

PERMIT NUMBER: B 23002614

DATE ACCEPTED:

RESIDENTIAL BUILDING PERMIT APPLICATION

HOWARD COUNTY DEPARTMENT OF INSPECTIONS, LICENSES, AND PERMITS

3430 COURT HOUSE DRIVE, ELLICOTT CITY, MD 21043 - PHONE: (410) 313-2455 OPTION #4
www.howardcountymd.gov

BUILDING SITE ADDRESS REQUIRED

Street Address: 16836 Hardy Road			Unit:
City: Mt. Airy	State: MD	Zip Code: 21077	
Subdivision/Village/Complex Name:		SDP/WP/BA #:	
Lot: 7	Tax Map: 0007	Parcel: 0337	Grading Permit #:

DESCRIPTION OF WORK REQUIRED

Existing Use: Single family	Proposed Use: single family	Estimated Cost: \$ 20,000
Trade Work to Be Completed (Separate Permits Required): <input type="checkbox"/> Mechanical (HVACR) <input checked="" type="checkbox"/> Electrical <input checked="" type="checkbox"/> Plumbing <input type="checkbox"/> None		
Finish approx. 1200Sf of basement. One rec room, one Office, one Bedroom, remodel existing bath new fixtures		
<i>unfinished utility</i>		

PROPERTY OWNER INFORMATION REQUIRED

Owner(s) Name(s) (As it appears on tax records): Lynn Covey Jr	Primary Residence: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Owner's Street Address: 16836 Hardy road	
City: Mt. Airy	State: Maryland Zip Code: 21771
Phone: 410-984-2824	Email: coveyconsulting@gmail.com

APPLICANT NAME REQUIRED - INDIVIDUAL WHO SIGNS THIS APPLICATION

Business Name: Covey Construction & Consulting LLC	Contact Name: Lynn Covey
Street Address: 16836 Hardy road	
City: Mt. Airy	State: Maryland Zip Code: 21771
Phone: 410-984-2824	Email: coveyconsulting@gmail.com

CONTRACTOR INFORMATION REQUIRED

Business Name: Covey Construction & Consulting LLC	<i>Homeowner to act as Contractor</i>		
Licensee's Name: Lynn Covey	License #: MHC-129119		
Street Address: 16836 Hardy road			
City: Mt. Airy	State: Maryland	Zip Code: 21771	
Phone: 410-984-2824	Email: coveyconsulting@gmail.com		

ARCHITECT/ENGINEER INFORMATION INDIVIDUAL WHO SIGNED PLANS, IF APPLICABLE

Business Name: Ronald Johnston & Associates	Name: Ron Johnston
Street Address: 11407 Barley Field Way	
City: Marriottsville	State: Maryland Zip Code: 21104
Phone: 410-442-3667	Email: ron@rjarchitect.com

BUILDING CHARACTERISTICS REQUIRED

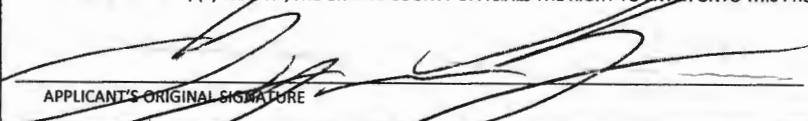
Primary Structure: <input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> SF Duplex <input type="checkbox"/> Mobile Home <input type="checkbox"/> Multi-Family Dwelling (MF*)	Condo: <input type="checkbox"/> Yes <input type="checkbox"/> No
Utilities: <input checked="" type="checkbox"/> Electric <input type="checkbox"/> Gas Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private (Well)	Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private (Septic)
Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane <input checked="" type="checkbox"/> Other:	Roadside Tree Project: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes: #
Sprinkler System: <input type="checkbox"/> NFPA 13 <input type="checkbox"/> NFPA 13R <input type="checkbox"/> NFPA 13D <input checked="" type="checkbox"/> None	Fire Alarm System: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Voice Evac

ADDITIONAL RESIDENTIAL INFORMATION (PLEASE SELECT/COMPLETE ALL THAT APPLY)

Model Name & Options:					
# of Bedrooms (SF): 3	# of efficiency units (MF*):	# of 1 BR (MF*):	# of 2 BR (MF*):	# of 3 BR (MF*):	
# Rooms: 6	# Full Baths: 3	# Half Baths: 0	# Fireplaces: 3		0
Garage/Carport Info: <input checked="" type="checkbox"/> Attached Garage <input type="checkbox"/> Detached Garage <input type="checkbox"/> Integral Garage <input type="checkbox"/> Carport <input type="checkbox"/> None					
Basement/Foundation Info: <input type="checkbox"/> Slab on Grade <input type="checkbox"/> Post & Pier <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/> Finished Basement: <input checked="" type="checkbox"/> Full or <input type="checkbox"/> Partial					
1 st Fl Width: 65'	1 st Fl Depth: 35'	2 nd Fl Width:	2 nd Fl Depth:	Bsmt Width: 65'	Bsmt Depth: 35'
Energy Method: <input type="checkbox"/> Prescriptive <input type="checkbox"/> Performance <input type="checkbox"/> UA Alternative <input type="checkbox"/> ERI			Gross Area: 4000 / 1200 sq ft	Occupiable Area: 3500 sq ft	

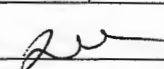
AGREEMENT/ DISCALIMER REQUIRED

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.

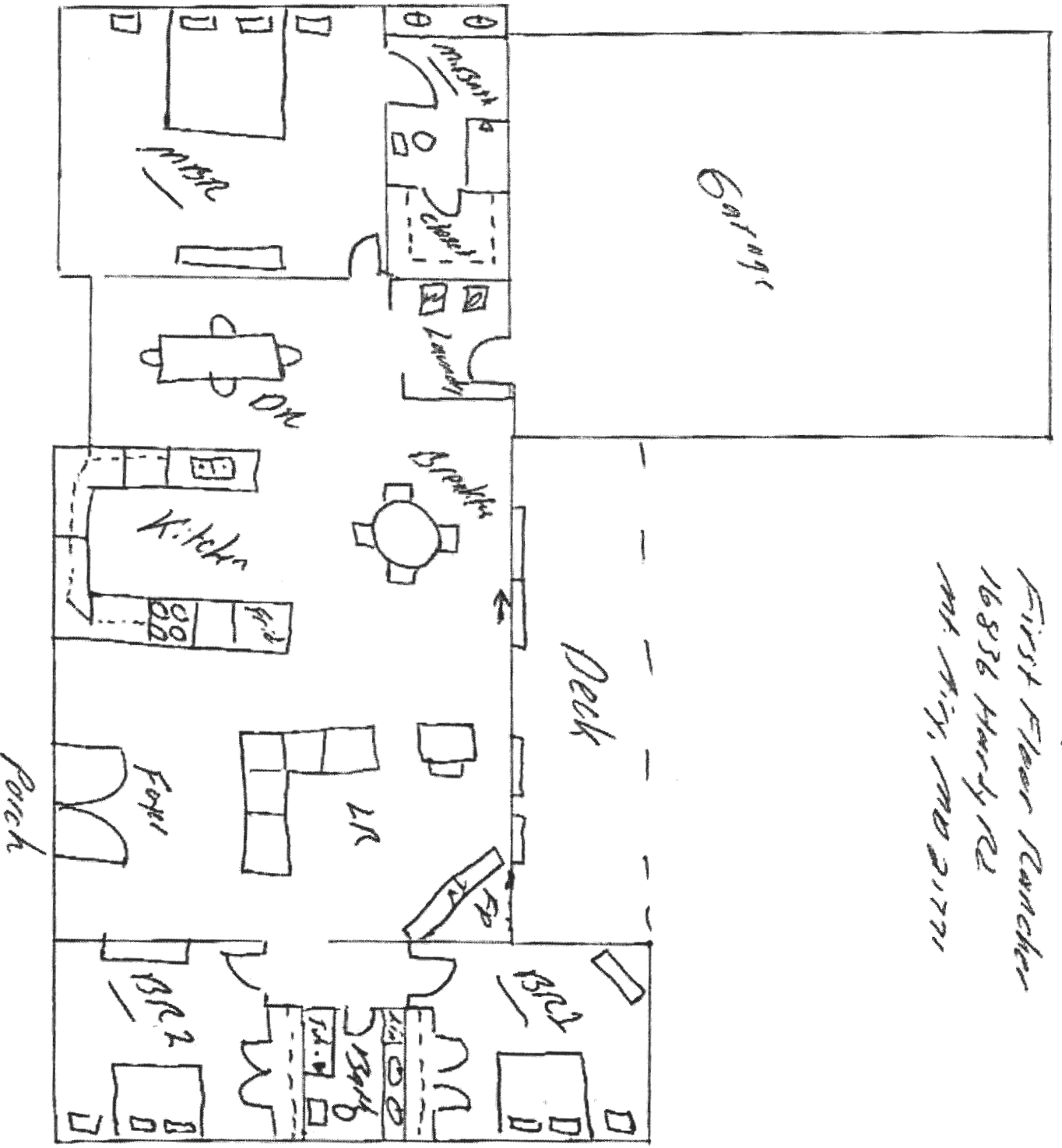
APPLICANT'S ORIGINAL SIGNATURE:  DATE SIGNED: 7/11/2023

FOR OFFICE USE ONLY

CHECKS PAYABLE TO: DIRECTOR OF FINANCE OF HOWARD COUNTY

AGENCIES REQUIRED/APPROVALS:					
<input type="checkbox"/> PR	<input type="checkbox"/> DPZ	<input type="checkbox"/> BED	<input checked="" type="checkbox"/> Health RJC	<input type="checkbox"/> SHA	<input type="checkbox"/> CID
SUBMITTAL FEES: 13500		PAYMENT:		ACCEPTED BY: 	

Scale: 1/4" = 1'
First Floor Rancher
16836 Hardy Rd
Mt. Airy, NC 27771



Real Property Data Search ()
Search Result for HOWARD COUNTY

[View Map](#)

[View GroundRent Redemption](#)

[View GroundRent Registration](#)

Special Tax Recapture: None

Account Identifier: District - 04 Account Number - 358708

Owner Information

Owner Name: COVEY LYNN JR
COVEY DANA W
Use: RESIDENTIAL
Principal Residence: YES
Mailing Address: 16836 HARDY ROAD
MOUNT AIRY MD 21771-
Deed Reference: /14200/ 00190

Location & Structure Information

Premises Address: 16836 NW HARDY RD
MT AIRY 21771-0000
Legal Description: LOT 7 41,720 SQ
16836 HARDY RD R/W
BRIDLEWOOD SEC 1

Map: Grid: Parcel: Neighborhood: Subdivision: Section: Block: Lot: Assessment Year: Plat No: 12287
0007 0003 0337 4010102.14 1002 7 2023 Plat Ref:

Town: None

Primary Structure Built Above Grade Living Area Finished Basement Area Property Land Area County Use
1998 2,008 SF 41,720 SF 000000

StoriesBasementType ExteriorQualityFull/Half BathGarage Last Notice of Major Improvements
1 YES STANDARD UNITSIDING/5 2 full 1 Attached

Value Information

	Base Value	Value		
		As of 01/01/2023	Phase-in Assessments As of 07/01/2022	As of 07/01/2023
Land:	260,300	210,300		
Improvements	277,600	371,400		
Total:	537,900	581,700	537,900	552,500
Preferential Land:	0	0		

Transfer Information

Seller: FESTERLING SONJA Date: 08/10/2012 Price: \$399,000
Type: ARMS LENGTH IMPROVED Deed1: /14200/ 00190 Deed2:
Seller: REIGLE THOMAS A Date: 12/22/1998 Price: \$265,000
Type: ARMS LENGTH IMPROVED Deed1: /04557/ 00194 Deed2:
Seller: STANCER CHARLES A Date: 03/13/1998 Price: \$75,000
Type: ARMS LENGTH VACANT Deed1: /04216/ 00433 Deed2:

Exemption Information

Partial Exempt Assessments:	Class	07/01/2022	07/01/2023
County:	000	0.00	
State:	000	0.00	
Municipal:	000	0.00 0.00	0.00 0.00

Special Tax Recapture: None

Homestead Application Information

Homestead Application Status: No Application

Homeowners' Tax Credit Application Information

Homeowners' Tax Credit Application Status: No Application Date:

7/7/98
2:00
cancelled
7/17/98
cancel
start

PERMIT

SEWAGE DISPOSAL SYSTEM

P 510238

A 50563-G

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT _____

04-358708

DATE 7-2-98

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXX~~ 410-313-2640

DATE SYSTEM APPROVED 7-9-98

INSPECTOR Hank Oswald

South Carroll Backhoe, Inc. IS PERMITTED TO INSTALL ALTER _____

ADDRESS 4410 Salem Bottom Rd, Westminster, MD 21157 PHONE 410-875-4197

SUBDIVISION Bridlewood LOT 7 ROAD 16836 Hardy Road

PROPERTY OWNER Thomas A. Reigle

ADDRESS _____

SEPTIC TANK CAPACITY 1000 GALLONS

NUMBER OF BEDROOMS 3

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 210

TRENCHES - Trench to be 3 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 6 feet below original grade. Effective area begins at 4 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Place the distribution box 50 feet down the right lot line and 110 feet off this same lot line. Run trenches on contour to right side of lot.

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

PLANS APPROVED BY Mark Rifkin DATE 03/17/98

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.

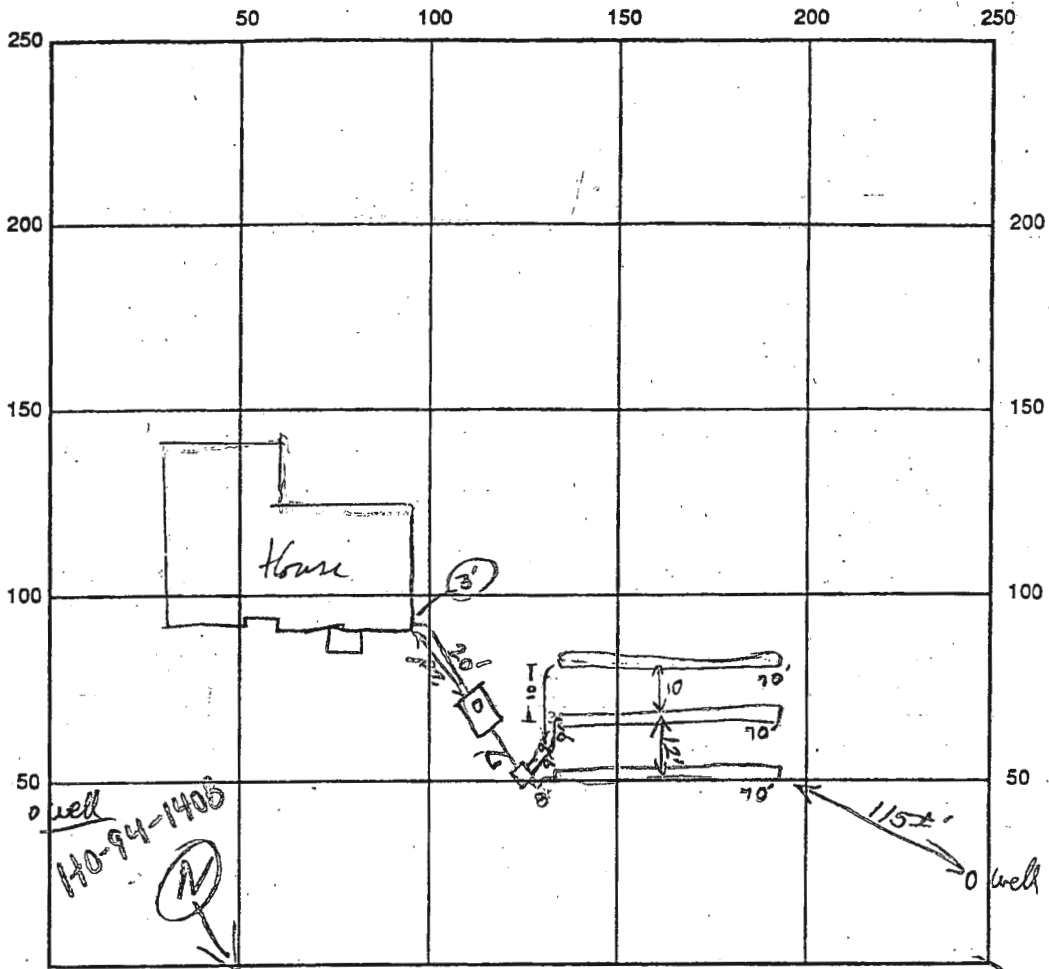
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

HD-260(6-90)

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

A 50563G



Hardy Rd INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1000 gal Top Seam CLEANOUTS 1; at septic tank

DISTRIBUTION BOX LEVEL OK

DRAIN FIELD/TITLE DEPTH 6 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 70/70/70 FT.

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 210 SQ. FT.

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

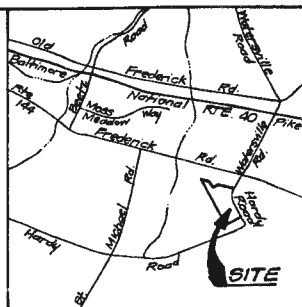
ABSORBENT AREA - SQ. FT.

REMARKS: OK to cover 1st trench, gravel fill second trench, OK to cover ST. + syph. line.
Need Hvac Connection, but box + 3rd trench inspected 7/7/98 RHP
7.8.98 has house conn. pipe from house to tank not connected
no work done today (RM)
7.9.98 septic system has passed final inspection. OK to cover entire
system.

DATE SYSTEM APPROVED 7.9.98 INSPECTOR Hank Oswald

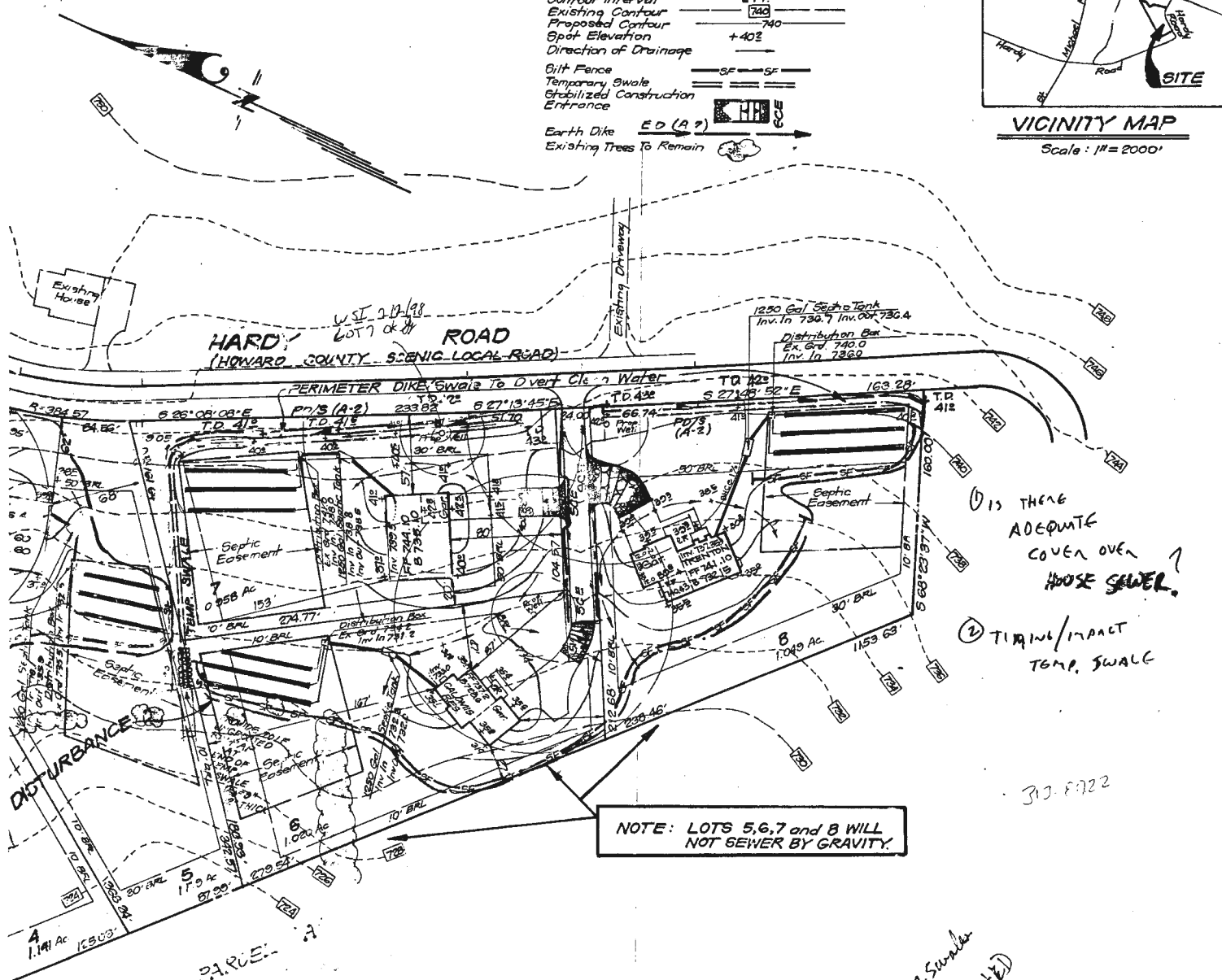
LEGEND

- Contour Interval 2 Ft
- Existing Contour ---
- Proposed Contour ---
- Spot Elevation +40±
- Direction of Drainage ---
- Belt Fence --- SF --- SF ---
- Temporary Swale ---
- Stabilized Construction Entrance ---
- Earth Dike ED (A-Z)
- Existing Trees To Remain (Tree Symbol)



VICINITY MAP

Scale: 1" = 2000'



① IS THERE ADEQUATE COVER OVER HOUSE SEWER?
 ② TRAFFIC IMPACT TEMP. SWALL

NOTE: LOTS 5, 6, 7 and 8 WILL NOT SEWER BY GRAVITY.

313-8722

No Dikes or Swales to be Constructed on Lots 6 & 7
M. J. [Signature]
Builder

CERTIFICATE

action will be done in for erosion and sediment...
 needed in the construction...
 of a Dept. of the Environment...
 sediment and erosion before...
 on-site inspection by...
 stated agencies, as are deemed

ENGINEER'S CERTIFICATE

I hereby certify that this plan for Erosion and Sediment Control represents a practical and workable plan based on my personal knowledge of the site conditions and that it was prepared in accordance with the requirements of the Howard 5th Conservation District.

Jeffrey L. Schwab
 Jeffrey L. Schwab

7/9/96
 Date



CLARK • FINEFROCK & SACKETT, INC. ENGINEERS • PLANNERS • SURVEYORS 7135 MINSTREL WAY • COLUMBIA, MD. 21045 • (410) 381-7500 - BALTO. • (301) 821-8100 - WASH.		
DESIGNED UME KIWA	LOTS 1-8 SITE DEVELOPMENT, SEDIMENT AND EROSION CONTROL PLAN BRIDLEWOOD SECTION 1 4TH ELECTION DISTRICT HOWARD COUNTY, MARYLAND FOR TRINITY BUILDERS 6212 Devon Drive Columbia, Maryland 21044	SCALE 1" = 50'
DRAWN BAL		DRAWING 1 OF 2
CHECKED KIM		JOB NO. 06 124
DATE 7-9-96		FILE NO. 96-124 X

G.P. 97-10

7-8-98
 Well line ok to cover
 P.A. 5' below grade
 casing 1' above grade
 has 2 piece cap. 1 1/2" dia. 14m

HOWARD COUNTY HEALTH DEPARTMENT
 Bureau of Environmental Health
 3525-H Ellicott Mills Drive
 Ellicott City, MD 21043
 461-9933

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation Replacement Receipt # _____ Date _____

Name of Installer WEST WEL PUMP Syst Inc Telephone 301 607 6412

License Number PI III
 Certified Well Pump Installer Well Driller _____ Registered Plumber _____

Name of Property Owner TOM REIGLE Telephone _____
 Subdivision _____ Lot # _____ Well Tag # _____
 Site Address 16836 Hillside Rd

Pump	Motor	Pitless Adapter
1. Type	1. Horsepower <u>1/2</u>	1. Make <u>CAMPBELL</u>
a. Deep well jet _____	2. RPM <u>3450</u>	Good <u>MARTINSEN</u>
b. Shallow well jet _____	3. Voltage _____	2. Model # <u>76505</u>
c. Submersible <input checked="" type="checkbox"/>	a. 110 _____	3. Depth <u>148 1/2' 6' 4"</u>
2. Make <u>Good</u>	b. 220 <input checked="" type="checkbox"/>	
3. Model # <u>76505</u>		
4. Capacity <u>7</u> GPM		
5. Pump exceeds well capacity Yes _____ No <input checked="" type="checkbox"/>		
6. If Yes, is low pressure cutoff switch installed? Yes _____ No <input checked="" type="checkbox"/>		
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors _____ Cable guards <input checked="" type="checkbox"/> Other _____		

Tank	Piping	Well data
1. Capacity <u>32</u>	1. Type <u>200c9</u>	1. Depth <u>148 1/2'</u>
2. Pressure relief valve? <input checked="" type="checkbox"/>	2. Size <u>1"</u>	2. Yield <u>22</u> GPM
	3. NSF and/or BOCA Code approved <input checked="" type="checkbox"/>	3. Static water level <u>17 1/2'</u>
	4. Depth of supply line <u>60"</u>	4. Will water supply be disinfected by installer? <u>NO</u>

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

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

Signature of Applicant: Logan Robert

Date: 7/8/98

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

MARYLAND DEPARTMENT OF THE ENVIRONMENT, WATER MANAGEMENT ADMINISTRATION
 2500 BROENING HIGHWAY, BALTIMORE, MARYLAND 21224, (410) 631-3784

 WATER WELL ABANDONMENT-SEALING REPORT FORM

SUBMIT COPIES OF COMPLETED FORM TO:

- * COUNTY ENVIRONMENT AGENCY (contact MDE, WMA if address needed)
- * WELL OWNER
- * MDE WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DATE WELL ABANDONED: 2-23-98 (month/day/year)

H094-1408

PERMIT NUMBER OF ABANDONED WELL (if any)

PERMIT NUMBER OF REPLACEMENT WELL

H094-1408

PERSON ABANDONING WELL: Leo R. Holland Jr.

WELL DRILLERS LICENSE NUMBER: 101

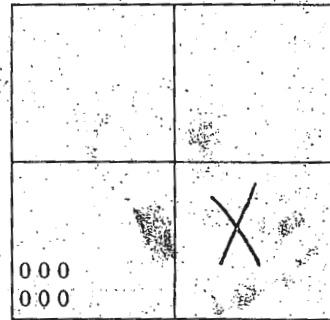
OWNER'S NAME: Tom Reigle

WELL LOCATION:

COUNTY: Howard
 NEAREST TOWN: Mount Airy
 TAX MAP BLOCK PARCEL
 SUBDIVISION: Bridlewood
 SECTION: 1 LOT: 7

MARYLAND GRID COORDINATES

E 770
 BOX NUMBER N 540 ←



SHOW WELL LOCATION BY X WITHIN BOX

TYPE OF WELL BEING ABANDONED:

- DRILLED JETTED
- BORED/AUGURED HAND DUG
- OTHER (specify) _____

USE CODE:

- DOMESTIC MUNICIPAL/PUBLIC
- IRRIGATION INDUSTRIAL
- TEST/OBSERVATION

TYPE OF CASING:

- STEEL PLASTIC
- CONCRETE OTHER (specify) _____

SIZE OF CASING: 6 INCHES IN DIAMETER

DEPTH OF WELL: 600 FEET DEEP

WAS ANY CASING REMOVED? YES NO
 if yes, length removed, in feet: 84

WAS CASING RIPPED OR PERFORATED? YES NO

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
Dirt & Clay	0	74
Macha	74	600

SIGNATURE MASTER WELL DRILLER OR SUPERVISING SANITARIAN: Leo R. Holland Jr. LICENSE # 101

DATE: 2/24/98

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS) **FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE** COUNTY NUMBER **A-305636** PERMIT NO. FROM "PERMIT TO DRILL WELL" **HO-94-1408**

DATE RECEIVED **2/25/98** DATE WELL COMPLETED **2 23 98** Depth of Well **150** (TO NEAREST FOOT) OWNER **REEGLE TOM** STREET OR RFD **HARDY Road** TOWN **MT. AIRY** SUBDIVISION **BRIDLEWOOD** SECTION **LOT 7**

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	
Dirt & clay	0	30	
Macha	30	150	

Hit Water 80 ft.

GROUTING RECORD (yes no
WELL HAS BEEN GROUTED (Circle Appropriate Box)

TYPE OF GROUTING MATERIAL (Circle one)
CEMENT BENTONITE CLAY

NO. OF BAGS **10** NO. OF POUNDS **90**

GALLONS OF WATER **10**

DEPTH OF GROUT SEAL (to nearest foot)
from **0** ft. to **45** ft.
(enter 0 if from surface)

CASING RECORD

casing types insert appropriate code below

STEEL CONCRETE PLASTIC OTHER

MAIN CASING TYPE **ST** Nominal diameter top (main) casing (nearest inch) **6** Total depth of main casing (nearest foot) **45**

OTHER CASING (if used)

diameter inch depth (feet) from to

SCREEN RECORD

screen type or open hole insert appropriate code below

STEEL BRASS OPEN HOLE PLASTIC OTHER

NUMBER OF UNSUCCESSFUL WELLS: _____

WELL HYDROFRACTURED YES NO

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

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS LIC. NO. **MSD191**
Geo R. Holland Jr
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)
LIC. NO. **MD009**
Frankie Phillips

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

C2 DEPTH (nearest ft.)

HO 45 150

8	9	11	15	17	21
23	24	26	30	32	36
38	39	41	45	47	51

SLOT SIZE 1 _____ 2 _____ 3 _____

DIAMETER OF SCREEN _____ (NEAREST INCH) _____

from _____ to _____

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

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)

T (E.R.O.S.) _____ W Q _____

70 _____ 72 _____ 74 75 76 _____

TELESCOPE CASING LOG INDICATOR OTHER DATA

C3 **PUMPING TEST**

HOURS PUMPED (nearest hour) **3**

PUMPING RATE (gal. per min.) **12**

METHOD USED TO MEASURE PUMPING RATE **Air Rotary**

WATER LEVEL (distance from land surface) **20** ft. **changed by driller 6-9-98**

BEFORE PUMPING **20** ft.

WHEN PUMPING **150** ft. **150**

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 (CIRCLE) (YES or NO) YES NO

IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.

TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29 **29**

CAPACITY: GALLONS PER MINUTE (to nearest gallon) **31** **35**

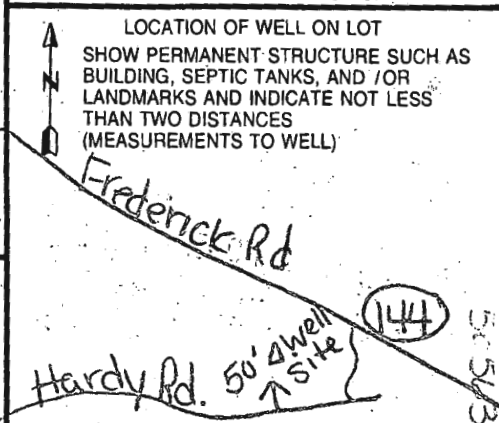
PUMP HORSE POWER **37** **41**

PUMP COLUMN LENGTH (nearest ft.) **43** **47**

CASING HEIGHT (circle appropriate box and enter casing height)

above **49**

below **49** (nearest foot)



APPLICATION

PERCOLATION TESTING

A 50563-6

P _____

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

DISTRICT _____

DATE 3-3-95

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER CHARLES STANCER THOMAS H. REIGLE

