

Final
3-30-98
between 3-30-98
6.8
ANYTIME

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

03-322408

P 510179
150179

A 50617AA

DISTRICT 3rd

DATE 6-2-98

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXXXX~~ 410-313-2640

INDEXED

DATE SYSTEM APPROVED 6/8/98

INSPECTOR Paul J. Kelly

Arnold Backhoe & Septic Services IS PERMITTED TO INSTALL ALTER

ADDRESS P.O. Box 15, Woodbine, MD 21797 PHONE 410-795-7873

SUBDIVISION Woodford's Grant LOT 47 ROAD 11363 Barley Field Way

PROPERTY OWNER Trinity Custom Homes PALMATARY

ADDRESS

SEPTIC TANK CAPACITY 1250 GALLONS TOP SEAMED TANK

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 3.5 feet below original grade. Effective area begins at 2 feet below original grade. 1.5 feet of stone below distribution pipe.

LOCATION - Begin trenches 125 feet up the left lot line and 35 feet off that same lot line as seen when facing the lot from Barley Field Way. Run trenches on contour toward the right side of property.

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

PLANS APPROVED BY Kim Maiste/Donna K. Soe REVISED DATE 03/03/98

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

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.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

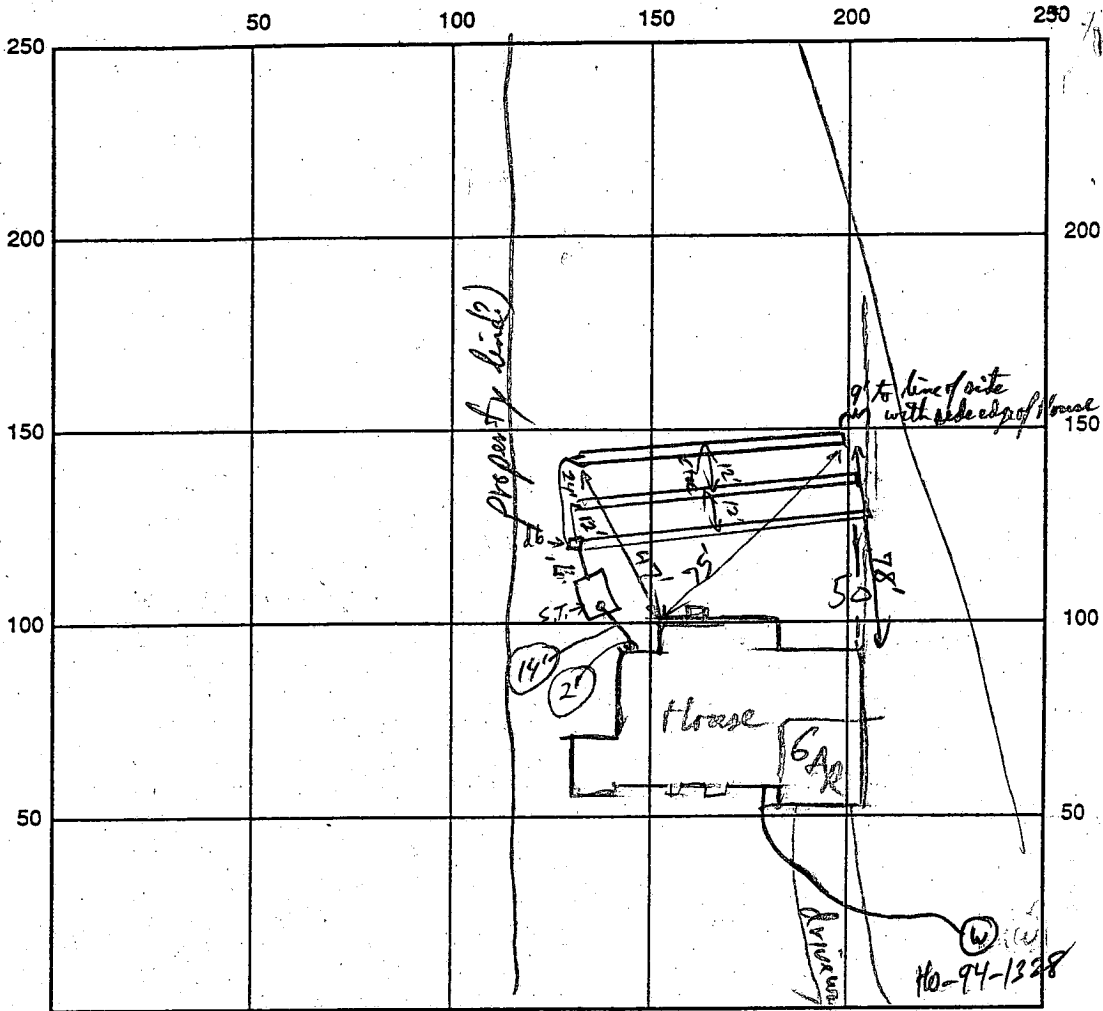
SLIDE PERMIT SIGNED

AND RETURNED 4-7-99

Serial # B00117134

4/3/03 B00141045 FINISH BASEMENT

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
BARLEY FIELD WAY

SEPTIC TANK LEVEL OK 1500 GALLON (Mid Sand) CLEANOUTS _____

DISTRIBUTION BOX LEVEL OK (used auto books)

DRAIN FIELD/TITLE DEPTH 3.5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 2 FT.

EFFECTIVE GRAVEL DEPTH 1.5 FT. TOTAL LENGTH 80/80/80 FT. = 240 L.F.

NUMBER OF TRENCHES 3 ~~ONE SIDEWALK~~ BOTTOM AREA 720 SQ. FT.

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

ABSORBENT AREA _____ SQ. FT.

REMARKS: 6-5-98 OK TO COVER 1ST 2 TRENCHES ST NOT CONNECTED.

