

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

INDEXED

P 5/2026

A 50830-FF

DISTRICT _____

DATE 7/23/99

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH
~~XXXXXXX~~ 410-313-2640

03-330702

DATE SYSTEM APPROVED 7/20/99

INSPECTOR AL

Walter King P&H

IS PERMITTED TO INSTALL ALTER _____

ADDRESS _____ PHONE 301-662-6990

SUBDIVISION Brantwood LOT 11 ROAD 11517 Stardust Lane

PROPERTY OWNER Steven P. Fishman 301-873-4747

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS top seamed tank required

INSTALL 2-1250 GALLON SEPTIC TANKS IN SERIES

NUMBER OF BEDROOMS 4

1 - 1500 GAL TOP SEAMED COMPARTMENTED TANK OK. (CW)

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 280

TRENCHES - Trench to be 3 feet wide. Inlet 2.0 feet below original grade. Bottom maximum depth 3.5 feet below original grade. Effective area begins at 2.0 feet below original grade. 1.5 feet of stone below distribution pipe.

LOCATION - Place distribution box 100 feet from well, approximately 30 feet from front lot line and 160 feet from right lot line. Run trenches along contour toward right side of lot. CONTRACTOR TO REQUEST TRENCH LAYOUT INSTALLATION PRIOR TO TRENCH EXCAVATION.

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 C. Williams DATE 6-29-1999

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

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

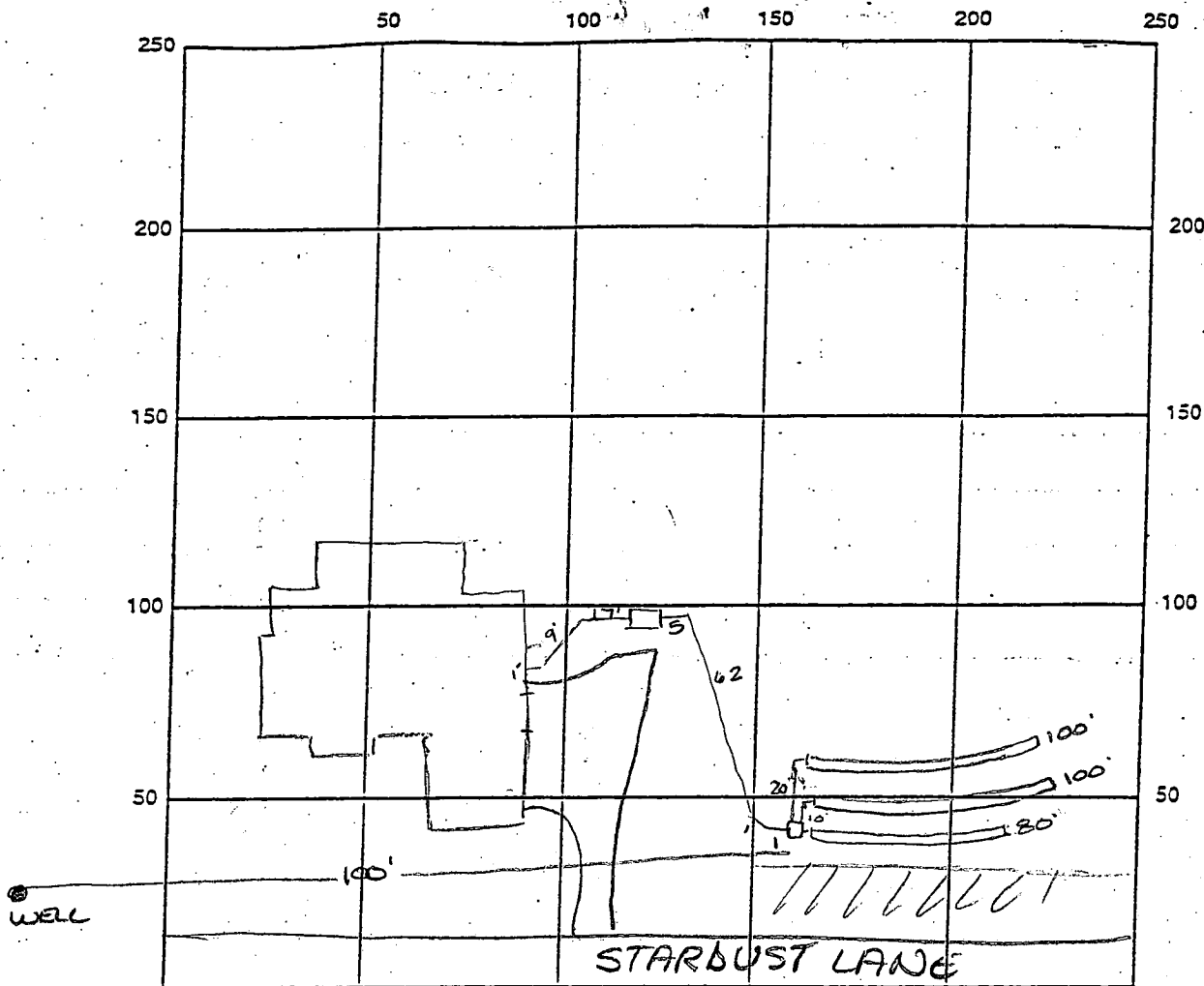
BLDG. PERMIT RETURNED AND RETURNED 5/17/01

300130260- pool

BLDG. PERMIT SIGNED AND RETURNED 7-29-99

Sealed 11/7/95 dec

50830-FF



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL OK 1500 2 comp CLEANOUTS OK

DISTRIBUTION BOX LEVEL OK

DRAIN FIELD/TITLE DEPTH 3.5 FT. TRENCH WIDTH 3.0 FT. INLET DEPTH 2.0 FT.

EFFECTIVE GRAVEL DEPTH 1.5 FT. TOTAL LENGTH 280 FT.

NUMBER OF TRENCHES 3.0 ONE SIDEWALL/BOTTOM AREA 840 SQ. FT.

DRYWALL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET 1.5 FT.

ABSORBENT AREA SQ. FT.

REMARKS: OK to cover work

7/27/99 UP1 OK to cover - 4.0' below grade PVC conduit & grout OK Al

DATE SYSTEM APPROVED 7/26/99 INSPECTOR A. M. McMill

HOWARD COUNTY HEALTH DEPARTMENT
 Bureau of Environmental Health
 3525-H Elliott Mills Drive
 Ellicott City, MD 21043
~~PHONE~~ 410-313-2640

MAILED
 6/18/99

Final Sept 9 } 7/20/99
 well

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation
 Replacement _____

Receipt # _____
 Date 6/18/99

Name of Installer WALTER N. WOOD PUMP & WELL DRILLING CO. Telephone 301-281-1100

License Number 2217
 Certified Well Pump Installer _____ Well Driller _____ Registered Plumber

Name of Property Owner MR. & MRS. FORDMAN Telephone _____
 Subdivision BALTIMORE Lot # 11 Well Tag # HO-99-1923
 Site Address 1157 BALCONET LAKE ELICOTT CITY MD 21042

Pump	Motor	Pitless Adapter
1. Type	1. Horsepower <u>1</u>	1. Make <u>BOSS</u>
a. Deep well jet _____	2. RPM <u>3450</u>	2. Model # <u>41004</u>
b. Shallow well jet _____	3. Voltage _____	3. Depth <u>42'</u>
c. Submersible <input checked="" type="checkbox"/>	a. 110 _____	
2. Make <u>BOSS</u>	b. 220 <input checked="" type="checkbox"/>	
3. Model # <u>7904C2HL</u>		
4. Capacity <u>7</u> GPM		
5. Pump exceeds well capacity Yes _____ No <input checked="" type="checkbox"/>		
6. If Yes, is low pressure cutoff switch installed? Yes _____ No _____		
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors _____ Cable guards <input checked="" type="checkbox"/> Other _____		

Tank	Piping	Well data
1. Capacity <u>8.2 gal.</u>	1. Type <u>1/2" CPVC</u>	1. Depth <u>350</u> ft.
2. Pressure relief valve? <u>YES</u>	2. Size <u>1"</u>	2. Yield _____ GPM
	3. NSF and/or BOCA Code approved <u>YES</u>	3. Static water level <u>100</u> ft.
	4. Depth of supply line <u>42"</u>	4. Will water supply be disinfected by installer? <u>YES</u>

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

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

Signature of Applicant: [Signature]
 Date: 6/18/99

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

C1 4146

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED AFTER WELL IS COMPLETED.

COUNTY NUMBER A50830 FF

ST/DO USE ONLY DATE Received 05-12-99

DATE WELL COMPLETED 3-3-99

Depth of Well 350 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-1923

OWNER Stardust Brantwood, LLC STREET OR RFD Stardust Ln TOWN Ellicott City MD SUBDIVISION Brantwood SECTION 7 LOT 11

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entries for BROWN SHALE and BLUE SLATE.

WATER AT 97-245

GROUTING RECORD form with fields for material type (CEMENT, BENTONITE CLAY), bags, pounds, gallons, and depth of grout seal.

CASING RECORD form with fields for casing type (STEEL, CONCRETE, PLASTIC, OTHER), nominal diameter, and total depth.

OTHER CASING (if used) form with fields for diameter and depth.

SCREEN RECORD form with fields for screen type (STEEL, BRASS, BRONZE, PLASTIC, OPEN HOLE, OTHER) and depth.

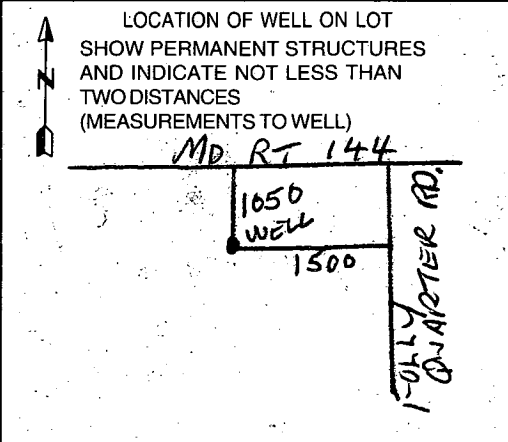
DEPTH (nearest ft.) table with columns for casing height and screen depth.

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

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) form with fields for telescope casing, log indicator, and other data.

PUMPING TEST form with fields for hours pumped, pumping rate, method used, water level, and pump type.

PUMP INSTALLED form with fields for driller installed pump, capacity, pump horse power, and pump column length.



NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED form with yes/no options.

CIRCLE APPROPRIATE LETTER A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED

DRILLERS LIC. NO. MW D 139 Robert Cline DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. MW D 168 Rick Sogale

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

B 1 - 8510
1 2 3 4 5 6
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND
PERMIT TO DRILL WELL
please print or type

STATE PERMIT NUMBER

HO-94-1923
70 fill in this form completely 79

Date Received (APA)
10 13 98
8 MM DD YY 13

OWNER INFORMATION

Brantwood LLC
15 Last Name Owner First Name 34.
8835-P Columbia 100 Parkway
36 Street or RFD 55
Columbia, MD 21045
57 Town 70 State 72 Zip 76

B 3 LOCATION OF WELL

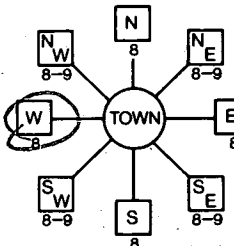
Howard
8 COUNTY 21
Reaga Property
23 SUBDIVISION 42
SECTION 112 LOT 11
44 46 48 50
Pine Orchard meadows
52 NEAREST TOWN 71

DRILLER INFORMATION

Hartman, David MWD 517
76 Driller's Name License No. 81
A.C. Schultes of MD, Inc.
Firm Name
24 South River Road
Address Edgewater, MD 21037
Signature Date 10/6/98

MILES FROM TOWN (enter 0 if in town) 2 MI
73 76 77 78

B 4
1 2
DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Stardust Lane
11 NEAR WHAT ROAD 30
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
34 1050 37 DISTANCE FROM ROAD
ENTER FT OR MI 38 39
TAX MAP: BLK: PARCEL

B 2 WELL INFORMATION
1 2
APPROX. PUMPING RATE 10
(GAL. PER MIN.) 8 800 12
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 800 20

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 APPROVAL)
- TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard Co A50830FF
COUNTY NAME COUNTY NO.
STATE SIGNATURE INSERT S
DATE ISSUED 102698
43 MM DD YY 48 CO SIGNATURE EXP. DATE
NORTH GRID 520000 EAST GRID 820000
50 55 57 63

APPROXIMATE DEPTH OF WELL 200 FEET
24 28
APPROXIMATE DIAMETER OF WELL 6" NEAREST INCH

METHOD OF DRILLING (circle one)

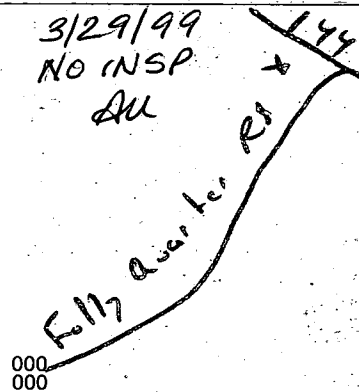
BORED (or Augered) JETTED Jetted & DRIVEN
AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)
37 CABLE REVerse-ROTARY DRive-POINT
other

