



# Building Permit Application

Howard County Maryland  
Department of Inspections, Licenses and Permits  
3430 Court House Drive  
Permits: 410-313-2455  
www.howardcountymd.gov

Date Received: 6/16/16

Permit No.: B16002795

Building Address: 11024 Gaither Farm Rd  
 City: Ellicott City State: MD Zip Code: 21042  
 Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
 Census Tract: \_\_\_\_\_ Subdivision: Gaither Farm  
 Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: 22  
 Tax Map: 29 Parcel: 0001 Grid: 10  
 Zoning: Residential Map Coordinates: 4734 G/2 Lot Size: 3 Acre

Existing Use: Exterior Deck  
 Proposed Use: New Deck with room above  
 Estimated Construction Cost: \$ 100,000  
 Description of Work: Rebuild existing deck with slab porch and extend room above porch (addition)  
 Occupant or Tenant: \_\_\_\_\_  
 Was tenant space previously occupied?  Yes  No  
 Contact Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Commercial Building Characteristics	Residential Building Characteristics
Height: _____	<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse
No. of stories: _____	<b>Depth</b> <b>Width</b>
Gross area, sq. ft./floor: _____	1 <sup>st</sup> floor: <u>80</u> <u>40</u>
Area of construction (sq. ft.): <u>20 x 15</u>	2 <sup>nd</sup> floor: <u>80</u> <u>40</u>
Use group: _____	Basement: <u>30</u> <u>40</u>
<b>Construction type:</b>	<input checked="" type="checkbox"/> Finished Basement
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Unfinished Basement
<input type="checkbox"/> Structural Steel	<input checked="" type="checkbox"/> Crawl Space
<input checked="" type="checkbox"/> Masonry	<input type="checkbox"/> Slab on Grade
<input checked="" type="checkbox"/> Wood Frame	No. of Bedrooms: <u>4</u>
<input type="checkbox"/> State Certified Modular	<b>Multi-family Dwelling</b>
<input checked="" type="checkbox"/> Roadside Tree Project Permit	No. of efficiency units: _____
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	No. of 1 BR units: _____
Roadside Tree Project Permit # _____	No. of 2 BR units: _____
	No. of 3 BR units: _____
	Other Structure: _____
	Dimensions: _____
	Footings: _____
	Roof: _____
	<input type="checkbox"/> State Certified Modular
	<input type="checkbox"/> Manufactured Home

Property Owner's Name: Richard Hayes  
 Address: 11024 Gaither Farm Road  
 City: Ellicott City State: MD Zip Code: 21042  
 Phone: 410 979 2898 Fax: \_\_\_\_\_  
 Email: rick.hayes@verizon.net

Applicant's Name & Mailing Address, (if other than stated herein)  
 Applicant's Name: Owner  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Contractor Company: Danner - Richards Hayes  
 Contact Person: Richard Hayes  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 License No.: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Engineer/Architect Company: RA Ratchko  
 Responsible Design Prof.: Peter Ratchko  
 Address: 10404 Shivers Road  
 City: Shivers State: MD Zip Code: 21153  
 Phone: 410 484 7700 Fax: 410 484 2919  
 Email: peter@ratchkoassociates.com

Utilities	
<b>Water Supply</b>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	<u>well</u>
<b>Sewage Disposal</b>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	<u>septic</u>
Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Heating System</b>	
<input checked="" type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other: _____	
<b>Sprinkler System:</b>	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>Grading Permit Number:</b>	
<b>Building Shell Permit Number:</b>	

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 THERETO; (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.

Applicant's Signature: Richard Hayes  
 Email Address: rick.hayes@verizon.net  
 Title/Company: Danner

Print Name: Richard Hayes  
 Date: 6/16/16

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY  
 \*\*PLEASE WRITE NEATLY & LEGIBLY\*\*  
 -FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA ( Zoning )		
PSZA ( Engineering )		
Health	<u>7/15/2016</u>	<u>[Signature]</u>

Is Sediment Control approval required for issuance?  Yes  No  
 CONTINGENCY CONSTRUCTION START

DPZ SETBACK INFORMATION
Front: _____
Rear: _____
Side: _____
Side St.: _____
All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No
Lot Coverage for New Town Zone: _____
SDP/Red-line approval date: _____

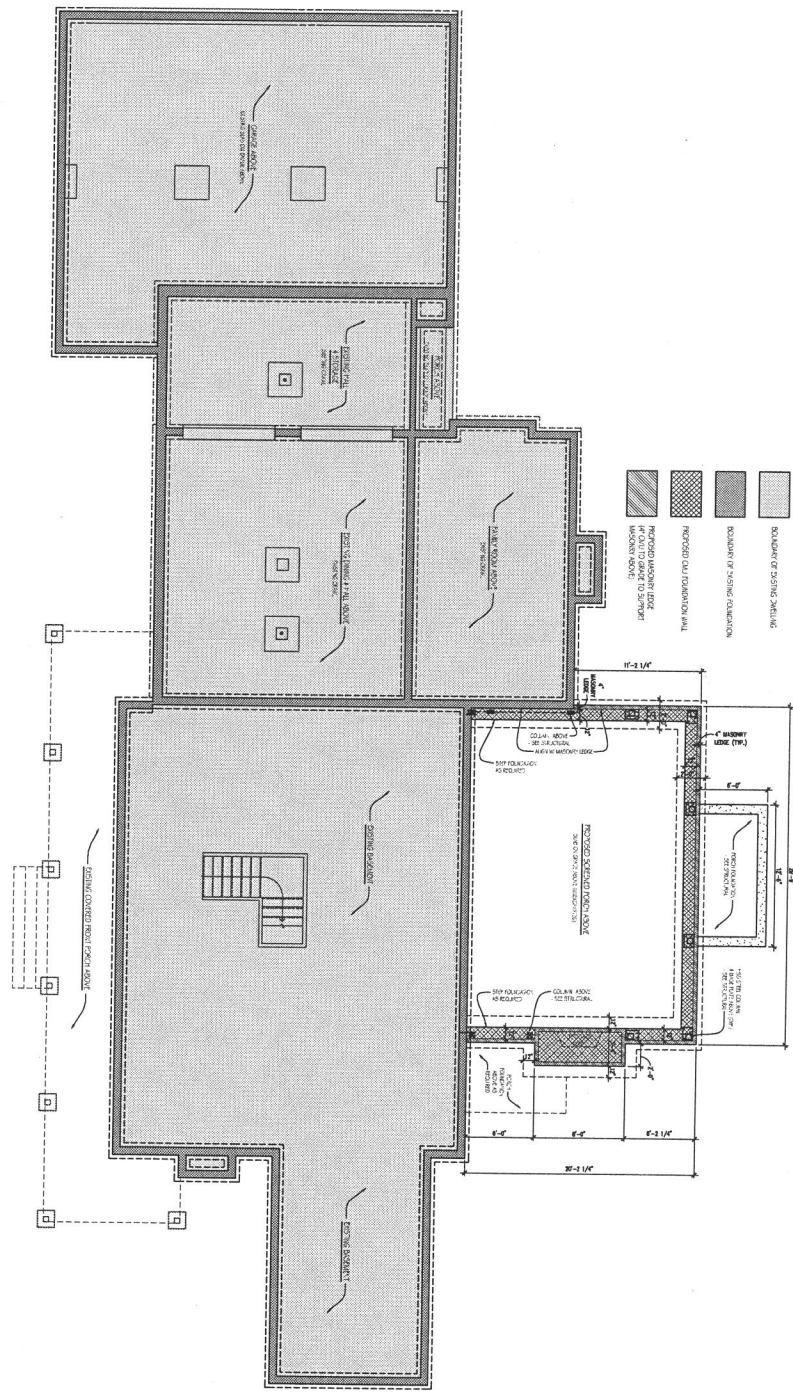
Filing Fee	\$ <u>250</u>
Permit Fee	\$ <u>250</u>
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	# <u>3774</u>

Distribution of Copies: White: Building Officials Green: PSZA,Zoning Yellow: PSZA,Engineering Pink: Health Gold: SHA





**FOUNDATION PLAN**  
SCALE: 1/4" = 1'-0"



**NOTE 1:** ALL DIMENSIONS TO BE VERIFIED PRIOR TO CONSTRUCTION.

**NOTE 2:** ALL DIMENSIONS ARE FROM FACE UNLESS OTHERWISE NOTED.

**NOTE 3:** ANY AMBIGUITY OR QUESTIONS REGARDING THESE DRAWINGS, THE SPECIFICATIONS OR DETAILS SHALL BE ADDRESSED DIRECTLY WITH THE OWNER ARCHITECT BEFORE PROCEEDING WITH CONSTRUCTION. THE ARCHITECT SHALL NOT BE RESPONSIBLE FOR SUCH BLENK OR MISINTERPRETATION OF THE SPECIFICATIONS, DRAWINGS OR DETAILS.

**NOTE 4:** ALL STRUCTURE TO BE VERIFIED BY A REGISTERED PROFESSIONAL ENGINEER PRIOR TO CONSTRUCTION.

**NOTE 5:** THE GENERAL CONTRACTOR/REBUILDER IS SOLELY RESPONSIBLE FOR MAKING SURE THAT ALL SUBCONTRACTORS HAVE THE LATEST REVISIONS PRIOR TO BEGINNING WORK ON SITE TO DO THEIR WORK.

**NOTE 6:** FOR ALL EXISTING AND RENOVATIONS OF EXISTING STRUCTURES THE GENERAL CONTRACTOR/OWNER AND/OR SUBCONTRACTOR SHALL:

1. VERIFY ALL DIMENSIONS AND NOTIFY ARCHITECT OF ANY SIGNIFICANT DIFFERENCES IF OR WORK
2. VERIFY ALL DIMENSIONS AND NOTIFY ARCHITECT OF ANY SIGNIFICANT DIFFERENCES IF OR WORK
3. VERIFY ALL DIMENSIONS AND NOTIFY ARCHITECT OF ANY SIGNIFICANT DIFFERENCES IF OR WORK
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9. VERIFY ALL DIMENSIONS AND NOTIFY ARCHITECT OF ANY SIGNIFICANT DIFFERENCES IF OR WORK
10. VERIFY ALL DIMENSIONS AND NOTIFY ARCHITECT OF ANY SIGNIFICANT DIFFERENCES IF OR WORK

**NOTE 7:** THE ARCHITECT AND OWNER OF ANY UNCORRECTED VIOLATIONS TO ANY BUILDING CODES ENFORCED BY THE JURISDICTION IN WHICH THE HOME IS LOCATED.

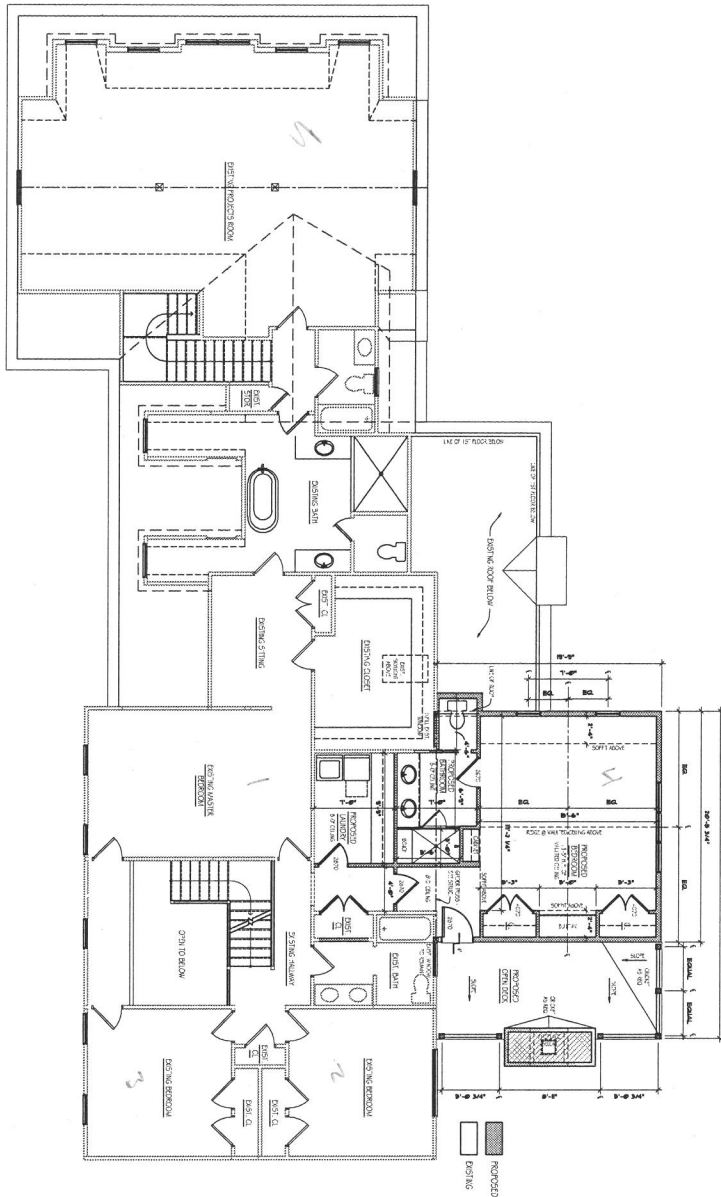
**CONTENTS:**

FOUNDATION PLAN	1
PERMIT ISSUE: 04.06.16	
REVISIONS:	
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SCALE: AS SHOWN  
DRAWN BY: RW  
START DATE: 3/8/16

PROPOSED ADDITION FOR  
**THE HOENES FAMILY**  
11024 GAITHER FARM ROAD  
ELLCOTT CITY, MD

**RATCLIFFE ARCHITECTS**  
10414 Sherridon Road  
Sherridon, Maryland 21155  
410.484.7517 • Fax: 410.484.7518 • [info@ratcliffearchitects.com](mailto:info@ratcliffearchitects.com)



1 SECOND FLOOR PLAN  
 A1.3 SCALE 1/8" = 1'-0"

NOTE 1: ALL DIMENSIONS TO BE REFERRED PRIOR TO CONSTRUCTION.

