

APPLICATION

A 26161

SEWAGE DISPOSAL TESTING

P _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

3 B.R. 1000 gal. septical tank

4 B.R. 1250 gal. septical tank

DISTRICT 5th

DATE 6/21/77

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

Drywell and trench system to have

160 SQ. FT. effector silwall absorber area per bedroom to begin below the first 3 1/2 ft. of non porous soil. Maximum depth permitted for drywell and trench is 9 1/2 ft. below original grade. Place the drywell 180 ft. from the rear (700 ft. long) property line and 200 ft. from the left (616 93 ft. long) side line, as seen when facing the property from the end of the 100 ft. wide common right of way off The Oaks Road. Start the trench after a 5 foot earth buffer with the drywell and proceed to dig it on level ground the necessary distance.

NOTE: Call for inspection of trench before gravel is installed.

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 Allan Weintraub BEN & JUDITH SIMMONS

ADDRESS @ Richard Hallowell Highland, Md. 20777 PHONE 286-2988

PROPERTY LOCATION: _____
SUBDIVISION _____ LOT NO. Parcel 11 5.297 ac

ROAD AND DESCRIPTION At end of private road off west side of intersection #5360 of Ten Oaks Rd & Highland Rd - 5th Dist.

SIZE OF LOT 5.297 ac. rec661/235 on 11/21/73 TYPE BLDG. 4 bedrms single family res.
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 Richard Hallowell

APPROVED BY Frank Skinner FOR Drywell & trench DATE 2/17/78
(KIND OF SYSTEM)

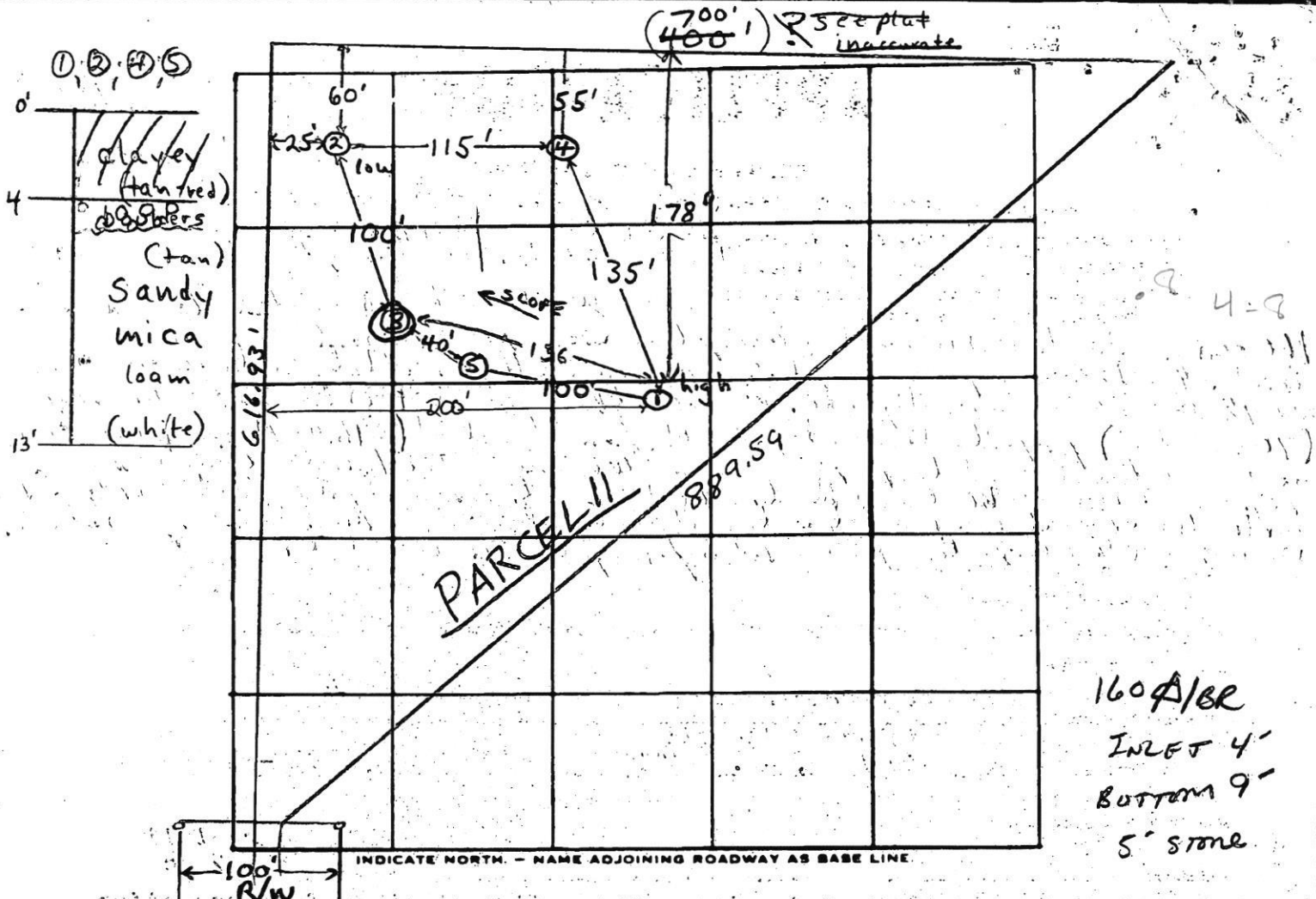
REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 7/28/77 Hold for signed boundary plat, per O.H.F.S. B.P.# 71042

BLDG. PERMIT SIGNED AND RETURNED 7/28/78

THIS IS NOT A PERMIT



DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
7/26/77	1 high	4'	4:26	—	—	4:33	7 min	
	1A	12'	4:26	4:33	4:33	4:52	19 min	
	2	3 1/2'	4:35	4:37	4:37	4:41	4 min	
	2A	12'	4:35	4:37	4:37	4:41	4 min	
	3 low	4 1/2'	4:45	pulled peg 5:03 1/2" drop			F.H.S.	
	3A	12'	4:45	4:55	4:55	pulled peg 5:05 1/2" drop		
	4	12'	Clayey to 3 1/2' silty mica loam below					
7/27/77	5	4'	11:37	11:40	11:40	11:46	6 min	
	5A	13'	11:37	11:40	11:46	11:47	7 min	

REMARKS 3 has 5' clay barrier. Check final plat for corrected rear line length

TYPE OF SOIL sandy mica loam below top 4' clayey soil

TESTED BY F.S. ALSO PRESENT: Fyock's crew

CT 1863 SEQUENCE NO. (OEP USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE MARYLAND
 WELL COMPLETION REPORT
 FILL IN THIS FORM COMPLETELY
 PLEASE PRINT OR TYPE

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

DATE RECEIVED [] [] [] [] [] []
 DATE WELL COMPLETED 05 30 86

Depth of Well 22 300 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-81-1982

OWNER SIMMONS Ben
 STREET OR RFD last name 3605 Sherwood Forest first name TOWN SILVER SPRING MD, 20904
 SUBDIVISION PINE OAKS FARMS SECTION LOT 11

WELL LOG Not required for driven wells
 STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (Use additional sheets if needed)	FEET		Check if water bearing
	FROM	TO	
Top Soil	0	2	
Sandy	2	55	✓
Shred Stone	55	60	
Mudstone	60	80	
Shred Stone	80	85	✓
Mudstone	85	300	

GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) YES (Y) NO (N)

TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE CLAY BC
 NO. OF BAGS 18 NO. OF POUNDS 1800
 GALLONS OF WATER 108
 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 50 ft.

CASING RECORD casing types Insert appropriate code below
 ST CO STEEL CONCRETE
 PL OT PLASTIC OTHER

MAIN CASING TYPE Nominal diameter (nearest inch) Total depth of main casing (nearest foot)
 PL 6 62

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

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

DEPTH (nearest ft.) HO 65 300

CIRCLE APPROPRIATE LETTER WHEN THIS WELL WAS COMPLETED
 A A WELL WAS ABANDONED AND SEALED
 E ELECTRIC LOG OBTAINED
 P TEST WELL CONVERTED TO PRODUCTION WELL

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 10.17.13 "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 IDENT. NO. 203
 DRILLERS SIGNATURE [Signature]

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

SLOT SIZE 1 2 3
 DIAMETER OF SCREEN (NEAREST INCH) 56 60

GRAVEL PACK from to
 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

C 3 PUMPING TEST

HOURS PUMPED (nearest hour) 6
 PUMPING RATE (gal. per min. to nearest gal.) 3
 METHOD USED TO MEASURE PUMPING RATE Bucket
 WATER LEVEL (distance from land surface) BEFORE PUMPING 32 WHEN PUMPING 205

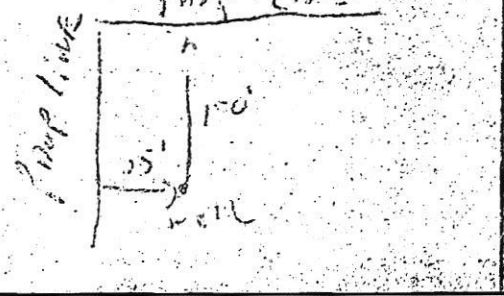
TYPE OF PUMP USED (for test) A air P piston T turbine C centrifugal R rotary O other (describe below) J jet S submersible

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) 31 35
 PUMP HORSE POWER 37 41
 PUMP COLUMN LENGTH (nearest ft.) 43 47
 CASING HEIGHT (circle appropriate box and enter casing height) + above - below LAND SURFACE (nearest foot)

LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASURED TO WELL)



SEQUENCE NO. (OEP USE ONLY) 0568

STATE OF MARYLAND PERMIT TO DRILL WELL

please print or type

OEP PERMIT NUMBER

40-81-1472

fill in this form completely

Date Received

09/08/86

OWNER INFORMATION

SIAMONS, RENE

13105 SHERWOOD FOREST

SILVER SPRING MD 20904

DRILLER INFORMATION

Ralph Mayne 223

Ralph Mayne (well drilling)

9170 River Road Mt Airy

Ralph Mayne 5/1/86

LOCATION OF WELL

MARYLAND

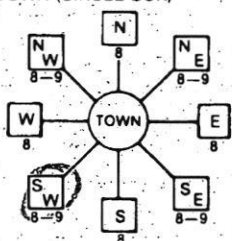
TEN OAKS FARMS

SECTION 44-46 LOT 48-50

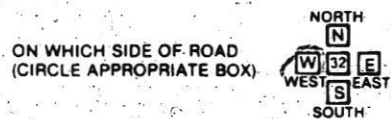
NAVYTON

MILES FROM TOWN (enter 0 if in town) 1 MI

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



MORNING STAR RD



DISTANCE FROM ROAD 1000 ENTER FT or MI

WELL INFORMATION

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

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

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 COUNTY NO. A-1161

OEP SIGNATURE STATE HEALTH INSERT S

DATE ISSUED 06/28/86 CO SIGNATURE EXP. DATE 12/31/86

NORTH GRID 506000 EAST GRID 0803000

APPROXIMATE DEPTH OF WELL 150 FEET

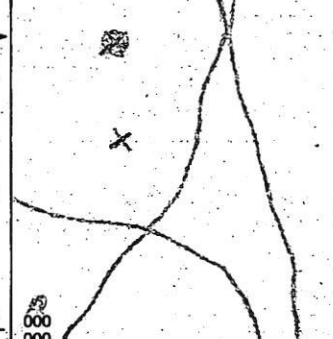
APPROXIMATE DIAMETER OF WELL 6" NEAREST INCH

METHOD OF DRILLING (circle one)

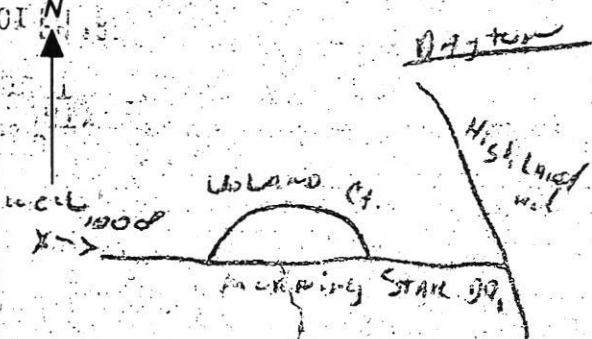
- BORED (or Augered) JETTED Jetted & DRIVEN
AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)
CABLE REVERSE-ROTARY DRIVE-POINT
other

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
SOURCES OF DRILLING WATER
1. well
2.
3.
WRITE THE BOX NUMBER FROM THE MAP HERE

Map grid with box numbers 8003 and 5006



DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION



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
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)

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

APPROP. PERMIT NUMBER GAP

FORCE 5 WRITE INITIALS IN BOX PERMIT NO. 40-81-1472

SPECIAL CONDITIONS



HOWARD COUNTY HEALTH DEPARTMENT

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

November 19, 1990

Reply to:

Charles Streaker, Sanitarian
461-9933 or 461-9934

Ms. Judy Simmons
5502 Harris Farm Lane
Sykesville, Maryland 21784

For 3/7/91
=

RE: Allan Weintraub Property
5502 Harris Farm Lane
Well Permit No. HO-81-1492.