ADDRESS 16920 HARDY RD PHONE _____

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION STANCER PROP LOT NO. 7

ROAD AND DESCRIPTION 16836 Hardy Road

TAX MAP 7 PARCEL # 337

SIZE OF LOT 1 ACRE TYPE BLDG. SFD
(SINGLE FAMILY DWELLING OR COMMERCIAL)

**BLDG. PERMIT SIGNED
AND RETURNED 3-17-95
Serial # B10110055**

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT. _____
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

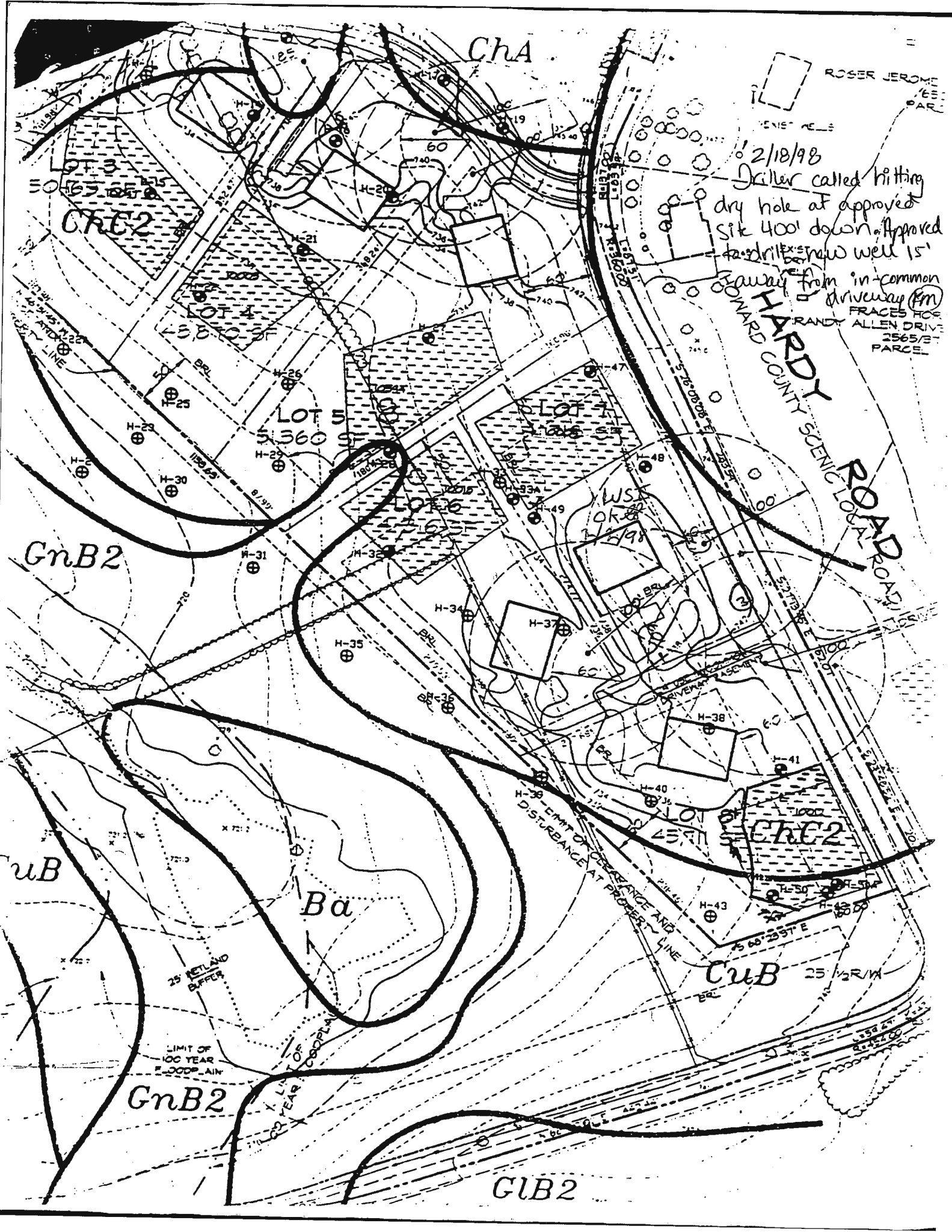
HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT



Cha

ROSER JEROME
66
PARCE

2/18/98
Driller called hitting
dry hole at approved
site 400' down. Approved
to drill new well 15'
away from in-common
driveway (from
FRANCES HOE
RANDY ALLEN DRIVE
2565' E
PARCE

CRE2

HARDY ROAD
SCENIC LOOP ROAD

GnB2

LOT 5

LOT 8

CuB

Ba

LOT 11
CRE2

CuB 25 1/2 R/W

GnB2

GUB2

25' WETLAND
BUFFER

LIMIT OF
100 YEAR
FLOODPLAIN

100 YEAR
FLOODPLAIN

LIMIT OF
DISTURBANCE AT
PROPERTY LINE

HARDY ROAD

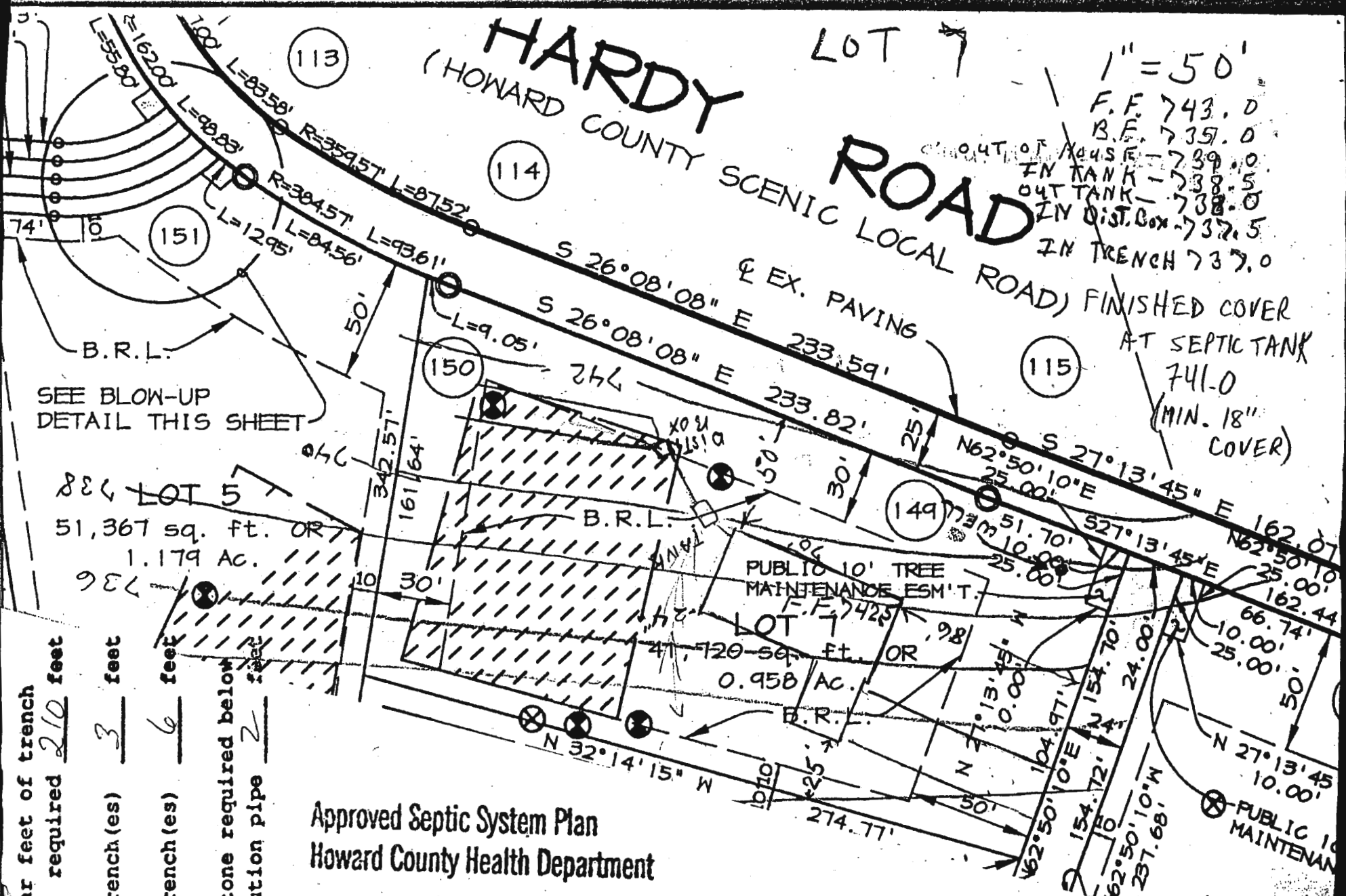
(HOWARD COUNTY SCENIC LOCAL ROAD)

LOT 7

1" = 50'

F.F. 743.0
 B.F. 735.0
 IN TANK - 739.0
 OUT TANK - 738.5
 IN Dist. Box - 738.0
 IN TRENCH 737.0

EX. PAVING
 FINISHED COVER
 AT SEPTIC TANK
 741.0
 (MIN. 18" COVER)



Total linear feet of trench required 210 feet

Width of trench(es) 3 feet

Depth of trench(es) 6 feet

Depth of stone required below distribution pipe 2 feet

Approved Septic System Plan
 Howard County Health Department

Mark E. Kilkam 3/17/98
 Signature Date

LOT 8
 45,711 sq. ft.
 1.049 Ac.
 B.R.L. PRIVATE 24'

SEE BLOW-UP
 DETAIL THIS SHEET

886 LOT 5
 51,367 sq. ft. OR
 1.179 Ac.
 986

PUBLIC 10' TREE
 MAINTENANCE ESMT.

LOT 7
 F.F. 742.5
 41,720 sq. ft. OR
 0.958 Ac.

PUBLIC 10'
 MAINTENAN

 WATER WELL ABANDONMENT - SEALING REPORT FORM

SUBMIT COPIES OF COMPLETED FORM TO:

- * COUNTY ENVIRONMENT AGENCY (contact MDE, WMA if address needed)
- * WELL OWNER
- * MDE WATER MANAGEMENT ADMINISTRATION WELL PROGRAM

DATE WELL ABANDONED: 2-23-98 (month/day/year)

- * PERMIT NUMBER OF ABANDONED WELL (if any)
- * PERMIT NUMBER OF REPLACEMENT WELL

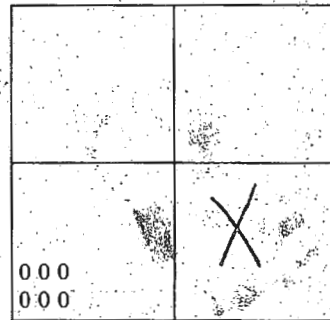
HO-94-1408

HO-94-1408

- * PERSON ABANDONING WELL: Leo R. Holland Jr.
- * OWNER'S NAME: Tom Reigte

WELL DRILLERS LICENSE NUMBER: 101

- * WELL LOCATION:
- COUNTY: Howard
- NEAREST TOWN: Mount Airy
- TAX MAP _____ BLOCK _____ PARCEL _____
- SUBDIVISION: Bridlewood
- SECTION: _____ LOT: 7



SHOW WELL LOCATION BY X WITHIN BOX

MARYLAND GRID COORDINATES
 E 770
 BOX NUMBER N 540 ←

- * TYPE OF WELL BEING ABANDONED:
- DRILLED _____ JETTED
- _____ BORED/AUGURED _____ HAND DUG
- _____ OTHER (specify) _____

- * USE CODE:
- DOMESTIC _____ MUNICIPAL/PUBLIC
- _____ IRRIGATION _____ INDUSTRIAL
- _____ TEST/OBSERVATION

- * TYPE OF CASING:
- STEEL _____ PLASTIC
- _____ CONCRETE _____ OTHER (specify) _____

- * SIZE OF CASING: 6 INCHES IN DIAMETER
- * DEPTH OF WELL: 600 FEET DEEP
- * WAS ANY CASING REMOVED? YES _____ NO
 if yes, length removed, in feet: 84'

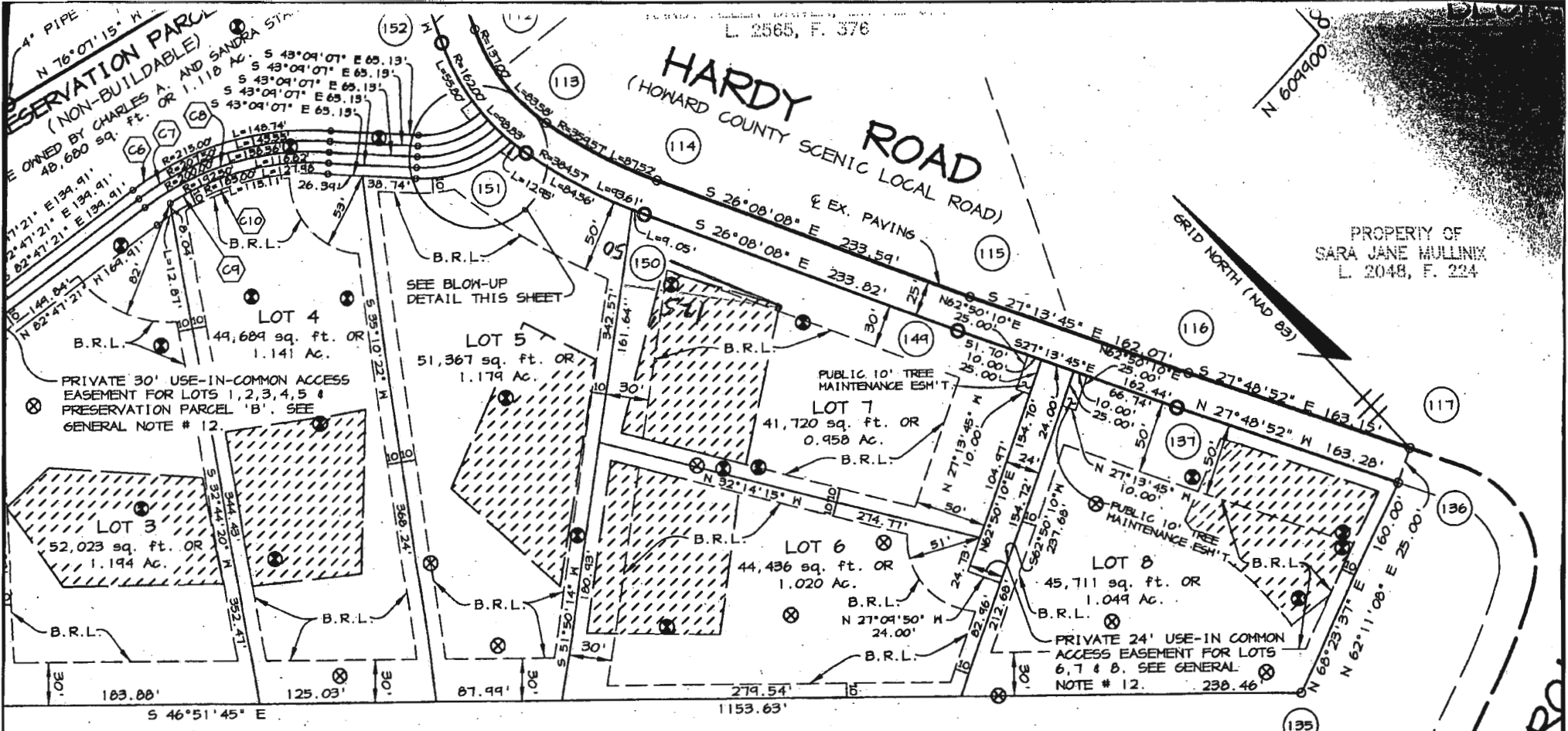
* WAS CASING RIPPED OR PERFORATED? _____ YES _____ NO
Leo R. Holland Jr. 101
 SIGNATURE - MASTER WELL DRILLER OR SUPERVISING SANITARIAN LICENSE #

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
Dirt & Clay	0	74
Macha	74	600

2/24/98
 DATE

L. 2565, F. 376



PROPERTY OF
SARA JANE MULLINIX
L. 2048, F. 224

AGRICULTURAL PRESERVATION PARCEL 'A'

FOR CONTINUATION
SEE SHEET 3 OF 4

FOR CONTINUATION
SEE SHEET 3 OF 4

THE REQUIREMENTS OF SECTION 3-10B, THE REAL PROPERTY
OF MARYLAND, 1988 REPLACEMENT VOLUME,
AS THEY RELATE TO THE MAKING OF THIS PLAT AND
HAVE BEEN COMPLIED WITH.

0751	DATE
<i>anc</i>	<i>6-7-96</i>
	DATE

*Copy
Signed
Final*

LEGEND

- - DENOTES 4' x 4' x 36" CONCRETE MONUMENT.
- - DENOTES 5/8" Ø IRON PIPE OR PIN SET.
- ⊗ - DENOTES PASSING PERC TEST
- ⊗ - DENOTES FAILED PERC TEST

- DENOTES PRIVATE SEWERAGE EASEMENT

OWNER

CHARLES A. STANCER & SANDRA STANCER 16920 HARDY ROAD MT AIRY, MARYLAND 21771	RIEM
---	------

APPLICATION

HOWARD COUNTY

PERMIT APPLICATION

46825

SERIAL NUMBER

DEPARTMENT OF INSPECTIONS, LICENSES & PERMIT
3430 COURT HOUSE DRIVE, ELLICOTT CITY, MARYLAND 21043

300110055

BUILDING ADDRESS (HOUSE NO., STREET, TOWN OR AREA)

16836 HARDY ROAD 34400
HT HT / 2771

GRADING/SEDIMENT CONTROL YES NO SDP #

DESCRIPTION OF WORK AUTHORIZED
Single Family Dwelling
ATT. 2 CAR GAR. w. Porches
3 BR 1 1/2 P
2 FB unfinished basement w/ RI

LOT NO.	PARCEL NO.	SEC	AREA	BLOCK NO.	LIBER	FOLIO
7		I		3	-	
SUB DIVISION		ZONE	ZONE MAP	ELEC. DIST.	CENSUS TR.	
BRIDGE WOOD		RC-IX	7	A	6040	

OWNER NAME AND ADDRESS
THOMAS, A Reigle
3605 UNDEROAK DR.
ELLICOTT CITY, MD. 21042

PHONE NO.
410 750 2490

OCCUPANT'S NAME AND ADDRESS
SAME

SIZE OF BLDG.	FRONT	DEPTH	HEIGHT
1900 SQ. FT.	20'	60'	24'

TYPE OF BLDG.	AREA	VOLUME	ROOF
B. ROOMS 3 ROOMS 3 BATHS 3 FIREPLACES 3			

ARCHITECT OR ENGINEER'S NAME AND ADDRESS

FOOTINGS	FOUNDATION	S. WALLS
Concrete	Concrete	WOOD

CONTRACTOR'S NAME AND ADDRESS
THOMAS A Reigle

PHONE NO.
410 750 2490

UTILITIES				
WATER (WELL) <input checked="" type="checkbox"/>	SEWER/SEPTIC <input checked="" type="checkbox"/>	GAS <input type="checkbox"/>	ELECTRICITY <input checked="" type="checkbox"/>	TYPE OF HEAT AC <input checked="" type="checkbox"/>

I have carefully examined and read this application and know the same is true and correct, and that is doing this work, all provisions of Howard County Ordinances and the State Laws of Maryland will be complied with, whether specified or not; and I will notify the Department of Inspections, and Permits twenty-four hours in advance when I am ready for the inspections called for elsewhere in the application; and that no work will be covered up until such inspections have been completed with.

EXISTING USE
Lot

PROPOSED USE
Single Family Dwelling

EST. CONSTRUCTION COST
120,000.00

LICENSE NUMBER
4933

PERMIT FEE

SIGNATURE
Owner
TITLE
DATE 2-20-98

FOR OFFICE USE ONLY

DISTANCE IN FEET FROM R/W LINE TO FRONT BUILDING LINE

SIDE YARD
(DISTANCE IN FEET FROM SIDE BLDG. LINE TO SIDE PROPERTY LINE)

TO SIDE BUILDING LINE
DISTANCE IN FEET, REAR YD. REQUIRING SET

BACK (CORNER LOT ONLY)

SDP #

FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING		
SHA		
SEDIMENT/GRADING		
BUILDING OFFICIAL		
WATER & SEWER		
HEALTH DEPT.	3/2/98	Mark E. Lipkin
FIRE PROTECTION		
STORM WATER MGMT.		

Check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

CAUTION

To begin construction before a permit placard has been issued and displayed on the job is a violation of the law.

Use and occupancy permit must be applied for two weeks before it will be issued.

IMPORTANT: PLEASE SHOW ZIP CODES AND AREA CODES WHEREVER REQUIRED.

LP-69-591

APPROVED _____ DATE _____

Distribution of Copies:
White - Building Official
Green - Planning & Zoning
Yellow - Engineering
Pink - Health Dept.
Gold - S.H.A.

50563-G

COUNTY #

SOIL PROFILE

H 47

TOPSOIL

ORANGE CLAY LOAM

3' 4"

TAN SANDY CLAY LOAM

5'

PINK SAPROLITE SILICIA

6'

ORANGE 11 1/2"

7'

75% SAPROLITE 1'-1"

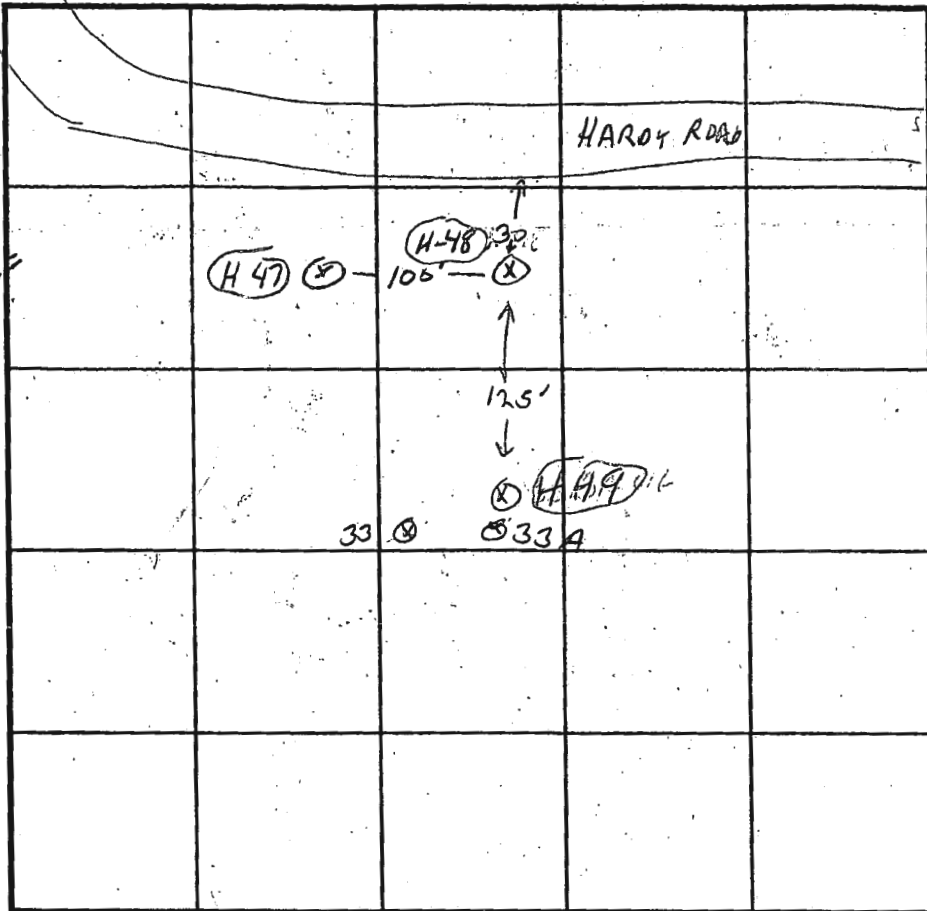
FRAGS - HARD

11'

H-49

PROFILE SIMILAR TO 33 A

10



SOIL PROFILE

H 48

TOPSOIL

DARK RED ORANGE CLAY LOAM

36"

PINK SAPROLITE SILT LOAM

8'

15-20% SAPROLITE PARENT MACROAL SOET

12'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8/9/95	H 48	3' 6"	9:57	10:25	TEST STOPPED - 1/2 INCH		
		8' 6"	10:01	10:04	10:04	10:08	4 MIN
		4'	10:03	10:14	10:14	10:47	33 MIN
		4' 6"	10:12	10:14	10:14	10:18	4 MIN
	H 47	3' 3"	10:26	10:42	10:42	10:12	30 MIN
		8'	10:40	10:41	10:41	10:43	2 MIN
	H 49	3' 6"	11:20	11:23	11:23	11:28	5 MIN
		8'	11:23	11:26	11:26	11:28	2 MIN

REMARKS ALL TESTS OK LOT 7

TYPE OF SOIL

TESTED BY GLEN SAVAGE

ALSO PRESENT WILLY HOPKINS CHARLES STANCER

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 10 MIN

TRENCH WIDTH 3

INLET DEPTH 4

MAXIMUM BOTTOM DEPTH 6

SQ. FT./BEDROOM 210

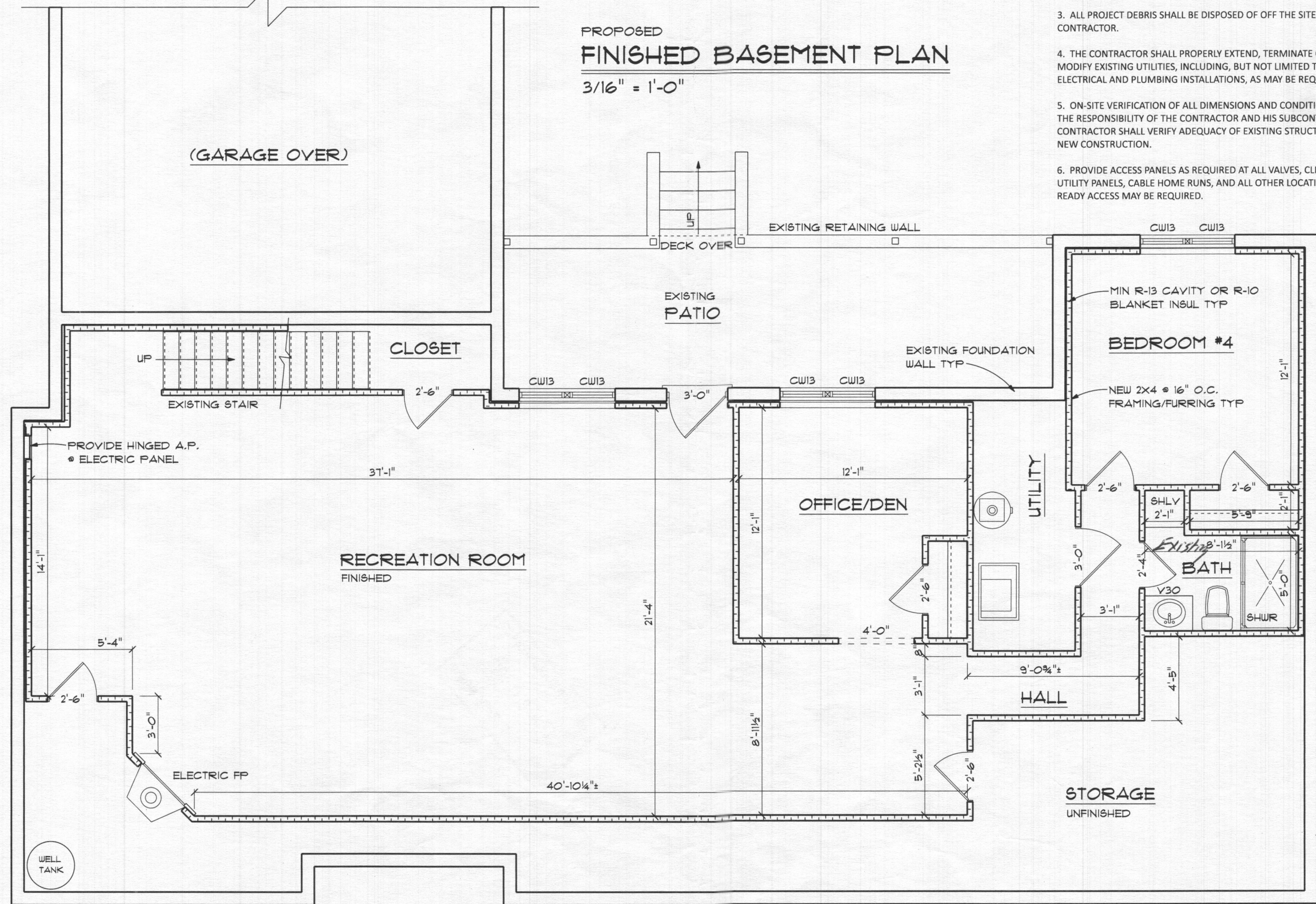
Approved *RJC*
8/7/2023 B23002614

NOTE: NO EXHAUSTIVE OR INVASIVE INVESTIGATION OF EXISTING CONDITIONS WAS PERFORMED. CONTRACTOR SHALL FIELD-VERIFY ALL CONDITIONS AND DIMENSIONS. IF A SIGNIFICANT DISCREPANCY OR UNANTICIPATED CONDITION IS DISCOVERED, CONTRACTOR SHALL NOTIFY ARCHITECT AND OWNER BEFORE PROCEEDING WITH THE WORK, AND SHALL NOT PROCEED UNTIL A MUTUALLY ACCEPTABLE RESOLUTION IS REACHED.

PROPOSED
FINISHED BASEMENT PLAN
3/16" = 1'-0"

GENERAL CONSTRUCTION NOTES

1. THE CONTRACTOR SHALL SECURE ALL NECESSARY PERMITS.
2. THE CONTRACTOR SHALL BE RESPONSIBLE FOR INITIATING, MAINTAINING AND SUPERVISING ALL SAFETY PROGRAMS AND PRECAUTIONS IN CONNECTION WITH THE WORK. THE CONTRACTOR SHALL TAKE ALL REASONABLE PRECAUTIONS AND PROVIDE ALL REASONABLE PROTECTION TO PREVENT DAMAGE, INJURY OR LOSS TO: ALL EMPLOYEES ON THE WORK AND ALL OTHER PERSONS WHO MAY BE AFFECTED THEREBY.
3. ALL PROJECT DEBRIS SHALL BE DISPOSED OF OFF THE SITE BY THE CONTRACTOR.
4. THE CONTRACTOR SHALL PROPERLY EXTEND, TERMINATE OR OTHERWISE MODIFY EXISTING UTILITIES, INCLUDING, BUT NOT LIMITED TO, MECHANICAL, ELECTRICAL AND PLUMBING INSTALLATIONS, AS MAY BE REQUIRED.
5. ON-SITE VERIFICATION OF ALL DIMENSIONS AND CONDITIONS SHALL BE THE RESPONSIBILITY OF THE CONTRACTOR AND HIS SUBCONTRACTORS. CONTRACTOR SHALL VERIFY ADEQUACY OF EXISTING STRUCTURE TO RECEIVE NEW CONSTRUCTION.
6. PROVIDE ACCESS PANELS AS REQUIRED AT ALL VALVES, CLEANOUTS, UTILITY PANELS, CABLE HOME RUNS, AND ALL OTHER LOCATIONS THAT READY ACCESS MAY BE REQUIRED.



RONALD JOHNSTON AND ASSOCIATES, ARCHITECTS
11407 BARLEY FIELD WAY
MARRIOTTSVILLE, MD 21104 • 410-442-3667

PROPOSED FINISHED BASEMENT PLAN FOR THE
COVEY RESIDENCE
16836 HARDY ROAD, MT. AIRY, HOWARD COUNTY, MD

REVISIONS	
DATE	06-21-2023
SHEET NO.	A-1
© 2023	