMENTS. AS A RESULT, THIS PLAT DOES NOT PROVIDE FOR ACCURATE IDENTIFICATION OF PROPERTY LINE, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING OR RE-FINANCING.
- 2) SUBJECT PROPERTY IS SHOWN IN ZONE "C" ON THE NATIONAL FLOOD INSURANCE PROGRAM FLOOD INSURANCE RATE MAP OF HOWARD COUNTY, MARYLAND, COMMUNITY PANEL No. 24004400010, EFFECTIVE DATE: JAN. 4, 1986.
- 3) THE OFFSETS FROM BUILDING LINE TO PROPERTY LINE AS SHOWN ON THE PLAT HEREON ARE TO AN ACCURACY OF 1/16" PLUS OR MINUS (±).



3/6/03
 pool location
 okay - 10'
 from
 well line.

KN

TAX ACCT # 03-320596

ALVAN BELL / WILLA BLOOKS

LOT 18
 BENSON BRANCH ESTATES
 LOTS 4 THRU 19 AND
 PRESERVATION PARCEL A
 3RD ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND
 PLAT REF: 12134

TOP FOUNDATION ELEVATION = 588.8'

ENGINEER'S CERTIFICATE

I HEREBY CERTIFY THAT THIS PLAN FOR EROSION AND SEDIMENT CONTROL REPRESENTS A PRACTICAL AND WORKABLE PLAN BASED ON MY PERSONAL KNOWLEDGE OF THE SITE CONDITION AND THAT IT WAS PREPARED IN ACCORDANCE WITH THE REQUIREMENTS OF THE HOWARD SOIL CONSERVATION DISTRICT.

SIGNATURE OF ENGINEER _____ DATE _____

DEVELOPER'S CERTIFICATE

I/WE CERTIFY THAT ALL DEVELOPMENT AND CONSTRUCTION WILL BE DONE ACCORDING TO THIS PLAN OF DEVELOPMENT AND PLAN FOR EROSION AND SEDIMENT CONTROL AND THAT ALL RESPONSIBLE PERSONNEL INVOLVED IN THE CONSTRUCTION PROJECT WILL HAVE A CERTIFICATE OF ATTENDANCE AT A DEPARTMENT OF NATURAL RESOURCES APPROVED TRAINING PROGRAM FOR THE CONTROL OF SEDIMENT AND EROSION BEFORE BEGINNING THE PROJECT. I ALSO AUTHORIZE PERIODIC ON-SITE INSPECTION BY THE HOWARD SOIL CONSERVATION DISTRICT OR THEIR AUTHORIZED AGENTS, AS ARE DEEMED NECESSARY.

SIGNATURE OF DEVELOPER _____ DATE _____

REVIEWED FOR HOWARD COUNTY SOIL CONSERVATION DISTRICT AND MEETS TECHNICAL REQUIREMENTS.

U.S. SOIL CONSERVATION DISTRICT _____ DATE _____

THIS DEVELOPMENT IS APPROVED FOR EROSION AND SEDIMENT CONTROL BY THE HOWARD SOIL CONSERVATION DISTRICT. APPROVED:

DISTRICT HOWARD SOIL CONSERVATION DIST. _____ DATE _____

SEDIMENT CONTROL NOTES

- A MINIMUM OF 48 HOURS NOTICE MUST BE GIVEN TO THE HOWARD COUNTY DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS, SEDIMENT CONTROL DIVISION PRIOR TO THE START OF ANY CONSTRUCTION (03-10-95).
- ALL VEGETATIVE AND STRUCTURAL PRACTICES ARE TO BE INSTALLED ACCORDING TO THE PROVISIONS OF THIS PLAN AND ARE TO BE IN CONFORMANCE WITH THE MOST CURRENT MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL, AND REVISIONS THERETO.
- FOLLOWING INITIAL SOIL DISTURBANCE OR RE-DISTURBANCE, PERMANENT OR TEMPORARY STABILIZATION SHALL BE COMPLETED WITHIN: a) 7 CALENDAR DAYS FOR ALL PERMETER SEDIMENT CONTROL STRUCTURES, DICES, PERMITTED SLOPES AND ALL SLOPES STEEPER THAN 3:1; b) 14 DAYS AS TO ALL OTHER DISTURBED OR GRADED AREAS ON THE PROJECT SITE.
- ALL SEDIMENT TRAPS/BASINS SHOWN MUST BE FENCED AND WARNING SIGNS POSTED AROUND THEIR PERIMETER IN ACCORDANCE WITH VOL. I, CHAPTER 12, OF THE HOWARD COUNTY DESIGN MANUAL, STORM DRAINAGE.
- ALL DISTURBED AREAS MUST BE STABILIZED WITHIN THE TIME PERIOD SPECIFIED ABOVE IN ACCORDANCE WITH THE 1994 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL FOR PERMANENT SEEDING (SEC. 51), 500 (SEC. 54), TEMPORARY SEEDING (SEC. 50), AND MULCHING (SEC. 52). TEMPORARY STABILIZATION WITH MULCH ALONE CAN ONLY BE DONE WHEN RECOMMENDED SEEDING DATES DO NOT ALLOW FOR PROPER GERMINATION AND ESTABLISHMENT OF GRASSES.
- ALL SEDIMENT CONTROL STRUCTURES ARE TO REMAIN IN PLACE AND ARE TO BE MAINTAINED IN OPERATIVE CONDITION UNTIL PERMISSION FOR THEIR REMOVAL HAS BEEN OBTAINED FROM THE HOWARD COUNTY SEDIMENT CONTROL INSPECTOR.
- SITE ANALYSIS:

| | | |
|------------------------------------|------|---------|
| TOTAL AREA OF SITE | 1.14 | ACRES |
| AREA DISTURBED | 0.27 | ACRES |
| AREA TO BE ROOFED OR PAVED | 0.00 | ACRES |
| AREA TO BE VEGETATIVELY STABILIZED | 0.19 | ACRES |
| TOTAL CUT | 1000 | CU.YDS. |
| TOTAL FILL | 1000 | CU.YDS. |
- OFF-SITE WASTE/BORROW AREA LOCATION: _____
- ANY SEDIMENT CONTROL PRACTICE WHICH IS DISTURBED BY GRADING ACTIVITY FOR PLACEMENT OF UTILITIES MUST BE REPAIRED ON THE SAME DAY OF DISTURBANCE.
- ADDITIONAL SEDIMENT CONTROLS MUST BE PROVIDED, IF DEEMED NECESSARY BY THE HOWARD COUNTY SEDIMENT CONTROL INSPECTOR.
- ON ALL SITES WITH DISTURBED AREAS IN EXCESS OF 2 ACRES, APPROVAL OF THE INSPECTION AGENCY SHALL BE REQUESTED UPON COMPLETION OF INSTALLATION OF PERIMETER EROSION AND SEDIMENT CONTROLS, BUT BEFORE PROCEEDING WITH ANY OTHER EARTH DISTURBANCE OR GRADING. OTHER BUILDING OR GRADING INSPECTION APPROVALS MAY NOT BE AUTHORIZED UNTIL THIS INITIAL APPROVAL BY THE INSPECTION AGENCY IS MADE.
- TRENCHES FOR THE CONSTRUCTION OF UTILITIES IS LIMITED TO THREE PIPE LENGTHS OR THAT WHICH SHALL BE BACK-FILLED AND STABILIZED WITHIN ONE WORKING DAY, WHICHEVER IS SHORTER.

