P	41	<u>0/</u>	<u> </u>
	250		

HOWARD COUNTY BUREAU OF ENVIRONMENTAL HEALTH

461-9933

" INDEXED 05-405793

MARYLAND STATE DEPARTMENT OF HEALTH'

DATE SYSTEM APPROVED

INSPECTOR

			f	
Andy Snow	· · · · · · · · · · · · · · · · · · ·	IS PERMITTED TO II	NSTALL X	ALTER
ADDRESS		PHONE	854	4/90
SUBDIVISION <u>Waterford</u>	ROAD <u>13213</u> W	estmeath Court	LOT6	Section 3
PROPERTY OWNER	Polaris Developmen	Pete Cam	ipis i	
ADDRESS			- · · · · · · · · · · · · · · · · · · ·	<u> </u>
F GARBAGE GRINDER IS USED INCREASE SEPTIC TA			22%.	. C.C. Far
GARBAGE GRINDER? YES X NO	OK - DISTOSAL ELIMATED	BY BUILDEN 2/22/186	w. Com	and Ma
SEPTIC TANK CAPACITY 2000 GALLONS	NUMBER OF BEDROOM	ns 15		
TRENCHES - 220 sq. ft. per bedroom	n with garbage dis	posal. Trench t	to be 3.0 fe	eet wide.
Inlet 3.5 feet below or grade. Effective area	riginal grade. Bo	ttom maximum de	oth 5.0 feet	below origi
stone below distribution				
LOCATION - Place the distribution				
off the same lot line a trenches on contour tow				nne. Run
NOTE - No trench to exceed 100 cap to grade or above of	_	λ ·	' diameter o	cleanout and
· · · · · · · · · · · · · · · · · · ·	-			
PLANS APPROVED BY	lbe1		DATE4/(02/87
COVER NO WORK UNTIL INSPECTED AND APPROVED.				
NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEP	ARTMENT IS RESPONSIBLE FOR T	HE 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 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 40 PVC OR ABS

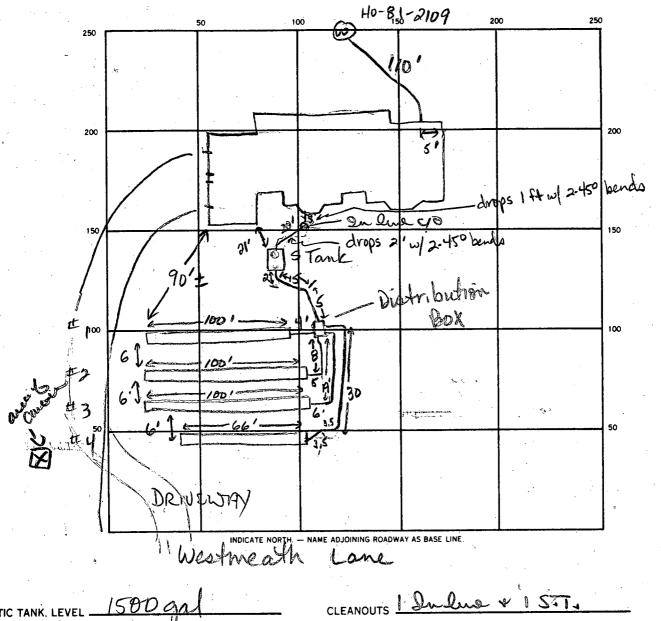
PERMIT VOID AFTER TWO YEARS.

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.

BEDG. PERMIT SIGNET



SEPTIC TANK LEVEL 1500 gal CLEANOUTS 1 Inlus 4 1 STT.
DISTRIBUTION BOX, LEVEL 6/2 W/ baffla U2019
DRAIN FIELD/TILE FIELD, DEPTH 5 5 5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 5 3.5 3.5 3.5 FT.
NUMBER OF TRENCHES ONE SIDEWALL BOTTOM AREA 300 301 300 198 SQ FT.
NUMBER OF TRENCHES ONE SIDEWALLUBOTTOM AREA SUF TO SO FT.
DRYWELL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.
ABSORBENT AREA 1098 SQ. FT.
REMARKS 2-26-89 OK to coverall trenches. House must be connected
to septic tank, ok to cover all work lower than septie
tank, call for house connection. Add cleanout to septie tank,
JEN 3-10-88 Still needs alo & connection once brick work has been completed JEN.
3/31/88 C/018 & hours connection OK'd, OK to eaver line from
Loude to bank 4.4-88 steep slope from house to tank JEN 4-11-88 OKto cover JE
DATE SYSTEM APPROVED 3/31/88 4-11-88 INSPECTOR BN W/OW / JENadeau

