

Trench Insp.
1230
6-19-98

6-18-98 12:15-12:45
NO ONE FROM BILLINGS
AT SITE NO
SEPTIC WORK
TALKED TO DAUGHTER
LET. CARE W. OTHER CONTRACTOR.

12/19 12:30

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 510210
A REPAIR

INDEXED

DISTRICT _____

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

DATE 6-17-98

DATE SYSTEM APPROVED 6-22-98

INSPECTOR [Signature]

05-402344

"GREG"

Billings Outback Septic Service _____ IS PERMITTED TO INSTALL _____ ALTER X

ADDRESS 180 Obrecht Rd, Millersville, MD 21108 PHONE 410-544-0564

SUBDIVISION Chapel Woods LOT 2 Sec 2 ROAD 11806 Linden Chapel

PROPERTY OWNER Tom Brandt

ADDRESS 11806 Linden Chapel Rd, Clarksville, MD 21029

SEPTIC TANK CAPACITY 1500 GALLONS

NUMBER OF BEDROOMS 5

_____ SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED _____

REPAIR - PURPOSE - In support of Building Permit Application #
Septic Tank - To replace one existing trench (to be disconnected to allow swimming pool permit). One 60' Trench (2' wide, 9' bottom, 4' Inlet, and 5' of stone fill).

