

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 510139

A 49989-C

DISTRICT 5th

DATE 5-13-98

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXXXX~~ 410-313-2640

INDEXED

05-425891

DATE SYSTEM APPROVED 6/2/98

INSPECTOR [Signature]

Jack Fyock IS PERMITTED TO INSTALL ALTER

ADDRESS 13775 Triadelphia Road, Glenelg, MD 21737 PHONE 410-988-9270

SUBDIVISION Hyde Property LOT 3 ROAD 12288 Hydeaway Court

PROPERTY OWNER Cornerstone Homes, Inc. Charles Max

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

BLDG. PERMIT SKIPPED

AND RETURNED 2-10-99

Serial # B70 116594
check

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

LOCATION - Place the distribution box 150 feet down the right lot line and 10 feet off this same lot line as seen when facing the lot from Hydeaway Court. Run trenches on contour towards the left lot line.

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

ok [Signature] 9-17-98

PLANS APPROVED BY Donna K. Soe DATE 04/15/98

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

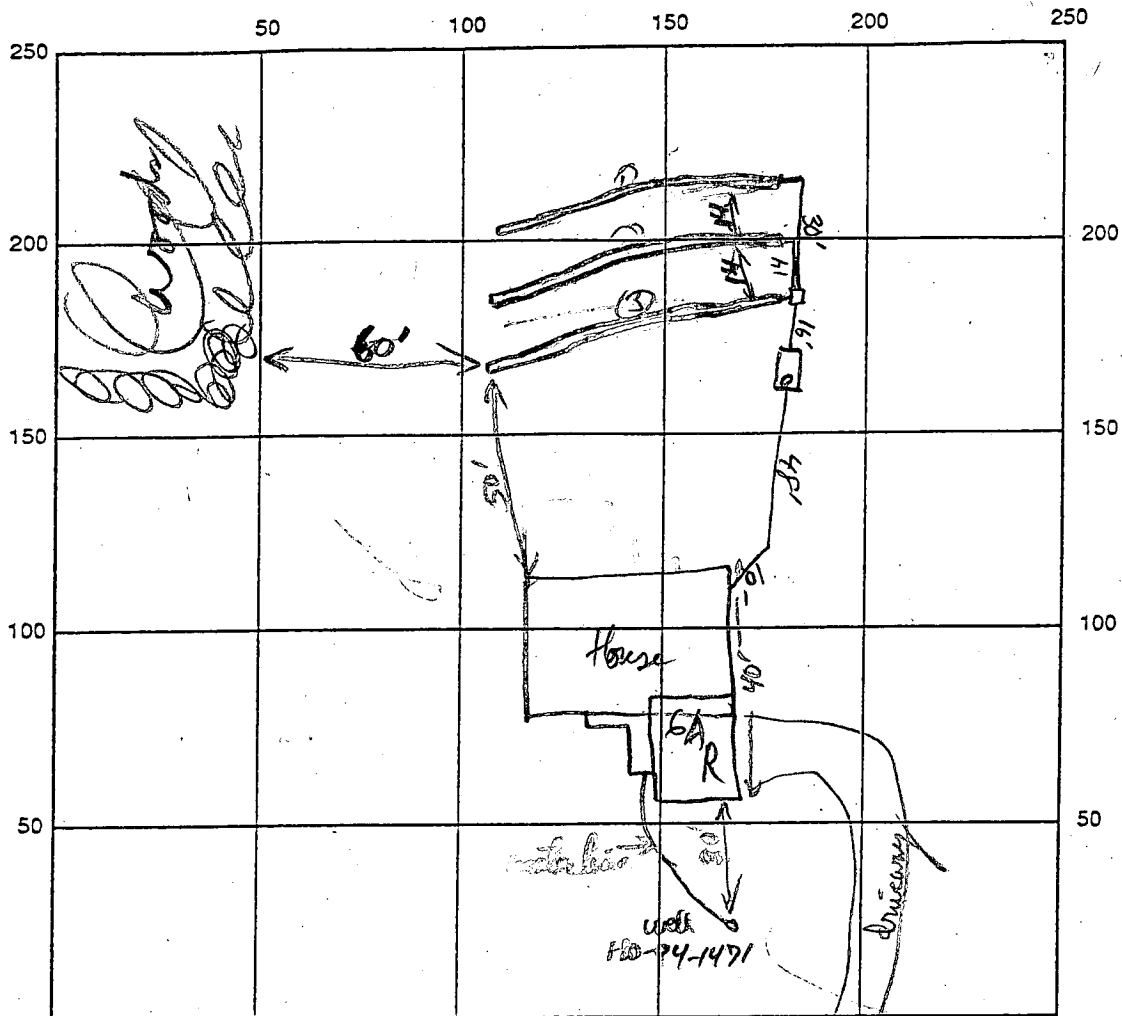
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON, CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

