

LAYOUT 6/19/03 11AM INSP 4 _____
INSP 2 7/11/03 12pm INSP 5 _____
INSP 3 _____ INSP 6 _____

04-339859

ISSUE DATE: 6-18-2003

P 519018

APPROVAL DATE: 7/11/03

A 28534

PERMIT INDEXED

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

WTC III IS PERMITTED TO INSTALL ☒ ALTER ☐

ADDRESS: 1820 Gillis Falls Rd, Woodbine PHONE NUMBER: 410-489-4457

SUBDIVISION: River Plantation LOT NUMBER: 2

ADDRESS: 555 Morgan Station Road PROPERTY OWNER: Napolitano

SEPTIC TANK CAPACITY (GALLONS): 1500 OUTLET BAFFLE FILTER REQUIRED ☐

PUMP CHAMBER CAPACITY (GALLONS): N/A COMPARTMENTED TANK REQUIRED ☒

NUMBER OF BEDROOMS: 5

SQUARE FEET PER BEDROOM: 180

LINEAR FEET OF TRENCH REQUIRED: 280 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 4.0 feet below original grade. 2.0 feet of stone below distribution pipe.
LOCATION:	Place the distribution box as shown on the approved site plan. Run trenches on contour. Adjust distribution box in field if needed.
NOTES:	No basement service by gravity is proposed.

PLANS APPROVED: Steven R. Krieg OK SRK 5/28/03 DATE: 2/5/2003

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

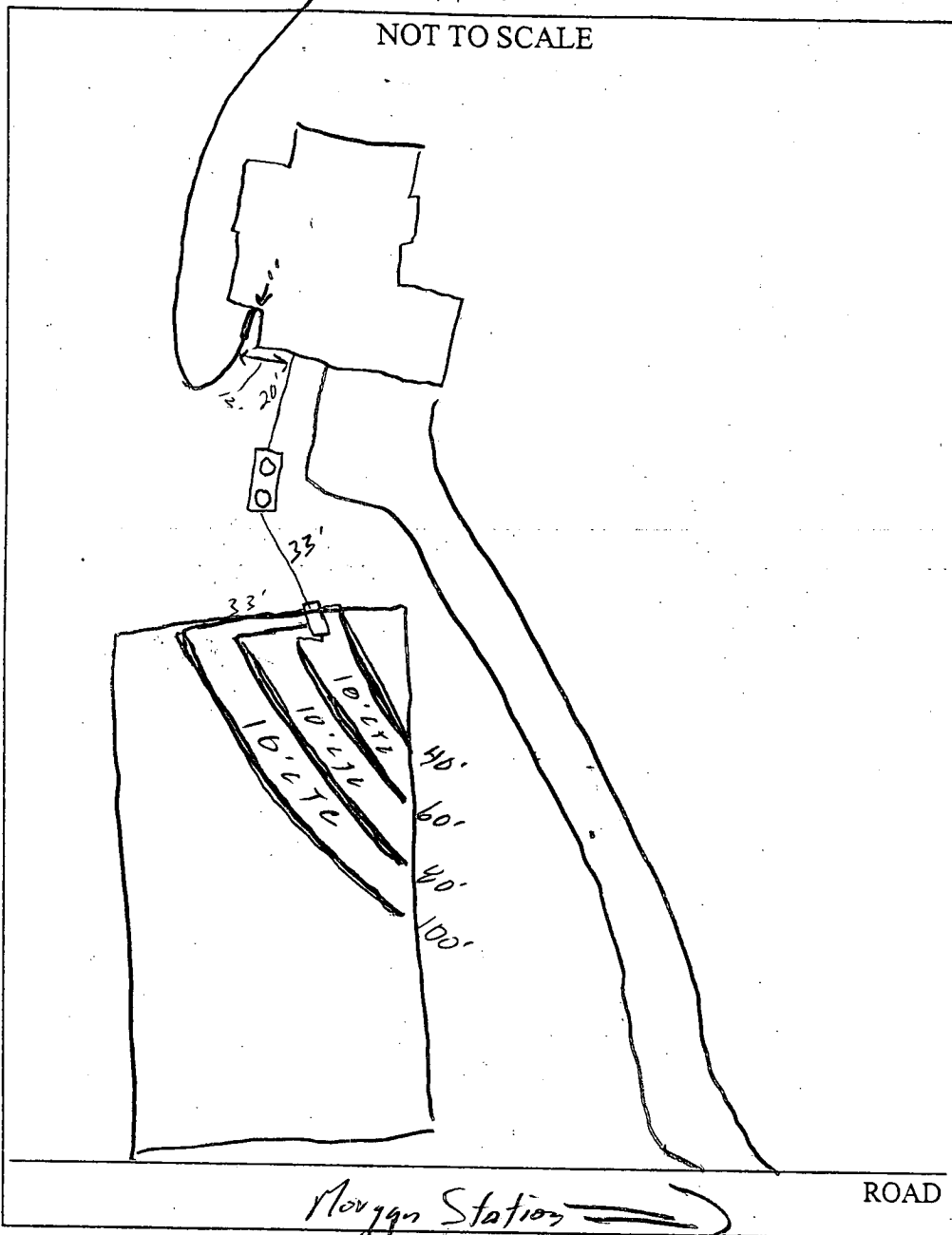
NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS
RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM
PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

BUILDING PERMIT SIGNED AND RETURNED
10-29-03 800144534 - U6 PROpane TANK

A 28534

HD-94-3600

NOT TO SCALE



TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
3'	4'	6'
NUMBER OF TRENCHES		4
TOTAL LENGTH		280'
ABSORPTION AREA		
DISTRIBUTION BOX LEVEL		✓
DISTRIBUTION BOX BAFFLE		✓
DISTRIBUTION BOX PORT		—

SEPTIC TANK DATA	
SEPTIC TANK 1 LEVEL	
CAPACITY	1500 GAL
SEAM LOC	TOP
TANK LID DEPTH	2.5'
BAFFLES	✓
BAFFLE FILTER	—
MANHOLE LOC	F&B
6" PORT LOC	—
WATERTIGHT TEST	
SEPTIC TANK 2 LEVEL	
CAPACITY	— GAL
SEAM LOC	—
TANK LID DEPTH	—
BAFFLES	—
BAFFLE FILTER	—
MANHOLE LOC	—
6" PORT LOC	—
WATERTIGHT TEST	

PRE-CONSTRUCTION 6/19/03 SRA stake, contour not accurate, install
40'/60'/80'/100' trenches on contour (SO)

INSTALLATION 7/11/03 OK to cover all work (SO)

RECEIVED PERMIT
 AND RETURNED

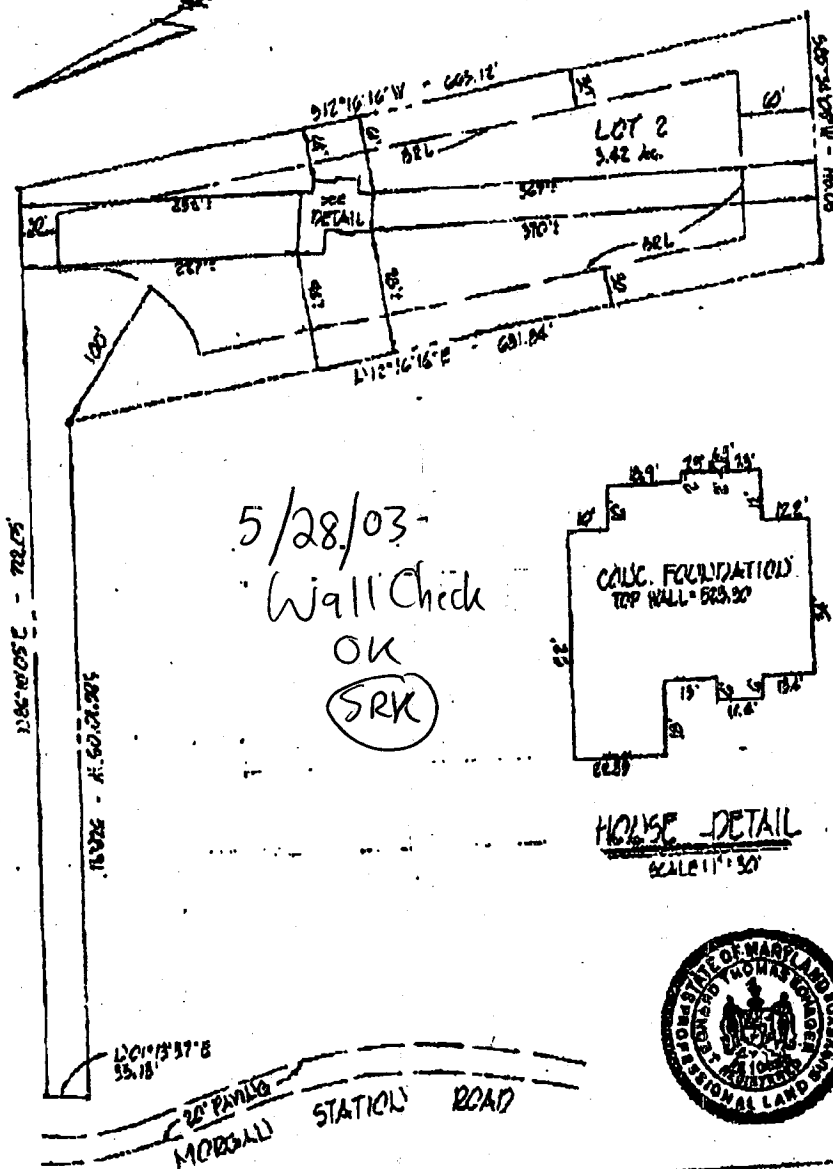
FINAL INSPECTOR [Signature] DATE OF APPROVAL 7/11/03

MAY-21-03 WED 09:59 PM LTD & ASSOCIATES

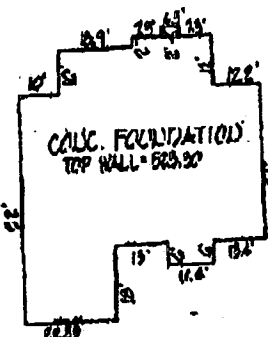
238 7229

P. 81

THE LOT SHOWN HEREON IS IN FLOOD
ZONE "C" PER F.E.M.A. FLOOD
INSURANCE RATE MAP PANBLA 150044-
CC09B



5/28/03-
Wall Check
OK
(SRK)



HOUSE DETAIL
SCALE 1" = 30'



NOTE: ACCURACY OF APPARENT SETBACK DISTANCES ARE 1 FT. ±

- NOTE:
- THIS PLAT IS NOT INTENDED FOR USE IN ESTABLISHING PROPERTY LINES AND DOES NOT CONSTITUTE A BOUNDARY SURVEY.
 - THIS PLAT IS OF BENEFIT TO THE CONSUMER ONLY, INsofar AS IT IS REQUESTED BY A LENDER OR A TITLE INSURANCE COMPANY OR ITS AGENT IN CONNECTION WITH CONTINGUATED TRANSFER, FINANCING OR REFINANCING.
 - THIS PLAT SHOULD NOT BE RELIED UPON FOR THE LOCATION OR ESTABLISHMENT OF FENCES, GARAGES, BUILDINGS OR OTHER EXISTING OR FUTURE IMPROVEMENTS.

