

5/27/75 - 1st  
1 PM - *Local*

# PERMIT

r. 21563  
A 29843-B

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

## INDEXED

ELLICOTT CITY

DISTRICT 1

05-372054

DATE 5/27/75

James Wilcox IS PERMITTED TO INSTALL ALTER X

ADDRESS Waller Park, Ellicott City, Md. PHONE 683-9242

A SEWAGE DISPOSAL SYSTEM LOCATED AT \_\_\_\_\_

SUBDIVISION Greenwood Farm ROAD 7322 Greenwood Drive LOT \_\_\_\_\_

PROPERTY OWNER James L. Wilcox Greenwood Farm lot 23 Sect III

ADDRESS \_\_\_\_\_ TM 40 6rd 18 p. 157

### SPECIFICATIONS

DRAIN FIELD \_\_\_\_\_ DEPTH \_\_\_\_\_ FEET. BOTTOM AREA \_\_\_\_\_ SQ. FT.

SEEPAGE PITS \_\_\_\_\_ ABSORBENT SIDE-WALL AREA \_\_\_\_\_ SQ. FT.

SEPTIC TANK CAPACITY \_\_\_\_\_ GALLONS

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 25% & TANK CAPACITY 50%.

OTHER REPAIR - Trench: 5 ft. wide and at least 50 ft long with 4 ft. gravel under  
distribution pipe. Maximum depth at low end 9 ft. below original grade. Maintain  
nearly level trench bottom. Place trench parallel to right lot line and 10 ft. away  
(minimum distance). CALL FOR INSPECTION BEFORE GRAVEL IS INSTALLED.

PLANS APPROVED BY Frank Skinner DATE 5/27/75

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.

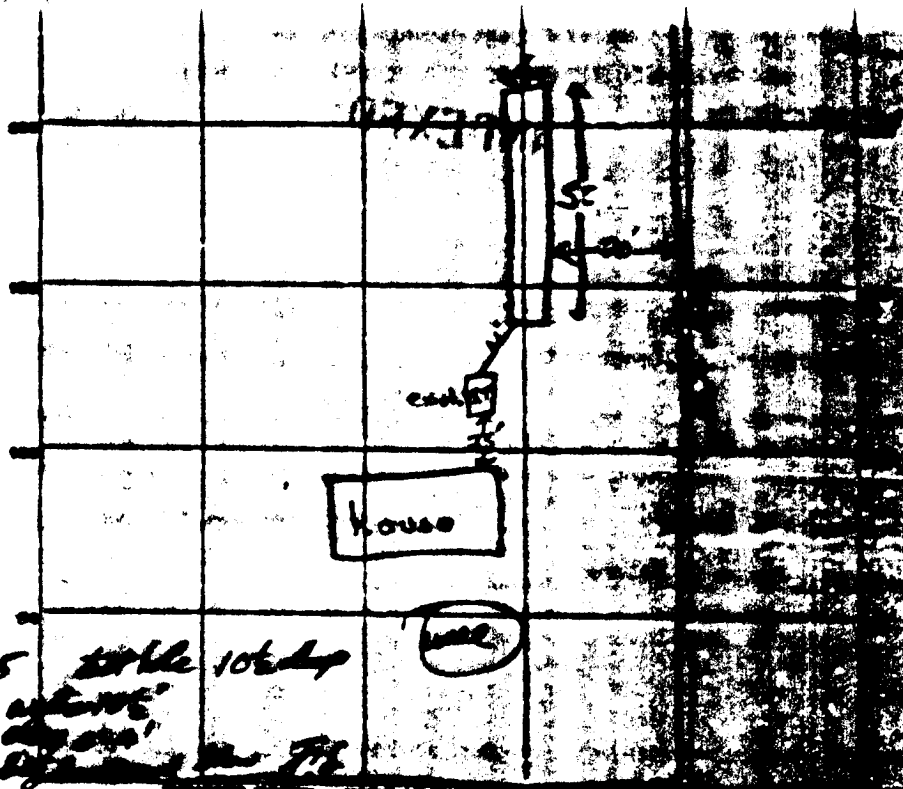
MODEL PERMIT SIGNED

RETURNED 8-18-99

Local # 40120001

1-Story addition

A 29843-B



5/27/75 table 1064p  
 what's  
 the size?  
 Digging the well

well

PERMIT CARD / septic field well

SEPTIC TANK, LEVEL NA

DISTRIBUTION BOX, TYPE NA

PILE FIELD, DEPTH 9-10 FT. TRENCH WIDTH 15 FT.

