

3/1/02 AM Layout? 3/4/02 NOON 3/6/02 AM

ISSUE DATE: 12/11/2001

APPROVAL DATE: 3/6/02

PERMIT

INDEXED

P 516445-B

A 58947-V

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

04-365453

Union Paving Co., Inc. IS PERMITTED TO INSTALL ☒ ALTER ☐

ADDRESS: 5977 Sandy Ridge Road, 21075 PHONE NUMBER: 410-379-6463

SUBDIVISION: Windridge Farms LOT NUMBER: 20

ADDRESS: 14535 Windridge Court PROPERTY OWNER: Hamilton Reed

SEPTIC TANK CAPACITY (GALLONS): 1250 (TOPSEAM)

PUMP CHAMBER CAPACITY (GALLONS): N/A

NUMBER OF BEDROOMS: 4

SQUARE FEET PER BEDROOM: 180

LINEAR FEET OF TRENCH REQUIRED: 240

|           |   |
|-----------|---|
| TRENCHES: | Trench to be 3.0 feet wide. Inlet 3.0 feet below original grade. Bottom maximum depth 5.0 feet below original grade. Effective area begins at 3.0 feet below original grade. 2.0 feet of stone below distribution pipe. |
| LOCATION: | Beginning from the intersection of the 103.60' and 282.87' lot line, begin trenches 130 feet up the 282.87' lot line and 40 feet off that same lot line. Run trenches on contour toward the 282.87' lot line.           |
| NOTES:    | KEEP TANK OUT OF 100' WELL RADIUS<br>WELL LINE TO BE SLEEVED UNDER DRIVEWAY   |

PLANS APPROVED: Amy Mc Millen OK SRK 6/28/01 DATE: 4-27-01

NOTE: PERMIT VOID AFTER 2 YEARS

NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS

NOTE: WATERTIGHT SEPTIC TANKS REQUIRED

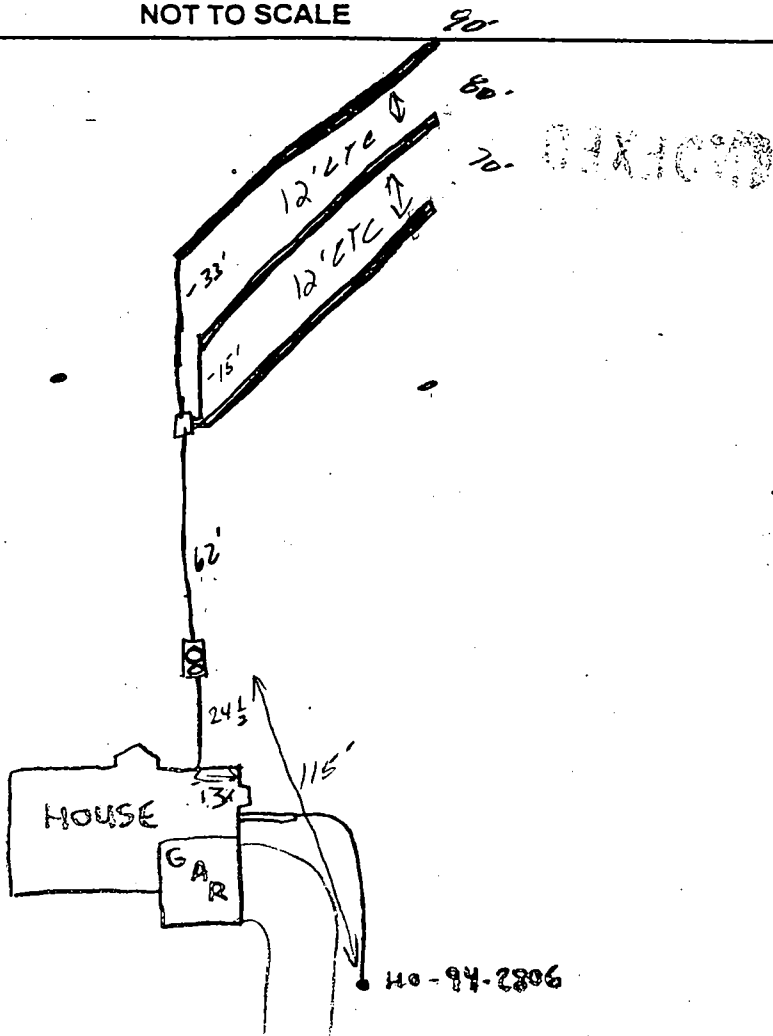
NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL

NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS

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  
CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

A58947-V

NOT TO SCALE



### TRENCH DATA

TRENCH WIDTH 3'  
 TRENCH INLET DEPTH 3'  
 TRENCH BOTTOM DEPTH 5'  
 DEPTH OF STONE 2'  
 NUMBER OF TRENCHES 3  
 TOTAL TRENCH LENGTH 240'  
 ABSORBENT AREA 720 sf  
 DISTRIBUTION BOX LEVEL YPS  
 BAFFLE IN DISTRIBUTION BOX YPS

### SEPTIC TANK DATA

SEPTIC TANK 1250 T.S. GALLONS  
 MANHOLE RISER Middle  
 6 INCH INSPECTION PORT Front

### PUMP CHAMBER DATA

PUMP CHAMBER N/A  
 GALLONS \_\_\_\_\_  
 MANHOLE RISER \_\_\_\_\_  
 ALARM \_\_\_\_\_  
 PUMP PERFORMANCE TEST \_\_\_\_\_

