

# PERMIT

05-413435

## SEWAGE DISPOSAL SYSTEM

### DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 590070

A 40789

DISTRICT 5th

#### HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

XXXXXXXXXX

313-2640

DATE 10/9/97

DATE SYSTEM APPROVED 11/14/97

INSPECTOR DK5

INC-1124

Fogle's Septic Clean, Inc.

IS PERMITTED TO INSTALL ☒ ALTER ☐

ADDRESS 558 Obrecht Road Sykesville, Maryland 21784

PHONE (410) 795-5674

SUBDIVISION The Warfields LOT 25 ROAD 14830 Sapling Way

PROPERTY OWNER Brian Colguitt

#### BUILDING PERMIT SIGNED

ADDRESS

#### AND RETURNED

SEPTIC TANK CAPACITY 1250 GALLONS 11/25/03 B00148169-46 PROpane TANK

NUMBER OF BEDROOMS 4

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 280

TRENCHES - Trench to be 3 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 6 feet below original grade. Effective area begins at 4 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Starting at the intersection of the 320.16' and 310.32' lot lines, place the distribution box 55 feet down the 310.32' lot line and 150 feet off this same lot line as seen when facing the lot from Sapling Way. Run trenches on contour towards the right side of the lot.

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

OK KM 6-17-97

PLANS APPROVED BY Donna K. Soe

DATE 06/16/97

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

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

HD-260(6-90)

\*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

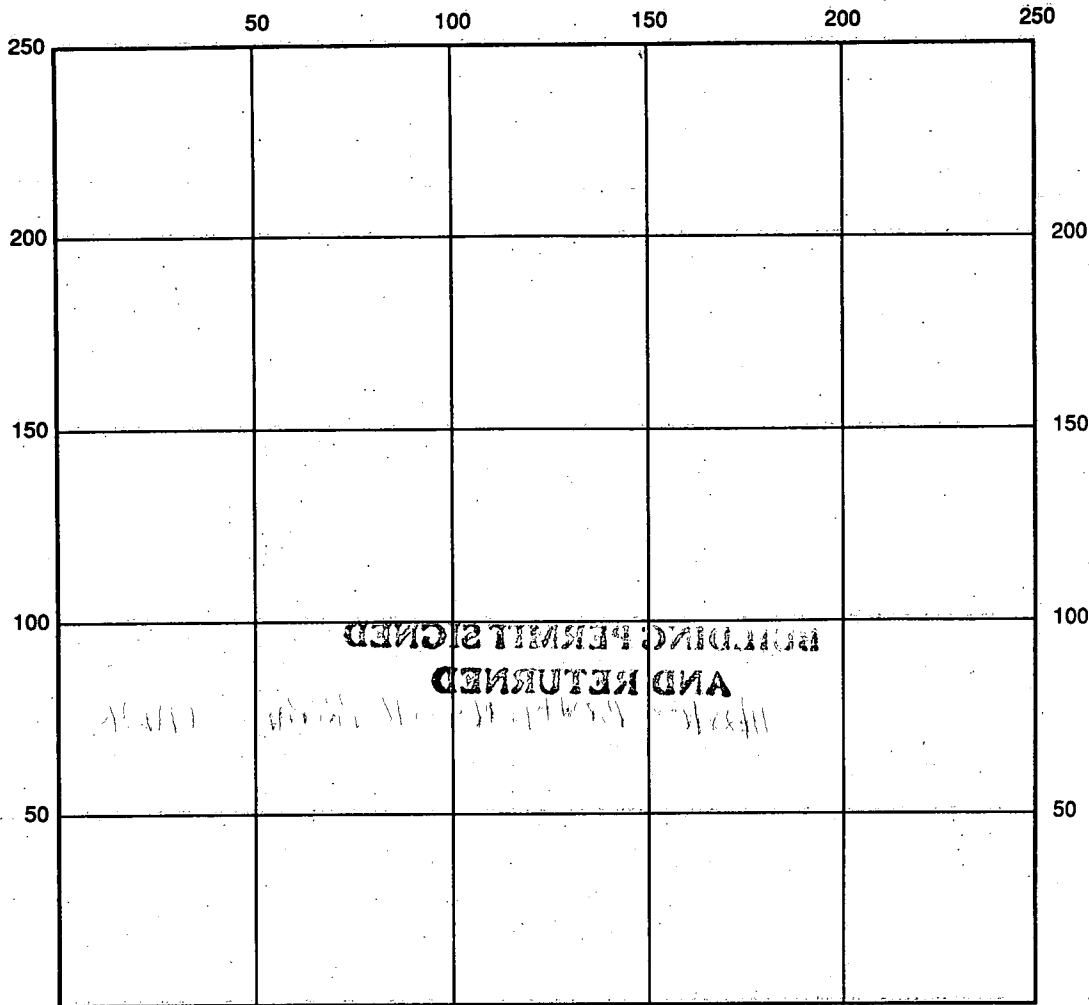
PERMIT SIGNED

AND RETURNED 11-5-97

Serial # B00108663

diep

A 440789



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL \_\_\_\_\_ CLEANOUTS \_\_\_\_\_

DISTRIBUTION BOX LEVEL \_\_\_\_\_

DRAIN FIELD/TITLE DEPTH \_\_\_\_\_ FT. TRENCH WIDTH \_\_\_\_\_ FT. INLET DEPTH \_\_\_\_\_ FT.

