

5/26/88 ASDP

04-344383

4/29/88

PERMIT

P 41649

A 35477

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

DISTRICT 4th

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED

DATE 4/29/88

DATE SYSTEM APPROVED 5/26/88

INSPECTOR (Pow)

Dave Hopkins

IS PERMITTED TO INSTALL ALTER

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

SUBDIVISION Warfield Partnership ROAD 16760 A. E. Mullinix LOT 2 *new 4*

PROPERTY OWNER Ronald Cashdollar

ADDRESS _____

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

GARBAGE GRINDER? YES _____ NO

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 194 sq. ft. per bedroom. Trench to be 3 feet wide. Inlet 3 1/2 feet below original grade. Bottom maximum depth 6 feet below original grade. Effective area begins at 3 1/2 feet below original grade. 2 1/2 feet of stone below distribution pipe.

LOCATION - SHALLOW SYSTEM ONLY. Start the first trench 170 feet from the front (1099') lot line and 135 feet from the left (985') lot line as seen when facing the property from A. E. Mullinix Road. Run trench(s) along contour toward front of property.
NOTE: In line cleanouts required maximum every 75 feet from house to perc field.

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 C. Williams DATE 7/30/86

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 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.

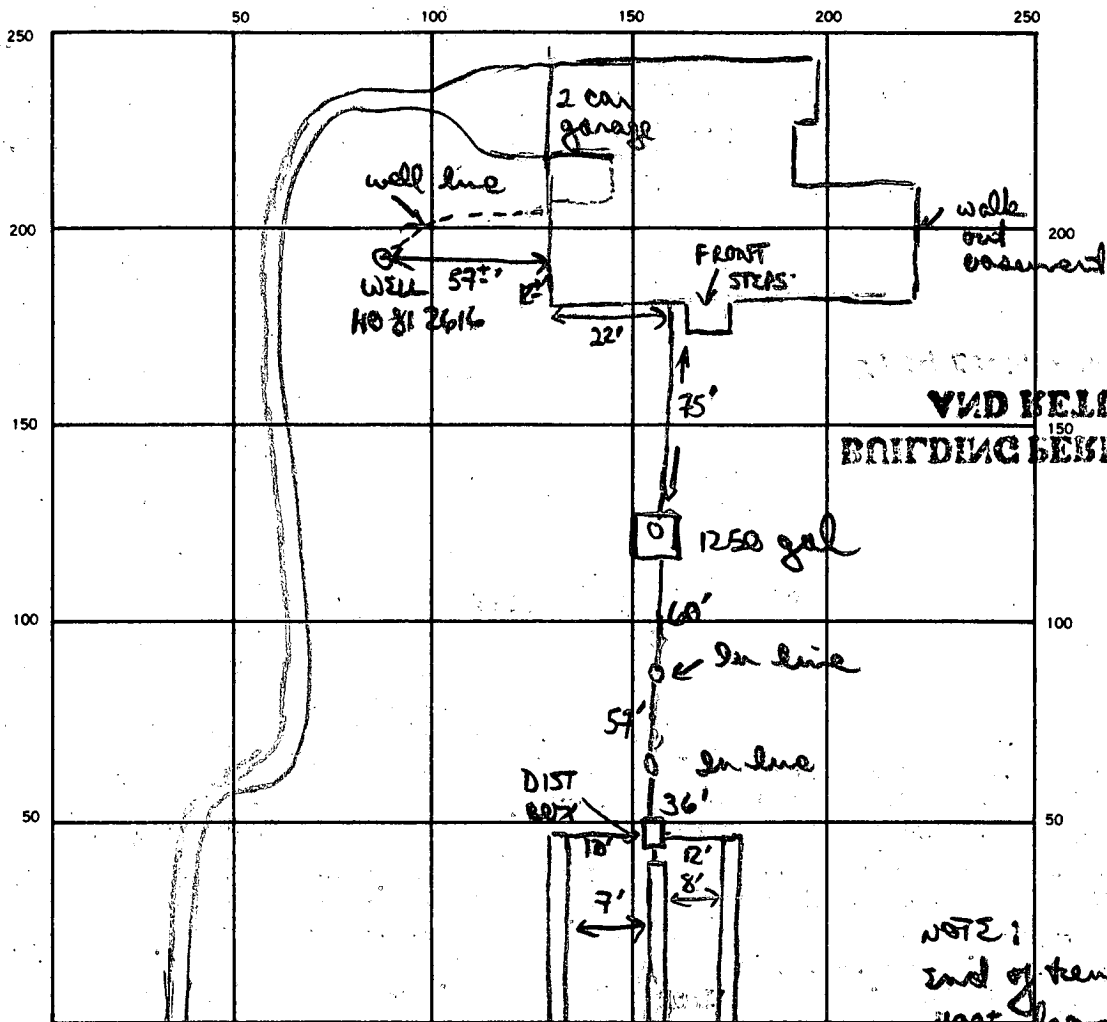
BUILDING PERMIT SIGNED AND RETURNED
31-04 B0014257-16 POOL

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

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1186

A 35477



✓
✓
cond final

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASELINE
A.E. MULLINEX RD

VVD BELIEVED
BRIDGING BE WILL SIGNED

NOTE:
end of trenches
400' from A.E. Mullinex

194
4
3 | 776
5
259 87
3 | 240
20

SEPTIC TANK LEVEL 1250 gal CLEANOUTS 1ST 2 In line

DISTRIBUTION BOX LEVEL ✓ w/ baffles

DRAIN FIELD/TILE FIELD DEPTH 6 6 6 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 1/2 all 3 FT.

EFFECTIVE GRAVEL DEPTH 2 1/2 FT. TOTAL LENGTH 90' 90' 90' FT.

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 270 X 3 SQ. FT.

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

ABSORBENT AREA 810 SQ. FT. (MIN 800)

REMARKS 5/26/88 OK to finish storming trench #3 - OK to cover
all 3 trenches. OK to cover all lines from house to
dist box

5/26/88 Pottless adapter in (-4 1/2' below) grade (Aeromatic)
1" black pipe line & power line OK. OK to cover
line

DATE SYSTEM APPROVED 5/26/88 INSPECTOR B. Wilson

C1 8573 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND WELL COMPLETION REPORT

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

COUNTY NUMBER A 35477

DATE RECEIVED

DATE WELL COMPLETED 03 22 88

DEPTH OF WELL 200 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-81-2616

OWNER BARNARD GARY last name first name STREET OR RFD H.E. MULLINEX ROAD TOWN LISBOW SUBDIVISION WAREFIELD PROPERTY SECTION LOT 4

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. Rows include Top Soil, Sandstone, Micka, etc.

