

2/17/99
CO-1.00
2/19/99
2:30-3:00
2/22/99
P.M.

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

03-325970

P 511149

A 56429-G

DISTRICT 3rd

DATE 12-11-98

DATE SYSTEM APPROVED 2.22.99

INSPECTOR ICM

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXXXX~~ 410-313-2640

INDEXED

South Carroll Backhoe

IS PERMITTED TO INSTALL ALTER

ADDRESS 4410 Salem Bottom Road Westminster, MD 21157 PHONE (410) 875-4197

SUBDIVISION Gaither Hunt LOT 7 ROAD 11024 Dorsch Farm Road Fox Haven Way

PROPERTY OWNER NV Homes

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 3 feet below original grade. Bottom maximum depth 5 feet below original grade. Effective area begins at 5 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Place the distribution box 135 feet from the rear lot line and 10 feet off the left lot line as seen from Fox Haven Way. Run trenches on contour towards the right lot line as seen from Fox Haven Way.

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

OK ICM 8/28/98

PLANS APPROVED BY Glen Savage DATE 8/25/98

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

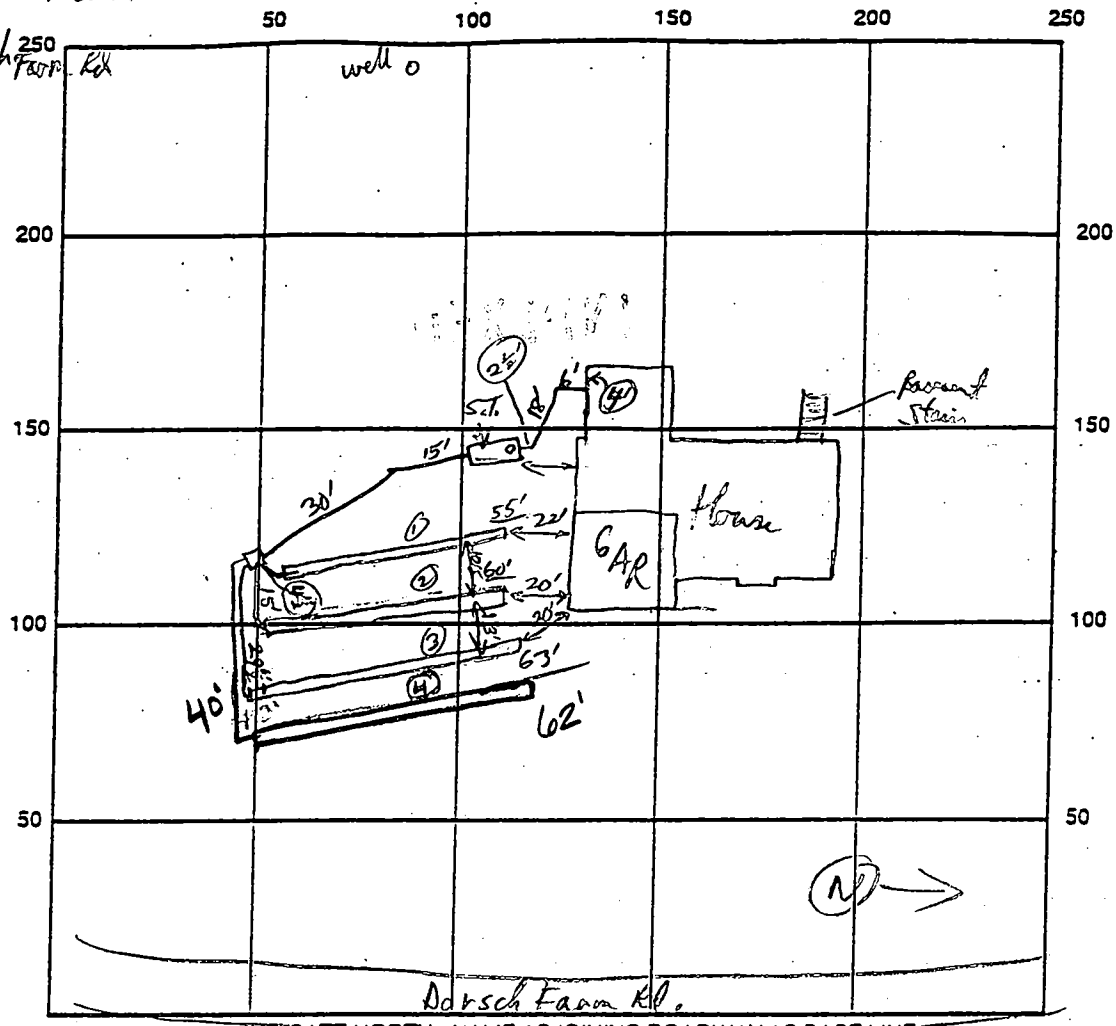
***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

V 516429-G

Gaither Hunt lot 7

NOT TO SCALE

11024 Dorsch Farm Rd. 250



SEPTIC TANK LEVEL 1500 gal Top Second CLEANOUTS S.T. ✓

DISTRIBUTION BOX LEVEL ✓

DRAIN FIELD/TILE DEPTH 5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH $\frac{4213}{55/60/63} / 4 = 62'$ → 240'

NUMBER OF TRENCHES 4 ONE SIDEWALL/BOTTOM AREA 720 SQ. FT.

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

ABSORBENT AREA — SQ. FT.

REMARKS: 1st 2 Trenches ok to cover, 3rd Trench ok to proceed full, ok to cover house concrete & catch tank 2/19/99

OK to cover 3rd Trench when finished. APR 2/19/99

2.22.99 ok to cover all work (KM)

DATE SYSTEM APPROVED 2/22/99 INSPECTOR Kim Minto

APPLICATION

PERCOLATION TESTING

56429G
A ~~57674~~
P _____

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

DISTRICT _____
DATE 1/3/97

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 Woodlot Enterprises N.V. Homes, Inc.

ADDRESS 10805 Hickory Ridge Rd Ste 205 Cal, MD 21047 PHONE 740-2100

AGENT OR PROSPECTIVE BUYER LDH

ADDRESS 10805 Hickory Ridge Rd Ste 205 Cal, MD 21047 PHONE 740-2100

PROPERTY LOCATION:

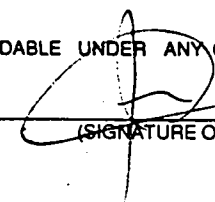
SUBDIVISION Foxfield LOT NO. 7 ✓

ROAD AND DESCRIPTION Manor Lane (11024 Fox Haven Way)

TAX MAP 29 PARCEL # 21
BLDG. PERMIT SIGNED AND RETURNED 8-25-98
Serial # B10113527

SIZE OF LOT Large TYPE BLDG. Single family - 4 Broom
(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

564296

COUNTY #

SOIL PROFILE

D

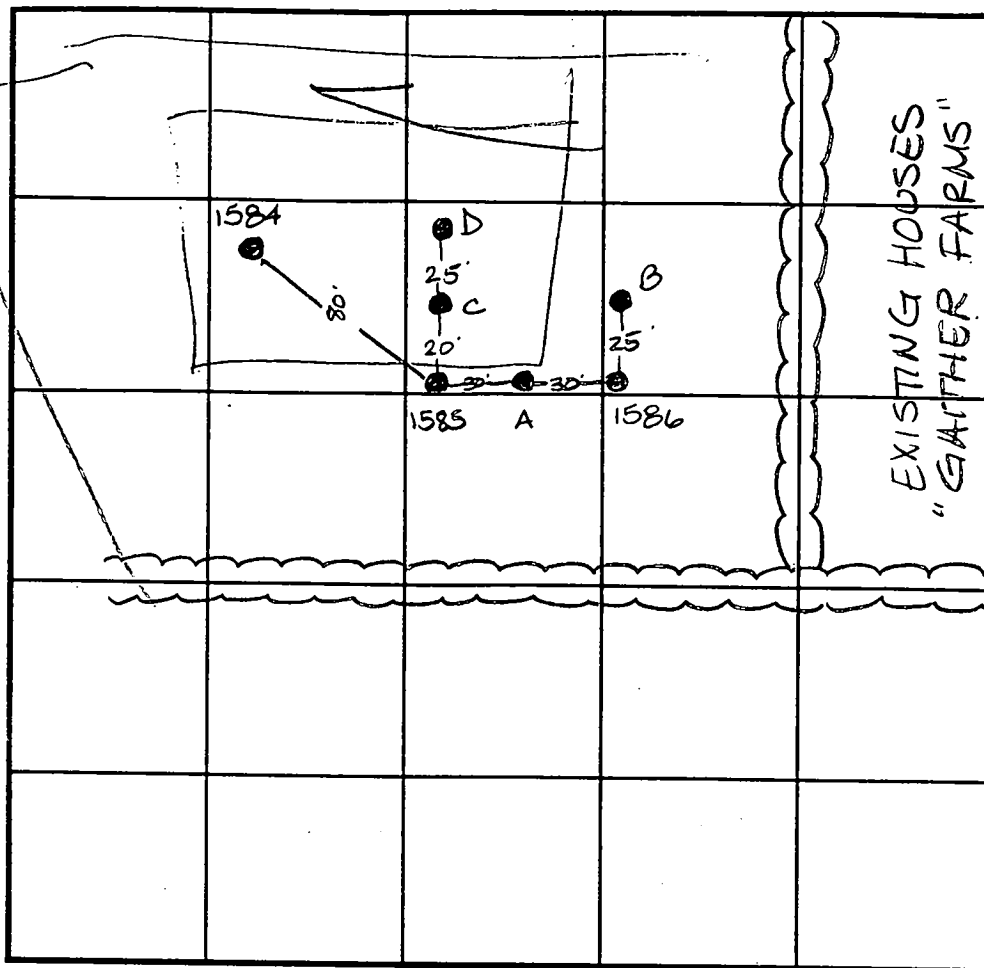
no distinct clay layer dark brown & red silty refusal @ 10.5

B

4.0 dark to orange silty
12.0 lgt orange tan silty gravelly pockets of 20% rock

1584

5.0 dark orange brown silty 20% large rock frags
11.0 lgt brn silty



SOIL PROFILE

0'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
3-26-97	1584	Visual to 11.0			SEE PROFILE		OK
	D	Visual to 10.5	- see profile -				OK
	B	Visual to 12.0	- see profile -				OK
	1586	Refusal at 3.0					F
	A	Refusal at 7.0	50% R _x @ 4.0'				F
	C	Refusal at 7.5	75% R _x @ 4.0'				F
	1585	Refusal @ 6.0'					F

REMARKS Test holes left open 4+ hours Lot 7

TYPE OF SOIL _____

TESTED BY Amy McMullen ALSO PRESENT Jared Spahn

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 1 TRENCH WIDTH 3.5

INLET DEPTH 3 MAXIMUM BOTTOM DEPTH 5 SQ. FT./BEDROOM 180

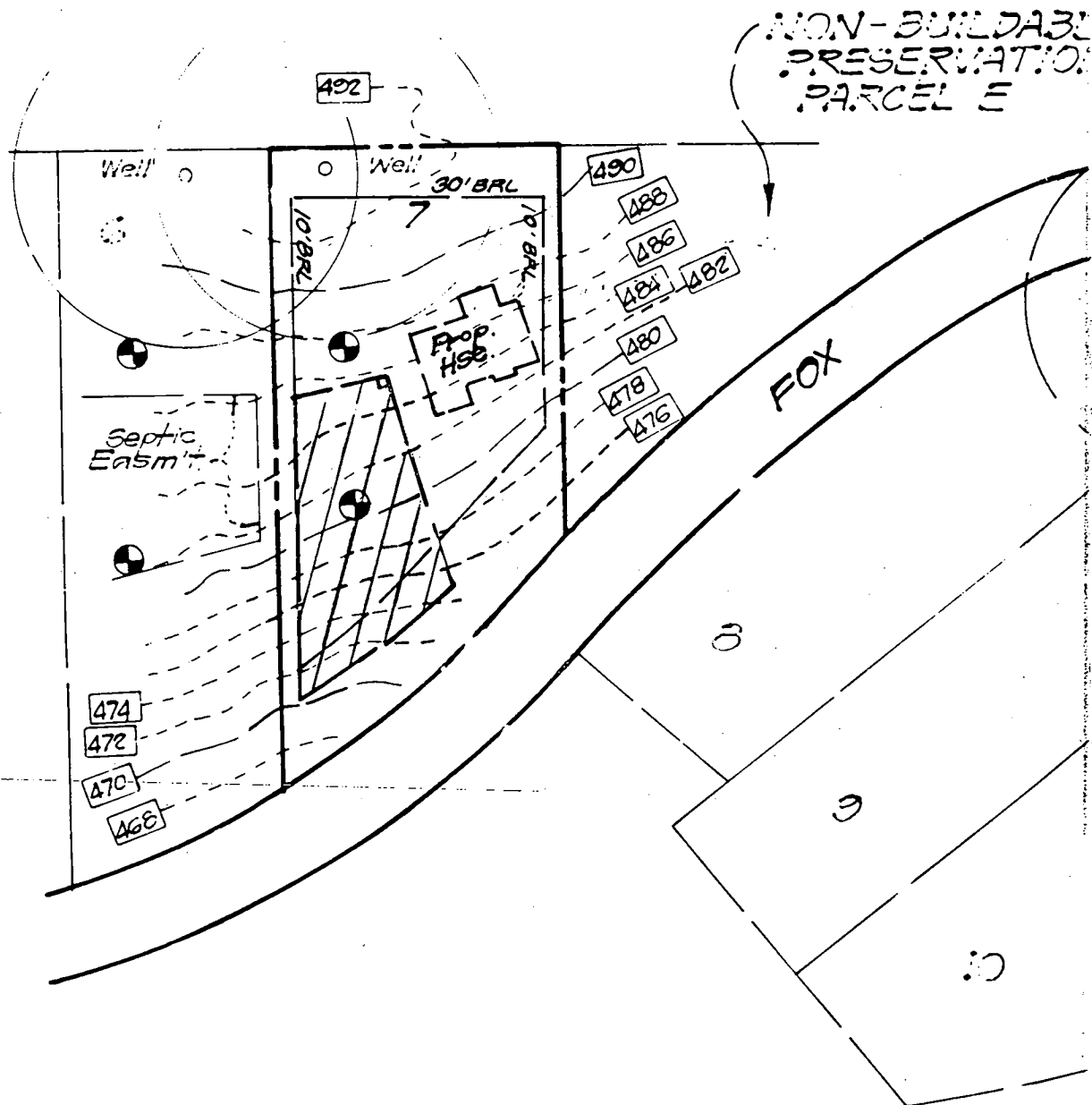
LEGEND

Contour Interval 2 Ft

Existing Contour 

Passed Percolation Test Pit 

PERLCERT AOTJ 7-13-98



PROPOSED PAVING

LINE

LOT 71
41,951 SF

LOT 20
40,533 SF

LOT 18
42,663 SF

LOT 19
40,019 SF

ROAD
PC=3+24.5715

LOT 10
48,910 SF

LOT 8
50,000 SF

LOT 9
42,271 SF

PRIVATE
(NON-BUILDABLE)
PRESERVATION
PARCEL 'E'
0.732 Ac.

10' PUBLIC TREE
MAINTENANCE
EASEMENT

Copy of Signed
final P.97-08

SEE NEW
PERC CERT

7-13-98

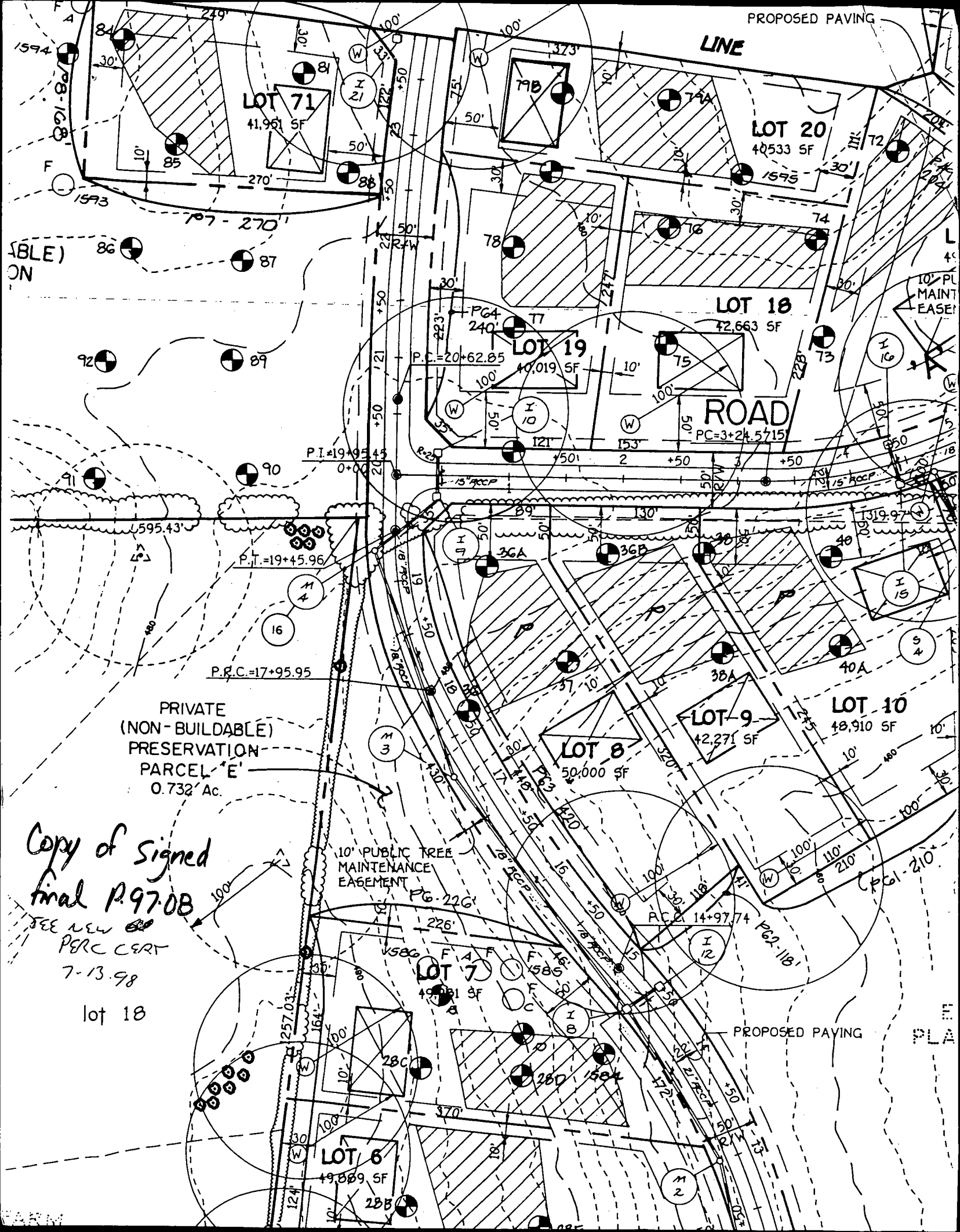
lot 18

LOT 6
49,559 SF

LOT 7
40,881 SF

PROPOSED PAVING

PLA





DEPARTMENT OF PLANNING & ZONING

Joseph W. Rutter, Jr., Director

October 26, 1998

NV Homes
2200 Defense Highway
Crofton, MD 21114

Dear Sir:

RE: Address Changes
11024 Fox Haven Way, Lot 7 and 11066 Fox Haven Way, Lot 64 to
Dorsch Farm Road, Building Permit #B00113527 and B00113530
Gaither Hunt, Section 1, Area 1

The purpose of this letter is to notify you regarding the correct street addresses for your properties in the Gaither Hunt subdivision as a result the street name change for Fox Haven Way to Dorsch Farm Road.

Incorrect Address	11024 Fox Haven Way
Correct Address	11024 Dorsch Farm Road, Lot 7 Tax Map 29, Grid 5

Incorrect Address	11066 Fox Haven Way
Correct Address	11066 Dorsch Farm Road, Lot 64 Tax Map 29, Grid 5

This address change is effective upon receipt of this letter.

If you have any questions please contact me or Brenda Lubber at 410-313-2354.

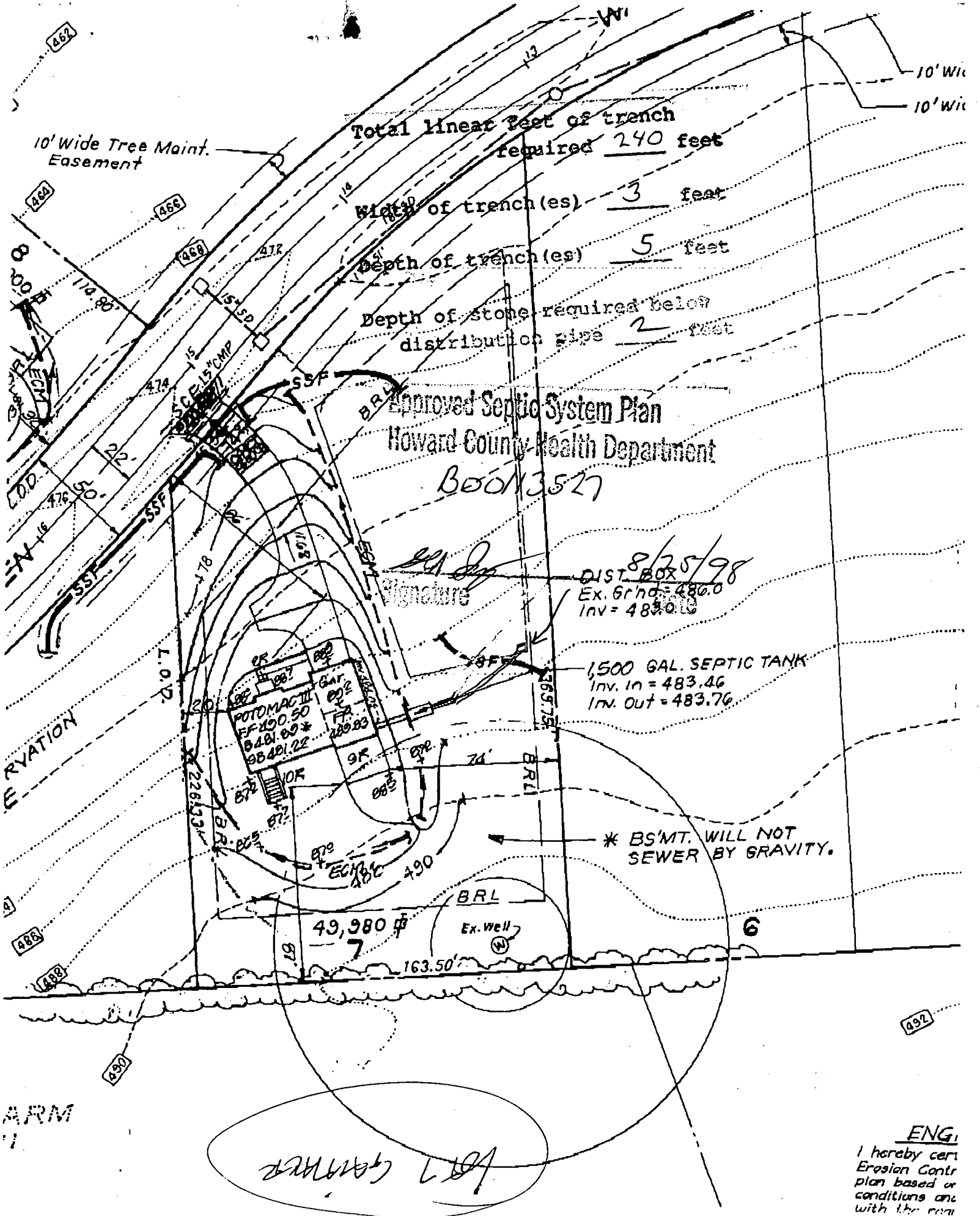
Sincerely,
J. Kent Sheubrooks
Kent Sheubrooks
Division of Land Development

KS:bsl

CERTIFIED MAIL / RECEIPT REQUESTED
C:\OFFICE\WPWIN\WPDOCS\NVHOMES.WPD

- cc: Department of Finance, Water Billing
- Department of Fire & Rescue Services
- Tax Assessment
- Bureau of Utilities
- Department of Inspections, Licenses and Permits
- Inspections Enforcement - Brenda Hill.
- Health Department
- Election Board
- DPZ - Graphics - Mike White
- DPZ - Research
- DPZ - Brenda Lubber
- DPZ - Development Engineering Div., Land Development
- Postmaster, Ellicott City
- Bell Atlantic Maryland
- Baltimore Gas & Electric

RECEIVED OCT 28 1998



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

Approved Septic System Plan
Howard County Health Department
BOON 3527

[Signature]
Signature

DIST. BOX 8/25/98
Ex. Grnd = 480.0
Inv = 483.0

1500 GAL. SEPTIC TANK
Inv. In = 483.46
Inv. Out = 483.76

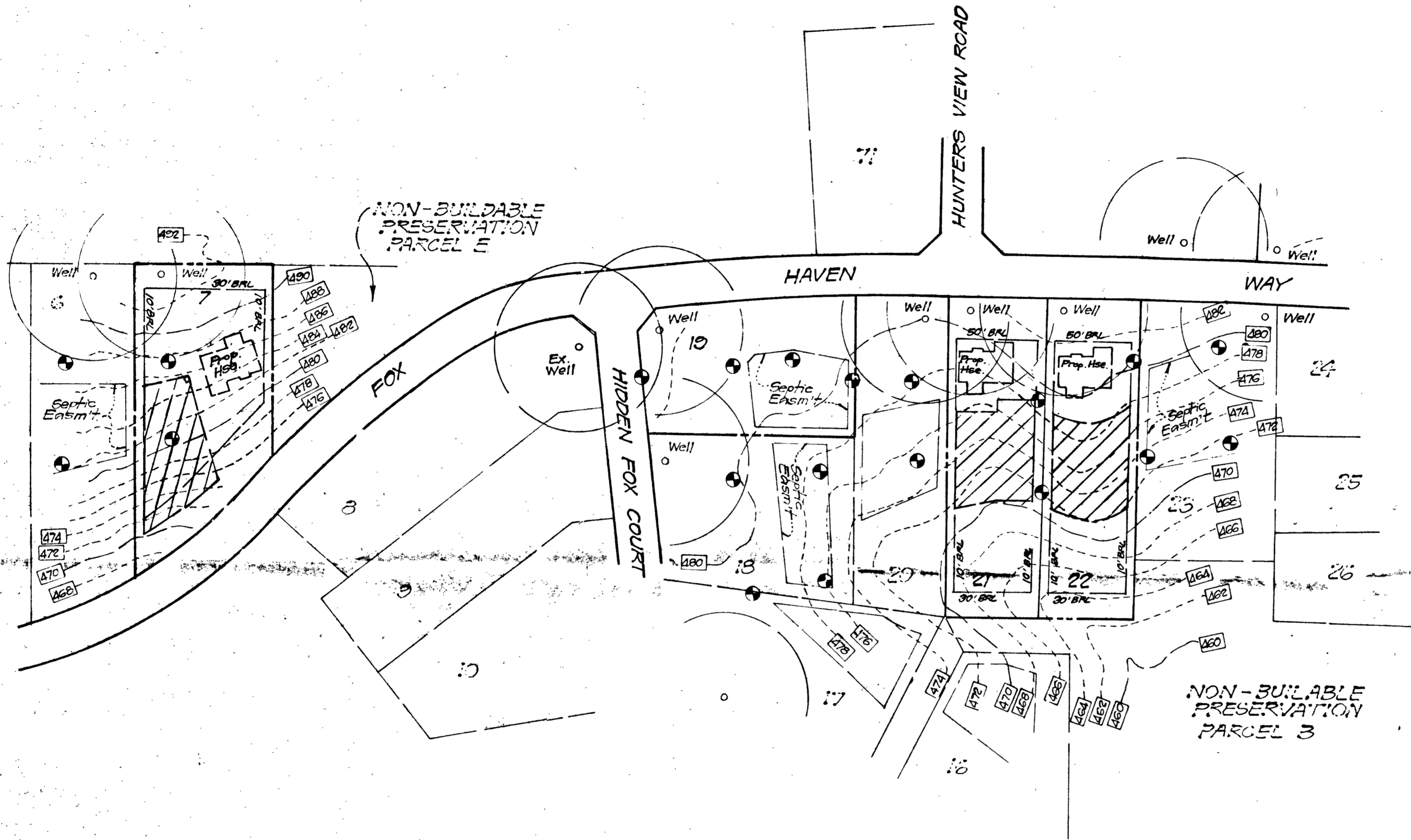
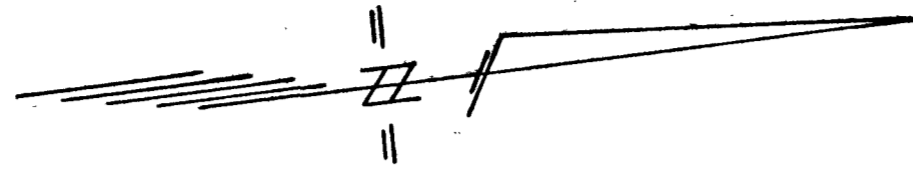
* BS'MT. WILL NOT SEWER BY GRAVITY.

[Handwritten signature]

ENG.
I hereby cert
Erosion Contr
plan based on
conditions and
with the con

LEGEND

- Contour Interval 2 Ft
- Existing Contour 472
- Passed Percolation Test Pit



GENERAL NOTES

1. Existing topography was taken from plans prepared by Fisher, Collins and Carter, Inc.
2. All existing and proposed, septic systems and wells within 100' feet of the adjoining property have been shown.
3. This area designates a private sewerage easement of 10,000 Sq. Ft. as required by The Md. State Dept. of the Environment for individual sewage disposal. Improvements of any nature in this area are restricted until public sewage is available. These easements shall become null and void upon connection to a public sewage system.
4. No grading shall be performed over any portion of a septic easement unless specifically approved by the Health Dept.
5. The purpose of this plat is to adjust the individual private easements for lots 7, 21 and 22 of Gaither Hunt, Section 1 Area 1.

APPROVED: For onsite private water and sewerage systems, Howard County Health Dept. Bureau of Environmental Health.

Joselyn Boyd 7-13-98
County Health Officer Date

RECEIVED
JUL 17 1998

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH

CLARK • FINEFROCK & SACKETT, INC. ENGINEERS • PLANNERS • SURVEYORS 7135 MINSTREL WAY • COLUMBIA, MD. 21045 • (410) 381-7500 - BALTO • (301) 621-8100 - WASH.		
DESIGNED	PERC CERTIFICATION PLAT LOTS 7, 21 and 22	SCALE
BAL	GAITHER HUNT	1" = 100'
DRAWN	SECTION 1 AREA 1	DRAWING
BAL	3RD ELECTION DISTRICT	1 OF 1
CHECKED	HOWARD COUNTY, MARYLAND	JOB NO.
J.M.E.		
DATE	For: N.V. HOMES 2200 Defense Highway #301 Crofton, Maryland 21114	FILE NO.
6-24-98		98-008x

B 1 **8737** 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
10-94-11431
fill in this form completely

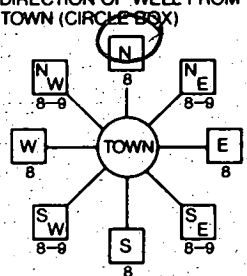
Date Received (APA) **020998**

OWNER INFORMATION
WOODLOT ENTERPRISES
15 Last Name 34 Owner First Name
5026 DORSEY HALL DR
36 Street or RFD 55
ELLICOTT CITY MD 21042
57 Town 70 State 72 Zip 76

B 3 LOCATION OF WELL

HOWARD COUNTY
GAITHER OVERLOOK SUBDIVISION
SECTION **44** LOT **7**
WILD LAKE NEAREST TOWN
MILES FROM TOWN (enter 0 if in town) **4** MI

DRILLER INFORMATION CIRCLE: MSD/MGD/MWD
Ralph Mayne
Driller Name **Ralph Mayne Well Drilling** License No. **9116**
Firm Name **9120 Brown Church Rd Mt Airy**
Address **Full Mayne Feb 4 1998**
Signature Date

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)


Dorsey Farm NEAR WHAT ROAD
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
34 **200** 37 DISTANCE FROM ROAD
ENTER FT OR MI **AA**

B 2 WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) **5**

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **500**

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)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard COUNTY NAME
156429-6 COUNTY NO.
STATE SIGNATURE **Kim Maisto** DATE ISSUED **2/18/99**
NORTH GRID **039000** EAST GRID **0520000**

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

other _____

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER
1. well

WRITE THE BOX NUMBER FROM THE MAP HERE

5820
830

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

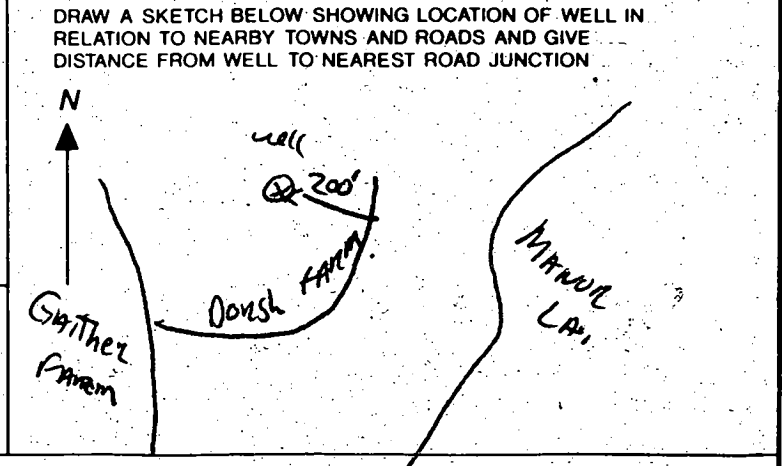
THIS WELL WILL NOT REPLACE AN EXISTING WELL

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)

APPROX. PERMIT NUMBER **GAP**

FORCE **LM** WRITE INITIALS IN BOX PERMIT No. **10-94-11431**

C1 05144 SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

COUNTY NUMBER A56429-6

1 2 3 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 2, 6 ON ALL CARDS)

ST/CD USE ONLY DATE RECEIVED MM DD YY 02 28 98

DATE WELL COMPLETED Depth of Well 22 240 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-1431

OWNER Woodlot Enterprises last name first name WORTH FARM RD. TOWN Wild Lake SUBDIVISION Feather Overlook SECTION LOT 7

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

GROUTING RECORD WELL HAS BEEN GROUTED (Y/N) TYPE OF GROUTING MATERIAL (C/M, B/C) NO. OF BAGS 6 NO. OF POUNDS 600

CASING RECORD casing types insert appropriate code below (S/ST, C/CO, P/PL, O/OT)

MAIN CASING TYPE St Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 23

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

SCREEN RECORD screen type or open hole (S/ST, B/BR, H/HO, P/PL, O/OT)

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

CIRCLE APPROPRIATE LETTER 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"

DRILLERS LIC. NO. MS D 116 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

DEPTH (nearest ft.) Scan HO 21 240

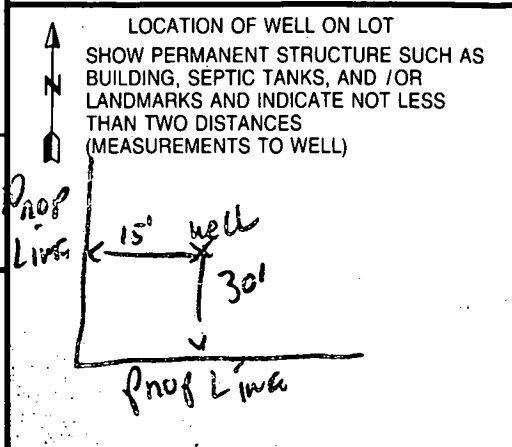
SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH) 56 60

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

PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 10 METHOD USED TO MEASURE PUMPING RATE Bucket

PUMP INSTALLED DRILLER WILL INSTALL PUMP (YES/NO) TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29



HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043

Fax 313-2648 313-2640

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation
Replacement

Receipt \$ _____
Date _____

Name of Installer ROBERT L. FEEZER Co., Inc Telephone 410 781-4655

License Number 2122
Certified Well Pump Installer Well Driller _____ Registered Plumber

Name of Property Owner NV Homes Telephone 410 721-4703
Subdivision GATHER HUNT Lot # 7 Well Tag # HO-94-1431
Site Address DORSCH FARM Rd

Pump

- 1. Type
 - a. Deep well jet _____
 - b. Shallow well jet _____
 - c. Submersible

Motor

- 1. Horsepower 1/2
- 2. RPM 3450
- 3. Voltage _____
 - a. 110 _____
 - b. 220

Pitless Adapter

- 1. Make Floorman
- 2. Model # FM10
- 3. Depth 42"

- 2. Make _____
- 3. Model # _____
- 4. Capacity _____ GPM
- 5. Pump exceeds well capacity Yes _____ No _____
- 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 _____ Other _____

Tank

- 1. Capacity Well-T-Tank
- 2. Pressure relief valve? YES

Piping

- 1. Type Poly
- 2. Size 1 1/2"
- 3. NSF and/or BOCA Code approved YES
- 4. Depth of supply line 42" +

Well data

- 1. Depth 240 ft.
- 2. Yield _____ GPM
- 3. Static water level _____ ft.
- 4. Will water supply be disinfected by installer? YES

2/22/99 INSP
COMPLETED

SEE SEPTIC RECORD

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: Robert L. Feezer

Date: 2/26/99

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