

Real Property Data Search

Search Result for HOWARD COUNTY

View Map		View GroundRent Redemption			View GroundRent Registration				
Tax Exempt:		Special Tax Recapture:							
Exempt Class:		NONE							
Account Identifier:		District - 03 Account Number - 305996							
Owner Information									
Owner Name:		SCHMIDT LEONARD A NIEMANN CHERYL M J/T			Use:		RESIDENTIAL		
Mailing Address:		12071 PATAPSCO RIDGE RD MARRIOTTSVILLE MD 21104-1431			Principal Residence:		NO		
					Deed Reference:		/04899/ 00570		
Location & Structure Information									
Premises Address:		NW HENRYTON RD MARRIOTTSVILLE 21104-0000			Legal Description:		LOT 3 2.597AR HENRYTON RD J C LEAVITT PROP		
Map:	Grid:	Parcel:	Sub District:	Subdivision:	Section:	Block:	Lot:	Assessment Year:	Plat No:
0010	0002	0289		0002			3	2019	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					
			2.5900 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				
			01/01/2019	07/01/2018	07/01/2019				
Land:		117,400	124,100						
Improvements		0	0						
Total:		117,400	124,100	117,400		119,633			
Preferential Land:		0				0			
Transfer Information									
Seller: LEAVITT JOHN C		Date: 10/01/1999			Price: \$250,000				
Type: ARMS LENGTH MULTIPLE		Deed1: /04899/ 00570			Deed2:				
Seller: LEAVITT JOHN C		Date: 08/30/1995			Price: \$140,000				
Type: ARMS LENGTH IMPROVED		Deed1: /03554/ 00018			Deed2:				
Seller: LEAVITT JOHN C & WF		Date: 08/30/1995			Price: \$111,960				
Type: ARMS LENGTH IMPROVED		Deed1: /03554/ 00012			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:							

STOWARD COUNTY DEPARTMENT OF PLANNING AND ZONING

Division of Land Development

KM.

DATE: 10-21-98

P&Z File No. F99-63

Department of Planning and Zoning

- Transportation Planning
- Historic Preservation
- Comprehensive Planning and Zoning Administration
- Research
- Address Coordinator

- Agricultural Preservation
- Development Engineering Division
- Forest Conservation Planner
- File

Agencies

- Soil Conservation District
- Department of Inspections, Licenses & Permits
- Department of Fire and Rescue Services
- State Highway Administration
- Bureau of Environmental Health
- Board of Education
- Recreation and Parks

- Tax Assessment
- Bell Atlantic Telephone
- BG&E
- Cable TV
- Police
- MTA
- Finance
- DPW, Real Estate Services
- DPW, Construction and Inspection
- DPW, Bureau of Utilities

RE: Leavitt Prop., Lots 5+6

ENCLOSED FOR YOUR → Signature Approval Review & Comments Files
 THE ENCLOSED → Original

Plans	# of Sheets	Supplemental Documents
<input type="checkbox"/> Sketch Plan	<input type="checkbox"/>	<input type="checkbox"/> Wetlands Report
<input type="checkbox"/> Prel Equiv Sketch Plan	<input type="checkbox"/>	<input type="checkbox"/> Soils/Topo Map/Drain Area Map
<input type="checkbox"/> Preliminary Plan	<input type="checkbox"/>	<input type="checkbox"/> FSD/FCP/Worksheet and Application
<input checked="" type="checkbox"/> Final Plat	<input type="checkbox"/>	<input type="checkbox"/> Declaration of Intent
<input type="checkbox"/> Final Constr Plans (RDS)	<input type="checkbox"/>	<input type="checkbox"/> Drainage and/or Computation/Pond Safety Comps
<input type="checkbox"/> Final Development Plan	<input type="checkbox"/>	<input type="checkbox"/> Preliminary Road Profiles
<input type="checkbox"/> Site Development Plan	<input type="checkbox"/>	<input type="checkbox"/> APFO Roads Test/Mitigation Plan
<input type="checkbox"/> Landscape Plan	<input type="checkbox"/>	<input type="checkbox"/> Traffic Study/Noise Study
<input type="checkbox"/> Grading Plan	<input type="checkbox"/>	<input type="checkbox"/> Sight Distance Analysis
<input type="checkbox"/> House Type Revision Plan	<input type="checkbox"/>	<input type="checkbox"/> Floodplain Study
<input type="checkbox"/> Water and Sewer Plan	<input type="checkbox"/>	<input type="checkbox"/> Stormwater Management Comps.
<input type="checkbox"/> Waiver Petition Applic/Exhibit	<input type="checkbox"/>	<input type="checkbox"/> Industrial Waste Survey (DPW)
<input type="checkbox"/> Planning Board Applic	<input type="checkbox"/>	<input type="checkbox"/> Road Poster Form Letter
<input checked="" type="checkbox"/> ASDP/CSDP Application	<input type="checkbox"/>	<input type="checkbox"/> Response Letter
<input checked="" type="checkbox"/> DED Application/Checklist	<input type="checkbox"/>	<input type="checkbox"/> Perc Plat
<input checked="" type="checkbox"/> DED Fee Receipt/Deeds/Cost Estimate	<input type="checkbox"/>	<input type="checkbox"/> Scenic Road Exhibits

WAS: Received Tentatively Approved Recorded
 Received and Revised Approved On 10-21

COMMENTS: Applicant has not yet complied with note #9 of the approved percolation certification plat concerning the drilling of the well prior to record plat. SRC/COMMENTS DUE BY: 11-15

Check, initial and return to the Department of Planning and Zoning if plan is approved with no comments.