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER
1: Tanker
2:
3:

WRITE THE BOX NUMBER FROM THE MAP HERE

E 820
N 520

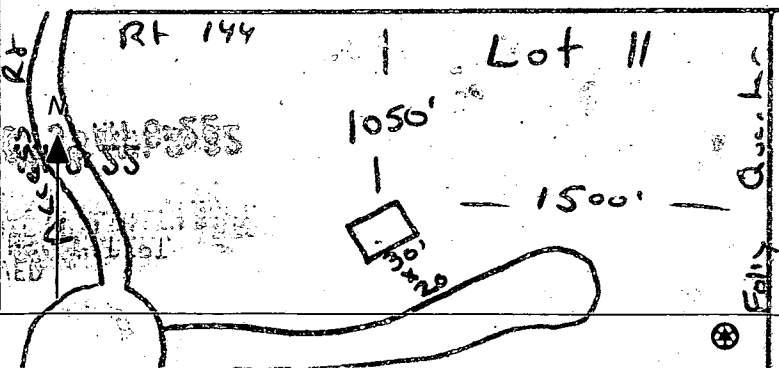


REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

- 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) 41 52

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

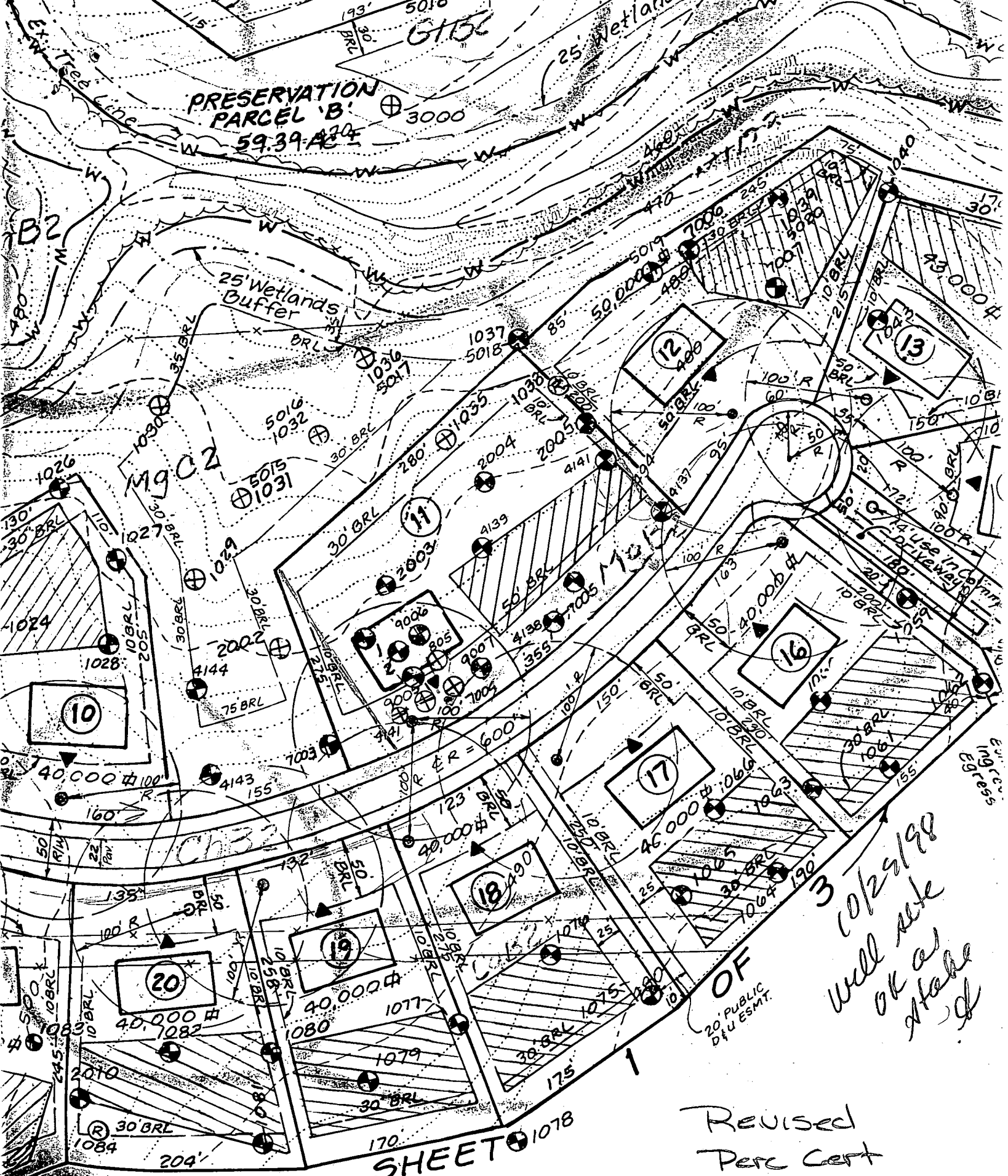


Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROP. PERMIT NUMBER 54
GAP
FORCE AM INITIALS IN BOX PERMIT No. HO-94-1923
67 68 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED



LOT 11
WHAT IS?

APPLICATION

PERCOLATION TESTING

A _____

P _____

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

DISTRICT _____

DATE 8/15/95

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 Feaga Family

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER Land Marketing, Inc. c/o Tim Feaga

ADDRESS 3243 Bethany Lane Ellicott City 21042 PHONE 313-8808

PROPERTY LOCATION:

SUBDIVISION Feaga Property LOT NO. 912

ROAD AND DESCRIPTION Rt 194 + Folly Quarter Rd

TAX MAP 16 + 23 PARCEL # 34 + 63

SIZE OF LOT 1 acre +/- TYPE BLDG. SFD
(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. Mark A. Reich
(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
1029

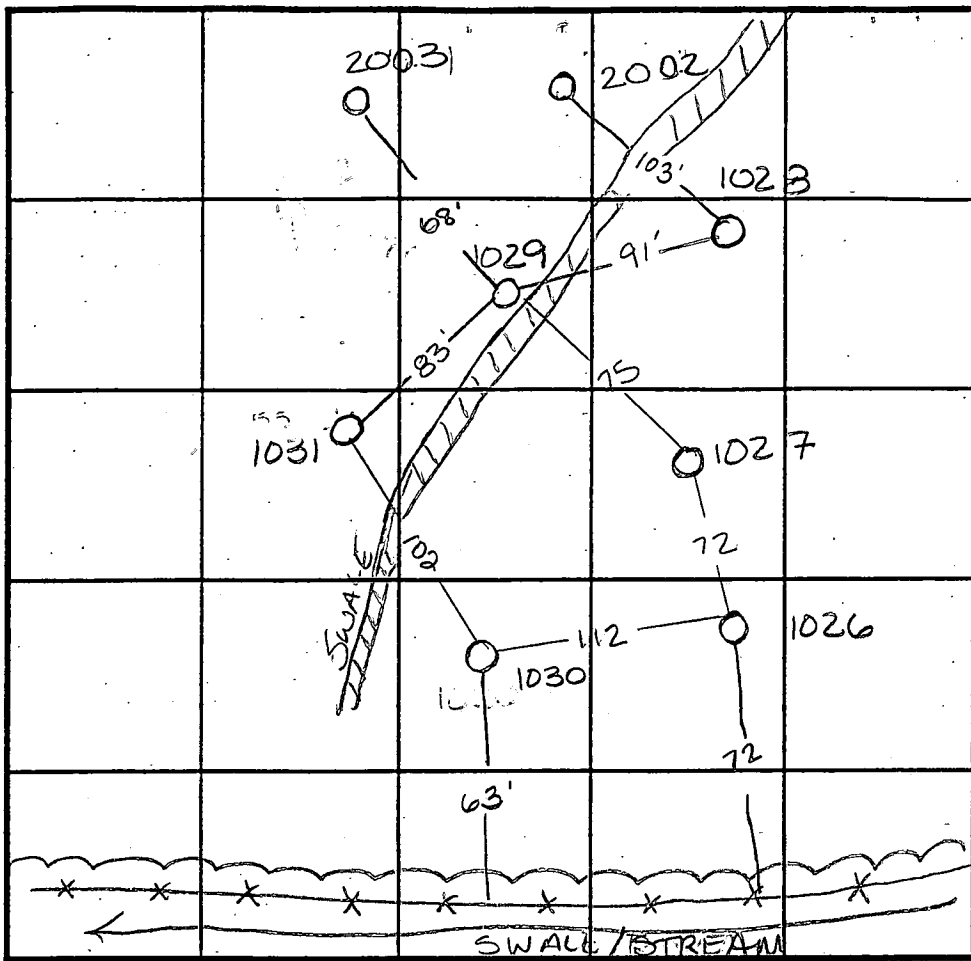
0' dark red orange silty clay
3' light orange brown silty micaceous
8' white decayed quartz sand mix evidence of H₂O-colors

1030

2' orange silty clay gravelly
4' brown to grey silty micaceous
8' orange red mottled silty (H₂O)
10' dark black brown silty water at 8'

1031

4' light orange brown silty clay
8.5' dark black/brown saprotic sand mix micaceous
12' white damp decayed quartz orange mottles water at 11'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.
RT 144

SOIL PROFILE
2002, 2003

0' brown silty clay
4' light brown silty 10% rock
7' grey white silty 15% rock content

1026-1027-1028

4' brown red silty micaceous
orange brown silty decayed shale 5-10%

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
9-8-95	1029	6.5' / V12	1:17 ⁴⁵	1:30	1:30	1:34	4min
	1029	3' / V12	1:18	1:19	1:19	1:21	2min
	1030	See profile					F
	1031	See profile					F
9-11-95	2002	4.5' / V12	10:18	10:20	10:20	10:24	4min
	2003	4.5' / V12	10:24 ³⁰	10:27 ³⁰	10:27 ³⁰	10:32	4 1/2 min
9-7-95	1026	Visual to 11.5	see profile				OK
	1027	4' / V12	12:57	1:01	1:01	1:05	4min
	1028	4' / V12	1:06 ³⁰	1:09 ¹⁵	1:09 ¹⁵	1:14 ³⁰	5 1/4 min

REMARKS Hold for wet season

TYPE OF SOIL _____

TESTED BY Amy McMillen

ALSO PRESENT Mark Buch

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____

TRENCH WIDTH _____

INLET DEPTH _____

MAXIMUM BOTTOM DEPTH _____

SQ. FT/BEDROOM _____

COUNTY#

SOIL PROFILE

7003

orange brown siltm

almost

charcoal

black

siltsalm

green tint

20% black shale

at 11.0

7004

like

7003

but

7004

has

water

coming

out

at

6.5'

7005

light brown

to

beige

siltsalm

no clay

layer

bright

orange

siltsalm

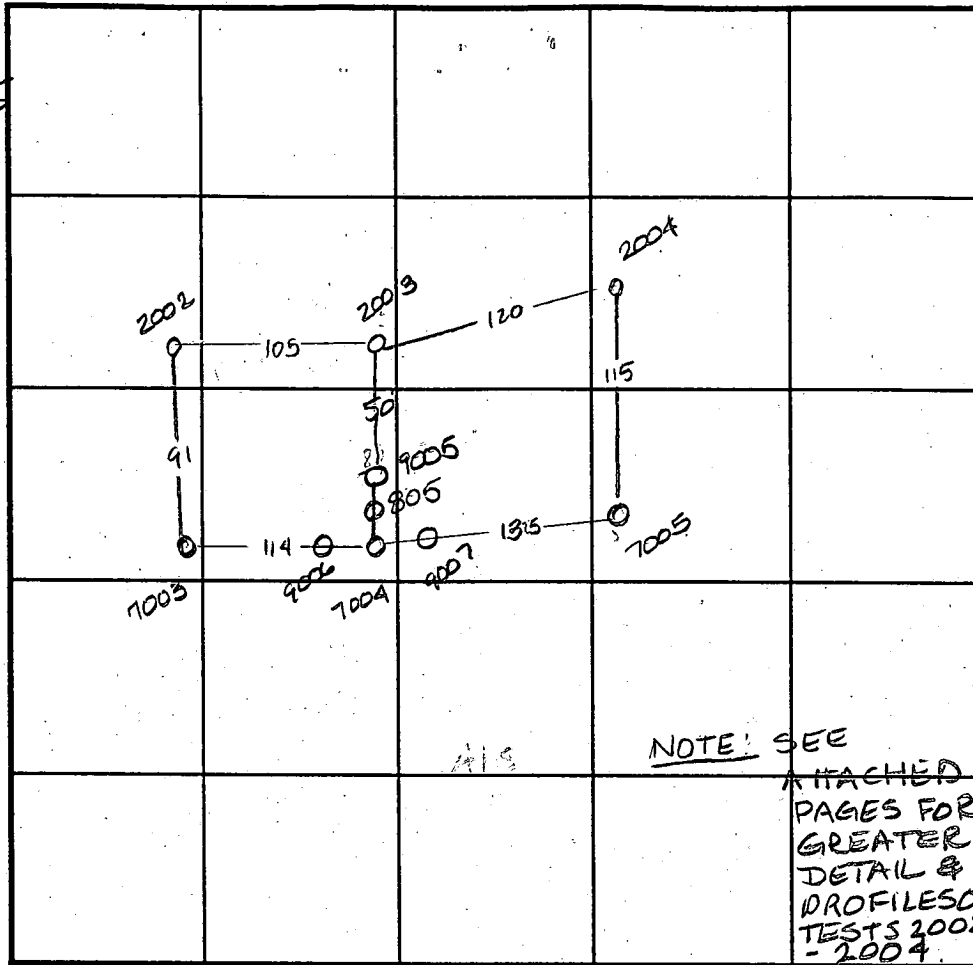
30% bright

orange

shale/

sand

stone



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE

9005 9006

dark

grey

almost

blue

sand

25% black/blue

rock

micaceous

Schist

rock

9007

marble

like-

dark back

grey with

bright

orange

pockets

25% R+

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
12-10-96	7003	Visual	to 11.0 - see profile		—		?
	7004	Visual	to 12.0 see profile		—		F
	7005	Visual	to 12.0 - see profile		—		OK
	80.5	Visual	to 11.5 - see profile		—		F
5-1-97	9005	Visual	only - see profile		—		?
	9006	Visual	only - see profile		Refusal at 10.5		?
	9007	Visual	only - see profile		—		OK