NOTE 2: ALL DIMENSIONS ARE TO FACE UNLESS OTHERWISE NOTED.

NOTE 3: ANY AMBIGUITY OR QUESTIONS REGARDING THESE DRAWINGS, THE SPECIFICATIONS OR DETAILS SHALL BE ADDRESSED DIRECTLY WITH THE OWNER/ARCHITECT BEFORE PROCEEDING WITH CONSTRUCTION. THE ARCHITECT/OWNER SHALL BE RESPONSIBLE FOR SUCH REVIEW OR INTERPRETATION OF THE SPECIFICATIONS, DRAWINGS OR DETAILS.

NOTE 4: ALL STRUCTURE TO BE VERIFIED BY A LICENSED PROFESSIONAL ENGINEER PRIOR TO CONSTRUCTION.

NOTE 5: THE GENERAL CONTRACTOR/BUILDER IS SOLELY RESPONSIBLE FOR OBTAINING PERMITS AND FOR ALL SUBCONTRACTORS HAVE THE LATEST REVISION DRAWINGS PRIOR TO BEGINNING ON SITE TO DO THEIR WORK.

NOTE 6: FOR ALL REMODELS AND RECONSTRUCTION OF EXISTING STRUCTURES, THE GENERAL CONTRACTOR/BUILDER AND/OR SUBCONTRACTOR SHALL:

A. VERIFY ALL DIMENSIONS AND NOTIFY ARCHITECT OF ANY SIGNIFICANT DIFFERENCES (IF ANY) PRIOR TO COMMENCING WORK.

B. VERIFY ALL DIMENSIONS AND NOTIFY ARCHITECT OF ANY SIGNIFICANT DIFFERENCES (IF ANY) PRIOR TO COMMENCING WORK.

C. TAKE ALL NECESSARY CARE TO NOT DAMAGE ANY EXISTING MECHANICAL, ELECTRICAL OR PLUMBING FOUND DURING DEMOLITION THAT WOULD INVOLVE REMEDIATION OF THE DESIGN OR LOSS AND SHALL IMMEDIATELY NOTIFY THE ARCHITECT OF ANY SUCH DAMAGE.

D. NOTIFY THE ARCHITECT AND OWNER OF ANY UNCOVERED VIOLATIONS TO ANY BUILDING CODES ENFORCED BY THE JURISDICTION IN WHICH THE HOME IS LOCATED.

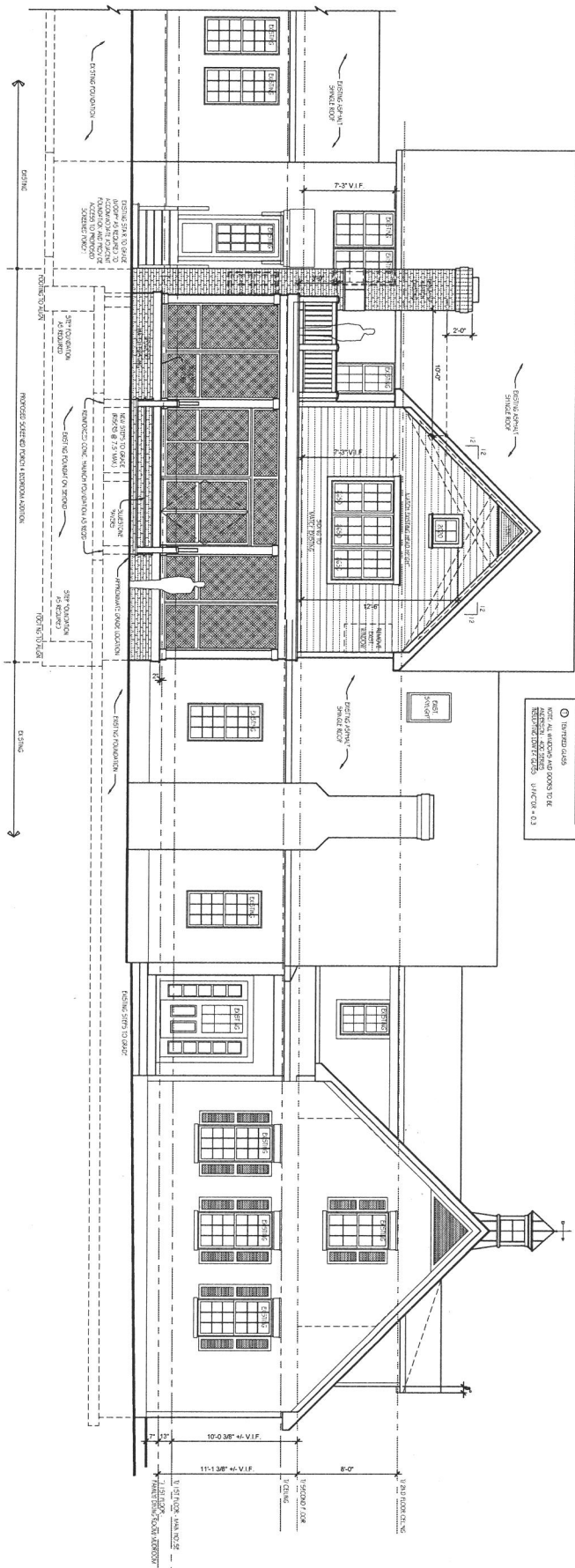
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2	11/11/16	REVISIONS
3	12/12/16	
4	1/13/17	
5	2/14/17	
6	3/15/17	
7	4/16/17	
8	5/17/17	
9	6/18/17	
10	7/19/17	

START DATE: 3.16.16  
 SCALE: AS SHOWN  
 DRAWN BY: RW

PROPOSED ADDITION FOR  
 THE HOENES FAMILY  
 11024 GAITHER FARM ROAD  
 ELLICOTT CITY, MD

**RATCLIFFE ARCHITECTS**  
 19424 Progression Road • Pimlico, Maryland 21115  
 410.484.9000 • Fax: 410.484.9000 • www.ratcliffearchitects.com





**WINDOW DOOR SPECIFICATION**  
 O - tempered glass  
 W - 1/2\"/>

1 REAR ELEVATION  
 A2.1 SCALE 1/4\"/>

NOTE 1: ALL DIMENSIONS TO BE GROUND POINT TO CONSTRUCTION.  
 NOTE 2: ALL DIMENSIONS ARE DOUBLE FRAME UNLESS OTHERWISE NOTED.  
 NOTE 3: ANY AMBIGUITY OR QUESTIONS REGARDING THESE DRAWINGS, THE SPECIFICATIONS OR DETAILS SHALL BE ADDRESSED DIRECTLY WITH THE OWNER ARCHITECT BEFORE PERMITS ARE OBTAINED FOR CONSTRUCTION. THE ARCHITECT WILL NOT BE HELD RESPONSIBLE FOR SUCH ERROR OR MISINTERPRETATION OF THE SPECIFICATIONS, DRAWINGS OR DETAILS.  
 NOTE 4: ALL STRUCTURE TO BE VERIFIED BY A LICENSED PROFESSIONAL ENGINEER PRIOR TO CONSTRUCTION.  
 NOTE 5: THE GENERAL CONTRACTOR/OPERATOR IS SOLELY RESPONSIBLE FOR VERIFYING THAT ALL SUBCONTRACTORS HAVE THE LATEST REVISION DRAWINGS PRIOR TO BEGINNING SITE TO DO THEIR WORK.  
 NOTE 6: FOR ALL REVISIONS AND RELATIONS OF DESIGN STRUCTURES THE GENERAL CONTRACTOR/BUILDER AND/OR SUBCONTRACTOR SHALL:  
 A. VERIFY ALL DIMENSIONS AND NOTIFY ARCHITECT OF ANY SIGNIFICANT DIFFERENCES OR CONFLICTS.  
 B. SUPPORT STAKE OR OTHERS STRIKE EXISTING STRUCTURE IN A WORKMANLIKE MANNER TO AVOID DAMAGE TO THE SAME.  
 C. OBTAIN ALL NECESSARY PERMITS AND APPROVALS FROM ALL APPLICABLE AGENCIES PRIOR TO COMMENCING CONSTRUCTION.  
 D. MAINTAIN ALL NECESSARY RECORDS OF ALL CHANGES TO THE DESIGN OR COSTS AND SHALL MAINTAIN THEM WITHIN THE ARCHITECT OF SAME.  
 E. NOTIFY THE ARCHITECT AND OWNER OF ANY UNCOVERED CONDITIONS TO ANY BUILDING CODES ENFORCED BY THE JURISDICTION IN WHICH THE HOME IS LOCATED.

PROPOSED ADDITION FOR  
 THE HOENES FAMILY  
 11024 GAITHER FARM ROAD  
 ELLICOTT CITY, MD

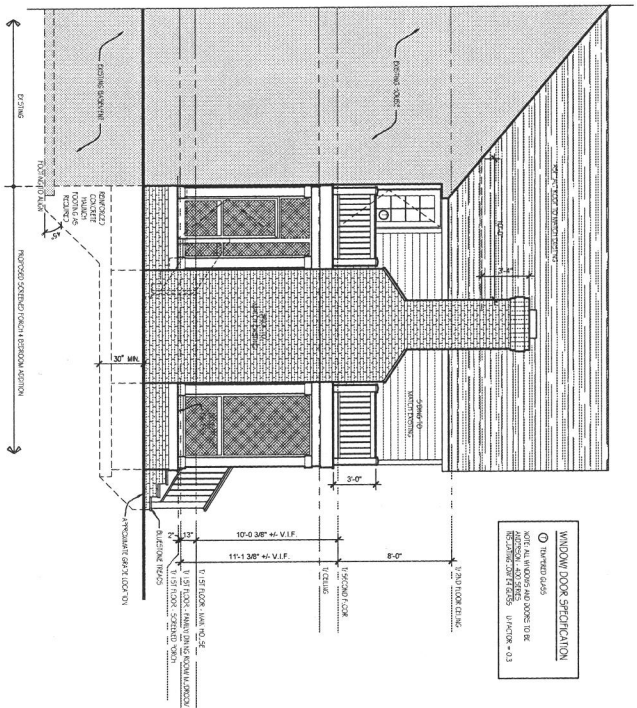
**RATCLIFFE ARCHITECTS**  
 10422 Zionsville Road • P.O. Box 100 • Ellicott City, MD 21117  
 410-438-1871 • Fax 410-438-1872 • email: info@ratcliffe.com

MD Lic. 19916 Exp. 11-10-16

A2.1

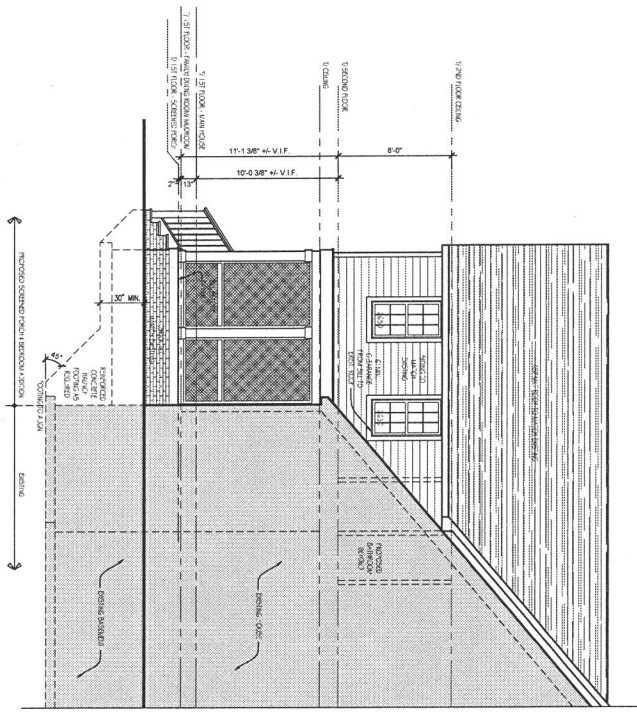
SHEET OF

REVISIONS:	1	2	3	4	5	6	7	8	9	10
DATE:										
BY:										
SCALE:	AS SHOWN									
DRAWN BY:	RW									
START DATE:	3.16.16									
CONTENT:	REAR ELEVATION									
PERMIT ISSUE:	04.06.16									



2 RIGHT ELEVATION  
SCALE: 1/4" = 1'-0"

**WINDOW DOOR SPECIFICATION**  
 ○ FINISHED GLASS  
 ○ ALL WINDOW AND DOOR TO BE  
 OPERATIONAL AND TO BE  
 REFINISHED TO MATCH EXISTING



1 LEFT ELEVATION  
SCALE: 1/4" = 1'-0"

NOTE 1: ALL DIMENSIONS TO BE VERIFIED PRIOR TO CONSTRUCTION.  
 NOTE 2: ALL DIMENSIONS ARE ROUGH FRAMING UNLESS OTHERWISE NOTED.  
 NOTE 3: ANY AMBIGUITY OR QUESTIONS REGARDING THESE DRAWINGS, THE SPECIFICATIONS OR DETAILS SHALL BE ADDRESSED DIRECTLY WITH THE OWNER ARCHITECT BEFORE PROCEEDING. APPROVAL OR CONSTRUCTION, THE ARCHITECT WILL NOT BE HELD RESPONSIBLE FOR SUCH ERROR OR MISREPRESENTATION OF THE SPECIFICATIONS, DRAWINGS OR DETAILS.  
 NOTE 4: ALL STRUCTURE TO BE PERFORMED BY A VALID LICENSED PROFESSIONAL ENGINEER PRIOR TO CONSTRUCTION.  
 NOTE 5: THE GENERAL CONTRACTOR/BUILDER IS SOLELY RESPONSIBLE FOR OBTAINING PERMITS, SURETY, AND ALL SUBCONTRACTORS HAVE THE LATEST REVERSED PERMITS FROM THE STATE TO DO THEIR WORK.  
 NOTE 6: FOR ALL STRUCTURES AND REVISIONS OF EXISTING STRUCTURES THE GENERAL CONTRACTOR/BUILDER AND/OR SUBCONTRACTOR SHALL:  
 A. VERIFY ALL DIMENSIONS AND NOTIFY ARCHITECT OF ANY SIGNIFICANT DIFFERENCES (2" OR MORE).  
 B. SUPPORT STRUCTURE OR OTHER STRUCTURE IN A WORKMANLIKE MANNER TO AVOID DAMAGE TO THE EXISTING STRUCTURE.  
 C. TAKE ALL NECESSARY CARE TO NOT DAMAGE ANY EXISTING MECHANICAL, ELECTRICAL OR PLUMBING FOUND DURING DEMOLITION THAT WOULD INVOLVE REPAIRING OF THE PERSON OR COSTS AND SHALL IMMEDIATELY NOTIFY THE ARCHITECT OF SAME.  
 NOTE 7: THE ARCHITECT AND OWNER OF ANY UNCORRECTED VIOLATIONS TO ANY BUILDING CODES ENFORCED BY THE JURISDICTION IN WHICH THE HOME IS LOCATED.

CONTENTS:  
 RIGHT LEFT ELEVATIONS  
 PERMIT ISSUE: 04.06.16

REVISIONS	DATE	BY
1	02	RW
2	10	RW
3	11	RW
4	12	RW
5	12	RW
6	12	RW
7	12	RW
8	12	RW

START DATE: 3.6.16  
 SCALE: AS SHOWN  
 DRAWN BY: RW

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**RATCLIFFE**  
 ARCHITECTS  
 15044 Drexelton Road • Drexelton, Maryland 21133  
 410.444.1011 • Fax 410.444.1012 • [info@ratcliffe-architects.com](mailto:info@ratcliffe-architects.com)



Approved TSP 7/15/2016  
B160002745 B/E

**Hoenes Residence**  
**11024 Gaither Farm Road**  
**Ellicott City, Maryland 21042**

**Structural Drawings**

Architect

**Ratcliffe Architects**

10404 Stevenson Road  
Stevenson, Maryland 21153  
Phone: 410 484 7010

**Mincin Patel Milano, Inc.**

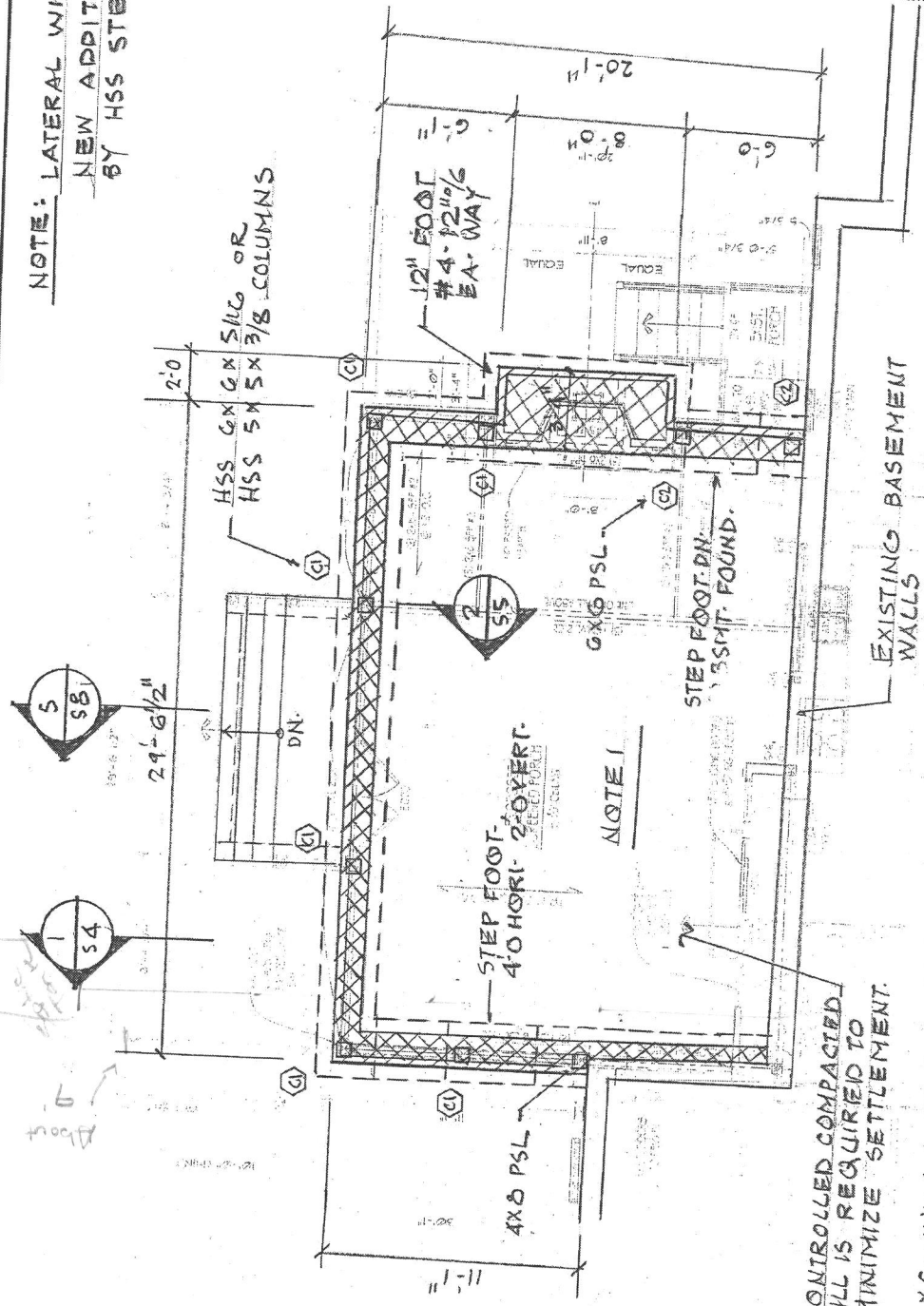
Consulting Structural Engineers  
6511 Harford Road  
Baltimore, Maryland 21214  
Phone (410) 254-7500, Fax (410) 254-7100



PROFESSIONAL CERTIFICATION  
I certify that these documents were prepared or  
approved by me, and that I am a duly licensed  
engineer under the laws of the State of Maryland,  
License No. 13756. Expiration date: 12-23-2017

Janakhai A. Patel Date: 7/16

NOTE: LATERAL WIND LOAD AT NEW ADDITION IS RESISTED BY HSS STEEL COLUMNS



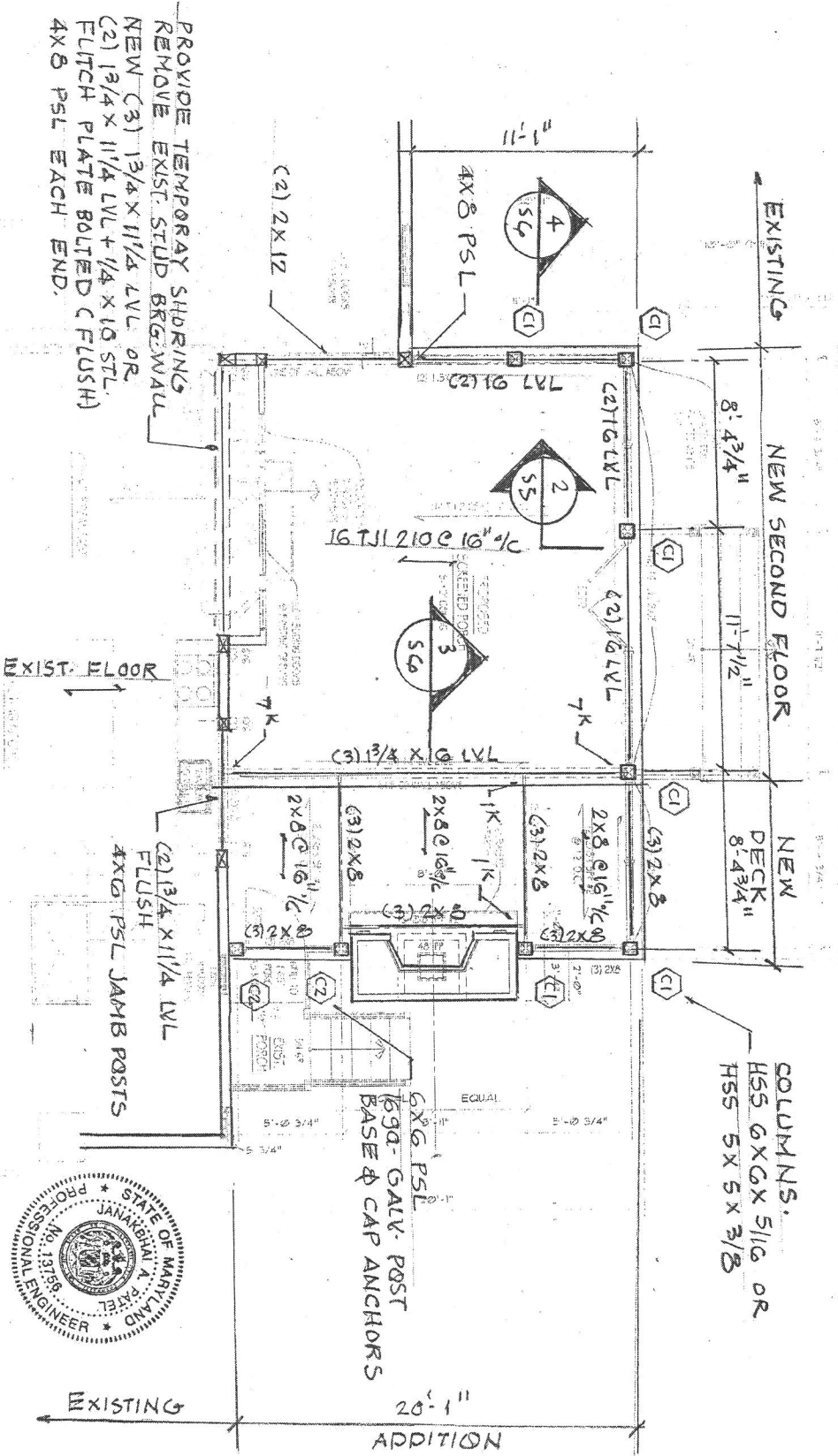
NOTE 1:  
 4" CONC. SLAB, 6" X 6" W/ 4 X W/ 4 WWF  
 6 MIL. POLY, 4" WASHED GRAVEL  
 CONTROL JOINTS @ 15' C EA WAY

CONTROLLED COMPACTED FILL IS REQUIRED TO MINIMIZE SETTLEMENT.



PROFESSIONAL CERTIFICATION  
 I certify that these documents were prepared or approved by me, and that I am a duly licensed engineer under the laws of the State of Maryland, License No. 13756. Expiration date: 12-23-2017  
 Jankhraj A. Patel Date: 1/16

FIRST FLOOR FOUNDATION PLAN  
 1/4" = 1'-0"



PROVIDE TEMPORARY SHORINGS  
 REMOVE EXIST. STUD BRG. WALL  
 NEW (3) 1 3/4 X 1 1/4 LVL OR  
 (2) 1 3/4 X 1 1/4 LVL + 1/4 X 10 STL.  
 FLITCH PLATE BOLTED (FLUSH)  
 4X8 PSL EACH END.

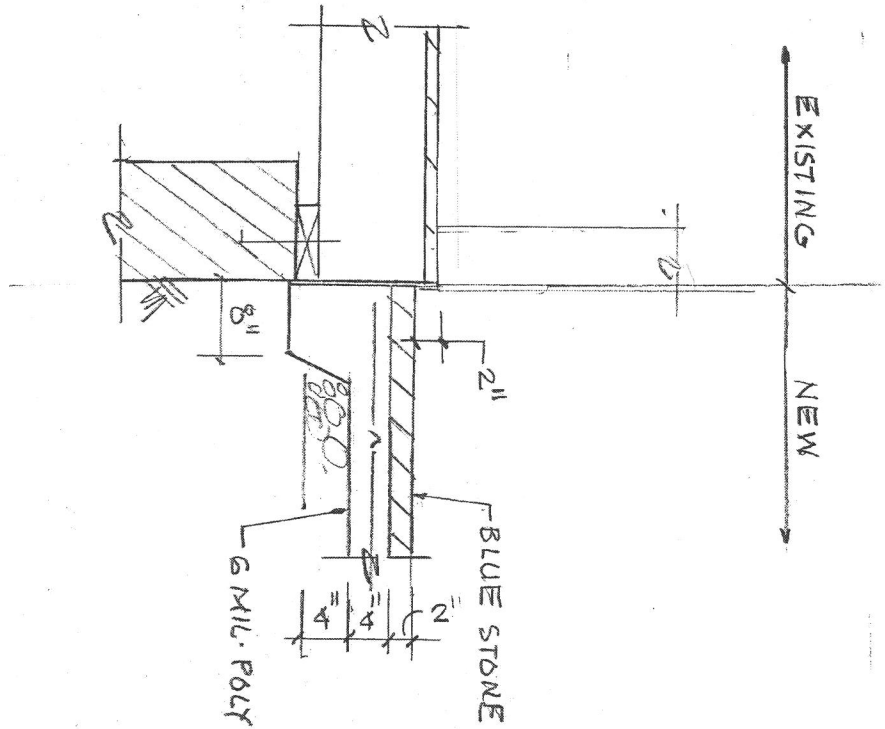
SECOND FLOOR FRAMING PLAN

1/4" = 1'-0"

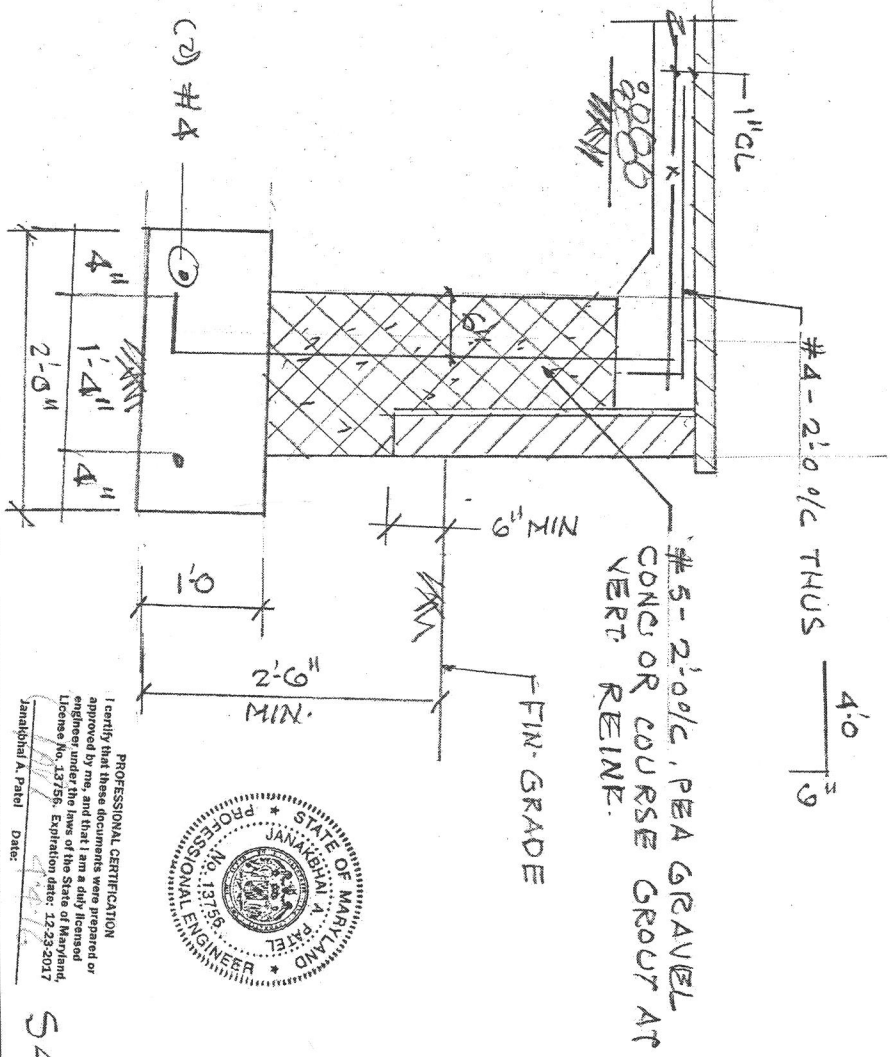


PROFESSIONAL CERTIFICATION  
 I certify that these documents were prepared or  
 approved by me, and that I am a duly licensed  
 engineer under the laws of the State of Maryland,  
 License No. 13136, Expiration date: 12-23-2017  
 Jamshikan A. Patel Date: 12/12/17

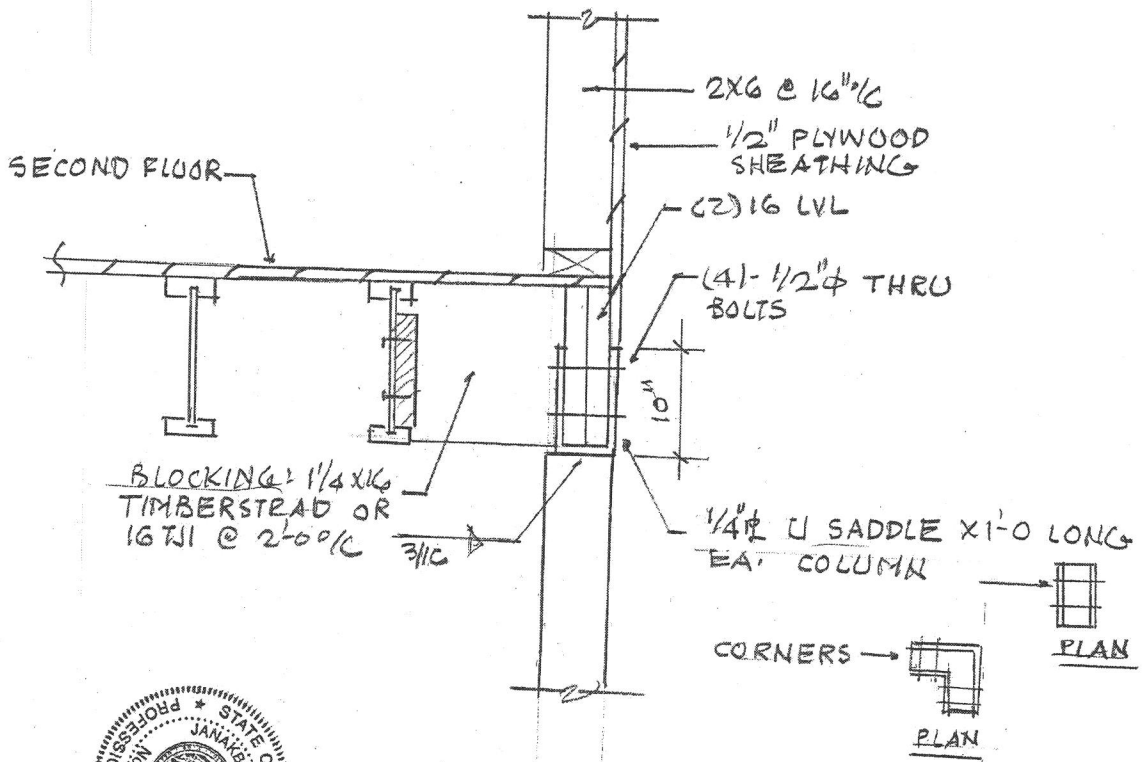




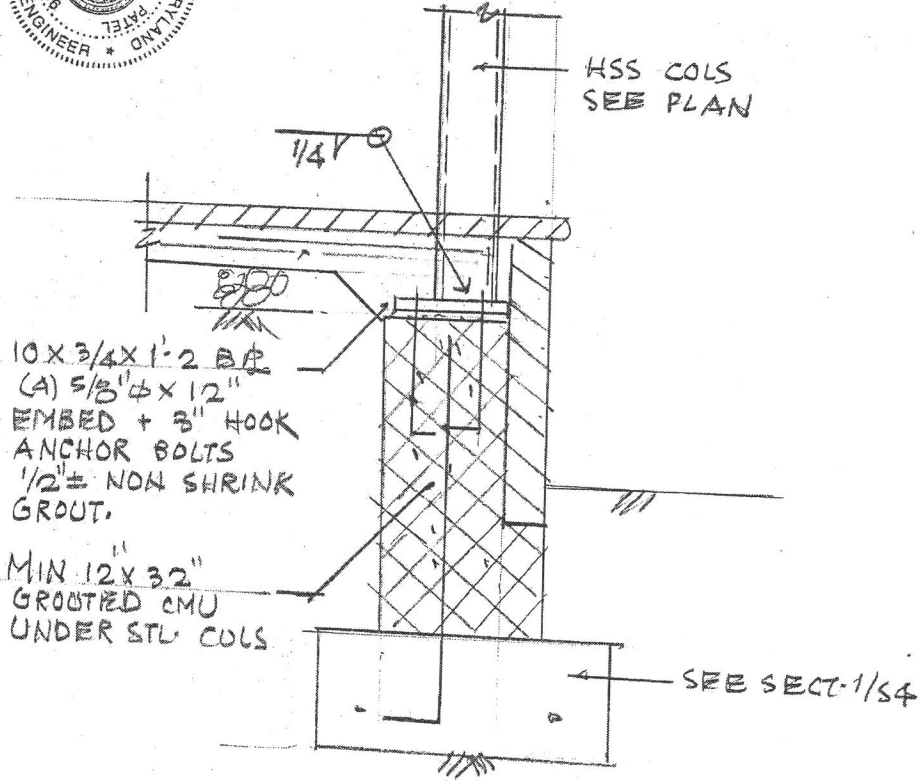
SECTION -  $\frac{1}{54}$   
 1" = 1'-0"



