

8/14/98 ASAP
+ lpm

PERMIT

04-349377

P 510178

SEWAGE DISPOSAL SYSTEM

A 41125

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT 4th

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
~~XXXXXX~~ 410-313-2640

DATE 6-1-98

DATE SYSTEM APPROVED 8-11-98

INSPECTOR KM

INDEXED

Fogle's Septic Clean, Inc. IS PERMITTED TO INSTALL ALTER

ADDRESS 580 Obrecht Rd, Sykesville, MD 21784 PHONE 410-795-5674

SUBDIVISION Wellington LOT 14 ROAD 2817 Hunt Valley Drive

PROPERTY OWNER John Gaske

ADDRESS

SEPTIC TANK CAPACITY 1500 GALLONS

NUMBER OF BEDROOMS 5

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 350

TRENCHES - Trench to be 3 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 6 feet below original grade. Effective area begins at 4 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Place the distribution box 230 feet from the rear lot line and 70 feet from the bend in the left lot line. Run trenches along contour towards the left lot side of the lot.

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

BLDG. PERMIT SIGNED
AND RETURNED 2-3-98
Serial # B10113887
dick

PLANS APPROVED BY C. Williams/Donna K. Soe DATE 04/14/98

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

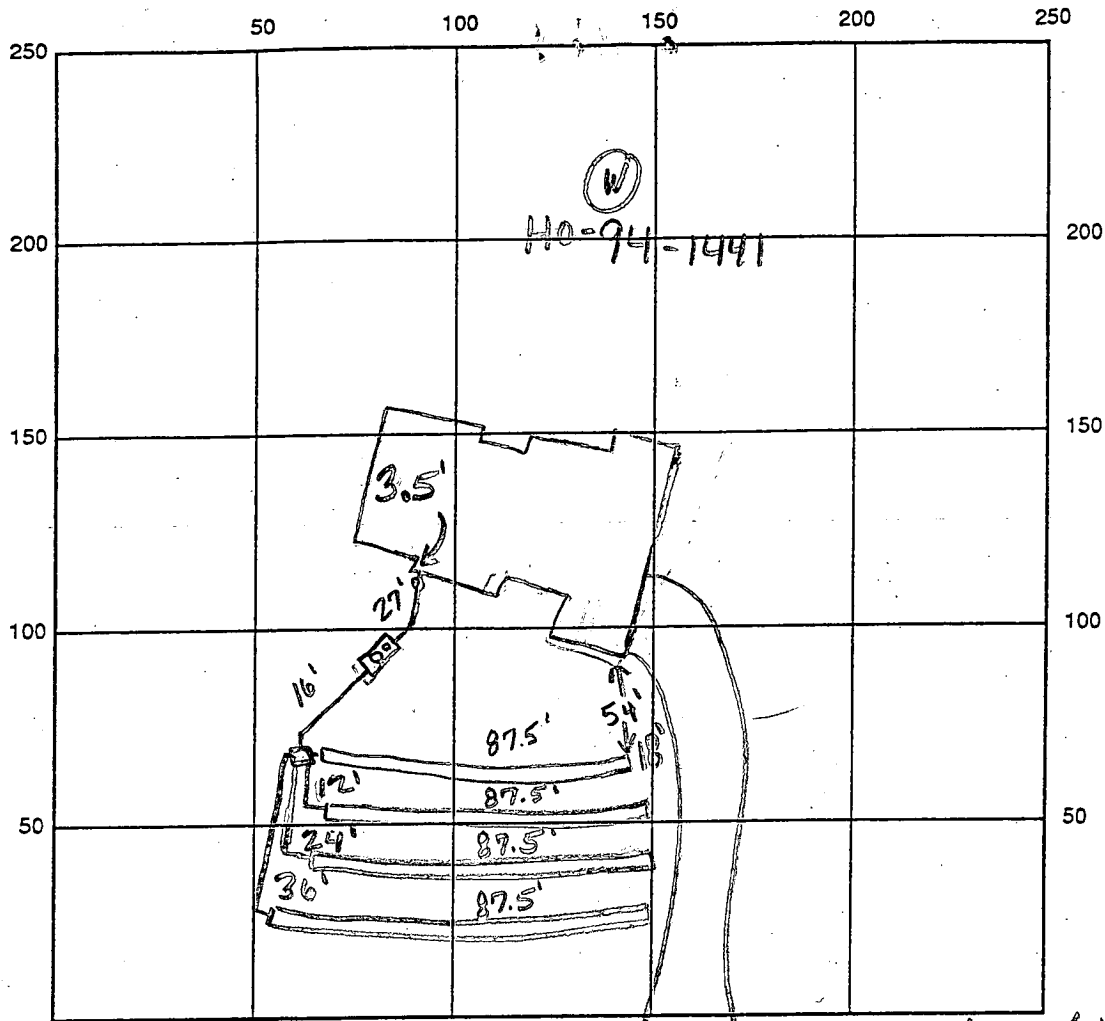
PERMIT VOID AFTER TWO YEARS

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 8-18-98
Serial # B10113602
Inst. under 1-570 gal
purpose tank

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

Hunt Valley

SEPTIC TANK LEVEL OK, 1500 gallons

CLEANOUTS 1 at house, 1 on tank, manhole on tank

DISTRIBUTION BOX LEVEL OK

DRAIN FIELD/TITLE DEPTH 6+7 FT.

TRENCH WIDTH 3 FT.

INLET DEPTH 4+5 FT.

EFFECTIVE GRAVEL DEPTH 2 FT.

TOTAL LENGTH 87.5 x 4 FT. → 350

NUMBER OF TRENCHES 4

ONE SIDEWALL/BOTTOM AREA 1050 SQ. FT.

DRYWALL INSIDE DIAMETER FT.

EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA SQ. FT.

