12/9/93
C/O 12:00 A
1:30 B
4:00 C

Logged

12/9/93 (2) P. C.O.'s CBA

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

03-289036

P 49779

A 48353

DISTRICT 3rd

DATE 12/3/93

DATE SYSTEM APPROVED 12/9/93

INSPECTOR C.B.A.

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
~~XXXXXXX~~ 313-2640

INDEXED

Fogle's Septic Clean, Inc. IS PERMITTED TO INSTALL X ALTER ____

ADDRESS 558 Obrecht Road, Sykesville, Maryland 21784 PHONE 795-5674

SUBDIVISION Kiser Property LOT ~~XX~~ 2, I ROAD 12720 Triadelphia Road

PROPERTY OWNER Mr. and Mrs. Kip Goans

ADDRESS ____

SEPTIC TANK CAPACITY 1000 GALLONS

NUMBER OF BEDROOMS 3

180 SQUARE FEET PER BEDROOM 108

LINEAR FEET OF TRENCH REQUIRED 180 (?)

TRENCHES - Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 3 feet below original grade. 5 feet of stone below distribution pipe.

LOCATION - Place the distribution box 230 feet from the right (950') lot line and 150 feet from the rear (477') lot line. Run trenches along contour toward right (North) side of property.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK MR @ 12/1/93

PLANS APROVED BY C. Williams/Mark Rifkin REVISED DATE 11/20/93

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)

BLDG. PERMIT SIGNED AND RETURNED 7/12/00
B00125396
DECK W/STEPS

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.

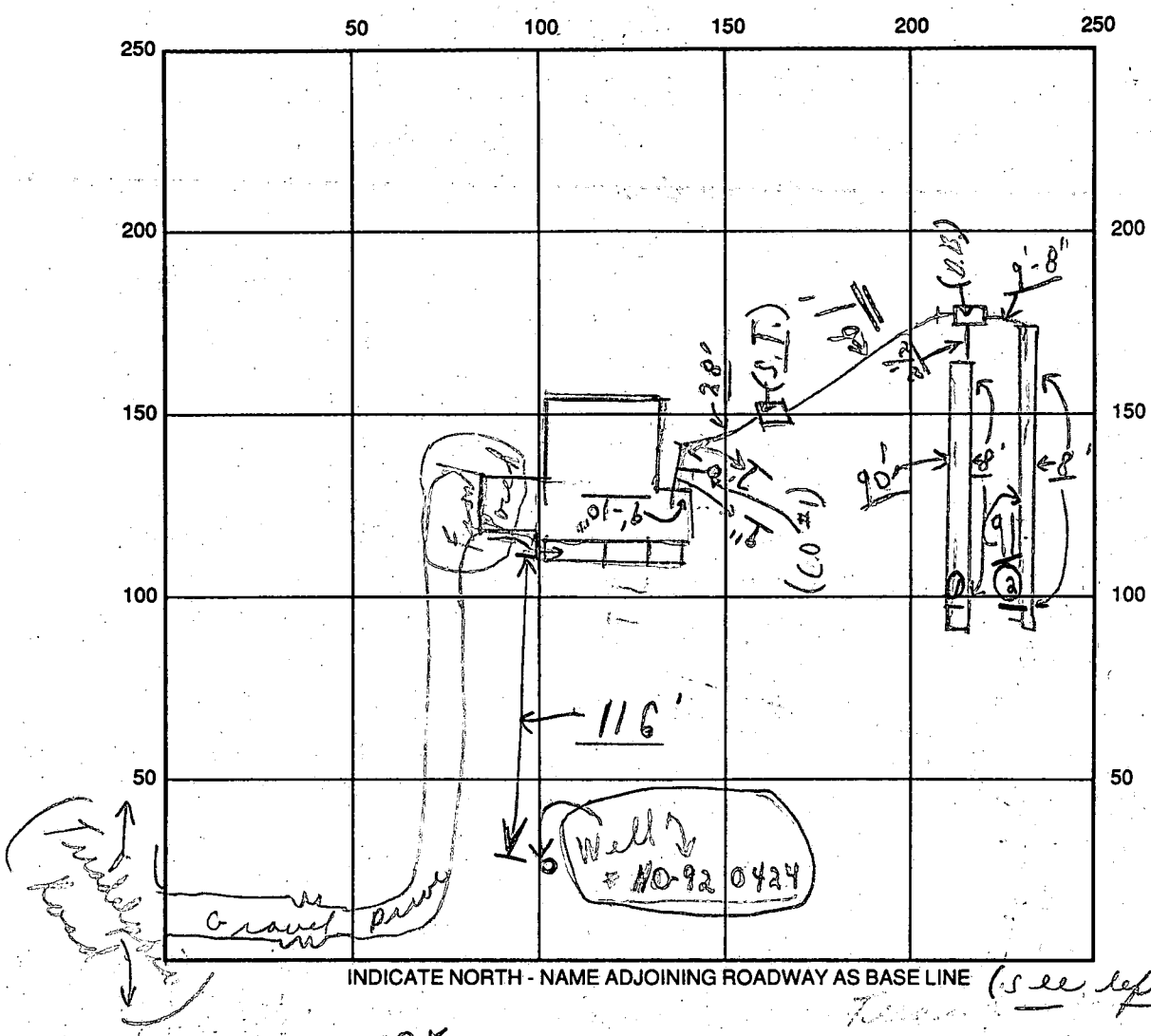
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

***CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.**

HD-260(6-90)

A 48353



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE (see left of drawing for road)

SEPTIC TANK LEVEL OK CLEANOUTS OK / OK

DISTRIBUTION BOX LEVEL OK (Baffle is in) S.T.C.O. / C.O.#1

DRAIN FIELD/TITLE DEPTH 8 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 5 FT. TOTAL LENGTH ① 90' + ② 91' = 181 FT. (180)

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 905+ SQ. FT.

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

ABSORBENT AREA 905+ SQ. FT.

