

10-23-87
11AM

WP1
+ N

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

P 40254

A 32451

DISTRICT 5th

DATE 10/13/87

DATE SYSTEM APPROVED 10/26/87

INSPECTOR C. Williams

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED

05-374588

Paul Schissler IS PERMITTED TO INSTALL ALTER

ADDRESS 4410 Salem Bottom Road, Westminster, Maryland 21157 PHONE 531-2166

SUBDIVISION Glenelg Manor II ROAD 12769 Folly Quarter LOT 16A

PROPERTY OWNER ~~Bob Wallace~~ Simmons

ADDRESS _____

BUILDING PERMIT SIGNED

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

GARBAGE GRINDER? YES _____ NO

9-10-03 BOD 144020-IG POUL
9-15-03 BOD 144027-LPTANK-POUL HTR

SEPTIC TANK CAPACITY 1000 GALLONS NUMBER OF BEDROOMS 3

TRENCHES - 180 sq. ft. per bedroom. Trench to be 3 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 5 feet below original grade. Effective area begins at 3 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Start the first trench 220 feet from the front lot line and 25 feet from the right (490') lot line as seen when facing the property from the right-of-way line. Run trenches along contour toward back of lot.

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

OH

PLANS APPROVED BY C. Williams DATE 6/02/87 Revised

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.

BUDG. PERMIT SIGNED
AND RETURNED 11/6/90
Qual # 30982-100

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.

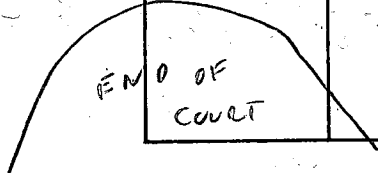
***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1186

A-38451

**BUILDING PERMITTED
AND RETURNED**



INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.

SEPTIC TANK. LEVEL ✓ CLEANOUTS ST ✓

DISTRIBUTION BOX. LEVEL ✓

DRAIN FIELD/TILE FIELD. DEPTH 5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 180 FT.

NUMBER OF TRENCHES 3 (60+60+60) ONE SIDEWALL/BOTTOM AREA 540 SQ. FT.

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

ABSORBENT AREA 540 SQ. FT.

REMARKS OK TO COVER 10/26/87 CWL

DATE SYSTEM APPROVED 10/26/87

INSPECTOR Craig Williams

PRELIMINARY

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

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

A 32451

P _____

DISTRICT 5th

DATE 2/3/83

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 John D. and Ruth D. Rettaliata

ADDRESS 4300 Heritage Hill Lane, Ellicott City, Md. PHONE 465-4920

PROPERTY LOCATION:

SUBDIVISION Glenelg Manor II LOT NO. 16A

ROAD AND DESCRIPTION off Folly Quarter Road

SIZE OF LOT 8.401 acres 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/ John F. Rettaliata
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

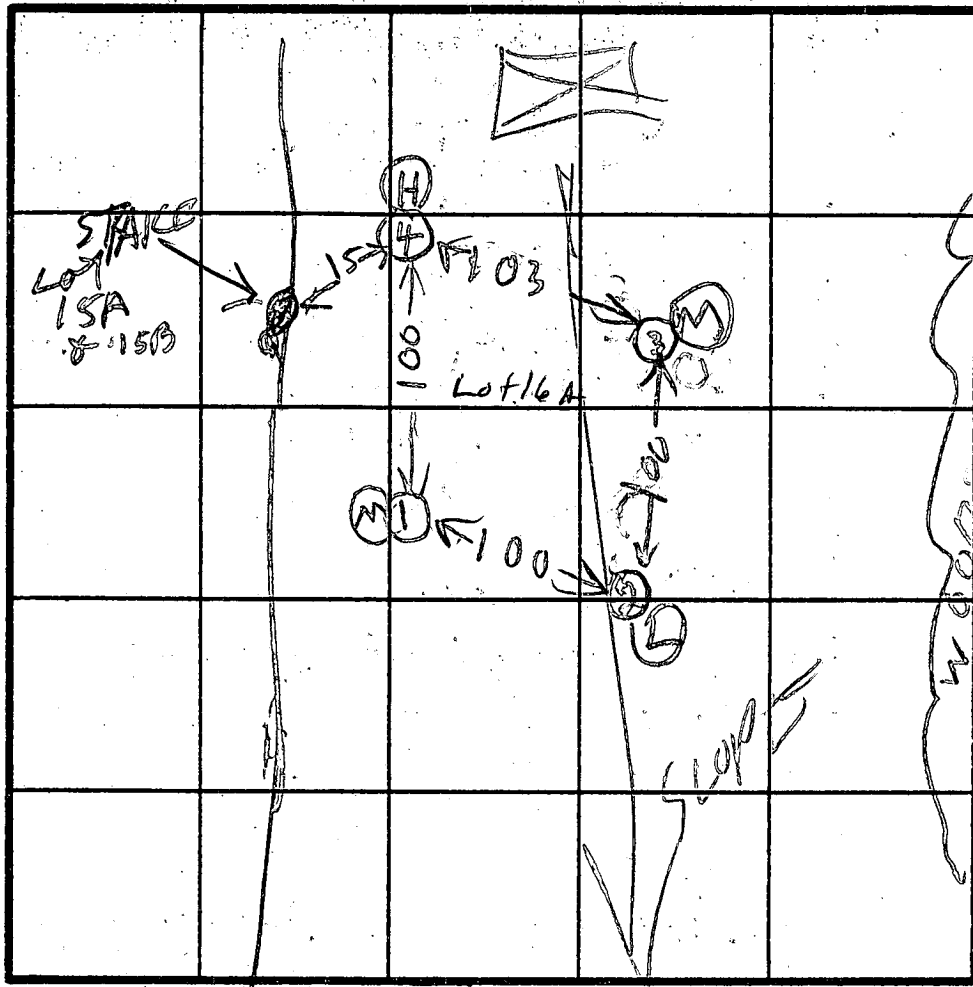
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

2

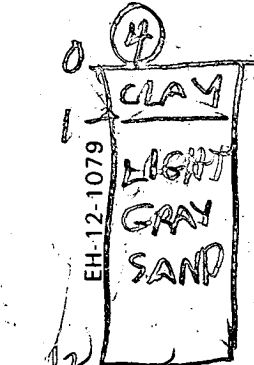
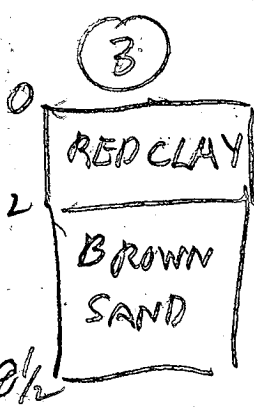
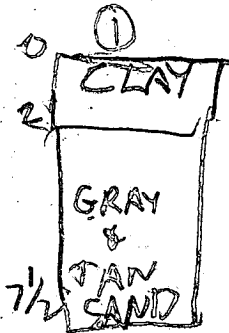
SOIL PROFILE



