

10/20/98
10am
open trench

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 510698

A 42633

DISTRICT 4th

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
~~XXXXXX~~ 410-313-2640

#357191

DATE 9/21/98

DATE SYSTEM APPROVED 10/21/98

INSPECTOR [Signature]

INDEXED

Arnold's Backhoe & Septic Services IS PERMITTED TO INSTALL X ALTER

ADDRESS P.O. Box 15 Woodbine, MD 21797 PHONE (410) 795-7873

SUBDIVISION Warfields Grant LOT 27 ROAD 16008 Fields End Court

PROPERTY OWNER Trinity Homes Olson

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS MANHOLE CLEANOUT REQUIRED ON SEPTIC TANK

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 180

TRENCHES - Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 4 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Place distribution box 195 feet up the left (324.69') lot line and 75 feet off that same lot line as seen when facing the lot from Fields End Court. Run trenches on contour in both directions.

NOTE - No trench to exceed 100 feet in length. OK 8.26.98

BUILDING PERMIT SIGNED

PLANS APPROVED BY Donna K. Soe AND RETURNED 4302 DATE 8/20/98

BOD 135231 - 16 POOL

COVER NO WORK UNTIL INSPECTED AND APPROVED

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS. 90° ELBOWS NOT ACCEPTABLE.

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

PERMIT VOID AFTER TWO YEARS

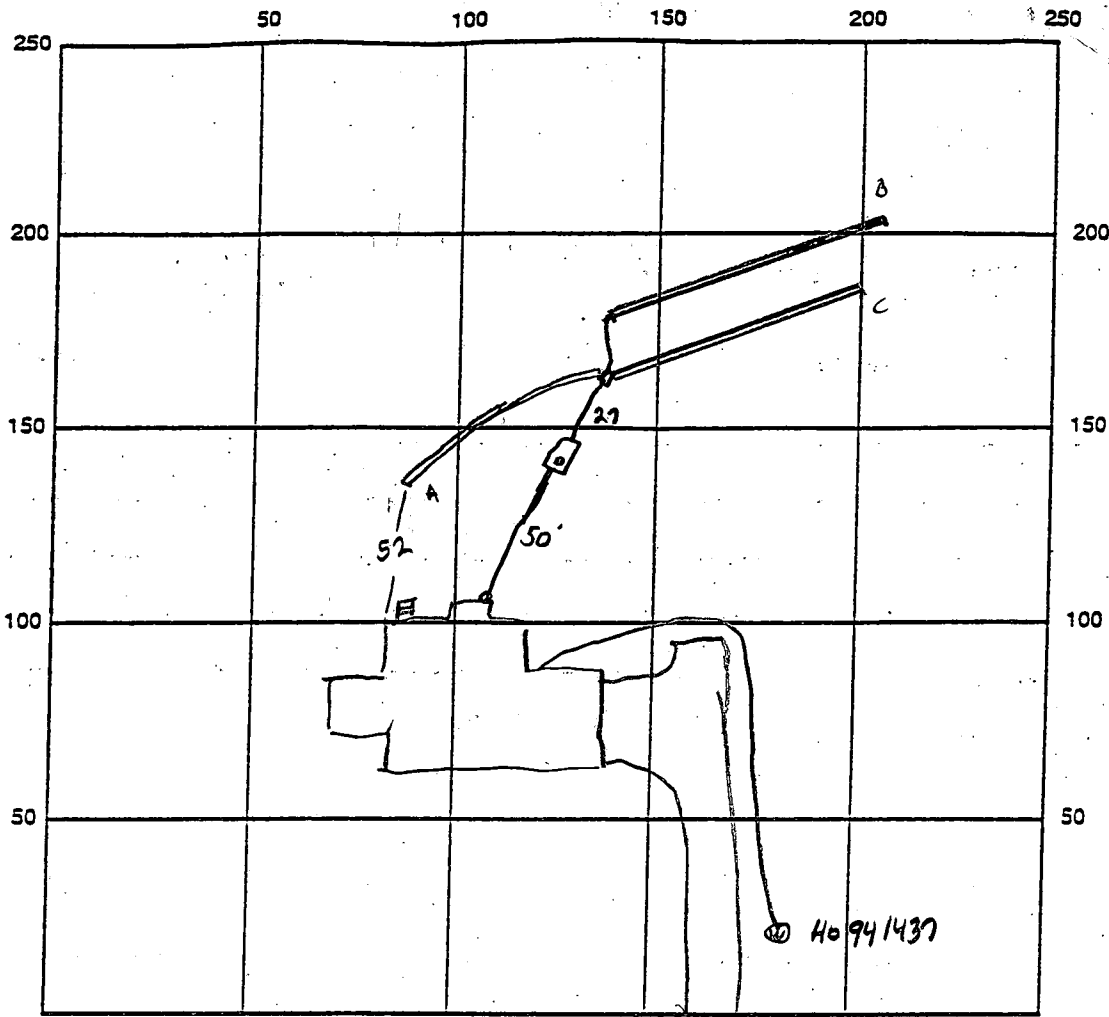
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON, CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

PERMIT SIGNED
RETURNED 6-3-99
Serial # B17 118446
dict

A
42633



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL ok CLEANOUTS AT HOUSE

DISTRIBUTION BOX LEVEL ok

DRAIN FIELD/TITLE DEPTH 8 FT. TRENCH WIDTH 2 FT. INLET DEPTH 4 FT.

