

approved 11/17/82
Stayer

11/16/82
J. Stayer
A.M. + P.M.

P 32300
28952
A 28953

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
992-2330

03-302024
INDEX

ELLICOTT CITY
DISTRICT 3rd

DATE 11/10/82

Branham Contractor Incorporated IS PERMITTED TO INSTALL ALTER

ADDRESS 8133 Hogneck Rd., Pasadena, Md. PHONE (301) 255-8234

SUBDIVISION Triadelphia Farms II ROAD 13294 Hunt Ridge 13304 Triadelphia Rd. LOT 4-B

PROPERTY OWNER John F. Reed

ADDRESS 2610 Carberwell Court, Balto, Md. 21207

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES NO

BLDG. PERMIT SIGNED AND RETURNED

SEPTIC TANK CAPACITY 1000 GALLONS NUMBER OF BEDROOMS 3

Minimum total sq. ft. per bedroo. 130. Inlet 3-3 1/2 ft. below original grade.
Maximum depth 9 1/2 ft. below original grade. Effective area begins at 3 ft. below original grade.

NOTE: If trench is used to make up absorbent area, run the trench on level ground and leave a 5 ft. earth buffer between drywell and trench. No trench is to exceed 100 ft. in length. Trench inlet to be same as Dry Well, with 6-6 1/2 ft. of stone below distribution MAN pipe. Trench alone to be 620 sq. ft. approximately 100 foot trench.

LOCATION: Dry well to be 140 ft. from front lot line (179.58') and 20 ft. from right side line (554.56') as seen from the entrance off Triadelphia Rd.

11/10/82 O.K. to use a 15'x15' drywell 9 1/2' deep with inlet at 3' or one 80' long trench, 2' wide 9 1/2' deep with inlet at 3'. Call for inspt of trench before placing gravel in trench F.S.

PLANS APPROVED BY Frank Skinner/ Jim Stayer DATE 11/10/82

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 AND AFTER PLACING GRAVEL IN TRENCH.

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 40 PVC OR ABS.

PERMIT VOID AFTER THREE YEARS.

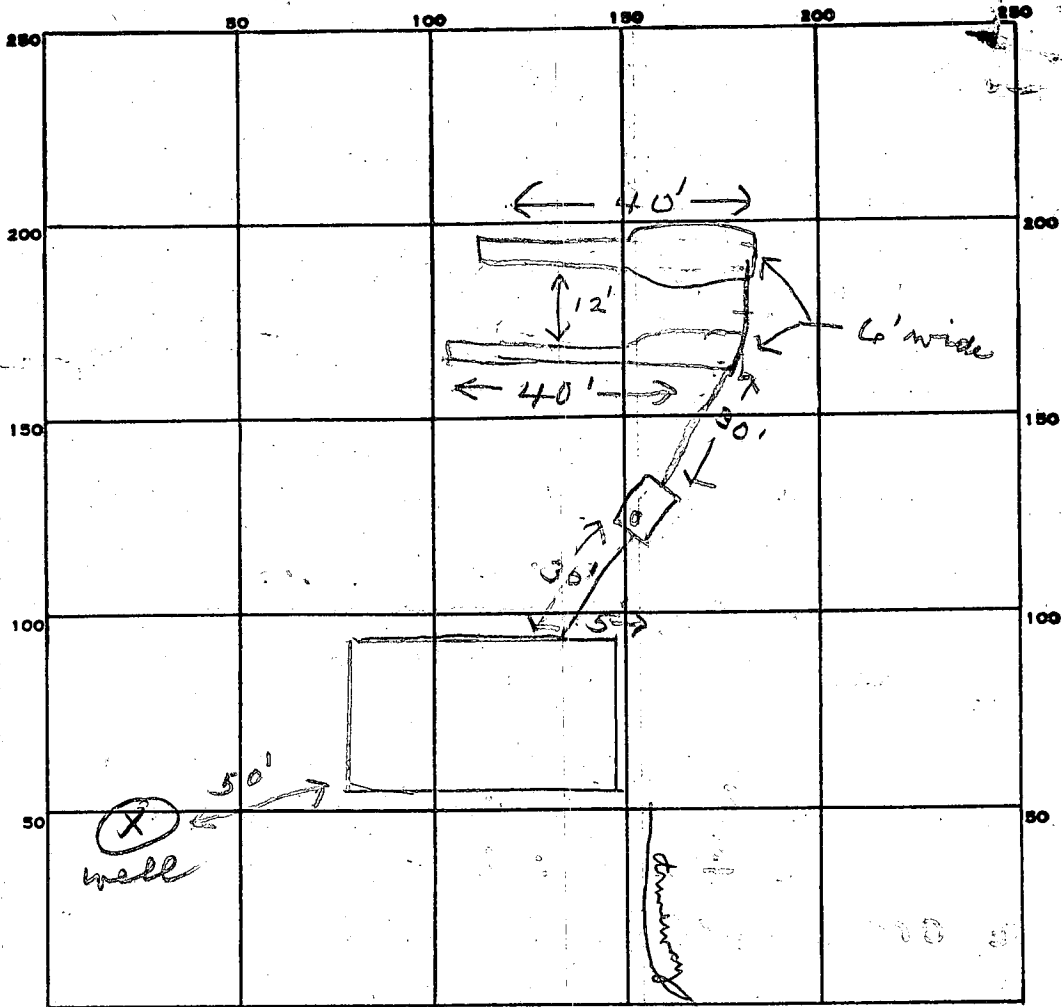
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

BLDG. PERMIT SIGNED AND RETURNED 11/13/82
Seal # 44936
J. Stayer

A
28952
28953

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.



PERMIT CARD

SEPTIC TANK, LEVEL 1000

CLEANOUTS ST

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH 9 1/2 FT. TRENCH WIDTH 2 - 6 FT.

GRAVEL DEPTH 6 1/2 IN. TOTAL LENGTH 80 FT.

6.5
80
520.0

NUMBER OF TRENCHES 2 TOTAL BOTTOM AREA 520+

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

ABSORBENT AREA 520 SQ. FT.

