

Approved
6/21/78
750

P 26829
A 24206

~~6/20/78~~
as early as possible

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

6/21/78
late afternoon please

DISTRICT 5th

DATE 9/2/77

INDEXED

Kastner Plumbing IS PERMITTED TO INSTALL ALTER

ADDRESS _____ PHONE _____

A SEWAGE DISPOSAL SYSTEM LOCATED AT _____

SUBDIVISION Chris Mar Estates ROAD Brighton Dam Road LOT 13

PROPERTY OWNER Paul Kottis BUILDING PERMIT SIGNED

ADDRESS Highland, Md. AND RETURNED

SPECIFICATIONS 4 bedrooms 10/22/03 800144688-DECK

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

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

SEPTIC TANK CAPACITY 1250 GALLONS

150	170
6	4
900	680

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

OTHER DRY WELL AND/OR TRENCH system to have 170 sq. ft. effective sidewall absorption area to begin below the first 3 1/2 ft. of non-porous soil. Maximum depth permitted for dry well or trench is 9 1/2 ft. below original grade. Place the dry well 25 ft. from the left sideline and 120 ft. from the front property line as seen when facing the property from Brighton Dam Road. Start the trench after a 5 ft. earth buffer with the dry well and proceed to dig it on level ground, the necessary distance running towards the left front corner of property. If trenches only are to used, there must be at least 200 sq. ft. sidewall absorption area per bedroom distributed in two trenches, NOTE: CALL FOR INSPECTION OF TRENCHES BEFORE BRAVEL IS INSTALLED. TRENCHES MUST BE CONNECTED IN SERIES.

PLANS APPROVED BY Frank Skinner DATE 3/29/77

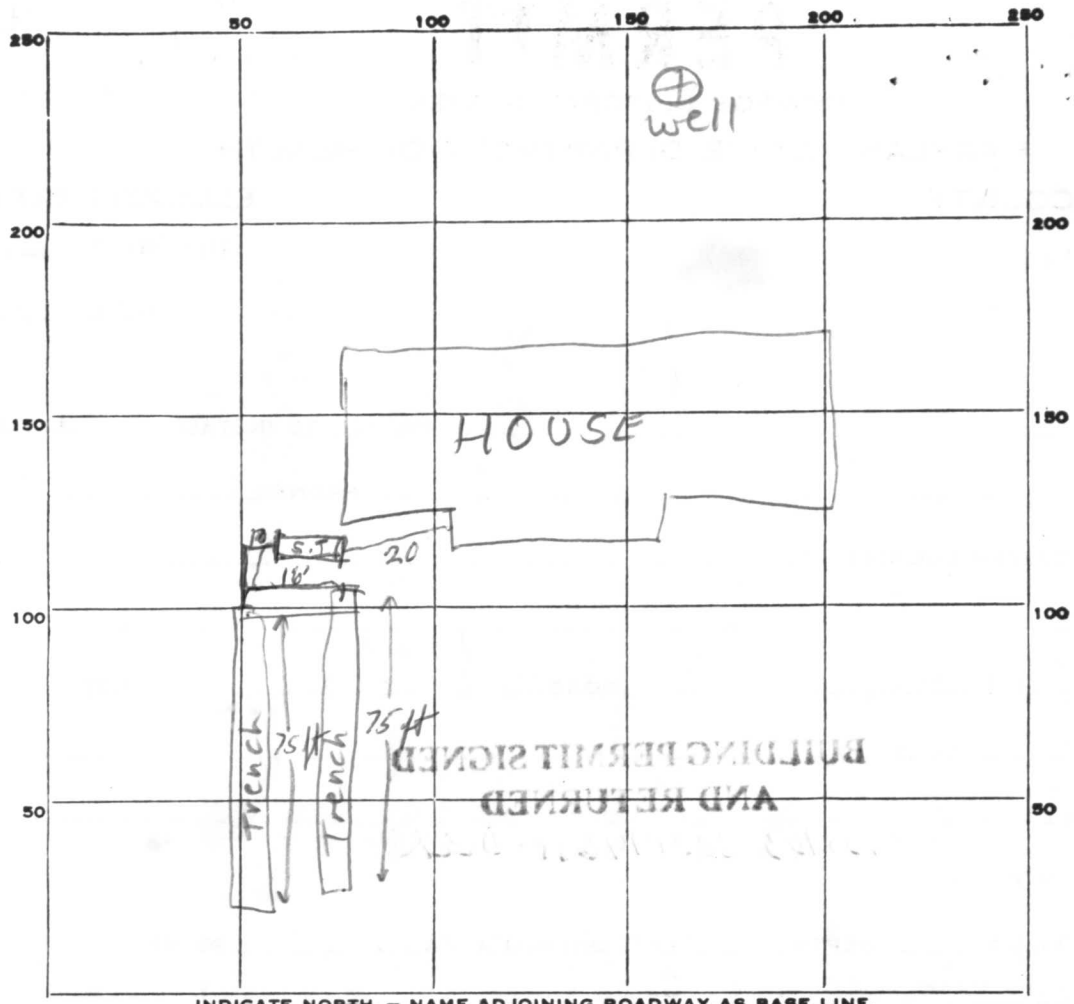
NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON. PERMIT VOID AFTER 3 YEARS. FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