REMARKS (RM) 8.11.98 has house connection, bottom depth varies due to fill, soils look good, box location already changed and two trenches installed due to contour, ok to continue trenches (RM)

(RM) 8.11.98 manhole cleanout needs cover, need to finish stoning and paper last trench ok to cover (RM)

DATE SYSTEM APPROVED 8.11.98

INSPECTOR Kim Whittle

APPLICATION

PERCOLATION TESTING

A _____

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

DISTRICT _____

DATE _____

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER John GASKIE

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION WESLINGTON LOT NO. 14

ROAD AND DESCRIPTION 2817 Hunt Valley Drive

TAX MAP _____ PARCEL # _____

SIZE OF LOT _____ TYPE BLDG. _____

**BLDG. PERMIT SIGN
AND RETURNED 4-14-98
Serial # Bro 110765
SFD-5 Bldg
(SINGLE FAMILY DWELLING OR COMMERCIAL)**

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

LOT 14

COUNTY #

SOIL PROFILE

3

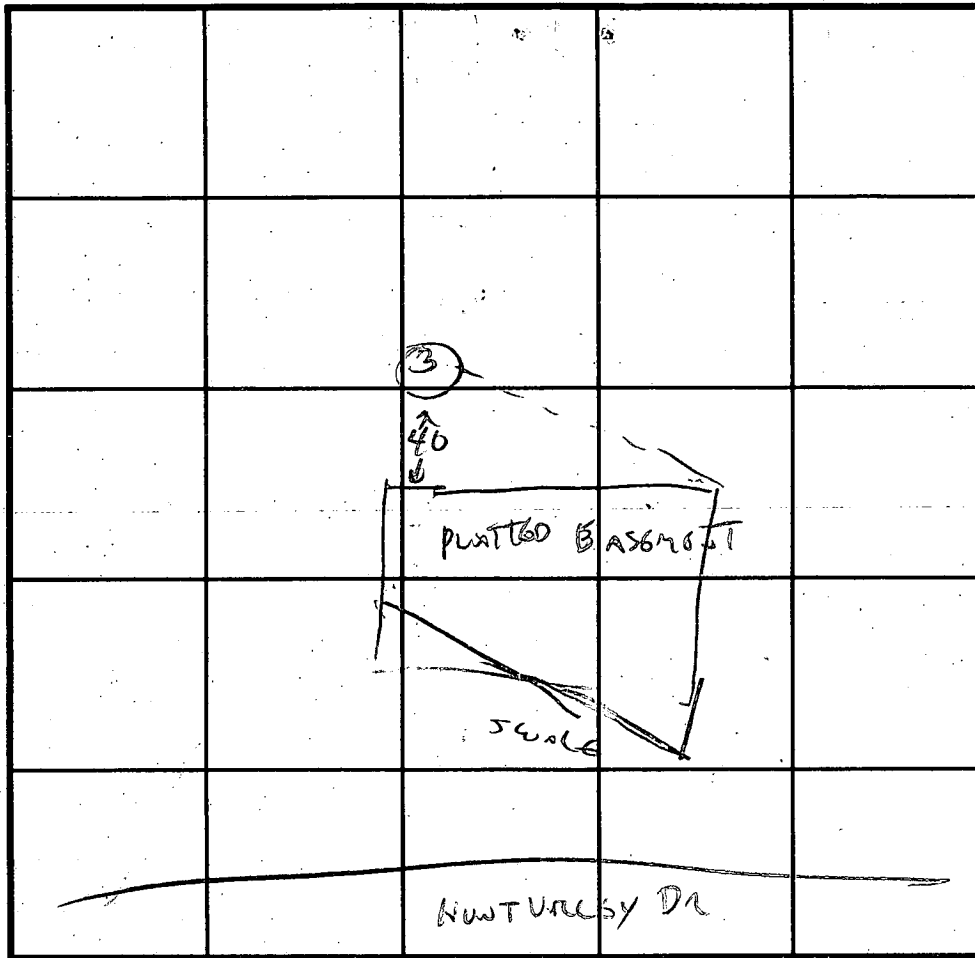
CLAY
LOAM
MICA
LOAM

6

12'

SOIL PROFILE

0'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
	3	5	10:30	10:36	10:36	10:45	9 MIN
		12'			VIS. ESTIMATING 3-5 MIN BY 6' DEEP		

REMARKS _____

TYPE OF SOIL _____

TESTED BY _____ ALSO PRESENT _____

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____

APPLICATION

PERCOLATION TESTING

A 41125
P _____

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

DISTRICT _____

DATE _____

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

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

PROPERTY OWNER _____

ADDRESS _____ PHONE _____

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION WELLINGTON LOT NO. 15

ROAD AND DESCRIPTION _____

TAX MAP _____ PARCEL # _____

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

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

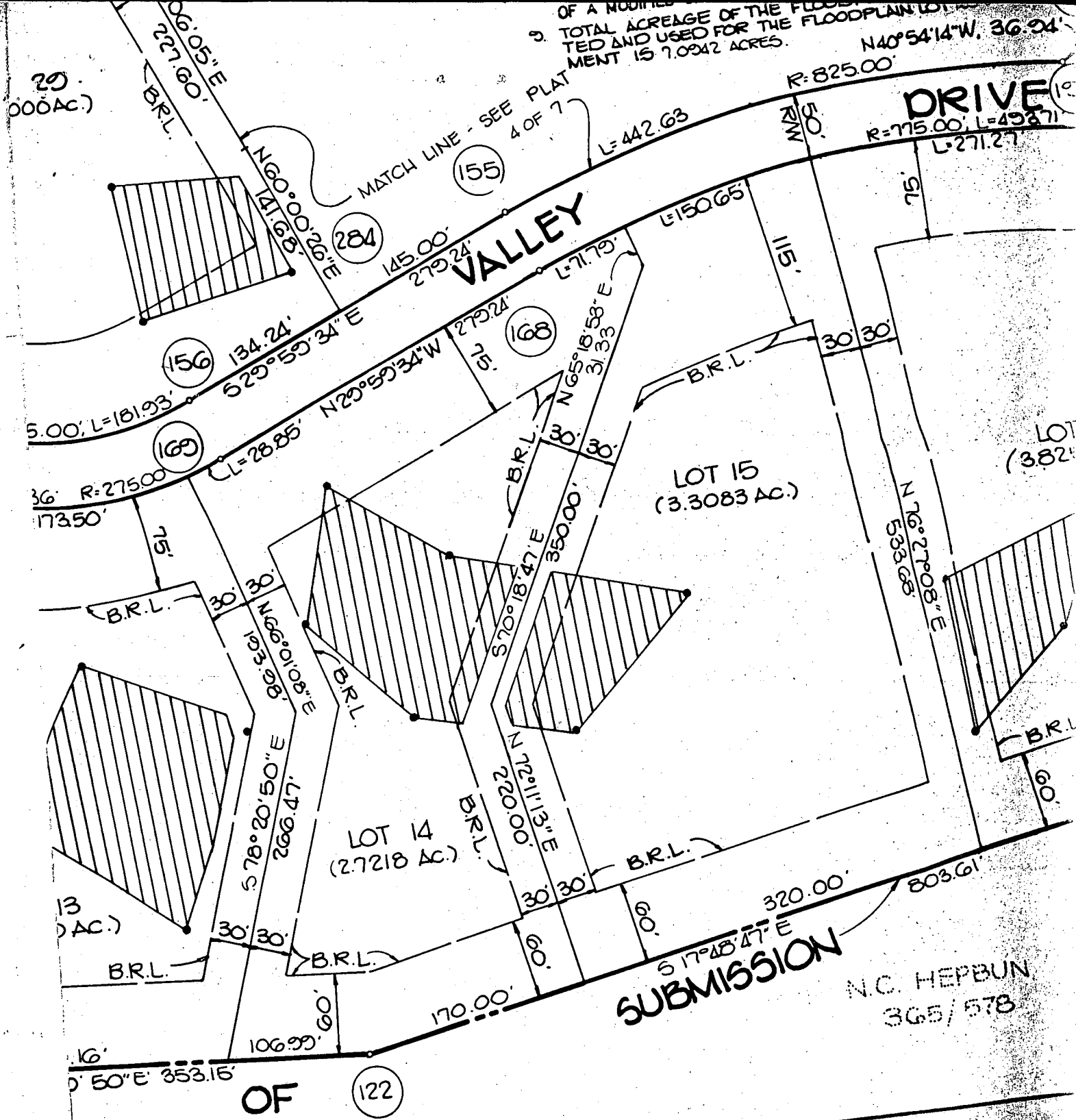
REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