GROUTING RECORD WELL HAS BEEN GROUTED (Y) (N) TYPE OF GROUTING MATERIAL CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 11 NO. OF POUNDS 1100

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

MAIN CASING Nominal diameter top (main) casing (nearest inch) Total depth of main casing (nearest foot)

OTHER CASING (if used) diameter inch depth (feet) from to

SCREEN RECORD screen type or open hole insert appropriate code below (ST, BR, HO, PL, OT) STEEL BRASS BRONZE PLASTIC OPEN HOLE OTHER

DEPTH (nearest ft.) 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51

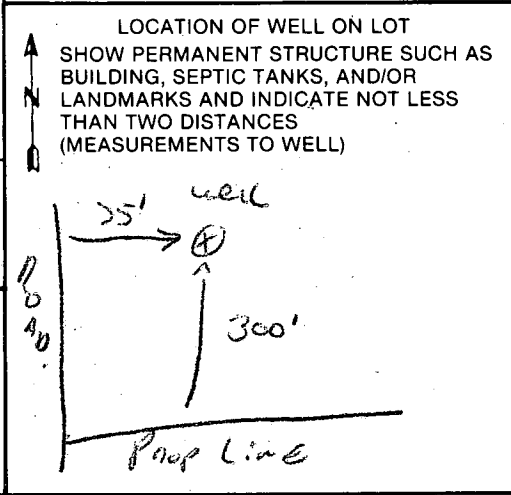
SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH)

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

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min. to nearest gal.) 6 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 30 WHEN PUMPING 25 TYPE OF PUMP USED (for test) C centrifugal R rotary O other (describe below) J jet 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 TYPE OF PUMP INSTALLED 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) + above LAND SURFACE (nearest foot) - below



CIRCLE APPROPRIATE LETTER 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 THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 10.17.13 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS IDENT. NO. 223 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

4946

SEQUENCE NO. (DP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

STATE PERMIT NUMBER

40-81-2616

fill in this form completely

NUMBER IS TO BE PUNCHED 3-6 ON ALL CARDS

please print or type

Date Received (ARA)

022488

OWNER INFORMATION

BARBARO GARY

ST MICHEALS RD

MT AIRY MD 21221

B 3

LOCATION OF WELL

HOWARD

WARFIELD PDP

SECTION 44-46 LOT 48-50

LISBON

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

DRILLER INFORMATION

Ralph MAYNE 273

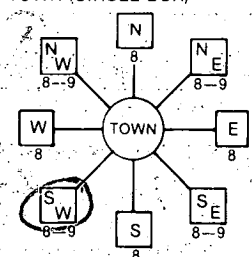
Ralph MAYNE Well Drilling

9120 Brown Church Rd. Mt Airy

Ralph Mayne 2/16/88

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



ABE Mullinix Rd.

NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



1400

ENTER FT. or MI

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

HOWARD A 35477

STATE SIGNATURE DATE ISSUED

031788 R. Nelson 09/17/88

NORTH GRID 541000 EAST GRID 0775000

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

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 DEEPEM AN EXISTING WELL

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

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

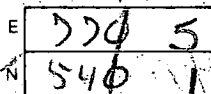
APPROP. PERMIT NUMBER GAP

FORCE R1 WRITE INITIALS IN BOX PERMIT NO. 40-81-2616

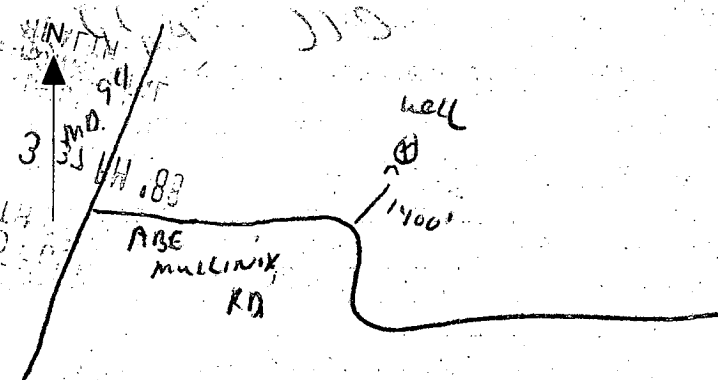
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

