

11/21/90 11:00am
11/20/90
2/26/91 10:00
P.S.A.P.
P.M.

02-339528

11/20/90 (2) P.C.O.
C.B.

PERMIT

P 46589

SEWAGE DISPOSAL SYSTEM

A 41167

MARYLAND STATE DEPARTMENT OF HEALTH

DISTRICT 5th

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED

DATE 1/1/91

DATE SYSTEM APPROVED 2/26/91

INSPECTOR RJ

Norman Collins

IS PERMITTED TO INSTALL ALTER

ADDRESS 7702 Gaither Road, Sykesville, Md. 21784 PHONE 795-8618

SUBDIVISION Burleigh Manor ROAD 10430 Kingsbridge Road LOT 666

PROPERTY OWNER Steward J. Greenebaum Dominic + Concetti CORRIERE

ADDRESS _____

~~Garbage grinder is used to increase septic tank capacity by 50% and absorption area by 25%~~

~~GARBAGE GRINDER XXXX YES XXXXXXXXXXXX NO XXXXXXX~~

SEPTIC TANK CAPACITY 1500 GALLONS NUMBER OF BEDROOMS 5

TRENCHES - 180 sq. ft. per bedroom. Trench to be 33 feet wide. Inlet 3 1/2 feet below original grade. Bottom maximum depth 5 1/2 feet below original grade. Effective area begins at 3 1/2 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - As seen from Kingsbridge Road, start first trench 100' from rear lot line and 140' from left lot line. Run trenches on contour toward right 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. 5-3-90 JEN

PLANS APPROVED BY Mark Rifkin/Craig Williams cm DATE 04/02/90

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

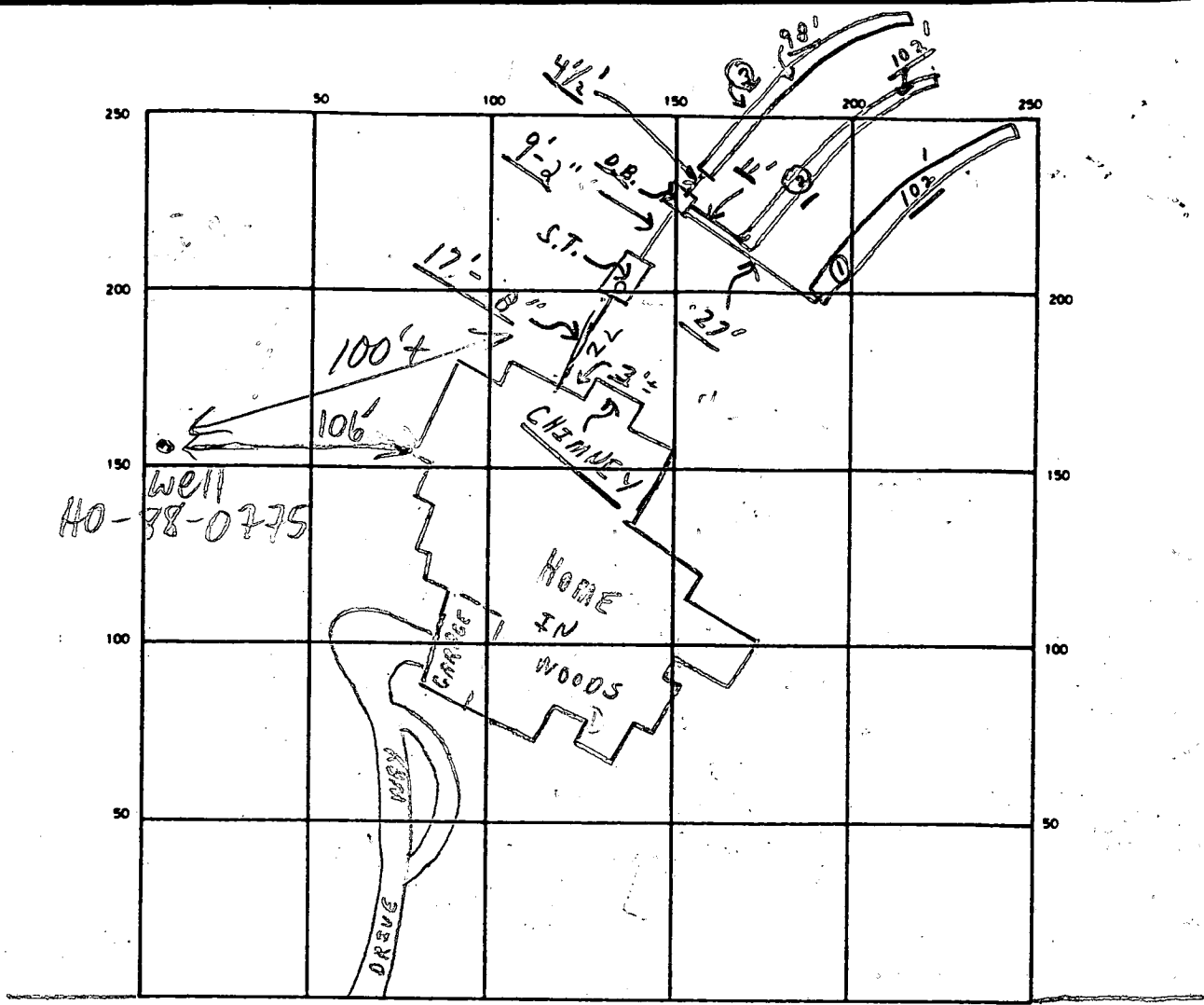
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

BLDG. PERMIT SIGNED
AND RETURNED 2/8/95
Serial # 5816 - dual

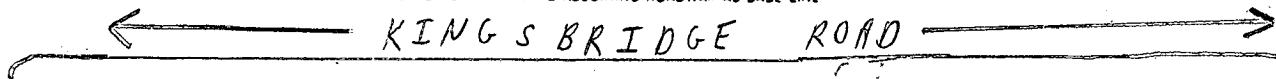
***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

A
41167



INDICATE NORTH -- NAME ADJOINING ROADWAY AS BASE LINE



SEPTIC TANK LEVEL 1500 OK CLEANOUTS OK
 DISTRIBUTION BOX LEVEL OK (Baffle is 11")
 DRAIN FIELD/TILE FIELD DEPTH 5 1/2 FT. ^{avg.} TRENCH WIDTH 3 FT. INLET DEPTH 3 1/2 FT.
 EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 302 FT.
 NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 906 SQ. FT.
 DRYWELL INSIDE DIAMETER _____ FT. EFFECTIVE DEPTH BELOW INLET _____ FT.
 ABSORBENT AREA 906 SQ. FT.

REMARKS 11/20/90 A.M. - Partial, ok to continue: septic system
in woods at rear of home; 11/20/90 P.M. - Partial - all trenches
dry and being stored; No house connection. HOLD FOR CHG
→ 11/21/90 NO HOUSE CONN, NO S.T. C/O; OK TO COVER ALL
EXCEPT HOUSE CONN MR 12/6/90 C/O OK, NO HOUSE CONN MR
11/20/90 (No W.P. I. work) C.B.P.; 11/190 2/26/91 House & Tank
connected water flow test R.H.
 DATE SYSTEM APPROVED 2/26/91 INSPECTOR B. Hodge

12/6/90
AM

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 # 46666
Date 12/11/90
Name of Installer J. JOSEPH GARTLAND, Inc. Telephone 875-2400
License Number 1713
Certified Well Pump Installer Well Driller Registered Plumber
Name of Property Owner DOMINIC CORRIERE Telephone 977-5457
Subdivision BURLEIGH MANOR Lot # 666 Well Tag # HO-88-0775
Site Address 10430 Kings Bridge Rd.

Pump
1. Type
a. Deep well jet
b. Shallow well jet
c. Submersible
2. Make Goulds
3. Model # 10EJ05422
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
a. 110
b. 220

Pitless Adapter
1. Make NAVAID
2. Model # PT800
3. Depth 42'

Tank
1. Capacity 42 gal
2. Pressure relief valve? 75 PSI

Piping
1. Type PLASTIC
2. Size 1"
3. NSF and/or BOCA Code approved
4. Depth of supply line 42"

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

12/6/90 ALL WORK
MR COVERED - NOTHING
VISIBLE

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: _____

Date: 11/26/90

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

NOV 28 1990
HOWARD COUNTY
RECEIVED

APPLICATION

PERCOLATION TESTING

A 41167

P _____

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

DISTRICT 5TH

DATE 3-7-88

2 titles Required.

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

Steward J. Greenebaum - 484-8400
~~Gerald M. Katz, Trustee c/o Whitman, Regardt and Associates~~

ADDRESS 2315 Saint Paul Street, Balt., MD 21218 PHONE 301-235-3450

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Burleigh Manor Section 2 LOT NO. 666 (old lot # 51)

ROAD AND DESCRIPTION West of the intersection of Centennial Lane and Old Annapolis Rd.
10430 Kingsbridge Road.

TAX MAP 23, 24 PARCEL # 290

SIZE OF LOT 3 acre 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.

(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

BLDG. PERMIT SIGNED

AND RETURNED 9/11/89

Serial # 28969

SFD - 5 bedrooms

HD-216

THIS IS NOT A PERMIT

6-7 same elevation, lowest on lot

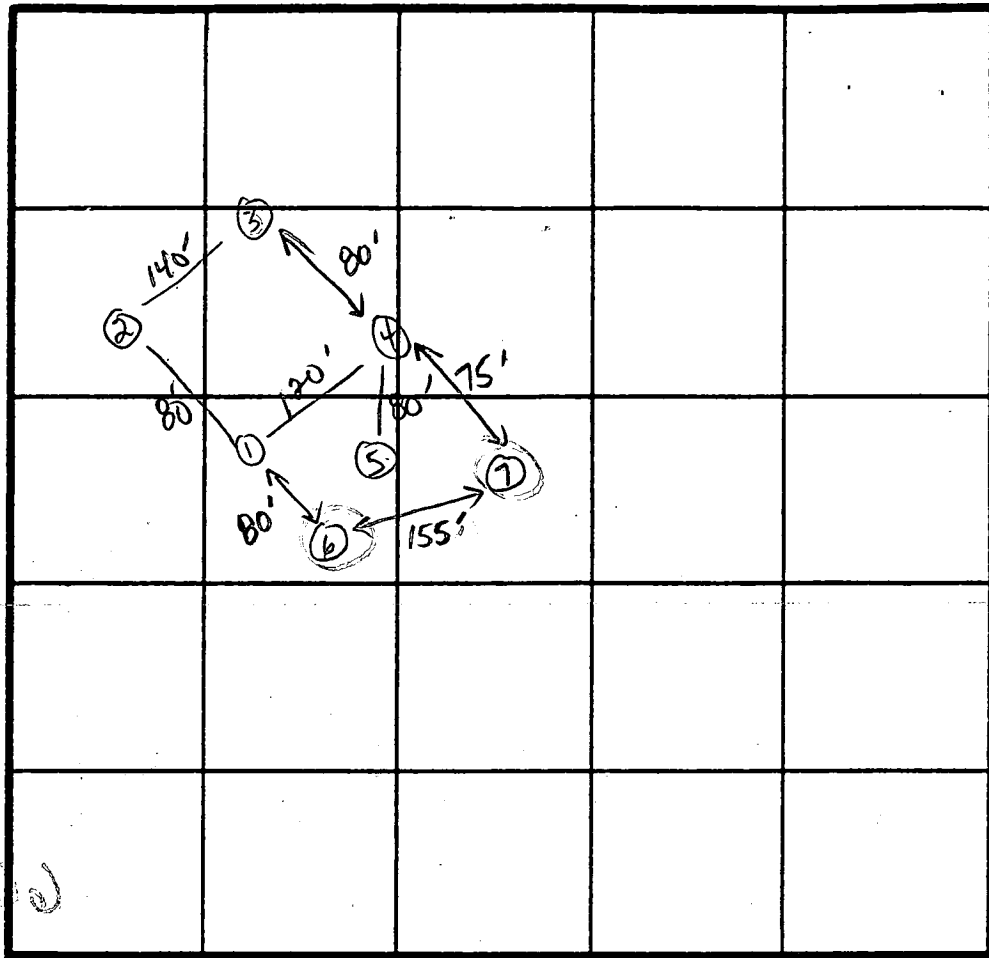
⑥

SOIL PROFILE

0-4.5 Rd-br
silt
loam,
trc gvl

4.5-10.5 Brown
sa silty,
trc white
sa silt

10.5'
Bottom
Water
at 10'



66
34
248
128
152

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

⑦

0-5.0 Rd-br
silt
loam,

5-10.5 Brown
sa silty,
At 6.0 ft
decomposed
rock pieces
< 40%

10.5 Refusal
water at
10.0 ft

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
3-31-88	⑥	10.5 ✓	(see profile)		water at 10.0'		Failed
↓	⑦	10.5 ✓	(see profile)		water at 10.0'		Failed

REMARKS Lower holes 6 & 7 failed. Water at 10.0 ft.

TYPE OF SOIL _____

TESTED BY Jane E. Nadeau

ALSO PRESENT Pope Woodard
Skip, Rocky

APPLICATION

PERCOLATION TESTING

A 39200

P _____

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

DISTRICT _____

DATE _____

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 Gerald M. Katz, Trustee c/o Whitman, Reguardt and Associates

ADDRESS 2315 St. Paul Street, Baltimore, Md. 21218 PHONE (301) 235-3450

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Burleigh Manor Section 2 LOT NO. 51

ROAD AND DESCRIPTION West of the intersection of Centennial Lane and Old Annapolis Road

TAX MAP 23, 24 PARCEL # 290

SIZE OF LOT 3 Ac. 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. Steve S. Love (301) 484-8400
(SIGNATURE OF APPLICANT)

APPROVED BY B. Nixon FOR Shallow only DATE 2/5/88

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 6-5-87 Rec. Satisfactory - hold for PERC S.M.H.

THIS IS NOT A PERMIT

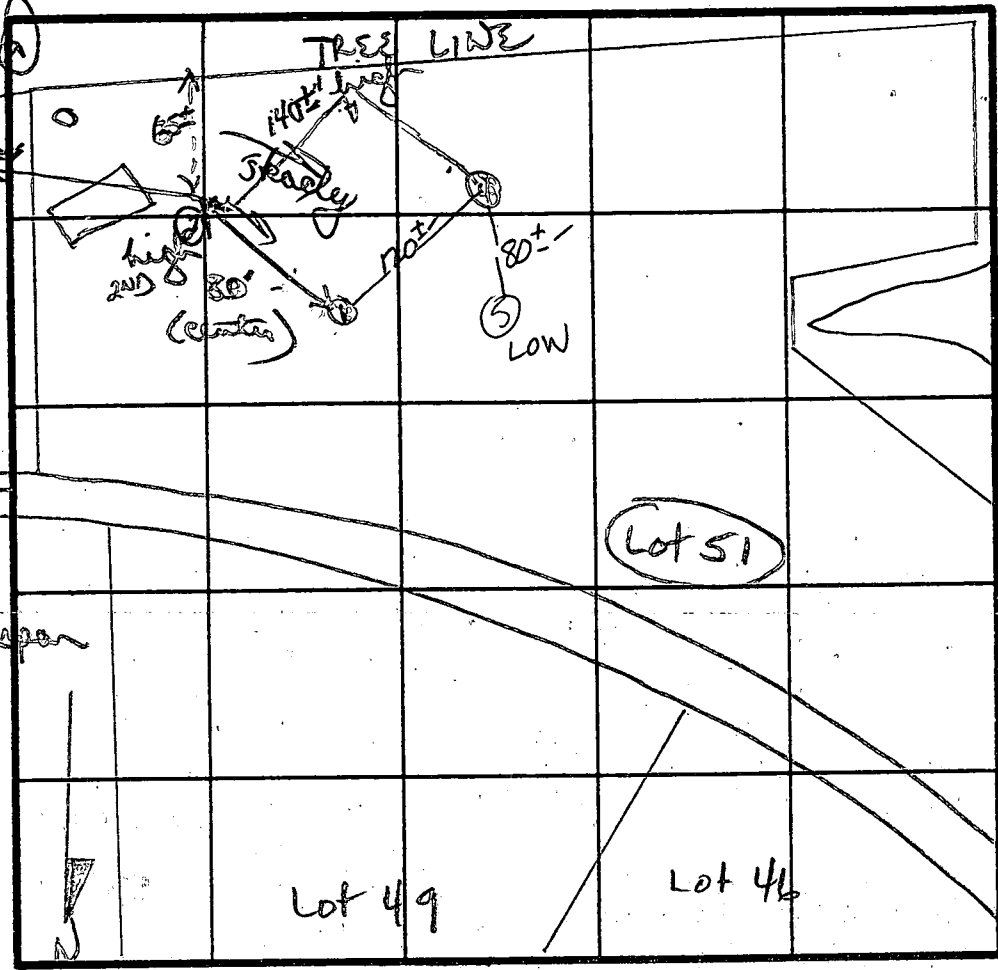
As originally
 tested located
 well site

50 (4) 210'

(4) SOIL PROFILE

orange/brown
 clay/clay
 loam 3'
 to tan
 powdery
 silty loam
 w/ patches
 of white
 sandy/siltstone
 + small
 scattered
 weathered
 fragments

11' D



7 Perc 7min
 180 φ 10L

Inlet 3 1/2
 Bottom 5
 100 YR
 FLOOD
 PLAN

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

multilayered
 + colored
 patches of
 red/orange
 tan/
 silty clay
 loam 25'
 + silty
 mic loam
 (predominately
 white/orange)

12' D
 3 (3)
 orange/tan
 silty clay

to powdery
 orange/tan
 silty mic
 loam

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
6/4/67	(1)	4'5"	111	112	112	114	2min	
		11' D	bottom (see profile)					
	(2)	2'5"	122	125	125	131	6min	
		5'2" M	126	128	128	132	4min	
		12' D	bottom (see profile)					
	(3)	VISUAL ONLY						
		12' D	bottom (see profile)					
4/4/67	4 (4)	5.5'	10:51	10:52	10:52	10:55	3min	
		12'	UNIFORM SOIL below 5'					
	5 (5)	5.5'	10:50	11:00	11:00	11:20	20min	
		12.5'	UNIFORM SOIL below 5'					

5th hole done to improve house/well site
 Shallow system needed

REMARKS

TYPE OF SOIL

TESTED BY

CHESTR

S. Abel

ALSO PRESENT

Rocky, Jeff, Bill

C1 0070

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 A39200

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

8 13

15 20 071987

22 26 145 (TO NEAREST FOOT)

28 37 40-88-0775

OWNER Greenbaum & Assoc last name Kingsbridge first name TOWN Ellicott City SUBDIVISION RURLIGH MANOR SECTION LOT 66

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 Stone 0 34, Gray Mica Pack 34 145.

GROUTING RECORD WELL HAS BEEN GROUTED (Y/N) TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE CLAY BC NO. OF BAGS 13 NO. OF POUNDS 1000 GALLONS OF WATER 7.2 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft to 2.3 ft

CASING RECORD casing types insert appropriate code below ST CO STEEL CONCRETE PL OT PLASTIC OTHER MAIN CASING TYPE ST Nominal diameter top (main) casing (nearest inch) 2.5 Total depth of main casing (nearest foot) 40

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.) 145 21 23 24 26 30 32 36 38 39 41 45 47 51 SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH) from to

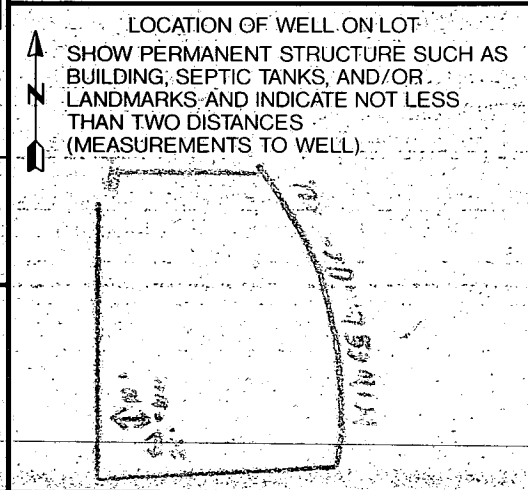
GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q 70 72 74 75 76

TELESCOPE LOG OTHER DATA CASING INDICATOR

PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min. to nearest gal.) 20 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 18 WHEN PUMPING 35 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 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 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. 720 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

B 1 **5660** SEQUENCE NO. (DP USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

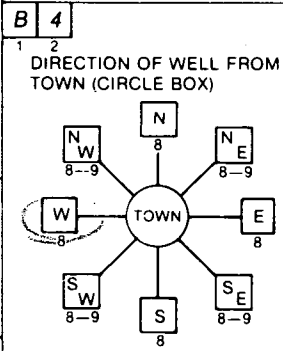
STATE OF MARYLAND
 PERMIT TO DRILL WELL
 please print or type

STATE PERMIT NUMBER
40-98-0775
 fill in this form completely

Date Received (APA) **052399**
 OWNER INFORMATION
GREENBAUM ROSS ASS.
 Last Name Owner First Name
1777 ROSTERSTOWN RD.
 Street or RFD
BALTIMORE **MD** **21208**
 Town State Zip

B 3 LOCATION OF WELL
HOWARD COUNTY
WINDMICH MANOR SUBDIVISION
 SECTION **2** LOT **666**
ELLICOTT CITY NEAREST TOWN
 MILES FROM TOWN (enter 0 if in town) **3.5** MI

DRILLER INFORMATION
Joseph L. Mayne License No. **238**
Joseph L. Mayne Well Drilling Firm Name
5512 RIDGE RD. MT. AIRY 21771 Address
Joseph L. Mayne Signature **5/20/89** Date



Kingbridge Rd. NEAR WHAT ROAD
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

 DISTANCE FROM ROAD **370** ENTER 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
HOWARD COUNTY NAME
A39200 COUNTY NO.
 STATE SIGNATURE _____ INSERT S _____
 DATE ISSUED **01/16/89**
 CO SIGNATURE **Craig Williams** EXP. DATE **12/16/89**
 NORTH GRID **518000** EAST GRID **0836000**

APPROXIMATE DEPTH OF WELL **300** FEET

APPROXIMATE DIAMETER OF WELL **6** INCH NEAREST

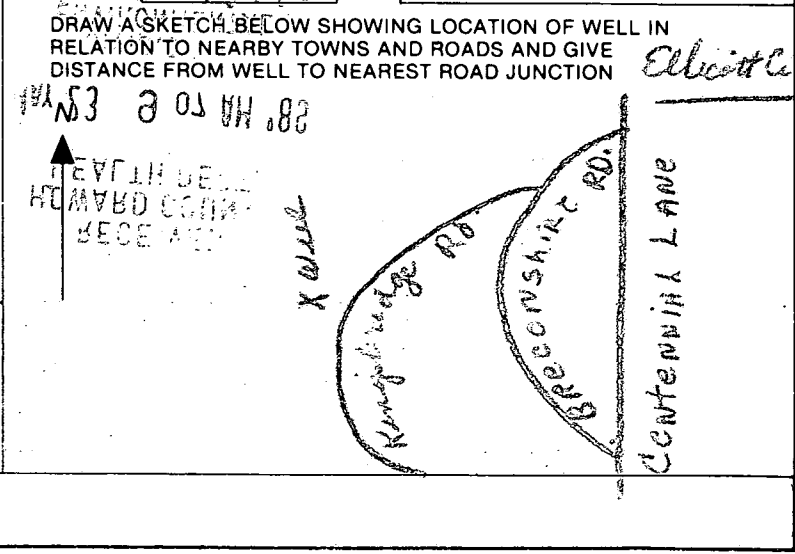
METHOD OF DRILLING (circle one)
 BORED (or Augered) JETTED Jetted & DRIVEN
 AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary)
 CABLE REVERSE-ROTary Drive-POINT
 other _____

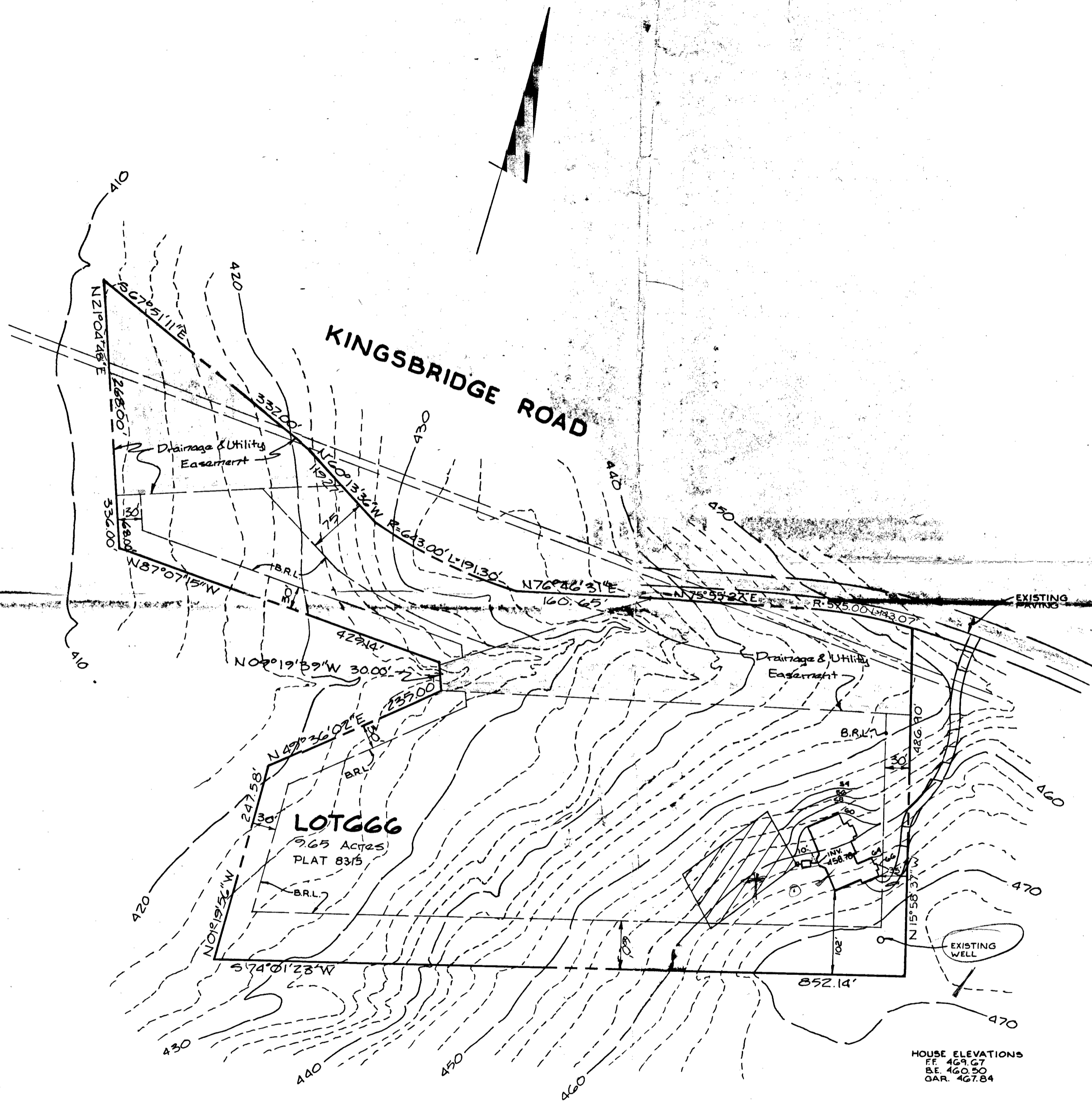
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
 SOURCES OF DRILLING WATER
 1. **Well**
 2. _____
 3. _____
 WRITE THE BOX NUMBER FROM THE MAP HERE
8326
NEV 5218
 DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION
7/19/89

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 _____ GAP _____
 FORCE **06** WRITE INITIALS IN BOX PERMIT No. **40-98-0775**

SPECIAL CONDITIONS





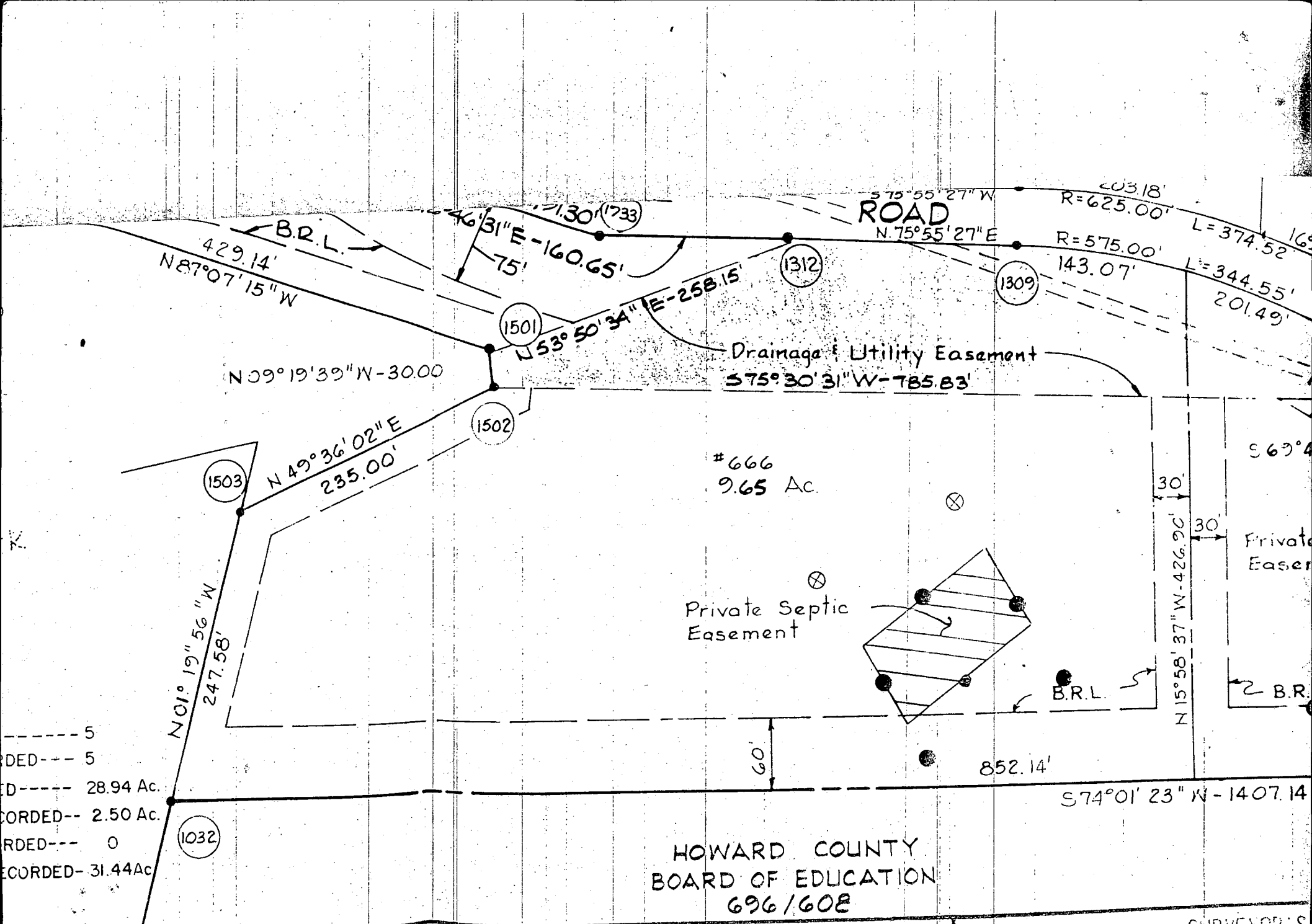
9/11/89
PLANS OK

BRL DENOTES - BUILDING RESTRICTION LINE

NOTE: "TRENCH LENGTH TO BE DETERMINED AT TIME OF SEPTIC PERMIT ISSUANCE" HOUSE HAS FIVE (5) BEDROOMS AND A GARBAGE DISPOSAL.

PLAN TO ACCOMPANY APPLICATION FOR BUILDING PERMIT
BURLEIGH MANOR
SECTION 2 LOT 666
SECOND ELECTION DISTRICT
JULY 31, 1989. SCALE 1"=100'

FISHER, COLLINS AND CARTER, INC.
CONSULTING ENGINEERS AND LAND SURVEYORS
8388 COURT AVENUE
ELLCOTT CITY, MARYLAND 21043
TELEPHONE: (301) 461-2855



5
 RECORDED--- 5
 RECORDED--- 28.94 Ac.
 RECORDED--- 2.50 Ac.
 RECORDED--- 0
 RECORDED--- 31.44 Ac

HOWARD COUNTY
 BOARD OF EDUCATION
 696/608

OWNER'S CERTIFICATE

WE, STEWART J. GREENEBAUM & THOMAS J. PELLERITO, TRUSTEES OF THE PROPERTY SHOWN AND DESCRIBED HEREON, HEREBY ADOPT THIS PLAN OF SUBDIVISION & IN CONSIDERATION OF THE APPROVAL OF THIS FINAL PLAT BY THE OFFICE OF PLANNING AND ZONING, ESTABLISH THE MINIMUM BUILDING RESTRICTION LINES & GRANT UNTO HOWARD COUNTY MARYLAND THE RIGHT TO LAY, CONSTRUCT AND MAINTAIN SEWER, DRAINS, WATER PIPES AND

SURVEYOR'S

I HEREBY CERTIFY THAT THE
 CORRECT: THAT IT IS A SUBDIVISION
 GERAID M. KATZ & THOMAS J. PELLERITO, TRUSTEES

PRIVATE
 CITY