

LAYOUT 7/5/02 10:30 INSP 4 7/12/02 2:30 after Co #6
 INSP 2 7/9/02 Noon INSP 5 _____
 INSP 3 7/11/02 10:30 INSP 6 _____

ISSUE DATE: 6/14/2002

P 517314

APPROVAL DATE: 7/12/02

A 510571-E

*RPS#
337154*

PERMIT INDEXED

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

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: 5

3055 per permits office

ADDRESS: 3095 Seneca Chief Trail PROPERTY OWNER: NVR Inc. BRIAN STAHL

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 <u>135</u> feet from front lot line and 13 feet from left (328.09") lot line as viewed from Seneca Chief Trail. Install trenches on contour toward right lot line. <i>ADD BY 10'</i>
NOTES:	Maintain 100 foot minimum separation distance between all parts of septic system and all nearby wells.

PLANS APPROVED: Ronald J. Pinkley *OK* 4/23/02 *(Signature)* DATE: 4/05/2002

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

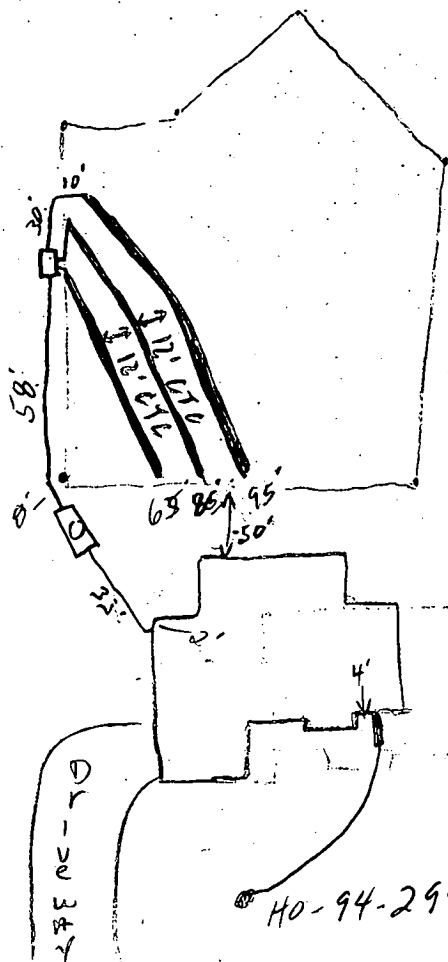
NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

BUILDING PERMIT SIGNED AND RETURNED 301-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

10/30/2002 B00139124 DECK W/STEPS & LANDING

A510571-E

NOT TO SCALE



TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
3'	3'	5'
NUMBER OF TRENCHES		3
TOTAL LENGTH		240'
ABSORPTION AREA		220 sq
DISTRIBUTION BOX LEVEL		—
DISTRIBUTION BOX BAFFLE		—
DISTRIBUTION BOX PORT		—

SEPTIC TANK DATA	
SEPTIC TANK 1 LEVEL	<input checked="" type="checkbox"/>
CAPACITY	1500 GAL
SEAM LOC	Top
TANK LID DEPTH	1'
BAFFLES	<input checked="" type="checkbox"/>
BAFFLE FILTER	—
MANHOLE LOC	Center
6" PORT LOC	—
WATERTIGHT TEST	—

SEPTIC TANK 2 LEVEL	—
CAPACITY	— GAL
SEAM LOC	—
TANK LID DEPTH	—
BAFFLES	—
BAFFLE FILTER	—
MANHOLE LOC	—
6" PORT LOC	—
WATERTIGHT TEST	—

SENECA CHIEF

ROAD

PRE-CONSTRUCTION 7/5/02 Staked per plan S.T. location

per plan. Topo accurate. OK TO START (RN)

INSTALLATION 7/8/02 Tank set, house conn made, digging 1st trench (SC)

7/11/02 Half of 3rd trench in, OK to cover work completed (SC)

7/12/02 OK to cover all work (SC)

BUILDING PERMIT SIGNED

FINAL INSPECTOR

[Signature]

DATE OF APPROVAL

7/12/02

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

NOTES:

1. Existing Zoning: RC
2. Property address: 3055 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 IX Standard Detail R 6.06.

SEPTIC SYSTEM DESIGN DATA:

- First Floor Gravity Service Only
 Interior Pump Pit Req'd. For Basement Service
- ① Invert at Foundation Wall: 468.50 (Wall Hung)
 - ② 1500 Gallon Septic Tank (4 BR-Provide manhole to grade)
 Existing Ground over Tank: 470.40
 Proposed Grade over Tank: 470.40
 Invert In: 467.70
 Invert Out: 467.40
 - ③ Distribution Box: (3 Outlets Minimum)
 Existing Ground Over Box: 470.30
 Proposed Grade Over Box: 470.30
 Invert In: 467.30
 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:	468.00	467.20	466.60
Invert Trench:	466.00	464.20	463.60
Bottom Trench:	463.00	462.20	461.60
Length of Trench:	65 LF	80 LF	95 LF
Width of Trench:	3 Ft.	3 Ft.	3 Ft.

