

6/9/99
alt

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

03-295125

P 51933

A 59009-A

DISTRICT _____

DATE 6/7/99

DATE SYSTEM APPROVED 6/9/99

INSPECTOR DCS

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
~~XXXXXXX~~ 410-313-2640

INDEXED

Andy & Sons IS PERMITTED TO INSTALL ALTER

ADDRESS 7000 Linden Avenue, Elkridge, MD 21075 PHONE 410-796-9876

SUBDIVISION Hampton Hills LOT 6 ROAD 11179 Douglas Avenue

PROPERTY OWNER Ralo

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

PUBLIC H₂O

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 180.160

TRENCHES - Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 7.5 feet below original grade. Effective area begins at 3 feet below original grade. 4.5 feet of stone below distribution pipe.

LOCATION - Place the distribution box 105 feet down the right lot line and 15 feet off this same lot line as seen from Douglas Avenue. Run trenches along contour towards the left lot line.

NOTES - Septic system to be installed prior to installation of final driveway. No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

** MAINTAIN A MINIMUM OF 10' FROM PUB. WATER CONN TO DIST. BDX.

PLANS APPROVED BY Donna K. Soe DATE 03-18-1999

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

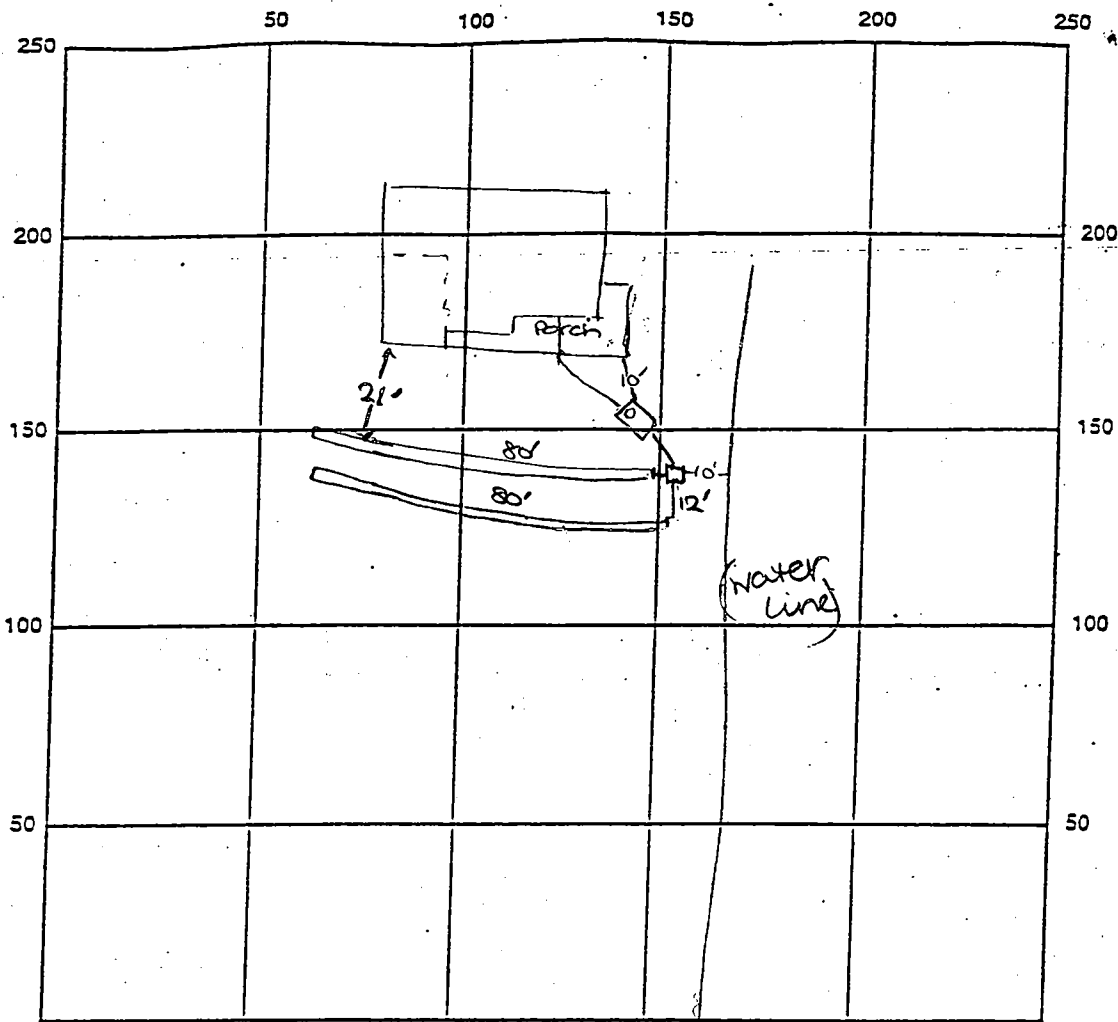
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON, CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

