

8-31-87
9am
8/28/87
4:2 PM

05-358655

PERMIT

P 39985

A 26691

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

DISTRICT 5th

DATE 8/31/87

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH

461-9933

DATE SYSTEM APPROVED 8/31/87

INSPECTOR CW

INDEXED

I.C.O.B.
{ Time expired }

Dave Hopkins

IS PERMITTED TO INSTALL X ALTER

ADDRESS _____ PHONE _____

SUBDIVISION Glenelg Manor II ROAD 12727 Folly Quarter Roador 6D

PROPERTY OWNER Fred and Brenda Frey

ADDRESS 9125 Flamepool Way, Columbia, Maryland 21045 Phone: 995-1292

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES _____ NO X

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

3 180
4
720
3 160
4.5 7200.
45
270
21600

TRENCHES - 180 sq. ft. sidewall area per bedroom. (Two 80 ft. trenches needed.)

Trench to be 2 ft. wide. Inlet 3½ ft. below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 3½ ft. below original grade. 4½ ft. of stone below distribution pipe. Beginning from left rear lot line, place distribution box 130 ft. down the left (364.78') line and 20 ft. off the left line as seen when facing property from common roadway. Run trenches along contour towards the rear (150.42') lot line. OK/CW

PLANS APPROVED BY Bert Nixon DATE 4/6/87

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.

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 TRENCHES ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCHES.

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 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 PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES.

BLDG. PERMIT SIGNED
AND RETURNED 3/6/89
Serial # 23672 - pool.