NOTE: INSTALL STAND PIPES ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN NEITHER THE HOWARD COUNTY COMMISSIONERS NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA ACCEPTED.

BLDG. PERMIT SIGNED
AND RETURNED 9/11/78
Serial # 04263
Per.

A 24206



150
5.5
480
750
8250

INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

Brighton Dam Road

PERMIT CARD

SEPTIC TANK, LEVEL CLEANOUTS cit NA

DISTRIBUTION BOX, LEVEL NA

TILE FIELD, DEPTH 9 FT. TRENCH WIDTH 2 FT.

GRAVEL DEPTH 5 1/2 ft. IN. TOTAL LENGTH 150 FT.

NUMBER OF TRENCHES 2 TOTAL BOTTOM AREA 1/2 sidewalk 825 ft²

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

ABSORBENT AREA _____ SQ. FT.

REMARKS
06-2078 Continue working ROOB

DATE SYSTEM APPROVED 6/21/78 INSPECTOR T.S. [Signature]

APPLICATION

Well under name of Teresa Cucca
A 24206
P _____

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT 3 B.R. | 4 B.R. DISTRICT 5
ENVIRONMENTAL HEALTH SERVICES 100 gal. septetank | 1250 gal. septetank DATE 10/6/76

P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

Daywell and/or trench system to have 170 SQ. FT. effective sidewall absorption area to begin below the first 3 1/2 ft. of non-porous soil. Maximum depth permitted for daywell or trench is 9 1/2 ft. below original grade. Place the daywell 25 ft. from the left sideline and 120 ft. from the front property line as seen when facing the property from Brighton Dam Road. Start the trench after a 5 ft. earth buffer with the daywell and proceed to dig it on level ground, the necessary distance towards the left front corner of property. If trenches only are to be used there must be at least 200 SQ. FT. sidewall absorption area per bedroom distributed in two trenches. NOTE: Call for inspection of trenches before gravel is installed. NOTE: Trenches must be connected in series.

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

PROPERTY OWNER Paul G. Kottis

ADDRESS P. O. Box 28, Highland, Maryland 20777 PHONE _____

PROPERTY LOCATION: Chris Max Estates

SUBDIVISION Brighton Dam Limited Partnership LOT NO. 15 new 13

ROAD AND DESCRIPTION Brighton Dam Road

SIZE OF LOT 1 acre m/1 TYPE BLDG. 3 or 4

IF NOT SINGLE RESIDENCE DESCRIBE _____ NUMBER OF BEDROOMS (Single Fmly. Dwllg.)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ Paul G. Kottis

APPROVED BY Frank Skinner FOR drywell &/or trench DATE 3/29/77
(KIND OF SYSTEM)

