

LAYOUT 11/24/03-1807 INSP 4 _____
INSP 2 11/26/03-2004 INSP 5 _____
INSP 3 _____ INSP 6 _____

ISSUE DATE: 9/12/03

APPROVAL DATE: 11/26/03

**PERMIT
INDEXED**

04-366131

P 519571

A 50225-CC

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

Fogles Septic Clean, Inc IS PERMITTED TO INSTALL ☒ ALTER ☐

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

SUBDIVISION: Vineyards @ Cattail Creek LOT NUMBER: 27

ADDRESS: 3711 Sofia Court PROPERTY OWNER: Rylea Homes, Inc.

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: 240

LINEAR FEET OF TRENCH REQUIRED: 300 HOUSE SERVED BY PUBLIC WATER ☐

TRENCHES:	Trench to be 3.0 feet wide. Inlet 4.0 feet below original grade. Bottom maximum depth 6.0 feet below original grade. Effective area begins at 4.5 feet below original grade. 2.0 feet of stone below distribution pipe.
LOCATION:	Start the first trench slightly above the top right corner easement stake. Start the trenches with a 10' center to center spacing and run them on contour towards the opposite side of the lot.
NOTES:	Maximize use of the area or there may not be room for two repairs. Maintain 100' of separation between the septic tank and the well. Shallow system only-High water table.

PLANS APPROVED: Brian Baker 9/12/03 DATE: 7/3/03

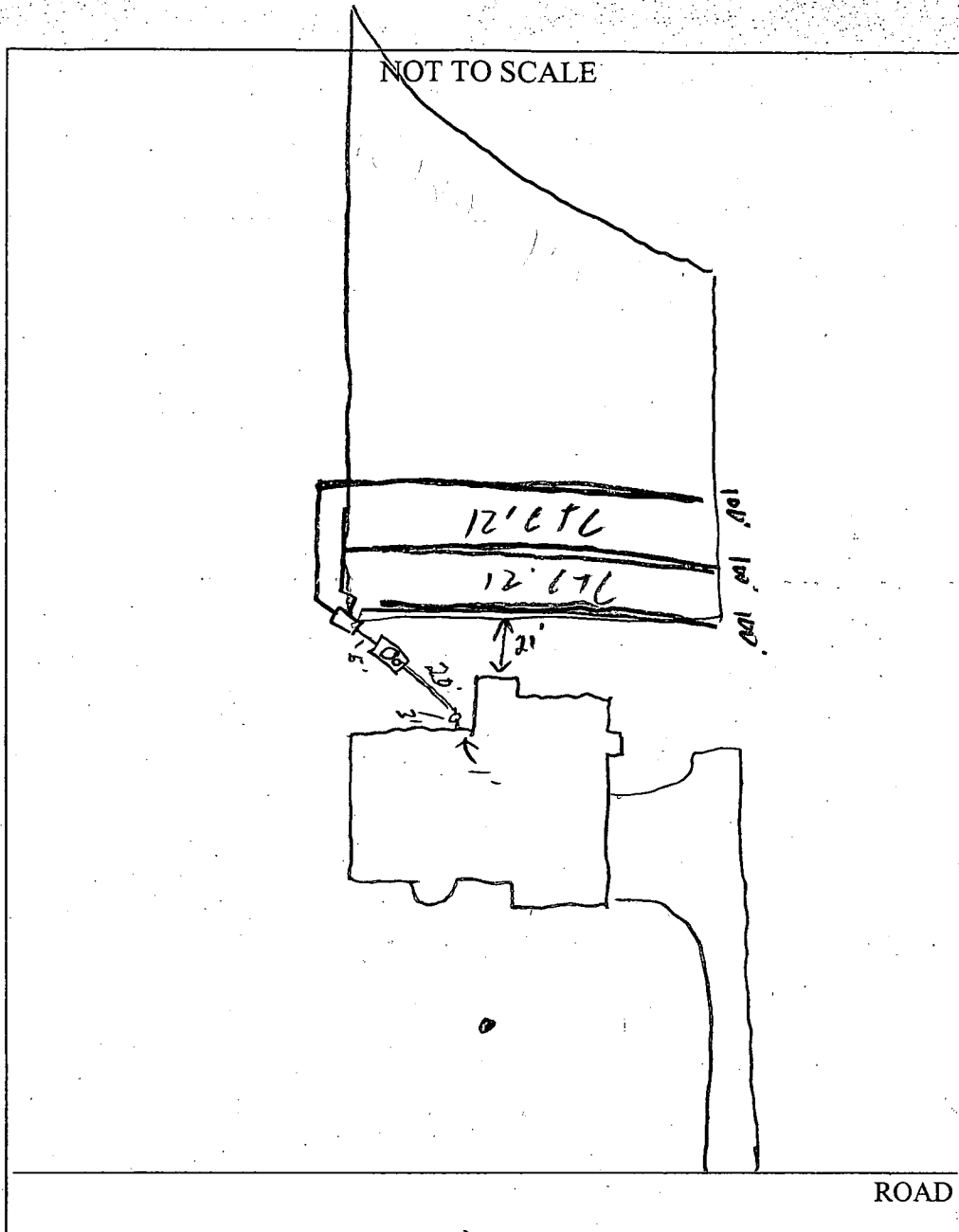
NOTES: PERMIT VOID AFTER 2 YEARS
CONTRACTOR IS RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
WATERTIGHT SEPTIC TANKS REQUIRED
ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL UNLESS SPECIFICALLY AUTHORIZED
MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND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

**BUILDING PERMIT SIGNED
AND RETURNED**

4/6/2004 B00147188 UG 1000 GAL PROPANE TANK
9-8-04 B0015049-DECK

A 50225-CC



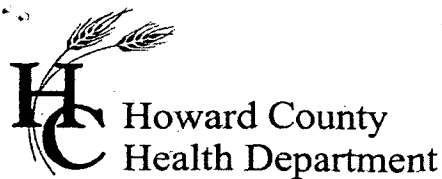
TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
<u>3</u>	<u>4</u>	<u>6</u>
NUMBER OF TRENCHES	<u>3</u>	
TOTAL LENGTH	<u>304'</u>	
ABSORPTION AREA	<u>900.46</u>	
DISTRIBUTION BOX LEVEL	<u>✓</u>	
DISTRIBUTION BOX BAFFLE	<u>✓</u>	
DISTRIBUTION BOX PORT	<u>✓</u>	

SEPTIC TANK DATA	
SEPTIC TANK 1 LEVEL	<u>✓</u>
CAPACITY	<u>1250</u> GAL
SEAM LOC	<u>Top</u>
TANK LID DEPTH	<u>1.5</u>
BAFFLES	<u>✓</u>
BAFFLE FILTER	<u>✓</u>
MANHOLE LOC	<u>Center</u>
6" PORT LOC	<u>Front</u>
WATERTIGHT TEST	<u>✓</u>
SEPTIC TANK 2 LEVEL	<u>✓</u>
CAPACITY	<u> </u> GAL
SEAM LOC	<u> </u>
TANK LID DEPTH	<u> </u>
BAFFLES	<u>N/A</u>
BAFFLE FILTER	<u> </u>
MANHOLE LOC	<u> </u>
6" PORT LOC	<u> </u>
WATERTIGHT TEST	<u> </u>

PRE-CONSTRUCTION 11/24/03 - SRA stake, contour accurate, house con
change, OK to install (3) 12' x 6' w/ D.B. on other side of SRA (SC)
 INSTALLATION 11/26/03 OK to cover all work (SC)

FINAL INSPECTOR [Signature] DATE OF APPROVAL 11/26/03

BUILDING PERMIT SIGNED
 AND RETURNED



3525 H Ellicott Mills Drive, Ellicott City, MD 21043
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

Pennv E. Borenstein, M.D., M.P.H., Health Officer

May 14, 2004

Rylea Homes
P. O. Box 389
Mt. Airy, MD 21771

RE: Vineyards at Cattail Creek, Lot 27
3711 Sofia Court
BP # B00140943
Well Permit #HO-94-3553

Dear Sirs:

This is to advise you that the septic system for the above referenced property has been installed and inspected. **Final approval of the septic system was granted on November 26, 2003.**

The water sample results indicate that the water samples submitted for testing were free of coliform and fecal coliform bacteria at the time of sampling and are bacteriologically safe for drinking.