PLANS APPROVED BY [Signature] 6-16-98 DATE _____

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

BLDG. PERMIT SIGNED

AND RETURNED 6-18-98

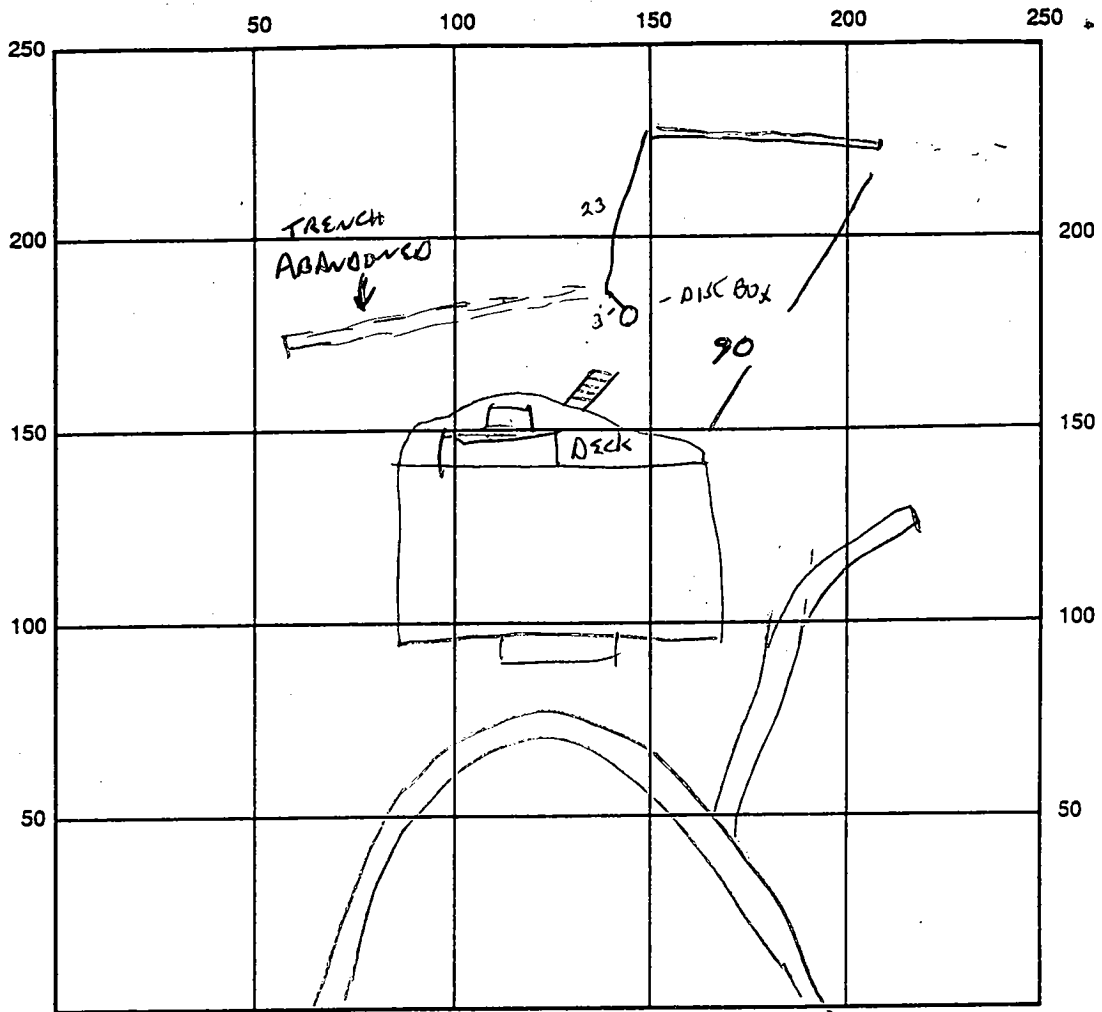
Serial # BPO 112610

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.**



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL NA CLEANOUTS NA
 DISTRIBUTION BOX LEVEL OK
 DRAIN FIELD/TITLE DEPTH 9 FT. TRENCH WIDTH 2 FT. INLET DEPTH 4 FT.
 EFFECTIVE GRAVEL DEPTH 5 FT. TOTAL LENGTH 64 FT.
 NUMBER OF TRENCHES 1 ONE SIDEWALL/BOTTOM AREA 320 SQ. FT.
 DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.
 ABSORBENT AREA — SQ. FT.

REMARKS: 6-22-98 OK TO STONE TRENCH, COVER WORK AS COMPLETED.

DATE SYSTEM APPROVED 6-22-98 INSPECTOR [Signature]

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

INDEXED

42547
P 42547
A 34802
DISTRICT 5th
DATE 9/13/88
DATE SYSTEM APPROVED 9/21/88
INSPECTOR R. HODGES

9-20-88
10000
9-21-88
1-2 PM

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

Shelly Construction

IS PERMITTED TO INSTALL ALTER

ADDRESS _____ PHONE 329-8040

SUBDIVISION Chapel Woods ROAD 11806 Linden Chapel LOT 2, Section 2

PROPERTY OWNER Shelley Shelly Construction, Inc.

ADDRESS 16951 York Rd., Thonkton, Md. 21111

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

GARBAGE GRINDER? YES _____ NO

COUNTED FIVE BEDROOMS
9/21/88

SEPTIC TANK CAPACITY 1500 GALLONS NUMBER OF BEDROOMS 5

TRENCHES - 200 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 9 feet below original grade. Effective area begins at 4 feet below original grade. - 5 feet of stone below distribution pipe.

LOCATION - Place the distribution box 165 feet down the left (515') lot line and 90 feet off the left lot line as seen when facing the lot from Linden Church Road. Run trenches on contour toward the right and left lot line.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OKCW

PLANS APPROVED BY Sid Abel DATE 3/24/88

COVER NO WORK UNTIL INSPECTED AND APPROVED.

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

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS.

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

NOTE: IF DEEP TRENCHES ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCHES.

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

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

PERMIT VOID AFTER TWO YEARS

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

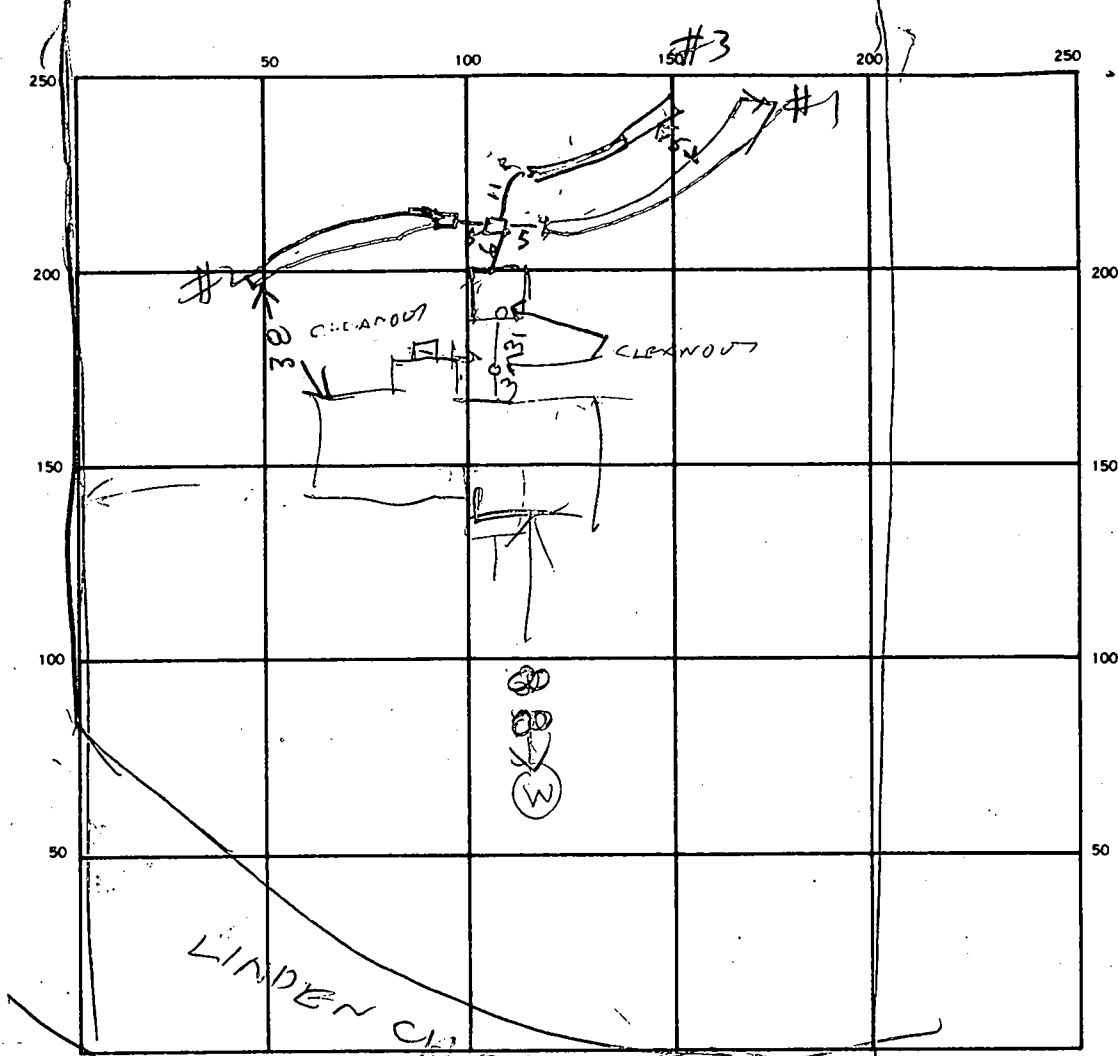
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES.

