

## Real Property Data Search

## Search Result for HOWARD COUNTY

View Map		View GroundRent Redemption			View GroundRent Registration				
<b>Tax Exempt:</b>		<b>Special Tax Recapture:</b>							
<b>Exempt Class:</b>		NONE							
<b>Account Identifier:</b>		<b>District - 05 Account Number - 375029</b>							
Owner Information									
<b>Owner Name:</b>		MAISEL CORA			<b>Use:</b>		RESIDENTIAL		
<b>Mailing Address:</b>		4357 MAISEL FARM LN ELLCOTT CITY MD 21042-1246			<b>Principal Residence:</b>		NO		
					<b>Deed Reference:</b>		/05089/ 00640		
Location & Structure Information									
<b>Premises Address:</b>		4365 MAISEL FARM LN ELLCOTT CITY 21042-0000			<b>Legal Description:</b>		LOT 24-B 2.44 A 4365 MAISEL FARM LN GLENELG MANOR		
<b>Map:</b>	<b>Grid:</b>	<b>Parcel:</b>	<b>Sub District:</b>	<b>Subdivision:</b>	<b>Section:</b>	<b>Block:</b>	<b>Lot:</b>	<b>Assessment Year:</b>	<b>Plat No:</b>
0028	0004	0354		0000			24 B	2017	<b>Plat Ref:</b>
<b>Special Tax Areas:</b>				<b>Town:</b>		NONE			
				<b>Ad Valorem:</b>		100			
				<b>Tax Class:</b>					
<b>Primary Structure Built</b>		<b>Above Grade Living Area</b>		<b>Finished Basement Area</b>		<b>Property Land Area</b>		<b>County Use</b>	
						2.4400 AC			
<b>Stories</b>	<b>Basement</b>	<b>Type</b>	<b>Exterior</b>	<b>Full/Half Bath</b>	<b>Garage</b>	<b>Last Major Renovation</b>			
Value Information									
		<b>Base Value</b>		<b>Value</b>		<b>Phase-in Assessments</b>			
				As of		As of		As of	
				01/01/2017		07/01/2018		07/01/2019	
<b>Land:</b>		264,400		264,400					
<b>Improvements</b>		0		0					
<b>Total:</b>		264,400		264,400		264,400		264,400	
<b>Preferential Land:</b>		0						0	
Transfer Information									
<b>Seller:</b> MAISEL STEPHEN J				<b>Date:</b> 05/11/2000			<b>Price:</b> \$0		
<b>Type:</b> NON-ARMS LENGTH OTHER				<b>Deed1:</b> /05089/ 00640			<b>Deed2:</b>		
<b>Seller:</b> MAISEL DALE Z				<b>Date:</b> 11/30/1984			<b>Price:</b> \$0		
<b>Type:</b> NON-ARMS LENGTH OTHER				<b>Deed1:</b> /05089/ 00640			<b>Deed2:</b>		
<b>Seller:</b>				<b>Date:</b>			<b>Price:</b>		
<b>Type:</b>				<b>Deed1:</b>			<b>Deed2:</b>		
Exemption Information									
<b>Partial Exempt Assessments:</b>		<b>Class</b>		07/01/2018		07/01/2019			
<b>County:</b>		000		0.00					
<b>State:</b>		000		0.00					
<b>Municipal:</b>		000		0.00 0.00		0.00 0.00			
<b>Tax Exempt:</b>		<b>Special Tax Recapture:</b>							

C1 05077 SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

COUNTY NUMBER A56952-B

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

ST/CO USE ONLY DATE RECEIVED 5-9-98

DATE WELL COMPLETED 11 98 Depth of Well 225 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-1487

OWNER Glenelg Manor Assoc. STREET OR RFD Folly Quarter Rd TOWN Glenelg SUBDIVISION Maisel Prop. SECTION LOT 5

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, FEET (FROM, TO), check if water bearing. Includes entries for Top Soil, Sandstone, and Blue Rock.

GROUTING RECORD

WELL HAS BEEN GROUTED (Y/N) TYPE OF GROUTING MATERIAL (CM, BC) NO. OF BAGS 18 NO. OF POUNDS 1692 GALLONS OF WATER 108 DEPTH OF GROUT SEAL 58

CASING RECORD (ST, CO, PL, OT) MAIN CASING TYPE PL Nominal diameter 67 Total depth 60

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

SCREEN RECORD (ST, BR, HO, PL, OT) screen type or open hole insert appropriate code below

PUMPING TEST

HOURS PUMPED (nearest hour) 3-8-9 PUMPING RATE (gal. per min.) 6.0 METHOD USED TO MEASURE PUMPING RATE Submersible WATER LEVEL (distance from land surface) BEFORE PUMPING 47 WHEN PUMPING 100 TYPE OF PUMP USED (for test) S submersible

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED (Y/N)

CIRCLE APPROPRIATE LETTER A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED

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...

DRILLERS LIC. NO. 1 MS D 143 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. 1 M D

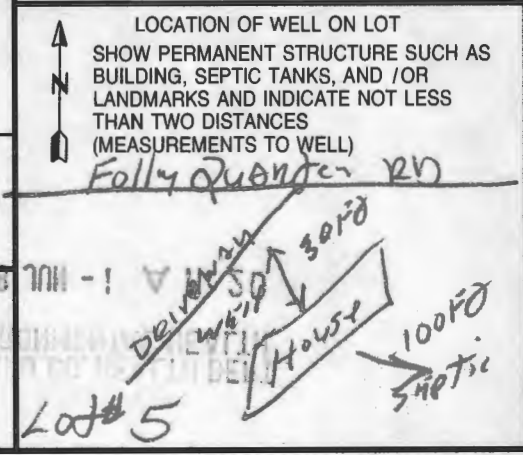
DEPTH (nearest ft.) HO 59 225

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

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMP INSTALLED

DRILLER WILL INSTALL PUMP (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 ( ) below LAND SURFACE 2F (nearest foot)



**B 1** **3070** SEQUENCE NO. (DP USE ONLY) STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please print or type STATE PERMIT NUMBER **40-94-1487**  
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS) fill in this form completely

**OWNER INFORMATION**  
 Date Received (APA) **030998**  
**Gleweig Manor Assoc**  
 Last Name Owner First Name  
**2789 Folly Quarter Rd**  
 Street or RFD  
**111011 Clarksville**  
 Town 70 State 72 Zip 76

**B 3** LOCATION OF WELL  
 TOWARD  
 COUNTY  
 MAISEL PROPERTY  
 SUBDIVISION  
 SECTION LOT **35**  
 CLARKSVILLE  
 NEAREST TOWN  
 MILES FROM TOWN (enter 0 if in town) **4** MI

**DRILLER INFORMATION**  
 Driller's Name **Perry Harley** License No. **143**  
 Firm Name **Harley Drilling**  
 Address **Box 160 Walkersville, MD 21799**  
 Signature **Dun Han** Date **3-6-98**

**B 4** DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  
 TOWN  
 NEAR WHAT ROAD **Folly Quarter**  
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
 DISTANCE FROM ROAD **1000**  
 ENTER FOR MI **10**  
 TAX MAP: BLK: PARCEL:

**B 2** WELL INFORMATION  
 APPROX. PUMPING RATE (GAL. PER MIN.) **3**  
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **600**

**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 Co** County No. **A56952B**  
 STATE SIGNATURE DATE ISSUED **031798** A. McMillen **3/17/99**  
 NORTH GRID **510000** EAST GRID **0810000**

APPROXIMATE DEPTH OF WELL **200** FEET  
 APPROXIMATE DIAMETER OF WELL **6"** NEAREST INCH

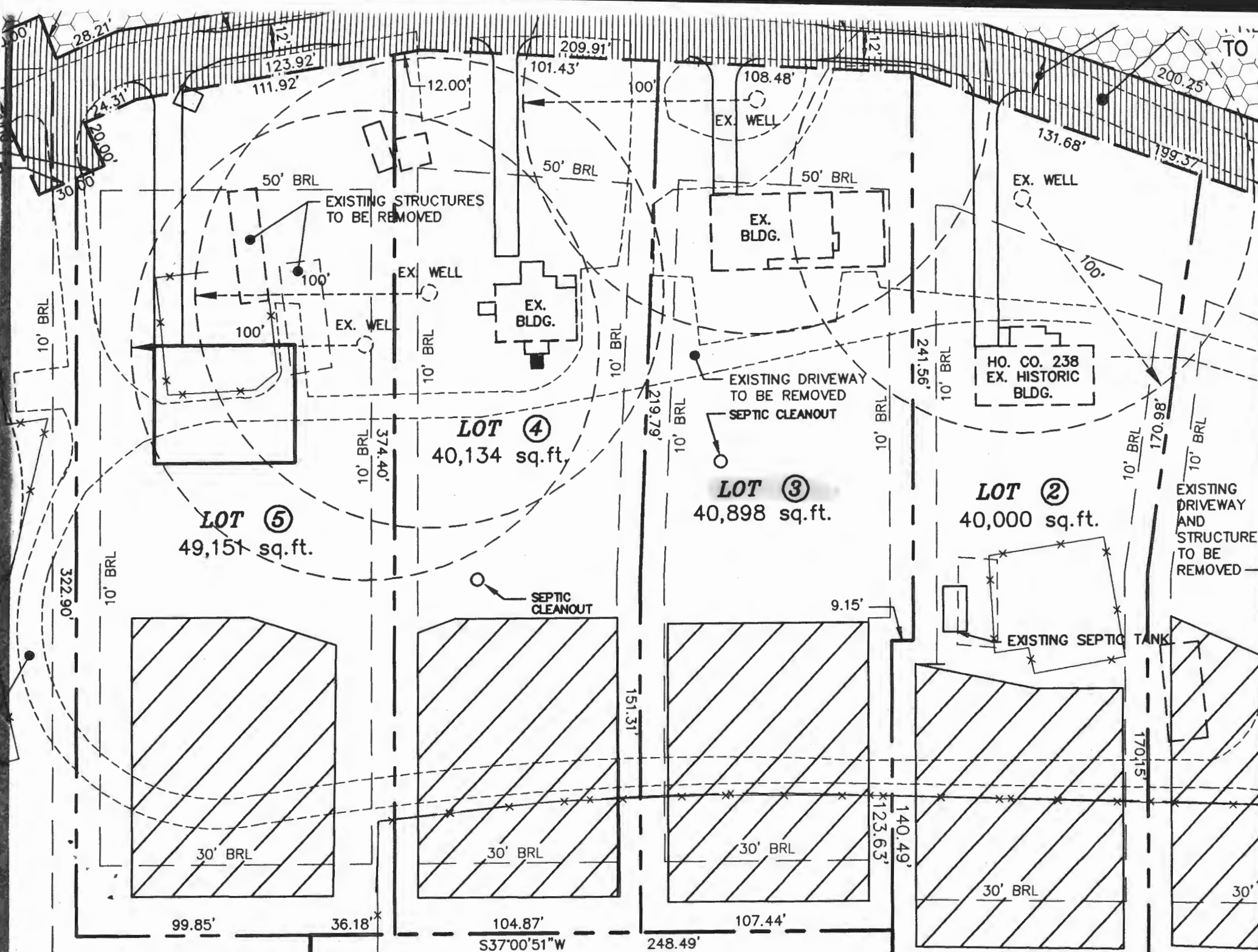
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X  
 SOURCES OF DRILLING WATER  
 1. well  
 WRITE THE BOX NUMBER FROM THE MAP HERE  
 N **810**  
 N **510**

**METHOD OF DRILLING (circle one)**  
 BORED (or Augered) JETTED Jetted & DRIVEN  
 ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)  
 CABLE REVERSE-ROTARY Drive-POINT  
 other

**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) **41**

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION  
 Folly Quarter RD  
 DRIVEWAY  
 Lot # 3

**Not to be filled in by driller (OEP USE ONLY)**  
 APPROP. PERMIT NUMBER **GAP**  
 FORCE **AM** WRITE INITIALS IN BOX PERMIT No. **40-94-1487**



**LOT ⑤**  
49,151 sq. ft.

**LOT ④**  
40,134 sq. ft.

**LOT ③**  
40,898 sq. ft.

**LOT ②**  
40,000 sq. ft.

EXISTING STRUCTURES  
TO BE REMOVED

EXISTING DRIVEWAY  
TO BE REMOVED  
SEPTIC CLEANOUT

EXISTING DRIVEWAY  
AND  
STRUCTURE  
TO BE REMOVED

EXISTING SEPTIC TANK

SIGNED SP-00-01 12/13/99

TO B

# APPLICATION

PERCOLATION TESTING

A 56952-B

P \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 313-2840

DISTRICT \_\_\_\_\_

DATE 5/30/96

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 Mr. Dale Maisel

c/o Land Design and Development, Inc.  
ADDRESS 10805 Hickory Ridge Road PHONE 740-2100  
Columbia, Maryland 21044

AGENT OR ~~PROCESSEES~~ Robert Webster

Land Design and Development, Inc.  
ADDRESS 10805 Hickory Ridge Road PHONE 740-2100 Ex. 219  
Columbia, Maryland 21044

PROPERTY LOCATION:

SUBDIVISION Maisel Property LOT NO. 95

ROAD AND DESCRIPTION LONG PRIVATE ROAD OFF OF FOLLY QUARTER ROAD

TAX MAP 28 PARCEL # 237, 354 & 355

SIZE OF LOT 1± 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.

Robert H Webster  
(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

COUNTY #

SOIL PROFILE  
421-B

0' orange brn SiClM

4.0 lgt orange SiSalM  
pockets of red SalM

10.0

422

bright orange SiClM

3.5 bright orange tan SalM

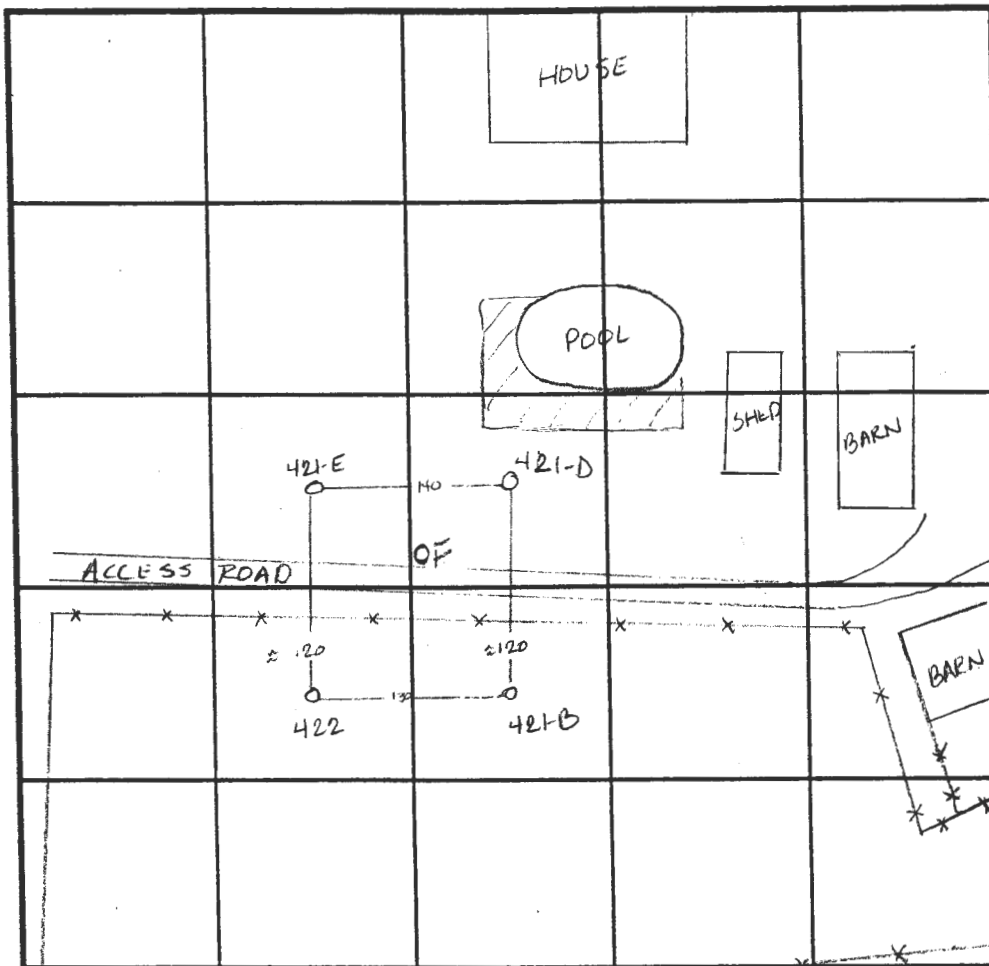
10.0

421-E

red brn SiClM

4.0 tan orange SalM  
5% feldspar like sapolite

10.0



SOIL PROFILE  
421-B

0' fill

1.0 topsoil

2.1 orange brown SiClM

5.0 light orange tan SalM

10.0

E

dark OR red SiClM

2.0 dark OR SiClM

4.0 dark brn SalM  
few pockets of SalM

12.0

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4-8-96	421-B	5.0 / V10.0	12:29	12:30	12:30	12:31 <sup>30</sup>	1 1/2 min
	422	4.0 / V10.0	12:33	12:34	12:34	12:35 <sup>30</sup>	1 1/2 min
	421-D	4.5 / V10.0	1:13	1:14 <sup>30</sup>	1:14 <sup>30</sup>	1:21	6 1/2 min
	421-E	4.5 / V10.0	1:19	1:21	1:21	1:23	2 min
8-13-96	F	Visual to 130	- see profile -				OK

REMARKS \_\_\_\_\_

TYPE OF SOIL \_\_\_\_\_

TESTED BY Amy Mendenhall ALSO PRESENT Don Reuser

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME \_\_\_\_\_ TRENCH WIDTH \_\_\_\_\_

INLET DEPTH \_\_\_\_\_ MAXIMUM BOTTOM DEPTH \_\_\_\_\_ SQ. FT./BEDROOM \_\_\_\_\_

VIL  
ME  
M.  
ANT  
BY

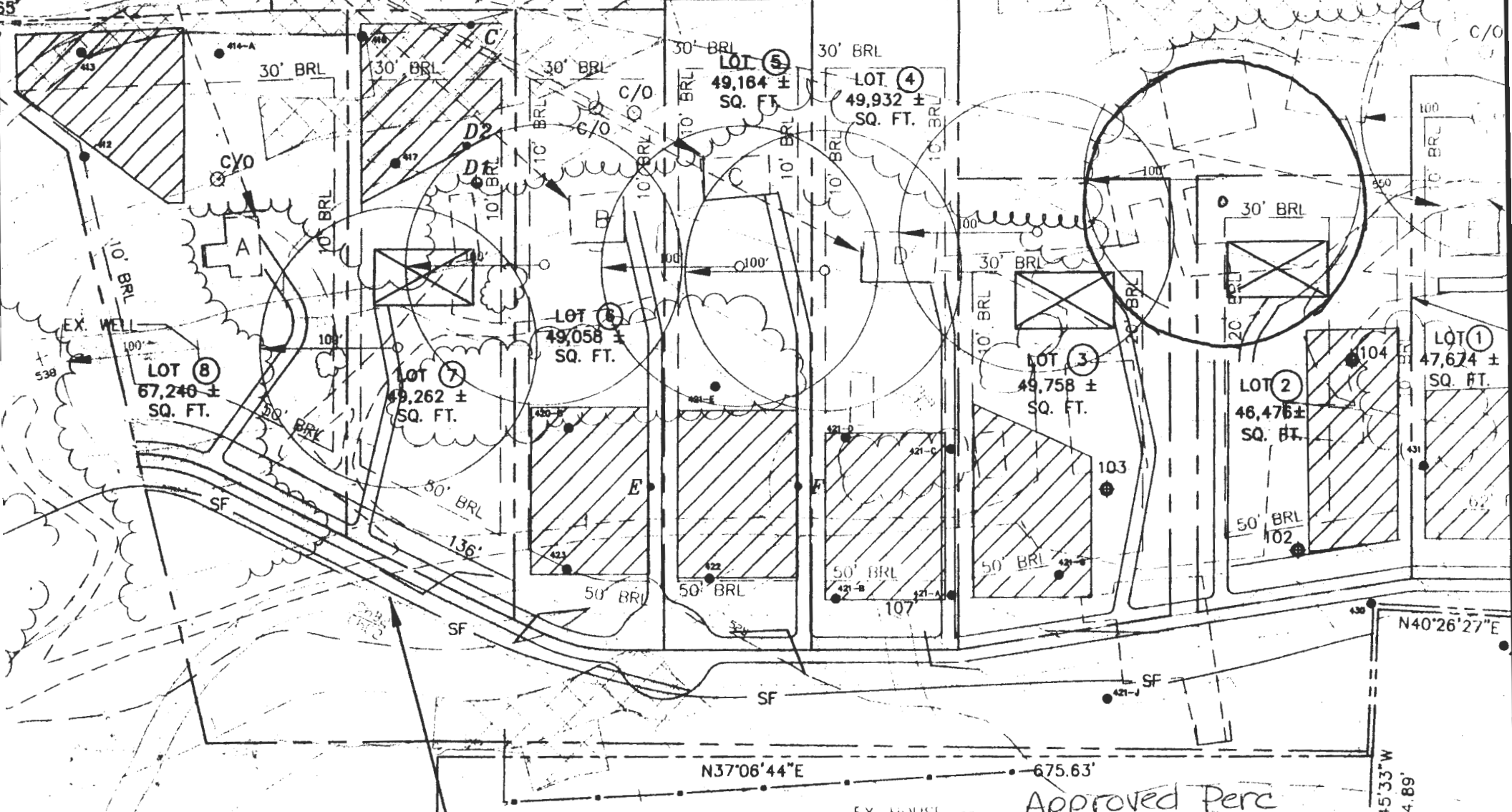
100'  
S37°35'30"W

889.70'

S55°22'41"E 136.72'

NON-BUILDABLE  
PRESERVATION PARCEL A  
7.16 AC ±  
TO BE DEDICATED TO H.O.A.

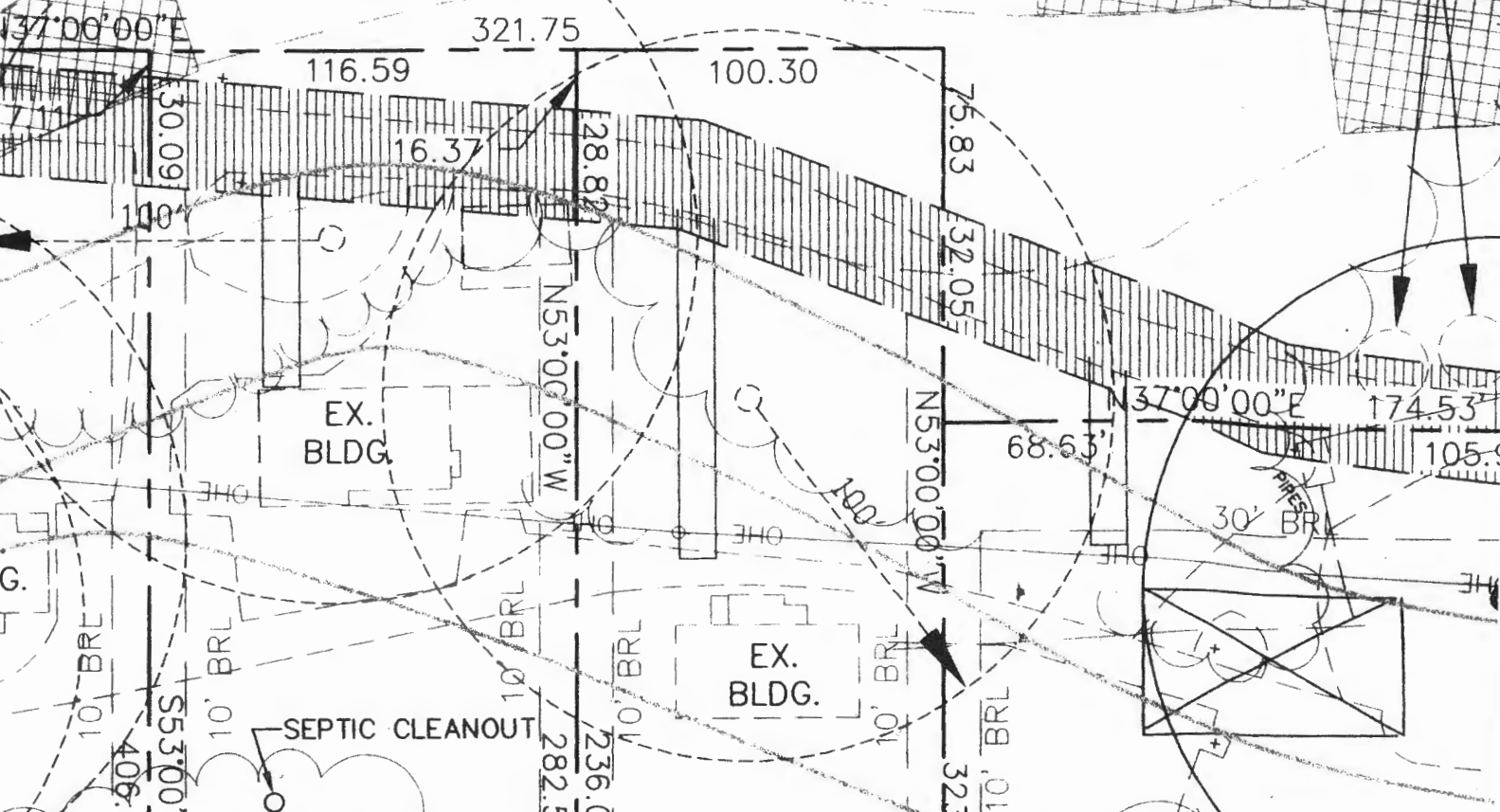
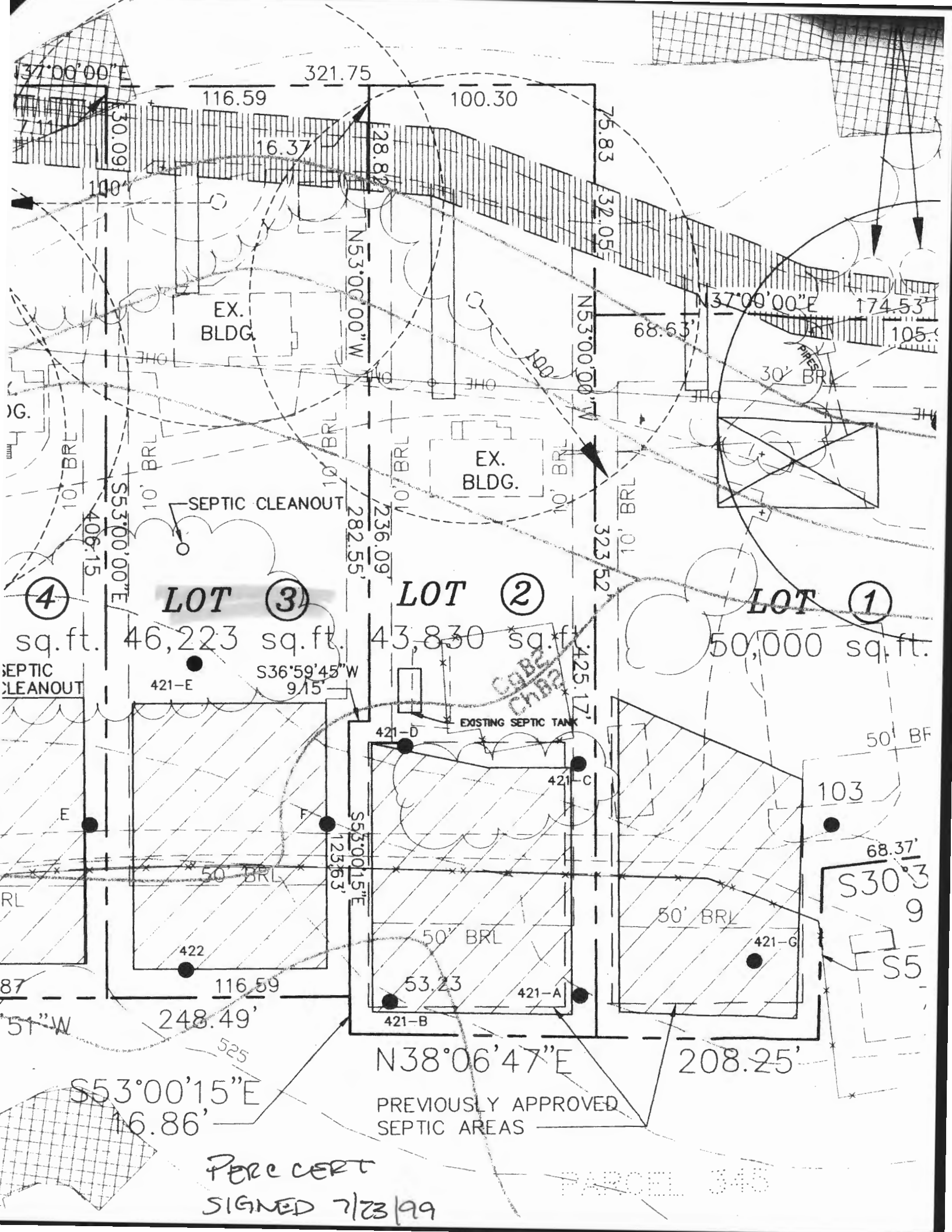
EXISTING  
HOUSES TO  
REMAIN



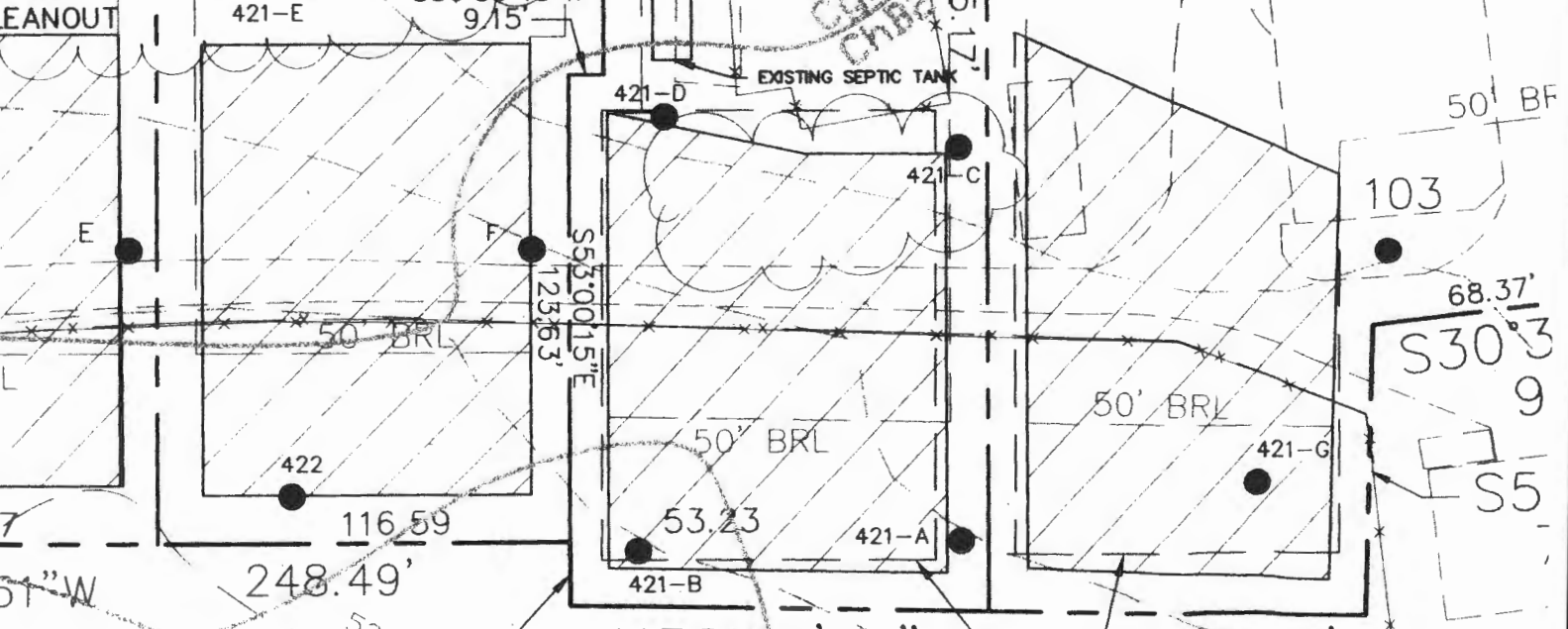
PROPOSED USE-IN-COMMON DRIVEWAY

Approved Perc  
Cert 3-27-97

N40°26'27"E  
50'45'33"W  
104.89'



LOT ④ sq. ft. 46,223  
 LOT ③ sq. ft. 43,830  
 LOT ② sq. ft. 50,000  
 LOT ① sq. ft. 50,000



N38°06'47"E  
 PREVIOUSLY APPROVED SEPTIC AREAS

PERC CERT  
 SIGNED 7/23/99

PARCEL 345

198  
3 am

# PERMIT

## SEWAGE DISPOSAL SYSTEM

### DEPARTMENT OF HEALTH AND MENTAL HYGIENE

05-358388

P 50296-8C

A REPAIR

DISTRICT \_\_\_\_\_

#### HOWARD COUNTY HEALTH DEPARTMENT

DATE 01/05/98

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXXXXXXXX~~ 410-313-2640

DATE SYSTEM APPROVED 4/8/98

INDEXED

INSPECTOR Aul

Robert Thurman - Plumbing Connection IS PERMITTED TO INSTALL \_\_\_\_\_ ALTER X

ADDRESS 12789 Folley Quarter R, Ellicott City, MD 21042 PHONE 410-531-1724

SUBDIVISION Maisel Property LOT B3 ROAD Folly Quarter Road

PROPERTY OWNER Land Design and Development, Inc.  
Folly Quarter Road

ADDRESS \_\_\_\_\_

SEPTIC TANK CAPACITY \_\_\_\_\_ GALLONS

NUMBER OF BEDROOMS \_\_\_\_\_

\_\_\_\_\_ SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED \_\_\_\_\_

REPAIR - Relocation of existing septic system.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PLANS APPROVED BY \_\_\_\_\_ 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

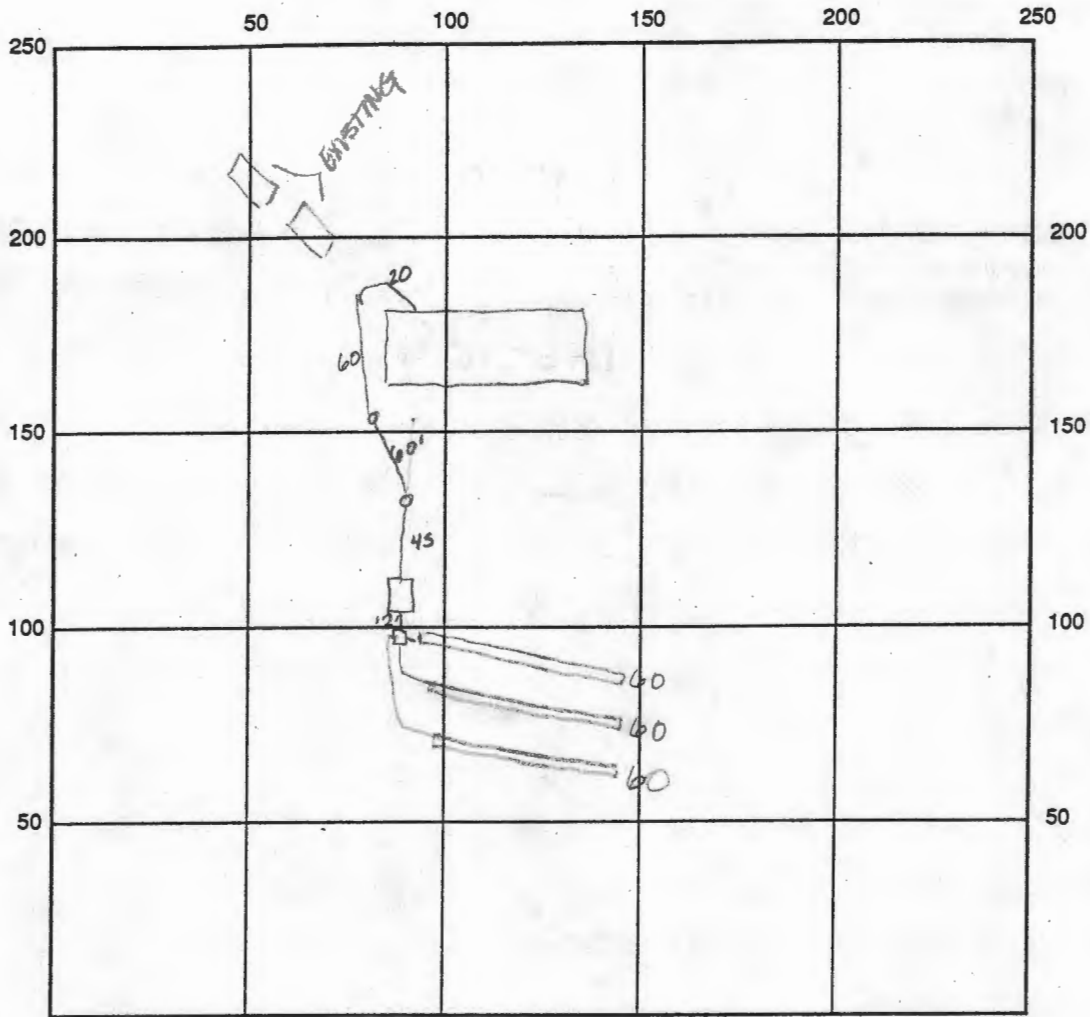
PERMIT VOID AFTER TWO YEARS

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**

A 59296C



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1500 gal CLEANOUTS OK

DISTRIBUTION BOX LEVEL OK Baffle is in

DRAIN FIELD/TITLE DEPTH 5.0 FT. TRENCH WIDTH 3.0 FT. INLET DEPTH 3.0 FT.

EFFECTIVE GRAVEL DEPTH 2.0 FT. TOTAL LENGTH 180 FT.

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 540 SQ. FT.

$\frac{2 \times 180}{3} = 120$

DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET 2.0 FT.

ABSORBENT AREA — SQ. FT.

REMARKS: 4/6/98 OK to cover all work - call for insp. when  
existing septic has been abandoned ALM  
4/8/98 old system abandoned All

DATE SYSTEM APPROVED 4/8/98 INSPECTOR A m' Mille

SEPTIC SPECIFICATIONS WORK-SHEET

SUBDIVISION: Maisel Prop

A 56952-BC

STREET NAME: \_\_\_\_\_

LOT NUMBER: 53

AVERAGE PERCOLATION RATE: 5mm SQUARE FEET PER BEDROOM: 180

NUMBER OF BEDROOMS: 3 LINEAR FEET OF TRENCH PER BEDROOM: 60

TOTAL LINEAR FEET OF TRENCH: 180 SEPTIC TANK CAPACITY: 1000gal

TOP SEAMED TANK REQUIRED? YES  NO

COMPARTMENTED TANK REQUIRED? YES  NO

TRENCH DIMENSIONS: Trench to be 3.0 feet wide. Inlet 3.0 feet below original grade. Bottom maximum depth 5.0 feet below original grade. Effective area begins at 4.0 feet below original grade. 2.0 feet of stone below distribution pipe.

=====
PUMPED SYSTEM PROPOSED: YES  NO

PUMPED SEPTIC SYSTEM DETAIL: \_\_\_\_\_ gallon pump chamber.

YES NO Top seamed pump chamber required?

Note 1: Septic pump detail to be provided by installer prior to issuance of septic permit.

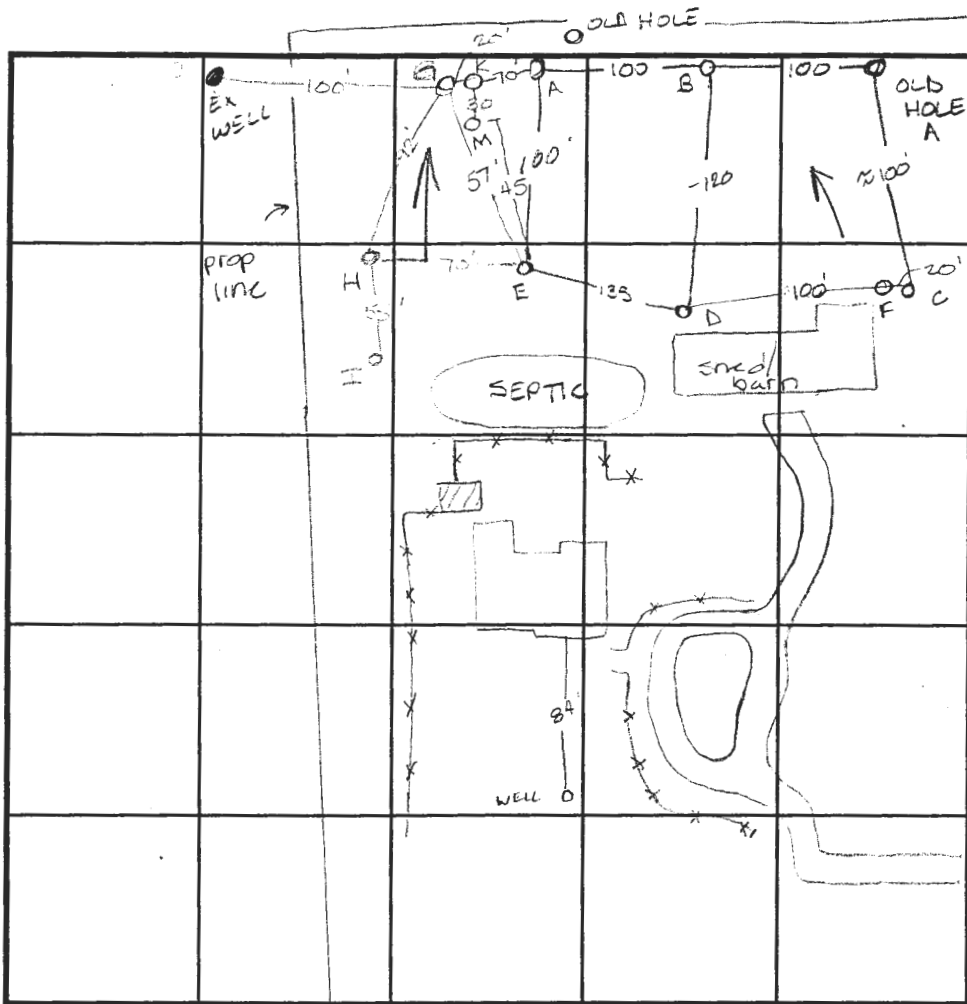
Note 2: Pump performance test is necessary prior to Health Department approval of pumped septic system.

=====
LOCATION: \_\_\_\_\_

ADDITIONAL NOTES: \_\_\_\_\_

Reviewer: \_\_\_\_\_

Date: \_\_\_\_\_



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

PROFILE A  
 red  
 orange  
 SiClm  
 20%  
 stones

---

red  
 brown  
 SiClm  
 10%  
 shale

BE  
 orange  
 brown  
 SiClm

---

orange  
 brn  
 SiClm  
 20%  
 micaceous  
 Rx  
 frags

DFC  
 like  
 B & E  
 but  
 ~5%  
 Rx  
 frags

SOIL PROFILE

0'

C

80-90%  
 sand  
 stone  
 rock  
 0.5

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
12-9-98	A	5.0 v12.0	11:40	11:42	11:42	11:44	2min
	B	3.0 v12.0	11:46	11:48	11:48	11:50	2min
	C	Insufficient depth to bedrock					F
	D	Visual to 11.5	- see profile				OK
	E	4.5 v12.0	11:57	11:59	11:59	12:01	2min
	F	Visual to 12.5	- see profile				OK

REMARKS \_\_\_\_\_

TYPE OF SOIL \_\_\_\_\_

TESTED BY Amy McMillen ALSO PRESENT Mike Johnson

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 2 min TRENCH WIDTH 30

INLET DEPTH 3.0 MAXIMUM BOTTOM DEPTH 5.0 SQ. FT./BEDROOM 180