- 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



SPECIAL CONDITIONS

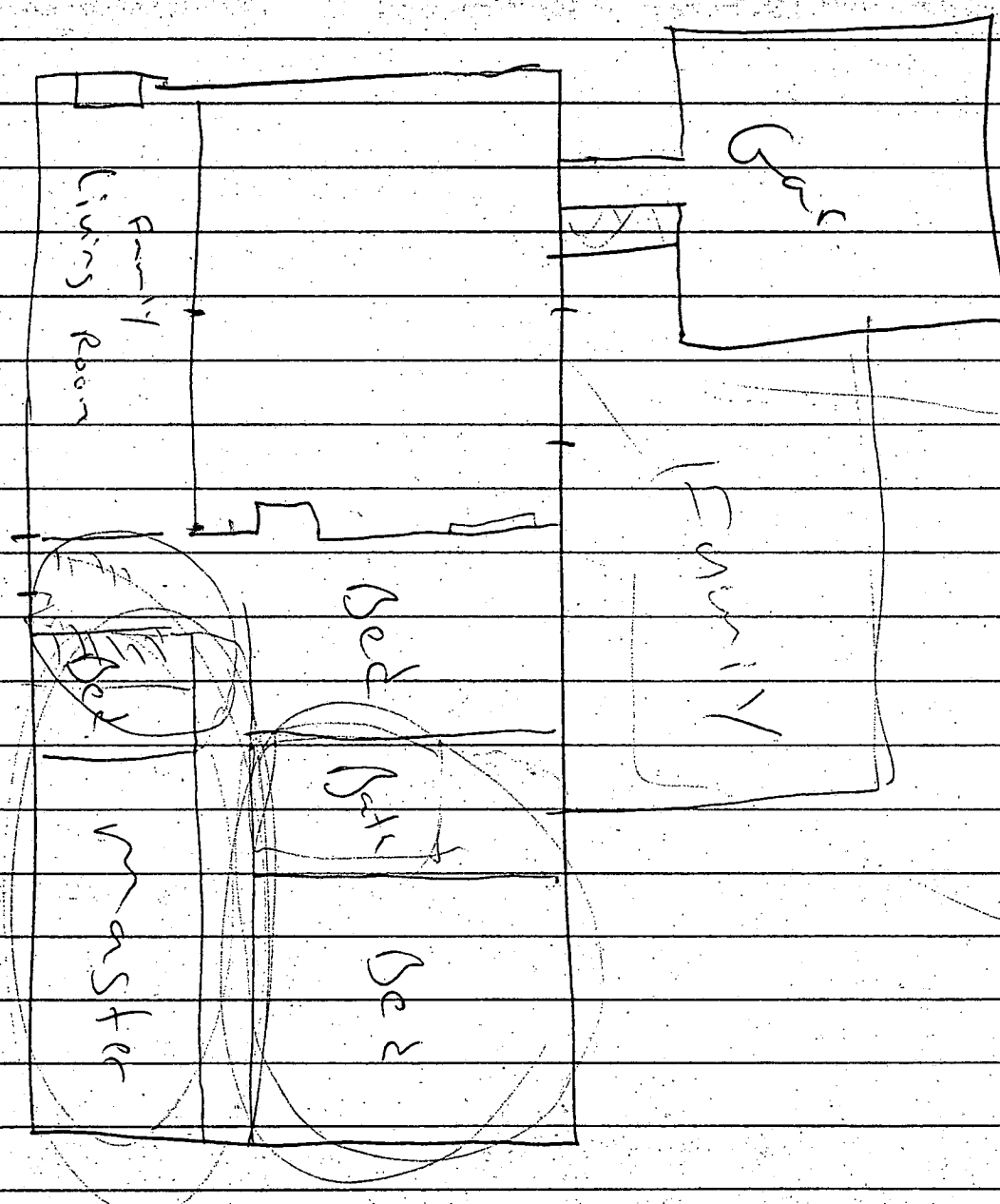
3/24/88 V130

- ① 42 ft casing
- ② 35 ft open hole
- ③ 11 Bags
- ④ Arrived late for 930 ground
- Get information from Frank
- ⑤ LOCATION

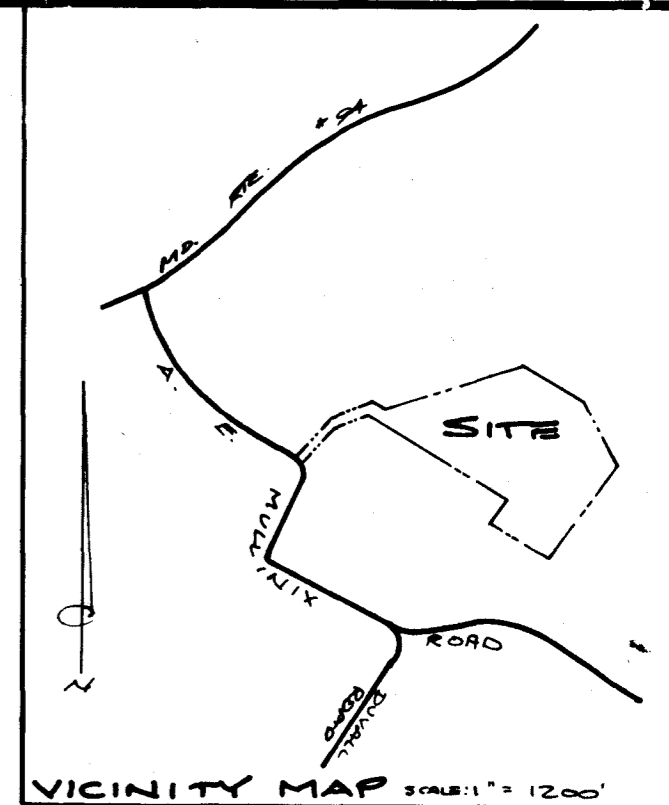
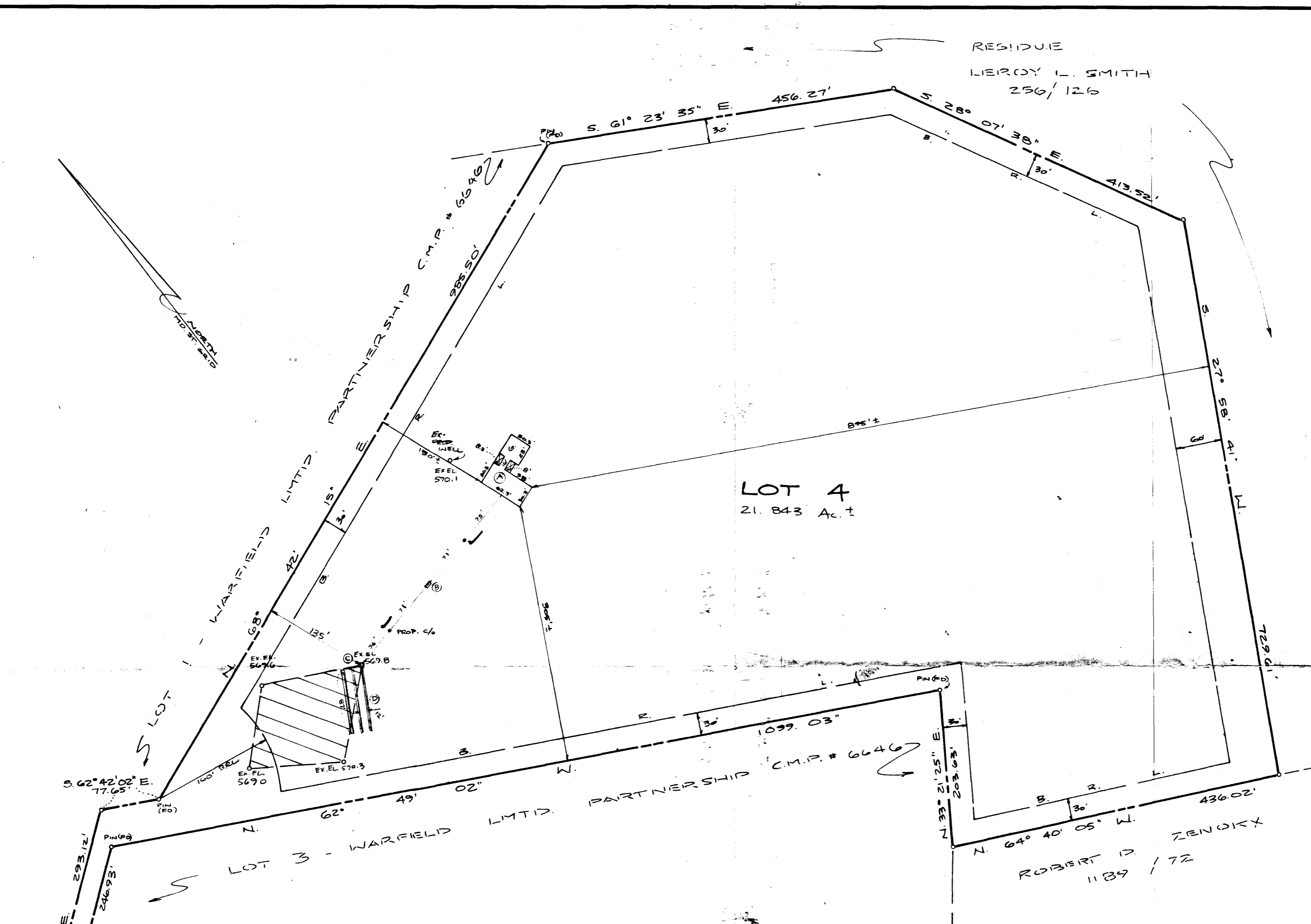
RECEIVED
HOWARD COUNTY
HEALTH DEPT.
APR 16 8 37 AM '88
B. J. [Signature]

