



# 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: \_\_\_\_\_

Permit No.: B19002576

Building Address: 1765 Florence Rd  
 City: Mont Airy State: MD Zip Code: 21771  
 Suite/Apt. #: \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
 Subdivision: \_\_\_\_\_  
 Lot: \_\_\_\_\_ Tax Map: \_\_\_\_\_ Parcel: \_\_\_\_\_

Existing Use: no building present  
 Proposed Use: garage  
 Estimated Construction Cost: \$ 427,000  
 Description of Work: new detached garage  
1 story - 916 sq ft

Occupant/Tenant Name: \_\_\_\_\_  
 Was tenant space previously occupied?  Yes  No  
 Contact Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Property Owner's Name: Dr. & Mrs. F. J. ...  
 Address: 1765 Florence Rd  
 City: Mont Airy State: MD Zip Code: 21771  
 Phone: 410-977-8903 Fax: \_\_\_\_\_  
 Email: 45770@yale.com

**Applicant's Name & Mailing Address, (If other than stated herein)**  
 Applicant's Name: David ...  
 Address: 1765 Florence Rd  
 City: Mont Airy State: MD Zip Code: 21771  
 Phone: 410-977-8903 Fax: \_\_\_\_\_  
 Email: 410-45770@yale.com

Contractor Company: Home ...  
 Contact Person: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 License No.: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Engineer/Architect Company: \_\_\_\_\_  
 Responsible Design Prof.: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Commercial Building Characteristics	Residential Building Characteristics
Height:	<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse
No. of stories:	Depth Width
Gross area, sq. ft./floor:	1st floor: <u>716</u>
Area of construction (sq. ft.):	2nd floor: _____
Use group:	Basement:
	<input type="checkbox"/> Finished Basement
	<input type="checkbox"/> Unfinished Basement
	<input type="checkbox"/> Crawl Space
	<input type="checkbox"/> Slab on Grade
<b>Construction type:</b>	No. of Bedrooms:
<input type="checkbox"/> Reinforced Concrete	<b>Multi-family Dwelling</b>
<input type="checkbox"/> Structural Steel	No. of efficiency units:
<input type="checkbox"/> Masonry	No. of 1 BR units:
<input type="checkbox"/> Wood Frame	No. of 2 BR units:
<input type="checkbox"/> State Certified Modular	No. of 3 BR units:
	Other Structure:
	Dimensions:
<input checked="" type="checkbox"/> <b>Roadside Tree Project Permit</b>	Footings:
<input type="checkbox"/> Yes <input type="checkbox"/> No	Roof:
<b>Roadside Tree Project Permit #</b>	<input type="checkbox"/> State Certified Modular
	<input type="checkbox"/> Manufactured Home

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

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: \_\_\_\_\_ Print Name: \_\_\_\_\_  
 Email Address: 45770@yale.com Date: 9/18/19  
 Title/Company: \_\_\_\_\_

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

AGENCY	DATE	SIGNATURE OF APPROVAL	DPZ SETBACK INFORMATION	Filing Fee	\$
State Highways			Front:	Permit Fee	\$
Building Officials			Rear:	Tech Fee	\$
PSZA ( Zoning )			Side:	Excise Tax	\$
PSZA ( Engineering )			Side St.:	PSFS	\$
Health	<u>9/18/2019</u>	<u>[Signature]</u>	All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No	Guaranty Fund	\$
			Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No	Add'l per Fee	\$
			Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No	Total Fees	\$
			Lot Coverage for New Town Zone:	Sub- Total Paid	\$
			SDP/Red-line approval date:	Balance Due	\$
				Check	# <u>5077</u>

14  
COMPLETE THIS FORM WHEN DROPPING OFF ANY  
CORRESPONDENCE AND/OR PLANS TO THE HOWARD COUNTY  
DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS COUNTER:

Date: 9/10/19  
To: Annette Merson-Sacks  
(Person's Name and Division)  
From: Orion Ferraro (410) 977-8903  
(Your Name, Company Name and Telephone Number)  
Subject: Project name 1769 Florence Rd.  
Project site address 1769 Florence Rd, Mt. Airy, MD 21777  
Permit # 619002876 SDP # \_\_\_\_\_  
Other information pertinent to this project \_\_\_\_\_

RECEIVED  
SEP 10 2019  
PLAN REVIEW DIVISION

✓ Please check the attachments below that you are submitting with this transmittal:

- Letter of response to address plan review comment letter
- Revised plans and/or revised details: When submitting for a complete re-review, duplicate sets shall be submitted.
- Letter Summarizing Changes
- Energy conservation calculations
- Copies of Revised Plot Plan (be specific).  
Plot plan w/ proposed garage, to scale
- Health Department Request
- DPZ/DED Request
- Applicant's Request
- Two sets of single family dwelling model plans to be placed on permanent file: Model name and/or # \_\_\_\_\_
- Other \_\_\_\_\_

Contact Person Information: (Required)

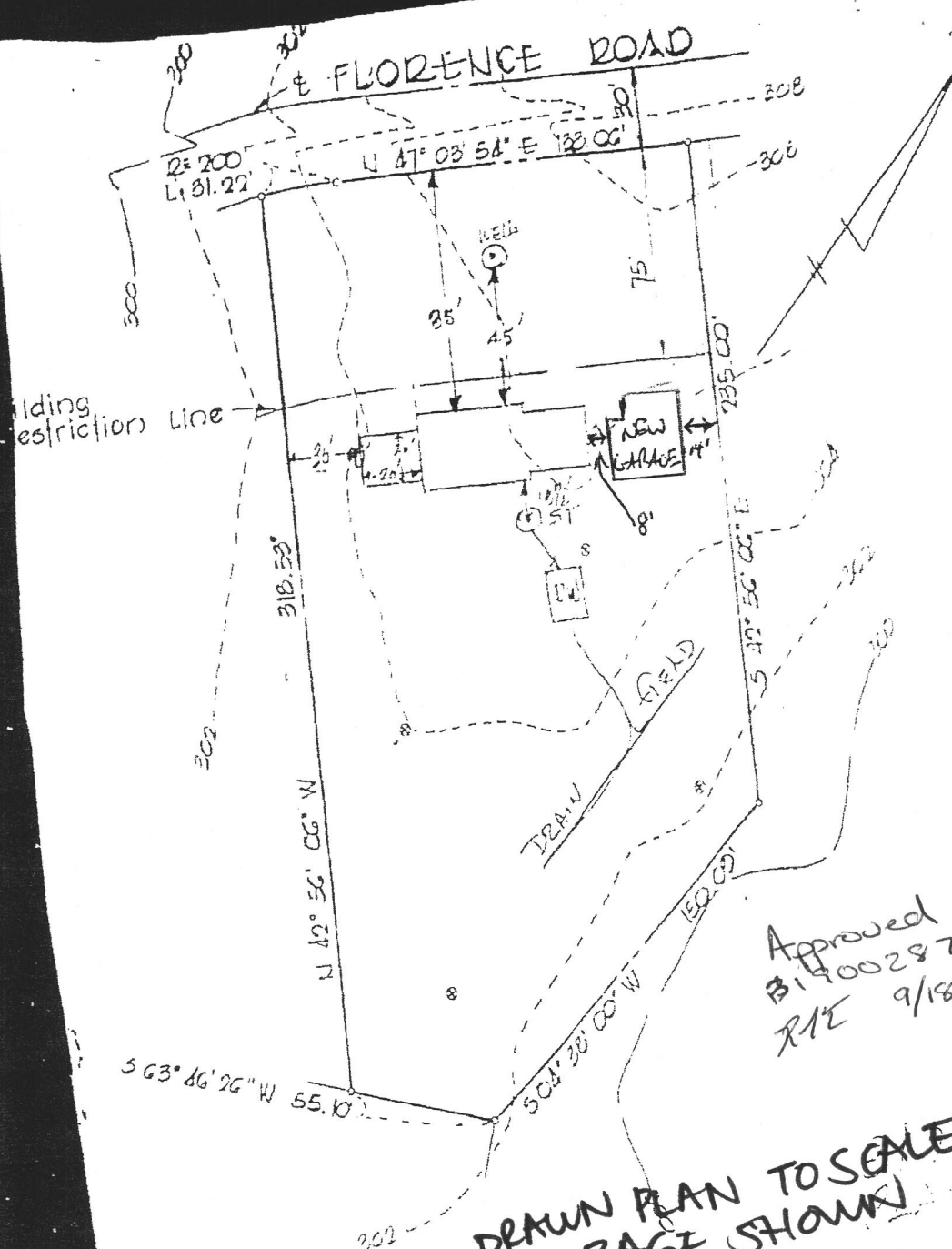
Orion Ferraro  
Please Print Name

Telephone No: 410-977-8903  
E-Mail Address: ferraro custom builders@gmail.com

**PLEASE ASSURE ALL DOCUMENTS AND/OR REVISIONS ARE APPROPRIATELY SIGNED AND SEALED, IF NECESSARY, BY A LICENSED ARCHITECT OR ENGINEER. PLEASE BE ADVISED THAT INSUFFICIENT INFORMATION MAY RESULT IN THE DELAY OF REVIEW BY THE PLANS EXAMINER. THE DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS WILL CONTACT YOU IF THERE IS A PROBLEM. IN ADDITION, ONCE THE BUILDING PERMIT IS APPROVED BY THE PLAN REVIEW DIVISION AND ALL OTHER REQUIRED SIGNATORY AGENCIES, AND THE BUILDING PERMIT IS READY FOR ISSUANCE, THE PERMIT DIVISION WILL NOTIFY THE APPROPRIATE CONTACT PERSON FOR PERMIT PICK UP. ALL PERMIT STATUS INQUIRIES SHALL BE DIRECTED TO THE PERMIT DIVISION AT 410-313-2455. CODE RELATED QUESTIONS AND PLAN REVIEW INQUIRIES SHALL BE DIRECTED TO THE PLAN REVIEW DIVISION AT 410-313-2436. PLEASE ALLOW A MINIMUM OF FIVE (5) WORKING DAYS FOR ANY PLAN SUBMITTALS TO BE REVIEWED. THANK YOU.**

Received by AKH

PER DPZ  
Health



Approved  
 B19002876  
 R/E 9/18/2019

**DRAWN PLAN TO SCALE  
 + GARAGE SHOWN**

WITH ADDITION  
**REVISED**  
 Date: 9/10/19  
 Comments: B19002876

PLOT PLAN  
 TO ACCOMPANY  
 BUILDING PERMIT APPLICATION  
 Lot #7

STAFFER'S MILL ESTATES  
 4th ELECTION DIST. HOWARD CO., MD  
 AUG. 4, 1975 Scale: 1" = 50'

Search Result for HOWARD COUNTY

View Map		View GroundRent Redemption			View GroundRent Registration					
<b>Tax Exempt:</b>		<b>Special Tax Recapture:</b>								
<b>Exempt Class:</b>		NONE								
<b>Account Identifier:</b>		District - 04 Account Number - 334418								
Owner Information										
<b>Owner Name:</b>		FERRARO ORION FERRARO RACHEL			<b>Use:</b>		RESIDENTIAL			
<b>Mailing Address:</b>		1769 FLORENCE RD MT AIRY MD 21771			<b>Principal Residence:</b>		YES			
					<b>Deed Reference:</b>		/15216/ 00021			
Location & Structure Information										
<b>Premises Address:</b>		1769 FLORENCE RD MT AIRY 21771-0000			<b>Legal Description:</b>		LOT 7 1.128 AR 1769 FLORENCE RD SHAFFER MILL EST			
<b>Map:</b>	<b>Grid:</b>	<b>Parcel:</b>	<b>Sub District:</b>	<b>Subdivision:</b>	<b>Section:</b>	<b>Block:</b>	<b>Lot:</b>	<b>Assessment Year:</b>	<b>Plat No:</b>	31 31
0006	0023	0231		1002			7	2020	<b>Plat Ref:</b>	
<b>Special Tax Areas:</b>					<b>Town:</b>		NONE			
					<b>Ad Valorem:</b>		100			
					<b>Tax Class:</b>					
<b>Primary Structure Built</b>		<b>Above Grade Living Area</b>		<b>Finished Basement Area</b>		<b>Property Land Area</b>		<b>County Use</b>		
1980		2,480 SF		800 SF		1.1200 AC				
<b>Stories</b>	<b>Basement</b>	<b>Type</b>	<b>Exterior</b>	<b>Full/Half Bath</b>	<b>Garage</b>	<b>Last Major Renovation</b>				
2	YES	STANDARD UNIT	SIDING	2 full/ 1 half	1 Attached					
Value Information										
		<b>Base Value</b>		<b>Value</b>		<b>Phase-in Assessments</b>				
				As of		As of		As of		
				01/01/2017		07/01/2019		07/01/2020		
<b>Land:</b>		201,200		201,200						
<b>Improvements</b>		285,600		285,600						
<b>Total:</b>		486,800		486,800		486,800				
<b>Preferential Land:</b>		0								
Transfer Information										
<b>Seller:</b> BORMAN AMY L			<b>Date:</b> 09/11/2013			<b>Price:</b> \$475,000				
<b>Type:</b> ARMS LENGTH IMPROVED			<b>Deed1:</b> /15216/ 00021			<b>Deed2:</b>				
<b>Seller:</b> CRIDER WILLIAM E II			<b>Date:</b> 03/26/2007			<b>Price:</b> \$575,000				
<b>Type:</b> ARMS LENGTH IMPROVED			<b>Deed1:</b> /10591/ 00081			<b>Deed2:</b>				
<b>Seller:</b> SIGNAIGO JAMES A			<b>Date:</b> 07/24/1997			<b>Price:</b> \$258,000				
<b>Type:</b> ARMS LENGTH IMPROVED			<b>Deed1:</b> /04021/ 00593			<b>Deed2:</b>				
Exemption Information										
<b>Partial Exempt Assessments:</b>		<b>Class</b>		07/01/2019		07/01/2020				
<b>County:</b>		000		0.00						
<b>State:</b>		000		0.00						
<b>Municipal:</b>		000		0.00		0.00				
<b>Tax Exempt:</b>		<b>Special Tax Recapture:</b>								
<b>Exempt Class:</b>		NONE								
Homestead Application Information										
<b>Homestead Application Status:</b> Approved 07/10/2014										
Homeowners' Tax Credit Application Information										
<b>Homeowners' Tax Credit Application Status:</b> No Application					<b>Date:</b>					

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.

