5/12/99
pm c.o.
5/17/99 2:00
11-12-99
pump test 3:00

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 511574

A 50905-M

DISTRICT

DATE 5/11/99

DATE SYSTEM APPROVED 11/12/99

INSPECTOR CW

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XX&XXXX~~ 410-313-2640

INDEXED

03325717

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

ADDRESS 580 Obrecht Road, Sykesville, MD 21784 PHONE 410-795-5670

SUBDIVISION Quarterfield III LOT 12 ROAD 11631 Whitetail Lane

PROPERTY OWNER Preschell

ADDRESS

TOP SEAMED TANK

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 280

*****PUMP SYSTEM ONLY*****

INSTALL: 1-1250 GALLONATOP SEAMED PUMP CHAMBER

NOTES: - Septic pump detail to be provided by installer prior to issuance of septic permit
- Pump performance test is necessary prior to Health Department approval of pumped septic system.

TRENCHES - Trench to be 3 feet wide. Inlet 4½ feet below original grade. Bottom maximum depth 6½ feet below original grade. Effective area begins at 4½ feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Begin trenches 325 feet up the left 404.83' lot line and 10 feet off that same lot line as seen when facing the lot from Whitetail Lane. Run trenches on contour in both directions.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OC 3/25/99 DCS

PLANS APROVED BY Amy McMillen DATE 3-11-1999

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.

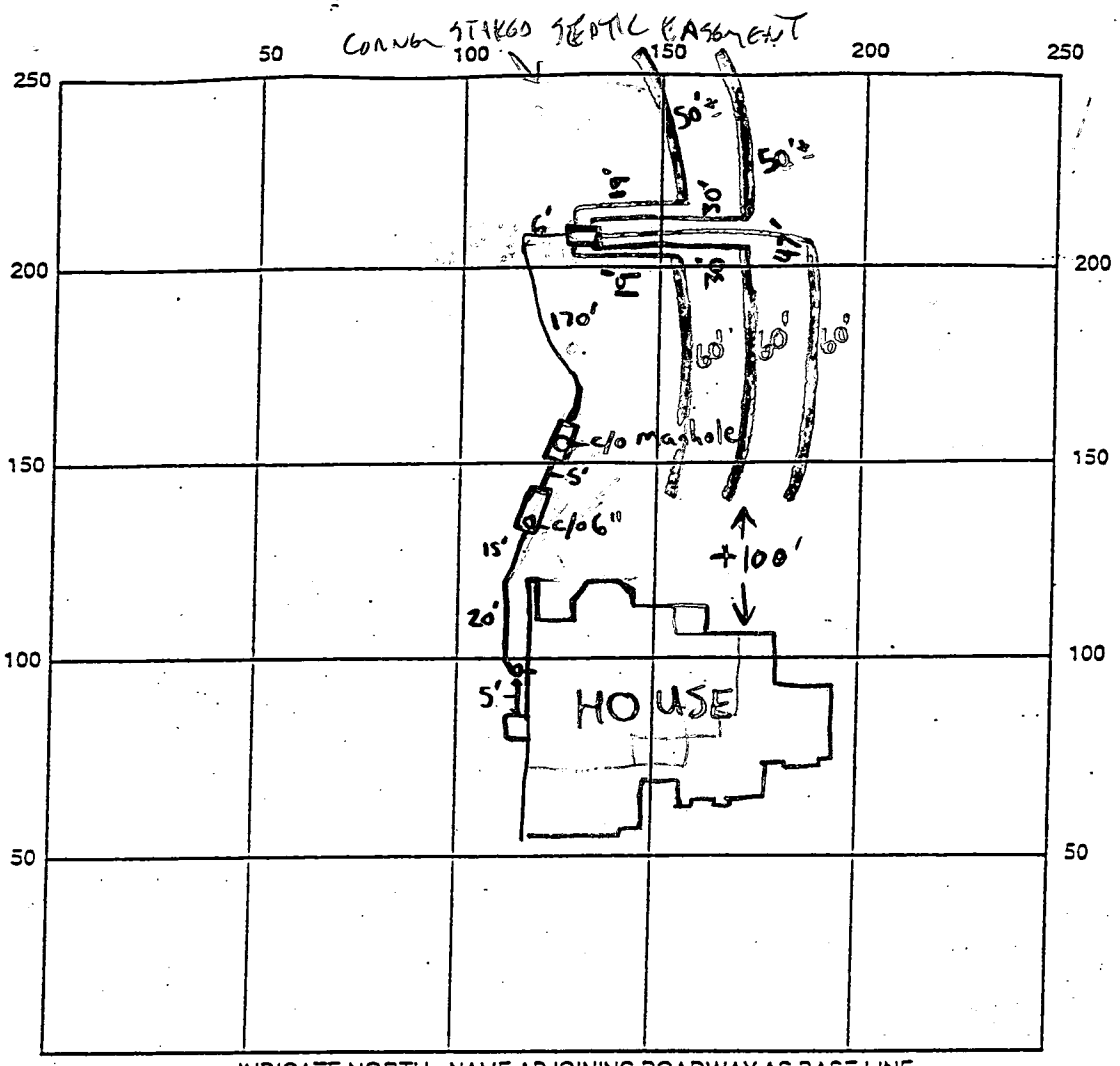
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

HD-260(6-90)

50905-M



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

62
20 | 1250.