6.5 WELL LINE DUG - NOT INSTALLED TO House Connection, Septic Tank

Final Trench OK to cover, OK to connect system. RPP 6/8/98

WPF - pitless adapter + water line OK to cover @ 2 1/2 ft below original grade + 2 ft filler to house

DATE SYSTEM APPROVED 6/8/98 INSPECTOR [Signature]

APPLICATION

PERCOLATION TESTING

A 50617-88

P _____

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

DISTRICT _____

DATE 3-30-95

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 Thomas Powell c/o Land Design & Development, Inc. Trinity Custom Homes

ADDRESS 10805 Hickory Ridge Rd., Columbia 21044 PHONE (410) 740-2100

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Powell Property LOT NO. 18

ROAD AND DESCRIPTION off of Marriottsville Road, Howard County, MD

(11363 BARLEY FIELD WAY)

BLDG. PERMIT

~~NOT RETURNED~~ 3-3-98

Serial # B01109820

TAX MAP 10 PARCEL # 27, 29, 151

SIZE OF LOT 40,000 sq. ft. TYPE BLDG. single family home - 4 Bed
(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. [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

COUNTY #

SOIL PROFILE

0' 1037 1039

1040
B

brn
CSL

2'

1st
tan
Salm
w grey
mica
Shale
saproliite

11'

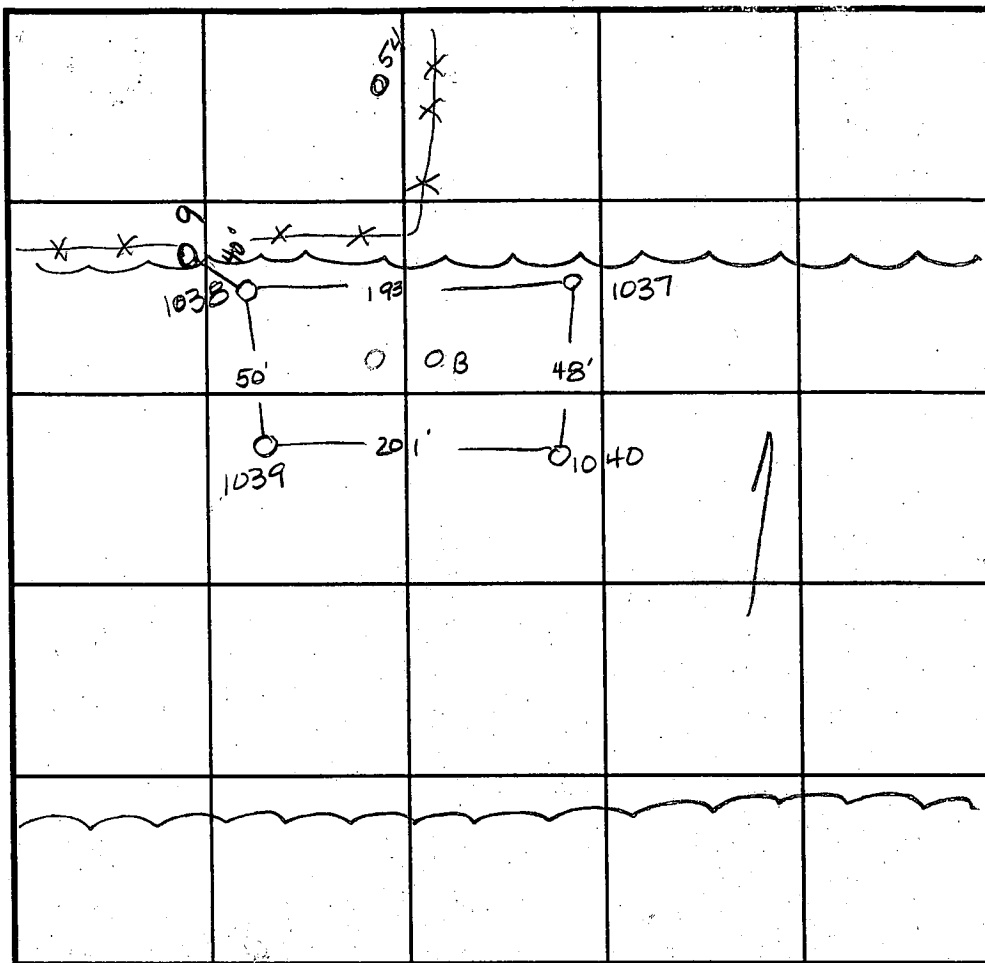
1038

brn
CSL
mica

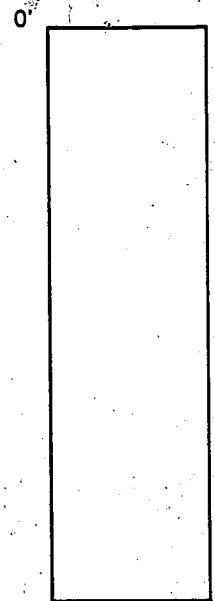
2'

greyish
brn
Salm
from
parent
rock
mica
Shale
saproliite
hard
bottom

9'



SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11-22-94	1037	3' VII'	1:33 ⁴⁵	1:33 ⁵⁰	1:33 ⁵⁰	1:34 ³⁵	1min
	1037	repour	1:35 ¹⁵	1:36 ³⁰	1:36 ³⁰	1:38	1 1/2 min
	1040	Visual	to 11				OK
	B	Visual	to 12'				OK
	1039	6.5' VII 2'	1:43 ¹⁵	1:43 ⁴⁵	1:43 ⁴⁵	1:44 ²⁰	30sec
	1039	repour	1:44 ⁴⁵	1:45 ³⁰	1:45 ³⁰	1:46 ⁴⁵	1 1/4 min
	1039	3.5' VII 2'	1:47	1:49 ¹⁵	1:49 ¹⁵	1:55	5 3/4 min
	1038	2' V 9'	1:50	1:50 ²⁰	1:50 ²⁰	1:50 ⁴⁰	20sec
	1038	repour	1:51	1:51 ³⁰	1:51 ³⁰	1:52	30sec
	1038	repour	1:52 ³⁰	1:53	1:53	1:54	1min