REMARKS: Partial 12/9 A. ok. to cover from house to D. Both ways to ① trench CBS
Partial B. ok. to stone ② trench; 12/9/93 Finish, late pm. CBS
all done, CBS

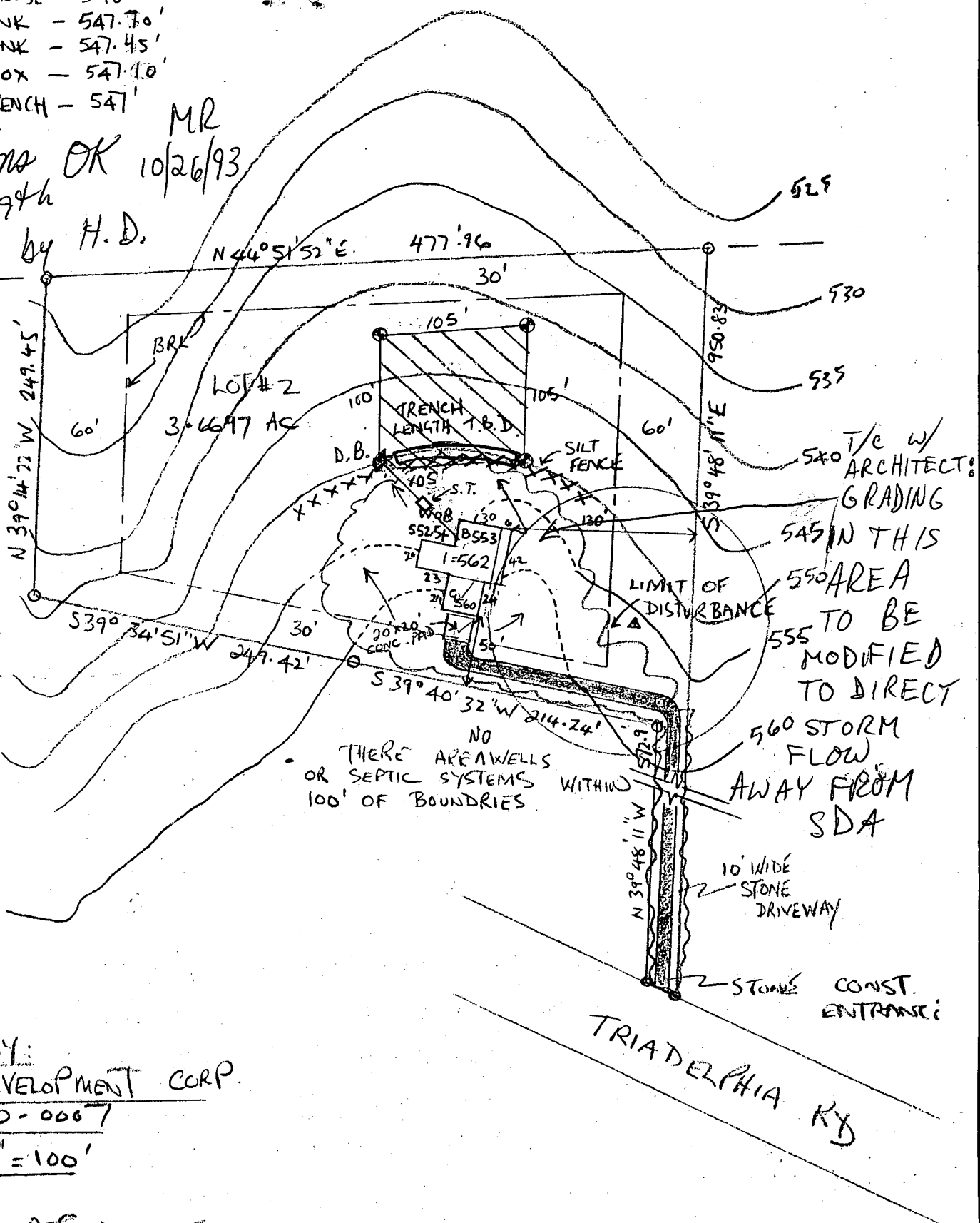
12/9 No W.P.I. CBS

DATE SYSTEM APPROVED 12/9/93 INSPECTOR Charles Bryan Sheeks

SEPTIC INFO:

INVERT FROM HOUSE - 548'
INVERT INTO TANK - 547.70'
INVERT OUT TANK - 547.45'
INVERT INTO BOX - 547.10'
INVERT INTO TRENCH - 547'

elevations OK MR 10/26/93
trench length determined by H.D.



NO THERE ARE WELLS OR SEPTIC SYSTEMS WITHIN 100' OF BOUNDRIES

DRAWN BY:
DAVIES DEVELOPMENT CORP.
1-410-750-0007

SCALE 1" = 100'

GOANS RESIDENCE
12720 TRIADELPHIA RD
ELLICOTT CITY
MD. 21042

LOT #2,
SUBDIVISION OF
KISER PRO
REVISED PARCEL 1
TAX MAP 22 BLOCK 5.

8/4/92
~~10:00~~
9:30

APPLICATION

PERCOLATION TESTING

A 48353

P

DISTRICT 3 RD.

DATE 15 JULY 92

PROVISION OK TO ESTABLISH 10,000 SQ FT SEWAGE EASEMENT (LOT LINE WAS ESTABLISHED CIRCA 1990 W/O SUBDIVISION REVIEW) CW

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

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 TYREE D. + BETTY JO KISER

ADDRESS 12710 TRIADELPHIA ROAD PHONE 410 531-2906

AGENT OR PROSPECTIVE BUYER

ADDRESS PHONE

PROPERTY LOCATION:

~~SUBDIVISION~~ SYCAMORE SPRINGS AREA LOT NO. ORIGINALLY WAS 1990

ROAD AND DESCRIPTION 12710 TRIADELPHIA ROAD — ROLLING ACRES/NON WOODED

LIBER 579/FOLIO 407

TAX MAP 22 BLOCK 5 PARCEL # REVISED PARCEL 1 (NEW DESCRIPTION)

SIZE OF LOT 3.6697 ACRES TYPE BLDG. SINGLE FAMILY DWELLING
(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. Tyree D. Kiser
(SIGNATURE OF APPLICANT)

APPROVED BY FOR DATE

DISAPPROVED BY FOR DATE

HOLD PENDING FURTHER TESTS Hold for Perk Plat Review.

