

LAYOUT 8/30/02 INSP 4 _____
 INSP 2 9/3/02 2:30 INSP 5 _____
 INSP 3 9/5/02 2-3 INSP 6 _____

ISSUE DATE: 8/21/2002

APPROVAL DATE: 9/5/02

PERMIT
INDEXED

P 517431

A 50857-B

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

Fogles Septic Clean, Inc IS PERMITTED TO INSTALL ALTER

ADDRESS: 580 Obrecht Road, Sykesville PHONE NUMBER: 410-795-5670

SUBDIVISION: High Forest Estates LOT NUMBER: 29

ADDRESS: 15004 High Forest Estates Ct PROPERTY OWNER: PRABODH SHARMA
Big Branch Overlook, LLC

SEPTIC TANK CAPACITY (GALLONS): 1500 OUTLET BAFFLE FILTER REQUIRED

PUMP CHAMBER CAPACITY (GALLONS): N/A COMPARTMENTED TANK REQUIRED

NUMBER OF BEDROOMS: 4

SQUARE FEET PER BEDROOM: 180

LINEAR FEET OF TRENCH REQUIRED: 240 HOUSE SERVED BY PUBLIC WATER

TRENCHES:	Trench to be 3.0 feet wide. Inlet 3.0 feet below original grade. Bottom maximum depth 5.0 feet below original grade. Effective area begins at 3.0 feet below original grade. 2.0 feet of stone below distribution pipe.
LOCATION:	Place the distribution box as shown on the approved site plan. Run trenches on contour (four 60' trenches).
NOTES:	

PLANS APPROVED: Steven R. Krieg OK 5/0/02 (SC) DATE: 4/23/2002

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

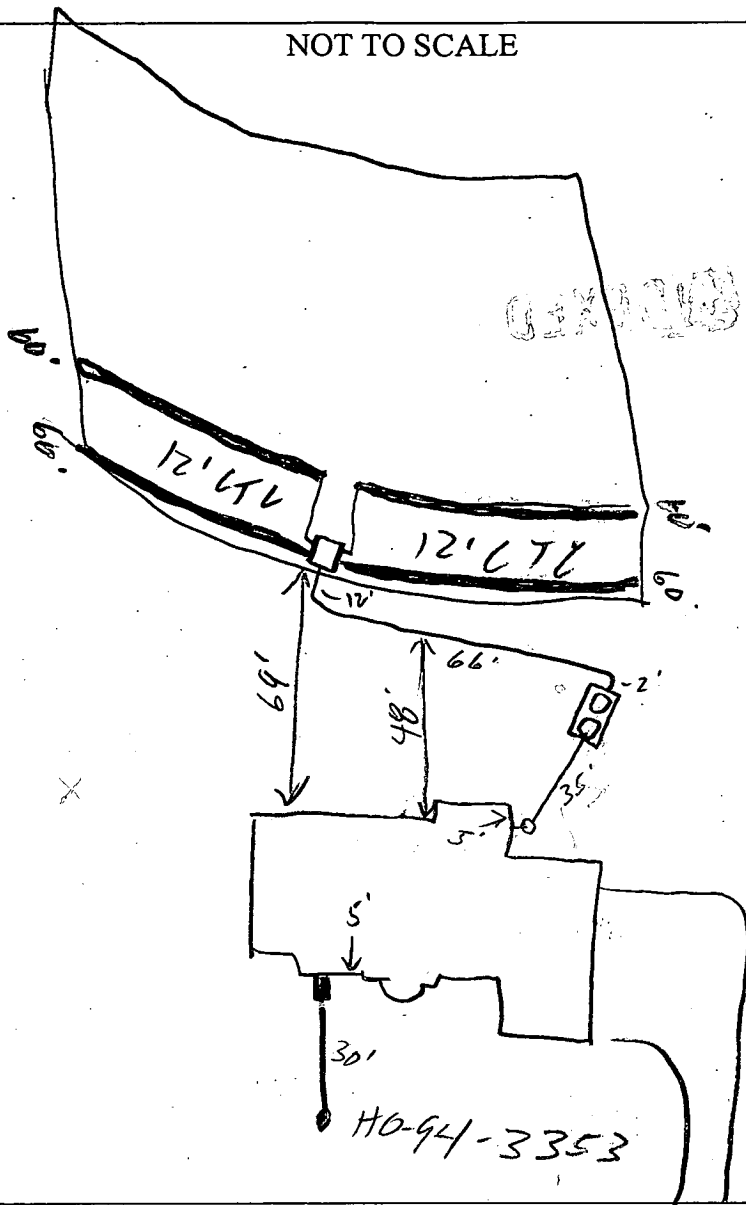
NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT ALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

BUILDING PERMIT SIGNED AND RETURNED

10/31/2002 B00139150 DECK
 10/02/2002 B00138701 - POOL

450857-B

NOT TO SCALE



TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
3'	3'	5"
NUMBER OF TRENCHES		4
TOTAL LENGTH		240'
ABSORPTION AREA		726 sq ft
DISTRIBUTION BOX LEVEL		<input checked="" type="checkbox"/>
DISTRIBUTION BOX BAFFLE		<input checked="" type="checkbox"/>
DISTRIBUTION BOX PORT		<input checked="" type="checkbox"/>

SEPTIC TANK DATA	
SEPTIC TANK 1 LEVEL <input checked="" type="checkbox"/>	
CAPACITY	1500 GAL
SEAM LOC	Top
TANK LID DEPTH	1'
BAFFLES	<input checked="" type="checkbox"/>
BAFFLE FILTER	<input checked="" type="checkbox"/>
MANHOLE LOC	F&B
6" PORT LOC	<input checked="" type="checkbox"/>
WATERTIGHT TEST	<input checked="" type="checkbox"/>
SEPTIC TANK 2 LEVEL _____	
CAPACITY	_____ GAL
SEAM LOC	_____
TANK LID DEPTH	_____
BAFFLES	N/A
BAFFLE FILTER	_____
MANHOLE LOC	_____
6" PORT LOC	_____
WATERTIGHT TEST	_____

High Forest

ROAD

PRE-CONSTRUCTION

8/30/02 Lot staked, Layout per R.P.

(4) 60's trenches (SO)

INSTALLATION

9/3/02 Tank set, 2 longer trenches installed (SO)

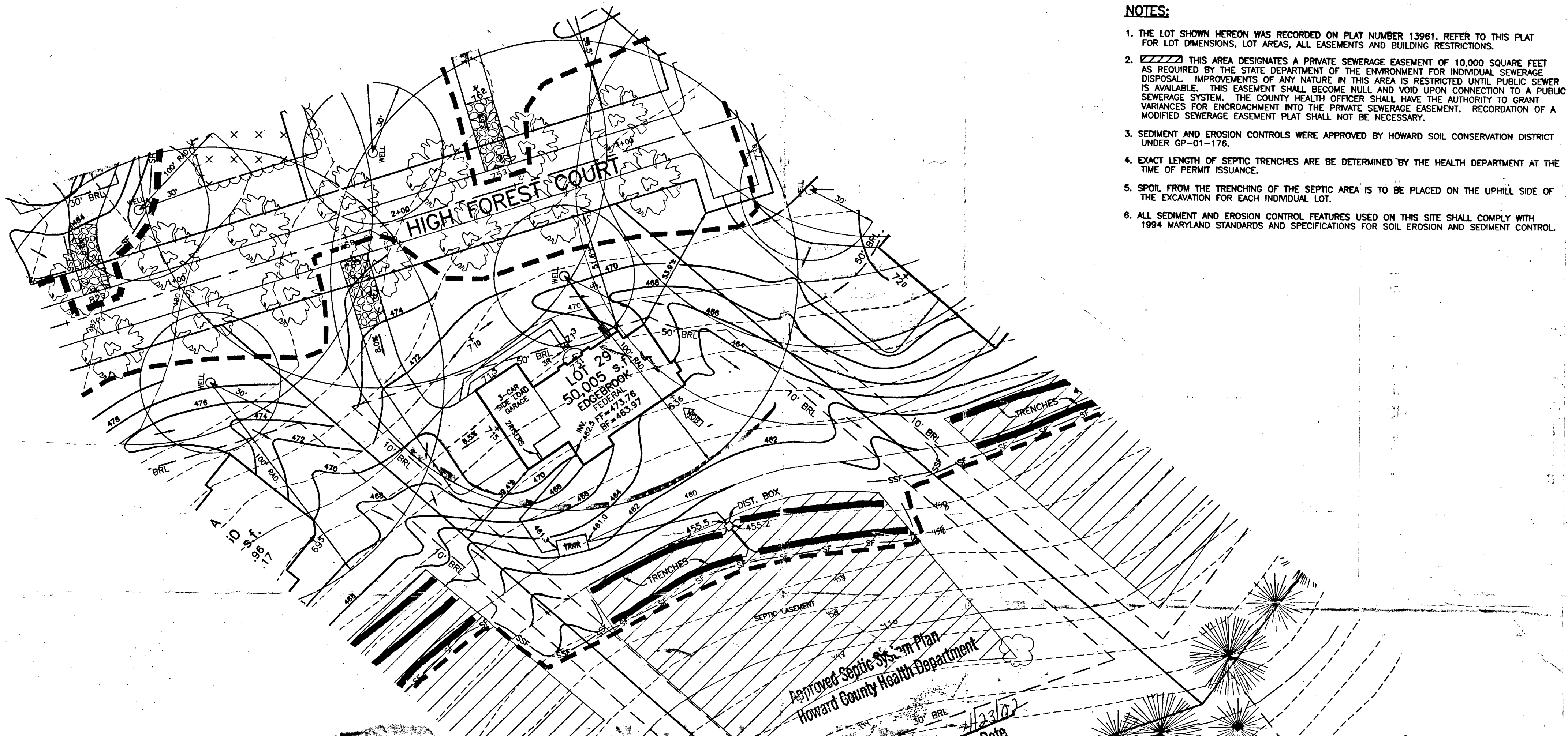
9/5/02 OK to cover all work (SO)

FINAL INSPECTOR

[Signature]

DATE OF APPROVAL

BUILDING PERMITS SIGNED AND RETURNED

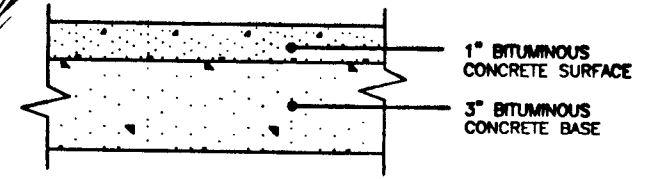


- NOTES:**
1. THE LOT SHOWN HEREON WAS RECORDED ON PLAT NUMBER 13961. REFER TO THIS PLAT FOR LOT DIMENSIONS, LOT AREAS, ALL EASEMENTS AND BUILDING RESTRICTIONS.
 2. THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF 10,000 SQUARE FEET AS REQUIRED BY THE STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWERAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA IS RESTRICTED UNTIL PUBLIC SEWER IS AVAILABLE. THIS EASEMENT SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENT INTO THE PRIVATE SEWERAGE EASEMENT. RECORDATION OF A MODIFIED SEWERAGE EASEMENT PLAT SHALL NOT BE NECESSARY.
 3. SEDIMENT AND EROSION CONTROLS WERE APPROVED BY HOWARD SOIL CONSERVATION DISTRICT UNDER GP-01-176.
 4. EXACT LENGTH OF SEPTIC TRENCHES ARE BE DETERMINED BY THE HEALTH DEPARTMENT AT THE TIME OF PERMIT ISSUANCE.
 5. SPOIL FROM THE TRENCHING OF THE SEPTIC AREA IS TO BE PLACED ON THE UPHILL SIDE OF THE EXCAVATION FOR EACH INDIVIDUAL LOT.
 6. ALL SEDIMENT AND EROSION CONTROL FEATURES USED ON THIS SITE SHALL COMPLY WITH 1994 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL.

