

Bureau of Environmental Health  
7178 Columbia Gateway Drive, Columbia, MD 21046-2147  
(410) 313-2640 Fax (410) 313-2648  
TDD (410) 313-2323 Toll Free 1-866-313-6300  
website: www.hchealth.org

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Peter L. Beilenson, M.D., M.P.H., Health Officer

January 27, 2008

Mr. and Mrs. Lee Hewitt  
13996 Monticello Drive  
Cooksville, Maryland 21723

RE: Variance Approval  
13996 Monticello Drive  
Cooksville, Maryland 21723

Dear Mr. and Mrs. Hewitt:

The Bureau of Environmental Health has received your variance request dated January 9, 2008 for the above referenced property. Specifically, you are requesting to erect a shed on non-buildable Preservation Parcel C (property address 13998 Monticello Drive) and receive a waiver to the Percolation Certification Requirements as outlined in Subtitle 8, Section 3.805 of the Howard County Code.

The variance request is **approved** on the basis that the proposed accessory shed will not have any plumbing fixtures installed nor the need for a new sewage disposal easement installed for the non-buildable parcel. Additionally, the primary structure currently has an approved percolation certification plan on file with this department.

Be advised that any deviations from the site plan submitted with this request will be subject to further review by this department. Any questions regarding this decision may be directed to the Well and Septic Program or by calling (410) 313 – 1771 between the hours of 8:00 am and 5:00 pm.

Sincerely,

A handwritten signature in cursive script that reads 'Bert Nixon'.

Bert Nixon, Director  
Bureau of Environmental Health

cc: Program file

**Gabriel Creighton - County Garage Issue Health Department.doc**

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**From:** "Lee Hewitt" <lhewitt@hewitt1.com>  
**To:** <GCREIGHTON@howardcountyMD.gov>  
**Date:** 1/9/2008 9:38 AM  
**Subject:** County Garage Issue Health Department.doc

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**To:** Gabe Creighton Environmental Sanitarian  
Bureau of Environmental Health  
7178 Gateway Drive  
Columbia, Maryland 21046  
410-313-2323

**From:** Lee and Michelle Hewitt  
13996 Monticello Drive  
Cooksville, Maryland 21723  
410-984-5814

**Ref:** Accessory Structure Re-Approval

**Date:** 9 January 2008

Mr. Creighton,

The following is a response to your letter dated 01/04/08. Thank you for your thorough review. Hopefully, with this additional information, we can fulfill the needs of the Howard County Health Department.

Item 1: Planning and Zoning Approval Letter

Non-buildable is defined as not being able to build a house to live in, it does not mean that a structure cannot be built on the property. Attached is a letter from Howard County, Department of Planning and Zoning's permission to build an Accessory Structure.

Item 2: Percolation Certification Requirements

As part of this correspondence, we would like to request exemption from Percolation Certification Requirements of Howard County Code Section 3.805. The 13998 Monticello Property, Preservation Parcel "C", is non-buildable and will not have a sewage disposal area or plumbing fixtures installed. The proposed structure will act as an Accessory Structure to the Primary Structure located on 13996 Monticello Drive. The Primary Structure has an approved Percolation Certification plan on-file with the Howard County Health Department.

Please give me a call to discuss any additional needs so that we can move this project forward.

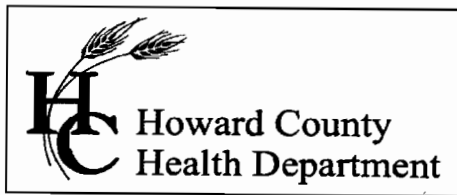
I thank you in advance for your time and effort.

To:

Page 2 of 2

Respectfully Yours,

Ms. Michelle Hewitt



Bureau of Environmental Health  
7178 Gateway Drive Columbia, MD 21046  
(410) 313-2640 Fax (410) 313-2648  
TDD (410) 313-2323 Toll Free 1-866-313-6300  
website: [www.hchealth.org](http://www.hchealth.org)

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*Peter Beilenson, M.D., M.P.H., Health Officer*

1/4/2008

To: Leroy and Michelle Hewitt  
13996 Monticello Dr.  
Cooksville, MD 21723

From: Gabe Creighton, Environmental Sanitarian  
Well and Septic Program

Re: B07004985  
Tax Map 9, Parcel 346  
Harless Manor Ph. II  
Preservation Parcel C  
Proposed Auxiliary Structure

To Whom It May Concern:

This department has received and reviewed the building permit application referenced above. Upon this review it has been determined that the improvements proposed by this building permit are not permissible without fulfilling additional requirements from this agency. Items listed are needed prior to permit approval.

1. Due to the unique circumstances of this proposal, being that the lot/parcel on which the proposed structure is to be built upon is considered 'non-buildable', I am requesting a letter of explanation from you, the property owners. The circumstances being that although the lot/parcel is 'non-buildable', you as the owners of this property and the adjacent property upon which you maintain a residence addressed as 13996 Monticello Dr. and known as lot 26, Harless Manor Subdivision, Phase II, maintain these properties as one, and therefore should not be held to the non-buildable restrictions.
2. Additionally in this letter, you should also request exemption from the Percolation Certification requirements of Howard County Code Section 3.805. In this portion of the letter, it will be necessary to explain the following: Though the property (Parcel C) does not have and will not (due to its non-buildable status) have a sewage disposal area designated on it, the proposed structure is to serve as an accessory structure without plumbing fixtures for the use of the occupants of the adjacent property at the aforementioned address, which has an approved percolation certification plan on file with this department. Also, include a statement of an understanding that the property known as 'Parcel C' is considered non-buildable, and that no dwelling structures may be built upon it.

Once a letter containing the requested items is received in this office, the permit may be approved, contingent upon the approval of the variance from Howard County Code Section 3.805.

Upon receipt of this letter, you may respond in writing to the above address, or contact me directly at (410) 313-2775.

Respectfully,

A handwritten signature in black ink, appearing to read "Gabriel A. Creighton". The signature is stylized and cursive.

Gabriel A. Creighton, R.S.  
Development Coordination Section  
Well and Septic Program

GAC/gac  
cc: File



HOWARD COUNTY  
PERMIT APPLICATION

PERMIT NUMBER

B07004985

Building Address 13998<sup>RD 25</sup> Monticello Drive  
Cooksville Maryland 21723

Property Owner's Name Leroy & Michelle Hewitt  
Address 13996 Monticello Drive

Suite/Apt. #: \_\_\_\_\_ SDP/WP/Petition #: \_\_\_\_\_

Census Tract 604002 Subdivision Hackman # 12202

City Cooksville State MD Zip Code 21723

Section PA 2 Area \_\_\_\_\_ Lot \_\_\_\_\_

Home Phone 410-439-0504 Work Phone 410-984-5639

Tax Map 9 Parcel 314 Grid 19

Applicant's Name & Mailing Address, (if other than stated hereon):

Zoning RC Map Coordinates 4314 Lot size \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Existing Use SFD - Auxiliary Structure

Contractor Company owner

Proposed Use Auxiliary Structure - SFD

Contact Person \_\_\_\_\_

Estimated Construction Cost \$80,000

Description of Work Build auxiliary structure to match home  
40' x 50' store locker, lawn  
equipment

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

License No. \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Occupant or Tenant N/A

Engineer or Architect Company owner

Contact Name \_\_\_\_\_

Contact Person \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: <u>22'6"</u>	Water Supply: _____ Public _____ Private _____
No. of stories: <u>1 + base</u>	Sewage Disposal: _____ Public _____ Private _____
Gross area, sq. ft. per floor: <u>2,150</u>	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: <u>N/A</u>	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Construction type: _____ Reinforced Concrete _____ Structural Steel _____ <input checked="" type="checkbox"/> Masonry _____ <input checked="" type="checkbox"/> Wood Frame _____ State Certified Modular _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
	Sprinkler system: <u>N/A</u> <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: _____ Public _____ Private <u>N/A</u>
1st floor: Depth <u>40'</u> Width <u>50'</u>	Sewage Disposal: _____ Public _____ Private <u>N/A</u>
2nd floor: _____	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Basement: <u>40'</u> <u>50'</u>	Gas Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/>	Heating System: _____ Electric <input checked="" type="checkbox"/> Oil <input type="checkbox"/>
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Natural Gas <input type="checkbox"/>
No. of Bedrooms <u>NA</u>	Propane Gas <input checked="" type="checkbox"/>
Height: _____	Sprinkler system: <u>N/A</u> <input checked="" type="checkbox"/>
Multi-family dwellings: _____	NFPA #13D _____
No. of efficiency units: _____	NFPA #13R _____
No. of 1 BR units: <u>N/A</u>	Other: _____
No. of 2 BR units: _____	
No. of 3 BR units: _____	
Other Structure: <u>Auxiliary Str.</u>	
Dimensions: <u>50' x 40'</u>	
Footings: <u>Engineered 16" dia</u>	
Roof Height: <u>22'6"</u>	
State Certified Modular _____	
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 HERETO; (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.

[Signature]  
Applicant's Signature

Leroy Hewitt  
Print Name

\_\_\_\_\_  
Title/Company

10/25/07 12/28/07  
Date

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**  
\*\* PLEASE WRITE NEATLY AND LEGIBLY. \*\*

FOR OFFICE USE ONLY

AGENCY	DATE	SIGNATURE/ APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#
Land Development DPZ			Front _____	Filing fee \$ _____
State Highway			Rear _____	Permit fee \$ _____
Building Official			Side _____	Excess tax \$ _____
Dist. Engineering DPZ			Side St. _____	Add'l per. fee \$ _____
Health <u>1/28/08</u>	<u>[Signature]</u>		All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
Fire Protection			Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>			Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Lot Coverage for New Town Zone _____	Check \$ _____
ONE STOP SHOP: <input type="checkbox"/>			ADP/Red-line approval date _____	Valuation \$ _____
Distribution of Copies: _____	White: Building Official	Green: LDD, DPZ		Accepted by _____
Yellow: DED, DPZ				
Pink: Health				
Gold: SHA				

3PK

Building Address: 1398 Marticella Drive  
Cooksville, MD 21723

Suite/Apt. #: \_\_\_\_\_ SDP/WP/Petition #: F-015-1523

Census Tract: 10000 Subdivision: Hinless Manor

Section: 2 Area: \_\_\_\_\_ Lot: 26 Preservation: \_\_\_\_\_

Map: 9 Parcel: 9.346 Grid: A "C" 10.533

Zoning: R1D-D Map Coordinates: 4612 Lot size: 1.746 acres

Property Owner's Name: Leary H. Hewitt, Jr.

Address: 4405 Sandstone Drive

City: Eldersburg State: MD Zip Code: 21784

Home Phone: 410-781-6052 Work Phone: 410-781-4273

Applicant's Name & Mailing Address, (if other than stated hereon): \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Existing Use: Preservation Parcel / Farmland

Proposed Use: same with equipment storage building

Estimated Construction Cost: \$ 100,000

Description of Work: Build a support 2 story storage building to maintain the grounds agricultural building

Contractor Company: Built By Homeowner

Contact Person: Leary Hewitt

Address: 4405 Sandstone Drive

City: Eldersburg State: MD Zip Code: 21784

License No.: \_\_\_\_\_ Phone: 410-781-6052 Fax: 410-549-2859

Occupant or Tenant: N/A OWNER

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Engineer or Architect Company: Engineered By Homeowner

Contact Person: Leary Hewitt

Address: 4405 Sandstone Drive

City: Eldersburg State: MD Zip Code: 21784

Phone: 410-781-6052 Fax: 410-549-2859

**BUILDING DESCRIPTION - COMMERCIAL**

**BUILDING DESCRIPTION - RESIDENTIAL**

Building Characteristics	Utilities
Height: _____	Water Supply: _____ Public _____ Private _____
No. of stories: _____	Sewage Disposal: _____ Public _____ Private _____
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ State Certified Modular _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
	Sprinkler system: <u>N/A</u> <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: _____ Public _____ Private <u>None</u>
1st floor: Depth <u>30' 4"</u> Width <u>60' 4"</u>	Sewage Disposal: _____ Public _____ Private <u>None</u>
2nd floor: Depth <u>20' 4"</u> Width <u>60' 4"</u>	Electric: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Basement: <u>N/A</u>	Gas: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/>	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/>
Crawl space <input type="checkbox"/> Slab on Grade <input checked="" type="checkbox"/>	Natural Gas <input type="checkbox"/>
No. of Bedrooms: <u>N/A</u>	Propane Gas <input checked="" type="checkbox"/>
Multi-family dwellings: _____	Sprinkler system: <u>N/A</u> <input type="checkbox"/>
No. of efficiency units: _____	NFPA #13D _____
No. of 1 BR units: _____	NFPA #13R _____
No. of 2 BR units: _____	Other: _____
No. of 3 BR units: _____	
Other Structure: _____	
Dimensions: _____	
Footings: _____	
Roof: _____	
State Certified Modular _____	
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 THEREON; (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 PURPOSES OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature: [Signature]

Title/Company: \_\_\_\_\_

Print Name: Leary H. Hewitt, Jr.

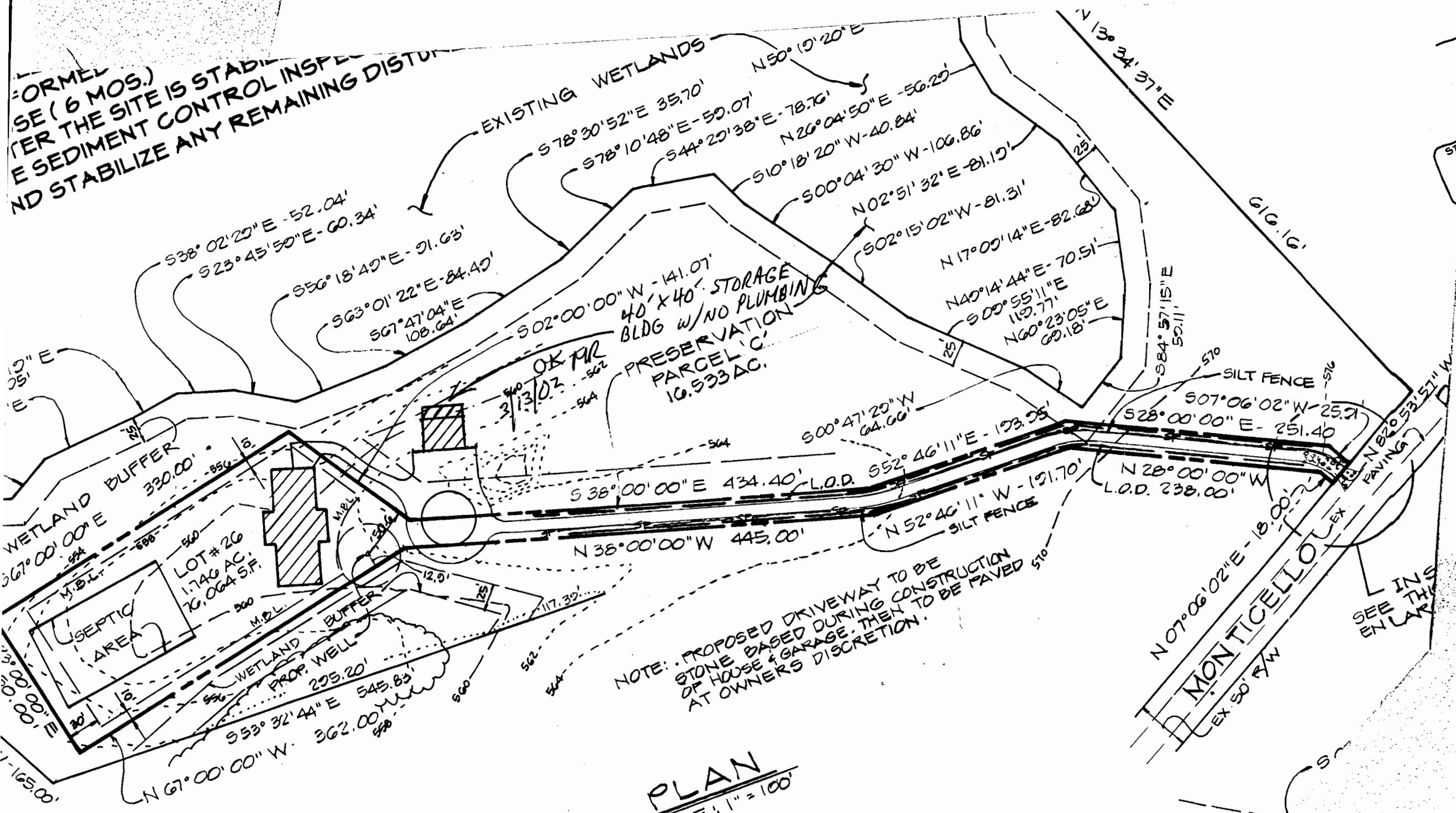
Date: 02/14/02 23 January 2002

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	<u>3/13/02</u>	<u>Mark Rafter</u>
Health		
Fire Protection		
Is Sediment Control approval required prior to issuance?		
YES <input type="checkbox"/> NO <input type="checkbox"/>		
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>		
ONE STOP SHOP: <input type="checkbox"/>		

DPZ SETBACK INFORMATION	PROPERTY ID: <u>79606</u>
Front: _____	Filing fee: \$ <u>100</u>
Rear: _____	Permit fee: \$ _____
Side: _____	Excise tax: \$ _____
Side St.: _____	Sub-total paid: \$ _____
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	Add'l permit fee: \$ _____
Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES: \$ _____
Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due: \$ _____
Lot Coverage for New Town Zone _____	Check: \$ <u>1163</u>
SDP/Red-line approval date _____	Validation: \$ <u>1163</u>
Accepted by: <u>[Signature]</u>	

FORMER  
 SE (6 MOS.)  
 FOR THE SITE IS STABIL INSPE  
 E SEDIMENT CONTROL INSP  
 ND STABILIZE ANY REMAINING DISTUR



NOTE: PROPOSED DRIVEWAY TO BE  
 STONE BASED DURING CONSTRUCTION  
 OF HOUSE & GARAGE. THEN TO BE PAVED  
 AT OWNERS DISCRETION.

**PLAN**  
 SCALE: 1" = 100'

SEE IN  
 ENCL