The raw nitrate sample results were previously documented to be 13.5 ppm. **A nitrate device has been installed to treat the excessive nitrate contamination. The nitrate treatment device appears to be operating properly as evidenced by the water sample results reported on May 13, 2004, which indicates a nitrate level of <1.0 ppm.**

COMAR 26.04.04.09 prohibits approval of any water supply with a nitrate-nitrogen contaminant level in excess of 10 parts per million. **This department will grant a permanent deviation to that section of the regulation on condition that the nitrate removal system effectively maintains the nitrate-nitrogen contaminant level of 10 ppm or less.**

Furthermore, it will be necessary for you to comply with the following conditions:

1. The system must be properly operated and maintained continuously in accordance with the service contract for the life of the **residence**.
2. It is recommended that a laboratory certified for water testing perform a yearly nitrate analysis. (Certified to test for nitrates)
3. If you decide to sell or rent your home in the future, you must make any potential buyer/tenant aware of the above condition.

INTERIM CERTIFICATE OF POTABILITY
(Permanent Deviation-for-Nitrates)

This certifies that **the initial** sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under well permit #HO-94-3553. **Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies.** Based upon satisfactory investigation and evaluation, the Howard County Health Department as authorized by the Maryland Department of the Environment accepts this well system as required by COMAR 26.04.04.

This certificate may become final upon completion of the second bacteriological and nitrate tests, which may be taken by the health department within six months of the date of this letter. Please contact (410) 313-1773 to schedule a final water sample appointment. Currently, there is no charge for this final sampling.

Date of Water Sample(s): 05/05/2004, 05/10/2004 & 05/13/2004

Date of Well Completion: 1/27/2003

Respectfully,

Brian Baker

Brian Baker
Registered Environmental Sanitarian
Well and Septic Program

mlb

cc: Building Inspector's office,
Community Environmental Health Program
File

DRAWN BY: CDD
 DESIGN BY:
 REVIEW BY: GJG
 DATE: 7-25-09
 SCALE: 1"=50'
 JOB NO: 2001225
 SHEET: 1 OF 1

3/10/03
DATE

THESE PLANS HAVE BEEN REVIEWED FOR THE HOWARD
SOIL CONSERVATION DISTRICT AND MEETS TECHNICAL
REQUIREMENTS.

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

1. A minimum of 48 hours notice must be given to the Howard County Department of Inspections, Licenses and Permits, Sediment Control Division prior to the start of any construction (913-1855).
2. All vegetative and structural practices are to be installed according to the provisions of this plan and are to be in conformance with the most current MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL and revisions thereto.

Diagram illustrating the cross-section of a geotextile fence structure. The diagram shows a series of vertical posts connected by a horizontal geotextile material. The following dimensions and components are labeled:

- 10" MAXIMUM CENTER TO CENTER (between posts)
- 36" MINIMUM LENGTH FENCE POST DRIVEN A MINIMUM OF 16" INTO GROUND
- 18" MINIMUM HEIGHT OF GEOTEXTILE GLASS F
- 8" MINIMUM DEPTH IN GROUND
- FLOOR (indicated by diagonal hatching lines)

TOP VIEW

POSTS

SECTION A

SECTION B

STAPLE

CROSS SECTION

PETER CLOTH

FLOW

FENCE POST MINIMUM 2" OF GROUND

MINIMUM 2" OF GROUND

FENCE POST MINIMUM OF 1" OF THE GROUND

ENRICH GEOTEXTILE CLASS F A MINIMUM OF 3" VERTICALLY INTO THE GROUND

STANDARD 3"

— OF —

JOINING TWO ADJACENT SILT

CONSTRUCTION SPECIFICATIONS

1. FENCE POSTS SHALL BE A MINIMUM OF 3x5 LOGS OR 16" WIDENING INTO 12" WIDENING AT THE TOP. THE POSTS SHALL BE 12' LONG AND 4" DIA. THE FENCE SHALL BE 4' HIGH.

2. THE FENCE SHALL BE MADE OF SOUND QUALITY HARDWOOD. STEEL POSTS WILL BE STANDARD 2" OR 3" SECTION HEIGHTS NOT LESS THAN 1.00 POUND PER LINEAR FOOT.

3. GEOTEXTILE SHALL BE FASTENED SECURELY TO EACH FENCE POST WITH NINE TEES OR STAPLES AT TOP AND MID-SECTION AND SHALL MEET THE FOLLOWING REQUIREMENTS:

GEOTEXTILE CLASS F		
TENSILE STRENGTH	50 LBS/IN (MIN)	TEST: HSBT 308
TENSILE ELONGATION	20 LBS/IN (MIN)	TEST: HSBT 308
FLO. RATE	0.5 GAL./Y ² MINUTE (MAX)	TEST: HSBT 322
FILTERING EFFICIENCY	15% (MIN)	TEST: HSBT 322

4. WHERE ENDS OF GEOTEXTILE FABRIC COME TOGETHER, THEY SHALL BE OVERLAPPED, FOLDED, AND STAPLED TO PREVENT SEDIMENT BYPASS.

5. 1/4" GAL. SHALL BE INSPECTED AFTER EACH RAINFALL EVENT AND MAINTAINED WHEN BULGES OCCUR OR WHEN SEDIMENT ACCUMULATION REACHED 50% OF THE FABRIC HEIGHT.

	(Maximum) <u>Slope Length</u>	(Maximum) <u>Silt Fence Length</u>
Slope Steepness		
Flatter than 30:1	unlimited	unlimited
30:1 to 10:1	125 feet	1,000 feet
10:1 to 5:1	100 feet	750 feet
5:1 to 3:1	60 feet	500 feet
3:1 to 2:1	40 feet	250 feet
2:1 and steeper	20 feet	125 feet

1

1. Topsoil salvaged from the existing site may be used provided that it meets the standards as set forth in these specifications. Typically, the depth of topsoil to be salvaged for a given soil type can be found in the representative soil profile section in the Soil Survey published by USDA-SCS in cooperation with Maryland Agricultural Experimental Station.

- V. Topsoil Application**
- I. When topsoiling, maintain adequate erosion and sediment control practices such as diversions, grade stabilization structures, earth dikes, slope silt fence and sediment basins.
- II. Grades on the areas to be topsoiled, which have been previously established, shall be maintained, abated $\pm 8"$ in elevation.
- III. Topsoil shall be uniformly distributed in a 4" to 6" layer and tightly compacted to a minimum thickness of 4". Spreading shall be performed in such a manner as to avoid soil compaction and rutting. Topsoil shall be applied in one-lift only.
- IV. Preparation and Usage. Any irregularities in the surface resulting from topsoiling or other operations shall be corrected in order to prevent the formation of sediment traps.
- V. Topsoil shall not be placed until the topsoil or subsoil is in a frozen or muddy condition, when the subsoil is excessively wet or in a condition that may otherwise be detrimental to proper grading and seedbed preparation.
- VI. Alternative for Permanent Seeding -** Instead of applying the full amounts of lim and commercial fertilizer, composted sludge and amendments may be applied as specified below.
- a) Composted sludge material for use as a soil conditioner for sites having bare or eroded areas. Composted sludge shall be applied at a rate of 10 to 20 tons per acre for sites having disturbed areas under 5 acres shall conform to the following requirements:
- a) Composted sludge shall be applied by, or originate from, a person or persons that are permitted at the time of application of the compost by the Maryland Department of the Environment under COMAR 26.04.02.
- b) Composted sludge shall contain at least: 1 percent nitrogen, 1.5 percent phosphorus, and 1 percent potassium. Compost shall have a pH of 7.0 to 8.0. If Compost does not meet these requirements, the appropriate constituents must be added to meet the minimum values at the price of the compost.
- c) Composted sludge shall be applied at a rate of 1 ton/1,000 square feet.
- d) Composted sludge shall be amended with a potassium fertilizer applied at the rate of 1 ton/1,000 square feet, and the normal lime application rate.

SEEDBED PREPARATION: LOOSEN UPPER THREE INCHES OF SOIL BY ROLLING OR DISKING OR OTHER ACCEPTABLE MEANS BEFORE SEEDING, IF NOT PREVIOUSLY SO CORRECTED.

SOIL AMENDMENTS IN LIEU OF SOIL TEST RECOMMENDATIONS, USE ONE OF THE FOLLOWING SCHEDULES:

1) FERTILIZER: 2 TONS PER ACRE DOLOMITIC LIMESTONE (42 LBS./1000 SQ.FT.) AND 800 LBS. PER ACRE 10-10-10 FERTILIZER (14 LBS./1000 SQ.FT.) BEFORE SEEDING, HARKON OR DISK INTO 2" DEEP. OR 300 LBS. PER ACRE 0-0-60 SUPERPHOSPHATE FERTILIZER (4 LBS./1000 SQ.FT.)

2) ACCEPTABLE - APPLY 2 TONS PER ACRE DOLOMITIC LIMESTONE (42 LBS./1000 SQ.FT.) AND 1000 LBS. PER ACRE 10-10-10 FERTILIZER (25 LBS./1000 SQ.FT.) BEFORE SEEDING, HARKON OR DISK INTO UPPER THREE INCHES OF SOIL

[illegible]

SEEDBED PREPARATION: LOOSEN UPPER THREE INCHES OF SOIL BY RAKING, DISKING, OR OTHER ACCEPTABLE MEANS BEFORE SEEDING IF NOT PREVIOUSLY LOOSENED.

**SOIL AMENDMENTS: APPLY 600 LBS. PER ACRE 10-10-10 FERTILIZER
1000 SQ.FT.)**

**SEEDING: POOR PERIODS MARCH 1 THROUGH APRIL 30 AND AUGUST 15
THROUGH OCTOBER 15. SEED WITH 2-1/2 BUSHEL PER ACRE OF ANNU
(3.2 LBS./1000 SQ. FT.) FOR THE PERIOD OF MAY 1 THROUGH AUGUST
SEED WITH 3 LBS. PER ACRE OF WEEPING LOVESGRASS (0.7 LBS./1000
FOR THE PERIOD OF NOVEMBER 16 THROUGH NOVEMBER 28. PROTEC
SITE BY APPLYING 2 TONS PER ACRE OF WELL ANCHORED STRAIN MUL
AND SEED AS SOON AS POSSIBLE IN THE SPRING, OR USE SOD.**

MULCHING: APPLY 1-1/2 TO 2 TONS PER ACRE (70 TO 90 LBS./1000 OF UNROOTED NEEDLE FREE SMALL GRAIN STRAW IMMEDIATELY AFTER SEEDING, ANCHOR IMMEDIATELY AFTER APPLICATION USING MULCH ANCHORS (8 GAL/1000 SQ.FT.) OR (5 GAL/1000 SQ.FT.) OF AN ANCHALT ON LAT. AREAS ON SLOPES 2 FEET OR HIGHER, USE 3-6 GAL/ACRE (8 GAL/1000 SQ.FT.) FOR ANCHORING.

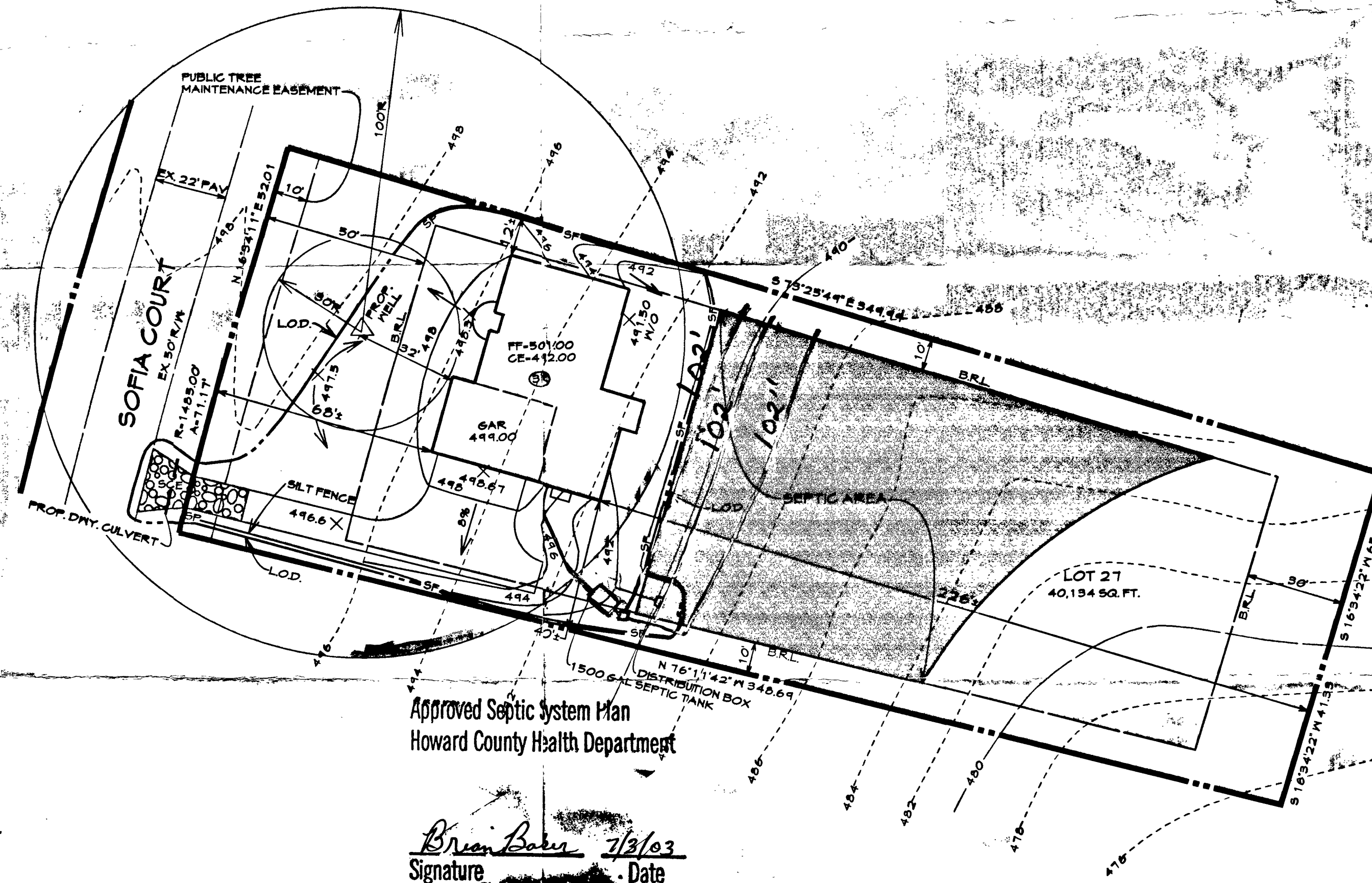
REFER TO THE 1985 MARYLAND STANDARDS AND SPECIFICATIONS FOR FROST PROTECTION CONTROL FOR ADDITIONAL RATES AND METHOD NOT COVERED.

GP-03-40

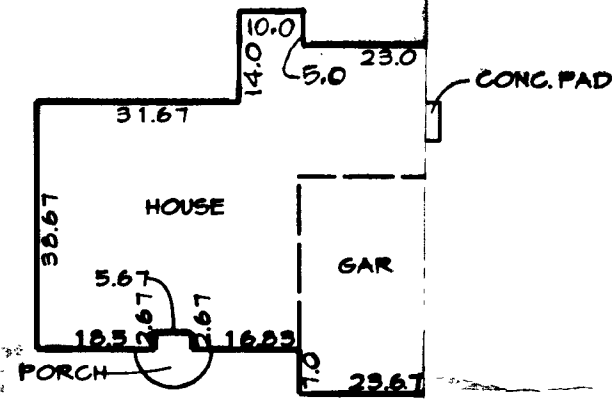
OWNER/DEVELOPER

JIM F. RYAN JR.
393 HEAVEN CAUSE CT.
M. AIRY MD 21171

1. OBTAIN GRADING PERMIT.
2. INSTALL SEDIMENT CONTROLS AS SHOWN ON PLAN. (1 DAY)
3. PERFORM NECESSARY GRADING AND STABILIZE THE SITE. BUILD HOUSE (6 MOS.)
4. AFTER THE SITE IS STABILIZED AND PERMISSION IS GRANTED FROM THE SEDIMENT CONTROL INSPECTOR, REMOVE SEDIMENT CONTROLS AND STABILIZE ANY REMAINING DISTURBED AREAS. (2 DAYS)



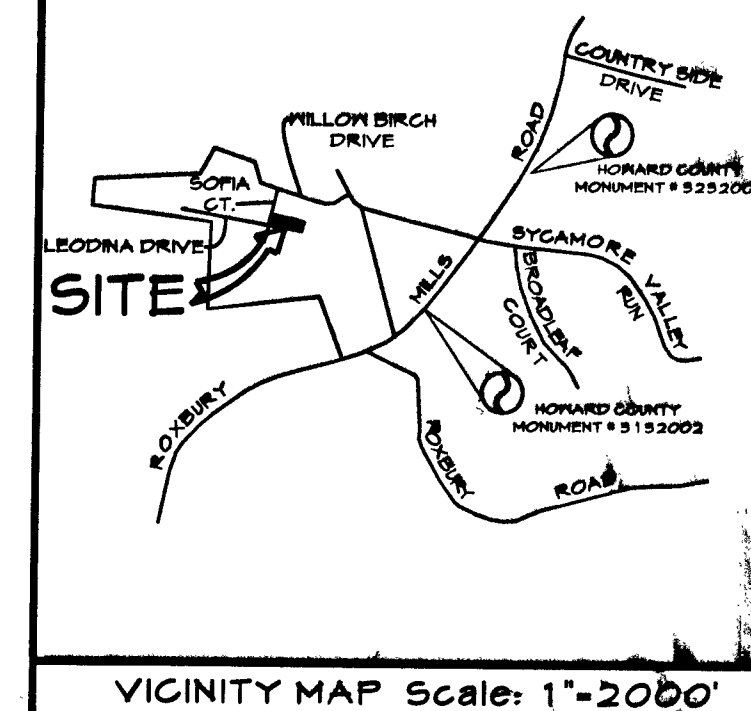
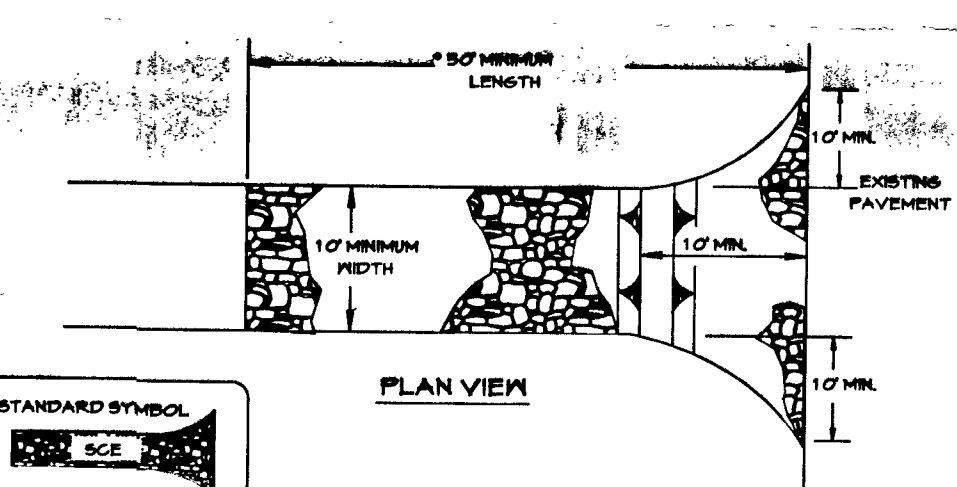
SCALE 1"=30'



SCALE 1"=30'

NOTE:
HOUSE AN ONLY BE GRAY
SEWERED FROM FIRST FLOOR

1. SEPTIC BASINMENT SUBJECT TO HOWARD COUNTY HEALTH DEPARTMENT NOTIFICATION.
2. PROPOSED 15,000 GALLON SEPTIC TANK.
3. A. FIRST FLOOR ELEVATION: \$01.00
B. BASEMENT ELEVATION: \$01.00
C. INVERT OF SEPTIC SYSTEM AT HOUSE: \$5.00
D. INVERT AT SEPTIC VERT AT SEPTIC TANK: \$4.00
E. INVERT OUT AT SEPTIC TANK: \$4.50
F. PROPOSED GRADE AT SEPTIC TANK: \$2.00
G. INVERT AT DISTRIBUTION BOX: \$2.00
H. EXISTING GROUND OVER DISTRIBUTION BOX: \$4.00
4. NORTH ARROW SHOWN AT THIS LOCATION.
5. CONTRACTOR / BUILDER TO VERIFY ELEVATIONS IN FIELD BEFORE BEGINNING ANY CONSTRUCTION.
6. BUILDER TO VERIFY AVAILABILITY OF BASEMENT SEPTIC SERVICE PRIOR TO DWELLING TAKEOUT.

[illegible]

1. LENGTH - MINIMUM OF 90' (90' FOR SINGLE RESIDENCE LOT).
2. WIDTH - 10' MINIMUM, SHOULD BE PLACED AT THE EXISTING ROAD TO PROVIDE A TURNING RADIUS.
3. GEOTEXTILE FABRIC (PIPER CLOTH) SHALL BE PLACED OVER THE EXISTING GROUND PRIOR TO GRADING STONE. (WITH PLANNING APPROVAL AUTHORITY MAY NOT REQUIRE SINGLE FAMILY RESIDENCES TO USE GEOTEXTILE.)
4. STONE - CRUSHED AGGREGATE (2" TO 4") OR RECLAIMED OR RECYCLED CONCRETE. DEPTH SHALL BE PLACED AT LEAST 8" DEEP OVER THE LENGTH AND WIDTH OF THE ENTRANCE.
5. SURFACE WATER - ALL SURFACE WATER FLOWING TO OR DIVERTED TOWARD CONSTRUCTION ENTRANCES SHALL BE PIPED THROUGH THE ENTRANCE, MAINTAINING POSITIVE DRAINAGE. PIPE INSTALLED THROUGH THE STABILIZED CONSTRUCTION ENTRANCE SHALL BE PROTECTED WITH A REMOVABLE BENCH WITH 8" X 8" BOLTS AND A MINIMUM OF 6" OF STONE OVER THE PIPE. PIPE HAS TO BE SIZED ACCORDING TO THE DRAINAGE, WHEN THE SITE IS LOCATED AT A NEW SPOT AND HAS NO DRAINAGE TO CONVEY A PIPE WILL NOT BE NECESSARY. PIPE SHOULD BE SIZED ACCORDING TO THE AMOUNT OF RUNOFF TO BE CONVEYED. A 6" MINIMUM WILL BE REQUIRED.
6. LOCATION - A STABILIZED CONSTRUCTION ENTRANCE SHALL BE LOCATED AT EVERY POINT WHERE CONSTRUCTION TRUCKS ENTER OR LEAVES A CONSTRUCTION SITE. VEHICLES LEAVING THE SITE MUST TRAVEL OVER THE STABILIZED ENTRANCE TO THE STREET.

SEPTIC AREA

SF

DENOTES SILT FENCE

L.O.D.

LIMIT OF DISTURBANCE

PROPOSED WELL

PLAN TO ACCOMPANY APPLICATION
FOR BUILDING PERMIT
VINEYARDS AT CATAIL CREEK
LOT 27
4TH ELECTION DISTRICT CARROLL COUNTY MARYLAND
TAX MAP 21 PARCE 225
PLAT # 1483L

CLSA

Carroll Land Services
Incorporated
Engineers • Surveyors • Land Development Consultants
Landscape Architects • Environmental Specialists
439 East Main Street Westminster, MD 21157-5539
(410) 876-2017 FAX (410) 876-0009



Alfred L. Hansard
Professional Engineer Registration No. 23446

Date: 2/12/03

Drawing No. 2001225

County File No.:

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: Fogles Well Drilling Telephone #: 410-795-5670
Address: 580 Obrecht Rd
Sylesville md 21784

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer

License # and name of individual responsible for the field installation:

Name (Print): Allen Compton License# MSD009

*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: Rylea Homes Telephone #: _____
Subdivision: Cattail Creek Lot #: _____ Well Tag #: HO-94-3553
Site Address: 3711 Sofia Ct

Submersible Pump Data

Make: Goulds
Model #: 55807422
Pump Capacity 7 GPM
Well Yield: _____ GPM

Pitless Adapter

Make: Cornwell
Model#: N/A
Depth: 36 (36" min)
NSF approved: YES

Well Cap and Electric Conduit

Two piece watertight cap: YES
Screened, vented well cap: YES
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: 300 (feet)
If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4

Torque arrestors or Cable guards are required - Must circle one

Safety rope, if used, attached to inside of well casing with eye bolt N/A

Piping to house

Type: 1" Black Plastic
PSI: 160 (160 psi min)
Depth of supply line: 42 (36" min)

House Connection

PVC sleeved to undisturbed soil at wall penetration: YES
Approximate length of sleeve: 5
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.

Signature of company representative responsible for installation
Allen Compton

date
4-19-04

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

Date Insp. Requested: _____

Date Insp. Approved: 3/10/04 50

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

BB
✓
✓
✓
✓
✓
✓

C1 14304	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE TYPE	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED. COUNTY NUMBER 50225-CC																																																																																																																																																																																																																												
1 2 3 4 5 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)		PERMIT NO. FROM "PERMIT TO DRILL WELL" OKSRK HO-94-3553 3/6/03																																																																																																																																																																																																																													
ST/CO USE ONLY DATE RECEIVED MM DD YY 8 13	DATE WELL COMPLETED MM DD YY 1 27 03	Depth of Well 22 300 26 (TO NEAREST FOOT)																																																																																																																																																																																																																													
OWNER MANNARELLI last name SOFIA COURT first name STREET OR RFD VINEYARD AT CATTAIL CREEK TOWN GLENWOOD SUBDIVISION SECTION LOT 27																																																																																																																																																																																																																															
WELL LOG Not required for driven wells STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING.		GROUTING RECORD YES NO WELL HAS BEEN GROUTED <input checked="" type="checkbox"/> <input type="checkbox"/> (Circle Appropriate Box) TYPE OF GROUTING MATERIAL (Circle one) CEMENT <input checked="" type="checkbox"/> BENTONITE CLAY <input type="checkbox"/> NO. OF BAGS 17 NO. OF POUNDS 1598 GALLONS OF WATER 102 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 40 ft. (enter 0 if from surface)																																																																																																																																																																																																																													
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">DESCRIPTION (Use additional sheets if needed)</th> <th colspan="2">FEET</th> <th rowspan="2">check if water bearing</th> </tr> <tr> <th>FROM</th> <th>TO</th> </tr> </thead> <tbody> <tr> <td>Brown Shale</td> <td>0</td> <td>75</td> <td></td> </tr> <tr> <td>Gray Limestone</td> <td>75</td> <td>180</td> <td></td> </tr> <tr> <td>White</td> <td>180</td> <td>181</td> <td>✓</td> </tr> <tr> <td>Gray Limestone</td> <td>181</td> <td>270</td> <td></td> </tr> <tr> <td>White</td> <td>270</td> <td>271</td> <td>✓</td> </tr> <tr> <td>Gray Limestone</td> <td>271</td> <td>300</td> <td></td> </tr> </tbody> </table>		DESCRIPTION (Use additional sheets if needed)	FEET		check if water bearing	FROM	TO	Brown Shale	0	75		Gray Limestone	75	180		White	180	181	✓	Gray Limestone	181	270		White	270	271	✓	Gray Limestone	271	300		CASING RECORD casing types insert appropriate code below <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td><input checked="" type="checkbox"/> ST STEEL</td> <td><input type="checkbox"/> CO CONCRETE</td> </tr> <tr> <td><input type="checkbox"/> PL PLASTIC</td> <td><input type="checkbox"/> OT OTHER</td> </tr> </table> MAIN CASING TYPE ST Nominal diameter top (main) casing (nearest inch) 06 Total depth of main casing (nearest foot) 80 OTHER CASING (if used) diameter (nearest inch) depth (feet) from to A C H S C A S I N G		<input checked="" type="checkbox"/> ST STEEL	<input type="checkbox"/> CO CONCRETE	<input type="checkbox"/> PL PLASTIC	<input type="checkbox"/> OT OTHER																																																																																																																																																																																										
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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.		SCREEN RECORD screen type or open hole insert appropriate code below <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td><input checked="" type="checkbox"/> ST STEEL</td> <td><input type="checkbox"/> BR BRASS</td> <td><input type="checkbox"/> HO HOLE</td> </tr> <tr> <td><input type="checkbox"/> PL PLASTIC</td> <td><input type="checkbox"/> PL BRONZE</td> <td><input type="checkbox"/> OT OTHER</td> </tr> </table>		<input checked="" type="checkbox"/> ST STEEL	<input type="checkbox"/> BR BRASS	<input type="checkbox"/> HO HOLE	<input type="checkbox"/> PL PLASTIC	<input type="checkbox"/> PL BRONZE	<input type="checkbox"/> OT OTHER																																																																																																																																																																																																																						
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DRILLERS LIC. NO. MSD 009 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. D		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 70 72 74 75 76 TELESCOPE CASING LOG INDICATOR OTHER DATA																																																																																																																																																																																																																													
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		C3 PUMPING TEST HOURS PUMPED (nearest hour) 03 PUMPING RATE (gal. per min.) 12 METHOD USED TO MEASURE PUMPING RATE 194L WATER LEVEL (distance from land surface) BEFORE PUMPING 34 ft. WHEN PUMPING 114 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																																																																																																																																																																																																																													
DRILLERS LIC. NO. MSD 009 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. D		PUMP INSTALLED DRILLER INSTALLED PUMP (CIRCLE) (YES or NO) 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) 31 35 PUMP HORSE POWER 37 41 PUMP COLUMN LENGTH (nearest ft.) 43 47 CASING HEIGHT (circle appropriate box and enter casing height) + above } LAND SURFACE - below } 02 (nearest foot)																																																																																																																																																																																																																													
DRILLERS LIC. NO. MSD 009 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. D		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) See Plat																																																																																																																																																																																																																													

B 1	7488	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL 517980 please type	STATE PERMIT NUMBER HO-94-3553 <small>fill in this form completely</small>
Date Received (APA) 10-30-02		OWNER INFORMATION		
8 MM DD YY 13				
15 Last Name Mario Mannarelli		Owner First Name Sons		34
36 Street or RFD 2929 Summit Circle		55		
57 Town Ellicott City Md		70	State MD	76 Zip 21043
DRILLER INFORMATION				
Driller's Name Allen Compton		M SD 009 License No. 81		
Firm Name Egles Well Drilling				
Address 580 Obrecht RD				
Signature <i>Allen Compton</i>		Date 10-18-02		
B 2		WELL INFORMATION		
1 2		APPROX. PUMPING RATE (GAL. PER MIN.) 5		
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY)		500		
		14 20		
USE FOR WATER (CIRCLE APPROPRIATE BOX)				
<input checked="" type="checkbox"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION				
<input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)				
<input type="checkbox"/> INDUSTRIAL, COMMERCIAL, DEWATERING				
<input type="checkbox"/> PUBLIC WATER SUPPLY WELL				
<input type="checkbox"/> TEST, OBSERVATION, MONITORING				
<input type="checkbox"/> GEO-THERMAL				
APPROXIMATE DEPTH OF WELL 300 FEET				
APPROXIMATE DIAMETER OF WELL 6 INCH				
METHOD OF DRILLING (circle one)				
BORED (or Augered) JETTED Jetted & DRIVEN				
AIR-ROTARY <input type="checkbox"/> AIR-PERCussion <input checked="" type="checkbox"/> ROTARY (Hydraulic Rotary)				
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-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS				
<input type="checkbox"/> THIS WELL WILL DEEPEM 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 _____ G _____				
PERMIT No. HO-94-3553				
SPECIAL CONDITIONS NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED				

LOCATION OF WELL

8 COUNTY **Howard** 21

23 SUBDIVISION **VINEYARDS AT CATTAIL CREEK** 42

SECTION **44** 46 LOT **27/10** 48 50

52 NEAREST TOWN **Greenwood** 71

MILES FROM TOWN (enter 0 if in town) **4** 73 76 77 78

50 ft. CT

1.1 NEAR WHAT ROAD 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

34 40 37

DISTANCE FROM ROAD **40** FT

ENTER FT OR MI 38 39

TAX MAP: **21** BLK: **8** PARCEL **225**

HOWARD **50225-CC**

COUNTY NAME COUNTY NO.

