

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

03-307530

ELLICOTT CITY

DISTRICT 3rd

DATE May 27, 1981

INDEXED

6/10/81 P 31402

A 30748

Let's get it after 6/10/81 if possible.

Mr. Ronald N. Michael, III IS PERMITTED TO INSTALL ALTER

ADDRESS 6654 Mohawk Court, Columbia Md. PHONE 997-8675

SUBDIVISION Heatherwood ROAD 1709 Heatherwood Way Old Frederick Rd LOT 12/17

PROPERTY OWNER Same Ron Michaels

ADDRESS Old Frederick Road

SPECIFICATIONS 3 Bedrooms
SEPTIC TANK CAPACITY 1000 GALLONS
DRAIN FIELD DEPTH FEET, BOTTOM AREA SQ. FT.
DEEP TRENCH DEPTH FEET, BOTTOM AREA SQ. FT.
SEEPAGE PITS ABSORBENT SIDE-WALL AREA 120 SQ. FT. per bedroom
INLET PIPE FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH FT. BELOW ORIGINAL GRADE
EFFECTIVE DEPTH AT FT. BELOW ORIGINAL GRADE.
LOCATE DISPOSAL AREA FT. FROM LOT LINE AND FT. FROM LOT LINE AS SEEN WHEN FACING LOT FROM

TRENCH, 6 ft. deep with 3 ft. of stone, 2-3 ft. wide. No ditch over 100 ft. long.
Use a distribution box start the drain field at a point 190 ft. from the back lot line and 120 ft. from the left side of the lot as seen when facing the lot from heatherwood way.
Run the ditches along the contour of the land toward the left and right side of the lot.
Trench not to be connected in series.

PLANS APPROVED BY Raymond Hodges DATE 10/18/79

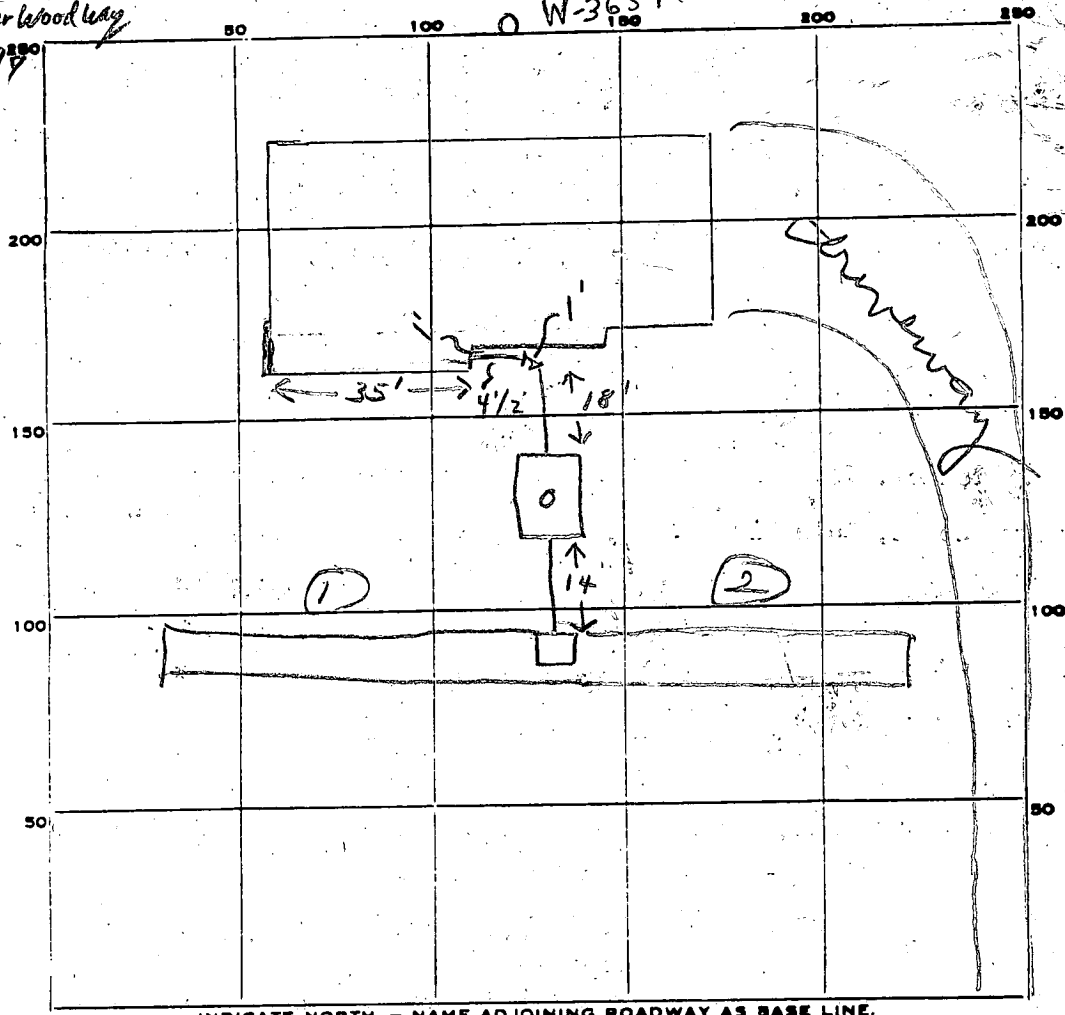
COVER NO WORK UNTIL INSPECTED AND APPROVED.
NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.
NOTE: IF TRENCH IS USED CALL FOR INSPECTION BEFORE PLACING GRAVEL IN TRENCH.
NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER.
NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.
PERMIT VOID AFTER THREE 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 ACCEPTED.

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

VOID. PERMIT SIGNED AND RETURNED 10-20-89
Sewall B 121102
Ingram PRH

A 30748

1709 Heatherwood Way
 Heatherwood #790
 A30748



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.
 Heatherwood Way

PERMIT CARD

SEPTIC TANK, LEVEL CLEANOUTS ST

DISTRIBUTION BOX, LEVEL Cast iron

TILE FIELD, DEPTH 6 FT. TRENCH WIDTH 3 FT.

GRAVEL DEPTH 3 IN. TOTAL LENGTH 160 FT.

NUMBER OF TRENCHES 2 TOTAL BOTTOM AREA 480

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

ABSORBENT AREA 480 SQ. FT.

REMARKS 6/9/81 OK to cover septic tank + 10 ft. of
cast iron pipe at both ends of septic tank. J & S
6/9/81 OK to add stone in trenches. J & S
6/10/81 SYSTEM COMPLETE.
 C.B.S.

DATE SYSTEM APPROVED 6/10/81 INSPECTOR C. B. Steakes

321-0307

Retest

APPLICATION

7/9/80
9:30 A.M.

SEWAGE DISPOSAL TESTING

A 30748

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P.O. BOX 476 ELLICOTT, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT 3rd

DATE 6/30/80

Spec's other page

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

BLDG. PERMIT SIGNED
AND RETURNED 8/14/80
Serial # 43961

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

PROPERTY OWNER Ronald N. Michael, III and Bonnie L. Michael

ADDRESS 6654 Mohawk Court, Columbia, Md. 21046 PHONE 997-8675

PROPERTY LOCATION:

SUBDIVISION Heatherwood LOT NO. 17

ROAD AND DESCRIPTION Old Frederick Road

SIZE OF LOT 3 acres m/l TYPE BLDG. 3 or 4 bedrooms

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.

SIGNATURE OF APPLICANT *Ronald N. Michael, III*

APPROVED BY *J. Stayer* FOR *drain fields* DATE *7/10/80*

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

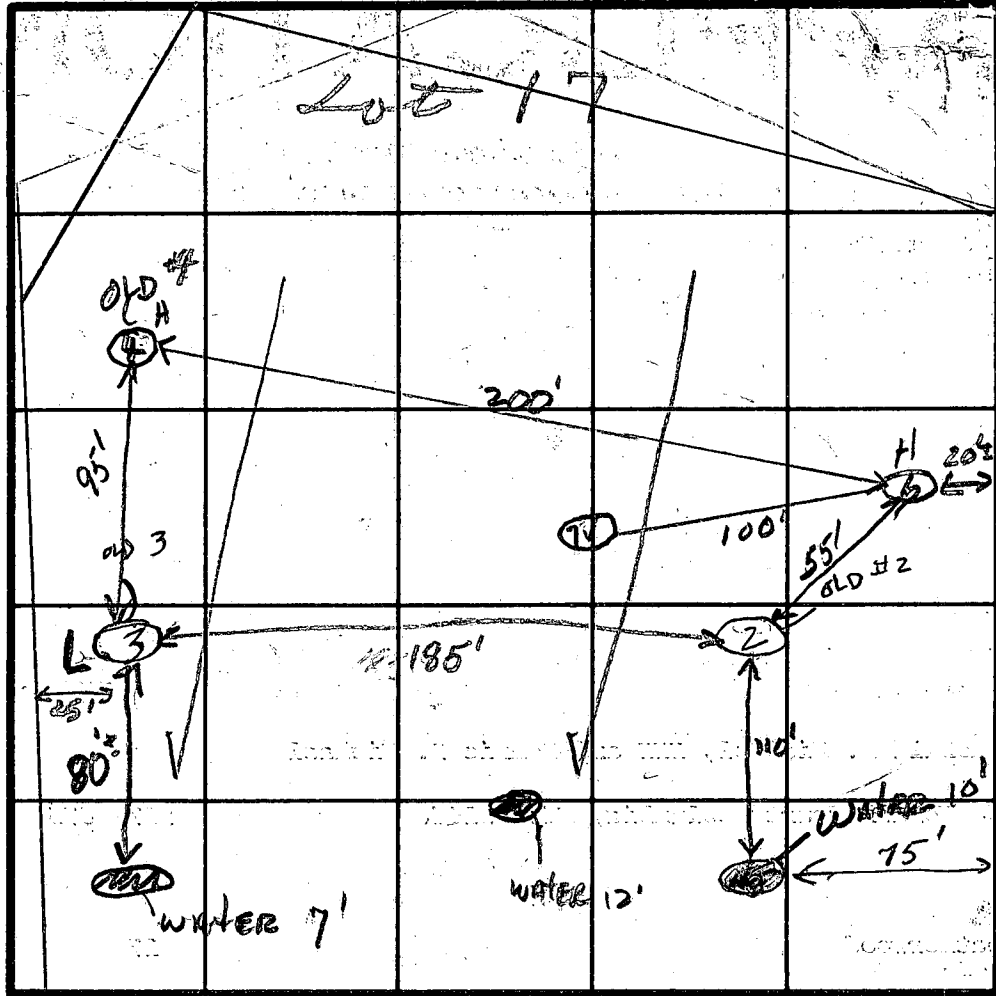
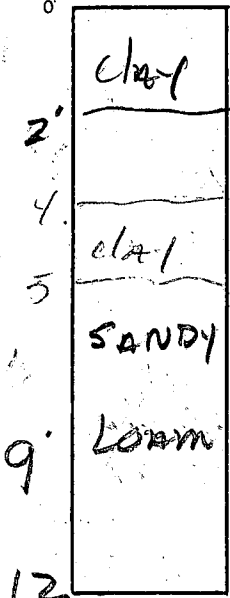
REASONS FOR REJECTION OR HOLDING *Hold for Cost. Fee Notes + Supervisor*

13 + SK 7-9-80/

THIS IS NOT A PERMIT

Lot 17

SOIL PROFILE



FIELD SHEET

Tests not PER stake

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

HEATHERWOOD WAY

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
7-9-80	6s	5'	12:22	12:25	12:25	12:33	8mid
	60	9'	12:21	12:24	12:24	12:28	4mid
	7V	12'	SEE	Above soil	Profile		

3' FT gravel
6' deep

*BAND
of clay
From
4'-5'
Soil above
looks OK
From 2'
Down

REMARKS Hold for Certified Hides JS+ SK 7-9-80

TYPE OF SOIL

TESTED BY JS+ SK 7-9-80

ALSO PRESENT Dick LIEBING & Ron MICHAELS

APPLICATION

4 bed room - 16' trench

A 27566

Pre

SEWAGE DISPOSAL TESTING

P _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT 1000 gal 3 BK
ENVIRONMENTAL HEALTH SERVICES 1250 gal 4 BK

DISTRICT 3rd

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

DATE January 1978

DRAIN FIELD = 220 SQ FT BOTTOM AREA PER
BEDROOM 3-6 FT DEEP WITH 3 FT OF STONE
2-3 FT WIDE KEEP DITCHES AT LEAST 10 FT
APART - NO DITCH OVER 100 FT LONG. USE A DISTRIBUTION
START THE DRAIN FIELD AT A POINT 190 FT FROM THE
BACK LOT LINE & 120 FT FROM THE LEFT SIDE OF THE
LOT AS SEEN WHEN FACING THE LOT FROM HEATHERWOOD
TO THE COUNTY HEALTH OFFICER WAY. RUN THE DITCHES ALONG THE
ELLICOTT CITY, MARYLAND CONTOUR OF THE LAND TOWARD THE

I HEREBY APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT ~~PERMANENT~~ A SEWAGE DISPOSAL SYSTEM LEFT & RIGHT SIDE OF THE LOT

PROPERTY OWNER Edward Kasemeyer, Et Al

ADDRESS c/o Clark Assoc. 9051 Balto. Nat. Pike PHONE 461-1456

PROPERTY LOCATION: NEW 17

SUBDIVISION Heatherwood (Formerly Wilson Property) LOT NO. 13

ROAD AND DESCRIPTION South side Old Frederick Rd.; 4,000'± West of Rte. #32

SIZE OF LOT 3.0± Acres TYPE BLDG. 3 or 4
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

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

SIGNATURE OF APPLICANT Edward J. Kasemeyer

APPROVED BY Raymond Hodge FOR Drainfield DATE 10/18/79
(KIND OF SYSTEM)

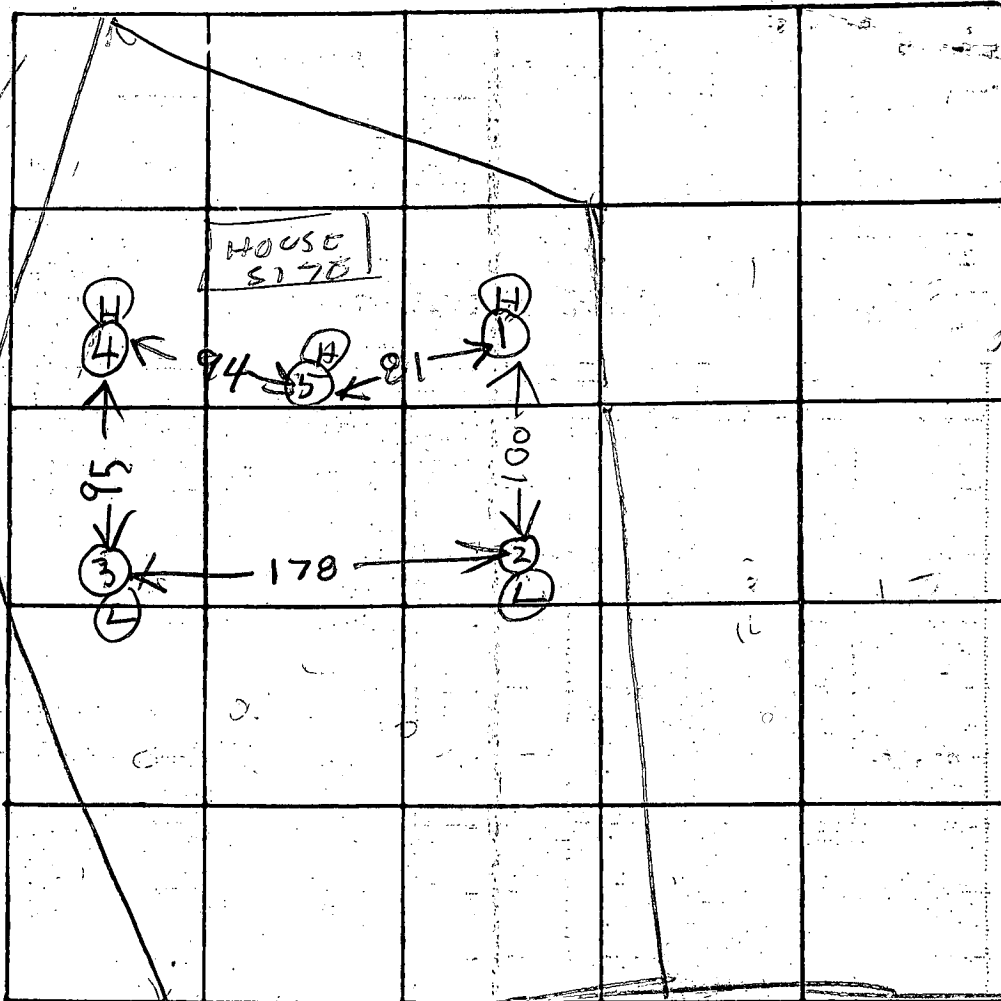
REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 3/23/78 PERC OK HOLD

FOR PLAT R14 10/18/79 Final Plat Signed

THIS IS NOT A PERMIT



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

17 GATHERWOOD WAY

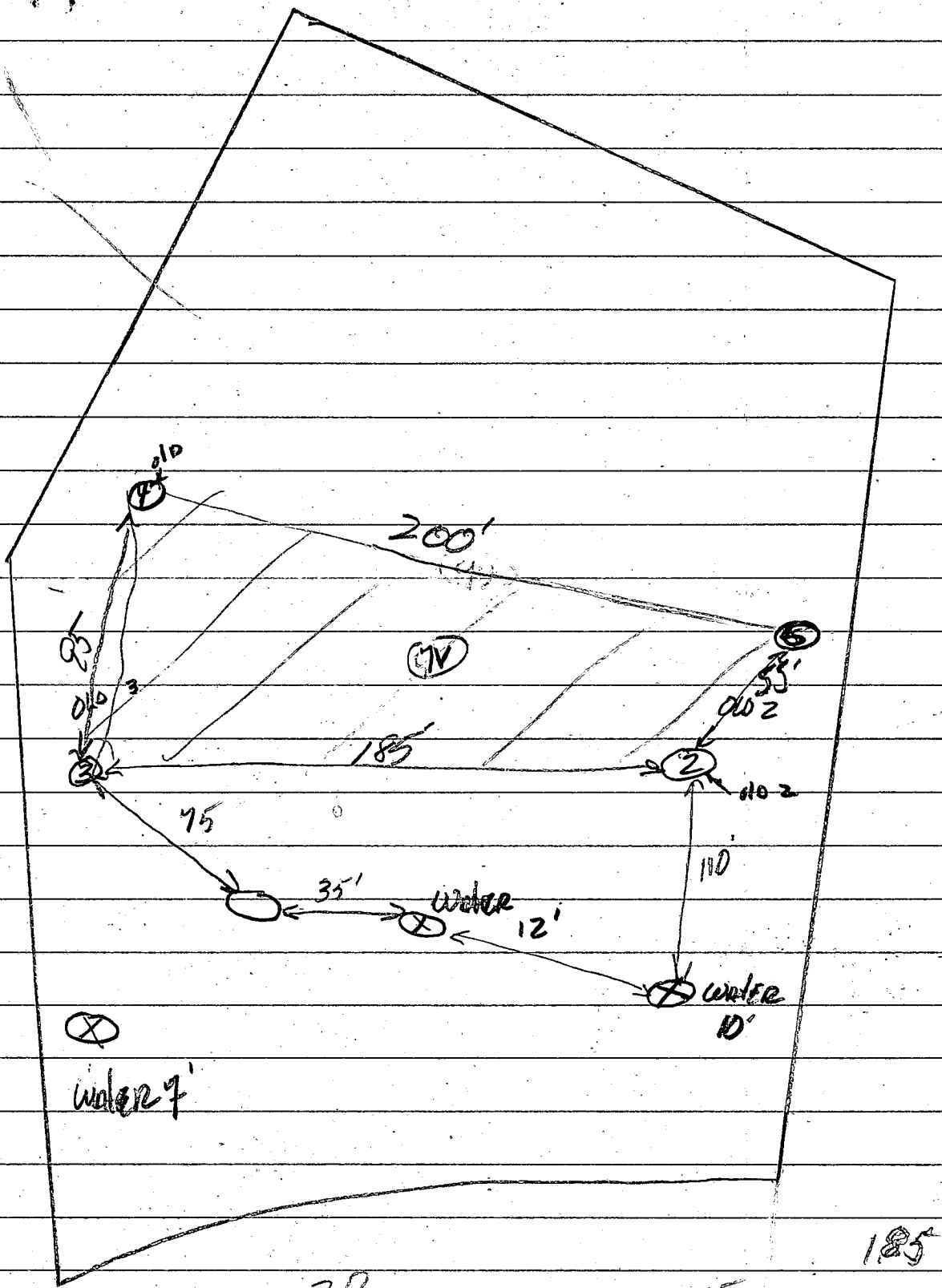
DATE	TEST NO.	DEPTH	PRE-WET		TEST 1" DROP		TIME
			START	STOP	START	STOP	
3/23/78	1S	4 1/2	1000	1005	1005	1015	10
	1D	8	1000	1004	1004	1010	6
	2D	8	1003	1008	1008	1011	3
	2S	4	1003	1004	1004	1011	7
	3D	8	1027	1035	1035	1048	13
	3S	4 1/2	1027	1039	1039	1045	6
	4D	8 1/2	1036	1037	1037	1040	3
	4S	4	1036	1038	1038	1040	2
3/23/78	5V	12	TOP 3 FT. CLAY				
			BOT 9 FT. SAND				

REMARKS _____

TYPE OF SOIL _____ 49
27

TESTED BY R. HODGES 21

ALSO PRESENT: R. MCCOGE
R. BARTH
Tommy



$$\begin{array}{r} 30 \\ + 8 \\ \hline 1040 \end{array}$$

$$\begin{array}{r} 185 \\ + 60 \\ \hline 1110 \end{array}$$

C 1 4615 SEQUENCE NO. (WRA USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL IS COMPLETED

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

COUNTY NUMBER A30748

Date Received (WRA use only) 7/31/80 DATE WELL COMPLETED

Depth of Well 80 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-73-36.57

OWNER LEALINE RICHARD last name first name STREET OR RFD 3290 PINE ORCHARD LANE TOWN FENCOTE CITY, MD. SUBDIVISION Heatherwood SECTION LOT 17

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), Check if water bearing. Includes entries for Top Soil, Shale, mica, SAND stone, mica, SAND stone.

GROUTING RECORD WELL HAS BEEN GROUTED (Y) NO (N) TYPE OF GROUTING MATERIAL CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 16 NO. OF POUNDS 1600

CASING RECORD casing types insert appropriate code below MAIN CASING TYPE (ST) Nominal diameter top(main)casing (nearest inch) 6 Total depth of main casing (nearest foot) 56

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

SCREEN RECORD screen type or openhole insert appropriate code below (ST) (BR) (HO) STEEL BRASS BRONZE OPEN HOLE (PL) (OT) PLASTIC OTHER

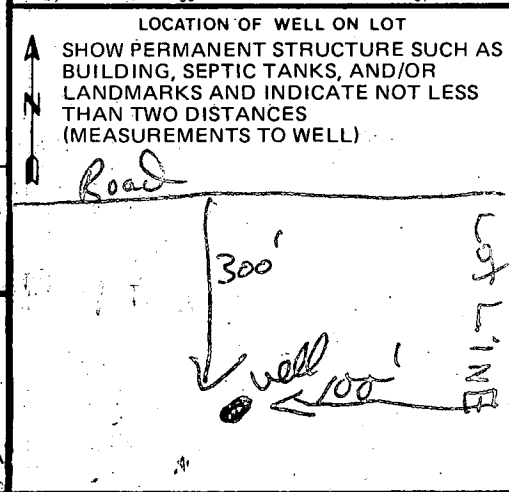
DEPTH (nearest ft.) (HO) 54 80 E A C H S C R E E N SLOT SIZE 2 3 DIAMETER OF SCREEN (NEAREST INCH) from to

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL CIRCLE BOX (F)

WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q (74 75 76) TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST (C) 3 (seq no) PUMPING TEST 3 HOURS PUMPED (nearest hour) 8 PUMPING RATE (gal. per min. to nearest gal.) 60 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 25 WHEN PUMPING 80 TYPE OF PUMP USED (A) air (P) piston (T) turbine (C) centrifugal (R) rotary (O) other (describe below) (J) jet (S) submersible

PUMP INSTALLED YES (Y) NO (N) DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: (A, C, J, P, R, S, T, O)) CAPACITY: GALLONS PER MINUTE (to nearest gallon) PUMP HORSE POWER PUMP COLUMN LENGTH (nearest ft.) CASING HEIGHT (circle appropriate box and enter casing height) (+) above LAND SURFACE (-) below 2 (nearest foot)

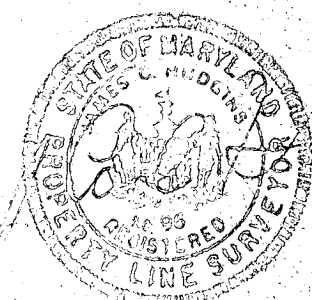
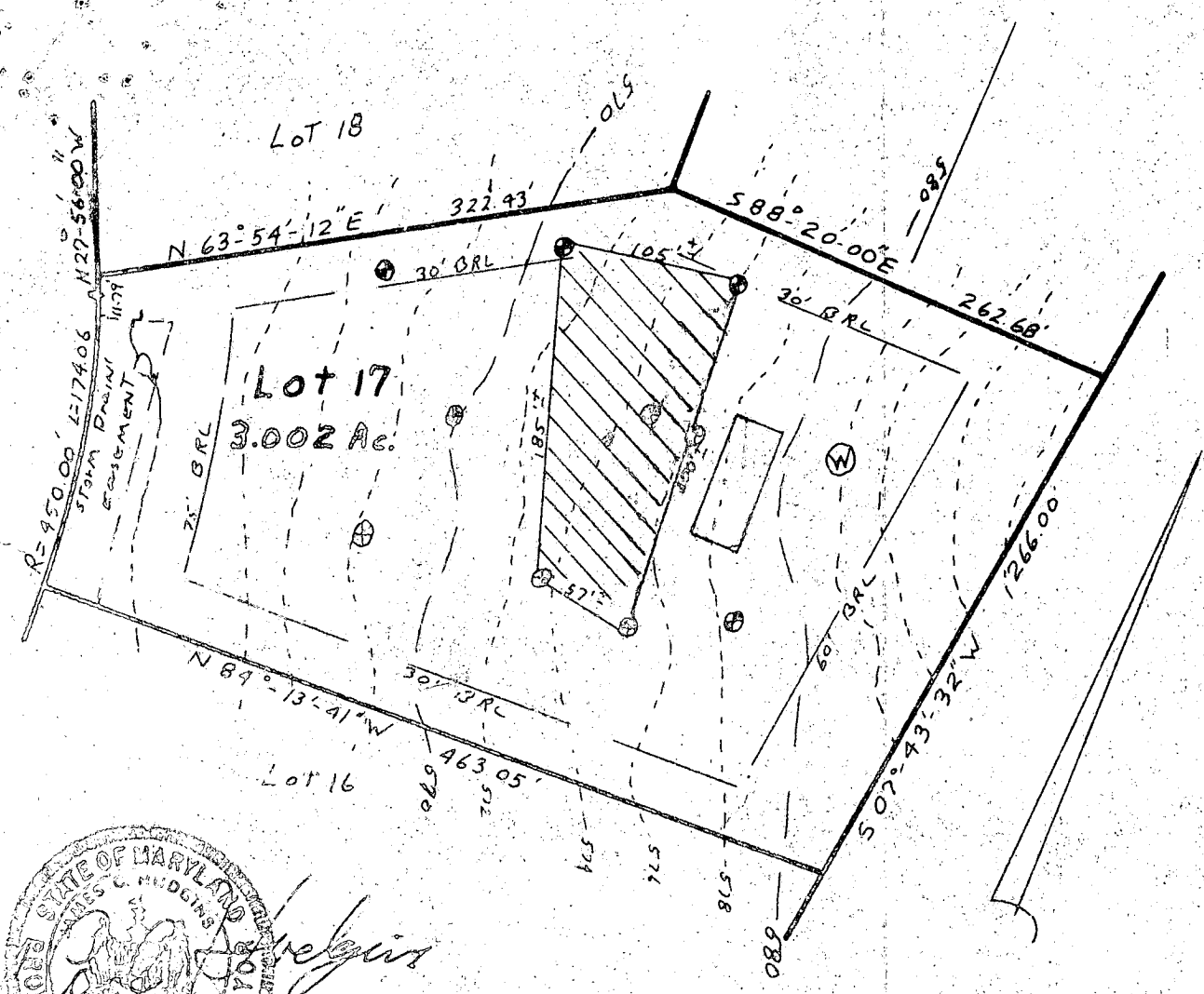


CIRCLE APPROPRIATE BOX (A) A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED (E) ELECTRIC LOG OBTAINED (P) TEST WELL CONVERTED TO PRODUCTION WELL

I HEREBY CERTIFY THAT 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 IDENT. NO. 040 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) SITE SUPERVISOR (sign of driller or journeyman responsible for sitework if different from permittee)

HEATHERWOOD



J. Carl Hudgins

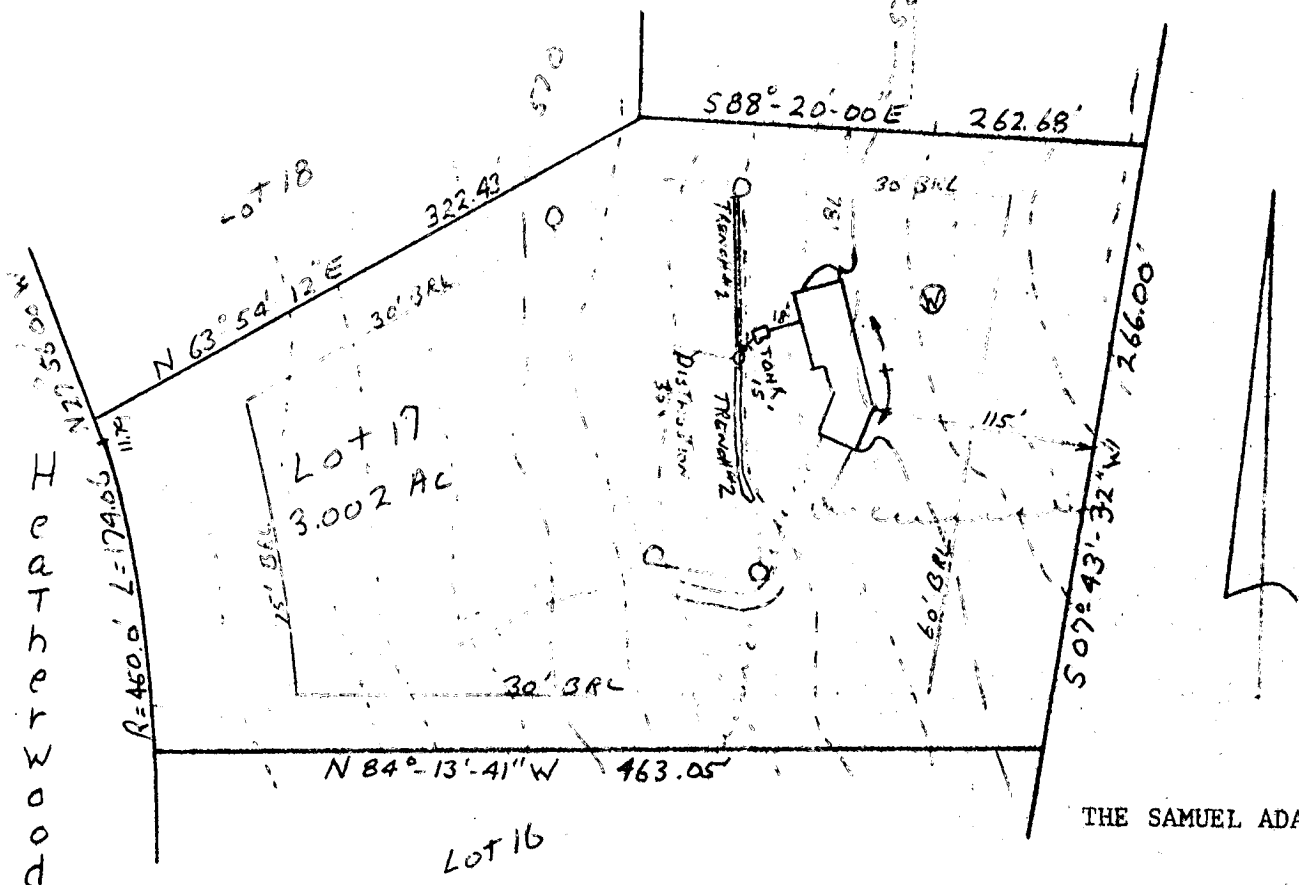
PERMISSION TEST PITS
 HEATHERWOOD
 SECTION 14
 DISTRICT
 HOWARD COUNTY, MARYLAND
 Scale 1/4" = 100' Date 7-24-80

J. Carl Hudgins
 NIT Associates
 321-0307

[Hatched Area] This area indicates a private easement of approximately 10,000 square feet as required by the Maryland State Department of Health and Mental Hygiene for individual disposal. Improvements of any kind in this area are restricted until public sewage is available and so long as any residential structures constructed on this site. This easement shall become null and void upon connection to a public sewage system.

Percolation test holes shown hereon have been field located and shown as " " .
 The lots shown hereon comply with the minimum ownership width and lot areas as required by the Maryland State Department of Health and Mental Hygiene.
 Percolation areas and water wells for adjoining lots have been shown where pertinent.

Approved: *J. Carl Hudgins* 8-1-80
 Date



W
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THE SAMUEL ADAMS

HOUSE:
 FIRST FLOOR ELEV. 580.8
 BASEMENT 571.8
 INVERT @ HOUSE 573.48
 SEPTIC TANK:
 EXISTING GRADE 577.0
 PROPOSED GRADE 577.0
 INVERT OF TANK 573.11
 DISTRIBUTION BOX:
 EXISTING GRADE 575.8
 PROPOSED GRADE 575.8
 INVERT 572.80
 TRENCHES:

	<u>INVERT</u>	<u>GRADE</u>	<u>LENTH</u>
#1	572.8	0.0%	80'
#2	572.8	0.0%	80'

5/27/81
 Sketch O.R. of
 3' wide trenches
 F.S.

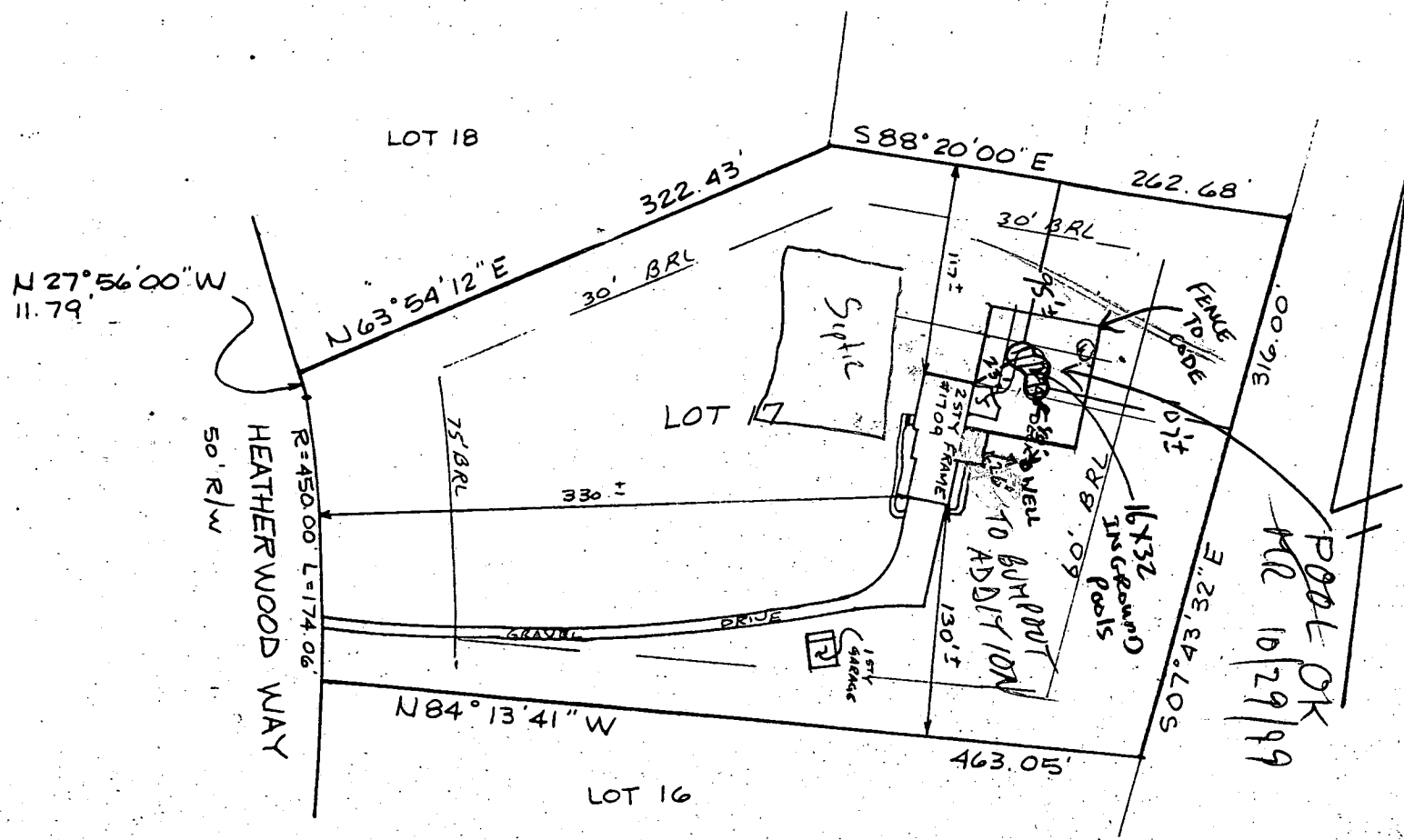
GRADING STUDY LOT 17
 HEATHERWOOD
 Section 1 Area 1

3RD. ELECTION DISTRICT
 HOWARD COUNTY MARYLAND

Scale 1"=100' date 8/6/80
 Revised 8-11-80

I certify the above measurements & elevations are actual and true for this property.

J. Carl Hudgins
 J. Carl Hudgins



POOL OK
 RIK 10/29/99

LOCATION SURVEY

1709 HEATHERWOOD WAY
 3RD ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND

THIS PLAT SHOWS ONLY THAT THE IMPROVEMENTS ARE CONTAINED WITHIN THE OUTLINES OF THE LOT AND IS NOT TO BE USED TO ESTABLISH PROPERTY LINES.

NTT ASSOCIATES INC. 16205 OLD FREDERICK ROAD
 MT. AIRY, MARYLAND PHONE 646-5521 or 442-2031

SCALE 1" = 100'
 DATE 10/16/85

FIELD BY RIK
 DRAWN BY RIK

DRAWING NUMBER
 HW-2



This is to certify that I have surveyed the property known as lot #17 HEATHERWOOD SECTION 1 AREA 1 A RESUBDIVISION OF LOT 5 sheet 1 of 2 recorded as PLAT # A900 among the land records of HOWARD County, Maryland for the purpose of locating the improvements thereon.

James Carl Hudgins
 James Carl Hudgins PLS #96

Building Address 1709 Heatherwood Way
Sylkesville, MD 21782

Suite/Apt. #: _____ SDP/N/P/Petition #: _____

Census Tract _____ Subdivision Heatherwood

Section _____ Area _____ Lot 17

Tax Map _____ Parcel _____ Grid _____

Zoning _____ Map Coordinates S 1112 Lot size _____

Property Owner's Name Ron Michaels

Address 1709 Heatherwood Way

City Sylkesville State MD Zip Code 21782

Home Phone (410) 442-1100 Work Phone 559-0288

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

Phone _____ Fax _____

Existing Use VA(21) SD

Proposed Use INGROUND Swimming Pool

Estimated Construction Cost \$ 30,000

Description of Work EXCAVATE AND INSTALL A
Concrete Wall INGROUND 16x32 Pool

Contractor Company Browning Pool & Spa

Contact Person Chuck Browning Esq

Address 23731 Ridge Road

City Ceremonium State MD Zip Code 20876

License No. 1377

Phone 301 972-3800 Fax 301 541-9146

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 - COMMERCIAL		BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics	Utilities	Building Characteristics	Utilities
Height: _____	Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private	SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> <u>Depth</u> <u>Width</u>	Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private
No. of stories: _____	Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private	1st floor: _____	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"/>	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: <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular	Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <input type="checkbox"/> Propane Gas <input type="checkbox"/>	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"/>
	Sprinkler system: N/A <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression # of Heads _____	Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Sprinkler system: N/A <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.

Applicant's Signature Chuck Browning Esq Print Name Chuck Browning Esq

Title/Company _____ Date 10/28/99

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

<input checked="" type="checkbox"/> AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID# <u>11725</u>
<input checked="" type="checkbox"/> Land Development, DPZ			Front: _____	Filing fee \$ _____
<input checked="" type="checkbox"/> State Highways			Rear: _____	Permit fee \$ _____
<input checked="" type="checkbox"/> Building Official			Side: _____	Excise tax \$ _____
<input checked="" type="checkbox"/> Dev. Engineering, DPZ	<u>10/29/99</u>	<u>Mark E. P. [Signature]</u>	Side St: _____	Sub-total paid \$ _____
<input checked="" type="checkbox"/> Health			All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	Add'l permit fee \$ _____
<input checked="" type="checkbox"/> Fire Protection			Is Entrance Permit required? YES <input type="checkbox"/> NO <input 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 type="checkbox"/>	Balance due \$ _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Lot Coverage for NewTown Zone _____	Check # <u>11725</u>
ONE STOP SHOP: <input type="checkbox"/>			SDP/Red-line approval date _____	Validation # _____
			Accepted by _____	