8-17-79 App. FF.

8/14/79  
8/15/79  
8/17/79  
between 1:00 and 3:30 P.M.  
around please  
ready now

# PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 4th.

DATE 8/10/79

INDEXED

P 30094  
A 19073

Arnold Septic Tank Service IS PERMITTED TO INSTALL  ALTER

ADDRESS Woodbine, Md. 21797 PHONE 795-1285

SUBDIVISION Shaffer's Mill Estates ROAD 1769 Florence Rd. LOT Parcel #7

PROPERTY OWNER William J. Blackert, Jr. Thomson 795-0923

ADDRESS 2708 Club Road, Ellicott City, Md., 21043 PHONE: 465-5950

SPECIFICATIONS 4 Bedrooms

SEPTIC TANK CAPACITY 1250 GALLONS

DRAIN FIELD DEPTH FEET, BOTTOM AREA SQ. FT.

DEEP TRENCH DEPTH FEET, BOTTOM AREA SQ. FT.

Dry Well

SEEPAGE PITS ABSORBENT SIDE-WALL AREA 175 SQ. FT. per bedroom

INLET PIPE 3 1/2 FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH 11 1/2 FT. BELOW ORIGINAL GRADE

EFFECTIVE DEPTH AT 3 1/2 FT. BELOW ORIGINAL GRADE.

LOCATE DISPOSAL AREA 60 FT. FROM left LOT LINE AND 100 FT. FROM up from left rear corner point LOT LINE AS SEEN WHEN

FACE OF LOT FROM per certified plat with holes. (Perc hole 4 x 5)

PLANS APPROVED BY C. R. Streaker DATE 9/5/75

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 PLACING GRAVEL IN TRENCH.

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER.

NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

PERMIT VOID AFTER THREE YEARS.

NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 8 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRAZO ACCEPTED.

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

HD - 23

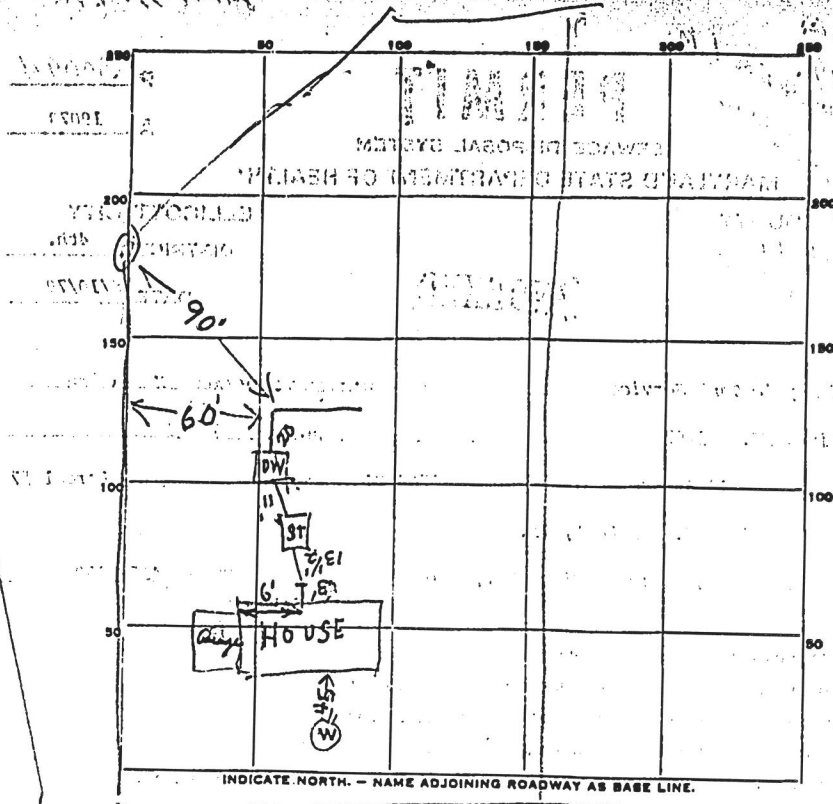
BLDG. PERMIT SIGNED  
AND RETURNED 7/13/88  
Serial # 19574 - final + fence

BLDG. PERMIT SIGNED  
AND RETURNED 8/7/91  
Serial # 39783  
Admitted

19073

INSPECTED

DATE PERMIT APPROVED



ROAD YES FLORENCE RD SI DW  
 TANK LEVEL AK 1500 CLEANOUTS NO NO  
 DISTRIBUTION BOX LEVEL 2 FT BELOW GRAB C.I. C.I.

TILE FIELD, DEPTH 12 1/2 FT. TRENCH WIDTH 2 FT.  
 GRAVEL DEPTH 9 1/2 IN. TOTAL LENGTH 32 FT. 288  
 NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA 61.5  
 SEEPAGE PITS, INSIDE DIAMETER 6.15 FT. DEPTH BELOW INLET ? 8 1/2 FT. 8.5  
 ABSORBENT AREA 90 SQ. FT. 52.2

REMARKS 8/14/79 - 4BR 700 SQ. FT. REQUIRED  
FINISH DITCH, DW & TANK & CALL, R.H.  
Partial 8/15/79 Dry well cleanout 3 1/2' in length - could not measure  
dry well depth. hole not punched in dry well top. Trench completed.

DATE SYSTEM APPROVED 8-17-79 INSPECTOR Leon BT

# 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: 469-3000, EXT. 356

A 19073

P \_\_\_\_\_

DISTRICT 4

DATE 10-16-73

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 William J. Blackert, Sr., ET.AL.

ADDRESS 18001 Shaffers Mill Rd., Mt. Airy, Md. PHONE \_\_\_\_\_

PROPERTY LOCATION: \_\_\_\_\_ Parcel #7

SUBDIVISION \_\_\_\_\_ LOT NO. \_\_\_\_\_

ROAD AND DESCRIPTION Florence Rd., Mt. Airy, 21771

SIZE OF LOT 40,000 sq. ft. plus or minus 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 Robert Blackert /s/

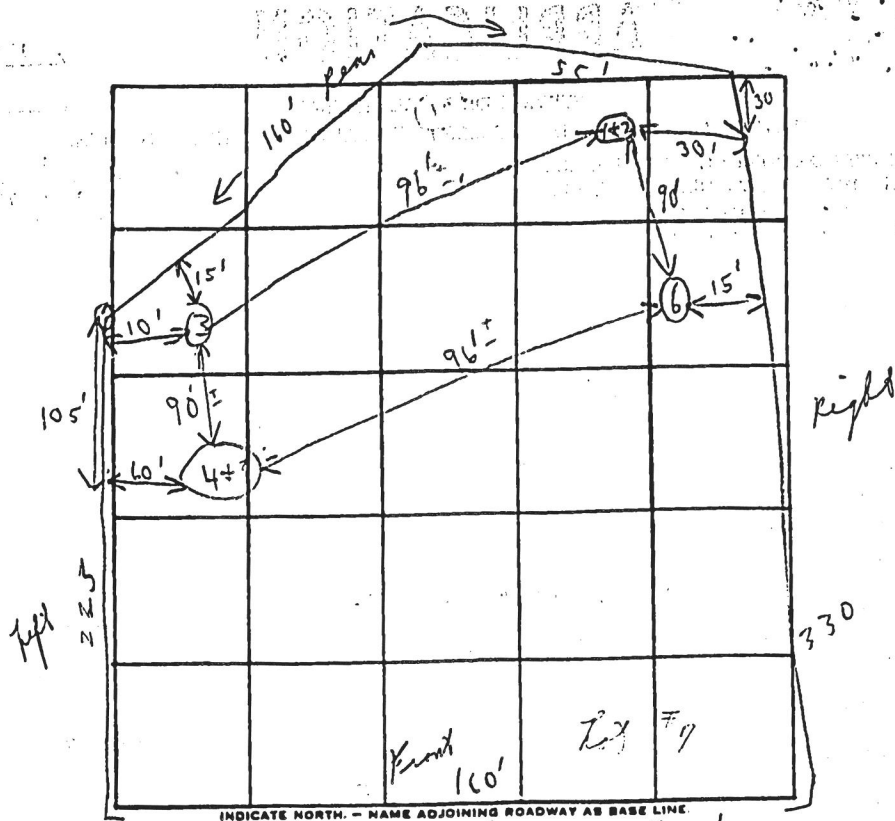
APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_  
(KIND OF SYSTEM)

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.

*Florence Road*

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
10/30/73	1	3 1/2'	1:35	1:38	1:38	1:42	4 min
	2	12'	1:35	1:37	1:37	1:37	2 min
	3	11'	Visual		similar to	to	1:42
	4	3 1/2'	1:46	1:49	1:49	1:54	10 min
Use	5	11 1/2'	1:46	1:48	1:48	2:05	17 min
	6	10 1/2'	Visual		similar to	to	4:05

*Any time  
8 min  
Sublet 3 1/2 ft  
14 min*

REMARKS \_\_\_\_\_

TYPE OF SOIL \_\_\_\_\_

STATE OF MARYLAND  
 WATER RESOURCES ADMINISTRATION  
 TAWES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401  
 WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION.  
 FILL IN THIS FORM COMPLETELY.

SEQUENCE NO. (WRA USE ONLY) **0541**

DATE RECEIVED (WRA USE ONLY) **7/27/77**

DATE WELL COMPLETED **7/27/77**

DEPTH OF WELL **145** (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" **77-73-2765**

COUNTY NUMBER **42**

DRILLERS IDENTIFICATION NO. **42**

OWNER **BANK OF CONST. CORP.** FIRST NAME **Mr. Fred**

LAST NAME **FREDERICKS** POST OFFICE **17706**

STREET OR RFD **17706 Old Frederick's**

WELL LOG

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET		CHECK IF WATER BEARING
	FROM	TO	
TOP SOIL	0	3	
SHALE	3	10	
Brown slate	10	90	
Blue slate	90	145	

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX)  Y  N

TYPE OF GROUTING MATERIAL (CIRCLE BOX):  
 CEMENT  E M BENTONITE CLAY  B C

NO. OF BAGS **6** NO. OF POUNDS **600**

GALLONS OF WATER **36**

DEPTH OF GROUT SEAL (TO NEAREST FOOT):  
 FROM **0** FT. TO **20** FT.

CASING RECORD

INSERT APPROPRIATE CODE BELOW

STEEL  S T CONCRETE  C O  
 PLASTIC  P L OTHER  O T

MAIN CASING TYPE **S T** NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) **6** TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) **23**

OTHER CASING (IF USED) DIAMETER (INCH) FROM TO

SCREEN RECORD

INSERT APPROPRIATE CODE BELOW

STEEL  S T BRASS OR BRONZE  B R H O  
 PLASTIC  P L OTHER  O T

DEPTH (NEAREST WHOLE FOOT)

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51
---	---	---	---	---	---	---	---	---	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----

SLOTSIZE 1. **2**, 2. **3**

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) **2** **6**

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) **11** **15**

METHOD USED TO MEASURE PUMPING RATE **Bucket**

WATER LEVEL (DISTANCE FROM LAND SURFACE) BEFORE PUMPING **40** (NEAREST FOOT)

WHEN PUMPING **17** **20** (NEAREST FOOT)

TYPE OF PUMP USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST)

A PISTON  T TURBINE  
 C CENTRIFUGAL  R ROTARY  O OTHER (DESCRIBE BELOW)  
 J JET  S SUBMERSIBLE

PUMP INSTALLED

TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: A, C, J, P, R, S, T, O)

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX)  Y  N

CAPACITY: GALLONS PER MINUTE (TO NEAREST GALLON) **31** **35**

PUMP HORSE POWER **37** **41**

PUMP COLUMN LENGTH (NEAREST FOOT) **43** **47**

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)

+ ABOVE LAND SURFACE (NEAREST FOOT)  
 - BELOW **50** **51**

CIRCLE APPROPRIATE BOXES

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 I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CAPTIONED "PERMIT TO DRILL WELL", AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

