

HOWARD COUNTY
DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVE
ELLCOTT CITY, MD 21043

Residential New Plumbing Permit

PERMIT NUMBER: P16004778

APPLICATION DATE: 10/6/2016

ISSUE DATE: 10/6/2016

SITE ADDRESS:

8548 PINEWAY CT
LAUREL, MD 20723

PROPERTY OWNER INFO:

INGRAM MICHAEL AND ELIZABETH
~~8548 PINEWAY CT~~

LAUREL, MD 20723
Phone #: 202-441-4110

Subdivision:

Water Contract #: 354
Sewer Contract #: 719

Lot No.: 8 **Tax Map:** 46 **Grid:** 46-11
ADC Map: 5052-H9 **SDP No.:** **Zoning:** R-20

Census Tract: 606802

DESCRIPTION OF WORK:

SFD/ CONNECT TO PUBLIC WATER AND SEWER (ADO)

PRIMARY CONTRACTOR INFO:

Licensee: MARIO A DIANGELO
Plum/Gas License No.: 20020068022

Business Name: T & D PLUMBING AND HEATING CO INC

License Address: 1628 SULPHUR SPRINGS RD
HALETHORPE, MD 21227

Phone Number: 3410-242-8850

Building / Plumbing Characteristics

Building Permit #: N/A	Sanitary Pipe Size: 4	Storm Pipe Size:
Existing Use: SFD	Sanitary Pipe Length: 60	Storm Pipe Length:
Total Fixtures:	Sanitary Pipe Materials: PVC	Storm Pipe Materials:
Total Gas Fixtures:	Water Pipe Size: 1.50	Gas Pipe Size:
Gas Meter: Neither	Water Pipe Length: 50	Gas Pipe Length:
Gas System Type:	Water Pipe Materials: CTS POLY	Gas Pipe Materials:
Total Gas BTU's:	Water & Sewer Type: WATER AND SEWER	

Permit Fees:

Total Fees Invoiced:	\$380.00
Total Fees Paid:	\$380.00
Balance Due:	\$0.00

To schedule an inspection or check the results of an inspection please call (410) 313-3800

APPROVED BY THE DIRECTOR OF INSPECTIONS, LICENSES AND PERMITS - BUILDING OFFICIAL

OFFICE USE ONLY

CONTROL #: _____
 PERMIT #: _____
 INSPECTED BY: _____
 DATE INSPECTED: _____

WATER CONNECTION APPLICATION

HOWARD COUNTY

DEPARTMENT OF PUBLIC WORKS

3430 COURT HOUSE DRIVE ELLICOTT CITY, MD 21043

OFFICE USE ONLY

APPLICATION #: _____
 CONTRACT #: 3254
 REBATE CONTRACT #: _____
 WATER ZONE: _____
 CONNECTION WORKSHEET Y ____ N ____

FILL OUT APPLICATION COMPLETELY AND SIGN BELOW. IF LOCATION INFORMATION IS UNKNOWN, CONTACT THE OFFICE OF PLANNING AND ZONING (DPZ) FOR HOUSE NUMBER, STREET NAME, ETC.

Application is herewith made for a water house connection to the property described below:

DATE OF APPLICATION: _____

SUBDIVISION 4 SECTION _____ AREA _____ LOT _____ BLOCK _____
 HOUSE # 8546 STREET Prosperity Rd TAX MAP _____ GRID _____ PARCEL _____
 CITY, STATE Calverton Md ZIP CODE 20723 PHONE # 1 410 791
 NEW OR EXISTING BUILDING Existing USE (SEE PROPERTY CLASSIFICATIONS ON REVERSE SIDE) _____

ITEMS CHECKED	CONNECTION TYPE	CON. DIA.	METER SIZE	CHARGES DESCRIPTION	CHARGES AMOUNT	FUND	BA	G/L
<input checked="" type="checkbox"/>	WATER CONNECTION	1"	3/4"	INSTALLATION METER ONLY	<u>2100</u>	7010009000	3100	431185
<input type="checkbox"/>	WATER CONNECTION	1 1/2"	1"	INSTALLATION METER ONLY		7010009000	3100	431185
<input type="checkbox"/>	LARGE METER CONNECTION (1 1/2" & LARGER) ADO required for 3" & UP			INSTALLATION METER ONLY		7010009000	3100	431185
<input type="checkbox"/>	FIRE PROTECTION CONNECTION			INSTALLATION METER ONLY		7010000000	3100	431179
<input type="checkbox"/>				IN AID OF CONSTRUCTION AMOUNT CHARGED BASED ON METER SIZE	<u>2000</u>	7030011100	3100	422000
<input type="checkbox"/>	ADO or SURETY #			ADVANCED DEPOSIT ORDER OR SURETY DEPOSIT AMOUNT	<u>2000</u>	7010003000	1300	102998
<input type="checkbox"/>				INSPECTION FEE AND PERMIT FEE	<u>2000</u>	7010010000	3100	431105

*Refer to DPZ for estimates of Advanced Deposit (ADO). For installations requiring an ADO, the owner must enter into a cost agreement with Howard County prior to the commencement of any installation work.

\$ 2700
TOTAL DUE

DATE 11/20/09
CR # 1000000000

THE INFORMATION REQUESTED BELOW MUST BE LEGIBLE FOR BILLING/REFUND PURPOSES.

COMPANY NAME _____
 COMPANY ADDRESS _____
 OWNER SIGNATURE [Signature]
 OWNER NAME (PRINT) [Name]
 OWNER ADDRESS _____

paid?

FULL FEE MUST ACCOMPANY THIS COMPLETE APPLICATION, MAKE CHECKS PAYABLE TO: DIRECTOR OF FINANCE, HOWARD COUNTY. CREDIT CARDS ARE NOT ACCEPTED.

THE TERMS & CONDITIONS OF THIS APPLICATION, INCLUDING ANYTHING ON THE REVERSE SIDE HEREOF ARE BINDING UPON THE OWNERS SIGNATURE & ALL SUCCEEDING OWNERS.

CUSTOMER
[Signature]
 To apply for...
 DPZ...
 at 5100 E. tap 5

OFFICE USE ONLY

CONTROL #: _____
 PERMIT #: _____
 INSPECTED BY: _____
 DATE INSPECTED: _____

SEWER CONNECTION APPLICATION
HOWARD COUNTY
DEPARTMENT OF PUBLIC WORKS
 3430 COURT HOUSE DRIVE ELLICOTT CITY, MD 21043

OFFICE USE ONLY

APPLICATION #: _____
 CONTRACT #: 7195
 REBATE CONTRACT #: _____
 SEWER ZONE: _____
 CONNECTION WORKSHEET Y. N. _____

FILL OUT APPLICATION COMPLETELY AND SIGN BELOW. IF LOCATION INFORMATION IS UNKNOWN, CONTACT THE OFFICE OF PLANNING AND ZONING (DPZ) FOR HOUSE NUMBER, STREET NAME, ETC. NOTE: COMMERCIAL AND INDUSTRIAL FACILITIES MAY BE SUBJECT TO REQUIREMENTS OF THE COUNTY CODE FOR SEWER SURCHARGES, INDUSTRIAL COST RECOVERY CHARGES, AND PRETREATMENT.

DATE OF APPLICATION: _____

Application is herewith made for a sewer house connection to the property described below:

SUBDIVISION _____ SECTION _____ AREA _____ LOT _____ BLOCK _____
 HOUSE # 5510 STREET Hampton Ct TAX MAP _____ GRID _____ PARCEL _____
 CITY, STATE MD ZIP CODE 21043 PHONE 666-296-7996
 NEW OR EXISTING BUILDING Existing USE (SEE PROPERTY CLASSIFICATIONS ON REVERSE SIDE) _____

ITEMS CHECK	CONNECTION TYPE	CON DIA.	CHARGES DESCRIPTION	CHARGES AMOUNT	FUND	BA	G/L
<input checked="" type="checkbox"/>	SEWER CONNECTION	4"	INSTALLATION		7010009000	3100	431185
<input type="checkbox"/>	SEWER CONNECTION	6"	INSTALLATION		7010009000	3100	431185
<input type="checkbox"/>	SEWER CONNECTION	8"	INSTALLATION - ADO		7010003000	1300	102998
<input type="checkbox"/>			IN-AID-OF CONSTRUCTION AMOUNT CHARGED BASED ON METER SIZE		7030015100	3100	422000
<input type="checkbox"/>	ADO or SURETY #		ADVANCED DEPOSIT ORDER OR SURETY DEPOSIT AMOUNT		7010003000	1300	102998
<input type="checkbox"/>			INSPECTION FEE AND PERMIT FEE		7010010000	3100	431105

*Refer to DPZ for estimates of Advanced Deposit (ADO). For installations requiring an ADO, the owner must enter into a cost agreement with Howard County prior to the commencement of any installation work.

