

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>		District - 05 Account Number - 396204								
Owner Information										
<b>Owner Name:</b>		HIGHLAND DEVELOPMENT CORPORATION C/O BASKIN & STEINGUT				<b>Use:</b>		RESIDENTIAL		
<b>Mailing Address:</b>		PO BOX 228 CLARKSVILLE MD 21029-0228				<b>Principal Residence:</b>		NO		
						<b>Deed Reference:</b>		/01247/ 00416		
Location & Structure Information										
<b>Premises Address:</b>		LAKESIDE DR CLARKSVILLE 21029-0000				<b>Legal Description:</b>		LOT 22 3.745 A LAKESIDE DR BRIGHTON PINES S 1 AR 1		
<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>	6010
0034	0007	0396		0000			22	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>		
						3.7400 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>		261,700		275,500						
<b>Improvements</b>		0		0						
<b>Total:</b>		261,700		275,500		270,900		275,500		
<b>Preferential Land:</b>		0						0		
Transfer Information										
<b>Seller:</b>				<b>Date:</b>		<b>Price:</b>				
<b>Type:</b>				<b>Deed1:</b>		<b>Deed2:</b>				
<b>Seller:</b>				<b>Date:</b>		<b>Price:</b>				
<b>Type:</b>				<b>Deed1:</b>		<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>								
<b>Exempt Class:</b>		NONE								
Homestead Application Information										
<b>Homestead Application Status:</b> No Application										
Homeowners' Tax Credit Application Information										
<b>Homeowners' Tax Credit Application Status:</b> No Application					<b>Date:</b>					

1. This screen allows you to search the Real Property database and display property records.
2. Click **here** for a glossary of terms.
3. Deleted accounts can only be selected by Property Account Identifier.
4. The following pages are for information purpose only. The data is not to be used for legal reports or documents. While we have confidence in the accuracy of these records, the Department makes no warranties, expressed or implied, regarding the information.

C1 3302 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 33536

DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

DATE Received grid

DATE WELL COMPLETED grid

Depth of Well grid

PERMIT NO. grid

OWNER DEMMIT RICHARD last name first name STREET OR RFD NICHOLS DRIVE TOWN BRIGHTON SUBDIVISION RUPPERT PROP SECTION LOT EXISTING/PROPOSED LOT 47

WELL LOG

GROUTING RECORD

C 3

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

WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 10 NO. OF POUNDS 940 GALLONS OF WATER 60 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 23 ft.

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 15 WHEN PUMPING 16 TYPE OF PUMP USED (for test) S submersible

DESCRIPTION (Use additional sheets if needed) FEET FROM TO Check if water bearing

Table with 3 columns: DESCRIPTION, FEET, Check if water bearing. Rows include Yellow Clay, Gray mica rock, and a list of well numbers (1-6) with depths and notes like 'Filled in with cement & drilling materials'.

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

MAIN CASING TYPE Nominal diameter top (main) casing (nearest inch) Total depth of main casing (nearest foot) S 7 6 25

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

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

DEPTH (nearest ft.) H 0 23 105

A 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...

DRILLERS IDENT. NO. 238

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

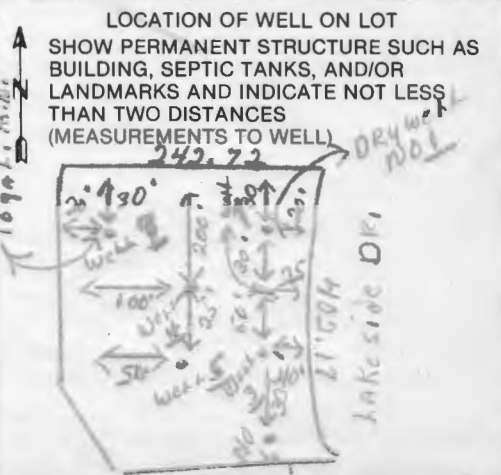
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

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

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

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)



B 1 **3097** SEQUENCE NO. (OEP USE ONLY)  
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

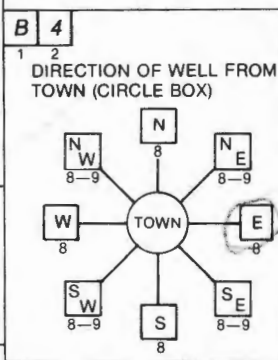
STATE OF MARYLAND  
 PERMIT TO DRILL WELL  
 please print or type

OEP PERMIT NUMBER  
**40-81-0599**  
 fill in this form completely

Date Received **8/10/84**  
**OWNER INFORMATION**  
 15 Last Name **DMMITT** Owner First Name **R. H. I.**  
 36 Street or RFD **9966 N.H. 49**  
 57 Town **ELICOTT** 70 State **72** Zip **21145**

B 3 LOCATION OF WELL  
 8 COUNTY **HOWARD** 21  
 23 SUBDIVISION \_\_\_\_\_ 42  
 SECTION **44** 46 LOT **48** 50  
**BRIGHTON** 52 NEAREST TOWN 71  
 MILES FROM TOWN (enter 0 if in town) **2** 73 **M I** 76 77 78

DRILLER INFORMATION  
 Driller's Name **Joseph L. Mayne** 77 License No. **80**  
 Firm Name **Joseph L. Mayne**  
 Address **5512 Ridge Rd. Mt. Airy, Md.**  
 Signature **Joseph L. Mayne** Date **4/6/84**



**Nickolas Road** 11 NEAR WHAT ROAD 30  
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
  
 34 **1211** 37 DISTANCE FROM ROAD  
 ENTER FT or MI **FT** 38 39

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  
 COUNTY NAME **HOWARD** COUNTY NO. **A 33536**  
 OEP SIGNATURE \_\_\_\_\_ STATE HEALTH INSERT S \_\_\_\_\_ 41  
 DATE ISSUED **061284** CO SIGNATURE **Frank Heimer CW** EXP. DATE **12/12/84**  
 NORTH GRID **497000** 50 55 EAST GRID **0802000** 57 63

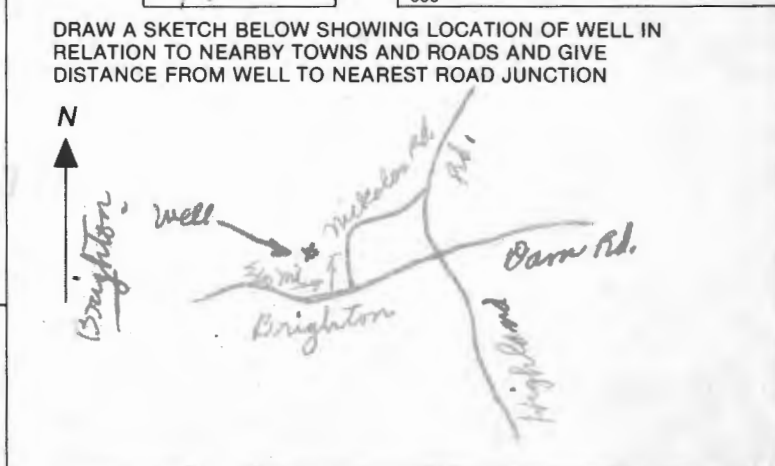
APPROXIMATE DEPTH OF WELL **140** 24 28 FEET  
 APPROXIMATE DIAMETER OF WELL **6** NEAREST INCH

METHOD OF DRILLING (circle one)  
 BORED (or Augered) JETTED Jetted & DRIVEN  
 30 ~~AIR-ROTARY~~ AIR-PERCussion ROTARY (Hydraulic Rotary)  
 37 ~~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 **800 2**  
 N **490 7**

**7/6/84 1 Log hole**  
**8/2/84 6 Log holes Filled**  
**16 bags JS, present**  
 LOCATION OK  
**25' CASING 1 1/2 ABOVE GROUND**  
**23' OPEN**  
**6 BAGS CEMENT**  
**8/10/84**  
**CW Heimer**

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  
 39  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) 41 \_\_\_\_\_ 52



Not to be filled in by driller (OEP USE ONLY)  
 APPROP. PERMIT NUMBER \_\_\_\_\_ 54 G A P \_\_\_\_\_ 63  
 FORCE **ES** WRITE INITIALS IN BOX PERMIT No. **40-81-0597**  
 67 68 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS





SEPTIC SYSTEM TO BE INSTALLED BEFORE BUILDING PERMIT. A 33536

SUBDIVISION: BRIGHTON PINES I

LOT NUMBER: 22

DRY WELL OR DRY WELL AND TRENCH

	<u>Septic Tank</u>	<u>sq. ft./bedroom</u>
3 bedroom	1000 gallon	_____
4 bedroom	1250 gallon	_____
5 bedroom	1500 gallon	_____

Inlet \_\_\_\_\_ feet below original grade.

Bottom maximum depth \_\_\_\_\_ feet below original grade.

Effective area begins at \_\_\_\_\_ feet below original grade.

NOTE: If trench is used to make up absorbent area, run the trench on level ground and leave a 5 foot earth buffer between dry well and trench. No trench is to exceed 100 feet in length. Trench inlet to be same as dry well, with \_\_\_\_\_ feet of stone below distribution pipe.

TRENCHES

200 sq. ft./bedroom

Trench to be 3 wide.

Inlet 4 feet below original grade.

Bottom maximum depth 6 feet below original grade.

Effective area begins at 4 feet below original grade.

2 feet of stone below distribution pipe.

- NOTE:
- (1) No trench to exceed 100 feet in length.
  - (2) If more than one trench used, a distribution box is required.
  - (3) Trenches to be installed on level ground.
  - (4) Call for inspection of trench before gravel is installed.
  - (5) Provide 6"-8" diameter cleanout and cap to grade or above on septic tank and drywell.
  - (6) If a Garbage disposal is used, increase septic tank capacity by 50% and increase absorbant sidewall area by 22%.

LOCATION: START FIRST TRENCH 15' FROM FROM LOT LINE  
AND 165' FROM THE LEFT LOT. RUN TRENCH(S) ALONG  
LEVEL GROUND TOWARD LEFT LOT LINE.

2/15/85 C. Williams

Hydrules to be  
sealed - cont.

8/2/84 - p

Filled 6 dry holes  
8/2/84 18 bags cement  
J

Permit

# APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 33536

P \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SERVICES  
P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 992-2330

DISTRICT 5

DATE 1-30-84

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 ANNA Mac Carthy

ADDRESS 4100 Colthard Ave DC Brook PHONE 202-363-2725

PROPERTY LOCATION: BRIGHTON PINES F

SUBDIVISION Prospert Dwp LOT NO. 22  
47

ROAD AND DESCRIPTION Nicholas Dt.

SIZE OF LOT 3A. TYPE BLDG. SFD  
(NUMBER OF BEDROOMS)

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.

Richard J. [Signature]  
(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS C Williams DATE 3-7-84

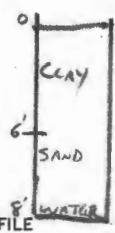
REASONS FOR REJECTION OR HOLDING UNCLEAR IF SUFFICIENT AREA (10,000 SQFT) ESTABLISHED BY PERC TESTS, ALSO UNCLEAR IF SUITABLE HOUSE & WELL SITE EXISTS. WAIT FOR CERTIFIED PLAN BEFORE MAKING DECISION. 3-7-84 CW

# THIS IS NOT A PERMIT

#1-2-3-5,6



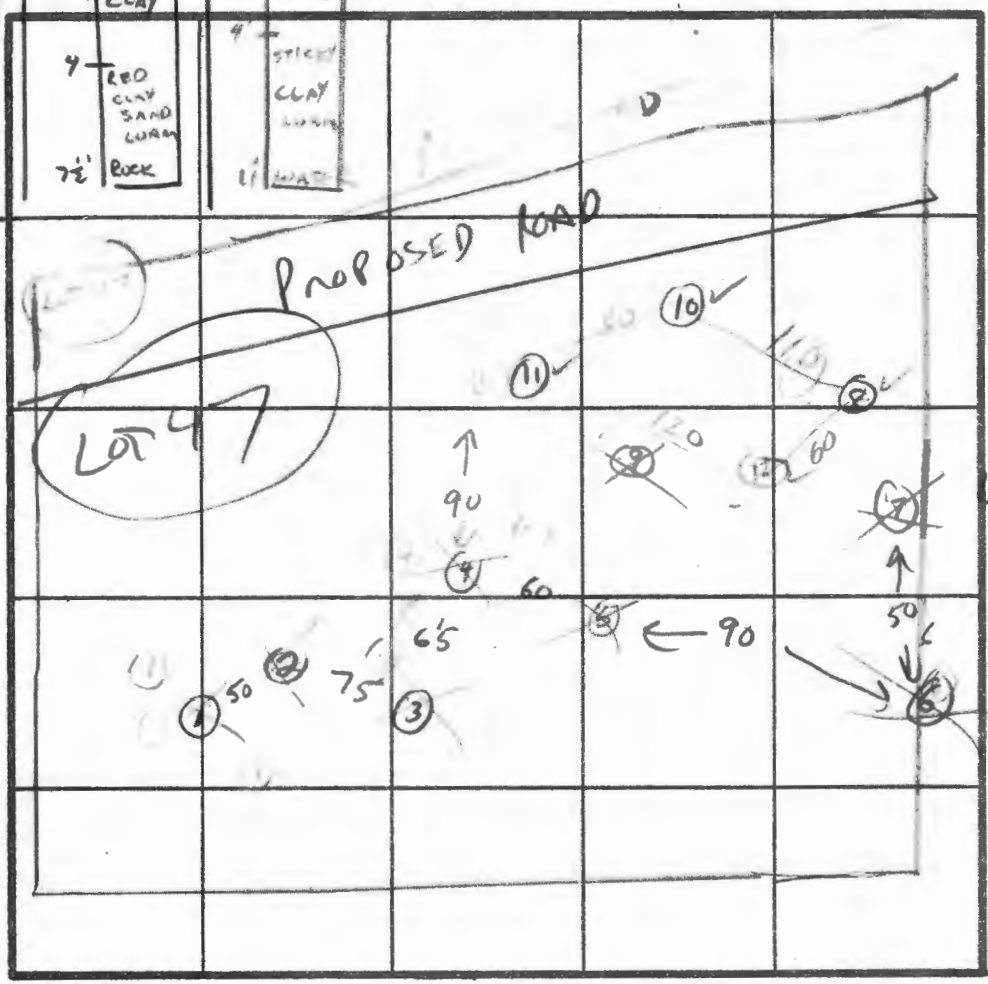
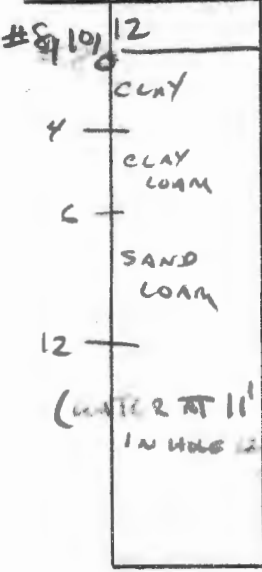
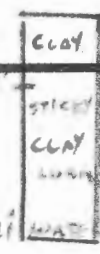
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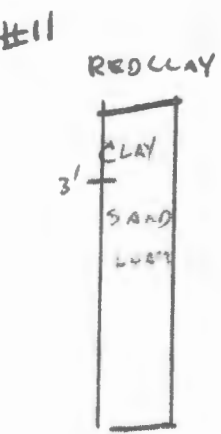
#7



#9



ST 48



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
3-7-54	1,2,3,5,6	7'	CLAY - WATER AT 7'					
"	4	9'	CLAY - 6', SAND WATER AT 8'					
"	7	7 1/2'	4' CLAY / CLAY LOAM; ROCK AT 7 1/2'					
"	8	4'	1:35	1:50	1:50	2:22	52 MIN	OK FOR LOW NO.
"		8'	2:00	2:02	2:02	2:04	2 MIN	
"		12'	RED CLAY TO 3' CHANGING TO SAND BY 5'					
"	9	4'	STICKY CLAY LOAM (WATER AT 11') TOP TO BOTTOM					X
"	10	4'	2:15	2:18	2:18	2:27	9 MIN	2 MIN
"		8'	2:15	2:17	2:17	2:19		
"	11	4'	2:28	2:28	2:28	2:30	2 MIN	
"		8'	2:26	2:28	2:28	2:36		
"		12'						
	12	3'	3:00	3:14	3:14	3:48	34 MIN	
		7'	3:00	3:02	3:02	3:04	2 MIN	
		12'	SAND - WATER AT 11'					

REMARKS

TYPE OF SOIL - MAY NEED SLIGHT INCREASE IN AREA

TESTED BY C. Williams

ALSO PRESENT DEMAIT, CISSEL

EH-12-1079

# APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 33536

P \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SERVICES

P O BOX 476 ELLICOTT CITY MARYLAND 21043  
TELEPHONE 992 2330

DISTRICT 5

DATE 1-30-84

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 ANNA Mac Carthy

ADDRESS 4100 Colquhoun Ave DC 20014 PHONE 202-363-2725

PROPERTY LOCATION:

SUBDIVISION Preppert Prop LOT NO. 47

ROAD AND DESCRIPTION Nicholas Dt.

SIZE OF LOT 3A. TYPE BLDG. SFD  
(NUMBER OF BEDROOMS)

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.

Richard Johnson with 45-1642  
(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS C. Williams DATE 3-7-84

REASONS FOR REJECTION OR HOLDING UNCLEAR IF SUFFICIENT AREA (10,000 SQFT) ESTABLISHED BY PERC TESTS, ALSO UNCLEAR IF SUITABLE HOUSE & WELL SITE EXISTS. WAIT FOR CERTIFIED PLAT BEFORE MAKING DECISION. 3-7-84 CW

## THIS IS NOT A PERMIT

# 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

A 35536

P \_\_\_\_\_

DISTRICT 5

DATE 1-30-84

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 ANNA Mac Carthy

ADDRESS 4100 Cathedral Ave DC 20016 PHONE 202-363-2725

PROPERTY LOCATION:  
SUBDIVISION Prepper Pond LOT NO. 47

ROAD AND DESCRIPTION Nicholas Dr.

SIZE OF LOT 3A. TYPE BLDG. SFD  
(NUMBER OF BEDROOMS)

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.

Richard J. [Signature]  
(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

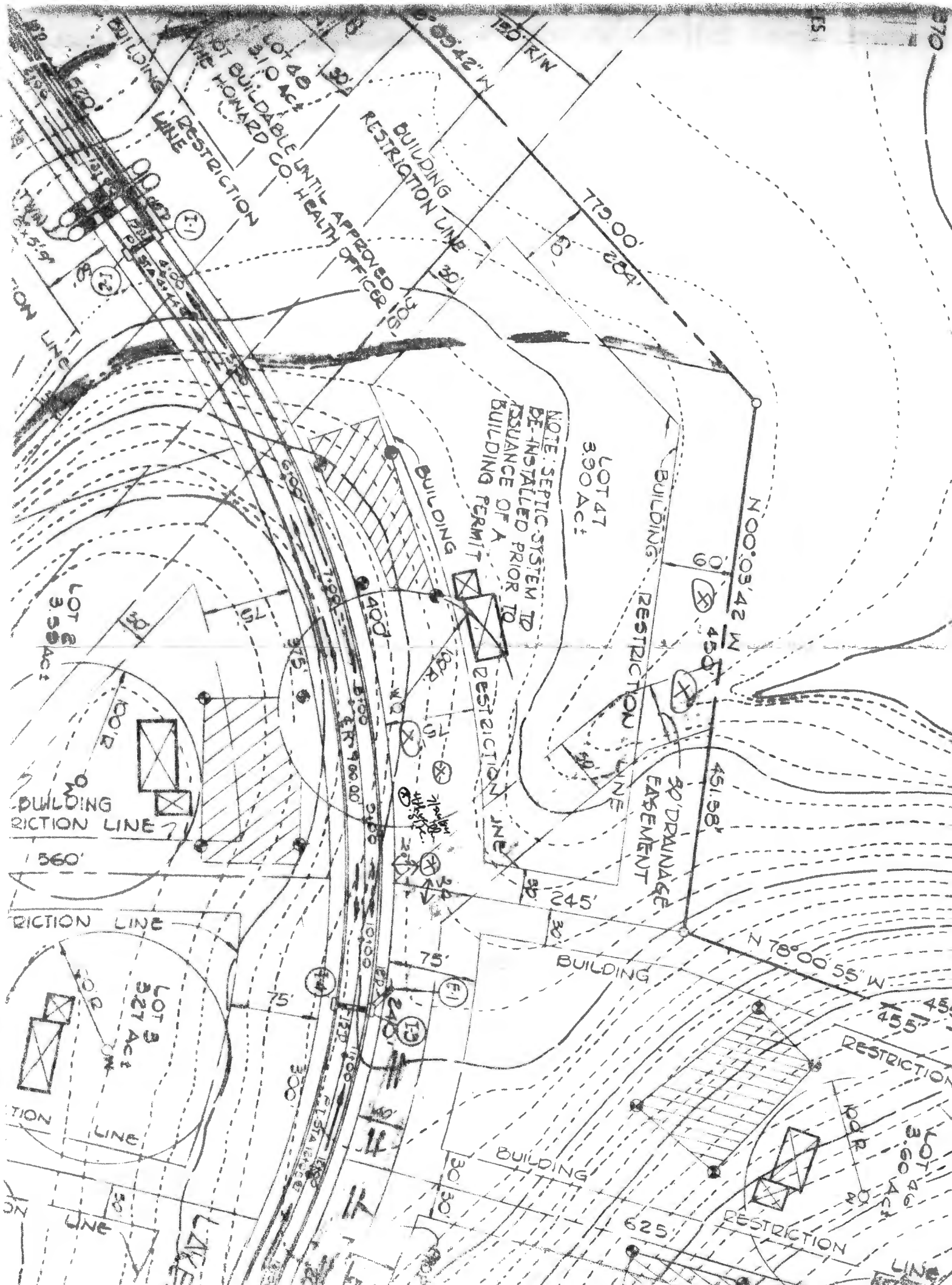
HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING \_\_\_\_\_

# THIS IS NOT A PERMIT

This is a subdivision that is being planned.  
Mr. Bennett wants to drill well for a farm.  
When subdivision is approved, then he will  
turn it over to them.





LOT 46  
3.10 AC  
NOT BUILDABLE UNTIL APPROVED BY  
THE HOWARD CO. HEALTH OFFICER IS.

NOTE: SEPTIC SYSTEM TO  
BE INSTALLED PRIOR TO  
ISSUANCE OF A  
BUILDING PERMIT

LOT 47  
3.90 AC

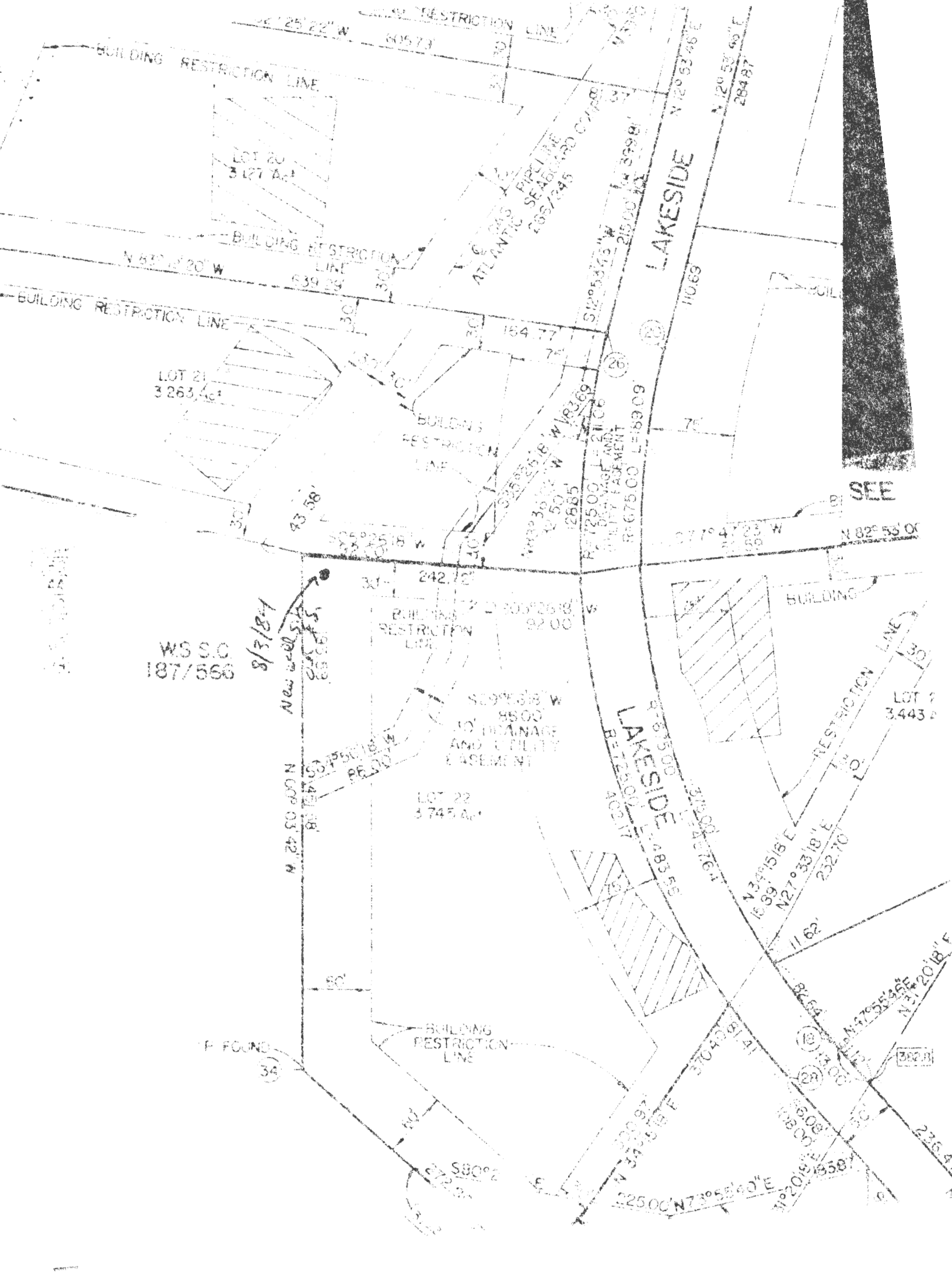
30' DRAINAGE  
EASEMENT

N 78° 00' 55" W  
455'

LOT 48  
3.55 AC

LOT 3  
3.27 AC

LOT 48  
3.60 AC



BUILDING RESTRICTION LINE  
LOT 20  
3,127 Ac

BUILDING RESTRICTION LINE  
LOT 21  
3,263 Ac

BUILDING RESTRICTION LINE

BUILDING RESTRICTION LINE

BUILDING RESTRICTION LINE

LOT 22  
3,745 Ac

LOT 3  
3,443 Ac

WS S.C.  
187/566

8/3/84

New well

SEE

F FOUND  
34

382.8

25° 25' 22" W 605.73

N 83° 15' 20" W 639.29

BUILDING RESTRICTION LINE

ATLANTIC PIPELINE SEAGRASS EASEMENT  
2057.295

LAKESIDE

N 120° 53' 46" E  
284.87

184.77

183.69

S 64° 05' 18" W 268.5

WATER AND UTILITY EASEMENT  
R: 725.00 L: 311.00  
R: 676.00 L: 189.00

110.69

75

N 82° 55' 00" E

BUILDING RESTRICTION LINE

WATER AND UTILITY EASEMENT  
S 89° 06' 18" W 85.00

LAKESIDE

N 00° 03' 48" W

RESTRICTION LINE

BUILDING RESTRICTION LINE

BUILDING RESTRICTION LINE

BUILDING RESTRICTION LINE

LAKESIDE

N 33° 15' 18" E 16.89  
N 27° 33' 18" E 232.70

11.62

N 57° 05' 45" E

N 31° 20' 18" E

N 37° 00' 00" E 370.48  
N 37° 00' 00" E 370.48

N 20° 18' 18" E 108.00

N 20° 18' 18" E 108.00

N 20° 18' 18" E 108.00

N 20° 18' 18" E 108.00

N 20° 18' 18" E 108.00

236.4

S 80° 00' 00" E

S 80° 00' 00" E

S 80° 00' 00" E

S 80° 00' 00" E