

**HOWARD COUNTY
 PERMIT APPLICATION**

PERMIT NUMBER

B00144187

Building Address 7192 Sumner Rd
Clarksville MD 21029
 Suite/Apt. #: _____ SDP/WP/Petition #: _____
 Census Tract 005108 Subdivision N/A
 Section N/A Area N/A Lot N/A
 Tax Map 41 Parcel 42 Grid 10
 Zoning 1117 Map Coordinates 15A13 Lot size 1 Acre

Property Owner's Name William D. Esters
 Address 7192 Sumner Rd
 City Clarksville State MD Zip Code 21029
 Home Phone 410-790-7389 Work Phone 301-523-7689
 Applicant's Name & Mailing Address, (if other than stated hereon):
 Phone _____ Fax 301-611-9479

Existing Use Residential Vacant SFD
 Proposed Use Residential New SFD
 Estimated Construction Cost \$ 213,000
 Description of Work New Construction
First Single Family Home
3 BR 3 1/2 Bath Finished Basement
Attached 2 car garage Side Porch

Contractor Company Even Construction Co, Inc
 Contact Person Joon W. Chung
 Address 10563 SCAGGVILLE RD
 City LANDEL State MD Zip Code 20723
 License No. 22416.22417
 Phone 301-270-1471 Fax 301-725-2092

Occupant or Tenant William D. Esters
 Contact Name Same
 Address 7192 Sumner Rd
 City Clarksville State MD Zip Code 21029
 Phone 410-790-7389 Fax 301-611-9479

Engineer or Architect Company LD Esters
 Contact Person Luqman Khatib
 Address 9250 KENNEDY RD #106
 City COLUMBIA State MD Zip Code 21045
 Phone 410-715-1070 Fax 410-715-4546

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

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: <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"/>
Construction type: <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression # of Heads _____
<input type="checkbox"/> State Certified Modular	

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: Depth <u>46'</u> Width <u>58'</u>	Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
2nd floor: <u>40'</u> <u>46'</u>	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: <u>39'</u> <u>58'</u>	Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Finished Basement: <input checked="" type="checkbox"/> Unfinished Basement <input type="checkbox"/>	Sprinkler system: <u>N/A</u> <input checked="" type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R Other: _____
Crawl space <input type="checkbox"/> Slab on Grade <input checked="" type="checkbox"/>	
No. of Bedrooms: <u>3</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 checked="" 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 THEREIN, (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 [Signature]
 Title/Company _____

Print Name William D. Esters
 Date 4-08-03

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>10/3/03</u>	<u>Racie Noorhan</u>
Fire Protection		
Is Sediment Control approval required prior to issuance? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>		
ONE STOP SHOP: <input type="checkbox"/>		

DPZ SETBACK INFORMATION

Front: _____
 Rear: _____
 Side: _____
 Side St.: _____

All minimum setbacks met?
 YES NO

Is Entrance Permit required?
 YES NO

Historic District?
 YES NO

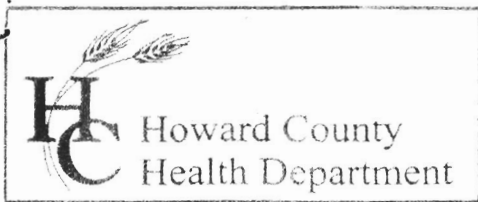
Lot Coverage for New Town Zone _____
 SDP/Red-line approval date _____

PROPERTY ID#: 23600

Filing fee \$ 100.00
 Permit fee \$ _____
 Excise tax \$ _____
 Add'l per. fee \$ _____
TOTAL FEES \$ _____
 Sub-total paid \$ _____
 Balance due \$ _____
 Check # 6752
 Validation # 28424

Accepted by [Signature]

Distribution of Copies - White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA



3525 H Ellicott Mills Drive, Ellicott City, MD 21043
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

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

October 30, 2003

Mr. Bill Esters
7192 Sanner Road
Clarksville, MD 21029

Re: Number of Bedrooms/ Septic Installation
7192 Sanner Road
BP# 00144137
Tax Map: 41 Parcel: 48

Dear Mr. Esters:

This correspondence is to notify you that we have recently received information from the Department of Inspections and Permits stating that the floor plan shows five bedrooms and a possibility of a sixth bedroom. The above referenced building permit application for the new house stated there would be three bedrooms (please see enclosed copy).

