

# PERMIT

## SEWAGE DISPOSAL SYSTEM

HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
410-313-2640

P 514176

A REPAIR

ISSUE DATE 8-8-00

APPROVAL DATE 8/9/00

04-360613

INDEXED

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

ADDRESS 580 Obrecht Road, Sykesville, MD 21784 PHONE 410-795-5670

SUBDIVISION Riggs Property LOT NUMBER A ADDRESS 14785 Bushy Park Road

PROPERTY OWNER Michael Stradling PROPERTY OWNER'S ADDRESS Same

SEPTIC TANK CAPACITY Add 1000 GALLONS ADDITIONAL 1000 GALLON SEPTIC TANK IN SERIES REQUIRED

PUMP CHAMBER CAPACITY \_\_\_\_\_ GALLONS

NUMBER OF BEDROOMS \_\_\_\_\_

SQUARE FEET PER BEDROOM \_\_\_\_\_

LINEAR FEET OF TRENCH REQUIRED Additional 187 linear feet of trench

*Glenwood  
Day School  
410-489-5203*

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

LOCATION: \_\_\_\_\_

REPAIR - PURPOSE - To accommodate enlarging the existing day care facility

Call for inspection when ground is opened so sanitarian can recommend repair. 8/8/00

Install y-joint in line 10' prior to ex DB. set new DB 10 feet up from  
ex. high trench & run 2 98' trenches inlet @ 4.0 bottom @ 6.0 3.0'

PLANS APPROVED \_\_\_\_\_ DATE \_\_\_\_\_ *wide*

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

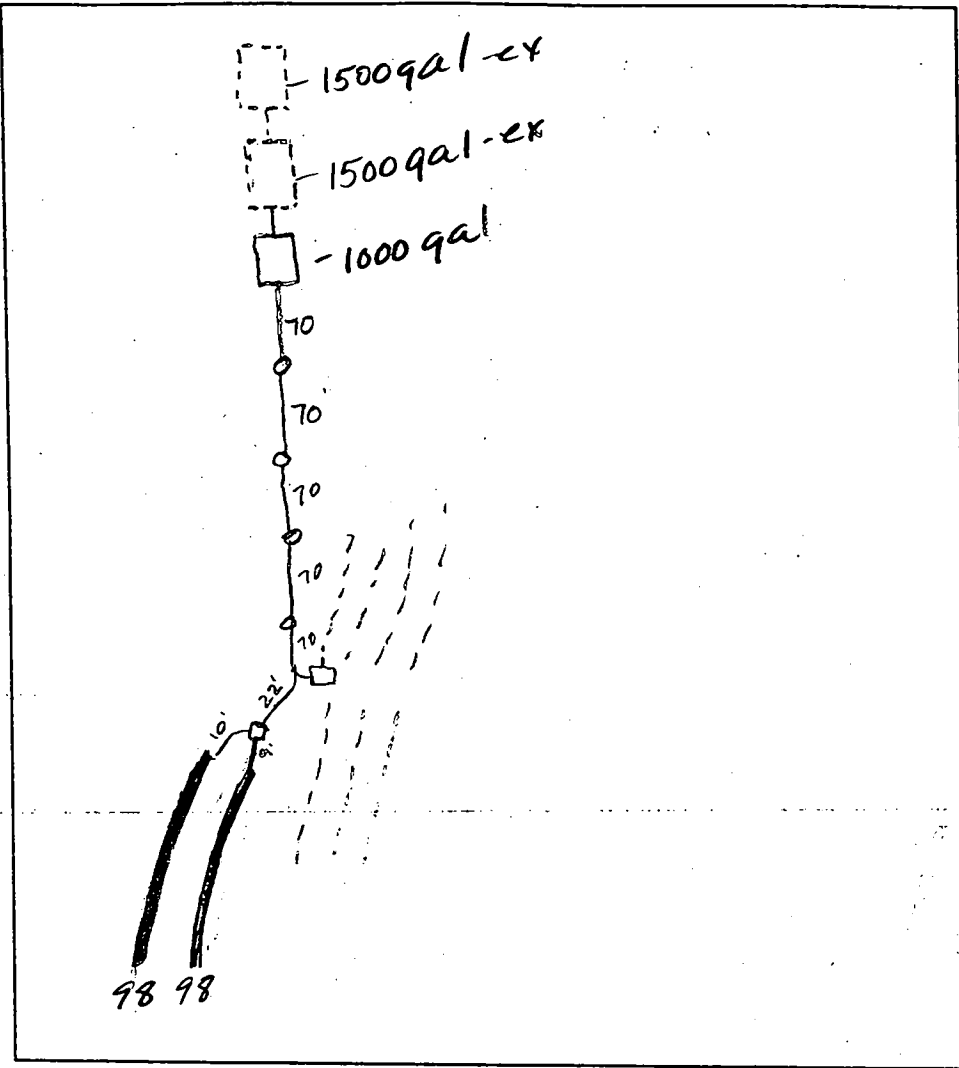
NOTE: IF PUMPED SEPTIC SYSTEM REQUIRED, (1) SEPTIC PUMP DETAIL TO BE PROVIDED BY INSTALLER PRIOR TO ISSUANCE OF SEPTIC PERMIT (2) PUMP PERFORMANCE TEST IS NECESSARY PRIOR TO HEALTH DEPARTMENT APPROVAL OF SEPTIC PERMIT

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

*514176*

98  
98  
100

NOT TO SCALE



**TRENCH DATA**

TRENCH WIDTH 3.0  
 TRENCH INLET DEPTH 4.5  
 TRENCH BOTTOM DEPTH 6.5  
 DEPTH OF STONE 2.0  
 NUMBER OF TRENCHES 2  
 TOTAL TRENCH LENGTH 186  
 ABSORBENT AREA 558'  
 DISTRIBUTION BOX LEVEL 02  
 BAFFLE IN DISTRIBUTION BOX

**SEPTIC TANK DATA**

SEPTIC TANK 1000 GALLONS  
 MANHOLE RISER n/a  
 6 INCH INSPECTION PORT yes

**PUMP CHAMBER DATA**

PUMP CHAMBER GALLONS —  
 MANHOLE RISER —  
 ALARM —  
 PUMP PERFORMANCE TEST —

PRE-CONSTRUCTION INSPECTION: \_\_\_\_\_

INSPECTION COMMENTS: 8/8/00 Cleanout ports in line from tank to DB replaced. 1000 gallon septic tank installed 8/9/00 or so cover all work final A

INSPECTOR A. McNeil DATE SYSTEM APPROVED 8/9/00

*Call Center*

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3500 COUNTY HOUSE DRIVE ELLETTTS CITY, MD 21043 PERMITS (410) 313-2100 INSPECTIONS (410) 313-2101 AUTOMATIC INFORMATION (410) 313-3000	<b>HOWARD COUNTY PERMIT APPLICATION</b>	<b>PERMIT NUMBER B00141368</b>
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Building Address <u>14785 Bushy Park Road</u> <u>Woodbine MD 21797</u> Suite/Apt. #: _____ SDP/WP/Petition #: _____ Census Tract <u>604602</u> Subdivision _____ Section _____ Area _____ Lot <u>14</u> Tax Map <u>8</u> Parcel <u>96</u> Grid <u>22</u> Zoning _____ Map Coordinates _____ Lot size <u>385/16/16</u>	Property Owner's Name <u>MICHAEL + CHERYL STRADING</u> Address <u>14785 Bushy Park Rd</u> City <u>Woodbine</u> State <u>MD</u> Zip Code <u>21797</u> Home Phone <u>410 489 5444</u> Work Phone _____ Applicant's Name & Mailing Address, (if other than stated hereon): <u>557 Elm St</u> <u>Clarksville, MD 21029</u> Phone <u>410 489 5444</u> Fax <u>410 489 5443</u>
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Existing Use <u>Day Care / School</u> Proposed Use <u>2 Bathrooms</u> Estimated Construction Cost \$ <u>75,000.00</u> Description of Work <u>Bathroom 2 bathrooms</u> <u>28 X 17 + Mech room</u>	Contractor Company <u>JST BUILDERS</u> Contact Person <u>John Stewart</u> Address <u>557 Elm St</u> City <u>CLARKSVILLE</u> State <u>MD</u> Zip Code <u>21029</u> License No. <u>11160911</u> Phone <u>410 489 5444</u> Fax <u>410 489 5443</u>
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Occupant or Tenant <u>Michael + Cheryl Strading</u> Contact Name <u>John Stewart</u> Address <u>14785 Bushy Park Rd</u> City <u>Woodbine</u> State <u>MD</u> Zip Code <u>21797</u> Phone <u>410 489 5444</u> Fax _____	Engineer or Architect Company _____ Contact Person _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____
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BUILDING DESCRIPTION - COMMERCIAL		BUILDING DESCRIPTION - RESIDENTIAL	
<b>Building Characteristics</b> Height: <u>11'8"</u> No. of stories: <u>1</u> Gross area, sq. ft. per floor: <u>476</u> Use group: _____ 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	<b>Utilities</b> Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: <u>N/A</u> <input checked="" type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression # of Heads _____	<b>Building Characteristics</b> SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1st floor: _____ 2nd floor: _____ Basement: _____ Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms: _____ Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____ Other Structure: _____ Dimensions: _____ Footings: _____ Roof: _____ <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	<b>Utilities</b> Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R 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 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.

Applicant's Signature <u>John Stewart</u> Title/Company <u>JST BUILDERS</u>	Print Name <u>John Stewart</u> Date <u>5/16/03</u>
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Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**  
**\*\* PLEASE WRITE NEATLY AND LEGIBLY. \*\***  
**- FOR OFFICE USE ONLY -**

<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">AGENCY</th> <th style="text-align: left;">DATE</th> <th style="text-align: left;">SIGNATURE APPROVAL</th> </tr> </thead> <tbody> <tr> <td>Land Development, DPZ</td> <td></td> <td></td> </tr> <tr> <td>State Highways</td> <td></td> <td></td> </tr> <tr> <td>Building Official</td> <td></td> <td></td> </tr> <tr> <td>Dev. Engineering, DPZ</td> <td></td> <td></td> </tr> <tr> <td>Health</td> <td><u>5/16/03</u></td> <td><u>[Signature]</u></td> </tr> <tr> <td>Fire Protection</td> <td></td> <td></td> </tr> </tbody> </table> <p>Is Sediment Control approval required prior to issuance?                  YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>CONTINGENCY CONSTRUCTION START: <input type="checkbox"/></p> <p>ONE STOP SHOP: <input type="checkbox"/></p>	AGENCY	DATE	SIGNATURE APPROVAL	Land Development, DPZ			State Highways			Building Official			Dev. Engineering, DPZ			Health	<u>5/16/03</u>	<u>[Signature]</u>	Fire Protection			<b>DPZ SETBACK INFORMATION</b> Front: _____ Rear: _____ Side: _____ Side St.: _____ All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/> Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/> Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/> Lot Coverage for New Town Zone _____ SDP/Red-line approval date _____	<b>PROPERTY ID#:</b> <u>34356</u> Filing fee \$ <u>25</u> Permit fee \$ _____ Excise tax \$ _____ Add'l per. fee \$ _____ TOTAL FEES \$ _____ Sub-total paid \$ _____ Balance due \$ _____ Check # <u>4932</u> Validation # <u>25026</u>
AGENCY	DATE	SIGNATURE APPROVAL																					
Land Development, DPZ																							
State Highways																							
Building Official																							
Dev. Engineering, DPZ																							
Health	<u>5/16/03</u>	<u>[Signature]</u>																					
Fire Protection																							

Building Address 14785 Bushy Park Rd  
WOODBINE MD 21797

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

Census Tract 604602 Subdivision: \_\_\_\_\_

Section \_\_\_\_\_ Area \_\_\_\_\_ Lot \_\_\_\_\_

Tax Map 8 Parcel 96 Grid 22

Zoning \_\_\_\_\_ Map Coordinates \_\_\_\_\_ Lot size \_\_\_\_\_

Property Owner's Name Michael + Cheryl Strading

Address \_\_\_\_\_

City \_\_\_\_\_ State MD Zip Code 21797

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

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

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Existing Use Daycare / SFD / School

Proposed Use \_\_\_\_\_

Estimated Construction Cost \$ \_\_\_\_\_

Description of Work Pool in ground  
20 x 45 2-51-5' deep  
truck filled / fence per code

Contractor Company \_\_\_\_\_

Contact Person \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

License No. \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

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

Contact Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Engineer or Architect Company \_\_\_\_\_

Contact Person \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

BUILDING DESCRIPTION - <u>COMMERCIAL</u>		BUILDING DESCRIPTION - <u>RESIDENTIAL</u>	
Building Characteristics	Utilities	Building Characteristics	Utilities
Height: _____	Water Supply: Public _____ Private _____	SF Dwelling: <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: Public _____ Private _____
No. of stories: _____	Sewage Disposal: Public _____ Private _____	1st floor: _____	Sewage Disposal: Public _____ Private _____
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>	2nd floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>	Basement: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Construction type: Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ State Certified Modular _____	Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>	Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/>	Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
	Sprinkler system: N/A <input type="checkbox"/>	Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Sprinkler system: N/A <input type="checkbox"/>
	Full _____	No. of Bedrooms _____	NFPA #13D _____
	Partial _____	Multi-family dwellings: No. of efficiency units: _____	NFPA #13R _____
	Other Suppression _____	No. of 1 BR units: _____	Other: _____
	# of Heads _____	No. of 2 BR units: _____	
		No. of 3 BR units: _____	
		Other Structure: _____	
		Dimensions: _____	
		Footings: _____	
		Roof: _____	
		State Certified Modular _____	
		Manufactured Home _____	

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

Applicant's Signature \_\_\_\_\_

Title/Company \_\_\_\_\_

Print Name \_\_\_\_\_

Date \_\_\_\_\_

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

AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official		
City Engineering, DPZ		
Health	<u>5/16/03</u>	<u>B Nijer</u>
Fire Protection		

Is Sediment Control approval required prior to issuance?  
 YES  NO

CONTINGENCY CONSTRUCTION START:

ONE STOP SHOP:

**DPZ SETBACK INFORMATION**

Front: \_\_\_\_\_

Rear: \_\_\_\_\_

Side: \_\_\_\_\_

Side St.: \_\_\_\_\_

All minimum setbacks met? YES  NO

Is Entrance Permit required? YES  NO

Historic District? YES  NO

Lot Coverage for New Town Zone \_\_\_\_\_

SDP/Red-line approval date \_\_\_\_\_

**PROPERTY ID#:** 34356

Filing fee \$ 250

Permit fee \$ \_\_\_\_\_

Excise tax \$ \_\_\_\_\_

Add'l per. fee \$ \_\_\_\_\_

TOTAL FEES \$ \_\_\_\_\_

Sub-total paid \$ \_\_\_\_\_

Balance due \$ \_\_\_\_\_

Check # 4930

Validation # 2-2011

Accepted by \_\_\_\_\_

P. 240  
BANKER TRUST CO.  
L. 608 F. 654  
ZONE: RC

P. 183  
D. HOGGARD  
432 F. 360  
ZONE: RC

FOREST CONSERVATION EASEMENT  
1.02 AC. RETENTION

FOREST CONSERVATION EASEMENT  
0.35 ACRES REFORESTATION

FOREST CONSERVATION EASEMENT  
0.65 ACRES REFORESTATION

PRESERVATION PARCEL "A" = 38.34 AC.  
SINGLE FAMILY RESIDENCE  
AND CONSERVATION  
PRESERVATION EASEMENT  
ZONED: RC

Revised Perc. Cert.  
For 30 student  
increase  
Signed by  
H.O 7-25-00  
per ALM

FOREST CONSERVATION EASEMENT  
1.42 AC. RETENTION

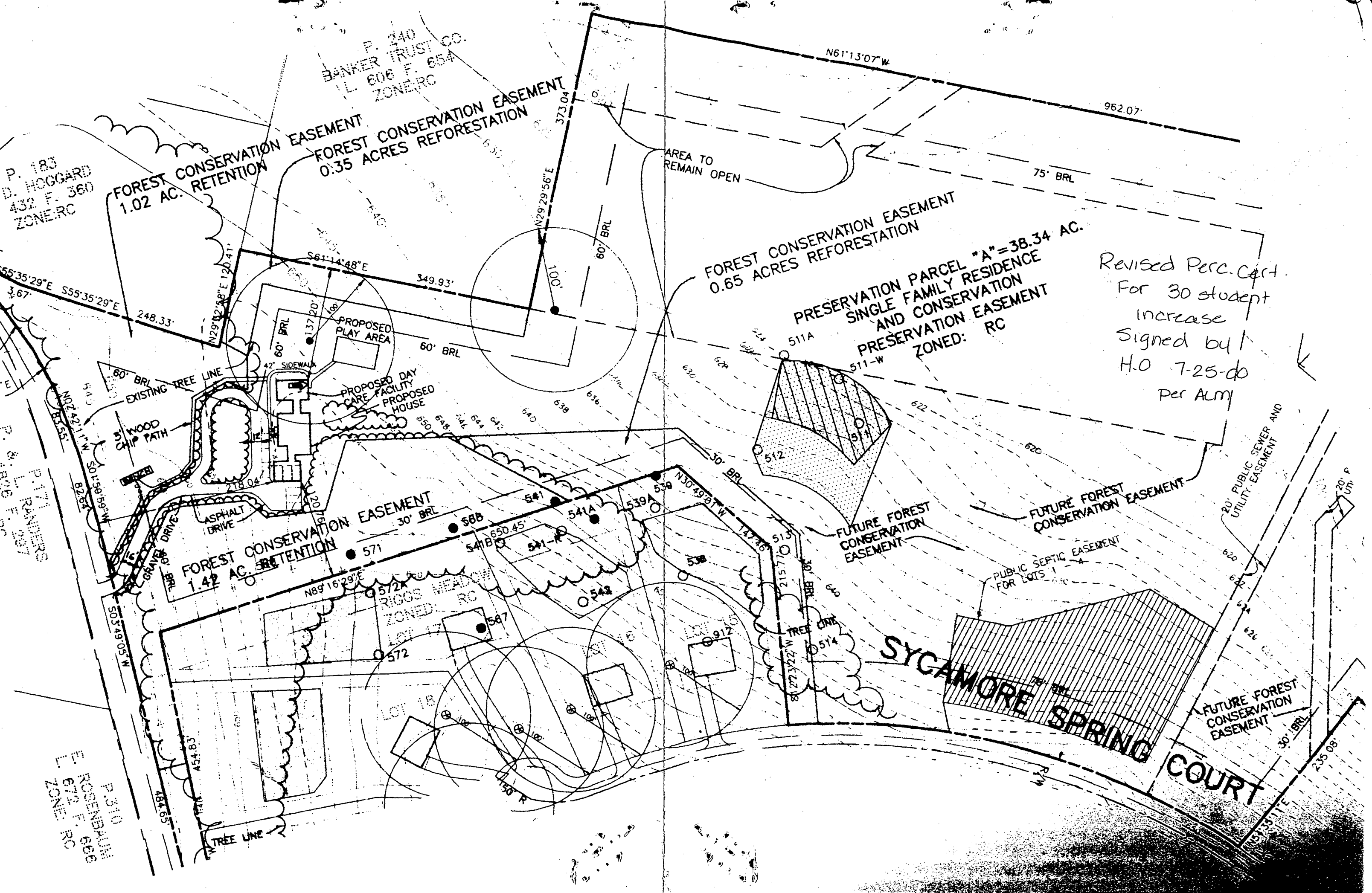
FUTURE FOREST  
CONSERVATION  
EASEMENT

FUTURE FOREST  
CONSERVATION  
EASEMENT

FUTURE FOREST  
CONSERVATION  
EASEMENT

SYCAMORE SPRING COURT

P. 310  
E. ROSENBAUM  
L. 672 F. 666  
ZONE: RC



8/12/98  
10:00 meet installer  
8-13-98  
10:00

# PERMIT

## SEWAGE DISPOSAL SYSTEM

### DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 510613

A 50368

DISTRICT 4th

DATE 8/11/98

HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
~~XXXXXXXX~~ 410-313-2640

DATE SYSTEM APPROVED 8/13/98

INSPECTOR [Signature]

# INDEXED

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

ADDRESS 580 Obrecht Road Sykesville, MD 21784 PHONE (410)795-5674

SUBDIVISION Riggs Property LOT Pres. P."A" ROAD 14785 Bushy Park Road

PROPERTY OWNER Michael & Cheryl Stradling  
Stradling Learning Center (Child Day Care Center)

ADDRESS \_\_\_\_\_

SEPTIC TANK CAPACITY 1500 ~~2000~~ GALLONS and 1500 ~~1000~~ <sup>all</sup> Gallon Tank in Series

NUMBER OF BEDROOMS 6

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 525

TRENCHES - Trench to be 3 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 5 feet below original grade. Effective area begins at 3 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Beginning from the intersection of the 650.46' and 147' lot lines, begin trenches 100 feet down the 147' lot line and 100 feet off that same lot line. Run trenches on contour in both directions.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. 4/2/98 OK ALM

PLANS APPROVED BY Amy McMillen/Donna K. Soe REVISED \_\_\_\_\_ DATE 03/06/98

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

ORIGINAL PERMIT SIGNATURE  
AND RETURNED 11-10-99  
Serial # 600121294

PERMIT VOID AFTER TWO YEARS

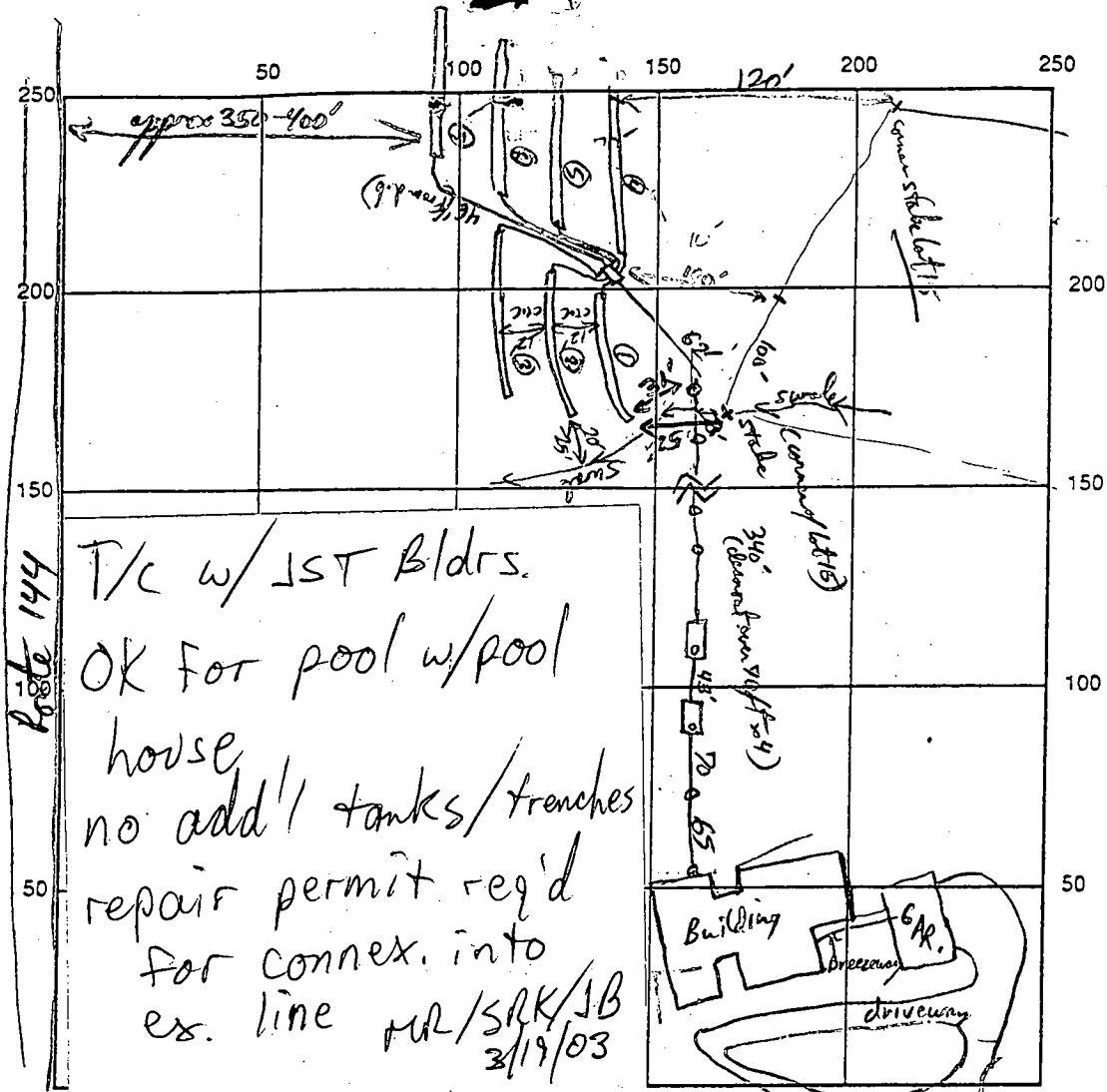
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON, CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

Screen pump + hot lab

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

\*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.



Route 144  
 T/C w/ 1ST Bldrs.  
 OK For pool w/pool house  
 no add'l tanks/trenches  
 repair permit req'd for connex. into ex. line  
 MR/SRK/SB  
 3/19/03

INDICATE NORTH - NAME ADJOINING ROADWAY AS-BASELINE

SEPTIC TANK LEVEL 1600 Mid gravel x 2 = 3000 gal ST, CLEANOUTS 1/15e, every 70', @ S.T. in capacity

DISTRIBUTION BOX LEVEL ✓ (used auto level)

DRAIN FIELD/TITLE DEPTH 5' FT. TRENCH WIDTH 3' FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 7 x 75' ea FT. = 525 L.F

NUMBER OF TRENCHES 7 ~~ONE SIDE~~ / BOTTOM AREA 1575 SQ. FT.

DRYWALL INSIDE DIAMETER \_\_\_\_\_ FT. EFFECTIVE DEPTH BELOW INLET \_\_\_\_\_ FT.

ABSORBENT AREA \_\_\_\_\_ SQ. FT.

REMARKS: House connection, cleanouts, 1st S.T. OK to cover. Needs SDA Stobast, permit for begin construction 8/12/98 12/11/98  
8/12/98 P.M. OK to cover from house to dist box and continue. DCS  
8/13/98 Trenches OK to cover PJP 8/13/98

DATE SYSTEM APPROVED 8/13/98 INSPECTOR [Signature]

KEEP with Property FILE. Riggs Property - SPECS

$$20 \text{ gpd / student} \times 30 = 600$$

$$15 \text{ gpd / employee} \times 5 = 75$$

$$150 \text{ gpd / bedroom} \times 6 = 900$$

1575

Loading rate of 1 gpd / sq. ft.

$$\cancel{1575} \text{ } 1575 \text{ gpd} / 1 \text{ gpd / sq ft.} = 1575$$

$$1575 \div 3' \text{ wide trench} = 525 \text{ linear ft. required}$$

~~Begin trenches~~

Beginning from the intersection of the 650.46 and 147' lot lines, begin trenches 100 feet down the 147' lot line and 100' off that same lot line. Run trenches on contour in both directions.

Tank size:

2000 gallons for 6 bdrm house

$$1.5 \times 675 = 1012.5 \text{ OR } 1000 \text{ gallon tank in series}$$



For septic permit, install one 2000 gallon septic tank & one 1000 gallon septic tank in series.

ft  
Director: Stordans  
Diags Meadow  
PPA  
HO-94-1785  
A 55368



11

July 6, 1998

Avis Corbin  
Division Chief Licenses & Permits  
3430 Court House Dr.  
Ellicott City, Md. 21043

Re: Building Permit #B00109988  
14785 Bushy Park Rd.

*Ken, go to  
follow up  
call me back 7/19/98  
a*

*BA-98-17E*

Dear Avis,

The owner of the above mentioned lot and holder of the above named permit request the permit be revised to a mixed use permit. The structure will be a single family home as called for in the application for the above permit and the walkout basement will be used for a Day Care Center as allowed by the "Special Exception" a copy of which is enclosed. I have attached (2) copies of the plans that reflect the mixed use for your review. Should you need any other information please give me a call at (410)- 203-2320 or (410)-884-0334. Thank you for assistance in this matter.

Best Regards

*John S. Startt*

John S. Startt  
President  
JSST BUILDERS

7-27-98

RECEIVED

JUL 07 1998

LICENSING PERMITS  
DIVISION

*checked w/ Fran Stamer  
of Human Resources  
410-750-8953. size of day  
care has not changed since  
the original BP has been approved.  
No kitchen proposed. ALM  
Health Dept*

*7/27/98  
No objection to change in  
use. A Miller*

*DPZ - Kent Meadbrook*

BOA Case No. 98-17E  
Stradling Learning Center

6. While the proposed structure will be larger than vicinal homes, only 16% of its area will be used for the special exception use. The proposed building will be compatible in design to vicinal homes. The structure will be set back and screened from vicinal properties. The site is located near a mixture of housing types, next to a utility substation, and across from two commercial nurseries. The structure will therefore be generally compatible with properties in the vicinity of the site, as required by Section 131.N.17.c(4).

**ORDER**

Based upon the foregoing, it is this 2<sup>ND</sup> day of July, 1998, by the Howard County Board of Appeals, **ORDERED**:

That the Petition of Stradling Learning Center, Petitioner, for a special exception for a child day care center in an RC (Rural Conservation) Zoning District be, and the same hereby is, **GRANTED**, subject to the following conditions:

1. The special exception shall apply only to the child day care center uses and structures as described in the petition and plan submitted to the Board, as revised by the following conditions, and not to any other activities, uses, or structures on the subject property.
2. The total enrollment in the day care center shall not exceed 30 children.
3. The child day care center hours of operation shall be limited to the hours between 7:00 a.m. and 6:00 p.m., Monday through Friday.
4. The driveway from Bushy Park Road to at least the loop in front of the structure shall be designed for two-way traffic.
5. The Petitioner shall comply with all applicable Federal, State, and County laws and regulations.

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

Date: 3/18/98

Planning Board 5/7/98 Board of Appeals \_\_\_\_\_ Zoning Board \_\_\_\_\_

Petition No. BA 98-17E Map No. 8 Block 22 Parcel 96 Lot \_\_\_\_\_

Return comments by 4/13/98 to Comprehensive Planning and Zoning Administration.

Location of Property: East side of Bushy Park Rd, approx. 900' S of Rt. 144

Applicant: Cheryl Stradling T/A Stradling Learning Center

Applicant's Address: 10356 Kingsbridge Rd. Ellicott City, MD 21042

Owner: (if other than applicant) \_\_\_\_\_

Owner's Address: \_\_\_\_\_

Petition: A special exception for a child day care center.

\*\*\*\*\*

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, Debbi Louis (senior assisted living)
- Police Department, Animal Control, Brenda Purvis (kennels)

COMMENTS: 4-20-98 The septic easement and septic design has been modified and approved by this office to reflect the increase of sewage from the proposed daycare facility (see enclosed). The Health Department has no objection to the request for a special exception for a child day care center. *Ann M. Miller*

*Ann M. Miller*  
(Signature)

C1 05112

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

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

COUNTY NUMBER A50368

ST/CO USE ONLY

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL" HD-94-1385

DATE RECEIVED 3/9/98

3 5 78

165 (TO NEAREST FOOT)

OWNER SBC STREET OR RFD Sycamore Spring TOWN Cooksville SUBDIVISION Riggs Property SECTION LOT Rigs. Plat. "A"

WELL LOG

Not required for driven wells

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

Table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), check if water bearing. Rows include Brown Shale, Gray Mica Rock.

GROUTING RECORD

WELL HAS BEEN GROUTED (Y/N) TYPE OF GROUTING MATERIAL (CM, BC) NO. OF BAGS 20 NO. OF POUNDS 1880 GALLONS OF WATER 120 DEPTH OF GROUT SEAL (to nearest foot) from 0 to 45 ft.

CASING RECORD

MAIN CASING TYPE ST Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest-foot) 50

OTHER CASING (if used)

Table for other casing with columns for diameter and depth.

SCREEN RECORD

screen type or open hole (ST, BR, HO, PL, OT) insert appropriate code below

NUMBER OF UNSUCCESSFUL WELLS: 0 WELL HYDROFRACTURED (Y/N)

CIRCLE APPROPRIATE LETTER A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT...

DRILLERS LIC. NO. M5 D027 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. M5 D027

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

DEPTH (nearest ft.) 165

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) TELESCOPE CASING LOG INDICATOR OTHER DATA

C3

PUMPING TEST

HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 20 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 34 WHEN PUMPING 40 TYPE OF PUMP USED (for test) S submersible

PUMP INSTALLED

DRILLER WILL INSTALL PUMP (YES/NO) 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) 2 (nearest foot)

LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND /OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)

See Attached Location



C 1 **9750** SEQUENCE NO. (MDE USE ONLY)

**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.

1 2 3 4 5 6  
(THIS NUMBER IS TO BE PUNCHED  
IN COLS. 3-6 ON ALL CARDS)

COUNTY  
NUMBER

ST/CO USE ONLY  
DATE RECEIVED  
MM DD YY  
3 1 98

DATE WELL COMPLETED  
MM DD YY  
3 5 98

Depth of Well  
22 400' 26  
(TO NEAREST FOOT)

PERMIT NO.  
FROM "PERMIT TO DRILL WELL"  
HO-94-1450  
28 29 30 31 32 33 34 35 36 37

OWNER S D C  
STREET OR RFD SPYCAMORE SPRING TOWN Cooksville  
SUBDIVISION Riggs Property SECTION \_\_\_\_\_ LOT 3

**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	
Brown Shale	0	48	
Gray Micaceous Rock	48	400	

**GROUTING RECORD**  
WELL HAS BEEN GROUTED (Circle Appropriate Box)  
yes  no

TYPE OF GROUTING MATERIAL (Circle one)  
CEMENT  BENTONITE CLAY   
NO. OF BAGS 18 NO. OF POUNDS 1612  
GALLONS OF WATER 108  
DEPTH OF GROUT SEAL (to nearest foot)  
from 0 ft. to 50 ft.  
48 TOP 52 54 BOTTOM 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) 53  
60 61 63 64 66 70

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

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

**C 3**  
1 2

**PUMPING TEST**  
HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min.) 7.5

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)  
BEFORE PUMPING 36 ft.

WHEN PUMPING 201 ft.

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 (CIRCLE) (YES or NO) YES  NO

IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.

TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29

CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 35

PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH (nearest ft.) 43 47

CASING HEIGHT (circle appropriate box and enter casing height)  
 + above } LAND SURFACE  
 - below } 2 (nearest foot)

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED yes  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.

DRILLERS LIC. NO. M S D O 24  
DRILLERS SIGNATURE Joseph Mayne  
(MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. M S D O 22  
SITE SUPERVISOR (sign of driller or journeyman responsible for sitework if different from permittee)

**C 2**  
DEPTH (nearest ft.)

1 HO 51 400

2 \_\_\_\_\_

3 \_\_\_\_\_

DIAMETER OF SCREEN (NEAREST INCH)  
56 60  
from to

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68 \_\_\_\_\_ 68

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)  
T (E.R.O.S.) W Q  
70 \_\_\_\_\_ 72 \_\_\_\_\_ 74 75 76

**LOCATION OF WELL ON LOT**  
SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND /OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)

*See attached well location*



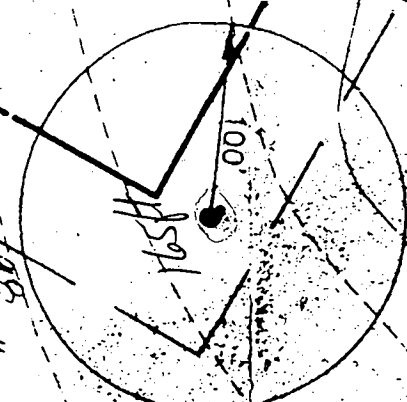
MD. RTE. ARTERIAL ROAD

ULTIMATE R/W MINOR (80' POWER POLE (17') STREET SIGN

VEHICULAR INGRESS/EGRESS RESTRICTED ROAD R/W DEDICATION

P/O PRESERVATION PARCEL 1  
64.59 AC PARCEL  
PRIOR TO RESUBDIVISION  
SINGLE FAMILY RESIDENCE  
AND CONSERVATION  
PRESERVATION EASEMENT  
P/O PRESERVATION PARCEL "A" = 40.11 AC

Exact location of BP application submitted  
Exact location of BP application submitted



1-32 FAS  
1-32 FAS

586

574

588

539

512

511-W

513

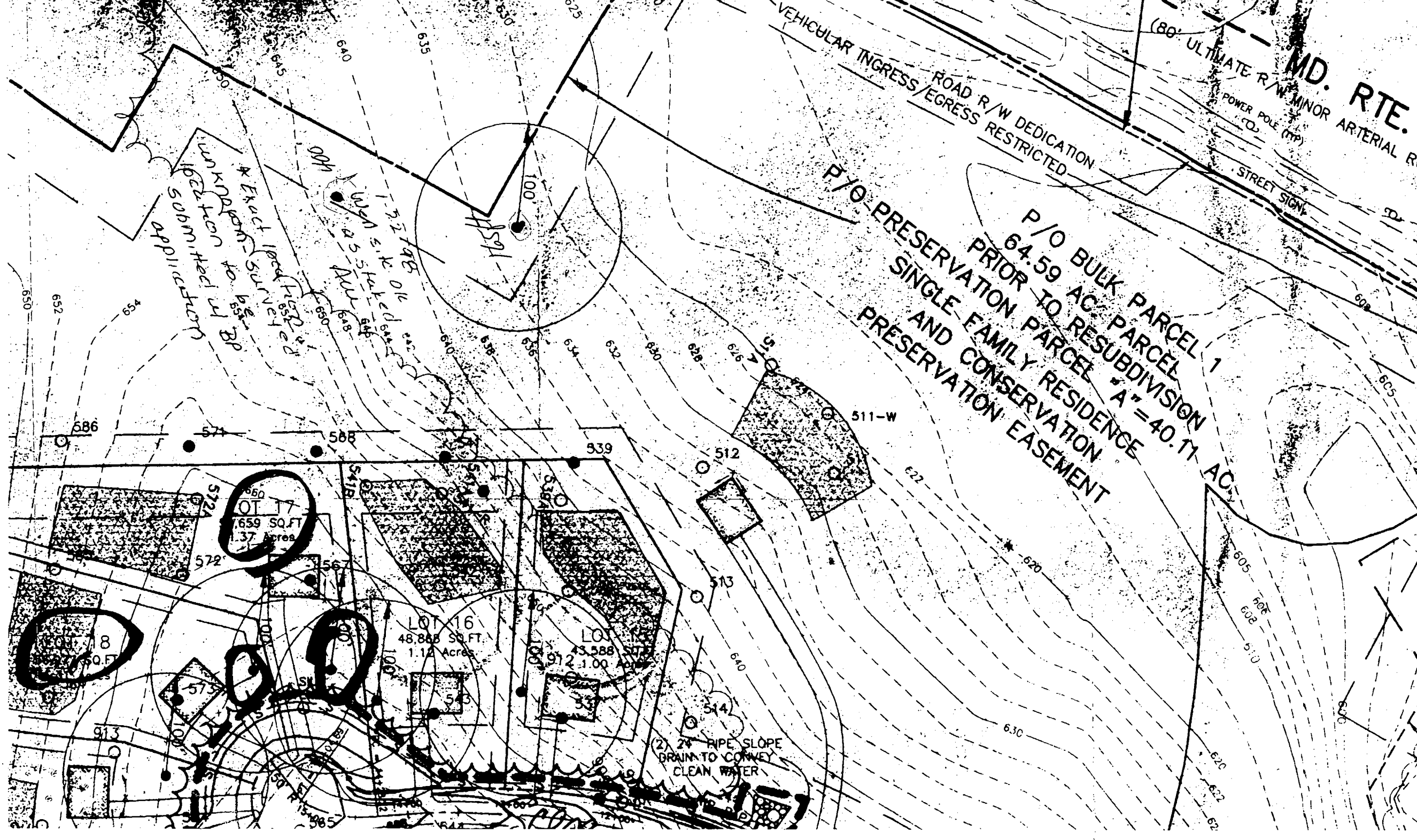
514

LOT 17  
16,659 SQ. FT.  
.37 Acres

LOT 16  
48,868 SQ. FT.  
1.12 Acres

LOT 15  
43,588 SQ. FT.  
1.00 Acres

(2) 24" PIPE SLOPE DRAIN TO CONVEY CLEAN WATER



MD. RTE.  
R/W MINOR ARTERIAL ROAD  
POWER POLE (TYP)  
STREET SIGN

2-19-98

220d well yield appr. 3-4 gpm.  
Because of size of house  
owner requesting to keep &  
use both wells. I advised  
them to write a letter requesting  
same and that a second  
well permit fee would be needed  
otherwise - OK A.M. Miller

ROAD R/W DEDICATED  
EGRESS/EGRESS RESTRICTED

PARCEL 1  
P/O 64.59 AC. PARCEL "A" = 40.11 AC.  
PRESERVATION PARCEL  
SINGLE FAMILY RESIDENCE  
PRESERVATION EASEMENT

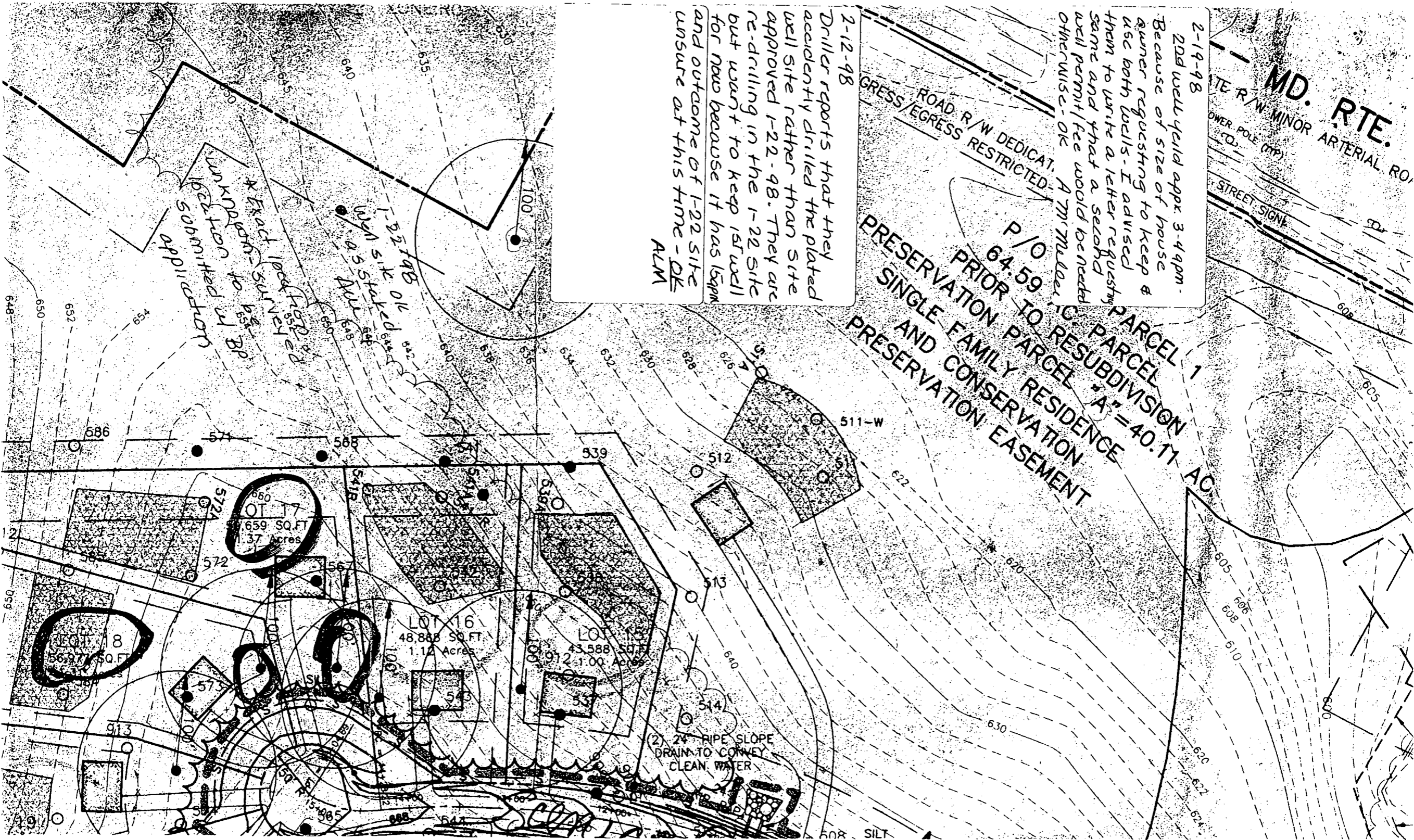
2-12-98

Driller reports that they  
accidentally drilled the plated  
well site rather than site  
approved 1-22-98. They are  
re-drilling in the 1-22 site  
but want to keep 1st well  
and outtake of 1-22 site  
unsure at this time - OK  
ALM

Exact location  
of well to be  
submitted by  
applicant

1-22-98 Oil  
well site  
1/2" dia. 5' deep  
well

(2) 24" PIPE SLOPE  
DRAIN TO CONVEY  
CLEAN WATER





A Division of the Sherwood Corporation

February 26, 1998

Howard County Environmental Health Dept.  
3525 Ellicott Mills Dr. Suite H  
Ellicott City, Maryland 21043-4544

Attn: Amy McMillen  
Re: Preservation Parcel A  
Riggs Meadow Subdivision  
14785 Bushy Park Rd.

Dear Amy,

I am writing you on behalf of Micheal and Cheryl Stradling who are the contract purchasers of the above described parcel of land. At this time there are two good wells drilled on the site, our request is that you allow the second well to remain in order to provide the capacity, to provide water for horses that will be kept on the site. Thank you for your time and consideration.

Best Regards

John S. Startt  
President  
JST BUILDERS

  
Micheal Stradling  
Cheryl Stradling

3/3/98  
Request  
Accepted  
ALM

# APPLICATION

PERCOLATION TESTING

A 50368

P \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
PO BOX 476 ELLICOTT CITY MARYLAND 21043  
TELEPHONE 461-9933

DISTRICT 4th

DATE 9/30/94

TO: THE COUNTY HEALTH OFFICER  
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM

PROPERTY OWNER Amalia Riggs, c/o SDC Group, Inc Michael & Cheryl Standling  
8480 Baltimore - National Pike

ADDRESS PO BOX 417, Ellicott City, MD 21041 PHONE (410) 465-6105

PROSPECTIVE BUYER \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

PROPERTY LOCATION:

SUBDIVISION Riggs Property LOT NO Card 11

ROAD AND DESCRIPTION Located @ SW Corner of the intersection of  
Roxbury Mill (Rte. 97) & Evidowick Rd (Rte 144)

TAX MAP 8814 PARCEL # 96 (14785 Bushy Park Road)

SIZE OF LOT 55000 ± S.F. TYPE BLDG Single Family Dwelling  
(SINGLE FAMILY DWELLING OR COMMERCIAL)

BLDG. PERMIT SIGNED

AND RETURNED 5-6-98

Serial # 87079988 - 6 Ben

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. James B. Morley, III V. Pay  
(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING \_\_\_\_\_

# THIS IS NOT A PERMIT

SOIL PROFILE

538

0' 1gt orange tan

4' darker ? brighter orange SiSL 5% frags

9' reddish 1gt orange SL 100% frags

10.5' 542 reddish CSL

3' bright red SiL color from parent rock

8' bright red SL 100% rock pocket 8-10' w/ 30% rock not continuous

10.5' 546 bright red CSL

3.5' bright red SSIL very hard dry OIL

11' 12' 5% rock


SOIL PROFILE


INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11-17-94	538	4.5 / 11.5	5:22	5:23	5:23	5:26 <sup>30</sup>	3 1/2 min
	565	Not tested					
	566	4' / 11.2	6:55 <sup>30</sup>	6:56	6:56	6:57	1 min
	542	4' / 11.5	5:28 <sup>30</sup>	5:29	5:29	5:30 <sup>30</sup>	1 1/2 min
	547	Visual to 5'	hard bottom at 5'				F
	536	Visual to 6'	hard bottom at 6'				F

REMARKS \_\_\_\_\_

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

TESTED BY Amy McMullen ALSO PRESENT Clark Sperry

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

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

# APPLICATION

PERCOLATION TESTING

A 50368

P \_\_\_\_\_

DISTRICT CB

DATE 10/24/94

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

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 Amelia Riggs C/o SDC Group, Inc.

ADDRESS 8480 Balt. Nat. Pike Suite 417  
PO Box 417 Ellicott City Md 21043 PHONE 465-6105

AGENT OR PROSPECTIVE BUYER \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

PROPERTY LOCATION:

SUBDIVISION Riggs Property LOT NO. Grd 11

ROAD AND DESCRIPTION located @ SW corner of the intersection of Roxbury  
Mill Road (Rte 97) & Frederick Road (Rte 144)

TAX MAP 8 & 14 PARCEL # 96

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. James R. Madigan V.P.  
(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

DISAPPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

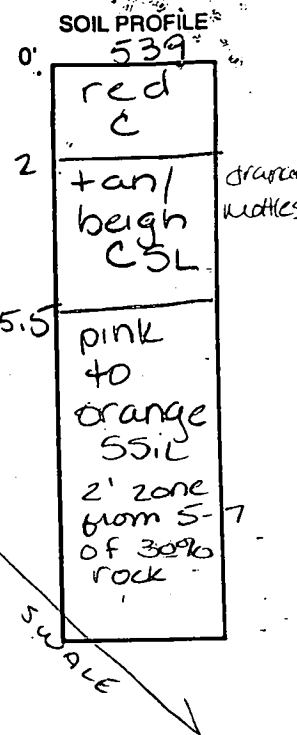
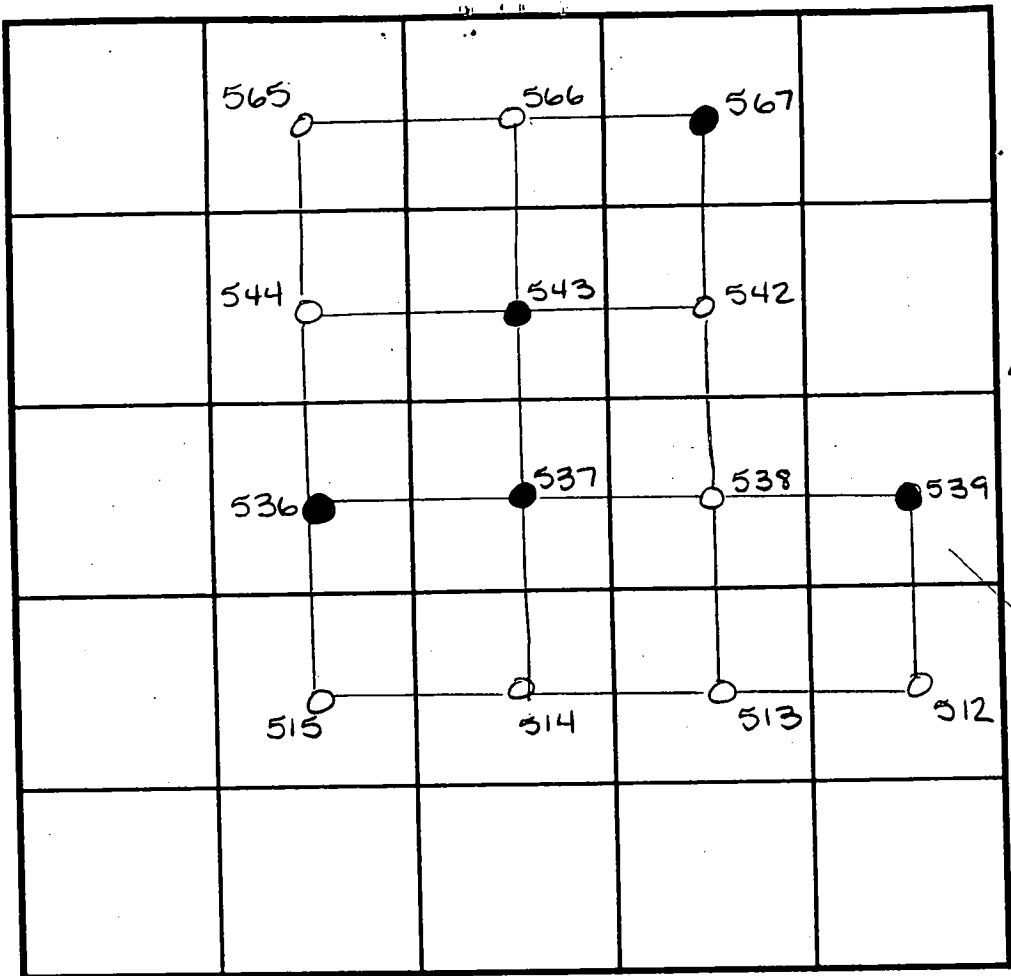
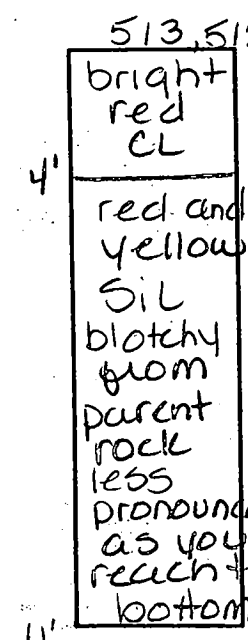
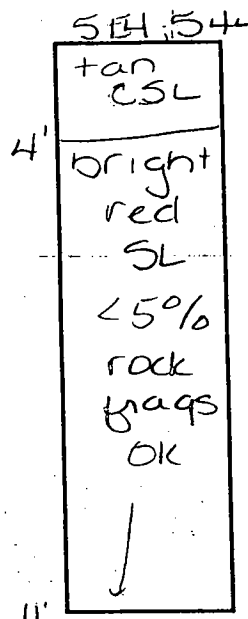
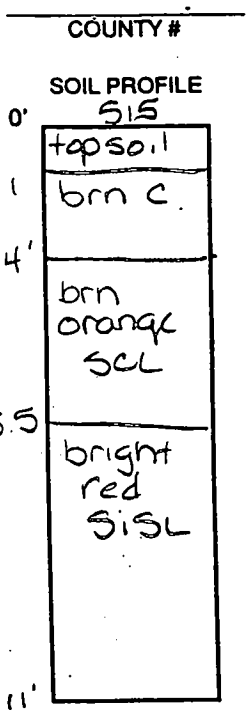
HOLD PENDING FURTHER TESTS \_\_\_\_\_

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



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11-10-94	515	3.5' / 10'	6:13	6:14 <sup>45</sup>	6:14 <sup>45</sup>	5:17	2 1/4 min
	514	4.5' / VII'	9:11 <sup>30</sup>	9:19	9:19	9:40	21 min
	537	Visual to 5.5'	Hard bottom at 5.5'				F
	544	4.5' / 12'	9:32	9:34 <sup>30</sup>	9:34 <sup>30</sup>	9:39	4 1/2 min
	543	>50% rock at 6'					F
11-15-94	513	4.5' / VII	9:45	9:47	9:47	9:52	5 min
	512	4' / 11'	9:54	9:55 <sup>30</sup>	9:55 <sup>30</sup>	9:58 <sup>30</sup>	3 min
	539	5' / 11.5'	10:01 <sup>30</sup>	10:04	10:04	>30w	F

REMARKS \_\_\_\_\_

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

TESTED BY Amy McMillen ALSO PRESENT Clark Sperry

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

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

COUNTY #

SOIL PROFILE  
510

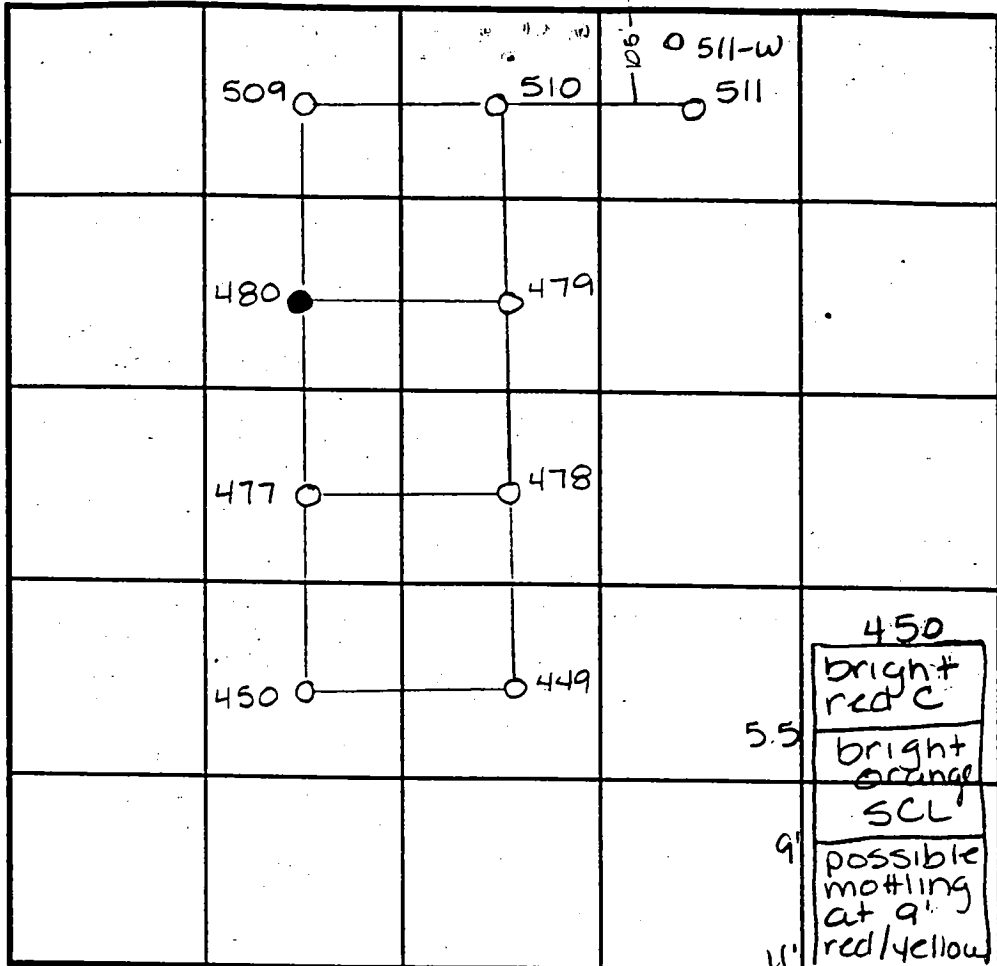
red c  
red & yellow blotchy SiSL blotchiness from parent rock pocket of rock 40% OIL shallow

509

same as 510 but no rock pockets

511

bright red c  
yellow and red splotchy SiSL from parent material less prominent toward bottom



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE 478  
0' tan clay  
1' red CSL 100% rock  
6' bright red SiSL  
9' lgt tan w/ grey spots from parent rock  
11.5' 478  
3' tan clay  
5' red CSL  
orange tan SiSL possible mottling at 8'

450  
5.5' bright red c  
9' bright orange SiSL  
11' possible mottling at 9' red/yellow

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
11-15-94	509	4.5 / V12	9:32 <sup>45</sup>	9:35	9:35	9:49	14min	
	480	Hard bottom at 5.5					F	
	510	4.5 / VII'	9:38	9:39 <sup>30</sup>	9:39 <sup>30</sup>	9:44	4 1/2 min	
	511	5.5 / VII'	10:34	10:37	10:37	10:42	5min	
	479	6.5' / 11.5'	10:39	10:45 <sup>15</sup>	10:45 <sup>15</sup>	11:00 <sup>45</sup>	5 1/2 min	
	478	4.5 / VII'	10:46	10:51	10:51	11:00	9min	
	477	Visual to 9'	> 50% rock				F	
	450	6' / VII'	10:53 <sup>30</sup>	10:55	10:55	10:57	2min	
	449	Water at 13'	- wet season testing					
11-30-95	511-A	Visual to 16'	- see profile					OK

REMARKS \_\_\_\_\_  
TYPE OF SOIL \_\_\_\_\_  
TESTED BY Amy McMillen ALSO PRESENT CLARK SPERRY  
TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME \_\_\_\_\_ TRENCH WIDTH \_\_\_\_\_  
INLET DEPTH \_\_\_\_\_ MAXIMUM BOTTOM DEPTH \_\_\_\_\_ SQ. FT./BEDROOM \_\_\_\_\_

511-W  
SOIL PROFILE

0  
4.0  
6.0  
13.5

dark red  
Silm

dark  
red  
Silm

1/2 grey  
bm  
SiSalm  
15%  
grey  
rock  
frag


see  
attached  
for location  
diagram

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
1-6-96	511-W	Visual to 13.5	- see	profile	—	OK	

REMARKS \_\_\_\_\_

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

TESTED BY \_\_\_\_\_ ALSO PRESENT \_\_\_\_\_

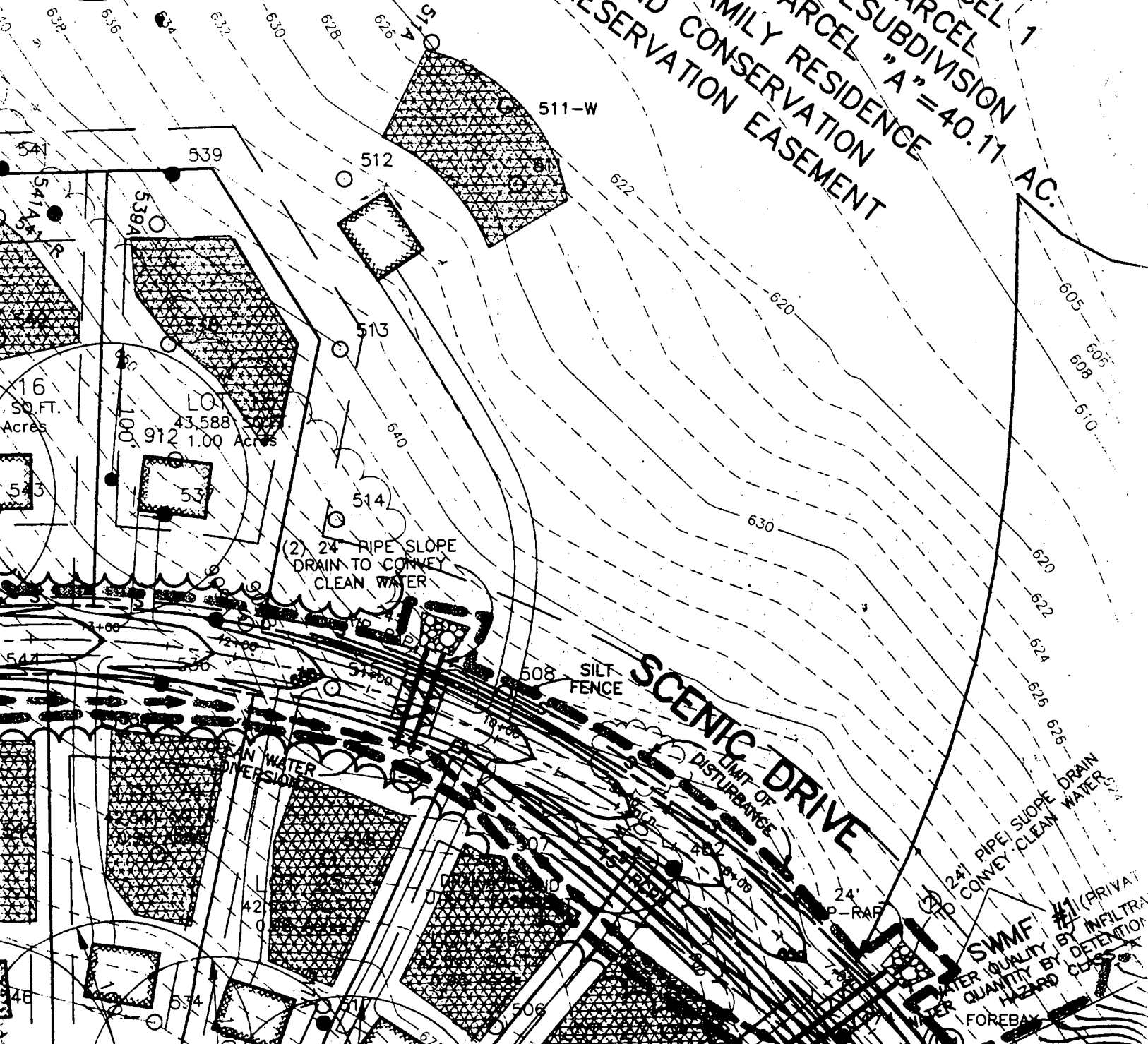
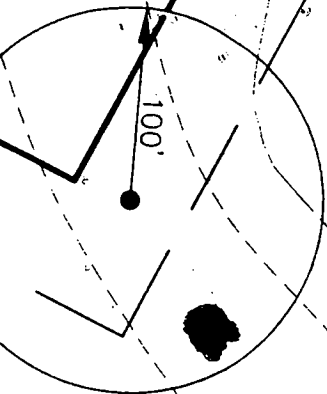


Approved  
p-96-20

CIRCULAR INGRESS/EGRESS RESTRICTED  
ROAD R/W DEDICATION  
STREET SIGN

ULTIMATE R/W M  
POWER POLE (TY  
CO2

P/O PRESERVATION PRIOR TO RESUBDIVISION  
P/O BULK PARCEL 1  
64.59 AC. PARCEL  
SINGLE FAMILY RESIDENCE  
AND CONSERVATION  
PRESERVATION EASEMENT  
"A" = 40.11 AC.



16 SQ. FT. Acres  
LOT 16  
43,588 SQ. FT.  
912 1.00 Acres

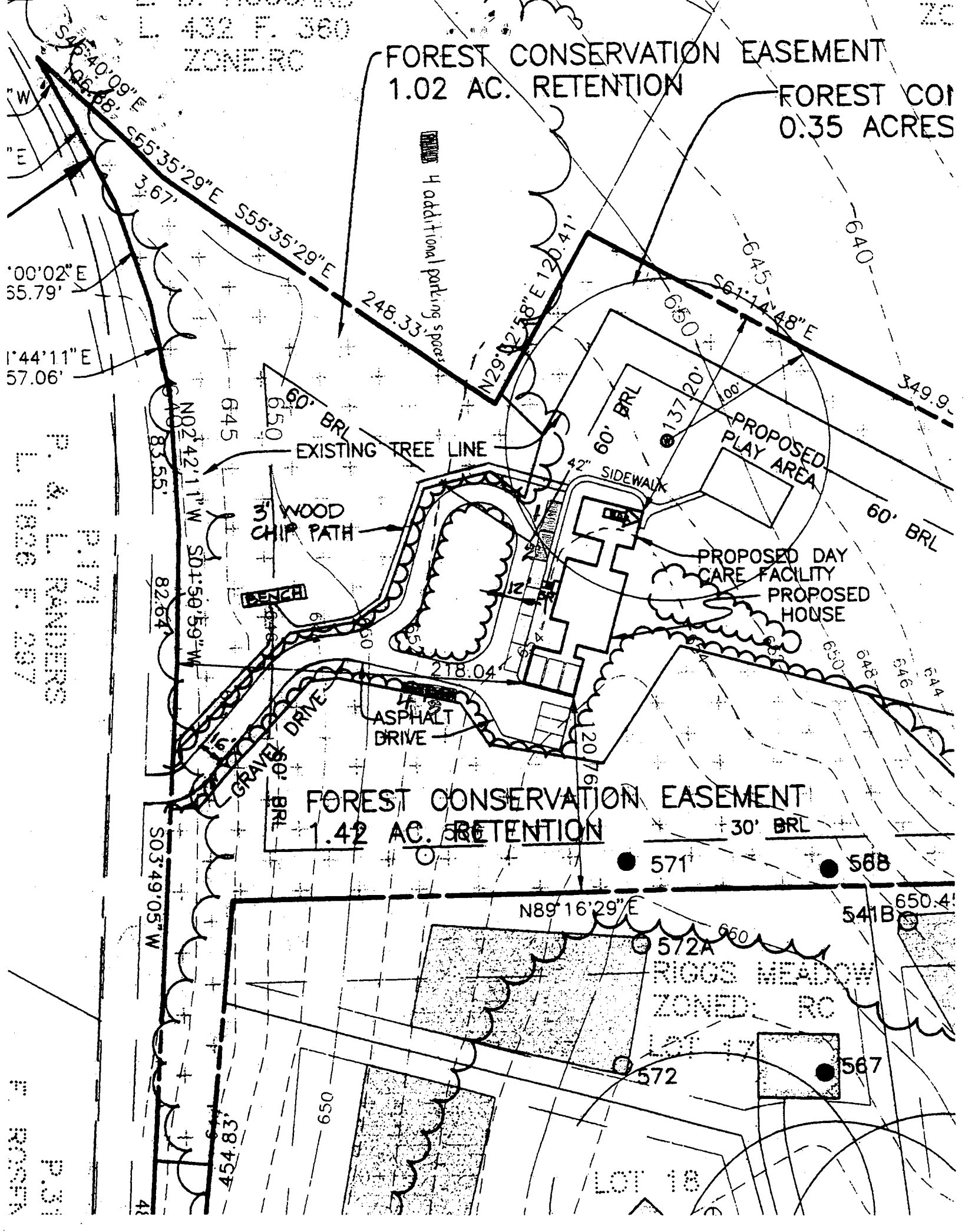
(2) 24" PIPE SLOPE DRAIN TO CONVEY CLEAN WATER

SWMF #1 (PRIVATE)  
WATER QUALITY BY INFILTRATION  
WATER QUANTITY BY DETENTION  
HAZARD CLASSIFICATION  
FOREBAY

L. 432 F. 360  
ZONE: RC

FOREST CONSERVATION EASEMENT  
1.02 AC. RETENTION

FOREST CONSERVATION EASEMENT  
0.35 ACRES



P. & L. RANDERS  
P.L. 1806 F. 287

P.31



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## HOWARD COUNTY HEALTH DEPARTMENT

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*Diane L. Matuszak, M.D., M.P.H., County Health Officer*

June 27, 2000

TO: Cindy Hamilton, Chief  
Department of Planning & Zoning

FROM: Amy Mc Millen, R.S.  
Water & Sewerage Program *AM*

RE: BA 00-18E  
14785 Bushy Park Road  
Increase enrollment for the existing day care facility

Health Department approval for the above-proposed increase in enrollment to 58 children would require the owners to increase the existing septic capacity and demonstrate sufficient septic repair area.

The following up-grade to the existing septic system would be necessary:

28 students X 20 gallons per day = 560 total gallons per day increase  
560 gallons per day / 1 gallon per day per square foot = 560 square feet  
560 square feet / 3 feet effective trench area = **187 total linear feet of trench**

1.5 X 600 gallons per day = 900 gallon septic tank, i.e. a **1000 gallon septic tank in series**

If sufficient septic area can not be demonstrated for 2 repair septic systems, additional percolation testing may be necessary. - *7/25/00 Testing not necessary - revised perc cert signed AL*

If the owner decides to proceed with the proposed enrollment increase/building addition, they should contact this office in order to obtain a septic repair permit prior to building permit application.

Am  
Cc:file

6. OTHER DATA TO ACCOMPANY PETITION.

The Petitioner must also submit with the petition a copy of the Decision and Order which the Petitioner seeks to be modified.

7. REQUEST FOR MODIFICATION:

The undersigned hereby petition the Board of Appeals for modification of conditions of approval in the following case:

Case Number BA 98-17E ; Petitioner: Cheryl Stradling

(  ) Special Exception; or (  ) Variance

a) The condition(s) sought to be modified: No. 2-The total enrollment in the day care center shall not exceed 30 children.

(You may use a separate sheet of paper)

b) The requested modification(s): Increase the number of children to 58.

(You may use a separate sheet of paper)

c) Reason(s) for the requested modification: Parents desire placement of children but program currently full.

d) The intended use of the property, in the event the petition is granted: Same, residential and day care center.

e) Any other factors which the Petitioner desires to have considered: Petitioner has had no problems with existing operation, site and nature of operation can accommodate growth.

Go to page 4.

f) Were there protestants at the original hearing? Y\_\_\_ N X

g) Describe in detail all existing improvements to the subject property: \_\_\_\_\_

House with play area in rear.

h) Describe any changes to properties in the vicinity of the subject property since the original petition was granted: More houses built to the southeast.

i) What will be the impact, if any, of your proposed modifications upon the subject property: Four (4) additional parking spaces will be constructed on the property to accommodate the additional square footage and one more nonresident employee. The square footage in the house devoted to the day care will be increased from the current 1439 to 2426, an increase of 987 square feet.

j) What will be the impact, if any, of your proposed modification upon any adjacent properties: Only impact is more children playing in play area.

8. PRIOR PETITIONS. Has any petition for modification of any conditions of approval been submitted within twenty-four (24) months of the date of this petition?

( ) YES (X) NO

9. 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.

Go to page 5.

(C7) INDICATES CURVE DESIGNATION  
FC3 INDICATES FOREST CONSERVATION EASEMENT LINE  
..... INDICATES VEHICULAR INGRESS AND  
EGRESS RESTRICTED

THE REQUIREMENTS § 3-108, THE REAL PROPERTY ARTICLE,  
ANNOTATED CODE OF MARYLAND, 1988 REPLACEMENT VOLUME  
(AS SUPPLEMENTED) AS FAR AS THEY RELATE TO THE MAKING  
OF THIS PLAT AND THE SETTING OF MARKERS HAVE BEEN  
COMPLIED WITH.

*Peter J. Dare* 2/19/98  
\_\_\_\_\_  
PETER J. DARE DATE:  
MARYLAND PROPERTY LINE SURVEYOR #224

JAMES R. MOXLEY, JR.  
\_\_\_\_\_  
PRESIDENT OF SDC GROUP, INC.  
GENERAL PARTNER OF COOKSVILLE LIMITED PARTNERSHIP  
*James R. Moxley* 2/19/98  
\_\_\_\_\_  
SIGNATURE OF OWNER DATE:

*Approved  
2-26-98*

THE PURPOSE OF THIS PLAT IS TO REVISE THE FOREST CONSERVATION  
EASEMENTS AND TO REMOVE THE 20' GAS AND UTILITY EASEMENT ACROSS  
PRESERVATION PARCEL 'A' AS SHOWN ON THE SUBDIVISION PLAT RIGGS  
MEADOW, RECORDED AS PLAT Nos. 12959 AND 12960.

MILLE LIMITED  
DIVISION, AND IN  
ONING, ESTABLISH  
ACCESSORS AND  
AND OTHER MUNICIPAL  
SPECIFIC EASEMENT  
OF THE STREETS  
OTHER VALUABLE  
FEE SIMPLE  
ILITIES AND  
DRAINAGE  
AND (4)  
E SAID  
1998.

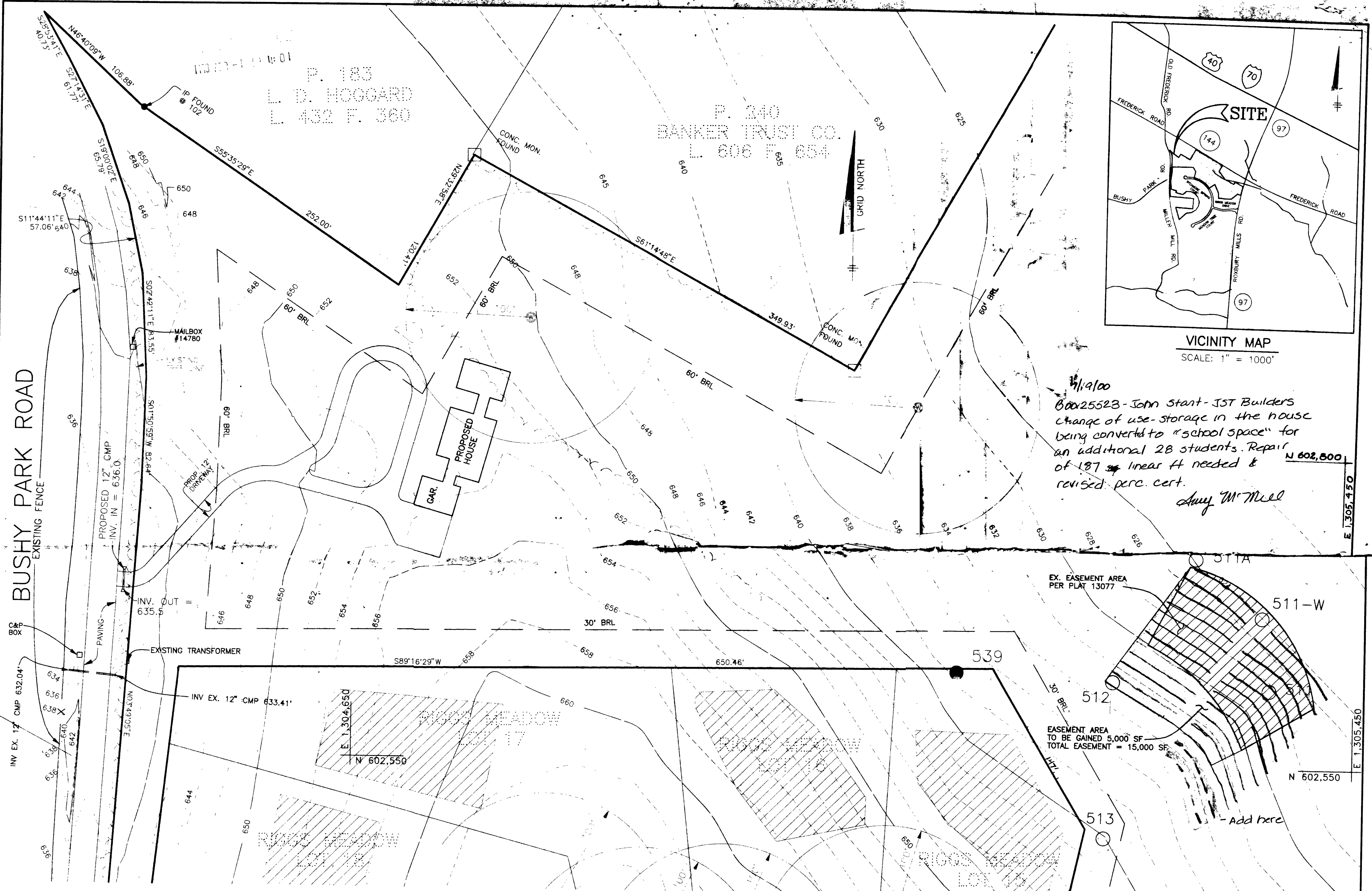
RECORDED AS PLAT 13076 *See*  
ON 2/16/98 AMONG THE LAND  
RECORDS OF HOWARD COUNTY, MARYLAND.

REVISION PLAT  
**RIGGS MEADOW**  
PRESERVATION PARCEL A  
AS SHOWN ON PLAT Nos.  
12957, 12959 AND 12960

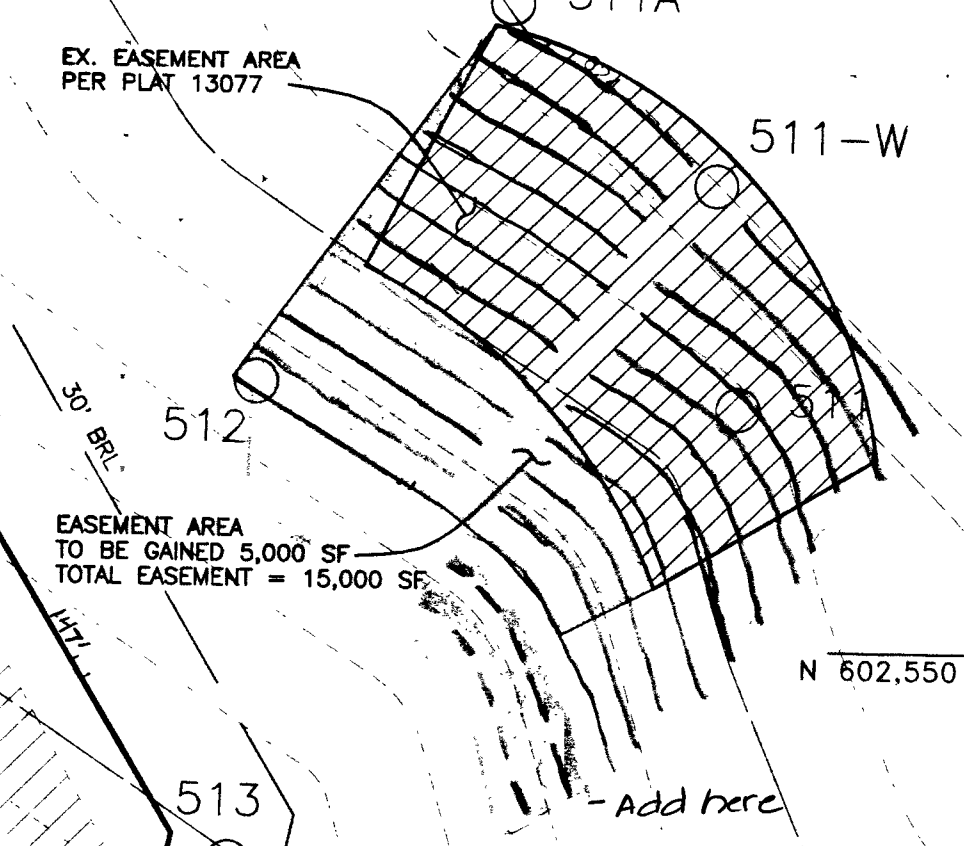
S-95-15 WP-96-82 P-96-20 F-97-40 F-97-41

4th ELECTION DISTRICT OF HOWARD COUNTY, MARYLAND  
TAX MAP NO. 8 & 14 SCALE: AS SHOWN  
PARCEL NO. 96 DATE: FEBRUARY, 1998  
BLOCK 22 & 4 SHEET: 1 OF 3  
ZONED: RC

F-98-96



1/19/00  
 00025523 - John Stant - JST Builders  
 change of use - storage in the house  
 being converted to "school space" for  
 an additional 28 students. Repair  
 of 187' linear ft needed &  
 revised perc. cert.  
 Amy McMill



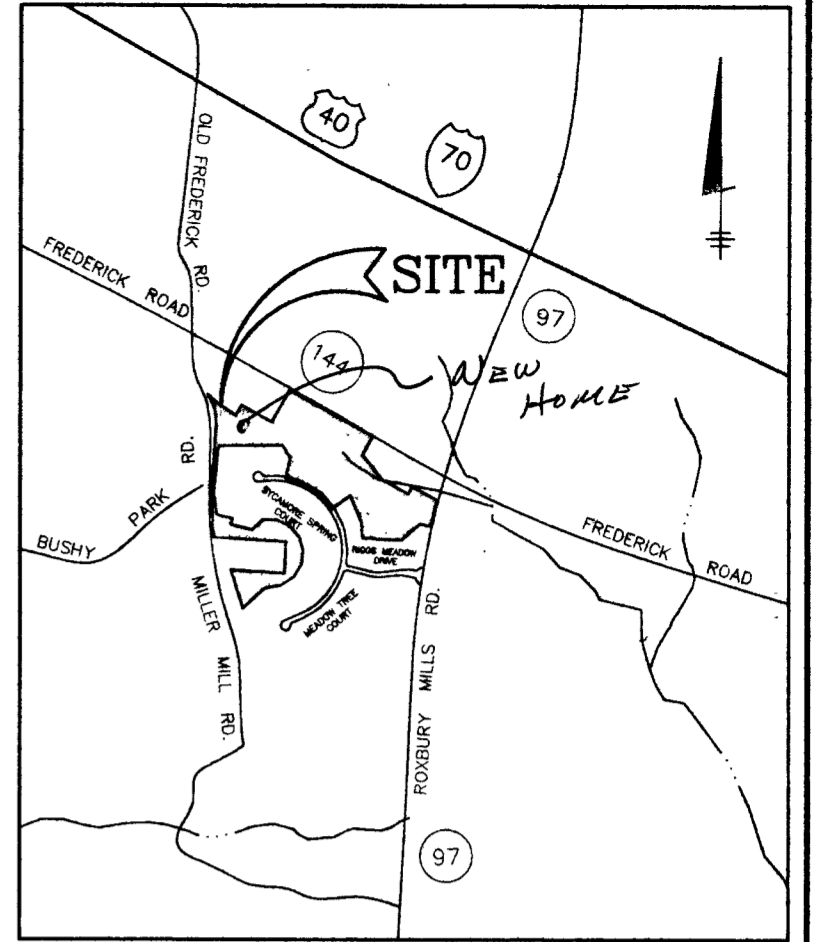
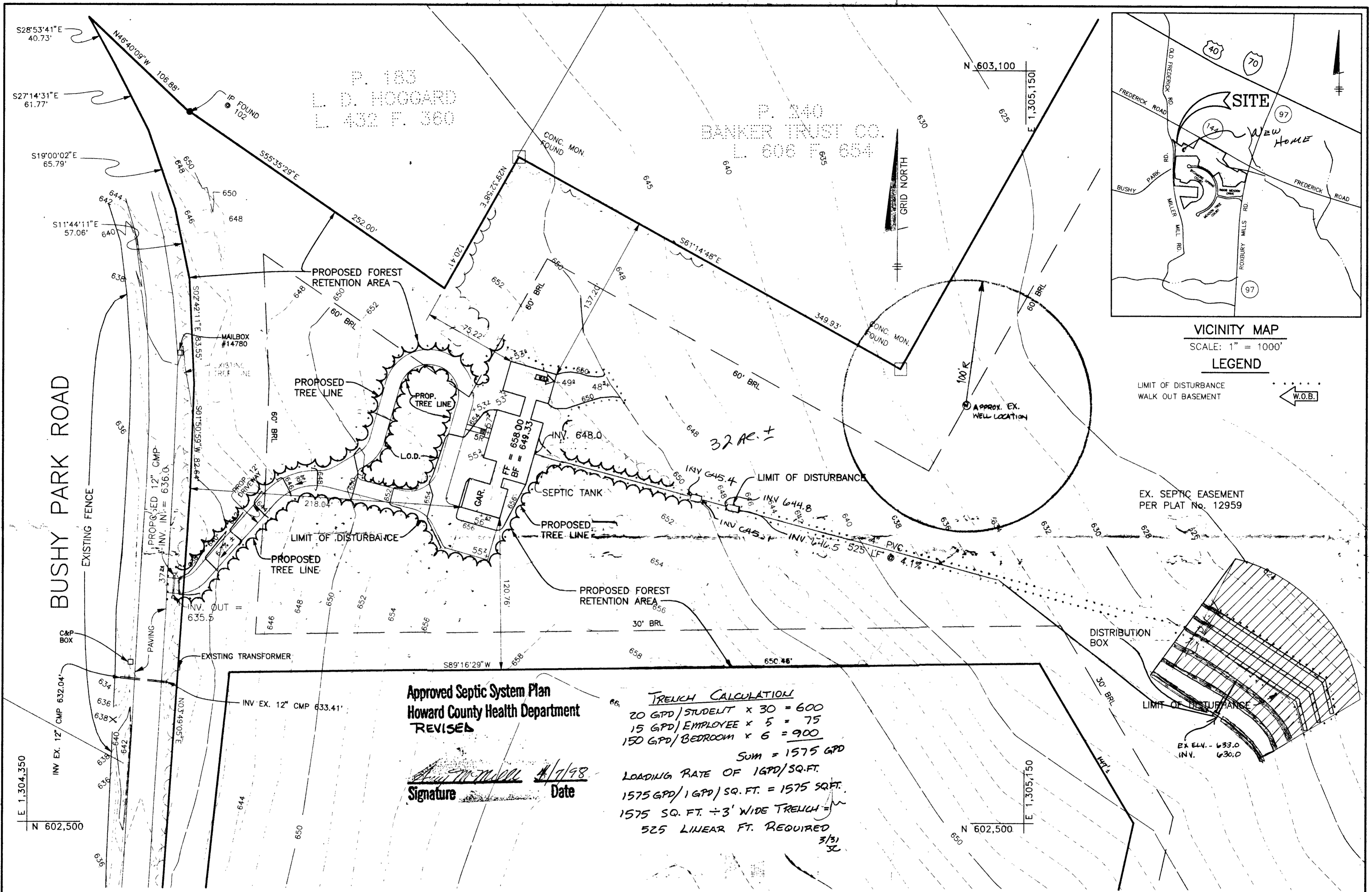
APPROVED FOR PRIVATE WATER AND SEWERAGE SYSTEM  
 HOWARD COUNTY HEALTH DEPARTMENT  
 [Signature] ALM 4-1-98  
 HOWARD COUNTY HEALTH OFFICER DATE

**TRENCH CALCULATION**  
 20 GPD/STUDENT x 30 = 600  
 15 GPD/EMPLOYEE x 5 = 75  
 150 GPD/BEDROOM x 6 = 900  
 SUM = 1575 GPD  
 LOADING RATE OF 16 GPD/SQ. FT.  
 1575 GPD / 16 GPD/SQ. FT. = 1575 SQ. FT.  
 1575 SQ. FT. ÷ 3' WIDE TRENCH =  
 525 LINEAR FT. REQUIRED  
 3/31/98

- NOTES**
- THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF 10,000 SQUARE FEET AS REQUIRED BY THE STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWERAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWER 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 ENCROACHMENT INTO THE PRIVATE SEWERAGE EASEMENT. RECORDATION OF A MODIFIED SEWERAGE EASEMENT PLAT SHALL NOT BE NECESSARY.
  - UNLESS OTHERWISE SHOWN, NO WELLS OR SEWERAGE EASEMENTS ARE LOCATED WITHIN 100 FEET OF THE PROPERTY.
  - TOPOGRAPHY SHOWN HEREON IS TAKEN FROM F-97-41 WHICH WAS PREPARED BY TSA GROUP, INC. AND SUPPLEMENTED WITH FURTHER FIELD RUN TOPOGRAPHY, BY TSA GROUP, INC. DATED 1/27/98.
  - PERCOLATION TEST HOLES SHOWN HEREON HAVE BEEN FIELD LOCATED. SHOWN AS O512
  - THE LOT SHOWN HEREON COMPLIES WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREAS AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT.

**TSA GROUP, INC.**  
 planning • architecture • engineering • surveying  
 6480 Baltimore National Pike • Ellicott City, Maryland 21043 • 410-465-6105

PROJECT: <b>RIGGS MEADOW PRESERVATION PARCEL 'A'</b>	
LOCATION: TAX MAPS 8 & 14 - PARCEL 96 4th ELECTION DISTRICT PLATS: 12959 AND 12960 HOWARD COUNTY, MARYLAND	
TITLE: <b>MODIFIED SEWERAGE EASEMENT PLAT</b>	
DATE: MARCH, 1998	PROJECT NO. 1110
SCALE: 1" = 50'	DRAWING 1 OF 1



VICINITY MAP  
SCALE: 1" = 1000'

LEGEND  
LIMIT OF DISTURBANCE  
WALK OUT BASEMENT

EX. SEPTIC EASEMENT  
PER PLAT No. 12959

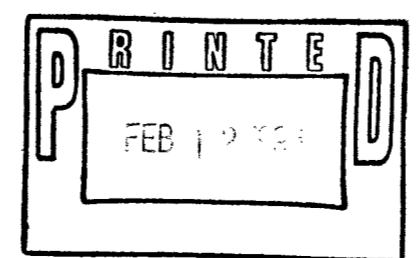
Approved Septic System Plan  
Howard County Health Department  
REVISED

*[Signature]*  
Signature  
4/7/98  
Date

TRENCH CALCULATION  
 20 GPD/STUDENT x 30 = 600  
 15 GPD/EMPLOYEE x 5 = 75  
 150 GPD/BEDROOM x 6 = 900  
 SUM = 1575 GPD  
 LOADING RATE OF 16 GPD/SQ.FT.  
 1575 GPD / 16 GPD/SQ.FT. = 1575 SQ.FT.  
 1575 SQ.FT. ÷ 3' WIDE TRENCH =  
 525 LINEAR FT. REQUIRED  
 3/31  
 SL

NOTE: ALL SEDIMENT CONTROL FEATURES SHALL BE INSTALLED IN ACCORDANCE WITH STANDARD DETAILS SHOWN IN THE 1994 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL.

- NOTES
- THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF 10,000 SQUARE FEET AS REQUIRED BY THE STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWERAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWER 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 ENCROACHMENT INTO THE PRIVATE SEWERAGE EASEMENT. RECORDATION OF A MODIFIED SEWERAGE EASEMENT PLAT SHALL NOT BE NECESSARY.
  - UNLESS OTHERWISE SHOWN, NO WELLS OR SEWERAGE EASEMENTS ARE LOCATED WITHIN 100 FEET OF THE PROPERTY.
  - TOPOGRAPHY SHOWN HEREON IS TAKEN FROM F-37-41 WHICH WAS PREPARED BY TSA GROUP, INC. AND SUPPLEMENTED WITH FURTHER FIELD RUN TOPOGRAPHY, BY TSA GROUP, INC. DATED 1/27/88.
  - EXACT LENGTH OF SEPTIC TRENCHES TO BE DETERMINED BY THE HEALTH DEPARTMENT AT THE TIME OF PERMIT ISSUANCE.



TSA GROUP, INC.  
planning • architecture • engineering • surveying  
8480 Baltimore National Pike • Ellicott City, Maryland 21043 • 410-486-8105

PROJECT:	RIGGS MEADOW PRESERVATION PARCEL 'A'	
LOCATION:	TAX MAPS 8 & 14 - PARCEL 96 4th ELECTION DISTRICT PLATS: 12959 AND 12960 HOWARD COUNTY, MARYLAND	
TITLE:	PLOT PLAN	
DATE:	FEBRUARY, 1998	PROJECT NO. 1
SCALE:	1" = 50'	DRAWING 1