PERMIT

SEWAGE DISPOSAL SYSTEM

A 25196

P 30254

MARYLAND STATE DEPARTMENT OF HEALTH'

HOWARD COUNTY

ELLICOTT CITY

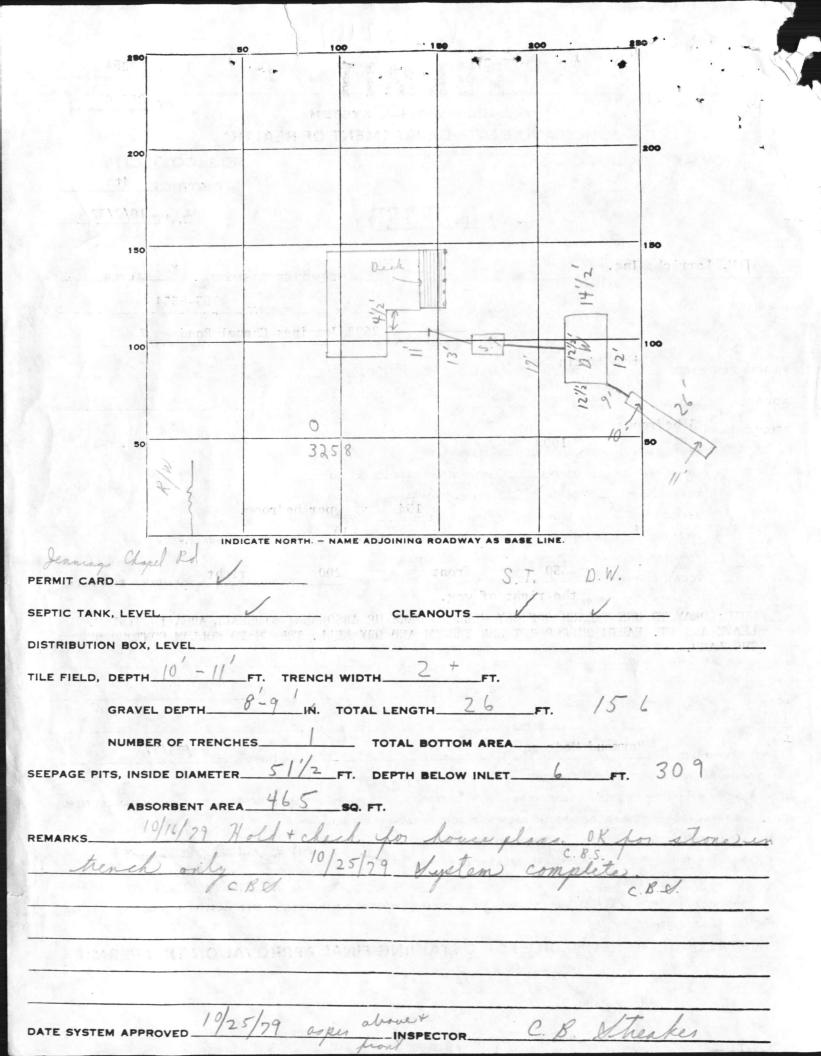
DISTRICT_4th

INDEXED

DATE 10/2/79

IS PERMITTED TO INSTALL X ALTER
PHONE 795-6554
2698 Jennings Chapel Road 7
=26
\$0. FT.
A SQ. FT.
so. ft. per bedroom.
10
DEPTH 10 FT. BELOW ORIGINAL GRADE
200
LINE AND FT. FROM LOT LINE AS SEEN WHEN
UP ABSORBENT SIDEWALL AREA IN SYSTEM.
D DRY WELL. TRENCH TO FOLLOW CONTOUR OF
Verial # 5/2/3 7/13/29
Moranton about - sere sheet
Moraghan about - pere sheet outings put system in area is it is
DATE 8/23/77
RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM
FI IN TRENCH
RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM FLIN TRENCH.
RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM FLOWER SIGNED 12-7-29
FI IN TRENCH
Suid #13 00121444 Sust. Undyd 1-5 Togallin
FI IN TRENCH

