

8/13/84
Wm. Williams

03-304671

Approved 8/13/84
Stayer

PERMIT

P 34217
A REPAIR

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

ELLICOTT CITY

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
992-2330

INDEX

DISTRICT 3rd

DATE 8/13/84

Jack Fyock IS PERMITTED TO INSTALL _____ ALTER X

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

SUBDIVISION Wayside Estates ROAD 3624 Lynway Court LOT 6, Sec. 3

PROPERTY OWNER Richard Huber PHONE: 531-2765
3624 Lynway Court

ADDRESS Ellicott City, Maruland (Off Scheel Drive)

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES _____ NO _____

SEPTIC TANK CAPACITY _____ GALLONS NUMBER OF BEDROOMS _____

REPAIR - CALL FOR INSPECTION WHEN GROUND IS OPENED UP SO SANITARIAN CAN RECOMMEND REPAIR.

Trench 70 ft long - 12 ft deep with 8 ft of stone

PLANS APPROVED BY Frank Skinner DATE 8/10/84

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: IF TRENCH IS USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH.

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 THREE YEARS.

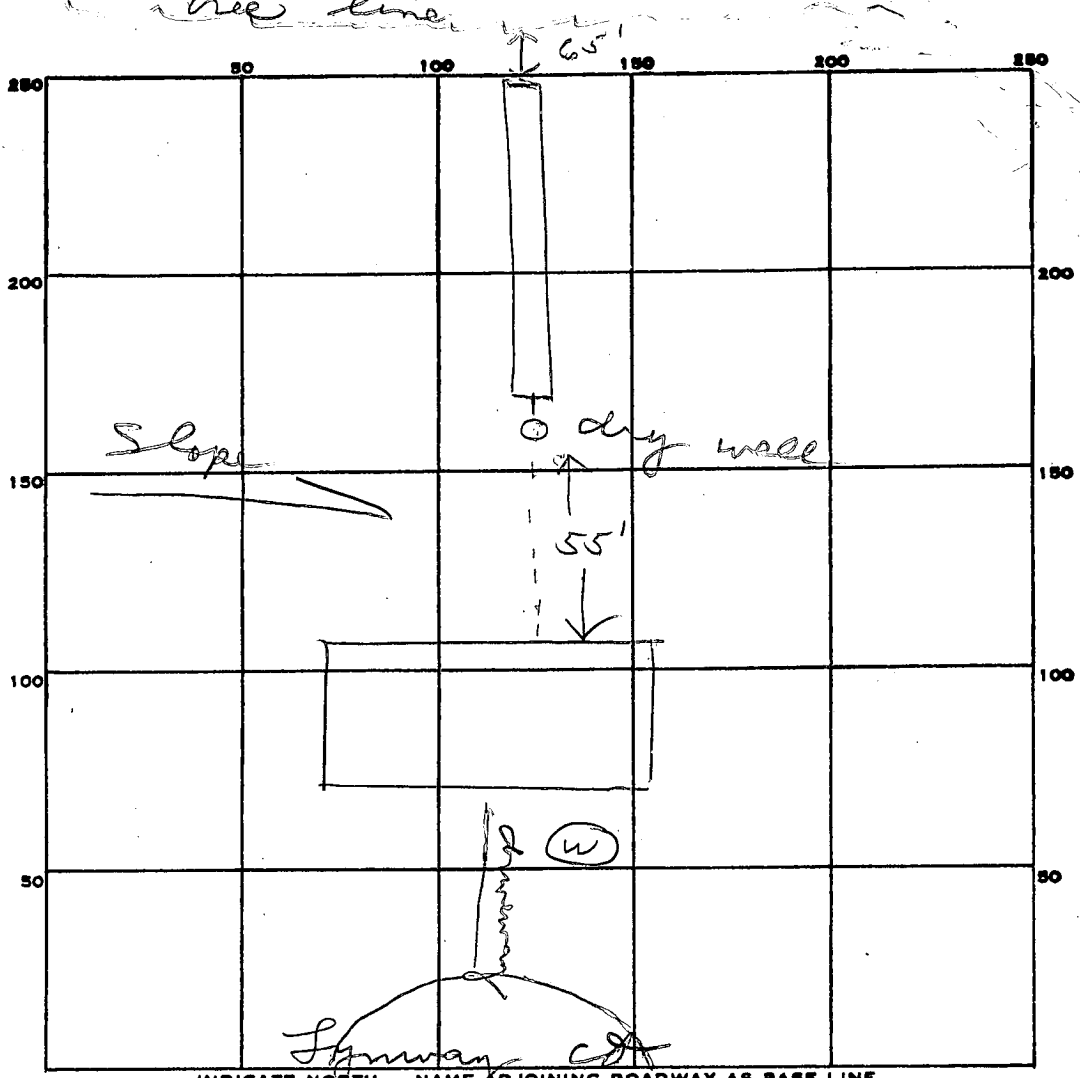
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

BLDG. PERMIT SIGNED
AND RETURNED 8/28/84
Serial # 66619 Pool.

P34217

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.



PERMIT CARD _____

SEPTIC TANK, LEVEL _____

CLEANOUTS _____

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH 12 FT. TRENCH WIDTH 2 FT.

GRAVEL DEPTH 7 1/2 IN. TOTAL LENGTH 80 FT.

$$\begin{array}{r} 7.5 \\ \times 80 \\ \hline 6000 \end{array}$$

NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA 600

SEEPAGE PITS, INSIDE DIAMETER _____ FT. DEPTH BELOW INLET _____ FT.

ABSORBENT AREA 600 SQ. FT.

REMARKS 8/13/84 OK to add stone in trench JS

8/13/84 OK to cover all work. JS

DATE SYSTEM APPROVED 8/13/84

INSPECTOR Stayer

6/20/78
late afternoon

PERMIT

P 28213

A 23896

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 3rd

INDEXED

DATE 6/15/78

Jim Brittingham IS PERMITTED TO INSTALL X ALTER

ADDRESS 3004 N. Rogers Ave., Ellicott City, Md. 21043 PHONE 461-1870

SUBDIVISION Wayside Estates ROAD 3624 Lynway Court LOT 6, Sec. 3

PROPERTY OWNER Grayson, Mr. Floyd

ADDRESS _____

SPECIFICATIONS 4 bedrooms

SEPTIC TANK CAPACITY 1250 GALLONS

DRAIN FIELD _____ DEPTH _____ FEET, BOTTOM AREA _____ SQ. FT.

DEEP TRENCH _____ DEPTH _____ FEET, BOTTOM AREA _____ SQ. FT.

SEEPAGE PITS X ABSORBENT SIDE-WALL AREA 120 SQ. FT. sidewall area per bedroom below inlet.

INLET PIPE 4 FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH 13 FT. BELOW ORIGINAL GRADE

EFFECTIVE DEPTH AT _____ FT. BELOW ORIGINAL GRADE.

LOCATE DISPOSAL AREA 190 FT. FROM front LOT LINE AND 75 FT. FROM left LOT LINE AS SEEN WHEN FACING LOT FROM Lynway Court.

PLANS APPROVED BY Raymond Hodges DATE 10/7/77

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: IF TRENCH IS USED CALL FOR INSPECTION BEFORE PLACING GRAVEL IN TRENCH.

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER.

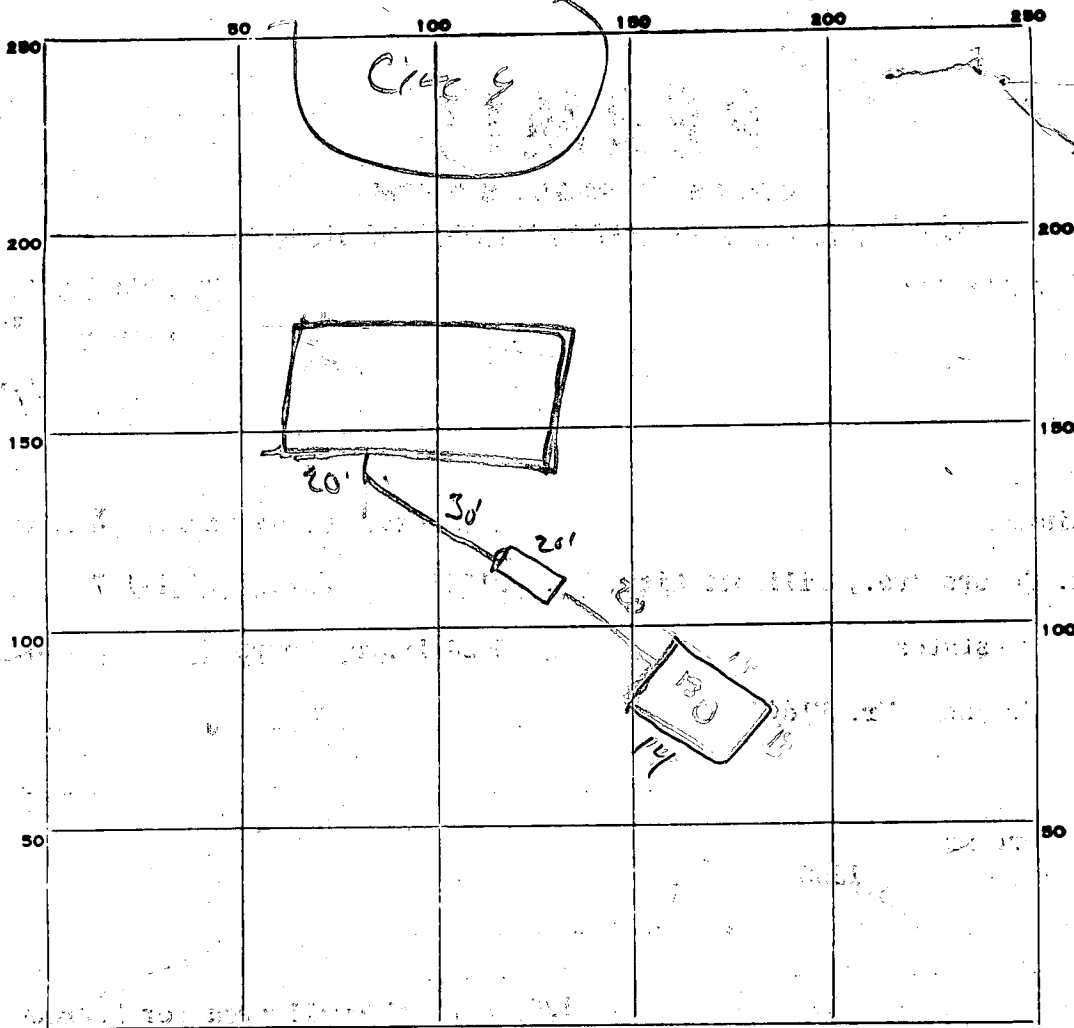
NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

PERMIT VOID AFTER THREE 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 ACCEPTED.

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

A 23896



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD Stop work Capital

SEPTIC TANK, LEVEL ✓ CLEANOUTS needs cap ST AD

DISTRIBUTION BOX, LEVEL NA

TILE FIELD, DEPTH NA FT. TRENCH WIDTH NA FT.

GRAVEL DEPTH _____ IN. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA _____

SEEPAGE PITS, INSIDE DIAMETER 55 FT. DEPTH BELOW INLET 9' FT.

ABSORBENT AREA 495 SQ. FT.

REMARKS System ok size, location etc. Area has been cut
stop work 6/22/98 met Floyd Grayson on site,
grading < 1' above

DATE SYSTEM APPROVED 6/21/98 INSPECTOR W. J. Powell

4-13' holes
on 30,000 ft.

APPLICATION

A 23896

Preliminary

SEWAGE DISPOSAL TESTING

P _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DISTRICT Third

DATE 9/9/76

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 S. Elwood Anderson
12,799 Triadelphia Road
ADDRESS Howard County, Maryland PHONE Any questions call:
Boender - 465-7777

PROPERTY LOCATION:

SUBDIVISION Wayside Estates LOT NO. 6, Section 3

ROAD AND DESCRIPTION Scheel Ct. Lynway Ct

SIZE OF LOT 48,000 sp. ft. TYPE BLDG. 3 or 4 bedroom
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ G. Albert Scheel, Jr.

APPROVED BY *Raymond Boender* FOR *Prophet* DATE 10/7/77
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

DATE	TEST NO.	DEPTH	PRE-WET		TEST 1" DROP		TIME
			START	STOP	START	STOP	

REMARKS _____

TYPE OF SOIL _____

TESTED BY _____ ALSO PRESENT: _____

APPLICATION

A 23896

SEWAGE DISPOSAL TESTING

P _____

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HOWARD COUNTY HEALTH DEPARTMENT
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APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

B 1 **4079** SEQUENCE NO. (WRA USE ONLY) **STATE OF MARYLAND** **A23896** **WRA PERMIT NUMBER**
WATER RESOURCES ADMINISTRATION
TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL **40-73-200**
FILL IN THIS FORM COMPLETELY

DATE RECEIVED (WRA USE ONLY) *2/28/78*
OWNER **GRAYSON** **Floyd**
COL 18 LAST NAME **COL 34 FIRST NAME**
STREET OR RFD **2000 Century Plaza**
COL 36 **COL 55**
POST OFFICE **Columbia, Maryland 21044**
COL 57 **COL 76**

B 1 **CONTINUED** **DRILLER INFORMATION**
DATE **1/13/78** **LICENSE NUMBER** **209**
77 **80**
Howard **Dillon**
FIRST NAME **DRILLER** **LAST NAME**
SIGNATURE *Howard Dillon*

B 3 **LOCATION OF WELL**
COUNTY **HOWARD** **21**
(DO NOT ABBREVIATE COUNTY NAME)
SUBDIVISION **Wayside Vsts.** **42**
23 **42**
SECTION **LOT** **6** **50**
44 **46** **48**
NEAREST TOWN **Keyfield** **71**
52 **MI**
MILES FROM TOWN (ENTER 0 IF IN TOWN) **3** **76 77 78**

B 2 **WELL INFORMATION**
MAXIMUM PUMPING RATE (GALLONS PER MINUTE) **5**
8 **12**
AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) **300**
14 **20**
USE FOR WATER (CIRCLE APPROPRIATE BOX)
 HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
 FARMING, AGRICULTURE, IRRIGATION
 INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT.
 MUNICIPAL WATER SUPPLY
 PRIVATE WATER COMPANY
 TEST
MUST HAVE STATE HEALTH DEPT. APPROVAL

B 4 **DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)**
 N NORTH **E** EAST **NE** NORTHEAST **SE** SOUTHEAST
 S SOUTH **W** WEST **NW** NORTHWEST **SW** SOUTHWEST
NEAR WHAT ROAD **Linway Ct.**
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) **N** **S** **E** **W** **FT**
DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) **100** **34** **MI** **38 39**

APPROXIMATE DEPTH OF WELL **200** **FEET**
24 **28**

APPROXIMATE DIAMETER OF WELL **6** **(NEAREST INCH)**

METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)
 BORED (OR AUGERED) **JETTED** **DRIVEN**
 AIR-ROTARY **AIR-PERCUSSION** **ROTARY (HYDRAULIC ROTARY)**
 CABLE **REVERSE-ROTARY** **DRIVE-POINT**
OTHER (DESCRIBE)

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 (WRA USE ONLY)
APPROPRIATION PERMIT NUMBER **54** **ENGINEER REVIEW DISTRICT NO.** **63** **65**
FORCE **WRITE INITIALS IN BOX** **CONDITIONS** **A E N S G W Q C L U** **70 71 72 73 74 75 76 77 78 79**

B 4 **CONTINUED** **HEALTH DEPARTMENT APPROVAL**
STATE HEALTH (CIRCLE HEALTH) **Howard** **W27442**
MO. DAY YR. **DATE** **011778**
43 **48** **APPROVED BY** **Fred Fromelt, Sanitarian**

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS, ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON THE SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX BELOW AND THE BOX NUMBER FROM THE WELL LOCATION MAP.

N ↑

MD. RT. # 144

43 casing
41 open
29 bags

42/28' oil not great pump malfunction

43' Well casing P.W.D.
41 open
Well ground
Bags of cement P.W.D.

Linway Ct.

Schell Dr.

BOX NUMBER **E 810**
N 520

0/5 **5/5**

1 casing out of ground
No house plan with well
No sections
Map 1/25/10

B 5 **SPECIAL CONDITIONS 8-63 (WRA USE ONLY)**

C 1 **5465** SEQUENCE NO. (WRA USE ONLY)

1 2 3 (SEQ. NO.) 6
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAWES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401
WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER

DATE RECEIVED (WRA USE ONLY) 2/28/78 DEPTH OF WELL 200 PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-23-2545

DATE WELL COMPLETED 2/28/78 (TO NEAREST FOOT) 26

DRILLERS IDENTIFICATION NO. 209

OWNER GRAYSON Floyd

LAST NAME FIRST NAME

STREET OR RFD 2000 Century Plaza POST OFFICE Columbia, Md. 21044

WELL LOG

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

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET		CHECK IF WATER BEARING
	FROM	TO	
Mica Sand	0	43	
Mica Rock	43	200	X

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) Y N

TYPE OF GROUTING MATERIAL (CIRCLE BOX):
 CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 29 NO. OF POUNDS 2755

GALLONS OF WATER 232

DEPTH OF GROUT SEAL (TO NEAREST FOOT)
 FROM 0 FT. TO 41 FT.
 (ENTER 0 IF FROM SURFACE)

CASING RECORD

INSERT APPROPRIATE CODE BELOW

STEEL S T CONCRETE C O

PLASTIC P L OTHER O T

MAIN CASING TYPE S T

NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) 6 TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) 43

OTHER CASING (IF USED)

DIAMETER (INCH) DEPTH (FEET) FROM TO

SCREEN RECORD

INSERT APPROPRIATE CODE BELOW

STEEL S T BRASS OR BRONZE B R OPEN HOLE H O

PLASTIC P L OTHER O T

C 2 (SEQ. NO.) 6

DEPTH (NEAREST WHOLE FOOT) FROM TO

1	7	13	15	17	21
2	23	24	26	30	36
3	38	39	41	45	51

SLOT SIZE 1, 2, 3

DIAMETER OF SCREEN 56 (NEAREST INCH) FROM 60 TO

GRAVEL PACK

IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX 68 F

WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER) (E.R.O.S.)

TELESCOPE CASING 70 LOG INDICATOR 72 OTHER DATA AVAILABLE 74 75 76

C 3 (SEQ. NO.) 6

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) 6

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 11

METHOD USED TO MEASURE PUMPING RATE PUMP

WATER LEVEL: (DISTANCE FROM LAND SURFACE)
 BEFORE PUMPING 35 (NEAREST FOOT) 17 20

WHEN PUMPING 75 (NEAREST FOOT) 22 25

TYPE OF PUMP USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST)
 A AIR P PISTON T TURBINE
 C CENTRIFUGAL R ROTARY O OTHER (DESCRIBE BELOW)
 J JET S SUBMERSIBLE

PUMP INSTALLED

TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: A, C, J, P, R, S, T, O) 29

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) Y N

CAPACITY:
 GALLONS PER MINUTE (TO NEAREST GALLON) 31 35

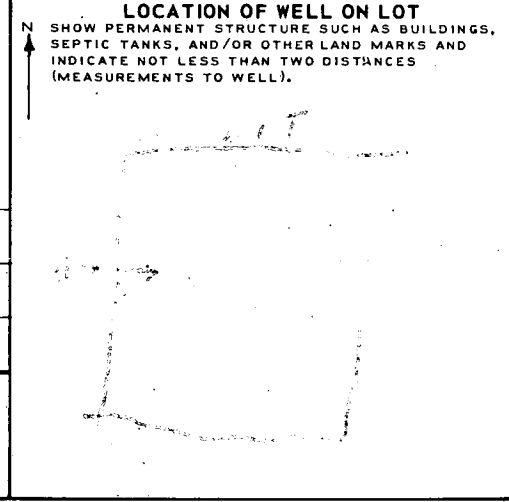
PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH (NEAREST FOOT) 43 47

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)

ABOVE } LAND SURFACE (NEAREST FOOT) 2

BELOW } 49 50 51



CIRCLE APPROPRIATE BOXES

A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED

E ELECTRIC LOG OBTAINED

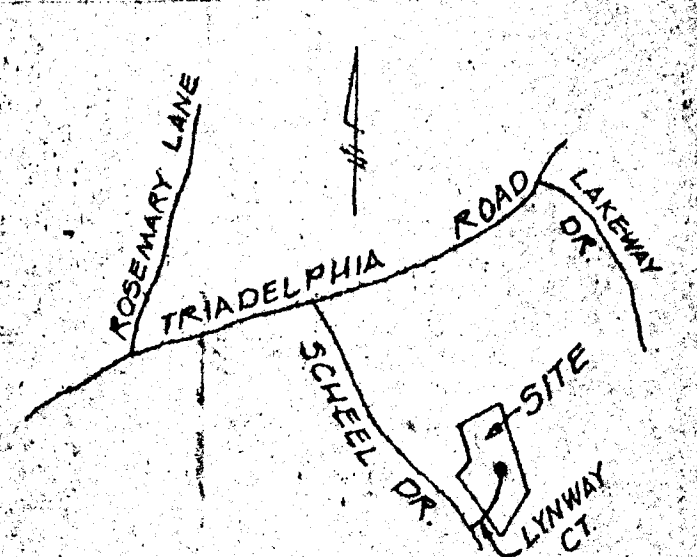
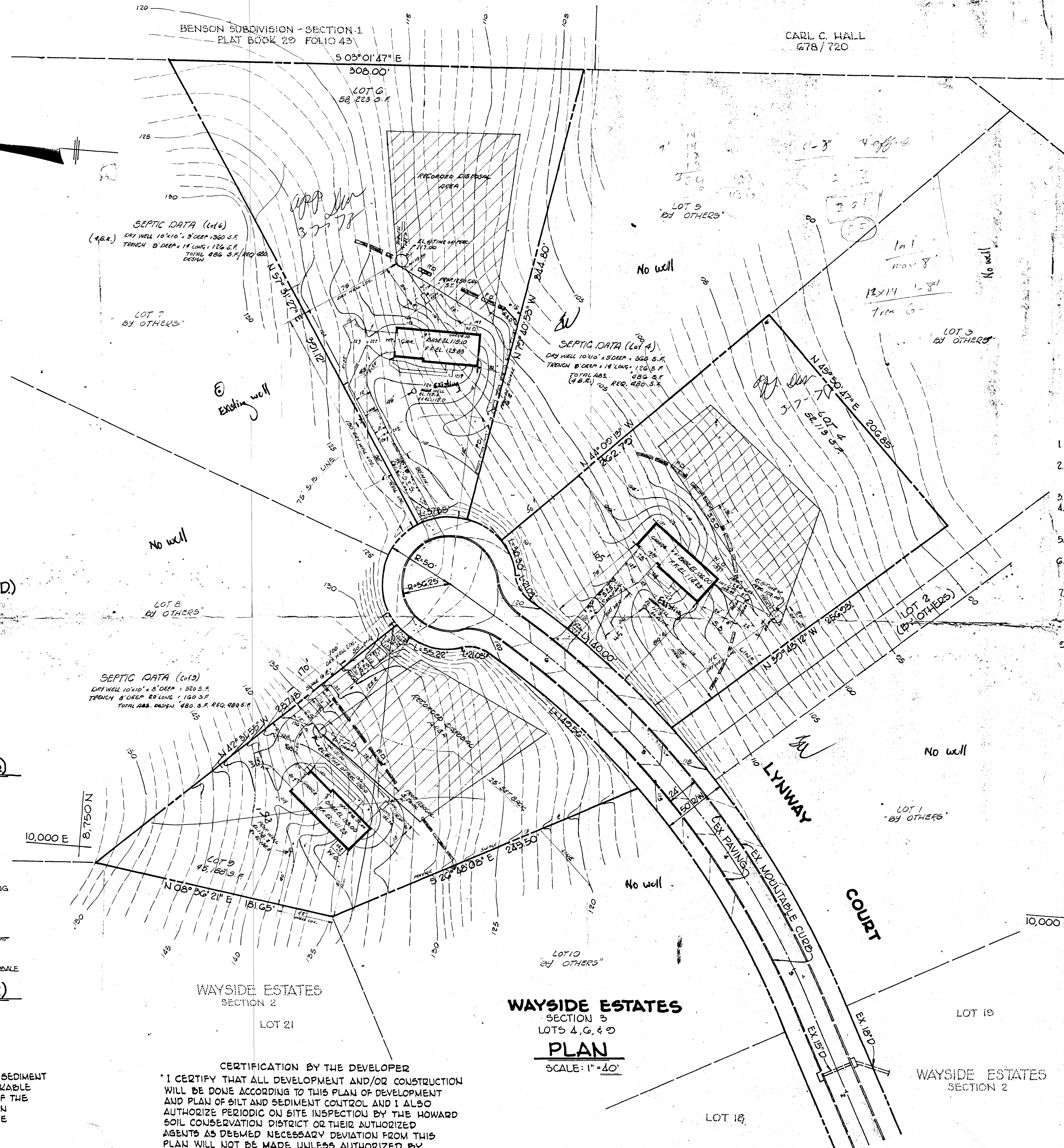
P TEST WELL CONVERTED TO PRODUCTION WELL

I HEREBY CERTIFY THAT I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CAPTIONED "PERMIT TO DRILL WELL", AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

DRILLERS NAME Howard Dillon

(PLEASE PRINT) Howard Dillon

SIGNATURE Howard Dillon



HOWARD COUNTY
MARYLAND
620/557

SITE ANALYSIS

	LOT 6	LOT 7	LOT 8
TOTAL AC OF LOT	1.19 AC.	1.34 AC.	1.04 AC.
DISTURBED AREA	0.32 AC.	0.38 AC.	0.32 AC.
UNDISTURBED AREA	0.87 AC.	0.96 AC.	0.72 AC.
STABILIZED AREA	7300 S.F.	7800 S.F.	7400 S.F.
ROOF AREA	2075 S.F.	2675 S.F.	2075 S.F.

REMARKS: SEDIMENT CONTROL MEASURES ARE ADEQUATE FOR ALL LOTS DUE TO MINIMAL RUN-OFF.

SEDIMENT CONTROL NOTES

1. THE H.S.C. & BUREAU OF LICENSE, INSPECTION AND PERMITS WILL BE GIVEN 24 HRS NOTICE PRIOR TO ANY GRADING.
2. ALL SEDIMENT CONTROL MEASURES SHOWN ON THE PLANS UNLESS OTHERWISE SPECIFIED WILL BE INSTALLED AND STABILIZED IN ACCORDANCE WITH NOTE #3 PRIOR TO ANY GRADING OR EARTH DISTURBANCE ON SITE.
3. ALL CUT AND FILL SLOPES TO BE MAX. OF 3:1.
4. FOLLOWING THE STABILIZATION OF ALL AREAS UPGRADE, THE AREA OF SEDIMENT CONTROL MEASURES MAY BE REMOVED AND GRADED TO FINAL GRADES PLANNED & STABILIZED IMMEDIATELY.
5. SEDIMENT CONTROL MEASURES WILL NOT BE REMOVED UNTIL APPROVAL IS OBTAINED FROM THE H.S.C.D.
6. IN THE EVENT OF EXCESS MATERIAL, EXCESS WILL BE STOCKPILED WITH A MAX. SLOPE OF 3:1 ON AN AREA WHICH HAS BEEN CLEARED ON SITE, STOCKPILED MATERIAL SHALL BE STABILIZED IN ACCORDANCE WITH NOTE #8.
7. STONE CONSTRUCTION ENTRANCE WILL BE INSTALLED AT EACH DRIVEWAY LOCATION PRIOR TO INDIVIDUAL DWELLING CONSTRUCTION. EACH WILL CONSIST OF N#2 STONE WITH A HEIGHT OF 8" AND A MINIMUM LENGTH OF 50' (SEE DETAIL).
8. PERMANENT STABILIZATION: APPLY 2000 LBS/AC. OF 50-50% PULVERIZED LIMESTONE, 500 LBS/AC. OR 125 LBS/1000 S.F. OF 5-5-5 FERTILIZER.
9. SEED 20 LBS/AC. OF RED FESQUUE, 50 LBS/AC. OF KY BLUE GRASS, 25 LBS/AC. OF ANNUAL RYE GRASS.
10. SEEDING NOTE: SEEDING MAY BE DONE BETWEEN MARCH 1, - MAY 1, OR AUG. 1, - OCT 1 ONLY.
11. MULCH: 2 TONS/AC. OF UNWEATHERED WHEATSTRAW, TIEDOWN MULCH WITH 480 GALS/AC. OF LIQUID ASPHALT.

CONSTRUCTION SCHEDULE

1. INSTALL STRAW BALE DIKE & ENTRANCE PAD MAR 15 - APRIL 1
2. ROUGH GRADE MAR 15 - APRIL 1
3. HOUSE CONST. UTILITIES MAR 15 - APRIL 1
4. FINAL GRADING & STABILIZATION JUNE 1 - JUNE 15
5. REMOVE SEDIMENT CONTROL DEVICES JUNE 15 - JULY 30

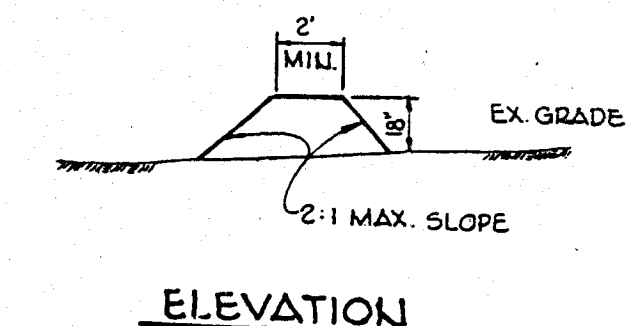
ON-SITE SEDIMENT CONTROL PLAN

FOR
WAYSIDE ESTATES
SECTION 3, LOTS 4, 6 & 7
333 ELECTION DISTRICT HOWARD COUNTY, MARYLAND
SCALE: AS SHOWN DATE: 2.6.78

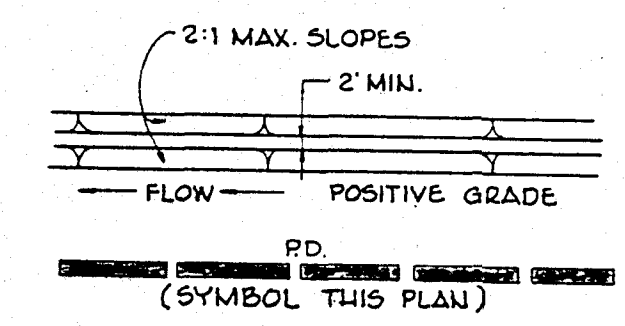
GRAYSON HOMES

BUILDER - OWNER
FLOYD GRAYSON JR. PHONE 207-5712 RES.
2000 CENTURE PLAZA BLDG. 207-1230 OFF.
COLUMBIA, MARYLAND 21044

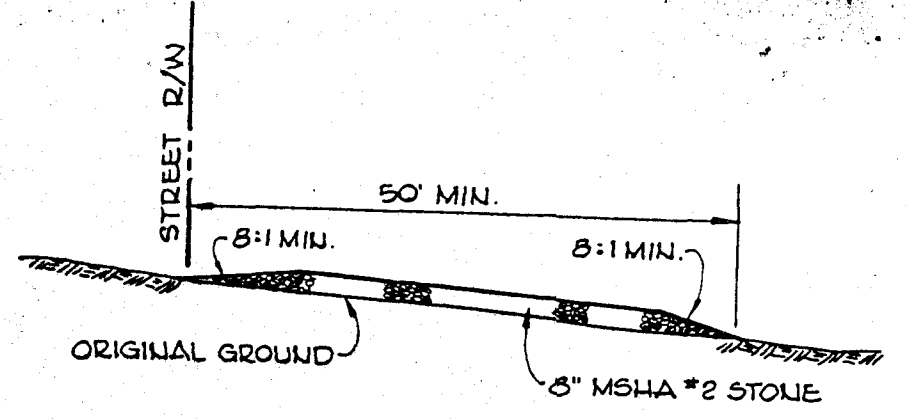
PREPARED BY
RON WAGNER - LAND DEVELOPMENT CONSULTANT
8784 LOCH BEND DRIVE
BALTIMORE, MARYLAND 21284



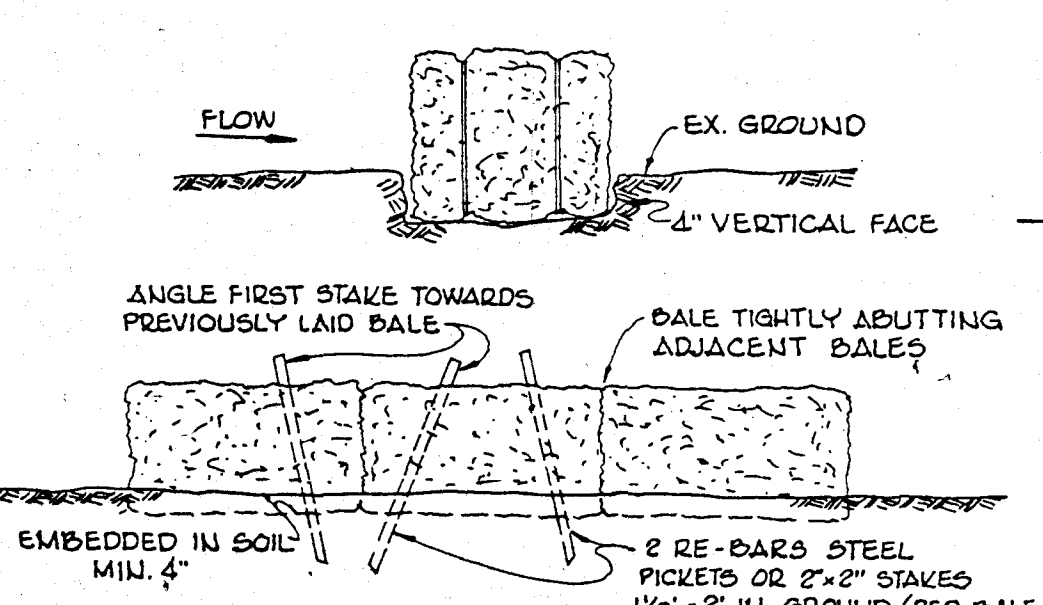
ELEVATION



PERIMETER DIKE DETAIL (P.D.)
NO SCALE



STONE ENTRANCE PAD (SEP)
NO SCALE



STRAW BALE DIKE (S.B.D.)
NO SCALE

CERTIFICATION BY THE ENGINEER
"I CERTIFY THAT THIS PLAN FOR EROSION AND SEDIMENT CONTROL REPRESENTS A PRACTICAL AND WORKABLE PLAN BASED ON MY PERSONAL KNOWLEDGE OF THE SITE CONDITIONS AND THAT IT WAS PREPARED IN ACCORDANCE WITH THE REQUIREMENTS OF THE HOWARD SOIL CONSERVATION DISTRICT."

SIGNATURE _____ DATE _____

CERTIFICATION BY THE DEVELOPER
"I CERTIFY THAT ALL DEVELOPMENT AND/OR CONSTRUCTION WILL BE DONE ACCORDING TO THIS PLAN OF DEVELOPMENT AND PLAN OF SILT AND SEDIMENT CONTROL AND I ALSO AUTHORIZE PERIODIC ON SITE INSPECTION BY THE HOWARD SOIL CONSERVATION DISTRICT OR THEIR AUTHORIZED AGENTS AS DEEMED NECESSARY DEVIATION FROM THIS PLAN WILL NOT BE MADE UNLESS AUTHORIZED BY THE HOWARD SOIL CONSERVATION DISTRICT."

SIGNATURE OF DEVELOPER _____ DATE _____

WAYSIDE ESTATES
SECTION 3
LOTS 4, 6, & 7
PLAN
SCALE: 1"=40'

THIS DEVELOPMENT PLAN IS APPROVED FOR SOIL EROSION AND SEDIMENT CONTROL BY THE HOWARD CONSERVATION DISTRICT

APPROVED: _____ DATE _____
HOWARD S.C.D.

REVIEWED FOR HOWARD SOIL CONSERVATION DISTRICT AND MEETS TECHNICAL REQUIREMENTS

SIGNATURE: _____ DATE _____
U.S. SOIL CONSERVATION SERVICE

RECEIVED

~~3/01/78~~
~~FEB 30 9 06 AM '78~~

HOWARD COUNTY
HEALTH DEPT.
ELLICOTT CITY, MD.

*Arent
30 days is February
ever!*