REMARKS

TYPE OF SOIL

TESTED BY Amy McMillen ALSO PRESENT Ketterman

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 4 min TRENCH WIDTH 3'

INLET DEPTH 1.5 MAXIMUM BOTTOM DEPTH 3' SQ. FT./BEDROOM 180 ft²

COUNTY #

SOIL PROFILE

0'
9
no
distinct
clay
layer
dark
brn
salm
micaceous
20%
Saprolite

SOIL PROFILE

0'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

11'
54
orange
brn
clm
1'
orange
brn
Si Salm
10%
shale
very
micaceous

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
5-10-95	9	3' VII	1:47 ³⁰	1:48 ⁴⁵	1:48 ⁴⁵	1:49 ³⁰	15 sec
	9	repour	1:49 ³⁰	1:50 ⁴⁵	1:50 ⁴⁵	1:52 ³⁰	13 1/4 min
	9	repour	1:52 ⁴⁵	1:54 ¹⁵	1:54 ¹⁵	1:56 ¹⁵	2 min
7-17-95	54	3' VII	11:10 ¹⁵	11:11 ³⁰	11:11 ³⁰	11:13 ³⁰	2 min

REMARKS TESTS 9 HAD 12x12" TEST PITS NEED SHOW WERE 25% SLOPE BEGINS

TYPE OF SOIL _____

TESTED BY _____ ALSO PRESENT _____

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

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

11'

C1 09408

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)

COUNTY NUMBER A50617AA

ST/CO USE ONLY. DATE RECEIVED 12/17/97

DATE WELL COMPLETED 12 11 97

DEPTH OF WELL 405 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-1328

OWNER TBI HomeB last name Barley Field Way first name TOWN Marriottsville
STREET OR RFD
SUBDIVISION Woodfords Grant SECTION I LOT 18

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. Rows include Top Soil, Sandy Sandstone, MICKA, Sandstone, MICKA.

GROUTING RECORD
WELL HAS BEEN GROUTED (Y) (N)
TYPE OF GROUTING MATERIAL (Circle one) CEMENT (CM) BENTONITE CLAY (BC)
NO. OF BAGS 45-46 NO. OF POUNDS 800
GALLONS OF WATER 48
DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 28 ft.

CASING RECORD
casing types insert appropriate code below
MAIN CASING TYPE PL Nominal diameter top (main) casing (nearest inch)! 6 Total depth of main casing (nearest foot) 30

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

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

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED (Y) (N)

CIRCLE APPROPRIATE LETTER
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. MS D 116
DRILLERS SIGNATURE

LIC. NO. MS D 112
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

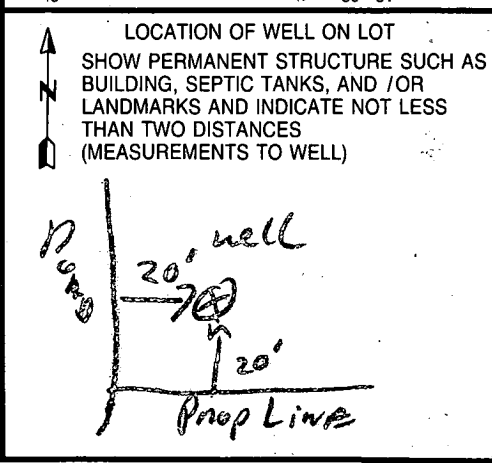
DEPTH (nearest ft.)
E A C H S C R E E N
1 HO 28 405
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76

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

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)
TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST
HOURS PUMPED (nearest hour) 6
PUMPING RATE (gal. per min.) 1.5
METHOD USED TO MEASURE PUMPING RATE Bucket
WATER LEVEL (distance from land surface)
BEFORE PUMPING 22 ft.
WHEN PUMPING 28 ft.
TYPE OF PUMP USED (for test) C centrifugal, S submersible

PUMP INSTALLED
DRILLER WILL INSTALL PUMP (CIRCLE) (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 LAND SURFACE
- below 2 (nearest foot)



B 1 - 8762 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
 40-94-1328
 fill in this form completely

B 3 OWNER INFORMATION

Date Received (APA) 11/13/97

Owner: TBI HOMES INC
 First Name: TBI
 Street or RFD: 6212 DEWON DR
 Town: COLUMBIA MD 21044

B 3 LOCATION OF WELL

8 COUNTY: HOWARD
 23 SUBDIVISION: WOODFORDS GRANT
 SECTION: F LOT: 18
 52 NEAREST TOWN: MARIOTTVILLE
 MILES FROM TOWN: 1 MI

B 4 DRILLER INFORMATION

CIRCLE: MSD/MGD/MWD
 Driller's Name: RALPH MAYNE
 License No. 80: 116
 Firm Name: RALPH MAYNE WELL DRILLING
 Address: 9120 Brown Church Rd Mt Airy
 Signature: Ralph Mayne Date: Nov 11 1997

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

NEAR WHAT ROAD: BANLEY FIELDS WAY

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): 20
 DISTANCE FROM ROAD: ENTER FT OR MI: 47

TAX MAP: _____ BLK: _____ PARCEL: _____

B 2 WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.): 5
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY): 500

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

COUNTY NAME: Howard Co. COUNTY NO: A50617 AA
 STATE SIGNATURE: _____ DATE ISSUED: 11/18/98
 CO SIGNATURE: A McMillen EXP. DATE: 11/18/98
 NORTH GRID: 546000 EAST GRID: 0828000

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)

APPROXIMATE DEPTH OF WELL: 150 FEET
 APPROXIMATE DIAMETER OF WELL: 6" NEAREST INCH

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER:
 1. well
 2.
 3.