REMARKS

TYPE OF SOIL

TESTED BY

Amy McMillen

ALSO PRESENT

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

TRENCH WIDTH

INLET DEPTH

MAXIMUM BOTTOM DEPTH

SQ. FT./BEDROOM

APPLICATION

PERCOLATION TESTING

A _____

P _____

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

DISTRICT _____

DATE 8/15/95

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 Feaga Family

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER Land Marketing Inc. c/o Tim Feaga

ADDRESS 3243 Bethany Lane Ellicott City PHONE 313-8808
21042

PROPERTY LOCATION:

SUBDIVISION Feaga Property LOT NO. H 1A13

ROAD AND DESCRIPTION Rt 144 + Folly Quarter Rd

TAX MAP 16 + 23 PARCEL # 34 + 63

SIZE OF LOT 1 acre +/- TYPE BLDG. SFD
(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. Mark A. Reich
(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
1036 3

0' topsoil

6" orange
brn
w/ white
decayed
quartz

5' darker
brn
silm w/
zones of
white
decayed quartz

10.5' water

1037

bright
red
silm

3' brn
silm
micaceous

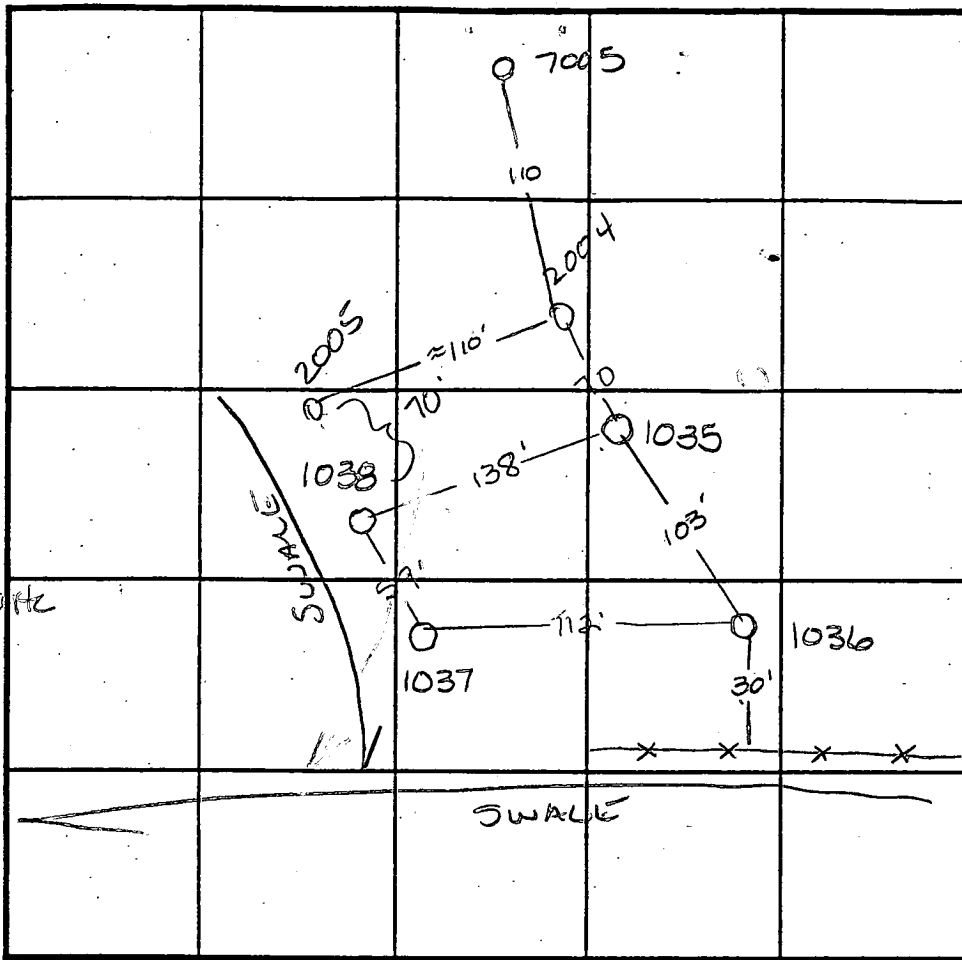
7' dark
grey
brn w/
white zones
probable
high H₂O
at

1038

orange
silt

5' grey
silm
30%
rock
frag
>50%
zones
throughout

10' hard
bottom



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE
1035 2004

0' like
1038
but
only
5-10%
rock
throughout

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
9-7-95	1035	3' VII	1:09	1:10 ³⁰	1:10 ³⁰	1:12 ³⁰	2min F
	1037	3.5' VII	2:15 ³⁰	2:16 ³⁰	2:16 ³⁰	2:18 ³⁰	2min F
	1038	2.5' VII	2:17 ³⁰	2:18	2:18	2:18 ³⁰	F
	1038	6.5' VII	2:18 ⁴⁵	2:19	2:19	2:20	1min
9-11-95	2004	4' VII	10:27	10:29 ³⁰	10:29 ³⁰	10:31 ³⁰	2min
	2005	Visual	to 12.5				OK
9-7-95	1036	Visual	to 10.5				See profile F

F
F
FAST PERC/ROCK

REMARKS wet season

TYPE OF SOIL

TESTED BY Amy McMillen

ALSO PRESENT Mark Reich

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME TRENCH WIDTH

INLET DEPTH MAXIMUM BOTTOM DEPTH SQ. FT/BEDROOM

APPLICATION

PERCOLATION TESTING

A _____

P _____

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

DISTRICT _____

DATE 8/15/95

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 Feaga Family

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER Land Marketing Inc. c/o Tim Feaga

ADDRESS 3243 Bethany Lane Ellicott City PHONE 313-8808

21042

PROPERTY LOCATION:

SUBDIVISION Feaga Property LOT NO. 1013

ROAD AND DESCRIPTION Rt 144 + Folly Quarter Rd

TAX MAP 16 + 23 PARCEL # 34 + 63

SIZE OF LOT 1 acre +/- TYPE BLDG. SFD
(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.

Marl Reich
(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
1032

0' dark
brn
CLM

orange
loamy
sand
w/ white
decayed
quartz

9' darker
SiLM

12' water

1033

1' 1/2' lgt
orange
brn
CLLM

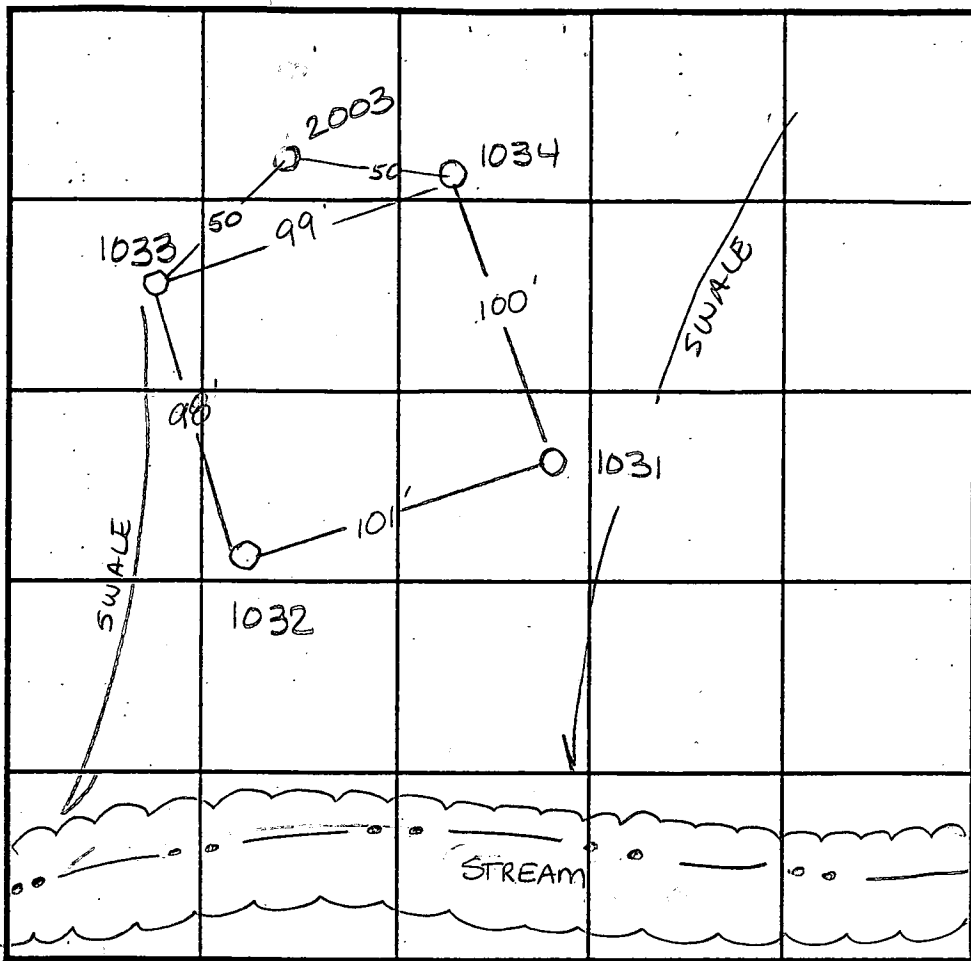
2' orange
brn
SiLM

7' grey
SiLM
decayed
large quartz
blk/white
rocks

1034

red
orange
CLLM

3' lgt
orange
tan
SiLM
decayed
white
quartz
throughout



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE
1031

0' lgt orange
brn
CLLM

4' dark
black/brn
Saprolite
sand mix
micaceous

8.5' white
damp
decayed
quartz w/
orange
mottles

12' water at 11'

2003

4.0' brn
SiLLM
light brn
SiLLM
100% frags

7.0' grey/white
SiLM
decayed shale
50%

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
9-8-95	1034	4' / V12	1:59 ¹⁵	2:03	2:03	2:6 ¹⁵	3 1/4 min
	1032	3.5' / V12	2:01 ¹⁵	2:02 ³⁰	2:02 ³⁰	2:04 ¹⁵	2 min
	1033	2' / V12	2:04 ¹⁵	2:13 ³⁰	2:13 ³⁰	2:35	1 1/2 min
	1033	6' / V12	2:04	> 30	min	—	slow
	1031	See profile	—	—	—	—	F
9-11-95	2003	4.5' / V12.0	10:24	10:27 ³⁰	10:27 ³⁰	10:32	4 1/2 min

REMARKS wet season

TYPE OF SOIL

TESTED BY Amy McMillen

ALSO PRESENT Tim Ferrara

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

TRENCH WIDTH

INLET DEPTH

MAXIMUM BOTTOM DEPTH

SQ. FT/BEDROOM

12.5

APPLICATION

PERCOLATION TESTING

A _____

P _____

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

DISTRICT _____

DATE 8/13/95

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 Feaga Family STEVEN Fishman

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER Land Marketing Inc. c/o Tim Feaga

ADDRESS 3243 Bethany Lane Ellicott City PHONE 313-8808
21042

PROPERTY LOCATION:

SUBDIVISION Feaga Property LOT NO. 56 56 54

ROAD AND DESCRIPTION Rt 144 + Folly Quarter Rd
(11577 Stardust Lane)

TAX MAP 16 + 23 PARCEL # 34 + 63

SIZE OF LOT 1 acre +/- TYPE BLDG. SFD - 4 Bed
(SINGLE FAMILY DWELLING OR COMMERCIAL)

BIDD PERMIT SKIPPED
AND RETURNED 6-10-99
Serial # B70117973
SFD - 4 Bed

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.