PROFESSIONAL CERTIFICATION  
 I certify that these documents were prepared or approved by me, and that I am a duly licensed engineer under the laws of the State of Maryland, License No. 13756. Expiration Date: 12-31-2017  
 Janakshim A. Patel Date: 1/1/18

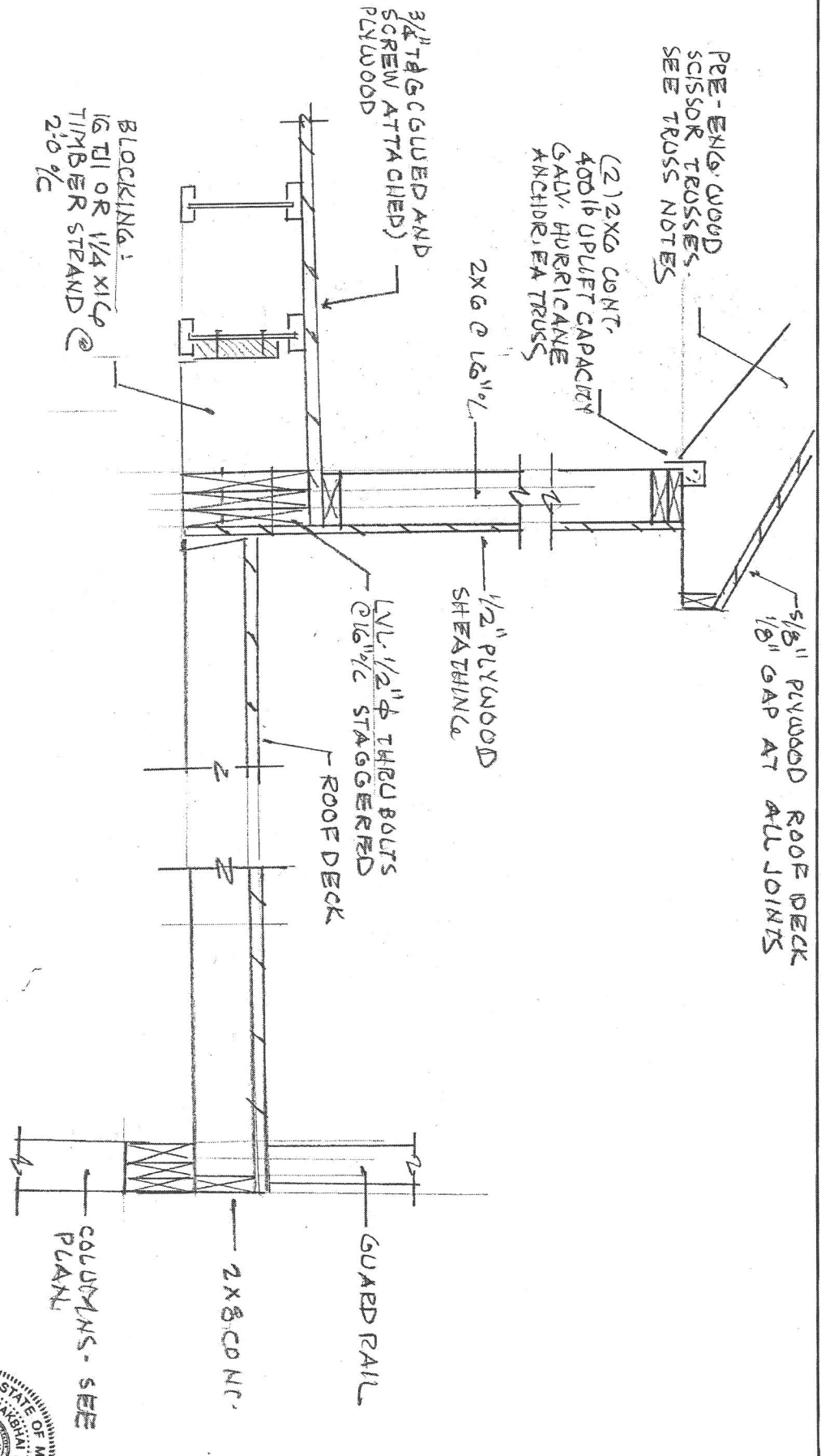


PROFESSIONAL CERTIFICATION  
 I certify that these documents were prepared or approved by me, and that I am a duly licensed engineer under the laws of the State of Maryland. License No. 13156. Expiration date: 12-23-2017.  
 Jamshah A. Patel Date: \_\_\_\_\_



SECTION 2  
55  
 ~ 1" = 1'-0"

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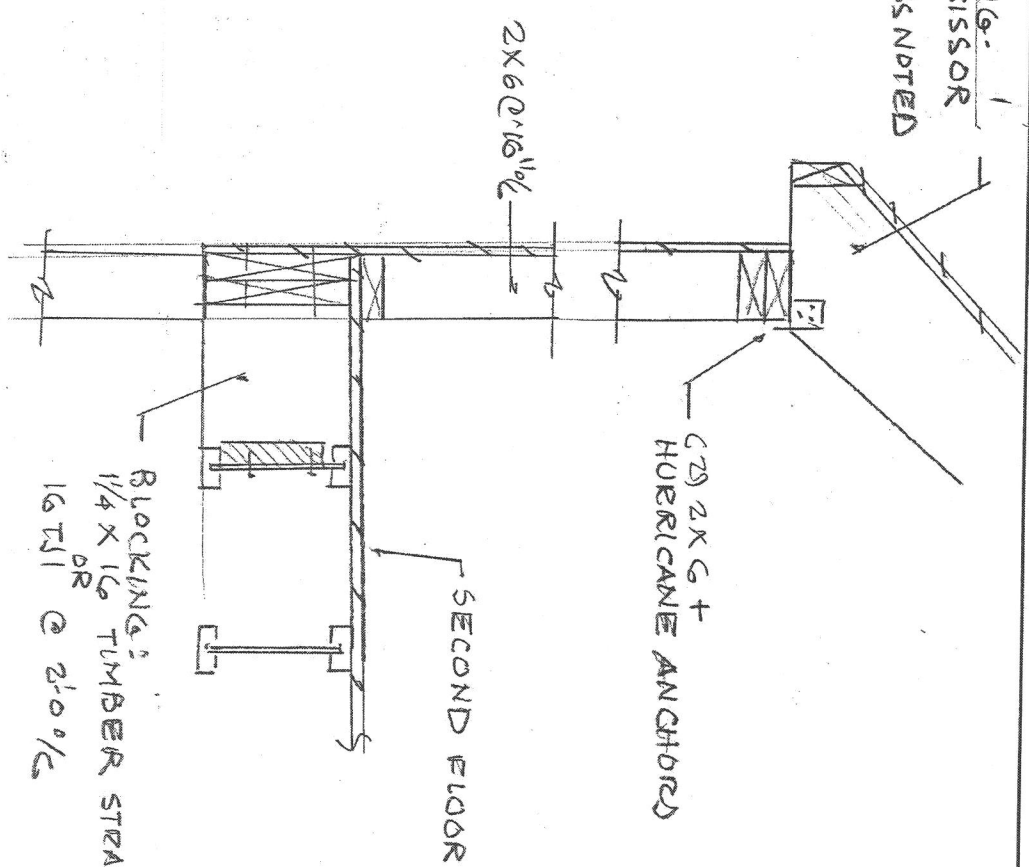


SECTION - 3  
56

PROFESSIONAL CERTIFICATION  
 I certify that these documents were prepared or approved by me, and that I am a duly licensed engineer under the laws of the State of Maryland, License No. 13756. Expiration date: 12-23-2017  
 Janabhai A. Patel Date: 4/1/17



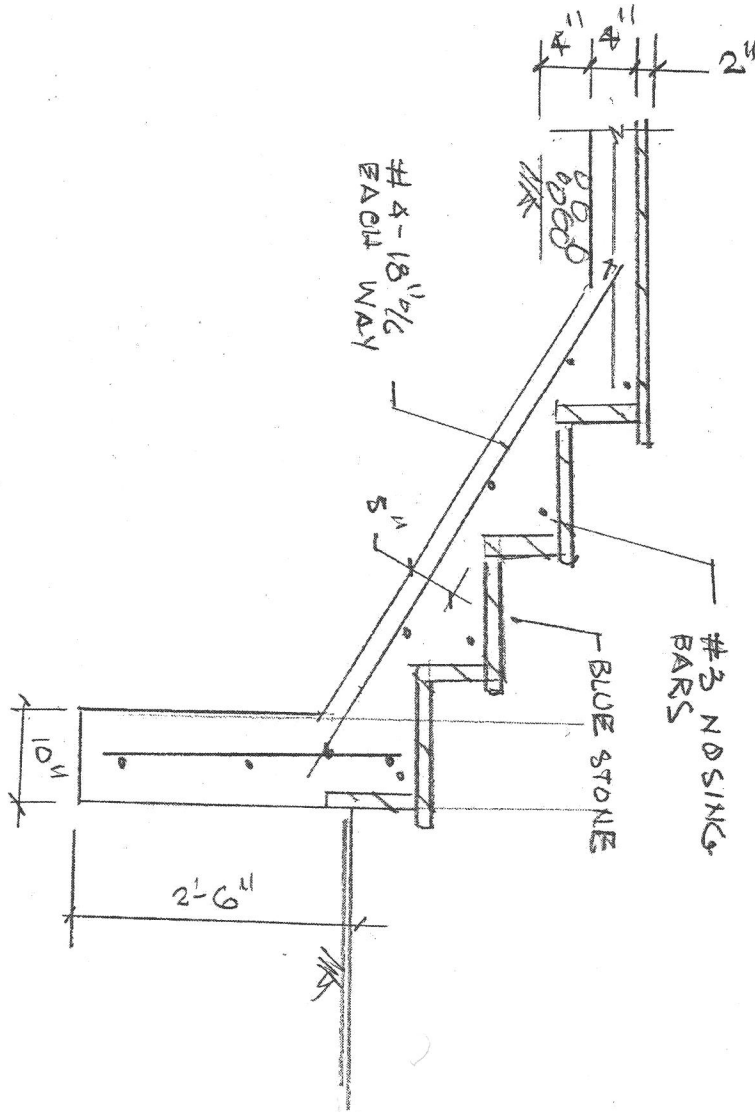
PRE-ENG. WOOD SCISSOR TRUSSES SEE TRUSS NOTED



SECTION -



PROFESSIONAL CERTIFICATION  
 I certify that these documents were prepared or approved by me, and that I am a duly licensed engineer under the laws of the State of Maryland, License No. 13756. Expiration date: 12-31-2017  
 Janakrishnan A. Patel Date: 4/1/17



SECTION - (S/8)



PROFESSIONAL CERTIFICATION  
 I certify that these documents were prepared or approved by me, and that I am a duly licensed engineer under the laws of the State of Maryland, License No. 13756. Expiration date: 12-23-2017  
 JANAABHAI A. PATEL Date: 4/2/16

GENERAL NOTES

FOUNDATIONS

BOTTOM OF ALL EXTERIOR FOOTINGS SHALL BE 2'-6" MINIMUM BELOW FINISHED GRADE. A BEARING CAPACITY OF 1,500 PSF. FOR FOOTING DESIGN, HAS BEEN ASSUMED. IF SOIL OF THIS CAPACITY IS NOT ENCOUNTERED AT ELEVATIONS INDICATED ON PLAN, FOOTINGS SHALL BE INCREASED IN SIZE OR LOWERED AS DIRECTED BY THE STRUCTURAL ENGINEER.

CAST IN PLACE CONCRETE AND REINFORCING

1. BUILDING CODE REQUIREMENTS FOR REINFORCED CONCRETE (ACI 319-02)
2. SPECIFICATIONS FOR STRUCTURAL CONCRETE (ACI 301)
3. HOT WEATHER CONCRETING (ACI 305)
4. COLD WEATHER CONCRETING (ACI 306)

CONCRETE SHALL HAVE A 28 DAY COMPRESSIVE STRENGTH ( $f'c$ ) = 3,000 PSI, MAXIMUM W/C = 0.55  
EXPOSED TO WEATHER, EXTERIOR CONCERTE = 4,500 PSI, AIR-ENTRAINED, MAXIMUM W/C = 0.45

CONCRETE MATERIALS

REINFORCING - ASTM A 615, GRADE 60 DEFORMED.  
WELDED WIRE FABRIC - ASTM A 185.  
SPICE LAPS FOR ALL REINFORCING SHALL BE CLASS "B" SPLICE.  
CEMENT - ASTM C 150, TYPE I OR III.  
COARSE AGGREGATE - SIZE #67.  
COARSE AGGREGATE FOR TOPPING SLABS, MASONRY FILL & CONCRETE FILL 3" AND LESS IN THICKNESS SHALL BE 1/2" MAXIMUM.

MASONRY

MASONRY WORK SHALL COMPLY WITH THE FOLLOWING STANDARDS:  
1. BUILDING CODE REQUIREMENTS FOR MASONRY STRUCTURES (ACI 530.2/ASCE 6 )  
2. SPECIFICATION FOR MASONRY STRUCTURES (ACI 530.1-02)  
3. UNLESS NOTED PROVIDE CONTROL JOINTS IN MASONRY AT A MAXIMUM SPACING OF 30'-0"

MASONRY MATERIAL

CONCRETE MASONRY UNITS, ASTM C 90.  
CONCRETE MASONRY UNITS SHALL HAVE MINIMUM COMPRESSIVE STRENGTH OF 1,900 PSI AND A MINIMUM PRISM STRENGTH OF  $F_{m'} = 1,500$  PSI.  
BRICK UNITS, ASTM SPECIFICATION C 216.  
MORTAR, ASTM C 270  
MASONRY VENEER, TYPE N  
ALL OTHER MASONRY, TYPE S  
GROUT, ASTM C 476,  $F_m = 2,000$  PSI  
JOINT REINFORCING, ASTM A 951  
SHEET METAL ANCHORS AND TIES, ASTM A 366  
WIRE ANCHORS AND TIES, ASTM A 82  
CONTRACTOR SHALL DESIGN, PROVIDE AND INSTALL WALL BRACING THAT WILL ASSURE STABILITY OF ALL MASONRY AND CONCRETE WALLS DURING CONSTRUCTION.

STRUCTURAL STEEL

FABRICATION AND ERECTION OF STRUCTURAL STEEL SHALL CONFORM TO AISC SPECIFICATIONS AND AISC D1.1  
TUBE STEEL: ASTM A 500, GRADE B ( $F_y = 46$  KSI).  
PLATE, BARS, ANGLE, CHANNEL, ASTM A 36 ( $F_y = 36$  KSI)  
STRUCTURAL BOLTS, ASTM A 325, NUTS, ASTM A 563, WASHERS, ASTM F 436  
WELDING ELECTRODES: E70XX  
HIGH STRENGTH BOLTS: ASTM A 325  
ANCHOR BOLTS: ASTM A 307  
BASE PLATE AND BEARING PLATE GROUT, ASTM C 1107, NON-METALLIC, NON-SHRINK GALVANIZING OF STRUCTURAL STEEL. ASTM A 123 AND ASTM A 153 FOR HARDWARE (SURFACE PREPARATION PER SSPC, SP-6).  
SHOP COAT ALL STRUCTURAL STEEL WITH APPROVED PRIMER, UNLESS NOTED, BEAM CONNECTIONS SHALL BE DESIGNED TO SUPPORT 50% BEAM WEB SHEAR CAPACITY PER AISC, UNLESS NOTED.

WOOD FRAMING

ALL STRUCTURAL TIMBER SHALL CONFORM TO THE REQUIREMENTS OF THE "TIMBER CONSTRUCTION MANUAL", PREPARED BY THE AMERICAN INSTITUTE OF WOOD CONSTRUCTION.  
WOOD SHALL BE SOUTHERN PINE OR DOUGLAS FIR, WITH A MINIMUM  $F_b = 1,000$  PSI AND  $E = 1,400,000$  PSI.  
PLYWOOD FLOOR DECK SHALL BE TONGUE AND GROOVE, APA RATED STURD-I-FLOOR WITH A SPAN RATING OF 24 O.C., EXPOSURE-1  
PLYWOOD ROOF SHEATHING SHALL BE APA RATED SHEATHING 32/16, EXPOSURE-1.  
USE MINIMUM PLYWOOD THICKNESS AS SPECIFIED ON DRAWINGS.  
ALL MICRO-LAMS (ML) SHOWN ON THESE DRAWINGS SHALL CONFORM TO TRUSS JOIST CORPORATION'S SPECIFICATIONS.  
LVL (MICRO-LAM = LAMINATED VENEER LUMBER) SHALL HAVE A MINIMUM  $F_b = 2,600$  PSI,  $E = 1,900,000$  PSI AND  $F_v = 285$  PSI.  
ALL CONNECTORS SHALL BE GALVANIZED AND AS MANUFACTURED BY TECO OR APPROVED EQUAL AND SHALL BE THE TYPE AS RECOMMENDED BY THE MANUFACTURER FOR THE INTENDED USAGE UNLESS OTHERWISE NOTED ON THE DRAWINGS.

INSPECTION

AN INDEPENDENT INSPECTION AGENCY SHALL BE RETAINED TO INSPECT/MONITOR/TEST THE ITEMS LISTED BELOW  
1. CAST IN PLACE CONCRETE TABLE 1705.3  
2. EARTHWORK TABLE 1705.6  
3. WOOD FLOOR FRAMING  
4. PRE-ENGINEERED WOOD TRUSS SYSTEM

PROFESSIONAL CERTIFICATION

I certify that these documents were prepared or approved by me, and that I am a duly licensed Professional Engineer in the State of Maryland, License No. 131750, Expiration date: 12-23-2017

Jamshahat A. Patel Date: \_\_\_\_\_



**LIVE LOADS**

THIS BUILDING ADDITION HAS BEEN DESIGNED FOR THE FOLLOWING SUPERIMPOSED LOADS.

GOVERNING CODES:

IBC 2015 AND IRC 2015

MINIMUM DESIGN LOADS FOR BUILDINGS & OTHER STRUCTURES (ASCE 7-10)

FIRST FLOOR LIVE LOAD = 40 PSF

SECOND FLOOR LIVE LOAD = 30 PSF

ROOF LIVE LOAD = 30 PSF

WIND = 20 PSF (NET UPLIFT)

GROUND SNOW LOAD

PLAT ROOF SNOW LOAD

SNOW EXPOSURE FACTOR

IMPORTANCE FACTOR

THERMAL FACTOR

= 30 PSF  
Pf = 21 PSF  
Ce = 0.90  
= 1.0  
= 1.0

WIND LOAD:

BASIC WIND SPEED (3 SECOND GUST)

EXPOSURE

WIND IMPORTANCE FACTOR

= 115 MPH  
= B  
= 1.0

**EARTHQUAKE DESIGN DATA:**

SEISMIC RISK CATEGORY

SEISMIC DESIGN CATEGORY

ASSUMED SITE CLASS

SPECTRAL RESPONSE ACCELERATION

SPECTRAL RESPONSE COEFFICIENT

SEISMIC IMPORTANCE FACTOR

BASIC SEISMIC FORCE RESISTING SYSTEM: STEEL FRAMING

ANALYSIS PROCEDURE: EQUIVALENT LATERAL FORCE PROCEDURE

II  
B  
D  
Ss = 0.16  
S1 = 0.051  
Sds = 0.17  
Sd1 = 0.082  
= 1.00



**PROFESSIONAL CERTIFICATION**

I certify that I have read and approved the design and that I am a duly licensed engineer under the laws of the State of Maryland. License No. 13756. Expiration date: 12/23/2017.

Jankibhai A. Patel Date: 12/23/17

**FASTENING SCHEDULE**

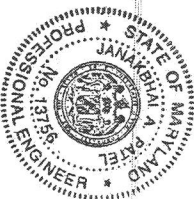
1. JOISTS TO SILL OR GIRDER
2. BRIDGING TO JOIST
3. SOLE PLATE TO JOISTS OR BLOCKING
4. TOP PLATE TO STUD
5. STUD TO SOLE PLATE
6. DOUBLE STUDS
7. DOUBLE TOP PLATE
8. BLOCKING BETWEEN JOISTS OR RAFTERS TO TOP PLATE
9. RIM JOISTS TO TOP PLATE
10. TOP PLATE, LABS AND INTERSECTIONS
11. CONTINUOUS HEADER, TWO PIECES
12. CONTINUOUS HEADER TO STUD
13. RAFTER TO TOP PLATE
14. BUILT UP CORNER STUDS
15. BUILT UP GIRDER AND BEAMS
16. COLLAR TIES TO RAFTER
17. JACK RAFTER TO HIP
18. ROOF RAFTER TO SINGLE 2x RIDGE BEAM
19. ROOF RAFTER TO RIDGE BEAM
20. JOIST TO RIBBON BOARD
21. CORNER STUDS
22. WOOD STRUCTURAL WALL PANEL SHEATHING
23. PLYWOOD OR OSB DECKING LOCATIONS

- (3) 8d COMMON (0.131" DIA. x 2 1/2"), TOENAIL
- (2) 8d COMMON, TOE NAIL EACH END
- 16d NAILS @ 16"o.c.
- (2) 16d COMMON (0.162" DIA. x 3 1/2") END NAILS
- (4) 8d COMMON OR (2) 16d COMMON
- 16d @ 24"o.c.
- 16d @ 16"o.c.
- (3) 8d COMMON, TOENAIL
- 8d @ 6"o.c.
- (2) 16d COMMON
- 16d COMMON @ 16"o.c.
- (4) 8d COMMON, TOENAIL
- (3) 8d COMMON, TOENAIL
- 16d @ 16"o.c.
- 20d @ 24"o.c., FACE NAIL AT TOP AND BOTTOM STAGGERED ON OPPOSITE SIDES, UNLESS NOTED ON DWGS TO BE THROUGH BOLTED
- (4) 12d FACE NAIL
- (3) 10d COMMON, TOENAIL
- (2) 16d COMMON, TOENAIL
- JOIST HANGERS, MINIMUM 500 LB. SHEAR CAPACITY
- (3) 16d, FACE NAIL
- 16d COMMON 12"o.c. FACE NAIL
- 16d COMMON @ 6"o.c. INTO TOP PLATE, 8d COMMON @ 6"o.c. AT ALL EDGES AND 12"o.c. AT ALL OTHER LOCATIONS
- 6d COMMON @ 6"o.c. AT EDGES, 12"o.c. AT ALL OTHER LOCATIONS

**ROOF TRUSS NOTES**

1. CONTRACTOR SHALL BE RESPONSIBLE FOR THE DESIGN, FABRICATION AND ERECTION OF THE WOOD TRUSSES.
2. TRUSSES SHALL BE DESIGNED FOR THE LOADS INDICATED PLUS APPLICABLE SNOW DRIFT AS REQUIRED BY CODE
3. NO INCREASE ALLOWABLE STRESS, PLATE INCREASE, LUMBER INCREASE, REPEATATIVE STRESS INCREASE OR ANY OTHER TYPES OF LOAD REDUCTION OR STRESS INCREASES WILL BE PERMITTED.
4. TRUSS DESIGN SHALL INCLUDE ALL TEMPORARY AND PERMANENT BRACING (TO BE DESIGNED AND DETAILED BY A REGISTERED PROFESSIONAL ENGINEER RETAINED AND PAID BY THE TRUSS CONTRACTOR), PERMANENT BRACING TO BE ATTACHED TO THE WALLS EXCEPT AT EXPANSION JOINTS.
5. TRUSS CONFIGURATIONS SHOWN ARE EXAMPLES ONLY. DESIGN COMPUTATIONS AND SHOP DRAWINGS, SIGNED AND SEALED BY A PROFESSIONAL ENGINEER REGISTERED IN THE STATE OF PROJECT LOCATION SHALL BE SUBMITTED INCLUDING ALL CONNECTIONS AND ERECTION DETAILS FOR REVIEW AND APPROVAL BY THE DESIGN TEAM. PROFESSIONAL ENGINEER SHALL VISIT THE SITE TO CONFIRM THAT THE TRUSSES, AS ERRECTED, ARE IN ACCORDANCE WITH THE DESIGN. ALL TRUSS CONNECTIONS TO FULLY DEVELOP STRESSES IN MEMBER (NO ALLOWANCE FOR END BEARING WILL BE PERMITTED) PLUS ANY ECCENTRICITIES CAUSED BY CONNECTIONS, CONNECTORS TO BE USED IN STRICT ACCORDANCE WITH MANUFACTURERS SPECIFICATIONS. ALL CONNECTORS TO BE GALVANIZED.
6. ROOF TRUSSES SHALL BE DESIGNED TO COMPLY WITH LOADS AS INDICATED BELOW:
 

TOP CHORD	DEAD LOAD	=10 PSF
	LIVE LOAD	=30 PSF (SEE NOTE 5 ABOVE)
BOTTOM CHORD	NEW UPLIFT	=20 PSF
	DEAD LOAD	=10 PSF
MAXIMUM LIVE LOAD DEFLECTION		=SPAN/360



PROFESSIONAL CERTIFICATION  
 I certify that these documents were prepared or approved by me, and that I am a duly licensed Professional Engineer under the laws of the State of Maryland, License No. 13756. Expiration date: 12-23-2017.  
 Jamshahid A. Patel Date: 4/11/17

9/19/86  
9/22/86  
1 PM  
H. L. M. R.

03-310949

9-22-86  
Approved  
S. Paul

# PERMIT

P 37666

SEWAGE DISPOSAL SYSTEM

A 35682

MARYLAND STATE DEPARTMENT OF HEALTH

**HOWARD COUNTY**  
BUREAU OF ENVIRONMENTAL HEALTH  
992-2330x  
461-9933

## INDEXED

**ELLCOTT CITY**  
DISTRICT 3rd

DATE 9/17/86

Merit Construction IS PERMITTED TO INSTALL  ALTER

ADDRESS \_\_\_\_\_ PHONE 442-1490

SUBDIVISION Gaither Farms ROAD 11024 Gaither Farm LOT 22

PROPERTY OWNER GYC Builders JOHN P. BROZOVICH

ADDRESS \_\_\_\_\_

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES \_\_\_\_\_ NO

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

**TRENCHES** - 174 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 9 feet below original grade. Effective area begins at 4 feet below original grade. 5 feet of stone below distribution pipe.

**LOCATION** - Place 1st trench 290 feet down the left (771.95) lot line and 35 feet off the left lot line as seen when facing the property from the road. Run trenches along contour towards the right lot line.

**NOTE** - No trench to exceed 100 feet in length. If more than one trench used, a distribution box is required. Trenches to be installed on level ground. Call for inspection of trench(s) before and after gravel is installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

PLANS APPROVED BY B. Nixon DATE 5/15/86

COVER NO WORK UNTIL INSPECTED AND APPROVED.

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

NOTE: IF TRENCH IS USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH.

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER. NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH.

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 40 PVC OR ABS.

PERMIT VOID AFTER THREE YEARS.

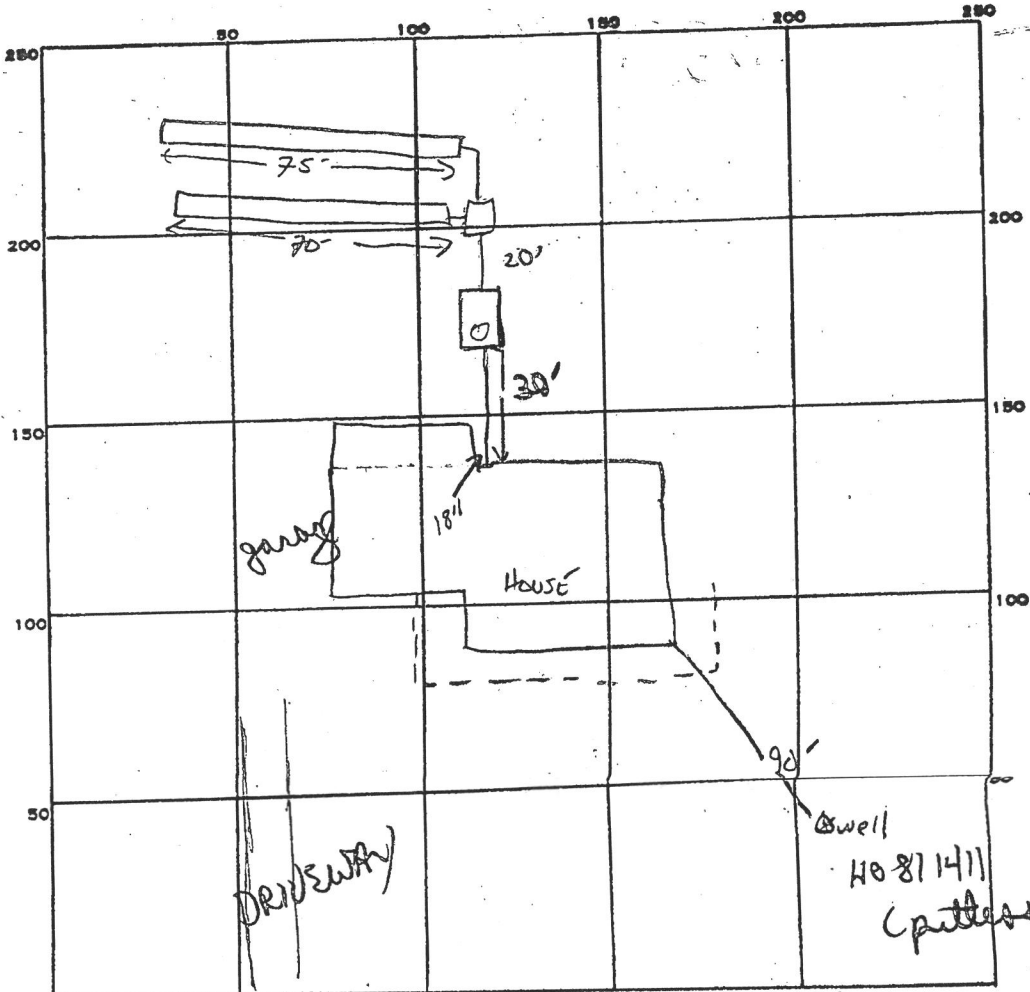
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

**\*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

\*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

A  
35682



2/1  
174  
1/4  
596  
5644  
19

INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.  
Gwinnett Co. Rd.

9/19/86  
+ exposed open  
had then plan  
to close tip  
with line  
(placed)

PERMIT CARD

SEPTIC TANK, LEVEL 1500 gal CLEANOUTS  ST

DISTRIBUTION BOX, LEVEL

TILE FIELD, DEPTH 9 FT. TRENCH WIDTH 2 FT. TOTAL 145

GRAVEL DEPTH 5' IN. TOTAL LENGTH 70 75 FT.

NUMBER OF TRENCHES 2 1 SIDE WALL TOTAL BOTTOM AREA 725 sq

SEEPAGE PITS, INSIDE DIAMETER \_\_\_\_\_ FT. DEPTH BELOW INLET \_\_\_\_\_ FT.

ABSORBENT AREA 725 SQ. FT.

REMARKS 9/17/86 15' HOUSE STUB OK TO BE COVERED BY RAISED DECK, CW.  
9/19/86 Tank in, OK to cement lines, add e/d & cover. Same  
to dist box (box to remain open). OK to start 1st trench 10'  
closer.

5/15/86

SUBDIVISION: **GATHER FARMS  
(GYC BUILDERS)**

A 35682

LOT NUMBER: 22

DRY WELL OR DRY WELL AND TRENCH

	Septic Tank	_____ sq. ft./bedroom
		<u>Minimum Total square Feet</u>
3 bedroom	1000 gallon	_____
4 bedroom	1250 gallon	_____
5 bedroom	1500 gallon	_____

Inlet \_\_\_\_\_ feet below original grade.  
 Bottom maximum depth \_\_\_\_\_ feet below original grade.  
 Effective area begins at \_\_\_\_\_ feet below original grade.

NOTE: If trench is used to make up absorbent area, run the trench on level ground and leave a 5 foot earth buffer between dry well and trench. No trench is to exceed 100 feet in length. Trench inlet to be same as dry well, with \_\_\_\_\_ feet of stone below distribution pipe.

TRENCHES

174 sq. ft./bedroom

Trench to be 2 wide.  
 Inlet 4 feet below original grade.  
 Bottom maximum depth 9 feet below original grade.  
 Effective area begins at 4 feet below original grade.  
5 feet of stone below distribution pipe.

*2-85' trenches  
 will accommodate  
 up to a 4 BR house*

- NOTE:
- (1) No trench to exceed 100 feet in length.
  - (2) If more than one trench used, a distribution box is required.
  - (3) Trenches to be installed on level ground.
  - (4) Call for inspection of trench before gravel is installed.
  - (5) Provide 6"-8" diameter cleanout and cap to grade or above on septic tank and drywell.
  - (6) If a Garbage disposal is used, increase septic tank capacity by 50% and increase absorbant sidewall area by 22%.

LOCATION: PLACE 1ST TRENCH 290 FT DOWN THE LEFT (771.95) LOT LINE AND 35' OFF THE LEFT LOT LINE AS SEEN WHEN FACING THE PROPERTY FROM THE ROAD. RUN TRENCHES ALONG CONTOUR TOWARDS THE RIGHT LOT LINE.

BY: DEBRA HANCOCK

6-12-86

# APPLICATION

25

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: 992-2330

A 35682

P \_\_\_\_\_

DISTRICT 3

DATE 4/20/85

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.

Owner: Phillip Dorosh  
Purchaser: Patrick McLean Gaither Farm Ltd.  
PROPERTY OWNER 1000 Equitable Bank Co.  
ADDRESS Columbia, MD 21044

PHONE 730-9091

NEW 22 (PLS RE-USE)  
25 PLANS

PROPERTY LOCATION:

SUBDIVISION Gaither Farms LOT NO. \_\_\_\_\_

ROAD AND DESCRIPTION Honewood Rd + Route 108  
11024 Gaither Farm Rd

SIZE OF LOT 3 acres TYPE BLDG. 3-5  
(NUMBER OF BEDROOMS)

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. Christine Richards  
(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING 7/8/85 PERC OK HOLD FOR PLAT RH

B.P.# 70914  
BDDG. PERMIT SIGNED  
AND RETURNED 6/2/85

# THIS IS NOT A PERMIT



# APPLICATION

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: 992-2330

A 35682

P \_\_\_\_\_

DISTRICT 3

DATE 6/20/85

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 Richard McLean

ADDRESS Columbia, MD 21044 PHONE 731-9091

PROPERTY LOCATION: 29 MEN

SUBDIVISION Gritter Farm LOT NO. 25 REVISED

ROAD AND DESCRIPTION Howard Rd & Route 118 PLAT

SIZE OF LOT 3 acres TYPE BLDG. 3-5  
(NUMBER OF BEDROOMS)

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.

Christine Richards  
(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

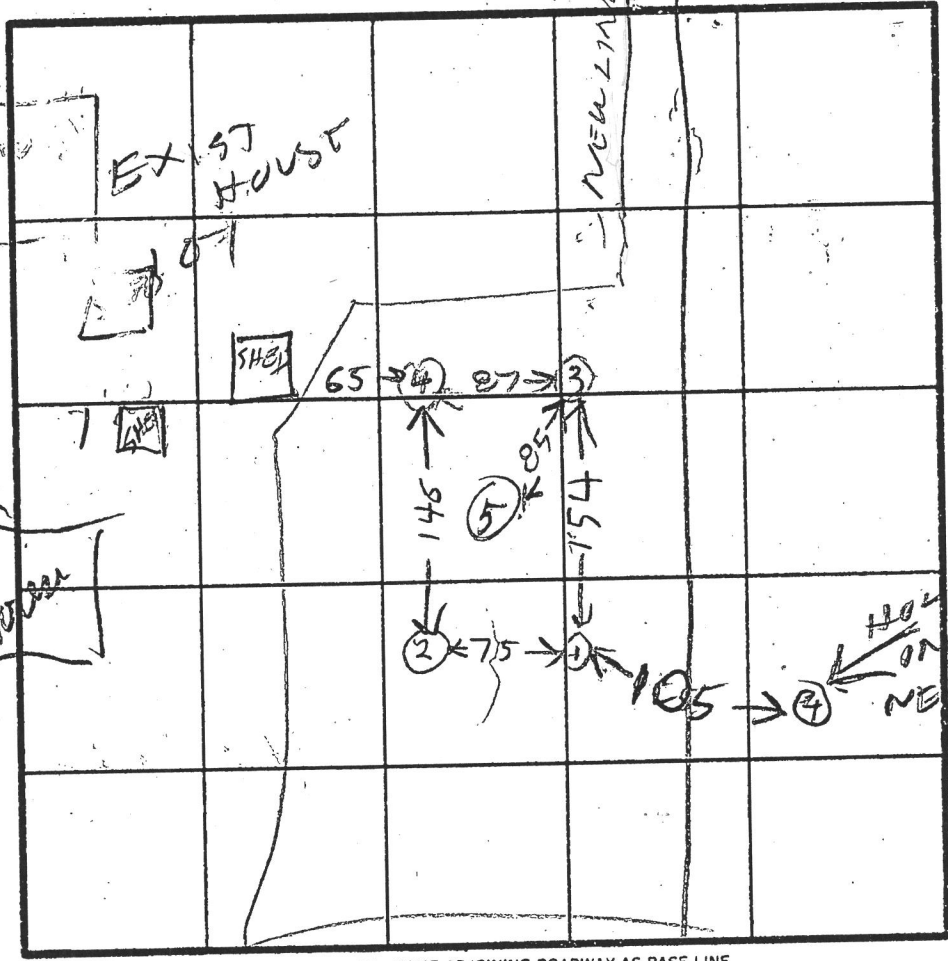
HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING \_\_\_\_\_

## THIS IS NOT A PERMIT

99  
60  
1.4

NE



HOLD ELEVATION  
 (3/4) = HIGH  
 (1/2) = LOW  
 (5) = MED

(5)  
 BROWN CLAY TOPSOIL  
 BROWN SAND LOAM

SOIL PROFILE (1)(3)  
 BROWN CLAY LOAM  
 GRAY SAND LOAM

(2)  
 BROWN CLAY LOAM  
 GRAY SAND LOAM

(4)  
 BROWN CLAY  
 BROWN SAND LOAM  
 GRAY SAND LOAM

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
7/18/88	1 S	4.5	246	247	247	249	2
	1 D	9.5	247	248	248	249	1
	1 V	11.5	LOOKS	OK			
	2 S	4	252	254	254	257	3
	2 D	8.5	253	256	256	300	4
	2 V	12	LOOKS	OK			
	3 S	4.5	307	308	300	310	2
	3 D	8.5	307	309	300	310	2
	3 V	12	LOOKS	OK			
	4 D	8.5	318	321	321	325	4
	4 S	4.5	319	321	321	325	4
	4 V	12.5	LOOKS	OK			
	5 V	14	LOOKS	OK			

av time  
 3  
 max depth  
 3 ft

REMARKS: NEW PLAT TO BE SUBMITTED SHOWING NEW W/OP LINES  
 TYPE OF SOIL: \_\_\_\_\_  
 TESTED BY: R. HODGES  
 DATE: 5/17/88  
 ALSO PRESENT: DAVE & J NAIDUE

01-PRLO PROJECT

B 1 **4596** SEQUENCE NO. (OEP USE ONLY)

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND  
PERMIT TO DRILL WELL

please print or type

OEP PERMIT NUMBER

**HO-81-1411**

fill in this form completely

Date Received **4/25/86**

OWNER INFORMATION

**GVC BUILDERS**

15 Last Name 13 Owner First Name 34

**11673 FARSIDE RD**

36 Street or RFD 55

**ELLICOTT CITY MD 21043**

57 Town 70 State 72 Zip 76

B 3 LOCATION OF WELL

**HOGARL**

8 COUNTY 21

**GAITHER FARMS**

23 SUBDIVISION 42

SECTION **44 46** LOT **22**

48 50

**ELLICOTT CITY**

52 NEAREST TOWN 71

MILES FROM TOWN (enter 0 if in town) **0** MI

73 76 77 78

DRILLER INFORMATION

**Joseph L. Wayne** **238**

Driller's Name 77 License No. 80

**Joseph L. Wayne Well Drilling**

Firm Name

**5512 Bridle Rd Mt. Airy, Md. 21771**

Address

**Joseph L. Wayne** **3/24/86**

Signature Date

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

**Daither Farm Road**

11 NEAR WHAT ROAD 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

NORTH N  
WEST W 32 E  
SOUTH S

**60**

34 37 DISTANCE FROM ROAD

ENTER FT or MI **FT**

38 39

B 2 WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) **5**

8 12

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **500**

14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)

FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)

INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)

PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)

TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

**HOWARD** **A 35682**

COUNTY NAME COUNTY NO.

OEP SIGNATURE STATE HEALTH INSERT S

DATE ISSUED **040386 B. Nolon 10/03/86**

43 48 CO SIGNATURE EXP. DATE

NORTH GRID **511 0 0 0** EAST GRID **0829 0 0 0**

50 55 57 63

APPROXIMATE DEPTH OF WELL **300** FEET

24 28

APPROXIMATE DIAMETER OF WELL **6** NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (or Augered)  JETTED  Jetted & DRIVEN

30

AIR-ROTARY  AIR-PERCussion  ROTARY (Hydraulic Rotary)

37

CABLE  REVERSE-ROTARY  DRIVE-POINT

other \_\_\_\_\_

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

THIS WELL WILL NOT REPLACE AN EXISTING WELL

THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED

39  THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY

THIS WELL WILL DEEPEM AN EXISTING WELL

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

41 52

Not to be filled in by driller (OEP USE ONLY)

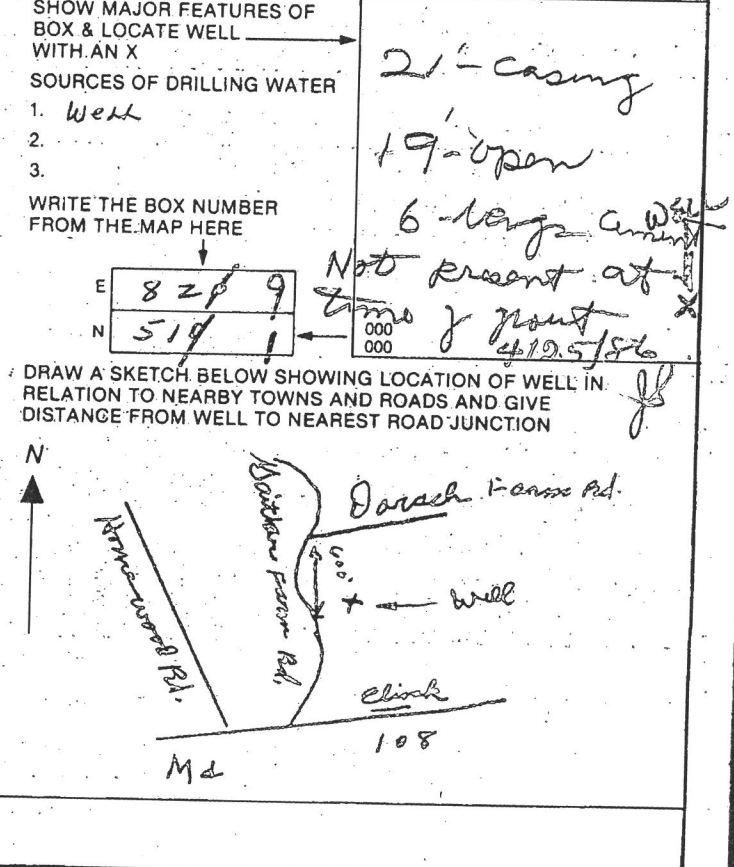
APPROP. PERMIT NUMBER \_\_\_\_\_ GAP \_\_\_\_\_

54 63

FORCE **10** WRITE INITIALS IN BOX PERMIT No. **HO-81-1411**

67 68 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS





C1-00468

SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

COUNTY NUMBER A-35682

DATE Received

DATE WELL COMPLETED 042986

Depth of Well 145 (TO NEAREST FOOT)

PERMIT NO. HO-81-1411

OWNER BUILDERS GYC STREET OR RFD GATHERERS FARM RD TOWN ELICAT CITY SUBDIVISION GATHER FARMS SECTION LOT 22

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), Check if water bearing. Includes entries for SANDSTONE and GRAY GRANITE.

GROUTING RECORD: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL: CEMENT (CM), BENTONITE CLAY (BC), NO. OF BAGS 36, NO. OF POUNDS 564.

CASING RECORD: casing types insert appropriate code below. Codes: ST (STEEL), CO (CONCRETE), PL (PLASTIC), OT (OTHER).

MAIN CASING TYPE: Nominal diameter (nearest inch) 6, Total depth (nearest foot) 21.

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

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

SCREEN RECORD table with columns: DEPTH (nearest ft.), rows for each screen section.

CIRCLE APPROPRIATE LETTER A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 10.17.13 "WELL CONSTRUCTION"

DRILLERS IDENT. NO. 238 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

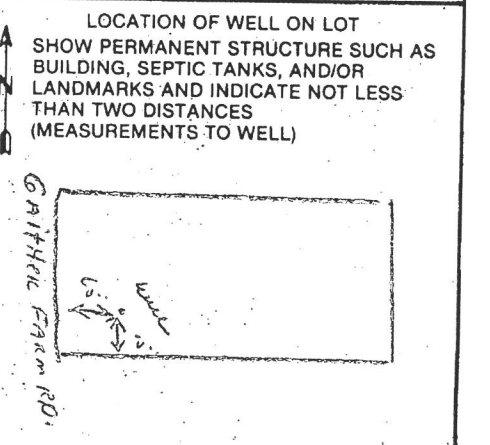
SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH)

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

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.), WQ, TELESCOPE CASING, LOG INDICATOR, OTHER DATA

PUMPING TEST: PUMPING TEST 1 2, HOURS PUMPED (nearest hour) 3, PUMPING RATE (gal. per min. to nearest gal.) 92, METHOD USED TO MEASURE PUMPING RATE bucket, WATER LEVEL (distance from land surface) BEFORE PUMPING 34, WHEN PUMPING 40, TYPE OF PUMP USED (for test) S submersible

PUMP INSTALLED: DRILLER WILL INSTALL PUMP YES NO, IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE, TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE: CAPACITY: GALLONS PER MINUTE (to nearest gallon), PUMP HORSE POWER, PUMP COLUMN LENGTH (nearest ft.), CASING HEIGHT (circle appropriate box and enter casing height) + above, LAND SURFACE (nearest foot) 1





9/17/86 *NR*

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

Howard County Health Department  
Bureau of Environmental Health  
3525-H Ellicott Mills Drive  
Court House Square  
Ellicott City, Md. 21043  
461-9933

New Installation   
Replacement

Receipt # 34662  
Date 9/16/86

Name of Installer Marino Plumbing & Heating Inc

Telephone 747-5615

License number m-3095  
Certified Well Pump Installer

Well Driller  Registered Plumber

Name of Property Owner J. C. Builders

Telephone 301-0554

Subdivision Latlers Farm

Lot # 22 Well tag # - - -

Site Address 11024 Latlers Farm Rd.

Pump

- 1. Type
  - a. Deep well jet
  - b. Shallow well jet
  - c. Submersible

- Motor
  - 1. Horsepower 1/2
  - 2. RPM
  - 3. Voltage 
    - a. 110
    - b. 220

- Pitless Adapter
  - 1. Make Martin
  - 2. Model #
  - 3. Depth

2. Make Roules

3. Model # 70H05412

4. Capacity 7 GPM

5. Pump exceeds well capacity Yes  No

6. If Yes, is low pressure cutoff switch installed? Yes  No  *Putting one in anyway*

7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors  Cable guards  Other

Tank

- 1. Capacity
- 2. Pressure relief valve? YES

- Piping
  - 1. Type AWWA Plastic
  - 2. Size 1"
  - 3. NSF and/or BOCA Code approved YES
  - 4. Depth of supply line 130

- Well data
  - 1. Depth 145 ft.
  - 2. Yield 12 GPM
  - 3. Static water level 34 ft.
  - 4. Will water supply be disinfected by installer? NO

9-17-86 Pitless Installed 70" well LINE AT 70"-74" NO INSIDE WORK BY OWNER-BLDC COMPLETED. S. ABE

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

Signature of Applicant: Joseph D. Marino

Date: 9-16-86

Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.