EFFECTIVE GRAVEL DEPTH \_\_\_\_\_ FT. TOTAL LENGTH \_\_\_\_\_ FT.

NUMBER OF TRENCHES \_\_\_\_\_ ONE SIDEWALL/BOTTOM AREA \_\_\_\_\_ SQ. FT.

DRYWALL INSIDE DIAMETER \_\_\_\_\_ FT. EFFECTIVE DEPTH BELOW INLET \_\_\_\_\_ FT.

ABSORBENT AREA \_\_\_\_\_ SQ. FT.

REMARKS: 11/14/97± spoke to the builder, who inquired about the well on this property. I found that the septic system had been installed, but we had no record. I contacted Foale's, who explained that the system was installed 10/10-10/11/97. Attached please find contractor's account of installation.

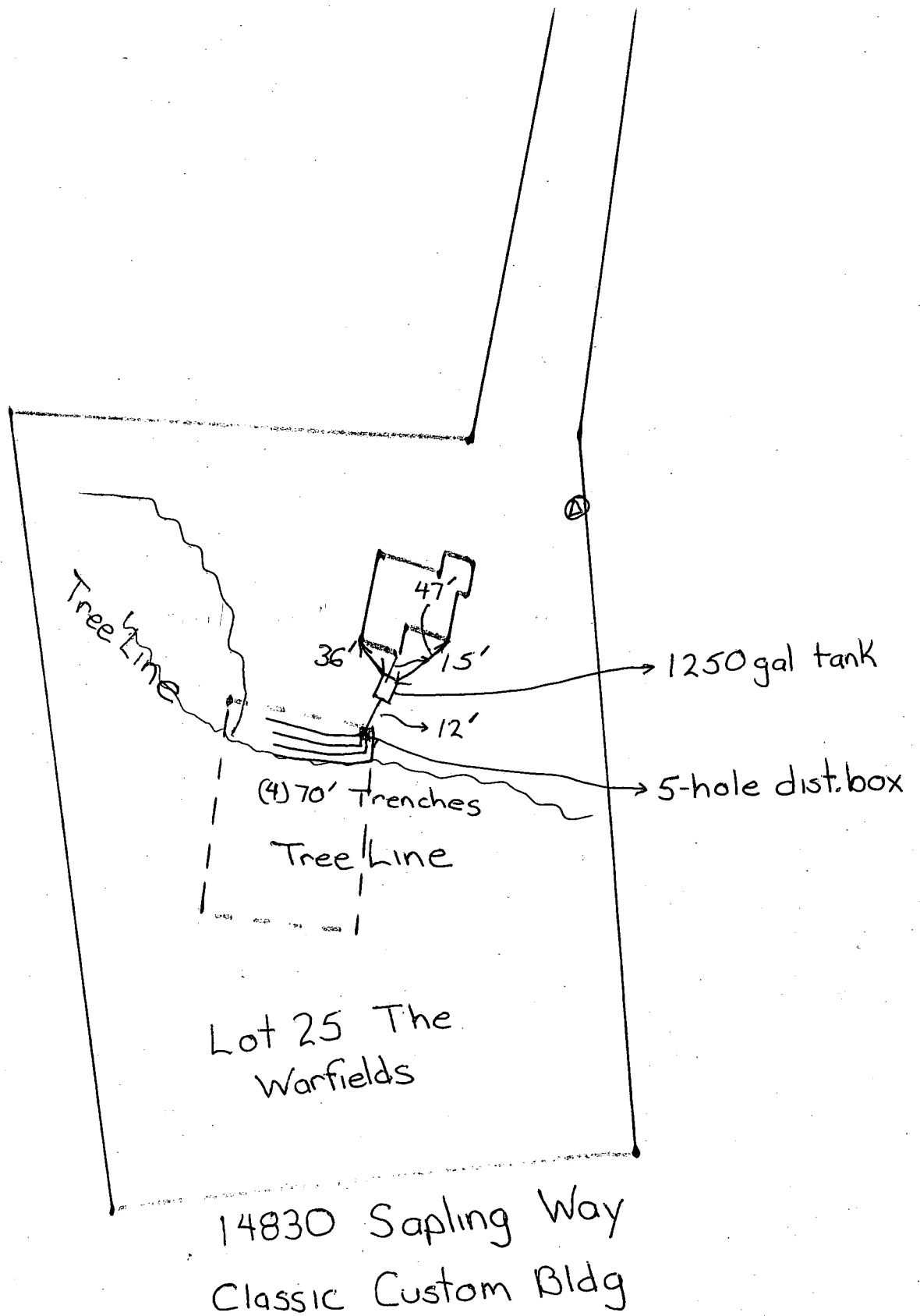
DATE SYSTEM APPROVED 11/14/97 INSPECTOR DOUGLAS JOE

2/3/98

IN GROUND POOL PROPOSED  
15' FROM SOA/INSTALLEE SEPTIC,  
REQUEST THAT 20' MINIMUM  
SEPERATION BE MAINTAINED

APPLICATION WILL BE  
SUBMITTED AFTER REVISED  
BY ANTHONY POOLS

GS



# APPLICATION

PERCOLATION TESTING

A 40789

P \_\_\_\_\_

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

DISTRICT 5th

DATE 12/1/87

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 Kennard Warfield Jr. Brian Colquitt

ADDRESS 14663 Triadelphia Rd PHONE 442-2337

PROSPECTIVE BUYER N/A

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

PROPERTY LOCATION:

SUBDIVISION ~~Sapling Range~~ THE WARFIELDS LOT NO. 24 LOT 25 Preliminary

ROAD AND DESCRIPTION 14600 Triadelphia Rd just west of Howard Rd

(14830 Sapling Way)

TAX MAP 27 PARCEL # 56

SIZE OF LOT 3 acres TYPE BLDG. SFD - 4Brm  
(SINGLE FAMILY DWELLING OR COMMERCIAL)

BLDG. PERMIT SIGNED

AND RETURNED 6-16-92

Serial # B7110568

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. Myrdal Reil  
(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

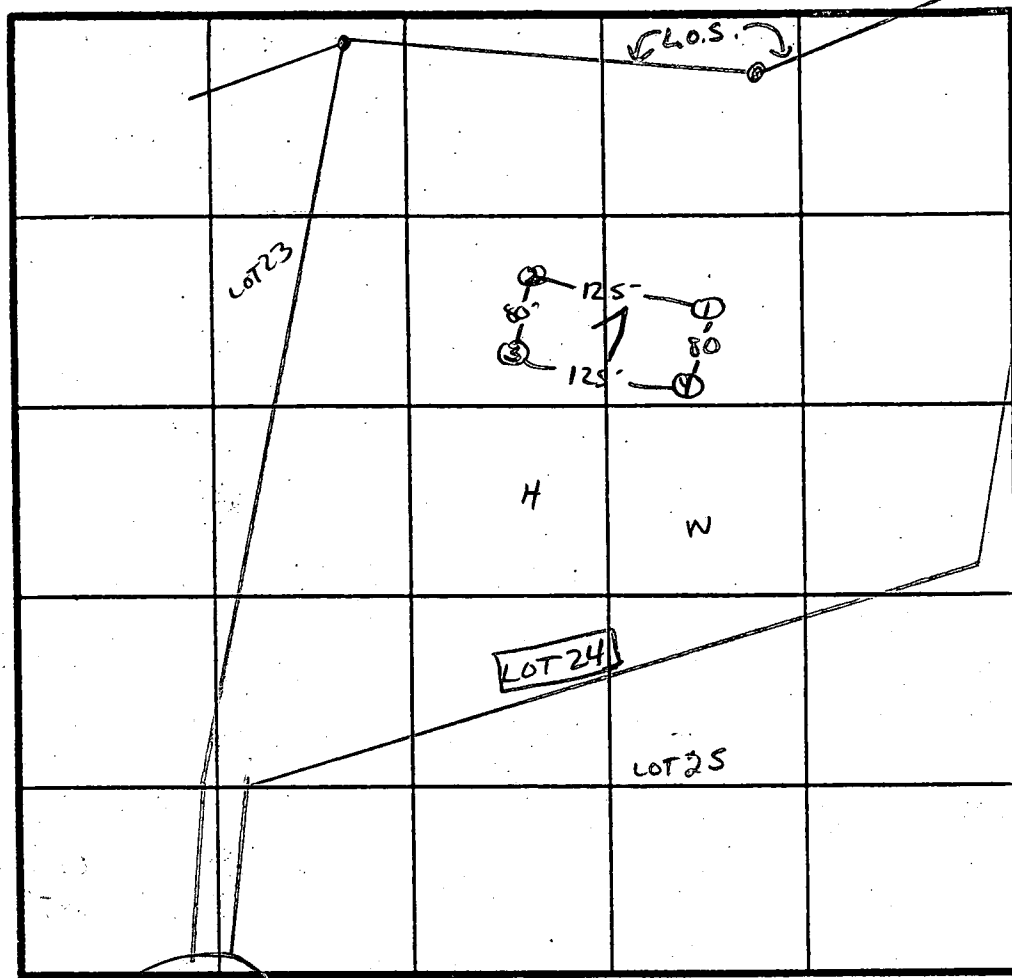
HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING 2-17-88 Due SATISFACTORY - AGED FOR RAT SMO

# THIS IS NOT A PERMIT

A1-3

RED BR. Silt clay lim. 25-30% FRAGS	RED BR. → Yell. BR. Silt WARM 25-40% FRAGS micaceous
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LOT 30

X Perc  
12 min  
210 ALBA  
Inlet 4"  
Bottom 6"

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

↓ TO TRIANGLE Rd.

[illegible]

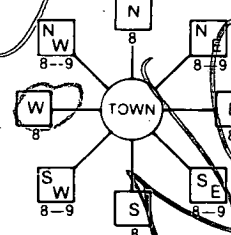
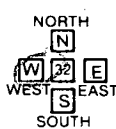
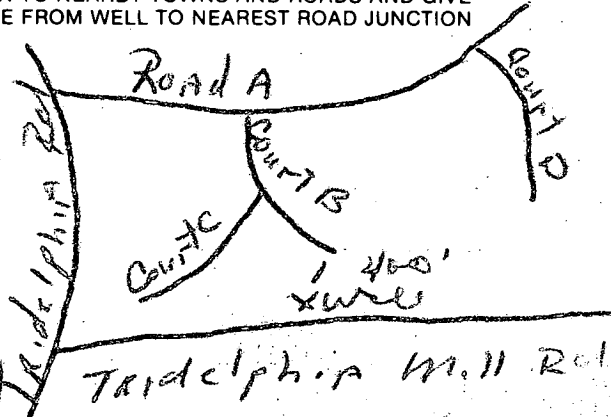
REMARKS Holes APPROX. PLAT-Shadow syst. 3" shallow

TYPE OF SOIL MAJOR

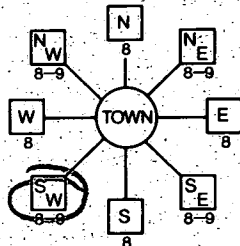
TESTED BY S. A. Q.

O-KETTERMAN, MARK R.

**ALSO PRESENT**

B 1 <b>5938</b> <small>(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)</small>	SEQUENCE NO. (DP USE ONLY)	<b>STATE OF MARYLAND</b> <b>PERMIT TO DRILL WELL</b> please print or type	STATE PERMIT NUMBER <b>H0-88-1034</b> <small>fill in this form completely</small>
Date Received (APA) <b>06-22-89</b>		B 3 LOCATION OF WELL 8 COUNTY <b>HOWARD</b> 23 SUBDIVISION <b>SAPLING RUN</b> SECTION <b>44</b> LOT <b>25</b> 52 NEAREST TOWN <b>DARTMOUTH</b> MILES FROM TOWN (enter 0 if in town) <b>4</b> M I	
OWNER INFORMATION 15 Last Name <b>LAND DESIGN AND DEVL</b> 36 Street or RFD <b>8307 MAIN STREET</b> 57 Town <b>ELLICOTT CITY MD</b> 70 State 72 <b>21043</b> Zip 76		B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX) 	
DRILLER INFORMATION Driller's Name <b>Frank Delph</b> Firm Name <b>Frank Delph Well Drillers Inc</b> Address <b>18234 Penn Shop Rd. Mt Airy</b> Signature <b>Frank Delph</b> Date <b>6/18/89</b>		NEAR WHAT ROAD <b>Court B</b> ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 	
B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) <b>5</b> AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <b>5000</b>		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL COUNTY NAME <b>HOWARD</b> COUNTY NO. <b>R#40789</b> STATE SIGNATURE <b>Charles Bryan</b> DATE ISSUED <b>8/31/90</b> CO SIGNATURE <b>Charles Bryan</b> EXP. DATE <b>8/31/90</b> NORTH GRID <b>514000</b> EAST GRID <b>0794000</b>	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="checkbox"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input type="checkbox"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. <b>WELL</b> 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE N <b>797</b> E <b>518</b>	
APPROXIMATE DEPTH OF WELL <b>200</b> FEET APPROXIMATE DIAMETER OF WELL <b>6</b> INCH		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
METHOD OF DRILLING (circle one) BORED (or Augered) <input type="checkbox"/> JETTED <input type="checkbox"/> Jetted & DRIVEN <input type="checkbox"/> 30 AIR-ROTary <input type="checkbox"/> AIR-PERCussion <input type="checkbox"/> ROTARY (Hydraulic Rotary) <input checked="" type="checkbox"/> 37 CABLE <input type="checkbox"/> REVERSE-ROTary <input type="checkbox"/> Drive-POINT <input type="checkbox"/> other _____		REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY <input type="checkbox"/> THIS WELL WILL DEEPM AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) _____	
Not to be filled in by driller (OEP USE ONLY)			
APPROP. PERMIT NUMBER <b>GAP</b> FORCE <b>CM</b> WRITE INITIALS IN BOX PERMIT No. <b>H0-88-1034</b> SPECIAL CONDITIONS			

EMERGENCY/TEMP NO. IF ANY

<b>B 1</b> 1 2 3 4 5 6 8244 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)		SEQUENCE NO. (MDE USE ONLY)  STATE OF MARYLAND PERMIT TO DRILL WELL please print or type		STATE PERMIT NUMBER 40-99-1030 70 fill in this form completely 79	
Date Received (APA) 12/13/96 OWNER INFORMATION WARFIELD HOWARD 14663 TRIDELPHIA RD GLENELG MD 21032 GLENELG TOWN 70 State 72 Zip 76				<b>B 3</b> LOCATION OF WELL HOWARD 8 COUNTY HTE WARFIELDS 23 SUBDIVISION SECTION 44 46 LOT 25 GLENELG 52 NEAREST TOWN MILES FROM TOWN (enter 0 if in town) 2 MI 73 76 77 78	
DRILLER INFORMATION RALPH MAYNE Driller's Name Ralph MAYNE well drilling Firm Name 9120 Brown Church Rd. Wt. Aring Address Ralph Mayne 12/10/96 Signature Date CIRCLE MSD/MGD/MWD 116 77 License No. 80				<b>B 4</b> DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  NEAR WHAT ROAD SAPLING WAY ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 34 360 37 DISTANCE FROM ROAD ENTER FT. OR MI 4 38 39 TAX MAP: _____ BLK: _____ PARCEL: _____	
<b>B 2</b> WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 5 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500 USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="radio"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="radio"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="radio"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="radio"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input type="radio"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)				NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL HOWARD A-40789 COUNTY NAME COUNTY NO. STATE SIGNATURE DATE ISSUED 12/24/96 43 48 CO SIGNATURE 513000 EXP. DATE 795000 NORTH GRID 50 55 57 63	
APPROXIMATE DEPTH OF WELL 150 FEET APPROXIMATE DIAMETER OF WELL 6" INCH METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jetted & DRIVEN 30 AIR-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. well 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE E 795 N 513 000 000 DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION TRIDELPHIA RD. Chestnut St. SAPLING WAY MICHELE DR. well 136'	
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="radio"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 <input type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="radio"/> THIS WELL WILL DEEPEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52				Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROX. PERMIT NUMBER _____ GAP _____ 54 63 FORCE GS WRITE INITIALS IN BOX PERMIT No. 40-99-1030 67 68 70 71 72 73 74 75 76 77 78 79	
SPECIAL CONDITIONS mark Reich 410-442-1999 NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED					

COUNTY



C16522

SEQUENCE NO.  
(MDE USE ONLY)

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

THIS REPORT MUST BE SUBMITTED WITHIN  
45 DAYS AFTER WELL IS COMPLETED.  
COUNTY  
NUMBERA-40789

123456  
(THIS NUMBER IS TO BE PUNCHED  
IN COLS. 3-6 ON ALL CARDS)

ST/CO USE ONLY  
DATE Received  
MMDDYY  
813

DATE WELL COMPLETED  
MMDDYY  
7-26-97

Depth of Well  
2226526  
(TO NEAREST FOOT)

PERMIT NO.  
FROM "PERMIT TO DRILL WELL"  
H0-99-1030  
28293031323334353637

OWNERWARFIELDKENNARD  
last namefirst name  
STREET OR RFDSEAPLING WAYTOWN  
SUBDIVISIONTHE WARFIELDUSSECTIONLOT25

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	TO
Top Soil	0	2
Sandy	2	50
Sand Stone	50	55
MICKA	55	80
Sand Stone	80	85
MICKA	85	210
Sand Stone	210	215
MICKA	215	265

GROUTING RECORD

WELL HAS BEEN GROUTED  
(Circle Appropriate Box)  
YES(Y)NO(N)  
4444

TYPE OF GROUTING MATERIAL (Circle one)  
CEMENT(CM)BENTONITE CLAY(BC)  
NO. OF BAGS454617NO. OF POUNDS1700  
GALLONS OF WATER102  
DEPTH OF GROUT SEAL (to nearest foot)  
from0ft. to30+ft.  
48TOP5254BOTTOM58  
(enter 0 if from surface)

CASING RECORD

casing types insert appropriate code below  
STSTEELCOCONCRETE  
PLPLASTICOTOTHER  
MAIN CASING TYPE  
PL660  
606163646670  
Nominal diameter top (main) casing (nearest inch)!  
Total depth of main casing (nearest foot)

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

SCREEN RECORD

screen type or open hole  
(insert appropriate code below)  
STSTEELBRBRASS  
PLPLASTICHOOPEN HOLE  
OTOTHER

C3

PUMPING TEST

HOURS PUMPED (nearest hour)3  
89  
PUMPING RATE (gal. per min.)12  
1115  
METHOD USED TO MEASURE PUMPING RATEBullet  
WATER LEVEL (distance from land surface)  
BEFORE PUMPING55ft.  
1720  
WHEN PUMPING57ft.  
2225  
TYPE OF PUMP USED (for test)  
AairPpistonTturbine  
272727  
CcentrifugalRrotaryOother (describe below)  
272727  
JjetSsubmersible  
2727

NUMBER OF UNSUCCESSFUL WELLS:0

WELL HYDROFRACTURED  
YES(Y)NO(N)

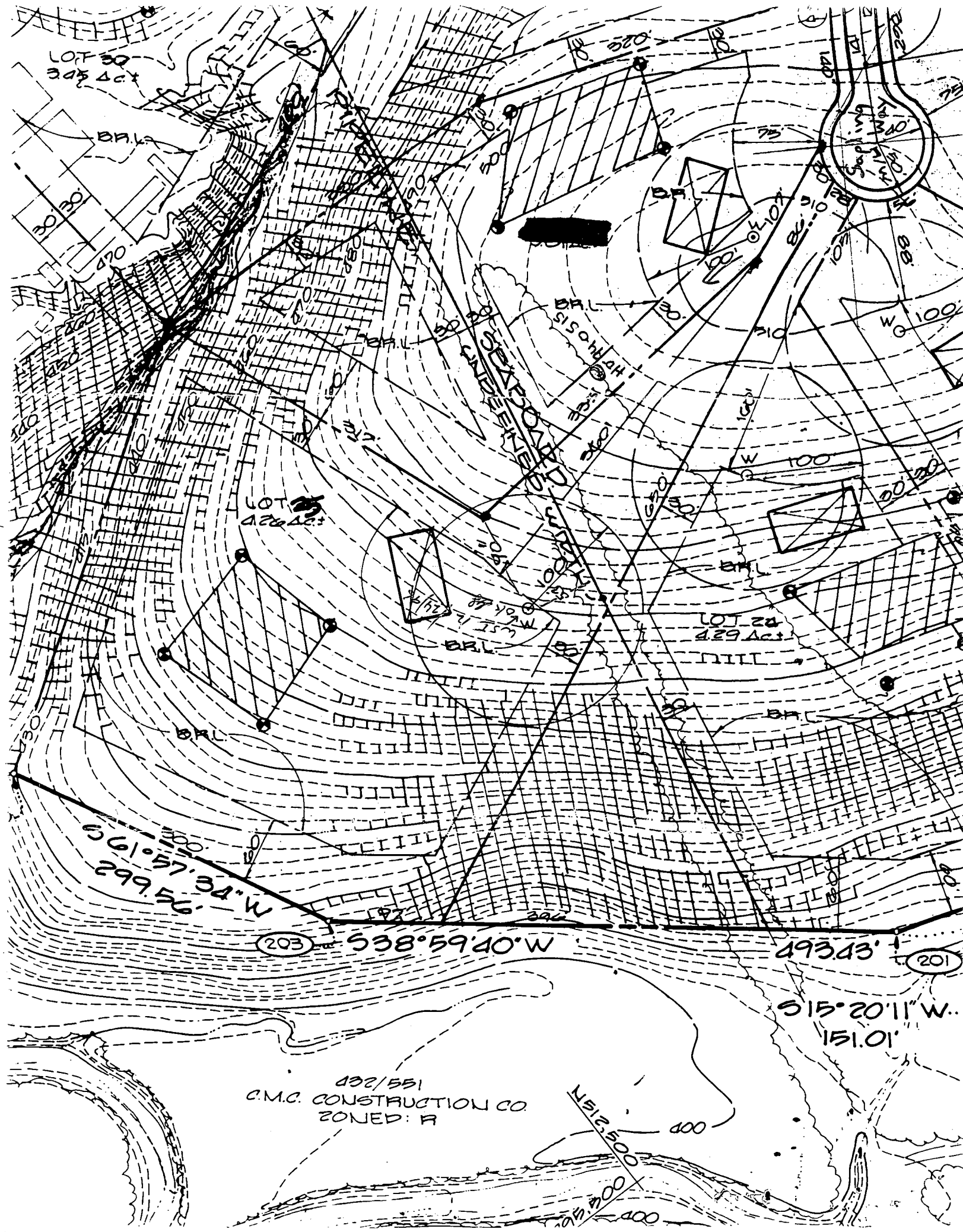
CIRCLE APPROPRIATE LETTER  
A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED  
E ELECTRIC LOG OBTAINED  
P TEST WELL CONVERTED TO PRODUCTION WELL  
I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS 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. 1MSD116  
DRILLERS SIGNATURE  
(MUST MATCH SIGNATURE ON APPLICATION)  
LIC. NO. 1MSD117  
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