59009-A



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

Douglas Avenue

SEPTIC TANK LEVEL OK-1250 gal CLEANOUTS one on S.E.

DISTRIBUTION BOX LEVEL OK

DRAIN FIELD/TITLE DEPTH 7.5 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 4.5 FT. TOTAL LENGTH 2x80 FT. → 160

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 720 SQ. FT.

DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA — SQ. FT.

REMARKS: 6/9/99 FINAL INSP - OK TO COVER all septic work DIS

DATE SYSTEM APPROVED 6/9/99

INSPECTOR [Signature]

11-10-97
10:00am
TOD
Loyd

APPLICATION

PERCOLATION TESTING

A 59109A

P _____

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

10-16-97
Public H₂O available
not sewer.
Eval. ex. house for adequate
repair area. - ALM

DISTRICT _____

DATE 10/9/97

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 JAMES B. SAUNDERS RALO BUILDERS

ADDRESS 1103 DOUGLAS AVE. MARIOTTSVILLE, MD. 21104 PHONE _____

AGENT OF PROSPECTIVE BUYER RALO BUILDERS c/o CHRIS RACHUPA

ADDRESS 946 A MARIMICH CT. ELDERSBURG, MD. 21784 PHONE 410-781-3475

PROPERTY LOCATION:

SUBDIVISION "HAMPTON HILLS" LOT NO. 6

ROAD AND DESCRIPTION SOUTH SIDE OF DOUGLAS AVE. 500'± EAST OF

INTERSECTION OF MARIOTTSVILLE RD. & DOUGLAS AVE.

TAX MAP 16 PARCEL # 164

SIZE OF LOT 100' x 200' (20,000 ±) TYPE BLDG. SINGLE FAMILY - 4 BRN
(SINGLE FAMILY DWELLING OR COMMERCIAL)

AND RETURNED 3-18-99
Serial # 210116630
SINGLE FAMILY - 4 BRN

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.

(SIGNATURE OF APPLICANT)

