





Record Detail \* (This section is required.)

**Permit Type** Building/Residential/Accessory/Structure     
 **Permit Number** B23004446     
 **Opened Date** 11/07/2023   
**Description of Work**  
 SFD/ CONSTRUCT 23 X 24 DETACHED ACCESSORY STRUCTURE TO INCLUDE 18 X 23 OPEN PORCH,  
 23 X 6 ENCLOSED AREA TO INCLUDE HALF BATH, STORAGE ROOM/ 1 STORY, Slab on Grade, 0R, 0FB,  
 1HB, 0FP, OTHER STRUCTURE = None, 0BR, PORCH/DECK = N/A, ENERGY METHOD = N/A,

[check spelling](#)

Address \* (This section is required.)

<b>Street #</b> 13650	<b>Street Name</b> GILBRIDE	<b>Street Type</b> LN 	
<b>Unit Type</b> --Select-- 	<b>Unit #</b>	<b>X Coordinate</b> -76.98697	<b>Y Coordinate</b> 39.2241
<b>City</b> CLARKSVILLE	<b>State</b> MD	<b>Zip Code</b> 21029	<b>Primary</b> Yes 


Parcel \* (This section is required.)

<b>GIS ID *</b> 880662	<b>Parcel</b> 30	<b>Parcel Area</b> 3	<b>Land Value</b> 285000	<b>Improved Value</b> 1287900	<b>Exemption Value</b> 1002900	<b>Plan Area</b> RURAL
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**Legal Description**  
IMPSLOT 5 3.005 A[ ]13650 GILBRIDE LN[ ]HEDGEROW SEC 1

[check spelling](#)

<b>Block</b> 5	<b>Lot</b> 5	<b>Census Tract</b> 605101	<b>Council Dist</b> 5	<b>Inspection Dist</b>	<b>Supervisor Dist</b>	<b>Map #</b>	<b>DAP Zone</b>
<b>Plan Area</b>	<b>State Tax Id</b> 1405411645	<b>Subdivision Name</b> HEDGEROW					
<b>Section</b>	<b>Area</b>	<b>Tax Map</b> 28					
<b>Grid</b> 28-20	<b>Zoning District</b> RR-DEO	<b>ADC Map</b> 4933-C5					
<b>SDP No.</b>	<b>Final Plan No.</b> F-89-111	<b>WP File No.</b>		<b>Primary</b> Yes 			
<b>Record Plat No.</b> 8933	<b>WS Contract No.</b>	<b>FDP No.</b>					
<b>Owner Occupied</b> <input type="radio"/> Yes <input type="radio"/> No	<b>Year Built</b> 1991	<b>Historic District</b> <input type="radio"/> Yes <input checked="" type="radio"/> No					
<b>Historic District Registry No.</b>	<b>Stat Area</b> 5-04A	<b>Flood Plain</b> <input type="radio"/> Yes <input checked="" type="radio"/> No					
<b>Building No</b>							

Owner (This section is not required.)



  
    

**Name \***  
DEVINE PATRICK J

**Address Line 1**  
13650 GILBRIDE LN

**Address Line 2**

**Address Line 3**

**Mail City** CLARKSVILLE     
 **Mail State** MD      
 **Mail Zip Code** 21029  
**Phone** 410-660-5286     
 **Primary** Yes   
**E-mail** devinefamily1998@gmail.com  
**Cell Number**     
 **Fax Number**

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

**License # \***  
 21040010019  
**License Type \***  
 Architect  
**Primary**  
 No

**Business Name**  
 RONALD JOHNSTON  
**First Name**      **Middle Name**      **Last Name**  
 ▼ RONALD           JOHNSTON  
**Address Line 1**  
 ▼ 11407 BARLEY FIELD WAY  
**Address Line 2**

**City**      **State**      **ZIP Code**  
 MARRIOTTSVILLE      MD      21104-0000  
**Phone 1**      **Phone 2**      **Fax**  
 4104423667  
**E-mail**  
 RON@RJARCHITECT.COM

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

Search   
  As Owner   
  As Lic. Prof   
  As Contact

**Type \***  
 Applicant  
**Relationship**  
 Applicant  
**Primary**  
 No

**First Name**      **MI**      **Last Name**  
 ▼ RONALD           JOHNSTON  
**Full Name**  
 ▼ RONALD JOHNSTON  
**Organization Name**  
 T/B/D  
**Street Address**  
 11407 BARLEY FIELD WAY  
**Address Line 2**

**City**      **State**      **Zip Code**  
 MARRIOTTSVILLE      MD      21104-0000  
**Phone**      **Cell**      **Fax**  
 4104423667  
**E-mail \***  
 RON@RJARCHITECT.COM

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

Search   
  As Owner   
  As Lic. Prof   
  As Contact

**Type**  
 Contact  
**Relationship**  
 Licensed Professional  
**Primary**  
 Yes

**First Name**      **MI**      **Last Name**  
 ▼ Ronald      Kent      Johnston  
**Full Name**  
 ▼ Ronald Kent Johnston  
**Organization Name**  
 Ronald Johnston & Associates, Architects  
**Street Address**  
 11407 Barley Field Way  
**Address Line 2**

**City**      **State**      **Zip Code**  
 Marriottsville      MD      ▼ 21104  
**Phone**      **Cell**      **Fax**  
 410-442-3667      443-220-7457  
**E-mail**  
 ron@rjarchitect.com

**Addtl Info**

**Est Construction Cost \***      **Housing Units \***      **Number of Buildings \***      **Public Owned**  
 75000      0      0      No

**Construction Type**  
 101 - Single Family Houses Detached

**RESIDENTIAL ADDITION INFORMATION**

**Capital Project-No Fee \***      **Capital Project Number**      **Fee Exempt \***      **Roadside Tree Project Permit**      **Roadside Tree Project Permit #**  
 Yes  No            Yes  No       Yes  No          

**No of Stories \***      **Foundation \***      **Basement \***      **No of Rooms \***      **Full Baths \***      **Half Baths \***      **Existing Use \***  
 1      Slab on Grade      N/A      0      0      1      Other - See Description of Work

**Model \***      **Condominium \***  
 Yes  No

[check spelling](#)

<b>Other Structure *</b> None	<b>Bedrooms *</b> 0	<b>Porch Deck *</b> N/A	<b>No of Fireplaces *</b> 0	<b>Type of Fireplace</b> --Select--	<b>Energy Code *</b> N/A		
<b>W &amp; S Fees Paid</b> <input type="radio"/> Yes <input type="radio"/> No	<b>Water *</b> Private	<b>Sewage *</b> Private	<b>Utilities *</b> Electric	<b>Heating System *</b> Electric	<b>Sprinkler System *</b> None	<b>Road Frontage</b> N/A	
<b>1st Floor Width</b> FT	<b>1st Floor Depth</b> FT	<b>2nd Floor Width</b> FT	<b>2nd Floor Depth</b> FT	<b>Basement Width</b> FT	<b>Basement Depth</b> FT	<b>Height</b> FT	<b>Building Construction Type</b> Conventional
<b>Total Square Footage *</b> 560	<b>Occupiable Square Footage *</b> SQFT 138	<b>Affordable Housing Funding *</b> SQFT N/A	<b>Foundation Measurement</b>	<b>Footings</b>	<b>MIHU Outside Downtown Columbia</b> <input type="radio"/> Yes <input type="radio"/> No	<b>MIHU Provided Units</b>	<b>Affordable Downtown Columbia</b> <input type="radio"/> Yes <input type="radio"/> No
<b>Walls</b> Roof	<b>Change In Use</b> <input type="radio"/> Yes <input checked="" type="radio"/> No	<b>Grading Permit No</b>	<b>Senior Housing</b> <input type="radio"/> Yes <input type="radio"/> No	<b>MIHU Required Units</b>	<b>Plan Submittal *</b> Electronically by Invitation from ProjectDox		
<b>Additional Description Info</b>				<b>Expiration Date</b> 5/14/2024			

[check spelling](#)

**GREEN INFORMATION**

<b>Goal Level</b> --Select--	<b>Actual Level</b> --Select--	<b>Leed Registration Number</b>	<b>Date of Leed Certification</b> [ ]
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**STORM WATER MANAGEMENT**

<b>Green Roofs A1</b> <input type="radio"/> Yes <input type="radio"/> No	<b>Permeable Pavements A2</b> <input type="radio"/> Yes <input type="radio"/> No	<b>Reinforced Turf A3</b> <input type="radio"/> Yes <input type="radio"/> No	<b>Disconnection of Rooftop Runoff N1</b> <input type="radio"/> Yes <input type="radio"/> No	<b>Disconnection of Non Rooftop Runoff N2</b> <input type="radio"/> Yes <input type="radio"/> No
<b>Sheetflow to Conservation Areas N3</b> <input type="radio"/> Yes <input type="radio"/> No	<b>Rainwater Harvesting M1</b>	<b>Submerged Gravel Wetlands M2</b>	<b>Landscape Infiltration M3</b>	<b>Infiltration Berms M4</b>
<b>Dry Wells M5</b>	<b>Micro Bioretention M6</b>	<b>Rain Gardens M7</b>	<b>Swales M8</b>	<b>Enhanced Filters M9</b>

**PSWM Certification Received in CID on**  
[ ]

**Submit**      **Cancel**

## Oswald Jr, Woodin

---

**From:** Oswald Jr, Woodin  
**Sent:** Monday, January 29, 2024 12:08 PM  
**To:** 'Ronald Johnston'  
**Cc:** 'devinefamily1998@gmail.com'  
**Subject:** RE: B23004446\_13650 Gilbride Lane

Hi Mr. Johnston,

Thanks for the follow-up. I lost sight of this one. My apologies. Building permit # B23004446 has been approved by the Health Department.

Thanks,

Hank

Hank Oswald  
Licensed Environmental Health Specialist  
Bureau of Environmental Health  
Howard County Health Department  
8930 Stanford Blvd. Columbia, MD 21045  
(410) 313 - 1786  
[www.hchealth.org](http://www.hchealth.org)

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**From:** Ronald Johnston <ron@rjarchitect.com>  
**Sent:** Monday, January 29, 2024 9:57 AM  
**To:** Oswald Jr, Woodin <hoswald@howardcountymd.gov>  
**Cc:** devinefamily1998@gmail.com  
**Subject:** Re: B23004446\_13650 Gilbride Lane

[Note: This email originated from outside of the organization. Please only click on links or attachments if you know the sender.]

Good morning, Mr. Oswald,

I'm just following up to make sure this hasn't fallen through the cracks. My office uploaded the revised site plan to Accela on 12/15/23. Lisa Logan-Roussell marked it in Accela as "revised plot plan uploaded" on 12/18/23. However, I see no further comments at this point from your department.

As Zoning approved this project on 11/17/23, and building review approved it on 11/20/23, the Health Department approval is all I'm waiting for. Please let me know what the status is, or if you need anything further at this point. Thank you!

Ron  
410-442-3667

---

**From:** Ronald Johnston <[ron@rjarchitect.com](mailto:ron@rjarchitect.com)>  
**Sent:** Friday, December 15, 2023 2:55 PM  
**To:** Oswald Jr, Woodin <[hoswald@howardcountymd.gov](mailto:hoswald@howardcountymd.gov)>  
**Cc:** [devinefamily1998@gmail.com](mailto:devinefamily1998@gmail.com) <[devinefamily1998@gmail.com](mailto:devinefamily1998@gmail.com)>  
**Subject:** Re: B23004446\_13650 Gilbride Lane

Good afternoon, Mr. Oswald, thank you for your comments.

We will be tying in to the existing house sanitary, both cold water supply and sanitary drain. We will tie into the existing plumbing below the first-floor bathroom shown on the revised site plan, which has been uploaded into Acela. Once you have had a chance to review the amended site plan, please let me know if you need any further information.

I appreciate your assistance in this matter!

Ron Johnston

---

**From:** Oswald Jr, Woodin <[hoswald@howardcountymd.gov](mailto:hoswald@howardcountymd.gov)>  
**Sent:** Tuesday, November 28, 2023 1:12 PM  
**To:** Ronald Johnston <[ron@rjarchitect.com](mailto:ron@rjarchitect.com)>  
**Cc:** [devinefamily1998@gmail.com](mailto:devinefamily1998@gmail.com) <[devinefamily1998@gmail.com](mailto:devinefamily1998@gmail.com)>  
**Subject:** B23004446\_13650 Gilbride Lane

Hello Mr. Johnston,

Good afternoon. I'm currently reviewing the building permit for the proposed Lanai structure located on 13650 Gilbride Lane, and I have a question regarding the water and sewer connections. Are you planning on tying in both water and sewer back into the house or into the existing lines on the outside the house? In any case, please update the site plan to show the connections and upload to citizen portal. If you plan to tie in on the outside, then a septic permit will be required by this office prior to making the connections. Please provide clarification.

Should you have any questions, please don't hesitate to contact me.

Regards,

Hank

Hank Oswald  
Licensed Environmental Health Specialist  
Bureau of Environmental Health  
Howard County Health Department  
8930 Stanford Blvd. Columbia, MD 21045  
(410) 313 - 1786  
[www.hchealth.org](http://www.hchealth.org)

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## Oswald Jr, Woodin

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**From:** Oswald Jr, Woodin  
**Sent:** Tuesday, November 28, 2023 1:13 PM  
**To:** RON@RJARCHITECT.COM  
**Cc:** devinefamily1998@gmail.com  
**Subject:** B23004446\_13650 Gilbride Lane

Hello Mr. Johnston,

Good afternoon. I'm currently reviewing the building permit for the proposed Lanai structure located on 13650 Gilbride Lane, and I have a question regarding the water and sewer connections. Are you planning on tying in both water and sewer back into the house or into the existing lines on the outside the house? In any case, please update the site plan to show the connections and upload to citizen portal. If you plan to tie in on the outside, then a septic permit will be required by this office prior to making the connections. Please provide clarification.

Should you have any questions, please don't hesitate to contact me.