GRAVEL DEPTH 4 FT. TOTAL LENGTH 50

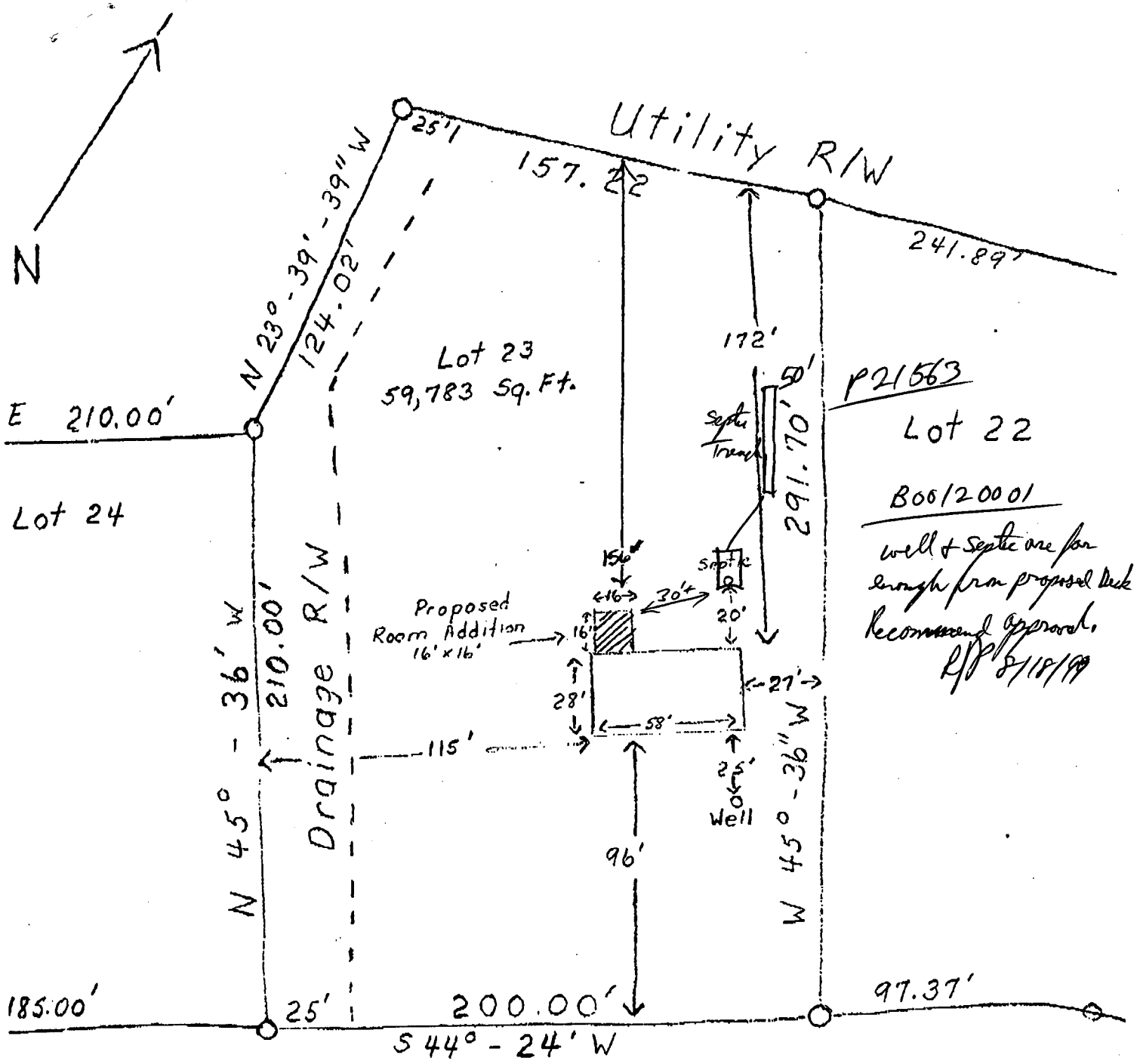
NUMBER OF TRENCHES 1

DEEPAGE PITS, INSIDE DIMENSION — FT. DEPTH — FT.

ADJACENT AREA ~200 SQ. FT.

REMARKS 5/27/75 trench dug. Soil, 10' deep, 15' wide.  
5/27/75 Gravel pipe installed. 50'

DATE SYSTEM APPROVED 5/27/75 INSPECTOR G. S. [Signature]



7522 GREENWOOD DRIVE  
 HIGHLAND, MD., 20711  
 GREENWOOD FARMS

1" = 50'

# HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

B0012 0001

Building Address 7522 Greenwood Drive  
Greenwood Ave 20777  
 Suite/Apt. #: \_\_\_\_\_ SDP/WP/Petition #: \_\_\_\_\_  
 Census Tract: 05102 Subdivision \_\_\_\_\_  
 Section III Area N/A Lot 23  
 Tax Map 40 Parcel 157 Grid 18  
 Zoning RR-100 Map Coordinates 1802 Lot size 59153 sq ft

Property Owner's Name JAMIE-FRANCES WILCOX  
 Address 7722 GREENWOOD DRIVE WILCOX  
 City MIDDLELAND State MD Zip Code 20777  
 Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
 Applicant's Name & Mailing Address, (if other than stated hereon):  
 \_\_\_\_\_  
 Phone 301-731-4727 Fax 301-731-5948

Existing Use RESIDENTIAL  
 Proposed Use RESIDENTIAL  
 Estimated Construction Cost \$ 24,000  
 Description of Work ADD 10' x 10' PORCH  
near of home

Contractor Company PERMITS SECURITY  
 Contact Person DAVID KERR  
 Address 3229 KAVERTON ROAD  
 City FROSTVILLE State MD Zip Code 20747  
 License No. 42271  
 Phone 301-420-1800 Fax 301-420-0753

Occupant or Tenant JAMIE-FRANCES WILCOX  
 Contact Name DAVID KERR  
 Address 3229 KAVERTON ROAD  
 City FROSTVILLE State MD Zip Code 20747  
 Phone 301-731-4727 Fax 301-731-5948

Engineer or Architect Company \_\_\_\_\_  
 Contact Person \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_

### BUILDING DESCRIPTION - COMMERCIAL

Building Characteristics	Utilities
Height: _____	Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private
No. of stories: _____	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"/> 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: <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	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression # of Heads _____

### BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
1st floor: <u>28</u> Depth <u>38</u> Width <u>38</u>	Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
2nd floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: <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: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Sprinkler system: <u>N/A</u> <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 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 THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature \_\_\_\_\_  
 Title/Company \_\_\_\_\_

Print Name DAVID KERR  
 Date 8-18-99

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		
Dev. Engineering DPZ		
Health	<u>8/18/99</u>	<u>[Signature]</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 NewTown Zone \_\_\_\_\_  
 SDP/Red-line approval date \_\_\_\_\_

PROPERTY ID#	AMOUNT
Filing fee	\$ <u>25</u>
Permit fee	\$ <u>76</u>
Excise tax	\$ <u>205</u>
Sub-total paid	\$ _____
Add'l permit fee	\$ _____
TOTAL FEES	\$ <u>206</u>
Balance due	\$ _____
Check	# <u>6749</u>
Validation	# _____

Accepted by [Signature]