

11/5/99
am c.o.

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 513104

A REPAIR

DISTRICT _____

DATE 11-4-99

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

05-357772

DATE SYSTEM APPROVED 11/5/99

INSPECTOR M. Riskin

INDEXED

Mark Brew

IS PERMITTED TO INSTALL _____ ALTER X

ADDRESS 5436 Harris Farm Lane, Clarksville, Maryland 21029 PHONE 301-854-0609

SUBDIVISION _____ LOT _____ ROAD 12709 Hall Shop Road

PROPERTY OWNER Richard S. Belliveau
12709 Hall Shop Road

ADDRESS Highland, Maryland 20777

SEPTIC TANK CAPACITY _____ GALLONS

NUMBER OF BEDROOMS _____

_____ SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED _____

REPAIR - PURPOSE - TO SUPPORT THE PROPOSED ADDITION BY CONNECTING THE EXISTING SEPTIC SYSTEM INTO THE NEW ADDITION - (2 Bathroom - 3 bedrooms) See Building Permit # B00116402
Call for inspection when ground is opened so that a sanitarian can approve the connection and location for the new addition.

PLANS APPROVED BY Mark E. Rifkin DATE 11-04-99

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

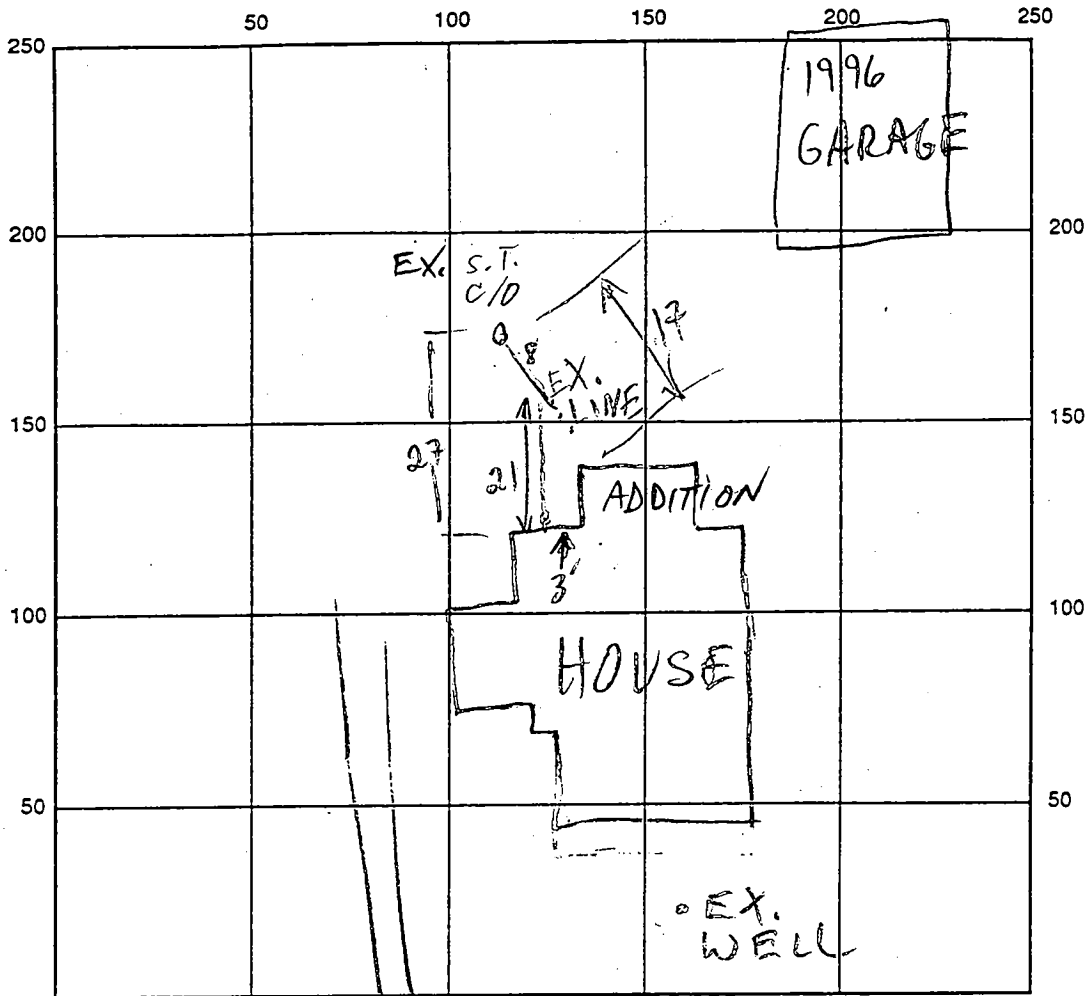
PERMIT VOID AFTER TWO YEARS

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**

P513104-A



HALL SHOP RD

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL _____ CLEANOUTS _____

DISTRIBUTION BOX LEVEL _____

DRAIN FIELD/TITLE DEPTH _____ FT. TRENCH WIDTH _____ FT. INLET DEPTH _____ FT.

EFFECTIVE GRAVEL DEPTH _____ FT. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ ONE SIDEWALL/BOTTOM AREA _____ SQ. FT.

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

ABSORBENT AREA _____ SQ. FT.

REMARKS: 11/5/99 OK TO COVER NEW HOUSE COAN (MR)

DATE SYSTEM APPROVED

11/5/99

INSPECTOR

M. Ripkin

THE BELLIVEA

3/10/99
BP Review

12709 HALL SHOP RD

S.T. UNDER
PORCH/2-STORY ADD'N
2-STORY ADD'N 10' TO EX. TRENCH

3/12/99 MTG. W/OWNER @ OFFICE:
S.T. + TRENCHES 14' FURTHER OUT
THAN PREV. THOUGHT BY REVIEWER;
S.T./TRENCH LOC. TO BE FURTHER
EVALUATED BY FIELD MTG W/OWNER;
WELL AB. TO BE DISCUSSED ALSO

EX # BL=3
1 TO BE
REMOVED
3 TO BE
ADDED

WELL AB.

SITE PLAN

SCALE: 1"=50'

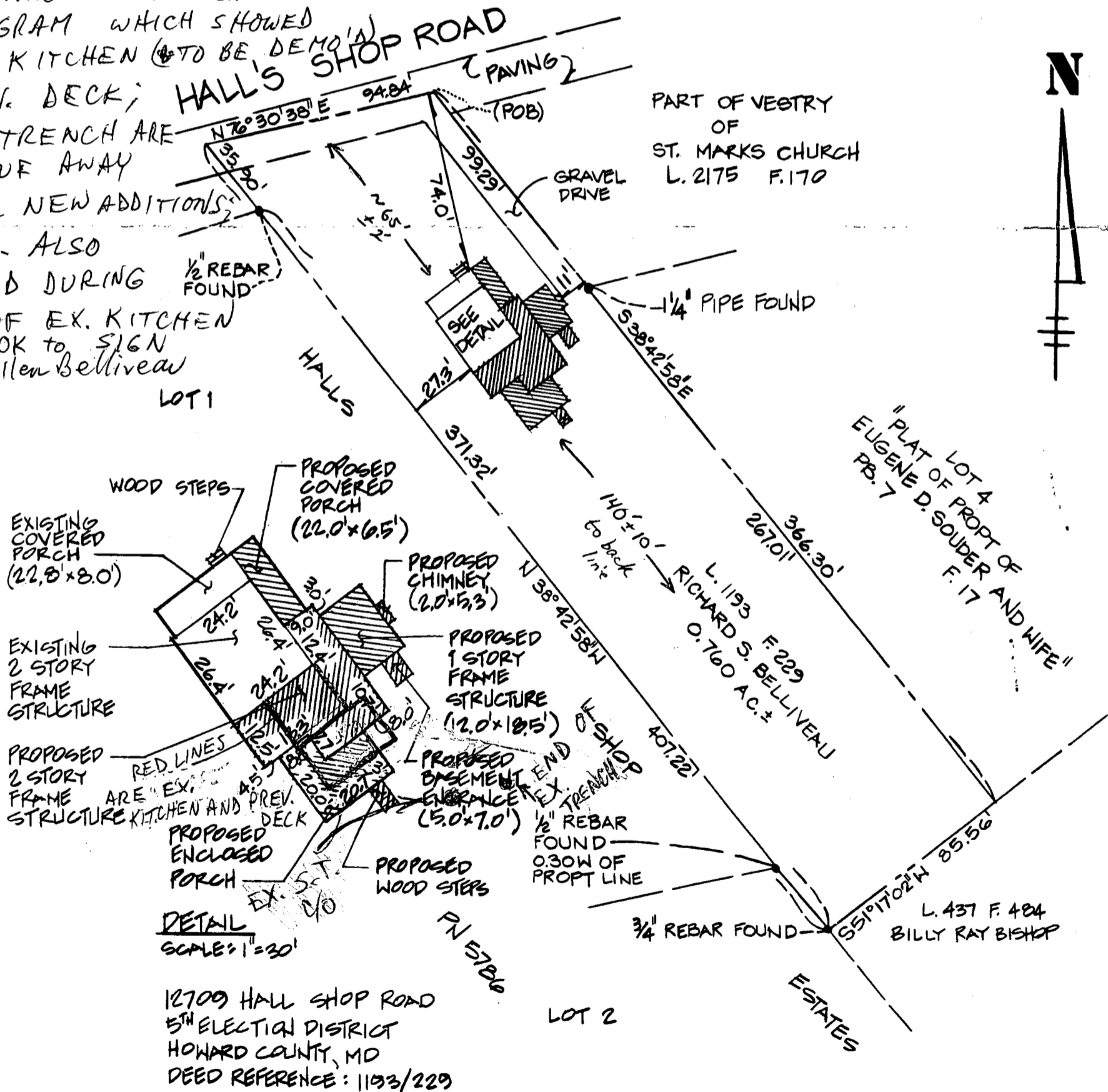
3/16/99 SITE MTG @ FIELD;

CONCERNS ABOUT SEPARATION
DISTANCES WERE BASED ON SEPTIC
DIAGRAM WHICH SHOWED
EX. KITCHEN (TO BE DEMO'D)
AND PREV. DECK; HALL'S SHOP ROAD

S.T. + TRENCH ARE
FAR ENDF AWAY
FROM ALL NEW ADDITIONS;
WELL AB. ALSO

PROMISED DURING
DEMO OF EX. KITCHEN
OK to SIGN
w/ Ellen Belliveau

MR



DETAIL
SCALE: 1"=30'

12709 HALL SHOP ROAD
5TH ELECTICAL DISTRICT
HOWARD COUNTY, MD
DEED REFERENCE: 1193/229

9-27-96
2-0-23
9-30-96
ASAP

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 57297

A REPAIR

DISTRICT 5th

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH
~~XXXXXXXX~~ 313-2640

DATE 09/27/96

DATE SYSTEM APPROVED 9/30/96

INSPECTOR DKS

INDEXED

Fogle's Septic Clean, Inc. IS PERMITTED TO INSTALL ALTER

ADDRESS 580 Obrecht Road, Sykesville, Maryland 21784 PHONE 795-5674

SUBDIVISION _____ LOT _____ ROAD 12709 Hall Shop Road

PROPERTY OWNER Richard S. Belliveau

ADDRESS 12709 Hall Shop Road
Highland, Maryland 20777

SEPTIC TANK CAPACITY 1500 GALLONS

NUMBER OF BEDROOMS 5

_____ SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED _____

PURPOSE: Proposal is to replace older system with a new system large enough to serve an intended larger residence. 5 Bedrooms planned capacity.

TRENCHES - Trench to be 4 feet wide. Inlet maximum depth 7 feet. Bottom maximum depth 9 feet with 2 feet of stone. (12) linear feet of trench required.

LOCATION - Trench(s) to run towards the rear of property!

OPTIONAL SPECS - Trench to be 4 feet wide. Inlet 5 feet below original grade. Bottom maximum depth 9 feet below original grade. 4 feet of stone below distribution pipe. 9-27-96

PLANS APPROVED BY C. Williams/Glen Savage DATE 9/03/96

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

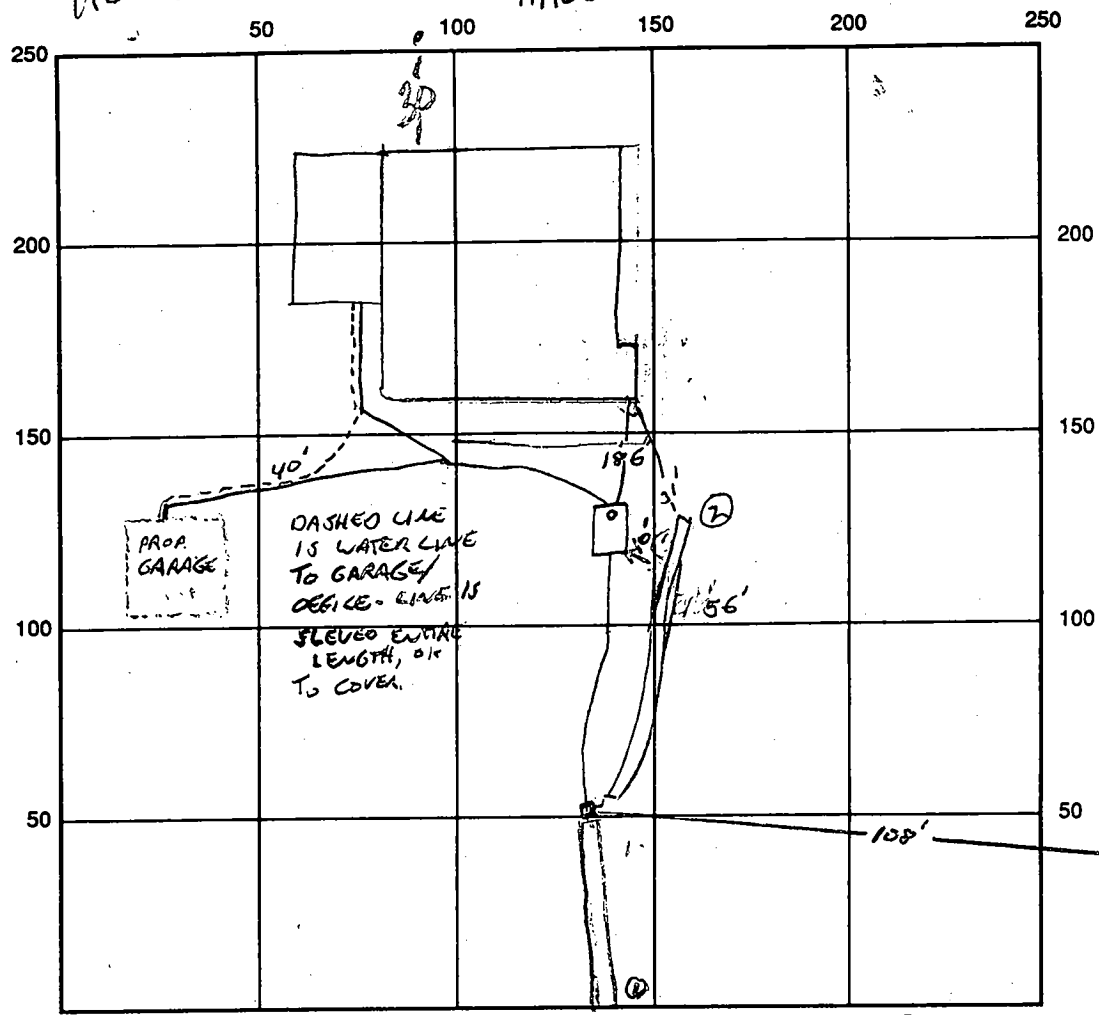
ADD. PERMIT SIGN U
AND RETURNED 5-8-99
Serial # 010116402
2-story addition

***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

HO-94-0828

HALL SHOP ROAD

N ↗



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL OK - 1500 GAL. CLEANOUTS 1 on Tank - ok

DISTRIBUTION BOX LEVEL OK - baffle in

DRAIN FIELD/TITLE DEPTH 9 FT. TRENCH WIDTH 4 FT. INLET DEPTH 5 FT.

EFFECTIVE GRAVEL DEPTH 4 FT. TOTAL LENGTH 112 FT. → 112'

NUMBER OF TRENCHES 2 ONE SIDEWALL/ ~~FOOTING~~ AREA 448 SQ. FT.

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

ABSORBENT AREA 448 SQ. FT.

REMARKS: 9/27/96 40' DUG ON FIRST TRENCH - OK TO COMPLETE

OK TO COVER TANK AND FIRST TRENCH AS COMPLETE. MANHOLE REQUIRED

CALL FOR SECOND TRENCH INSPECTION. MANHOLE OK 4' BELOW GRADE 6" CLEANOUT

IS TO GRADE. NOTE: EXISTING SEPTIC TANK ABANDONED ON 9-27-96

9/30/96 FINAL - OK TO COVER ALL WORK TKS

10/2/96 OK TO COVER WATER LINE TO GARAGE

DATE SYSTEM APPROVED 9/30/96 INSPECTOR Donna J. [Signature]

Building Address 12709 Hall Shop Rd
Highland, MD 20777

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

Census Tract 605112 Subdivision N/A

Section N/A Area N/A Lot _____

Tax Map 410 Parcel 92 Grid 11

Zoning RR-DE Map Coordinates _____ Lot size _____

Property Owner's Name Richard S. Belliveau
 Address 12709 Hall Shop Rd Ellen
 City Highland State MD Zip Code 20777

Home Phone 301 854 2033 Work Phone 301 854 3634
 Applicant's Name & Mailing Address, (if other than stated hereon): _____

Phone 301 854 2033 Fax Same (Call First)

Existing Use Residence Single Family Home
 Proposed Use Residence Single Family Home
 Estimated Construction Cost \$ 200K

Description of Work Two Story Addition to home with
(New Kitchen) 3 BR, 3 BA
Relocated
Family Room + Sun room, Fireplace

Contractor Company Same as owner
 Contact Person _____
 Address _____
 City _____ State _____ Zip Code _____
 License No. _____
 Phone _____ Fax _____

Occupant or Tenant Richard S. Belliveau
 Contact Name Same
 Address 12709 Hall Shop Rd
 City Highland State MD Zip Code 20777
 Phone 301 854 2033 Fax Same (Call First)

Engineer or Architect Company C.B. Clark
 Contact Person Charles B. Clark
 Address 12326 Quiet Hollow Ct
 City Fairfax State VA Zip Code 22033
 Phone 703 293 9858 Fax _____

BUILDING DESCRIPTION - COMMERCIAL

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 <input type="checkbox"/> # of Heads _____

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: <input checked="" type="checkbox"/> Public <input 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 checked="" type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms <u>5</u>	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Multi-family dwellings: No. of efficiency units: <u>NA</u> No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Heating System: Electric <input checked="" type="checkbox"/> Oil <input checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Other Structure: <u>NA</u> Dimensions: _____ Footings: _____ Roof: _____ <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	Sprinkler system: <u>N/A</u> <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.

Richard S. Belliveau
 Applicant's Signature
NA (Owner)
 Title/Company

Richard S. Belliveau
 Print Name
7/26/99
 Date

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 type="checkbox"/> State Highways		
<input checked="" type="checkbox"/> Building Official		
<input checked="" type="checkbox"/> Dev. Engineering DPZ		
<input checked="" type="checkbox"/> Health	<u>3/18/99</u>	<u>Mark E. R. Ples</u>
<input checked="" type="checkbox"/> Fire Protection		

Is Sediment Control approval required prior to issuance?
 YES NO

CONTINGENCY CONSTRUCTION START:
 ONE STOP SHOP:

DPZ SETBACK INFORMATION	PROPERTY ID#
Front: _____	Filing fee \$ _____
Rear: _____	Permit fee \$ _____
Side: _____	Excise tax \$ _____
Side St. _____	Sub-total paid \$ _____
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	Add'l permit 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"/>	Balance due \$ _____
Lot Coverage for New Town Zone _____	Check # <u>967</u>
SDP/Red-line approval date _____	Validation # _____
Accepted by _____	

9-26-96 2PM

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 56555

A REPAIR

DISTRICT _____

DATE 4-11-96

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

313-2640

DATE SYSTEM APPROVED _____

INSPECTOR _____

Jack Fyock Septic Service _____ IS PERMITTED TO INSTALL _____ ALTER X

ADDRESS 13775 Triadelphia Road, Glenelg, Maryland 21737 PHONE 988-9270

SUBDIVISION _____ LOT _____ ROAD 12709 Hall Shop Road

PROPERTY OWNER Richard S. Belliveau
12709 Hall Shop Road

ADDRESS Highland, MD 20777

AS DISCUSSED WITH OWNER &
SUBSTITUTE CONTRACTOR - RICK WMS (FOGLE):

ORIGINAL COMPUTATIONS WERE BASED ON BOTTOM AREA ONLY,
~~5'~~ NO SUCCESSFUL PERC TO 9'
5' STONE DEPTH WAS AN ^{OPTIONAL} ENHANCEMENT TO SYSTEM DESIGN.

FOR MAXIMUM UTILIZATION OF SPACE & COST
OK TO SWITCH TO 112' TRENCHES LENGTH
TO REAR OF PROPERTY

4' WIDE (448' TOTAL)
9' BOTTOM DEPTH (BOTTOM AREA)
2' STONE DEPTH

* CONTRACTOR INDICATES EACH ADDITIONAL TRUCKLOAD
WOULD EQUAL 1 FOOT OF STONE IN TRENCH

APPLICANT WILL CONSIDER (4) ADDITIONAL
STONE ABOVE THE CURRENTLY SPEC'D 7' MAX. INLET DEPTH.

T/3/96 (CW)

USE BOTTOM AREA ONLY FOR CALCULATIONS

Howard County Health Department

To: FILE - 12709 HALL ST

- BELLEVUE REPORTS

DAYWELL BIOS ARE IN
HIS JUDGEMENT "EXCESSIVE"
(\$4800 - \$6000)

WE DISCUSSED OPTION FOR GRAVEL FILLED
DAYWELL VS BLOCK OR RINGS

IT ALSO SUGGESTS HE EXAMINE
SITE CONFIGURATION FOR 120' OF
TRENCH (2 @ 60, OR 3 @ 40)
SPACE WAS A PREMIUM - BUT IF

From: _____

TRENCHES TOOK UP NOT MUCH

Date: MORE ROOM THAN DAYWELLS,

HD-170 THEN DESIGN CHANGE OK 8/21/90 (60)

9/25/96
ASAP

HANDWRITTEN SPECS/PERMITS ISSUED 9-26-96 GS

PERMIT

P 56555

SEWAGE DISPOSAL SYSTEM

A REPAIR

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
461-8838 313-2640

9-26-96 FOGLE'S HAS TAKEN
OVER BY AT REQUEST OF OWNER
\$25.00 FEE PAID DATE SYSTEM APPROVED _____
CHK# 2219. - PERMIT REVISION

DATE 4-11-96

INSPECTOR _____

Jack Fyock Septic Service _____ IS PERMITTED TO INSTALL _____ ALTER X

ADDRESS 13775 Triadelphia Road, Glenelg, Maryland 21737 PHONE 988-9270

SUBDIVISION _____ LOT _____ ROAD 12709 Hall Shop Road

PROPERTY OWNER Richard S. Belliveau

ADDRESS 12709 Hall Shop Road
Highland, MD 20777

SEPTIC TANK CAPACITY 1500 GALLONS

NUMBER OF BEDROOMS 5

_____ SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED NA

PROPOSAL IS TO REPLACE OLD
SYSTEM WITH A NEW SYSTEM
LARGE ENOUGH TO SERVE AN
INTENDED LARGER RESIDENCE.
A BR PLANNED PROPERTY

REPAIR - PURPOSE - SEPTIC SYSTEM HAS FAILED.
Call for inspection when ground is opened so sanitarian can recommend
repair.

~~100' TRENCH DEPTH TO BE MAINTAINED AND EXTENDED TO THE DRAINAGE
EXISTING TRENCH TO BE DISCONNECTED FROM THE MAIN TRENCH
FURTHER WORK TO BE REQUIRED W/ 1500 GALLON TANK~~

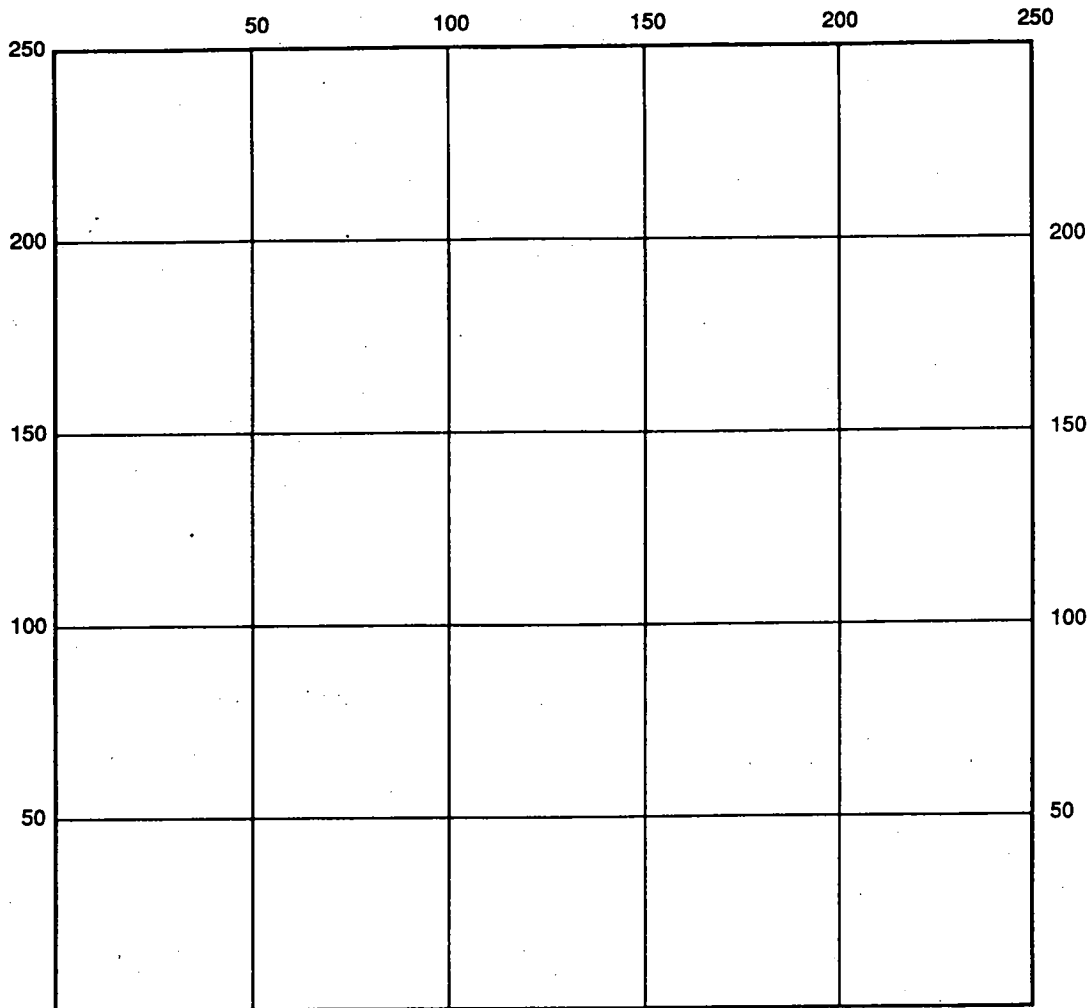
15x15 DRYWELL, INST 15' BELOW GRADE BOTTOM AT 9' 4" DIA

PLANS APPROVED BY G. S. M... DATE 11-9-95

- 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)
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- NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS
- PERMIT VOID AFTER TWO YEARS
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- NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

BLDG. PERMIT SIGNED
AND RETURNED 7/25/96
Serial # 000101348
detached garage

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT
*CALL 461-8833 FOR INSPECTION OF SEPTIC SYSTEM.



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL _____ CLEANOUTS _____

DISTRIBUTION BOX LEVEL _____

DRAIN FIELD/TITLE DEPTH _____ FT. TRENCH WIDTH _____ FT. INLET DEPTH _____ FT.

EFFECTIVE GRAVEL DEPTH _____ FT. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ ONE SIDEWALL/BOTTOM AREA _____ SQ. FT.

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

ABSORBENT AREA _____ SQ. FT.

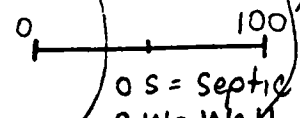
REMARKS: 9-26-96 TANK TO BE SET 10' OFF PROPOSED ADDITION, DISC BOX TO BE SET
IN CENTER OF EASEMENT INSTALL 2 '36' TRENCHES ALONG CENTER IN
BOTH DIRECTIONS, EXISTING TANK ABANDONED.

7/12/96 WPI OK TO COVER - NO INSID ALVA.

DATE SYSTEM APPROVED _____ INSPECTOR _____

AS DISCUSSED
IN ORC 6/13/14

ST MARK'S
EPISCOPAL
CHURCH



5140P - Perk - Field Located

2236004

525 feet

ROAD

519

519

Max Envelope
for Addition

Proposed
Replacement
Well

Well

519

Existing
Wells

OS

P3

P2

P1

Existing
Septic

Proposed
Garage

Existing
Drywell

Well

Field Located
Perk Site

513.0

Well

All wells
SEPTICS WITHIN
100'
500 feet
HAVE BEEN SHOWN.

PERK SITE
WELL'S FIELD LOCATED

SEWAGE EASEMENT
Language

REPLACEMENT SEPTIC TANK
2 REPLACES EXISTING TANK TO BE ABANDONED

2 REPLACEMENT DRYWELLS
EXISTING DRYWELL TO BE ABANDONED

ALL MESSAGES
ARE ACCORDING TO
THE BEST OF MY ABILITY

Belliveau
12709 Hall Shop Rd.
Highland MD 20777
271-854-2033

EXISTING USE TO BE
REPLACED (ABANDONED
& SEALED)
BUT LEFT IN PLACE
FOR FUTURE USE.



DELIVERED
TO OWNER
@ OFFICE
3/12/99

HOWARD COUNTY HEALTH DEPARTMENT

Joyce M. Boyd, M.D., County Health Officer

March 10, 1999

Mr. Richard Belliveau
12709 Hall Shop Road
Highland, MD 20777

RE: Building Permit Application B00116402
12709 Hall Shop Road
Proposed Large Addition

Dear Mr. Belliveau:

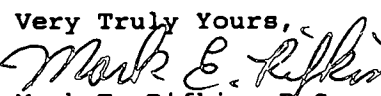
This office has received the above referenced building permit application, but cannot recommend approval at this time due to concerns regarding several issues.

A septic system repair was installed in September, 1996 in preparation for construction of a planned addition, but no design/location plan had been submitted to this office. The first issue is confirmation of the total number of bedrooms in the completed dwelling. This information is useful in confirming that the septic system installed in 1996 can accommodate the total expected sewage flow.

Regardless of the total number of bedrooms, Health Department records indicate that the proposed addition (sunroom included) would not meet the required separation distances to the existing septic tank (ten feet minimum) and septic system trench (twenty feet minimum). If the addition design cannot be modified, then acquisition of a septic system repair permit (\$25 fee) would be required to adjust the location of the tank and trench.

Additionally, according to Health Department records, the hand dug well which once served the dwelling has not been properly filled and sealed. Any recommendation for building permit approval would be contingent upon a strong commitment to properly fill and seal this well. This abandonment process can be performed by a licensed well driller or by any individual with the presence of a Health Department inspector.

Prompt resolution of these issues may best be accomplished during a review conference in this office. Please contact this office at (410) 313-2640 to schedule this meeting or if you have any questions.

Very Truly Yours,

Mark E. Rifkin, E.S.
Water & Sewerage Program

MR
cc: Department of Inspections, Licenses & Permits
File

APPLICATION

PERCOLATION TESTING

FEE?

