

9/3/96
4:30
9/4/96
11:00 clo

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

TAXID # 04-356098

P 56975A

A 48638

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

461-9933 313-2640

DISTRICT _____

DATE 6-11-96

DATE SYSTEM APPROVED 9/4/96

INSPECTOR *JS*

INDEXED

South Carroll Backhoe, Inc.

IS PERMITTED TO INSTALL ALTER _____

ADDRESS 4410 Salem Bottom Road, Westminster, MD 21157 PHONE 875-4197

SUBDIVISION Gwyndyl Oak Estates LOT 14 ROAD 2812 Rustic Manor Ct.

PROPERTY OWNER ~~NV Homes~~ Theresa Leonhart

ADDRESS **BUILDING PERMIT SIGNED**

SEPTIC TANK CAPACITY 1250 GALLONS **AND RETURNED**
9/22/94 B00150449 - FINISH BASEMENT w/ 1 Bdrm

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 180

*ON 9/22/94 finished basement
5 bdrm total B00150449 OK BY JB*

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 distribution box 205 feet up the right lot line (350.20') and 80 feet off that same lot line when facing the lot from Rustic Manor Court. Run trenches on contour toward the left lot line.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. *6-13-96 OK JS*

BLDG PERMIT SIGNED AND RETURNED 7/2/00
B00125402 DECK

PLANS APPROVED BY Amy McMillen DATE 12/13/94

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

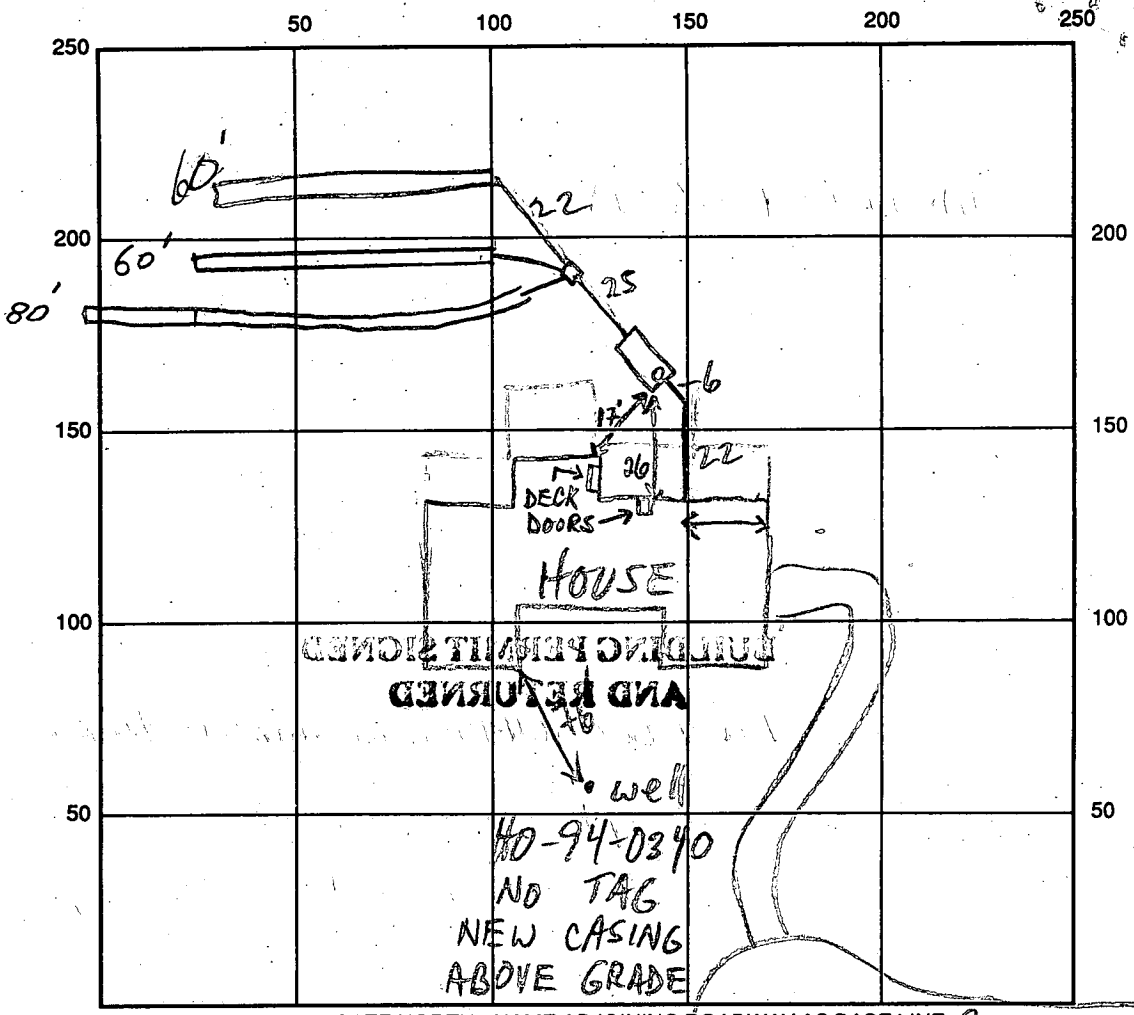
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON. CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