HD-216

THIS IS NOT A PERMIT



OF A MODIFIED...
 TOTAL ACREAGE OF THE FLOODPLAIN...
 USED AND USED FOR THE FLOODPLAIN...
 15 7.0242 ACRES.

N40°54'14\"W, 36.24'
 R=715.00; L=493.71'
 L=271.27'

VALLEY DRIVE

LOT 15
 (3.3083 AC.)

LOT 14
 (2.7218 AC.)

SUBMISSION

N.C. HEPBURN
 365/578

OF (122)

OWNER'S DEDICATION
 WE, SECURITY DEVELOPMENT CORP., OWNERS OF THE PROPERTY SHOWN AND DESCRIBED HEREON, HEREBY ADOPT THIS PLAN SUBDIVISION, AND IN CONSIDERATION OF THE APPROVAL OF THIS FINAL PLAT BY THE OFFICE OF PLANNING AND ZONING ESTABLISH THE MINIMUM BUILDING RESTRICTION LINES AND GRANT UNTO HOWARD COUNTY, MARYLAND, ITS SUCCESSORS, UTILITIES AND SERVICES, IN AND UNDER ALL ROAD AND STREET RIGHT-OF-WAYS AND THE SPECIFIC EASEMENT AREAS SHOWN HEREON; (1) THE RIGHT TO REQUIRE DEDICATION FOR PUBLIC USE THE BEDS OF THE STREETS AND/OR ROADS AND FLOODPLAINS AND OPEN SPACE WHERE APPLICABLE, AND FOR GOOD AND OTHER VALUABLE CONSIDERATION, HE GRANT THE RIGHT AND OPTION TO HOWARD COUNTY TO ACQUIRE THE FEE SIMPLE TITLE TO THE BEDS OF THE STREETS AND/OR ROADS AND FLOODPLAINS, STORM DRAINAGE FACILITIES AND OPEN SPACE WHERE APPLICABLE; (3) THE REQUIRE DEDICATION OF WATERWAYS AND DRAINAGE EASEMENTS FOR THE SPECIFIC PURPOSE OF THEIR CONSTRUCTION REPAIR AND MAINTENANCE; AND (4) THAT NO BUILDING OR SIMILAR STRUCTURE OF ANY KIND SHALL BE ERRECTED OVER THE SAID EASEMENTS AND RIGHT-OF-WAYS. WITNESS OUR HANDS THIS 2ND DAY OF MARCH, 1988.

[Signature]
 PRESIDENT

5/28/98
Airtime

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 X
Replacement _____

Receipt # _____
Date _____

Name of Installer John Haske

Telephone 410-247-6963

License Number 3189

Certified Well Pump Installer _____ Well Driller _____ Registered Plumber X

Name of Property Owner Moxley

Telephone _____

Subdivision WELLINGTON Lot # 14

Well Tag # HO-94-1441

Site Address 2817 NUN+VALLEY DR

Pump

Motor

Pitless Adapter

- 1. Type
 - a. Deep well jet _____
 - b. Shallow well jet _____
 - c. Submersible X
- 2. Make Goulet
- 3. Model # 540 HP
- 4. Capacity 10 GPM
- 5. Pump exceeds well capacity Yes _____ No X
- 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 X Cable guards X Other TAPE & TIES

- 1. Horsepower 3/4
- 2. RPM _____
- 3. Voltage _____
 - a. 110 _____
 - b. 220 X

- 1. Make Campbell
- 2. Model # B 10 X
- 3. Depth 4 1/2" MIN

Tank

Piping

Well data

- 1. Capacity 80
 - 2. Pressure relief valve? RVS0
- WPE well line, P.C. 4' b.g.
casing 8" a.g.
2 pc. csg / conduit pipe (DR)

- 1. Type 160
- 2. Size 1"
- 3. NSF and/or BOCA Code approved _____
- 4. Depth of supply line 190

- 1. Depth 200 ft.
- 2. Yield 12 GPM
- 3. Static water level _____ ft.
- 4. Will water supply be disinfected by installer? yes

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: John Haske

Date: 5-27-98

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

C1 05160 SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

COUNTY NUMBER A41125

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

ST/CO USE ONLY DATE Received MM DD YY

DATE WELL COMPLETED 3 30 98 Depth of Well 22 200 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 110-94-1441

OWNER Baskie John STREET OR RFD. Hunt Valley Drive TOWN Glenwood SUBDIVISION Wellington SECTION LOT 14

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes handwritten entries for Sand Stone and Gray granite.