LEGEND

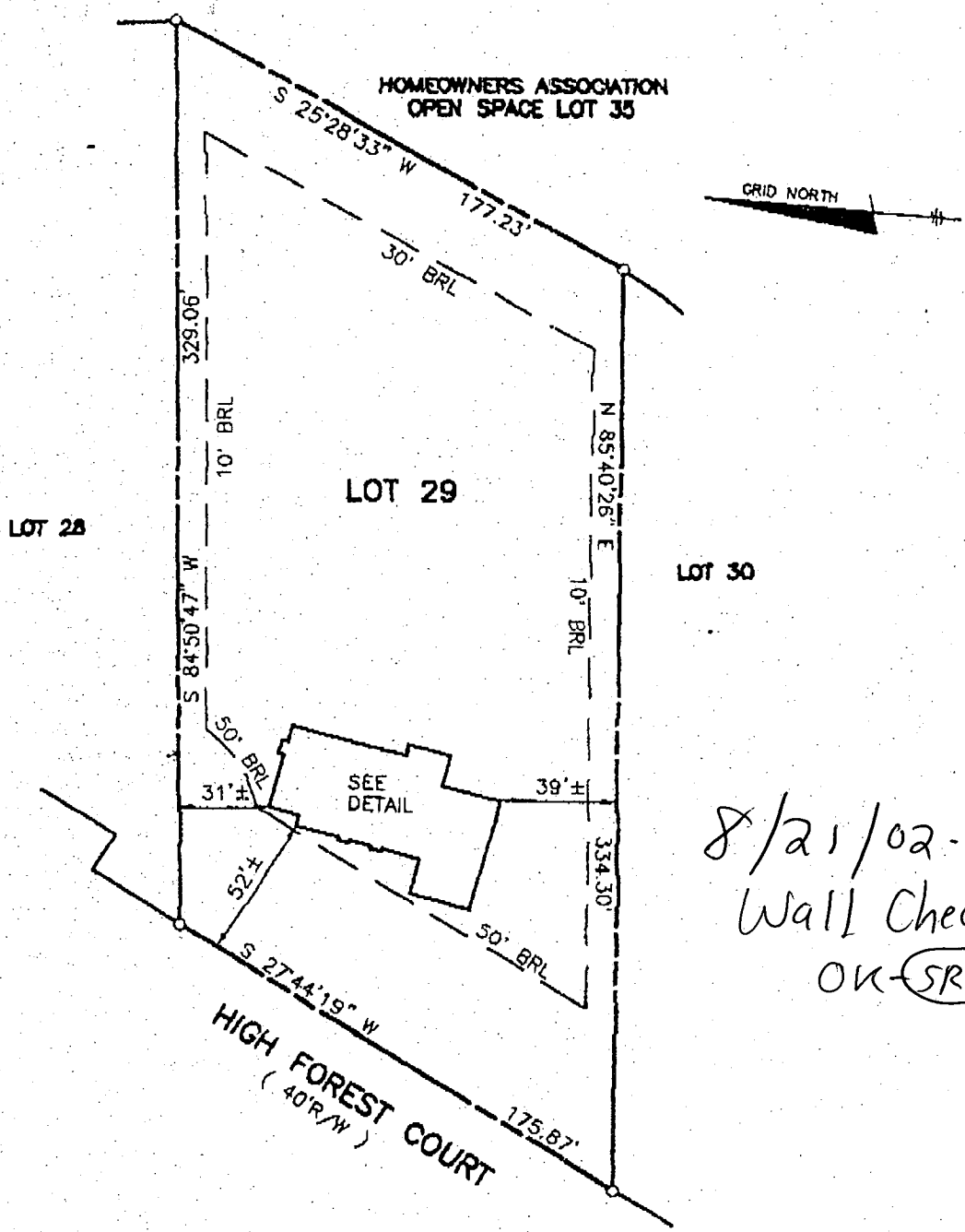
- 470 EXISTING CONTOURS AS SHOWN ON F-98-167
- 472 PROPOSED CONTOURS
- EXISTING TREELINE
- PROPOSED TREELINE
- SF SILT FENCE
- SSF SUPER SILT FENCE
- EARTH DIKE
- STABILIZED CONSTRUCTION ENTRANCE
- LIMIT OF DISTURBANCE
- SEPTIC EASEMENT
- WELL LOCATION
- STREET TREE INSTALLED UNDER F-98-167

PLAN
SCALE: 1" = 30'



FULL DEPTH BIT. CONC. ALTERNATIVE
P-1 PAVING DETAIL
NOT TO SCALE

<p>BENCHMARK ENGINEERS & LAND SURVEYORS & PLANNERS ENGINEERING, INC. 8480 BALTIMORE NATIONAL PIKE & SUITE 418 ELLCOTT CITY, MARYLAND 21043 PHONE: 410-465-8105 FAX: 410-465-6644</p>	<p>PROJECT: HIGH FOREST ESTATES LOT 29</p>	
	<p>LOCATION: 15004 HIGH FOREST COURT TAX MAP 27, GRID 6 - PARCEL 140,141,142 5th ELECTION DISTRICT HOWARD COUNTY, MARYLAND</p>	
<p>BUILDER: TOLL BROTHERS, INC. 7164 COLUMBIA GATEWAY DRIVE SUITE 230 COLUMBIA, MARYLAND 21046 410-872-9105</p>	<p>TITLE: PLOT PLAN</p>	
	<p>HOUSE TYPE: COVENTRY</p>	
	<p>DATE: FEBRUARY 11, 2002</p>	<p>PROJECT NO. 1362</p>
<p>SCALE: AS SHOWN</p>		<p>DRAWING 1 OF 1</p>



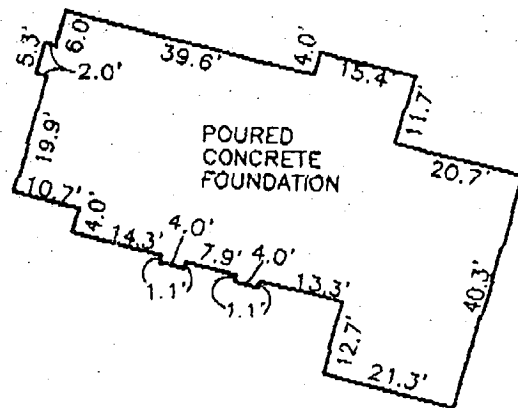
8/21/02
Wall Check
OK (SRW)

FIRST FLOOR ELEVATION = 474.1'
OFFSET DIMENSIONS TO PROPERTY LINES ARE ± 1'

SURVEYOR'S CERTIFICATE

I HEREBY CERTIFY TO THE BEST OF MY PROFESSIONAL KNOWLEDGE, INFORMATION AND BELIEF, THAT THE DIMENSIONS OF THE BUILDING WALLS SHOWN HEREON ARE CORRECT, THAT THEY ARE BASED ON A FIELD RUN SURVEY PERFORMED BY BENCHMARK ENGINEERING, INC. ON 06/21/02 ; AND THAT THE PROPERTY OUTLINE SHOWN HEREON IS BASED ON THE PLAT PREPARED BY R.M.MOCHI GROUP,P.C. ENTITLED "HIGH FOREST ESTATES", AND RECORDED AMONG THE LAND RECORDS OF HOWARD COUNTY AS PLAT No.13961

David M. Harris



FOUNDATION DETAIL

SCALE: 1" = 30'

C1 14440 SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED. 4/23/02 COUNTY NUMBER 13 A 50857B

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

ST/CO USE ONLY DATE RECEIVED MM DD YY 4 15 02

DATE WELL COMPLETED MM DD YY 4 15 02 Depth of Well 22 300 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-3353

OWNER Toll Brothers Brothers Toll Brothers STREET OR RFD High Forest Ct. TOWN Glenelya SUBDIVISION HIGH FOREST ESTATES SECTION LOT 29

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 Brown mica, Limestone, Brown, Limestone, white, Limestone.