SEE PLAT

HOLE ELEVATION

- ④ = HIGHEST
- ② = LOWEST
- ①③ = MEDIUM



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2/4/03	1 S	3 1/2	225	227	227	232	5
	1 V	12	LOOKS	OK	SEE	SOIL PROFILE	
	2 S	3	234	235	235	239	4
	2 V	12	LOOKS	OK	SEE	PROFILE	
	3 S	3	240	244	244	247	3
	3 V	9 1/2	LOOKS	OK	SEE	SOIL PROFILE	
	4 S	3	242	243	243	246	3
	4 V	12	LOOKS	OK	SEE	PROFILE	

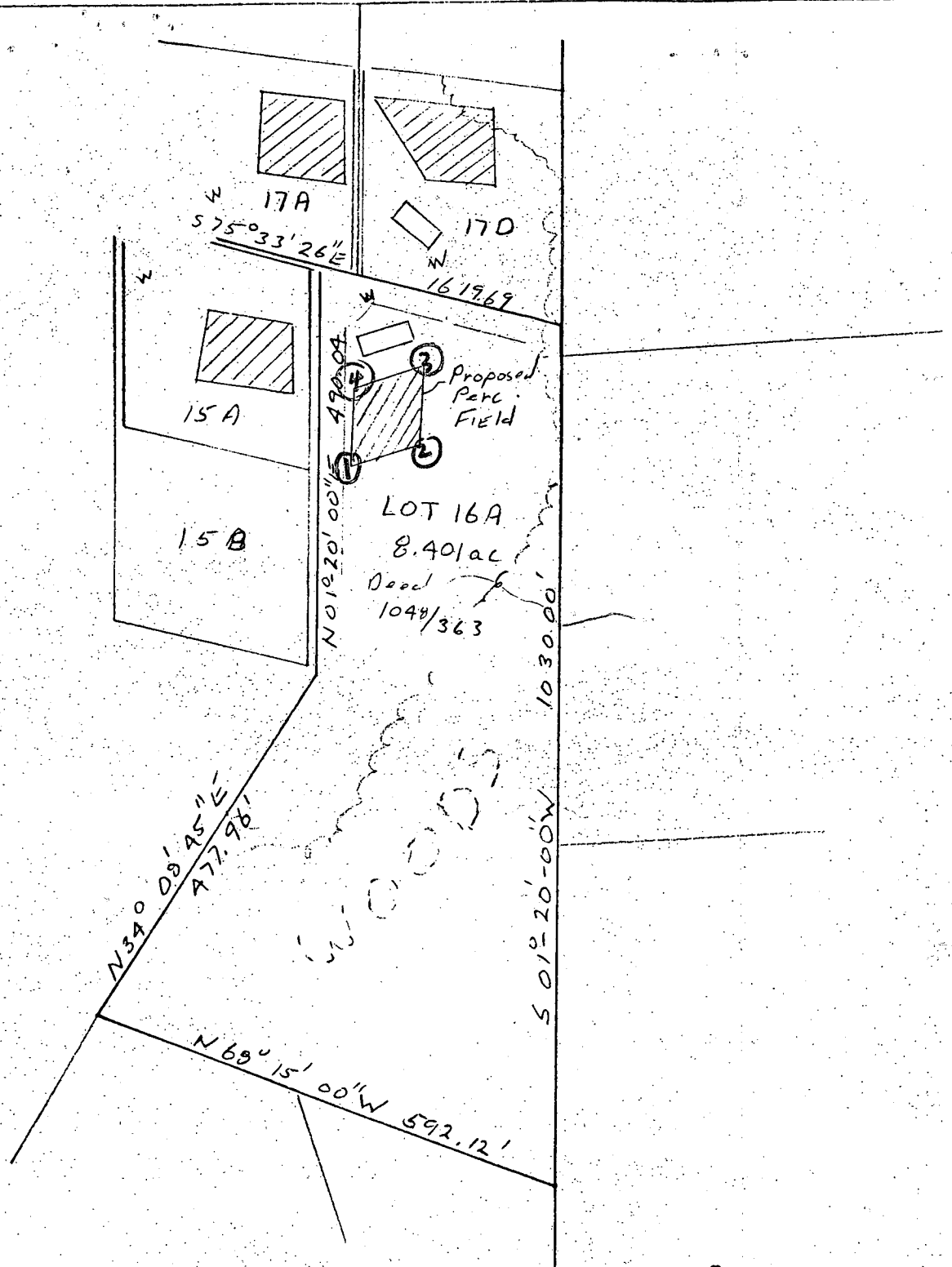
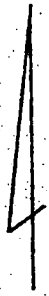
REMARKS Tile field only

TYPE OF SOIL _____

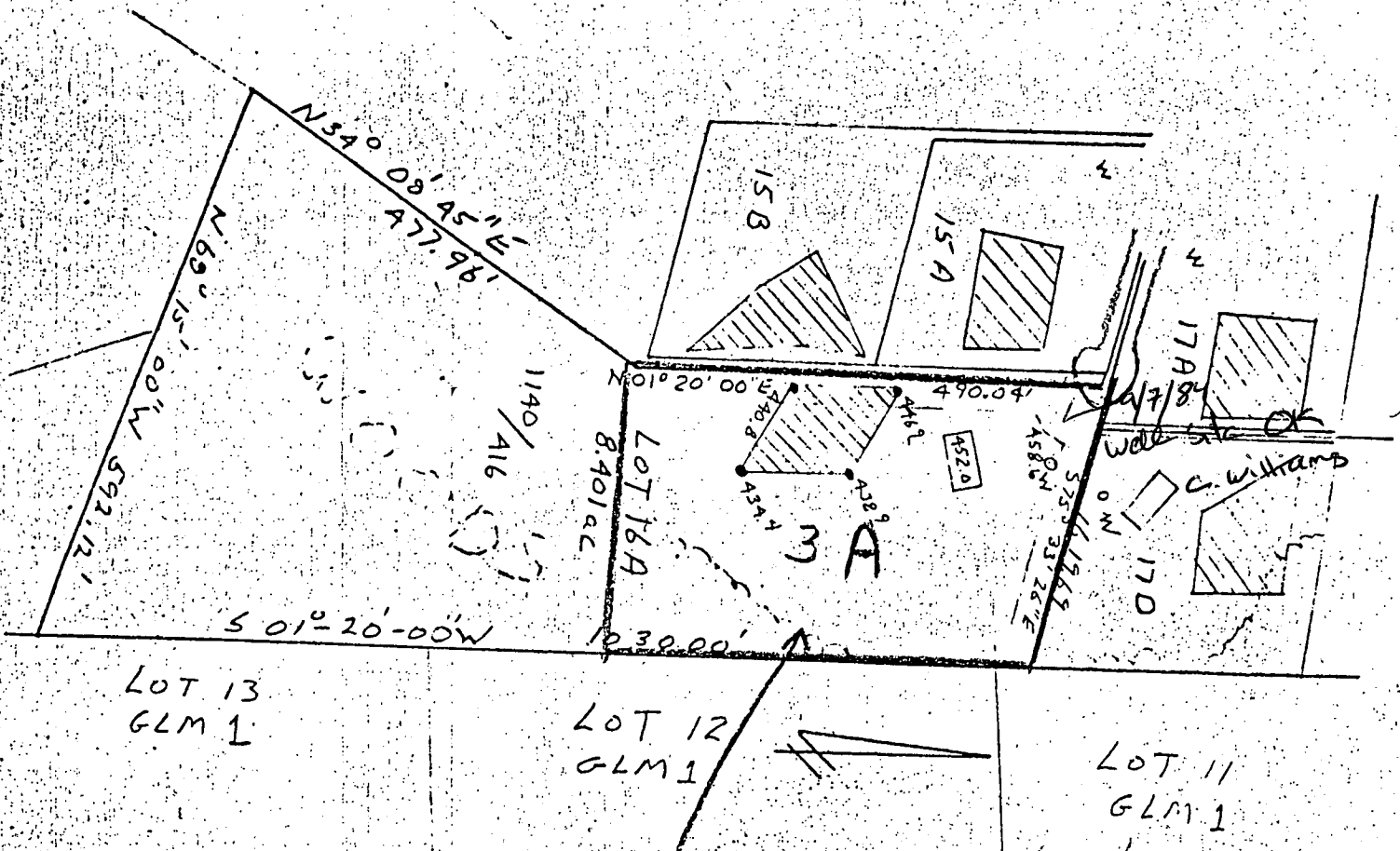
TESTED BY R HODGES

ALSO PRESENT OKETTERMAN

EH-12-1079



PROPOSED
 PERC TEST
 PARCEL 16A
 GLENELG MANOR
 SECTION II
 SCALE 1"=200' DATE 2/1/83



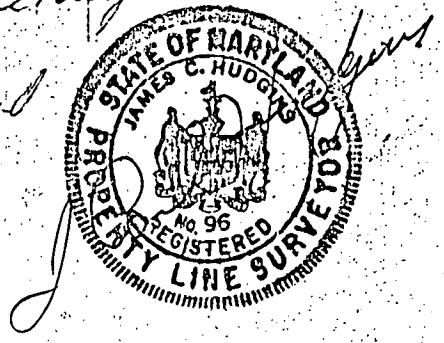
LOT 13
GLM 1

LOT 12
GLM 1

LOT 11
GLM 1

JMC, JLL

*3 acres that is the subject
of the contract of sale between
John J. Ruch & Rita L. Ruch (sellers) and
John W. Howard & Susan H. Hershey.*



[Hatched Area] 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.

PERCOLATION TEST PLAT

PARCEL 16A

GLENELG MANOR

Section Two

5th Election District
Howard County, Maryland
Scale 1"=200'
Date 3/28/83

Percolation test holes shown hereon have been field located and shown as "⊕".

The lots shown hereon comply with the minimum ownership width and lot areas as required by the Maryland State Department of Health and Mental Hygiene.

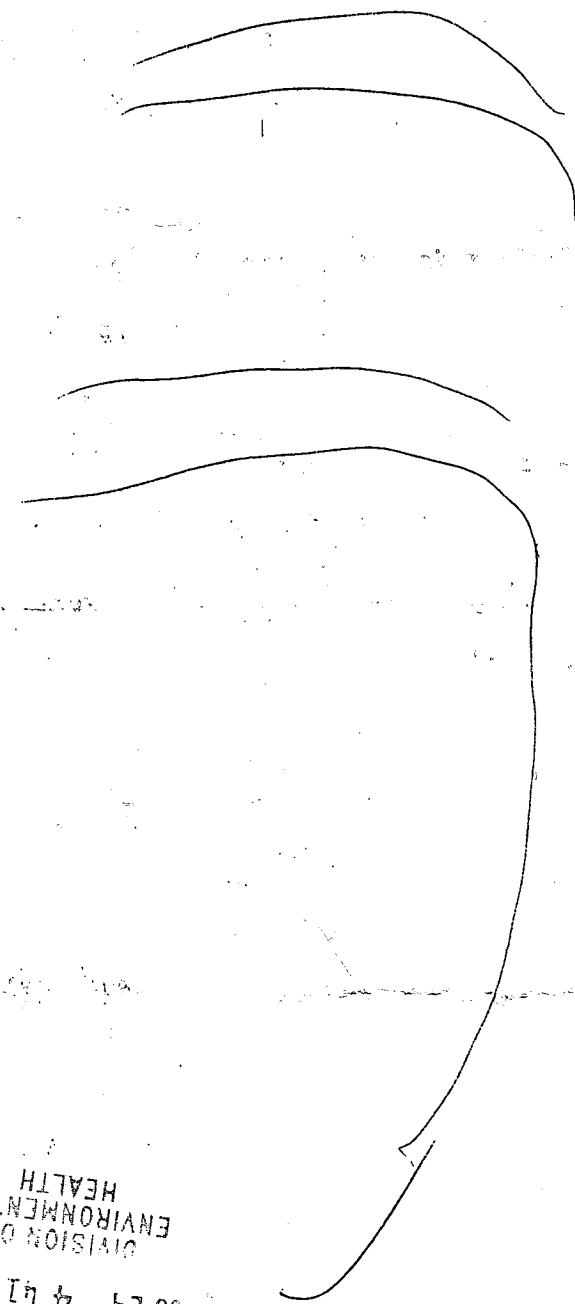
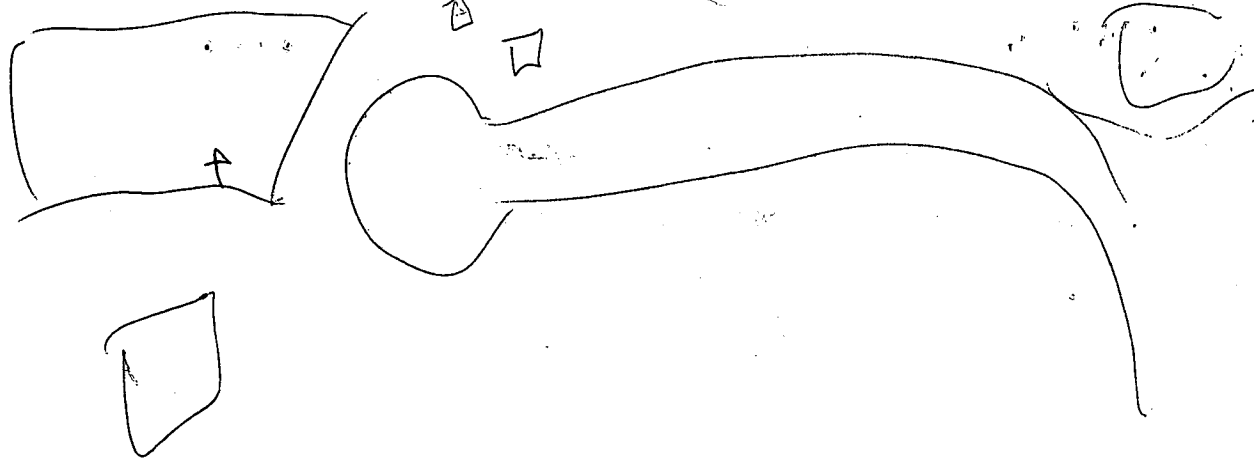
Percolation areas and water wells for adjoining lots have been shown where pertinent.