HOWARD COUNTY HEALTH DEPARTMENT

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

February 12, 1999

MEMORANDUM

TO: Cindy Hamilton
Department of Planning and Zoning

FROM: Kimberly Maiste, Sanitarian
Water and Sewerage Program

RE: Leavitt Property, Lots 5 & 6
F-99-063

COMMENTS

This office has received the above referenced final plat and the following concerns have been met:

- Confirmation of the location of the existing well, drilled on December 15, 1998, on Lot 5 was submitted to the Health Department.

All Health Department concerns have been met and the plat is acceptable for submission.

KM
cc: File

B 1 2400

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL please print or type

STATE PERMIT NUMBER

HO-94-1792

fill in this form completely

Date Received (APA) 9/18/98

OWNER INFORMATION

RN 7593

Howard

LOCATION OF WELL

CC#

8 MM DD YY 13 Leavitt John

15 Last Name Owner First Name 34

36 Street or RFD 55

57 Town 70 State 72 Zip 76

8 COUNTY 21

23 SUBDIVISION 42

SECTION 44 46 LOT 48 50

52 NEAREST TOWN 71

MILES FROM TOWN (enter 0 if in town) 1 M 73 76 77 78

DRILLER INFORMATION

George F. Easterday

M W 040

Driller's Name 76 License No. 81

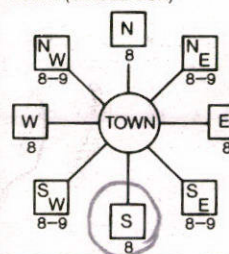
Firm Name L. Franklin Easterday, Inc.

Address 9265 Brown Church Rd., MT. Airy, Md. 21771

Signature George F. Easterday Date 9/14/1998

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



1026 Henryton Rd

11 NEAR WHAT ROAD 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

34 900 37

DISTANCE FROM ROAD Ft.

ENTER FT OR MI 38 39

TAX MAP: 10 BLK: 2 PARCEL 289

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.)

8 500

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
INDUSTRIAL, COMMERCIAL, DEWATERING
PUBLIC WATER SUPPLY WELL
TEST, OBSERVATION, MONITORING
GEO-THERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard 17510215

COUNTY NAME COUNTY NO.

STATE SIGNATURE INSERT S

DATE ISSUED Kim Maisto 10/20/99

43 MM DD YY 48 CO SIGNATURE EXP. DATE

NORTH GRID 549 000 EAST GRID 821 000

50 55 57 63

APPROXIMATE DEPTH OF WELL 300 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED 1 Jetted & DRIVEN

AIR-ROtary AIR-PERcussion ROTARY (Hydraulic Rotary)

CABLE REVerse-ROtary DRive-POINT

other

REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)

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

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) 41 52

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

APPROP. PERMIT NUMBER 54 G A P 63

PERMIT No HO-94-1792

SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

- wells

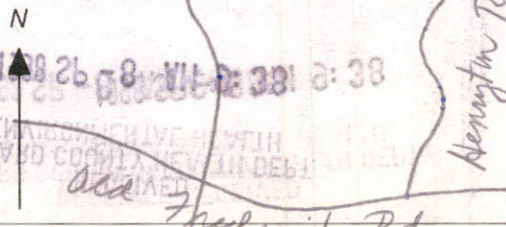
WRITE THE BOX NUMBER FROM THE MAP HERE

E 820 1
N 540 9

X
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

MAP 5 H8



C 1 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 510215

ST/CO USE ONLY DATE RECEIVED 2-11-99

DATE WELL COMPLETED 12/15/98

Depth of Well 400 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-1792

OWNER Leavitt last name, John first name, Street or RFD Henington Road, TOWN Marriottsville, SUBDIVISION Leavitt Property, SECTION, LOT 4

WELL LOG Not required for driven wells

Table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), check if water bearing. Rows include top soil, Shaley, Brown mic, Gray mic, Quartz, and Gray mic.

GROUTING RECORD

WELL HAS BEEN GROUTED (Y) (N) TYPE OF GROUTING MATERIAL (Circle one) CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 20 NO. OF POUNDS 5000 GALLONS OF WATER 100 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 68 ft.