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

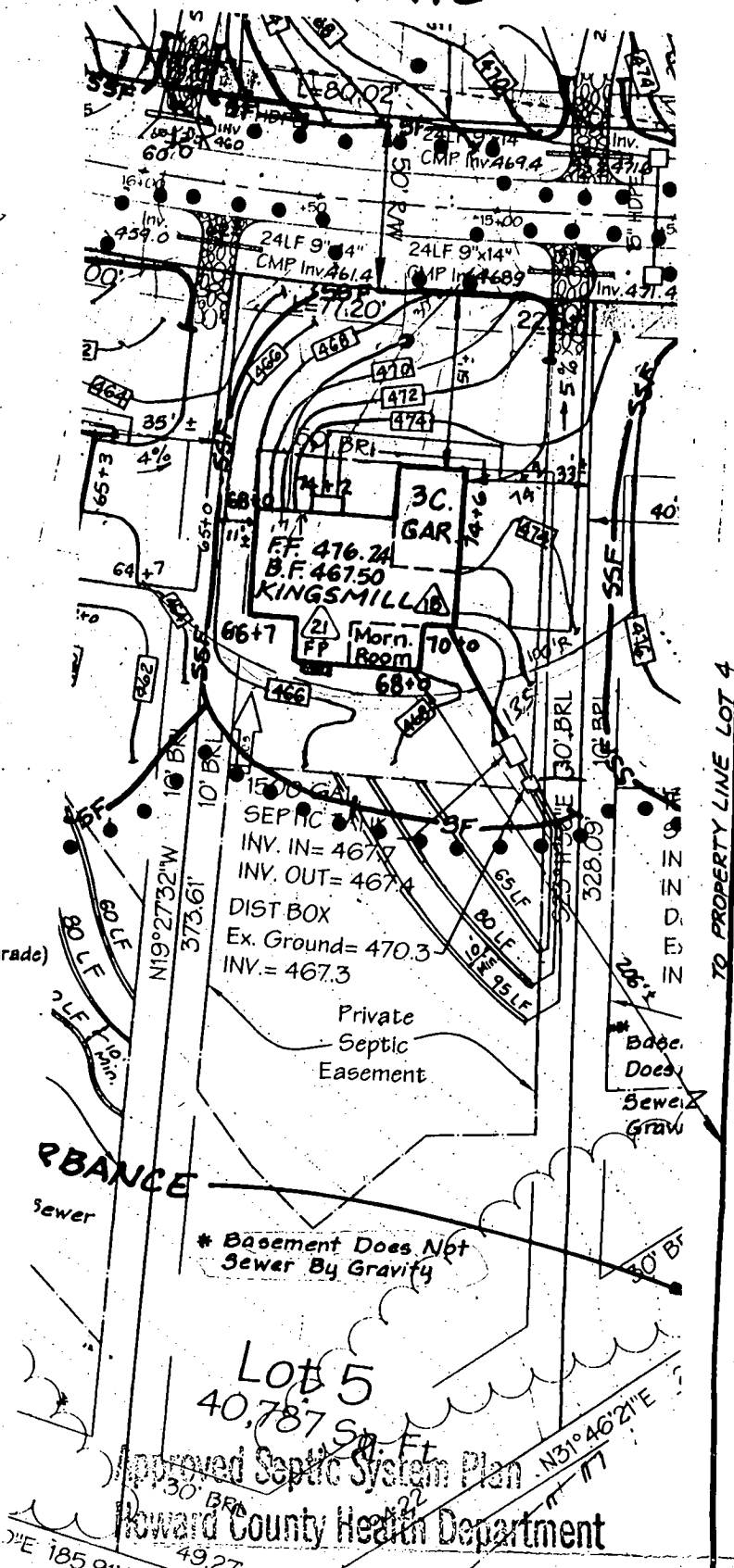
Length of trench required 240 feet

Width of trench(es) 3 feet

Depth of trench(es) 5 feet

Depth of stone required below distribution pipe 2 feet

LDE, Inc.
 0250 Rumsey Road, Suite 100
 Columbia, Maryland
 (410)715-1070 - (301)598-3424 - Fax (410)715-9540



Ronald Purley
 Signature _____ Date 4/5/02

Title: REVISION 21 TO GPO2-34		
BRANTWOOD SECTION 3 AREA 1		
LOT 5		
Date:	Drawn:	
3/20/02	LDE	
Scale:	LDE Job No.:	Sheet:
1" = 50'	01-043	1 OF 1

PROPERTY KNOWN AS: LOT 5
BRANTWOOD SEC THREE
AREA ONE PLAT 14876
3RD ELEC. DIST. HOWARD CO., MD.