BLDG PERMIT SIGNED AND RETURNED 9-10-96
Serial # B00107826
proprietor tank

A 48638



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE RUSTIC MANOR CT

SEPTIC TANK LEVEL 1500 GAL CLEANOUTS 1 IN TANK

DISTRIBUTION BOX LEVEL _____

DRAIN FIELD/TITLE DEPTH 1 1/2 / 3 FT. TRENCH WIDTH 2 FT. INLET DEPTH 1 1/2 / 3 FT.

EFFECTIVE GRAVEL DEPTH 4 1/4 / 4 FT. TOTAL LENGTH 3 @ 60 FT.

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA _____ SQ. FT.

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

ABSORBENT AREA _____ SQ. FT.

REMARKS: 9/3/96 OK TO COVER TRENCH ①, DIG ② MR

9/4/96 OK TO COVER SECOND TRENCH AT 9/4/96 THIRD TRENCH OK TO COVER SEPTIC SYSTEM. APPROXIMATELY 20' EXTRA TRENCH LENGTH BEING ADDED TO EQUAL TRENCH, TO USE UP EXTRA STONE. MR

9/3/96 WPT OK TO COVER; BUT CASING HIT PER S. CARROLL;

DATE SYSTEM APPROVED 9/4/96 INSPECTOR Blk. Jmy

CASING REPAIRED, TAG MISSING MR

APPLICATION

PERCOLATION TESTING

A 48038

P _____

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

*APR 2005
REGISTERED*

DISTRICT _____

DATE 10-22-92

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 PETTIT & GRIFFIN INC. NV Homes

ADDRESS 18205-D FLOWER HILL WAY PHONE (301) 975-1020
GAITHERSBURG MARYLAND 20879

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION: Gwynedyl oak Estate Lot 14

SUBDIVISION McKendree Estates LOT NO. 12 (NEW 15 (9/16/93))

ROAD AND DESCRIPTION McKendree Road
2812 Rustic Manor Ct.

BLDG. PERMIT SIGNED
AND RETURNED 5-23-76
Serial # B300100057

TAX MAP 14 PARCEL # 123

SIZE OF LOT 40,000[#] - 60,000[#] TYPE BLDG. SINGLE FAMILY DWELLING - 4 BRMS
(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 _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING 11/16/92 Perc OK Hold for Dist R/H

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

48638 LOT 12

McKendree Estates

COUNTY #

SOIL PROFILE

0'
4'
TOPSOIL
BROWN
CLAY

TAN
SAND
LOAM

13'
ONLINE
2

0'
4'
TOPSOIL
BROWN
CLAY

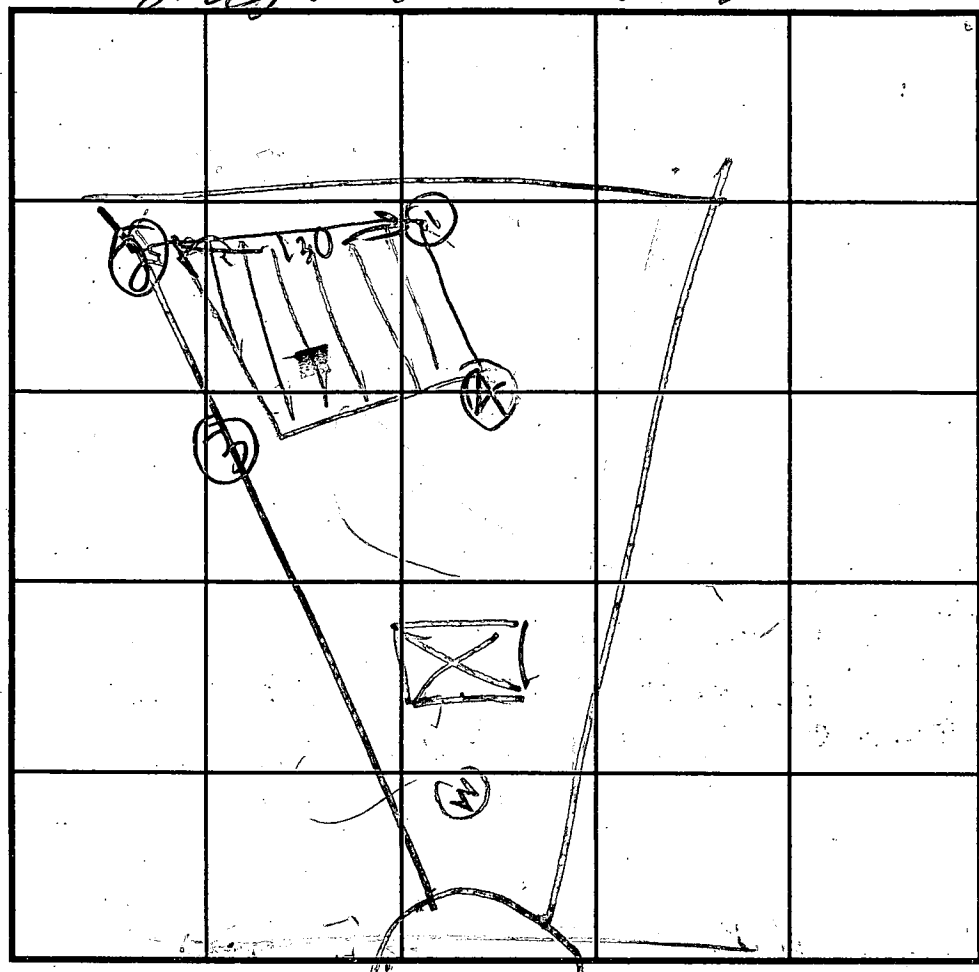
BEIGE
SAND
LOAM

ONLINE
3

0'
4'
TOP
SOIL
BROWN
CLAY

PINK
BROWN
SAND
LOAM

BEIGE
SAND
LOAM



SOIL PROFILE

0'
3 1/2'
TOPSOIL
BROWN
CLAY

DULL
BROWN
SAND
LOAM

12'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11/16/92	19	5	242	249	249	255	6
	1V	13	OK				
11/16/92	29	5	246	250	250	255	5
	2V	12	OK				
"	39	8	257	259	259	303	4
"	3D	5	257	258	258	305	7
"	3V	12	OK				
"	4V	12	OK				

ONLINE
LOT 11B/12
ONLINE
LOT 11B/12

REMARKS: Hole 19 Digger Test Plot Hole 23 dig on line
 TYPE OF SOIL: _____
 TESTED BY: Raymond Hodger ALSO PRESENT: Hugh O. Kelbman
 TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME: 6 TRENCH WIDTH: 2
 INLET DEPTH: 4 MAXIMUM BOTTOM DEPTH: 8 SQ. FT./BEDROOM: 180

C1 4575

SEQUENCE NO. (DENY 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# 48638

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

DATE Received grid

DATE WELL COMPLETED grid 031395

Depth of Well grid 160

PERMIT NO. grid H0-94-0340

OWNER PETTIT + GRIFFITH, INC. last name RUSTIC MAJOR first name TOWN GLENWOOD SUBDIVISION GWYNOLY OAK EST. SECTION LOT 14

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, TO), Check if water bearing. Rows include soft tan dirt, med hard/hard tan rock, med/med hard tan chips, med hard tan rock, soft tan chips, med hard/hard tan/gray, med brown rock, hard tan & gray rock, med hard tan rock.

GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL CEMENT BENTONITE CLAY

NO. OF BAGS 10 NO. OF POUNDS 1000 GALLONS OF WATER 60 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 39 ft.

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) PL 6 40

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

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

DEPTH (nearest ft.) grid showing screen depths: H O 39 160

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. 304

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH) from to

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

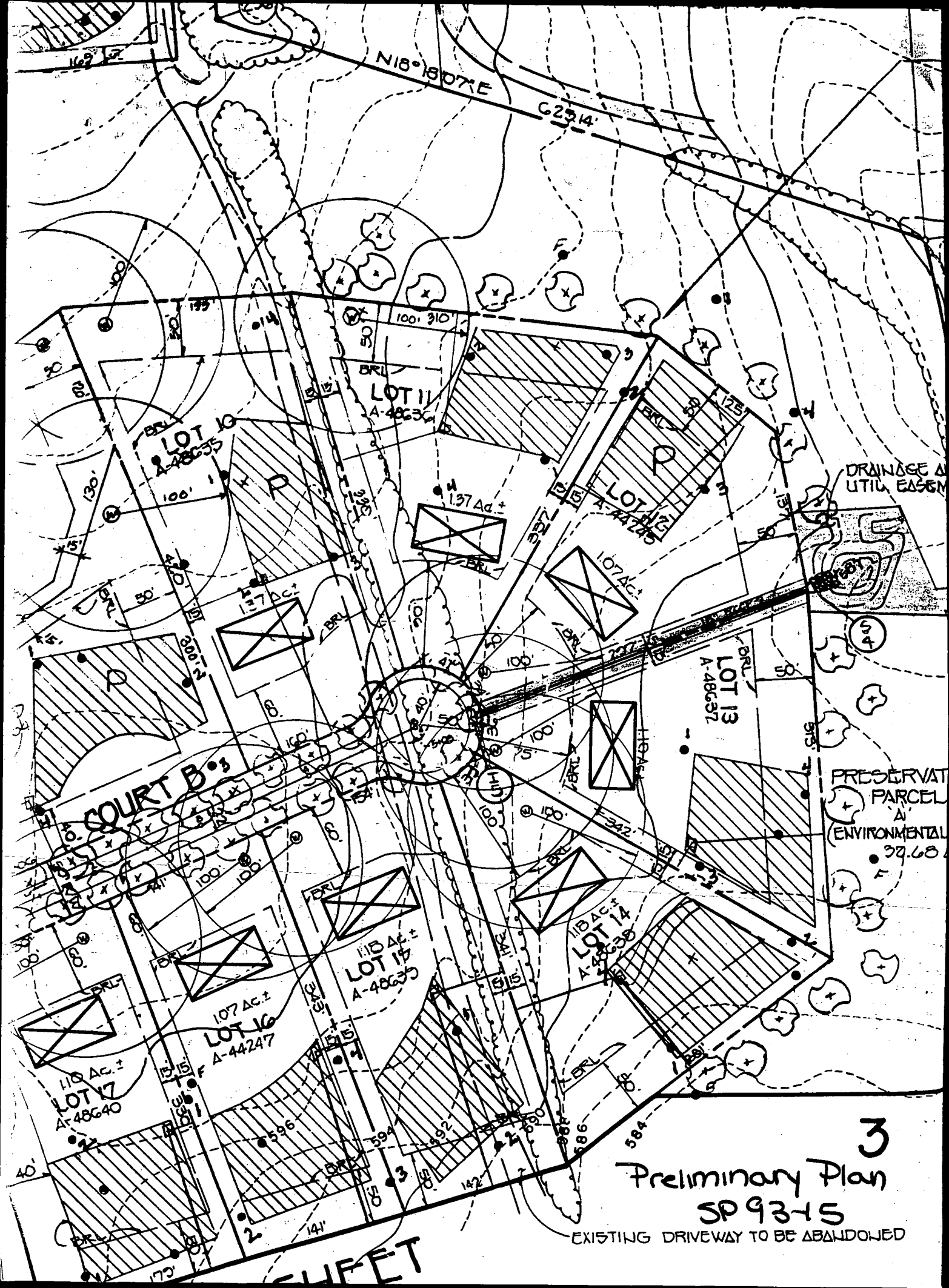
OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER) TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3

PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min. to nearest gal.) 12 METHOD USED TO MEASURE PUMPING RATE timer WATER LEVEL (distance from land surface) BEFORE PUMPING 27 WHEN PUMPING 4 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) LAND SURFACE (nearest foot)

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) 62' FPL 21' CPL



N18°18'07"E

G2314'

LOT 11
A-48634

LOT 10
A-48635

LOT 12
A-44725

LOT 13
A-48637

COURT B

LOT 15
A-48639

LOT 14
A-48638

LOT 17
A-48640

LOT 16
A-44247

DRAINAGE AND UTILITY EASEMENT

PRESERVATION PARCEL
A
(ENVIRONMENTAL)
37.68

3

Preliminary Plan
SP 93-15

EXISTING DRIVEWAY TO BE ABANDONED

SUET

Permit #

BO0102153

NV HOMES
2812 RUSTIC MANOR CT.
GLENWOOD MD 21738

9/10/97

Shown location of
Propane tank will have
no impact to the existing
well or septic - ok to proceed
A. McMiller

Lot shown contains 50 feet of setback and
record of plat # 11550 among the Land
Records of Howard County Maryland

Prepared by Gutschick, Little and Weber, P.A.
Grading around house may vary due to field
conditions

No construction work shall be done or
access material shall be used in septic
easement

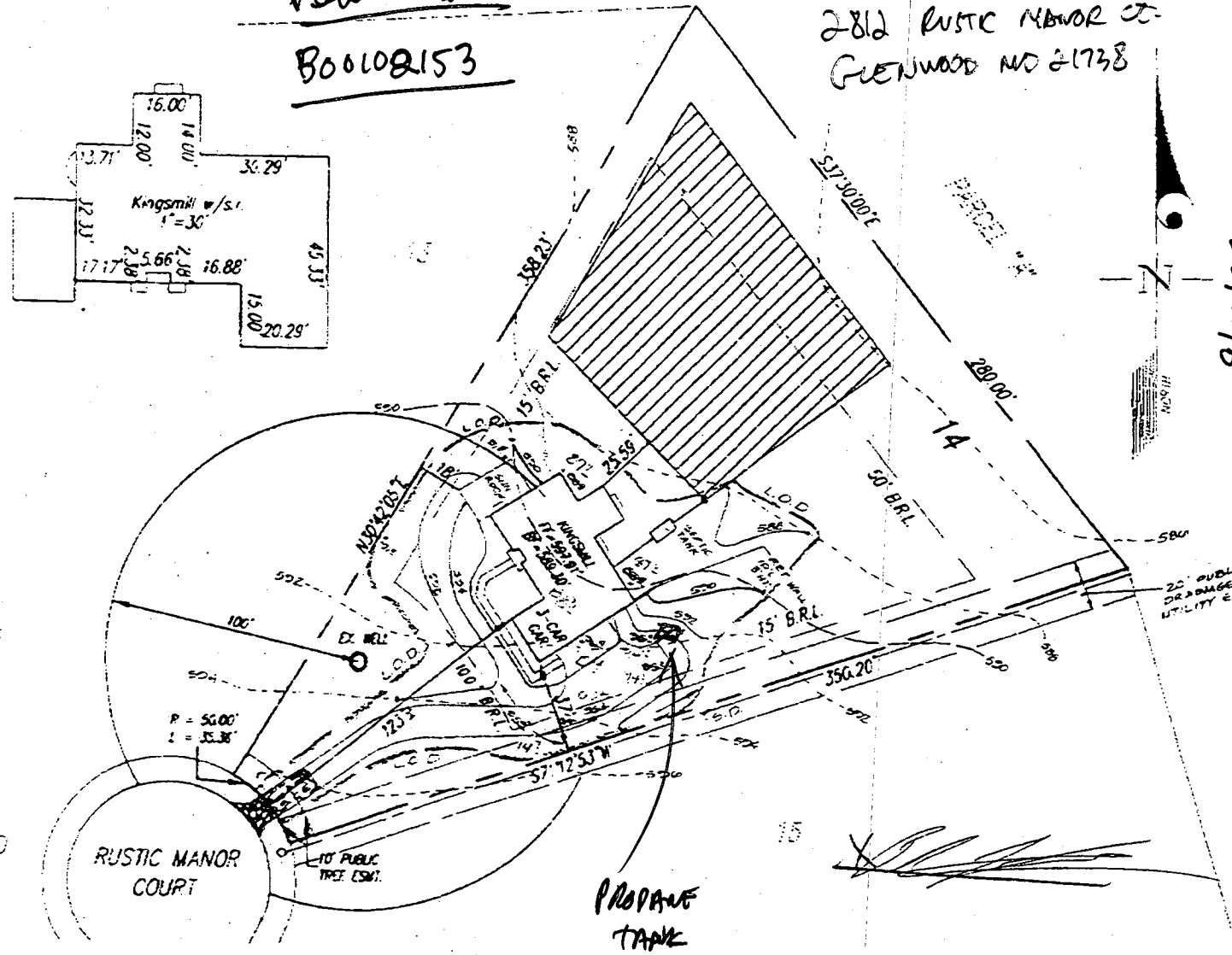
Wells shown per 39-93 13
Install sediment control as required by
Site Inspector. See Sediment Control Plan
39-95-72

Disturbed area shown is 12,420 s.f.
Pile excavated material on high side of
trench when installing septic field prior
to disposal of excess material
Length of trench for septic system to be
determined and specified by Howard County
Department of Health.

PTC SYSTEM DATA

- CEMENT FLOOR AREA = 685.00'
- FLOOR OF HOUSE = 580.00'
- ELEV. AT SEPTIC TANK = 580.50'
- ELEV. AT SEPTIC TANK = 580.25'
- ELEV. AT SEPTIC TANK = 580.00'
- ELEV. AT SEPTIC TANK = 580.00'
- ELEV. AT DIST. BOX = 580.25'

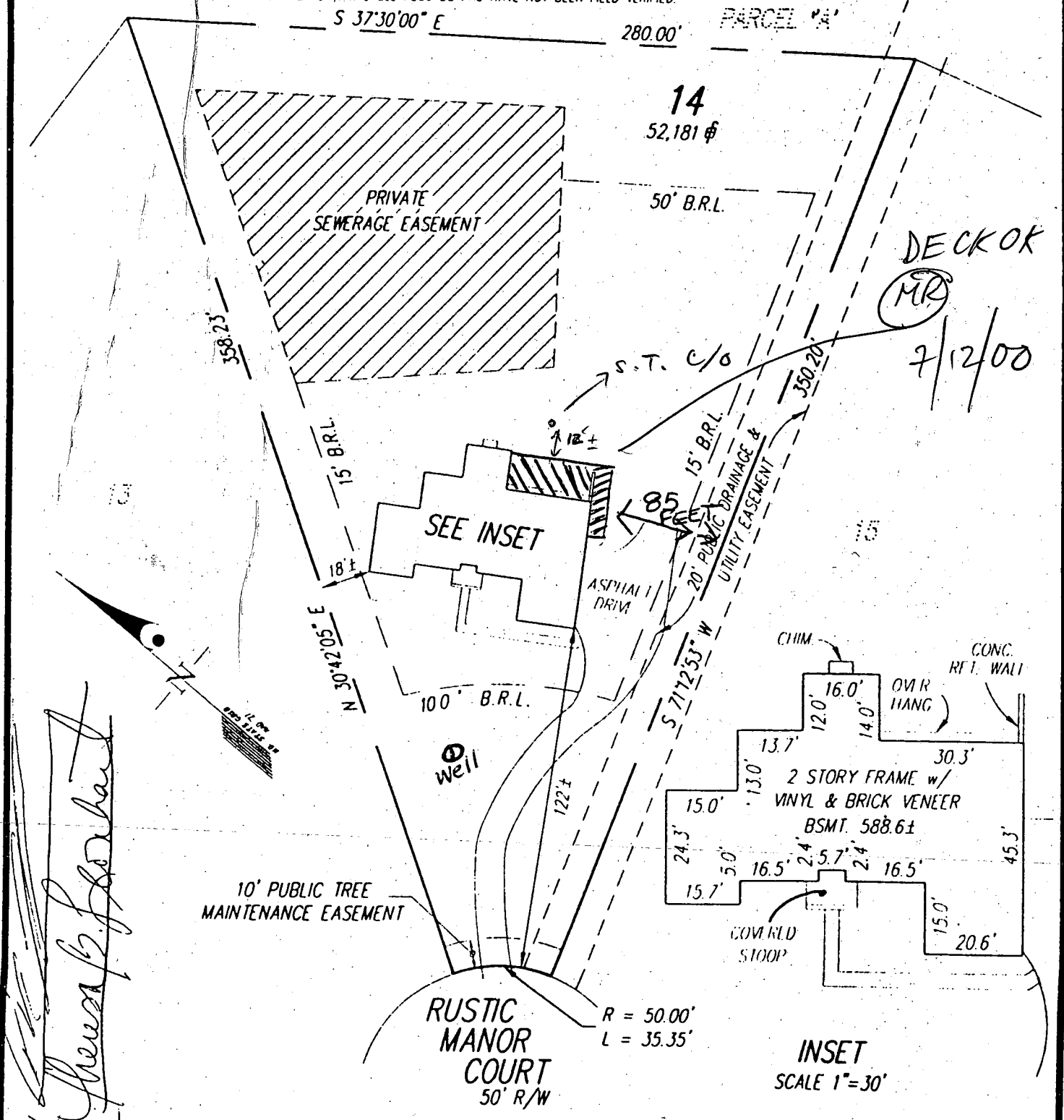
LOT 14
YNDYL OAK ESTATES
ELEC. DIST. HOWARD CO., MD
MADE JUNE 18, 1996 1"=50'



PROANE
TANK

Leonhart

NOTE: THIS LOCATION DRAWING IS OF BENEFIT TO A CONSUMER ONLY INsofar AS IT IS REQUIRED BY A LENDER OR A TITLE INSURANCE COMPANY OR ITS AGENT IN CONNECTION WITH A CONTINGENTED TRANSFER AND FINANCING, AND IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATION OF FENCES, SHEDS, GARAGES, BUILDINGS, LANDSCAPING, OR OTHER EXISTING OR FUTURE IMPROVEMENTS; AND DOES NOT PROVIDE FOR THE ACCURATE IDENTIFICATION OF PROPERTY BOUNDARY LINES, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING.
 THIS LOCATION DRAWING WAS PREPARED WITHOUT THE BENEFIT OF A CURRENT TITLE REPORT THIS PROPERTY IS SUBJECT TO ANY AND ALL EASEMENTS, RIGHTS-OF-WAY, COVENANTS, AND RESTRICTIONS, ETC. OF RECORD, SOME OR ALL OF WHICH MAY OR MAY NOT BE SHOWN AND/OR REFERENCED HEREON. BEARINGS AND DISTANCES OF THE PROPERTY BOUNDARY LINES SHOWN HEREON ARE PER AVAILABLE RECORDS AND HAVE NOT BEEN FIELD VERIFIED.



Shawn B. Leonhart

BUILDING SETBACKS (B.R.L.'s) SHOWN HEREON PER PLAT No. 11550
 SETBACK DISTANCES SHOWN HEREON AS "±" HAVE AN ACCURACY OF ±1 FOOT.

GLW GUTSCHICK, LITTLE & WEBER, P.A.