HD - 23



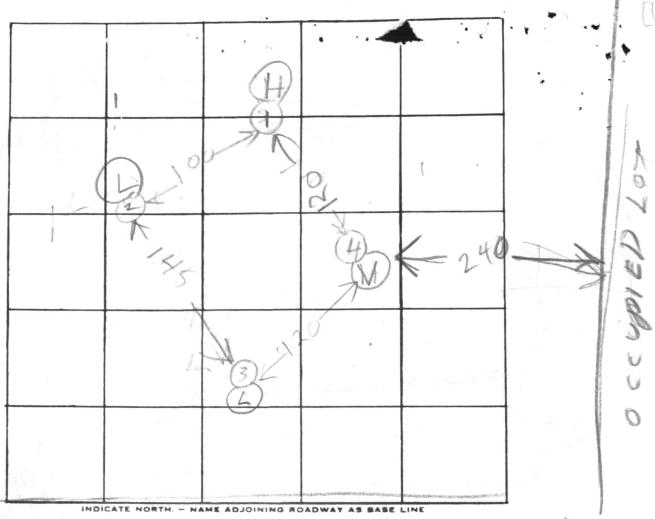
PRELIMINARY

** PPLICATION

Δ 25196

SEWAGE DISPOSAL TE	ESTING P
STATE OF MARYLAND - DEPARTMENT OF HE	EALTH AND MENTAL HYGIENE
HOWARD COUNTY HEALTH DEPARTMENT 1000 6-1	RL TANK 38 DISTRICT 4th
ENVIRONMENTAL HEALTH SERVICES 1250 GA	L ZANK 4BR DATE 1/31/77
P O. BOX 476, ELLICOTT CITY, MARYLAND 21043	DATE
TELEPHONE: 465-5000, EXT. 356	
Y WELL - 13450 FT SIDEW	ALL AREA PER BEDAU
	TET DEEP BELOW ORKINACG
TLINE AND 200FT FROM	N THE RIGHTSIDE
TO: THE COUNTY HEALTH OFFICER OF THE 40 7	AS SEENWHER
ELLICOTT CITY, MARYLAND FACING 7/4	E LOT FROM
	TO CONSTRUCT (OR RECONSTRUCT) A SEWAG
I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER	
DISPOSAL SYSTEM.	71
Albert G. Warfield	ck Martin
20624 The Hum Human	1. Avenue 774-267
ADDRESS Serving happelifed	PHONE Boender - 465-7777
and the all all	1 1 Poto
PROPERTY LOCATION: Brookeville Ma.	20724 New Lot 7
Marian O Cata D DB O	2
SUBDIVISION WARTED	LOT NO.
2698 Florence	Road
POAD AND DESCRIPTION QUES	110 200
SIZE OF LOT 17415	3 or 4 bedrooms
SIZE OF LOT	TYPE BLDG. NUMBER OF BEDROOMS
IF NOT SINGLE RESIDENCE DESCRIBE	
THE SYSTEM INSTALLED UNDER THIS APPLICAT	ION IS ACCEPTABLE ONLY UNTIL PUBL
FACILITIES BECOME AVAILABLE.	BLDG. PERMIT SIGNED
	AND RETURNED
SIGNATURE OF APPLICANT /s/ Dennis Rush	Alreal No. 3,958/
Thomas Madela 11	1/1/1/2 0/23/7
APPROVED BY WIND FOR	DATE
	(NIND OF STREM)
PEJECTED BY FOR	(KIND OF SYSTEM)
HOLD BENDING FURTHER TECT	
REASONS FOR REJECTION OR HOLDING 3/30/22 Platur	the Colfeed Holos OKloy BH
ALASONS FOR REJECTION OR HOLDING	02: + 30
	pama # 31
	bain primit

THIS IS NOT A PERMIT



		7.1	PRE-	WET	TEST - 1	" DROP		HOLE
DATE	TEST NO.	DEPTH	START	STOP	START	STOP	TIME	And he C V PN / I V /
3817	10	12/2	1129	1652	1152	1125	33	(I) mili
.lom	15	4	1129	1133	1133	1140	7	H=1+16H
	20	12/2	1133	1.150	1150	1203	13	07-101
1	25	4	1135	1144	1140	1150	16	S-20W
	317	13	1200	1206	1206	1018	12	Q=LOW
	35,	5	1200	206	1206	1229	23	
	4/	12	SAN	049	SHA	LEY		(V) NEXTHIGH
3/2/17	IM	10	420	428	428	443	15	
			1		18			ar Time
		1 7		. #"				17 mm

REMARKS Certify Hole Low	tions max nep
TYPE OF SOIL	46
TESTED BY BIHODGES	ALSO PRESENT: HSIRK

C 1 3052 SEQUENCE NO. (OEP USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)	FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE	COUNTY A 25195
DATE Received DATE WELL COMPLETE	22 / 6 5 26	PERMIT NO. FROM "PERMIT TO DRILL WELL"
8 13 15 20 OWNER * FREEZE #	(TO NEAREST FOOT)	28 29 30 31 32 33 34 35 36 37
OWNER FREEZE F	CHAPEL RD first name TOWN F	FLORENCE
SUBDIVISION MUSTAFA PROPERTY		LOT 13
WELL LOG Not required for driven wells STATE THE KIND OF FORMATIONS	WELL HAS BEEN GROUTED (Circle Appropriate Box) (Circle Appropriate Box)	C 3 1 2 PUMPING TEST
PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING	TYPE OF GROUTING MATERIAL	HOURS PUMPED (nearest hour)
DESCRIPTION (Use FEET Check if water	CEMENT CM BENTONITE CLAY B C	PUMPING RATE (gal. per min. 7 0 1
additional sheets if needed) FROM TO bearing	NO. OF BAGS NO. OF POUNDS 1037	to nearest gal.) METHOD USED TO
Brown Shale 0 64	DEPTH OF GROUT SEAL (to nearest foot)	MEASURE PUMPING RATE
Mour Shall 0 64	from 6 ft. to 4 5 ft.	WATER LEVEL (distance from land surface) BEFORE PUMPING
Blue Rock 64 1652	(enter 0 if from surface)	17 20
Blue Rock 64 1652	casing types types ST CO	WHEN PUMPING 3
	insert appropriate STEEL CONCRETE	TYPE OF PUMP USED (for test)
	code PL OT	A air P piston T turbine
	PLASTIC OTHER	— — — — other
	MAIN Nominal diameter Total depth CASING top (main) casing of main casing	C centrifugal R rotary O (describe 27 below)
	TYPE (nearest inch) (nearest foot)	J jet Submersible
	60 61 63 64 66 70	27 27
	E OTHER CASING (if used)	
	diameter depth (feet) inch from to	PUMP INSTALLED
	C A S	DRILLER WILL INSTALL PUMP YES NO (CIRCLE) (YES or NO)
		IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS
	screen type SCREEN RECORD	EXCEPT HOME USE
	or open hole ST BR HO	TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O)
	appropriate STEEL BRASS OPEN BRONZE HOLE	IN BOX-SEE ABOVE:
	below PL OT	GALLONS PER MINUTE (to nearest gallon)
	PLASTIC OTHER	PUMP HORSE POWER 37 41
	C 2	PUMP COLUMN LENGTH (nearest ft.)
	DEPTH (nearest ft.)	CASING HEIGHT (circle appropriate box
	A 8 9 11 15 17 21	and enter casing height)
	H ₂	LAND SURFACE (nearest foot)
CIRCLE APPROPRIATE LETTER	C 23 24 26 30 32 36 R 3	49 foot)
A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED	E 3 38 39 41 45 47 51	LOCATION OF WELL ON LOT
E ELECTRIC LOG OBTAINED	SLOT SIZE 123	SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR
P TEST WELL CONVERTED TO PRODUCTION	DIAMETER (NEAREST INCH)	N LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES
I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN	from to	(MEASUREMENTS TO WELL)
ACCORDANCE WITH COMAR 10.17.13 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION	GRAVEL PACK	
PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.	FLOWING WELL INSERT	
DRILLERS IDENT. NO. 238	F IN BOX 68 68 68	15 7
Joseph T. Marme	(NOT TO BE FILLED IN BY DRILLER)	with the second
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)	T (E.R.O.S.) W Q	F 1 55
	70 72	YS SY
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)	TELESCOPE LOG OTHER DATA CASING INDICATOR	and the second second

