

7/22/92

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 48521

A REPAIR

DISTRICT 3rd

DATE 9/18/92

DATE SYSTEM APPROVED 7/27/92

INSPECTOR M. Riskin

INDEXED

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH

~~461-9933~~ 313-2640

03-291650

Jack Fyock Septic Services IS PERMITTED TO INSTALL ALTER

ADDRESS _____ PHONE 988-9270

SUBDIVISION Woodmark Section 2 LOT 15, Blk B ROAD 12245 Carrol/Mill Road

PROPERTY OWNER Mr. Richard & Carol Apple

ADDRESS 12245 Carrol Mill Road
Ellicott City, Maryland

SEPTIC TANK CAPACITY 1000 GALLONS

NUMBER OF BEDROOMS 3

_____ SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED _____

REPAIR - PURPOSE - DRYWELL FULL

Call for inspection when ground is opened so sanitarian can recommend repair 7/22/92

PLANS APPROVED BY _____ DATE _____

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 WELLS (SEE HEALTH DEPARTMENT OFFICE AUTHORIZED)

**BUILDING PERMIT SIGNED
AND RETURNED**

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES) 3/26/03 B00140869 POOL

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

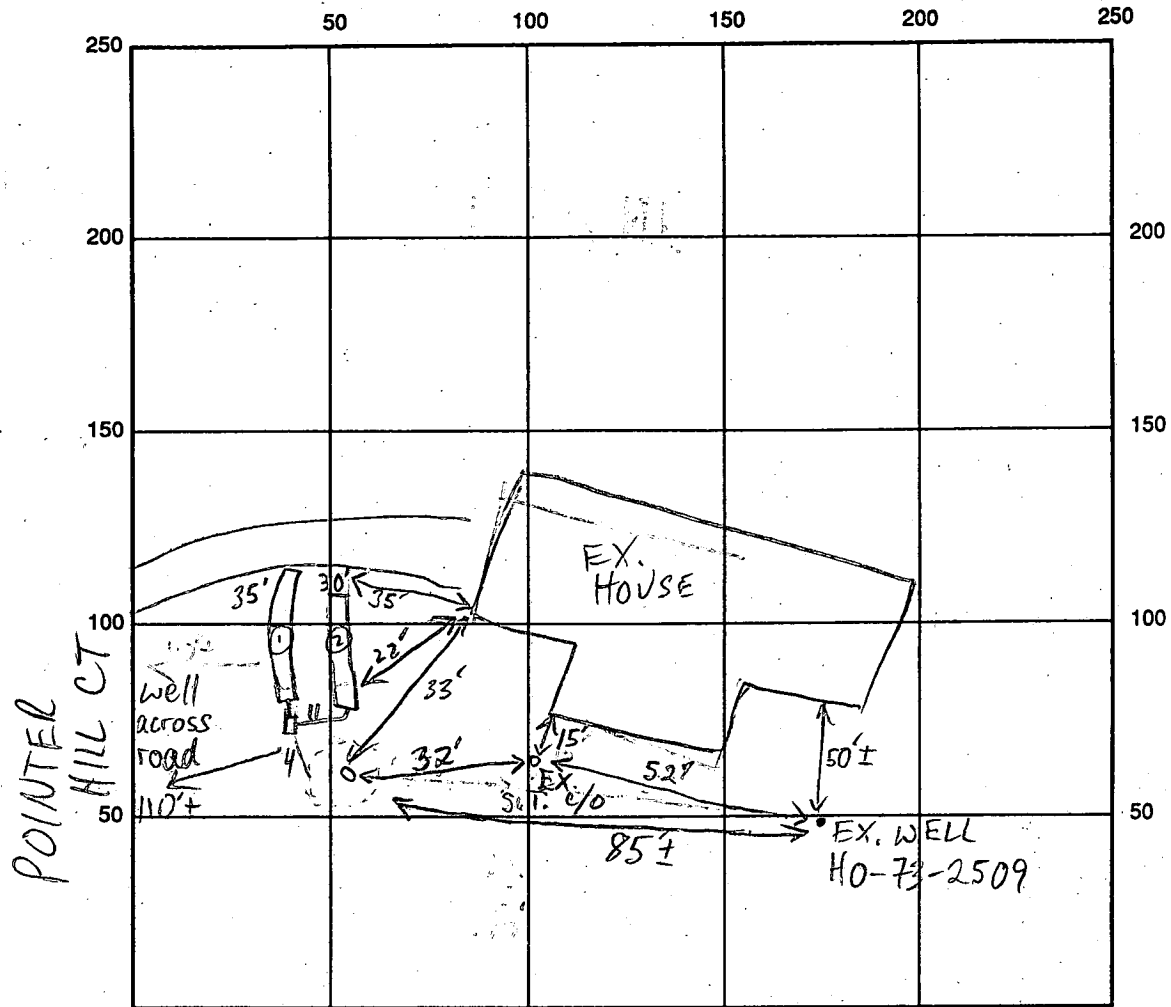
PERMIT VOID AFTER TWO YEARS

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**

P 48521



POINTER HILL CT

CARROLL MILL RD INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL _____ CLEANOUTS EX. OK

DISTRIBUTION BOX LEVEL _____

DRAIN FIELD/TITLE DEPTH 12/12 FT. TRENCH WIDTH 2 FT. INLET DEPTH 4 1/2 FT.

EFFECTIVE GRAVEL DEPTH 7 1/2 FT. TOTAL LENGTH 35 FT. 30 FT.

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 260± SQ. FT. 225 SQ. FT.

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

ABSORBENT AREA 485 SQ. FT.

REMARKS: 7/27/92 OK TO CONTINUE MR

7/27/92 #2 OK TO COVER ALL MR

DATE SYSTEM APPROVED 7/27/92 INSPECTOR M. Riffin

REPLACEMENT WELL SITE INSPECTION

OWNER Richard Apple 531-2912

DATE REQUESTED 7/20/92 4 PM

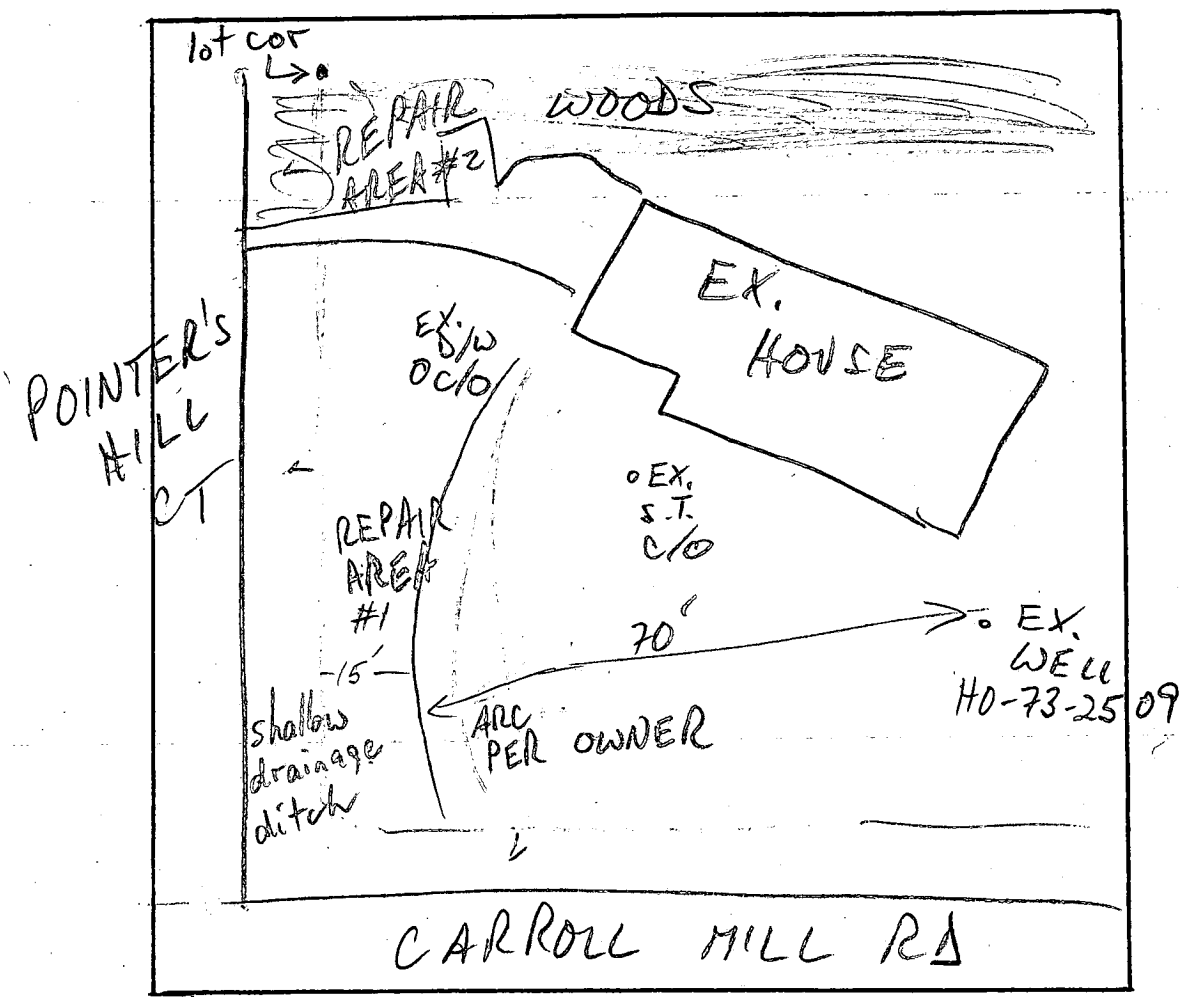
ADDRESS 12245 Carroll Mill Rd
EC 21042

DRILLER _____

WELL TAG# _____

COUNTY# _____

LOCATION DIAGRAM



COMMENTS: 7/20/92 REPAIR AREA EXTREMELY LIMITED; OK TO
DIG A VISUAL HOLE IN REPAIR AREA #1 FOR REPAIR
TEST; EX. S.T. < 70' TO EX. WELL; OWNER REPORTS
NO WELL PROBLEMS. MR

SYSTEM OK - BUT
BACKFILLED WITHOUT
FINAL APPROVAL.

~~XXXXXXXXXX~~
~~XXXXXXXXXX~~
~~XXXXXXXXXX~~
5 Jan 79
GCK

PERMIT

P 28215
A 12971

SEWAGE DISPOSAL SYSTEM
MARYLAND STATE DEPARTMENT OF HEALTH*

~~6/30/78~~
7/20/82

HOWARD COUNTY

ELLICOTT CITY
DISTRICT 3rd

DATE 6/15/78

INDEXED

6/30/78
R. D. Mullins Excavating

IS PERMITTED TO INSTALL X ALTER

ADDRESS 4822 Old Washington Road, Sykesville, Md. 21784 PHONE 795-1343

SUBDIVISION Woodmark ROAD 12245 Carroll Mill Road LOT 15, Block B, Sec. 2

PROPERTY OWNER ~~Hillen Contractors~~ Richard Apple

ADDRESS 12225 Ioka Court, Ellicott City, Maryland Phone: 988-9245

SPECIFICATIONS 4 bedrooms

1058

SEPTIC TANK CAPACITY 1250 GALLONS

DRAIN FIELD _____ DEPTH _____ FEET. BOTTOM AREA _____ SQ. FT.

DEEP TRENCH _____ DEPTH _____ FEET. BOTTOM AREA _____ SQ. FT.

SEEPAGE PITS X ABSORBENT SIDE-WALL AREA 125 SQ. FT. absorbent sidewall area per bedroom below inlet.

INLET PIPE 4 FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH 12 FT. BELOW ORIGINAL GRADE

EFFECTIVE DEPTH AT _____ FT. BELOW ORIGINAL GRADE.

LOCATE DISPOSAL AREA 30 FT. FROM front LOT LINE AND 60-100 FT. FROM left LOT LINE AS SEEN WHEN FACING LOT FROM Pointer Hill Court.

600

PLANS APPROVED BY Donald W. Monaghan DATE 3/12/68

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: IF TRENCH IS USED CALL FOR INSPECTION BEFORE PLACING GRAVEL IN TRENCH.

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER.

NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

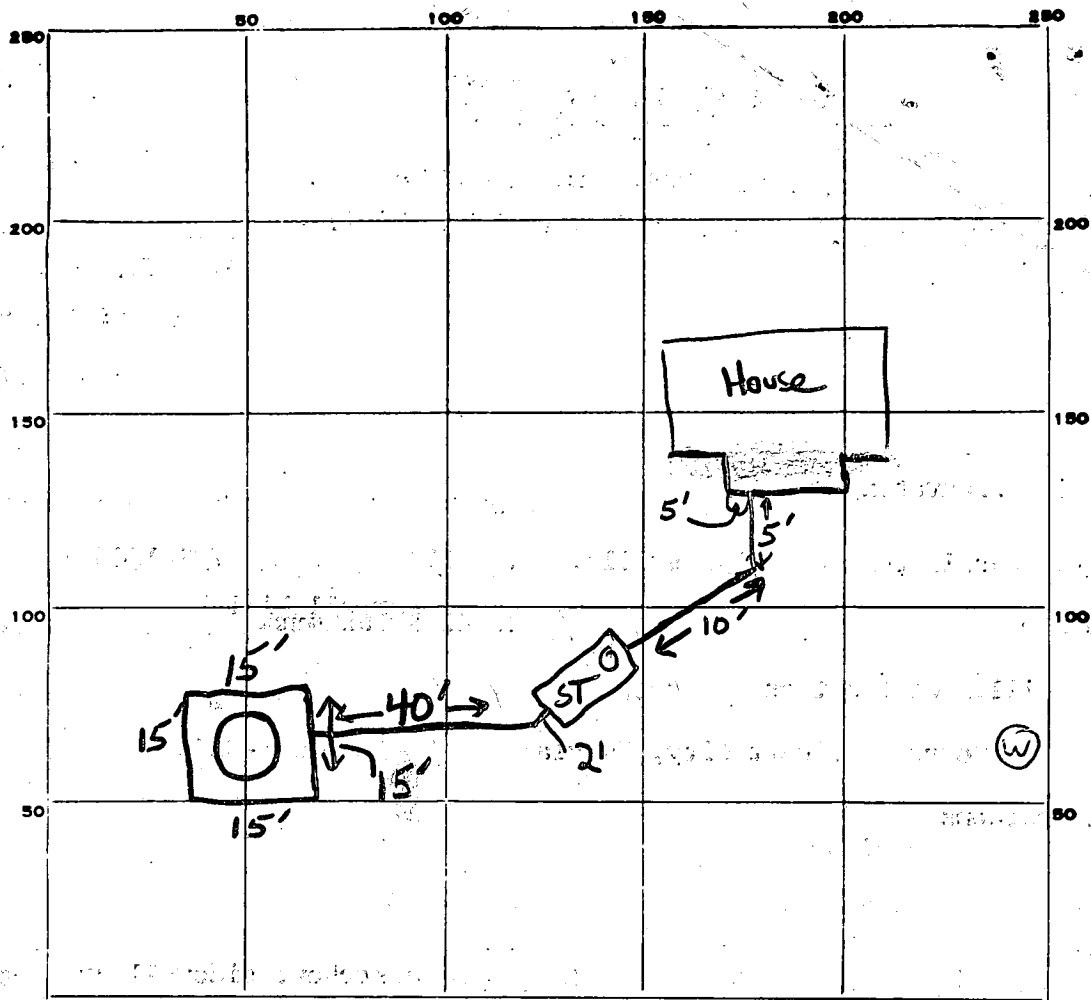
PERMIT VOID AFTER THREE YEARS.

NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA ACCEPTED.

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

A 12971

D. R. 2042-00



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

Carroll Mill Rd

PERMIT CARD _____

SEPTIC TANK, LEVEL

CLEANOUTS

ST	DW
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Terra Cotta

DISTRIBUTION BOX, LEVEL Na

TILE FIELD, DEPTH _____ FT. TRENCH WIDTH _____ FT.

GRAVEL DEPTH _____ IN. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA _____

DW SEPTAGE BITS, INSIDE DIAMETER 60 FT. DEPTH BELOW INLET 8 FT.

ABSORBENT AREA ±480 SQ. FT.

REMARKS 30 June 78 - Unable to measure depth of DW as cleanout plug was freshly poured cement and could not be removed. Call before backfilling (GLK)

5 Jan 79 - DW 12' deep - short by 20" - ~~OK~~ (GLK)

System backfilled without approval but otherwise OK

DATE SYSTEM APPROVED 21 JAN 79

INSPECTOR ~~21 Keller~~ H. Keller

Serial No. 34680

APPLICATION

A 12971
P _____

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

1000

ELLICOTT CITY

Septic Tank - 3 bedroom - 450902
4 " - 1600902

DISTRICT 3

DATE 8/10/67

Dry Well - 100 ft deep in sidewalk and per bedroom to begin below inlet pipe. Inlet pipe 4 ft below orig. grad. Max depth permitted for dry well below orig. grade is 12 ft.

Place Dry Well 30 ft from front lot line and either 60 or 100 ft from left sideline as seen when facing lot from Pointe Hill Ct.

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

60
8 560

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

PROPERTY OWNER Woodmark, Inc., Mark Wakefield, Jr. Willens Contractors

ADDRESS 231 Chatham Rd., Ellicott City, Md. PHONE HO 5-1345

PROPERTY LOCATION: 12225 Joka Court, Ellicott City, Md.
988-9245

SUBDIVISION Woodmark, Inc. LOT NO. 15, Blk. B, Sec. 2

ROAD AND DESCRIPTION 12245 Carroll Mill Rd. & Court

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 202' x 188' x 252' x 152' x 25' TYPE BLDG. 3 or 4
NUMBERS OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____ BLDG. PERMIT SIGNED AND RETURNED 3/1/78

Serial No. 34680

SIGNATURE OF APPLICANT /s/ Mark Wakefield

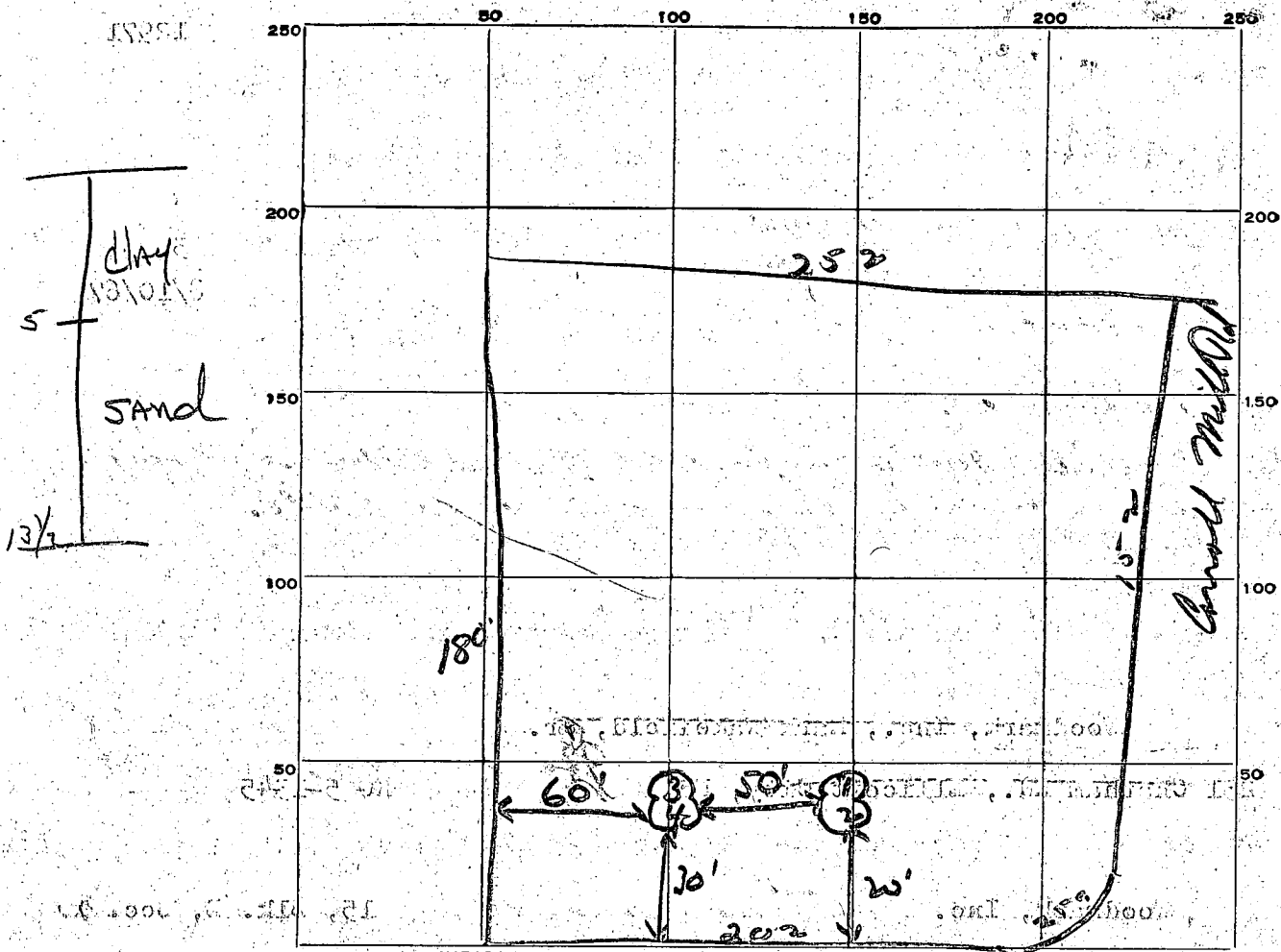
APPROVED BY [Signature] FOR Drywell DATE 8-12-68
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
 Conrad Mill Rd

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8/9/67	1	4 1/2'	3:28	3:30	3:30	3:35	5 min
	2	10'	3:30	3:32	3:32	3:34	2 min
	3	5'	3:35	3:39	3:39	3:47	8 min
	4	11'	3:35	3:37	3:37	3:40	3 min
8-4-76	visual located in old #3/4	13 1/2'	SANDY SOIL		dry		

SOIL AUGER FINDING _____
 TESTED BY JK + DM
 REMARKS 8-4-76. hal henson

Lot 15 B

Point Hill Court

220'

Carroll Mill Rd 177'

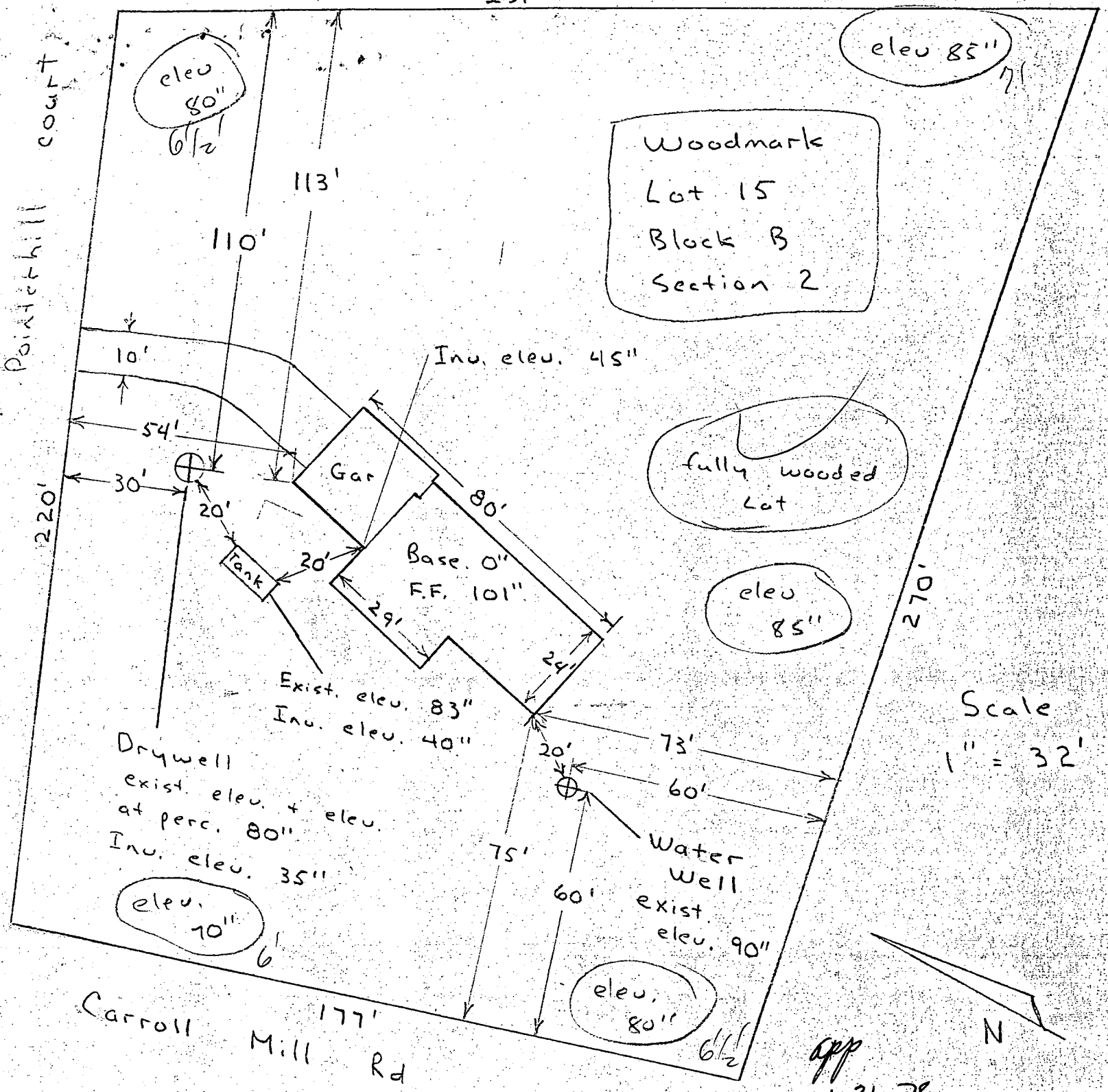
eleu 85"

Woodmark Lot 15 Block B Section 2

fully wooded Lot

eleu 85"

Scale 1" = 32'



app
1-31-78
CCM

I certify these measurements and elevations correct for this property.

Hillen Contractors Inc.
Christian Miller

C 1 **4733** SEQUENCE NO. (WRA USE ONLY)

1 2 3 4 5 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAWES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401
WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETE

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER

DATE RECEIVED (WRA USE ONLY) 2/28/78 DEPTH OF WELL 200

DATE WELL COMPLETED 2/28/78 (TO NEAREST FOOT) 22 26

8-13 15 20

PERMIT NO. FROM "PERMIT TO DRILL WELL" 710-73-2509

28 29 30 31 32 33 34 35 36 37

DRILLERS IDENTIFICATION NO. 209

OWNER HILLEN CONTRACT INC. LAST NAME 12275 Ioka Ct. FIRST NAME Ellicott City, Md. 21043

STREET OR RFD POST OFFICE

WELL LOG

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET		CHECK IF WATER BEARING
	FROM	TO	
Mica Soil	0	13	
Mica Rock	13	200	X

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) YES NO

TYPE OF GROUTING MATERIAL (CIRCLE BOX): CEMENT BENTONITE CLAY

NO. OF BAGS 15 NO. OF POUNDS 1525

GALLONS OF WATER 120

DEPTH OF GROUT SEAL (TO NEAREST FOOT): FROM 0 FT. TO 41 FT.

CASING RECORD

INSERT APPROPRIATE CODE BELOW: S STEEL C CONCRETE P PLASTIC O OTHER

MAIN CASING TYPE S T

NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) 6

TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) 43

OTHER CASING (IF USED)

DIAMETER (INCH) DEPTH (FEET) FROM TO

SCREEN RECORD

SCREEN TYPE OR OPEN HOLE: S STEEL B BRASS OR BRONZE H OPEN HOLE P PLASTIC O OTHER

INSERT APPROPRIATE CODE BELOW

SCREEN

1 2 3 (SEQ. NO.) 6

EACH SCREEN	DEPTH (NEAREST WHOLE FOOT)	
	FROM	TO
1	<u>13</u>	<u>200</u>
2		
3		

SLOTSIZE 1. 2. 3.

DIAMETER OF SCREEN 56 (NEAREST INCH)

GRAVEL PACK

IF WELL DRILLED WAS FLOWING WELL CIRCLE BOX

WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER)

T (E.R.O.S.) W Q

70 72 74 75 76

TELESCOPE CASING LOG INDICATOR OTHER DATA AVAILABLE

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) 6

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 7

METHOD USED TO MEASURE PUMPING RATE TIME

WATER LEVEL: (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING 35 (NEAREST FOOT)

WHEN PUMPING 100 (NEAREST FOOT)

TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX): A AIR P PISTON T TURBINE C CENTRIFUGAL R ROTARY O OTHER J JET S SUBMERSIBLE

PUMP INSTALLED

TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: A, C, J, P, R, S, T, O)

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) YES NO

CAPACITY: GALLONS PER MINUTE (TO NEAREST GALLON) 31 35

PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH (NEAREST FOOT) 43 47

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT): F ABOVE } LAND SURFACE (NEAREST FOOT) - BELOW }

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURE SUCH AS BUILDINGS, SEPTIC TANKS, AND/OR OTHER LAND-MARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL).

(Hand-drawn diagram of lot with well location and measurements)

CIRCLE APPROPRIATE BOXES

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 I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CAPTIONED "PERMIT TO DRILL WELL", AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

DRILLERS NAME Howard Dillon

(PLEASE PRINT) Howard Dillon

SIGNATURE Howard Dillon

edge paving

edge paving

Carroll Hill Pool
60.91W
24' max.

P: 169.30

L: 119.09
520'0"
3.1'

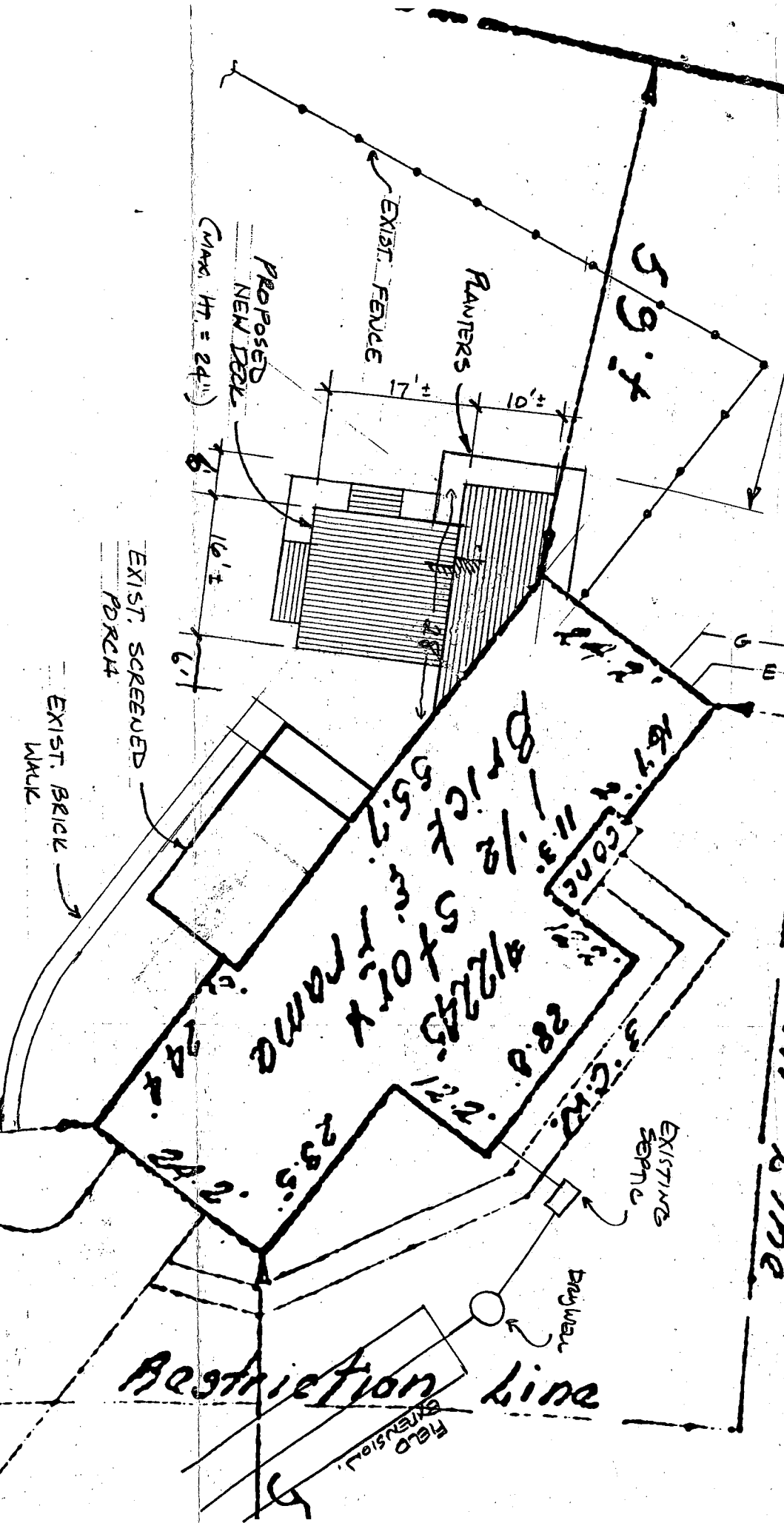
P.
L: C

00030707
6/20/19
shows deck location
OK
du

270.20

25' Building

Restriction line



LOT 15

SITE PLAN

1/16" = 1'-0" ±

47545 ± 39.77

84'

(= 1/16" = 1'-0")

Building

Restriction line

Field Extension

EXISTING SEPTIC

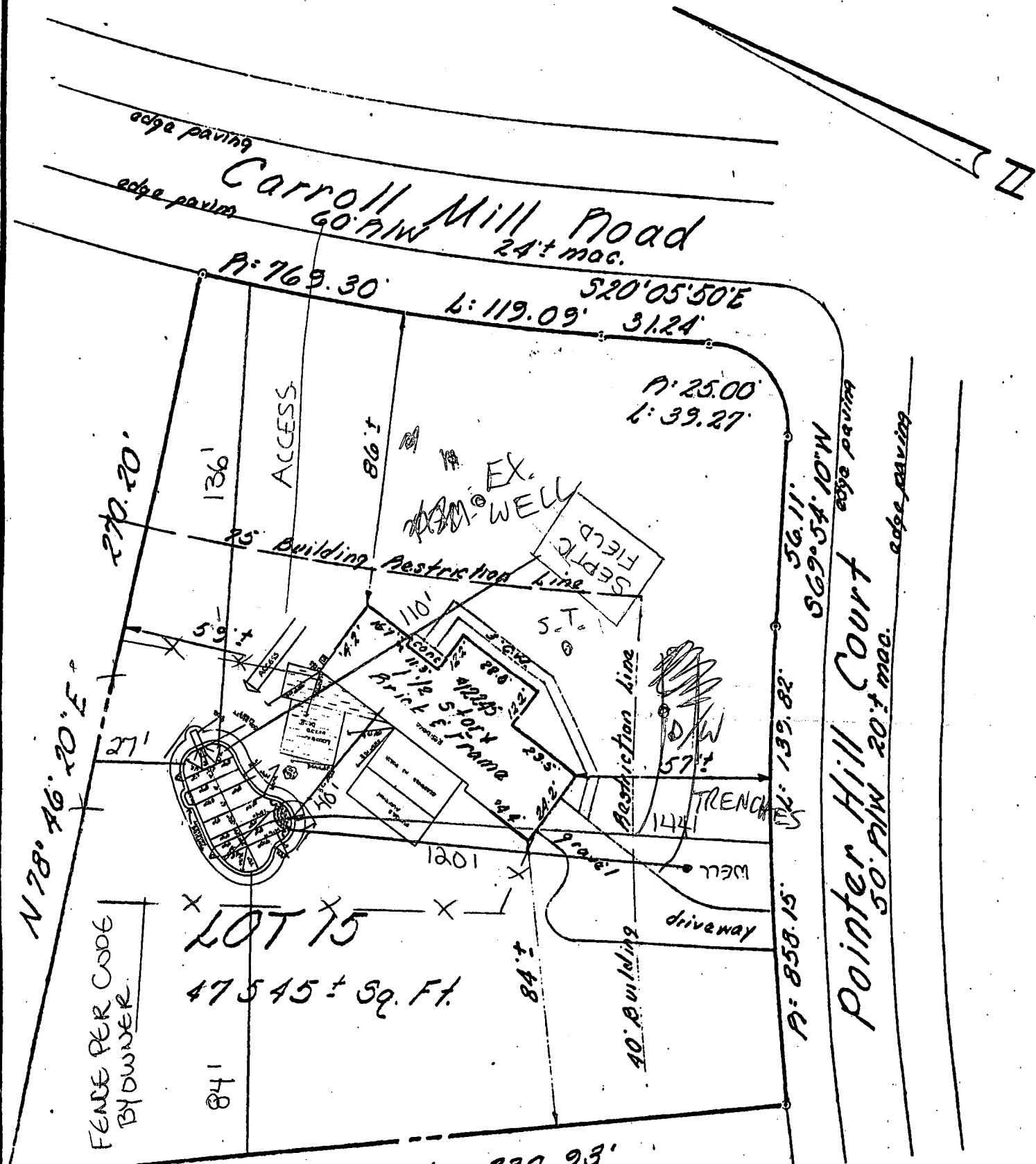
Driveway

EXIST. SCREENED PORCH

EXIST. BRICK WALK

EXISTING WELL

Plat showing property known as #12245 Carroll Mill Road, Howard County, Maryland. Also known as Lot 15, as shown on the plat entitled PART B, SECTION NO. 2, WOODMARK, which plat is recorded among the land records of Howard County in Plat Book 13, Folio 65.



3/26/03 (M2) N 29° 25' 56\" W 230.93'

S.S. REPAIR AREA LIMITED
 BUT POOL DOES NOT MAKE
 SITUATION APPRECIABLY WORSE
 POOL OK

J. S. T. ENGINEERING CO., INC.
 4831 1/2 BELAIR ROAD
 BALTIMORE, MARYLAND 21206

This is to certify that I have located the improvements on the lot shown hereon, and that said improvements exist, and that said improvements lie entirely within the boundaries.



SCALE: 1" = 40' DATE: 4.24.80

NOT INTENDED TO BE USED TO ESTABLISH PROPERTY LINES.

TO SCALE

FOR ORDER # A2299

Building Address 12245 Carroll Mill Rd Property Owner's Name Richard & Carol Apple
Ellicott City, Md 21042
 Suite/Apt. #: _____ SDP/WP/Petition #: _____
 City Ellicott City State Md. Zip Code 21042
 Census Tract 0030 Subdivision Woodbrook
 Home Phone _____ Work Phone _____
 Applicant's Name & Mailing Address, (if other than stated hereon): _____
 Section 20 Area B Lot 15
 Tax Map 22 Parcel 174 Grid 6
 Zoning RMOB Map Coordinates 100.07 Lot size 41,545
 Phone _____ Fax _____

Existing Use _____ Contractor Company Blue Horizon Pools
 Proposed Use spa pool Contact Person Tom Johnson
 Estimated Construction Cost \$ 25,000 Address 1104 Industrial Dr.
 Description of Work Build improved pool
with 12' x 6' spa City Ellicott City State Md. Zip Code 21042
per code by owner License No. 30002
 Phone 410-292-9007 Fax 410-292-9007

Occupant or Tenant Richard & Carol Apple Engineer or Architect Company _____
 Contact Name _____ Contact Person _____
 Address 12245 Carroll Mill Rd Address _____
 City Ellicott City State Md. Zip Code 21042 City _____ State _____ Zip Code _____
 Phone 410-292-9007 Fax _____ Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL **BUILDING DESCRIPTION - RESIDENTIAL**

Building Characteristics	Utilities	Building Characteristics	Utilities
Height: _____	Water Supply: Public _____ Private _____	SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: Public _____ Private _____
No. of stories: _____	Sewage Disposal: Public _____ Private _____	1st floor: _____	Sewage Disposal: Public _____ Private _____
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>	2nd floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>	Basement: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Construction type: Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ State Certified Modular _____	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"/> No. of Bedrooms: _____	Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
	Sprinkler system: N/A <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____	Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Sprinkler system: N/A <input type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____
		Other Structure: _____ Dimensions: _____ Footings: _____ Roof: _____	
		State Certified Modular _____ 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 Elis Horner Pools Print Name Doris A. Minniell
 Title/Company _____ Date 3-26-03

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: _____	51016
State Highways			Rear: _____	Filing fee \$ _____
Building Official	<u>3/26/03</u>	<u>[Signature]</u>	Side: _____	Permit fee \$ <u>200</u>
Dev. Engineering, DPZ			Side St: _____	Excise tax \$ _____
Health	<u>3/26/03</u>	<u>Mark Lyle</u>	All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	Add'l per. fee \$ _____
Fire Protection			Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ <u>250</u>
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>			Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Lot Coverage for New Town Zone _____	Balance due \$ _____
ONE STOP SHOP: <input type="checkbox"/>			SDP/Red-line approval date _____	Check # <u>5404</u>
				Validation # <u>21352</u>
				Accepted by <u>[Signature]</u>