WRITE THE BOX NUMBER FROM THE MAP HERE

820
 58046

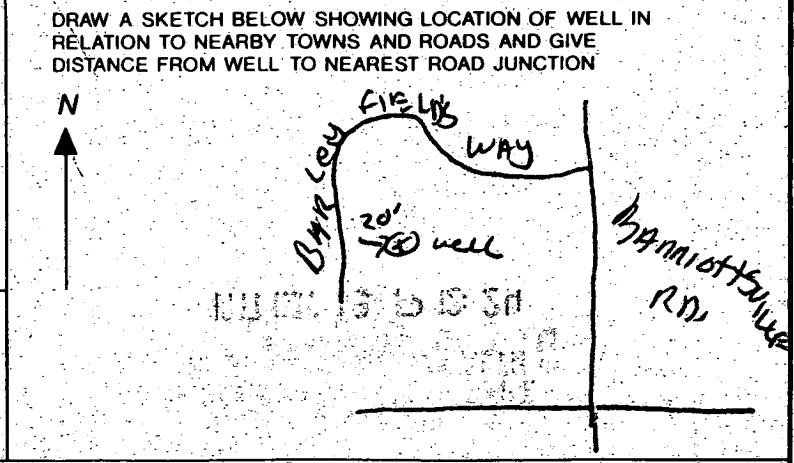
12/1/97 9:30 location OK casing = 30' open = 38' grout = 8' high 12/1/97 RMP

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN
 AIR-ROtary AIR-PERcussion ROTARY (Hydraulic Rotary)
 CABLE REVerse-ROtary DRive-POINT
 other _____

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

THIS WELL WILL NOT REPLACE AN EXISTING WELL
 THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY. 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): _____

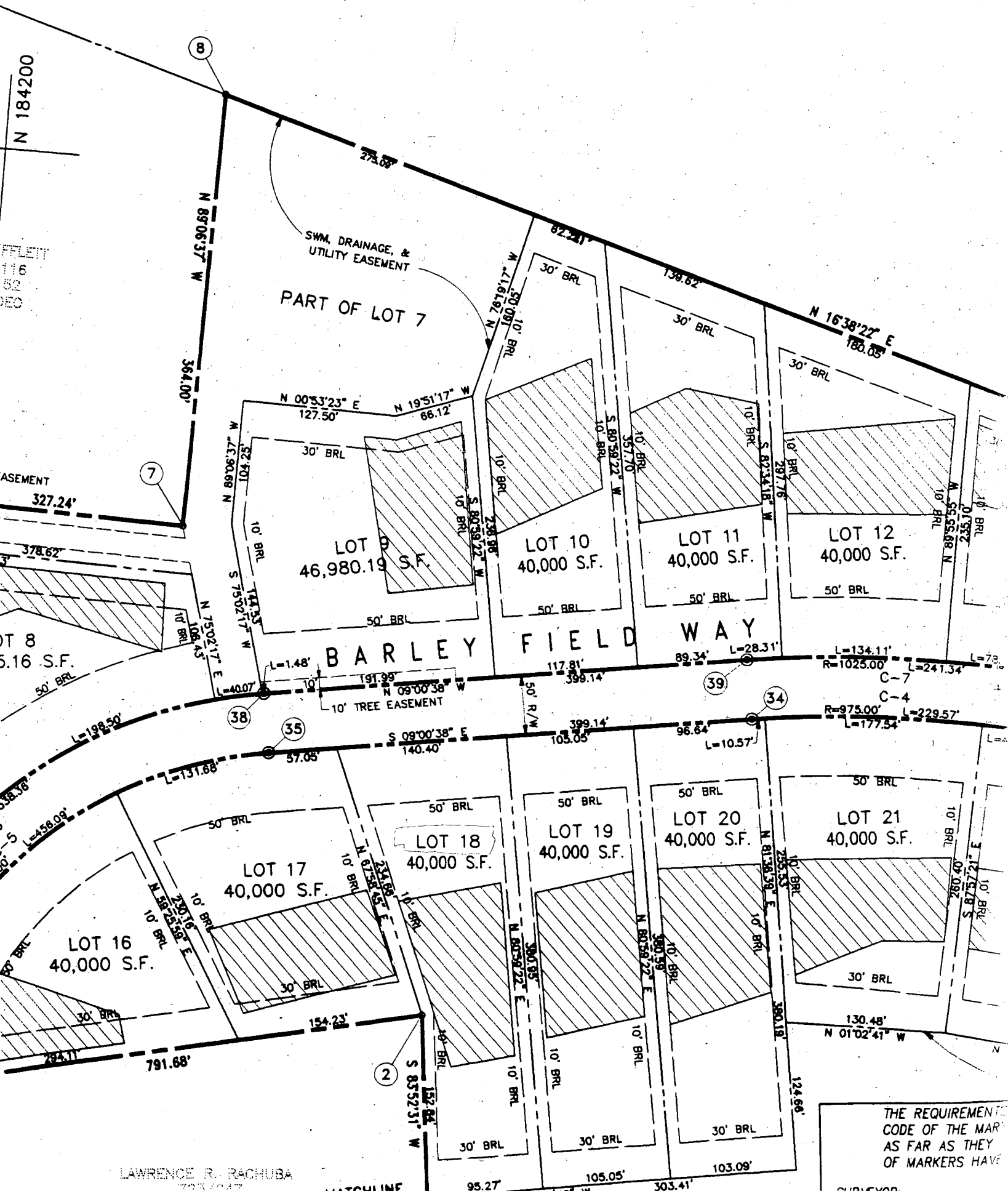


Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROP. PERMIT NUMBER: _____ GAP _____
 FORCE AM WRITE INITIALS IN BOX PERMIT No. 40-94-1328