A _____

P 56555

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

DISTRICT _____

DATE 4-18-96

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 RICHARD BELLIVEAU

ADDRESS 12709 HALL SHOP ROAD PHONE _____

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION: SAME

SUBDIVISION _____ LOT NO. _____

ROAD AND DESCRIPTION _____

TAX MAP _____ PARCEL # _____

SIZE OF LOT _____ TYPE BLDG. _____
(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 _____

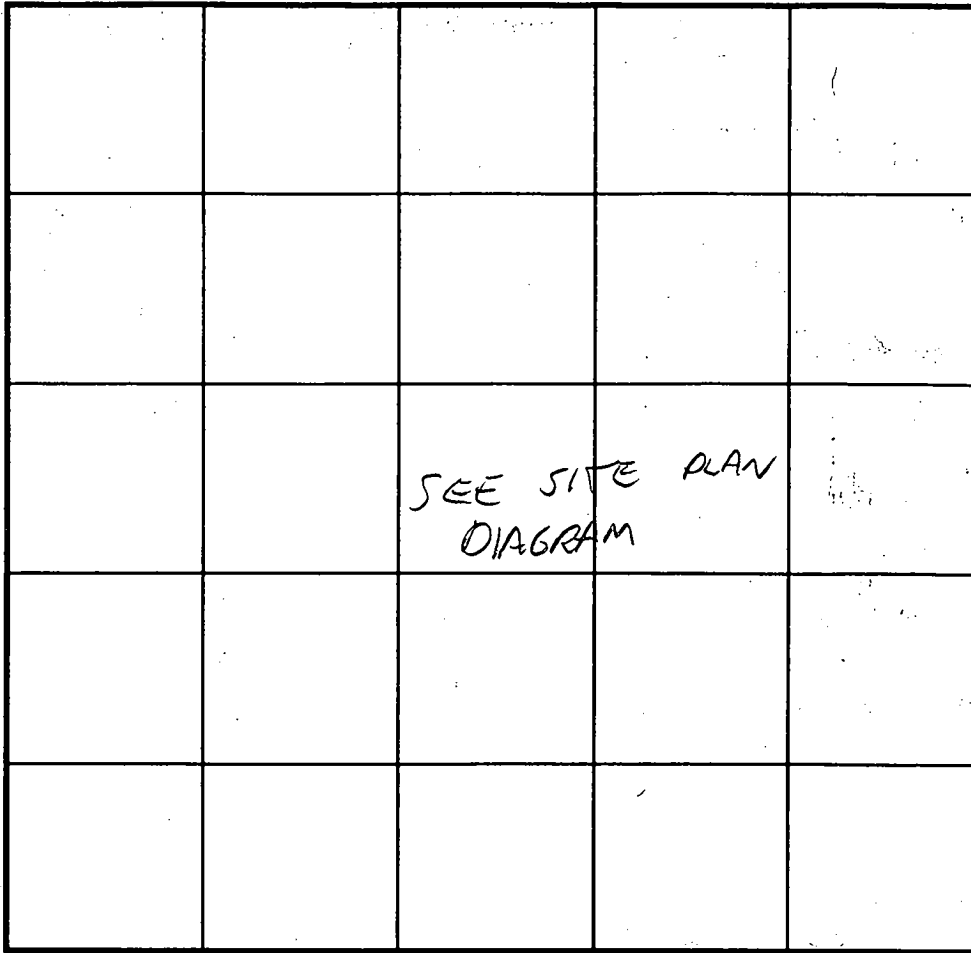
THIS IS NOT A PERMIT

P 56555

COUNTY #

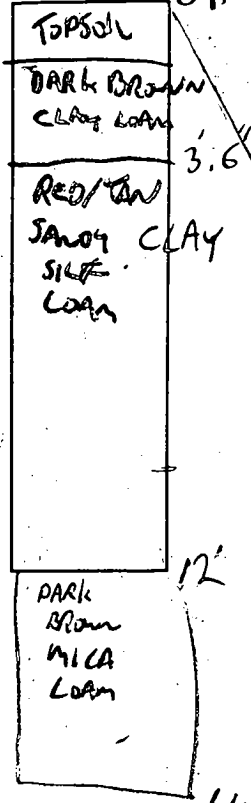
SOIL PROFILE

0'



SOIL PROFILE

0'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4-18-96	G1	VISUAL OK					
X	G2	4'3" / 11'	1:58		TEST STOPPED - VERY SLOW		
X	G2	5'6" / 11'	2:07	2:17	NO MOVEMENT		
X	G2	7' / 11'	2:23	2:42	TEST STOPPED < 1/8" WCH		
X	G3	4'8" / 11'	2:29		TEST STOPPED		
	G3	9'6" / 14'	3:02	3:10	3:10	3:23	12 MIN
	G2	/ 14'	VISUAL OK AT 10'				

REMARKS DRY WELL OPENED - FULL WATER AT 15' - FAILING SYSTEM

TYPE OF SOIL _____

TESTED BY G. SAUSAGE ALSO PRESENT Prock's CREW - own Rick OWNER

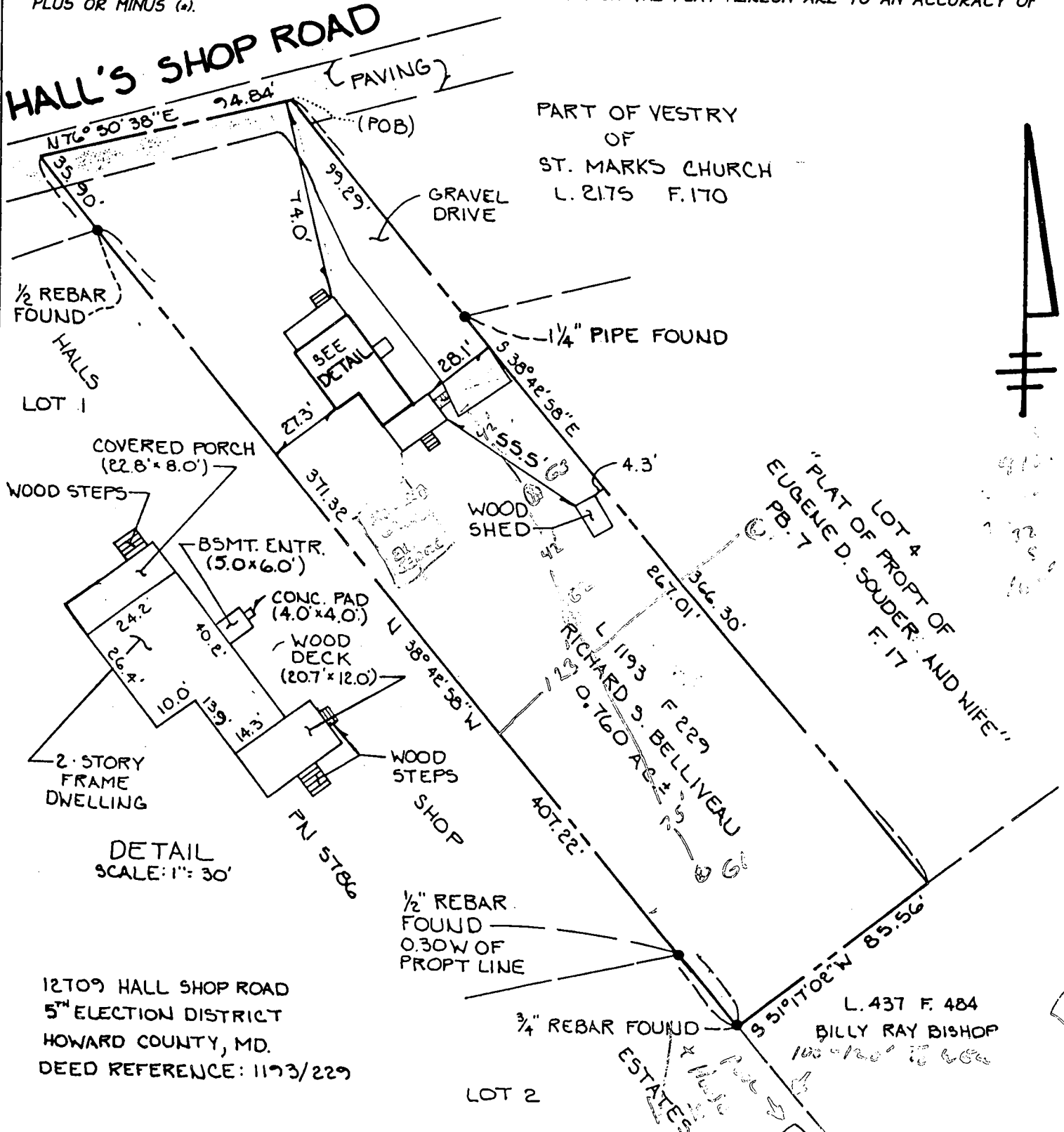
TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

INLET DEPTH _____ MAXIMUM BOTTOM DEPTH 9' SQ. FT/BEDROOM _____

GENERAL NOTES:

- 1) THIS PLAT IS PREPARED FOR THE BENEFIT OF THE CLIENT SIGNING THE HOUSE LOCATION SURVEY APPROVAL FORM INsofar AS IT IS REQUIRED BY A LENDER OR TITLE INSURANCE COMPANY OR ITS AGENTS IN CONNECTION WITH THE CONTEMPLATED TRANSFER, FINANCING OR RE-FINANCING. UNLESS INDICATED AS BEING A BOUNDARY SURVEY, THIS PLAT IS NOT INTENDED FOR USE IN THE ESTABLISHMENT OF PROPERTY LINES AND IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATIONS OF FENCES, GARAGES, BUILDINGS OR OTHER EXISTING OR FUTURE IMPROVEMENTS. AS A RESULT, THIS PLAT DOES NOT PROVIDE FOR ACCURATE IDENTIFICATION OF PROPERTY LINE, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING OR RE-FINANCING.
- 2) SUBJECT PROPERTY IS SHOWN IN ZONE C ON THE NATIONAL FLOOD INSURANCE PROGRAM FLOOD INSURANCE RATE MAP OF HOWARD COUNTY, MARYLAND, COMMUNITY PANEL No. 2400440037B EFFECTIVE DATE: DECEMBER 4, 1986
- 3) THE OFFSETS FROM BUILDING LINE TO PROPERTY LINE AS SHOWN ON THE PLAT HEREON ARE TO AN ACCURACY OF PLUS OR MINUS (±).

HALL'S SHOP ROAD



PART OF VESTRY OF ST. MARKS CHURCH L. 2175 F. 170

LOT 4 PROPT OF EUGENE D. SOLDER AND WIFE PB. 7 F. 17

RICHARD S. BELLIVEAU L. 1193 F. 229 O. 760 AC. 2.5

L. 437 F. 484 BILLY RAY BISHOP

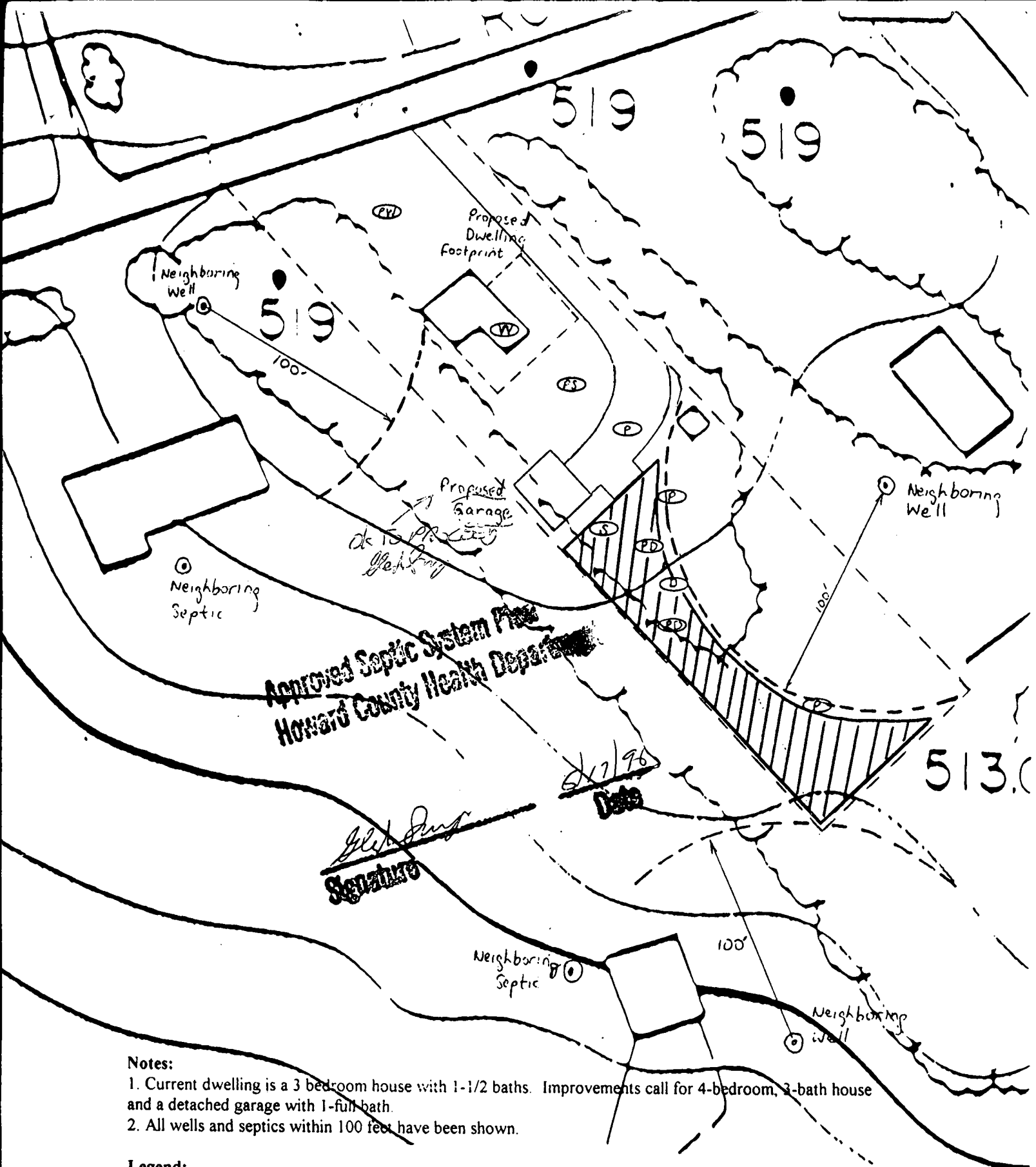
DETAIL SCALE: 1" = 30'

12709 HALL SHOP ROAD
5TH ELECTION DISTRICT
HOWARD COUNTY, MD.
DEED REFERENCE: 1193/229

LOT 2



ESTATES



Approved Septic System Plan
Howard County Health Department

Gleason
Signature

6/17/96
Date

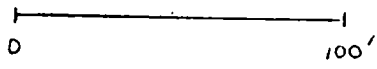
Notes:

1. Current dwelling is a 3 bedroom house with 1-1/2 baths. Improvements call for 4-bedroom, 3-bath house and a detached garage with 1-full bath.
2. All wells and septic tanks within 100 feet have been shown.

Legend:

This area designates a private sewerage easement as required by the Maryland State Department of the Environment for individual sewerage disposal. Improvements of any nature in this area restricted until public sewerage is available. These easements shall become null and void upon connection to a public sewerage system. The county Health Officer shall have the authority to grant variances for encroachments into the private sewerage easements. Recordation of a modified easement shall not be necessary.

- Denotes the existing well to be replaced, abandoned and sealed.
- Denotes the existing septic tank to be abandoned.
- Denotes the existing drywell to be disconnected, but left in place for future use.
- Denotes a field located perc site.
- Denotes proposed well location.
- Denotes proposed septic tank location.
- Denotes proposed replacement drywell locations.



APPROVED FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS
 HOWARD COUNTY HEALTH DEPARTMENT
N/A cw/ll 6/17/96
 HOWARD COUNTY HEALTH OFFICER DATE:

All measurements are accurate to the best of my ability
Richard S. Belliveau
 Richard S. Belliveau
 12709 Hall Shop Road
 Highland, MD 20777

WALK TRU 7/25/96

124

APPLICATION

HOWARD COUNTY

PERMIT APPLICATION

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

SERIAL NUMBER

13 00801348

BUILDING ADDRESS (HOUSE NO., STREET, TOWN OR AREA)

12709 Hall Shop Rd
Highland MD 20777

9015

GRADING/SEDIMENT CONTROL YES NO

DESCRIPTION OF WORK AUTHORIZED

SDP #

LOT NO.	PARCEL NO.	SEC.	AREA	BLOCK NO.	LIBER	FOLIO
	92			11	1193	229
SUB DIVISION		ZONE	ZONE MAP	ELEC. DIST.	CENSUS TR.	
1114				5#		

OWNER NAME AND ADDRESS: Richard S. Belliveau
12709 Hall Shop Rd
Highland MD 20777
PHONE NO.: 301-854-2033
301-953-6000

OCCUPANT'S NAME AND ADDRESS: Same
PHONE NO.: EXT 8913
(240) 278-

ARCHITECT OR ENGINEER'S NAME AND ADDRESS
PHONE NO.

CONTRACTOR'S NAME AND ADDRESS: Owner
PHONE NO.

EXISTING USE: NA
PROPOSED USE: Detached Garage

EST. CONSTRUCTION COST: \$10,000
LICENSE NUMBER
PERMIT FEE: 795

SIZE OF BLDG.	FRONT	DEPTH	HEIGHT
	22'	26'	23'

TYPE OF BLDG.	AREA	VOLUME	ROOF
B. ROOMS Each level	572 sq'		
ROOMS			
BATHS			
FIREPLACES			

FOOTINGS	FOUNDATION	S. WALLS

UTILITIES			
WATER/WELL	SEWER/SEPTIC	GAS	ELECTRICITY
			TYPE OF HEAT
			Heat Pump
			AC

I have carefully examined and read this application and know the same is true and correct, and that in 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 complied with.

SIGNATURE: Richard S. Belliveau
TITLE: Owner
DATE: 7/25/96

FOR OFFICE USE ONLY

DISTANCE IN FEET FROM R/W LINE TO FRONT BUILDING LINE: ET 1/A

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 #

FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING		
SHA		
SEDIMENT/GRADING		
BUILDING OFFICIAL		
WATER & SEWER		
HEALTH DEPT.		
FIRE PROTECTION		
STORM WATER MGM.		

Check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

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-89-591 4 CF# 1617

APPROVED: [Signature]
DATE: [Blank]

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

This area designates a private sewerage easement as required by the Maryland State Department of the Environment for individual sewerage disposal. Improvements of any nature in this area restricted until public sewerage is available. These easements shall become null and void upon connection to a public sewerage system. The county Health Officer shall have the authority to grant variances for encroachments into the private sewerage easements. Recordation of a modification...

9/23/67
Ready

PERMIT

P 13115

A 13108

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 5

Paul Thompson AT 622 79
Leave message

INDEXED

DATE 9/22/67

Elwood Scaggs IS PERMITTED TO INSTALL ALTER

ADDRESS Murphy Rd., Laurel, Md. PHONE 795-0324

A SEWAGE DISPOSAL SYSTEM LOCATED AT _____

SUBDIVISION _____ ROAD Hall Shop Road LOT _____

PROPERTY OWNER Clifton Link, Jr.

ADDRESS _____

SPECIFICATIONS - 3 bedrooms

DRAIN FIELD _____ DEPTH _____ FEET, BOTTOM AREA _____ SQ. FT.

SEEPAGE PITS _____ ABSORBENT SIDE-WALL AREA _____ SQ. FT.

SEPTIC TANK CAPACITY 750 GALLONS

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 22% & TANK CAPACITY 50%.

OTHER Dry well - dig pit 16 ft. sq. - set block and top for 12 ft. diameter and fill in rest of pit with gravel. Dry well to be 5 ft. deep below inlet pipe. Inlet pipe 3 to 4 ft. below original grade. Max. depth permitted for dry well below original grade is 9 ft. Place dry well 111 ft. behind right rear corner of house as seen when facing from Hall Shop Road - must be at least 100 ft. away from shallow well. *All pipe must be cast iron with leaded joints.

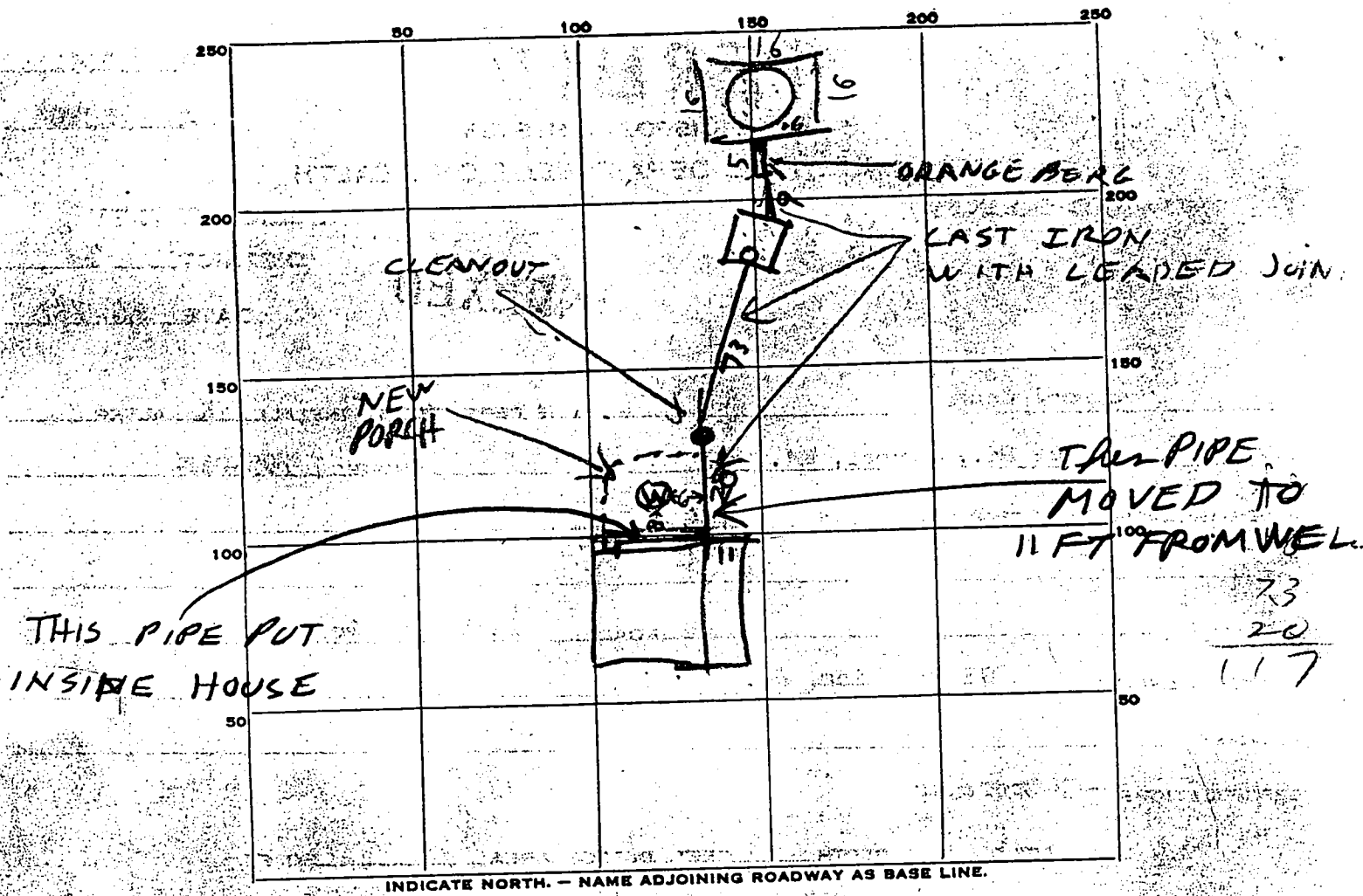
PERMIT VOID AFTER THREE YEARS.

PLANS APPROVED BY D. W. Monaghan DATE 9/21/67

FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

NEITHER THE HOWARD COUNTY COMMISSIONERS NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

NOTIFY THE HEALTH DEPARTMENT 48 HOURS BEFORE EXCAVATIONS ARE TO BE BACK FILLED.



PERMIT CARD

SEPTIC TANK, LEVEL OR 750 concrete CLEANOUTS O/K
 TOP is 1 1/2 FT below grade
 DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH _____ FT. TRENCH WIDTH _____ FT.

GRAVEL DEPTH _____ IN. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA _____

SEEPAGE PITS, INSIDE DIAMETER _____ FT. DEPTH BELOW INLET 6 FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS 9/26/67 - Dry Well Inlet is 2 1/2 FT below grade
Hold For Review Sewer line too close to well
6 ft x 8 ft 9/26/67 - Discussed situation with Wene
Decided House sewer must be moved 10 ft from well but 014
to build porch over well Called P. Thompson the builder & he agreed
to call plumber about moving pipe although he objects to cost 200?

NOV 6 7 Sewer Line Moved Raymond Dodge
 DATE SYSTEM APPROVED NOV 6 7 INSPECTOR

To OS

Date 5/7

Time 3:35

AM
 PM

WHILE YOU WERE OUT

M. RICK BELLIVEAU

of _____

Phone

301

953-6000

8113

Area Code

Number

Extension

TELEPHONED



PLEASE CALL

CALLED TO SEE YOU

WILL CALL AGAIN

WANTS TO SEE YOU

URGENT

RETURNED YOUR CALL

Message

wanted to make
sure you rec'd. tops for
12709 Hall Shopper
last week - no need
to call unless there's
a problem

kin
Operator



AMPAD
EFFICIENCY®

REORDER
#23-000

Cemetery
ST MARKS
EPISCOPAL
CHURCH

0 100'
OS = Septic
OW = Well
5140P - Perk

525 feet

2236004

ROAD

519

519

Max Envelope
for Addition

Proposed
Replacement
Well

Well

519

Existing
Well

OP3

OP2

Existing
Sept

Proposed
Garage

Existing
Drywell

Well

500 feet

5130

Well

22

50

S

Well

Belliveau
12709 Hall Shop Rd.
Highland MD 20777
301-854-2033

3/28

RESIDENTIAL DISTRICT VARIANCE PETITION
TO THE HOWARD COUNTY BOARD OF APPEALS

For DPZ office use only:
CASE NO. BA96-11 DV
DATE FILED _____
DATE ACCEPTED _____
FOR SCHEDULING _____

1. PETITIONER'S NAME RICHARD S. BELLIVEAU + Ellen J. Belliveau
TRADING AS (IF APPLICABLE) _____
ADDRESS 12709 HALL SHOP RD HIGHLAND, MD. 20777
PHONE NO. (W) 301-453-6000 x 8713 (H) 301-854-2033

2. COUNSEL FOR PETITIONER _____
COUNSEL'S ADDRESS _____
COUNSEL'S PHONE NO. _____

3. PROPERTY IDENTIFICATION:
ADDRESS OF SUBJECT PROPERTY 12709 HALL SHOP ROAD
HIGHLAND. MD. 20777
TOTAL ACREAGE OF PROPERTY 0.760 AC.
PROPERTY LOCATION:
ELECTION DISTRICT: 5th ZONING DISTRICT: RR
TAX MAP # 40 BLOCK # Unknown PARCEL/LOT # 92
SUBDIVISION NAME (if applicable): _____

4. PETITIONER'S INTEREST IN SUBJECT PROPERTY:
 OWNER (including joint ownership) OTHER (describe and give name and address of owner)

If the Petitioner is not the owner of the subject property, documentation from the owner authorizing the petition must accompany this petition.

NOTE: Completed petition forms must be submitted before the first day of the month in order to be heard on the last Tuesday of the Month. Incomplete petitions may result in postponement.

The Board of Appeals may, at its discretion, refer a variance petition in a residential district to the Planning Board for review and a recommendation.

PLEASE READ CAREFULLY
DATA TO ACCOMPANY PETITION:

5. VARIANCE PLAN.

No application for a variance shall be considered complete unless the plan indicates the required setback or other requirement, and the requested variance from the subject setback or other requirement. The submitted plans shall be folded to approximately 8 1/2 x 14 inches.

The plan must be drawn to scale and must include the items listed below:

- (a) Courses and distances of outline boundary lines and the size of the property
- (b) North arrow.
- (c) Zoning of subject property and adjoining property.
- (d) Scale of plan.
- (e) Existing and proposed uses, structures, natural features and landscaping.
- (f) Location and surface material of existing and proposed parking spaces, driveways, and points of access; number of existing and proposed parking spaces.
- (g) Same as (e) and (f) above, of any adjoining property as necessary for proper examination of the petition.
- (h) Location of well and private sewerage easement area, if property is to be served by private water and sewer.
- (i) Election District in which the subject property is located.
- (j) "Tax Map and parcel number" on which the subject property is located.
- (k) Name of local community in which the subject property is located or name of nearby community.
- (l) Name and mailing address of the petitioner.
- (m) Name and mailing address of attorney, if any.
- (n) Name and mailing address of property owner.
- (o) Floor area and height of structures, setback distances from property lines, and other numerical values necessary for the examination of the petition.
- (p) Location of subject property in relation, by approximate dimension, to the center line of nearest intersection of two public roads.
- (q) Ownership of affected roads.
- (r) A detailed description of all exterior building materials for all proposed structures.
- (s) Any other information as may be necessary for full and proper consideration of the petition.

Go to page 3.

6. OTHER DATA TO ACCOMPANY PETITION.

The Petitioner must also submit with the petition an area location map (tax map) of the subject property, indicating the street address of the site, the zoning district of the site and the zoning district of all adjacent properties.

7. VARIANCE REQUEST.

The undersigned hereby petition the Board of Appeals for a variance from the requirement(s) of section 105.E.4.D.(2)(8) of the Zoning Regulations to: (describe) Reduce the ^{side} setback from 10' to 3'.

A) Describe why the Zoning Regulations in question would result in practical difficulties or unnecessary hardships in complying strictly with the bulk requirements:

narrowness, () shallowness, () shape, () topography, () other; explain: _____

B) If exceptional narrowness, shallowness or shape of the property is claimed, give the date of the recording of the plat of present subdivision, if any: NA; or if property is not subdivided, give the date on which a deed conveying the identically bounded tract was first recorded:

Sept. 6, 1967

C) The intended use of the property, in the event the petition is granted: garage with office in second level, with one bathroom

D) Any other factors which the Petitioner desires to have considered: Other locations for garage on lot endanger large trees and result in less desirable appearance from street.

Go to page 4.

E) Explain why the requested variance is the minimum necessary to afford relief: This lot measures 85' wide. The side setback of 10' would put the proposed garage near the center of the lot, cutting off view and use of yard.

F) Is the property connected to: public water?: Y___ N
public sewer?: Y___ N

G) If the requested variance is granted, would it impact the water and/or septic/sewer on the site? Y N___ explanation included. Septic to be relocated.

H) If the requested variance is granted, would it increase the intensity of uses on the site? Y___ N ; if yes, explain: NA

I) If the requested variance is granted, would it increase traffic to or from the site? Y___ N ; if yes, explain: NA

J) Describe in detail (i.e. width, type of paving, etc.) all means of vehicular access onto the site: A One-car-width asphalt driveway with a turnaround.

K) Describe the topography of the site: Level lot.

L) Will the existing or proposed structure be visible from adjacent properties? Y N___; if yes, describe any proposed buffering or landscaping: Proposed garage is distant (100'-200' respectively) from neighboring houses. View is screened by pre-existing woods.

Go to Page 5

M) Describe any existing buffering or landscaping: _____

Buffering is provided by distance (100' to nearest neighbor)
and the area is wooded.

8. PRIOR PETITIONS. Has any petition for the same, or substantially the same, variance as contained herein for the same property as the subject of this petition been disapproved by the Board of Appeals within twenty four (24) months of the date of this petition?

() YES (✓) NO If yes, and six (6) months have elapsed since the last hearing, an affidavit setting forth new and different grounds on which re-submittal is based must be attached.

8. ADDITIONAL MATERIAL, FEES, POSTING, AND ADVERTISING:

A) If desired, supplemental pages may be attached to the petition. The following number of petitions, plans and supplemental pages must be submitted:

23 copies if the subject property adjoins a State road.

19 copies if the subject property adjoins a County road.

B) The undersigned agrees to furnish such additional plats, plans, reports or other material as may be required by the Department of Planning and Zoning and/or the Board of Appeals in connection with the filing of this petition.

The undersigned agrees to pay all costs in accordance with the current schedule of fees.

The undersigned also agrees to properly post the property at least fifteen (15) days prior to the hearing and to maintain the property posters as required and submit an affidavit of posting at, or before the time of the hearing. The undersigned also agrees to insert legal notices, to be published one (1) time in at least two (2) newspapers of general circulation in Howard County, as prepared and approved by the Department of Planning and Zoning, within at least fifteen (15) days prior to the hearing, and to pay for such advertising costs; and further agrees to submit two (2) approved certificates of the text and publication date(s) of the advertisement at or before the time of the hearing.

Go to page 5.

9. SIGNATURES.

The undersigned hereby affirms that all of the statements and information contained in, or filed with, this petition are true and correct.

The undersigned has read the instructions on this form, filing herewith all of the required accompanying information.

Richard J. Belliveau
Signature of Petitioner

Ellen J. Belliveau

Signature of Attorney

For DPZ office use only: (Filing fee is \$450.00 plus \$15.00 per poster.)

Hearing fee: \$ _____

Poster fee: \$ _____

TOTAL: \$ _____

Receipt No. _____

(Make checks payable to "Director of Finance")

Go to page 7

GENERAL REQUIREMENTS:

The Petitioner shall note that all requests for variances must meet the following requirements of section 130.B.2.a.(1) through (5) of the Howard County Zoning Regulations in order to be approved:

(1) That there are unique physical conditions, including irregularity, narrowness or shallowness of lot or shape, exceptional topography or other existing features peculiar to the particular lot; and that as a result of such unique physical conditions, practical difficulties or unnecessary hardships arise in complying strictly with the bulk provisions of these regulations.

2. That the variance, if granted, will not alter the essential character of the neighborhood or district in which the lot is located; will not substantially impair the appropriate use or development of adjacent property; and will not be detrimental to the public welfare.

3. That such practical difficulties or hardships have not been created by the owner provided, however, that where all other required findings are made, the purchase of a lot subject to the restrictions sought to be varied shall not itself constitute a self-created hardship.

4. That within the intent and purpose of these regulations, the variance, if granted, is the minimum variance necessary to afford relief.

5. That no variance be granted to the minimum criteria established in Section 131 for special exception uses, except where specifically provided therein or in an historic district. Nothing herein shall be construed to prevent the granting of variances in any zoning district other than to the minimum criteria established in Section 131 except as provided therein.

ZB or BA CASE # _____

PETITIONER Richard S. + Ellen J. Belliveau

ADDRESS 12709 Hallshop Rd Highland MD 20777

Affidavit made pursuant to the pertinent provisions of Title 22 of the Howard County Code as amended.

THE UNDERSIGNED DOES HEREBY DECLARE THAT NO OFFICER OR EMPLOYEE OF HOWARD COUNTY, WHETHER ELECTED OR APPOINTED, HAS RECEIVED PRIOR HERETO OR WILL RECEIVE SUBSEQUENT HERETO, ANY MONETARY OR MATERIAL CONSIDERATION, ANY SERVICE OR THING OF VALUE, DIRECTLY OR INDIRECTLY, UPON MORE FAVORABLE TERMS THAN THOSE GRANTED TO THE PUBLIC GENERALLY IN CONNECTION WITH THE SUBMISSION, PROCESSING, ISSUANCE, GRANT OR AWARD OF THE WITHIN APPLICATION OR PETITION IN ZB OR BA CASE # _____ FOR A ZONING CHANGE AS REQUESTED.

I, WE, DO SOLEMNLY DECLARE AND AFFIRM UNDER THE PENALTIES OF PERJURY THAT THE CONTENTS OF THE AFOREGOING AFFIDAVIT ARE TRUE AND CORRECT TO THE BEST OF MY, OUR, KNOWLEDGE, INFORMATION AND BELIEF.

Richard C. Smith
Witness

Richard C. Smith
Witness

Witness

Richard S. Belliveau 2/29/96
Signature Date

Ellen J. Belliveau 2/29/96
Signature Date

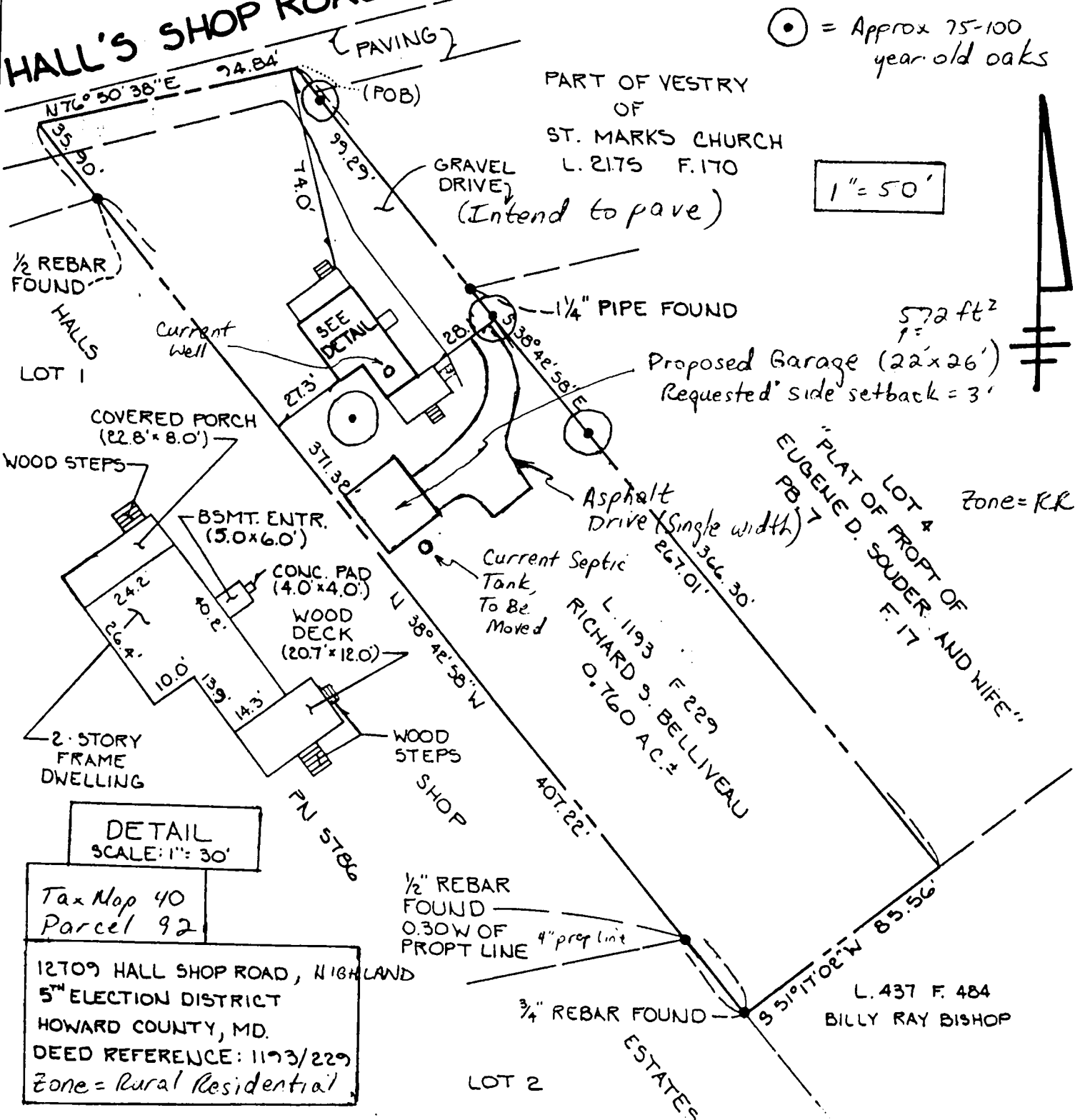
Signature Date

GENERAL NOTES:

12709 Hall Shop Rd

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- 2) SUBJECT PROPERTY IS SHOWN IN ZONE C ON THE NATIONAL FLOOD INSURANCE PROGRAM FLOOD INSURANCE RATE MAP OF HOWARD COUNTY, MARYLAND, COMMUNITY PANEL No. 2400440031B, EFFECTIVE DATE: DECEMBER 4, 1986
- 3) THE OFFSETS FROM BUILDING LINE TO PROPERTY LINE AS SHOWN ON THE PLAT HEREON ARE TO AN ACCURACY OF PLUS OR MINUS (4).

HALL'S SHOP ROAD



DETAIL SCALE: 1" = 30'

Tax Map 40
Parcel 92

12709 HALL SHOP ROAD, HIGHLAND
5TH ELECTION DISTRICT
HOWARD COUNTY, MD.
DEED REFERENCE: 1193/229
Zone = Rural Residential

Richard S. + Ellen J. Belliveau
12709 Hall Shop Rd, Highland, 207.77

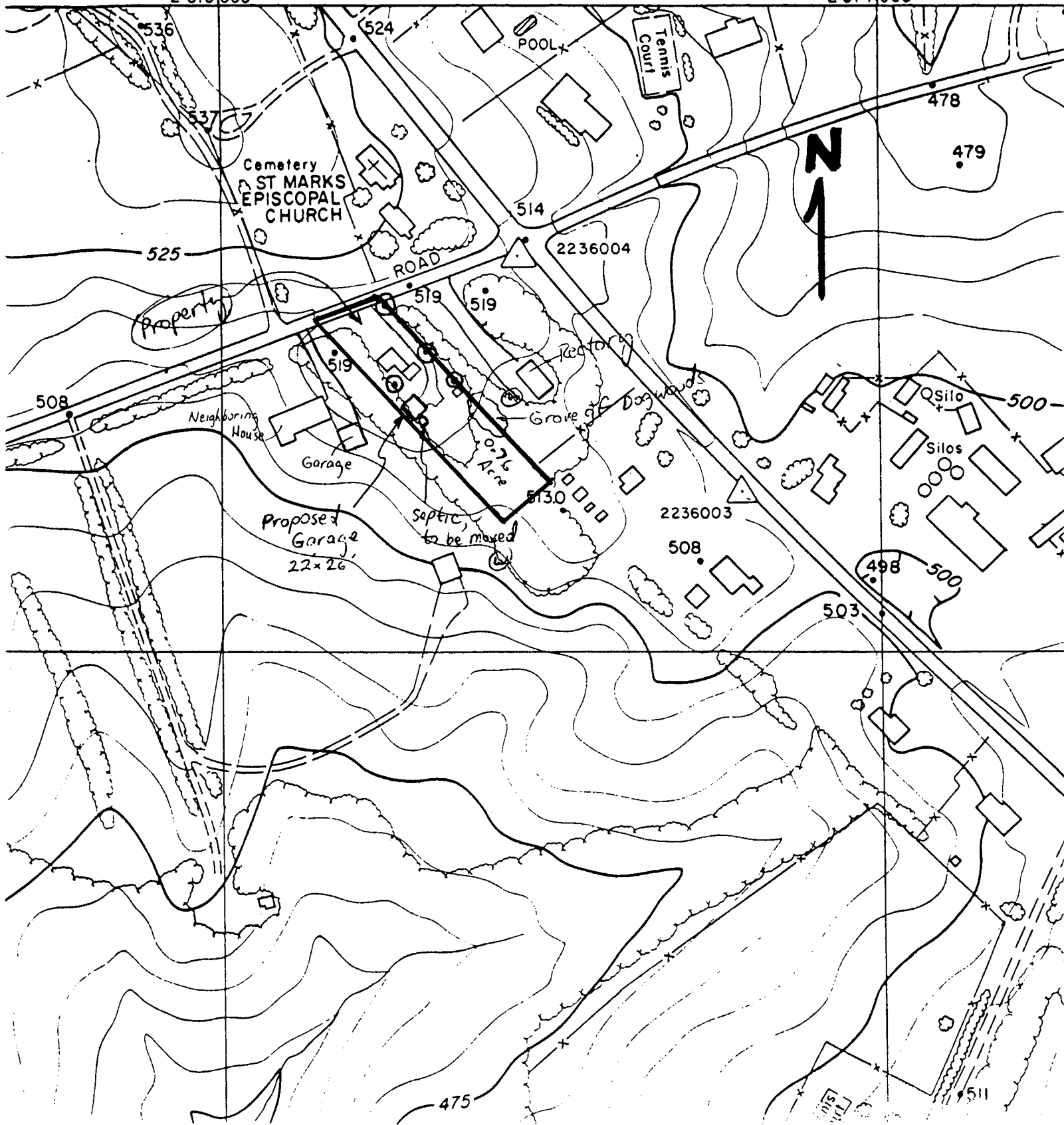
23-36

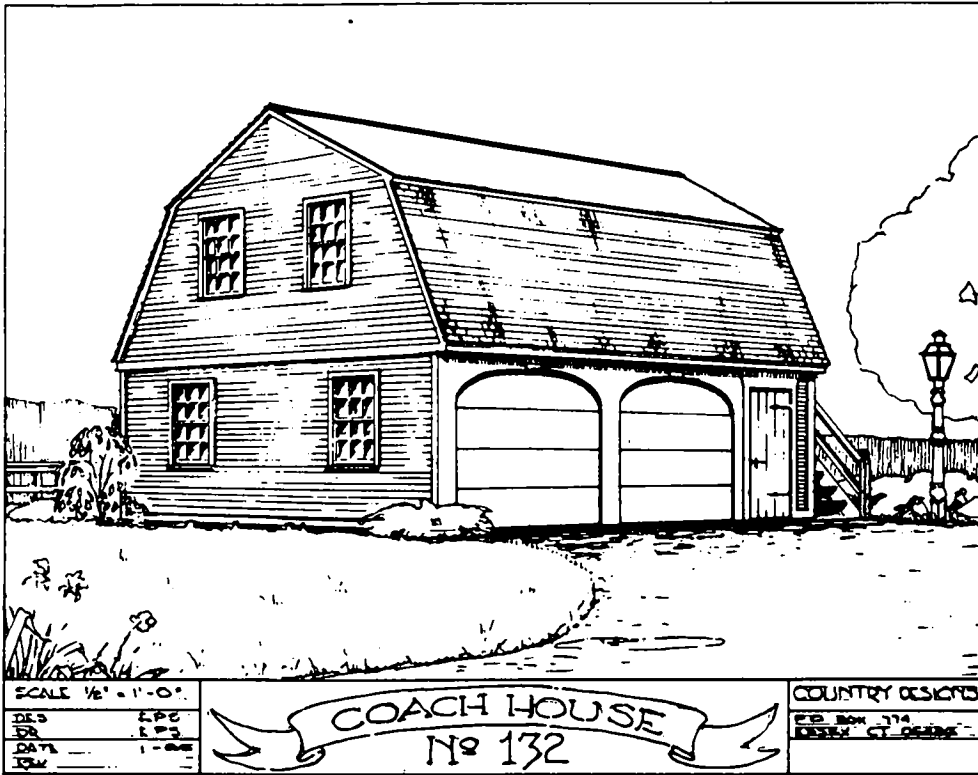
E 813.000

1"
200 feet

⊙ = 50-100 year old Oaks

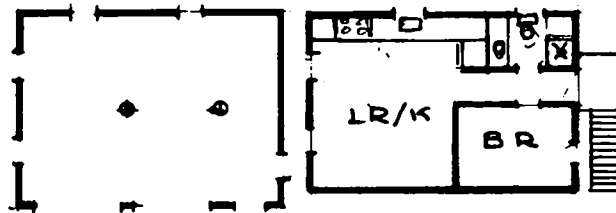
E 814.000





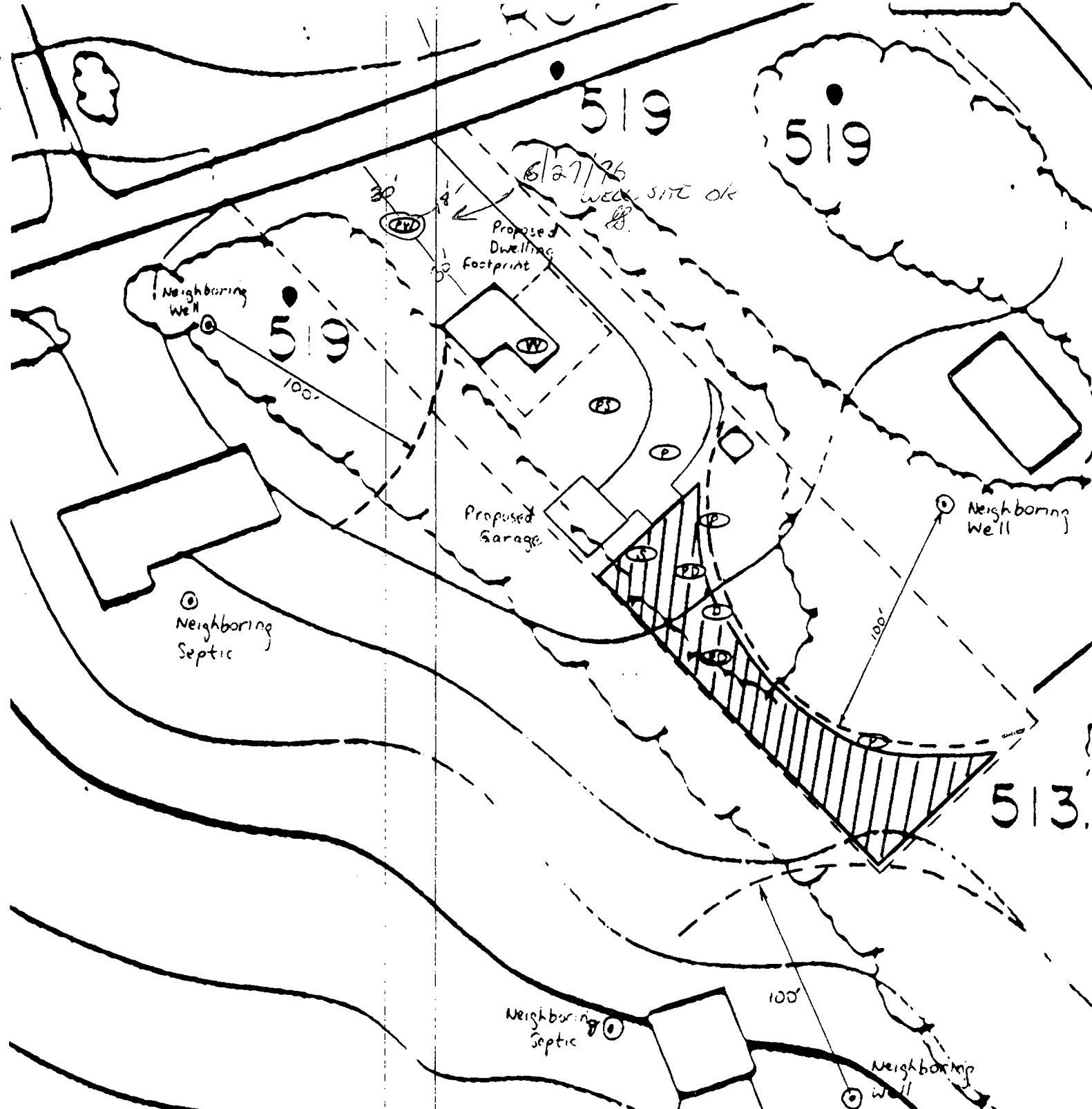
#132 COACH HOUSE

Size: 22'x26'
 2nd Fl: 20'x26'
 Area: 1092 Sq. Ft.
 Height: 22'-8"
 Price: \$60.00 p.p



This 2-car Gambrel roof garage has an equipment storage area on the first floor, plus a full second floor accessed by an outside stairway. Plans are included for finishing this area as a small but complete apartment, with a 12' x 8'-6" bedroom, bath with shower and a 13' x 17' livingroom-kitchen. Alternatively, this space makes an ideal office, studio, work room, or whatever you can fit into 20 x 25 feet of useful floor space.

Wood frame
 Clapboard siding
 Metal or Asphalt Roofs



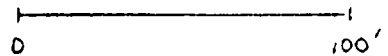
Notes:

1. Current dwelling is a 3 bedroom with 1-1/2 baths. Improvements call for 4-bedroom, 3-bath house and a detached garage with 1-full bath.
2. All wells and septic within 100 feet have been shown.

Legend:

■ This area designates a private sewerage easement as required by the Maryland State Department of the Environment for individual sewerage disposal. Improvements of any nature in this area restricted until public sewerage is available. These easements shall become null and void upon connection to a public sewerage system. The county Health Officer shall have the authority to grant variances for encroachments into the private sewerage easements. Recordation of a modified easement shall not be necessary.

- (W) Denotes the existing well to be replaced, abandoned and sealed.
- (S) Denotes the existing septic tank to be abandoned
- (D) Denotes the existing drywell to be disconnected, but left in place for future use
- (P) Denotes a field located perc site.
- (PW) Denotes proposed well location.
- (PS) Denotes proposed septic tank location.
- (PD) Denotes proposed replacement drywell locations

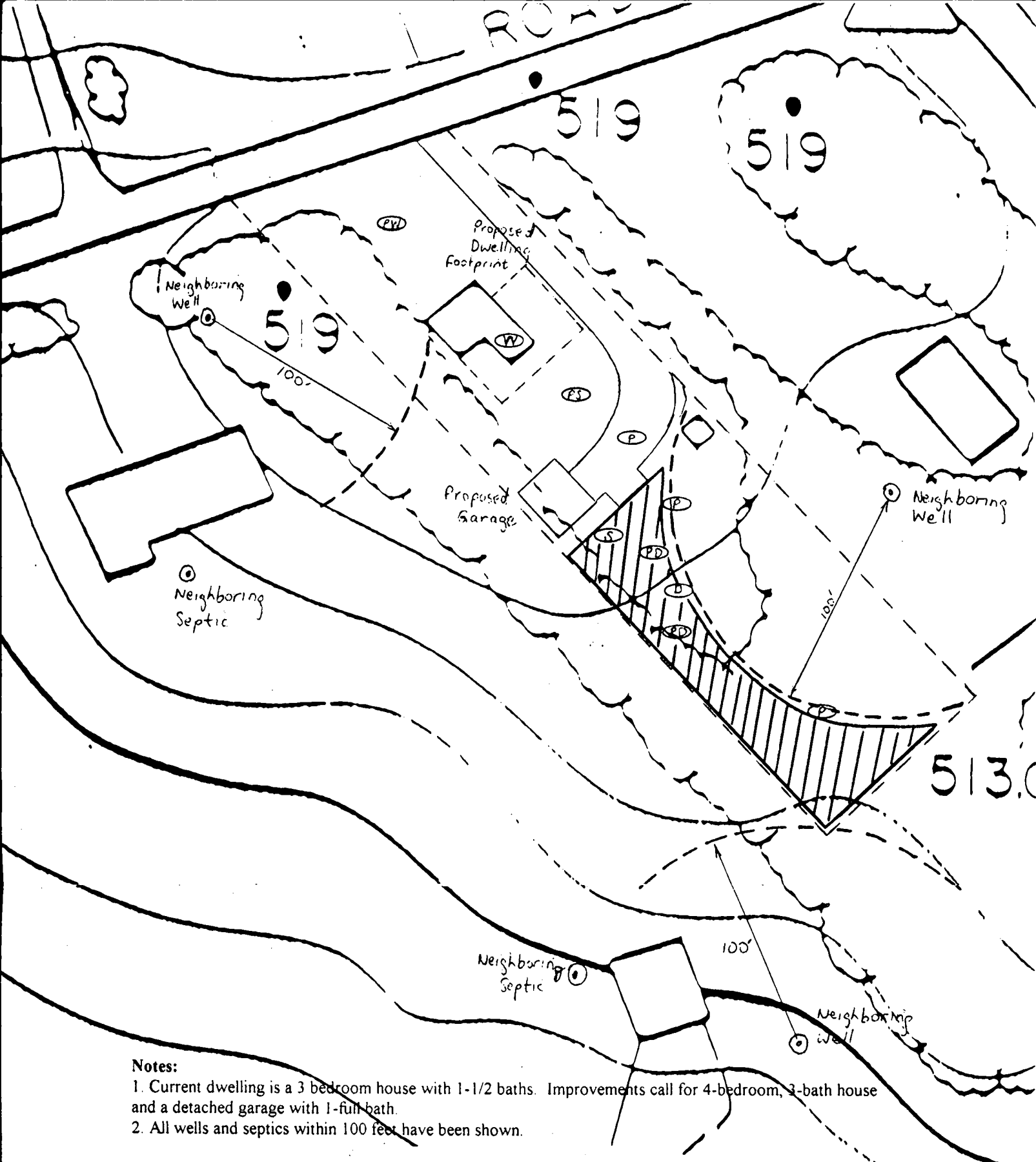


APPROVED FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS
HOWARD COUNTY HEALTH DEPARTMENT

HOWARD COUNTY HEALTH OFFICER DATE

All measurements are accurate to the best of my ability


Richard S Belliveau
Richard S Belliveau
12709 Hall Shop Road
Highland, MD 20777










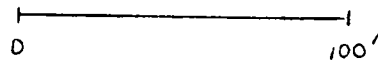
Notes:

1. Current dwelling is a 3 bedroom house with 1-1/2 baths. Improvements call for 4-bedroom, 3-bath house and a detached garage with 1-full bath.
2. All wells and septics within 100 feet have been shown.

Legend:

 This area designates a private sewerage easement as required by the Maryland State Department of the Environment for individual sewerage disposal. Improvements of any nature in this area restricted until public sewerage is available. These easements shall become null and void upon connection to a public sewerage system. The county Health Officer shall have the authority to grant variances for encroachments into the private sewerage easements. Recordation of a modified easement shall not be necessary.

-  Denotes the existing well to be replaced, abandoned and sealed.
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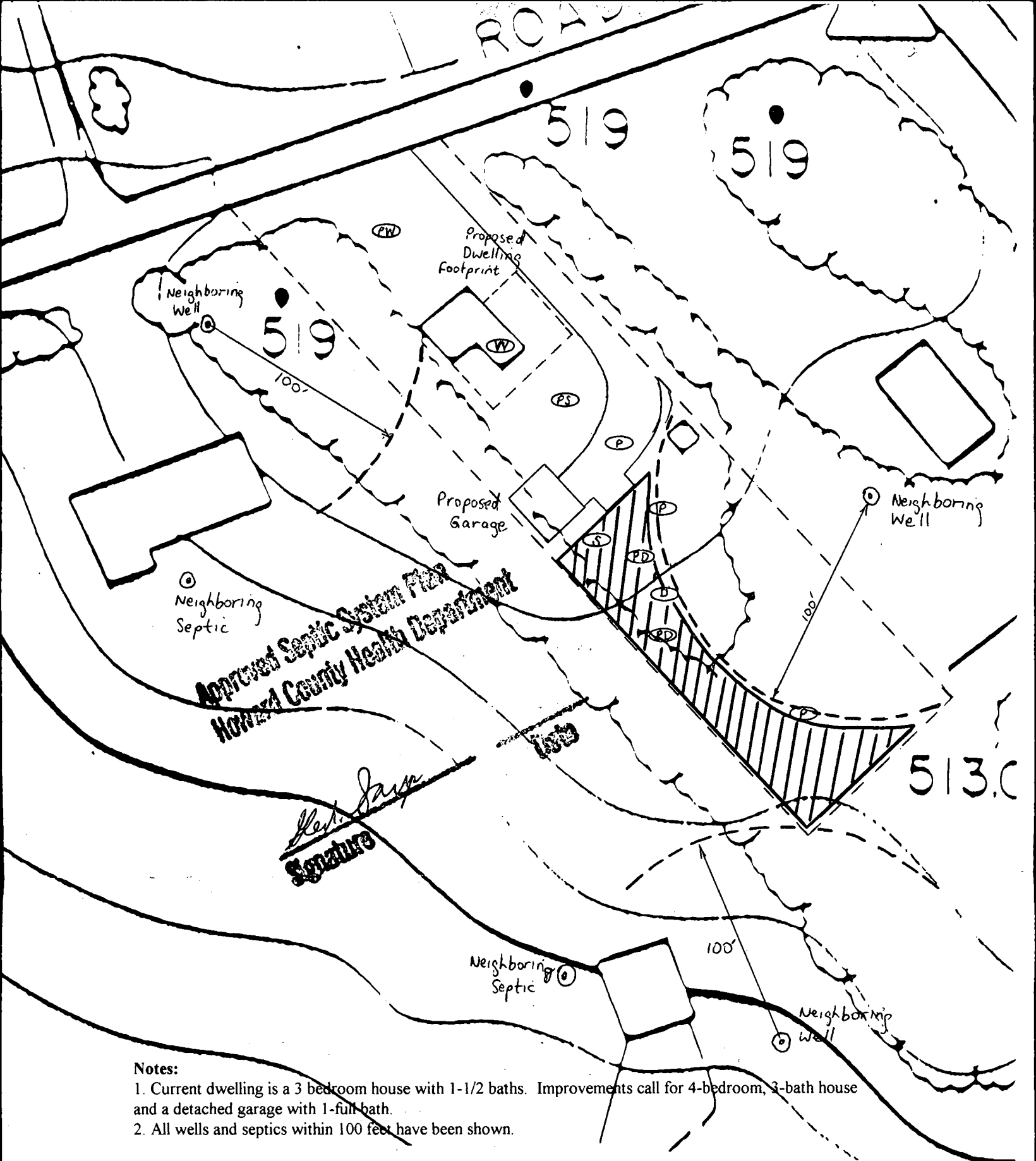


APPROVED: FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS
HOWARD COUNTY HEALTH DEPARTMENT

NA CW 5/12/96
HOWARD COUNTY HEALTH OFFICER DATE

All measurements are accurate to the best of my ability


Richard S Belliveau
Richard S. Belliveau
12709 Hall Shop Road
Highland, MD 20777










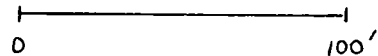
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-  Denotes the existing septic tank to be abandoned.
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-  Denotes proposed well location.
-  Denotes proposed septic tank location.
-  Denotes proposed replacement drywell locations.



APPROVED: FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS
HOWARD COUNTY HEALTH DEPARTMENT

R/S Belliveau
HOWARD COUNTY HEALTH OFFICER DATE: 6/17/96

All measurements are accurate to the best of my ability

Richard S. Belliveau
Richard S. Belliveau
12709 Hall Shop Road
Highland, MD 20777



HOWARD COUNTY HEALTH DEPARTMENT

Joyce M. Boyd, M.D., County Health Officer

April 23, 1996

Mr. and Mrs. Richard Belliveau
12709 Hall Shop Road
Highland, Maryland 20777

RE: Percolation Test Results
Application Number: Not Applicable
Proposed Use: Existing Residence
Property ID: 12709 Hall Shop Road
Tax Map: 40 Parcel Number: 92

Dear Mr. and Mrs. Belliveau:

Percolation testing was conducted April 18, 1996 on the above referenced property indicated *limited* satisfactory results. The primary limiting factors are the proximity of wells on adjacent properties and depth to suitable soils. Evaluation of your existing drywell indicated it to be failing. Copies of the percolation test results are enclosed.

Further review is contingent upon submission of site plan showing the following information.

- Actual locations & elevations of all excavated test holes
- A suitable well site (for replacement well)
- Locations of existing wells and septics that are on the property
- Show all existing structures on the property
- Locations of existing wells and septics within 100 feet of property boundaries
- Streams/swales/springs or any other relevant features
- Contour lines
- Location of proposed garage and addition

This plan should be submitted within 60 days to allow field verification if necessary.

If you have any questions regarding this matter, please contact me at the below address or by calling (410) 313-2640.

Very truly yours,

Glen Savage, Sanitarian
Water and Sewerage Program

G:jr
Enclosures
cc: Jack Fyock Septic Service
File

Department of Planning and Zoning
Howard County, Maryland
Recommendations/Comments

Date: 3/4/96

Planning Board n/a Board of Appeals 4/4/96 Zoning Board _____

Petition No. BA 96-11V Map No. 40 Block 11 Parcel 92 Lot _____

Return comments by 3/18/96 to Comprehensive Planning and Zoning Administration.

Location of Property: N side of Hall Shop Rd (12709 Hall Shop Rd)

Applicant: Richard and Ellen Belliveau

Applicant's Address: 12709 Hall Shop Road, Highland, MD 20777

Owner: (if other than applicant) same as above

Owner's Address: _____

Petition: Variance to reduce the 10' side stback to 3' for a garage.

TO:

- _____ Department of Education
- _____ Bureau of Environmental Health
- _____ Development Engineering Division
- _____ Department of Inspections, Licenses and Permits
- _____ Department of Recreation and Parks
- _____ Department of Fire and Rescue Services
- _____ State Highway Administration
- _____ Mark Paterni, Howard County Police Department
- _____ James Irvin, Department of Public Works
- _____ MD Depart. of Human Resources, Fran Sterner (child day care)
- _____ Office on Aging, Tricia Olsen (senior assisted living)
- _____ Police Department, Animal Control, Brenda Purvis (kennels)

COMMENTS: No objection. Prior to building permit approval,
applicant will need to demonstrate that adequate separation from any
neighboring well is maintained, and that adequate replacement septic
capacity has been established.

Mark Paterni 3/3/96
(Signature)

RESIDENTIAL DISTRICT VARIANCE PETITION
TO THE HOWARD COUNTY BOARD OF APPEALS

96 FEB 29 PM 3:13

For DPZ office use only:
CASE NO. BA96-110
DATE FILED 2/29/96
DATE ACCEPTED _____
FOR SCHEDULING _____

1. PETITIONER'S NAME RICHARD S. BELLIVEAU + Ellen J. Belliveau
TRADING AS (IF APPLICABLE) _____
ADDRESS 12709 HALL SHOP RD HIGHLAND, MD. 20777
PHONE NO. (W) 301-453-6000 x 8713 (H) 301-854-2033

2. COUNSEL FOR PETITIONER _____
COUNSEL'S ADDRESS _____
COUNSEL'S PHONE NO. _____

3. PROPERTY IDENTIFICATION:
ADDRESS OF SUBJECT PROPERTY 12709 HALL SHOP ROAD
HIGHLAND. MD 20777
TOTAL ACREAGE OF PROPERTY 0.760 AC.
PROPERTY LOCATION:
ELECTION DISTRICT: 5th ZONING DISTRICT: RR
TAX MAP # 40 BLOCK # unknown PARCEL/LOT # 92
SUBDIVISION NAME (if applicable): _____

4. PETITIONER'S INTEREST IN SUBJECT PROPERTY:
 OWNER (including joint ownership) OTHER (describe and
give name and address of owner)

If the Petitioner is not the owner of the subject property,
documentation from the owner authorizing the petition must
accompany this petition.

NOTE: Completed petition forms must be submitted before the
first day of the month in order to be heard on the last Tuesday
of the Month. Incomplete petitions may result in postponement.

The Board of Appeals may, at its discretion, refer a
variance petition in a residential district to the Planning Board
for review and a recommendation.

PLEASE READ CAREFULLY
DATA TO ACCOMPANY PETITION:

5. VARIANCE PLAN.

No application for a variance shall be considered complete unless the plan indicates the required setback or other requirement, and the requested variance from the subject setback or other requirement. The submitted plans shall be folded to approximately 8 1/2 x 14 inches.

The plan must be drawn to scale and must include the items listed below:

- (a) Courses and distances of outline boundary lines and the size of the property
- (b) North arrow.
- (c) Zoning of subject property and adjoining property.
- (d) Scale of plan.
- (e) Existing and proposed uses, structures, natural features and landscaping.
- (f) Location and surface material of existing and proposed parking spaces, driveways, and points of access; number of existing and proposed parking spaces.
- (g) Same as (e) and (f) above, of any adjoining property as necessary for proper examination of the petition.
- (h) Location of well and private sewerage easement area, if property is to be served by private water and sewer.
- (i) Election District in which the subject property is located.
- (j) "Tax Map and parcel number" on which the subject property is located.
- (k) Name of local community in which the subject property is located or name of nearby community.
- (l) Name and mailing address of the petitioner.
- (m) Name and mailing address of attorney, if any.
- (n) Name and mailing address of property owner.
- (o) Floor area and height of structures, setback distances from property lines, and other numerical values necessary for the examination of the petition.
- (p) Location of subject property in relation, by approximate dimension, to the center line of nearest intersection of two public roads.
- (q) Ownership of affected roads.
- (r) A detailed description of all exterior building materials for all proposed structures.
- (s) Any other information as may be necessary for full and proper consideration of the petition.

Go to page 3.

98108-6 PM 2:26

6. OTHER DATA TO ACCOMPANY PETITION.

The Petitioner must also submit with the petition an area location map (tax map) of the subject property, indicating the street address of the site, the zoning district of the site and the zoning district of all adjacent properties.

7. VARIANCE REQUEST.

The undersigned hereby petition the Board of Appeals for a variance from the requirement(s) of section 105.E.4.D. (2.(B)) of the Zoning Regulations to: (describe) Reduce the ^{side} Setback from 10' to 3'.

A) Describe why the Zoning Regulations in question would result in practical difficulties or unnecessary hardships in complying strictly with the bulk requirements:

narrowness, () shallowness, () shape, () topography, () other; explain: _____

B) If exceptional narrowness, shallowness or shape of the property is claimed, give the date of the recording of the plat of present subdivision, if any: NA; or if property is not subdivided, give the date on which a deed conveying the identically bounded tract was first recorded:

Sept. 6, 1967

C) The intended use of the property, in the event the petition is granted: garage with office in second level, with one bathroom

D) Any other factors which the Petitioner desires to have considered: Other locations for garage on lot endanger large trees and result in less desirable appearance from street.

Go to page 4.

E) Explain why the requested variance is the minimum necessary to afford relief: This lot measures 85' wide. The side setback of 10' would put the proposed garage near the center of the lot, cutting off view and use of yard.

F) Is the property connected to: public water?: Y ___ N
public sewer?: Y ___ N

G) If the requested variance is granted, would it impact the water and/or septic/sewer on the site? Y N ___ explanation included. Septic to be relocated.

H) If the requested variance is granted, would it increase the intensity of uses on the site? Y ___ N ; if yes, explain: NA

I) If the requested variance is granted, would it increase traffic to or from the site? Y ___ N ; if yes, explain: NA

J) Describe in detail (i.e. width, type of paving, etc.) all means of vehicular access onto the site: A One-car-width asphalt driveway with a turnaround.

K) Describe the topography of the site: Level lot.

L) Will the existing or proposed structure be visible from adjacent properties? Y N ___; if yes, describe any proposed buffering or landscaping: Proposed garage is distant (100'-200' respectively) from neighboring houses. View is screened by pre-existing woods.

Go to Page 5

M) Describe any existing buffering or landscaping: _____

Buffering is provided by distance (100' to nearest neighbor)
and the area is wooded.

8. PRIOR PETITIONS. Has any petition for the same, or substantially the same, variance as contained herein for the same property as the subject of this petition been disapproved by the Board of Appeals within twenty four (24) months of the date of this petition?

() YES (✓) NO If yes, and six (6) months have elapsed since the last hearing, an affidavit setting forth new and different grounds on which re-submittal is based must be attached.

8. ADDITIONAL MATERIAL, FEES, POSTING, AND ADVERTISING:

A) If desired, supplemental pages may be attached to the petition. The following number of petitions, plans and supplemental pages must be submitted:

23 copies if the subject property adjoins a State road.

19 copies if the subject property adjoins a County road.

B) The undersigned agrees to furnish such additional plats, plans, reports or other material as may be required by the Department of Planning and Zoning and/or the Board of Appeals in connection with the filing of this petition.

The undersigned agrees to pay all costs in accordance with the current schedule of fees.

The undersigned also agrees to properly post the property at least fifteen (15) days prior to the hearing and to maintain the property posters as required and submit an affidavit of posting at, or before the time of the hearing. The undersigned also agrees to insert legal notices, to be published one (1) time in at least two (2) newspapers of general circulation in Howard County, as prepared and approved by the Department of Planning and Zoning, within at least fifteen (15) days prior to the hearing, and to pay for such advertising costs; and further agrees to submit two (2) approved certificates of the text and publication date(s) of the advertisement at or before the time of the hearing.

Go to page 5.

9. SIGNATURES.

The undersigned hereby affirms that all of the statements and information contained in, or filed with, this petition are true and correct.

The undersigned has read the instructions on this form, filing herewith all of the required accompanying information.

Richard J. Belliveau
Signature of Petitioner

Ellen J. Belliveau

Signature of Attorney

For DPZ office use only: (Filing fee is \$450.00 plus \$15.00 per poster.)

Hearing fee: \$ _____

Poster fee: \$ _____

TOTAL: \$ _____

Receipt No. _____

(Make checks payable to "Director of Finance")

Go to page 7

92:7:119 9-18-05

GENERAL REQUIREMENTS:

The Petitioner shall note that all requests for variances must meet the following requirements of section 130.B.2.a.(1) through (5) of the Howard County Zoning Regulations in order to be approved:

(1) That there are unique physical conditions, including irregularity, narrowness or shallowness of lot or shape, exceptional topography or other existing features peculiar to the particular lot; and that as a result of such unique physical conditions, practical difficulties or unnecessary hardships arise in complying strictly with the bulk provisions of these regulations.

2. That the variance, if granted, will not alter the essential character of the neighborhood or district in which the lot is located; will not substantially impair the appropriate use or development of adjacent property; and will not be detrimental to the public welfare.

3. That such practical difficulties or hardships have not been created by the owner provided, however, that where all other required findings are made, the purchase of a lot subject to the restrictions sought to be varied shall not itself constitute a self-created hardship.

4. That within the intent and purpose of these regulations, the variance, if granted, is the minimum variance necessary to afford relief.

5. That no variance be granted to the minimum criteria established in Section 131 for special exception uses, except where specifically provided therein or in an historic district. Nothing herein shall be construed to prevent the granting of variances in any zoning district other than to the minimum criteria established in Section 131 except as provided therein.

ZB or BA CASE # _____

PETITIONER Richard S. + Ellen J. Belliveau

ADDRESS 12709 Hallshop Rd Highland MD 20777

Affidavit made pursuant to the pertinent provisions of Title 22 of the Howard County Code as amended.

THE UNDERSIGNED DOES HEREBY DECLARE THAT NO OFFICER OR EMPLOYEE OF HOWARD COUNTY, WHETHER ELECTED OR APPOINTED, HAS RECEIVED PRIOR HERETO OR WILL RECEIVE SUBSEQUENT HERETO, ANY MONETARY OR MATERIAL CONSIDERATION, ANY SERVICE OR THING OF VALUE, DIRECTLY OR INDIRECTLY, UPON MORE FAVORABLE TERMS THAN THOSE GRANTED TO THE PUBLIC GENERALLY IN CONNECTION WITH THE SUBMISSION, PROCESSING, ISSUANCE, GRANT OR AWARD OF THE WITHIN APPLICATION OR PETITION IN ZB OR BA CASE # _____ FOR A ZONING CHANGE AS REQUESTED.

I, WE, DO SOLEMNLY DECLARE AND AFFIRM UNDER THE PENALTIES OF PERJURY THAT THE CONTENTS OF THE AFOREGOING AFFIDAVIT ARE TRUE AND CORRECT TO THE BEST OF MY, OUR, KNOWLEDGE, INFORMATION AND BELIEF.

Richard C. Smith
Witness

Richard C. Smith
Witness

Witness

Richard S. Belliveau 2/27/96
Signature Date

Ellen J. Belliveau 2/29/96
Signature Date

Signature Date

95-MR-6 PM 2:27

Richard S. + Ellen J. Belliveau
12709 Hall Shop Rd, Highland, 207.77

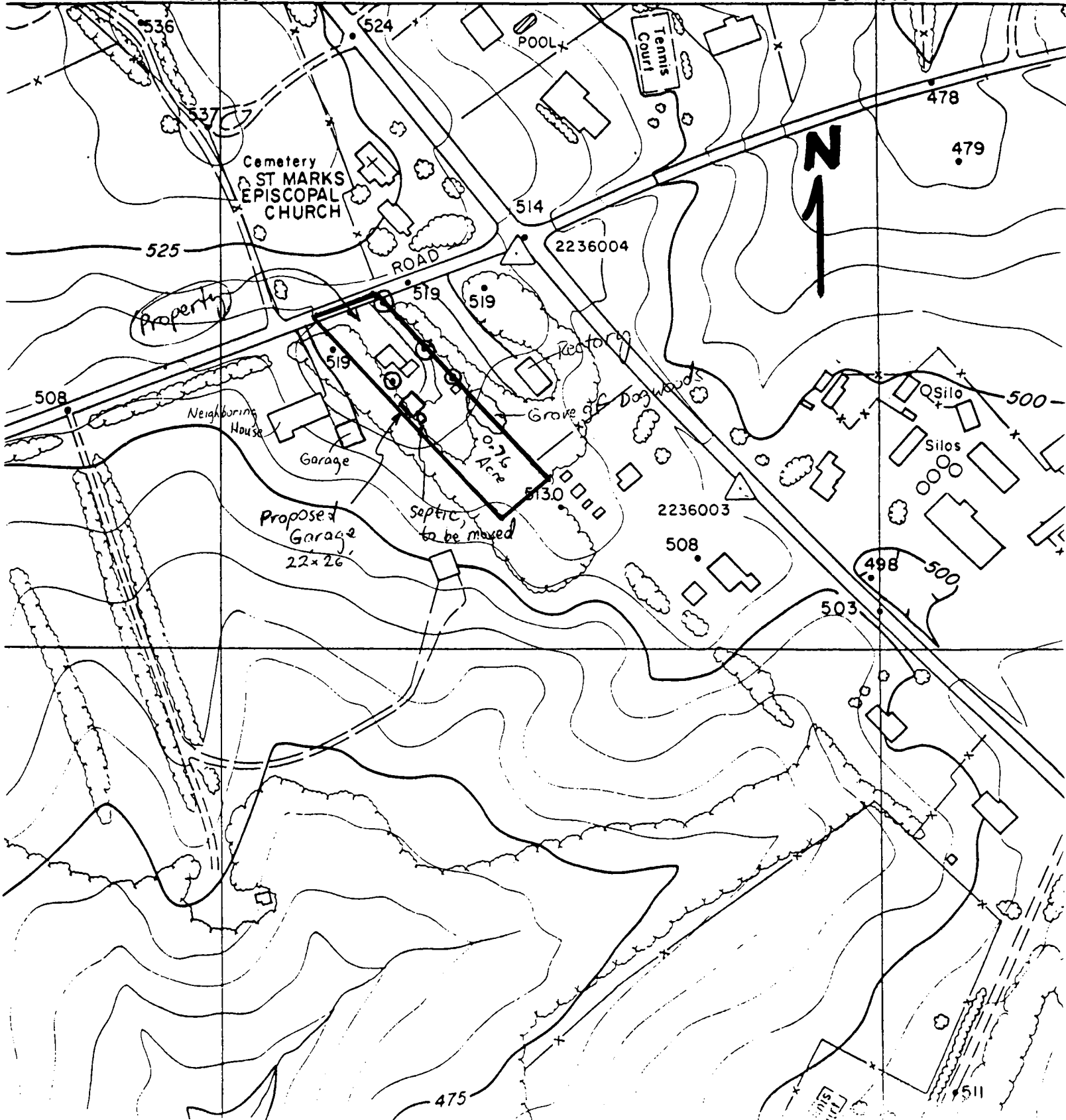
23-36

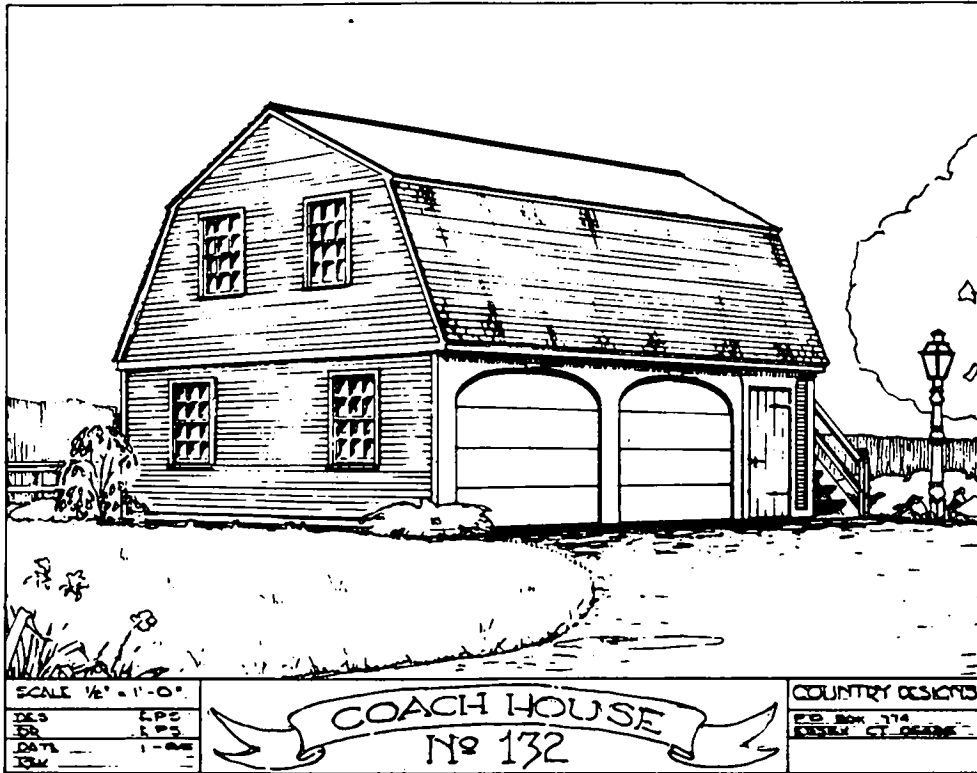
E 813,000

1"
200 feet

⊙ = 50-100 year old Oaks

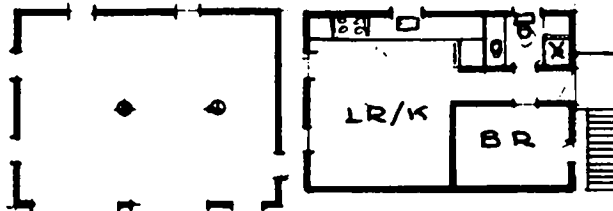
E 814,000





#132 COACH HOUSE

Size: 22'x26'
 2nd Fl: 20'x26'
 Area: 1092 Sq. Ft.
 Height: 22'-8"
 Price: \$60.00 p.p



This 2-car Gambrel roof garage has an equipment storage area on the first floor, plus a full second floor accessed by an outside stairway. Plans are included for finishing this area as a small but complete apartment, with a 12' x 8'-6" bedroom, bath with shower and a 13' x 17' livingroom-kitchen. Alternatively, this space makes an ideal office, studio, work room, or whatever you can fit into 20 x 25 feet of useful floor space.

Wood frame
 Clapboard siding
 Metal or Asphalt Roofs

 WATER WELL ABANDONMENT-SEALING REPORT FORM

SUBMIT COPIES OF COMPLETED FORM TO:

- * COUNTY ENVIRONMENT AGENCY (contact MDE, WMA if address needed)
- * WELL OWNER
- * MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DATE WELL ABANDONED: 5/12/99 (month/day/year)

12709 Hall Shop Road

* PERMIT NUMBER OF ABANDONED WELL (if any)

--	--	--	--	--	--	--	--

* PERMIT NUMBER OF REPLACEMENT WELL

4	0	-	9	4	-	0	8	2	8
---	---	---	---	---	---	---	---	---	---

* PERSON ABANDONING WELL: _____

WELL DRILLERS LICENSE NUMBER: _____
 CIRCLE: MWD/MSD/MGD

* OWNER'S NAME: Richard Belliveau

* WELL LOCATION:

COUNTY: Howard Co
 NEAREST TOWN: Fulton
 TAX MAP 40 BLOCK 11 PARCEL 92
 SUBDIVISION: N/A
 SECTION: N/A LOT: N/A

0 0 0	
0 0 0	

MARYLAND GRID COORDINATES

BOX NUMBER E _____
 N _____

SHOW WELL LOCATION BY X WITHIN BOX

* TYPE OF WELL BEING ABANDONED:

- DRILLED
- BORED/AUGURED
- OTHER (specify) _____
- JETTED
- HAND DUG

* USE CODE:

- DOMESTIC
- IRRIGATION
- TEST/OBSERVATION
- MUNICIPAL/PUBLIC
- INDUSTRIAL

* TYPE OF CASING:

- STEEL
- CONCRETE
- PLASTIC
- OTHER (specify) _____

* SIZE OF CASING: 2 1/2 INCHES IN DIAMETER

* DEPTH OF WELL: 39 FEET DEEP

* WAS ANY CASING REMOVED? YES _____ NO
 if yes, length removed, in feet: 9'

* WAS CASING RIPPED OR PERFORATED? _____ YES NO

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
concrete	39'	8 1/2'

Amy M. Mellen, R.S.
 SIGNATURE - MASTER WELL DRILLER OR SUPERVISING SANITARIAN

MWD/MSD/MGD 5/12/99
 CIRCLE ONE DATE

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- * WELL OWNER
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DATE WELL ABANDONED: 5/12/99 (month/day/year)

12709 Hall Shop Road

* PERMIT NUMBER OF ABANDONED WELL (if any)

--	--	--	--	--	--	--	--

* PERMIT NUMBER OF REPLACEMENT WELL

4	0	-	9	4	-	0	8	2	8
---	---	---	---	---	---	---	---	---	---

* PERSON ABANDONING WELL: _____

WELL DRILLERS LICENSE NUMBER: _____
 CIRCLE: MWD/MSD/MGD

* OWNER'S NAME: Richard Belliveau

* WELL LOCATION:

COUNTY: Howard Co
 NEAREST TOWN: Fulton
 TAX MAP 40 BLOCK 11 PARCEL 72
 SUBDIVISION: N/A
 SECTION: N/A LOT: N/A

0 0 0	
0 0 0	

MARYLAND GRID COORDINATES

BOX NUMBER E _____
 N _____ ←

SHOW WELL LOCATION
 BY X WITHIN BOX

* TYPE OF WELL BEING ABANDONED:

- DRILLED
- BORED/AUGURED
- OTHER (specify) _____
- JETTED
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LOG OF SEALING MATERIAL

MATERIAL	FEET	
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- CONCRETE
- PLASTIC
- OTHER (specify) _____

* SIZE OF CASING: 2 1/2 INCHES IN DIAMETER

* DEPTH OF WELL: 39 FEET DEEP

* WAS ANY CASING REMOVED? YES NO
 if yes, length removed, in feet: 9'


* WAS CASING RIPPED OR PERFORATED? YES NO

Amir M. Meller R.S.
 SIGNATURE- MASTER WELL DRILLER OR SUPERVISING SANITARIAN

LICENSE # _____ MWD/MSD/MGD 5/12/99
 CIRCLE ONE DATE

January 15, 1999

TO: Mr. Richard Belliveau
12709 Hall Shop Road
Highland, Maryland 20777

FROM: Donna K. Soe, R.S. 
Water and Sewerage Program

RE: Status of hand dug well at 12709 Hall Shop Road

According to Health Department records, the above referenced hand dug well has not yet been abandoned. Please be aware that abandonment of this well was a condition of approval of the well permit application for the replacement well installed under permit #HO-94-0828.

If the hand dug well has been previously abandoned, it is requested that you submit to this office a copy of the well abandonment report. However, if the well has not been abandoned, it is imperative that the well abandonment be performed, either by a licensed well driller or by another qualified individual with the Health Department present..

Thank you in advance for your prompt attention in this important matter. If you have any questions or concerns, please do not hesitate to contact me at the address below or by calling (410) 313-2640.

DKS

cc: file



HOWARD COUNTY HEALTH DEPARTMENT

Joyce M. Boyd, M.D., County Health Officer

March 19, 1999

Richard and Ellen Belliveau
12709 Hall Shop Road
Highland, MD 20777

RE: Building Permit Application B00116402
12709 Hall Shop Road
Proposed Large Addition

Dear Mr. Belliveau:

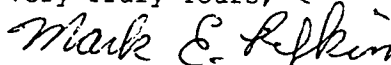
This is to confirm that the referenced building permit application was recommended for approval subject to the following conditions:

that the hand dug well which once served the dwelling will be properly filled and sealed at the earliest opportunity, based on removal of the existing structure above it. Demolition of this structure should direct all materials away from the well to prevent contamination.

The well abandonment can best be accomplished by a licensed well driller. If you choose to select another contractor, at least 24 hours prior to doing any work on the well, your contractor is to contact this office to discuss suitable procedures and materials.

These conditions were discussed with you, Ellen Belliveau, on March 16, 1999. This office's recommendation for approval was based upon your acceptance of these conditions.

Please contact this office at (410) 313-2640 if you have any questions.

Very Truly Yours,

Mark E. Rifkin, R.S.
Water & Sewerage Program

MR
cc: File

10-2
GARAGE
OK - *ff*

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043

Fax 313-2648 313-2640

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation _____
Replacement

Receipt # _____
Date 7/12/96 ~~7-12-1995~~

Name of Installer ROBERT L. FEELER CO. INC Telephone 795-1405

License Number 2122
Certified Well Pump Installer Well Driller _____ Registered Plumber

Name of Property Owner ROCK BELLIVIAU Telephone 781-4655
Subdivision N/A Lot # N/A Well Tag # 40-94-0828
Site Address 12709 HAWES STOP RD.

Pump	Motor	Pitless Adapter
1. Type	1. Horsepower <u>3/4</u>	1. Make <u>HARVARD</u>
a. Deep well jet _____	2. RPM <u>3610</u>	2. Model # <u>PT800</u>
b. Shallow well jet _____	3. Voltage _____	3. Depth <u>42'</u>
c. Submersible <input checked="" type="checkbox"/>	a. 110 _____	
2. Make <u>STARLINE</u>	b. 220 <input checked="" type="checkbox"/>	
3. Model # <u>SP4025L</u>		
4. Capacity <u>5</u> GPM		
5. Pump exceeds well capacity Yes _____ No _____		
6. If Yes, is low pressure cutoff switch installed? Yes _____ No _____		
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors _____ Cable guards _____ Other _____		

Tank <u>CAPTIVE APL</u> <u>WX-205</u>	Piping	Well data
1. Capacity <u>36 GPM</u>	1. Type <u>PVC</u>	1. Depth <u>340</u> ft.
2. Pressure relief valve? <u>YES</u>	2. Size <u>1"</u>	2. Yield <u>10</u> GPM
	3. NSF and/or BCCA Code approved <input checked="" type="checkbox"/>	3. Static water level _____ ft.
	4. Depth of supply line <u>42"</u>	4. Will water supply be disinfected by installer? <u>YES</u>

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.
Signature of Applicant: *Robert L. Feeler*
Date: 7/12/96

Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.

C 1 **4582** SEQUENCE NO. (MDE USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
WELL COMPLETION REPORT
 FILL IN THIS FORM COMPLETELY
 PLEASE PRINT OR TYPE

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
 COUNTY NUMBER **A-13108**

ST/CO USE ONLY
 DATE RECEIVED [] [] [] [] [] []
 8 13

DATE WELL COMPLETED **070396**
 15 20
 Depth of Well **345**
 22 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL"
OK 123106 J.S. HA 94-0828
 28 29 30 31 32 33 34 35 36 37

OWNER **BELIVEAU RICHARD**
 STREET OR RFD **12709 HALL SHOP ROAD** TOWN **HIGHLAND**
 SUBDIVISION _____ SECTION _____ LOT _____

WELL LOG
 Not required for driven wells

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

DESCRIPTION (Use additional sheets if needed)	FEET		check if water bearing
	FROM	TO	
Sand	0	97	
Gray Mica Rock	97	345	✓

GROUTING RECORD (yes no
 WELL HAS BEEN GROUTED (Circle Appropriate Box)
 TYPE OF GROUTING MATERIAL (Circle one)
 CEMENT **CM** BENTONITE CLAY **BC**
 NO. OF BAGS **25** NO. OF POUNDS **2350**
 GALLONS OF WATER **158**
 DEPTH OF GROUT SEAL (to nearest foot)
 from **0** ft to **80** ft
 48 52 54 58 (enter 0 if from surface)

CASING RECORD
 casing types insert appropriate code below
ST STEEL **CO** CONCRETE
PL PLASTIC **OT** OTHER
 MAIN CASING TYPE **ST** Nominal diameter top (main) casing (nearest inch!) **6** Total depth of main casing (nearest foot) **102**
 60 61 63 64 66 70

OTHER CASING (if used)
 diameter inch _____ depth (feet) from _____ to _____
 E A C H C A S I N G

SCREEN RECORD
 screen type or open hole insert appropriate code below
ST STEEL **BR** BRASS BRONZE **HO** OPEN HOLE
PL PLASTIC **OT** OTHER

NUMBER OF UNSUCCESSFUL WELLS: **0**
 WELL HYDROFRACTURED **Y** (no)

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.

TYPE: MWD/MSD/MGD **24**
 DRILLERS LIC. NO. **Joseph L. Mayne**

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)
 LIC. NO. _____

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

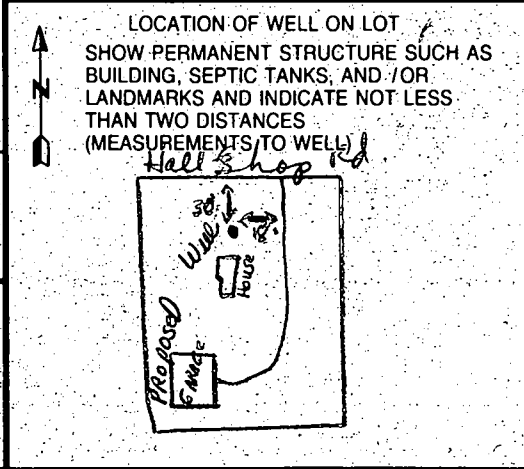
C 2
 T 2 DEPTH (nearest ft.)
 E A C H S C R E E N
HO 100 345
 8 9 11 15 17 21
 23 24 26 30 32 36
 38 39 41 45 47 51
 SLOT SIZE 1 _____ 2 _____ 3 _____
 DIAMETER OF SCREEN _____ (NEAREST INCH)
 56 60

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 Q
 70 72 74 75 76
 TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3
PUMPING TEST
 HOURS PUMPED (nearest hour) **3**
 8 9
 PUMPING RATE (gal. per min.) **10**
 11 15
 METHOD USED TO MEASURE PUMPING RATE **air**
 WATER LEVEL (distance from land surface)
 BEFORE PUMPING **64** ft.
 17 20
 WHEN PUMPING **280** ft.
 22 25
 TYPE OF PUMP USED (for test)
A air **P** piston **T** turbine
C centrifugal **R** rotary **O** other (describe below)
J jet **S** submersible

PUMP INSTALLED
 DRILLER WILL INSTALL PUMP YES (NO)
 (CIRCLE) (YES or 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)
+ above **2** (nearest foot)
- below 50 51



B 1 1951 SEQUENCE NO. (MDE USE ONLY) STATE OF MARYLAND PERMIT TO DRILL WELL please print or type STATE PERMIT NUMBER **HO-94-0828**
70 fill in this form completely 79

OWNER INFORMATION
 Date Received (APA) **060296**
BELLIVEAU RICHARD
15 Last Name Owner First Name 34
12709 HALL SHOP ROAD
36 Street or RFD 55
HIGHLAND **MD 20777**
57 Town 70 State 72 Zip 76

LOCATION OF WELL
HOWARD
8 COUNTY 21
 23 SUBDIVISION _____ 42
 SECTION _____ LOT _____
44 46 48 50
HIGHLAND
52 NEAREST TOWN 71
 MILES FROM TOWN (enter 0 if in town) $\frac{1}{2}$ MI
73 76 77 78

DRILLER INFORMATION CIRCLE: MSD/MGD/MWD
 Driller's Name **Joseph L. Mayne** License No. **24**
 Firm Name **Joseph L. Mayne Well Drilling**
 Address **5512 Ridge Rd. Mt. Airy, Md. 21771**
 Signature **Joseph L. Mayne** Date **6/19/96**

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

 NEAR WHAT ROAD **12709 Halla Shop Road**
11 30
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

 DISTANCE FROM ROAD **40** FT
34 37 38 39
 ENTER FT OR MI **FT**
 TAX MAP: _____ BLK: _____ PARCEL: _____

WELL INFORMATION
 APPROX. PUMPING RATE (GAL. PER MIN.) **5**
8 12
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **500**
14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)
 HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
 INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
 PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
 TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
 COUNTY NAME **HOWARD** COUNTY NO. **A-13168**
 STATE SIGNATURE _____ INSERT S
 DATE ISSUED **062796** **Bl. Mayne** **6/27/97**
43 48 CO SIGNATURE EXP DATE 41
 NORTH GRID **810000** EAST GRID **480000**
50 55 57 63

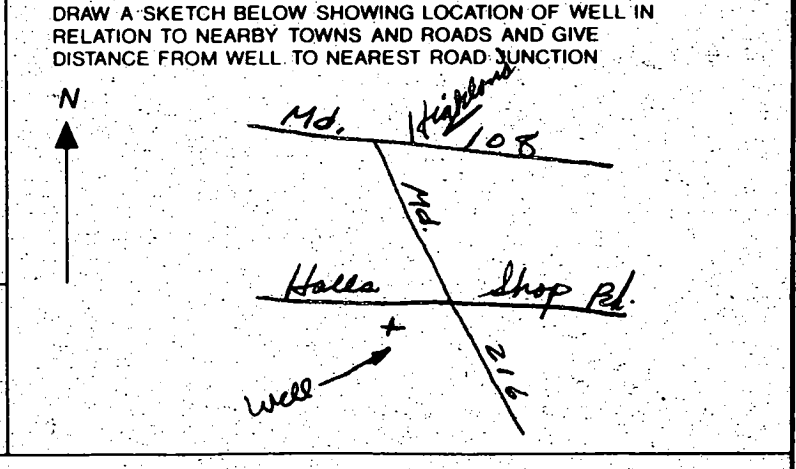
APPROXIMATE DEPTH OF WELL **280** FEET
24 28

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
 SOURCES OF DRILLING WATER
 1. **WELL**
 2. _____
 3. _____
 WRITE THE BOX NUMBER FROM THE MAP HERE
 N **810**
 N **480**
000 000

APPROXIMATE DIAMETER OF WELL **6** INCH
NEAREST INCH

METHOD OF DRILLING (circle one)
 BORED (or Augered) JETTED Jetted & DRIVEN
 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)
 CABLE REVerse-ROTary DRive-POINT
 other _____

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)
 THIS WELL WILL NOT REPLACE AN EXISTING WELL
 THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY- CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
 THIS WELL WILL DEEPEAN 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)
 APPROX. PERMIT NUMBER _____
54 63
 FORCE **GS** WRITE INITIALS IN BOX PERMIT No. **MD-94-0828**
87 88 70 71 72 73 74 75 76 77 78 79