SEPTIC TANK LEVEL ✓ 1250 Top Seam Pump Tank 1250 Top Seam Tank CLEANOUTS 1-6"@tank, 1 manhole cleanout @ Pump tank

DISTRIBUTION BOX LEVEL ✓ Baffle is in

DRAIN FIELD/TITLE DEPTH 6½ FT. TRENCH WIDTH 3 FT. INLET DEPTH 4½ FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 280 FT.

NUMBER OF TRENCHES 5 ~~ONE SIDEWALL~~/BOTTOM AREA 840 SQ. FT.

DRYWALL INSIDE DIAMETER N/A FT. EFFECTIVE DEPTH BELOW INLET N/A FT.

ABSORBENT AREA N/A SQ. FT.

REMARKS: 5/17/99 - OK TO COVER, PUMP TEST REQUIRED FOR FINAL APPROVAL - SRH

11/12/99 PUMP & ALARMS OK. (20 MINUTES FOR COMPLETE PUMP DOWN) CW

DATE SYSTEM APPROVED 11/12/99 INSPECTOR Craig Willis

410 781 6782

HOWARD COUNTY HEALTH DEPARTMENT

Diane L. Matuszak, M.D., M.P.H., County Health Officer

REQUEST FOR TEMPORARY DEVIATION TO TURBIDITY STANDARDS FOR CERTIFICATE OF POTABILITY

DATE: November 15, 1999 WELL PERMIT: HO - 94 - 2002

PROPERTY OWNER: Greenefield Homes

PROPERTY ADDRESS: 6656 Luster Drive
Highland, Md 20777

TESTIMONIAL: (Steps taken thus far by well owner or agent to eliminate excessive turbidity)

Additional flushing of well -well had not been used prior to sampling; is clearing up gradually.

PLEDGE: (Steps to be taken by the well owner or agent to bring the well into compliance with COMAR 26.04.04.07 (J) within fifteen (15) days)

Will treat for iron removal if water does not clear naturally within the prescribed time frame.

CONDITIONS:

1) Within fifteen (15) days, the well installed under permit HO- 94 -2002 will be documented to have a turbidity level of less than 10 NTU as a result of implementation of approved procedures. Approvable procedures include raising the well pump, additional well pumping, or further well development or other construction techniques performed by a well driller. Filtration to remove dissolved iron, which frequently raises turbidity levels, is also an approvable procedure. **Filtration to remove sediment unrelated to iron is not an acceptable means of establishing turbidity compliance for wells being approved for service.**

2) If the turbidity condition cannot be remediated to a level below 10 NTU through approved procedures, then drilling a replacement well would likely be necessary. Issuance of a Final Certificate of Potability will be delayed until the issue is concluded.

I hereby request that a Fifteen-Day Temporary Deviation to Certificate of Potability be granted for the well installed under permit HO 94-2002. I am fully aware of the conditions under which this deviation will be granted, and of my responsibilities as the well owner.

Richard Munson Agent for

(Property Owner)

Bureau of Environmental Health
3525-H Ellicott Mills Drive Ellicott City, Maryland 21043-4544
Water and Sewage Program Community Environmental Health Program Food Protection Program
Phone: 410-313-2640 FAX: 410-313-2648 TTD: 410-313-2323 TOLL FREE: 1-877-4MD-DHMH

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation X
Replacement ____

Receipt # ____
Date ____

Name of Installer Gartland Plumbing inc Telephone 410 825 5303

License Number 6352
Certified Well Pump Installer ____ Well Driller ____ Registered Plumber X

Name of Property Owner Greenfield Homes inc Telephone 410 381 6782
Subdivision Quarterfield Lot # 12 Well Tag # HO - 94 - 2002
Site Address 11631 Whitetail Lane

Pump
1. Type
   a. Deep well jet ____
   b. Shallow well jet ____
   c. Submersible X
2. Make Goulds
3. Model # 7ES
4. Capacity 7 GPM
5. Pump exceeds well capacity Yes ____ No X
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 X Other ____

Motor
1. Horsepower 3/4
2. RPM 3450
3. Voltage ____
   a. 110 ____
   b. 220 X

Pitless Adapter
1. Make Kawaard
2. Model # PT800
3. Depth 48"

Tank
1. Capacity 250
2. Pressure relief valve? Yes

Piping
1. Type Poly
2. Size 1"
3. NSF and/or BOCA Code approved Yes
4. Depth of supply line 48"

Well data
1. Depth 280 ft.
2. Yield 7 GPM
3. Static water level 100 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.

5/11/99 - Well line OK - DKC SRK

Signature of Applicant: ____

Date: May 13, 1999

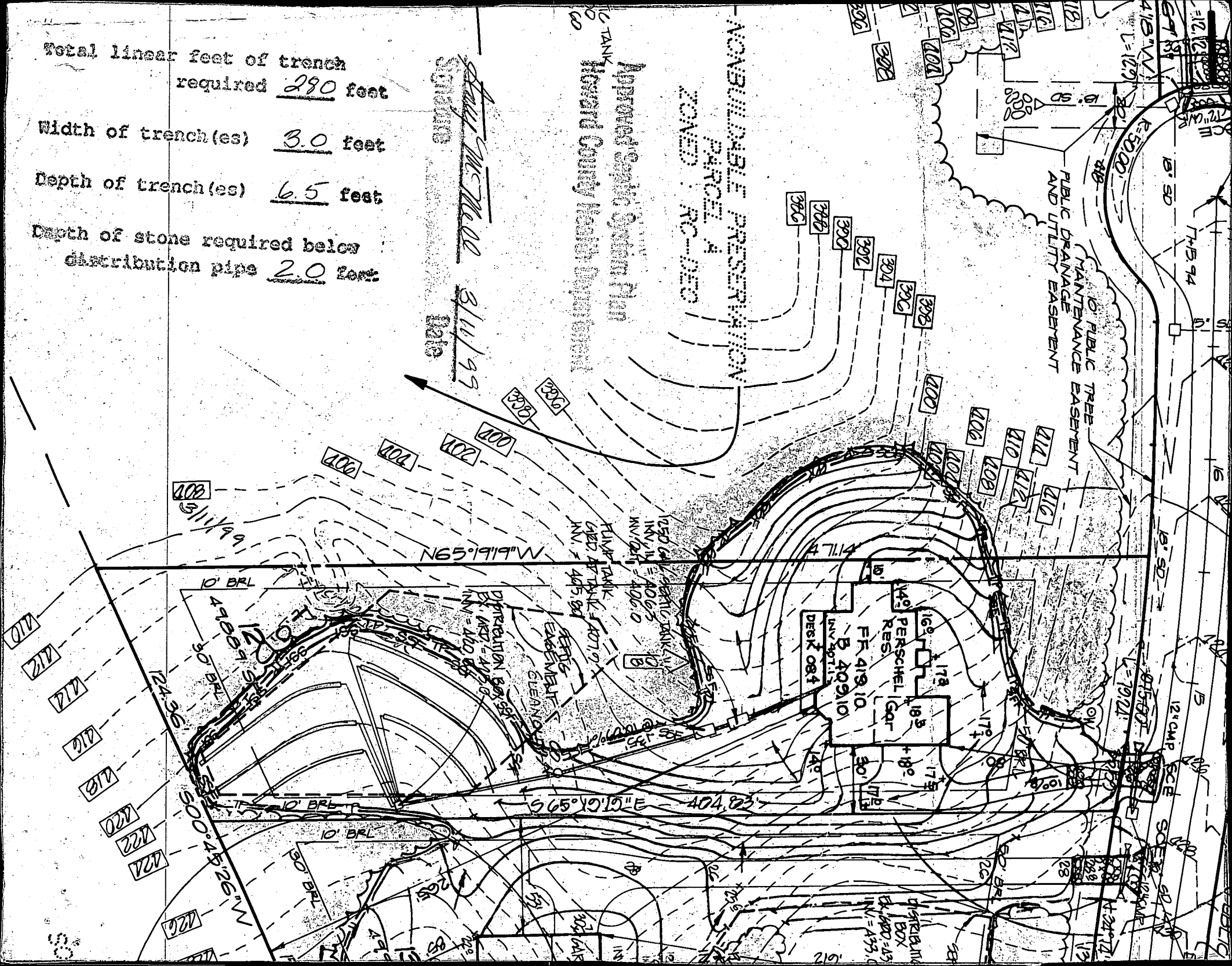
Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.

Total linear feet of trench required 290 feet

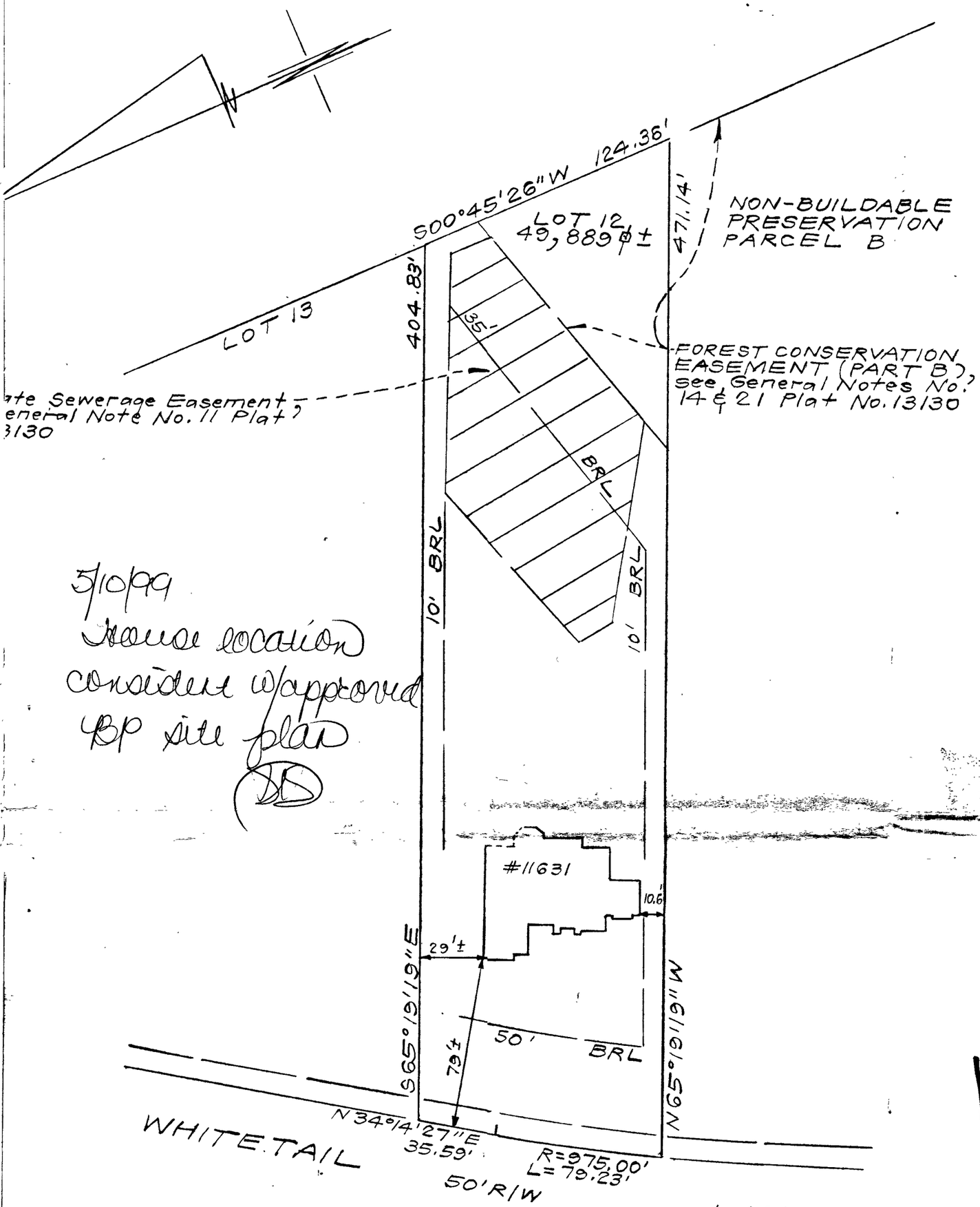
Width of trench(es) 3.0 feet

Depth of trench(es) 6.5 feet

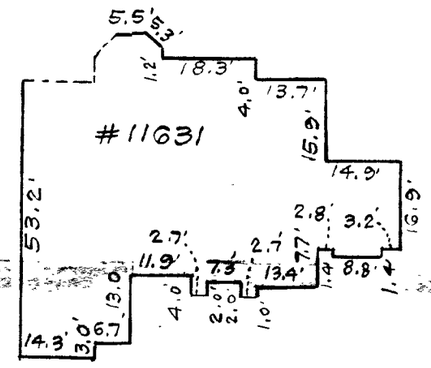
Depth of stone required below distribution pipe 2.0 feet



Wall Check: 4-26-99
Top of Wall Elev.: 417.0



5/10/99
House location
consistent w/approved
BP site plan
(SD)



SCALE: 1"=30'

WALL CHECK
LOT 12 QUARTERFIELDS
PERMIT # B00116574

NOTE:
1. The setback distance accuracy = 1'.

Plat Reference: PLAT No. 13131

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

DESIGNED	LOCATION DRAWING 11631 WHITETAIL LANE LOT 12 QUARTERFIELD SECTION 3, LOTS 1 THRU 15 AND NON-BUILDABLE PARCELS 'B' THRU 'E' (RESUBDIVISION OF QUARTERFIELD SEC. 3 BUILDABLE PARCEL 'A' PLAT No. 12863) THIRD ELECTION DISTRICT HOWARD COUNTY, MARYLAND	SCALE 1"=50'
DRAWN KWC		DRAWING
CHECKED PAS		JOB NO.
DATE	FOR: GREENFIELD HOMES 1818 Liberty Road Eldersberg, Md. 21784	FILE NO. 96-140-0

C 1 | 9377 | SEQUENCE NO. (MDE USE ONLY)

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

THIS REPORT MUST BE SUBMITTED AFTER WELL IS COMPLETED.

COUNTY NUMBER A50905 M

ST/CO USE ONLY
DATE Received MM 1 DD 13 YY 99

DATE WELL COMPLETED MM 1 DD 3 YY 99

Depth of Well 280 ft. (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-2002

OWNER Greenfield Homes (last name / first name)
STREET OR RFD Whitetail Ln TOWN W. Friendship
SUBDIVISION QUARTERFIELD III SECTION LOT 12

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	56	
Gray Mica Rock	56	280	✓

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. MSD024
Joseph E. Wayne
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. MSD027
Darren Wayne

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 21 NO. OF POUNDS 1974
GALLONS OF WATER 126
DEPTH OF GROUT SEAL (to nearest foot)
from 0 ft. (TOP) to 56 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	Nominal diameter top (main) casing (nearest inch)	Total depth of main casing (nearest foot)
ST	6	60

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 [HO] OPEN HOLE [BZ] BRONZE [PL] PLASTIC [OT] OTHER

EACH SCREEN	C 2	DEPTH (nearest ft.)
1	HO	58 — 280
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.) 10.
METHOD USED TO MEASURE PUMPING RATE Bucket
WATER LEVEL (distance from land surface)
BEFORE PUMPING 81 ft.
WHEN PUMPING 160 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 9459 — 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-94-2002
fill in this form completely

Date Received (APA): 03 31 98 (MM DD YY)

OWNER INFORMATION
Greenfield Homes — Owner (Last Name / First Name)
6656 Rustic Dr. — Street or RFD
Highland Md. 20777 — Town / State / Zip

DRILLER INFORMATION
Joseph L. Mayne — Driller's Name — MSD024 License No.
Joseph L. Mayne Well Drilling — Firm Name
5512 Ridge Rd. Mt. Airy 21771 — Address
Joseph L. Mayne 3/31/98 — 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) 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 APPROVAL
[T] TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

