

SP-15-012

Real Property Data Search (w3)

Guide to searching the database

Search Result for HOWARD COUNTY

View Map		View GroundRent Redemption			View GroundRent Registration				
Account Identifier:		District - 01 Account Number - 287583							
Owner Information									
Owner Name:		NELSON EVA J L/E			Use:		RESIDENTIAL		
Mailing Address:		4472 ILCHESTER RD ELLCOTT CITY MD 21043-6836			Principal Residence:		YES		
					Deed Reference:		/13557/ 00275		
Location & Structure Information									
Premises Address:		4472 ILCHESTER RD ELLCOTT CITY 21043-0000			Legal Description:		PAR 3 8.19 A 4472 ILCHESTER RD ELLCOTT CITY		
Map:	Grid:	Parcel:	Sub District:	Subdivision:	Section:	Block:	Lot:	Assessment Year:	Plat No:
0031	0004	0618		0000			PAR 3	2015	Plat Ref:
Special Tax Areas:				Town:		NONE			
				Ad Valorem:		104			
				Tax Class:					
Primary Structure Built		Above Grade Enclosed Area		Finished Basement Area		Property Land Area		County Use	
1866		4,624 SF				8.1900 AC		000000	
Stories	Basement	Type		Exterior	Full/Half Bath	Garage	Last Major Renovation		
2	YES	STANDARD UNIT		FRAME	5 full				
Value Information									
			Base Value	Value	Phase-in Assessments				
				As of	As of		As of		
				01/01/2015	07/01/2015		07/01/2016		
Land:		429,900		418,200					
Improvements		219,100		314,900					
Total:		649,000		733,100		677,033		705,067	
Preferential Land:		0						0	
Transfer Information									
Seller: NELSON JAMES M				Date: 11/04/2011		Price: \$0			
Type: NON-ARMS LENGTH OTHER				Deed1: /13557/ 00275		Deed2:			
Seller:				Date:		Price: \$0			
Type:				Deed1: /05118/ 00060		Deed2:			
Seller:				Date:		Price:			
Type:				Deed1:		Deed2:			
Exemption Information									
Partial Exempt Assessments:		Class			07/01/2015		07/01/2016		
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									

1. This screen allows you to search the Real Property database and display property records.
2. Click [here](#) for a glossary of terms.
3. Deleted accounts can only be selected by Property Account Identifier.

4. The following pages are for information purpose only. The data is not to be used for legal reports or documents. While we have confidence in the accuracy of these records, the Department makes no warranties, expressed or implied, regarding the information.

Google Satellite: 1 House Visible
Base Map: 2 Buildings

- 2 Buildings
- Water & Sewer public Metro District
Contract 14-4921-D
? → 1 well to be abandoned (HO-456 in House)
- Existing Slat Barn to be Removed
- Existing House to be retained
- Putting ~~8~~ 8 lots on the property

PatTrac

10/13/1982 / Well Permit Completed / HO-73-4293 / A 3279

Connect to Public

~~XXXXXX~~

W 6/28/01

S 5/25/01

Long 76.770186

Lat 39.247335

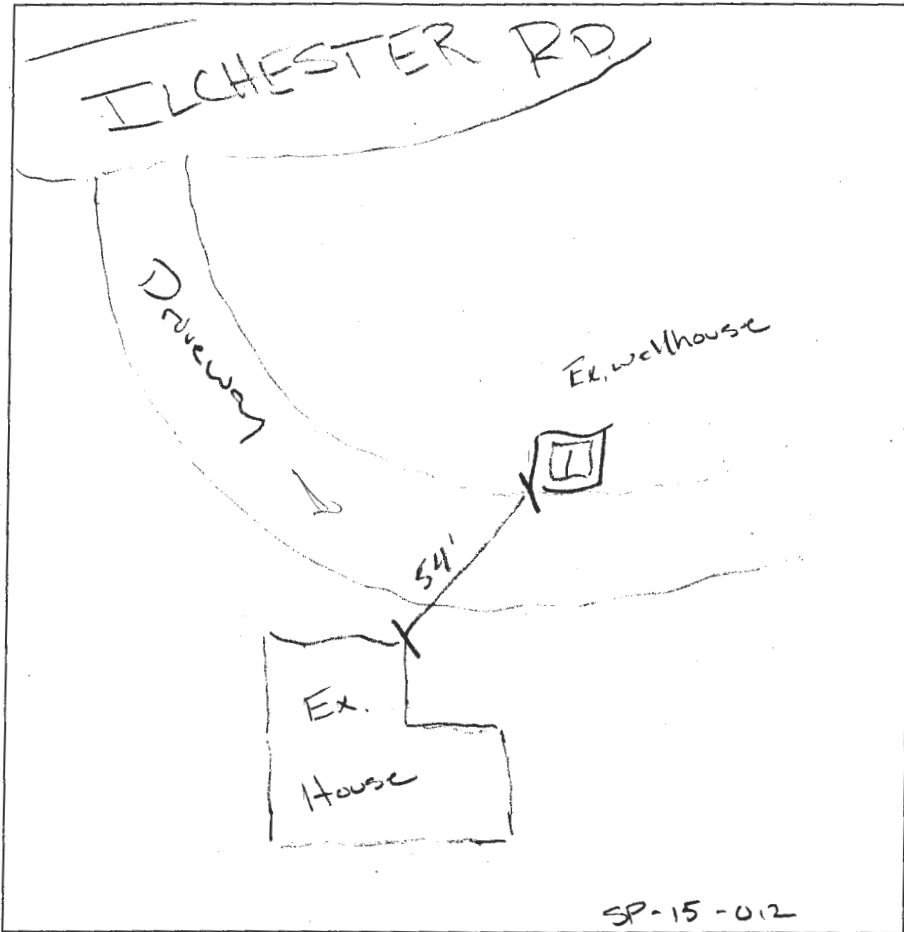
ON 4543 Bonnie Branch

EVA J. NELSON

4472 ILCHESTER

443 253 7535

owner/
Developer



SP-15-012

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	P/F/H

REMARKS Site Visit 8/3/16 (Subdivision) Robert Freeman

SANITARIAN _____ BACKHOE _____ OTHERS _____

TEST HOLES USED IN SDA _____ AVG. PERC TIME _____ SQ. FT/BR _____

TRENCH WIDTH _____ INLET DEPTH _____ MAX. BOT DEPTH _____ EFFECTIVE SW _____



Property ID: 1287583



4472 ILCHESTER ROAD, ELLICOTT CITY



Location/Owner | Details | Alerts | Applications | Water Samples | Activities | Ticker | Attributes | Relationships | Establishments | Documents | Notes | Agency Info

Date	Type	Status	Permit No	Application ID	Applicant	Notes
10/13/1982	Well Permit	Completed	HO734293	3279	COCHRAN, SANDY B.	Data Imported on 11/12/2008

Application Information | Other Address | Activities | Notes

Application Date: 10/13/1982

Application Received: / /

Application Type: Well Permit

Subdivision: ELLICOTT CITY

Name: COCHRAN, SANDY B.

Sanitarian: []

Status: Completed

Completion Date: / /

Approval Status: []

Permit No: HO734293 +

Entered by: []

