CALVERT COUNTY HEALTH DEPARTMENT DIVISION OF ENVIRONMENTAL HEALTH

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www.calverthealth.org

STATE OF MARYLAND

NAME: Paige A. Saunders	REF:	AP "	18-563	432	TAX 10	# 02-0	89459
ADDRESS: 5010 Chavez LM. Chesquake Beach, MD	LOC.	ATION:	<u> </u>	اوسع	Wood	lot 3	31
Percolation test(s) performed at the above referenced site on process for sanitary construction permitting to proceed in accordance information shown on the tentative plot sketch, which was submitted	with C.	O.M.A.	R. 26.04.0.	2. Inis	statement	is based	ew upon the
Before issuance of a sanitary construction permit can be considered, fi surveyor or engineer must be submitted. All pertinent information ne tentative plot sketch on the permit application, or this letter.	S	A Charles			many comments and expendence	married the contract of the contract of	
The following information (below and on back) applies to this site and	d is requ	iired to	be shown	on the	site plans:		
SYSTEM SPECIFICATIONS FOR:							
ERESIDENTIAL DWELLING: With 3000-3999 Sq.	Ft. of I	enclosed	Living Sp	ace			8
-EI COMMERICAL/INSTITUTIONAL BUILDING: Type			#Of Unit	9			
Total Length 70 Ft. # of Trenches 1 I Width 2 Ft. Depth 8 Ft. Pipe in trench 1 Trenches separated by 10 Ft. from edge to edge, De BAT system capable of treating gallons/day. Septic Tank Size 1500 gallons. OTHER: Field Weak all furce per firsts. From	no deep pth of g	er than ravel in	3 trench	5		fee.	
Show primary around feet (2B) or (2c)						Andreas and a state of the stat	
		Carle Opin Property Services		- Aller Anna		-	

CALVERT COUNTY HEA	LTH DEPARTMENT
Application for Sanitary C	Construction Permit 338 8
	Tax Account No. 0Z - 089459
BUILDING New Public Sewer Replace Septic System Remodel Existing Proposed Septic System Proposed Septic System	WATER SUPPLY Públic Water Proposed Drilled Well Existing Drilled Well Existing Well - (dug, bored or driven)
CONTRACT PURCHASER	
Applicant: Complete all applicable spaces: ALL COPIES MUST BE L	EGIBLE
1. OWNER WILLOWS DEU. COMPANY ADDRES	\$ 6555 BROOKS PLACE
CITY LAUS CHURCH STATE VA	ZIP CODE 27044 PHONE HOME 703-256-101
STREET ADDRESS of PROPERTY: 500 CHAN	EZ LANE WORK 703-737-547
2. DIRECTIONS TO PROPERTY RIE Z'SA NOR	TH, ET PLUM PT ED, LT BAYSIDE
ED, ET WILLOWS RD, LT OLD	WILLOWS PD, LT CHALLES LANE
LOT ON LEFT	
3. SUBDIVISION KLILLOWS WOOD LOTNO. 31	BLOCK SECTION
OR ACREAGE 1. 17 Act TAX MAP NO	6 PARCEL NO. 240
4. BUILDING SPECIFICATIONS	
Residential 30 × 50 Commercial	Other
Number of Bedrooms	
Basement	
NOTE: If yes, top of septic tank is to be no deeper than three feet. 5. Closest distance between any part of sewage disposal system and an	
FOR NEW CONSTRUCTION THE FOLLOWING MUST BE CARRIED OUT. Non-compliance of 1. Attach 2 copies of plot plan showing the true size and shape of the property and the proposed percolation test(s), proposed drainfield area, proposed well along with location of any wells or die 2. The corners of any property less than 1 acre and proposed house must be staked and identified p 3. After conducting the satisfactory percolation test, by a representative of this office 5 copies of the plan must be prepared by a registered surveyor. NOTE: Only after the review of the final site plan will approval of a sanitary construction permit be construction.	inaccurate information will result in a denial of percolation test and/or final approval. house location to scale 1 inch=10, 20, 30 feet etc. Plot Plan shall include location of posal systems within 100 ft. of the property lines. ior to testing. e site plan fulfilling the requirements of COMAR 26.04.02 must be submitted. This site
The applicant hereby certifies and agrees as follows: (1) that he is authorized to make this application; (2) that the information is correct; (3) that he will comply with all regulations of Calvert County which are applicable hereto; (4) that he will perform no work on the above property not specifically described in this application; (5) that he grants County officials the right to enter onto the property for the purpose of inspecting the work permitted and posting notices; (6) it will be the responsibility of the applicant to ensure that the water supply serving this dwelling has been tested and certificity by the Health Dept. SIGNED	SOIL PERCOLATION INFORMATION Date of Test Test Tinde Depth 26 - 12
DATE	Depth of Porous Soil ADDITIONAL COMMENTS:
C.O.A NC	36-12 12 n sang 1-4 prover rake
P.O. Box 2209	12 The payel 4-5 married
FE FRED MD 20678	5-15 fin ourel
DO NOT WRITE BELOW THIS LINE	
Septic Tank Size Jalons HEALTH DEPARTMENT MINIMUM	RECOMMENDATIONS
Tile Field: Total length ft. No. of Trenches Length	ft. Widthft. Depthft.