APPROXIMATE DEPTH OF WELL: 300 FEET
APPROXIMATE DIAMETER OF WELL: 6 NEAREST INCH

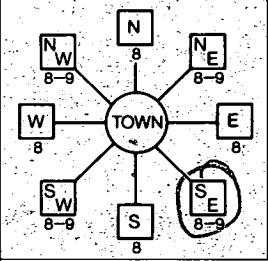
METHOD OF DRILLING (circle one)
BORED (or Augered) — JETTED — Jetted & DRIVEN
AIR-ROTary — AIR-PERcussion — ROTARY (Hydraulic Rotary)
CABLE — REVerse-ROTary — DRive-POINT
other

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 — G A P
FORCE MR (WRITE INITIALS IN BOX) PERMIT No. HO-94-2002

B 3 LOCATION OF WELL
Howard — COUNTY
Quarterfield — SUBDIVISION
SECTION 3 — LOT 12
West Friendship — NEAREST TOWN
MILES FROM TOWN (enter 0 if in town): 4 M

B 4
DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Whitetail Lane — NEAR WHAT ROAD
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): NORTH / WEST / EAST / SOUTH
DISTANCE FROM ROAD: 17 FT (ENTER FT OR MI)
TAX MAP: 205-M23 BLK. 15 PARCEL 84

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL
Howard — COUNTY NAME
A50905 M — COUNTY NO.
STATE SIGNATURE
INSERT S → S
DATE ISSUED 12/11/98 — Mark E Ribkin — CO SIGNATURE — EXP. DATE 12/11/99
NORTH GRID 520 000
EAST GRID 0825 000

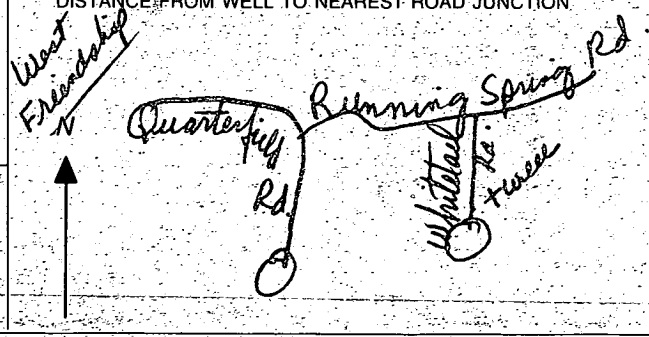
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER
1. Well
2.
3.

WRITE THE BOX NUMBER FROM THE MAP HERE
E 8285
N 520

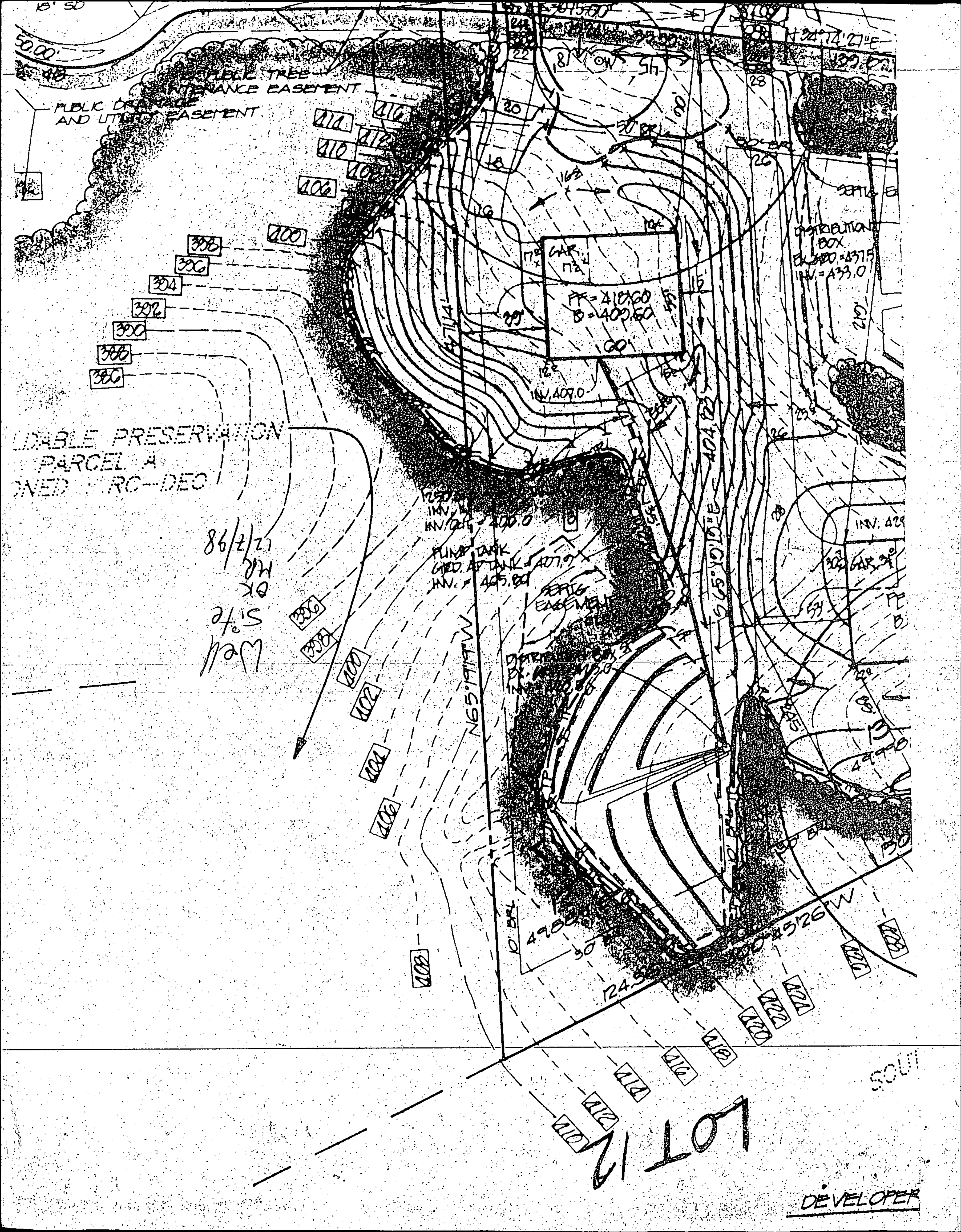
1/4/98 Grout 12:00
60' CASING GROUT POST-PONED
TAG OK
LOC OK MR 1/4/99
000
000

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

COUNTY



EASEMENT
PUBLIC
AND UTIL
EASEMENT
DISTRIBUTION BOX
INV. 409.0
PUMP TANK
SEPTIC EASEMENT
PARCEL A
N65°19'17"W
LOT 12
DEVELOPER

APPLICATION

PERCOLATION TESTING

A 50905M

P _____

DISTRICT _____

DATE 10/12/95

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

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/ CONTRACT PURCHASER MR TOM SCRIVENER PRESCHEL

ADDRESS 5026 DORSEY HALL DRIVE #204 ELLICOTT CITY, MD 21042 PHONE 964-5522

AGENT OR ~~PROSPECTIVE BUYER~~ DONALD R. REUWER JR. LAND DESIGN & DEVELOPMENT, INC.
/DEVELOPER

ADDRESS 10805 HICKORY RIDGE ROAD COLUMBIA, MD 21045 PHONE 740-2100

PROPERTY LOCATION:

SUBDIVISION QUARTERFIELD III LOT NO. N 5/2 on P.C.

ROAD AND DESCRIPTION PROPOSED WHITETAIL LANE (11631) - THIRD ELECTION DISTRICT, ADJACENT TO QUARTERFIELD I & II OFF OF FOLLY QUARTER ROAD

BLDG. PERMIT SIGNED AND RETURNED 3-11-99
Permit # B011652 - 4 Bdrm

TAX MAP 23 PARCEL # 84

SIZE OF LOT CLUSTER ONE ACRE TYPE BLDG. SINGLE FAMILE 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. Robert H. Weston - AGENT - LDD, INC.
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING 12/27/95 PERC OK, HOLD FOR PLAT MR

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)

A 50905 M
COUNTY #

SOIL PROFILE

0'

540A

brn sacl lm

3½–3¾

beige gray sa & sa lm 15% soft sandstone frags

11

541A

org cl lm 20% frags

5½

tan gray sa lm

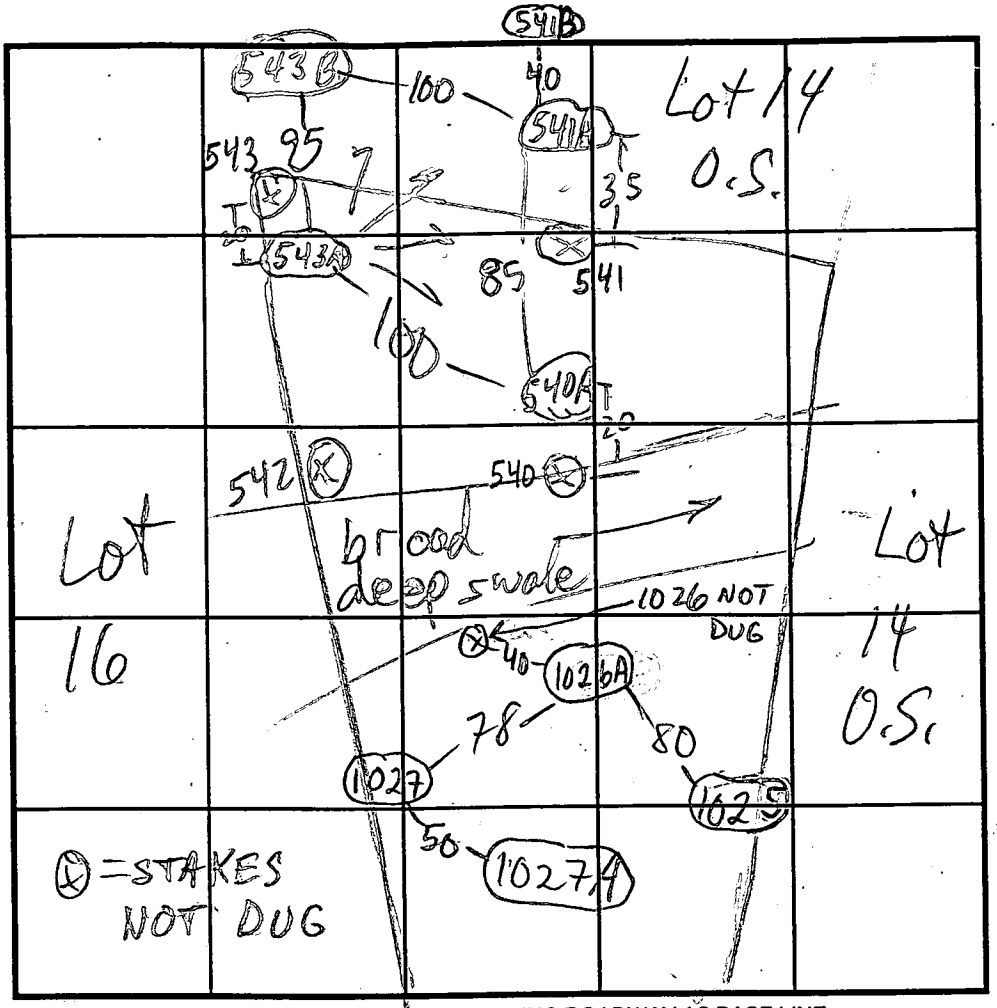
543B / 543A

brn sacl lm

4

beige tan sa lm 5% frags

10–11



SOIL PROFILE

0'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

WHITETAIL LA

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
11/8/95	540A	5	2:31	2:32	2:32	2:34	2 EST
	540A	11	see	profile	-OK		
	541A	5	3:05	3:15	3:15	3:55	40 EST
	541A	11	better	below	5½'		
	543A	5	3:18	3:22	3:22	3:26	4
	543A	10	OK see	profile			
	543B	5	3:28	3:30	3:30	3:35	5
	543B	11	OK see	profile			

REMARKS NO HOLES DUG EXACTLY PER PLAT

TYPE OF SOIL

TESTED BY M. Ripkin ALSO PRESENT Assoc. Exc. Dmkr.

543A-543B-541A-540A

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 13 ± TRENCH WIDTH 3

INLET DEPTH 4½ MAXIMUM BOTTOM DEPTH 6½ SQ. FT/BEDROOM 210

APPLICATION

PERCOLATION TESTING

A _____

P _____

DISTRICT _____

DATE _____

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

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 Quarterfield LOT NO. 15

ROAD AND DESCRIPTION _____

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)

COUNTY #

SOIL PROFILE

1027

0'

orge red si cl lm

4

orge yel brn si lm 10-15% frags

11½

1026A

brn orge sa cl

4½

dk brn red sa lm 5-15% frags

12

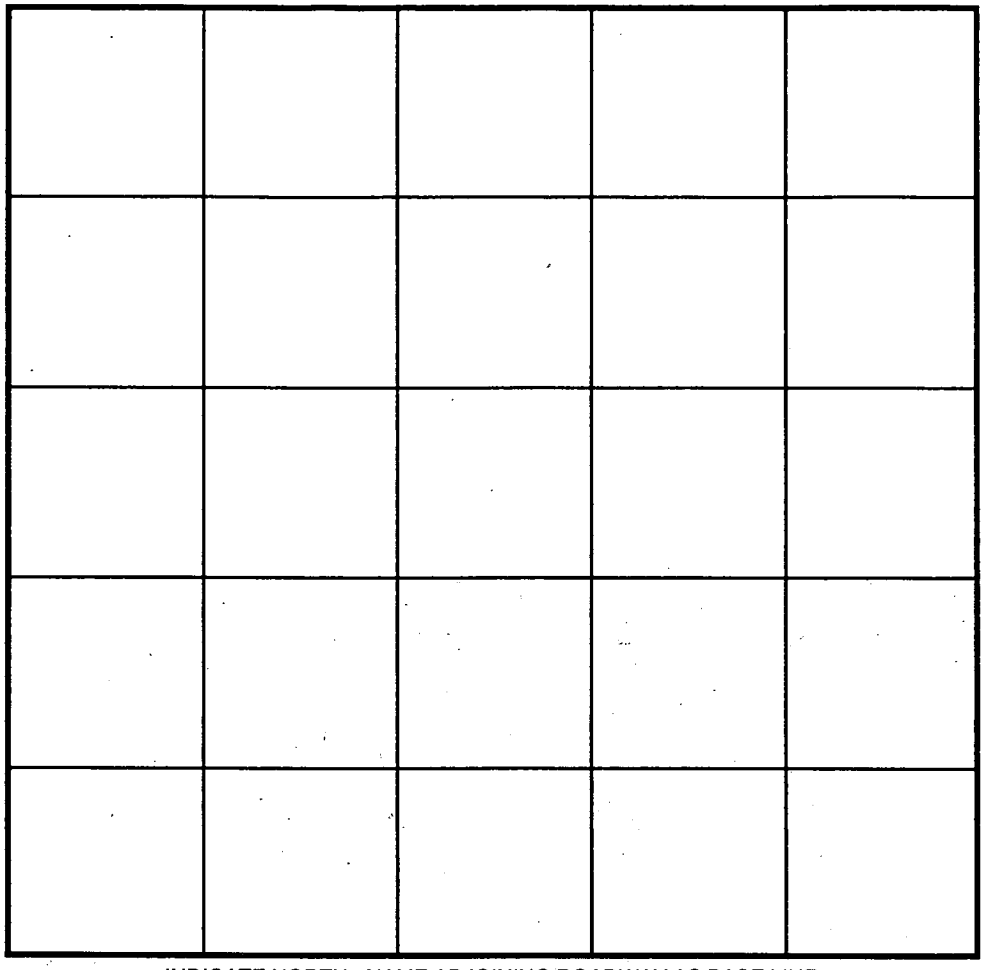
1025

orge sa cl

5-6

tan yel si lm 10% frags

11½



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE

541B

0'

orge brn sa cl lm

2½

tan brn orge sa lm 15% frags

12½

1027A

orge cl

3-4

Rocky per contractor NOT OBS'D

12±

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
1/26/96	1027S	4½	1:36	1:45	1:45	1:58	13
	1027V	11½	see profile		-OK		
	1026AS	5½	1:42	1:44	1:44	1:46	2
	1026AV	12	see profile		-OK		
	1027A	12±	NOT SEEN - profile per hoeman				FAIL
	1025S	4'9" 6-	2:02 2:26	2:10 2:29	SLOW 2:29	REDIG 2:50	—
	1025V	11½	TEST STOPPED		← OTHER TEST		(1027A)
			IN PATTERN NOT		SUCCESSFUL		
	541BV	12½	OK - see profile				

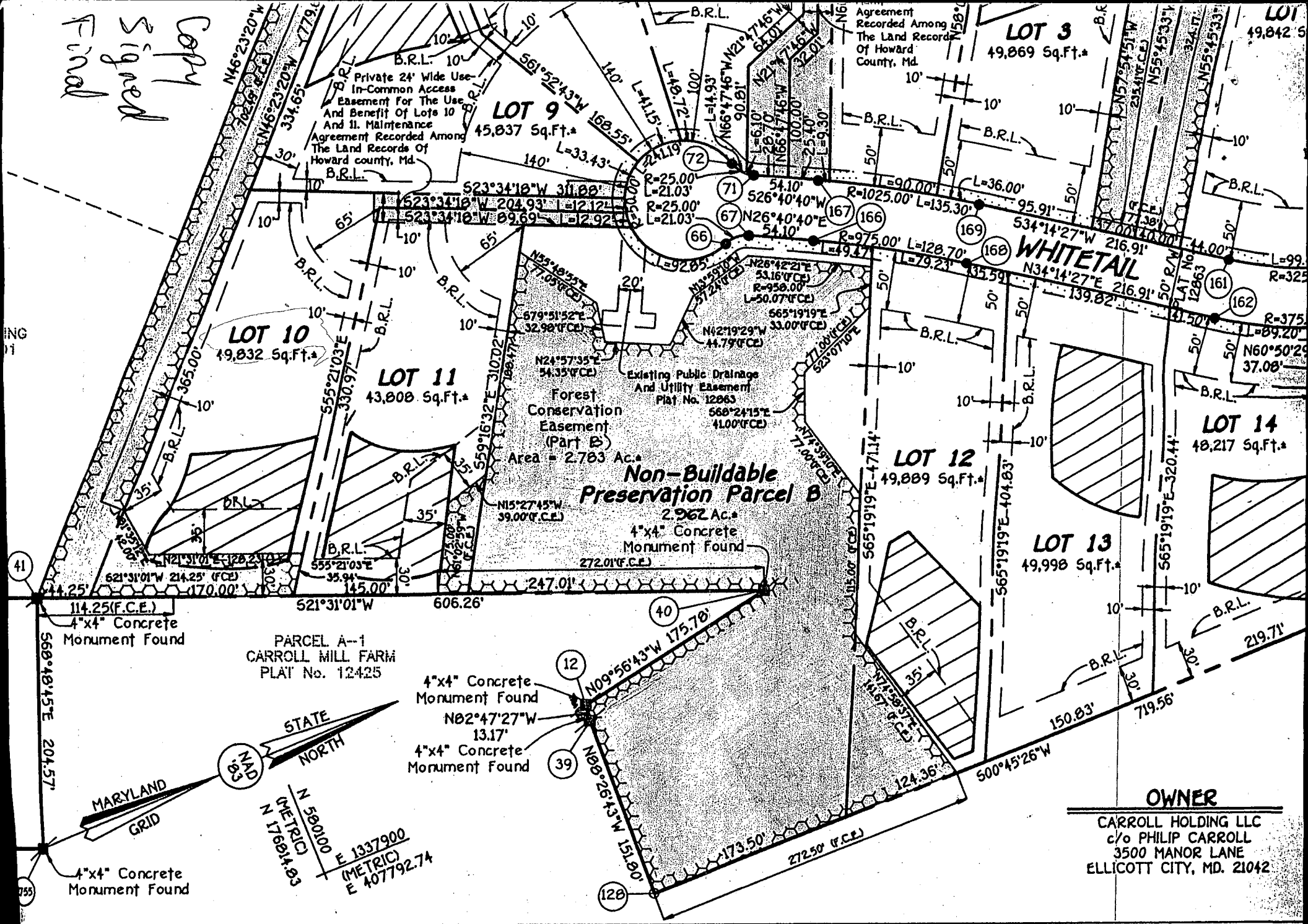
REMARKS

TYPE OF SOIL

TESTED BY M. Ripkin ALSO PRESENT Assoc. Exc., Don R.

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT/BEDROOM _____



OWNER'S CERTIFICATE

Holding LLC, By Philip Carroll, OwnerOf The Property Shown And Described Hereon, Hereby Adopt This Plan Of Subdivision, Consideration Of The Approval Of This Final Plat By The Department Of Planning And Zoning, Establish The Minimum

SURVEYOR'S CERTIF

I Hereby Certify That The Final Plat Shown Her Subdivision Of All Of The Lands Conveyed By LLC By Deed Dated October 16