Myrdal Reil
(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

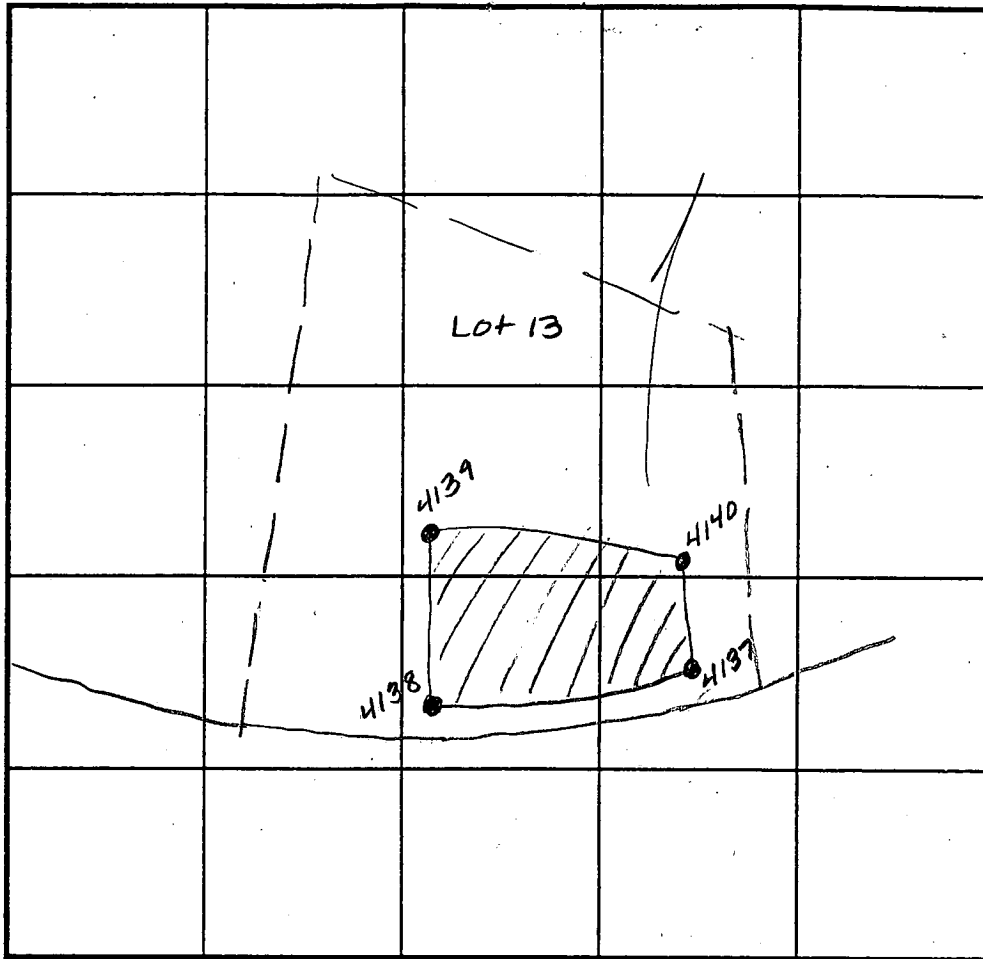
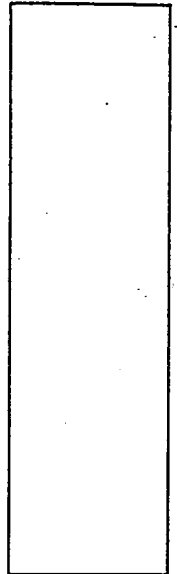
COUNTY #

SOIL PROFILE

4137 4140

orange
brown
SiSalm
micaceous
10%
shale

SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

12.0

4139

dark
brown
SiSalm

3.0

blue
dark
grey
Salm

<5%
Rx

11.0

water

4138

dark
orange
red
SiSalm

2.5

1qt
orange
yellow
SiSalm

9.0

blue
dark
grey
Salm
40% Rx
refusal
& water

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
3-28-98	4137	3.0 v12.0	2:32	2:34	2:34	2:36	2min
	4140	2.0 v12.0	2:29	no movement			slow
		3.0 v12.0	2:45	2:53	2:53	3:08	15min
	4139	2.5 v8.0	2:20	2:23	2:23	2:29	6min
	4138	3.0 v11.0	2:49	2:53	2:53	3:02	9min

REMARKS _____

TYPE OF SOIL _____

TESTED BY Amy Mc Miller ALSO PRESENT Tim Feaga

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

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

APPLICATION

PERCOLATION TESTING

A _____

P _____

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

DISTRICT _____

DATE 8/13/95

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 Feagan Family

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER Land Marketing Inc. C/O Tim Feagan

ADDRESS 3243 Bethany Lane Ellicott City PHONE 313-8808
21042

PROPERTY LOCATION:

SUBDIVISION Feagan Property LOT NO. 50 50 54

ROAD AND DESCRIPTION Rt 144 + Folly Quarter Rd

TAX MAP 16 + 23 PARCEL # 34 + 63

SIZE OF LOT 1 acre +/- TYPE BLDG. SFD
(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. Paul A. Reil
(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

4144

no distinct clay layer brown SilM

dull grey SilM MICACOUS water

4141

lgt orange yellow SilM

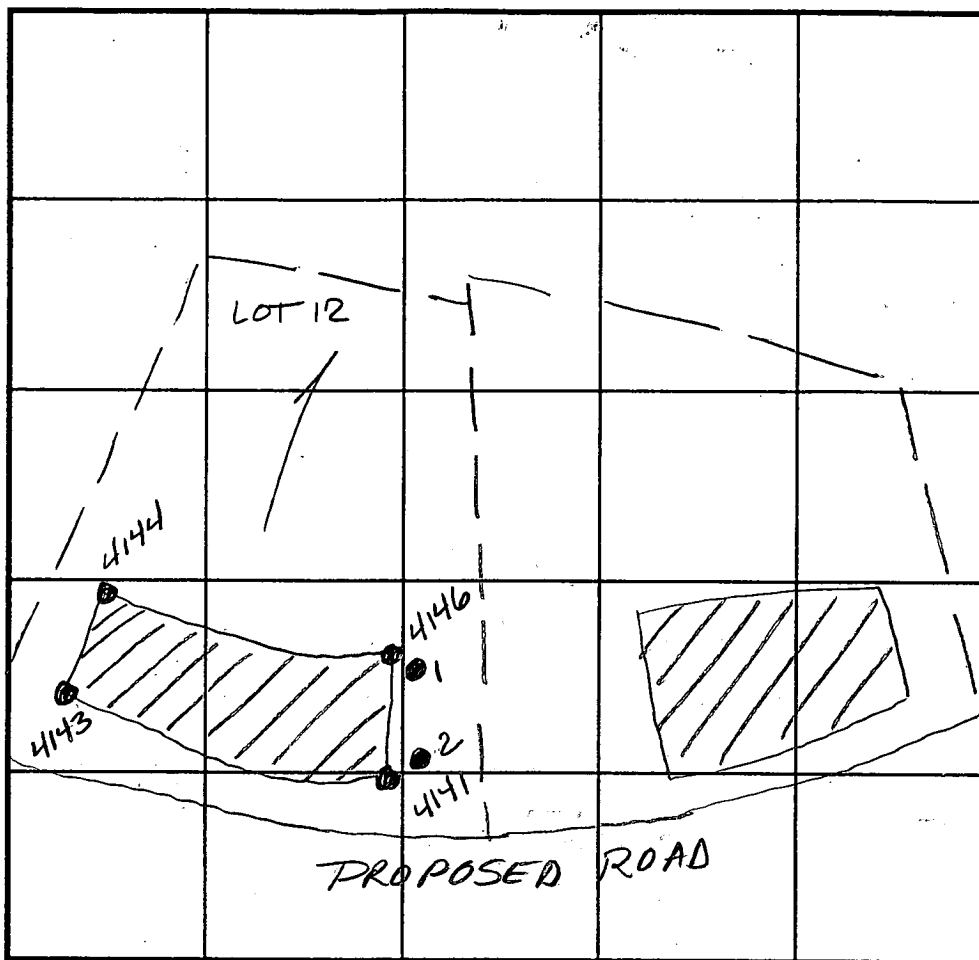
water coming in @ 7.5

4143

orange brown SilM

bright orange SilM pockets of decayed feldspar

water @ 11.0



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE

4146

dark brown SilM

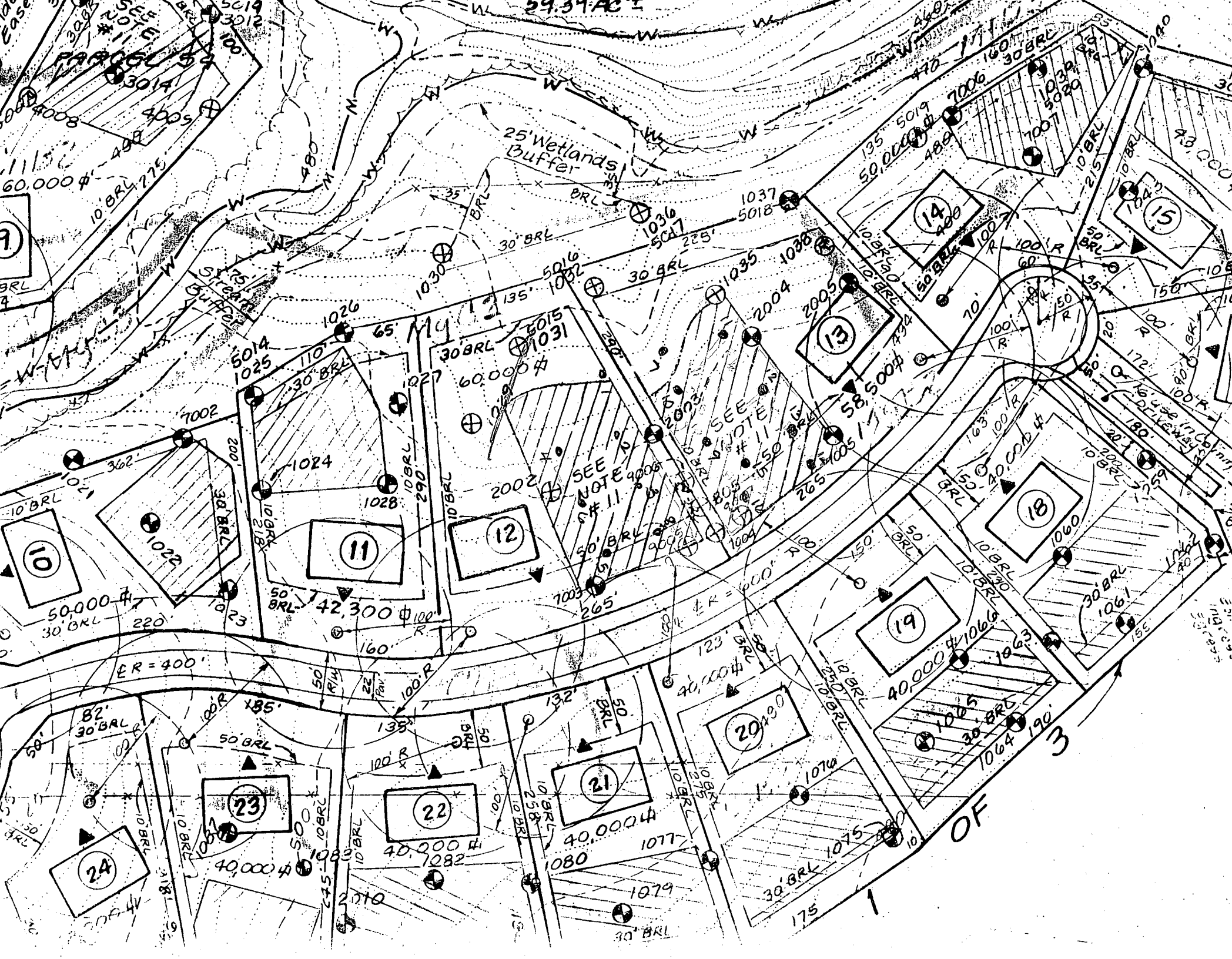
blue dark grey SalM 25% Rx water @ 11.0

1, 2

Dark black brn SalM no struct decayed blk sand hard

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
3-28-98	4141	Insufficient depth to H ₂ O					
		see profile					F
	4146	2.5 / 11.0	2:09	2:15	2:15	2:23	8min
	4144	2.5 / 18.0	2:02	2:12	2:12	2:24	12min
	4143	3.0 / 11.0	1:55	2:02	2:02	2:13	11min
4-10-98	1	2.5 / 12.0	12:27	12:40	12:40	12:51	11min
	2	Visual to 11.0 - per RP - colors in soil not necessarily a function of H ₂ O but of parent R _x					OK

REMARKS Much of H₂O in holes are from heavy rains on day of testing
 TYPE OF SOIL percolating through the soil - not H₂O table per RP
 TESTED BY Amy McMiller / RP ALSO PRESENT Tim Feaga
 TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____
 INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____