STATE SIGNATURE **Steve R. Krieg** INSERT S → 41

DATE ISSUED **10-31-02** **Steve R. Krieg** 10/31/02

43 MM DD YY 48 CO SIGNATURE EXP. DATE

NORTH GRID **527** 000 EAST GRID **0787** 000

50 55 57 63

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

1. **11/27/03 - Grant 8:30**

2. **12:30 Can't go on**

3. **grant looks OK**

WRITE THE BOX NUMBER FROM THE MAP HERE

E **78X7**

N **5207**

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

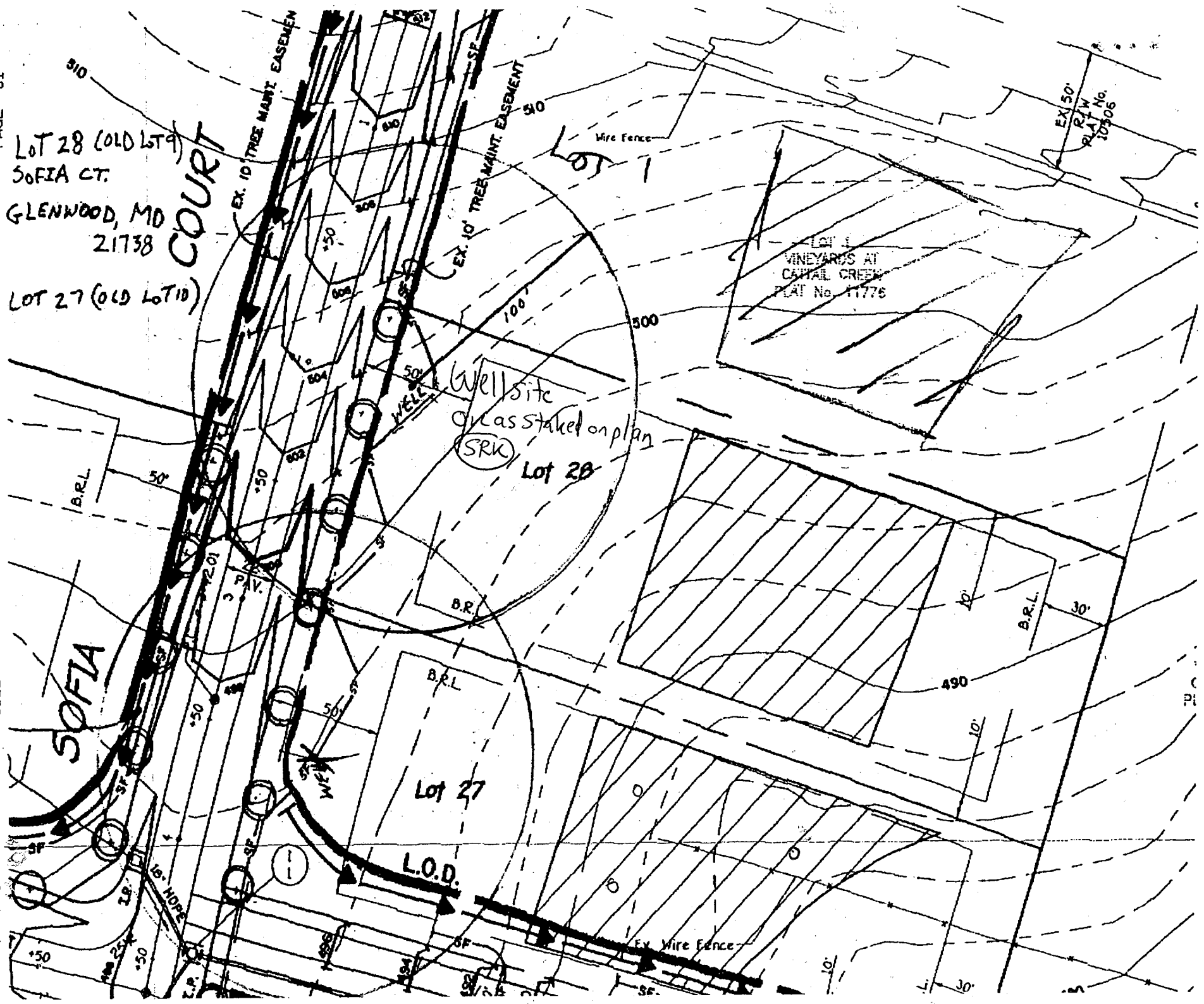
Willow Birch

Cattail Creek

97

LOT 28 (OLD LOT 9)
SOFIA CT.
GLENWOOD, MD
21738
LOT 27 (OLD LOT 10)

COURT



APPLICATION

PERCOLATION TESTING

A 50225CC

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 _____

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Vineyards at Cattail Creek LOT NO. 27

ROAD AND DESCRIPTION 3711 Sofia Ct.

TAX MAP _____ PARCEL # _____

SIZE OF LOT _____ 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 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

COUNTY #

SOIL PROFILE

SOIL PROFILE

Or Br Heavy
Loam

4'

Or Br
Loam

4' 7"

4' 3"

(B)

Red Br.
Heavy
Loam

4'

Red Br.
Loam~20%
Quartzite
Material
Starts
Changing
to a Sa
Loam

5' 5.5"

5' 8"

(C)

Or Br
Heavy
Loam

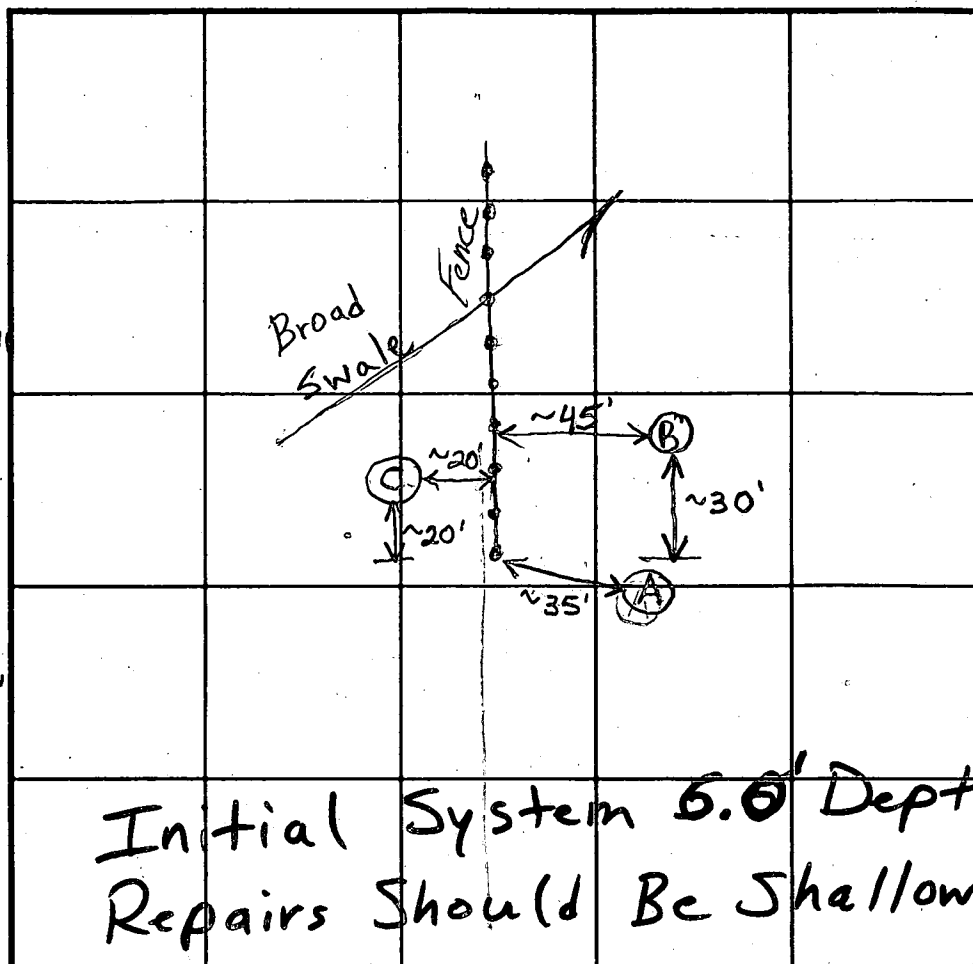
~15%

Quartzite

Red Br
Sa Loam

4' 8"

5'



Initial System 6.0' Depth -
Repairs Should Be Shallower

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Sofia Court

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
6/13/03	A	4' 3"	1:38	2:04	2:04	2:45	41
	B	5' 8"	2:17	2:27:30	2:27:30	2:48:30	11
	C	5'	2:36:30	2:40:30	2:40:30	2:47:30	7
	A	4' 9"	2:56:30	3:09	3:09	3:39	30

REMARKS

TYPE OF SOIL

TESTED BY B. BakerALSO PRESENT Mario Manarelli

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

21

TRENCH WIDTH

3

INLET DEPTH

34

MAXIMUM BOTTOM DEPTH

6.0

SQ. FT./BEDROOM

240

No Sidewall

APPLICATION

PERCOLATION TESTING

A 50285CC

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 Mario Mannarell

ADDRESS C/O Land Design + Development
12805 Hickory Ridge Rd PHONE 740-2100

AGENT OR PROSPECTIVE BUYER Maria Reich

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Vineyards at Cattail Creek LOT NO. 3/12

ROAD AND DESCRIPTION Route 97

TAX MAP 21 PARCEL # 2,132,220 + 211

SIZE OF LOT 1 + 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.

Maria Reich
(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. # Vineyards at CC SP-96-11 DATE 2-28-96

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

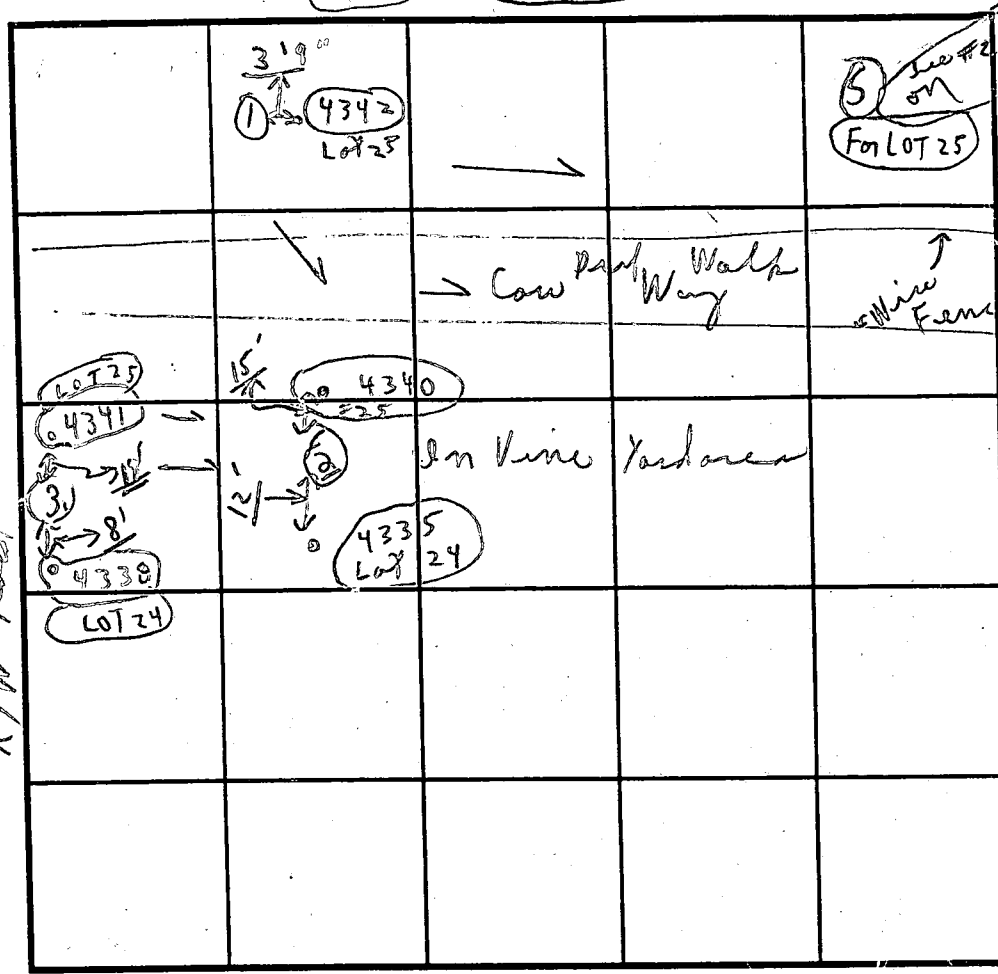
THIS IS NOT A PERMIT

ASO 225 CC
COUNTY #
LOT 25
SOIL PROFILE

6/12' 4345

Now 27

4 #26 4344



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8/31/94	⑤	4 1/2'	10:22	10:25	10:25	10:30	5 in
		9 1/2'		dry	Loam	no rock	
	①	4'-4"	10:33	10:35	10:35	10:37	2 in
	4342	10' 3"	dry	No rock			
	4340	4 1/2'	10:54	10:56	10:56	10:58	2+
	②	9' 10"	(No rock)	Loam			
	4335	4'	11:02	11:04	11:04	11:06	2 in
8/31/94	③	11'		Loam dry		No rock	

See #26
4' or less good soil

REMARKS Tests in field (Go by stakes #s)
TYPE OF SOIL LOAM
TESTED BY CRL ALSO PRESENT (3 bags + 1 bag)
TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME TRENCH WIDTH
INLET DEPTH 4 1/2' MAXIMUM BOTTOM DEPTH 9' SQ. FT./BEDROOM
to Shallow

COUNTY #

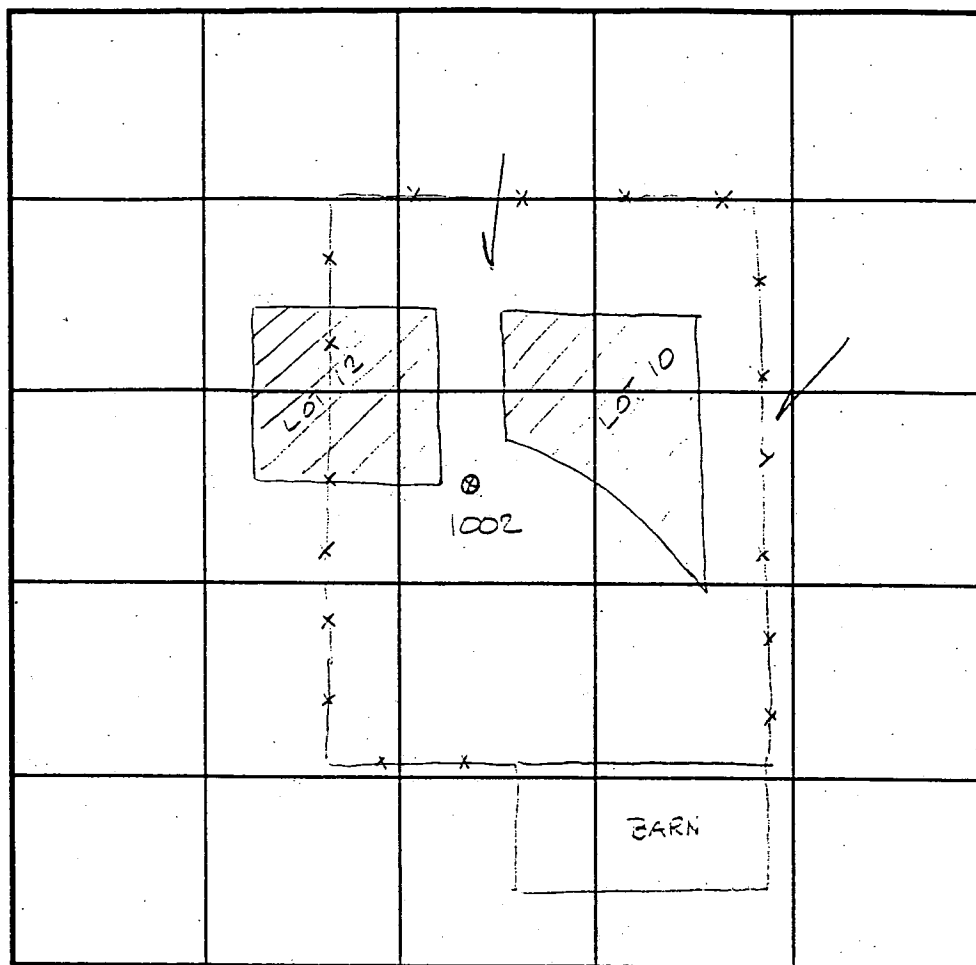
SOIL PROFILE

1002

topsoil

dark
red
brown
SiClmdull
mottled
SiClm
Mg deposits
grey &
orange
mottles
water

SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2-27-93	1002	Visual to 11.0 - see profile					
		insufficient depth to water - F					

