

12-8-94  
C-0 12:00

# PERMIT

05-413389

P 50421

## SEWAGE DISPOSAL SYSTEM

A 40784

### DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT 5th

#### HOWARD COUNTY HEALTH DEPARTMENT

DATE 11/30/94

BUREAU OF ENVIRONMENTAL HEALTH

DATE SYSTEM APPROVED 12/2/94

~~313-2640~~ 313-2640

INSPECTOR Alm

**INDEXED**

Harrison Contracting

IS PERMITTED TO INSTALL  ALTER

ADDRESS 2858 Flag Marsh Road, Mt. Airy, MD 21771 PHONE 410-795-8691

SUBDIVISION The Warfields LOT 20 ROAD 14807 Sapling Way

PROPERTY OWNER Morris & Susan Weiss

ADDRESS \_\_\_\_\_

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

3180  
4  
720

240  
31720  
6  
12

BLDG. PERMIT SIGNED  
AND RETURNED 1-13-2000  
Serial # B10122121  
Inground Prod

TRENCHES - Trench to be 3 feet wide. Inlet 2.5 feet below original grade. Bottom maximum depth 4.5 feet below original grade. Effective area begins at 2.5 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Place the distribution box 125 feet down the right lot line and 70 feet off the right lot line. Run trenches on contour in both directions.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 6/14/94 DKS

PLANS APPROVED BY Mark Rifkin DATE 06/10/94

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

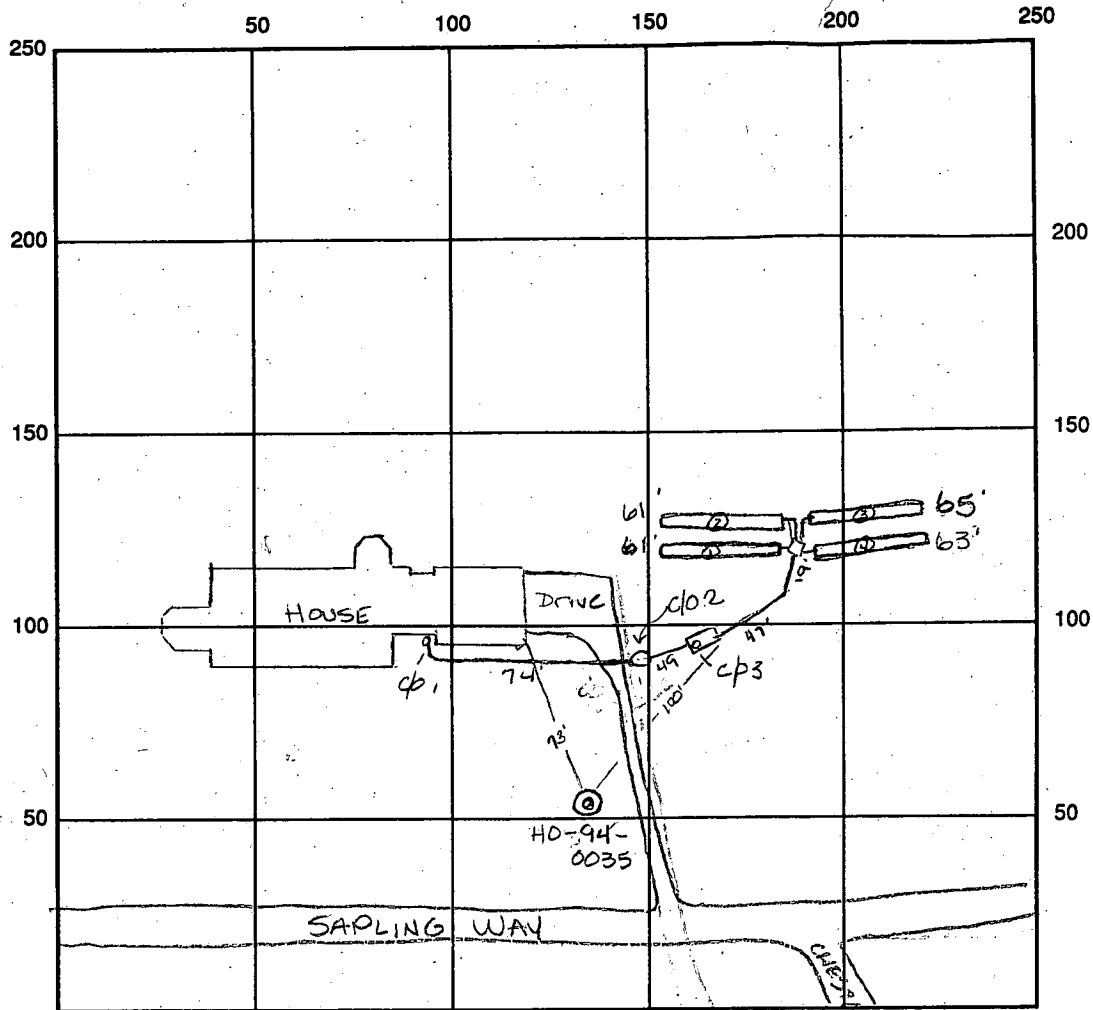
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON. CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

BLDG. PERMIT SIGNED  
AND RETURNED 5/24/95  
Serial # 59824-dcd

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

A 40784



SEPTIC TANK LEVEL OK CLEANOUTS cp#1 OK cp#2 OK cp#3 OK  
 DISTRIBUTION BOX LEVEL OK baffle is in  
 DRAIN FIELD/TITLE DEPTH 4.5 FT. TRENCH WIDTH 3' FT. INLET DEPTH 3.5 FT.  
 EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 250 linear ft  
 NUMBER OF TRENCHES 4 ~~COVERED~~ / BOTTOM AREA 750 SQ. FT.  
~~DRYWALL INSIDE DIAMETER~~ \_\_\_\_\_ FT. ~~EFFECTIVE DEPTH BELOW INLET~~ \_\_\_\_\_ FT.  
 ABSORBENT AREA \_\_\_\_\_ SQ. FT.