REMARKS 11/16/82 OK to start trenches 10ft farther down hill, to
get inlet at 3-3 1/2 ft. of 11/16/82 OK to cover all work
to #2 trenches. of
11/17/82 OK to cover all work. of

DATE SYSTEM APPROVED 11/17/82

INSPECTOR Stoney

APPLICATION

4B

A 28952

SEWAGE DISPOSAL TESTING

P _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE 3rd

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

DISTRICT 10/2/78

DATE _____

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 Dr. Richard Hemphill John F. Reed

ADDRESS c/o Boender Associates, Inc., Town & Country Prof. Bldg. 465-7777
298-0491

PROPERTY LOCATION: 2610 Camberwell Court
Balto. Md 21207
SUBDIVISION Triadelphia Farms, Section II LOT NO. 4-B

ROAD AND DESCRIPTION 13304 Triadelphia Road

SIZE OF LOT 1 acre TYPE BLDG. SFD 3 or 4
NUMBER OF BEDROOMS _____
IF NOT SINGLE RESIDENCE DESCRIBE NA

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

SIGNATURE OF APPLICANT 1st Jack Boender

APPROVED BY F. Skinn FOR dry well & trench DATE 11/10/82
(KIND OF SYSTEM)

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

HOLD PENDING FURTHER TESTS _____ DATE _____

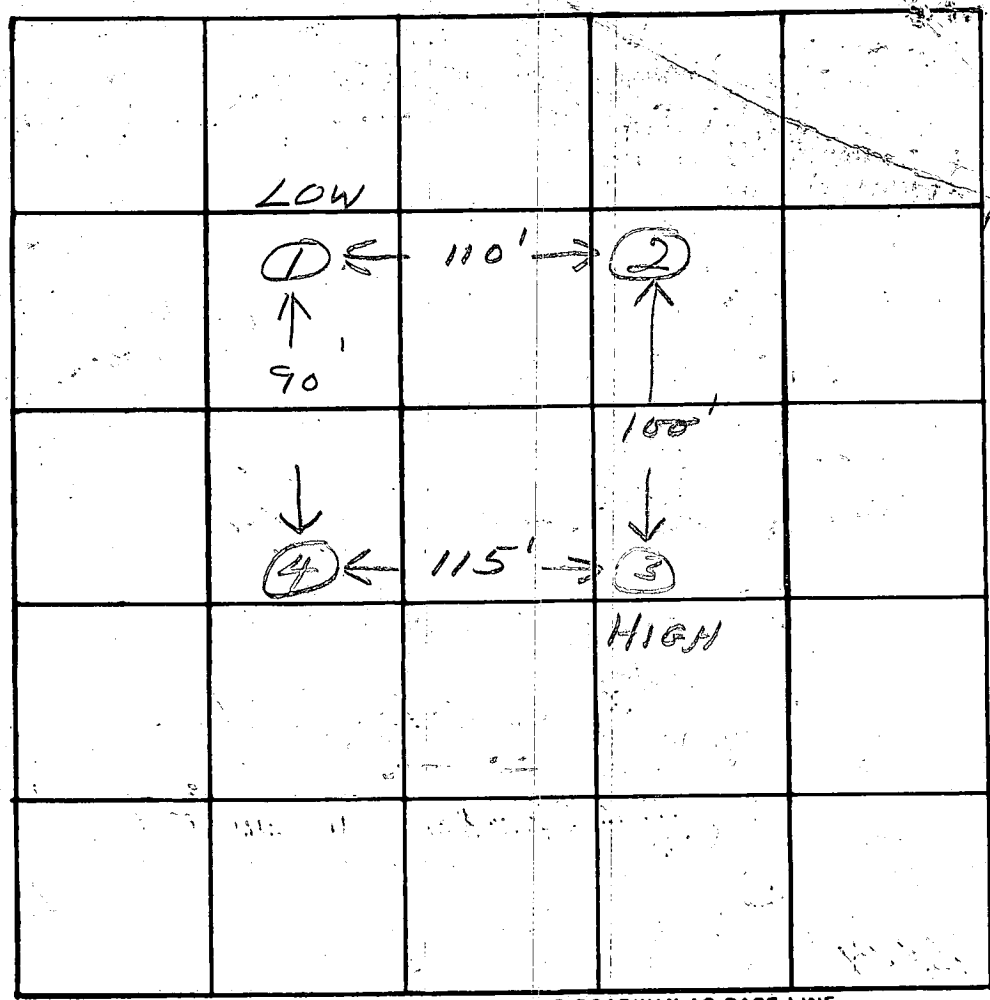
REASONS FOR REJECTION OR HOLDING _____

PERMIT SIGNED AND RETURNED 4/13/82
Serial # 49212

THIS IS NOT A PERMIT

4B LOT 4B

0-3 FT
CLAY, SAND
3'-12 FT
SAND, CLAY



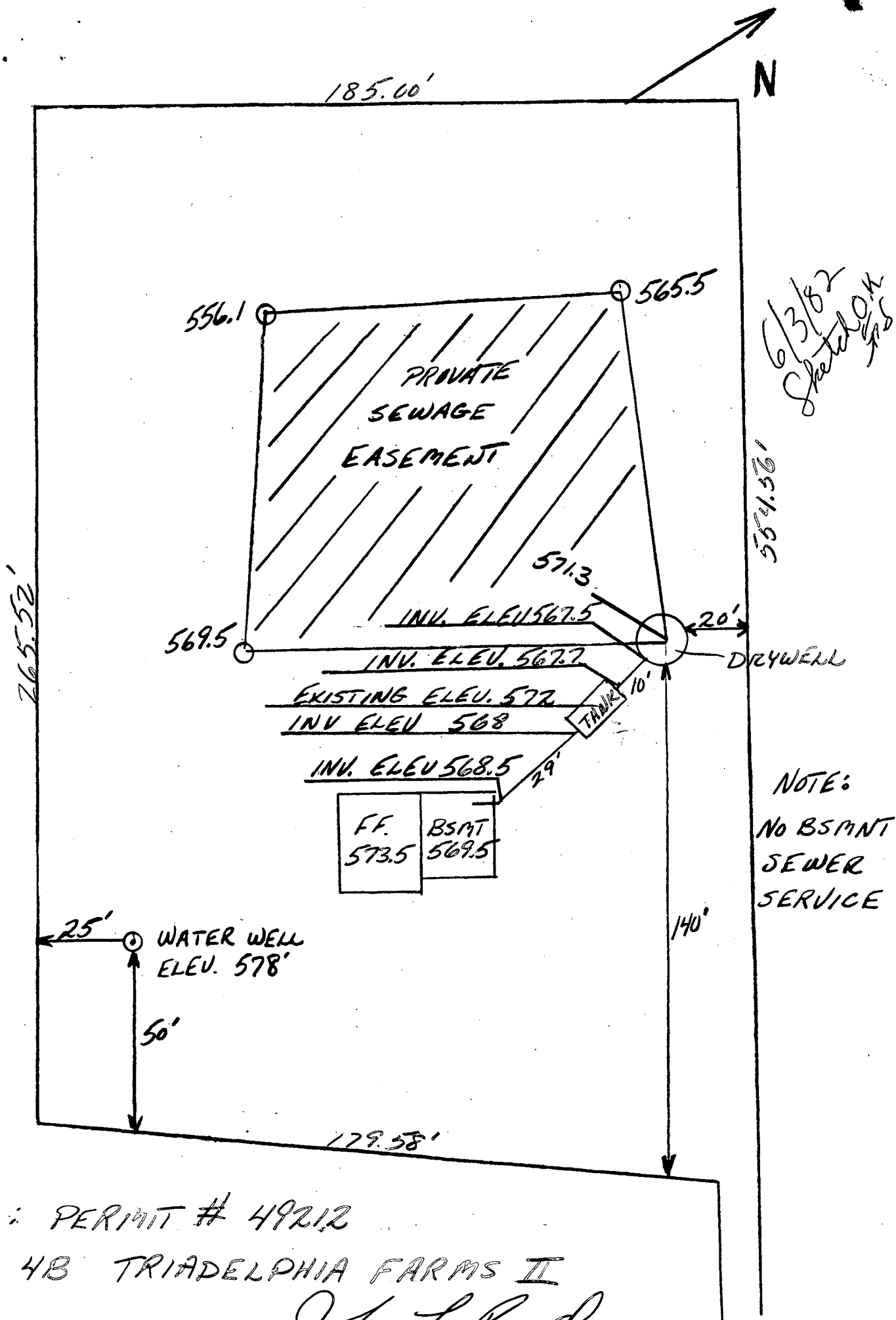
ELEV.
FROM
HI. ① TO LOW ③
10 FT

130 SQ. FT.
per B.R.
Inlet 3 1/2'
max depth 9 1/2'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.
TRIADELPHIA RD

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
10/3/78	1S	3	2:44	2:45	2:45	2:47	2	
	1D	12	2:45	2:47	2:47	2:49	2	
	2S	4	2:53	2:55	2:55	2:57	2	
	2D	12	2:53	2:55	2:55	2:59	4	
	3S	3	3:02	3:05	3:05	3:06	1	
	3D	12 1/2	3:05	3:11	3:11	3:16	5	
	4	11	VISUAL PL					

REMARKS TESTED JS + GK
 TYPE OF SOIL _____



REF : PERMIT # 49212

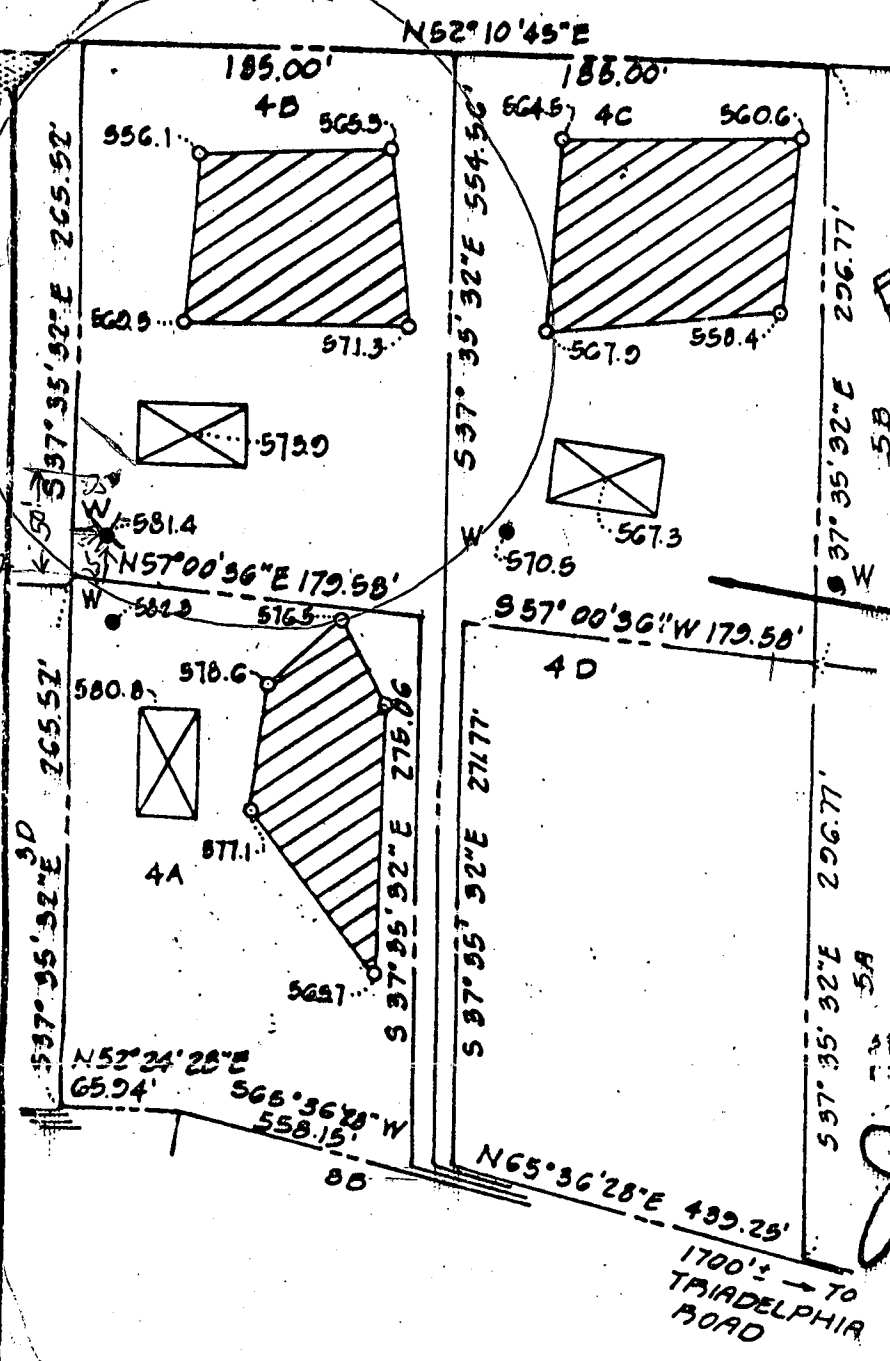
LOT 4B TRIADELPHIA FARMS II

John F. Reed

NOTES:
 1. PERCOLATION TEST HOLES SHOWN HEREON AND INDICATED THUS (o) HAVE BEEN FIELD LOCATED BY TRANSIT STADIA METHOD BASED ON STAKEOUT OF PROPERTY CORNERS BY TRANSIT STADIA METHOD AT THE TIME OF TEST.
 2. VERTICAL DATUM IS ASSUMED.



B.M.
 3/23/87



THE LOTS SHOWN ARE TO BE USED ONLY WITH THE LOTS SHOWN ON THE WIDTH AND LOT AREA. THE LOTS SHOWN ARE TO BE USED ONLY WITH THE LOTS SHOWN ON THE WIDTH AND LOT AREA.

MIN. F.F. ELEV. = 569.0
 NO BSMT. SEWER SERVICE

Well Site lot 4B
 OK-GJS

NOTE: PERCOLATION TEST HOLES SHOWN HEREON (o) HAVE BEEN FIELD LOCATED.

APPROVED: FOR PRIVATE WATER AND PRIVATE SEWAGE SYSTEMS.
 HOWARD COUNTY HEALTH DEPARTMENT

John Byler 8-20-79

THIS AREA INDICATES A PRIVATE SEWAGE EASEMENT OF APPROXIMATELY 10,000 SQ. FT. AS REQUIRED BY MARYLAND STATE DEPARTMENT OF HEALTH AND MENTAL HYGIENE FOR THE PROPER DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE PROHIBITED UNTIL PUBLIC SEWAGE IS AVAILABLE AND SERVICING ANY RESIDENTIAL STRUCTURES CONSTRUCTED ON THESE BUILDING SITES. THIS EASEMENT SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWAGE SYSTEM.

WITNESSES
John F. Reed
Susan N. Reed
 buyer

TITLE PERCOLATION TEST PLAT			
PROJECT LOT 4A, LOT 4B, LOT 4C		PROJECT TRIADELPHIA FARMS II	
LOCATION 5MD ELECTION DISTRICT HOWARD COUNTY, MD.			
DATE: JULY, 1979	DESIGN BY: -	DRAWN BY: W.H.N.	CHECKED BY: W.G.H.
SCALE: 1" = 100'	JOB NO.: 77228	DRAWING NO.: 1 OF 1	

boender associates

engineers
 surveyors
 planners

John Reed
2610 Camberwell Ct.
Baltimore, Md. 21207

298-0491

RECEIVED
HOWARD COUNTY
HEALTH DEPT.
MAR 19 9 45 AM '82
DIVISION OF
ENVIRONMENTAL
HEALTH

B 1 1230	SEQUENCE NO. (OEP USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL <i>please print or type</i>	OEP PERMIT NUMBER HU-73-4147
<small>(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)</small>		<i>fill in this form completely</i>	

Date Received 4/2/82
932 ground pump

OWNER INFORMATION

8 0 **3** 1 **9** 8 **2** **13**
(OEP Use Only)

15 Reed **34 Name** JOHN

36 2610 **Street or RFD** Cambridge **55**

57 Balto **State** md **76 Zip** 21207

B 3 LOCATION OF WELL

1 23 **6** COUNTY Howard **21**

8 SUBDIVISION Triadelphia Farms II **42**

23 SECTION — **46** **48** LOT 4 B **50**

52 NEAREST TOWN M Lanely **71**

73 MILES FROM TOWN (enter 0 if in town) 1 1/2 **76 77 78** **MI**

B 1 Continued **DRILLER INFORMATION**

77 License No. 238

77 Driller's Name Joseph L. Magee

77 Firm Name Joseph L. Magee

77 Address 5512 Ridge Rd Notling Md 21771

77 Signature Joseph L. Magee **77** Date Mar 19, 82

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

11 Triadelphia Rd. **30**
NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

34 290 **37**
DISTANCE FROM ROAD (CIRCLE APPROPRIATE BOX) **MI** **38 39**

B 2 WELL INFORMATION

1 23 **6** APPROX. PUMPING RATE (GAL. PER MIN.) 5

14 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 750 **20**

USE FOR WATER (CIRCLE APPROPRIATE BOX)

HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)

FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)

INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)

PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)

TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

1. Location OK
2. 55' casing
3. 2' above gp.
4. 50' open
5. 12' bags cement

WRITE THE BOX NUMBER FROM THE MAP HERE

E 8006

N 5204

4/2/82
JL

24 APPROXIMATE DEPTH OF WELL 300 **28** FEET

30 APPROXIMATE DIAMETER OF WELL 6 **37** NEAREST INCH

METHOD OF DRILLING (circle one)

30 BORED (OR AUGERED) JETTED JETTED & DRIVEN

37 AIR ROTARY AIR PERCUSSION ROTARY (HYDRAULIC ROTARY)

CABLE REVERSE ROTARY DRIVE POINT

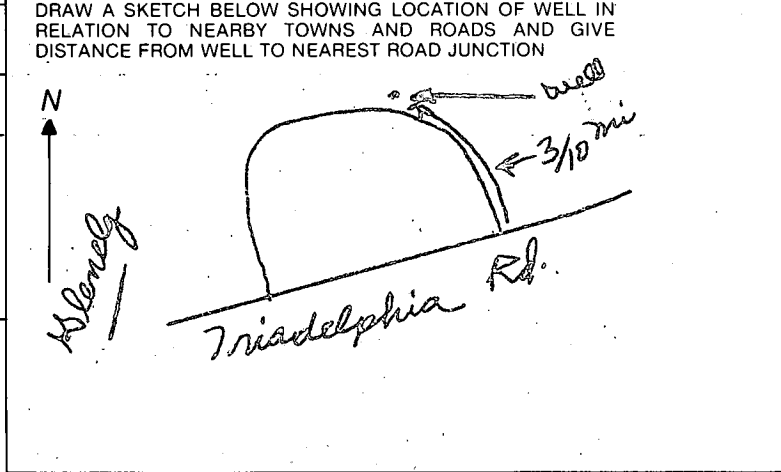
other _____

REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)

THIS WELL WILL NOT REPLACE AN EXISTING WELL THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED

THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY

THIS WELL WILL DEEPEIN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) _____



Not to be filled in by driller (OEP USE ONLY)

APPROX. PERMIT NUMBER G A P

FORCE **FS** WRITE INITIALS IN BOX

PERMIT NO. HU-73-4147

B 4 NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

HOWARD **A 28952**
COUNTY NAME COUNTY NO.

OEP SIGNATURE Frank Skinner STATE HEALTH CIRCLE BOX **41**

DATE ISSUED 053682

43 **48** CO SIGNATURE

50 NORTH GRID 524 **55** EAST GRID 0806 **63** EXPIRES 093082

B 5 SPECIAL CONDITIONS 8-63

1 **2** **3** **6**

CT 3138

SEQUENCE NO. (OEP 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 A28952

Date Received (OEP use only)

DATE WELL COMPLETED

7 2 87

Depth of Well

345

(TO NEAREST FOOT)

PERMIT NO.

FROM "PERMIT TO DRILL WELL"

HO-73-9147

OWNER Reed

John

STREET OR RD Triadelphia Road

TOWN Glenelg

SUBDIVISION Triadelphia Farms II

SECTION

LOT 4 B

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 FROM TO Check if water bearing

Brown shale 0 20
Sand 20 51
Haymoca rock 51 345

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) YES Y NO N

TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 12 NO. OF POUNDS 1128

GALLONS OF WATER 72

DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 30 ft.

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: 6 Total depth of main casing: 55

OTHER CASING (if used) 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

DEPTH (nearest ft.) 53 345

SLOT SIZE DIAMETER OF SCREEN (NEAREST INCH)

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL CIRCLE BOX F

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

C 3 seq no

PUMPING TEST HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min. to nearest gal.) 4

METHOD USED TO MEASURE PUMPING RATE Submersible

WATER LEVEL (distance from land surface)

BEFORE PUMPING 30

WHEN PUMPING 191

TYPE OF PUMP USED (for test)

A air, P piston, T turbine, C centrifugal, R rotary, O other, J jet, S submersible

PUMP INSTALLED

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) YES Y NO N

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

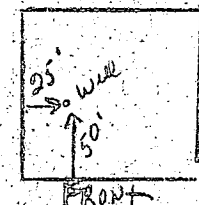
PUMP COLUMN LENGTH (nearest ft)

CASING HEIGHT (circle appropriate box and enter casing height)

LAND SURFACE 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)



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 THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 10.17.13 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT...

DRILLERS IDENT. NO. 238 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

HOWARD COUNTY HEALTH DEPARTMENT

JOYCE M. BOYD, M.D., M.P.H.
COUNTY HEALTH OFFICER



BUREAU OF ENVIRONMENTAL HEALTH
TIBER PLACE
8306B FORREST STREET
ELLCOTT CITY, MARYLAND 21043
TELEPHONE: 692-2330

April 29, 1982

Mr. John Reed
2610 Camberwell Court
Baltimore, Maryland 21207

RE: Building Permit #49212
Triadelphia Farms II, Lot 4B

Dear Mr. Reed:

This office is in receipt of the above referenced building permit application.

A recent water sample taken during the well yield test indicated 14 parts per million of nitrate nitrogen was present. The maximum allowable containment level for nitrate nitrogen is 10 parts per million.

The building permit will be issued provided that:

- (1) You acknowledge the fact, in writing, that this preliminary sample indicates nitrate concentrations above maximum safe levels and that prior to final use and occupancy approval you will be responsible for rectifying the situation by drilling a new well or treating the water to remove excessive nitrates. Agents from this office will monitor your water supply at your request, after interior plumbing is installed.
- (2) A site plan with elevations is submitted, as outlined in the attached instructions.

If you have any questions relative to this matter please call me at 992-2330.

Very truly yours,

Frank A. Skinner, Director
Water and Sewerage Program

FAS:hs

MAY 12 10 35 AM '82

John F. Reed
2610 Camberwell Ct.
Baltimore, Maryland 21207

May 10, 1982

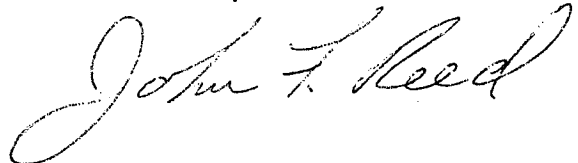
RE: Building Permit # 49212
Triadelphia Farms II, Lot 4B

Dear Mr. Skinner.

In reference to your letter I acknowledge the findings of the water sample test taken from my well. I have made arrangements to include water treatment facilities, etc. to remove excessive nitrates as necessary to correct the situation.

Also, as soon as possible I will forward to you a site plan with the proper information as per your specifications.

Thank You,



APPLICATION

HOWARD COUNTY

PERMIT APPLICATION

DEPARTMENT OF PUBLIC WORKS
BUREAU OF INSPECTIONS & PERMITS
COUNTY OFFICE BUILDING, ELLICOTT CITY, MARYLAND 21043

SERIAL NUMBER

PERMIT NUMBER

DATE ISSUED

BUILDING ADDRESS (HOUSE NO., STREET, TOWN OR AREA)

13294 HUNT RIDGE
ELLICOTT CITY, MD 21042

LOT NO. (OR TAX MAP & PARCEL NO.)

BLOCK NO.

LIBER

FOLIO

PARCEL 412

SUB DIVISION

ZONE

ZONE MAP

ELEC. DIST.

CENSUS TR.

WINDERMIA PARKS II

22

3

6030

OWNER'S NAME AND ADDRESS

PHONE NO.

JOHN F. HELL
13294 HUNT RIDGE
ELLICOTT CITY, MD 21042

988-9663

OCCUPANT'S NAME AND ADDRESS

PHONE NO.

OWNER

988-9663

ARCHITECT OR ENGINEER'S NAME AND ADDRESS

PHONE NO.

OWNER

988-9663

CONTRACTOR'S NAME AND ADDRESS

PHONE NO.

OWNER

INTENDED USE OF STRUCTURE (BE SPECIFIC)

LOWER LEVEL REC ROOM, EXERCISE ROOM
UPPER LEVEL EXTENSION TO EXIST RECREATION

EST. CONSTRUCTION COST

LICENSE NUMBER

PERMIT FEE

\$20,000

FOR OFFICE USE ONLY

DISTANCE IN FEET FROM N/W LINE TO FRONT BUILDING LINE 84' 11"

SIDE YARD 55' 11"

(DISTANCE IN FEET FROM SIDE BLDG. LINE TO SIDE PROPERTY LINE)

DISTANCE IN FEET FROM SIDE STREET R/W LINE

TO SIDE BUILDING LINE

DISTANCE IN FEET, REAR YD. REQUIRING SET

EACK _____ (CORNER LOT ONLY)

CONDITIONS (IF ANY)

Checks payable to DIRECTOR OF FINANCE OF HOWARD COUNTY

CAUTION
No person can construct before a permit is issued and displayed in the job. Violation of the law
and ordinances permit may be applied for two weeks before it
will be issued.

IMPORTANT: PLEASE SHOW ZIP CODES AND
AREA CODES WHEREVER REQUIRED.

QUALIFIED INSPECTOR OF CONSTRUCTION SEAL

Application is hereby made for a permit to (INDICATE ONE)
ERECT USE ALTER EXTEND RAZE MOVE the (INDICATE
ONE) PERMANENT TEMPORARY structure described.

DESCRIPTION OF WORK 2 STORY Addition

LOWER LEVEL - 32' x 60' GARAGE
3 ROOMS 10' x 24' INTERSECTION

SIZE OF BLDG.

FRONT DEPTH HEIGHT

REC ROOM 18' 24' 17'

EXERCISE ROOM

EXTENSION TO

1 BATH ROOM

TYPE OF BLDG.

AREA VOLUME ROOF

B. ROOMS 1136 9088 768

ROOMS 3

BATHS 1

FIREPLACES 0

FOOTINGS FOUNDATION S. WALLS

20 x 8 12' CON

UTILITIES

WATER/WELL SEWER/SEPTIC GAS ELECTRICITY TYPE OF HEAT AC

OWNER

I have carefully examined and read this application and know the same is true and correct, and that in doing this work, all provisions of Howard County Ordinances and the State Laws of Maryland will be complied with, whether specified or not; and I will notify the Bureau of Inspections, and Permits twenty-four hours in advance when I am ready for the inspections called for elsewhere in this application; and that no work will be covered up until such inspections have been complied with.

John F. Hell

SIGNATURE

OWNER

TITLE

DATE

FUNCTION DATE SIGNATURE APPROVAL

ZONING/PLANNING

SHA

ROADS & STREETS

BUILDING OFFICIAL

WATER & SEWER

HEALTH DEPT. 7/1/92 Craigwell

FIRE PROTECTION

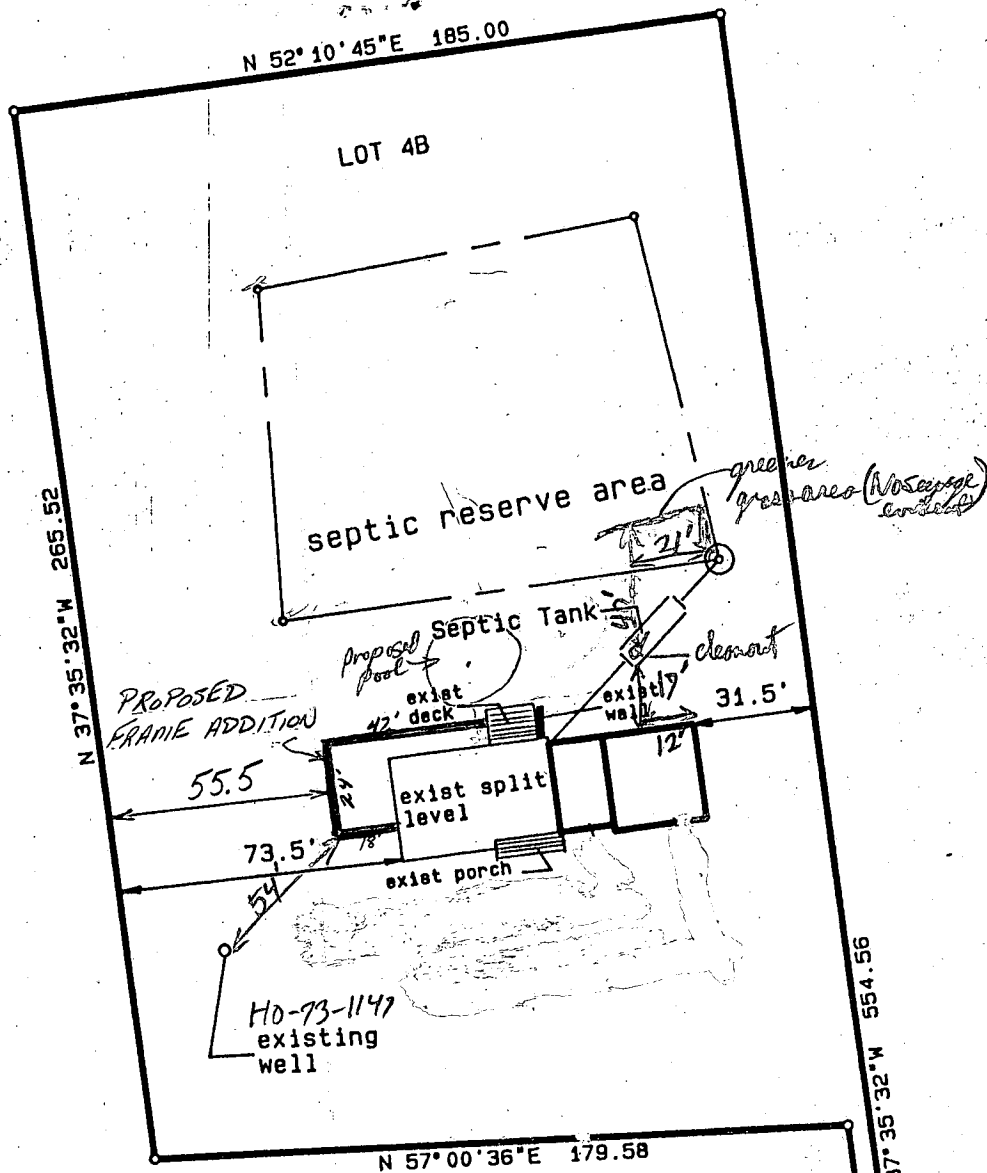
STORM WATER MGM.

APPROVED DATE

Distribution of Copies: Yellow - Engineering

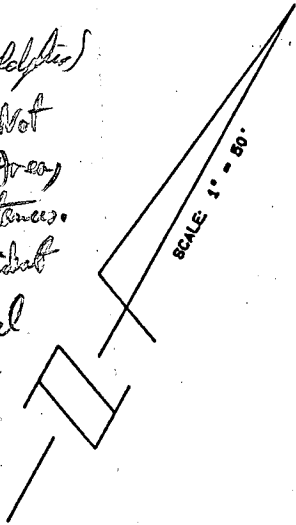
White - Building Official Pink - Health Dept

Green - Planning & Zoning Gold - S.H.A.



NOTE: VERTICAL ELEVATIONS ARE ASSUMED

(old address is 13304 Tacodolite)
 Addg Addition will Not Encumber Septic Area, Adequate setback distances. No Septic problems evident. Recommend Approval 8/10/92



SITE PLAN FOR

792-7020
03/01
APPLICATION

HOWARD COUNTY

PERMIT APPLICATION

DEPARTMENT OF INSPECTIONS, LICENSES & PERMIT
3430 COURT HOUSE DRIVE, ELLICOTT CITY, MARYLAND 21043

SERIAL NUMBER ✓

111437

BUILDING ADDRESS (HOUSE NO., STREET, TOWN OR AREA)
13294 HUNT RIDGE
ELLICOTT CITY 21042

GRADING/SEDIMENT CONTROL YES NO
SDP #

DESCRIPTION OF WORK AUTHORIZED
24' X 48" ROUND
ABOVE GROUND POOL
DECK w/GATE 48" W X 6'
TO BE FUELED BY TRUCK

LOT NO.	PARCEL NO.	SEC.	AREA	BLOCK NO.	LIBER	FOLIO
4B	412					

SUB DIVISION	ZONE	ZONE MAP	ELEC. DIST.	CENSUS TR.
TRIADELPHIA FARMS II	22	3	6030	

OWNER NAME AND ADDRESS
JOHN F. REED
13294 HUNT RIDGE
ELLICOTT CITY 21042
PHONE NO. 955-9663

OCCUPANT'S NAME AND ADDRESS
OWNER
PHONE NO.

ARCHITECT OR ENGINEER'S NAME AND ADDRESS
OWNER
PHONE NO.

CONTRACTOR'S NAME AND ADDRESS
OWNER
PHONE NO.

EXISTING USE
SFD

PROPOSED USE
SFD w/POOL

EST. CONSTRUCTION COST
\$1500.00

LICENSE NUMBER

PERMIT FEE

SIZE OF BLDG.	FRONT	DEPTH	HEIGHT
		48"	

TYPE OF BLDG.	AREA	VOLUME	ROOF
B. ROOMS ROOMS BATHS FIREPLACES			

FOOTINGS	FOUNDATION	S. WALLS

UTILITIES				
WATER/WELL	SEWER/SEPTIC	GAS	ELECTRICITY	TYPE OF HEAT AC

I have carefully examined and read this application and know the same is true and correct, and that in doing this work, all provisions of Howard County Ordinances and the State Laws of Maryland will be complied with, whether specified or not; and I will notify the Department of Inspections, and Permits twenty-four hours in advance when I am ready for the inspections called for elsewhere in the application; and that no work will be covered up until such inspections have been completed with.

John F. Reed
OWNER
SIGNATURE
7/7/92
TITLE DATE

W/S CODE

FOR OFFICE USE ONLY

DISTRICT IN FEET FROM R/W LINE TO FRONT BUILDING LINE

SIDE YARD
(DISTANCE IN FEET FROM SIDE BLDG. LINE TO SIDE PROPERTY LINE)

TO SIDE BUILDING LINE
DISTANCE IN FEET, REAR YD. REQUIRING SET

BACK (CORNER LOT ONLY)
SDP #

Check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

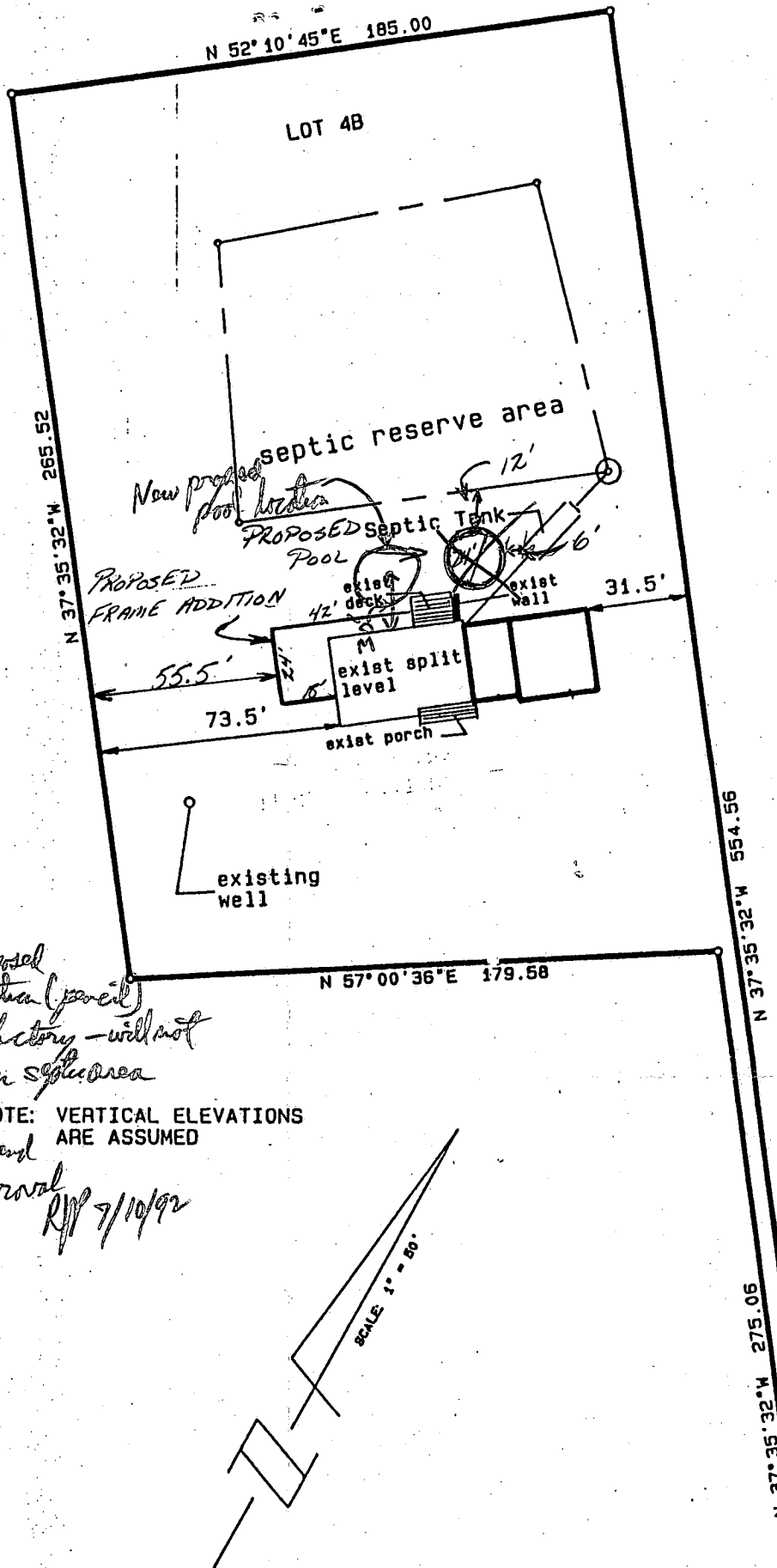
CAUTION
This permit is issued under the authority of the Planning and Zoning Commission and is subject to the provisions of the Howard County Ordinance on this subject. This permit is not valid unless it is accompanied by the appropriate fees.

FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING	X	
SHA		
SEDIMENT/GRADING		
BUILDING OFFICIAL		
WATER & SEWER		
HEALTH DEPT.	7/13/92	Craig White
FIRE PROTECTION		
STORM WATER MGM.		

IMPORTANT: PLEASE SHOW ZIP CODES AND AREA CODES WHEREVER REQUIRED.

LP-88-591

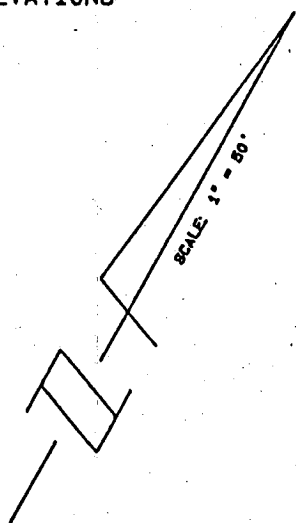
APPROVED DATE
Distribution of Copies:
White - Building Official
Green - Planning & Zoning
Yellow - Engineering
Pink - Health Dept.
Gold - S.H.A.



New proposed pool location (per set) is satisfactory - will not encroach septic area

NOTE: VERTICAL ELEVATIONS ARE ASSUMED

Recommended Approval RPP 7/10/92



SITE PLAN FOR ADDITION & SWIMMING POOL

To whom it may concern,

Per Health Dept. ^{pool} site had to be moved ~~to~~
per attach revised site plan.

Susan M. Reed

988-9663

#44437

RECEIVED

JUL 08 1992

LICENSES & PERMITS
DIVISION

OK AS REVISED
7/13/92 CW
HOW. CO. HEALTH

cc: Health Dept
DPZ