REMARKS - adjust SDA w-hill

TYPE OF SOIL

TESTED BY Amy McMillen

ALSO PRESENT Tim Fesaa

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

TRENCH WIDTH 3.0

INLET DEPTH 2.0

MAXIMUM BOTTOM DEPTH 3.5

SQ. FT./BEDROOM 180

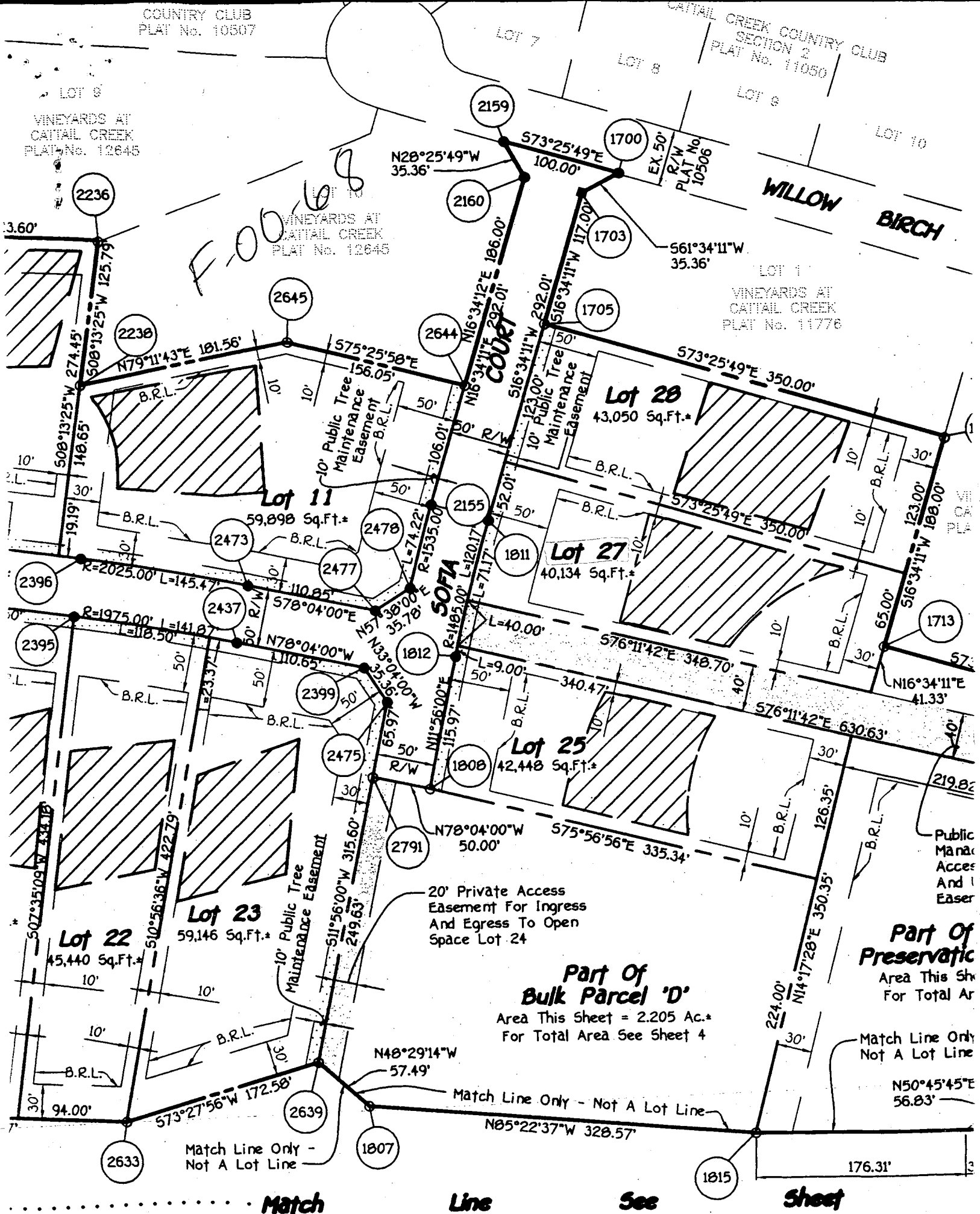
SP-96-11

[illegible]

LOT 9
VINEYARDS AT
CATTAIL CREEK
PLAT No. 12645

LOT 10
VINEYARDS AT
CATTAIL CREEK
PLAT No. 12645

LOT 1
VINEYARDS AT
CATTAIL CREEK
PLAT No. 11776



F-0068

SOFA

COUET

Part Of
Bulk Parcel 'D'
Area This Sheet = 2.205 Ac.*
For Total Area See Sheet 4

Part Of
Preservativ
Area This Sh
For Total Ar

Match Line Only -
Not A Lot Line

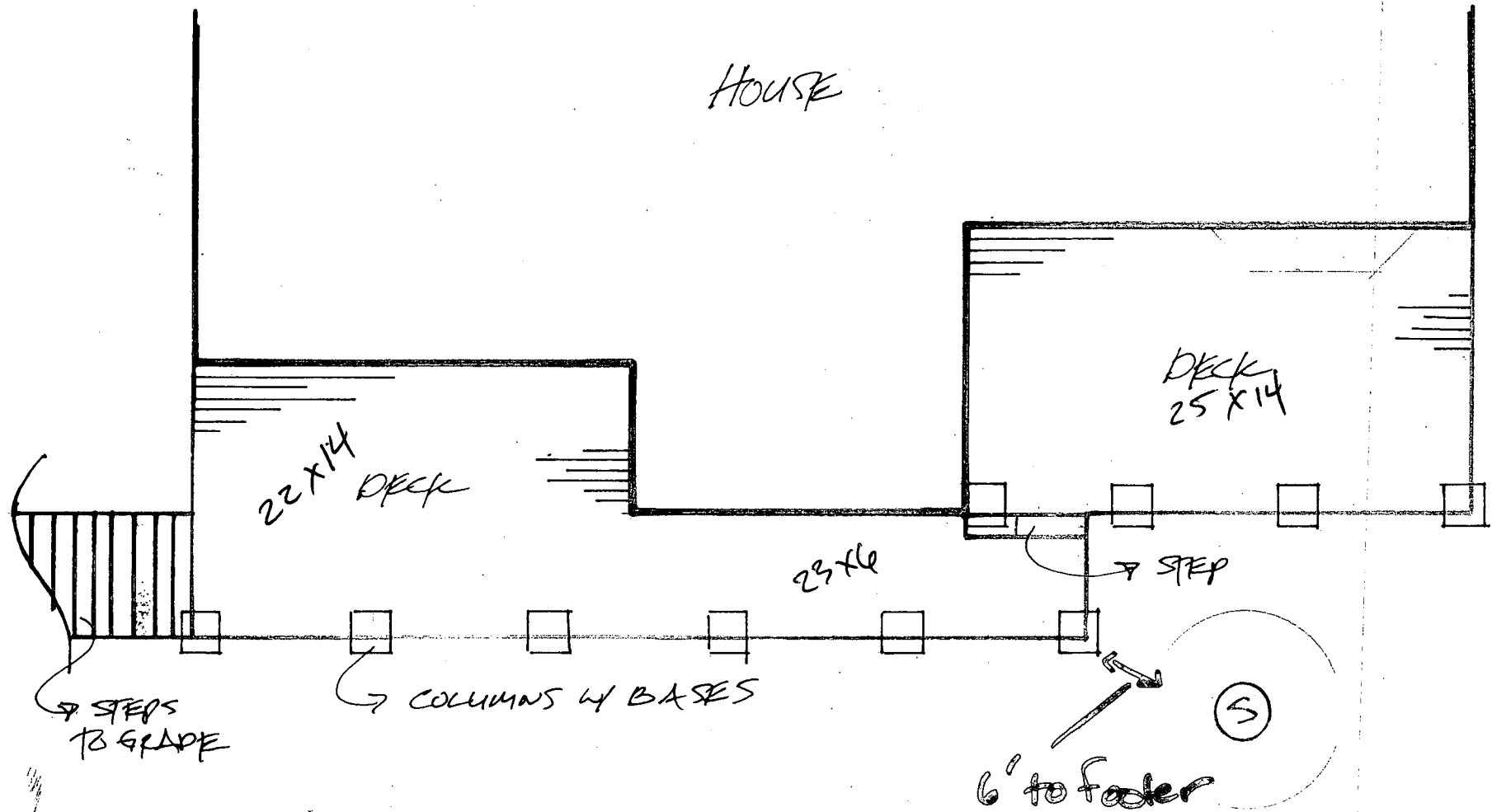
Match Line Only - Not A Lot Line

Match Line Only
Not A Lot Line

Match Line See Sheet

The Requirements §3-108, The Real Property Article, Annotated Code
Of Maryland, 1988 Replacement Volume, (As Supplemented) As Far As
They Relate To The Making Of This Plat And The Setting Of Markers

Reservation Of Public Utility And Forest Conservation Easem
"Developer Reserves Unto Itself, Its Successors And Assigns
Plan For Water Sewer Storm Drainage, Other Public Utilitie



SEPTIC TANK

Deck height $\approx 8' \pm$

6' to Fender

9'2" to Cleanout
Plan to scale

BARTLEY RESIDENCE
SCALE: 1"=8'0"

APPROVED
WALK-THRU BUILDING PERMIT
BP# 150249 A# 50285-CC
APP. SAN KN DATE: 9-8-04
DESC. OF WORK: DECK