BLDG. PERMIT SIGNED AND RETURNED 10/26/93

REASONS FOR REJECTION OR HOLDING Issued 5/10/94 SFD-3 Bmm

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

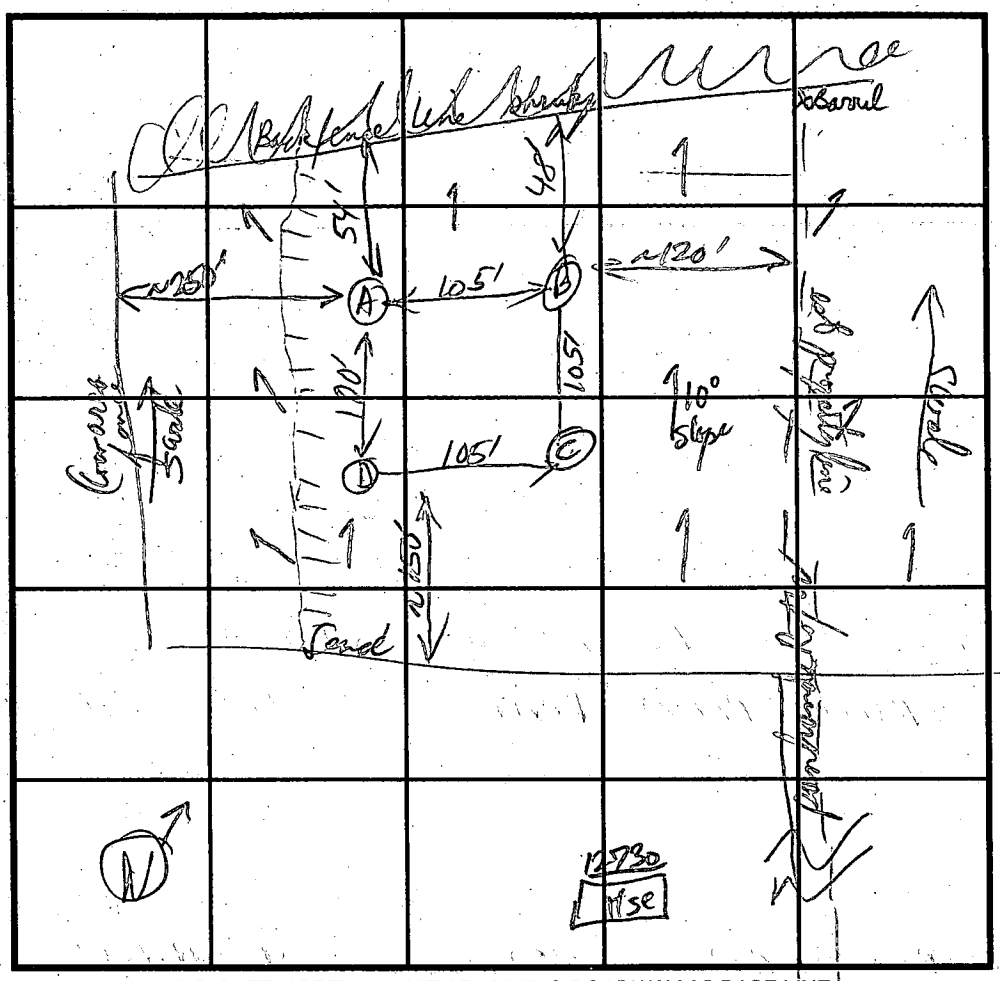
HD-216 (3/92)

A48353
COUNTY #

Hole A SOIL PROFILE
0'
Topsoil Red-Orange CL-hL
2'
yel/red hL-CL & yel Streaks
3'
V. Mica Tan-yel Brn & Dark Brn Mica Pockets in lt Mica Loam
15' V a few lt Red Mica Pockets

Hole C
8" dk yel Brn loam
lt yel/red-Red Brn loam-hLoam
2½'
yel/lt red & Tan Mottled C3D SL Transition
5'
Mix tan & lt Red becomes all tan hSL
14½'

Hole D
8" Brn loam
light yel/Red hL-Red Brn
2'
Yel-yel Red mica loam
3'
Tan (& red/lt Red) lt mica Loam (ESi Texture)
14½'

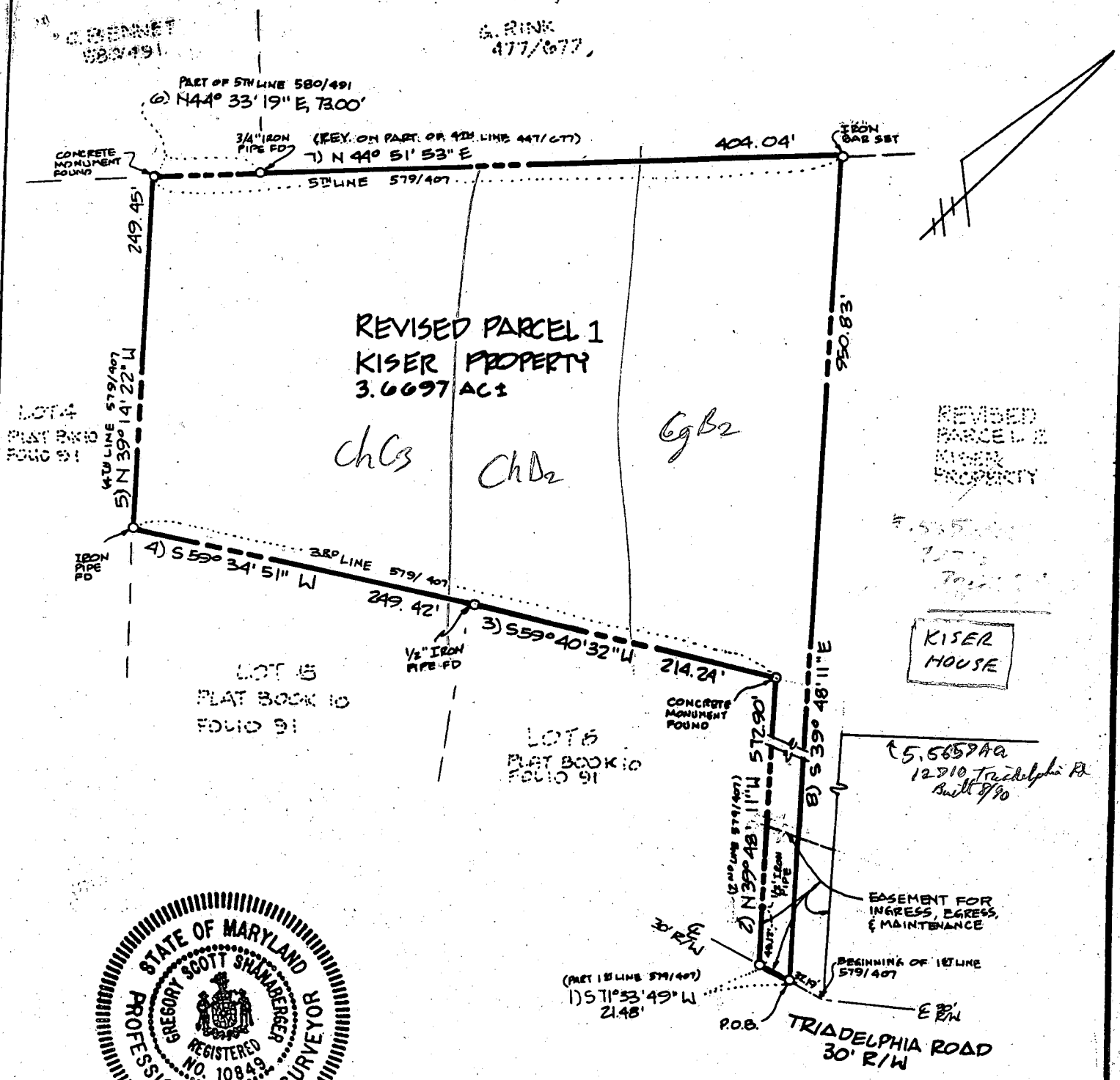


SOIL PROFILE
0'
Red Brn to Red Yel loam-hL
2½'
grey to lt Brn SL v micaceous Str separable thinness & V. Foliated but crumbles V. easily to SL Ls-textured
14½'
Septic Hse
12710

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.
Tuckahoe Rd

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
6/4/92	A	@ 3½'	after 4+" 10:17:34	1018:50	10:18:60	10:20:50	2 min
		@ 9½' ✓15'	After 4+" Mica Loam		10:36:60	10:38:12	2 min
	B	@ 3'	9:53:40 / 9:53:12	9:54:56 / 9:43:41	9:54:56 / 9:43:	Ha @ 58 9:44:29	
		(refilled) 14½'	+ new 5" pre-soak in 6" Mica Loam (Sfractured)		Dein holes		
	C	@ 4'	10:00:13 / 9:50:50	10:02:25 2½ Hr. 1000	10:02:25	10:04:30	2 min
		14½'	Mica Loam				
	D	@ 4'	after 4+" 10:05:59	10:07:35	10:07:35	10:10:34	3 min
		✓ 14½'	Mica Loam				

REMARKS Great Soils w/ tan brn from 3'-15' in all 4 holes —
TYPE OF SOIL Chester (ChDe + ChCa)
TESTED BY RVP ALSO PRESENT Jack Tyrock Don + Karen
TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 2 min TRENCH WIDTH 2
INLET DEPTH 3' MAXIMUM BOTTOM DEPTH 10' SQ. FT/BEDROOM 180



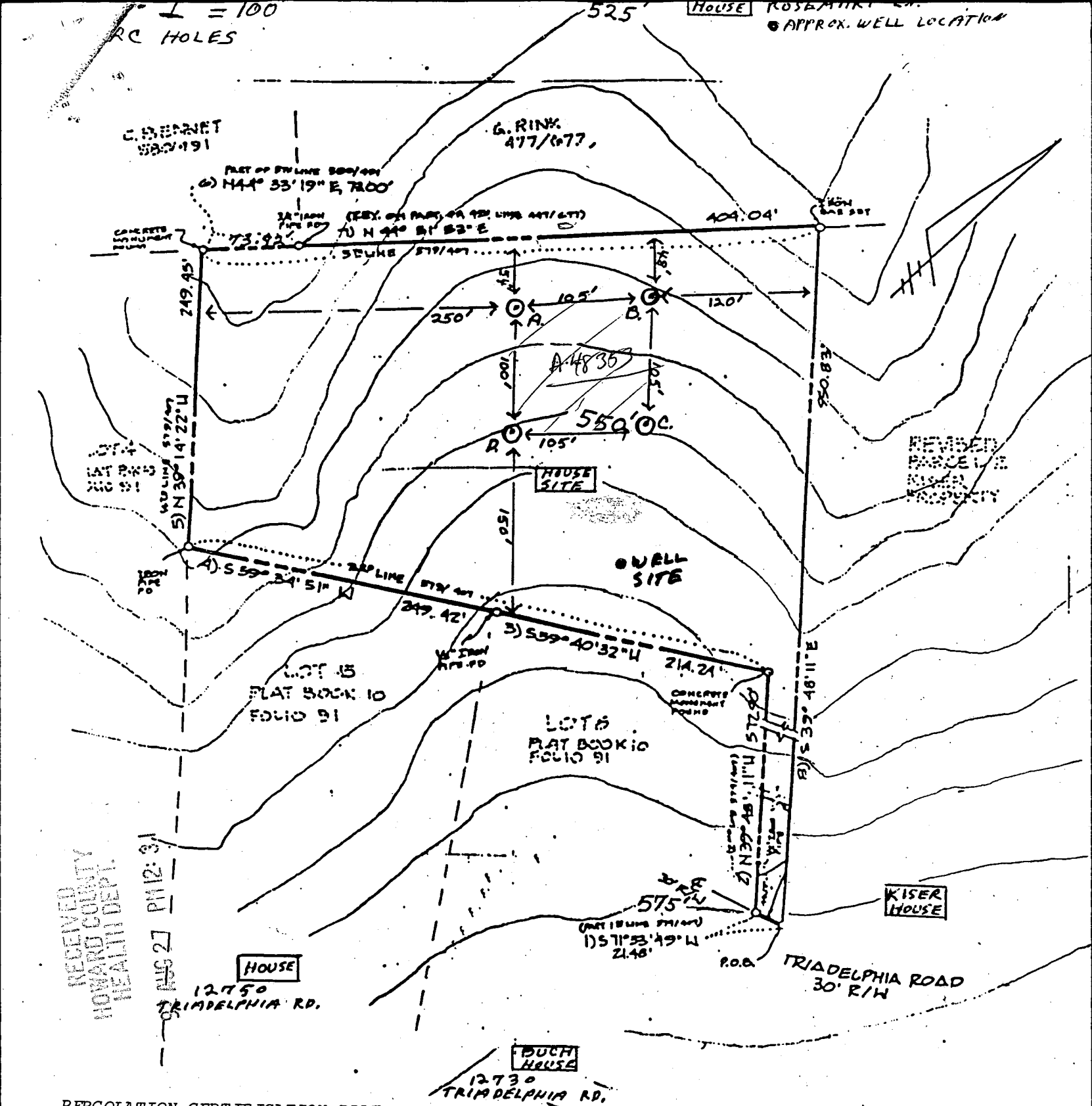
STATE OF MARYLAND
GREGORY SCOTT SHANABERGER
REGISTERED
NO. 10849
PROFESSIONAL LAND SURVEYOR