EFFECTIVE GRAVEL DEPTH 4 FT. TOTAL LENGTH 159/162 FT. 182

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 728 SQ. FT.

DRYWALL INSIDE DIAMETER - FT. EFFECTIVE DEPTH BELOW INLET - FT.

ABSORBENT AREA - SQ. FT.

REMARKS: 10/21/98 VRT OK TO COVER, OK TO STOVE TRENCHES
10/21 FINAL COVER ALL WORK

DATE SYSTEM APPROVED 10/21/98 INSPECTOR [Signature]

APPLICATION

PERCOLATION TESTING

A 42633

8-16-93 No testing required. CW

P _____

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

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 ~~WARFIELDS GRANT LTD. PARTNERSHIP~~ *TRINITY HOMES* c/o Ronald B. Carter

ADDRESS P.O. Box 122 ELLICOTT CITY MD. 21043 PHONE _____

AGENT OR PROSPECTIVE BUYER FISHER COLLINS + CARTER ATTN: Zach Fisch

ADDRESS 9171 BALTIMORE NATIONAL PIKE ELLICOTT CITY MD. 21042 PHONE 461-2855

PROPERTY LOCATION:

SUBDIVISION WARFIELDS GRANT SEC. 2 LOT NO. 27

ROAD AND DESCRIPTION Daisy Road (16008 Fields East Court)

TAX MAP 13 PARCEL # 128

SIZE OF LOT 1 AC. ± TYPE BLDG. S.F.D. - 4 Bmw
(SINGLE FAMILY DWELLING OR COMMERCIAL)

BLDG. PERMIT GRANTED AND RETURNED 8-20-98
Serial # B70113385

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. Zacharia G. Fisch (agent)
(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

A42633
COUNTY #

SOIL PROFILE

0'

	refer to Pg 2			
	for details			

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	

REMARKS _____

TYPE OF SOIL _____

TESTED BY _____ ALSO PRESENT _____

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

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

APPLICATION

PERCOLATION TESTING

A 42633

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

4th DISTRICT _____

8-05-88 DATE _____

4th

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 Mr. Robert M. Warfield

ADDRESS 2425 Daisy Road, Woodbine, Md. 21797 PHONE _____

PROSPECTIVE BUYER Carman Associates

ADDRESS P.O. Box 122, Ellicott City, Md. PHONE 854-6797

PROPERTY LOCATION:

SUBDIVISION Warfields Grant LOT NO. 29²⁷

ROAD AND DESCRIPTION West Side Daisy Road

TAX MAP 13 PARCEL # 128

SIZE OF LOT 3 acres 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.

Philip A. Marglitz
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 10-14-88 Perc Satisfactory - Hold For Plat. S.A.L.

HD-216

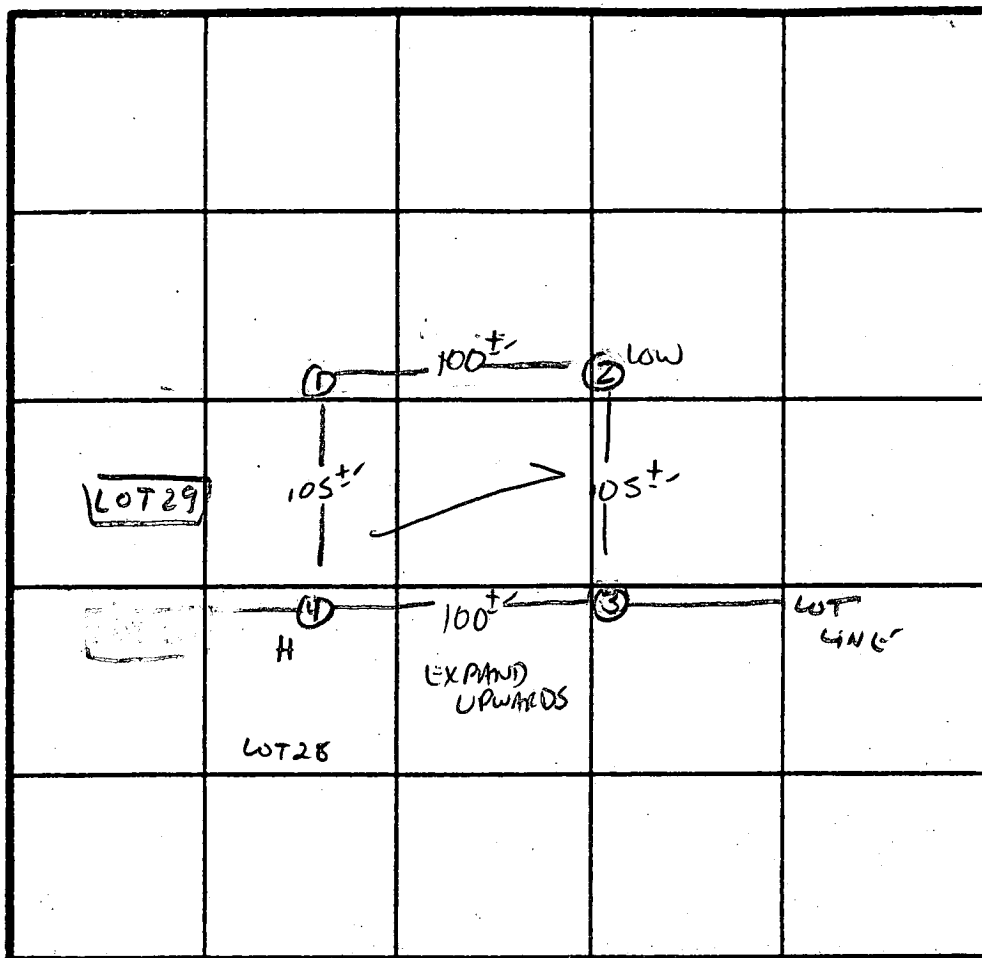
THIS IS NOT A PERMIT

Z of Z

A-42633

SOIL PROFILE

0	AD
6"	Strong Brown clay loam 10% fangs
3.5-4.5	Yellow BR silt loam w/ pink casts 15-20% fangs
12"	



x Perc
 7 min
 1800/BA
 Inlet 4.6"
 Bottom 8.0"

