12/7/98 10:00 check (layout check) 1/6/98 am- layout c.o. meet installer 1.7.99 am + 3pm 7/27/99 c.o. & UPI a.m.

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

05-422221

P 511129

A 49861-E

DISTRICT 5th

DATE 12/3/98

DATE SYSTEM APPROVED 7/27/99

INSPECTOR DKS

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

XXXXXXX 410-313-2640

INDEXED

Fogle's Septic Clean, Inc. IS PERMITTED TO INSTALL X ALTER _____

ADDRESS 558 Obrecht Road Sykesville, Maryland 21784 PHONE (410) 795-5674

SUBDIVISION Springdale Estates LOT 15 ROAD 13509 Silent Lake Drive

PROPERTY OWNER Dale Thompson Builders

ADDRESS _____

SEPTIC TANK CAPACITY 2500 GALLONS (2 tanks - 1500 + 1000[or 1500 Gallon Tanks Preferred])

NUMBER OF BEDROOMS 9

CONTACT HEALTH DEPARTMENT FOR LAYING PERMIT SIGNED TO TRENCH EXCAVATION

BUILDING PERMIT SIGNED AND RETURNED

9303 B00143805-GM+FAM CM

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 600

TRENCH LAYOUT IS TO UTILIZE ENTIRE SEPTIC DISPOSAL AREA UNDER DRIVEWAY FOR INITAL SYSTEM INSTALLATION

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 218.18' and the 588.33' lot lines, place the distribution box 145 feet down the 588.33' lot line and 110 feet off this same lot line. Run trenches along contour towards the 193.50' lot line.

NOTES - Install 10 - 60' trenches. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

ok DK 10/23/98

PLANS APROVED BY Donna K. Soe/Glen Savage REVISED DATE 10-20-98

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

1f 35
20
2 38
1
2½

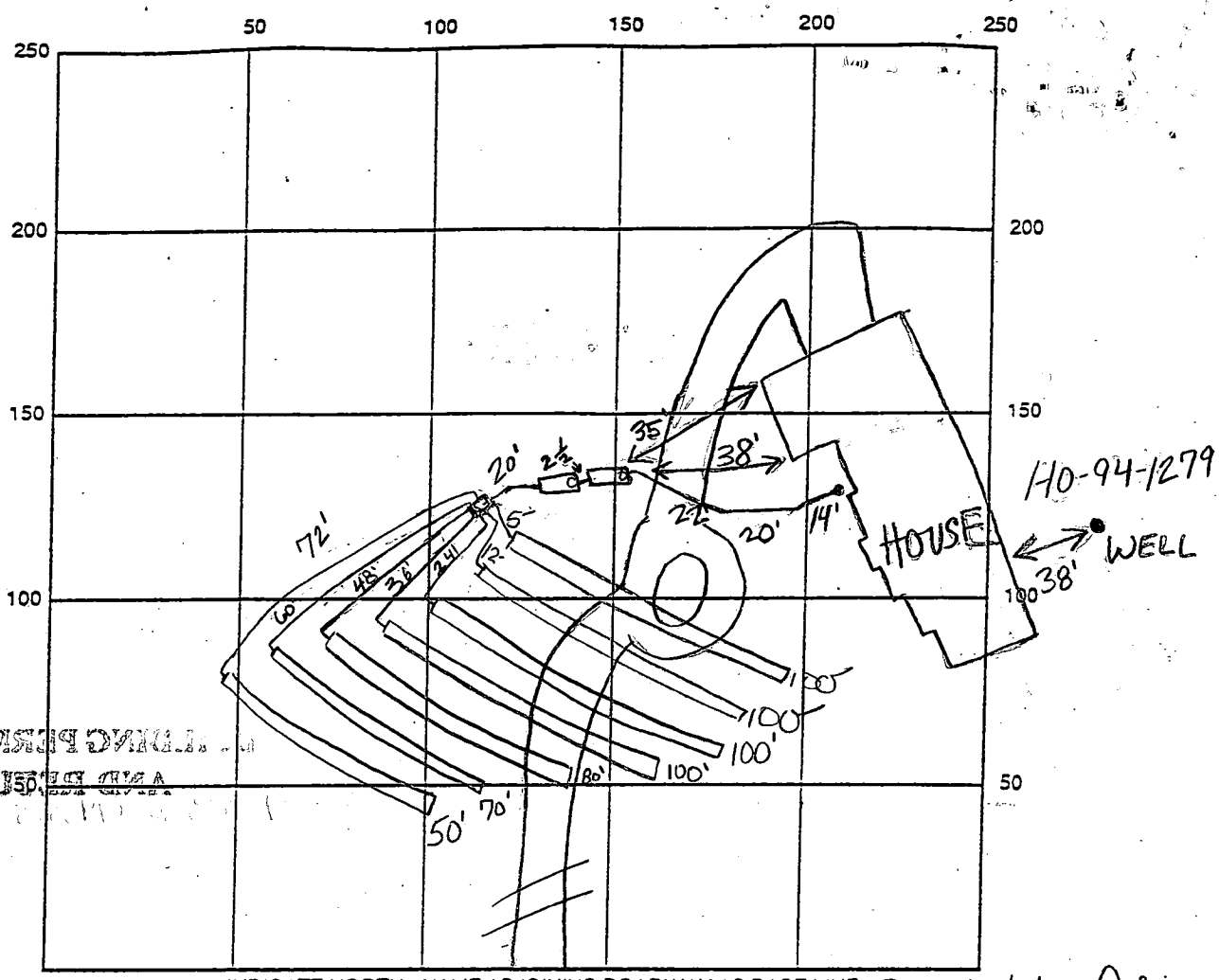
*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

HD-250(5-90)

8' ST.

E-1 49861-E



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE Silent Lake Drive

SEPTIC TANK LEVEL (2) 1500 GAL-OK CLEANOUTS one at house, one on each tank

DISTRIBUTION BOX LEVEL ok

DRAIN FIELD/TITLE DEPTH 6 FT. TRENCH WIDTH 3 FT. INLET DEPTH 4 FT.

EFFECTIVE GRAVEL DEPTH 2 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: 12/7/98 LAYOUT INSP POSTPONED (MR) 1/6/99 8-TRENCH LAYOUT PROPOSED BY CONTRACTOR OK; OK TO COVER HOUSE TO TANKS; PIPE DOUBLE-SLEEVED UNDER DRIVE; NO HOUSE CONN (MR)
1·7·99 (am) ok to continue on trenches KM 1·7·99 (pm) ok to cover from house to distribution box and completed trenches KM
7/27/99 FINAL INSP - House connection made. DKS

DATE SYSTEM APPROVED 7/27/99 INSPECTOR DONALD SOL

WPI - well line P.A. 3' below grade 2pc cap OL. DKS
well casing 1' above grade
PVC conduit pipe OK

APPLICATION

HOWARD COUNTY

PERMIT APPLICATION

DEPARTMENT OF INSPECTIONS, LICENSES & PERMIT
3430 COURT HOUSE DRIVE, ELLICOTT CITY, MARYLAND 21043

4/4/25

SERIAL NUMBER

B 0011201

BUILDING ADDRESS (HOUSE NO., STREET, TOWN OR AREA)
13509 SILENT LAKE DRIVE 36028
CLARKSVILLE, MD. 21029

GRADING/SEDIMENT CONTROL ☐ YES ☐ NO SDP #

DESCRIPTION OF WORK AUTHORIZED
1 FIREPLACE
5 BEDROOM
4½ BATHS
3 CAR ATTACHED GARAGE
NEW SINGLE FAMILY HOME

LOT NO.	PARCEL NO.	SEC.	AREA	BLOCK NO.	LIBER	FOLIO
515	423	-	-	14	-	-

SUB DIVISION	ZONE	ZONE MAP	ELEC. DIST.	CENSUS TR.
SPRINGDALE ESTATES	RR-DEO	34	5	6051.01

OWNER NAME AND ADDRESS PHONE NO.
DALE THOMPSON BUILDERS (410) 995-6732
10005 OLD COLUMBIA RD
COLUMBIA, MD 21046

OCCUPANT'S NAME AND ADDRESS PHONE NO.
SAME

ARCHITECT OR ENGINEER'S NAME AND ADDRESS PHONE NO.
SAME

CONTRACTOR'S NAME AND ADDRESS PHONE NO.
SAME

SIZE OF BLDG.	FRONT	DEPTH	HEIGHT

TYPE OF BLDG.	AREA	VOLUME	ROOF
B. ROOMS			
ROOMS			
BATHS			
FIREPLACES			

FOOTINGS	FOUNDATION	S. WALLS

UTILITIES

WATER/WELL	SEWER/SEPTIC	GAS	ELECTRICITY	TYPE OF HEAT	AC
✓	✓	X	✓	OIL	✓

I have carefully examined and read this application and know the same is true and correct, and that is doing this work, all provisions of Howard County Ordinances and the State Laws of Maryland will be complied with, whether specified or not; and I will notify the Department of Inspections, and Permits twenty-four hours in advance when I am ready for the inspections called for elsewhere in the application; and that no work will be covered up until such inspections have been complied with.