THIS IS TO CERTIFY THAT WE HAVE LOCATED THE IMPROVEMENTS AS SHOWN
ACCORDING TO THE REEF PATRONS (OVERVIEWING THE MARYLAND STANDARDS
OF PRACTICE FOR PROFESSIONAL LAND SURVEYORS;
EFFECTIVE DATE MARCH 1995)

Thomas J. Crocker 5/2/03
REGISTERED No. 10859 DATE

FOUNDATION CERTIFICATION FOR

LOT 2 RIVER PLANTATIONS
PLAT C.M.P. 844
555 MORGAN STATION RD.
REDEVELOPMENT OF P/O PARCEL 75
4TH ELECTION DISTRICT TAX MAP P. 8RD 20
HOWARD COUNTY, MARYLAND

CHARLES H. CROCKER & ASSOC., INC.
Civil Engineering & Land Planning
P.O. BOX 307
Wheaton, MD 21157
(410) 549-1708

6985649674 EB:TC 8802, 12/98

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CROCKER AND ASSOC.

PERMANENT SEEDING NOTES

APPLY PERMANENT SEEDING TO GRADED OR CLEARED AREAS NOT SUBJECT TO IMMEDIATE FURTHER DISTURBANCE WHERE A PERMANENT LONG-LIVED VEGETATIVE COVER IS NEEDED

SEED BED PREPARATION LOOSEN THE UPPER THREE INCHES OF SOIL BY RAKING OR DISCING OR OTHER ACCEPTABLE MEANS BEFORE SEEDING IF SOIL HAS NOT BEEN PREVIOUSLY LOOSENED

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

- PREFERRED METHOD: APPLY 1 TONS/ACRE OF ISOLAMIC LIMESTONE (50 LBS/1000 SF) AND 100 LBS/ACRE OF 10-10-10 FERTILIZER (25 LBS/1000 SF) BEFORE SEEDING HARROW OR INTO UPPER THREE INCHES OF SOIL

SEEDING: FOR PERIODS MARCH 1 THRU APRIL 30 AND AUGUST 1 THRU OCTOBER 15, SEED WITH 60 LBS PER ACRE (14 LBS/1000 SF) OF KENTUCKY 91 TALL FESCUE AND 1 LBS PER ACRE (0.24 LBS/1000 SF) OF WHEATGRASS DURING THE PERIOD OF OCTOBER 15 THRU FEBRUARY 28. PROTECT THESE SITES BY OPTION (1) 2 TONS PER ACRE OF WELL ANCHORED STRAW MULCH AND SEED AS SOON AS POSSIBLE IN THE SPRING, OPTION (2) USE 500, OPTION (3) SEED WITH 40 TONS PER ACRE KENTUCKY 91 TALL FESCUE AND MULCH WITH 3 TONS PER ACRE WELL ANCHORED STRAW.

MULCHING: APPLY 1 1/2 TO 2 TONS PER ACRE (TO 30 LBS/1000 SF) OF UNWEEDED SMALL GRAIN STRAW IMMEDIATELY AFTER SEEDING, ANCHOR THE MULCH IMMEDIATELY AFTER APPLICATION USING MULCH ANCHORING TOOL OR 20 GAL PER ACRE (5 GAL/1000 SF) OF EMULSIFIED ASPHALT ON FLAT AREAS, ON SLOPES 5 FT. OR STEEPER, USE 20 GAL PER ACRE (5 GAL/1000 SF) FOR ANCHORING.

MAINTENANCE: INSPECT ALL SEEDING AREAS AND MAKE NEEDED REPAIRS, RESEEDING AND REPLACEMENTS.

TEMPORARY SEDIMENT CONTROL MEASURES

APPLY TEMPORARY SEEDING TO GRADED OR CLEARED AREAS LIKELY TO BE REDISTURBED WHERE A SHORT-TERM VEGETATIVE COVER IS NEEDED.

SEED BED PREPARATION LOOSEN THE UPPER THREE INCHES OF SOIL BY RAKING OR DISCING OR OTHER ACCEPTABLE MEANS BEFORE SEEDING IF SOIL HAS NOT BEEN PREVIOUSLY LOOSENED.

SOL AMENDMENTS: APPLY 100 LBS/ACRE 10-10-10 FERTILIZER EQUIVALENT TO (14 LBS/1000 SF)

SEEDING: FOR PERIODS MARCH 1 THRU APRIL 30 AND FROM AUGUST 1 THRU NOVEMBER 15, SEED WITH 1 1/2 BUSHEL/ACRE OF ANNUAL RYE (30 LBS/1000 SF) FOR THE PERIOD MAY 1 THRU AUG 14 SEED WITH 1 LBS/ACRE OF WHEATGRASS (0.24 LBS/1000 SF) FOR THE PERIOD NOVEMBER 15 THRU FEBRUARY 28. PROTECT SITE BY APPLYING 1 TONS OF WELL ANCHORED STRAW MULCH AND SEED AS SOON AS POSSIBLE IN THE SPRING, OR USE 500.

MULCHING: APPLY 1 1/2 TO 2 TONS /ACRE (TO 30 LBS/ 1000 SF) OF UNWEEDED SMALL GRAIN STRAW IMMEDIATELY AFTER SEEDING, ANCHOR MULCH IMMEDIATELY AFTER APPLICATION USING MULCH ANCHORING TOOL OR 20 GAL PER ACRE (5 GAL/1000 SF) OF EMULSIFIED ASPHALT ON FLAT AREAS, ON SLOPES 5 FT. OR STEEPER, USE 20 GAL PER ACRE (5 GAL/1000 SF) FOR ANCHORING.

REFER TO THE 1994 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL FOR RATES AND METHODS NOT COVERED HEREIN.

REQUIRED SEQUENCE OF CONSTRUCTION

- OBTAIN GRADING PERMIT.
- CLEAR AND GRIP FOR INSTALLATION OF TEMPORARY SEDIMENT CONTROL MEASURES, SILT FENCE AND STONE CONSTRUCTION ENTRANCE.
- INSTALL TEMPORARY SEDIMENT CONTROL MEASURES.
- UPON APPROVAL OF SEDIMENT CONTROL INSPECTOR, CLEAR AND GRIP SITE FOR CONSTRUCTION OF DWELLINGS, DRIVEWAY AND SIDEWALKS.
- GRADE SITE AND CONSTRUCT DWELLINGS, DRIVEWAY AND SIDEWALKS PER THE PLAN.
- STABILIZE ALL DISTURBED AREAS WITH SEED AND MULCH PER 500 STANDARD NOTES.
- UPON APPROVAL OF THE SEDIMENT CONTROL INSPECTOR, REMOVE ALL TEMPORARY SEDIMENT CONTROL MEASURES AND STABILIZE ALL DISTURBED AREAS AS PER PERMANENT SEEDING NOTES.

GENERAL NOTES FOR SEDIMENT CONTROL

- A MINIMUM OF 24 HOURS NOTICE MUST BE GIVEN TO THE HOWARD COUNTY OFFICE OF INSPECTION AND PERMITS PRIOR TO THE START OF ANY CONSTRUCTION TELEPHONE: (410) 233-2491.
- ALL VEGETATIVE AND STRUCTURAL PRACTICES ARE TO BE INSTALLED ACCORDING TO THE PROVISIONS OF THIS PLAN AND ARE TO BE IN CONFORMANCE WITH THE 1994 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL.
- FOLLOWING INITIAL SOIL DISTURBANCE OR REDISTURBANCE, PERMANENT OR TEMPORARY STABILIZATION SHALL BE COMPLETED WITHIN 0.7 CALENDAR DAYS FOR ALL PERIMETER SEDIMENT CONTROL STRUCTURES INCLUDING RIES PERIMETER FENCES AND ALL SLOPES GREATER THAN 3% 10/14 DAYS AS TO ALL OTHER DISTURBED AREAS ON THE PROJECT SITE.
- ALL SEDIMENT TAPS/BASINS SHOWN MUST BE FENCED AND WARNING SIGNS POSTED AROUND THEIR PERIMETER IN ACCORDANCE WITH VOL. 1, CHAP. 12 OF THE HOWARD COUNTY DESIGN MANUAL, STORM DRAINAGE.
- ALL DISTURBED AREAS MUST BE STABILIZED WITHIN THE TIME PERIOD SPECIFIED ABOVE IN ACCORDANCE WITH THE 1994 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL, SECTION 9 - VEGETATIVE PRACTICES FOR METHODS AND MATERIALS. SECTION 1, TEMPORARY SEEDING, SECTION 2, PERMANENT SEEDING, SECTION 3, TEMPORARY STABILIZATION WITH MULCH. ALONE CAN ONLY BE DONE WHEN THE RECOMMENDED SEEDING DATES DO NOT ALLOW FOR PROPER GERMINATION AND ESTABLISHMENT OF GRASSES.
- ALL SEDIMENT CONTROL STRUCTURES ARE TO REMAIN IN PLACE AND ARE TO BE MAINTAINED IN OPERATIVE CONDITION UNTIL PERMISSION FOR THEIR REMOVAL HAS BEEN OBTAINED FROM THE HOWARD COUNTY SEDIMENT CONTROL INSPECTOR.
- ANY SEDIMENT CONTROL PRACTICE WHICH IS DISTURBED BY CONSTRUCTION OUTLITIES MUST BE REPAIRED ON THE SAME DAY OF DISTURBANCE.
- ADDITIONAL SEDIMENT CONTROL MEASURES MUST BE PROVIDED, IF DEEMED NECESSARY, BY HOWARD COUNTY SEDIMENT CONTROL INSPECTOR.
- ON ALL SITES WITH DISTURBED AREAS IN EXCESS OF 12 ACRES, APPROVAL OF THE INSPECTION AGENCY SHALL BE REQUESTED UPON COMPLETION OF THE INSTALLATION OF PERIMETER EROSION AND SEDIMENT CONTROLS, AND BEFORE PROCEEDING WITH ANY OTHER EARTH DISTURBANCE OR GRADING, OTHER BUILDING OR GRADING INSPECTION APPROVALS MAY NOT BE AUTHORIZED UNTIL THIS INITIAL APPROVAL BY THE INSPECTION AGENCY IS MADE.
- SITE ANALYSIS:

TOTAL AREA OF SITE: 2.4143 ACRES (PER PLAN)
AREA TO BE ROOTED OR PAVED: 0.044 ACRES (10,110 SF)
AREA TO BE VEGETATIVELY STABILIZED: 2.364 ACRES (521,150 SF)
TOTAL VOLUME OF CUT: 2,041 C.Y.
TOTAL VOLUME OF FILL: 250 C.Y.
OFFSITE WASTE/DORROW AREA LOCATION: 1.71 C.Y. (WASTE)

APPROVED FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS IN CONFORMANCE WITH THE MASTER PLAN OF HOWARD COUNTY.

HOWARD COUNTY HEALTH OFFICER DATE

I CERTIFY THAT THE INFORMATION SHOWN HEREON IS BASED ON FIELD WORK PERFORMED BY ME OR UNDER MY DIRECT SUPERVISION AND IS CORRECT, TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Charles R. Crocken, PE REG. NO. 7829 DATE 2/5/03

ENGINEER'S CERTIFICATE

I CERTIFY THAT THIS PLAN OF SEDIMENT AND EROSION CONTROL REPRESENTS A PRACTICAL AND WORKABLE PLAN BASED ON MY PERSONAL KNOWLEDGE OF THE SITE CONDITIONS AND THAT IT WAS PREPARED IN ACCORDANCE WITH THE REQUIREMENTS OF THE HOWARD COUNTY CONSERVATION DISTRICT.

Charles R. Crocken, PE REG. NO. 7829 DATE 2/5/03

DEVELOPER'S CERTIFICATE

I/WE CERTIFY THAT ALL DEVELOPMENT AND CONSTRUCTION WILL BE DONE ACCORDING TO THIS PLAN FOR SEDIMENT AND EROSION CONTROL AND THAT ALL RESPONSIBLE PERSONNEL INVOLVED IN THE CONSTRUCTION PROJECT WILL HAVE A CERTIFICATE OF ATTENDANCE AS A DEPT. OF THE ENVIRONMENT APPROVED TRAINING PROGRAM FOR THE CONTROL OF SEDIMENT AND EROSION BEFORE BEGINNING THE PROJECT. I ALSO AUTHORIZE PERIODIC ON-SITE INSPECTION BY THE HOWARD COUNTY CONSERVATION DISTRICT.

Charles R. Crocken, PE REG. NO. 7829 DATE 2/5/03

REVIEWED FOR HOWARD ECD AND MEETS TECHNICAL REQUIREMENTS:

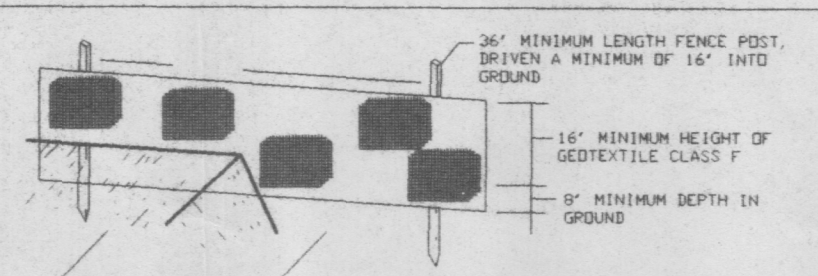
John M. Morgan DATE 2/5/03

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

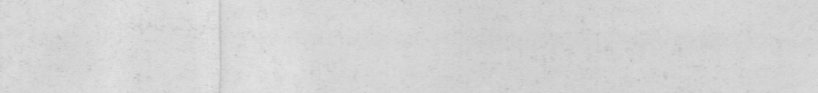
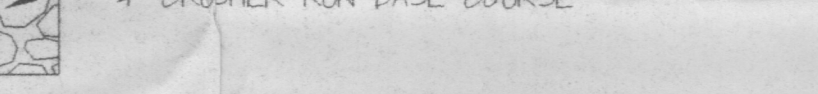
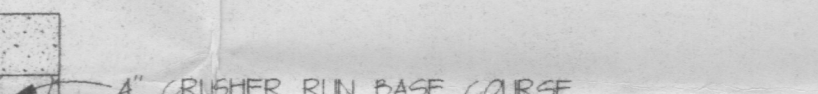
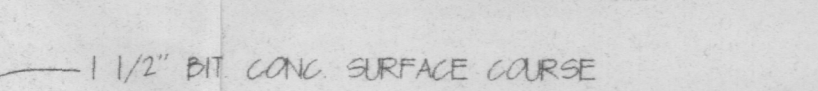
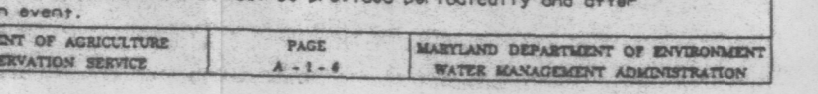
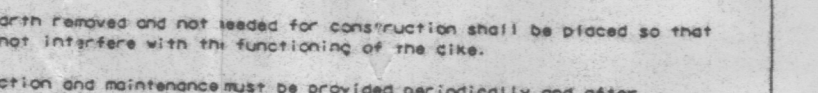
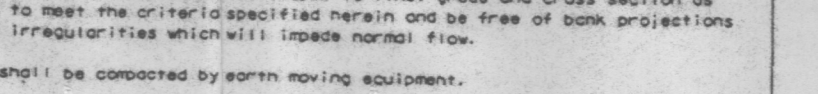
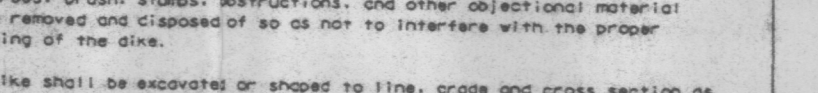
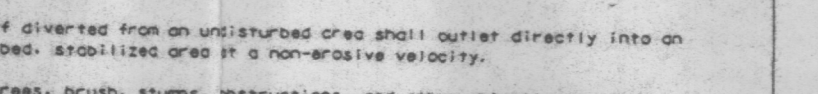
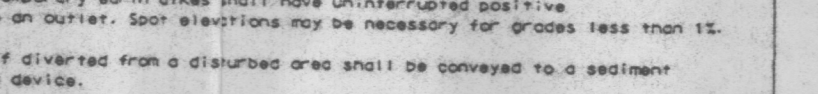
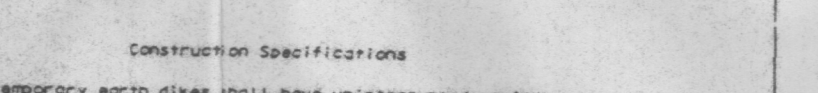
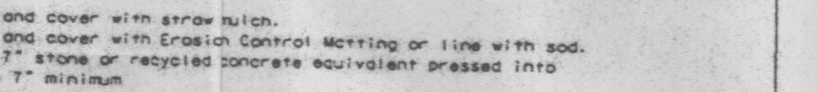
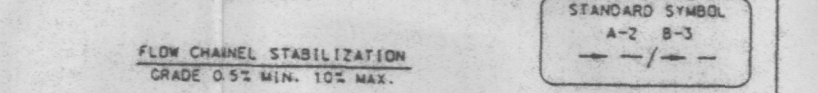
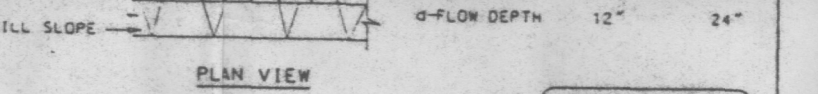
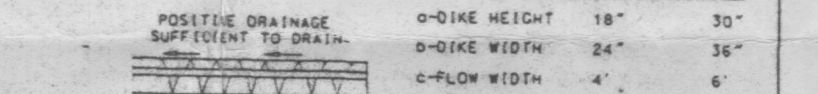
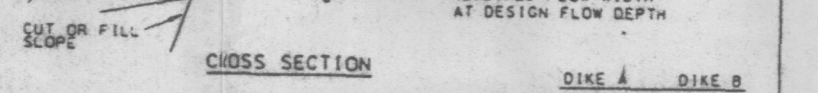
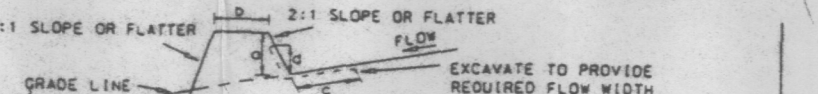
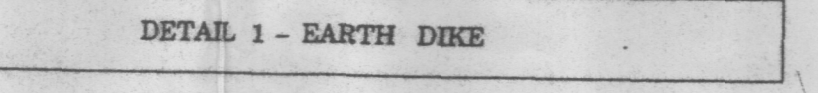
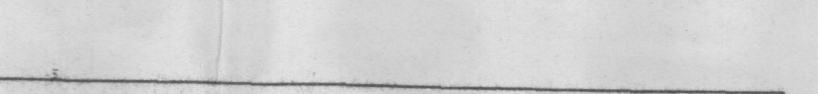
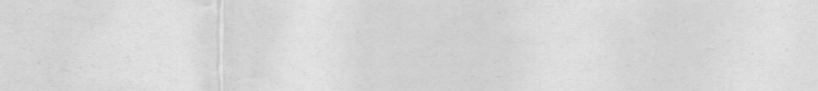
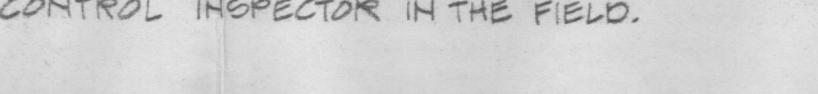
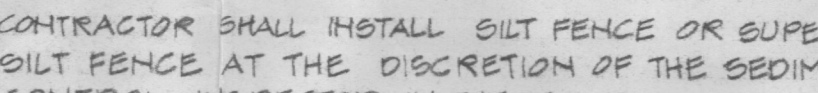
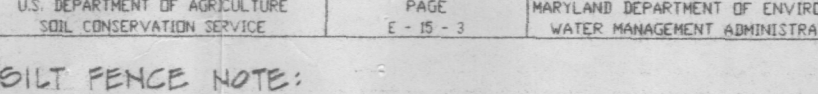
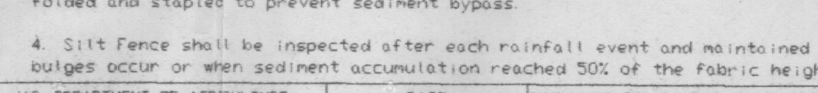
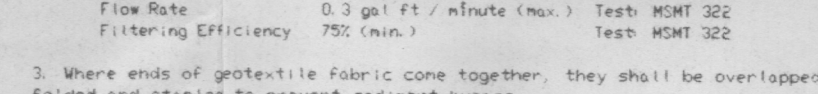
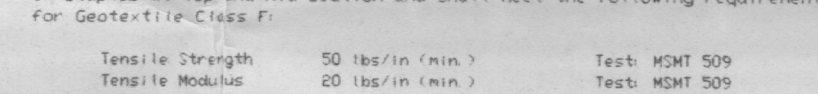
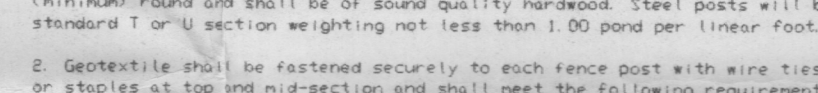
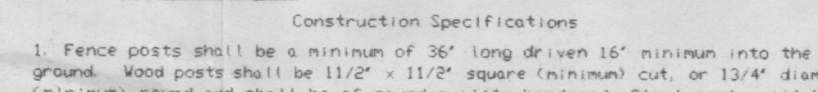
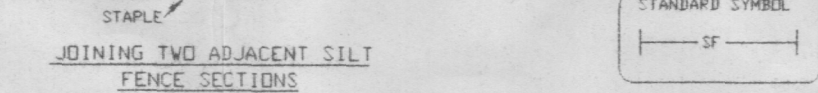
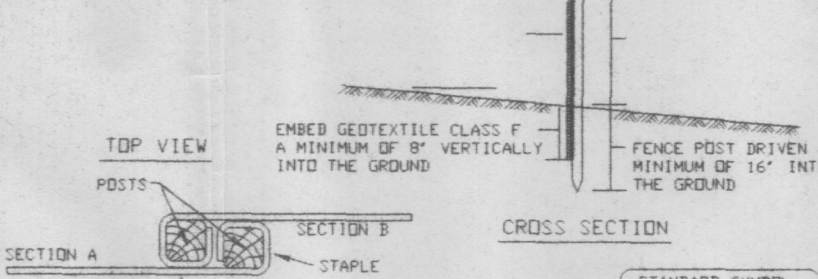
John M. Morgan DATE 2/5/03

HOWARD ECD

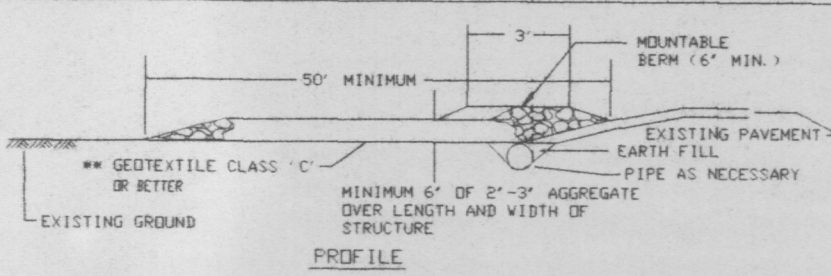
DETAIL 22 - SILT FENCE



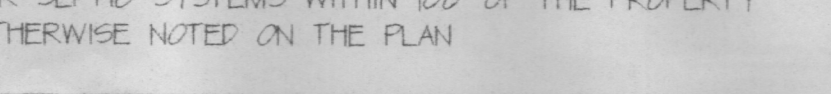
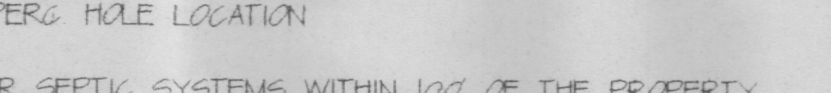
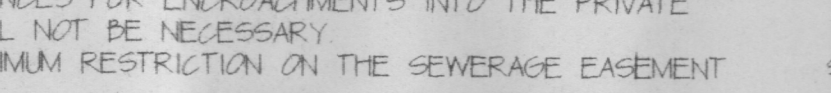
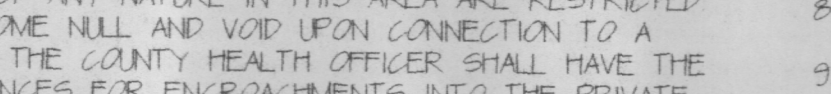
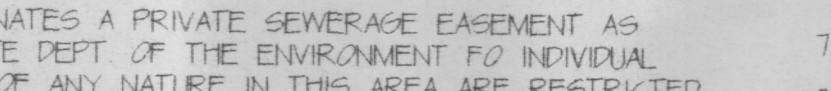
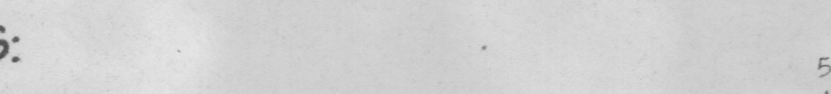
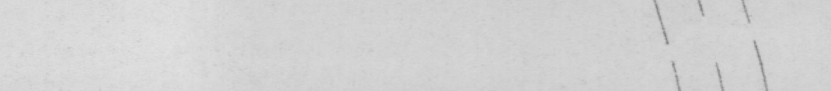
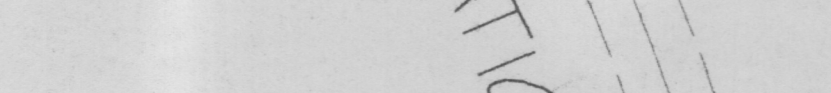
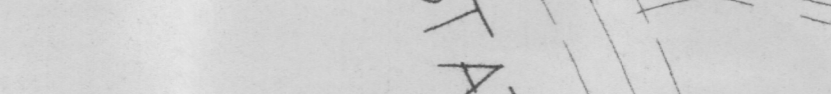
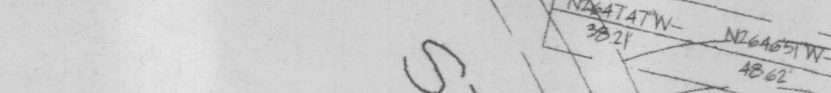
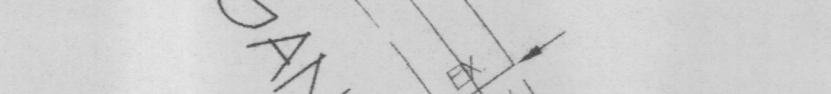
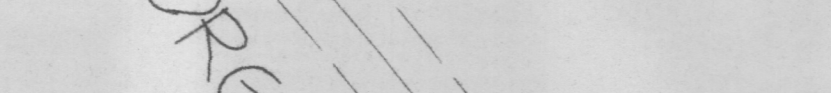
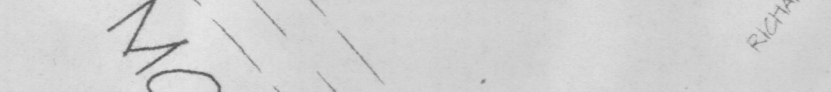
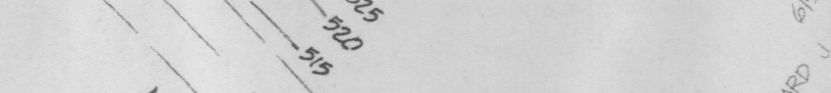
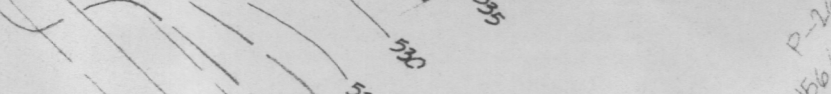
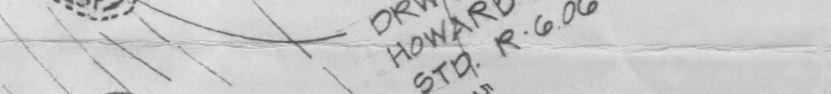
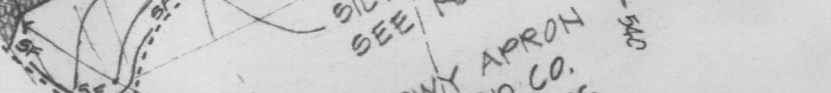
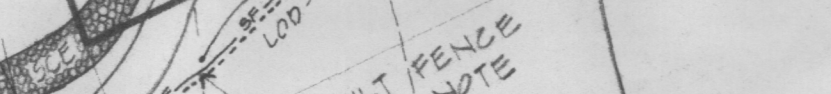
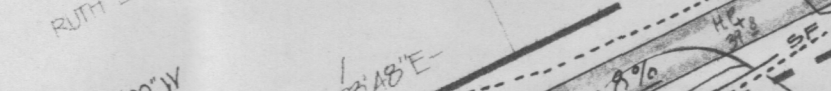
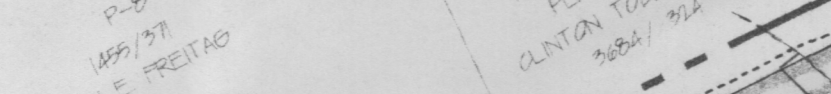
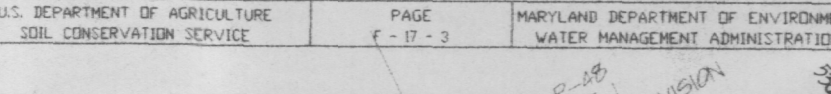
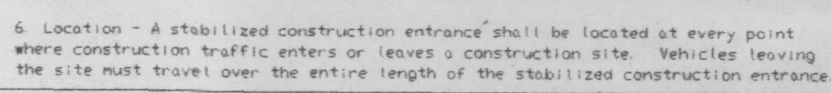
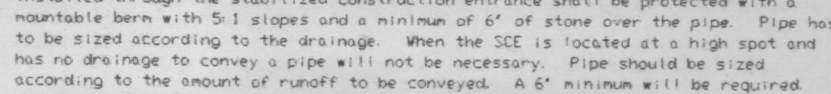
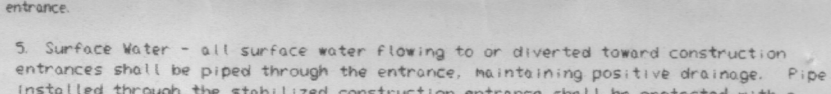
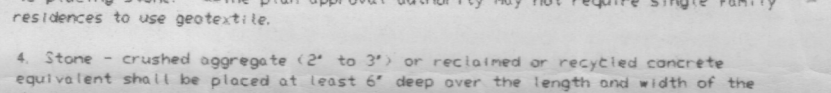
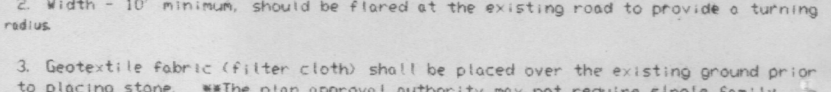
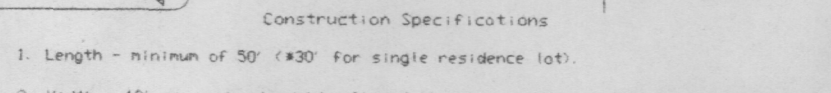
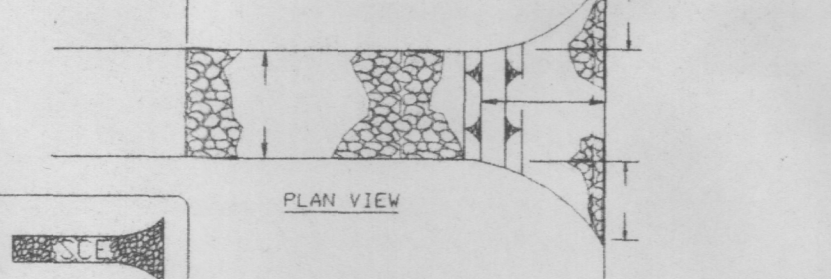
PERSPECTIVE VIEW



DETAIL 24 - STABILIZED CONSTRUCTION ENTRANCE



PERSPECTIVE VIEW



GENERAL NOTES:

- THE TOPOGRAPHY SHOWN HEREON IS FIELD RUN BY CHARLES R. CROCKEN AND ASSOCIATES 7/2001.
- THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT AS REQUIRED BY THE MD STATE DEPT. OF THE ENVIRONMENT FOR INDIVIDUAL DISPOSAL IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED. THIS EASEMENT SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENTS INTO THE PRIVATE SEWERAGE EASEMENT SHALL NOT BE NECESSARY. THERE IS A 10,000 SF MINIMUM RESTRICTION ON THE SEWERAGE EASEMENT.
- DESIGNATES PASSED PERC HOLE LOCATION
DESIGNATES FAILED PERC HOLE LOCATION
- THERE ARE NO WELLS OR SEPTIC SYSTEMS WITHIN 100' OF THE PROPERTY SHOWN HEREON UNLESS OTHERWISE NOTED ON THE PLAN.

5. THE LOT SHOWN HEREON COMPLIES WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREA AS REQUIRED BY THE MARYLAND DEPARTMENT OF THE ENVIRONMENT.

6. THE FORMER DWELLING AND ALL OTHER STRUCTURES ON THIS SITE HAVE BEEN RAZED.

7. LOT AREA = 3.4143 ACRES (PER PLAN)

8. TOTAL DISTURBED AREA = 0.085 ACRES (37,026 SF)

9. BRL - DESIGNATES BUILDING RESTRICTION LINE

DESIGNATES LIMIT OF DISTURBANCE

DESIGNATES SILT FENCE

DESIGNATES EARTH DIKE

DESIGNATES PASSED PERC HOLE LOCATION

DESIGNATES FAILED PERC HOLE LOCATION

THERE ARE NO WELLS OR SEPTIC SYSTEMS WITHIN 100' OF THE PROPERTY SHOWN HEREON UNLESS OTHERWISE NOTED ON THE PLAN.

THERE ARE NO WELLS OR SEPTIC SYSTEMS WITHIN 100' OF THE PROPERTY SHOWN HEREON UNLESS OTHERWISE NOTED ON THE PLAN.

THERE ARE NO WELLS OR SEPTIC SYSTEMS WITHIN 100' OF THE PROPERTY SHOWN HEREON UNLESS OTHERWISE NOTED ON THE PLAN.

Total linear feet of trench required 280 feet

Width of trench(es) 3 feet

Depth of trench(es) 6 feet

Depth of stone required below distribution pipe 2 feet

Approved Septic System Plan
Howard County Health Department

Signature: Steven R. King
Date: 2/5/03

Signature: Steven R. King
Date: 2/5/03

Signature: Steven R. King
Date: 2/5/03

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Date: 2/5/03

Signature: Steven R. King
Date: 2/5/03

Signature: Steven R. King
Date: 2/5/03

SEPTIC DATA:

FF ELEV. 513.15
BENT ELEV. 514.15
INVERT OUT HSE 516.15

EX GRD. @ SEPTIC TANK: 517.00
PROP. @ SEPTIC TANK: 518.00
INV. IN: 515.50
INV. OUT: 515.30

EX GRD. @ DISTRIBUTION BOX: 517.00
PROP. @ DISTRIBUTION BOX: 517.00
INV. IN: 514.70
INV. OUT: 514.50

OWNER: (LOTS 2 & 3)
PATAPSCO HOMES, INC.
18000 FORSYTHE RD.
SYKESVILLE, MD 21784
TEL 410-552-9916

DEVELOPER:
VIRGO DEVELOPMENT CORP.
550 WINTERBURN DRIVE
SUNSHINE, MD 21784
TEL 410-552-9916

REV. #1 REVISED PER HECO COMMENTS 2/18/03

PLOT PLAN GRADING & SEDIMENT CONTROL PLAN

LOT 2 RIVER PLANTATIONS

PLAT CMP #4214

555 MORGAN STATION RD.

RESUBDIVISION OF P/O PARCEL #5

4TH ELECTION DISTRICT TAX MAP #3, GRID 20

HOWARD COUNTY, MARYLAND

Prepared by: CHARLES R. CROCKEN AND ASSOCIATES, INC.

Civil Engineering - Land Planning

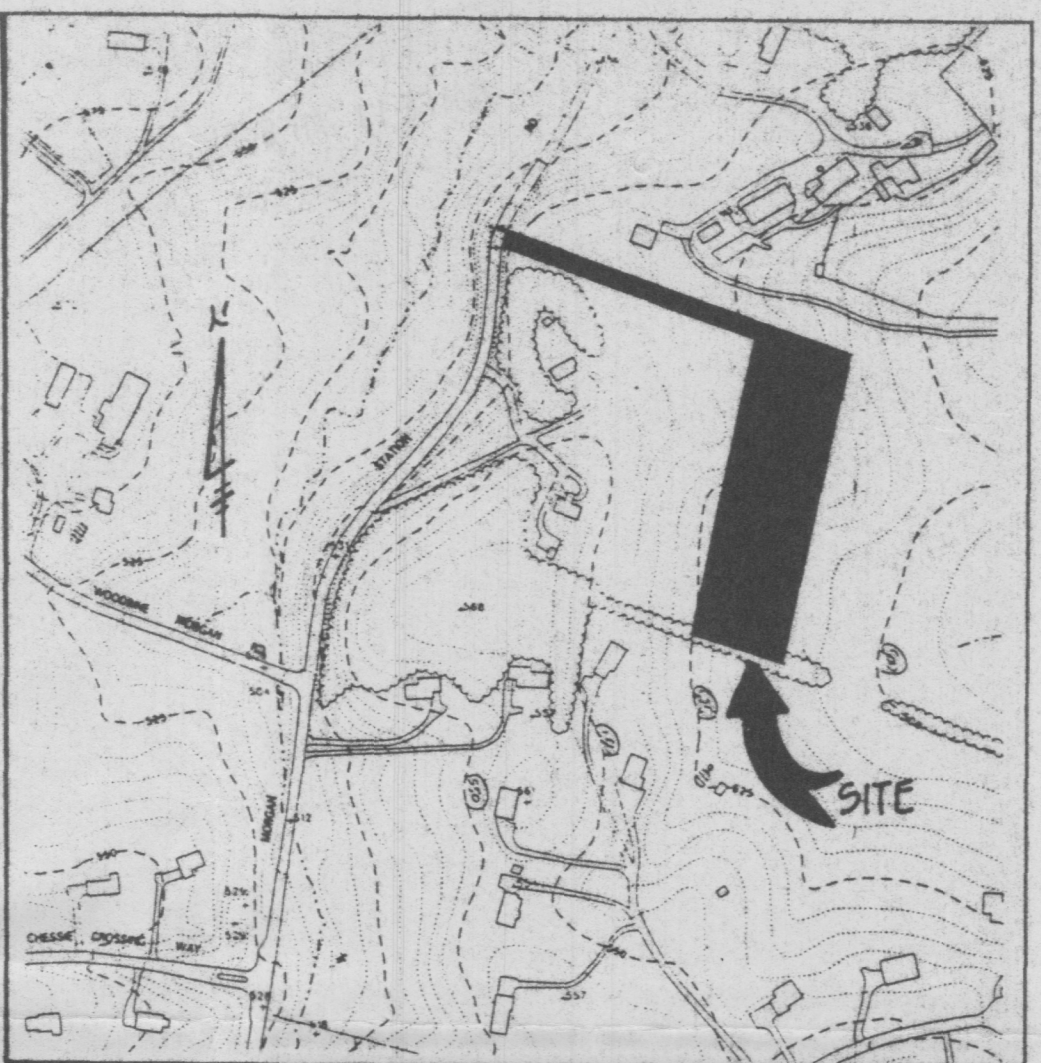
PO Box 307

Westminster, MD 21157

Tel (410) 548-5205

Fax (410) 548-5205

SCALE: 1"=50' DATE: 2/19/03 SHEET 1 OF 1



VICINITY MAP

SCALE: 1"=400'

1-9-03

STATE OF MARYLAND

CHARLES R. CROCKEN

REGISTERED

PROFESSIONAL ENGINEER

NO. 1000

EXPIRATION DATE 12/31/04

1800139947

REVISED

Date: 2-6-03

Comments: relocated driveway OKSRK 2/11/03

Charles R. Crocken

**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: WTC III Telephone #: 410 489 4457
Address: 1820 Gillis Falls
Woodbine MD

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer
License # and name of individual responsible for the field installation:
Name (Print): William T. Cumberland License# 7979
*A licensed individual must perform the actual installation. Apprentices must be under the supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification. Unlicensed individuals may be reported to the appropriate licensing agency.

Name of Property Owner: W. King Deane Telephone #: _____
Subdivision: River Plantations Lot #: 2 Well Tag #: HO-99-3600
Site Address: 555 Morgan Station Rd

Submersible Pump Data

Make: Myres
Model #: _____
Pump Capacity 5 GPM
Well Yield: 15.78 GPM

Pitless Adapter

Make: Harvard
Model #: _____
Depth: 5' (36" min)
NSF/WSC 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, Cable guards, or other acceptable method used- Must circle one
Safety rope, if used, attached to brass rope adapter or other acceptable method inside of well casing

Piping to house

Type: Plastic
PSI: ☒ (160 psi min)
Depth of supply line: 5 (36" min)

House Connection

PVC sleeve to undisturbed soil at wall penetration: ☒
Approximate length of sleeve: 5'
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.

Signature of company representative responsible for installation

10-29-03
date

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

Date Insp. Requested: 7/11/03 Date Insp. Approved: 7/11/03 Inspector: SO SRK
Inspection Data: Pitless adapter watertight & 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 not seen outside of well cap/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 ☒

C114365

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
NUMBERA28534

ST/CO USE ONLY: L
DATE Received
MMDDYY
01202003
DATE WELL COMPLETED
2/4/03
Depth of Well
200
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
HO-94-3600

OWNERVIKING DEVELOPMENT CORPORATION
STREET OR RFD553 MORGAN STATION ROAD
SUBDIVISIONRIVER PLANTATIONSSECTIONTOWNWOODBINELOT2

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		check if water bearing
	FROM	TO	
Overburden	0	35	
Blue Slate	35	200	x
water at 55' & 70'			

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL (Circle one)

CEMENTCMBENTONITE CLAYBC

NO. OF BAGS45NO. OF POUNDS900

GALLONS OF WATER34

DEPTH OF GROUT SEAL (to nearest foot)

from0ft. to42ft.

CASING RECORD

casing
types
insert
appropriate
code
below

STEELSTCONCRETECO
PLASTICPLOTHOTHER

MAIN CASING TYPE

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

Total depth
of main casing
(nearest foot)42

OTHER CASING (if used)

diameter
inchdepth (feet)
fromto

SCREEN RECORD

screen type
or open hole

STEELSTBRASSBR
PLASTICPLOTHOTHER

DEPTH (nearest ft.)

HO42202

C3

PUMPING TEST

HOURS PUMPED (nearest hour)3

PUMPING RATE (gal. per min.)15.78

METHOD USED TO
MEASURE PUMPING RATESubmersible

WATER LEVEL (distance from land surface)

BEFORE PUMPING26ft.

WHEN PUMPING24ft.

TYPE OF PUMP USED (for test)

AairPTturbine
CcentrifugalRrotaryOother
JjetSsubmersible

NUMBER OF UNSUCCESSFUL WELLS:0

WELL HYDROFRACTURED

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. MWD 399

DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. JS D 048

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

C2

DEPTH (nearest ft.)

HO42202

SCREEN RECORD

screen type
or open hole

STEELSTBRASSBR
PLASTICPLOTHOTHER

DIAMETER
OF SCREEN

(NEAREST
INCH)

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.)WQ

TELESCOPE
CASING

LOG
INDICATOR

OTHER DATA

PUMP INSTALLED

DRILLER INSTALLED PUMP
(CIRCLE) (YES or 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)

LAND SURFACE
(nearest
foot)

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)

* Drilled on stake
Provided by Surveyor

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 94-3600
Location of property (road) 535 MORGAN STATION ROAD
Subdivision RIVER PLANTATIONS Lot 2 Block 20 Plat _____ Sec. _____
Well Driller G. EDGAR HARR + SONS Owner VIKING DEVELOPMENT

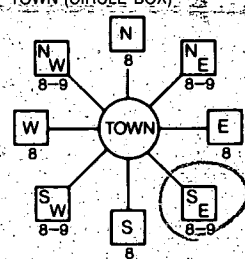
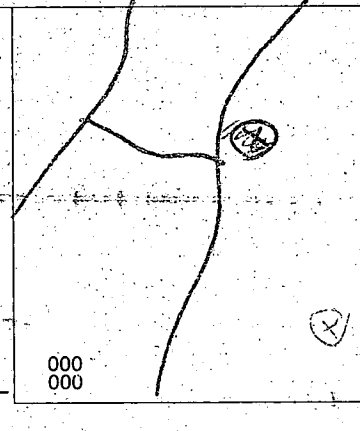
Depth of well 200'
Distance of measuring point (M.P.) above ground 1'
Static water level (S.W.L.) below M.P. 26'

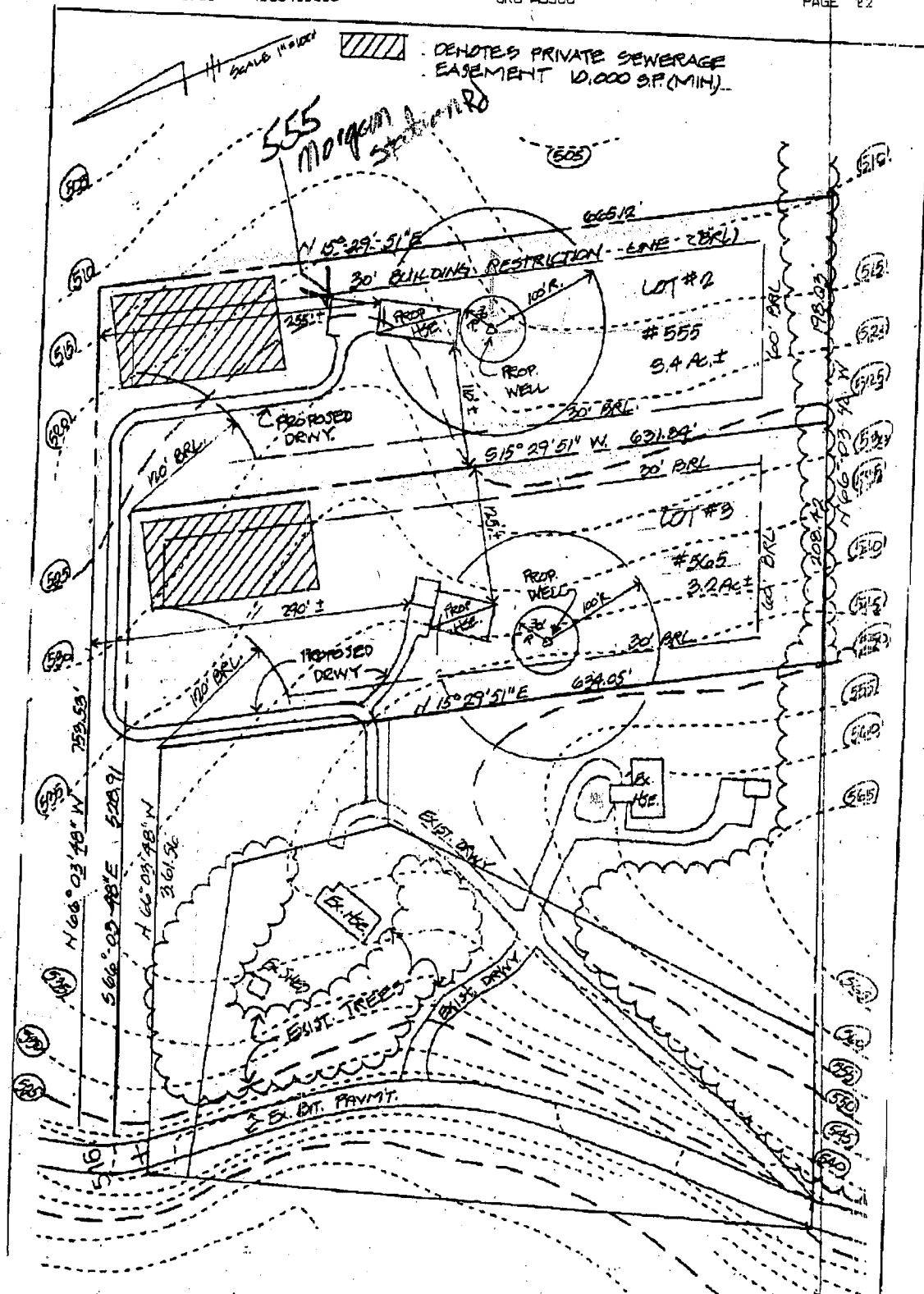
I. High rate pumping -- reservoir drawdown

Time pump started 1200 Pumping rate 15.78gpm
Total time 15 to reach pumping water level 26 ft. below M.P.

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

[illegible]

B 1 2290	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type	STATE PERMIT NUMBER H0-94-3600 <small>fill in this form completely</small>
Date Received (APA) 10-28-02		B 3 Howard LOCATION OF WELL	
OWNER INFORMATION 8 MM DD YY 13 15 viking Development Owner First Name 34 36 815 Windriver Drive Street or RFD 55 57 Sykesville MD 21784 Town 70 State 72 Zip 76		8 COUNTY 21 23 River Plantations SUBDIVISION 42 SECTION 44 46 LOT 2 48 50 52 Woodbine NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) 1 M 73 76 77 78	
DRILLER INFORMATION Driller's Name Paul M. Fabiszak M W D 3 9 9 76 License No. 81 Firm Name G. Edgar Harn Sons' Corp Address 12047 Falls Rd Cockeysville 21030 Signature [Signature] Date 10/24/02		B 4 1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  11 SSS Morgan Station Rd NEAR WHAT ROAD 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 34 300 37 DISTANCE FROM ROAD 38 39 ENTER FT OR MI ft TAX MAP 3 BLK 20 PARCEL 35	
B 2 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 5 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 750 14 20		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL HOWARD COUNTY NAME A28534 COUNTY NO. STATE SIGNATURE [Signature] INSERT S 41 DATE ISSUED 12/11/02 Steven R. King 12/11/03 43 MM DD YY 48 CO SIGNATURE EXP. DATE NORTH GRID 552 0.0 0.0 EAST GRID 782 0.0 0.0 50 55 57 63	
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		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 780 8 N 550 2	
APPROXIMATE DEPTH OF WELL 250 FEET 24 28 APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST INCH			
METHOD OF DRILLING (circle one) BORED (or Augered) <input type="checkbox"/> JETTED <input checked="" type="checkbox"/> Jetted & DRIVEN 30 AIR-ROTARY <input type="checkbox"/> AIR-PERCussion <input checked="" type="checkbox"/> ROTARY (Hydraulic Rotary) 37 CABLE <input type="checkbox"/> REVERSE-ROTARY <input type="checkbox"/> Drive-POINT other		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION Woodbine Rd Morgan Station Rd	
REPLACEMENT OR DEEPEENED 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-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="checkbox"/> THIS WELL WILL DEEPEEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEENED (IF AVAILABLE) 41 _____ 52		Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER _____ G _____ PERMIT No. H0-94-3600 70 71 72 73 74 75 76 77 78 79	
SPECIAL CONDITIONS <small>NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED</small>			



12/10/02
~~#2202~~
well site
staked
by Surveyor
licensed

NO SITE
INSP

SRV

OWNER/DEVELOPER
VIKING DEVELOPMENT, CORP
815 WINDRIVER DRIVE
SYKESVILLE, MD 21784
TEL (410) 532-9916

SITE PLAN FOR WELL PERMIT
LOTS 2 & 3 RIVER PLANTATIONS
(555 & 565 MORGAN STATION RD.)
4TH EL. DIST. TAX MAPS, GRID 20 P 92

CHARLES R. CROCKEN & ASSOC., INC.
Civil Engineering & Land Planning
P.O. Box 307
Westminster, Maryland 21157
Tel. (410) 549-2708

2/30/02
9:00

APPLICATION

PERCOLATION TESTING

A NO FEE

P _____

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

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

Re-Test
of Ex. Platted
Esmt. - 1-3 Holes
in vicinity of
ex. esmt.

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 Viking Development Corporation

ADDRESS 815 Windriver Drive PHONE 410 977-2188

AGENT OR PROSPECTIVE BUYER Sykesville, MD 21784

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Riverside Plantation LOT NO. 2

ROAD AND DESCRIPTION Morganstation Road - Address 555 Morganstation

TAX MAP _____ PARCEL # 35

SIZE OF LOT 3.42 acres TYPE BLDG. Single Family
(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.

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

NOT TO SCALE

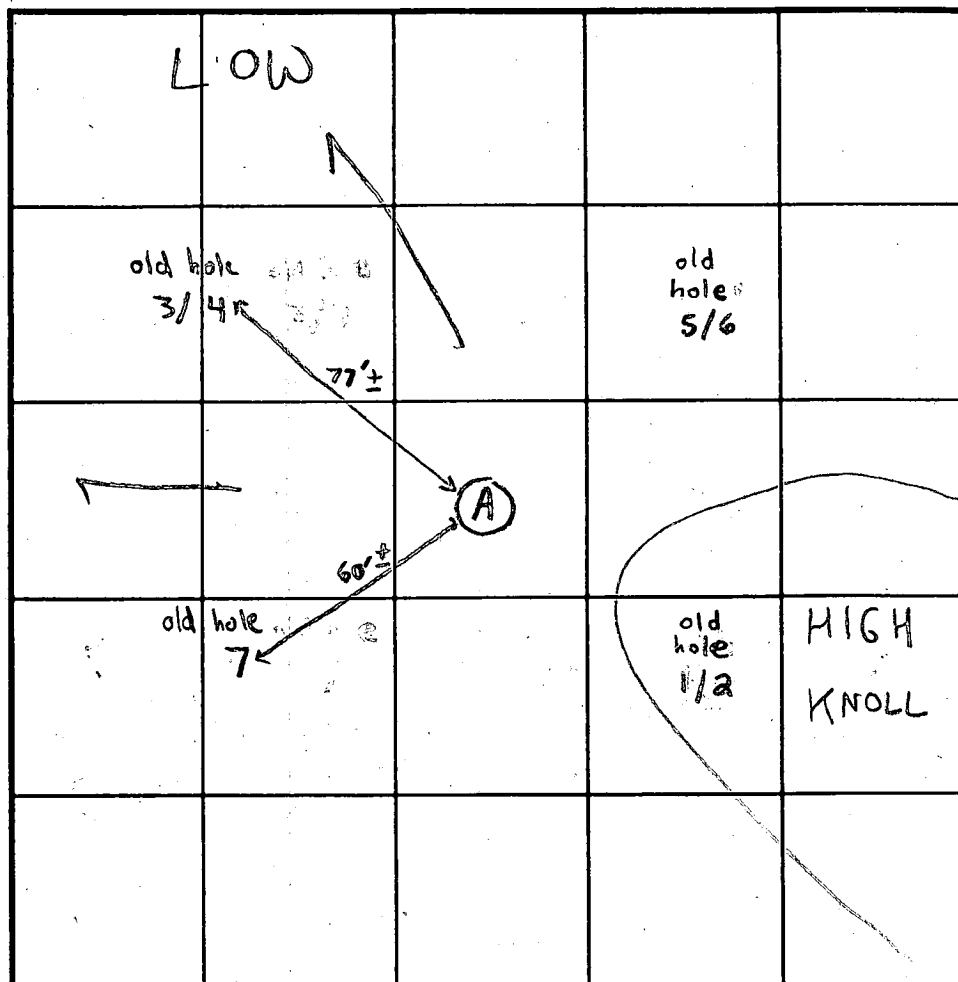
COUNTY #

SOIL PROFILE

0' **(A)**
red-brn
silt
lm
1'
red-
org
fine
sandy
lm
0-5%
Saprolite
12'

SOIL PROFILE

0'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
7/30/02	(A)	12'V	(VISUAL	OK SEE	SOIL PROFILE)		NA

REMARKS Hole A dug to verify rock content of previously approved perc.

TYPE OF SOIL _____

TESTED BY SRK

ALSO PRESENT Cary Cumberland

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

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

River Plantations,

See application concerning water well location. Lot #2
Septic tank { 1-3 Bedrooms 1000 gallons
4 Bedrooms 1250 gallons

Trenches to be 3' wide. Inlet to be $3\frac{1}{2}'$ below original grade and effective absorbent area from $3\frac{1}{2}'$ - $6'$ only. Maximum depth of trenches to be $6'$ below original grade. A minimum of 140 sq. ft. effective absorbent sidewall area per bedroom needed. Trenches can not exceed 100' in length. Distribution box to be used if more than 1 trench used. Two inspections of trenches required - before and after stone installed. If more than 1 trench used - need to have a 15' distance between trenches, center to center. Run trenches on contour.

{ Location: } Start trenches at a point 105' from front property line, (131.84'), and down front line from right R/W pt. 150 when facing lot from Morgan Station Road.

APPLICATION

SEWAGE DISPOSAL TESTING

A. 28534

P.

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE
HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DISTRICT 1080 gallons
4th
DATE 12/21/78
1259 gallons

Septic Tank { 1-3 Bedrooms
4 Bedrooms

TO: 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 Eastern Contracting Services, Inc.

ADDRESS

PHONE

PROPERTY LOCATION:

SUBDIVISION River Plantations

LOT NO. 2

ROAD AND DESCRIPTION Morgan Station Road

SIZE OF LOT 3.421 acres m/1

TYPE BLDG. 3 or 4 bedrooms

NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE

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

SIGNATURE OF APPLICANT /s/ Phil Freitag

APPROVED BY

Howard County Health Dept. { F.F.
C.B.S.

FOR

Trenches only
Shallow system

(KIND OF SYSTEM)

DATE

2/16/79

REJECTED BY

FOR

(KIND OF SYSTEM)

DATE

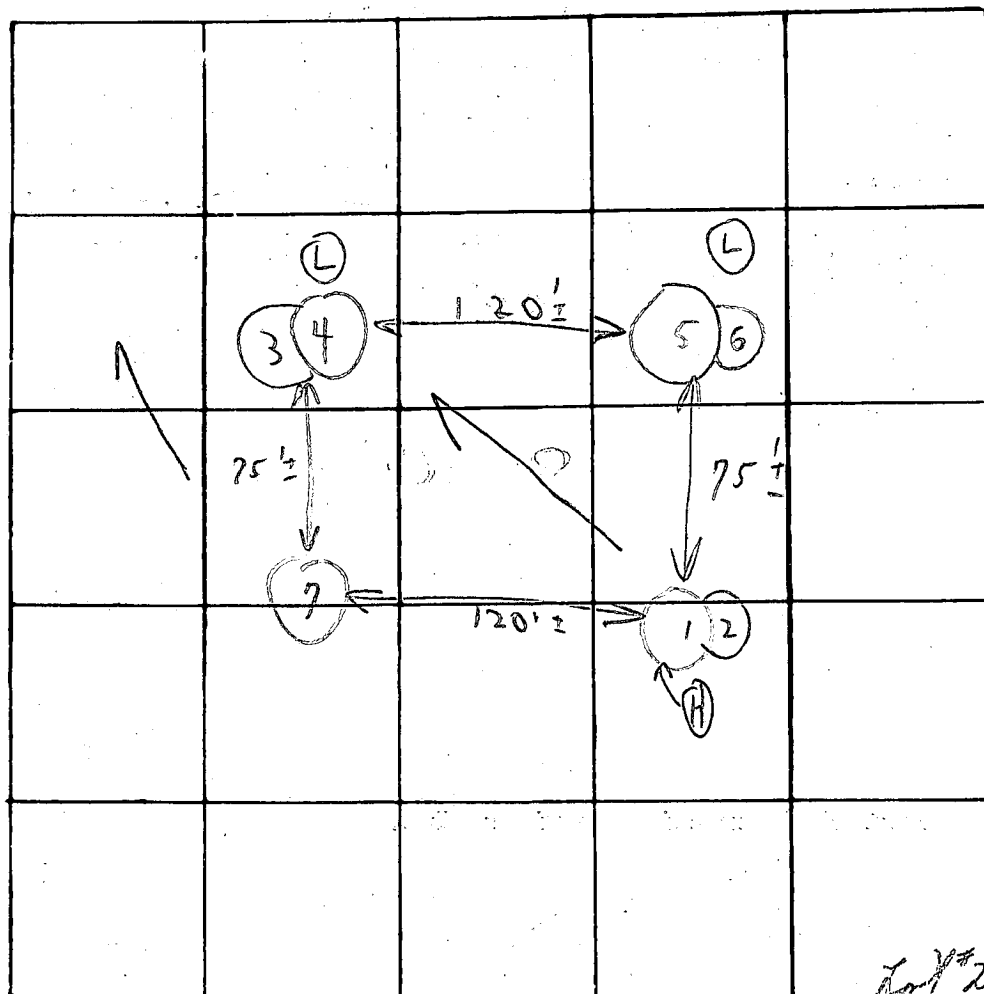
HOLD PENDING FURTHER TESTS

DATE

REASONS FOR REJECTION OR HOLDING

THIS IS NOT A PERMIT

112



field sheet
Tests per site

See plat for location

depth
approx. 5'-6'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

Lot #2

Soil Profile

Below Day
weathered
shale
+
loam

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
10/17/78	1	3 1/2'	10:15	10:19	10:19	10:22	3m
	(H) 2	9 1/2'	10:23	10:26	10:26	10:36	10min
	3	5'	10:08	10:17	10:17	10:27	10m
	(L) 4	10'	10:09	10:17	10:17	10:28	11m
	5	4'	10:13	10:16	10:16	10:21	5m
	(L) 6	10'	10:12	10:21	10:21	10:37	16m
	(H) 7	3 1/2 - 10'	Visual		similar to others		6 - 55