SEQUENCE OF CONSTRUCTION

- OBTAIN GRADING PERMIT.
- INSTALL SEDIMENT CONTROLS AS SHOWN ON PLAN.
- PERFORM NECESSARY GRADING AND STABILIZE THE SITE.
- AFTER THE SITE IS STABILIZED AND PERMISSION IS GRANTED FROM THE SEDIMENT CONTROL INSPECTOR, REMOVE SEDIMENT CONTROLS AND STABILIZE ANY REMAINING DISTURBED AREAS.

TEMPORARY SEEDING NOTES

APPLY TO GRADED OR CLEARED AREAS LIKELY TO BE RESTORED WHERE A SHORT-TERM VEGETATIVE COVER IS NEEDED.

SEEDING PREPARATION

LOOSEN UPPER THREE INCHES OF SOIL BY RAKING, DISCING OR OTHER ACCEPTABLE MEANS BEFORE SEEDING. IF NOT PREVIOUSLY LOOSENED.

SOIL AMENDMENTS

APPLY 500 LBS. PER ACRE 10-10-10 FERTILIZER (4 LBS./1000 SQ. FT.)

SEEDING

FOR THE PERIODS MARCH 1 THROUGH APRIL 30, AND AUGUST 15 THROUGH NOVEMBER 15, SEED WITH 1 1/2 BUSHEL PER ANNUAL RYE (3.2 LBS./1000 SQ.FT.) FOR THE PERIOD MAY 1 THRU AUGUST 14, SEED WITH 3 LBS./ACRE OF WEEPING LOVEGRASS (07 LBS./1000SQ.FT.) FOR THE PERIOD NOVEMBER 16 THRU FEBRUARY 28. PROTECT SITE BY APPLYING 2 TONS PER ACRE OF WELL ANCHORED STRAW MULCH AND SEED AS SOON AS POSSIBLE IN THE SPRING OR USE SOO.

MULCHING

APPLY 1 1/2 TO 2 TONS PER ACRE (70 TO 90 LBS./1000 SQ.FT.) OF UNROTTED SMALL GRAIN STRAW IMMEDIATELY AFTER SEEDING. ANCHOR MULCH IMMEDIATELY AFTER APPLICATION USING MULCH ANCHORING TOOL OR 200 GALLONS PER ACRE (5 GAL./1000 SQ.FT.) OF EMULSIFIED ASPHALT ON FLAT AREAS, ON SLOPES 0 FEET OR HIGHER, USE 340 GALLONS PER ACRE (8 GAL./1000 SQ.FT.) FOR ANCHORING.

REFER TO THE 1989 MARYLAND STANDARDS AND SPECIFICATION FOR SOIL EROSION AND SEDIMENT CONTROL FOR RATE AND METHODS NOT COVERED.

PERMANENT SEEDING NOTES

ALL DISTURBED AREAS SHALL BE STABILIZED AS FOLLOWS:

SEEDING PREPARATION

LOOSEN UPPER THREE INCHES OF SOIL BY RAKING, DISCING OR OTHER ACCEPTABLE MEANS BEFORE SEEDING.

SOIL AMENDMENTS

APPLY TWO TONS PER ACRE DOLOMITIC LIMESTONE (92 LBS./1000 SQ.FT.) AND 500 LBS. PER ACRE 0-20-20 FERTILIZER (4 LBS./1000 SQ.FT.) OR 500 LBS. PER ACRE 0-20-20 FERTILIZER INTO UPPER THREE INCHES OF SOIL, AT TIME OF SEEDING. APPLY 400 LBS. PER ACRE 30-0-0 UREAFORM FERTILIZER (9 LBS./1000 SQ.FT.) AND 500 LBS. PER ACRE (4.5 LBS./1000 SQ.FT.) OF 10-20-20 FERTILIZER.

SEEDING

FOR THE PERIODS MARCH 1 THROUGH APRIL 30, AND AUGUST 1 THROUGH OCTOBER 15, SEED WITH 100 LBS. PER ACRE (2.3 LBS./1000 SQ.FT.) OF KENTUCKY 31 TALL FESCUE, FOR THE PERIOD MAY 1 THROUGH JULY 31, SEED WITH 60 LBS./ACRE (1.4 LBS./1000 SQ.FT.) KENTUCKY 31 TALL FESCUE AND 2 LBS. PER ACRE (0.05 LBS./1000 SQ.FT.) OF WEEPING LOVEGRASS. DURING THE PERIOD OF OCTOBER 16 THROUGH FEBRUARY 28, PROJECT SITE BY: OPTION (1) - TWO TONS PER ACRE OF WELL ANCHORED STRAW MULCH AND SEED AS SOON AS POSSIBLE IN THE SPRING; OPTION (2) - USE 500 GALLONS PER ACRE OF WEEPING LOVEGRASS. SEED WITH 100 LBS./ACRE KENTUCKY 31 TALL FESCUE AND MULCH WITH TWO TONS/ACRE WELL ANCHORED STRAW. ALL SLOPES SHOULD BE HYDROSEEDED.