Regards,

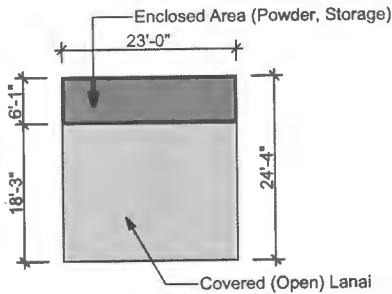
Hank

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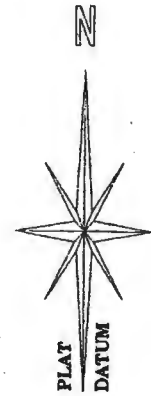
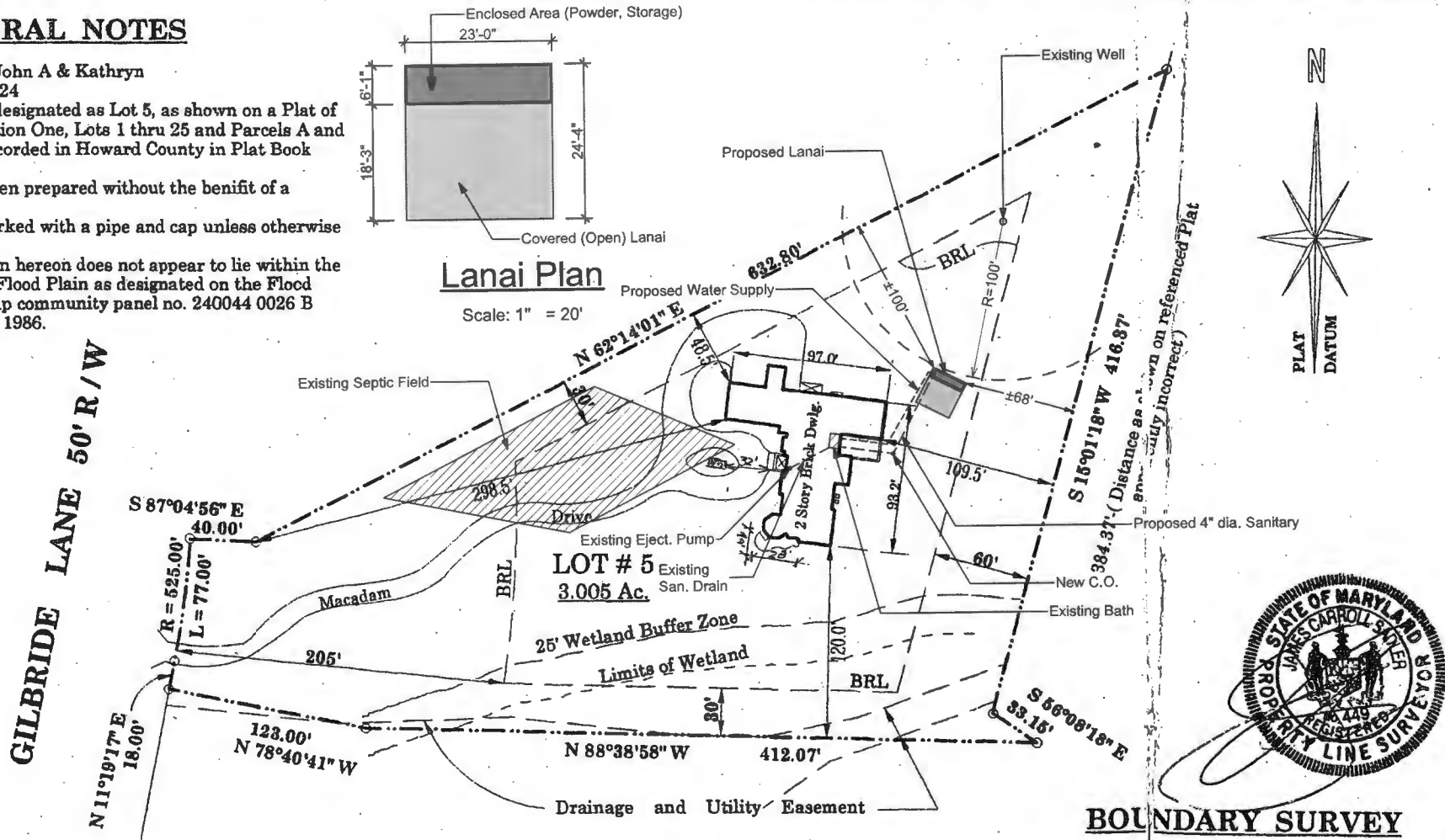
**GENERAL NOTES**

- Owners - Alascio, John A & Kathryn
- Deed Ref. 2820 - 124
- Being known and designated as Lot 5, as shown on a Plat of HEDGEROW, Section One, Lots 1 thru 25 and Parcels A and B, which Plat is recorded in Howard County in Plat Book No. 8933.
- This survey has been prepared without the benefit of a Title Report
- All corners are marked with a pipe and cap unless otherwise noted.
- The property shown hereon does not appear to lie within the boundaries of any Flood Plain as designated on the Flood Insurance Rate Map community panel no. 240044 0026 B dated December 4, 1986.



**Lanai Plan**

Scale: 1" = 20'



**BOUNDARY SURVEY**

1365) GILBRIDE LANE

5th Election District Howard County, MD.  
Scale 1" = 80' Date March 12, 1999

**W. T. SADLER SURVEYORS**

152 Westminster Pike  
Reisterstown, MD. 21136  
410-526-5618

*Revised site plan showing water & sewer lines tied back into the house.*

05-411645

7-26-90 needs house connection JEN

3/30/93 P.M. JH

c.bsd

# PERMIT

File

P 49547

A 40505

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

DISTRICT 5th

HOWARD COUNTY  
BUREAU OF ENVIRONMENTAL HEALTH  
461-9933

## INDEXED

DATE 8/23/90

DATE SYSTEM APPROVED 3/30/93

INSPECTOR C.bsd

Jack Fyock

IS PERMITTED TO INSTALL  ALTER

ADDRESS \_\_\_\_\_ PHONE 988-9270

SUBDIVISION Hedgerow ROAD 13650 Gilbride Lane LOT 5

PROPERTY OWNER Wayne Greenfield John & Kathryn Alascio

ADDRESS \_\_\_\_\_

~~NO CABBAGE OR OTHER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND 40% IN THIS AREA BY THE~~

210  
41105P  
862.5 ft

~~CARRY ON CHANGES XXXXXXXXXXXXXXXXXXXX~~

SEPTIC TANK CAPACITY 1500 GALLONS NUMBER OF BEDROOMS 5 per TIC 7/10/90 Fyock sent to C.bsd

TRENCHES - 210 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 4 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Start the first trench 180' from the rear lot line and 90' from the left lot line. Run trenches along contour toward left side of lot.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or septic tank. 5-7-90 JEN

**BLDG. PERMIT SIGNED**

**AND RETURNED** 9-1-90

Serial # 519 120229  
William Attorneys Rowment

PLANS APPROVED BY Craig Williams cm DATE 03/28/90

**BUILDING PERMIT SIGNED**

**AND RETURNED**

42605 600 15387-Deek

COVER NO WORK UNTIL INSPECTED AND APPROVED

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF AN SEWER 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

**BLDG. PERMIT SIGNED**

**AND RETURNED** 10/26/93

Serial # 51149 - ground pool

**BLDG. PERMIT SIGNED**

**AND RETURNED** 9/23/94

Serial # 56429 - garage

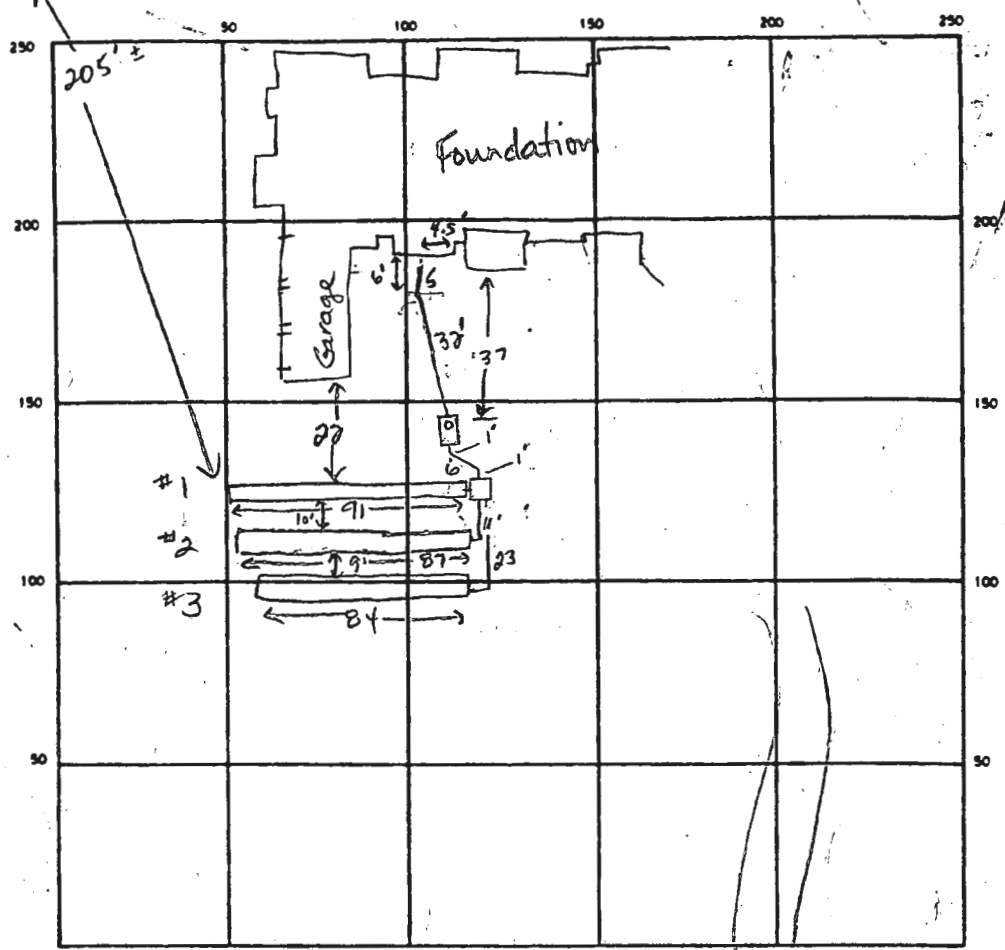
40505

**\*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT**

**\*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.**

NO-88-1130

7-85  
OK  
1-20  
2-23



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

Gilbride Lane

SEPTIC TANK LEVEL 1500 gal CLEANOUTS 1 on septic tank

DISTRIBUTION BOX LEVEL OK w/ baffle (set on stone & covered with stone for support under driveway)

DRAIN FIELD/TILE FIELD DEPTH 8, 8, 8 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3.5, 3.5, 3.5

EFFECTIVE GRAVEL DEPTH 4.5, 4.5, 4.5 FT. TOTAL LENGTH 91, 87, 84 FT.

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 409.5, 391.5, 378 SQ. FT.

DRYWELL INSIDE DIAMETER \_\_\_\_\_ FT. EFFECTIVE DEPTH BELOW INLET \_\_\_\_\_ FT.

ABSORBENT AREA 1179 SQ. FT.

REMARKS 7-25-90 OK to stone trench #1 & lay pipe & paper. Continue w/ trench #2, leave end open to bottom. Leave trench #1 open at end to inlet. VEN 7-26-90 OK to cover all work. Needs house connection.  
VEN Adams 4-18-91 no cleanout visible, unable to inspect connection today, DAB 3/30/93 water test in P.M. OK from house to S.T. tank c. rd "L. H. J. C. O. P. letter at into" c. rd

DATE SYSTEM APPROVED 3/30/93 INSPECTOR Charles B. Howard

P/ST/CL 1065 OK 792

9/17/91

Pesticide sample taken from  
outside sample - house  
still not occupied.

Area of house connection  
backfilled - no verification  
made.

NEOT BLOR 3/30/93 3:30

S.T. C/O still not observed.

From drawing on permit it is  
possible that tank sits under  
part of/all of driveway.