APPROVED BY [Signature] FOR SEO DATE 11/12/97

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 4

A 590090
COUNTY #

SOIL PROFILE

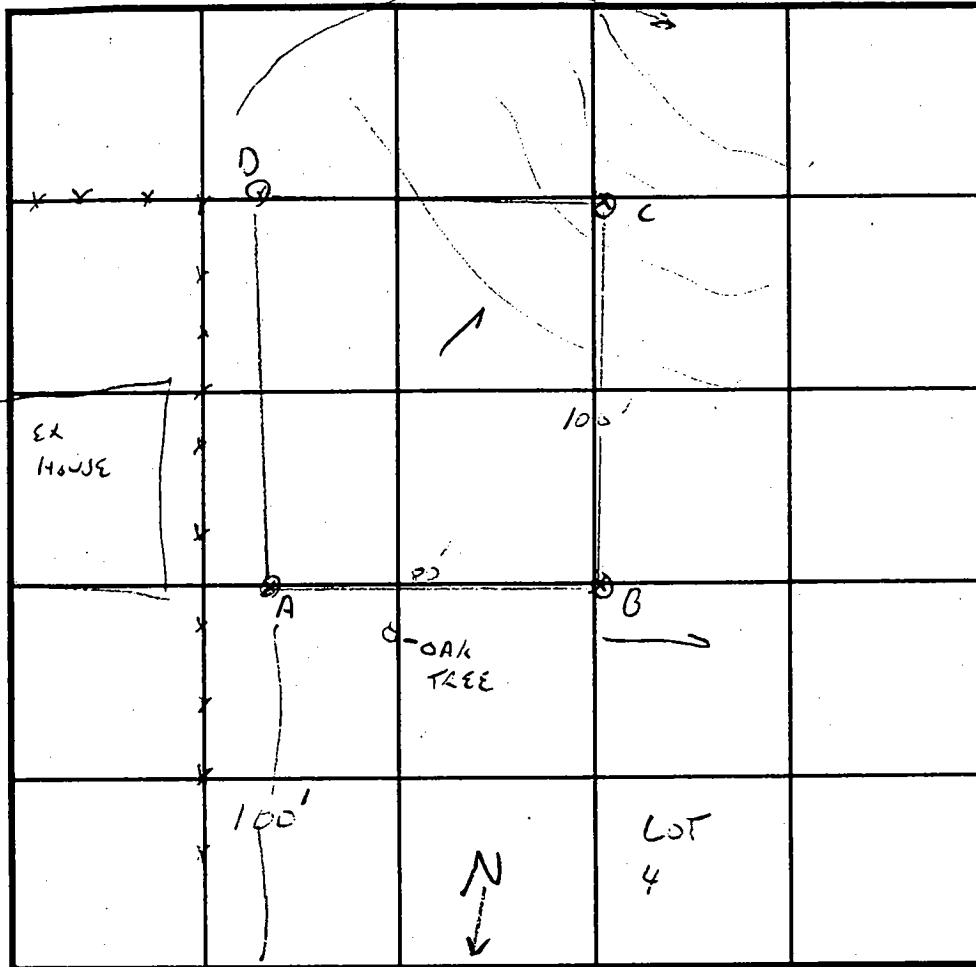
BR L
208
FLACCY
QUARTZ
7 8'
REDISH BR
SL

54R 5/8
LOAM
BR BK
2.54R 4/4
7.54R 5/6
SL
40% mica
20%
FR
SANDWICH

104R 5/6
THICK CLAY
MFI CL
REDISH
BRON
CL FRAGMAN
YELLOWISH
BRON
SANDY
LOAM
40%
MICA

SOIL PROFILE

54R 4/6
LOAM FR 58%
SL
40% MICA
5%
CLAYWASH



* PERC CORRECTION
FACTOR TO ACCOUNT FOR
6" TEST TUBE, AVG.
TIME x 1.5 =
CORRECT TIME AVG

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
11/10/97	A	3.5/10V	10:13			10:14	1.5 MIN	
		6	10:49:22	10:51:20		10:51:12	1 MIN	
	B	3.5/12V	10:23	10:24	10:24	10:25	1 MIN	
		REPAIR	10:54	10:55:19		10:57		
	C	3'/12V	10:27	10:36			SLOW	
		4'	11:05				SLOW	
		WILL PERC AT 5' - SAME AS D						
	D	3.5'/11V	10:37					
		5'	11:07		11:08	11:10	2 MIN	

REMARKS NO REDONING... WITH EETLASS, SHALLOW SYSTEM, DUG PER PLAN
 TYPE OF SOIL PLATY MICA SANDY
 TESTED BY G. SAVAGE ALSO PRESENT _____
 TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME * 2.25 TRENCH WIDTH 3
 INLET DEPTH 3 MAXIMUM BOTTOM DEPTH 5 SQ. FT./BEDROOM 180

