

8/24/93
277

PERMIT ✓

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

04-313828

P 49541
49541
A-17297

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~461-9933~~ 313-2640

DISTRICT 4th

DATE 8/24/93

DATE SYSTEM APPROVED 8/24/93

INSPECTOR M. R. P. Kin

INDEXED

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

ADDRESS 558R Obrecht Road, Sykesville, Maryland 21784 PHONE 795-5674

SUBDIVISION Nursery View Sec. III LOT 3 ROAD 17340 Old Frederick Road

PROPERTY OWNER Charles and Judy Siegmann

ADDRESS _____

SEPTIC TANK CAPACITY 1000 GALLONS TOP SEAMED TANK REQUIRED

NUMBER OF BEDROOMS 3

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 180

BLDG. PERMIT SIGNED
AND RETURNED 4/29/93
Serial # 49206-
SFD - 3 Bedrooms

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 midpoint of the highest trench 130 feet from the right lot line and 90 feet from the rear (North) lot line as seen when facing the property from the common roadway. Run trenches along contour a maximum of 50 feet in either direction.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK MR 8/18/93

PLANS APPROVED BY C. Williams DATE 3/26/93

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**

HD-260(6-90)

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

**BUILDING PERMIT SIGNED
AND RETURNED 6/4/2**
800135808 DETACHED GARAGE
WITH LOFT

A
49541
77566

APPLICATION

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

Septic Tank - 3 bedrooms - 1000 gal
4 " - 1250 gal

DISTRICT 4

DATE 8/3/72

Trenches - 3 bedrooms - one trench 3 ft wide - ~~10~~ 9 ft deep - 85 ft long - with 5 ft of gravel. Trench must follow contour of ground & be 10 ft apart edge to edge.
Begin trench 120 ft from the 545.02 lot line and 45 ft from the 302.09 lot line. If 4 bedrooms use 2 trenches - each 65 ft long with second trench beginning 110 ft from the 545.02 lot line

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

* call for map of trenches before gravel is installed.

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

PROPERTY OWNER Harry W. Dove

if 4 bedrooms use 2 trenches each 65' long connected with street box - rest of specs same.

ADDRESS Rt. #1, Prospect Road, Mt. Airy, Md.

PHONE 829-0214

PROPERTY LOCATION:

SUBDIVISION Nursery View

LOT NO. III Sect. 2

ROAD AND DESCRIPTION off Watersville Road

OCCUPANT

PHONE

PERSON TO CONSTRUCT SYSTEM

ADDRESS

PHONE

SIZE OF LOT 2.4 acres

TYPE BLDG. IND 6160 or (4) bedrooms
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE

SIGNATURE OF APPLICANT /s/ Harry W. Dove

APPROVED BY

FOR

(KIND OF SYSTEM)

REJECTED BY

FOR

(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS

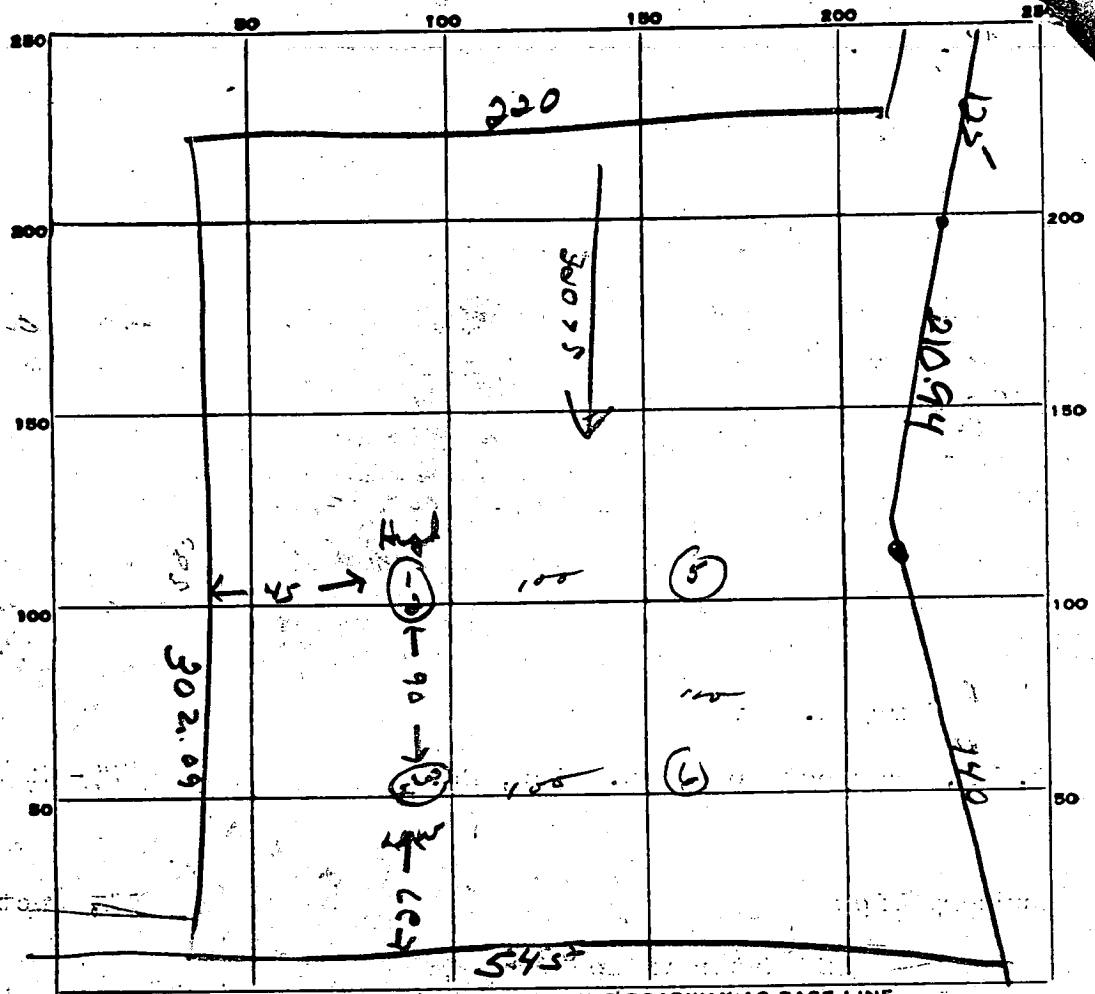
REASONS FOR REJECTION OR HOLDING

3/26/93
PRELIMINARY PLAN ~~2/19/66~~
PROVIDES MINIMUM INFO NEEDED TO CONFIRM SEPTIC DESIGN - NO. D6160 FOR TESTING
2/5/93
Cwilliam

THIS IS FROM A COPY FILE OCCUPIED BY AN INDIVIDUAL AS THAT LOT 3 SECT III OF AN UNDEVELOPED PROPERTY INDICATIONS ARE THAT LOT 3 SECT III IS UNDEVELOPED PROPERTY PERHAPS THE INDICATIONS ARE THAT LOT 3 SECT III IS UNDEVELOPED PROPERTY

BLDG. PERMIT SIGNED AND RETURNED 6/29/780
Serial # 35896

THIS IS NOT A PERMIT



INDICATE NORTH. PRIME ADJOINING ROADWAY AS BASE LINE.
PROPOSED Rd.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
10/24/73	1	11 1/2'	12 ⁰⁶	—	12 ¹¹	5 min		
	2	4 1/2'	12 ⁰⁶	12 ¹⁴	12 ¹⁴	12 ²⁹	15 min	Outlet
	3	4'	12 ¹⁸	12 ³⁰	12 ²⁰	12 ²⁴	4 min	4 ft
	4	11'	12 ²¹	12 ²⁵	12 ²⁵	12 ³²	7 min	Avg time
	5	Same Soil						Some
	6	11'	11'					

Outlet
4 ft
Avg time
Some



P62; NORMAN WELLEN
THIS PROJECT WAS
DISCUSSED WITH
OFFICE MANAGER

HOWARD COUNTY HEALTH DEPARTMENT

MID-FEBRUARY '93

Joyce M. Boyd, M.D., County Health Officer

March 2, 1993

Reply to:

HE BELIEVES THAT
THERE WAS AGREEMENT
THAT RECORDS MATCHED UP
LOT 3 WAS CONSIDERED
RESOLVED w/o
FURTHER TESTING.

MEMORANDUM

TO: Harry W. and Christine Reinhardt
18571 Penn Shop Road
Mt. Airy, Maryland 21771

FROM: Craig Williams, Program Director
Water and Sewerage Program

(CW)

RE: Percolation Test Certification
Nursery View Subdivision
Section III - Lot 3

AGENT: KRISTIE COURIER

PRELIMINARY 795-3282

SEE BELOW

On February 25, 1993 a conference was conducted with Mr. Charles Siegmann, Prospective Buyer, for the above referenced property. The topic was status of percolation test approval for the lot.

The recommendation from this office is that a limited number of confirming percolation test holes be dug prior to application for a building permit on this lot. The reason is that, as was common for tests performed in 1973, limited or no soils profile information was obtained, making it difficult to determine proper septic system design. There is also some possibility that the test records on file may refer to a different property in this subdivision.

The lot has been approved as a buildable lot; but there is not sufficient soil profile and related percolation data to determine proper septic system design. An approved septic system plan is necessary for a property to qualify for building permit approval. For this reason, additional testing is requested. You would be responsible for arranging for the services of a backhoe, but no additional test fee would be assessed for the requested testing. To schedule the testing or to discuss any questions relative to this matter, please call me at 313-2640.

CW: jr

cc: Mr. and Mrs. Charles Siegmann
File

3/26/93 I CALLED N. WELLEN
AND CONFIRMED TO
HIM THIS WAS A
SUGGESTION, NOT

Bureau of Environmental Health
3525-H Ellicott Mills Drive Ellicott City, Maryland 21043-4544
Water and Sewerage, Permits 313-2640 Community Environmental Health 313-2642
Technical Services 313-2644 Director 313-2645 TDD 313-2323

* DEMAND,
CW.

2003 Baet Court
Upper Marlboro, Md
20772

Mr. Craig Williams

Mr. Williams

My wife + I are interested in purchasing lot #3, section 3 of the Nursery View sub development in the western end of the county. I was interested in obtaining a copy of the most recent perc test and any soil testing that may have been done to detect possible ground water contamination. However, your staff was unable to find any data for this section. I would appreciate it if you could see if you might be able to find any of this information. If so, please contact me at the number below. My wife and I thank you and your staff for your help.

Chuck Siegmann

Work (301) 596-2190

Home (301) 390-9583

DISCUSSED BY TELEPHONE!

WE THINK WE HAVE THE RIGHT TEST RESULTS IN A DIFFERENT CASE, DUE TO THE UNCERTAINTY AND THE TYPE OF SOIL CONDITIONS COMMON TO THIS AREA, RETESTING WOULD BE REQUESTED.

2/8/93 CW

~~as a letter~~ please

TO:

~~NOT SENT~~
DRAFTED AS A POTENTIAL
LETTER TO LOT OWNER
(IF SUCH WOULD BE REQUESTED)

FROM: ~~CLW~~

2/5/93

~~William~~
William

RE: PERCOLATION TEST RESULTS
~~NUNSENY VIEW SECT~~
LOT 3, SECTION III
NUNSENY VIEW SUBDIVISION
WATERVILLE RD.

SEE LETTER OF
MARCH 2
DRAFTED ACTION
FOR FURTHER INQUIRY
FROM BUYER
(CLW)

DEAN

THIS IS TO ADVISE THAT
THIS OFFICE WAS RECENTLY CONTACTED
BY A POTENTIAL BUYER OF THE ABOVE REFERENCED PROPERTY,
REQUESTING HEALTH DEPARTMENT CERTIFICATION OF
VALID TEST RESULTS. ~~THE PARTY WAS ADVISED THAT~~ ^{THE PARTY WAS} ADVISED THAT
A RE-TEST WOULD BE REQUIRED.
INITIALLY NO TEST RESULTS FOR THIS PROPERTY
COULD BE LOCATED. FURTHER SEARCHING REVEALED TEST
RESULTS IN ANOTHER PROPERTY FILE WHICH MAY OR
MAY NOT RELATE TO THIS PROPERTY REGARDLESS OF WHICH LOT
~~WHETHER OR NOT~~ THIS DATA ACTUALLY REPRESENTS,
THE INFORMATION ^{CONTAINED IN THE TEST REPORT} IS NOT SUFFICIENTLY ^{DETAILED TO} SPECIFY
A SPECIFIC SEPTIC SYSTEM DESIGN IN ACCORDANCE
WITH CURRENT STANDARDS.

PERCOLATION CHART

LOT#	AVG. PERC. TIME IN MINUTES PER 2 INCHES DROP	MAX. DEPTH. FOR EFFLUENT PIPE TO ENTER SEWAGE DISPOSAL AREA AT ITS HIGHEST ELEVATION WITH REFERENCE TO EXISTING GRADE AT TIME OF PERCOLATION TESTS
1	11	5'
2	6	4'
3	8	4'
4	15	5'
5	9	4'
6	14	5'
7	5	3 1/2'

APPROVED FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEM BY HOWARD CO. HEALTH DEPT.

John W. Blawie, M.D.
 DATE HOWARD CO. HEALTH OFF.

MAP SYMBOLS

DENOTES IRON PIPE FOUND

" TREE

" PERC TEST HOLES

" CONC MON FOUND

"

STANDARD MARK

OWNER: HARRY + CHRISTINE REINHARDT

LOT 3 SEC 3 NURSERY VIEW SUB

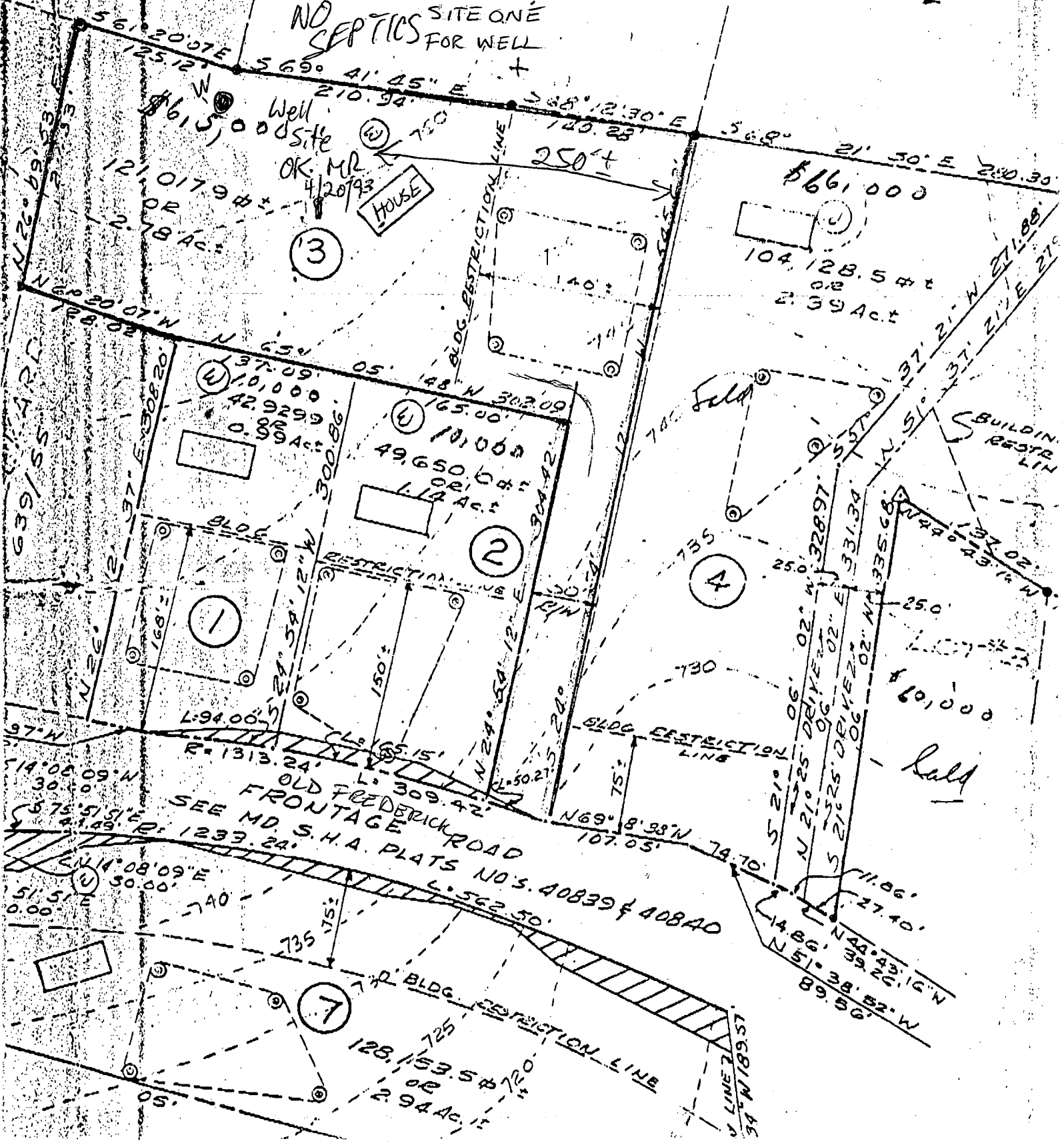
OLD FREDERICK RD, MARY AIRY, MD

CONTRACT PURCHASER: CHARLES SIEGMANN 21771

570' DRIVE + pipe 18" WELLS

SITE TWO FOR WELL

NO SEPTICS FOR WELL SITE ONE



Well site
OK MR 4/20/93

HOUSE

\$661,000

104,128.5 sq ft
2.39 Act

10,000
42,929.9
0.99 Act

10,000
49,650.0 sq ft
1.12 Act

\$60,000

held

SEE MD S.H.A. PLATS NO'S. 40839 & 40840
FRONTAGE

51° 51' 51" E 50.00'

11.86'
27.40'
14.86'
N 44° 43' 16" W
39.26'
N 51° 38' 52" W
89.56'

C1 7835

SEQUENCE NO. (DENV USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE

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

COUNTY NUMBER A 17297

ST/CO. USE ONLY DATE Received

DATE WELL COMPLETED 042873

Depth of Well 22 205 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-92-0943

OWNER Swann David last name first name STREET OR RFD Old Frederick TOWN Mt Airy SUBDIVISION NURSERY VIEW SECTION 3 LOT 3

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 (Use additional sheets if needed), FEET (FROM TO), Check if water bearing. Entries: Brown Shale 0 36, Blue Rock 36 265.

GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE CLAY BC NO. OF BAGS 11 NO. OF POUNDS 1034 GALLONS OF WATER 66 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 36 ft.

CASING RECORD casing types insert appropriate code below ST CO STEEL CONCRETE PL OT PLASTIC OTHER

MAIN CASING TYPE ST Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 70

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 OPEN HOLE BRONZE HOLE PL OT PLASTIC OTHER

DEPTH (nearest ft.) 1 140 2 39 3 205

CIRCLE APPROPRIATE LETTER. 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...

DRILLERS IDENT. NO. 238

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

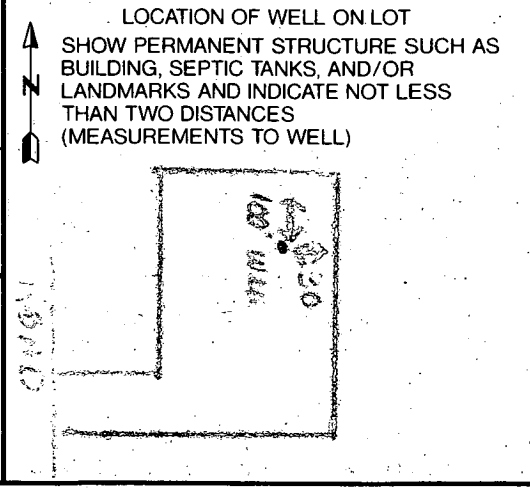
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

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

TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min. to nearest gal.) 15 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 46 WHEN PUMPING 50 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 EXCEPT HOME USE 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



8/26/93
Ameyme

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 Replacement
Receipt # -0-
Date 8/4/93
Name of Installer J. JOSEPH GATLAND, INC. Telephone 875-2400
License Number 1713
Certified Well Pump Installer Well Driller Registered Plumber
Name of Property Owner CHARLES SIEGMANN Telephone 390-9583
Subdivision Nursery View Lot # 3 Well Tag # 91-03-43
Site Address 17340 Old Frederick Rd. 140-92-0343

Pump
1. Type
a. Deep well jet
b. Shallow well jet
c. Submersible
2. Make Goulds
3. Model # 10EJ05422
4. Capacity 10 GPM
5. Pump exceeds well capacity Yes No
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 Cable guards Other

Motor
1. Horsepower 1/2
2. RPM
3. Voltage
a. 110
b. 220

Pitless Adapter
1. Make NAUARD
2. Model # PT800
3. Depth 42"

Tank
1. Capacity 42 gal
2. Pressure relief valve? 7.5 PSI

Piping
1. Type PLASTIC
2. Size 1"
3. NSF and/or BOCA Code approved Yes
4. Depth of supply line 42

Well data
1. Depth 205 ft.
2. Yield 15 GPM
3. Static water level 46 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: [Signature]
Date: 8/4/93

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

8/26/93 WELL PITLESS ADAPTER OK RH
HD-215

Building Address 17340 Old Frederick Rd
MD 21771

Suite/Apt. #: N/A SDP/WP/Petition #: N/A

Census Tract 14-11 Subdivision N/A

Section N/A Area N/A Lot 3

Tax Map 2 Parcel 15 Grid 19

Zoning PC-Dev Map Coordinates 237 Lot size 2.7 ac

Property Owner's Name David/Stephanie Stull

Address 17340 Old Frederick Rd

City MD State MD Zip Code 21771

Home Phone 301-531-5223 Work Phone 301-829-6500

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

Phone _____ Fax _____

Existing Use SFD

Proposed Use Above ground pool

Estimated Construction Cost \$ 6500

Description of Work Install above ground pool 21x15 - filled by truck 50" deep / fence per side

Contractor Company Browning Park

Contact Person Lee Schertel

Address 23731 Ridge Rd

City Greenland State MD Zip Code 20874

License No. _____

Phone 301-972-3800 Fax _____

Occupant or Tenant David/Stephanie Stull

Contact Name Stephanie Stull

Address 17340 Old Frederick Rd

City MD State MD Zip Code 21771

Phone 301-831-5723 Fax 301-831-5841

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: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private
No. of stories: _____	Sewage Disposal: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
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	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: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> <input checked="" type="checkbox"/> Depth <input type="checkbox"/> Width	Water Supply: _____ <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
1st floor: _____	Sewage Disposal: _____ <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
2nd floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <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"/>
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Sprinkler system: <u>N/A</u> <input checked="" type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> 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: _____	
<input type="checkbox"/> State Certified Modular <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 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 THE PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Stephanie Stull
 Applicant's Signature

 Title/Company

Stephanie Stull
 Print Name

5/9/00
 Date

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

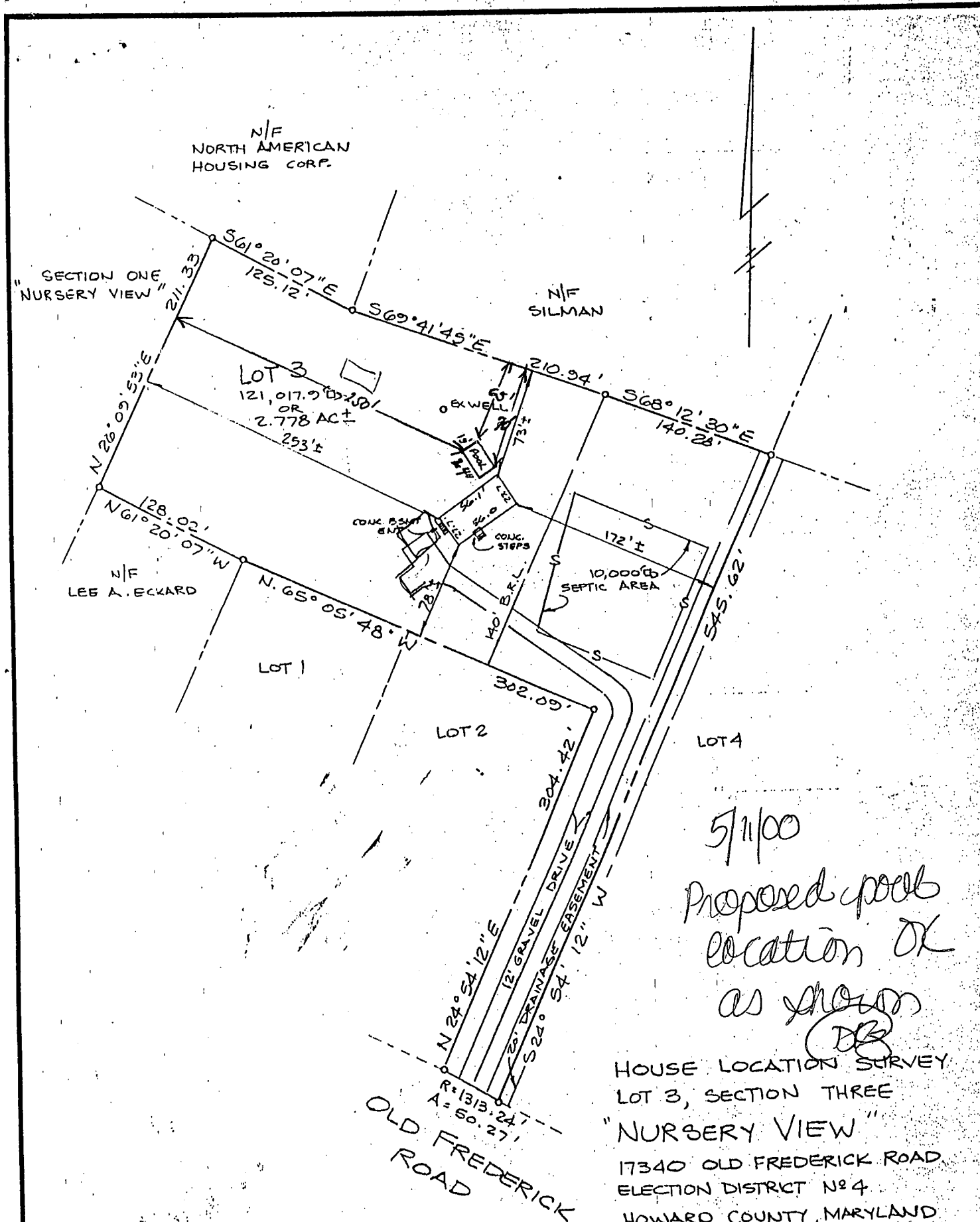
AGENCY	DATE	SIGNATURE APPROVAL
Land Development DPZ		
State Highways		
Building Official		
Dev. Engineering DPZ		
Health	<u>5/11/00</u>	<u>[Signature]</u>
Fire Protection		

Is Sediment Control approval required prior to issuance?
 YES NO

CONTINGENCY CONSTRUCTION START:

ONE STOP SHOP:

DPZ SETBACK INFORMATION	PROPERTY ID#
Front: _____	<u>16163</u>
Rear: _____	Filing fee \$ _____
Side: _____	Permit fee \$ <u>50</u>
Side St: _____	Excise tax \$ _____
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Add'l permit fee \$ _____
Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ <u>50</u>
Lot Coverage for New Town Zone _____	Balance due \$ _____
SDP/Red-line approval date _____	Check # <u>52839</u>
Accepted by _____	Validation # _____



5/11/00
 Proposed pool
 location OK
 as shown
 (DB)

HOUSE LOCATION SURVEY
 LOT 3, SECTION THREE
 "NURSERY VIEW"
 17340 OLD FREDERICK ROAD
 ELECTION DISTRICT N^o 4
 HOWARD COUNTY, MARYLAND
 SCALE: 1" = 100' OCTOBER, 1973



NOTE: THIS PROPERTY IS NOT LOCATED WITHIN A FLOOD HAZARD AREA ACCORDING TO NATIONAL FLOOD INSURANCE PROGRAM, FLOOD INSURANCE RATE MAP, COMMUNITY PANEL NUMBER 240044 0002B

I CERTIFY THIS PLAT TO BE CORRECT; IT IS THE RESULT OF AN ACTUAL FIELD SURVEY, BASED ON DATA FOUND AMONG THE LAND RECORDS OF HOWARD COUNTY, MARYLAND, AS REFERENCED HEREON.

LIBERTY SURVEY, INC.
 4140 RIDGE ROAD
 TAYLORSVILLE, MARYLAND

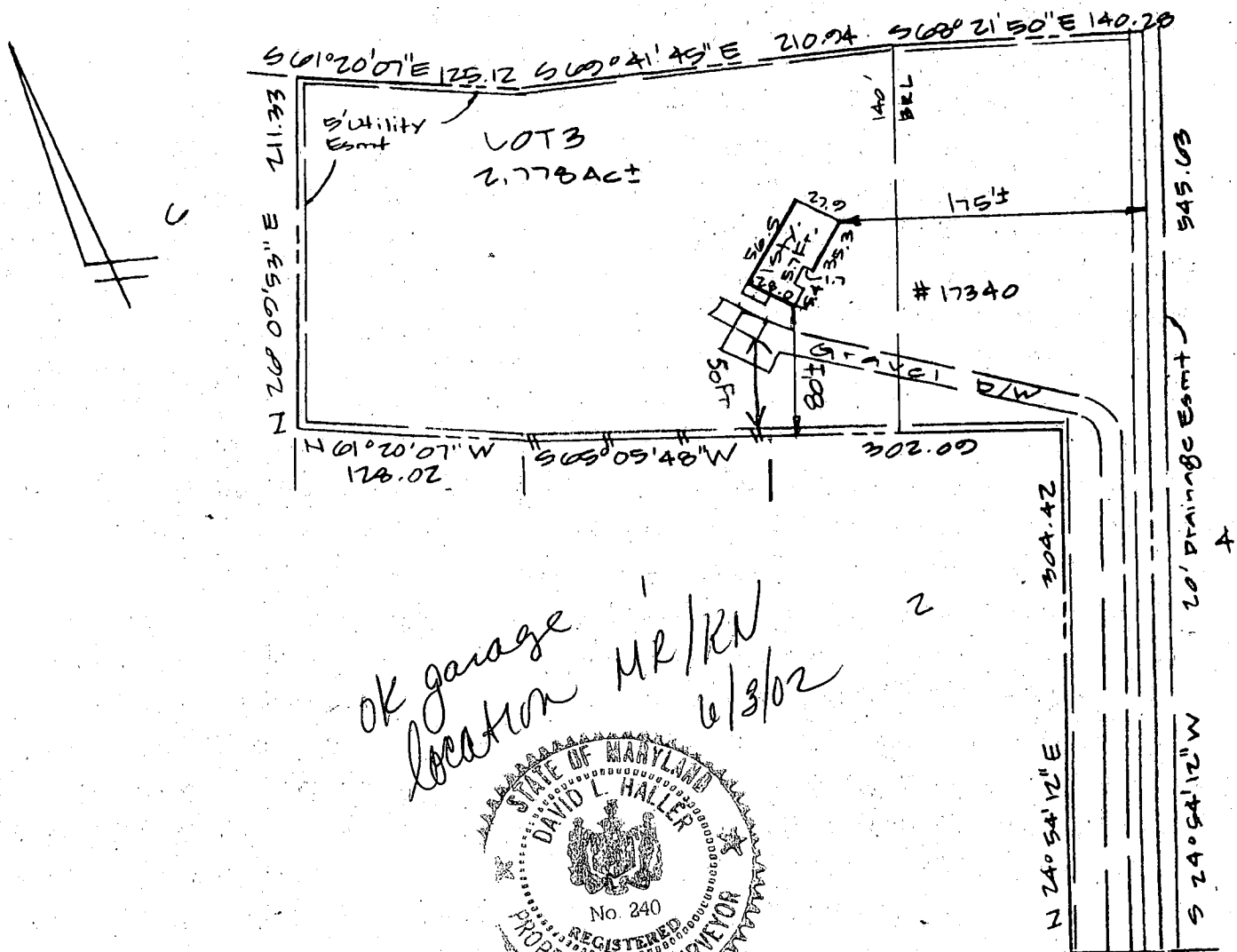
REFERENCE	JOB NO.
PB 27 P6.33	93SY 2509

410-875-0722 21157

301 829 229C

CASE No.

NOTE: This location for title purposes only — not to be used for determining property lines. Property corner Markers Not guaranteed by this location



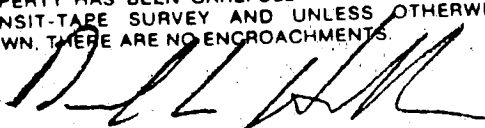
LOCATION OF HOUSE
 LOT 3 , SECTION THREE
 NURSERY VIEW
 HOWARD COUNTY, MARYLAND

17340 Old Frederick Road

HUD FLOOD PANEL NO. 240044-0002B

ZONE: C

BP 00135808

CERTIFICATE I HEREBY CERTIFY THAT THE POSITION OF ALL THE EXISTING IMPROVEMENTS ON THE ABOVE DESCRIBED PROPERTY HAS BEEN CAREFULLY ESTABLISHED BY A TRANSIT-TAPE SURVEY AND UNLESS OTHERWISE SHOWN, THERE ARE NO ENCROACHMENTS.  DAVID L HALLER MARYLAND R.P.L.S No 240	REFERENCES PLAT BK. 27 PLAT NO. 39	HALLER ASSOCIATES SURVEYING • ENGINEERING • PLANNING (301) 863-1843 822 TRAIL AVENUE, FREDERICK, MARYLAND 21701
	LIBER FOLIO	

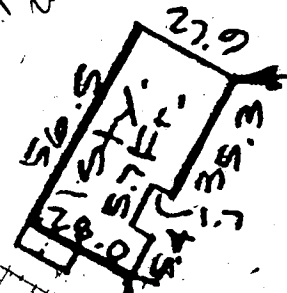
S 61° 20' 07" E 125.12 S 69° 41' 45" E 210.94 S 68° 21' 50" E 140.28

N 26° 09' 53" E 211.33

Utility Esmt

LOT 3
2.778 AC±

Approx. well location per record 6/3/02 RW



BRL

175±

17340

50 FT

80±

N 61° 20' 07" W 128.02
N 10° 02' 10" W

S 65° 05' 48" W

602.09

304.42

20' DRAINAGE Esmt
545.63

2