PRE-CONSTRUCTION INSPECTION: 3/1/02 Not staked. Layout Monday. OK TO COVER  
 S.T. House Conn made (KG) 3/4/02 House has been rotated. well radius OK to S.T.  
Install 70' 140' 90' trenches w/ D.B. 10' off SRA (SD)

INSPECTION COMMENTS: 3/6/02 OK to cover all work (SD)

INSPECTOR [Signature] DATE SYSTEM APPROVED 3/6/02

443-5066391  
Monday

SITE

WINDY MILL ROAD

TRIADPHIA ROAD

VICINITY MAP  
SCALE: 1"=1200'

GENERAL NOTES

1. SEPTIC EASEMENT SUBJECT TO HOWARD COUNTY HEALTH DEPARTMENT No.
2. PROPOSED 1500 GALLON SEPTIC TANK.
3. A. FIRST FLOOR ELEVATION: 514.20  
B. BASEMENT ELEVATION: 505.20  
C. INVERT OF SEPTIC SYSTEM AT HOUSE: 507.76  
D. INVERT IN AT SEPTIC TANK: 506.30  
E. INVERT OUT AT SEPTIC TANK: 508.00  
F. PROPOSED GRADE OVER SEPTIC TANK: 508.00  
G. INVERT AT DISTRIBUTION BOX: 505.0  
H. EXISTING GROUND OVER DISTRIBUTION BOX: 508.00
4. LENGTH OF TRENCH TO BE DETERMINED AT TIME OF SEPTIC PERMIT ISSUANCE.
5. CONTRACTOR / BUILDER TO VERIFY ELEVATIONS IN FIELD BEFORE BEGINNING ANY CONSTRUCTION.
6. THERE IS NO BASEMENT SERVICE TO SEPTIC SYSTEM.

Approved Septic System Plan  
Howard County Health Department

*James M. Miller* 6/28/01  
Signature Date

Total linear feet of trench required 240 feet  
Width of trench(es) 3.0 feet  
Depth of trench(es) 5.0 feet  
Depth of stone required below distribution pipe 2.0 feet

70/90/90

GP 01-151

PLAN TO ACCOMPANY APPLICATION  
FOR BUILDING PERMIT  
WINDRIDGE FARMS  
SECTION 2, AREA 2

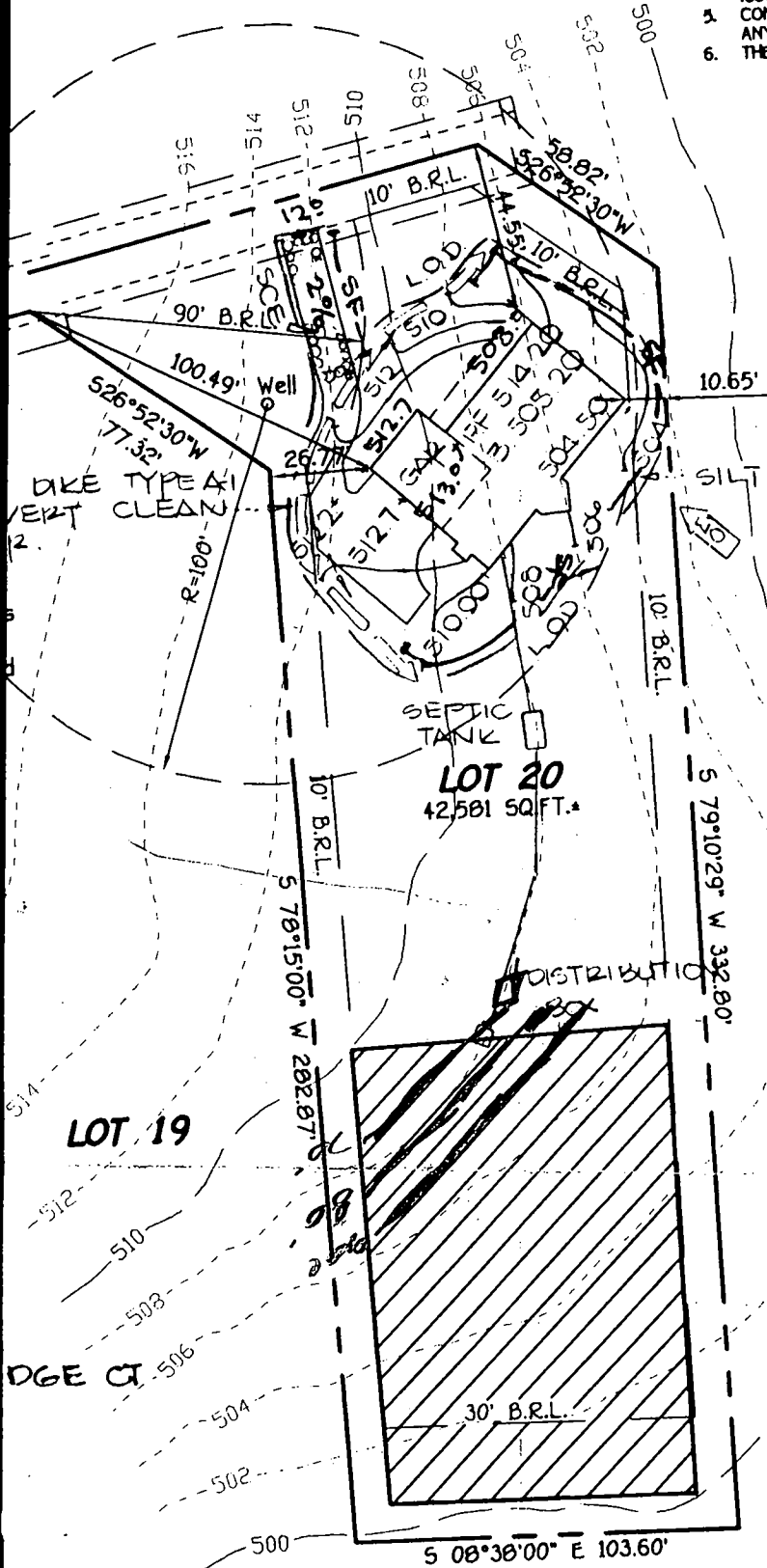
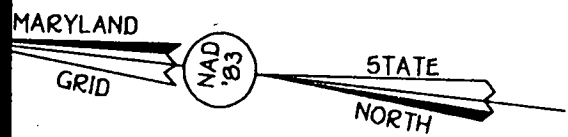
LOT 20