Do NOT issue SCOP until septic  
issues clarified AND results  
of pesticide sample are known

# APPLICATION

PERCOLATION TESTING

A 40505

P \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043  
TELEPHONE 461-9933

*1/22/88  
perc test  
ready approved  
per [initials]*

DISTRICT \_\_\_\_\_

DATE \_\_\_\_\_

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 Wayne Greenfield

ADDRESS 7549 Red. Cravat Court PHONE 995-6753  
Columbia, Md 21045

PROSPECTIVE BUYER \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

PROPERTY LOCATION:

SUBDIVISION TWO OAKS LOT NO 5 (adjacent)

ROAD AND DESCRIPTION \_\_\_\_\_  
from part of orig lot 6

TAX MAP \_\_\_\_\_ PARCEL # \_\_\_\_\_

SIZE OF LOT \_\_\_\_\_ TYPE BLDG \_\_\_\_\_  
(SINGLE FAMILY DWELLING OR COMMERCIAL)

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 \_\_\_\_\_

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING for field located above well site location

BOG. PERMIT SIGNED AND RETURNED 5/1/88  
Serial # 52195

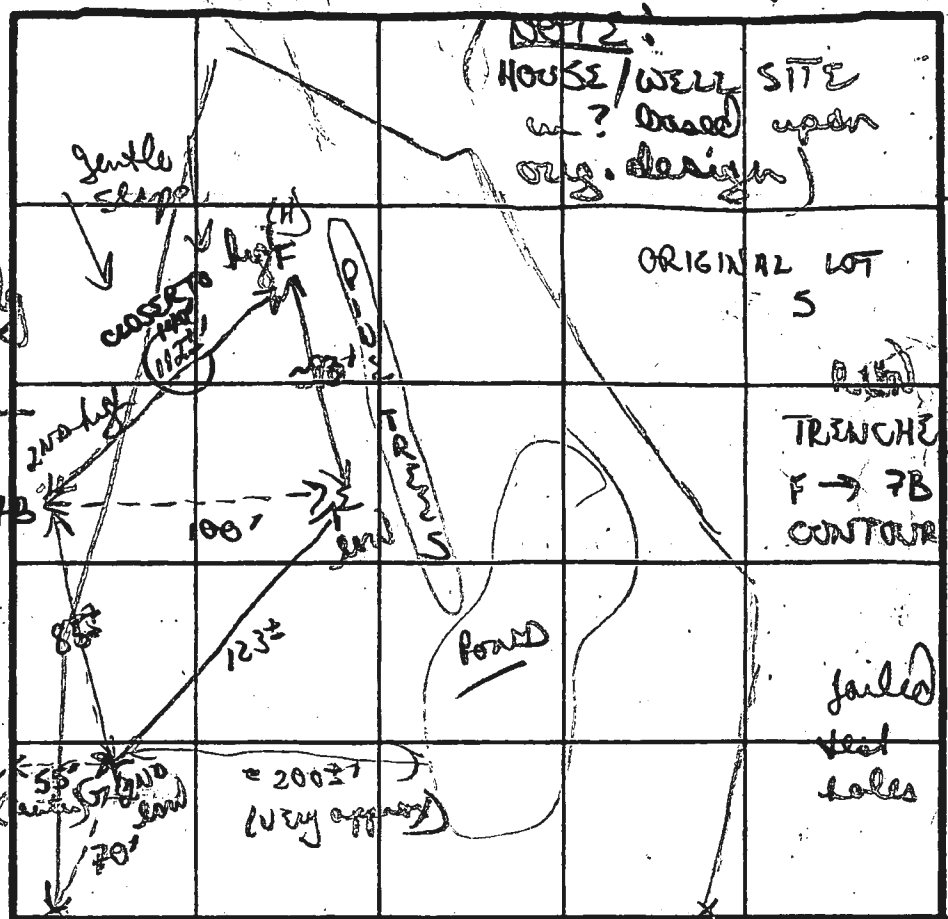
HD-216

# THIS IS NOT A PERMIT

TOLET 4'  
 MAY D = 81  
 X = 8 MIN  
 187# / BED.  
 Σ

SOIL PROFILE

orange clay  
 some gravelly  
 4'±  
 to orange / tan  
 silty loam  
 w/ 18%  
 small  
 layered  
 frags  
 ↓  
 12 1/2' D 7C



orange/red  
 cherty  
 gravelly  
 clay soil  
 4'  
 on to  
 orange  
 silty loam  
 w/ patches  
 of layered  
 frags  
 ↓  
 12 1/2'

similar to  
 G w/ few  
 small  
 scattered  
 patches of  
 white cherty  
 boulders  
 for once  
 low  
 13 1/2'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

DATE	TEST NO	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
11/21/82	(I) E	4' S	307	310	310	313	3 MIN	
		7 1/2' M	308	311	311	315	4 MIN	
		12 1/2' D	bottom (see profile)					
	(H) F	4' S	317	321	321	325	4 MIN	
		13 1/2' D	bottom (see profile)					
	(J) G	4' S	329	331	331	339	3 MIN	
		12 1/2' D	bottom (see profile)					
11/14/82	7B	3' S	1100	1113	1113	1138	25 MIN	
11/14/82	7C	7 1/2' M	1101	1105	1105	1114	9 MIN	
		12 1/2' D	bottom (see profile)					

REMARKS: flipping per for lot 5 onto left edge of what was originally lot 6. will shift lot lines such that  
 TYPE OF SOIL: over 5 now part of 6 + vice versa  
 use hole 7B as common hole  
 TESTED BY: B Dixon  
 ALSO PRESENT: John S. Keith

# APPLICATION

PERCOLATION TESTING

A 40505

P \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 461-9933

*1/22/88  
perc unsatisfactory  
Ⓟ*

DISTRICT 5TH

DATE 10-29-87

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 LOWRIE SARGENT

ADDRESS 13243 WESTMEATH LANE PHONE 498-4334  
CLARKSVILLE, MARYLAND 21029

PROSPECTIVE BUYER \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

PROPERTY LOCATION:

SUBDIVISION TEN OAKS LOT NO. \_\_\_\_\_

*6 ON PREMIUM  
5 -> (NOW OPEN SPACE)*

ROAD AND DESCRIPTION WEST OF HIGHLAND ROAD, NORTH OF TRIADELPHIA ROAD

TAX MAP 28+34 PARCEL # 60,59  
30+64

SIZE OF LOT 3.0 AC TYPE BLDG. SFD  
(SINGLE FAMILY DWELLING OR COMMERCIAL)

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]*  
(SIGNATURE OF APPLICANT)

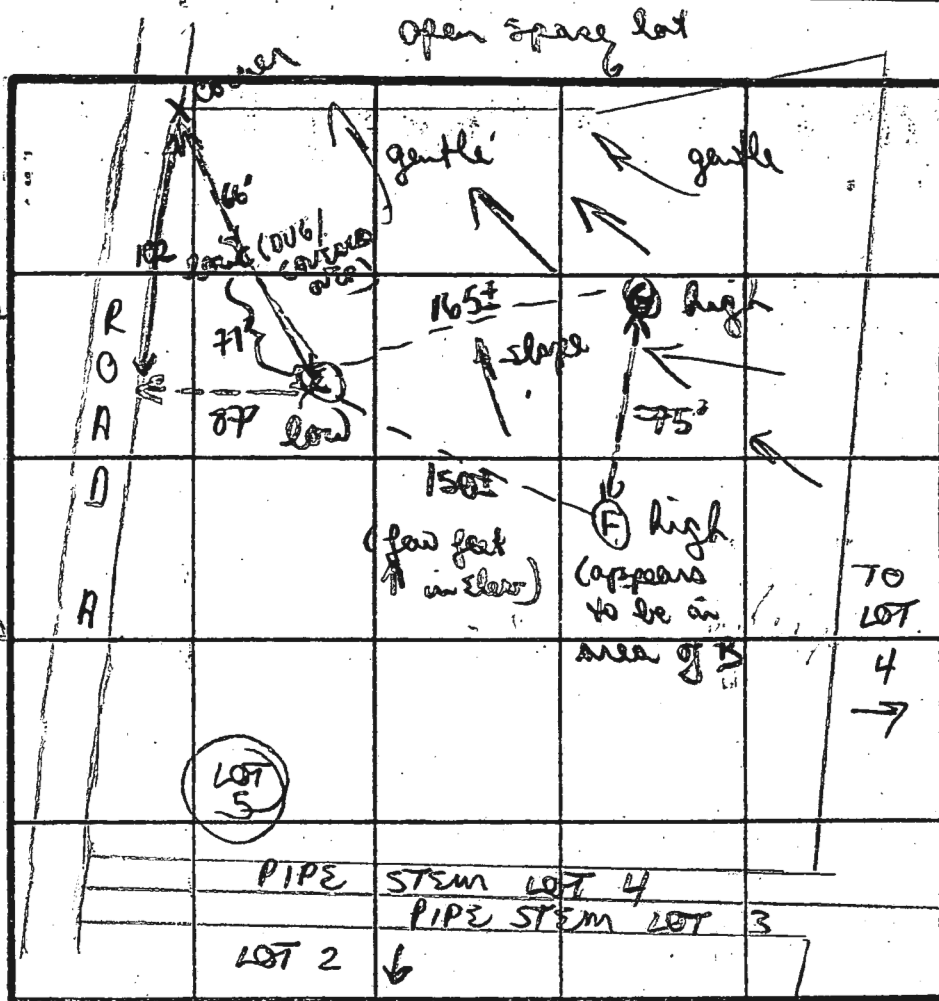
APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING Ⓟ No table top high in all holes examined

# THIS IS NOT A PERMIT



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE

heavy orange clay 2 1/2' w/ patches to mostly layered micaceous soil 3 1/2' ↓ H<sub>2</sub>O 7' ↓

F + G

heavy orange brown clay 2-2 1/2' to layered tan grey silty micaceous brown (15% s) ↓ clay 8' H<sub>2</sub>O 9'

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11/22/88	C	?	Dug + covered over				
	E	H <sub>2</sub> O	7' Deep				
	F	H <sub>2</sub> O	9' Deep				
	G	H <sub>2</sub> O	8' 10"				

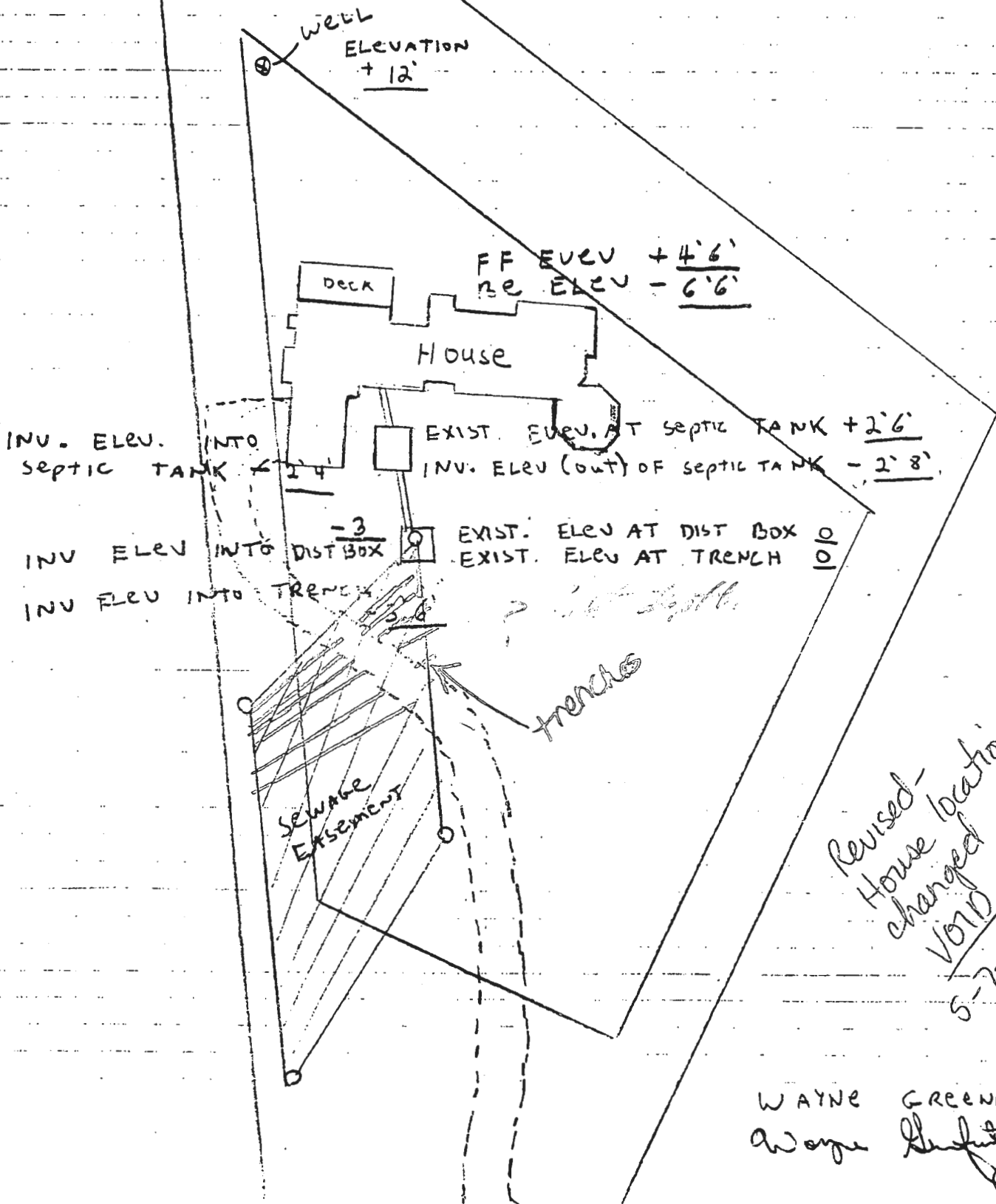
REMARKS: H<sub>2</sub>O in all holes - none tested. Area all unsatisfactory

TYPE OF SOIL: orange clays 3-4'; layered weathered shale frags

TESTED BY: B. Nye

ALSO PRESENT: Keith, Brian

# LOT 5 hedgerow



Revised-  
House location  
changed  
VBT/D  
5-7-90 WEN

WAYNE GREENFIELD  
Wayne *[Signature]*

GILBRIDE LANE (Sub-Div) Hedgerow

- Probably need 3 trenches

- more curve in drive up grade  
toward dist. box.

-

LOT 5  
 HEDGEROW  
 13650 GILBRIDE LANE  
 CLARKSVILLE MD  
 WAYNE GREENFIELD

LOTS 1-28

*Wayne Greenfield*

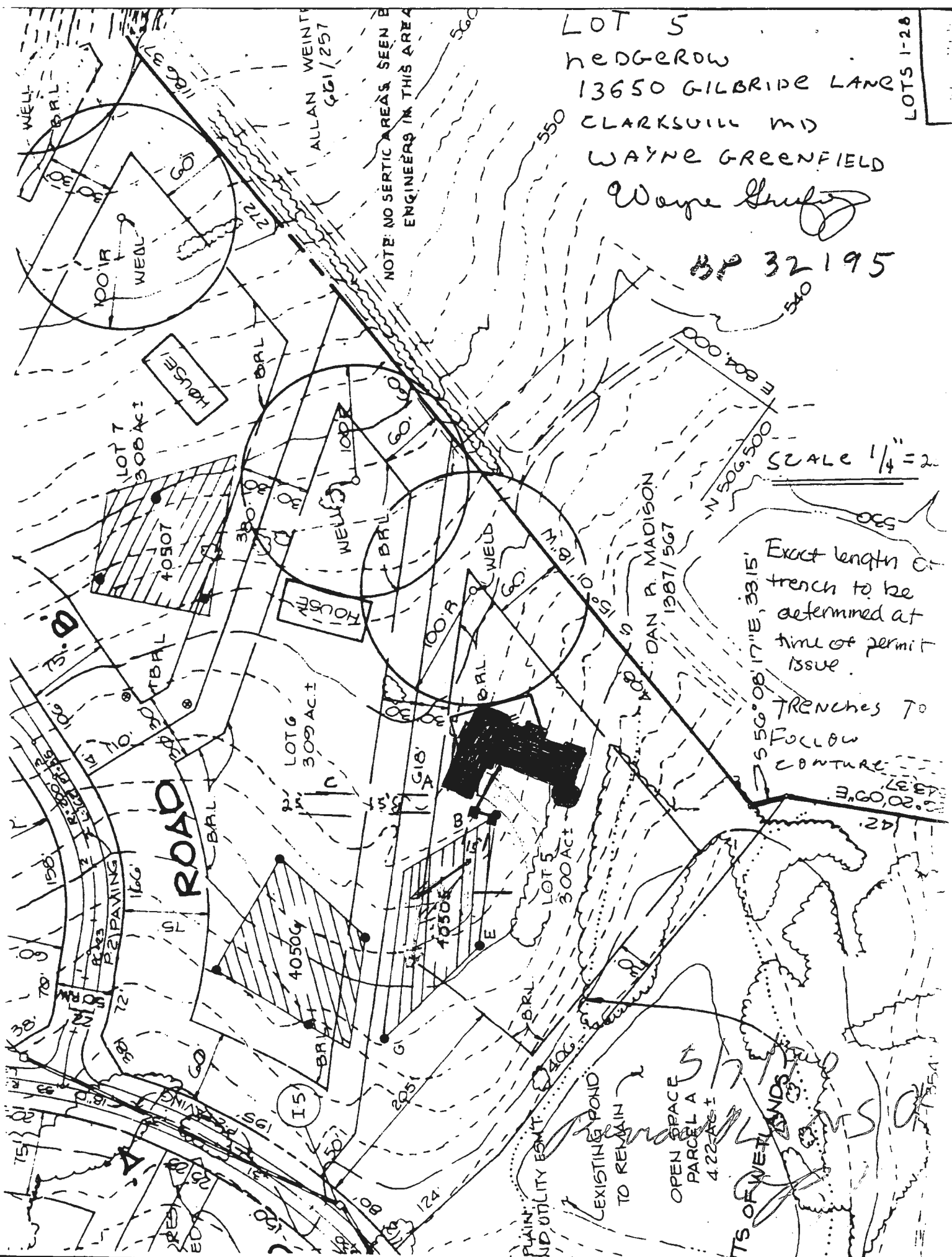
BP 32195

NOTE: NO SEPTIC AREAS SEEN BY ENGINEERS IN THIS AREA

SCALE 1/4" = 2'

Exact length of trench to be determined at time of permit issue.

TRENCHES TO FOLLOW CONTOUR



DAN R. MADISON 1987/567

ROAD

TRENCHES TO FOLLOW CONTOUR

OPEN SPACE PARCEL A 4.22 AC ±

EXISTING POND TO REMAIN

ITS OF WETLANDS

C1 1267

SEQUENCE NO. (DENV USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON-ALL CARDS)

COUNTY NUMBER A40505

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

OWNER Greenfield Homes Inc last name first name STREET OR RFD Gilbride Ln TOWN Dayton SUBDIVISION HEDGEDOW SECTION LOT 5

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

Table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Rows include Top Soil, B1 Shale, B1 Mica, Gray Mica, Flint, Gray Silica.

GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL CEMENT (CM) BENTONITE CLAY (BC)

NO. OF BAGS 15 NO. OF POUNDS 1410 GALLONS OF WATER 75 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 36 ft.

CASING RECORD casing types insert appropriate code below MAIN CASING TYPE ST Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 47

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

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

DEPTH (nearest ft.) 46 900

SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH) from to

CIRCLE APPROPRIATE LETTER 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 IDENT. NO. 40 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

GRAVEL PACK 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.) W Q 70 72 74 75 76 TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3

PUMPING TEST HOURS PUMPED (nearest hour) 6 PUMPING RATE (gal. per min. to nearest gal.) 1 METHOD USED TO MEASURE PUMPING RATE

WATER LEVEL (distance from land surface) BEFORE PUMPING 70 WHEN PUMPING 190 TYPE OF PUMP USED (for test) C centrifugal 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) PUMP HORSE POWER

PUMP COLUMN LENGTH (nearest ft.) CASING HEIGHT (circle appropriate box and enter casing height) 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 (MEASUREMENTS TO WELL)

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

Howard County Health Department  
 Bureau of Environmental Health  
 3525-H Ellicott Mills Drive  
 Court House Square  
 Ellicott City, Md. 21043  
 461-9933

New Installation  Replacement  Receipt # 46109  
 Date 7/1/90

Name of Installer Zepp Plumbing & Heating Inc. Telephone 301-671-1000

License number # 7082 / MD.  
 Certified Well Pump Installer  Well Driller  Registered Plumber

Name of Property Owner Greenfield Homes Telephone 301-549-7558  
 Subdivision HERDCROW Lot # 5 Well tag # - - -  
 Site Address 17650 GILBRIDE LANE  
Stonesville, Md. 21089

<b>Pump</b>	<b>Motor</b>	<b>Pitless Adapter</b>
1. Type	1. Horsepower <u>1</u>	1. Make <u>MARTINSON</u>
a. Deep well jet <input type="checkbox"/>	2. RPM <u>?</u>	2. Model # <u>B-10X</u>
b. Shallow well jet <input type="checkbox"/>	3. Voltage <input type="checkbox"/>	3. Depth <u>42"</u>
c. Submersible <input checked="" type="checkbox"/>	a. 110 <input type="checkbox"/>	
2. Make <u>BOULDER</u>	b. 220 <input checked="" type="checkbox"/>	
3. Model # <u>SES 10412</u>		
4. Capacity <u>5</u> GPM		
5. Pump exceeds well capacity Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
6. If Yes, is low pressure cutoff switch installed? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors <input checked="" type="checkbox"/> Cable guards <input checked="" type="checkbox"/> Other <input type="checkbox"/>		

<b>Tank</b>	<b>Piping</b>	<b>Well data</b>
1. Capacity <u>120 gallons</u>	1. Type <u>Polybutylene</u>	1. Depth <u>400</u> ft.
2. Pressure relief valve? <u>yes</u>	2. Size <u>1"</u>	2. Yield <u>1</u> GPM
	3. NSF and/or BOCA Code approved <input checked="" type="checkbox"/>	3. Static water level <u>    </u> ft.
	4. Depth of supply line <u>42"</u>	4. Will water supply be disinfected by installer? <u>yes</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: Edgar W. Zepp, Jr.  
 Date: 6/28/90

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

**HOWARD COUNTY  
 PERMIT APPLICATION**

PERMIT NUMBER

B00120229

Building Address 13650 Gilbride Ln.  
Clarksville, Md. 21029  
 Suite/Apt. # \_\_\_\_\_ SDP/WP/Petition #: \_\_\_\_\_  
 Census Tract 605101 Subdivision Hedgerow  
 Section \_\_\_\_\_ Area \_\_\_\_\_ Lot 5  
 Tax Map 23 Parcel 30 Grid 20  
 Zoning RR Map Coordinates 1344 Lot size \_\_\_\_\_

Property Owner's Name Donald C. Wilhelm  
 Address 13650 Gilbride Ln.  
 City Clarksville State Md. Zip Code 21029  
 Home Phone 413-535-6091 Work Phone 410-765-0820  
 Applicant's Name & Mailing Address, (if other than stated hereon):  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_

Existing Use Basement St Home  
 Proposed Use Basement Recreation  
 Estimated Construction Cost \$ 2000  
 Description of Work Create a wet bar library,  
bedroom and bath Rcc Rm  
in part of basement

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

Occupant of Tenant Owner  
 Contact Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_

Engineer or Architect Company \_\_\_\_\_  
 Contact Person \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_

**BUILDING DESCRIPTION - COMMERCIAL**

Building Characteristics	Utilities
Height: _____	Water Supply: _____ <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
No. of stories: _____	Sewage Disposal: _____ <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> <u>02</u> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Construction type: _____ <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression # of Heads _____

**BUILDING DESCRIPTION - RESIDENTIAL**

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> "Depth" "Width" 1st floor: _____ 2nd floor: _____ Basement: _____ <input type="checkbox"/> Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms: _____ Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Water Supply: _____ <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Sewage Disposal: _____ <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Other Structure: _____ Dimensions: _____ Footings: _____ Roof: _____ <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R Other: _____

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 THEREIN; (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 THE PROPERTY FOR THE PURPOSES OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature Judith A. Wilhelm  
 Title/Company \_\_\_\_\_

Print Name Judith A. Wilhelm  
 Date 9/2/99

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**  
 \*\* PLEASE WRITE NEATLY AND LEGIBLY \*\*  
 FOR OFFICE USE ONLY

AGENCY	DATE	SIGNATURE	APPROVAL
Land Development DPZ			
State Highways			
Building Official	<u>9/1/99</u>	<u>[Signature]</u>	
Dev. Engineering DPZ	<u>9/1/99</u>	<u>[Signature]</u>	
Health			
Fire Protection			

Is Sediment Control approval required prior to issuance?  
 YES  NO

CONTINGENCY CONSTRUCTION START:   
 ONE STOP SHOP:

**DPZ SETBACK INFORMATION**

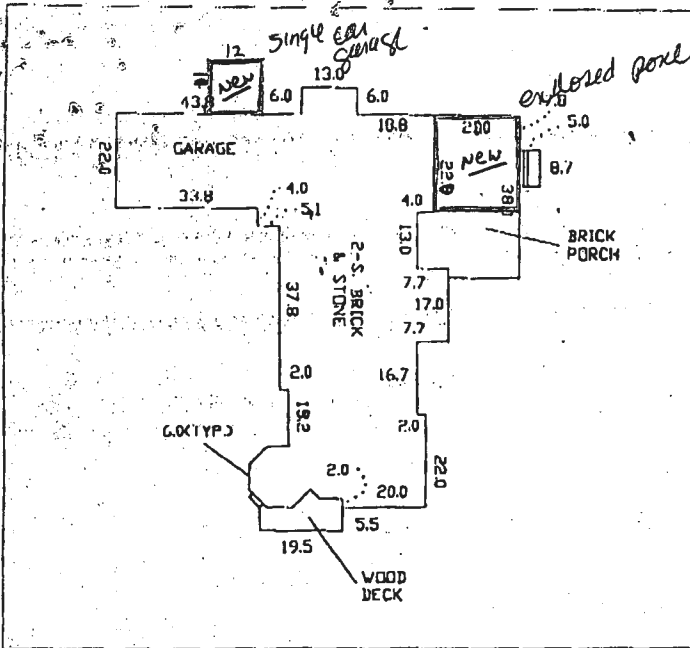
Front: \_\_\_\_\_  
 Rear: \_\_\_\_\_  
 Side: \_\_\_\_\_  
 Side St: \_\_\_\_\_  
 All minimum setbacks met? YES  NO   
 Is Entrance Permit required? YES  NO   
 Historic District? YES  NO   
 Lot Coverage for NewTown Zone \_\_\_\_\_  
 SDP/Red-line approval date \_\_\_\_\_

**PROPERTY ID#:** 7783

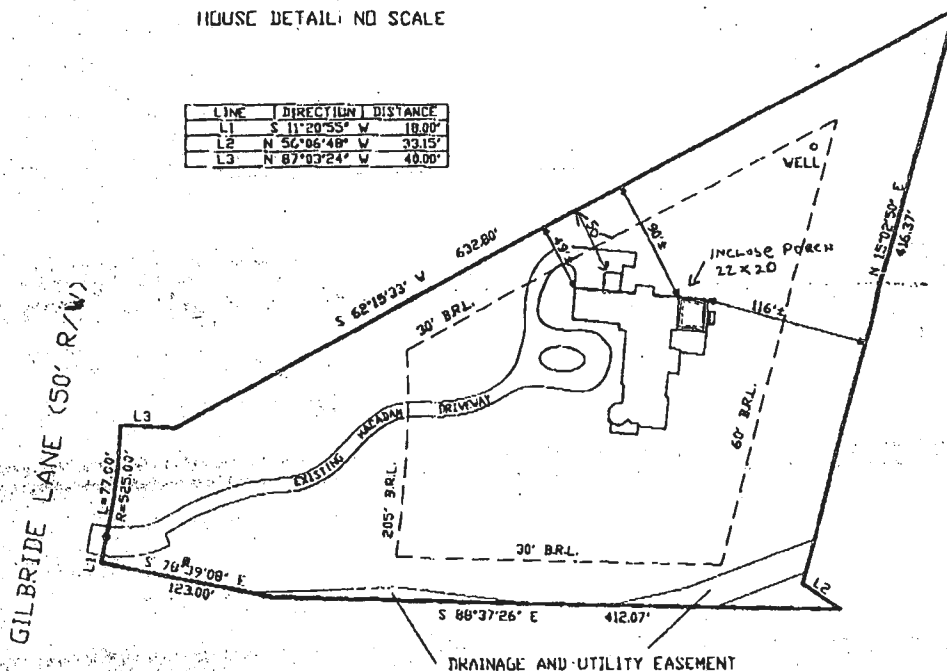
Filing fee	\$ _____
Permit fee	\$ <u>102</u>
Excise tax	\$ _____
Sub-total paid	\$ _____
Add'l permit fee	\$ _____
TOTAL FEES	\$ <u>102</u>
Balance due	\$ _____
Check	# <u>9270</u>
Validation	# <u>24670</u>

Accepted by [Signature]





LINE	DIRECTION	DISTANCE
L1	S 11°20'55" W	18.00'
L2	N 56°06'48" W	23.15'
L3	N 87°03'24" W	40.00'



*Arthur M. Botterill*

NOTES:

1. I CERTIFY THAT I HAVE LOCATED THE IMPROVEMENTS ON THE PARCEL AS SHOWN HEREON. THIS PLAT IS NOT INTENDED FOR USE IN ESTABLISHING PROPERTY LINES.
2. THIS PROPERTY IS LOCATED IN FLOOD ZONE "C" AS SHOWN ON COMMUNITY-PANEL NO. 240044-0026-B, DATED DEC. 4, 1986.
3. FIFTH ELECTION DISTRICT, HOWARD COUNTY, MARYLAND.

HOUSE LOCATION:

PREPARED BY: <b>ARTHUR M. BOTTERILL</b> 3601 DEWBERRY CIRCLE WESTMINSTER, MD. 21157 (410) 549-2124	Project Location:	LOT NO. 5 OF "HEDGEROW"		
	Scale: 1"=100'	Date: 6-7-90	REVISION DATE:	3/15/1993
	Tax Map: 28	Parcel: 59	Liber: 969	Folio: 210
	Computed By: AMB	Drawn By: CAD	REVISED BY:	VG
	Plat No.:	HOWARD COUNTY RECORD PLAT NO. 8933		

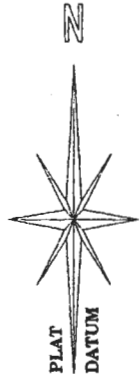
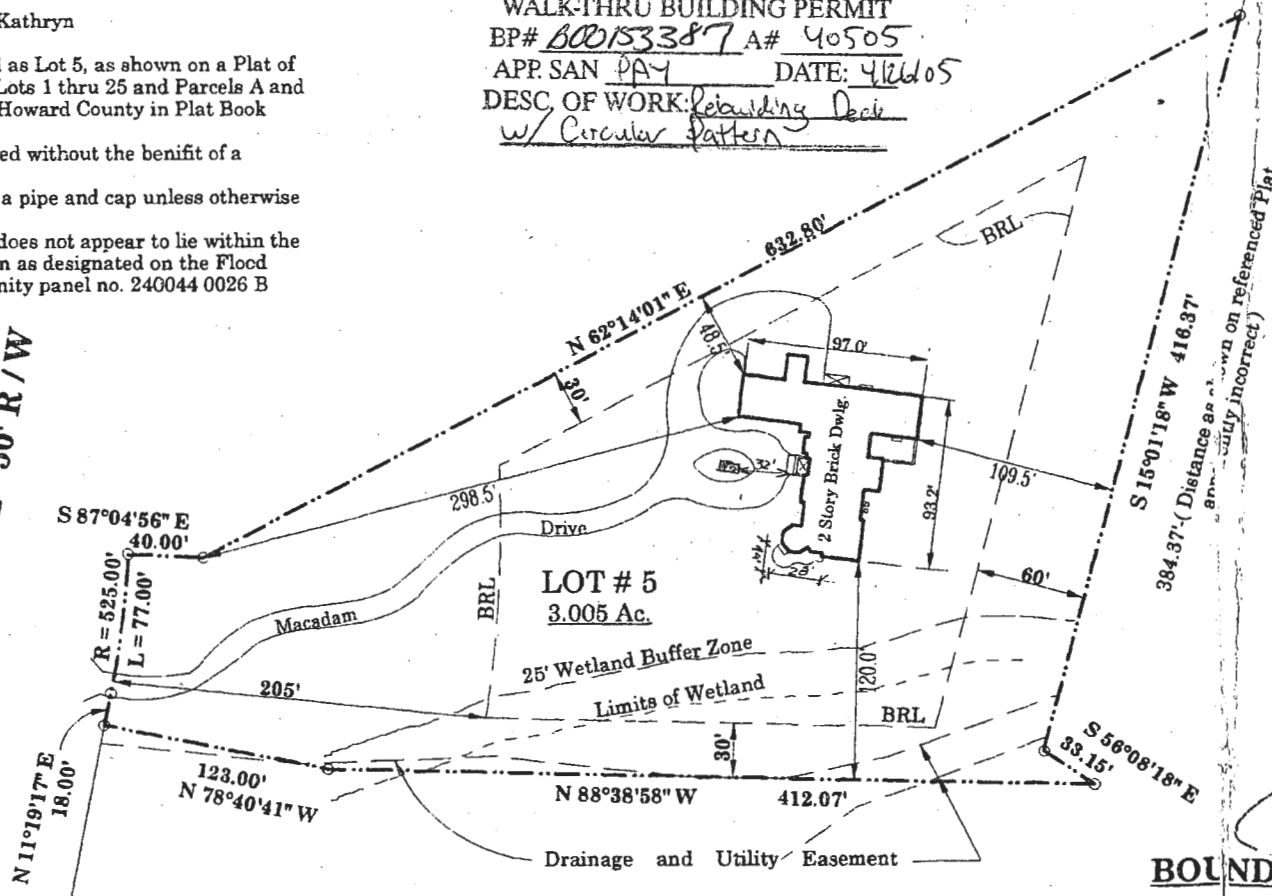
**GENERAL NOTES**

- Owners - Alascio, John A & Kathryn
- Deed Ref 2820 - 124
- Being known and designated as Lot 5, as shown on a Plat of HEDGEROW, Section One, Lots 1 thru 25 and Parcels A and B, which Plat is recorded in Howard County in Plat Book No. 8933.
- This survey has been prepared without the benefit of a Title Report
- All corners are marked with a pipe and cap unless otherwise noted.
- The property shown hereon does not appear to lie within the boundaries of any Flood Plain as designated on the Flood Insurance Rate Map community panel no. 240044 0026 B dated December 4, 1986.

**APPROVED**

WALK-THRU BUILDING PERMIT  
 BP# 600153387 A# 40505  
 APP SAN PAY DATE: 4/12/05  
 DESC. OF WORK: Rebuilding Deck  
w/ Circular Pattern

GILBRIDE LANE 50' R/W



**BOUNDARY SURVEY**

13650 GILBRIDE LANE

5th Election District Howard County, MD.  
 Scale 1" = 80' Date March 12, 1999

W. T. SADLER SURVEYORS  
 152 Westminster Pike  
 Reisterstown, MD. 21136  
 410-526-5618

C1 6548

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

COUNTY NUMBER 13 A40505

DATE RECEIVED

DATE WELL COMPLETED

DEPTH OF WELL

PERMIT NO. FROM "PERMIT TO DRILL WELL"

DATE RECEIVED MM DO YY

6/2/05

800

40-94-4193

OWNER: Wilhelm Donald, STREET OR RFD: 13650 Gilbride Lane, TOWN: Clarksville, SUBDIVISION: Hedgerow, SECTION: 1, LOT: 5

WELL LOG: Not required for driven wells

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

Table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Rows include Top Soil, Brown Shale, Brown Mica, Sand Stone, Gray Mica opening, Gray Mica.

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED: YES

CIRCLE APPROPRIATE LETTER: A, E, P

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...

DRILLERS LIC. NO. 1 MWD040, DRILLERS SIGNATURE: George J. Klabenky

LIC. NO. 1 JSD038, BRUCE THOMPSON

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

GROUTING RECORD: WELL HAS BEEN GROUTED (Y)

TYPE OF GROUTING MATERIAL (Circle one): CEMENT (CM), BENTONITE CLAY (BC). NO. OF BAGS: 28, NO. OF POUNDS: 2800. GALLONS OF WATER: 168. DEPTH OF GROUT SEAL: 55 ft.

CASING RECORD: casing types insert appropriate code below. MAIN CASING TYPE: Ho, Nominal diameter: 6, Total depth: 70.

OTHER CASING (if used): diameter, depth (feet)

SCREEN RECORD: screen type or open hole insert appropriate code below. STEEL (ST), BRASS (BR), OPEN HOLE (HO), PLASTIC (PL), OTHER (OT).

DEPTH (nearest ft.): 800

SLOT SIZE 1, 2, 3. DIAMETER OF SCREEN: 56, 60.

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

TELESCOPE CASING, LOG INDICATOR, OTHER DATA

C 3 PUMPING TEST

HOURS PUMPED (nearest hour): 5. PUMPING RATE (gal. per min.): 15. METHOD USED TO MEASURE PUMPING RATE: Bucket. WATER LEVEL (distance from land surface): BEFORE PUMPING: 17 ft., WHEN PUMPING: 102 ft.

TYPE OF PUMP USED (for test): S (submersible). OTHER (describe below):

PUMP INSTALLED: DRILLER INSTALLED PUMP: YES

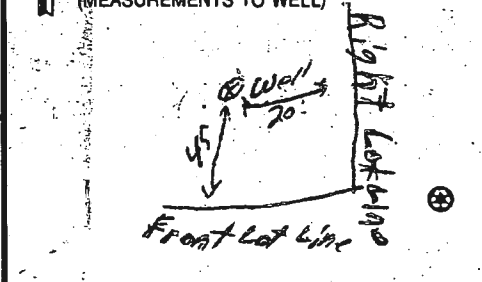
IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.

TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29. 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: 2 (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 (MEASUREMENTS TO WELL).



6-2-05

FIELD DATA SHEET  
 HYDROGEOLOGIC AREA (3) WELL YIELD TEST

Maryland Well Permit No. HO-94-4193 Election District \_\_\_\_\_  
 Location of Property (road) 13650 GILBYSIDE LANE  
 Subdivision Hedge row Lot 5 Block \_\_\_\_\_ Plat \_\_\_\_\_ Sec. \_\_\_\_\_  
 Well Driller PERSTEDAY Owner DW WILHELM  
 Depth of Well 800 10gpm  
 Distance of Measuring Point (M.P.) above ground 2 FT  
 Static Water Level (S.W.L.) below M.P. 17 FT

I. High Rate Pumping -- reservoir drawdown

Time pump started 9:40 Pumping rate 15 GPM  
 Total time 20 min to reach pumping water level 70 ft. below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes.

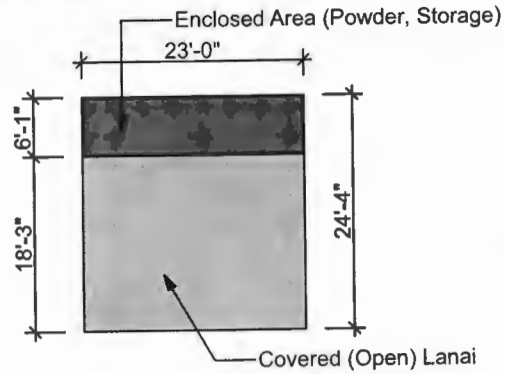
TIME	WATER LEVEL Below M.P.	PUMPING RATE Time to fill <u>ONE</u> gal. bucket	Pump SET <del>FROM WATER READING</del> <u>(if used)</u>	CALCULATED FLOW (gallons per min.)
9:00	70 FT	6 SEC	380 FT	10 GPM
9:15	70 FT	6 SEC		10 GPM
9:30	70 FT	6 SEC		10 GPM
9:45	70 FT	6 SEC		10 GPM
10:00	70 FT	6 SEC		10 GPM
10:15	70 FT	6 SEC		10 GPM
10:30	70 FT	6 SEC		10 GPM
10:45	70 FT	6 SEC		10 GPM
11:00	70 FT	6 SEC		10 GPM
11:15	71 FT	6 SEC		10 GPM
11:30	71 FT	6 SEC		10 GPM
11:45	71 FT	6 SEC		10 GPM
12:00	84 FT	4 SEC		15 GPM
12:15	88 FT	4 SEC		15 GPM
12:30	92 FT	4 SEC		15 GPM
12:45	94 FT	4 SEC		15 GPM
1:00	95 FT	4 SEC		15 GPM
1:15	96 FT	4 SEC		15 GPM
1:30	98 FT	4 SEC		15 GPM
1:45	99 FT	4 SEC		15 GPM
2:00	100 FT	4 SEC		15 GPM
2:15	101 FT	4 SEC		15 GPM
2:30	102	4 SEC		15 GPM

5-20-05  
 HO  
 PERSTEDAY

open  
 up to 15  
 GPM

# GENERAL NOTES

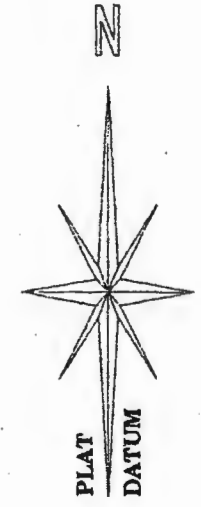
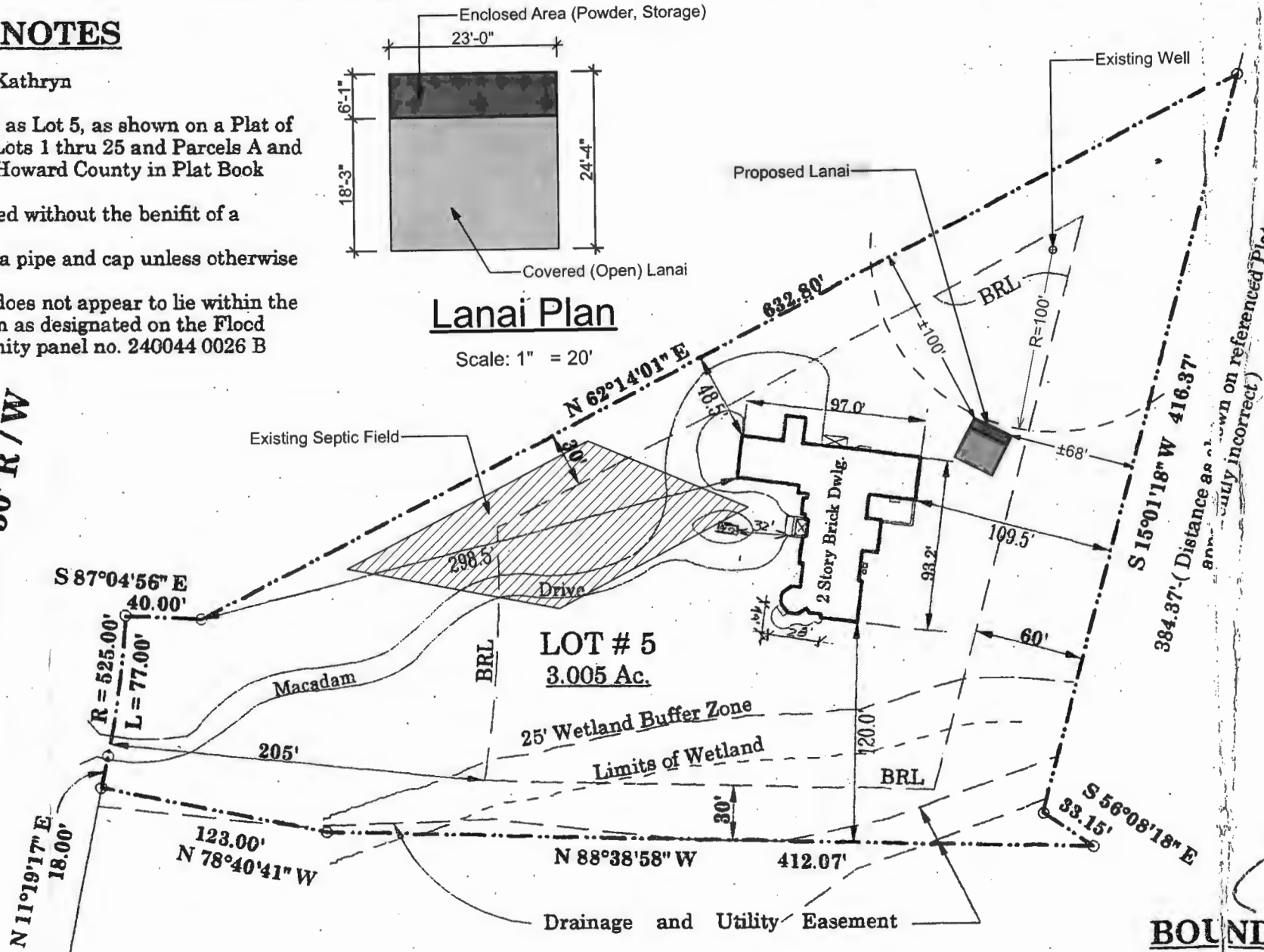
- Owners - Alascio, John A & Kathryn
- Deed Ref. 2820 - 124
- Being known and designated as Lot 5, as shown on a Plat of HEDGEROW, Section One, Lots 1 thru 25 and Parcels A and B, which Plat is recorded in Howard County in Plat Book No. 8933.
- This survey has been prepared without the benefit of a Title Report
- All corners are marked with a pipe and cap unless otherwise noted.
- The property shown hereon does not appear to lie within the boundaries of any Flood Plain as designated on the Flood Insurance Rate Map community panel no. 240044 0026 B dated December 4, 1986.



## Lanai Plan

Scale: 1" = 20'

GILBRIDE LANE 50' R / W



## BOUNDARY SURVEY

13650 GILBRIDE LANE

5th Electoral District Howard County, MD.  
Scale 1" = 80' Date March 12, 1999

**W. T. SADLER SURVEYORS**  
152 Westminster Pike  
Reisterstown, MD. 21136  
410-526-5618

B 1	1421	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please type <u>522425</u>	STATE PERMIT NUMBER <u>HO-94-4193</u> <small>fill in this form completely</small>
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**OWNER INFORMATION** 9961

Date Received (APA) 4/25/2005

WILHELM DONALD

15 Last Name WILHELM Owner First Name DONALD

36 Street or RFD 13650 GILBRIDE LANE

57 Town CLARSVILLE, MD 21029 70 State MD 72 Zip 21029 76

**LOCATION OF WELL**

B 3 Howard COUNTY Howard 21

Hedgerow 23 SUBDIVISION 42

SECTION 1 LOT 5

44 46 48 50

Dayton 52 NEAREST TOWN 71

MILES FROM TOWN (enter 0 if in town) 1 M 73 76 77 78

**DRILLER INFORMATION**

George F. Easterday M WD 040

Driller's Name 76 License No. 81

L. Franklin Easterday, Inc.

Firm Name

9265 Brown Church Rd., MT. Airy, Md. 21771

Address

George F. Easterday 4/21/05

Signature Date

B 4

1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

13650 Gilbride Lane 11 NEAR WHAT ROAD 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

NORTH N  
WEST W  
EAST E  
SOUTH S

34 45 37

DISTANCE FROM ROAD Ft. 38 39

ENTER FT OR MI

TAX MAP: 28 BLK: 20 PARCEL 30

**WELL INFORMATION**

1 2 APPROX. PUMPING RATE (GAL. PER MIN.) 5

8 12

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

14 20

**USE FOR WATER** (CIRCLE APPROPRIATE BOX)

DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION

FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)

22  INDUSTRIAL, COMMERCIAL, DEWATERING

PUBLIC WATER SUPPLY WELL

TEST, OBSERVATION, MONITORING

GEO-THERMAL

**NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL**

Howard (13) A40505

COUNTY NAME COUNTY NO.

STATE SIGNATURE \_\_\_\_\_ INSERT S \_\_\_\_\_

DATE ISSUED 5/19/2005 Brian Baker 5/12/2006

43 MM DD YY 48 CO SIGNATURE EXP DATE

NORTH GRID 506 0 0 0 EAST GRID 803 0 0 0

50 55 57 63

APPROXIMATE DEPTH OF WELL 300 FEET

24 28

APPROXIMATE DIAMETER OF WELL 6 INCH

NEAREST

**METHOD OF DRILLING** (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN

30  AIR-ROTARY  AIR-PERCussion  ROTARY (Hydraulic Rotary)

37  CABLE  REVerse-ROTary  DRive-POINT

other \_\_\_\_\_

**REPLACEMENT OR DEEPEENED WELLS** (CIRCLE APPROPRIATE BOX)

THIS WELL WILL NOT REPLACE AN EXISTING WELL

THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED

39  THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS

THIS WELL WILL DEEPEEN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEENED (IF AVAILABLE) 41 \_\_\_\_\_ 52

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

1. wells

2.

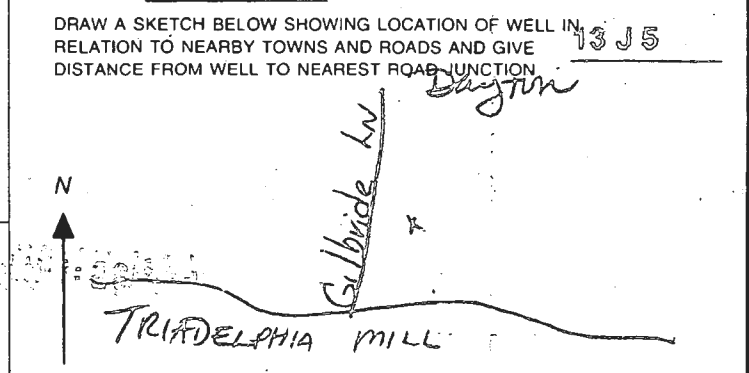
3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E 803

N 506

000 000



**Not to be filled in by driller (MDE OR COUNTY USE ONLY)**

APPROP. PERMIT NUMBER \_\_\_\_\_ G \_\_\_\_\_

PERMIT No. HO-94-4193

70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE THIS SHEET IF NEEDED

Well Casing Must Extend at Least 2' Above Grade

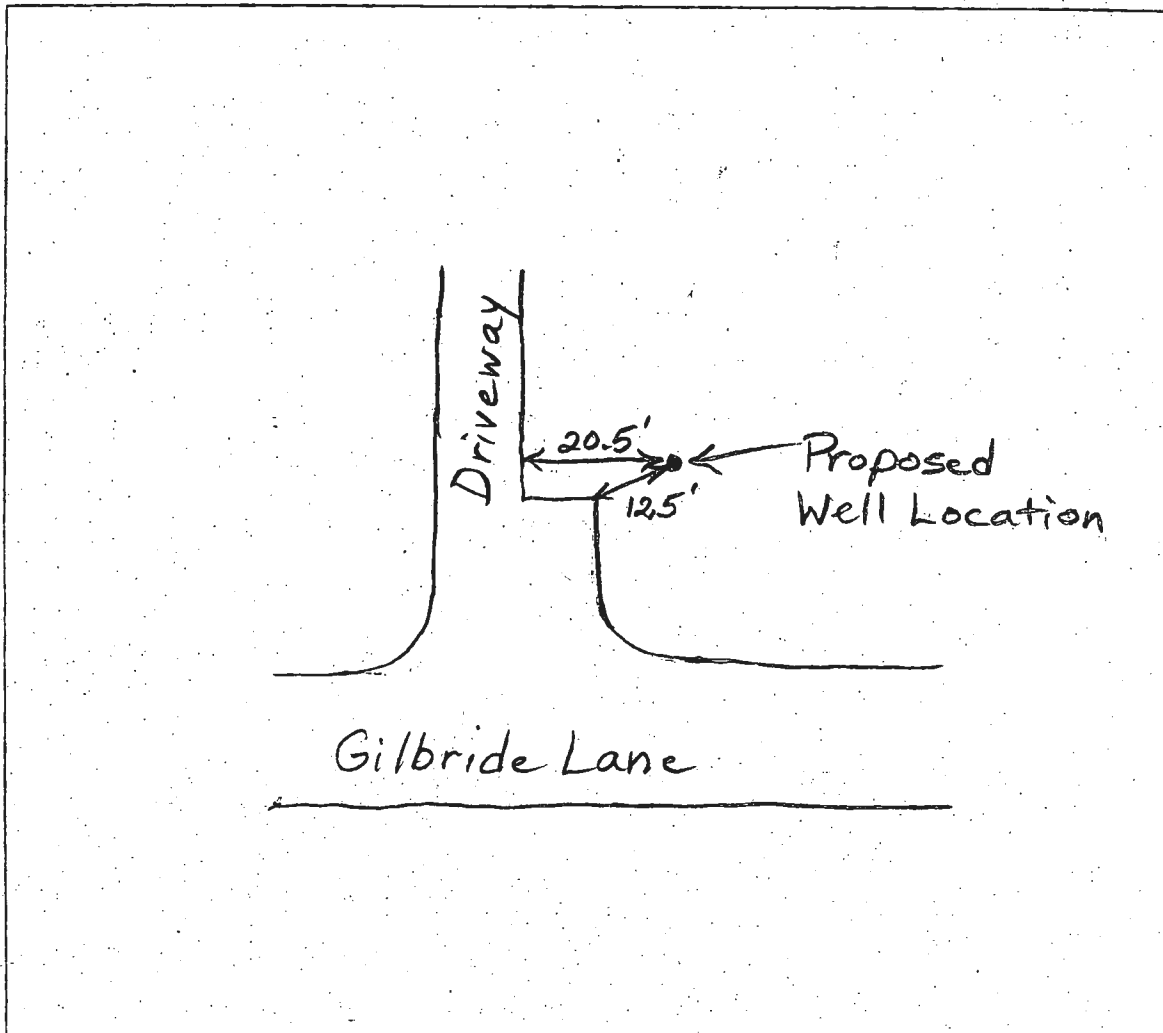
Well Must Be At Least 10' From Property Line

DENV-Permit 97

SITE INSPECTION SHEET

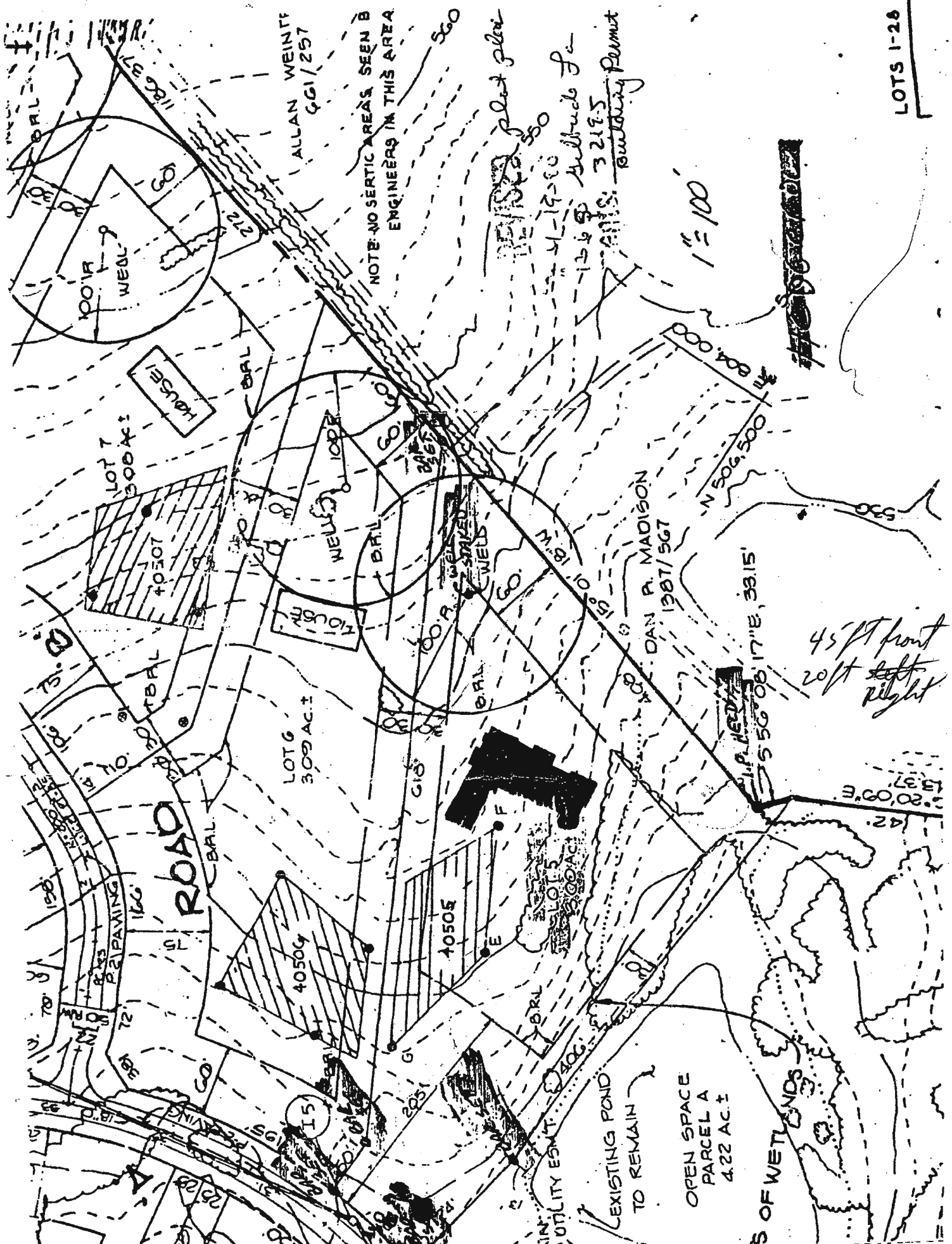
OWNER: Donald Wilhelm PHONE #: \_\_\_\_\_  
ADDRESS: 13650 Gilbride Lane CONTRACTOR: \_\_\_\_\_  
WELL TAG #: \_\_\_\_\_  
SUBDIVISION: Hedgerow LOT: 5 COUNTY #: \_\_\_\_\_  
PROPOSAL: \_\_\_\_\_

LOCATION DIAGRAM



COMMENTS: 4/8/05 Homeowner wants to have an irrigation well drilled at the above site. Homeowner says well is 20+' from property line. Casing must be 2+' above grade. Site is in floodplain. (BB)

DATE: \_\_\_\_\_ INSPECTOR: \_\_\_\_\_



ALLAN WEINTE  
GGI/257

NOTE: NO SEPTIC AREAS SEEN BY  
ENGINEERS IN THIS AREA

REDA plot plan  
1-14-80  
1-15-80  
32185  
Building Permit

1" = 100'

45 ft front  
20 ft left  
right

LOTS 1-26

DAN R. MADISON  
1987/SGT

N 50° 50' 00" W, 500.00'

S 56° 08' 17" E, 33.15'

20' 09" E

42'

1337'

1337'

1337'

1337'

1337'

1337'

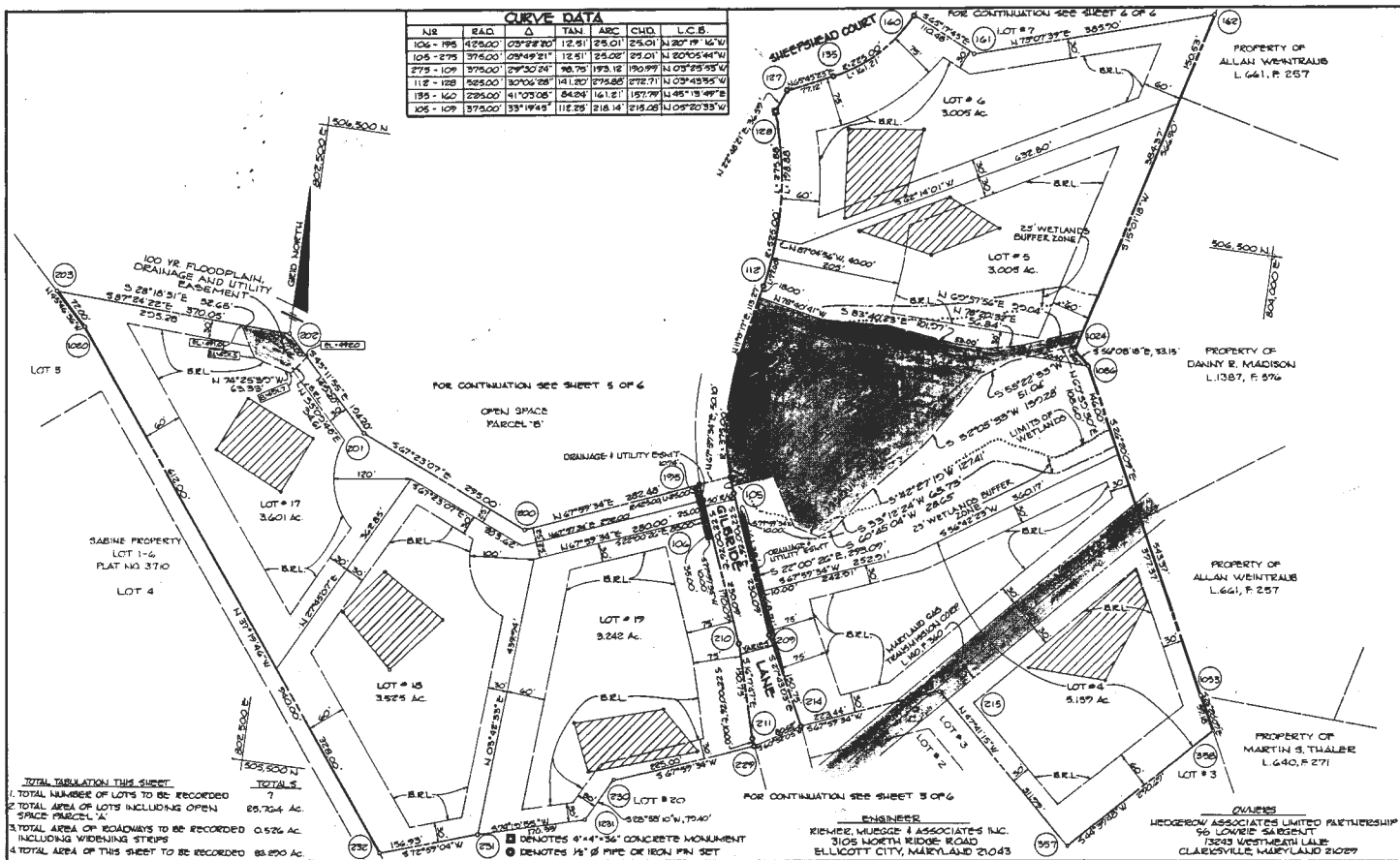
1337'

1337'

1337'

1337'

NR	RAD	Δ	TAN	ABC	CHD	L.C.B.
106-195	425.00	03°22'20"	12.91	25.01	25.01	N 120° 19' 10" W
105-275	375.00	09°49'21"	12.51	25.00	25.01	N 02°05'44" W
275-107	375.00	08°32'24"	10.75	193.12	193.99	N 02°58'28" W
112-128	325.00	30°02'28"	141.20	275.88	272.71	N 03°43'55" W
195-120	225.00	41°03'08"	64.28	161.12	157.99	N 45°19'49" E
105-109	375.00	33°19'45"	112.25	215.14	215.08	N 05°20'33" W



APPROVED FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS  
HOWARD COUNTY HEALTH DEPARTMENT

*John Baker* 10-3-89  
HOWARD COUNTY HEALTH OFFICER MZ DATE

APPROVED HOWARD COUNTY DEPARTMENT OF PLANNING AND ZONING

*Cheryl* 10-24-89  
DIRECTOR DATE

APPROVED FOR STORM DRAINAGE SYSTEMS AND PUBLIC ROADS  
HOWARD COUNTY DEPARTMENT OF PUBLIC WORKS

*James G. ...* 10/20/89  
DIRECTOR DATE

**SURVEYOR'S CERTIFICATE**

I HEREBY CERTIFY THAT TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF THAT THE FINAL PLAN SHOWN HEREON IS CORRECT. THAT IT IS A SUBDIVISION OF ALL THE LANDS CONVEYED BY MARTIN S. THALER TO HEDGEROW ASSOCIATES LIMITED PARTNERSHIP BY DEED DATED NOVEMBER 21, 1988 AND RECORDED IN THE LAND RECORDS OF HOWARD COUNTY IN LIBER 1920, FOLIO 881 AND BY MARTIN S. THALER TO HEDGEROW ASSOCIATES LIMITED PARTNERSHIP BY DEED DATED NOVEMBER 21, 1988 AND RECORDED IN THE LAND RECORDS OF HOWARD COUNTY IN LIBER 1920, FOLIO 885, AND THAT ALL MONUMENTS ARE IN PLACE OR WILL BE IN PLACE PRIOR TO THE ACCEPTANCE OF THE STREETS IN THE SUBDIVISION BY HOWARD COUNTY AS SHOWN IN ACCORDANCE WITH THE ANNOTATED CODE OF MARYLAND AS AMENDED.

⑧ DENOTES 4" x 4" x 36" CONCRETE MONUMENT  
⑨ DENOTES 1/2" Ø PIPE OR IRON PIN SET

*Michael ...*  
REGISTERED LAND SURVEYOR

12/13/88  
DATE

**OWNER'S CERTIFICATE**

WE, HEDGEROW ASSOCIATES LIMITED PARTNERSHIP, LOWRIE SARGENT, GENERAL PARTNER, OWNERS OF THE PROPERTY SHOWN AND DESCRIBED HEREON, HEREBY ADOPT THE PLAN OF SUBDIVISION AND IN CONSIDERATION OF THE APPROVAL OF THIS FINAL PLAN BY THE DEPARTMENT OF PLANNING AND ZONING, ESTABLISH THE MINIMUM BUILDING RESTRICTION LINES AND GRANT UNTO HOWARD COUNTY, MARYLAND, ITS SUCCESSORS AND ASSIGNS, (1) THE RIGHT TO LAY, CONSTRUCT AND MAINTAIN SEWERS, DRAINS, WATER PIPES AND OTHER MUNICIPAL UTILITIES AND SERVICES, IN AND UNDER ALL ROADS AND STREET RIGHT OF WAYS AND THE SPECIFIC EASEMENT AREAS SHOWN HEREON; (2) THE RIGHT TO REQUIRE DEDICATION FOR PUBLIC USE THE BEDS OF THE STREETS AND/OR ROADS AND FLOODPLAINS AND OPEN SPACE WHERE APPLICABLE, AND FOR GOOD AND OTHER VALUABLE CONSIDERATION, HEREBY GRANT THE RIGHT AND OPTION TO HOWARD COUNTY TO ACQUIRE THE FEE SIMPLE TITLE TO THE BEDS OF THE STREETS AND/OR ROADS AND FLOODPLAINS, STORM DRAINAGE FACILITIES AND OPEN SPACE WHERE APPLICABLE; (3) THE RIGHT TO REQUIRE DEDICATION OF WATERWAYS AND DRAINAGE EASEMENTS FOR THE SPECIFIC PURPOSE OF THEIR CONSTRUCTION, REPAIR AND MAINTENANCE; AND (4) THAT NO BUILDING OR SIMILAR STRUCTURE OF ANY KIND SHALL BE ERRECTED ON, OR OVER THE SAID EASEMENTS AND RIGHT OF WAYS.

WITNESS BY MY/OUR HANDS THIS 29 DAY OF August, 1989.

*Lowrie Sargent, General Partner*  
LOWRIE SARGENT, GENERAL PARTNER

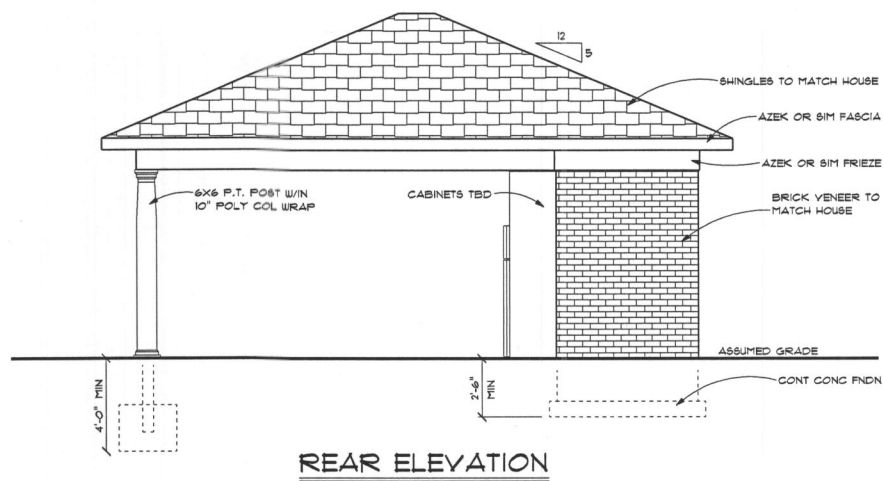
RECORDED AS PLAT NUMBER **8135**

ON **10-24-89** AMONG THE  
LAND RECORDS OF HOWARD COUNTY, MARYLAND.

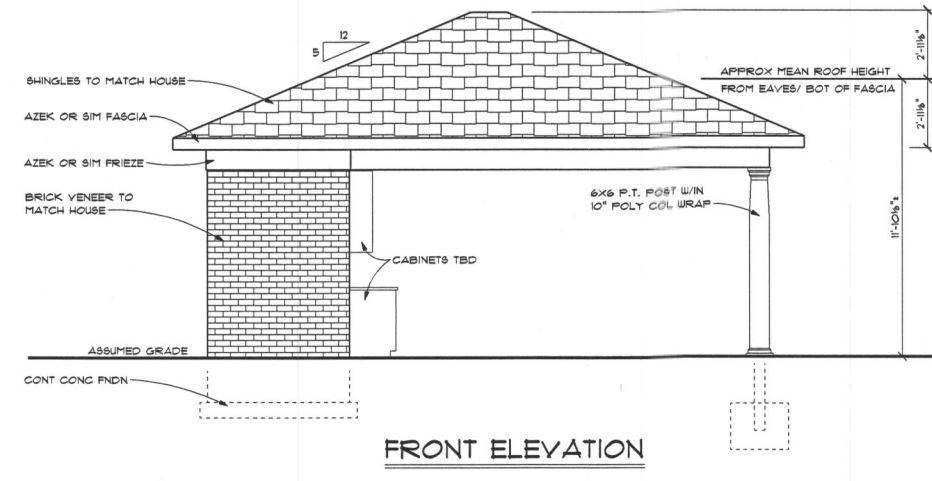
**HEDGEROW SECTION ONE**  
LOTS 1 THRU 28 AND PARCELS A AND B

8-88-47 P-88-74 WP-88-88  
TAX MAP NO. 28 & 34, PARCELS 805488P & 805489P EXISTING ZONING - R  
8TH ELECTION DISTRICT, HOWARD COUNTY, MARYLAND  
SCALE: 1" = 100' SHEET 4 OF 6 DATE: 8-29-89

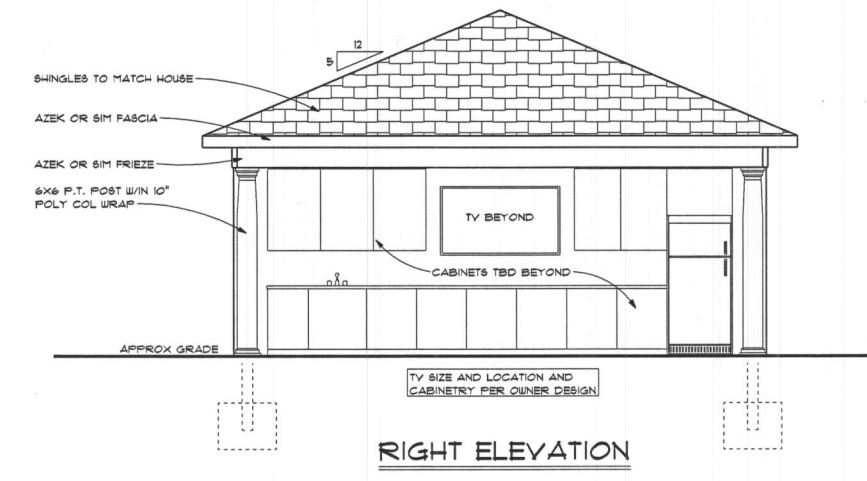




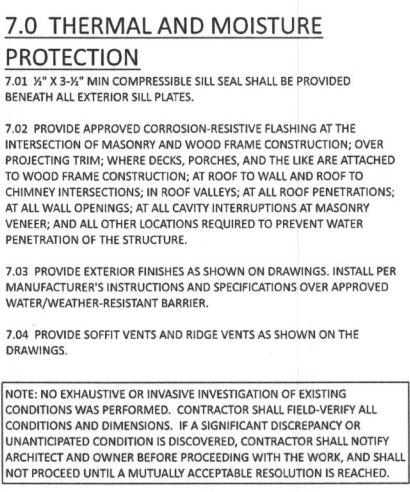
REAR ELEVATION



FRONT ELEVATION



RIGHT ELEVATION



LEFT ELEVATION

**2021 IRC NOTES**

**1.0 GENERAL**

1.01 THE BUILDER SHALL BE RESPONSIBLE AND LIABLE FOR FULL COMPLIANCE WITH ALL APPLICABLE BUILDING CODES, ORDINANCES, REGULATIONS AND AMENDMENTS, AND ALL OTHER AUTHORITIES HAVING JURISDICTION, WHETHER OR NOT SUCH CODES AND REQUIREMENTS ARE EXPLICITLY DOCUMENTED IN THESE DRAWINGS. CONSTRUCTION SHALL COMPLY WITH THE INTERPRETATIONS OF THE LOCAL BUILDING OFFICIAL. IF THE INTERPRETATION OF THE LOCAL BUILDING OFFICIAL IS AT VARIANCE WITH THESE PLANS OR SPECIFICATIONS, THE MORE STRINGENT SHALL APPLY. USE OF THESE DRAWINGS TO OBTAIN A BUILDING PERMIT OR TO CONSTRUCT THE STRUCTURE DOCUMENTED HEREIN SHALL CONSTITUTE ACCEPTANCE OF THESE CONDITIONS BY THE BUILDER.

1.02 IN THE EVENT OF A DISCREPANCY BETWEEN THE ARCHITECTURAL PLANS OR SPECIFICATIONS AND THE STRUCTURAL DRAWINGS, THE STRUCTURAL DRAWINGS SHALL TAKE PRECEDENCE.

**1.03 DESIGN LOADS:**

TYPE	LIVE LOAD (PSF)	DEAD LOAD (PSF)
ROOF	40	15
SLEEPING ROOMS	30	10
OTHER LIVING AREAS	40	15
GARAGE FLOORS	50	50
DECKS	40	10
EXTERIOR BALCONIES	40	10

**2.0 SITE WORK**

2.01 SITE WORK IS NOT ADDRESSED IN THESE DOCUMENTS. 2000 PSF SOIL BEARING CAPACITY ASSUMED.

**3.0 CONCRETE/FOUNDATIONS**

3.01 ALL REINFORCED CONCRETE WORK SHALL BE IN ACCORDANCE WITH THE AMERICAN CONCRETE INSTITUTE ACI 318, CURRENT EDITION. ALL PLAIN CONCRETE SHALL CONFORM TO ACI 318.1 AND ACI 332R GUIDE TO RESIDENTIAL CAST-IN-PLACE CONCRETE CONSTRUCTION.

**3.02 MINIMUM SPECIFIED COMPRESSIVE STRENGTH @ 28 DAYS:**

LOCATION OF CONCRETE	F <sub>c</sub> (PSI)
BASEMENT WALLS AND FOUNDATIONS NOT EXPOSED TO WEATHER	2500
BASEMENT SLABS AND INTERIOR SLABS ON GRADE	2500
BASEMENT WALLS, EXTERIOR FOUNDATION WALLS AND OTHER WORK EXPOSED TO WEATHER	3000
DRIVEWAYS, CURBS, WALKS, PATIOS, PORCHES, STEPS/STAIRS AND UNHEATED GARAGE SLABS EXPOSED TO WEATHER	3500

**4.0 MASONRY**

4.01 ALL MASONRY WORK SHALL CONFORM TO THE APPLICABLE REQUIREMENTS OF THE BIA AND NCM "SPECIFICATION FOR CONCRETE MASONRY CONSTRUCTION."

4.02 BRICK VENEER WALLS SHALL HAVE NON-CORROSIVE METAL TIES AT MINIMUM 16" O.C. VERTICALLY AND HORIZONTALLY, AND WEEP HOLES AT 24" O.C. AT BASE FLASHING AND CAVITY INTERRUPTIONS.

**5.0 METALS**

5.01 FOUNDATION ANCHOR BOLTS SHALL BE PROVIDED AT MAXIMUM 6'-0" O.C. AND 12" FROM THE END OF EACH PLATE SECTION, WITH MINIMUM TWO (2) ANCHORS PER SECTION OF PLATE. ANCHOR STRAPS SPACED TO ACHIEVE EQUIVALENT CAPACITY MAY BE SUBSTITUTED FOR ANCHOR BOLTS.

5.02 ALL METAL ANCHORS, FASTENERS, HANGERS ETC. SHALL BE GALVANIZED. ALL STRUCTURAL STEEL WIDE-FLANGE BEAMS SHALL CONFORM TO ASTM A-992 WITH MINIMUM STRENGTH F<sub>y</sub> = 50 KSI. ALL STRUCTURAL STEEL CHANNELS, ANGLES, RODS AND BAR STOCK SHALL CONFORM TO ASTM A-36 WITH MINIMUM STRENGTH F<sub>y</sub> = 36 KSI.

5.03 ADJUSTABLE STEEL COLUMNS SHALL BE MINIMUM 11 GAUGE, ASTM A513 OR BETTER, AND SHALL MEET OR EXCEED AISA PUBLISHED ALLOWABLE LOAD CAPACITY. STEEL PIPE COLUMNS SHALL CONFORM TO ASTM A53 GRADE B WITH MINIMUM STRENGTH F<sub>y</sub> = 35 KSI. COLUMNS SHALL HAVE A MINIMUM 8"x4"x1/4" BEARING PLATE. SCREW JACK SHALL BE ENCASED IN CONCRETE OR TACK WELDED AFTER INSTALLATION.

**6.0 WOOD**

6.01 SILL PLATES AND ALL WOOD IN CONTACT WITH MASONRY OR CONCRETE, AND ALL EXPOSED EXTERIOR LUMBER, SHALL BE PRESSURE TREATED TO MEET AWPI STANDARDS.

6.02 MOISTURE CONTENT OF ALL LUMBER SHALL NOT EXCEED 19%.

6.03 WOOD BEAMS, JOISTS, HEADERS AND RAFTERS SHALL BE MINIMUM S-P-F #1/#2 OR EQUAL UNLESS OTHERWISE NOTED.

6.04 LVL MEMBERS SHALL BE 1-3/4" WIDE, DEPTH PER PLANS, GANGED PER MANUFACTURER'S SPECIFICATIONS, WITH THE FOLLOWING MINIMUM PROPERTIES: F<sub>b</sub>=2,600 PSI; F<sub>c</sub>⊥ = 750 PSI; F<sub>c</sub> // = 2,510 PSI; F<sub>v</sub>=285 PSI; E=2,000,000 PSI.

6.05 PRE-ENGINEERED TRUSSES SHALL BE DESIGNED AND FABRICATED IN ACCORDANCE WITH TPI RECOMMENDATIONS TO CARRY ALL IMPOSED LIVE AND DEAD LOADS. THE MANUFACTURER SHALL SUPPLY ALL REQUIRED HANGERS, HOLD-DOWN STRIPS, SHEAR PANELS AND OTHER REQUIRED COMPONENTS. THE MANUFACTURER SHALL ALSO PROVIDE ALL DRAWINGS REQUIRED FOR PERMIT AND ERECTION PURPOSES, SIGNED AND SEALED IF REQUIRED BY A PROFESSIONAL ENGINEER REGISTERED IN THE STATE WHERE THE JOB IS TO BE BUILT.

**7.0 THERMAL AND MOISTURE PROTECTION**

7.01 1/4" X 3-1/2" MIN COMPRESSIBLE SILL SEAL SHALL BE PROVIDED BENEATH ALL EXTERIOR SILL PLATES.

7.02 PROVIDE APPROVED CORROSION-RESISTIVE FLASHING AT THE INTERSECTION OF MASONRY AND WOOD FRAME CONSTRUCTION; OVER PROJECTING TRIM; WHERE DECKS, PORCHES, AND THE LIKE ARE ATTACHED TO WOOD FRAME CONSTRUCTION; AT ROOF TO WALL AND ROOF TO CHIMNEY INTERSECTIONS; IN ROOF VALLEYS; AT ALL ROOF PENETRATIONS; AT ALL WALL OPENINGS; AT ALL CAVITY INTERRUPTIONS AT MASONRY VENEER; AND ALL OTHER LOCATIONS REQUIRED TO PREVENT WATER PENETRATION OF THE STRUCTURE.

7.03 PROVIDE EXTERIOR FINISHES AS SHOWN ON DRAWINGS. INSTALL PER MANUFACTURER'S INSTRUCTIONS AND SPECIFICATIONS OVER APPROVED WATER/WEATHER-RESISTANT BARRIER.

7.04 PROVIDE SOFFIT VENTS AND RIDGE VENTS AS SHOWN ON THE DRAWINGS.

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.

**GENERAL CONSTRUCTION NOTES**

1. THE CONTRACTOR SHALL SECURE ALL NECESSARY PERMITS. CONSTRUCTION SHALL BE IN FULL ACCORDANCE WITH ALL LOCAL CODES AND REGULATIONS IN EFFECT AT THE TIME OF PERMIT ISSUANCE.

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, INCLUDING THE HOMEOWNER, HIS FAMILY, AND OTHERS WHO MAY BE ON THE PREMISES FROM TIME TO TIME; ALL THE WORK AND ALL MATERIALS AND EQUIPMENT TO BE INCORPORATED THEREIN; AND OTHER PROPERTY AT THE SITE OR ADJACENT THERETO, INCLUDING THE EXISTING RESIDENCE, DRIVEWAYS, LEAD WALKS, OR OTHER STRUCTURES.

3. ANY DAMAGE OR LOSS TO ANY PROPERTY REFERENCED IN ITEM #2 CAUSED IN WHOLE OR IN PART BY THE CONTRACTOR, ANY OF HIS SUBCONTRACTORS, OR BY ANYONE DIRECTLY OR INDIRECTLY EMPLOYED BY ANY OF THEM SHALL BE REMEDIED BY THE CONTRACTOR.

4. IF, WITHIN ONE YEAR AFTER THE WORK HAS BEEN ACCEPTED BY THE OWNER, ANY OF THE WORK IS FOUND TO BE DEFECTIVE OR NOT IN CONFORMANCE WITH THE CONTRACT DOCUMENTS, THE CONTRACTOR SHALL CORRECT IT PROMPTLY UPON RECEIPT OF WRITTEN NOTICE BY THE OWNER TO DO SO, AND SHALL BEAR ALL COSTS FOR SUCH CORRECTION, UNLESS THE OWNER HAS PREVIOUSLY PROVIDED THE CONTRACTOR WRITTEN NOTICE OF ACCEPTANCE OF SUCH CONDITION.

5. ALL PROJECT DEBRIS SHALL BE DISPOSED OF OFF THE SITE BY THE CONTRACTOR.

6. THE CONTRACTOR SHALL PROPERLY EXTEND, TERMINATE, UPGRADE, OR OTHERWISE MODIFY EXISTING UTILITIES, INCLUDING, BUT NOT LIMITED TO, MECHANICAL, ELECTRICAL AND PLUMBING INSTALLATIONS, AS MAY BE REQUIRED.

7. COLORS, MATERIALS AND FINISH DETAILS OF NEW CONSTRUCTION SHALL MATCH EXISTING AS CLOSELY AS POSSIBLE, UNLESS OTHERWISE SPECIFIED. FEATHER OR TOOTH IN NEW FINISHES TO EXISTING, WHERE APPLICABLE, TO MINIMIZE APPEARANCE OF JOINTS.

8. 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.

9. PROVIDE ACCESS PANELS AS REQUIRED AT ALL VALVES, CLEANOUTS, UTILITY PANELS, CABLE HOME RUNS, AND ALL OTHER LOCATIONS THAT READY ACCESS MAY BE REQUIRED.

PROPOSED LANA FOR THE  
**DEVINE RESIDENCE**  
13650 GILBRIDE LANE, CLARKSVILLE, OWARD COUNTY, MD

SCALE: 1/4" = 1'-0"  
OR AS NOTED

NO.	REVISIONS

DATE: 10-19-2023

SHEET NO.

**A-1**