

3/18/82
NOON P.M.

PERMIT

Approved: 3/5/82
S.G. Kul

P 31817

SEWAGE DISPOSAL SYSTEM

A REPAIR

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 8rd

03-291545
INDEX!

DATE 3/4/82

Fogle Septic Cleaning IS PERMITTED TO INSTALL ALTER

ADDRESS 1115 Streaker Rd., Sykesville, Md. 21784 PHONE 795-5670

SUBDIVISION Benson ROAD 3517 Lakeway Drive LOT 5, Blk.a, SEc.1

PROPERTY OWNER Bion Mitchell

ADDRESS Same as above

SPECIFICATIONS

SEPTIC TANK CAPACITY _____ GALLONS

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

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

SEEPAGE PITS _____ ABSORBENT SIDE-WALL AREA _____ SQ. FT.

INLET PIPE _____ FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH _____ FT. BELOW ORIGINAL GRADE

EFFECTIVE DEPTH AT _____ FT. BELOW ORIGINAL GRADE.

LOCATE DISPOSAL AREA _____ FT. FROM _____ LOT LINE AND _____ FT. FROM _____ LOT LINE AS SEEN WHEN FACING LOT FROM

Remove old septic system to a new location or replace with a new septic system.

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

PLANS APPROVED BY Palmer F. Wine DATE March 4, 1982

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.

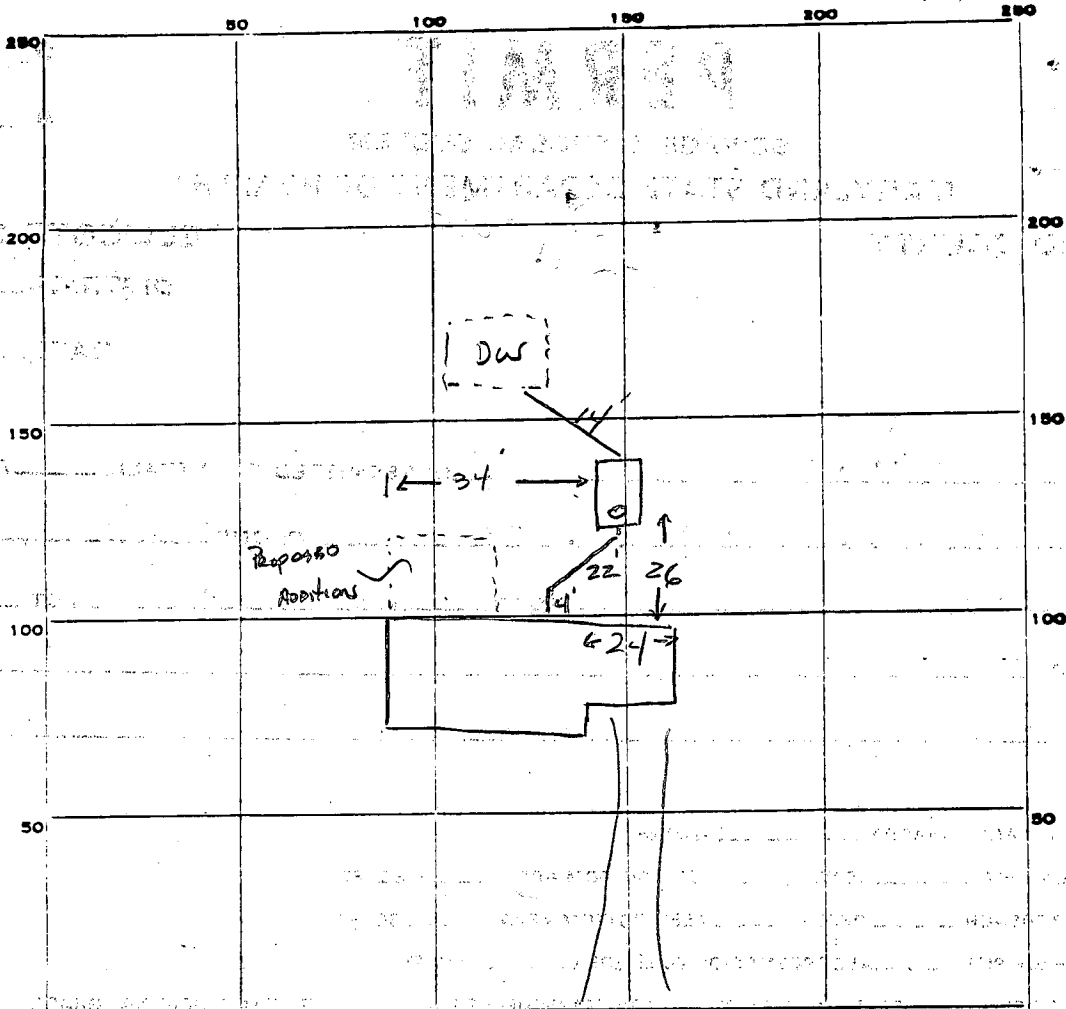
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA ACCEPTED.

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

BUDG. PERMIT SIGNED
AND RETURNED 3/27/82
Serial # B0104596
1 story addition

31817

BUDG. PERMIT SIGNED
AND RETURNED 3/8/82
Serial # 19955
addition 2 car garage
1 Br - sitting room & hall



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

LAKESWAY

PERMIT CARD

SEPTIC TANK, LEVEL CLEANOUTS _____

DISTRIBUTION BOX, LEVEL _____

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

GRAVEL DEPTH _____ IN. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA _____

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

ABSORBENT AREA _____ SQ. FT.

REMARKS OK To cover all work

DATE SYSTEM APPROVED 3/5/82 INSPECTOR A. J. Hill

PERMIT

P 27144

A 20549

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 3rd

INDEXED

DATE 11/2/77

11/5/77 P. please
Jim Brittingham

IS PERMITTED TO INSTALL ALTER

ADDRESS Ellicott City, Md.

PHONE

A SEWAGE DISPOSAL SYSTEM LOCATED AT

SUBDIVISION Benson

ROAD ³⁵⁷⁷ Lakeway Drive E.C. rd. LOT 5, Blk.A, Sec.1

PROPERTY OWNER Bion Mitchell

ADDRESS 20 Mallow Hill Road; Baltimore, Md.

SPECIFICATIONS 4 bedrooms

DRAIN FIELD DEPTH FEET, BOTTOM AREA SQ. FT.

SEEPAGE PITS ABSORBENT SIDE-WALL AREA SQ. FT.

SEPTIC TANK CAPACITY 1250 GALLONS

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 22% & TANK CAPACITY 50%.

OTHER DRY WELL-125 sq. ft. absorbent sidewall area per bedroom to begin 5 1/2 ft. below original grade. Invert to dry well to be no deeper than 4 ft. below original grade. Maximum depth for dry well is 12 ft. below original grade. Place the dry well 160 ft. from the rear lot line and 65 ft. from the right side as seen when facing the lot from the front.

NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON. PERMIT VOID AFTER 3 YEARS.
NOTE: INSTALL STAND PIPES ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA ACCEPTED.

PLANS APPROVED BY Donald W. Monaghan

DATE 8/19/74

FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

NEITHER THE HOWARD COUNTY COMMISSIONERS NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

BLDG. PERMIT SIGNED AND RETURNED 9/11/82

Serial # 48757
Room Addition
Spuplacee

A 20549

12
 5.5

 47
 49
 6.5

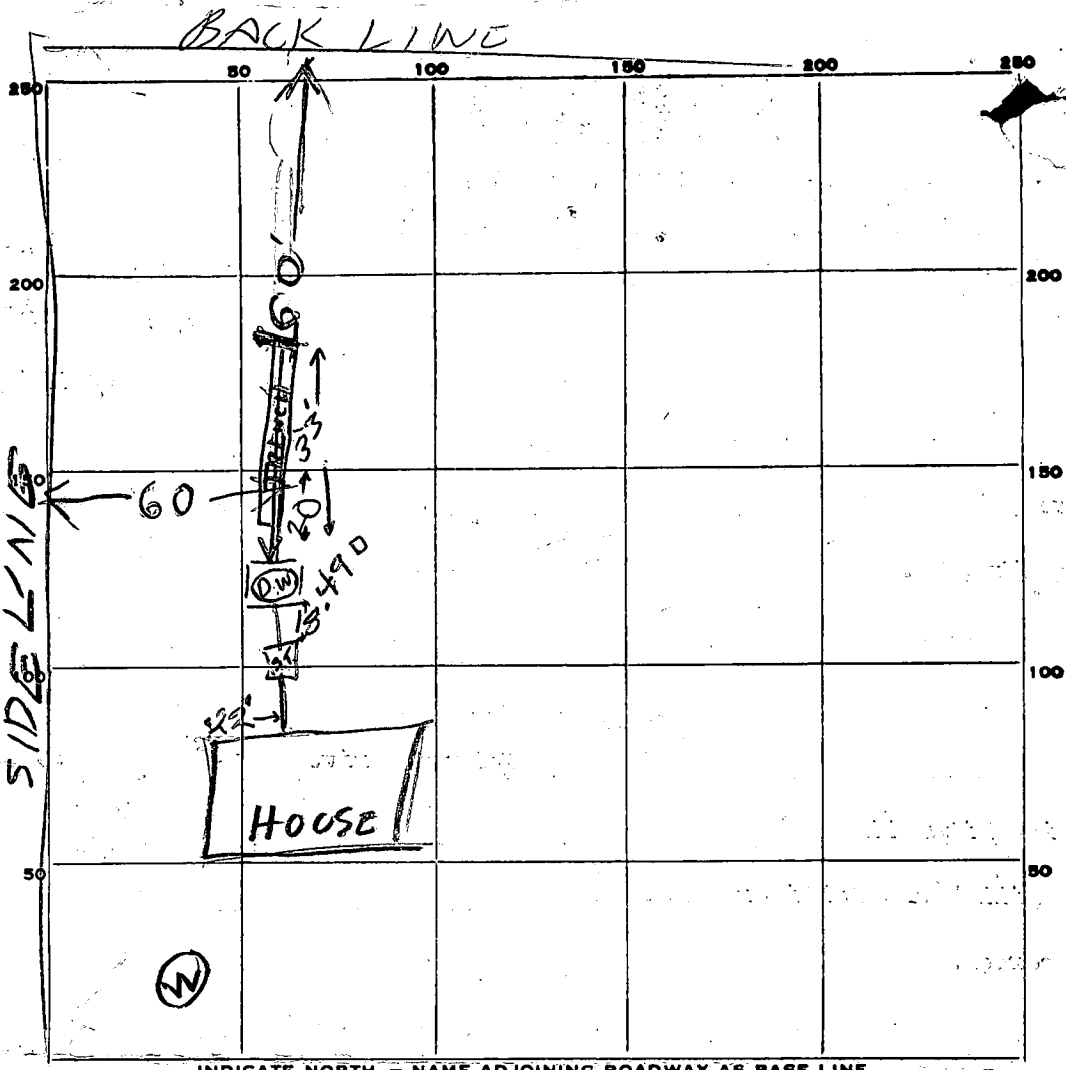
 245
 130
 7
 493
 8

 392
 160

 552

 20
 8

 160



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD
 SEPTIC TANK, LEVEL CLEANOUTS ST / DW
 DISTRIBUTION BOX, LEVEL NA
 TILE FIELD, DEPTH 12 FT. TRENCH WIDTH 2 FT.
 GRAVEL DEPTH 8 IN. TOTAL LENGTH 20 FT. *13ft added trench*
 NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA 180 + 84
 SEEPAGE PITS, INSIDE DIAMETER 49 FT. DEPTH BELOW INLET 6.5 FT.
 ABSORBENT AREA 348 SQ. FT. 532 total

REMARKS 11/10/77 Patch Day 13 ft deep 20 ft long
Finish D.W., Tank, Sewer Lines & Call for inspection P.H.