A 49989-C



Hydaway Ct INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1250 gal CLEANOUTS S.T. ✓

DISTRIBUTION BOX LEVEL ✓

DRAIN FIELD/TITLE DEPTH 5' FT. TRENCH WIDTH FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH FT. TOTAL LENGTH ~~80/10/80~~^{12/3} FT. = 240 LF

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA SQ. FT.

DRYWALL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA SQ. FT.

REMARKS: Septic Trenches are spaced enough to allow repair between them. Trenches installed east of a lot of driveway. Repair system will be a bit awkward but one feasible. Septic Trenches are properly installed as per P/plan (relatively horizontal) and specs however. OK to cover. House connection OK. R/S/11/98

well pitless depth + water line (at 36ft) OK to cover R/P 6/2/98

DATE SYSTEM APPROVED 6/2/98 INSPECTOR R/S/11/98

APPLICATION

PERCOLATION TESTING

A 49989C

P _____

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

DISTRICT _____

DATE 4/26/94

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 H & A CONSTRUCTION INC % AL PROCOPIO

ADDRESS 1046 Annapolis Rd. Gambrills MD PHONE (301) 621-7888

AGENT OR PROSPECTIVE BUYER FISHER COLLINS & CARTER INC. 21054

ADDRESS 9171 Balto. Natl. pike ellcott city MD. 21042 PHONE 461-2855

PROPERTY LOCATION: HYDE PROP.

SUBDIVISION MD. RT 216 & PETRILLO DRIVE LOT NO. 3

ROAD AND DESCRIPTION (12288 HYDEAWAY COURT)

BLDG. PERMIT SIGNED

AND RETURNED

4-13-94
Serial # 219 110732

TAX MAP 40 PARCEL # 133

SIZE OF LOT 1 AC. TYPE BLDG. S.F.D. - 4 BRM
(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.

