

03-314103

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED

P 44704

A 40589

DISTRICT 6th

DATE 7/11/89

DATE SYSTEM APPROVED 11/29/88

INSPECTOR RH

Paul Schissler/South Carroll Backhoe, Inc. IS PERMITTED TO INSTALL ALTER

ADDRESS 4410 Salem Bottom Road, Westminster, Maryland PHONE 875-4197

SUBDIVISION Roscommon Estates ROAD 3212 Rosway Court LOT 13

PROPERTY OWNER ~~ST F Contractors~~ Steven + Deborah Cieri

ADDRESS ~~Rosewood Heights~~ Steven + Deborah

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 - 210 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 7 feet below original grade. Effective area begins at 3 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Start the first trench 130 feet from the ^{EDGE} center of Rosway Court and 55 feet from the right lot line. Run trenches along contour toward right lot line.

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

PLANS APPROVED BY C. Williams DATE 10/17/88

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 SPECIFIED)

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

BUILDING PERMIT SIGNED AND RETURNED
3-10-04 B00146177-FRONT ARCH

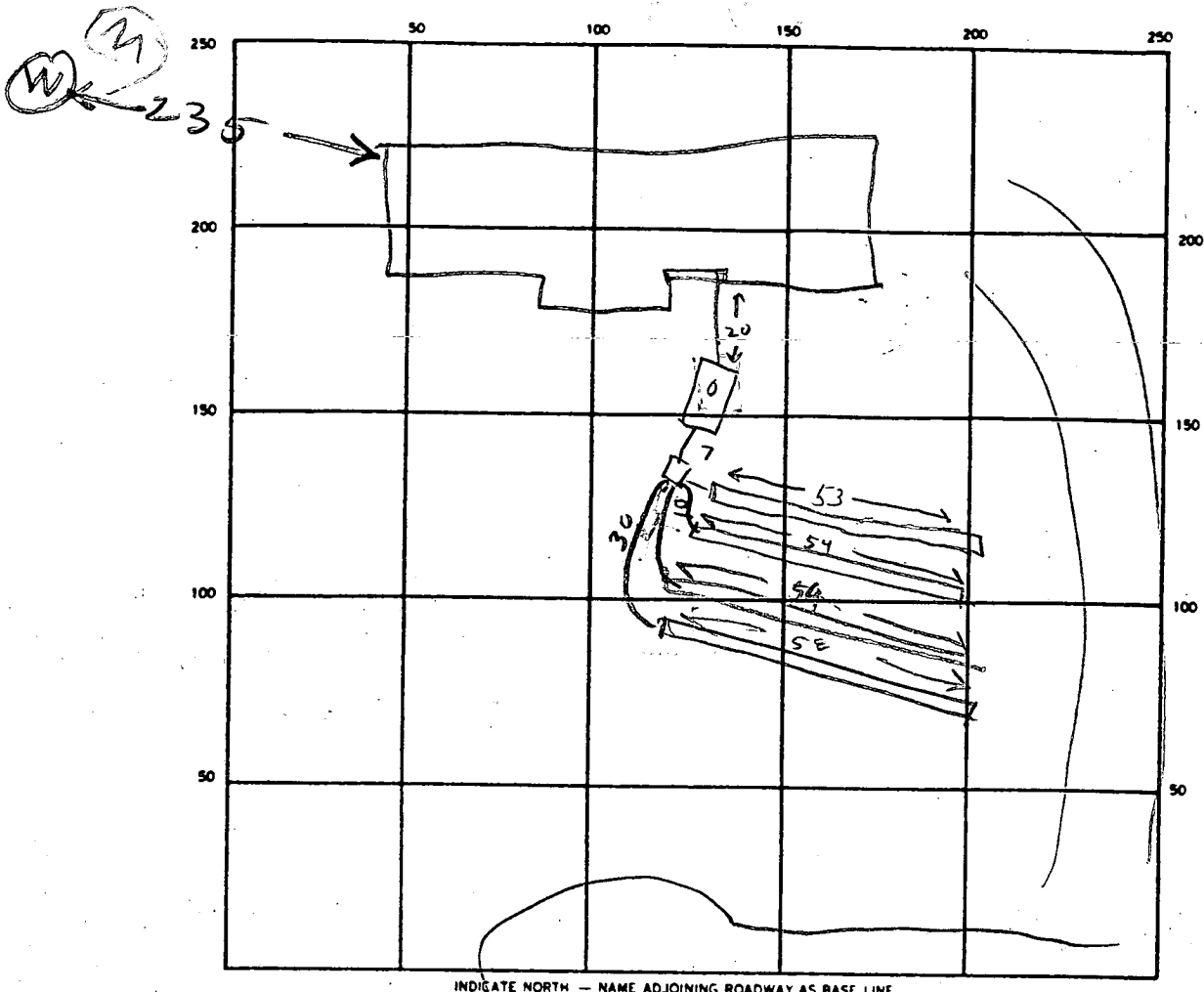
***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT**

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

A 40589

11/29/89
11/30/89
APPLICATION

N.