REMARKS: 12/8/94 <sup>12:00</sup> OK to continue - no 2nd clo required between 1 & 2; it would be in driveway if moved to 70' between 1 & 2. <sup>2:00</sup> OK to cover all work final sum

12/8/94 No WPI

DATE SYSTEM APPROVED 12/8/94 INSPECTOR Amy McMiller

# APPLICATION

PERCOLATION TESTING

A 40784

P \_\_\_\_\_

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

DISTRICT 5th

DATE 12/1/87

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 Kennard Warfield Jr. Morris & Susan Weiss

ADDRESS 14663 Triadelphia Rd PHONE 442-2337

PROSPECTIVE BUYER N/A

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

PROPERTY LOCATION:

SUBDIVISION THE WARFIELDS  
Sapling Range LOT NO. 1920 Preliminary

ROAD AND DESCRIPTION 14600 Triadelphia Rd just west of Howard Rd  
14801 Sapling Way

TAX MAP 27 PARCEL # 56

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.

Myrdal Reed  
(SIGNATURE OF APPLICANT)

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

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

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

REASONS FOR REJECTION OR HOLDING 2-1-88 PERC SATISFACTORY - Hold for Subdivision Plat. S. Act

BLDG PERMIT SIGNED  
AND RETURNED 4/29/94  
Serial # 54934-SFD-4Bun

# THIS IS NOT A PERMIT

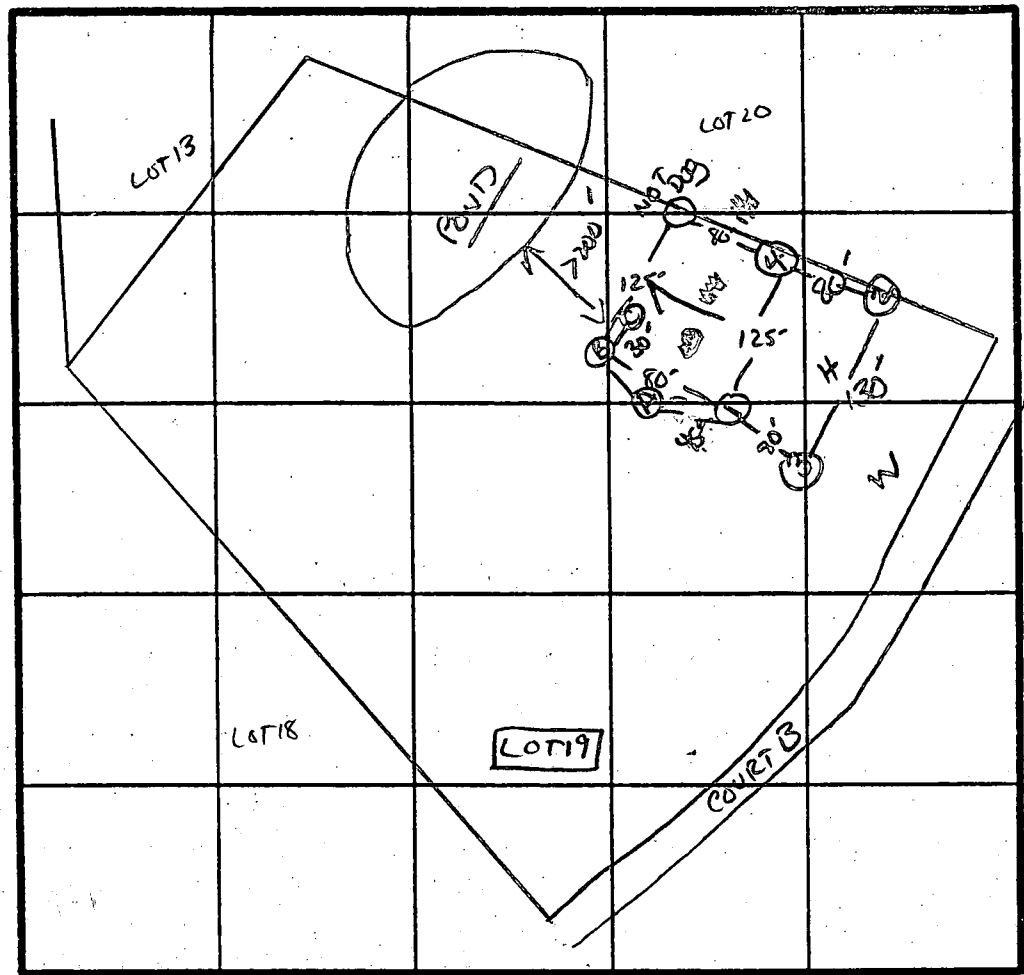
SOIL PROFILE

AP

6" Yell Br. SILTCLAY LM. <math>C10\%</math> FRASS

3" TAN w/ Yell Br. VEINS SILTLOAM Highly MICACEOUS 25-30% FRASS

9"



NO = ROCK OUTCROPS

X Perc Smir  
180 DLR  
INLET 30'  
BOTTOM 4.5'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

↳ TO TRIADOLPHIA RD.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
2/1/88	1 S	3.5'	10:50	10:52	10:52	10:57	5 MIN	
	1 V	9.0'	HARD BOTTOM - UNIFORM SOIL below 4.3'					
	2 S	3.5'	10:53	10:56	10:56	11:03	7 MIN	
		6.5'	10:52	10:55	10:55	10:59	4 MIN	
	2 V	12.0'	UNIFORM SOIL below 3.0'					
	3 V	11.5'	HARD BOTTOM - UNIFORM below 3.0'					
	4 S	3.5'	10:56	10:57	10:57	11:00	3 MIN	
		9.5'	UNIFORM SOIL FROM 3.0' - 8.5' ROCKY AT 8.5' (OK)					
	A	ROCK AT 4'						
	B	ROCK AT 4.5'						
	C	ROCK AT 3.5'						

