

Record Detail (This section is required.)

Permit Type Building/Residential/Misc/Pavilion Permit Number B23004860 Opened Date 12/15/2023  
 Description of Work SFD/ CONSTRUCT16 x 14 open pavilion, 15 x 11 2ND FLOOR OPEN DECK, 15 X 11 1ST FLOOR OPEN DECK

Approved MLE  
 12/22/23

[check spelling](#)

Address (This section is required.)

Search Reset Clear Get Parcel & Owner  
 Street # 14330 Street Name BENSWORTH Street Type WAY  
 Unit Type --Select-- Unit # X Coordinate -77.02673 Y Coordinate 39.25732  
 City GLENELG State MD Zip Code 21737 Primary Yes

Parcel (This section is required.)

Search Reset Clear Get Address & Owner  
 GIS ID 925031 Parcel 90 Parcel Area 1.1 Land Value 246000 Improved Value 0 Exemption Value 887300 Plan Area RURAL  
 Legal Description IMPVLOT 30 1.10 A[ ]14330 BENSWORTH WAY[ ]EDGEWOOD FARM PH 2 RSB

[check spelling](#)

Block 30 Lot 30 Census Tract 605601 Council Dist 5 Inspection Dist Supervisor Dist Map # DAP Zone  
 Plan Area State Tax Id 1404372565 Subdivision Name Edgewood Farm  
 Section Area Tax Map 21  
 Grid 21-22 Zoning District RC-DEO ADC Map 4812-F9  
 SDP No. Final Plan No. F-06-108 WP File No.  
 Record Plat No. 19266-1926 WS Contract No. FDP No. Primary Yes  
 Owner Occupied Year Built 2013 Historic District Yes No  
 Historic District Registry No. Stat Area 4-09 Flood Plain Yes No  
 Building No

Owner (This section is required.)

Search Reset Clear  
 Name CHARASALA, RENUKA PRASAD  
 Address Line 1 14330 Bensworth Way  
 Address Line 2  
 Address Line 3  
 Mail City Glenelg Mail State MD Mail Zip Code 21737  
 Phone 301-693-0429 Primary Yes  
 E-mail

charasala@gmail.com  
Cell Number  
3016930429

Fax Number

**Professionals** (This section is not required.)

|              |                |             |           |
|--------------|----------------|-------------|-----------|
| License #    | Business Name  |             |           |
| License Type | First Name     | Middle Name | Last Name |
| --Select--   | ▼              |             |           |
| Primary      | Address Line 1 |             |           |
| Yes          | ▼              |             |           |
|              | Address Line 2 |             |           |
|              | City           | State       | ZIP Code  |
|              | Phone 1        | Phone 2     | Fax       |
|              | E-mail         |             |           |

**Applicant** (This section is not required.)

Search As Owner As Lic. Prof As Contact

|              |                              |                  |           |
|--------------|------------------------------|------------------|-----------|
| Type         | First Name                   | MI               | Last Name |
| Applicant    | Kathleen                     |                  | Griswold  |
| Relationship | Full Name                    |                  |           |
| --Select--   | ▼ Kathleen Griswold          |                  |           |
| Primary      | Organization Name            |                  |           |
| Yes          | ▼                            | Lazo Landscaping |           |
|              | Street Address               |                  |           |
|              | 9920 Pulaski Highway         |                  |           |
|              | Address Line 2               |                  |           |
|              | City                         | State            | Zip Code  |
|              | Middle River                 | MD               | ▼ 21220   |
|              | Phone                        | Cell             | Fax       |
|              | 443-925-8927                 | 443-925-8927     |           |
|              | E-mail                       |                  |           |
|              | Kathleen@Lazolandscaping.com |                  |           |

**Addtl Info**

|  |               |                     |              |
|--|---------------|---------------------|--------------|
| Est Construction Cost                                      | Housing Units | Number of Buildings | Public Owned |
| 23520  | 0             | 0                   | No           |
|  |               |                     | ▼            |
| Construction Type  |               |                     |              |
| 434 - Additions, Alterations and Conversions - Residential | ▼             |                     |              |

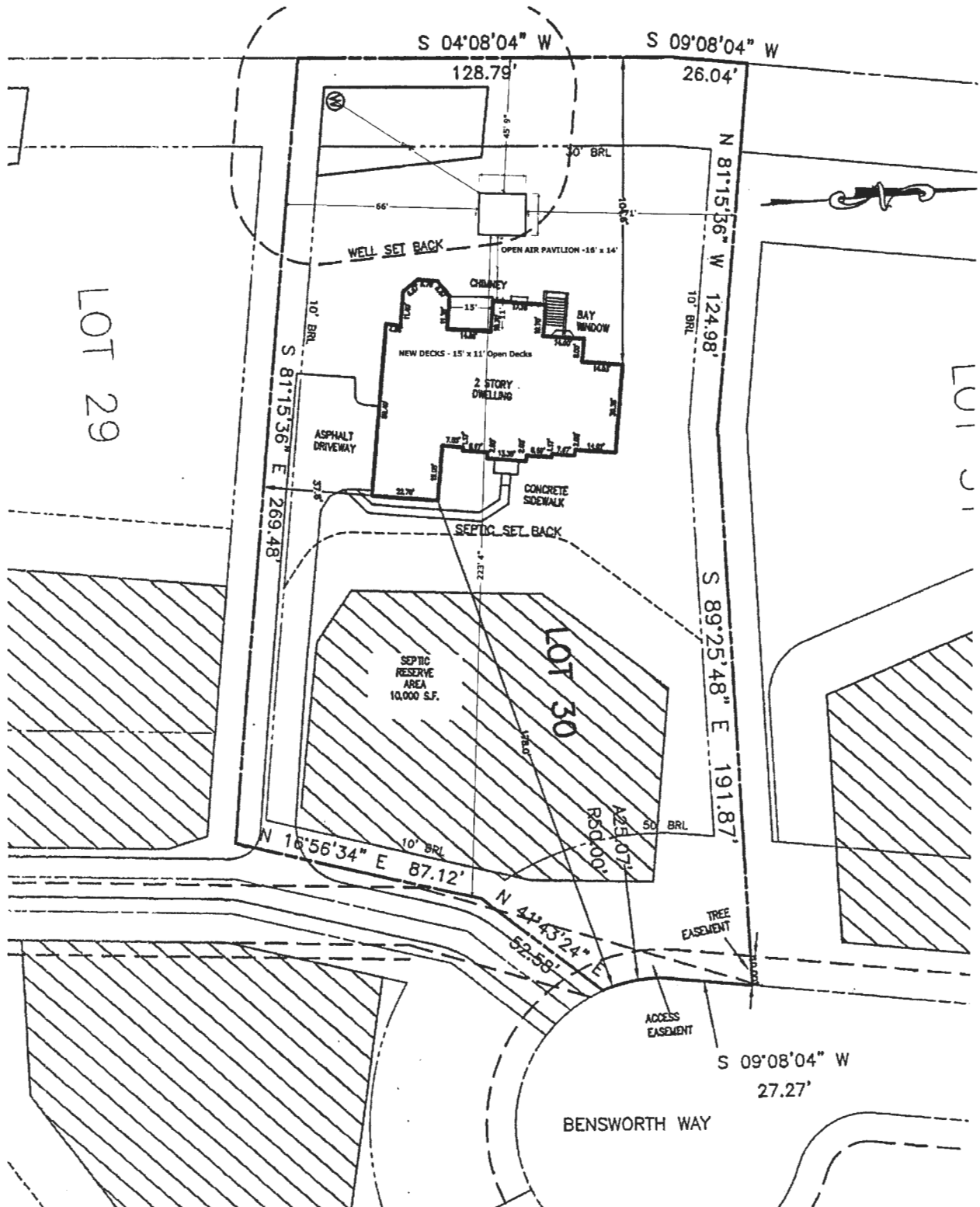
**PAVILION**

**PAVILION INFORMATION**

|   |                        |   |   |                                |
|---|------------------------|---|---|--------------------------------|
| Capital Project-No Fee  | Capital Project Number | Fee Exempt  | Roadside Tree Project Permit                                  | Roadside Tree Project Permit # |
| <input type="radio"/> Yes <input checked="" type="radio"/> No |                        | <input type="radio"/> Yes <input checked="" type="radio"/> No | <input type="radio"/> Yes <input checked="" type="radio"/> No |                                |
| Existing Use  | Total Square Footage   | Water Supply  | Sewage Disposal   | Expiration Date                |
| SFD   | ▼ 224                  | SQFT Private  | ▼ Private   | ▼ 6/18/2024                    |

Submit Cancel

PROFESSIONAL CERTIFICATION: I HEREBY CERTIFY THAT THESE DOCUMENTS WERE PREPARED BY ME OR UNDER MY RESPONSIBLE CHARGE, AND THAT I AM LICENSED PROFESSIONAL LAND SURVEYOR UNDER THE LAWS OF THE STATE OF MARYLAND, LICENSE NO. 21328, EXPIRATION DATE 1/8/15.



BUILDING SETBACKS (B.R.L.'s) SHOWN HEREON PER SITE DEVELOPEMENT PLAN SETBACK DISTANCES SHOWN HEREON AS "±" HAVE AN ACCURACY OF ±0.1' FOOT.

ADDRESS: 14330 BENSWARE GLENELG MD 2

**SURVEYOR'S NOTE**

I HEREBY CERTIFY THAT THE POSITION OF THE EXISTING IMPROVEMENTS SHOWN HEREON HAVE BEEN CAREFULLY ESTABLISHED BY ACCEPTED LAND SURVEYING PRACTICES AND THAT, UNLESS SHOWN, THERE ARE NO VISIBLE ENCROACHMENTS EITHER WAY ACROSS THE PROPERTY LINES. THE PLAN IS OF BENEFIT TO A CONSUMER ONLY INsofar AS IT IS REQUIRED BY A LENDER OR A TITLE INSURANCE COMPANY OR ITS AGENT IN CONNECTION WITH CONTEMPLATED TRANSFER, FINANCING, OR REFINANCING. THE PLAN IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATION OF FENCES, GARAGES, BUILDINGS, OR OTHER EXISTING OR FUTURE IMPROVEMENTS. THE PLAN DOES NOT PROVIDE FOR THE ACCURATE IDENTIFICATION OF PROPERTY BOUNDARY LINES, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING OR REFINANCING. THIS DRAWING WAS PREPARED W/O THE BENEFIT OF A TITLE REPORT.

