

5/25/94
2130

PERMIT

03-314
618

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 57706B

A 39585

DISTRICT 3rd

DATE 5/3/94

DATE SYSTEM APPROVED 5/25/94

INSPECTOR ALM

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXXX~~ 313-2640

INDEXED

South Carroll Backhoe, Inc. IS PERMITTED TO INSTALL ALTER

ADDRESS 4410 Salem Bottom Road, Westminster, Maryland 21158 PHONE 875-4197

SUBDIVISION Crystal Clear LOT 27 ROAD 13825 Kennard Drive

PROPERTY OWNER ANDREW SUZANNE KAHN ~~Jacobsen Construction, Inc.~~ Tim Cole

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

BLDG. PERMIT SIGNED
AND RETURNED 11-19-98
Serial # B7115789
Woodin deck

3
180
720

240
31720
720

TRENCHES - Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 6 feet below original grade. Effective area begins at 3 feet below original grade. 3 feet of stone below distribution pipe.

LOCATION - Place the distribution box 175 feet from the front lot line and 165 feet from the right lot line. Run trenches along contour in both directions.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 4/29/94 DKS

PLANS APPROVED BY C. Williams DATE 07/06/89

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

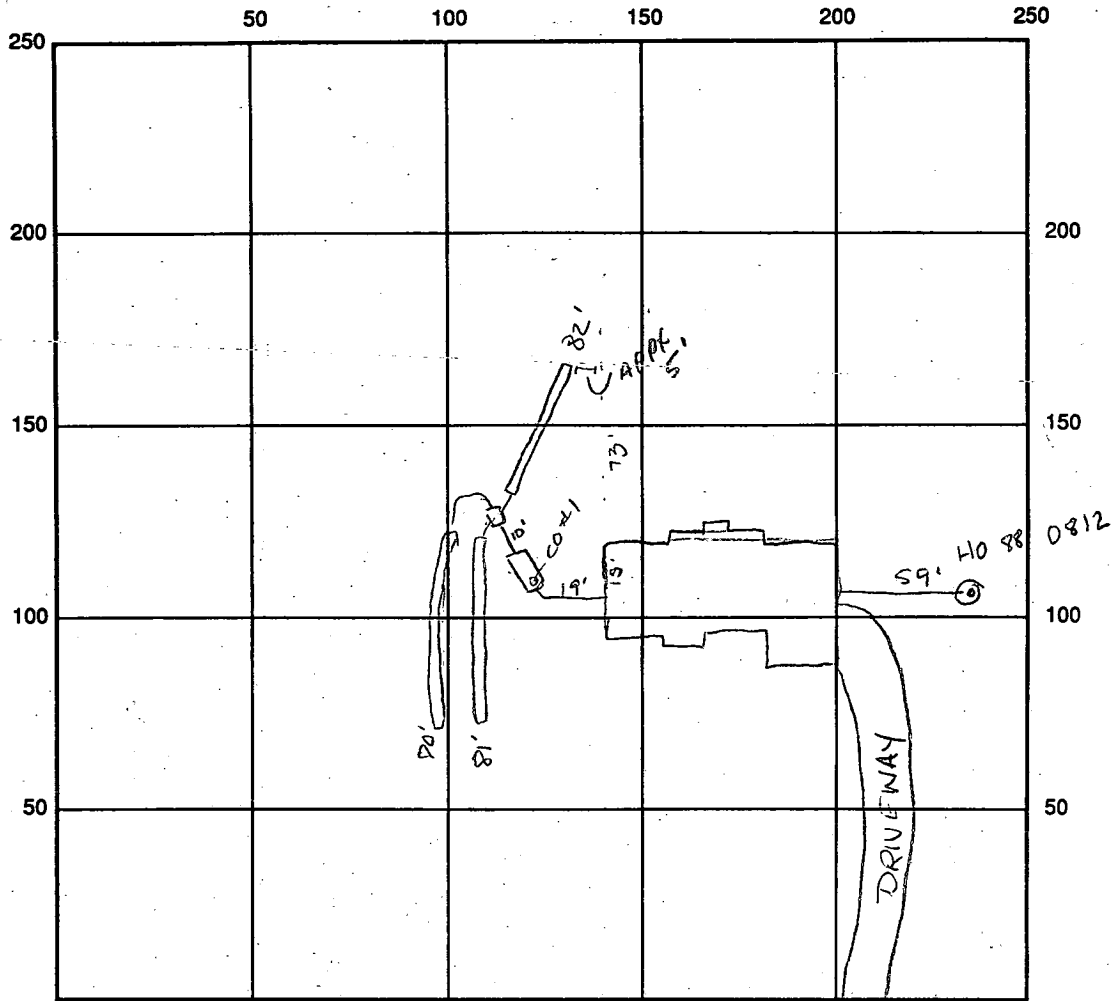
PERMIT VOID AFTER TWO YEARS

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
395-85



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
KENNARD DR

SEPTIC TANK LEVEL 1500 gal tank CLEANOUTS #1 OK
 DISTRIBUTION BOX LEVEL OK baffle is in
 DRAIN FIELD/TRENCH DEPTH 6-6 1/2' FT. TRENCH WIDTH 2' FT. INLET DEPTH 3' FT.
 EFFECTIVE GRAVEL DEPTH 3' FT. TOTAL LENGTH 280 @ 81 FT. 243 linear feet
 NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 729 SQ. FT. $\frac{243}{3} = 229$
 DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.
 ABSORBENT AREA — SQ. FT.

REMARKS: 5/25/94 Finish filling last 10' of each trench w/ stone (materials on site) then OK to cover all work final House connection made fem

5/31/94 WPT OK to cover - ALM

DATE SYSTEM APPROVED 5/25/94 INSPECTOR A. McMillen

APPLICATION

PERCOLATION TESTING

A 39585

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

DISTRICT 5TH

DATE 6-12-87

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 Renward Warfield Jr. Crystal Clear General Partnership
E. JACOBSEN Construction Inc
670-9114

ADDRESS 14667 Tridelphia Rd Glenely 21737 PHONE 442-2337

PROSPECTIVE BUYER N/A

ADDRESS _____ PHONE _____

PROPERTY LOCATION:
SUBDIVISION Crystal Clear LOT NO. LOT 27 Preliminary 32

ROAD AND DESCRIPTION West side Ivory Rd North side Tridelphia Rd
13825 Renward Drive

TAX MAP 22 PARCEL # 533

BLDG. PERMIT SIGNED
AND RETURNED 3/28/94
Serial # 52980
TYPE BLDG. SFD - 4 Brms
(SINGLE FAMILY DWELLING OR COMMERCIAL)

SIZE OF LOT 3 1/2 acres

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.

Mald Reil
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 7/28/87 Rene Sarisnering - hold for Subd. Permt SBA

Cancelled
Bldg. Permit Signed
AND RETURNED 9/11/89
Serial # 28942 - SFD
5 Bedrooms with Gas-Heat

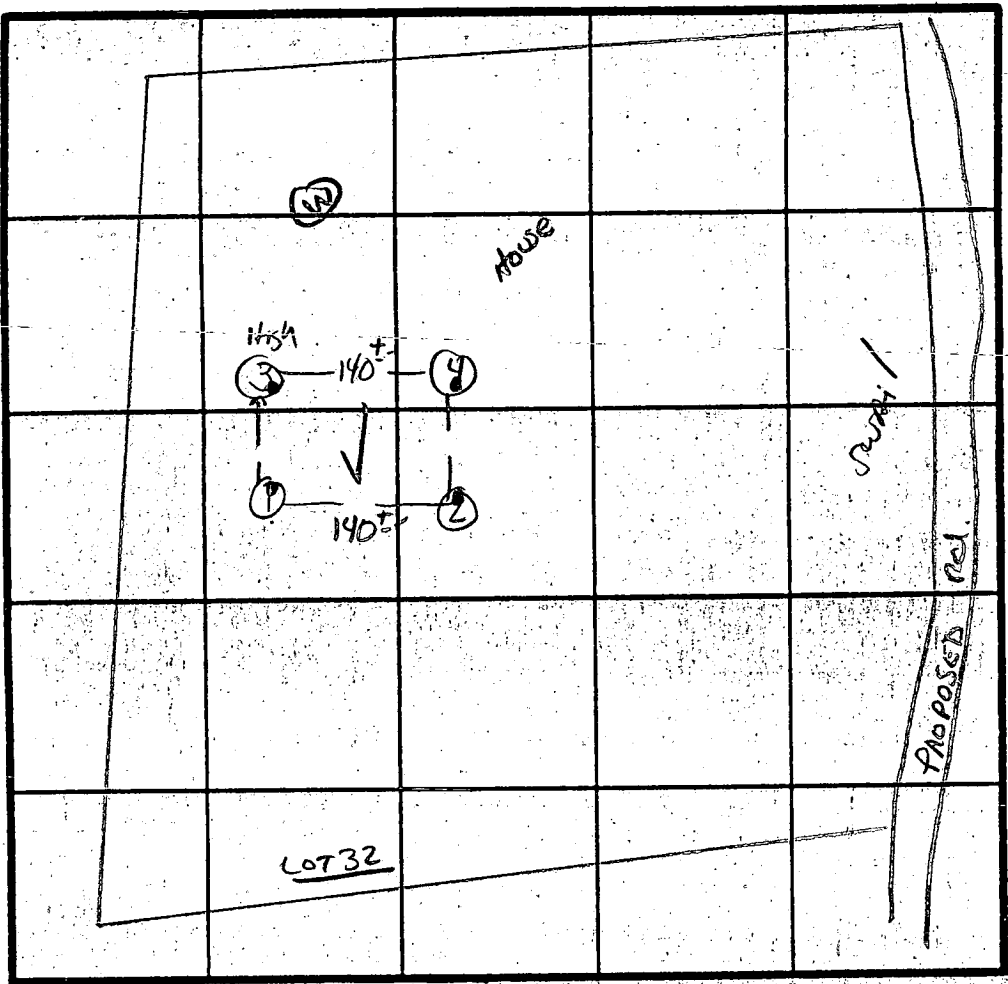
THIS IS NOT A PERMIT

③ - ④
① - ②
SOIL PROFILE

0
10-12"
2.5-3
13.5

AP
BROWN RED
SILTY CLAY
LOAM CLAY
FRASS

BROWN RED
SAND LOAM
10-15%
FRASS
Highly
micaceous



\bar{x} Perc 4min
180 ϕ 1CA
INLET 4"
BOTTOM 6"

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

DATE	TEST NO.	DEPTH	PRE-WET		TEST 1" DROP		TIME
			START	STOP	START	STOP	
7/23/87	1S	3.5'	2:36	2:38	2:38	2:42	4min
	1V	13.5'	UNIFORM soil below 3'				
	2S	3.5'	2:44	2:46	2:46	2:49	3min
		13'	UNIFORM soil below 3'				
	3V	13'	UNIFORM soil below 3'				
	4S	3.5'	3:05	3:07	3:07	3:11	4min
		7.5'	2:59	3:01	3:01	3:05	4min
	4V	13'	UNIFORM soil below 3'				

REMARKS Holes per PLAT / Shallow S45T only

TYPE OF SOIL ELUOK

TESTED BY S. Abel ALSO PRESENT MARK, K+K

EH-12-1079

B 1 9183 SEQUENCE NO. (DP-USE-ONLY)
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

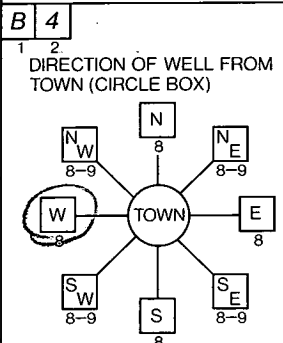
STATE OF MARYLAND PERMIT TO DRILL WELL please print or type

STATE PERMIT NUMBER
HO-88-0812
fill in this form completely

Date Received (APA) 05 26 89
OWNER INFORMATION
GOSHEW LAND CO.
31006 BRINK CT
GAITHERSBURG MD 20879

B 3 LOCATION OF WELL R 44413
HOWARD COUNTY
CRYSTAL CLEAR
SECTION 27 LOT 27
GLENELG
MILES FROM TOWN 1 MI

DRILLER INFORMATION
George F. Easterday
Driller's Name L. Franklin Easterday, Inc.
Firm Name 9265 Brown Church Rd., Mt. Airy, Md. 21771
Signature Date 5-24-89



B 4 13825 KENNARD DR
NEAR WHAT ROAD
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
DISTANCE FROM ROAD 220 FT

B 2 WELL INFORMATION
APPROX. PUMPING RATE (GAL. PER MIN.) 5
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
Howard A 29585
COUNTY NAME COUNTY NO.
DATE ISSUED 070389
CO SIGNATURE
NORTH GRID 522000 EAST GRID 0801000

USE FOR WATER (CIRCLE APPROPRIATE BOX)
D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

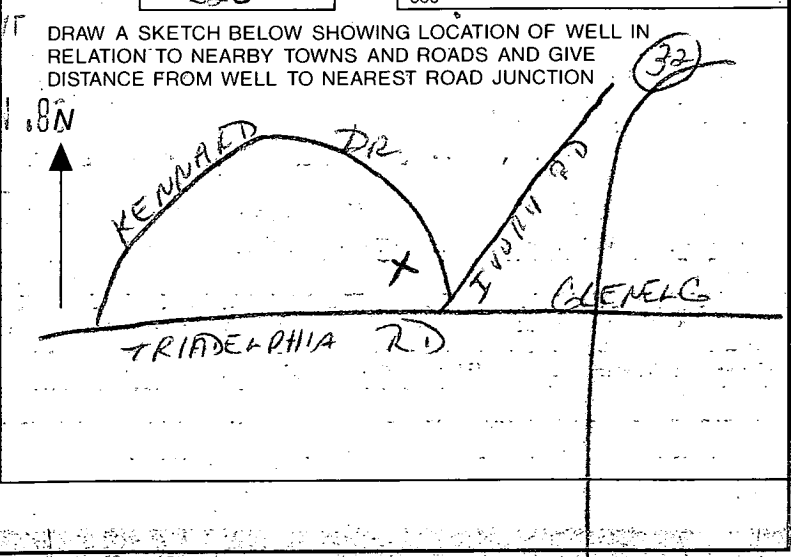
APPROXIMATE DEPTH OF WELL 200 FEET

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
SOURCES OF DRILLING WATER
1. well
WRITE THE BOX NUMBER FROM THE MAP HERE
E 800 1
N 520 2

APPROXIMATE DIAMETER OF WELL 6 INCH

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

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)
N THIS WELL WILL NOT REPLACE AN EXISTING WELL
Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
D 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)
APPROX. PERMIT NUMBER GAP
FORCE CW PERMIT No. HO-88-0812

SPECIAL CONDITIONS

9984

SEQUENCE NO. (DENV 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 A39585

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED 07-26-87

Depth of Well 2200 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" H0-88-0812

OWNER GOSWAM LAND CO. last name first name TOWN GLENELG SUBDIVISION CAYAL CLEAR SECTION LOT 27

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. Rows include Topsoil, Gray silt, Soft Brown Mica, Sand, gravel, silt, Brown mica, Gray mica.

GROUTING RECORD WELL HAS BEEN GROUTED (Y) (N) TYPE OF GROUTING MATERIAL CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 25 NO. OF POUNDS 1550 GALLONS OF WATER 125 DEPTH OF GROUT SEAL (to nearest foot) from 0 to 50 ft.

CASING RECORD casing types insert appropriate code below MAIN CASING TYPE (ST) Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 77

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

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

DEPTH (nearest ft.) 110 95 200

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. 46

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

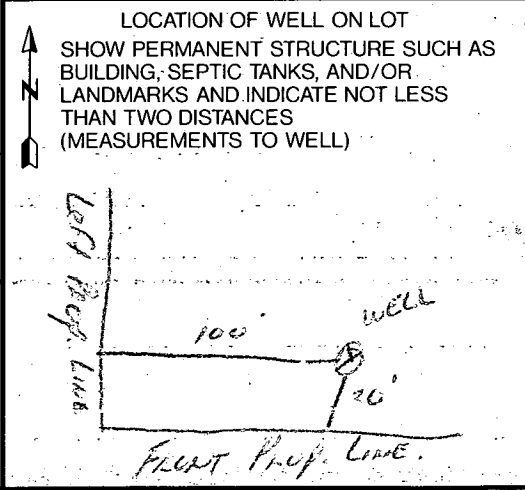
SITE SUPERVISOR (signature of driller or journeyman responsible for sitework if different from permittee)

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.) W Q 70 72 74 75 76 TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST HOURS PUMPED (nearest hour) 2 PUMPING RATE (gal. per min. to nearest gal.) 10 METHOD USED TO MEASURE PUMPING RATE WATER LEVEL (distance from land surface) BEFORE PUMPING WHEN PUMPING 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) (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)



5/27/94
PM
No insp - not done w/ installation
ACM

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3626-B Ellicott Mills Drive
Ellicott City, MD 21043
461-9933

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

5/31/94
WPI
OK to cover line
Aerial

New Installation Replacement
Receipt # _____ Date _____
Name of Installer Ben Lewis, Inc Telephone 4283500
License Number 11202
Certified Well Pump Installer _____ Well Driller _____ Registered Plumber
Name of Property Owner Jacobson Bldg Telephone 4283500
Subdivision Crestal Clear Lot # 27 Well Tag # _____
Site Address _____

Pump
1. Type
a. Deep well jet _____
b. Shallow well jet _____
c. Submersible
2. Make Galos
3. Model # 75405
4. Capacity 10 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 230
a. 110 _____
b. 220 _____

Pitless Adapter
1. Make _____
2. Model # 1"
3. Depth 42"

Tank
1. Capacity 10
2. Pressure relief valve? Yes

Piping
1. Type 200 PSF
2. Size 1"
3. NSF and/or BOCA Code approved
4. Depth of supply line _____

Well data
1. Depth 200 ft.
2. Yield 2.5 GPM
3. Static water level 21 ft.
4. Will water supply be disinfected by installer? _____

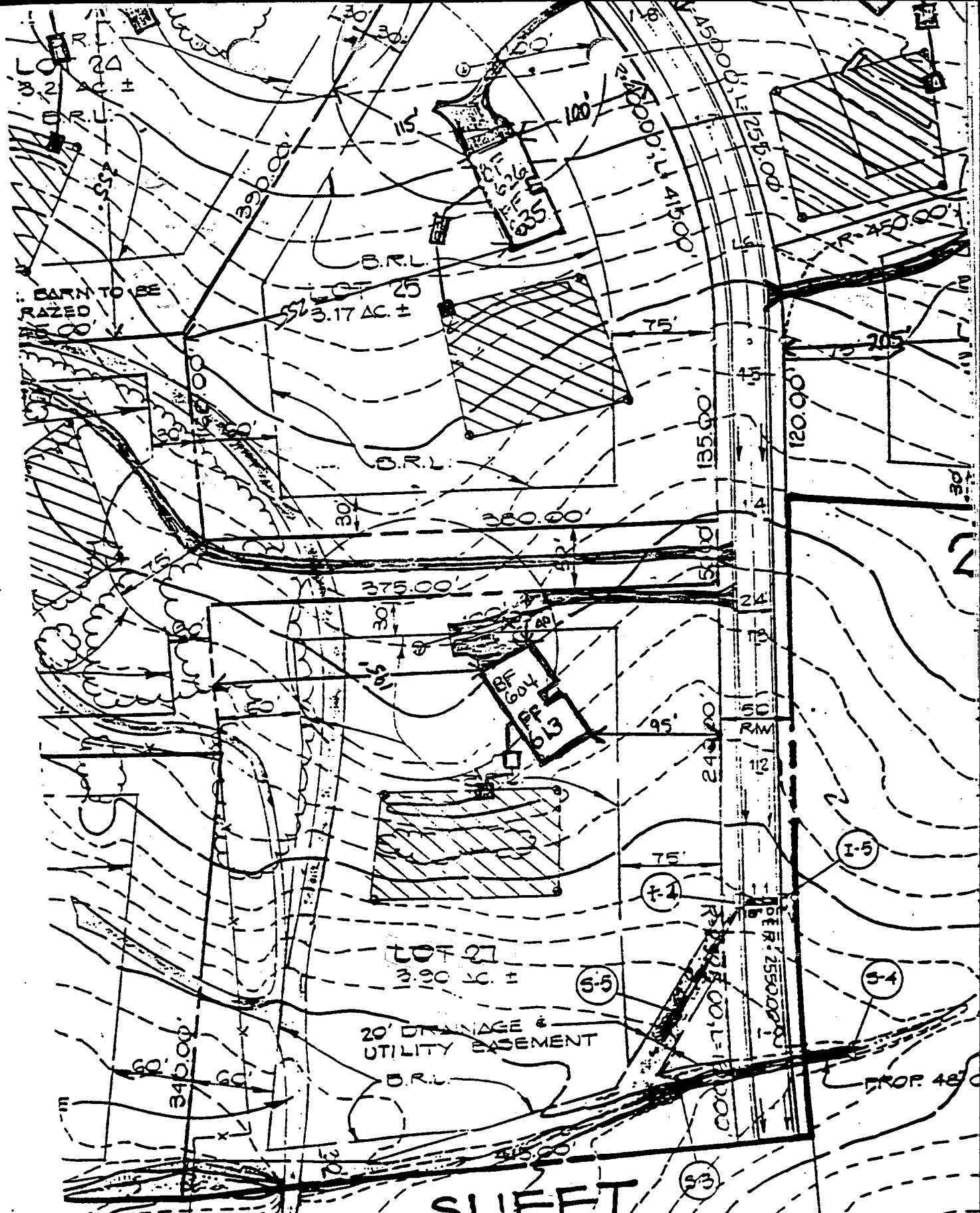
I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

Signature of Applicant: [Signature]

Date: 5/27/94

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



SHEET

Elevations of LOT 27
8/24/89 CWL

INV FROM HOUSE	604.9	EXIST ELEV AT HOUSE	608
INV INTO TANK	604.4	EXIST ELEV AT TANK	608
INV FROM TANK	604.1	EXIST ELEV AT WELL	612
INV INTO BOX	603.5	EXIST ELEV AT BOX	606
INV INTO TRENCH	603	EXIST ELEV AT TRENCH	606

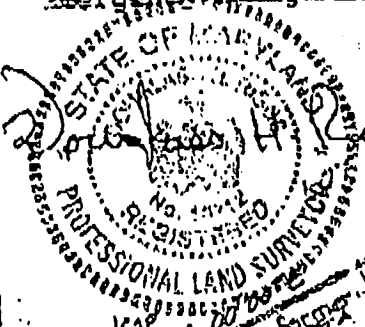
100 YEAR H/W E
X-SECT 2

FINAL LOCATION PLAN: LOT 27 CRYSTAL CLEAR

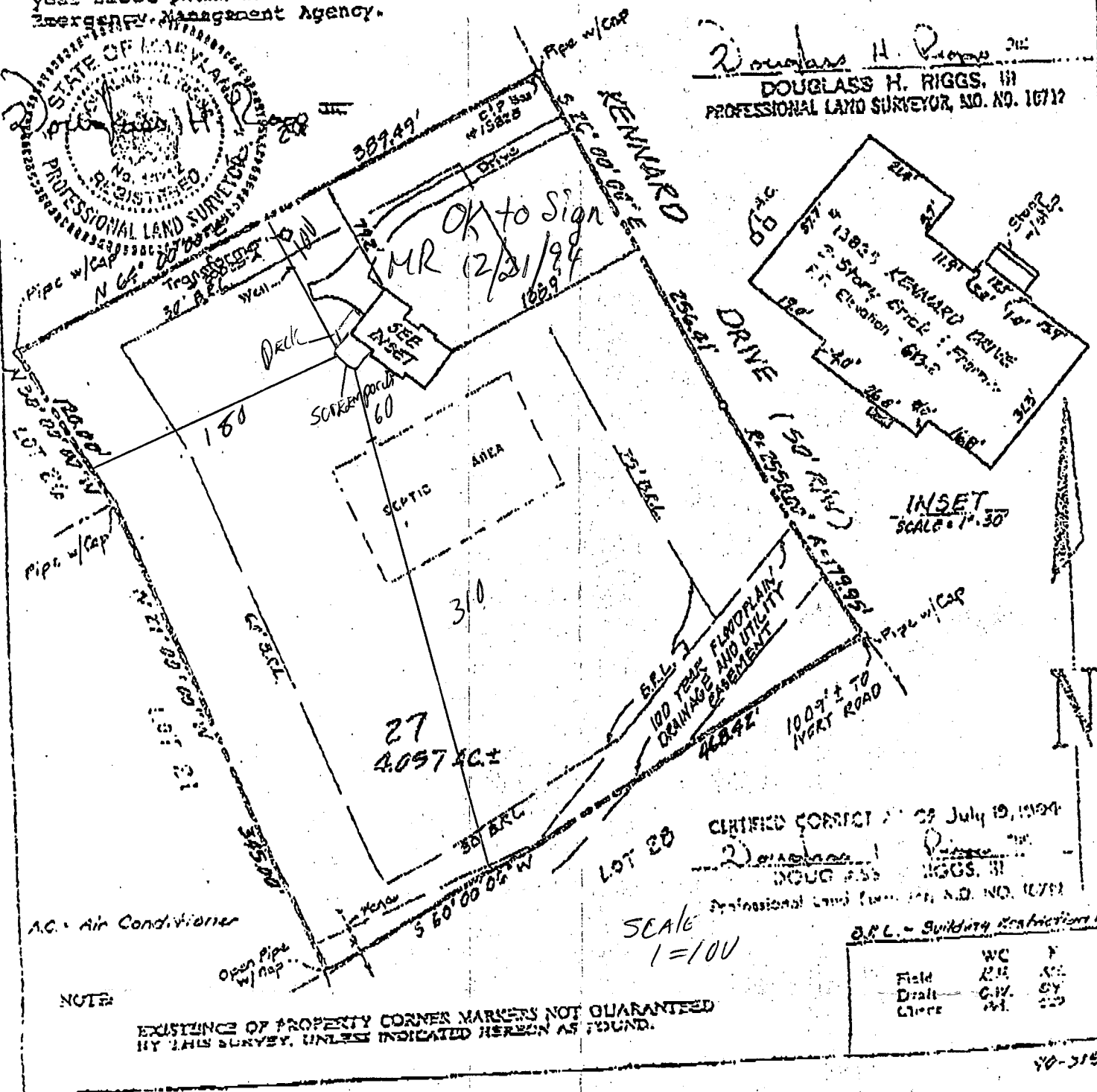
Howard County, Maryland
Scale: 1" = 100'
April 27, 1994

FLAT NO. 0465
MACRIS, HENDRICKS and GLASCOCK, P.A.
ENGINEERS & PLANNERS & SURVEYORS
5220 NICHOLS ROAD GAITHERSBURG, MD. 20878
(301) 670-0860

I hereby certify that the survey shown hereon is correct and the property is as delineated on the above stated plat as recorded among the Land Records of Howard County, Md. The improvements were located by a transit-tape survey made on April 27, 1994. Unless shown hereon, there are no visible encroachments. I further certify that no portion of the property lies within the designated 100 year flood plain as reflected on the Flood Insurance Rate Maps issued by the Federal Emergency Management Agency.



Douglas H. Riggs, III
DOUGLASS H. RIGGS, III
PROFESSIONAL LAND SURVEYOR, NO. NO. 10717



LOT 28 CERTIFIED CORRECT July 19, 1994
Douglas H. Riggs, III
Professional Land Surveyor, No. 10717

SCALE
1" = 100'

D.P.L. - Building Restrictions

Field	WC	F
Draft	R.H.	A.C.
Check	G.W.	S.Y.
	M.L.	

NOTE: EXISTENCE OF PROPERTY CORNER MARKERS NOT GUARANTEED BY THIS SURVEY, UNLESS INDICATED HEREON AS FOUND.

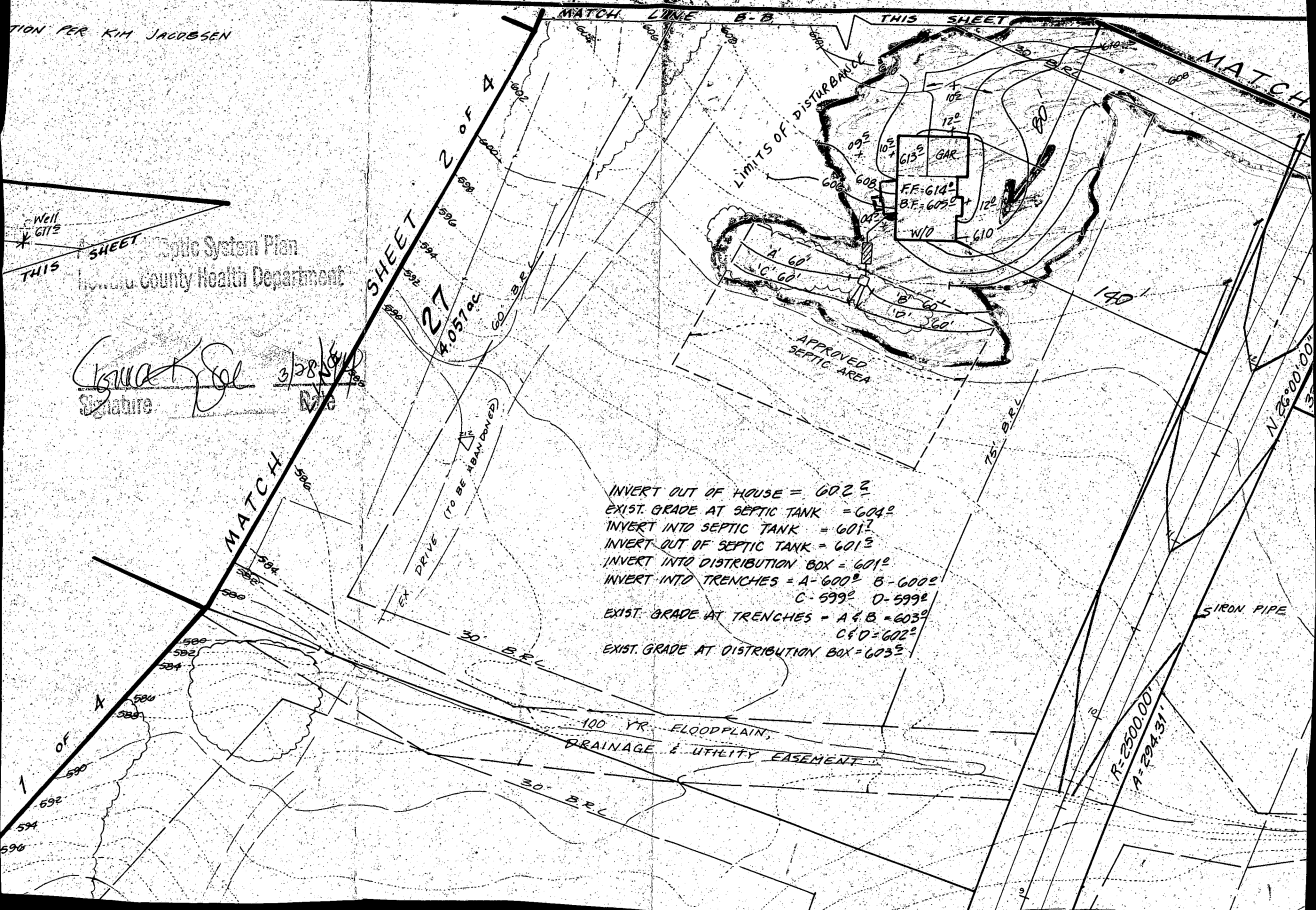
C. JACOBSEN CONST., INC. 081500000

40-315

...TION PER KIM JACOBSEN

Well
* 6112
THIS SHEET
Septic System Plan
Hawaii County Health Department

Signature
3/28/2015
Date



INVERT OUT OF HOUSE = 602.2
EXIST. GRADE AT SEPTIC TANK = 604.2
INVERT INTO SEPTIC TANK = 601.7
INVERT OUT OF SEPTIC TANK = 601.3
INVERT INTO DISTRIBUTION BOX = 601.2
INVERT INTO TRENCHES = A-600.2 B-600.2
C-599.2 D-599.2
EXIST. GRADE AT TRENCHES = A & B = 603.2
C & D = 602.2
EXIST. GRADE AT DISTRIBUTION BOX = 603.2

100 YR. FLOODPLAIN,
DRAINAGE & UTILITY EASEMENT

R=2500.00'
A=294.31'

IRON PIPE

N 26°00'00"

APPLICATION

HOWARD COUNTY

SERIAL NUMBER

PERMIT APPLICATION

DEPARTMENT OF INSPECTIONS, LICENSES & PERMIT

3430 COURT HOUSE DRIVE, ELLICOTT CITY, MARYLAND 21043

00015089

BUILDING ADDRESS (HOUSE NO., STREET, TOWN OR AREA)

13825 Kennard DR
Glenely, MD 21737

10909

GRADING/SEDIMENT CONTROL YES NO SDP #

DESCRIPTION OF WORK AUTHORIZED

Build AN open wooden deck
20x22, 440' on REAR of S/F
home with hot tub and stairs
to grade Top 6'

LOT NO.	PARCEL NO.	SEC.	AREA	BLOCK NO.	LIBER	FOLIO
27	533			7		

SUB DIVISION	ZONE	ZONE MAP	ELEC. DIST.	CENSUS TR.
Crystal Clear		22	3	6030

OWNER NAME AND ADDRESS

Suzanne Kahn 410 489-9911
13825 Kennard Dr
Glenely MD 21737

OCCUPANT'S NAME AND ADDRESS

SAME

ARCHITECT OR ENGINEER'S NAME AND ADDRESS

SAME

CONTRACTOR'S NAME AND ADDRESS

J. S. Architect 410-602-1720
96 River Oaks Cr
Belt MD 21208

EXISTING USE

S/F home

PROPOSED USE

S/F with deck

EST. CONSTRUCTION COST

5,000

LICENSE NUMBER

39977

PERMIT FEE

SIZE OF BLDG.	FRONT	DEPTH	HEIGHT
Deck	20'	22'	6'

TYPE OF BLDG.	AREA	VOLUME	ROOF
B. ROOMS			
ROOMS			
BATHS			
FIREPLACES			

FOOTINGS	FOUNDATION	S. WALLS
Post-Beam		

UTILITIES	WATER/WELL	SEWER/SEPTIC	GAS	ELECTRICITY	TYPE OF HEAT	AC
	Well	Septic				

I have carefully examined and read this application and know the same is true and correct, and that is doing this work, all provisions of Howard County Ordinances and the State Laws of Maryland will be complied with, whether specified or not; and I will notify the Department of Inspections, and Permits twenty-four hours in advance when I am ready for the inspections called for elsewhere in the application; and that no work will be covered up until such inspections have been complied with.

J. S. Arch
SIGNATURE
0 President
TITLE
11-17-95
DATE

FOR OFFICE USE ONLY

W/S CODE _____

DISTANCE IN FEET FROM R/W LINE TO FRONT BUILDING LINE _____

SIDE YARD _____
(DISTANCE IN FEET FROM SIDE BLDG. LINE TO SIDE PROPERTY LINE)

TO SIDE BUILDING LINE _____
DISTANCE IN FEET, REAR YD. REQUIRING SET

BACK _____ (CORNER LOT ONLY) _____ SDP # _____

Check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING		
SHA		
SEDIMENT/GRADING		
BUILDING OFFICIAL		
WATER & SEWER		
HEALTH DEPT.	11/19/98	A. M. Miller
FIRE PROTECTION		
STORM WATER MGM.		

CAUTION

To begin construction before a permit placard has been issued and displayed on the job is a violation of the law. Use and occupancy permit must be applied for two weeks before it will be issued.

IMPORTANT: PLEASE SHOW ZIP CODES AND AREA CODES WHEREVER REQUIRED.

LP-69-591

CR 4158

Distribution of Copies:
 White - Building Official
 Green - Planning & Zoning
 Yellow - Engineering
 Pink - Health Dept.
 Gold - S.H.A.

APPROVED _____ DATE _____

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)

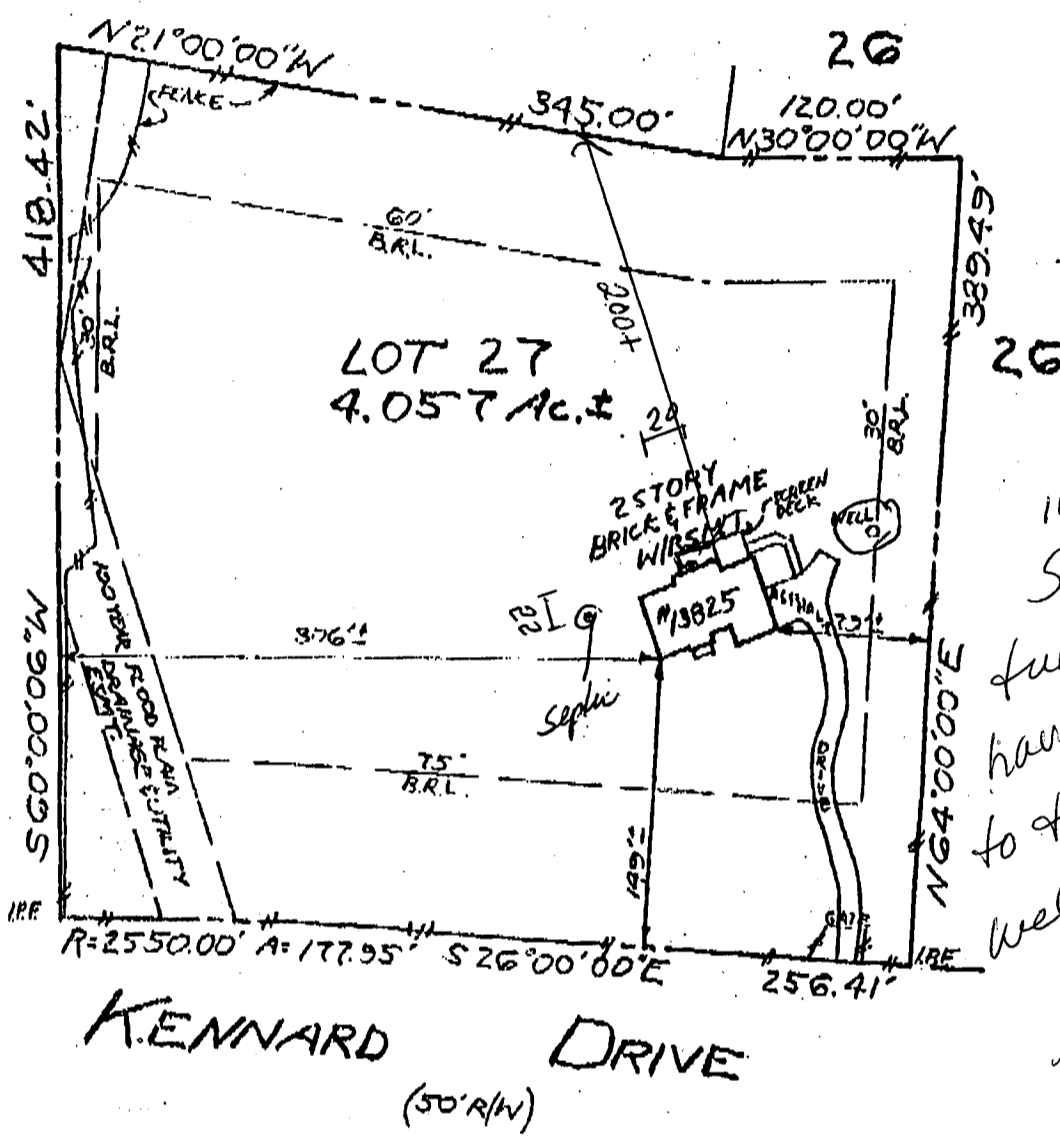
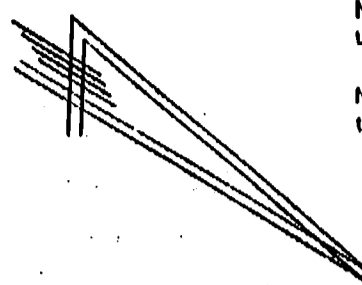
A 395-85

The plat is of benefit to a consumer only insofar as it is required by a lender or a title insurance company or its agent in connection with contemplated transfer, financing or re-financing. The plat is not to be relied upon for the establishment or location of fences, garages, buildings, or other existing or future improvements. The plat does not provide for the accurate identification of property boundary lines, but such identification may not be required for the transfer of title or securing financing or re-financing.

NOTE: The lot shown hereon does not lie within the limits of the 100 year flood plain as shown on FIRM Panel No. 2
Date of Map: 12-9-86
Flood Zone: C

NOTE: No property corners found or set unless otherwise noted.

NOTE: The accuracy of this survey and the apparent setback distances is 2 Ft. +/-



LOCATION DRAWING
LOT 27
CRYSTAL CLEAR
HOWARD COUNTY, MD.



SURVEYOR'S CERTIFICATE

I hereby certify 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 apparent encroachments, if any. This Plat is not for determining property lines or for construction of improvements, 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.

Michael J. Bazis
Michael J. Bazis RPLS # 10958

THIS SURVEY IS FOR TITLE PURPOSES ONLY

JOB # 98.0447H	DATE 4-27-98
FIELD D.H.	DRAFT <i>CB</i>
	P.B. P# 8443
	SCALE: 1" = 100'

R.C. KELLY & ASSOCIATES, INC.
ENGINEERS & SURVEYORS
10111 COLESVILLE ROAD, SUITE 133
SILVER SPRING, MARYLAND 20901
(301) 593-8006
FAX: (301) 681-7210