

5/4/92
A3 AP
5/14/92

#348397

Needs House Construction

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 47853
47874
A 40075

DISTRICT 4th
DATE 2/27/92

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

DATE SYSTEM APPROVED _____

INSPECTOR _____

INDEXED

Fogles Septic Clean Inc. IS PERMITTED TO INSTALL _____ ALTER X

ADDRESS 558R Obrecht Road, Sykesville, Maryland 21784 PHONE 795-5674

SUBDIVISION White Wood Estates LOT 23 ROAD 17314 Pink Dogwood Court

PROPERTY OWNER Lena and Angelo Sauro

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 180

TRENCHES - 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 - Place the first trench 490 feet up the right (695') lot line and 80 feet off the same lot line as seen when facing the lot from Pink Dogwood Court. Run trenches on contour toward the back of lot. MAINTAIN AT LEAST 100 FEET DISTANCE BETWEEN THE TRENCH AND THE WELL.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 2/27/92 BH

PLANS APPROVED BY Sid Abel/ Raymond Hodges Revised DATE 2/25/92

COVER NO WORK UNTIL INSPECTED AND APPROVED

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM

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

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

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

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

PERMIT VOID AFTER TWO YEARS

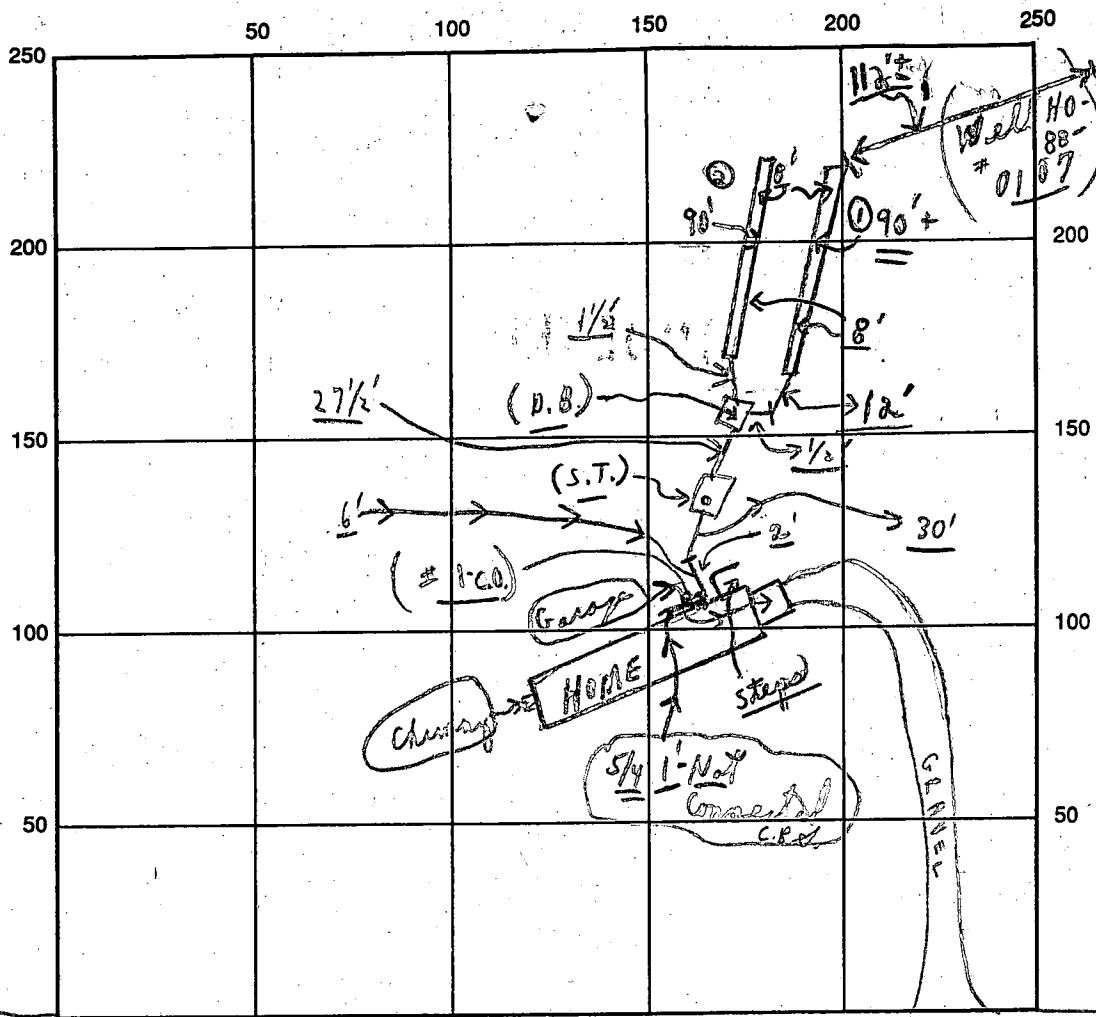
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON. CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

