

LAYOUT 8/14/02 10-11 INSP 4 7/18/03 1:30
 INSP 2 8/15/02 3:00 INSP 5 _____
 INSP 3 8/19/02 10am INSP 6 _____

ISSUE DATE: 7/26/2002

APPROVAL DATE: 7/18/03

PERMIT

03-331245

P 517385

A 56441-D

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

Fogles Septic Clean IS PERMITTED TO INSTALL ALTER

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

SUBDIVISION: Hawksfield Estates LOT NUMBER: 4

ADDRESS: 3081 Emerald Valley Road PROPERTY OWNER: Greenfield Homes

SEPTIC TANK CAPACITY (GALLONS): 2000 OUTLET BAFFLE FILTER REQUIRED

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

NUMBER OF BEDROOMS: 6

SQUARE FEET PER BEDROOM: 180

LINEAR FEET OF TRENCH REQUIRED: 270 HOUSE SERVED BY PUBLIC WATER

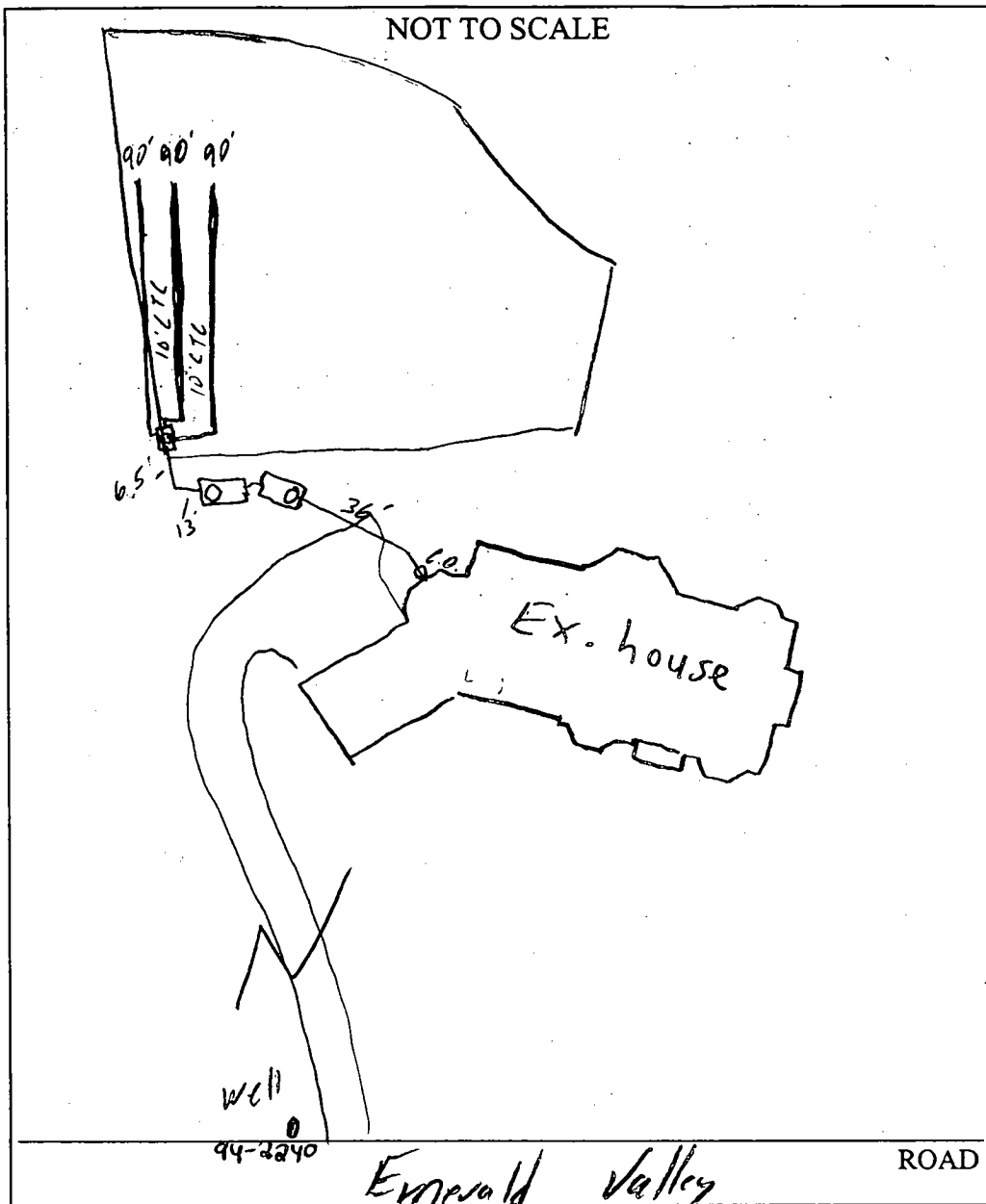
TRENCHES:	Trench to be 2.0 feet wide. Inlet 3.5 feet below original grade. Bottom maximum depth 7.5 feet below original grade. Effective area begins at 4.0 feet below original grade. 4.0 feet of stone below distribution pipe.
LOCATION:	Place the distribution box approximately 20' from the highest upper corner easement stake as shown on the building permit plan. Run trenches on contour towards the left lot line.
NOTES:	*Ignore the swales when installing trenches. The first 2 initial systems are to utilize 2' wide trenches. the third ^{third} system will probably consist of 3' wide trenches because of deep clay.

PLANS APPROVED: Brian Baker OK 7/19/02 DATE: 6/28/2002

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

A56441-D



TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
2	3.5	7.5
NUMBER OF TRENCHES		3
TOTAL LENGTH		270'
ABSORPTION AREA		1080 sq ft
DISTRIBUTION BOX LEVEL		✓
DISTRIBUTION BOX BAFFLE		✓
DISTRIBUTION BOX PORT		✓

SEPTIC TANK DATA	
SEPTIC TANK 1 LEVEL ✓	
CAPACITY	2000 GAL
SEAM LOC	Top
TANK LID DEPTH	5'
BAFFLES	✓
BAFFLE FILTER	—
MANHOLE LOC	Front
6" PORT LOC	—
WATERTIGHT TEST	—
SEPTIC TANK 2 LEVEL ✓	
CAPACITY	2000 GAL
SEAM LOC	Top
TANK LID DEPTH	5'
BAFFLES	✓
BAFFLE FILTER	—
MANHOLE LOC	Back
6" PORT LOC	—
WATERTIGHT TEST	—

PRE-CONSTRUCTION 8/14/02 Contour not as shown, must use pump. OK to install (4) 70' trenches, this will be less off contour than B.P. ST will be 4' deep @ inlet side (SD)

8/15/02 Tanks set, 5' deep. OK to cover. (EO)

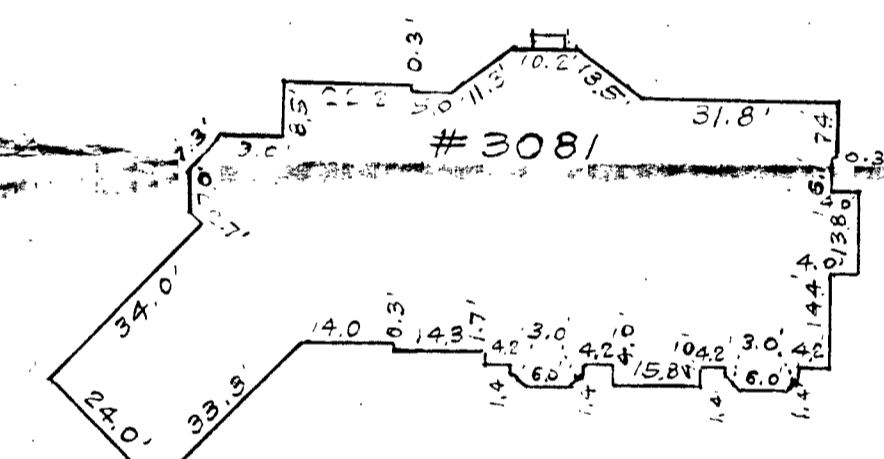
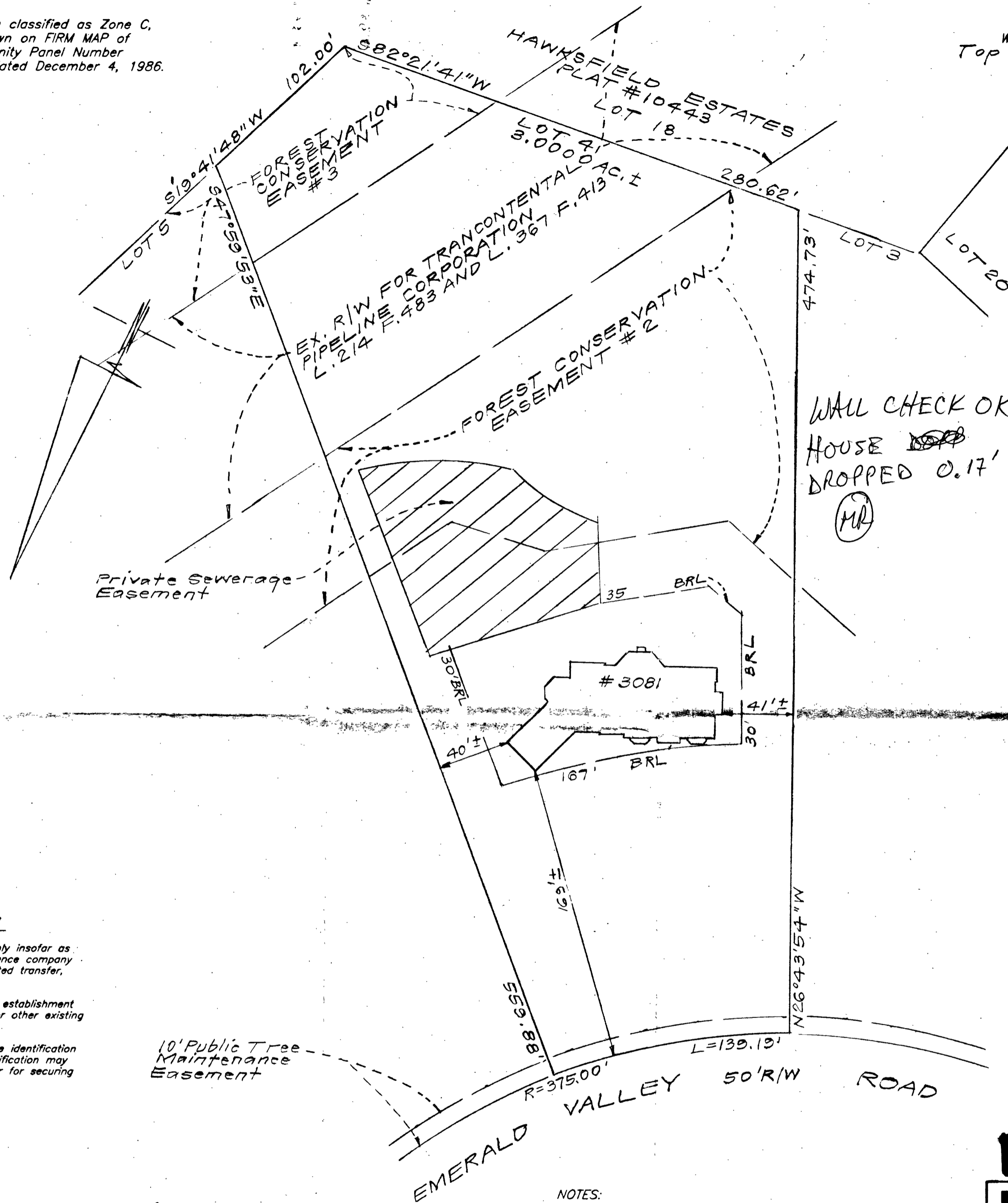
8/19/02 OK to cover all work. Pump & Alarm tests needed (EO)

7/18/03 Pump & alarm test ok. Well tag number is 140-94-2240 (FN)

FINAL INSPECTOR Kevin Thomas DATE OF APPROVAL 7/18/03

NOTE: This lot appears to lie in an area classified as Zone C, area of minimal flooding, as shown on FIRM MAP of Howard County, Maryland, Community Panel Number 2400440016B, Panel 16 of 45, dated December 4, 1986.

Wall Check: 7-17-02
Top of Wall Elev.: 510.5



SCALE: 1" = 30'

WALL CHECK B00136082 FOGLES INSTALLER

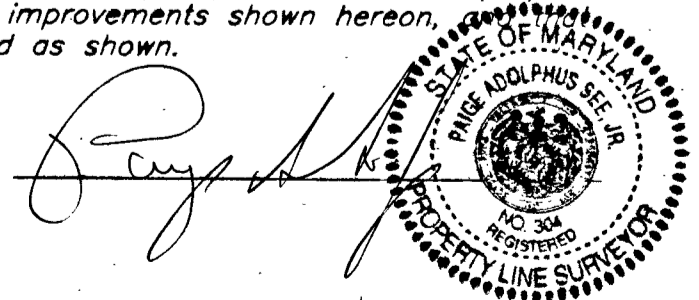
CONSUMER INFORMATION

1. This plat is of benefit to the consumer only insofar as it is required by a lender of a title insurance company or its agent in connection with contemplated transfer, financing or refinancing purposes;
2. This plat is not to be relied upon for the establishment or location of fences, garages, buildings or other existing or future structures;
3. This plat does not provide for the accurate identification of property boundary lines, but such identification may not be required for the transfer of title or for securing financing or refinancing.

SURVEYOR'S CERTIFICATE

I hereby certify that a field survey of this property has been made under my supervision for the purpose of locating the improvements shown hereon, and that they are located as shown.

7-18-02
DATE



NOTES:

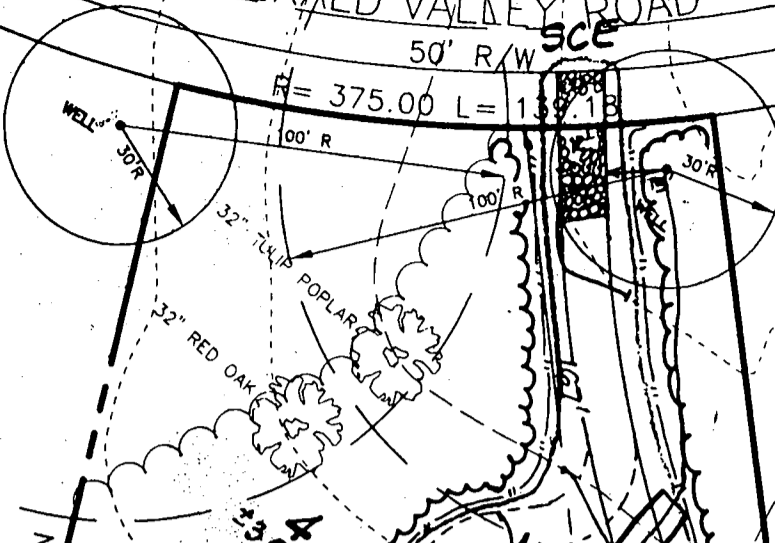
1. The ± setback distance accuracy = 1'

CLARK • FINEFROCK & SACKETT, INC. ENGINEERS • PLANNERS • SURVEYORS 7135 MINSTREL WAY • COLUMBIA, MD 21045 • (410) 381-7500 BALT. • (301) 621-8100 WASH.		
DESIGNED	LOCATION DRAWING 3081 EMERALD VALLEY ROAD LOT 4 HAWKSFIELD ESTATES SECTION TWO LOTS 1 THRU 6 A RESUBDIVISION OF LOT 19 HAWKSFIELD ESTATES PLAT #10443 3RD ELECTION DISTRICT HOWARD COUNTY, MARYLAND	SCALE 1" = 50'
DRAWN KWC		DRAWING
CHECKED PAS		JOB NO.
DATE 7-18-02	GREENFIELD HOMES	FILE NO. 99-128-0

EMERALD VALLEY ROAD

50' R/W

F = 375.00 L = 1



REVISED BY BLDG FOR DRIVE AWAY FROM WELL

N26°43'54\"/>

504

502

500

498

496

494

Approved Septic System Plan
Howard County Health Department

Signature
Date 6/28/02

FOREST CONSERVATION ESMT #2 (1.822 AC±)

Total linear feet of trench required 275 feet

Depth of trench(es) 2.0 feet
Depth of trench(es) 7.5 feet
one required below distribution pipe 4.0 feet

TRANSCONTINENTAL CORPORATION 413
R/W PIPE L214

FOREST CONSERVATION ESMT #3 (0.4417 AC±)

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DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVE
ELLCOTT CITY, MD 21043
PERMITS (410)313-2455 INSPECTIONS (410)313-1810
AUTOMATED INFORMATION (410) 313-3800

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

B00136082

Building Address 3081 EMERALD VALLEY RD
ELLCOTT CITY, MD 21042
Suite/Apt. #: _____ SDP/WP/Petition #: F-99-51
Census Tract (13011) Subdivision HAWKSFIELD EST
Section 2 Area _____ Lot F3 4th
Tax Map 16423 Parcel 401229 Grid 20
Zoning 1046 Map Coordinates 1046 Lot size 3.0 AC

Property Owner's Name BAJAJ HAJIT PARMAR
Address 311 KIRKWOOD ROAD
City ELLCOTT CITY State MD Zip Code 21108
Home Phone 410-781-6782 Work Phone _____
Applicant's Name & Mailing Address, (if other than stated hereon):
GREENFIELD HOMES INC
6656 LUSTER DR
HIGHLAND MD 20777
Phone 410-781-6787 Fax 443-535-0551

Existing Use VACANT LOT
Proposed Use NEW HOME
Estimated Construction Cost Custom 800,000
Description of Work NEW SINGLE FAMILY ALL BRICK
2 STORY, FINISHED BASEMENT
3 CAR GARAGE 2 1/2 BATHS (BATHS
2 AIRCON. DICK

Contractor Company GREENFIELD HOMES
Contact Person RICK MINOR
Address 6656 LUSTER DRIVE
City HIGHLAND State MD Zip Code 20777
License No. HBL-00361
Phone 410 781-6787 Fax 443 535-0551

Occupant or Tenant _____
Contact Name N/A
Address _____
City _____ State _____ Zip Code _____
Phone _____ Fax _____

Engineer or Architect Company MARK BANDY **Tax**
Contact Person MARK BANDY
Address _____
City _____ State _____ Zip Code _____
Phone 410 750-2262 Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: _____	Water Supply: _____ Public _____ Private _____
No. of stories: _____	Sewage Disposal: _____ Public _____ Private _____
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Construction type: Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ State Certified Modular _____	Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
	Sprinkler system: N/A <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: _____ Public _____ Private <input checked="" type="checkbox"/>
1st floor: <u>61</u> Depth <u>136</u> Width <u>136</u>	Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/>
2nd floor: <u>65</u>	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Basement: <u>43</u> <u>86</u>	Gas Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/>	Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Propane Gas <input type="checkbox"/>
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Sprinkler system: N/A <input checked="" type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____
No. of Bedrooms <u>6</u>	
Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	
Other Structure: _____	
Dimensions: _____	
Footings: _____	
Roof: _____	
State Certified Modular _____ Manufactured Home _____	

THIS UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THEREIN; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSES OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature [Signature]
Title/Company GREENFIELD HOMES INC. PAES

Print Name WAYNE GREENFIELD
Date 4/10/02 5/10/02

Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
** PLEASE WRITE NEATLY AND LEGIBLY. **
- FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official		
Dev. Engineering, DPZ		
Health	<u>6/28/02</u>	<u>Brian Baber</u>
Fire Protection		
Is Sediment Control approval required prior to issuance?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>		
ONE STOP SHOP: <input type="checkbox"/>		

DPZ SETBACK INFORMATION	PROPERTY ID#
Front: _____	<u>54671</u>
Rear: _____	Filing fee \$ <u>100</u>
Side: _____	Permit fee \$ _____
Side St.: _____	Excise tax \$ _____
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Add'l permit fee \$ _____
Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
Lot Coverage for New Town Zone _____	Balance due \$ _____
SDP/Red-line approval date _____	Check # <u>1427</u>
Accepted by <u>[Signature]</u>	Validation # <u>48560</u>

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: Gahtland Plumbing Inc Telephone #: 410-875-5303
Address: 1620 W. Old Liberty Rd
Sykesville MD 21784

(Must circle one) Licensed Plumber Licensed Well Driller
License # and name of individual responsible for the field installation: License# 6352
Name (Print): Joseph Gahtland
*A licensed individual must perform the actual installation. Apprentices must be under the direct supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification.

Name of Property Owner: Rajiv Parminder Telephone #: 410-281-6782
Subdivision: Hawkfield Lot #: 4 Well Tag #: HO-94-2240
Site Address: 3081 Emerald Valley Rd
Ellicott City, MD 21042

Submersible Pump Data Pitless Adapter Well Cap and Electric Conduit
Make: Goulds Make: BIF Two piece watertight cap: ✓
Model #: PG507 Model#: PICOLT Screened, vented well cap: ✓
Pump Capacity 2 GPM Depth: 48" (36" min) Cap secured to casing: ✓
Well Yield: 15 GPM NSF approved: Yes Conduit min 18" B.G.: ✓
Depth of well encountered at time of pump installation: 246 (feet) Conduit secured to well cap: ✓
If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4
Torque arrestors on Cable guards are required - Must circle one
Safety rope, if used, attached to inside of well casing with eye bolt Yes

Piping to house
Type: Poly
PSI: 160 (160 psi min)
Depth of supply line: 48" (36" min)

House Connection
PVC sleeved to undisturbed soil at wall penetration: ✓ } Sleeve under
Approximate length of sleeve: _____ } Footer & under
Sleeve caulked and sealed properly: _____ } Driveway

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

Nov 20, 2002
date

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

Date Insp. Requested: 7/16/02 Date Insp. Approved: 7/16/02 SO SRK
Inspection Data: Pitless adapter and 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 installed inside of well 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 ✓

1 - 06738

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED. 6/23/99

COUNTY NUMBER A56441 B

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

DATE RECEIVED 06 27 99

DATE WELL COMPLETED 06 05 99

DEPTH OF WELL 265 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-2240

OWNER Digi Data, STREET OR RFD Emerald Valley Ave, TOWN W. Friendship, SUBDIVISION Hawksfield, SECTION, LOT 4

WELL LOG

Table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Rows include: Dirt, Soft Mica & Clay, Sand, Hard Br. Sandstone, Hard Blk & Blue laced Br. Sandstone, Hard Blue Br. Blk Sandstone, Hard Blk Sandstone laced Br. Sandstone, Hard Blk Sandstone, Hard Br. Sandstone & Opening Schist, Hard White Sandstone.

GROUTING RECORD

WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL (CM), NO. OF BAGS 11, NO. OF POUNDS 1084, GALLONS OF WATER 66, DEPTH OF GROUT SEAL 42 ft.

CASING RECORD

MAIN CASING TYPE ST, Nominal diameter 6, Total depth of main casing 44

Table for OTHER CASING (if used) with columns: diameter, depth. Rows: PL 4 inch, 55 to 195; PL 4 inch, 205 to 245; PL 4 inch, 255 to 265.

SCREEN RECORD

screen type or open hole PL, insert appropriate code below

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED (Y)

- CIRCLE APPROPRIATE LETTER: A, E, P

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 MND 296, Ronald Kyker

LIC. NO. 1 MND 296, Ronald Kyker (USA), SITE SUPERVISOR

C 2 DEPTH (nearest ft.)

Table for C 2 DEPTH with columns: diameter, depth. Rows: PL 4 inch, 45 to 55; PL 4 inch, 195 to 205; PL 4 inch, 245 to 255.

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

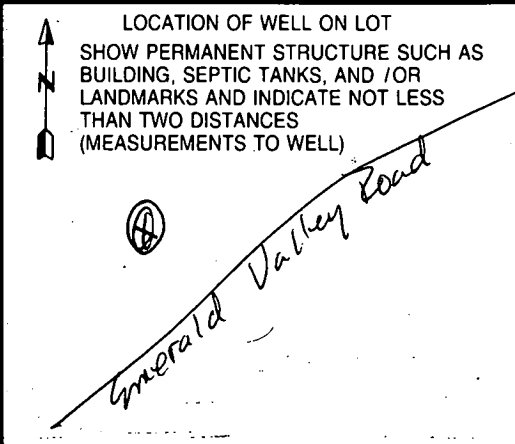
MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q

C 3 PUMPING TEST

HOURS PUMPED (nearest hour) 3, PUMPING RATE (gal. per min.) 12, METHOD USED TO MEASURE PUMPING RATE Submersible, WATER LEVEL (distance from land surface) BEFORE PUMPING 61 ft., WHEN PUMPING 64 ft., TYPE OF PUMP USED (for test) S submersible

PUMP INSTALLED

DRILLER WILL INSTALL 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) 4 above, LAND SURFACE (nearest foot) 49 51



B 1 8658 SEQUENCE NO. (MDE USE ONLY)
1 2 3 4 5 6
(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
HO-94-2240
70 fill in this form completely 79

4 Date Received (APA) 04/27/99
OWNER INFORMATION
DIGI-DATA HOLDINGS
15 Last Name 21 Owner 27 First Name 34
9881 BEDFORD LANE
COLUMBIA INDIANOLA
57 Town 70 State 72 Zip 76

B 3 LOCATION OF WELL
1 2 HOWARD
8 COUNTY 21
HAWKSFIELD ESTATES
23 SUBDIVISION 42
SECTION 2 44 46 LOT 4 48 50
WEST FRIENDSHIP
52 NEAREST TOWN 71
MILES FROM TOWN (enter 0 if in town) 2 73 MI 76 77 78

DRILLER INFORMATION CIRCLE: MSD/MGD/MWD
Ronald Kyle
Driller's Name 77 License No. 80 299
Westminster Rotary Well Driller
Firm Name
P.O. Box 861 Westminster, Md 21158
Address
Ronald Kyle 4/24/99
Signature Date

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
N W N E
8-9 8-9
W TOWN E
8 8
S W S E
8-9 8-9
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
NORTH N
WEST W EAST E
SOUTH S
34 30 37
DISTANCE FROM ROAD
ENTER FT OR MI FT
38 39
TAX MAP: 16 BLK: 20 PARCEL 258

B 2 WELL INFORMATION
1 2 APPROX. PUMPING RATE (GAL. PER MIN.) 5
8 12
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500
14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)
D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
Howard Co A564410
COUNTY NAME COUNTY NO.
STATE SIGNATURE INSERT S
DATE ISSUED 050499
43 48 CO SIGNATURE A.M. Miller 5/4/00 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 INCH
NEAREST INCH

METHOD OF DRILLING (circle one)
BORED (or Augered) JETTED Jetted & DRIVEN
30 MR-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. City
2.
3.
WRITE THE BOX NUMBER FROM THE MAP HERE
E 820
N 520
000
000

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)
N THIS WELL WILL NOT REPLACE AN EXISTING WELL
Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
39 S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY - CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
D 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
N
Well
Emerald Valley Road

Not to be filled in by driller (MDE OR COUNTY USE ONLY)
APPROX. PERMIT NUMBER GAP
54 63
FORCE AM WRITE INITIALS IN BOX PERMIT No. HO-94-2240
87 88 70 71 72 73 74 75 76 77 78 79

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

APPLICATION

PERCOLATION TESTING

A 39724
P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE 461-9933

*8/11/87
percolation
percolation approved
plot
(initials)*

DISTRICT _____

DATE 7/15/87

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER RONALD S. LANEVE

ADDRESS 11799 TRIADELPHIA ROAD PHONE 301-531-6161
ELLICOTT CITY, MARYLAND 21043

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION _____

SUBDIVISION _____ LOT NO. LOT 19 Preliminary 2X

ROAD AND DESCRIPTION SOUTH OF MARYLAND ROUTE 144 AND SOUTHEAST OF TRIADELPHIA ROAD

TAX MAP 16623 PARCEL # 40

SIZE OF LOT 5.5 ACRES 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.

(Signature)
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

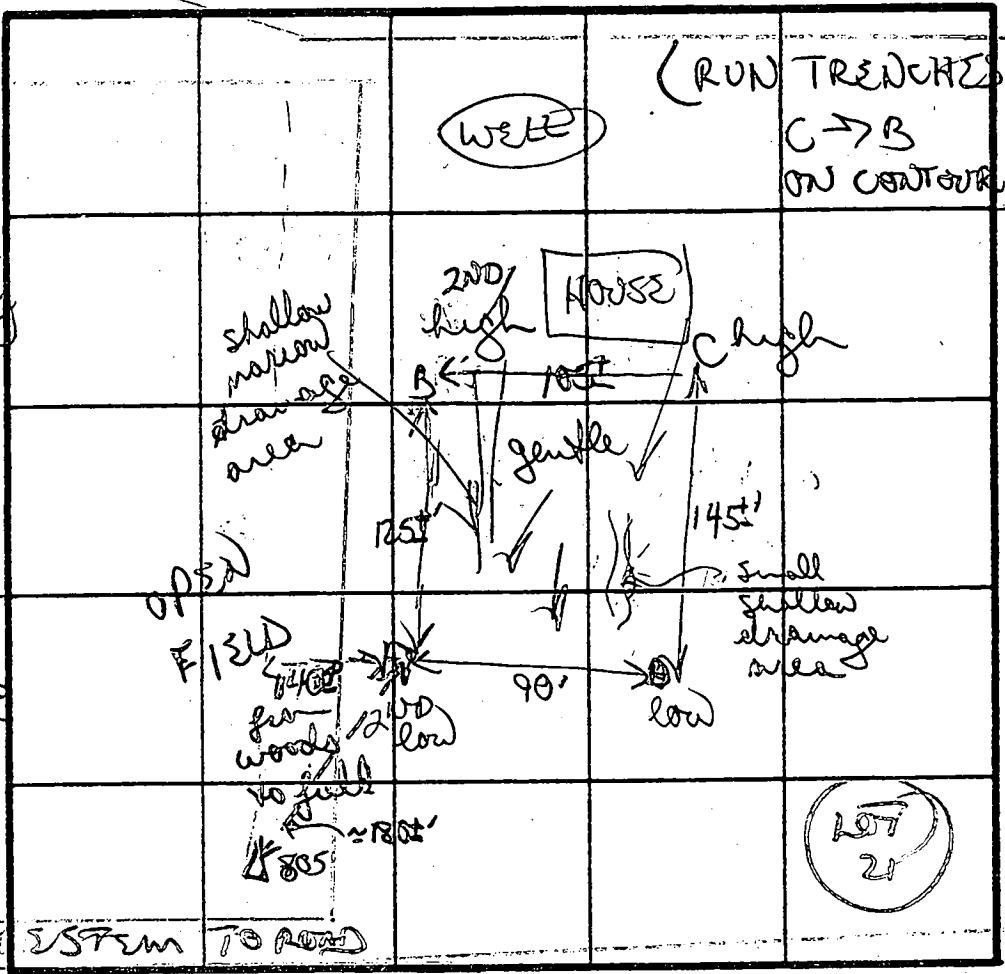
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING for field located holes & sub-plot

SHALLOW SYSTEM PREFERRED

THIS IS NOT A PERMIT.