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Daisy Rd.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
10/14/88	1 S	6" 13"	10:59	11:03	11:03	11:08	5 min above
	2 S	6" 12.5"	11:05	11:09	11:09	11:16	7 min
	3 S	4.0" 12.5"	11:09	11:17	11:17	11:31	14 min
	4 S	4" 8"	10:57	10:58	10:58	11:00	2 min 6 min
	4 V	13"					

REMARKS Holes approx RAT
 TYPE OF SOIL Glenelg
 TESTED BY S. Abel ALSO PRESENT Phil C. Crisell
FRANDREUS

Signed
Preliminary
Plan

LIMIT OF WORK
STA. 5+50

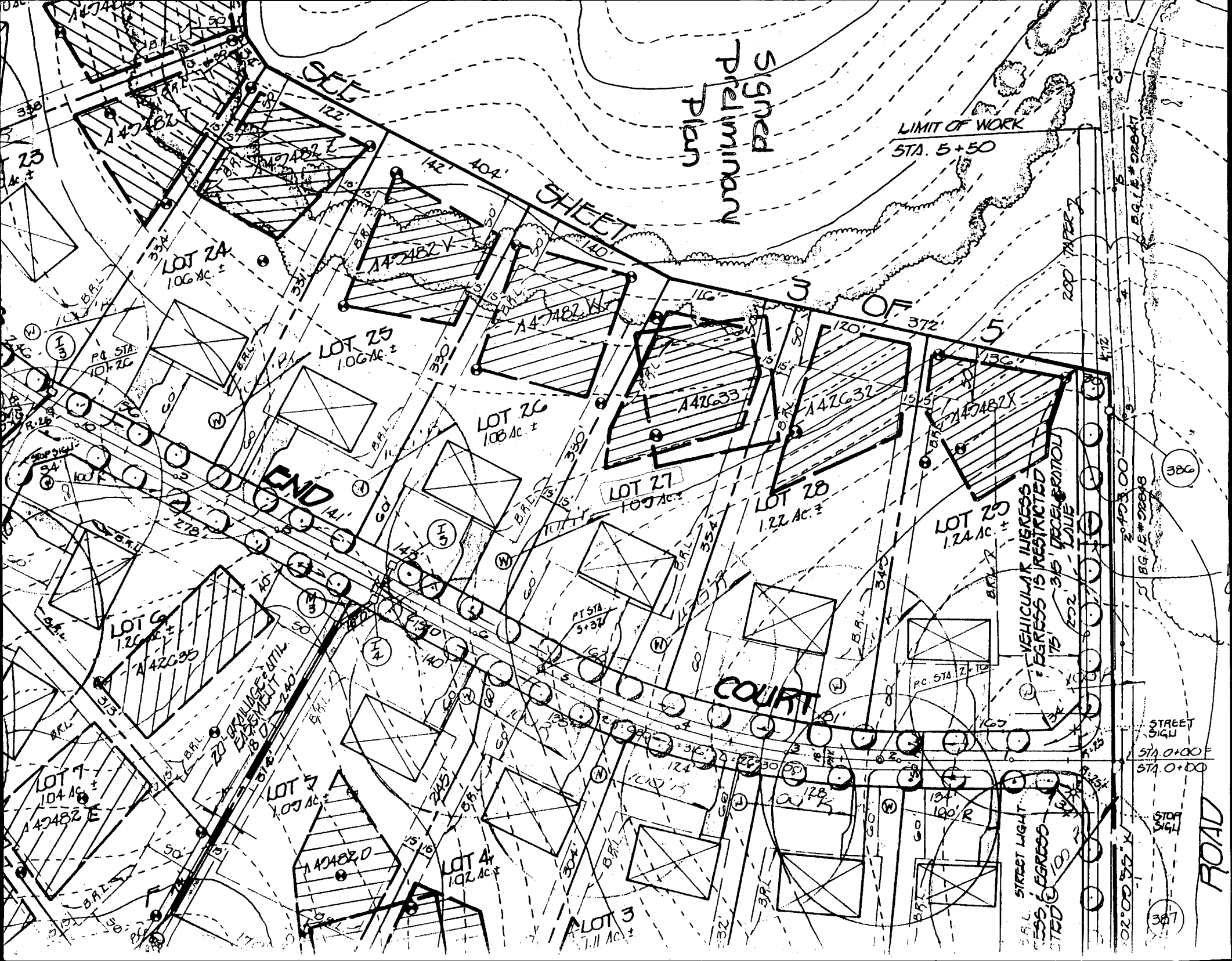
SHEET

3 OF 5

END

COURT

ROAD



23
Ac. ±

LOT 24
106 Ac. ±

LOT 25
106 Ac. ±

LOT 26
108 Ac. ±

LOT 27
109 Ac. ±

LOT 28
122 Ac. ±

LOT 29