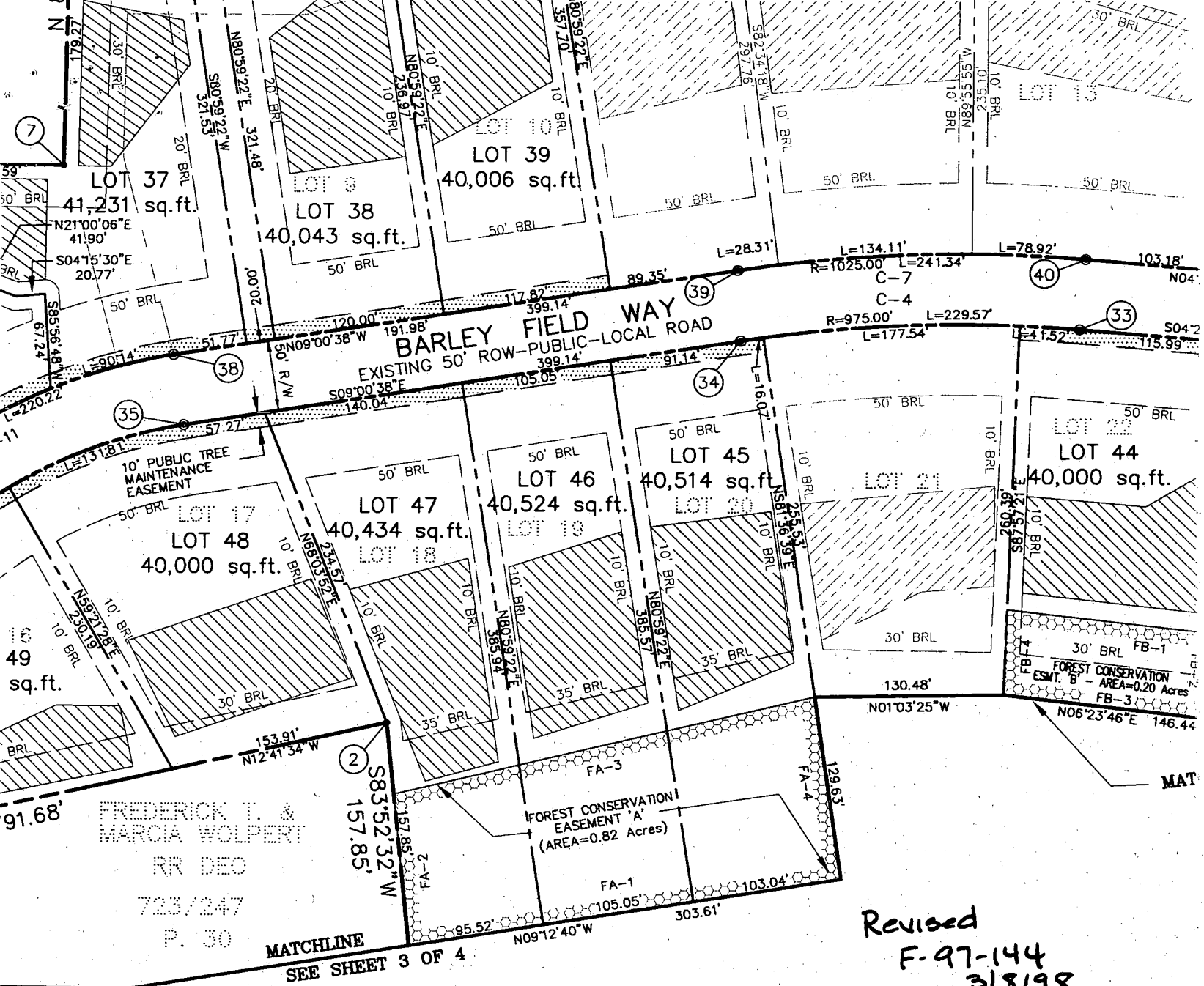
SPECIAL CONDITIONS
 NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

EASEMENT(S), UPON COMPLETION OF THE FOREST CONSERVATION INSTALLATION AND THE DEVELOPER'S SURETY POSTED WITH ACCEPT THE EASEMENTS AND RECORD THE RECORDS OF HOWARD COUNTY."



LAWRENCE R. RACHUBA

THE REQUIREMENTS OF THE SURVEYING CODE OF THE MARYLAND PROFESSION AS FAR AS THEY APPLY TO THE MARKERS HAVE BEEN COMPLIED WITH.



STATEMENT

AND WOODFORD JOINT VENTURE (COMPOSED OF ELLICOTT CITY LAND HOLDINGS, PROPERTY SHOWN AND DESCRIBED HEREON, HEREBY ADOPT THIS PLAN OF SUBDIVISION OF THIS FINAL PLAT BY THE DEPARTMENT OF PLANNING AND ZONING, AND GRANT UNTO HOWARD COUNTY, MARYLAND, ITS SUCCESSORS AND ASSIGNEES, TO MAINTAIN SEWERS, DRAINS, WATER PIPES AND OTHER MUNICIPAL UTILITIES AND RIGHTS-OF-WAYS AND THE SPECIFIC EASEMENTS SHOWN HEREON, 2) THE RIGHT OF EASEMENT OF THE STREETS AND/OR ROADS AND FLOODPLAINS AND OPEN SPACE WHERE SHOWN HEREON, HEREBY GRANT THE RIGHT AND OPTION TO HOWARD COUNTY TO MAINTAIN AND/OR ROADS AND FLOODPLAINS, STORM DRAINAGE FACILITIES AND TO REQUIRE DEDICATION OF WATERWAY AND DRAINAGE EASEMENTS FOR THE MAINTENANCE, AND, 4) THAT NO BUILDING OR SIMILAR STRUCTURE BE PLACED ON ANY LOT WITHOUT EASEMENT AND RIGHTS-OF-WAY.