CASING RECORD casing types insert appropriate code below MAIN CASING TYPE S+ Nominal diameter top (main) casing (nearest inch)! L Total depth of main casing (nearest foot) 71

OTHER CASING (if used) diameter inch, depth (feet) from to

SCREEN RECORD screen type or open hole (insert appropriate code below) ST STEEL, BR BRASS, HO OPEN HOLE, PL PLASTIC, OT OTHER

DEPTH (nearest ft.) 69, 400

NUMBER OF UNSUCCESSFUL WELLS: 0 WELL HYDROFRACTURED (Y) (N)

- 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, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS LIC. NO. 1 M W D 040, DRILLERS SIGNATURE Gary F. Eustending, LIC. NO. 1 M W D 481

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

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

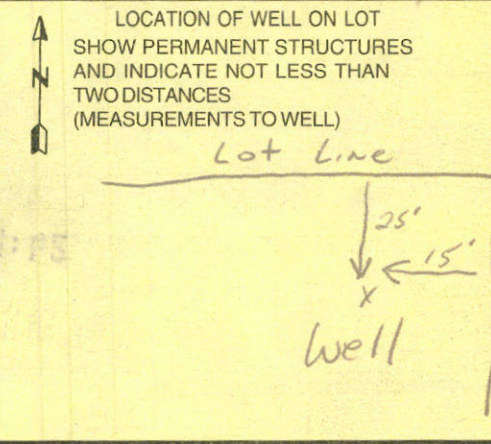
MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST

HOURS PUMPED (nearest hour) 6 PUMPING RATE (gal. per min.) 2.5 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 81 ft. WHEN PUMPING 254 ft. TYPE OF PUMP USED (for test) S submersible

PUMP INSTALLED

DRILLER INSTALLED PUMP (CIRCLE) (YES) (NO) IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS. TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29. CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 35 PUMP HORSE POWER 37 41 PUMP COLUMN LENGTH (nearest ft.) 43 47 CASING HEIGHT (circle appropriate box and enter casing height) f above LAND SURFACE below 2 (nearest foot)





HOWARD COUNTY HEALTH DEPARTMENT

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

June 26, 1998

Mr. Tom Szymanski
2016 Arrington Road
Marriottsville, Maryland 21104

RE: Percolation Testing
Application Number: 510215
Leavitt Property - Proposed Lot #3
Henryton Road
Tax Map: 10 Parcel: 289

Dear Mr. Szymanski:

A percolation test date has been reserved for 10:00 a.m., Thursday, July 16, 1998 for the above referenced property.

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

In the event of uncertain weather (i.e., precipitation or extremes of temperature), please contact this office prior to 9:00 a.m. on the test date to determine whether or not percolation testing can be performed on that date. If it is not feasible to perform the test, a new test date shall be assigned.

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 in advance for your cooperation in this matter.

Very truly yours,

Donna K. Soe, R. S.
Water and Sewerage Program

DKS
cc: Mr. John Leavitt
file

NOT CLERK
OF INTENT OF
APPLICANT -
PLEASE HAVE
REVIEWER
THEN
APPLICATION
LOOK AT THIS,
DISCUSS WITH ME.

(CW)

NOT SENT -
RECEIVED
8/31/98
SUBDIVISION OF LOT
1 LOT FROM
EXISTING PROPERTY
(CW)

July 16, 1998

Mr. Tom Szymanski
2016 Arrington Road
Marriottsville, Maryland 21104

RE: Percolation Test Results
Application # 510215
Leavitt Property - ~~Proposed~~ Lot #3
Henryton Road
Tax Map: 10 Parcel: 289

Dear Mr. Szymanski:

Percolation testing conducted on July 16, 1998 on the above referenced property indicated satisfactory soil conditions. Copies of the percolation test results are enclosed.

Further review is contingent upon submission by a registered engineer of a percolation certification plat showing actual locations and elevations of all excavated test holes and a suitable house and well site. The plat should also include the location of all existing well and septic systems on the property as well as the location of any other relevant features such as streams, swales, or existing structures. A note must be included certifying that all wells and septic systems within 100' of property boundaries have been shown.

This ^{plan} should be submitted within sixty (60) days to allow field verification if necessary. If you have any questions regarding this matter, please feel free to contact me at the address below or by calling (410) 313-2640.

Very truly yours,

Kimberly Maiste, Sanitarian
Water and Sewerage Program

:km
Enclosures
cc: Mr. John Leavitt
file

7/16/98
10:00

APPLICATION

PERCOLATION TESTING

A 510215

P _____

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

DISTRICT 3

DATE 6/9/98

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 JOHN LEAVITT

ADDRESS 30 OAK HILL LANE, WOODSTOCK, CT PHONE 860 928 4722

AGENT OR PROSPECTIVE BUYER Tom Szymanski Coldwell Banker Ellicott City

ADDRESS 2016 Arrington Rd Marriottsville MD 21104 PHONE 410-795-5846

PROPERTY LOCATION:

SUBDIVISION LEAVITT PROPERTY LOT NO. PROPOSED LOT 3

ROAD AND DESCRIPTION HENRYTONE ROAD, 1.7 MILES NORTH OF MARYLAND
ROUTE 99

TAX MAP 10 PARCEL # 2B9

SIZE OF LOT 4.38AC TYPE BLDG. SINGLE FAMILY DWELLING
(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.

John C. Leavitt
(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

5/02/15

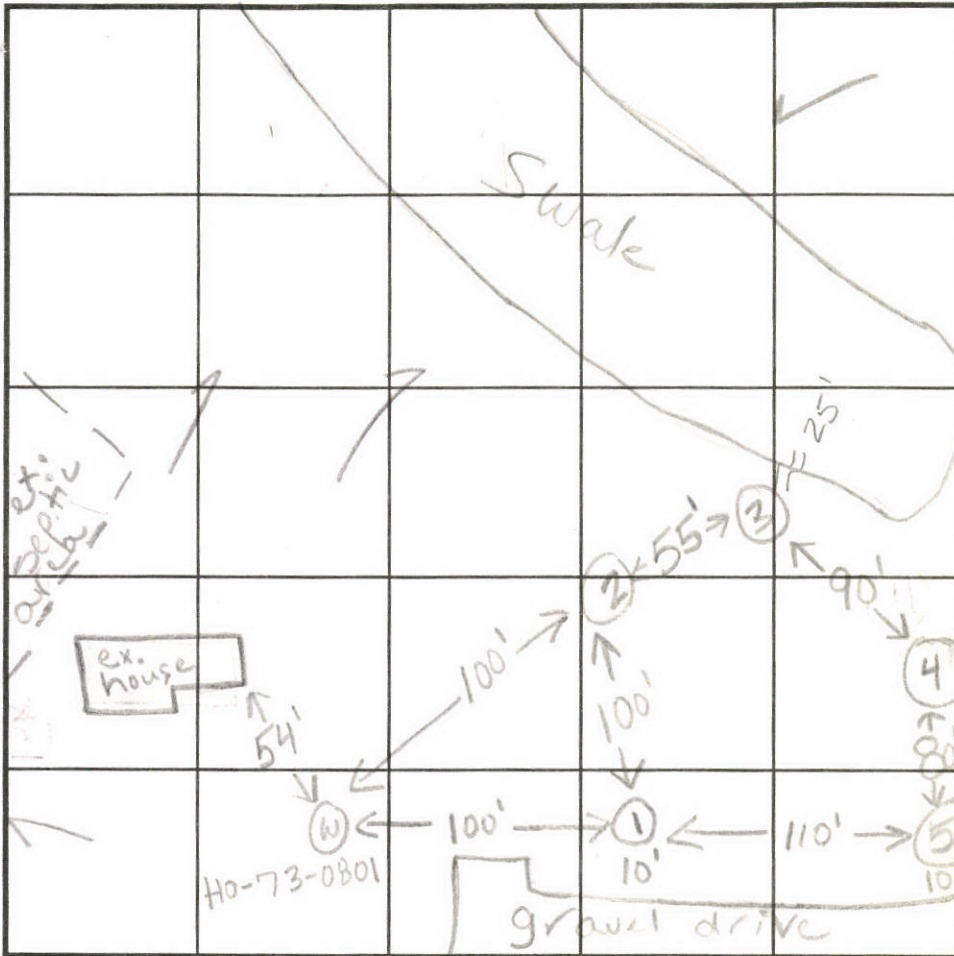
COUNTY #

SOIL PROFILE

0'
orange brown clay lm
4.5'
beige/orange silt lm
10% shale frags
11.5'

2
orange brown cl lm
4.0'
beige silt lm
flocs of mica
15% shale frags
HARD BOTTOM
12'

3
orange cl lm
3'
beige/orange/gray silt lm
30% shale frags
5-9'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE

0'
orange cl lm
4'
Beige orange silt lm
mica 30%
Shale frags
12'
5
orange cl lm
3.5'
orange silt lm
mica 15% shale
12'

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
7-16-98	1	5.0'S	10:37 ⁴⁵	10:52	10:52	11:28	36	
		11.5'0	visual ok - see profile					
	2	4.0'S	11:06	11:17	11:17	11:47	30	
		12.0'0	visual ok - see profile					
	3	4.5'S	11:28 ⁴⁵	11:29 ³⁵	11:29 ³⁰	11:45	fast	
		(repair)	11:31 ⁴⁵	11:33 ²⁰	11:33 ²⁰	11:35 ²⁰	2min	
		11.0'0	visual ok - see profile					
	4	4.0'S	11:56 ³⁰	12:04	12:04	12:18	14min	
		12.0'0	visual ok - see profile					
	5	3.5'S	12:23 ¹⁰	12:25	12:25	12:28	3min	

REMARKS test holes not staked

TYPE OF SOIL _____

TESTED BY Kim Maiste ALSO PRESENT Franklin Excavating

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 21 minutes TRENCH WIDTH 2

INLET DEPTH 4.0 MAXIMUM BOTTOM DEPTH 8.0 SQ. FT./BEDROOM 300

1026

P 20885 A 19358
DATE 11/4/74 12/7/73

LOCATION Henryton Road

APPLICATION

HOLD
APPROVED
REJECTED

LOT 2 (lot 14)

APPLICANT John C. Leavitt

INSTALLATION

HOLD
APPROVED

OWNER John C. Leavitt

PERMITTEE Plea Ketterman

APPROVED 11/7/74
DATE

APPLICATION

A 27000

P _____

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

DISTRICT 3rd

P O BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DATE 10/4/77

Rejected at this date

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 John C. Leavitt property

ADDRESS 1026 Henryton Road, Marriottsville, Md. PHONE 442-2755

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 3

ROAD AND DESCRIPTION adjacent to 1026 Henryton Road

SIZE OF LOT 113,256 sq. ft. ^{40,000} TYPE BLDG. 3 or 4 bedrooms
NUMBER OF BEDROOMS _____

IF NOT SINGLE RESIDENCE DESCRIBE _____

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

SIGNATURE OF APPLICANT John C. Leavitt

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

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

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING Mr. Leavitt said to stop percings
Hold for supervisor
{Rejected at office by supervisor P.W.M. + T.O.

THIS IS NOT A PERMIT



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

← New for Road →

2 Profiles

Sandy
Moist
Loam
Below

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
1/1/77	1	'	:	:	:	:		
	2	'	:	:	:	:		
	3	3 1/2'	1:58	2:00	2:00	2:05	5 mi	
10/18/77	4	11'	2:08	2:10	2:10	2:15	5 mi	
1/1/77	5	'	:	:	:	:		
	6	'	:	:	:	:		
10/13/77	7	'	Visual similar to					

House site & well location
11/3/77 { Equipment picked up

REMARKS Wooded lot when tested. 4 new test holes

TYPE OF SOIL lot Hold for retained hole

TESTED BY C. B. A. + Tom Ogle ALSO PRESENT: Mr. Leavitt to assist

Mr. Leavitt said to stop tests - deadline he went to office

Hole #.	depth	pressure	test	time
1-4' 8. [8] 8s	3	1407-	1410	2 min (2/3 total)
sandy-clay 8d	12	1407-1410	1410-1415	5
4'-12' sandy-clay to rotten rock				
0-5' sandy [9] 9s	3'	1431-1432	1432-1434	2
clay				
5-12' sandy-clay 9d	12'	1430-1434	1434-1443	9 Thunderstorm @ 1435
w/ rotten rock				
[10] 10s	3'	1442-	1445	2 min 2/3 total
12d	13	1442-1445	1445-1450	5 min
[11]	Visual '0-13' - sandy clay fairly hard rock @ 13' dry			

2/1/75

Rep. of Eng. Co. came by.
Advised that 2' contours were
rec. & took plat with him.

T.S.O.

2/10/78:

Reviewed Plat w/ Owner &
Morgan. Actual top of lot 3
not as appears on plat. House site
vis-a-vis ~~supra~~ area in question.
Decided to designate lot 3 as "non-
buildable" & relocate well site on lot
2. Plat picked up by engineer for
revisions T.S.O.

HOWARD COUNTY HEALTH DEPARTMENT
 Division of Environmental Health
 3450 Court House Drive
 Ellicott City, Maryland
 Tel: 465-5000, Ext. 356

*1/25/78 Hold for
 Tom Ogle #3 lot
 + Mr. Monaghan*
1/18/78

DATE:

TO:

- | | | | |
|-------------------------------------|--|--------------------------|---|
| <input type="checkbox"/> | MD. STATE DEPT. OF HEALTH | <input type="checkbox"/> | BOARD OF EDUCATION |
| <input type="checkbox"/> | COUNTY EXECUTIVE | <input type="checkbox"/> | OFFICE OF PLANNING & ZONING |
| <input type="checkbox"/> | DEPT. OF PUBLIC WORKS | <input type="checkbox"/> | DIVISION OF LAND DEVELOPMENT |
| <input type="checkbox"/> | BUREAU OF WATER & SEWERS | <input type="checkbox"/> | BUILDING ENGINEER |
| <input checked="" type="checkbox"/> | OTHERS: <i>Engineer of Health Property or Health</i> | <input type="checkbox"/> | BUREAU OF LICENSES, INSPECTIONS & PERMITS |

RE:

1/25/78 Tom Ogle + Mr. Monaghan
No contours shown *1/25/78 Not review*

- The above referenced:
- | | | | |
|-------------------------------------|-----------------------|--------------------------|----------------|
| <input type="checkbox"/> | Final Plat | <input type="checkbox"/> | Building Plans |
| <input checked="" type="checkbox"/> | Preliminary Plat | <input type="checkbox"/> | Other: |
| <input checked="" type="checkbox"/> | Site Development Plan | | |

