

Dana Bernard met & said  
their system was  
adequate

BA5000865

5 live-in staff

→ only 1 live-in staff

→ 8 residents

→ 4 doubles: ... went to  
8 singles

• 1

950 <sup>GPD</sup> → 144 ft  
trench

OK

2019 → 2001\*

↓  
officially licensed

\* need to add

↓  
only approval  
for 5 clients by HO

a 1500 GAL or BAT  
tank

Record Detail \* (This section is required.)

|   |                                   |                                  |
|---|-----------------------------------|----------------------------------|
| <b>Permit Type</b><br>Building/Residential/Alteration/SFD   | <b>Permit Number</b><br>B25000865 | <b>Opened Date</b><br>03/07/2025 |
| <b>Description of Work</b><br>UNPERMITTED WORK/ SFD/ ALTERATIONS TO BASEMENT DONE TO INCLUDE: CREATING 4 NEW BEDROOMS AND A DINING ROOM |                                   |                                  |

Need an "OSDS" plan that shows where an additional 1500 GAL septic tank can be installed.  
J&B 8/12/25

Need an OSDS plan, possible more perc testing if upgrade cannot fit in existing SPA.

J&B 5/19/25

[check spelling](#)

Address \* (This section is required.)

Search Reset Clear Get Parcel & Owner

|                              |                                 |                                  |
|------------------------------|---------------------------------|----------------------------------|
| <b>Street #</b><br>600       | <b>Street Name</b><br>GAITHER   | <b>Street Type</b><br>RD         |
| <b>Unit Type</b><br>-Select- | <b>Unit #</b>                   | <b>X Coordinate</b><br>-76.99298 |
| <b>City</b><br>SYKESVILLE    | <b>State</b><br>MD              | <b>Zip Code</b><br>21784         |
|                              | <b>Y Coordinate</b><br>39.35384 | <b>Primary</b><br>Yes            |

Parcel \* (This section is required.)

Search Reset Clear Get Address & Owner

| GIS ID *   | Parcel | Parcel Area | Land Value | Improved Value | Exemption Value | Plan Area |
|--|--------|-------------|------------|----------------|-----------------|-----------|
| 830210   | 110    | 3.51        | 223800     | 623900         | 439700          | RURAL     |
| <b>Legal Description</b><br>LOT 2 3.513 A [ ]600 GAITHER RD [ ]GAITHERS SIDELING S 4 |        |             |            |                |                 |           |

[check spelling](#)

| Block  | Lot | Census Tract                      | Council Dist  | Inspection Dist       | Supervisor Dist | Map # | DAP Zone |
|--|-----|-----------------------------------|---|-----------------------|-----------------|-------|----------|
|  | 2   | 605601                            | 5   |                       |                 |       |          |
| <b>Plan Area</b>   |     | <b>State Tax Id</b><br>1404347129 | <b>Subdivision Name</b>   |                       |                 |       |          |
| <b>Section</b>   |     | <b>Area</b>                       | <b>Tax Map</b><br>4   |                       |                 |       |          |
| <b>Grid</b><br>4-19  |     | <b>Zoning District</b><br>RC-DEO  | <b>ADC Map</b><br>4693-B4   |                       |                 |       |          |
| <b>SDP No.</b>   |     | <b>Final Plan No.</b>             | <b>WP File No.</b>  |                       |                 |       |          |
| <b>Record Plat No.</b><br>7802   |     | <b>WS Contract No.</b>            | <b>FDP No.</b>  | <b>Primary</b><br>Yes |                 |       |          |
| <b>Owner Occupied</b><br><input type="radio"/> Yes <input checked="" type="radio"/> No |     | <b>Year Built</b><br>1988         | <b>Historic District</b><br><input type="radio"/> Yes <input checked="" type="radio"/> No |                       |                 |       |          |
| <b>Historic District Registry No.</b>  |     | <b>Stat Area</b><br>4-03          | <b>Flood Plain</b><br><input type="radio"/> Yes <input checked="" type="radio"/> No       |                       |                 |       |          |
| <b>Building No</b>   |     |                                   |   |                       |                 |       |          |

Owner (This section is not required.)

Search Reset Clear

**Name \***  
COBAL

**Address Line 1**  
613 SIDELING CT

**Address Line 2**

**Address Line 3**

**Mail City**  
SYKESVILLE

**Mail State**  
MD

**Mail Zip Code**  
21784

**Phone**  
410-926-0419

**Primary**  
Yes

**E-mail**

Cell Number

Fax Number

Professionals (This section is not required.)

License # \* 155458  
 License Type \* MHIC Ind  
 Primary Yes

Business Name GOLDEN STAR IMPROVEMENTS LLC

First Name CARLOS Middle Name Last Name PINEDA

Address Line 1 4332 6TH ST  
 Address Line 2

City BROOKLYN PARK State MD ZIP Code 21225

Phone 1 3014089349 Phone 2 Fax

E-mail

Applicant (This section is not required.)

Search As Owner As Lic. Prof As Contact

Type \* Applicant

Relationship Agent for Applicant

Primary No

First Name CARLOS MI Last Name PINEDA

Full Name CARLOS PINEDA

Organization Name GOLDEN STAR IMPROVEMENTS LLC

Street Address 4332 6TH ST  
 Address Line 2

City BROOKLYN PARK State MD Zip Code 21225

Phone 3014089349 Cell Fax

E-mail \* goldenstarlc874@gmail.com

Contact (This section is not required.)

Search As Owner As Lic. Prof As Contact

Type Contact

Relationship Licensed Professional

Primary Yes

First Name CARLOS MI Last Name PINEDA

Full Name CARLOS PINEDA

Organization Name GOLDEN STAR IMPROVEMENTS LLC

Street Address 4332 6TH ST  
 Address Line 2

City BROOKLYN PARK State MD Zip Code 21225

Phone 3014089349 Cell Fax

E-mail goldenstarlc874@gmail.com

Addtl Info

Est Construction Cost \* 10000

Housing Units \* 0

Number of Buildings \* 0

Public Owned No

Construction Type -Select-

RESIDENTIAL ALTERATION INFO

RESIDENTIAL ALTERATION INFORMATION

Total Square Footage \* 3200

No of Stories \* 3

Basement (Number) Unfinished

Bedrooms 3

Full Baths (Number) 3

Half Baths (Number) 1

Water \* (Number) Private

Sewage \* Private

## Williams, Jeffrey

---

**From:** Williams, Jeffrey  
**Sent:** Monday, November 10, 2025 7:58 AM  
**To:** 'Alvin Thomas'  
**Cc:** Robbins, Holley; Dianne Thomas-Banda; Silvast, Zackary; goldenstarllc874@gmail.com; Eric Thomas; Chris Shematek; New Life  
**Subject:** RE: Building Permit B25000865

Thanks. Based on this information, I approved the building permit for a maximum of 8 residents plus one caretaker apartment for a design wastewater flow of 950 gallons per day. This is the maximum that the existing sewage disposal system can accommodate. Any future proposed additions to capacity or structure will require upgrade or replacement system and possibly additional perc testing to expand the disposal area. Thanks

Jeff Williams  
Deputy Director  
Bureau of Environmental Health  
Howard County Health Dept.  
8930 Stanford Blvd. Columbia, MD 21045  
410-313-4261  
[www.hchealth.org](http://www.hchealth.org)

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---

**From:** Alvin Thomas <athomas@newlifeassistedliving.com>  
**Sent:** Thursday, November 6, 2025 6:14 PM  
**To:** Williams, Jeffrey <jewilliams@howardcountymd.gov>  
**Cc:** Robbins, Holley <hrobbins@howardcountymd.gov>; Dianne Thomas-Banda <dthomasbanda@newlifeassistedliving.com>; Silvast, Zackary <zsilvast@howardcountymd.gov>; goldenstarllc874@gmail.com; Eric Thomas <ethomas@newlifeassistedliving.com>; Chris Shematek <cpsshematek@yahoo.com>; New Life <info@newlifeassistedliving.com>  
**Subject:** Re: Building Permit B25000865

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Thanks for that explanation. We are licensed for 8 residents and just renewing our license for the same number.

Best regards

Alvin Thomas

President  
New Life Assisted Living  
410-926-0419  
[www.newlifeassistedliving.com](http://www.newlifeassistedliving.com)

On Nov 6, 2025, at 9:30 AM, Williams, Jeffrey <[jewilliams@howardcountymd.gov](mailto:jewilliams@howardcountymd.gov)> wrote:

Thanks. For septic sizing, we look at the number of residents, but for the live in caretaker we look at the bedroom count. One caretaker bedroom would be 150 gallons per day and each resident would be 100 gallons per day. How many total residents are you licensed for, or pursuing, when at full capacity?

---

**From:** Alvin Thomas <[athomas@newlifeassistedliving.com](mailto:athomas@newlifeassistedliving.com)>  
**Sent:** Wednesday, November 5, 2025 3:55 PM  
**To:** Williams, Jeffrey <[jewilliams@howardcountymd.gov](mailto:jewilliams@howardcountymd.gov)>  
**Cc:** Robbins, Holley <[hrobbins@howardcountymd.gov](mailto:hrobbins@howardcountymd.gov)>; Dianne Thomas-Banda <[dthomasbanda@newlifeassistedliving.com](mailto:dthomasbanda@newlifeassistedliving.com)>; Silvast, Zackary <[zsilvast@howardcountymd.gov](mailto:zsilvast@howardcountymd.gov)>; [goldenstarllc874@gmail.com](mailto:goldenstarllc874@gmail.com); Eric Thomas <[ethomas@newlifeassistedliving.com](mailto:ethomas@newlifeassistedliving.com)>; Chris Shematek <[cpshematek@yahoo.com](mailto:cpshematek@yahoo.com)>  
**Subject:** Re: Building Permit B25000865

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Hi Jeffrey,  
Thanks so much for your response and looking into to this.

There are 7 bedrooms being used for residents and one is being used for the live in caregiver. We use two staff daily but only one lives, in the caregiver room. The other staff come and go.

If we need time change the staffing to accommodate the tank, we can do that also.

Alvin Thomas  
President  
New Life Assisted Living  
410-926-0419  
[www.newlifeassistedliving.com](http://www.newlifeassistedliving.com)

On Nov 5, 2025, at 3:34 PM, Williams, Jeffrey  
<jewilliams@howardcountymd.gov> wrote:

Hello Mr. Thomas. I reviewed the Health Dept file for this. I apologize if we had a delay in a response. When I look at the last permit we approved in 2019, the building permit application form we had showed 4 bedrooms and the description of work indicated 5 clients. I don't know where in the process it changed for the permit summary to say 8 clients, but it looks like the Health Dept signed off on 5 clients at that time.