FISHER, COLLINS & CARTER, INC.  
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS  
CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE  
ELLCOTT CITY, MARYLAND 21042  
(410) 461-2855

Hamilton/Reed  
8000 Main Street  
Ellicott City, MD 21043

TAX MAP 21  
FOURTH ELECTION DISTRICT

PARCEL 31  
HOWARD COUNTY, MARYLAND  
DATE: MAY 30 2001



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: CLARKE P+H INC Telephone #: 410-489-4029  
Address: 3510 Ridge Rd  
Westminster, MD 21157

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

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

Name (Print): Ken Clarke License# 3808

\*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: Hamilton Reed Telephone #: 410-482-9176  
Subdivision: Windridge Farm Lot #: 20 Well Tag #: HO-94-2806  
Site Address: 14535 Windridge Ct

Submersible Pump Data

Make: Goulds  
Model #: 55B02922  
Pump Capacity 5 GPM  
Well Yield: 10 GPM

Pitless Adapter

Make: Harvard  
Model #: P-T-800  
Depth: 42 (36" min)  
NSF approved: ✓

Well Cap and Electric Conduit

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

Depth of well encountered at time of pump installation: \_\_\_\_\_ (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 \_\_\_\_\_

Piping to house

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

House Connection

PVC sleeved to undisturbed soil at wall penetration: ✓  
Approximate length of sleeve: 15'  
Sleeve caulked and sealed properly: ✓

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.

Ken Clarke  
Signature of company representative responsible for installation

4-2-02  
date

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

Date Insp. Requested: 2/27/02

Date Insp. Approved: 2/27/02

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

✓  
✓  
✓  
✓  
✓  
✓  
✓

C107895

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  
NUMBER13

ST/CO USE ONLY  
DATE Received  
MMDDYY  
813

DATE WELL COMPLETED  
MMDDYY  
72800

Depth of Well  
2232026  
(TO NEAREST FOOT)

PERMIT NO.  
FROM "PERMIT TO DRILL WELL"  
H0-94-2806  
28293031323334353637

OWNERBRS DEVELOPERS  
STREET OR RFDlast nameWINDRIDGE CTfirst nameTOWNGLENELG  
SUBDIVISIONWINDRIDGE FARMSSECTIONLOT20

| 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<br>FROMTO | check if water bearing |
| Top Soil  | 02             |                        |
| Sandy   | 240            | ✓                      |
| SANDSTONE   | 4045           |                        |
| MICKA   | 4585           |                        |
| SANDSTONE   | 8590           | ✓                      |
| MICKA   | 90290          |                        |
| FLINT ROCK  | 290295         | ✓                      |
| MICKA   | 295320         |                        |

GROUTING RECORD

WELL HAS BEEN GROUTED.  
(Circle Appropriate Box)

YESNO  
YNY

TYPE OF GROUTING MATERIAL (Circle one)

CEMENTCMBENTONITE CLAYBC

NO. OF BAGS4517NO. OF POUNDS17045

GALLONS OF WATER102

DEPTH OF GROUT SEAL (to nearest foot)

from8ft. to30ft.

48TOP5254BOTTOM58

(enter 0 if from surface)

CASING RECORD

casing types insert appropriate code below

STEELSTCONCRETECO

PLASTICPLOTHEROHER

MAIN CASING TYPEPL

Nominal diameter top (main) casing (nearest inch)!6

Total depth of main casing (nearest foot)50

606163646670

OTHER CASING (if used)

diameter inchdepth (feet) fromto

EACH CASING

SCREEN RECORD

screen type or open hole

insert appropriate code below

STEELSTBRASSBR

PLASTICPLOPEN HOLEHO

OTHEROT

NUMBER OF UNSUCCESSFUL WELLS:0

WELL HYDROFRACTURED

yesNO  
YN

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. M S D 118

DRILLERS SIGNATURE

(MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. SAME D

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

C2

DEPTH (nearest ft.)

12HO48320

8911151721

232426303236

383941454751

SLOT SIZE 123

DIAMETER OF SCREEN (NEAREST INCH)

5660

fromto

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

68

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)

T(E.R.O.S.)WQ

7072747576

TELESCOPE CASINGLOG INDICATOROTHER DATA

C3

PUMPING TEST

HOURS PUMPED (nearest hour)3

PUMPING RATE (gal. per min.)10

METHOD USED TO MEASURE PUMPING RATEBucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING33ft.