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

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1186

A 34802



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 150.0 CLEANOUTS ST / SEWER
OK / OK

DISTRIBUTION BOX LEVEL _____

DRAIN FIELD/TILE FIELD. DEPTH 1 | 2 | 3
9 | 9 | 9 FT. TRENCH WIDTH 2 | 2 | 3
2 | 2 | 2 FT. INLET DEPTH 4 | 4 | 4 FT.

EFFECTIVE GRAVEL DEPTH 1 | 2 | 3
5 | 5 | 5 FT. TOTAL LENGTH 8060 | 63 FT. 203
 NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 10.95 SQ. FT. 1000

DRYWELL INSIDE DIAMETER _____ FT. EFFECTIVE DEPTH BELOW INLET _____ FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS 9/21/98 - LOCATIONS OK PER PLANK RH FINISH DIGGING
TRENCHES 9/21/98 3:00 PM TRENCH #1 & #2 DONE TRENCH #3 STARTED
FINISH DIGGING #3 ADD STONE TO ALL TRENCHES & CALL RH

DATE SYSTEM APPROVED 9/21/88 INSPECTOR Raymond Hodges

APPLICATION

A 34802

P _____

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 465-5000 EXT. 356

DISTRICT 5

DATE Jan. 9 1985

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 Newburn Development Corporation
Suite 201, 5570 Sterrett Place
Columbia, Maryland 21044
ADDRESS 997-3815 596-3877 PHONE _____

Shelley Construction, Inc.

PROPERTY LOCATION

SUBDIVISION Chapel Woods, Section 2 LOT NO. Sec. 2

ON FINAL
LOT 2 AREA I
Sec. 2

ROAD AND DESCRIPTION 11806 Linden Chapel Road

SIZE OF LOT 3-acre TYPE BLDG. single family residence
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 James L. ...

APPROVED BY Sidney ... FOR Deep trenches DATE 1-9-87
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

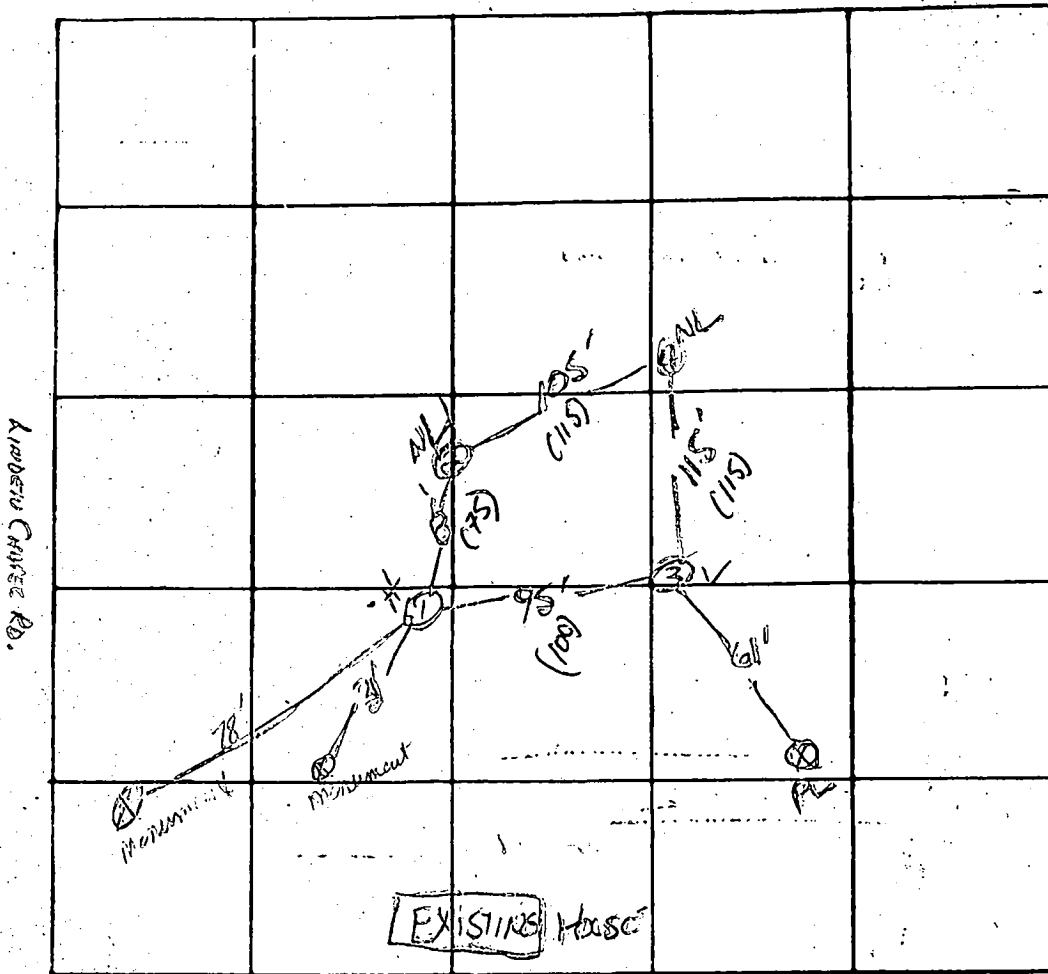
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 2-6-85 Rec. OK, Hold for certified hole plat, WA
House and well location Sibel

BLDG. PERMIT SIGNED
AND RETURNED 4/17/88
BP17325

Sik

THIS IS NOT A PERMIT



HIGH ①
 N. HIGH ②
 N. LOW ④
 Low ③

①
 6" A0-3
 RED BROWN
 CLAY LOAM,
 100% SAPROLITE
 BROWN
 SAND
 SILTY
 100%
 SAPROLITE

③
 6" A0-3
 RED BROWN
 CLAY LOAM
 100%
 SAPROLITE
 4.5' BROWN
 SAND
 10-20%
 SAPROLITE
 13'

②
 6" A0-3
 BROWN
 CLAY LOAM
 40% SAPROLITE
 4" BROWN
 SAND
 100%
 SAPROLITE

INLET = 4'
 DEPTH = 9'
 $\bar{x} = 11$

④
 6" A0-3
 BROWN
 CLAY LOAM
 10-20% SAPROLITE
 4" BROWN
 SAND
 >50%
 SAPROLITE
 4" NO STRUCTURE
 MATERIAL

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

RL 108

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2/6/85	1S	4'	11:44	2:15	TOO SLOW		
	1V	13'	LOOKS OK	Below 5'			
"	10	13'	2:19	2:23	2:23	2:32	9min
"	2S	6'	11:48	1:49	11:49	1:51	2min
	2V	14'	LOOK OK	Below 4'	FEET		
"	3S	4.5'	1:58	2:15	2:15	2:43	28min
	3V	13'	LOOK OK	Below 4.5'			
"	4S	4.5'	2:07	2:08	2:08	2:10	2min
	4V	12.5'	LOOK OK	Below 4'			

REMARKS _____

TYPE OF SOIL _____

TESTED BY

S. Abel / R. Hodges

ALSO PRESENT:

DEVRA, ERIC
 SONAY NEWBURN
 DEVELOPMENT

C1 3798

SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

COUNTY NUMBER A 34802

DATE RECEIVED

DATE WELL COMPLETED 012187

DEPTH OF WELL 145 (TO NEAREST FOOT)

PERMIT NO. FROM 'PERMIT TO DRILL WELL' 10-81-1853

OWNER DEVELOPMENT NEWBURN last name first name STREET OR RFD CHURCH CHAPEL RD TOWN CLARKSVILLE SUBDIVISION CHAPEL WOODS SECTION 2 LOT 2

WELL LOG Not required for driven wells. STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

Table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Includes handwritten entries: SAND 0-18, CORAY GRANITE 18-145.

GROUTING RECORD WELL HAS BEEN GROUTED (Y) (N) TYPE OF GROUTING MATERIAL CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 7 NO. OF POUNDS 658 GALLONS OF WATER 142 DEPTH OF GROUT SEAL: (to nearest foot) from 0 to 24 ft.

CASING RECORD MAIN CASING TYPE SH Nominal diameter 6 Total depth 26

OTHER CASING (if used) diameter inch depth (feet) from to

SCREEN RECORD screen type or open hole (S) (BR) (HO) (PL) (OT)

Table for SCREEN RECORD with columns for depth (nearest ft.) and rows for each screen.

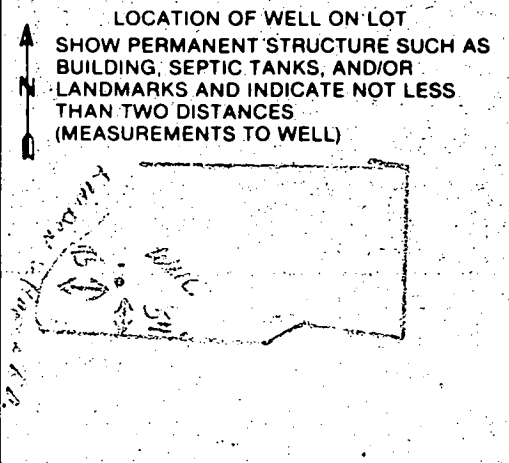
SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH) 56 60

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

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) WQ TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min. to nearest gal.) 17 METHOD USED TO MEASURE PUMPING RATE bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 23 WHEN PUMPING 33 TYPE OF PUMP USED (for test) S submersible

PUMP INSTALLED DRILLER WILL INSTALL PUMP YES (NO) IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE TYPE OF PUMP INSTALLED PLACE (A.C.J.P.R.S.T.O) IN BOX - SEE ABOVE: CAPACITY: GALLONS PER MINUTE (to nearest gallon) PUMP HORSE POWER PUMP COLUMN LENGTH (nearest ft.) CASING HEIGHT (circle appropriate box and enter casing height) LAND SURFACE (nearest foot)



CIRCLE APPROPRIATE LETTER A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED E ELECTRIC LOG OBTAINED P TEST WELL CONVERTED TO PRODUCTION WELL

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 10.17.13 'WELL CONSTRUCTION' AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE

DRILLERS IDENT. NO. DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

B 7 **1502** SEQUENCE NO. (OEP 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

OEP PERMIT NUMBER
HO-81-1853
 fill in this form completely

Date Received

OWNER INFORMATION

15 Last Name **MORRIS** Owner First Name **DEVELOPMENT**

36 Street or RFD **SUITE C1 59705**

57 Town **COLMOCIA** 70 State **72** Zip **21044**

B 3 **LOCATION OF WELL**

8 COUNTY **ALLEGANY**

23 SUBDIVISION **CHAPEL WOODS**

SECTION **2** LOT **2**

52 NEAREST TOWN **CLARKSVILLE**

MILES FROM TOWN (enter 0 if in town) **1 1/4** MI

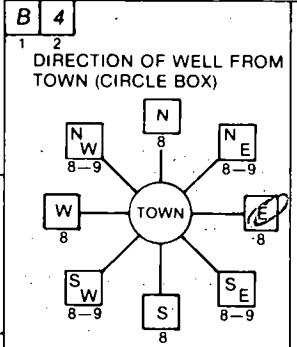
DRILLER INFORMATION

Driller's Name **MORRIS F. WAGNER** 77 License No. **238**

Firm Name **MORRIS F. WAGNER DRILLING INC.**

Address **5512 Ridge Rd. Mt. Airy, Md. 21071**

Signature **MORRIS F. WAGNER** Date **11/21/86**



Tindler Chapel Road

NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

DISTANCE FROM ROAD **75** FT or MI **FT**

B 2 **WELL INFORMATION**

APPROX. PUMPING RATE (GAL. PER MIN.) **5**

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **500**

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

COUNTY NAME **HOWARD** COUNTY NO. **A34802**

OEP SIGNATURE **Stager** STATE HEALTH DEPARTMENT SIGNATURE

DATE ISSUED **7/8/87** EXP DATE

NORTH GRID **507000** EAST GRID **0821000**

APPROXIMATE DEPTH OF WELL **260** FEET

APPROXIMATE DIAMETER OF WELL **6** INCH NEAREST

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

- WELL
-
-

WRITE THE BOX NUMBER FROM THE MAP HERE

E **8291**

N **5097**

Location OK

26' casing

1' above top

24' open

7 bags cement

1/21/87

JL

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

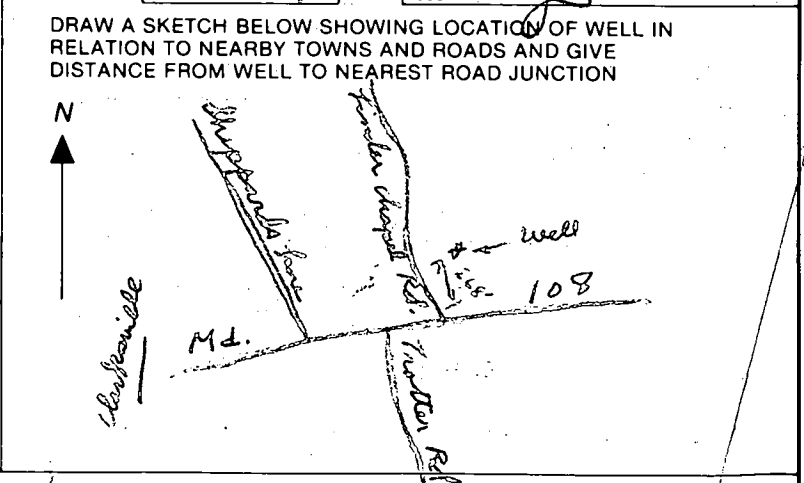
THIS WELL WILL NOT REPLACE AN EXISTING WELL

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

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 (OEP USE ONLY)

APPROP. PERMIT NUMBER _____

FORCE **1** INITIALS **MS** PERMIT NO. **HO-81-1853**

SPECIAL CONDITIONS

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043
461-9933

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation Replacement
Receipt # 42548
Date 9/13/88
Name of Installer Wm. Esworthy Telephone 356-7090
License Number 2485
Certified Well Pump Installer Well Driller Registered Plumber
Name of Property Owner Shelley Construction Telephone 329-8040
Subdivision Chapel Woods Section 2 Lot # 2 Well Tag # 40-21-1853
Site Address 11906 Linden Chapel Rd.

Pump
1. Type
a. Deep well jet
b. Shallow well jet
c. Submersible
2. Make Wells & Tool
3. Model # 302
4. Capacity 80 GPM
5. Pump exceeds well capacity Yes No
6. If Yes, is low pressure cutoff switch installed? Yes No
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors Cable guards Other

Motor
1. Horsepower 1/2
2. RPM
3. Voltage
a. 110
b. 220

Pitless Adapter
1. Make Harvard
2. Model #
3. Depth 11 ft.

Tank
1. Capacity 80
2. Pressure relief valve? YES

Piping
1. Type POLY.
2. Size 1" IPS
3. NSF and/or BOCA Code approved YES
4. Depth of supply line 130 ft

Well data
1. Depth 145 ft.
2. Yield 12 GPM
3. Static water level 33 ft.
4. Will water supply be disinfected by installer? YES

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.
Signature of Applicant: [Signature]
Date: Sept 12, 1988

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

HD-215 9/21/88 - Well Pump Installation
Sticker applied RH

STATE OF MARYLAND
DEPARTMENT OF HEALTH AND MENTAL HYGIENE
LABORATORIES ADMINISTRATION
REPORT OF WATER ANALYSIS

Bottle Number: H 9961 Name: NEWLAND DEVELOPMENT County: HOWARD

Source of Sample: CHAPPEL WOODS LOT 2 Collector: STAYER
Street Town or City

Sample Type (Circle): Community Source Non-Community Distribution Private MCL Emergency Recheck Routine
Remarks: HO #1-1853 ✓

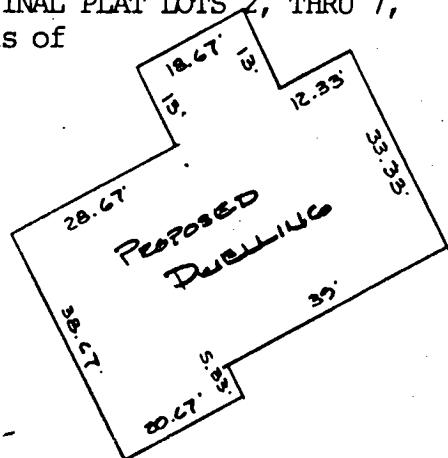
County: 13 Plant No. ----- Sampling Station ----- Date Collected 012182 Time 1215 P Acid Iced

Field Data: pH* ----- Chlorine Residual ----- Free ----- Total ----- Specific Conductance -----

✓	ANALYSIS	CODE	RESULTS	✓	ANALYSIS	CODE	RESULTS
	pH*	011			Arsenic	253	
	Alkalinity (Total)	040			Barium	262	
	Alkalinity (HCO ₃)	050			Cadmium	273	
	Alkalinity (CO ₃)	060			Chromium	283	
	pH*, Ca CO ₃ SAT.	071			Lead	302	
	Alkalinity, Ca CO ₃ SAT	080			Mercury	314	
	Hardness	110			Selenium	323	
	Ammonia-N	143			Silver	333	
✓	Nitrate-Nitrite N	162	<u>10.4</u>		Aluminum	192	
	Nitrite N	173			Calcium	231	
	MBAS	182			Copper	241	
	Chloride	091			Iron	122	
	Fluoride	101			Magnesium	241	
	Color*	020			Manganese	133	
	Turbidity*	031			Nickel	391	
	Conductance*, SPEC.	201			Potassium	361	
	Silica	210			Sodium	371	
	Sulfate	220			Zinc	342	
	Total Residue	381					

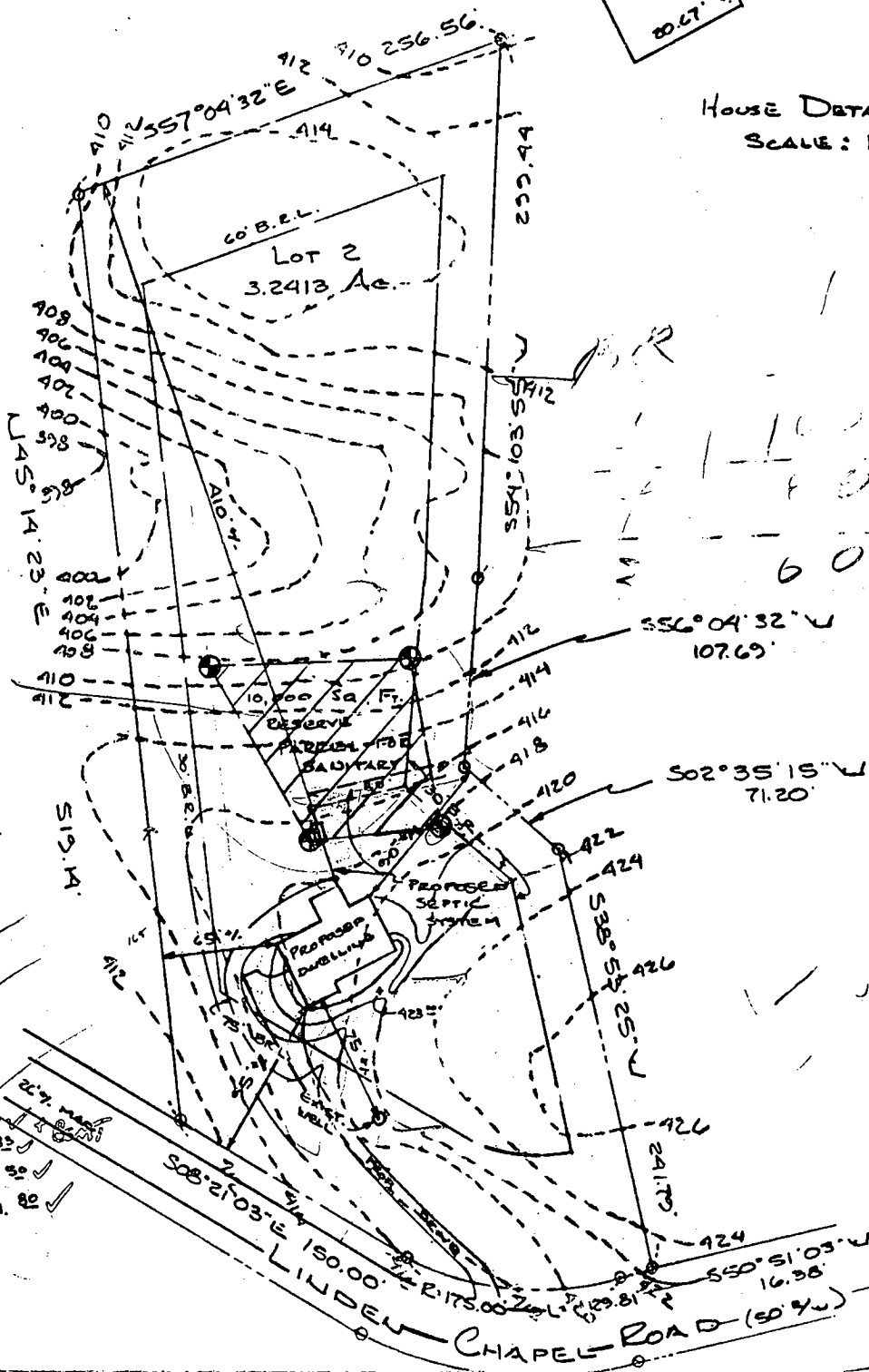
* Results reported in units, all others in milligrams per liter (ppm)
Date Received 12 2 82 Date Reported JAN 30 1983 Chemist ----- Lab No. 9835
DHMH 90-A (10/85) 50M

Proposed Site Plan of # Linden Chapel Road, Fifth Election District, Howard County, Maryland. Also known as lot 2, as shown on plat entitled FINAL PLAT LOTS 2, THRU 7, CHAPEL WOODS, which plat is recorded among the land records of Howard County as plat C.M.P. #6854.



HOUSE DETAIL
SCALE: 1" = 30'

LOT 3



HOUSE ELEVATIONS:

- BASEMENT: 417.00'
- FIRST FLOOR: 426.00'
- GARAGE: 424.00'

SEPTIC ELEVATIONS:

- INVERT OUT OF BSMT.: 415.33'
- INVERT SEPTIC TANK IN: 414.83'
- INVERT SEPTIC TANK OUT: 414.50'
- INVERT DISTRIBUTION BOX: 411.80'

4/19/88

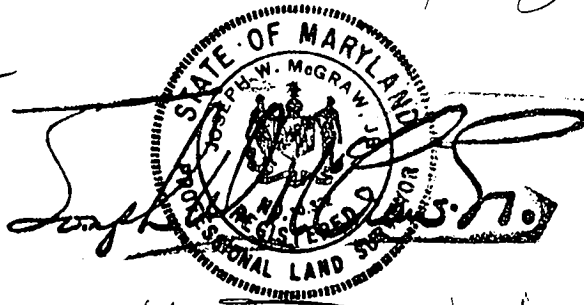
*elevations on
8/26/88*

BLDG. PERMIT SIGNED
AND RETURNED 4-19-88

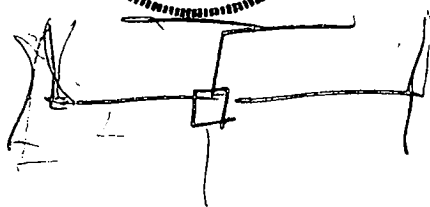
BP 19335

J.S.T. ENGINEERING CO., INC.
3812 MARY AVENUE
BALTIMORE, MARYLAND 21206

S. Allen



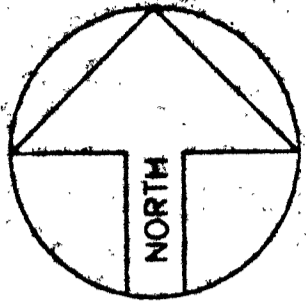
SCALE: 1" = 100' DATE: 10-26-87
Rev.: 3-29-88



SETBACKS:	
REAR PL.	50'
SIDE PL.	30'
HOUSE	10'
SEPTIC	20'
WELL	10'

**PRIVATE WELL
& SEPTIC**

NOTE: A VACUUM BREAKER
WILL BE INSTALLED
ON JOB AS PER
CODE.



LOT 2
141,191 Sq.Ft.
3.2413 AC.

408 Sq.Ft. FLA
DECK (

48" HIGH ORNAMENTAL
IRON FENCE (BY OWNER
AS PER CODE) 168 Ln.Ft.

*11806 Linden Chapel Rd.
(with this same Pool BP - No # yet)
Pool location is OK based on conditional
BP letter approval. A repair septic permit (P510210) already has been issued
to abandon the old trench and construct an equivalent replacement
septic trench well away from pool location.
Repair permit approval & BP released this day
6/18/98*

SITE PLAN
1" = 40'
LOT 2
CHAPEL WOODS
5TH ELECTION DIST.
HOWARD COUNTY, MD

Both Customer and Salesman agree that this drawing, access, elevation & location of all equipment and appurtenances are in agreement. Any changes from this drawing must be approved in writing by the Customer and MPI.

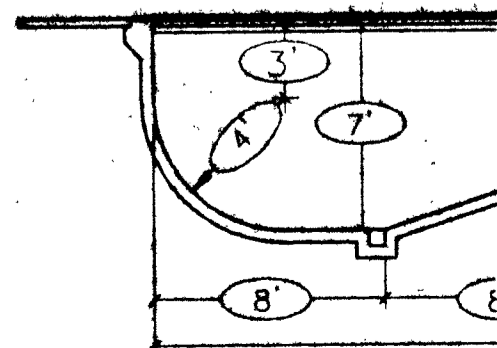
CHECKED BY - SALESMAN _____
CHECKED BY - CUSTOMER _____

DIRECTIONS:

MAP BOOK:

Co.: _____
MAP: _____
GRID: _____

Cross Section POOL ELEV



MARYLAND POOLS

9515 GERWIG LANE - SUITE 119
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301-621-3319 WASHINGTON