Zacharia y. Fisch
(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

Lot 3 49989C

COUNTY #

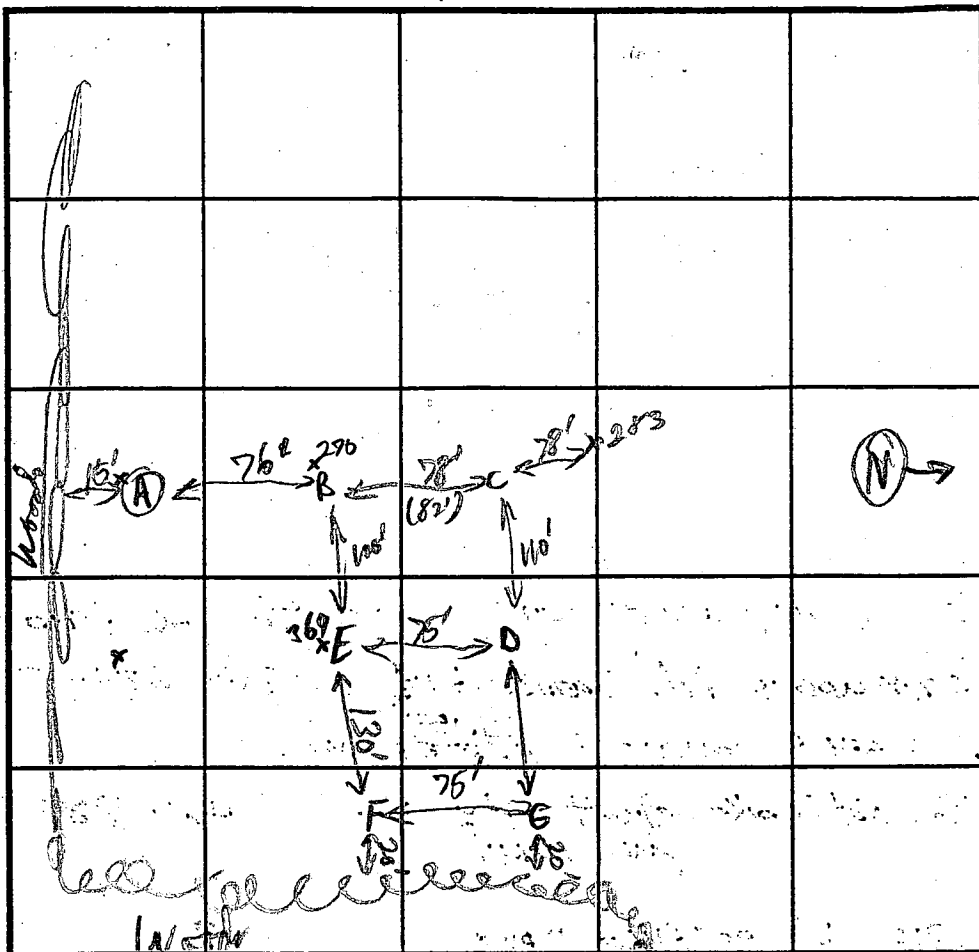
SOIL PROFILE
0' 372 F

Red Clay
3-4'
Mix
Tan yel
+ Sandy Brn
SL
(r. mica)

6
Red Clay
3
Red SCL
- SL
5
var yel
Red Brn Mica
Mica
SL

SOIL PROFILE
0' D/E

Yel Brn
SCL 2-3'
Red Brn CL 3-5'
Mix yel,
white + Tan
Mica
SL-LS



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
5/3/99	372 F	✓ 4'	2:04:25	2:06:48	2:06:48	2:10:50	4 min
		✓ 11					
	# 6	4'	2:12:38	Mixed (1 1/2) 2:16:20		2:17:50	2 1/2 min
		✓ 11					
	369 E	✓ 10 5					3 1/2 min
	D	3 1/2					8 1/2
		✓ 10 1/2 7 1/2					5

REMARKS _____
 TYPE OF SOIL Clay, Eluvial
 TESTED BY PPully ALSO PRESENT C. L. ...
 TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 5 min TRENCH WIDTH 3'
 INLET DEPTH 3 MAXIMUM BOTTOM DEPTH 5 SQ. FT./BEDROOM 180

6
5/28/99

C1 05070

SEQUENCE NO. (MDE 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 49989C

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED 03 30 98

Depth of Well 22 200 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-1471

OWNER Cornerstone Homes STREET OR RFD 12288 Hyde away Ct TOWN Fulton SUBDIVISION Hyde Property SECTION LOT 3

WELL LOG

No required for driven wells STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

Table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entries like Topsoil, Sandy Clay, Sandstone, Mica Gray, etc.

GROUTING RECORD

WELL HAS BEEN GROUTED (Y/N) TYPE OF GROUTING MATERIAL (CM, BC) NO. OF BAGS 46 NO. OF POUNDS 4600 GALLONS OF WATER 230 DEPTH OF GROUT SEAL 0 to 74 ft.

CASING RECORD

MAIN CASING TYPE ST 6 83 Nominal diameter top (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 (ST, BR, HO, PL, OT) insert appropriate code below

PUMPING TEST

HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 12. METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 25 ft. WHEN PUMPING 106 ft. TYPE OF PUMP USED (for test) S submersible

PUMP INSTALLED

DRILLER WILL INSTALL PUMP (YES/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) 31 35. PUMP HORSE POWER 37 41. PUMP COLUMN LENGTH (nearest ft.) 43 47. CASING HEIGHT (circle appropriate box and enter casing height) above 49 below 2 (nearest foot)

NUMBER OF UNSUCCESSFUL WELLS:

WELL HYDROFRACTURED (Y/N)

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 LIC. NO. 1 MW D 040 BEAR F. ESTERLEY DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. 1 MW D 585

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

DEPTH (nearest ft.)

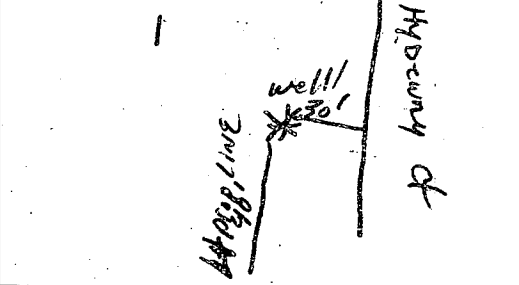
HO 81 200

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

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)



B 1 2642 SEQUENCE NO. (MDE USE ONLY)

1 2 3 4 5 6
 (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-94-1471
 70 fill in this form completely 79

Date Received (APA) 2/18/98
 8 MM DD 13

OWNER INFORMATION RN 7370

15 Cornerstone Homes Owner First Name 34
9691 Norfolk Ave Street or RFD 55
Laurel, Md. 20723 Town 57 State 70 Zip 76

B 3 LOCATION OF WELL CC#

8 COUNTY Howard

23 SUBDIVISION Hydeway Manor Hyde Property 42

SECTION 44 46 LOT 3 48 50

52 NEAREST TOWN Fulton 71

MILES FROM TOWN (enter 0 if in town) 1 M I 73 76 77 78

DRILLER INFORMATION

George F. Easterday M WD 040
 Driller's Name 76 License No. 81

L. Franklin Easterday, Inc. Firm Name
9265 Brown Church Rd., MT. Airy, Md. 21771 Address
George F. Easterday 2/14/98 Signature Date

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

Hydeway Ct (12288) 11 NEAR WHAT ROAD 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

34 50 37 DISTANCE FROM ROAD ENTER FT OR MI 38 39

TAX MAP: 40 BLK: 18 PARCEL 133

B 2 WELL INFORMATION

1 2 APPROX. PUMPING RATE 5
 (GAL. PER MIN.) 8 12

AVERAGE DAILY QUANTITY NEEDED 500
 (GAL. PER DAY) 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)

FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)

22 INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)

PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE APPROVAL)

TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard COUNTY NAME A 49989 C COUNTY NO.

STATE SIGNATURE _____ INSERT S → 41

DATE ISSUED 03/11/98 3/11/99
 43 MM DD YY 48 CO SIGNATURE EXP. DATE

NORTH GRID 482 0 0 0 EAST GRID 0815 0 0 0
 50 55 57 63

APPROXIMATE DEPTH OF WELL 300 FEET
 24 28

APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST

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 3/31/98

SOURCES OF DRILLING WATER

1. wells

2. _____

3. _____

WRITE THE BOX-NUMBER FROM THE MAP HERE X

E 810 5 000 000
 N 480 12 000 000

REPLACEMENT OR DEEPEINED 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-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS

THIS WELL WILL DEEPEIN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) 41 _____ 52

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION

MAP 18 E3

Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROP. PERMIT NUMBER 1096 GAP 013 54 63

WRITE INITIALS IN BOX RP PERMIT No. HO-94-1471 FORCE 67 68 70 71 72 73 74 75 76 77 78 79

2/23/98 - No Well Stakes



R=309.00'
=386.36'

PAGE 02

CORNERSTONE HOMES

02/11/1998 10:17 3015969704

Prop Septic Tank (5x8)

FF = 481.7
B = 473.0

FF = 482.7
B = 474.0

LOT 2
49,373 SF

LOT 3
44,679 SF

HYDEWAY COURT
(50' R/W)

L.O.D.

L.O.D.

SILT FENCE

L=123.36'

165.00'

22' PINT.