1720

WHEN PUMPING150ft.

2225

TYPE OF PUMP USED (for test)

AairPpistonTturbine

272727

CcentrifugalRrotaryOother (describe below)

272727

JjetSsubmersible

2727

PUMP INSTALLED

DRILLER INSTALLED PUMP (CIRCLE) (YES or NO)

YESNO

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

29

CAPACITY: GALLONS PER MINUTE (to nearest gallon)

3135

PUMP HORSE POWER

3741

PUMP COLUMN LENGTH (nearest ft.)

4347

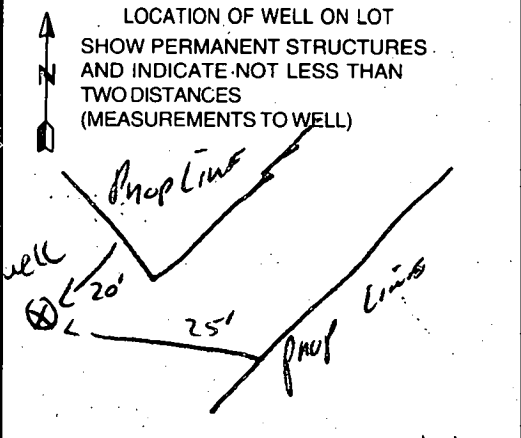
CASING HEIGHT (circle appropriate box and enter casing height)

+above- below

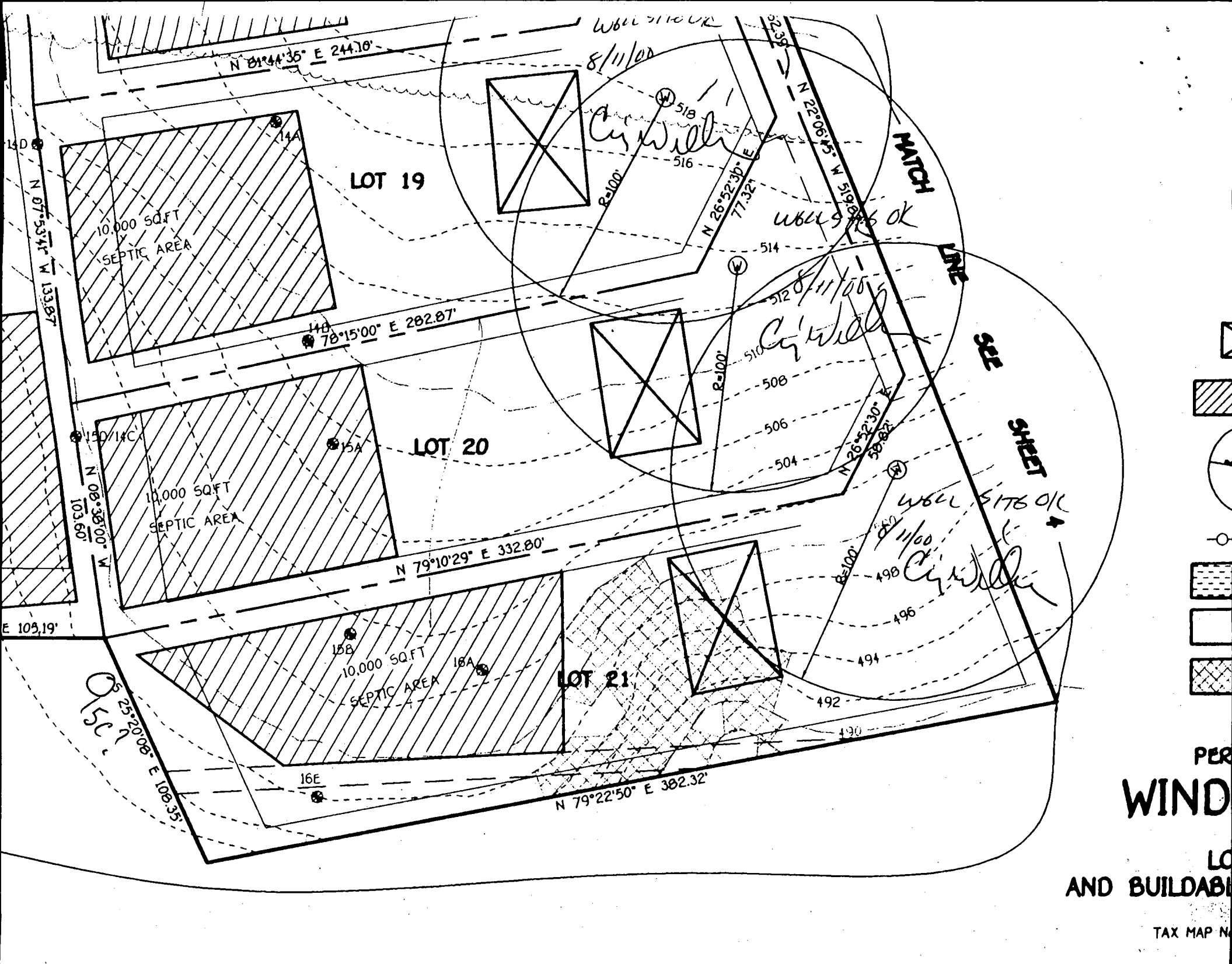
LAND SURFACE

2(nearest foot)