MEGENEU ME PHOPET NO.

8034

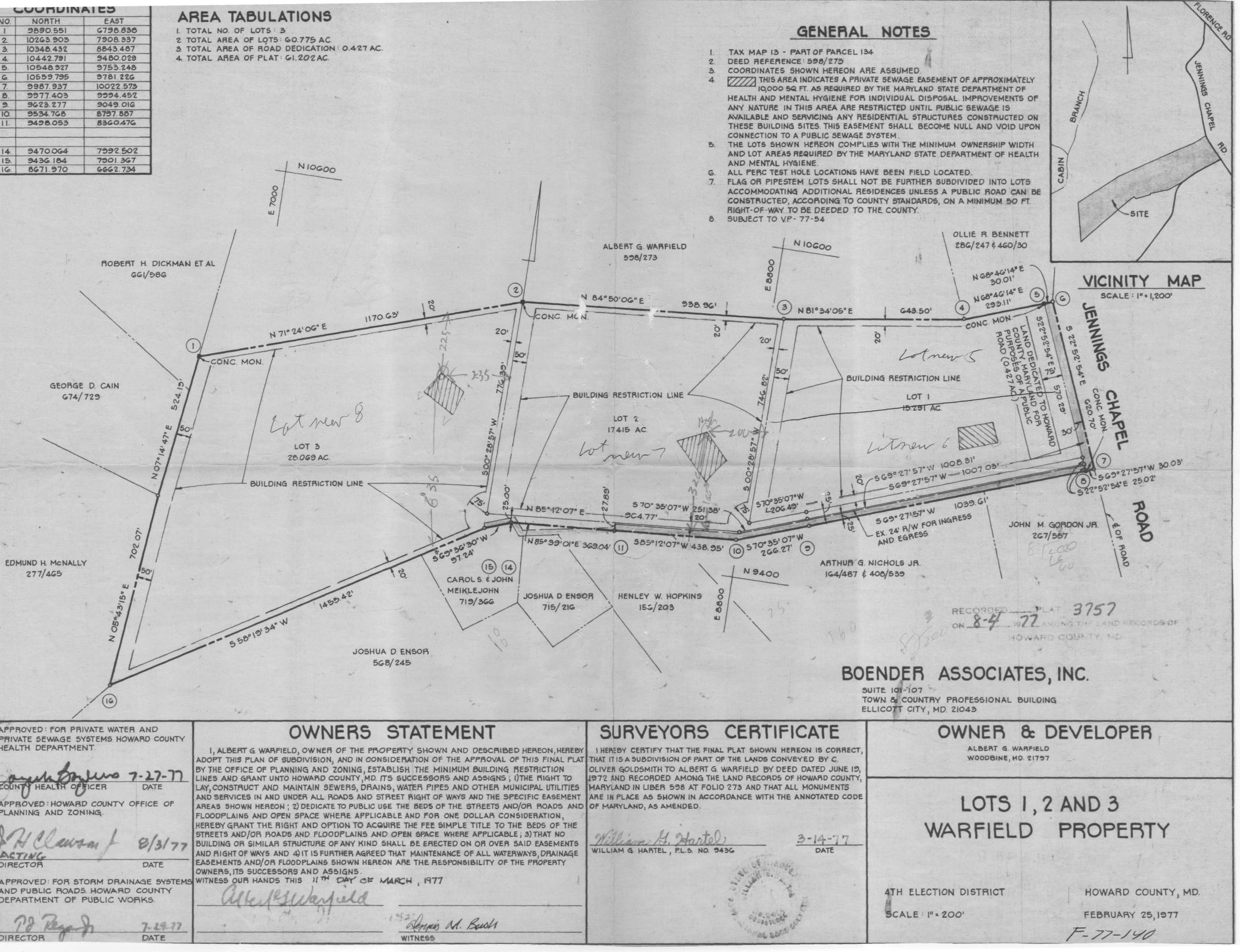
RICH MARTIN 20624 NEW HAMPSHIRE AVE. BROWNLLE, Md. 20729 P. M. LARRICK, INC.