*[Signature]* 21328 *[Initials]*

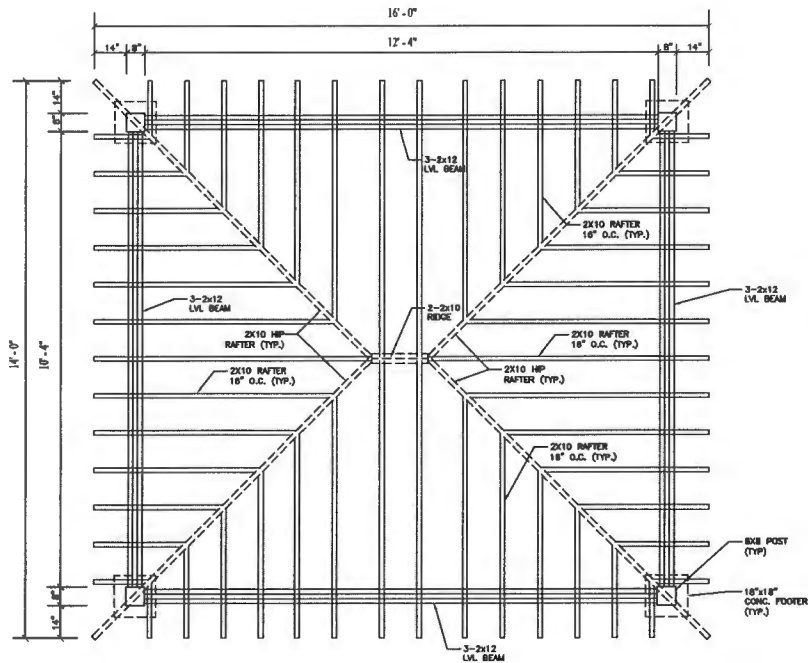
LOCATION DRAWING  
LOT #30

**EDGEWOOD FARM**

LIBER 10677, FOLIO 461

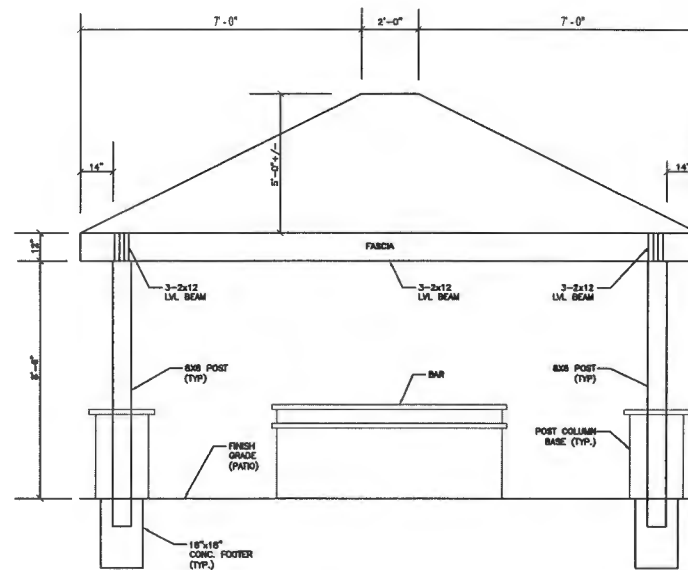
PLAT No. 19268

FOURTH (4TH) ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND



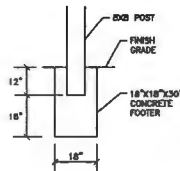
FRAMING AND FOUNDATION PLAN

SCALE: AS SHOWN

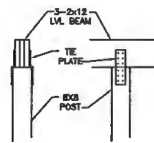


ELEVATION

SCALE: AS SHOWN



CONCRETE FOOTER



POST & BEAM

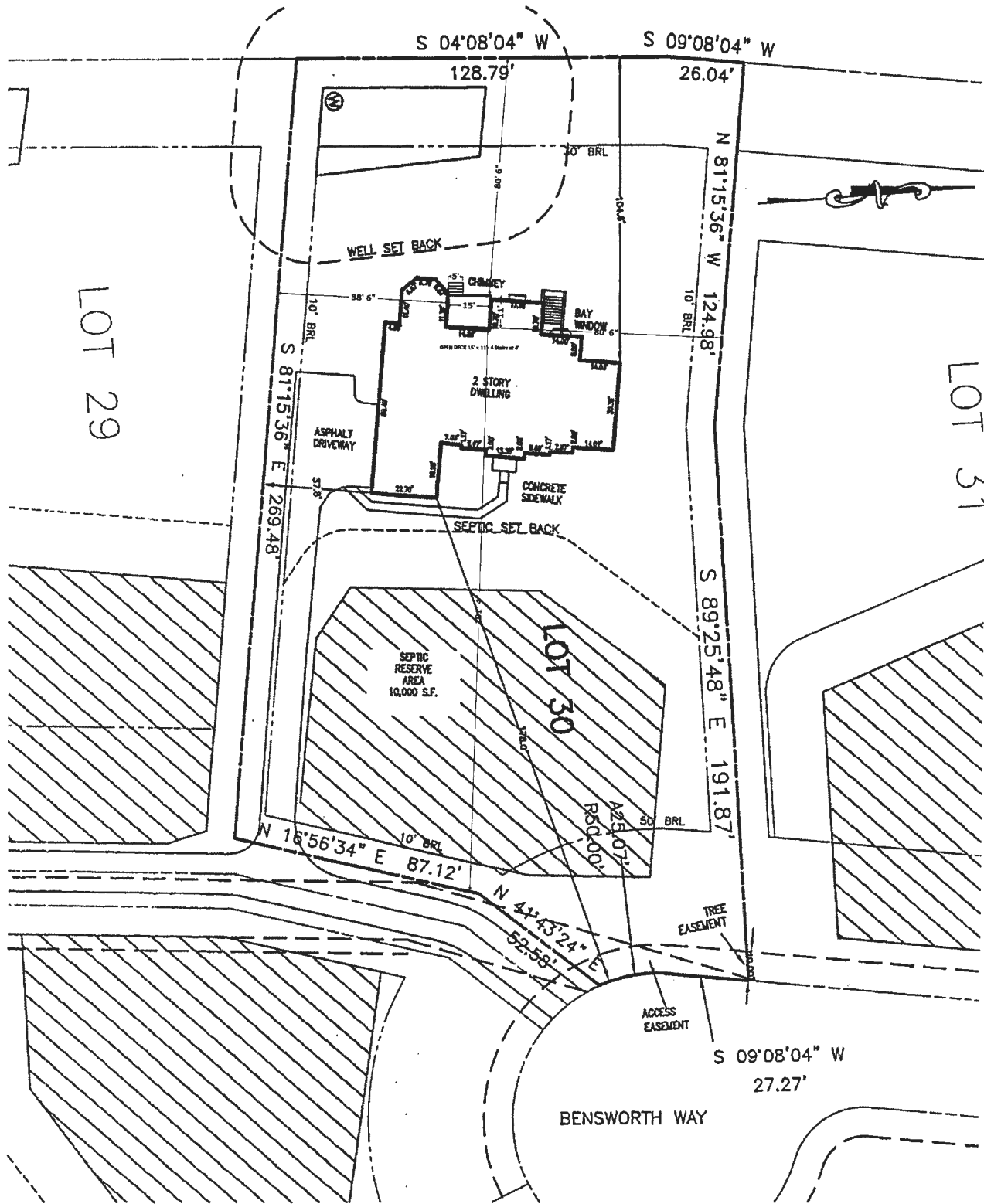
NEW 16' x 14' OPEN AIR PAVILION  
CHARASALA RESIDENCE

14330 Bensworth Way, Glenelg, MD 21737



Lazo Landscaping, Inc.

1301 Trimble Road  
Edgewood, MD 21040  
O: 410-780-0870



BUILDING SETBACKS (B.R.L.'s) SHOWN HEREON PER SITE DEVELOPMENT PLAN SETBACK DISTANCES SHOWN HEREON AS "±" HAVE AN ACCURACY OF ±0.1' FOOT.

ADDRESS: 14330 BENSWORD WAY  
GLENELG MD 218

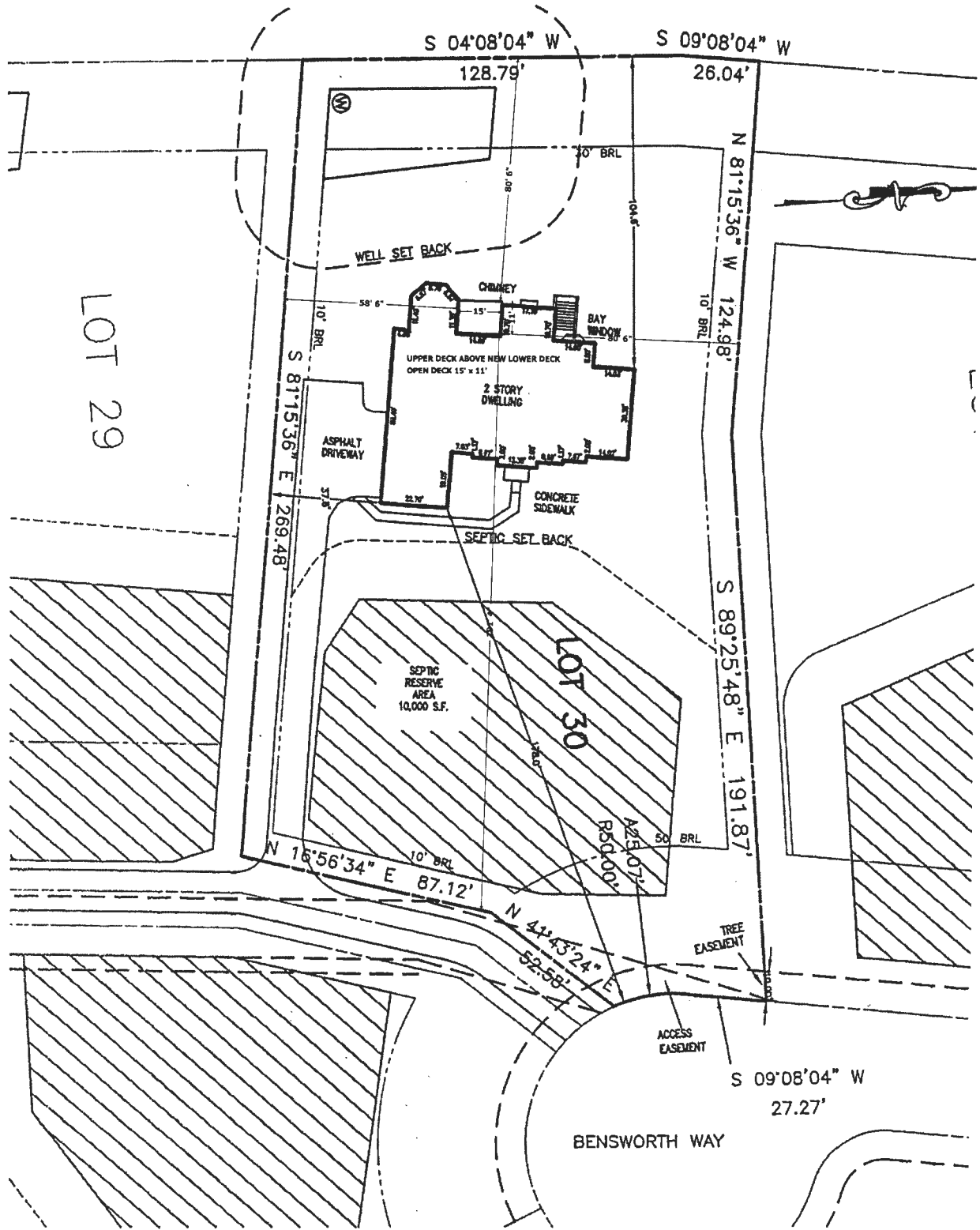
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SIGNATURE: MICHAEL JOE BOYCE 21328 MD. LIC NO. DATE 11/11/15

LOCATION DRAWING  
LOT #30  
**EDGEWOOD FARM**  
LIBER 10677, FOLIO 461  
PLAT No. 19268  
FOURTH (4TH) ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND

PROFESSIONAL CERTIFICATION: I HEREBY CERTIFY THAT THESE DOCUMENTS WERE PREPARED BY ME OR UNDER MY RESPONSIBLE CHARGE, AND THAT I A LICENSED PROFESSIONAL LAND SURVEYOR UNDER THE LAWS OF THE STATE OF MARYLAND, LICENSE NO. 21328, EXPIRATION DATE 1/8/15.



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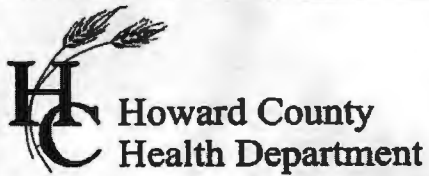
ADDRESS: 14330 BENS' GLENELG MD

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LOCATION DRAWING  
LOT #30  
**EDGEWOOD FARM**

LIBER 10677, FOLIO 461  
PLAT No. 19268  
FOURTH (4TH) ELECTION DISTRI



Bureau of Environmental Health  
 7178 Gateway Drive Columbia, MD 21046  
 (410) 313-2640 Fax (410) 313-2648  
 TDD (410) 313-2323 Toll Free 1-866-313-6300  
 website: www.hchealth.org

Maura J. Rossman, M.D., Health Officer

RECEIPT DATE: 12/18/12 **ONSITE SEWAGE DISPOSAL SYSTEM** P 544457-A

INSTALLATION APPROVAL DATE: \_\_\_\_\_ **PERMIT** A \_\_\_\_\_  
**CONSTRUCTION**

PROPERTY ADDRESS: 14330 Bensworth Way

SUBDIVISION: Edgewood Farm LOT: 30 TAX ID: 04-372565

CONTRACTOR: Fogle's Septic Clean Inc. EMAIL: kurt@foglesinc.com

CONTRACTOR ADDRESS: 580 Obrecht Road, Sykesville, MD 21784 PHONE: 410-795-5670

PROPERTY OWNER: Toll MD V LP EMAIL: nbrendenberg@tollbrothersinc.com

OWNER ADDRESS: 14540 Edgewoods Way, Glenelg, MD 21737 PHONE: 410-489-2275

SEPTIC TANK SIZE (GALLONS): 2000

PUMP CHAMBER CAPACITY (GALLONS): \_\_\_\_\_ PUMP SIZE: \_\_\_\_\_

NUMBER OF BEDROOMS: 4 HOUSE SQ. FT. 4,850 APPLICATION RATE: 1.2

DISTRIBUTION SYSTEM: GRAVITY FED  LOW PRESSURE DOSED

|           |  |  |
|-----------|--|--|
| TRENCHES: | LINEAR FEET REQUIRED: <u>104'</u>  | INLET DEPTH: <u>8.35'</u>                |
|           | TRENCH WIDTH: <u>3</u>   | MAXIMUM BOTTOM DEPTH: <u>6'</u>          |
|           | MINIMUM SPACE BETWEEN TRENCHES: <u>9</u>   | EFFECTIVE AREA BEGINNING DEPTH: <u>4</u> |
| LOCATION: | PER APPROVED SITE PLAN. SEWAGE DISPOSAL AREA MUST BE STAKED BY LICENSED SURVEYOR PRIOR TO PRE-CONSTRUCTION INSPECTION.   |  |
| NOTES:    | Set septic tank per plan. Set distribution box per plan. Install 2 x 52' trenches on contour. Ejector pump required for basement service.<br><u>40' + 64' Trenches</u> |  |

ISSUED BY: Heldi Scott ISSUE DATE: 8/14/13 EXPIRATION DATE: 12/18/13

- NOTE: CONTRACTOR MUST SCHEDULE A PRE-CONSTRUCTION INSPECTION PRIOR TO BEGINNING ANY INSTALLATION
- NOTE: CONTRACTOR MUST SCHEDULE AN INSPECTION AND GAIN APPROVAL OF ALL COMPONENTS PRIOR TO COVERING
- NOTE: STONE MUST BE APPROVED BY HEALTH DEPARTMENT AND GRAVEL TICKET MUST BE AVAILABLE FOR REVIEW.
- NOTE: WATERTIGHT SEPTIC TANKS REQUIRED
- NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE AT LEAST 100 FEET DOWNGRAIENT FROM ANY WATER WELL
- NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS
- NOTE: AN ELECTRICAL PERMIT IS REQUIRED FOR INSTALLATION OF ANY ELECTRICAL COMPONENTS OF THE SYSTEM

**NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.  
 PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT.  
 CALL 410-313-1771 TO SCHEDULE INSPECTIONS.**

NOT TO SCALE

TRENCH/DRAINFIELD DATA

WIDTH INLET BOTTOM

3 3.5-4 6

NUMBER OF TRENCHES 2

TOTAL LENGTH 109'

ABSORPTION AREA 327 + Sidewalk

DISTRIBUTION BOX LEVEL Levelers

DISTRIBUTION BOX BAFFLE Yes

DISTRIBUTION BOX PORT Yes

SEPTIC TANK DATA

SEPTIC TANK 1 LEVEL Yes

MANUFACTURER Babylon

CAPACITY 2000 GAL

SEAM LOC Top

TANK LID DEPTH 2.5-3'

BAFFLES Yes

BAFFLE FILTER No

MANHOLE LOC Front + Rear

6" PORT LOC None

WATERTIGHT TEST No

SLOTTED Yes

DATE ON LID Dry

PUMP/SEPTIC TANK LEVEL N/A

MANUFACTURER

CAPACITY GAL

SEAM LOC

TANK LID DEPTH

BAFFLES

BAFFLE FILTER

MANHOLE LOC

6" PORT LOC

WATERTIGHT TEST

SLOTTED

DATE ON LID

See As-Built Drawing On Different Sheet

ROAD NAME

PRE CONSTRUCTION:

8/22/2013 Trenches and tank location temporarily laid out. Noticed that one easement stake was in the wrong location. Will have to do layout again. (BB)

INSTALLATION:

8/24/2013 Tank and dist. box installed. The bottom trench location was adjusted per the new easement stake location. (BB)

8/27/2013 System finished. O.K. to backfill. (BB)

FINAL INSPECTOR

B. Baker

DATE OF APPROVAL

8/27/2013

H0-95-0786