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

STREET ADDRESS: 8100
8520 RUMSEY ROAD SUITE 106

SENECA

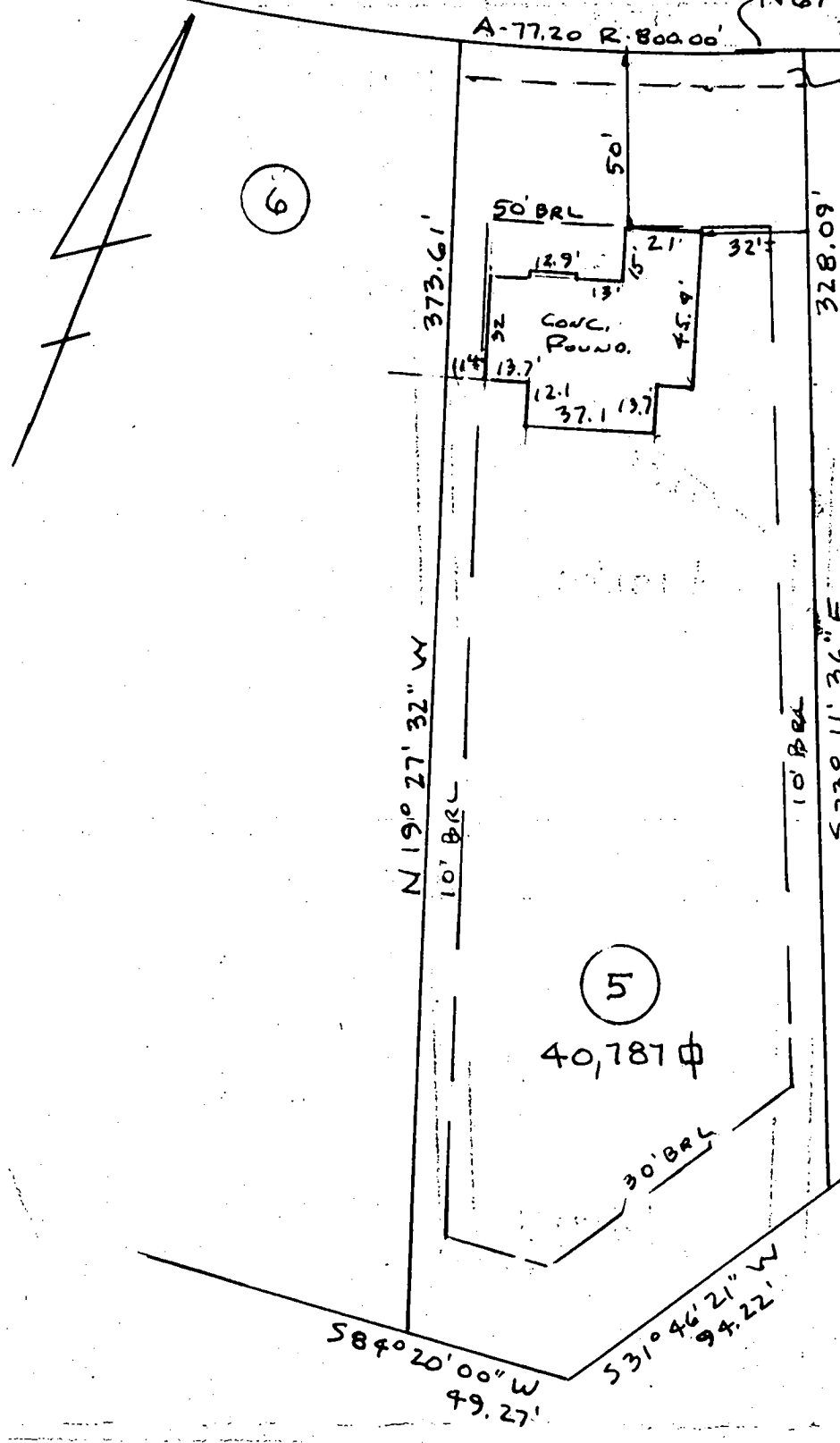
CHIEF TRAIL
50' R/W

TRAIL

N 67° 48' 52" E
22.81

A-77.20 R-800.00

PRIVATE 10' TREE
MAINTENANCE EASEMENT



WALL CHECK OK
HOUSE PER PLAN
MR 6/14/02

LOCATION DRAWING

TOP OF WALL ELEV 415.3'

CERTIFICATION

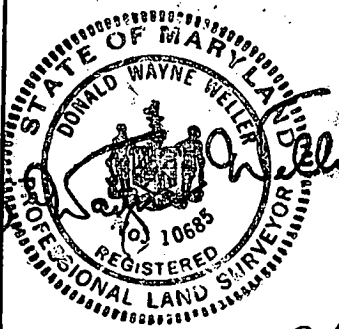
SEAL

SCALE 1" = 50'

DATE 5/30/02

This is to certify that I have surveyed the property known as: LOT 5
SENECA CHIEF TRAIL - BRANTWOOD

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, 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.



LDE Inc.

9250 Rumsey Road Suite 106
Columbia, Maryland 21045

(410) 715-1070 (Balt.)
(301) 596-3424 (Wash)
(410) 715-9540 (Fax)

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
WATER AND SEWERAGE PROGRAM
TEL: (410)313-2640 FAX: (410)313-2648

Information Form for the Installation of the Well Pump, Pitless Adapter, and Supply Piping

NOTE: The installer is responsible for requesting an inspection prior to 9 am on the day of the desired inspection. No work is to be covered until approved by the Health Department. All installations must comply with the National Standard Plumbing Code (NSPC, as amended locally) and COMAR 26.04.04 (MD Well Construction Regulations). Submission of a complete form is required prior to Use and Occupancy approval.

Company Name: Van Sant Plbc #116 Telephone #: 301-829-0444
Address: 310 Main St
Mt Airy, MD 21771

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer
License # and name of individual responsible for the field installation:
Name (Print): Harold Van Sant License# 1467
*A licensed individual must perform the actual installation. Apprentices must be under the direct supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification.

Name of Property Owner: NOV Homes Telephone #: 858-0522
Subdivision: Bramwood Sea 3 Lot #: 5 Well Tag #: HO-44-2449
Site Address: 3095 Seneca (High Trail)
Morrisville, MD 21004

Submersible Pump Data Pitless Adapter Well Cap and Electric Conduit
Make: Cooper Bruiser Make: Hampbell Two piece watertight cap:
Model #: 6510022 (34) Model#: 510K Screened, vented well cap:
Pump Capacity _____ GPM Depth: 42 (36" min) Cap secured to casing:
Well Yield: 12 GPM NSF approved: YES Conduit min 18" B.G.:
Depth of well encountered at time of pump installation: 400 (feet) Conduit secured to well cap:
If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4
Torque arrestors or Cable guards are required - Must circle one
Safety rope, if used, attached to inside of well casing with eye bolt NO

Piping to house House Connection
Type: Polyethylene PVC sleeved to undisturbed soil at wall penetration: 15
PSI: 200 (160 psi min) Approximate length of sleeve: 15
Depth of supply line: 12 (36" min) Sleeve caulked and sealed properly: Yes

The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Signature of company representative responsible for installation: Harold Van Sant date: 6/27/02

For Health Department Use Only - Not to be completed by Installer SRK

Date Insp. Requested: _____ Date Insp. Approved: 5/8/02 (50)
Inspection Data: Pitless adapter and water supply line at least 36" below grade
Two piece cap installed and attached to casing securely
Elec. conduit extends at least 18" below grade/attached to cap properly
Safety rope installed inside of well casing
Correct well tag attached properly and casing 2" above finished grade
Water supply line sleeved adequately at house connection
Adequate grout observed below pitless adapter

C1 0272

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 A510571E

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

ST/CO USE ONLY DATE RECEIVED MM DD YY

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

HO-94-2949

OWNER Brantwood LLC STREET OR RFD Seneca Chief Trail TOWN Ellicott City SUBDIVISION Brantwood SECTION 3/1 LOT 5

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes soil types like Brown & Brown Orange Silt Soil and rock types like Weathered Tanish & Orange Rock.

GROUTING RECORD and CASING RECORD sections. Includes fields for grouting material (Cement, Bentonite Clay), casing type (Steel, Concrete, Plastic), and casing dimensions.

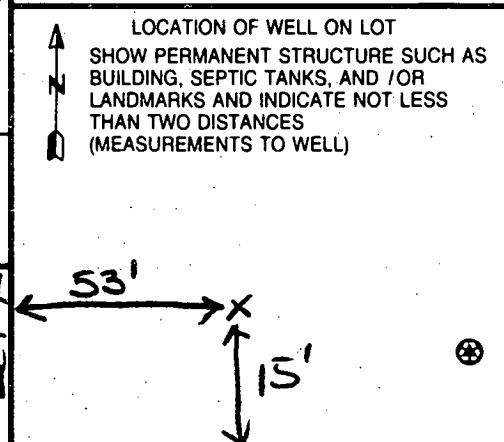
PUMPING TEST section. Includes fields for hours pumped (3), pumping rate (15 gal/min), water level before and when pumping (55' and 216' respectively), and pump type (submersible).

SCREEN RECORD section. Includes fields for screen type (Steel, Brass, Plastic, Open Hole) and screen dimensions.

PUMP INSTALLED section. Includes fields for driller installed pump (No), pump capacity (31-35 gpm), pump horse power (37-41), and pump column length (43-47 ft).

WELL HYDROFRACTURED section. Includes fields for unsuccessful wells (0) and hydrofractured status (No).

DEPTH (nearest ft.) section. Includes a depth scale from 1 to 61 feet and a handwritten depth of 400 feet.



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...

DRILLERS LIC. NO. MWD 355. DRILLERS SIGNATURE. LIC. NO. MWD 546. SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee).

MDE USE ONLY section. Includes fields for gravel pack, MDE use only (not to be filled in by driller), and telescope casing.

Front

B 1 03010
1/16/01

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND
PERMIT TO DRILL WELL
please print or type

STATE PERMIT NUMBER
HO-94-2949
fill in this form completely

W514 745
% NICK LIPARINI

Date Received (APA)
OWNER INFORMATION
BRANTWOOD LLC
8835-P Columbia 100 Parkway
Columbia MD 21045

B 3 LOCATION OF WELL
Howard
BRANTWOOD
SECTION 3 LOT 5
mayfield

DRILLER INFORMATION
Michael Barlow MW 0355
Michael Barlow Well Drilling
522 Underwood Lane Bel Air Md
1-11-2001

B 4
Seneca Chief trail
Butter Fruit Way
DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
DISTANCE FROM ROAD 30
ENTER FT OR MI

B 2 WELL INFORMATION
APPROX. PUMPING RATE (GAL. PER MIN.) 5
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

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

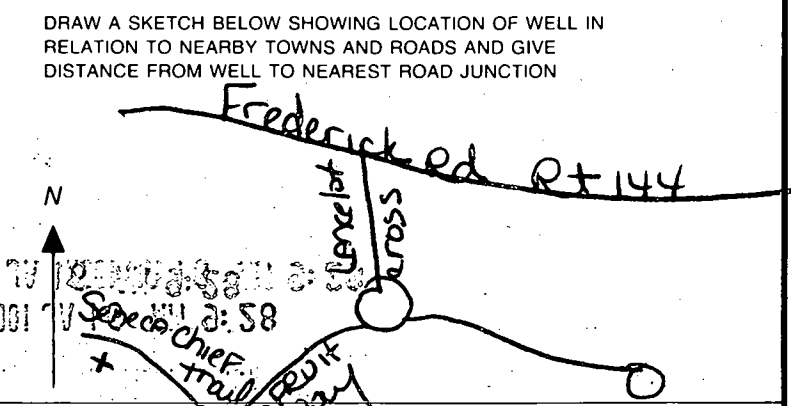
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
Howard CO A510571E
COUNTY NAME COUNTY NO.
STATE SIGNATURE INSERT S
DATE ISSUED 1/25/01 A McW... 1/25/02
CO SIGNATURE EXP. DATE
NORTH GRID 520 000 EAST GRID 820 000

APPROXIMATE DEPTH OF WELL 300 FEET
APPROXIMATE DIAMETER OF WELL 6" INCH

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
SOURCES OF DRILLING WATER
WRITE THE BOX NUMBER FROM THE MAP HERE
E 820
N 520

METHOD OF DRILLING (circle one)
BORED (or Augered) JETTED Jetted & 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)



Not to be filled in by driller (MDE OR COUNTY USE ONLY)
APPROP. PERMIT NUMBER HO 98 G A P (003(2))
PERMIT No. HO-94-2949

SPECIAL CONDITIONS
NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

510571 P

COUNTY #

SOIL PROFILE
140

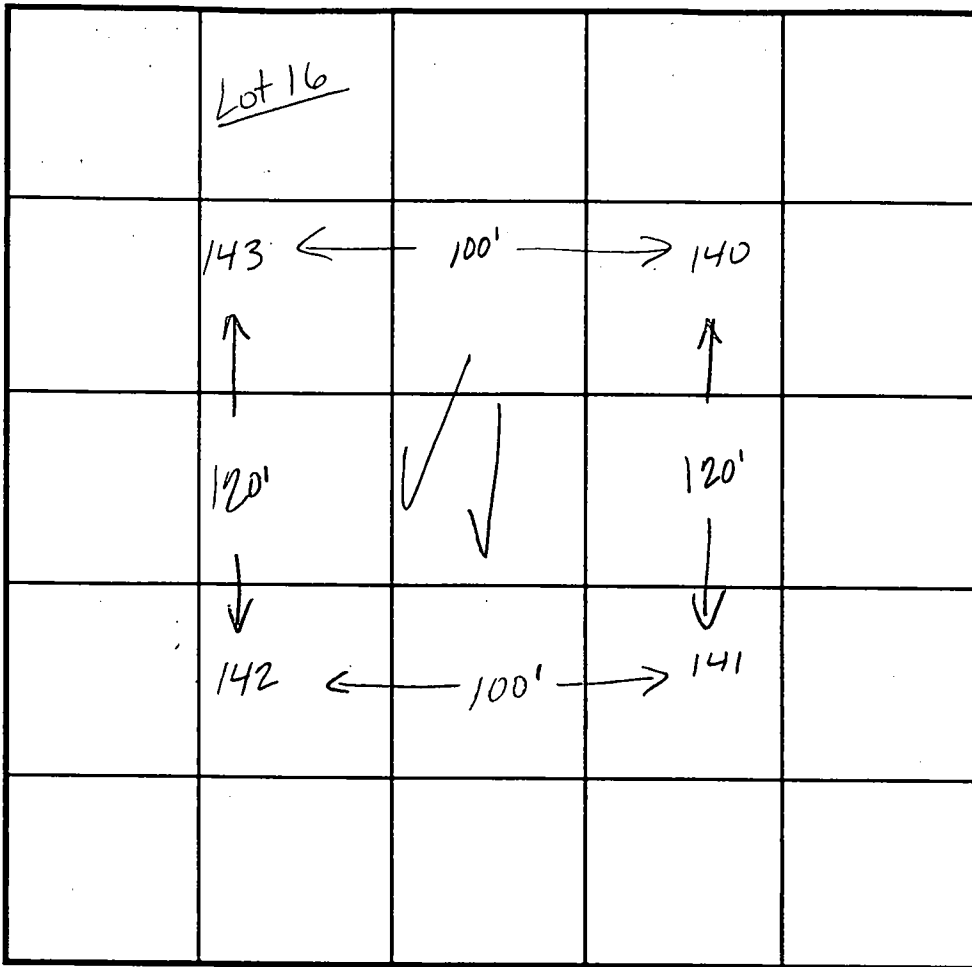
Orange Clay 1m
orange brown Si clm
Mica flees
15% Shale frags

141

Same as test hole # 140

142

Same as test hole # 140



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE
143

orange Cl 1m
tan/orange Si clm
mica flakes
10% Shale frags

3.5'

11'

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8/24/98	140	3.0'S	12:02 ₁₀	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			
	142	3.0'S	12:14 ₂₀	12:15 ₅₀	12:15 ₅₀	12:17 ₅₀	2min
		12.0'D	Visual	ok - see profile			
	143	3.5'	12:05 ₄₀	12:06 ₅₀	12:06 ₅₀	12:08 ₅₀	2min
		11.0'D	Visual	ok - see profile			

REMARKS test holes staked by surveyor

TYPE OF SOIL

TESTED BY Kim Maiste

ALSO PRESENT Tim Feaga

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 2-3 minutes

TRENCH WIDTH

INLET DEPTH

MAXIMUM BOTTOM DEPTH

SQ. FT/BEDROOM

180

APPLICATION

PERCOLATION TESTING

A 510571P

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. 165

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 _____

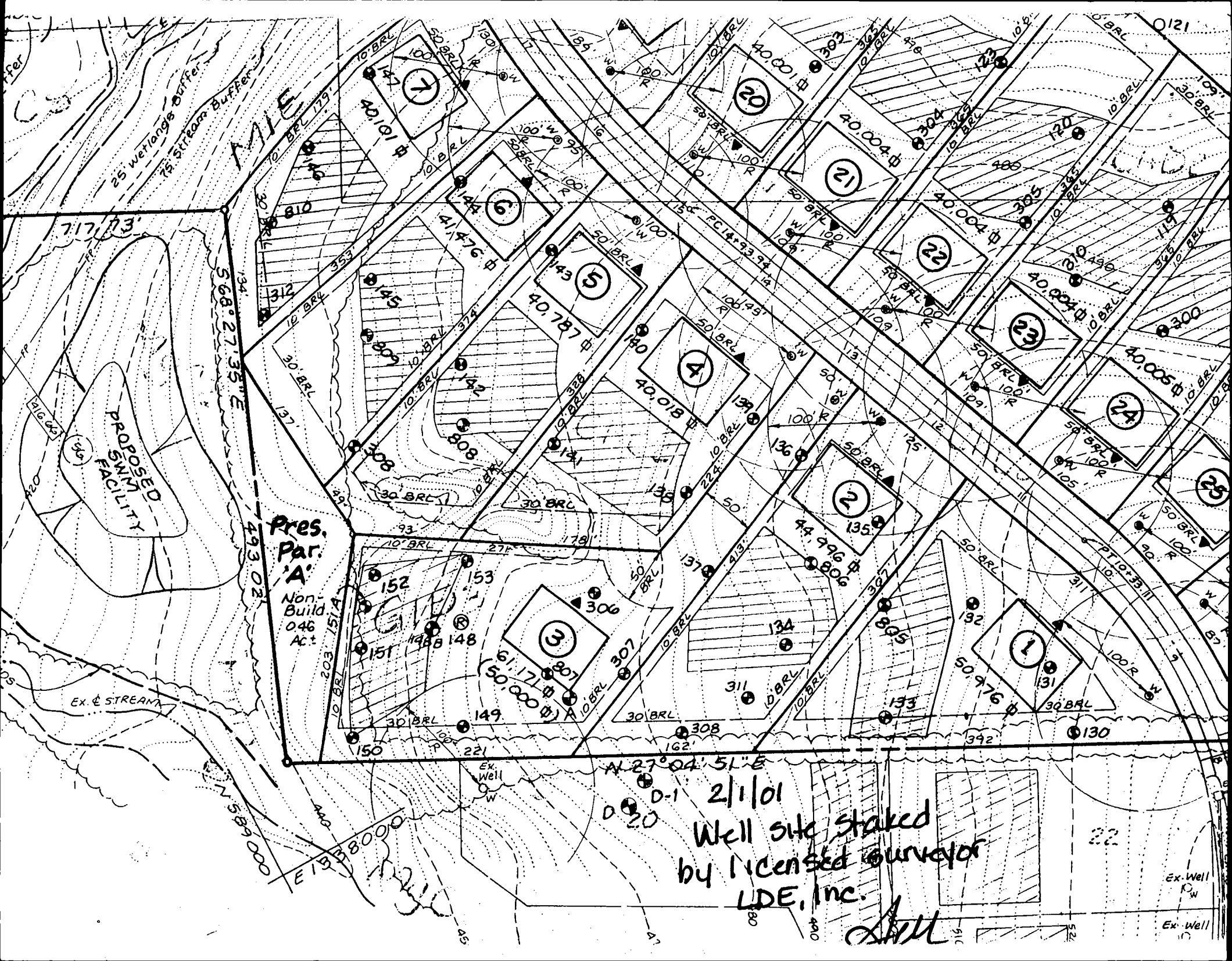
HOLD PENDING FURTHER TESTS _____

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



Pres. Par. A
 Non-Build
 0.46
 Ac.

PROPOSED
 FACILITY

Well site staked
 by licensed surveyor
 LDE, Inc.

AM

717.73'

568°27'35"E

493.02'

A 27°04'51"E

EX. STREAM

N 58°40'00"

E 15°38'00"

Ex. Well P.W.

Ex. Well

0121

22

25

24

23

22

21

20

4

5

6

7

3

1

152

151

148

148

153

307

306

308

311

134

806

805

133

131

130

105

100

109

119

300

146

120

395

486

120

395

120

395

120

395

120

395

120

395

108

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108

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108

108

108

108

108

COUNTY #

SOIL PROFILE

808

0' dark red Siclm

3.0

1qt or SalM
gravelly
20%
Rx

2.0

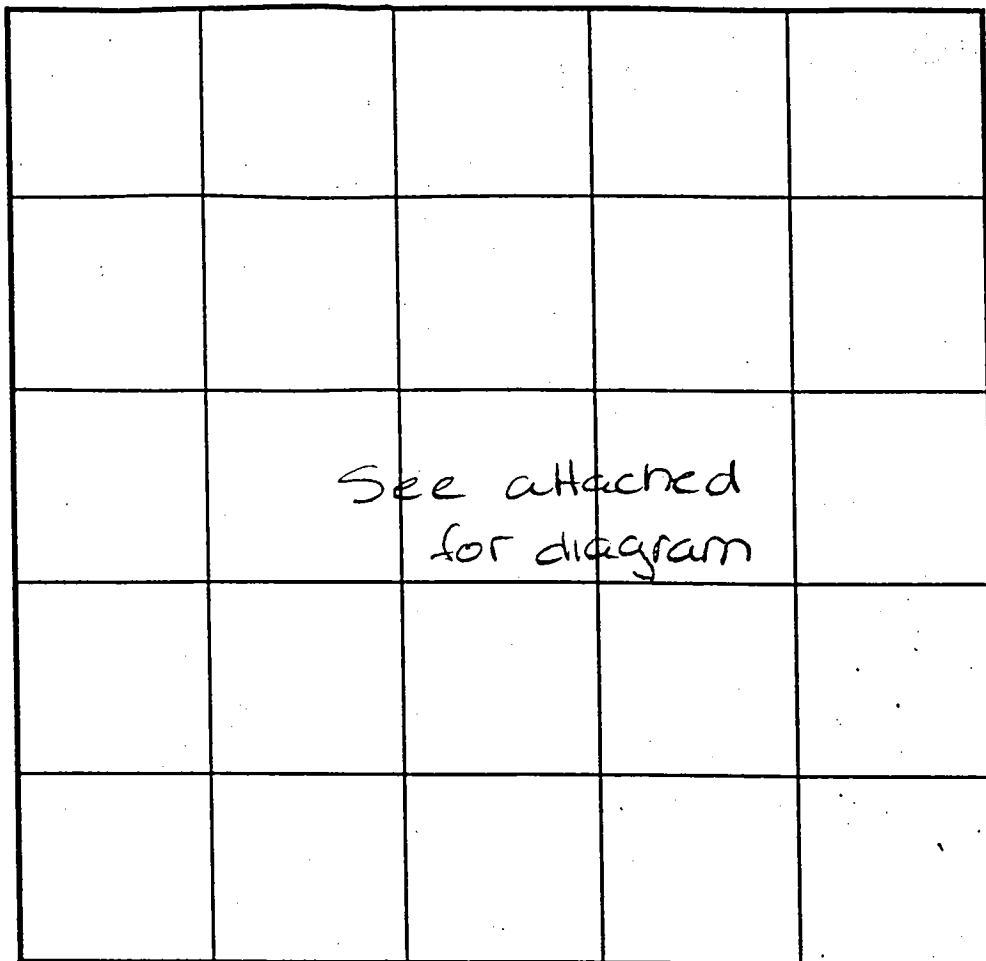
809

0' dark brown Siclm

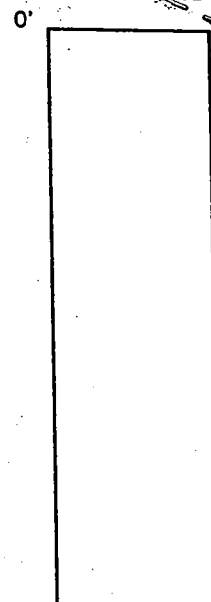
1.0

grey brown SalM
30%
mica
shale

2.0



SOIL PRGEILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11-8-99	808	Visual	to 12.0	- see profile			OK
	809	Visual	to 12.0	see profile			OK

REMARKS _____

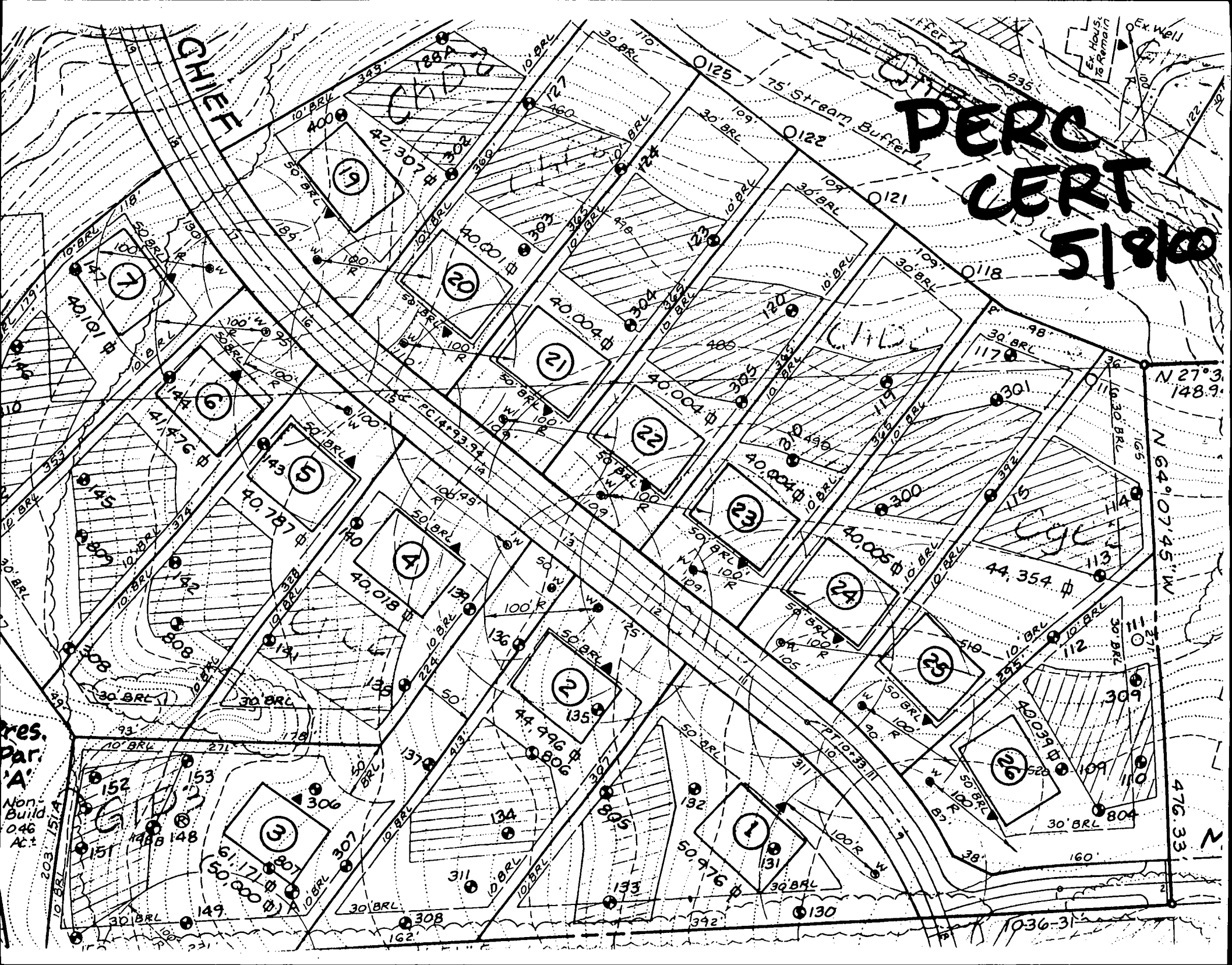
TYPE OF SOIL _____

TESTED BY Amy McMillen ALSO PRESENT Tim Feaga

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT/BEDROOM _____

**PERC
CERT
5/8/00**



res.
par.
'A'
Non-
Build
0.46
Ac±

N 27° 31' 148.9'

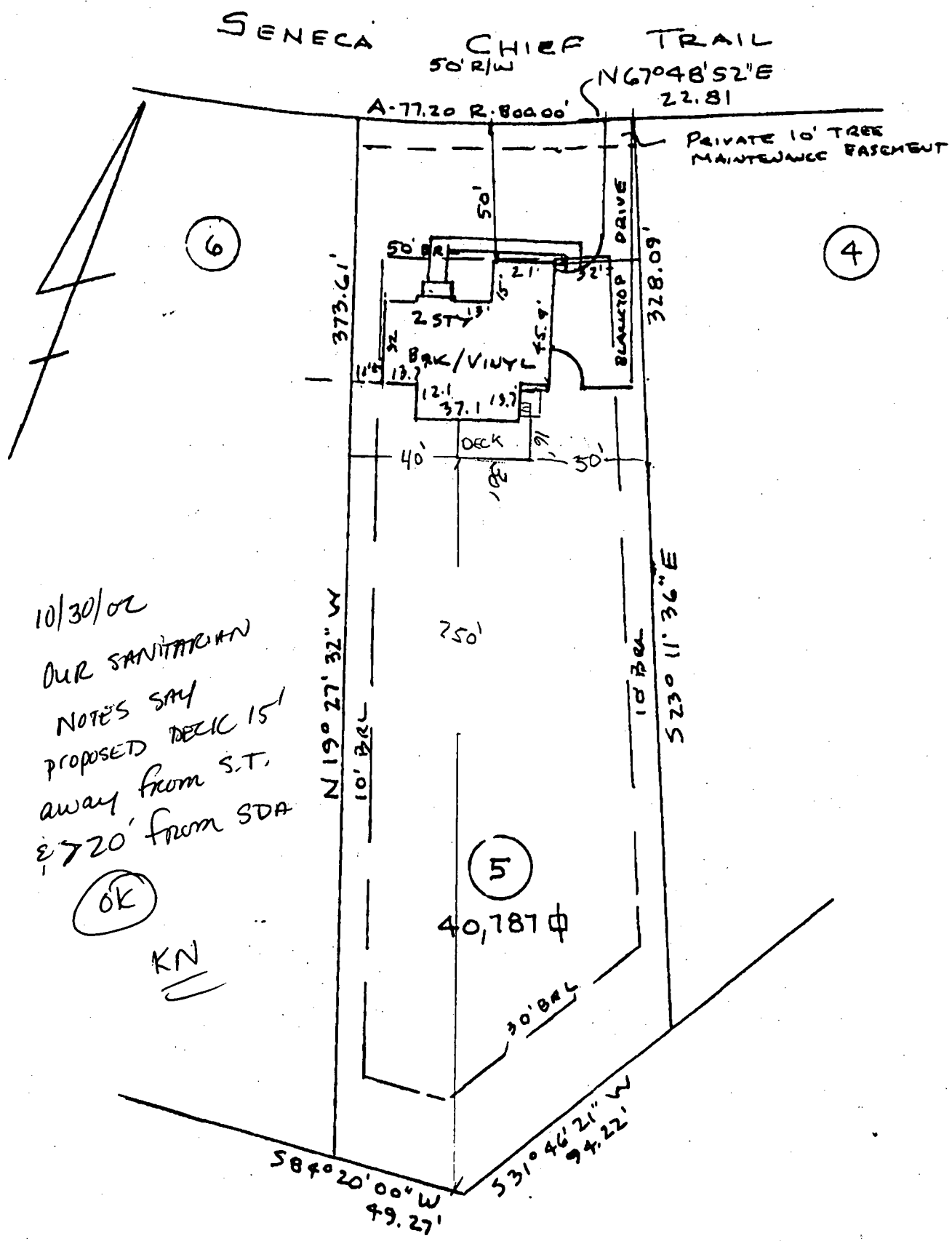
N 64° 07' 45" W

476.33

1036-31

PROPERTY KNOWN AS: LOT 5
 BRANTWOOD SEC THREE
 AREA ONE PLAT 14876
 3RD ELEC. DIST HOWARD Co., MD.

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



10/30/02
 OUR SANITARIAN
 NOTES SAY
 PROPOSED DECK 15'
 AWAY FROM S.T.
 & 720' FROM SDA

OK

KN

LOCATION DRAWING

FINAL 7/17/02
 TOP OF WALL ELEV 415.3'

CERTIFICATION	SEAL	SCALE 1" = 50'	DATE 5/30/02
<p>This is to certify that I have surveyed the property known as: <u>LOT 5</u> <u>SENECA CHIEF TRAIL - BRANTWOOD</u></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>LDE Inc. 9250 Rumsey Road Suite 106 Columbia, Maryland 21045</p> <p>(410) 715-1070 (Balt.) (301) 596-3424 (Wash.) (410) 715-9540 (Fax)</p>	

OUR RECORDS SM 3095

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3430 COURT HOUSE DRIVE ELLICOTT CITY, MD 21043 PERMITS (410)313-2455 INSPECTIONS (410)313-1810 AUTOMATED INFORMATION (410) 313-3800	HOWARD COUNTY PERMIT APPLICATION	PERMIT NUMBER B00139124
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Building Address 3055 SENECA CHIEF TRAIL
ELLICOTT CITY MD 21042

Suite/Apt. #: _____ SDP/WP/Petition #: _____

Census Tract 60300 Subdivision BRANTWOOD

Section 3 Area 1 Lot 5

Tax Map 16 Parcel 411 Grid 21

Zoning UC-300 Map Coordinates 1146 Lot size _____

Property Owner's Name BRIAN + TERI STAHL

Address SALE

City _____ State _____ Zip Code _____

Home Phone 410-585-835 Work Phone _____

Applicant's Name & Mailing Address, (if other than stated hereon): _____

Phone _____ Fax _____

Existing Use SFD

Proposed Use deck

Estimated Construction Cost \$ 7,160

Description of Work Build deck with steps to grade and 6'x10' landing at grade

Contractor Company COSENTINA, INC.

Contact Person 3 BENJAMIN WAY

Address ELLICOTT CITY, MD 21043

PHONE: (410) 418-4467

City _____ State _____ Zip Code _____

License No. 49471

Phone 410 418 4467 Fax 410 418 4466

Occupant or Tenant Owner

Contact Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Engineer or Architect Company N/A

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL	BUILDING DESCRIPTION - RESIDENTIAL
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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: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <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: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
1st floor: _____	Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
2nd floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: _____	Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms: _____	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other: _____
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	

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 PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature Susan J. Kettalaha
 Title/Company Vice President COSENTINA, INC

Print Name SUSAN J. KETTALAHA
 Date 10-30-02

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

FOR OFFICE USE ONLY			PROPERTY ID# <u>54068</u>
AGENCY	DATE	SIGNATURE/APPROVAL	DPZ SETBACK INFORMATION
Land Development DPZ			Front: _____
State Highways			Rear: _____
Building Official			Side: _____
Dev. Engineering DPZ			Side St: _____
Health	<u>10/30/02</u>	<u>Kate Arroyo</u>	All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>
Fire Protection			Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>
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"/>
CONTINGENCY CONSTRUCTION START <input type="checkbox"/>			Lot Coverage for New Town Zone _____
ONE STOP SHOP <input type="checkbox"/>			SDP/Red-line approval date _____
Distribution of Copies - White: Building Official - Green: LDD, DPZ - Yellow: DED, DPZ - Pink: Health - Gold: SHA			Accepted by _____
T:\forms\PERMIT-FRM			Rev. 5/17/00