

7/12/00
7:00 AM
7/13/00
11:00

04-310314

PERMIT

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

P513577

A REPAIR

ISSUE DATE 5-3-2000

APPROVAL DATE 7/13/00

INDEXED

KME Construction IS PERMITTED TO INSTALL ALTER

ADDRESS 12584 Hall Shop Road, Fulton, MD 20759 PHONE

SUBDIVISION LOT NUMBER ADDRESS 4641 Dorsey Mill Road

PROPERTY OWNER Brindza PROPERTY OWNER'S ADDRESS Same

SEPTIC TANK CAPACITY ex. GALLONS

PUMP CHAMBER CAPACITY N/A GALLONS

NUMBER OF BEDROOMS Ex. 4 - To be 5

SQUARE FEET PER BEDROOM 156.25

LINEAR FEET OF TRENCH REQUIRED 42

TRENCHES: Trenches to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth feet below original grade. 7 feet of stone below distribution box.

LOCATION: To upgrade existing septic system to accommodate additional bedroom.

*Install one 42 ft long trench parallel to existing trench, connected via drop well.
Trench to be 10ft deep, 2ft wide, inlet @ 3', 7ft stone fill. Stop trench just short
of gravel driveway. R/H 7/12/00*

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

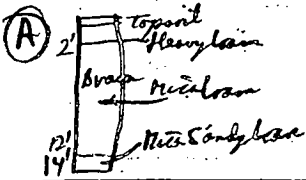
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

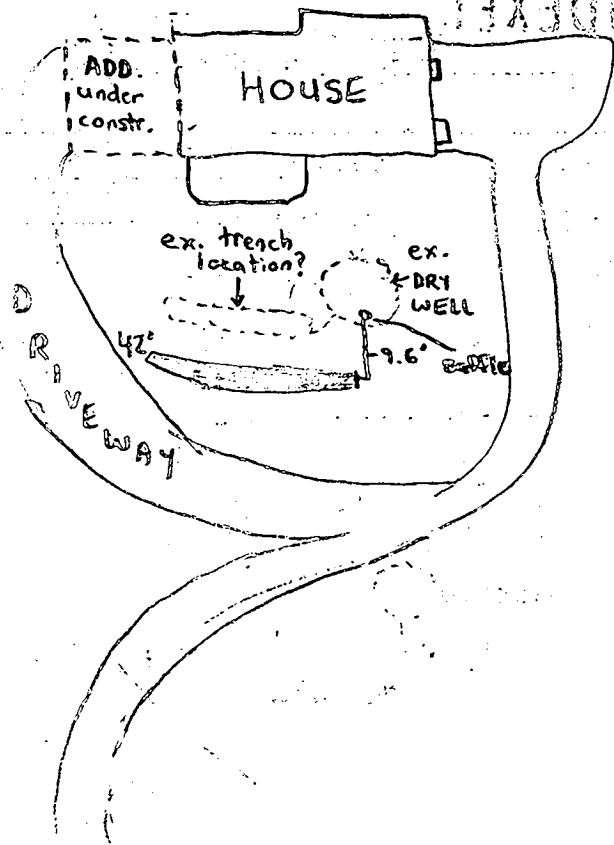
PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT
CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

513577



NOT TO SCALE

Well No-73-2350



TRENCH DATA

TRENCH WIDTH 2
 TRENCH INLET DEPTH 3
 TRENCH BOTTOM DEPTH 7
 DEPTH OF STONE 4
 NUMBER OF TRENCHES 1
 TOTAL TRENCH LENGTH 42'
 ABSORBENT AREA 168 ft²
 DISTRIBUTION BOX LEVEL N/A
 BAFFLE IN DISTRIBUTION BOX N/A

SEPTIC TANK DATA

SEPTIC TANK ex. GALLONS
 MANHOLE RISER None
 6 INCH INSPECTION PORT ex.