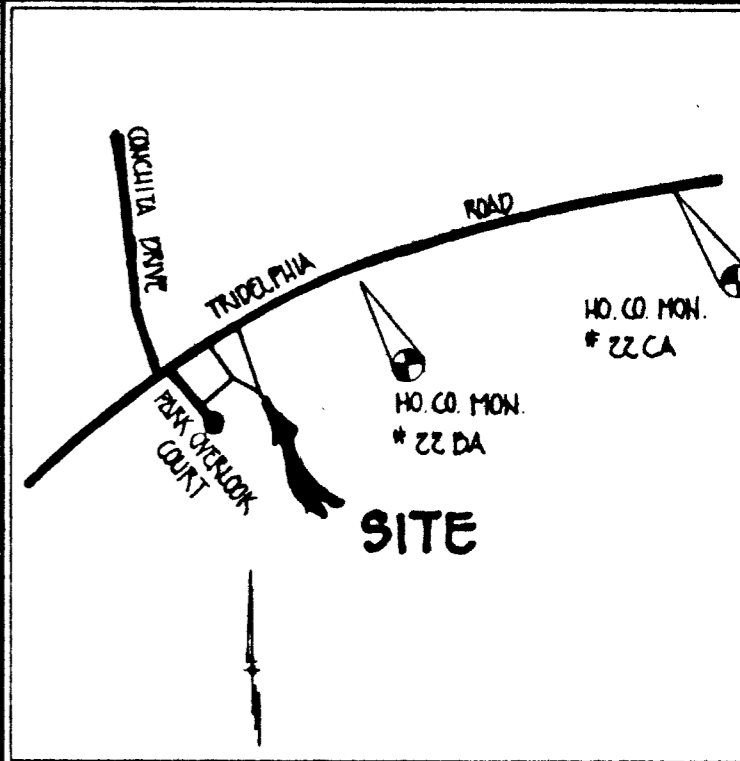
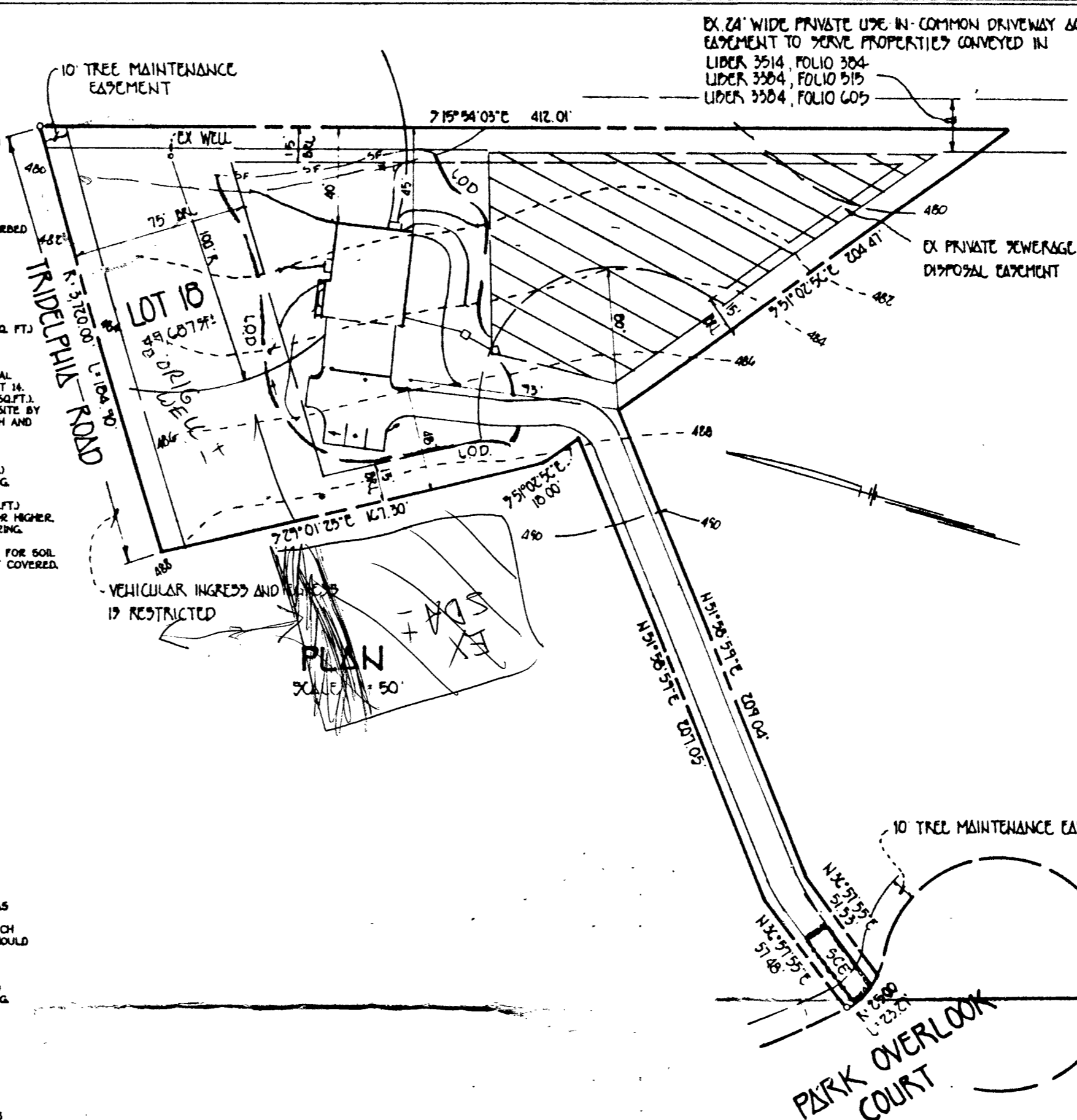
MULCHING

APPLY 1 1/2 TO 2 TONS PER ACRE (90 TO 90 LBS./1000 SQ.FT.) OF UNROTTED SMALL GRAIN STRAW IMMEDIATELY AFTER SEEDING. ANCHOR MULCH IMMEDIATELY AFTER APPLICATION USING MULCH ANCHORING TOOL OR 200 GALLONS PER ACRE (5 GAL./1000 SQ.FT.) OF EMULSIFIED ASPHALT ON FLAT AREAS, ON SLOPES 0 FEET OR HIGHER USE 340 GALLONS PER ACRE (8 GAL./1000 SQ.FT.) FOR ANCHORING.

MAINTENANCE

INSPECT ALL SEEDING AREAS AND MAKE NEEDED REPAIRS, REPLACEMENTS AND RESEEDINGS.

* FOR PUBLIC PONDS SUBSTITUTE CHEMUNG CROWNVECH AT 15 LBS./ACRE AND KENTUCKY 31 TALL FESCUE AT 40 LBS./ACRE AS THE SEEDING REQUIREMENT. OPTIMUM SEEDING DATE FOR THIS MIXTURE IS MARCH 1 TO APRIL 30.



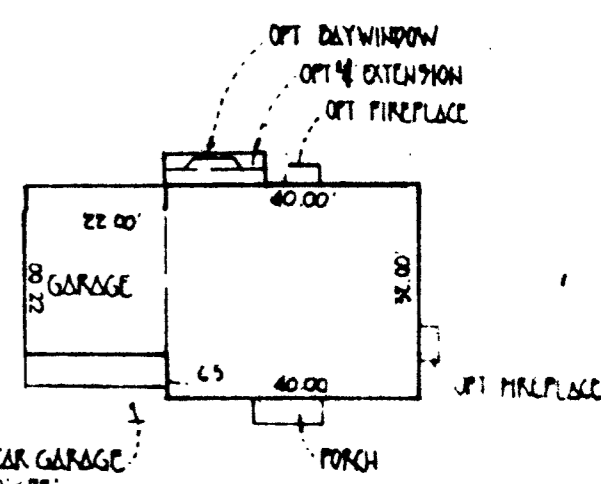
VICINITY MAP
SCALE: 1"=120'

GENERAL NOTES

- SEPTIC CASEMENT SUBJECT TO HOWARD COUNTY HEALTH DEPARTMENT
- PROPOSED 1500 GALLON SEPTIC TANK
- FIRST FLOOR ELEVATION: 487.50
- BASEMENT ELEVATION: 480.50
- INVERT AT SEPTIC TANK: 485.0
- INVERT OUT AT SEPTIC TANK: 485.1
- PROPOSED GRADE OVER SEPTIC TANK: 486.0
- INVERT AT DISTRIBUTION BOX: 482.5
- EXISTING GROUND OVER DISTRIBUTION BOX: 485.5
- LENGTH OF TRENCH TO BE DETERMINED AT TIME OF SEPTIC PERMIT ISSUANCE.
- CONTRACTOR / BUILDER TO VERIFY ELEVATIONS IN FIELD BEFORE BEGINNING ANY CONSTRUCTION.
- THERE IS NO BASEMENT SERVICE TO SEPTIC FIELD.

Approved Septic System Plan
Howard County Health Department

[Signature]
Date: 2/19/97



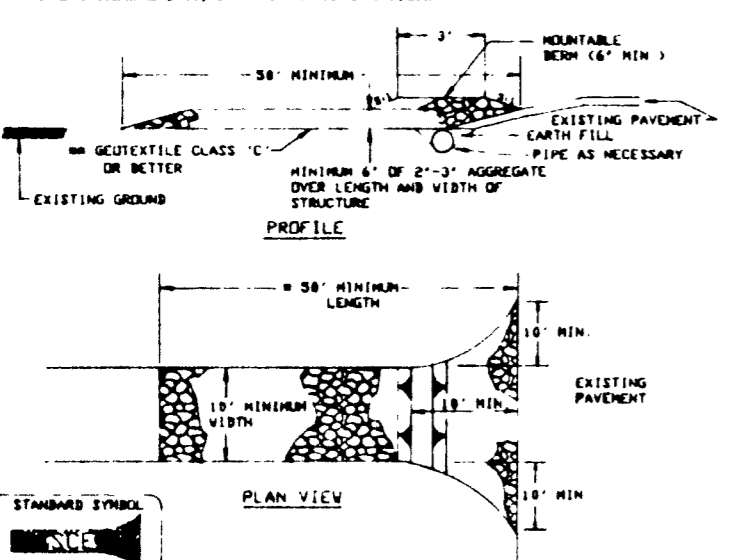
THE FENWICK

PLAN TO ACCOMPANY APPLICATION
FOR BUILDING PERMIT
BENSON BRANCH ESTATES
LOT 10

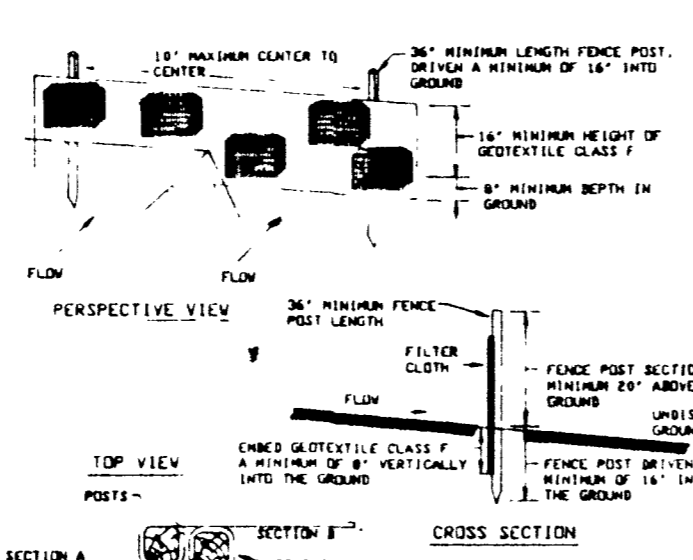
TAX MAP 22
THIRD ELECTION DIST.
SCALE: AS SHOWN

P/O PARCEL 16
HOWARD COUNTY, MARYLAND
DATE: JANUARY 30, 1997

PLAN
SCALE: 1"=30'



- Length - minimum of 30' (40' for single residence lots)
- Width - 18" minimum, should be placed at the existing road to provide a turning radius.
- Geotextile fabric (filter cloth) shall be placed over the existing ground prior to placing stone. The plan approval authority may not require single family residences to use geotextile.
- Stone - crushed aggregate (2" to 3") or reclaimed or recycled concrete equivalent shall be placed at least 6" deep over the length and width of the entrance.
- Surface water - all surface water flowing to or diverted toward construction entrances shall be piped through the entrance, maintaining positive drainage. Pipe installed through the stabilized construction entrance shall be protected with a roundable berm with 3:1 slope and a minimum of 6" of stone over the pipe. Pipe shall be sized according to the drainage. When the pipe is located at a high spot and has no drainage to convey a pipe will not be necessary. Pipe should be sized according to the amount of runoff to be conveyed. A 6" minimum shall be required.
- Location - A stabilized construction entrance shall be located at every point where construction traffic enters or leaves a construction site. Vehicles leaving the site must travel over the entire length of the stabilized construction entrance.



- Fence posts shall be a minimum of 36" long driven 16" minimum into the ground. Wood posts shall be 1 1/2" x 1 1/2" square (minimum cut, or 1 3/4" diameter (minimum round) and shall be of some quality hardwood. Steel posts will be standard I or U section height not less than 1.00 pond per linear foot.
- Geotextile shall be fastened securely to each fence post with wire ties or staples at top and mid-section and shall meet the following requirements for Geotextile Class F:

| | | |
|----------------------|---------------------------------|----------------|
| Tensile Strength | 80 lbs/in (min.) | Test: MSMT 599 |
| Tensile Modulus | 28 lbs/in (min.) | Test: MSMT 599 |
| Flow Rate | 0.3 gal / sq ft / minute (max.) | Test: MSMT 302 |
| Filtering Efficiency | 75% (min.) | Test: MSMT 302 |
- Where ends of geotextile fabric come together, they shall be overlapped, folded and stapled to prevent sediment bypass.
- Silt fence shall be inspected after each rainfall event and maintained when bulges occur or when sediment accumulation reaches 50% of the fabric height.

FISHER, COLLINS & CARTER, INC.
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS
ANTENNA SQUARE OFFICE PARK, 10272 BALTIMORE NATIONAL PKE.
ELLICOTT CITY, MARYLAND 21042
(410) 461-2855

C1 0256 SEQUENCE NO. (MDE 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 ON ALL CARDS)

FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE

COUNTY NUMBER A50294-C

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED 032096

Depth of Well 365

PERMIT NO. FROM "PERMIT TO DRILL WELL" H0-93-0284

OWNER Benson Branch LLC STREET OR RD Benson Estates Court TOWN Glenelg SUBDIVISION Benson Branch Est SECTION LOT 18

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entries for Top Soil, Sandy, Sand Stone, MICKA, Sand Stone, MICKA.

GROUTING RECORD: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL (CM), CEMENT (45-46), BENTONITE CLAY (BC), NO. OF BAGS 17, NO. OF POUNDS 1700, GALLONS OF WATER 10.9, DEPTH OF GROUT SEAL 30 ft.

CASING RECORD: casing types insert appropriate code below. Includes codes ST (STEEL), CO (CONCRETE), PL (PLASTIC), OT (OTHER).

MAIN CASING TYPE: PL, Nominal diameter top (main) casing 6, Total depth of main casing 48 ft.

OTHER CASING (if used) table with columns for diameter inch and depth (feet) from to.

SCREEN RECORD: screen type or open hole insert appropriate code below. Includes codes ST (STEEL), BR (BRASS BRONZE), PL (PLASTIC), HO (OPEN HOLE), OT (OTHER).

NUMBER OF UNSUCCESSFUL WELLS: 0, WELL HYDROFRACTURED (Y/N)

CIRCLE APPROPRIATE LETTER: A (WELL WAS ABANDONED AND SEALED), 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...

TYPE: MWD/MS/MGD, DRILLERS LIC. NO. 116, Signature: Ralph Wayne

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION), LIC. NO. 117, Signature: Ralph E. Wayne

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

DEPTH (nearest ft.) table with columns 1-21, 23-26, 30-32, 36-38, 39-41, 45-47, 51. Includes SLOT SIZE 1, 2, 3 and DIAMETER OF SCREEN.

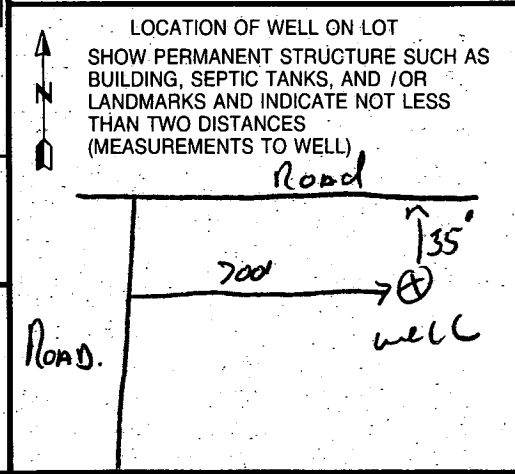
GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.), W Q (74, 75, 76)

TELESCOPE CASING, LOG INDICATOR, OTHER DATA

PUMPING TEST: HOURS PUMPED 6, PUMPING RATE 2, METHOD USED TO MEASURE PUMPING RATE Bucket, WATER LEVEL BEFORE PUMPING 32 ft, WHEN PUMPING 28.5 ft, TYPE OF PUMP USED (for test) S (submersible)

PUMP INSTALLED: DRILLER WILL INSTALL PUMP (YES/NO), TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29, CAPACITY: GALLONS PER MINUTE, PUMP HORSE POWER, PUMP COLUMN LENGTH, CASING HEIGHT (+ above, - below) LAND SURFACE (nearest foot)



ION SCOTT

LOT 1B

EX. 50' R/W

LOT 2A

LOT 1A

C.E. WEBER 657-64

Signed Percolation Certification Plat

N 64°58'38" E 35.52'

VEHICULAR INGRESS & EGRESS IS RESTRICTED

ROAD

5. RESTRICTED

N 56°38'24" E

809.65'

502

501

596

EXISTING DRIVEWAY TO BE REMOVED ACROSS LOTS 4 THRU 8

LOT 8
51,500 Sq.Ft.*

LOT 9
51,000 Sq.Ft.*

EXISTING DRIVEWAY TO BE ABANDONED

LOT 7
40,700 Sq.Ft.*

VISUAL 'A'

VISUAL 'B'

LOT 3
43,100 Sq.Ft.*

A-50294B

OPEN SPACE LOT 17
8.03 AC

LOT 4
59,100 Sq.Ft.*

LOT 6
58,000 Sq.Ft.*

EXISTING WELL

A-5042B

A-50387A

LOT 5
60,000 Sq.Ft.*

N 15°52'25" W 36.01'

355.60'

S 50°40'40" W

585.31'

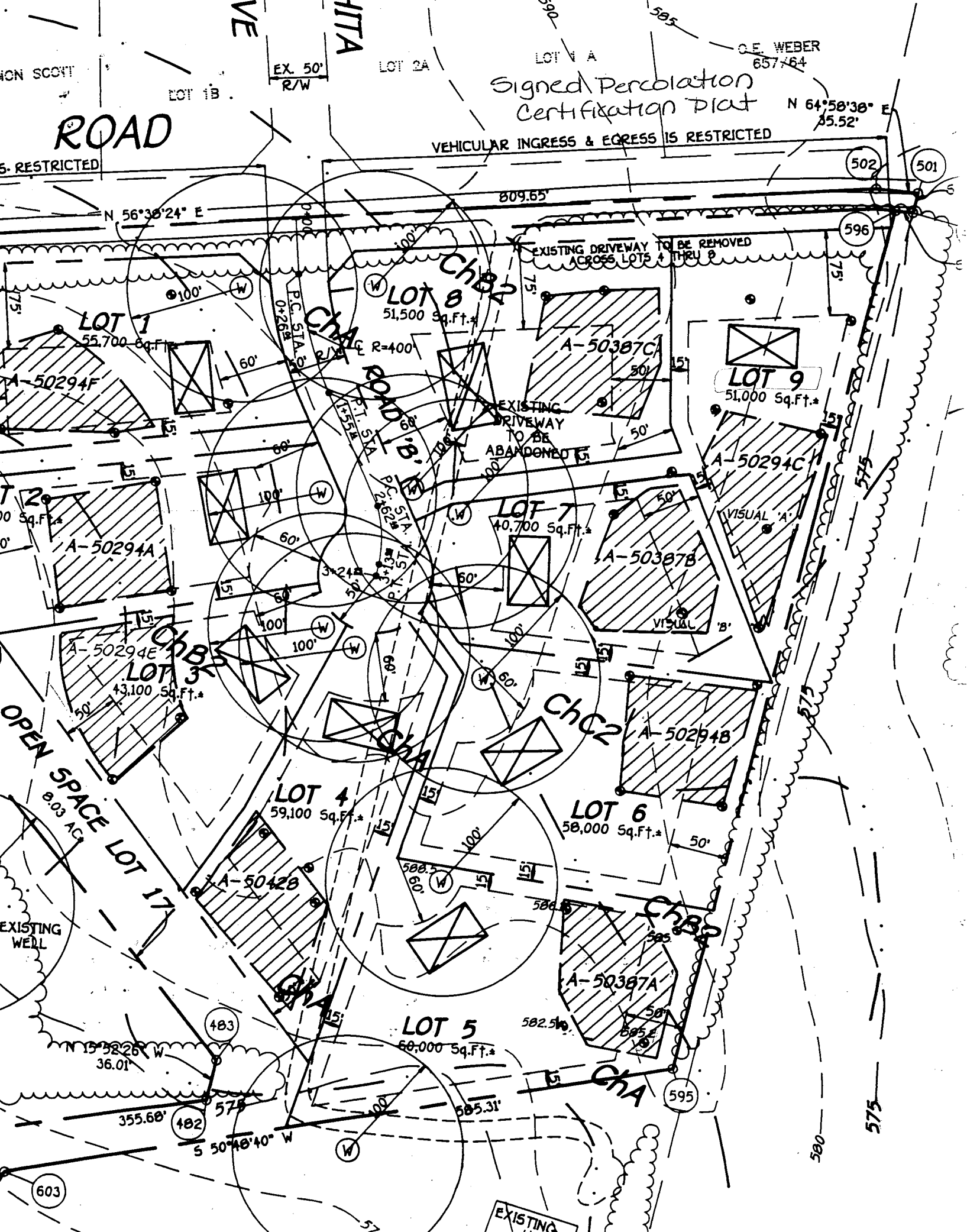
595

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580

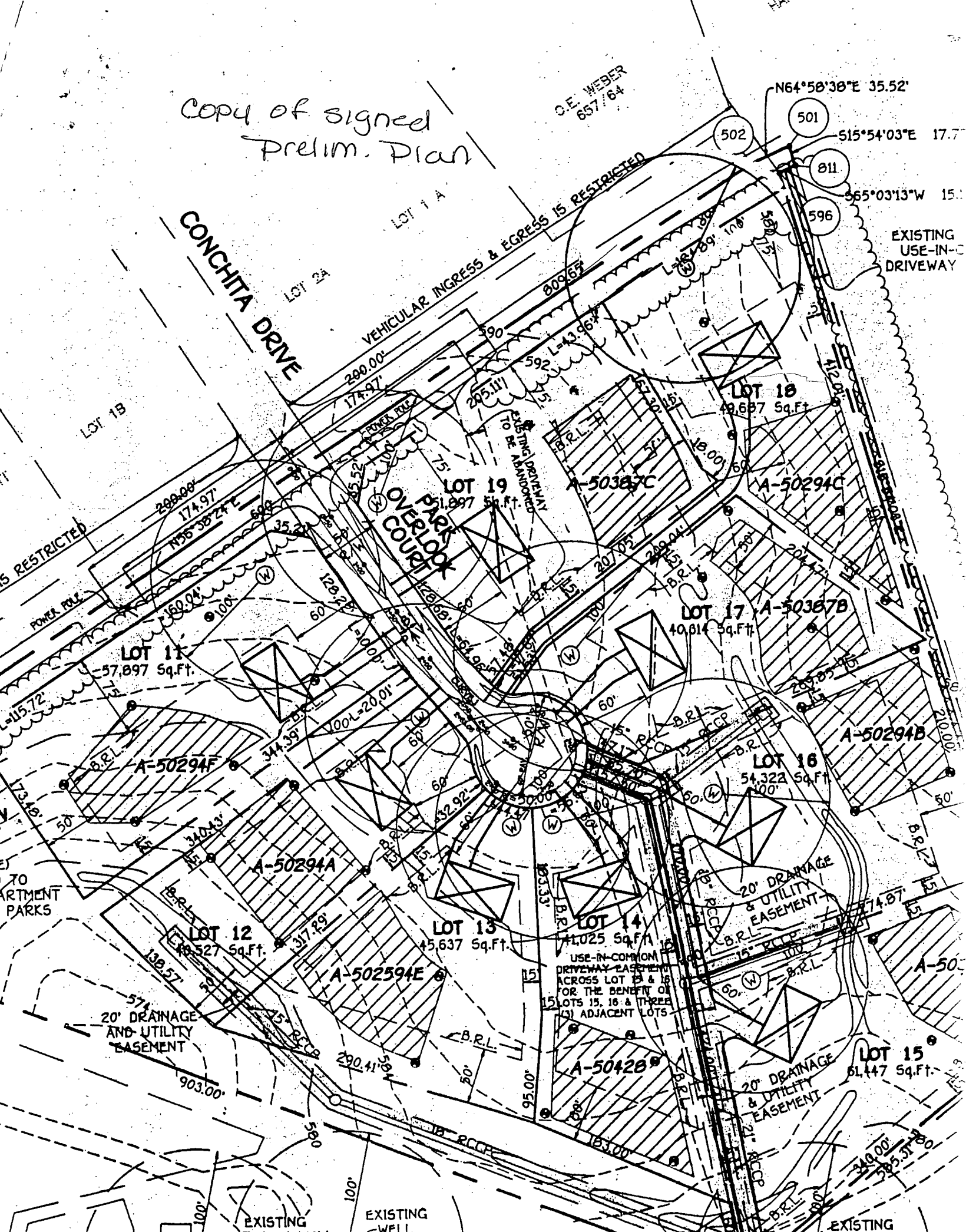
575

EXISTING



Copy of signed
Prelim. Plan

C.E. WEBER
657/64



CONCHITA DRIVE

VEHICULAR INGRESS & EGRESS IS RESTRICTED

OVERLAP COURTYARD

LOT 11
57,897 Sq.Ft.

LOT 19
51,897 Sq.Ft.

LOT 18
48,687 Sq.Ft.

LOT 17
40,814 Sq.Ft.

LOT 18
54,322 Sq.Ft.

LOT 13
45,637 Sq.Ft.

LOT 14
41,025 Sq.Ft.

LOT 15
61,447 Sq.Ft.

20' DRAINAGE
& UTILITY
EASEMENT

20' DRAINAGE
& UTILITY
EASEMENT

20' DRAINAGE
& UTILITY
EASEMENT

USE-IN-COMMON
DRIVEWAY EASEMENT
ACROSS LOT 13 & 18
FOR THE BENEFIT OF
LOTS 13, 16 & THREE
(3) ADJACENT LOTS

EXISTING

EXISTING
WELL

EXISTING

EXISTING
USE-IN-
DRIVEWAY

N64°50'30"E 35.52'

S15°54'03"E 17.7

S65°03'13"W 15.1

RESTRICTED

TO
ARTMENT
PARKS

LOT 1B

LOT 2A

LOT 1A

502

501

811

596

POWER POLE

POWER POLE

JACOBS

571

903.00'