LOT #7 WARFIELD SUBDIOSION 2698 JEMUS CHAPEL FLOAENCE Med.

ROUTE 2 - BOX-187-A

MT. AIRY, MARYLAND 21771 PHONE 301-795-6554

N 84° 50' 06" E 938.96 I CERTIFY THE ABOUT MEASGRHENTS - I ELEVATIONS ARE ACTUAL I CORRECT FOR THIS PROPERTY P. Miedal Faire 746.83 FLEQ ATOTIME OF PERC, SAME 200 Ex Eley 221.6 DRY WELL INV. EIFY 218.6 1000 GAL TANK EX Eley 221.6 Ex WELL Elev 230 O F.F. 229 EX ELEC Ub BASE 221 N 220. N 83° 12'07" E 904.77 6/21/79 REVISED DLANS ON RH JUM



REPORTED
OWARD COUNTY
OF AT THE DEPT.
THE ZS 12 29 PM '7'
ENGINEE OF THE HEALTH

the text the text.

E Booniyay APPLICATI CONFINMS WELL WAS FIELD LOCATED, with of conflict with L. AC. W. OU 2 acto (no cos) ٤ GA. ALA 3 BAT ENT ואפאסטאם 70°41'19°E N 87034. 500 CAllon 388.46 20,0 VIC PropANO 37 870 34,3 TANK H22º 22'18' E 6.66 LILAN RIGHT.

RECEIVED HOWARD COUNTY HEALTH DEPT. ENVIRONMENTAL HEALTH

1999 NO 24 AM 8: 55

7

1

APPLICATION	A_23155
SEWAGE DISPOSAL TESTING	P
STATE OF MARYLAND - DEPARTMENT OF HEALTH A	ND MENTAL HYGIENE
	MS 3BPISTRICT 4th
HOWARD COUNTY HEALTH DEPARTMENT	1/2 4B/ DATE 1/31/77
P O. BOX 476, ELLICOTT CITY, MARYLAND 21043	DATE
TELEPHONE: 465-5000, EXT. 356	
DRY WELL 18050 FIS DEWALLA	
DRYWELL INLES TO BE 4 FT DE	EP BELOW ORIGINAL GRAD
LACE THE DRY WELL 1251 FT FRO	no the the sine
SIDEOFTHELOTASSEEN WHEN	FACING THE
324 FT FROM THE LOS	- TO AND
TO: THE COUNTY HEALTH OFFICER ENVING HAD PO	1 13 13
ELLICOTT CITY, MARYLAND	
I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONS	TRUCT (OR RECONSTRUCT) A SEWAGE
DISPOSAL SYSTEM. Thomas P. Sloan	
Albert G. Warfied property	
2690 O CO 10 D 1	Any questions call Boender:
ADDRESS Inningshape I'm men	PHONE465-7777
Janes Ry	Jafa hop New Lot &13
PROPERTY LOCATION:	tafa hop / cu doz als
SUPPLYISION WARFIELD FORGE	LOT NO.
SUBDIVISION	
POAD AND DESCRIPTION	
SIZE OF LOT 15355 Che	YPE BLDG. 3 or 4 bedrooms
	NUMBER OF BEDROOMS
IF NOT SINGLE RESIDENCE DESCRIBE	
THE SYSTEM INSTALLED UNDER THIS APPLICATION IS A FACILITIES BECOME AVAILABLE.	ACCEPTABLE ONLY UNTIL PUBLIC
/s/ Dennis Rush	/ /
D. 19612 n.	n00 0/70/2.
APPROVED BY NOW HOTEL FOR THE PORT OF THE	DATE
ARINDOF	SYSTEM
REJECTED BYFOR	SYSTEM)
POLD PENDING FURTHER TESTS	DATE
0/20/22 PD + +1/G	en 111 0 82 0 R11
REASONS FOR REJECTION OR HOLDING 3/30/11- (Max with Cer	was Hoor by Mit
	BP-62180

THIS IS NOT A PERMIT

pent						•	AD.	
4 pel) (D)	1114	AD)					CHAPEL	
3		TR 32 X				7	18115	35
	-150	THE REPORT OF THE PERSON OF TH	3	24		Marie Commission Commi	Constitution of streeting annual services	1 48
R/W	Newsyste du con consession de la Consess	TO LECT	PIRE FOIR	PC L	AS BASE LINE		Pad decommendate (conditioning)	HOLE
7/8/51	TEST NO.	DEPTH //	START	STOP	START	TOROP STOP	TIME	ELEVATI
318171 318121	1	12/2	1019	1025	1025	1040	16	W=HIGH
Block	1/h	12	1027	1024	1024	1039	10	(b)=600
	25	42	1027	1039	1039	1144	15	
	3 D	13	1046	1049	1049	1036	-9	Q=LOV
	35,	4/2	1046	1049	1049	1056	14	
2/8/77	4 V	12	THE RESERVE THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER, THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER,	3/7 5AN	DY857	1257		W=NEX HIGHES
			1 1	7 1		1771		artimelo
		+	-			•	4	1
						19		max 4l
REMARKS TYPE OF S	01	2 Ho	ee Su	low	7	39		avtimilo max nepel 4 f

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

BOX \$476 Exhicott City MD: 21043 PUMP INSTALLATION

THE FOLLOWING STATEMENT MUST BE COMPLETED BY THE HOME OWNER WHEN A PUMP IS INSTALLED BY A PERSON OTHER THAN THE WELL DRILLER:

My well driller is not to install the pump for my water well, and I hereby certify that it will be my responsibility to have a Pump Permit taken out by a registered master plumber or certified pump installer. It will be my responsibility to notify the Health Department before and during the installation so that inspections can be made by their representative. (Pursuant to Chapter XVII, of the Plumbing Code of Howard County.)

Mustasa Property

2698 Jennings Cheyee Rd

Woodbine MD, 21797

301-884-6059

11-7-84 (Date)

SURDIVISION. N	lustafa Propert	LOT NUMBER: /3 mont
Formerly L	ot6 War fiell Prope	DRY WELL AND TRENCH
	DRI WELL OR I	
		sq. ft./bedroom
	Septic Tank	Minimum Total square Feet
3 bedroom	1000 gallon	
4 bedroom	1250 gallon	
5 bedroom	1500 gallon	
Inlet	feet below original grad	de.
	lepth feet belo	
Effective area b	pegins at feet	below original grade.
ground an	nd leave a 5 foot earth but n is to exceed 100 feet	orbent area, run the trench on level ffer between dry well and trench. in length. Trench inlet to be same of stone below distribution pipe.
	<u>T</u>	RENCHES
		2/2 sq. ft./bedroom
Trench to be	2ft.wide.	
Inlet 4	feet below original grad	de.
Bottom maximum	depth 10 feet belo	ow original grade.
Effective area b	pegins at 4 feet	below original grade.
feet o	of stone below distribut	ion pipe.
(2) If a (3) Tres (4) Call (5) Prov tanh (6) If a and	nches to be installed on I for inspection of tren vide 6"-8" diameter clea k and drywell. a Garbage disposal is us increase absorbant side	d, a distribution box is required. level ground. ch before gravel is installed. nout and cap to grade or above on septic ed, increase septic tank capacity by 50% wall area by 22%.
LOCATION: 5+0	art the first tuni	ch 315 feet from the front lot line
and 115fee	et from the left	Sideline as seen when facing
the lot f	rom Jeunings Cha	pel Road, Continue to dig the
treuch on 1	evel ground, rouning	towards the rear lot line. Much
thesecon	& trench paralle	I to and 12 feet away from
the first	french'	

