

PUB. SEWER STATUS VERIFIED BY \_\_\_\_\_

ISSUE DATE: \_\_\_\_\_

# PERMIT

P \_\_\_\_\_

APPROVAL DATE: 9/4/2002

A 46170

## INDEXED

### ON-SITE SEWAGE DISPOSAL SYSTEM HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH

\_\_\_\_\_ IS PERMITTED TO    INSTALL     ALTER

ADDRESS: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

SUBDIVISION: Hughes Property LOT NUMBER: \_\_\_\_\_

ADDRESS: 2882 Florence Road PROPERTY OWNER: Charles Palmer

SEPTIC TANK CAPACITY (GALLONS): \_\_\_\_\_

PUMP CHAMBER CAPACITY (GALLONS): \_\_\_\_\_

NUMBER OF BEDROOMS: \_\_\_\_\_

SQUARE FEET PER BEDROOM: \_\_\_\_\_

LINEAR FEET OF TRENCH REQUIRED: \_\_\_\_\_

|           |   |
|-----------|---|
| TRENCHES: | Trench to be _____ feet wide. Inlet _____ feet below original grade. Bottom maximum depth _____ feet below original grade. Effective area begins at _____ feet below original grade. _____ feet of stone below distribution pipe. |
| LOCATION: | _____   |
| PURPOSE:  | FILE INCOMPLETE, NO SEPTIC & WELL RECORDS FOUND.  |

PLANS APPROVED: \_\_\_\_\_ DATE: \_\_\_\_\_

- NOTE: PERMIT VOID AFTER 2 YEARS
- NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
- NOTE: WATERTIGHT SEPTIC TANKS REQUIRED
- NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL
- NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS

**NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM**

446170

# APPLICATION

PERCOLATION TESTING

A 46170

P \_\_\_\_\_

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

DISTRICT \_\_\_\_\_

DATE 7/25/90

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 TIMOTHY HUGHES

ADDRESS 7089 MINK HOLLOW ROAD HIGHLAND MD. 20777 PHONE 854-3560

PROSPECTIVE BUYER \_\_\_\_\_

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

PROPERTY LOCATION:

3 (EXISTING HOUSES)

SUBDIVISION HUGHES PROPERTY LOTS 1-4 LOT NO. 4

ROAD AND DESCRIPTION @ FLORENCE ROAD 2000' NW OF THE INT. OF FLORENCE ROAD & RT. 94

TAX MAP 13 PARCEL # 115

SIZE OF LOT 3.95 Ac. ± TYPE BLDG S.F.D.  
(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. Zacharia y. Fisch (agent)  
(SIGNATURE OF APPLICANT)

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

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

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

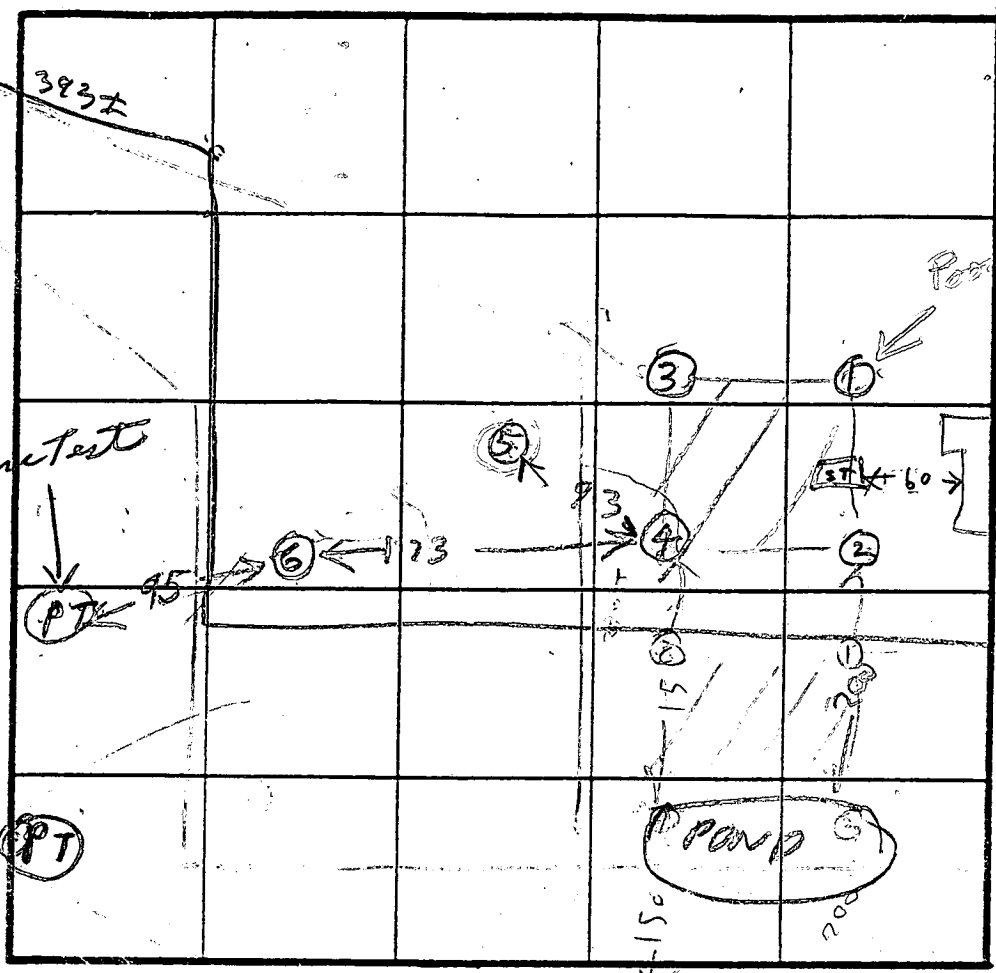
REASONS FOR REJECTION OR HOLDING 2/16/90 PERC OK BUT MUST SHOW 10000 SDF7 OVER 200 F7 FROM POND Hold for Certified/holes RH

IID-216

## THIS IS NOT A PERMIT

Lot 3  
A 46170

560±



CLAY

LIGHT BROWN SAND SILT LOAM 10% SHALE

CLAY

LIGHT BROWN SAND SILT LOAM 10% SHALE

CLAY

BEIGE SAND SILT LOAM 10% SHALE

CLAY

BEIGE SAND SILT LOAM 10% SHALE

CLAY SHALE

ROCK

CLAY

SAND LOAM

| DATE    | TEST NO.   | DEPTH | PRE-WET  |      | TEST - 1" DROP |      | TIME |
|---------|------------|-------|----------|------|----------------|------|------|
|         |            |       | START    | STOP | START          | STOP |      |
| 2/16/90 | 1S         | 3.5   | 230      | 237  | 237            | 239  | 12   |
|         | 1S RIGIDUR | 3.5   | 235      | 237  | 237            | 239  | 12   |
|         | 1D         | 8     | 240      | 242  | 242            | 247  | 5    |
|         | 2S         | 3.5   | 249      | 253  | 253            | 300  | 7    |
|         | 2D         | 8.5   | 255      | 259  | 259            | 300  | 3    |
|         | 2V         | 11.5  | OK       |      |                |      |      |
|         | 3S         | 3     | 310      | 319  | 319            | 324  | 5    |
|         | 3D         | 8.5   | 312      | 319  | 319            | 324  | 5    |
|         | 3V         | 12    | OK       |      |                |      |      |
|         | 4S         | 3     | 331      | 332  | 332            | 334  | 2    |
| 4D      | 9          | 332   | 332      | 333  | 339            | 6    |      |
| 4V      | 12         |       |          |      |                |      |      |
| 5V      | 7          | ROCK  | T/A FAIL |      |                |      |      |
| 2/16/90 | 6V         | 12    | OK       |      |                |      |      |

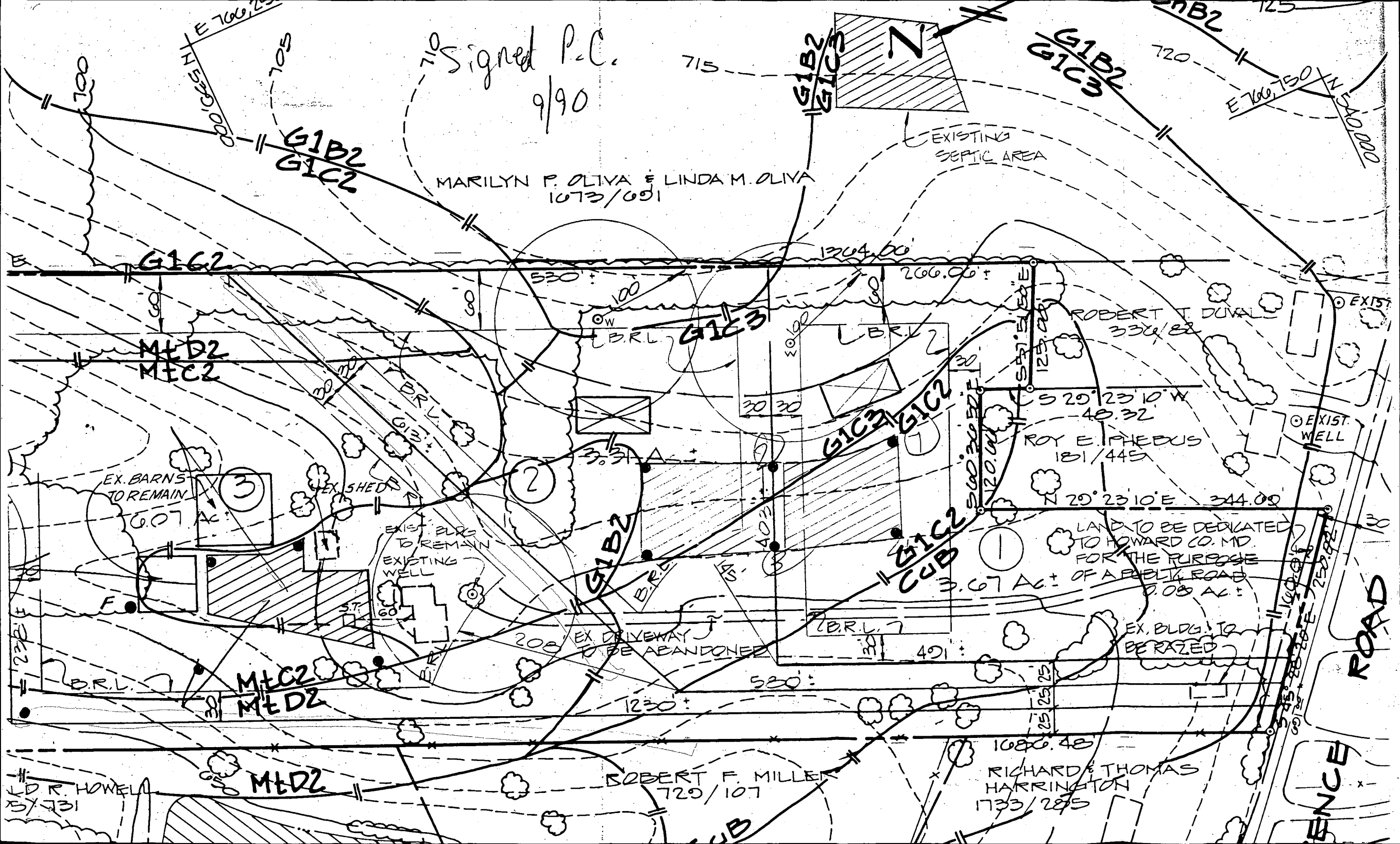
REMARKS: Hole (1)(2)(3)(4) dug per Test Plat Hole (5)(6) Different

TYPE OF SOIL: \_\_\_\_\_

TESTED BY: R. HODGES

ALSO PRESENT: G. EDWARDS

BACKHOLE



710 signed P.C.  
9/90

MARILYN P. OLIVA & LINDA M. OLIVA  
1073/001

ROBERT T. DUVAL  
330/82

ROY E. PHEBUS  
181/445

ROBERT F. MILLER  
729/107

RICHARD & THOMAS  
HARRINGTON  
1733/285

ED R. HOWELL  
57/331

G1B2  
G1C2

G1B2  
G1C3

G1B2  
G1C3

G1C2

M1D2  
M1C2

G1C3

G1C2  
G1C3

G1C2  
CUB

M1C2  
M1D2

M1D2

G1B2

ENCE  
ROAD

ENCE

EXISTING  
SEPTIC AREA

LAND TO BE DEDICATED  
TO HOWARD CO. MD.  
FOR THE PURPOSE  
OF A PUBLIC ROAD  
3.67 AC. ±  
0.08 AC. ±

EX. BARN  
TO REMAIN

EXIST. PLS  
TO REMAIN  
EXISTING  
WELL

EX. DRIVEWAY  
TO BE ABANDONED

EX. BLDG. TO  
BE RAZED

EXIST. WELL

EXIST. WELL

228

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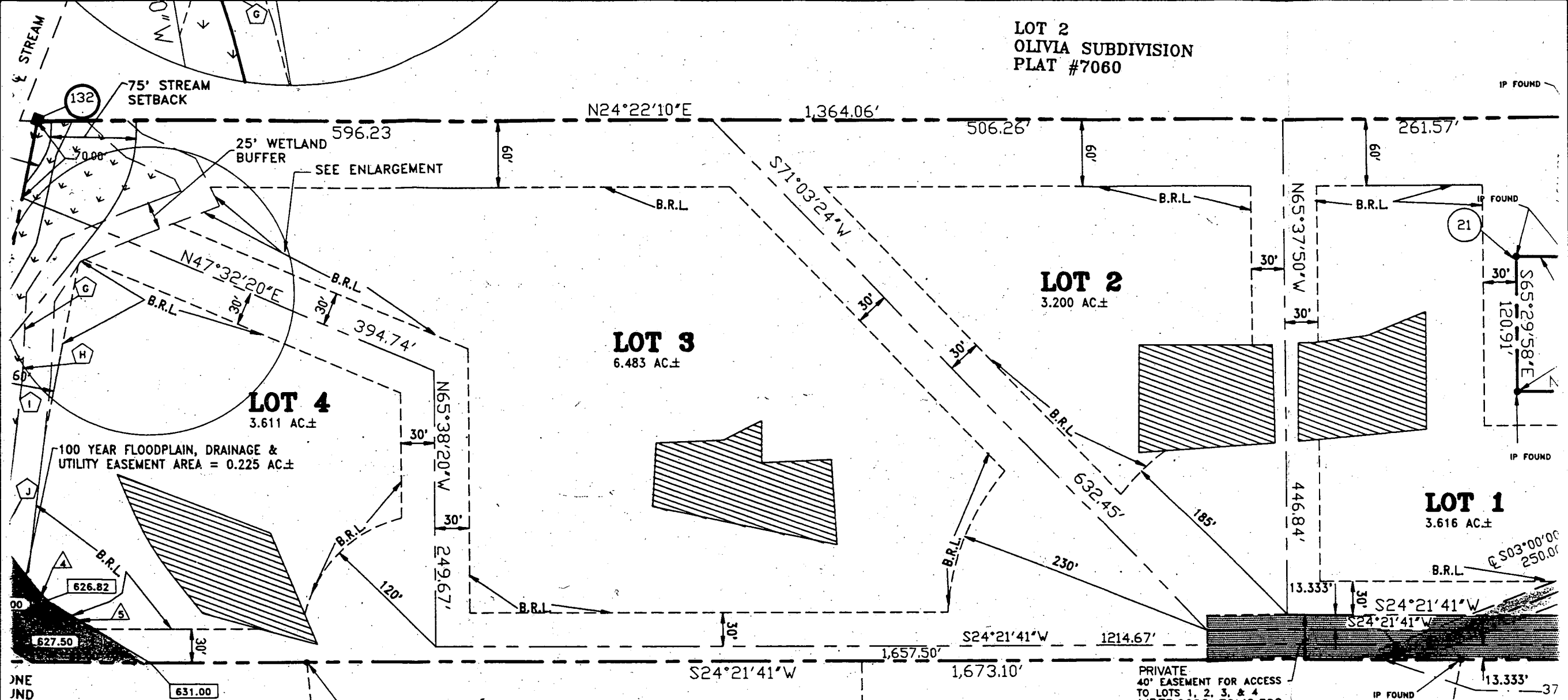
228

F

2

1

LOT 2  
OLIVIA SUBDIVISION  
PLAT #7060



PROPERTY OF  
ROBERT A. MERGLIANO  
1692/257

PROPERTY OF  
DONALD & ANN HOWELL  
705/731

PROPERTY OF  
ROBERT & ANNA MILLER  
729/107

PROPERTY OF  
RICHARD  
1733/2

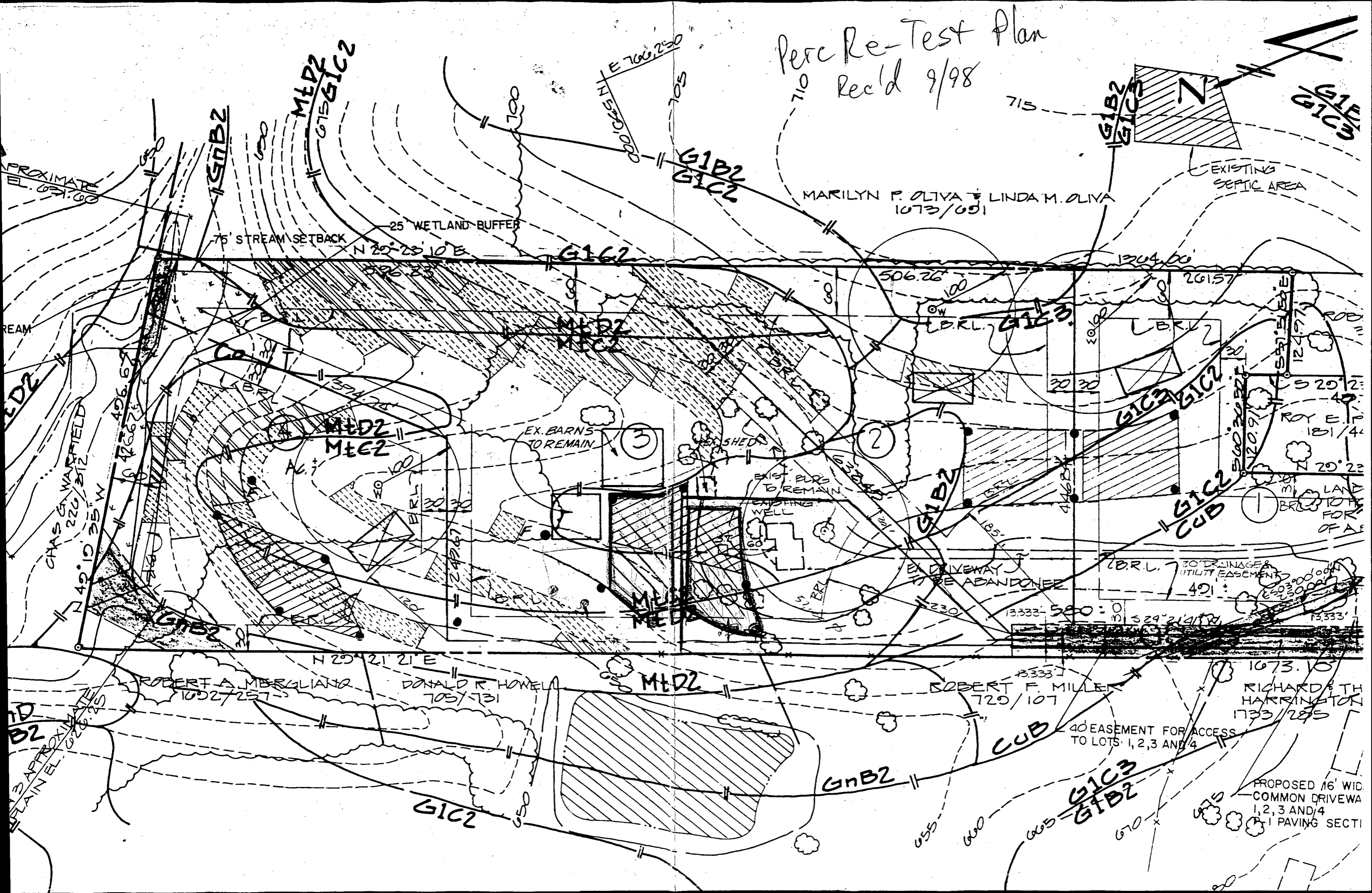
*Signed F-91-74*

N53900 E767250

AREA TABULATION

|  |   |
|--|---|
| TOTAL NUMBER OF BUILDABLE LOTS TO BE RECORDED  | 4 |
| TOTAL NUMBER OF OPEN SPACE LOTS TO BE RECORDED | 0 |

Perc Re-Test Plan  
Rec'd 9/98



PROXIMATE  
EL. 631.00

75' STREAM SETBACK  
25' WETLAND BUFFER

MARILYN P. OLIVA & LINDA M. OLIVA  
1073/001

EXISTING  
SEPTIC AREA

EX. BARN  
TO REMAIN

EX. SHED  
TO REMAIN

EX. DRIVEWAY  
TO BE ABANDONED

30' DRAINAGE  
UTILITY EASEMENT

ROBERT A. MERIGLIANO  
1092/257

DONALD R. HOWELL  
105/31

ROBERT F. MILLER  
720/107

RICHARD & TH. HARRINGTON  
1733/285

40' EASEMENT FOR ACCESS  
TO LOTS 1, 2, 3 AND 4

PROPOSED 16' WID.  
COMMON DRIVEWAY  
1, 2, 3 AND 4  
PAVING SECTI



**HOWARD COUNTY  
 PERMIT APPLICATION**

**PERMIT NUMBER**  
 700138207

Building Address 2882 Florence Rd  
Woodbine md 21797  
 Suite/Apt. #: N/A SDP/WP/Petition #: N/A  
 Census Tract \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Section \_\_\_\_\_ Area \_\_\_\_\_ Lot \_\_\_\_\_  
 Tax Map 13 Parcel 115 Grid 01  
 Zoning \_\_\_\_\_ Map Coordinates 731 Lot size \_\_\_\_\_

Property Owner's Name Charles W Palmer Jr  
 Address 2882 Florence Rd  
 City Woodbine State MD Zip Code 21797  
 Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
 Applicant's Name & Mailing Address, (if other than stated hereon):  
 \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_

Existing Use Residential SFD  
 Proposed Use Same  
 Estimated Construction Cost \$ 10,000  
 Description of Work Replace Flat Roof  
with Truss Roof / ADD Front  
35x8 Porch

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

Occupant or Tenant \_\_\_\_\_  
 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**

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

**BUILDING DESCRIPTION - RESIDENTIAL**

| Building Characteristics   | Utilities  |
|--|--|
| SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/><br>Depth _____ Width _____   | Water Supply:<br><input type="checkbox"/> Public<br><input checked="" type="checkbox"/> Private  |
| 1st floor: _____   | Sewage Disposal:<br><input type="checkbox"/> Public<br><input checked="" type="checkbox"/> Private   |
| 2nd floor: _____   | Electric Yes <input type="checkbox"/> No <input type="checkbox"/><br>Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                 |
| Basement: _____  | Heating System:<br>Electric <input type="checkbox"/> Oil <input checked="" type="checkbox"/><br>Natural Gas <input type="checkbox"/><br>Propane Gas <input type="checkbox"/> |
| Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/><br>Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/><br>No. of Bedrooms _____ | Sprinkler system: <u>N/A</u> <input checked="" type="checkbox"/><br><input type="checkbox"/> NFPA #13D<br><input type="checkbox"/> NFPA #13R<br>Other: _____                 |
| Multi-family dwellings:<br>No. of efficiency units: _____<br>No. of 1 BR units: _____<br>No. of 2 BR units: _____<br>No. of 3 BR units: _____  |  |
| Other Structure: _____<br>Dimensions: _____<br>Footings: _____<br>Roof: _____  |  |
| <input type="checkbox"/> State Certified Modular<br><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 THERE TO; (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 ON TO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Charles W Palmer Jr  
 Applicant's Signature

Charles W Palmer Jr  
 Print Name

Title/Company \_\_\_\_\_ 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 \$ <u>25</u>        |
| State Highways   |                |                            | Rear: _____  | Permit fee \$ <u>50</u>        |
| Building Official  |                |                            | Side: _____  | Excise tax \$ <u>1.00</u>      |
| Dev. Engineering, DPZ  | <u>8/29/02</u> | <u>Mark R. [Signature]</u> | Side St. _____   | Add'l per. fee \$ _____        |
| Health   |                |                            | All minimum setbacks met?<br>YES <input type="checkbox"/> NO <input type="checkbox"/>    | TOTAL FEES \$ <u>75</u>        |
| Fire Protection  |                |                            | Is Entrance Permit required?<br>YES <input type="checkbox"/> NO <input type="checkbox"/> | Sub-total paid \$ _____        |
| Is Sediment Control approval required prior to issuance?<br>YES <input type="checkbox"/> NO <input type="checkbox"/> |                |                            | Historic District?<br>YES <input type="checkbox"/> NO <input type="checkbox"/>           | Balance due \$ _____           |
| CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>   |                |                            | Lot Coverage for NewTown Zone _____  | Check # <u>673</u>             |
| ONE STOP SHOP: <input type="checkbox"/>  |                |                            | SDP/Red-line approval date _____   | Validation # _____             |
|  |                |                            |  | Accepted by <u>[Signature]</u> |

N 539,500  
E 766,500

PLAT No. 9839  
LOT 1

APPROXIMATE  
LOCATION OF EXISTING  
DWELLING

APPROXIMATE  
LOCATION OF EXISTING  
DWELLING

EXISTING ACCESS  
DRIVEWAY

EXISTING ACCESS  
DRIVEWAY

ST. MICHAEL'S OVERLOOK  
LOTS 1 - 4  
PLAT No. 9839  
LOT 2

EXISTING  
2-STORY  
BRICK HOUSE  
TO REMAIN

28 EXISTING 9' TALL  
PINE TREES

BRICK  
PATIO

CONCRETE  
AREAWAY

EXISTING BARN  
TO REMAIN

EXISTING BARN  
TO REMAIN

FEED SHED

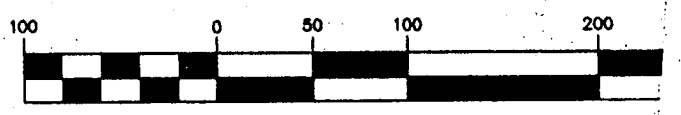
ST. MICHAEL'S OVERLOOK  
LOTS 1 - 4  
PLAT No. 9839  
LOT 3