APPROVED: For Private Water and Private Sewage Systems

John W. Howard
County Health Officer

7-14-83
Date

NTT Associates
101 Sterrett Place
Columbia, MD 21044
321-0307



DIVISION OF ENVIRONMENTAL HEALTH

JUN 24 4 41 PM '81

RECORDED
HOWARD COUNTY HEALTH DEPT.

243-2907

JAY KERSHAW
612 WEST 33rd ST.
BALTO., MD. 21211

PRIVATE WELL & SEPTIC

REAR PL	1'
SIDE PL	30'
HOUSE	10'
SEPTIC	20'
WELL	10'

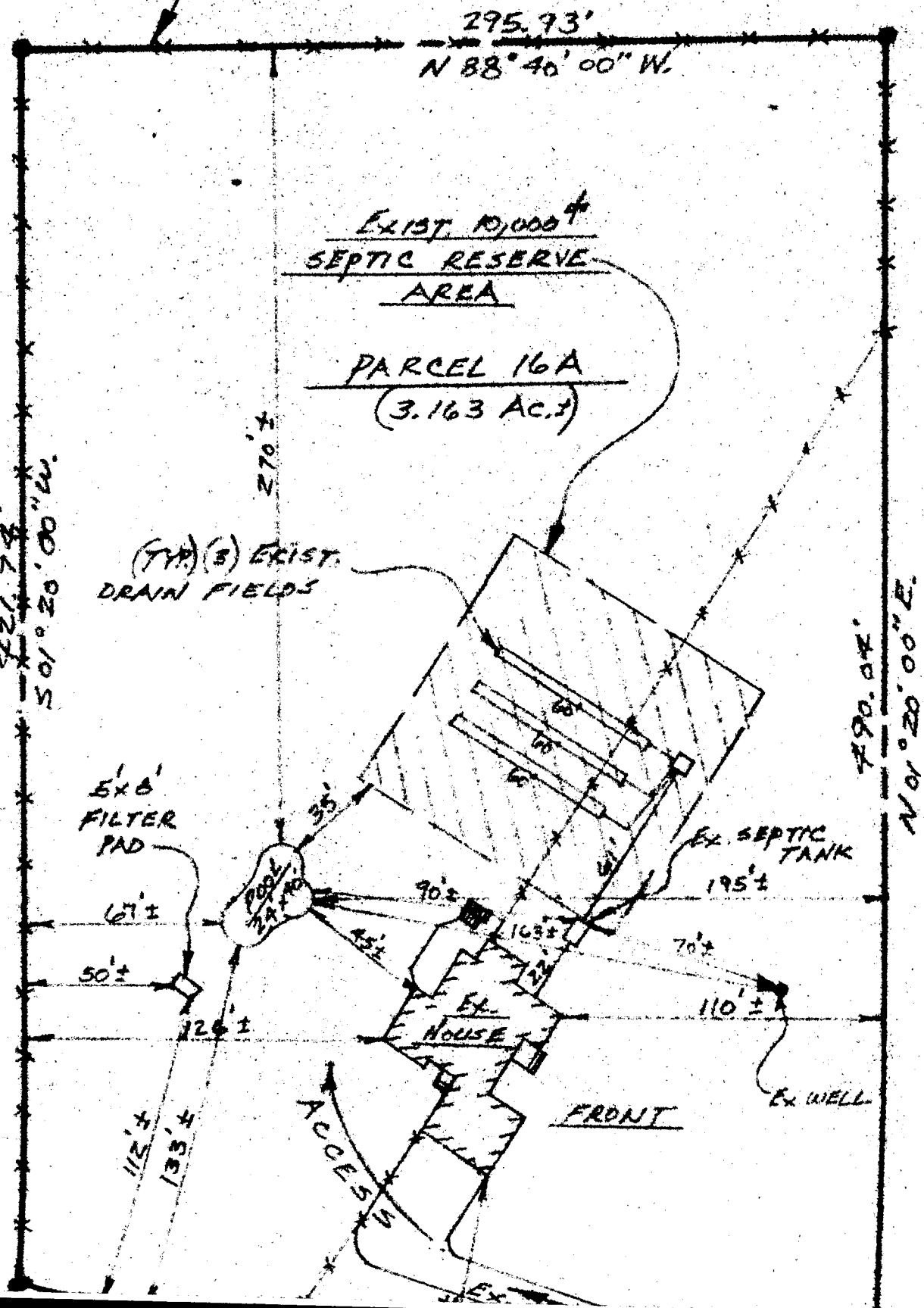
NOTE:

A VACUUM BRKA WILL BE INSTALLED AS REQ'D.

FENCE DATA:

Prop EXIST. 5' HIGH POST/RAIL FENCE W/WIRE MESH AS PER PREVIOUS CODE

No Impact on well & septic
OK to proceed
1/16/90
C. Williams



EXIST. 10,000⁺ SEPTIC RESERVE AREA

PARCEL 16A (3.163 AC.)

(TYP.) (3) EXIST. DRAIN FIELDS

5x8 FILTER PAD

POOL

EXIST. HOUSE

EXIST. SEPTIC TANK

EXIST. WELL

ACCESS W

FRONT

226.78'
S 01° 20' 00" W

270' ±

790.04'
N 01° 20' 00" E

295.93'
N 88° 40' 00" W

67' ±

50' ±

126' ±

112' ±

133' ±

35'

90' ±

45'

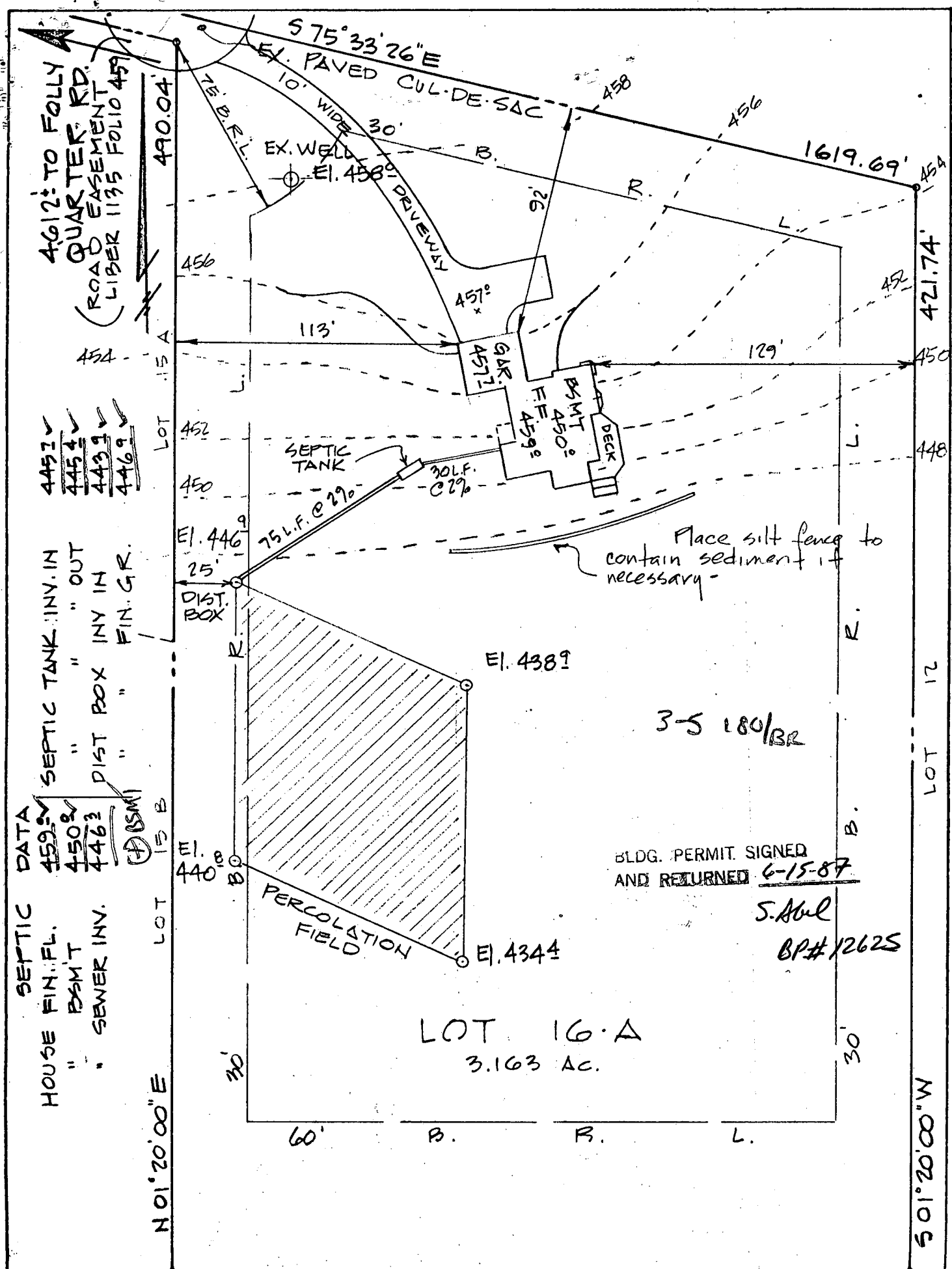
163' ±

70' ±

110' ±

195' ±

5' EX.



4612 TO FOLLY
 QUARTER RD.
 ROAD EASEMENT
 LIBER 1135 FOLIO 457

4451 ✓
 4454 ✓
 4431 ✓
 4469 ✓

SEPTIC TANK INV. IN
 " " " OUT
 DIST BOX INV IN
 " " " FIN. GR.

SEPTIC DATA
 HOUSE FIN. FL. 459.0
 " BSM'T 450.2
 " SEWER INV. 446.3
 (BSM)

BLDG. PERMIT SIGNED
 AND RETURNED 6-15-87

S. Abel
 BP# 12625

N 88° 40' 00" W

Note: Perc field location and elevations shown taken from plat prepared by NTT Assoc. 3/28/83.

ENGINEER
 John L. Schneider
 100 N. Rolling Road
 Catonsville, Md.
 744-1945 21228

GRADING STUDY

PARCEL 16-A GLENELG MANOR II

5th ELECTION DISTRICT
 HOWARD COUNTY - MD.

SCALE 1" = 50'

JUNE 4, 1987



B 1 **2755** 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
10-81-0714
 fill in this form completely

Date Received **9/11/84**
082484 OWNER INFORMATION
KEPSHAW JAY
 15 Last Name Owner First Name 34
612 WEST 33 STREET
 36 Street or RFD 55
BALTIMORE 57 Town **70** State 72 **21211** Zip 76

B 3 LOCATION OF WELL
HOWARD 8 COUNTY 21
GLENELG MANOR 23 SUBDIVISION 42
 SECTION **2** 44 46 LOT **16A** 48 50
GLENELG 52 NEAREST TOWN 71
 MILES FROM TOWN (enter 0 if in town) **1** 73 **M I** 76 77 78

DRILLER INFORMATION
Ralph Mayne 223
 Driller's Name 77 License No. 80
Ralph Mayne (well drilling)
 Firm Name
9120 Brown Church Rd. Mt. Airy
 Address
Ralph Mayne 8/22/84
 Signature Date

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE, BOX)
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
Folley Quarter Rd. 11 NEAR WHAT ROAD 30
 NORTH N
 WEST W EAST E
 SOUTH S
 34 **4000** 37 DISTANCE FROM ROAD
 ENTER FT or MI **4** 38 39

B 2 WELL INFORMATION
 1 2 APPROX. PUMPING RATE (GAL. PER MIN.) **5** 8 12
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **500** 14 20

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

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
HOWARD COUNTY NAME
A32451 COUNTY NO.
 OEP SIGNATURE _____ STATE HEALTH INSERT S 41
 DATE ISSUED **090789** CO SIGNATURE **Craig William** 3/7/84 EXP. DATE
 NORTH GRID **615000** 50 55 EAST GRID **0311000** 57 63

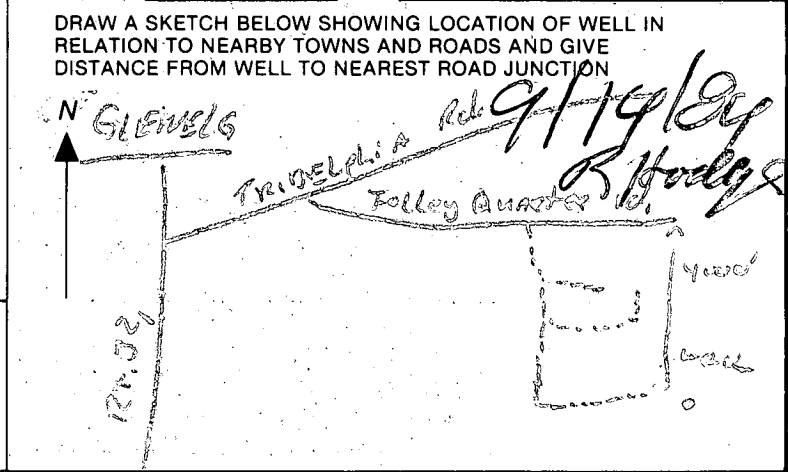
APPROXIMATE DEPTH OF WELL **150** 24 28 FEET

