

LAYOUT 7/12/02 10:30 #200 INSP 4 \_\_\_\_\_  
 INSP 2 7/3/02 2-3 INSP 5 \_\_\_\_\_  
 INSP 3 7/5/02 10:30 INSP 6 \_\_\_\_\_

ISSUE DATE: 5/10/2002

P 516969

APPROVAL DATE: 7/5/02

A 510571-D

# PERMIT INDEXED

## ON-SITE SEWAGE DISPOSAL SYSTEM HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH

#337140

South Carroll Backhoe, Inc IS PERMITTED TO INSTALL  ALTER

ADDRESS: 4410 Salem Bottom Road PHONE NUMBER: 410-875-4197

SUBDIVISION: Brantwood 3/1 LOT NUMBER: 4

ADDRESS: 3051 Seneca Chief Trail PROPERTY OWNER: NVR Inc.

SEPTIC TANK CAPACITY (GALLONS): 1250 OUTLET BAFFLE FILTER REQUIRED

PUMP CHAMBER CAPACITY (GALLONS): N/A COMPARTMENTED TANK REQUIRED

NUMBER OF BEDROOMS: 4

SQUARE FEET PER BEDROOM: 180

LINEAR FEET OF TRENCH REQUIRED: 240 HOUSE SERVED BY PUBLIC WATER

TRENCHES:	Trench to be 3.0 feet wide. Inlet 3.0 feet below original grade. Bottom maximum depth 5.0 feet below original grade. Effective area begins at 3.0 feet below original grade. 2.0 feet of stone below distribution pipe.
LOCATION:	Place the distribution box as shown on the approved site plan. Run trenches on contour.
NOTES:	

PLANS APPROVED: Steven R. Krieg OK 4/23/02 (SO) DATE: 3/20/2002

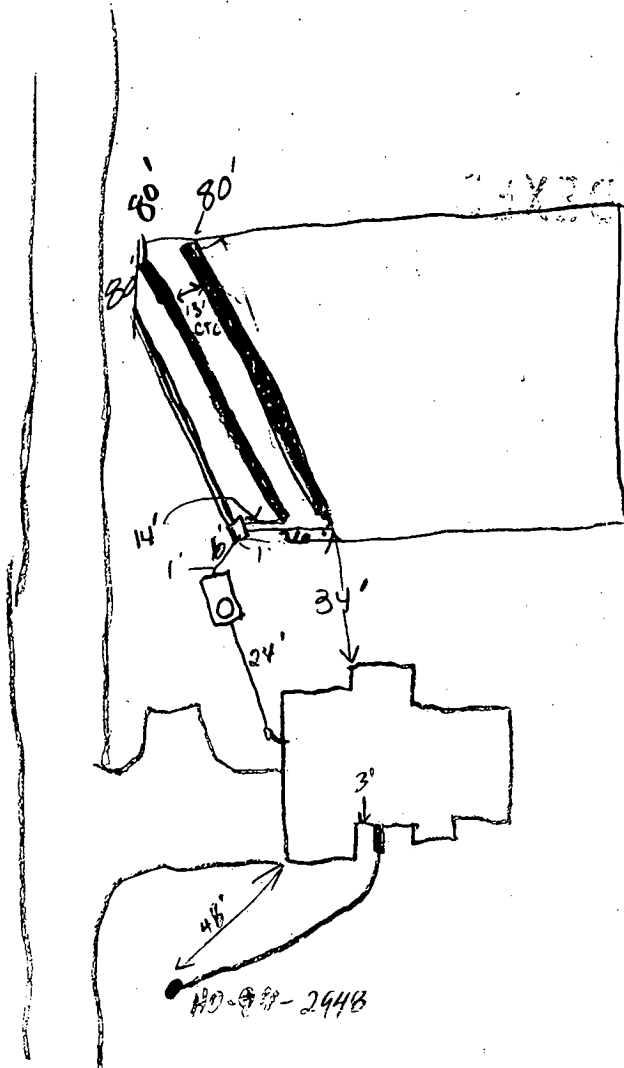
NOTES: PERMIT VOID AFTER 2 YEARS  
 CONTRACTOR IS RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS  
 WATERTIGHT SEPTIC TANKS REQUIRED  
 ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL UNLESS SPECIFICALLY AUTHORIZED  
 MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS UNLESS SPECIFICALLY AUTHORIZED  
 CONTRACTOR RESPONSIBLE FOR COMPLIANCE WITH APPLICABLE REGULATIONS, GUIDELINES AND THE TERMS OF THIS PERMIT

**NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM PERMITTED BY THIS PERMIT. PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT. BUILDING PERMIT SIGNED AND RETURNED**  
 CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

4-23-02 80014419-DECK + SCREW PORCA

A510571-D

NOT TO SCALE



ROAD

TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
3	3	5
NUMBER OF TRENCHES		3
TOTAL LENGTH		240'
ABSORPTION AREA		720 ft <sup>2</sup>
DISTRIBUTION BOX LEVEL		<input checked="" type="checkbox"/>
DISTRIBUTION BOX BAFFLE		Yes
DISTRIBUTION BOX PORT		N/A

SEPTIC TANK DATA	
SEPTIC TANK 1 LEVEL <input checked="" type="checkbox"/>	
CAPACITY	1256 GAL
SEAM LOC	Top
TANK LID DEPTH	6" - 1"
BAFFLES	<input checked="" type="checkbox"/>
BAFFLE FILTER	
MANHOLE LOC	Front
6" PORT LOC	
WATERTIGHT TEST	
SEPTIC TANK 2 LEVEL <input type="checkbox"/>	
CAPACITY	
SEAM LOC	
TANK LID DEPTH	
BAFFLES	
BAFFLE FILTER	
MANHOLE LOC	
6" PORT LOC	
WATERTIGHT TEST	<input checked="" type="checkbox"/>

PRE-CONSTRUCTION 7/2/02 - Lot staked, layout per BP (SO)