495051



|   |                                |  |   |
|---|--------------------------------|--|---|
| B 1 <b>18652</b><br><small>1 2 3 6</small>  | SEQUENCE NO.<br>(MDE USE ONLY) | STATE OF MARYLAND<br><b>PERMIT TO DRILL WELL</b><br>please print or type<br><b>W513672</b>   | STATE PERMIT NUMBER<br><b>Ho -94 -2806</b><br><small>70 fill in this form completely 79</small> |
| Date Received (APA)<br><small>8 MM DD YY 13</small><br><b>BNS Developers LLC</b><br><small>15 Last Name Owner First Name 34</small><br><b>8808 Cender Park Dr. Suite 209</b><br><small>36 Street or RFD 55</small><br><b>Columbia MD. 21045</b><br><small>57 Town 70 State 72 Zip 76</small>  |                                | B 3 <b>Howard</b> LOCATION OF WELL<br><small>8 COUNTY 21</small><br><b>Windridge Farms</b><br><small>23 SUBDIVISION 42</small><br>SECTION <b>2</b> LOT <b>12/20</b><br><small>44 46 48 50</small><br><b>GLENEGG</b><br><small>52 NEAREST TOWN 71</small><br>MILES FROM TOWN (enter 0 if in town) <b>I</b> <small>73 76 77 78</small>   |   |
| DRILLER INFORMATION<br><b>Ralph MAYNE</b> <b>M.S.D. 116</b><br><small>Driller's Name 76 License No. 81</small><br><b>Ralph Mayne Well Drilling</b><br><small>Firm Name</small><br><b>9120 Brown Church Rd Mt Airy</b><br><small>Address</small><br><b>Phil Mayne D-500</b><br><small>Signature Date</small>   |                                | B 4 <b>Windridge Ct.</b><br><small>11 NEAR WHAT ROAD 30</small><br>ON WHICH SIDE OF ROAD<br>(CIRCLE APPROPRIATE BOX)<br><small>34 375 37</small><br>DISTANCE FROM ROAD <b>4</b><br><small>ENTER FT OR MI 38 39</small><br>TAX MAP: _____ BLK: _____ PARCEL: _____  |   |
| B 2 <b>WELL INFORMATION</b><br><small>1 2</small><br>APPROX. PUMPING RATE<br>(GAL. PER MIN.) <b>5</b><br><small>8 12</small><br>AVERAGE DAILY QUANTITY NEEDED<br>(GAL. PER DAY) <b>500</b><br><small>14 20</small>  |                                | NOT TO BE FILLED IN BY DRILLER<br>HEALTH DEPARTMENT APPROVAL<br><b>Howard</b> <b>13</b><br><small>COUNTY NAME COUNTY NO.</small><br>STATE SIGNATURE _____ INSERT S →<br>DATE ISSUED <b>08/00</b> <b>Craig Miller</b> <b>8/9/01</b><br><small>43 MM DD YY 48 CO SIGNATURE EXP. DATE</small><br>NORTH GRID <b>520</b> <b>000</b> EAST GRID <b>0790</b> <b>000</b><br><small>50 55 57 63</small>  |   |
| USE FOR WATER (CIRCLE APPROPRIATE BOX)<br><input checked="" type="checkbox"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION<br><input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)<br><input type="checkbox"/> INDUSTRIAL, COMMERCIAL, DEWATERING<br><input type="checkbox"/> PUBLIC WATER SUPPLY WELL<br><input type="checkbox"/> TEST, OBSERVATION, MONITORING<br><input type="checkbox"/> GEO-THERMAL |                                | SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X<br>SOURCES OF DRILLING WATER<br>1. <b>well</b><br>2.<br>3.<br>WRITE THE BOX NUMBER FROM THE MAP HERE<br>E <b>780</b><br>N <b>520</b><br>000<br>000  |   |
| APPROXIMATE DEPTH OF WELL <b>150</b> FEET<br><small>24 28</small><br>APPROXIMATE DIAMETER OF WELL <b>6"</b> NEAREST INCH  |                                | 9/28/00 - Grout to follow Lot 19<br>No insp  |   |
| METHOD OF DRILLING (circle one)<br>BORED (or Augered) <input checked="" type="checkbox"/> <b>AIR-ROTARY</b> <b>JETTED</b> <b>Jetted &amp; DRIVEN</b><br><small>30</small><br><b>CABLE</b> <b>REVERSE-ROTARY</b> <b>ROTARY (Hydraulic Rotary)</b><br><small>37</small><br>other _____ <b>DRIVE-POINT</b>   |                                | REPLACEMENT OR DEEPEINED WELLS<br>(CIRCLE APPROPRIATE BOX)<br><input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL<br><input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED<br><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<br><input type="checkbox"/> THIS WELL WILL DEEPEIN AN EXISTING WELL<br>PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) 41 _____ 52 |   |
| Not to be filled in by driller (MDE OR COUNTY USE ONLY)<br>APPROP. PERMIT NUMBER <b>54</b> G A P <b>63</b><br>PERMIT NO. <b>Ho -94 -2806</b><br><small>70 71 72 73 74 75 76 77 78 79</small>  |                                |  |   |
| SPECIAL CONDITIONS<br><small>NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED.</small>  |                                |  |   |