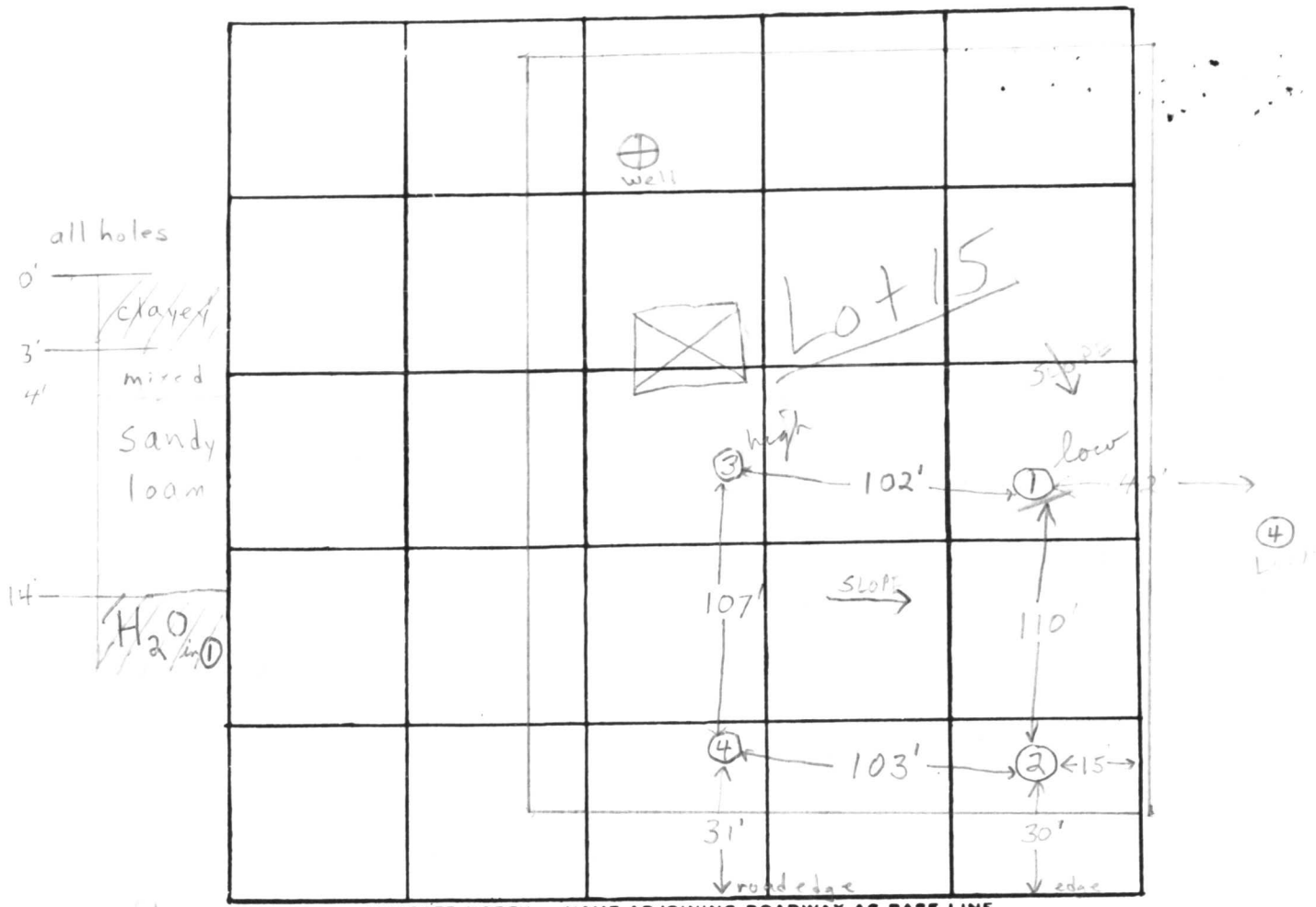
REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____ BLDG. PERMIT SIGNED AND RETURNED 8/24/77

200120 34969

THIS IS NOT A PERMIT



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

BRIGHTON DAM ROAD

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
9/21/76	1 low	5 1/2'	10:34	10:38	10:38	10:44	6 min	
	w 1A	14'	Water at 14'					Clay to ~3' sandy loam below
	2	3'	10:44	10:46	10:46	10:48	2 min	
	2A	13'	10:48	10:50	10:50	10:55	5 min	
	3 high	4'	10:59	11:05	11:05	11:20	15 min	
	3A	13 1/2'	11:02	11:05	11:05	11:09	4 min	
	4	13'	Clay to 4'					sandy loam below
	1B	4'	11:15	11:23	11:23	11:39	16 min	
	1C	12'	11:18	11:20	11:20	11:22	2 min	
3/28/77	1A redug	14'	Water at 14'					

REMARKS ~6' drop between 3 & 1 HOLD FOR WET SEASON TEST Max. depth 9'

TYPE OF SOIL sandy loam below top 2-4' clayey soil

TESTED BY F.S. ALSO PRESENT: P. Kottis

C 1 **0.755** SEQUENCE NO. (WRA USE ONLY)

1 2 3 (SEQ. NO.) 6

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

DATE RECEIVED (WRA USE ONLY)

DATE WELL COMPLETED 8/16/77

8-13 15 20

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

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER

DEPTH OF WELL 20

22 (TO NEAREST FOOT) 26

PERMIT NO. FROM "PERMIT TO DRILL WELL"

MD-73-2201

28 29 30 31 32 33 34 35 36 37

DRILLERS IDENTIFICATION NO. 42

OWNER CESCA, TERESA LAST NAME TERESA FIRST NAME

STREET OR RFD 6726 MINK HOLLOW ROAD POST OFFICE HIGHLAND, MD.

WELL DESCRIPTION

WELL LOG

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

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET		CHECK IF WATER BEARING
	FROM	TO	
<u>Top Soil</u>	<u>0</u>	<u>2</u>	
<u>SANDY SANDSTONE</u>	<u>2</u>	<u>40</u>	
<u>MICA</u>	<u>40</u>	<u>60</u>	<input checked="" type="checkbox"/>
	<u>60</u>	<u>120</u>	

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) YES NO

TYPE OF GROUTING MATERIAL (CIRCLE BOX):
 CEMENT BENTONITE CLAY

NO. OF BAGS 16 NO. OF POUNDS 1600

GALLONS OF WATER 80

DEPTH OF GROUT SEAL (TO NEAREST FOOT)
 FROM 0 FT. TO 40 FT.
 (ENTER 0 IF FROM SURFACE)

CASING RECORD

CASING TYPES: INSERT APPROPRIATE CODE BELOW

STEEL CONCRETE
 PLASTIC OTHER

MAIN CASING TYPE ST NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) 6 TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) 50

OTHER CASING (IF USED)

DIAMETER (INCH) DEPTH (FEET) FROM TO

SCREEN RECORD

SCREEN TYPE OR OPEN HOLE: INSERT APPROPRIATE CODE BELOW

STEEL BRASS OR BRONZE OPEN HOLE
 PLASTIC OTHER

C 2 (SEQ. NO.)

1 2 3 (SEQ. NO.) 6

DEPTH (NEAREST WHOLE FOOT) FROM TO

1 110 40 120

2

3

SLOTSIZE 1. 2. 3.

DIAMETER OF SCREEN 56 60 (NEAREST INCH) FROM TO

GRAVEL PACK

IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX

WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER)

TELESCOPE CASING LOG INDICATOR OTHER DATA AVAILABLE

C 3 (SEQ. NO.)

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) 3

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 7

METHOD USED TO MEASURE PUMPING RATE BUCKET

WATER LEVEL: (DISTANCE FROM LAND SURFACE)
 BEFORE PUMPING 30 (NEAREST FOOT)
 WHEN PUMPING 120 (NEAREST FOOT)

TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST)
 AIR PISTON TURBINE
 CENTRIFUGAL ROTARY OTHER (DESCRIBE BELOW)
 JET SUBMERSIBLE

PUMP INSTALLED

TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: A, C, J, P, R, S, T, O)

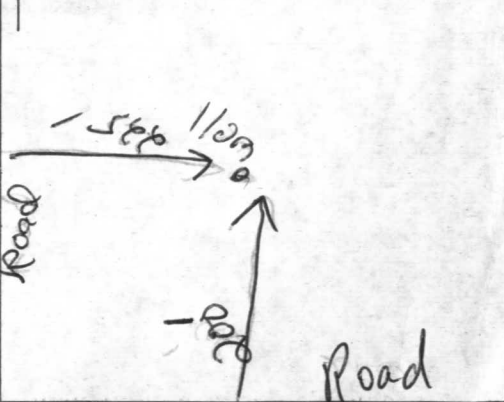
DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) YES NO

CAPACITY:
 GALLONS PER MINUTE (TO NEAREST GALLON) 31 35
 PUMP HORSE POWER 37 41
 PUMP COLUMN LENGTH (NEAREST FOOT) 43 47

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)
 ABOVE } LAND SURFACE (NEAREST FOOT)
 BELOW } 2

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURE SUCH AS BUILDINGS, SEPTIC TANKS, AND/OR OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL).



CIRCLE APPROPRIATE BOXES

A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED

ELECTRIC LOG OBTAINED

TEST WELL CONVERTED TO PRODUCTION WELL

I HEREBY CERTIFY THAT I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CAPTIONED "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.

DRILLERS NAME

(PLEASE PRINT) L. F. EASTERDAY

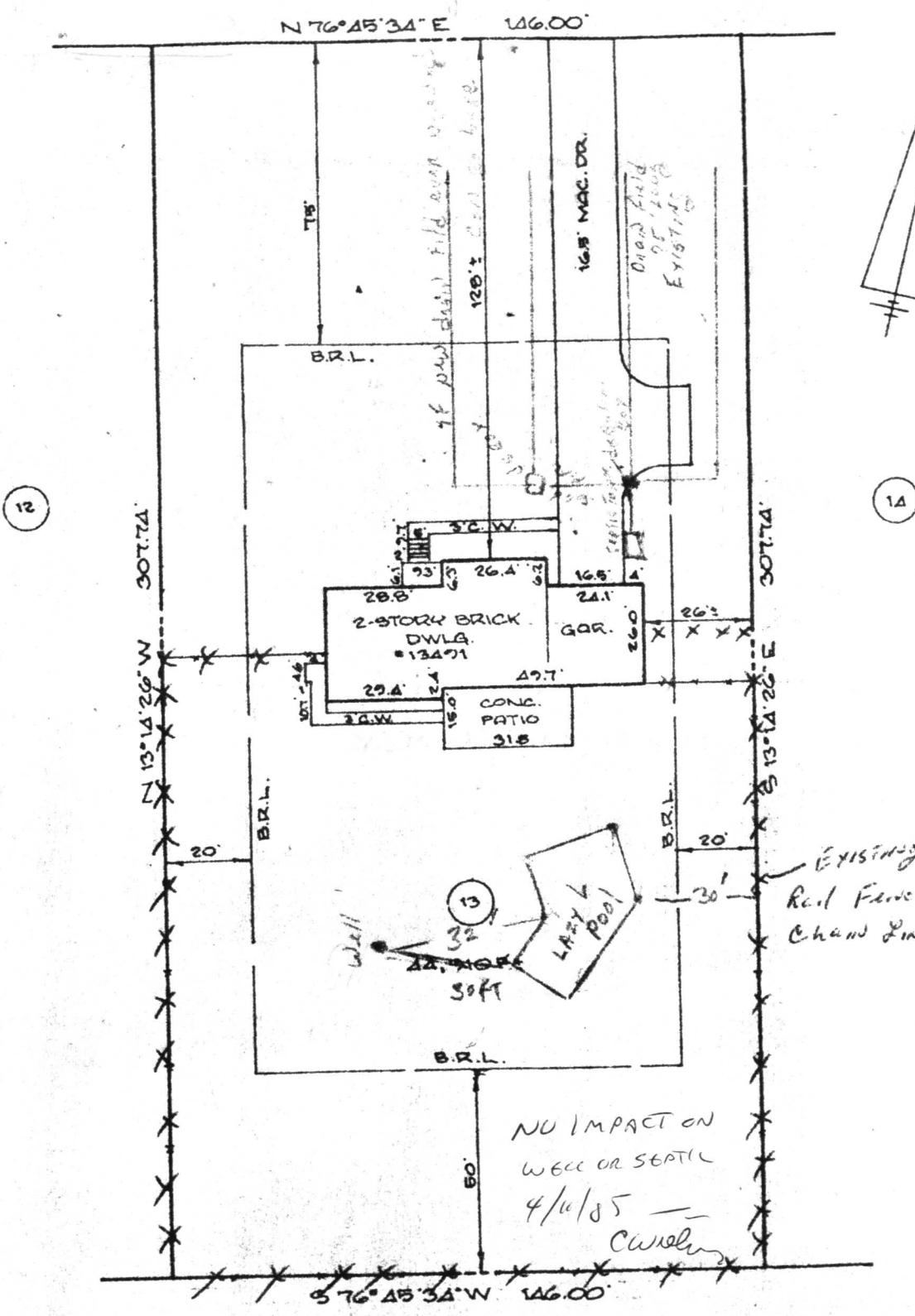
SIGNATURE L. F. Easterday

Property known as:
13491 BRIGHTON DAM RD.
HOWARD COUNTY, MD.