it The below checked "items completed

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

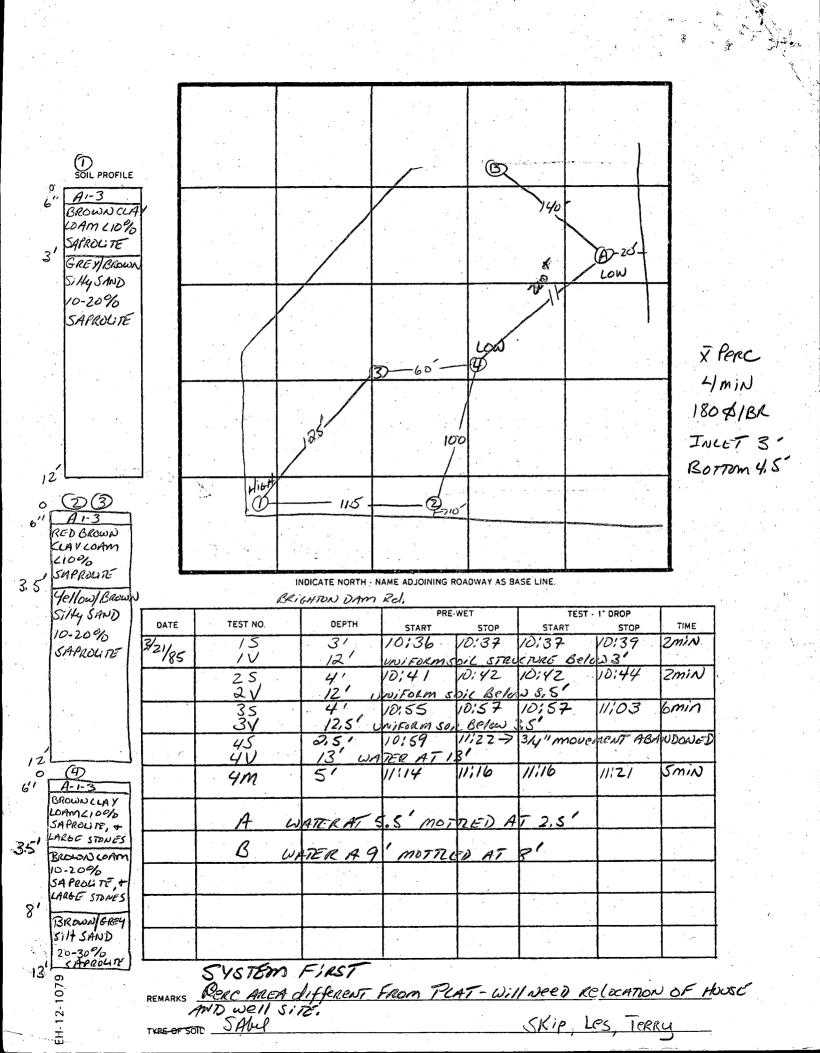
HOWARD COUNTY HEALTH DEPARTMENT **ENVIRONMENTAL HEALTH SERVICES**

P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043

TELEPHONE: 992-2330

TO	THE COUNTY HEALTH OFFICER				
i , 10.	ELLICOTT CITY, MARYLAND				
4	I, HEREBY, APPLY FOR THE NECESSA	ARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOS	AL SYSTEM	oment
PROPE	ERTY OWNER TETAL Int	ernational, % Mr	s. Gabriela M. A	Troyo Polypis	,0 r
	ADDRESS 1310 Eightee	enth St., N.W., Wash	ington, D.C., 20036 PHON	202-457-0727	And the same of th
PROPE	ERTY LOCATION: WATEN FOXE IVISION HUNTINGTON E	Section 3	2 LOT NO	X 2076	
	_		1 Dam Road appr	oximately 3400	
f	eet west of To	en Oaks Road	13213 Westmen	in ct	
VSIZE O	of LOT 3 acres		TYPE BLDG.	Residence (NUMBER OF BEDROOM	<u></u>
THE S	SYSTEM INSTALLED UNDER THIS	APPLICATION IS ACCEPTABLE OF	NLY UNTIL PUBLIC FACILITIES BE	COME AVAILABLE. I FULLY UNDER	STAND THE
FEE (CONNECTED WITH THE FILING OF	THIS PERC TEST APPLICATION	S NON-REFUNDABLE UNDER ANY	CIRCUMSTANCES. I ALSO AGREE 1	ro comply
WITH	ALL M.O.S.H.A. REQUIREMENTS	IN TESTING THIS LOT	SIGNATURE (OF APPLICANT)	 -:
APPRO	OVED BY Sichuy alex	<u>) </u>		ald DATE 4-2-87	e in inches
REJEC	TED BY	<u> </u>	OR	DATE	
HOLD	PENDING FURTHER TESTS			OATE	· · · · · · · · · · · · · · · · · · ·
REASO	ONS FOR REJECTION OR HOLDING	7-21-85 Peac Res	ULTS SATISFACTORY.	HOLD FOR CERTIFIE	5h HOLE
la	CATION, HOUSE AN	D WELL SITE, N	eed Redesign OF	HOUSE AND WELLS! TO	-
SI	VSTEM FIRST	and the second of the second of the second	and the first of the second control of the s	BLDG. PERMIT SIG	NPD
				AND RETURNED	11/23/87