4, 1998

Debra L. Reum

WITNESS

[Signature]

WITNESS

[Signature]

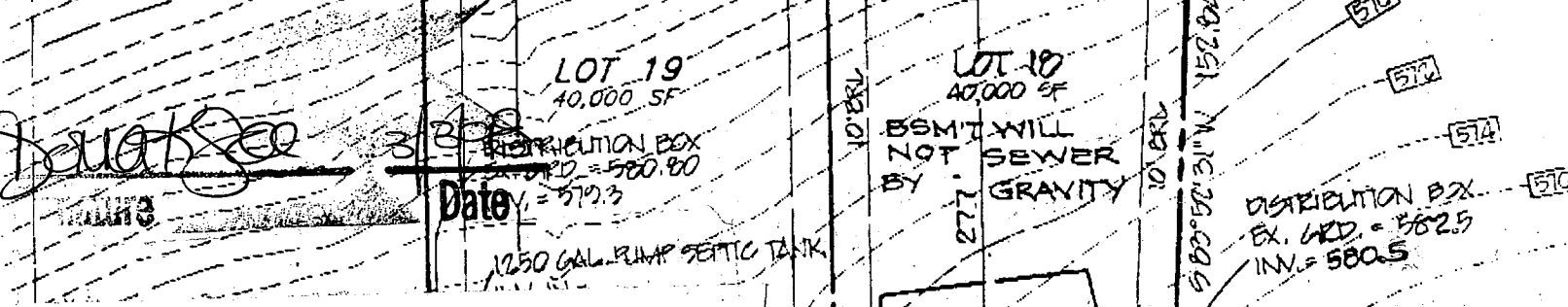
SURVEYOR'S CERTIFICATE

I HEREBY CERTIFY THAT THE FINAL PLAT SHOWN HEREON IS CORRECT; THAT IT IS A SUBDIVISION COMPRISED OF PROPERTY COVEYED BY THOMAS H. POWELL, JR. ET AL, THOMAS H. POWELL, JR. INDIVIDUALLY, AS TO AN UNDIVIDED ONE-THIRD INTEREST, AND TO PATRICIA ANN MERZ, INDIVIDUALLY, AS TO AN UNDIVIDED ONE-THIRD INTEREST, AND TO THOMAS H. POWELL, JR. AND PATRICIA ANN MERZ, AS TRUSTEES FOR ROBERT JOHN POWELL, INDIVIDUALLY, AS TO AN UNDIVIDED ONE-THIRD INTEREST, BY CONFIRMATORY DEED DATED DECEMBER 19, 1979, RECORDED AMONG LAND RECORDS OF HOWARD COUNTY, MARYLAND IN LIBER 1144 AND (2) THAT PROPERTY CONVEYED BY THOMAS H. POWELL AND PATRICIA ANN MERZ, INDIVIDUALLY BY DEED DATED FEBRUARY 1996 AS RECORDED AMONG FORESAID LAND RECORDS IN LIBER 1144 AND (3) THAT PROPERTY CONVEYED BY THOMAS H. POWELL AND PATRICIA ANN MERZ TO WOODFORD JOINT VENTURE BY DEED DATED 1996 AS RECORDED AT LIBER 4064, FOLIO 213 AND THAT THE PLAT IS IN PLACE OR WILL BE PLACED AS SHOWN IN ACCORDANCE WITH THE ANNOTATED CODE OF MARYLAND, AS AMENDED.