BLDG. PERMIT SIGNED
AND RETURNED 9/1/87
Serial # 14251

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

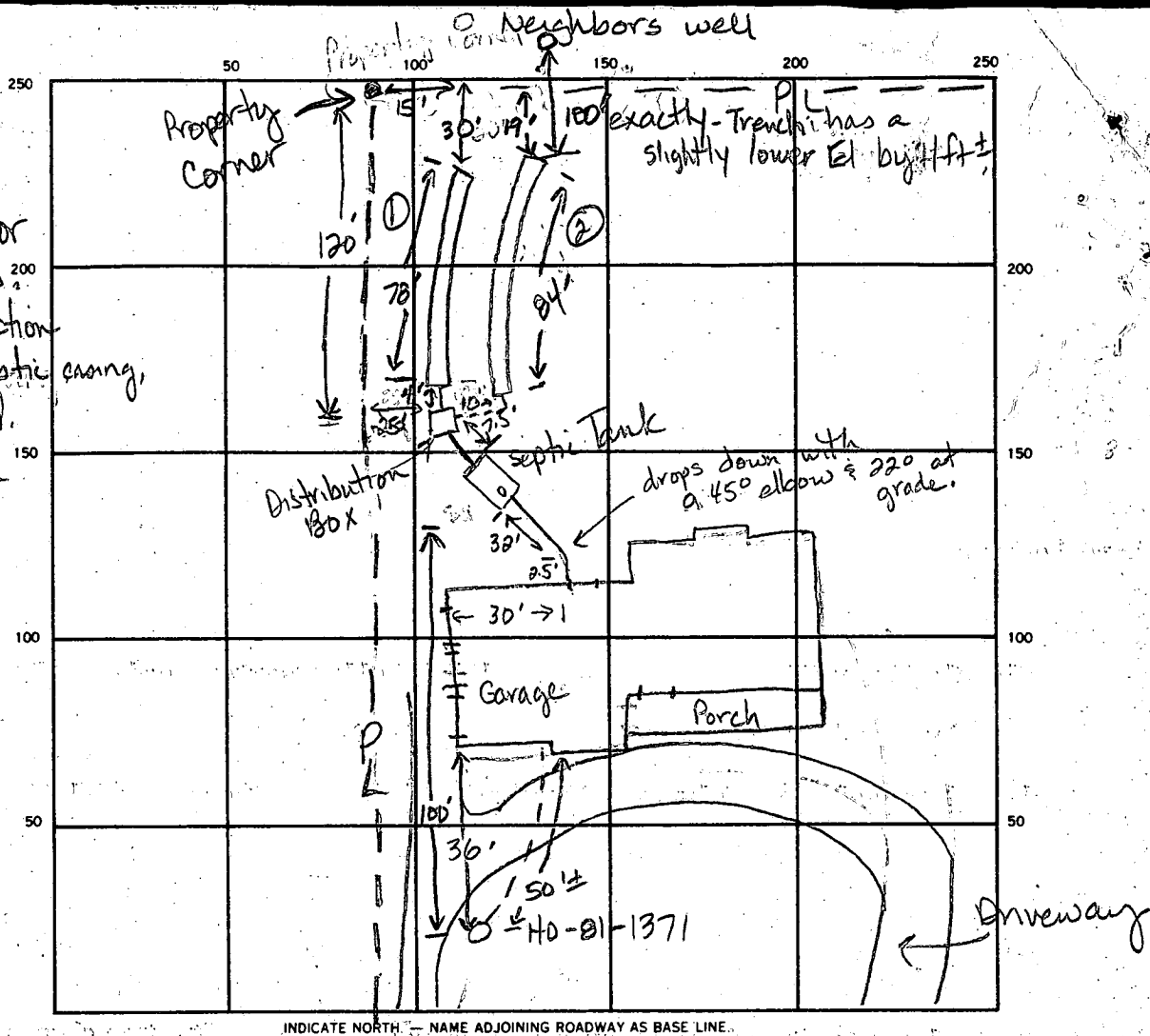
500 gal propane tank
EH - 2-1186

82887

Pitless adaptor
at 45 inchesHouse connection
OK inside. Plastic casing,

Line covered.

JE Nadeau



SEPTIC TANK. LEVEL

1250 gal ✓

CLEANOUTS

one on septic tank

DISTRIBUTION BOX. LEVEL

OK

DRAIN FIELD/TILE FIELD. DEPTH

85.9

FT.

TRENCH WIDTH

2

FT.

INLET DEPTH

40.4

FT.

EFFECTIVE GRAVEL DEPTH

45

40

FT.

TOTAL LENGTH

78'

84'

FT.

NUMBER OF TRENCHES

2

ONE SIDEWALL/BOTTOM AREA

351

377

SQ. FT.

DRYWELL INSIDE DIAMETER

FT.

EFFECTIVE DEPTH BELOW INLET

FT.

ABSORBENT AREA

721

SQ. FT.

REMARKS

82887 OK to add stone, pipe & paper to trench #1.

Location OK. OK to cover trench #1. JEN 82887 OK to

cover tank and add stone to trench #2. JEN

DATE SYSTEM APPROVED

8/31/87

INSPECTOR

Curren

APPLICATION

A 26691

P. _____

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICESP. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356DISTRICT 5thDATE 8/17/77TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Howard Associates Fred FreyADDRESS _____ PHONE Rhett Realty 465-4920

PROPERTY LOCATION:

SUBDIVISION Glenelg Manor - Section 2 LOT NO. 6D - Sec. 2ROAD AND DESCRIPTION Off Folly Quarter Rd. 12727 Folly Quarter Rd.SIZE OF LOT 40,000 square feet + TYPE BLDG. 3 or 4

NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE N/A

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ Dale MaiselAPPROVED BY Raymond Hedges FOR DITCH DATE 2/15/82

(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____

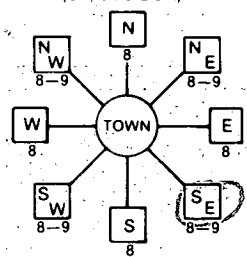
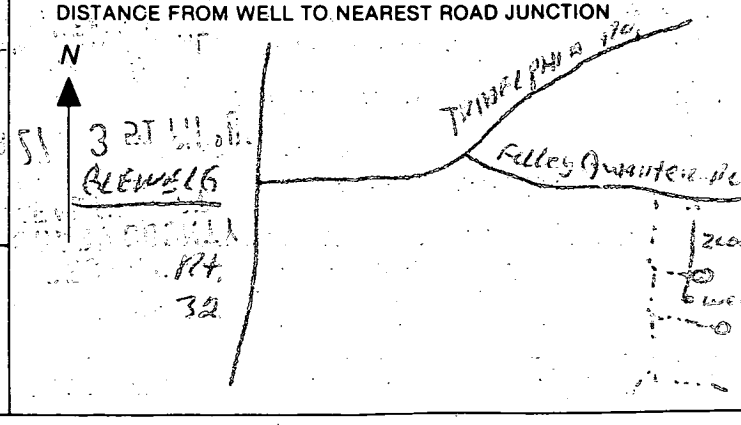
(KIND OF SYSTEM)

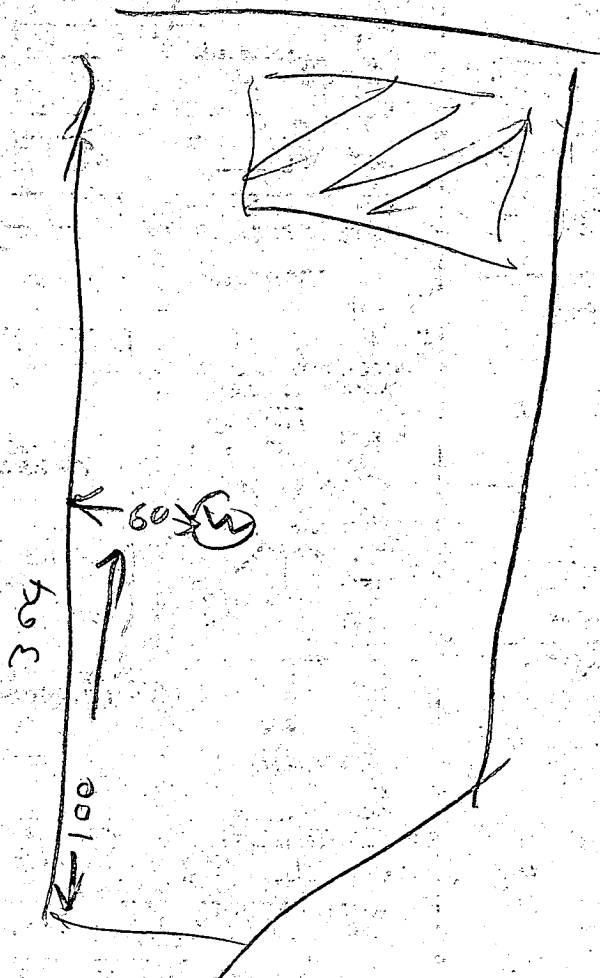
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