CIVIL ENGINEERS, SURVEYORS, PLANNERS, LANDSCAPE ARCHITECTS
 1909 NATIONAL DRIVE - SUITE 250 - BURTONSVILLE OFFICE PARK
 BURTONSVILLE, MARYLAND 20866

THE PROPERTY SHOWN HEREON LIES WITHIN ZONE C (AREA OF MINIMAL FLOODING) AS SHOWN ON THE F.E.M.A. FLOOD INSURANCE RATE MAP, COMMUNITY PANEL No. 240044 0014 B, REVISED DECEMBER 4, 1986.

REFERENCE : PLAT No. 11550

DATE OF LATEST FIELD WORK: 09-13-96

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3430 COURT HOUSE DRIVE ELLICOTT CITY, MD 21043 PERMITS (410) 313-2465 INSPECTIONS (410) 313-1810 AUTOMATED INFORMATION (410) 313-3800	HOWARD COUNTY PERMIT APPLICATION	PERMIT NUMBER <u>BO0125402</u>
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Building Address <u>2812 RUSTIC MANOR COURT GLENWOOD, MD.</u> Suite/Apt. #: _____ SDP/WP/Petition #: _____ Census Tract <u>6040.00</u> Subdivision <u>Gwyndyl OAK ESTATE</u> Section _____ Area _____ Lot # <u>14</u> Tax Map <u>14</u> Parcel <u>123</u> Grid <u>11</u> Zoning <u>LL-DED</u> Map Coordinates <u>9D3</u> Lot size <u>1.5 acres</u>	Property Owner's Name <u>HERESA LEONHART</u> Address <u>2812 RUSTIC MANOR CT.</u> City <u>Glenwood</u> State <u>Md</u> Zip Code <u>21738</u> Home Phone <u>301 854 5988</u> Work Phone <u>301 504-4477</u> Applicant's Name & Mailing Address, (if other than stated hereon): _____ Phone _____ Fax _____
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Existing Use <u>PRIVATE RESIDENCE - SF</u> Proposed Use <u>SAME</u> Estimated Construction Cost \$ <u>6000</u> Description of Work <u>ADDITION OF DECK 24' x 4'</u> <u>W/ STAIRS</u>	Contractor Company _____ Contact Person _____ Address _____ City _____ State _____ Zip Code _____ License No. _____ Phone _____ Fax _____
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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 _____
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BUILDING DESCRIPTION - COMMERCIAL		BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics Height: _____ No. of stories: _____ Gross area, sq. ft. per floor: _____ Use group: _____ 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	Utilities Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> 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"/> Sprinkler system: N/A <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads	Building Characteristics SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth Width 1st floor: _____ 2nd floor: _____ Basement: <input type="checkbox"/> Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/> <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms <u>4</u> 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	Utilities Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Heating System: <input checked="" type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <input checked="" type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: N/A <input checked="" type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other:

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.

<u>Theresa Leonhart</u> Applicant's Signature	<u>HERESA LEONHART</u> Print Name <u>JULY 12, 2000</u> Date
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Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
 ** PLEASE WRITE NEATLY AND LEGIBLY **
 - FOR OFFICE USE ONLY -

AGENCY DATE SIGNATURE APPROVAL	DEPT. SETBACK INFORMATION	PROPERTY ID# <u>22900</u>
<input checked="" type="checkbox"/> Land Development DPZ <input checked="" type="checkbox"/> State Highways <input checked="" type="checkbox"/> Building Official <input checked="" type="checkbox"/> Dev. Engineering DPZ <input checked="" type="checkbox"/> Health <input checked="" type="checkbox"/> Fire Protection Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>	Front: <u>100 FT</u> Rear: <u>50 FT</u> Side: <u>20 FT</u> Side St.: <u>NA</u> All minimum setbacks met? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> Is Entrance Permit required? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> Historic District? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> Lot Coverage for New Town Zone SDP/Red-line approval date _____ Accepted by _____	Filing fee \$ _____ Permit fee \$ <u>30</u> Excise tax \$ _____ Sub-total paid \$ _____ Add'l permit fee \$ _____ TOTAL FEES \$ <u>50</u> Balance due \$ _____ Check # <u>1225</u> Validation # _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/> ONE STOP SHOP: <input type="checkbox"/>		