

Real Property Data Search (w2)

Search Result for HOWARD COUNTY

View Map		View GroundRent Redemption				View GroundRent Registration				
Tax Exempt:		Special Tax Recapture:								
Exempt Class:		NONE								
Account Identifier:		District - 05 Account Number - 361737								
Owner Information										
Owner Name:		TAKKAR RAVINDER TAKKAR SONIA			Use:		RESIDENTIAL			
Mailing Address:		11821 SNOW PATCH WAY COLUMBIA MD 21044-			Principal Residence:		NO			
					Deed Reference:		/17389/ 00237			
Location & Structure Information										
Premises Address:		13601 BRIGHTON DAM RD CLARKSVILLE 21029-0000			Legal Description:		PAR A 34.0416 A 13601 BRIGHTON DAM RD SPRINGDALE ESTATES			
Map:	Grid:	Parcel:	Sub District:	Subdivision:	Section:	Block:	Lot:	Assessment Year:	Plat No:	12383
0034	0014	0423		0000			PAR A	2017	Plat Ref:	
Special Tax Areas:					Town:		NONE			
					Ad Valorem:		100			
					Tax Class:					
Primary Structure Built		Above Grade Living Area		Finished Basement Area		Property Land Area		County Use		
						34.0400 AC				
Stories	Basement	Type	Exterior	Full/Half Bath	Garage	Last Major Renovation				
Value Information										
		Base Value		Value		Phase-in Assessments				
				As of		As of		As of		
				01/01/2017		07/01/2018		07/01/2019		
Land:		425,600		425,600						
Improvements		58,100		58,100						
Total:		483,700		483,700		483,700		483,700		
Preferential Land:		0						0		
Transfer Information										
Seller: SIMPSON MILL HOLDING LLC				Date: 01/17/2017		Price: \$1,194,260				
Type: ARMS LENGTH IMPROVED				Deed1: /17389/ 00237		Deed2:				
Seller: THOMPSON DALE H				Date: 12/27/2011		Price: \$150,000				
Type: NON-ARMS LENGTH OTHER				Deed1: /13675/ 00345		Deed2:				
Seller: HIGHLAND DEVELOPMENT				Date: 10/22/1998		Price: \$300,000				
Type: ARMS LENGTH VACANT				Deed1: /04475/ 00397		Deed2:				
Exemption Information										
Partial Exempt Assessments:		Class		07/01/2018		07/01/2019				
County:		000		0.00						
State:		000		0.00						
Municipal:		000		0.00 0.00		0.00 0.00				
Tax Exempt:		Special Tax Recapture:								
Exempt Class:		NONE								
Homestead Application Information										
Homestead Application Status: No Application										
Homeowners' Tax Credit Application Information										

APPLICATION

PERCOLATION TESTING

A 49861K

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

DISTRICT _____

DATE _____

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER _____

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Springdale LOT NO. Pres Parcel A

ROAD AND DESCRIPTION _____

TAX MAP 34 PARCEL # 423

SIZE OF LOT _____ TYPE BLDG. _____
(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

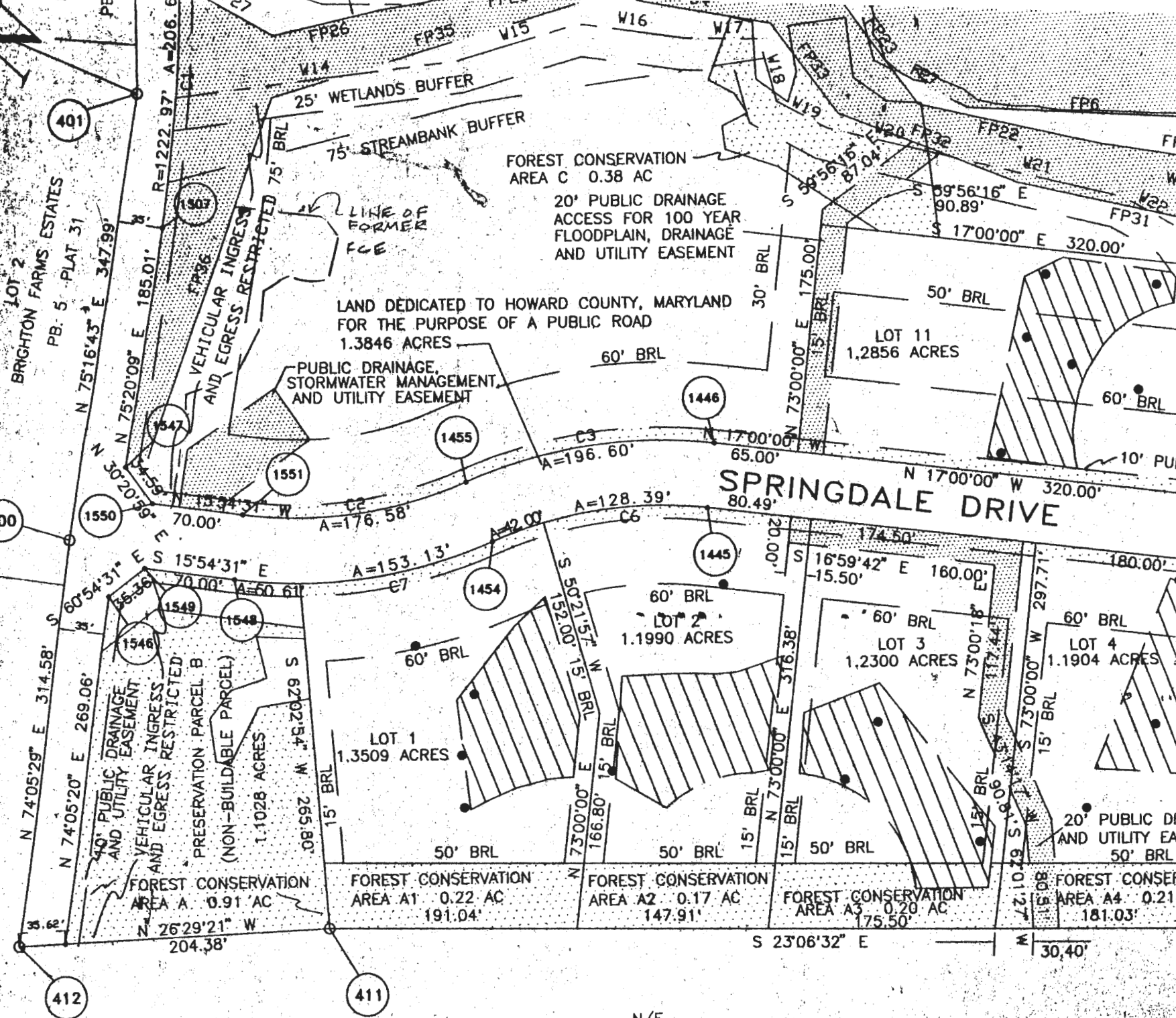
REASONS FOR REJECTION OR HOLDING SANDY PERCS, HOLD FOR PLAT MR 4/13/85

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

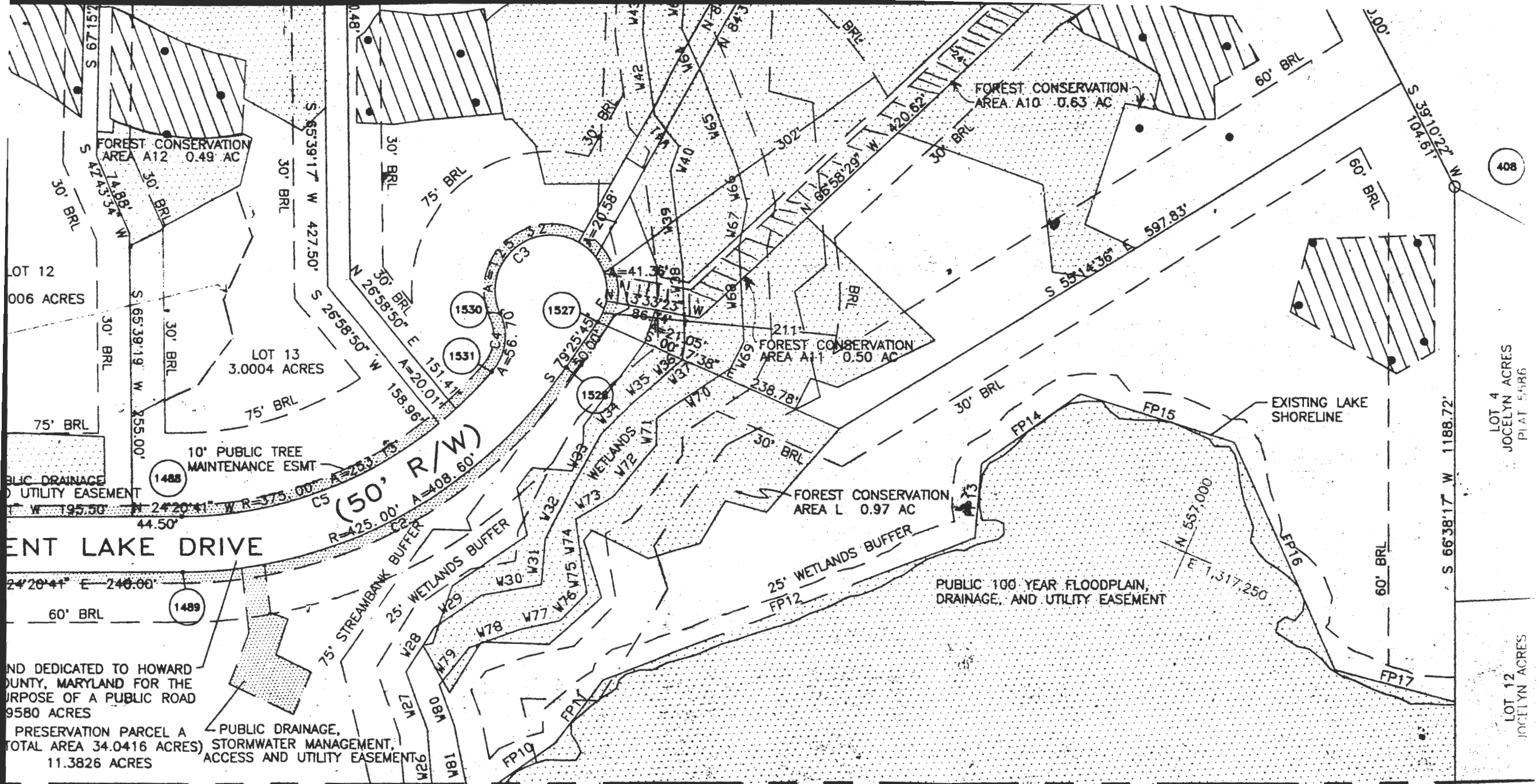
BRIGHTON DAM ROAD (MAJOR COLLECTOR)



TOTALS

35.4051 AC.
1.1028 AC.
11.5902 AC.

N/F
K. B. CAIN
994/374



MATCHLINE SEE SHEET 1

OWNER'S CERTIFICATE
 Owners of lot 13 and Highland Development Corporation, by
 signing property shown and described hereon, hereby adopt this

SURVEYOR'S CERTIFICATE
 I hereby certify that the final plat shown hereon is correct,
 that it is a subdivision of all of the land conveyed by Polly D.

RECORDED AMONG THE LAND RECORDS OF HOWARD COUNTY, MARYLAND ON SEPTEMBER 25, 1977 **AS PLAT NUMBER** 12383

APPLICATION

HOWARD COUNTY

PERMIT APPLICATION

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

SERIAL NUMBER

64465

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

13510 Silver Lake Drive
Highland MD 20777

GRADING/SEDIMENT CONTROL YES NO

SDP #

DESCRIPTION OF WORK AUTHORIZED

Continuing to 13' x 5' ± entrance well

LOT NO.	PARCEL NO.	SEC.	AREA	BLOCK NO.	LIBER	FOLIO
A	6660 NA	NA	NA	14		

SUB DIVISION	ZONE	ZONE MAP	ELEC. DIST.	CENSUS TR.
Serviceable	RR	34	5th	605101

OWNER NAME AND ADDRESS
Highland Dev. Corp
29 Bix 220
Clarksville MD 21029

PHONE NO.
531-5539

OCCUPANT'S NAME AND ADDRESS
N/A

PHONE NO.

ARCHITECT OR ENGINEER'S NAME AND ADDRESS
Bob Thompson Bldg
18445 Old Columbia Rd
Columbia MD 21046

PHONE NO.
995-6736

CONTRACTOR'S NAME AND ADDRESS
Bob Thompson Bldg
18445 Old Columbia Rd
Columbia MD 21046

PHONE NO.
995-6736

EXISTING USE
Vacant lot

PROPOSED USE
Entrance walls

EST. CONSTRUCTION COST
1,000.00

LICENSE NUMBER

PERMIT FEE

SIZE OF BLDG.	FRONT	DEPTH	HEIGHT

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

FOOTINGS	FOUNDATION	S. WALLS
Concrete 8x29	Block	

UTILITIES			
WATER/WELL	SEWER/SEPTIC	GAS	ELECTRICITY

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.

Bob Thompson
SIGNATURE
TITLE
DATE 4/5/96

FOR OFFICE USE ONLY

DISTANCE 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 #

FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING		
SHA		
SEDIMENT/GRADING		
BUILDING OFFICIAL		
WATER & SEWER		
HEALTH/SEPTIC		
FIRE PROTECTION		
STORM WATER MGMT		

Check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

CAUTION

To begin construction before a permit placard has been issued and displayed on the job is a violation of the law.

Use and occupancy permit must be applied for two weeks before it will be issued.

IMPORTANT: PLEASE SHOW ZIP CODES AND AREA CODES WHEREVER REQUIRED

APPROVED DATE

LP-69-59

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

C1 4338

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE TYPE

THIS REPORT MUST BE SUBMITTED AFTER WELL IS COMPLETED. COUNTY NUMBER A 49861-K

ST/CO USE ONLY DATE Received MM DD YY 8 13

DATE WELL COMPLETED MM DD YY 8 18 99

Depth of Well 22 320 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" H094-1901

OWNER Dale Thompson Bldrs STREET OR RFD Springdale Dr TOWN Clarksville SUBDIVISION SPRINGDALE SECTION LOT P.P.A

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entries for Sand and Gray Granite + mica.

GROUTING RECORD form with fields for YES/NO, TYPE OF GROUTING MATERIAL (CEMENT, BENTONITE CLAY), NO. OF BAGS, NO. OF POUNDS, GALLONS OF WATER, DEPTH OF GROUT SEAL.

CASING RECORD form with fields for casing types (STEEL, CONCRETE, PLASTIC, OTHER), MAIN CASING TYPE, Nominal diameter, Total depth.

OTHER CASING (if used) form with fields for diameter, depth.

SCREEN RECORD form with fields for screen type (STEEL, BRASS, BRONZE, PLASTIC, OPEN HOLE, OTHER), insert appropriate code below.

NUMBER OF UNSUCCESSFUL WELLS: 0 WELL HYDROFRACTURED YES NO

CIRCLE APPROPRIATE LETTER 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 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT...

DRILLERS LIC. NO. 1 M 5D027 DRILLERS SIGNATURE Joseph E. Mays LIC. NO. 1 M 5D027

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

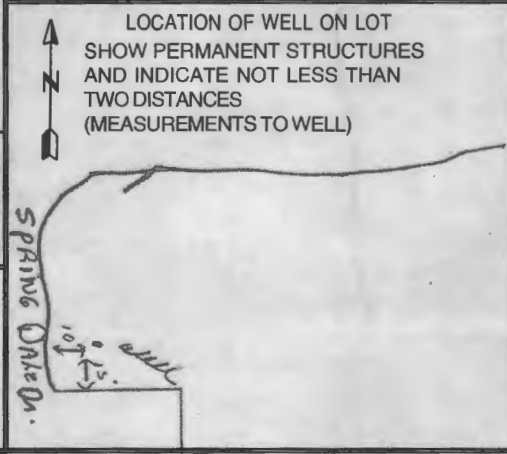
DEPTH (nearest ft.) table with rows for casing height and slot size.

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q 70 72 74 75 76 TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST form with fields for HOURS PUMPED, PUMPING RATE, METHOD USED TO MEASURE PUMPING RATE, WATER LEVEL, TYPE OF PUMP USED.

PUMP INSTALLED form with fields for DRILLER INSTALLED PUMP, TYPE OF PUMP INSTALLED, CAPACITY, PUMP HORSE POWER, PUMP COLUMN LENGTH, CASING HEIGHT.



B 1 3626

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL please print or type

STATE PERMIT NUMBER

HO-94-1901 fill in this form completely

Date Received (APA)

09 08 98

OWNER INFORMATION

Thompson Dale 10005 Old Columbia Rd. Columbia Md. 21046

B 3 LOCATION OF WELL

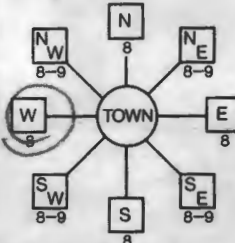
Howard Springdale Estates Clarksville

DRILLER INFORMATION

Joseph L. Mayne M S D 021 5512 Ridge Rd. Mt. Airy 21781

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Springdale Dr. NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



DISTANCE FROM ROAD ENTER FT OR MI 30 FT

TAX MAP: 34 BLK: 14 PARCEL 423

B 2 WELL INFORMATION

APPROX. PUMPING RATE 500 GAL. PER MIN. AVERAGE DAILY QUANTITY NEEDED 500 GAL. PER DAY

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard A49861-K COUNTY NAME COUNTY NO. STATE SIGNATURE DATE ISSUED 10/22/98 Mark E. Riffin 10/22/99

- USE FOR WATER (CIRCLE APPROPRIATE BOX) D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE APPROVAL) T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

APPROXIMATE DEPTH OF WELL 300 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) AIR-ROTARY JETTED AIR-PERCussion ROTARY (Hydraulic Rotary) CABLE REVERSE-ROTARY DRIVE-POINT other

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

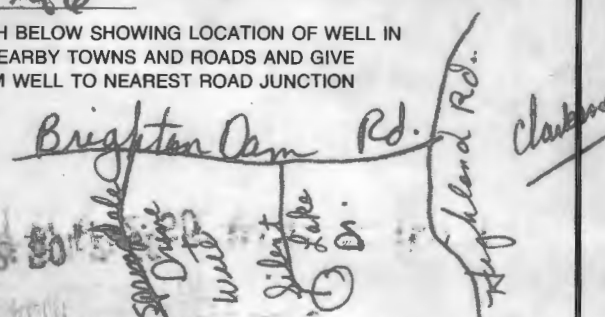
- 1. well 2. 3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E 8004 N 4986

000 000

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION



REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

- N THIS WELL WILL NOT REPLACE AN EXISTING WELL Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS D THIS WELL WILL DEEPEMED AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41

Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROX. PERMIT NUMBER FORCE NR INITIALS IN BOX PERMIT No. HO-94-1901

SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

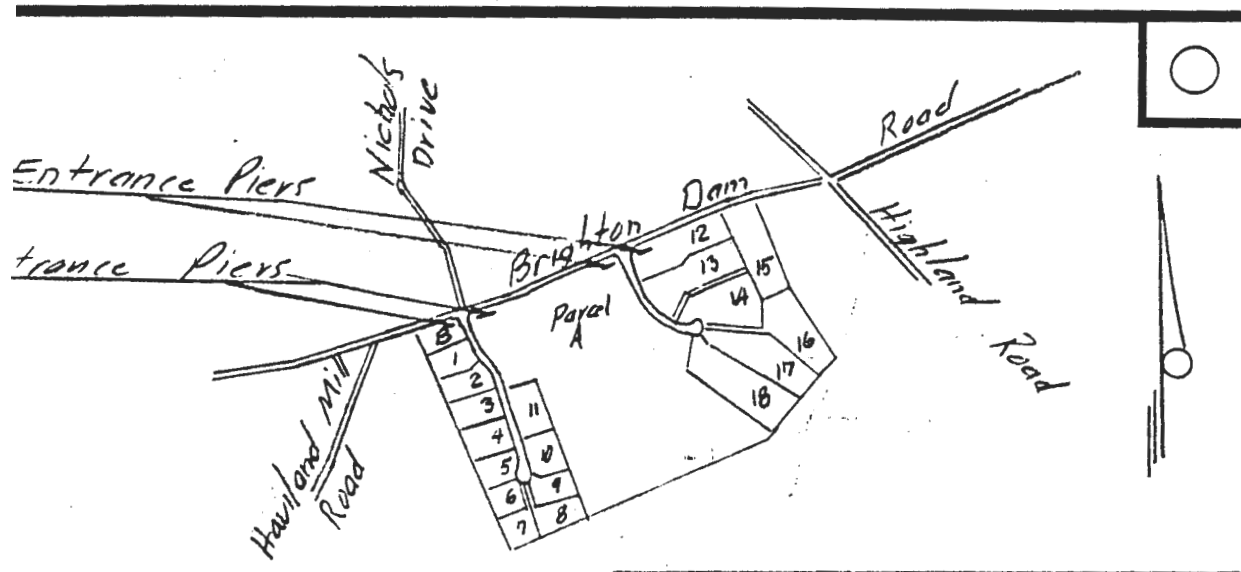
Well Permit No. HO - 94-1901
 Location of property (road) Springdale Dr.
 Subdivision Springdale Lot Block A Block _____ Plat _____ Sec. _____
 Well Driller Joseph Mayne Owner Dale Thompson
 Depth of well 320'
 Distance of measuring point (M.P.) above ground 1'
 Static water level (S.W.L.) below M.P. 21'

I. High rate pumping -- reservoir drawdown

Time pump started 10:35 Pumping rate 20gpm
 Total time 30min to reach pumping water level 232 ft. below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes

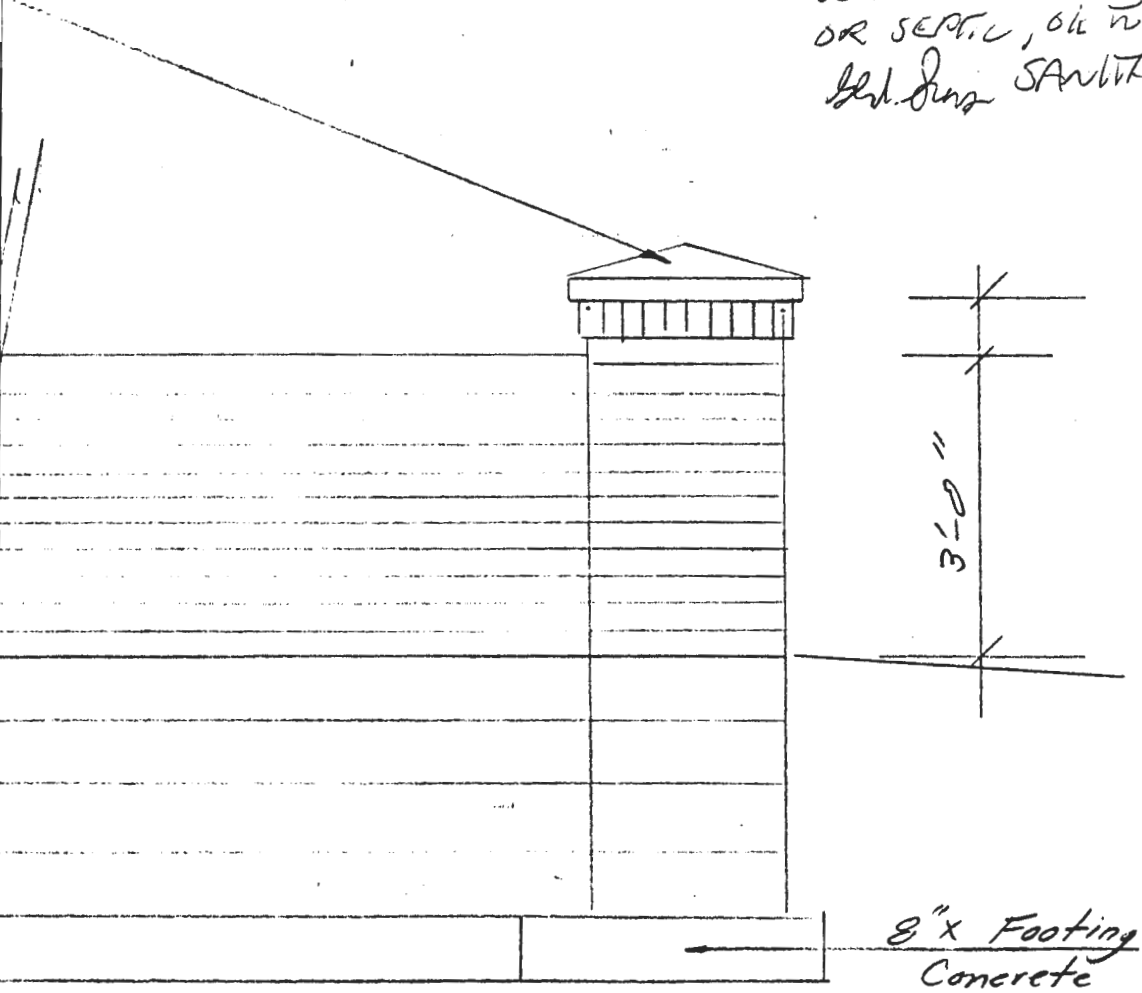
TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE time to fill 5/ gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
10:20	131'	3 sec	N/A	20gpm
10:35	232	3		20
10:50	229	15		4
11:05	229	15		4
11:20	229	15		4
11:35	229	15		4
11:50	229	15		4
12:05	229	15		4
12:20	229	15		4
12:35	229	15		4
12:50	228	15		4
1:05	228	15		4
1:20	228	15		4
1:35	228	15		4
				4



VICINITY MAP

ast Stone Caps

4/23/96
 NO IMPACT TO WELL
 OR SEPTIC, OK TO PROCEED
 Ed. Jones SANITARIAN



410-995-6736
 301-596-7280
 Fax 410-381-8747

Pres. Par A

S.S. Before BP

due to need for grading
along expected access

well loc. for PPA to be determined
before S.S. inst. due to
poss. of well location in
same vicinity land depicted
well loc on p.c. is agreed
by D.T. & HD to be inappropriate

\$:

MR/CW 9/19/97