

#124493
4-12-00
3/93 late
A-11

PERMIT

04-353919

SEWAGE DISPOSAL SYSTEM

P 49617

A 43400

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT 4

04-353919

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH

INDEXED

DATE 09/15/93

House conn.
DATE SYSTEM APPROVED 12/13/93

X461-9933X (410) 313-2640

INSPECTOR C. Bol

Masonry Contractors, Inc.

IS PERMITTED TO INSTALL ALTER

ADDRESS 4219 Hanover Pike, Manchester, Maryland 21102 PHONE 239-8330

SUBDIVISION Cabin Branch Farm LOT #22 ROAD 3205 Lancaster Ct.

PROPERTY OWNER Martin II Inc.

ADDRESS 4219 Hanover Pike, Manchester, MD 21102

SEPTIC TANK CAPACITY 1000 GALLONS

NUMBER OF BEDROOMS 3

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 180

TRENCHES - Trench to be 3' wide. Inlet 3' below original grade. Bottom maximum depth 5' below original grade. Effective area begins at 3' below original grade. 2' of stone below distribution pipe.

LOCATION - Place distribution box 95' from right (.645.07') lot line and 160' from the front lot line (204.66') as viewed from Landcaster Ct. Install trenches on contour toward rear lot line.

NOTES - No trench to exceed 100' in length. Provide 6"-8" diameter cleanout and cap to grade or above on septic tank. OK MR 4/3/93

PLANS APPROVED BY Ronald Pinkley

DATE 11/10/92

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

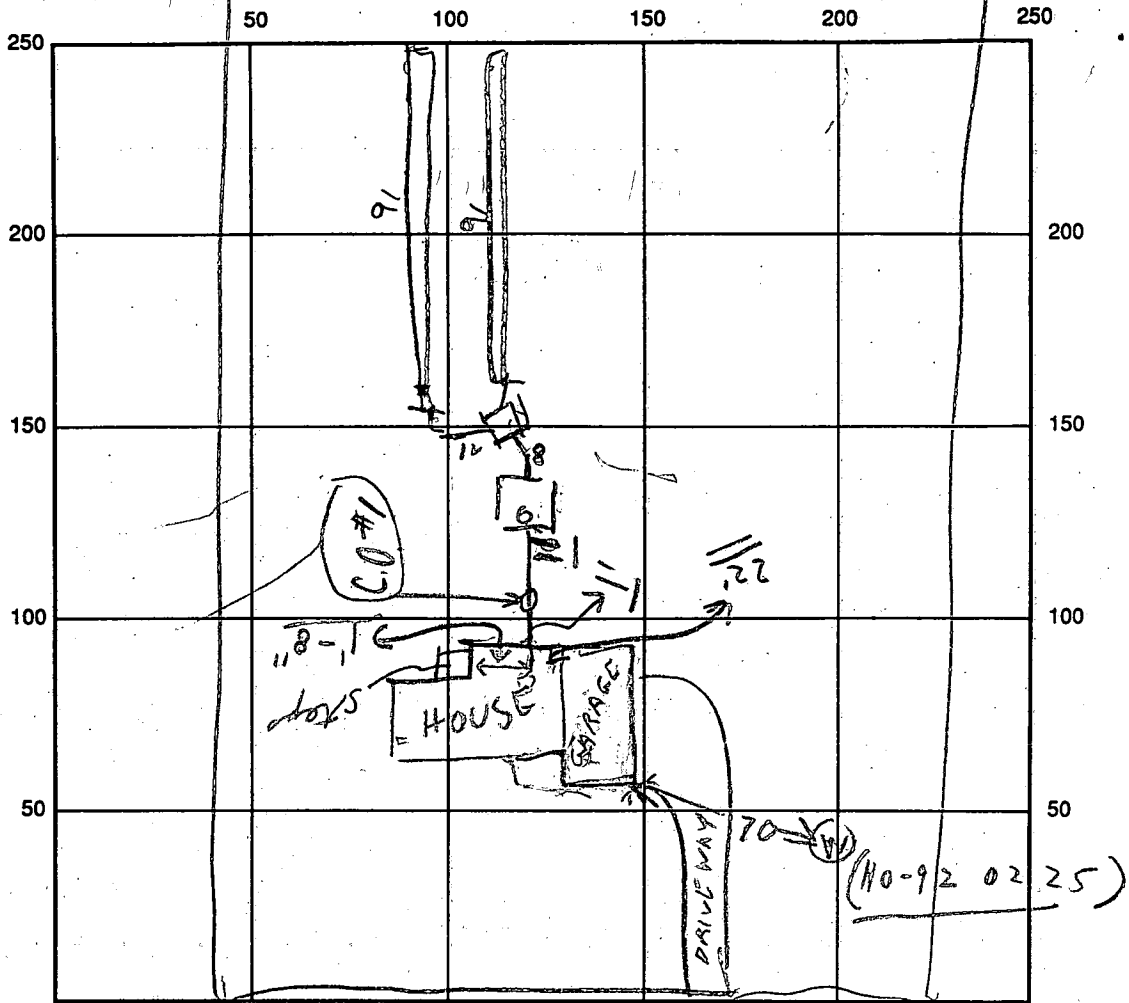
PERMIT VOID AFTER TWO YEARS

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 43400



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
LANCASTER CT

SEPTIC TANK LEVEL OK 1000 CLEANOUTS 0/2

DISTRIBUTION BOX LEVEL OK

DRAIN FIELD/TITLE DEPTH 5.6 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 181 FT.

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 543 SQ. FT.

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

ABSORBENT AREA _____ SQ. FT.

REMARKS: 11/24/93 - CALL FOR HOUSE HOOK UP WHEN READY
COVER REST OF SYSTEM R/H
12/13 House connection seen; Final

12/13 W.P.I @ rear of well only ok
DATE SYSTEM APPROVED 12/13/93 INSPECTOR Charles C. Heck

APPLICATION

PERCOLATION TESTING

A 43406

P _____

DISTRICT R

DATE 12/19/88

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

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 Oakton Associates, Inc.

ADDRESS 1200 18th Street, NW, Washington, DC 20036 PHONE (202) 457-8637

PROSPECTIVE BUYER Anchor Capital Group

ADDRESS 133 Defense Highway, Suite 206 PHONE (301) 261-8727
Annapolis, MD 21401

PROPERTY LOCATION:

SUBDIVISION Cabin Branch Farm LOT NO. 25 22

ROAD AND DESCRIPTION Rte 94 (Ellicott Road) Approximately 2 miles North East
from Damascus Road

TAX MAP 13 PARCEL # 42

SIZE OF LOT 3 acres TYPE BLDG. Single Family
(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. James Danna
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

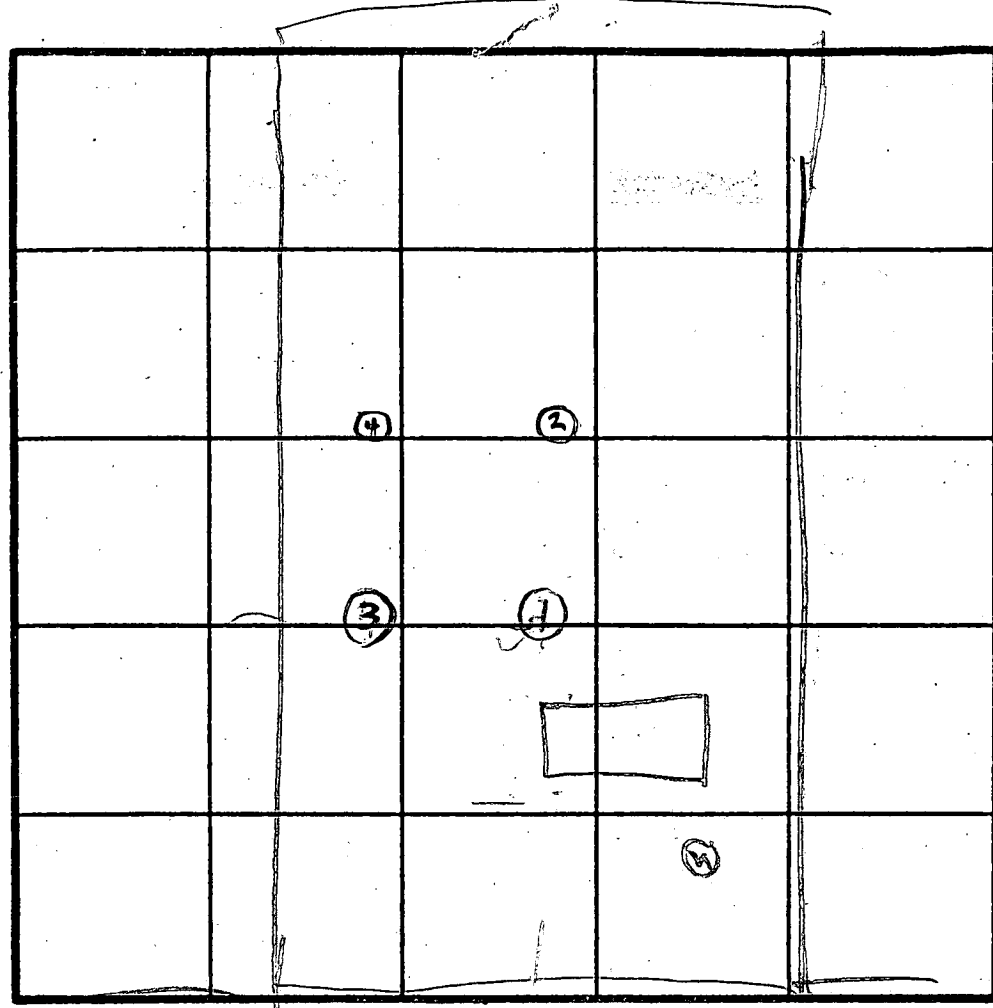
REASONS FOR REJECTION OR HOLDING 4/25/89 Perc OK Hold for test

HD-216

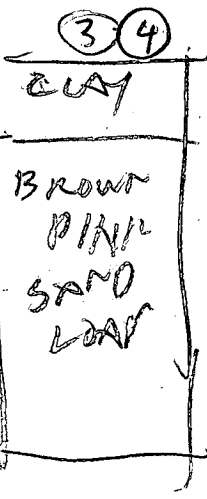
THIS IS NOT A PERMIT

227 25
A 43400

SOIL PROFILE (1) (2)



INLET 3' X 3 MIN



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.
UNNAMED COURT

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/25/89	1 S	4	143	145	145	147	2
	1 W	7	143	144	144	147	
	1 V	12					
	2 V	13	OK				
4/25/89	3 S	5	200	203	203	206.3	
	3 V	13	OK				
	4 S	4.5	201	202	202	204	2
	4 V	12.5					

REMARKS: Hole (1)(2)(3)(4) dug per Test Plat

TYPE OF SOIL

TESTED BY: R. Jordan

ALSO PRESENT: Jeff Dumeau, Jim

LOT-22
CABIN BRANCH FARM.

FF=533.5

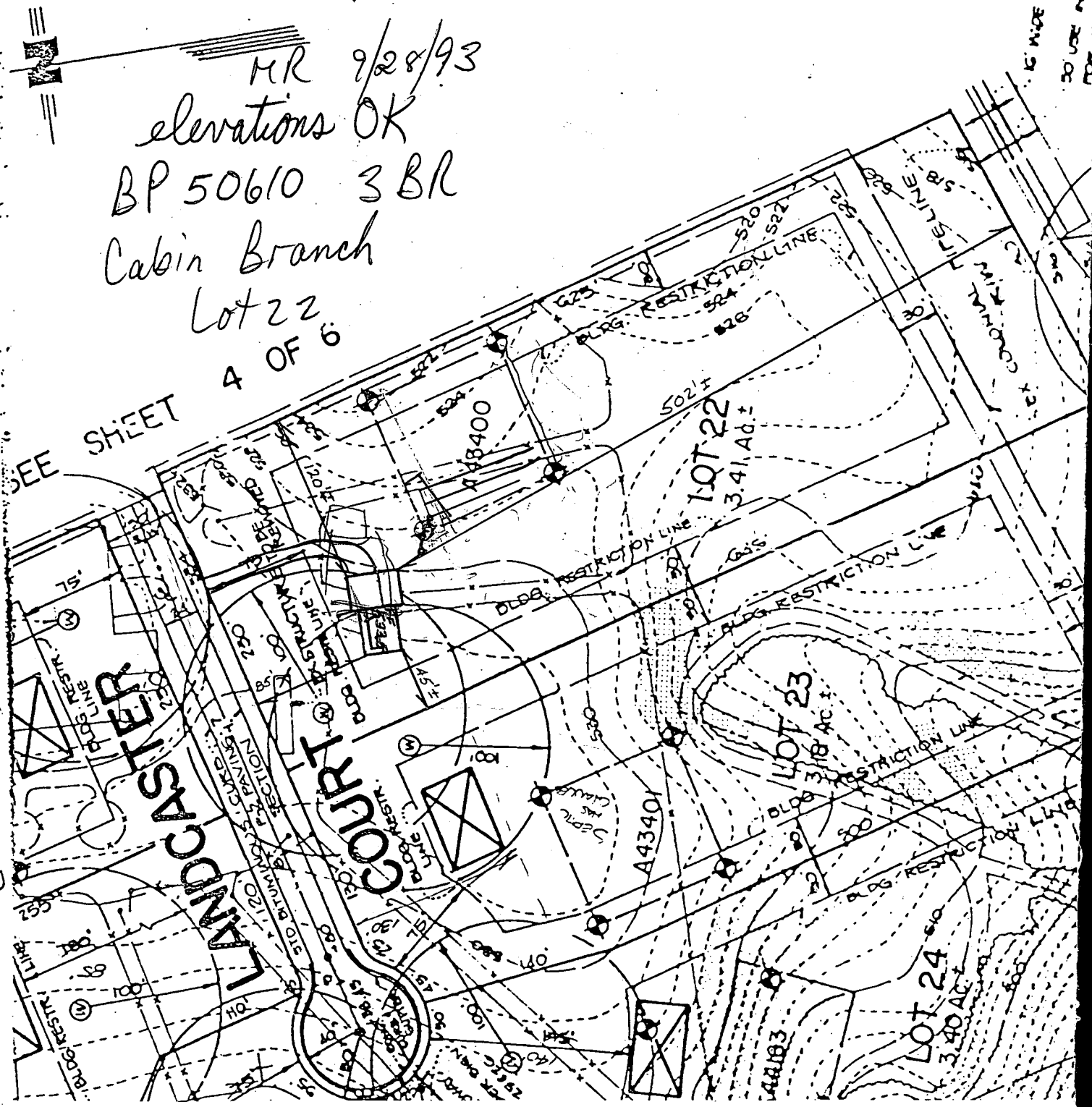
- INVERT OUT OF HOUSE 525.34
- INVERT INTO SEPTIC TANK 525.14
- INVERT OUT OF SEPTIC TANK 524.83
- INVERT INTO DIST. BOX 524.5
- INVERT INTO TRENCH 524
- EXISTING GRADE @ TANK 529
- EXISTG GRADE @ BOX 528
- EXISTING GRADE @ TRENCH 527
- WELL ELEVATION 532

TWO TRENCHES OF EQUAL LENGTH TO BE DETERMINED

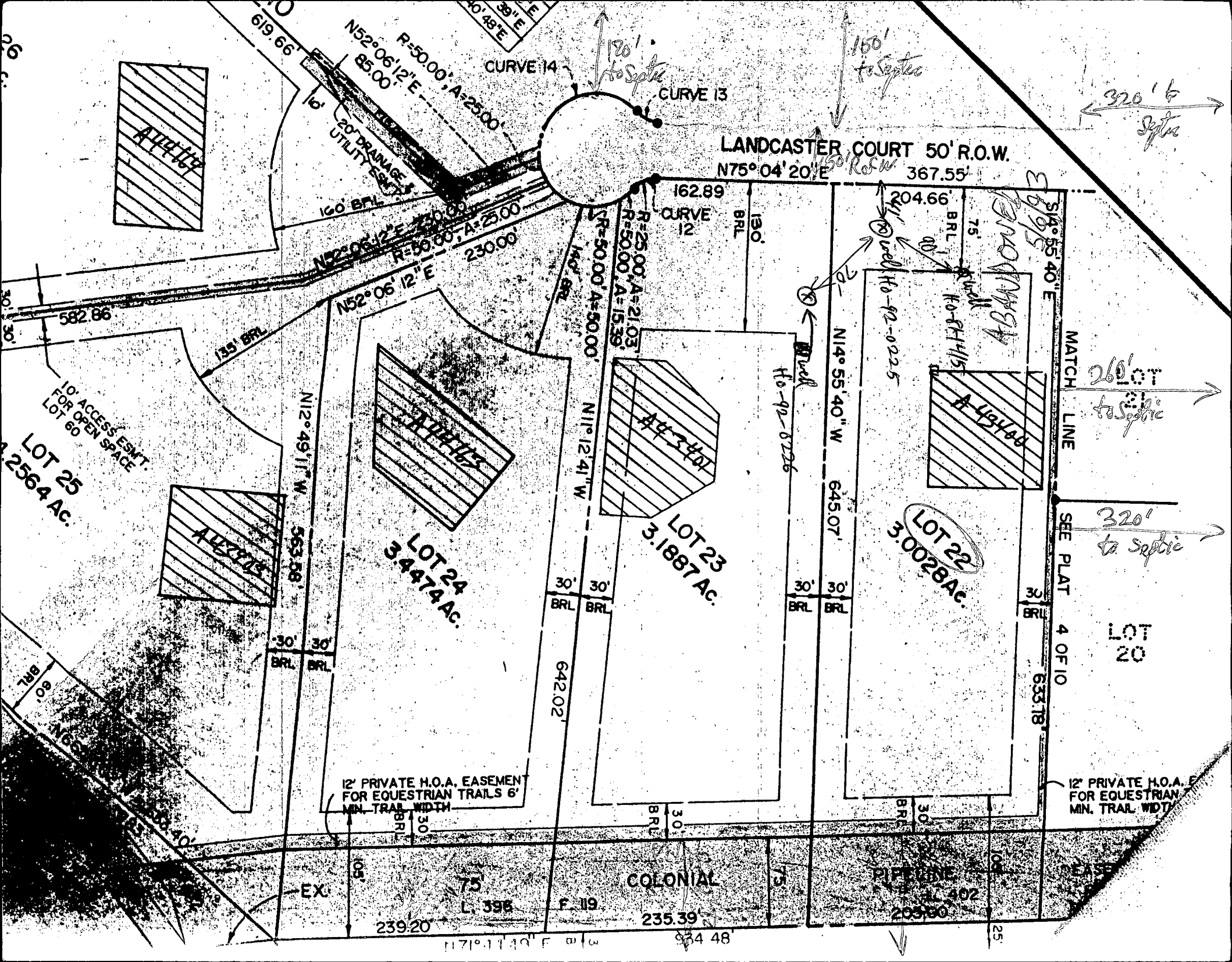
QUESTIONS

Bill Coleman
410-239-8330

MR 9/28/93
elevations OK
BP 50610 3 BR
Cabin Branch
Lot 22
4 OF 6



16 WIDE PAVED
30 USE N CONVA
FOR



26

LOT 25
2.2564 AC.
10' ACCESS EASMT.
FOR OPEN SPACE
LOT 60

LOT 24
3.4474 AC.

LOT 23
3.1887 AC.

LOT 22
3.0028 AC.

LANDCASTER COURT 50' R.O.W.
N75°04'20"E 367.55'

CURVE 14
R=50.00, A=25.00
N52°06'12"E 85.00'

CURVE 12
R=25.00, A=21.03
R=50.00, A=15.39
R=50.00, A=50.00

320' to Septic

260' to Septic

320' to Septic

ABANDONED
5/6/93

12' PRIVATE H.O.A. EASEMENT
FOR EQUESTRIAN TRAILS 6'
MIN. TRAIL WIDTH

12' PRIVATE H.O.A. E
FOR EQUESTRIAN
MIN. TRAIL WIDTH

COLONIAL

PIPELINE

EASE

MATCH LINE

SEE PLAT 4 OF 10

LOT 20

239.20

235.39

205.80

N71°17'40" E 119

34.48

25

B 1 **8330** SEQUENCE NO. (DP USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

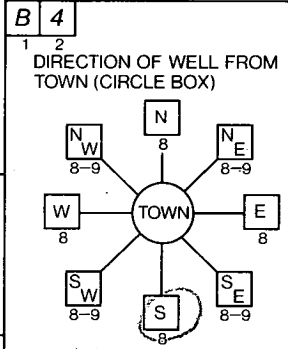
STATE OF MARYLAND
 APPLICATION FOR PERMIT TO DRILL WELL
 please print or type

STATE PERMIT NUMBER
HO-92-0225
 fill in this form completely

Date Received (APA) **090392**
OWNER INFORMATION
FINELL DEVELOPERS
 Last Name Owner First Name
BOVLS9
 Street or RFD
MARY Town **MARY** 70 State **21771** Zip 76

B 3 LOCATION OF WELL
HOWARD COUNTY
CABIN BRANCH FARM SUBDIVISION
 SECTION **22** LOT
LISBOW NEAREST TOWN
 MILES FROM TOWN (enter 0 if in town) **4** MI

DRILLER INFORMATION
Joseph K. Mayne Driller's Name License No. **238**
Joseph K. Mayne Well Drilling Firm Name
5512 Ridge Rd. Mt. Airy 21771 Address
Joseph K. Mayne Signature **9/3/92** Date



Jonestown Court NEAR WHAT ROAD
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 NORTH, WEST, SOUTH, EAST
40 DISTANCE FROM ROAD
 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 **A43400** COUNTY NO.
 STATE SIGNATURE **Donald W. Kelly** DATE ISSUED **5/10/92** INSERT S **41**
111092 CO SIGNATURE / EXP. DATE
 NORTH GRID **529000** EAST GRID **6766000**

APPROXIMATE DEPTH OF WELL **260** FEET

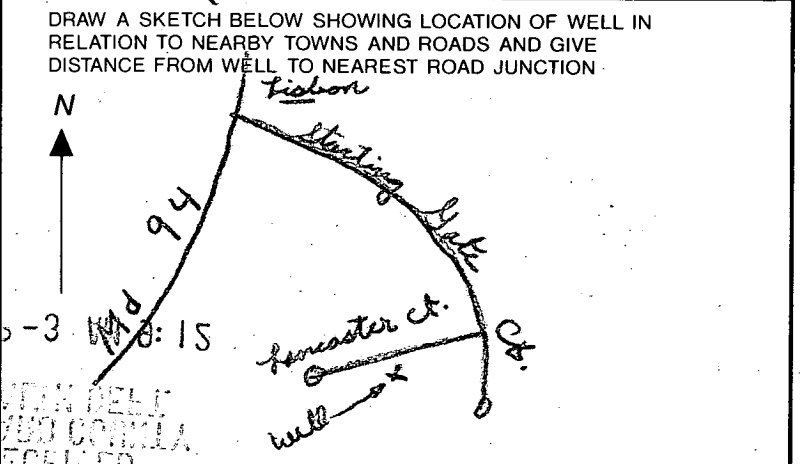
APPROXIMATE DIAMETER OF WELL **6** NEAREST INCH

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
 E **7666**
 N **5229**

11/15/92
 GROUT OR SEE YIELD SHEET

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) **41**



Not to be filled in by driller (OEP USE ONLY)
 APPROP. PERMIT NUMBER **GAP**
 FORCE **RA** WRITE INITIALS IN BOX PERMIT No. **HO-92-0225**

SPECIAL CONDITIONS

WELL ABANDONMENT REPORT

DATE 5/6/93

Permit Number of abandoned well (if any) No. 81-1415

Driller's Name Maime Joseph
Last First

Owner's Name Frail Developers
Last First

Well Location:

County Howard
Subdivision Wardlot 22
Section _____
Nearest Town Lesdon

Show well location with (X)

Maryland Grid Location

E	<u>760</u>
N	<u>530</u>

Type of Well

Drilled
Jetted _____
Bored or Augered _____
Other, specify _____
Depth of Well 200 Feet

Log of sealing material

Material	Feet	
	From	To
<u>Cement + Stone</u>	<u>0</u>	<u>200</u>

Type of Casing

Steel
Plastic _____
Concrete _____
Other, specify _____

Size of casing 6 5/8 inches

Was any casing removed _____ Yes No
If yes, state amount removed _____

Was casing ripped or perforated
Yes _____ No

C1 6655 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 A 43400

ST/CO USE ONLY DATE Received DATE WELL COMPLETED

Depth of Well 145 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-92-0225

OWNER last name first name TOWN SUBDIVISION SECTION LOT

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. Entries: Brown Shale 0-79, Blue Rock 79-145.

GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL CEMENT BENTONITE CLAY NO. OF BAGS NO. OF POUNDS

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

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

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

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. DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

SITE SUPERVISOR (sign. 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 TELESCOPE CASING LOG INDICATOR OTHER DATA

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

PUMP INSTALLED DRILLER WILL INSTALL PUMP (CIRCLE) (YES or 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

LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)

2359

Final
12/13/93
Lates
C/S

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

PITLESS ADAPTER WELL PUMP AND PRESSURE TANK INSTALLATION
LINE

New Installation
Replacement

Receipt # _____
Date _____

Name of Installer Plumbing, Htg & Supplies Inc.

Telephone 410-848-5300

License Number 5165

Certified Well Pump Installer _____ Well Driller _____ Registered Plumber

Name of Property Owner Masonry Contractors Inc.

Telephone 410-239-8330

Subdivision Cabin Branch Farm Lot # 22

Well Tag # 92-02-25

Site Address 3205 Landcaster Court

Pump

- Type
 - Deep well jet _____
 - Shallow well jet _____
 - Submersible
- Make Goulds
- Model # 7E405422
- Capacity 7 GPM
- Pump exceeds well capacity Yes _____ No
- If Yes, is low pressure cutoff switch installed? Yes _____ No _____
- What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors _____ Cable guards _____ Other _____

Motor

- Horsepower 1/2
- RPM 3450
- Voltage _____
 - 110 _____
 - 220

Pitless Adapter

- Make Harward
- Model # B-300
- Depth 4

Tank

- Capacity 7
- Pressure relief valve? yes

Piping

- Type Plastic
- Size 1
- NSF and/or BOCA Code approved NSF
- Depth of supply line 4

Well data

- Depth 145 ft.
- Yield 10 GPM
- Static water level 38 ft.
- Will water supply be disinfected by installer? NO

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: Edgar E. Parry

Date: Sept. 21, 1993

card

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

8/9/00
we
8/19/00
12:00

04-353919

PERMIT

SEWAGE DISPOSAL SYSTEM

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

P 513689
A 43400
ISSUE DATE 7-17-00
APPROVAL DATE 8/19/00

Farm & Home Excavating IS PERMITTED TO INSTALL ALTER

ADDRESS 901 Driver Road Marriottsville, MD 21104 PHONE 410-442-2139

SUBDIVISION Cabin Branch Farm LOT NUMBER 22 ADDRESS 3205 Lancaster Court

PROPERTY OWNER Veater PROPERTY OWNER'S ADDRESS 3205 Lancaster Court

SEPTIC TANK CAPACITY 1250 GALLONS

PUMP CHAMBER CAPACITY N/A GALLONS

NUMBER OF BEDROOMS 4

SQUARE FEET PER BEDROOM 180

LINEAR FEET OF TRENCH REQUIRED 60 (NEW)

TRENCHES: Trenches to be 3.0 feet wide. Inlet 3.0 feet below original grade. Bottom maximum depth 5.0 feet below original grade. 2.0 feet of stone below distribution box.

LOCATION:

REPAIR: PURPOSE - In support of bulding permit #B00124509 - addition

PLANS APPROVED DATE

PERMIT VOID AFTER 2 YEARS

NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS

NOTE: TOP OF SEPTIC TANKS ARE TO BE NO DEEPER THAN 3.0 FEET BELOW FINISH GRADE

NOTE: WATERTIGHT SEPTIC TANKS REQUIRED

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS, 90° ELBOWS ARE NOT ACCEPTABLE

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

NOTE: NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH UNLESS SPECIFICALLY AUTHORIZED

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS

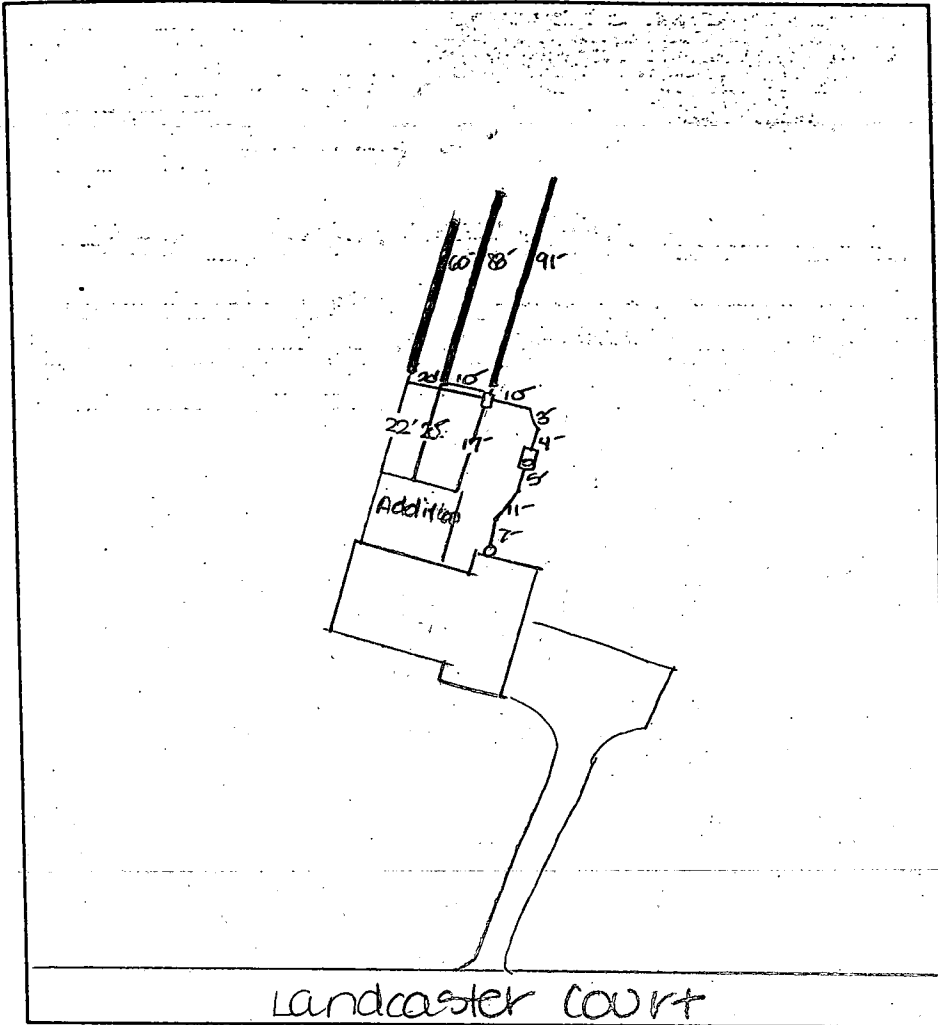
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

NOTE: IF PUMPED SEPTIC SYSTEM REQUIRED, (1) SEPTIC PUMP DETAIL TO BE PROVIDED BY INSTALLER PRIOR TO ISSUANCE OF SEPTIC PERMIT (2) PUMP PERFORMANCE TEST IS NECESSARY PRIOR TO HEALTH DEPARTMENT APPROVAL OF SEPTIC PERMIT

*B00124509 - 7/17/00
Kitchen, bedroom - 2 story*

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM
PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT
CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

NOT TO SCALE



TRENCH DATA

TRENCH WIDTH 3
 TRENCH INLET DEPTH 3
 TRENCH BOTTOM DEPTH 5
 DEPTH OF STONE 2
 NUMBER OF TRENCHES 1 NEW
 TOTAL TRENCH LENGTH 100
 ABSORBENT AREA 180
 DISTRIBUTION BOX LEVEL
 BAFFLE IN DISTRIBUTION BOX

SEPTIC TANK DATA

SEPTIC TANK 1500 GALLONS
 MANHOLE RISER _____
 6 INCH INSPECTION PORT

PUMP CHAMBER DATA

~~PUMP CHAMBER GALLONS _____~~
~~MANHOLE RISER _____~~
~~ALARM _____~~
~~PUMP PERFORMANCE TEST _____~~

PRE-CONSTRUCTION INSPECTION: _____

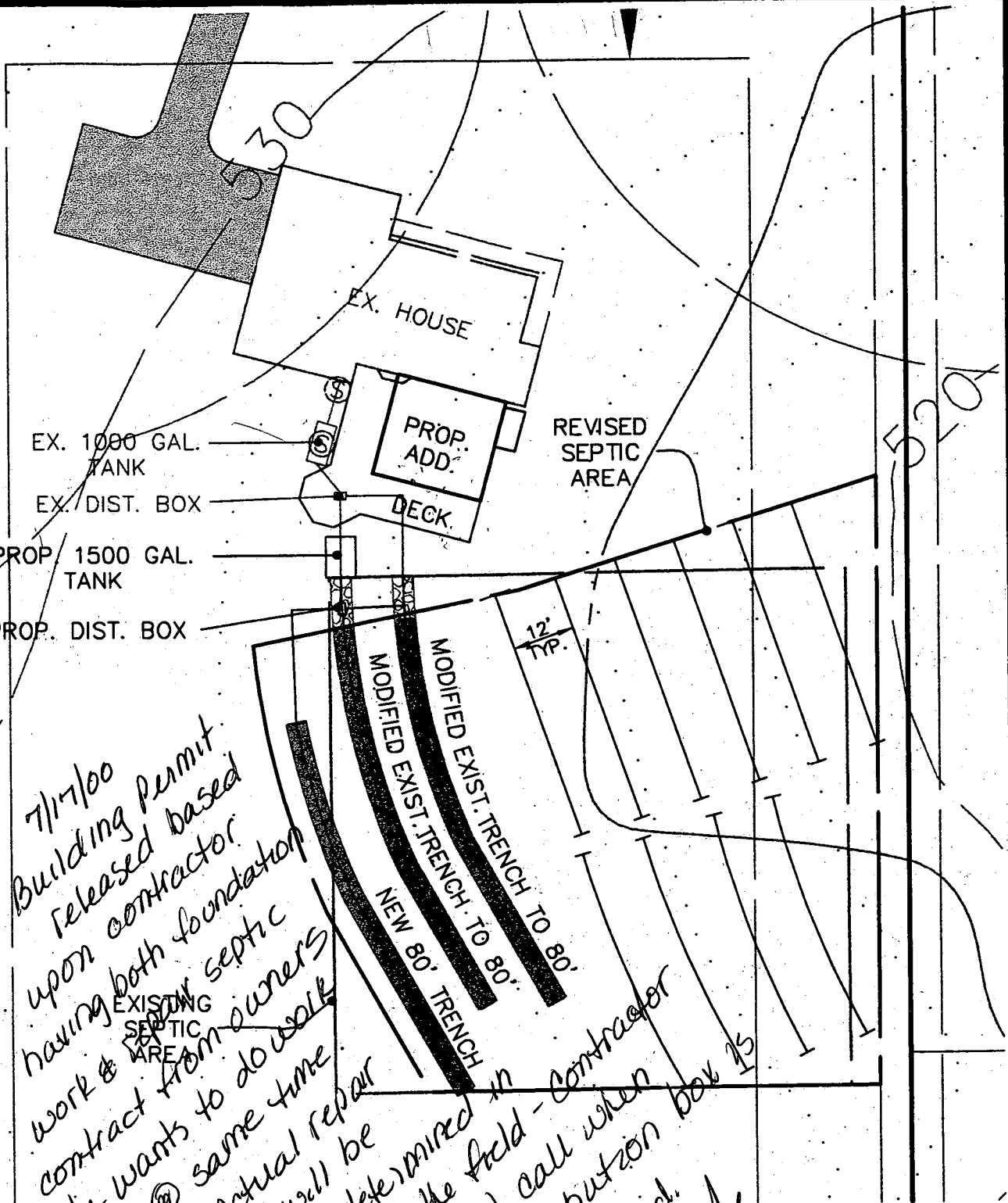
INSPECTION COMMENTS: _____

8/9/00 OK to keep first trench as initially installed.
 Trench #2 to be 20' off addition. Need to add 1-60'
 trench to accommodate additional flow. New tank
 installed, old tank pumped and collapsed. DKS
 8/10/00 final Insp - OK to cover all septic work
 as completed, sufficient materials on site. DKS

INSPECTOR DKS DATE SYSTEM APPROVED 8/10/00

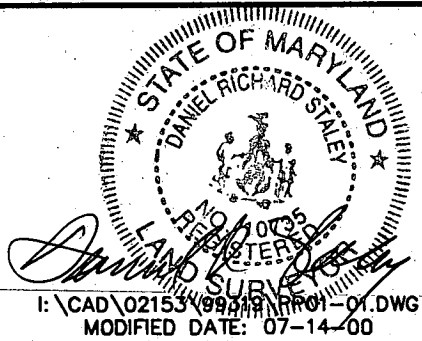
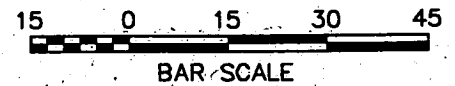
MARYLAND STATE

GRID MERIDIAN



7/17/00
 Building permit
 released based
 upon contractor
 having both foundation
 work & ~~septic~~ septic
 contract from owners
 he wants to do work
 @ same time.
 Actual repair
 will be
 determined in
 the field - contractor
 will call when
 distribution box is
 located.

REVISED FINAL PRELIMINARY PLAN
 LOT # 22
 CABIN BRANCH FARMS



D.R.S. & ASSOCIATES
 LAND DESIGN CONSULTANTS
 52 WINTERS STREET
 WESTMINSTER, MD 21157
 410-848-4060 410-876-6040
 COPYRIGHT © 1999 BY D.R.S. & ASSOCIATES

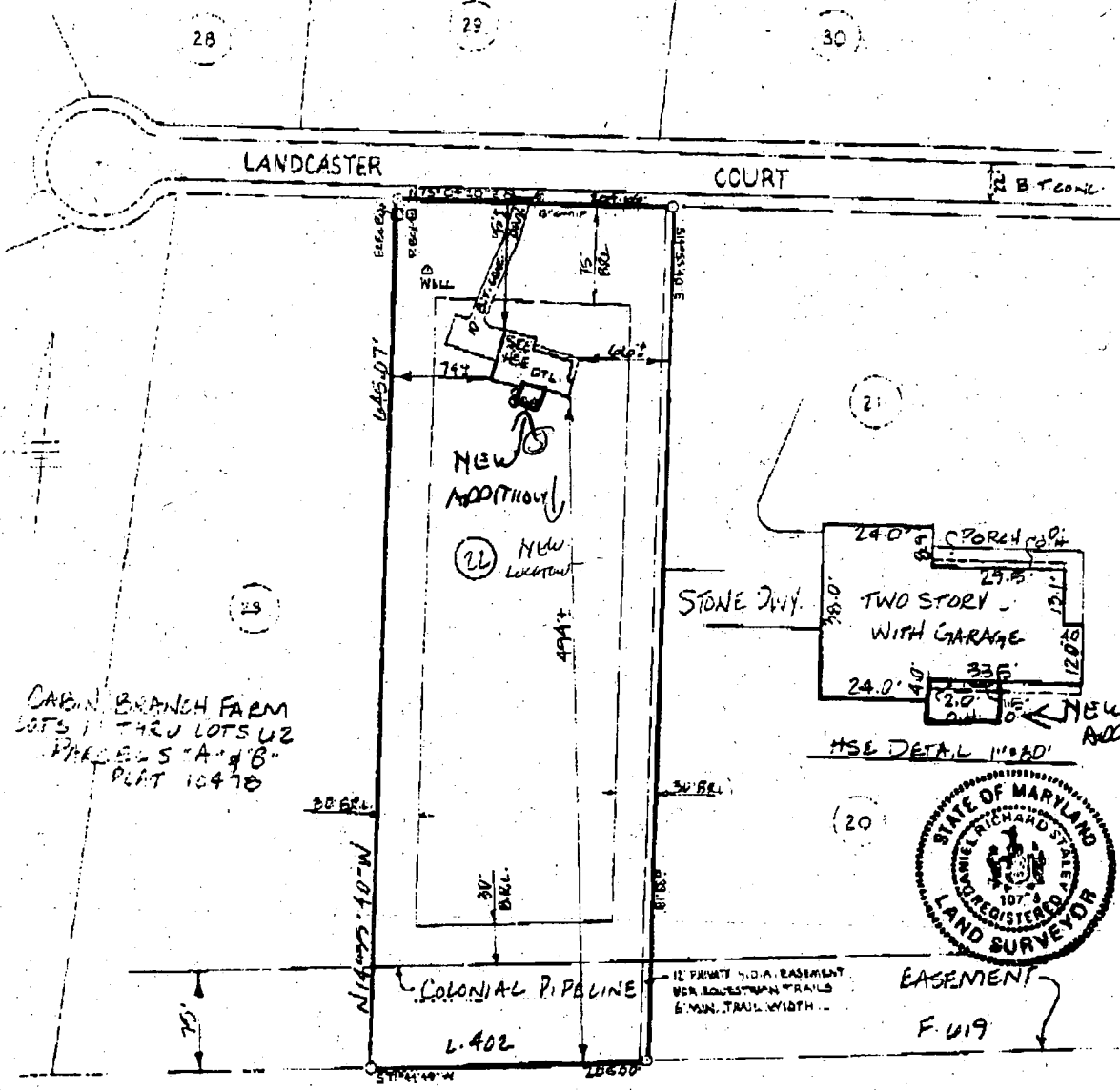
DATE	REVISION



DRS & ASSOCIATES
LAND DESIGN CONSULTANTS

This is to certify that I have surveyed the property shown hereon, known as Lot # 22, "Cabin Branch Farm", located at 3205 Landcaster Court, in the 4-th Election District of Howard County, Maryland for the purpose of locating the improvements only, and that the improvements are located as shown hereon, and are not in a flood prone or flood hazardous area.

Westminster, this 10-th day of December, 1993.



Daniel R. Staley
DANIEL R. STALEY

LS # 10735 SCALE 1"=100'



HOWARD COUNTY HEALTH DEPARTMENT

Diane L. Matuszak, M.D., M.P.H., County Health Officer

June 12, 2000

Jennifer and Bill Veater
3205 Landcaster Court
Woodbine, MD 21797

RE: Building Permit Application B0012452⁶⁹
3205 Landcaster Court
Cabin Branch Farms, Lot 22
Proposed Large Addition w/Bedroom

Dear Mr. & Mrs. Veater:

This office has received the above referenced building permit application, but cannot recommend approval at this time because of concerns about the addition's location and the capacity of the existing septic system to handle the potential increase in flow associated with this proposal.

The location of the addition appears to be less than the standard minimum of ten feet from the existing septic tank. Redesigning the addition or moving/replacing the septic tank to a suitable location could eliminate this concern.

In addition, since septic systems are sized based on the number of bedrooms in the dwelling, the proposed addition of a master suite represents a potential increase in flow to the septic system. Without redesign of the addition, the installation of additional drainfield capacity would be required.

A Health Department recommendation for approval is contingent upon either 1) redesign of the addition or 2) septic tank replacement and installation of additional drainfield capacity via a suitable septic system repair (permit fee \$25). The process is best completed through a professional septic contractor prior to building permit issuance.

~~OK~~ Since other detail/uses of the proposed addition are not clearly reported on the application, there may be other impacts as well. Please contact this office at (410) 313-2640 to clarify this information. When all issues have been resolved, septic system repair permit issuance can be arranged.

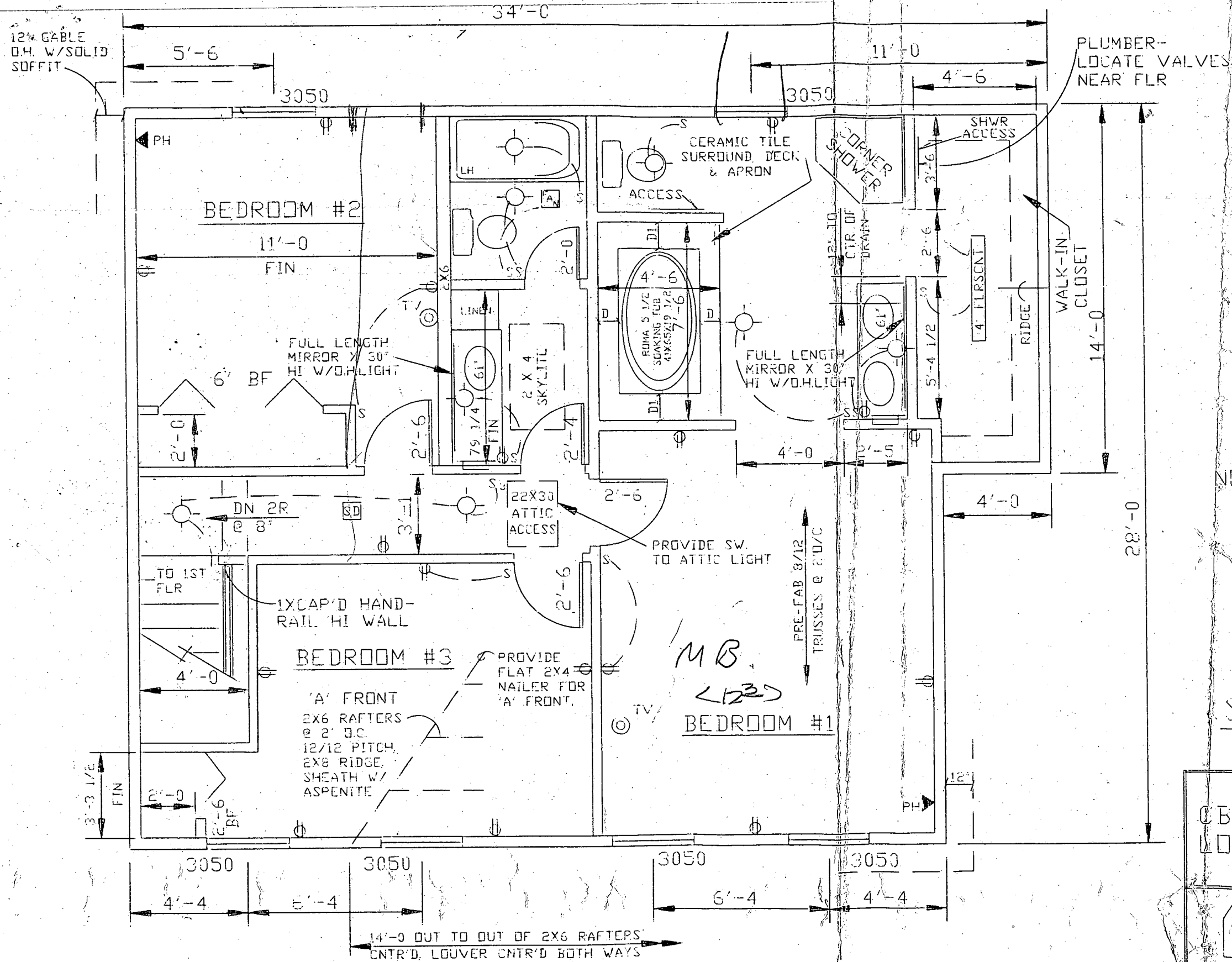
6/14/00
MR
D/C w/BLDR: OK TO ISSUE
BP @ PAYMENT OF REPAIR FEE

Very Truly Yours,

Mark E. Rifkin
Mark E. Rifkin, R.S.
Water & Sewerage Program

MR

cc: Department of Inspections, Licenses & Permits
File



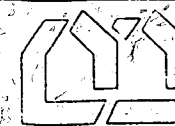
NOTE:

1. SET ALL WINDOW HDRS 6'-11" FRM FLR (TYP).
2. SMOKE DETECTOR TO HAVE BATTERY BACKUP
3. PLACE DRY WALL CLIPS @ 2' O/C ON TOP PL. OF ALL INT'R PARTITIONS. DO NOT INSTALL 2x D-WALL NAILERS, THIS FLOOR ONLY.

SECOND FLR PLAN

CB2359-2 9-10-93

CB2359 VEATOR
LOT 22 CABIN BRANCH



MASONRY CONTRACTORS, INC.
Residential Construction and Land Development

4219 Hanover Pike Manchester, Maryland 21102
(301) 239-8330 (301) 374-4144