BLDG. PERMIT SIGNED
AND RETURNED 3/24/92
Serial # 670116829
Mike Lane for house

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

A
47875
47874



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

Pink Dog Wood Court

SEPTIC TANK LEVEL OK CLEANOUTS C.O. #1 OK S.T. OK

DISTRIBUTION BOX LEVEL OK (Baffles is in)

DRAIN FIELD/TITLE DEPTH 8 + avg. FT. TRENCH WIDTH 2 FT. INLET DEPTH 4 FT.

EFFECTIVE GRAVEL DEPTH 4 FT. TOTAL LENGTH 2 @ 90' } FT. = 180

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA _____ SQ. FT.

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

ABSORBENT AREA _____ SQ. FT.

REMARKS: 5/4/92 A.M. - OK for stones in trenches only, nothing in from S. Tank to trenches, partial. Final - P.M. - OK TO cover all work. Needs house connection 1' to C.O. #1 and to house only.

DATE SYSTEM APPROVED 5/11/92 INSPECTOR [Signature]

↑ NW (avg)
 ← 28/144 →
 ↓ (Lid)

APPLICATION

PERCOLATION TESTING

A 40074

P _____

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

*10/28/87
percol test
approved plat*

DISTRICT 4TH

DATE 9-8-87

TO: THE COUNTY HEALTH OFFICER
ELLCOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Kenward Warfield Jr LANA Angelo S ^{S.A.U.R.O} - 621-7175

ADDRESS 14663 Tridelphia Rd Glenely 21737 PHONE 442-2337

PROSPECTIVE BUYER N/A

ADDRESS _____ PHONE _____

PROPERTY LOCATION: _____

SUBDIVISION White Property LOT NO. 18 23 ON F

ROAD AND DESCRIPTION South side of Balto National Pike (Rt 144) north side of Hardy Rd (17314 Pink Dogwood Court)

TAX MAP 7 PARCEL # 1

SIZE OF LOT 3 ± acres 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.

Mal D Rein
(SIGNATURE OF APPLICANT)

APPROVED BY Sicking Abue FOR Deep trenches DATE 8-12-88

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING for field located holes & sub + plat