BLDG. PERMIT SIGNED
AND RETURNED 4-20-87BP 11270
8/17/77

THIS IS NOT A PERMIT

B 1 <div style="border: 1px solid black; padding: 2px; display: inline-block;">2398</div> <small>(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)</small>	SEQUENCE NO. (OEP USE ONLY) <div style="border: 1px solid black; padding: 2px; display: inline-block;">2398</div>	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	OEP PERMIT NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;">HC-91-1331</div> <small>fill in this form completely</small>
Date Received <div style="border: 1px solid black; padding: 2px; display: inline-block;">2 1 82</div>		B 3 LOCATION OF WELL <div style="border: 1px solid black; padding: 2px; display: inline-block;">HOUAKA</div> 8 COUNTY <div style="border: 1px solid black; padding: 2px; display: inline-block;">CLEVELAND MANOR</div> 23 SUBDIVISION SECTION <div style="border: 1px solid black; padding: 2px; display: inline-block;">2</div> LOT <div style="border: 1px solid black; padding: 2px; display: inline-block;">61</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">CLEVELAND</div> 52 NEAREST TOWN MILES FROM TOWN (enter 0 if in town) <div style="border: 1px solid black; padding: 2px; display: inline-block;">1</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M</div>	
OWNER INFORMATION <div style="border: 1px solid black; padding: 2px; display: inline-block;">F A E Y F A E C E B R E N D A</div> 15 Last Name Owner First Name <div style="border: 1px solid black; padding: 2px; display: inline-block;">9 1 2 5 F L A M E P O O L W A Y</div> 36 Street or RFD <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C L A N D</div> 57 Town <div style="border: 1px solid black; padding: 2px; display: inline-block;">M D</div> 70 State <div style="border: 1px solid black; padding: 2px; display: inline-block;">2 1 0 4 5</div> 76 Zip		B 4 1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  11 NEAR WHAT ROAD <div style="border: 1px solid black; padding: 2px; display: inline-block;">FELLEY QUANTER RD</div> ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH <input type="checkbox"/> WEST <input type="checkbox"/> EAST <input type="checkbox"/> SOUTH <input type="checkbox"/> 34 <div style="border: 1px solid black; padding: 2px; display: inline-block;">2 0 0 0</div> 37 DISTANCE FROM ROAD ENTER FT or MI <div style="border: 1px solid black; padding: 2px; display: inline-block;">1 1</div>	
DRILLER INFORMATION Driller's Name <div style="border: 1px solid black; padding: 2px; display: inline-block;">Ralph Mayne</div> 77 License No. <div style="border: 1px solid black; padding: 2px; display: inline-block;">A 7 3</div> Firm Name <div style="border: 1px solid black; padding: 2px; display: inline-block;">Ralph Mayne (well drilling)</div> Address <div style="border: 1px solid black; padding: 2px; display: inline-block;">9120 Brown Church Rd Mt. Airy</div> Signature <div style="border: 1px solid black; padding: 2px; display: inline-block;">Ralph Mayne</div> Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">Feb 24, 1986</div>		WELL INFORMATION 1 2 APPROX. PUMPING RATE (GAL. PER MIN.) <div style="border: 1px solid black; padding: 2px; display: inline-block;">2</div> AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <div style="border: 1px solid black; padding: 2px; display: inline-block;">5 0 0</div>	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="checkbox"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input type="checkbox"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL COUNTY NAME <div style="border: 1px solid black; padding: 2px; display: inline-block;">HARVARD</div> COUNTY NO. <div style="border: 1px solid black; padding: 2px; display: inline-block;">A-26691</div> OEP SIGNATURE <div style="border: 1px solid black; padding: 2px; display: inline-block;">A. Wilson</div> STATE HEALTH INSERT S <div style="border: 1px solid black; padding: 2px; display: inline-block;">00113186</div> DATE ISSUED <div style="border: 1px solid black; padding: 2px; display: inline-block;">03/13/86</div> NORTH GRID <div style="border: 1px solid black; padding: 2px; display: inline-block;">5 1 6 0 0 0</div> EAST GRID <div style="border: 1px solid black; padding: 2px; display: inline-block;">0 8 1 1 0 0 0</div>	
APPROXIMATE DEPTH OF WELL <div style="border: 1px solid black; padding: 2px; display: inline-block;">1 5 0</div> FEET APPROXIMATE DIAMETER OF WELL <div style="border: 1px solid black; padding: 2px; display: inline-block;">6"</div> NEAREST INCH		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 <div style="border: 1px solid black; padding: 2px; display: inline-block;">8 1 0 1</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">5 1 0 6</div>	
METHOD OF DRILLING (circle one) BORED (or Augered) <input type="checkbox"/> JETTED <input type="checkbox"/> Jetted & DRIVEN <input type="checkbox"/> 30- AIR-ROTARY <input type="checkbox"/> AIR-PERCussion <input type="checkbox"/> ROTARY (Hydraulic Rotary) <input type="checkbox"/> 37- 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 39 <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY <input type="checkbox"/> THIS WELL WILL DEEPMEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) <div style="border: 1px solid black; padding: 2px; display: inline-block;">41</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">52</div>	
Not to be filled in by driller (OEP USE ONLY) APPROP. PERMIT NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;">54</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">G A P</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">63</div> FORCE <div style="border: 1px solid black; padding: 2px; display: inline-block;">0 2</div> WRITE INITIALS IN BOX <div style="border: 1px solid black; padding: 2px; display: inline-block;">67 '68</div> PERMIT No. <div style="border: 1px solid black; padding: 2px; display: inline-block;">HC-91-1331</div>		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			



- ① 21 FT CASING
- ② 18 1/2 FT OPENHOLE MEASURED WITH A WEIGHT & STRING
- ③ LOCATION ON
- ④ 5 Bags

3/19/86

B. Dodge

RECEIVED
HOWARD COUNTY
HEALTH DEPT.
FEB 27 3 51 PM '86
DIVISION OF
ENVIRONMENTAL
HEALTH

C100428

SEQUENCE NO.
(OEP USE ONLY)

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

THIS REPORT MUST BE SUBMITTED WITHIN
45 DAYS AFTER WELL IS COMPLETED.

COUNTY
NUMBERA 26691

DATE Received

DATE WELL COMPLETED
C31986

Depth of Well
180
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
110-811-1371

OWNER
FREY
STREET OR RD.
SUBDIVISION
GLSWELG MANOR

last name
first name
TOWN
LOT

GLSWELG
2
6D

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
FROMTO

Check
if water
bearing

Top So. L02

Sandy211

SANDSTONE1125

MICKA2550

SANDSTONE5055

MICKA55180

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL

CEMENTCMBENTONITE CLAYBC

NO. OF BAGS5NO. OF POUNDS300

GALLONS OF WATER30

DEPTH OF GROUT SEAL (to nearest foot)

from0ft. to18ft.

CASING RECORD

casing
types
insert
appropriate
code
below

STEELCONCRETE
PLASTICOTHER

MAIN CASING TYPE

Nominal diameter
top (main) casing
(nearest inch)

Total depth
of main casing
(nearest foot)

PL621

OTHER CASING (if used)

diameter
inch

depth (feet)
fromto

SCREEN RECORD

screen type
or open hole

insert
appropriate
code
below

STEELBRASS
BRONZE
PLASTICOTHER

DEPTH (nearest ft.)

HO119180

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)

ROAD

PRIVATE DR.

2000'

150'

WELL

CIRCLE APPROPRIATE LETTER
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 10.17.13 "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 IDENT. NO. 273

DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)

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

GRAVEL PACK

IF WELL DRILLED WAS
FLOWING WELL INSERT
F IN BOX 68

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

T (E.R.O.S.)

WQ

TELESCOPE CASING

LOG INDICATOR

OTHER DATA

DRILLER WILL INSTALL PUMP YES NO

IF DRILLER INSTALLS PUMP, THIS SECTION
MUST BE COMPLETED FOR ALL WELLS
EXCEPT HOME USE
TYPE OF PUMP INSTALLED
PLACE (A,C,J,P,R,S,T,O)
IN BOX-SEE ABOVE:

CAPACITY:
GALLONS PER MINUTE
(to nearest gallon)

PUMP HORSE POWER

PUMP COLUMN LENGTH
(nearest ft.)

CASING HEIGHT (circle appropriate box
and enter casing height)

LAND SURFACE

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)

ROAD

PRIVATE DR.

2000'

150'

WELL

Well Permit No. HO - 811371
Location of property (road) FALLEY QUARTER RD
Subdivision GLENELG MANOR Lot 6D Block Plat Sec. 2
Well Driller RALPH MAYNE Owner FREY, FRED & BRENDA

Static water level (S.W.L.) below M.P. 16 ft

Pumping rate 10 G.P.M.