Moving forward to this permit: Can you tell me what the staff situation is? If there is a live in caretaker, where do they stay? We look at number of bedrooms for the owner or caretaker to add up the septic design flow along with the number of residents. I understand your proposal is 8 residents.

There is a chance that the existing system is adequate for what you want, I just need to know those caretaker details to determine a final septic design flow. Thanks

Jeff Williams  
Deputy Director  
Bureau of Environmental Health  
Howard County Health Dept.  
8930 Stanford Blvd. Columbia, MD 21045  
410-313-4261  
[www.hchealth.org](http://www.hchealth.org)

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---

**From:** Alvin Thomas <[athomas@newlifeassistedliving.com](mailto:athomas@newlifeassistedliving.com)>  
**Sent:** Wednesday, November 5, 2025 9:38 AM  
**To:** Robbins, Holley <[hrobbins@howardcountymd.gov](mailto:hrobbins@howardcountymd.gov)>  
**Cc:** Dianne Thomas-Banda <[dthomasbanda@newlifeassistedliving.com](mailto:dthomasbanda@newlifeassistedliving.com)>; Silvast, Zackary <[zsilvast@howardcountymd.gov](mailto:zsilvast@howardcountymd.gov)>; goldenstarllc874@gmail.com; Eric Thomas <[ethomas@newlifeassistedliving.com](mailto:ethomas@newlifeassistedliving.com)>; Chris Shematek <[cpshematek@yahoo.com](mailto:cpshematek@yahoo.com)>; Williams, Jeffrey <[jewilliams@howardcountymd.gov](mailto:jewilliams@howardcountymd.gov)>  
**Subject:** Re: Building Permit B25000865

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Hi Holley,

I thought this was resolved. I will call today. I see Zachary promised to look into this Sept 26.

We met with his staff, Dana Bernard from his office about Sept 1. We discussed the gallons required to accommodate the number of residents and staff currently meets the standards of gallons needed per state and county regulations and code.

We have maintained a license for 8 residents for the entirety of our time at this location. We have never had 5 live in staff members- so I do not know where that information came from. We have had one live in staff- and if that is too many we will switch them to hourly.

As a reminder, the additional 4 rooms are partitioned rooms and not major additions. Therefore, there is no need to upgrade the septic tank since it currently meets the code for sufficient gallons to number of residents and staff at this location.

Alvin Thomas  
President  
New Life Assisted Living  
410-926-0419  
[www.newlifeassistedliving.com](http://www.newlifeassistedliving.com)

On Nov 5, 2025, at 7:56 AM, Robbins, Holley  
<[hrobbins@howardcountymd.gov](mailto:hrobbins@howardcountymd.gov)> wrote:

Hello,

Following up on this because the rental license is and has been expired since 9.20.24.

We cannot pass the renewal until this matter is resolved, but we also cannot allow an unlicensed property to continue operations without issuing a Civil Citation.

We'll need some concrete information as to the status and plan to address the delays.

Thank you,

**Holley Robbins, Code Enforcement Officer**  
Howard County Department of Inspections, Licenses and Permits  
Rental Housing Inspections  
410-313-1835 (office)  
410-313-1861 (fax)

---

**From:** Dianne Thomas-Banda  
<[dthomasbanda@newlifeassistedliving.com](mailto:dthomasbanda@newlifeassistedliving.com)>  
**Sent:** Friday, September 26, 2025 3:49 PM  
**To:** Silvast, Zackary <[zsilvast@howardcountymd.gov](mailto:zsilvast@howardcountymd.gov)>; Robbins, Holley  
<[hrobbins@howardcountymd.gov](mailto:hrobbins@howardcountymd.gov)>; Alvin Thomas  
<[athomas@newlifeassistedliving.com](mailto:athomas@newlifeassistedliving.com)>  
**Cc:** [goldenstarllc874@gmail.com](mailto:goldenstarllc874@gmail.com); Eric Thomas  
<[ethomas@newlifeassistedliving.com](mailto:ethomas@newlifeassistedliving.com)>; Chris Shematek  
<[cpsshematek@yahoo.com](mailto:cpsshematek@yahoo.com)>; Williams, Jeffrey  
<[jewilliams@howardcountymd.gov](mailto:jewilliams@howardcountymd.gov)>  
**Subject:** Re: Building Permit B25000865

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Thanks.

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---

**From:** Silvast, Zackary <[zsilvast@howardcountymd.gov](mailto:zsilvast@howardcountymd.gov)>  
**Sent:** Friday, September 26, 2025 3:46:33 PM  
**To:** Robbins, Holley <[hrobbins@howardcountymd.gov](mailto:hrobbins@howardcountymd.gov)>; Alvin Thomas  
<[athomas@newlifeassistedliving.com](mailto:athomas@newlifeassistedliving.com)>  
**Cc:** [goldenstarllc874@gmail.com](mailto:goldenstarllc874@gmail.com) <[goldenstarllc874@gmail.com](mailto:goldenstarllc874@gmail.com)>; Eric  
Thomas <[ethomas@newlifeassistedliving.com](mailto:ethomas@newlifeassistedliving.com)>; Chris Shematek  
<[cpsshematek@yahoo.com](mailto:cpsshematek@yahoo.com)>; Dianne Thomas-Banda  
<[dthomasbanda@newlifeassistedliving.com](mailto:dthomasbanda@newlifeassistedliving.com)>; Williams, Jeffrey  
<[jewilliams@howardcountymd.gov](mailto:jewilliams@howardcountymd.gov)>  
**Subject:** RE: Building Permit B25000865

Hello all,

I will need to re-review this project on Monday as I am teleworking and don't have the files in front of me.

However, I do remember that the septic system is not sized for 8 bedrooms. So if they were and have been licensed for 8 occupants, they've been putting strain on the existing septic system which is original designed for a 450-600 GPD flow. 8 bedrooms for 8 individual occupants plus full live-in staff would bump the septic flow to 800-1000 GPD give or take regarding staff.

I will re-review Monday, and see if we need to have all parties involved with this project come into the Health Department for a scheduled meeting. Thank you.

1. Zack S.

---

**From:** Robbins, Holley <[hrobbins@howardcountymd.gov](mailto:hrobbins@howardcountymd.gov)>  
**Sent:** Friday, September 26, 2025 3:33 PM  
**To:** 'Alvin Thomas' <[athomas@newlifeassistedliving.com](mailto:athomas@newlifeassistedliving.com)>; Silvast, Zackary <[zsilvast@howardcountymd.gov](mailto:zsilvast@howardcountymd.gov)>  
**Cc:** [goldenstarllc874@gmail.com](mailto:goldenstarllc874@gmail.com); Eric Thomas <[ethomas@newlifeassistedliving.com](mailto:ethomas@newlifeassistedliving.com)>; Chris Shematek <[cpsshematek@yahoo.com](mailto:cpsshematek@yahoo.com)>; Dianne Thomas-Banda <[dthomasbanda@newlifeassistedliving.com](mailto:dthomasbanda@newlifeassistedliving.com)>  
**Subject:** RE: Building Permit B25000865

Hello,

Following up here, has there been any resolution?

We really need to address the license, it remains expired.

Thank you,

**Holley Robbins, Code Enforcement Officer**  
Howard County Department of Inspections, Licenses and Permits  
Rental Housing Inspections

410-313-1835 (office)

410-313-1861 (fax)

---

**From:** Alvin Thomas <[athomas@newlifeassistedliving.com](mailto:athomas@newlifeassistedliving.com)>  
**Sent:** Tuesday, August 5, 2025 11:24 AM  
**To:** Silvast, Zackary <[zsilvast@howardcountymd.gov](mailto:zsilvast@howardcountymd.gov)>  
**Cc:** [goldenstarllc874@gmail.com](mailto:goldenstarllc874@gmail.com); Eric Thomas

<ethomas@newlifeassistedliving.com>; Chris Shematek  
<cpshematek@yahoo.com>; Robbins, Holley  
<hrobbins@howardcountymd.gov>; Dianne Thomas-Banda  
<dthomasbanda@newlifeassistedliving.com>  
**Subject:** Fwd: Building Permit B25000865

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Good morning Mr. Silvast,

I'm forwarding this letter to you to clarify that we are not changing the number of occupants for the home beyond what was already originally approved for building. We still have 8 occupants and one kitchen, as we did in 2019. We should not need to change the septic as this home was already approved for 8 people on the original license. We only modified the bedrooms, to allow single occupancy rather than shared occupancy in some rooms. Can you please approve this update so we can finalize the renewal rental license?

<image001.png>

Alvin Thomas  
President  
New Life Assisted Living  
410-926-0419  
[www.newlifeassistedliving.com](http://www.newlifeassistedliving.com)

Begin forwarded message:

**From:** "Rolls, Steven"  
<srolls@howardcountymd.gov>  
**Date:** August 5, 2025 at 11:08:03 AM EDT  
**To:** Alvin Thomas  
<athomas@newlifeassistedliving.com>,  
goldenstarllc874@gmail.com  
**Cc:** "Merson, Annette"  
<amerson@howardcountymd.gov>, Dianne

Thomas-Banda  
<[dthomasbanda@newlifeassistedliving.com](mailto:dthomasbanda@newlifeassistedliving.com)>,  
New Life <[info@newlifeassistedliving.com](mailto:info@newlifeassistedliving.com)>, Eric  
Thomas <[ethomas@newlifeassistedliving.com](mailto:ethomas@newlifeassistedliving.com)>,  
"Robbins, Holley"  
<[hrobbins@howardcountymd.gov](mailto:hrobbins@howardcountymd.gov)>  
**Subject: RE: Building Permit B25000865**

I approved for DPZ on 7/21.

### *Steve Rolls*

Planning Support Technician II | Division of Public Service  
and Zoning Administration  
410.313.4392 | [srolls@howardcountymd.gov](mailto:srolls@howardcountymd.gov)  
3430 Court House Drive, Ellicott City, MD 21043 | [website](#)  
<image002.png>

---

**From:** Alvin Thomas  
<[athomas@newlifeassistedliving.com](mailto:athomas@newlifeassistedliving.com)>  
**Sent:** Tuesday, August 5, 2025 10:40 AM  
**To:** [goldenstarllc874@gmail.com](mailto:goldenstarllc874@gmail.com)  
**Cc:** Merson, Annette  
<[amerson@howardcountymd.gov](mailto:amerson@howardcountymd.gov)>; Rolls, Steven  
<[srolls@howardcountymd.gov](mailto:srolls@howardcountymd.gov)>; Dianne Thomas-Banda  
<[dthomasbanda@newlifeassistedliving.com](mailto:dthomasbanda@newlifeassistedliving.com)>; Life New  
<[info@newlifeassistedliving.com](mailto:info@newlifeassistedliving.com)>; Eric Thomas  
<[ethomas@newlifeassistedliving.com](mailto:ethomas@newlifeassistedliving.com)>; Robbins, Holley  
<[hrobbins@howardcountymd.gov](mailto:hrobbins@howardcountymd.gov)>  
**Subject:** Re: Building Permit B25000865

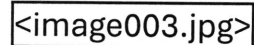
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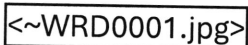
Good morning,  
Following up on this so we can proceed with the  
rental license update please.  
Alvin Thomas  
President  
New Life Assisted Living  
410-926-0419  
[www.newlifeassistedliving.com](http://www.newlifeassistedliving.com)

On Jul 21, 2025, at 11:55 AM, Alvin Thomas  
<[athomas@newlifeassistedliving.com](mailto:athomas@newlifeassistedliving.com)> wrote:

Hi Steve,  
I'm trying to renew our rental license for the property at 600 Gaither Road. A letter responding to your comments is attached here.



**Alvin Thomas**  
**President & CEO**  
**New Life Assisted Living Inc**  
6901 Scarlet Oaks Drive  
Elkridge, Md 21075  
Mobile: [\(410\)-926-0419](tel:(410)926-0419)  
Fax: [\(410\)-796-8807](tel:(410)796-8807)  
Email: [athomas@newlifeassistedliving.com](mailto:athomas@newlifeassistedliving.com)  
Web. <https://newlifeassistedliving.com>



**Coalition of Geriatric Services**





## **New Life Assisted Living**

6901 Scarlet Oak Drive      Elkridge, MD 21075      410-796-8602

Alvin Thomas, President

Phone 410-926-0419

Fax 410-796-8807

---

Building Permit B25000865

600 Gaither Road, Sykesville, MD 21784

To Steve Rolls,

This assisted living has one kitchen. Eight people are being cared for by 24/7 staff. This facility is licensed by the State of Maryland, OHCQ.

Best regards,

Alvin Thomas



# Building Permit Application

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

Date Received: 3/25/19

Permit No.: B19000813

Building Address: 600 Gathers Rd  
City: Sykesville State: MD Zip Code: 21784  
Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
Subdivision: \_\_\_\_\_  
Lot: \_\_\_\_\_ Tax Map: \_\_\_\_\_ Parcel: \_\_\_\_\_

Existing Use: Single Fm  
Proposed Use: Assisted Living 5 clients  
Estimated Construction Cost: \$ 55,000  
Description of Work: Change of use from SE Dwelling to Assisted Living (32 room plan?) # SLEEPING # CLIENTS RMS

Occupant/Tenant Name: New Life Assisted Living  
Was tenant space previously occupied?  Yes  No  
Contact Name: Ally Thomas  
Address: 6901 Secret + Oaks Dr  
City: Ft Belvoir State: MD Zip Code: 21075  
Phone: 410-926-0419 Fax: \_\_\_\_\_  
Email: Ally.thomas@comcast.net

Property Owner's Name: Cohall Real Estate Holdings  
Address: 513 Siding Court  
City: Sykesville State: MD Zip Code: 21784  
Phone: 442-295-1362 Fax: 442-295-0800  
Email: cpsheomete@yahoo.com

**Applicant's Name & Mailing Address, (If other than stated herein)**  
Applicant's Name: New Life Assisted Living  
Address: 6901 Secret + Oaks Dr  
City: Ft Belvoir State: MD Zip Code: 21075  
Phone: 410-926-0419 Fax: \_\_\_\_\_  
Email: Ally.thomas@comcast.net

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

Engineer/Architect Company: \_\_\_\_\_  
Responsible Design Prof.: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

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

| Utilities   |  |
|---|--|
| Electric:   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Gas:  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Water Supply  |  |
| <input type="checkbox"/> Public   |  |
| <input type="checkbox"/> Private  |  |
| Sewage Disposal   |  |
| <input type="checkbox"/> Public   |  |
| <input type="checkbox"/> Private  |  |
| Heating System  |  |
| <input type="checkbox"/> Electric <input type="checkbox"/> Oil            |  |
| <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas |  |
| <input type="checkbox"/> Other:   |  |
| Sprinkler System:   |  |
| <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No       |  |
| Grading Permit Number:  |  |
| Building Shell Permit Number:   |  |

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature: Ally Thomas  
Email Address: Ally.thomas@comcast.net  
Title/Company: President / New Life Assisted Living

Print Name: Ally Thomas  
Date: 12/7/18

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

**\*\*PLEASE WRITE NEATLY & LEGIBLY\*\***  
**-FOR OFFICE USE ONLY-**

| AGENCY               | DATE           | SIGNATURE OF APPROVAL |
|----------------------|----------------|-----------------------|
| State Highways       |                |                       |
| Building Officials   |                |                       |
| PSZA ( Zoning )      |                |                       |
| PSZA ( Engineering ) |                |                       |
| Health               | <u>4/23/19</u> | <u>[Signature]</u>    |

Is Sediment Control approval required for issuance?  Yes  No  
 CONTINGENCY CONSTRUCTION START

| DPZ SETBACK INFORMATION         |  |
|---------------------------------|--|
| Front:                          |  |
| Rear:                           |  |
| Side:                           |  |
| Side St.:                       |  |
| All minimum setbacks met?       | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Is Entrance Permit Required?    | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Historic District?              | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Lot Coverage for New Town Zone: |  |
| SDP/Red-line approval date:     |  |

|                 |                 |
|-----------------|-----------------|
| Filing Fee      | \$              |
| Permit Fee      | \$ <u>50</u>    |
| Tech Fee        | \$              |
| Excise Tax      | \$              |
| PSFS            | \$              |
| Guaranty Fund   | \$              |
| Add'l per Fee   | \$              |
| Total Fees      | \$ <u>75.00</u> |
| Sub- Total Paid | \$              |
| Balance Due     | \$              |
| Check           | # <u>0000</u>   |

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

# APPLICATION

PERCOLATION TESTING

A 36671

P \_\_\_\_\_

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

*4/25/86  
OK'd pending  
approved plan*

DISTRICT \_\_\_\_\_

DATE 3/20/86

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 ARTHUR DADIAN EDWARD HULLETT

ADDRESS \_\_\_\_\_ PHONE 202 331 7120

PROSPECTIVE BUYER Gaither Road Joint Venture

ADDRESS 9 Ennissa Ct. Owings Mills MD 21117 PHONE 301-356-9351

PROPERTY LOCATION: GAITHER SIDELING FINAL LOT 2 SEC 4

SUBDIVISION Dadian Property LOT NO. 4

ROAD AND DESCRIPTION 600 Gaither Rd. + Patapsco River  
OWNER: CAROL HULLETT 788 3886

TAX MAP 4 PARCEL # 31

SIZE OF LOT 3 acre 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.

*Benny M. Samuel*  
(SIGNATURE OF APPLICANT)

APPROVED BY B. Weyon FOR shallow/deep DATE 7/7/87

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

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

REASONS FOR REJECTION OR HOLDING \_\_\_\_\_

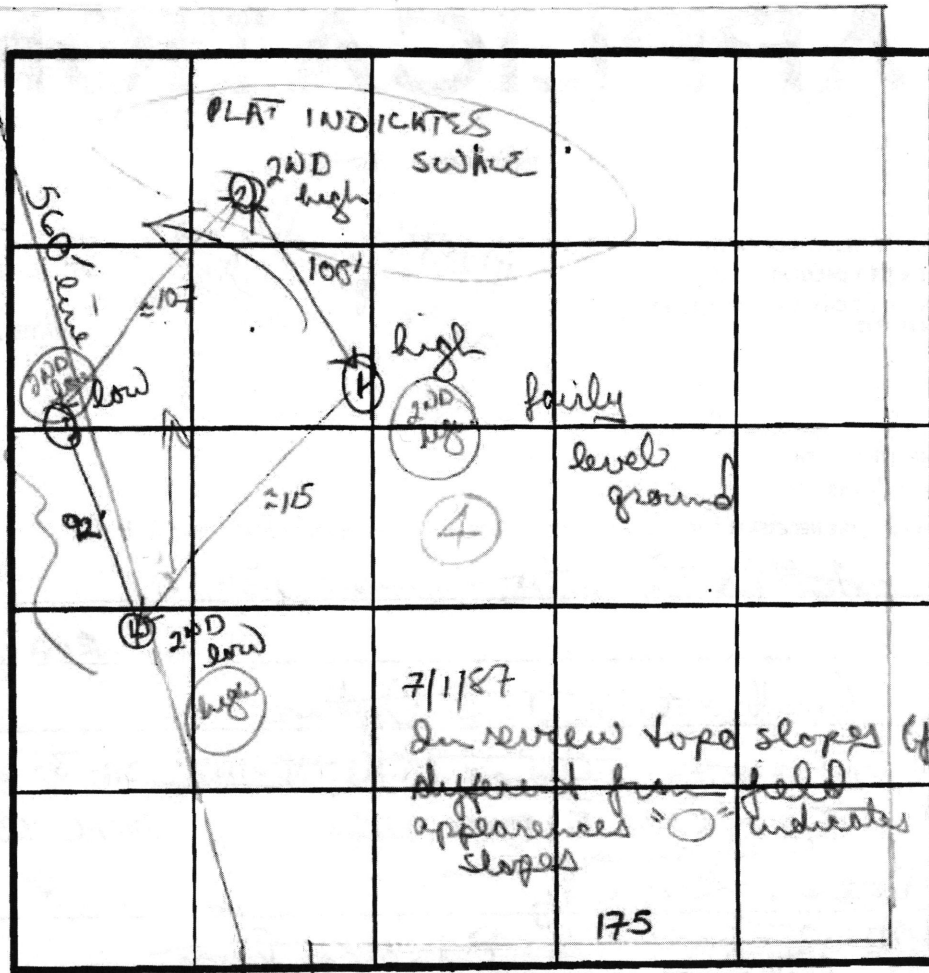
BLDG. PERMIT SIGNED  
AND RETURNED 2-5-88

*BP 16633 8A6*

# THIS IS NOT A PERMIT

①  
SOIL PROFILE

0'  
Red/orange  
chunky  
clay loam  
4+2'  
orange  
gray to  
red brown  
med-coarse  
grain  
sandy  
loam  
little/no  
rock  
12'D



TO LOT  
7

$\bar{X} = 3'$   
INLET  $3\frac{1}{2}$   
MAX D  $7\frac{1}{2}$

②

Similar  
profile to  
hole #1  
except  
10-15%  
hard rock  
from 9'  
ft down  
12'D

Inlet  $3\frac{1}{2}$ '

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

TO LOT 5

| DATE    | TEST NO. | DEPTH       | PRE-WET              |      | TEST - 1" DROP |      | TIME |  |
|---------|----------|-------------|----------------------|------|----------------|------|------|--|
|         |          |             | START                | STOP | START          | STOP |      |  |
| 4/25/86 | ①        | 4'S         | 138                  | 139  | 139            | 141  | 2min |  |
|         |          | 8'M         | 135                  | 136  | 136            | 138  | 2min |  |
|         |          | 12'D        | bottom (see profile) |      |                |      |      |  |
|         | ②        | 4'S         | 145                  | 146  | 146            | 148  | 2min |  |
|         |          | 12'D        | (see profile)        |      |                |      |      |  |
|         | ③        | common hole | (see lot 3)          |      |                |      | 7min |  |
|         |          |             |                      |      |                |      | 3min |  |
|         | ④        | common hole | (see lot 3)          |      |                |      | 2min |  |
|         |          |             |                      |      |                |      | 2min |  |

180'

holes 3+4 common with lot 3 (soil profiles w/ lot 3)  
Fast perc times on all holes

REMARKS  
TYPE OF SOIL chunky clay + clay loams top 4' ft., sandy loams

TESTED BY Bo. Nye ALSO PRESENT Phil/Gary

# APPLICATION

PERCOLATION TESTING

A 36671

P \_\_\_\_\_

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

DISTRICT \_\_\_\_\_

DATE 3/20/76

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 ARTHUR DADIAN

ADDRESS \_\_\_\_\_ PHONE 202 331-7120

PROSPECTIVE BUYER Gaither Road Joint Venture

ADDRESS 9 Carissa Ct Owings Mills, MD 21117 PHONE 301-356-9351

PROPERTY LOCATION:

SUBDIVISION Dadian Property LOT NO. 4

ROAD AND DESCRIPTION Gaither Rd. + Patapsco River

TAX MAP 4 PARCEL # 31

SIZE OF LOT 3 acre TYPE BLDG. SFD  
(SINGLE FAMILY DWELLING OR COMMERCIAL)

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Ray M. Samuel  
(SIGNATURE OF APPLICANT)

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

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

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

REASONS FOR REJECTION OR HOLDING \_\_\_\_\_

# THIS IS NOT A PERMIT





7-8-88  
10:30-11:00 AM

7/11/88 ASM

# PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

P 42092  
A 36671  
DISTRICT 4th  
DATE 7/6/88  
DATE SYSTEM APPROVED 7/11/88  
INSPECTOR R. HODGES

HOWARD COUNTY  
BUREAU OF ENVIRONMENTAL HEALTH  
461-9933

INDEXED

Dennis Feaga IS PERMITTED TO INSTALL  ALTER   
ADDRESS 1625 Henryton Road, Marriottsville, Maryland PHONE 442-5623  
SUBDIVISION Gaither Sideling ROAD 600 Gaither Road LOT 2, Sec. 4  
PROPERTY OWNER Edward Hullett  
ADDRESS \_\_\_\_\_

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES \_\_\_\_\_ NO

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 180 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 3.5 feet below original grade. Bottom maximum depth 7.5 feet below original grade. Effective area begins at 3.5 feet below original grade. 4 feet of stone below distribution pipe  
LOCATION - Place the distribution box 200 feet up the right (459.24') lot line and 265 feet off the right lot line as seen when facing the lot from Gaither Road. Run trenches on contour toward the right and front lot lines.  
NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. n/c/w

PLANS APPROVED BY Sid Abel DATE 2/05/88

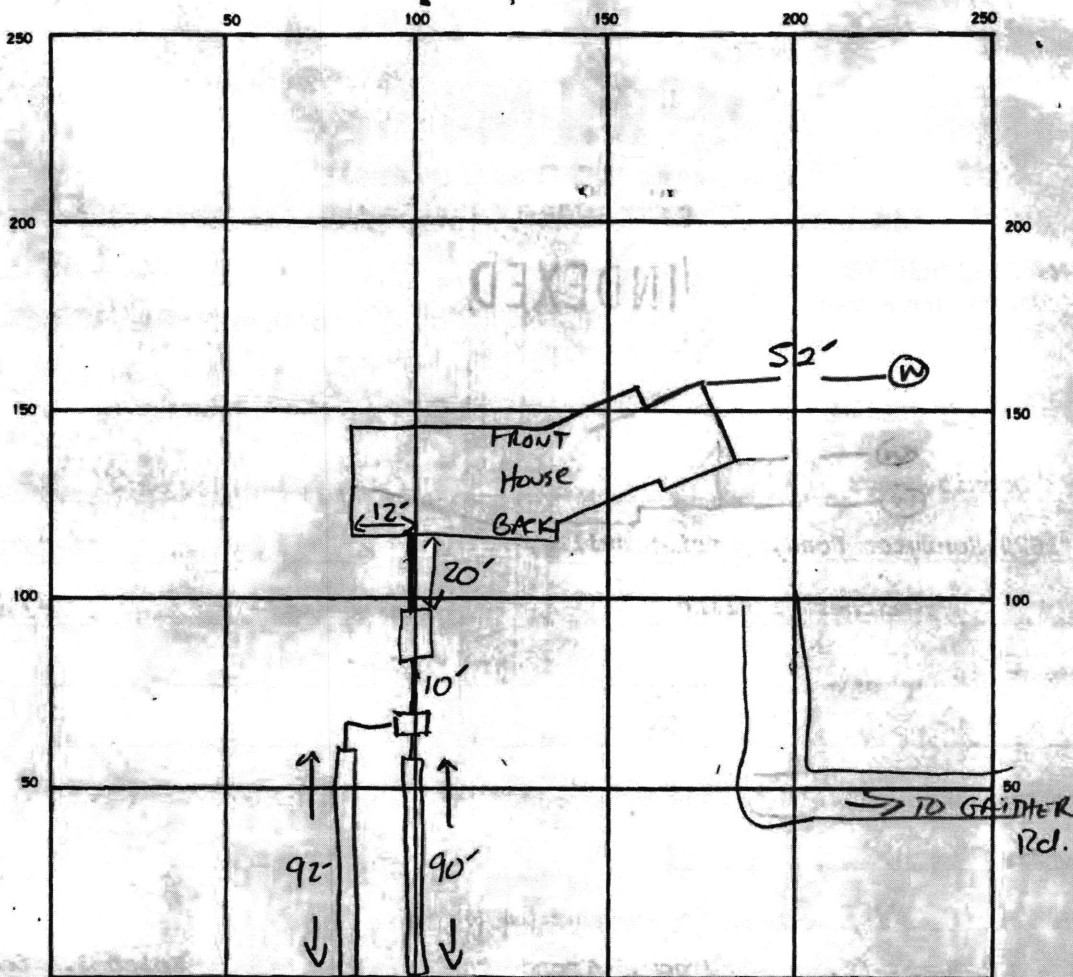
- COVER NO WORK UNTIL INSPECTED AND APPROVED.
- NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.
- NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS.
- NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E., TANK, DISTRIBUTION BOX, TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)
- NOTE: IF DEEP TRENCH(IES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(IES).
- NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER. NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH.
- NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 40 PVC OR ABS.
- PERMIT VOID AFTER TWO YEARS.
- NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED.
- NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES.

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

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

EH - 2-1186

A 36671



INDICATE NORTH — NAME ADJOINING ROADWAY AS BASE LINE.

SEPTIC TANK LEVEL ✓ 1500 GAL CLEANOUTS ST OK

DISTRIBUTION BOX LEVEL \_\_\_\_\_

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

EFFECTIVE GRAVEL DEPTH 4.5' FT. TOTAL LENGTH 90 92 FT.

NUMBER OF TRENCHES 2 ONE SIDEWALL BOTTOM AREA 219 SQ. FT. 726

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

ABSORBENT AREA \_\_\_\_\_ SQ. FT.

REMARKS 7-8-88 OK TO ADD STONE TO BOTH TRENCHES. S. AG TO TRENCHES

7/11/88 7:00 AM - STONE ADDED TRENCHES OK

DATE SYSTEM APPROVED 7/11/88 INSPECTOR Raymond Hodges

8.0  
3.5  
1.5  
0  
3  
182  
45  
910  
728  
2190

7-8-88  
10:50-11:00 AM

7/11/88 A317

# PERMIT

SEWAGE DISPOSAL SYSTEM  
MARYLAND STATE DEPARTMENT OF HEALTH

P 42092  
A 36671  
DISTRICT 4th  
DATE 7/6/88  
7/11/88  
DATE SYSTEM APPROVED  
INSPECTOR R. HOOGGY

HOWARD COUNTY  
BUREAU OF ENVIRONMENTAL HEALTH  
461-9933

## INDEXED

Dennis Feaga IS PERMITTED TO INSTALL  ALTER  
ADDRESS 1625 Henryton Road, Marriottsville, Maryland PHONE 442-5623  
SUBDIVISION Gaither Sideling ROAD 600 Gaither Road LOT 2, Sec. 4  
PROPERTY OWNER Edward Hullett  
ADDRESS \_\_\_\_\_

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SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

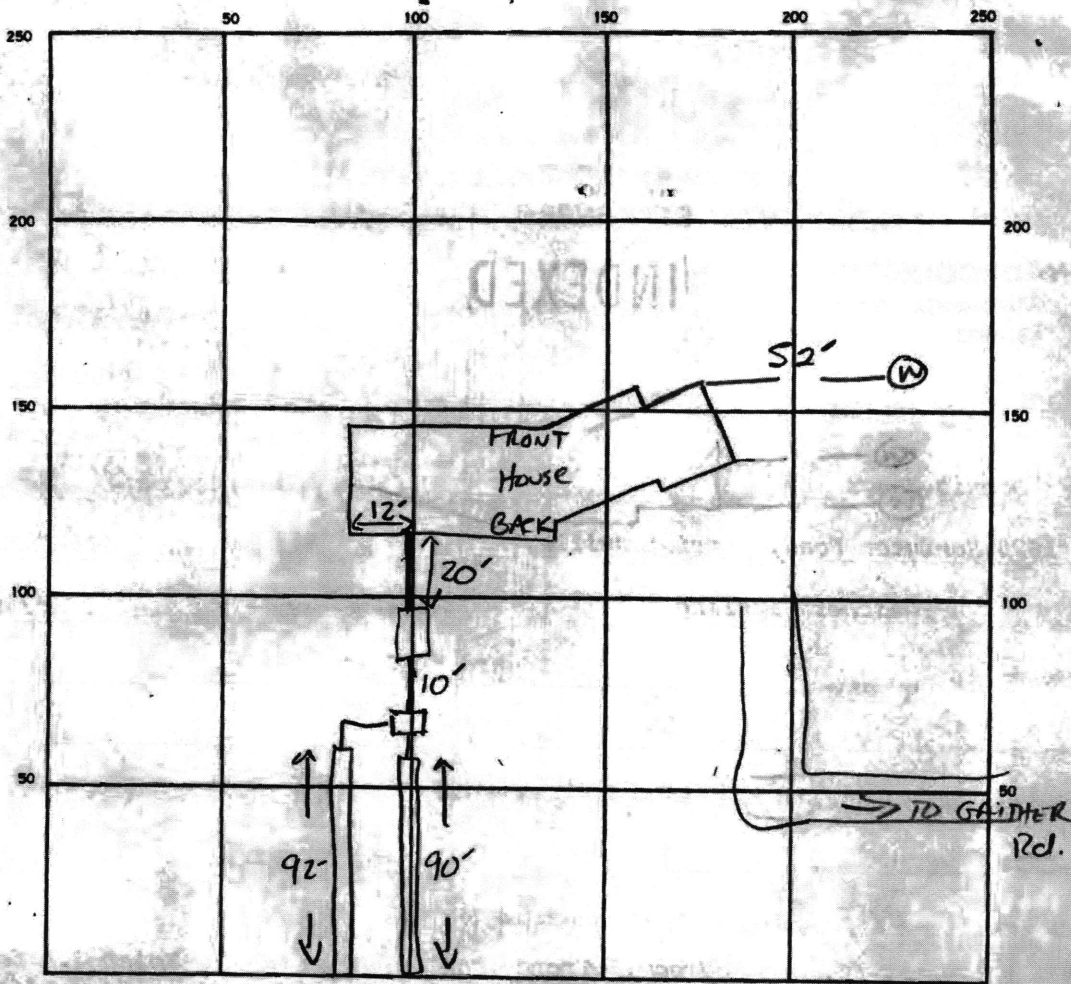
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LOCATION - Place the distribution box 200 feet up the right (459.24') lot line and 265 feet off the right lot line as seen when facing the lot from Gaither Road. Run trenches on contour toward the right and front lot lines.  
NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. n/c/w

PLANS APPROVED BY Sid Abel DATE 2/05/88

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- NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES.

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

A 36671



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SEPTIC TANK LEVEL ✓ 1500 GAL

CLEANOUTS ST OK

8.6  
3.5  
1.5

DISTRIBUTION BOX LEVEL \_\_\_\_\_

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

EFFECTIVE GRAVEL DEPTH 4.5' FT. TOTAL LENGTH 90 92 FT.

NUMBER OF TRENCHES 2 ONE SIDEWALL BOTTOM AREA 819 SQ. FT. 720 REQUIRED

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

ABSORBENT AREA \_\_\_\_\_ SQ. FT.

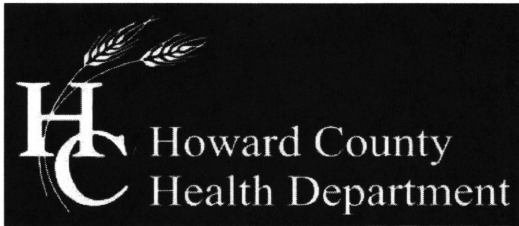
0  
3  
182  
45  
910  
728  
819

REMARKS 7-8-88 OK TO ADD STONE TO BOTH TRENCHES. S. AG TO TRENCHES

7/17/88 7000AM - 5 TONS ADDED TRENCHES O/K

DATE SYSTEM APPROVED 7/11/88

INSPECTOR Raymond Hodges



Bureau of Environmental Health

8930 Stanford Boulevard, Columbia, MD 21045

Main: 410-313-2640 | Fax: 410-313-2648

TDD 410-313-2323 | Toll Free 1-866-313-6300

www.hchealth.org

Facebook: www.facebook.com/hocohealth

Twitter: HowardCoHealthDep

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

SEWAGE DISPOSAL SYSTEM SPECIFICATIONS WORKSHEET

Address: 600 Gaither Rd.

Subdivision: Gaither Sideling Lot: 4

Table with 4 columns: System Type, Application rate, Effective area beginning depth, Bottom maximum depth. Rows for Initial system, 1st Replacement, and 2nd Replacement.

Design Flow = 150 gallons per day per bedroom

Design flow ÷ application rate = square footage of drainfield required

Linear length of trench required = drainfield square footage x sidewall reduction percentage ÷ trench width

Sidewall reduction credit formula:

(W + 2) / (W + 1 + 2D) x 100 = Percent of length of standard trench where W=trench width and D= depth between effective area beginning depth and trench bottom.

Standard design requirements:

- All trenches must be equal length unless low pressure dosed
• All trenches must be on contour
• Minimum trench spacing: 10' for all trenches utilizing sidewall reduction credit.
Additional spacing may be necessary for any trench using over 3.5' of effective sidewall.
In those cases, the spacing formula is 2D +W up to a maximum spacing of 18'.
• Minimum trench spacing for trenches with no sidewall credit (bottom area only) is 6' for a 2' wide trench and 9' for a 3' wide trench (spacing is measured edge to edge)
• Maximum trench length is 100'
• Maximum pipe depth is 4'

Additional requirements:

- Place trench inlets as high as possible while maintaining 2% fall.
- Avoid the center of swale by 25 ft. If trenching systems cannot maintain 25ft setback a revised perc cert may be required.
- 3 systems (Initial + 2 Replacements) must fit inside the SDA. If 3 systems cannot fit on Initial and 1 Replacement with a BAT unit may be allowed. Health Dept. approval required prior to.

Approved: [Signature] Date: 4/2/2019

$$5 \times 100 = 500$$

$$500 / 1.8 = 277$$

$$\textcircled{3'w} \quad 277 / 3 = 92.5$$

$$92.5 \times 0.41 = 37.9$$

(4)

$$\textcircled{3'w} \quad 92.5 \times .45 = 41.6$$

(3.5)

$$\textcircled{3'w} \quad 92.5 \times .50 = 46.25$$

(3)

$$\textcircled{2'w} \quad 277 / 2 = 138.5$$
$$138.5 \times 0.36 = 49.86$$

(4)

$$\textcircled{2'w} \quad 138.5 \times .40 = 55.4$$

(3.5)

$$\textcircled{2'w} \quad 138.5 \times .44 = 60.94$$

(3)

$$\textcircled{3'w} \quad 92.5 \times 0.38 = 35.15$$

(4.5)

$$\textcircled{2'w} \quad 138.5 \times 0.33 = 45.7$$

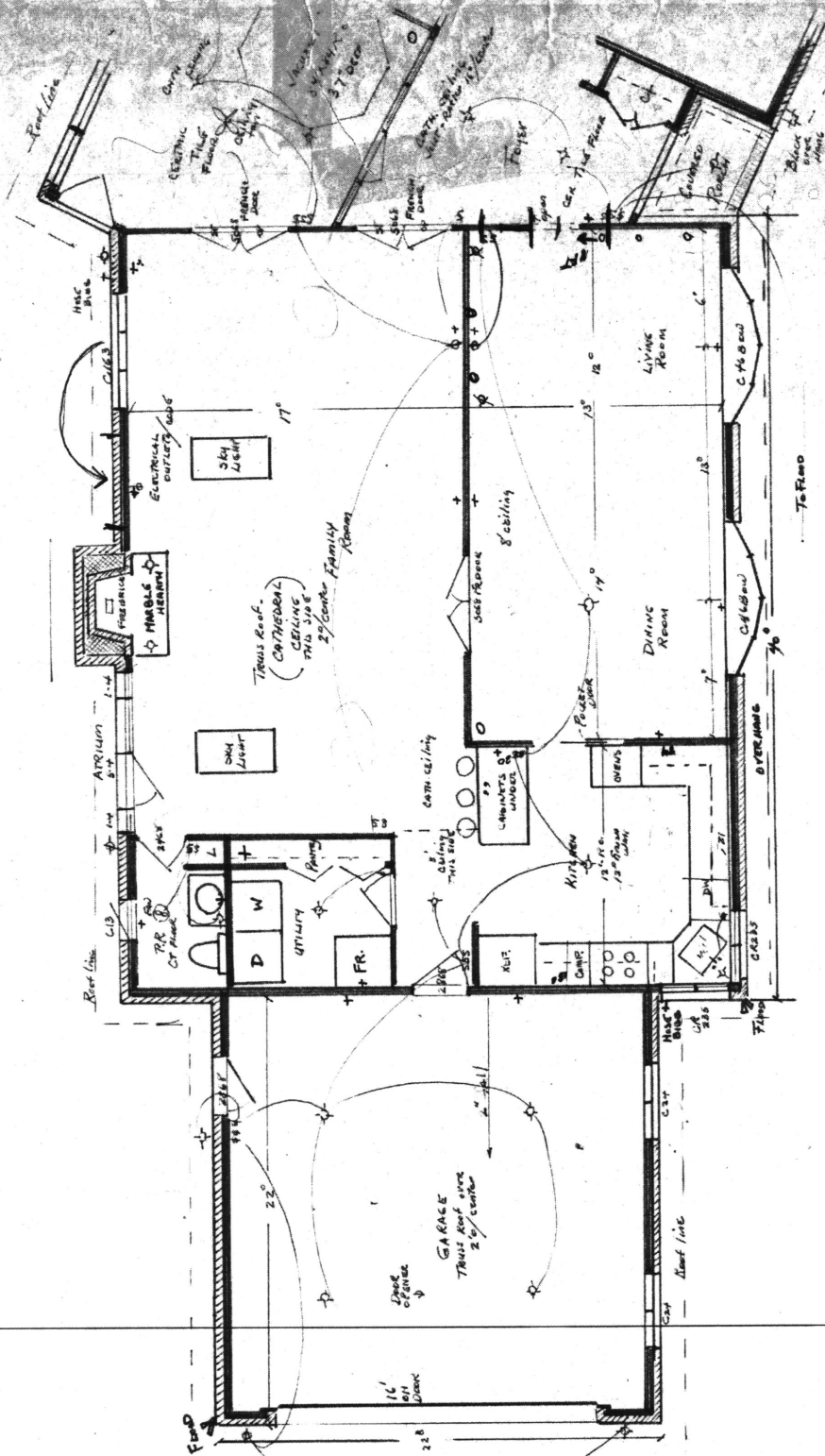
(4.5)



NOTES

- R-19 Wall insulation
- R-30 Ceiling insulation
- Lumber Joist - SYP @ 24" O.C.
- STAIRS - SPF
- Windows finished Perma-SHEED
- SHIEB CHAIRS

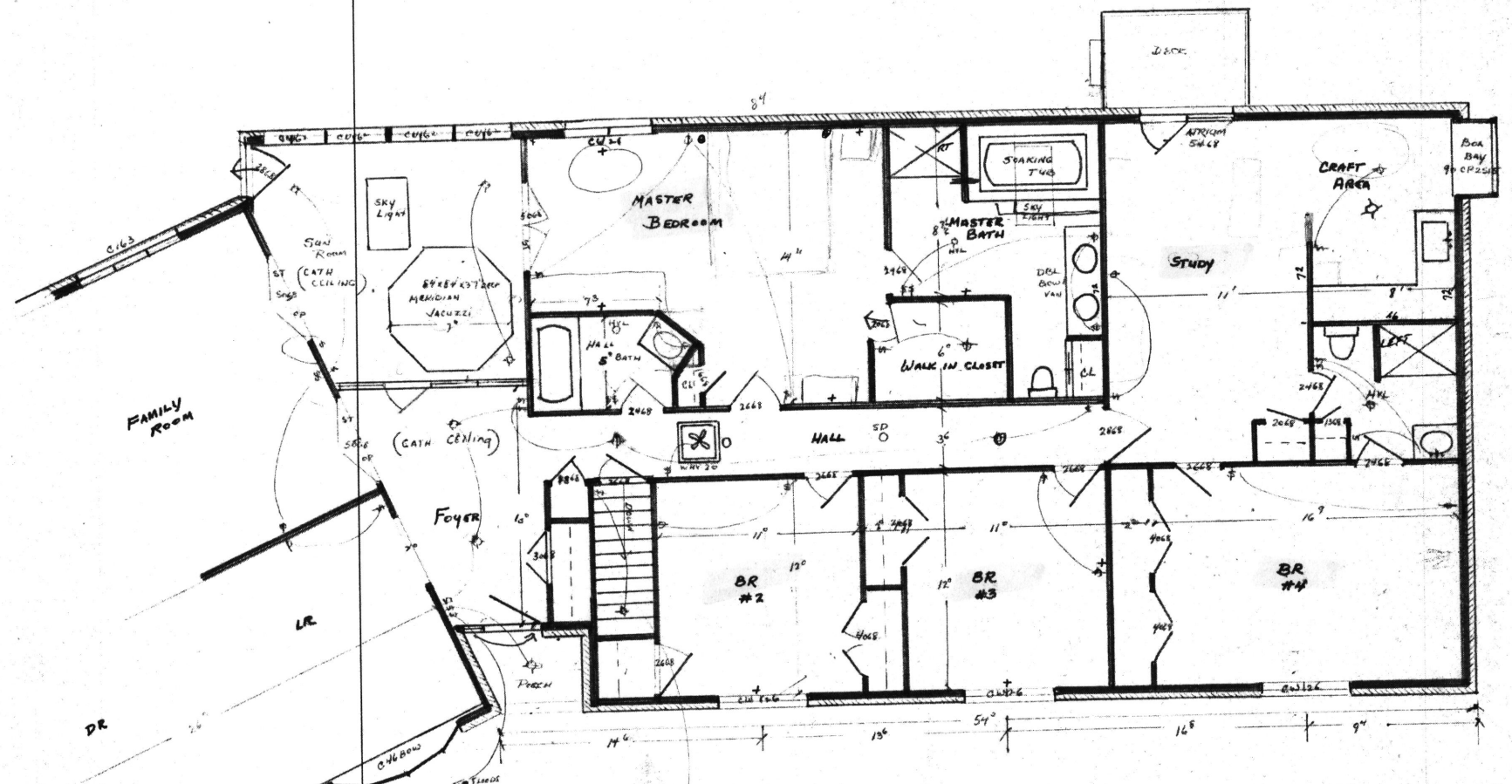
Approved B19000813  
 4/23/71  
 RRE



GARAGE - 1ST FLOOR PLAN - LEFT SIDE  
 SCALE: 1/4" = 1'-0"

HULLETT RESIDENCE  
 GARAGE 1ST FLOOR PLAN - PAGE 1  
 BURNHAM CONSTRUCTION

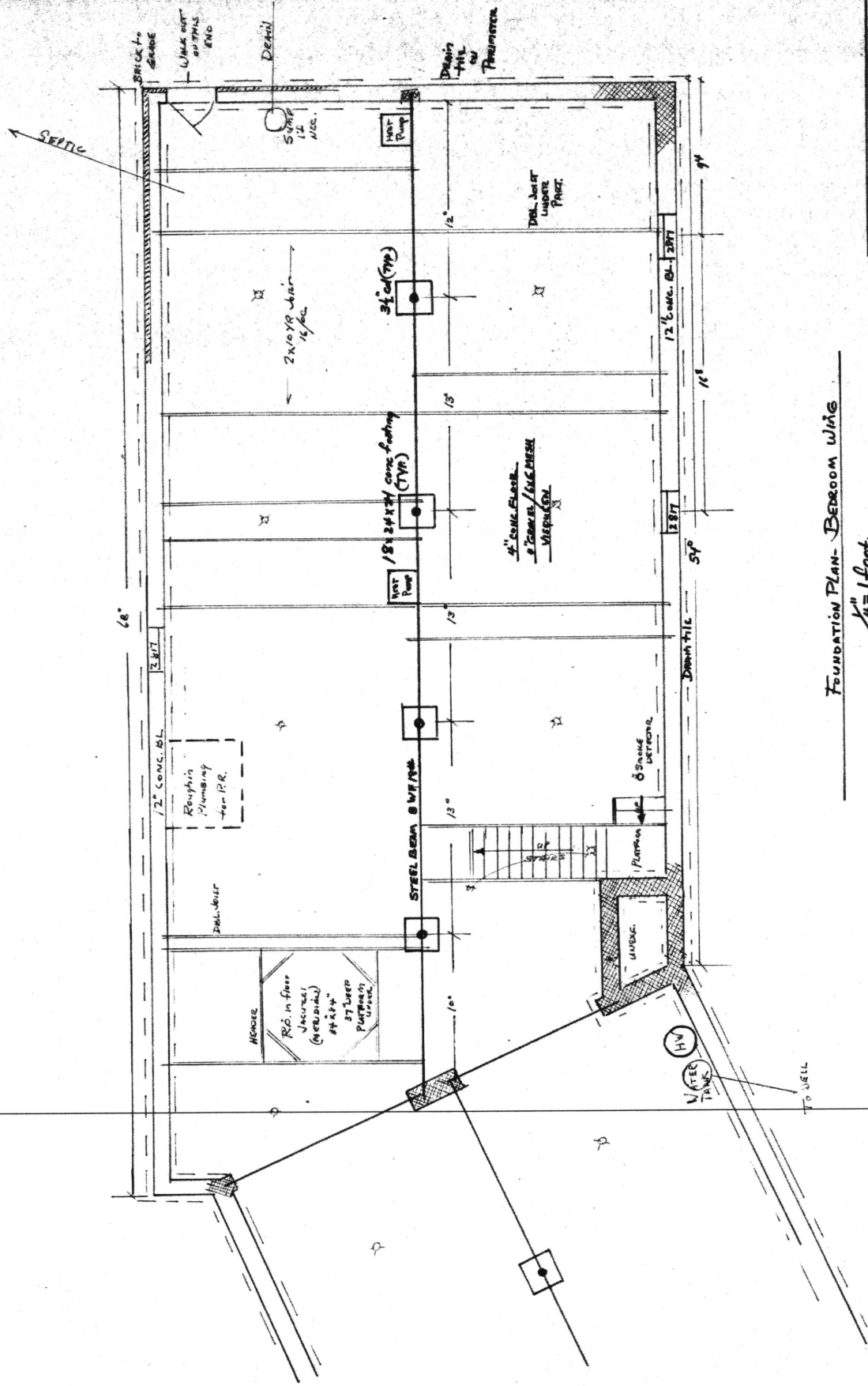
Approved B19000813  
 RAE 4/23/19



**NOTES**  
 1. LUMBER #2 or BTR.  
 yellow pine joist  
 2. INSULATION - R-19 wall  
 R-30 ceiling  
 3. ANDERSON-THERMOPAK  
 TERMASHEILD

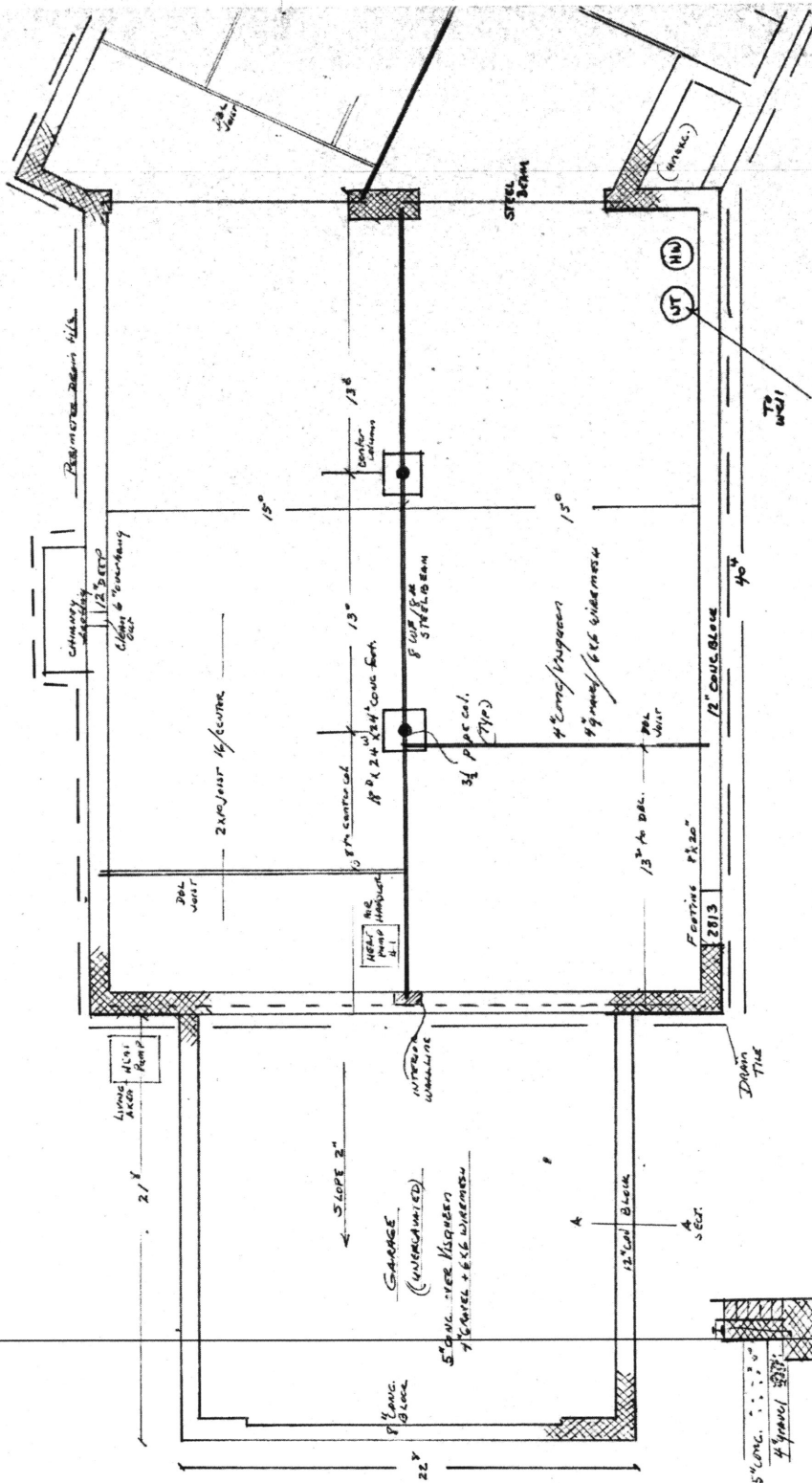
1ST FLOOR PLAN - BEDROOM WING  
 SCALE - 1/4" = 1 foot

HULLETT RESIDENCE  
1ST FLOOR PLAN - PAGE 2  
BUEHNAM CONSTRUCTION



HULLITT RESIDENCE  
 FOUNDATION PAGE 4  
 BIRNBAUM CONSTRUCTION

FOUNDATION PLAN - BEDROOM WING  
 1/4" = 1 foot.

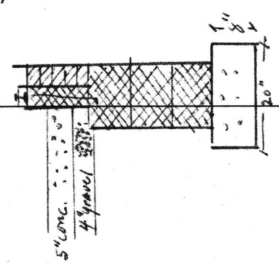


GARAGE + BASEMENT - FLOOR PLAN 1/2" = 1'-0"

FOUNDATION

Hallett Residence  
 GARAGE + BASEMENT FOUNDATION  
 DURHAM CONSTRUCTION  
 PAGE 3

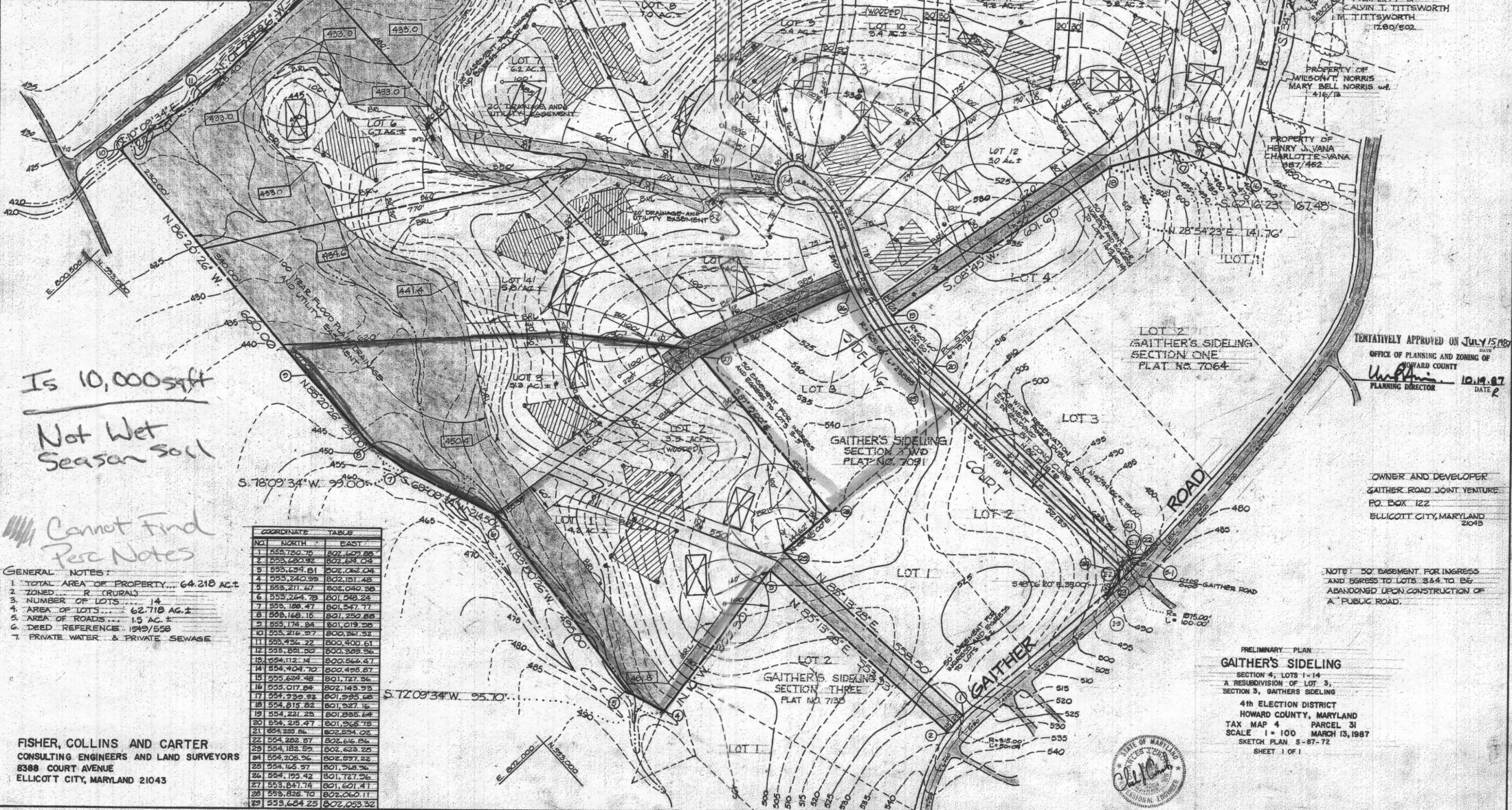
SECT. A-A. 3/4" = 1'-0"



Signed  
1987

| PERCOLATION TEST DATA |                     |  |   |                  |
|-----------------------|---------------------|--|---|------------------|
| LOT NUMBER            | PREVIOUS LOT NUMBER | AVERAGE PER TIME IN MINUTES PER SECOND INCH. | MAX. DEPTH PERMITTED FOR EFFLUENT PIPE TO ENTER SEWAGE DISPOSAL AREA AT ITS HIGHEST ELEVATION WITH REFERENCE TO EXISTING GRADE AT TIME OF PERCOLATION TEST. |                  |
| 1                     | 2                   | 6 MIN.                                       | 4"  | 6" (SHALLOW)     |
| 2                     | 4                   | 2 MIN.                                       | 3 1/2"  | 7 1/2" (DEEP)    |
| 3                     | 8                   | 2 MIN.                                       | 3 1/2"  | 8 1/2" (SHALLOW) |
| 4                     | 10                  | 4 MIN.                                       | 3 1/2"  | 8 1/2" (SHALLOW) |
| 5                     | 10                  | 7 1/2 MIN.                                   | 2 1/2"  | 7 1/2" (DEEP)    |
| 6                     | 11                  | 7 MIN.                                       | 4"  | 6 1/2" (SHALLOW) |
| 7                     | 12                  | 3 1/2 MIN.                                   | 3"  | 7 1/2" (DEEP)    |
| 8                     | 12                  | 3 1/2 MIN.                                   | 2 1/2"  | 7 1/2" (DEEP)    |
| 9                     | 14                  | 3 1/2 MIN.                                   | 3"  | 8 1/2" (DEEP)    |
| 10                    | 15                  | 2 1/2 MIN.                                   | 3"  | 8 1/2" (DEEP)    |
| 11                    | 16                  | 4 MIN.                                       | 3 1/2"  | 8 1/2" (SHALLOW) |
| 12                    | 17                  | 12 MIN.                                      | 4"  | 8" (DEEP)        |
| 13                    | 18                  | 2 1/2 MIN.                                   | 4"  | 8" (SHALLOW)     |
| 14                    | 19                  | 3 MIN.                                       | 3 1/2"  | 8" (DEEP)        |

APPROVED FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS HOWARD COUNTY HEALTH DEPARTMENT  
DATE 8-28-87  
CANTY HEALTH OFFICER



Is 10,000 sqft  
Not Wet  
Season soil  
Cannot find  
Perce Notes

- GENERAL NOTES:
- TOTAL AREA OF PROPERTY... 64.210 AC.±
  - ZONED... R (RURAL)
  - NUMBER OF LOTS... 14
  - AREA OF LOTS... 62.710 AC.±
  - AREA OF ROADS... 1.5 AC.±
  - DEED REFERENCE... 1949/558
  - PRIVATE WATER & PRIVATE SEWERAGE

| NO. | NORTH      | EAST       |
|-----|------------|------------|
| 1   | 553,790.76 | 807,629.85 |
| 2   | 553,250.83 | 802,641.87 |
| 3   | 553,634.81 | 802,062.04 |
| 4   | 553,240.99 | 802,151.48 |
| 5   | 553,211.67 | 802,040.98 |
| 6   | 553,224.78 | 801,248.24 |
| 7   | 553,188.47 | 801,547.77 |
| 8   | 553,148.16 | 801,230.88 |
| 9   | 553,174.84 | 801,019.58 |
| 10  | 553,216.57 | 800,261.32 |
| 11  | 553,436.22 | 800,400.61 |
| 12  | 553,891.50 | 800,389.96 |
| 13  | 554,112.34 | 800,566.47 |
| 14  | 554,404.70 | 800,493.87 |
| 15  | 555,624.48 | 801,127.36 |
| 16  | 555,017.84 | 802,145.35 |
| 17  | 554,232.92 | 801,295.68 |
| 18  | 554,819.82 | 801,527.16 |
| 19  | 554,221.28 | 801,885.84 |
| 20  | 554,218.47 | 801,216.78 |
| 21  | 554,235.84 | 802,834.02 |
| 22  | 554,282.57 | 802,616.64 |
| 23  | 554,182.55 | 802,623.25 |
| 24  | 554,205.94 | 802,271.32 |
| 25  | 554,165.27 | 801,214.04 |
| 26  | 554,192.42 | 801,127.56 |
| 27  | 553,841.74 | 801,601.41 |
| 28  | 553,826.70 | 802,060.11 |
| 29  | 553,684.25 | 802,053.32 |