TEST DATA

NAME <u>Feaga Prop.</u>	FILE NO _____
LOCATION _____	COUNTY <u>Howard</u>
	DATE <u>12/2/97</u>
<u>Lot 12/13</u>	GRID _____ E
RECORDED BY <u>Amy McMillen</u>	N

HOLE NO.	TEST NO.	DEPTH	CLOCK TIME	ELAPSED TIME	MEASUREMENT	REMARKS (Method, Moisture, Biopores)
10		20"	2:17 2:30 2:50 3:11 3:30 4:02		6.0 5 7/16 4 13/16 4 4/16 3 12/16 2 14/16	$21 \text{ min} / .563 = 37$ $19 \text{ min} / .5 = 38$ $32 \text{ min} / .875 = 36$
				Average 36min	OK	
						* Typical soil profile see test #8

* 7" of head on test

TEST DATA

NAME <u>Feaga Prop</u>	FILE NO _____
LOCATION <u>Lot 12/13</u>	COUNTY <u>Howard</u>
_____	DATE <u>12/2/97</u>
RECORDED BY <u>Amy McMillen</u>	GRID _____ E
_____	N

HOLE NO.	TEST NO.	DEPTH	CLOCK TIME	ELAPSED TIME	MEASUREMENT	REMARKS (Method, Moisture, Biopores)
4	✓	14"		14:52 12:06 12:31 12:45 1:05 1:16 1:41	6.0 5 1/16 3 2/16 3 2/16 2 7/16 2.0 1 2/16	8" topsoil 8"-22" heavy orange tan silty micaceous 2mil/56mm → 30mpsi
			Average 15 min			
8	✓	13"		11.2 6.4 15.9 12:27 ³⁰ 12:35 12:37 12:42 1:06	4 8/16 3 14/16 3 9/16 3 4/16 1 4/16	0-8" topsoil 8-17 7.5 YR 4/10 silty 17-32 7.5 YR 4/10 silty 36"-bottom-42" 1g grained blue sand 2.5 YR 2/0
			Average 14 min. OK			

Note: 7" of head on all tests

TEST DATA

NAME <u>Feaga Prop</u>	FILE NO _____
LOCATION <u>Lot 12/13</u>	COUNTY <u>Howard Co</u>
_____	DATE <u>12/2/97</u>
_____	GRID _____ E
RECORDED BY <u>Amy McMillen</u>	_____ N

HOLE NO.	TEST NO.	DEPTH	CLOCK TIME	ELAPSED TIME	MEASUREMENT	REMARKS (Method, Moisture, Biopores)
4		12"	11:20	0:20	28 12/16	heavy clay between 8" & 25" no real clay zones all zones fairly sandy lg. grained.
			11:38		25 1/16	
			11:50		19 8/16	
			redo- @		8 8/16	
			12:21 ³⁰		7 14/16	
			12:33		T.O	
			12:43		5 4/16 > 23 min / 1.75 = 13	
			1:06		4 9/16 > 9 min / .688 = 13	
			1:15		3.0 > 27 min / 1.563 = 17	
			1:42		Average 15 min OK	
5	✓	13"	11:33	0:33	6.0	16 min / 1.75 = 9 22 1/16 / 20 min * Typical soil profile - see hole #6 *
			11:49		4 4/16	
			12:09		2 14/16 >	
					Average 9 min OK	

Note: 7" of head on each hole

TEST DATA

NAME Feaga Prop FILE NO _____

LOCATION lot 12/13 COUNTY Howard County

DATE 12/2/97

GRID _____ E

RECORDED BY Amy McMiller N

HOLE NO.	TEST NO.	DEPTH	CLOCK TIME	ELAPSED TIME	MEASUREMENT	REMARKS (Method, Moisture, Biopores)
7	✓	13"	10:21 ³⁰		6.0	1-7" topsoil
			10:36 ³⁰		5 7/16	7"-16" heavy clm
			10:49		5 1/16	prismatic struct
			11:04	41min	4 12/16	orange brown
			11:22	67min	4 5/16	16"-22" darker brn
			11:43	80min	4.0	cl silm
			12:03		3 2/16	60 mpi
			12:23		3 8/16	80 mpi
			<u>slow</u>	OK		
1	✓	19"	10:28		6.0	0-8" topsoil
			10:48	36min	5.0	8-18" dk brn cl silm
			11:06	27min	4 8/16	blk struct
			11:23	56min	3 14/16	18" down heavy or brn
			11:44		3 8/16	bottom 26" clm
			<u>Average</u>	OK		sub & blocky
			40min			

Note: 7" head on each test

TEST DATA

NAME <u>Feaga Prop.</u>	FILE NO _____
LOCATION <u>Lot 12/13</u>	COUNTY <u>Howard Co.</u>
_____	DATE <u>12/2/97</u>
_____	GRID _____ E
RECORDED BY <u>Amy McMillen</u>	_____ N

HOLE NO.	TEST NO.	DEPTH	CLOCK TIME	ELAPSED TIME	MEASUREMENT	REMARKS (Method, Moisture, Biopores)
2	✓	18"	10:35 10:51 11:06 11:27 11:45 12:05	 45min 41min 37min 34min	6 ¹³ / ₁₆ 6 ⁶ / ₁₆ 7 ¹² / ₁₆ 8 ⁵ / ₁₆ 8 ¹² / ₁₆ 9 ³ / ₁₆	heaviest layer between 12" & 22" *water went down-not up-measuring device went in upside-down
				Average 40min	OK	
3	✓	18"	11:02 11:08 11:26 12:06 12:25	 6.0 7.6	27 ¹ / ₈ €? 27 ³ / ₁₆ 26 ¹ / ₁₆ 23 ³ / ₁₆ €? 21.0	0-9" topsoil 9-20" Sacilm horizontal structure - Saprolitic sand 20-bottom sand gravel loam
				Average 8min	OK	

Note: 7" of head on each hole

TEST DATA

NAME <u>Feaga Property</u>	FILE NO _____
LOCATION <u>lot 12/13</u>	COUNTY <u>Howard Co.</u>
_____	DATE <u>12/2/97</u>
_____	GRID _____ E
RECORDED BY <u>Amy McMillen</u>	N

HOLE NO.	TEST NO.	DEPTH	CLOCK TIME	ELAPSED TIME	MEASUREMENT	REMARKS (Method, Moisture, Biopores)	
9		18"	1:59	120 min/10 144 min/in	6.0	Typical densest layer 4-19"	
			2:18		5 1/16		
			2:29		5 1/16		
			2:49		5 8/16		
			3:12		5 5/16		
			3:30		5 3/16		
			3:45		5 1/16		
							slow
13		12"	2:28	Average 13min	6.0	Bedrock @ 2.5' grey sandstone ← No measurement H ₂ O dropped below measurable pt.	
			2:32		5 1/16		
			2:42		4 5/16		
			repair 3:20		6.0		
			3:25		5 10/16		
			3:45		4.0		
		4:05	2 9/16				
						Average	OK
						13min	

Note 7' head on each test

TEST DATA

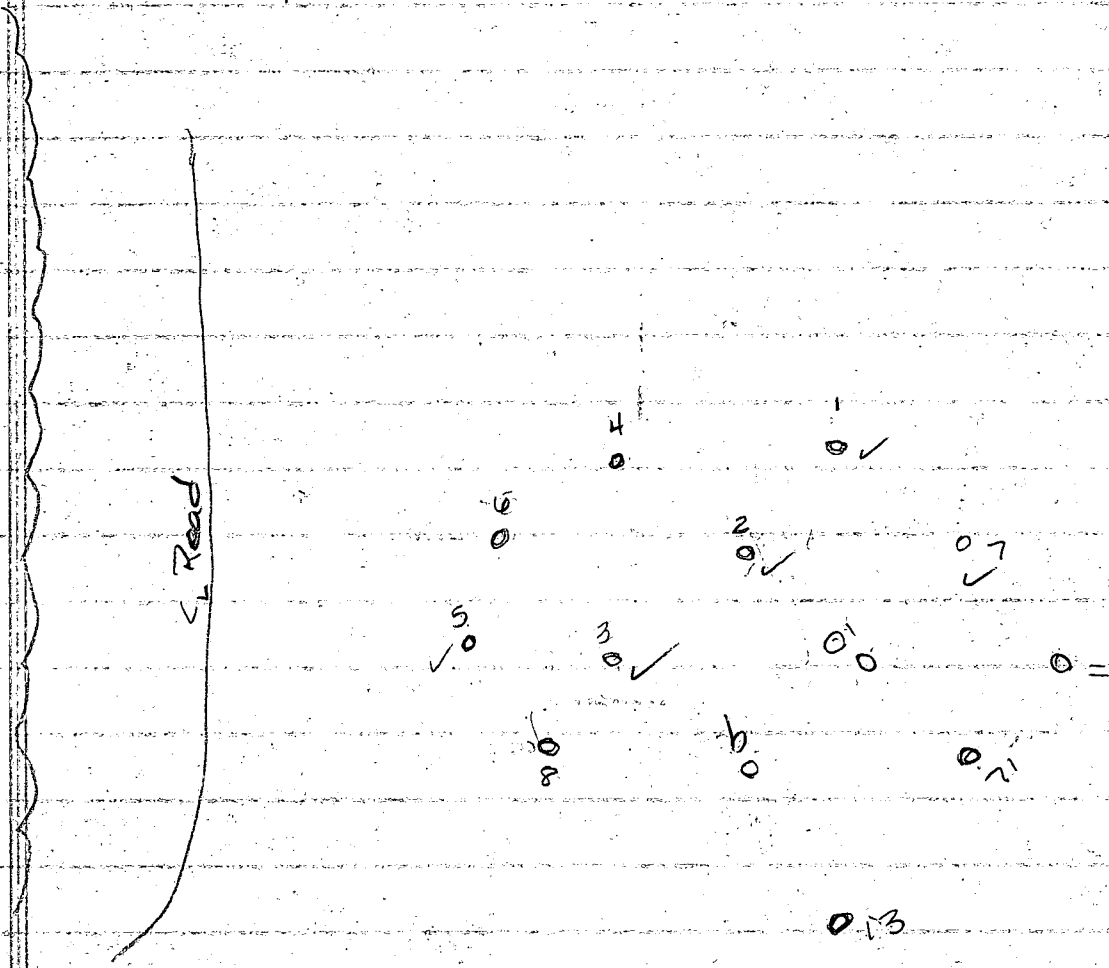
NAME <u>Feaga Prop.</u>	FILE NO _____
LOCATION <u>Lot 12/13</u>	COUNTY <u>Howard</u>
_____	DATE <u>12/2/97</u>
_____	GRID _____ E
RECORDED BY <u>Amy McMillen</u>	_____ N

HOLE NO.	TEST NO.	DEPTH	CLOCK TIME	ELAPSED TIME	MEASUREMENT	REMARKS (Method,Moisture,Biopores)
12	✓	12"	2:03 2:20 2:31 2:48 3:13	8.5 11 Average 10min	6.0 4.1/16 3.2/16 2.7/16 0.7/16 <u>19 mpi Ave</u>	8" topsoil 8"-12" densest clay 12-30 Saelum
11		18"	2:52 3:10 3:28 3:45	12 min 19 min 19 min Average 19 min	-27 12/16 26 4/16 25 5/16 24 7/16 OK	11-26 densest clay