GROUTING RECORD. WELL HAS BEEN GROUTED (Y). TYPE OF GROUTING MATERIAL: CEMENT (CM), BENTONITE CLAY (BC). NO. OF BAGS 6, NO. OF POUNDS 584.

CASING RECORD. MAIN CASING TYPE ST, Nominal diameter 6, Total depth of main casing 22.

OTHER CASING (if used) diameter and depth.

SCREEN RECORD. screen type or open hole ST (STEEL).

PUMPING TEST. HOURS PUMPED 3, PUMPING RATE 20 gal. per min., METHOD USED TO MEASURE PUMPING RATE Bucket.

PUMP INSTALLED. DRILLER WILL INSTALL PUMP YES. TYPE OF PUMP INSTALLED S (submersible).

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED Y. CIRCLE APPROPRIATE LETTER: A, E, P.

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

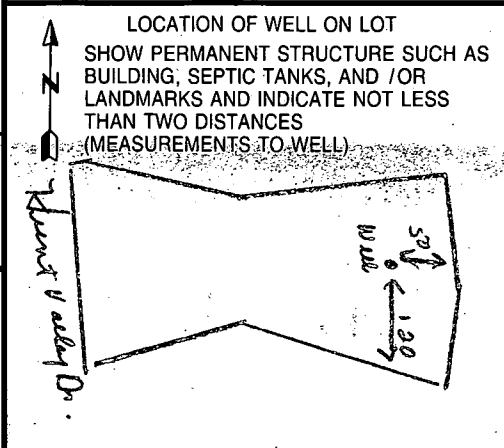
DRILLERS LIC. NO. 1 M SD024, DRILLERS SIGNATURE, LIC. NO. 1 M SD027.

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

DEPTH (nearest ft.) 21 200. DIAMETER OF SCREEN (NEAREST INCH) 56 to 60.

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

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q.



- (A) PROPOSED 5 BEDROOM HOUSE
 FT. ELEV. = 545.0
 BSMT. ELEV. = 556.0
 INV. ELEV. = 554.3
- (B) PROP. SEPTIC TANK
 EX. ELEV. = 558.3
 INV. IN. = 558.8
 INV. OUT. = 553.5
- (C) PROP. DIST. BOX
 EX. ELEV. = 557.0
 INV. ELEV. = 558.0 553.0
- (D) PROP. TRENCHES
 INV. ELEV. = 552.7
 LENGTH TO BE DETERMINED AT
 TIME OF SEPTIC PERMIT ISSUANCE.

Approved Septic System Plan
Howard County Health Department

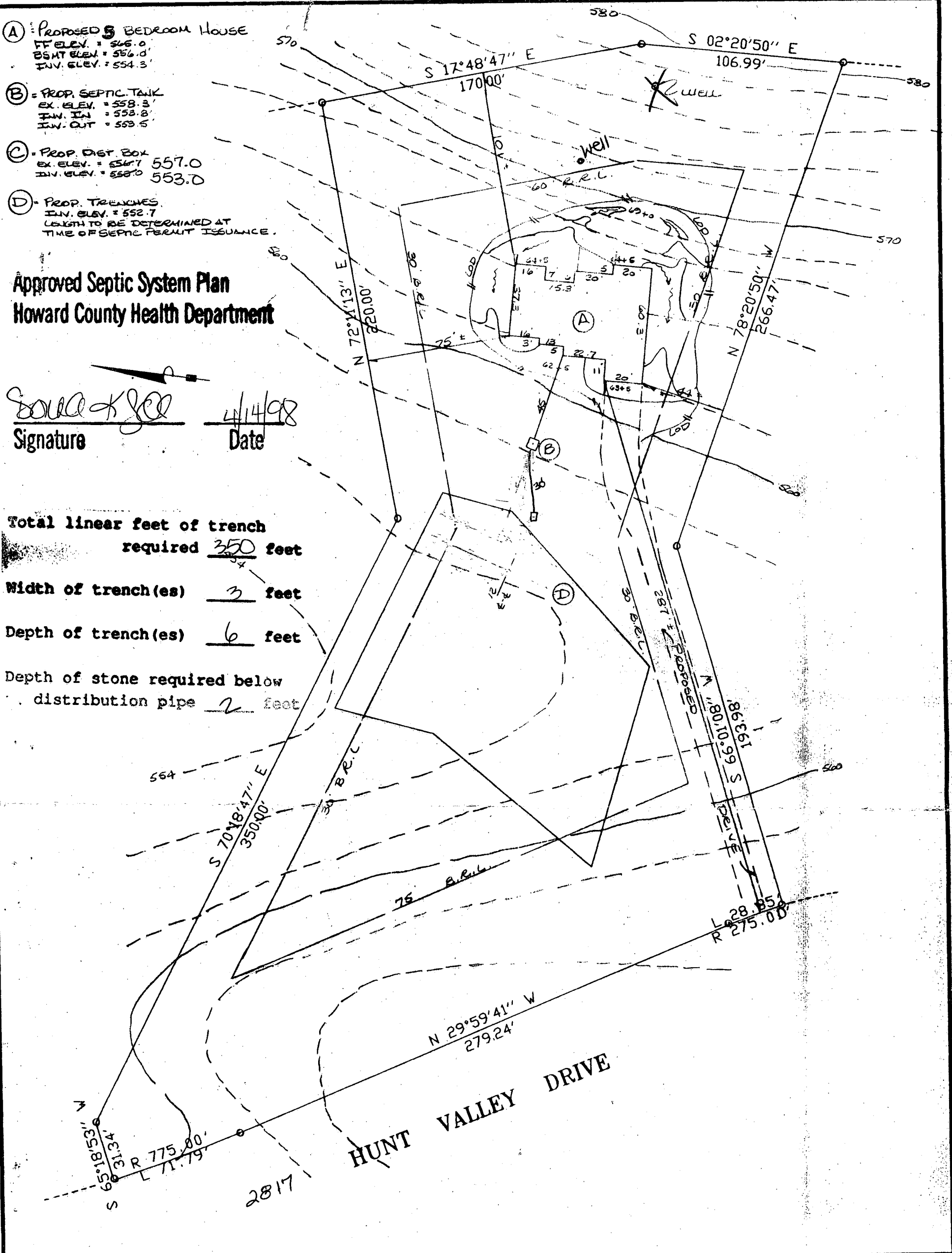
David K. Lee
 Signature 4/14/98
 Date


Total linear feet of trench
 required 350 feet

Width of trench(es) 3 feet

Depth of trench(es) 6 feet

Depth of stone required below
 distribution pipe 2 feet



	NASSAUX - HEMSLEY, INC. - CONSULTANTS 204 S. MAIN ST., MOUNT AIRY, MARYLAND, 21776 - 301/829-2296		PARCEL NO.
	PLOT PLAN LOT 14, SECTION ONE, AREA ONE WELLINGTON SITUATED ON HUNT VALLEY DRIVE ELECTION DISTRICT No. 4 HOWARD COUNTY, MARYLAND SCALE: 1" = 50' MARCH 1998		DEED BOOK PAGE
	R.D. 3/25/98 R.D. 98SY 1702 R.D. 1' = 50'		EASEMENT NO.
			SEWER Dwg. NO.
		CONTRACT NO.	
		LEGAL FT.	
		GRAND FT.	

B 1	8088	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL	STATE PERMIT NUMBER HO - 94 - 1441
------------	-------------	--------------------------------	---	--

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

1 2 3 6
Date Received (APA) **2-9-98** *Pages 247-6963*
 8 MM DD YY 13
 15 Last Name **Gaske** Owner **John** First Name 34
 36 Street or RFD **4615 Benson Ave.** 55
 57 Town **Catonville** 70 State **Md.** 72 Zip **21222** 76

B 3 LOCATION OF WELL

8 COUNTY **Howard** 21
 23 SUBDIVISION **Wellington** 42
 SECTION **44** 46 LOT **14** 48 50
 52 NEAREST TOWN **Calverwood** 71
 MILES FROM TOWN (enter 0 if in town) **1/2** M 73 76 77 78

DRILLER INFORMATION

Driller's Name **Joseph L. Mayne** M **SD. 024** License No. 81
 Firm Name **Joseph L. Mayne Well Drilling**
 Address **5512 Ridge Rd. Mt. Airy Md. 21111**
 Signature **Joseph L. Mayne** Date **2/9/98**

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

11 NEAR WHAT ROAD **Heat Valley Dr.** 30
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 NORTH N SOUTH S WEST W EAST E
 34 **400** 37 DISTANCE FROM ROAD ENTER FT OR MI 38 39
 TAX MAP: _____ BLK: _____ PARCEL _____

B 2 WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) **5** 8 12
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **500** 14 20

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

COUNTY NAME **Howard** COUNTY NO. **A41125**
 STATE SIGNATURE _____ INSERT S →
 DATE ISSUED **2/20/98** 43 MM DD YY 48 CO SIGNATURE **Kimberly Minto** EXP. DATE **2/20/99** 41
 NORTH GRID **532** 000 EAST GRID **792** 000
 50 55 57 63

USE FOR WATER (CIRCLE APPROPRIATE BOX)

HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
 22 INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
 PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE APPROVAL)
 TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

APPROXIMATE DEPTH OF WELL **260** FEET 24 28
 APPROXIMATE DIAMETER OF WELL **6** NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN
 30 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)
 37 CABLE REVerse-ROTary DRive-POINT
 other _____

REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)

THIS WELL WILL NOT REPLACE AN EXISTING WELL
 THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
 39 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
 THIS WELL WILL DEEPEIN AN EXISTING WELL
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) 41 _____ 52

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

APPROP. PERMIT NUMBER _____ G A P _____ 63
 FORCE **Km** WRITE INITIALS IN BOX PERMIT No. **HO - 94 - 1441**
 67 68 70 71 72 73 74 75 76 77 78 79

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X → **Grout 3/30/98 1000**

SOURCES OF DRILLING WATER
 1. **well**
 2.
 3.

WRITE THE BOX NUMBER FROM THE MAP HERE
 E **792**
 N **532**

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

SPECIAL CONDITIONS
 NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -

APPLICATION

HOWARD COUNTY

PERMIT APPLICATION

DEPARTMENT OF INSPECTIONS, LICENSES & PERMIT
3430 COURT HOUSE DRIVE, ELLICOTT CITY, MARYLAND 21043

SERIAL NUMBER

00010765

\$25

BUILDING ADDRESS (HOUSE NO., STREET, TOWN OR AREA)

2817 Hunt Valley Drive
Glenwood, MD. 21738

74984

GRADING/SEDIMENT CONTROL YES NO

SDP #

DESCRIPTION OF WORK AUTHORIZED

TWO STORY / FIVE BEDROOMS 4 1/2 BATHS
House - w/ 3 GARAGE ATTACHED GARAGE

LOT NO.	PARCEL NO.	SEC.	AREA	BLOCK NO.	LIBER	FOLIO
14	1	-	-	15	-	-

SUB DIVISION	ZONE	ZONE MAP	ELEC. DIST.	CENSUS TR.
Wellington	R-20	14	4	6040

OWNER NAME AND ADDRESS

John M. GASKR III / LINDA GASKR (410)
4615 BENSON HURKUE 247-6963

OCCUPANT'S NAME AND ADDRESS

ARCHITECT OR ENGINEER'S NAME AND ADDRESS

CONTRACTOR'S NAME AND ADDRESS

J. M. G. Builders, Inc.
4615 BENSON AVENUE
BALTO, MD. 21227
410-247-6963

EXISTING USE

VACANT LOT

PROPOSED USE

Single Family Dwelling

EST. CONSTRUCTION COST

240,000.00

LICENSE NUMBER

PERMIT FEE

SIZE OF BLDG.	FRONT	DEPTH	HEIGHT

TYPE OF BLDG.	AREA	VOLUME	ROOF
B. ROOMS 5 ROOMS 6 BATHS 4 1/2 FIREPLACES 1			

FOOTINGS	FOUNDATION	S. WALLS

UTILITIES				
WATER	WELL	SEWER/SEPTIC	GAS	ELECTRICITY
			TYPE OF HEAT GAS	AC

I have carefully examined and read this application and know the same is true and correct, and that is doing this work, all provisions of Howard County Ordinances and the State Laws of Maryland will be complied with, whether specified or not; and I will notify the Department of Inspections, and Permits twenty-four hours in advance when I am ready for the inspections called for elsewhere in the application; and that no work will be covered up until such inspections have been complied with.

