

3/30/77

PERMIT

SEWAGE DISPOSAL SYSTEM

P 25488
25488
A 22399

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

04-329333

ELLICOTT CITY

DISTRICT 4th

INDEXED

DATE 3/24/77

Jim Brittingham

IS PERMITTED TO INSTALL ALTER

ADDRESS 3004 N. Rogers Avenue, Ellicott City, Md. 21043 PHONE 461-1870

A SEWAGE DISPOSAL SYSTEM LOCATED AT

SUBDIVISION ROAD ¹⁴⁹³⁴~~22399~~ Bushy Park Road LOT 6

PROPERTY OWNER Floyd Grayson

ADDRESS Suite 247, 2000 Century Plaza, Columbia, Md. 21044

SPECIFICATIONS 3 bedrooms

DRAIN FIELD DEPTH FEET, BOTTOM AREA SQ. FT.

SEEPAGE PITS ABSORBENT SIDE-WALL AREA SQ. FT.

SEPTIC TANK CAPACITY 1000 GALLONS

BP
30582

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

OTHER DRY WELL - To have 170 sq. ft. effective absorbent sidewall area per bedroom, below first 6 ft. of original soil. Inlet can come in at 4 ft. and maximum depth permitted for dry well is 12 ft. below original grade. Locate dry well 25 to 30 ft. off right property line and 120 ft. from front property line as seen when facing lot from road (perc hole 5 & 6 area). Okay to change location because septic system of adjoining lot is 10 ft. away from this system.

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.

PLANS APPROVED BY Charles B. Streaker DATE 10/28/76

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

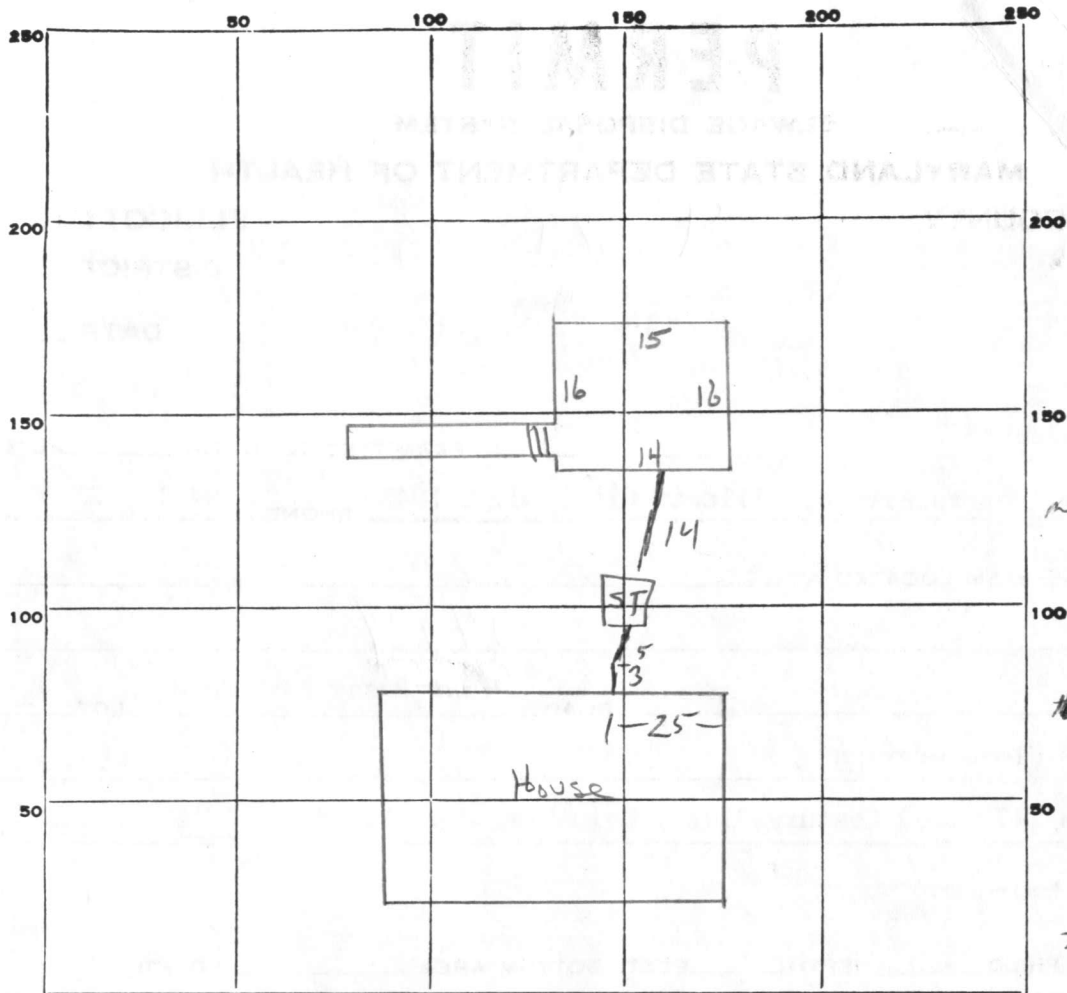
NEITHER THE HOWARD COUNTY COMMISSIONERS NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

BUILDING PERMIT SIGNED

AND RETURNED 7-2302

00137381-2 STORY ADDITION
w/ 2 Bedrooms + BATH

25-488
22099



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

Bushy Pk

170
3

need 510#

61
6

D.W. 366#

trench 36
6

216#
D.W. 366

Total 572

PERMIT CARD yes

SEPTIC TANK, LEVEL 1000 gal ok

CLEANOUTS

ST	DW
NO	NO

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH 12 FT. TRENCH WIDTH 2 FT.

GRAVEL DEPTH 6 IN. TOTAL LENGTH 36 FT.

NUMBER OF TRENCHES 1 TOTAL ^{sidewall} BOTTOM AREA 216

SEEPAGE PITS, INSIDE DIAMETER 61 FT. DEPTH BELOW INLET 6 FT.

ABSORBENT AREA 572 SQ. FT.

REMARKS 3-30-77- HD - ok to Add stone to trench
call for final when ready

BUILDING PERMIT SIGNED
AND RETURNED

DATE SYSTEM APPROVED 5 Apr 77

INSPECTOR

Robert F. Mansfield

RECORDED

APPLICATION

A 22399

SEWAGE DISPOSAL TESTING

P _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DISTRICT 4th

DATE 10/27/75

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 Richard Talley property

ADDRESS RFD #2, Daisy Rd. & Rte. 144, Woodbine, Md. PHONE 442-2300

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 6

ROAD AND DESCRIPTION Bushy Park Road

SIZE OF LOT 1.114 acres TYPE BLDG. 3 or 4 bedrooms
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 /s/ Steve Costello

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

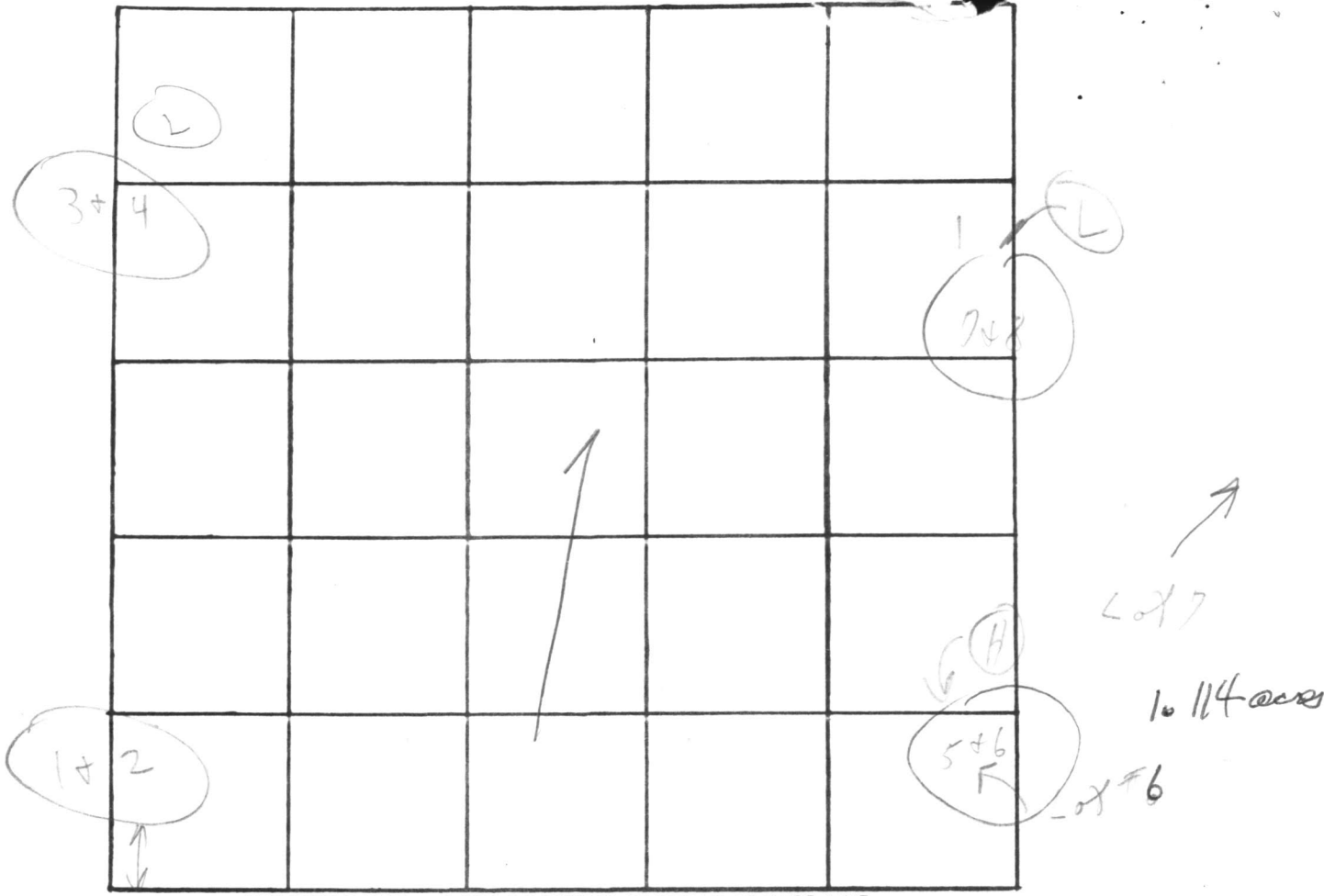
REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

22399



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
10/1/75	1				4' good	soil starts	
	2	Use a visual			10-11'	similar to others	
	3	6' s	3:50	3:55	3:55	4:03	8ms
	4	12' 0	4:13	4:22	4:22	4:38	16ms
	5	6' Use	10' off				
	6						
Dec	7						20
lot # 7	8						8

10/29/75

24
23
4 | 47 | 12m
14

REMARKS _____

TYPE OF SOIL _____

TESTED BY CBS (5+6) ALSO PRESENT: _____

7 + 8

C 1 7387 SEQUENCE NO. (WRA USE ONLY)

1 2 3 (SEQ. NO.) 6
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3 ON ALL CARDS)

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 22399

DATE RECEIVED (WRA USE ONLY) 3/7/77

DATE WELL COMPLETED 15 20

DEPTH OF WELL 150 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" H-73-1823

DRILLERS IDENTIFICATION NO. 209

OWNER GRAYSON Floyd

STREET OR RFD 9581 Long Look Lane POST OFFICE Columbia, Md. 21043

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	
Mica Soil	0	30	
Mica Rock	30	150	X

WELL DESCRIPTION

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) YES (Y) NO (N)

TYPE OF GROUTING MATERIAL (CIRCLE BOX) CEMENT (CM) BENTONITE CLAY (BC)

NO. OF BAGS 12 NO. OF POUNDS 1140

GALLONS OF WATER 96

DEPTH OF GROUT SEAL (TO NEAREST FOOT) FROM 0 FT. TO 35 FT.

CASING RECORD

INSERT APPROPRIATE CODE BELOW

STEEL (ST) CONCRETE (CO) PLASTIC (PL) OTHER (OT)

MAIN CASING TYPE (S) (T) NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) 6 TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) 35

OTHER CASING (IF USED)

DIAMETER (INCH) DEPTH (FEET) FROM TO

SCREEN RECORD

INSERT APPROPRIATE CODE BELOW

STEEL (ST) BRASS OR BRONZE (BR) OPEN HOLE (HO) PLASTIC (PL) OTHER (OT)

DEPTH (NEAREST WHOLE FOOT)

FROM 35 TO 150

EACH SCREEN

1 H O 8 9 11 15 17 21

2 23 24 26 30 32 36

3 38 39 41 45 47 51

SLOT SIZE 1, 2, 3

DIAMETER OF SCREEN 56 60 (NEAREST INCH) FROM TO

GRAVEL PACK

IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX 68 (F)

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

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

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) 6

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 10

METHOD USED TO MEASURE PUMPING RATE TIME

WATER LEVEL: (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING 35 (NEAREST FOOT)

WHEN PUMPING 75 (NEAREST FOOT)

TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST)

AIR (A) PISTON (P) TURBINE (T) CENTRIFUGAL (C) ROTARY (R) OTHER (DESCRIBE BELOW) (O) JET (J) SUBMERSIBLE (S)

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 (Y) NO (N)

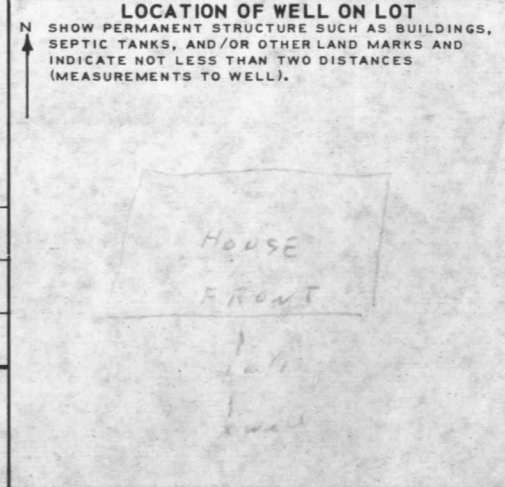
CAPACITY: GALLONS PER MINUTE (TO NEAREST GALLON) 31 35

PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH (NEAREST FOOT) 43 47

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)

ABOVE (+) BELOW (-) LAND SURFACE 2 (NEAREST FOOT)



CIRCLE APPROPRIATE BOXES

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 NAME Howard Dillon

SIGNATURE Howard Dillon

LOT 10

S71°37'28"E 130.00'

LOT 6

48,562 sq ft
1.1144 ac

7

ADDITION CONFLICTS
WITH EXISTING SYSTEM

REPAIR PERMIT
TAKEN OUT TO
REPLACE SYSTEM.

ADDITION IS SUNROOM
NO INCREASE IN
CAPACITY OF SYSTEM
REQUIRED.

11/29/91 CWL

373.28

220'

273.28

N05°58'13"E

S05°58'13"E

EXISTING SEPTIC

MOVING SEPTIC

60'

50'

23x16

44' x 44' Pold. v. Foundation

75' SETBACK LINE

WELL

has repaired
12/19/91
LBO

N71°37'28"W 130.00'

BUCKEY PARK ROAD

I HEREBY CERTIFY THAT I HAVE LOCATED
THE IMPROVEMENTS AS SHOWN.
WALTER PARK REG. L.S.#5539
HUDKINS ASSOCIATES
231 JOSEPH SQUARE
COLUMBIA, MD 21034

LOCATION SURVEY

Lot 6 Bushey Park
4th Election District Howard County, Md
Scale 1"=50' Feb. 18, 1977





HOWARD COUNTY HEALTH DEPARTMENT

Bureau of Environmental Health
3525-H Ellicott Mills Drive, Ellicott City, Maryland 21043-4544
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-877-4MD-DHMH

Penny E. Borenstein, M.D., M.P.H., Acting County Health Officer

July 12, 2002

*FAX COPY
OF PRINTS
RE: Floor
Plan*

Eric Fries
14934 Bushy Park Road
Woodbine, MD 21797

RE: Building Permit Application B00137381
14934 Bushy Park Road
Proposed Addition w/ 2 Bedrooms

Dear Mr. Fries:

This office has received the above referenced building permit application, but cannot recommend approval at this time because of concerns about the capacity of the existing septic system to handle the potential increase in flow associated with this proposal.

The file for your property indicates that the septic system was installed in 1976. Since the anticipated life expectancy of a septic system is approximately twenty years, the system on your property would be expected to be at or near the end of its useful life. Therefore, the septic system may not be expected to accommodate the potential increase in sewage flow from the increase in house capacity (represented by the proposed construction of an additional bedroom).

A Health Department recommendation for approval is contingent upon issuance of a septic system repair permit (\$25 fee), and installation of additional septic system drain field capacity. The process is best completed through a professional septic contractor prior to building permit issuance.

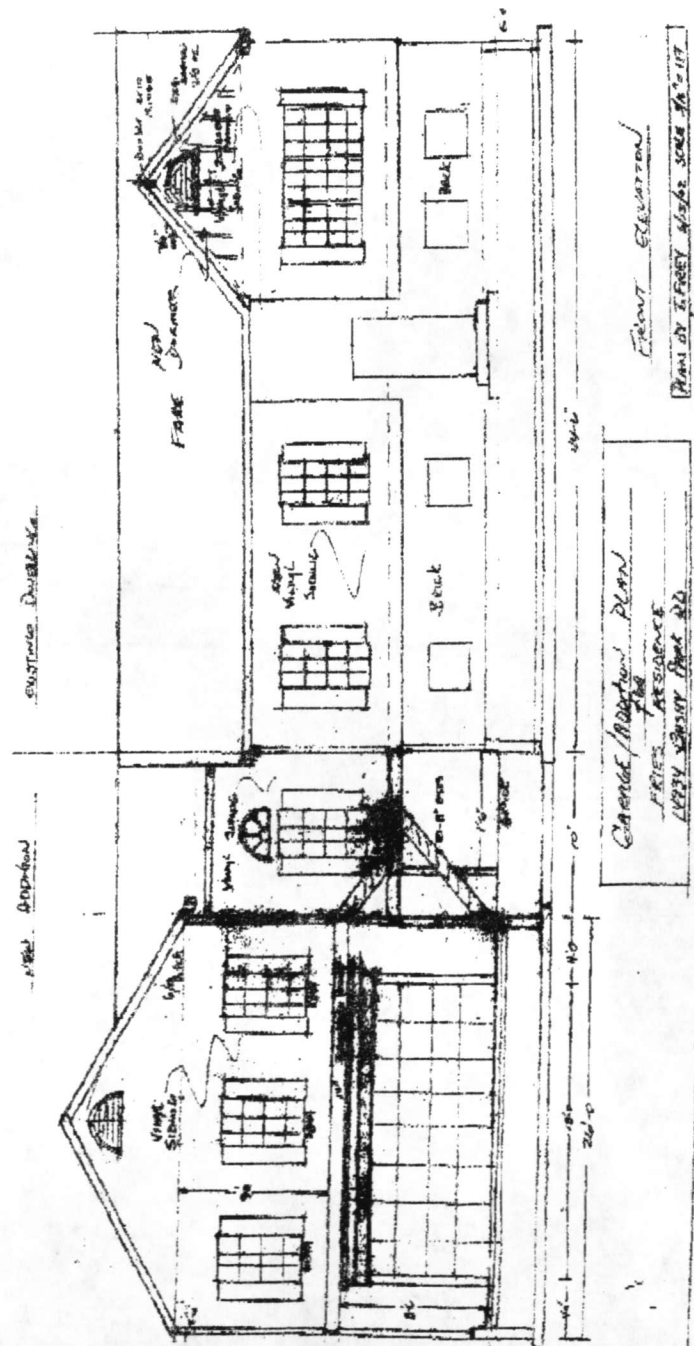
Please contact this office at (410) 313-2640 if you have any questions or to arrange permit issuance.

Very Truly Yours,

John A. Boris, Jr., R.S.
Well and Septic Program

JAB

cc: Department of Inspections, Licenses & Permits
File



- HEALTH DEPT.

Building Address <u>14934 Bushy Park Rd.</u> <u>Woodbine MD. 21797</u>	Property Owner's Name <u>Eric J. Fries</u> Address <u>14934 Bushy Park Rd</u>
Suite/Apt. #: _____ SDP/WP/Petition #: _____ Census Tract <u>100400</u> Subdivision _____ Section <u>L</u> Area _____ Lot _____ Map <u>8</u> Parcel <u>2910</u> Grid <u>21</u>	City <u>Woodbine</u> State <u>MD</u> Zip Code <u>21797</u> Home Phone <u>410-4890845</u> Work Phone <u>410 984-4634</u> Applicant's Name & Mailing Address, (if other than stated hereon): _____
Zoning <u>REDA</u> Map Coordinates <u>4A13</u> Lot size <u>1.11 AC.</u>	Phone <u>410-984-4634</u> Fax <u>410.4890845</u> <div style="border: 1px solid black; border-radius: 50%; padding: 10px; display: inline-block; margin: 5px;"> call call # </div>

Existing Use <u>Single Family Home</u> Proposed Use <u>Addition for same</u> Estimated Construction Cost \$ <u>25,000</u> Description of Work <u>Add 2 story Addition</u> <u>w/ garage below</u> <u>+ 2 Bedrooms + 1 Bath.</u>	Contractor Company Eric J. Fries <u>OWNER</u> Contact Person <u>Eric J. Fries</u> Address <u>14934 Bushy Park Rd.</u> City <u>Woodbine</u> State <u>MD</u> Zip Code <u>21797</u> License No. <u>EEC 3841</u> Phone <u>410 984 4634</u> Fax <u>410-489-0845</u>
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Occupant or Tenant <u>Eric J. Fries</u> Contact Name <u>Eric J. Fries</u> Address <u>14934 Bushy Park Rd.</u> City <u>Woodbine</u> State <u>MD.</u> Zip Code <u>21797</u> Phone <u>410-984-4634</u> Fax <u>410 489-0845</u>	Engineer or Architect Company <u>Design Contractor</u> Contact Person <u>Tom Frex</u> Address <u>760 Middle trail Ct.</u> City <u>Mt Airy</u> State <u>MD</u> Zip Code <u>21771</u> Phone <u>410 489-7724</u> Fax _____
---	---

BUILDING DESCRIPTION - COMMERCIAL		BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics Height: _____ No. of stories: <u>2</u> Gross area, sq. ft. per floor: _____ Use group: _____ Construction type: <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input checked="" type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular	Utilities 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 checked="" 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"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads _____	Building Characteristics SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth Width 1st floor: <u>40</u> <u>34</u> 2nd floor: <u>40</u> <u>26</u> Basement: <u>N/A</u> <input type="checkbox"/> Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input checked="" type="checkbox"/> Slab on Grade No. of Bedrooms <u>2</u> 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	Utilities 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 checked="" 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"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other: _____

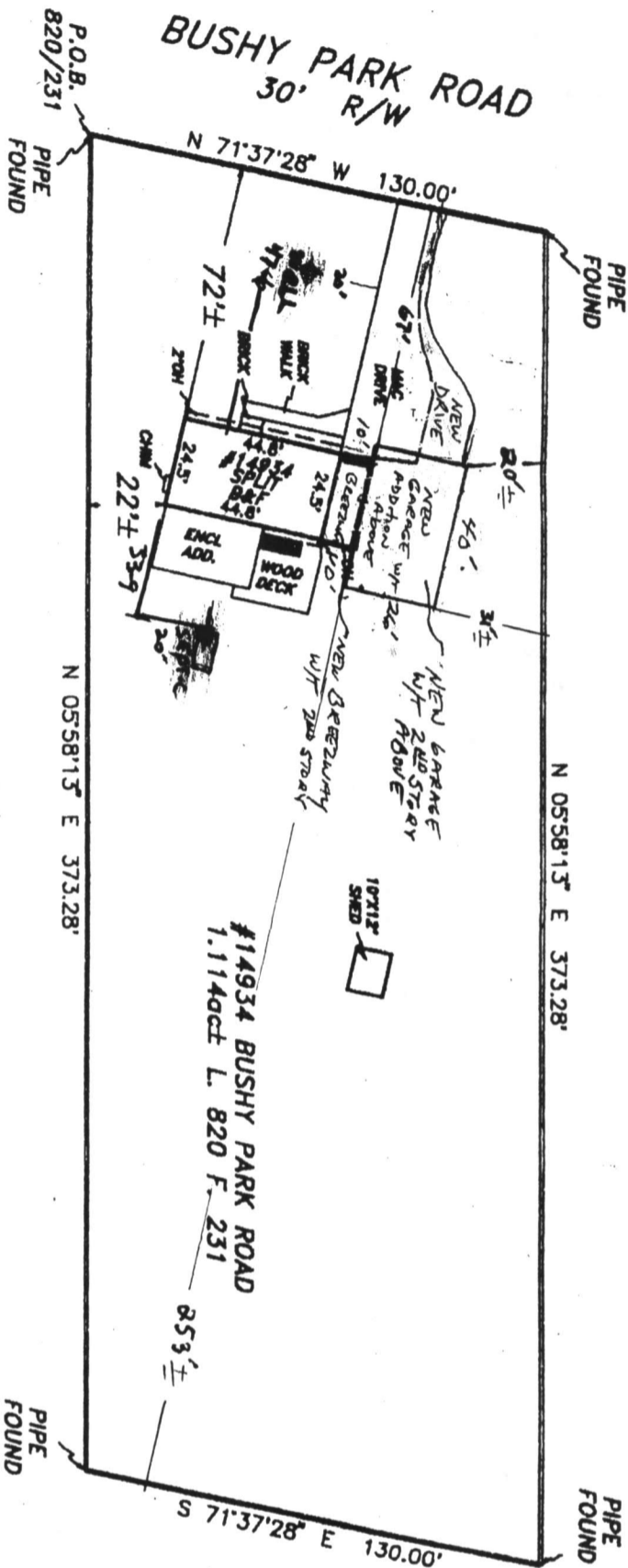
THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION, (2) THAT THE INFORMATION IS CORRECT, (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO, (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED 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.

<u>Eric J. Fries</u> Applicant's Signature <u>Owner / Columbia Electric</u> Title/Company	<u>Eric J. Fries</u> Print Name <u>7/10/02.</u> Date
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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><input checked="" type="checkbox"/> Land Development, DPZ</td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> State Highways</td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> Building Official</td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> Dev. Engineering, DPZ</td> <td></td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> Health</td> <td><u>7/23/02</u></td> <td><u>J. Kelly</u></td> </tr> <tr> <td><input type="checkbox"/> 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	<input checked="" type="checkbox"/> Land Development, DPZ			<input type="checkbox"/> State Highways			<input type="checkbox"/> Building Official			<input type="checkbox"/> Dev. Engineering, DPZ			<input checked="" type="checkbox"/> Health	<u>7/23/02</u>	<u>J. Kelly</u>	<input type="checkbox"/> Fire Protection			<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: left;">DPZ SETBACK INFORMATION</th> <th style="text-align: left;">PROPERTY ID#: <u>54737</u></th> </tr> </thead> <tbody> <tr> <td>Front: _____</td> <td></td> <td>Filing fee \$ <u>25</u></td> </tr> <tr> <td>Rear: _____</td> <td></td> <td>Permit fee \$ _____</td> </tr> <tr> <td>Side: _____</td> <td></td> <td>Excise tax \$ _____</td> </tr> <tr> <td>Side St.: _____</td> <td></td> <td>Add'l per. fee \$ _____</td> </tr> <tr> <td>All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/></td> <td></td> <td>TOTAL FEES \$ _____</td> </tr> <tr> <td>Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/></td> <td></td> <td>Sub-total paid \$ _____</td> </tr> <tr> <td>Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/></td> <td></td> <td>Balance due \$ _____</td> </tr> <tr> <td>Lot Coverage for NewTown Zone _____</td> <td></td> <td>Check # <u>3479</u></td> </tr> <tr> <td>SDP/Red-line approval date _____</td> <td></td> <td>Validation # <u>53828</u></td> </tr> </tbody> </table> <p style="text-align: right;">Accepted by <u>[Signature]</u></p>	DPZ SETBACK INFORMATION		PROPERTY ID#: <u>54737</u>	Front: _____		Filing fee \$ <u>25</u>	Rear: _____		Permit fee \$ _____	Side: _____		Excise tax \$ _____	Side St.: _____		Add'l per. fee \$ _____	All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>		TOTAL FEES \$ _____	Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>		Sub-total paid \$ _____	Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>		Balance due \$ _____	Lot Coverage for NewTown Zone _____		Check # <u>3479</u>	SDP/Red-line approval date _____		Validation # <u>53828</u>
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- NOTES:
- 1) B.L. Information, if shown, was obtained from existing record plat or local agencies and is not guaranteed by NTL, Inc.
 - 2) Existing fire and/or flood zone information is subject to the interpretation of the originator.
 - 3) NTL, Inc. does not certify to easements or other encumbrances or overlaps.
 - 4) Property lines are NOT shown or guaranteed by this location.
 - 5) Surveyed distance accuracy: 1:2



Subject property is shown in Zone C on the FIRM Map of HOWARD COUNTY, Maryland on Community Panel 240044 0008 B. Effective DECEMBER 4, 1986

This is to certify that I have surveyed the property shown hereon, being known as 14934 BUSHY PARK ROAD and recorded among the land records of HOWARD County, Maryland in LIBER 820 , folio 231 for the purpose of locating the improvements thereon.

- This plat is of benefit to the consumer only insofar as it is required by a lender or a title insurance company or its agent in connection with contemplated transfer, financing or refinancing purposes.
- This plat is not to be relied upon for the establishment of location of fences, garages, buildings, or other existing or future structures.
- This plat does not provide for the accurate identification of property boundary lines, but such identification may not be required for the transfer of title or for securing financing or refinancing.



J. Carl Hudgins PLS #96

LOCATION DRAWING
14934 BUSHY PARK ROAD
HOWARD COUNTY, MD.

NTT Associates, Inc.
16205 Old Frederick Road
Mt. Airy, Maryland 21771
Ph. (410)442-2031
Fax No. (410)442-1315

Scale: 1" = 50'
Date: 1/16/02
Field By: DBM
Drawn By: DBM
Drawing # MISC.5398

Existing System OK. To remove a balcony & add 1 over proposed garage additionally Based on 91 repair