4/19785 A.M. July Jan. Spection Well Pump Inspection

P. O. Box 476
Efficott City, Maryland 21043

Owner's Name: 2

Thomas Sloan

2690 Jennings Chapel Road

Address:

Lot 13, Mustafa Property

Location of Property:

Well Tag Number;

81-0803

Plumber or Certified Pump Installer:

Phone Number:

License Number:

Receipt Number:

Date:

Comments:

Inspection: 4/19/85 Pump, potters of line enstabled at 4ft below grade. No work ready work seady

5/15/85 - P.R.V. installed on temp line

Date Well Pump Inspection was approved:

Inspector:

inge 10f / pare 12/10/84

		FIELD DATA S		
		HOWARD COUNTY WELL	L YIELD TEST	
	. HO - 81-08	03		
		JENNINGS CHAPE	LRD.	
	MUSTAFA PROP	enty Lot	13 Block Plat	Sec.
well Driller _	J. MAYNE	Owne	er E. FREEZE	
Denth o	of well 165			
Distanc	ce of measuring p	point (M.P.) above gr	cound /	
Static	water level (S.W	1.L.) below M.P.	9 .	
' High rate	pumping rese	ervoir drawdown		
		06:8 6	Dumning rate 18	
Time pum Total ti	me /s min to	reach pumping water	r level 34 ft.	below M.P.
!I. Recovery	pump test data -	· observations to be	recorded every 15 minu	
TIME (in 15	WATER LEVEL	PUMPING RATE	FLOW METER READING	(gallons per
minute in- tervals	below M.P.	time to fill \$ gallon bucket	(if used)	minute)
8,35	34	6		10
8150	34	6		10
9.05		6		10
9/20	34	6	PER SECTION OF SECTION	10
9:35	34	1		10
9:50	34	1		10
10:05	35	6		10
10:20	35			10
10:35	35	6		10
10:50	AND ADDRESS OF THE PARTY OF THE	6		10
11:05	35	6		10
1120	35	L		10
11000		NEW TARREST OF A		
			Contract the Contract of the C	
	A MANAGEMENT OF STREET			

DEC 14 9 07 AH '84

A CONTRACTOR

ENALUS OF THE SERVED COUNTY

В	5245 SEQUENCE NO. (OEP USE ONLY)	STATE OF	MARYLAND	OEP PERMIT NUMBER
1	THIS NUMBER IS TO BE PUNCHED		DRILL WELL	40-81-0803
-	IN COLS. 3-6 ON ALL CARDS)	please pr	int or type	fill in this form completely
	Date Received OWNER INFORM	ATION	B 3	LOCATION OF WELL
	8 13		B COUNTY	21
	15 Last Name Owner	First Name 34	MUSTAFA	PROPORTY
	2 6 9 8 11 e N 1 N 9 S 36 Street of RFD	CHAPEL 55	23 SUBDIVISION SECTION	тот (в 3) (13)
	WOODBINE	m D 2 / 7 9 2	44 46	48 50
H		OState72 Zip 76	52 NEAREST TOWN	
	DRILLER INFORMATION	ZISET	MILES FROM TOWN (ent	er 0 if in town) M 1
	Driller's Name	77 License No. 80	B 4	[] # # A = D]
1	Firm Name		DIRECTION OF WELL FROM TOWN (CIRCLE BOX)	OT NEAR WHAT ROAD 30
	Address Rd Rd Mr. W	ry, ma	_ N _	NORTH N
	Signature 1	Date .	N 8 N E 8 9	ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) W 32 E
B	WELL INFORMATION	V	W TOWN E	WEST SEAST SOUTH
	APPROX. PUMPING RATE (GAL. PER MIN.)	12	8 18	34 Z 7.5 37
	AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY)	00 1	S S S S S S S S S S S S S S S S S S S	DISTANCE FROM ROAD
-	USE FOR WATER (CIRCLE APPR	OPRIATE BOX	8	ENTER FT or MI F 7
	D HOME (SINGLE OR DOUBLE HOUSEH		[4] [1] : [100 100 100 100 100 100 100 100 100 10	NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
	F FARMING (LIVESTOCK WATERING & A		HOWARD COUNTY NAME	425/95 COUNTY NO.
1	INDUSTRIAL, COMMERCIAL, STATE A		OEP	STATE HEALTH
	22 OTHER (REQUIRES APPROPRIATION I		DATE ISSUED	INSERT S L
13	P APPROPRIATION PERMIT AND STATE I APPROVAL)	HEALTH DEPARTMENT	43 48 CC	SIGNATURE SAP. DATE
	T TEST, OBSERVATION, MONITORING (I	MAY REQUIRE	NORTH 5 3 2 0 0	0 EAST 0 7 7 0 0 0 0
	SIGIAL		SHOW MAJOR FEATURE BOX & LOCATE WELL	ES OF
-	APPROXIMATE DEPTH OF WELL 24	FEET 28	WITH AN X	
	APPROXIMATE DIAMETER OF WELL 6	NEAREST INCH	SOURCES OF DRILLING	WATER
	METHOD OF DRILLING	(circle one)	2. 3.	
	BORED (or Augered) JETTED	Jetted & <u>DRIVEN</u>	WRITE THE BOX NUMBI	ER The second se
	37 AIR-ROTary AIR-PERcussion RO	OTARY (Hydraulic Rotary)	FROM THE MAP HERE	*
	<u>CABLE</u> <u>REV</u> erse-ROTary	DRive-POINT	E 770	
	other		N 530	2 000 000
	REPLACEMENT OR DEEPENE (CIRCLE APPROPRIATE B			W SHOWING LOCATION OF WELL IN TOWNS AND ROADS AND GIVE
is.	N THIS WELL WILL NOT REPLACE AN E			TO NEAREST ROAD JUNCTION
	THIS WELL WILL REPLACE A WELL T	HAT WILL BE	N SAME	70
	39 S THIS WELL WILL REPLACE A WELL T	HAT WILL BE USED	A MA COLHE	florence Kd.
	D THIS WELL WILL DEEPEN AN EXISTIN	NG WELL	35	1 Ties
	PERMIT NUMBER OF WELL TO BE REPLACE (IF AVAILABLE) 41	CED OR DEEPENDED	1	13
				1 0 /2
	Not to be filled in by driller (OEP I		tool	- min
-	54	63		30 Cha
	FORCE INITIALS PERMIT No. HO - TO 71 72	8 1 - 0 8 0 3	A CONTRACTOR OF THE REAL PROPERTY.	mings Chapil Ry
	SPECIAL CONDITIONS		ALL STREET	

JENNING CHAPEL ROAD 6 91°26'20"E 515.07" BENJG STAKED LOCATIONS ARE APPLIANTARE, ESSED ON 25.00 ORL 3 WITHOUT JOHN M. GORDON, JK. est unes SITE LOCATED INSPECTION OF DOCEAC. MELD WELL NOTE: Ì AKTHER G. NICHOLO.JK. 14407 a 420/550 为马 LOT 10 400.15 OKL SO 0

SHOULE