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

LOT 13 "SECTION 1, CHRIS-MAR
ESTATES" PLAT # 3728
5TH ELECTION DISTRICT

BRIGHTON DAM RD.
(FUTURE 60' R/W)



MR. & MRS. ERNEST HIRAI
13491 Brighton Dam Road
Clarksville, Md 21029
301-844-3010

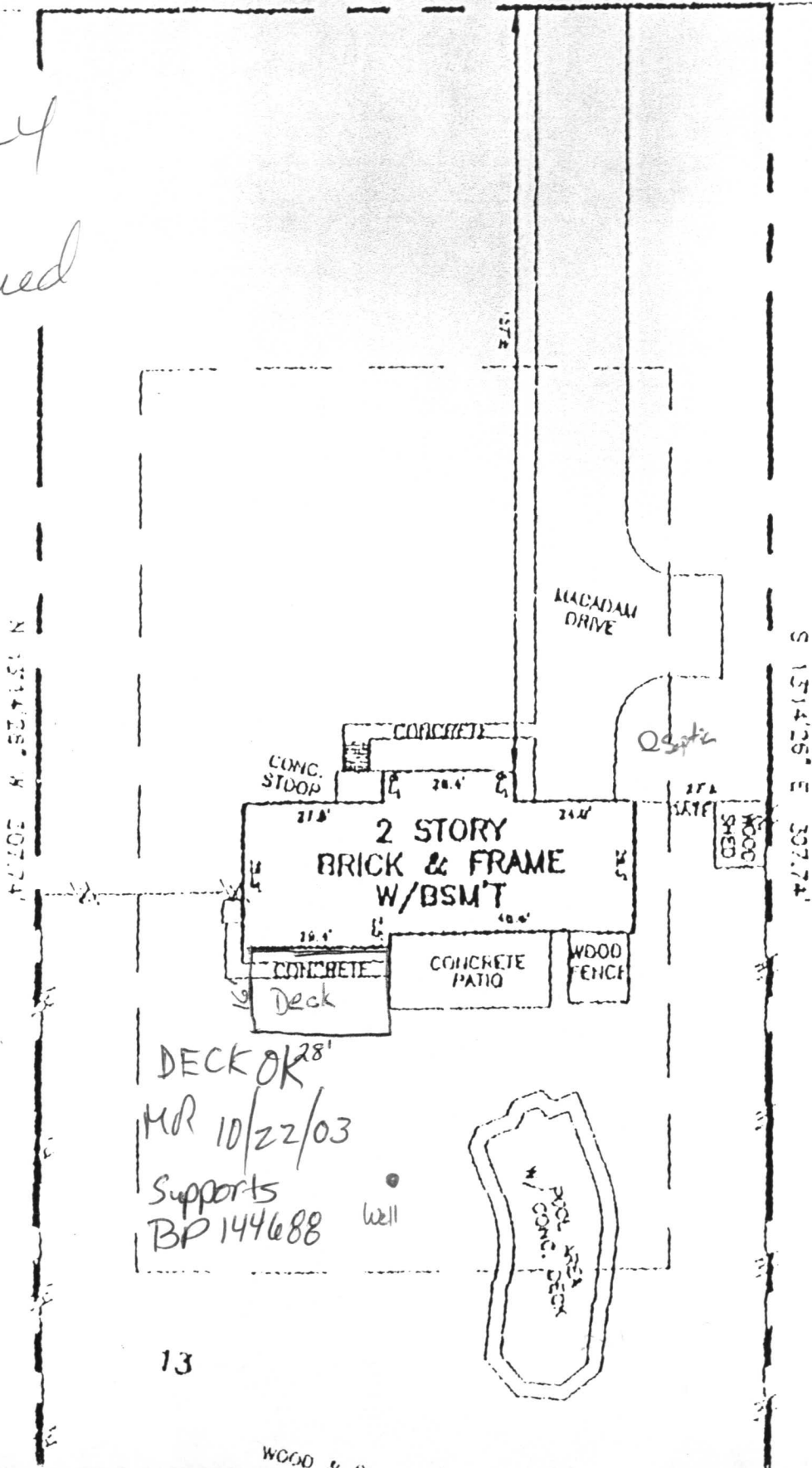
EXISTING 4FT SPLIT
Rail Fence with
Chain Link on INSIDE

NO IMPACT ON
WELL OR SEPTIC
4/6/85
CWL

BRIGHTON DAM ROAD
(FUT. 60' R/W)

N 76°45'34" E 146.00'

THIS
SIDE ONLY
NEEDED
BP# Copied
below



RYLAND
SON

Health Dept -

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVE
ELLIOTT CITY, MD 21043
PERMITS (410) 313 2456 INSPECTIONS (410) 313 1810
AUTOMATED INFORMATION (410) 313 3800

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

30044688

Building Address 13491 BRIGHTON DAM RD
CLARKSVILLE, MD 21029
Suite/Apt. #: _____ SDP/WP/Petition #: _____
Census Tract 60501 Subdivision _____
Section _____ Area _____ Lot _____
Tax Map _____ Parcel _____ Grid _____
Zoning _____ Map Coordinates B3J9 Lot size _____

Property Owner's Name JASON CROUSE
Address 13491 BRIGHTON DAM RD
City CLARKSVILLE State MD Zip Code 21029
Home Phone 301-854-3796 Work Phone 301-924-0110
Applicant's Name & Mailing Address, (if other than stated hereon): _____
Phone _____ Fax _____

Existing Use Gross SFD
Proposed Use Deck SFD
Estimated Construction Cost \$ 1500.00
Description of Work Building Deck 28' x 12'
Steps to grade

Contractor Company CCW/LL
Contact Person _____
Address _____
City _____ State _____ Zip Code _____
License No. _____
Phone _____ Fax _____

Occupant or Tenant 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 DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: _____	Water Supply: Public _____ Private _____
No. of stories: _____	Sewage Disposal: Public _____ 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: Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ State Certified Modular _____	Sprinkler system: N/A <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> 1st floor: <u>28'5"</u> <u>48'8"</u> 2nd floor: <u>28'5"</u> Basement: <u>25'8"</u> <u>29'5"</u> 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 _____ 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: _____ State Certified Modular _____ Manufactured Home _____	Water Supply: Public _____ Private <input checked="" type="checkbox"/> Sewage Disposal: Public _____ Private <input checked="" type="checkbox"/> Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Heating System: Electric <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: N/A <input checked="" type="checkbox"/> NFPA #13D _____ 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 THEREON, (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.