Signature: John M. Gaskr III
TITLE: OWNER
DATE: 3-17-08

FOR OFFICE USE ONLY

DISTANCE IN FEET FROM R/W LINE TO FRONT BUILDING LINE

SIDE YARD (DISTANCE IN FEET FROM SIDE BLDG. LINE TO SIDE PROPERTY LINE)

TO SIDE BUILDING LINE DISTANCE IN FEET, REAR YD. REQUIRING SET

BACK (CORNER LOT ONLY) SDP #

Check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

CAUTION

To begin construction before a permit placard has been issued and displayed on the job is a violation of the law. Use and occupancy permit must be applied for two weeks before it will be issued.

IMPORTANT: PLEASE SHOW ZIP CODES AND AREA CODES WHEREVER REQUIRED.

LP-69-591

CR 1594

FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING		
SHA		
SEDIMENT/GRADING		
BUILDING OFFICIAL		
WATER & SEWER		
HEALTH DEPT.	4/14/08	[Signature]
FIRE PROTECTION		
STORM WATER MGMT		

APPROVED

DATE

Distribution of Copies:
White - Building Official
Green - Planning & Zoning

Yellow - Engineering
Pink - Health Dept.
Gold - S.H.A.

[Signature]

(A) - PROPOSED 3 BEDROOM HOUSE

FT. ELEV. = 546.0
 BSMT. ELEV. = 552.0
 INV. ELEV. = 551.3

(B) - PROP. SEPTIC TANK

EX. ELEV. = 558.3
 INV. IN = 558.8
 INV. OUT = 553.5

(C) - PROP. DIST. BOX

EX. ELEV. = 556.7
 INV. ELEV. = 553.0

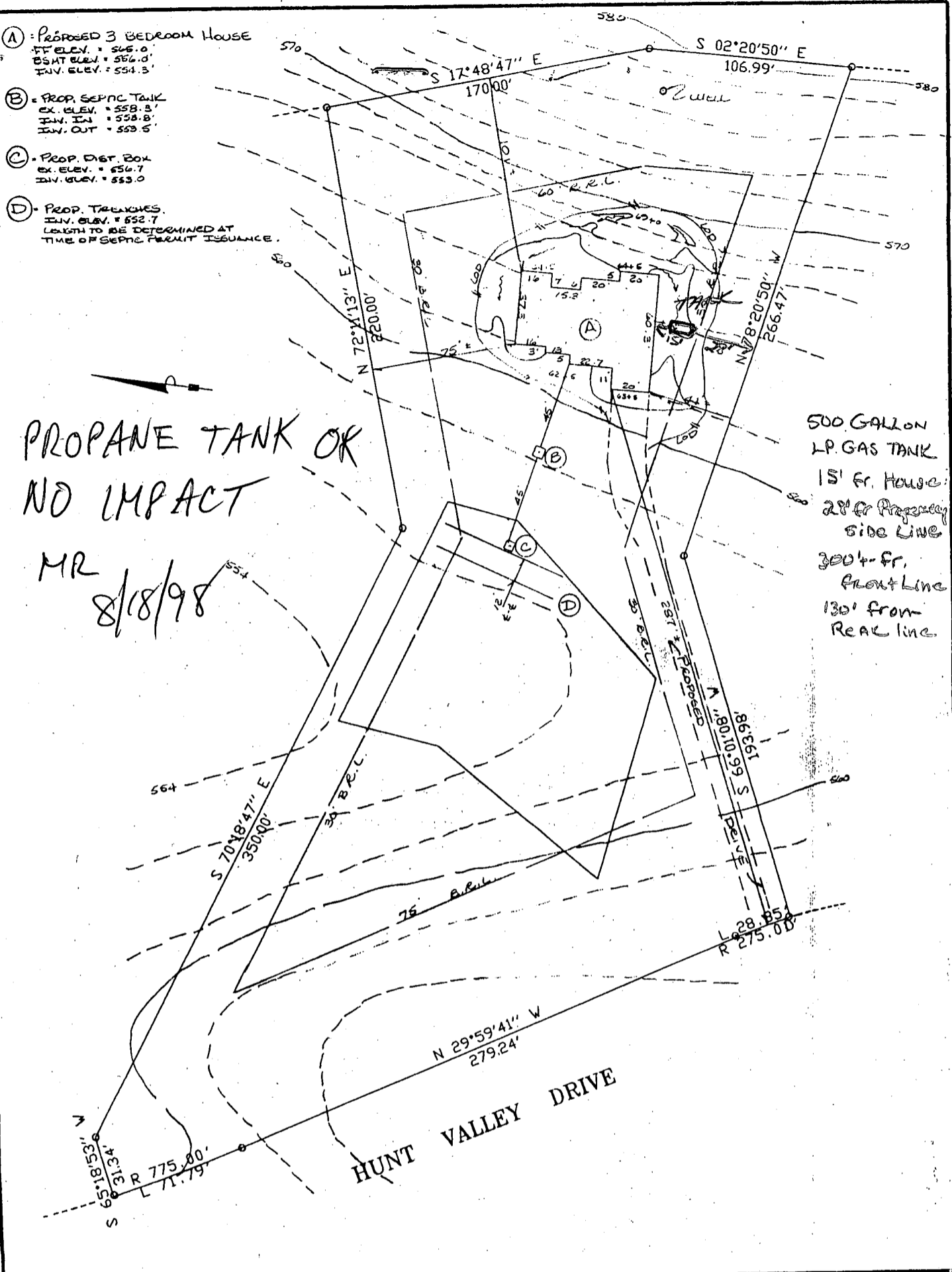
(D) - PROP. TRENCHES

INV. ELEV. = 552.7
 LENGTH TO BE DETERMINED AT
 TIME OF SEPTIC PERMIT ISSUANCE.

PROPANE TANK OK
 NO IMPACT

MR
 8/18/98

500 GALLON
 L.P. GAS TANK
 15' fr. House
 2' fr. Property
 Side Line
 300' fr.
 Front Line
 130' from
 Rear Line



NH NASSAUX - HEMSLEY, INC. - CONSULTANTS

204 S. MAIN ST., MOUNT AIRY, MARYLAND, 21776 - 301/829-2296

PLOT PLAN
LOT 14, SECTION ONE, AREA ONE
WELLINGTON
 SITUATED ON HUNT VALLEY DRIVE
 ELECTION DISTRICT No. 4
 HOWARD COUNTY, MARYLAND
 SCALE: 1" = 50' MARCH 1998

R.D.	3/25/98
R.D.	98SY 1702
R.D.	1" = 50'

PROJ. NO.	
REVISION NO.	PAGE
REVISION NO.	
CONTRACT NO.	
LINEAL FT.	
SQUARE FT.	

APPLICATION

HOWARD COUNTY

PERMIT APPLICATION

DEPARTMENT OF INSPECTIONS, LICENSES & PERMIT
3430 COURT HOUSE DRIVE, ELLICOTT CITY, MARYLAND 21043

SERIAL NUMBER

300113881

BUILDING ADDRESS (HOUSE NO., STREET, TOWN OR AREA)
2817 HUNT VALLEY DRIVE 301981
GLENWOOD, MO. 21738

GRADING/SEDIMENT CONTROL YES NO SDP #

DESCRIPTION OF WORK AUTHORIZED
Build 12x20' Deck
w/ 5 STEPS GRADE
ATTACH TO BUILDING #1111
800110765

LOT NO.	PARCEL NO.	SEC.	AREA	BLOCK NO.	LIBER	FOLIO
14	239	1	1	15		
SUB DIVISION		ZONE	ZONE MAP	ELEC. DIST.	CENSUS TR.	
WELLINGTON		R-01E	14	4	6040	

OWNER NAME AND ADDRESS PHONE NO.
JOHN M. AND LINDA GASKE 410-247-6163
4615 BENSON AVENUE
BALTO. MD 21227

SIZE OF BLDG.	FRONT	DEPTH	HEIGHT

OCCUPANT'S NAME AND ADDRESS PHONE NO.

TYPE OF BLDG.	AREA	VOLUME	ROOF
B. ROOMS			
ROOMS			
BATHS			
FIREPLACES			

ARCHITECT OR ENGINEER'S NAME AND ADDRESS PHONE NO.

FOOTINGS	FOUNDATION	S. WALLS

CONTRACTOR'S NAME AND ADDRESS PHONE NO.
J.M.G. BUILDERS, INC. 410-247-6963
4615 BENSON AVE.
BALTO. MD 21227

UTILITIES					
WATER/WELL	SEWER/SEPTIC	GAS	ELECTRICITY	TYPE OF HEAT	AC

I have carefully examined and read this application and know the same is true and correct, and that is doing this work, all provisions of Howard County Ordinances and the State Laws of Maryland will be complied with, whether specified or not; and I will notify the Department of Inspections, and Permits twenty-four hours in advance when I am ready for the inspections called for elsewhere in the application; and that no work will be covered up until such inspections have been complied with.

EXISTING USE PROPOSED USE
SPEC HOUSE DECK

Kimberly Haisle
SIGNATURE
TITLE DATE 1-2-98

EST. CONSTRUCTION COST LICENSE NUMBER PERMIT FEE
1200.00

FOR OFFICE USE ONLY

W/S CODE
DISTANCE IN FEET FROM R/W LINE TO FRONT BUILDING LINE _____
SIDE YARD _____
(DISTANCE IN FEET FROM SIDE BLDG. LINE TO SIDE PROPERTY LINE)
TO SIDE BUILDING LINE _____
DISTANCE IN FEET, REAR YD. REQUIRING SET _____
BACK _____ (CORNER LOT ONLY) SDP #

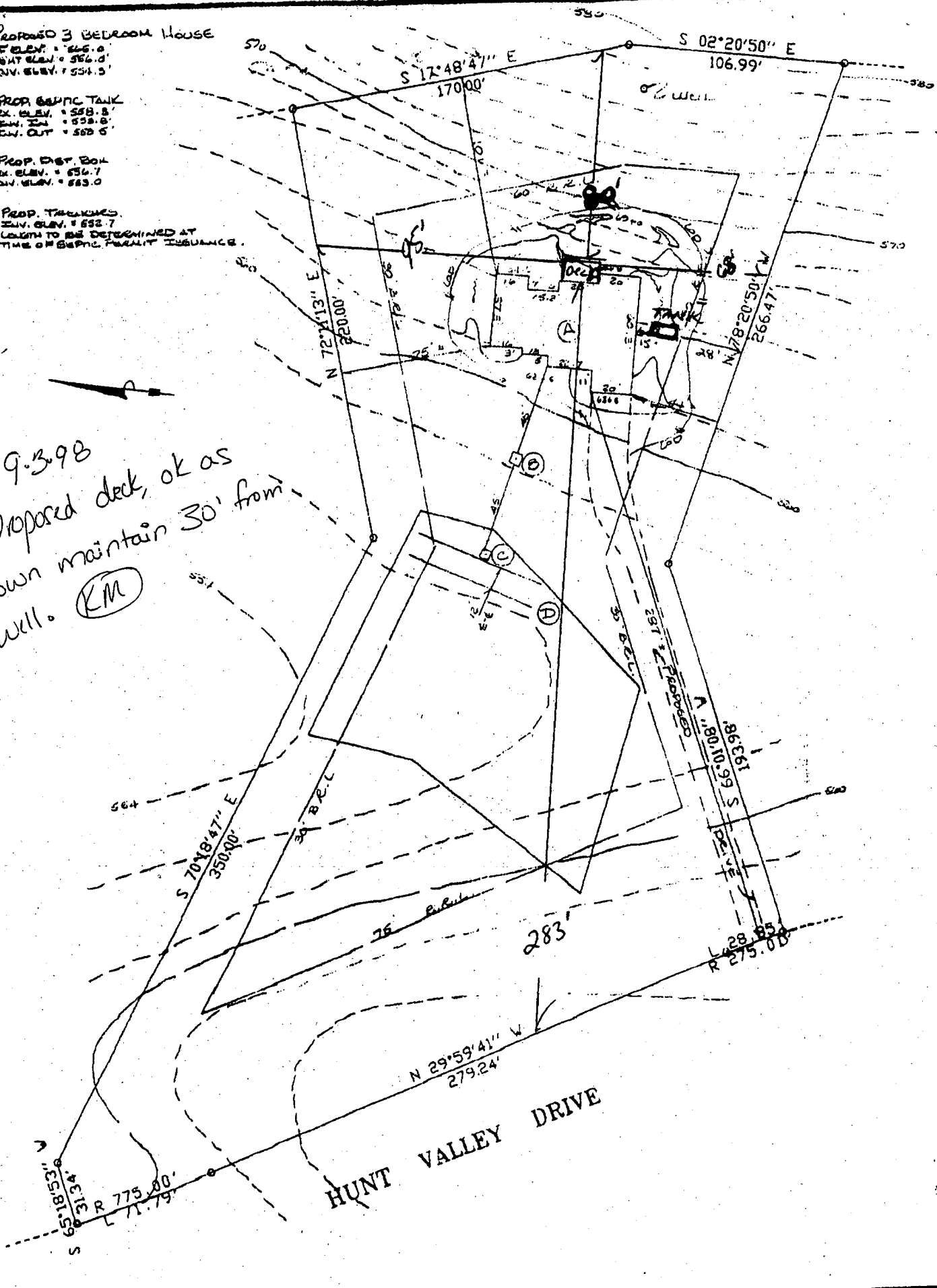
FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING		
SHA		
SEDIMENT/GRADING		
BUILDING OFFICIAL		
WATER & SEWER		
HEALTH DEPT.	9-3-98	Kimberly Haisle
FIRE PROTECTION		
STORM WATER MGM.		

Check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
CAUTION
To begin construction before a permit placard has been issued and displayed on the job is a violation of the law.
Use and occupancy permit must be applied for two weeks before it will be issued.

IMPORTANT: PLEASE SHOW ZIP CODES AND AREA CODES WHEREVER REQUIRED.
LP-69-591 *# 1776*
APPROVED: _____ DATE: *OK*
Distribution of Copies: Yellow - Engineering
White - Building Official Pink - Health Dept.
Green - Planning & Zoning Gold - S.H.A.

- (A) - PROPOSED 3 BEDROOM HOUSE
 FT. ELEV. = 545.0
 50%T. ELEV. = 556.0
 INV. ELEV. = 554.5
- (B) - PROP. SUPPLY TANK
 EX. ELEV. = 558.8
 INV. IN. = 558.8
 INV. OUT. = 558.0
- (C) - PROP. DEPT. BOX
 EX. ELEV. = 556.7
 INV. ELEV. = 553.0
- (D) - PROP. TERRACES
 INV. ELEV. = 552.7
 LENGTH TO BE DETERMINED AT
 TIME OF SUPPLY PERMIT ISSUANCE.

9.3.98
 Proposed deck, ok as
 shown maintain 30' from
 well. (KM)



HUNT VALLEY DRIVE

NH NASSAUX - HEMSLEY, INC. - CONSULTANTS

204 S. MAIN ST., MOUNT AIRY, MARYLAND, 21776 - 301/829-2296

PLOT PLAN



PROJECT NO.	
SHEET NO.	PAGE
DATE	

APPLICATION

HOWARD COUNTY

PERMIT APPLICATION

SERIAL NUMBER

DEPARTMENT OF INSPECTIONS, LICENSES & PERMIT
3430 COURT HOUSE DRIVE, ELLICOTT CITY, MARYLAND 21043

1600.00
B 00113602

BUILDING ADDRESS (HOUSE NO., STREET, TOWN OR AREA)
2817 HUNT VALLEY DRIVE 3-498-1
GLENWOOD, MD. 21738

GRADING/SEDIMENT CONTROL YES NO SDP #

DESCRIPTION OF WORK AUTHORIZED
TO BURY 500 GALLON PROPANE
TANK FOR LP GAS
ASME - LP TANK
UNDER GROUND

LOT NO. 14	PARCEL NO. 239	SEC. 1	AREA 1	BLOCK NO. 15	LIBER	FOLIO
SUB DIVISION WELLINGTON		ZONE	ZONE MAP	ELEC. DIST.	CENSUS TR. 6040	

OWNER NAME AND ADDRESS
LINDA + JOHN M. GASKER III
4615 BENSON AVENUE
BALTO. MD. 21227
PHONE NO. 410-247-6963

SIZE OF BLDG.	FRONT	DEPTH	HEIGHT
LIVING 4400			
TOTAL 6960			

OCCUPANT'S NAME AND ADDRESS
ARCHITECT OR ENGINEER'S NAME AND ADDRESS

TYPE OF BLDG.	AREA	VOLUME	ROOF
B. ROOMS 5			
ROOMS 6			
BATHS 4 1/2			
FIREPLACES 1			

CONTRACTOR'S NAME AND ADDRESS
J.M.G. BUILDERS, INC.
4615 BENSON AVENUE
BALTO. MD. 21227
PHONE NO. (410) 247-6963

FOOTINGS	FOUNDATION	S. WALLS

EXISTING USE
Single family Dwelling

PROPOSED USE
Tank

UTILITIES	WATER/WELL	SEWER/SEPTIC	GAS	ELECTRICITY	TYPE OF HEAT	AC
			LP		LP	

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EST. CONSTRUCTION COST
\$ 1,000.00

LICENSE NUMBER PERMIT FEE

SIGNATURE
Linda M. Gasker
TITLE
V. President
DATE
8-15-98

FOR OFFICE USE ONLY

DISTANCE IN FEET FROM R/W LINE TO FRONT BUILDING LINE
SIDE YARD (DISTANCE IN FEET FROM SIDE BLDG. LINE TO SIDE PROPERTY LINE)
TO SIDE BUILDING LINE
DISTANCE IN FEET, REAR YD. REQUIRING SET
BACK (CORNER LOT ONLY)
SDP #
Check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING		
SHA		
SEDIMENT/GRADING		
BUILDING OFFICIAL		
WATER & SEWER		
HEALTH DEPT.	8/18/98	Mark E. Lippin
FIRE PROTECTION		
STORM WATER MGM.		

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LP-69-591
1751

APPROVED DATE

Distribution of Copies:
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