Although the building permit stated three bedrooms, our office designed the new septic system for a four bedroom house. Prior to signature of the building permit, the engineer had to show two systems for a four bedroom house. Based on the year of the lot's establishment, the property is not required to show 10,000 square feet of septic disposal area, however, there must be enough useable area capable of handling the number of bedrooms proposed. The current system installed using new design criteria, is sized for a maximum of five bedrooms.

The installation of the 1250 gallon septic tank supports, at most, a four bedroom house. For each additional bedroom, an additional 250 gallons of water per bedroom must be supported by the septic tank. Future additions may not include another bedroom since the available septic area just supports two systems for a five bedroom house. Also, note that any future permits for this property will require an upgrade for a larger septic tank to alt least a 1500 gallon, which you should currently have for your new house at this time.

In conclusion, please submit a floor plan for the house. Failure to do so will result in a delay of issuance of recommendation for Use and Occupancy. We appreciate your time in this important matter and look forward to receiving your floor plan within the next few weeks.

Sincerely,

Kacie Noonan, Sanitarian
Water and Septic Program

Cc: file ✓

Plan received
3bedrms total
KN

LTR 11-5-03 to COUNTY HEALTH DEPT

7192 Sanner Road
Clarksville MD 21029
November 5, 2003

Kacie Noonan
Howard County Health Department
3525 Ellicott Mills Drive
Ellicott City MD 21043

Dear Ms Noonan:

Your letter dated 10-30-03, applies.

The house I intend to build is modular and the plans which were furnished for the building permit were generic. The primary purpose of those plans was to delineate the structural characteristics and basic footprint of the proposed house.

Attached is the floor plan of the actual house. As you can see, those rooms referred to in the generic plan as bedroom #2 and #3 are an office and study respectively. I must say though, that these names were arbitrarily assigned. In actuality, the corner room will be used by my wife for "whatever" and the other room will be mine to use at my discretion.. You will note, though, that the room which had been the bathroom and located to service these two "bedrooms" has been deleted and replaced with a laundry room.

Consequently, the house now has three bedrooms; i.e., the master bedroom on the first floor and the two bedrooms on the second floor.

Thank you for giving me the opportunity to clarify this matter and, if there are anymore questions, please bring them to my attention at your earliest convenience.

Thank you,

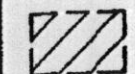
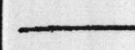
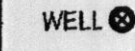



William D. Esters

2 Atch:

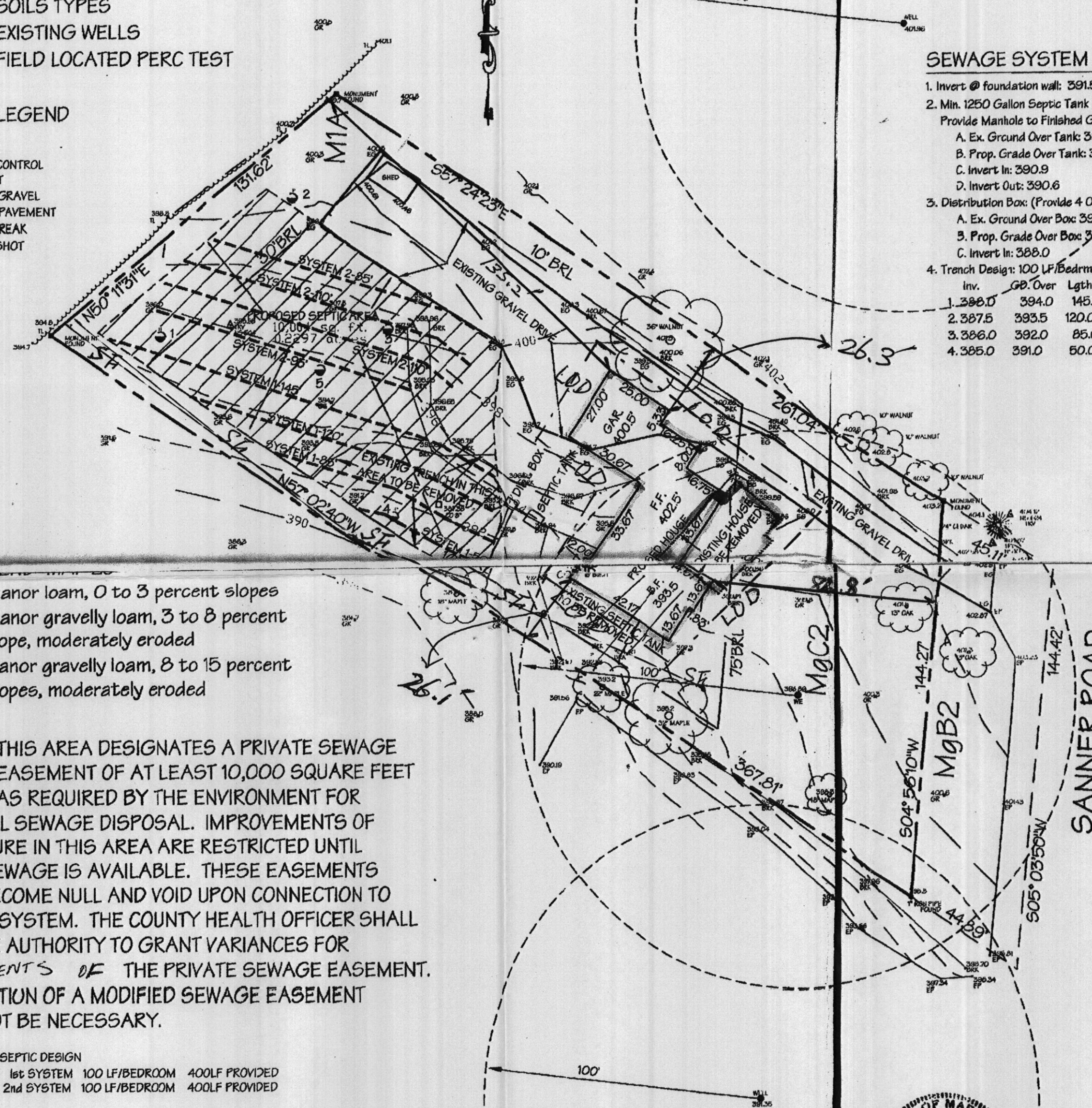
- 1st Floor Plan
- 2nd Floor Plan

PERK LEGEND

-  SEWAGE DISPOSAL EASEMENT
-  SOILS TYPES
-  WELL ● EXISTING WELLS
-  ● FIELD LOCATED PERC TEST

SURVEY LEGEND

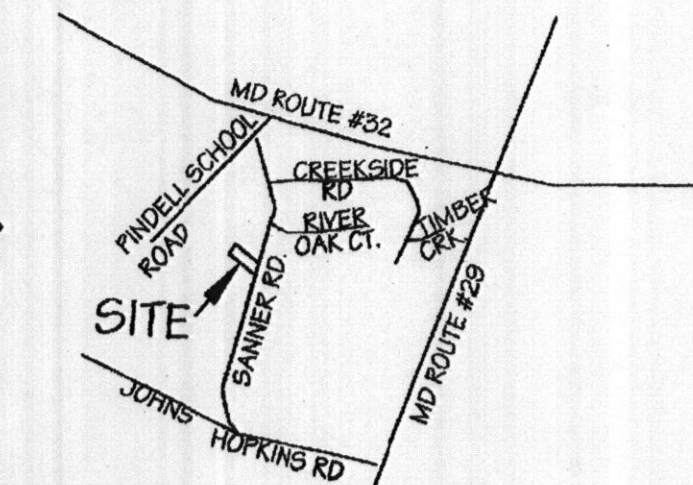
- TL TREELINE
- TRY SURVEY CONTROL
- CO CLEANOUT
- EG EDGE OF GRAVEL
- EP EDGE OF PAVEMENT
- BRK GRADE BREAK
- GR GROUND SHOT
- BLD BUILDING



SEWAGE SYSTEM DESIGN DATA:

1. Invert @ foundation wall: 391.5
2. Min. 1250 Gallon Septic Tank (4 Bedrooms)
Provide Manhole to Finished Grade
A. Ex. Ground Over Tank: 394.0
B. Prop. Grade Over Tank: 393.0
C. Invert In: 390.9
D. Invert Out: 390.6
3. Distribution Box: (Provide 4 Outlets Minimum)
A. Ex. Ground Over Box: 394.0
B. Prop. Grade Over Box: 393.0
C. Invert In: 388.0
4. Trench Design: 100 LF/Bedrm. X 4 Bedrm. = 400 LF

Invert	GP. Over	Lgth	Depth	Width
1. 388.0	394.0	145.0	6'	3'
2. 387.5	393.5	120.0	6'	3'
3. 386.0	392.0	85.0	6'	3'
4. 385.0	391.0	50.0	6'	3'

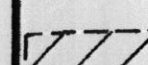


VICINITY MAP (N.T.S.)

NOTES

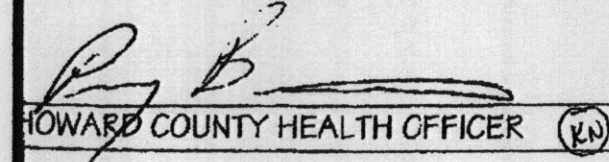
1. Existing Zoning : RRDEO
2. Deed Reference : Liber 3628, folio 353
3. Total Area of Lot: 0.920 Acres ± or 40,086 sq.ft.
4. The lot shown complies with the minimum lot area and ownership width as required by The Maryland State Department of the Environment.
5. Existing wells have been shown within 100 feet of the lot which may effect this proposal.
6. The topography shown was field run by LDE Inc.
7. The horizontal and vertical control was based on Howard County Control monuments 41BA and 41CA.
8. The existing house will be removed.
9. Existing Septic System to be abandoned.
10. Two systems each adequate for a four bedroom home are shown.

- M1A - Manor loam, 0 to 3 percent slopes
- MgB2 - Manor gravelly loam, 3 to 8 percent slope, moderately eroded
- MgC2 - Manor gravelly loam, 8 to 15 percent slopes, moderately eroded


 THIS AREA DESIGNATES A PRIVATE SEWAGE EASEMENT OF AT LEAST 10,000 SQUARE FEET AS REQUIRED BY THE ENVIRONMENT FOR INDIVIDUAL SEWAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWAGE IS AVAILABLE. THESE EASEMENTS SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR ADJUSTMENTS OF THE PRIVATE SEWAGE EASEMENT. RECORDATION OF A MODIFIED SEWAGE EASEMENT SHALL NOT BE NECESSARY.

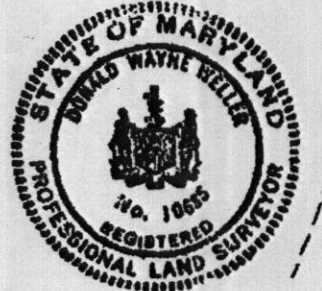
PRELIMINARY SEPTIC DESIGN
4 BEDROOMS 1st SYSTEM 100 LF/BEDROOM 400LF PROVIDED
2nd SYSTEM 100 LF/BEDROOM 400LF PROVIDED

APPROVED FOR PRIVATE WATER AND PRIVATE SEWERAGE
HOWARD COUNTY HEALTH DEPARTMENT

 12/10/02
HOWARD COUNTY HEALTH OFFICER (RN) DATE

SURVEYOR CERTIFICATION

I certify that this topographic and percolation plat was prepared under my supervision.

D. Wayne Weller, Professional Land Surveyor
Maryland No. 10685



Revised per Health Department Comments 12/2/02

<p>LDE Inc. Engineers, Surveyors, Planners 9250 Rumsey Road, Suite 106 Columbia, Maryland - 21045 (410)715-1070 - (301)596-3424 - FAX(410)715-9540</p>		<p>10/3/03 B00144187 SIGNED (RN)</p>
<p>SURVEY CREW BW/MG</p>	<p>SIGNED PERC CERT PERCOLATION PLAT ESTERS PROPERTY TAX MAP 41 GRID 10 PARCEL 48 HOWARD COUNTY, MARYLAND</p>	<p>SCALE 1" = 30'</p>
<p>DRAWN BY JLW</p>		<p>JOB NO. 02-200.11</p>
<p>CHECKED DWW</p>		<p>FILE NAME 020011.DWG</p>
<p>DATE 4/02</p>		<p>SHEET 1 of 1</p>