140 depth
per 10min

REMARKS

Tests in open field Tests in open - need to certify

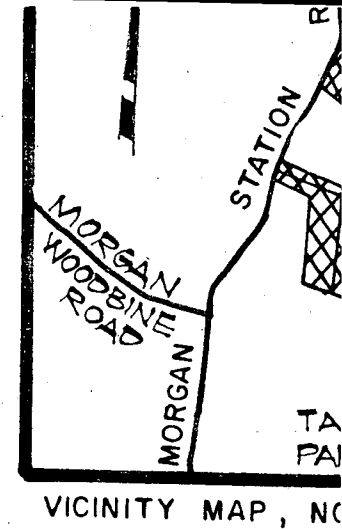
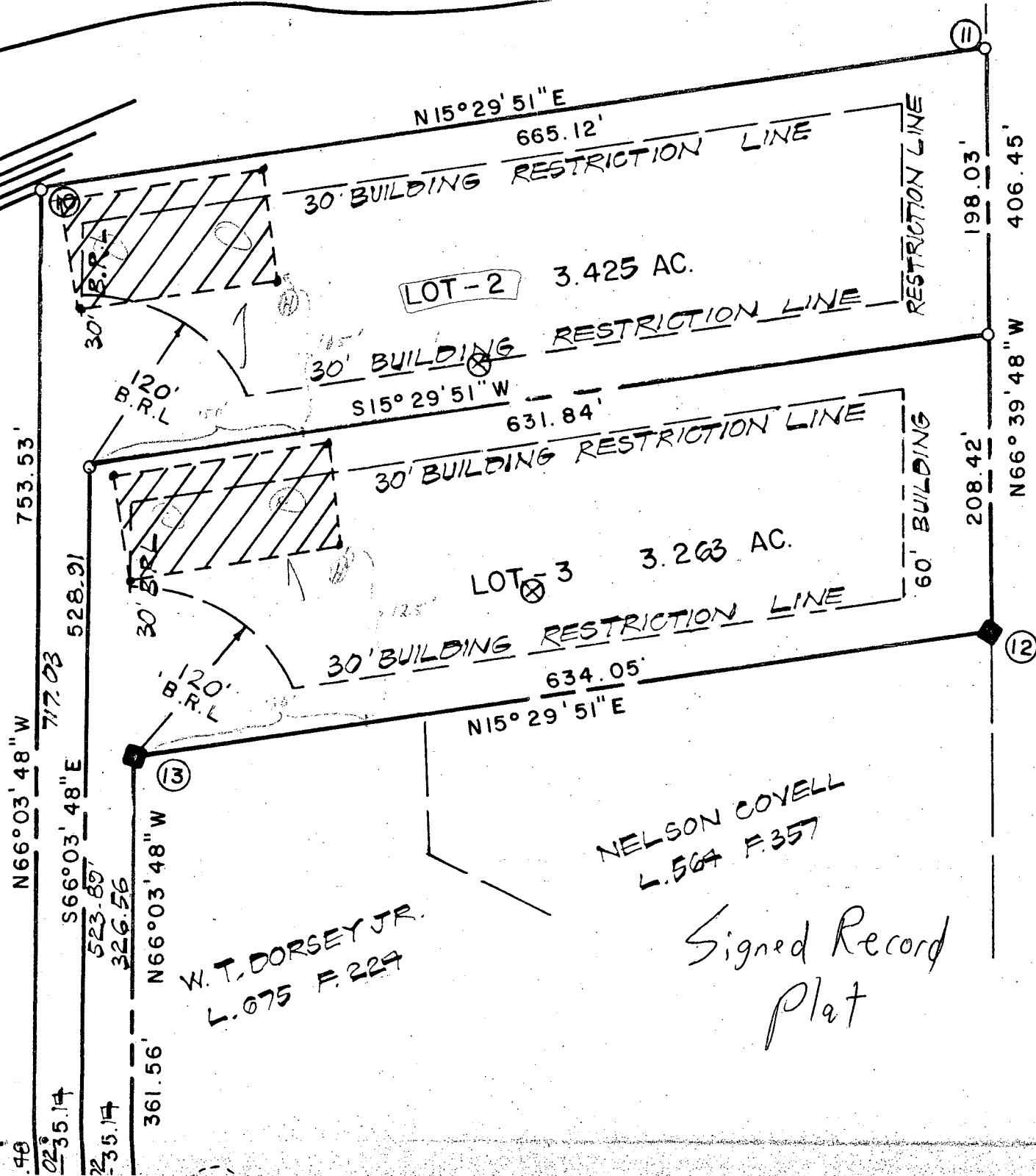
TYPE OF SOIL

TESTED BY

C.B.D.

ALSO PRESENT:

Mr. F. Santay
+ 2 helpers



ROY W. CRUM 168 / 374

COORDINATE	
NO.	NORTH
1.	7156.942 221
2.	7149.357 24
3.	7152.964 25
4.	7200.958 26
5.	7082.937 27
6.	6739.560 24
7.	6935.839 20
8.	7099.519 21
9.	6510.708 18
10.	6204.980 25
11.	5564.039 23
12.	5725.046 19
13.	6301.944 21
14.	6448.638 18
15.	6436.474 18
16.	6427.934 18
17.	7154.640 22
18.	6915.923 21

PLOT PLANOWNER Viking Development

Application

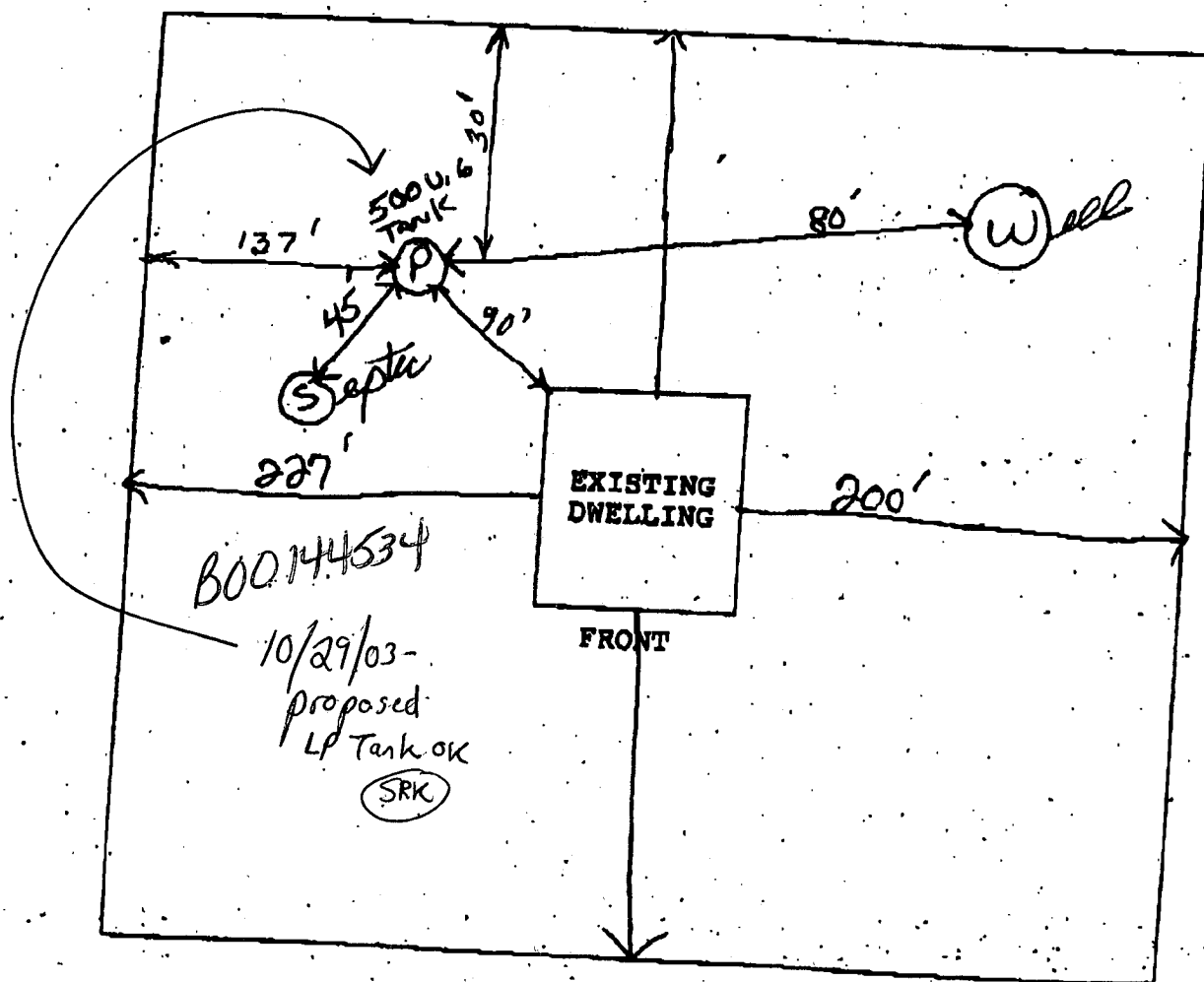
ADDRESS 555 Morgan Station Rd Woodbine, MD 21797

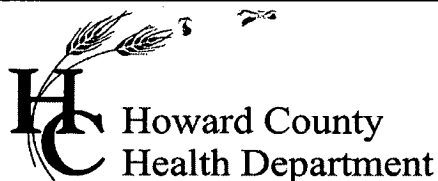
PLEASE SHOW BELOW:

- Property line dimensions and easements;
- Existing buildings;
- Existing well/septic; (show distance to nearest structure)
- Road names and location of alleys;
- If your property is in a tidal or riverine flood area, indicate elevation of floor of proposed work.
- The proposed work and the setback distances to the proposed work.

Front Setback 94'Left Setback 227'Rear Setback 64'Right Setback 200'

NOTE: Cannot fence access easement.

ROAD NAME Morgan Station Rd Woodbine MD 21797



3525 H Ellicott Mills Drive, Ellicott City, MD 21043
(410) 313-1771 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

November 5, 2003

Viking Development Corp.
815 Wind River Drive
Sykesville, MD 21784

SENT VIA FACSIMILE 410-549-3240

RE: River Plantations, Lot # 2
555 Morgan Station Road
BP # B00139947
Well Permit #HO-94-3600

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 July 11, 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 water sample results were found to be in compliance with COMAR water quality standards.

INTERIM CERTIFICATE OF POTABILITY

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-94-3600. 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 test, which is to be taken by the county health department within six months of receipt 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 Samples: 10/28/2003 & 11/04/2003
Date of Well Completion: 01/20/2003

Approving Authority,

Steven Krieg/mlb

Steven Krieg
Registered Environmental Sanitarian
Well & Septic Program

mlb

cc: Building Inspector's Office
Community Health Services
File