A + B
SOIL PROFILE
orange/brown clay (chunky heavy) = 4'
quickly to mostly grey silty mica loam w/ patches orange silty loam
12+1'
(B) 13+1'



C
orange/tan chunky clay silty mix 3 1/2'
orange to mostly grey silty mica loam w/ 5% small grey silt frags 12+1'
2 Perc 3mm 180φ 16R
Inlet 3.5'
Bottom 7.5'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

D
grey/orange grey tan patches silty clay 4 1/2'
to mostly grey/tan silty mica loam
12 1/2'

DATE	TEST NO	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
8/11/87	A	4 1/2'	301	304	304	307	3min	
		12 1/2'	bottom (see profile)					
	D	4 1/2'	300	302	302	304	2min	
		12 1/2'	bottom (see profile)					
	C	4 1/2'	312	315	315	319	4min	
		12 1/2'	bottom (see profile)					
	B	4 1/2'	306	308	308	311	3min	
		7' M	302	308	308	310	2min	
		13' D	bottom (see profile)					

REMARKS: Dug & tested as staked. Pre in woods
TYPE OF SOIL: mostly orange tan clay loams, mostly grey tan silty mica loams
TESTED BY: B Wifon ALSO PRESENT: Hareesh

APPLICATION

PERCOLATION TESTING

A 50793C

P _____

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

DISTRICT 3 RD

DATE 7/5/95

7-11-95

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 DGI-DATA CORPORATION

ADDRESS 8580 JORSEY RUN RD. MD 2094 PHONE 792-0611

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION HAWKSFIELD ESTATES, SEC 2 LOT NO. 339

ROAD AND DESCRIPTION NORTHERNMOST END OF EMERALD VALLEY ROAD

TAX MAP 16 PARCEL # 258 P640

SIZE OF LOT 3.16 AC ± TYPE BLDG. SINGLE FAMILY
(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

A 50773-C
COUNTY #

SOIL PROFILE
483 484

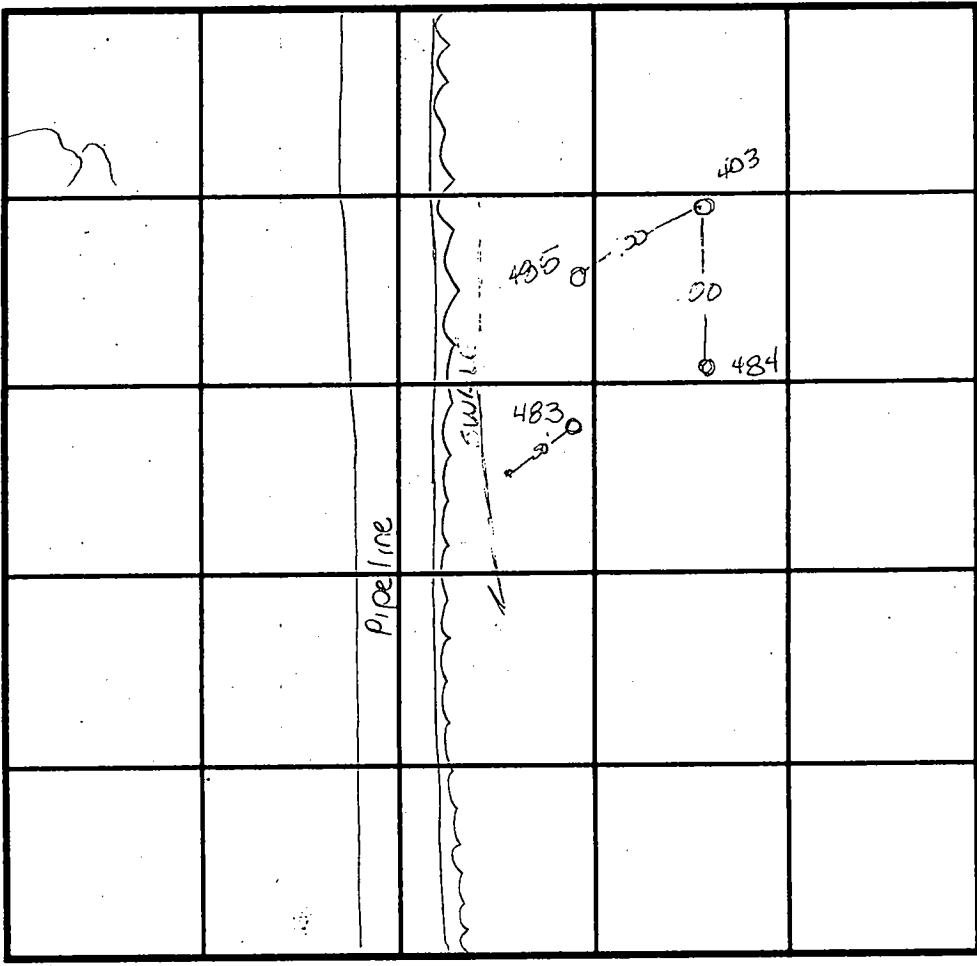
0'
orange
bm
silm
4.0
lgt
tan
silm
10.0
dark
grey
silm
white
and
orange
mottles
12.5

485

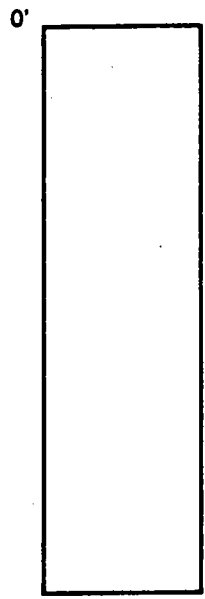
lgt
orange
brown
silm
4.0
lgt
tan
silm
11.0

403

orange
brown
silm
4.0
lgt
orange
brown
silm
11.0



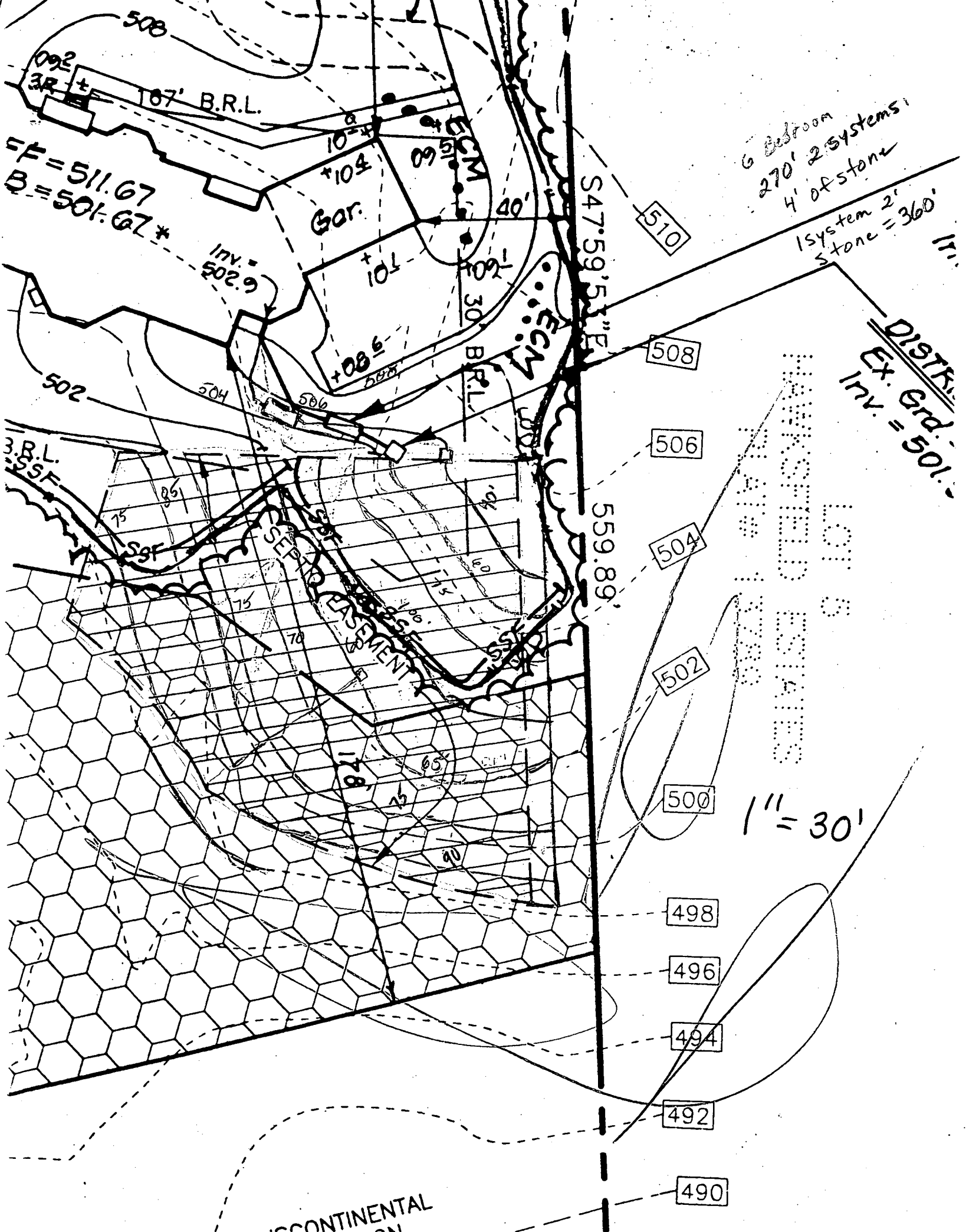
SOIL PROFILE*

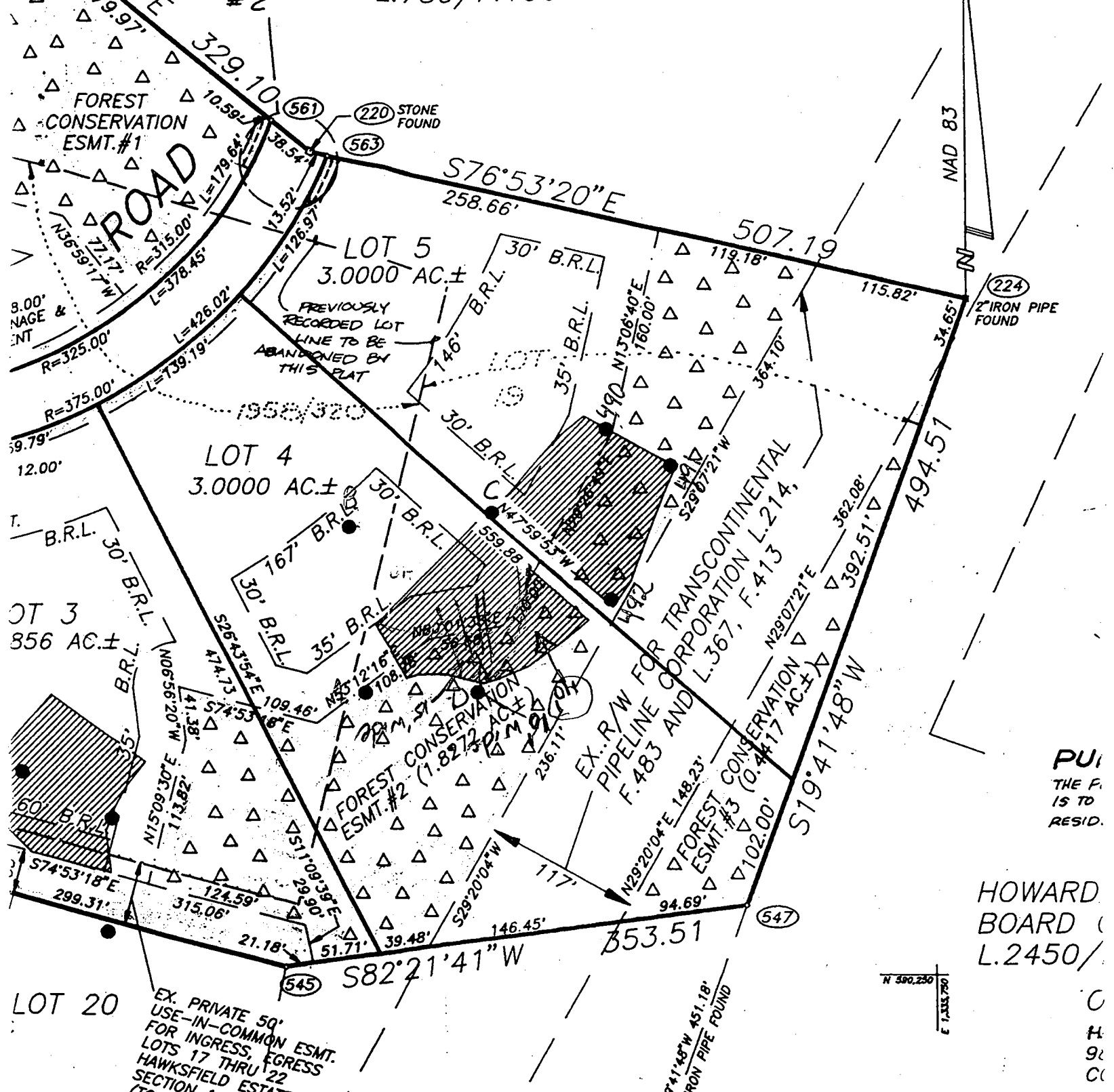


INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2-14-96	483	4.5 V12.5	2:28	2:37	2:37	2:42	5min
	484	4.0 V11.0	2:37	2:39	2:39	2:41	2min
	485	3.5 V11.0	2:58	3:00	3:00	3:03	3min
	403	Visual	to 110	- 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 _____





(224)
2" IRON PIPE FOUND

NAD 83

PUR
THE F
IS TO
RESID.

HOWARD
BOARD
L.2450/

N 590.250
E 1,333.790

S19°41'48"W 451.18'
TO 2" IRON PIPE FOUND

EX. PRIVATE 50'
USE-IN-COMMON ESMT.
FOR INGRESS, EGRESS
LOTS 17 THRU 22
HAWKSFIELD ESTATES,
SECTION 1
(TO BE ABANDONED BY
RECORDATION OF THIS
PLAT)

RECORDED AS
ON 7/5/99 AT
RECORDS OF H

SURVEYOR'S CERTIFICATE

I HEREBY CERTIFY THAT THE FINAL PLAT SHOWN HEREON IS CORRECT; THAT IT IS A RESUBDIVISION OF PART OF THE LAND CONVEYED BY DIGI-DATA HOLDINGS, INC. TO HAWKSFIELD ESTATES, INC. BY DEED DATED NOVEMBER 12, 1978 AND RECORDED IN THE LAND RECORDS OF HOWARD COUNTY MD. IN LIBER 4536, FOLIO 110,

SHANABEL
8726 TOWN
SUI
ELLICOTT CIT
(410)

FIN

DORIS C. IRELAND
CARROLL F. IRELAND
L.759/F.156

EXISTING POND

PRIVATE USE-IN-COMMON
(L.3410/F.539) (TO BE
DED BY DEVELOPER)
602:10

FOREST
CONSERVATION
ESMT

LIMITS OF SUBMISSION
25+29.95

Approve plat cert

35' B.R.L.

LOT 2
3.0014 AC±
75' B.R.L.

LOT 5
3.0000 AC±
30' B.R.L.

ALLEY
(50' R/W)

PUBLIC DRAINAGE &
UTILITY
EASEMENT
10' STREET
TREE ESMT.

10' STREET
TREE ESMT.

LOT 4
3.0000 AC±

233.66
S87°40'54"W
20'
N87°40'54"E

12' PUBLIC
DRAINAGE &
UTILITY ESMT.

LOT 3
3.0856 AC±

FOREST
CONSERVATION
ESMT

EX. R/W FOR TRANSCONTINENTAL
PIPELINE CORPORATION L.274,
F.483 AND L.367, F.413

FOREST CONSERVATION
ESMT

PUBLIC STORAGE
MANAGEMENT
UTILITIES
ESMT

PROPOSED PRIVATE
USE-IN-COMMON ESMT.
FOR INGRESS, EGRESS
LOTS 17, 18, 12

S82°41'41"W

494.51

353.51

(547)

UTILITY
LINED BY
ASS

HOWARD CO

NO.	RAD.
95-14	875.00
111-98	725.00

PROPERTY OF
KENNETH L. JOHNSON
L. 583, F. 77

PROPERTY OF
H. J. FOREMAN
L. 452, F. 577

PROPERTY OF
DORIS C. IRELAND
CARROLL F. IRELAND
L. 759, F. 156

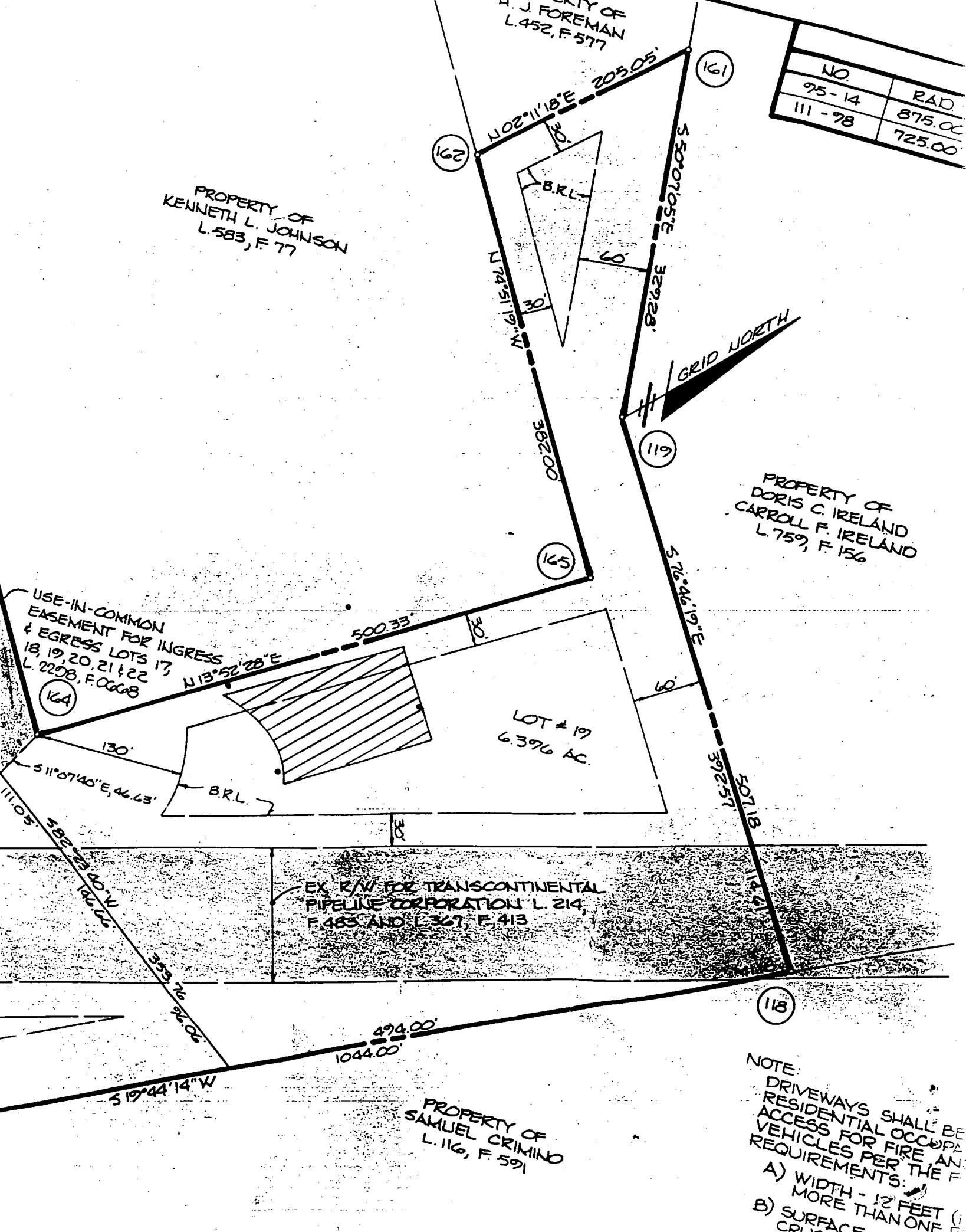
USE-IN-COMMON
EASEMENT FOR INGRESS
& EGRESS LOTS 17,
18, 19, 20, 21 & 22
L. 2298, F. 0008

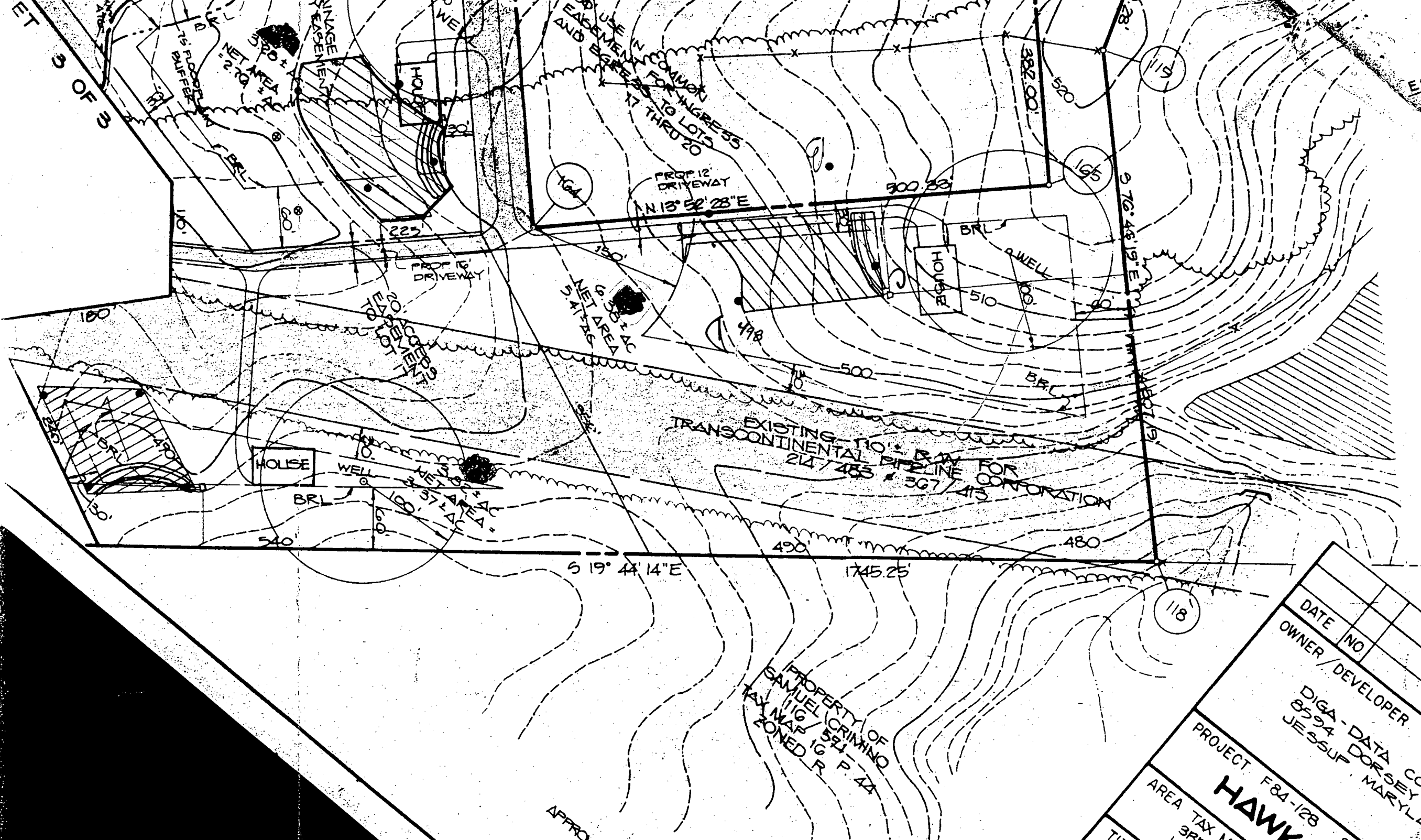
EX. R/W FOR TRANSCONTINENTAL
PIPELINE CORPORATION L. 214,
F. 483 AND L. 367, F. 413

LOT # 19
6.396 AC.

NOTE:
DRIVEWAYS SHALL BE
RESIDENTIAL OCCUPANCY
ACCESS FOR FIRE AND
VEHICLES PER THE F
REQUIREMENTS:
A) WIDTH - 12 FEET
MORE THAN ONE
B) SURFACE
CPI

PROPERTY OF
SAMUEL CRIMINO
L. 116, F. 591





PROF 12 DRIVEWAY
N 13° 52' 28" E

PROF 16 DRIVEWAY

EXISTING 10" BRAW
TRANSCONTINENTAL PIPELINE FOR
214 / 435 & 367 / 415
CORPORATION

S 19° 44' 14" E

1745.25'

PROPERTY OF
SAMUEL CRIMINO
116 MAP 16524 P. 44
TAX MAP ZONED R

DATE NO
OWNER / DEVELOPER

DIGA - DATA CO
8594 DORSEY
JESSUP MARYLA

PROJECT F84-128
AREA TAX
3R

HAWK

APPRO

3.01 AC ±

LOT 34

3.11 AC ±

STOCKING AREA
MANAGEMENT AREA
0.09 AC ±

LOT 29

3.00 AC ±

29

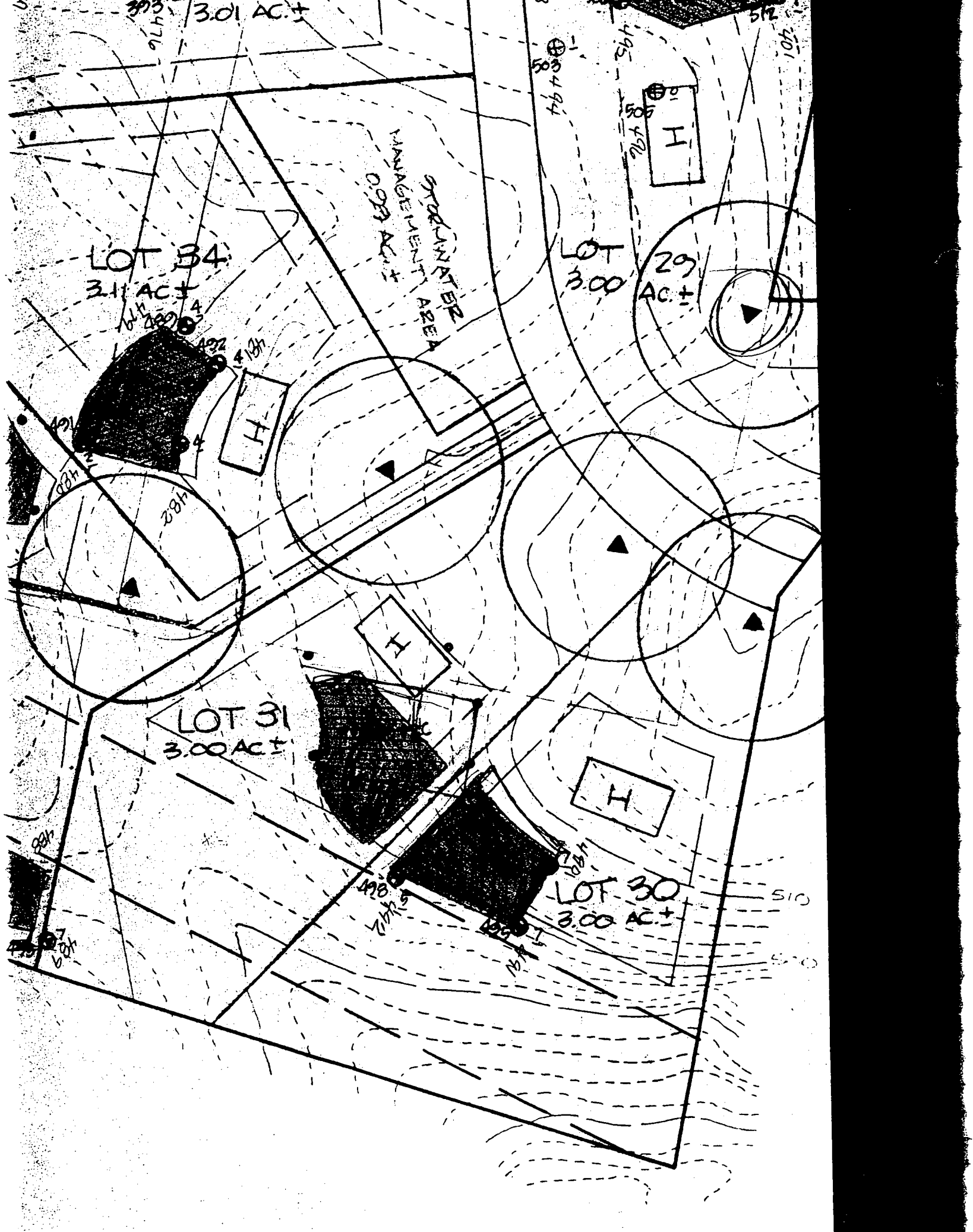
AC ±

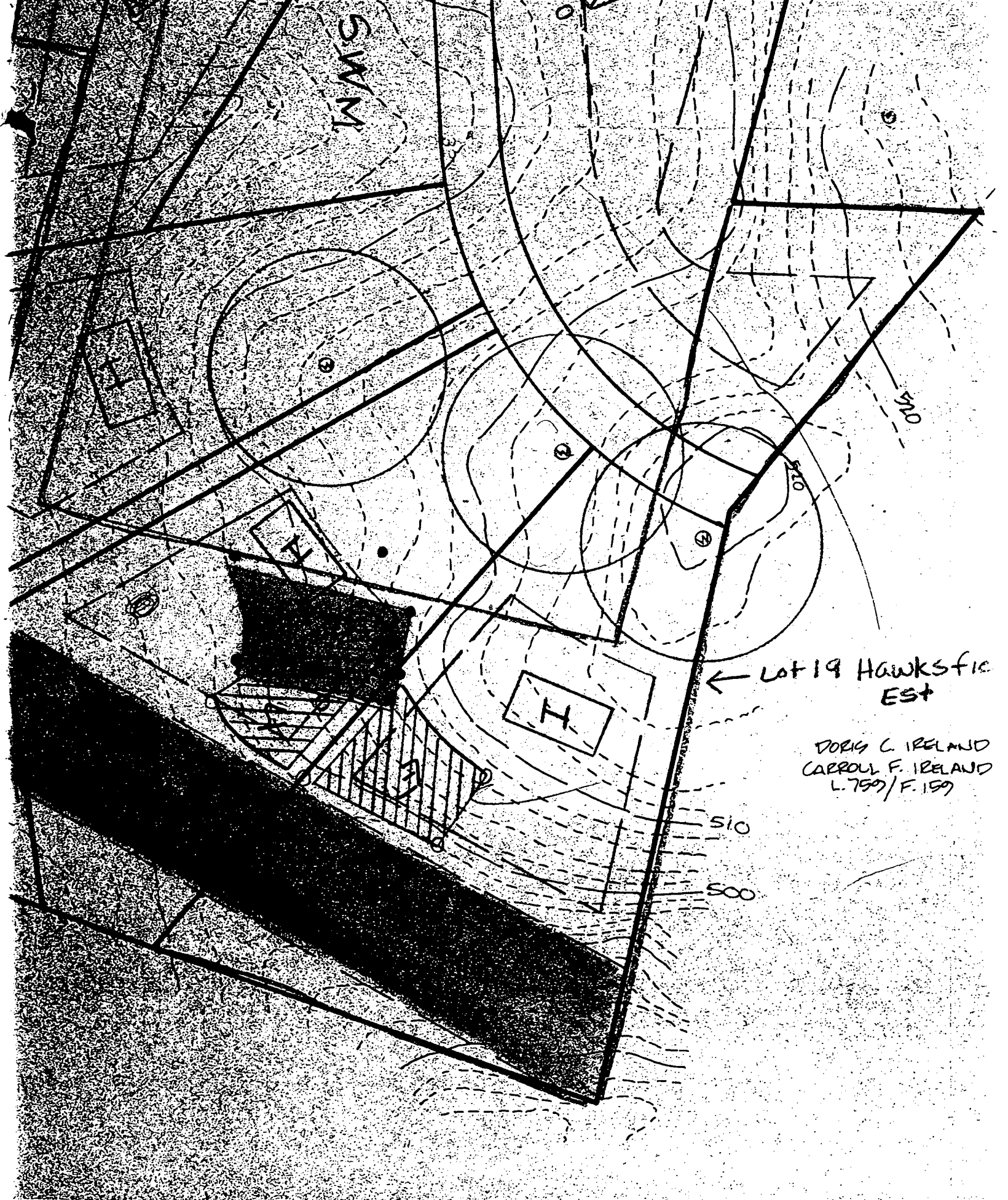
LOT 31

3.00 AC ±

LOT 30

3.00 AC ±





WMS

← Lot 19 Hawksfic Est

DORIS C. IRELAND
CARROL F. IRELAND
L. 759/F. 159

510

500

H

H