Note 7' head on each test

12/2/97

Location Diagram



11
11"
26" 35 low

@ 11:40

113177
MILEAGE

TEST DATA

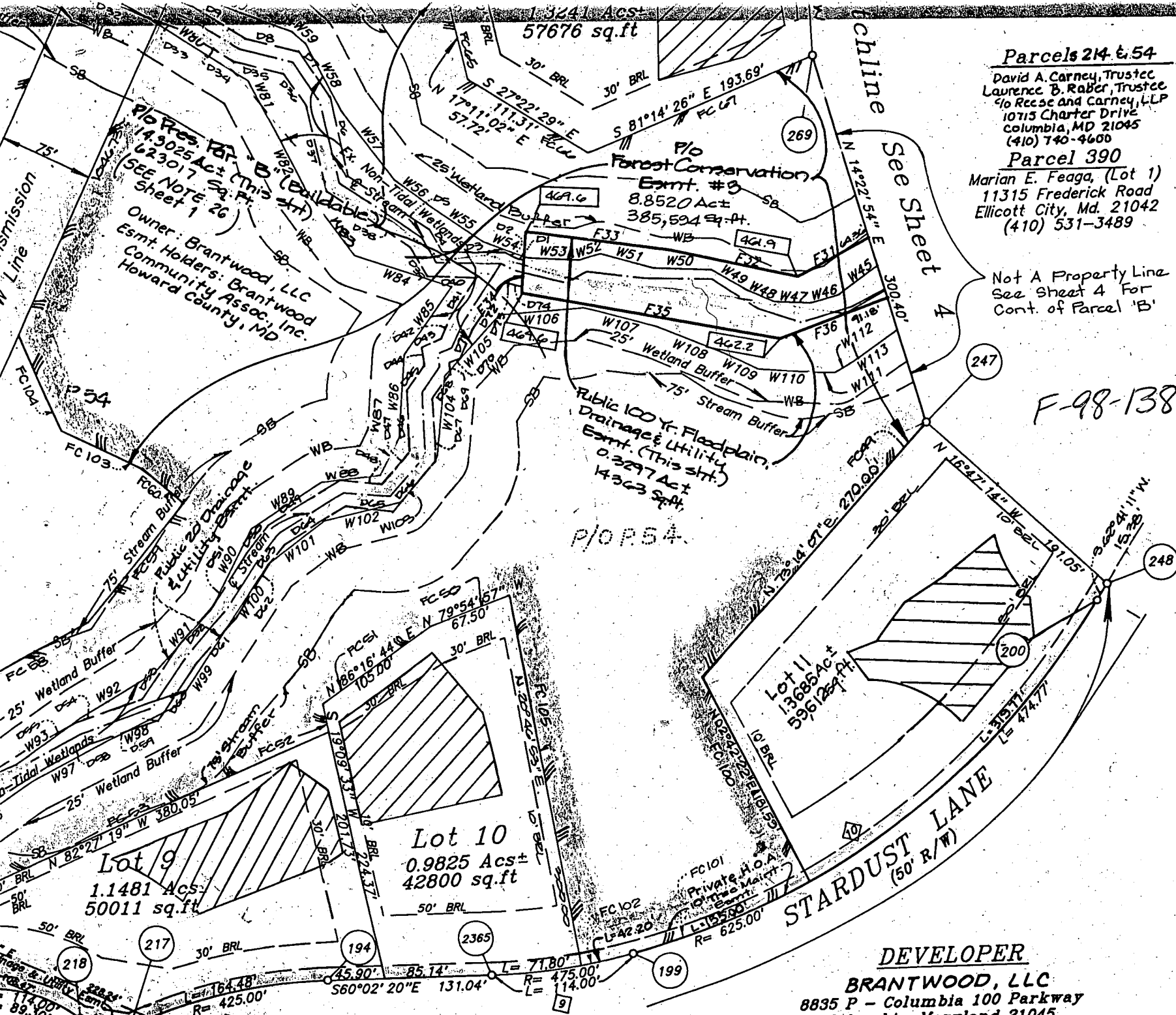
NAME <u>Feaga Prop</u>	FILE NO _____
LOCATION <u>Lot 12/13</u>	COUNTY <u>Howard</u>
_____	DATE <u>11/3/97</u>
_____	GRID _____ E
RECORDED BY <u>Amy McMillen</u>	N

HOLE NO.	TEST NO.	DEPTH	CLOCK TIME	ELAPSED TIME	MEASUREMENT	REMARKS (Method, Moisture, Biopores)
14		18"	9:18		6.0	Typical see test #15
			9:37		4.0	
			9:42	6.8	6.0	
			9:45	8.0	5.9/16	
			9:50	7.3	4.15/16	
			9:56	7.3	4.2/16	
			10:01		3.10/16	
			7min/in Average	OK		
15		18"	9:24		6:00	0-8" topsoil 8"-22" sub & blocky structure 10YR 4/3 ClSaLm 22"-27" 50% 2.5YR 2.5/0 Gritty SaLm saprolite 50% 7.5YR 5/6 Gritty Sa
			9:38		4.1	
			9:44	12.0	6.0	
			9:50	6.7	5.8/16	
			9:55	9.3	4.12/16	
			10:02		4.0	

* Note 7' head on each hole

Test	Depth	TIME	ELAPSED TIME	Depth	Remarks
16	15"	9:29		6.00	Typical see test #15 7" head on test.
		9:39		5 12/16	
		9:57		5 5/16	
		10:15	57	5.0	
		10:30	79	4 13/16	
		10:50	106	4 10/16	
		11:00	53	4 7/16	
		11:15		4 4/16	
		11:53	79	3 13/16	
				— slow —	

(830)



Parcels 214 & 54
 David A. Carney, Trustee
 Lawrence B. Raber, Trustee
 c/o Reese and Carney, LLP
 10715 Charter Drive
 Columbia, MD 21045
 (410) 740-4600

Parcel 390
 Marian E. Feaga, (Lot 1)
 11315 Frederick Road
 Ellicott City, Md. 21042
 (410) 531-3489

Not A Property Line
 See Sheet 4 For
 Cont. of Parcel 'B'

F-98-138

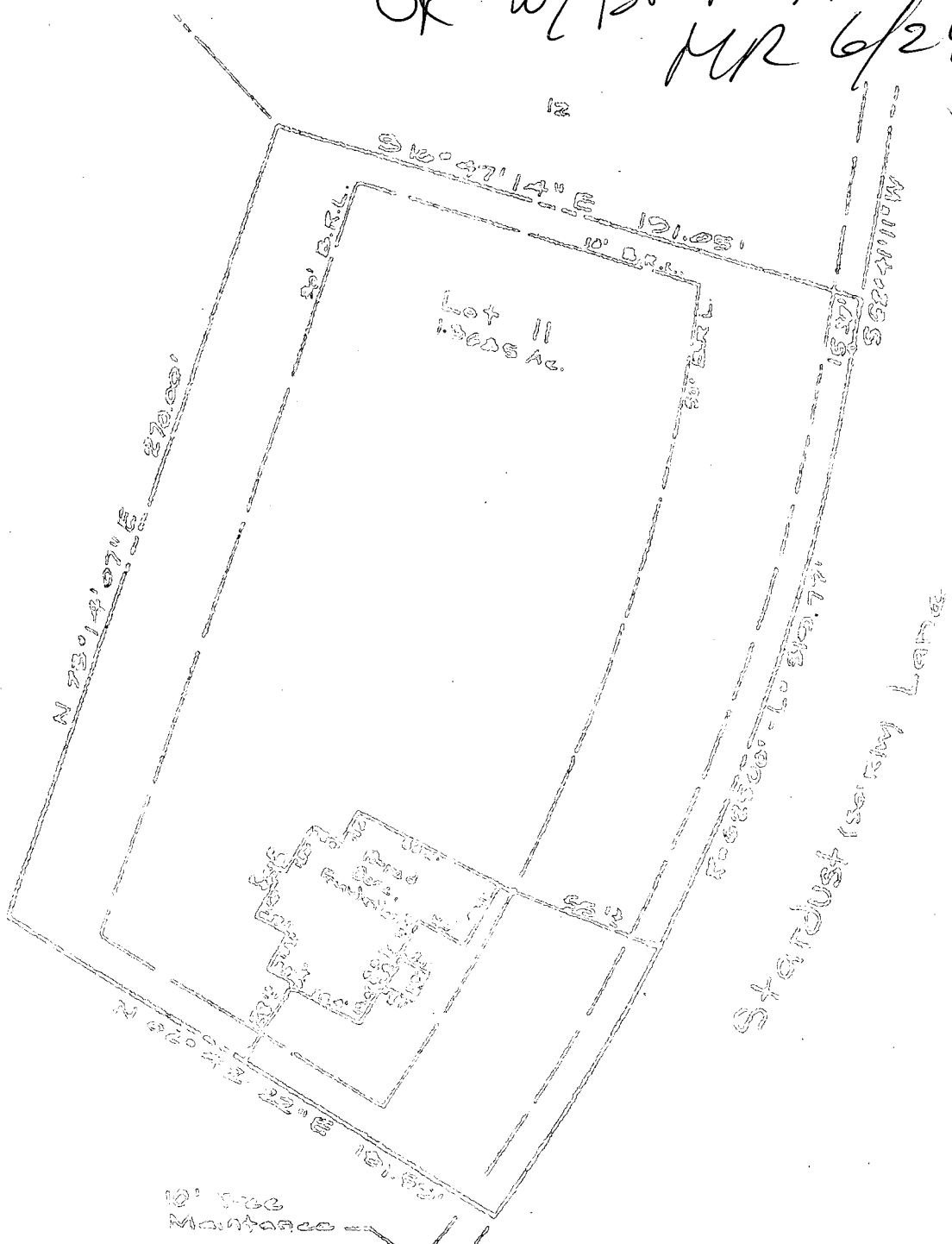
DEVELOPER
BRANTWOOD, LLC
 8835 P - Columbia 100 Parkway
 Columbia, Maryland 21045
 Phone (410) 730-0810

Matchline See Sheet 5

PROPERTY KNOWN AS: Lot 11
 Grantwood
 Section One
 St Elizabeth District
 Howard County, Maryland
 Plat No. 13727

THIS PLAT CAN NOT BE USED TO ESTABLISH
 PROPERTY LINES OR CORNERS.

WALL
 CHECK
 OK w/BP PLAN
 MR 6/24/99



LOCATION DRAWING

Top of Wall: 2495.78'

CERTIFICATION

SEAL

SCALE: 1" = 60' DATE: 6-22-99

I do hereby certify that I have surveyed
 the property known as:
 111 Statute Lane
 The information shown has been obtained
 by actual complete survey, pseudonite, and
 other methods, and is true and correct. This drawing
 is to be used for the location of buildings or
 structures only and is not to be used for
 the establishment of property lines, locations
 of fences, or other boundaries, or other
 marking or future improvements.

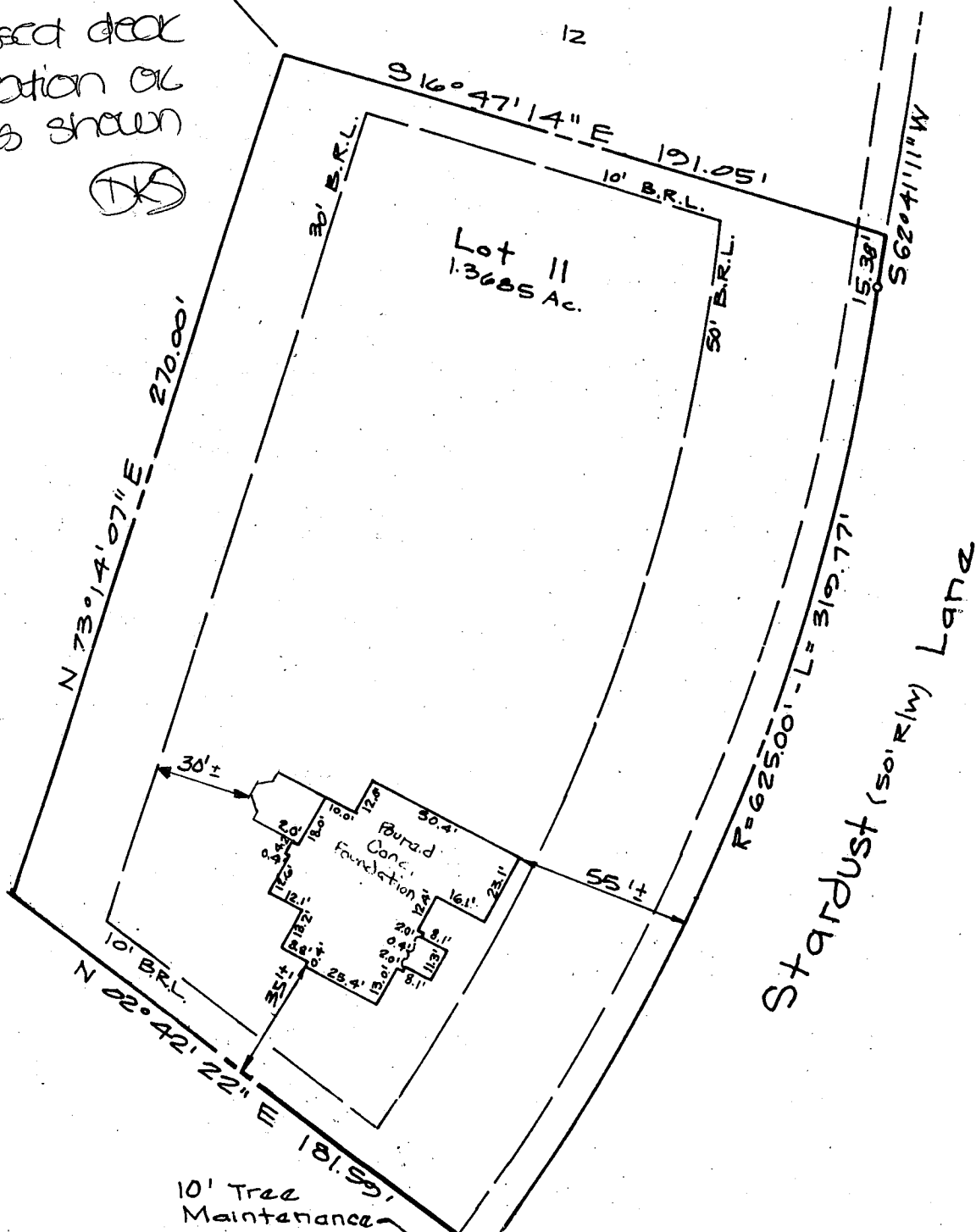


L. DE Inc.
 2750 Rummey Road Suite 100
 Columbia, Maryland 21048
 (410) 715-1070 (Fax)
 (301) 596-3424 (Voice)
 (410) 715-9540 (Fax)

PROPERTY KNOWN AS: Lot 11
 Brantwood
 Section One
 3rd Election District
 Howard County, Maryland
 Plat No. 13727

THIS PLAT CAN NOT BE USED TO ESTABLISH
 PROPERTY LINES OR CORNERS.

7/21/09
 Proposed deck
 location as
 shown



LOCATION DRAWING

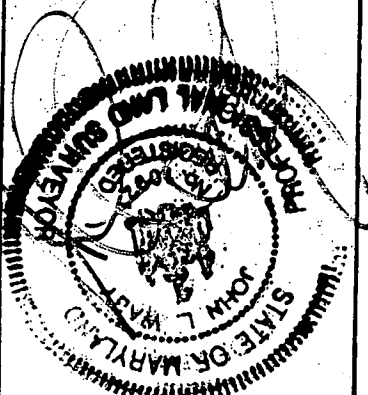
Top of Wall E1. = 495.98'

CERTIFICATION

This is to certify that I have surveyed
 the property known as: 11517
Stardust Lane

The information shown has been established
 by current acceptable survey procedures and
 from available record information. This drawing
 is to be used for Title Transfer Financing, or
 Refinancing Only and IS NOT to be used for
 the Establishment of Property Lines, Location
 for Fences, Garages, Buildings, or other
 Existing or Future Improvements.

SEAL



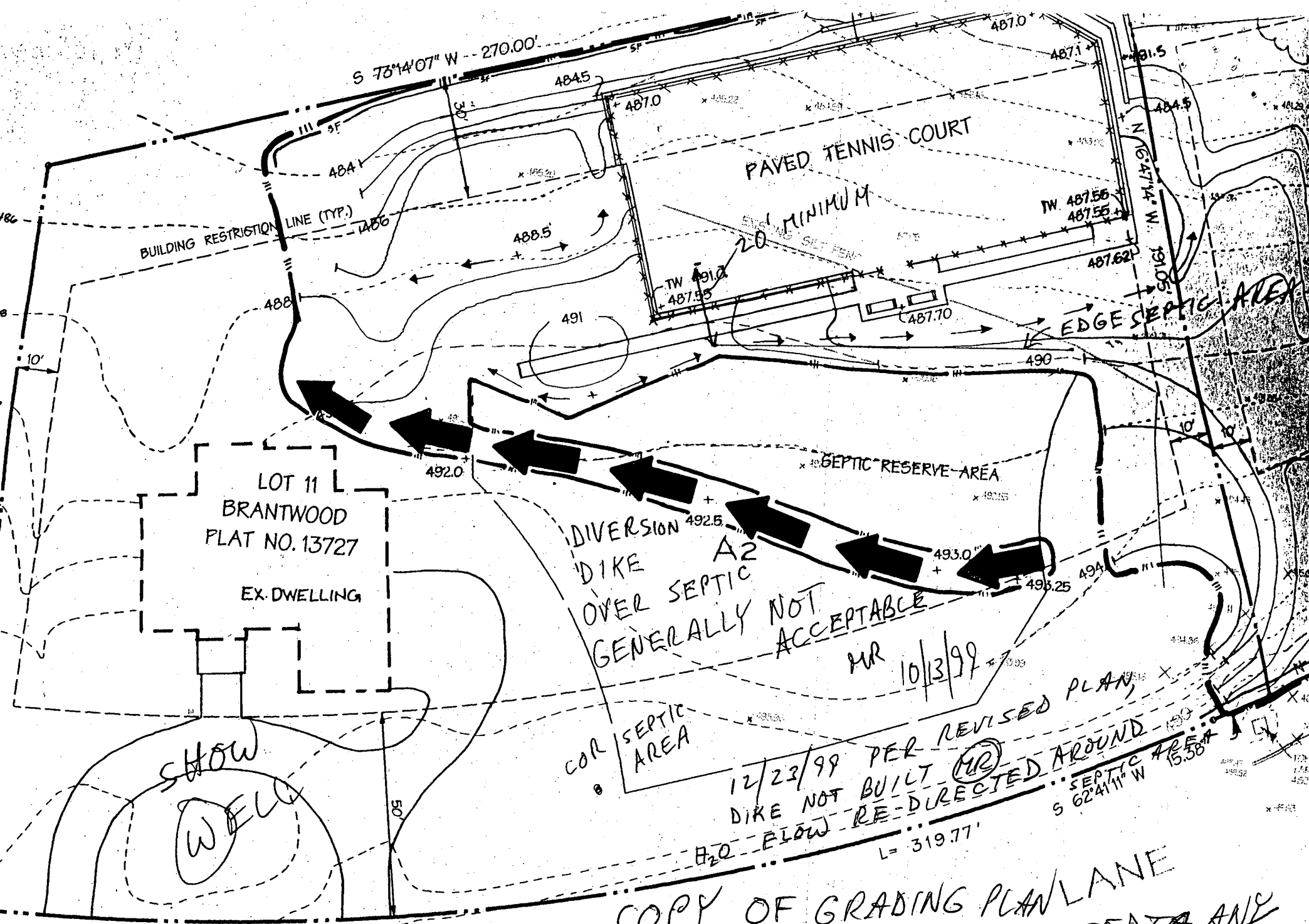
SCALE: 1" = 50'

DATE: 6-22-99

LDE Inc.

9250 Rumsey Road Suite 106
 Columbia, Maryland 21045

(410) 715-1070 (Balt.)
 (301) 596-3424 (Wash)
 (410) 715-9540 (Fax)



LOT 11
BRANTWOOD
PLAT NO. 13727

EX. DWELLING

SHOW
WELL

DIVERSION
DIKE
OVER SEPTIC
GENERALLY NOT
ACCEPTABLE

MR 10/3/99

12/23/99 PER REVISED PLAN,
DIKE NOT BUILT (MR)
H₂O FLOW RE-DIRECTED AROUND

COPY OF GRADING PLAN LANE
SUBMITTED 10/12/99 BUT NOT ADDRESSED TO ANY
REVIEWER; I ADVISED CHRIS OF DMW OF
THESE COMMENTS (MR)

R=625.00'

L=319.77'

S 62°41'11" W
15.58'

June 9, 1999

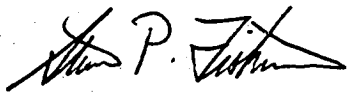
Howard County
Department of Inspections, Licenses, and Permits
3430 Court House Drive
Ellicott City, MD 21043

To Whom It May Concern:

I am requesting a permit revision on building permit #B00117973 at 11517 Stardust Lane to improve the house siting on my lot. The revision involves moving the house over 13' toward the septic field. The septic area has also been revised to accommodate this shift. Craig Williams from the Howard County Health Department has already indicated this would be acceptable (see attached comments).

I greatly appreciate any help that can be provided toward an expeditious review. If anyone has any questions regarding this revision, please call me at (301) 873-4747.

Sincerely,



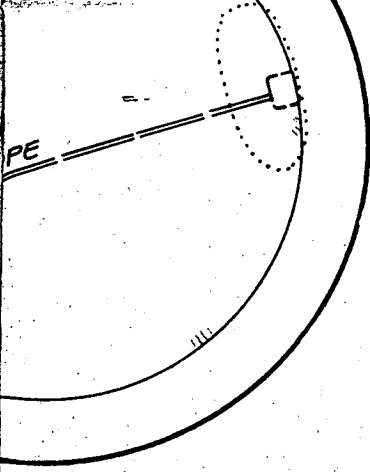
Steve Fishman
Owner

ACCEPTED AS
PROPOSED

6/10/99 Craig Williams

10. WITH PERMISSION FROM THE SEDIMENT CONTROL INSPECTOR REMOVE ALL SEDIMENT AND EROSION CONTROL MEASURES AND STABILIZE ANY REMAINING DISTURBED AREAS WITH PERMANENT SEEDING MIXTURE AND STRAW MULCH.

TOTAL :



EX. WELL

The septic area shown represents a minor variation or adjustment to the recorded septic easement boundaries.

Handwritten signature

6/10/99

BY APPROVAL OF THIS PLAN, HEALTH DEPT ACCEPTS THE DESCRIBED ADJUST TO THE SEWAGE BASE ABOUT 6'

REVISED

Date: 6-10-99

Comments: 11517 Stardust Lane B00117873

more house

Approved Septic System Plan
Howard County Health Department

AS PER THIS PLAN REVISION
4 BR.

Handwritten signature

6/10/99

Date:

width of trench (as required)

width of trench (as)

depth of trench (as)

LDE, INC

9250 Rumsey Road, Suite 106, Columbia, MD.
(410) 715-1070 (301) 596-3424 (410) 715-95

DESIGNED

B.D.B.

DRAWN

K.B.W.

CHECKED

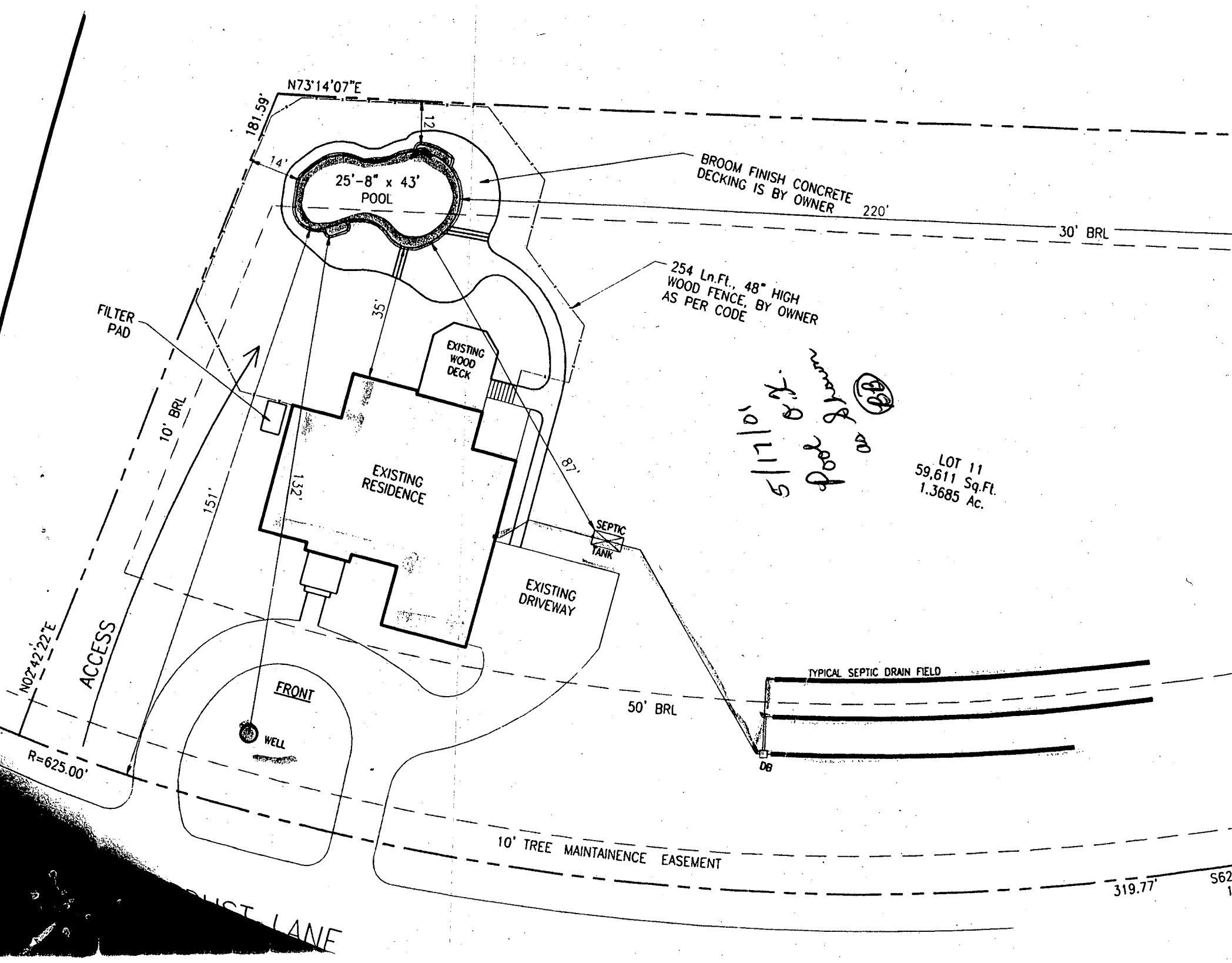
B.D.B.

GRADING & SEDIMENT CONTROL PLAN

BRANTWOOD
SECTION ONE
Lot 11

Tax Map No. 16 Block 22 P/O Parcel No. 54
3rd Election District Howard County, Maryland

Previous Submittals: WP96-133, 596-23, P98-08, F98-138
WP99-14, WP99-17



BROOM FINISH CONCRETE DECKING IS BY OWNER 220'

30' BRL

254 Ln.Ft., 48" HIGH WOOD FENCE, BY OWNER AS PER CODE

Handwritten notes:
5/17/15
Pool
summary
DB

LOT 11
59,611 Sq.Ft.
1.3685 Ac.

TYPICAL SEPTIC DRAIN FIELD

50' BRL

10' TREE MAINTAINENCE EASEMENT

319.77'

S62

DRIVEWAY

SEPTIC SYSTEM DESIGN: (4 BEDROOMS)

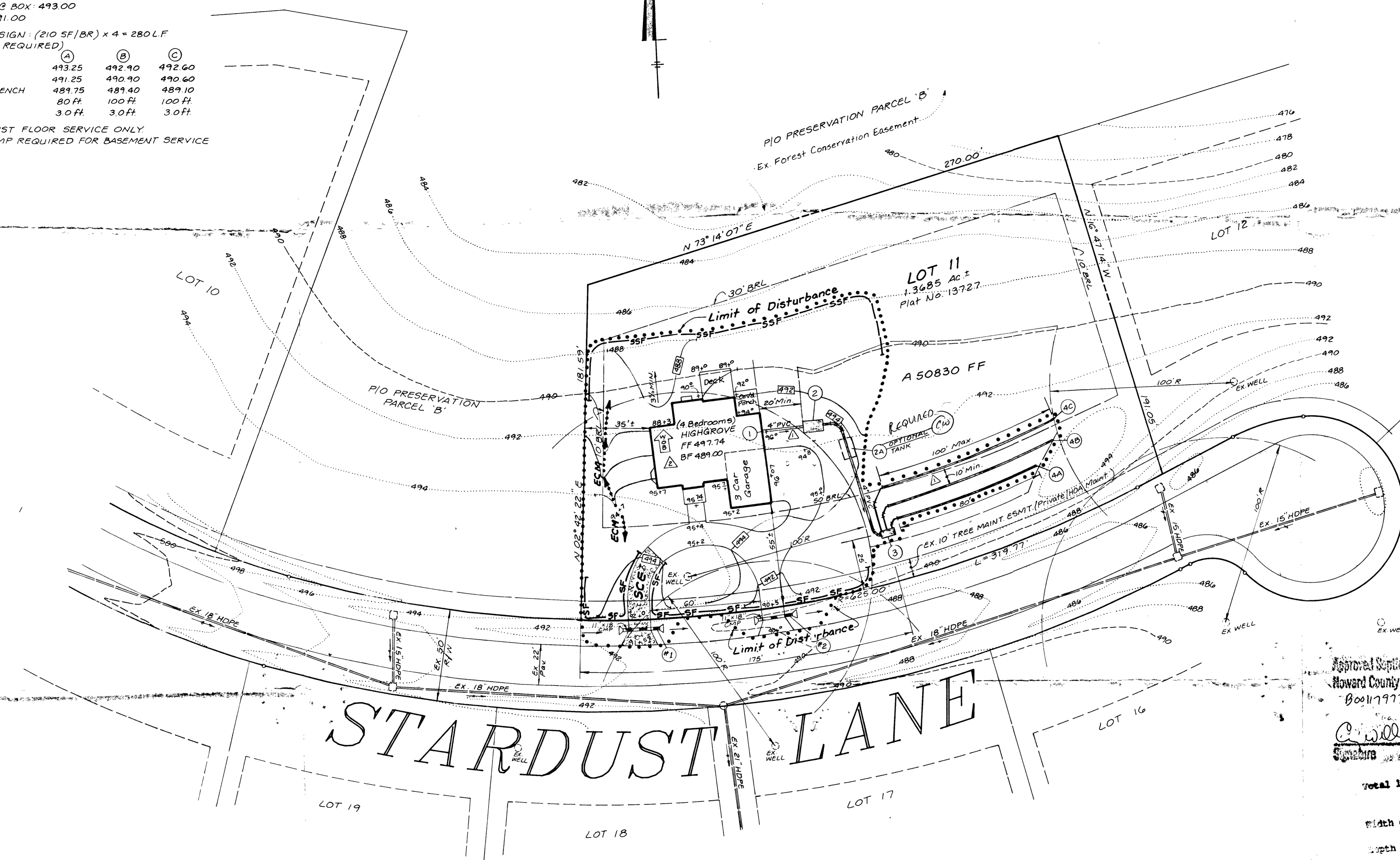
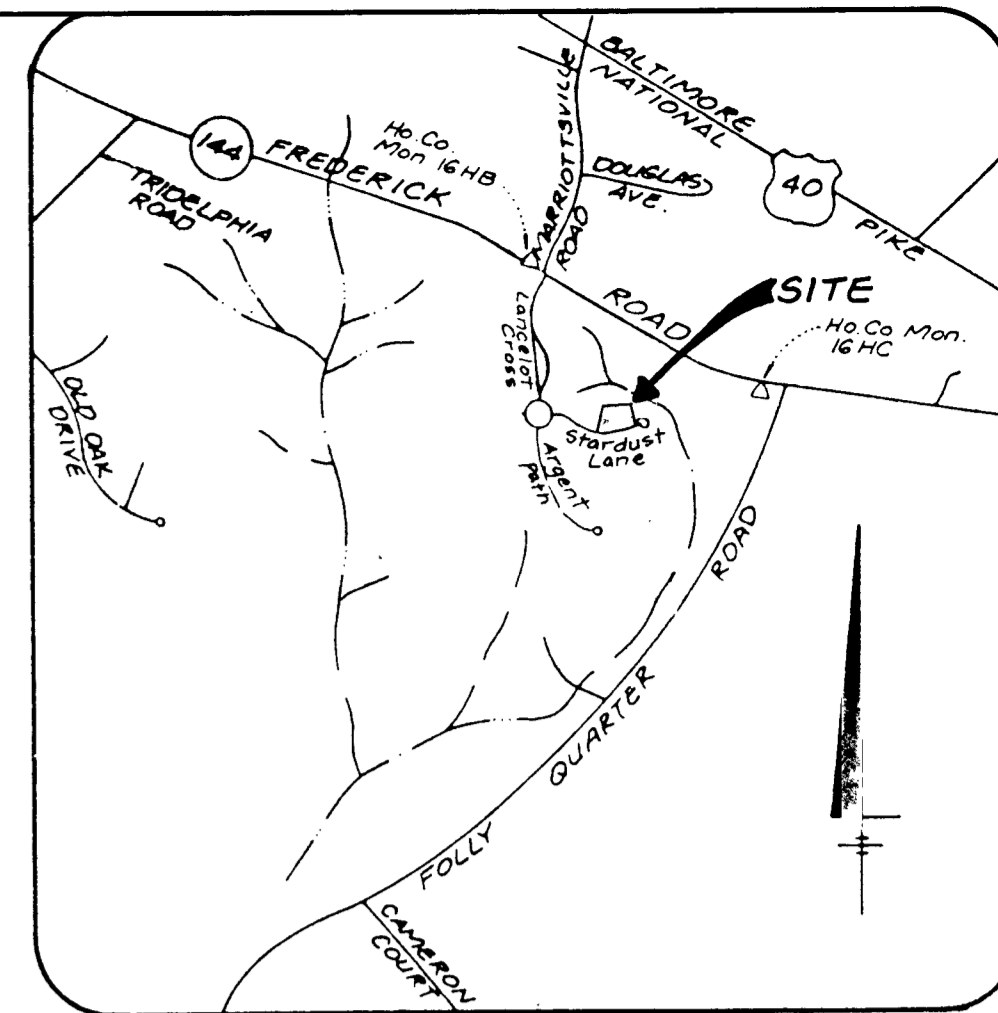
- ① INVERT @ WALL : 493.00
- ② 1250 GALLON TOP SEAMED SEPTIC TANK (PROVIDE MANHOLE TO GRADE)
EX. GRADE @ TANK : 491.40
FIN. GRADE @ TANK : 495.30
INVERT IN : 492.80
INVERT OUT : 492.50
- ③ DISTRIBUTION BOX: (PROVIDE 3 OUTLETS MIN.)
EX. GRADE @ BOX : 493.00
FIN. GRADE @ BOX : 493.00
INVERT : 491.00
- ④ TRENCH DESIGN : (210 SF/BR) x 4 = 280 L.F. OF TRENCH REQUIRED

	(A)	(B)	(C)
TOP GRADE	493.25	492.90	492.60
INVERT	491.25	490.90	490.60
BOTTOM TRENCH	489.75	489.40	489.10
LENGTH	80 FT.	100 FT.	100 FT.
WIDTH	3.0 FT.	3.0 FT.	3.0 FT.

NOTE: FIRST FLOOR SERVICE ONLY
PUMP REQUIRED FOR BASEMENT SERVICE

LEGEND

- LIMIT OF DISTURBANCE
- SCE STABILIZED CONSTRUCTION ENTRANCE
- SF - SF SILT FENCE
- SSF - SSF SUPER SILT FENCE
- 592 EX GROUND
- 592 PROP GRADE



SEQUENCE OF CONSTRUCTION

1. OBTAIN GRADING PERMIT	1 DAY
2. NOTIFY THE HOWARD COUNTY DEPARTMENT OF INSPECTIONS, PERMITS AND PERMITS AT LEAST 24 HOURS PRIOR TO STARTING WORK	1 DAY
3. CONSTRUCT STABILIZED CONSTRUCTION ENTRANCE, INSTALL CULVERT PIPE UNDER DRIVEWAY ENTRANCE	1 DAY
4. INSTALL SILT FENCE AT LIMIT OF DISTURBANCE SHOW HEREON	3 DAYS
5. CLEAR AND GRUB SITE TO SUBGRADE	5 DAYS
6. BEGIN EXCAVATION FOR HOUSE FOUNDATIONS AND BEGIN HOUSE CONSTRUCTION - INSTALL SEPTIC SYSTEM	60 DAYS
7. THE CONTRACTOR SHALL INSPECT AND PROVIDE NECESSARY MAINTENANCE ON THE SEPTIC TANK AND RELATED STRUCTURES SHOWN HEREON AT THE END OF EACH DAY OF CONSTRUCTION ON A DAILY BASIS	DAILY
8. REMOVE SEDIMENT FROM MANHOLES AND GROSSLY STABILIZED CONSTRUCTION ENTRANCE LOCUS REQUIRED	MAINTENANCE
9. FINE GRADE SITE AND STABILIZE WITH PERM-NET SEEDING MIXTURE AND STRAW MULCH (POST-CONSTRUCTION) (PRE-25% AND HOUSE WALLS)	5 DAYS
10. WITH PERMISSION FROM THE SEDIMENT CONTROL DEPARTMENT REMOVE ALL SEDIMENT AND EROSION CONTROL MEASURES AND STABILIZE ANY REMAINING DISTURBED AREAS WITH PERMANENT SEEDING MIXTURE AND STRAW MULCH	8 DAYS
TOTAL	84 DAYS

The septic area shown represents a minor variation or adjustment to the recorded septic easement boundaries.

Approved Septic System Plan
Howard County Health Department
800119773
Signature: *[Signature]* Date: 6/10/99

BY APPROVAL OF THIS PLAN
HEALTH DEPT ACCEPTS
THE DESCRIBED ADJUSTMENT
TO THE SEWAGE DISPOSAL
EASEMENT 6/10/99

Total linear feet of trench required _____ feet
width of trench (es) _____ feet
length of trench (es) _____ feet
depth of slots required below _____ feet

THESE PLANS HAVE BEEN REVIEWED FOR THE HOWARD SOIL CONSERVATION DISTRICT AND MEET THE TECHNICAL REQUIREMENTS.

NATURAL RESOURCE CONSERVATION SERVICE

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

HOWARD SOIL CONSERVATION DISTRICT

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 CONDITIONS AND THAT IT WAS PREPARED IN ACCORDANCE WITH REQUIREMENTS OF THE HOWARD SOIL CONSERVATION DISTRICT."

Signature: *[Signature]* Date: 3/16/99

DEVELOPER'S CERTIFICATE

"I/WE CERTIFY THAT ALL DEVELOPMENT AND/OR CONSTRUCTION WILL BE DONE ACCORDING TO THESE PLANS AND THAT ANY RESPONSIBLE PERSONNEL INVOLVED IN THE CONSTRUCTION PROJECT WILL MAKE A CERTIFICATE OF ATTENDANCE AT A DEPARTMENT OF THE ENVIRONMENT 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: *[Signature]* Date: 3/25/99

REVISIONS

NO.	DATE	DESCRIPTION
1	5/28/99	Revise location of house.
2	5/12/99	Revise septic easement.
3	5/12/99	Add Septic System
4	5/12/99	Revise 'Limit of Disturbance'

LDE, INC.
9250 Rumsey Road, Suite 106, Columbia, MD. 21045
(410) 715-1070 (301) 596-3424 (410) 715-9540 (Fax)

DESIGNED: B.D.B. SCALE: 1" = 30'

DRAWN: K.B.W. DRAWING: 1 of 2

CHECKED: B.D.B. JOB NO.: 99-011

DATE: 3/99 FILE NO.: GP 99-169

BRANTWOOD SECTION ONE Lot 11

Tax Map No. 16, Block 22, PIO Parcel No. 54, 3rd Election District, Howard County, Maryland
Previous Submittals: WP 99-133, 596-23, P98-08, F98-138, WP 99-14, WP 98-133

Owner/Developer: STEVE FISHMAN, 555 Guince Orchard Rd. Suite 280, Gaithersburg, Maryland 20878, (301) 873-4747