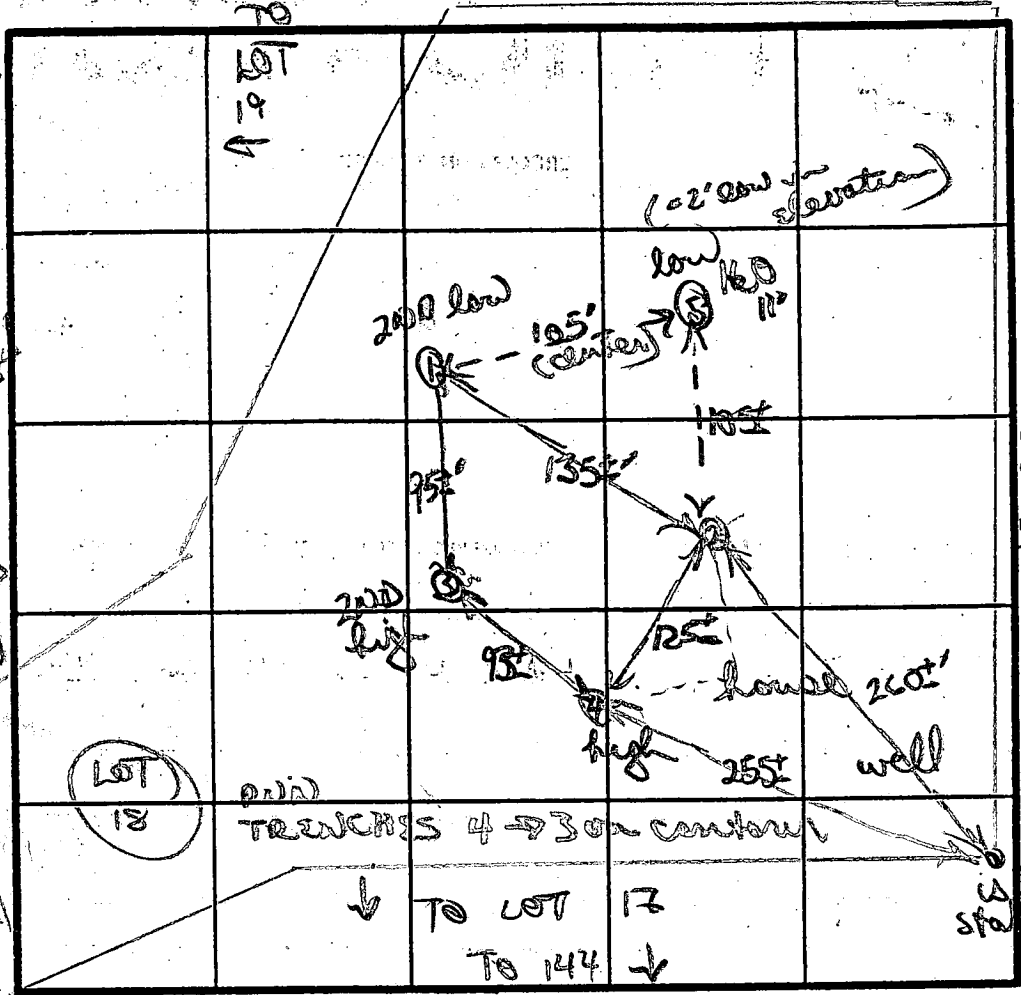
PERC PERMIT DENIED
AND RETURNED 7/25/92
Serial # 41067 - SFD - 4 Bedroom

THIS IS NOT A PERMIT

$\bar{x} = 7 \text{ MIN}$
 INLET 4'
 MAX DEPTH 8'

SOIL PROFILE

orange/yellow clay (clumpy) 4'
 changing to gritty orange yellow silty patchy clay
 ↓



light yellow w/ brown patches clay to clay silty loam 3 1/2'
 to mostly light white orange silty loam w/ scattered layers small black water frags

11 1/2' D

4 @ 2

orange/yellow clay/silty clay loam

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

yellow/orange brown clay 3 1/2' w/ patches grey/white (mottled?) soil mixed in from 4 1/2' 8" orange brown/grey brown silty loam along 10' H2O 11'

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
10/28/87	①	4 1/2' S	1122	1128	1128	1140	12 MIN	
		12 1/2' D	bottom (see profile)					
	②	3 1/2' S	1126	1128	1128	1131	3 MIN	
		7 1/2' M	1126	1130	1130	1138	8 MIN	
		11 1/2' D	bottom (see profile)					
	③	160 gal 11' damp at 10'	FAIL					
	④	4' S	1148	1151	1151	1155	4 MIN	
		12 1/2' D	bottom (see profile)					
	⑤	VISUAL ONLY						
		12 1/2' D	bottom (see profile)					

to orange mostly silty w/ small weathered frags 12 1/2' D

adjustment to perc field (160 in low hole)

REMARKS similar orange/yellow clay/clay loams; silty loams below

TESTED BY B. N. Ryan ALSO PRESENT Glen
 All repairs to be shallow

C1 0597 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 A 40074

DATE RECEIVED

DATE WELL COMPLETED 10 20 88

DEPTH OF WELL 205 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-88-0107

OWNER WARFIELD KON last name first name STREET OR RFD PINK DUNWOOD Rd. TOWN FORTAL SPRING SUBDIVISION WINTER WOOD ST SECTION LOT 23

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, FEET TO, Check if water bearing. Rows include Top Soil, Brown Slate, Blue Slate, etc.

GROUTING RECORD WELL HAS BEEN GROUTED (Y) NO (N) TYPE OF GROUTING MATERIAL CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 24 NO. OF POUNDS 1440

CASING RECORD casing types insert appropriate code below MAIN CASING Nominal diameter Total depth

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

SCREEN RECORD screen type or open hole insert appropriate code below STEEL BRASS BRONZE PLASTIC OPEN HOLE OTHER

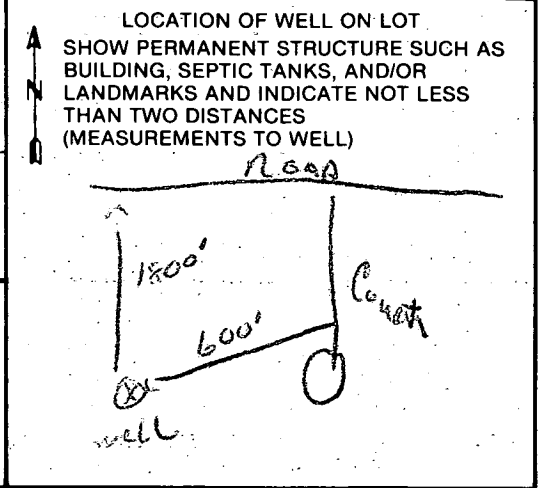
DEPTH (nearest ft.) HOLE BR 205 23 24 26 30 32 36 38 39 41 45 47 51

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

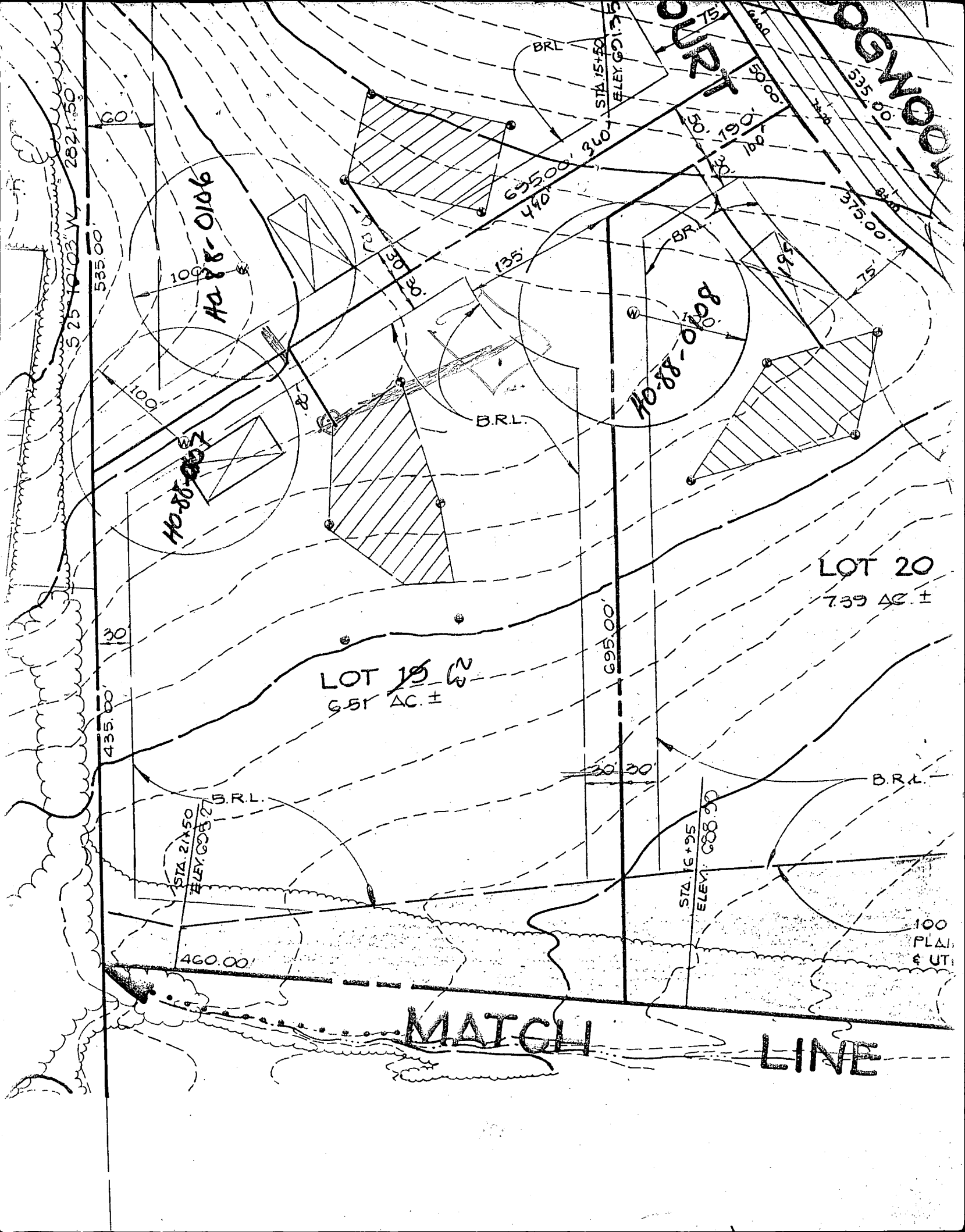
OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) WQ 70 72 74 75 76 TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST HOURS PUMPED (nearest hour) 7 PUMPING RATE (gal. per min. to nearest gal.) 10 METHOD USED TO MEASURE PUMPING RATE Submersible WATER LEVEL (distance from land surface) BEFORE PUMPING 25 WHEN PUMPING 35 TYPE OF PUMP USED (for test) C centrifugal R rotary O other (describe below) J jet S submersible

PUMP INSTALLED DRILLER WILL INSTALL PUMP YES NO IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE: CAPACITY: GALLONS PER MINUTE (to nearest gallon) PUMP HORSEPOWER PUMP COLUMN LENGTH (nearest ft.) CASING HEIGHT (circle appropriate box and enter casing height) LAND SURFACE (nearest foot)



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 10.17.13 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. DRILLERS IDENT. NO. 273 DRILLERS SIGNATURE SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)



461-9933

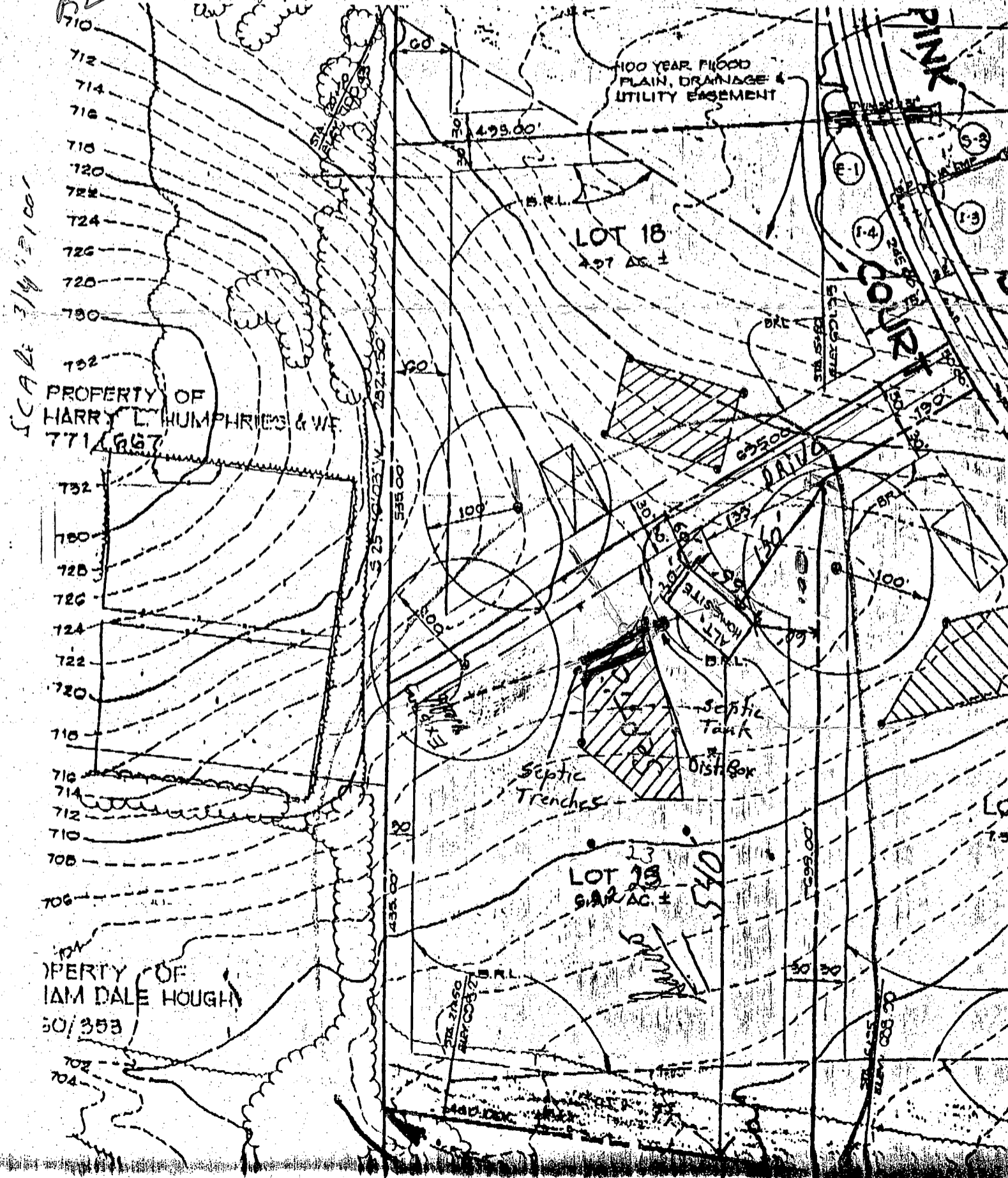
WHITEWOOD
ESTATES
Lot 23
17314
PINK DOGWOOD CT
BP 41067

House FF	709.5
Base and Elevation	700.45
INW out	707.0 708
Septic INW in	706.50 707
INW out	706.40
FIN grade	700
Distribution box	
INW in	705.9
INW out	705.8
Well elevation	710.0

I certify that the above measurements are actual and correct for this property.

Signed: *Val H. Hoge*

2/25/92
REVISED PLANS OIC
RH



PROPERTY OF HARRY L. HUMPHRIES & WIFE 771/867

PROPERTY OF IAN DALE HOUGH 50/353

A 40074
P 47855

3/24/99

Applicant came to office to get "approval" for pole barn.

Based upon general discussion & review of existing well & septic, barn is stated to be at least 200' from any neighboring dwelling.

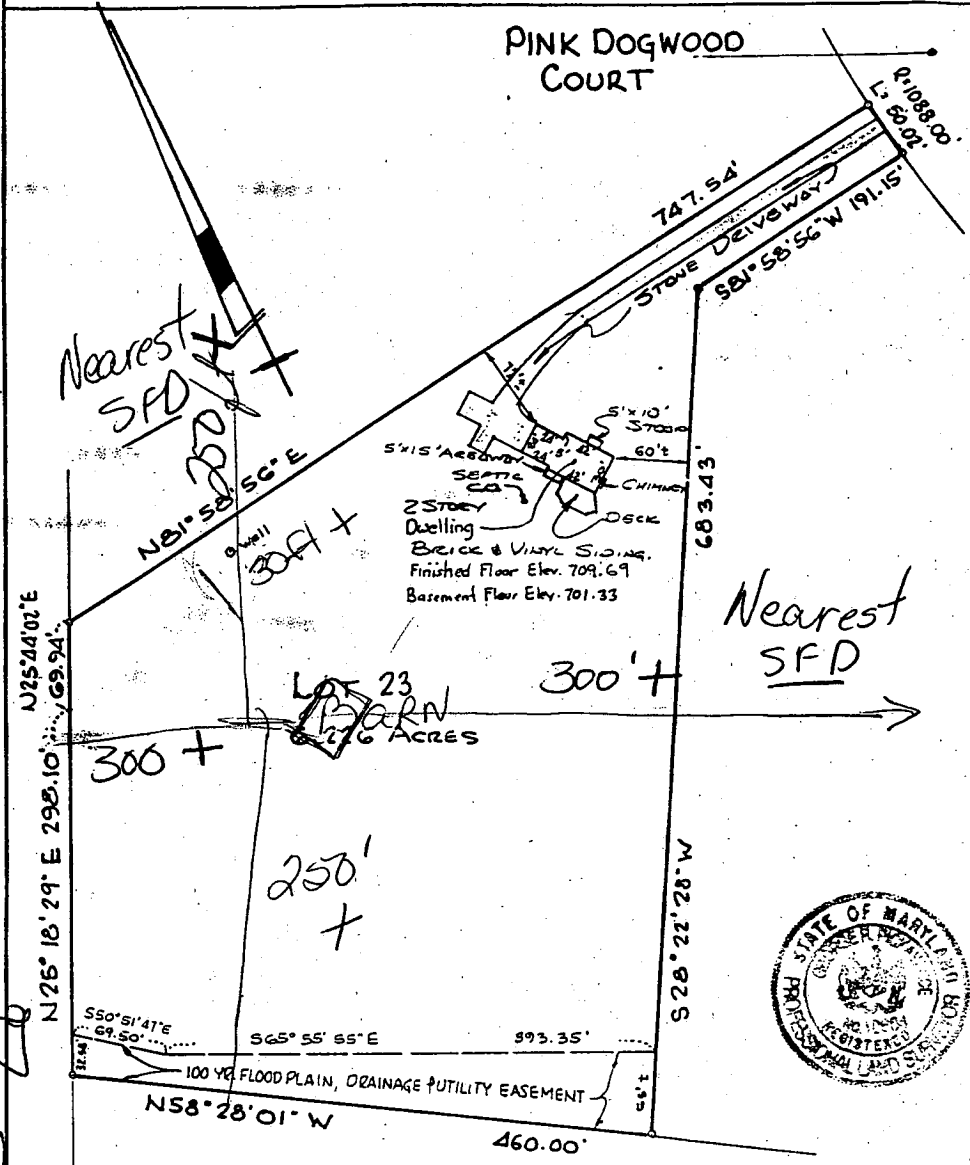
Applicant confirmed that barn would not be in any P/OJ septic reserve & that at least 30' distance will be maintained from well -

by fencing to keep 2 horses away -

(B)

BPR INC.

359 MANCHESTER ROAD
WESTMINSTER, MARYLAND 21157
301-878-0333, 857-9030



LOCATION SURVEY
LOT 23 SHEET 4 OF 5
WHITE WOOD ESTATE
 FOURTH ELECT. DIST HOWARD CO. MARYLAND
 RECORD PLAT REF: CMP No. 824G

I hereby certify that I have surveyed the property shown hereon for the purpose of locating the improvements only, and the improvements are located as shown. Exact property corners have not been established or set. My assumption no responsibility or liability for any rights-of-way or easements recorded or unrecorded, not appearing on the record plat and/or mentioned in the title deed referred to hereon.

Signed this 24th day of March 19 92
[Signature]
 SURVEYOR

SCALE 100 ft. = 1 inch

Revisions and Updates
 May 19, 1992 Add floor elevations GLP
 3-25-94-UPDATE LOCATION SURVEY E

17314 PINK DOGWOOD COURT 94-001-C

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

800116829

Building Address 17314 Pink Dogwood
MT Airy MD 21771

Property Owner's Name Angelo M. Lona
 Address 17314 Pink Dogwood Ct
 City MT Airy State MD Zip Code 21771
 Home Phone 410-795-3528 Work Phone 301-688-4965
 Applicant's Name & Mailing Address, (if other than stated hereon):

Suite/Apt. #: _____ SDP/WP/Petition #: _____
 Census Tract 6040 Subdivision White Wood Estate
 Section N/A Area N/A Lot 23
 Tax Map 7 Parcel 1 Grid 1

Zoning RC-DECM Map Coordinates _____ Lot size 6.226

Existing Use Vacant Land
 Proposed Use Storage & horse
 Estimated Construction Cost \$ 8537.00

Description of Work Open Pole barn
32x28 FOR STORAGE
AND HOUSING 2 stalls
FARM ANIMALS

Occupant or Tenant owner

Contact Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Phone _____ Fax _____

Contractor Company Conestoga

Contact Person Eric Shank

Address 202 Oclan Rd

City New Holland State Pa Zip Code 17557

License No. _____

Phone _____ Fax _____

Engineer or Architect Company _____

Contact Person Same as above

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: _____	Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private
No. of stories: _____	Sewage Disposal: <input type="checkbox"/> Public <input 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: <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <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	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads _____
<input type="checkbox"/> State Certified Modular	

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

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.

Lona A Sauro
 Applicant's Signature
owner
 Title/Company

LONA A SAURO
 Print Name
3/24/99
 Date

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

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#:
Land Development, DPZ			Front: _____	Filing fee \$ _____
State Highways			Rear: _____	Permit fee \$ _____
Building Official			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ			Side St.: _____	Sub-total paid \$ _____
Health	<u>3/24/99</u>	<u>B. Nijer</u>	All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	Add'l permit fee \$ _____
Fire Protection			Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>			Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Lot Coverage for NewTown Zone _____	Check # _____
ONE STOP SHOP: <input type="checkbox"/>			SDP/Red-line approval date _____	Validation # _____
			Accepted by _____	

Distribution of Copies- White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA