

7-29-98
2:00 P.M.

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 510583

A 49918-T

DISTRICT _____

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~PHONE~~ 410-313-2640

04-358848

DATE 7-23-98

DATE SYSTEM APPROVED 7/30/98

INSPECTOR CW

Fogle's Septic Clean, Inc. IS PERMITTED TO INSTALL ALTER _____

ADDRESS 580 Obrecht Rd, Sykesville, MD 21784 PHONE 410-795-5674

SUBDIVISION Royal Hollow LOT 10 ROAD 16013 Lady Camarin Court

PROPERTY OWNER C & P Homes, Inc.

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

*****MANHOLE CLEANOUT REQUIRED*****

NUMBER OF BEDROOMS 4

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 280

TRENCHES - Trench to be 2' wide. Inlet 4' below original grade. Bottom maximum depth 7' below original grade. Effective area begins at 4' below original grade. 3' of stone below distribution box.

LOCATION - Place distribution box 40' from rear (305') property line and 150' from right (224.66') lot line as viewed from Lady Camarin Court. Install trenches on contour towards the front lot line.

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

RP 6/11/98

PLANS APPROVED BY Ron Pinkley/Donna Soe/Glen Savage (Revised) DATE 6/2/98 & 6/10/98 Revised

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

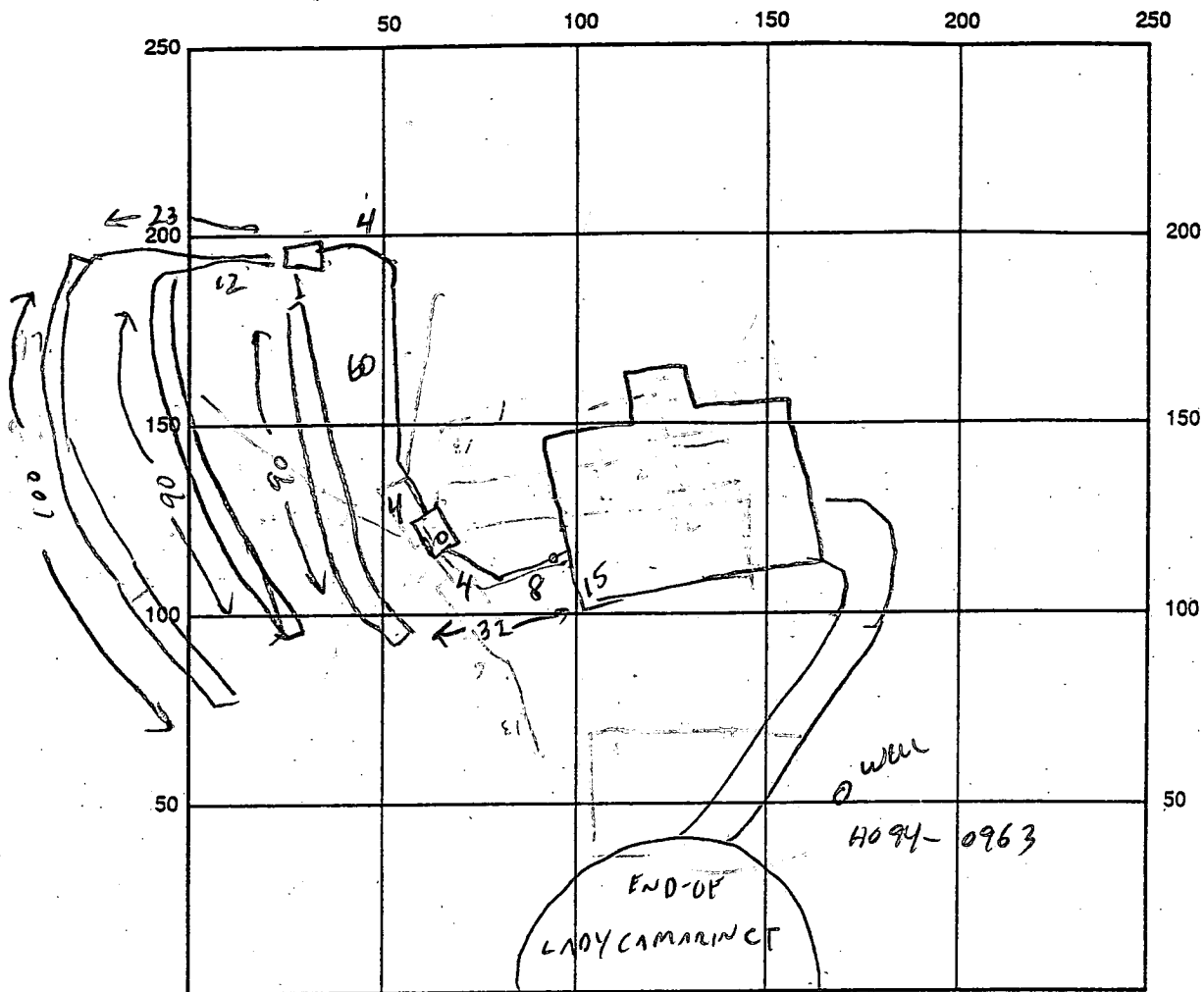
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON, CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

49918-T



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL ✓ CLEANOUTS STV AND IN-LINE @ HOUSE
 DISTRIBUTION BOX LEVEL ✓
 DRAIN FIELD/TITLE DEPTH 7 FT. TRENCH WIDTH 2 FT. INLET DEPTH 4 FT.
 EFFECTIVE GRAVEL DEPTH 3 FT. TOTAL LENGTH 280 FT.
 NUMBER OF TRENCHES 3 $\frac{100}{90}$ ONE SIDEWALL/BOTTOM AREA 720 SQ. FT.
 DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.
 ABSORBENT AREA — SQ. FT.

REMARKS: OK THRU FIRST TRENCH 7/30/98 (CW)
SYSTEM COMPLETE OK TO COVER (CW)

DATE SYSTEM APPROVED 7/30/98 INSPECTOR CW

8-26-98

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Hills Drive
Ellicott City, MD 21043

Fax 313-2648 313-2640

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation
Replacement

Receipt # _____
Date 8/25/98

Name of Installer ROBERT L. FEEZER Co. Inc Telephone 410-781-4633

License Number 2122
Certified Well Pump Installer Well Driller Registered Plumber

Name of Property Owner C&P HOME / PETE RYAN Telephone 410-795-4405
Subdivision Royal Hollow Lot # 10 Well Tag # HO-94-0963
Site Address LOT 10 LADY CAMERON COURT

Pump	Motor	Pitless Adapter
1. Type	1. Horsepower <u>3/4</u>	1. Make <u>HAWAII</u>
a. Deep well jet _____	2. RPM <u>3450</u>	2. Model # <u>Y1800</u>
b. Shallow well jet _____	3. Voltage _____	3. Depth <u>42</u>
c. Submersible <input checked="" type="checkbox"/>	a. 110 _____	
2. Make <u>RED JACKET</u>	b. 220 <input checked="" type="checkbox"/>	
3. Model # <u>ISCNSW16GFW</u>		
4. Capacity <u>5</u> GPM		
5. Pump exceeds well capacity Yes _____ No <input checked="" type="checkbox"/>		
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 <u>None</u>		

Tank	Piping	Well data
1. Capacity _____	1. Type <u>Poly</u>	1. Depth <u>40</u> ft.
2. Pressure relief valve? <u>YES</u>	2. Size <u>1 1/2"</u>	2. Yield <u>8</u> GPM
<u>well line, P.A. 4.5' b.g.</u>	3. NSF and/or BOCA Code approved <u>YES</u>	3. Static water level _____ ft.
<u>well casing 1.5' a.g.</u>	4. Depth of supply line <u>42"</u>	4. Will water supply be disrupted by installer? <u>YES</u>
<u>2 pc cap installed</u>		
<u>PVC conduit pipe OK - OK TO COVER (DKS)</u>		

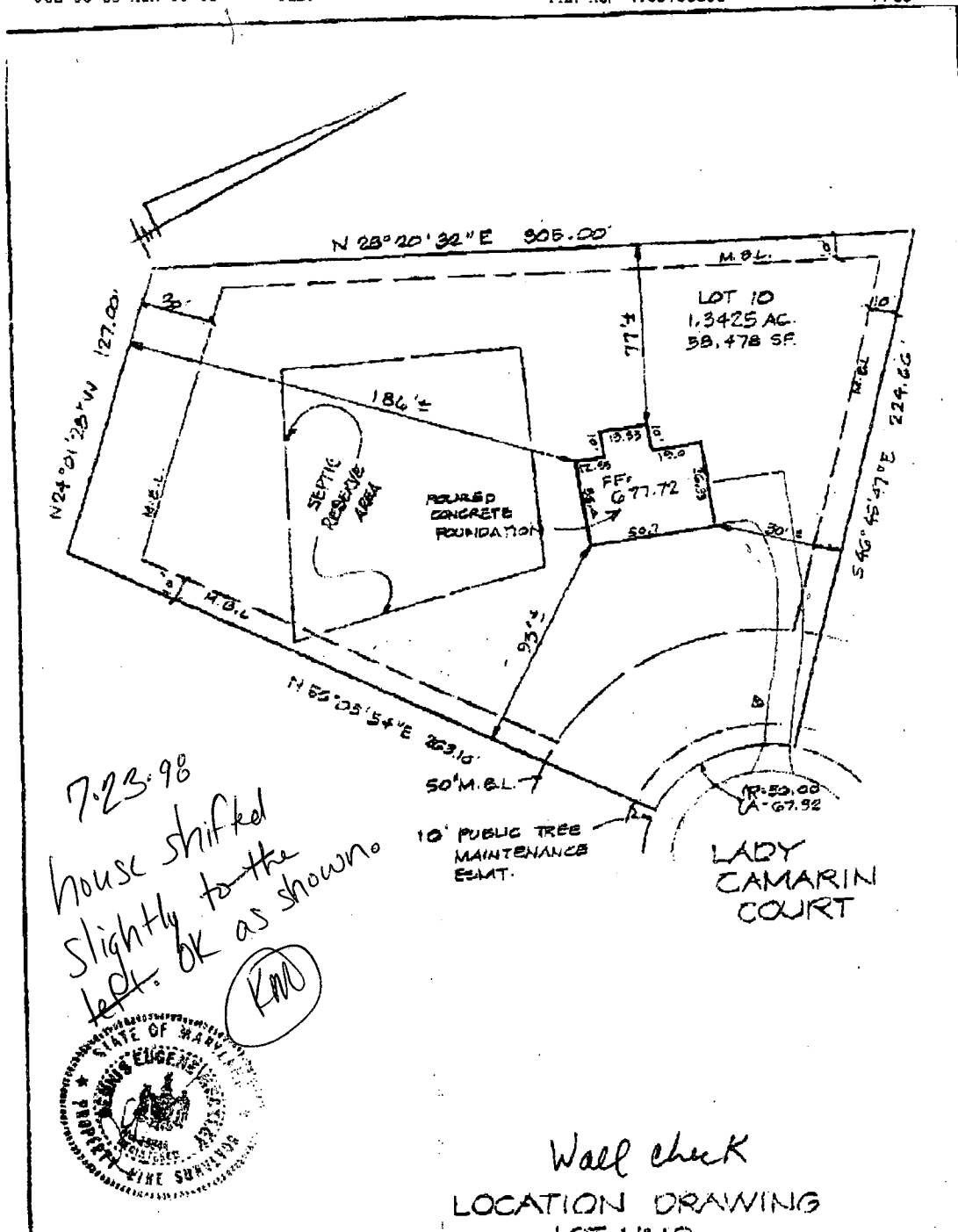
8/26/98
WPT

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).

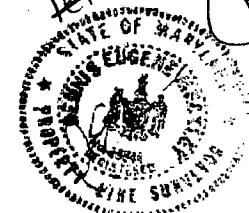
All information given above is true to the best of my knowledge.

Signature of Applicant: Robert L. Feezer
Date: 8/25/98

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



7.23.98
 House shifted
 slightly to the
 left. OK as shown.
 (KMO)



Wall check
 LOCATION DRAWING
 LOT N° 10
 "ROYAL HOLLOW"
 FOURTH ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND

I hereby certify that I have surveyed the property shown hereon for the purpose of locating the improvements. This plan is a benefit to the consumer only in so far as it is required by a lender or a title insurance company or its agent in connection with contemplated transfer, financing or refinancing. It is not to be relied upon for the establishment of boundary, easement or right-of-way lines for any reason, such as the location of fences, garages, buildings, or other existing or future improvements.

By Dennis E. Muehler Date 7/6/98
 Dennis E. Muehler Property Line
 Surveyor No. 10844

The improvements shown hereon lie within Flood Hazard Zone "C", (area of minimal flooding), as designated on National Flood Insurance Program Flood Insurance Rate Map, Panel 15 of 45 Community Panel Number 220001/0002 prepared by the Federal Emergency Management Agency.

CLSI
 Carroll Land Services
 Incorporated
 Engineers • Surveyors • Land Development Consultants
 Landscape Architects • Environmental Specialists
 423 East Main Street Westminster, MD 21157-8820
 (410) 876-2017 FAX (410) 876-0209

DRAWN BY:	E.S.P.
DESIGNED BY:	
REVIEW BY:	
DATE:	7/6/98
SCALE:	1"=50'
JOB NO.:	08109
SHEET:	2/21

REQUEST FOR SEPTIC PERMIT ISSUANCE

PROPERTY IDENTIFICATION

Subdivision Royal Hollow Lot # 10
Street Address 116013 Lady Camarin Ct

INSTALLER

Company Name Fogles Septic Phone Number 410 295 5674
Company Street Address _____

=====

Date of septic permit request: 7-21-98
Date of septic permit issuance: 7-23-98 Receipt # P510583

=====

Date copy of certified location drawing (wall check) received: 7-23-98
reviewed: 7-23-98

APPLICATION

PERCOLATION TESTING

A 499187

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

DISTRICT _____

DATE 3/10/94

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 MISSLER FARM JOINT VENTURE c/o LODGING. C + P HOMES

ADDRESS LEE PLAZA, SUITE 200 8601 GA. AVE. SILVER SPRING, MD PHONE (301) 585-7000

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION ROYAL HOLLOW LOT NO. 10

ROAD AND DESCRIPTION OLD FREDERICK RD. & WOODBINE RD.

(16013 Lady Camarin Court)

TAX MAP 7 PARCEL # 84

SIZE OF LOT 1 AC. ± TYPE BLDG. _____
(SINGLE FAMILY DWELLING OR COMMERCIAL)

~~SEE PERMIT~~
~~NO PERMIT~~ 6-2-98
Serial # BT0111766
SFD - 4 Broom

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. Thos J. S FOR VMA
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

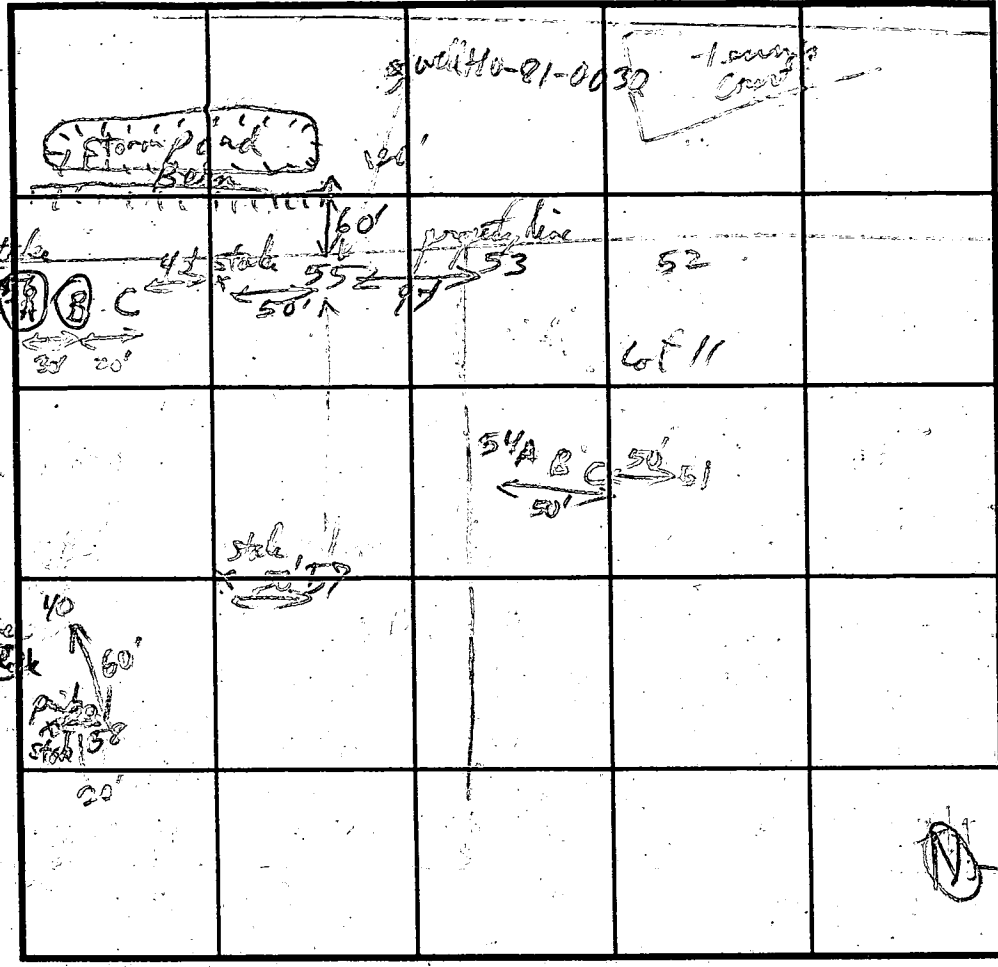
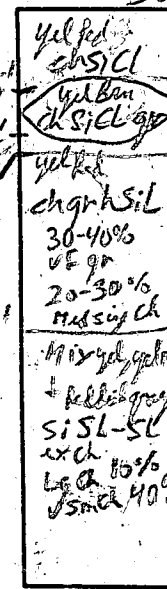
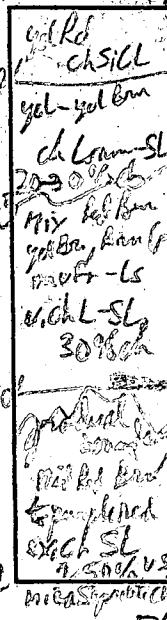
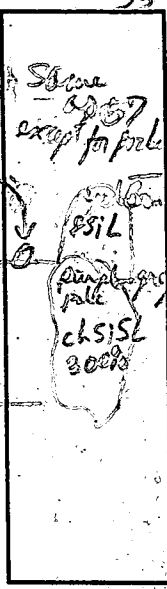
PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

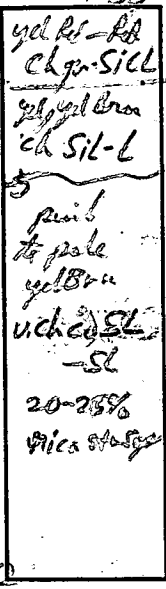
THIS IS NOT A PERMIT

4410 49918T
 COUNTY #

SOIL PROFILE 55



SOIL PROFILE 58



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

4/5/95 (49) 40 V12' 3/2 OK below 2 1/2 ft

2 min 3 min

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME		
			START	STOP	START	STOP			
4/5/95	55	5'	12:35:30	12:39:00	12:39:00	12:44:00	5 min	Soil OK	
		3'	11:10	11:34	pilled (not in use)		5 min	OK	
		V12'	7	11:06	11:10	11:10	11:25	15 min	
				(4 min count) OK below 4'					
	56	7'							in pale red v. ch sil > 50% ch. (Fail)
	56A	8'							v. d. spec > 50% (Fail)
	57	3 1/2'	12:03:00	12:06:30	12:08:30	12:14:20	8 min	Soil OK	
		V12'	8	12:02:40	12:03:50	12:03:50	12:07:30	4 min	Soil OK
	56C	6 1/2'	12:09:40	Miss		12:18:20	4 min	Soil OK	
		V12	8 1/2	12:09:30	12:15:00		12:30:00	15 min	
4/5/95	Lot 9 58	3 1/2'	12:16:30	12:23:00	12:23	12:36:00	8 min	8/15/98	
		V12	8'	12:16:20	Miss		12:27:00	8 min	8/15/98

REMARKS: Too Close to Storm Water Mgmt Pond - Need to Reconfigure SDA

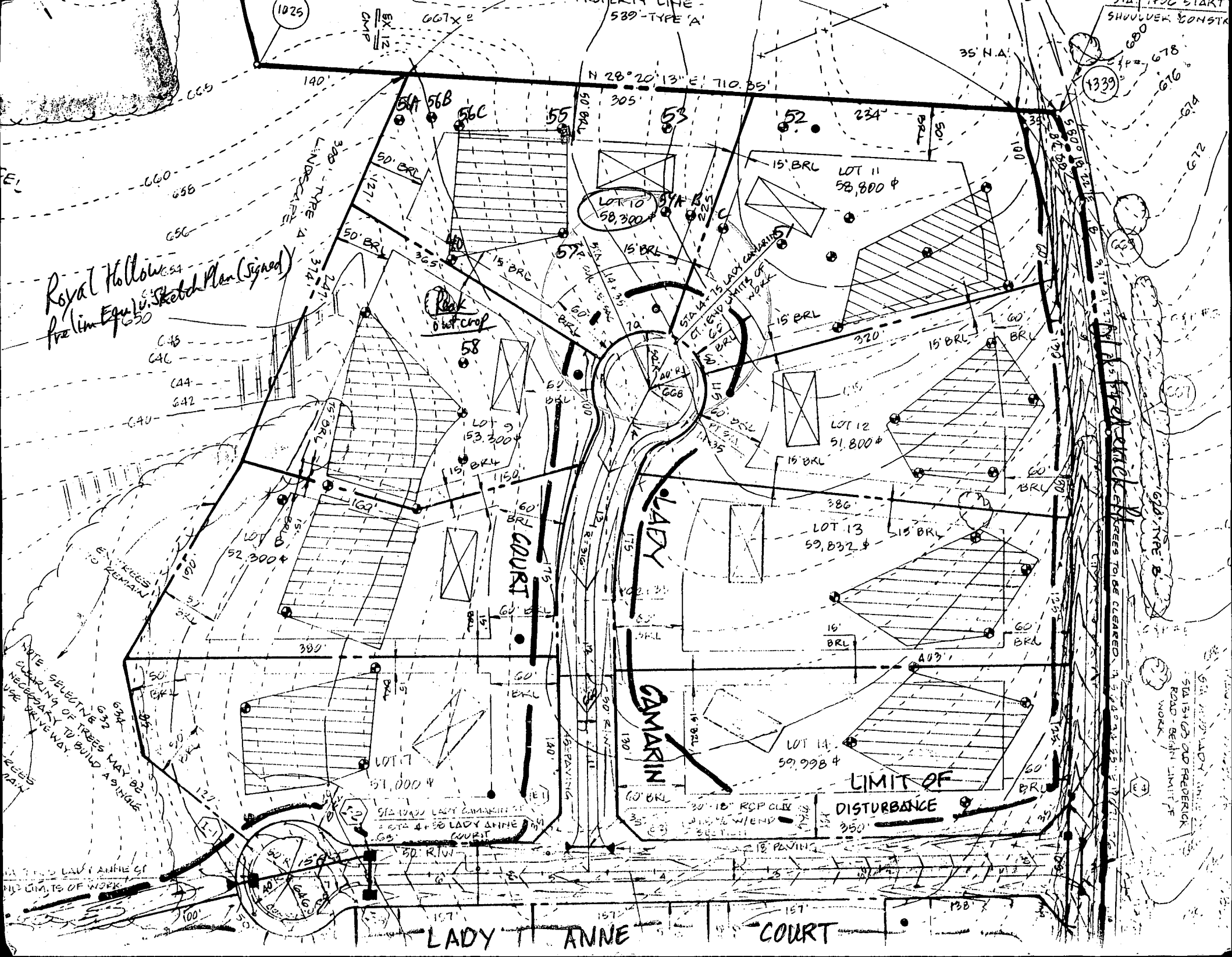
TYPE OF SOIL: Gleyed

TESTED BY: R. D. [Signature]

ALSO PRESENT: [Signature]

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME: 8 1/2 TRENCH WIDTH: 2

INLET DEPTH: 4 MAXIMUM BOTTOM DEPTH: 7 SQ. FT./BEDROOM: 210



Royal Hollow
Prelim Equi. Sketch Plan (Signed)
G50

NOTE: SELECTION OF TREES MAY BE NECESSARY TO BUILD A DRIVE
USE DRIVEWAY.

SEE LAYOUT ANNE'S
LIMITS OF WORK

LADY CAMARIN COURT

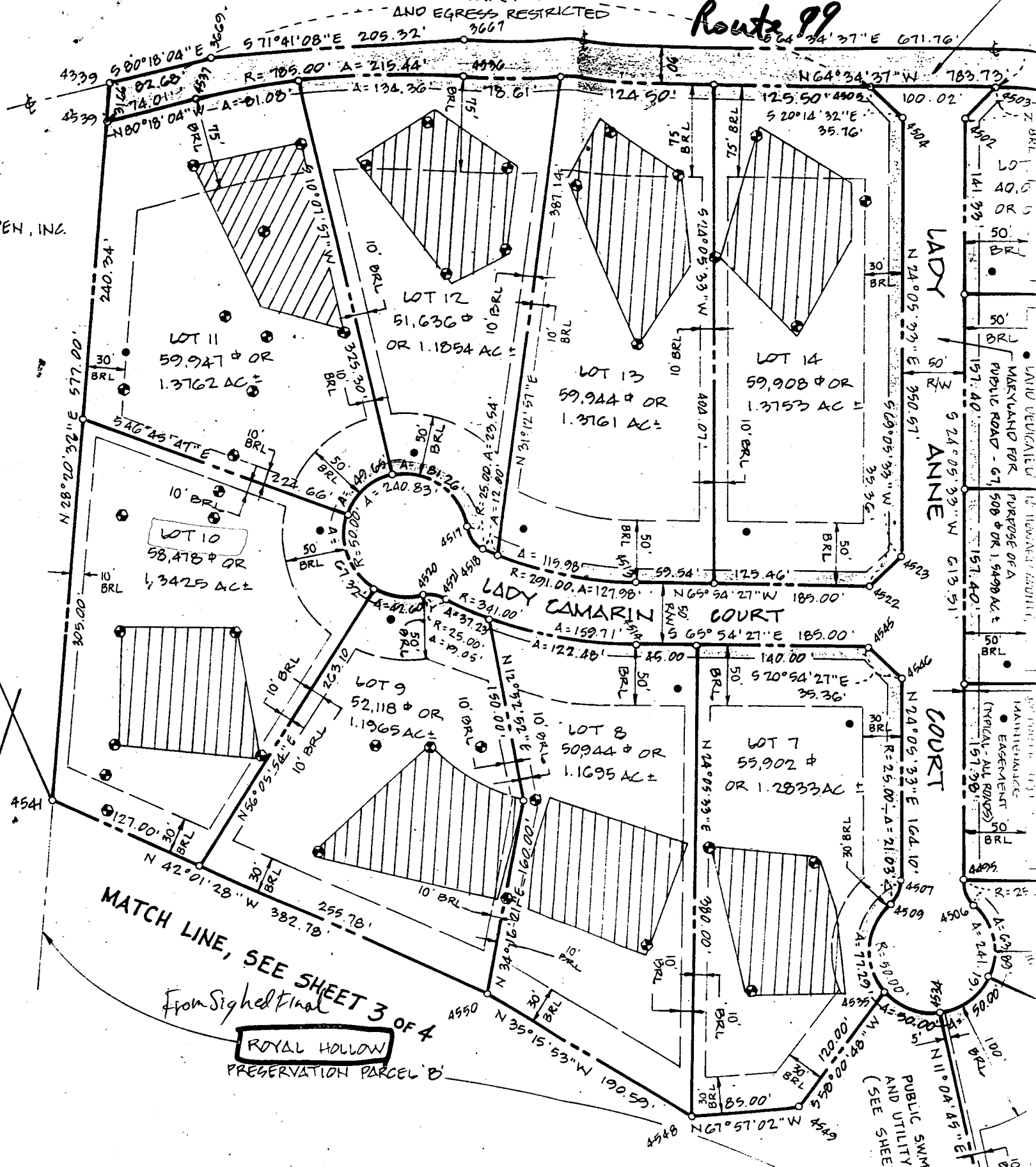
LIMIT OF DISTURBANCE

SHOULDER CONSTR

SEE LAYOUT ANNE'S
LIMITS OF WORK

VEHICULAR INGRESS AND EGRESS RESTRICTED

Route 99



MATCH LINE, SEE SHEET 3 OF 4
 From Sigheh Final
ROYAL HOLLOW
 PRESERVATION PARCEL B

PUBLIC SWM, DRAINAGE AND UTILITY EASEMENT
 (SEE SHEET 3 OF 4)

CURVE DATA

PT. - PT.	RADIUS	ARC	TAN.	DELTA	CHORD	CHORD BEARING
4537-4536	785.00'	215.44'	108.40'	15°43'27"	214.76'	N72°26'20"W
4513-4518	291.00'	127.98'	63.04'	29°11'55"	126.95'	S53°18'30"E
4518-4517	25.00'	23.54'	12.73'	53°57'37"	22.68'	S13°43'44"E
4517-4520	50.00'	240.83'	00'	275°58'22"	66.93'	N55°15'53"E

C1 7857 SEQUENCE NO. (MDE USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 5-6 ON ALL CARDS)

STATE OF MARYLAND
 WELL COMPLETION REPORT
 FILL IN THIS FORM COMPLETELY
 PLEASE PRINT OR TYPE

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

COUNTY NUMBER **A 499187**
 PERMIT NO. FROM "PERMIT TO DRILL WELL"
HO-94-0963

ST/CO USE ONLY
 DATE RECEIVED **052098**
 DATE WELL COMPLETED **050898**

Depth of Well **400**
 (TO NEAREST FOOT)

OWNER **LEE DEVELOPMENT**
 STREET OR RFD **LADY CAMARIN** TOWN **LISBON**
 SUBDIVISION **Royal Hollow** SECTION _____ LOT **10**

WELL LOG
 Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (Use additional sheets if needed)	FEET		check if water bearing
	FROM	TO	
top soil	9	4	
Shale	4	50	
soft Brown shale	50	92	✓
Brown slate	92	140	
gray mica	140	165	✓
Blue slate	165	268	
opening	268	269	✓
Blue. slate	269	400	

GROUTING RECORD (yes no)
 WELL HAS BEEN GROUTED (Circle Appropriate Box)
 TYPE OF GROUTING MATERIAL (Circle one)
 CEMENT BENTONITE CLAY
 NO. OF BAGS **33** NO. OF POUNDS **3300**
 GALLONS OF WATER **165**
 DEPTH OF GROUT SEAL (to nearest foot)
 from **0** ft. to **75** ft.

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

MAIN CASING TYPE
 Nominal diameter (nearest inch) **6** Total depth of main casing (nearest foot) **100**

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

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

NUMBER OF UNSUCCESSFUL WELLS: **0**
 WELL HYDROFRACTURED

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.

TYPE: **MWD/MSD/MGD**
 DRILLERS LIC. NO. **040**

DRILLERS SIGNATURE **George F. Esterline**
 (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. **481**
 SIGNATURE **George F. Esterline**

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

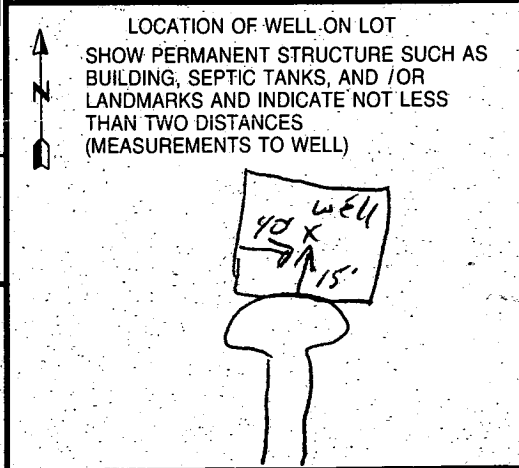
C 2
 DEPTH (nearest ft.)
 1 **40** 98 _____ 100 _____
 2 _____ _____ _____ _____ _____
 3 _____ _____ _____ _____ _____
 SLOT SIZE 1 _____ 2 _____ 3 _____
 DIAMETER OF SCREEN _____ (NEAREST INCH)
 from _____ to _____

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

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)
 T _____ (E.R.O.S.) W.Q. _____
 TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3
PUMPING TEST
 HOURS PUMPED (nearest hour) **3**
 PUMPING RATE (gal. per min.) **4**
 METHOD USED TO MEASURE PUMPING RATE **Bucket**
 WATER LEVEL (distance from land surface)
 BEFORE PUMPING **49** ft.
 WHEN PUMPING **189** ft.
 TYPE OF PUMP USED (for test)
 S submersible

PUMP INSTALLED
 DRILLER WILL INSTALL PUMP (CIRCLE) (YES OR NO) **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) _____
 PUMP HORSE POWER _____
 PUMP COLUMN LENGTH (nearest ft.) _____
 CASING HEIGHT (circle appropriate box and enter casing height)
 above } LAND SURFACE
 below } **2** (nearest foot)





L. FRANKLIN EASTERDAY, INC.

WELL DRILLING - TRENCHING - PUMPS & SERVICE

9265 Brown Church Rd., Mt. Airy, Maryland 21771

PHONE: 301-829-1640 • FAX: 301-829-2667

December 4, 1997

Craig Williams
Howard County Health Dept.
3525 Ellicott Mills Drive
Ellicott City, Md. 21043

RE: State Well Permits
Royal Hollow Subdivision

Dear Mr. Williams:

Please renew the nine following state well permits for the above referenced subdivision for another year.

Lot 2	HO-94-0943 ✓
Lot 3	HO-94-0944 ✓
Lot 4	HO-94-0945 ✓
Lot 5	HO-94-0965 ✓
Lot 6	HO-94-0966 ✓
Lot 9	HO-94-0962 ✓
Lot 10	HO-94-0963 ✓ extended to 10/24/98
Lot 11	HO-94-0964 ✓
Preservation Parcel	HO-94-0967 ✓

Please advise if this is a problem, otherwise we will consider the matter taken care of. Thank you for your prompt attention to this matter.

Very truly yours,

George F. Easterday
George F. Easterday, CWD/DI
Vice President
MWD 040

CFE/sve

APPLICATION

HOWARD COUNTY

SERIAL NUMBER

PERMIT APPLICATION

DEPARTMENT OF INSPECTIONS, LICENSES & PERMIT
3430 COURT HOUSE DRIVE, ELLICOTT CITY, MARYLAND 21043

16825

B0011766

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

16013 Kelly Camarin Ct 35776
Lisbon, Md. 21771

GRADING/SEDIMENT CONTROL YES NO

SDP #

DESCRIPTION OF WORK AUTHORIZED

new single family dw. morning
2-story, attached garage
4 B.R. 2 1/2 Baths, full porch, f.p.

LOT NO.	PARCEL NO.	SEC.	AREA	BLOCK NO.	LIBER	FOLIO
10	84	NA	NA	10		

SUB DIVISION	ZONE	ZONE MAP	ELEC. DIST.	CENSUS TR.
Rural Hill	RC 252	7	4	1040

OWNER NAME AND ADDRESS PHONE NO.
C + P Homes Inc. 301
17327 Pink Dogwood Mt Airy, Md. 695 2604

OCCUPANT'S NAME AND ADDRESS PHONE NO.

ARCHITECT OR ENGINEER'S NAME AND ADDRESS PHONE NO.

CONTRACTOR'S NAME AND ADDRESS PHONE NO.

EXISTING USE PROPOSED USE

EST. CONSTRUCTION COST LICENSE NUMBER PERMIT FEE

W/S CODE

DISTANCE IN FEET FROM RW 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

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 4308

SIZE OF BLDG.	FRONT	DEPTH	HEIGHT

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

FOOTINGS	FOUNDATION	S. WALLS

UTILITIES				
WATER/WELL	SEWER/SEPTIC	GAS	ELECTRICITY	TYPE OF HEAT
				Elec.

I have carefully examined and read this application and know the same is true and correct, and that in 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 completed.

SIGNATURE DATE
5/16/98

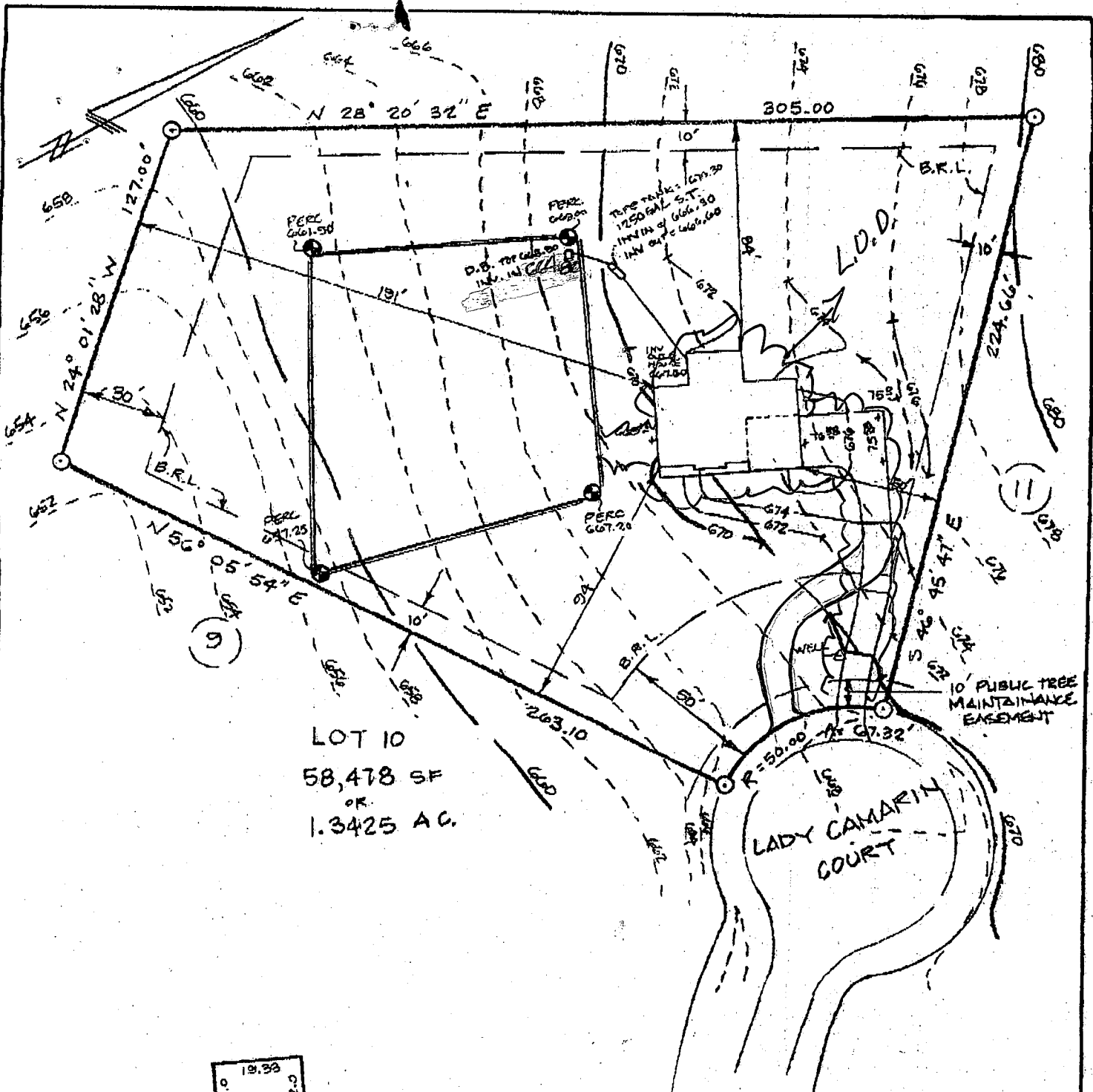
FOR OFFICE USE ONLY

FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING		
SHA		
SEDIMENT/GRADING		
BUILDING OFFICIAL		
WATER & SEWER		
HEALTH DEPT.	6/2/98	DORRIS
FIRE PROTECTION		
STORM WATER MGMT.		

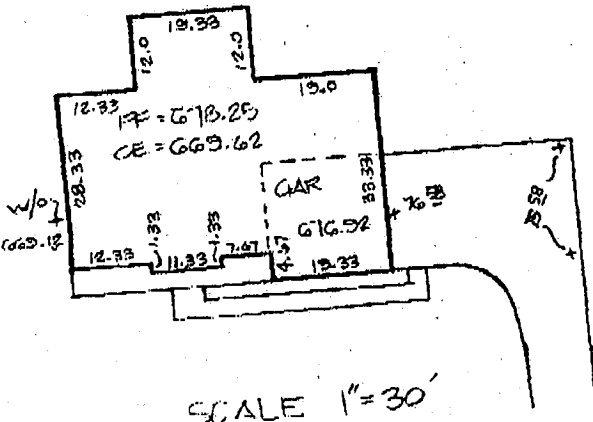
APPROVED DATE

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

A



LOT 10
58,478 SF
OR
1.3425 AC.



Approved Septic System Plan
Howard County Health Department

Donna K. Scott 6/2/98
Signature Date

Total linear feet of trench required 280 feet

Width of trench(es) 2 feet

Depth of trench(es) 7 feet

Depth of steps required below 3

PLOT PLAN
FOR
LOT NO. 10
ROYAL HOLLOW
FOURTH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND

<p>Carroll Land Services Incorporated Engineers • Surveyors • Land Development Consultants Landscape Architects • Environmental Specialists 439 East Main Street Westminister, MD 21157-3539 (410) 878-2017 FAX (410) 878-0009</p>	DRAWN BY: JA
	DESIGN BY: JA
	REVIEW BY:
	DATE: 5/14/98
	SCALE: 1"=50'
	JOB NO: 98109
SHEET: 1 OF 1	