SIGNATURE

EXISTING USE	PROPOSED USE
UNIMPROVED LOT	SINGLE FAMILY DWELLING

EST. CONSTRUCTION COST	LICENSE NUMBER	PERMIT FEE
$300,000	91494	

ARCHITECT — 4/4/25
TITLE — DATE

W/S CODE

FOR OFFICE USE ONLY

DISTANCE IN FEET FROM R/W LINE TO FRONT BUILDING LINE _____

SIDE YARD _____
(DISTANCE IN FEET FROM SIDE BLDG. LINE TO SIDE PROPERTY LINE)

TO SIDE BUILDING LINE _____
DISTANCE IN FEET, REAR YD. REQUIRING SET

BACK _____ (CORNER LOT ONLY) _____ SDP #

Check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING	X	
SHA	X	
SEDIMENT/GRADING	X	
BUILDING OFFICIAL	X	
WATER & SEWER		
HEALTH DEPT.	X 6/9/25	DONNA KEEN
FIRE PROTECTION	X	
STORM WATER MGM.		

CAUTION

To begin construction before a permit placard has been issued and displayed on the job is a violation of the law.

Use and occupancy permit must be applied for two weeks before it will be issued.

APPROVED — DATE

IMPORTANT: PLEASE SHOW ZIP CODES AND AREA CODES WHEREVER REQUIRED.

9-591 12569

Distribution of Copies:
White - Building Official
Green - Planning & Zoning
Yellow - Engineering
Pink - Health Dept.
Gold - S.H.A.

APPLICATION

PERCOLATION TESTING

A 49861 E

P _____

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

DISTRICT _____

DATE _____

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 Dale Thompson Builders

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Springdale LOT NO. 15

ROAD AND DESCRIPTION (13509 Silent Lake Drive)

BLDG. PERMIT SIGNED AND RETURNED 6-9-98
Serial # B701120871
SFD - 5 Bedroom

TAX MAP _____ PARCEL # _____

SIZE OF LOT _____ TYPE BLDG. _____
(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT. _____
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

HD-216 (3/92)

49861 E
COUNTY #

Lot 15

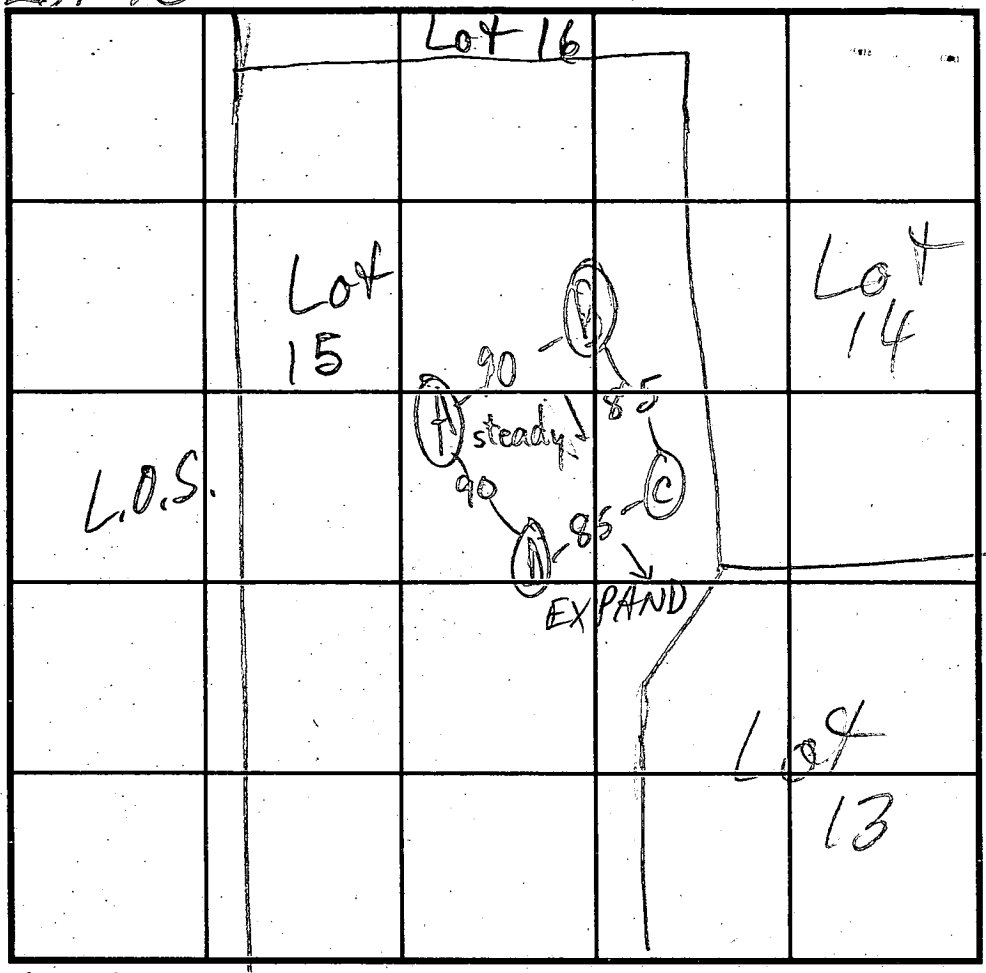
SOIL PROFILE
0' ALL

brn tan sl cl lm

3

tan pink yel coarse sa lm 15-25% flagstone frags or saprolite

10½
-11



SOIL PROFILE
0'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

BRIGHTON DAM RD

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
3/8/94	C S	4	11:25	11:27	11:27	11:32	5
	C M	6	11:24	11:25	11:25	11:27	2
	C V	11	see	profile			
	D S	3½	11:27	11:29	11:29	11:31	(2) EST
	D V	11	see	profile			
	A S	3½	11:32	11:34	11:34	11:38	4 EST
	A V	10½	see	profile			
	B S	2½	11:41	11:44	11:44	11:46	2
	B M	4½	11:41	11:54	11:54	12:26	32
	B V	10½	sinto	profile 25-30% flagstone		mica saprolite	

REMARKS ALL HOLES PER PLAN

TYPE OF SOIL

TESTED BY M. Rifkin ALSO PRESENT Allen, Demmitt

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 8 TRENCH WIDTH 3

INLET DEPTH 3½ MAXIMUM BOTTOM DEPTH 5½ SQ. FT/BEDROOM 210

8/9/98
1:30

APPLICATION $225 cc

PERCOLATION TESTING

A 510602

P _____

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

PREVIEW EXPANSION FOR 1/9 BEDROOM

DISTRICT _____

DATE 8/4/98

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 Emma and Gerald Osorg

ADDRESS 13509 Silent Lake Dr. PHONE _____

AGENT OR PROSPECTIVE BUYER Dale Thompson Builders

ADDRESS 10005 Old Columbia Rd. PHONE (410) 995-6736

PROPERTY LOCATION:

SUBDIVISION Springdale LOT NO. 15

ROAD AND DESCRIPTION 13509 Silent Lake Dr.

TAX MAP _____ PARCEL # _____

SIZE OF LOT 3.27 acres TYPE BLDG. Single Family Dwelling
(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)

510602
COUNTY #

SOIL PROFILE

A

0'

orange clay loam

3.0'

orange/tan/pink sclm with mica 20% shale frags ↓ HARD BOTTOM

11.0'

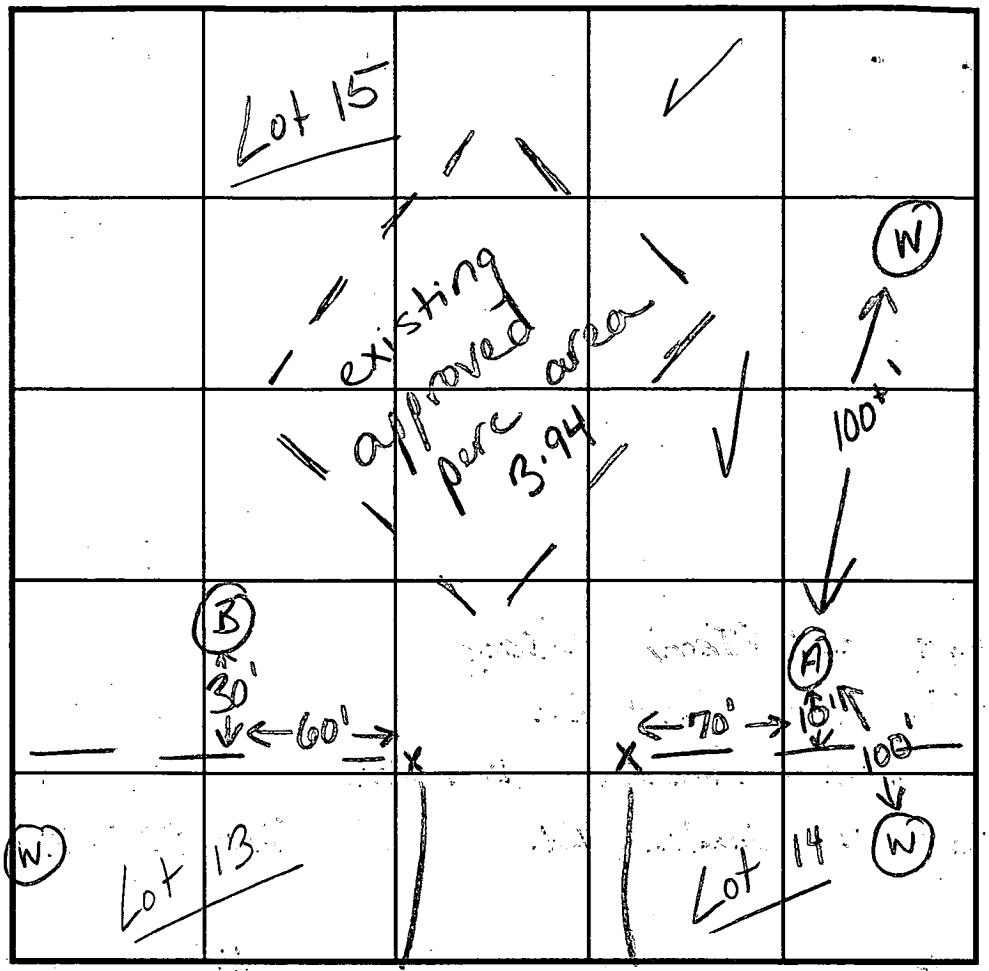
B

orange cl lm

3.0'

orange sandy clay loam 10% shale frags

11.0'



SOIL PROFILE
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
8.7.98	A	3.5'S	1:56 15	1:57 15	1:57 15	1:59 15	2min
		11.0'D	Visual ok - see profile				
	B	11.0'D	Visual only - ok see profile				

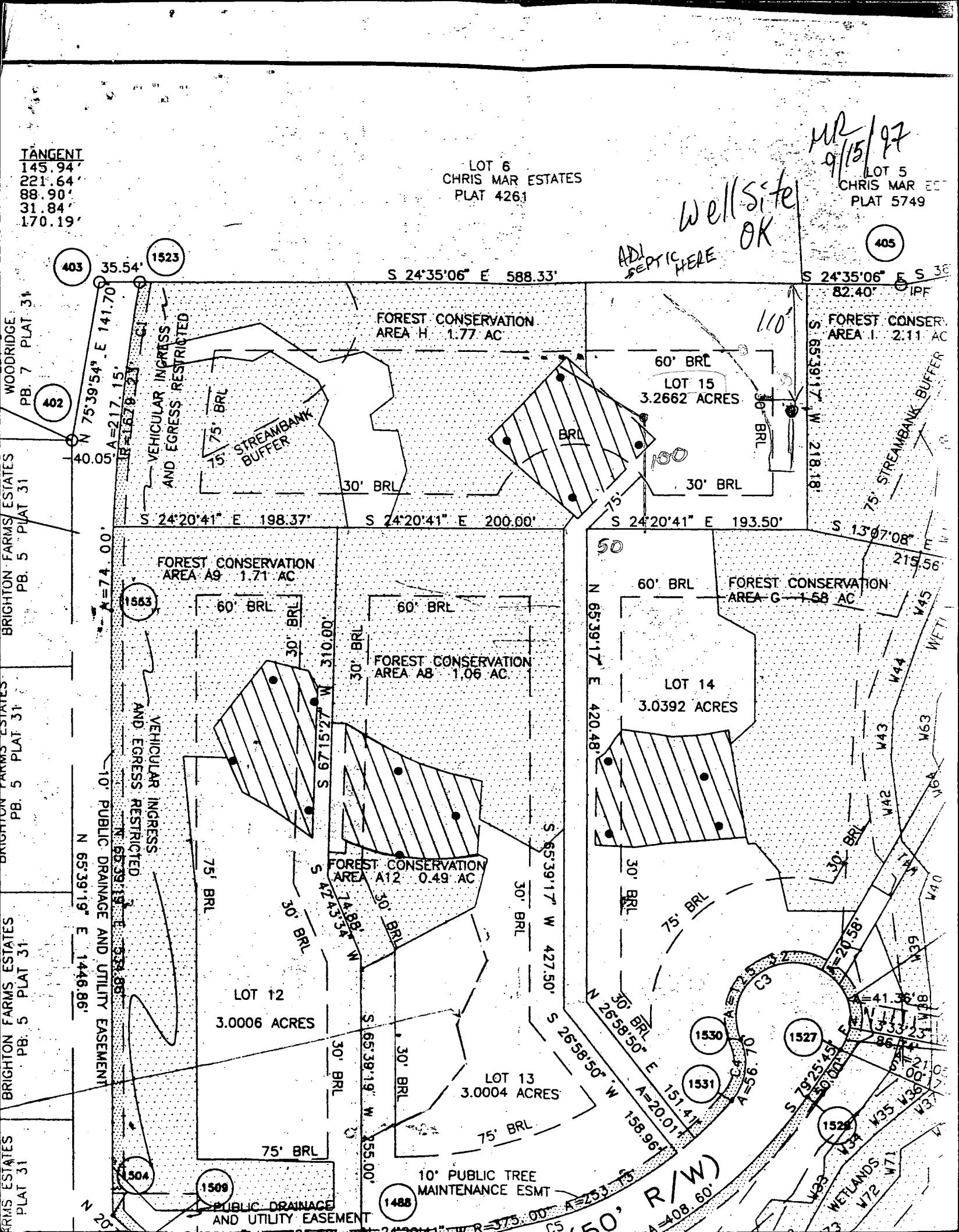
REMARKS test holes not staked

TYPE OF SOIL

TESTED BY Kim Maiste ALSO PRESENT Dale Thompson

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 2 minutes TRENCH WIDTH

INLET DEPTH MAXIMUM BOTTOM DEPTH SQ. FT/BEDROOM


TANGENT
145.94'
221.64'
88.90'
31.84'
170.19'
LOT 6
CHRIS MAR ESTATES
PLAT 4261
LOT 5
CHRIS MAR EST
PLAT 5749
MR 9/15/97
Well Site OK
ADJ SEPTIC HERE
WOODRIDGE
PB. 7 PLAT 31
BRIGHTON FARMS ESTATES
PB. 5 PLAT 31
403
1523
405
402
1563
1504
1509
1488
1530
1527
1531
1528
35.54'
S 24°35'06" E 588.33'
S 24°35'06" E
82.40'
IPF
N 75°39'54" E 141.70'
A=217.15'
R=1678.23'
40.05'
VEHICULAR INGRESS AND EGRESS RESTRICTED
FOREST CONSERVATION AREA H 1.77 AC
FOREST CONSERV
AREA I 2.11 AC
110'
S 65°39'17" W 218.18'
75' STREAMBANK BUFFER
60' BRL
LOT 15
3.2662 ACRES
30' BRL
BRL
100
75'
S 24°20'41" E 198.37'
S 24°20'41" E 200.00'
S 24°20'41" E 193.50'
S 13°07'08"
215.56'
50
A=74.00'
FOREST CONSERVATION AREA A9 1.71 AC
60' BRL
30' BRL
310.00'
S 67°15'27" W
FOREST CONSERVATION AREA A8 1.06 AC
FOREST CONSERVATION AREA G 1.58 AC
N 65°39'17" E 420.48'
LOT 14
3.0392 ACRES
W45
W44
W43
W63
W42
W64
W41
W40
WETL
VEHICULAR INGRESS AND EGRESS RESTRICTED
10' PUBLIC DRAINAGE AND UTILITY EASEMENT
N 65°39'19" E 1446.86'
FOREST CONSERVATION AREA A12 0.49 AC
S 42°43'34" W 74.88'
S 65°39'17" W 427.50'
S 26°58'50" W 158.96'
N 26°58'50" E 151.41'
A=20.01'
A=20.58'
A=41.36'
N 33°33'25" E
86.44'
S 79°25'45" E
150.00'
LOT 12
3.0006 ACRES
LOT 13
3.0004 ACRES
S 65°39'19" W 455.00'
10' PUBLIC TREE MAINTENANCE ESMT
PUBLIC DRAINAGE AND UTILITY EASEMENT
R/W
A=408.60'
A=253.13'
R=375.00'
WETLANDS
W72
W71
W33
W34
W35
W36
W37


GMB2
LOT 12
3.0 AC
LOT 13
3.0 AC
LOT 14
3.0 AC
LOT 15
3.0 AC
LOT 16
3.0 AC
LOT 17
3.0 AC
WELL
WELL
WELL
STREAM BUFFER
BUFFER

(410) 995-6736

13709 Silent Lake Dr

B 11/2084

DALE THOMPSON
BUILDERS

car phone
(410) 802-0881
no ans. 3:20pm

JULY 21, 1998

DEAR AVIS:

B00112081 / OSONG RESIDENCE

THESE DRAWINGS REFLECT REVISIONS MADE BY CLIENT:

- DELETE SUNROOM ADD BEDROOM #6 AND BATH #3
- ADD BEDROOM #7 AND BATH #6

ATTACHED PLEASE FIND REVISED SITE PLAN (4) AND (2) SETS OF HOUSE PLANS.

→ BEDROOM 8, 9 SHOWN IN BASEMENT PLANS + IS COUNTED BY PLAN REVIEW PER. T.C. W/DAN SWINDER, 7/30/98

SINCERELY,

LUANA LAVALLEY

Luana LaValley

DAN SWINDER IN PLAN REVIEW SAID 9 BEDROOMS-TOTAL — I LEFT HIM A MESSAGE TO DISCUSS THIS OR TO SEND A LETTER TO THE APPLICANT. CW 7/30/98

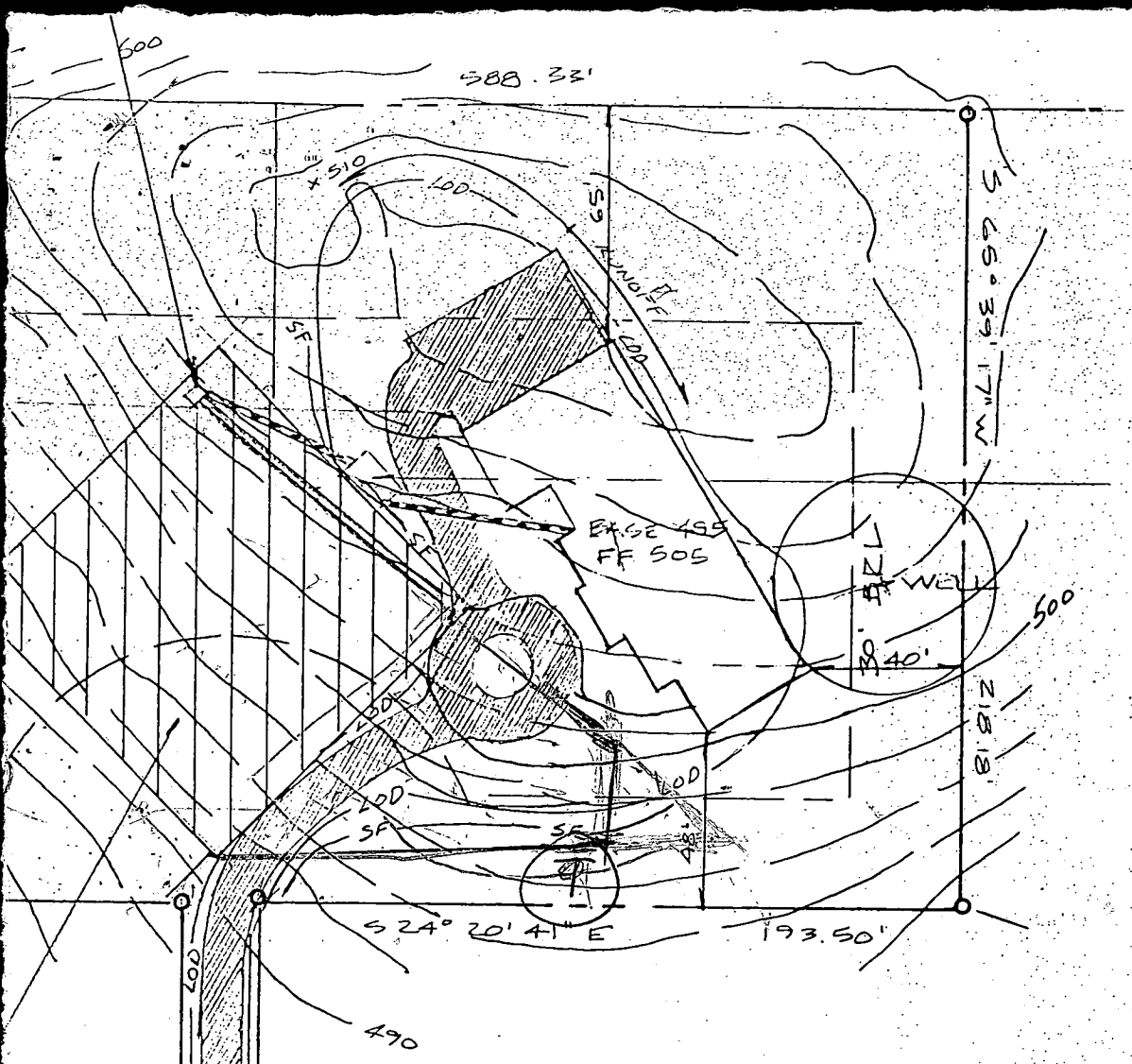
cc Health Dept
JPZ

ADJACENT WELL LOCATIONS PRECLUDE SOIL ASSESSMENT

10/14/98
TELEPHONE CONV.
DALE THOMPSON ACKNOWLEDGES THIS RESULTS IN A TOTAL OF 9 BEDROOMS.
CWelker

OK FOR 7 OR 9 BEDROOMS
10/15/98 Craig Walker

REVISION ACCEPTED



Existing well Lot 14

LOT 14

REVISED

Date: 7-21-98

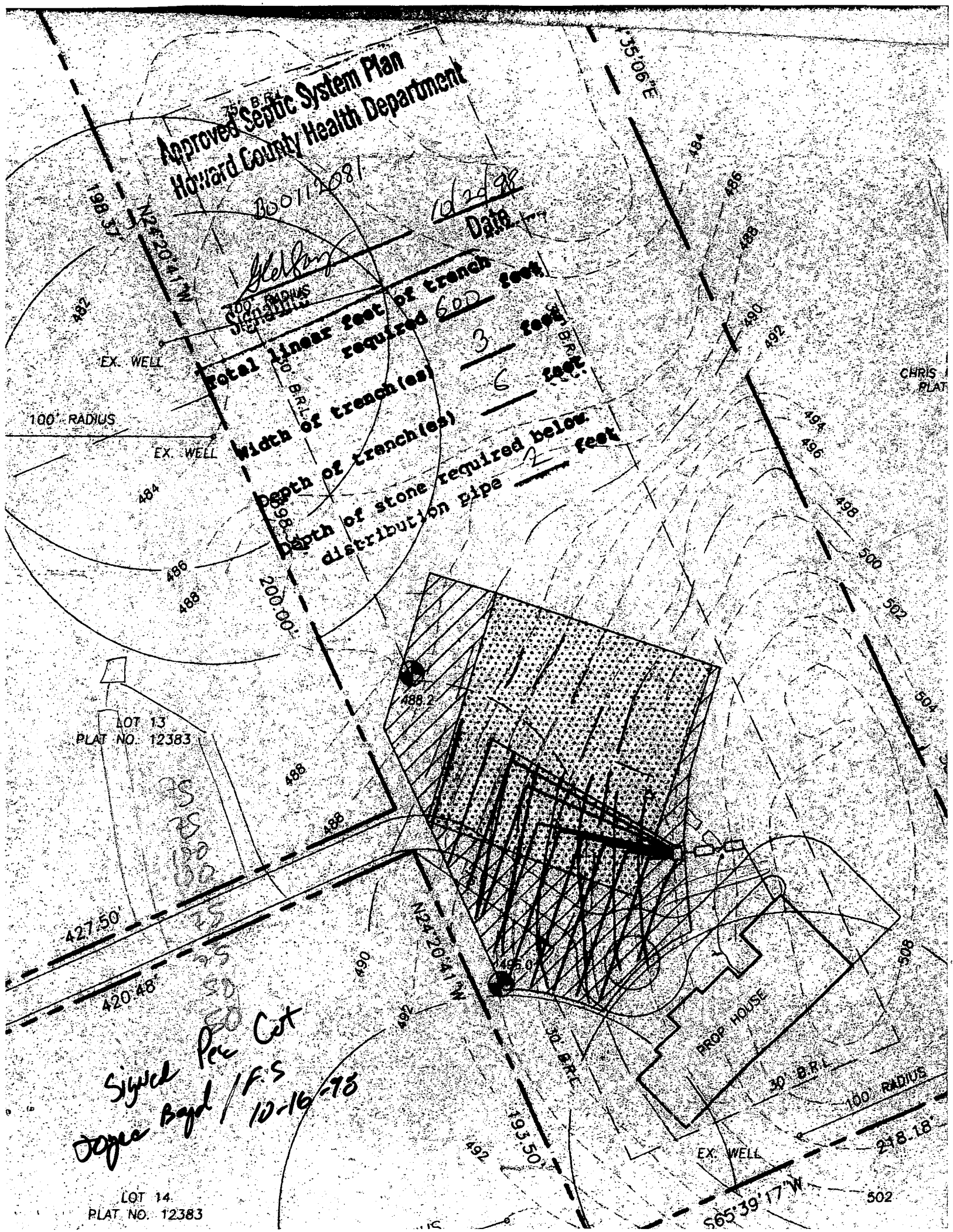
13709 Silent Lake Dr.

B0011281

Comments:

Change house drawing

DALE OMPSON


Approved Septic System Plan
Howard County Health Department
B001120B1
10-20-98
Date
Total linear feet of trench required 600 feet
Width of trench(es) 3 feet
Depth of trench(es) 6 feet
Depth of stone required below distribution pipe 2 feet
100' RADIUS
EX. WELL
EX. WELL
LOT 13
PLAT NO. 12383
LOT 14
PLAT NO. 12383
PROP HOUSE
30' B.R.L.
50' B.R.L.
75' B.R.L.
198.37'
N24°20'41"W
427.50'
420.48'
200.00'
193.50'
218.18'
S65°39'17"W
S35°06'E
488.2
488.0
Signed Per Cat
Joyce Boyd 10-16-98

PUT DRIVEWAY LOCATION "ON HOLD"

DO 50' SCALE

SHOW 2 TANKS BETWEEN HOUSE & DRIVEWAY

SHOW DB ACROSS DRIVEWAY

ADJUST SEPTIC AREA TO [redacted] CONTOUR 505'

SHOW 100' TRENCHES FOR EACH OF 9 BR'S ALL UNDER DRIVEWAY

ADJUST DRIVEWAY LOCATION AS NECESSARY TO "WORK WITH" PLUMBING OF SEPTIC SYSTEM IE DONT COVER TANK(S) OR DIST BOX.

~~9 BR @ 250 GAL = 2500 GAL~~

9 BR @ 250 GAL = 2500 GAL

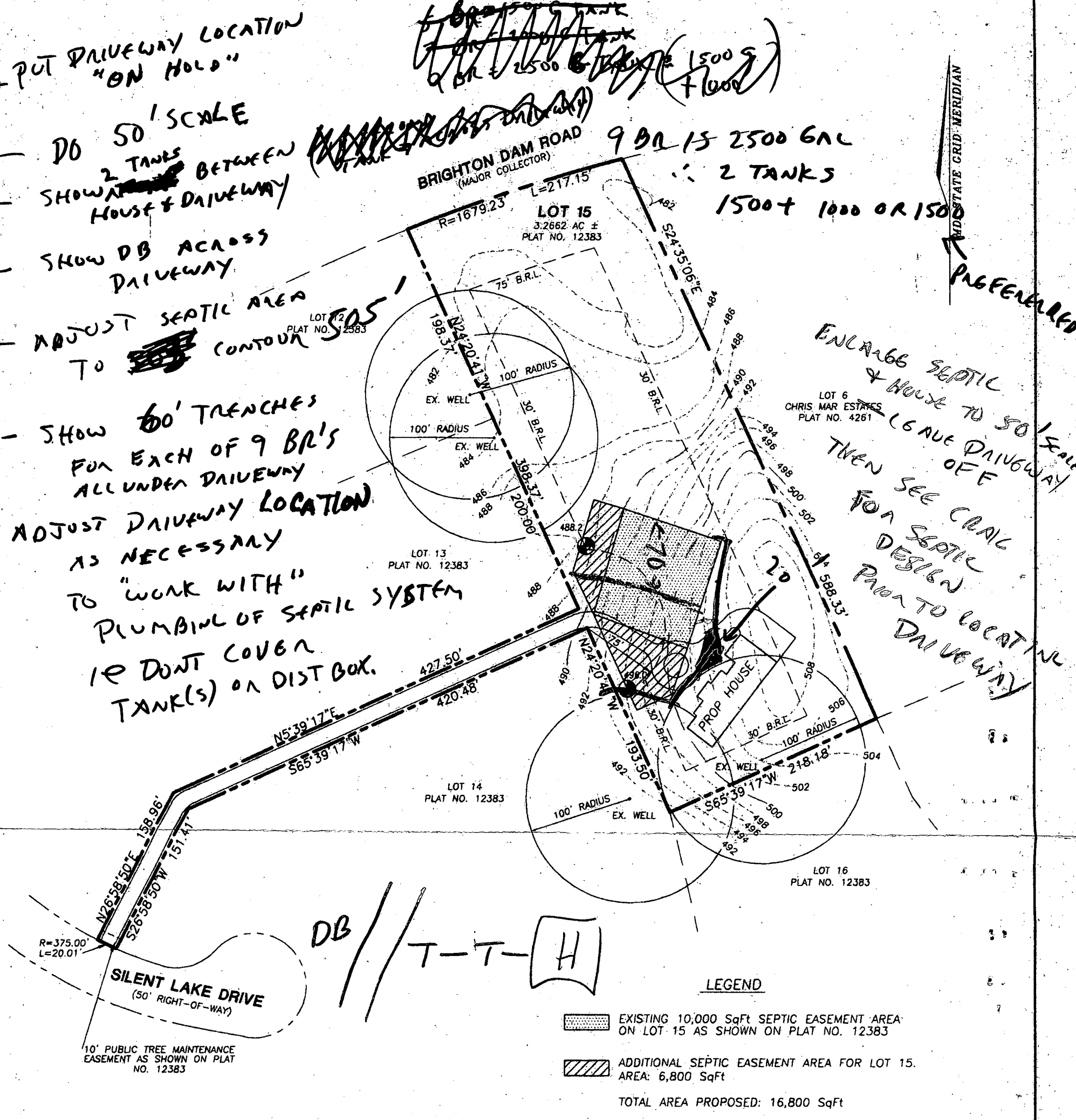
∴ 2 TANKS 1500 + 1000 OR 1500 + 1500

PREFERRED

ENLARGE SEPTIC & HOUSE TO 50' SCALE

THEN SEE CHANGE FOR SEPTIC DESIGN PRIOR TO LOCATING DRIVEWAY

DB // T-T-H



LEGEND

EXISTING 10,000 SqFt SEPTIC EASEMENT AREA ON LOT 15 AS SHOWN ON PLAT NO. 12383

ADDITIONAL SEPTIC EASEMENT AREA FOR LOT 15. AREA: 6,800 SqFt

TOTAL AREA PROPOSED: 16,800 SqFt

NOTE: 1. THE CONTOURS AND ELEVATIONS SHOWN HEREON ARE BASED ON CLIENT SUPPLIED TOPOGRAPHY.

2. THE PROPERTY LINES SHOWN HEREON ARE BASED ON A PLAT OF CORRECTION ENTILTLED 'SPRINGDALE ESTATES, LOTS 1-18 AND PRESERVATION PARCELS A&B AND RECORDED AMONG THE LAND RECORDS OF HOWARD COUNTY, MARYLAND AS PLAT NO. 12383

3. ALL EXISTING WELLS AND EXISTING SEPTIC SYSTEMS WITHIN 100' OF PROPERTY BOUNDARIES HAVE BEEN SHOWN

THIS AREA DESIGNATES A MINIMUM 10,000 SQ FT PRIVATE SEWAGE EASEMENT REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWAGE IS AVAILABLE. THESE EASEMENTS SHALL BE NULL AND VOID UPON CONNECTION TO A PUBLIC SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENT INTO THE PRIVATE SEWAGE EASEMENT. RECORDATION OF A MODIFIED SEWAGE EASEMENT SHALL NOT BE NECESSARY.

PERCOLATION TEST HOLES SHOWN HEREON HAVE BEEN FIELD LOCATED AND SHOWN AS ⊕.

PERCOLATION AREAS AND WATER WELLS WITHIN 100 FEET OF PROPERTY LINES ARE SHOWN ON THIS PLAT.

APPROVED: FOR PRIVATE WATER AND PRIVATE SEWAGE SYSTEMS

COUNTY HEALTH OFFICER — DATE

STATE OF MARYLAND ROBERT W. VOGEL NO. 16193 REGISTERED

RECORD REFERENCES	
TAX MAP	34
PARCEL	60
PLAT NO./FOLIO	12383
SCALE	1"=100'
DATE	8-17-98

PERCOLATION TEST PLAT
SPRINGDALE ESTATES
LOT 15
5TH ELECTION DISTRICT
HOWARD COUNTY
MARYLAND

VOGEL & ASSOCIATES
ENGINEERS · SURVEYORS · PLANNERS
3691 Park Avenue, Suite 101 • Ellicott City, Maryland 21043
Tel 410.461.5828 Fax 410.465.3966

BP 0011208
ISSUED FOR
5 BR

APPLICANT STILL
CONTEMPLATING
7/9 BEDROOMS

DO NOT ISSUE
SEPTIC PERMIT
UNTIL ISSUE
IS RESOLVED.

(CW)

9/16/98

HOWARD COUNTY HEALTH DEPARTMENT

Joyce M. Boyd, M.D., County Health Officer

August 3, 1998

Dale Thompson Builders
10005 Old Columbia RD
Columbia, MD 21046

RE: Springdale Estates lot 15, 13509 Silent Lake Drive

Dear Mr. Thompson:

This office has received your building permit application for the above referenced property. We are unable to recommend approval for the following reason:

Our concern is to whether sufficient designated septic area exists for the proposed home size. In order to continue this review, please submit a drawing showing a fully detailed septic system layout for the initial septic system and two repairs (specifications enclosed).

Sincerely,

Glen Savage, R.S.

540
745

Enclosure

gsspring15.let

cc: FILE
PERMITS OFFICE

Bureau of Environmental Health
3525-H Ellicott Mills Drive Ellicott City, Maryland 21043-4544
Water and Sewerage Program (410) 313-2640 Community Environmental Health Program (410) 313-2644
Food Protection Program (410) 313-2642 TDD (410) 313-2323 FAX (410) 313-2648

C 1 | 9586 — SEQUENCE NO. (MDE USE ONLY)

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

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 NUMBER A 49861 E

ST/CO USE ONLY
DATE Received 1/14/97

DATE WELL COMPLETED 1/1/97

Depth of Well 285 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-1279

OWNER Thompson (last name) Dale (first name)

STREET OR RFD Silent Lake Dr TOWN Clarksville

SUBDIVISION SPRINGDALE SECTION LOT 15

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
Sand	0	47	
Gray Granite	47	285	✓

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.

TYPE: MWD/MSD/MGD

DRILLERS LIC. NO. 024

Joseph C Mayne

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. 027

Larry Mayne

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

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 16 NO. OF POUNDS 1504

GALLONS OF WATER 96

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 47 ft. (enter 0 if from surface)

CASING RECORD
casing types insert appropriate code below

[ST] STEEL [CO] CONCRETE [PL] PLASTIC [OT] OTHER

MAIN CASING TYPE	Nominal diameter top (main) casing (nearest inch)!	Total depth of main casing (nearest foot)
ST	6	51

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	49	285
2			
3			

SLOT SIZE 1 ____ 2 ____ 3 ____

DIAMETER OF SCREEN ____ (NEAREST INCH)

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

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 26 ft.

WHEN PUMPING 90 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 WILL INSTALL 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

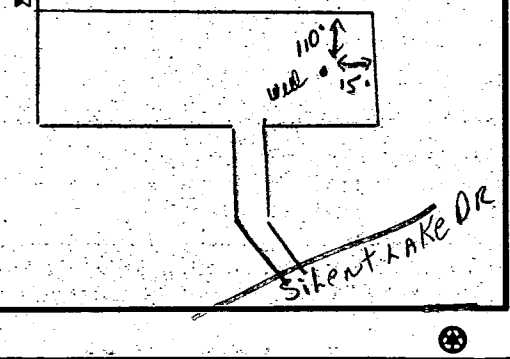
PUMP COLUMN LENGTH (nearest ft.)

CASING HEIGHT (circle appropriate box and enter casing height)

[+] above [−] below LAND SURFACE 02 (nearest foot)

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)



COUNTY

STATE USE INDUSTRIES
JESSUP, MD 20794

EMERGENCY/TEMP NO. IF ANY

B 1 | 3022 | 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: HO-94-1279
fill in this form completely

Date Received (APA): 04/22/96

OWNER INFORMATION
Last Name: THOMPSON | Owner: DALE
Street or RFD: 10050 OLD COLUMBIA RD
Town: COLUMBIA | State: MD | Zip: 21046

DRILLER INFORMATION
CIRCLE: MSD/MGD/MWD
Driller's Name: Joseph L. Mayne
License No.: 24
Firm Name: Joseph L. Mayne Well Drilling
Address: 5512 Ridge Rd. Mt. Airy MD. 21771
Signature: Joseph L Mayne | Date: 4/22/96

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 — 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)

APPROXIMATE DEPTH OF WELL: 280 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
FORCE: HR (WRITE INITIALS IN BOX) PERMIT No.: HO-94-1279

B 3 LOCATION OF WELL
8 COUNTY: HOWARD
23 SUBDIVISION: SPRINGDALE ESTATES
SECTION: | LOT: 15
52 NEAREST TOWN: CLARKSVILLE
MILES FROM TOWN (enter 0 if in town): 4 MI

B 4
DIRECTION OF WELL FROM TOWN (CIRCLE BOX): N 8 | NW 8-9 | NE 8-9 | W 8 | TOWN | E 8 | SW 8-9 | S 8 | SE 8-9

NEAR WHAT ROAD: Silent Lake Drive
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): NORTH | WEST | EAST | SOUTH
DISTANCE FROM ROAD: 510
ENTER FT OR MI: Ft

TAX MAP: 34 BLK: 14 PARCEL: 423

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL
COUNTY NAME: Howard | COUNTY NO.: A49861E
STATE SIGNATURE: Mark E. Rifkin | INSERT S
DATE ISSUED: 09/16/97 | EXP. DATE: 9/16/98
NORTH GRID: 49700 | EAST GRID: 08050

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 8045
N 4907
000 000

11/10/97 3HR PUMP 7AM 9 DDGPM
NO INSP
+ALL

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 =

COUNTY

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
8325-H Ellicott Mills Drive
Ellicott City, MD 21043
461-8033

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation ✓
Replacement

Receipt # _____
Date _____

Name of Installer WILLOUGHBY PLUMBING Telephone 410-781-7051

License Number #6992 Certified Well Pump Installer ___ Well Driller ___ Registered Plumber ✓

Name of Property Owner DALE THOMPSON BUILDERS Telephone 410-781-7051
Subdivision SORINDALE ESTATES Lot # 15 Well Tag # HO-94-1279
Site Address 13509 SILENT LAKE
CLARKSVILLE, MD 21029

Pump
1. Type
   a. Deep well jet ___
   b. Shallow well jet ___
   c. Submersible ✓
2. Make JACUZZI
3. Model # ___
4. Capacity 11 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 TAPE

Motor
1. Horsepower 3/4 HP
2. RPM ___
3. Voltage ___
   a. 110 ___
   b. 220 ✓

Pitless Adapter
1. Make HADDARD
2. Model # ___
3. Depth 4 FT.

Tank
1. Capacity 40 gal
2. Pressure relief valve? YES

Piping
1. Type CRESTLINE
2. Size 1"
3. NSF and/or BOCA Code approved YES
4. Depth of supply line 4 Ft.

Well data
1. Depth 285 ft.
2. Yield 12 GPM
3. Static water level ___ ft.
4. Will water supply be disinfected by installer? NO

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: Chris Willoughby

Date: 7/20/89

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

HO-815

P01

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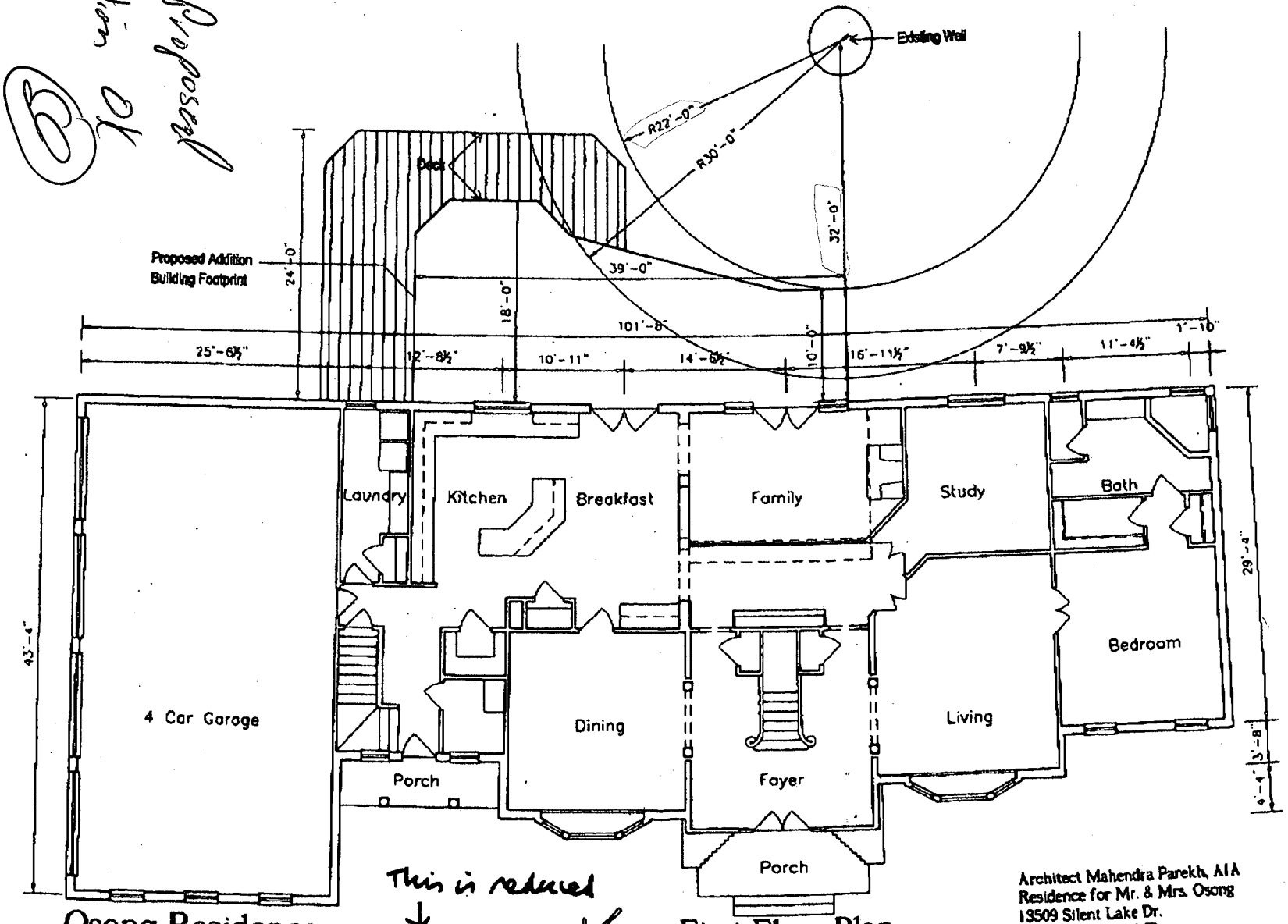
Exhibit B
Proposed Addition
9/23/03



This is reduced

Osong Residence

scale 1/8"=1'0"

First Floor Plan

Architect Mahendra Parekh, AIA
Residence for Mr. & Mrs. Osong
13509 Silent Lake Dr.
Howard County, MD

Keep in file CO

Mahendra Parekh, AIA, Architect
6802 Maple Leaf court
Apt. # 201
Baltimore, Md. 21202

Voice 443 885 3910
Fax 443 885 8233

April 8, 2003

To:
Frank Skinner, Director
Bureau of Environmental Health, Howard County
3525 Ellicott Mills Drive
Ellicott City, MD 21043

Sub. Request for a Waiver, 13509 Silent Lake Drive, Clarksville, MD 21029

Dear Mr. Skinner,

As per my conversation with your office referenced above, I am requesting a waiver on the distance of required 30 feet from the well for a proposed sun/ family room addition. The proposed three-story addition including the basement allows my clients to expand the family space on first floor and create a better connection and access to the planned entertainment space in the basement as well as the second floor bedrooms.

The attached three drawings explain the scheme as completely as possible at this stage. Upon acceptance of the request for the waiver we will proceed with the architectural design, however no changes are expected beyond the limits of addition shown here.

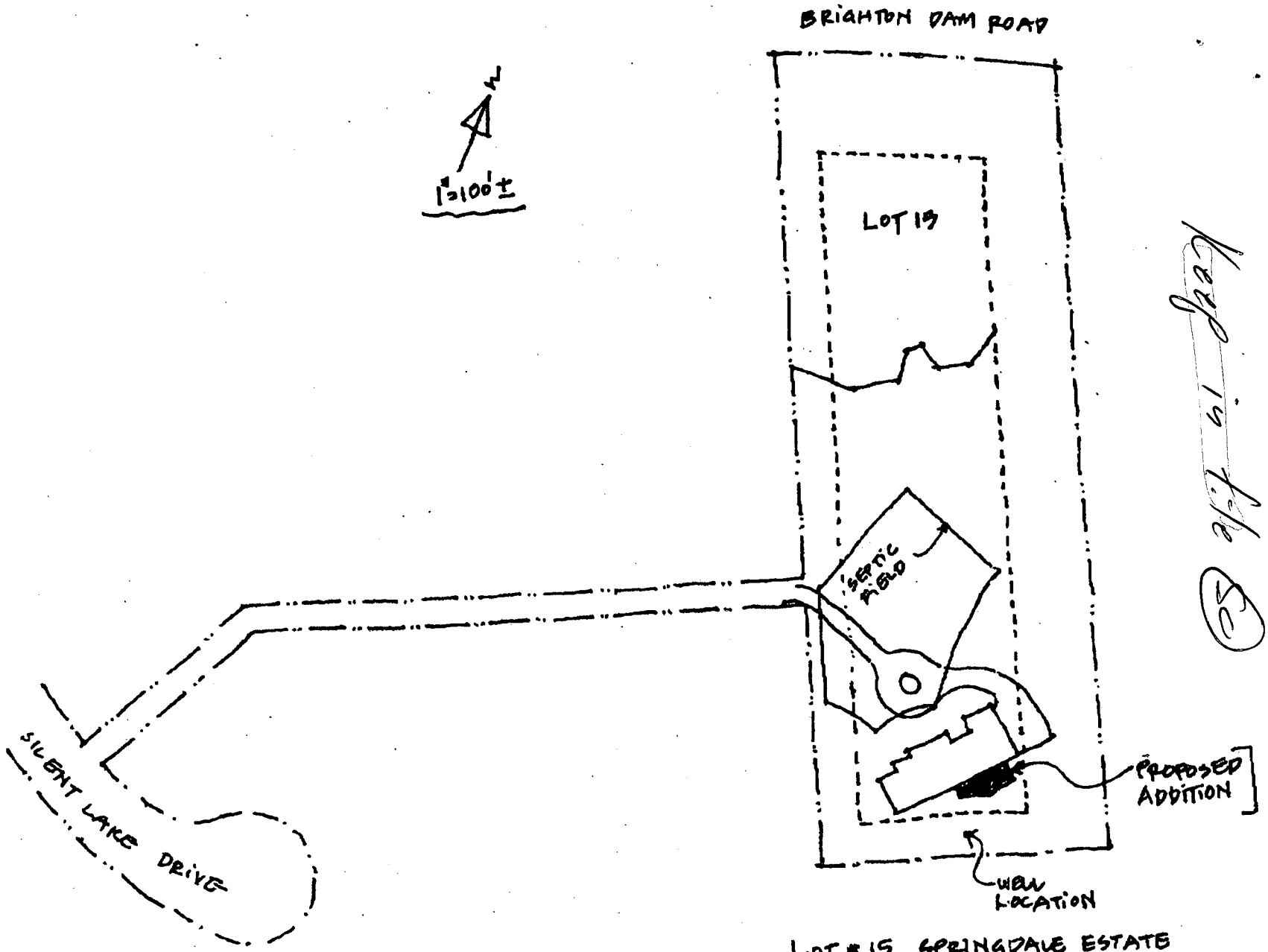
If you have any questions, please do not hesitate to call or write me.

Sincerely,

Mahendra Parekh, AIA

Cc: Osongs

Received a phone message from Mr Skinner, 3rd wk of April on my voice - NO written waiver was necessary and that the request/waiver as shown is approved. ✓ {When the drawings are filed for Bldg permit. notation to this effected can be made



RESIDENCE FOR
MR/MRS OSANG
13509 SILENT LAKE DR
HOWARD COUNTY. MD

LOT # 15 SPRINGDALE ESTATE
5TH ELECTION DISTRICT
HOWARD COUNTY. MD

Architect. MAHENDRA PAREKH, AIA
443-885-3910

Keep in file

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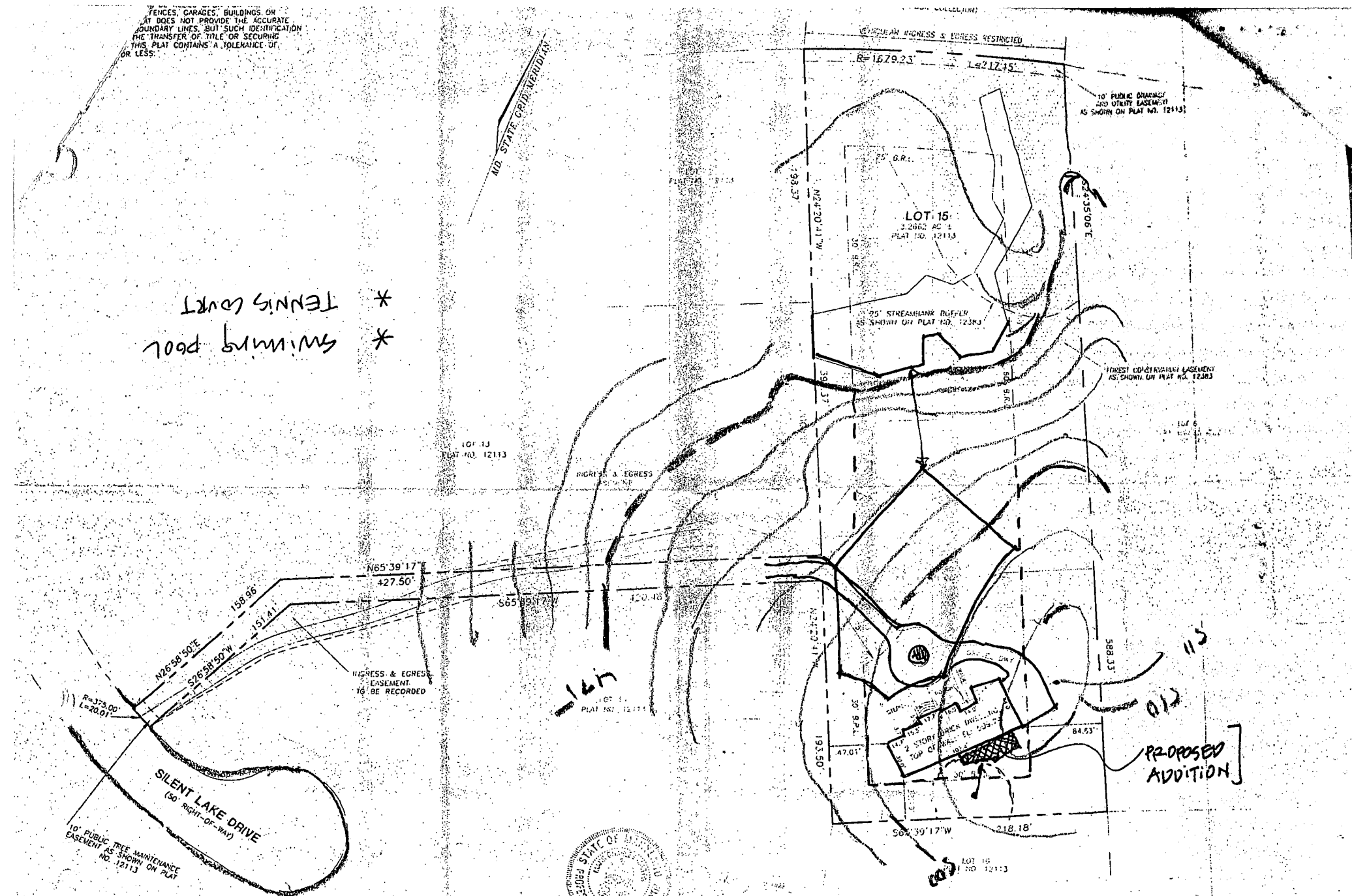
FENCES, GARAGES, BUILDINGS OR
AT DOES NOT PROVIDE THE ACCURATE
OUNDARY LINES, BUT SUCH IDENTIFICATION
THE TRANSFER OF TITLE OR SECURING
THIS PLAT CONTAINS A TOLERANCE OF
OR LESS.

* swimming pool
* TENNIS COURT



I HEREBY CERTIFY THAT THE IMPROVEMENTS ARE LOCATED AS SHOWN HEREON AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THERE ARE NO ENCROACHMENTS EXCEPT AS SHOWN.

Mark C. Martin 11/5/99

MARK C. MARTIN, PROFESSIONAL LAND SURVEYOR #10834

RECORD REFERENCES	LOCATION SURVEY
TAX MAP : 34	SPRINGDALE ESTATES
PARCEL : 60	LOT 15
PLAT NO./FOLIO : 12383,12113	5TH ELECTION DISTRICT
SCALE : 1"=50'	HOWARD COUNTY
DATE : 11-9-99	MARYLAND

VOGEL & ASSOCIATES
ENGINEERS·SURVEYORS·PLANNERS
3691 Park Avenue, Suite 101 • Ellicott City, Maryland 21
Tel 410.461.5819 Fax 410.465.3966