Show Application Information

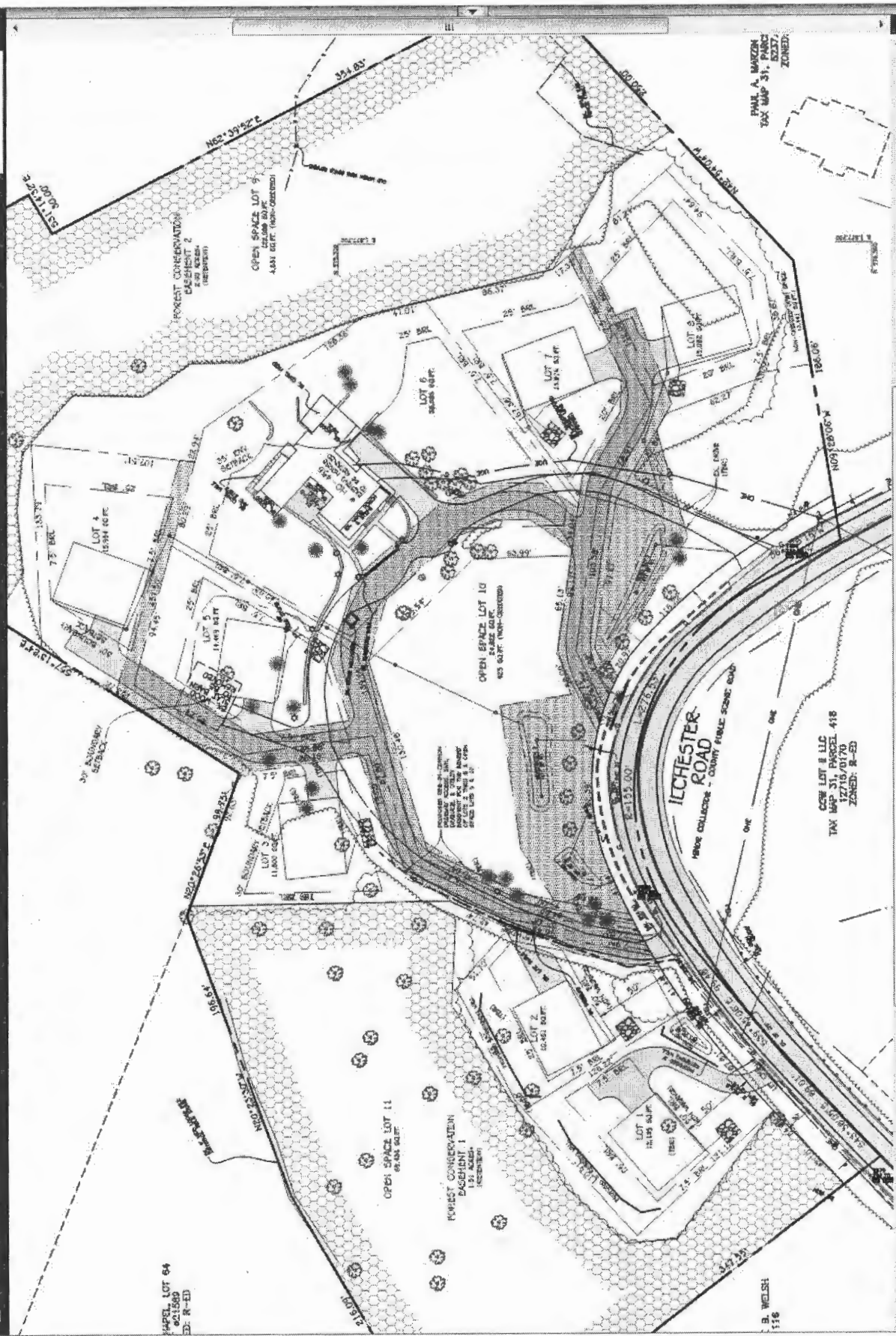
Enter New Activity

Enter Payment Receipt

- Unable to bind on Data Member "Well Abandoned"
- Steel Casing, 6" Diameter, Depth 40'
- Cochran, Sandy B.



□ = wall



Post-it® Fax Note	7671	Date	9/14	# of pages	1
To	KAREN	From	CRAIG WILLIAMS		
Co./Dept.	ARNOLD'S BACKHOE	Co.	HOWARD COUNTY		
Phone #		Phone #			
Fax #		Fax #			



HOWARD COUNTY HEALTH DEPARTMENT

Joyce M. Boyd, M.D., County Health Officer

August 25, 1995

*POSTPONED
KELCE WILL MAKE
APPT TO PRESENT
IMPROVED PLAN;
FOLLOW-UP FIELD VISIT
MAY BE NECESSARY
CW
9/14/95*

Mr. John Keller
2814 Nine Mile Court
Baltimore, Maryland 21228

RE: Percolation Testing
Doris Carter Property
Tax Map: 31 Parcel: 418
Ilchester Road

Dear Mr. Keller:

A percolation test date has been reserved for 10:00 a.m., Wednesday, September 13, 1995.

Testing is authorized under percolation test application A18911, filed in 1973; no additional test fee is required. As discussed with you, an improved test plan is expected prior to commencement of percolation testing.

You will be responsible for having a contractor on-site to excavate test holes at the corners of proposed percolation area.

Please call this office between 8:00 a.m. and 5:00 p.m., Monday through Friday, to confirm your acceptance of this percolation test date.

Thank you for your cooperation in this matter.

Very truly yours,

Craig Williams

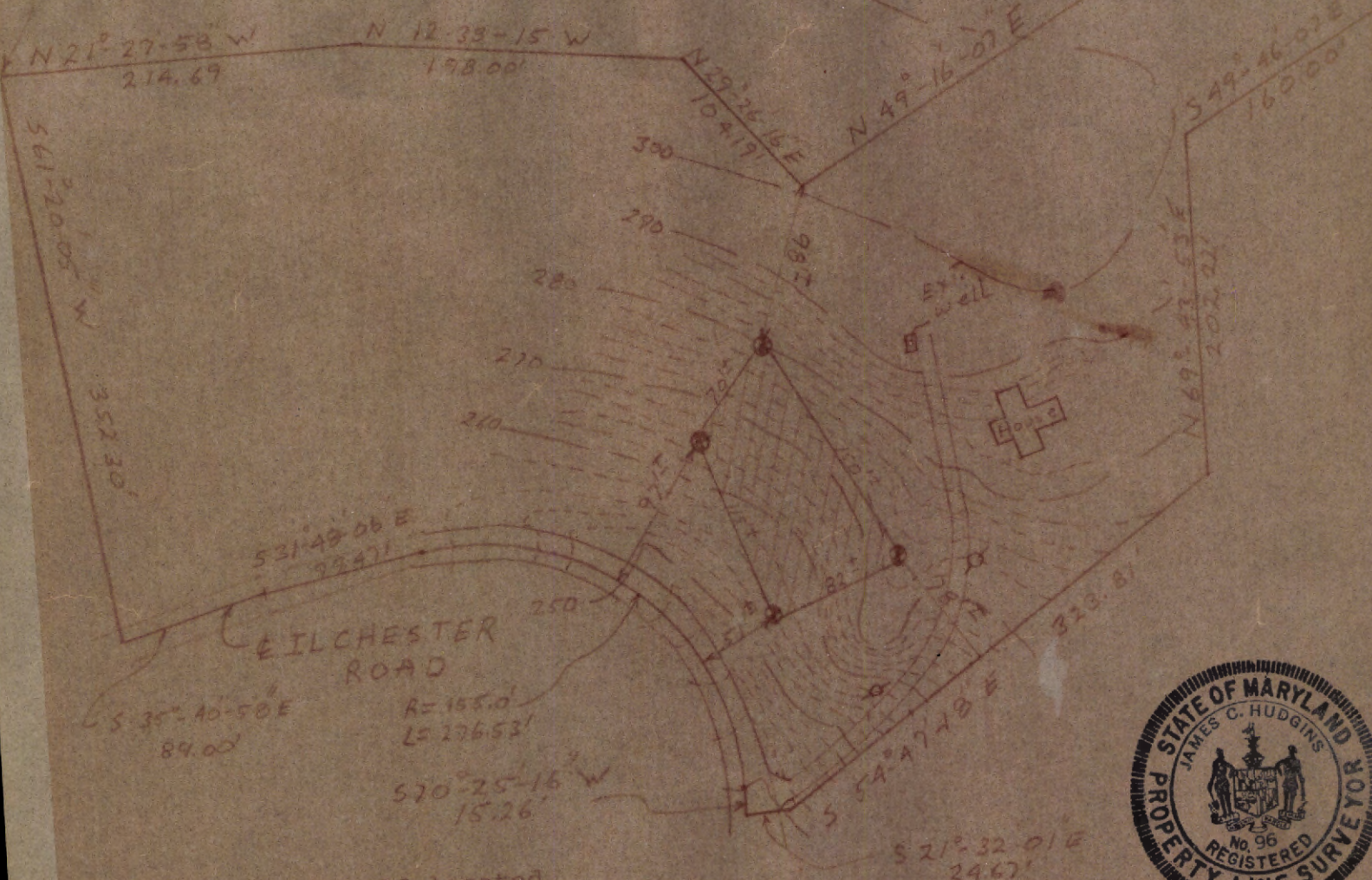
Craig Williams, Program Director
Water and Sewerage Program



CW:jr

cc: Doris Carter
File

*REC'D
8/29/95
CW*

P.O.B.



 = Percs field located
 This designates a private sewage easement as required by Maryland State Department of Health & Mental Hygiene upon which permanent construction is prohibited.

The lot shown hereon complies with the minimum ownership and lot areas as required by the Maryland State Dept. of Health & Mental Hygiene.
 APPROVED: Private Water & Private Sewer

Howard County Health Officer



PERC LOCATION PLAT
 PROPERTY OF
 ZBIGNIEW IGOR DYKE & WIFE

FIRST ELECTION DISTRICT
 HOWARD COUNTY MARYLAND
 SCALE 1" = 100' DATE 11/15/79

J. Carl Hudgins
 J. Carl Hudgins PLS #96

APPLICATION

PERCOLATION TESTING

PREVIOUSLY FILED
AS

A 118911

1973 - AT THAT TIME
NO TESTING OF
OK TO PROCEED WITH
DISTRICT NO ADDITIONAL TEST FEE.
8/24/95 (CW)

DATE 8-24-95

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

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 Donn Carter

ADDRESS 7949 Fairfield Crt PHONE Palm Beach, FL 34683

AGENT OR PROSPECTIVE BUYER John K. Keller

ADDRESS 7814 Nine Mile Ck Baltimore PHONE 410-461-7707

PROPERTY LOCATION: Ilchester Rd Howard County

SUBDIVISION N/A LOT NO. _____

ROAD AND DESCRIPTION Ilchester Rd. Can improved as perge
Each side of Ilchester. Near Bonnie Branch Rd.