C2

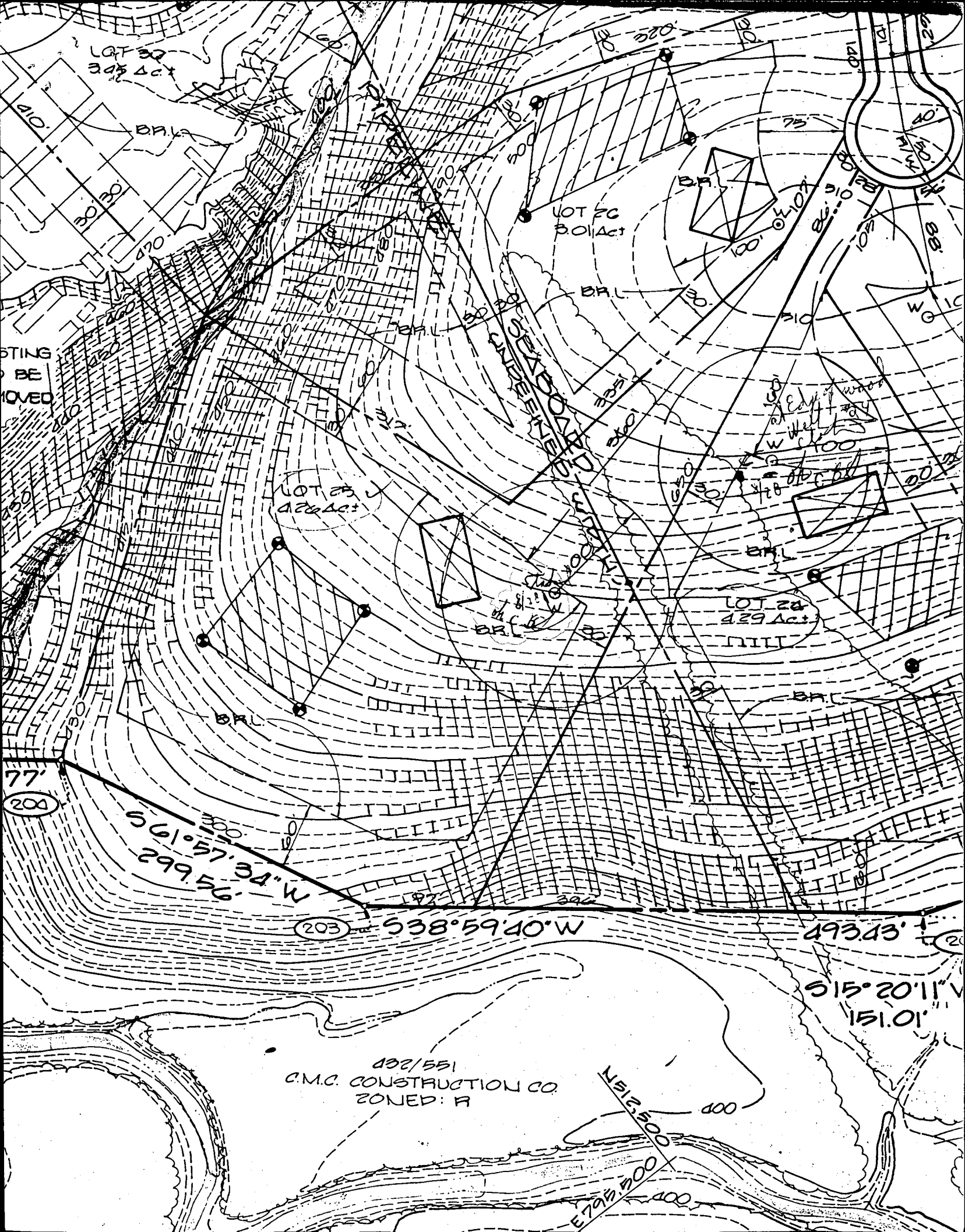
DEPTH (nearest ft.)  
117058265  
232426303236  
383941454751  
SLOT SIZE 123  
DIAMETER OF SCREEN (NEAREST INCH)  
5660  
fromto  
GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 6868  
MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)  
T(E.R.O.S.)WQ  
7072747576  
TELESCOPE CASINGLOG INDICATOROTHER DATA

PUMP INSTALLED  
DRILLER WILL INSTALL PUMP YES(YES or 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: 2-5/8  
GALLONS PER MINUTE (to nearest gallon)  
3135  
PUMP HORSE POWER  
3741  
PUMP COLUMN LENGTH (nearest ft.)  
4347  
CASING HEIGHT (circle appropriate box and enter casing height)  
+above  
-below  
LAND SURFACE  
2(nearest foot)  
5051

LOCATION OF WELL ON LOT  
SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND /OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)  
Road  
350'  
200'  
well



132/551  
C.M.C. CONSTRUCTION CO  
ZONED: A



LOT 26  
301 Act

LOT 25  
301 Act

LOT 23  
426 Act

LOT 24  
429 Act

032/551  
C.M.C. CONSTRUCTION CO  
ZONED: R

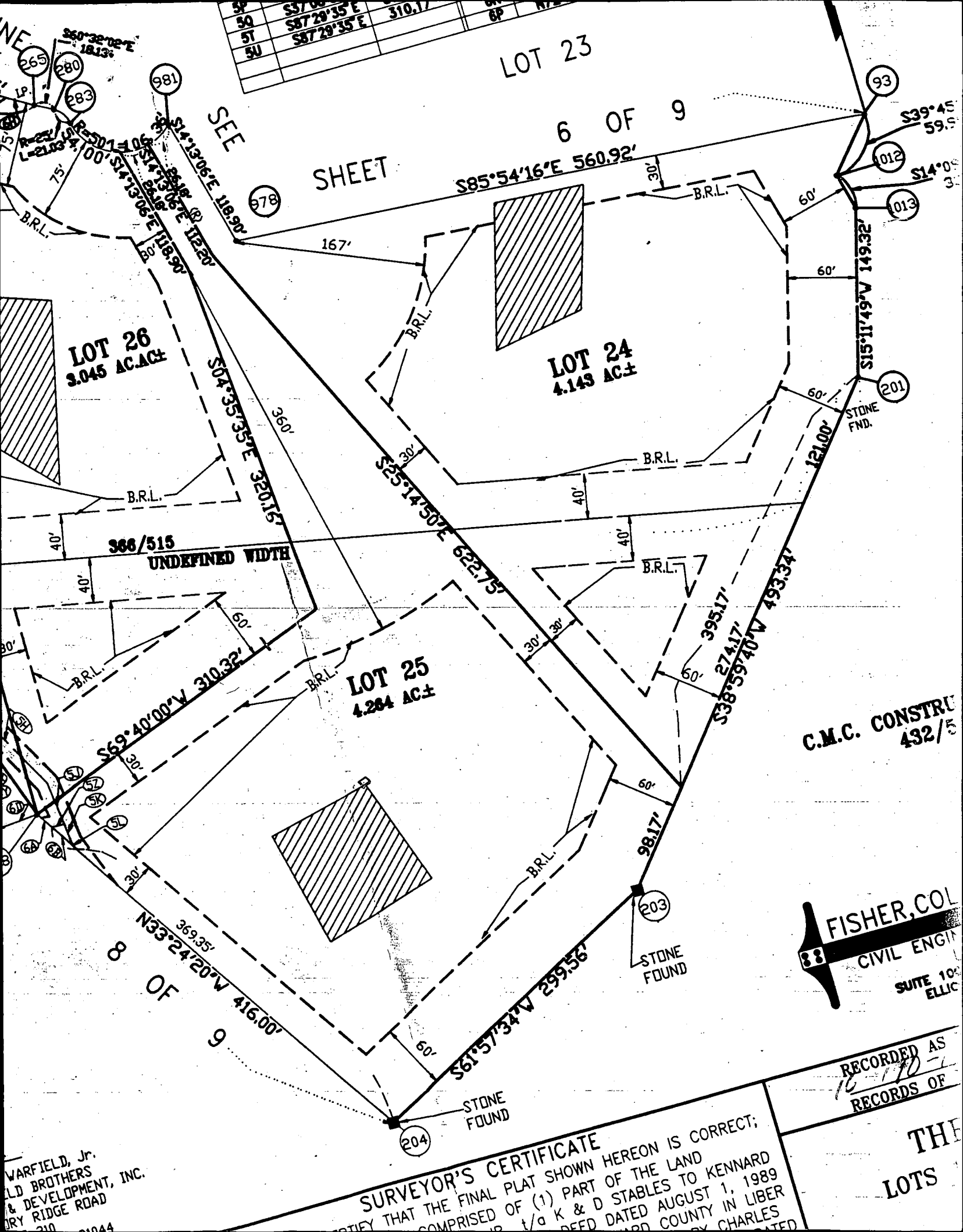
S 61° 57' 34" W  
299.56'

S 38° 59' 40" W

S 15° 20' 11" V  
151.01'

NE 12.51°  
E 79° 59' 00"

SP	S37°08'15"E	310.17	6P
50	S87°28'35"E		
51	S87°29'35"E		
52			



D37SS

ACCOUNT #:

DONE BY: Rerce DATE: 11/16/03

☒ NEW/EXISTING CONSTRUCTION  
☐ DIRECTIONAL COMPASS