APPROXIMATE  
LOCATION OF EXISTING  
DWELLING

WETLAND  
BUFFER

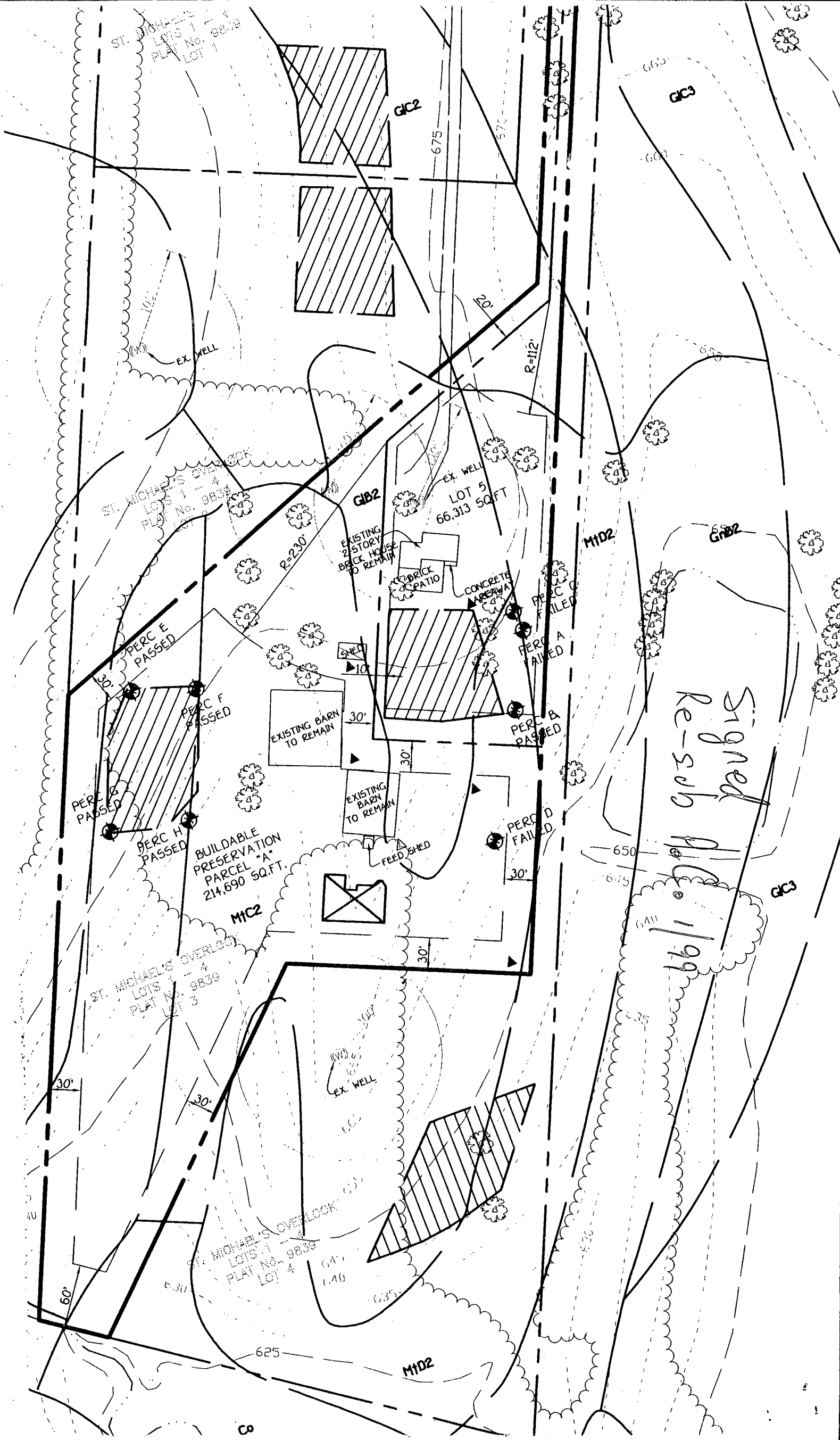
ST. MICHAEL'S OVERLOOK  
LOTS 1 - 4  
PLAT No. 9839  
LOT 4

GRAPHIC SCALE



( IN FEET )  
1 inch = 100 ft.

**OWNER AN**  
MR. CHA  
2802 FL  
WOODBINE.



Signed  
Re-sub MIC 1/99