TAX MAP 31 PARCEL # 418

SIZE OF LOT 2.96 Ac. TYPE BLDG. NA
(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 _____

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

Recorded

*4-17 holes
\$210,000*

APPLICATION

A 18911

SEWAGE DISPOSAL TESTING

P _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476, ELLICOTT CITY, MARYLAND, 21043
TELEPHONE: 465-8000, EXT. 386

DISTRICT 1

DATE 8/28/73

*TAX MAP 31
PARCEL 418*

*NO TESTS DONE IN 1973
SEE NEW APPLICATION - SAME TEST #
BY KELLEN 8/24/95*

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Doris Carter

ADDRESS 4472 Ilchester Road, Ilchester, Md. PHONE 465-5000 Ext. 353

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. _____

ROAD AND DESCRIPTION Ilchester Road

SIZE OF LOT 2.9 acres TYPE BLDG. 3 or 4

IF NOT SINGLE RESIDENCE DESCRIBE _____
NUMBER OF BEDROOMS (Single Fmly. Dwlg.)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ Doris Carter

APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

APPLICATION

PERCOLATION TESTING

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

PREVIOUSLY FILED
AS A A18911
1973 - AT THAT TIME
NO TESTING
OK TO PROCEED WITH
DISTRICT NO ADDITIONAL TESTS
8/24/95 CW
DATE 8-24-95

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 Doris Carter

ADDRESS 2949 Fairfield Crt Palm Harbor, FL 34683
PHONE _____

AGENT OR PROSPECTIVE BUYER John K. Keller

ADDRESS 2614 Nine Mile Cr Baltimore MD HDBB 410-461-7702
PHONE _____

PROPERTY LOCATION: Elchester Rd Howard County

SUBDIVISION N/A LOT NO. _____

ROAD AND DESCRIPTION Elchester Rd. An improved acreage
East side of Elchester. Near Bonnie Branch Rd.

TAX MAP 31 PARCEL # 418

SIZE OF LOT 2.96 Ac. TYPE BLDG. NA
(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]
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

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

9/13/95
10:00
PLAN N66060

ST. OF MD. DEPT. OF NAT.
RESOURCES
1675/230
115.24A.
P.582

MAP 25-
P.81

MAP 25 - P.86

BALTI

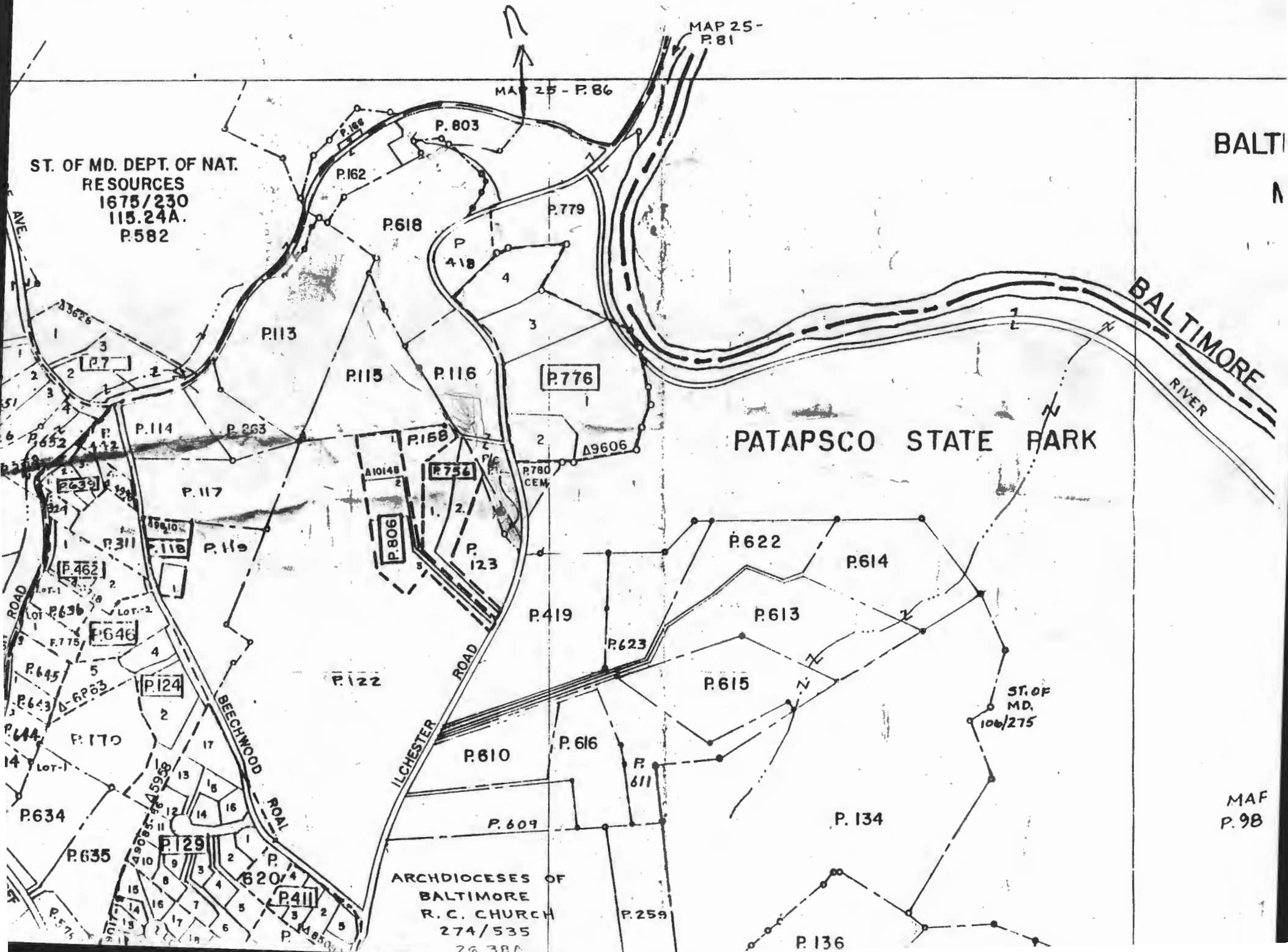
N

BALTIMORE
RIVER

PATAPSCO STATE PARK

ST. OF
MD.
100/275

MAP
P.98



4-12 holes
on 10,000 sq ft
Preliminary

APPLICATION

A 18909

SEWAGE DISPOSAL TESTING

P _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DISTRICT 1
DATE 8/28/73

TAX MAP 31
PARCEL 618

Septic Tanks - 3 bedrooms - 1000 gal
" " - 1250 gal

Dry Well - 270 sq ft absorbent sidewall area per bedroom
to begin below the first 3 1/2 ft of original grade. Max depth permitted
for DW. is 11' below original grade.

Place Dry Well at point 175 ft from center of Ilchester Rd
and 228 from right side as seen when facing from Ilchester Rd.

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

* If more than 1 DW is used they must be 3x the diameter
apart - edge to edge & connected in series -

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE
DISPOSAL SYSTEM.

PROPERTY OWNER Cecilia McDonald

ADDRESS 4472 Ilchester Road, Ilchester, Md. PHONE Doris Carter
465-5000 Ext. 353

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. Parcel 3

ROAD AND DESCRIPTION Ilchester Road

SIZE OF LOT 5.6 acres TYPE BLDG. Existing house
3 or 4

NUMBER OF BEDROOMS
(Single Fmly. Dwllg.)

IF NOT SINGLE RESIDENCE DESCRIBE _____

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC
FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ Doris Carter

APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING Certified pore holes!!