10/11/00 OFFICE VISIT BY POTENTIAL
BUYER: PROPOSE TO ELIMINATE 3 EX. BR,
ADD 4 BR ON PROPOSED 2ND FLOOR;
NET GAIN OF 1 BR; @ 180 \$ BR x 5 = 900 \$

MR



810' EXISTS
OK FOR
PROPOSAL
AS
DISCUSSED
W/NO S.S.
EXPANSION
REQ'D



BDDG. PERMIT SIGNED
AND RETURNED 3/28/88

3/28/88
elevations
ok
shae

- A. PROPOSED HOUSE
F.F. El. = 572.7 ✓
Bsmt. El. = 564.2 ✓
Inv. Out = 569.7 ✓ (-BSMT)
- B. PROPOSED SEPTIC TANK
Ex. El. = 570.0 ✓
Inv. In = 568.2 ✓
Inv. Out = 567.9 ✓
- C. PROP. DISTRIBUTION BOX
Ex. El. = 569.8 ✓
Inv. In = 566.6 ✓
- D. PROPOSED TRENCHES
3 @ 87' (length) OK FOR 4BR.
Inv. El. = 566.3 ✓
2 1/2 of stone ✓
6 bottom max. ✓

PLOT PLAN
LOT 4, A RESUBDIVISION OF LOT 2
WARFIELD LIMITED PARTNERSHIP PROPERTY
SITUATED ON A.E. MULLINIX ROAD
FOURTH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
SCALE 1" = 100' FEB. 1988
REVISED: 1 MAR. 88 - PER HD. (SEPTIC)

A.E. MULLINIX ROAD



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

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 35477

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

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

DISTRICT 4th

DATE 5/9/85

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 George A. Scangos/Leslie Scangos Wilson Ronald CASHDOLLAR
ADDRESS 216 Edgevale Road
Baltimore, Maryland 21210 PHONE Boender Associates - 465-7777

PROPERTY LOCATION:

SUBDIVISION Warfield Partnership LOT NO. 7/24
16760 pw. B.P.
ROAD AND DESCRIPTION 1760 A. E. Mullinix Road

SIZE OF LOT _____ TYPE BLDG. 3 or 4 Bedrooms
(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. /s/ Boender
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 5-10-85 PERC. SATISFACTORY; HOLD for certified HOLE
LOCATION, HOUSE AND well SITE stable

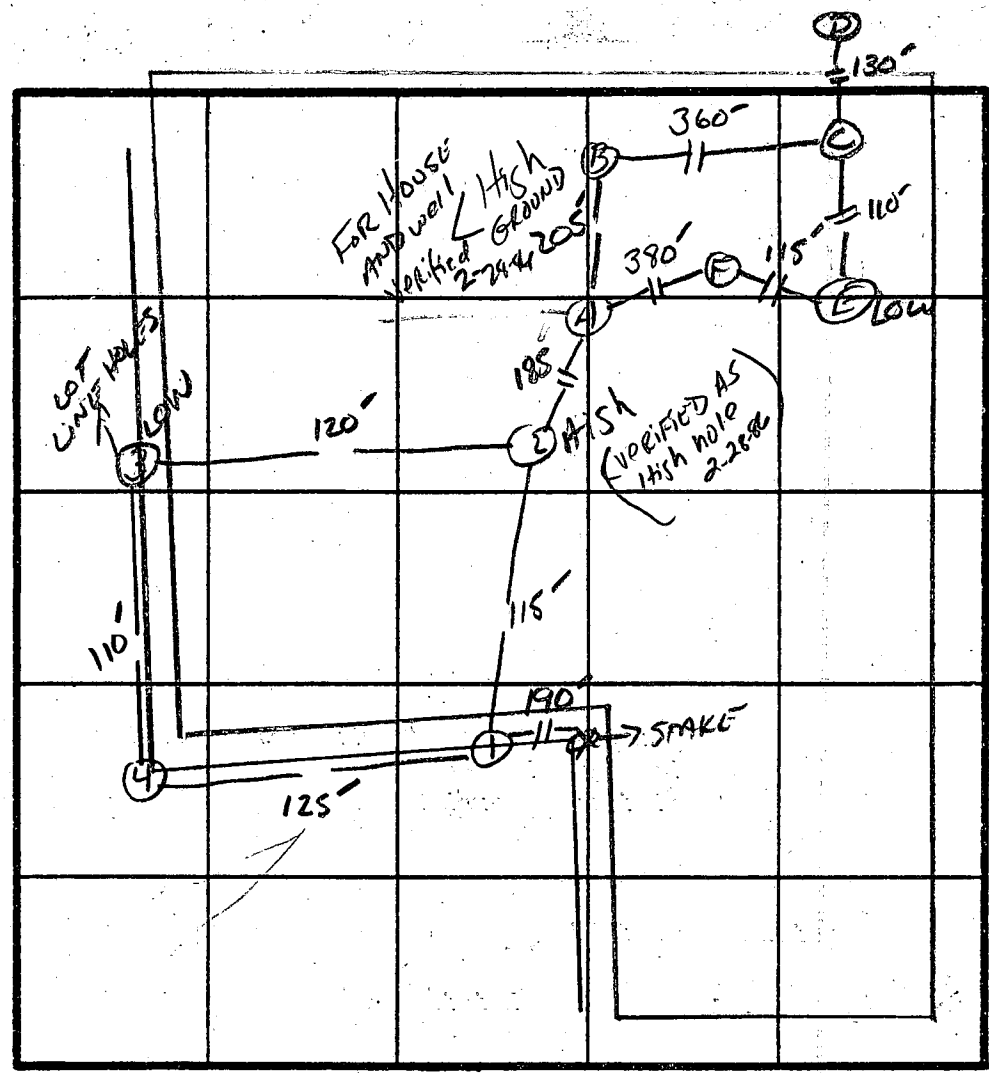
BLDG. PERMIT SIGNED
AND RETURNED 3/28/88
BP 17398

THIS IS NOT A PERMIT

LABORATORY
SOILS

① ②
SOIL PROFILE

0"	AP
9"	REDBROWN CLAY LOAM 20+ % SAPROXITE
3'	RED BROWN SHALY SAND LOAM 20-30% SAPROXITE
12'	



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

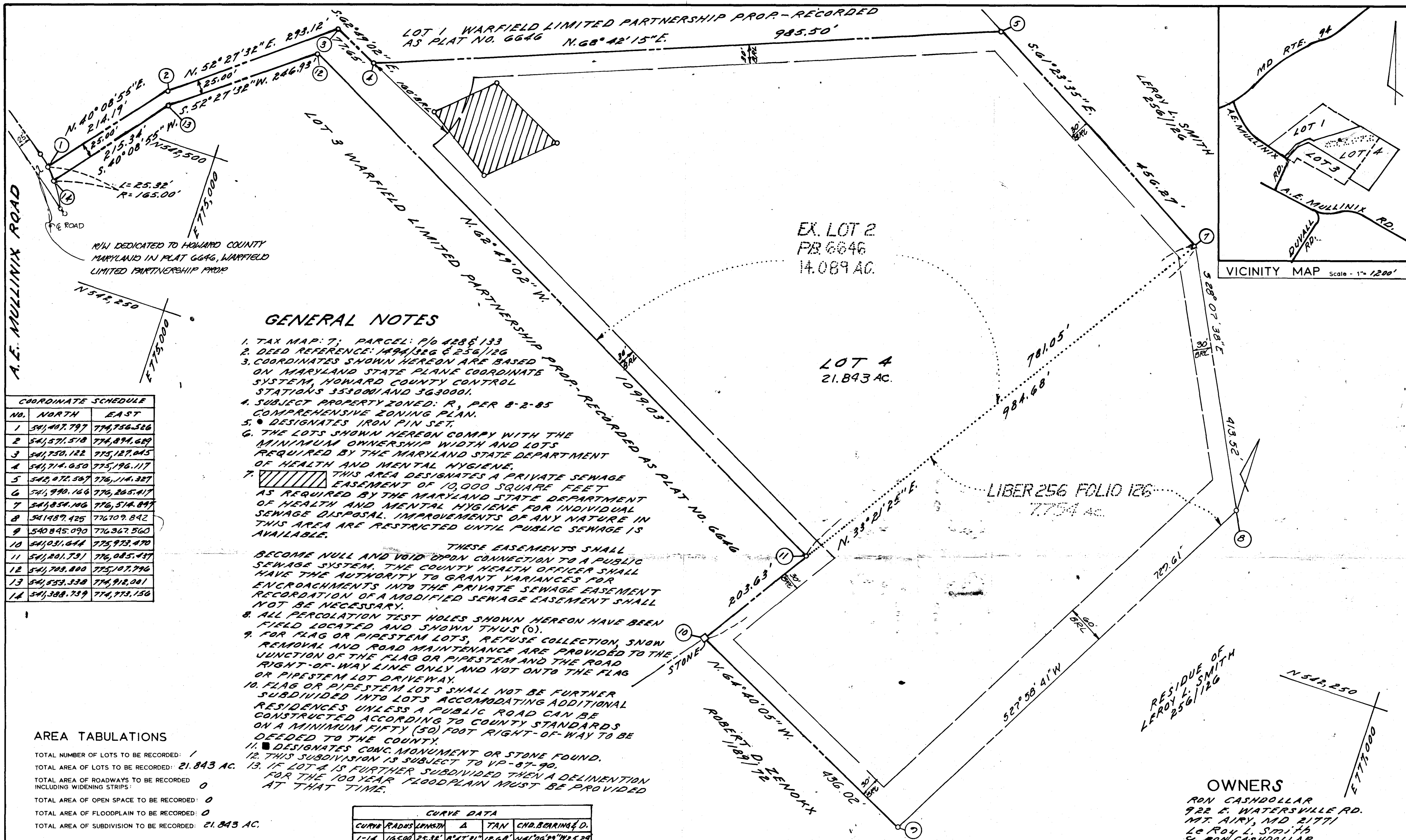
DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
5/10/85	1 ✓	3' 12'	11:03	11:12	11:12	12:31	19 MIN
	2 ✓	3.5' 12'	11:08	11:10	11:10	11:16	6 MIN
	3 ✓	4.5' 12'	10:54	10:56	10:56	11:00	4 MIN
	4 ✓	12'					
							MOLE 3
	A	ROCK AT 6.5' CLAY TO 6'					
	B	ROCK AT 5' CLAY TO 5'					
	C	ROCK AT 10' CLAY TO 4'					
	D	WATER AT 8' CLAY TO 6'					
	E	WATER AT 5' CLAY TO 5'					
	F	ROCK AT 8' CLAY TO 5'					

REMARKS _____

TYPE OF SOIL _____

TESTED BY Abel ALSO PRESENT SKIP JACK FLOCK

EH-12-1079



GENERAL NOTES

- TAX MAP: 7; PARCEL: P/O 428 & 133
- DEED REFERENCE: 1494/186 & 256/126
- COORDINATES SHOWN HEREON ARE BASED ON MARYLAND STATE PLANE COORDINATE SYSTEM, HOWARD COUNTY CONTROL STATIONS 3530001 AND 3630001.
- SUBJECT PROPERTY ZONED: R, PER 8-2-85 COMPREHENSIVE ZONING PLAN.
- DESIGNATES IRON PIN SET.
- THE LOTS SHOWN HEREON COMPLY WITH THE MINIMUM OWNERSHIP WIDTH AND LOTS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF HEALTH AND MENTAL HYGIENE.
- THIS AREA DESIGNATES A PRIVATE SEWAGE EASEMENT OF 10,000 SQUARE FEET AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF HEALTH AND MENTAL HYGIENE FOR INDIVIDUAL SEWAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWAGE IS AVAILABLE.
THESE EASEMENTS SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENTS INTO THE PRIVATE SEWAGE EASEMENT RECORDATION OF A MODIFIED SEWAGE EASEMENT SHALL NOT BE NECESSARY.
- ALL PERCOLATION TEST HOLES SHOWN HEREON HAVE BEEN FIELD LOCATED AND SHOWN THUS (O).
- FOR FLAG OR PIPESTEM LOTS, REFUSE COLLECTION, SNOW REMOVAL AND ROAD MAINTENANCE ARE PROVIDED TO THE JUNCTION OF THE FLAG OR PIPESTEM AND THE ROAD RIGHT-OF-WAY LINE ONLY AND NOT ONTO THE FLAG OR PIPESTEM LOT DRIVEWAY.
- FLAG OR PIPESTEM LOTS SHALL NOT BE FURTHER SUBDIVIDED INTO LOTS ACCOMMODATING ADDITIONAL RESIDENCES UNLESS A PUBLIC ROAD CAN BE CONSTRUCTED ACCORDING TO COUNTY STANDARDS ON A MINIMUM FIFTY (50) FOOT RIGHT-OF-WAY TO BE DEEDED TO THE COUNTY.
- DESIGNATES CONC. MONUMENT OR STONE FOUND.
- THIS SUBDIVISION IS SUBJECT TO VP-87-90.
- IF LOT 4 IS FURTHER SUBDIVIDED THEN A DELINEATION FOR THE 100 YEAR FLOODPLAIN MUST BE PROVIDED AT THAT TIME.

NO.	NORTH	EAST
1	541,407.797	774,756.326
2	541,571.518	774,894.629
3	541,750.122	775,127.045
4	541,714.650	775,196.117
5	541,872.587	776,114.327
6	541,990.166	776,265.417
7	541,854.106	776,514.897
8	541,487.425	776,709.842
9	540,845.090	776,367.560
10	541,031.644	775,973.470
11	541,201.731	776,085.437
12	541,703.800	775,107.796
13	541,533.338	774,912.081
14	541,388.739	774,773.156

AREA TABULATIONS

TOTAL NUMBER OF LOTS TO BE RECORDED: 1
 TOTAL AREA OF LOTS TO BE RECORDED: 21.843 AC.
 TOTAL AREA OF ROADWAYS TO BE RECORDED INCLUDING WIDENING STRIPS: 0
 TOTAL AREA OF OPEN SPACE TO BE RECORDED: 0
 TOTAL AREA OF FLOODPLAIN TO BE RECORDED: 0
 TOTAL AREA OF SUBDIVISION TO BE RECORDED: 21.843 AC.

CURVE	RADIUS	LENGTH	Δ	TAN	CHD. BEARING & D.
1-14	165.00'	25.32'	8°27'31"	18.68'	N41°06'29"W 25.32'

APPROVED: FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS.
 HOWARD COUNTY HEALTH DEPARTMENT
Grace M. Bynum
 HOWARD COUNTY HEALTH OFFICER DATE

APPROVED: HOWARD COUNTY OFFICE OF PLANNING AND ZONING
William G. Hartel
 PLANNING DIRECTOR DATE 12.10.87

APPROVED: FOR STORM DRAINAGE SYSTEMS AND PUBLIC ROADS.
 HOWARD COUNTY DEPARTMENT OF PUBLIC WORKS
James M. ...
 DIRECTOR DATE 12/1/87

OWNER'S STATEMENT
 Ronald L. Cashdollar, LeRoy L. Smith, Margaret C. Cashdollar and Madeline D. Smith, owners of the property shown and described hereon, hereby adopt this plan of subdivision, and in consideration of the approval of this final plat by the Office of Planning and Zoning, establish the minimum building restriction lines and grant unto Howard County, Maryland, its successors and assigns, 1) the right to lay, construct and maintain sewers, drains, water pipes and other municipal utilities and services, in and under all roads and street rights-of-way and the specific easement areas shown hereon, 2) the right to require dedication for public use, the beds of the streets and/or roads and floodplains and open space where applicable, and for good and other valuable consideration, hereby grant the right and option to Howard County to acquire the fee simple title to the beds of the streets and/or roads and floodplains, storm drainage facilities and open space where applicable, 3) the right to require dedication of waterway and drainage easements for the specific purpose of their construction, repair and maintenance, and 4) that no building or similar structure of any kind shall be erected on or over the said easements and rights-of-way.
 Witness my/our hands this ___ day of _____
Ronald L. Cashdollar *LeRoy L. Smith*
Margaret C. Cashdollar *Madeline D. Smith*
 WITNESS WITNESS

SURVEYOR'S CERTIFICATE
 I hereby certify that the final plat shown hereon is correct, that it is the resubdivision of all of the lands conveyed by *Warfield Limited Partnership to Ronald L. Cashdollar and Margaret C. Cashdollar his wife, by deed dated June 20, 1986 and recorded among the Land Records of Howard County, Maryland in Liber 1494 of Folio 326 (E) a subdivision of part of Lands conveyed by Robert D. Moore and wife, to LeRoy L. Smith and Madeline D. Smith, his wife, by deed dated May 3, 1954 and recorded among the aforesaid Land Records in Liber 256 of Folio 126 and that all monuments are in place as shown in accordance with the Annotated Code of Maryland, as amended.*
William G. Hartel 8-28-87
 William G. Hartel, Professional Land Surveyor, MD No. 9436 Date

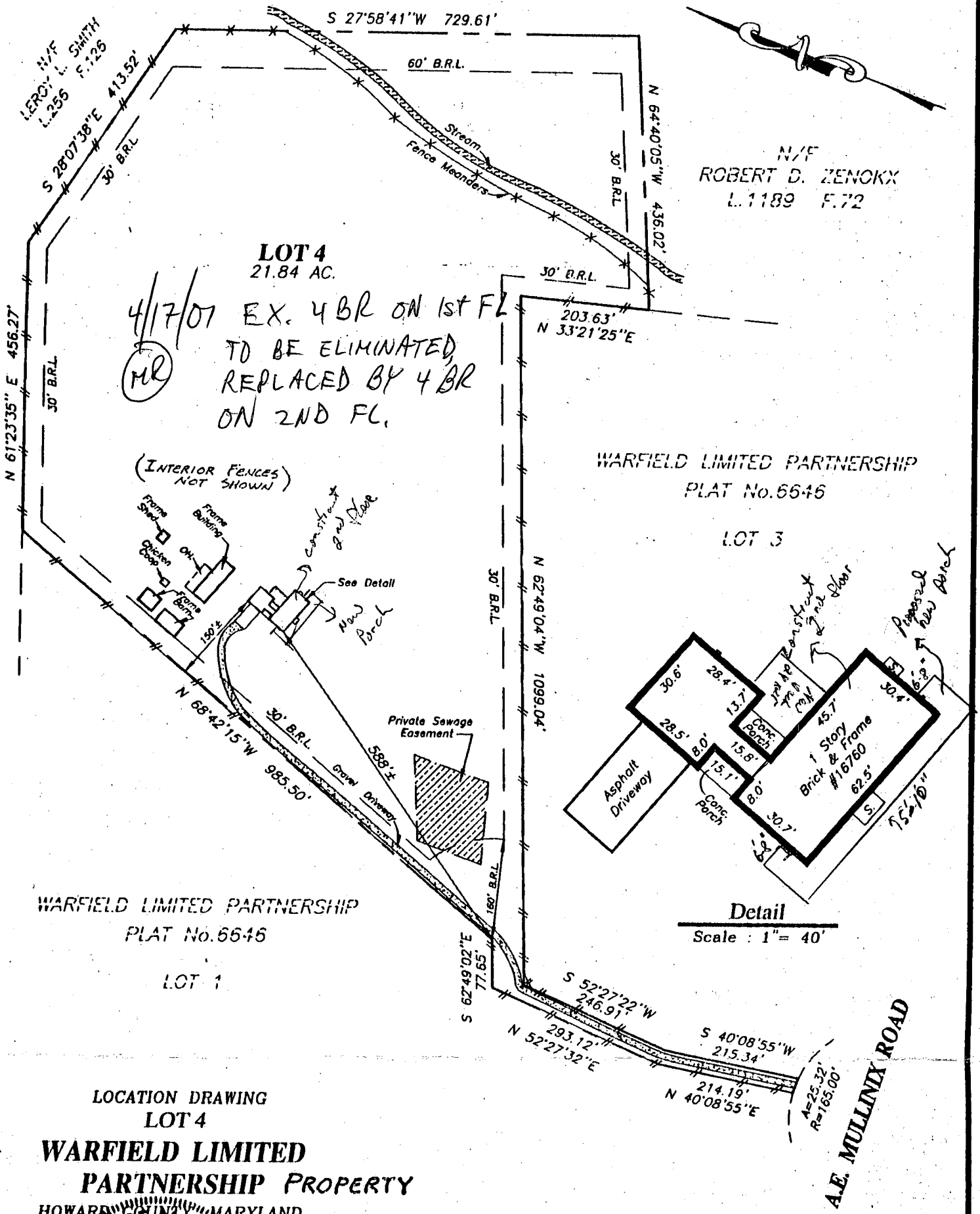
RECORDED AS PLAT 7536 ON 12/15/87 AMONG THE LAND RECORDS OF HOWARD COUNTY, MD.
SIGNED LOT 4 **FILE COPY**
WARFIELD LIMITED PARTNERSHIP
 PROPERTY F-88-57
 A RESUBDIVISION OF LOT 2 *Septic*
boender associates inc.
 consulting engineers
 land surveyors
 land planners
 COURTHOUSE SQUARE
 3565 ELLICOTT MILLS DRIVE
 ELLICOTT CITY, MD 21043
 (301) 465-7777

CONSUMER INFORMATION NOTES:

1. This plan is a benefit to a consumer insofar as it is required by a lender or a title insurance company or its agent in connection with contemplated transfer, financing or re-financing.
2. This plan is not to be relied upon for the establishment or location of fences, garages, buildings, or other existing or future improvements.
3. This plan does not provide for the accurate identification of property boundary lines, but such identification may not be required for the transfer of title or securing financing or re-financing.
4. Building line and/or Flood Zone information is taken from available sources and is subject to interpretation of originator.

Setback distances as shown to the principal structure from property lines are approximate. The level of accuracy for this drawing should be taken to be no greater than plus or minus 2 feet.

Flood Zone "C" per H.U.D. Flood Panel No. 240044-0007B.



WARFIELD LIMITED PARTNERSHIP
PLAT No. 6546

LOT 1

Detail
Scale : 1" = 40'

LOCATION DRAWING
LOT 4

**WARFIELD LIMITED
PARTNERSHIP PROPERTY**


HOWARD ROAD, MARYLAND

A.E. MULLINIX ROAD

SURVEYOR'S CERTIFICATE
THE INFORMATION SHOWN HEREON HAS BEEN BASED UPON THE RESULTS OF A FIELD INSPECTION PURSUANT TO THE DEED OR DEED OF RECORD. EXISTING STRUCTURES SHOWN HAVE BEEN FIELD LOCATED BASED UPON MEASUREMENTS FROM PROPERTY MARKERS FOUND OR FROM EVIDENCE OF LINES OF APPARENT OCCUPATION.

[Signature]
MARYLAND PROPERTY AND SURVEYOR REG. NO. 587

REFERENCES	
PLAT BK.	
PLAT NO.	7536
LIBER	1780
FOLIO	54

		SNIDER & ASSOCIATES SURVEYORS - ENGINEERS LAND PLANNING CONSULTANTS 2 Professional Drive, Suite 216 Gaithersburg, Maryland 20879 301/948-6100, Fax 301/948-1288	
		DATE OF LOCATIONS	SCALE: 1" = 200'
WALL CHECK:		DRAWN BY:	V.G.S.
ISE. LOC.: 11-28-00		JOB NO.:	00-4846

**HOWARD COUNTY
 PERMIT APPLICATION**

PERMIT NUMBER ✓

B00129151

Building Address 16760 AE Mullinix Road
1. Mullinix Rd #10 21797
 Suite/Apt. #: N/A SDP/WP/Petition #: N/A
 Census Tract 6040 Subdivision Warfield Partnership
 Section 3 Area N/A Lot 4
 Tax Map 7 Parcel 506 Grid 22
 Zoning RC-DEP Map Coordinates 9C13 Lot size 21,476

Property Owner's Name Donald & Theresa DiAmato
 Address 15000 Laurel Lane
 City Silver Spring State MD Zip Code 20905
 Home Phone (301) 291-1000 Work Phone (301) 484-9370
 Applicant's Name & Mailing Address, (if other than stated hereon):

Existing Use SFD
 Proposed Use SFD with 2nd floor porch
 Estimated Construction Cost \$ 150,000.00
 Description of Work Remove existing roof and add 2nd floor and add covered front porch & open deck

Contractor Company Barnard Bros. Const.
 Contact Person Garry M. Barnard
 Address 1612 Beetle Glass Co. Way
 City Washington State MD Zip Code 21792
 License No. MB 22 # 17816
 Phone (410) 484-7001 Fax (410) 484-7001

Occupant or Tenant
 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: <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"/> 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: <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	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"/> Depth Width	Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
1st floor: 2nd floor: Basement:	Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms _____	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Heating System: Electric <input checked="" type="checkbox"/> Oil <input checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Other Structure: _____ Dimensions: _____ Footings: _____ Roof: _____	Sprinkler system: <u>N/A</u> <input checked="" type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other:
<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 THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Garry M. Barnard
 Applicant's Signature
Barnard Bros Const. Inc.
 Title/Company

Garry M. Barnard
 Print Name
3/23/01
 Date

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
 ** PLEASE WRITE NEATLY AND LEGIBLY. **

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#
Land Development, DPZ			Front _____ Rear _____ Side _____ Side St _____	50912
State Highways			All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	Billing fee \$ <u>25</u>
Building Official			Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Permit fee \$ _____
Dev. Engineering, DPZ	<u>4/17/01</u>	<u>Mark Reple</u>	Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Excise tax \$ _____
Health			Lot Coverage for NewTown Zone _____	Add'l per. fee \$ _____
Fire Protection			SDP/Red-line approval date _____	TOTAL FEES \$ _____
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>				Sub-total paid \$ _____
CONTINGENCY CONSTRUCTION START <input type="checkbox"/>				Balance due \$ _____
ONE STOP SHOP <input type="checkbox"/>				Check # _____
Distribution of Copies - White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA				Validation # _____
				Accepted by _____

SCALE:
1"=200'

N/F
ROBERT D. ZENOKX
L. 1109 F. 72

LOT 4
21.84 AC.

WARFIELD LIMITED PARTNERSHIP
PLAT No. 6646.

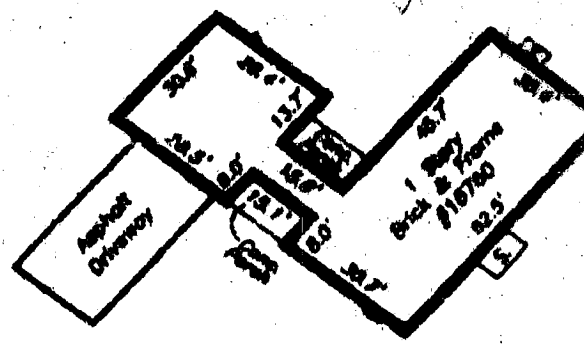
LOT 3

WARFIELD LIMITED PARTNERSHIP
PLAT No. 6646

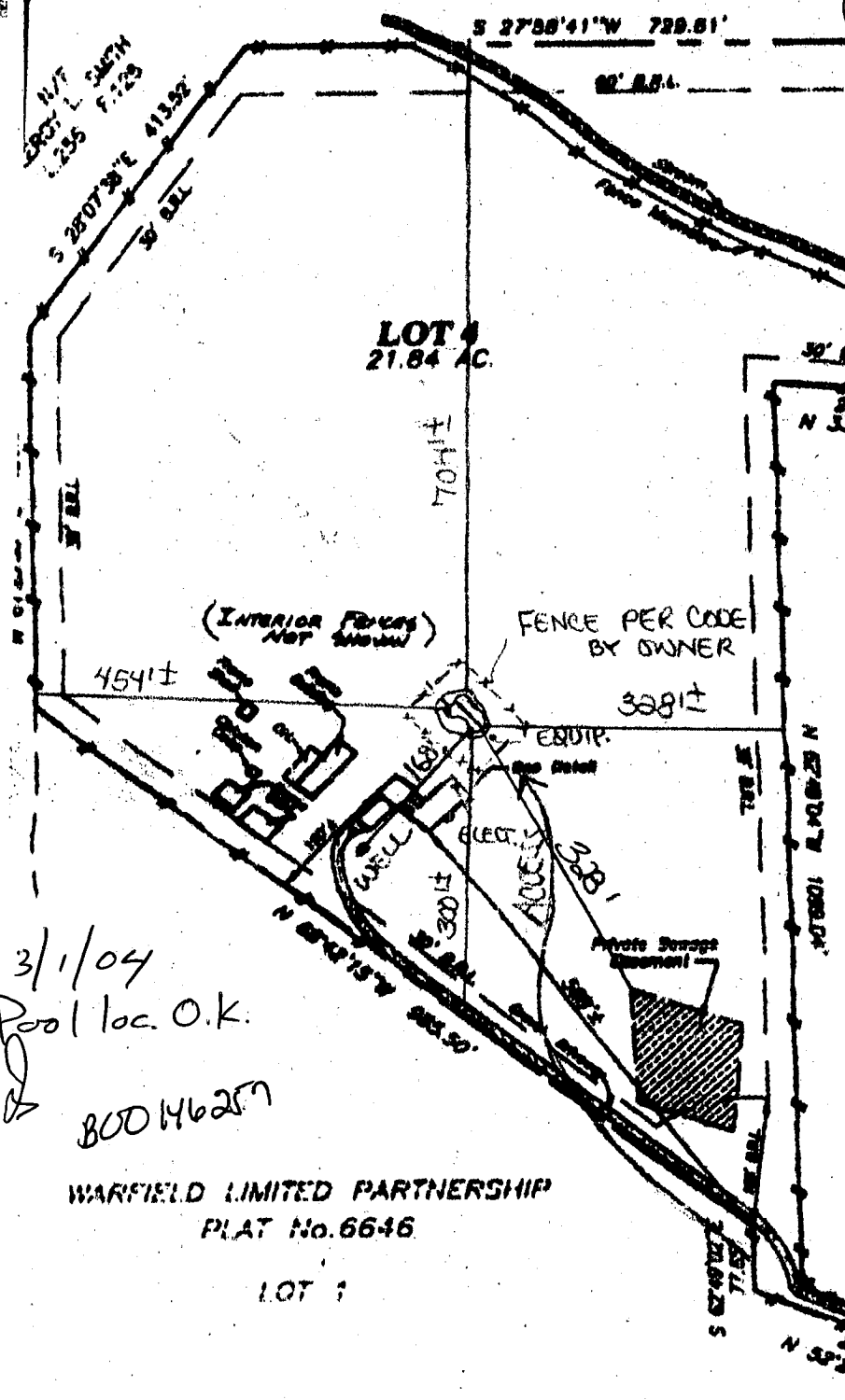
LOT 1

LOCATION DRAWING
LOT 4

WARFIELD LIMITED
PARTNERSHIP PROPERTY
HOWARD COUNTY, MARYLAND



Detail
Scale: 1"=40'



3/1/04
Pool loc. O.K.
800 46257