THIS IS NOT A PERMI



ACKNOWLEDGMENT DATE CONTROLS BUREAU OF ENVIRONMENTAL HEALTH RECORD OF INVESTIGATION LOCATION 13213 WAS TIMED THE CL. CONTROLS LOCATION 13213 WAS TIMED THE CL. COMPLAINANT ADDRESS WATUFOND SPECIAL SYSTEM. COMPLAINANT ADDRESS PHONE REASON FOR INVESTIGATION SETTLING STATEM. CODES RECEIVED BY OATE ASSIGNED TO DATE DATE STATEM SETTLING STATEM WEATHER REPORT WIS SUFFICE SYSTEM. SUPPLY SETTLING STATEM SETTLING GENERALLY			AREA_	RATIN	G
BUREAU OF ENVIRONMENTAL HEALTH RECORD OF INVESTIGATION LOCATION 13213 Westmeath C.f. OWNER D OCCUPANT D ADDRESS WATUFOLD Sec. 3 PHONE COMPLAINANT ADDRESS PHONE REASON FOR INVESTIGATION STORLING 2+ NAME SEPTIC SISTEM. CODES RECEIVED BY: DATE ASSIGNED TO DATE DATE DATE OF INVESTIGATION 1-24-89 TIME 3: 30 PM WEATHER REPORT - Wisual Trisp Showed Setting GEVILLING AT ON OPPOSIT	ACKNOWLEDGMENT DATE	Howard Coun	ty Department of Health	DISPOSITIO	N DAT
LOCATION 13213 WOSTMOOTH CY. OWNER D OCCUPANT D ADDRESS WATUFOND Sec. 3 PHONE COMPLAINANT ADDRESS WATUFOND Sec. 3 PHONE REASON FOR INVESTIGATION SITTLING 2+ NEAR SPATI SISTEM. CODES RECEIVED BY DATE ASSIGNED TO DATE DATE DATE OF INVESTIGATION 1-24-89 TIME 3:30 PM WEATHER REPORT SPORT TIME 3:30 PM WEATHER SPORT TIME 3:30 PM WEATHER SPORT TO SECURITY SECURITY OF SPORTS TO SECURITY SECUR	CONTROLS				- DATE
ADDRESS WATGOND Sec. 3 PHONE COMPLAINANT ADDRESS PHONE REASON FOR INVESTIGATION SITTLING Q+ NEAR SPAN SPAN SYSTEM. CODES RECEIVED BY DATE ASSIGNED TO DATE DATE OF INVESTIGATION 4-24-89 TIME 3:30 PM WEATHER REPORT - VISUAL TRSP. SHOWED SETTLING BELIARING AT ON OPPOSITE SDP OF DAILBURY FROM PWD OF SOPTIC THEWOLKS - (QUSD) IS NOT		RECORD	OF INVESTIGATION		
ADDRESS WATGOND Sec. 3 PHONE COMPLAINANT ADDRESS PHONE REASON FOR INVESTIGATION SITTLING Q + NEAR SPAN SPAN SYSTEM. CODES RECEIVED BY DATE ASSIGNED TO DATE DATE OF INVESTIGATION 4-24-89 TIME 3:30 PM WEATHER REPORT - NEON SETTLING BELLANDS FOR ON OPPOSITE SDE OF DAILBURY FROM PWD OF SOPER THEWOLKS - (QUSD) IS NOT					
ADDRESS WATGOND Sec. 3 PHONE COMPLAINANT ADDRESS PHONE REASON FOR INVESTIGATION SITTLING Q+ NEAR SPAN SPAN SYSTEM. CODES RECEIVED BY DATE ASSIGNED TO DATE DATE OF INVESTIGATION 4-24-89 TIME 3:30 PM WEATHER REPORT - VISUAL TRSP. SHOWED SETTLING BELIARING AT ON OPPOSITE SDP OF DAILBURY FROM PWD OF SOPTIC THEWOLKS - (QUSD) IS NOT					
ADDRESS WATUFORD Sec. 3 PHONE COMPLAINANT ADDRESS PHONE REASON FOR INVESTIGATION SETTLING 2+ NEAR SOPTIC SISTEM. CODES RECEIVED BY DATE ASSIGNED TO DATE DATE OF INVESTIGATION 4-24-89 TIME 3:30 PM WEATHER REPORT - VISUAL TOSP SHOWED SETTLING BEUNING AT ON OPPOSITE SIDE OF DIVIEWBY FROM PAID OF SOPTIC TREWCHES - (QUSE) IS NOT					
CODES	OCCUPANT D	ADDRE	ss watuford Sec.	3 PHONE	
RECEIVED BY DATE ASSIGNED TO DATE DATE OF INVESTIGATION 11-24-89 TIME 3: 30 PM WEATHER REPORT - VISUAL TRSP Shower Settling BELLANINS AF ON OPPOSITE SDE OF Driveway From Paid OF SOPTIC TRANSMITS (QUSZ) IS NOT	COMPLAINANT	ADDRE	ss	PHONE_	
CODES	· ·				
DATE					
DATE				CODES	
SDE OF Driveway from Paid OF SOPTIC TREWCHES - (QUSD IS NOT	RECEIVED BY	DATE	and the second s		
SDE OF Driveway from Paid OF SOPTIC TREWCHES - (QUSZ) IS NOT					
SDE OF Driveway from PWD OF SOPTIC MEWIH-S - COUSE IS NOT	DATE OF INVESTIGATION 4-24	89TIME	3:30 PM WEATHER_		
SDE OF Driveway from Paid OF SPETIC MENCHES - COUSE IS NOT	REPORT - 13 VISUAL TUSP.	Showen	Settling BELIAM	S AF ON	OPROSIN
· · · · · · · · · · · · · · · · · · ·					
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				- · · · · · · · · · · · · · · · · · · ·	
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and the state of t

OWNER:

FOLARIS DEVELOPMENT CORP.

3414 MORNINGWOOD DR:, SUITE 1

OLNEY, MD 20832 301-774-8082 DRAWING SCALE: 1"=50'

LOT INFORMATION:

13213 WESTMEATH CT.

CLARKSVILLE, MD 21029

LOT: 6N PARCEL: 261 SEC: 3
SUBDIVISION: WATERFORD ZONE:R

CENSUS TR: 6051

SEC: 3 AREA 2 BLOCK: 9

ONE:R Z MAP:34 E. DIS:5

ELEVATIONS

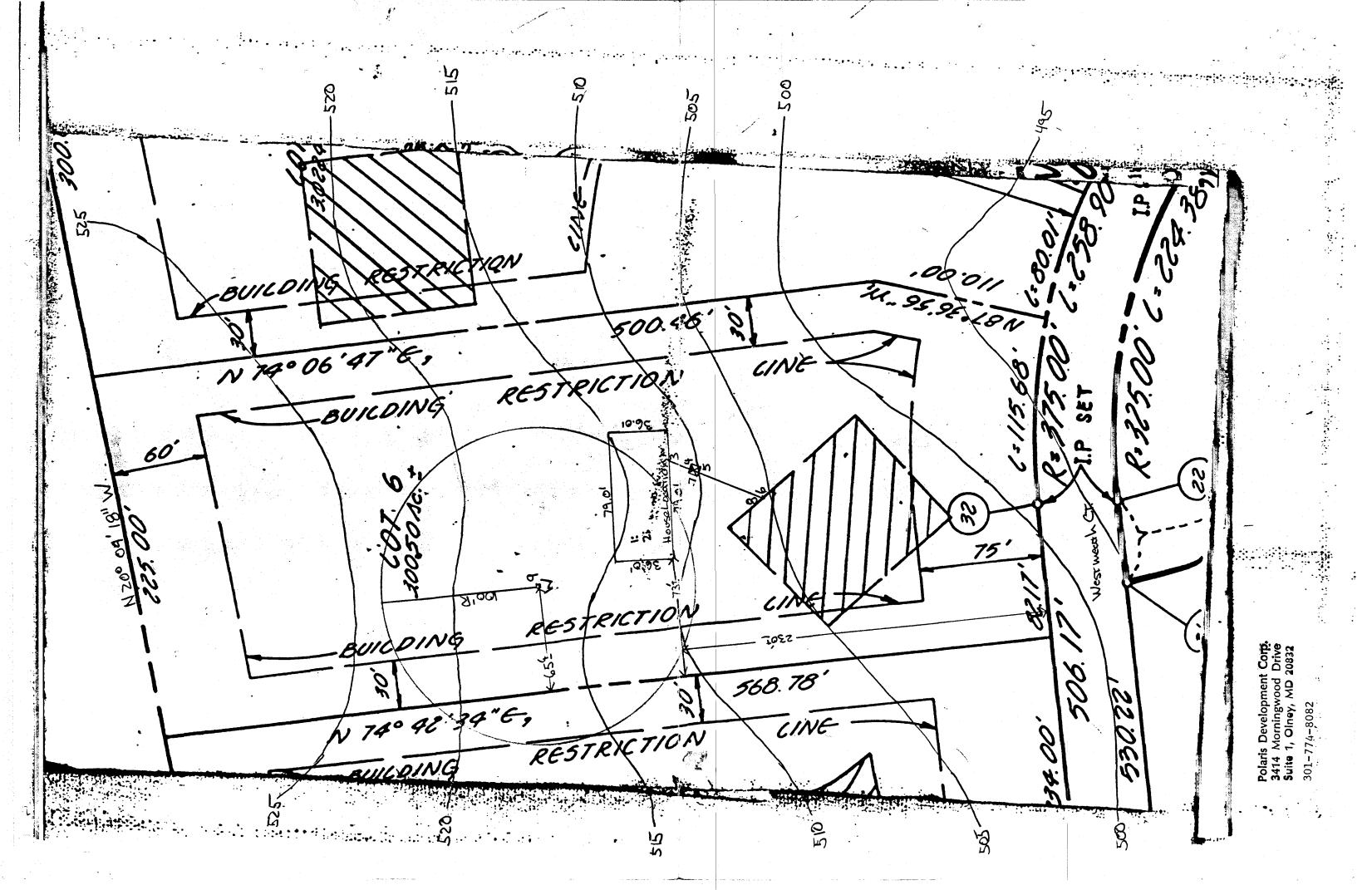
i-Basement elevation:	
2-First floor elevation:	517.50
	507.00 - BBMT
4-Invert into septic tank:	506.69
5-Invert out of septic tank:	506.39
6-Invert into trench	505-56 506.06
7-Exisiting grade at septic tank:	
8-Existing grade at septic:	509,56
9-Elevation of well at grade:	517.00