DATE SYSTEM APPROVED 17 Nov 77 INSPECTOR R. Briggs

2-12' holes
50ft. apart

for test

APPLICATION

A 20549

SEWAGE DISPOSAL TESTING

P _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

8/20/74
9:30

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

DISTRICT 3

P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DATE 8/19/74

Septic Tank - 3 beds - 1000 gal
 4 beds - 1250 gal

inlet at map.

Dry Well - 125 sq ft absorbent sidewall area per
bedroom to begin 5ft below orig. grade. Inverts to DW max
depth 4' below orig grade. Max depth for DW is 12' below orig
grade.

Place Dry Well 160ft from rear lot line and 65'
from right side as seen when facing from the
front.

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 Charles A. Shaffer Brian Mitchell
ADDRESS 20 Mallory Hill Rd., Baltimore
426 Main Street, Reisterstown, Maryland 21136 PHONE _____

PROPERTY LOCATION:
SUBDIVISION Benson LOT NO. 5, Blk. A, Sec. 1

ROAD AND DESCRIPTION Lakeway Drive BLDG. PERMIT SIGNED
AND RETURNED 5/27/77
Serial No. 31870

SIZE OF LOT 127' x 317' x 127' x 316 TYPE BLDG. 3 or 4
IF NOT SINGLE RESIDENCE DESCRIBE _____ NUMBER OF BEDROOMS
(Single Fmly. Dwllg.)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.
Howard County Health Dept.
P. O. Box 476
Ellicott City, Maryland 21043

SIGNATURE OF APPLICANT /s/ Charles A. Shaffer

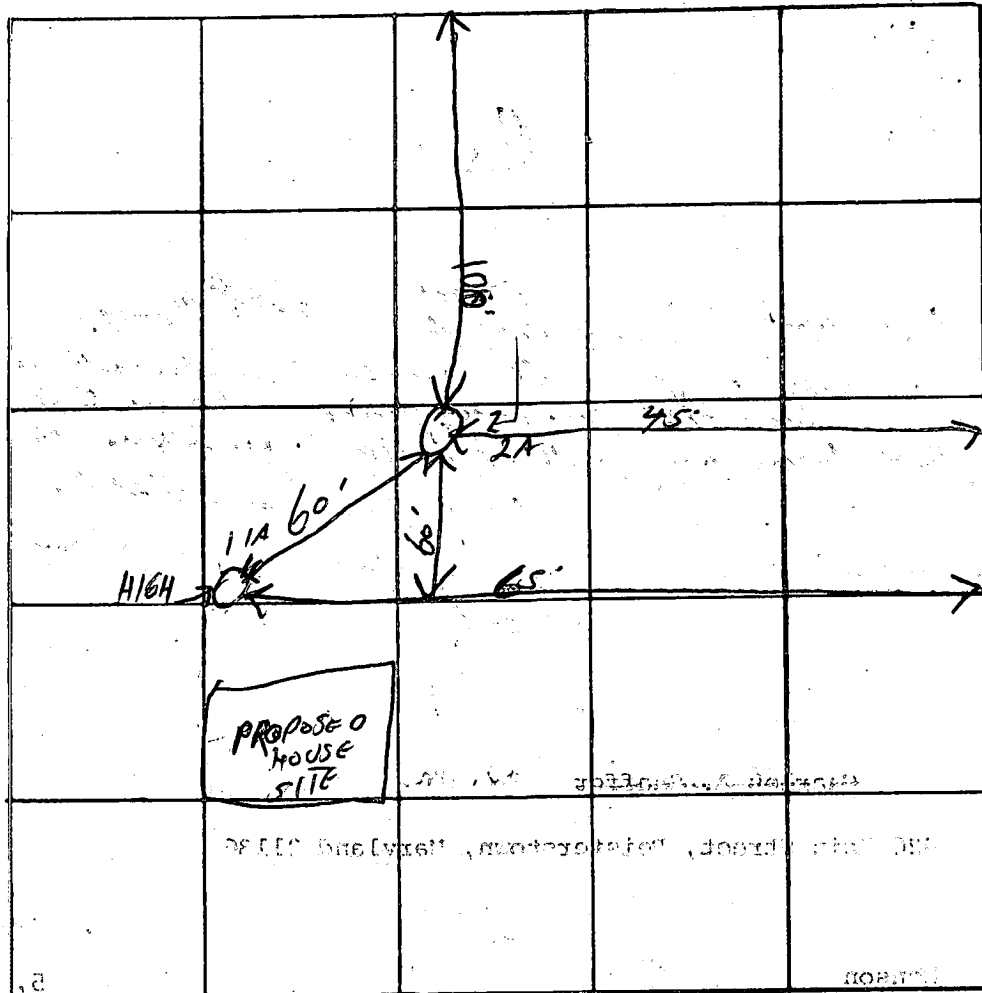
APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

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

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

Lakeview

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8-20-74	1 HIGH	6'	944	946	946	958	12
↑	1A	12'	944	946	946	949	3
	2	4'	935	939	939	943	4
8-20-74	2A	12'	936	940	940	948	6

REMARKS Loam

TYPE OF SOIL Good soil

TESTED BY H. J. Zlar ALSO PRESENT: Fyork

APPLICATION

A 14101

SEWAGE DISPOSAL TESTING

P _____

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY *Septic tank 3 bedrooms 1000 gals* ELLICOTT CITY

DISTRICT 3

DATE 11/15/68

Dry well to be 130 sq ft of absorption. A circular area follow the violet pipe per bedroom - closet pipes to be 3 1/2 ft below original grade. Map is depth of dry w. To be 10 ft below original grade for a total well 108 ft from rear lot line and 12 ft from right side line as lot is also standing on main road facing lot.

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TESTS IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Carl C. Hall

ADDRESS Chatham Road, Ellicott City, Md. PHONE HO 5-1635

PROPERTY LOCATION:

SUBDIVISION Benson LOT NO. 5, Blk. A, Sec. 1

ROAD AND DESCRIPTION Unnamed road

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 127' x 317' x ¹²⁷212' x 316' TYPE BLDG. 3 or 4
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

SIGNATURE OF APPLICANT /s/ Carl C. Hall

APPROVED BY James T. Wright FOR Dry well DATE 1/15/71
(KIND OF SYSTEM)

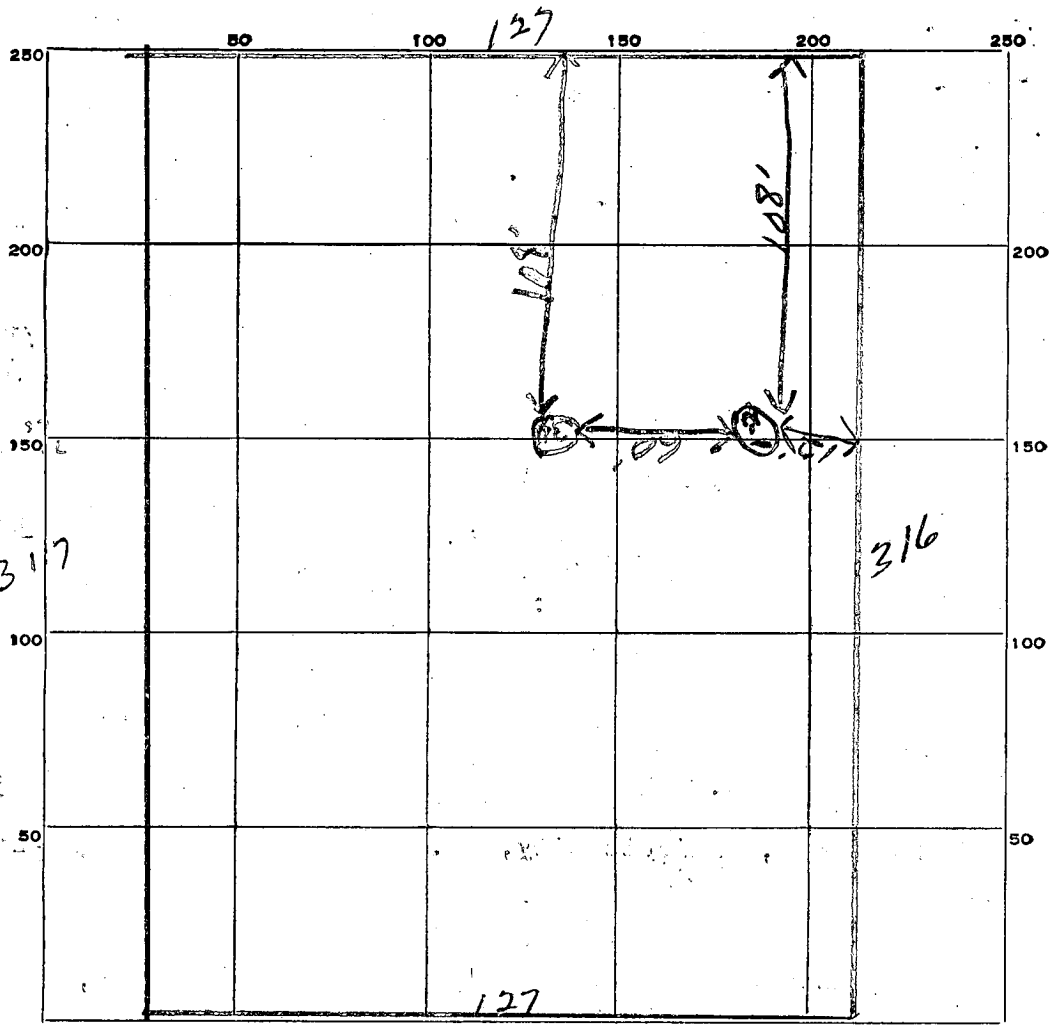
REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

36
108




14-5

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/8/69	1	10'	1200	1203	1209	1220	11 min
	2	5'	1152	1156	1156	1205	9 min
	3	10'	1220	1222	1222	1227	5 min
	4	4'	1215	1225	1225	1248	21 min

avg.
13 min.

SOIL AUGER FINDING _____

TESTED BY  _____

REMARKS use hole 192

LOT 5A LAKEWAY DRIVE
Bion Mitchell

#3187.0

646-2477

470

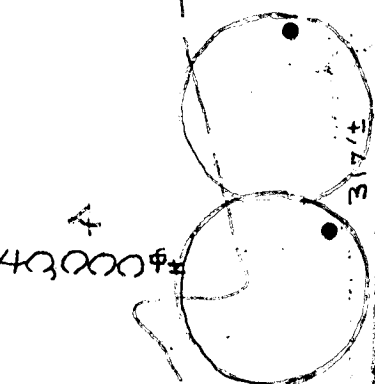
455

460

Easement

160' → 65' → Test 94'

- Elevation at ground Test 94'
- EXIST. Elevation 94'
- INW. Elevation 90'
- 90.35'
- Existing elevation 94.6'
- INW. elevation 90.65'
- INW. elevation 91'
- Existing 95'



4
40,000 ±

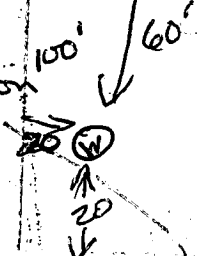


6
40,000 ±

7
40,000 ±



water well
Existing elevation



OK
5/9/27

Bituminous Mount

126 ±

127 ±

127 ±

128 ±

127 ±

127 ±

127 ±

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION

WRA PERMIT NUMBER

TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL

FILL IN THIS FORM COMPLETELY

B 1 6622

SEQUENCE NO. (WRA USE ONLY)

1 2 3 4 (SEQ. NO.) 5 6
(THIS NUMBER IS TO BE PUNCHED IN COLS. 5 & 6 ON ALL CARDS)

DATE RECEIVED (WRA USE ONLY)
4/20/77
1:30 P.M.

OWNER Mitchell, Bion D.
COL 15 LAST NAME FIRST NAME COL. 34
STREET OR RFD 20 Mallow Hill Road
COL 36 COL. 55
POST OFFICE Baltimore, Maryland 21229
COL 57 COL. 76

B 1 CONTINUED DRILLER INFORMATION
1 2 3 (SEQ. NO.) 6
DATE April 1, 1977 LICENSE NUMBER 256930
77 80
Dana Ryker, Jr. II
FIRST NAME DRILLER LAST NAME
SIGNATURE Dana Ryker, Jr. II

B 3 LOCATION OF WELL
1 2 3 (SEQ. NO.) 6
COUNTY Howard
8 (DO NOT ABBREVIATE COUNTY NAME) 21
SUBDIVISION "Beason"
23 42
SECTION A LOT 5
44 46 48 50
NEAREST TOWN Mayfield
52 71

B 2 WELL INFORMATION
1 2 3 (SEQ. NO.) 6
MAXIMUM PUMPING RATE (GALLONS PER MINUTE) 5
8 12
AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) 600
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 } MUST HAVE STATE HEALTH DEPT. APPROVAL
 TEST

B 4 DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)
1 2 3 (SEQ. NO.) 6
N NORTH E EAST N-E NORTHEAST S-E SOUTHEAST
S SOUTH W WEST N-W NORTHWEST S-W SOUTHWEST
NEAR WHAT ROAD Lake Way Drive
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) N 32 S 32 E 32 W 32
DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) 35
34 37 38 39

APPROXIMATE DEPTH OF WELL 275' FEET
24 28
APPROXIMATE DIAMETER OF WELL 6" (NEAREST INCH)
METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)
BORED (OR AUGERED) JETTED DRIVEN
30-37 AIR-ROTARY AIR-PERCUSSION ROTARY (HYDRAULIC ROTARY)
CABLE REVERSE-ROTARY DRIVE-POINT
OTHER (DESCRIBE)

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
49 feet of casing
48" of Open Hole
18 sacks of cement
TRIP 20 Apr 77 R d.

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)

Sketch area with handwritten notes: Lake Way Drive, X well

NOT TO BE FILLED IN BY DRILLER (WRA USE ONLY)
APPROPRIATION PERMIT NUMBER 54 ENGINEER REVIEW DISTRICT NO. 63
FORCE WRITE INITIALS IN BOX CONDITIONS A E N S G W Q C L U
67 68 70 71 72 73 74 75 76 77 78 79

BOX NUMBER E 310 N 520
NORTH COORDINATE 50 51 52 53 54 55
EAST COORDINATE 57 58 59 60 61 62 63
ELEVATION AT WELL HEAD (FEET) 65 66 67 68

B 4 CONTINUED HEALTH DEPARTMENT APPROVAL
1 2 3 (SEQ. NO.) 6
41 S STATE HEALTH COUNTY NAME Howard COUNTY NO. W25535
MO. DAY YR. 04 04 77
DATE 43 48
APPROVED BY Donald N. Monaghan, Sanitarian

57 58 59 60 61 62 63
ELEVATION AT WELL HEAD (FEET) 65 66 67 68
0/0 5/0

B 5 SPECIAL CONDITIONS 8-63 (WRA USE ONLY)
1 2 3 (SEQ. NO.) 6

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 W25535

4167 SEQUENCE NO. (WRA USE ONLY) DATE RECEIVED (WRA USE ONLY) April 20, 1977 DATE WELL COMPLETED 04 20 77

DEPTH OF WELL 275 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" H073-19911 DRILLERS IDENTIFICATION NO. 30

OWNER Mitchell, Bion D. STREET OR RFD 20 Mallow Hill Road POST OFFICE Baltimore, Md. 21229

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), CHECK IF WATER BEARING. Rows include Brown Mica, Red Mica, Blue Mica, etc.

GROUTING RECORD: WELL HAS BEEN GROUTED (YES), TYPE OF GROUTING MATERIALS (CEMENT, BENTONITE CLAY), NO. OF BAGS, NO. OF POUNDS, GALLONS OF WATER, DEPTH OF GROUT SEAL.

CASING RECORD: CASING TYPES (STEEL, CONCRETE, PLASTIC, OTHER), MAIN CASING TYPE, NOMINAL DIAMETER, TOTAL DEPTH.

OTHER CASING (IF USED): DIAMETER, DEPTH.

SCREEN RECORD: SCREEN TYPE OR OPEN HOLE, INSERT APPROPRIATE CODE BELOW.

SCREEN DEPTH: EACH SCREEN DEPTH (NEAREST WHOLE FOOT) FROM 0 to 21.

DIAMETER OF SCREEN (NEAREST INCH) FROM 56 TO 60.

GRAVEL PACK: IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX.

WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER): TELESCOPE CASING, LOG INDICATOR, OTHER DATA AVAILABLE.

PUMPING TEST: HOURS PUMPED, PUMPING RATE, METHOD USED TO MEASURE PUMPING RATE (Flowmeter), WATER LEVEL, TYPE OF PUMPED USED.

PUMP INSTALLED: TYPE OF PUMP, DRILLER WILL INSTALL PUMP, CAPACITY, PUMP HORSE POWER, PUMP COLUMN LENGTH.

CASING HEIGHT: ABOVE/BELAND SURFACE, (NEAREST FOOT).

LOCATION OF WELL ON LOT: SHOW PERMANENT STRUCTURE SUCH AS BUILDINGS, SEPTIC TANKS, AND/OR OTHER LAND MARKS.

CIRCLE APPROPRIATE BOXES: A WELL WAS ABANDONED AND SEALED, ELECTRIC LOG OBTAINED, 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"...

DRILLERS NAME: Dana Kyker (PLEASE PRINT) SIGNATURE: Dana Kyker

Handwritten notes: "The Philadelphia Rd. Lake Way Dr. YWPH"

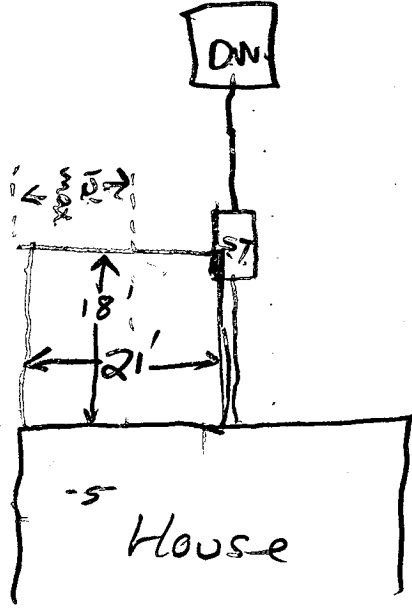
HANCOR

pacesetter in plastic drainage products

HANCOR DISTRIBUTION CENTER
6748 Dorsey Road
Baltimore, Maryland 21227
Phone: (301) 799-7460

8' x 9' 1/2" *min*

Left
Side



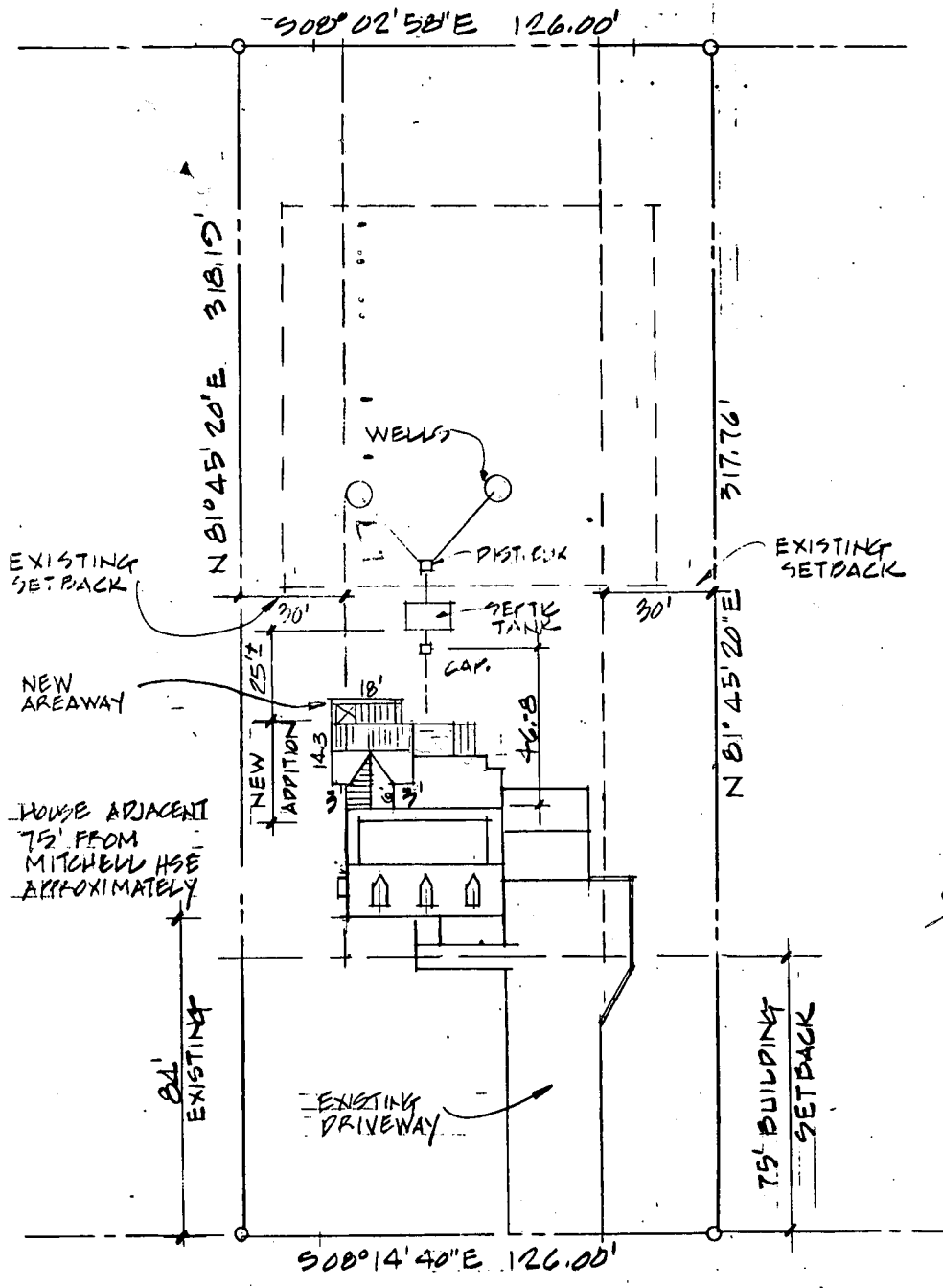
Right

B.P. Serial # 48757

Bron Mitchell

W. 989-9462

W. 744-6100

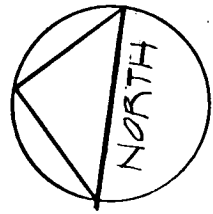


18'x21' addition proposed on left rear of house

See other red

HOUSE ADJACENT 75' FROM MITCHELL HSE APPROXIMATELY

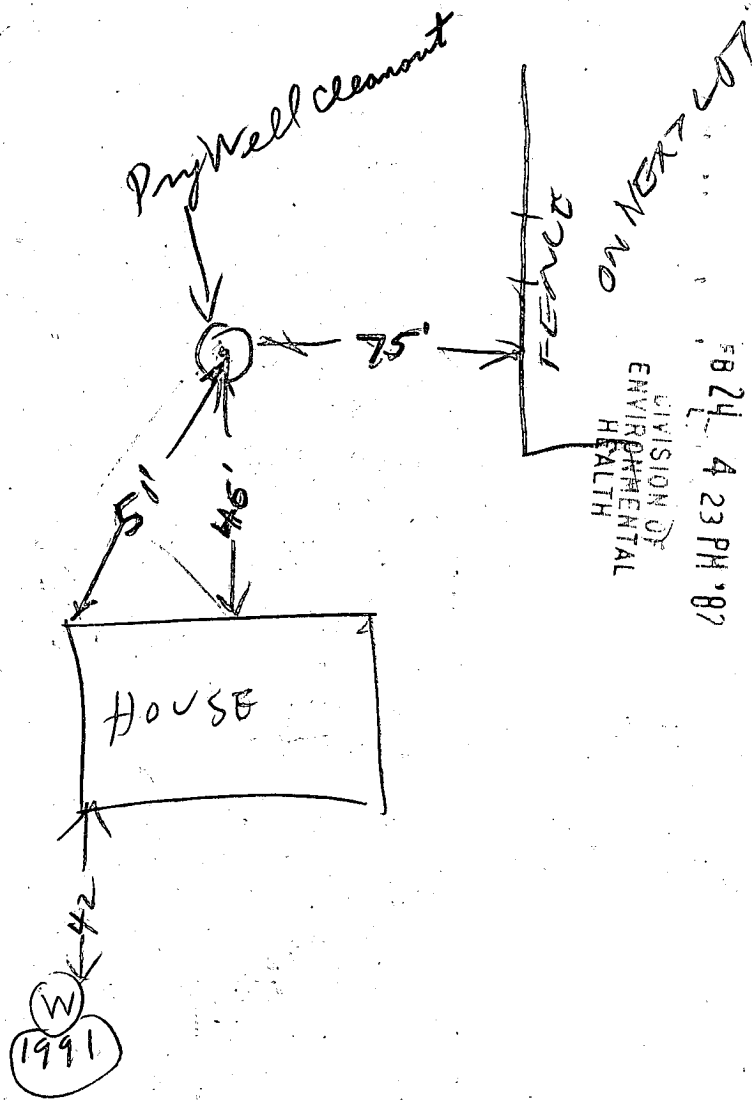
3517 LAKEWAY DRIVE



ALTERATIONS & ADDITION FORM
 MR & MRS BRON MITCHELL
 3517 LAKEWAY DRIVE
 ELLICOTT CITY MD. 21043

1/4/82
SCALE 1" = 50.00'
REV.

57



CIVISION OF ENVIRONMENTAL HEALTH

FEB 24 4 23 PM '87

RECEIVED HOWARD COUNTY HEALTH DEPT.

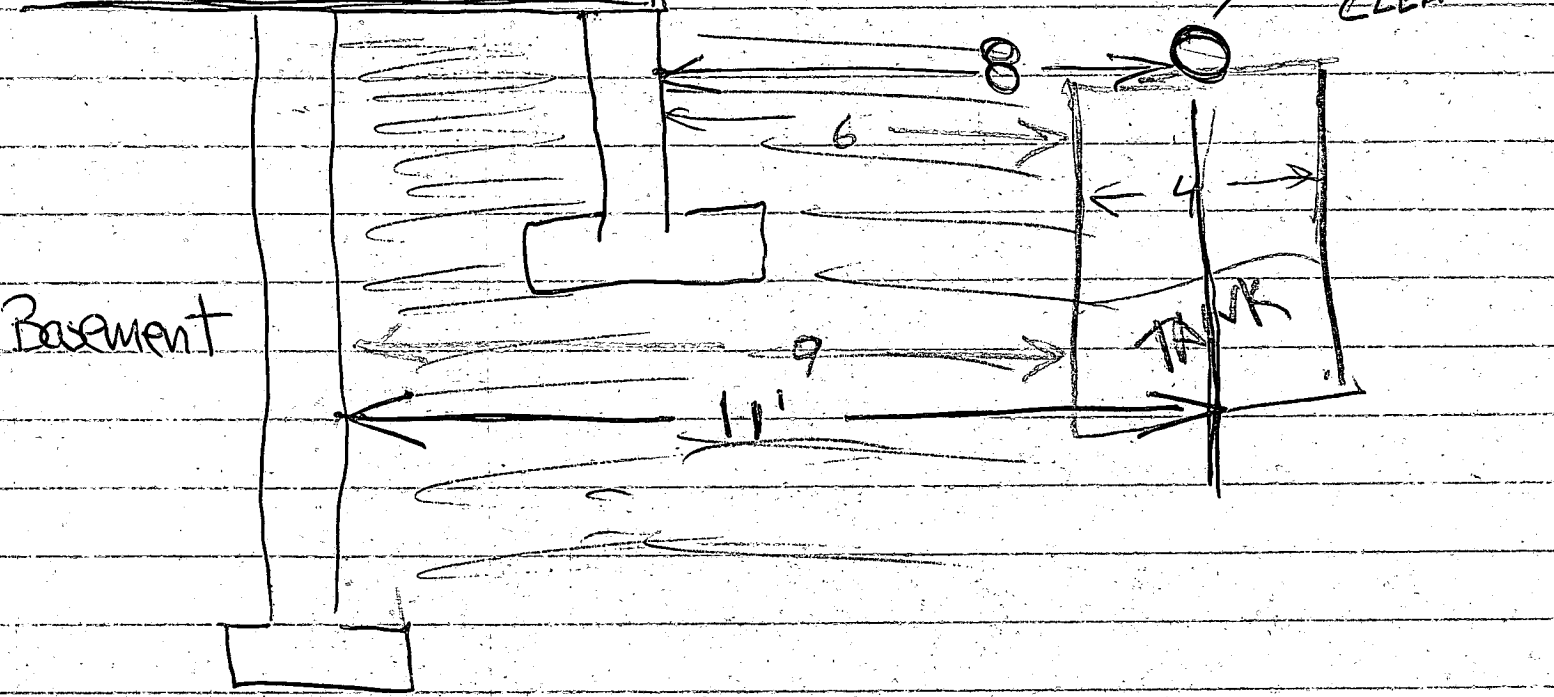
Lakeway Dr

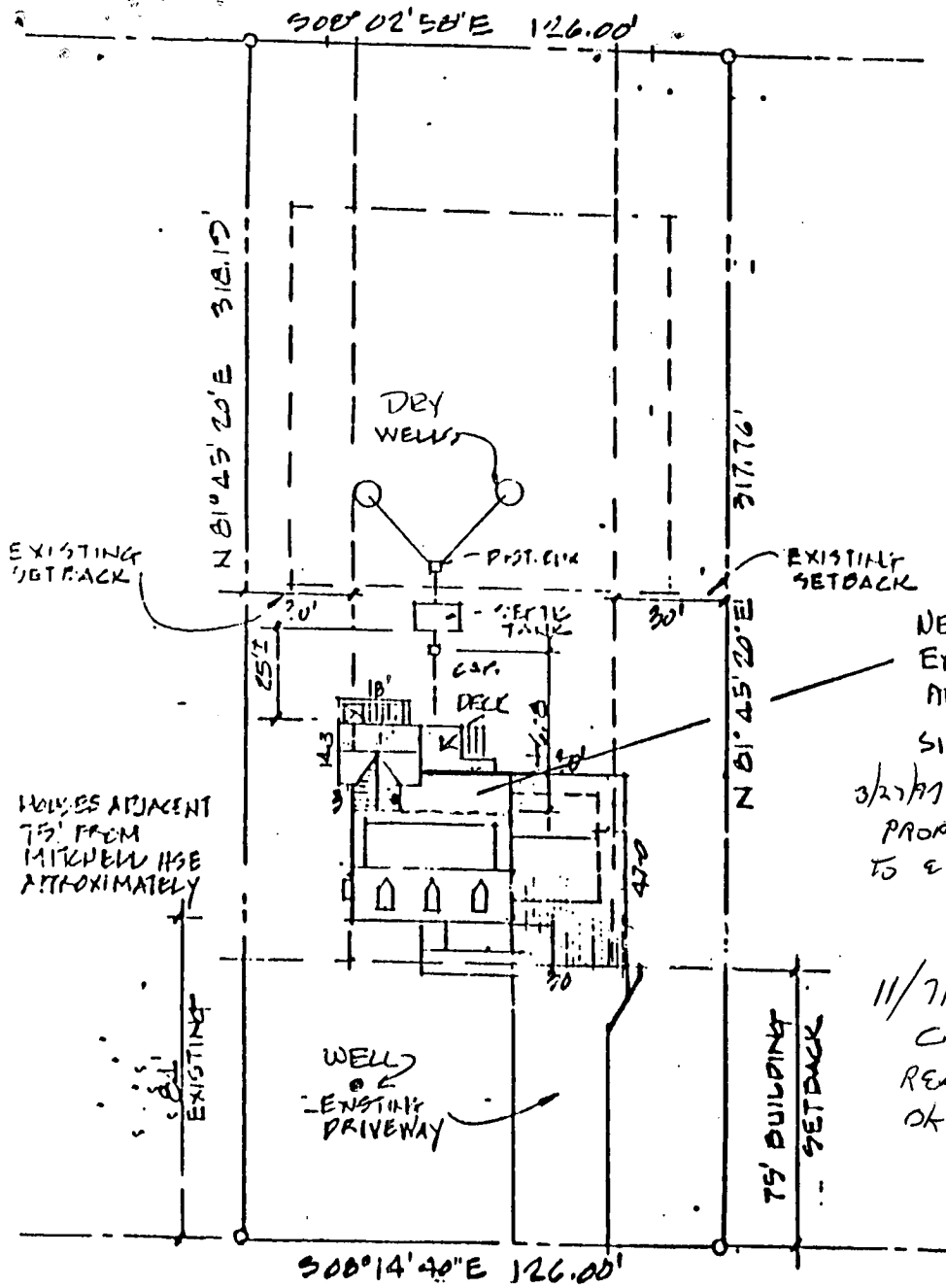
2/27/82

Dry Well found but not Tank
 Tank maybe located under future
 addition. No overflow. No one home
 will call Tomorrow R4

Permit 48757
Burr Mitchell
3517 Lakeway Ave

ADDITION



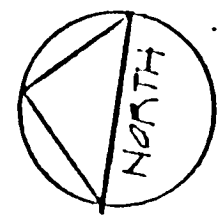


NEW ONE STORY ADDITION
 EXISTING DECK TO BE REMOVED
 AND REPLACED
 SIZE OF ADDITION
 3/27/97 10'0" X 25'0"
 PROPOSED ADDITION, NO IMPACT
 TO WELL & SEPTIC, OK TO PROCEED.

Shelby
 SAMITARIAN

11/7/97
 CANCELLED ON 11/3/97
 REACTIVATED 11/6/97
 OK TO PROCEED.
Shelby

LAKEWAY DRIVE



ALTERATIONS & ADDITION FORM
 MR & MRS BION MITCHELL
 3517 LAKEWAY DRIVE
 ELLICOTT CITY MD. 21042

3/24/97
SCALE 1" = 50'-0"
MBV

SI