

4/24/90
J.A.M.
J.P.M.

03-313 ASD

File 4/24/90 (2) P.C.O.

PERMIT

P 45783

SEWAGE DISPOSAL SYSTEM

A 37996

MARYLAND STATE DEPARTMENT OF HEALTH DISTRICT 3rd

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

DATE 04/17/90

DATE SYSTEM APPROVED 4/24/90

INDEXED

INSPECTOR C. B. ...

Dave Hopkins IS PERMITTED TO INSTALL X ALTER _____

ADDRESS 17550 Old Frederick Road, Mt. Airy, Maryland 21771 PHONE 831-7257

SUBDIVISION Mathis Property ROAD 12449 Barnard Way LOT 18

PROPERTY OWNER Barnard Bros. Const. Co. Inc.

ADDRESS _____

~~IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 50%~~

~~GARBAGE GRINDER XXXXX YES XXXXXXXXXXXXXXXX NO XXXXXXX~~

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 180 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 4 feet below original ground. Bottom maximum depth 9 feet below original grade. Effective area begins at 4 feet below original grade. 5 feet of stone below distribution pipe.

LOCATION - Start the first trench 280' from the front lot line and 40' from the left lot line. Run trenches along contour toward left-rear part of property.

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

PLANS APPROVED BY Craig Williams cm DATE 05/13/88

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

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 TRENCHES ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCHES

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO ABSORPTION TRENCH TO EXCEED 100 FEET

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 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 PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

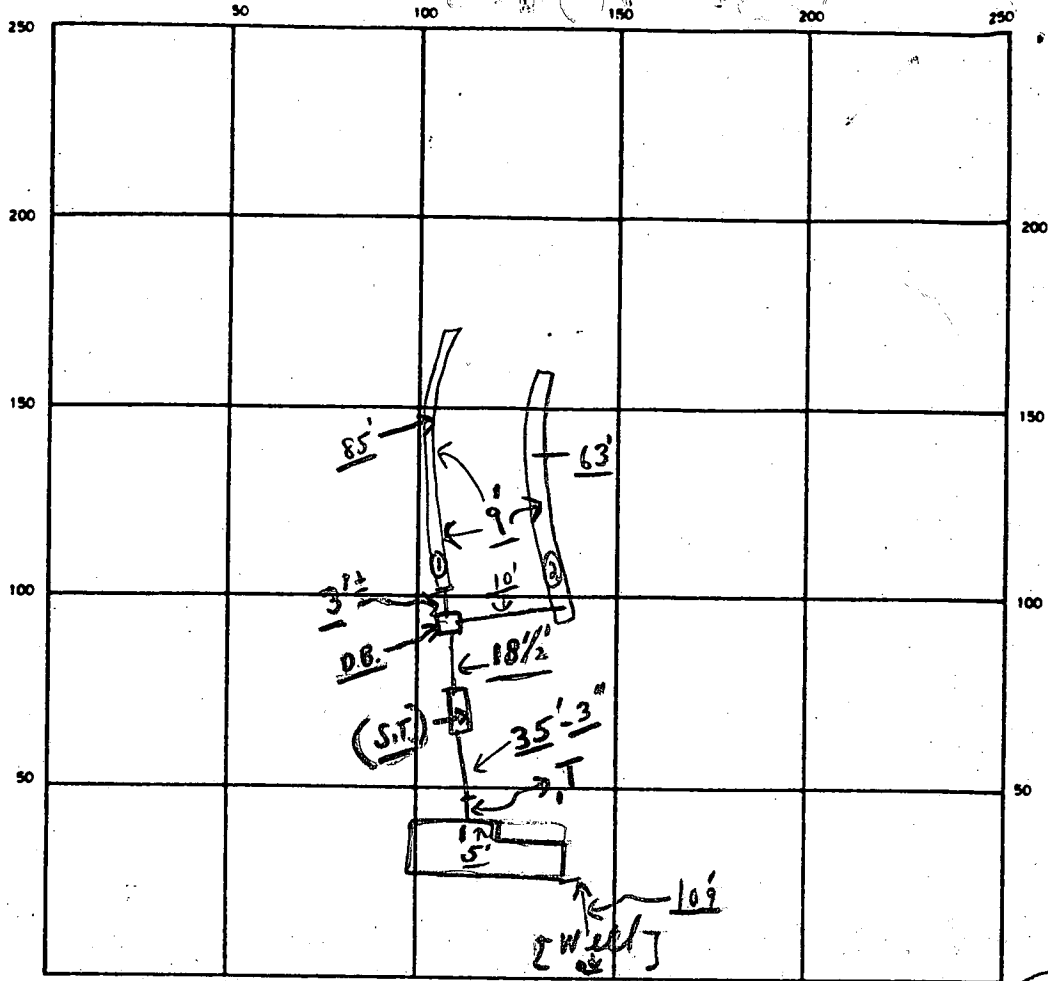
BUILDING PERMIT SIGNED AND RETURNED

3/31/04 B00146929 DETACHED GARAGE

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

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

A 37996



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

BARNARD WAY

S.T.

SEPTIC TANK LEVEL OK CLEANOUTS OK

DISTRIBUTION BOX LEVEL OK (Baffle is in)

DRAIN FIELD/TILE FIELD DEPTH 9' FT. TRENCH WIDTH 2' FT. INLET DEPTH 4' FT.

EFFECTIVE GRAVEL DEPTH 5' FT. TOTAL LENGTH 85' 3 1/4 FT

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 740 ⁺ SO. FT. *some covering*

DRYWELL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA 740 ⁺ SO. FT.

REMARKS A.M. 4/24/90 Partial - OK TO COVER FROM HOUSE TO DIST. BOX, OK FOR STONE
IN TRENCH #1 - OK TO COVER #1 TRENCH AND FINISH #2 TRENCH.
4/24 P.M. - Final - ok to cover all work.

DATE SYSTEM APPROVED 4/24/90 INSPECTOR Charles Bryan Stecker

APPLICATION

PERCOLATION TESTING

A 37996

P _____

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

DISTRICT 3rd

DATE Oct. 20, 1986

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 Willard and Quinone Methis Barnard Bros. Const. Co. Inc
12392-A Frederick Road
ADDRESS West Friendship, Md. 21794 PHONE 489-3421
489-4024

PROSPECTIVE BUYER Garry M. Barnard et. al
ADDRESS 1035 St. Michael Rd. Mt. Airy, Md. 21771 PHONE 489-7621

PROPERTY LOCATION:

SUBDIVISION Methis Property Sec. II LOT NO. 18
ROAD AND DESCRIPTION At the end of Barnard Way
12449

TAX MAP # 15 PARCEL # 15

SIZE OF LOT 3.05 Ac TYPE BLDG. SFD
(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.

Garry M. Barnard
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 11/19/86 Perc Satisfactory; Hold For Subdivision Plat. SFD

BLDG. PERMIT SIGNED
AND RETURNED 7/24/89
Serial # 27739
SFD-3 Bedroom

THIS IS NOT A PERMIT

A37996

↑ TO Rt 144

SOIL PROFILE

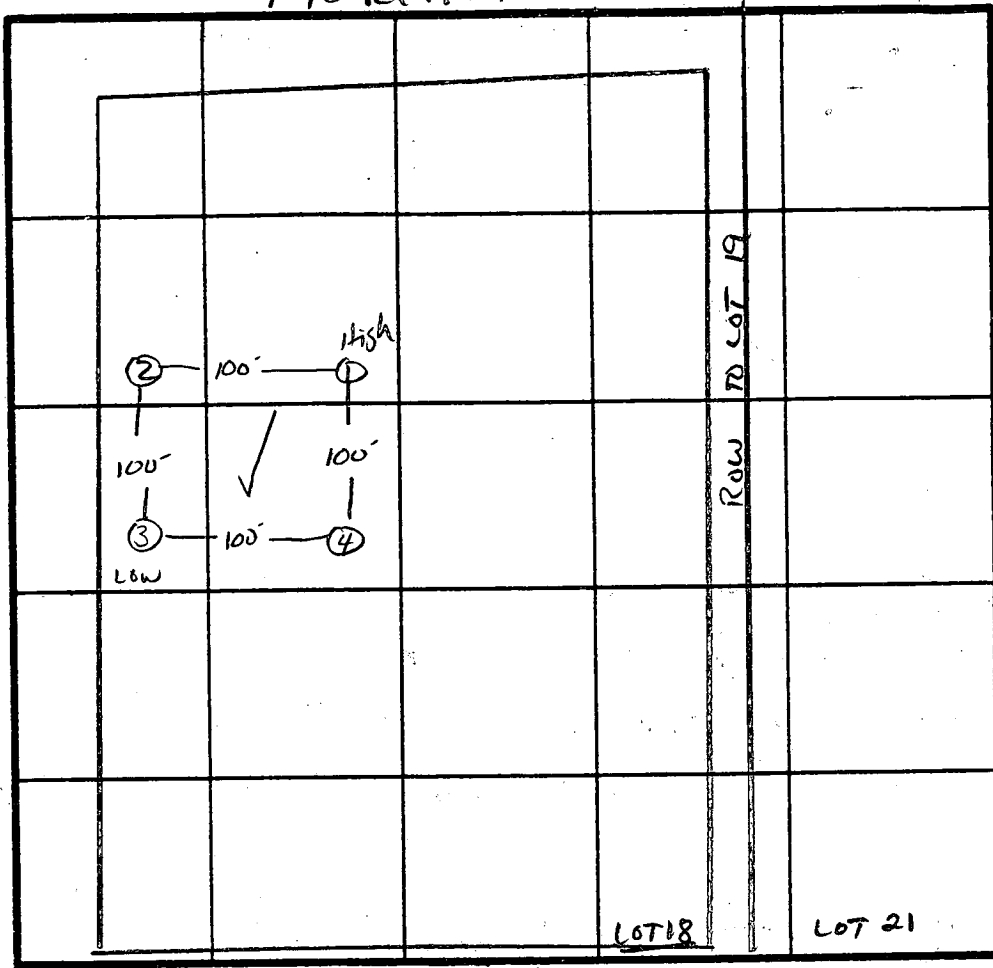
① ② ③ ④

10" AP

Yellow BR
Silt LOAM
9-12% CLAY
10% FRAGS

4" Yellow BR
Silt SAND
LOAM
15-20%
FRAGMENTS
Highly
micaceous

13"



2 Perc
9 min
180 #/BR
INLET 4.5
BOTTOM 9"

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

BARNARD WAY ↓ TO Rt 70

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11/19/86	1 S	4"	10:20	10:23	10:23	10:28	5 MIN
	1 M	8"	10:21	10:22	10:22	10:23	1 MIN
	1 V	13"	DIR: FORM SOIL below 4"				
	2 V	13"	SAMP AS HOLE #1				
	3 S	4.0	10:26	10:29	10:29	10:33	4 MIN
	3 V	12.5"	SAME AS HOLE #1				
	4 S	4.5	10:24	10:37	10:37	11:03	26 MIN
	4 V	13"	SAME AS OTHERS w/ MORE GRAVEL - QUANT. 17"				

REMARKS Holes per PLAT / slight DIFF.

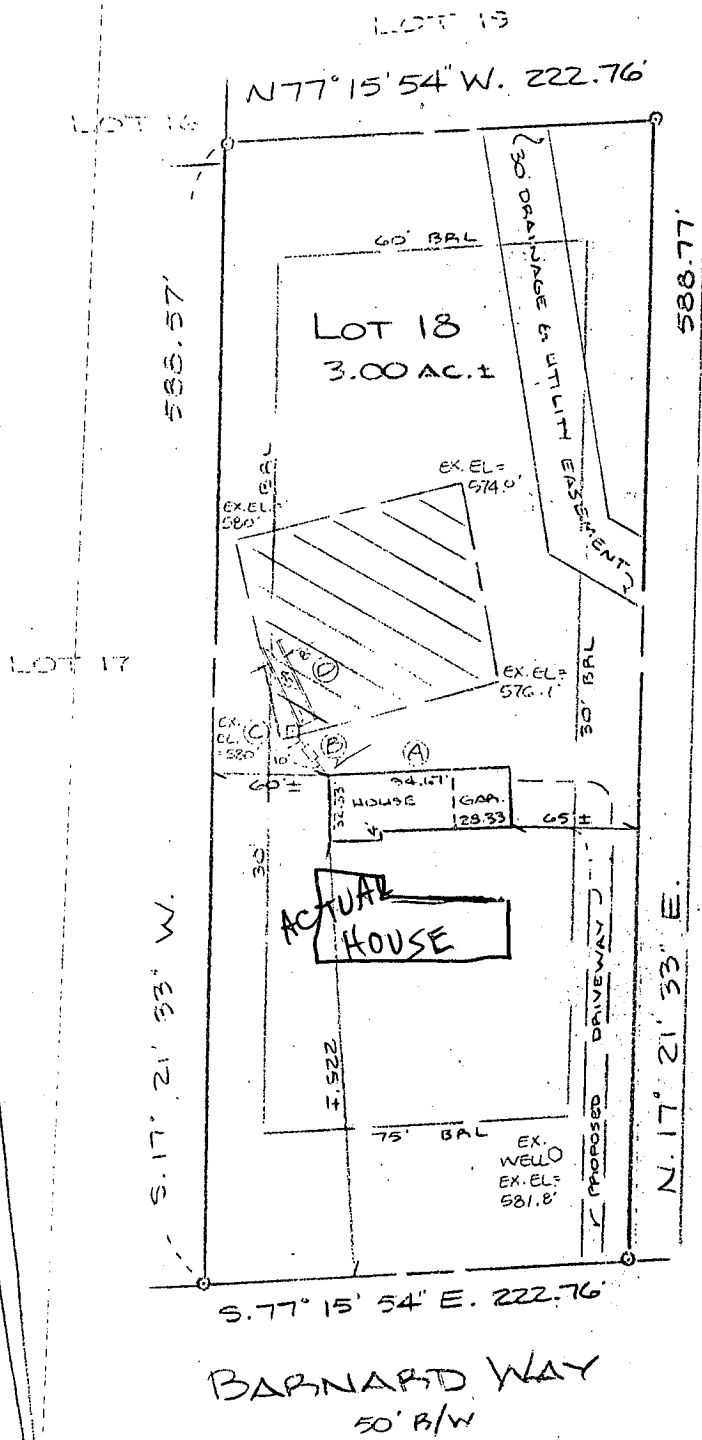
TYPE OF SOIL CHESTER LOAM to Gravelly loam

TESTED BY S. Abel ALSO PRESENT DAN P. HOPKINS BARNARD BROTHERS

-EH-12-1079

PLAT OF RECORD NOTES:

THERE IS A 10' WIDE REVERTABLE
SLOPE/EASEMENT ALONG ALL
ROAD FRONTAGE LOT LINES.



A) Prop. House
F.F. Elev. = 582.5'
Bsmt. Elev. = 574.0'
Inv. Out = 576.94'

B) Prop. Septic Tank
Ex. Elev. = 580.0'
Inv. In = 576.82'
Inv. Out = 576.52'

C) Prop. Dist. Box
Ex. Elev. = 580.0'
Inv. Elev. = 576.2'

D) Prop. Trenches
Inv. Elev. = 576.0'
Bottom max. = 9'
5' of stone
2 @ 45'

96
8
40

7/24/89
Plans O.K.
Rgt

PLOT PLAN
LOT 18, SECTION II
MATHIS PROPERTY
12449 BARNARD WAY
THIRD ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
Scale: 1" = 100' Date: June, 1989



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.



VANMAR ASSOCIATES INC.
Engineers • Surveyors • Planners
310 South Main Street, Mount Airy, Maryland 21771
(301) 829-2890 (301) 831-5015

REFERENCE

PLAT # 7868

JOB NO.

251-379

32

LAND TO BE DEDICATED TO PUBLIC USE FOR THE PURPOSE OF A PUBLIC ROAD
49,000 ± or 1.125 Ac. ±

R. W. TENNANT
655 7281

CgB2

M1D2

CgC2

LOT 13
3.00 Ac. ±

LOT 14
30 Ac. ±

ChC2

LOT 17
30 Ac. ±

BARNARD WAY

LOT 18
30 Ac. ±

ChB2

ChB2

LOT 21
30.5 Ac. ±

PROPOSED

BARNARD WAY

RECREATION TRAILS
WEST FRIENDSHIP SCHOOL ELEMENTARY

DONE CONFORMING TO
STANDARDS FOR SEDIMENT

2,133,095 ± or 48.969 Ac. ±

IC

49,000 ± or 1.125 Ac. ±

DIVISION: 2,182,095 ± or 50.094 Ac. ±

N/E
THE BOARD OF
HOWARD COUNTY
ENGINEERS

B 1 7065 SEQUENCE NO. (DP USE ONLY)
2 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
PERMIT TO DRILL WELL
please print or type

STATE PERMIT NUMBER
110-81-2723
fill in this form completely

Date Received (APA)
OWNER INFORMATION
39 HOWARD CORST CO
1035 ST MICHEALS RD
M + A R Y MOZIZZI

DRILLER INFORMATION
Ralph Wayne
Ralph Wayne Well Drilling
5700 Brown Church Rd. Mt Airy
Ralph Wayne 4/10/88

WELL INFORMATION
APPROX. PUMPING RATE (GAL. PER MIN.) 5
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)
D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

APPROXIMATE DEPTH OF WELL 150 FEET

APPROXIMATE DIAMETER OF WELL 6" NEAREST INCH

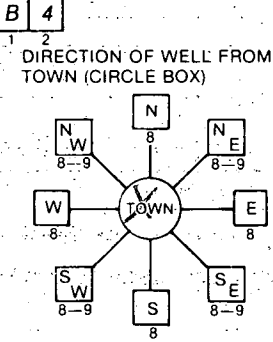
METHOD OF DRILLING (circle one)
BORED (or Augered) JETTED Jetted & DRIVEN
AIR-ROTary AIR-PERcussion ROTARY (Hydraulic Rotary)
CABLE REVERSE-ROTary DRIVE-POINT
other

REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)
N THIS WELL WILL NOT REPLACE AN EXISTING WELL
Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
D THIS WELL WILL DEEPEIN AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE)

Not to be filled in by driller (OEP USE ONLY)
APPROP. PERMIT NUMBER GAP
FORCE CW WRITE INITIALS IN BOX PERMIT No. 110-81-2723

SPECIAL CONDITIONS

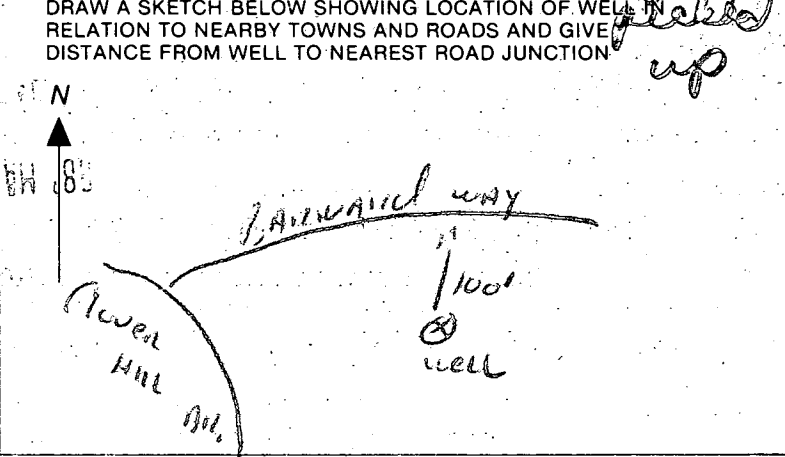
LOCATION OF WELL
HOWARD COUNTY
MATHIS PROP
SECTION 2 LOT 18
WEST FINE FLOSHIP
MILES FROM TOWN (enter 0 if in town) 0 MI



11 BARNAID WAY NEAR WHAT ROAD
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
NORTH
WEST
EAST
SOUTH
34 100 37 DISTANCE FROM ROAD
ENTER FT or MI 77

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
Howard COUNTY NAME A37996 COUNTY NO.
STATE SIGNATURE DATE ISSUED
051188 CO SIGNATURE EXP. DATE
NORTH GRID 535000 EAST GRID 0816000

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
SOURCES OF DRILLING WATER
1. well
2.
3.
WRITE THE BOX-NUMBER FROM THE MAP HERE
E 810 6
N 530 5
000 H2O sampled up



4/29/90

4/20/90

Final

C.B.A

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

PITLESS ADAPTER WELL LINE

New Installation
Replacement

Receipt # 45771
Date 3/30/90

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 BARNARD CONST. CO.

Telephone 489-7621

Subdivision MATHEWS PROPERTY Lot # 18

Well Tag # HO-81-2723

Site Address 12449 BARNARD WAY

on sites well
4/20

Pump

- Type
 - Deep well jet
 - Shallow well jet
 - Submersible
- Make Goulds
- Model # 10EJ05472
- Capacity 10 GPM
- Pump exceeds well capacity Yes No
- If Yes, is low pressure cutoff switch installed? Yes No
- What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors Cable guards Other

Motor

- Horsepower 1/2
- RPM
- Voltage 220
 - 110
 - 220

Pitless Adapter

- Make HAROLD
- Model # PT800
- Depth 42"

Tank

- Capacity 42 gal
- Pressure relief valve? 7.5 PSI

Piping

- Type PLASTIC
- Size 1"
- NSF and/or BOCA Code approved
- Depth of supply line 42"

Well data

- Depth ft.
- Yield GPM
- Static water level ft.
- Will water supply be disinfected by installer?

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: _____

Date: 3/30/90

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

C1 9507

SEQUENCE NO. (DENV 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 37996

DATE RECEIVED

DATE WELL COMPLETED

DEPTH OF WELL

PERMIT NO. FROM "PERMIT TO DRILL WELL"

DATE RECEIVED grid

DATE WELL COMPLETED grid

DEPTH OF WELL grid

PERMIT NO. grid

OWNER STREET OR RFD SUBDIVISION SECTION LOT

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. Includes entries for Top Soil, Sandy, Sandstone, MICA, Sandstone, MICA.

GROUTING RECORD WELL HAS BEEN GROUTED TYPE OF GROUTING MATERIAL CEMENT BENTONITE CLAY NO. OF BAGS NO. OF POUNDS GALLONS OF WATER DEPTH OF GROUT SEAL

CASING RECORD casing types insert appropriate code below MAIN CASING Nominal diameter Total depth

OTHER CASING (if used) diameter depth from to

SCREEN RECORD screen type or open hole insert appropriate code below

DEPTH (nearest ft.) grid

CIRCLE APPROPRIATE LETTER A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 10.17.13 "WELL CONSTRUCTION"

DRILLERS IDENT. NO. DRILLERS SIGNATURE

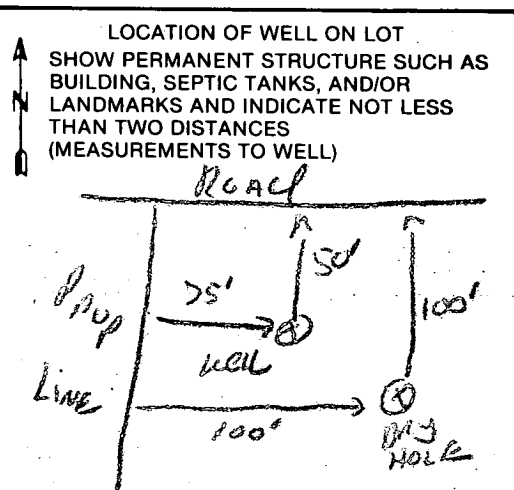
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

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

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

PUMPING TEST HOURS PUMPED PUMPING RATE METHOD USED TO MEASURE PUMPING RATE WATER LEVEL BEFORE PUMPING WHEN PUMPING TYPE OF PUMP USED

PUMP INSTALLED DRILLER WILL INSTALL PUMP IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE



HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

000127421 ✓

Building Address 12449 BARNARD WAY
W Friendship, 21794
 Suite/Apt. #: _____ SDP/WP/Petition #: _____
 Census Tract _____ Subdivision MATHIS PROPERTY
 Section _____ Area _____ Lot 16
 Tax Map 15 Parcel 15 Grid 12
 Zoning _____ Map Coordinates 10E2 Lot size 3.00 AC

Property Owner's Name JOHN & NANCY MEADE
 Address 12449 BARNARD WAY
 City W. FRIENDSHIP State MD Zip Code 21794
 Home Phone 410-419-5462 Work Phone 410-767-2413
 Applicant's Name & Mailing Address, (if other than stated hereon):
JOHN KRAWCZYK
MD POOLS INC
 Phone 410-995-6600 Fax 301-621-3331

Existing Use SFD
 Proposed Use SFD w/ POOL
 Estimated Construction Cost \$15,000
 Description of Work INSTALL 20' x 40' @ 700# 3 1/2 - 5 1/2' DEEP
IN REAR YARD ENCLOSED BY 300' 4 1/2" 110' WOOD
FENCE TO CORR. POOL FILTERED BE CART. SYS & F. 1120'

Contractor Company MARYLAND POOLS INC
 Contact Person J. KRAWCZYK
 Address 615 GERWIG LANE SUITE 119
 City COLUMBIA State MD Zip Code 21046
 License No. 6694
 Phone 410-995-6600 Fax 301-621-3331

Occupant or Tenant OWNER BY TRUCK
 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 _____ State Certified Modular _____	Sprinkler system: <u>N/A</u> <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: _____ Public _____ Private <input checked="" type="checkbox"/>
1st floor: _____	Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/>
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"/> No. of Bedrooms _____	Sprinkler system: <u>N/A</u> <input type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____
Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Other Structure: <u>POOL</u> Dimensions: <u>20' x 40'</u> Footings: <u>700#</u> Roof: <u>3 1/2 - 5 1/2' DEEP</u>
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 THEREIN; (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.

[Signature]
 Applicant's Signature
AGENT
 Title/Company

JOHN KRAWCZYK
 Print Name
11/15/2000
 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>M. Rifkin</u>
Fire Protection		

Is Sediment Control approval required prior to issuance?
 YES NO

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 NewTown Zone _____
 SDP/Red-line approval date _____

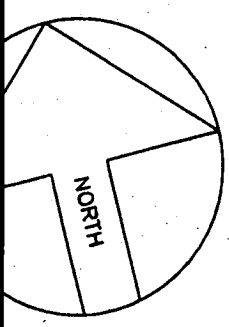
PROPERTY ID#: 458713

Filing fee	\$ _____
Permit fee	\$ <u>125</u>
Excise tax	\$ _____
Sub-total paid	\$ _____
Add'l permit fee	\$ _____
TOTAL FEES	\$ <u>125</u>
Balance due	\$ _____
Check	# <u>2242</u>
Validation	# <u>92712</u>

CONTINGENCY CONSTRUCTION START:
 ONE STOP SHOP:

Distribution of Copies- White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA

WATER WELL
SEPTIC



SITE PLAN

1" = 40'

1:50

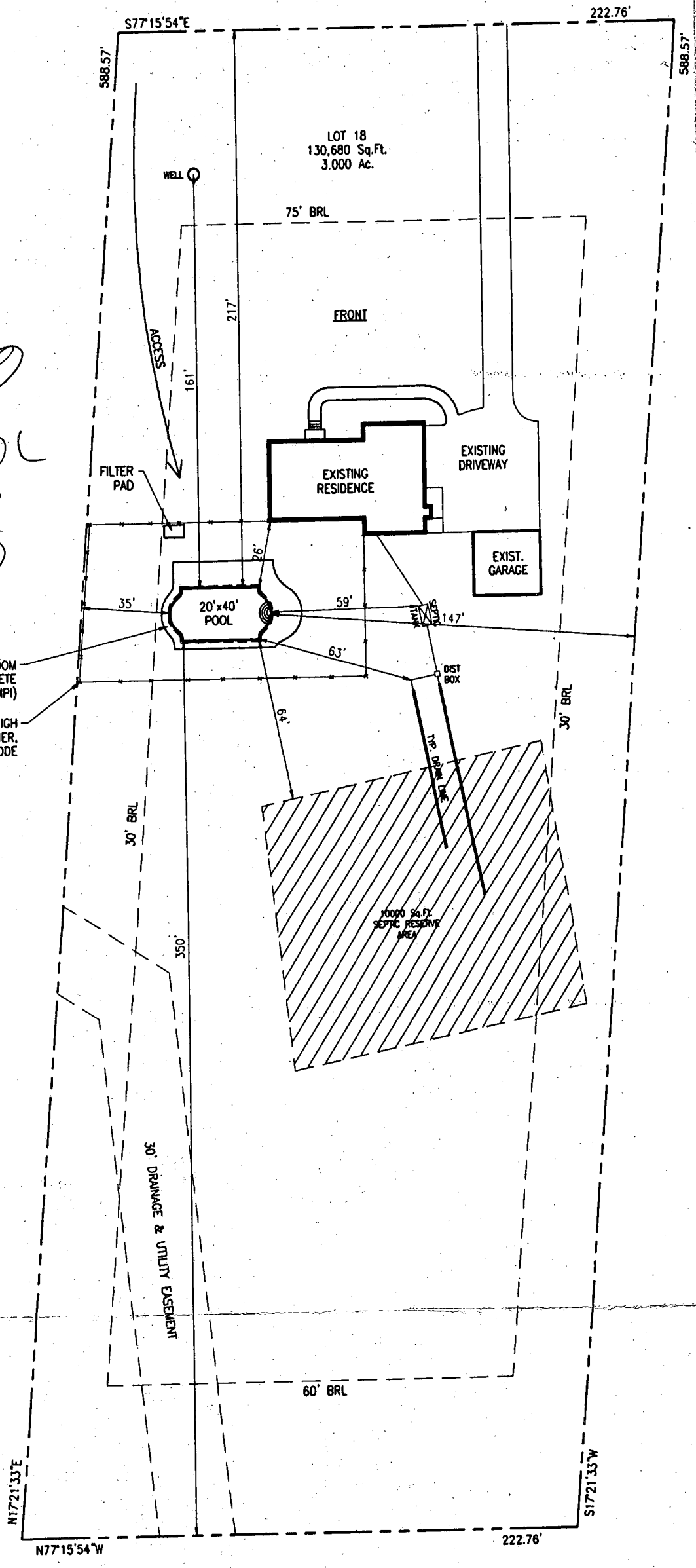
LOT 18
THIS PROPERTY
COUNT NO: 313050
GRID 12, PARCEL 15
ELECTION DISTRICT
D COUNTY, MARYLAND

POOL

MR

11/15/00

879 Sq.Ft. BROOM
FINISH CONCRETE
DECK (BY MPI)
300 Ln.Ft., 48" HIGH
FENCE, BY OWNER,
AS PER CODE



N17°21'33"E

N77°15'54"W

222.76'

S17°21'33"W

588.57'

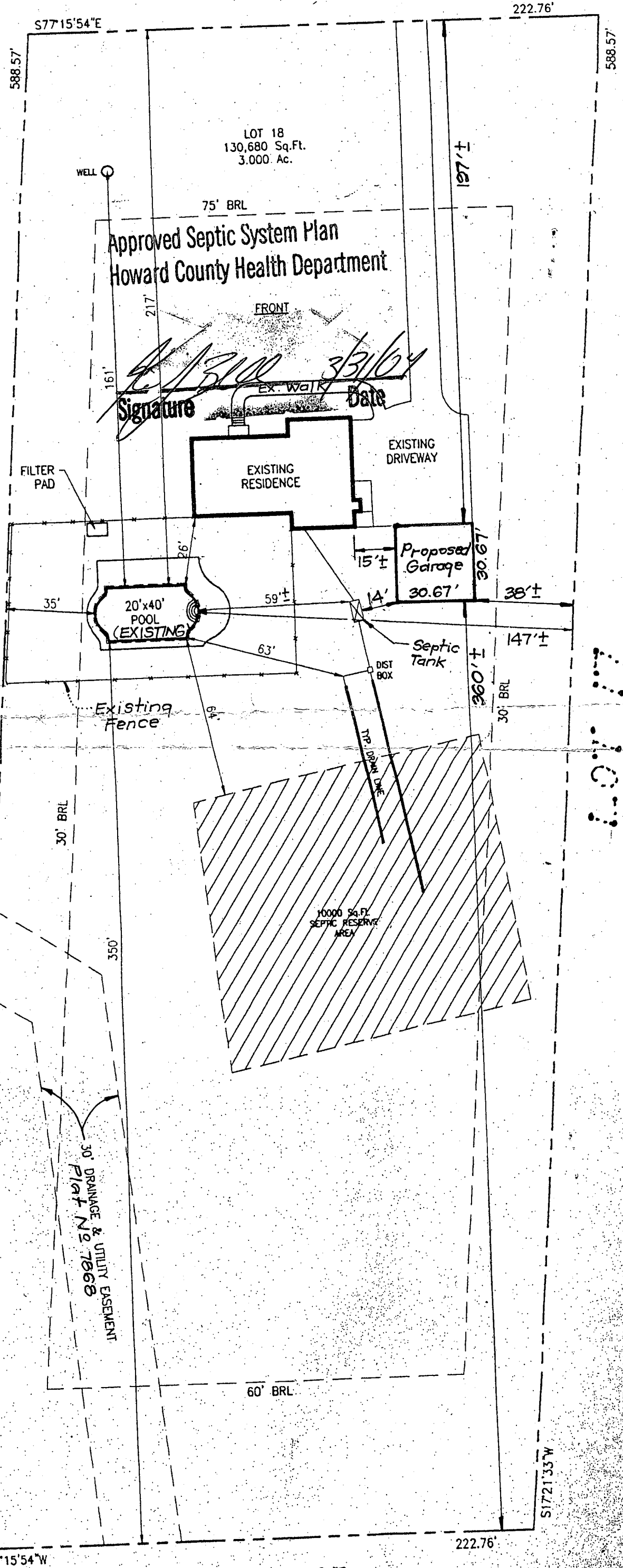
588.57'

BARNARD WAY 50' R/W

**PLOT PLAN FOR
DETACHED GARAGE CONSTRUCTION
LOT 18
MATHIS PROPERTY
SECTION II
3RD ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
SCALE: 1"=40' MARCH 2004
PLAT NO 7868**

OWNER / BUILDER

**JOHN MEADE
12449 Barnard Way
West Friendship, Md. 21794**



LOT 21

LOT 19

LOT 19