Jason Crouse
Applicant's Signature

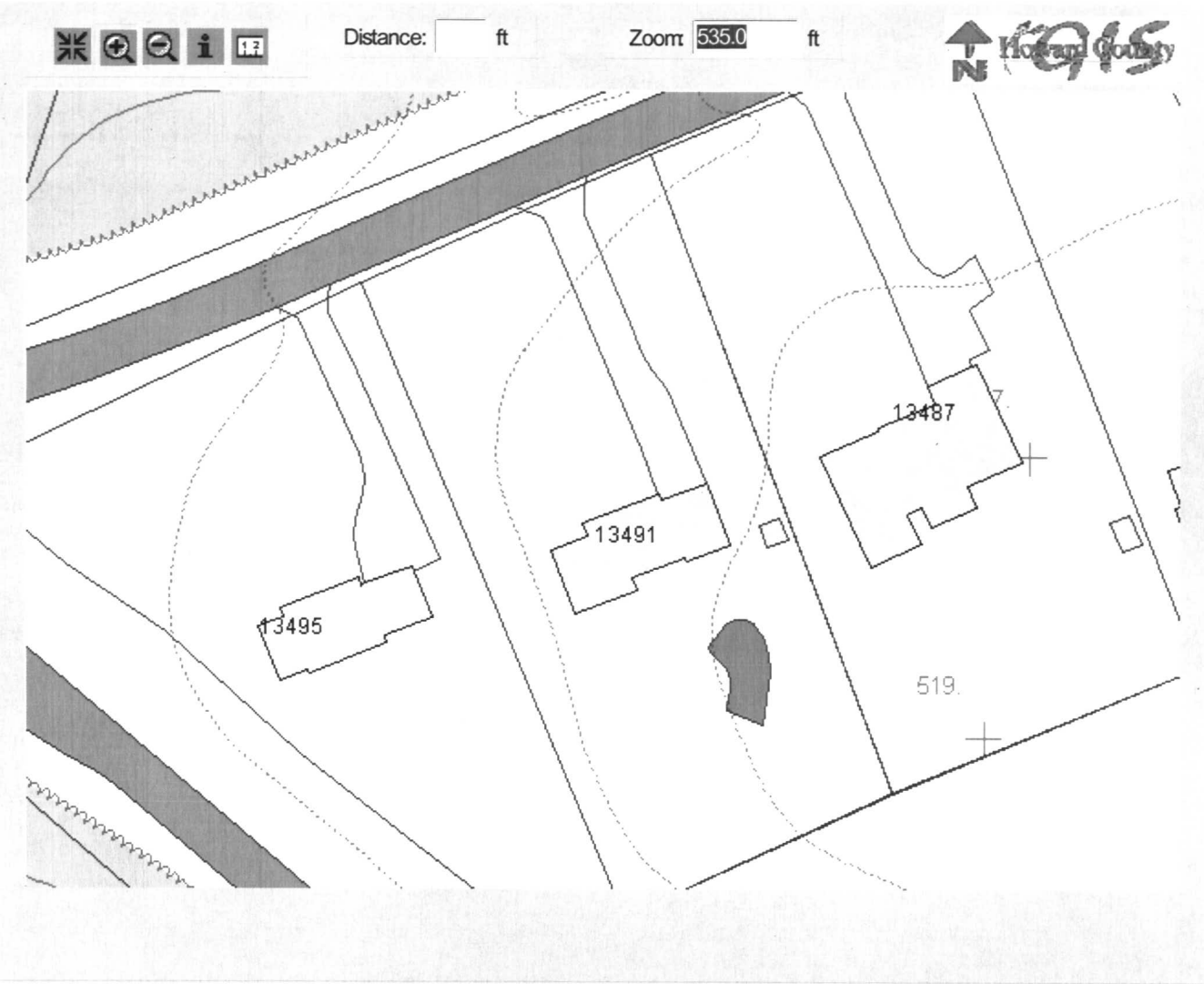
JASON CROUSE
Print Name
10/23/03
Date

Title/Company
OK MR 10/22/03

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# 59918
Filing fee \$ _____

Help Me ?	Map Reset ↺	Zoom Fit ↻	Find Location 🔍	Remove Pin 📌	Layer Control 📁	Image Control 🖼️	Theme Map 🎨	Local Print 🖨️	Print Layout 📄	Email Map ✉️	Map Exit 🏠
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Disclaimer: Howard County, Maryland assumes no responsibility for the accuracy of this map or the information contained herein or derived therefrom. The buyer and/or user assumes all risks and liabilities whatsoever resulting from or arising out of the use of this map. There are no oral agreements or warranties relating to this sale and/or use of this map.

Thursday, February 10 2005 | 10:05:17 AM | @670

Map Legends

County Line	Property Line
Stream Major	Stream Minor
Ponds Lakes	Tree Lines
Fences	Railroad
House Driveway	Contour Lines 400
Contour Label 401	Spot Elev.
Road Paving	Bridges Over Pass
Electric ROW & Tower	

Property Information

	Property Boundary
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Information

RecordID	48838
PremiseNo	13491
PremiseAddress1	13491 BRIGHTON DAM RD
PremiseAddress2	CLARKSVILLE, MD 21029
AccountID	1405379709
OccupiedBy	H
OwnerName1	CORK DONALD B
OwnerName2	CROUSE CORK MARY CAROL
OwnerAddress1	13491 BRIGHTON DAM RD
OwnerAddress2	CLARKSVILLE MD 21029
LegalDescript1	IMPSLOT 13-1.030AR S 1
LegalDescript2	13491 BRIGHTON DAM RD
DeedLiber	02172
DeedFolio	0534
Subdivision	0000
Plat	
Section	
Block	
Lot	13
Map	34
Grid	15
Parcel	367
MapParcelLot	M34P367L13
ExemptionClass	NOT EXTRACTED Taxable Property
Acres	1.03
StructureGrade	average
ConstructionType	brick
Stories	2 story no basement
DwellingType	split level 3 or more levels of living area
YearBuilt	1978
BuildingSquareFeet	2476
SalesTransNo	903513
GrantorName	HIRAI ERNEST
GrantorLiber	00967
GrantorFolio	0080
TransferDate	19900517
SalePrice	274500
LandValue	140300
ImprovementValue	195570
TotalValue	335870