PUMP CHAMBER DATA

PUMP CHAMBER GALLONS N/A
 MANHOLE RISER N/A
 ALARM N/A
 PUMP PERFORMANCE TEST N/A

DORSEY MILL ROAD

PRE-CONSTRUCTION INSPECTION: good soils recommend trench to existing dry well (leave existing trench undisturbed) is still up to 42ft long (5' top 2' brack mud loam) 10ft deep, 7ft gravel, inlet 3', 2' wide trench
 INSPECTION COMMENTS: 7/13/00 - OK TO COVER ALL WORK (SRW) RP 7/13/00

INSPECTOR Steven B. Krieg DATE SYSTEM APPROVED 7/13/00

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

DORSEY MILL ROAD

5 120° 04' 40" E 301.72'

806.92'

DOOT

GRAVEL

EXISTING SEPTIC

Proposed 1 story Bdrm Bath + Sunroom

#14641

EXISTING 3 Bdrm SFD

#14641 EXISTING RESIDENCE

ABOVE PLAN FOR DIMENSIONING ADDITION ONLY!

WD DECK

10' x 10' SHED

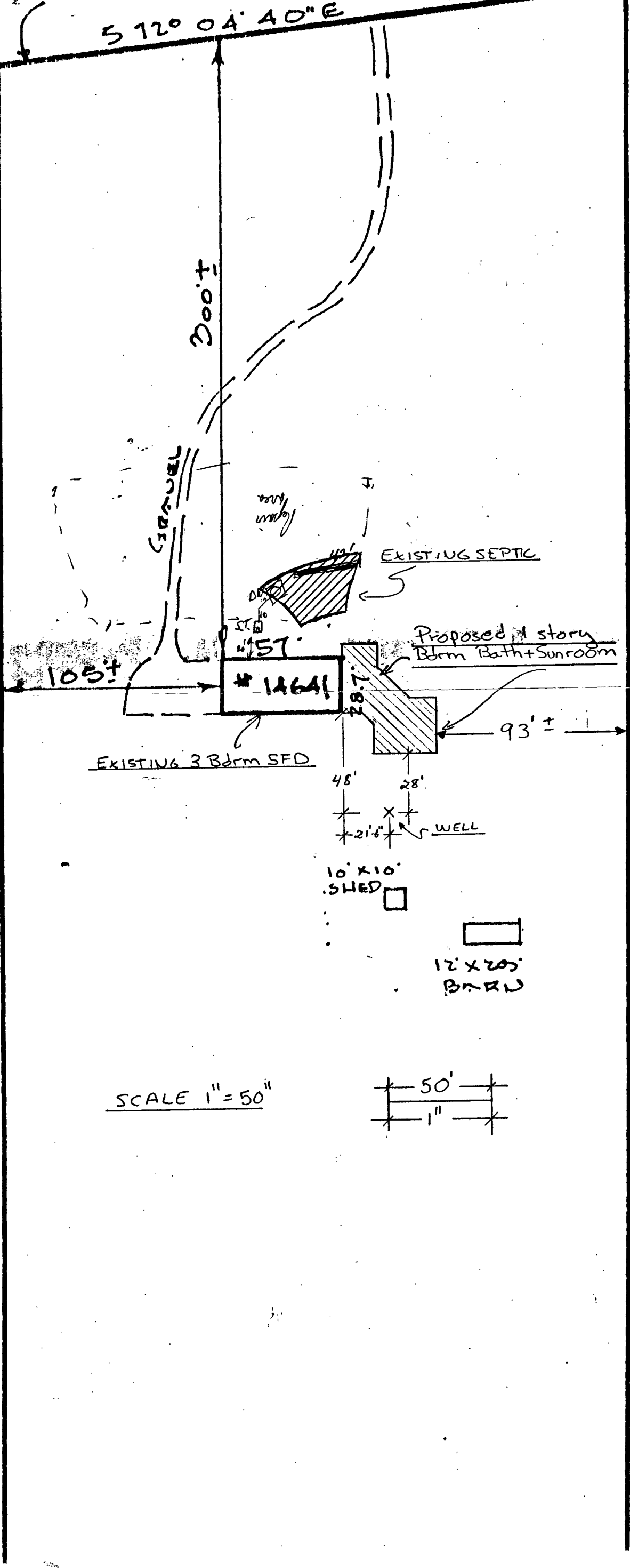
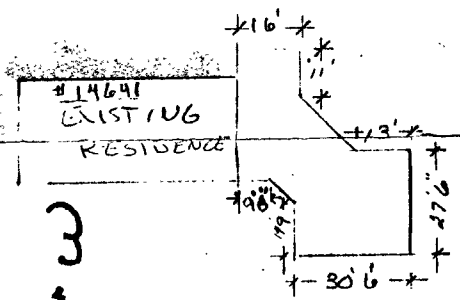
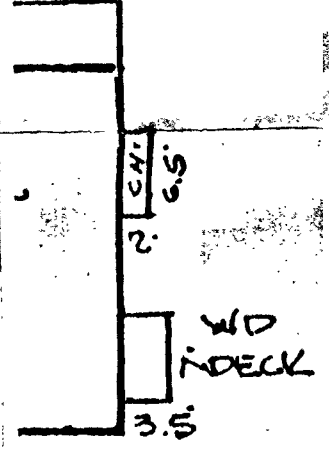
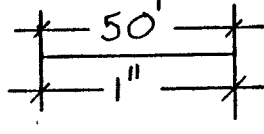
12' x 20' BRN

WELL

N 24° 07' 20" E

S 24° 07' 20" W

SCALE 1" = 50"



1/5/78

File

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLCOTT CITY

DISTRICT 42A

INDEXED

DATE 10/15/77

249 1992 owner Geo Brindga 901 55X-6X2

Joseph Enively

IS PERMITTED TO INSTALL ALTER

ADDRESS 1441 Dorcas Hill Road, Glenwood, Md.

PHONE

A SEWAGE DISPOSAL SYSTEM LOCATED AT

SUBDIVISION

ROAD 1441 Dorcas Hill Road, LG

PROPERTY OWNER Joseph Enively

ADDRESS SAME AS ABOVE

SPECIFICATIONS 4 bedrooms

DRAIN FIELD DEPTH FEET, BOTTOM AREA SQ. FT.

SEEPAGE PITS ABSORBENT SIDE-WALL AREA SQ. FT.

SEPTIC TANK CAPACITY 1250 GALLONS

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 25% & TANK CAPACITY 50%

OTHER DRY WELLS HAVE 125 sq. ft. effective absorbent sidewall area per bedroom below the first 6 ft. of original soil. Inlet can come in at 4 ft. and maximum depth of 12 ft. Locate the dry well 25 ft. up hill from edge of road and 10 ft. from right property line (zero hole 12) when facing lot from the road.

NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON, PERMIT VOID AFTER 3 YEARS.

NOTE: INSTALL STAND PIPES ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA ACCEPTED.

PLANS APPROVED BY Charles B. Scrocker

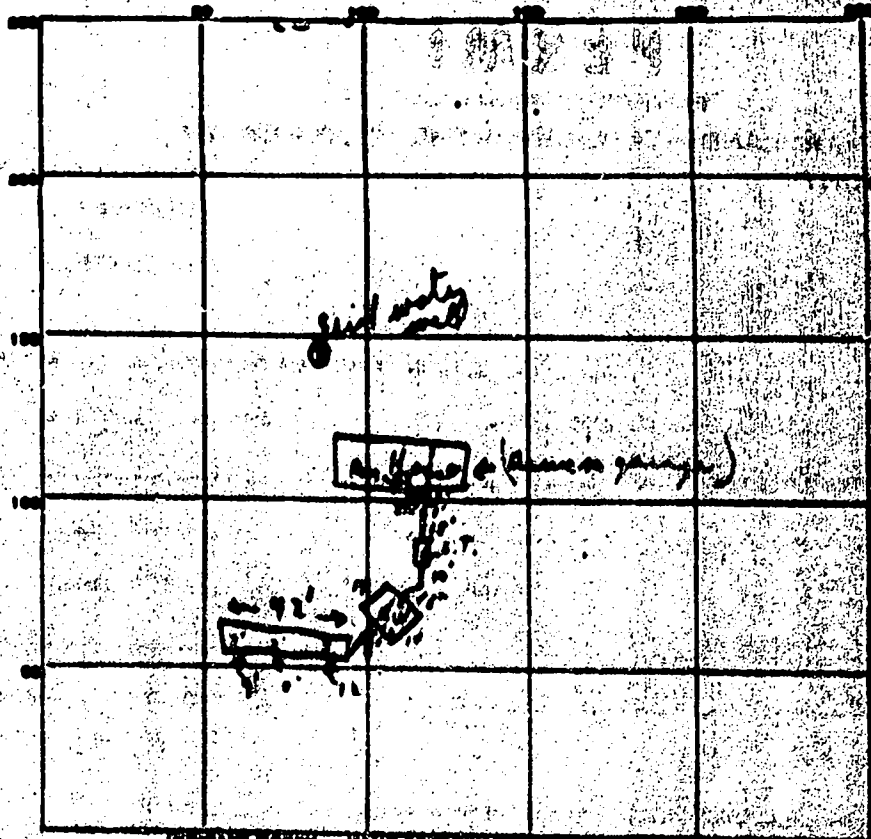
DATE 8/20/77

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.

27952

P 513 577 REPAIR



INDICATE NORTH - NAME LOCATIONS RELATIVELY TO EACH OTHER

PERMIT CARD _____ Roney Hill Road _____

SEPTIC TANK LEVEL _____ 4 1/2' across front door _____ CLEANOUTS _____ 5' 10" / 5' 10"

DISTRIBUTION BOX LEVEL _____ N/A _____

TRENCH DEPTH _____ 11' depth _____ TRENCH WIDTH _____ - _____ FT.

GRAVEL DEPTH _____ 7' - 10" _____ TOTAL LENGTH _____ 42' 0 2/3' _____

NUMBER OF TRENCHES _____ 1 _____ TOTAL BOTTOM AREA _____ _____

SEEPAGE PITS, INSIDE DIAMETER _____ 2' _____ FT. DEPTH BELOW INLET _____ 2' _____ FT.

ABSORBENT AREA _____ 7103 _____ SQ. FT.

REMARKS _____ 1/5/78 Trench only - ok for gravel _____

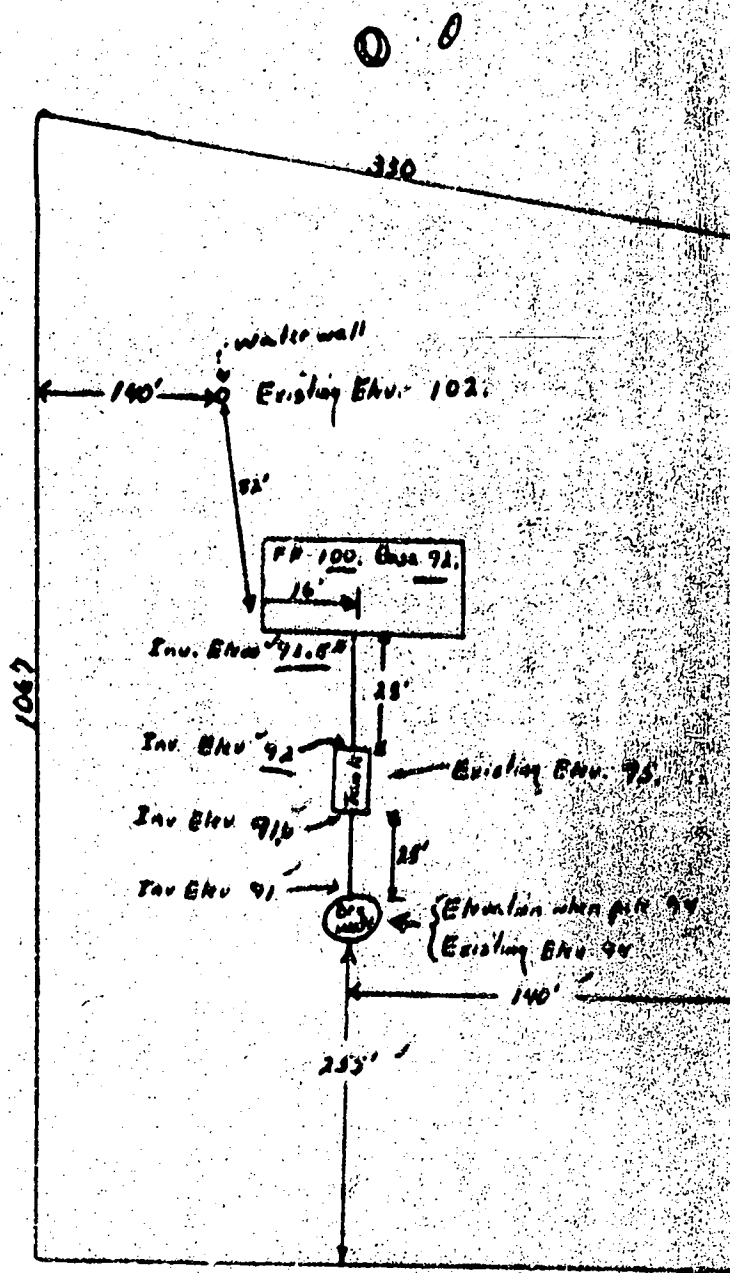
_____ (Notes, house walls) _____

_____ 5/8/78 @ all pipes in from house to per well & trench _____

_____ Mr. K... suggested... 1/2" pipe _____

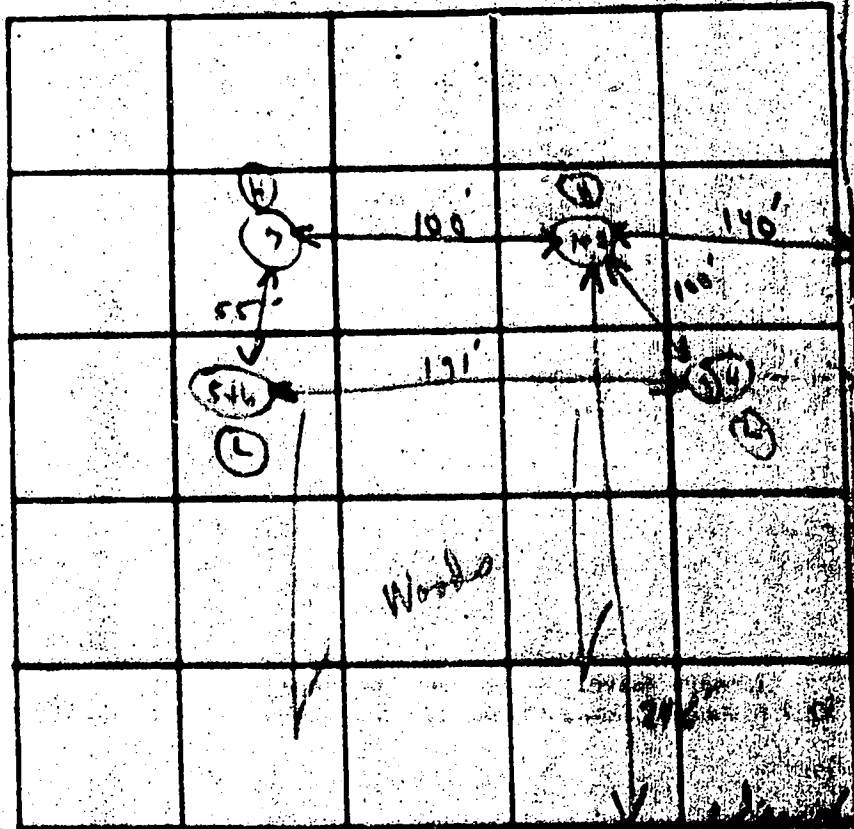
_____ ... of ... _____

DATE SYSTEM APPROVED _____ 5/8/78 _____ INSPECTOR _____ C. D. ...



Joseph F. Smiley
 14641 Dairy Mill Road
 Glenwood, Md.
 (301) 774-6576
 Work Phone
 (301) 774-6400 Ask for
 Arny Smiley (wife)

I certify the above measurements and elevations are actual & correct
 for this property. Joseph F. Smiley



GRAVE - GIVE - DIST. BETWEEN SURFACE OF GRAVE

Rd.

DATE	TEST NO.	DEPTH	PDB: WET		TEST		REMARKS
			WET	DRY	WET	DRY	
7/14/55	1	1'	12.50	12.50	12.52	12.52	
	(H) 2	12'	12.50	12.50	12.52	12.52	
	3	5 1/2'	1.112	1.116	1.116	1.200	
	(G) 4	10 1/2'	1.117	1.119	1.119	1.125	
	(E) 5	4' 4 1/2"	1.32	1.34	1.34	1.32	2nd
Jan 1956	6	11'	1.35	1.37	1.37	1.42	5th
	(H) 7	9'	Visual to this				
		22 1/2'	1.48	1.50	1.50	1.50	

REMARKS

TYPE OF SOIL

TESTED BY

Ground level on hill 115' from
 Woodlands house below
 C. E. St.
 ALSO PRESENT: J. Kennedy
 W. Woods

6459

**STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAYES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401
WELL COMPLETION REPORT**

WELL NUMBER: **6459**
COUNTY: **PRINCE GEORGES**

DATE RECEIVED: **Dec 11 1977**
WELL DEPTH: **145** FEET

OWNER: **Samuelly, Joseph**
STREET OR RD: **WINDY PARK DR**

STATE THE KIND OF FORMATION PENETRATED, THEIR COLOR, GRAIN, THICKNESS AND IF WATER BEARING

DEPTH (FEET)	FORMATION
0 - 2	Top Soil
2 - 11	Gravelly Sand
11 - 30	Hard Sand
30 - 40	Muck
40 - 60	Gravelly Sand
60 - 145	Muck

WELL RECORDS
WELL HAS BEEN GROUPED: A B C D E F G H I J K L M N O P Q R S T U V W X Y Z

TYPE OF WELL: A B C D E F G H I J K L M N O P Q R S T U V W X Y Z

NO. OF CASINGS: **5** NO. OF POUNDS: **21**

GALLONS OF WATER: **130**

DEPTH OF CASING HEAD (TO NEAREST FOOT): **21**

WATER LEVEL
DATE: **11/15/77**
TIME: **1:45**
WATER LEVEL (TO NEAREST FOOT): **145**

WELL CONSTRUCTION
TYPE OF CASING: A B C D E F G H I J K L M N O P Q R S T U V W X Y Z

TYPE OF CASING: A B C D E F G H I J K L M N O P Q R S T U V W X Y Z

OTHER CASINGS (IF ANY)
Diameter (inch): **4** Depth (feet): **23**

SCREEN RECORD
TYPE OF SCREEN: A B C D E F G H I J K L M N O P Q R S T U V W X Y Z

WELL DEPTH
DEPTH (NEAREST WHOLE FOOT): **145**

WELL CONSTRUCTION
TYPE OF CASING: A B C D E F G H I J K L M N O P Q R S T U V W X Y Z

CIRCLE APPROPRIATE BOXES

WELL WAS ABANDONED AND SEALED WHEN BUILT

ELECTRIC LOG OBTAINED

TEST WELL CONVERTED TO PRODUCTION WELL

I HEREBY CERTIFY THAT I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE MENTIONED "PERMIT TO DRILL WELL" AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

DRILLER'S NAME: **John H. Wagoner**

SIGNATURE: **John H. Wagoner**

DIAMETER OF CASING: **4** (NEAREST INCH)

GRAVEL PAKE: YES NO

IF WELL BUILDED HAS A CLOSING WELL CASING BOX: YES NO

WAS ONE ONLY WAY TO BE FILLED TO BE BUILDED: YES NO

VELOCITY CASING: YES NO

LOG INDICATOR: YES NO

OTHER DATA AVAILABLE: YES NO

WELL IDENTIFICATION NO. **6459**

WELL HISTORY
DATE OF CONSTRUCTION: **11/15/77**

WELL DEPTH
DEPTH (NEAREST WHOLE FOOT): **145**

WELL CONSTRUCTION
TYPE OF CASING: A B C D E F G H I J K L M N O P Q R S T U V W X Y Z

WELL DEPTH
DEPTH (NEAREST WHOLE FOOT): **145**

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WELL CONSTRUCTION
TYPE OF CASING: A B C D E F G H I J K L M N O P Q R S T U V W X Y Z

WELL DEPTH
DEPTH (NEAREST WHOLE FOOT): **145**

Building Address 14641 DORSEY MILL RD.
GLENWOOD, MD. 21738

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

Census Tract 6040 Subdivision N/A

Section N/A Area N/A Lot N/A

Tax Map 21 Parcel 88 Grid 16

Zoning RC DRA Map Coordinates _____ Lot size _____

Property Owner's Name GEORGE BRINDZA

Address 14641 Dorsey mill Rd

City GLENWOOD State MD Zip Code 21738

Home Phone 301-854-6762 Work Phone _____

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

Phone _____ Fax _____

Existing Use SINGLE FAMILY DWELLING

Proposed Use SAME W/ ADDITION

Estimated Construction Cost \$ 80,000

Description of Work 18'x39'
1 STORY ADDITION FOR
M. BED ROOM, BATH + SUN ROOM
WITH UNFINISHED BASEMENT

Contractor Company KME CONSTRUCTION

Contact Person KEV ERSKINE

Address 12584 HALL SHOP RD

City FULTON State MD Zip Code 20759

License No. 37055

Phone 410-730-7432 Fax 301-854-9750

Occupant or Tenant SAME AS OWNER

Contact Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Engineer or Architect Company _____

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL	
Building Characteristics	Utilities
Height: _____	Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private
No. of stories: _____	Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Construction type: <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular	Sprinkler system: <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 type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
1st floor: _____	Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
2nd floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: <input type="checkbox"/> Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms _____	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"/>
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 type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other: _____
Other Structure: _____ Dimensions: _____ Footings: _____ Roof: _____ <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	

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

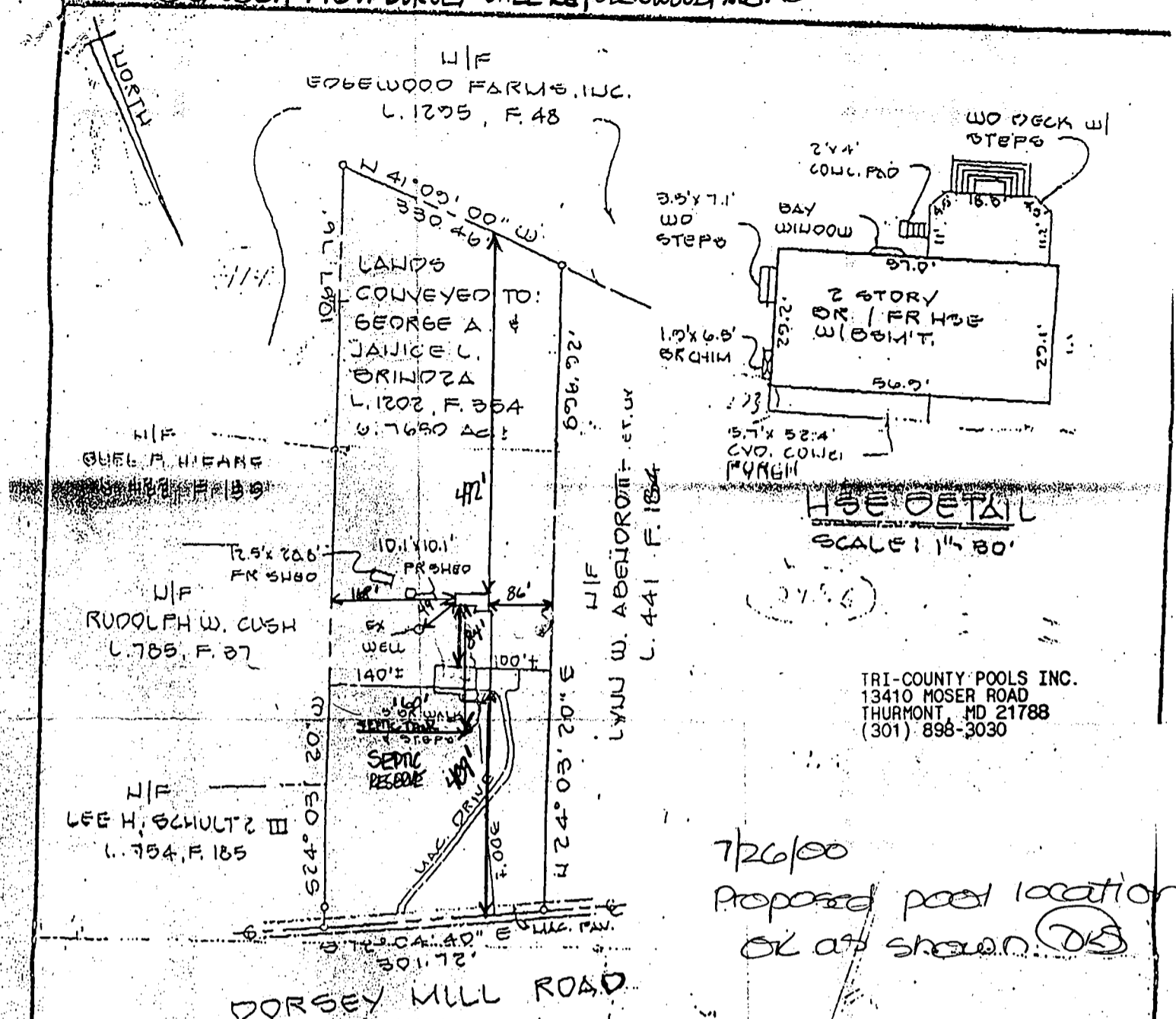
Kenneth M. Erskine
 Applicant's Signature
President KME CONSTRUCTION
 Title/Company

KENNETH M. ERSKINE
 Print Name
5.3.00
 Date

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

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#
<input checked="" type="checkbox"/> Land Development DPZ			Front: <u>75' Min</u>	Filing fee \$ <u>25</u>
<input type="checkbox"/> State Highways			Rear: <u>75' Min</u>	Permit fee \$ _____
<input type="checkbox"/> Building Official			Side: <u>75' Min</u>	Excise tax \$ _____
<input checked="" type="checkbox"/> Dev. Engineering DPZ	<u>5/3/00</u>	<u>Mark E. Ripstein</u>	Side St. <u>N/A</u>	Sub-total paid \$ _____
<input checked="" type="checkbox"/> Health			All minimum setbacks met? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	Add'l permit fee \$ _____
<input type="checkbox"/> Fire Protection			Is Entrance Permit required? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOTAL FEES \$ _____
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>			Historic District? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Balance due \$ _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Lot Coverage for New Town Zone _____	Check # _____
ONE STOP SHOP: <input type="checkbox"/>			SDP/Red-line approval date _____	Validation # _____
			Accepted by <u>[Signature]</u>	

BRINDZA 14641 DORSEY MILL RD, GLENWOOD MD.



HSE DETAIL
SCALE: 1" = 30'

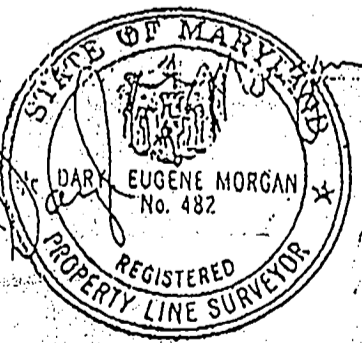
TRI-COUNTY POOLS INC.
13410 MOSER ROAD
THURMONT, MD 21788
(301) 898-3030

7/26/00
Proposed pool location
OK as shown. DS

DISTANCES:

- POOL TO:
- HOUSE - 84'
- SEPTIC TANK - 160'
- FRONT LOT LINE - 409'
- REAR LOT LINE - 492'
- LEFT LOT LINE - 168'
- RIGHT LOT LINE - 86'
- WELL - 491'

HOUSE LOCATION SURVEY
LANDS CONVEYED TO:
GEORGE A. BRINDZA AND
JANICE L. BRINDZA
L. 1202, F. 354
14641 DORSEY MILL ROAD
4TH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
SCALE: 1" = 200' JUNE, 1991



6-12-91

Note: Property is not located within a flood hazard area according to National Insurance Program, Flood Insurance Rate Map, Community Panel Number 240044 0020B, Map Revised December 4, 1986.

I CERTIFY THIS PLAT TO BE CORRECT; IT IS THE RESULT OF AN ACTUAL FIELD SURVEY, BASED ON DATA FOUND AMONG THE LAND RECORDS OF HOWARD COUNTY, MARYLAND, AS REFERENCED HEREON.

REFERENCE	JOB NO.
L. 1202, F. 354	91-2055



VANMAR ASSOCIATES INC.
Engineers • Surveyors • Planners
110 South Main Street, Mt Airy, Maryland 21771
(301) 829-2890 (301) 829-5055