NO ROCK OUTCROPS WITHIN EASEMENT

REMARKS Holds DIFF THAN PLAT - SHALLOW SYST only Inlet 2.5'

TYPE OF SOIL Glenela

TESTED BY SID Abel ALSO PRESENT KETTERMAN & LO MARK

C1 1675 SEQUENCE NO. (DENV USE ONLY)  
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND  
 WELL COMPLETION REPORT  
 FILL IN THIS FORM COMPLETELY  
 PLEASE PRINT OR TYPE

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.  
 COUNTY NUMBER A-40784

ST/2 USE ONLY  
 DATE RECEIVED  
 DATE WELL COMPLETED  
 032494

Depth of Well  
 22 155 26  
 (TO NEAREST FOOT)

PERMIT NO.  
 FROM "PERMIT TO DRILL WELL"  
 HC-94-0035

OWNER Warfield Kenward Jr.  
 STREET OR RFD Court St TOWN Glencol  
 SUBDIVISION The Woodlands SECTION 1 LOT 20

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

DESCRIPTION (Use additional sheets if needed)	FEET		Check if water bearing
	FROM	TO	
Dirt	0	1	
Soft Br. Mica & Clay	1	8	
Soft Br. Mica	8	17	
Soft & Hard Br. & Blue Sandstone	17	35	
Hard Blk. Sandstone	35	60	
Br. Sandstone	60	63	X
Hard Blk. Sandstone	63	74	
Br. Sandstone	74	75	X
Hard Blk. Sandstone	75	88	
Br. Sandstone	88	90	
Hard Blk. Sandstone	90	135	X
Br. Sandstone	135	136	
Hard Blk. Sandstone	136	155	

GROUTING RECORD  
 WELL HAS BEEN GROUTED (Circle Appropriate Box)  
 TYPE OF GROUTING MATERIAL  
 CEMENT CM BENTONITE CLAY BC  
 NO. OF BAGS 25 NO. OF POUNDS 2350  
 GALLONS OF WATER 150  
 DEPTH OF GROUT SEAL (to nearest foot)  
 from 0 ft. to 50 ft.  
 (enter 0 if from surface)

CASING RECORD  
 casing types insert appropriate code below  
ST CO  
 STEEL CONCRETE  
PL OT  
 PLASTIC OTHER

MAIN CASING TYPE  
 Nominal diameter top (main) casing (nearest inch)  
 Total depth of main casing (nearest foot)  
S T 6 52  
 60 61 63 64 66 70

OTHER CASING (if used)  
 diameter depth (feet)  
 from to  
P L 4 100 115  
P L 4 125 135  
P L 4 145 155

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

DEPTH (nearest ft.)  
 EACH SCREEN  
P L 90 100  
P L 115 125  
P L 135 145

CIRCLE APPROPRIATE LETTER  
 A 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. 256  
 DANA KYKER JR II  
 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)  
 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

SLOT SIZE .010  
 DIAMETER OF SCREEN 4 (NEAREST INCH)  
 from 155 to 45  
 GRAVEL PACK  
 IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68 20 30 5-13

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

PUMPING TEST  
 HOURS PUMPED (nearest hour) 3  
 PUMPING RATE (gal. per min. to nearest gal.) 12  
 METHOD USED TO MEASURE PUMPING RATE submersible  
 WATER LEVEL (distance from land surface)  
 BEFORE PUMPING 49  
 WHEN PUMPING 53  
 TYPE OF PUMP USED (for test)  
 A air P piston T turbine  
 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 HORSE POWER  
 PUMP COLUMN LENGTH (nearest ft.)  
 CASING HEIGHT (circle appropriate box and enter casing height)  
 (+) above LAND SURFACE  
 (-) below (nearest foot) 2

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)

*Supplies Well*

1/17/95  
ASPP  
1-17/95

Logged out

(A.M.) Seen 1/18/95

Final  
CBS

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 # \_\_\_\_\_  
Date 1/17/95

Name of Installer G. DONALD DEMENT

Telephone 301-384-6493

License Number #276

Certified Well Pump Installer \_\_\_\_\_ Well Driller \_\_\_\_\_ Registered Plumber

Name of Property Owner MORRIS WEISS

Telephone 410-531-2888

Subdivision THE WARFIELDS Lot # 2D

Well Tag # HO-94-0035

Site Address HARDY SAPLINE WAY

Pump

- Type
  - Deep well jet \_\_\_\_\_
  - Shallow well jet \_\_\_\_\_
  - Submersible
- Make Summit
- Model # 9248-D15
- Capacity 6 GPM
- Pump exceeds well capacity Yes \_\_\_\_\_ No
- If Yes, is low pressure cutoff switch installed? Yes \_\_\_\_\_ No \_\_\_\_\_
- What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors  Cable guards  Other \_\_\_\_\_

Motor

- Horsepower 3/4
- RPM \_\_\_\_\_
- Voltage \_\_\_\_\_
  - 110 \_\_\_\_\_
  - 220

Pitless Adapter

- Make MART.
- Model # \_\_\_\_\_
- Depth 48"

Tank

- Capacity 60
- Pressure relief valve?

Piping

- Type Poly
- Size 1
- NSF and/or BOCA Code approved \_\_\_\_\_
- Depth of supply line 4'

Well data

- Depth 150 ft.
- Yield 10 GPM
- Static water level 35' ft.
- Will water supply be disinfected by installer?

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: G. Donald Dement

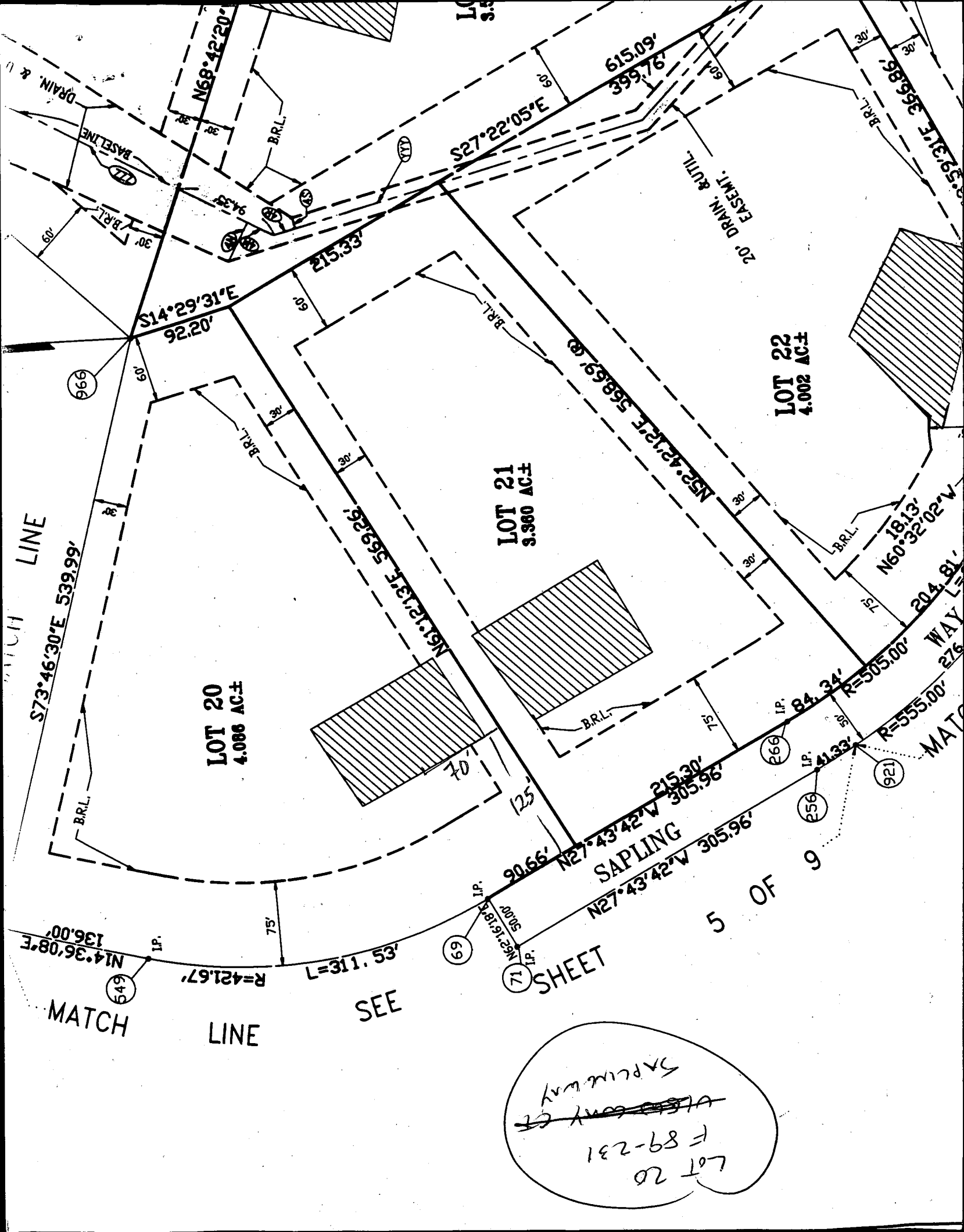
Date: 1-17-94

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

HD-215 1/18 Note: Most of line mud covered. CBS

2 Notes: seen at well casing.  
+ @ some and in line done CBS

3 No other papers work with this. CBS



Lot 20  
 F 89-231  
~~ALSO ONLY ST~~  
 SAPLING WAY

LOT 41

LOT 40

COURT B  
sapling way  
42044 DIS/CAS

SHEET

SEE

LOT 19

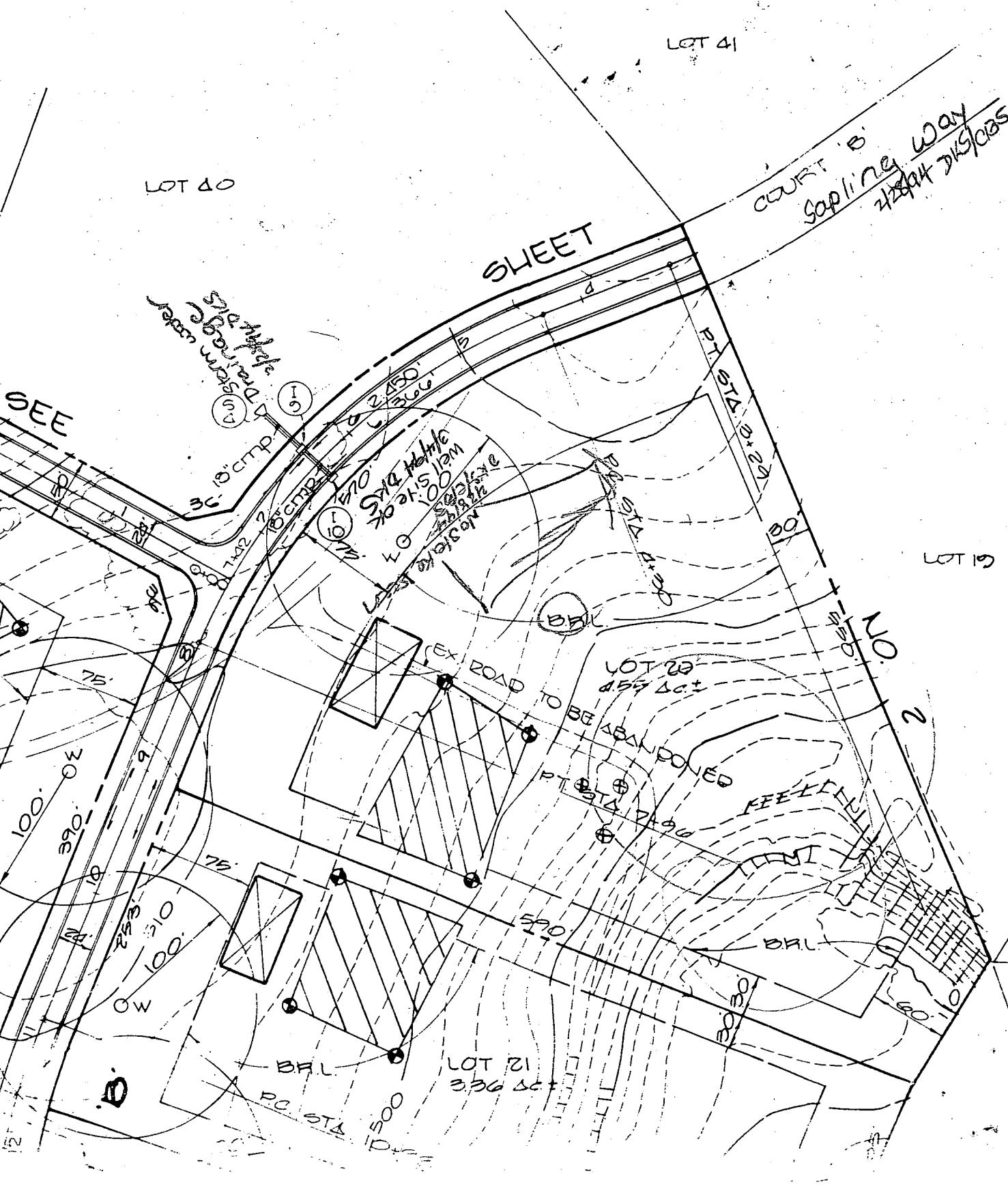
N.O.

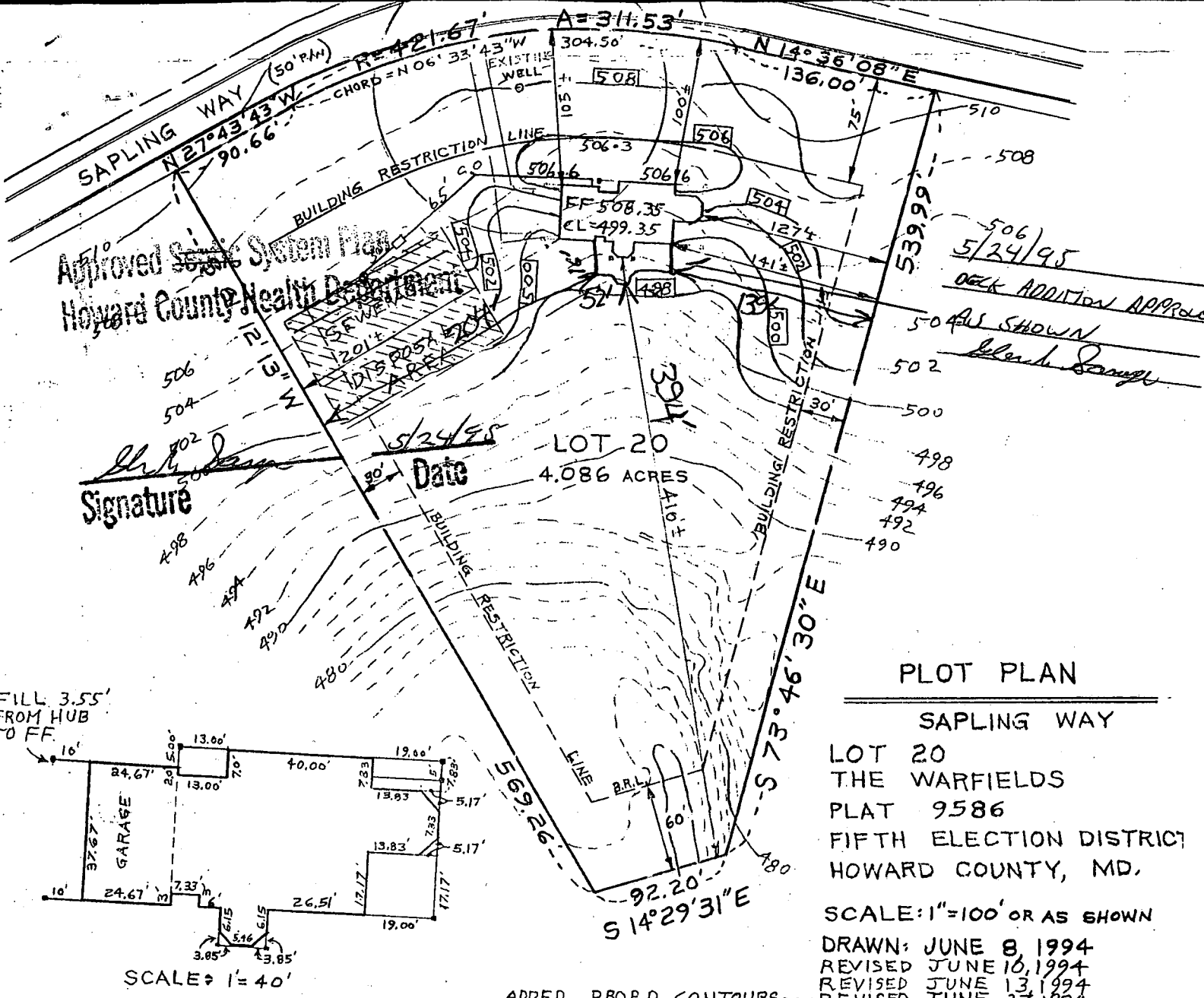
LOT 20  
455 Act

TO BE ABANDONED

FEEL

LOT 21  
336 Act





**PLOT PLAN**

SAPLING WAY  
 LOT 20  
 THE WARFIELDS  
 PLAT 9586  
 FIFTH ELECTION DISTRICT  
 HOWARD COUNTY, MD.

SCALE: 1"=100' OR AS SHOWN  
 DRAWN: JUNE 8, 1994  
 REVISED JUNE 10, 1994  
 REVISED JUNE 13, 1994  
 REVISED JUNE 27, 1994

EXIST, GRN. AT DISTR. BOX	505.00
INV. IN DISTR. BOX	502.00
INV. OUT OF SEPTIC TANK	502.45
INV. INTO SEPTIC TANK	502.85
INV. OUT OF DWELLING	505.55
FIRST FLOOR ELEV.	508.35
CELLAR ELEV.	499.35
WELL ELEV.	507.80
NO. OF BEDROOMS	4
ACREAGE	4.086 AC

**NOTE:**  
 LENGTH OF TRENCH TO BE DETERMINED BY HEALTH DEPARTMENT AT TIME OF SEPTIC SYSTEM PERMIT APPROVAL

--- DENOTES EXISTING CONTOURS  
 [500] ELEV. DENOTES PROPOSED CONTOURS

I CERTIFY THE ABOVE MEASUREMENTS AND ELEVATIONS ARE ACTUAL AND CORRECT FOR THIS PROPERTY.

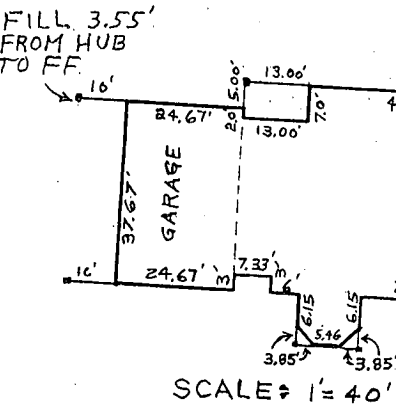
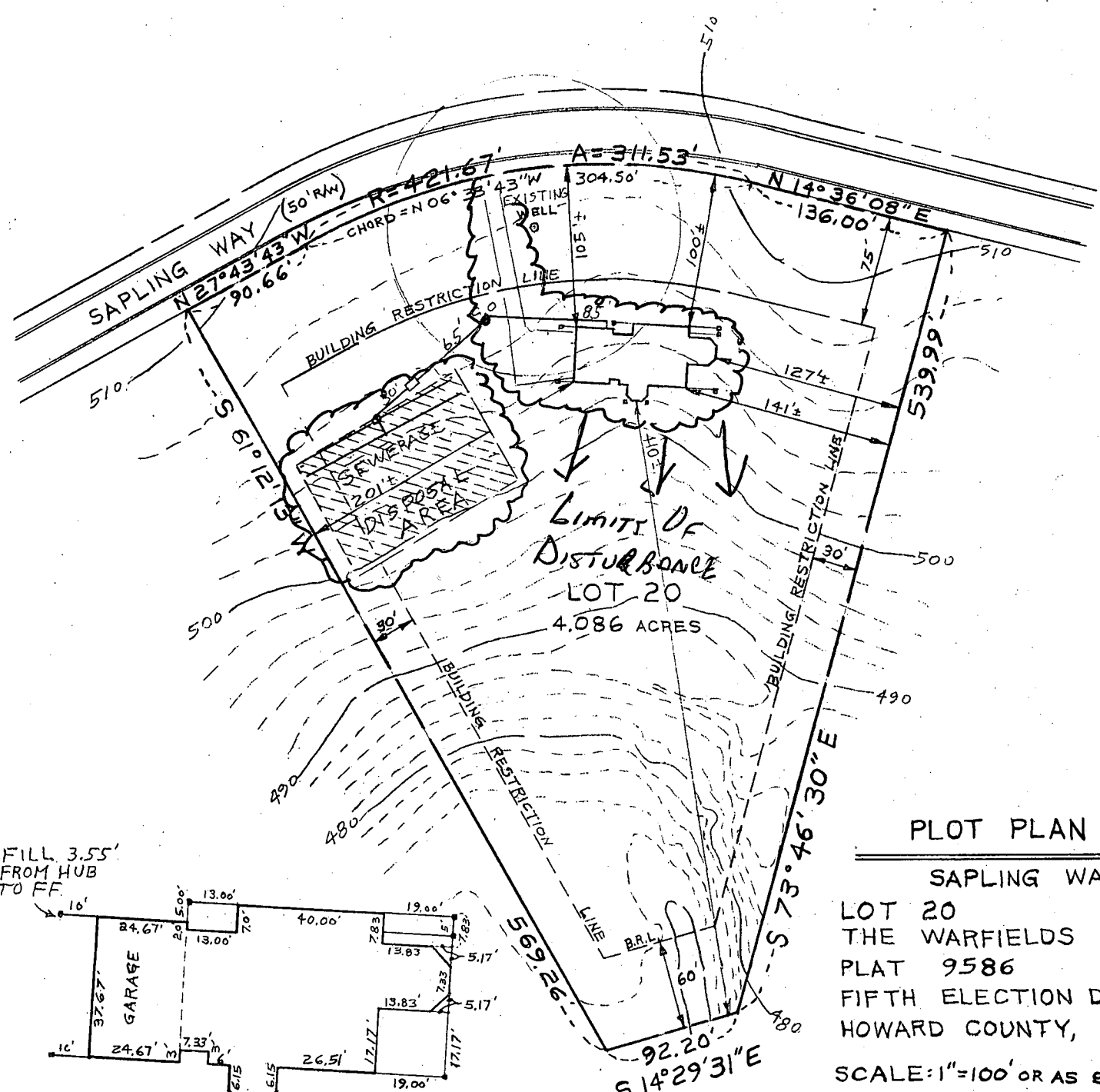
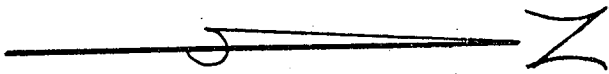
signed William E. Doyle



# William E. Doyle

LAND SURVEYOR 8440

8312 EMERALD DRIVE SYKESVILLE, MARYLAND 21784 PHONE (301) 795-2210



### PLOT PLAN

SAPLING WAY  
 LOT 20  
 THE WARFIELDS  
 PLAT 9586  
 FIFTH ELECTION DISTRICT  
 HOWARD COUNTY, MD.

SCALE: 1" = 100' OR AS SHOWN  
 DRAWN: JUNE 8, 1994  
 REVISED JUNE 10, 1994  
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**NOTE:**

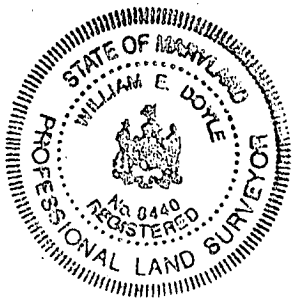
- LENGTH OF TRENCH TO BE DETERMINED BY HEALTH DEPARTMENT AT TIME OF SEPTIC SYSTEM PERMIT APPROVAL
- NO BASEMENT SERVICE FOR DWELLING

EXIST, GRN. AT DISTR. BOX	505.00
INV. IN DISTR. BOX	502.00
INV. OUT OF SEPTIC TANK	502.45
INV. INTO SEPTIC TANK	502.85
INV. OUT OF DWELLING	505.55
FIRST FLOOR ELEV.	508.35
CELLAR ELEV.	499.35
WELL ELEV.	507.80
NO. OF BEDROOMS	4
ACREAGE	4.086 ACRES

Approved Septic System Plan  
 Howard County Health Department

CERTIFY THE ABOVE MEASUREMENTS AND ELEVATIONS ARE ACTUAL AND CORRECT FOR THIS PROPERTY.

signed William E. Doyle



Amy M. Mellen 6/29/94  
 Signature Date

- WALK DOWN -

C

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3430 COURT HOUSE DRIVE ELLICOTT CITY, MD 21043 PERMITS (410)313-2466 INSPECTIONS (410)313-1810 AUTOMATED INFORMATION (410) 313-3800	<h2 style="margin: 0;">HOWARD COUNTY</h2> <h3 style="margin: 0;">PERMIT APPLICATION</h3>	<h3 style="margin: 0;">PERMIT NUMBER</h3> <p style="font-size: 2em; margin: 0;">B00122121</p>
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Building Address 14807 SApLING WAY  
GLENELG, MD, 21737

Suite/Apt. #: \_\_\_\_\_ SDP/WP/Petition #: \_\_\_\_\_

Census Tract 6551.01 Subdivision THE WARRIELDS

Section N1/4 Area N1/4 Lot 20

Tax Map 27 Parcel 54 Grid 5

Zoning RC-DES Map Coordinates \_\_\_\_\_ Lot size 4+ ACRES

Property Owner's Name TORVA MORRIS WEISS

Address 14807 SApLING WAY

City GLENELG State MD Zip Code 21737

Home Phone 410-997-8837 Work Phone 800-997-7205

Applicant's Name & Mailing Address, (if other than stated hereon):  
C.C.M. INC; P.O. BOX: 333  
PHOENIX, MD. 21131  
 Phone 410-592-5153 Fax 410-592-3444

Existing Use EXIST. RESIDENCE (DETACHED)

Proposed Use POOL ADDITION

Estimated Construction Cost \$ 30,000

Description of Work INSTALL IN THE REAR YARD  
A 20' X 50' INGROUND RCINE-CONC.  
SWIMMING POOL + 5' FENCE PER CODE.

Occupant or Tenant THE OWNERS

Contact Name (SAME AS ABOVE)

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Contractor Company SUNRISE PREMIER

Contact Person DON SEYFFERTH

Address 1460 RITCHIE HWY, SUITE 108

City ARNOLD State MD Zip Code 21012

License No. MHC 45494

Phone 410-349-3852 Fax 410-349-3668

Engineer or Architect Company C.C.M. INC.

Contact Person AL ERDI, P.E.

Address P.O. BOX: 333

City PHOENIX State MD Zip Code 21131

Phone 410-592-5153 Fax 410-592-3444

#### BUILDING DESCRIPTION - COMMERCIAL

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 <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"/>	Water Supply: _____ <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
1st floor: <u>30'</u> Depth <u>20'</u> Width	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"/>	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other
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: _____	
Other Structure: <u>Pool</u>	
Dimensions: <u>20' X 50'</u>	
Footings: <u>CONC.</u>	
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.

Applicant's Signature \_\_\_\_\_  
 Title/Company C.C.M. INC.

Print Name AL ERDI  
 Date 1/13/00

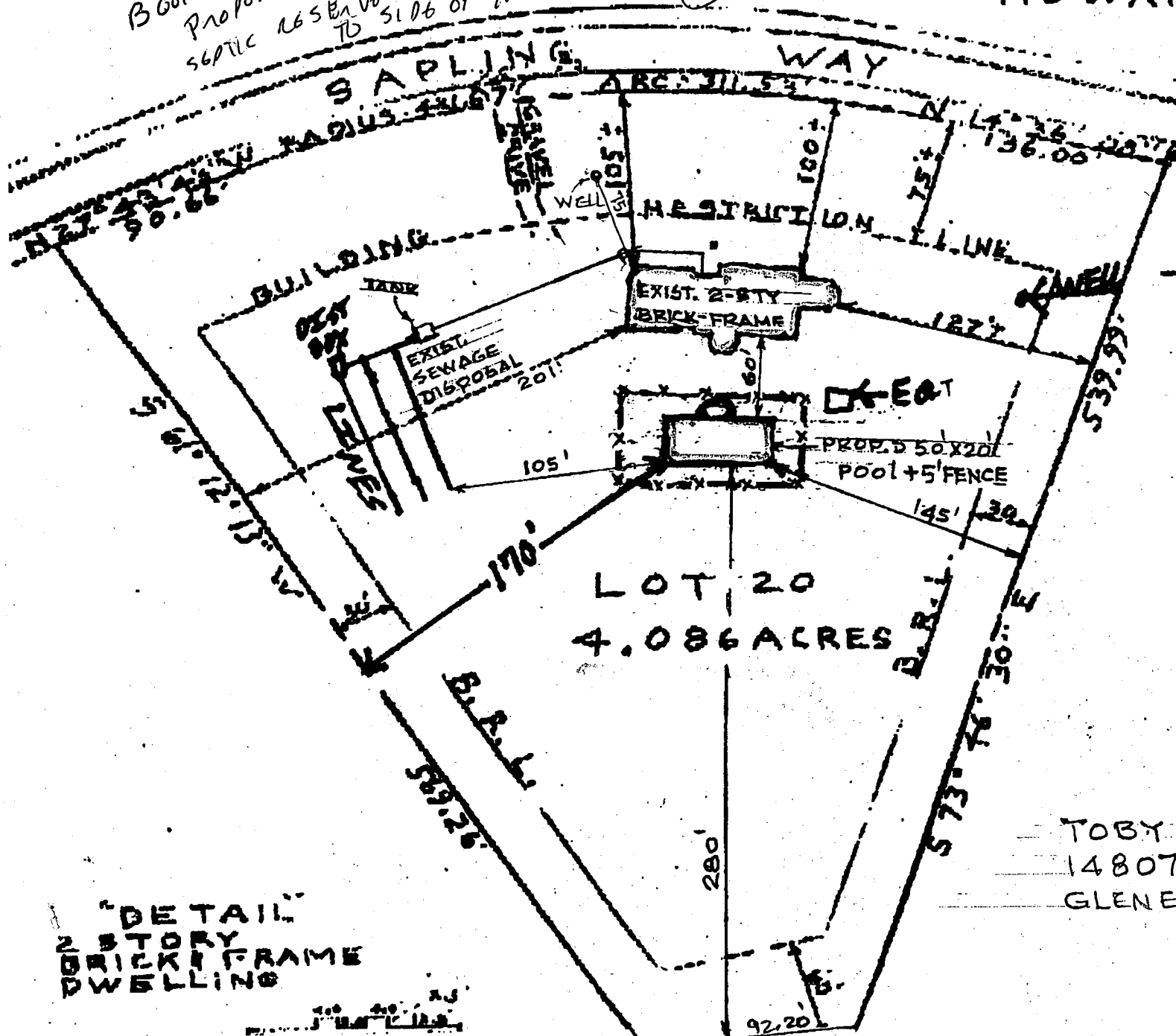
Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**  
 \*\* PLEASE WRITE NEATLY AND LEGIBLY. \*\*  
 - FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL
<input checked="" type="checkbox"/> Land Development, DPZ		
<input checked="" type="checkbox"/> State Highways		
<input checked="" type="checkbox"/> Building Official	<u>1/13/00</u>	<u>[Signature]</u>
<input checked="" type="checkbox"/> Dev. Engineering, DPZ		
<input checked="" type="checkbox"/> Health	<u>1/13/2000</u>	<u>[Signature]</u>
<input checked="" type="checkbox"/> Fire Protection		
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>		
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>		
ONE STOP SHOP: <input type="checkbox"/>		

DPZ SETBACK INFORMATION		PROPERTY ID#: <u>17473</u>
Front: <u>15' MAx</u>		Filing fee: \$ _____
Rear: <u>6' MAx</u>		Permit fee: \$ <u>125</u>
Side: <u>30' MAx</u>		Excise tax: \$ _____
Side St.: <u>N/A</u>		Sub-total paid: \$ _____
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>		Add'l permit fee: \$ _____
Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>		TOTAL FEES: \$ <u>125</u>
Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>		Balance due: \$ _____
Lot Coverage for New Town Zone _____		Check: # <u>3217</u>
SDP/Red-line approval date _____	Accepted by <u>[Signature]</u>	Validation: # <u>25913</u>

14001 SAPLING WAY  
 LOT 20, THE WARFIELD  
 PLAT NO. 95-86  
 5TH ELECTION DIST.  
 HOWARD COUNTY,

B00122121  
 Proposed POOL OK  
 SEPTIC RESERVE AREA IS ALL  
 TO SLIDE OF HOUSE 11/13/2000 (CW)



233 FT. ± to  
 MICHELF. DRIVE

Att. Va  
 Gen. M  
 W.

TOBY & MORRIS WEISS  
 14807 SAPLING WAY  
 GLENELG, MD. 21737

"DETAIL"  
 2 STORY  
 BRICK FRAME  
 DWELLING