# APPLICATION

PERCOLATION TESTING

A 589470

P \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 313-2640

DISTRICT 04

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 Ray + Jane Cubbage

ADDRESS 14564 Dorsey Mill Rd. Glenelg MD PHONE 410 489 7017

AGENT OR PROSPECTIVE BUYER Susquahanna Land Holding Co  
21738

ADDRESS 1814 Hyman Ln Crofton MD 21114 PHONE 410 451 3916

PROPERTY LOCATION:

SUBDIVISION Cubbage Sub LOT NO. 15 (12)

ROAD AND DESCRIPTION \_\_\_\_\_

TAX MAP 21 PARCEL # 31

SIZE OF LOT 1<sup>+</sup> Ac 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]  
(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



589470

COUNTY #

SOIL PROFILE

0'

15A

or /br  
Clay  
loam

3.0'

1/4 tan/  
orange  
silty  
sand  
loam  
10%  
shale  
frags

12.0'

15B

Same  
as  
hole

#

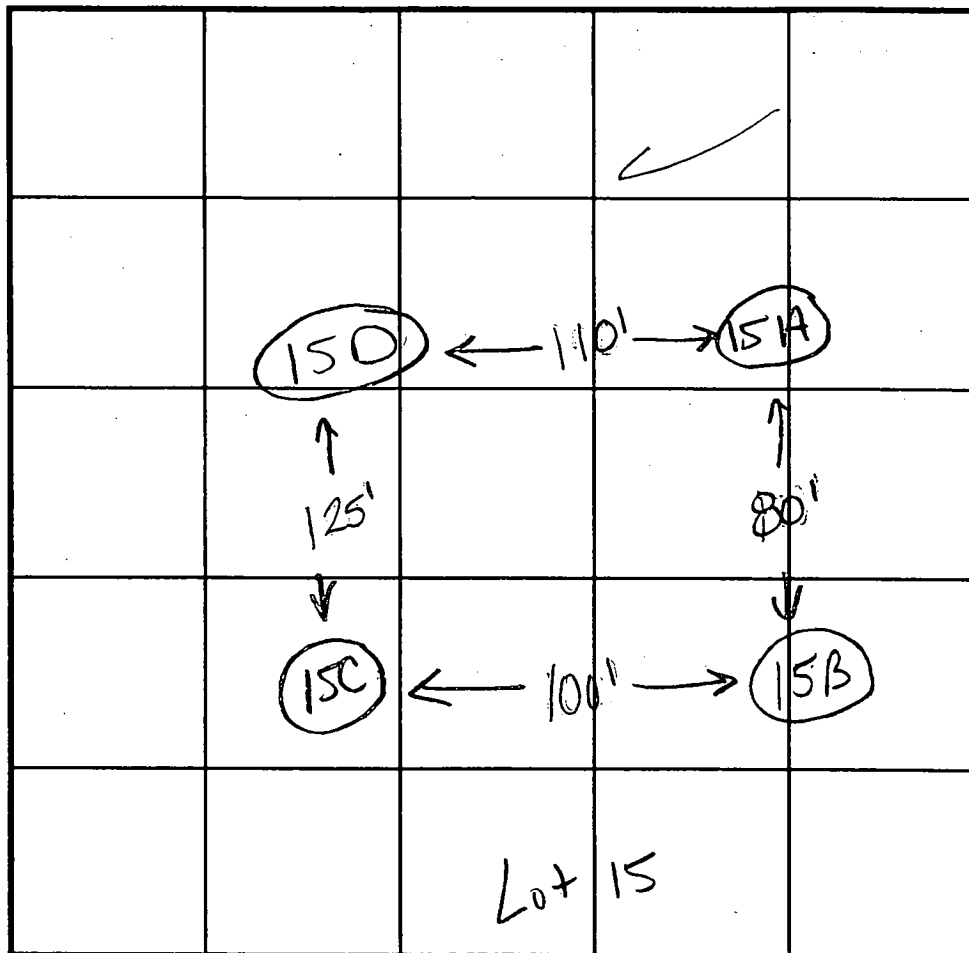
15A

15C

Same  
as  
hole

#

15A



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE

0'

15D

or /br  
Clay  
loam

3.0'

tan  
silty  
sand  
loam  
10%  
shale  
frags

12.0'

| DATE    | TEST NO. | DEPTH  | PRE-WET |                  | TEST - 1" DROP |        | TIME |
|---------|----------|--------|---------|------------------|----------------|--------|------|
|         |          |        | START   | STOP             | START          | STOP   |      |
| 10/7/97 | 15A      | 3.0'S  | 1:5830  | 1:5930           | 1:5930         | 2:01   | 130  |
|         |          | 12.0'D | Visual  | OK - see profile |                |        |      |
|         | 15B      | 3.0'S  | 12:5830 | 12:5930          | 12:5930        | 1:0130 | 2min |
|         |          | 11.0'D | Visual  | OK - see profile |                |        |      |
|         | 15C      | 3.0'S  | 1:04    | 1:05             | 1:05           | 1:07   | 2min |
|         |          | 11.5'D | Visual  | OK - see profile |                |        |      |
|         | 15D      | 3.0'S  | 2:1830  | 2:2030           | 2:2030         | 2:2330 | 3min |
|         |          | 12.0'D | Visual  | OK - see profile |                |        |      |
|         |          |        |         |                  |                |        |      |