PLAT TO ACCOMPANY DESCRIPTION OF REVISED PARCEL 1, KISER PROPERTY

DEED REFERENCE: 579/407
COUNTY: HOWARD
ELECTION DISTRICT: 3RD
SCALE: 1"=100' DATE: 06/15/90

SHANABERGER & LANE
8726 TOWN & COUNTRY BLVD.
SUITES 106 & 107
ELLICOTT CITY, MD. 21043
461-9563

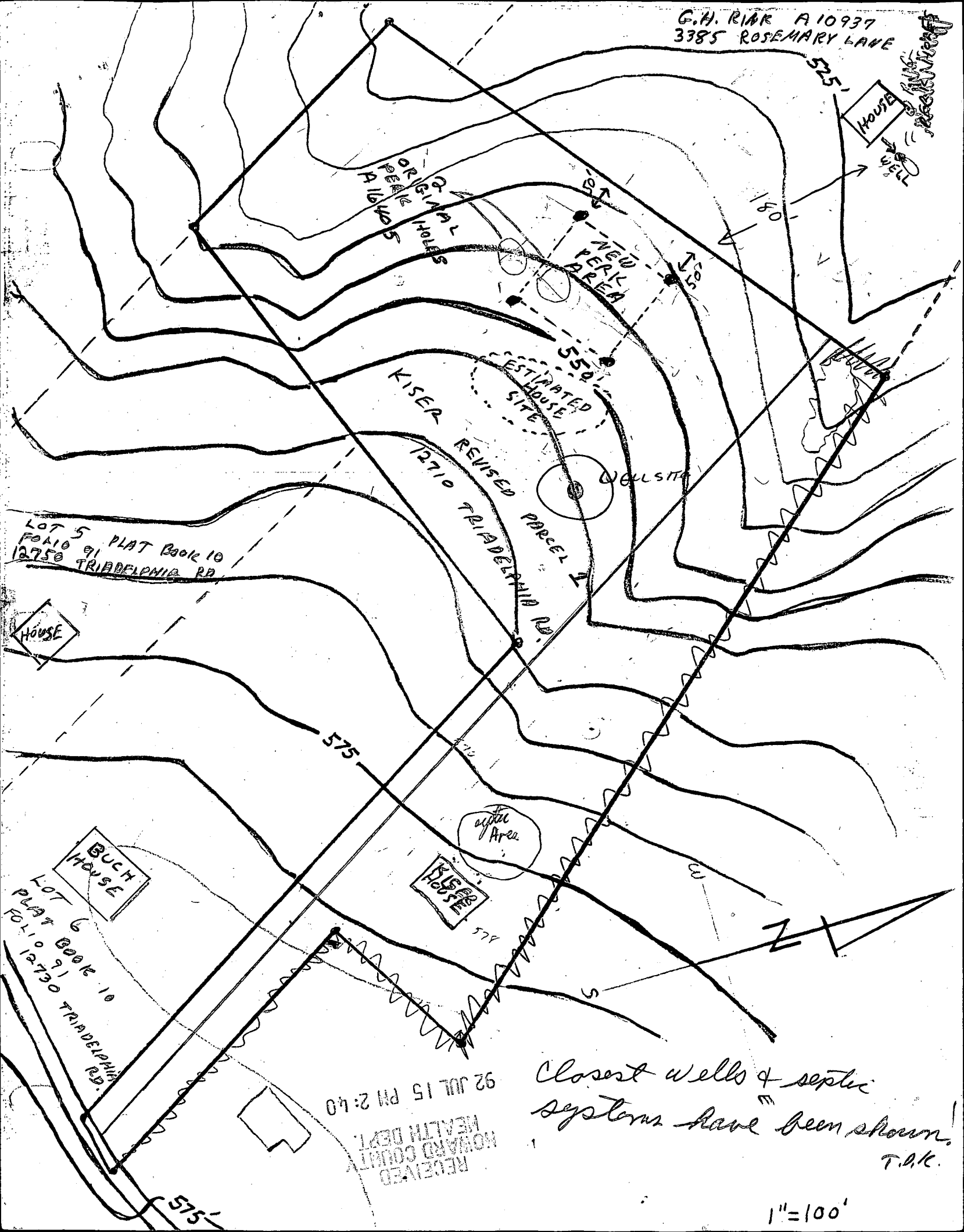
TM 22 P 199
and adjoin TM 22 P 157

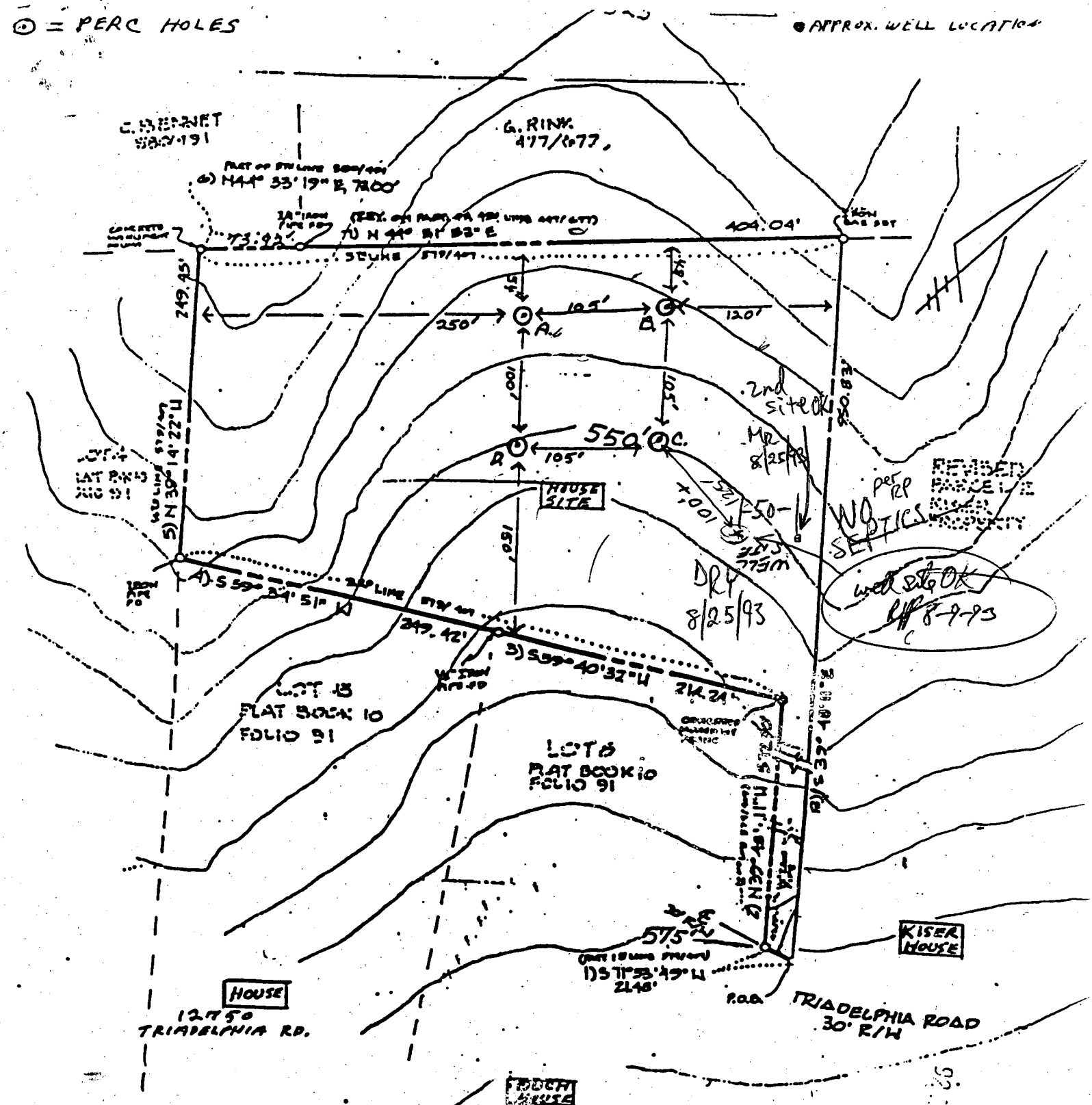


PERCOLATION CERTIFICATION PLAT
APPLICATION # A48353
PROPOSED USE: RECORDED LOT
PROPERTY ID: KISER PROPERTY
REVISED PARCEL 1
TAX MAP 22 - BLOCK 5
(originally lot 199 D)

There are no Wells or septic systems within 100' of boundaries.
Agnes L. Kiser

Joyce M. Boyd MD per F.C.
APPROVED (EW) 8/27/92
Howard County Health Officer


G.H. RIAR A 10937
3385 ROSEMARY LANE
525'
HOUSE
WELL
ORIGINAL PERK AREA 4 HOLES
NEW PERK AREA
180
90
50
550'
ESTIMATED HOUSE SITE
WELL SITE
KISER REVISED PARCEL 1
12710 TRIADELPHIA RD.
LOT 5 PLAT Book 10
FOLIO 91
12750 TRIADELPHIA RD.
HOUSE
575
septic Area
BUCH HOUSE
KISER HOUSE
LOT 6
PLAT Book 10
FOLIO 91
12730 TRIADELPHIA RD.
575'
RECEIVED
HOWARD COUNTY
HEALTH DEPT.
92 JUL 15 PM 2:40
Closest wells & septic systems have been shown!
T.A.K.
1"=100'



PERCOLATION CERTIFICATION PLAT
APPLICATION # A48353
PROPOSED USE: RECORDED LOT
PROPERTY ID: KISER PROPERTY
REVISED PARCEL 1
TAX MAP 22 - BLOCK 5
(originally lot 199 D)

There are No Wells or septic systems within 100' of Boundaries.
Tyree D. Kiser

Joyce M. Boyd MD per F.C.
APPROVED (C.W.) 2/27/92
HOWARD COUNTY HEALTH OFFICER

C 1 | 0478 | SEQUENCE NO. (DENV USE ONLY)
(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 A46353

ST/CO USE ONLY
DATE Received

DATE WELL COMPLETED: 08 27 93

Depth of Well: 170 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL": HO-92-0424

OWNER Goons (last name) Kim (first name)
STREET OR RFD Philadelphia Rd. TOWN Glenda
SUBDIVISION Rice Property SECTION LOT I

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 FROM	FEET TO	Check if water bearing
Top Soil	0	2	
Sandy	2	30	✓
Sand Stone	30	35	
MICKA	35	50	
Shell Stone	50	55	✓
MICKA	55	120	

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 IDENT. NO. 116
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

GROUTING RECORD
WELL HAS BEEN GROUTED (Circle Appropriate Box) yes Y / no N
TYPE OF GROUTING MATERIAL
CEMENT CM BENTONITE CLAY BC
NO. OF BAGS 10 NO. OF POUNDS 1000
GALLONS OF WATER 60
DEPTH OF GROUT SEAL (to nearest foot)
from 0 ft. TOP to 32 ft. BOTTOM
(enter 0 if from surface)

CASING RECORD
casing types insert appropriate code below
ST STEEL, CO CONCRETE, PL PLASTIC, OT OTHER

MAIN CASING TYPE	Nominal diameter top (main) casing (nearest inch)	Total depth of main casing (nearest foot)
PL	6	40

OTHER CASING (if used)

EACH CASING	diameter inch	depth (feet) from	to

SCREEN RECORD
screen type or open hole — insert appropriate code below
ST STEEL, BR BRASS BRONZE, HO OPEN HOLE, PL PLASTIC, OT OTHER

C 2

EACH SCREEN		DEPTH (nearest ft.)	
1	HO	38	120
2			
3			

SLOT SIZE 1 ____ 2 ____ 3 ____
DIAMETER OF SCREEN ____ (NEAREST INCH)

GRAVEL PACK from ____ to ____
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.) W Q
TELESCOPE CASING | LOG INDICATOR | OTHER DATA

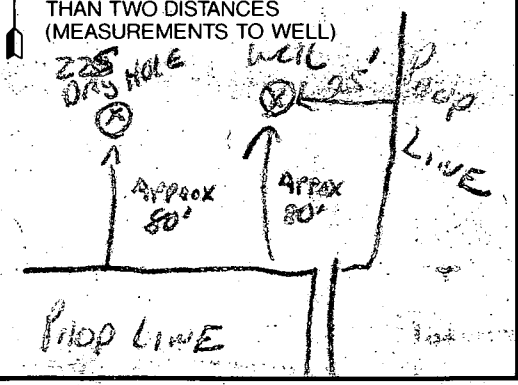
C 3

PUMPING TEST
HOURS PUMPED (nearest hour) 3
PUMPING RATE (gal. per min. to nearest gal.) 10
METHOD USED TO MEASURE PUMPING RATE Bucket
WATER LEVEL (distance from land surface)
BEFORE PUMPING 29
WHEN PUMPING 32

TYPE OF PUMP USED (for test)
A air, P piston, T turbine, C centrifugal, R rotary, O other (describe below), J jet, S 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 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)
+ above / − below 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)



COUNTY

A48353

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVE
ELLICOTT CITY, MD 21043
PERMITS (410)313-2455 INSPECTIONS (410)313-1910
AUTOMATED INFORMATION (410) 313-3800

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER B00125396

Building Address 12720 Tridelphia Rd
Ellicott City MD 21042

Suite/Apt. #: _____ SDP/WP/Petition #: _____

Census Tract 6030 Subdivision Kiser

Section _____ Area _____ Lot 1

Tax Map 22 Parcel 199 Grid 5

Zoning RR Map Coordinates 10C8 Lot size

Property Owner's Name GOANS, KIP and JEAN

Address 12720 Tridelphia Road

City Ellicott City State MD Zip Code 21042

Home Phone 410-531-1314 Work Phone N/A

Applicant's Name & Mailing Address, (if other than stated hereon):

Phone _____ Fax _____

Existing Use Single Family Dwelling

Proposed Use SFD w/ Bay Deck in Front

Estimated Construction Cost $ 3000

Description of Work Install 8'8" x 15'x12' Deck w/Steps

Contractor Company Matjesdan Inc

Contact Person Tom Roscioag

Address 12755 Tridelphia RD

City Ellicott City State MD Zip Code 21042

License No. 107288

Phone 410-988-9792 Fax N/A

Occupant or Tenant OWNER

Contact Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Engineer or Architect Company Contractor

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

BUILDING DESCRIPTION - *COMMERCIAL*

Building Characteristics

Height:

No. of stories:

Gross area, sq. ft. per floor:

Use group:

Construction type:
____ Reinforced Concrete
____ Structural Steel
____ Masonry
____ Wood Frame

____ State Certified Modular

Utilities

Water Supply:
____ Public
____ Private

Sewage Disposal:
____ Public
____ Private

Electric Yes ☐ No ☐
Gas Yes ☐ No ☐

Heating System:
Electric ☐ Oil ☐
Natural Gas ☐
Propane Gas ☐

Sprinkler system: N/A ☐
____ Full
____ Partial
____ Other Suppression
____ # of Heads

BUILDING DESCRIPTION - *RESIDENTIAL*

Building Characteristics

SF Dwelling ☑ SF Townhouse ☐

	Depth	Width
1st floor:		
2nd floor:		
Basement:		

Finished Basement ☐ Unfinished Basement ☑
Crawl space ☐ Slab on Grade ☐
No. of Bedrooms _____

Multi-family dwellings:
No. of efficiency units: _____
No. of 1 BR units: _____
No. of 2 BR units: _____
No. of 3 BR units: _____

Other Structure: _____
Dimensions: _____
Footings: _____
Roof: _____

____ State Certified Modular
____ Manufactured Home

Utilities

Water Supply:
____ Public
✓ Private

Sewage Disposal:
____ Public
✓ Private

Electric Yes ☑ No ☐
Gas Yes ☐ No ☑

Heating System:
Electric ☑ Oil ☐
Natural Gas ☐
Propane Gas ☐

Sprinkler system: N/A ☑
____ NFPA #13D
____ NFPA #13R
____ Other:

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Thomas E. J. Roscioag — *Applicant's Signature*

Tom — *Title/Company*

Thomas E. Roscioag, Matjesdan Inc — *Print Name*

7/12/00 — *Date*

Checks payable to: *DIRECTOR OF FINANCE OF HOWARD COUNTY*
** PLEASE WRITE NEATLY AND LEGIBLY. **
- FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official	7/12/00	
Dev. Engineering, DPZ		
Health	7/12/00	Mark Kaplan
Fire Protection		

Is Sediment Control approval required prior to issuance?
YES ☐ NO ☐

CONTINGENCY CONSTRUCTION START: ☐
ONE STOP SHOP: ☐

DPZ SETBACK INFORMATION

Front: _____
Rear: _____
Side: _____
Side St.: _____
All minimum setbacks met?
YES ☐ NO ☐
Is Entrance Permit required?
YES ☐ NO ☐
Historic District?
YES ☐ NO ☐
Lot Coverage for NewTown Zone _____
SDP/Red-line approval date _____ Accepted by _____

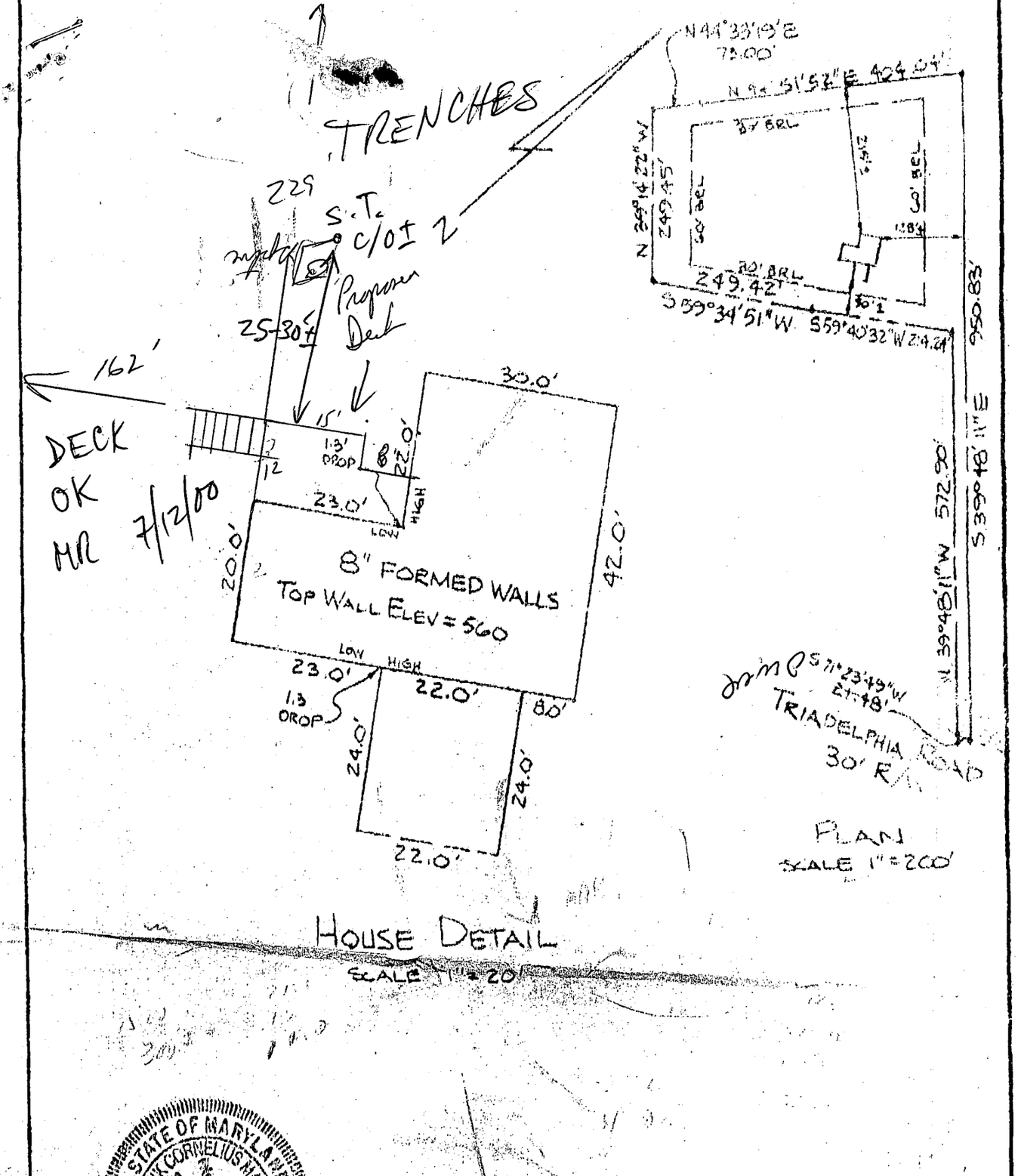
PROPERTY ID#: 2497

Filing fee	$ _____
Permit fee	$ 30
Excise tax	$ _____
Sub-total paid	$ _____
Add'l permit fee	$ _____
TOTAL FEES	$ 30
Balance due	$ _____
Check	# 6171
Validation	# _____

Distribution of Copies- White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA

a:\permit.fm

Rev. 10/15/98



STATE OF MARYLAND
ERIK CORNELIUS MARKS
No. 607
REGISTERED
PROPERTY LINE SURVEYOR

I hereby certify that a site inspection (based upon field observations and surveys as necessary) was made under my direction on _____. To the best of my knowledge, information and belief, at this lot has been final graded in compliance with the approved Site Development Plan or, if none, the approved Erosion and Sediment Control Plan and Grading Plan. In addition to general compliance with the applicable, this inspection was made with the following items being checked for compliance with Section 3.101, Subsection 3008.3 of the Howard County Code, as a minimum:

a. Drainage Courses-correct direction of flow; (if applicable) located within drainage easements; constructed with a positive and uniform grade, and

b. Lot Grading-positive drainage away from the structure; fine graded with no local low spots.

FLOOD CERTIFICATION

SUBJECT PROPERTY IS, SHOWN / IN ZONE C / AS SHOWN ON THE FLOOD INSURANCE RATE MAP OF HOWARD COUNTY, PANEL 160

COMMUNITY PANEL 240044 0016 B

EFFECTIVE DATE DECEMBER 4, 1980

This plat is not intended to be used for the purpose of establishing property lines or points and was prepared without the benefit of a title report.

RECORD REFERENCES

LIBER/FOLIO 579

PLAT BOOK _____

PLAT NO./FOLIO 407

SCALE As Shown

DATE Nov. 18, 1993

LOCATION SURVEY of WALL CHECK

12720 TRIADELPHIA ROAD

HOWARD COUNTY, MARYLAND

MARKS-VOGEL ASSOCIATES, INC.

CONSULTING ENGINEERS-SURVEYORS-PLANNERS

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I HEREBY CERTIFY THAT THE IMPROVEMENTS ARE LOCATED AS SHOWN HEREON AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THERE ARE NO ENCROACHMENTS EXCEPT AS SHOWN.

ERIK C. MARKS R.P.L.S. # 607