SEPTIC TANK LEVEL ✓ CLEANOUTS STV

DISTRIBUTION BOX LEVEL ✓

DRAIN FIELD/TILE FIELD. DEPTH 7 7/8 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3 3/8 FT.

EFFECTIVE GRAVEL DEPTH 4 4/4 FT. TOTAL LENGTH 53 | 54 | 56 | 58 FT.

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

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

ABSORBENT AREA _____ SQ. FT.

REMARKS 11/29/89 11:45 AM HOUSE - TO TANK - TO DIST. BOX OR TO COVER. CWJ

11/29/89 1ST TRENCH OR TO COVER, CWJ

11/30/89 11:45 AM COVER TRENCH #1 & 2 ADD STONE TO TRENCH #3

11/30/89 2:20 PM DIG TRENCH #4 TRENCHES 3 & 4 OK

DATE SYSTEM APPROVED 11/30/89 INSPECTOR Raymond Hodge

APPLICATION

PERCOLATION TESTING

A 405889

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

P _____

DISTRICT 6th

DATE 11-3-87

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 Barbara Jarnady S.F. CONTRACTORS

ADDRESS Christopher Rd, Cecilton MD 21913 PHONE 275-2233

PROSPECTIVE BUYER Clayton Kemp

ADDRESS 8307 main st, Ellicott City PHONE 465-4920

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 13

ROAD AND DESCRIPTION 3100 Peffercorn Rd.
3212 Rosway Ct.

TAX MAP 15 PARCEL # 170 + 177

SIZE OF LOT 3.0+ TYPE BLDG Single family
(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.

Christine A. Richards
(SIGNATURE OF APPLICANT)

APPROVED BY Sid Abel FOR Deep trenches DATE 6-6-89

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS SOILS OK, PLAT REQ'D, CW DATE 1/27/88

REASONS FOR REJECTION OR HOLDING _____

BLDG. PERMIT SIGNED
AND RETURNED 6-6-89
BT 26656

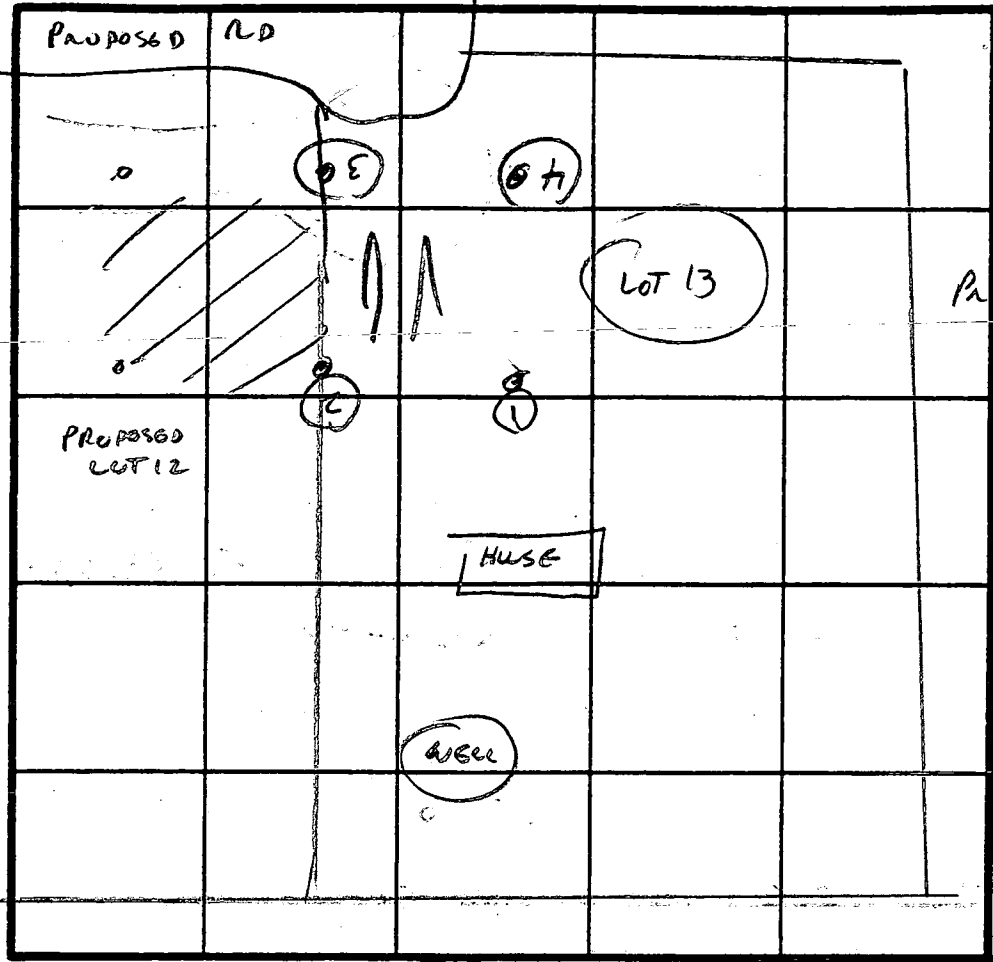
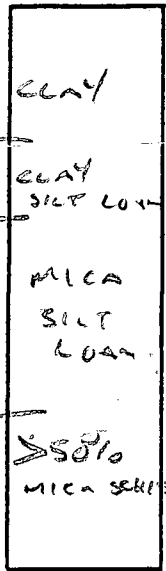
HD-216

