LAYOUT ✓ 6/11/03 10:30am INSP 4 _____

INSP 2 ~~#~~ Final 6/12/03 2 INSP 5 _____

INSP 3 _____ INSP 6 _____

ISSUE DATE: 6/10/2003

APPROVAL DATE: 6/12/03

PERMIT

INDEXED

P 519002

A 58993-E

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

04-364260

Hatfields Equipment IS PERMITTED TO INSTALL ☒ ALTER ☐

ADDRESS: 13785 Burntwoods Road, Glenelg PHONE NUMBER: 301-854-6172

SUBDIVISION: Cattail Ridge LOT NUMBER: 5

ADDRESS: 15008 Rolling Hills Drive PROPERTY OWNER: MTR Land

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

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 building permit plan.
NOTES:	Plan submitted for building permit is approvable for basement service by gravity.

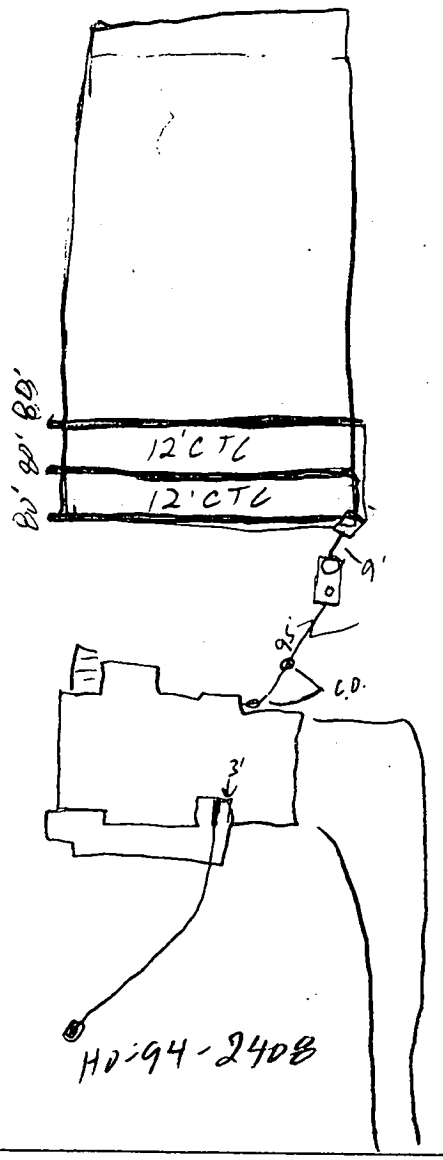
PLANS APPROVED: John Boris DATE: 11/25/2002

NOTE: PERMIT VOID AFTER 2 YEARS
NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
NOTE: WATERTIGHT SEPTIC TANKS REQUIRED
NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL
NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS UNLESS SPECIFICALLY AUTHORIZED

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 CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM
AND RETURNED
3/10/04-B00146695-DECK

A58993-E

NOT TO SCALE



ROAD

TRENCH/DRAINFIELD DATA

WIDTH	INLET	BOTTOM
3'	3'	5'

NUMBER OF TRENCHES 3
TOTAL LENGTH 240'
ABSORPTION AREA 2207
DISTRIBUTION BOX LEVEL ✓
DISTRIBUTION BOX BAFFLE ✓
DISTRIBUTION BOX PORT —

SEPTIC TANK DATA

SEPTIC TANK 1 LEVEL ✓
CAPACITY 1500 GAL
SEAM LOC Top
TANK LID DEPTH 1.5-2'
BAFFLES ✓
BAFFLE FILTER —
MANHOLE LOC Back
6" PORT LOC From T
WATERTIGHT TEST ✓

SEPTIC TANK 2 LEVEL
CAPACITY GAL
SEAM LOC
TANK LID DEPTH
BAFFLES
BAFFLE FILTER
MANHOLE LOC
6" PORT LOC
WATERTIGHT TEST

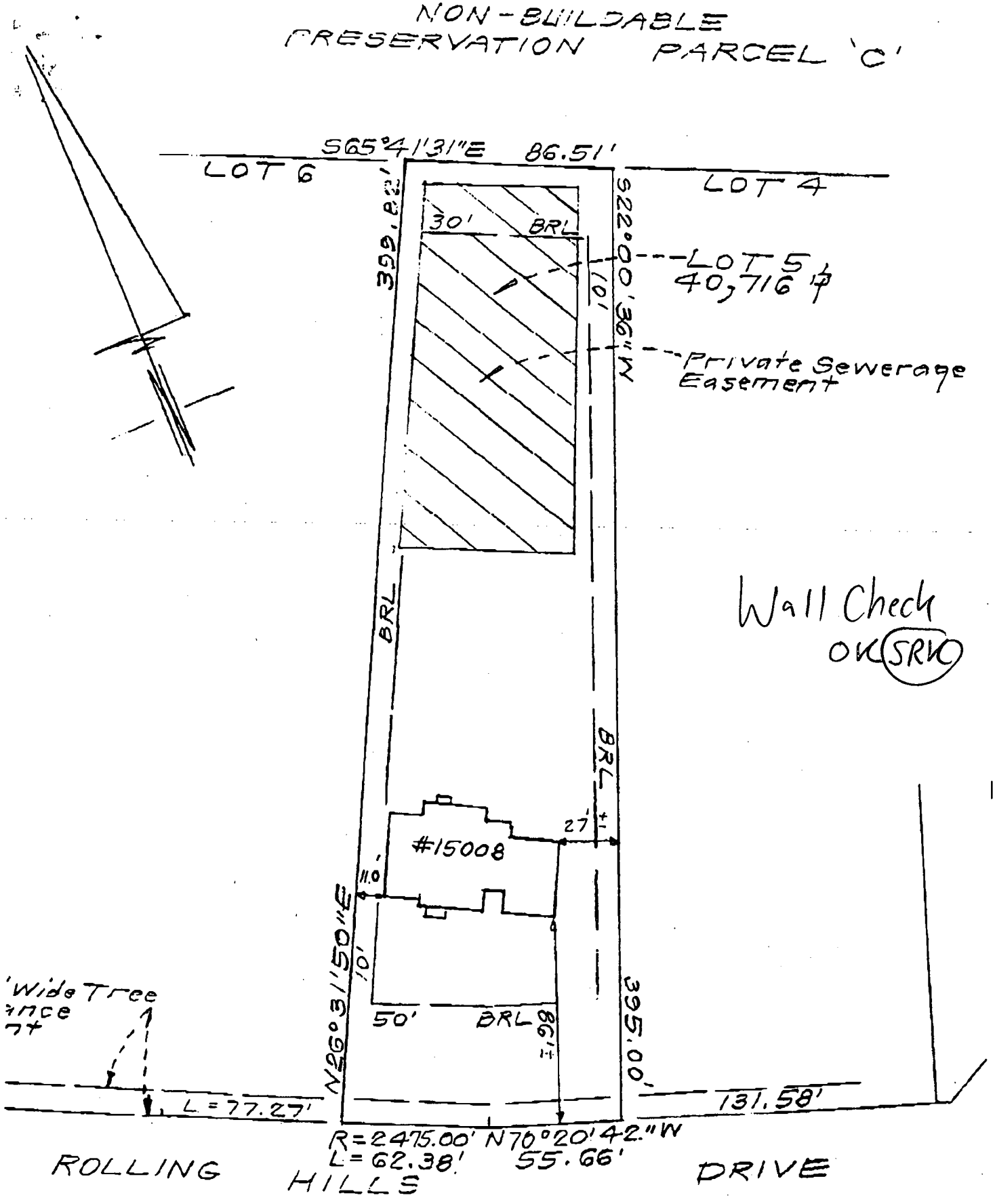
PRE-CONSTRUCTION 6/11/03 Lot staked, contour appears accurate, tank set. Install (3) 80' trenches (SC)

INSTALLATION 6/12/03 OK to cover all work (SC)

FINAL INSPECTOR [signature]

DATE OF APPROVAL 6/12/03

NON-BUILDABLE PRESERVATION PARCEL 'C'



Wall Check
OK (SRV)

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

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER B0013967

Building Address 15008 Rolling Hills Dr

Suite/Apt. #: _____ SDP/WP/Petition #: _____

Census Tract _____ Subdivision _____

Section _____ Area _____ Lot _____

Tax Map _____ Parcel _____ Grid _____

Zoning _____ Map Coordinates _____ Lot size _____

Property Owner's Name _____

Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Work Phone _____

Applicant's Name & Mailing Address, (if other than stated hereon):

Phone _____ Fax _____

Existing Use _____

Proposed Use _____

Estimated Construction Cost $ _____

Description of Work _____

Contractor Company _____

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

License No. _____

Phone _____ Fax _____

Occupant or Tenant _____

Contact Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Engineer or Architect Company _____

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

BUILDING DESCRIPTION - *COMMERCIAL*

Building Characteristics

Height:

No. of stories:

Gross area, sq. ft. per floor:

Use group:

Construction type:
_____ Reinforced Concrete
_____ Structural Steel
_____ Masonry
_____ Wood Frame

_____ State Certified Modular

Utilities

Water Supply:
____ Public
____ Private

Sewage Disposal:
____ Public
____ Private

Electric Yes ☐ No ☐
Gas Yes ☐ No ☐

Heating System:
Electric ☐ Oil ☐
Natural Gas ☐
Propane Gas ☐

Sprinkler system: N/A ☐
____ Full
____ Partial
____ Other Suppression
____ # of Heads

BUILDING DESCRIPTION - *RESIDENTIAL*

Building Characteristics

SF Dwelling ☐ SF Townhouse ☐

	Depth	Width
1st floor:		
2nd floor:		
Basement:		

Finished Basement ☐ Unfinished Basement ☐
Crawl space ☐ Slab on Grade ☐
No. of Bedrooms 4

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

Utilities

Water Supply:
____ Public
____ Private

Sewage Disposal:
____ Public
____ Private

Electric Yes ☐ No ☐
Gas Yes ☐ No ☐

Heating System:
Electric ☐ Oil ☐
Natural Gas ☐
Propane Gas ☐

Sprinkler system: N/A ☐
_____ NFPA #13D
_____ NFPA #13R
_____ Other:

THE 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 THERETO; (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 PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

_____ *Applicant's Signature*

_____ *Print Name*

_____ *Title/Company*

_____ *Date*

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	11/25/02	
Fire Protection		

Is Sediment Control approval required prior to issuance?
YES ☐ NO ☐

CONTINGENCY CONSTRUCTION START ☐
ONE STOP SHOP ☐

DPZ SETBACK INFORMATION

Front _____
Rear _____
Side _____
Side St. _____

All minimum setbacks met?
YES ☐ NO ☐

Is Entrance Permit required?
YES ☐ NO ☐

Historic District?
YES ☐ NO ☐

Lot Coverage for NewTown Zone _____

SDP/Red-line approval date _____

PROPERTY ID# _____

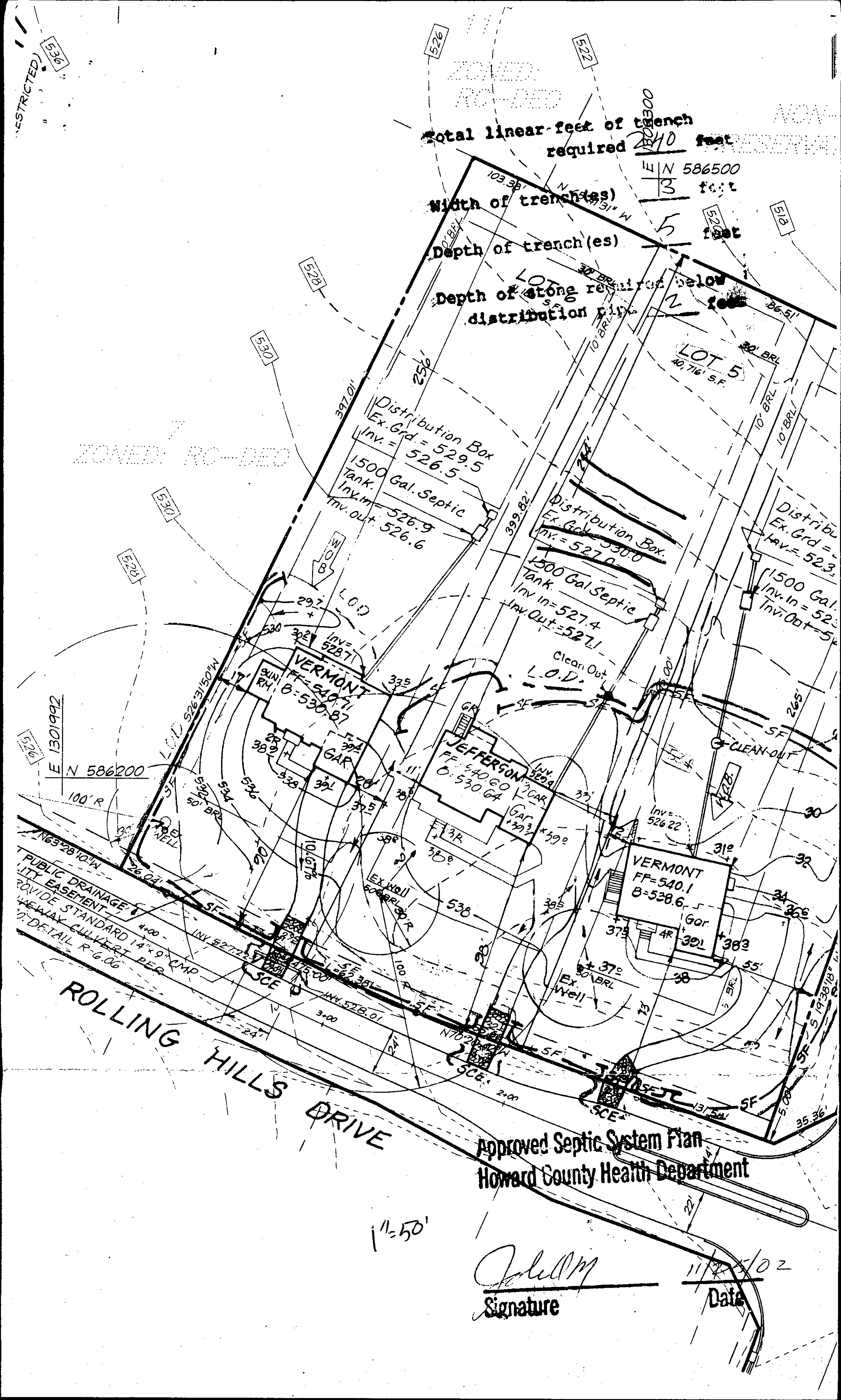
Filing fee	$ _____
Permit fee	$ _____
Excise tax	$ _____
Add'l per. fee	$ _____
TOTAL FEES	$ _____
Sub-total paid	$ _____
Balance due	$ _____
Check	# _____
Validation	# _____

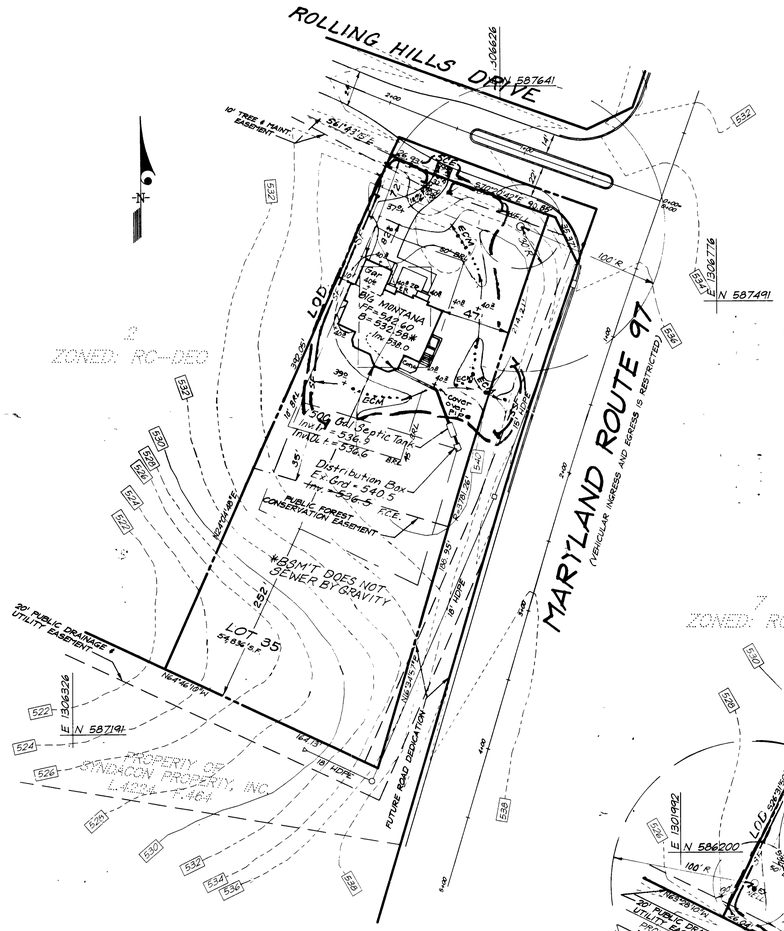
Accepted by _____

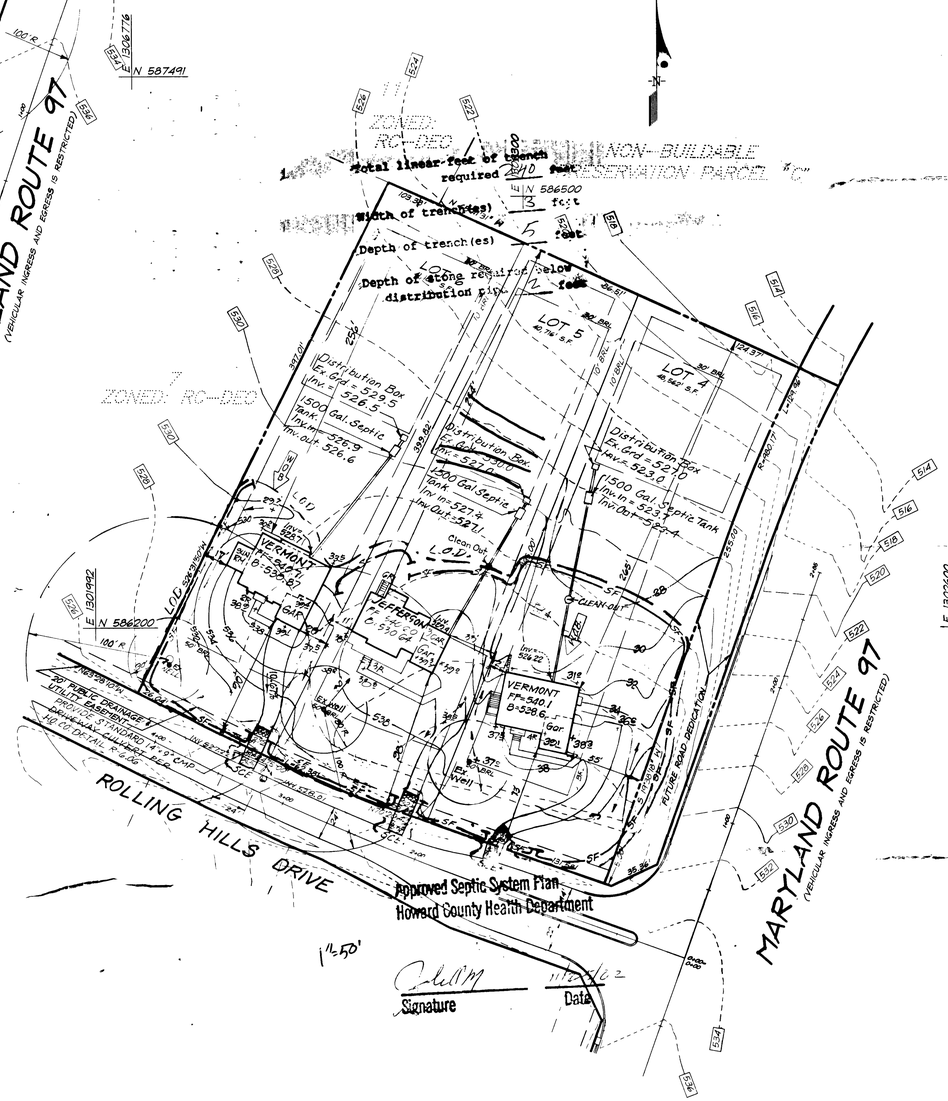
Distribution of Copies: White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA

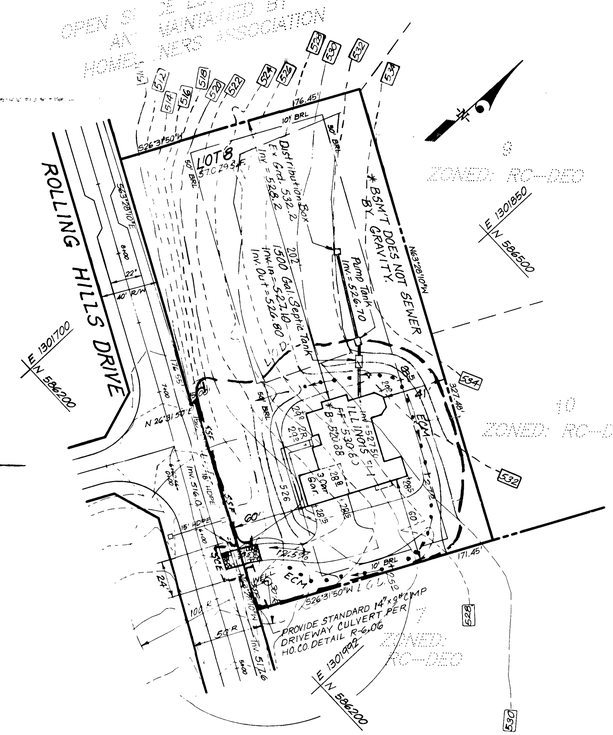
T:\forms\PERMIT.FRM

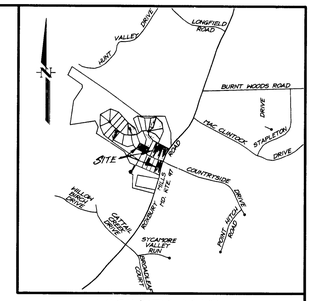
Rev. 5/17/00


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
E 1301992
N 586200
N 586500
LOT 6
LOT 5
40,716' S.F.
Distribution Box
Ex. Grd. = 529.5
Inv. = 526.5
1500 Gal. Septic Tank.
Inv. In = 526.9
Inv. Out = 526.6
Distribution Box.
Inv. = 527.0
1500 Gal Septic Tank
Inv. In = 527.4
Inv. Out = 527.1
VERMONT
FF = 540.1
B = 538.6
JEFFERSON
FF = 540.60
B = 530.64
Clean Out
CLEAN-OUT
L.O.D.
SCE
ROLLING HILLS DRIVE
PUBLIC DRAINAGE & UTILITY EASEMENT
PROVIDE STANDARD 14"x9" CMP DRIVEWAY CULVERT PER DETAIL R-6.06
ZONED: RC-DEO
1" = 50'
Approved Septic System Plan
Howard County Health Department
Signature
Date
11/12/02









VICINITY MAP
SCALE: 1" = 2000'

LEGEND

CONTOUR INTERVAL	2 FT.
EXISTING CONTOUR	540
PROPOSED CONTOUR	540
DIRECTION OF DRAINAGE	
WALK OUT BASEMENT	WOB
SPOT ELEVATION	+ 78.4
STABILIZED CONSTRUCTION ENTRANCE	SCE
EROSION CONTROL MATTING	ECM
SILT FENCE	SF
LIMIT OF DISTURBED AREA	LOD
SUPER SILT FENCE	SSF

OPEN SPACE LOT 36 OWNED AND MAINTAINED BY HOMEOWNERS ASSOCIATION

NON-BUILDABLE CONSERVATION PARCEL

RECEIVED
NOV 14 2002
HOWARD COUNTY HEALTH DEPT.

GENERAL NOTES

1. EXISTING TOPOGRAPHY WAS TAKEN FROM ROAD CONSTRUCTION PLANS PREPARED BY FISHER, COLLINS AND CARTER INC.
2. LENGTH OF TRENCHES TO BE DETERMINED AT TIME OF PERMIT ISSUANCE.
4. RECORDED PLAT NO. 14157
3. ZONE: RC-DEO

OWNER / DEVELOPER
SYNDACON PROPERTY, INC.
c/o BRS DEVELOPERS, LLC
8808 CENTER PARK DRIVE, SUITE 209
COLUMBIA, MD 21045

Approved Septic System Plan
Howard County Health Department
1"=50'
Signature
11/12/02
Date

Reviewed for HOWARD S.C.D.
All matters Technical Requirements
Signature
U.S. Natural Resources Conservation Service
Date

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

Approved 4/17/00

NO.	REVISIONS	DATE
10	Rev. HSE LOT 8, REV. INV. OF DISTRIBUTION BOX, 1' HIGHER	11-13-02
17	REV. USE \& GARD LOT 9, ADD FRONT PORCH MOVE HSE BACK 8'	10-21-02
16	REV. HSE \& GARD LOT 5, MOVED HSE BACK 10'	10-08-02
15	REV. HSE \& GARD LOT 5 FROM CHESHIRE TO JEFFERSON	7-23-02
14	Rev. Areaway on lot 5	3-25-02
13	Rev. Hse \& Grd lot 5 from Gen Box to Cheshire	3-14-02
12	Rev. Hse \& Grd lot 6 from Adams to Vermont	3-14-02
11	Rev. Ex. Grd lot 4	7-25-01
10	Rev hse \& grd Lot 8 fr Gen Box to Illinois Elt	5-31-01
9	Rev. Septic Inv. Elevations on lot 6 per Howard Co. Health Dept	9-12-00
8	Rev hse \& grd. Lot 6 from Gen Box to Adams	8-23-00
7	Update hse. model on lot 35 per revd. architecture	8-15-00
6	Rev hse \& grd lot 4	7-28-00
5	Rev. Hse \& Grd lot 4 from Gen Box to VERMONT	5-12-00
4	Rev. SDP. Per Recorded Howard County Rec. Plat	4-7-00
3	Moved house back lot 35 \& rev. per New Arch	2-29-00
2	Rev hse \& grd, lot 35, from Colorado to Big Montana	2-1-00
1	Rev. Hse \& Grd lot 35 from Gen. box to Colorado	1-6-00
NO.		DATE

DEVELOPER'S/BUILDER'S CERTIFICATE

"I/We certify that all development and construction will be done according to this plan of development and plan for sediment and erosion control and that all responsible personnel involved in the construction project will have a Certificate of Attendance at a Department of the Environment Approved Training Program for the Control of Sediment and Erosion before beginning the project. I also authorize periodic on-site inspection by the Howard Soil Conservation District or their authorized agents, as are deemed necessary."

WILLIAM LUCKENS — 8-13-99 DATE

ENGINEER'S CERTIFICATE

I hereby certify that this plan for Sediment and Erosion Control represents a practical and workable plan based on my personal knowledge of the site conditions and that it was prepared in accordance with the requirements of the Howard Soil Conservation District.

G. NELSON CLARK — 8-10-99 DATE

8-10-99

CLARK • FINEFROCK & SACKETT, INC.
ENGINEERS • PLANNERS • SURVEYORS
7135 MINSTREL WAY • COLUMBIA, MD 21045 • (410) 381-7500 BALT. • (301) 621-8100 WASH.

DESIGNED WK/P.C.	SITE DEVELOPMENT, & SEDIMENT AND EROSION CONTROL PLAN LOTS 4,5,6,8,10,11,13,14,18,28,32 & 35	SCALE 1" = 50'
DRAWN K.B.	CATTAIL RIDGE	DRAWING 1 of 3
CHECKED WK/P.C.	TAX MAP 21 PARCEL 228 FOURTH (4TH) ELECTION DISTRICT HOWARD COUNTY, MARYLAND	JOB NO. 99-050
DATE 8-10-99	FOR: ROSEMARK BUILDERS 13920 Baltimore Boulevard Laurel, MD 20707	FILE NO. 99-050X

(9) D:\99050

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 the said Department's approval.

Company Name: C. MAYES P+H Telephone #: 410 923 0510
Address: 63X CELL AVE
MILLERSVILLE, MD 21108

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer
License # and name of individual responsible for the field installation:
Name (Print): CHARLES MAYES License# 3226
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: MJR LAND LLC Telephone #: 301 953 3110
Subdivision: CATHEDRAL ESTATES Lot #: 85 Well Tag #: HO-77-2468
Site Address: 13005 ROLLING HILLS RD.
ELLICOTT CITY, MD 21038

Submersible Pump Data
Make: MAYES
Model #: 4" 10 GPM
Pump Capacity: 8 GPM
Well Yield: 12 GPM

Pitless Adapter
Make: ROMAC
Model#: RX10
Depth: 42" (36" min)
NSP approved: YES

Well Cap and Electric Conduit
Two piece watertight cap: YES
Screened, vented well cap:
Cap secured to casing: YES
Conduit min 18" B.G.: YES
Conduit secured to well cap: YES

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 173.4
Pressure gauge or 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: 72 (36" min)

House Connection
PVC sleeved to undisturbed soil at wall penetration: YES.
Approximate length of sleeve: 4'
Sleeve caulked and sealed properly: YES.

