

INDEXED

PERMIT
SEWAGE DISPOSAL SYSTEM
HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
410-313-2640

P _____
A 513203

ISSUE DATE _____

APPROVAL DATE _____

RPS# 296342

IS PERMITTED TO INSTALL _____ ALTER _____

ADDRESS _____ PHONE _____

SUBDIVISION _____ LOT NUMBER _____ ADDRESS 13600 Frederick Rd

PROPERTY OWNER John Gorzo **BUILDING PERMIT SIGNED**

SEPTIC TANK CAPACITY _____ GALLONS **AND RETURNED**

PUMP CHAMBER CAPACITY _____ GALLONS 8/25/04 802148018 - DETACHED 2 CAR GARAGE

NUMBER OF BEDROOMS _____

SQUARE FEET PER BEDROOM _____

LINEAR FEET OF TRENCH REQUIRED _____

TRENCHES: Trenches to be _____ feet wide. Inlet _____ feet below original grade. Bottom maximum depth _____ feet below original grade. _____ feet of stone below distribution box.

LOCATION: _____

PLANS APPROVED _____ DATE _____

PERMIT VOID AFTER 2 YEARS

NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS

NOTE: TOP OF SEPTIC TANKS ARE TO BE NO DEEPER THAN 3.0 FEET BELOW FINISH GRADE

NOTE: WATERTIGHT SEPTIC TANKS REQUIRED

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS, 90° ELBOWS ARE NOT ACCEPTABLE

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX, DRAINFIELDS) TO BE 100 FEET FROM ANY WATER WELL UNLESS OTHERWISE SPECIFICALLY AUTHORIZED

NOTE: NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH UNLESS SPECIFICALLY AUTHORIZED

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS

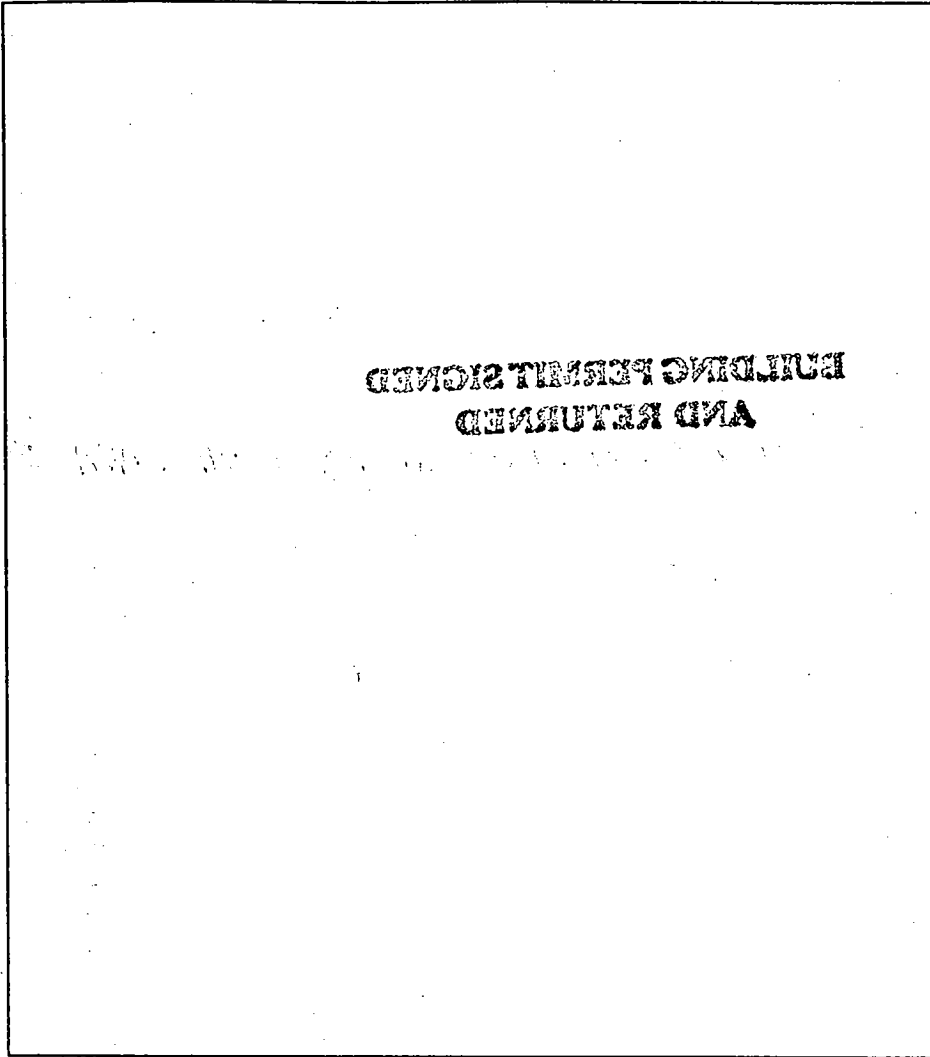
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

NOTE: IF PUMPED SEPTIC SYSTEM REQUIRED, (1) SEPTIC PUMP DETAIL TO BE PROVIDED BY INSTALLER PRIOR TO ISSUANCE OF SEPTIC PERMIT (2) PUMP PERFORMANCE TEST IS NECESSARY PRIOR TO HEALTH DEPARTMENT APPROVAL OF SEPTIC 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
CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

19513203

NOT TO SCALE



TRENCH DATA

TRENCH WIDTH _____

TRENCH INLET DEPTH _____

TRENCH BOTTOM DEPTH _____

DEPTH OF STONE _____

NUMBER OF TRENCHES _____

TOTAL TRENCH LENGTH _____

ABSORBENT AREA _____

DISTRIBUTION BOX LEVEL _____

BAFFLE IN DISTRIBUTION BOX _____

SEPTIC TANK DATA

SEPTIC TANK _____ GALLONS

MANHOLE RISER _____

6 INCH INSPECTION PORT _____

PUMP CHAMBER DATA

PUMP CHAMBER
GALLONS _____

MANHOLE RISER _____

ALARM _____

PUMP PERFORMANCE TEST _____

PRE-CONSTRUCTION INSPECTION: _____

INSPECTION COMMENTS: _____

INSPECTOR _____ DATE SYSTEM APPROVED _____

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

150022191

Building Address 13600 Frederick Rd
West Friendship, Md 21794
Suite/Apt. #: _____ SDP/WP/Petition #: _____
Census Tract _____ Subdivision _____
Section _____ Area _____ Lot _____
Tax Map 15 Parcel 109 Grid 1
Zoning RCDP Map Coordinates 9H1 Lot size _____

Property Owner's Name Mr & Mrs John G 0920
Address 13600 Frederick Rd
City West Friendship State MD Zip Code 21794
Home Phone 410-412-5911 Work Phone _____
Applicant's Name & Mailing Address, (if other than stated hereon):

Phone _____ Fax _____

Existing Use Single Family Res
Proposed Use _____
Estimated Construction Cost \$ 5000
Description of Work Remove existing concrete slab and install new concrete slab

Contractor Company W.R. Becker LLC
Contact Person Bill Becker
Address 15300 Carrs Mill Rd
City Wheatline State MD Zip Code 21797
License No. 33072
Phone 410-5735 Fax 410-412-5950

Occupant or Tenant owner
Contact Name _____
Address _____
City _____ State _____ Zip Code _____
Phone _____ Fax _____

Engineer or Architect Company _____
Contact Person NONE
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: 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: <input type="checkbox"/> N/A <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1st floor: _____ 2nd floor: _____ Basement: _____ Finished Basement <input type="checkbox"/> Unfinished Basement <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 type="checkbox"/> Public <input checked="" type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: Electric <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Natural Gas <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 THERE TO; (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 _____
Title/Company _____

Print Name William R Becker
Date 1/20/00

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

AGENCY	DATE	SIGNATURE APPROVAL
<input checked="" type="checkbox"/> Land Development DPZ		
<input checked="" type="checkbox"/> State Highways		
<input checked="" type="checkbox"/> Building Official		
<input checked="" type="checkbox"/> Dev. Engineering DPZ	<u>1/20/00</u>	<u>A McMiller</u>
<input checked="" type="checkbox"/> Health		
<input checked="" type="checkbox"/> Fire Protection		

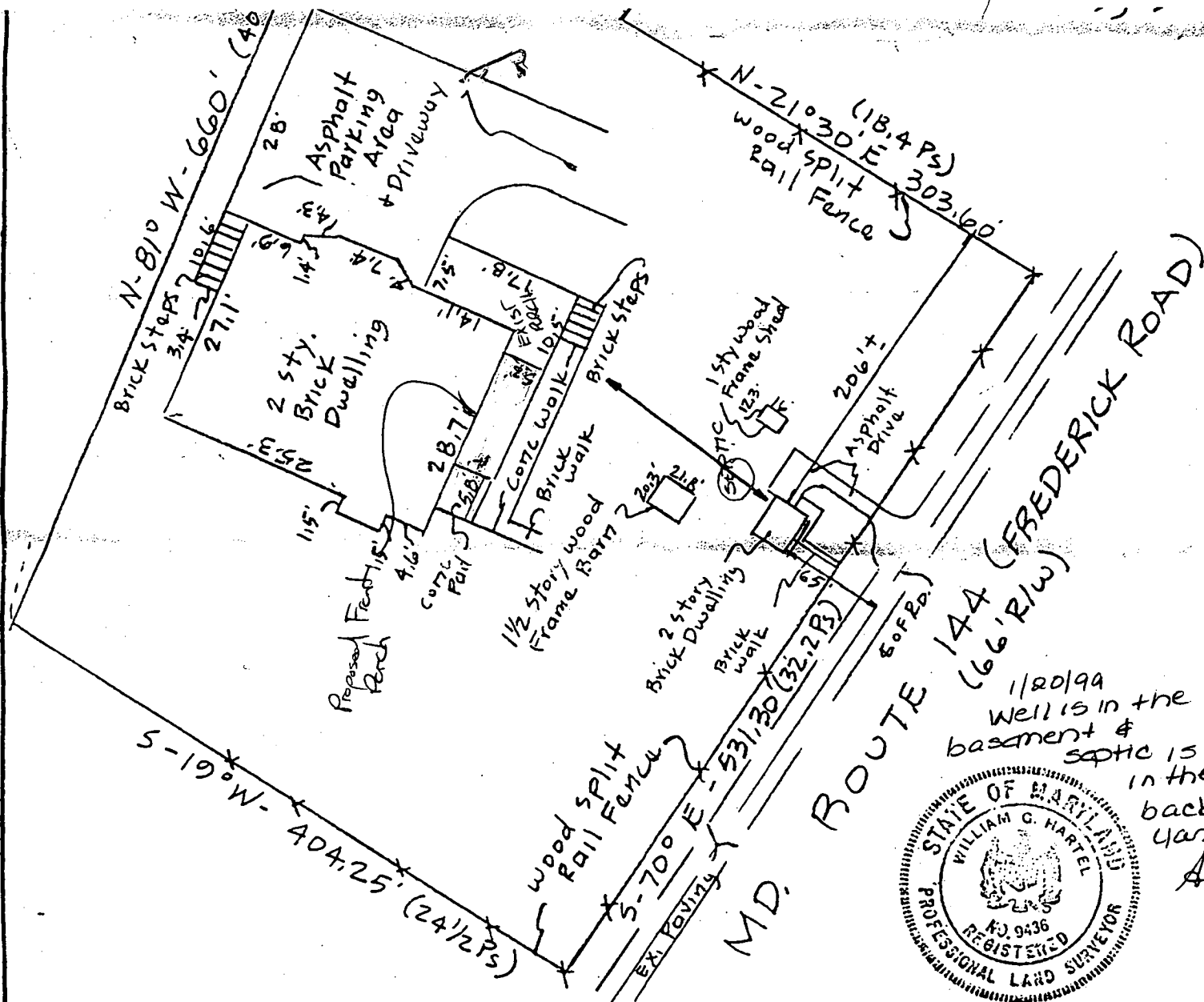
DPZ SETBACK INFORMATION
Front: _____
Rear: _____
Side: _____
Side St.: _____
All minimum setbacks met? YES NO
Is Entrance Permit required? YES NO
Historic District? YES NO
Lot Coverage for NewTown Zone _____
SDP/Red-line approval date _____

PROPERTY ID# 20677
Filing fee \$ _____
Permit fee \$ _____
Excise tax \$ _____
Sub-total paid \$ _____
Add'l permit fee \$ _____
TOTAL FEES \$ _____
Balance due \$ _____
Check # 6641
Validation # 22380

Is Sediment Control approval required prior to issuance?
YES NO
CONTINGENCY CONSTRUCTION START:
ONE STOP SHOP:

Accepted by _____

Distribution of Copies: White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA



Dead Reference - Liber 1099 Folio 179

TITLE LOCATION SURVEY					THIS IS TO CERTIFY THAT WE HAVE CONDUCTED A LOCATION SURVEY OF THE IMPROVEMENTS AND THAT THEY ARE LOCATED AS SHOWN HEREON. <i>William G. Hartel</i> SIGNATURE	
PROJECT 13600 FREDERICK ROAD					REG. NO. 9436 DATE 4-18-86	
LOCATION 3RD ELECTION DISTRICT, HOWARD CO., MD.					boender associates inc. consulting engineers land surveyors land planners COURT HOUSE SQUARE • ELLICOTT CITY, MD. 21043 (301) 465-7777	
FIELD BOOK	PAGE NO.	DRAWN BY:	CHECKED BY	DATE:		
—	—	BH	—	7-31-85		
SCALE: 1" = 100'			JOB NO.: 85207			
THE INFORMATION ON THIS PLAT SHOWS ONLY THAT THE IMPROVEMENTS INDICATED HEREON ARE CONTAINED WITHIN THE CONFINES OF THE LOT UPON WHICH THEY ARE ERECTED. THIS PLAT IS NOT TO BE CONSTRUED AS, OR USED FOR THE ESTABLISHMENT OF PROPERTY LINES.						