11/23/87 elevations of w/ change in Trunch inv. SAM

BLDG. PERMIT SIGNED AND RETURNED 11/23/8/

DP 15677

81/2



HEALTH

		12	1 14.	,
Page of		PINA	LOUT AFTER # 1 R	Avi au
Page of	. 5	1 3n15	WUT A	
: .	•	FIELD DATA		
		HOWARD COUNTY WEL		
Well Permit No.	HO - 91- 7	100		
Location of pro	operty (road)	STATATH LAN	E COFF BRIG	HTON DAM)
Subdivision	WATTEFORI	Lot	Block	HTON DAM) Plat Sec. 3 MSNT, POLARIS
			= DUVCOSP	MINITERIA
Depth of	f well o	oint (M.P.) above g	round = 2.1	
Static :	water level (S.W	.L.) below M.P. 3	2'	
I. High rate	pumping rese	rvoir drawdown		
			Pumning rate	X Qaa
Total tin	ne to	reach pumping wate.	r level	ft. Delow M.P.
II. Recoveru :	oump test data -	observations to be	recorded every	15 minutes
	WATER LEVEL	PUMPING RATE	FLOW METER RE	
minute in-	below M.P.	time to fill 5	(if used)	(gallons per
tervals	1121	gallon bucket		minute)
1230	75	8 sec	arp set	+ 12 gran
1,900	50.	S sec	1867	- + E 3/-
115	53	8		
130)	26	8		
145	58	8 sec		
	60	8 500		75gp
				<u> </u>
•				
	·		0/2100	
			1487	Salt Co-plate
				- Gettin
H				

		•	· ·	
			40	sa gle taken
	· · · · · · · · · · · · · · · · · · ·		lengun de la Communicación	100
				' HHB

	c1 5910	SEQUENCE NO. (OEP USE ONLY)	STATE OF MARYLAND	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED:
	(THIS NUMBER IS TO BE PUNCHED		WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY	COUNTY A - 35002
	IN COLS. 3-6 ON ALL CARD		PLEASE PRINT OR TYPE	PERMIT NO.
	DATE Received	DATE WELL COMPLETE	ED Depth of Well 22 20 0 26	FROM "PERMIT TO DRILL WELL"
45	8 13	15 20	(TO NEAREST FOOT)	28 29 30 31 32 33 34 35 36 37
:	STREET OR RFD W	last name		CLARKSVILLE
1	SUBDIVISION	ATTO COS N	SECTION 3	LOT
0	WELL I Not required for		GROUTING RECORD WELL HAS BEEN GROUTED	C 3
基本	STATE THE KIND OF	FORMATIONS	(Circle Appropriate Box)	1 2 PUMPING TEST
C. C. Standard	PENETRATED, THEIR THICKNESS AND IF	WATER BEARING	TYPE OF GROUTING MATERIAL CEMENT (CM) BENTONITE CLAY BC	HOURS PUMPED (nearest hour)
الرقيعيان	DESCRIPTION (Use additional sheets if needed)	FEET Check if water bearing	45 46	PUMPING RATE (gal. per min.
	grante ()		GALLONS OF WATER	METHOD USED TO
然	lopsoid	0 2	pepth of grout SEAL (to nearest foot)	MEASURE PUMPING RATE WATER LEVEL (distance from land surface)