FISHER, COLLINS AND CARTER  
CONSULTING ENGINEERS AND LAND SURVEYORS  
8388 COURT AVENUE  
ELLICOTT CITY, MARYLAND 21043

TENTATIVELY APPROVED ON JULY 15, 1987  
OFFICE OF PLANNING AND ZONING OF  
HOWARD COUNTY  
PLANNING DIRECTOR  
DATE 10.14.87

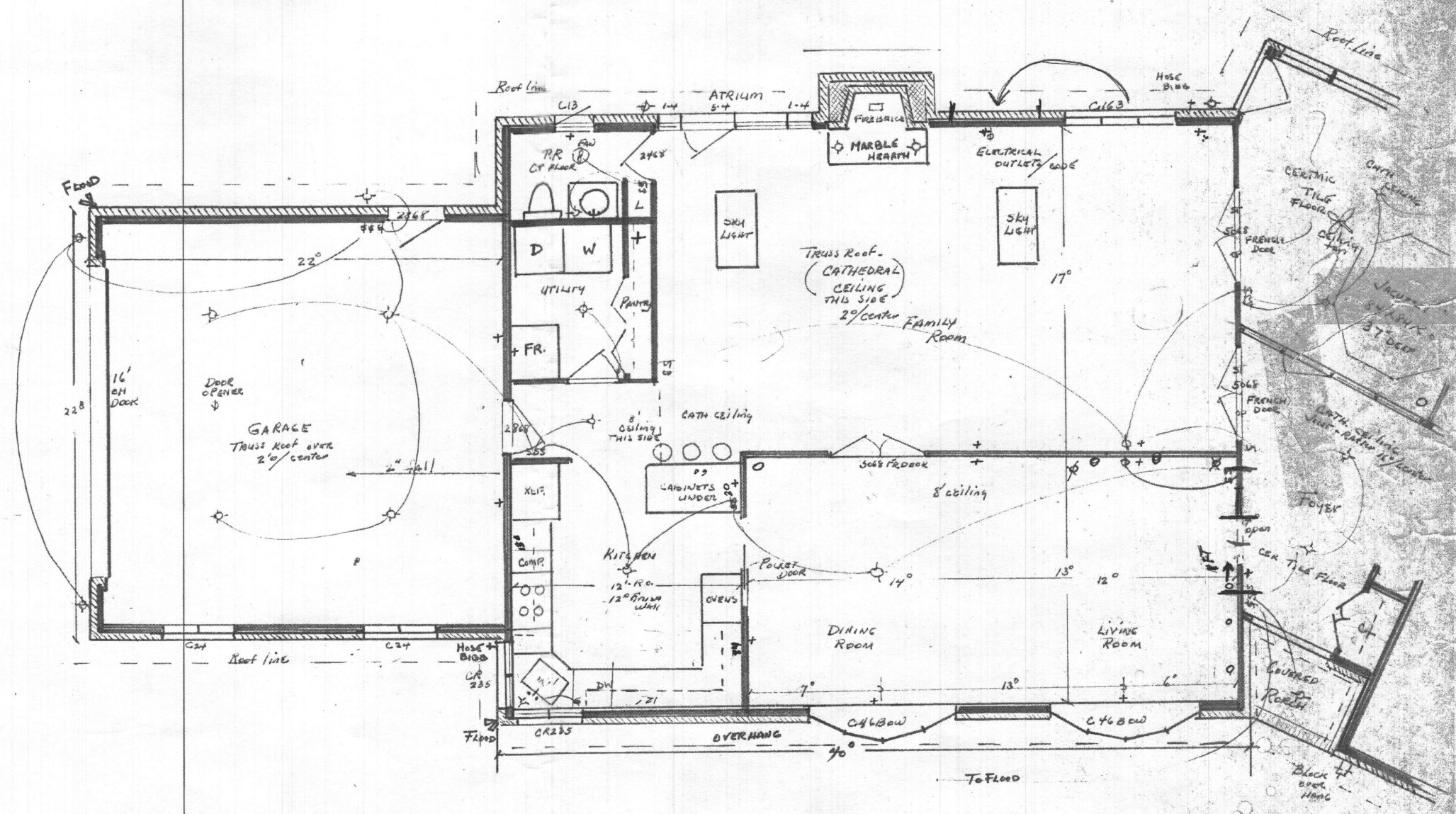
OWNER AND DEVELOPER  
GAITHER ROAD JOINT VENTURE  
P.O. BOX 122  
ELLICOTT CITY, MARYLAND 21043

NOTE: 50' BASEMENT FOR INGRESS AND EGRESS TO LOTS 3&4 TO BE ABANDONED UPON CONSTRUCTION OF A PUBLIC ROAD.

PRELIMINARY PLAN  
GAITHER'S SIDELING  
SECTION 4; LOTS 1-14  
A REBUDIVISION OF LOT 3,  
SECTION 3, GAITHER'S SIDELING  
4TH ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND  
TAX MAP 4 PARCEL 31  
SCALE 1" = 100' MARCH 13, 1987  
SKETCH PLAN S-87-72  
SHEET 1 OF 1

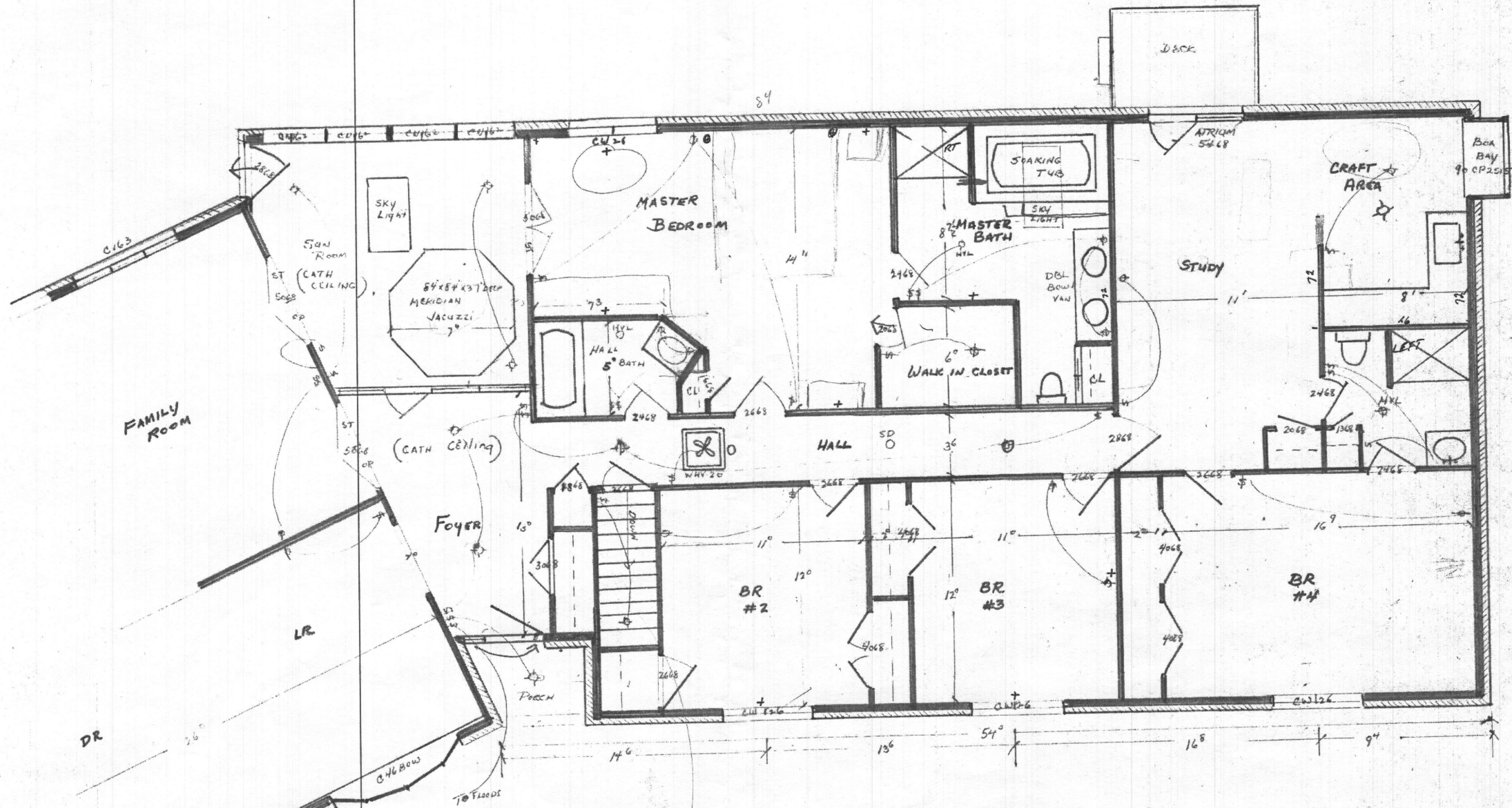
NOTES

- R-19 Wall Insulation
- R-30 Ceiling Insulation
- LUMBER JOIST - SYP #2 OR BTR
- STUD - SPF
- WINDOWS AND DOORS PERMA -
- SHIELD GLASS



GARAGE - 1ST FLOOR PLAN - LEFT SIDE  
SCALE - 1/4" = 1 FOOT

HULLETT RESIDENCE  
GARAGE 1ST FLOOR PLAN - PAGE 1  
BURNHAM CONSTRUCTION



**NOTES**  
 1. LUMBER #2 or BTR.  
     yellow pine joint  
 2. INSULATION - R-19 wall  
     R-30 ceiling  
 3. ANDERSEN THERMOPANE  
     TERMASHIELD

1ST FLOOR PLAN - BEDROOM WING  
 SCALE - 1/4" = 1 foot

HULLETT RESIDENCE  
 1st Floor Plan - PAGE 2  
 BUENHAM CONSTRUCTION