Total time 20 min to reach pumping water level 55 ft. below M.P.

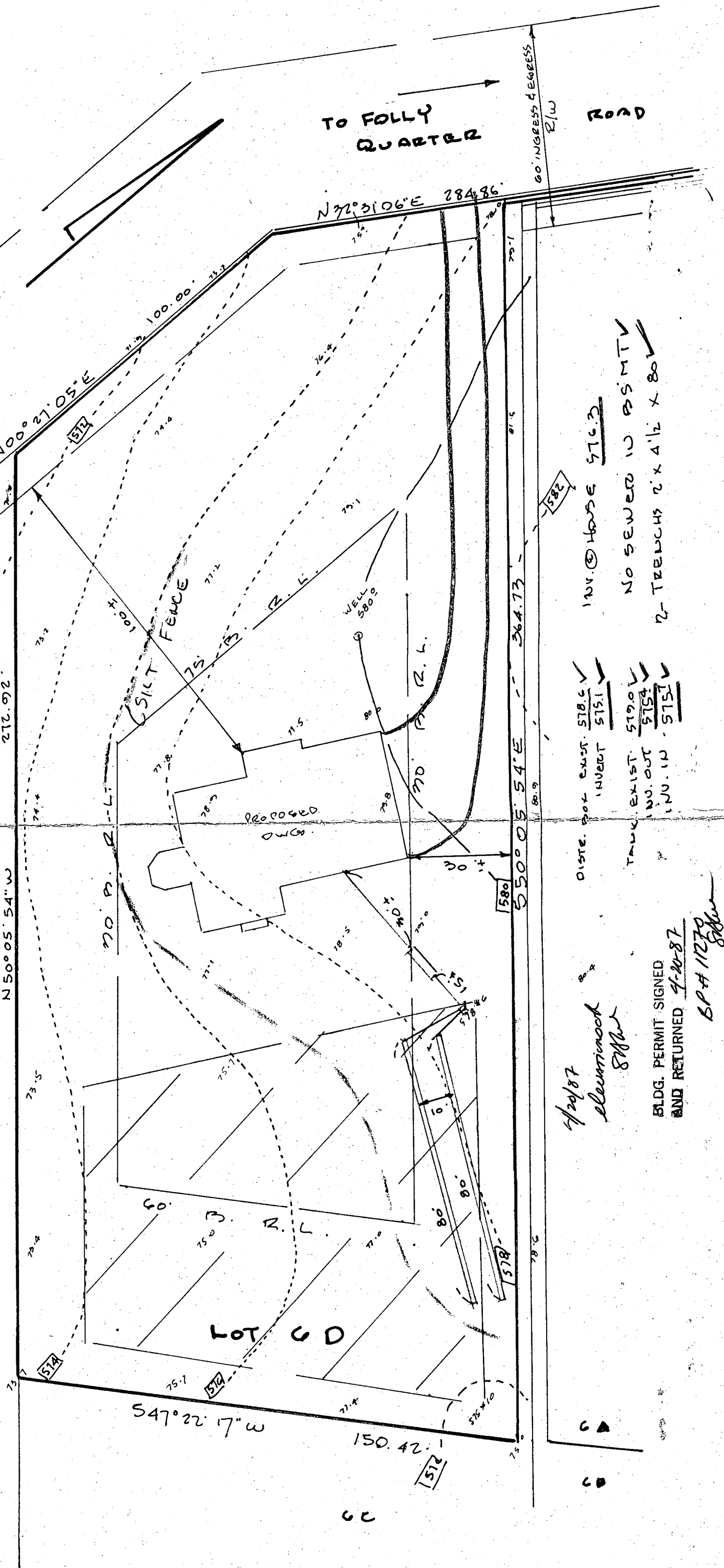
II. Recovery pump test data - observations to be recorded every 15 minutes

[illegible]

21 ft PL 18 1/2 open 5 bags

LOT CD
SECTION TWO
GLENELG MANOR
5TH ELECTION DIST.
HOWARD COUNTY, MD
SCALE 1"=30'
APRIL 2, 1987

HOOKINS ASSOCIATES, INC.
SUITE 231, JOSEPH SQUARE
5485 HARPERS FARM ROAD
COLUMBIA, MD 21046



INVERT HOUSE 576.3
NO SEWER IN ASMTV
2- TRENCH 2' x 4' 1/2' x 80'

DIST. BOX EXIST. 578.6 ✓
INVERT 575.1 ✓
TANK EXIST. 579.0 ✓
INVERT 575.1 ✓
INVERT 575.1 ✓

4/20/87
electronic
BP # 11270
BLDG. PERMIT SIGNED
AND RETURNED 4-20-87

N 32° 31' 06" E 284.86'

Co. 2/2
1965

N 00° 27' 05" E

100.00

75. 3. 12. 2.

272.92.

75005051

अ. अ. अ. अ.

25.0.0

NO IMPACT ON WALK ON SPT/C

OK TO PROCEED,

8/1/87 Cullen

100/100

264.73:

\$500.05 54¢

LOT 6D

S 47° 22' 17" W

150.42.



REGISTERED
NATIONAL LAND SURVEY
Walter Paul

LOCATION SURVEY

LOT GD

SECTION TWO

GLENELG MANOR
5TH ELECTION DIST.

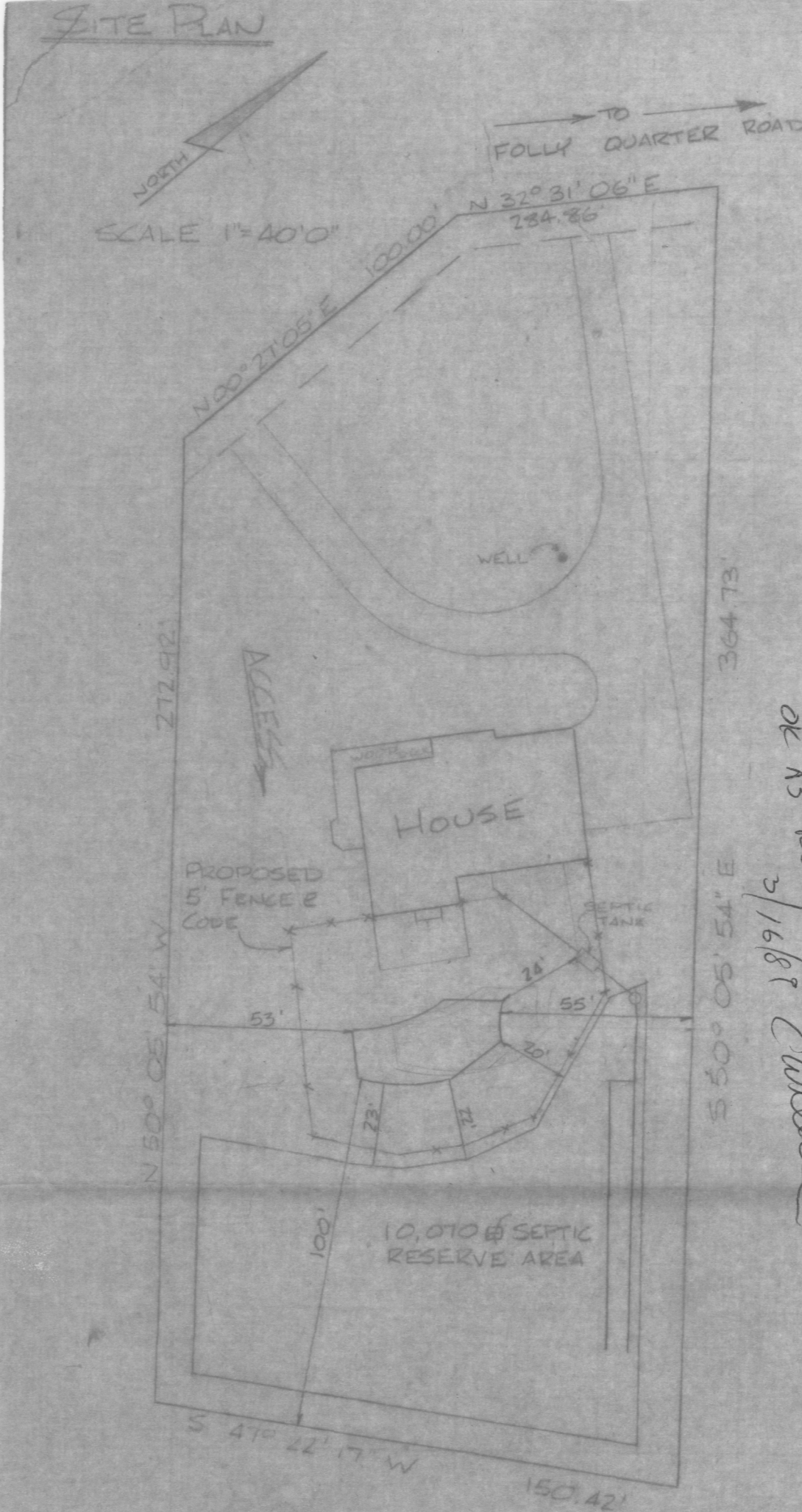
HowARD COUNTY, MD

50-12 1" = 270°

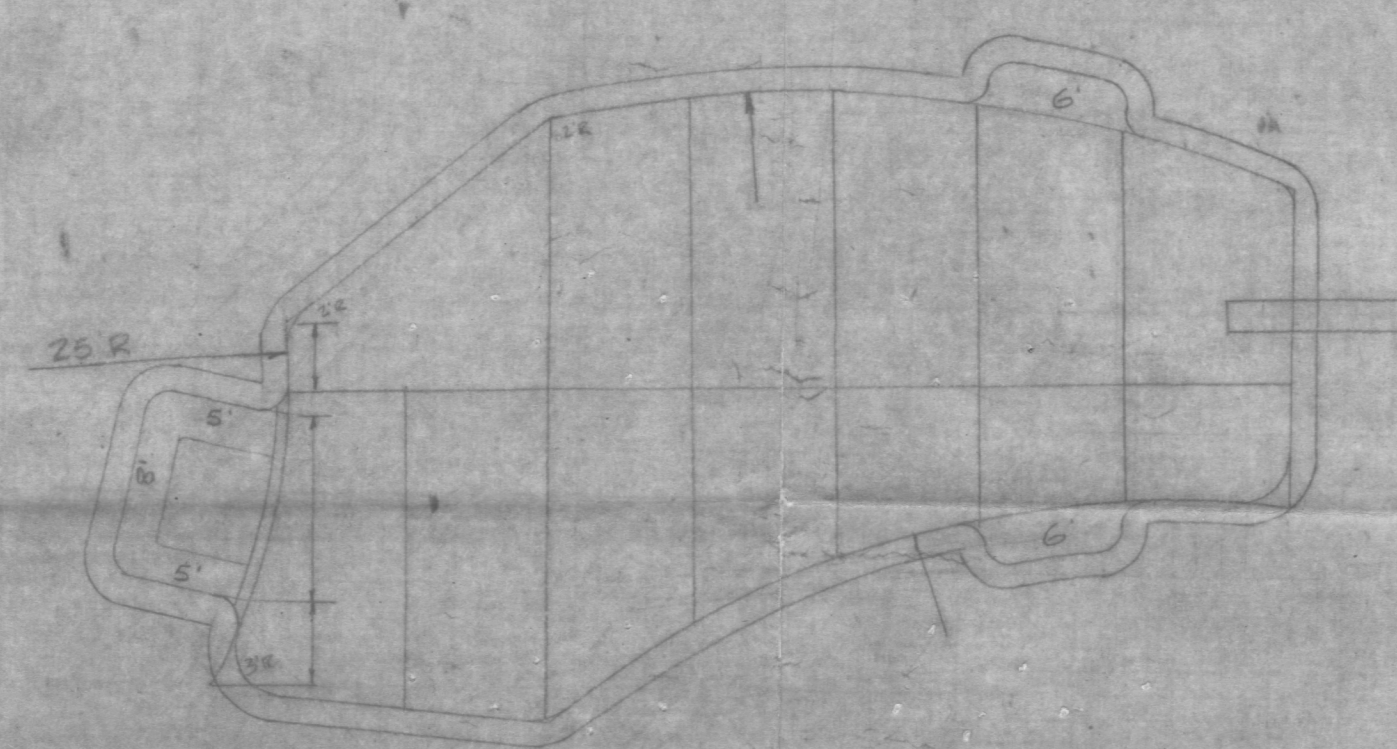
DATE JUNE 1, 1987

HUDKINS ASSOCIATES, INC.
SUITE 231, JOSEPH SQUARE
5485 HARPERS FARM ROAD
COLUMBIA, MD. 21044

60

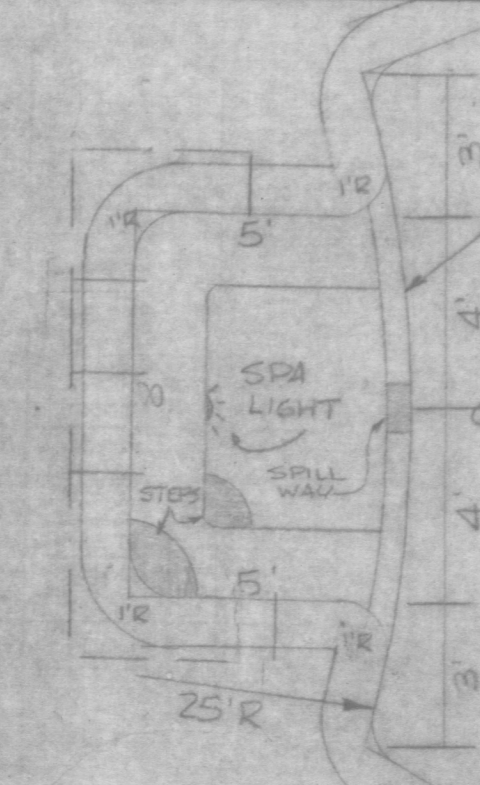


OK AS REVISED
2/16/89 Cullin



SPA DETAIL
SCALE 1/4"=1'0"

SPA SPECS.
40" SPA
5 AIR INJECTORS
AIR BLOWER
SPA LIGHT
SPA BENCH - 12'
DAM WALL - 8'
2 STEPS IN SPA



REVISED

2/15/89 POOL SIZE & LOCATION

3/15/89 POOL SHAPE & LOCATION

FLOOR SYSTEM		PLUMBING		SET BACKS	
FLOOR HEADS#	3	SKIMMER	2" 50 FT.	HOUSE	10 FT.
STEP HEADS#	2	RETURNS	2" 18 FT.	SIDE	10 FT.
BENCH HEADS#	2	RETURNS	1" 6 FT.	REAR	10 FT.
LOVE SEAT#	2	AUTO CLR	2" 29 FT.	STREET	10 FT.
SPA HEADS#	2	SPA SUCT	2" 29 FT.	SEPTIC	20 FT.
		SPA RET	2" 29 FT.	WELL	10 FT.
		AIR LINE	2" 29 FT.	FENCE 5' MIN	
		STUB OUT	23 FT.	PUB. WATER	NO
		ANCHOR	23 FT.	PUB. SEWER	NO

Heads may vary due to shape, size and depth.

ZONE 3

GENERAL SPECIFICATIONS *

SIZE	22' X 43'	DEPTH	3' TO 10'	PERIM	118 FT.
SHAPE	SAN CARLOS	AREA	800	SQ. FT.	
COPING TYPE	DELUXE TRAV	TILE	AQUATIC BR		
MOTOR H.P.	2	GPM		FILTER	52 SQ. FT.
SKIMMER #	2	BACKWASH TO	SEPARATION TANK		

POOL EQUIPMENT *

HEATER MODEL	PROPANE	SIZE	380,000	BTU	
TIME CLOCK TYPE	STANDARD	DELAY	1		
POOL CLEANING SYSTEM	STUB OUT ONLY				
SPA	40	SQ. FT.		AIR INJECTORS #	5
SPA LIGHT #	(1) ONE	110 VOLT		BLOWER	YES
POOL LIGHT #	(1) ONE	110 VOLT			100 WATT
BOARD MODEL	FLITE DECK	SIZE	8	FT.	TILE
LADDER MODEL		TILE		LOVESEAT	(2) 6
CLEANING TOOLS	YES	VACUUM WITH	40	FT. HOSE	
POOL BENCH	11	FT.		ROPE RINGS & FLOATS	YES

SITE CONDITIONS *

PRE SITE GRADING	1	HR.		DIRT WALK	FT.
DIRT HAUL	YES	DIRT STAY			
CONCRETE REMOVAL		SQ. FT.			
STUMPS #		PUSH OVER ONLY		HAUL	
TREES TO BE CUT BY:					

- SPECIAL NOTES ***
- 1) 4th STEP
 - 2) SWAN RAIL
 - 3) TEMP FENCE BY ANTHONY
 - 4) 1989 WINTERIZATION
 - 5) ANTHONY TO RESTORE GROUND TO ORIGINAL CONDITION AFTER EQUIP. BLOWER TO RE-SEED
 - 6) ANTHO FLOW FLOOR RETURN
 - 7) SALESPERSON TO BE PRESENT AT EXCAVATION

PERMIT OFFICE **HOWARD COUNTY**

LOT **6D** BLOCK **SECTION TWO** SUB. DIV. **GLENELG MANOR**

SALESMAN **PAM HALL** MANAGER **JOE KAGEN**

SALES OFFICE **BALTIMORE** PH. **922-8300**

CONSTRUCTION OFFICE PH. **703-451-9454**

JOB # **928057** CONTRACT DATE **JAN 28, 1989**

CASH **YES** LOAN **-**

SWIMMING POOL

DATE DWN **1/30/89**

DWN BY **M.**

CK'D BY

NAME **FRED L. BRENDAC FREY**

ADDRESS **12727 FOLLY QUARTER RD**

ELICOTT CITY, MD 21043

CROSS STREETS **FOLLY QUARTER RD**

RES. PHONE **988-9660** BUS. PHONE **SAME**

ANTHONY POOLS

A Division of Anthony Industries, Inc.

NOTE SCALE 1/8" = 1'0"

- DIRECTIONS -

RTE 29 (N) TO RTE 108 (W) TO (R) ON HOMEWOOD ROAD TO FOLLY QUARTER ROAD TO (L) AT "GLENELG MANOR ESTATES" SIGN TO FOLLY QUARTER ROAD TO SITE ON (L)

BUYER:
TO DETERMINE APPROXIMATE ELEVATION OF POOL ON DAY OF EXCAVATION.

BUYER:
POOL AREA TO BE FENCED, PER COUNTY OR CITY ORDINANCE. GATES TO BE SELF CLOSING AND SELF LATCHING.
BY BUYER

BUYER:
WET DOWN CONCRETE SHELL AT LEAST TWICE DAILY FOR 7 DAYS.
DO NOT TURN ON POOL LIGHT WHEN POOL IS EMPTY.