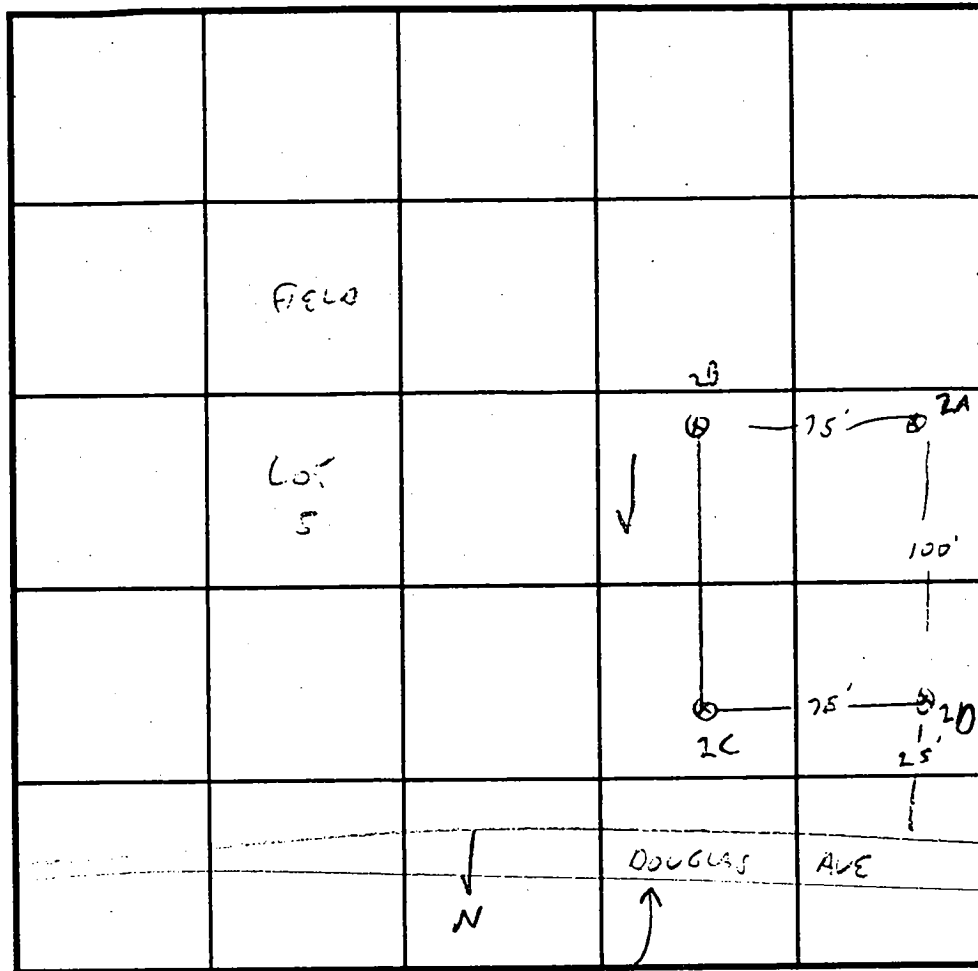
LOT 6

A 59009A

COUNTY #

SOIL PROFILE

0'



SOIL PROFILE
TYPICAL

0'

BR CL

3'

10R 6/4
PALE RED
SL
30% mica

12'

YELLOW/ORANGE
FIRM SAND CLITE
30%

2A

2C

BR CL

4'

PALE
R 40
SL
30% mica
30% sand

12

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11/10/97	2A	3/12V	11:17	11:23		11:33	4 MIN
	2B	3.5/11	11:29	11:43		12:16	
		will be	4-5 min	TE AT	4-4.5		
	2C	4V/12V	12:00				
		6.5	11:51	11:54	11:54	11:58	4 min
	2B	3.5/12V	11:57	12:00		12:05	5 MIN

REMARKS DUG PER PLAT

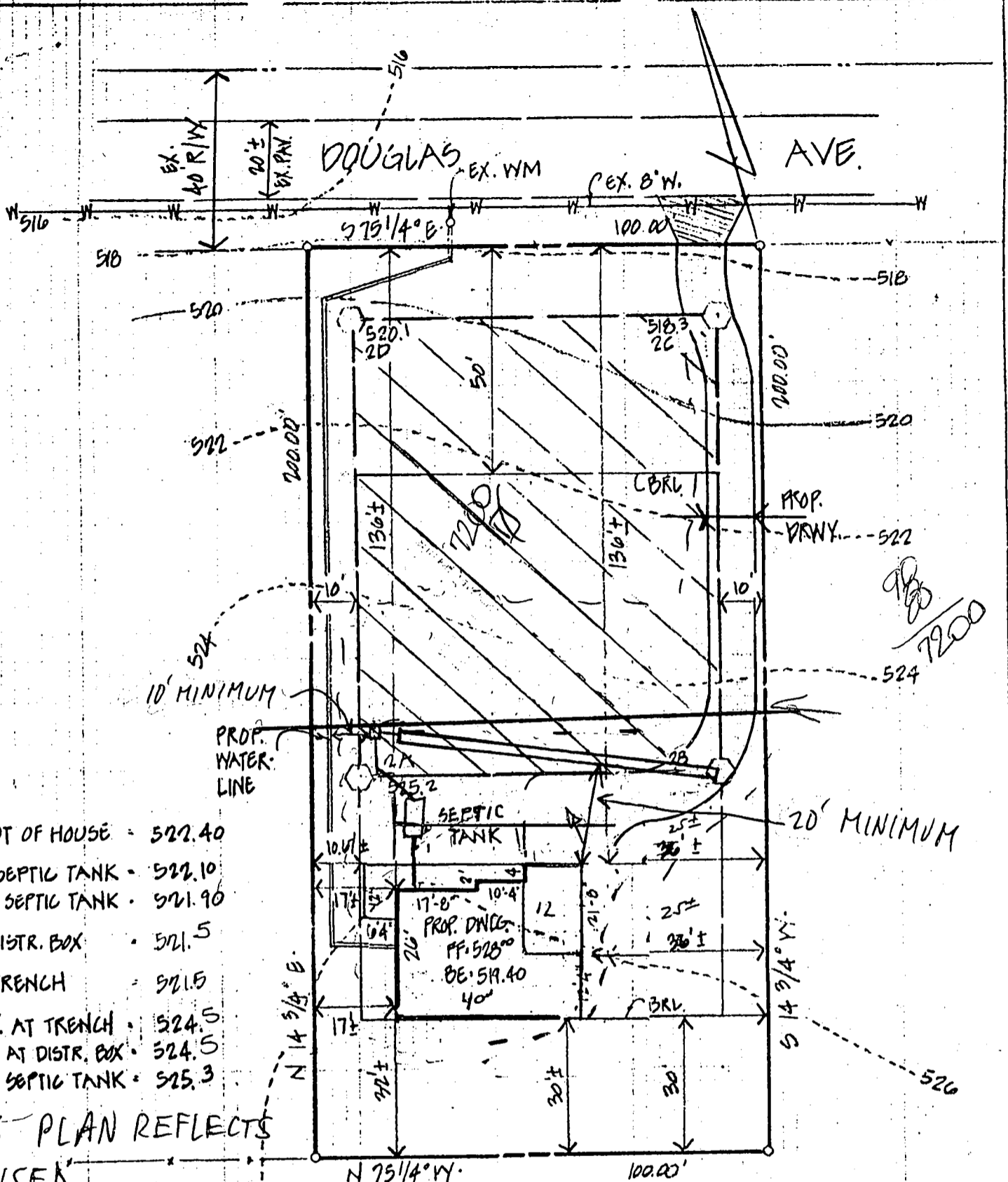
TYPE OF SOIL _____

TESTED BY G. SAUJAGE

ALSO PRESENT _____

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 4 MIN TRENCH WIDTH 3

INLET DEPTH 3 MAXIMUM BOTTOM DEPTH 5 SQ. FT./BEDROOM 180



INV. OUT OF HOUSE = 522.40
 INV. IN SEPTIC TANK = 522.10
 INV. OUT SEPTIC TANK = 521.90
 INV. IN. DISTR. BOX = 521.5
 INV. IN TRENCH = 521.5
 EX. ELEV. AT TRENCH = 524.5
 EX. ELEV. AT DISTR. BOX = 524.5
 EX. ELEV. SEPTIC TANK = 525.3

THIS PLAN REFLECTS REVISED

HOUSE FOOTPRINT

NOTES:

- 1.) PROPERTY IS ZONED R1-DEO
- 2.) TAX MAP 10, BLK 16, P-164
- 3.) HOWARD CO. SOILS. MAP. No. 13
SOIL TYPE - CHB2

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 SITE PLAN FOR

LOT #6 HAMPTON HILLS
 S. SIDE OF DOUGLAS AVE.
 BRD ELEC. DISTR., HOWARD CO. MD.

Approved by
 Howard County Health Department

Signature: [Signature] Date: 3/18/99

I CERTIFY THAT THE ABOVE MEASUREMENTS ARE ACTUAL AND CORRECT FOR THIS PROPERTY.

BY: [Signature] #7803 3/1/99

SCALE: 1"=30' 2-23-99

CHARLES R. CROCKEN & ASSOC., INC.
 Civil Engineering & Land Planning
 P.O. Box 307
 Westminster, Maryland 21157
 Tel. (410) 549-2708

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER
B00116650

Building Address 1179 Douglas Ave
Marriottsville R/J Marriottsville 2110
 Suite/Apt. #: N/A SDP/WP/Petition #: N/A
 Census Tract 6030 Subdivision HAMILTON HILLS
 Section NA Area N/A Lot 60
 Tax Map 16 Parcel 164 Grid 16
 Zoning RC-DEP Map Coordinates 11A5 Lot size

Property Owner's Name RALU Inc
 Address 946 A Marlboro Ct
 City Eldersburg State MD Zip Code 21787
 Home Phone _____ Work Phone 410-781-3466
 Applicant's Name & Mailing Address, (if other than stated hereon):
 Phone _____ Fax _____

Existing Use VACANT LOT
 Proposed Use SFD
 Estimated Construction Cost \$ 100,000
 Description of Work Construct House 1-car garage
7 Rooms 400 IHB 2FB

Contractor Company RALU Inc
 Contact Person Chris Rochuba
 Address STATE
 City _____ State _____ Zip Code _____
 License No. CTR07162
 Phone _____ Fax 410 781 3475

Occupant or Tenant NA
 Contact Name _____
 Address _____
 City _____ State _____ Zip Code _____
 Phone _____ 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: <input type="checkbox"/> N/A <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads

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

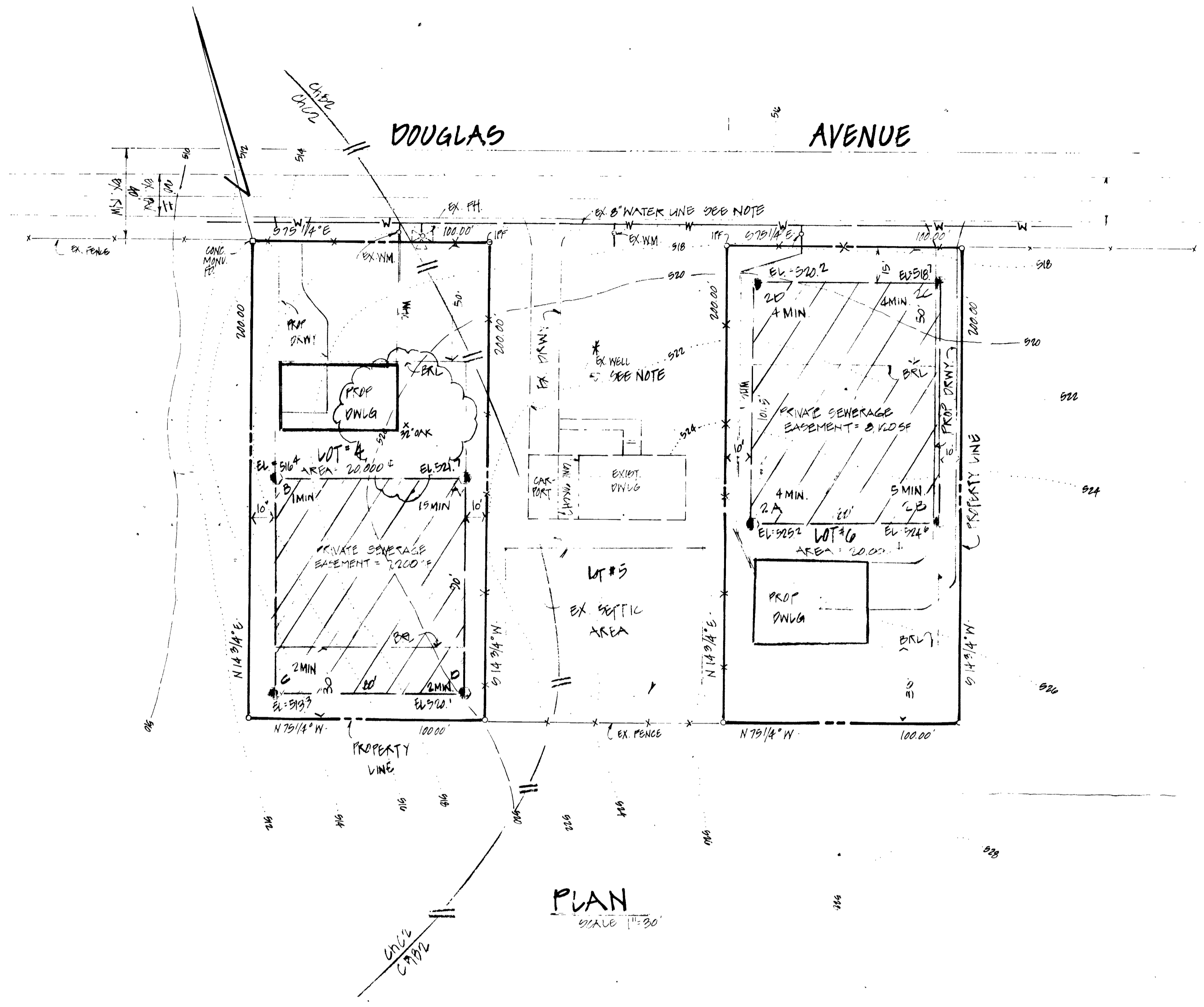
THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE HERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED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

Applicant's Signature [Signature]
 Title/Company RALU Inc

Print Name Chris Rochuba
 Date 3-12-99

Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
 ** PLEASE WRITE NEATLY AND LEGIBLY. **
 - FOR OFFICE USE ONLY -

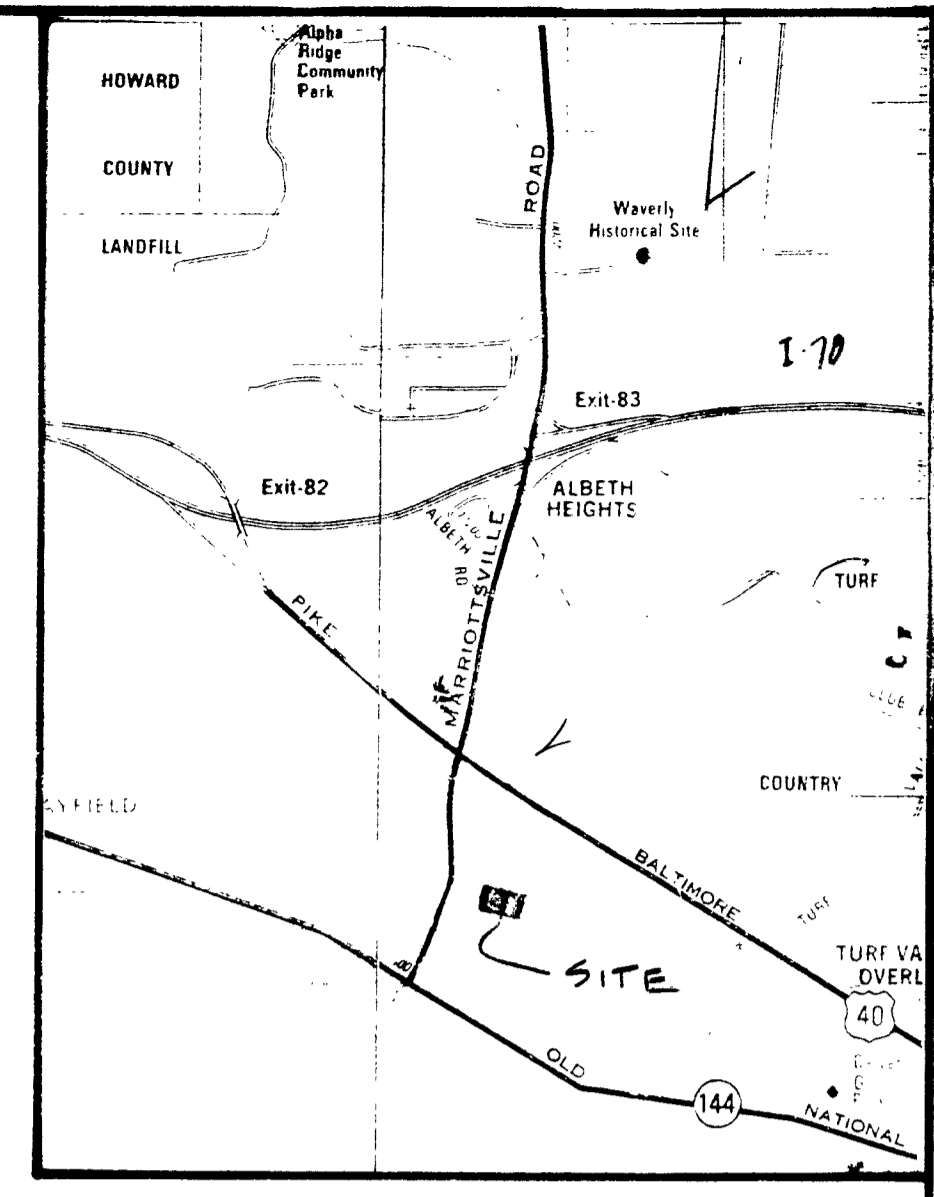
AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#
Land Development DPZ			Front: <u>5' Side</u>	Filing fee \$
State Highways			Rear: <u>3' Back</u>	Permit fee \$
Building Official			Side: <u>6' Side</u>	Excise tax \$
Dev. Engineering DPZ	<u>3/18/99</u>	<u>[Signature]</u>	Side St: _____	Sub-total paid \$
Health			All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	Add'l permit fee \$
Fire Protection			Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$
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"/>	Balance due \$
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Lot Coverage for NewTown Zone _____	Check # <u>1003</u>
ONE STOP SHOP: <input type="checkbox"/>			SDP/Red-line approval date _____	Validation # _____
			Accepted by _____	



PLAN
SCALE 1"=50'

SOILS LEGEND

SYMBOL	SERIES
CHC2	CHESTER
CHB2	CHESTER



VICINITY MAP
SCALE 1"=2,000'

GENERAL NOTES:

- BOUNDARY BASED ON DEED DESCRIPTIONS
- TOPOGRAPHY AS PER HOWARD COUNTY TOPO SHEETS # 33-35 & # 33-39
- ZONED RU-000
- TAX MAP 16 . BLK 16 . PARCELS 254 & 164
- HOWARD COUNTY SOILS SURVEY MAP # 15

* EX. WELL NOTE
EXISTING WELL IS TO BE ABANDONED PRIOR TO FINAL PLAT SIGNATURE.

APPROVED: FOR PUBLIC WATER AND PRIVATE SEPTIC
HOWARD COUNTY HEALTH DEPARTMENT

Joseph B. Hill 1-6-78
COUNTY HEALTH OFFICER DATE

THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT AS REQUIRED BY MARYLAND DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWERAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWAGE IS AVAILABLE. THESE EASEMENTS SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENTS INTO THE PRIVATE SEWERAGE EASEMENTS. RECORDATION OF A MODIFIED SEWERAGE EASEMENT SHALL NOT BE NECESSARY.

THERE ARE NO WELLS OR SEPTIC SYSTEMS WITHIN 100' OF THE LOT LINES SHOWN HEREON UNLESS NOTED OTHERWISE.

DENOTES SATISFACTORY PERCOLATION TEST
DENOTES UNSATISFACTORY PERCOLATION TEST

CURRENT TITLE REFERENCES:
LIBER 463, FOLIO 755 LOT 4
ANDREW J. HARBIN TO
JAMES B. SAUNDERS
JAN. 1, 1967

AND
LIBER 329, FOLIO 51 LOT 6
ANDREW J. HARBIN TO
JAMES B. SAUNDERS
MARCH 14, 1959

SIGNED
PERCOLATION CERTIFICATION PLAN
11183 DOUGLAS AVE.
EXISTING LOT 4 & 6 OF
HAMPTON HILLS
IN THE SOUTHWEST CORNER OF DOUGLAS AVE
3RD ELECTION DISTRICT, HOWARD CO, MARYLAND

OWNER: JAMES B. SAUNDERS
11183 DOUGLAS AVE.
HARRIOTTVILLE, MARYLAND 21104

CONTRACT PURCHASER:
KALO BUILDERS
C/O CHRIS KACHUBA
940 A HARRIMICH CT.
ELDERSBURG, MARYLAND 21764
PHONE: 410-751-3475

CHARLES R. CROCKEN & ASSOCIATES, INC.
Civil Engineering • Land Planning
P.O. BOX 307
WESTMINSTER, MARYLAND 21157
Tel. (301) 549-2705

7-6-97
DATE

TAX MAP PARCEL
DESIGNED BY: CHC
DRAWN BY: CHC
PROJECT NO.
DATE: 6/30/97
SCALE: SEE PLAN
DRAWING NO. 1 OF 1

Charles R. Crocken
PROFESSIONAL 1803