124 Ac. ±

LOT 6
120 Ac. ±

LOT 7
104 Ac. ±

LOT 8
109 Ac. ±

LOT 4
102 Ac. ±

LOT 3
111 Ac. ±

STREET
SIGN
STA. 0+00
STA. 0+00

STOP
SIGN

387

386

B.G.I.E. # 20048

B.G.I.E. # 20041

200' WIDE

VEHICULAR INGRESS & EGRESS IS RESTRICTED
75' 3/4' ACCELERATION LANE

B.R.L. STREET LIGHT
LESS EGRESS
STED

02+00 55' X

2+40 3.00

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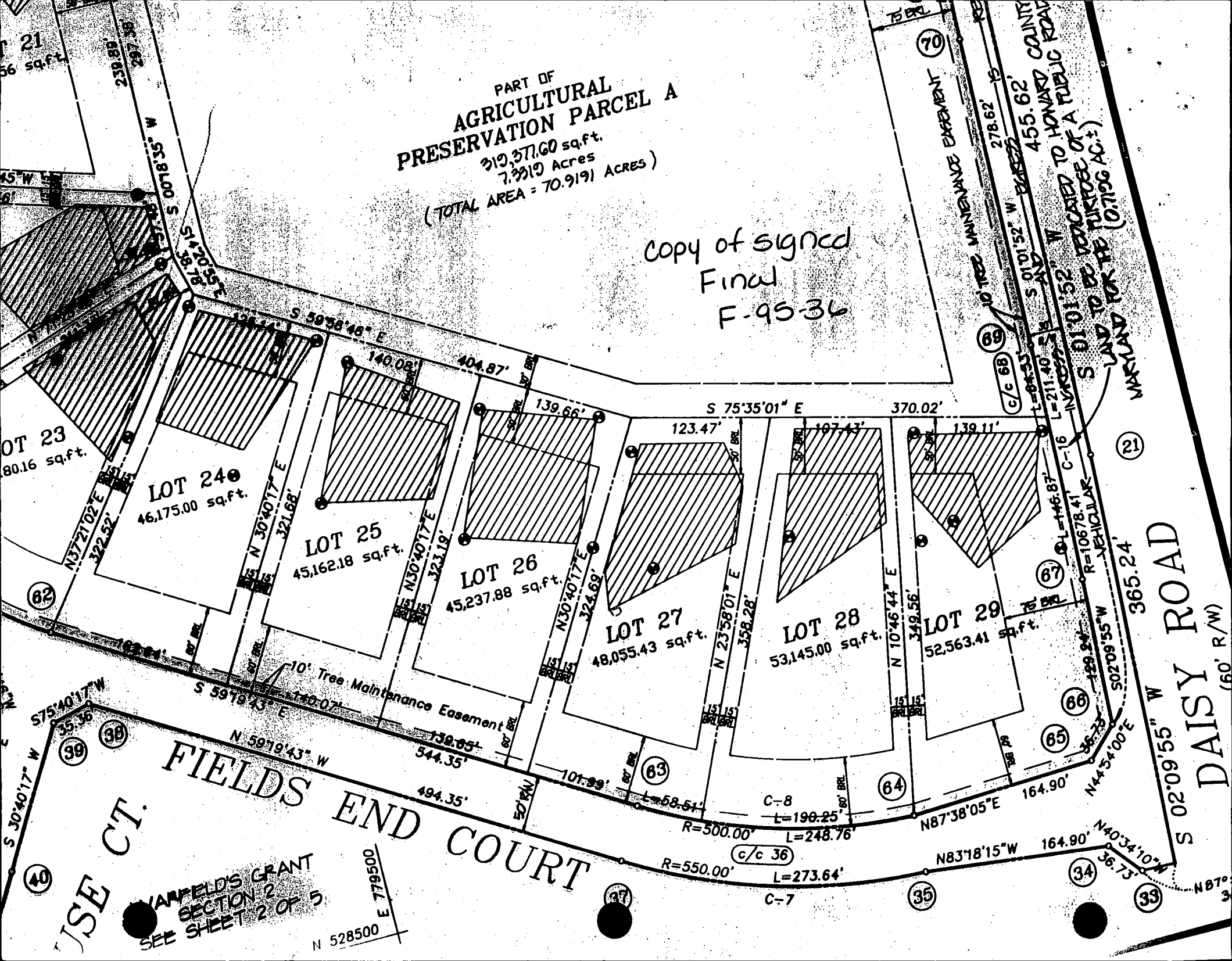
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PART OF
AGRICULTURAL
PRESERVATION PARCEL A

219,571.60 sq.ft.
7.9919 Acres
(TOTAL AREA = 70.919 ACRES)

Copy of signed
Final
F-95-36



JOSE CT.
FIELDS END COURT

DAISY ROAD
(60' R/W)

WARFIELD'S GRANT
SECTION 2
SEE SHEET 2 OF 5

E 779500
N 528500

38

39

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62

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64

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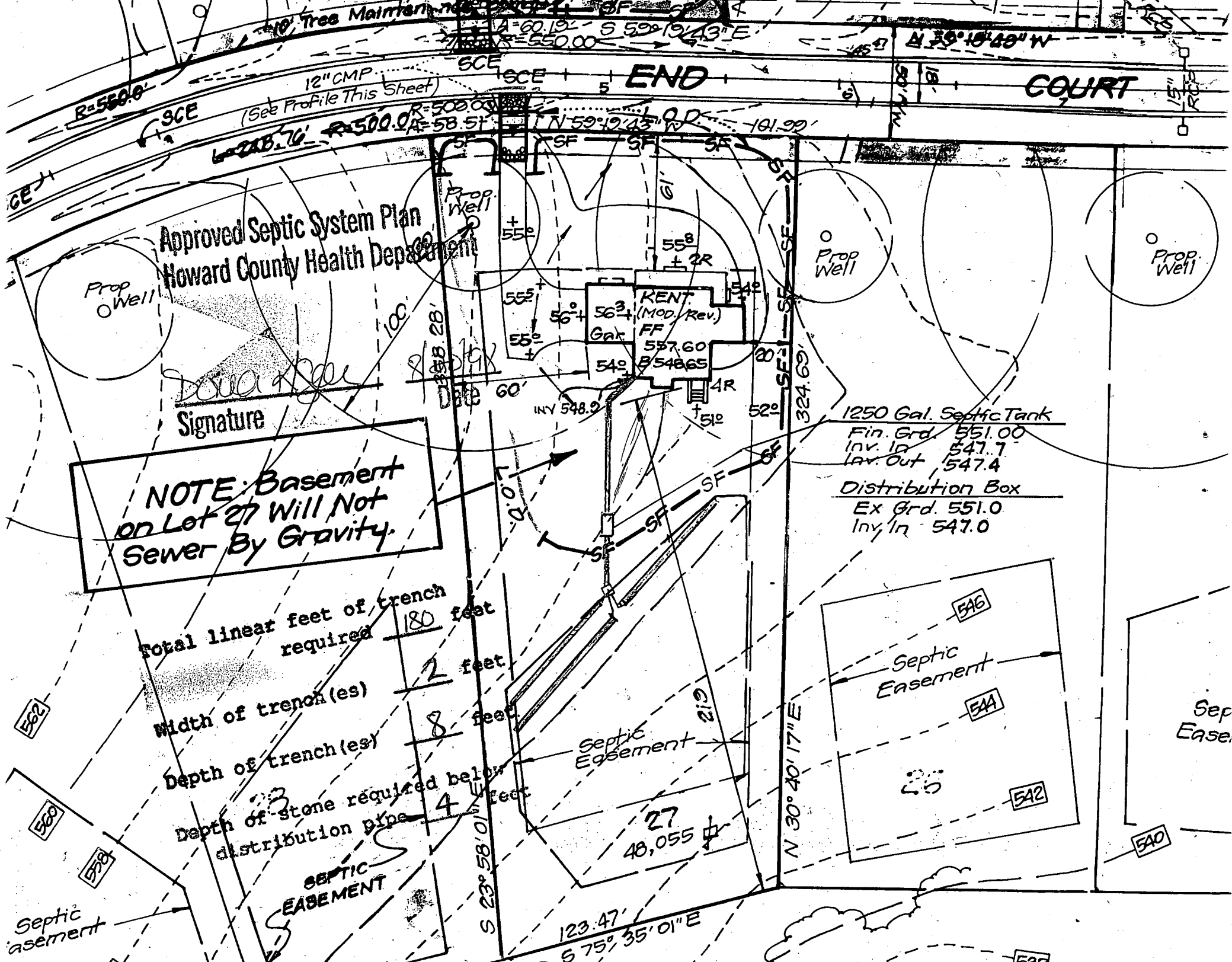
Approved Septic System Plan
 Howard County Health Department

[Signature]
 Signature

NOTE: Basement on Lot 27 Will Not Sewer By Gravity.

Total linear feet of trench required 180 feet
 Width of trench(es) 2 feet
 Depth of trench(es) 8 feet
 Depth of stone required below distribution pipe 4 feet

1250 Gal. Septic Tank
 Fin. Grd. 551.00
 Inv. In 547.7
 Inv. Out 547.4
 Distribution Box
 Ex Grd. 551.0
 Inv. In 547.0



END

COURT

12" CMP (See Profile This Sheet)
 R=550.0
 A=60.19° S 59° 19' 43" E
 S=550.00
 A=39° 10' 43" W

Prop. Well
 552
 558 ± 2R
 555
 563
 56
 55
 54
 557.60
 548.65
 4R
 51
 52
 324.63
 60
 101.92
 123.47
 S 75° 35' 01" E
 N 30° 40' 17" E
 S 23° 58' 01" E
 219
 27
 48,055
 532
 530
 528
 538

C1 05156 SEQUENCE NO. (MDE USE ONLY)
 1 2 3 4 5 6
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3,6 ON ALL CARDS)

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 NUMBER **A42633**

SI/CO USE ONLY
 DATE RECEIVED
 MM DD YY
 8 13

DATE WELL COMPLETED
 MM DD YY
 07 30 98

Depth of Well
 22 185 26
 (TO NEAREST FOOT)

PERMIT NO.
 FROM "PERMIT TO DRILL WELL"
 HO-94-1437
 28 29 30 31 32 33 34 35 36 37

OWNER **Trinity Custom Homes**
 STREET OR RFD **Fields Expd Court** TOWN **Daisy**
 SUBDIVISION **Warfields Grant** SECTION _____ LOT **27**

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	
Top So. L	0	2	
Brown Shale	2	30	
Brown Slate	30	35	
Blue Slate	35	50	
Brown Slate	50	55	
Blue Slate	55	185	

GROUTING RECORD
 WELL HAS BEEN GROUTED (Circle Appropriate Box) YES NO
 TYPE OF GROUTING MATERIAL (Circle one)
 CEMENT BENTONITE CLAY
 NO. OF BAGS **12** NO. OF POUNDS **1200**
 GALLONS OF WATER **72**
 DEPTH OF GROUT SEAL (to nearest foot)
 from **0** ft. to **30** ft.
 48 TOP 52 54 BOTTOM 58 (enter 0 if from surface)

CASING RECORD
 casing types insert appropriate code below
 STEEL CONCRETE
 PLASTIC OTHER

MAIN CASING TYPE
 Nominal diameter top (main) casing (nearest inch!) **6** Total depth of main casing (nearest foot) **45**
 60 61 63 64 66 70

OTHER CASING (if used)
 diameter inch _____ depth (feet) from _____ to _____
 E A C H C A S I N G

SCREEN RECORD
 screen type or open hole
 STEEL BRASS BRONZE PLASTIC
 OPEN HOLE OTHER

NUMBER OF UNSUCCESSFUL WELLS: **0**
 WELL HYDROFRACTURED YES NO

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. **MSD116**
Yash E. Muneer
 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. **MSD112**
Yash E. Muneer

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

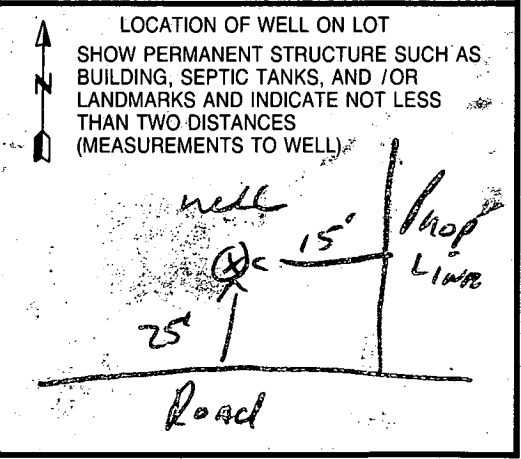
C 2 DEPTH (nearest ft.)
 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100
 HO 43 185

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

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)
 T (E.R.O.S.) W Q
 70 72 74 75 76
 TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3 **PUMPING TEST**
 HOURS PUMPED (nearest hour) **3**
 PUMPING RATE (gal. per min.) **10**
 METHOD USED TO MEASURE PUMPING RATE **Bucket**
 WATER LEVEL (distance from land surface)
 BEFORE PUMPING **52** ft.
 WHEN PUMPING **60** ft.
 TYPE OF PUMP USED (for test)
 air piston turbine
 centrifugal rotary other (describe below)
 jet submersible

PUMP INSTALLED
 DRILLER WILL INSTALL PUMP (CIRCLE) (YES or NO) YES NO
 IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.
 TYPE OF PUMP INSTALLED: _____ PLACE (A,C,J,P,R,S,T,O) IN BOX 29: _____
 CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 35
 PUMP HORSE POWER 37 41
 PUMP COLUMN LENGTH (nearest ft.) 43 47
 CASING HEIGHT (circle appropriate box and enter casing height)
 above } LAND SURFACE
 below } **2** (nearest foot)



B 1 **8747** SEQUENCE NO. (MDE USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
 PERMIT TO DRILL WELL
 please print or type

STATE PERMIT NUMBER
H0-94-1437
 fill in this form completely

Date Received (APA) **021198**
 OWNER INFORMATION
TRIMITY Custom HOMES
 15 Last Name 34 Owner First Name
6212 Devon DR
 38 Street or RFD 55
COLUMBIA **MD 21044**
 57 Town 70 State 72 Zip 76

B 3 LOCATION OF WELL
HOWARD
 8 COUNTY
WARRIERS CROSING
 23 SUBDIVISION 42
 SECTION **2** LOT **27**
 44 46 48 50
DARBY
 52 NEAREST TOWN 71
 MILES FROM TOWN (enter 0 if in town) **1** MI
 73 76 77 78

DRILLER INFORMATION
 CIRCLE: **MSD** MGD/MWD
Ralph Mayne **116**
 77 License No. 80
 Driller's Name
Ralph Mayne Well Drilling
 Firm Name
7120 Snow Church Rd Mt Airy
 Address
North Mayne 2/11/98
 Signature Date

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

 NEAR WHAT ROAD
FIELDS END CT
 11 30
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 WEST EAST
 SOUTH NORTH
 DISTANCE FROM ROAD
50
 34 37
 ENTER FT OR MI **FT**
 38 39
 TAX MAP: **13** BLK: **24** PARCEL **128**

B 2 WELL INFORMATION
 APPROX. PUMPING RATE (GAL. PER MIN.) **5**
 8 12
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **500**
 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)
 HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
 INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
 PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
 TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
Howard **A42633**
 COUNTY NAME COUNTY NO.
 STATE SIGNATURE **Kim Maisto** INSERT S
 DATE ISSUED **2/20/99** EXP. DATE
 43 48 CO-SIGNATURE 41
 NORTH GRID **528000** EAST GRID **0781000**
 50 55 57 63

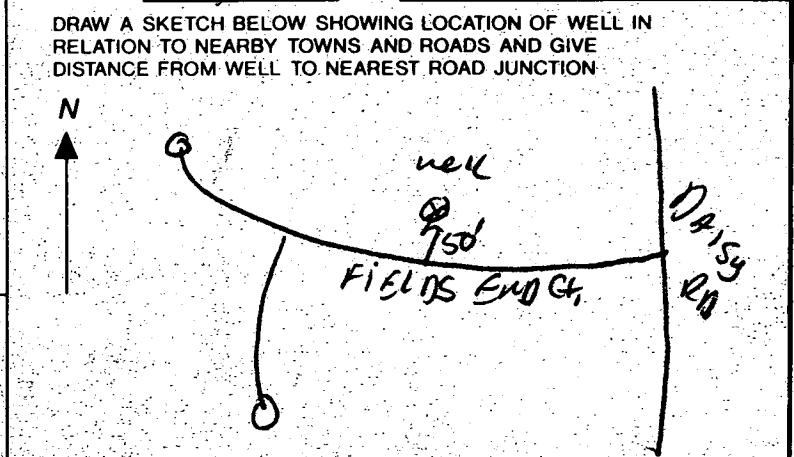
APPROXIMATE DEPTH OF WELL **150** FEET
 24 28

APPROXIMATE DIAMETER OF WELL **6"** NEAREST INCH

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

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 **7801**
 N **5362B**
 000 000
 grant @ 10:00 7-30-98
 45' casing } per
 12 bags } driller
 30' open }
 missed insp

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)
 THIS WELL WILL NOT REPLACE AN EXISTING WELL
 THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
 THIS WELL WILL DEEPEM AN EXISTING WELL
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) _____



Not to be filled in by driller (MDE OR COUNTY USE ONLY)
 APPROX. PERMIT NUMBER: _____ GAP _____
 54 63
 FORCE **AM** WRITE INITIALS IN BOX PERMIT No. **H0-94-1437**
 67 68 70 71 72 73 74 75 76 77 78 79

AGRICULTURAL PRESERVATION PARCEL A

LOT 26

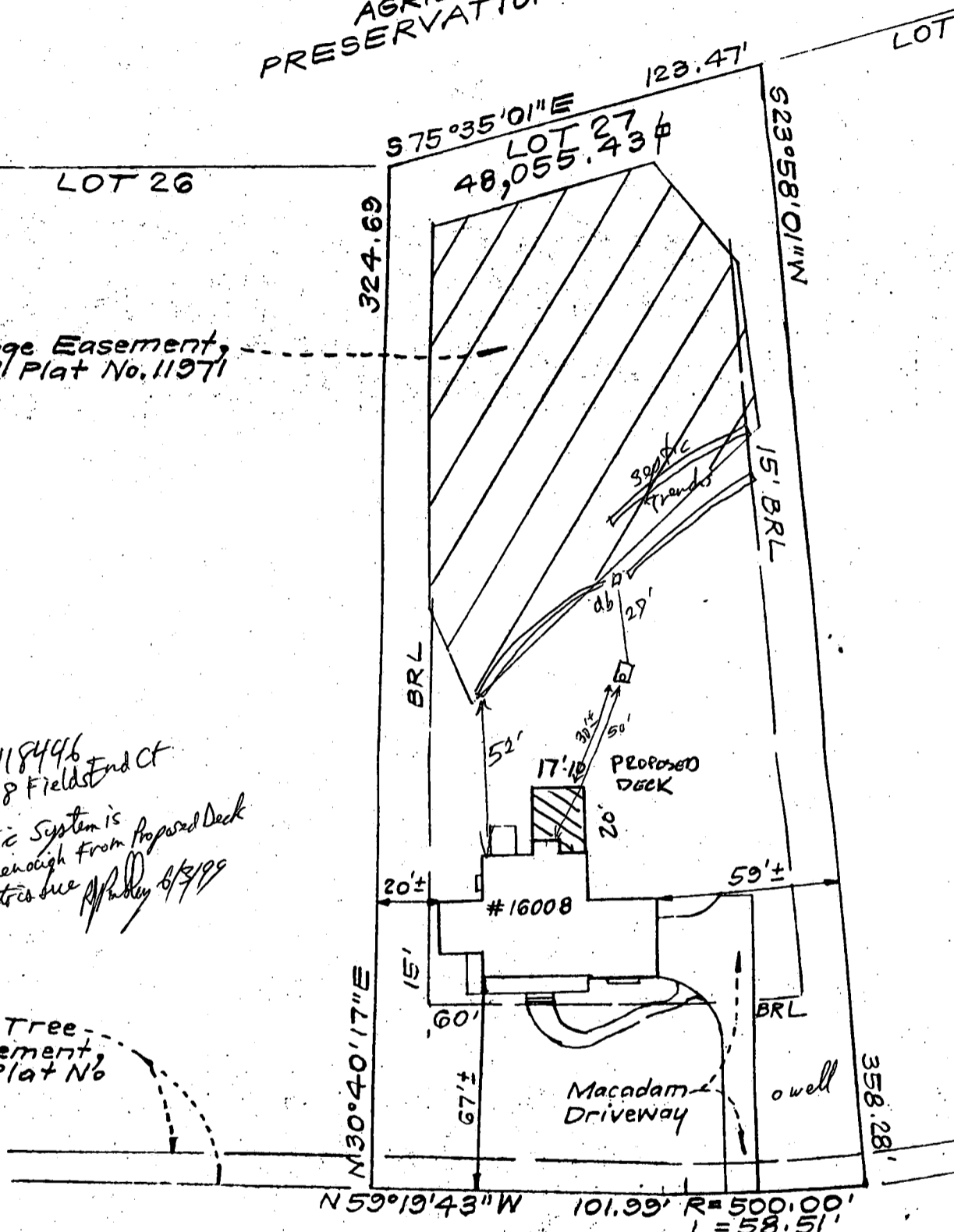
LOT 27
48,055.43 ±

LOT

Private Sewage Easement,
see Note No. 2 Plat No. 11971

B00118446
16008 Field End Ct
septic system is
far enough from Proposed Deck
OK trees see Appendix B/3/99

NOTE: 10' Wide Tree -
Maintenance Easement,
see Note No. 9 Plat No
11971.



FIELDS END

50' R/W

COL

consumer only
lender of a title
nt in connection
ancing or

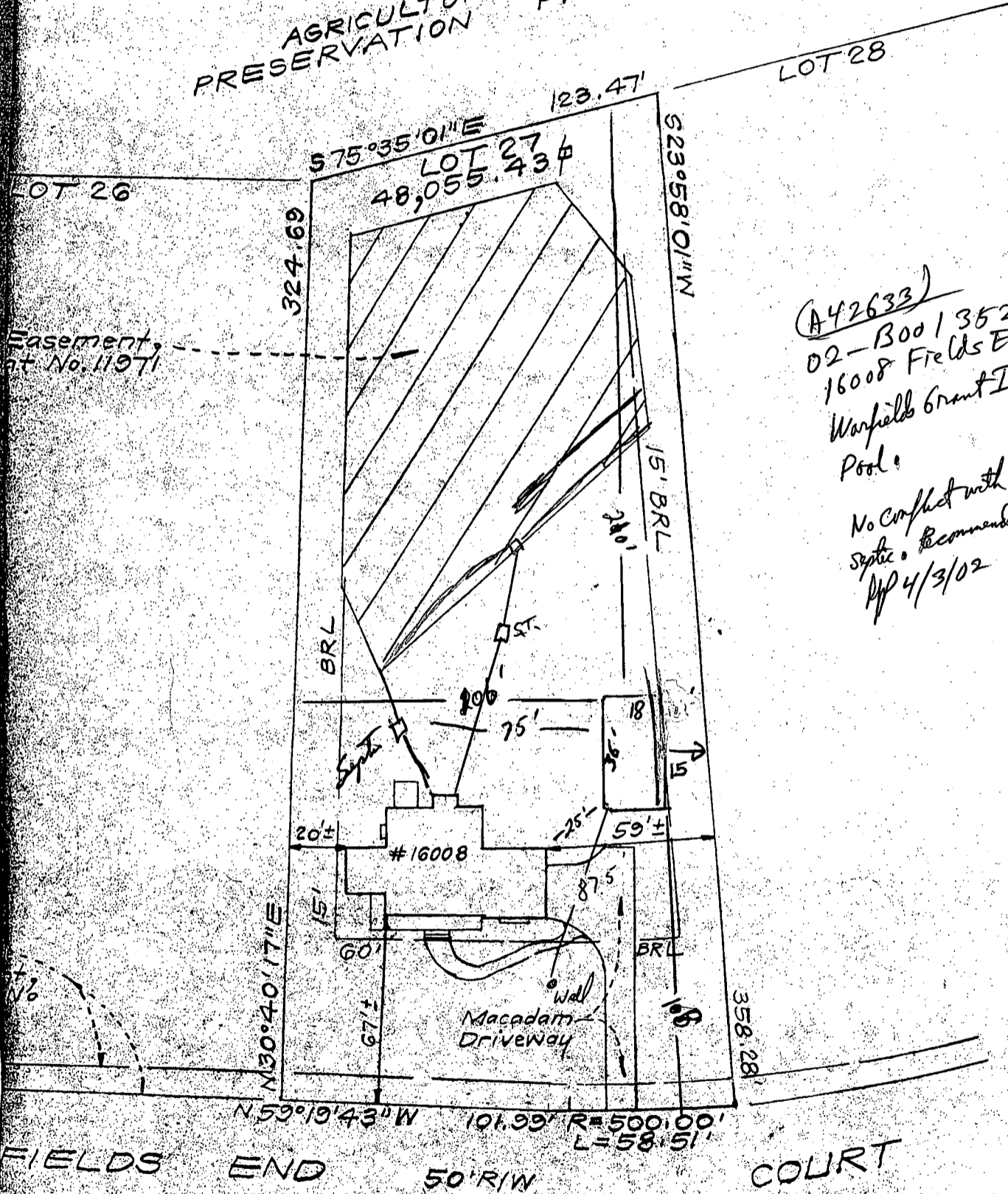
upon for the
ences, garages,
future structures;

the accurate
dary lines, but
required for the
g financing or

TIFICATE

urvey of this property
vision for the purpose

AGRICULTURAL PRESERVATION PARCEL A



(A42633)
 02-30013523/
 16008 Fields End Court
 Warfields Grant II Lot 27
 Pool:
 No Conflict with well &
 septic. Recommend approval.
 App 4/3/02

Scale 1" = 50'

Inground Pool
 18' x 36' Vinyl Pool 31.58'
 Right Side 14'15" Rear 200'
 Left Side 106' Front 108'

Well 87.5'
 Septic 74'
 House 25'

TRI-COUNTY POOLS INC.
 13410 MOSER ROAD
 THURMONT, MD 21788
 (301) 898-3030