Dear Ms. Simmons:

A review of our records indicates that final satisfactory water samples were not obtained at the above referenced property. You are requested to contact this office at 461-9933 to arrange for those samples to be taken. These samples are required in order to comply with Maryland Well Construction Regulation (COMAR 26.04.04.09A) (1) which states that: "A person may not put into service a well of water supply system that may be used for human consumption unless a Certificate-of-Potability has first been issued for the well by the approving authority...".

An Interim Certificate-of-Potability was issued based on one satisfactory water sample. The enclosed copy of that Interim Certificate stipulates that a second safe sample be obtained. The purpose of the second sample is to assure that the well is not vulnerable to re-contamination.

You are requested to call this office at 461-9933 to arrange an appointment for the second sample from an inside tap which is the most reliable location from which to obtain a safe sample.

Presently there is no charge for this service.

Very truly yours,

Charles Streaker
Charles Streaker, Sanitarian
Water and Sewerage Program

CS:cm

Bureau of Environmental Health
3525 Ellicott Mills Drive Ellicott City, Maryland 21043-4544
Director 461-9956 Water and Sewerage, Permits 461-9933 Community Environmental Health 461-9944
Technical Services 461-9955

Mr. Craig Williams, Director
Water and Sewerage Program
Howard County Dept. of Health
Bureau of Environmental Health
P.O. Box 476
Ellicott City, Maryland 21043

June 18, 1991

Dear Mr. Williams,

I am applying for a certificate to operate Sheltered Housing for the Elderly at 5502 Harris Farm Lane, Clarksville, Maryland 21029 and part of the requirement is that my facility has to pass an Environmental Health Analysis conducted by your office. I am asking to be certified for 8 residents and I will appreciate your checking my well and septic system for this purpose.

I have gone through this process before with my first facility also in Clarksville, at 6540 Haviland Mill Road, which your office certified on August 11, 1989. I hope this information helps.

Thank you very much and please let me know when someone can come out to test my well and water for the said analysis. You can reach me during the day at 202-707-5899.

Sincerely yours,

Linda C. Pachoca
Linda C. Pachoca
5502 Harris Farm Lane
Clarksville, Maryland 21029

2/11/91
MARCH 18, 1991 FCOP BY US
OK FOR WATER RESULTS

APPLICANT INDICATES
HOUSE HAS 7 BDRMS
NOT 4.

ADDITIONAL PWC SEPTIC
CAPACITY WOULD BE REQUIRED
TO AUTHORIZE INCREASE

SCHEDULED FOR
9/15/91
10/06



LOT 11
TEN ONES FARM

HOWARD COUNTY HEALTH DEPARTMENT

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

March 18, 1991

Reply to:

Charles Streaker, Sanitarian
461-9933 or 461-9934

Ms. Linda Pachoca
5502 Harris Farm Lane
Clarksville, Maryland 21029

Re: Allen Weintraub Property
5502 Harris Farm Lane
Well Permit No. HO-81-1492

Dear Ms. Pachoca:

This is to advise you that the septic system was installed, inspected and approved on May 8, 1987.

The water sample recently submitted for testing was free of coliform and fecal coliform bacteria at the time of sampling and bacteriologically safe for drinking.

FINAL CERTIFICATION OF POTABILITY

This certifies that all sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under permit(s) HO-81-1492.

March 7, 1991
Date of Final Sampling

March 18, 1991
Date of Acceptance

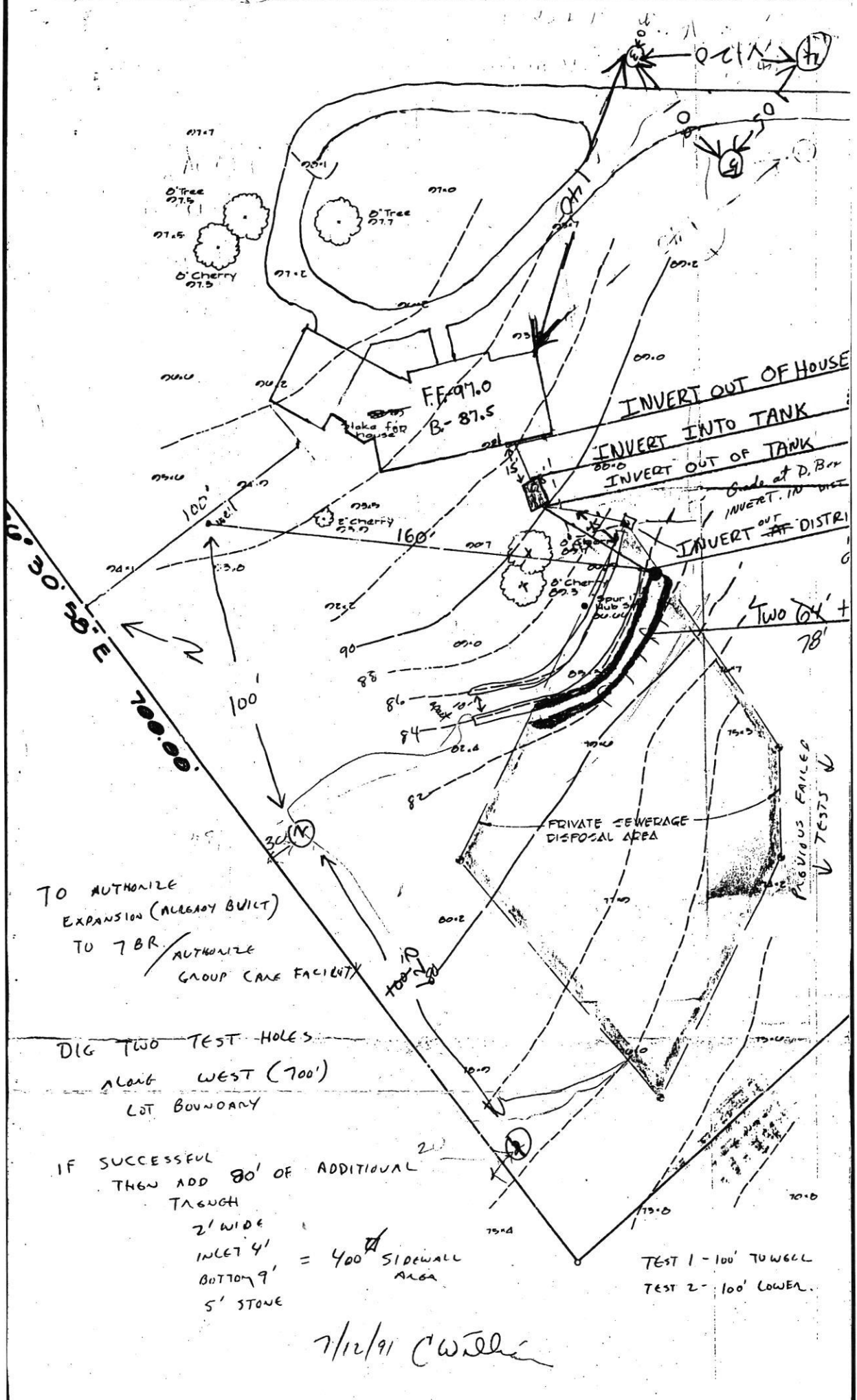
*Mr. Williams,
I understand this
certification
is not sufficient
for my purpose
Linda Pachoca*

Charles Streaker
Charles Streaker, Sanitarian
Water and Sewerage Program

Water Sample Dates:
October 10, 1990
March 7, 1991

CS:cm

Bureau of Environmental Health
3525-H Ellicott Mills Drive Ellicott City, Maryland 21043-4544
Water and Sewerage, Permits 461-9933 Community Environmental Health 461-9944
Technical Services 461-9955 Director 461-9956 TDD 313-2323



TO AUTHORIZE
 EXPANSION (ALREADY BUILT)
 TO 7 BR.
 AUTHORIZE
 GROUP CARE FACILITY

DIG TWO TEST HOLES
 ALONG WEST (700')
 LOT BOUNDARY

IF SUCCESSFUL
 THEN ADD 80' OF ADDITIONAL
 TROUGH
 2' WIDE
 INLET 4'
 BOTTOM 9' = 400' SIDEWALL
 5' STONE AREA

INVERT OUT OF HOUSE
 INVERT INTO TANK
 INVERT OUT OF TANK
 INVERT OUT OF DISTRI

PRIVATE SEWERAGE
 DISPOSAL AREA

PREVIOUS FAILED
 TESTS

TEST 1 - 100' TO WELL
 TEST 2 - 100' LOWER

7/12/91 CWL

PARCEL NO. II
5.297 ACRES

N 26° 30' 19" E
700.00'

S 17° 03' 18" E
805.55'

N 65° 15' 47" W
62.91'

MARYLAND GAS TRANSMISSION
COMPANY

PLAT FROM DEEDS
OF
PARCEL NO II
FOR
ALLEN WEINTRAUB
FIFTH ELECTION DIST., HOWARD CO
CLARKVILLE, MARYLAND
SCALE 1/4" = 100 FT JUNE 29, 1977

Rad. = 255.00'
L = 186.92'
Ch. = N 48° 00' 00" W
192.76'

Rad. = 260.00'
L = 190.55'
Ch. = S 48° 00' 00" E
186.35'

Rad. = 245.00'
L = 141.10'
Ch. = N 41° 30' 00" W
155.16'

Rad. = 240.00'
L = 138.23'
Ch. = S 43° 30' 00" E
156.32'

Rad. = 245.00'
L = 133.68'
Ch. = N 75° 38' 00" W
182.04'

Rad. = 240.00'
L = 130.91'
Ch. = S 73° 38' 00" E
128.35'

00 00'
N 00° 00' 00" E
5 88' 44 00" W
100.00'

UNASSIGNED
R/W = 261102

TEN OAKS
ROAD

5 01' 16 00" E
5.00'



John E. Rau
C-4394-11

NOTE: This plan was checked and complies with the
requirements of the State Dept. of Health & Mental Hygiene
regarding the use of a Public Survey.

Joseph M. Boyle, 10-21-77
DATE

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

Date: 2/2/19
To: Building Permits
(Person's Name and Division)
From: CGFO Investment Group (410) 949-0068
(Your Name, Company Name and Telephone Number)
Subject: Project name Assisted Living
Project site address 5502 Harris Farm Ln, Clarksville, MD 21029
Permit # B19001744 SDP # _____
Other information pertinent to this project _____

Approved
2/2
1/17/2023

- 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 _____ (be specific).
 - 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)

Smithy Dawson Telephone No: 410 949 0068
Please Print Name E-Mail Address: Edawson143@mc.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 MP Rension

TO: Howard County Department of Inspections,
Licenses and Permits

FROM: Timothy Dawson, CEO 
CGFD Investment Group, LLC

SUBJECT: REVISE BUILDING PERMIT APPLICATION
PROPERTY ADDRESS: 5502 HARRIS FARM LANE, CLARKSVILLE, MD 21029
OWNER: CGFD INVESTMENT GROUP, LLC.

I would like to revise my building permit application to change the proposed use number assisted living beds from 16 to 12. If you have any questions feel free to contact me at (410) 949-0068.

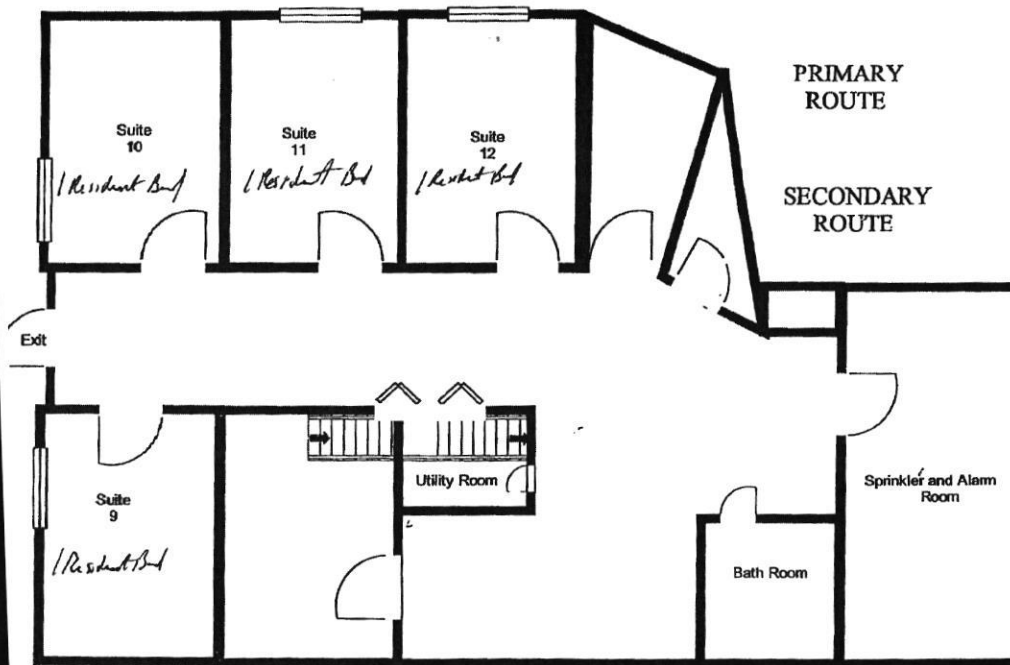


1 overnight staff member
RTE

PRIMARY ROUTE

HOWARD COUNTY ASSISTED LIVING AT CLARKSVILLE
 EMERGENCY EVACUATION ROUTE
 FIRST FLOOR

SECONDARY ROUTE



HOWARD COUNTY ASSISTED LIVING AT CLARKSVILLE
EMERGENCY EVACUATION ROUTE
LOWER LEVEL

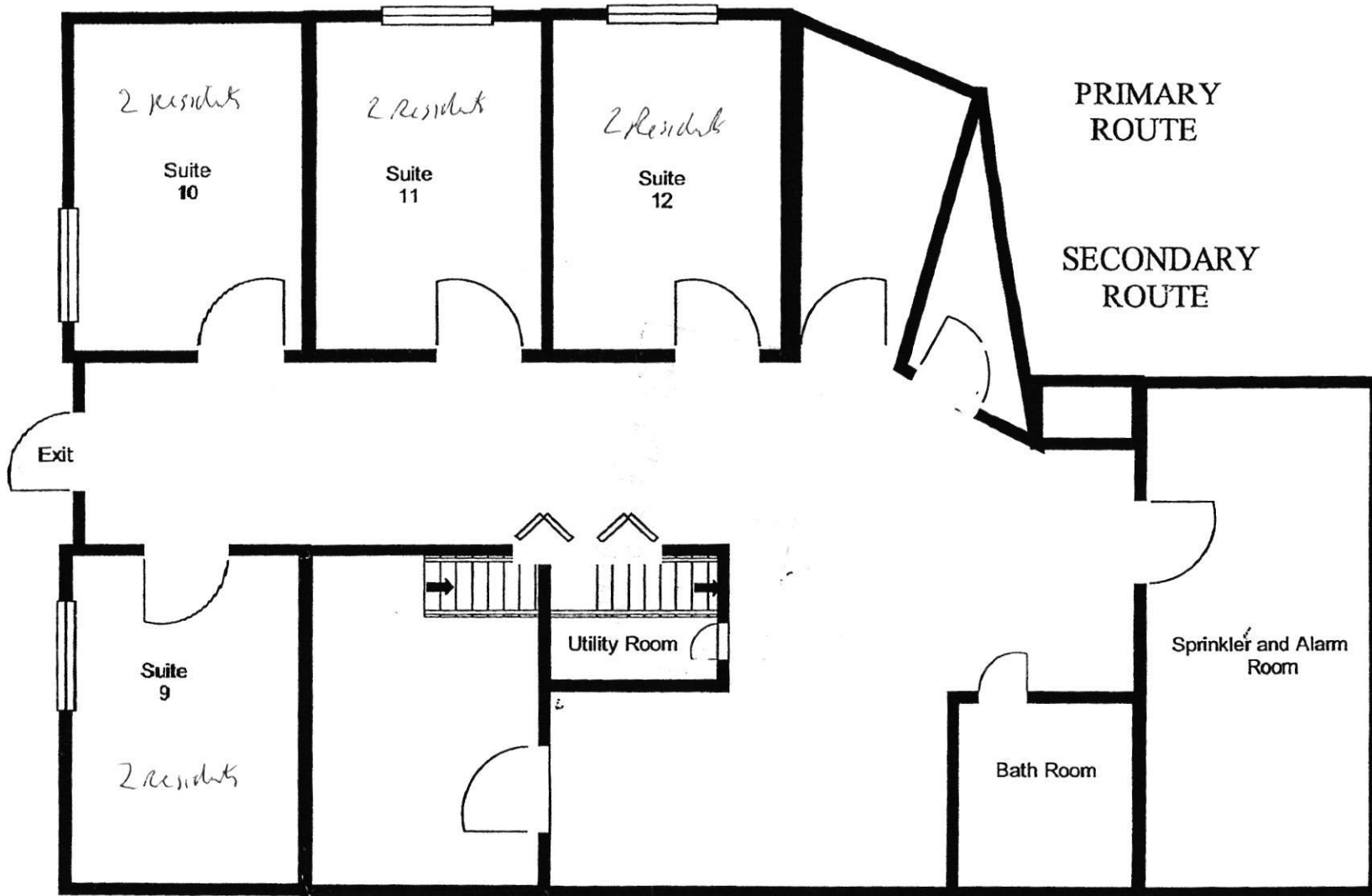


PRIMARY ROUTE

HOWARD COUNTY ASSISTED LIVING AT CLARKSVILLE
EMERGENCY EVACUATION ROUTE

FIRST FLOOR

SECONDARY ROUTE



HOWARD COUNTY ASSISTED LIVING AT CLARKSVILLE
 EMERGENCY EVACUATION ROUTE

LOWER LEVEL



Building Permit Application

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

DILP 2019 MAY 30 AM 8:47

Date Received: _____

Permit No.: B19001744

Building Address: 5502 Harris Farm Lane
City: Clarksville State: MD Zip Code: 21029
Suite/Apt. # _____ SDP/WP/BA #: _____
Subdivision: _____
Lot: _____ Tax Map: _____ Parcel: _____

Existing Use: Assisted Living 8 beds 8 rooms
Proposed Use: Assisted Living 10 beds 11 rooms
Estimated Construction Cost: \$ 55,000
Description of Work: NO WORK
EXISTING ASSISTED LIVING -
2 RESIDENTS in 4 rooms in basement
8 private rooms on level 1 for 8 residents

Occupant/Tenant Name: Howard County Assisted Living
Was tenant space previously occupied? Yes No
Contact Name: Tom Dawson
Address: 14215 McLean Lane Dr
City: Elkridge State: MD Zip Code: 21737
Phone: 4109490068 Fax: _____
Email: tdawson143@me.com

Property Owner's Name: CEFA Investment Group LLC
Address: 14215 McLean Lane Dr
City: Elkridge State: MD Zip Code: 21737
Phone: 4109490068 Fax: _____
Email: tdawson143@me.com

Applicant's Name & Mailing Address, (If other than stated herein)
Applicant's Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Contractor Company: OWNER
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: _____

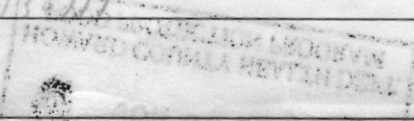
Commercial Building Characteristics	Residential Building Characteristics	
Height:	<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories:	Depth	Width
Gross area, sq. ft./floor:	1 st floor:	
Area of construction (sq. ft.):	2 nd floor:	
Use group:	Basement:	
	<input type="checkbox"/> Finished Basement	
	<input type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
Construction type:	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms: <u>12</u>	
<input type="checkbox"/> Structural Steel	Multi-family Dwelling	
<input type="checkbox"/> Masonry	No. of efficiency units:	
<input type="checkbox"/> Wood Frame	No. of 1 BR units:	
<input type="checkbox"/> State Certified Modular	No. of 2 BR units:	
	No. of 3 BR units:	
	Other Structure:	
	Dimensions:	
<input checked="" type="checkbox"/> Roadside Tree Project Permit	Footings:	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Roof:	
Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Utilities	
Electric:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Gas:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Water Supply	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Sewage Disposal	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Heating System	
<input checked="" type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
Sprinkler System:	
<input checked="" type="checkbox"/> Yes <input 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: _____
Email Address: tdawson143@me.com
Title/Company: _____

Print Name: Tom Dawson
Date: 5/15/19



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		

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	\$
Permit Fee	\$ <u>50</u>
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$ <u>55.00</u>
Total Fees	\$ <u>105.00</u>
Sub- Total Paid	\$
Balance Due	\$
Check #	<u>1505</u>

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

MISC REP G MARTIN *MAIL TO OWNER ADDRESS

Original
TSP was
Revised



Building Permit Application

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

011 P 20 14 MAY 30 04:47

Date Received: _____

Permit No.: B19001744

Building Address: 5502 Harris Farm Lane
City: Clarksville State: MD Zip Code: 21029
Suite/Apt. #: _____ SDP/WP/BA #: _____
Subdivision: _____
Lot: _____ Tax Map: _____ Parcel: _____

Existing Use: Assisted Living 8 beds 8 rooms
Proposed Use: Assisted Living 10 beds 12 rooms
Estimated Construction Cost: \$5.6M
Description of Work: NO WORK
EXISTING ASSISTED LIVING -
2 residents in 4 rooms in basement
8 private room on level 1 for 8 resident

Occupant/Tenant Name: Howard County Assisted Living
Was tenant space previously occupied? Yes No
Contact Name: Tom Dawson
Address: 14215 Meadow Lake Dr
City: Elkridge State: MD Zip Code: 21737
Phone: 4109490068 Fax: _____
Email: Edawson143@Mc.com

Property Owner's Name: CEFO Investment Group LLC
Address: 14215 Meadow Lake Drive
City: Elkridge State: MD Zip Code: 21737
Phone: 4109490068 Fax: _____
Email: Edawson143@mc.com

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

Contractor Company: OWNER
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 checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories:	Depth	Width
Gross area, sq. ft./floor:	<input checked="" type="checkbox"/> 1 st floor:	
	<input type="checkbox"/> 2 nd floor:	
Area of construction (sq. ft.):	<input checked="" type="checkbox"/> Basement:	
	<input checked="" type="checkbox"/> Finished Basement	
Use group:	<input type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
Construction type:	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms: <u>12</u>	
<input type="checkbox"/> Structural Steel	Multi-family Dwelling	
<input type="checkbox"/> Masonry	No. of efficiency units:	
<input type="checkbox"/> Wood Frame	No. of 1 BR units:	
<input type="checkbox"/> State Certified Modular	No. of 2 BR units:	
	No. of 3 BR units:	
	Other Structure:	
	Dimensions:	
➤ Roadside Tree Project Permit	Footings:	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Roof:	
Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Utilities	
Electric:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Gas:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Water Supply	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Sewage Disposal	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Heating System	
<input checked="" type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
Sprinkler System:	
<input checked="" type="checkbox"/> Yes <input 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: _____
Edawson143@Mc.com
Email Address: _____
CEO
Title/Company

Print Name: Timothy Dawson
Date: 5/30/19
MAY 30 2019
LICENSES & PERMITS DIVISION

Check 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		

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	\$
Permit Fee	\$ <u>50</u>
Tech Fee	\$ <u>5</u>
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$ <u>55.00</u>
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$
Check	# <u>1505</u>



Rental License Application

DILP 2019 APR 22 AM 10:2

Howard County, Maryland
Department of Inspections, Licenses, and Permits

3430 Court House Drive, Ellicott City, MD 21043
Licenses: 410-313-2455 Inspections: 410-313-1830
www.howardcountymd.gov

License # T00006918

WHEN COMPLETING THE APPLICATION, PLEASE NOTE THE FOLLOWING:

This form must be signed by the property owner or legally authorized individual (Power of Attorney Required). Electronic Signatures are not accepted.

The property owner's information may not contain the same address as the rental property address, unless the owner is renting out rooms, a level of a home, or an apartment in their primary residence.

The property owner's information may not contain a PO Box unless listed as a business entity, or an APO/FPO/DPO Box. The property owner's address must be their physical domicile; if moving out-of-state, the address provided must be the new address.

The local/resident agent is the person/entity responsible to accept legal process on the behalf of the property owner.

APPLICATION TYPE: (Check One) REQUIRED - PLEASE PRINT OR TYPE

New Renewal Update Info Transfer Owner (Fee Required)

RENTAL PROPERTY INFORMATION: REQUIRED - PLEASE PRINT OR TYPE

Physical Property Address: 5502 Harris Farm Lane Unit:
City: Clarksville State: MD Zip Code: 21029
Subdivision/Village/Complex Name:

PROPERTY OWNER INFORMATION: REQUIRED - PLEASE PRINT OR TYPE

Owner(s) Name(s) (As it appears on tax records): CGFO Investment Group
Business Entity (If applicable): Corporation Association Partnership Trust Other: LLC
Owner's Address/Principal Office: 14215 Meadow Lake Drive
City: Glennville State: MD Zip Code: 21737
Phone: Cell: 410944 0068 Fax: 844-718-6300
Email:

Additional Info:

BILLING CONTACT: REQUIRED - PLEASE PRINT OR TYPE

Name: Howard County Assisted Living
Company:
Address: 14215 Meadow Lake Drive
City: Glennville State: MD Zip Code: 21737
Phone: Cell: 410944 90068 Fax: 844-718-6300
Email:

PROPERTY MANAGEMENT:

MARYLAND LOCAL OR RESIDENT AGENT:

(If Applicable) SAME AS Agent REQUIRED If owner is out-of-state or a business entity
Name: Timothy Dawson
Company: CGFO Investment Group, LLC
Address: 14215 Meadow Lake Drive
City: Glennville
State: MD Zip Code: 21737
Phone:
Cell: 410944 90068
Fax:
Email:

ADDITIONAL ADDRESS/CONTACT INFORMATION:

TYPE OF STRUCTURE: (Select One) REQUIRED - PLEASE PRINT OR TYPE

Single Family Dwelling Single Family Townhouse Duplex Mobile Home Multifamily Dwelling or Complex

TYPE OF RENTAL UNIT: (Select One) REQUIRED - PLEASE PRINT OR TYPE

Single Family Dwelling Townhouse Individually Owned Condominium Duplex Mobile Home

of bedrooms in unit(s): _____ Other Info: _____

Apartment(s) Accessory Apartment (In Owner's Primary Residence) *Requires Prior Approval from the Department of Planning and Zoning*

of units: _____ Additional Clarification (i.e. location of unit, etc.): _____

Rooming Unit(s)

of client sleeping rooms _____ # of tenants _____

Hotel Motel Bed and Breakfast Apartment Complex

of units: _____ Other Info: _____

Group Home Assisted Living *Fire Sprinkler System Required*

of client sleeping rooms: 12 To be licensed for 16 # of clients Other Info: _____

OTHER PROPERTY INFORMATION: REQUIRED - PLEASE PRINT OR TYPE

Year Built** : 1989 # of stories (Above Ground): 1 Historical District: Yes No

****Properties built before 1978 must provide a PHYSICAL COPY of the Maryland Department of the Environment (MDE) lead certification, which must be kept current.**

After 02/24/2006, ALL affected properties in which a person at risk (i.e. Under the age of 6, or a pregnant woman), and of whom the owner has been notified in writing, must satisfy the risk reduction standard as specified in § 6-815(a) of the Environment Article.

Fire Sprinkler System: Yes No Utilities: Gas Electric Solar Oil Geothermal

Type of Smoke Alarms: Battery Powered Only Hard Wired Combo CO Wireless

Water Supply: Public Private (Well) Sewage Disposal: Public Private (Septic or Shared Septic)

COMMUNITY ASSOCIATION INFORMATION: REQUIRED - PLEASE PRINT OR TYPE

Is the property part of a local Home Owner's Association (HOA) or Condo Association? (Please Select One) Yes* No
**If yes, by signing this document, I certify that my association fees are current and/or not more than 30 days past due AND there is no outstanding final adjudication against me/us for failure to pay said fees to the governing association.*

Association Name: _____

Association Address: N/A

City: _____ State: _____ Zip Code: _____

Association Phone: _____ Association Fax: _____

Association Email: _____

AGREEMENT/DISCLAIMER: REQUIRED - PLEASE PRINT OR TYPE

A rental license application must be on file with the Department of Inspections, Licenses, and Permits, all necessary fees paid, and an inspection conducted and approved, before the issuance of the Rental Housing License. Applications expire 6 months after the date of application if no inspection has been conducted and approved. The Owner's contact information must be kept current to maintain the license. By my signature below, I grant permission to access the property to conduct inspections:

I, CGFI - Timothy Dawson CEO (Owner, please print) have carefully examined and read this application and know the same is true and correct, and that in renting this dwelling unit, all provisions of Howard County Ordinances and State Laws will be complied with whether herein or not.

[Signature] Date: 4, 22, 19
Property Owner Original Signature **REQUIRED** Manager/ Agent Signature (If Applicable)

Please make checks payable to: Director of Finance, Howard County. Renewable every two years.

THIS OFFICE MUST BE NOTIFIED IN WRITING OF ANY CHANGES; I.E. OWNER'S ADDRESS, AGENT BEING ADDED OR DELETED, PROPERTY BECOMING OWNER OCCUPIED, SOLD, OWNERSHIP TRANSFERS, ETC.

FAILURE TO DO SO MAY RESULT IN LATE FEES AND CIVIL CITATIONS PER HOWARD COUNTY CODE 14. 901 (d)(1).

****INCOMPLETE AND/OR INACCURATE APPLICATIONS WILL BE RETURNED****

FOR OFFICE USE ONLY:

Date Entered: / / Fee: Check #: Invoice#

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 - 05 Account Number - 371465							
Owner Information									
Owner Name:		CGFD INVESTMENT GROUP LLC			Use:		RESIDENTIAL		
Mailing Address:		14215 MEADOW LAKE DR GLENELG MD 21737-			Principal Residence:		NO		
					Deed Reference:		/17542/ 00253		
Location & Structure Information									
Premises Address:		5502 HARRIS FARM LN CLARKSVILLE 21029-0000			Legal Description:		P/O PAR 11 5.01152 A 5502 HARRIS FARM LN CLARKSVILLE		
Map:	Grid:	Parcel:	Sub District:	Subdivision:	Section:	Block:	Lot:	Assessment Year:	Plat No:
0028	0020	0208		0000			PO11	2017	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	
1987		2,948 SF		1000 SF		5.0100 AC			
Stories	Basement	Type	Exterior	Full/Half Bath	Garage	Last Major Renovation			
1 1/2	YES	STANDARD UNIT	BRICK	3 full	1 Attached				
Value Information									
		Base Value		Value		Phase-in Assessments			
				As of		As of		As of	
				01/01/2017		07/01/2018		07/01/2019	
Land:		310,000		310,000					
Improvements		259,200		401,900					
Total:		569,200		711,900		664,333		711,900	
Preferential Land:		0						0	
Transfer Information									
Seller: DAWSON TIMOTHY			Date: 04/18/2017			Price: \$0			
Type: NON-ARMS LENGTH OTHER			Deed1: /17542/ 00253			Deed2:			
Seller: PACHOCA PETE M			Date: 11/16/2016			Price: \$569,200			
Type: NON-ARMS LENGTH OTHER			Deed1: /17257/ 00352			Deed2:			
Seller: SIMMONS BEN H			Date: 11/01/1990			Price: \$320,000			
Type: ARMS LENGTH IMPROVED			Deed1: /02251/ 00469			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:							
Exempt Class:		NONE							
Homestead Application Information									

Homestead Application Status: No Application

Homeowners' Tax Credit Application Information

Homeowners' Tax Credit Application Status: No Application

Date:



Want to **PLAN, START, MANAGE,**
or **GROW** your business?

▶ Click **HERE!**

➔ Maryland Business Express

🏠 Home

🔑 Log In / Create Account

CGFD INVESTMENT GROUP LIMITED LIABILITY

COMPANY: W17260829

General Information

Filing History

Annual Report/Personal Property

General Information

Department ID Number:

W17260829

Business Name:

CGFD INVESTMENT GROUP
LIMITED LIABILITY COMPANY

Principal Office:

7246 GUILFORD ROAD
CLARKSVILLE MD 21029

Resident Agent:

TIMOTHY DAWSON
7246 GUILFORD ROAD
CLARKSVILLE MD 21029

Status:

ACTIVE

Good Standing:

THIS BUSINESS IS IN GOOD
STANDING

» Order Certificate of Status

Business Type:

DOMESTIC LLC

Business Code:

20 ENTITIES OTHER THAN CORPORATIONS

Date of Formation/ Registration:

05/17/2016

State of Formation:

MD

Stock Status:

N/A

Close Status:

N/A

[New Search](#)

[Order Documents](#)

[Privacy and Security Policy](#) | [Accessibility Policy](#)

FOR FILING AND BUSINESS RELATED QUESTIONS

Maryland Department of Assessments & Taxation

410-767-1184 | Outside the Baltimore Metro Area: 888-246-5941

Maryland Relay: 800-735-2258

FOR TECHNICAL QUESTIONS AND SUPPORT

NIC Maryland, eGov Services Partner of the Department of Information Technology (DoIT) and Maryland.gov

» [Click for 24/7 Support](#)

SECURED

IN THE MATTER OF : BEFORE THE
CGFD INVESTMENT GROUP, LLC : HOWARD COUNTY
Petitioner : BOARD OF APPEALS
 : HEARING EXAMINER
 : BA Case No. 18-019C&V

.....
DECISION AND ORDER

On November 19, 2018, the undersigned, serving as the Howard County Board of Appeals Hearing Examiner, and in accordance with the Hearing Examiner Rules of Procedure, heard the petition of GGF Investment Group, LLC (Petitioner) to expand an approved 15-bed Group Care Facility special exception to a 16-bed Nursing Home and Residential Care Facility and a related variance to reduce the 30-foot use lot line setback to 0.0 (zero feet) for a driveway, in an RR-DEO (Rural Residential: Density Exchange Option Overlay) zoning district pursuant to §§ 130.0.B.5 and 131.0.N.38 of the Howard County Zoning Regulations (HCZR).

The Petitioner certified to compliance with the notice and posting requirements of the Howard County Code. The Hearing Examiner viewed the subject property as required by the Hearing Examiner Rules of Procedure. Thomas Meachum, Esq., represented the Petitioner. Tim Dawson and Sergio Rodriguez testified in support of the petition. Dan Mattison, Jenny Henderson, Rosemary Downing, Mary Sopor, and Kenneth Cooper testified in opposition to the petition.

Preliminary Matters – The Proper Categorization of the Petition

1. Is the Proposed Use an Expansion of an Approved Use or a New Conditional Use Petition?

During the proceeding, in reference to the Petitioner’s testimony about revisions to the

rear deck, the Hearing Examiner and Petitioner's counsel engaged in colloquy about whether the petition was for an expansion of the Board of Appeals 1992 grant of what at that time was a special exception for a group care facility for 15 residents to 16 residents, or a wholly new petition. The Hearing Examiner explained that based on the limited information in the technical staff report (TSR) and particularly the zoning history section, she considered the petition to be a request to expand the use approved in 1992 from 15 to 16 beds, explaining that petitioners routinely use the standard CU petition form when proposing to expand an approved use, as discussed in BA 16-026C. Petitioner's counsel, however, proffered that DPZ processed the petition as a new nursing home/residential daycare conditional use because the BA 92-022E use had been abandoned, based on petitioner's discussions with DPZ.

For the reasons discussed in Part I of the below Conclusions of Law, the HCZR obliges the Hearing Examiner to evaluate the petition as a request to expand the use granted by the Board of Appeals in 1992. As such, the petition must be reviewed for compliance with § 131.0.J, Enlargement or Alterations, which requires the Hearing Examiner when evaluating the proposed enlargement to make all of the required findings applicable to the entire Conditional Use.

2. Defining the Conditional Use Category

The conditional use petition identifies the conditional use category as "Assisted Living Facility" to "provide home health care for aging adults." DPZ's notice form to the petitioner (for advertising) identifies the proposed conditional use as "to provide home health care."

An "Assisted Living Facility" is a residential care facility that provides housing and supportive services, supervision, personalized assistance, health-related services, or a

combination of these services to at least nine persons who are unable to perform, or who need assistance in performing, the activities of daily living. HCZR § 103.0. There is no "Assisted Living Facility" conditional use category. Rather, an assisted living facility falls within the definitional scope of a "Residential Care Facility": A residential facility that provides housing and supportive services to at least nine persons who are members of a population needing the services provided due to age or emotional, mental, physical, familial or social conditions. This term includes "assisted living facilities" as defined in these Zoning Regulations. Residential care facilities provide group housing in which capacity is measured in terms of the number of beds, rather than individual dwelling units equipped with living, sleeping, and full kitchen facilities. HCZR § 103.0. Accordingly, the conditional use category is the HCZR § 131.0.N.38, Nursing Home and Residential Care Facility use. The petition references this section.

FINDINGS OF FACT

Based upon the preponderance of evidence presented at the hearing, the Hearing Examiner finds the following facts:

1. Property Identification. The subject property is located in the 6th Election District at the terminus of Harris Farm Lane, about 2,745 feet west of Ten Oaks Road. It is identified as Tax Map 0028, Grid 0020, Parcel 208, Lot P011 and is known as 5502 Harris Farm Lane (the Property).

2. Property Description. The 5.01-acre irregularly shaped cul-de-sac Property is improved with a 3,948sf single-family detached dwelling, which according to the TSR is currently the site of an 8-bed assisted living facility. The existing structure is located in the southwesterly central portion of the Property. The facility is accessed from a long macadam driveway off the cul-de-

sac. In front of the facility, the driveway becomes a circular turnaround with 13 parking spaces.

3. Vicinal Properties. The RR-DEO zoned properties are each improved with a single-family detached dwelling.

4. Roads. Harris Farm Lane varies in paving width from 22 to 24 feet within a 50-foot right-of-way (ROW). There is no posted speed limit or traffic volume data for this road.

5. Water and Sewer. The proposed use will be served by private well and septic.

6. The General Plan. PlanHOWARD 2030 designates the Property as "Low Density" on the Designated Pace Types Map. Harris Farm Lane is a local road.

7. Zoning History. Technical Staff reports the Property's zoning history as follows.

BA 92-022E.

Petitioner: Linda Pachoca

Request: Special Exception for a group care facility for 15 residents.

Action: Granted, August 4, 1992

BA 18-006C

Petitioner: Timothy Dawson

Request: Conditional Use for a 16-bed Nursing Home/Residential Care Facility

Action: Withdrawn

8. The Conditional Use Expansion (HCZR § 131.0.N.38). Petitioner is proposing to expand the existing Nursing Home/Residential Care Facility (the Facility) from 15 to 16 beds. (According to the petition, Petitioner is currently operating a 8-bed facility on the Property.) The Facility will operate 24 hours a day, seven days a week.

9. The Requested Variance (HCZR § 105.0.E.5). Because the existing driveway does not comport with the 30-foot conditional use setback, Petitioner is requesting a variance to reduce this 30-foot setback to 0.0 (zero) feet.

10. Reported Agency Comments.

Department of Inspections, Licenses and Permits (DILP)

1. The petitioner is advised that a building permit is required for the proposed "change-in-use" it is recommended that the petitioner and their design consultant arrange a preliminary meeting with the Plan Review Division [] to discuss any major code requirements that may pertain to the proposed use.
2. The Owner shall be advised that the change of use in this facility will require the existing sprinkler system to be upgraded to comply with NFPA-143R requirements.

Health Department

1. The existing sewage disposal system is sized to accommodate 1225 gallons per day wastewater design flow. The existing system must be upgraded or replaced to accommodate the expansion.
2. The existing system is 28 to 30 years old and must be evaluated by the Health Department to determine whether it is still functioning properly prior to Health Department approval of an expansion.
3. Prior to Health Department approval of an expansion, the owners must submit a plan showing how three sewage disposal systems (existing or new plus two future replacements) can fit in the existing sewage disposal area. If they cannot, the disposal area must be increased, which may include addition perc testing.

Fire Department. Facility must be protected with an automatic sprinkler system.

11. Timothy Dawson testified to being the manager/operator of the existing assisted living facility (Howard County Assisted Living) and the owner of CGFD Investment Group, LLC. Currently there are six residents. According to the General Plan, more housing is needed for this population. He is usually on site on a daily basis and has an on-site manager. There are currently two full-time employees who reside at the facility. The employee-resident ratio is 4 to 1. With 16 beds, 4 employees are necessary. The facility operates 24/7. Deliveries include routine monthly pharmacy visits (a car). Sometime special medications are delivered. There are 2-3 visitors a week, usually the during the weekend. The residents don't drive. Sometimes staff walks residents down to the mailbox for exercise. The facility uses normal waste receptacles, which are screened from adjoining residences.

12. Mr. Dawson further testified the dwelling was used previously as an assisted living facility

from 1992 to 2016.

13. According to Mr. Dawson, the prior facility used the same driveway, the location of which has not changed. The variance is needed because a small portion of the existing driveway is right on the cul-de-sac property line.

14. On cross-examination by Jenny Henderson, Mr. Dawson testified he has been operating the facility under his company for two years. Concerning the deck in the back, Mr. Dawson testified it was rebuilt because the concrete deck was not in compliance with state accessibility requirements. It is bigger and higher off the ground than the old one.

15. On cross-examination by Brian Henderson, Mr. Dawson testified to there being 12 bedrooms on two levels.

16. When questioned by the Hearing Examiner, Mr. Dawson explained he rebuilt the deck with secure ADA-compliant railings and ramps. The footprint did not expand.

17. Sergio Rodriguez testified to being the civil engineer who prepared the conditional use plan/variance plan. The variance is needed for the existing driveway.

18. Jenny Henderson testified in opposition to the petition because the Board of Appeals previously granted the 1992 special exception based on a need for the use. In her view, this need no longer exists.

19. Other area residents testified to general concerns about the impact of the use on Harris Farm Road and neighboring residential properties.

CONCLUSIONS OF LAW

I. On the Matter of the Zoning Petition Status of the BA 18-019C&V

Until 2001, the HCZR titled what are now "conditional uses" as "special exceptions." On September 29, 1992, the Board of Appeals (BOA) in BA 92-22E granted petitioner Linda C. Pachoca a special exception to operate a "group care facility" for up to fifteen (15) residents on the Property, subject to the 9 conditions of approval.

1. The Petitioner shall comply with all applicable Federal, State and County laws and regulations.
2. Three (3) additional parking spaces shall be provided adjacent to the existing three (3) parking space pad, arranged in such a way as not to block the turnaround loop of the driveway.
3. The Petitioner shall comply with all requirements of the Bureau of Environmental Health regarding water and sewerage capacity of the site.
4. The number of persons cared for and residing on the site shall not exceed fifteen (15).
5. The Petitioner shall install a sprinkler system as required by the Department of Fire and Rescue Services.
6. The granted special exception shall apply solely to the proposed group care facility with a maximum of four (4) employees serving a maximum of fifteen (15) persons residing on the site within the existing one and a half (1 1/2) story, brick single family detached dwelling on the site, and not to any other structures, buildings, improvements or uses.
7. *The special exception use for a group care facility for up to fifteen (15) persons shall be for a period of two (2) years, and shall be renewed every two (2) years thereafter without a hearing, absent written complaint. However, if at any time written complaint is received from a governmental agency or vicinal property owner alleging noncompliance with the special exception conditions or with the applicable standards and requirements, the Board of Appeals shall schedule a revocation hearing in accordance with the special exception revocation procedures set forth in the Zoning Regulations. The Petitioner shall notify the Department of Planning and Zoning in advance every two (2) years of the need to renew the special exception use.*
8. The Petitioner shall post the street address number on the front of the site.
9. The Petitioner shall widen the driveway to sixteen (16) feet.

(Emphasis added.) On October 27, 1992, the BOA denied protestants' motion for reconsideration, rejecting their argument that the use should have been evaluated as an "assisted living facility."

In accord with approval condition #7, which required Ms. Pachoca to renew the special exception use for a group care facility for up to fifteen (15) persons every two years, the BOA on October 4,

1994, renewed for two years the petition of Linda C. Pachoca for a group care facility special exception. In granting the two-year renewal, the BOA found that the petitioner had notified DPZ, who advised the Board that no complaints were received. The BOA also granted the renewal subject to the 9 conditions imposed in the BOA September 29, 1992 decision and order, including notification to the DPZ of the need to renew.

The Zoning History section of the BA 18-019C&V TSR does not reference the details of this special exception petition approval history. It does not expressly state the BA 99-022E use was abandoned. It does not list the 9 BA 92-22E approval conditions. There is nothing in the TSR to indicate Ms. Pachoca notified or failed to notify DPZ of the need to renew the group care facility special exception after 1994.¹

The 2001 rezoning process comprehensively revised the zoning text provisions governing special exceptions, changed the "Special Exceptions" title to "Conditional Uses" and substantively revised the approval standards for several use categories. Among these comprehensive revisions was a new title for "Homes – Nursing, Children's and Group Care Facilities," -- "Nursing Homes and Residential Care Facilities" -- and new use standards.

The Hearing Examiner infers from the TSR that technical staff concluded the BA 92-022E group care facility had been abandoned because Ms. Pachoca did not renew the use every two years. One more thin clue to support technical staff's conclusion is the petition's past tense

¹ By contrast, the TSR for BA 17-010C (St. Mary's Coptic Church), a petition for a religious facility, detailed the abandonment history of the prior use on the Property and the Zoning History section included all approval conditions for petitions granted by the Hearing Authority.

statement on pg. 3 of the conditional use petition that "Hillside House Assisted Living served as a 15 bed facility. It complied with the conditional use category for more than 20 years." The final clue is that technical staff did not report any renewal of the BA 92-022E use since 1994. For the reasons set forth in the next section, however, the Hearing Examiner is compelled to evaluate the petition as an expansion of the 1992 use, not as a new conditional use.

The Law of Conditional Use Abandonment

HCZR §§ 131.0.K, Conditional Uses, regulates the abandonment of a conditional use granted by the Hearing Authority.

K. Abandonment

If any Conditional Use is discontinued for a continuous period of at least two years, the Conditional Use approval shall become void and a new application to the Hearing Authority shall be required prior to the re-establishment of the use.

In this petition, technical staff concluded the BA 92-022E, now "Nursing Homes and Residential Care Facilities" conditional use was "abandoned." This assessment runs afoul of HCZR § 103.0: - Definitions, a statutory construction provision. "Terms used in these Zoning Regulations shall have the definition provided in any standard dictionary, unless specifically defined below or in any other provision of these Zoning Regulations." This is the standard dictionary definition of "abandon": 1a : to give up to the control or influence of another person or agent; b : to give up with the intent of never again claiming a right or interest in - abandon property."² "Abandoned" means "left without needed protection, care, or support; left by the owner."³ The noun

² <https://www.merriam-webster.com/dictionary/abandon>. Site visited December 28, 2018.

³ <https://www.merriam-webster.com/dictionary/abandoned>. Site visited December 28, 2018.

“abandonment” is defined as the “act of abandoning something or someone.”⁴

Additionally, technical staff’s statutory construction is averse to DPZ’s long-term construction of the regulatory term as applied by technical staff and the Hearing Authority to the “abandonment” standard in one of the most contentious conditional use categories, motor vehicle fueling facilities, i.e., gas stations, set forth in HCZR § 131.0.O.2.I. This section contains specific standards to regulate properties on which the Hearing Authority grants a motor vehicle fueling facility conditional use.

I. Abandonment

(1) The premises (including landscaping) of any Motor Vehicle Fueling Facility which is not in continuous operation or is abandoned shall be maintained in the same manner as is required under these regulations for operating Motor Vehicle Fueling Facilities.

(2) A Conditional Use for a Motor Vehicle Fueling Facility shall become void upon notice of abandonment by the owner. If notice of abandonment is not received, but it is determined by the Department of Planning and Zoning that a Motor Vehicle Fueling Facility has not been in continuous operation for a period of twelve months, a revocation hearing shall be initiated by the Department of Planning and Zoning in accordance with the procedures set forth in Section 131.0. For purposes of this subsection, “continuous operation” shall mean operation as a Motor Vehicle Fueling Facility at least eight hours per day, five days per week.

(3) If a Motor Vehicle Fueling Facility is abandoned and the Conditional Use becomes void as provided above, all multiple-product dispensers, canopies and other improvements including buildings shall be removed from the site within six months of the date the Conditional Use becomes void.

By longstanding statutory construction, when the person or property owner responsible for the operation of a motor vehicle fueling facility abandons the use, they act to cease operation of the use. In like manner, when a property owner or operator of an approved Nursing Home and Residential Care Facility abandons the use, they act to cease operation. Here however, the property owner or operator did not abandon the use. Rather, they failed to comply, apparently,

⁴ <https://www.merriam-webster.com/dictionary/abandonment>. Site visited December 28, 2018.

with condition #7, which required them to renew the use every two years without a hearing, absent written complaint. The evidence of record shows that the use continued operation without interruption since 1992.

It appears, then, that when the BOA through condition #7 effectively delegated a showing of noncompliance "with the special exception conditions or with the applicable standards and requirements" through a written complaint by "a governmental agency or vicinal property owner" DPZ had no administrative mechanism in place to alert it to petitioner's need to renew the use. Consequently, while the property owner was therefore in violation of the approved conditional use, absent written complaint DPZ was not formally on notice of the violation. Even more, the Hearing Examiner takes notice that while the property owners on a yearly basis renewed the Department of Inspections, Licenses, and Permits residential rental license necessary for the use, there is no system in place to coordinate rental permit renewals with any DPZ review.

II. General Criteria for Conditional Uses (§ 131.0.B)

Based upon the foregoing Findings of Fact, the Hearing Examiner concludes as follows:

1. The proposed Conditional Use plan will be in harmony with the land uses and policies in the Howard County General Plan which can be related to the proposed use.

The Howard County General Plan designates the area in which the Property is located as "Low Density." The conditional use/variance plan is harmonious with General Plan Policy 9.4 to "[e]xpand housing options to accommodate the County's senior population who prefer to age in place and people with special needs."

2. The nature and intensity of the use, the size of the site in relation to the use, and the location of the site with respect to streets giving access to the site are such that the overall intensity and scale of the use(s) are appropriate for the site.

HCZR § 131.0.B.2 is an on-site evaluation of the proposed Conditional Use. The 5.01-acre Property is significantly larger than the one-acre minimum lot size. The increase in intensity from 15 to 16 beds is a modest increase in intensity. No increase in the area of the building envelope is proposed. The requested variance is to accommodate a minor encroachment of the existing driveway. Harris Lane, a local road, will easily accommodate any de minimus increase in vehicle trips. The nature and intensity of the use, the size of the Property in relation to the use, and the location of the site, with respect to streets that provide access, are such that the overall intensity and scale of the use are therefore appropriate.

3. The proposed use at the proposed location will not have adverse effects on vicinal properties above and beyond those ordinarily associated with such uses. In evaluating the proposed use under this standard, the Hearing Authority shall consider whether or not:

Unlike §§ 131.0.B.1 and 2, which concern the proposed use's harmony or compatibility with the General Plan and the on-site characteristics of the proposed use, compatibility with the neighborhood is measured under § 131.0.B.3's six "adverse effect" criteria: (a) physical conditions; (b) structures and landscaping; (c) parking areas and loading; (4) access; (5) impact on environmentally sensitive area, and; (6) impact on the character and significance of historic sites. These six adverse impact tests gauge the off-site effects of the proposed conditional use.

Inherent in the assessment of a proposed conditional use under these criteria is the recognition that virtually every human activity has the potential for adverse impact. The assessment therefore accepts some level of such impact in light of the beneficial purposes the

zoning body has determined to be inherent in the use. Thus, the question in the matter before the Hearing Examiner is not whether the proposed use would have adverse effects in an RC district. The proper question is whether there are facts and circumstances showing the particular uses proposed at the particular location would have any adverse effects above and beyond those inherently associated with such a special exception [conditional] use irrespective of its location within the zones. *People's Counsel for Baltimore County v. Loyola College in Maryland*, 406 Md. 54, 956 A.2d 166 (2008); *Schultz v. Pritts*, 291 Md. 1, 432 A.2d 1319 (1981); *Mossburg v. Montgomery County*, 107 Md. App. 1, 666 A.2d 1253 (1995).

For the reasons stated below, and as conditioned, the Petitioner has met its burden of presenting sufficient evidence under HCZR § 131.0.B.3 to establish the proposed use will not have adverse effects on vicinal properties beyond those ordinarily associated with a Nursing Home and Residential Care Facility conditional use development in the RC zoning district.

a. The impact of adverse effects such as, but not limited to, noise, dust, fumes, odors, intensity of lighting, vibrations, hazards or other physical conditions will be greater at the proposed site than it would generally be elsewhere in the same zoning district or other similar zoning districts.

There is no evidence of record regarding atypical adverse effects on vicinal properties from dust, fumes, and odors, noise, intensity of lighting, or hazards.

b. The location, nature and height of structures, walls or fences, and the nature and extent of the existing and/or proposed landscaping on the site are such that the use will not hinder or discourage the development and/or use of adjacent land and structures more at the subject site than it would generally elsewhere in the same zoning district or other similar zoning districts.

No walls or fences are proposed. The additional bed will be located in the existing residential structure. The facility will be centrally located and screened from adjacent properties

by existing and proposed vegetation/landscaping. There is no evidence of the one-bed increase in intensity hindering or discouraging the development and/or use of adjacent land and structures more at the subject site than it would generally elsewhere in the same zoning district or other similar zoning districts.

c. The number of parking spaces will be appropriate to serve the particular use. Parking areas, loading areas, driveways and refuse areas will be appropriately located and buffered or screened from public roads and residential uses to minimize adverse impacts on adjacent properties.

HCZR § 133.0 requires one parking space for every two beds, so 8 parking spaces are required and the 15 existing spaces will be centrally located and buffered/screened from adjacent public roads and residential uses by landscaping and distance. No loading area is proposed. The facility will continue to use the existing trash receptacle to the southwest of the expanded structure will be buffered by distance and existing/proposed landscaping/vegetation.

d. The ingress and egress drives will provide safe access with adequate sight distance, based on actual conditions, and with adequate acceleration and deceleration lanes where appropriate. For proposed Conditional Use sites which have driveway access that is shared with other residential properties, the proposed Conditional Use will not adversely impact the convenience or safety of shared use of the driveway.

The proposed conditional use will be accessed from Harris Farm Road, which has a 400-foot sight distance to the east. DPZ reports the sight distance appears to provide reasonable access. There is no shared driveway access.

e. The proposed use will not have a greater potential for adversely impacting environmentally sensitive areas in the vicinity than elsewhere.

There are no environmentally sensitive areas in the vicinity, according to technical staff.

f. The proposed use will not have a greater potential for diminishing the character and significance of historic sites in the vicinity than elsewhere.

Hedgerow (HO-171) lies about 2,000 feet southwest of the Property. There is no evidence of the use having a greater potential for diminishing the character and significance of a vicinal historic site in the vicinity than elsewhere.

III. Requirements for Enlargement of a Use Permitted by Conditional Use (HCZR § 131.0.J) and Specific Criteria for Nursing Homes and Residential Care Facilities (§ 131.0.N.38)

Pursuant to HCZR § 131.0.J, Enlargement or Alterations, the Hearing Authority may permit the enlargement or alteration of any existing use which is permitted by Conditional Use in the specified districts under the provisions of these Regulations, provided that in evaluating the enlargement or alteration, the Hearing Authority shall make all of the required findings applicable to the entire Conditional Use, which for this petition are the five HCZR § 131.0.N.38 standards for nursing homes and residential care facilities.

a. The facility shall have 16 or fewer beds.

Sixteen beds are proposed, in compliance with § 131.0.N.38.a.

b. The minimum lot size for a new facility is one acre. An existing facility does not have to comply with this criteria.

The Property is 5.2 acres, in compliance with § 131.0.N.38.b.

c. The design of new structures or additions to existing structures will be compatible in scale and character with residential development in the vicinity, as demonstrated by architectural elevations or renderings that shall be submitted with the petition.

No new structures or additions are proposed.

d. Buildings, parking areas and outdoor activity areas will be at least 50 feet from adjoining residentially-zoned properties other than public road rights-of-way.

The conditional use/variance plan shows all buildings, parking areas, and outdoor activity areas sited at least 50 feet from adjoining residentially-zoned properties other than public road rights-of-way, in compliance with § 131.0.N.38.d.

e. At least 20% of the area within the building envelope shall not be used for buildings, parking areas or driveways. The building envelope is formed by the required structure and use setbacks of the Zoning Regulations for the zoning district and the Subdivision and Land Development Regulations.

Based on the CUP, the building envelope area is 131,013sf and 12.1% is used for buildings, parking areas, or driveways, in compliance with § 131.0.N.38.e.

IV. Compliance with the Specific Standards for Variances

The standards for variances are contained in HCZR § 130.0.B.2.a. Pursuant to this section, the Hearing Examiner may grant a variance only if the Petitioner demonstrates compliance with all four variance criteria. Based upon the foregoing Findings of Fact, and for the reasons stated below, the Hearing Examiner finds the requested variance complies with §§ 130.0.B.2.a(1) through (4), and therefore may be granted.

(1) That there are unique physical conditions, including irregularity, narrowness or shallowness of the lot or shape, exceptional topography, or other existing features peculiar to the particular lot; and that as a result of such unique physical condition, practical difficulties or unnecessary hardships arise in complying strictly with the bulk provisions of these regulations.

The first criterion for a variance is that there must be some unique physical condition of the property, e.g., irregularity of shape, narrowness, shallowness, or peculiar topography that results in a practical difficulty in complying with the particular bulk zoning regulation. This test involves a two-step process. First, there must be a finding that the property is unusual or different

from the nature of the surrounding properties. Secondly, this unique condition must disproportionately impact the property such that a practical difficulty arises in complying with the bulk regulations. *Cromwell v. Ward*, 102 Md. App. 691, 651 A.2d 424 (1995). A "practical difficulty" is shown when the strict letter of the zoning regulation would "unreasonably prevent the owner from using the property for a permitted purpose or would render conformity with such restrictions unnecessarily burdensome." *Anderson v. Board of Appeals, Town of Chesapeake Beach*, 22 Md. App. 28, 322 A.2d 220 (1974).

With respect to the first prong of the variance test, the Maryland courts have defined "uniqueness" thus.

In the zoning context, the 'unique' aspect of a variance requirement does not refer to the extent of improvements upon the property, or upon neighboring property. 'Uniqueness' of a property for zoning purposes requires that the subject property have an inherent characteristic not shared by other properties in the area, i.e., its shape, topography, subsurface condition, environmental factors, historical significance, access or non-access to navigable waters, practical restrictions imposed by abutting properties (such as obstructions) or other similar restrictions. In respect to structures, it would relate to characteristics as unusual architectural aspects and bearing or party walls. *North v. St. Mary's County*, 99 Md. App. 502, 514, 638 A.2d 1175 (1994) (italics added).

In this petition, the Property is triangular in shape and the property line along the cul de sac is extremely narrow. This is a unique physical condition of the Property causing practical difficulty in complying strictly with the setback regulation, in accordance with HCZR § 130.B.2.a(1).

(2) That the variance, if granted, will not alter the essential character of the neighborhood or district in which the lot is located; will not substantially impair the appropriate use or development of adjacent property; and will not be detrimental to the public welfare.

The requested variance to reduce the use setback from 30 to 0.0 feet is for continued use of the existing driveway. Technical staff reports the State Department of Assessments and

Taxation indicates the residential structure was built in 1987 and that the driveway has existed since that time. There is no evidence that the requested variance for the long-existing driveway would alter the essential character of the neighborhood or district or impair the use of development of adjacent property. The petition complies with § 130.0.B.2.a(2).

(3) That such practical difficulties or hardships have not been created by the owner provided, however, that where all other required findings are made, the purchase of a lot subject to the restrictions sought to be varied shall not itself constitute a self-created hardship.

The Petitioner did not create the practical difficulties, in accordance with § 130.0.B.2.a(3).

(4) That within the intent and purpose of these regulations, the variance, if granted, is the minimum necessary to afford relief.

The proposed variance is for a reasonable use of the Property, in accordance with § 130.0.B.2.a(4).

V. The 9 Conditions of Approval Imposed in BA 99-022E

The remaining outstanding matter in this decision and order is whether the evidence of record supports approval of the one-bed expansion subject to the original 9 approval conditions imposed in 1992, and on renewal in 1994. The Hearing Examiner finds nothing in the record to do so. Therefore, in addition to the standard conditions of approval, condition # 2 specifies that use is not subject to the 9 approval conditions imposed in the 1992 original approval and the 1994 renewal.

ORDER

Based upon the foregoing, it is this 9th day of January 2019, by the Howard County Board of Appeals Hearing Examiner, **ORDERED**:

That the petitions of GGF Investment Group, LLC to expand an approved 15-bed Nursing Home and Residential Care Facility to 16 beds and a related variance to reduce the 30-foot use lot line setback to 0.0 (zero feet) for an existing driveway, in an RR-DEO (Rural Residential: Density Exchange Option Overlay) zoning district are hereby **GRANTED**.

Provided, however, that:

1. The conditional use and variance shall be conducted in conformance with and shall apply only to the proposed use described in the petitions and depicted on the conditional use/variance plan and not to any new structures or uses on the Site or any additions thereto and as subject to all findings of fact.
2. The conditional use expansion is not subject to the 9 approval conditions imposed in the 1992 original approval and the 1994 renewal (BA 99-022E).
3. Petitioner shall obtain all required permits.
4. Petitioner shall comply with all federal, state, and local laws and regulations.

**HOWARD COUNTY BOARD OF APPEALS
HEARING EXAMINER**



Michele L. LeFaivre

Notice: A person aggrieved by this decision may appeal it to the Howard County Board of Appeals within 30 days of the issuance of the decision. An appeal must be submitted to the Department of Planning and Zoning on a form provided by the Department. At the time the appeal petition is filed, the person filing the appeal must pay the appeal fees in accordance with the current schedule of fees. The appeal will be heard *de novo* by the Board. The person filing the appeal will bear the expense of providing notice and advertising the hearing. In accordance with C.B. 51-2016, § 1 (HCC Sec. 22.902 - Computation of time), if the deadline to appeal is a Saturday, Sunday, or holiday, or if the County offices are not open, the deadline shall be extended to the end of the next open County office business day.

1500 gal 750 2-380 378 5-4.5

1500 gal 400 2-400

✓ 3000 gal NISB soft absorption

HOCO code

2325

HOCO code

306

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

05-37465

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

Pg. 2 of 2
D.P.C.O.
P 47300 C.B.D.
A 26161 REPAIR

DISTRICT 5th

DATE 7/15/91

DATE SYSTEM APPROVED 7/16/91

INSPECTOR C.B.D.

INDEXED

Dave Hopkins IS PERMITTED TO INSTALL ALTER X

ADDRESS 17550 Old Frederick Road, Mt. Airy, Maryland 21771 PHONE 831-7257

SUBDIVISION Allen Weintraub Property LOT 11 ROAD 5502 Harris Farm Lane 531-2519

PROPERTY OWNER Linda C. Pachoca

ADDRESS 5502 Harris Farm Lane
Clarksville, Maryland 21029

SEPTIC TANK CAPACITY 1500 GALLONS (1) and

NUMBER OF BEDROOMS

400 SQUARE FEET REPAIR ROOM TOTAL

LINEAR FEET OF TRENCH REQUIRED 80

BD RMS
TOTAL BUILDOUT

REPAIR - PURPOSE - TO ESTABLISH SEPTIC CAPACITY SUFFICIENT TO AUTHORIZE USE AS SHELTERED GROUP HOME FOR 8...
- HOUSE HAS 7 BEDROOMS; 1986 BUILDING PERMIT AUTHORIZED 4.
- 5,000 ADDITIONAL SQUARE FEET SEPTIC AREA REQUIRED PLUS UPGRADE OF EXISTING SEPTIC SYSTEM.

TRENCH - 80 FT LONG, 9 FT DEEP, 2 FT WIDE.
5 FT OF STONE FILL 4 FT BELOW ORIGINAL GRADE
PLACE THE EXTRA TRENCH 10-20 FT DOWN HILL FROM THE EXISTING LOW TRENCH. SEE PLANS

PLANS APPROVED BY C. Williams DATE 7/12/91

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: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS, 90° ELBOWS NOT ACCEPTABLE.

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

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 35/40 PVC OR ABS

PERMIT VOID AFTER TWO 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 PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

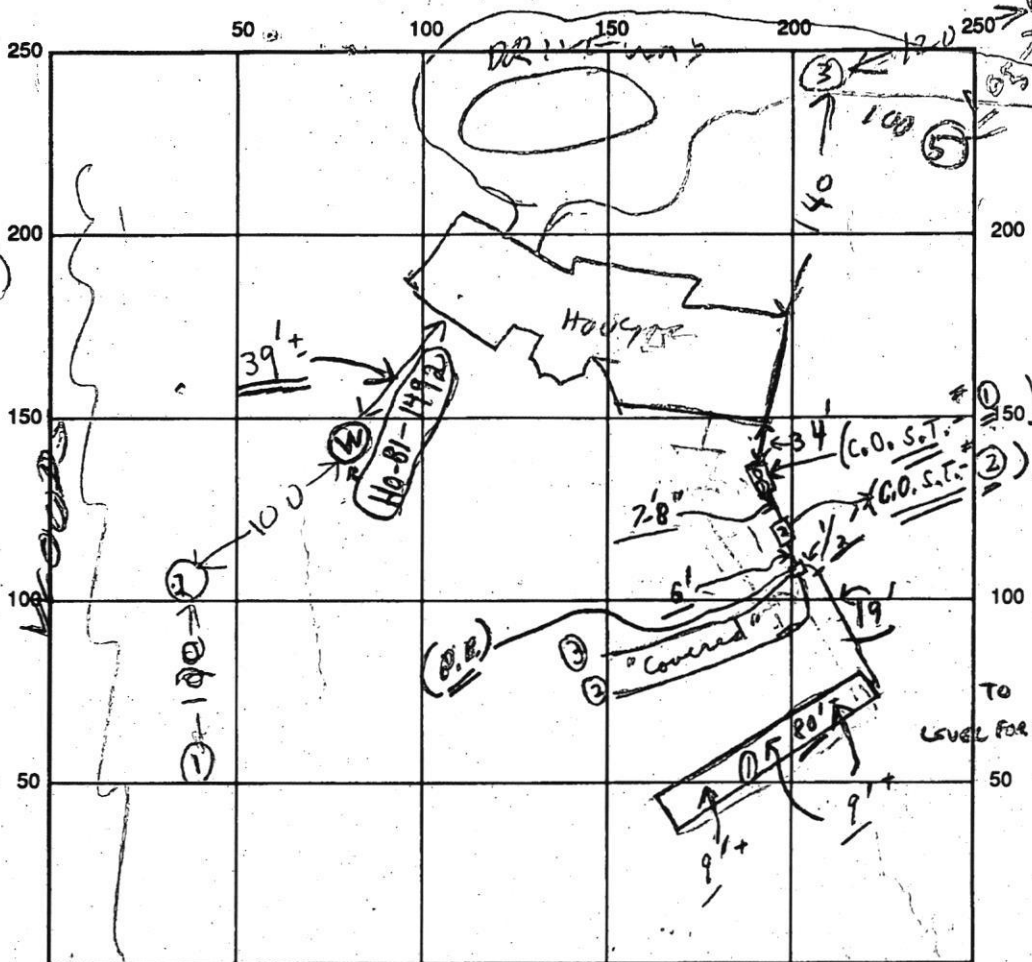
*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

HD-260(6-90)

CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

P 47300
Pg. 2 of 2

- ① BROWN CLAY
- ② BROWN SANDY GATTY MICA LOAM
- ③ BROWN CLAY
- ④ BROWN SAND MICA LOAM
- ⑤ BROWN CLAY
- BROWN SAND MICA



TANK & 2 TRENCHES EXISTING (P39191 4/23/87)
 ADDITIONAL TANK & TRENCH ADDED THIS DATE TO INCREASE TO AUTHORIZED LEVEL FOR CUNNOUT 7BR. HOME.

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1 New 1500 gallon O.S.T. CLEANOUTS ① S.T. OK | ② S.T. OK

DISTRIBUTION BOX LEVEL (Using existing one)

DRAIN FIELD/TITLE DEPTH 9⁺ FT. TRENCH WIDTH 2 FT. INLET DEPTH 4 FT.

EFFECTIVE GRAVEL DEPTH 5⁺ average FT. TOTAL LENGTH 80⁺ FT.

NUMBER OF TRENCHES 1 (new) ONE SIDEWALL/AREA 400⁺ SQ. FT.

DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA 400⁺ SQ. FT. + (New septic tank) + (2 existing trenches)

REMARKS	7	15	11	15	4	148	148	149	150	1
II	II	IV	8	148	151	151	155	4		
II	II	IV	13	OK						
II	II	25	4	156	157	157	159	2		
II	II	2V	13	OK						
II	II	35	5	241	244	244	247	3		
II	II	3V	12	OK						
II	II	45	12	OK						
DATE SYSTEM APPROVED	4	304	INSPECTOR	<u>Charles Bryan Street</u>						
	5V	11	OK	7/16/91						

Test by Bob Judge represented Dave Hopkins Pg. 2 of 2

7/13/91
P.M.
Late P.M.

PERMIT

Fide

Pg 1 of 2
O.P.C.O.
P 47300 C.B.D.

SEWAGE DISPOSAL SYSTEM

26161
A REPAIR

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT 5th

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH
461-9933

DATE 7/05/91

DATE SYSTEM APPROVED 7/16/91

INSPECTOR C.B.D.

Dave Hopkins

IS PERMITTED TO INSTALL ALTER

ADDRESS 17550 Old Frederick Road, Mt. Airy, Maryland 21771 PHONE 831-7257

SUBDIVISION Allen Weintraub Property LOT 11 ROAD 5502 Harris Farm Lane

PROPERTY OWNER Linda C. Pachoca

ADDRESS 5502 Harris Farm Lane

ADDRESS Clarksville, Maryland 21029

SEPTIC TANK CAPACITY _____ GALLONS

NUMBER OF BEDROOMS _____

400 SQUARE FEET PER BEDROOM TOTAL

LINEAR FEET OF TRENCH REQUIRED 80

See Pg 2 of 2

(R.H. + C.B.D.)

PLANS APPROVED BY Raymond Hodges

DATE 7/15/91

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: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS, 90° ELBOWS NOT ACCEPTABLE.

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

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 35/40 PVC OR ABS

PERMIT VOID AFTER TWO 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 PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

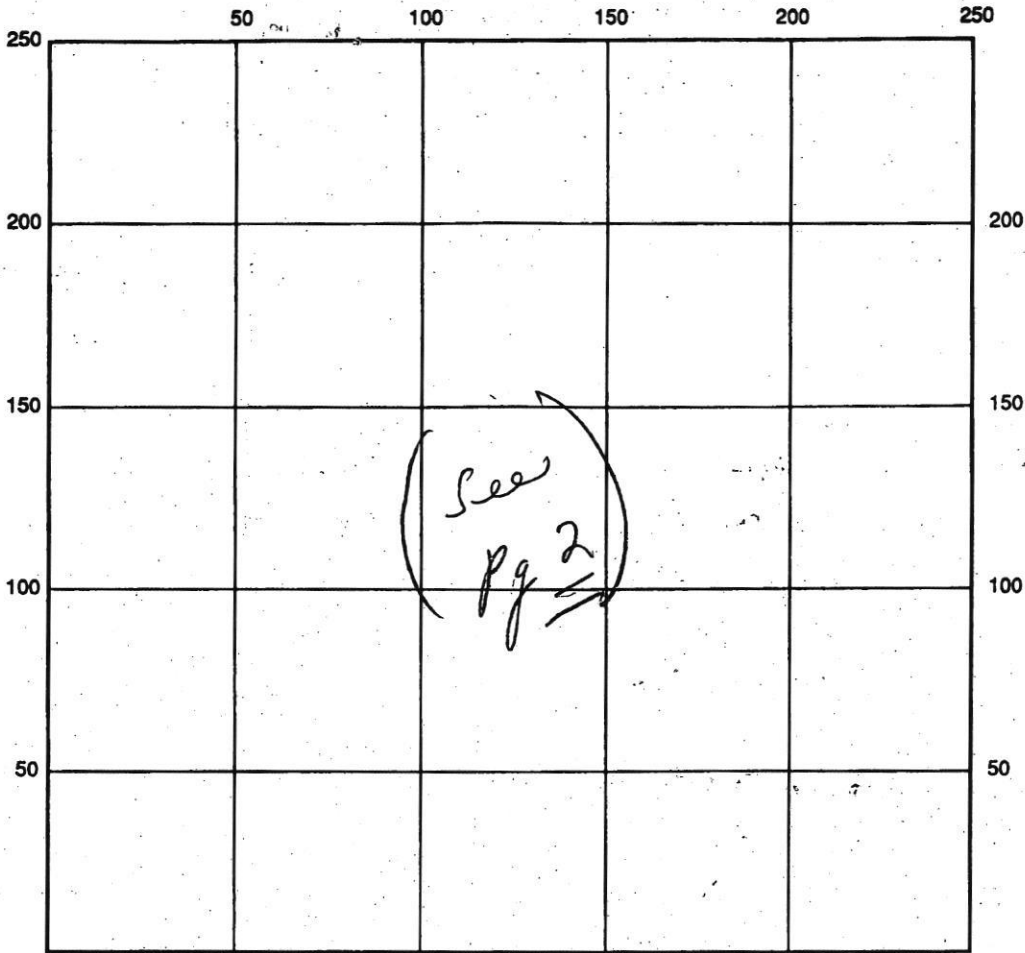
***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

HD-260(6-90)

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

Pg. 1 of 2

P 47300



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1500 ± job 1 New S.T. ① S.T. OK ② S.T. OK CLEANOUTS

DISTRIBUTION BOX LEVEL (Using existing one)

DRAIN FIELD/TITLE DEPTH 9⁺ average FT. TRENCH WIDTH 2 FT. INLET DEPTH 4 FT.

EFFECTIVE GRAVEL DEPTH 5⁺ FT. TOTAL LENGTH 80⁺ FT.

NUMBER OF TRENCHES 1 (new) ONE SIDEWALL/BOTTOM AREA 400⁺ SQ. FT.

DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA 400⁺ SQ. FT. + (New septic tank) + (2-existing trenches)

REMARKS: 7/16/91 Partial - ok to cover from house to trench; ok for stone in trench; 7/16/91 Late P.M. - trench complete. Final.
C.B.O.

DATE SYSTEM APPROVED 7/16/91 INSPECTOR Charles Bryan Street

5/17/87
2:30 - 3:00 PM

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED

P 39191

A 26161

DISTRICT 5th

DATE 4/23/87

DATE SYSTEM APPROVED 5/8/87

INSPECTOR [Signature]

Dave Hopkins IS PERMITTED TO INSTALL ALTER

ADDRESS 17550 Old Frederick Road, Mt. Airy, Maryland 21771 PHONE 549-2889

SUBDIVISION Fed Oaks Farm ROAD 5260 Top Oaks Road LOT 11

PROPERTY OWNER Allan Weintraub Ben Simmons

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 - 160 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 the distribution box 180 feet from the rear (700') lot line and 200 feet from the left (616.93') lot line, as seen when facing the lot from the end of the 100 ft. wide common right-of-way. Run trench on contour toward the rear lot line.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

PLANS APPROVED BY S. Abel DATE 5/20/86

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: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS.

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E., TANK, DISTRIBUTION BOX, TRENCHES) TO BE 100 FEET FROM WELL. (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCHES ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCHES).

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 TWO 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.

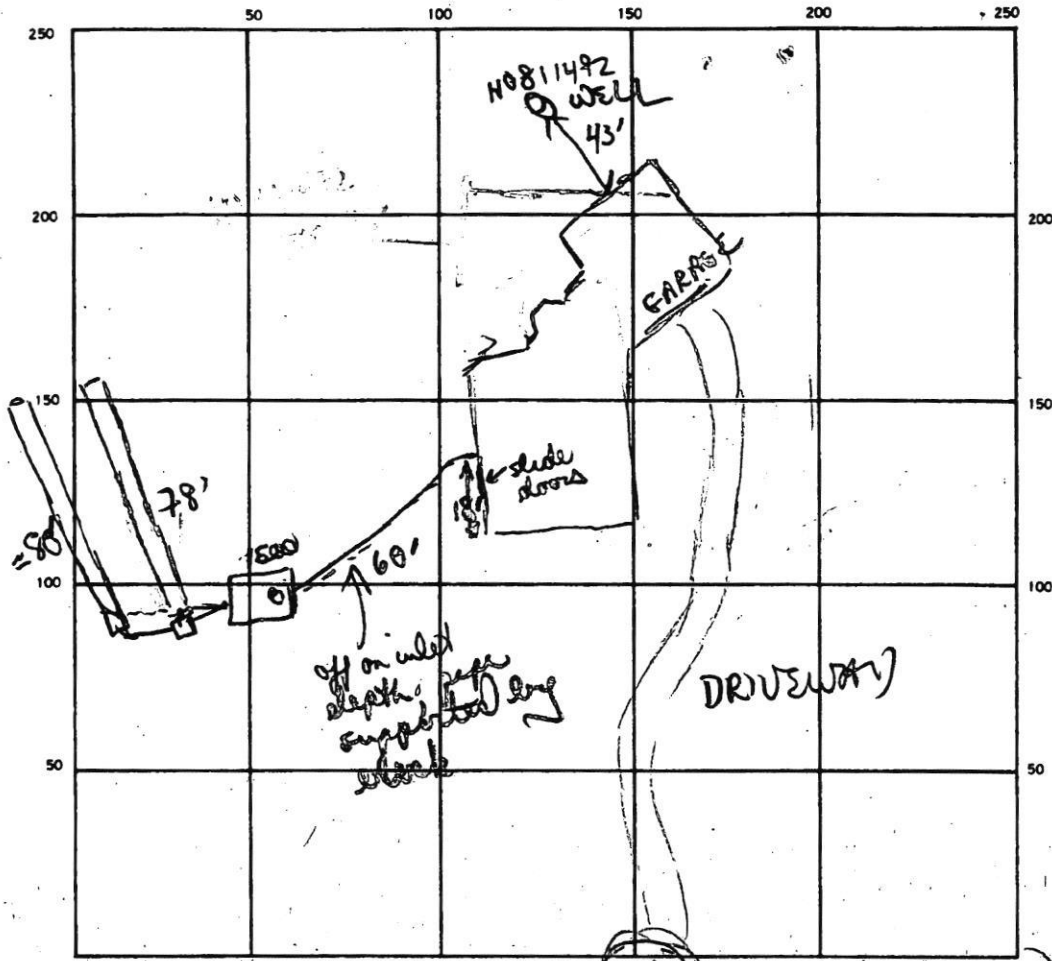
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES.

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

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1186

26161



INDICATE NORTH. — NAME ADJOINING ROADWAYS AS BASE LINE.

END OF COMMON ROAD WAY

SEPTIC TANK. LEVEL 1500 gal CLEANOUTS 15-T.

DISTRIBUTION BOX. LEVEL _____

DRAIN FIELD/TILE FIELD. DEPTH 9 9 FT. TRENCH WIDTH 2 FT. INLET DEPTH 4 4-4 1/2

EFFECTIVE GRAVEL DEPTH 5 FT. TOTAL LENGTH 78 80 FT.

NUMBER OF TRENCHES 2 ONE SIDEWALL BOTTOM AREA 390 + 360 SQ. FT.

DRYWELL INSIDE DIAMETER _____ FT. EFFECTIVE DEPTH BELOW INLET _____ FT.

ABSORBENT AREA = 750 SQ. FT.

120
4
640
88
4.5
425
320

REMARKS 5/7/87 OK to finish digging trench #1 + add stone pipe paper. OK to start trench #2. Pipe from house to trench needs to be 'blocked' + supported.

5/8/87 OK to cover trench #1, OK to finish digging trench #2 + add stone pipe paper. 5/8/87 OK to cover trench #2. Piping from house to tank supported OK OK to cover all work

DATE SYSTEM APPROVED 5/8/87 INSPECTOR D. Nijer