DRILLERS NAME **L. F. EASTERDAY**

(PLEASE PRINT) **L. F. Easterday**

SIGNATURE **L. F. Easterday**

DIAMETER OF SCREEN **56** **60** (NEAREST INCH) FROM TO

GRAVEL PACK

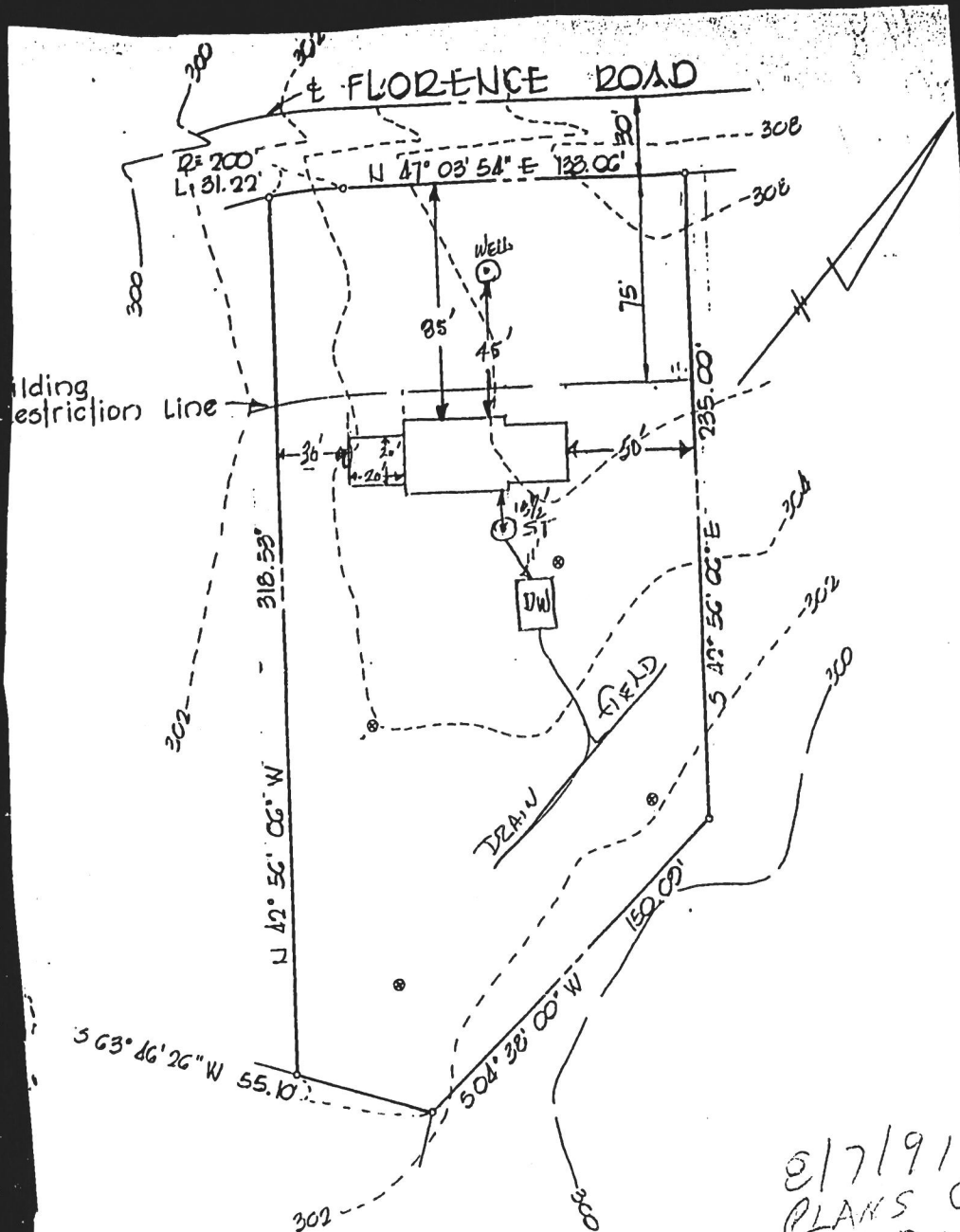
IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX  F

WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER) (E.R.O.S.)

TELESCOPE CASING  LOG INDICATOR

74 75 76 OTHER DATA AVAILABLE

HEALTH



Building Restriction Line

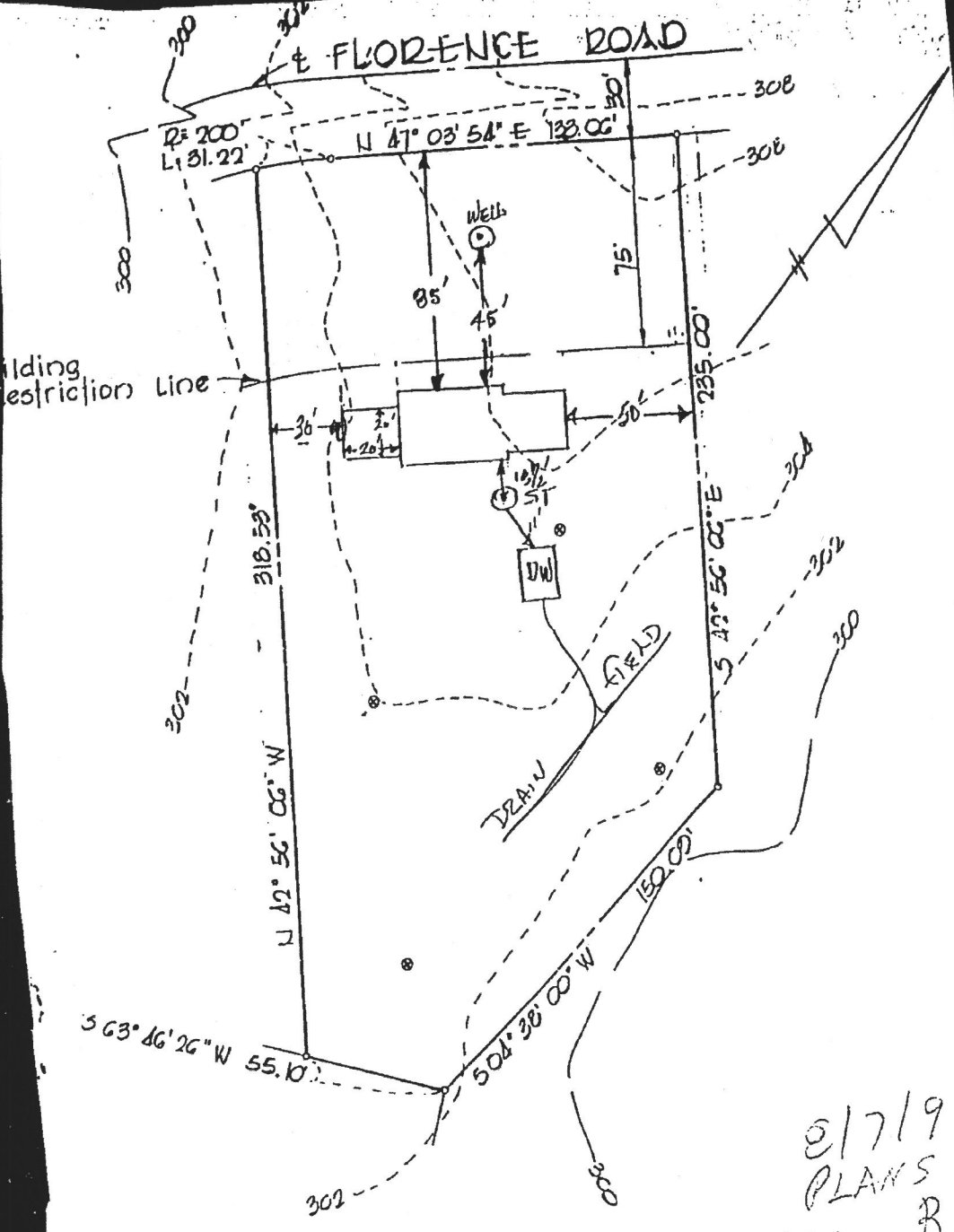
WITH ADDITION

8/7/91  
PLANS ON  
RH

PLOT PLAN  
TO ACCOMPANY  
BUILDING PERMIT APPLICATION  
Lot #7

SHAFFER'S MILL ESTATES

4th ELECTION DIST. HOWARD CO., MD  
Aug. 1, 1975 Scale: 1" = 50'



Building restriction line

WITH ADDITION

E/7/91  
PLANS OF  
RH

PLOT PLAN  
TO ACCOMPANY  
BUILDING PERMIT APPLICATION  
Lot # 7

SHAFFER'S MILL ESTATES

4th ELECTION DIST. HOWARD CO., MD.  
AUG. 1, 1975 Scale: 1" = 50'



Approval  
B19602876  
RCE 9/18/2019

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**DESIGN LOAD CRITERIA:**

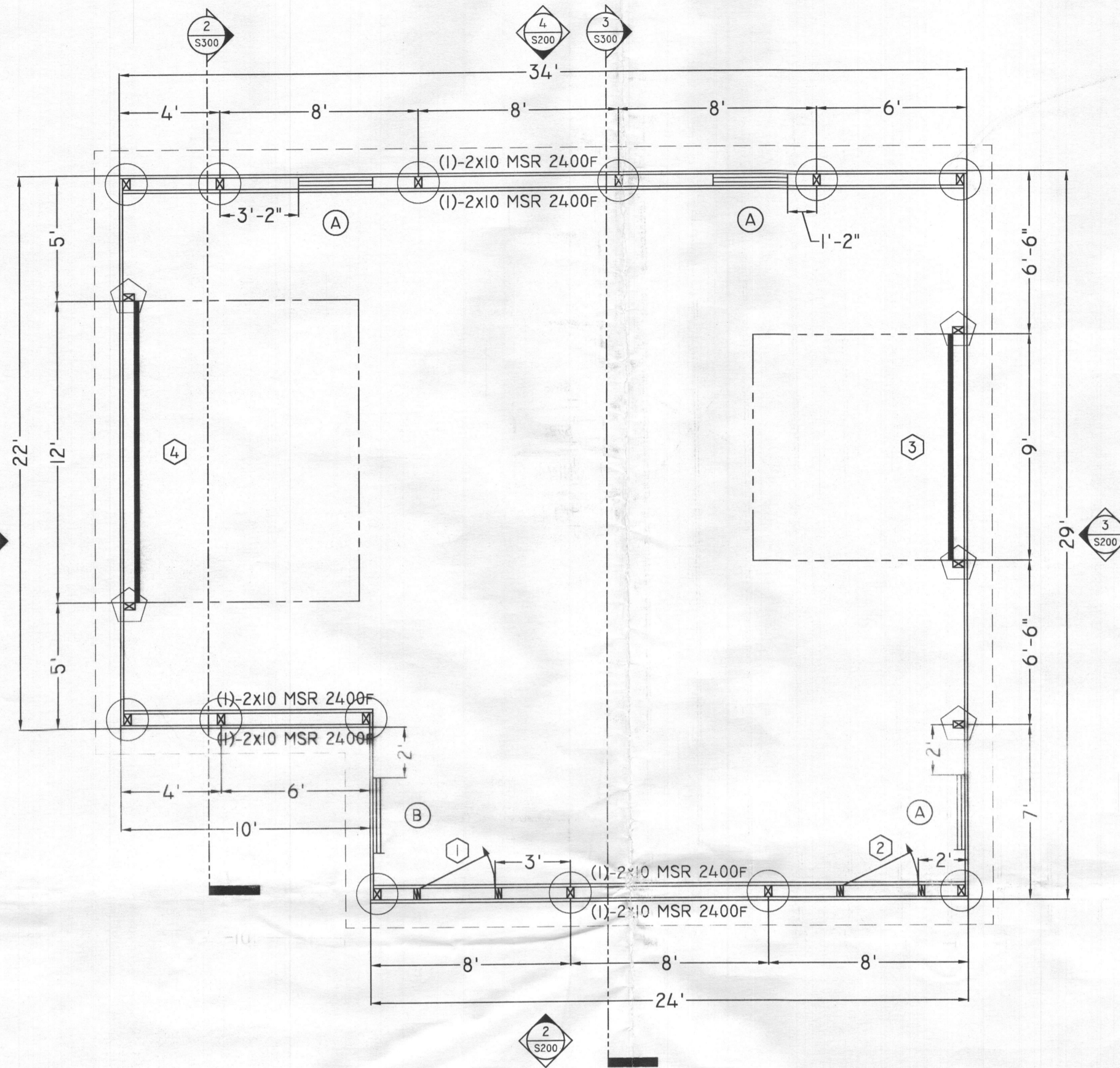
**ROOF LOAD:**  
TOP CHORD LIVE = 30 PSF BLDG. AREA = 916 FT<sup>2</sup>  
TOP CHORD DEAD = 10 PSF BLDG. VOL. = 13,590 FT<sup>3</sup>  
BTM. CHORD LIVE = 0 PSF PEAK HGHT. = ± 18'-4"  
BTM. CHORD DEAD = 10 PSF DIAG. DIM. = N / A

**SNOW LOAD:** CON. CLSS. = V-B  
GRND. SNOW LOAD = 35 PSF USE GROUP = S-1  
OCC. LOAD = 4 PERSONS  
SOIL BEAR = 1,500 PSF

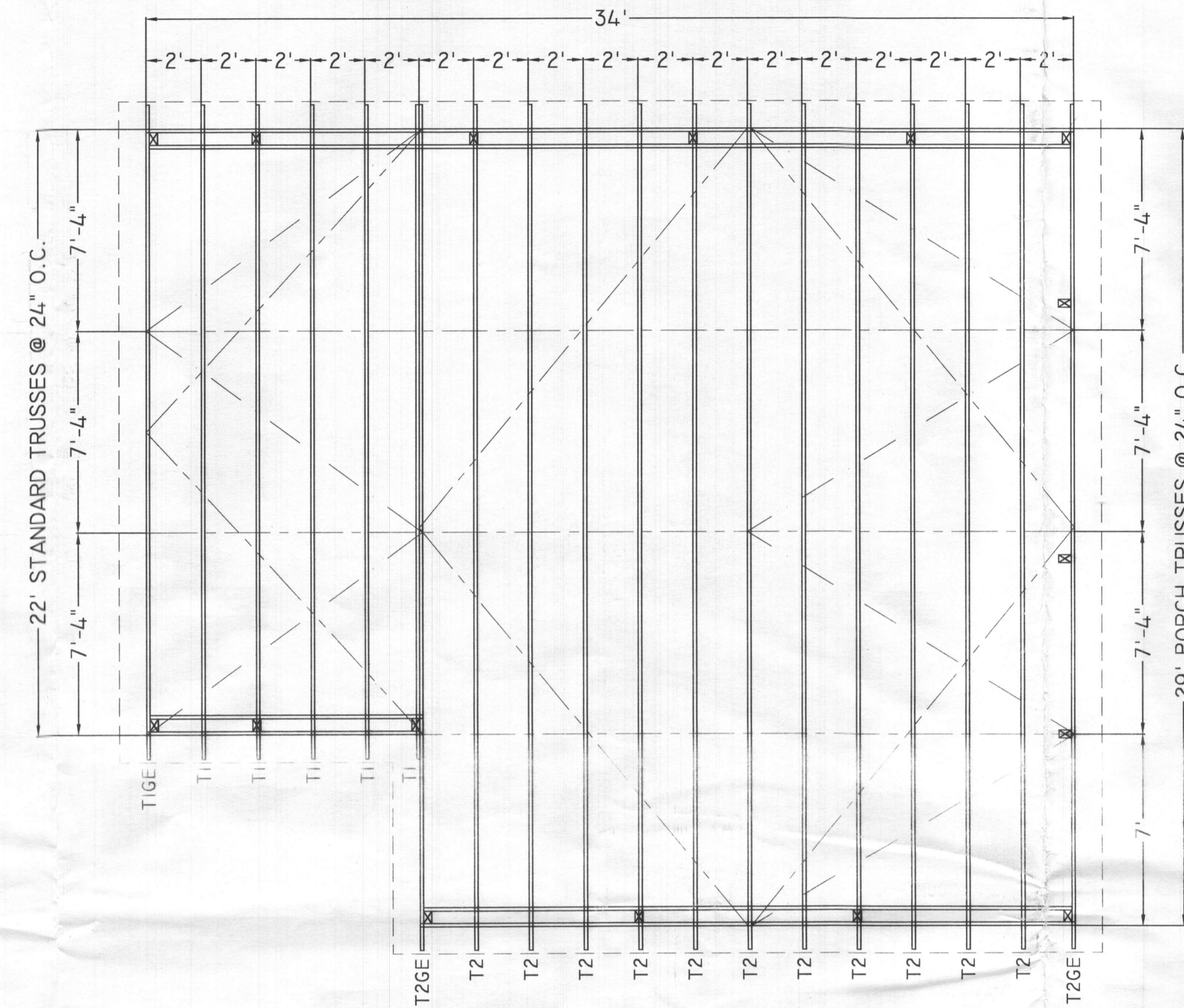
**WIND LOAD:**  
BASIC WIND SPEED = 115 MPH (3 SECOND GUST)

MUNICIPALITY: HOWARD COUNTY, MARYLAND

SEAL



FLOOR PLAN  
SCALE: 1/4" = 1'-0"



TRUSS LAYOUT & BRACING PLAN  
SCALE: 1/4" = 1'-0"

ROUGH OPENING SCHEDULE						
SYMBOL	QUANTITY	SIZE	ROUGH OPENING	SWING	STYLE	REMARKS
①	1	3068	38" x 82"	RHS	9-LITE	W.E.H. FIBERGLASS DOOR W/ COMPOSITE FRAME & BRICK MOULDING
②	1	3068	38" x 82"	RHS	6-PANEL	W.E.H. FIBERGLASS DOOR W/ COMPOSITE FRAME & BRICK MOULDING
③	1	9x8	9'-0" x 8'-0" A.F.F.	N / A	OVERHEAD	CHI MODEL #5283, CARRIAGE STYLE, INSULATED OVERHEAD DOOR W/ WIDOWS
④	1	12x9	12'-0" x 9'-0" A.F.F.	N / A	OVERHEAD	CHI MODEL #5283, CARRIAGE STYLE, INSULATED OVERHEAD DOOR W/ WIDOWS
A	3	3038	36" x 44"	N / A	SINGLE HUNG	SIMONTON VINYL, INSULATED WINDOW W/ SCREENS & GRILLS
B	1	3038	36" x 44"	N / A	SINGLE HUNG	SIMONTON VINYL, INSULATED WINDOW W/ SCREENS & GRILLS - TEMPERED

POST SCHEDULE		
SYMBOL	POST SIZE	REMARKS
⊠	4x6 PT POST	STANDARD TREATMENT

FOOTING SCHEDULE		
SYMBOL	FOOTING SIZE	COMPONENTS
⬡	18" Ø x 8"	WET MIX CONCRETE
○	24" Ø x 10"	WET MIX CONCRETE

TRUSS LAYOUT & BRACING LEGEND		
LINE	DESCRIPTION	LOCATION
=====	TRUSSES	24" ON CENTER THROUGHOUT BUILDING
-----	CORNER BRACING	FROM CORNER TO TRUSS PEAK AT UNDERSIDE OF BOTTOM CHORD
-----	LATERAL BRACING	SEE TRUSS PRINTS FOR MAXIMUM SPACING
-----	DIAGONAL BRACING	STAGGERED BETWEEN LATERAL BRACES ON BOTTOM CHORD
-----	OVERHANG	EXTENTS OF EAVE AND GABLE OVERHANGS

**2015 IBC, 2303.4.5 ALTERATIONS TO TRUSSES.** TRUSS MEMBERS AND COMPONENTS SHALL NOT BE CUT, NOTCHED, DRILLED, SPLICED OR OTHERWISE ALTERED IN ANY WAY WITHOUT WRITTEN CONCURRENCE AND APPROVAL OF A REGISTERED DESIGN PROFESSIONAL. ALTERATIONS RESULTING IN THE ADDITION OF LOADS TO ANY MEMBER (E.G., HVAC EQUIPMENT, PIPING, ADDITIONAL ROOFING OR INSULATION, ETC.) SHALL NOT BE PERMITTED WITHOUT VERIFICATION THAT THE TRUSS IS CAPABLE OF SUPPORTING SUCH ADDITIONAL LOADING.

- BUILDING SPECIFICATIONS:**
- 22' STANDARD TRUSSES, 10 1/2" O.H., 3/2 PITCH, 24" O.C.
  - 29' PORCH TRUSSES, 10 1/2" O.H., 3/2 PITCH, 24" O.C.
  - BOTTOM CHORD TIES AS PER TRUSS MANUFACTURER
  - 10'-0" INSIDE HEIGHT
  - 12" EAVE & GABLE OVERHANGS
  - 2x4 WALL GIRTS @ 16" O.C.
  - 3/8" OSB ROOF DECKING (SHINGLES & FELT BY OTHERS)
  - 1/6 OSB WALL SHEATHING (HARDIE SIDING BY OTHERS)
  - BUILDING WRAP WEATHER BARRIER OVER WALL SHEATHING
  - USP RT-7 (OR EQUAL) HURRICANE TIES ON GABLE TRUSSES
  - USP RT-16A (OR EQUAL) HURRICANE TIES ON INTERIOR TRUSSES
  - 2x4 VERTICAL FIRE BLOCKING BETWEEN WALL GIRTS AT EACH POST
  - 2x6 HORIZONTAL FIRE BLOCKING AT 10' (MAX) ON CENTER; BETWEEN HEADERS AT TRUSS BEARING HEIGHT

**FERRARO GARAGE**

**BUILDING ADDRESS:**  
1769 FLORENCE ROAD  
MOUNT AIRY, MD 21771

**MAILING ADDRESS:**  
ORION FERRARO  
1769 FLORENCE ROAD  
MOUNT AIRY, MD 21771

FLOOR PLAN, TRUSS LAYOUT, & GENERAL NOTES

SALESMAN: JZ	DRAWN BY: CAM
DATE: 12 AUGUST 2019	CHECKED BY: RCE
FILE NUMBER 19-BI-10152	DRAWING NO. S100
APPROVED	SHEET 1 OF 4

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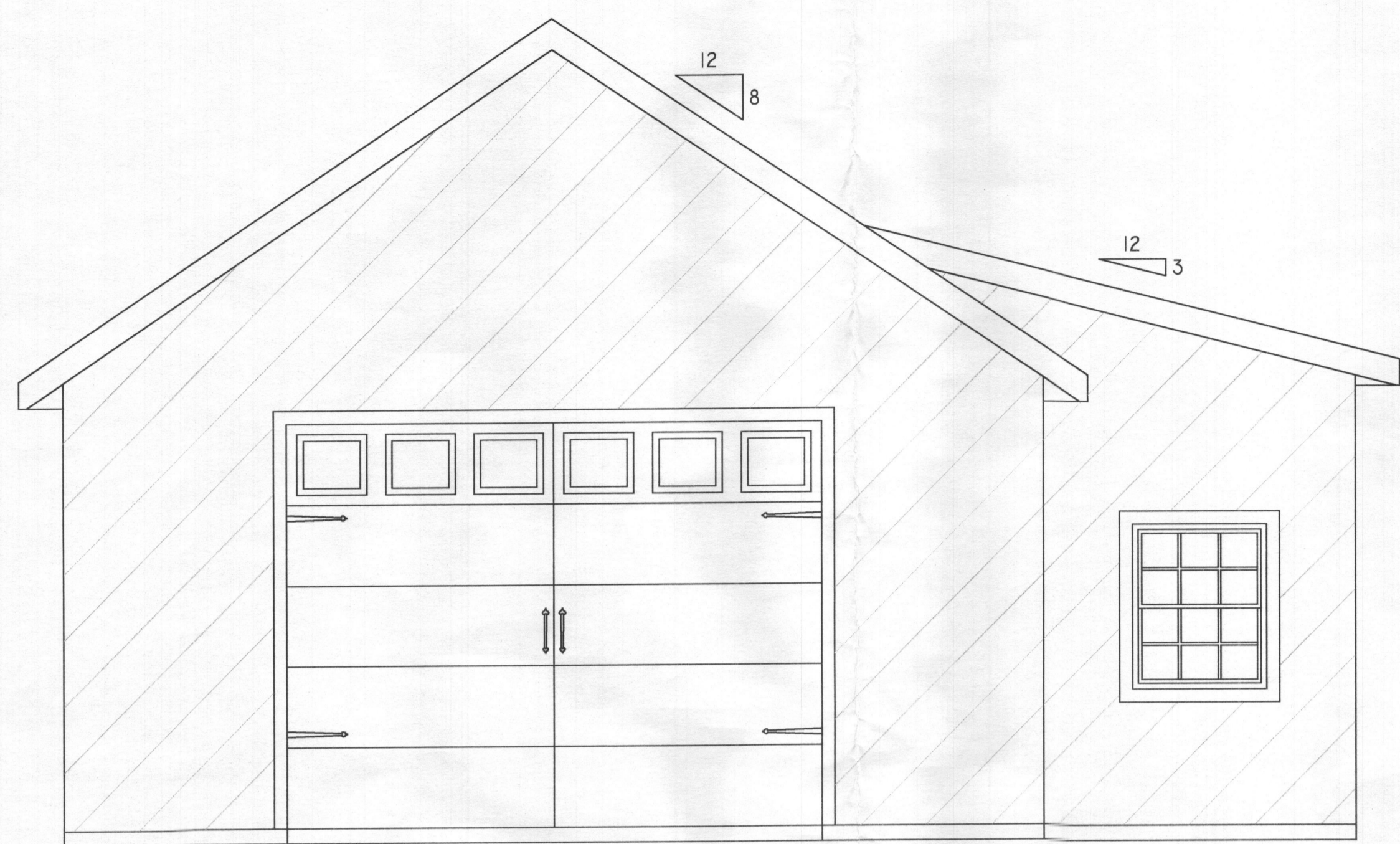
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MUNICIPALITY: HOWARD COUNTY, MARYLAND

SEAL



ELEVATION

SCALE: 3/8" = 1'-0"

1  
S200



ELEVATION

SCALE: 3/8" = 1'-0"

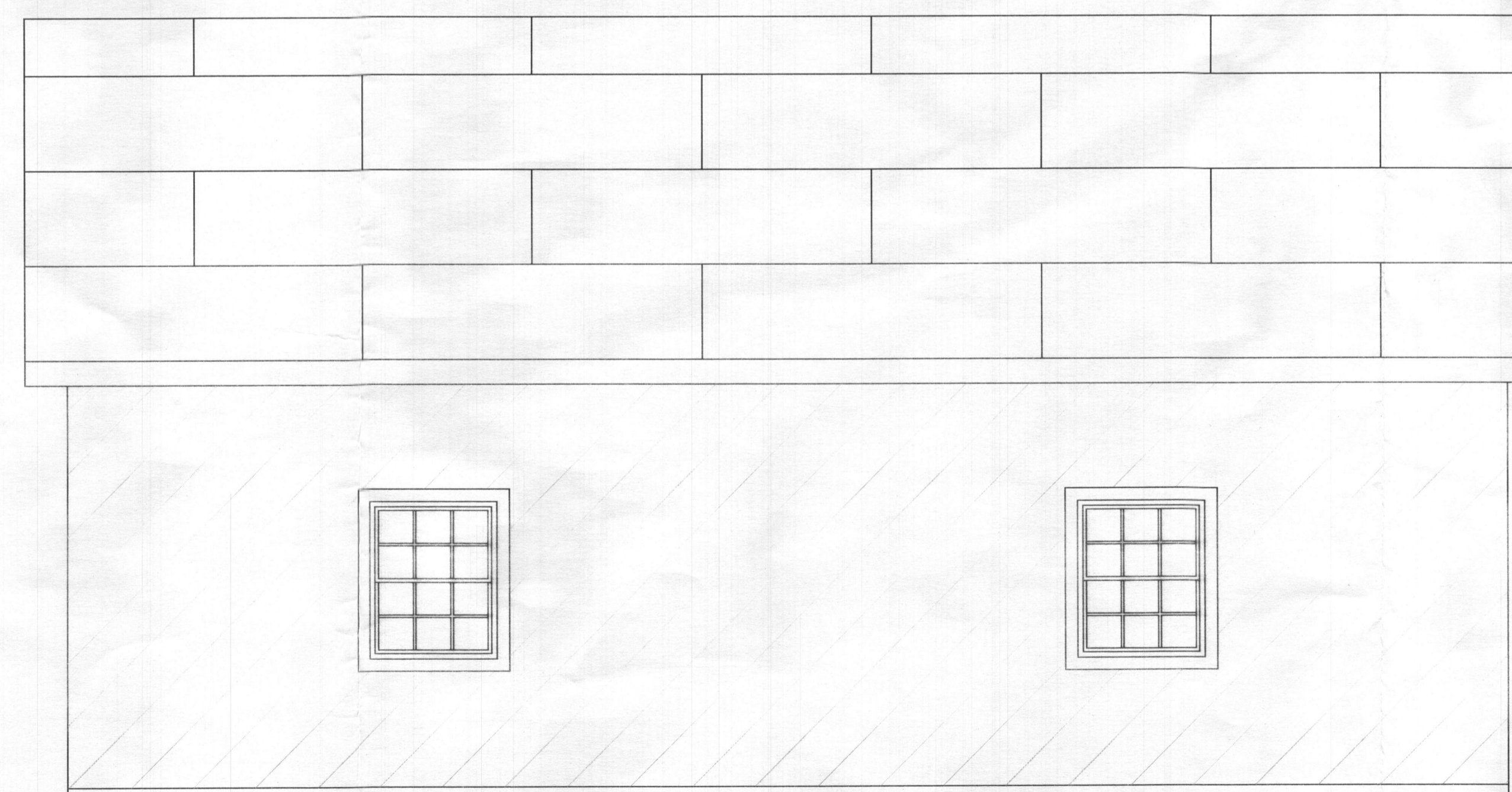
1  
S200



ELEVATION

SCALE: 3/8" = 1'-0"

3  
S200



ELEVATION

SCALE: 3/8" = 1'-0"

4  
S200

NO.	REVISION DESCRIPTION	BY	DATE

**FERRARO GARAGE**

**BUILDING ADDRESS:**  
1769 FLORENCE ROAD  
MOUNT AIRY, MD 21771

**MAILING ADDRESS:**  
ORION FERRARO  
1769 FLORENCE ROAD  
MOUNT AIRY, MD 21771

EXTERIOR ELEVATIONS

SALESMAN: JZ	DRAWN BY: CAM
DATE: 12 AUGUST 2019	CHECKED BY: RCE
FILE NUMBER 19-B1-10152	DRAWING NO. S200
APPROVED	SHEET 2 OF 4

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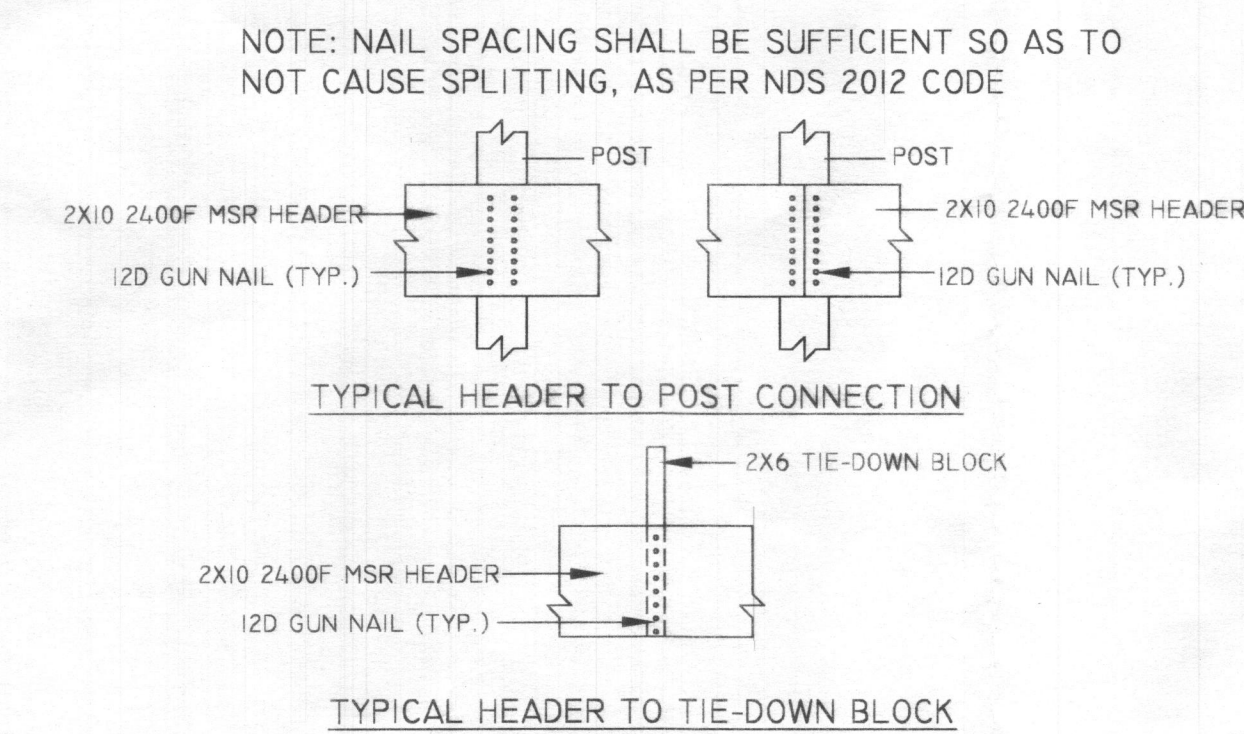
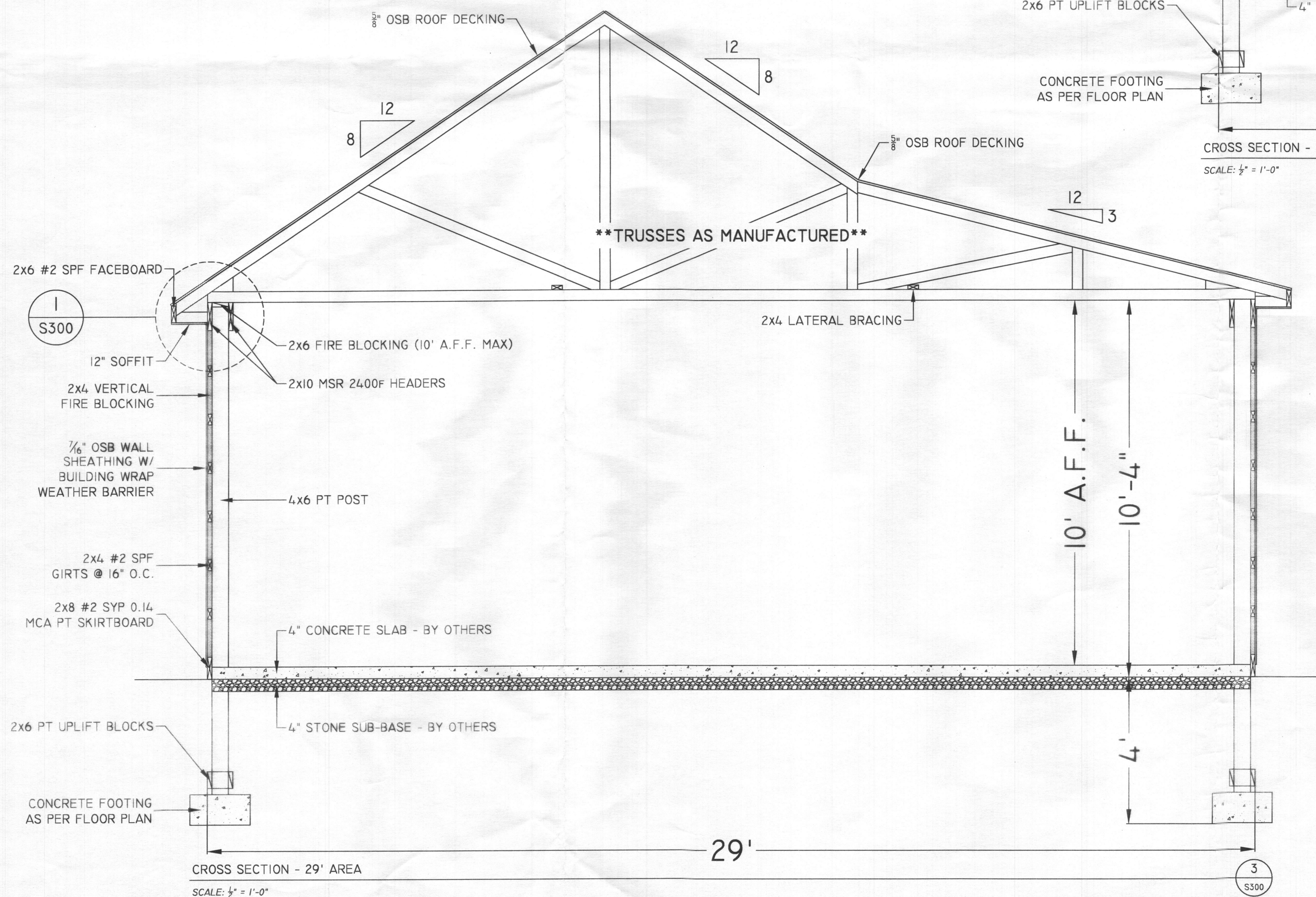
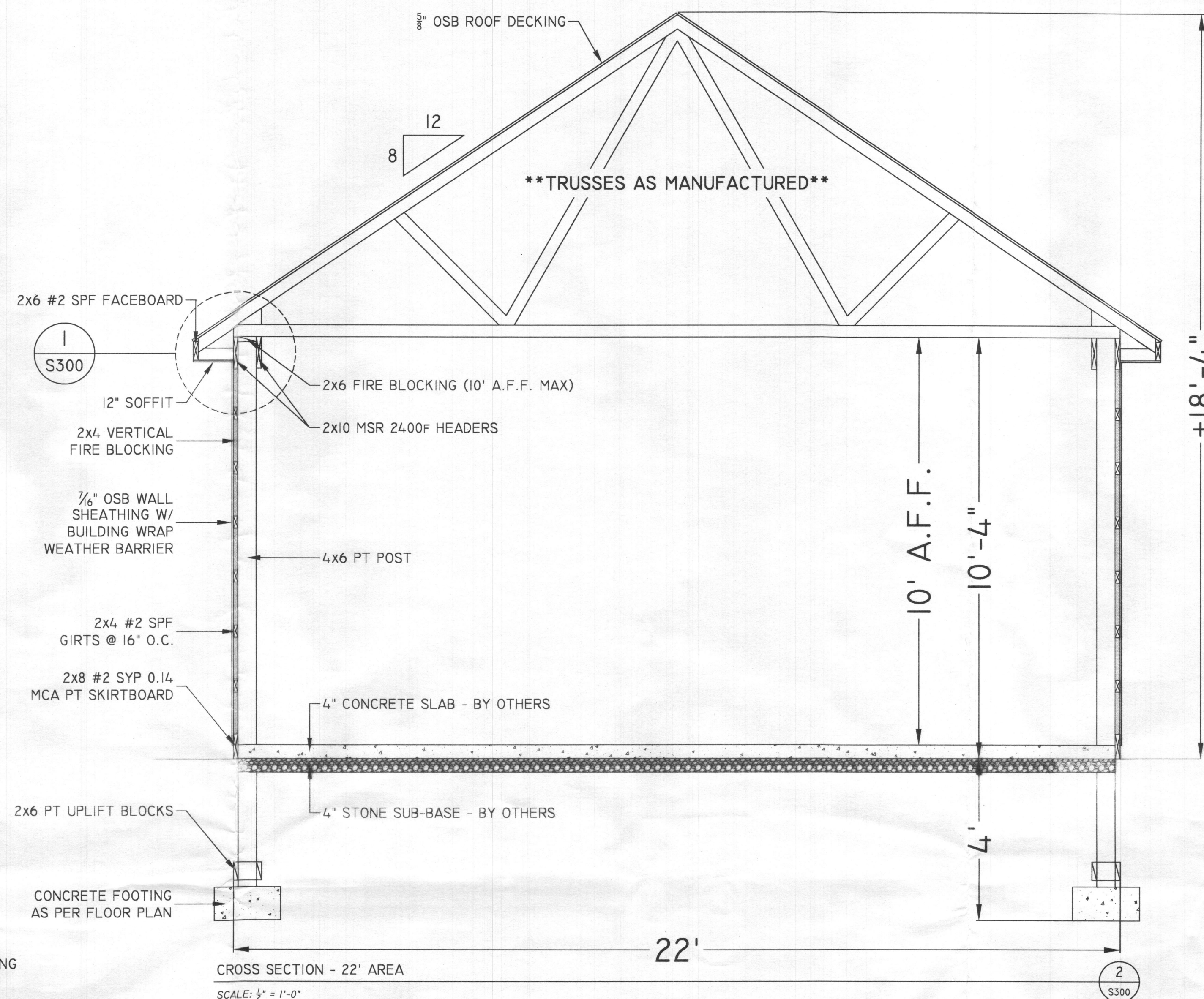
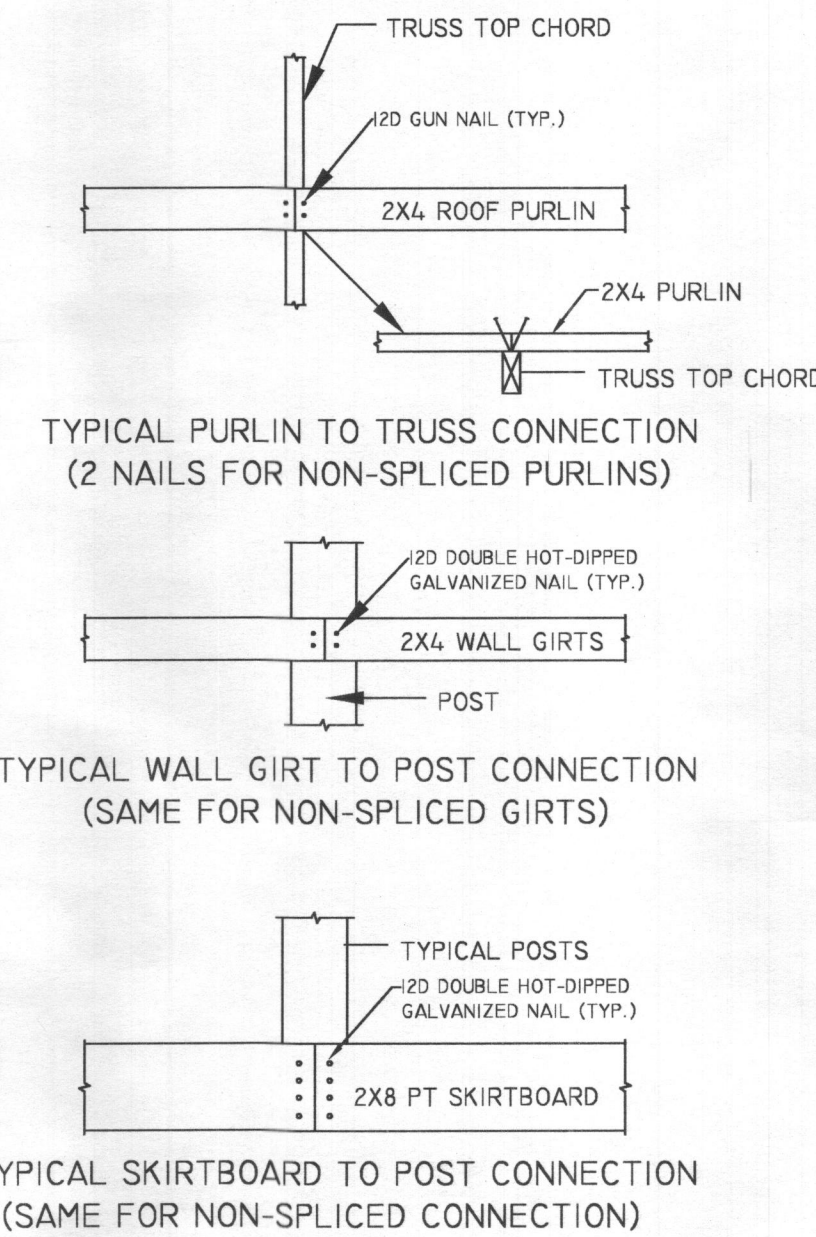
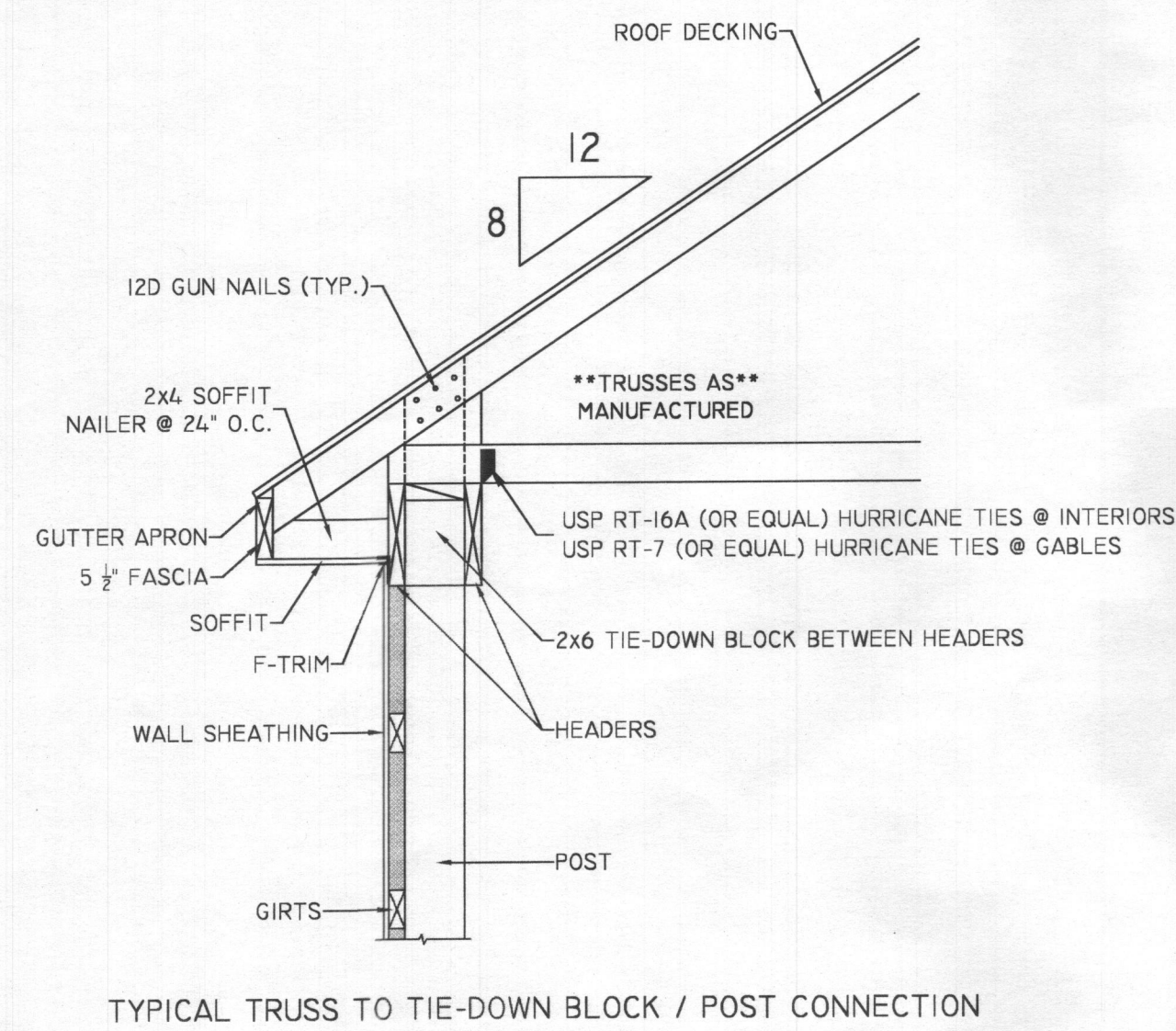
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MUNICIPALITY: HOWARD COUNTY, MARYLAND



HEADER ATTACHMENT DETAILS - TYPICAL  
SCALE: 3/4" = 1'-0"

SEAL	

NO.	REVISION DESCRIPTION	BY	DATE

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**MAILING ADDRESS:**  
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MOUNT AIRY, MD 21771

CROSS SECTION

SALESMAN: JZ	DRAWN BY: CAM
DATE: 12 AUGUST 2019	CHECKED BY: RCE
FILE NUMBER 19-B1-10152	DRAWING NO. S300
APPROVED	SHEET 3 OF 4

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SEAL

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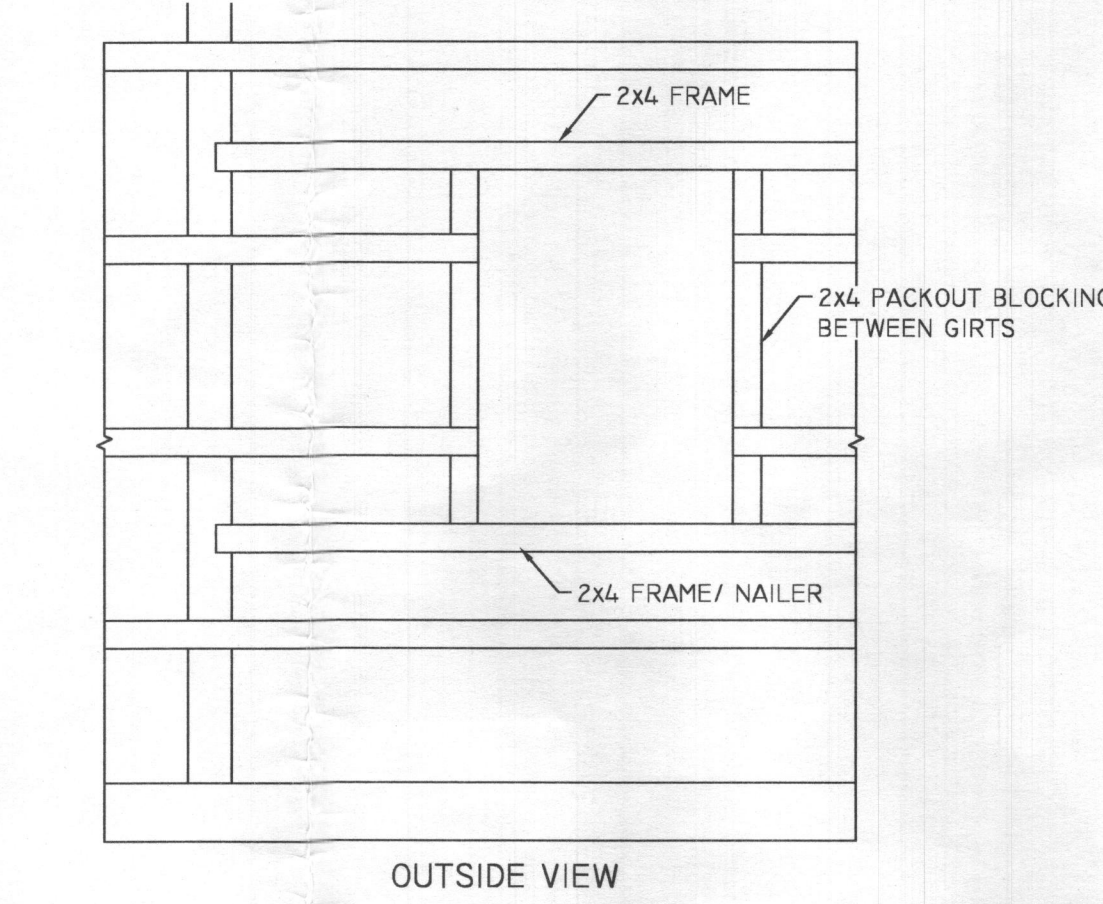
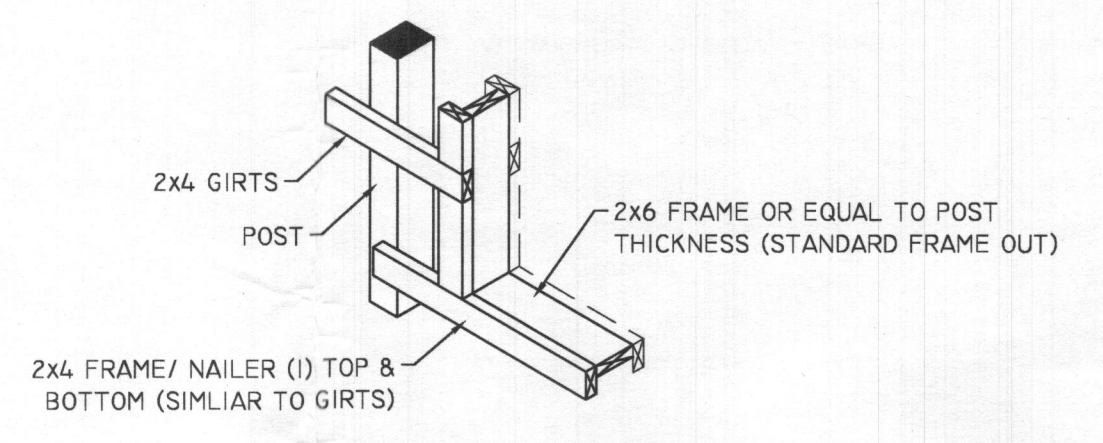
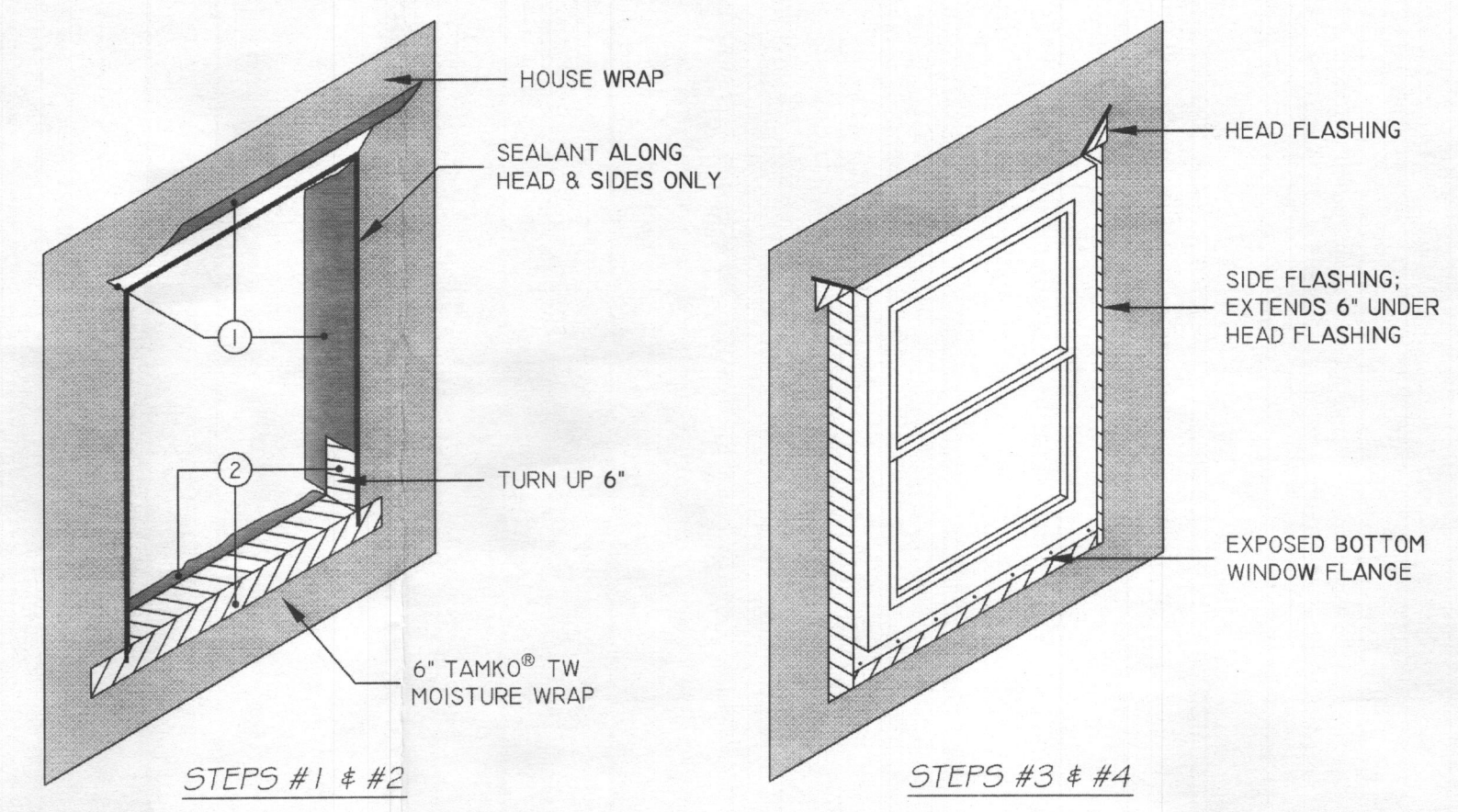
**MAILING ADDRESS:**  
ORION FERRARO  
1769 FLORENCE ROAD  
MOUNT AIRY, MD 21771

**FRAMING DETAILS**

SALESMAN: JZ	DRAWN BY: CAM
DATE: 12 AUGUST 2019	CHECKED BY: RCE
FILE NUMBER: 19-BI-10152	DRAWING NO. S500
APPROVED	SHEET 4 OF 4

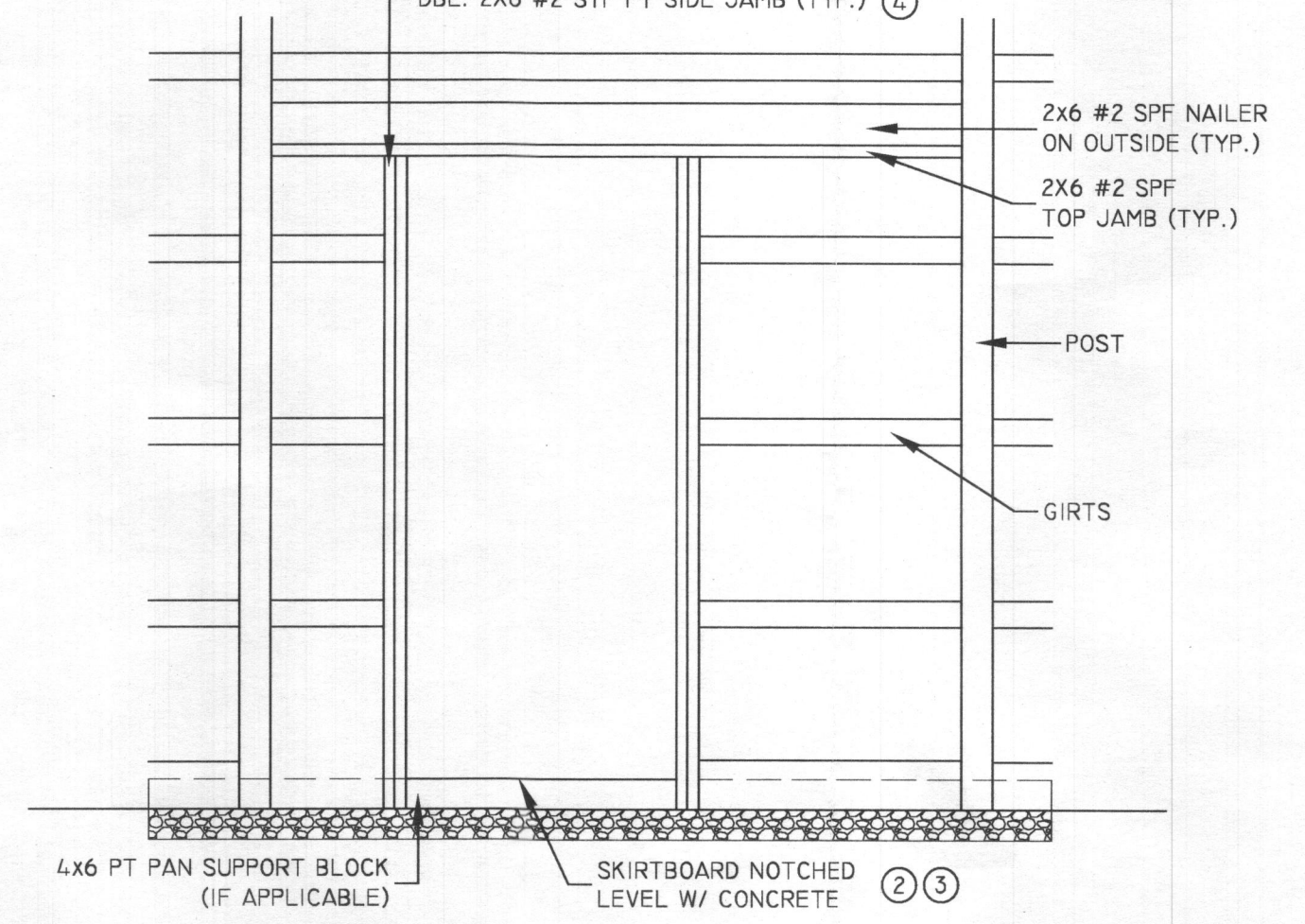
**WINDOW FLASHING W/ HOUSE WRAP NOTES**

- INSTALL HOUSE WRAP AND CUT OUT WINDOW OPENING WITH DIAGONAL CUTS. FOLD BOTTOM AND SIDES INTO THE WINDOW OPENING AND ATTACH; FOLD TOP OUT AND AWAY FROM THE OPENING FOR LATER USE IN STEP #4.
- FLASH BOTTOM OF SILL PRIOR TO INSTALLING WINDOW BY CUTTING THE FLASHING THE WIDTH OF THE ROUGH OPENING PLUS 2X TAPE WIDTH. FLASHING TO BE CENTERED AT BOTTOM OF ROUGH OPENING AND SHALL EXTEND BENEATH JAMB FLASHING TAPE AT EACH SIDE. MAKE VERTICAL CUTS AT EACH SIDE ROUGH OPENING AND FOLD TOP HALF OF TAPE INTO ROUGH OPENING.
- INSTALL WINDOW AND CUT (2) LENGTHS OF JAMB FLASHING THE HEIGHT OF THE ROUGH OPENING PLUS 2X TAPE WIDTH, FLASHING TO BUTT TIGHT AGAINST THE WINDOW UNIT AND FULLY OVERLAP THE SILL FLASHING AND EXTEND UP BENEATH THE HEADER FLASHING.
- CUT THE HEADER FLASHING THE WIDTH OF ROUGH OPENING PLUS 2X TAPE WIDTH PLUS 2". ALLOW THE HOUSE WRAP FROM STEP ONE TO OVERLAP THE JAMB TAPE AND BUTT AGAINST TOP OF WINDOW. INSTALL HEADER FLASHING AGAINST TOP OF WINDOW AND EXTEND 1 INCH PAST EACH SIDE JAMB FLASHING TAPE.



**ENTRY DOOR FRAMING NOTES**

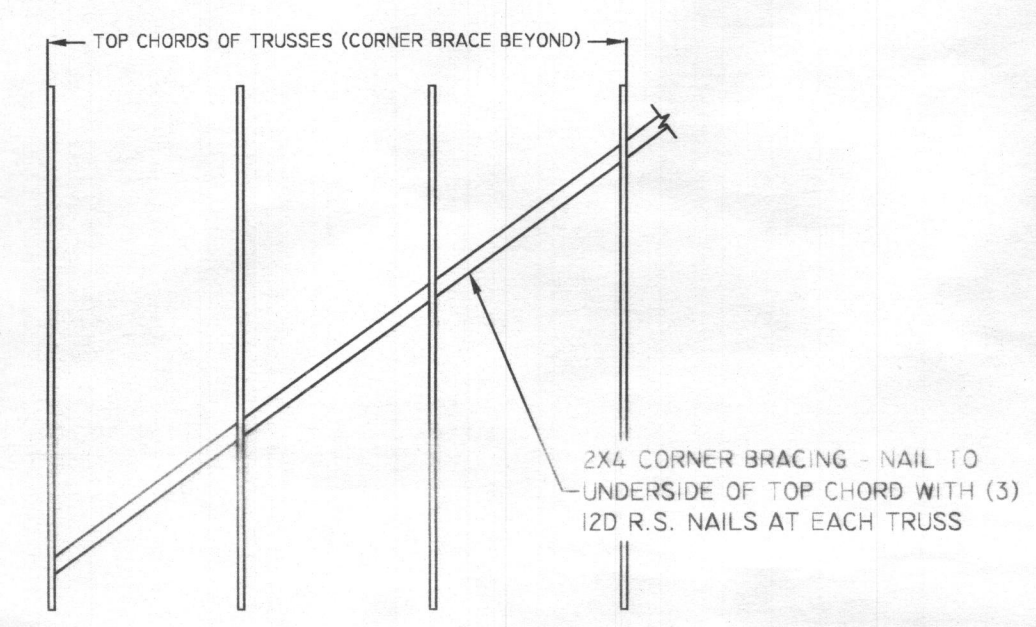
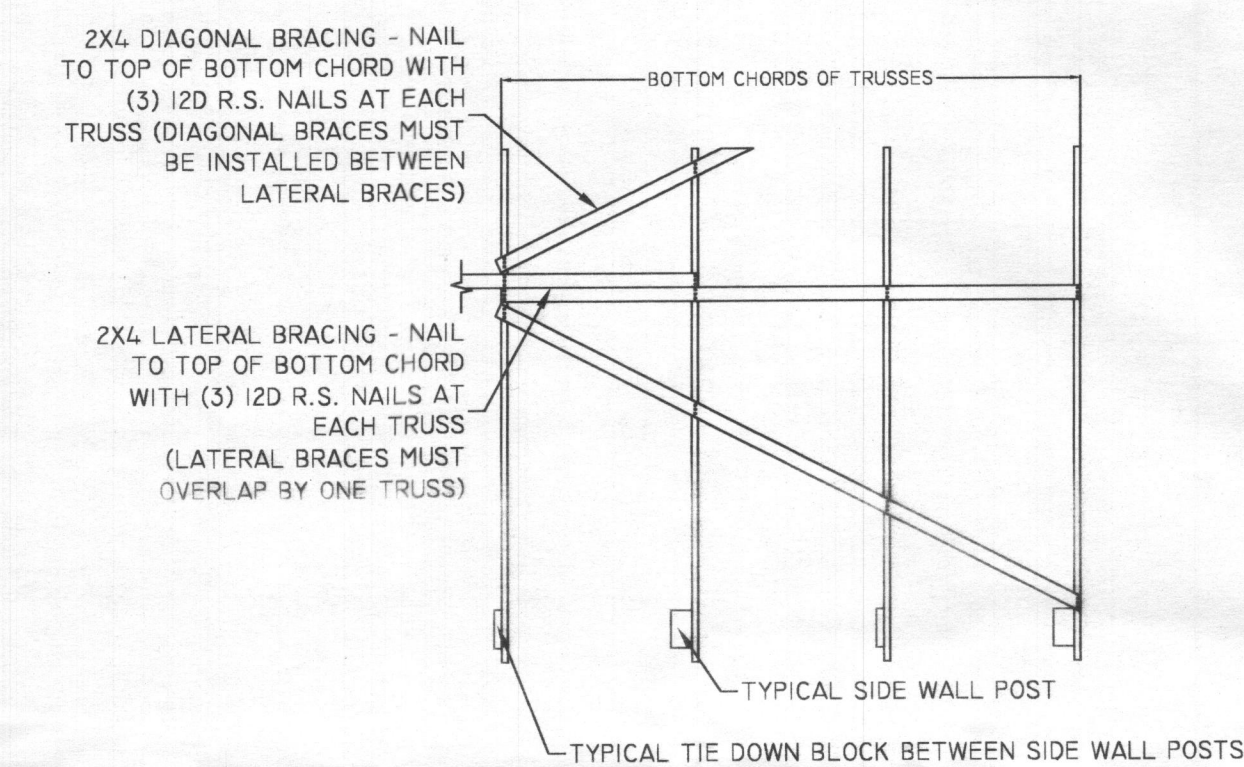
- CHECK DOOR ROUGH OPENINGS BEFORE INSTALLATION
- NOTCH SKIRTBOARD ACCORDING TO CONCRETE FLOOR HEIGHT
- BEFORE INSTALLING SILL PAN, PLACE CAULK ON NOTCHED SKIRTBOARD AND PAN SUPPORT BLOCK.
- EXTEND JAMB 1" (MIN) BELOW THE BOTTOM OF THE SKIRTBOARD; ATTACH TO SKIRTBOARD W/ DOUBLE HOT-DIPPED GUN NAILS.



WINDOW FLASHING DETAIL W/ BUILDING WRAP  
SCALE: 3/4" = 1'-0"

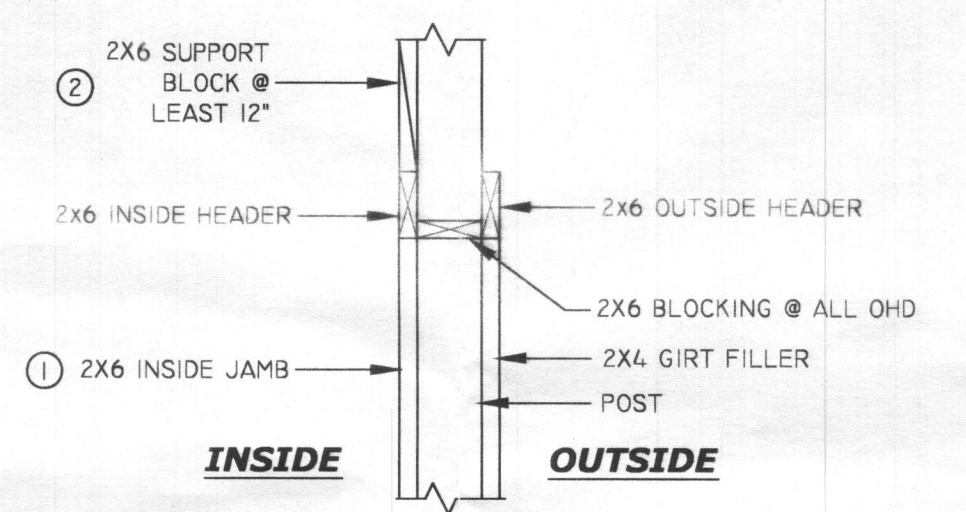
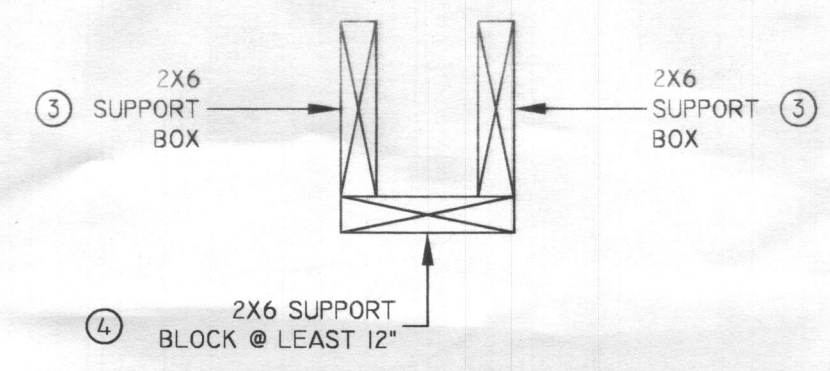
WINDOW BOX FRAME DETAIL  
SCALE: 3/4" = 1'-0"

TYPICAL ENTRY DOOR FRAMING DETAIL  
SCALE: 3/4" = 1'-0"



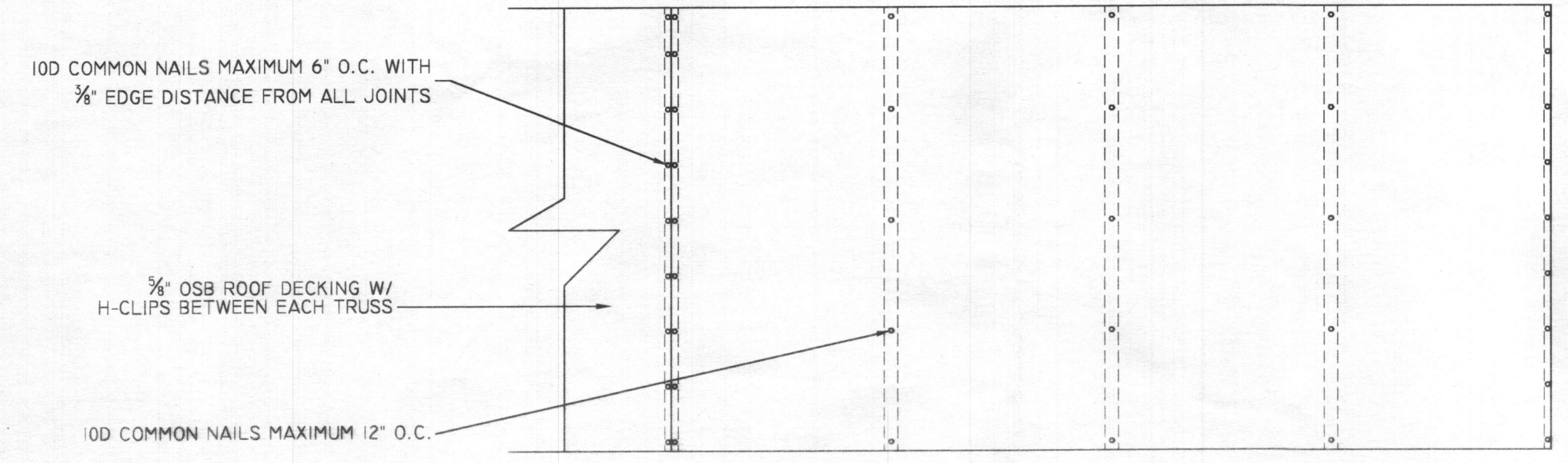
LATERAL & DIAGONAL BRACING DETAIL  
SCALE: 3/4" = 1'-0"

CORNER BRACING DETAIL  
SCALE: 3/4" = 1'-0"

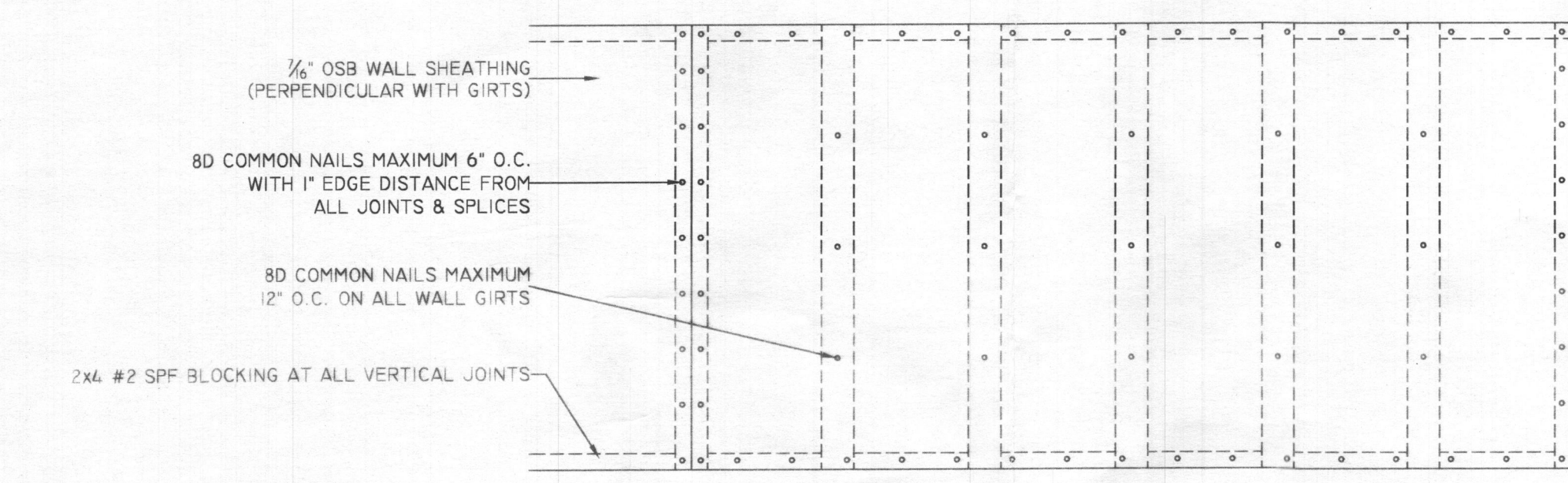


TORSION SPRING BOX DETAIL  
SCALE: 1/2" = 1'-0"

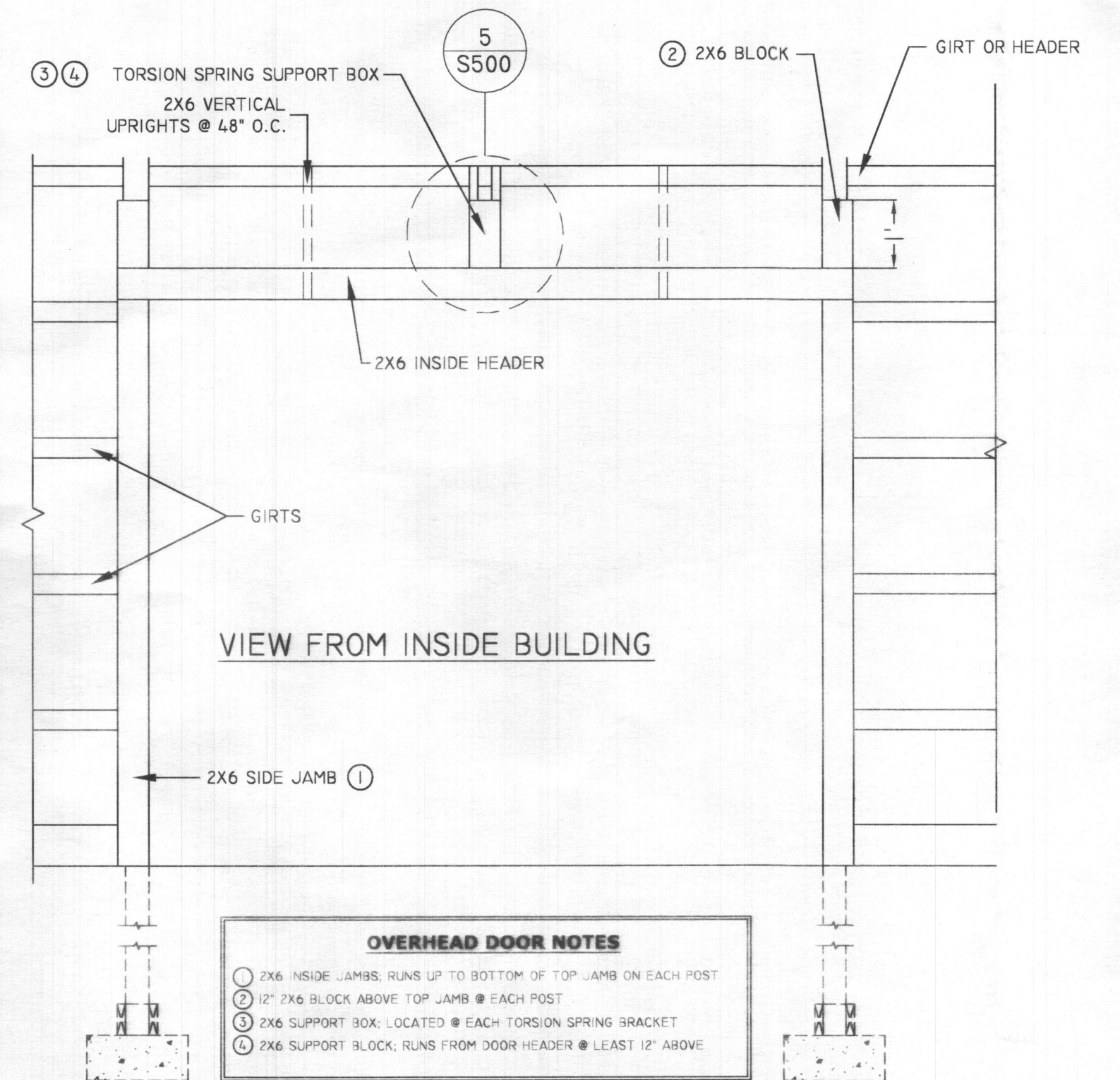
OH D HEADER SECTION  
SCALE: 3/4" = 1'-0"



TYPICAL ROOF DECKING ATTACHEMENT DETAIL  
SCALE: 3/4" = 1'-0"



TYPICAL WALL SHEATHING ATTACHEMENT DETAIL  
SCALE: 3/4" = 1'-0"



**OVERHEAD DOOR NOTES**

- 2X6 INSIDE JAMBS RUNS UP TO BOTTOM OF TOP JAMB ON EACH POST
- 1" 2X6 BLOCK ABOVE TOP JAMB @ EACH POST
- 2X6 SUPPORT BOX: LOCATED @ EACH TORSION SPRING BRACKET
- 2X6 SUPPORT BLOCK: RUNS FROM DOOR HEADER @ LEAST 12" ABOVE

OVERHEAD DOOR FRAMING DETAIL  
SCALE: 1/2" = 1'-0"