

12-16-96
3:00 C.O.
12-17-96
12:00 C.O.
1-7-97
12:00 C.O.

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 57346-A

A 48646

DISTRICT 4th

DATE 10-21-96

DATE SYSTEM APPROVED 12/17/96

INSPECTOR M. Rifkin

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXXXX~~ 313-2640

INDEXED

South Carroll Backhoe, Inc. IS PERMITTED TO INSTALL X ALTER

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

SUBDIVISION Gwyndyl Oak Estates LOT 24 ROAD 2808 Belle Hollow Court

PROPERTY OWNER N V Homes

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

TRENCHES - Trench to be 3 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 5 feet below original grade. Effective area begins at 3 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Place distribution box 170 feet up the right lot line (320.00') and 80 feet off that same lot line when facing the lot from Belle Hollow Court. Run first 2 trenches on contour toward the left lot line, then all subsequent trenches 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 9/13/96 OKS

PLANS APPROVED BY Amy McMillen/Glen Savage

REVISED DATE 09/04/96

COVER NO WORK UNTIL INSPECTED AND APPROVED

BLDG. PERMIT SIGNED AND RETURNED 6/8/00

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM Pool

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)

BLDG. PERMIT SIGNED AND RETURNED 11/16/00
00027436 Deck

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

BLDG. PERMIT SIGNED AND RETURNED 11/14/96
Serial # 297103840

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.

BLDG. PERMIT SIGNED AND RETURNED 12/26/96

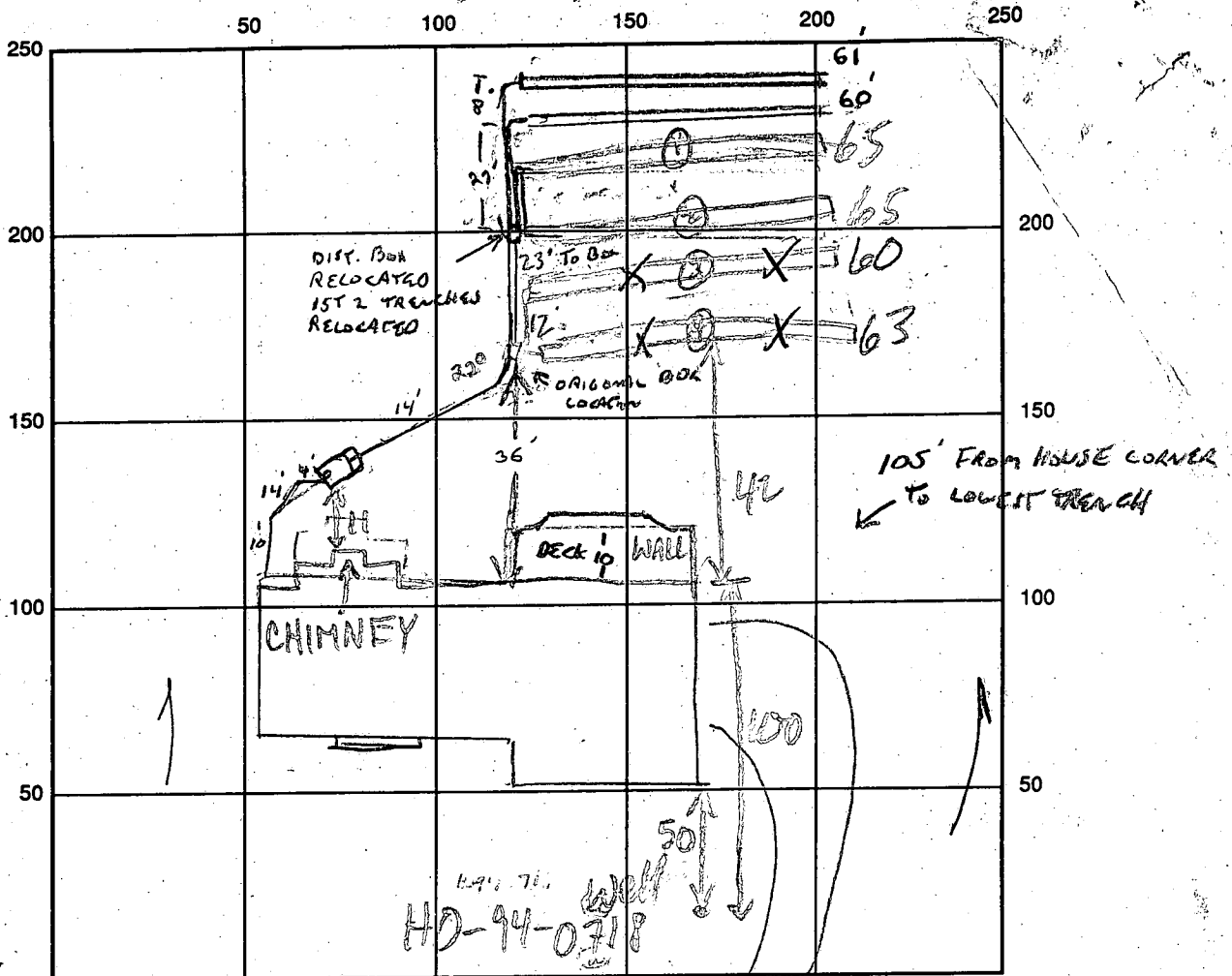
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

***CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.**

Serial # 000103495
sundick

A
48646



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
BELLE HOLLOW CT

SEPTIC TANK LEVEL OK 1500 GAL CLEANOUTS 100 TANK

DISTRIBUTION BOX LEVEL OK BAFFLE IN

DRAIN FIELD/TITLE DEPTH 5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 65/65/60/63 FT.

NUMBER OF TRENCHES _____ ONE SIDEWALL/BOTTOM AREA 0195 @195 @180 @189 SQ. FT.

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

ABSORBENT AREA 760 SQ. FT.

REMARKS: 12/12/96 OK TO COVER TO DIST. BOX, OK TO INSTALL INITIAL

TRENCHES ALL ON ONE SIDE OF SEPTIC EASEMENT FOR EASE OF REPAIR. &

COVER AS NEEDED TO PREVENT RAINWATER INTRUSION. & 12/16/96 TWO TRENCHES

COMPLETE, ENDS OPEN

12/17/96 OK TO COVER (30-45% Rx in trench middles) MR

12/17/96 OK 3' B.G. MR 1-7-97 TOP 2 TRENCHES + DIST. BOX RELOCATED

DATE SYSTEM APPROVED 12/17/96 INSPECTOR M. Litkin TO ACCOMMODATE PERMITS

APPLICATION

PERCOLATION TESTING

A 48646

P _____

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

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 PELIT & 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: Grwyndyl Oaks Estates

SUBDIVISION McKendree estates LOT NO. 23 NEW 25

ROAD AND DESCRIPTION McKendree Road 2808 Belle Hollow Ct.