Revised
F-97-144
3/8/98

Approved Septic System Plan

Howard County Health Department



Total linear feet of trench required 240 feet

Width of trench (as) 3 feet

Depth of trench (as) 3.5 feet

Depth of stone required below distribution pipe 1.5 feet

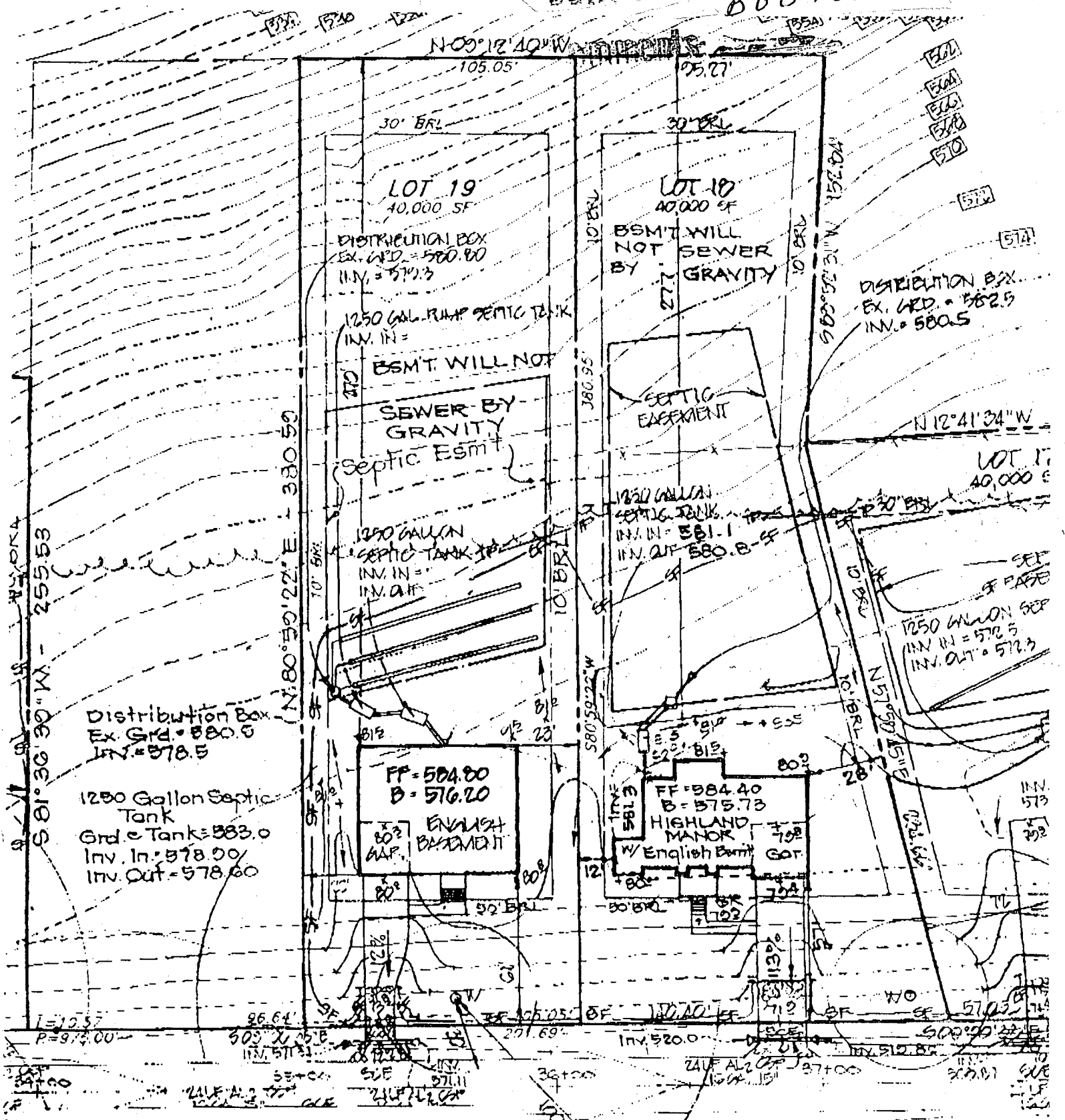


Post-It® Fax Note 7671		Date	2-23-98	# of pages	1
To	KIM JOE		From	JOE ECKER	
Co./Dept.	HO CO HEALTH		Co.	CFS	
Phone #	WOODSFORD		Phone #		
Fax #	LOT 18		Fax #		

REVISED

Date: 2/26/98

800 109 820



Post-It Fax Note 7671 Date 2-23-98 # of pages 1

To	Kim SOE	From	JOEL BUSER
Co./Dept.	NOVA HEALTH	Co.	CPS
Phone #	WOODSFORD	Phone #	
Fax #		Fax #	

4/7/98 deck location OK as shown

FROM : Panasonic FAX SYSTEM

PHONE NO. :

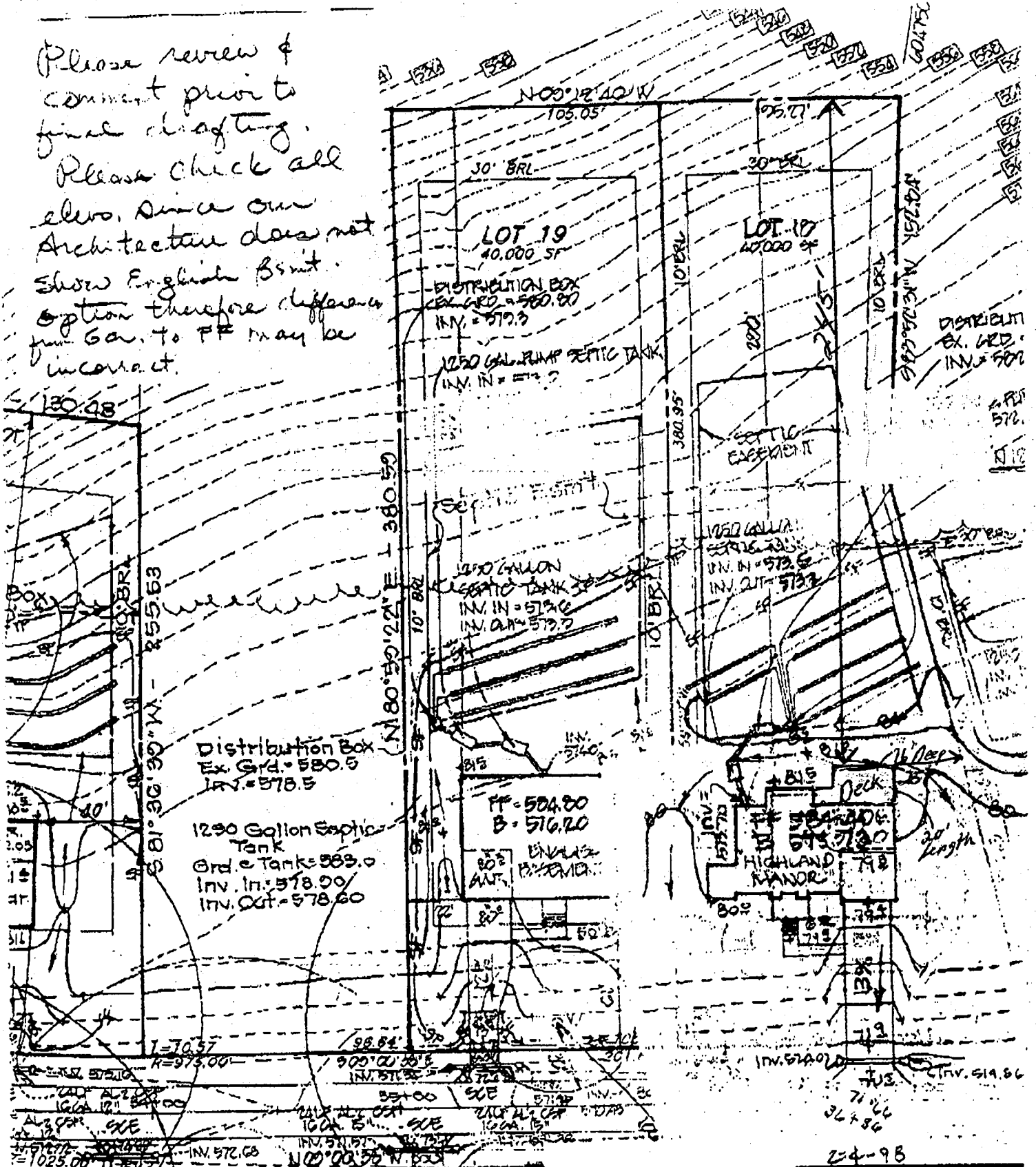
Mar. 31 1999 89:37PM P1

Feb-04-98 01:49P cfs

410 381 7500

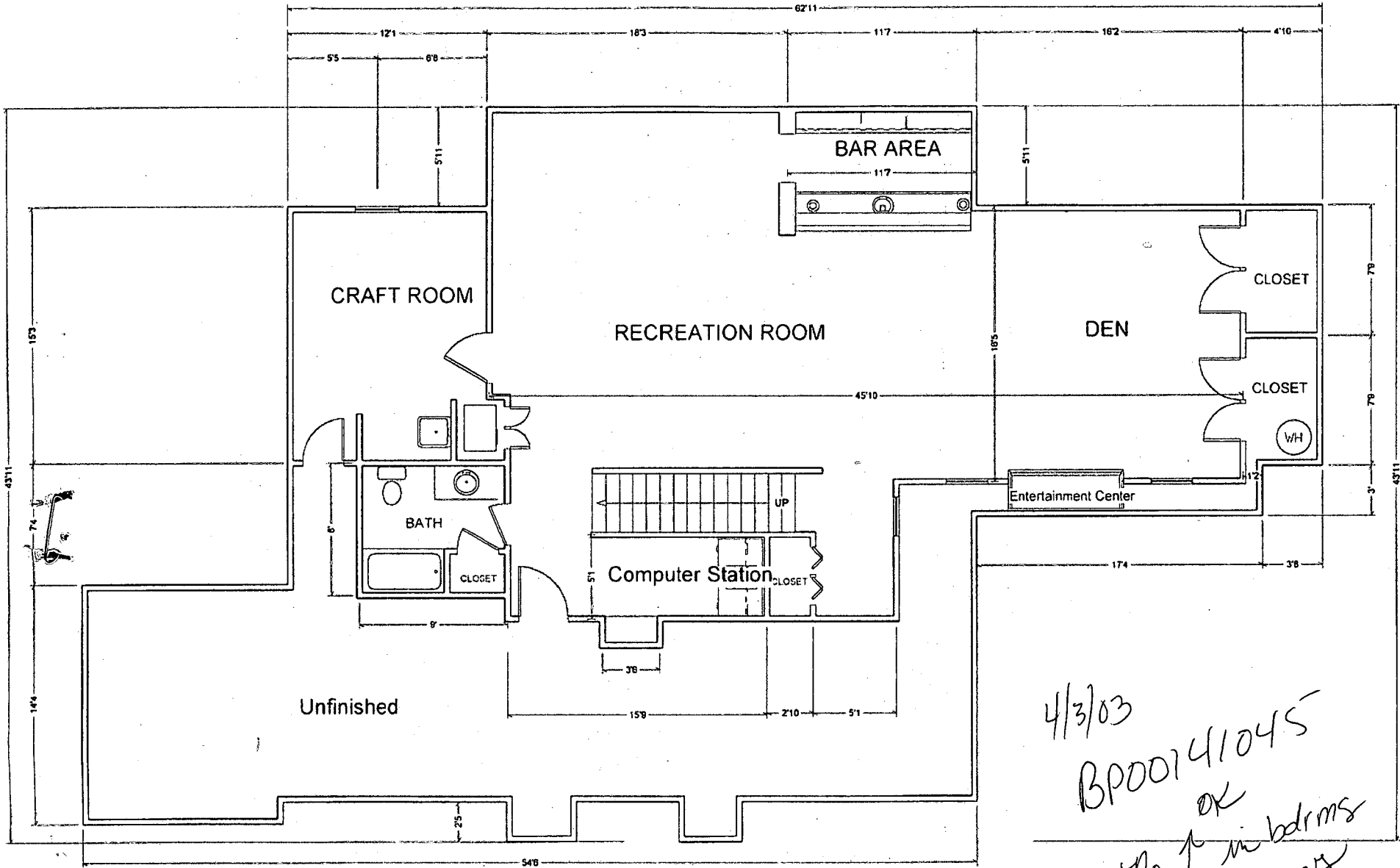
P.01

Please review & comment prior to final drafting.
Please check all elev. Since our Architectur does not show English Bsm. option therefore difference from G.A. to P.F. may be incorrect.



24-98

Post-It® Fax Note	7671	Date	2-2-98	# of pages	1
To	Lynn Cove	From	Donna		
Co./Dept.	Trinity Bldg	Phone #	CF 4 S		
Phone #		Fax #	410-381-7500		
			Land Fords		



Palmatary 11363 Barley Field Way
 Marriottsville, MD 21104 - Basement

4/3/03
 BP00141045
 No 1 in bedrooms
 No windows
 KN