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.

Charles Mayes 8-11-03
Signature of company representative responsible for installation Date

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

Date Insp. Requested: 6/12/03 Date Insp. Approved: 6/12/03 (50) SRK

Inspection Item:
- 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 ✓

HD-215(Rev. 8/00)

APPLICATION

PERCOLATION TESTING

A 58993

P _____

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

DISTRICT _____

DATE 9-23-97

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 J. Thomas Sachse

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER c/o LDAD

ADDRESS 10565 Wilkinson Blvd Suite 215 PHONE 410-740-2122
Columbia, MD 21044

PROPERTY LOCATION:

SUBDIVISION Haan Rei' LOT NO. ~~#2~~ 4/5

ROAD AND DESCRIPTION Rte 97

TAXMAP 21 PARCEL # ~~13~~ 3

SIZE OF LOT 1 acre TYPE BLDG. SFD (38 LOTS)
(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

HD-216 (3/92)

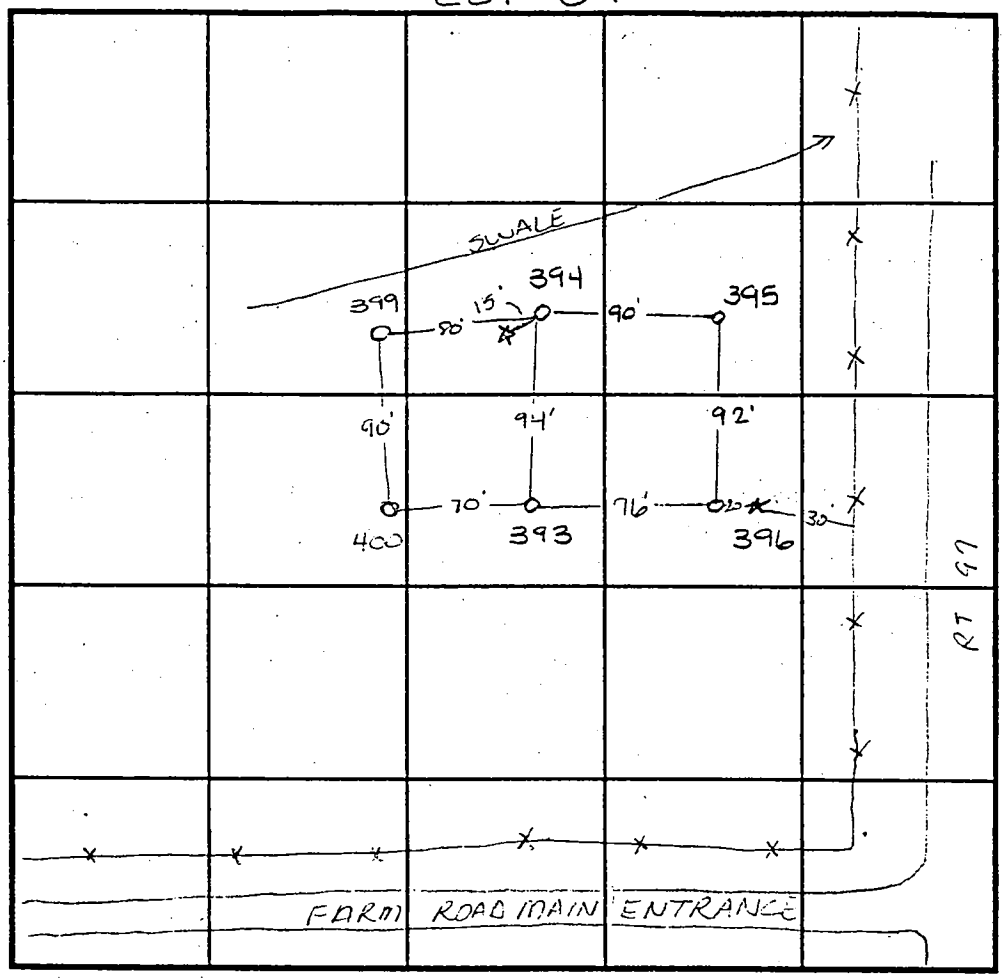
LOT 37

COUNTY #

SOIL PROFILE
395
0'
dark red brn SiCLm
3.0
lgt tan brn SiSaLm 10% Rx brags
10.0
20% decayed shale
12.0

393 396 394
lgt or brn SiCLm 5% Rx
4.0
lgt tan SaLm 10% very decayed saprolite
3.5

399
orange red SiCLm Strng. Struct
3.5
pink SiSaLm 15% decayed saprol & Rx mix
2.5



SOIL PROFILE
400
0'
orange brn SiCLm
2.0
pink SiSaLm
5.0
bright orange SiLm 20% Rx - vcl - or - banded blkfaces
12.0

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
10-31-97	395	3.0 / V12.0	11:19:30	11:24	11:24	11:34	10min
		6.0 / V12.0	11:19	11:20:30	11:20:30	11:24	3½min
	396	4.5 / V13.5	11:27	11:30	11:30	11:34:30	4min
	394	6.0 / V12.0	11:33:15	11:38:30	11:38:30	11:46	7½min
		4.0 / V12.0	11:38	>30 min	—	—	slow
	393	Visual	11.5 - See profile		—		OK
	400	3.5 / V12.0	11:47	11:50	11:50	11:54	4min
	399	4.0 / V12.5	11:56	11:59	11:59	12:04	5min

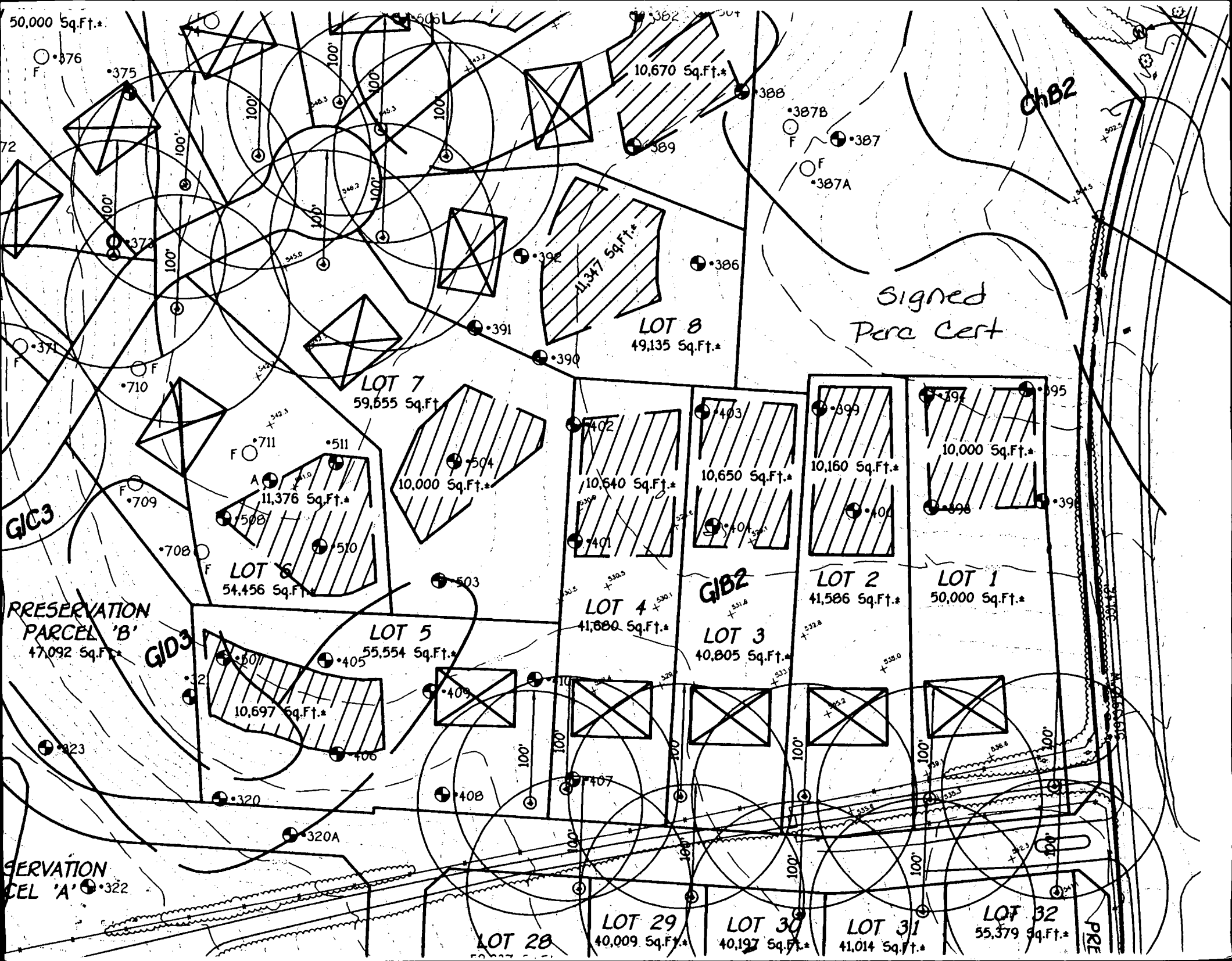
REMARKS * Hole not seen - dug w/a HD present

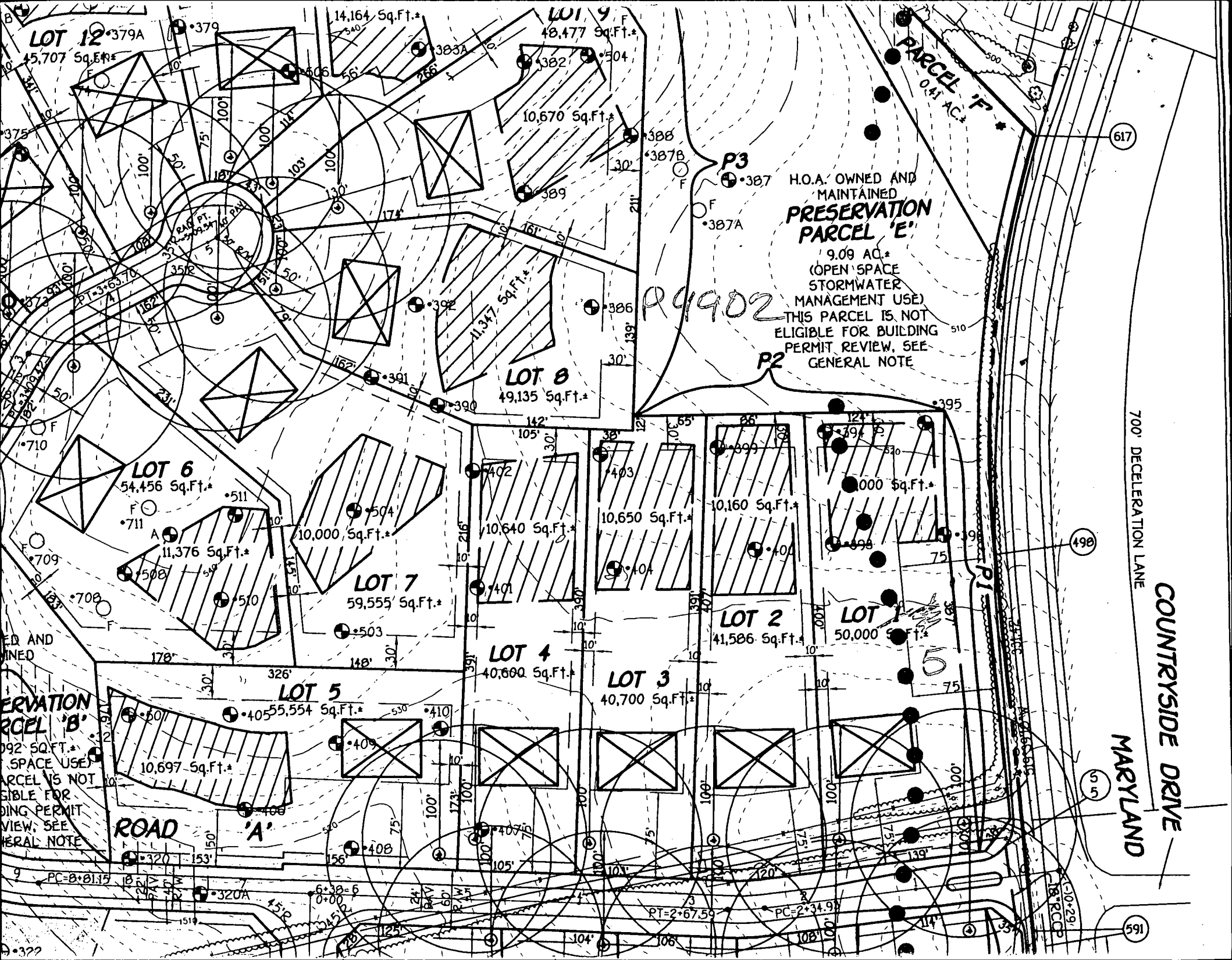
TYPE OF SOIL

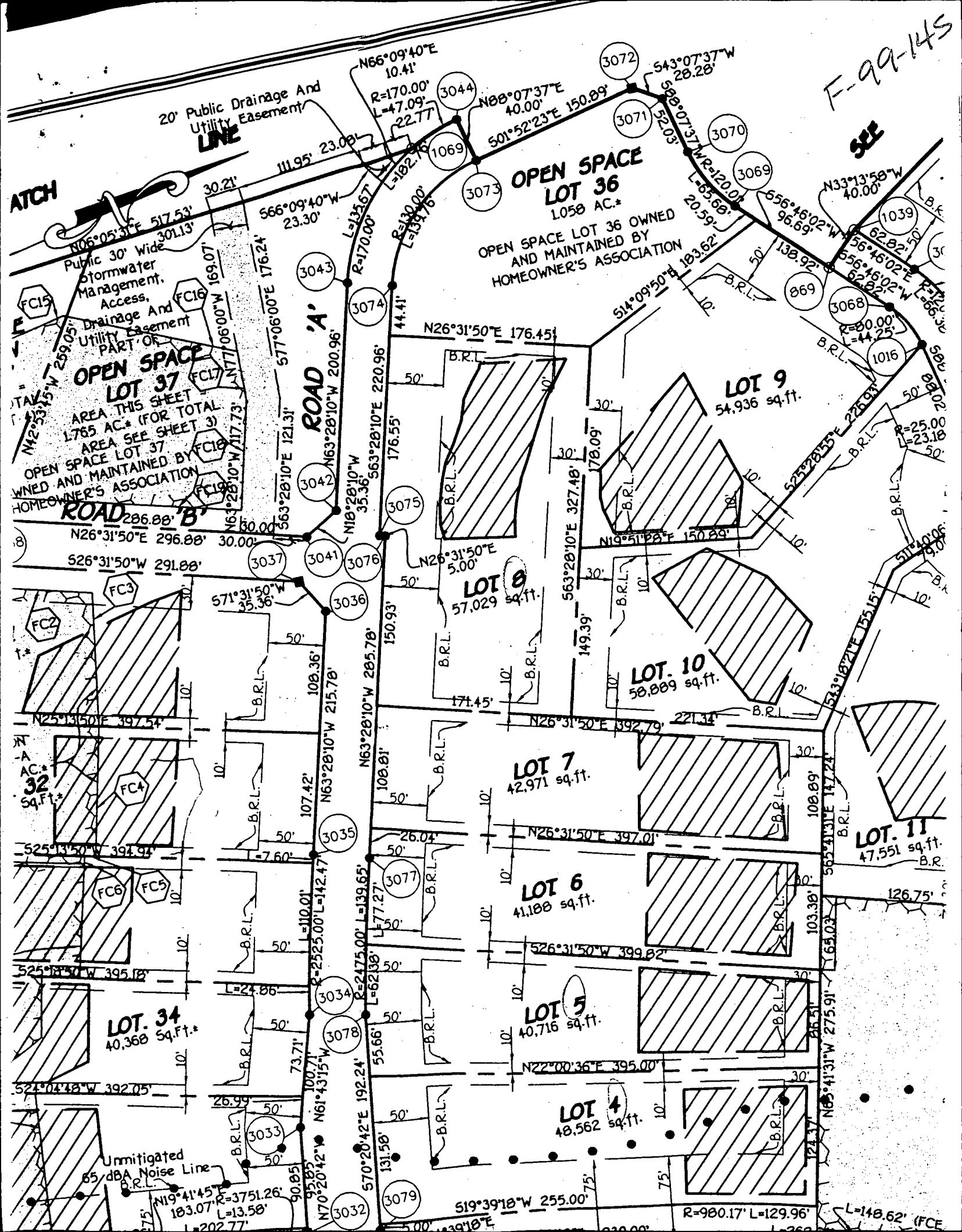
TESTED BY Amy Merrillen ALSO PRESENT

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME TRENCH WIDTH

INLET DEPTH MAXIMUM BOTTOM DEPTH SQ. FT/BEDROOM


50,000 Sq.Ft.±
10,670 Sq.Ft.±
11,347 Sq.Ft.±
LOT 8
49,135 Sq.Ft.±
Signed
Para Cert
LOT 7
59,655 Sq.Ft.±
10,000 Sq.Ft.±
11,376 Sq.Ft.±
LOT 6
54,456 Sq.Ft.±
10,640 Sq.Ft.±
10,650 Sq.Ft.±
10,160 Sq.Ft.±
10,000 Sq.Ft.±
LOT 4
41,680 Sq.Ft.±
LOT 3
40,805 Sq.Ft.±
LOT 2
41,586 Sq.Ft.±
LOT 1
50,000 Sq.Ft.±
PRESERVATION
PARCEL 'B'
47,092 Sq.Ft.±
LOT 5
55,554 Sq.Ft.±
10,697 Sq.Ft.±
LOT 28
LOT 29
40,009 Sq.Ft.±
LOT 30
40,197 Sq.Ft.±
LOT 31
41,014 Sq.Ft.±
LOT 32
55,379 Sq.Ft.±
GIC3
GIB2
GID3
ChB2
100'


LOT 12
45,707 Sq.Ft.±
LOT 9
48,477 Sq.Ft.±
14,164 Sq.Ft.±
10,670 Sq.Ft.±
PARCEL 'F'
0.41 AC.±
P3
P2
P1
H.O.A. OWNED AND MAINTAINED
PRESERVATION PARCEL 'E'
9.09 AC.±
(OPEN SPACE STORMWATER MANAGEMENT USE)
THIS PARCEL IS NOT ELIGIBLE FOR BUILDING PERMIT REVIEW, SEE GENERAL NOTE
P9902
LOT 8
49,135 Sq.Ft.±
11,347 Sq.Ft.±
LOT 6
54,456 Sq.Ft.±
11,376 Sq.Ft.±
10,000 Sq.Ft.±
LOT 7
59,555 Sq.Ft.±
10,640 Sq.Ft.±
10,650 Sq.Ft.±
10,160 Sq.Ft.±
LOT 2
41,586 Sq.Ft.±
LOT 1
50,000 Sq.Ft.±
LOT 4
40,600 Sq.Ft.±
LOT 3
40,700 Sq.Ft.±
LOT 5
55,554 Sq.Ft.±
10,697 Sq.Ft.±
ROAD 'A'
700' DECELERATION LANE
COUNTRYSIDE DRIVE
MARYLAND
617
498
591
55