BLDG. PERMIT SIGNED AND RETURNED 5-20-96
Serial # 64910
LBRms

TAX MAP 14 PARCEL # 123

SIZE OF LOT 40,000# - 60,000# TYPE BLDG. SINGLE FAMILY DWELLING
(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 11/17/92 Per OK Hold Permit

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

48646

LOT 23

McKendree Estates

COUNTY #

SOIL PROFILE

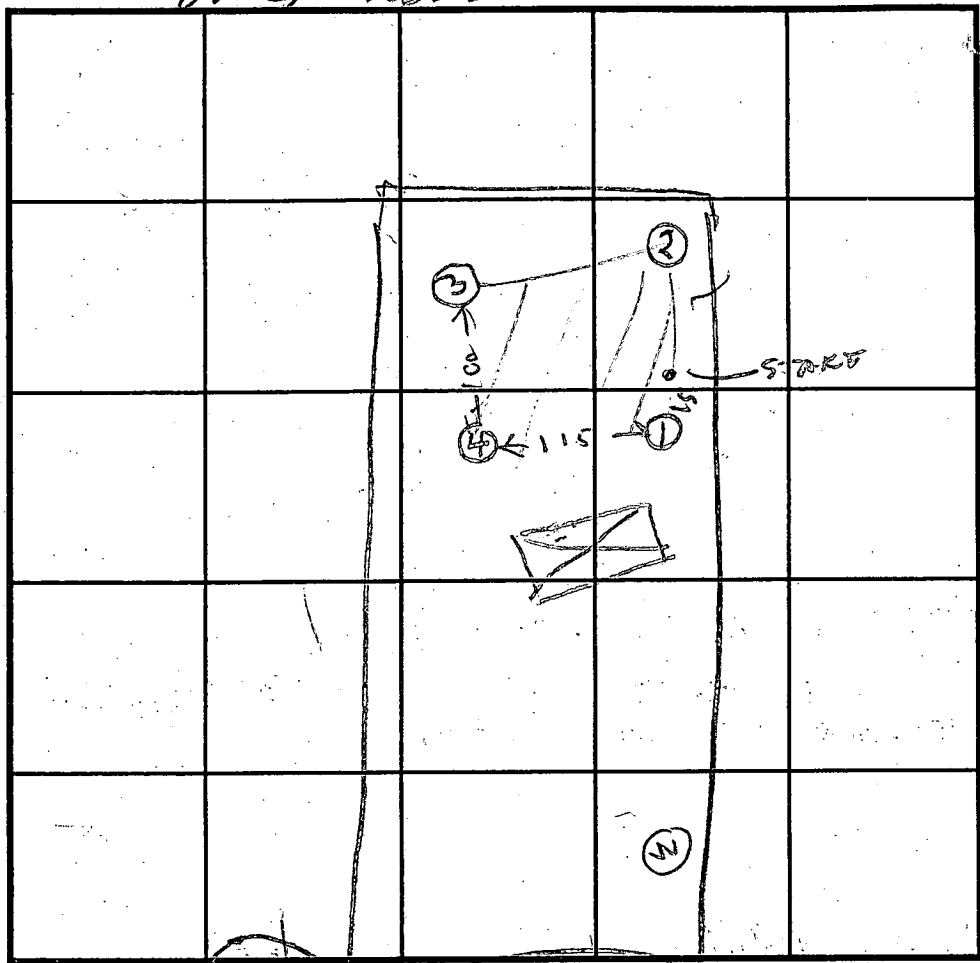
0' **(1)**
 CLAY TOPSOIL
 OLIVE BROWN
 & RUST BROWN SAND LOAM WITH FEW ROCKS

11 0 **(2)**
 CLAY TOPSOIL
 OLIVE BROWN
 & RUST BROWN SAND LOAM WITH FEW ROCKS

11 3 1/2 **(3)**
 TOPSOIL CLAY
 BEIGE SAND LOAM

SOIL PROFILE

0' **(4)**
 TOPSOIL CLAY
 RUST BROWN
 & OLIVE BROWN SAND LOAM WITH FEW ROCKS
 10 1/2 HARD



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

COURT

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11/17/92	IS	3	227	231	231	237	5
	1D	2.5	228	231	231	236	5
11/17/92	IV	11	OK	SHALLOW			
	2S	3.5	238	242	242	247	5
	2V	11	OK				
	3S	5	244	245	245	246	1
11/17/92	3V	12.5	OK	SHALLOW			
	4V	10 1/2	OK	SHALLOW			

REMARKS Hole (2) & (3) dug per steps Hole (1) & (4) a little off steps

TYPE OF SOIL _____ TESTED BY B Hodger ALSO PRESENT HUGH & OKettomj & SN

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 5 TRENCH WIDTH 2

INLET DEPTH 3 MAXIMUM BOTTOM DEPTH 5 SQ. FT./BEDROOM 180

12/5

C1 4155 SEQUENCE NO. (MDE 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)

FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE

COUNTY NUMBER A-48646

DATE RECEIVED

DATE WELL COMPLETED 042596

DEPTH OF WELL 450 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HD-99-0718

OWNER WHEELER DEV. INC. STREET OR RFD BELLE HOLLOW CT. TOWN SUBDIVISION GUMBY OAK EST SECTION LOT 24

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 dirt, hard gray rock, soft brown rock, etc.

GROUTING RECORD

WELL HAS BEEN GROUTED (Y/N) TYPE OF GROUTING MATERIAL (Cement, Bentonite Clay) NO. OF BAGS, NO. OF POUNDS, GALLONS OF WATER, DEPTH OF GROUT SEAL

CASING RECORD (Steel, Concrete, Plastic, Other)

MAIN CASING TYPE (Nominal diameter, Total depth)

OTHER CASING (if used) (diameter, depth)

SCREEN RECORD (Steel, Brass, Plastic, Open Hole, Other)

NUMBER OF UNSUCCESSFUL WELLS: 0 WELL HYDROFRACTURED (Y/N)

CIRCLE APPROPRIATE LETTER A: WELL WAS ABANDONED AND SEALED... 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...

TYPE: MWD/MSD/MGD DRILLERS LIC. NO. 304 David Kelly

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. 509

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

DEPTH (nearest ft.) HO 24 456... SLOT SIZE 1 2 3 DIAMETER OF SCREEN

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

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

PUMPING TEST

HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 8 METHOD USED TO MEASURE PUMPING RATE timer WATER LEVEL (distance from land surface) BEFORE PUMPING 56 ft. WHEN PUMPING 363 ft. 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. TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29. 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)

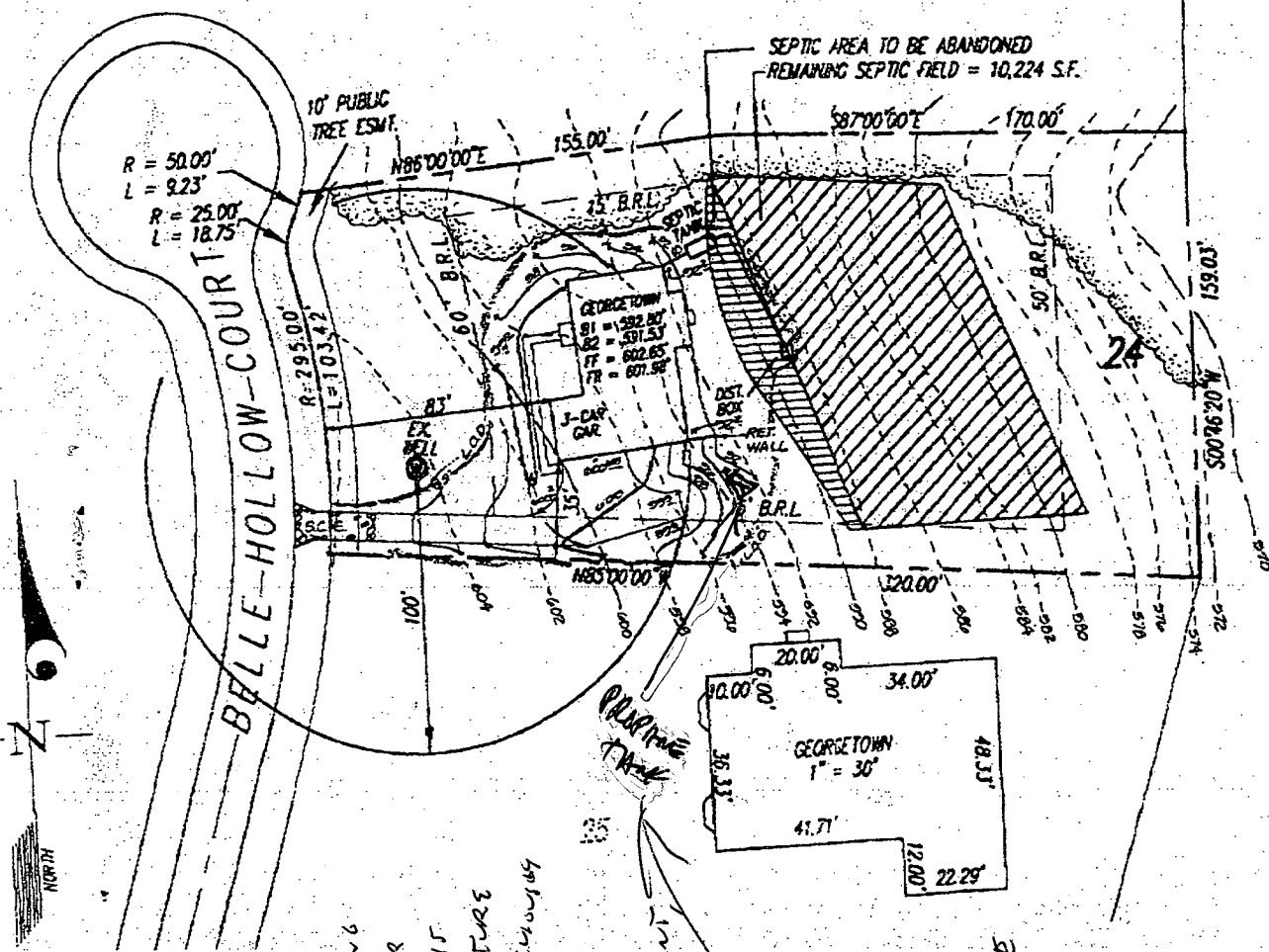
LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND /OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL) Drilled on Approved state

Notes.

1. Lot shown contains 45,080 sq. ft. and recorded at plot # 11551 among the Land Records of Howard County, Maryland.
2. Prepared by Gutschick, Little and Weber, P.A.
3. Grading around house may vary due to field conditions.
4. No construction stockpiling refuse or excess material shall be buried in septic easement.
5. Well as field located by G.L.W.
6. Install sediment controls as required by Site Inspector. See Sediment Control Plan # CP-95-26.
7. Disturbed area shown is 15,800 s.f.
8. Pre excavated material on high side of trench when installing septic field prior to disposal of excess material.
9. Length of trench for septic system to be determined and specified by Howard County Department of Health.

SEPTIC SYSTEM DATA:
 BASEMENT FLOOR AREA = 392.20' / 591.53'
 INV. OUT OF HOUSE = 588.85'
 INV. IN AT SEPTIC TANK = 588.75'
 INV. OUT AT SEPTIC TANK = 582.5'
 EX. ELEV. AT SEPTIC TANK = 590.5'
 PROP. ELEV. AT SEPTIC TANK = 590.5'
 INV. IN AT DIST. BOX = 585.0'±
 EX. ELEV. AT DIST. BOX = 589.0'±

LOT 24
 GWYNDYL OAK ESTATES
 4th ELEC. DIST. HOWARD CO., MD
 Revised Aug 27, 1996 1"=50'



1/14/97
 SITE PLAN ACCOMPANYING
 B00103600, LOCATION FOR
 PROPOSED SEPTIC TANK IS
 IN CONFLICT WITH FUTURE
 POOL LOCATION. A PREVIOUSLY
 APPROVED PERMIT FOR
 CP TANK INSTALLATION
 # B00103090 IS CURRENTLY
 DISCUSSED W/ SALES REP
 FOR SUBURBAN PROGRAM.
 THIS ~~PERMIT~~ RETURNED TO
 APPLICATION 10' FROM
 HOUSE
 PERMITS.
 MINIMUM
 DISTANCE

Approved Septic System Plan
 Howard County Health Department
 REVISED

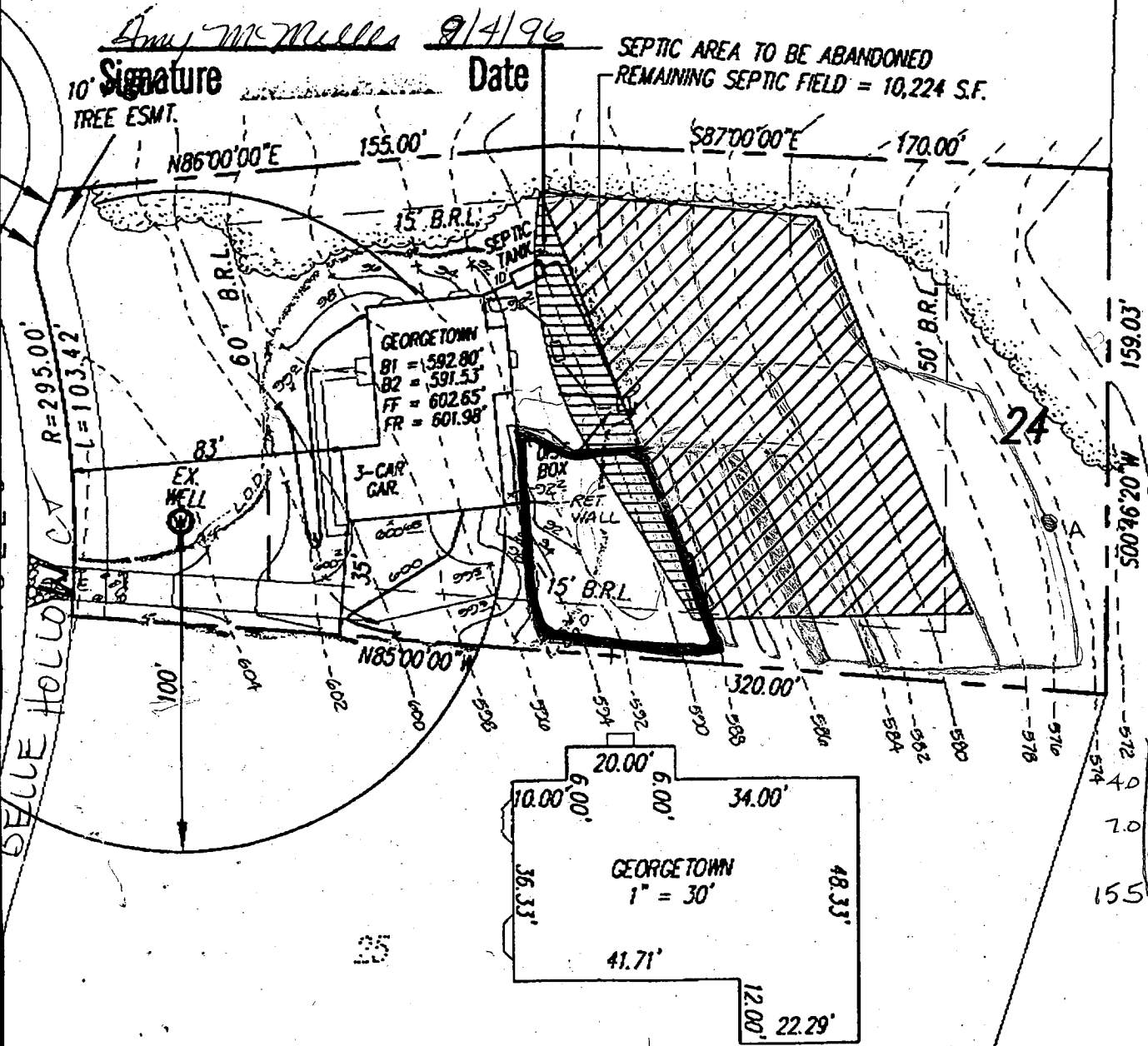
1-3-97 Purpose of additional test hole was to provide adequate make-up area for the desired location of a pool. The first two trenches will be abandoned and replaced to the left side of the lot. This will should allow enough room to place a 40 X 20 pool slightly to the right and behind the house. This was told to the owner. *Amy McMillen*

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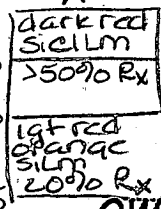
Amy McMillen 9/4/96
 Signature Date
 10' TREE ESMT.

SEPTIC AREA TO BE ABANDONED
 REMAINING SEPTIC FIELD = 10,224 S.F.



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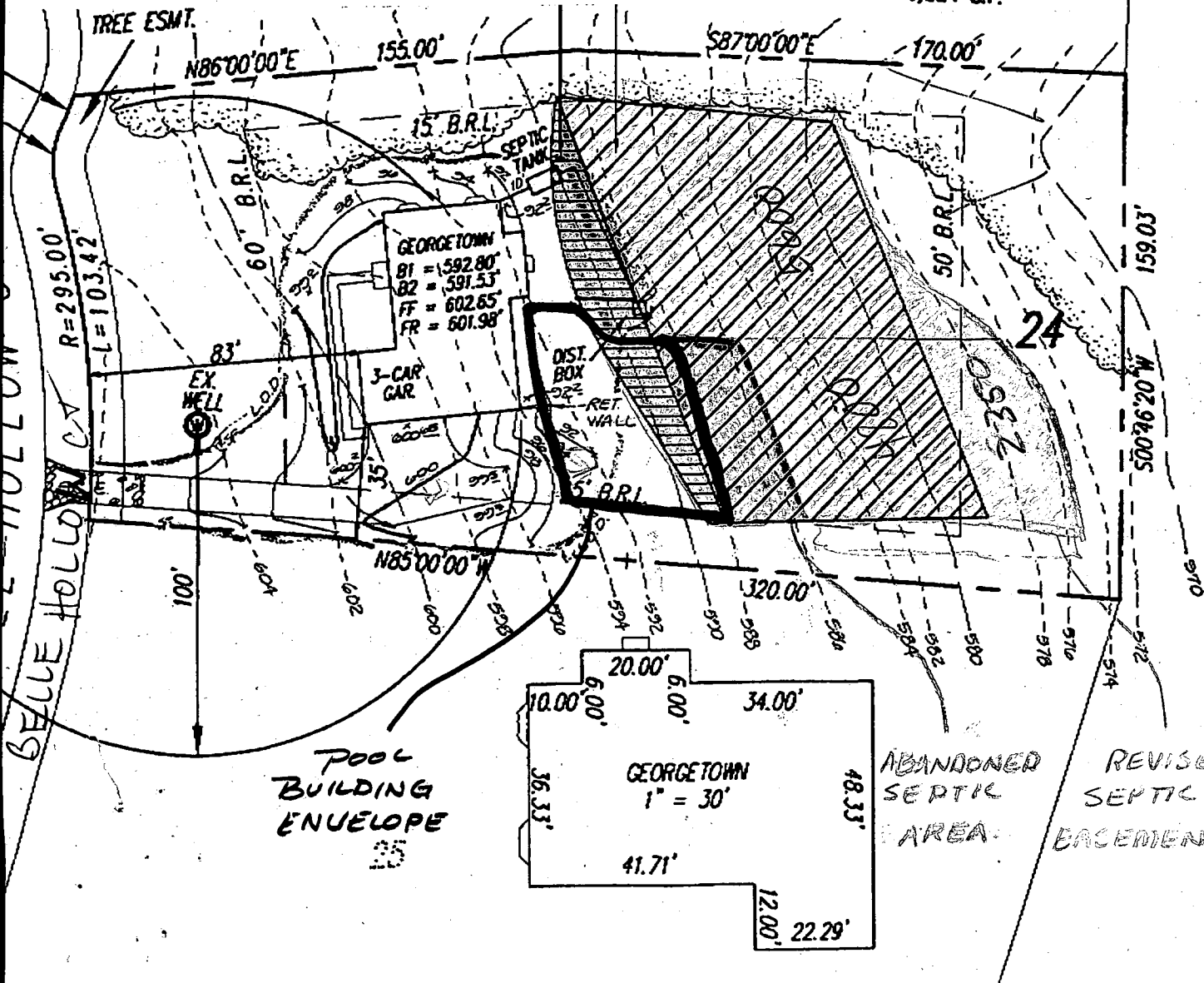
Pools are OK in BRL