\$ 1062
 TOTAL DUE

DATE 6/6/9
 CR # 1004257193

THE INFORMATION REQUESTED BELOW MUST BE LEGIBLE FOR BILLING/REFUND PURPOSES.

COMPANY NAME _____
 COMPANY ADDRESS _____
 OWNER SIGNATURE _____
 OWNER NAME (PRINT) _____
 OWNER ADDRESS _____

FULL FEE MUST ACCOMPANY THIS COMPLETE APPLICATION, MAKE CHECKS PAYABLE TO: DIRECTOR OF FINANCE, HOWARD COUNTY. CREDIT CARDS ARE NOT ACCEPTED.

THE TERMS & CONDITIONS OF THIS APPLICATION, INCLUDING ANYTHING ON THE REVERSE SIDE HEREOF ARE BINDING UPON THE OWNERS SIGNATURE & ALL SUCCEEDING OWNERS.

CUSTOMER

Howard County, Maryland
Department of Finance
3430 Court House Drive
Ellicott City, MD 21043

8/29/2016 10:38 AM Cashier 0062
T/Ref 0004257193 Reg 0004 Tran No 9346
Cash Report: 160829-01 for 8/29/2016

01 - Main Location
Sewer-In-Aid (730-009-7120)
7030015100-3100-422000-3100000000-999999
9999999999
Contract Number: 719s
Validation Number: 728172 \$600.00
W/S Connection 500-5019
7010009000-3100-431185-3100000000-999999
9999999999
CONTRACT #: 354
Validation Number: 728173 \$310.00
Water In-Aid (730-009-7110)
7030011100-3100-422000-3100000000-999999
9999999999
Contract Number: 354
Validation Number: 728174 \$600.00
W/S Advance Deposit 500-5020
7010003000-1300-102998-9999999999999999
Contract Number: 354
Validation Number: 728175 \$1,500.00
Mid-Pat.In-Aid (710-009-8211)
7010010000-3100-431105-3100000000-999999
9999999999
Contract Number: 354
Validation Number: 728176 \$300.00

Total \$3,310.00
Check (\$3,310.00)
Check No. 939

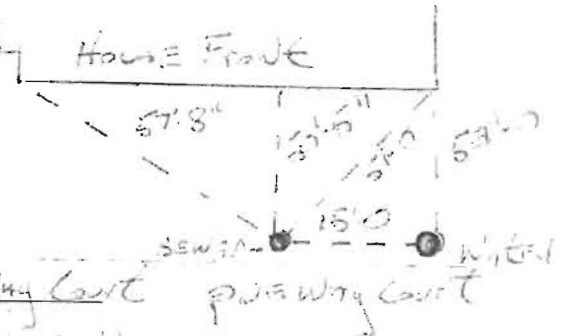
Thank You!

Mon 10-17-2016 TRIANGULATION

Date

P 16004778

W/S Plumbing Permit No.



3548 P.D. Way Court

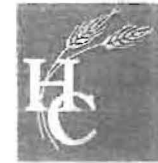
Site Address

T+D Plumbing Co. Inc.

Plumbing Company

John Hidey

Plumbing & Mechanical Inspector
Inspections and Enforcement Division
410-313-1844



Howard County Government
Department of Inspections, Licenses and Permits
9250 Bendix Road, Columbia, Maryland 21045
jhidey@howardcountymd.gov
FAX: 410-313-1861

Triangulation and Plumbing Inspector for this project.

David M. Kelly, LLC

T/A Jones Well Drilling
3700 Rush Road
Jarrettsville, MD 21084-1624

*Well
Capping
B-Part*

INVOICE

Invoice #

16-0366

DATE

10/13/16

Phone # 410 692-6981 Fax # 410 692-6969

CUSTOMER

Mike Ingram
8548 Pineway Ct
Laurel MD

SITE LOCATION
8548 Pineway Ct 202-441-4110

DESCRIPTION	FOOTAGE	RATE	AMOUNT
Abandon & seal 1 - 98' water well - as quoted		1,250.00	1,250.00
Total			\$1,250.00

Thank you for your business!

Total

\$1,250.00

Terms: DUE UPON RECEIPT Finance charge of 1.5% monthly (18% annual) will be applied to statements not paid within (15) days. Customer shall be responsible for attorney fees of 33 1/3% of total balance due, court costs and additional fees necessary for collection.

Well reports will be released upon payment in full.

VISA and MasterCard available for 3% additional fee. Returned check fee \$40.00.

www.joneswelldrilling.com
water@joneswelldrilling.com

MARYLAND DEPARTMENT OF THE ENVIRONMENT, WATER MANAGEMENT ADMINISTRATION
1800 Washington Blvd., Baltimore, Maryland 21230 (410) 537-3784

WATER WELL ABANDONMENT-SEALING REPORT FORM

SUBMIT COPIES OF COMPLETED FORM TO:

- * COUNTY ENVIRONMENTAL AGENCY (contact MDE, WMA if address needed)
- * WELL OWNER
- * MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DATE WELL ABANDONED: Oct. 13, 16 (month/day/year)

* PERMIT NUMBER OF ABANDONED WELL (if any) None

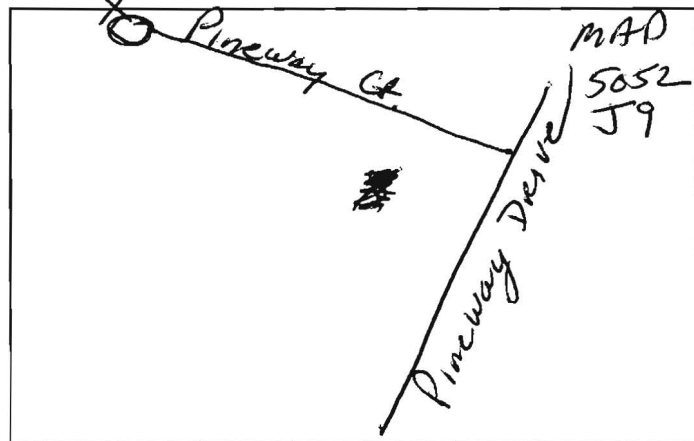
* PERMIT NUMBER OF REPLACEMENT WELL: Chookup to City water None

* PERSON ABANDONING WELL: Harvey Knapp Jr. WELL DRILLER'S LICENSE NUMBER: 509
CIRCLE: MWD / MSD / MGD

* OWNER'S NAME: Mike Ingram

* WELL LOCATION:
COUNTY: Howard
NEAREST TOWN: Scaggsville
TAX MAP 46 BLOCK _____ PARCEL 243
SUBDIVISION: Pine Valley
SECTION: _____ LOT: 8
STREET ADDRESS: 8548 Pineway Ct.

SITE LOCATION MAP



LATITUDE 39.081090

LONGITUDE 76.531491

* TYPE OF WELL BEING ABANDONED:
 DRILLED JETTED
 BORED HAND DUG
 OTHER (specify) _____

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
<u>dirt</u>	<u>0</u>	<u>1</u>
<u>Cement/bentonite grout</u>	<u>1</u>	<u>60</u>
<u>clean fill</u>	<u>60</u>	<u>98</u>

* USE CODE:
 DOMESTIC MUNICIPAL/PUBLIC
 IRRIGATION INDUSTRIAL
 TEST/OBSERVATION GEOTHERMAL

* TYPE OF CASING:
 STEEL PLASTIC
 CONCRETE OTHER (specify) _____

SIZE OF CASING: 6 INCHES IN DIAMETER

DEPTH OF WELL: 98 FEET DEEP

WAS ANY CASING REMOVED? YES NO
If yes, length removed, in feet: 1

WAS CASING RIPPED OR PERFORATED? YES NO

VOLUME OF MATERIAL USED

19.4 cu ft.

David Keller 304 MWD / MSD / MGS 10/13/16

Fogle's Septic Clean, Inc.
580 Obrecht Road
Sykesville, MD 21784

Invoice Date **Invoice #**
 10/18/2016 279821

INVOICE

PLEASE PAY
THIS AMOUNT **\$280.00**

Make checks payable to: **Fogle's Septic Clean, Inc.**

Bill To:

MIKE INGRAM
 8548 PINEWAY CT
 LAUREL, MD 21784

Service Address

MIKE INGRAM
 8548 PINEWAY CT
 LAUREL, MD 21784

Phone # 410-795-5670

Fogle's Septic Clean, Inc.
 580 Obrecht Road
 Sykesville, MD 21784

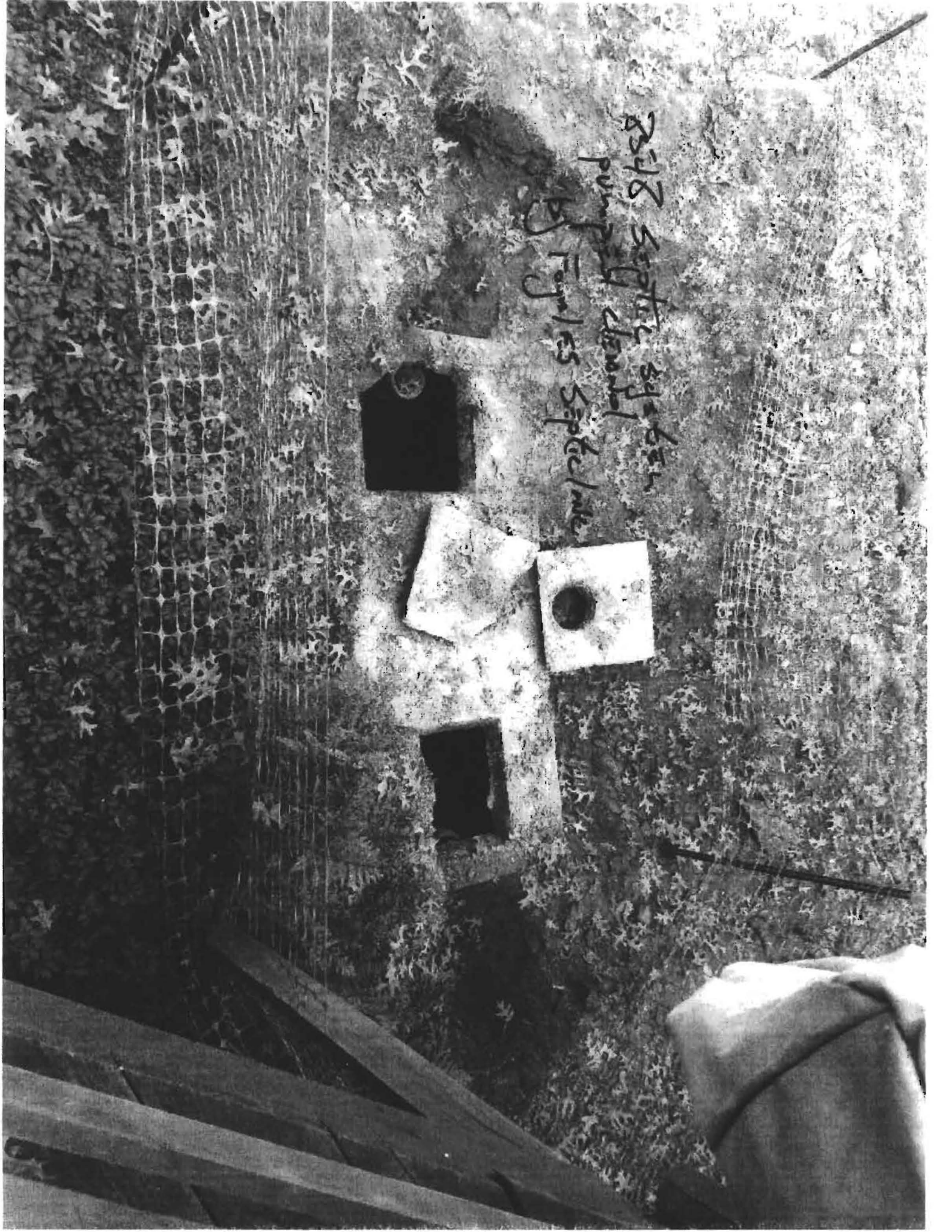
PLEASE DETACH AND RETURN TOP PORTION WITH PAYMENT

P.O. #	Due Date	Rep	Ship Date
	10/18/2016	SPR	10/17/2016

Qty	Description	Rate	Amount
	PUMP SEPTIC TANK FOR ABANDONMENT	280.00	280.00

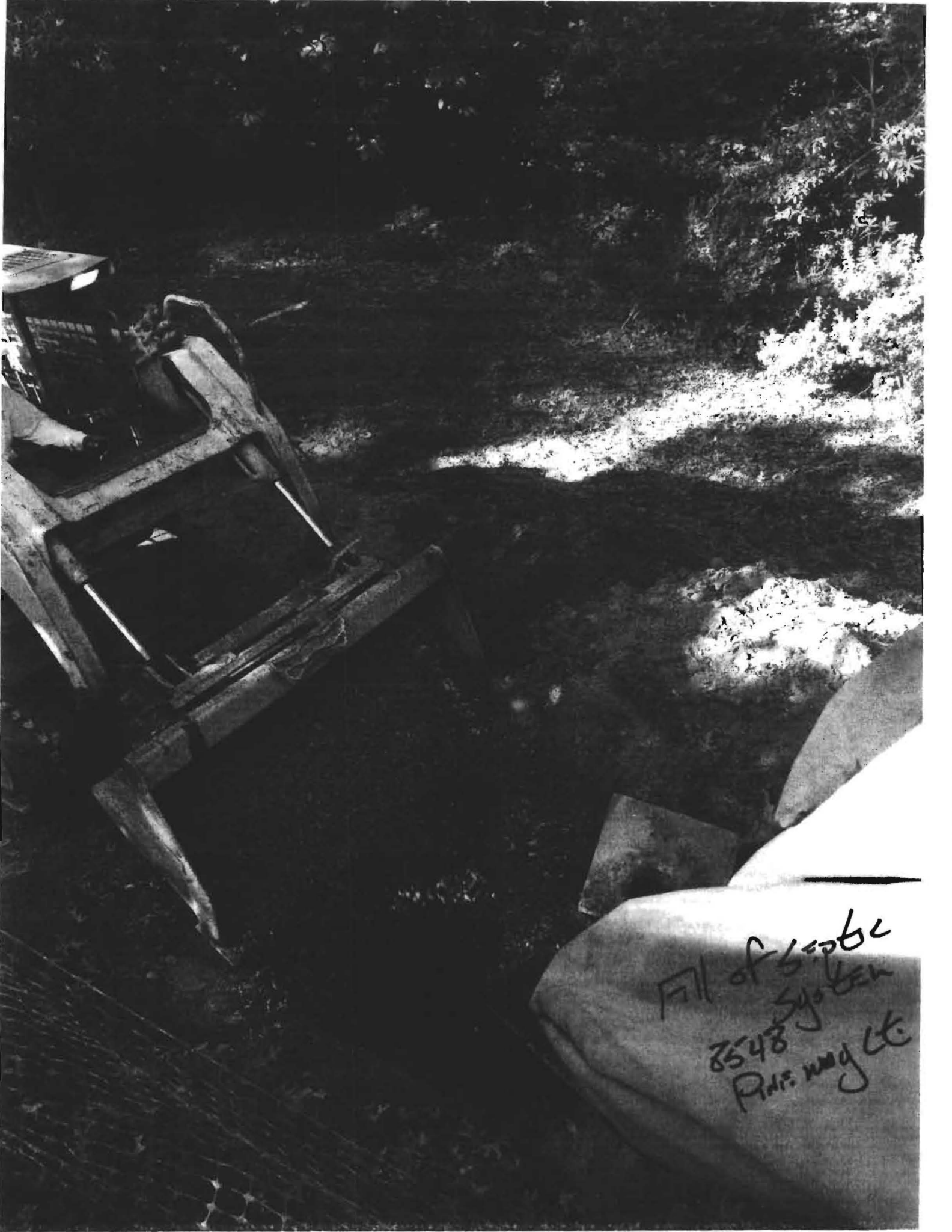
	Subtotal	\$280.00
	Total	\$280.00
1.5% interest will be charged monthly on all unpaid balances after 30 days. \$30 CHARGE FOR RETURNED CHECK. RECEIPT DATE STAMPS ARE STRICTLY ENFORCED for ALL DISCOUNTS.	Payments/Credits	\$0.00
	Customer Total Balance	\$280.00
Billing Questions Call	410-795-5670	

2548 Septic system
pump and chamber
by Fogless Septic Inc.



8648 septic system
Digwall cleaned
by Fogles Septic Inc





Fill of 3548
8548 System
Pdr. mag. Co.



SEPTIC SYSTEM
05/18
Pinkway C

Septic System
Pipes to be
Existing system
Capped off
8/24/8
P. [unclear]

Lids
back in
place
7548

Pine wood



Final cleanup
of gravel pit
SEP 6c
W. H. H. H.
Dist. of Parkland Co

35 ft
Pint's Way CT
All well 159 h pipe
Removed, 1 pipe
discarded by
complete
Paint in
Sealed

6548
Pineyway Ct
Wall equipment
all removed