THIS IS NOT A PERMIT

INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	

REMARKS _____

TYPE OF SOIL _____

APPLICATION

A 18909

P _____

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 386

DISTRICT 1

DATE 8/28/73

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Cecilia McDonald

ADDRESS 4472 Ilchester Road, Ilchester, Md. PHONE Doris Carter 465-5000 Ext. 353

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. Parcel 3

ROAD AND DESCRIPTION Ilchester Road

SIZE OF LOT 5.6 acres TYPE BLDG. Existing house 3 or 4

IF NOT SINGLE RESIDENCE DESCRIBE _____
NUMBER OF BEDROOMS (Single Fmly. Dwllg.)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ Doris Carter

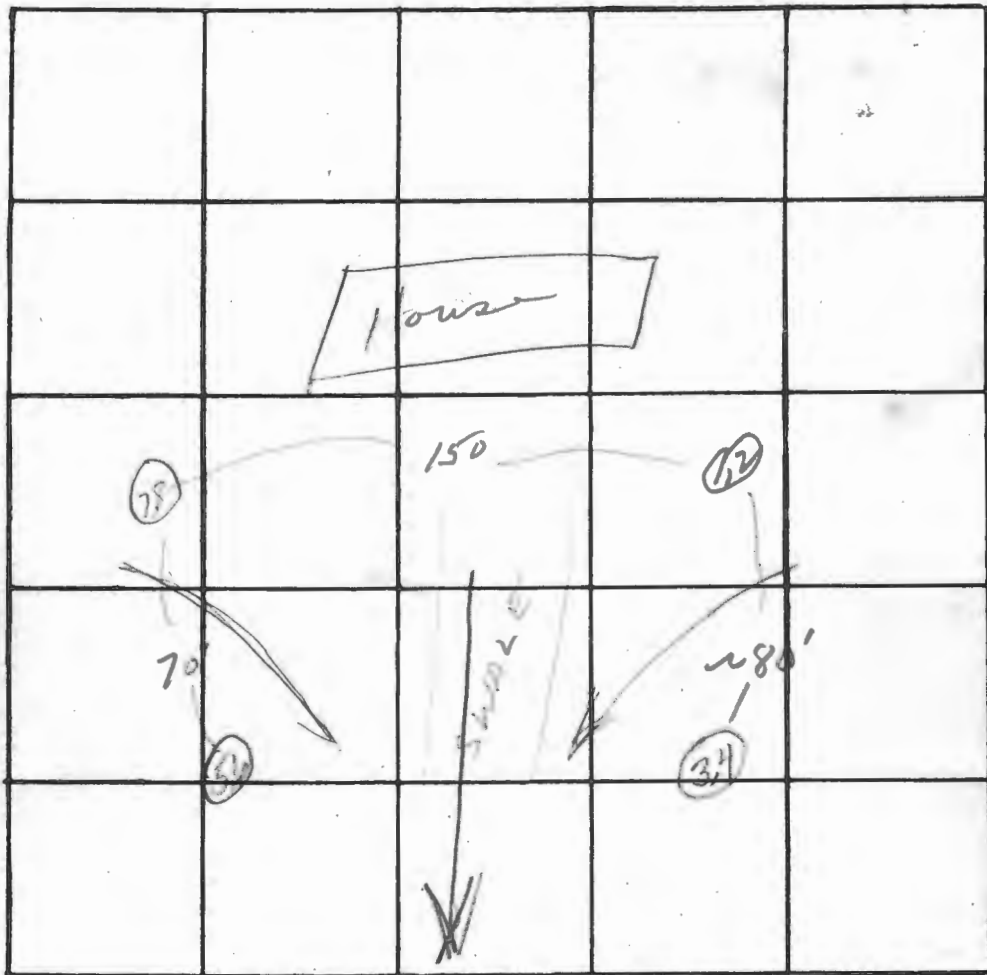
APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

CHESTER RD

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
10/3/73	1	3 1/2'	1:46	2:03	2:03	2:31	28
	2	12'	1:45	2:01	2:01	2:20	19
	3	4'	1:51	1:54	1:54	1:57	3
	4	11'	1:50	2:11	2:11	2:31	20
	5	3'	1:58	2:25	2:25	2:45	20
	6	12'	1:58	2:11	2:11	2:29	18
	7	4'	2:53			3:30	37
	8	11'	2:50	3:00	3:00	3:20	20

21
15.37.2
37.50.50
about 1"
16. 46

REMARKS Up holes were open during 1" rain on 10/2/73
 TYPE OF SOIL S-6 gravelly F

November 28, 1979

Z.I. Dyke
4472 Ilchester Road
Ellicott City, Md. 21043

RE: McDonald Property
Ilchester Road

Dear Sir:

The existing house on the above referenced property passed the standard percolation test and a septic system installation permit can be issued upon request.

Very truly yours,



Fred Frommelt, Director
Water and Sewerage Program

FF:ds

4-12' Loles
10' x 10' 0000 ft.
Treasury

APPLICATION

A 18910
P _____

SEWAGE DISPOSAL TESTING
STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DISTRICT 1
DATE 8/28/73

~~8/2/73~~ 10/3/73
~~9:30~~ 1:30

TAX MAP 31
PARCEL UNKNOWN

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Cecilia McDonald

ADDRESS 4472 Ilchester Rd., Ilchester, Md. PHONE Doris Carter 465-5000 - ext. 353

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. Parcel 4

ROAD AND DESCRIPTION Ilchester Road

SIZE OF LOT 5.00 acres TYPE BLDG. 3 or 4

NUMBER OF BEDROOMS
(Single Fmly. Dwllg.)

IF NOT SINGLE RESIDENCE DESCRIBE _____

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ Doris Carter

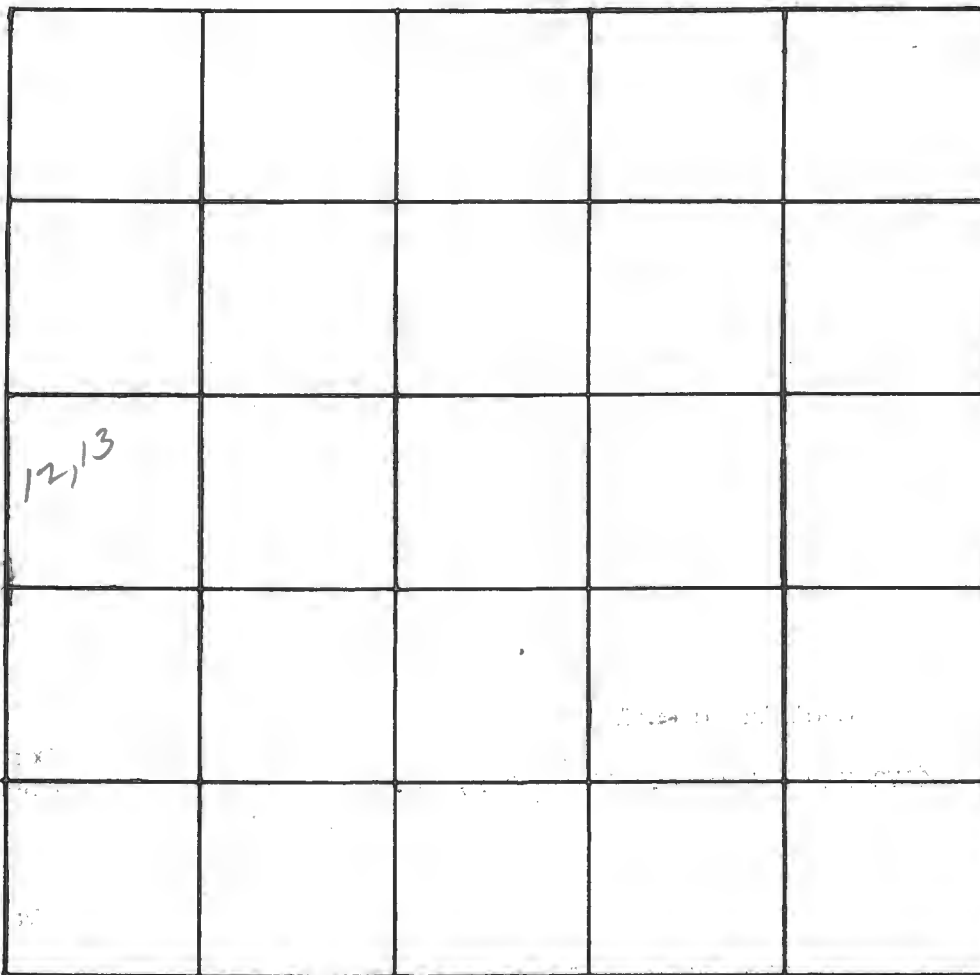
APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

REJECTED BY W/W Z FOR any system DATE 9/27/73
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 8/29/73 Hold for suspension W/W Z
Insufficient perc, spotty ground,

THIS IS NOT A PERMIT



90' between
and 6, 12, 13

INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8/3	8	4	1:30	2:00	2:00	2:20	
	9	10 1/2	1:36	1:45	2:16	2:40	LITTLE PERC
	10	4	1:41	1:45	2:05	2:10	5
	11	11	1:41	1:45	2:21	2:40	NO PERC
	12	4	2:08	2:26	2:26	2:40	14
	13	11 1/2	1:51	1:51	2:31	2:40	NO PERC

REMARKS _____

TYPE OF SOIL _____

APPLICATION

A 18910

SEWAGE DISPOSAL TESTING

P _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DISTRICT 1

DATE 8/28/73

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Cecilia McDonald

ADDRESS 4472 Ilchester Rd., Ilchester, Md. PHONE Doris Carter
465-5000 - ext. 353

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. Parcel 4

ROAD AND DESCRIPTION Ilchester Road

SIZE OF LOT 5.00 acres TYPE BLDG. 3 or 4

NUMBER OF BEDROOMS
(Single Fmly. Dwllg.)

IF NOT SINGLE RESIDENCE DESCRIBE _____

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ Doris Carter

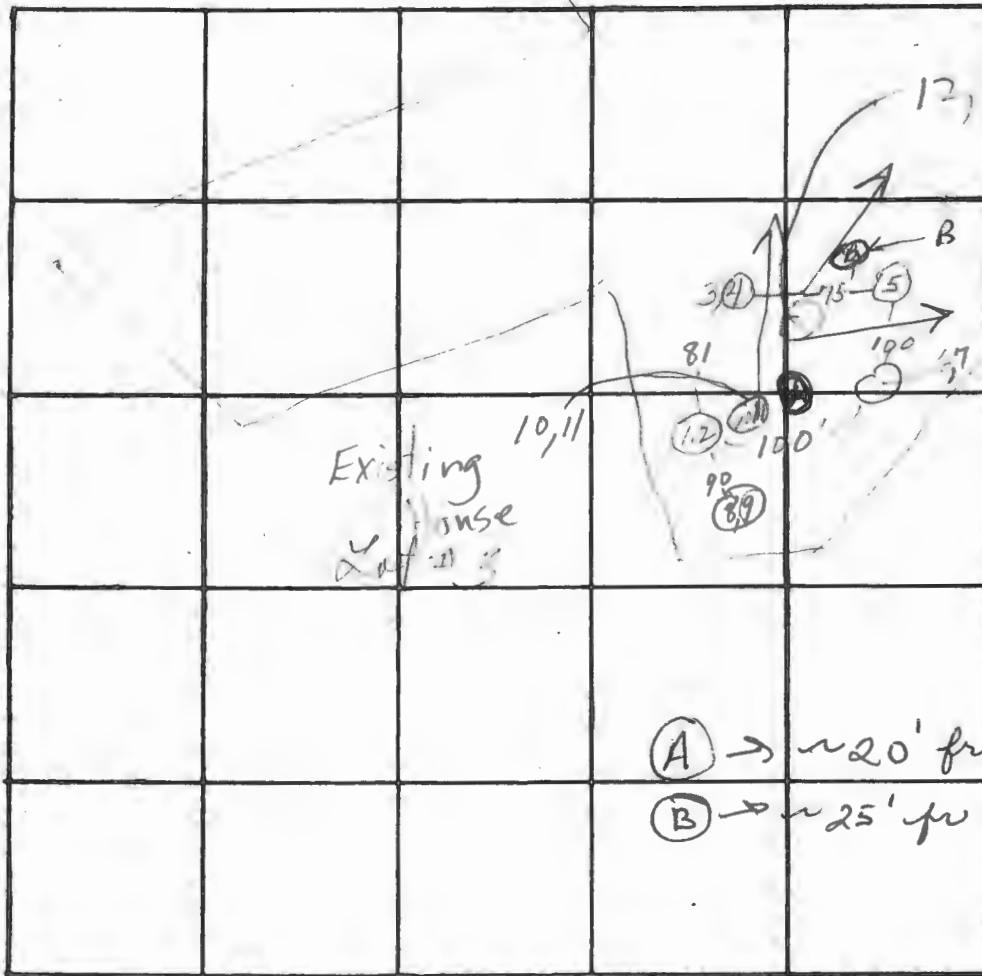
APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



steep slopes

Lot 4

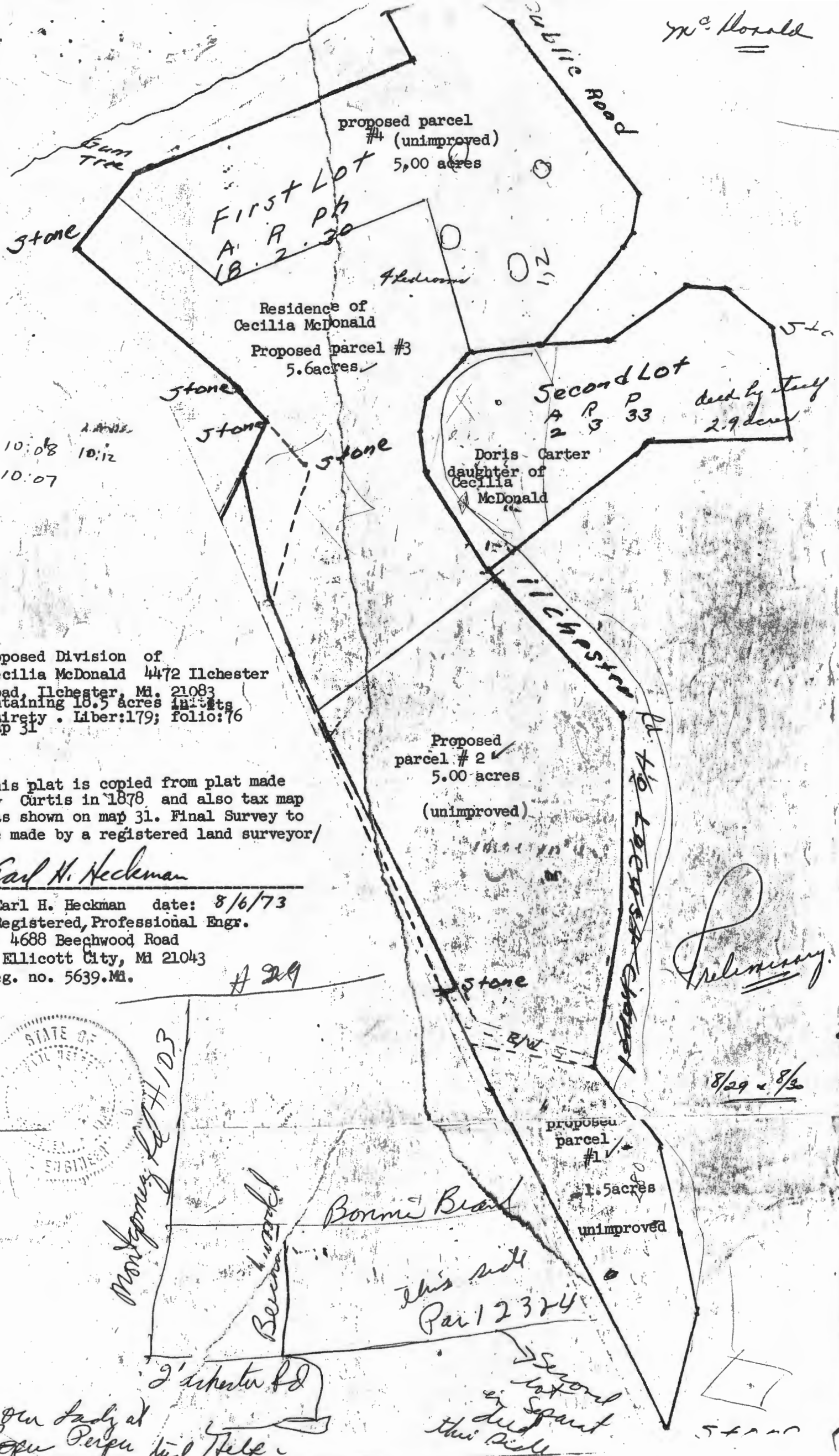
INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8/2/72	1	3 1/2	10:05	10:12	10:12	10:19	5
	2	11	10:07	10:53	"2nd test 1"	"4/6	
	3	3					
	4	10 1/2	10:34	NO	PERC 3.1	11:20	4/6
	5	6 1/2					
	6	3	12:00	12:02	12:02	12:05	3
	7	10	11:5	11:40	11:40	12:04	29
9/27/73	A	4 1/2'	9:48	10:00	10:00	10:24	24
	A-1	9'	9:51	10:10	10:10	10:42	32
	B	4'	10:57	11:06	11:06	11:35	29
	B-1	9'	10:25	10:36	10:36	10:43	7

REMARKS on steep slopes

TYPE OF SOIL Heavy

Mr. McDonald



T 10:08
 B 10:07
 10:12

Proposed Division of
 Cecilia McDonald 4472 Ilchester
 Road, Ilchester, Md. 21083
 Containing 18.5 acres in lots
 entirety. Liber:179; folio:76
 Map 31

This plat is copied from plat made
 by Curtis in 1878 and also tax map
 as shown on map 31. Final Survey to
 be made by a registered land surveyor/

Earl H. Heckman

Earl H. Heckman date: 8/6/73
 Registered, Professional Engr.
 4688 Beechwood Road
 Ellicott City, Md 21043
 Reg. no. 5639.Md.



Montgomery Hill #103

Beverly

Bonnie Blair

this side
 Par 12374

our lady at
 Popu Popu had help

Second lot
 in Spant
 this side

Preliminary

8/29 - 8/30

5+000

**MCDONALD, CECILIA
ILLCHESTER ROAD, PARCEL 1 & 2**

07-23-97 Anna Lucia Porter of Remax inquired about what would have to be done before Lot 1 could be sold as a buildable lot. I called her and left a message to call me.

- Verification of approved septic easement, i.e. percolation testing.
- No fee to be charged.
- As per COMAR 26.04.02.02(a & b), the lot must have at least enough septic area to install an initial system and one replacement.

On phone she was also told the following w/ regards to Parcel 2.

- A perc fee would be necessary & application
- Perc Cert after testing necessary

ALM

Howard County Health Department

To: _____

ANA LUCIA PORTER
RE/MAX - COLUMBIA
(410) 715-3254

From: _____

Date: _____

HD-170

APPLICATION

A 18907

SEWAGE DISPOSAL TESTING

P _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DISTRICT 1

DATE 8/28/73

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Cecilia McDonald

ADDRESS 4472 Ilchester Rd., Ilchester, Md. PHONE Doris Carter 465-5000, Ext. 353

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. Parcel 1

ROAD AND DESCRIPTION Ilchester Road

SIZE OF LOT 1.5 acres TYPE BLDG. 3 or 4

NUMBER OF BEDROOMS
(Single Fmly. Dwllg.)

IF NOT SINGLE RESIDENCE DESCRIBE _____

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ Doris Carter

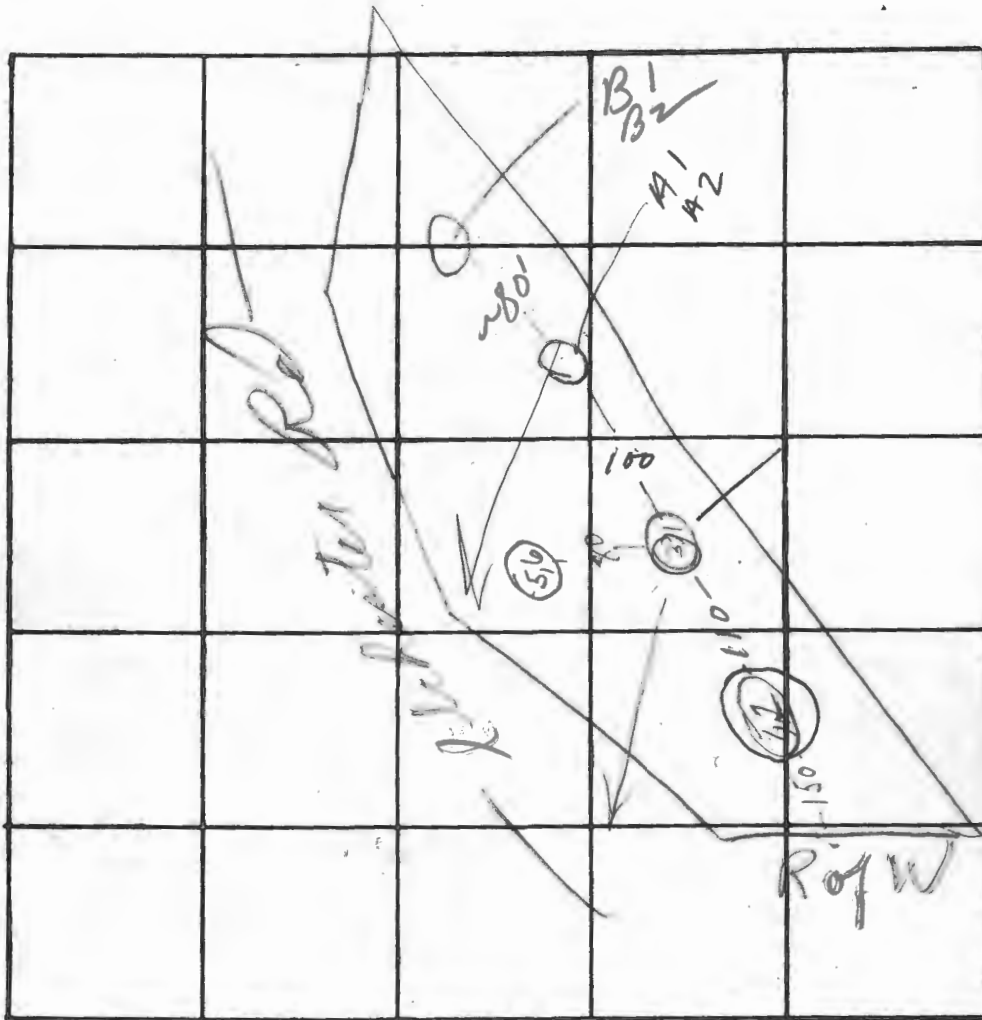
APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
8/30/73	(1)	3 1/2	11:32	(LITTLE PERC)	12:08	36	1/2" PERC	
low	(2)	12	11:25	(NO PERC)	12:08	43	NO PERC	
	(3)	3 1/2 +	11:49	(LITTLE PERC)	12:30	41	1/4" PERC	
	4	12	11:49	12:00	12:00	12:15	15	
	5	4 1/2 +	12:12	12:30	12:30	12:50	20	$\bar{t} = 19 \text{ min}$
	6	11	12:12	12:32	12:32	12:49	17	$\Rightarrow 160 \text{ ft}$
9/27/73	A-1	5'	12:00	12:07	12:07	12:18	11	+20% =32 ft
	A-2	10 1/2'	11:57	12:03	12:03	12:12	9	$\Rightarrow 192 \text{ ft}$
10/3/73	B-1	3 1/2	4:10	4:19	4:17	4:35	16	per B.P.
	B-2	11 1/2	4:07	4:17	4:14	4:35	18	

REMARKS

TYPE OF SOIL

A-1, A-2: light-sand-clay of 4
 1-4: heavy-shale; 5-6: light sand clay

4-12' holes
or 10,000 gal

Preliminary

APPLICATION

A 18907
P _____

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT 3 BR - 1000 gal ST DISTRICT 1
ENVIRONMENTAL HEALTH SERVICES 4 BR - 1250 gal ST DATE 8/28/73
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 256

8/29/73
9:30

8/29/73
L:30

9/1/73

9:30
9/27 + 9/28/73
9:30

System

Dry well: 192 sq ft effective absorbent
sidewall area per bedroom below the first
3 1/2 ft of non-absorbent soil at original grade.
Maximum depth of DW to be 11 1/2 ft. Locate
dry well

TAX MAP 31
P/O P116

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Cecilia McDonald

ADDRESS 4472 Ilchester Rd., Ilchester, Md. PHONE Doris Carter 465-5000, Ext. 353

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. Parcel 1

ROAD AND DESCRIPTION Ilchester Road

SIZE OF LOT 2.234 acres TYPE BLDG. 3 or 4
1.5 acres (NUMBER OF BEDROOMS Single Fmly. Dwllg.)

IF NOT SINGLE RESIDENCE DESCRIBE _____

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ Doris Carter

APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS NWZ DATE _____

REASONS FOR REJECTION OR HOLDING Need certified test holes, proof that sufficient room exists for house, higher than peres. system in first

THIS IS NOT A PERMIT

July 19, 1974

TO WHOM IT MAY CONCERN:

This is to certify that the McDonald property, Parcel 1, on Ilchester Road, Ellicott City, Maryland has a very limited area in which a house must be placed. It is advised that the Health Department be consulted by the prospective buyer as to the area involved. Also, acceptable plan with the elevations must be submitted for approval, septic system and water well must be installed first before the building permit will be released.

Very truly yours,

F. Fred Frommelt,
Sanitarian

FFF:jr

4-12' Loled
on 10,000sf.
Preliminary

If possible can you tell
you Arnold
if it's over
25% slope.

APPLICATION

A 18908

SEWAGE DISPOSAL TESTING

P _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT 3 BR - 1000 gal ST DISTRICT 1
ENVIRONMENTAL HEALTH SERVICES

P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043 7 DATE 8/27/73
TELEPHONE: 465-5000, EXT. 356

125/74

~~4/1/74~~
9:30

MAP B1
P 716

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Cecilia McDonald

ADDRESS 4472 Ilchester Rd., Ilchester, Md. PHONE Doris Carter
465-5000 - Ext. 353

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. Parcel #2

ROAD AND DESCRIPTION Ilchester Rd.

SIZE OF LOT 5.00 acres TYPE BLDG. 3 or 4

IF NOT SINGLE RESIDENCE DESCRIBE _____
NUMBER OF BEDROOMS
(Single Fmly. Dwllg.)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ Doris Carter

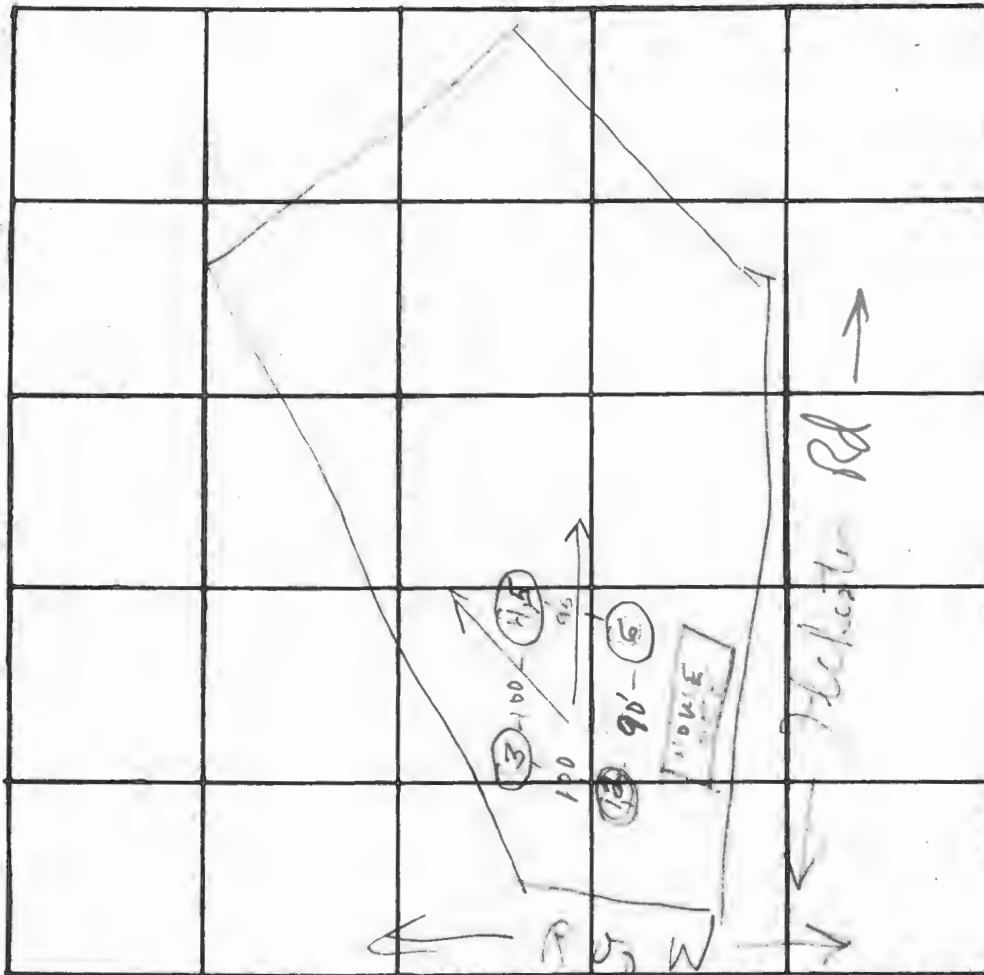
APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS WWZ DATE 1/25/74

REASONS FOR REJECTION OR HOLDING Disapproved for areas tested. Further
exploration needed before an appointment will be
given (as per Mr. Wrie).

THIS IS NOT A PERMIT



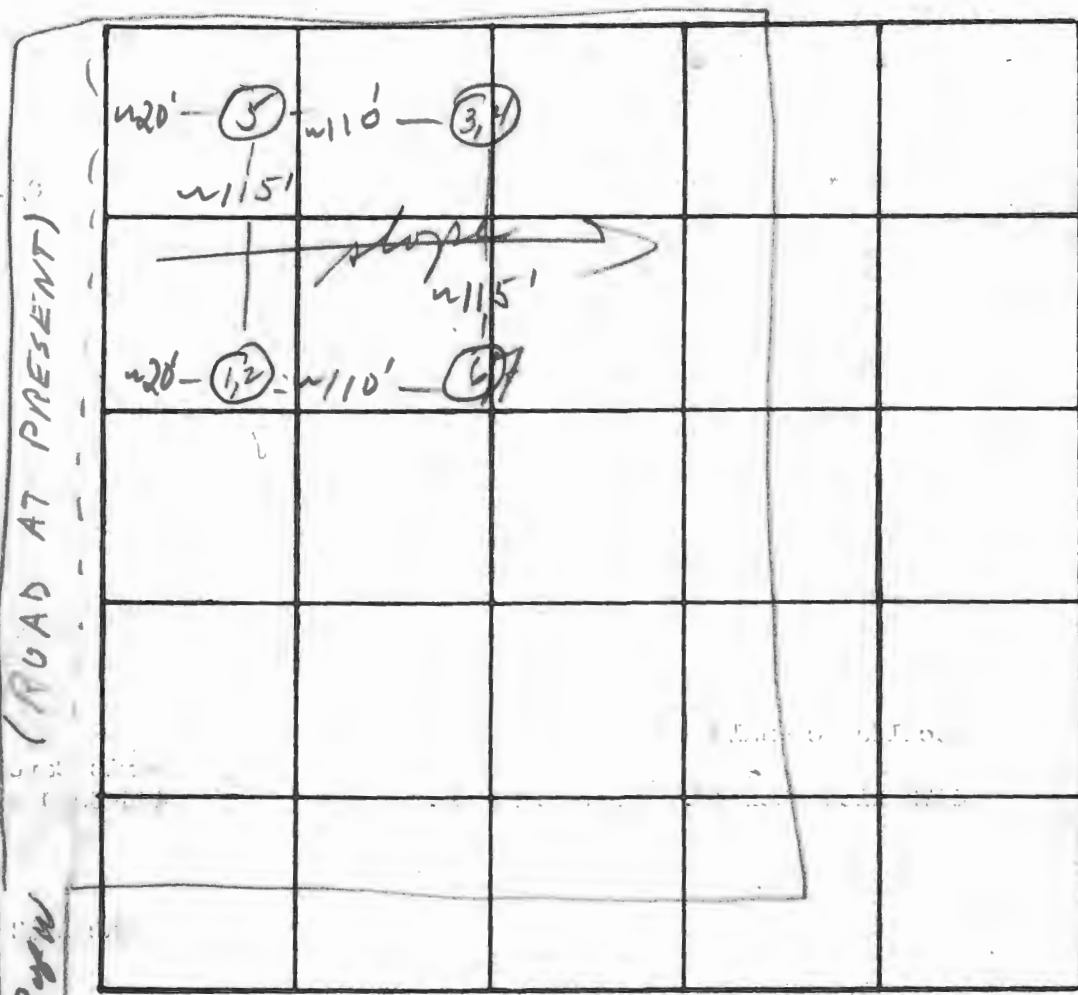
Lot # 2

INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
8/30/73	1	3	10:11	10:52	10:52	LITTLE PERC	1" in 4 hrs	
	2	11	10:11	(NO PERC)	10:53	NO PERC		
	3	12'	Visual; seem to 142; dry					
	4	4	10:17	10:36	10:35	11:04	29	
	5	12	10:17	(NO PERC)	11:04	NO PERC		
	6	11	Visual; seem to 445; dry					
	3-A	4	11:00	(LITTLE PERC)	11:40	1/2" in 40 min		
	3-B	12	11:00	(NO PERC)	11:40	NO PERC		

REMARKS 3-A, B some minimal #3 !!

TYPE OF SOIL Heavy to shale rock



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

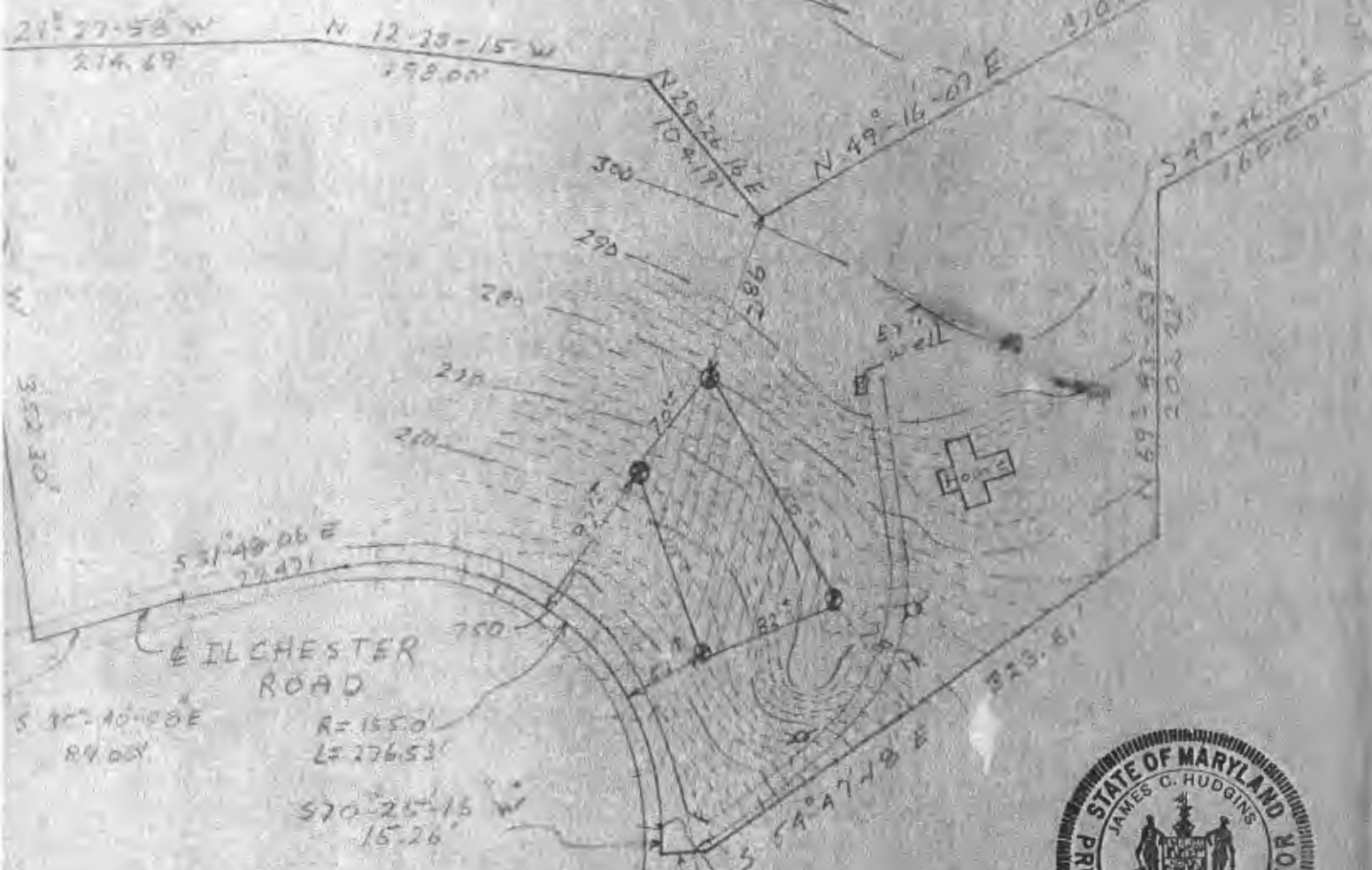
← RW ← Elchester Rd →

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
1/25/74	1	5 1/2	10:00	10:15	10:15	10:46	31
high	2	12 1/2	10:00	10:15	10:15	10:38	23
low	3	4 1/2	10:05	10:20	10:20	10:45	25
	4	12	10:05	10:20	10:20	10:47	27
	5	12	10:56	5" PERC		12:20	84
	6	4 1/2	11:45	11:50	11:50	12:12	22
	7	12	11:46	NO PERC		12:20	34

REMARKS 12 in W/in 10' of 3-A 3-B of 8/30/73

TYPE OF SOIL Hard, heavy shale type

P.O.B.



= Percs field located
 This designates a private sewage easement as required by Maryland State Department of Health & Mental Hygiene upon which permanent construction is prohibited.

The lot shown hereon complies with the minimum ownership and lot areas as required by the Maryland State Dept. of Health & Mental Hygiene.
 APPROVED: Private Water & Private Sewer

Howard County Health Officer



PERC LOCATION PLAT
 PROPERTY OF
 ZBIGNIEW IGOR DYKE & WIFE
 FIRST ELECTION DISTRICT
 HOWARD COUNTY MARYLAND
 SCALE 1" = 100' DATE 11/15/79

J. Carl Hudgins
 J. Carl Hudgins P.L.S. #96

FARCEL 2
W. CECELIA McDONALD
176/97

12" ELM

574°06'55"E
277.52'

2.234 Ac.
PARCEL 1

APPROVED: FOR PRIVATE
WATER AND PRIVATE SEWAGE
SYSTEMS. HOWARD COUNTY
HEALTH DEPARTMENT.

J. J. J. MD
COUNTY HEALTH OFFICER
7/24
DATE

THE LOTS SHOWN HEREON COMPLY
WITH THE MINIMUM OWNERSHIP WIDTH
AND LOT AREAS AS REQUIRED BY
THE MARYLAND STATE DEPARTMENT
OF HEALTH.

RUSSELL S. STEELE & WF.
242/523



Philip A. Pezella 11/14/73

LEGEND

○ PERC TEST HOLE

RELOCATED 30' R/W
508°56'42"E 290.76'

CEMETERY

ROAD

STATE OF
MARYLAND
06/30

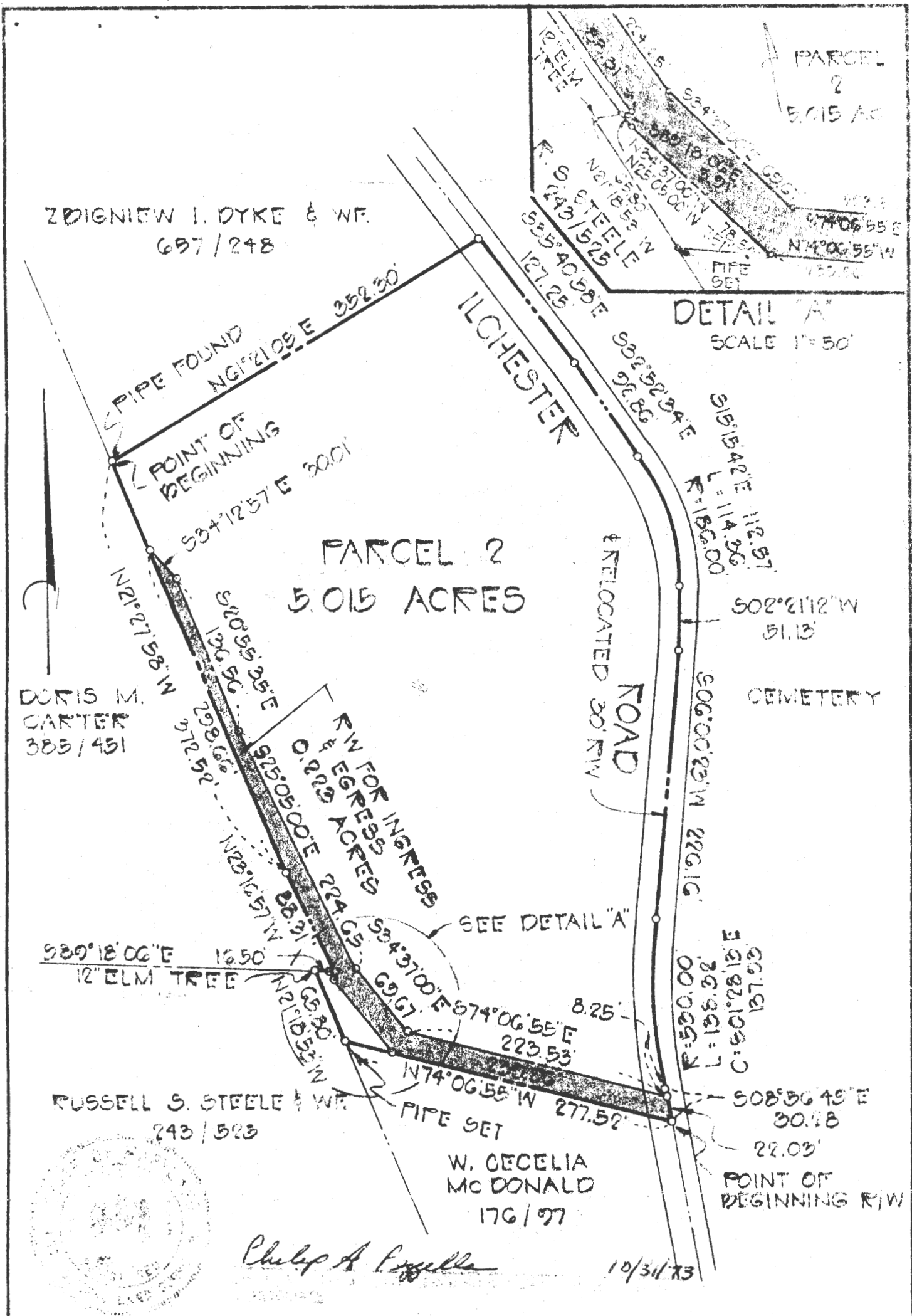
PIPE FOUND

LLCHESTER

711.00' L: 201.55'
R: 711.00' L: 201.55'
CHD: 502°29'57"W 270.75'
81.42'
519°44'42"W
N82°46'32"W
12.07'

7/19/74
Max area encompassed
by perc holes is
~6200 A WWZ

TITLE		FLAT OF SURVEY		ENGINEERING PLANNING SURVEYING BY BOENDER ASSOCIATES INC. ELLICOTT CITY, MD. 21043 SALISBURY, MD. 21801 301-465-7777			
PROJECT		MCDONALD PROPERTY					
LOCATION		1ST ELECTION DISTRICT HOWARD COUNTY, MD.					
DATE:	11/14/73	DES. BY:	P.A.P.	DRAWN BY:	T.P.D.	CHKD BY:	P.A.P.
SCALE:	1"=100'	JOB NO.:	73172	DRWG. NO.:			



TITLE				FLAT OF SURVEY				ENGINEERING PLANNING SURVEYING BY			
PROJECT				PARCEL 2, McDONALD PROPERTY				BOENDER ASSOCIATES INC.			
LOCATION				1ST ELECTION DISTRICT, HOWARD CO., MD.				ELLICOTT CITY, MD. 21043 SALISBURY, MD. 21801 301-465-7777			
DATE	10/31/73	DES. BY:	P.A.P.	DRAWN BY:	T.P.D.	CHKD BY:					
SCALE:	1"=100'	JOB NO.:	73172	DRWG. NO.:	1 of 1						