APPROXIMATE DIAMETER OF WELL **6** 30 34 INCH 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 _____

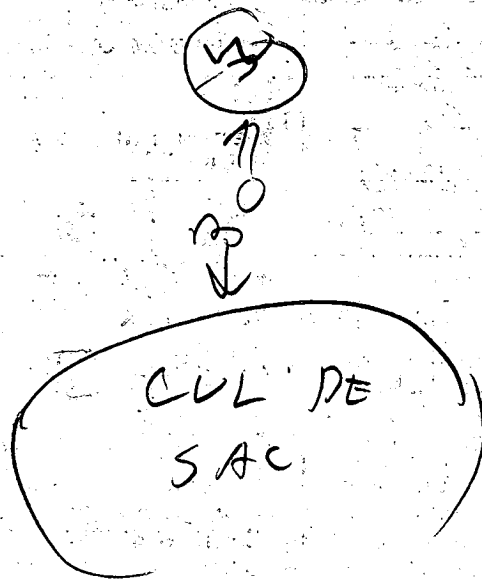
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
 SOURCES OF DRILLING WATER
 1. well
 2. well
 3. well
 WRITE THE BOX NUMBER FROM THE MAP HERE
 E **810**
 N **510**
 000 000

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)
 THIS WELL WILL NOT REPLACE AN EXISTING WELL
 THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
 THIS WELL WILL DEEPEM AN EXISTING WELL
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52



Not to be filled in by driller (OEP USE ONLY)
 APPROP. PERMIT NUMBER _____ 54 GAP _____ 63
 FORCE **24** WRITE INITIALS IN BOX PERMIT No. **10-81-0714**
 67 68 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS



- ① 26 FT CASING 2 FT OUT OF GROUND
- ② 22 FT OPEN HOLE MEASURED WITH A WEIGHTED ROPE ROPE BROKE WHEN WEIGHT STUCK IN HOLE & WOULD NOT BE PULLED OUT
- ③ 7 BARS
- ④ Well OK

9/14/84

B. J. Hodges

C1 2905

SEQUENCE NO. (OEP 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 32451

DATE RECEIVED

DATE WELL COMPLETED 091889

DEPTH OF WELL 220 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-81-0719

OWNER KERSHAW JAY last name first name

STREET OR RFD FOLLY QUARTER RD TOWN

SUBDIVISION GLEN EGG MANOR SECTION 2 LOT 16A

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. Rows include Top Soil, Sandy, Sand Stone, Micka, Sand Stone, Micka.

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle appropriate box) Y N

TYPE OF GROUTING MATERIAL

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 42 NO. OF POUNDS 300

GALLONS OF WATER DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 24 ft. (enter 0 if from surface)

CASING RECORD

ST CO PL OT STEEL CONCRETE PLASTIC OTHER

MAIN CASING TYPE PL 6 26

Nominal diameter top (main) casing (nearest inch) 6 26

Total depth of main casing (nearest foot) 26

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

SCREEN RECORD

ST BR HO PL OT STEEL BRASS OPEN HOLE PLASTIC OTHER

DEPTH (nearest ft.) HO 24 260

SCREEN RECORD table with columns 1-51

SLOT SIZE 1 2 3 DIAMETER OF SCREEN 56 60

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.) WQ 70 72 74 75 76 TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 6

PUMPING RATE (gal. per min. to nearest gal.) 3

METHOD USED TO MEASURE PUMPING RATE Blue knob

WATER LEVEL (distance from land surface) BEFORE PUMPING 20

WHEN PUMPING 35

TYPE OF PUMP USED (for test) A air P piston T turbine

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: 29

CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 35

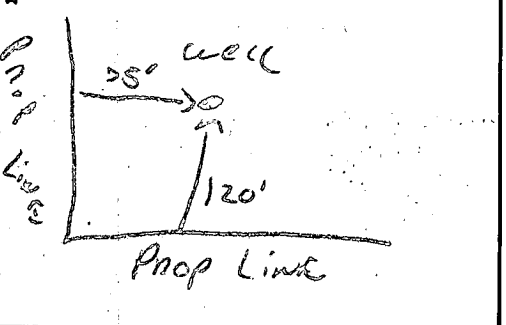
PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH (nearest ft.) 43 47

CASING HEIGHT (circle appropriate box and enter casing height) + above 49 - below 49

LAND SURFACE 2 (nearest foot) 50 51

LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)



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 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. 273 Ralph Mayzel

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) Ralph E. Mayzel

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

Page _____ of _____
 Date 9/18/84

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81 - 0714

Location of property (road) _____

Subdivision Glenely Manor

Lot 16A Block _____

Plat _____

Sec. _____

Well Driller Ralph Mayne

Owner Jay Kershaw

Depth of well 260 FT

Distance of measuring point (M.P.) above ground 2 FT

Static water level (S.W.L.) below M.P. 20 FT

High rate pumping -- reservoir drawdown

Time pump started 11.00

Pumping rate 9.6 P.M.

Total time 15 M.M. to reach pumping water level 35 ft. below M.P.

1. Recovery pump test data - observations to be recorded every 15 minutes

TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE time to fill 1 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
11:15	35 FT	20 sec	—	3 G.P.M.
11:30	35 FT	20 sec	—	3 G.P.M.
11:45	35 FT	20 sec	—	3 G.P.M.
12:00	35 FT	20 sec	—	3 G.P.M.
12:15	35 FT	20 sec	—	3 G.P.M.
12:30	35 FT	20 sec	—	3 G.P.M.
12:45	28 FT	20 sec	—	3 G.P.M.
1:00	35 FT	20 sec	—	3 G.P.M.
1:15	35 FT	20 sec	—	3 G.P.M.
1:30	35 FT	20 sec	—	3 G.P.M.
1:45	35 FT	20 sec	—	3 G.P.M.
2:00	35 FT	20 sec	—	3 G.P.M.
2:15	35 FT	20 sec	—	3 G.P.M.
2:30	35 FT	20 sec	—	3 G.P.M.
2:45	35 FT	20 sec	—	3 G.P.M.
3:00	35 FT	20 sec	—	3 G.P.M.
3:15	35 FT	20 sec	—	3 G.P.M.
3:30	35 FT	20 sec	—	3 G.P.M.
3:45	35 FT	20 sec	—	3 G.P.M.
4:00	33 FT	20 sec	—	3 G.P.M.
4:15	35 FT	20 sec	—	3 G.P.M.
4:30	35 FT	20 sec	—	3 G.P.M.
4:45	35 FT	20 sec	—	3 G.P.M.
5:00	35 FT	20 sec	—	3 G.P.M.
5:15	35 FT	20 sec	—	3 G.P.M.

26 FT PL. 7 berge

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

PUMP INSTALLATION

THE FOLLOWING STATEMENT MUST BE COMPLETED BY THE HOME OWNER
WHEN A PUMP IS INSTALLED BY A PERSON OTHER THAN THE WELL
DRILLER:

My well driller is not to install the pump for my water well, and I
hereby certify that it will be my responsibility to have a Pump Permit
taken out by a registered master plumber or certified pump installer.
It will be my responsibility to notify the Health Department before
and during the installation so that inspections can be made by their
representative. (Pursuant to Chapter XVII, of the Plumbing Code of
Howard County.)

John H. Kershaw *John H. Kershaw*
(Name)

612 WEST 33rd ST.
(Address)

H0-81-0714
(OEP Well Permit Number)

8/21/84
(Date)

Bert Nixon
10/31/94

APPLICATION

HOWARD COUNTY

PERMIT APPLICATION

DEPARTMENT OF INSPECTIONS, LICENSES & PERMIT

3430 COURT HOUSE DRIVE, ELLICOTT CITY, MARYLAND 21043

SERIAL NUMBER

57070

BUILDING ADDRESS (HOUSE NO., STREET, TOWN OR AREA)

12769 Folly Quarter Rd.
ELLICOTT CITY MD

GRADING/SEDIMENT CONTROL YES NO

SDP #

DESCRIPTION OF WORK AUTHORIZED

30' w/c overhang
& 48' BARN FOR STORAGE
OF HORSES

LOT NO. PARCEL NO. SEC. AREA BLOCK NO. LIBER FOLIO

16A

SUB DIVISION

Glebe Manor

ZONE

ZONE MAP

ELEC. DIST.

CENSUS TR.

OWNER NAME AND ADDRESS

Koye + William Simmons
12769 Folly Quarter Rd
ELLICOTT CITY MD 21042

PHONE NO.

410
531-5262

OCCUPANT'S NAME AND ADDRESS

SAME

PHONE NO.

ARCHITECT OR ENGINEER'S NAME AND ADDRESS

NONE

PHONE NO.

CONTRACTOR'S NAME AND ADDRESS

SAME

PHONE NO.

EXISTING USE

Single Family Dwelling

PROPOSED USE

SAME WITH BARN

EST. CONSTRUCTION COST

10,000

LICENSE NUMBER

PERMIT FEE

UTILITIES

WATER/WELL SEWER/SEPTIC GAS ELECTRICITY TYPE OF HEAT AC

I have carefully examined and read this application and know the same is true and correct, and that in doing this work, all provisions of Howard County Ordinances and the State Laws of Maryland will be complied with, whether specified or not; and I will notify the Department of Inspections, and Permits twenty-four hours in advance when I am ready for the inspections called for elsewhere in the application; and that no work will be covered up until such inspections have been, complied with.

William Simmons
SIGNATURE
Friend TITLE
Oct 25 94 DATE

W/S CODE

FOR OFFICE USE ONLY

DISTRICT IN FEET FROM R/W LINE TO FRONT BUILDING LINE

SIDE YARD

(DISTANCE IN FEET FROM SIDE BLDG. LINE TO SIDE PROPERTY LINE)

TO SIDE BUILDING LINE

DISTANCE IN FEET, REAR YD. REQUIRING SET

BACK

(CORNER LOT ONLY)

SDP #

Check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

CAUTION

To begin construction before a permit placard has been issued and displayed on the job is a violation of the law.

Use and occupancy permit must be applied for two weeks before it will be issued.

IMPORTANT: PLEASE SHOW ZIP CODES AND AREA CODES WHEREVER REQUIRED.

LP-69-591

FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING		
SHA		
SEDIMENT/GRADING		
BUILDING OFFICIAL		
WATER & SEWER		
HEALTH DEPT.		
FIRE PROTECTION		
STORM WATER MGM.		

APPROVED

DATE

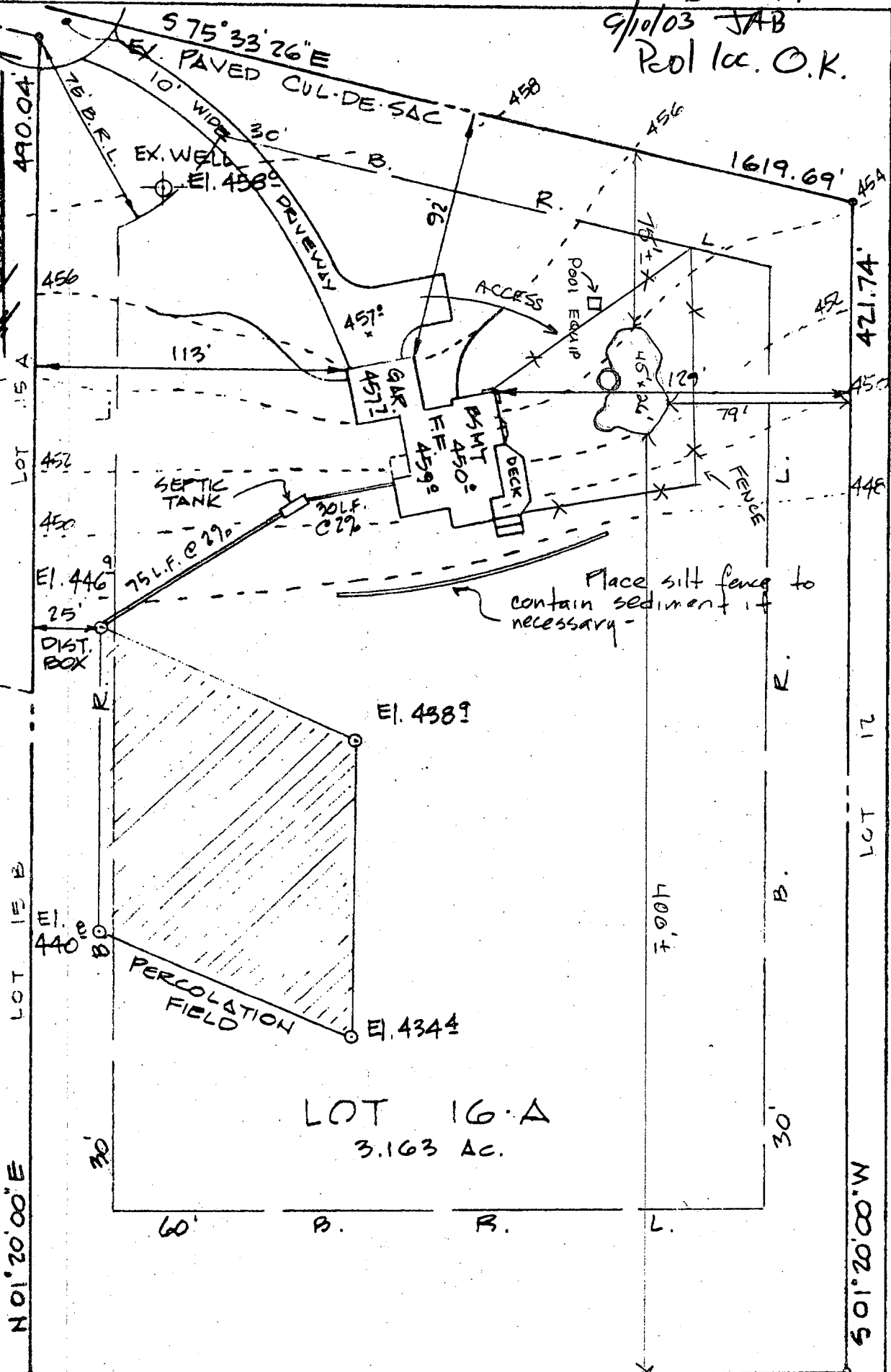
Distribution of Copies:
White - Building Official
Green - Planning & Zoning

Yellow - Engineering
Pink - Health Dept.
Gold - S.H.A.

B00144020

9/10/03 JAB
Pool loc. O.K.

4612' TO FOLLY
QUARTER RD.
ROAD EASEMENT
LIBER 1135 FOLIO 459



4451	SEPTIC TANK INV. IN	4451
4454	" " " OUT	
4431	DIST. BOX INV. IN	4431
4469	" " FIN. GR.	4469

HOUSE FIN. FL.	459'
" BSM'T	450'
" SEWER INV.	4463

LOT 16-A
3.163 Ac.

N 01° 20' 00" E

LOT 15-A

LOT 15-B

LOT 17

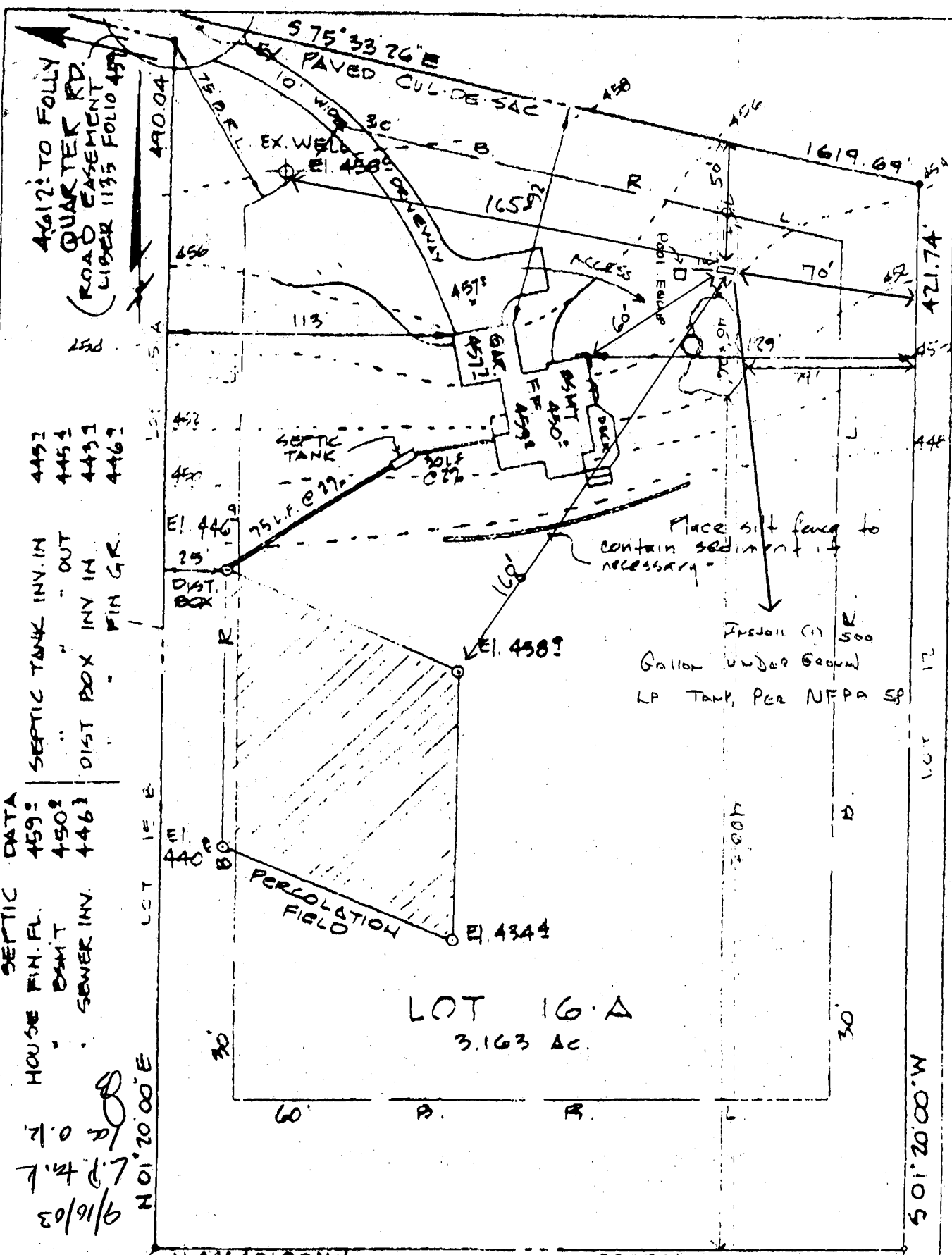
S 01° 20' 00" W

N 88° 40' 00" W
Note: Perc field location and elevations shown taken from

295.93'

ENGINEER
John L. Schneider
100 N. Rolling Road

1160
Simmons #032431



AG 12 TO FOLLY
QUARTER RD.
ROAD EASEMENT
LIBER 1135 FOLIO 457

SEPTIC TANK INV. IN	4452
" " OUT	4454
DIST BOX INV. IN	4431
" " FIN GR.	4462

SEPTIC DATA	
HOUSE FIN. FL.	459
" " DSMIT	450
SEWER INV.	4462

9/16/03
L.P. 4.1
L.P. 0.2
NOI 20' 00" E

800 144007

Note: Perc field location and elevations shown taken from [unclear] by N.T.T. [unclear]

Place silt fence to contain sediment if necessary

Install (1) 500 Gallon Under Ground LP TANK, Per NFPA SP

ENGINEER
John L. Schneider
100 N. Rolling Road

116
SIMMONS # 032431