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) YES [X] NO [] TYPE OF GROUTING MATERIAL (Circle one) CEMENT [X] BENTONITE CLAY [] NO. OF BAGS 21 NO. OF POUNDS 1714 GALLONS OF WATER 126 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 62 ft.

CASING RECORD

MAIN CASING TYPE BEST 06 65 Nominal diameter top (main) casing (nearest inch)! Total depth of main casing (nearest foot) 60 61 63 64 66 70

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

SCREEN RECORD screen type or open hole ST BR HO PL OT STEEL BRASS BRONZE PLASTIC HOLE OTHER

NUMBER OF UNSUCCESSFUL WELLS: 0 WELL HYDROFRACTURED YES [X] NO []

DEPTH (nearest ft.) HO 65 300

CIRCLE APPROPRIATE LETTER A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED E ELECTRIC LOG OBTAINED P TEST WELL CONVERTED TO PRODUCTION WELL

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

DRILLERS LIC. NO. 1 MSD009 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. 1 D

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

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

TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3 PUMPING TEST

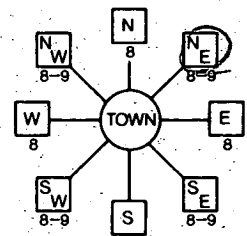
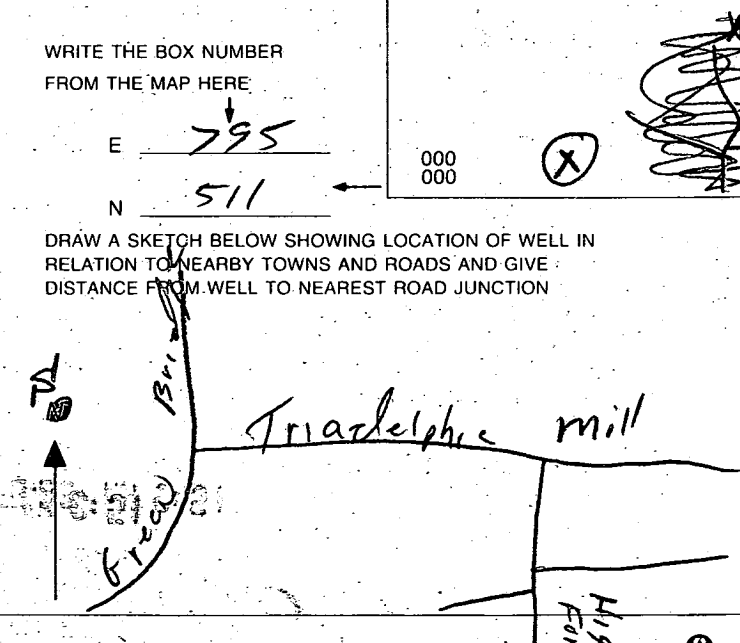
HOURS PUMPED (nearest hour) 03 PUMPING RATE (gal. per min.) 6 METHOD USED TO MEASURE PUMPING RATE 196L WATER LEVEL (distance from land surface) BEFORE PUMPING 39 ft. WHEN PUMPING 57 ft. TYPE OF PUMP USED (for test) S submersible

PUMP INSTALLED

DRILLER INSTALLED PUMP (CIRCLE) (YES or NO) YES [] NO [X] 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) [X] above } LAND SURFACE [] below } 01 (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)

NO Survey stakes

B 1 1 2 3 6 <u>9757</u>	SEQUENCE NO. (MDE USE ONLY) STATE OF MARYLAND PERMIT TO DRILL WELL please print or type <u>W5165417</u>	STATE PERMIT NUMBER <u>H0-94-3353</u> <small>fill in this form completely</small>
Date Received (APA) <u>02 28 02</u> <small>8 MM DD YY 13</small> OWNER INFORMATION 15 Last Name <u>TOLL</u> Owner First Name <u>Brothers</u> 34 36 <u>14203</u> <u>Howard Rd.</u> 55 Street or RFD 57 <u>Dayton</u> <u>MD</u> 70 <u>21036</u> 76 Town State Zip	B 3 LOCATION OF WELL 8 COUNTY <u>Howard</u> 21 23 SUBDIVISION <u>High Forest Estates</u> 42 SECTION <u>44</u> 46 LOT <u>29</u> 48 50 52 NEAREST TOWN <u>Glencig</u> 71 MILES FROM TOWN (enter 0 if in town) <u>4</u> M I 73 76 77 78	
DRILLER INFORMATION 76 Driller's Name <u>Aiken Compton MSD 009</u> 81 License No. Firm Name <u>Fogles Well Drilling</u> Address <u>580 Obrecht Rd.</u> Signature <u>Aiken Compton</u> Date <u>2-27-02</u>	B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  11 <u>High Forest Ct.</u> 30 NEAR WHAT ROAD ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH <input type="checkbox"/> WEST <input checked="" type="checkbox"/> EAST <input type="checkbox"/> SOUTH <input type="checkbox"/> 34 <u>25</u> 37 DISTANCE FROM ROAD FT ENTER FT OR MI 38 39 TAX MAP: <u>27</u> BLK: <u>11</u> PARCEL <u>147</u>	
B 2 WELL INFORMATION APPROX. PUMPING RATE <u>5</u> <small>(GAL. PER MIN.) 8 12</small> AVERAGE DAILY QUANTITY NEEDED <u>500</u> <small>(GAL. PER DAY) 14 20</small>	NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL <u>Howard</u> <u>13</u> <u>075A50857B</u> COUNTY NAME COUNTY NO. STATE SIGNATURE _____ INSERT S → _____ 41 DATE ISSUED <u>03 13 02</u> <u>Karen G. Hodely</u> <u>03/13/03</u> <small>43 MM DD YY 48 CO-SIGNATURE EXP. DATE</small> NORTH GRID <u>511</u> 0 0 0 EAST GRID <u>0795</u> 0 0 0 <small>50 55 57 63</small>	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, DEWATERING <input type="checkbox"/> PUBLIC WATER SUPPLY WELL <input type="checkbox"/> TEST, OBSERVATION, MONITORING <input type="checkbox"/> GEO-THERMAL	SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE E <u>795</u> N <u>511</u> 000 000 <input checked="" type="checkbox"/>	
APPROXIMATE DEPTH OF WELL <u>300</u> FEET <small>24 28</small> APPROXIMATE DIAMETER OF WELL <u>6</u> INCH NEAREST TOWN	METHOD OF DRILLING (circle one) BORED (or Augered) <input checked="" type="checkbox"/> JETTED <input type="checkbox"/> Jetted & DRIVEN <input type="checkbox"/> <small>30 AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary)</small> <small>37 CABLE REVERSE-ROTary DRIVE-POINT</small> other _____	
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="checkbox"/> 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 _____ G _____ PERMIT No. <u>H0-94-3353</u> <small>70 71 72 73 74 75 76 77 78 79</small>	SPECIAL CONDITIONS <small>NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED</small>	

WELL STAKED BY
ENGINEER. No Insp.
3/13/02 (KG)

SWM POND #2
EX. SEDIMENT
BASIN #2
F-98-167

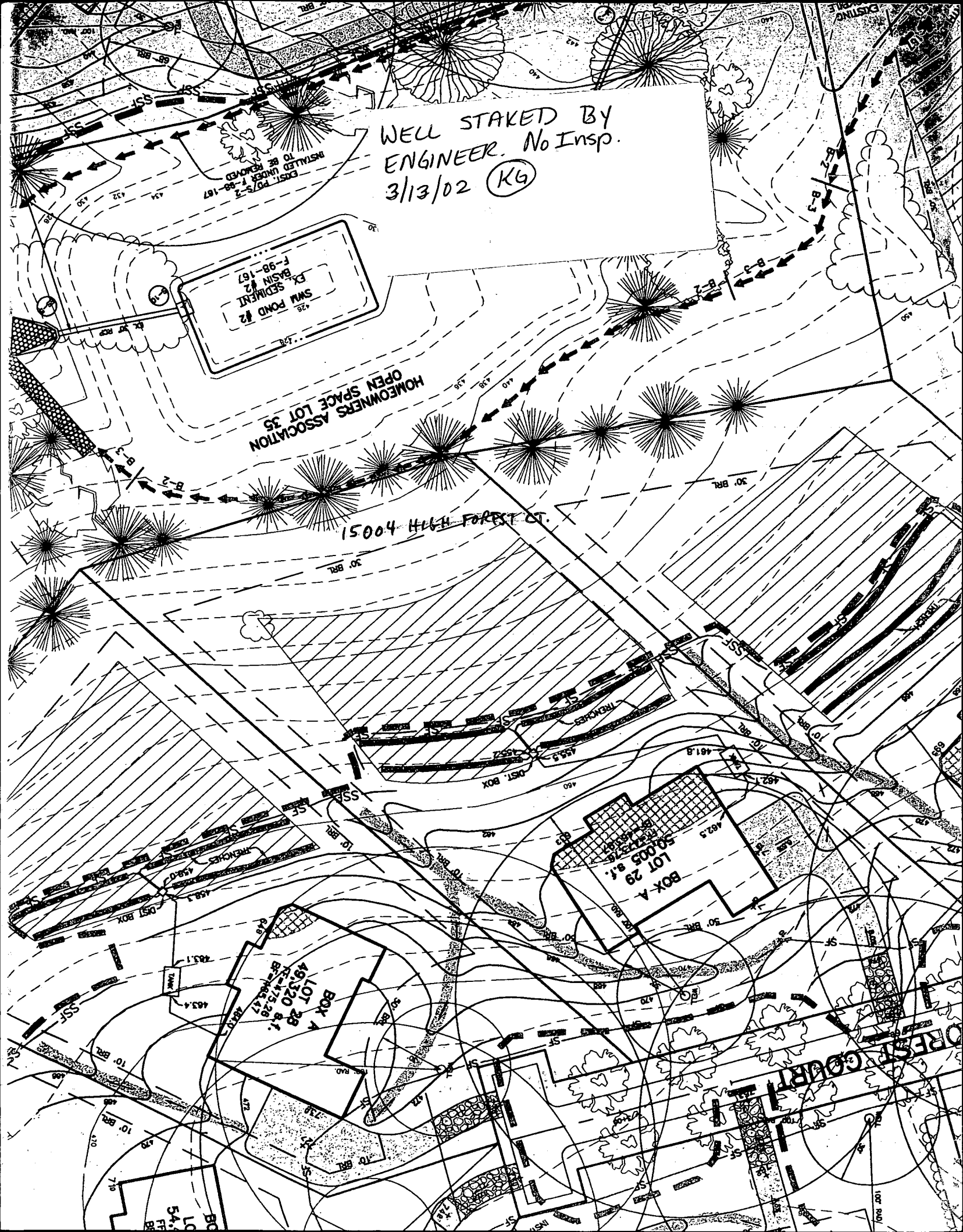
HOMEOWNERS ASSOCIATION
OPEN SPACE LOT 35

15004 HILL FOREST CT.

LOT 29
50,005 s.f.
BOX A

LOT 28
49,320 s.f.
BOX A

HILL FOREST COURT



APPLICATION

PERCOLATION TESTING

A 57577

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2840

DISTRICT _____

DATE _____

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 C. M. C. CONSTRUCTION, INC.

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER CHARLES A. SHARP

ADDRESS 3779 SHARP ROAD PHONE 410-989-4630

PROPERTY LOCATION:

BDIVISION C. M. C. CONSTRUCTION PROPERTY LOT NO. 48

ROAD AND DESCRIPTION HOWARD ROAD 3,000'± FROM INTERSECTION
TRIDELPHIA ROAD (SOUTH)

TAX MAP 27 PARCEL # 19

SIZE OF LOT 40,000 - 50,000 SQ. FT. TYPE BLDG. SINGLE FAMILY DWELLING
(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.

Charles A. Sharp
(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 _____

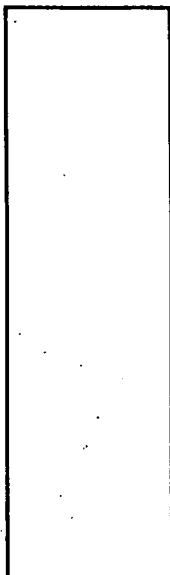
THIS IS NOT A PERMIT

A57577

COUNTY #

SOIL PROFILE

0'



48B

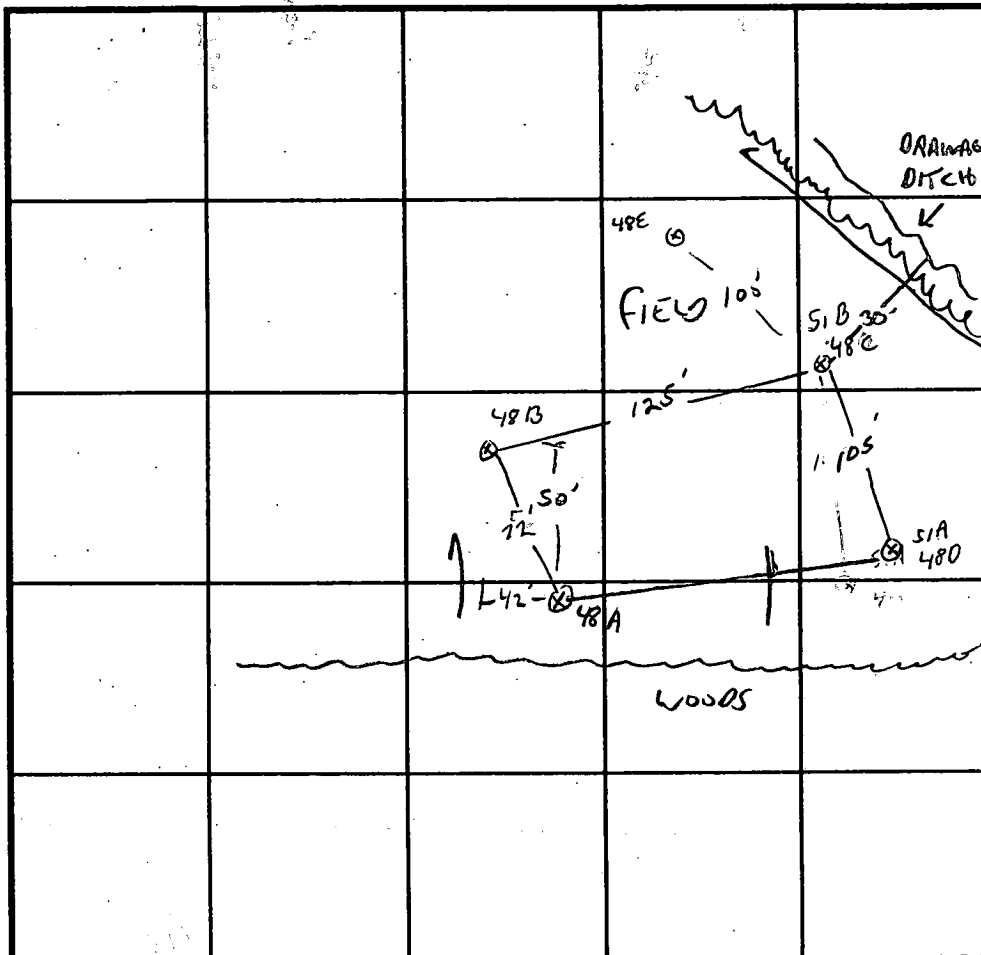
TOPSOIL
 BROWN SANDY CLAY LOAM w/ YELLOW BANDS
 3-4'

BROWN HEAVY LOAM
 8'

TAN SSL
 158
 ROCK

48E

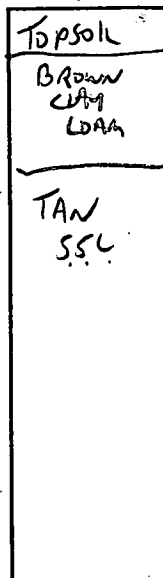
SIMILAR TO 47 F- BUT DRIER



SOIL PROFILE

48A

480



4-6'

11.5

35

31

10

5

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11/20/96	48A	4.5 / 11.5V	11:06	slow			
		5.5 / 8V ok	11:19		11:22	11:26	4 MIN
	48B	3.5 / 11.5V	11:10	11:12	11:12	11:17	5 MIN
		7'	11:11	11:16	11:16	11:20	4 MIN
	48D / 51A	3 / 12V	11:30	11:31	11:32	11:34	2 MIN
		7 VOK					
	51B / 48C	2.5 /	11:34	11:36	11:36	11:38	2 MIN
		6.5 /	11:34	11:36	11:36	11:39	3 MIN
X	48E	NOT TESTED	- WET SEASON		TEST RECD.		
			SEE ALSO LOT 97		2062 FOR SALT		

REMARKS COT 48

TYPE OF SOIL _____

TESTED BY G. SAVAGE ALSO PRESENT C. SHARP

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

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

X

APPLICATION

PERCOLATION TESTING

A 57577

P _____

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

DISTRICT _____

DATE _____

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 C.M.C. CONSTRUCTION, INC.

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER CHARLES A. SHARP

ADDRESS 3779 SHARP ROAD PHONE 410-489-4630

PROPERTY LOCATION:

'B DIVISION C.M.C. CONSTRUCTION PROPERTY LOT NO. 45

ROAD AND DESCRIPTION HOWARD ROAD 3,000'± FROM INTERSECTION
TRIDELPHIA ROAD (SOUTH)

TAX MAP 27 PARCEL # 19

SIZE OF LOT 40,000 - 50,000 SQ. FT. TYPE BLDG. SINGLE FAMILY DWELLING
(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. Charles A Sharp
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

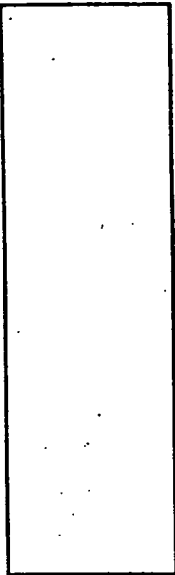
PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

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

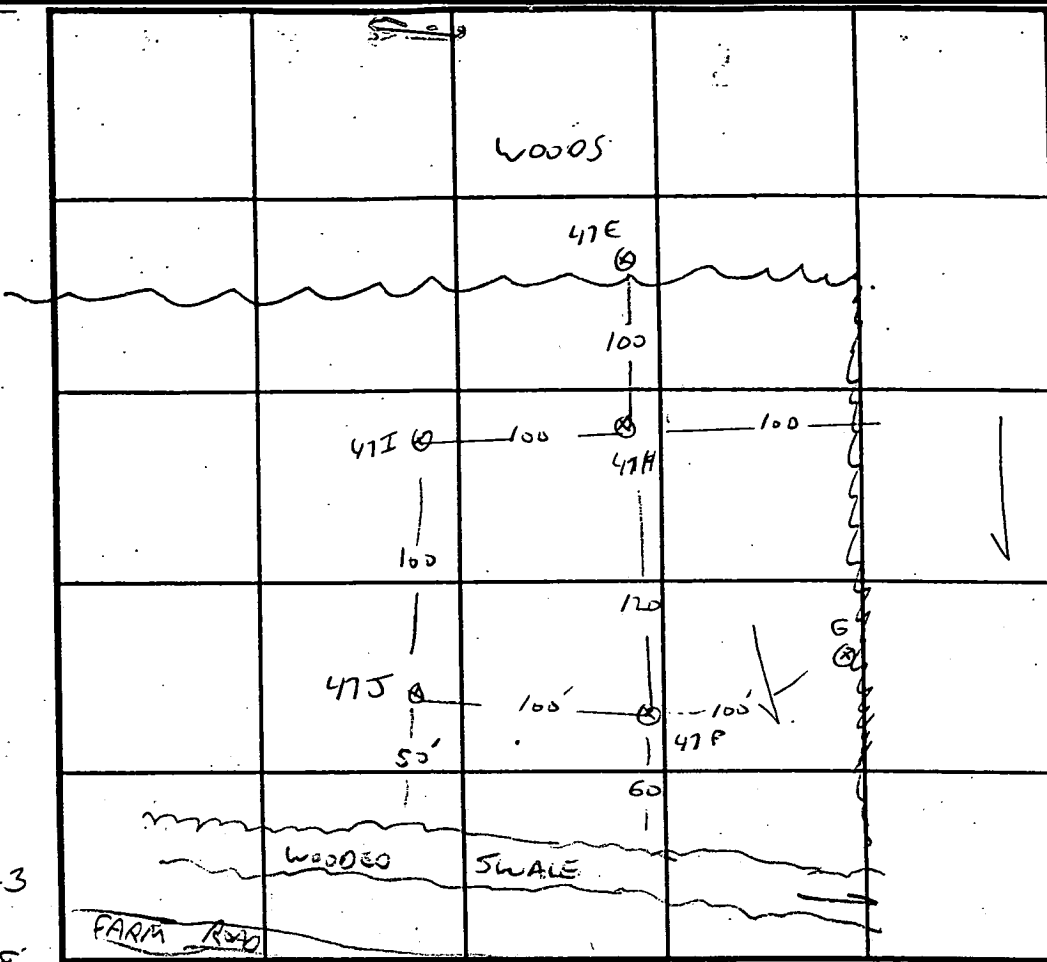
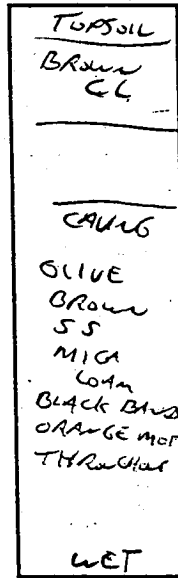
THIS IS NOT A PERMIT

COUNTY #

SOIL PROFILE

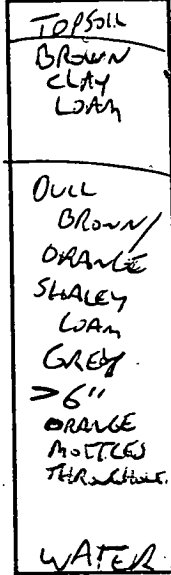


47F



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE



N →

TOWARDS BACK OF PROPERTY

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11/22/96	47J	9V					
	47E V						

REMARKS LOT 47 2062 J+E WETSEASON

TYPE OF SOIL _____

TESTED BY G. SAVAGE ALSO PRESENT C. SHARP

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

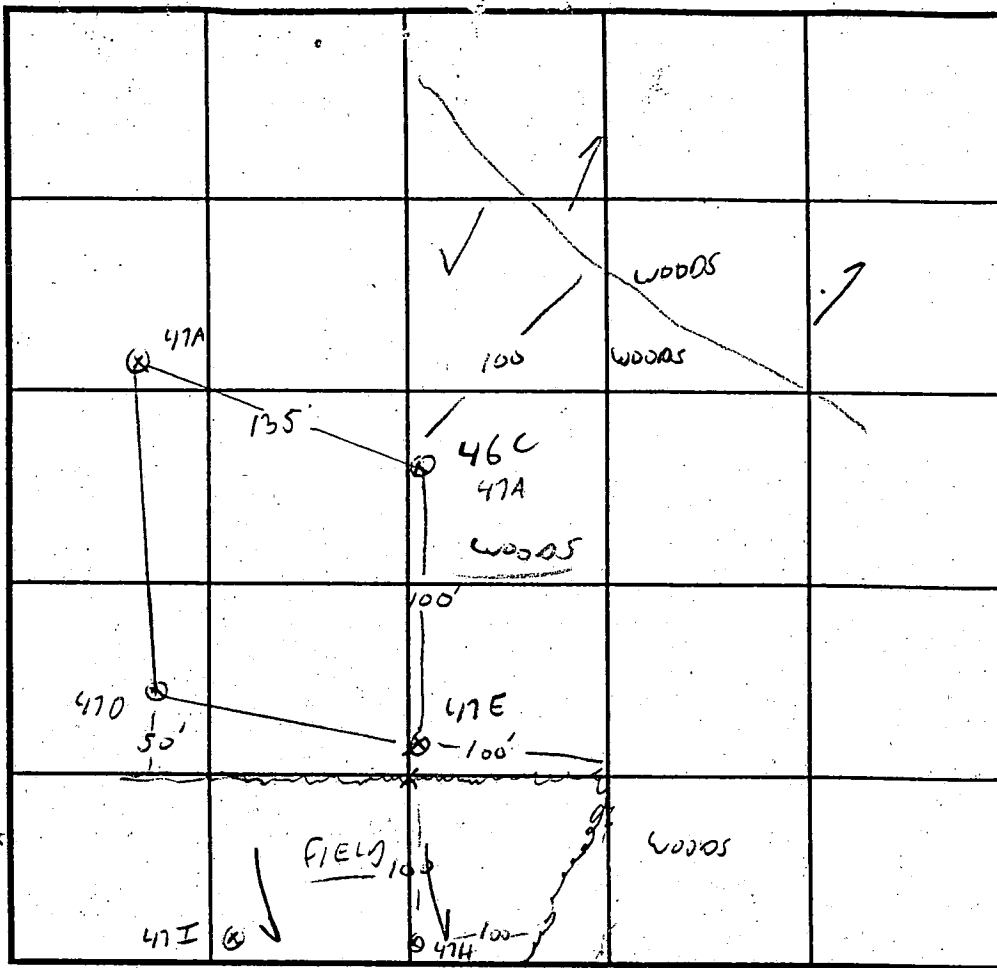
INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____