INSTALLATION 7/3/02 Tank set 1<sup>st</sup> trench install OK to cover (SO)  
7-5-02 OK TO COVER TRENCHES (KN)

BUILDING PERMIT SIGNED AND RETURNED

FINAL INSPECTOR Noonan, Kacie DATE OF APPROVAL 7/5/02

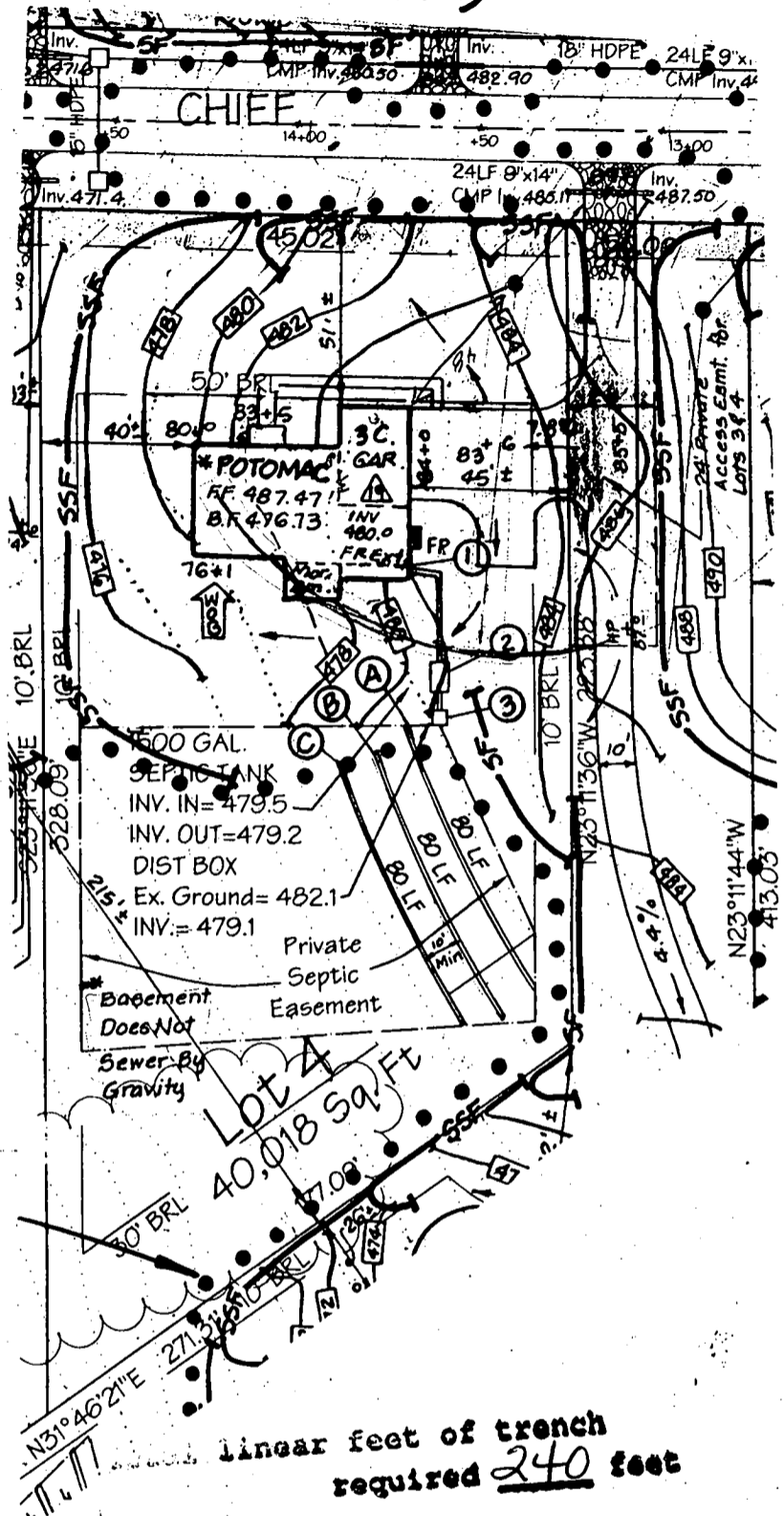
Approved Septic System Plan  
Howard County Health Department

*Steve J. Meyer*  
Signature

NOTES:

1. Existing Zoning: RC
2. Property address: 3051 Seneca Chief Trail
3. The Limit of Disturbance was approved under GPO2-34
4. The proposed driveway for this lot shall be a minimum of 10' wide, 6" crusher run with 2-1/2" macadam surface.
5. The topography shown assumes proposed contours from the FOI-67 plan are existing.
6. Driveway Entrance per Howard County Volume IV Standard Detail R 6.06.

SENECA CHIEF TRAIL  
(Ex. 50' R/W)



SEPTIC SYSTEM DESIGN DATA:

- ① Invert at Foundation Wall: 480.00 (Wall Hung)
- ② 1500 Gallon Septic Tank (4 BR-Provide manhole to grade)  
Existing Ground over Tank: 482.00  
Proposed Grade over Tank: 482.00  
Invert In: 479.50  
Invert Out: 479.20
- ③ Distribution Box: (3 Outlets Minimum)  
Existing Ground Over Box: 482.10  
Proposed Grade Over Box: 482.10  
Invert In: 479.10
4. Trench Design:  
(Per Health Department Septic Specifications)  
= 180 SF per Bedroom x 4 Bedrooms = 720 SF  
= 720 SF ÷ 3 ft Trench Width  
= 240 LF of Trench REQ.

	(A)	(B)	(C)
Ex. Ground over Trench:	479.30	479.00	478.30
Invert Trench:	476.30	476.00	475.30
Bottom Trench:	474.30	474.00	473.30
Length of Trench:	80 ft.	80 ft.	80 ft.
Width of Trench:	3 ft.	3 ft.	3 ft.

NOTE: Trench Design may be revised at time of installation based on site conditions.

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

LDE, Inc.

0250 Runsey Road, Suite 100  
Columbia, Maryland  
(410)715-1070 - (301)598-3424 - Fax(410)715-9540

Title: REVISION <sup>19</sup> TO GPO2-34  
BRANTWOOD SECTION 3 AREA 1  
LOT: 4

Date: 3/12/02	Drawn: LDE	
Scale: 1" = 50'	LDE Job No.: 01-043	Sheet: 1 OF 1

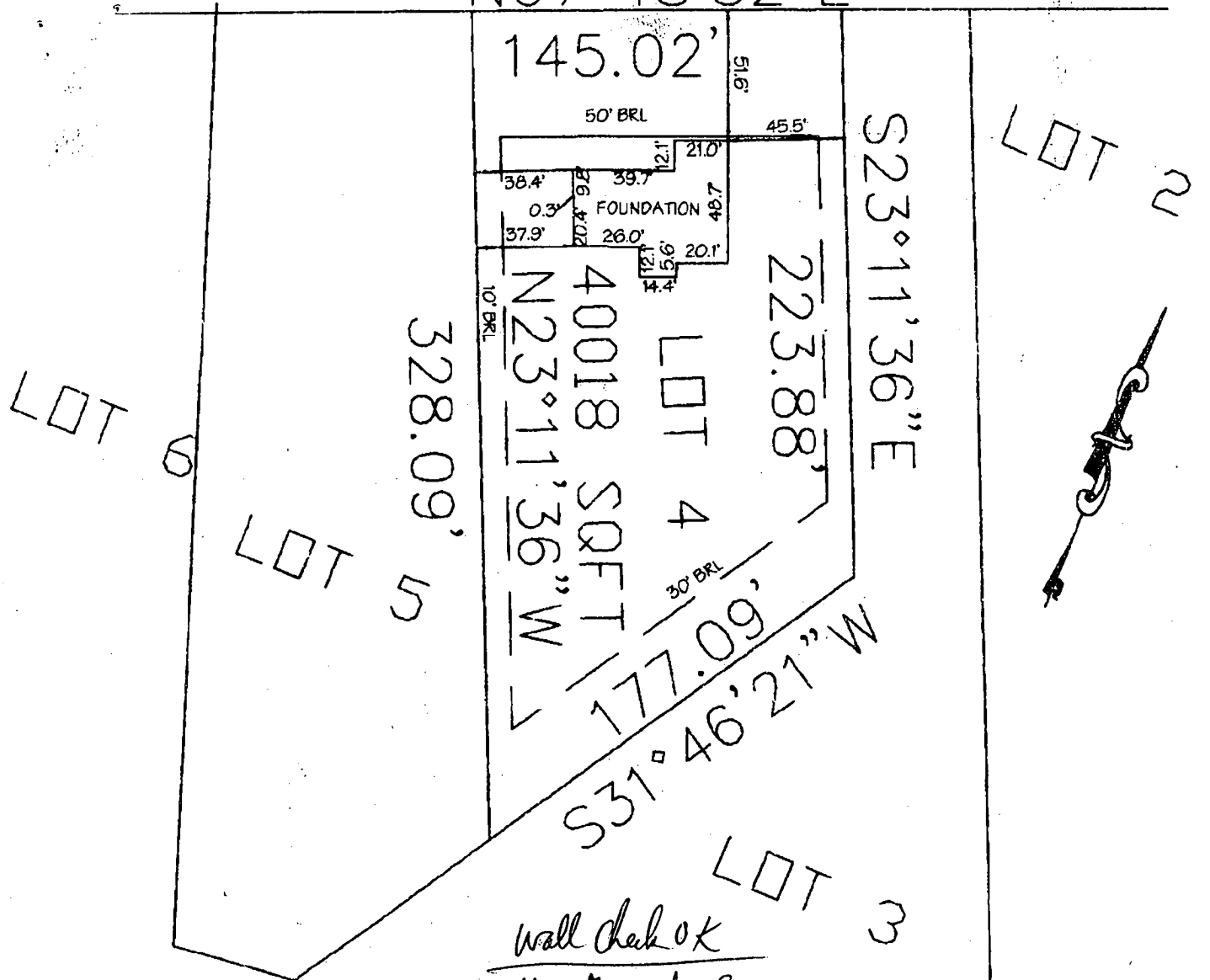
PROPERTY KNOWN AS:

THIS PLAT CAN NOT BE USED TO ESTABLISH PROPERTY LINES OR CORNERS.

LOT 4  
BRANTWOOD  
SECTION THREE AREA ONE  
PLAT NO. 14876  
HOWARD COUNTY, MD

# SENECA CHIEF TRAIL

N67°48'52"E



*Wall Check OK*  
*House More or less Same*  
*as an RP Plan*  
*RP 5/16/02*

## LOCATION DRAWING

TOP OF WALL ELEV= 484.50'

CERTIFICATION	SEAL	SCALE 1" = 60'	DATE 05/01/02
<p>This is to certify that I have surveyed the property known as: LOT 4 SENECA CHIEF TRAIL</p> <p>The information shown has been established by current acceptable survey procedures and from available record information. This drawing is to be used for Title Transfer Financing, or Refinancing Only and IS NOT to be used for the Establishment of Property Lines, Location for Fences, Garages, Buildings, or other Existing or Future Improvements.</p>		<p><b>LDE Inc.</b> Engineers, Surveyors, Planners</p> <p>9250 Rumsey Road, Suite 106 Columbia, Maryland - 21045 (410)715-1070 - (410)715-9540 Fax</p>	

C1 0271

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

FILL IN THIS FORM COMPLETELY PLEASE TYPE

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

COUNTY NUMBER A510571 D

(THIS NUMBER IS TO BE PUNCHED IN COLUMNS 3-6 ON ALL CARDS)

ST/CO USE ONLY DATE RECEIVED MM DD YY

DATE WELL COMPLETED

Depth of Well

OK SRK 3/20/02

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-2948

OWNER Brantwood LLC STREET OR RFD Seneca chie & Trail TOWN Ellicott City SUBDIVISION Brantwood SECTION 3/1 LOT 4

WELL LOG

Not required for driven wells

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) YES (Y) NO (N)

TYPE OF GROUTING MATERIAL (Circle one) CEMENT (CM) BENTONITE CLAY (BC)

NO. OF BAGS 12 NO. OF POUNDS 1128

GALLONS OF WATER 72

DEPTH OF GROUT SEAL (to nearest foot) from 0' to 50'

CASING RECORD casing types insert appropriate code below

MAIN CASING TYPE PL 60 61 diameter 6" 63 64 Total depth 50' 66 67 70

OTHER CASING (if used) diameter inch depth (feet) from to

SCREEN RECORD screen type or open hole insert appropriate code below

DEPTH (nearest ft.) HO 50' 500'

SLOT SIZE 1 2 3

DIAMETER OF SCREEN (NEAREST INCH) 56 60 from to

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 O

TELESCOPE CASING LOG INDICATOR OTHER DATA

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

Table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), check if water bearing. Rows include: BROWN SILT SOIL (0-19'), BROWNISH ORANGE SILT SOIL (19-27'), TAWNISH ORANGE SILT SOIL (27-33'), WEATHERED TAWNISH ORANGE ROCK (33-43'), MED HARD GRAY MICAC (43-500')

C3

PUMPING TEST

HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min.) 4

METHOD USED TO MEASURE PUMPING RATE WATCH & Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 48' ft.

WHEN PUMPING 243' ft.

TYPE OF PUMP USED (for test)

A air P piston T turbine C centrifugal R rotary O other J jet S submersible

PUMP INSTALLED

DRILLER INSTALLED PUMP (CIRCLE) (YES or NO) 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

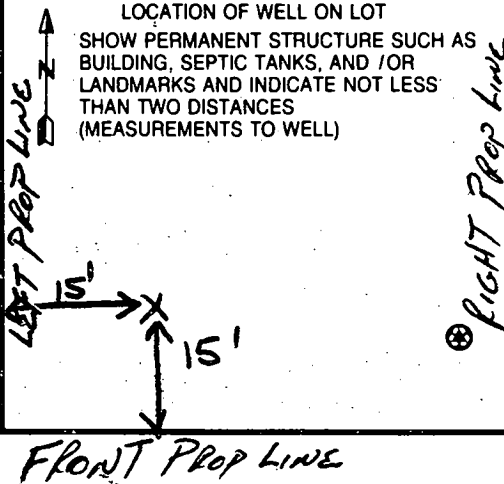
PUMP COLUMN LENGTH (nearest ft.) 43 47

CASING HEIGHT (circle appropriate box and enter casing height)

LAND SURFACE 2' (nearest foot)

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)



NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED YES (Y) NO (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. M Lic 355

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. MWD 546

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

410-730-0810

EMERGENCY/TEMP NO. IF ANY

B 1 03009

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

STATE PERMIT NUMBER

Ho-94-2948

please print or type

fill in this form completely

Date Received (APA) 1/16/01

W514745 % NICK LIPARINI

B 3

LOCATION OF WELL Howard

8: MM DD YY 13

BRANTWOOD LLC

8 COUNTY BRANTWOOD 21

15 Last Name Owner First Name 34

8835-P Columbia 100 Parkway

23 SUBDIVISION 42

36 Street or RFD 55 Columbia MD 21045

SECTION 3 LOT 4

57 Town 70 State 72 Zip 76

52 NEAREST TOWN Mayfield 71

MILES FROM TOWN (enter 0 if in town) 2 MI 73 76 77 78

DRILLER INFORMATION

Michael Barlow MW D.355

Driller's Name 76 License No. 81

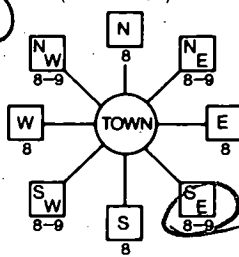
Michael Barlow Well Drilling

522 Underwood Lane Bel Air MD 21014

Signature Date 1-11-2001

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Seneca Chief Trail

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



34 30 37 DISTANCE FROM ROAD ENTER FT OR MI 38 39

TAX MAP: BLK: PARCEL

B 2

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 5

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

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- (D) DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
(F) FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
(I) INDUSTRIAL, COMMERCIAL, DEWATERING
(P) PUBLIC WATER SUPPLY WELL
(T) TEST, OBSERVATION, MONITORING
(G) GEO-THERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard CO AS10571D

COUNTY NAME COUNTY NO. STATE SIGNATURE INSERT S

DATE ISSUED 1/25/01 1/25/02

NORTH GRID 520 000 EAST GRID 820 000

APPROXIMATE DEPTH OF WELL 300 FEET

APPROXIMATE DIAMETER OF WELL 6" INCH

METHOD OF DRILLING (circle one)

- BORED (or Augered) JETTED Jettied & DRIVEN
AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)
CABLE REVERSE-ROTARY DRIVE-POINT

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-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
(D) THIS WELL WILL DEEPEM AN EXISTING WELL

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

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

APPROP. PERMIT NUMBER H098 GAP 6003(2) PERMIT No. Ho-94-2948

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

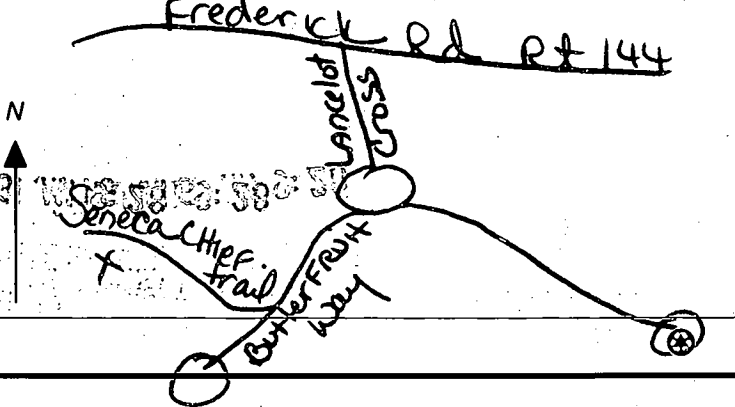
- 1.
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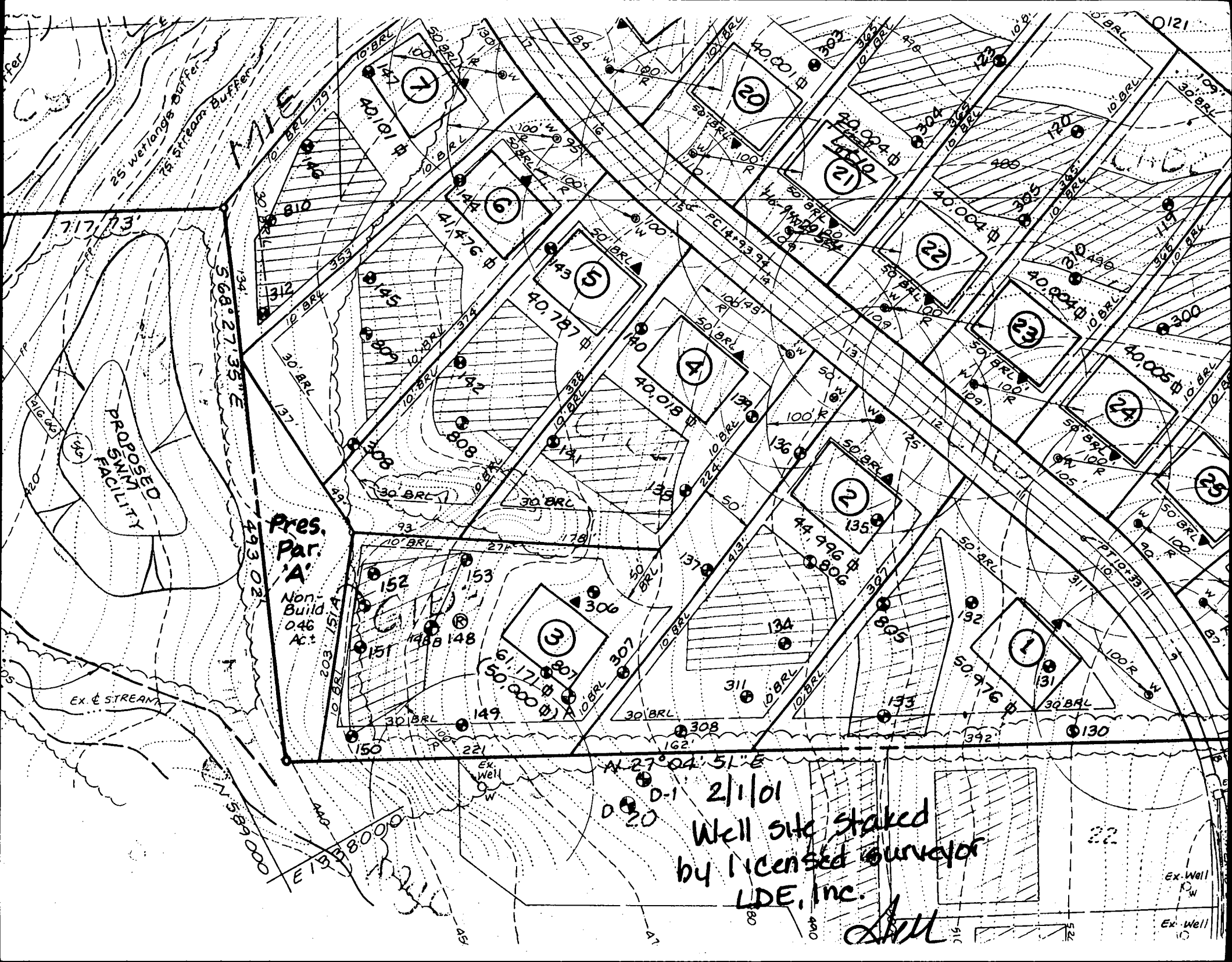
WRITE THE BOX NUMBER FROM THE MAP HERE

E 820 N 520

4/3/01 broken OK casing 50' open 50' 12 Bags 4/3/01

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





Pres. Par. 'A'

Non-Build  
046  
Ac.±

Well site staked  
by licensed surveyor  
LDE, Inc.

*Shill*

PROPOSED FACILITY

EX. STREAM

Ex. Well  
P<sub>W</sub>

Ex. Well  
W

25 Wetlands Buffer  
75 Stream Buffer

717.73'

568.27' 35" E

493.02'

203.1514'

208.503'

782.108'

589.000'

27.04' 51" E

0-1'

2/1/01

0-20'

10' BRL

30' BRL

50' BRL

100' BRL

150' BRL

200' BRL

250' BRL

300' BRL

350' BRL

400' BRL

450' BRL

500' BRL

550' BRL

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13050' BRL

13100' BRL

13150' BRL

13200' BRL

13250' BRL

13300' BRL

13350' BRL

13400' BRL

# APPLICATION

PERCOLATION TESTING

A 5105710

P \_\_\_\_\_

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

DISTRICT \_\_\_\_\_

DATE 7/17/98

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 George A. Garbutt

ADDRESS 11363 Frederick Rd., Ellicott City, MD 21042 PHONE \_\_\_\_\_

AGENT OR PROSPECTIVE BUYER Heritage Land Development

ADDRESS 3243 Bethany Lane, Ellicott City, MD 21042 PHONE 410-313-8808

PROPERTY LOCATION:

SUBDIVISION Brantwood II LOT NO. 154

ROAD AND DESCRIPTION 11363 Frederick Road, Ellicott City, MD 21042

TAX MAP 16 PARCEL # 172

SIZE OF LOT 1 acre TYPE BLDG. SFD  
(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. ✓

(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

510571 0

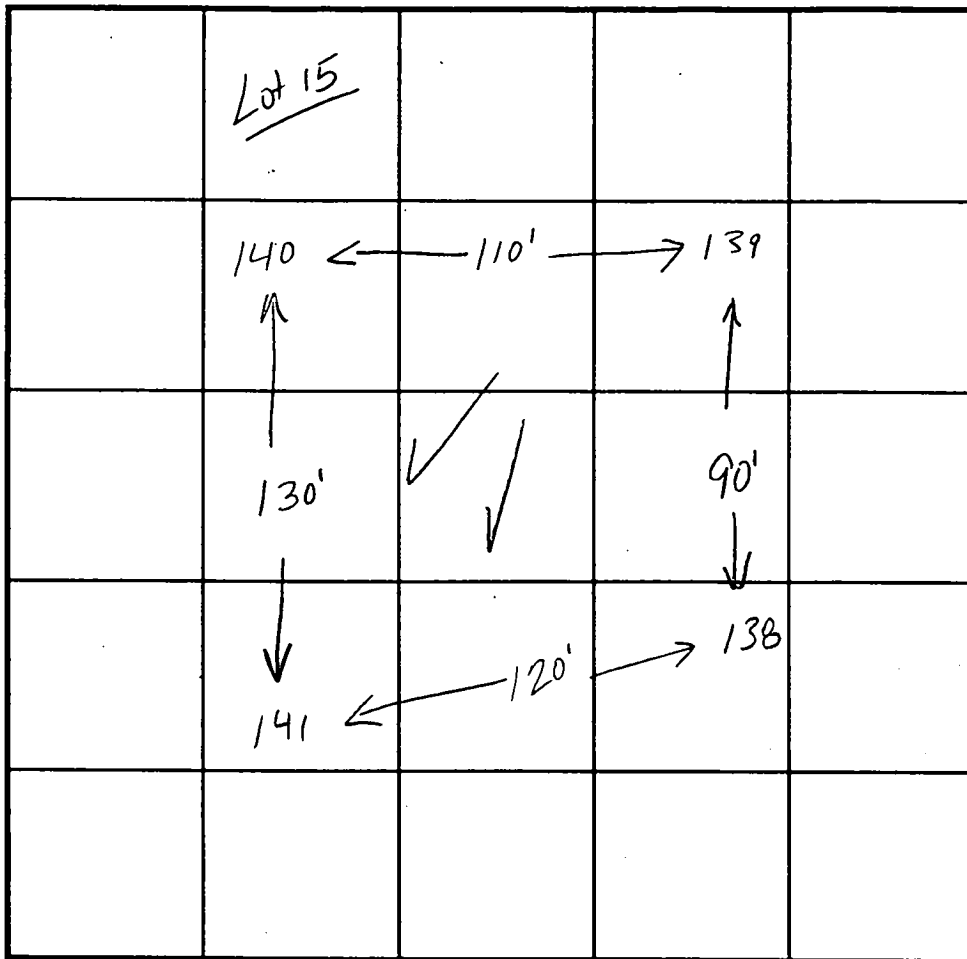
COUNTY #

SOIL PROFILE

0' 139  
 orange  
 brown  
 cl lm  
 3.5'  
 brown  
 sil m  
 15%  
 shale  
 frags  
 ↓  
 11.5'

138  
 orange  
 cl lm  
 3.0'  
 tan/  
 orange  
 sil m  
 15%  
 shale  
 frags  
 quartz  
 frags  
 11'

140  
 orange  
 cl lm  
 3'  
 orange  
 brown  
 sil m  
 mica  
 flocs  
 15%  
 shale  
 frags  
 12'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE

0' 141  
 Same  
 as  
 test  
 hole  
 #140

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8-20-98	139	11.5'D	visual	ok	see profile		
	138	2.5'S	12:33:30	12:37:30	12:37:30	12:48:30	11min
		11.0'D	visual	ok	see profile		
	140	3.0'S	12:02:40	12:06:40	12:06:40	12:09:40	3min
		12.0'D	visual	ok	see profile		
	141	10.5'D	visual	only	ok see profile		

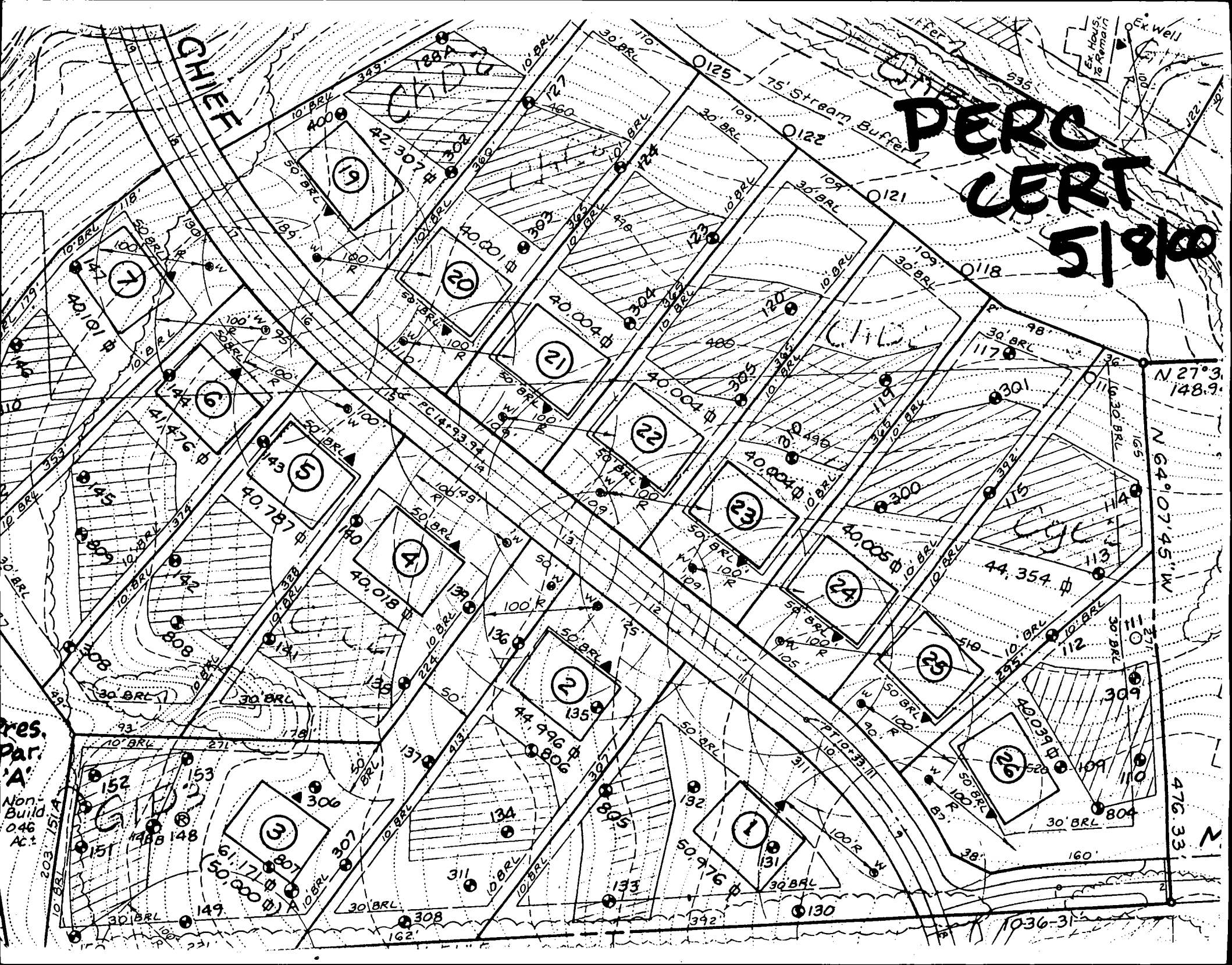
REMARKS test holes staked by surveyor

TYPE OF SOIL \_\_\_\_\_

TESTED BY Kim Maiste ALSO PRESENT Tim Fraga

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 7 minutes TRENCH WIDTH \_\_\_\_\_

INLET DEPTH \_\_\_\_\_ MAXIMUM BOTTOM DEPTH \_\_\_\_\_ SQ. FT./BEDROOM 180



CHIEF

PERC  
LERT  
5/8/00

Pres.  
par.  
'A'  
Non-  
Build  
046  
Ac±

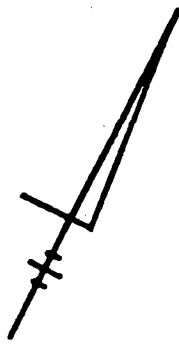
N 27° 3.148.9"

N 64° 07' 4.5" W

476.33'

1036-31

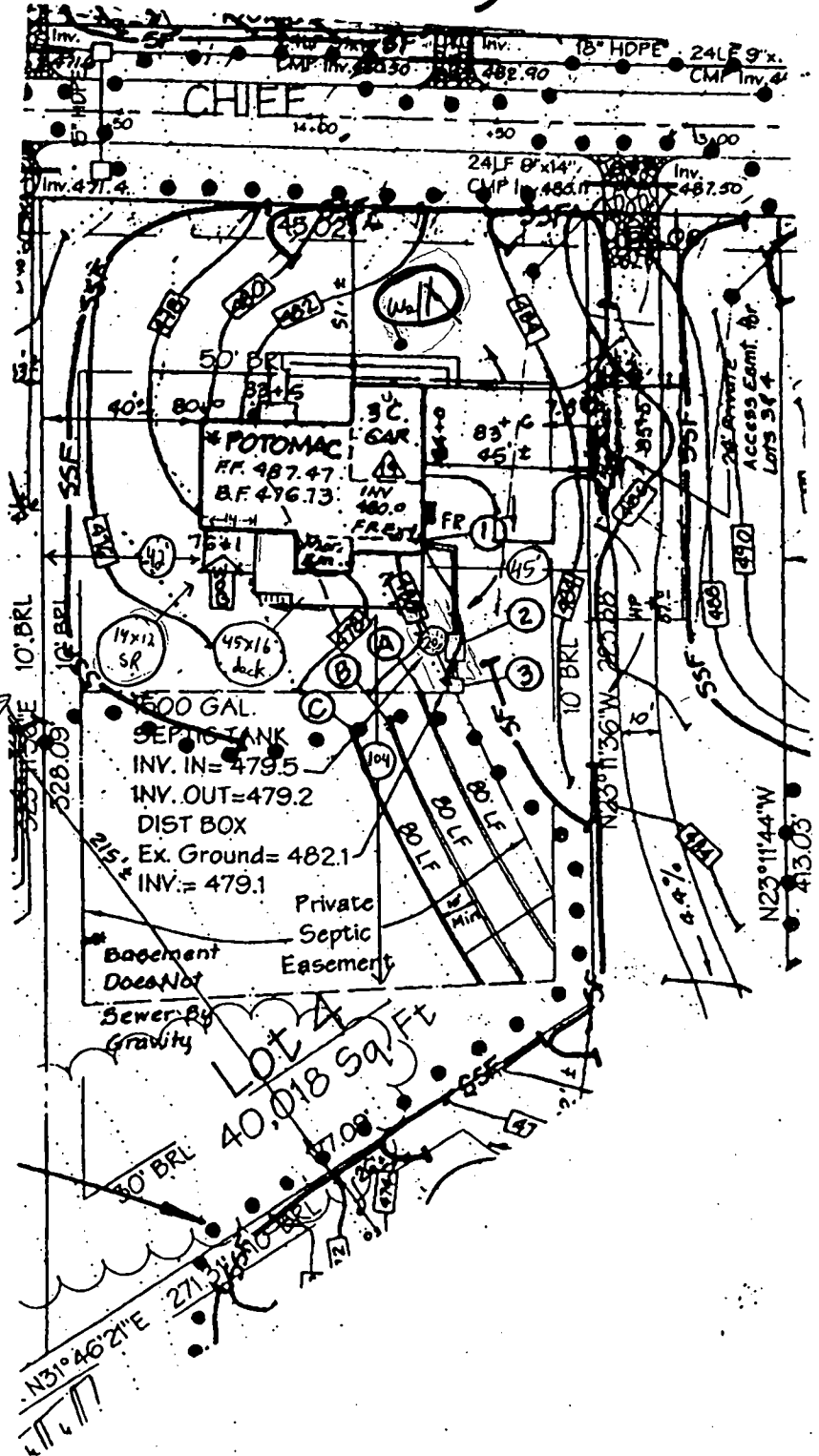
# SENECA CHIEF TRAIL (EX. 50' R/W)



## NOTES:

1. Existing Zoning: RC
2. Property address: 3051 Seneca Chief Trail
3. The Limit of Disturbance was approved under GPO2-34
4. The proposed driveway for this lot shall be a minimum of 10' wide, 6" crusher run with 2-1/2" macadam surface.
5. The topography shown assumes proposed contours from the FOI-67 plan are existing.
6. Driveway Entrance per Howard County Volume II Standard Detail R 6.06.

SUNROOM + DECK  
OK AS SHOWN  
MR 4/23/03



## SEPTIC SYSTEM DESIGN DATA:

- ① Invert at Foundation Wall: 480.00 (Wall Hung)
- ② 1500 Gallon Septic Tank (4 BR-Provide manhole to grade)  
Existing Ground over Tank: 482.00  
Proposed Grade over Tank: 482.00  
Invert In: 479.50  
Invert Out: 479.20
- ③ Distribution Box (3 Outlets Minimum)  
Existing Ground Over Box: 482.10  
Proposed Grade Over Box: 482.10  
Invert In: 479.10
4. Trench Design:  
(Per Health Department Septic Specifications)  
= 180 SF per Bedroom x 4 Bedrooms = 720 SF  
= 720 SF ÷ 3 ft Trench Width  
= 240 LF of Trench REQ.

	(A)	(B)	(C)
Ex. Ground over Trench:	479.30	479.00	478.30
Invert Trench:	476.30	476.00	475.30

*Handwritten signature or initials.*

Building Address 3001 Seneca Chief Trail  
Elliecott City, MD 21042

Suite/Apt. #: \_\_\_\_\_ SDP/WP/Petition #: \_\_\_\_\_

Census Tract 6030 Subdivision Belair Woods #13

Section 3 Area 1 Lot 4

Tax Map 16 Parcel 441 Grid 7A

Zoning RC Map Coordinates 11A6 Lot size \_\_\_\_\_

Property Owner's Name Paul & Lisa Roof

Address 3001 Seneca Chief Trail

City Elliecott City State MD Zip Code 21042

Home Phone 410-988-9988 Work Phone 410-931-3152

Applicant's Name & Mailing Address, (if other than stated hereon):  
David R. Lombardo  
6503 R BELAIR ROAD  
BEAIRMARKE MD 21206  
 Phone 410-254-7360 Fax 410-254-7601

Existing Use SF

Proposed Use SF w/ several rooms & deck

Estimated Construction Cost \$ 22,000

Description of Work 45 x 16 x 10 height open irregular shape  
deck w/ 4" x 6" x 1.46" x 6.5" x 14 x 12 SCREEN FIRM  
= 16.9' x 6.5' x 10' x 10'

Contractor Company American Deck Inc.

Contact Person David R. Lombardo

Address 6503 R BELAIR ROAD

City BEAIRMARKE State MD Zip Code 21206

License No. 35562

Phone 410-254-7360 Fax 410-254-7601

Occupant or Tenant \_\_\_\_\_

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"/>
Use group: _____	Gas: Yes <input type="checkbox"/> No <input type="checkbox"/>
Construction type: _____	Heating System: _____
<input type="checkbox"/> Reinforced Concrete	Electric: <input type="checkbox"/> Oil: <input type="checkbox"/>
<input type="checkbox"/> Structural Steel	Natural Gas: <input type="checkbox"/>
<input type="checkbox"/> Masonry	Propane Gas: <input type="checkbox"/>
<input type="checkbox"/> Wood Frame	Sprinkler system: <input type="checkbox"/> N/A <input type="checkbox"/>
<input type="checkbox"/> State Certified Modular	Full: _____
	Partial: _____
	Other Suppression: _____
	# of Heads: _____

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private <input checked="" type="checkbox"/>
Depth: _____ Width: _____	Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private <input checked="" type="checkbox"/>
1st floor: _____	Electric: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
2nd floor: _____	Gas: Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: _____	Heating System: _____
Finished Basement: <input type="checkbox"/> Unfinished Basement: <input type="checkbox"/>	Electric: <input type="checkbox"/> Oil: <input type="checkbox"/>
Crawl space: <input type="checkbox"/> Slab on Grade: <input type="checkbox"/>	Natural Gas: <input type="checkbox"/>
No. of Bedrooms: _____	Propane Gas: <input type="checkbox"/>
Multi-family dwellings: _____	Sprinkler system: <input type="checkbox"/> N/A <input type="checkbox"/>
No. of efficiency units: _____	Electric: <input type="checkbox"/> Oil: <input type="checkbox"/>
No. of 1 BR units: _____	Natural Gas: <input type="checkbox"/>
No. of 2 BR units: _____	Propane Gas: <input type="checkbox"/>
No. of 3 BR units: _____	
Other Structure: _____	
Dimensions: _____	
Foatings: <u>Full &amp; Part</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 THE PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature David R. Lombardo  
President

Title/Company HR 4/23/03

Print Name David R. Lombardo

Date 4/23/03

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