THIS IS NOT A PERMIT

A40589
LOT 13

PROPOSED LOT 15

SOIL PROFILE

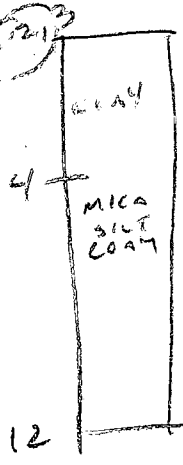


PROPOSED LOT 14

INITIAL SYSTEM
OK TO 7' SW

200 ft
INLET 3'
BOTTOM 6'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.



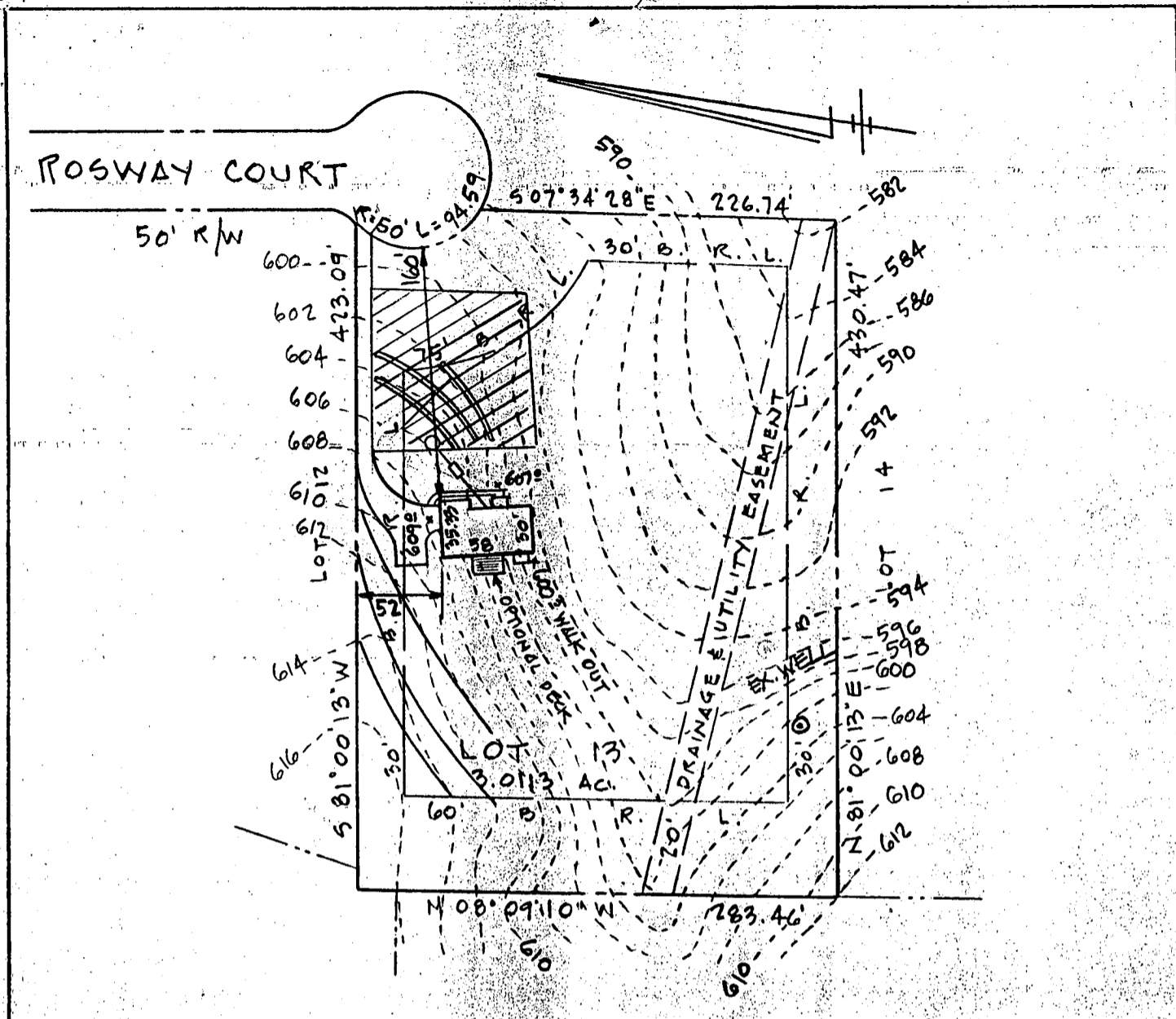
DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
1/27/88	1	4 8	VLS	OK	LOAM		✓	
		10	ROCK					
1/27/88	2	4 7	1:09	1:15	1:15	1:22	7 MIN	✓
		12	VLS	OK				
1/27/88	3	4 1/2 7	1:04	1:07	1:07	1:11	4 MIN	✓
		12	VLS	OK				
1/27/88	4	4 8	VLS	OK	LOAM		✓	
		10	ROCK					

