

Menu Save Reset Cancel Help

Record Detail * (This section is required.)

Permit Type	Permit Number	Opened Date
Building/Residential/Misc/Pool Spa	B20004009	11/16/2020
Description of Work		
SFD/ INSTALL 20' X 36' INGROUND SWIMMING POOL, DEPTH 3' 6" - 8' WITH FENCE TO CODE, FILLED BY TRUCK		

[check spelling](#)

Address * (This section is required.)

Search Reset Clear Get Parcel & Owner

Street #	Street Name	Street Type	
2822	BRIDALWREATH	CT	
Unit Type	Unit #	X Coordinate	Y Coordinate
--Select--		-77.04944	39.28858
City	State	Zip Code	Primary
WOODBINE	MD	21797	Yes

'OK'
MB
10/27/21

Parcel * (This section is required.)

Search Reset Clear Get Address & Owner

GIS ID *	Parcel	Parcel Area	Land Value	Improved Value	Exemption Value	Plan Area
926421	66	40029	215600	699200	483600	RURAL
Legal Description						
IMPSLOT 16 40029 SQ[2822 BRIDALWREATH COURT[]BELLE HAVEN ESTATES						

[check spelling](#)

Block	Lot	Census Tract	Council Dist	Inspection Dist	Supervisor Dist	Map #	DAP Zone
	16	605601	5				
Plan Area	State Tax Id	Subdivision Name					
	1404373804	Belle Haven Estates					
Section	Area	Tax Map					
		14					
Grid	Zoning District	ADC Map					
14-20	RC-DEO	4812-C4					
SDP No.	Final Plan No.	WP File No.	Primary				
	F-07-038		Yes				
Record Plat No.	WS Contract No.	FDP No.					
19948-1995							
Owner Occupied	Year Built	Historic District					
<input type="radio"/> Yes <input type="radio"/> No	2013	<input type="radio"/> Yes <input checked="" type="radio"/> No					
Historic District Registry No.	Stat Area	Flood Plain					
	4-08	<input type="radio"/> Yes <input checked="" type="radio"/> No					

Building No

Owner * (This section is required.)

Search Reset Clear

Name *

Address Line 1

Address Line 2

Address Line 3

Mail City

Mail State

Mail Zip Code

Phone

Primary

E-mail

Cell Number

Fax Number

Professionals (This section is not required.)

Search Reset Clear

License # *

Business Name

License Type *

First Name

Middle Name

Last Name

Primary

Address Line 1

Address Line 2

City

State

ZIP Code

Phone 1

Phone 2

Fax

E-mail

Applicant (This section is not required.)

Search As Owner As Lic. Prof As Contact

Type *

First Name

MI

Last Name

Relationship

Full Name

Primary

Organization Name

Street Address

Address Line 2

City	State	Zip Code
MARRIOTSVILLE	MD	21104-0000
Phone	Cell	Fax
4104425005		4104425005
E-mail *		
INFO@GALLOWAYPOOLSERVICE.COM		

Addtl Info

Est Construction Cost *	Housing Units *	Number of Buildings *	Public Owned
85000	0	0	No <input type="checkbox"/>
Construction Type			
329 - Structures Other Than Buildings (Retaining Walls/Tents) <input type="checkbox"/>			

POOL INFORMATION

MISCELLANEOUS POOL INFORMATION

Capital Project-No Fee *	Capital Project Number	Fee Exempt *	Water Supply *	Sewage Disposal *
<input type="radio"/> Yes <input checked="" type="radio"/> No		<input type="radio"/> Yes <input checked="" type="radio"/> No	Private <input type="checkbox"/>	Private <input type="checkbox"/>
Existing Use	Type of Pool or Spa *	Electrical Permit Number	Expiration Date	
SFD <input type="checkbox"/>	In Ground Pool <input type="checkbox"/>		5/16/2021 <input type="checkbox"/>	

PAYMENT INFORMATION

Check 1	Payee 1	SAP Doc No	SAP Entered

Submit Cancel

GENERAL NOTES

1. OWNER: TODD A STUB
 2822 BRIDALWREATH COURT
 WOODBINE, MD 21797
 PHONE NUMBER: 301-440-5130
 DEED REF: 15326003.2
 PARCEL: 0066 LOT: 16
 TAX MAP: 14 GRID: 0020
 SITE ADDRESS: LOT 16 BRIDALWREATH COURT
 WOODBINE, MD 21797

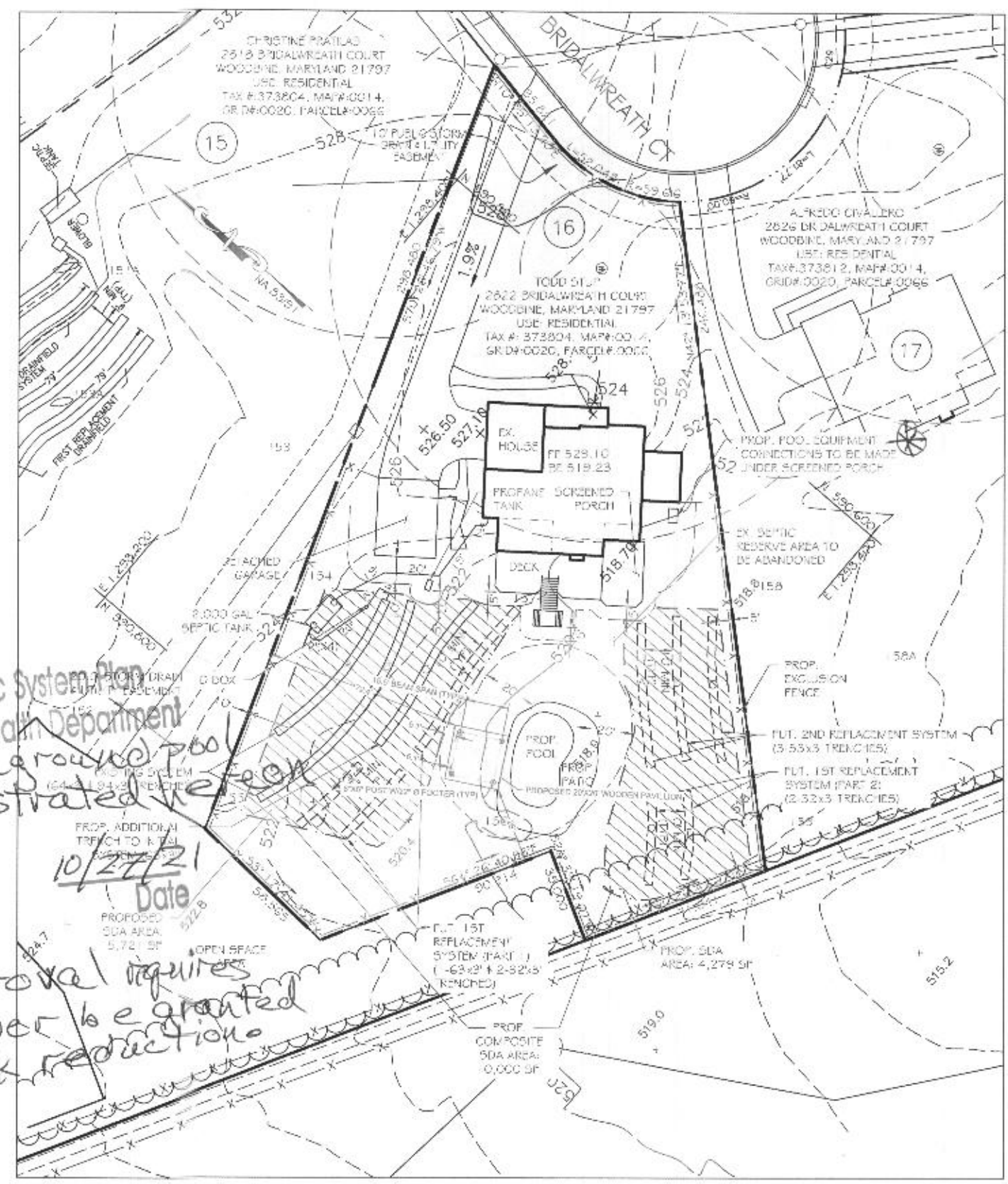
AFFILIANT: BRIAN COLLINS
 932 RIDGEBROOK RD
 SPARKS, MD 21152
 BRIAN_COLLINS@KCI.COM 410-516-7800

- BASE SQUARE FOOTAGE OF HOUSE: 4,755 SQ FT.
NUMBER OF BEDROOMS: 6
- EJECTOR PUMP REQUIRED TO SEWER BASEMENT
- DRIVEWAY CULVERT NOT REQUIRED PER THE APPROVED ROAD DRAWING
- THE SUBJECT PROPERTY IS ZONED R-2020 PER THE 2004 COMPREHENSIVE ZONING PLAN AND PER COMPLIANT ZONING REGULATIONS DATED 7/28/06.
- BASE INFORMATION SHOWN ON THIS PLAN IS BASED ON PLANS PREPARED BY DMW, AND DATED 06/25/07, EXISTING TOPOGRAPHY BASED ON GRADING PLAN PREPARED BY DEMARLO DESIGN CONSULTANTS DATED 07/20/07 AND FIELD RUN TOPOGRAPHY PREPARED BY DDC INC IN JAN. 2012.
- THE CONTRACTOR SHALL NOTIFY "MISS UTILITY" AT 1-800-257-7777 AT LEAST FORTY-EIGHT (48) HOURS PRIOR TO ANY EXCAVATION WORK BEING DONE.
- STORMWATER MANAGEMENT FOR THIS LOT IS PROVIDED PER THE PREVIOUSLY APPROVED FINAL PLAN.
- ANY DAMAGE TO PUBLIC RIGHT OF WAY OR PAVED PUBLIC ROADS SHALL BE REPAIRED IMMEDIATELY AT THE CONTRACTORS EXPENSE IN ACCORDANCE WITH THE HOWARD COUNTY STANDARDS AND SPECIFICATIONS.
- DEVIATIONS FROM THESE PLANS AND SPECIFICATIONS WITHOUT PRIOR WRITTEN CONSENT OF THE CIVIL ENGINEER AND TECHNOLOGIST MAY CAUSE THE WORK TO BE UNACCEPTABLE.
- THE DIMENSIONED DISTANCES SHALL GOVERN IF SCALD AND DIMENSIONED DISTANCES ON THIS PLAN ARE FOUND TO BE IN DISAGREEMENT.
- THE LOTS SHOWN HEREON COMPLY WITH THE MINIMUM LOT AREA AND OVERLAP WIDTH AS REQUIRED BY THE MARYLAND DEPARTMENT OF THE ENVIRONMENT.
- EXISTING WELLS, SEPTIC SYSTEMS, AND SEWAGE DISPOSAL AREAS WITHIN 100' OF THE PROPERTY AND THOSE WELLS WITHIN 200' DOWN GRADIENT OF EXISTING OR PROPOSED SEPTIC SYSTEMS OR SEWAGE DISPOSAL AREAS HAVE BEEN SHOWN.
- ANY CHANGES TO A PRIVATE SEWAGE AREA SHALL REQUIRE A REVISED PERCOLATION CERTIFICATION PLAN UPON BUILDING PERMITS REVIEW OF THE SEPTIC SYSTEMS OF ALL PROPOSED STRUCTURES AND OR EXISTING STRUCTURE EXPANSIONS SHALL BE RE-EVALUATED TO DETERMINE SUFFICIENT SYSTEM CAPACITY.
- THE DEVELOPMENT OF THIS LOT DOES NOT REQUIRE AN ENVIRONMENTAL CONCEPT PLAN SINCE STORMWATER MANAGEMENT WAS PREVIOUSLY APPROVED UNDER E-07-30.
- THIS AREA DESIGNATES A PRIVATE SEWAGE DISPOSAL AREA OF AT LEAST 10,000 SQ. FT. AS REQUIRED BY THE MARYLAND DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED. THIS SEWAGE DISPOSAL AREA SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE AUTHORITY TO GRANT ADJUSTMENTS TO THE PRIVATE SEWAGE AREA. RECORDATION OF A REVISED SEWAGE AREA SHALL NOT BE NECESSARY.
- ANY CHANGES TO THE LOCATIONS OR DEPTHS TO ANY COMPONENTS MUST BE APPROVED BY THE ENGINEER AND THE HOWARD COUNTY HEALTH DEPARTMENT PRIOR TO INSTALLATION. A REVISED SITE PLAN MAY BE REQUIRED.
- TOPOGRAPHY SHOWN IS AT TWO FOOT CONTOUR INTERVALS (ONE FOOT INTERVALS ARE REQUIRED FOR MOUND SYSTEMS AND SYSTEMS WITH PIPE DEPTH LESS THAN TWO FEET) AND HAS BEEN FIELD VERIFIED OR FIELD RUN.
- A PROFESSIONAL SUPERVISOR OR ENGINEER MUST MARK THE PROPERTY LINE WHEN TRENCHES ARE BEING INSTALLED IN AREAS WHERE THE PROPERTY LINE SETBACK HAS BEEN REDUCED.
- THE 1ST REPLACEMENT SYSTEM WILL REQUIRE A PRESSURIZED DISTRIBUTION DESIGN AND A PUMP TANK AND PUMP WILL BE NEEDED AT TIME OF REPAIR.

- EXISTING SEWAGE DISPOSAL SYSTEM DATA (6 BEDROOM)
- INVERT @ TOLLIDATION WALL: 519.23 (EJECTOR PUMP REQUIRED)
 - 800 GPD BIR SYSTEM W/ 750 GALLON PUMP CHAMBER
 EX. GRADE OVER TANK: 10'
 PROPOSED GRADE OVER TANK: 12'
 INVERT: 520.75
 - DISTRIBUTION BOX
 EX. PROPOSED GRADE OVER TANK: 5.17'
 INVERT: 519.12
 - TRENCH LENGTH AND SPACING CALCULATIONS
 TRENCH DESIGN (6 BDRM) X 1.50 GPD/SF (M) = 750 GPD
 INITIAL SYSTEM
 800 GPD / 0.8 GPD/SF (APP. RATE) = 1125
 USE 3' WIDE TRENCH W/ 36" OF GRAVEL BELOW PIPE EFFECTIVE AREA 4' x 7'
 11.25 SF / 3' WIDTH = 375 LF x 0.50 = 187.5 LF MIN. TRENCH
 10' MIN. SPACING BETWEEN TRENCH EDGES
 - 1ST REPLACEMENT SYSTEM
 800 GPD / 0.8 GPD/SF (APP. RATE) = 1125
 USE 3' WIDE TRENCH W/ 36" OF GRAVEL BELOW PIPE EFFECTIVE AREA 4' x 7'
 11.25 SF / 3' WIDTH = 375 LF x 0.50 = 187.5 LF MIN. TRENCH
 10' MIN. SPACING BETWEEN TRENCH EDGES
 - 2ND REPLACEMENT SYSTEM
 800 GPD / 0.8 GPD/SF (APP. RATE) = 1125
 USE 3' WIDE TRENCH W/ 48" OF GRAVEL BELOW PIPE EFFECTIVE AREA 4' x 8'
 11.25 SF / 3' WIDTH = 375 LF x 0.43 = 157.5 LF MIN. TRENCH
 10' MIN. SPACING BETWEEN TRENCH EDGES
- 2 - 64 AND 1 - 54 TRENCHES FOR INITIAL SYSTEM
 5 - 63' LONG TRENCHES FOR FIRST REPLACEMENT SYSTEM
 3 - 53' LONG TRENCHES FOR SECOND REPLACEMENT SYSTEM

LOT 16 EXISTING SYSTEM TRENCH SPECIFICATIONS			
TRENCH #	GROUND ELEVATION	INVERT ELEVATION	BOTTOM ELEVATION
TRENCH # 64	522.7	517.7	514.7

B20004009
 2822 Bridalwreath Ct
 in ground pool proposal



Approved Septic System Plan
 Howard County Health Department
 20' x 36' in ground pool
 only as illustrated herein
 Brian Collins
 Signature
 10/27/21
 Date

Pavilion approval requires
 that a waiver be granted
 for setback reductions

LOT 16 PLAN VIEW
 SCALE: 1"=50'