REMARKS test holes staked

TYPE OF SOIL

TESTED BY Kim Maiste / Kim Sue

ALSO PRESENT Hugo + Jeff

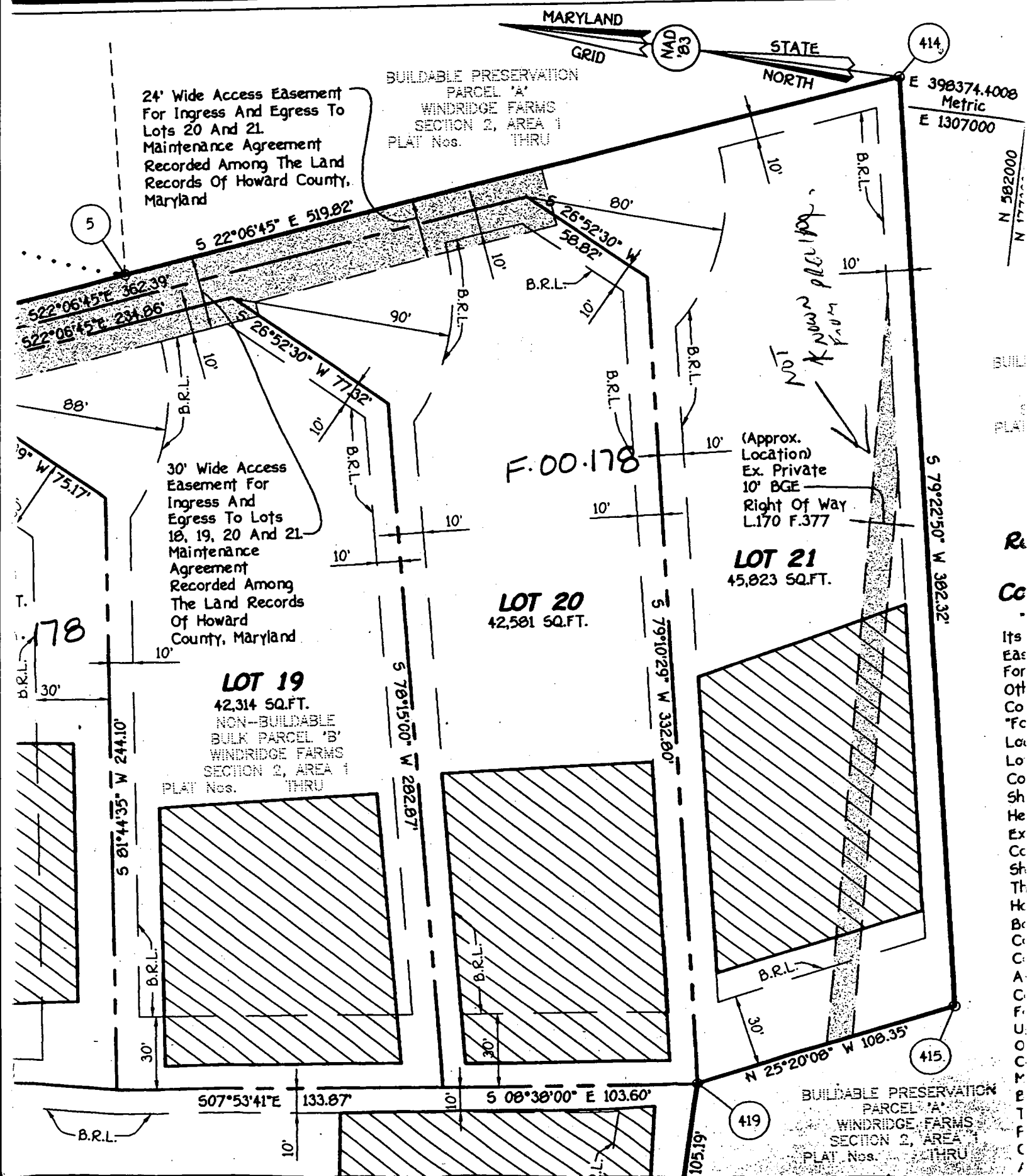
TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 4-5 minutes

TRENCH WIDTH 3

INLET DEPTH 3

MAXIMUM BOTTOM DEPTH 5

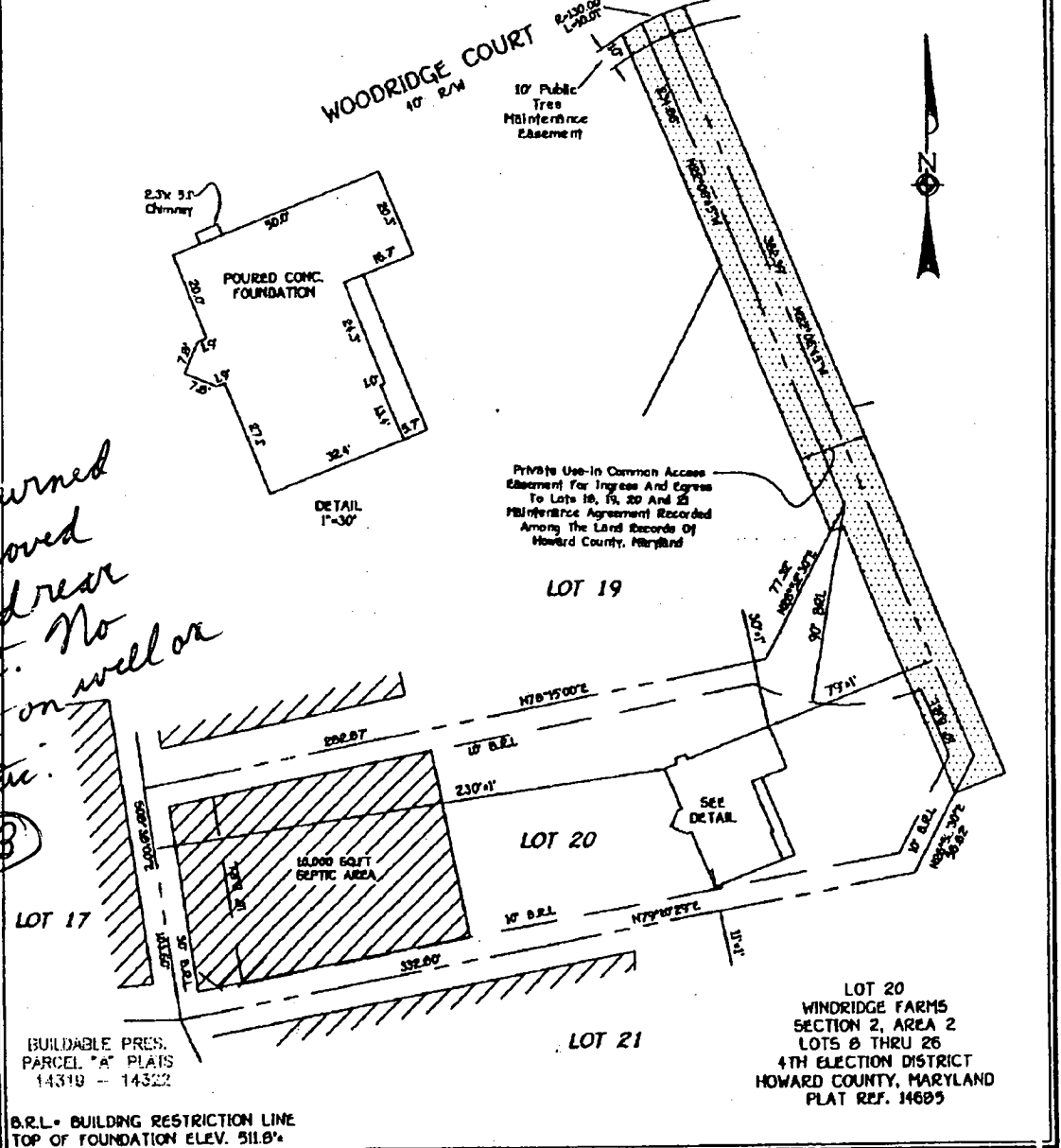
SQ. FT./BEDROOM 180



# GENERAL NOTES:

- 1) THIS LOCATION DRAWING IS PREPARED FOR THE BENEFIT OF THE CLIENT SIGNING THE HOUSE LOCATION SURVEY APPROVAL FORM INsofar AS IT IS REQUIRED BY A LENDER OR TITLE INSURANCE COMPANY OR ITS AGENTS IN CONNECTION WITH THE CONTEMPLATED TRANSFER, FINANCING OR REFINANCING OF THE PROPERTY SHOWN HEREON. UNLESS INDICATED AS BEING A BOUNDARY SURVEY, THIS LOCATION DRAWING IS NOT INTENDED FOR USE IN THE ESTABLISHMENT OF PROPERTY LINES AND IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OF LOCATIONS OF FENCES, GARAGES, BUILDINGS OR OTHER EXISTING OR FUTURE IMPROVEMENTS. AS A RESULT, THIS LOCATION DRAWING DOES NOT PROVIDE FOR ACCURATE IDENTIFICATION OF PROPERTY LINES, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING FOR RE-FINANCING.
- 2) SUBJECT PROPERTY IS SHOWN IN ZONE C ON THE NATIONAL FLOOD INSURANCE PROGRAM FLOOD INSURANCE RATE MAP OF HOWARD COUNTY, MARYLAND, COMMUNITY PANEL No. 2402440022 D, EFFECTIVE DEC. 4, 1986.
- 3) THE OFFSETS FROM BUILDING LINE TO PROPERTY LINE AS SHOWN ON THE PLAT HEREON ARE TO AN ACCURACY OF PLUS OR MINUS 1' (4).
- 4) NO TITLE REPORT FURNISHED. SUBJECT TO ALL EASEMENTS, RIGHTS OF WAY AND CONDITIONS OF RECORD.

12/11/01  
House turned  
and moved  
toward rear  
of lot. No  
effect on well or  
septic.  
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| <p><b>FISHER, COLLINS &amp; CARTER, INC.</b><br/>CIVIL ENGINEERING CONSULTANTS &amp; LAND SURVEYORS<br/>CENTRAL DELAWARE OFFICE: 1107E BALTIMORE MARINA, P.O. BOX 1107E, BALTIMORE, MD 21202<br/>TEL: 410-528-1107</p> <p>FCC</p> | <p>STATE OF MARYLAND<br/>STEVEN RANDALL FISHER<br/>REGISTERED<br/>PROPERTY LINE SURVEYOR<br/>PROFESSIONAL SURVEYOR DATE<br/>REG. # 582</p> | <p><b>HOUSE LOCATION DRAWING</b></p> <p>FOUNDATION LOCATION: 9/26/01<br/>FINAL LOCATION:<br/>BOUNDARY SURVEY:</p> <p>SCALE: 1"=60'<br/>DATE: 9/28/01<br/>DRAWN BY: S.A.B.<br/>CHECKED BY: A.M.C.<br/>PROJECT No.: 61300</p> |
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