100'

174.97'

174.97'

344.39'

138.57'

290.41'

100'

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TO
ARTMENT
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LOT 2A

LOT 1A

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APPLICATION

PERCOLATION TESTING

A 50294C

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

DISTRICT _____

DATE 9/23/94

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Brandt c/o Land Design & Development, Inc. Hamilton Reed LLC

ADDRESS 10805 Hickory Ridge Road PHONE (410) 740-2100

AGENT OR PROSPECTIVE BUYER Columbia, MD 21044

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Brandt Property LOT NO. 2 18

ROAD AND DESCRIPTION Triadelphia Road (3705 Park Overlook Court)

TAX MAP 22 PARCEL # 16, 398, 399

SIZE OF LOT 40,000/60,000 TYPE BLDG. single family dwelling - 4 Br
(SINGLE FAMILY DWELLING OR COMMERCIAL)

BLDG. PERMIT SIGNED
AND RETURNED 9/19/94
Serial # BD 112017

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT. [Signature]
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

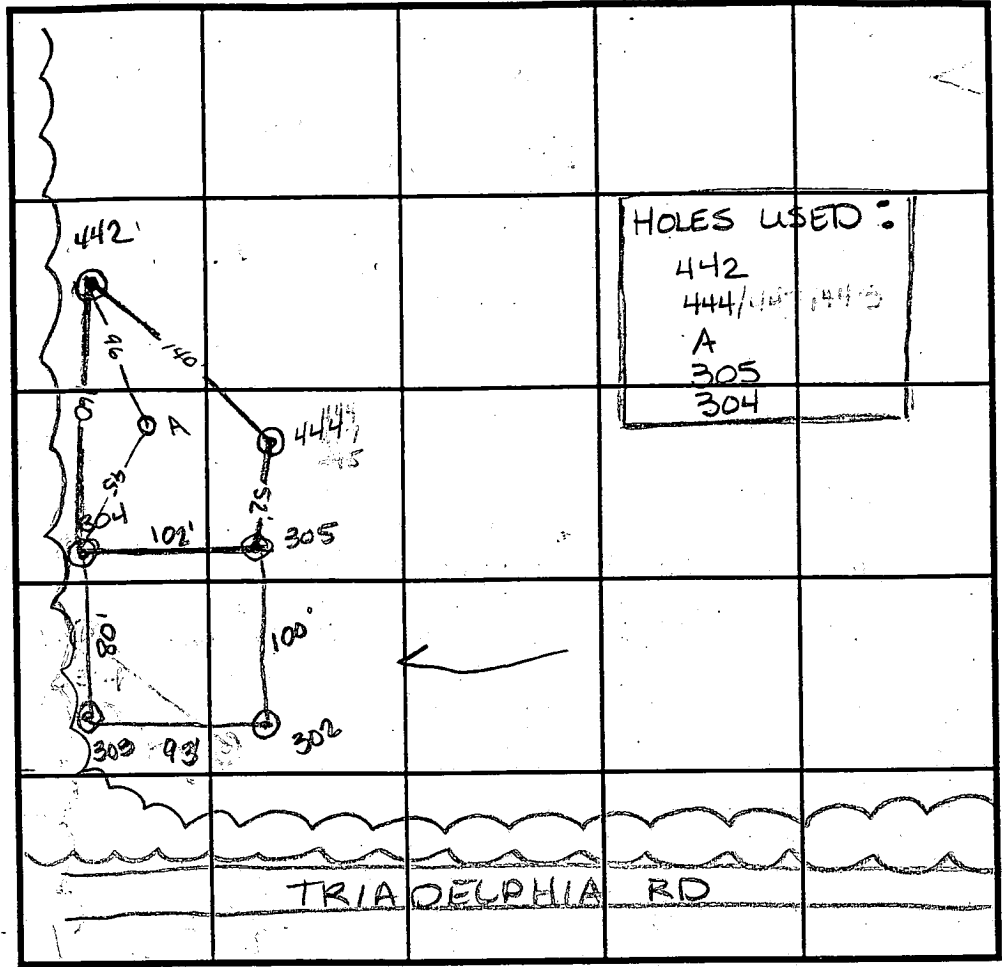
A50294C
COUNTY #

Lot 2

SOIL PROFILE
304
0' dark red/brn CSL
3' bright red SL mica 15-20% shale OK

305, 303
3' red/brn CSL
3' red/tan SL

302
no distinct clay layer would perc at 1-2' brownish red SSIL mica OK



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE
442
0' brn c
3' bright red SL mica
6' yellow brn SL mica <50% saprolite frags
12' red brn CL mica
3' yellow brn SL
55' pink SL 10% mica - saprolite frags

| DATE | TEST NO. | DEPTH | PRE-WET | | TEST - 1" DROP | | TIME |
|----------|----------|----------------|--------------------|--------------------|--------------------|--------------------|-----------|
| | | | START | STOP | START | STOP | |
| 9-30-94 | 304 | 3' $\sqrt{12}$ | 8:33 ⁴⁵ | 8:34 ⁴⁵ | 8:34 ⁴⁵ | 8:36 | 1 1/4 min |
| | 304 | repour | 8:36 ³⁰ | 8:37 ⁴⁵ | 8:37 ⁴⁵ | 8:39 ³⁰ | 1 3/4 min |
| | 303 | 5' $\sqrt{12}$ | 8:43 ⁰⁵ | 8:43 ⁴⁵ | 8:43 ⁴⁵ | 8:44 ¹⁵ | 30 sec |
| | 303 | repour | 8:44 ¹⁵ | 8:45 ¹⁵ | 8:45 ¹⁵ | 8:46 ³⁰ | 1 1/4 min |
| | 305 | 3' $\sqrt{12}$ | 8:55 ³⁰ | 8:56 ⁴⁵ | 8:56 ⁴⁵ | 8:59 | 2 1/4 min |
| | 305 | 7' $\sqrt{12}$ | 8:54 ²⁰ | 8:55 ⁴⁵ | 8:55 ⁴⁵ | 8:56 ³⁰ | 1 3/4 min |
| 10-18-94 | 442 | 4' $\sqrt{12}$ | 5:11 | 5:12 ¹⁵ | 5:12 ¹⁵ | 5:13 ³⁰ | 1 1/4 min |
| | 444/45 | 4' $\sqrt{12}$ | 5:28 ⁴⁵ | 5:29 ⁰⁵ | 5:29 ⁰⁵ | 5:29 ⁴⁵ | 40 sec |
| | 444/45 | repour | 5:30 | 5:31 | 5:31 | 5:32 | 1 min |
| | A | Visual | to 12' | | | | OK |

REMARKS shallow only due to fast percs
 TYPE OF SOIL _____
 TESTED BY Amy McMillen ALSO PRESENT Mark Reich
 TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 2 min TRENCH WIDTH 3
 INLET DEPTH 2.0 MAXIMUM BOTTOM DEPTH 4.0 SQ. FT./BEDROOM 180 ft²

Building Address 3705 PARK OVERLOOK CRT
ELLICOTT CITY, MD. 21042

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

Census Tract 6030 Subdivision BENSON BRANCH ESTATES

Section _____ Area _____ Lot 1B

Tax Map 72 Parcel 558 Grid 10

Zoning R1DEO Map Coordinates 10B9 Lot size 1.14 AC.

Property Owner's Name WILLIAM & ALVAN BEALL
 Address 3705 PARK OVERLOOK CRT
 City ELLICOTT CITY State MD Zip Code 21042
 Home Phone 410-531-7170 Work Phone _____
 Applicant's Name & Mailing Address, (if other than stated hereon):
SUNRISE PREMIERE POOLS
1460 BITCHIE HWY, SUITE: 108
ARNOLD, MD, 21012
 Phone 1-877-349-POOL Fax _____

Existing Use DETACHED RESID.
 Proposed Use " " w/pool
 Estimated Construction Cost \$ 20,000

Description of Work INSTALL IN THE REAR YARD AN INGROUND 32'X37' POOL (700", 3.5'-7' DEEP) w/FENCE(300')

Contractor Company SUNRISE PREMIERE
 Contact Person DON SEYFFERTH
 Address 1460 BITCHIE HWY, SUITE: 108
 City ARNOLD State MD Zip Code 21012
 License No. UNIC #45498
 Phone 1-877-349-POOL Fax _____

Occupant or Tenant THE OWNER PER LODG
 Contact Name SAME AS ABOVE
 Address _____
 City _____ State _____ Zip Code _____
 Phone _____ Fax _____

Engineer or Architect Company C.C. M. INC.
 Contact Person A. ZERDI
 Address P.O. BOX: 333
 City PHOENIX State AZ Zip Code 21131
 Phone 1-410-592-5153 Fax 410-592-3444

BUILDING DESCRIPTION - COMMERCIAL **BUILDING DESCRIPTION (RESIDENTIAL)**

| Building Characteristics | Utilities |
|--|--|
| Height: _____ | Water Supply: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private |
| No. of stories: _____ | Sewage Disposal: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private |
| Gross area, sq. ft. per floor: _____ | Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Use group: _____ | Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> |
| Construction type: _____ <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular | Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression # of Heads _____ |

| Building Characteristics | Utilities |
|---|--|
| SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ | Water Supply: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private |
| 1st floor: _____ | Sewage Disposal: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private |
| 2nd floor: _____ | Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Basement: <u>32'x37' pool</u> | Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> |
| Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms _____ | Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other NFPA #13D _____ NFPA #13R _____ Other: _____ |
| 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: _____ |
| Other Structure: _____ Dimensions: _____ Footings: _____ Roof: _____ | State Certified Modular <input type="checkbox"/> Manufactured Home <input type="checkbox"/> |

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 THERETO; (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 [Signature] Title/Company [Signature]

Print Name A. ZERDI Date 1/23/03

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
 ** PLEASE WRITE NEATLY AND LEGIBLY **
 - FOR OFFICE USE ONLY -

| AGENCY | DATE | SIGNATURE APPROVAL | DPZ SETBACK INFORMATION | PROPERTY ID# |
|--|----------------|--------------------|--|--|
| <input checked="" type="checkbox"/> Land Development, DPZ | | | Front: _____ | 28149 |
| <input checked="" type="checkbox"/> State Highways | | | Rear: _____ | |
| <input checked="" type="checkbox"/> Building Official | <u>1/23/03</u> | <u>[Signature]</u> | Side: _____ | |
| <input checked="" type="checkbox"/> Dev. Engineering, DPZ | | | Side St.: _____ | |
| <input checked="" type="checkbox"/> Health | <u>3/16/03</u> | <u>[Signature]</u> | All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/> | |
| <input checked="" type="checkbox"/> Fire Protection | | | Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/> | |
| Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/> | | | Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/> | Filing fee \$ _____ Permit fee \$ <u>250</u> Excise tax \$ _____ Sub-total paid \$ _____ Add'l permit fee \$ _____ TOTAL FEES \$ <u>250</u> Balance due \$ _____ Check # <u>4639</u> Validation # <u>19929</u> |
| CONTINGENCY CONSTRUCTION START: <input type="checkbox"/> | | | Lot Coverage for New Town Zone _____ | Accepted by <u>[Signature]</u> |
| ONE STOP SHOP: <input type="checkbox"/> | | | SDP/Red-line approval date _____ | |

50294C

"WALK THRU"

APPLICATION

30

HOWARD COUNTY

30

PERMIT APPLICATION

DEPARTMENT OF INSPECTIONS, LICENSES & PERMIT
3430 COURT HOUSE DRIVE, ELLICOTT CITY, MARYLAND 21043

SERIAL NUMBER

30007976

BUILDING ADDRESS (HOUSE NO., STREET, TOWN OR AREA)

3705 Park Overlook Court
Ellicott City, MD 21042 28149

GRADING/SEDIMENT CONTROL YES NO

SDP #

DESCRIPTION OF WORK AUTHORIZED

2 level deck

| LOT NO. | PARCEL NO. | SEC. | AREA | BLOCK NO. | LIBER | FOLIO |
|--------------|------------|------|----------|-------------|------------|-------|
| SUB DIVISION | | ZONE | ZONE MAP | ELEC. DIST. | CENSUS TR. | |

OWNER NAME AND ADDRESS: Alan Small and Wife
3705 Park Overlook Ct
Ellicott City, MD 21042
PHONE NO: 908-311170

OCCUPANT'S NAME AND ADDRESS: OWNER
PHONE NO:

ARCHITECT OR ENGINEER'S NAME AND ADDRESS: NONE
PHONE NO:

CONTRACTOR'S NAME AND ADDRESS: Jodi Koenig
313 Miller Ave
Crownsville, MD 21228
PHONE NO: 21228

EXISTING USE: Single Family Home
PROPOSED USE: Same, with deck

EST. CONSTRUCTION COST: 8,000
LICENSE NUMBER: 35447
PERMIT FEE:

| SIZE OF BLDG. | FRONT | DEPTH | HEIGHT |
|---------------|-------|------------|----------|
| | | | |
| TYPE OF BLDG. | AREA | VOLUME | ROOF |
| B. ROOMS | | | |
| ROOMS | | | |
| BATHS | | | |
| FIREPLACES | | | |
| FOOTINGS | | FOUNDATION | S. WALLS |
| | | | |

| UTILITIES | | | | | |
|------------|--------------|-----|-------------|--------------|----|
| WATER/WELN | SEWER/SEPTIC | GAS | ELECTRICITY | TYPE OF HEAT | AC |
| | | | | | |

I have carefully examined and read this application and know the same is true and correct, and that is doing this work, all provisions of Howard County Ordinances and the State Laws of Maryland will be complied with, whether specified or not; and I will notify the Department of Inspections, and Permits twenty-four hours in advance when I am ready for the inspections called for elsewhere in the application; and that no work will be covered up until such inspections have been complied with.

SIGNATURE: [Signature]
TITLE: [Title]
DATE: 7-18-97

FOR OFFICE USE ONLY

W/S CODE

DISTANCE IN FEET FROM R/W LINE TO FRONT BUILDING LINE

SIDE YARD (DISTANCE IN FEET FROM SIDE BLDG. LINE TO SIDE PROPERTY LINE)

TO SIDE BUILDING LINE DISTANCE IN FEET, REAR YD. REQUIRING SET

BACK (CORNER LOT ONLY) SDP #

Check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

| FUNCTION | DATE | SIGNATURE APPROVAL |
|-------------------|---------|--------------------|
| ZONING/PLANNING | | |
| SHA | | |
| SEDIMENT/GRADING | | |
| BUILDING OFFICIAL | 9/1/97 | [Signature] |
| WATER & SEWER | | |
| HEALTH DEPT. | 9/18/97 | [Signature] |
| FIRE PROTECTION | | |
| STORM WATER MGM. | | |

CAUTION
To begin construction before a permit placard has been issued and displayed on the job is a violation of the law. Use and occupancy permit must be applied for two weeks before it will be issued.

IMPORTANT: PLEASE SHOW ZIP CODES AND AREA CODES WHEREVER REQUIRED.

LP-69-591

5 OK # 1249

APPROVED: [Signature] DATE: [Date]

Distribution of Copies:
White - Building Official
Green - Planning & Zoning
Yellow - Engineering
Pink - Health Dept.
Gold - S.H.A.

A

LOT 18
 BENSON BEACH
 ESTATES
 HOWARD COUNTY
 MARYLAND

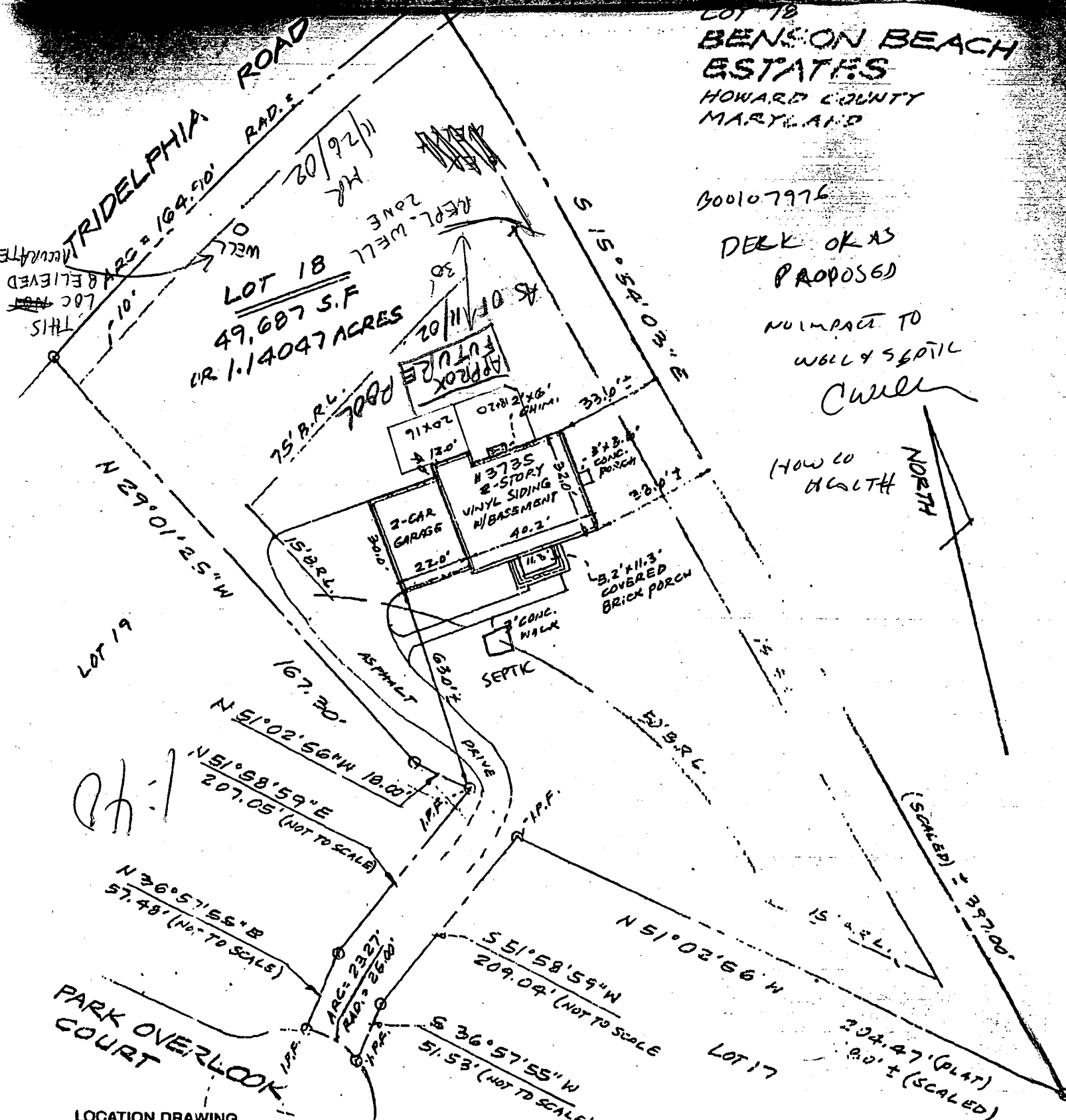
00107976

DECK OK AS
 PROPOSED

NO IMPACT TO
 WELL & SEPTIC
 CULL

HOW TO
 HEALTH

NORTH



LOCATION DRAWING

Plat Ref. No.: _____ at plat 12134 E.D. 03RD
 County HOWARD

NOTES: Plat is of benefit to a consumer only insofar as it is required by a lender or a title insurance company or its agent in connection with contemplated transfer, financing or re-financing; the plat is not to be relied upon for the establishment or location of fences, garages, buildings, or other existing or future improvements; and the plat does not provide for the accurate identification of property boundary lines, but such identification may not be required for the transfer of title or securing financing or re-financing. No

This property is not located in a flood plain as shown on F.E.M.A. Flood Insurance Rate Map. (Subject to the interpretation of the originator) 240044 0021 B

I hereby certify that the position of all the existing improvements on the property shown and described hereon have been established by accepted field practices.

The level of accuracy and accuracy of apparent set back distances is within plus or minus one foot for