1-9-97

By copy of this plan, the Health Department accepts this modification to the recorded sewage disposal easement.

Amy McMullen

SEPTIC AREA TO BE ABANDONED
-REMAINING SEPTIC FIELD = 10,224 S.F.



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LOT 24

GWYNDYL OAK ESTATES

4th ELEC. DIST. HOWARD CO., MD

Revised Aug 27, 1996

1"=50'

9/4/96

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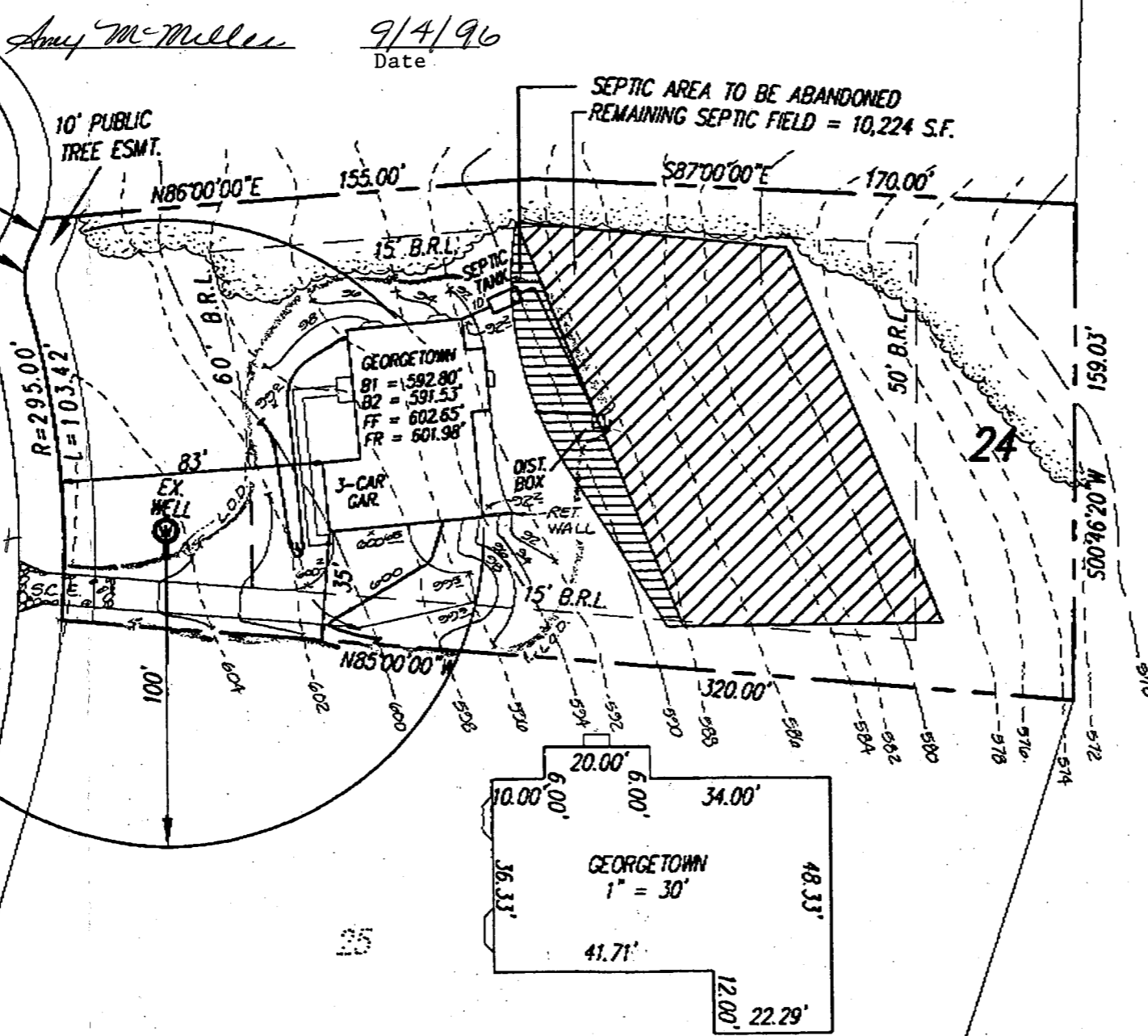
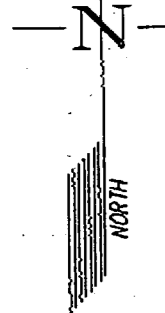
Amy McMullen

9/4/96
Date

Michael Tran, NV Homes
*Builder advised to inform client that this modification to the recorded sewage disposal easement may change in house style (as from the adjustment approved 8/26/96) may result in the insufficient area in which to place a swimming pool & deck on back of the house.

ALL

BELLE-HOLLOW-COURT



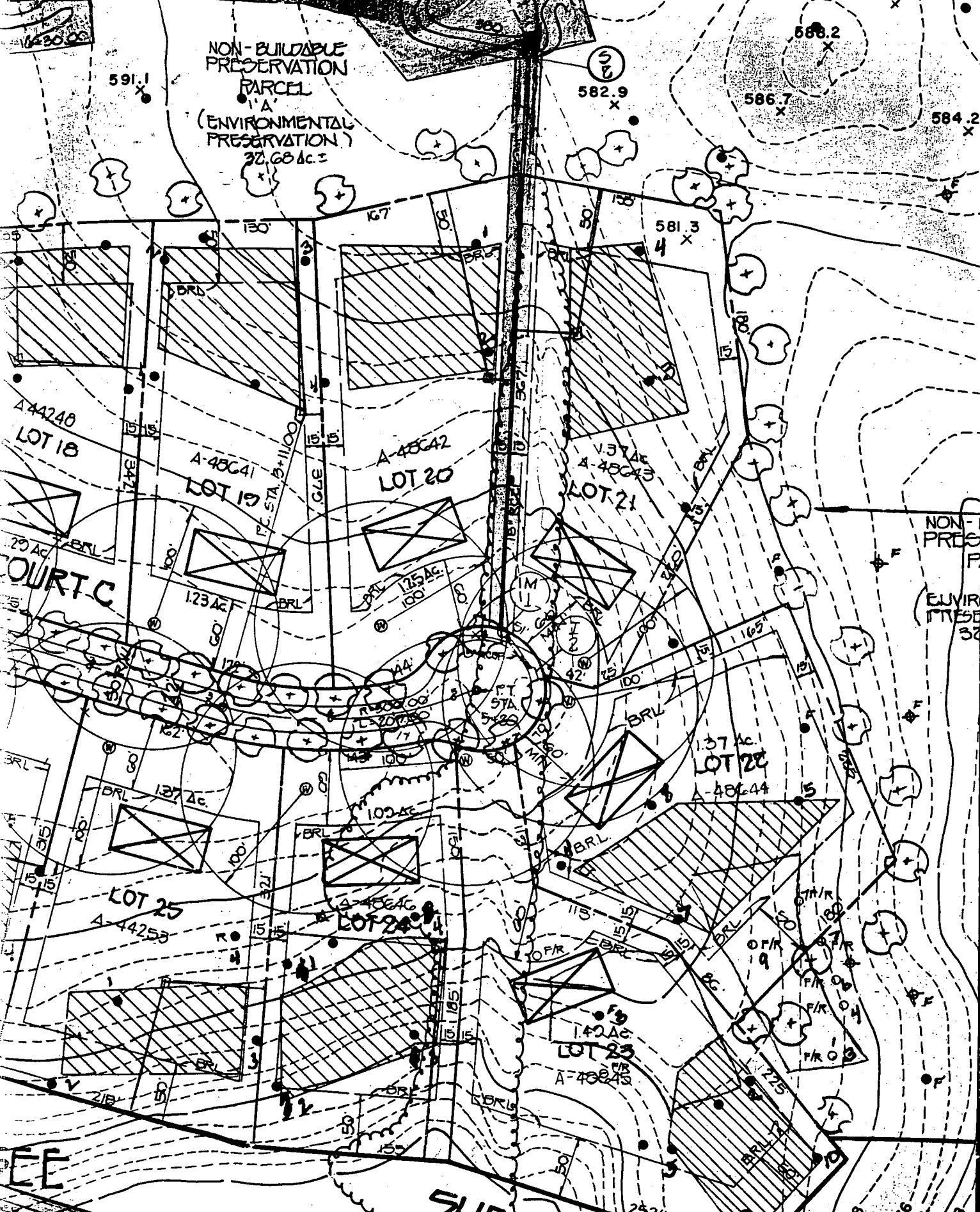
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 4th ELEC. DIST. HOWARD CO., MD
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NON-BUILDABLE
PRESERVATION
PARCEL
'A'
(ENVIRONMENTAL
PRESERVATION)
32.68 AC. ±



A-44240
LOT 18
A-48641
LOT 19
A-48642
LOT 20
A-48643
LOT 21
A-48644
LOT 22
A-44253
LOT 25
A-48646
LOT 24
A-48645
LOT 23

COURT C



Preliminary Plan

DRAINAGE &
UTILITY EASEMENT

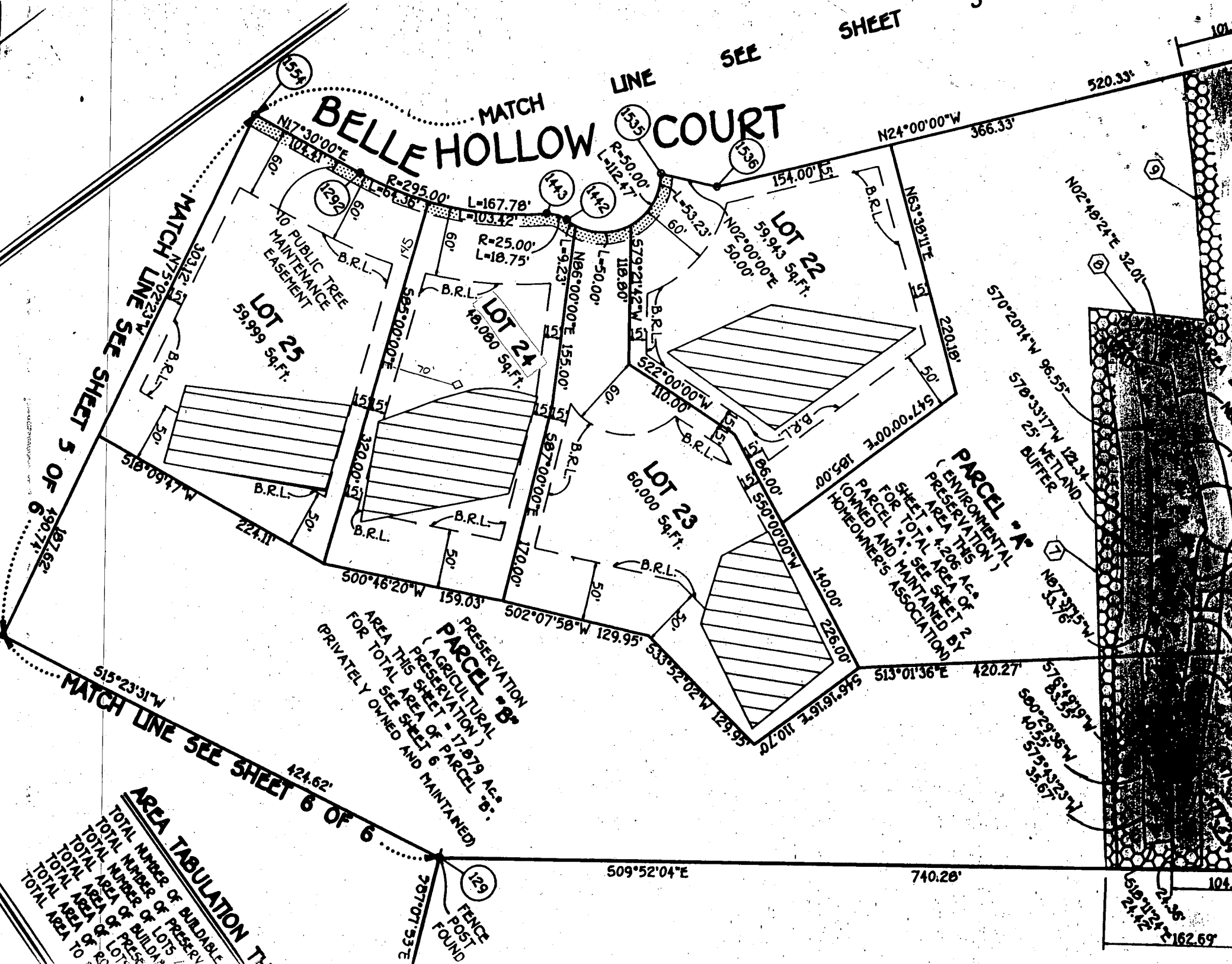
SP 93-15

SHEET

570
572
576
578
580
582
584
586
588
590
592
594
596
598
600

SEE

BELLE HOLLOW COURT



MATCH LINE SEE SHEET 5 OF 6

MATCH LINE SEE SHEET 6 OF 6

AREA TABULATION TR

TOTAL NUMBER OF BULDRABLE	
TOTAL NUMBER OF PRESERV	
TOTAL AREA OF BULDRAB	
TOTAL AREA OF PRES	
TOTAL AREA TO	

PRESERVATION
 (AGRICULTURAL)
PARCEL B
 AREA THIS SHEET = 17.979 AC±
 FOR TOTAL SEE SHEET 6
 (PRIVATELY OWNED AND MAINTAINED)

PARCEL A
 (ENVIRONMENTAL)
 PRESERVATION)
 AREA THIS SHEET = 4.206 AC±
 FOR TOTAL AREA OF PRESERVATION
 SEE SHEET 2
 PARCEL A: SEE SHEET 2
 OWNED AND MAINTAINED BY
 HOMEOWNER'S ASSOCIATION

FENCE
 POST
 FOUND

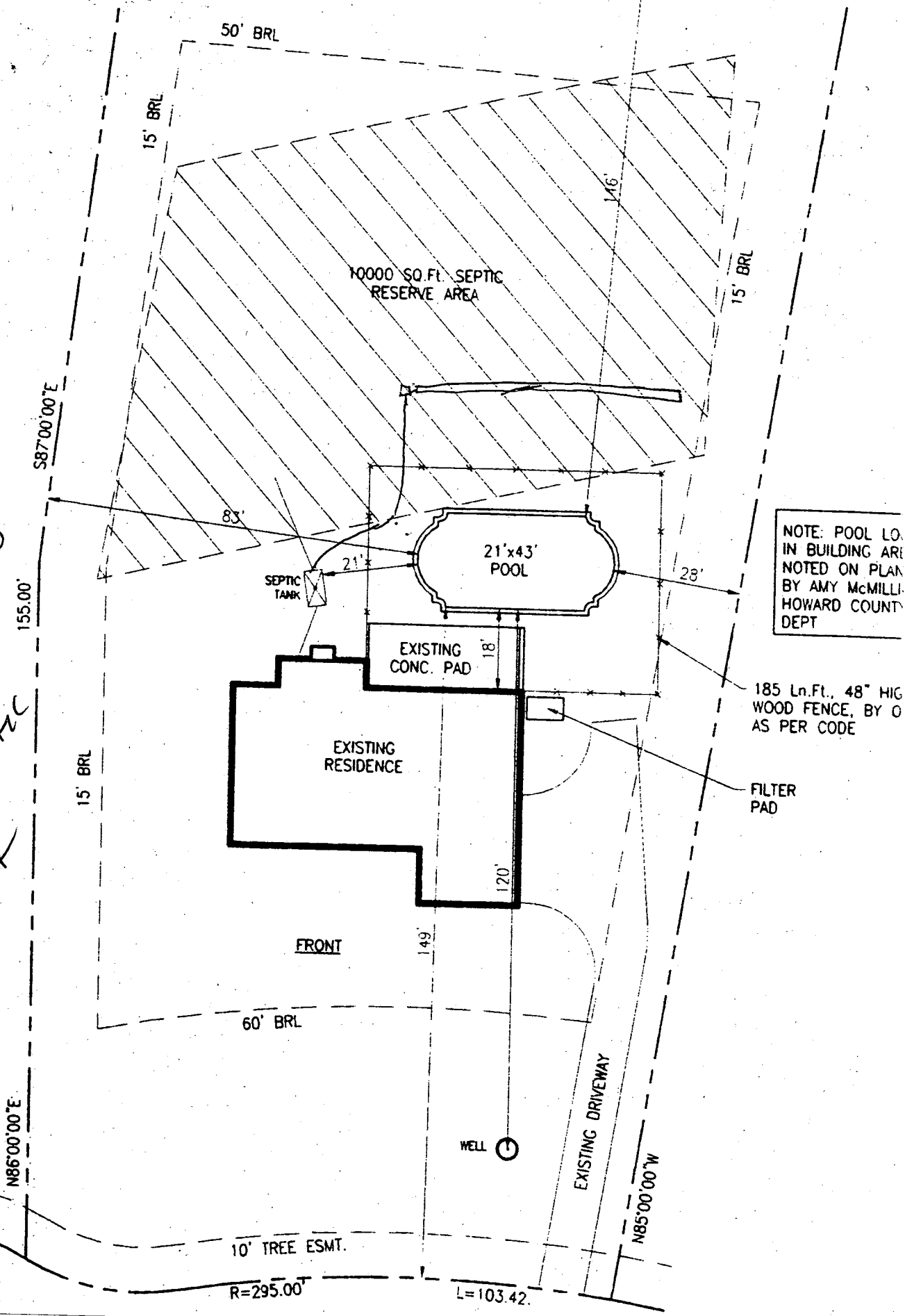
509°52'04"E

740.28'

104.8
 162.69

5/8/00
 Shown pool
 will have no
 impact to ex
 well or septic
 A

1:30



NOTE: POOL LO. IN BUILDING ARE NOTED ON PLAN BY AMY McMILLI. HOWARD COUNT DEPT

BELLE HOLLOW COURT

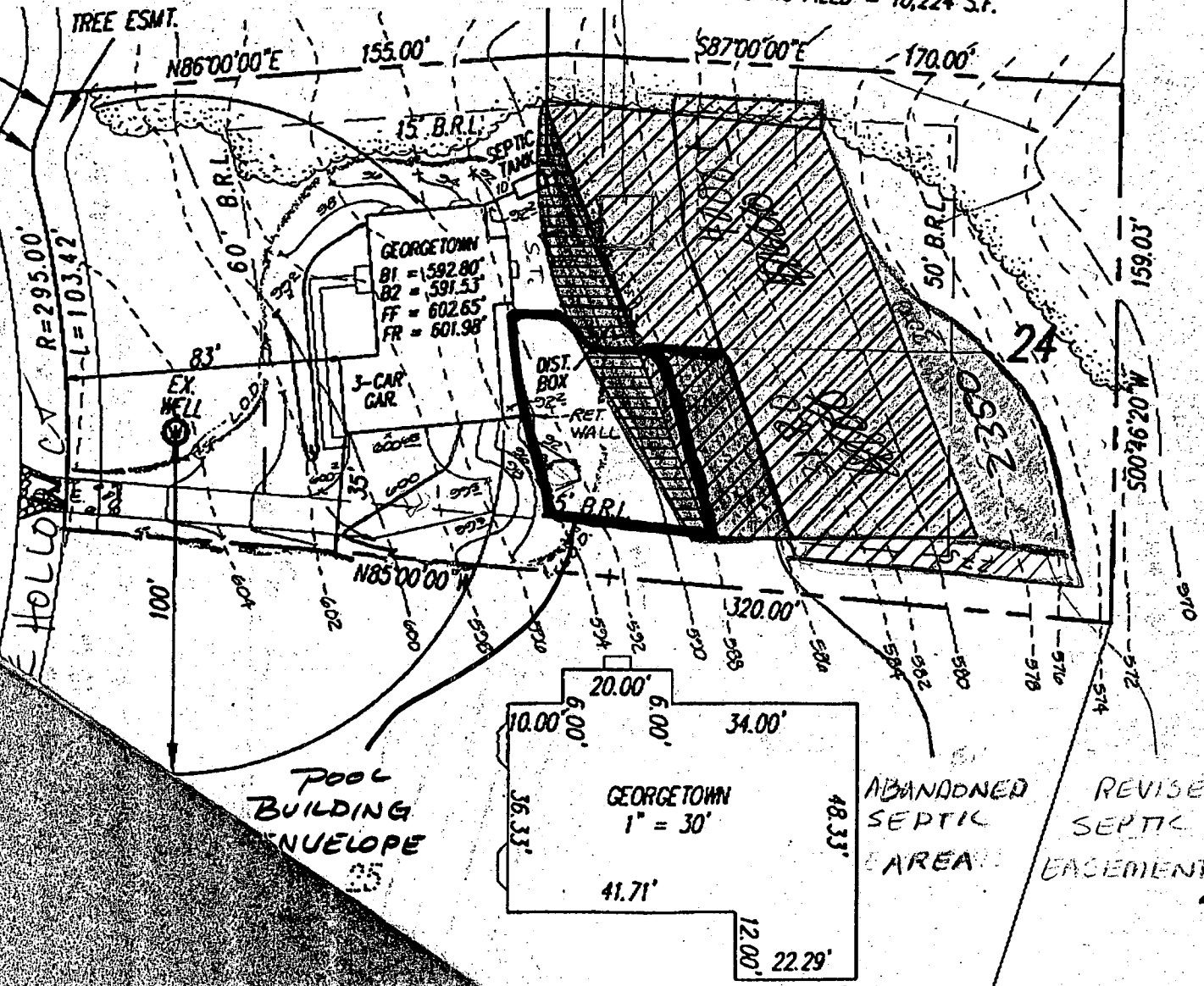
1-9-97

By copy of this plan, the Health Department accepts this modification to the recorded sewage disposal easement.

Amy McMullen

11/15/00
PROPOSED
NECK w/FUTURE
HOT TUB OK,
AREA ADDED
ADJACENT TO
LOT LINES,
OK w REMAINS
MP
~8-9' TO S-T.

SEPTIC AREA TO BE ABANDONED
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LOT 24
GWYNDYL OAK ESTATES
 4th ELEC. DIST. HOWARD CO., MD
 Revised Aug 27, 1996 1"=50'

Building Address 2808 BELL HOLLOW CT
GLENWOOD 21738

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

Census Tract 6040 Subdivision Cromwell Forest

Section _____ Area _____ Lot 74

Tax Map 14 Parcel 123 Grid 11

Zoning RC-D-20 Map Coordinates 9C-2 Lot size _____

Property Owner's Name ZACH SHEARIFF

Address 2808 BELL HOLLOW CT

City GLENWOOD State MD Zip Code 21738

Home Phone 410-489-5160 Work Phone _____

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

Phone _____ Fax _____

Existing Use SFD

Proposed Use SFD WITH DECK

Estimated Construction Cost \$ 9,500

Description of Work FREE STANDING DECK
18'X18' AND 10'X10' AND 9'X5'
AT rear of Home

Contractor Company LO-FORCE DESIGN & BUILD

Contact Person RICHARD R. GOSCHMANN/OWNER

Address 4321 BARTHOLOM RD

City SYKESVILLE State MD Zip Code 21784

License No. 52070

Phone 410-848-4161 Fax 410-552-5868

Occupant or Tenant JM

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 DESCRIPTION - RESIDENTIAL**

Building Characteristics	Utilities
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"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____	Sprinkler system: N/A <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____
State Certified Modular _____	

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: _____ Public _____ Private _____
1st floor: _____	Sewage Disposal: _____ Public _____ Private _____
2nd floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Sprinkler system: N/A <input type="checkbox"/> NFPA #13D _____ NFPA #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: _____	
State Certified Modular _____ Manufactured Home _____	

THIS 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 THEREBY; (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 THIS WORK PERMITTED AND POSTING NOTICES.

Richard R. Goschmann/Owner
 Applicant's Signature
Lo-Force
 Title/Company

Richard R. Goschmann/Owner TR
 Print Name
11/15/00
 Date

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

AGENCY	DATE	SIGNATURE APPROVAL
Land Development DPZ		
State Highways		
Building Official	<u>11/15/00</u>	<u>[Signature]</u>
Dev. Engineering DPZ		
Health	<u>11/15/00</u>	<u>[Signature]</u>
Fire Protection		
Is Sediment Control approval required prior to issuance?		
YES <input type="checkbox"/> NO <input type="checkbox"/>		

DPZ SETBACK INFORMATION

Front: _____
 Rear: _____
 Side: _____
 Side St.: _____

All minimum setbacks met?
 YES NO

Is Entrance Permit required?
 YES NO

Historic District?
 YES NO

Lot Coverage for New Town Zone _____
 SDP/Red-line approval date _____ Accepted by [Signature]

PROPERTY ID#: 1344

Filing fee	\$ _____
Permit fee	\$ <u>0</u>
Excise tax	\$ _____
Sub-total paid	\$ _____
Add'l permit fee	\$ <u>20</u>
TOTAL FEES	\$ <u>20</u>
Balance due	\$ _____
Check	# <u>2106</u>
Validation	# <u>25728</u>

CONTINGENCY CONSTRUCTION START:
 ONE STOP SHOP: