

03-337995

LAYOUT 5/22/02 12pm INSP 4 _____
INSP 2 5/23/02 F/41-2 INSP 5 _____
INSP 3 _____ INSP 6 _____

ISSUE DATE: 5/16/2002
APPROVAL DATE: 5/23/02

P 518978
A 56429-888

PERMIT INDEXED

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: Gaither Hunt II LOT NUMBER: 76

ADDRESS: 11030 Dorsch Farm Road PROPERTY OWNER: Ryan Homes

SEPTIC TANK CAPACITY (GALLONS): 1250 OUTLET BAFFLE FILTER REQUIRED

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

NUMBER OF BEDROOMS: 4

SQUARE FEET PER BEDROOM: 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 per the approved site plan. Run trenches on contour.
NOTES:	LAYOUT OF TRENCHES CRITICAL 3-80' Trenches 12' CTC (KN) 5/22/02

PLANS APPROVED: Steven R. Krieg OK SRK 4/11/02 DATE: 3/25/2002

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
BUILDING PERMIT SIGNED AND RETURNED
ALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM
7-5-05 B 00154831-DECK

156429-888

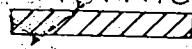
... CO. YRS.
 IS DISTURBED BY GRADING
 MUST BE REPAIRED ON THE
 BE PROVIDED, IF DEEMED
 EDIMENT CONTROL INSPECTOR
 EXCESS OF 2 ACRES.
 SHALL BE REQUESTED UPON
 ETER EROSION AND SEDIMENT
 IN ANY OTHER EARTH
 DING OR GRADING INSPECTION
 UNTIL THIS INITIAL APPROVAL

Where the topsoil is either highly acidic or composed of heavy clays, ground limestone shall be spread at the rate of 4-8 tons/acre (200-400 pounds/1,000 Sq. Ft.) prior to the placement of topsoil. Lime shall be distributed uniformly over designated areas and worked into the soil in conjunction with tillage operations as described in the following procedures.

For sites having disturbed areas under 5 acres:
 Place topsoil (if required) and apply soil amendments as specified in 20.0 vegetative stabilization.
 Section 1 - Vegetative Stabilization Methods and Materials

Approved Septic System Plan

Howard County Health Department

NOTE: LOT 77, HATCHED AREAS SHOWN:  ARE NEW SAND MOUND LOCATIONS FOR A BEDROOM HOUSE

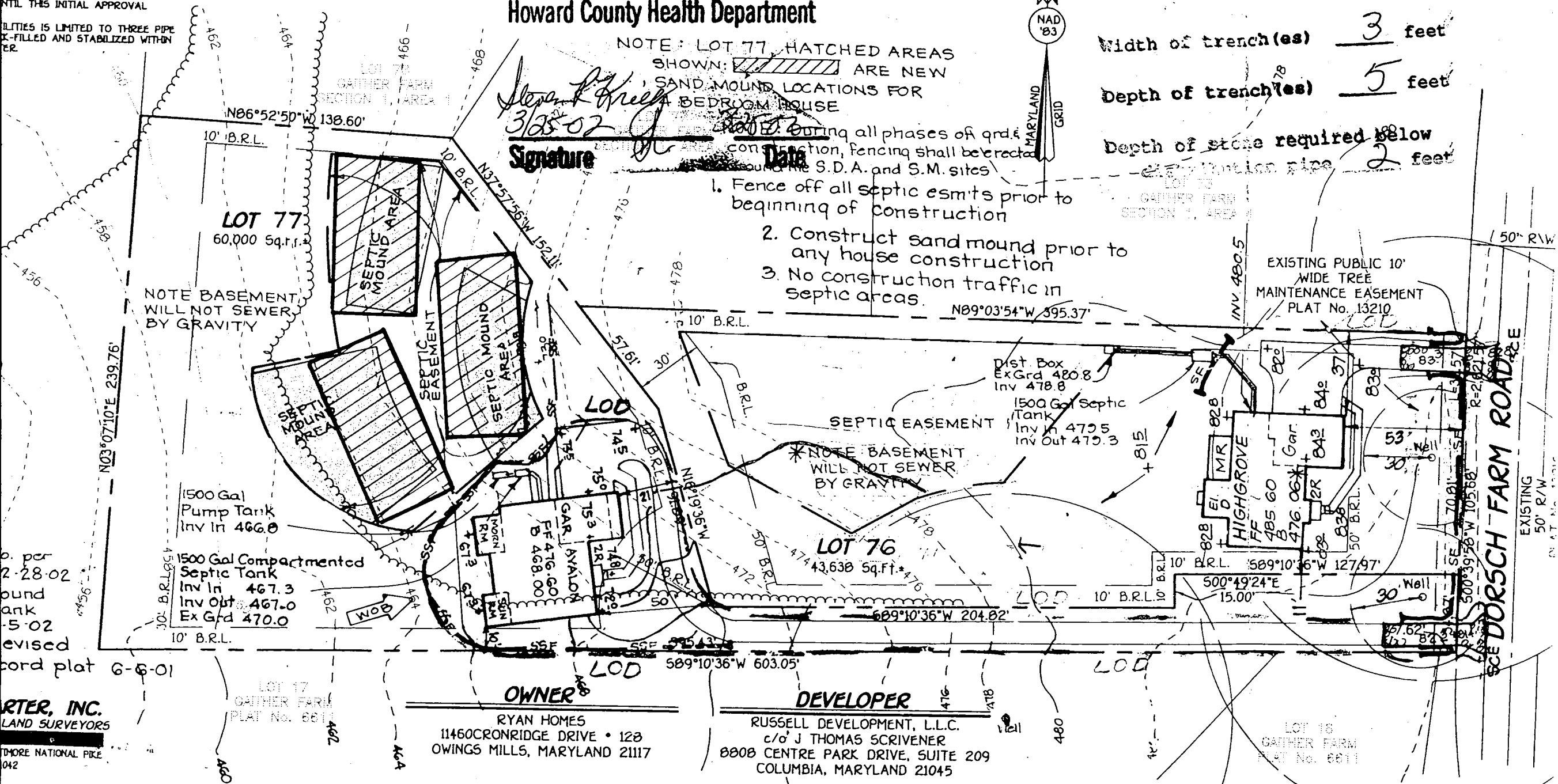
Steve P. Kreeg
 3/25/02
 Signature

- Date
1. Fence off all septic esmt's prior to beginning of construction
 2. Construct sand mound prior to any house construction
 3. No construction traffic in septic areas.