PWL

PL

47W

30' BRL

10' BRL

10' BRL

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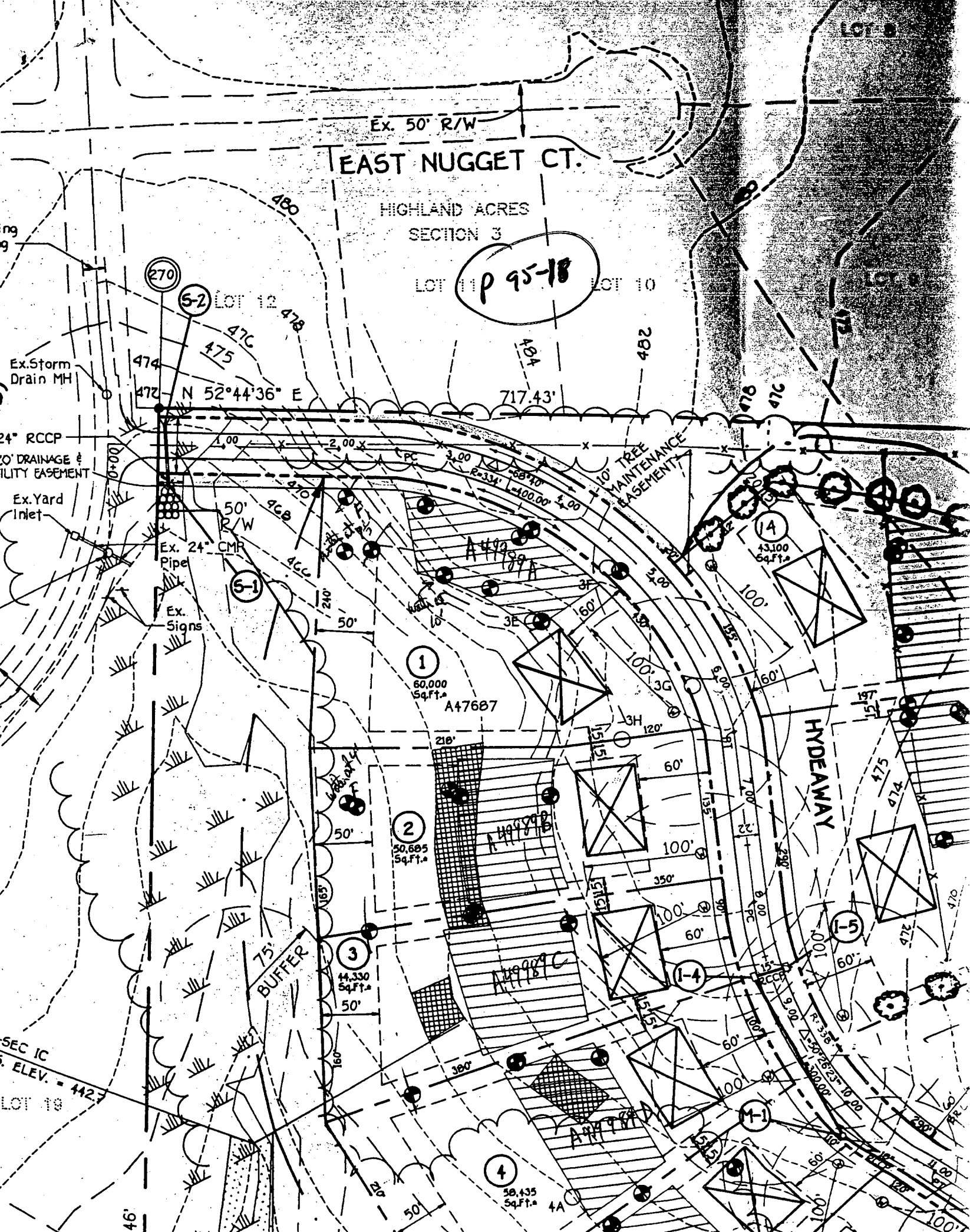
10' BRL

10' BRL

EAST NUGGET CT.

HIGHLAND ACRES
SECTION 3

LOT 11 **P 95-18** LOT 10



(270)

(5-2)

LOT 12

Ex. Storm Drain MH

N 52°44'36" E

717.43'

24" RCCP
10' DRAINAGE & UTILITY EASEMENT

Ex. Yard Inlet

Ex. 24" CMR Pipe

Ex. Signs

10' TREE MAINTENANCE EASEMENT

50' R/W

(5-1)

(1)

60,000 Sq.Ft.

A47687

(2)

50,685 Sq.Ft.

(3)

44,330 Sq.Ft.

75' BUFFER

HYDEAWAY

SEC 1C
ELEV. = 442.7

LOT 19

(4)

59,435 Sq.Ft.

4A

(1-5)

(1-1)

(1-2)

(1-3)

(1-4)

(1-5)

HYDEAWAY COURT

(50' R/W)

N45°00'16"W 88.89'

76.32'

Approved Septic System Plan
Howard County Health Department

[Signature]

4/15/98

Signature

Date

Septic ELEVATIONS

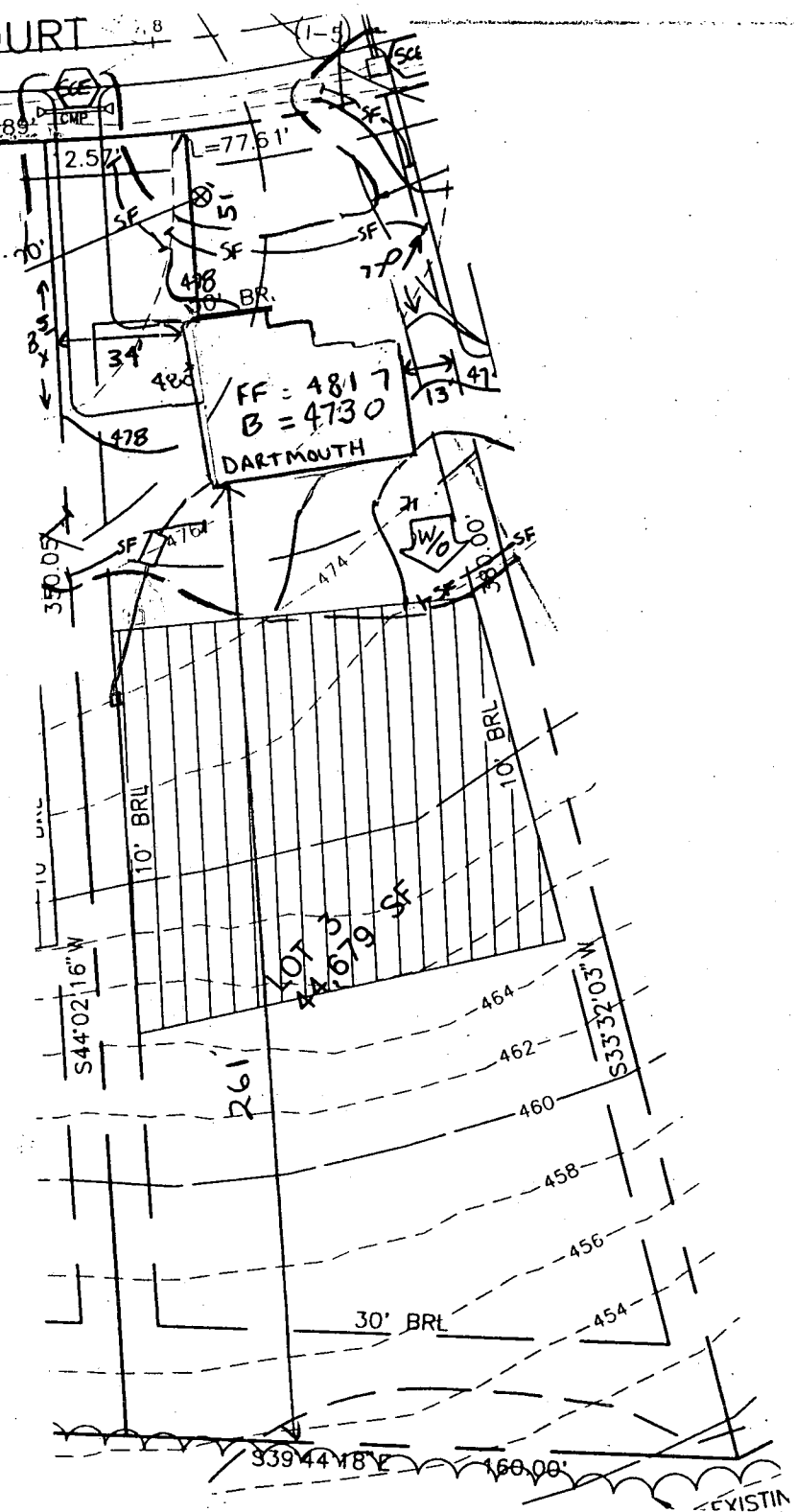
- HOUSE OUT - 472⁰
- TANK IN - 471⁷
- TANK OUT - 471⁴
- Box IN - 471⁰
- Box OUT - 470⁷
- EXIST ELEV - 474⁹

Total linear feet of trench required 240 feet

Width of trench(es) 3 feet

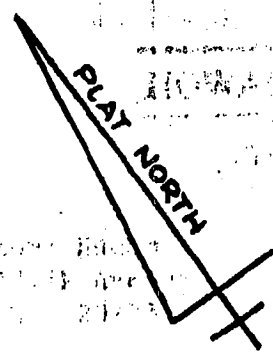
Depth of trench(es) 5 feet

Depth of stone required below distribution pipe 2 feet

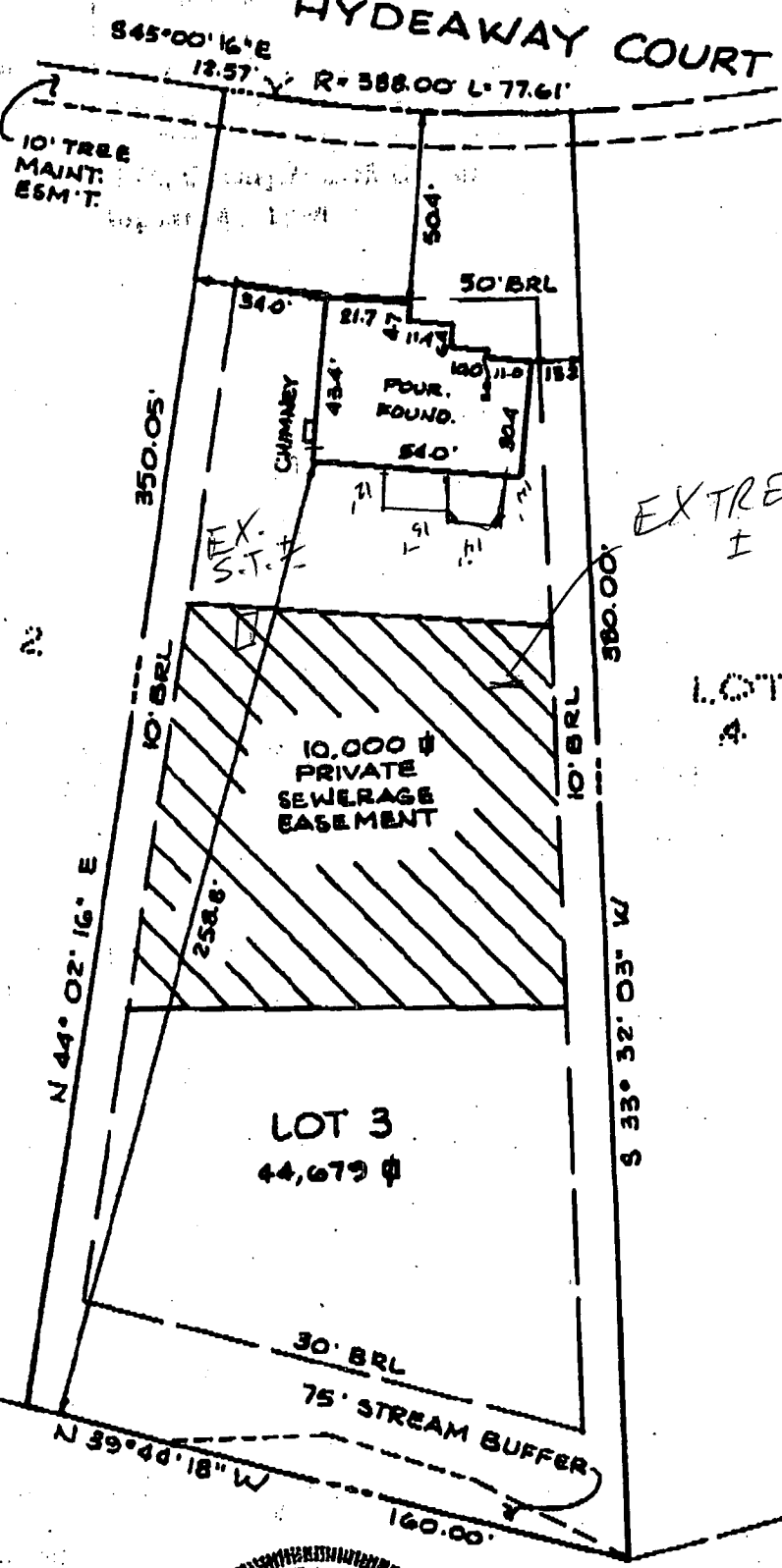


BUILDER: CORNERSTONE HOMES, INC 9691 NORFOLK AVENUE LAUREL, MD 20723 (410) 792-2565	PROJECT: HYDE PROPERTY LOT 3 12283 Hydeaway CT	
	LOCATION: TAX MAP 40 - PARCEL 133 5th ELECTION DISTRICT HOWARD COUNTY, MARYLAND	
TITLE: PLOT PLAN		
DATE:	MAY, 1997	DRAWING <u>2</u> OF <u>3</u>

THIS LOCATION DRAWING IS OF BENEFIT TO A CONSUMER ONLY INsofar AS IT IS REQUIRED BY A LENDER OR TITLE INSURANCE COMPANY, OR ITS AGENTS, IN CONNECTION WITH FINANCING THE PROPERTY SHOWN HEREON. THIS DRAWING IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OF PROPERTY LINES OR THE CONSTRUCTION OF IMPROVEMENTS SUCH AS FENCES, GARAGES, OR BUILDING ADDITIONS. THIS DRAWING SHOWS THE CONFIGURATION AS CURRENTLY RECORDED, BEING SUFFICIENT FOR SETTLEMENT PURPOSES, BUT BEING INSUFFICIENT FOR THE SETTING OF PROPERTY CORNER PINS ON THE GROUND.



HYDEAWAY COURT



PROPOSED
DECK OK
MR 3/10/99

EXTRENCH
I
LOT
4

TOP OF FOUNDATION
WALL ELEV. = 480.5'

SURVEYOR'S CERTIFICATE

I HEREBY CERTIFY THAT THE LOCATION DRAWING SHOWN HEREON IS CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF; THAT THE IMPROVEMENTS HAVE BEEN LOCATED AS THE RESULT OF A FIELD SURVEY, AND THAT THERE ARE NO VISIBLE ENCROACHMENTS UNLESS SHOWN; THE PROPERTY DOES NOT LIE WITHIN A FLOOD HAZARD AREA ON THE FEMA F.I.R.M. IDENTIFIED BELOW. AT THE WRITTEN REQUEST OF THE PURCHASER, NO PROPERTY CORNER MARKERS HAVE BEEN SET.



Peter J. Dare
PETER J. DARE
MD. PROPERTY LINE SURVEYOR #224

RECORD PLAT No. 12467
FEMA FIRM No. 240044 0037 B
DATED DECEMBER 4, 1986

TSA GROUP, INC.
planning • architecture • engineering • surveying •
8480 BALTIMORE NATIONAL PIKE SUITE 418
ELLICOTT CITY, MARYLAND 21043
(410) 485-8105

LOCATION DRAWING
HYDE PROPERTY
LOT 3
12288 HYDEAWAY COURT

6th ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
SCALE: 1" = 50' DATE: 4-27-98

Building Address 12286 Hydaway Ct.
Hydaway, MD 20777

Suite/Apt. #: _____ SDP/WP/Petition #: _____

Census Tract 6051.02 Subdivision Hyle Pop

Section _____ Area _____ Lot 3

Tax Map 40 Parcel 133 Grid K1100

Zoning AR-DCR Map Coordinates 18E3 Lot size 21

Property Owner's Name Charles May

Address 12286 Hydaway Ct.

City Hydaway State MD Zip Code 20777

Home Phone _____ Work Phone _____

Applicant's Name & Mailing Address, (if other than stated hereon):

Phone _____ Fax _____

Existing Use SFD

Proposed Use same with deck

Estimated Construction Cost \$ 165,000.00

Description of Work Install 14' x 19' deck w/ steps to grade

Contractor Company Fine Carpentry Co.

Contact Person Brian Spadlin

Address 10846 Greenfield Rd

City Annapolis State MD Zip Code 21401

License No. 19097

Phone 410-224-5037 Fax _____

Occupant or Tenant Charles May

Contact Name Brian Spadlin

Address 12286 Hydaway Ct.

City Hydaway State MD Zip Code 20777

Phone 501-254-1154 Fax _____

Engineer or Architect Company _____

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: _____	Water Supply: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private
No. of stories: _____	Sewage Disposal: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: _____ <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Construction type: _____ <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: _____ <input checked="" type="checkbox"/> Public <input checked="" type="checkbox"/> Private
1st floor: _____	Sewage Disposal: _____ <input checked="" type="checkbox"/> Public <input checked="" type="checkbox"/> Private
2nd floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: _____ Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms _____	Heating System: _____ <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other: _____
Other Structure: _____ Dimensions: _____ Footings: <u>yes 2 piers</u> Roof: _____	
<input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

[Signature]
 Applicant's Signature

 Title/Company

Brian Spadlin
 Print Name

03. 99
 Date

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
**** PLEASE WRITE NEATLY AND LEGIBLY. ****

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#
Land Development DPZ			Front: _____	21912
State Highways			Rear: _____	Filing fee \$ _____
Building Official	<u>2/10/99</u>	<u>[Signature]</u>	Side: _____	Permit fee \$ <u>60</u>
Dev. Engineering DPZ			Side St: _____	Excise tax \$ _____
Health	<u>2/10/99</u>	<u>Mark E. Rejkim</u>	All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Fire Protection			Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Add'l permit fee \$ _____
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>			Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ <u>60</u>
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Lot Coverage for New/Town Zone _____	Balance due \$ _____
ONE STOP SHOP: <input type="checkbox"/>			SDP/Red-line approval date _____	Check # <u>15</u>
			Accepted by _____	Validation # _____