F-99-145
SEE
ATCH
LINE
20' Public Drainage And Utility Easement
Public 30' Wide Stormwater Management, Access, Drainage And Utility Easement
PART OF
OPEN SPACE LOT 37
AREA THIS SHEET = 1.765 AC.± (FOR TOTAL AREA SEE SHEET 3)
OPEN SPACE LOT 37 OWNED AND MAINTAINED BY HOMEOWNER'S ASSOCIATION
OPEN SPACE LOT 36
1.058 AC.±
OPEN SPACE LOT 36 OWNED AND MAINTAINED BY HOMEOWNER'S ASSOCIATION
ROAD 'A'
ROAD 'B'
LOT 9
54,936 sq.ft.
LOT 8
57,029 sq.ft.
LOT 10
58,889 sq.ft.
LOT 7
42,971 sq.ft.
LOT 11
47,551 sq.ft.
LOT 6
41,188 sq.ft.
LOT 5
40,716 sq.ft.
LOT 4
48,562 sq.ft.
LOT 34
40,368 Sq.Ft.±
32 Sq.Ft.±
Unmitigated 65 dBA Noise Line
B.R.L.
FC1
FC2
FC3
FC4
FC5
FC6
FC15
FC16
FC17
FC18
FC19
3032
3033
3034
3035
3036
3037
3041
3042
3043
3044
3068
3069
3070
3071
3072
3073
3074
3075
3076
3077
3078
3079
869
1016
1039
1069
N66°09'40"E 10.41'
R=170.00' L=47.09' 22.77'
N88°07'37"E 40.00'
S43°07'37"W 28.28'
S88°07'37"W 52.03'
R=120.00' L=65.68' 20.59'
N33°13'58"W 40.00'
S56°46'02"W 96.69'
S56°46'02"E 62.82'
S56°46'02"W 62.82'
R=80.00' L=44.25'
S14°09'50"E 183.62'
S01°52'23"E 150.89'
N66°09'40"W 23.30'
N05°05'31"E 517.53'
301.13'
111.95'
23.09'
30.21'
R=170.00' L=135.67'
R=130.00' L=139.16'
N26°31'50"E 176.45'
N63°28'10"W 200.96'
S63°28'10"E 220.96'
176.55'
44.41'
N77°06'00"W 169.07'
S77°06'00"E 176.24'
S63°28'10"E 121.31'
N63°28'10"W 117.73'
N42°53'15"W 259.05'
N26°31'50"E 296.88'
30.00'
286.88'
N18°28'10"W 35.36'
S26°31'50"W 291.88'
S71°31'50"W 35.36'
N26°31'50"E 5.00'
S63°28'10"E 327.48'
178.09'
30'
S25°28'55"E 225.93'
R=25.00 L=23.18
N19°51'28"E 150.89'
S11°40'05"E 79.0
S43°18'21"E 155.15'
N26°31'50"E 392.79'
221.34'
171.45'
150.93'
149.39'
N63°28'10"W 285.78'
108.81'
108.89'
S65°41'31"E 147.24'
N26°31'50"E 397.01'
26.04'
S25°13'50"W 394.94'
7.60'
N25°13'50"E 397.54'
108.36'
N63°28'10"W 215.78'
107.42'
S26°31'50"W 399.82'
103.38'
65.03'
126.75'
S25°13'50"W 395.18'
L=110.01' R=2525.00' L=142.47'
L=77.27' L=139.65'
R=2475.00' L=62.38'
L=24.86'
N22°00'36"E 395.00'
86.51'
N65°41'31"W 275.91'
S21°04'48"W 392.05'
26.99'
73.71'
100.71'
N61°43'15"W
55.66'
192.24'
N70°20'42"E
95.85'
90.85'
N19°41'45"E R=3751.26' 183.07' L=13.58'
L=202.77'
S70°20'42"W 131.58'
S19°39'18"W 255.00'
R=980.17' L=129.96'
L=148.62' (FCE

STATE OF MARYLAND
WELL COMPLETION REPORT

FILL IN THIS FORM COMPLETELY
PLEASE TYPE

SEQUENCE NO. (MDE USE ONLY): 945

THIS REPORT MUST BE SUBMITTED AFTER WELL IS COMPLETED. ✓

COUNTY NUMBER: A58993 E

ST/CO USE ONLY
DATE Received MM DD YY

DATE WELL COMPLETED: MM 09 DD 24 YY 95

Depth of Well: 165 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL": HO - 94 - 2408

OWNER: BRS Developers (last name)
STREET OR RFD: Rolling Hills DR (first name) TOWN: Glenwood
SUBDIVISION: Cattail Ridge SECTION: LOT: 5

WELL LOG
Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (Use additional sheets if needed)	FEET FROM	FEET TO	check if water bearing
Top Soil	0	2	
Sandy	2	30	
Sand Stone	30	35	
MICKA	35	38	
Sand Stone	38	40	✓
MICKA	40	70	
Sand Stone	70	75	✓
MICKA	75	165	

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED: yes [Y] no [N]

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.: MSD116
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION): Ralph Mayer

LIC. NO.: MSD116
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee): Ralph E. Mayer

GROUTING RECORD
WELL HAS BEEN GROUTED (Circle Appropriate Box): yes [Y] no [N]
TYPE OF GROUTING MATERIAL (Circle one)
CEMENT [CM] BENTONITE CLAY [BC]
NO. OF BAGS: 9 NO. OF POUNDS: 500
GALLONS OF WATER: 54
DEPTH OF GROUT SEAL (to nearest foot)
from: 0 ft. (TOP) to: 30+ ft. (BOTTOM)
(enter 0 if from surface)

CASING RECORD
(casing types insert appropriate code below)
[ST] STEEL [CO] CONCRETE [PL] PLASTIC [OT] OTHER

MAIN CASING TYPE: St
Nominal diameter top (main) casing (nearest inch): 6
Total depth of main casing (nearest foot): 44

OTHER CASING (if used)

EACH CASING	diameter inch	depth (feet) from	to

SCREEN RECORD
(screen type or open hole insert appropriate code below)
[ST] STEEL [BR] BRASS BRONZE [HO] OPEN HOLE [PL] PLASTIC [OT] OTHER

C 2

EACH SCREEN	DEPTH (nearest ft.)		
1	HO	42	165
2			
3			

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

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

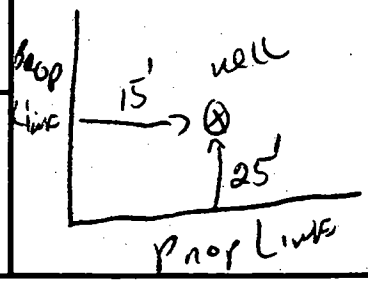
MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)
T (E.R.O.S.) W Q
TELESCOPE CASING | LOG INDICATOR | OTHER DATA

C 3

PUMPING TEST
HOURS PUMPED (nearest hour): 3
PUMPING RATE (gal. per min.): 12.
METHOD USED TO MEASURE PUMPING RATE: Bucket
WATER LEVEL (distance from land surface)
BEFORE PUMPING: 35 ft.
WHEN PUMPING: 57 ft.
TYPE OF PUMP USED (for test)
[A] air [P] piston [T] turbine
[C] centrifugal [R] rotary [O] other (describe below)
[J] jet [S] submersible

PUMP INSTALLED
DRILLER INSTALLED PUMP (CIRCLE) (YES or NO): YES (NO)
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)
PUMP HORSE POWER
PUMP COLUMN LENGTH (nearest ft.)
CASING HEIGHT (circle appropriate box and enter casing height)
[+] above [−] below LAND SURFACE
2 (nearest) foot

LOCATION OF WELL ON LOT
SHOW PERMANENT STRUCTURES AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)



DENV-CR97 ② COUNTY

EMERGENCY/TEMP NO. IF ANY

B 1 | 1936 | SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND
PERMIT TO DRILL WELL
please print or type

STATE PERMIT NUMBER: HO-94-2408

fill in this form completely

Date Received (APA): 083099

OWNER INFORMATION

BRS Developens LLC
Last Name / Owner / First Name

8808 Centre Park Dr. Suite 209
Street or RFD

Columbia MD 21045
Town / State / Zip

DRILLER INFORMATION

Ralf Maywe MSD 116
Driller's Name / License No.

Ralph Maywe well Drilling
Firm Name

9120 Brown Church Rd Mt Airy
Address

Ralph Maywe 8-25-99
Signature / Date

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)

- (D) DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
- [F] FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION
- [I] INDUSTRIAL, COMMERICIAL, DEWATERING
- [P] PUBLIC WATER SUPPLY WELL
- [T] TEST, OBSERVATION, MONITORING
- [G] GEO-THERMAL

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

REPLACEMENT OR DEEPENED 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
- [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 DEEPEN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENED (IF AVAILABLE)

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

APPROP. PERMIT NUMBER: / GAP

PERMIT No. HO-94-2408

B 3 **LOCATION OF WELL**

COUNTY: Howard

SUBDIVISION: Cattail Ridge

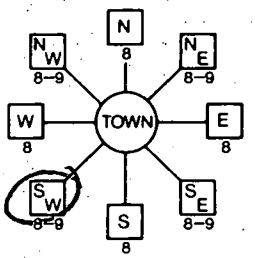
SECTION: - LOT: 5

NEAREST TOWN: Glenwood

MILES FROM TOWN (enter 0 if in town): I M I

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



NEAR WHAT ROAD: ~~Rt 32~~ Rolling Hills Dr

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

DISTANCE FROM ROAD: 30 ENTER FT OR MI: 4

TAX MAP: 21 BLK: ____ PARCEL: 3

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

Howard Co A58993E
COUNTY NAME / COUNTY NO.

STATE SIGNATURE: _____ INSERT S

DATE ISSUED: 090799 Amy W. Mell CO SIGNATURE: 090900 EXP. DATE

NORTH GRID: 525 000 EAST GRID: 790 000

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

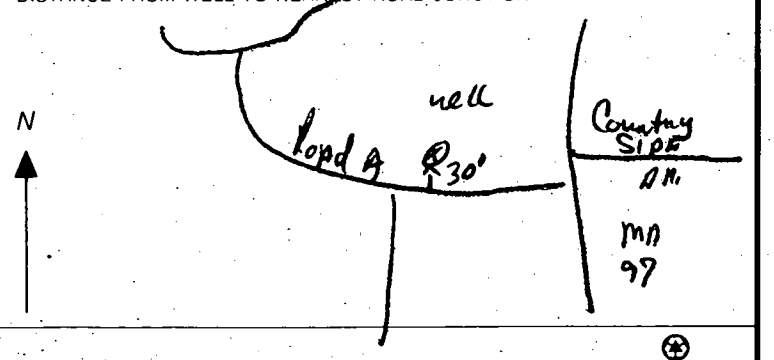
E 750

N 525

9/24/99 # 94-2408
44' casing
30' open
9 Bags. Not
(X) present for
grout BB

000
000

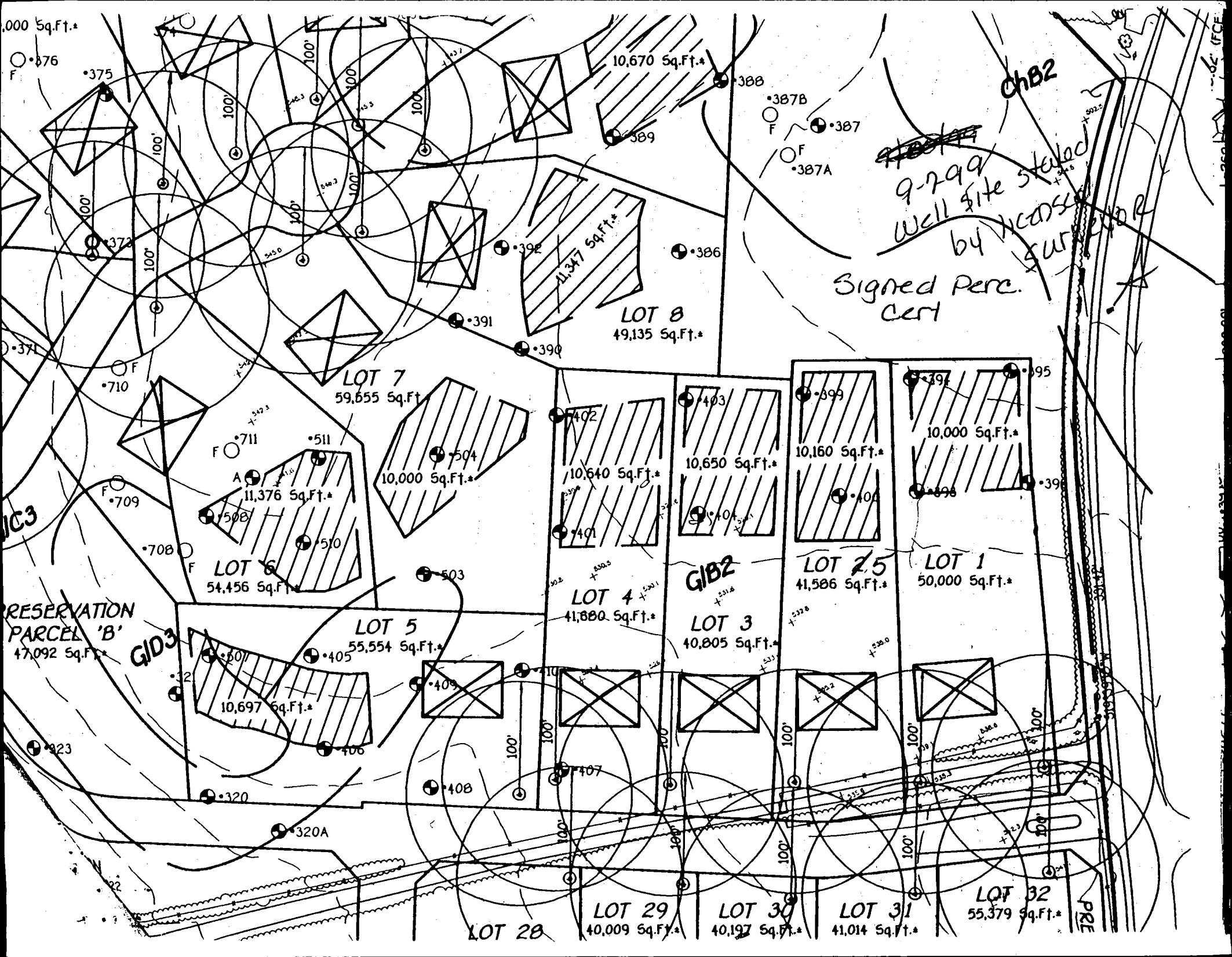
DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION

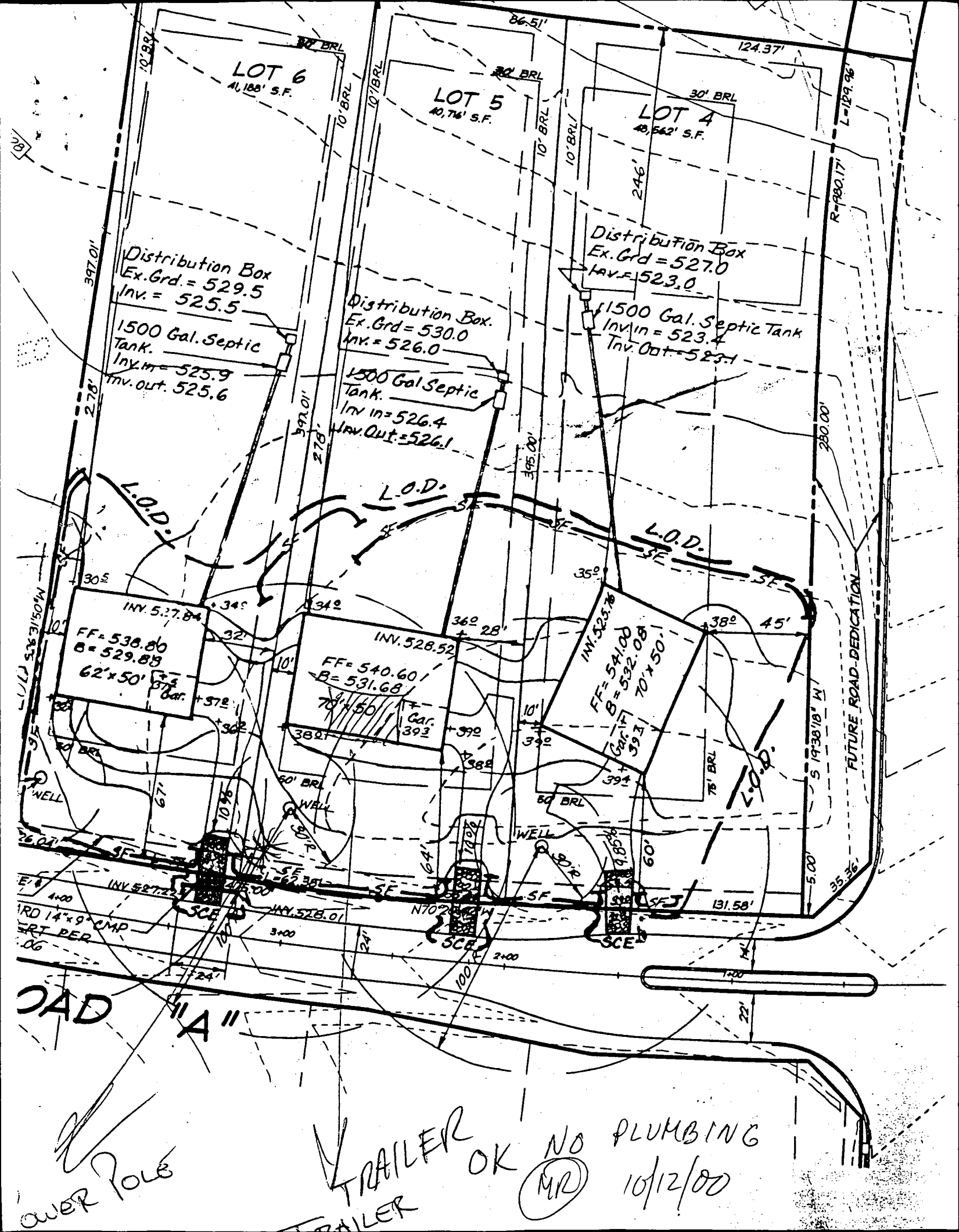


SPECIAL CONDITIONS
NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -

DENV-Permit 97

② COUNTY


10,670 Sq.Ft.±
CHB2
9-799 well site staked by licensed surveyor
Signed Perc. Cert
LOT 8
49,135 Sq.Ft.±
11,347 Sq.Ft.±
LOT 7
59,655 Sq.Ft.±
10,000 Sq.Ft.±
11,376 Sq.Ft.±
LOT 6
54,456 Sq.Ft.±
10,640 Sq.Ft.±
10,650 Sq.Ft.±
10,160 Sq.Ft.±
10,000 Sq.Ft.±
LOT 4
41,880 Sq.Ft.±
LOT 3
40,805 Sq.Ft.±
LOT 2.5
41,586 Sq.Ft.±
LOT 1
50,000 Sq.Ft.±
GIB2
RESERVATION PARCEL 'B'
47,092 Sq.Ft.±
GID3
LOT 5
55,554 Sq.Ft.±
10,697 Sq.Ft.±
LOT 28
LOT 29
40,009 Sq.Ft.±
LOT 30
40,197 Sq.Ft.±
LOT 31
41,014 Sq.Ft.±
LOT 32
55,379 Sq.Ft.±



POWER POLE

TRAILER OK NO PLUMBING

MR 10/12/00

TRAILER

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

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER B206627

Building Address 15008 Rolling Hills Dr. Glenwood MD 21738
Suite/Apt. #: / SDP/WP/Petition #:
Census Tract 6040 Subdivision Cattail Ridge
Section N/A Area N/A Lot 5
Tax Map 21 Parcel 228 Grid 3
Zoning RC-DEO Map Coordinates 9A7 Lot size 1 Acre

Property Owner's Name M.T. Rose
Address 13920 Baltimore Blvd
City Laurel State MD Zip Code 20707
Home Phone — Work Phone 301 953-3110
Applicant's Name & Mailing Address, (if other than stated hereon):
Phone Fax

Existing Use Vacant Lot
Proposed Use Construction Trailer
Estimated Construction Cost $ 60.00
Description of Work 30' x 12'
Temp Power to Trailer

Contractor Company Rose Mark Design Build
Contact Person Peter Ohlmeiser
Address 13920 Baltimore Blvd
City Laurel State MD Zip Code 20707
License No. CTR07522
Phone 240-882-1069 Fax

Occupant or Tenant Rosemark D&B
Contact Name Contractor
Address
City State Zip Code
Phone Fax

Engineer or Architect Company Clark, Flintrock & Associates
Contact Person Larry Jr. Survey
Address 7135 Minstrel Way
City Columbia MD State MD Zip Code 21045
Phone 410-381-7500 Fax

BUILDING DESCRIPTION - *COMMERCIAL*

Building Characteristics
Height:
No. of stories:
Gross area, sq. ft. per floor:
Use group:
Construction type:
____ Reinforced Concrete
____ Structural Steel
____ Masonry
____ Wood Frame
____ State Certified Modular

Utilities
Water Supply:
____ Public
____ Private
Sewage Disposal:
____ Public
____ Private
Electric Yes X No ☐
Gas Yes ☐ No ☐
Heating System:
Electric ☐ Oil ☐
Natural Gas ☐
Propane Gas ☐
Sprinkler system: N/A ☐
____ Full
____ Partial
____ Other Suppression
____ # of Heads

BUILDING DESCRIPTION - *RESIDENTIAL*

Building Characteristics
SF Dwelling ☐ SF Townhouse ☐
Depth Width
1st floor:
2nd floor:
Basement:
Finished Basement ☐ Unfinished Basement ☐
Crawl space ☐ Slab on Grade ☐
No. of Bedrooms
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

Utilities
Water Supply:
____ Public
____ Private
Sewage Disposal:
____ Public
____ Private
Electric Yes ☐ No ☐
Gas Yes ☐ No ☐
Heating System:
Electric ☐ Oil ☐
Natural Gas ☐
Propane Gas ☐
Sprinkler system: N/A ☐
____ NFPA #13D
____ NFPA #13R
____ Other:

THE 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 THERETO; (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 PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

P. Ohlmeiser
Applicant's Signature

Peter Ohlmeiser
Print Name

Superintendent
Title/Company

9.26.00
Date

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	10/2/00	M. Kaltenbach
Fire Protection		

Is Sediment Control approval required prior to issuance? YES ☐ NO ☐

CONTINGENCY CONSTRUCTION START: ☐
ONE STOP SHOP: ☐

DPZ SETBACK INFORMATION
Front:
Rear:
Side:
Side St.:
All minimum setbacks met? YES ☐ NO ☐
Is Entrance Permit required? YES ☐ NO ☐
Historic District? YES ☐ NO ☐
Lot Coverage for NewTown Zone
SDP/Red-line approval date

PROPERTY ID#: 42207

Filing fee	$ 60
Permit fee	$
Excise tax	$
Sub-total paid	$
Add'l permit fee	$
TOTAL FEES	$
Balance due	$
Check	# 1011
Validation	# 38527

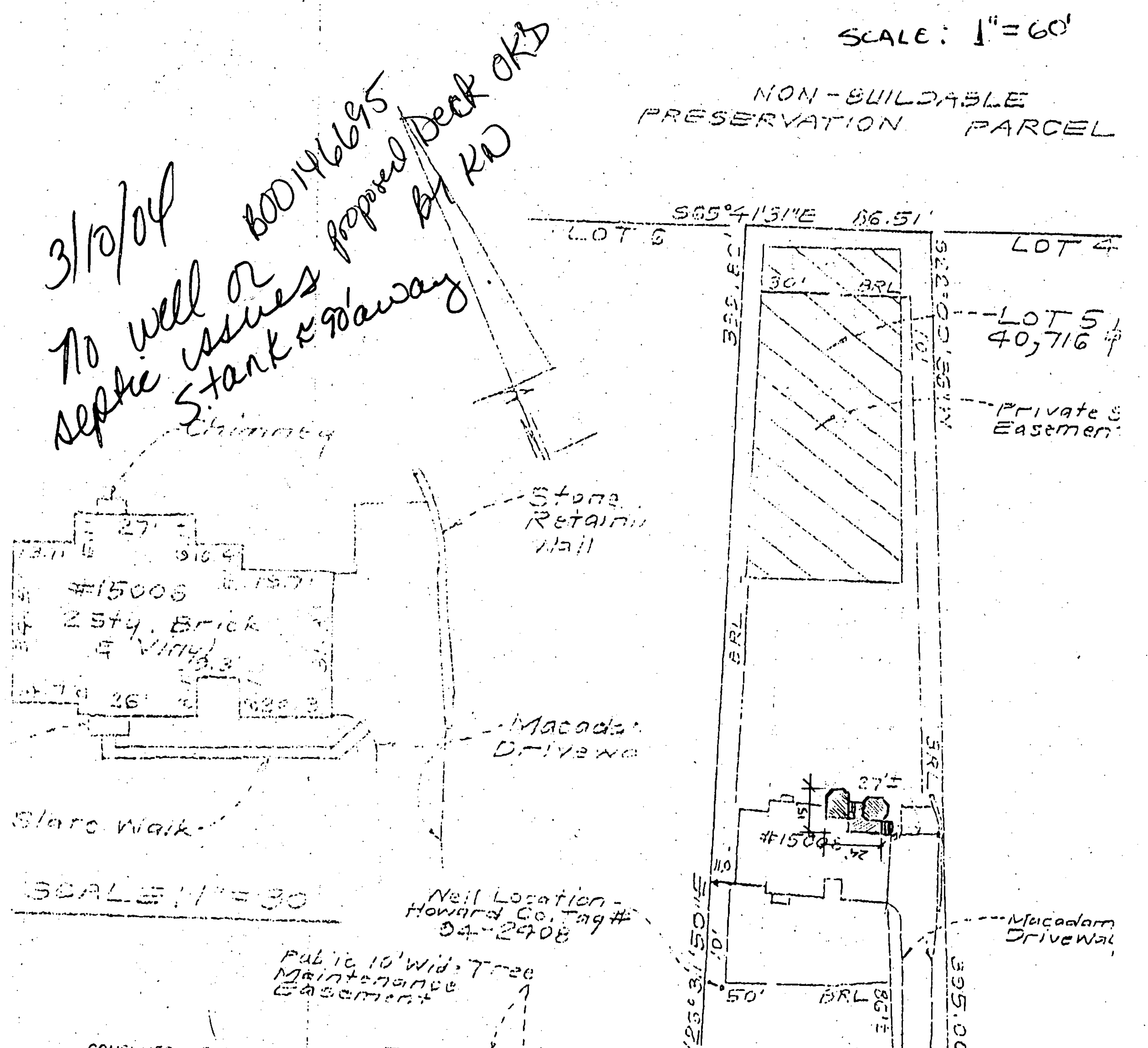
Accepted by

Distribution of Copies- White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA

a:\permit.frm

Rev. 10/15/98

The plot 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 24004400208, Panel 20 of 45, dated December 4, 1986



CONSUMER INFORMATION

This plat is of benefit to the consumer only insofar as it is required by a lender or a title insurance company or its agent in connection with contemplated transfer, financing or refinancing purposes;

This plat is not to be relied upon for the establishment or location of fences, garages, buildings or other existing or future structures;

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.

Plat Reference: PLAT No. 14157

CFS CLARK • FINEFROCK & SACKETT, ENGINEERS • PLANNERS • SURVEYORS

7135 MINSTREL WAY • COLUMBIA, MD 21045 • (410) 381-7500 BALT. • (301) 621-

DESIGNED	LOCATION DRAWING 15008 ROLLING HILLS DRIVE LOT 5 CATTAIL RIDGE LOTS 4 THRU 37 AND PARCELS 'A' THRU 'C' (A RESUBDIVISION OF "CATTAIL RIDGE", LOTS 1 THRU 3, PLAT NO. 13626 AND THE RESIDUE OF SYNDACON PROPERTY, INC., LIBER NO 4228 AT FOLIO 461) FOURTH ELECTION DISTRICT HOWARD COUNTY, MARYLAND
DRAWN RWC	
CHECKED PAS	
DATE 9-4-03	

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.

9-4-03
DATE

STATE OF MARYLAND
PROPERTY LINE SURVEYOR