X

A 51517

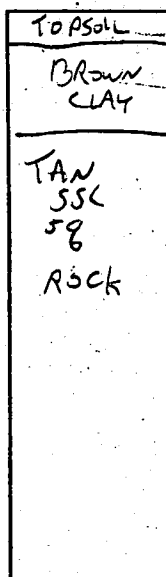
COUNTY #

SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE



TYPICAL 47E H

2

12.5

4.8
2
13.5

47A
TOPSOIL 47A
Brown SANDY CLAY CORN 108 ROCK

2

TAN SANDY CORN
258 SHALL

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11/20/96	47E	3/12.5	12:48	12:50	12:50	12:53	3MIN
		7 VOLK					
	46C	3/12	12:55	12:56	12:56	12:58	2MIN
	47A	3/	1:00	1:02	1:02	1:05	3MIN
		7 VOLK					
	47D	3.5/12	1:08	1:12	1:12	1:18	6MIN
		7	1:08	1:10	1:10	1:13	3MIN
11/22/96	47H	2.5/8V 12V	12:38	12:39	12:39	12:41	2MIN
	47I	3.5/7V 12V	12:40	12:42	12:42	12:50	8MIN
		-					

REMARKS Lot 47, NOT PER PLAN, 10E 2

TYPE OF SOIL _____

TESTED BY G. SAVAGE ALSO PRESENT C. SHARP

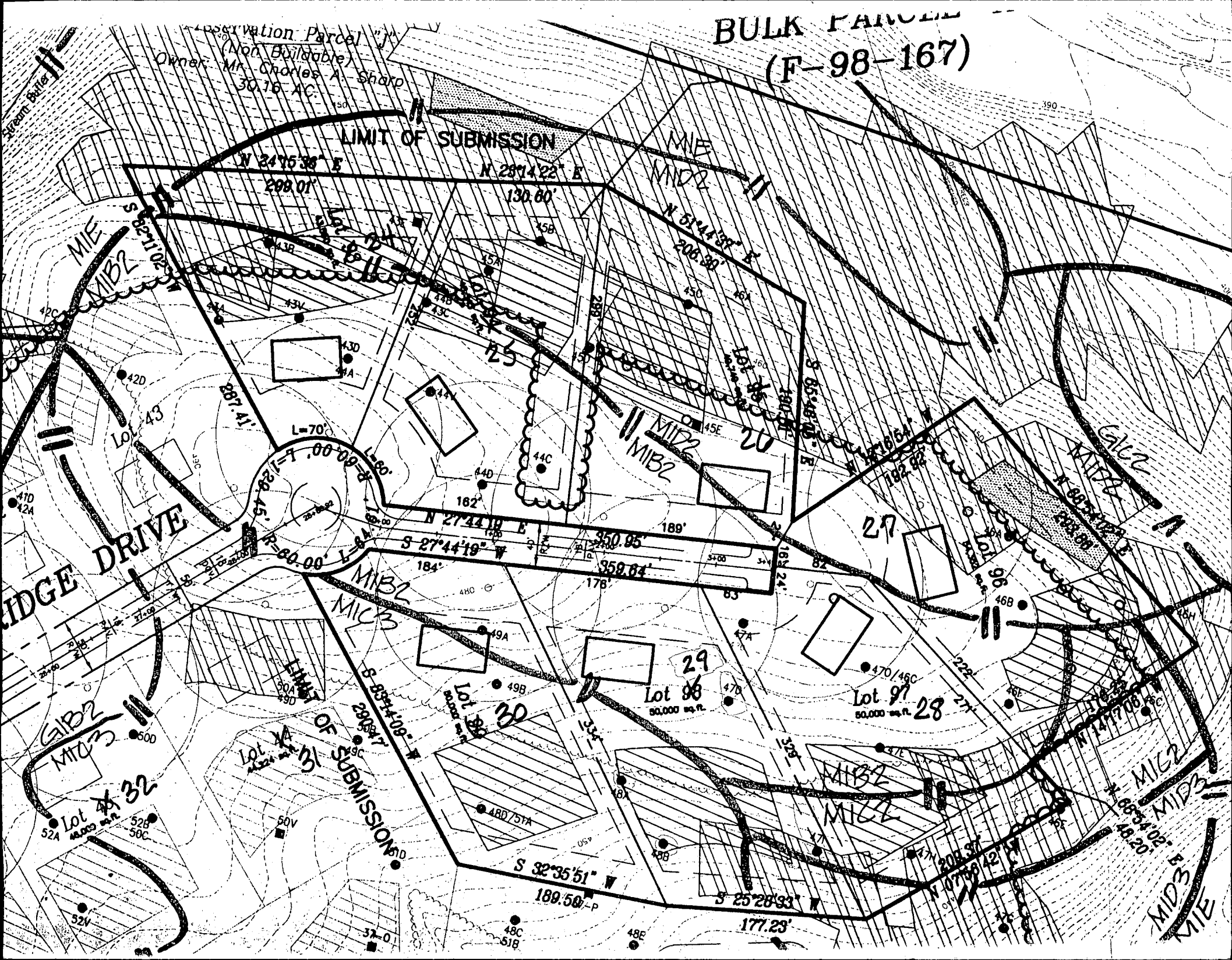
TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

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

X

BULK PARCEL (F-98-167)

Observation Parcel
(Non Buildable)
Owner: Mr. Charles A. Sharp
30.76 AC.



HIGH FOREST



PRABODH + PUNITA SHARMA
 15004 HIGH FOREST CT.
 DAYTON, MD. 21036
 CONIC POOL, 16' x 36', 550 CH,
 DEPTH 3'-6" TO 6', DECK 600 CH,
 FENCE: 157'

10/2/02
 proposed pool
 location on SRK

1