APPLICATION

HOWARD COUNTY

PERMIT APPLICATION

DEPARTMENT OF INSPECTIONS, LICENSES & PERMIT
3430 COURT HOUSE DRIVE, ELLICOTT CITY, MARYLAND 21043

SERIAL NUMBER

Health
B0012825

BUILDING ADDRESS (HOUSE NO., STREET, TOWN OR AREA)
13600 Frederick Road
West Friendship, Md 21794

GRADING/SEDIMENT CONTROL YES NO SDP #

DESCRIPTION OF WORK AUTHORIZED
29x20' 2 story Addition w/ Full Bsmt
Includes new Kitchen + Nook on 1st
Floor and New Master Bath and Bedroom
on 2nd Floor

LOT NO.	PARCEL NO.	SEC.	AREA	BLOCK NO.	LIBER	FOLIO
N/A	121	-	-	1	-	-
SUB DIVISION		ZONE	ZONE MAP	ELEC. DIST.	CENSUS TR.	
N/A		RC-Dep	15	3rd	6230	

OWNER NAME AND ADDRESS
Mr. & Mrs. John Gorzo
13600 Frederick Rd
West Friendship, Md 21794
PHONE NO. 410-992-8941

SIZE OF BLDG.	FRONT	DEPTH	HEIGHT
	28	30	26'

OCCUPANT'S NAME AND ADDRESS
SAME AS ABOVE
PHONE NO.

TYPE OF BLDG.	AREA	VOLUME	ROOF
B. ROOMS ROOMS BATHS FIREPLACES			

ARCHITECT OR ENGINEER'S NAME AND ADDRESS
NONE
PHONE NO.

FOOTINGS	FOUNDATION	S. WALLS
CONCRETE	CMU	FRAME

CONTRACTOR'S NAME AND ADDRESS
W.R. BECKER TCO
15300 CARRS MILL RD
WOODBINE, MD, 21797
PHONE NO. 410-442-5733

UTILITIES				
WATER/WELL	SEWER/SEPTIC	GAS	ELECTRICITY	TYPE OF HEAT
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	HWB/B

I have carefully examined and read this application and know the same is true and correct, and that is doing this work, all provisions of Howard County Ordinances and the State Laws of Maryland will be complied with, whether specified or not; and I will notify the Department of Inspections, and Permits twenty-four hours in advance when I am ready for the inspections called for elsewhere in the application, and that no work will be covered up until such inspections have been completed with.

EXISTING USE
SFD
PROPOSED USE
SFD w/ Kitchen Bedroom Add

SIGNATURE
Contractor
TITLE
7/8/98
DATE

EST. CONSTRUCTION COST
\$60,000
LICENSE NUMBER
33072
PERMIT FEE

FOR OFFICE USE ONLY

DISTRICT IN FEET FROM R/W LINE TO FRONT BUILDING LINE _____
SIDE YARD _____
(DISTANCE IN FEET FROM SIDE BLDG. LINE TO SIDE PROPERTY LINE)
TO SIDE BUILDING LINE _____
DISTANCE IN FEET, REAR YD. REQUIRING SET
BACK _____ (CORNER LOT ONLY) _____
SDP # _____
Check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING		
SHA		
SEDIMENT/GRADING		
BUILDING OFFICIAL		
WATER & SEWER		
HEALTH DEPT.	7/16/98	J.M. McMillan
FIRE PROTECTION		
STORM WATER MGM		

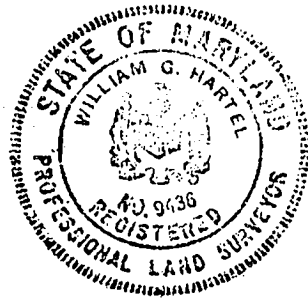
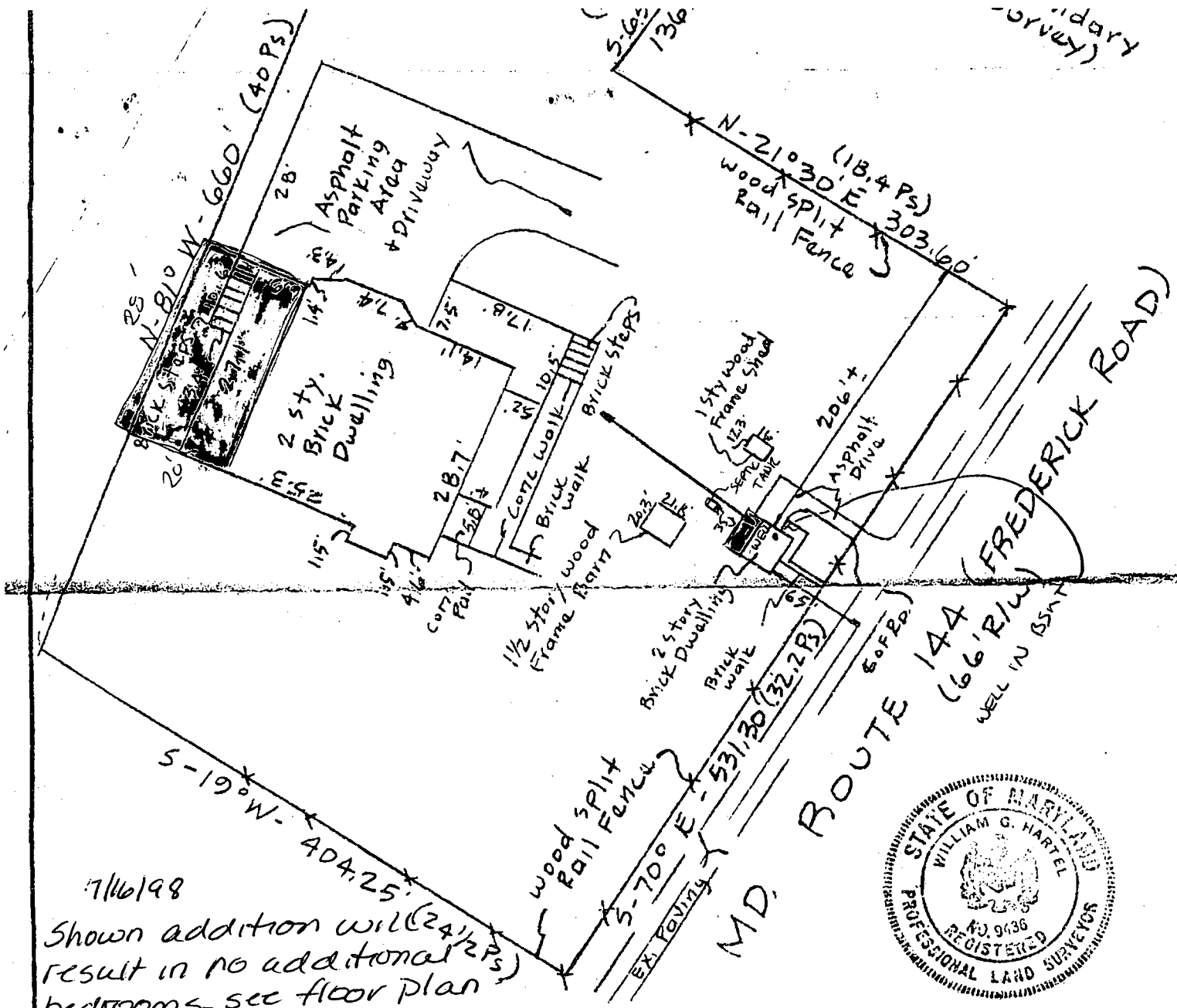
CAUTION
To begin construction before a permit placard has been issued and displayed on the job is a violation of the law.
Use and occupancy permit must be applied for two weeks before it will be issued.

IMPORTANT: PLEASE SHOW ZIP CODES AND AREA CODES WHEREVER REQUIRED.

LP-69-591
CR 3746

APPROVED _____ DATE _____
Distribution of Copies:
White - Building Official
Green - Planning & Zoning
Yellow - Engineering
Pink - Health Dept.
Gold - S.H.A.

A



7/16/98
 Shown addition will (24)
 result in no additional (2 Ps)
 bedrooms see floor plan
 OK to proceed
 AUC

Deed Reference - Liber 1099 Folio 179

TITLE LOCATION SURVEY				
PROJECT 13600 FREDERICK ROAD				
LOCATION 3RD ELECTION DISTRICT, HOWARD CO., MD.				
FIELD BOOK —	PAGE NO. —	DRAWN BY: BHT	CHECKED BY —	DATE: 7-31-85
SCALE: 1" = 100'			JOB NO.: 85207	
THE INFORMATION ON THIS PLAT SHOWS ONLY THAT THE IMPROVEMENTS INDICATED HEREON ARE CONTAINED WITHIN THE CONFINES OF THE LOT UPON WHICH THEY ARE ERECTED. THIS PLAT IS NOT TO BE CONSTRUED AS, OR USED FOR THE ESTABLISHMENT OF PROPERTY LINES.				

THIS IS TO CERTIFY THAT WE HAVE CONDUCTED A LOCATION SURVEY OF THE IMPROVEMENTS AND THAT THEY ARE LOCATED AS SHOWN HEREON.
 William G. Hartel
 SIGNATURE
 REG. NO. 9436 DATE 4-18-86

boender associates
 inc.
 consulting engineers
 land surveyors
 land planners
 COURT HOUSE SQUARE • ELLICOTT CITY, MD. 21043
 (301) 465-7777

SEPTIC SPECIFICATIONS WORK-SHEET

SUBDIVISION: N/A A 520371

STREET NAME: 13600 Fred. Rd (Rt 144) LOT NUMBER: N/A

AVERAGE PERCOLATION RATE: 12 SQUARE FEET PER BEDROOM: 210

NUMBER OF BEDROOMS: ^{AS OF} 2004 - NO 4 LINEAR FEET OF TRENCH PER BEDROOM:
_{Plans to add more}

TOTAL LINEAR FEET OF TRENCH: SEPTIC TANK CAPACITY: ?

TOP SEAMED TANK REQUIRED? YES NO New Cleanout exists

COMPARTMENTED TANK REQUIRED? YES NO $\frac{4 \times 210}{3} \times 36 = 100$

TRENCH DIMENSIONS: Trench to be 3 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 8 feet below original grade.

Effective area begins at 3' feet below original grade. 5' feet of stone below distribution pipe. TOTAL of 100' linear trench

===== PUMPED SYSTEM PROPOSED: (YES) NO =====

PUMPED SEPTIC SYSTEM DETAIL: 1250 gallon pump chamber.

YES NO Top seamed pump chamber required?

Note 1: Septic pump detail to be provided by installer prior to issuance of septic permit.

Note 2: Pump performance test is necessary prior to Health Department approval of pumped septic system.

===== LOCATION: SEE DRAWINGS =====

ADDITIONAL NOTES: Existing system functioning - location not known - IN Glenelg soils

Reviewer: _____

Date: _____



Howard County
Health Department

APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) 5/24/04 TEST TIME 9:00 AP 520371
 AGENCY REVIEW: _____ DATE 5/20/2004

DO NOT WRITE ABOVE THIS LINE

I HEREBY APPLY FOR THE NECESSARY TESTING/EVALUATION PRIOR TO ISSUANCE OF SEWAGE DISPOSAL SYSTEM PERMIT(S) TO:

CHECK AS NEEDED:

- CONSTRUCT NEW SEPTIC SYSTEM(S)
- REPAIR/ADD TO AN EXISTING SEPTIC SYSTEM
- REPLACE AN EXISTING SEPTIC SYSTEM

CHECK AS NEEDED:

- NEW STRUCTURE(S)
- ADDITION TO AN EXISTING STRUCTURE
- REPLACE AN EXISTING STRUCTURE

CHECK ONE:

- CREATE NEW LOT(S)
- BUILD ON AN EXISTING LOT IN A SUBDIVISION
- BUILD ON AN EXISTING PARCEL OF RECORD

IS THE PROPERTY WITHIN 2500' OF ANY RESERVOIR?

- YES
- NO

THE TYPE OF STRUCTURE IS:

- RESIDENTIAL WITH _____ PROPOSED BEDROOMS IN THE COMPLETED STRUCTURE (NOTE *UNKNOWN* IF APPROPRIATE)
- COMMERCIAL (PROVIDE DETAIL OF NUMBERS AND TYPES OF EMPLOYEES/ CUSTOMERS ON ACCOMPANYING PLAN)
- INSTITUTIONAL/GOVERNMENT (PROVIDE DETAIL OF NUMBERS AND TYPES OF EMPLOYEES/USERS ON ACCOMPANYING PLAN)

PROPERTY OWNER(S) John J. Gorzo
 DAYTIME PHONE 410-489-9695 CELL 410 707 6375 FAX 410 489 6762
 MAILING ADDRESS 13600 RT 144 West Friendship MD 21794
 STREET CITY/TOWN STATE ZIP

APPLICANT _____
 DAYTIME PHONE Same CELL _____ FAX _____
 MAILING ADDRESS _____
 STREET CITY/TOWN STATE ZIP

APPLICANT'S ROLE: DEVELOPER BUILDER BUYER RELATIVE/FRIEND REALTOR CONSULTANT

PROPERTY LOCATION OWNER
 SUBDIVISION/PROPERTY NAME _____ LOT NO. _____
 PROPERTY ADDRESS 13600 RT 144 West Friendship, MD 21794
 STREET TOWN/POST OFFICE

TAX MAP PAGE(S) _____ GRID _____ PARCEL(S) _____ PROPOSED LOT SIZE _____

AS APPLICANT, I UNDERSTAND THE FOLLOWING: THE SYSTEM INSTALLED SUBSEQUENT TO THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC SEWERAGE IS AVAILABLE. THIS APPLICATION IS COMPLETE WHEN ALL APPLICABLE FEES AND A SUITABLE SITE PLAN HAVE BEEN RECEIVED. I ACCEPT THE RESPONSIBILITY FOR COMPLIANCE WITH ALL M.O.S.H.A. AND "MISS UTILITY" REQUIREMENTS. APPROVAL IS BASED UPON SATISFACTORY REVIEW OF A PERC CERTIFICATION PLAN. TEST RESULTS WILL BE MAILED TO APPLICANT.

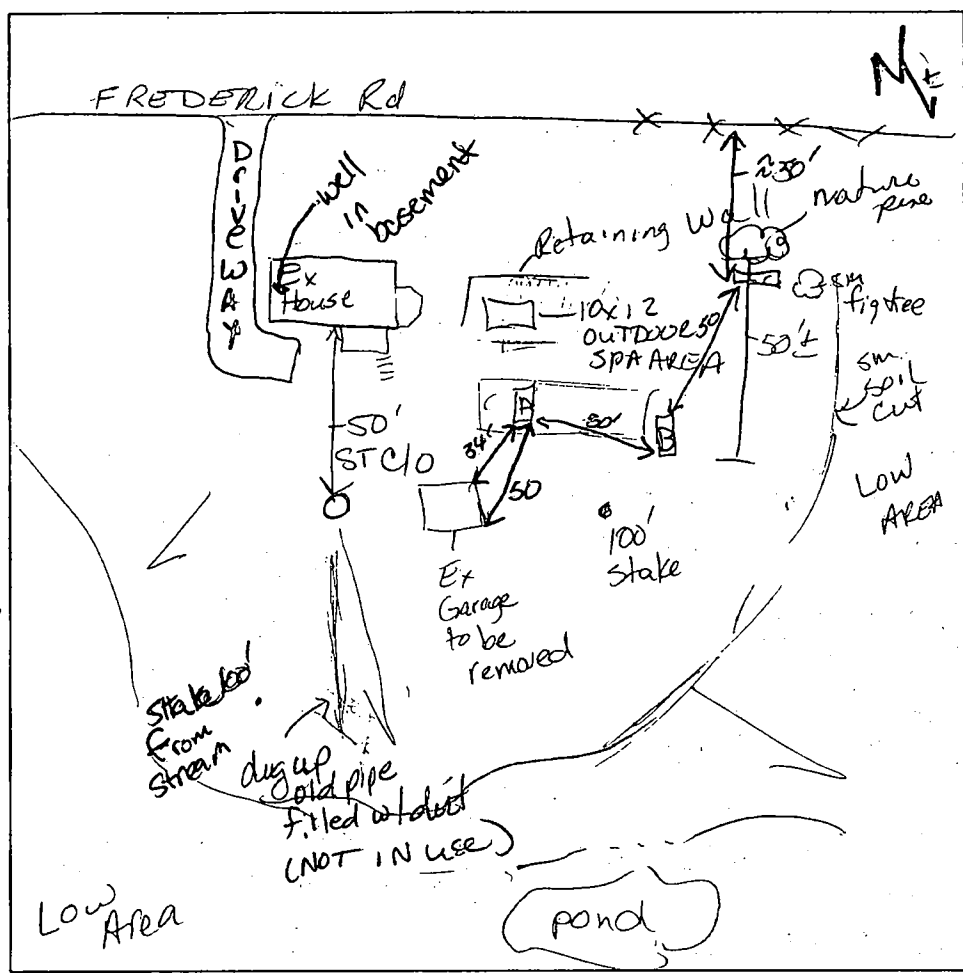
John J. Gorzo
 SIGNATURE OF APPLICANT

HOWARD COUNTY HEALTH DEPARTMENT, BUREAU OF ENVIRONMENTAL HEALTH, WELL AND SEPTIC PROGRAM
 3525-H ELLICOTT MILLS DRIVE, ELLICOTT CITY, MARYLAND 21043-4544 (410) 313-1771 FAX (410) 313-2648
 TDD (410) 313-2323 TOLL FREE 1-877-4MD-DHMH

(A)
Strong brn SL-C
? 1-3±
brn light brn fine-med or sand hard sap 10-15%

(B)
DK brn MUYSL
3'
brn med gr SAND single grain
wk platy structure sap
parent granite
hd sap/dite 10-15%
Bottom

(C)
DK brn L pockets
3'
org LS
SCL L balls - ribbon s 3/4"
SCL
sm Rock & hard sap 30%±
Bottom



DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2nd INCH	P/F/H
5/24/04	(A)	3'3" / 12 1/2' V				4 min	P
	(B)	4'5" / 13 1/2' V	9:26	9:30	9:38	8	P
TEST INTX ZONE	(C)	4' M / 12'	9:50	10:05	10:30	25	P
Minimal CLAY IN SOIL MOSTLY LSAND to Sand. Minimal Rock							

REMARKS Actual 144 in³ per holes
 SANITARIAN Kacie Noonan BACKHOE Roby OTHERS Mr. Gorzo & Bill Becker
 TEST HOLES USED IN SDA A-C AVG. PERC TIME 12 SQ. FT/BR 210
 TRENCH WIDTH 3 INLET DEPTH 3 MAX. BOT DEPTH B EFFECTIVE SW 5'

Health

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
 3430 COURT HOUSE DRIVE
 FREDERICK CITY, MD 21704
 PERMITS (410) 313-2456 INSPECTIONS (410) 313-1810
 AUTOMATED INFORMATION (410) 313-3000

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER
 B00148018 KN

Building Address 13600 Frederick Road West Friendship Md 21794

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

Census Tract 603000 Subdivision _____

Section _____ Area _____ Lot _____

Tax Map 15 Parcel 107 Grid A

Zoning RC100 Map Coordinates 9H1 Lot size 6.28 acres

Property Owner's Name Mrs Ms John Garzo

Address 13600 Frederick Rd

City West Friendship State MD Zip Code 21794

Home Phone 410-992-8941 Work Phone Same

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

Phone _____ Fax _____

Existing Use SFD

Proposed Use SFD w/ Detached Two Car Garage

Estimated Construction Cost \$ 40,000.00

Description of Work 28' x 22' Single Story Garage detached

Contractor Company W.R Becker LLC

Contact Person Bill Becker

Address 15300 Carls Mill Rd

City Woodbine State MD Zip Code 21797

License No. 35072

Phone 410-442-5737 Fax 410-442-5930

Occupant or Tenant OWNER

Contact Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Engineer or Architect Company NONE

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: _____ <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	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: <u>N/A</u> <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"/>	Water Supply: _____ <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
1st floor: _____ 2nd floor: _____ Basement: _____	Sewage Disposal: _____ <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/>	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
No. of Bedrooms: _____	Heating System: _____ <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <u>N/A</u> <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Sprinkler system: <u>N/A</u> <input checked="" type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other: _____
Other Structure: <u>GARAGE</u>	
Dimensions: <u>26 x 22</u>	
Footings: <u>Concrete</u>	
Roof: <u>FRAME</u>	
_____ State Certified Modular _____ 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 THERE TO, (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.

William R Becker
 Applicant's Signature
OWNER
 Title/Company

William R Becker
 Print Name
5/10/04
 Date

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

FOR OFFICE USE ONLY

AGENCY	DATE	SIGNATURE	APPROVAL
Land Development, DPZ			
State Highways			
Building Official			
Dev. Engineering, DPZ			
Health	<u>8/25/04</u>	<u>Renee Thomas</u>	
Fire Protection			

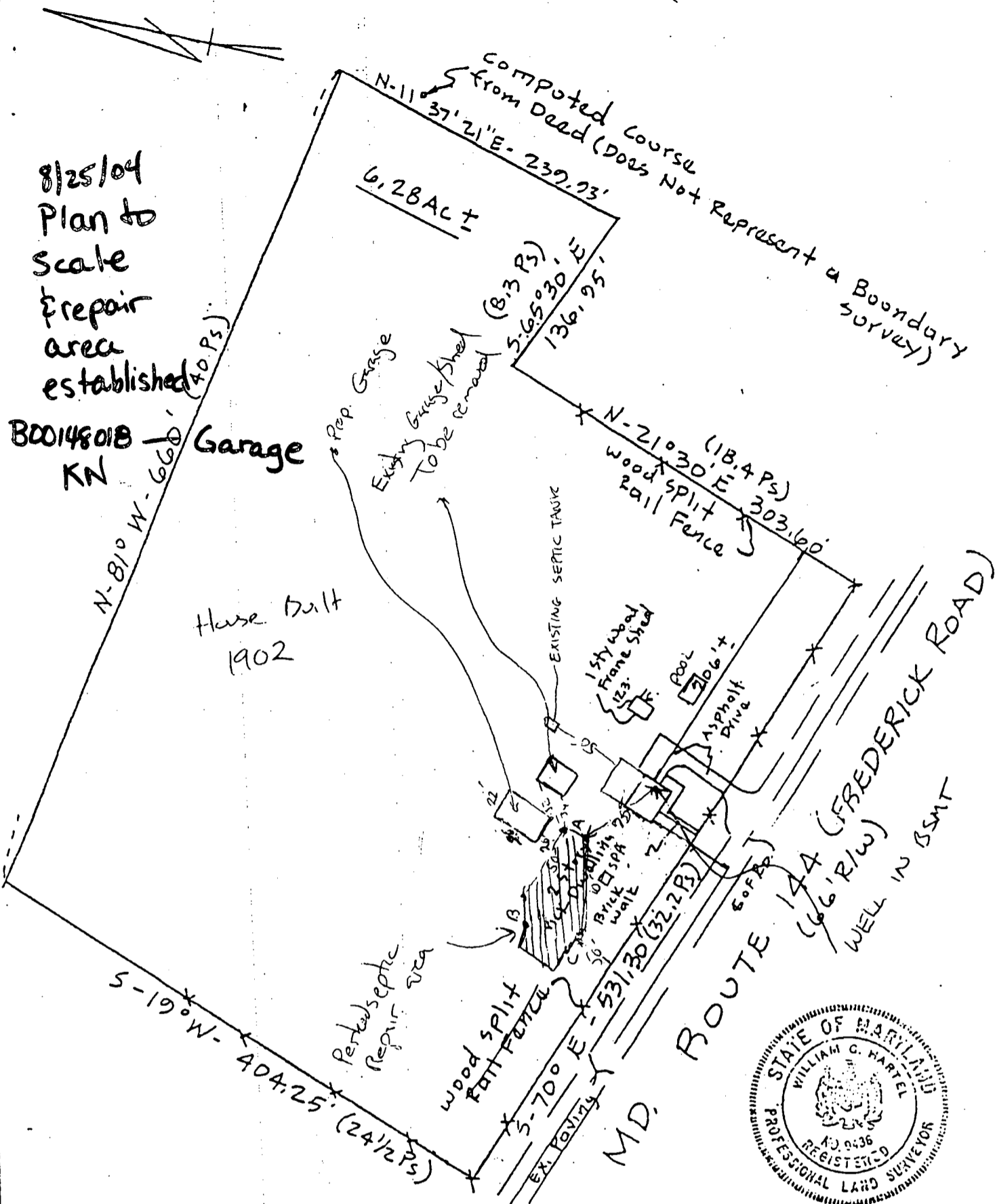
Is Sediment Control approval required prior to issuance?
 YES NO

CONTINGENCY CONSTRUCTION START

ONE STOP SHOP

DPZ SETBACK INFORMATION	PROPERTY ID#
Front: _____	<u>36633</u>
Rear: _____	Filing fee \$ <u>25</u>
Side: _____	Permit fee \$ _____
Side St: _____	Excise tax \$ _____
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	Add'l per. fee \$ _____
Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Lot Coverage for New Town Zone _____	Balance due \$ _____
SDP/Red-line approval date _____	Check # <u>1726</u>
	Validation # <u>47464</u>

Accepted by RE

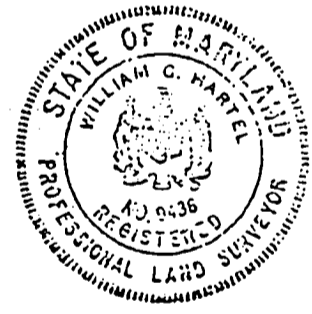


8/25/04
 Plan to
 Scale
 & repair
 area
 established

B00148018
 KN

Garage

House built
 1902



Deed Reference - Liber 1099 Folio 179

TITLE LOCATION SURVEY					THIS IS TO CERTIFY THAT WE HAVE CONDUCTED A LOCATION SURVEY OF THE IMPROVEMENT AND THAT THEY ARE LOCATED AS SHOWN HEREON.	
PROJECT 13600 FREDERICK ROAD					SIGNATURE <i>William G. Hartzel</i>	
LOCATION 3RD ELECTION DISTRICT, HOWARD CO., MD.					REG. NO. 9436 DATE 4-18-86	
FIELD BOOK	PAGE NO.	DRAWN BY:	CHECKED BY	DATE:	boender associates inc. consulting engineers land surveyors land planners COURT HOUSE SQUARE • ELICOTT CITY, MD. 21040 (301) 465-7777	
—	—	BTH	—	7-31-85		
SCALE: 1" = 100'			JOB NO.: 85207			
THE INFORMATION ON THIS PLAT SHOWS ONLY THAT THE IMPROVEMENTS INDICATED HEREON ARE CONTAINED WITHIN THE CONFINES OF THE LOT UPON WHICH THEY ARE ERECTED. THIS PLAT IS NOT TO BE CONSTRUED AS, OR USED FOR THE ESTABLISHMENT OF PROPERTY LINES.						

410-442-5930

5/13/04
 Plan to scale
 Limited Septic
 area avail.

Shown SDA
 recorded?

NEED PERC
 test
 \$22500

(KN)

NEED
 TO SHOW
 STREAM,
 POND,

N-81° W-660' (40 Ps)
 Pond
 Haze built
 1902

Baile soils
 2245'
 from Fred Road

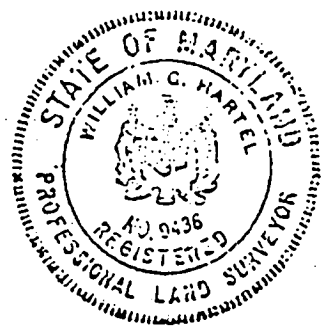
S-19° W-404.25' (24 1/2 Ps)
 230'
 wood split
 rail fence
 5-700' E
 EX. POVING



Septic Area

N-21° 30' E (18.4 Ps)
 303.160'
 Wood split
 Rail Fence

MD. ROUTE 144 (FREDERICK ROAD)
 66' R/W
 WELL IN SSMT



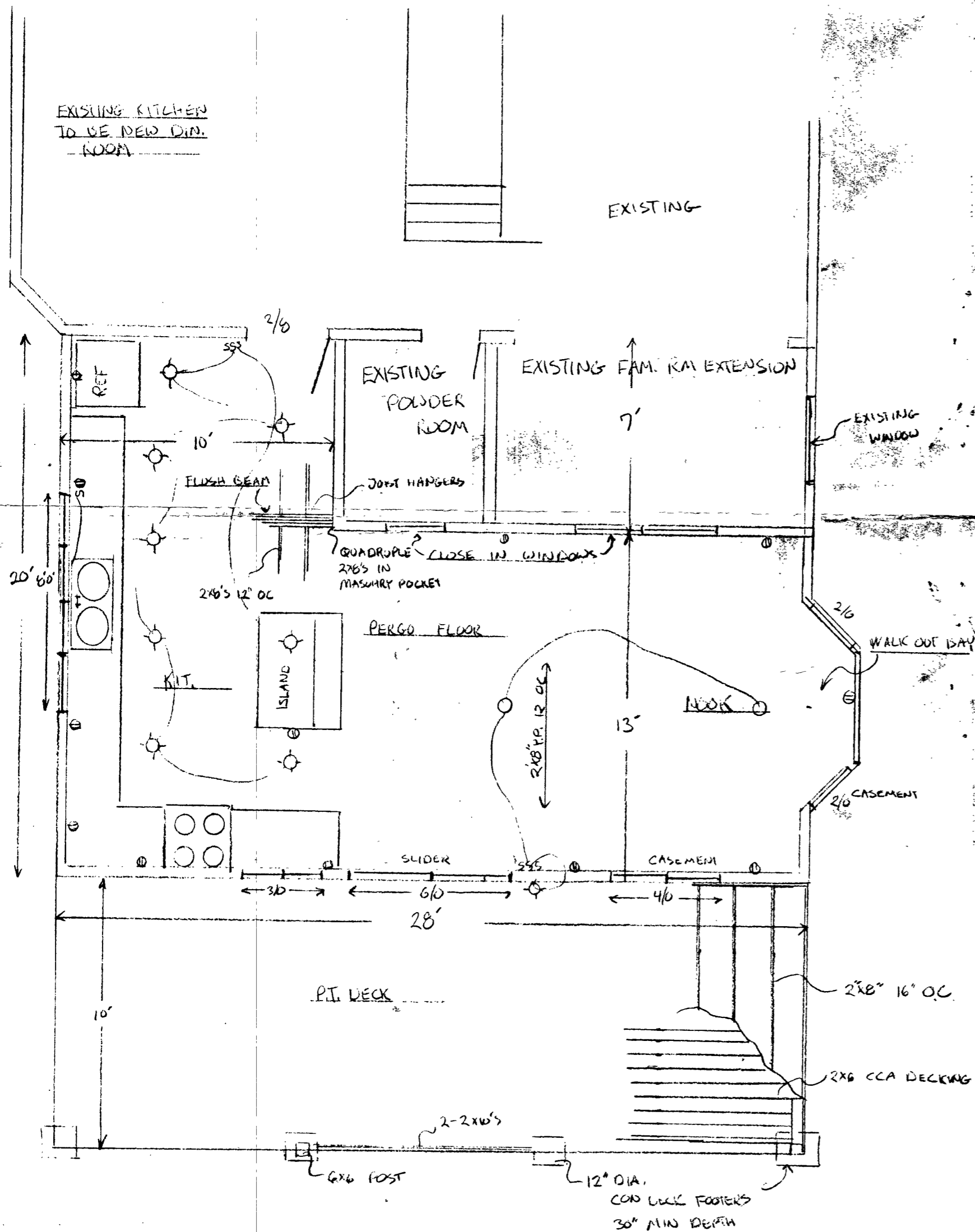
Deed Reference - Liber 1099 Folio 179

TITLE LOCATION SURVEY				
PROJECT 13600 FREDERICK ROAD				
LOCATION 3RD ELECTION DISTRICT, HOWARD CO., MD.				
FIELD BOOK	PAGE NO.	DRAWN BY:	CHECKED BY	DATE:
—	—	BTT	—	7-31-85
SCALE: 1" = 100'			JOB NO.: 85207	

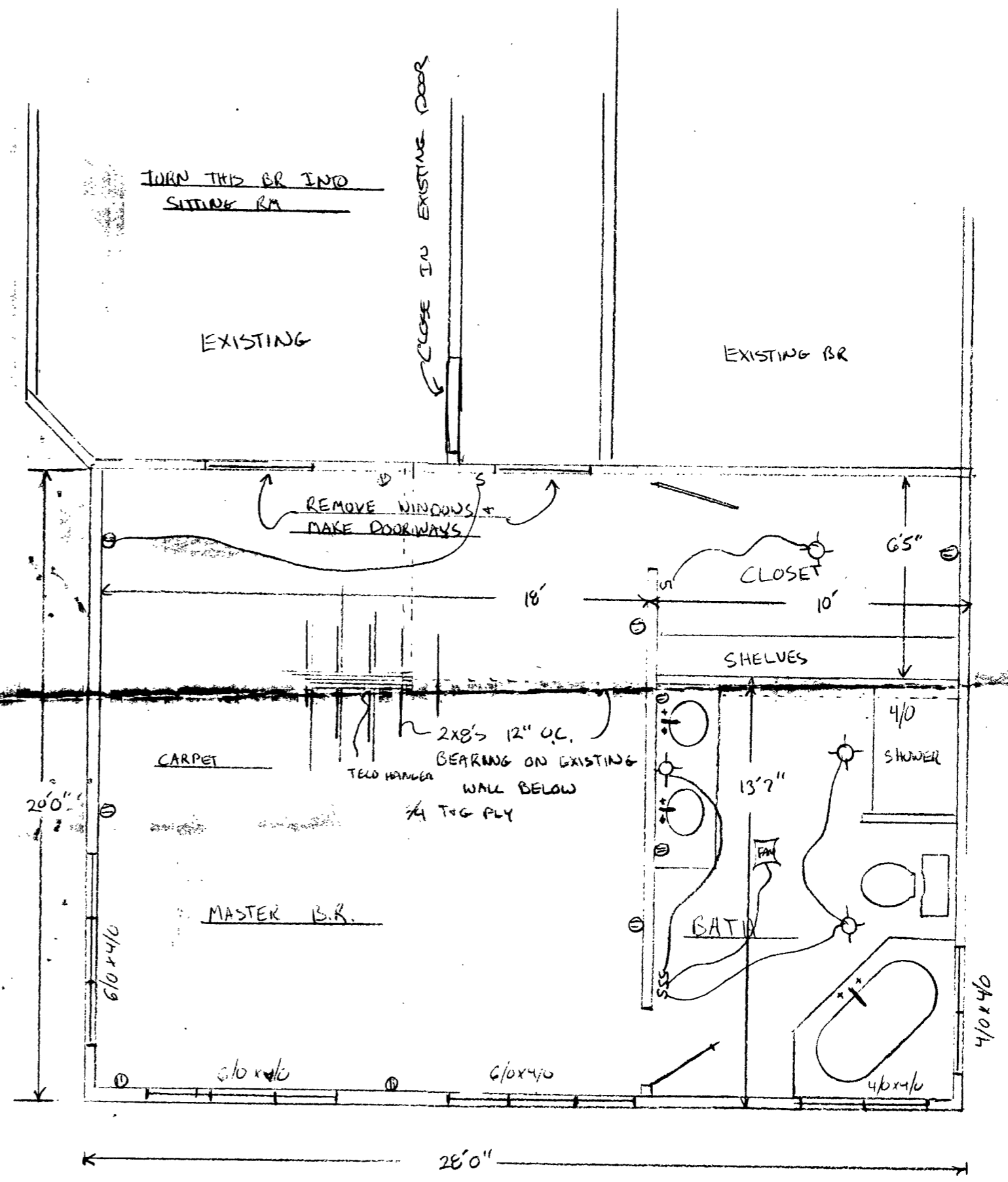
THIS IS TO CERTIFY THAT WE HAVE CONDUCTED A LOCATION SURVEY OF THE IMPROVEMENT AND THAT THEY ARE LOCATED AS SHOWN HEREON.
William G. Hartel
 SIGNATURE
 REG. NO. 9436 DATE 4-18-86

boender associates
 inc.
 consulting engineers
 land surveyors
 land planners
 COURT HOUSE SQUARE • ELLICOTT CITY, MD. 21042
 (301) 465-7777

THE INFORMATION ON THIS PLAT SHOWS ONLY THAT THE IMPROVEMENTS INDICATED HEREON ARE CONTAINED WITHIN THE CONFINES OF THE LOT UPON WHICH THEY ARE ERECTED. THIS PLAT IS NOT TO BE CONSTRUED AS, OR USED FOR THE ESTABLISHMENT OF PROPERTY LINES.



1ST FLOOR PLAN

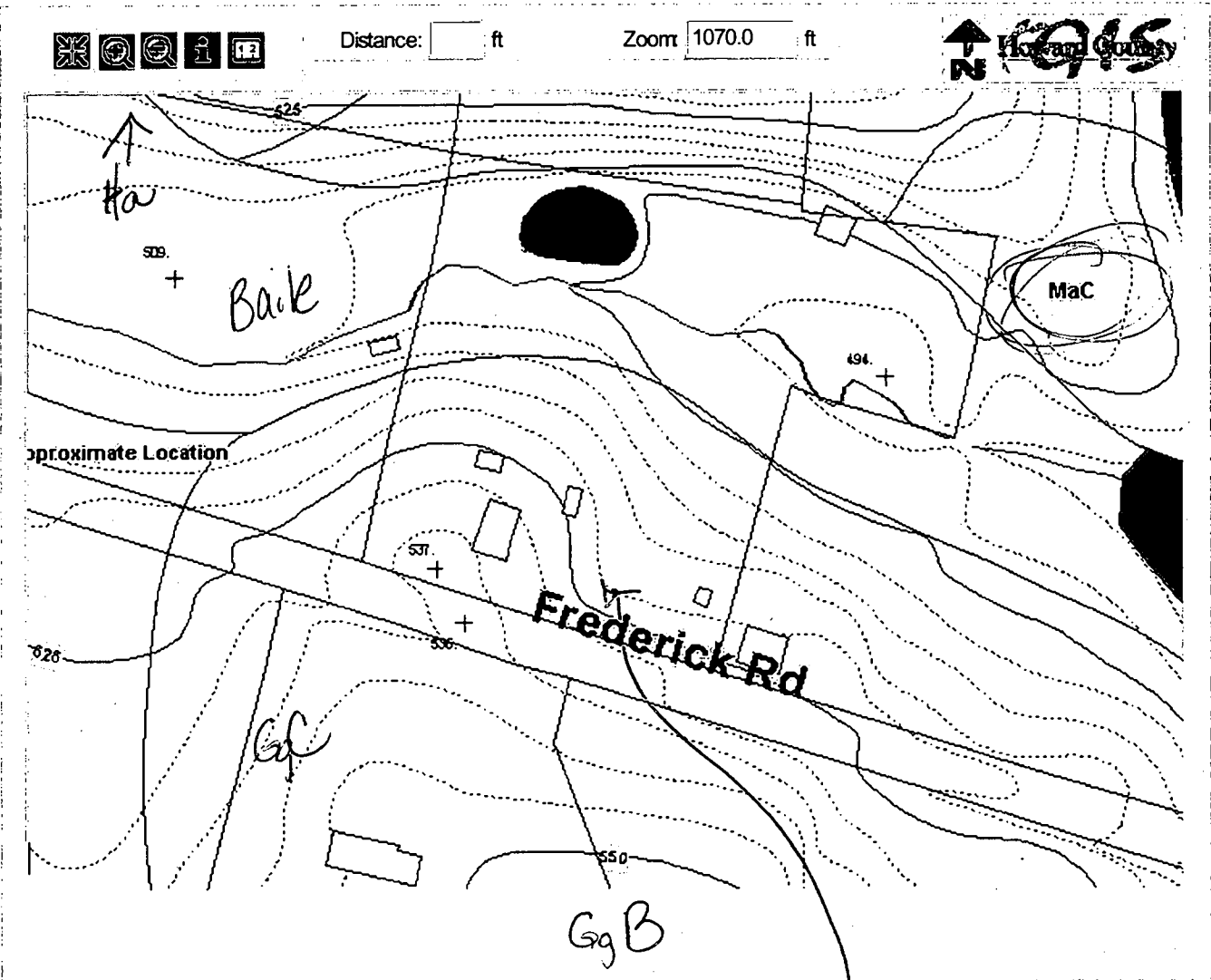


SECOND FLOOR

GORZO ADDITION		
SCALE: 1/4" = 1'	APPROVED BY	DRAWN BY W.C.S.
DATE: 7/1/95		
DRAWING NUMBER		7

13600 Frederick Rd.

Help Me	Map Reset	Zoom Fit	Find Location	Remove Pin	Layer Control	Image Control	Theme Map	Local Print	Print Layout	Email Map	Map Exit



Disclaimer: Howard County, Maryland assumes no responsibility for the accuracy of this map or the information contained herein or derived therefrom. The buyer and/or user assumes all risks and liabilities whatsoever resulting from or arising out of the use of this map. There are no oral agreements or warranties relating to this sale and/or use of this map.

Thursday, May 13 2004 | 10:52:44 AM | @661

Map Legends

- County Line
- Property Line
- Stream Major
- Stream Minor
- Ponds Lakes
- House Driveway
- Contour Lines
- Contour 400 Label
- Contour 401 Label
- Spot Elev.

Soils Map

- Benevda-Wiltshire-Bail
- Brinklow-Blocktown-Occoquan
- Chillum-Russette-Beltsville
- Codus-Hatboro
- Gladstone-Bannertown-Manor
- Gleneig-Manor-Gaila

soils may vary greatly