Total linear feet of trench required 240 feet
 Width of trench(es) 3 feet
 Depth of trench(es) 5 feet
 Depth of stone required below distribution pipe 2 feet

ILITIES IS LIMITED TO THREE PIPE
 K-FILLED AND STABILIZED WITHIN
 ER.



NOTE BASEMENT WILL NOT SEWER BY GRAVITY

*NOTE BASEMENT WILL NOT SEWER BY GRAVITY

EXISTING PUBLIC 10' WIDE TREE MAINTENANCE EASEMENT PLAT No. 13210

o. per
 2-28-02
 pound
 ank
 5-02
 revised
 cord plat 6-6-01

ARTER, INC.
 LAND SURVEYORS
 MORE NATIONAL PIKE
 042

OWNER
 RYAN HOMES
 11460 CRONRIDGE DRIVE • 128
 OWINGS MILLS, MARYLAND 21117

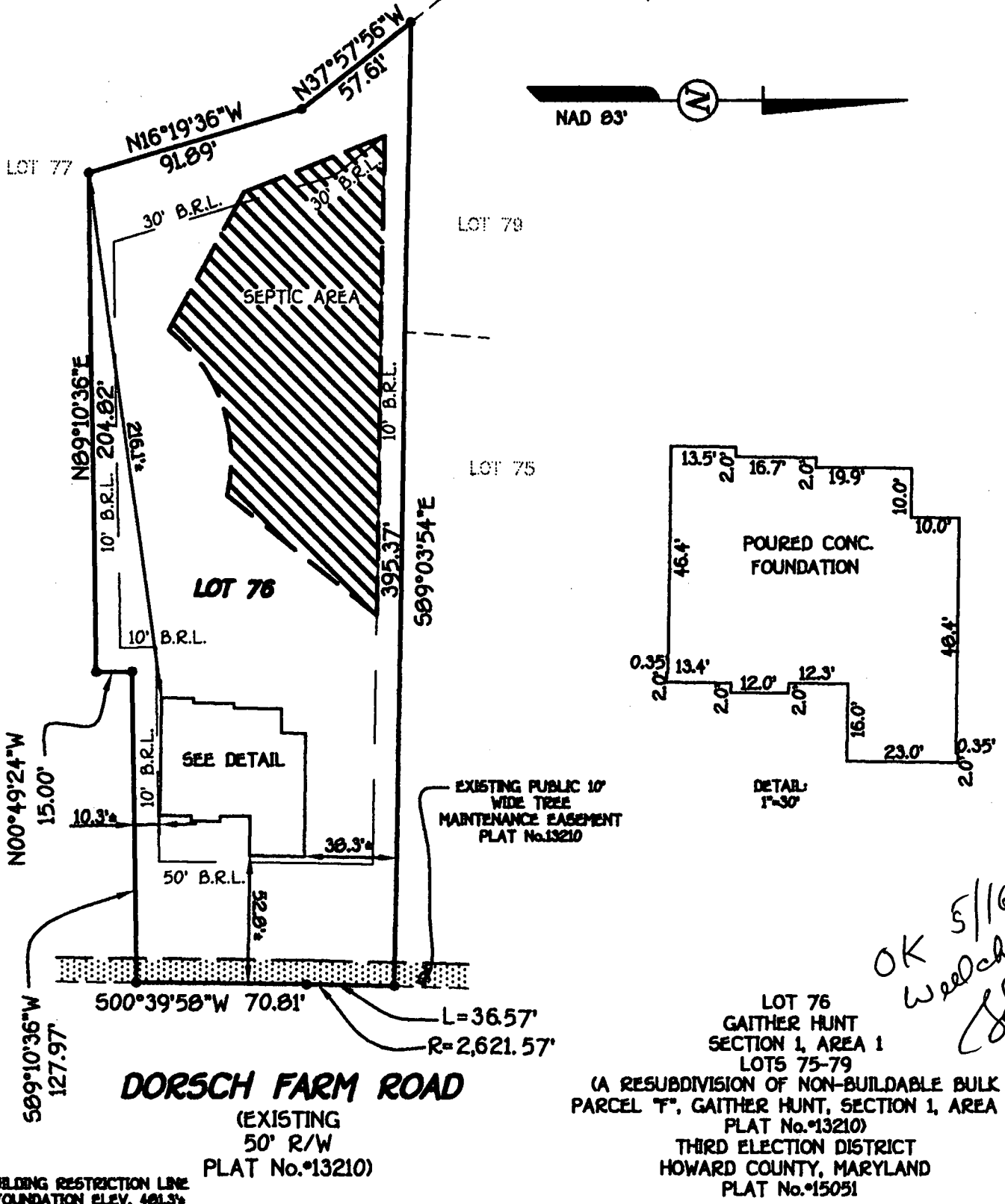
DEVELOPER
 RUSSELL DEVELOPMENT, L.L.C.
 c/o J THOMAS SCRIVENER
 8808 CENTRE PARK DRIVE, SUITE 209
 COLUMBIA, MARYLAND 21045

LOT 16
 GAITHER FARM
 PLAT No. 6611

DORSCH FARM ROAD

GENERAL NOTES:

- 1) THIS LOCATION DRAWING 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 COMPLETED TRANSFER, FINANCING OR REFINANCING OF THE PROPERTY SHOWN HEREON. UNLESS INDICATED AS BEING A BOUNDARY SURVEY, THIS LOCATION DRAWING 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 LOCATION DRAWING DOES NOT PROVIDE FOR ACCURATE IDENTIFICATION OF PROPERTY LINES, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING FOR 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. 2400440027 B EFFECTIVE DEC. 4, 1986.
- 3) THE OFFSETS FROM BUILDING LINE TO PROPERTY LINE AS SHOWN ON THE PLAT HEREON ARE TO AN ACCURACY OF PLUS OR MINUS 0.2' (±)
- 4) NO TITLE REPORT FURNISHED. SUBJECT TO ALL EASEMENTS, RIGHTS OF WAY AND CONDITIONS OF RECORD.



B.R.L. = BUILDING RESTRICTION LINE
TOP OF FOUNDATION ELEV. 481.3'

FISHER, COLLINS & CARTER, INC.
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS
CENTENNIAL SQUARE OFFICE PARK - 12272 BALTIMORE NATIONAL PIKE
ELLCOTT CITY, MARYLAND 21042
(410) 461 - 2855

FCC •



Mark L. Robel 4/08/02
PROFESSIONAL LAND SURVEYOR DATE
REG. • 339

HOUSE LOCATION DRAWING

FOUNDATION LOCATION: 4/08/02
FINAL LOCATION: _____
BOUNDARY SURVEY: _____

SCALE: 1"=60'
DATE: 4/10/02
DRAWN BY: D.B.
CHECKED BY: M.L.R.
PROJECT No.: 61206

FROM : HCCO-ENVIRO

FAX NO. : 4103132548

MAY 23 2002 06:13PM P1

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

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

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

Company Name: Lehsac Corp Telephone #: 410-242-6888
Address: POB 10
DAYTON, MD 21036

(Must circle one) Licensed Plumber: () Licensed Well Driller: () Licensed Well Pump Installer: ()

License # and name of individual responsible for the field installation:

Name (Print): ED KAMPES License #: 3344

*A licensed individual must perform the actual installation. Apprentices must be under the supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification. Unlicensed individuals may be reported to the appropriate licensing agency.

Name of Property Owner: RYAN HOMB Telephone #: _____
Subdivision: GATHER HUNT Lot #: 76 Well Tag #: HO-94-3033
Site Address: 11030 DORSH FARM RD

Submersible Pump Data

Make: JACUZZI
Model #: PSF479D-52
Pump Capacity: 8 GPM
Well Yield: 7 GPM

Pitless Adapter

Make: WILKENS
Model #: _____
Depth: 42" (36" min)
NSF/WSC approved: X

Well Cap and Electric Conduit

Two piece watertight cap: X
Screened, vented well cap: X
Cap secured to casing: X
Conduit min 1/2" B.G.: X
Conduit secured to well cap: X

Depth of well encountered at time of pump installation: 120 (feet)

If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section: 17.8.4

Torque arrestors, Cable guards, or other acceptable method used - Must circle one

Safety rope, if used, attached to brass rope adapter or other acceptable method inside of well casing

Piping to house

Type: POLY E
PSI: 200 (160 psi min) if
Depth of supply line: 42 (36" min)

House Connection

PVC sleeve to undisturbed soil at wall penetration: X
Approximate length of sleeve: 42
Sleeve caulked and sealed properly: X

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

Signature of company representative responsible for installation: [Signature]

date: 5/24/02

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

Date Insp. Requested: 5/24/02 Date Insp. Approved: 5/24/02 Inspector: KM
Inspection Data: Pitless adapter watertight & water supply line at least 36" below grade /
Two piece cap installed and attached to casing securely /
Elec. conduit extends at least 18" below grade/attached to cap properly /
Safety rope not seen outside of well cap/casing /
Correct well tag attached properly and casing 8" above finished grade /
Water supply line sleeved adequately at house connection /
Adequate grout observed below pitless adapter /

C1 0868

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE TYPE

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

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

COUNTY NUMBER 13 8/20/06 OK

DATE RECEIVED MM 07 DD 06 YR 01

DATE WELL COMPLETED MM 07 DD 06 YR 01

DEPTH OF WELL 22 120 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HD-94-3033

OWNER Mid Atlantic Dev Group STREET OR RFD HUNTERS VIEW RD TOWN CLARKSVILLE SUBDIVISION Greater Hunt II SECTION LOT 2476

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 (CM), BENTONITE CLAY (BC), NO. OF BAGS 20, NO. OF POUNDS 2000, GALLONS OF WATER 120, DEPTH OF GROUT SEAL 30'

CASING RECORD: MAIN CASING TYPE (ST), Nominal diameter top (main) casing 6, Total depth of main casing 50'

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

SCREEN RECORD: screen type or open hole (HO), insert appropriate code below

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED (Y) (N)

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

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. 1 M SD 112, DRILLERS SIGNATURE

LIC. NO. 1 M D

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

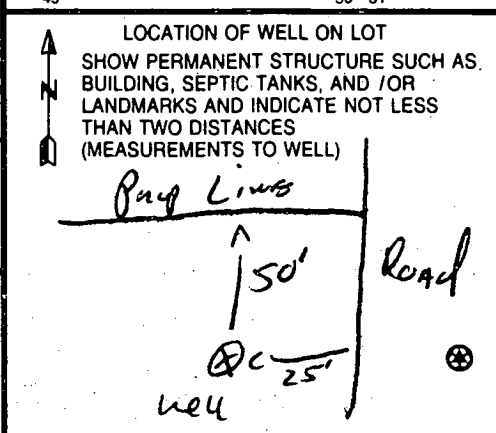
DEPTH (nearest ft.) HO 88 120, SLOT SIZE 1 2 3, DIAMETER OF SCREEN (NEAREST INCH) 56 60

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

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

PUMPING TEST: HOURS PUMPED 3, PUMPING RATE 10, METHOD USED TO MEASURE PUMPING RATE Bucket, WATER LEVEL 29 ft. BEFORE PUMPING, 60 ft. WHEN PUMPING, TYPE OF PUMP USED (for test) S submersible

PUMP INSTALLED: DRILLER INSTALLED PUMP (YES) (NO), 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)



FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 94-3033
 Location of property (road) Hunters View Rd
 Subdivision Grather Hunt II Lot 74 Block _____ Plat _____ Sec. _____
 Well Driller Ralph Mayne Owner Mid Atlantic Development

Depth of well 100 ft
 Distance of measuring point (M.P.) above ground 2 ft
 Static water level (S.W.L.) below M.P. 29 ft

I. High rate pumping -- reservoir drawdown

Time pump started 8:30 Pumping rate 10 GPM
 Total time 15 min to reach pumping water level _____ ft. below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes

TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE time to fill I gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
8:30	29 ft	6 Sec	Flow Meter Reading (if used)	10 GPM
8:45	60 ft	6 Sec		10 GPM
9:00	60 ft	6 Sec		10 GPM
9:15	60 ft	6 Sec		10 GPM
9:30	60 ft	6 "		10 "
9:45	60 ft	6 "		10 "
10:00	60 ft	6 "		10 "
10:15	60 ft	6 Sec		10 GPM
10:30	60 ft	6 Sec		10 GPM
10:45	60 ft	6 Sec		10 GPM
11:00	60 ft	6 "		10 "
11:15	60 ft	6 "		10 "
11:30	60 ft	6 Sec		10 GPM
11:45	60 ft	6 Sec		10 GPM

HD-224 90ft casing
 30ft open 20BAYS

B 1 0931

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

STATE PERMIT NUMBER

HD - 94 - 3033

W51496 please print or type

fill in this form completely

Date Received (APA)

3/9/01

OWNER INFORMATION

Mid Atlantic Developers

8808 Centre Park Dr

Columbia MD 21045

LOCATION OF WELL

Howard

GATHER Hunt.

SECTION 2 LOT 74

Clarksville

MILES FROM TOWN (enter 0 if in town) 2

DRILLER INFORMATION

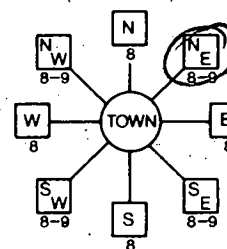
Ralph E. MAYNE M SD 117

Ralph E. MAYNE well drilling

17024 Handy Rd Wt Aring MD

Ralph E. Mayne 2-28-01

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Donsch Farm Ct

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

25

DISTANCE FROM ROAD

TAX MAP: BLK: PARCEL

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN) 5

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- Domestic Potable Supply & Residential Irrigation (circled)
Farming (Livestock Watering & Agricultural Irrigation)
Industrial, Commercial, Dewatering
Public Water Supply Well
Test, Observation, Monitoring
Geo-Thermal

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard Co 13

COUNTY NAME COUNTY NO.

DATE ISSUED 3/9/01

CO SIGNATURE EAST GRID 830 000

EXP. DATE 3/9/02

APPROXIMATE DEPTH OF WELL 150 FEET

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)
Cable
Reverse-Rotary
Drive-Point

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

- This well will not replace an existing well (circled)
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 deepen an existing well

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

- 1. well
2.
3.

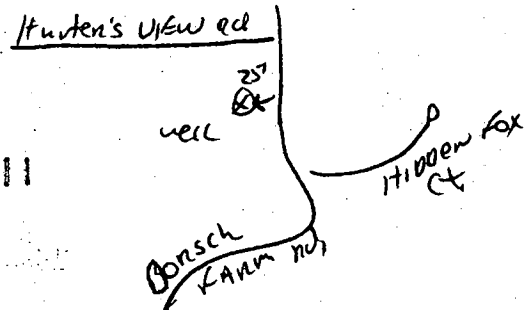
WRITE THE BOX NUMBER FROM THE MAP HERE

830

510

7/6/01 gravel 10:00
7/6/01 Missed Grout
BB

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

PERMIT No. HD-94-3033

SPECIAL CONDITIONS

NOTICE: APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

APPLICATION

PERCOLATION TESTING

A 56429

P _____

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

DISTRICT _____

DATE 4/4/96

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 J Thomas Scrivener

ADDRESS c/o Land Design & Development PHONE 410 740 5176

AGENT OR PROSPECTIVE BUYER Donald R. Reuver Jr

ADDRESS 10805 Hickory Ridge Rd PHONE _____
21044

PROPERTY LOCATION:

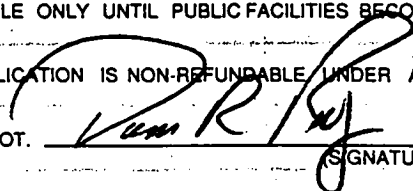
SUBDIVISION _____ LOT NO. 82

ROAD AND DESCRIPTION _____

TAX MAP 29 PARCEL # 21

SIZE OF LOT 1 + Acres TYPE BLDG. _____
(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 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

56429

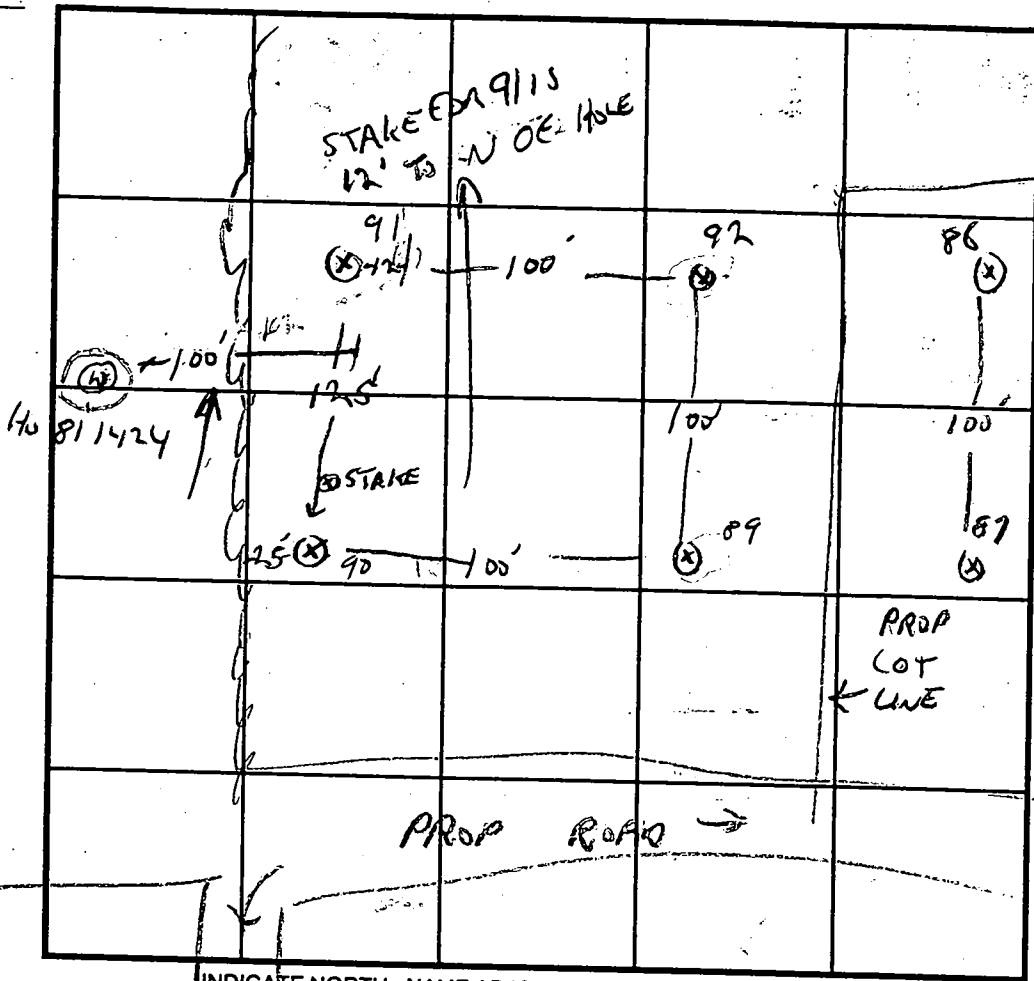
COUNTY #

SOIL PROFILE

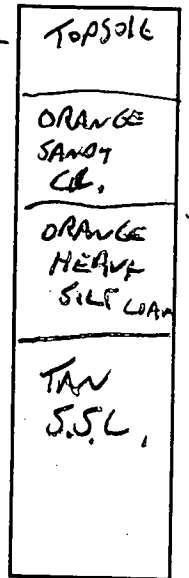
0'

0'

0'



SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/4/96	90	5'6" / 12"	2:20	2:23	2:23	2:29	5 MIN
	89	5' / 12"	2:31	2:35	2:35	2:40	5 MIN
	91	5'6" / 11"	2:41	2:45	2:45	2:50	5 MIN
	92	5' / 12"	2:56	2:57	2:59	3:01	2 MIN

REMARKS OPEN SPACE / LOT 82 DUG PER PLAT STAKED AS 92

TYPE OF SOIL

TESTED BY G. SAUACE

ALSO PRESENT M/CE

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 5 MIN

TRENCH WIDTH 3

INLET DEPTH 3.6

MAXIMUM BOTTOM DEPTH 5'6"

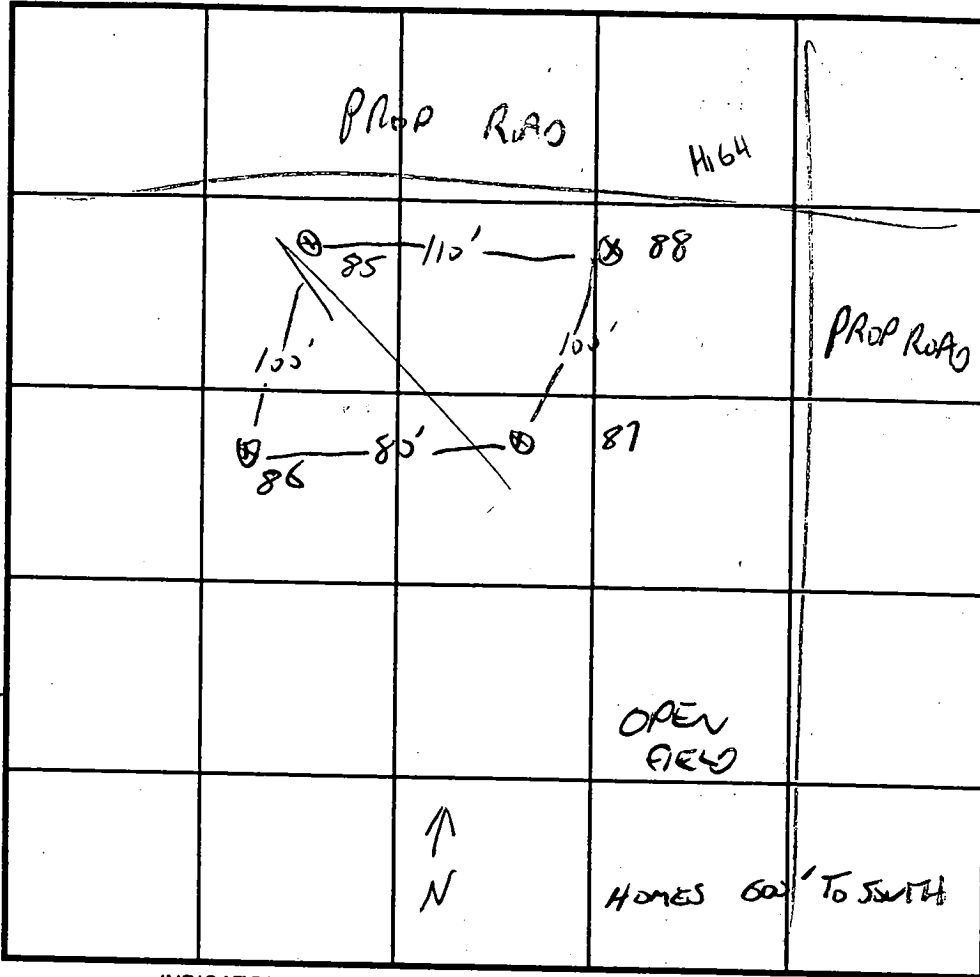
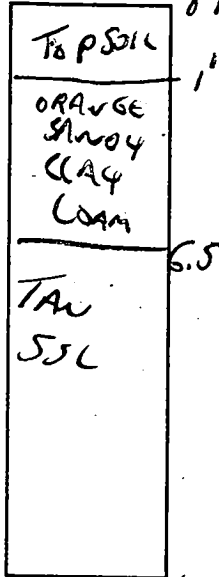
SQ. FT./BEDROOM 180

56429

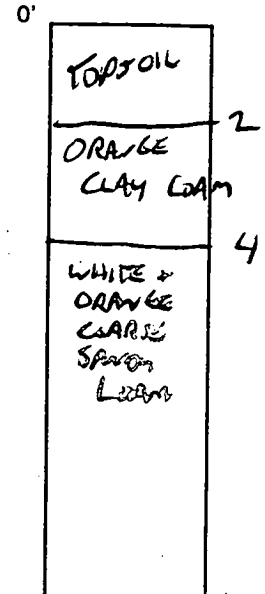
COUNTY # 85

SOIL PROFILE 86

0' 87



SOIL PROFILE 88



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4-3-96	88	5'	10:08	10:10	10:10	10:16	6MIN
	87	4'6"	10:13	10:14	10:14	10:17	3MIN
	86	5'6"	10:21	10:22	10:22	10:23:30	1.5MIN
	85	5' <small>ok to 13</small>	10:25	10:28	10:28	10:33	5MIN

REMARKS LOT 92 DUG PER PLAT

TYPE OF SOIL _____

TESTED BY G. SAVAGE ALSO PRESENT Don RIVER, MIKE+MIKE

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 5MIN TRENCH WIDTH 3"

INLET DEPTH 4' MAXIMUM BOTTOM DEPTH 6' SQ. FT/BEDROOM 180

APPLICATION

PERCOLATION TESTING

A 56429

P _____

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

DISTRICT _____

DATE 4/3/96

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 J Thomas Scrivener

ADDRESS c/o Land Design & Development PHONE 410 740 5176

AGENT OR PROSPECTIVE BUYER Donald R. Renner Jr

ADDRESS 10805 Hickory Ridge Rd PHONE _____
21044

PROPERTY LOCATION:

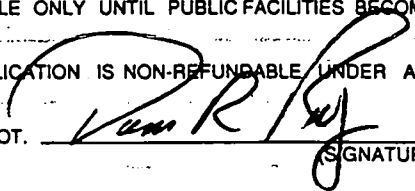
SUBDIVISION _____ LOT NO. 91 92

ROAD AND DESCRIPTION _____

TAX MAP 29 PARCEL # 21

SIZE OF LOT 1 + Acres TYPE BLDG. _____
(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 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
2194

heavy
or brn
clm

40%
feldspar

orange
brown
salm

or brn
clm
some
mottling

feldspar

2195 B

or brn
sclm

g
sclm
clm
salm

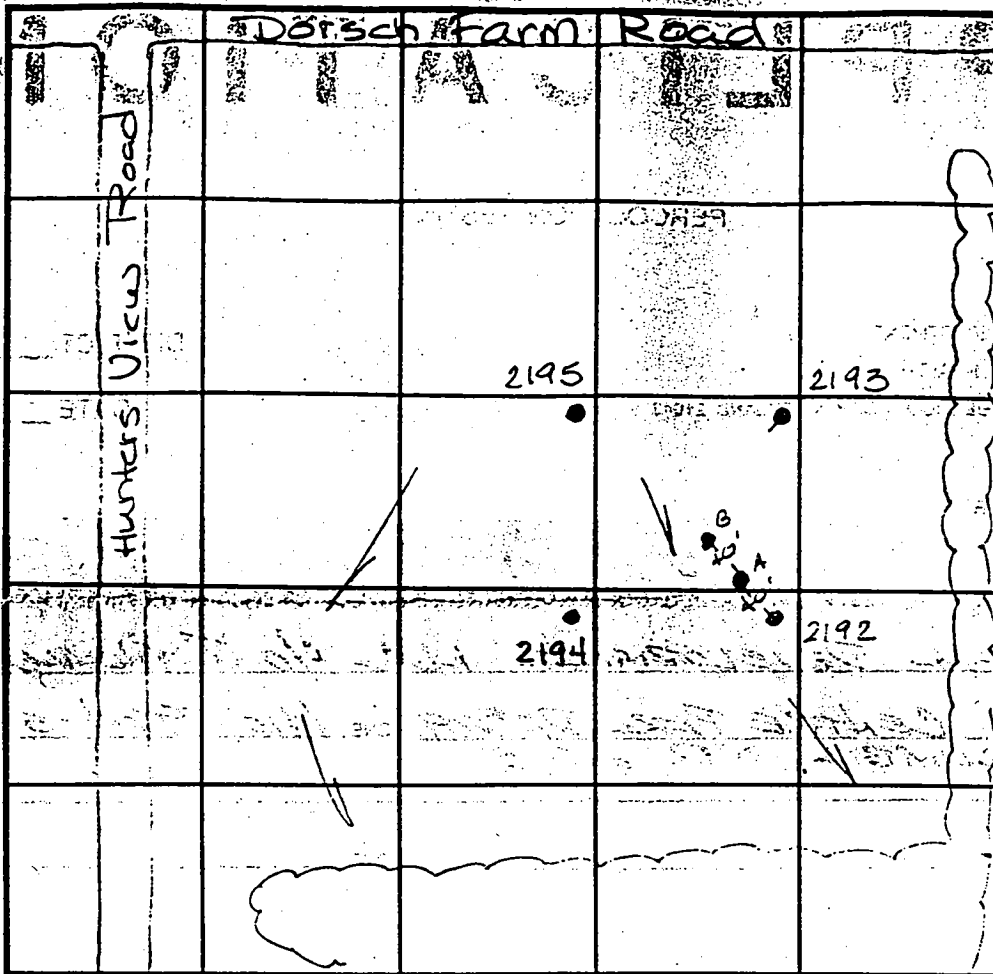
2192

heavy
or brn
clm

14-18
or
salm

70%
feldspar

feldspar



SOIL PROFILE

A

orange
brown
sclm

5.0

orange
brown
salm

3.5

60%
rock

9.5

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8-23-99	2194	Visual	to 12.0	- see profile	to 12.0	- see profile	HOLD NET
	2193	5.0 / 12.0	12.31	12.34	12.34	12.40	6min
	2195	4.0 / 12.0	11.18	11.35	11.35	11.35	slow
		5.0 / 12.0	11.37	11.39	11.39	11.44	5min
	A	3.5 / 9.5	11.55	11.57	11.57	no perc @ 12:30	slow
		See profile - bedrock & deep clay					F
	2192	See profile - bedrock					F
	B	Visual	to 12.0 - see profile				OK

REMARKS: Hand 2195 for wet test

TYPE OF SOIL _____

TESTED BY Fred Morrison ALSO PRESENT Mike Johnson

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

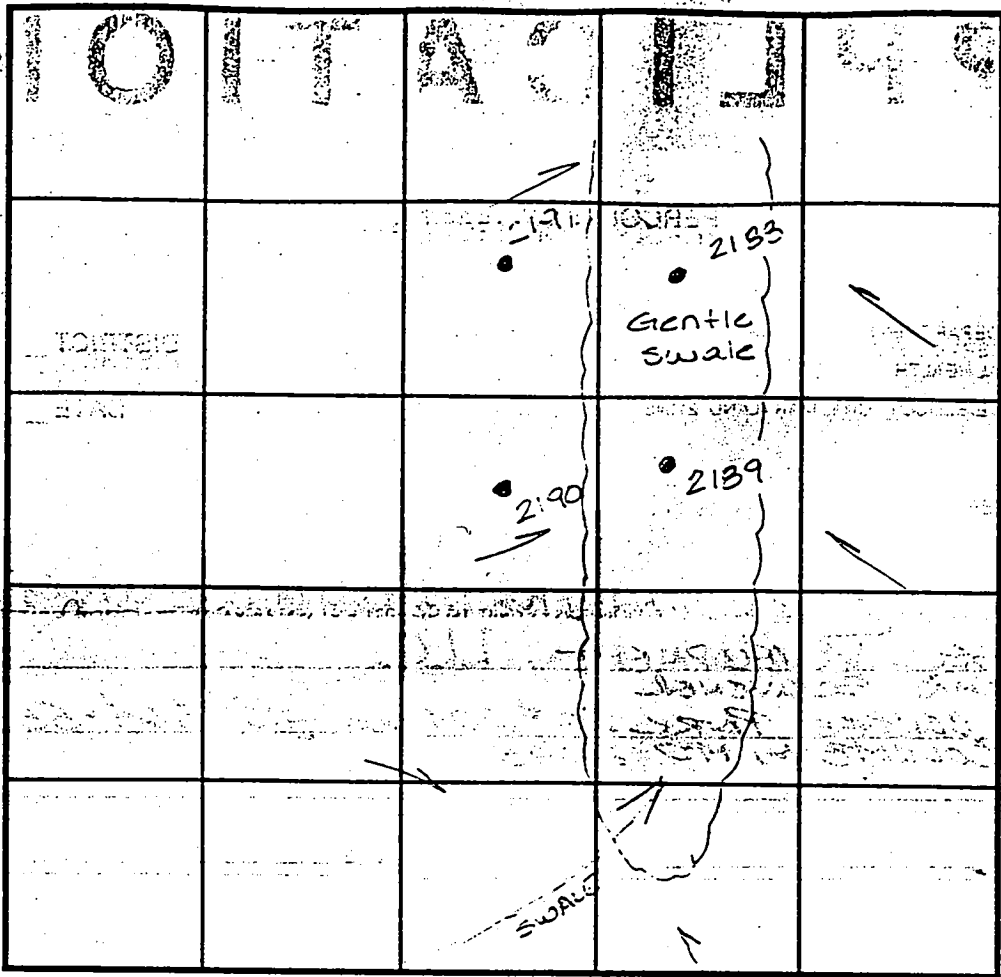
INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____

SOIL PROFILE
2188

mottled
orange
&
gray
clm
very
hard
dark
red &
black
salm
gray
mottled
water
12.0

2190
dark
red
clm
dark red
salm
w/pebbles
gray
clm
very
damp
light
gray
mottled

SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8-23-99	2188	See profile - insufficient depth to water table					F
	2189	Dug to 5.0 m. 2.0' - insufficient depth to H ₂ O					F
	2191	Refusal @ 5.0' to bedrock					F
	2190	See profile - insufficient depth to H ₂ O					F

REMARKS 2188 & 2190 no water

TYPE OF SOIL _____

TESTED BY Amy McMiller ALSO PRESENT Mike Johnson

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

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

LOT 76
57,814 SQ.FT.*

LOT 77
41,259 SQ.FT.*

SECTION 16
T4N R10E
S10W

DORSCH
FAK

EXISTING
50' R/W
PLAT No.
13359

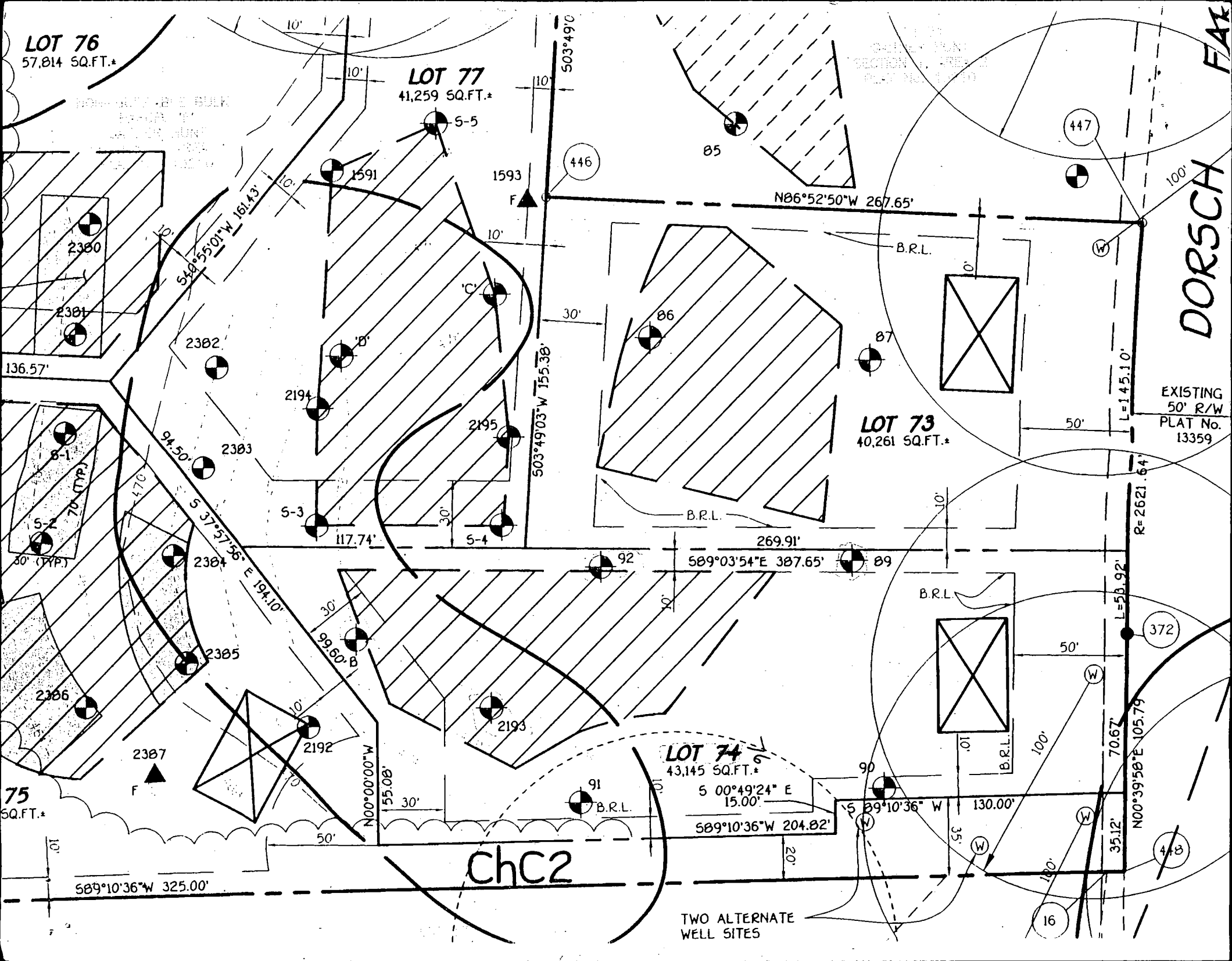
LOT 73
40,261 SQ.FT.*

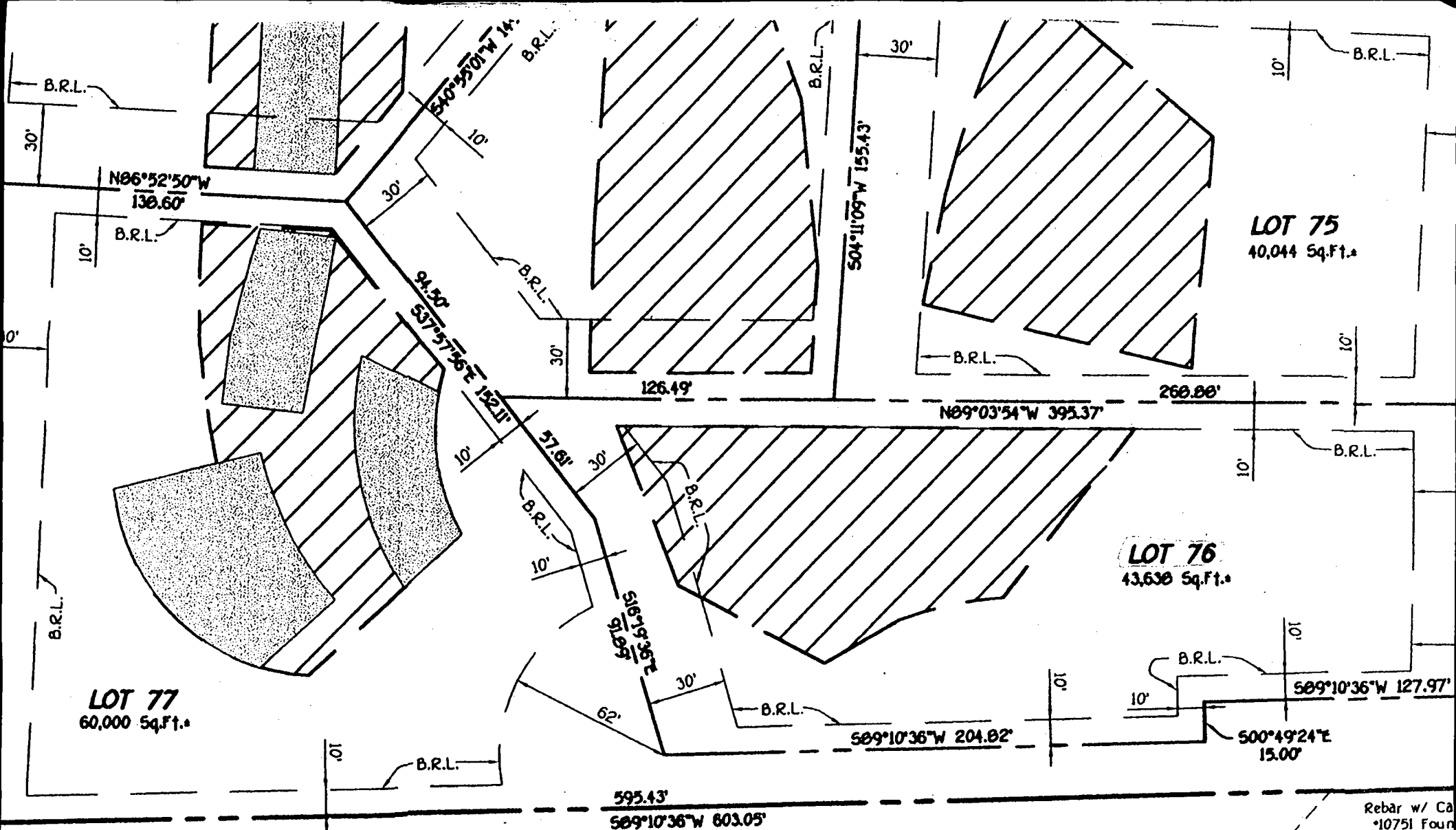
LOT 74
43,145 SQ.FT.*

75
SQ.FT.*

ChC2

TWO ALTERNATE
WELL SITES





OWNER

CARROLL LAND FAMILY CORPORATION
 c/o J THOMAS SCRIVENER
 8808 CENTRE PARK DRIVE, SUITE 209
 COLUMBIA, MARYLAND 21045

DEVELOPER

RUSSELL DEVELOPMENT, L.L.C.
 c/o J THOMAS SCRIVENER
 8808 CENTRE PARK DRIVE, SUITE 209
 COLUMBIA, MARYLAND 21045

OWNER'S CERTIFICATE

I, Camilla Carroll, President, Owner Owners Of The Property Shown And Described Hereon, do hereby certify that the above is a true and correct copy of the original of this subdivision. And in consideration of the approval of this plat by the Department of Planning and Public Works of the State of Maryland. All Easements of Rights-Of-Way Affecting The Property Are Shown On This Plat. Witness My Hand This 9th Day Of October, 2001.

SURVEYORS CERTIFICATE

I Hereby Certify That The Final Plat Shown Hereon Is Correct; That The Subdivision Of Part Of That Land Conveyed By Philip Carroll To Carroll Land Family Corporation By Deed Dated January 14, 1998 And Recorded In The Aforesaid Land Records In Liber 4208 At Folio 436, And That The Monuments Are In Place Or Will Be In Place Prior To Acceptance Of This Subdivision By Howard County, Maryland. As Shown On This Plat.