6 500			48 TOP 52 54 BOTTOM 58 (enter 0 if from surface)	BEFORE PUMPING 32
- 10 - 10 - 10	Be Mice	2 16	casing CASING RECORD types	WHEN PUMPING
ia oste	Ur. 144Ca		insert STEL CONCRETE	TYPE OF PUMP USED (for test)
10 m	Ton Mira	16 38	code below PL OT	A air P piston T turbine
	TWA VIIIC	J 6	PLASTIC OTHER	27 27 27 27 27
	H. Br. Mire	21 45 /	MAIN Nominal diameter Total depth CASING top (main) casing of main casing	C centrifugal R rotaty (describe
£.	0.9. m		TYPE (nearest inch) (nearest foot)	J jet S submersible
	Gramia	45/115	60 61 63 64 66 70	27
	Grey Mira	, , , , ,	E OTHER CASING (if used) A diameter depth (feet)	2000
			inch from to	PUMP INSTALLED
	Flint	115 118 /	\$	DRILLER WILL INSTALL PUMP YES (O) (CIRCLE) (YES OF NO)
			R C	IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE
	Gray Mirca	118 205	screen type SCREEN RECORD or open hole	TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O)
	Gray Mica Schist		insert appropriate STEEL BRASS OPEN	IN BOX-SEE ABOVE:
			code below BRONZE HOLE PL OT	CAPACITY: GALLONS PER MINUTE
			PLASTIC OTHER	(to nearest gallon) PUMP HORSE POWER
	1 X 3 34 34 34	ri di	[C 2]	PUMP COLUMN LENGTH (nearest ft.)
		The second secon	E 1 HO DEPTH (nearest ft.)	CASING HEIGHT (circle appropriate box
			Ā 8 9 11 15 17 21	and enter casing height) LAND SURFACE
	* 1		S 2 3 24 26 30 32 36	below (nearest foot)
	CIRCLE APPROP	•		49 50 51
	A WHEN THIS WELL W		N 38 39 41 45 47 51	SHOW PERMANENT STRUCTURE SUCH AS
	E ELECTRIC LOG OBTA		SLOT SIZE 1 2 3 (NEAREST	BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS
	MELL		OF SCREEN 56 60 INCH)	THAN TWO DISTANCES (MEASUREMENTS TO WELL)
	I HEREBY CERTIFY THAT THIS WELL ACCORDANCE WITH COMAR 10.13 AND IN CONFORMANCE WITH ALL	7.13 "WELL CONSTRUCTION". CONDITIONS STATED IN THE	from to	-60'>Q< will
	ABOVE CAPTIONED PERMIT, ANI PRESENTED HEREIN IS ACCURATE OF MY KNOWLEDGE.		IF WELL DRILLED WAS FLOWING WELL INSERT	# A
;	DRILLERS IDENT. NO.	Fis	F IN BOX 68 68	7
	Benne f. F.	Summer of the same	OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)	£ 320'
- Armerica	DRILLERS SIGNATURE (MUST MATCH SIGNATURE	ON APPLICATION)	T (E.R.O.S.) WQ	<u>s</u>)
	1.101	VIII	70 72 OTHER DATA	Œ ,
	SITE SURERVISOR (sign. of responsible for sitework if d		TELESCOPE: LOG OTHER DATA CASING INDICATOR	Y
•		- L	HEALTH	Front Prop. line

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

	the state of the s
Well Locat Subdi Well	Permit No. HO - 81-2109 ion of property (road) WESTMERTH RANE (OFF BRIGHTON DAM) vision WATERFORD Lot 6 Block Plat Sec. Driller GEORGE SASTERDAY Owner DEVELOPMENT, POLARIS
	Depth of well 200 106PM Distance of measuring point (M.P.) above ground 2' Static water level (S.W.L.) below M.P. 32'
!	Time pump started D!/S Pumping rate & E. F. Total time to reach pumping water level ft. below M.P.
IT: p	it. below M.P.

Recovery pump test data

minute in- tervals	WATER LEVEL below M.P.	PUMPING RATE time to fill gallon bucket	FLOW METER READING (if used)	CALCULATED FLO (gallons per minute)
12:30	45	\$ Second	Pump Sel	8 6.111,
12:015	50	8	A1 180	8
1'.00	53	8	DENNY 6,	8
1115	56	8	30000	8
1:30	58	8		
1:415	60	7		8
2100	60	8		8
7:15	63	4	and the state of t	8
2130	64	4		8
2:45	65	8		8
3,00	(5			8
31.15	66	9	and the second s	· \$
13,30	66	8		8
	66	8		8
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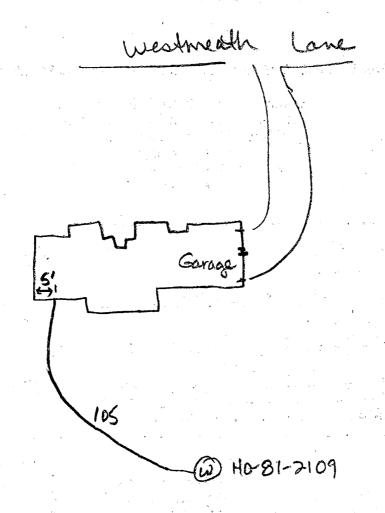
3/10/88

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

Howard County Health Department Bureau of Environmental Health 3525-H Ellicott Mills Drive Court House Square Ellicott City, Md. 21043 461-9933

New Installation		Receipt # 4/188 Date 3-9-88 Telephone 247-6963
Certified Well Pump Install	er Well Driller	Registered Plumber X
Name of Property Owner Poly Subdivision Water FORD Site Address 13213 West	ARIS Development Corp T	
Pump 1. Type a. Deep well jet b. Shallow well jet c. Submersible 2. Make Mes 3. Model # 4. Capacity 10 GPM 5. Pump exceeds well capaci 6. If Yes, is low pressure	Motor 1. Horsepower /2 2. RPM 3. Voltage a. 110 b. 220 ty Yes No Y	Pitless Adapter 1. Make 2. Model #S) 5.2 3. Depth 4g"
7. What methods are used to vibrations? Torque arresto	protect the pump and elect	rical wiring from
Tank 1. Capacity 82 2. Pressure relief valve? 75	Piping 1. Type frust for foliage 2. Size 11 Second 3. NSF and/or BOCA Code approved 12 Code approved 15 Second 15	Well data 1. Depth 200 ft. 2. Yield 10 GPM 3. Static water level 30 ft. 4. Will water supply be disenfected by installer? 100 ft.
I understand that it is my property of the stable permit is null and void).	responsibility to notify the ation is ready for inspection	e Howard County Health on (otherwise this
All information given above		
	Signature of Applicant Date:	- Horn Jugara

Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.



3-10-88 Pittess adaptor at 42 inches, well line and ground attached, well line in trench at 4 feet, House connection ok. Pump tank not installed yet, IE Nodean



DEVELOPMENT CONSULTANTS GROUP

SURVEYORS, ENGINEERS & LAND PLANNERS **SUITE 102** 17904 GEORGIA AVE. **OLNEY, MD 20832**

924-4570

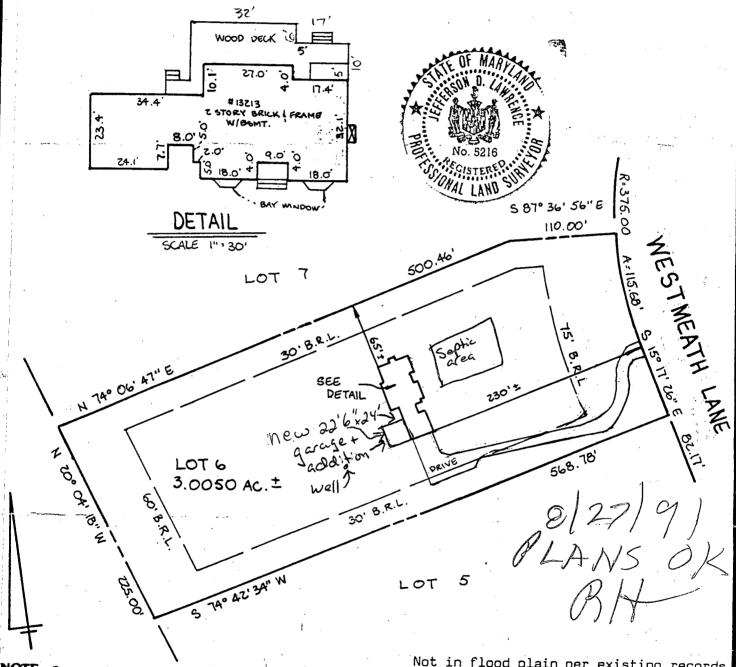
HOUSE LOCATION PLAT

6 BLOCK

WATERFORD

SECTION 3

COUNTY OF HOWARD PLAT BK. PLAT NO. 7310



NOTE: Existence of property corners not guaranteed by this plat.

Not in flood plain per existing records unless otherwise noted.

SURVEYOR'S CERTIFICATION
I hereby certify to the best of my knowledge & belief that the property delineated hereon is in accordance with the Plat of Subdivision and/or deed of record, that the improvements were located by accepted field practices and include permanent visible structures and encroachments, if any. This Plat is not for determining property lines, but prepared for exclusive use of present owners of property and also those who purchase, mortgage, or guarantee the title thereto, within six months from date hereof, and as to them I warrant the accuracy of this Plat. No title report funnished.

al Land Surveyor No. 5216

Job No. 155 -16 Scale: 1"= 100" DATES Wall Ck: 01/18/88

Final Loc: 8/23/88

Recert: