

12/2/88 noon 72 pm

12/5/88 AM

1/24/89 10:30  
DINED

copy BURN cards

File

# PERMIT

05 407419

P 43136

A 35459

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH DISTRICT 5th

**HOWARD COUNTY**  
BUREAU OF ENVIRONMENTAL HEALTH  
461-9933

## INDEXED

DATE 11/29/87

DATE SYSTEM APPROVED 1/24/89

INSPECTOR C.B. d

T & R Plumbing & Heating, Inc. IS PERMITTED TO INSTALL X ALTER \_\_\_\_\_

ADDRESS 11974 Scaggsville Road, Fulton, Maryland 20759 PHONE 725-2392

SUBDIVISION Waterford ROAD 13175 Brighton Dam Rd LOT 7, Section 2

PROPERTY OWNER Roger Pedersen **BUILDING PERMIT SIGNED**

ADDRESS \_\_\_\_\_ **AND RETURNED**  
*BUILDER - 174003 BOUTYX (725-8931) - CALL POOL*

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES X NO \_\_\_\_\_

SEPTIC TANK CAPACITY 2000 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 275 sq. ft. per bedroom with garbage disposal. Trench to be 3 feet wide. Inlet 4.0 feet below original grade. Bottom maximum depth 5.5 feet below original grade. Effective area begins at 4.0 feet below original grade. 1.5 feet of stone below distribution pipe.

LOCATION - Place the distribution box 175 feet down the left (965.37') lot line and 80 feet off the same lot line as seen when facing the lot from Brighton Dam Road. Run trenches on contour toward the left and right lot line.

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 Sid Abel DATE 4/01/87

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 TRENCH(IES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(IES)

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 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

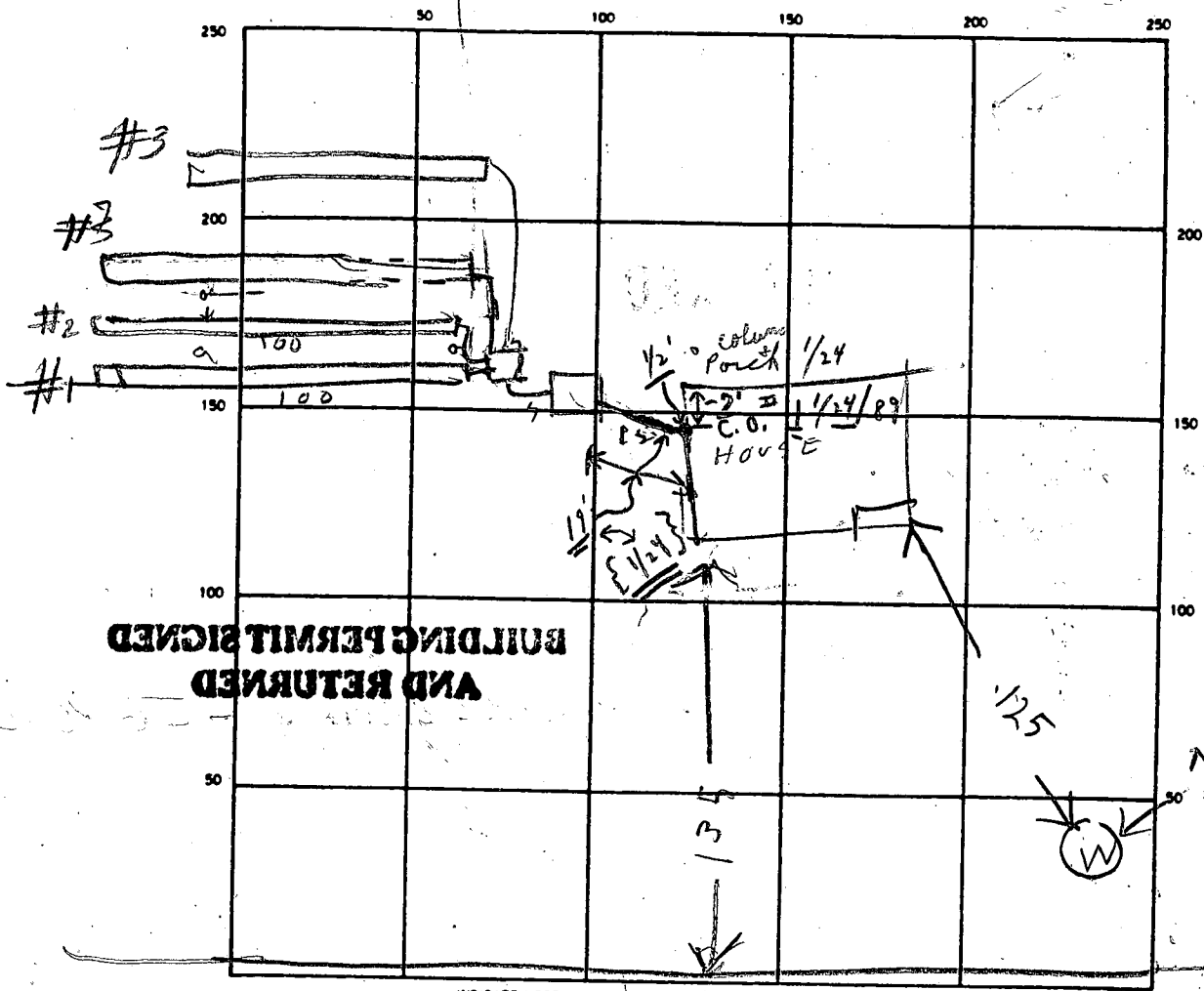
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