REMARKS "AS PER TEST PLAT" NO DEEPER THAN 6' - ROCK AT 10' HOLE 144

TYPE OF SOIL MICA LOAM

TESTED BY C. Wallin ALSO PRESENT KOTTGMAN

13



SEPTIC DATA

HOUSE	FIN. FL.	6102 ⁰ ✓
"	BSM'T	601 ⁰ ✓
"	SEWER INV.	603 ⁰ ✓ - BSMT
SEPTIC TANK	INV. IN	602 ⁰ ✓
"	" OUT	6023 ✓
"	FIN. GR.	605 ⁰ ✓
DISTR. BOX	INV. IN	602 ⁰ ✓
"	" OUT	601 ⁰ ✓
"	FIN. GR.	605 ⁰ ✓
WELL	EX. GR.	603 ⁰ ✓
	FIN. "	"

NOTE!

1. HOUSE TYPE: 2 STY W/FULL BSM'T.
2. ADDRESS: 3212

EXIST. TRENCH 604'

BUILDER
S.F. CONTRACTORS, INC.
3368 BRANTLY COURT
GLENWOOD, MD. 21738
301-442-1133

BUDG. PERMIT SIGNED
AND RETURNED 6-6-89
BP 26656
JAL

GRADING	STUDY
LOT 13 "ROSCOMMON ESTATES"	
3 RD ELECTION DISTRICT HOWARD COUNTY - MD.	
SCALE 1"=100'	MAY 24, 1989

From:

S.F. Contractors, Inc
3368 BRANTLY CT
GLENWOOD, MD. 21738
301-442-1751

17-14-89

To: Mr. CRAIG Williams

HOWARD Co. HEALTH DEPT.

IN REF. TO: LOT 13 ROSCOMMON ESTATES
3212 ROSWAY CT
GLENELG MD. 21737

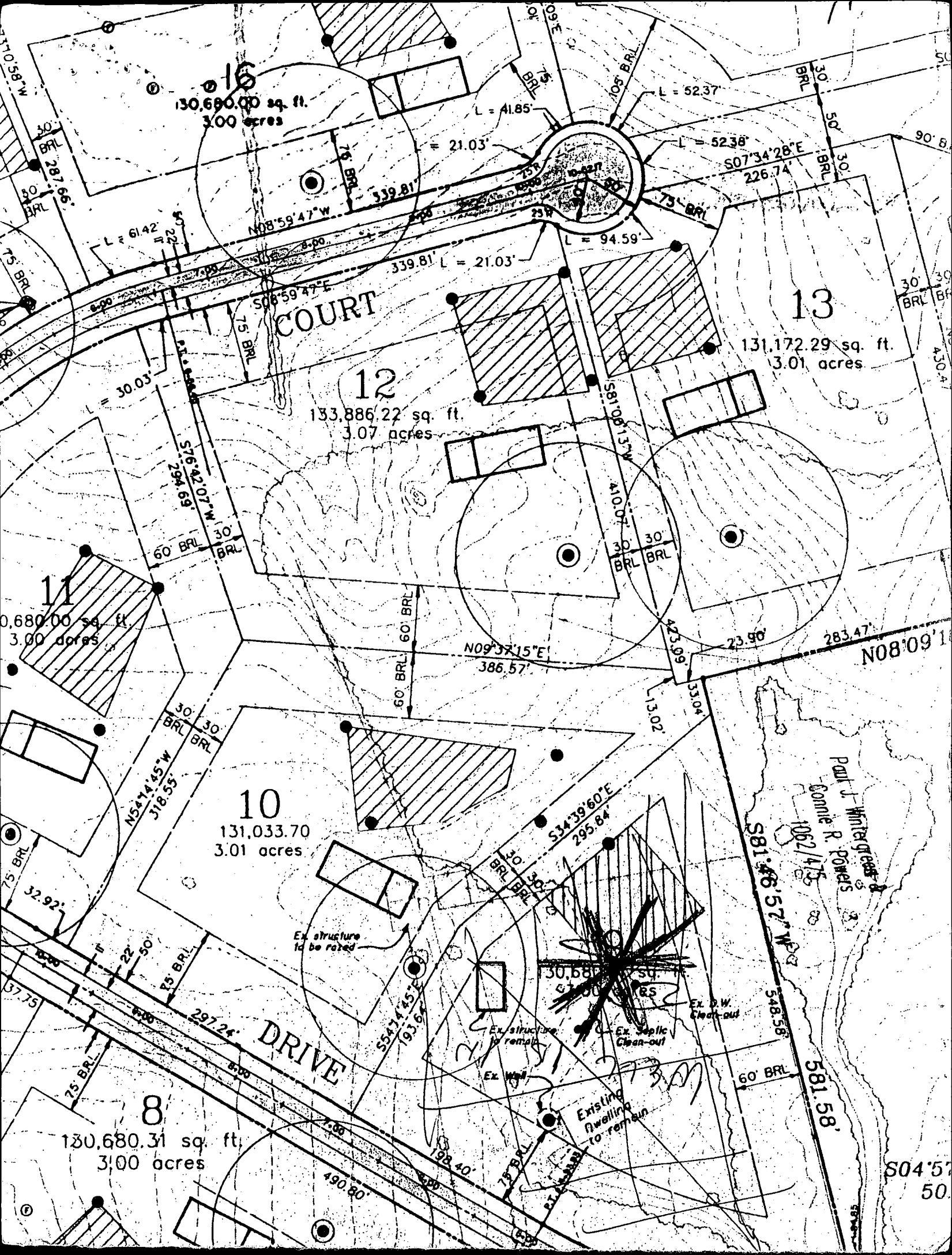
I WOULD LIKE TO MOVE THE SEPTIC
AREA FORWARD TOWARD THE STREET.
WHICH IS AWAY FROM THE WELL & DOWN
HILL OF THE HOUSE. AT NO POINT IS
THE LOW HOLE OF THE SEPTIC ANY LOWER
THEN IT IS RIGHT NOW. WE WOULD STILL
HAVE 10,000 + SQ FT FOR THE FIELD
AND WOULD REMAIN 10 FT FROM THE FRONT
PROPERTY LINE & THE HOUSE WOULD BE 20'
FROM THE SEPTIC

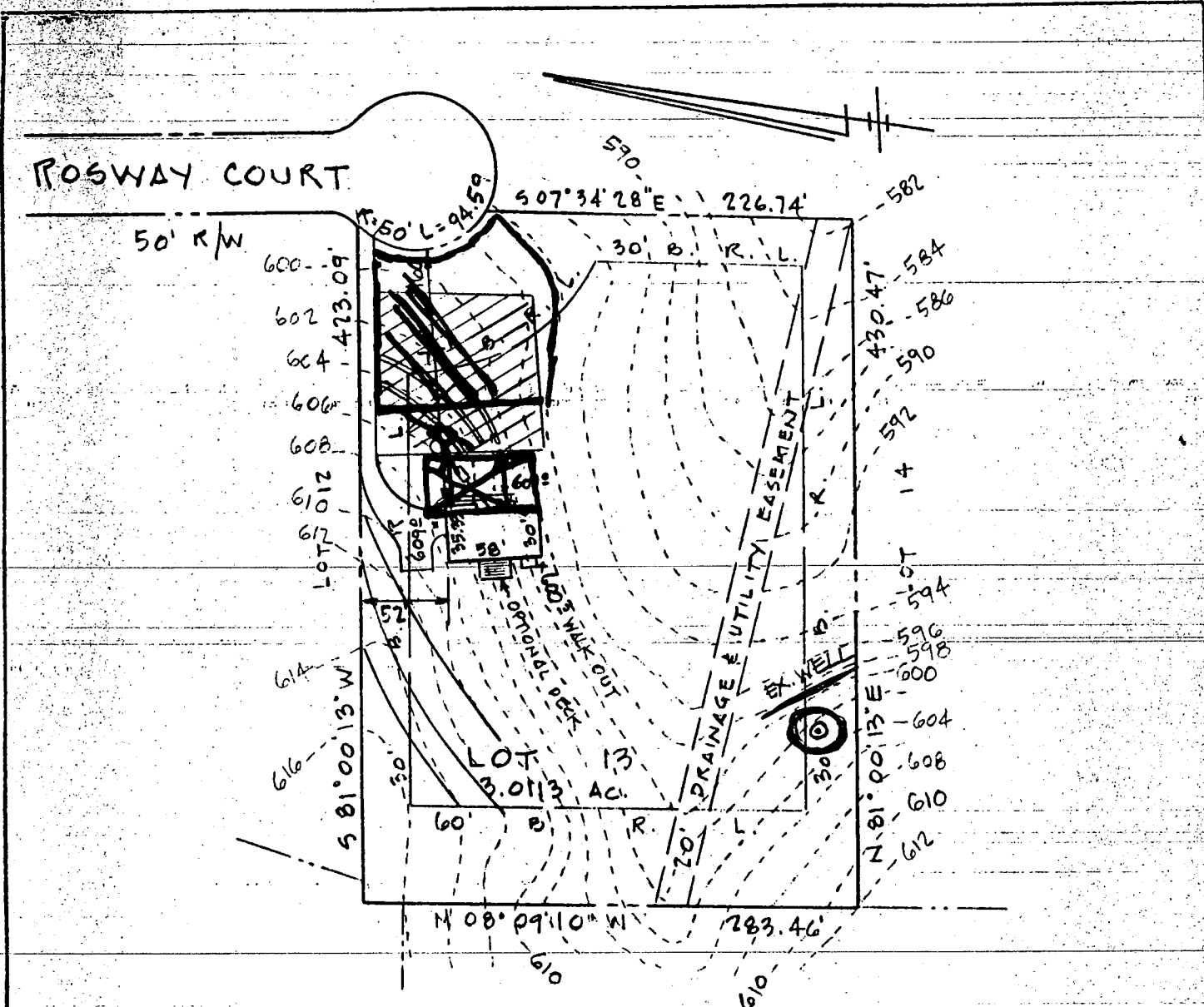
THANK YOU

Stephen F. Honey

ACCEPTED "IN PRINCIPLE" -

PLEASE SUBMIT ^{HOUSE} REVISED LOCATION TO
BUILDING PERMIT OFFICE FOR REVIEW





SEPTIC DATA

HOUSE	FIN. FL.	610 ⁰
"	BSM'T	601 ⁰
"	SEWER INV.	603 ²
SEPTIC TANK	INV. IN	602 ⁶
"	" OUT	602 ³
"	FIN. GR.	605 ⁶
DISTR. BOX	INV. IN	602 ⁰
"	" OUT	601 ⁰
"	FIN. GR.	605 ⁰
WELL	EX. GR.	603 ⁰
"	FIN. "	"

NOTE:

1. HOUSE TYPE: 2 STY W/FULL BSM'T
2. ADDRESS: 3212

BUILDER

G.F. CONTRACTORS, INC.
 3368 BRANTLY COURT
 CHELSEA, MA 01822

B 1 7901

SEQUENCE NO. (DP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

please print or type

STATE PERMIT NUMBER

H0-88-0245

fill in this form completely

Date Received (APA)

100588

OWNER INFORMATION

SOFTENERS INC

3308 BIVIVUT AV CUKA

Kenwood 7071739

B 3

LOCATION OF WELL

11 HOWARD

23 SUBDIVISION PESSAMINGW FEVHIS

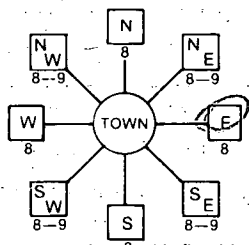
SECTION 44 46 LOT 48 50 13

52 NEAREST TOWN KENWOOD

MILES FROM TOWN (enter 0 if in town) 2 MI

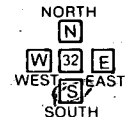
B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



11 ROADWAY COURT NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



34 300 37 DISTANCE FROM ROAD

ENTER FT or MI FT

B 2

WELL INFORMATION

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

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- [D] HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
[F] FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
[] INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
[P] PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
[T] TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

HOWARD COUNTY NAME

A# 405882 COUNTY NO.

STATE SIGNATURE DATE ISSUED

101788 CO SIGNATURE EXP. DATE 4/2/89

NORTH GRID 526000 EAST GRID 0801000

APPROXIMATE DEPTH OF WELL 240 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH

METHOD OF DRILLING (circle one)

- BORED (or Augered) JETTED Jetted & DRIVEN
AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)
CABLE REVERSE-ROTARY DRIVE-POINT
other

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

- [N] THIS WELL WILL NOT REPLACE AN EXISTING WELL
[Y] THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
[S] THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
[D] THIS WELL WILL DEEPEM AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)

Not to be filled in by driller (OEP USE ONLY)

APPROP. PERMIT NUMBER GAP

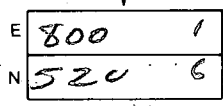
FORCE SA PERMIT No. H0-88-0245

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

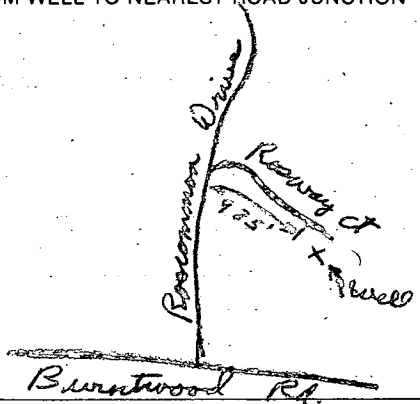
SOURCES OF DRILLING WATER

- 1. well
2.
3.

WRITE THE BOX NUMBER FROM THE MAP HERE



DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION



C1 0561

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 # 405889

DATE RECEIVED

DATE WELL COMPLETED

Depth of Well 125 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" H0-88-0245

OWNER S.F. CONTRACTORS INC. STREET OR RFD last name ROSWAY COURT first name TOWN GLENWOOD SUBDIVISION ROSS COMMON EST. SECTION LOT 13

WELL LOG table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Includes handwritten entries: SAND Stone 0 37, Gravel Mica Rock 37 125.

GROUTING RECORD. WELL HAS BEEN GROUTED (Y). TYPE OF GROUTING MATERIAL: CEMENT CM, BENTONITE CLAY BC. NO. OF BAGS 9, NO. OF POUNDS 810. GALLONS OF WATER 54. DEPTH OF GROUT SEAL from 0 to 31 ft.

CASING RECORD. casing types insert appropriate code below: ST (STEEL), CO (CONCRETE), PL (PLASTIC), OT (OTHER). MAIN CASING TYPE ST, Nominal diameter 4 inch, Total depth 42 feet.

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

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

DEPTH (nearest ft.) table with handwritten values: H0 39, 125.

A 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...

DRILLERS IDENT. NO. 238

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

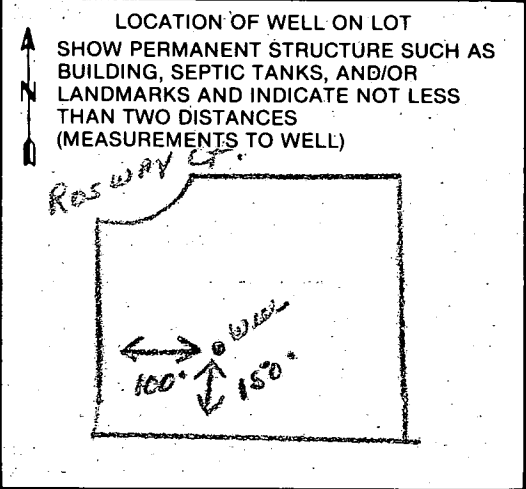
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

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

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

PUMPING TEST. HOURS PUMPED (nearest hour) 3. PUMPING RATE (gal. per min. to nearest gal.) 15. METHOD USED TO MEASURE PUMPING RATE Bucket. WATER LEVEL (distance from land surface) BEFORE PUMPING 35, WHEN PUMPING 35. TYPE OF PUMP USED (for test) 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: S. 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 3 (nearest foot).



COUNTY

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

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation Replacement
Receipt # 45053
Date 10/12/89
Name of Installer CLARKE P & H INC Telephone 489-4029
License Number _____
Certified Well Pump Installer _____ Well Driller _____ Registered Plumber 3808
Name of Property Owner S.F. Contractor Inc Telephone 442-1133
Subdivision Roscommon Estate Lot # 13 Well Tag # _____
Site Address 3212 Rosway Ct

Pump
1. Type
a. Deep well jet _____
b. Shallow well jet _____
c. Submersible
2. Make Goulds
3. Model # _____
4. Capacity _____ GPM
5. Pump exceeds well capacity Yes _____ No _____
6. If Yes, is low pressure cutoff switch installed? Yes _____ No _____
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors _____ Cable guards _____ Other _____

Motor
1. Horsepower _____
2. RPM _____
3. Voltage _____
a. 110 _____
b. 220

Pitless Adapter
1. Make _____
2. Model # PT 800
3. Depth _____

Tank
1. Capacity 66gal
2. Pressure relief valve? 7515

Piping
1. Type Plastic
2. Size 1"
3. NSF and/or BOCA Code approved _____
4. Depth of supply line 42"

Well data
1. Depth _____ ft.
2. Yield _____ GPM
3. Static water level _____ ft.
4. Will water supply be disinfected by installer? NO

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: Kenneth C. Clarke

Date: 9-27-89

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

Health -

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3420 COURT HOUSE DRIVE ELLICOTT CITY, MD 21043 PERMITS (410) 313-2456 INSPECTIONS (410) 313-1810 AUTOMATED INFORMATION (410) 313-3900	HOWARD COUNTY PERMIT APPLICATION	PERMIT NUMBER <u>B00146677</u>
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Building Address 3212 Roseway Ct.
Glenelg Md. 21737

Suite/Apt. #: _____ SDP/WP/Petition #: _____

Census Tract 6030 Subdivision Roseanna

Section _____ Area _____ Lot 13

Tax Map 22 Parcel 549 Grid 1

Zoning RR PFD Map Coordinates 967 Lot size _____

Property Owner's Name Debbiet Steve Cieris

Address 3212 Roseway Ct.

City Glenelg State Md Zip Code 21737

Home Phone 410-489-0923 Work Phone 410-215-5049

Applicant's Name & Mailing Address, (if other than stated hereon): _____

Phone _____ Fax _____

Existing Use SPD

Proposed Use Front Porch SPD

Estimated Construction Cost \$ 25,000

Description of Work Building Front porch on house 56x7 600 sq. ft.

Contractor Company M.H.R.R. Maryland Home Repair + Renov.

Contact Person Terry Williams

Address 11797-A Triadelphia Rd.

City E.C. State Md Zip Code 21042

License No. 51535

Phone 410-531-9979 Fax 410-531-9978

Occupant or Tenant Debbiet Steve Cieris

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

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

BUILDING DESCRIPTION - RESIDENTIAL

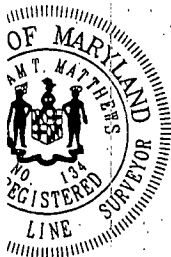
<u>Building Characteristics</u>	<u>Utilities</u>
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: _____ Public _____ Private <input checked="" type="checkbox"/>
1st floor: _____ <u>Depth</u> _____ <u>Width</u> _____	Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/>
2nd floor: _____	Electric Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Basement: _____	Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/>	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Sprinkler system: <u>N/A</u> <input type="checkbox"/> NFA #13D _____ NFA #13R _____ Other: _____
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: _____	
Other Structure: _____	
Dimensions: _____	
Footings: _____	
Roof: <u>Steel 392w</u>	
State Certified Modular _____	
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.

Ellen Williams
 Applicant's Signature
president
 Title/Company
MR 3/10/04

Ellen Williams
 Print Name
3/10/04
 Date
39201

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



Drawing

Scale: 1" = 80'

a consumer only insofar as it is title insurance company or its agent used transfer, financing or refinancing upon for the establishment or location of buildings, dwellings or other existing or proposed does this plat purport to reflect with any specific level of accuracy. This drawing is for the accurate identification of such identification may not be required for securing financing or refinancing. The location of the dwelling is shown in relation to the property lines for the property known as Rosway Court

County, Maryland

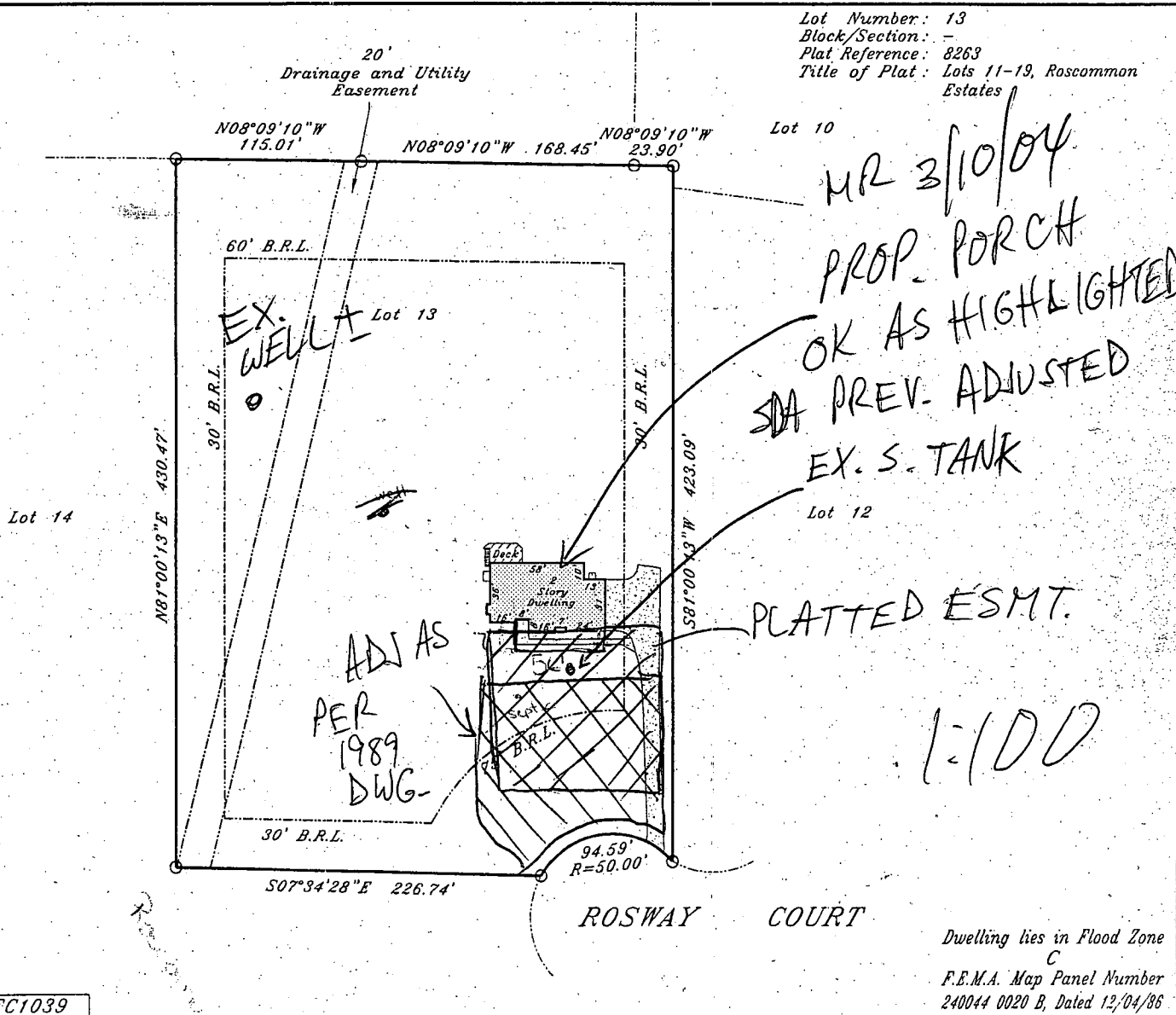
Matthews 7/12/02

Ruxton Design Corporation
 1000 Bellona Lane
 Suite 300
 Rossmore, Maryland 21204
 410-823-5000
 410-823-0115 fax

www.ruxtondesign.com

02EC1039

Lot Number: 13
 Block/Section: -
 Plat Reference: 8263
 Title of Plat: Lots 11-19, Roscommon Estates



MR 3/10/04
 PROP. PORCH
 OK AS HIGHLIGHTED
 SDA PREV. ADJUSTED
 EX. S. TANK

PLATTED ESMT.

1:100

ADJ AS
 PER
 1989
 DWG.

Dwelling lies in Flood Zone C
 F.E.M.A. Map Panel Number 240044 0020 B, Dated 12/04/86