IS:

- | | | | |
|-------------------------------------|-------------|--------------------------|---|
| <input type="checkbox"/> | Approved | <input type="checkbox"/> | Approved, if public water and sewerage are provided. |
| <input checked="" type="checkbox"/> | Disapproved | <input type="checkbox"/> | Approved, provided State Health Department notifies the Health Officer that he can sign the plat or bldg. permit. |
| <input type="checkbox"/> | Others: | <input type="checkbox"/> | May the Health Officer sign the above referenced plat? |

COMMENTS:

- | | | | |
|-------------------------------------|---|--------------------------|--|
| <input checked="" type="checkbox"/> | Preliminary plat needs revising. | <input type="checkbox"/> | Percolation tests not performed. |
| <input type="checkbox"/> | Final plat needs revising. | <input type="checkbox"/> | State Subdivision Regulations not complied with. |
| <input type="checkbox"/> | Request that Engineer come to this office for conference. | <input type="checkbox"/> | Submit complete plans and specifications. |
| <input type="checkbox"/> | Submit completed Food Establishment check list. | <input type="checkbox"/> | See attached Regulations or literature. |

OTHER COMMENTS:

P.M. 1/18/78 Discussed with Mr. Monaghan he agreed should show elevations (contours) to determine well location and house site in relation to septic disposal areas. Hold all 3 lots.

*1/25/78. Lot 1 appear ok; Lot 2 water well below septic area. C.B.S.
 Hold Lot 3 for Tom Ogle & entire subdivision for Mr. Monaghan review*

Signed: *C.B.S. + T.O. + D.W.M.*

HOWARD COUNTY OFFICE OF PLANNING AND ZONING
 DIVISION OF LAND DEVELOPMENT
 COUNTY OFFICE BUILDING
 3450 COURT HOUSE DRIVE
 ELLICOTT CITY, MARYLAND 21043

*Leavitt Prop.
 Henington Rd
 4 lots*

DATE: 12/4/77

P & Z File No. P-78-73

Agencies

Office of Planning and Zoning

- Director, Department of Public Works
- Bureau of Engineering
- Bureau of Inspections and Permits
- Fire Administrator
- Police Department
- State Highway Administration
- Division of Environmental Health
- Howard County Public School System
- Recreation and Parks
- Soil Conservation Service
- County Assessment

- Director
- Chief, Division of Land Development
- Transportation Planning
- File
- Division of Comprehensive Planning
- Division of Zoning
- Planning Board Members

RE: Leavitt Property
 FOR PLAN REVIEW MEETING OF _____ (Date) _____ (Time) _____ (Place) *1-243 non-buildable*

ENCLOSED FOR YOUR: Signature Approval Review & Comments Files

THE ENCLOSED: Original Copy

	<u>No. of Sheets</u>		<u>No. of Sheets</u>
<input type="checkbox"/> Preliminary Plan	_____	<input type="checkbox"/> Final Road and/or Storm Drainage Plan	_____
<input type="checkbox"/> Preliminary Road Profile	_____	<input type="checkbox"/> Final Storm Drainage Computations	_____
<input type="checkbox"/> Preliminary Drainage Study and/or Computations	_____	<input type="checkbox"/> Site Development Plan	_____
<input type="checkbox"/> Final Development Criteria	_____	<input type="checkbox"/> Sketch Plan	_____
<input type="checkbox"/> Final Development Plan	_____		_____
<input type="checkbox"/> Final Plat	_____		_____

WAS: Received Tentatively Approved Recorded
 Received & Revised Approved On 12/4/77

COMMENTS: _____

Check box and return to Office of Planning and Zoning if plan is approved with no comments.

see back comments

RECEIVED
HOWARD COUNTY
HEALTH DEPT.

OCT 27 9 23 AM '77

DIVISION OF
ENVIRONMENTAL
HEALTH

10-20-77, approved & signed for 3 ac. dead lined roads.
lots 1, 2 & 3 marked non-buildable due to
incomplete testing & adeq. time for review
L. [Signature]

RECORDED
PRELIMINARY

APPLICATION

A 18978

9/25/73
9:30 A.M.

4-12'
Leland
decided 10,000 ft
before para

SEWAGE DISPOSAL TESTING

P _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT 3rd

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

3hr - 1000 gal ST
4hr - 1250 gal ST

DATE 9/13/73

Dry well is to have 135 sq. ft effective absorbent sidewall area per bedroom below the first 5 ft of non-absorbent ground at original grade. Bring inlet into DW at 3ft below original grade. Maximum depth of DW to be 13 ft. Locate dry well 110' from right lot line and 225 ft from back lot line as seen when facing lot from Henryton Rd.