*BP 49893  
finish bathroom occupied  
in during initial const.  
(interior completion)  
and*

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

**\*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.**

35459



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE  
 BRIGHTON DR (R1)

SEPTIC TANK LEVEL OK 2000

CLEANOUTS OK S.T. C.O. #1 OK 1/24

DISTRIBUTION BOX LEVEL \_\_\_\_\_

DRAIN FIELD/TILE FIELD DEPTH 55/60/55/55 FT. TRENCH WIDTH 3/3/3/3 FT. INLET DEPTH 3.5/3 FT.

EFFECTIVE GRAVEL DEPTH 1.5/1.5/1.5/1.5 FT. TOTAL LENGTH 100/100/100 FT.

NUMBER OF TRENCHES 4 ONE SIDEWALL/BOTTOM AREA 300/200/300/40 FT. 225 | 1134

DRYWELL INSIDE DIAMETER \_\_\_\_\_ FT. EFFECTIVE DEPTH BELOW INLET \_\_\_\_\_ FT.

ABSORBENT AREA \_\_\_\_\_ SQ. FT.

REMARKS  
 12/2/88 AM LOCATION OK PER PLANS - TRENCHES #1 & 2 & TANK OK. DIG TRENCHES #3 & #4 RP  
 12/2/89 PM - TRENCH #3 DUG. COVER TRENCHES #1, #2, #3 & TANK DIG TRENCH #4 CALL RP  
 12/5/89 AM - 4TH TRENCH OK CALL FOR INSPECTION OF HOUSE SEWER WHEN READY RP 1/24/89 water test appears - ok; all work was covered; File

DATE SYSTEM APPROVED 1/24/89 INSPECTOR Charles Bryan Strick

NO TAG WELL LIMO COVERED

200  
 500  
 500  
 225  
 1134

75  
 3  
 295

A 35459

SUBDIVISION: WATERFORD

LOT NUMBER: 7

Sec. 2

DRY WELL OR DRY WELL AND TRENCH

\_\_\_\_\_ sq. ft./bedroom

	<u>Septic Tank</u>	<u>Minimum Total Square Feet</u>
3 bedroom	1000 gallon	_____
4 bedroom	1250 gallon	_____
5 bedroom	1500 gallon	_____

Inlet \_\_\_\_\_ feet below original grade.

Bottom maximum depth \_\_\_\_\_ feet below original grade.

Effective area begins at \_\_\_\_\_ feet below original grade.

NOTE: If trench is used to make up absorbent area, run the trench on level ground and leave a 5-foot earth buffer between dry well and trench. No trench is to exceed 100 feet in length. Trench inlet to be same as dry well, with \_\_\_\_\_ feet of stone below distribution pipe.

TRENCHES

275 sq. ft./bedroom with 640

225 sq. ft./bedroom

Trench to be 3 wide.

Inlet 4.0 feet below original grade.

Bottom maximum depth 5.5 feet below original grade.

Effective area begins at 4.0 feet below original grade.

1.5 feet of stone below distribution pipe.

4BR  
Yes

- NOTE:
- (1) No trench to exceed 100 feet in length.
  - (2) If more than one trench used, a distribution box is required.
  - (3) Trenches to be installed on level ground.
  - (4) Call for inspection of trench before gravel is installed.
  - (5) Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank and drywell.
  - (6) If a garbage disposal is used, increase septic tank capacity by 50% and increase absorbent sidewall area by 22%.

LOCATION: PLACE THE DISTRIBUTION BOX 175 FE DOWN THE LEFT (965.37')  
LOT LINE AND 80 FE OFF THE SAME LOT LINE AS SEEN WHEN FACING  
THE LOT FROM BRIGHTON DAM Rd. RUN TRENCHES ON CONTOUR TOWARD  
THE LEFT & RIGHT LOT LINE, 4-1-87 S. Alw

# APPLICATION

35-459  
34899

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A \_\_\_\_\_  
P \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SERVICES  
P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 992-2330

DISTRICT 5

DATE 1-25-85

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 Roger Pedersen  
Developer - Highland Development Corp  
ADDRESS 13690 Nichols Drive PHONE 531-5539

PROPERTY LOCATION: WARRFORD  
SUBDIVISION Huntington Manor Estates LOT NO. Section 02 LOT 7  
ROAD AND DESCRIPTION 13175 Brighton Dam Rd.

SIZE OF LOT 3 Acres TYPE BLDG. Single Family  
(NUMBER OF BEDROOMS)

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.

(SIGNATURE OF APPLICANT)

APPROVED BY Sichung Abel FOR Shallow to fields DATE 4-1-87

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING 5-2-85 Perc. SATISFACTORY; Limited House Site Used for Certified subdivision PLAS. S.M.C.M. - Shallow System ONLY. S. Abel

PERMIT SIGNED AND RETURNED 7-18-88

BP 19952  
S. Abel

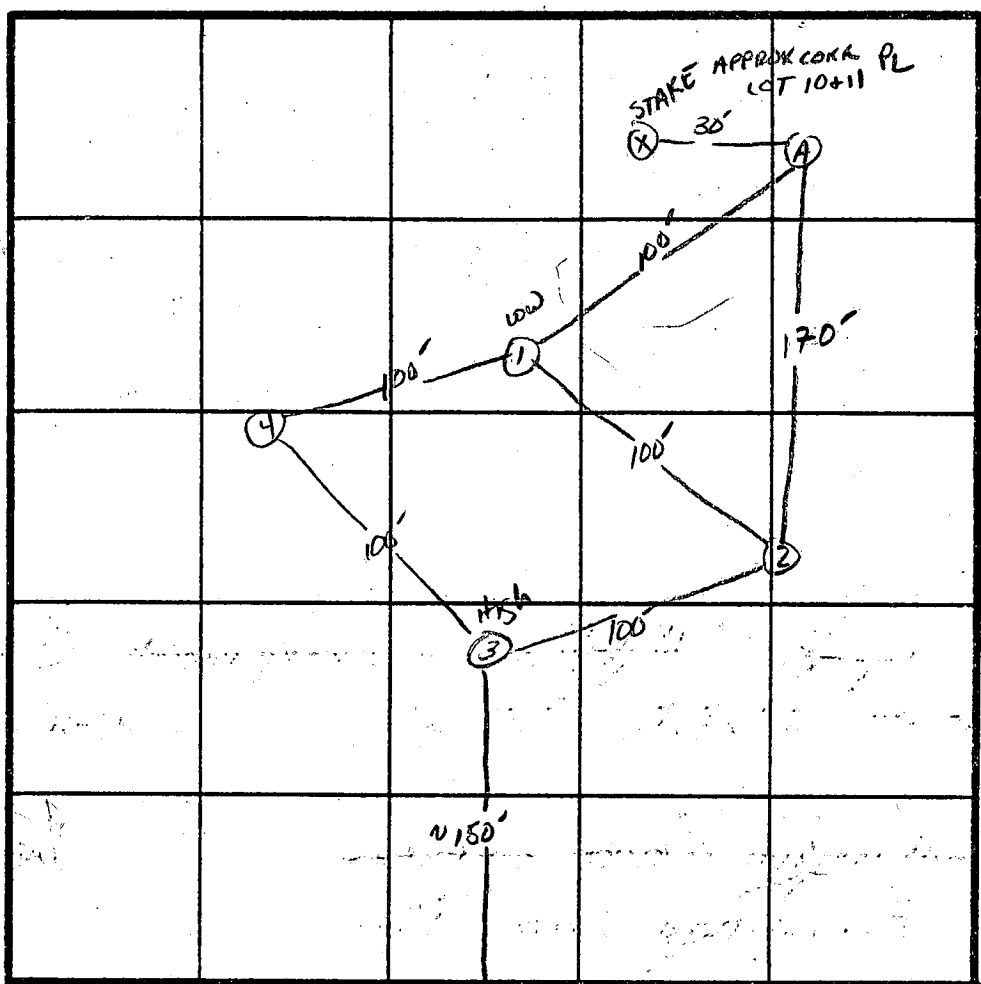
# THIS IS NOT A PERMIT

①  
SOIL PROFILE

0"	A1-3
6"	RED BROWN CLAY LOAM 60% SAPROLITE
5"	YELLOW BROWN SILTY SAND 10-20% SAPROLITE
12.5"	

② ③ ④

0"	A1-3
6"	RED BROWN CLAY LOAM 40% SAPROLITE
4.5"	BROWN SILTY SAND 40% SAPROLITE
12.5"	



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.  
BRIGHTON DITCH RD.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
5/2	1 ✓	5" 12.5"	11:56	12:09	12:09	12:37	28min
	2 ✓	4.5" 12.5"	12:00	12:15	12:15	12:42	27min
	3 ✓	5" 12.5"	12:09	12:14	12:14	12:22	8min
	4 ✓	4.5" 13"	12:14	12:16	12:16	12:20	4min
	A	WATER AT 10" CLAY TO 5"					

X Perc Time  
17min  
INLET 4.0"  
BOTTOM 5.5"

REMARKS Δ Perc. Field. Limited House + well site, DEEP SOIL DRY - Shallow System Only

TYPE OF SOIL \_\_\_\_\_

TESTED BY J Abel ALSO PRESENT LES, TERRY, DONNY

# APPLICATION

35463

A 34895

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SERVICES

DISTRICT 5

P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 992-2330

DATE 1-25-85

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 Developer - Highland Development Corp.  
ADDRESS 13690 Nichols Drive PHONE 531-5539

PROPERTY LOCATION:

SUBDIVISION Huntington Manor Estates LOT NO. Lot #7  
ROAD AND DESCRIPTION Brighton Dam Road

SIZE OF LOT 3 Acres TYPE BLDG. Single Family  
(NUMBER OF BEDROOMS)

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.

(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

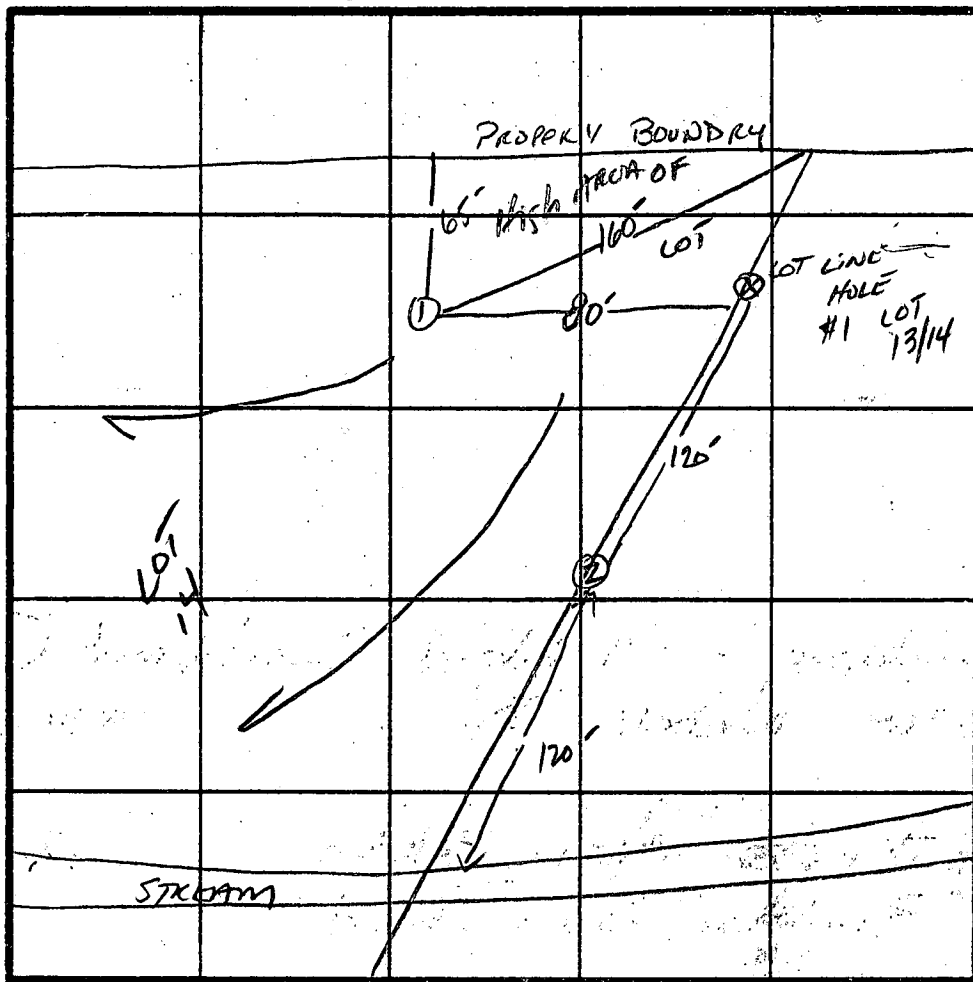
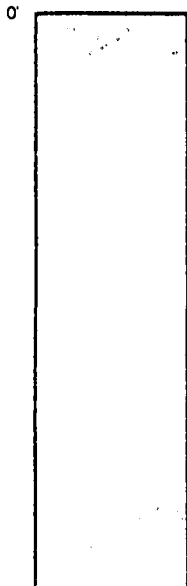
REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING 5-6-85 Perc. UNSATISFACTORY - Insufficient AREA remaining TO TEST WATER TABLE Problem; Hold For Certified subdivision perc. Study

# THIS IS NOT A PERMIT

SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

BRIGHAM DAM RD.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
5/6/85	1 ✓	WATER AT 11' CLAY TO 5.5'					
	2 ✓	WATER AT 8.5' CLAY TO 3'					

REMARKS All remain LOT AREA DOWN HILL INSUFFICIENT AREA TO TEST.

TYPE OF SOIL \_\_\_\_\_

TESTED BY SABE

TERRY, L.S., DONNY  
ALSO PRESENT

EH-12-1079

B 7 9338 SEQUENCE NO. (OEP USE ONLY)  
THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS

STATE OF MARYLAND PERMIT TO DRILL WELL

please print or type

OEP PERMIT NUMBER

40-81-2375

fill in this form completely

Date Received

092987

OWNER INFORMATION

PEDERSEN J ROGER

14215 CLARKSVILLE PK

HIGHLAND MD 20777

DRILLER INFORMATION

Joseph L. Mayme 238

Joseph L. Mayme Well Drilling

5512 Ridge Rd. Mt. Airy 21771

Joseph L. Mayme 9/2/87

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 260 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH

METHOD OF DRILLING (circle one)

- Bored (or Augered) JETTED Jetted & DRIVEN
AIR-ROTary AIR-PERcussion ROTARY (Hydraulic Rotary)
CABLE REVERSE-ROTary DRive-POINT

REPLACEMENT OR DEEPEMED 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 DEEPEMED AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)

Not to be filled in by driller (OEP USE ONLY)

APPROP. PERMIT NUMBER GAP

FORCE SA INITIALS PERMIT NO. 40-81-2375

SPECIAL CONDITIONS

LOCATION OF WELL

HOWARD

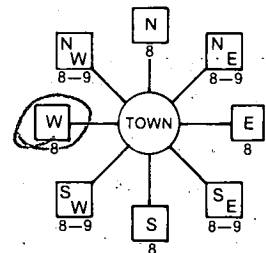
WATERFORD

SECTION 002 LOT 007

CLARKSVILLE

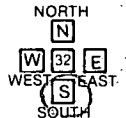
MILES FROM TOWN (enter 0 if in town) 3/2 MI

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Brighton Dam Rd.

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



DISTANCE FROM ROAD 15

ENTER FT or MI F+

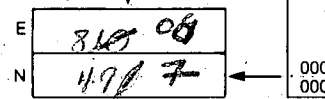
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard COUNTY NAME A-35459 COUNTY NO.
OEP SIGNATURE DATE ISSUED 02787
CO SIGNATURE EXP. DATE 04-26-88
NORTH GRID 497000 EAST GRID 0808000

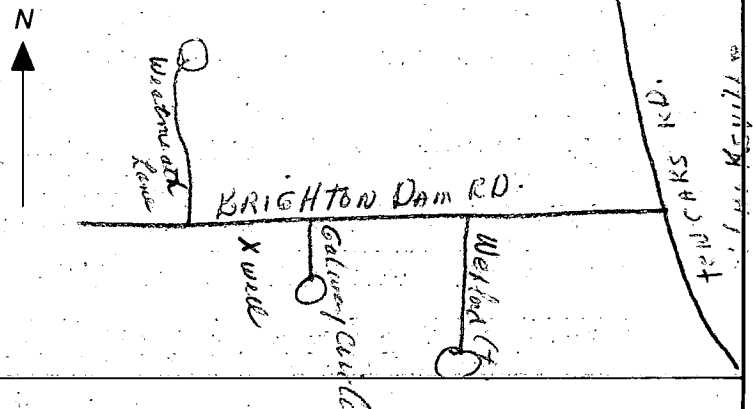
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

- SOURCES OF DRILLING WATER
1. Well
2.
3.

WRITE THE BOX NUMBER FROM THE MAP HERE



DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION









1-9-89  
AMM  
AS/AP

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 ✓ Receipt # 43370  
Replacement \_\_\_\_\_ Date 1-6-89  
Name of Installer Michael Ormiston Telephone 796-8358  
License Number 8444  
Certified Well Pump Installer \_\_\_\_\_ Well Driller \_\_\_\_\_ Registered Plumber X  
Name of Property Owner Rodger Pederson Telephone \_\_\_\_\_  
Subdivision Waterford Lot # 7 Well Tag # HO-81-2375  
Site Address 14215 Charksville Pike Highland MD  
13175 Dargha Den Rd.

Pump Motor Pitless Adapter  
1. Type 1. Horsepower 1/2 1. Make Morrison  
a. Deep well jet \_\_\_\_\_ 2. RPM \_\_\_\_\_ 2. Model # BP 10X  
b. Shallow well jet \_\_\_\_\_ 3. Voltage \_\_\_\_\_ 3. Depth 98"  
c. Submersible X a. 110 \_\_\_\_\_  
2. Make Goulds b. 220 X  
3. Model # \_\_\_\_\_  
4. Capacity \_\_\_\_\_ 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 \_\_\_\_\_

Tank Piping Well data  
1. Capacity \_\_\_\_\_ 1. Type \_\_\_\_\_ 1. Depth 205 ft.  
2. Pressure relief valve? \_\_\_\_\_ 2. Size \_\_\_\_\_ 2. Yield 12 GPM  
3. NSF and/or BOCA Code approved \_\_\_\_\_ 3. Static water level 26 ft.  
4. Depth of supply line \_\_\_\_\_ 4. Will water supply be disinfected by installer? \_\_\_\_\_

WORK COVERED NOTAG  
P.A. NOT SEEN MR 1/9/89

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).

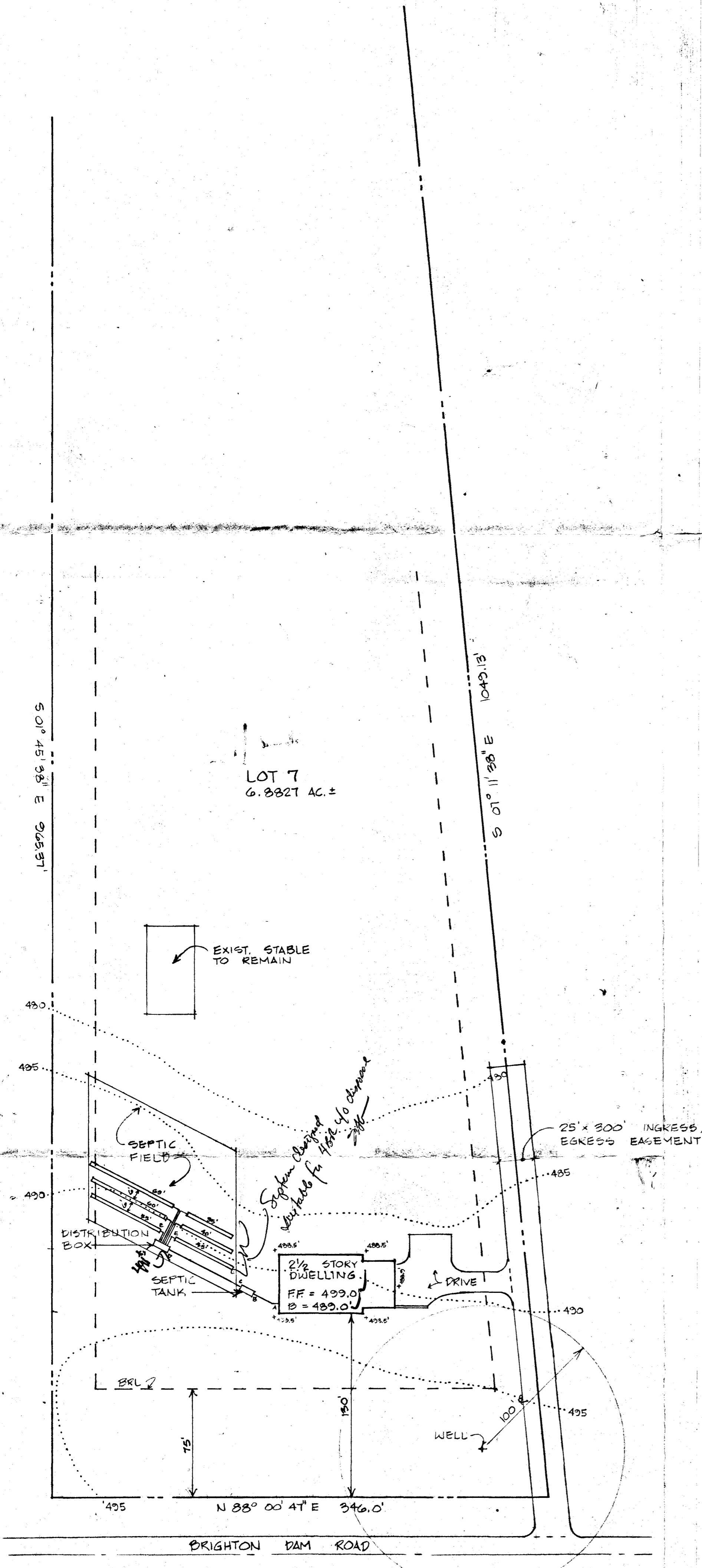
All information given above is true to the best of my knowledge.

Signature of Applicant: Michael Ormiston  
Date: 1/6/89

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

## SEPTIC SYSTEM DATA

✓A.	INVERT ELEV. OUT OF HOUSE	489.5' ✓ (-85mm)
✓B.	INVERT ELEV. INTO SEPTIC TANK	489.0' ✓
✓C.	INVERT ELEV. OUT OF SEPTIC TANK	488.7' ✓
✓D.	INVERT ELEV. INTO DISTRIBUTION BOX	488.0' ✓
✓E.	INVERT ELEV. OUT OF DIST. BOX.	487.5' ✓
✓F.	INVERT ELEV. INTO FIRST TRENCH	487.0' ✓
✓G.	ALL TRENCHES TO BE 3'-0" WIDE, INLETS TO BE 4'-0" BELOW ORIGINAL GRADE., MAXIMUM TRENCH DEPTH TO BE 5'-6" BELOW ORIGINAL GRADE., 1'-6" OF STONE BELOW DIST. PIPE INVERT.	



BUDG. PERMIT SIGNED  
AND RETURNED 7-18-88

7-18-88  
elevations ok  
S. Abel

BP 19952  
S. Abel

7-18-88 S. Abel

**HOWARD COUNTY  
PERMIT APPLICATION**

**PERMIT NUMBER**

B00142949

Building Address 13175 Brighton Drive Rd  
Clarksville MD 21029  
Suite/Apt. #: \_\_\_\_\_ SDP/WP/Petition #: \_\_\_\_\_  
Census Tract 605101 Subdivision Waterford  
Section 2 Area \_\_\_\_\_ Lot 7  
Tax Map 34 Parcel 241 Grid 7  
Zoning (R) 10 Map Coordinates 1408 Lot size 6.5857 AC

Property Owner's Name Ragna & Roger Anderson  
Address 13175 Brighton Drive Rd  
City Clarksville State MD Zip Code 21029  
Home Phone 410 543396 Work Phone \_\_\_\_\_  
Applicant's Name & Mailing Address, (if other than stated hereon):  
Dana Krawczyk  
4275 Germantown Rd  
Columbia MD 21046  
Phone 410 9510100 Fax \_\_\_\_\_

Existing Use SPD Garage  
Proposed Use SPD Maintenance  
Estimated Construction Cost \$ 24000  
Description of Work Contact. 6' x 6' x 120' long concrete  
and 6'-4'-6" deep filled basement @ contact. 1/4" x 1/4"  
6' enclosed by existing fence

Contractor Company Maryland Prok Inc  
Contact Person Dana Krawczyk  
Address 4275 Germantown Rd  
City Columbia State MD Zip Code 21046  
License No. 66974  
Phone 410 9510100 Fax \_\_\_\_\_

Occupant or Tenant owner  
Contact Name Dana Krawczyk  
Address 4275 Germantown Rd  
City Columbia State MD Zip Code 21046  
Phone 410 9510100 Fax \_\_\_\_\_

Engineer or Architect Company \_\_\_\_\_  
Contact Person \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_

**BUILDING DESCRIPTION - COMMERCIAL**

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

**BUILDING DESCRIPTION - RESIDENTIAL**

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"/>
Basement: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/>	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Sprinkler system: N/A <input type="checkbox"/> NFA #13D _____ NFA #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 _____	

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.

Dana Krawczyk  
Applicant's Signature  
7/10/03  
Title/Company

Dana Krawczyk  
Print Name  
7/10/03  
Date

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

AGENCY	DATE	SIGNATURE APPROVAL
<input checked="" type="checkbox"/> Land Development, DPZ		
<input type="checkbox"/> State Highways		
<input checked="" type="checkbox"/> Building Official		
<input checked="" type="checkbox"/> Dev. Engineering, DPZ		
<input checked="" type="checkbox"/> Health	<u>7/10/03</u>	<u>Mark Rfb</u>
<input type="checkbox"/> Fire Protection		

Is Sediment Control approval required prior to issuance?  
YES  NO

CONTINGENCY CONSTRUCTION START:

ONE STOP SHOP:

**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#:** 2309

Filing fee \$ \_\_\_\_\_  
Permit fee \$ 50  
Excise tax \$ \_\_\_\_\_  
Add'l per. fee \$ \_\_\_\_\_  
TOTAL FEES \$ 50  
Sub-total paid \$ \_\_\_\_\_  
Balance due \$ \_\_\_\_\_  
Check # 4678  
Validation # 27790

Accepted by [Signature]

N88°00'47"E 346.00'

FRONT

EX. DRIVEWAY  
25'x300' INGRESS/EGRESS EASEMENT

WELL

EX. DRIVEWAY

75' BRL

180'

169'

FILTER PAD LOCATION

EX. RESIDENCE

S.T.

ACCESS

19'x60' POOL

TYP. FIELD DRAIN

SEPTIC RESERVE AREA

109'

*POOL OK  
MR 7/10/03*

MASONRY STONE WALL  
HEIGHT NOT TO EXCEED 36"  
(BY OTHERS)

TYP. EXISTING FENCES  
FENCE AROUND POOL  
AREA TO BE BROUGHT  
TO CODE IF NEEDED  
(BY OTHERS)

800 Sq.Ft. BROOM  
FINISH CONCRETE DECK  
(BY OTHERS)

EXISTING STABLES

LOT 7  
299,810 Sq.Ft.  
6.8827 Ac.

NO 7°11'38"W 1049.18'

30' BRL

30' BRL

S01°43'38"E 965.37'

20' DRAINAGE  
& UTILITY EASEMENT

100 YEAR  
FLOOD PLAIN  
EASEMENT

PRIVATE WELL  
& SEPTIC