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 Frank Lindberg

ADDRESS 201-A Atholgate Lane, Baltimore 21229 PHONE 525-0522

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. Parcel 1

ROAD AND DESCRIPTION 950 Henryton Road - 1 mile in on left hand side of road

SIZE OF LOT 5.003 acres TYPE BLDG. 4 bedrooms
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

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

SIGNATURE OF APPLICANT Frank A Lindberg

APPROVED BY W.W. Zepp FOR D.W. DATE 9/26/73
(KIND OF SYSTEM)

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

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING discussed w Mr. Wine. OK 9/25/73

Parcel 1 was subdivided into 3 lots
A 26998, A 26999, & A 27000 Leavitt prop.

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 _____

RECORDED
EXEMPT

APPLICATION

A 18978

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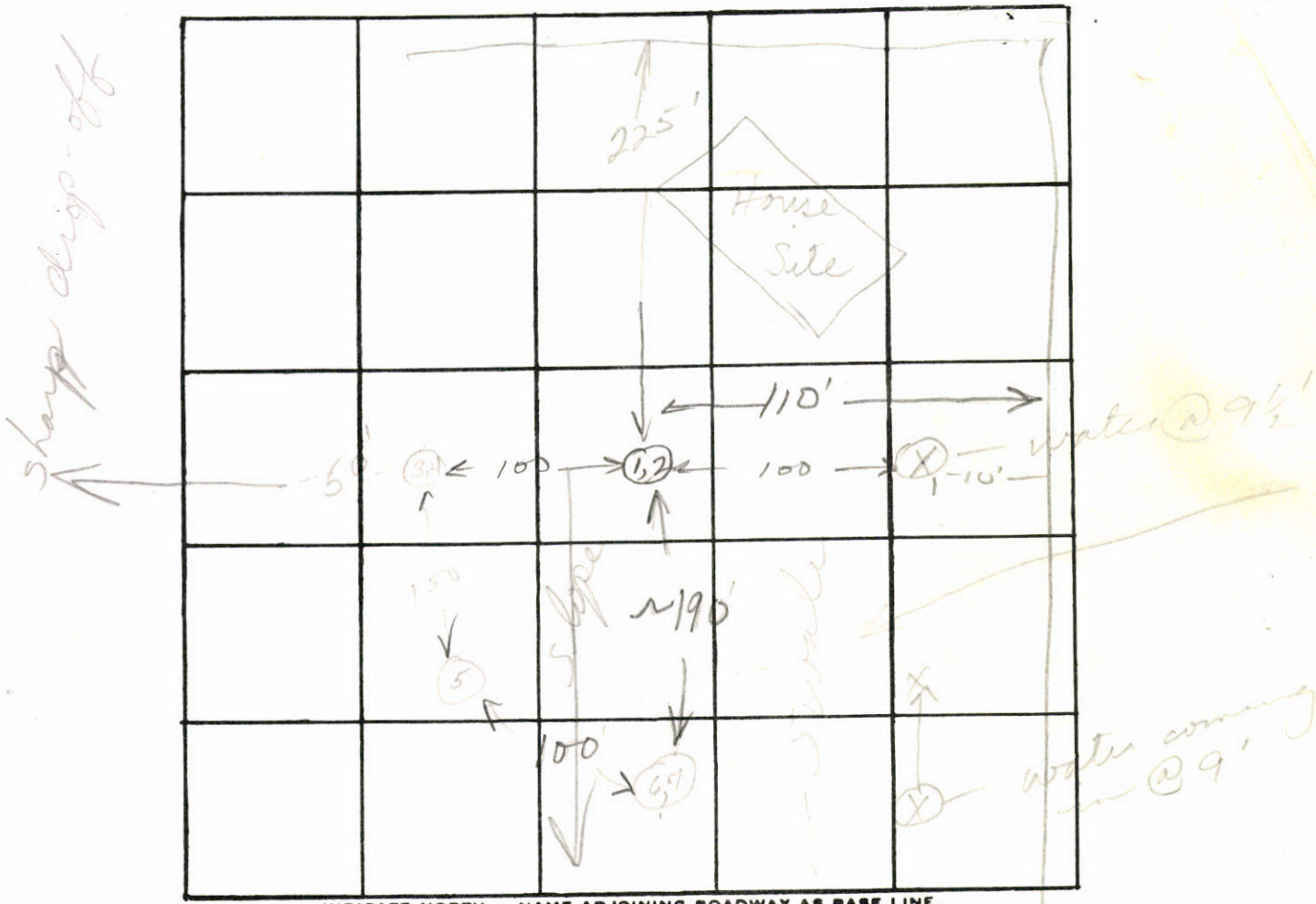
APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

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.

HENRYTON RD

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
9/25/73	1	6 1/2'	9:52	9:00	10:00	10:14	14
	2	13'	9:49	9:50	9:50	10:02	12
	3	5'	10:11	10:16	10:16	10:35	19
	4	13'	10:04	10:09	10:09	10:22	13
	5	12'	Visual; rain to 344' dug				
	6	5 1/2'	10:31	10:35	10:35	10:40	5
	7	12'	10:26	10:28	10:28	10:36	8

$\bar{t} = 13 \text{ min}$
 135 #/hr.
 Inlet @ 3'
 Effluent start @ 5'

REMARKS

Partially wooded w brush

WW2

TYPE OF SOIL

Sandy, loam

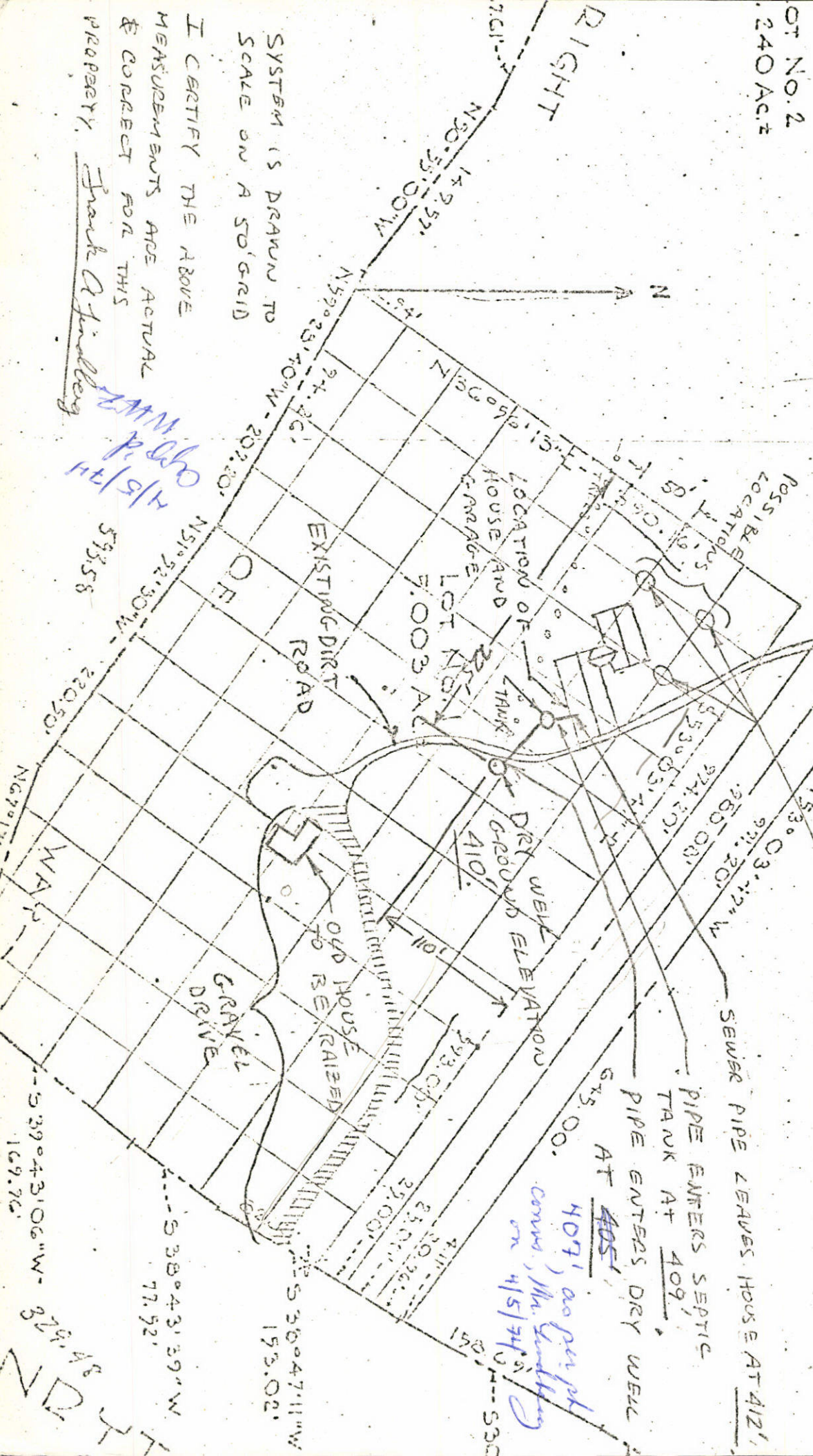
NOTES:

HOUSE TO TANK: 15'
TANK TO DRYWELL: 50'

LOT No. B
5.001 AC. ±
WELL 420' GROUND ELEVATION

OT NO. 2
.240 AC. ±

RIGHT



SYSTEM IS DRAWN TO SCALE ON A 50' GRID
I CERTIFY THE ABOVE MEASUREMENTS ARE ACTUAL & CORRECT FOR THIS PROPERTY. Frank A. J. J. J.

407' 00' per pk
conv. Mr. J. J. J.
on 4/5/74

4/5/74
Frank A. J. J. J.