

9/24/99 NOON
10/28/99 WPT 2pm

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

03-327728

P 512716
A ~~5042930~~
564306

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
~~XXXXXXXX~~ 410-313-2640

DISTRICT _____

DATE 9/20/1999

DATE SYSTEM APPROVED 9/24/99

INSPECTOR S.R.K.

INDEXED

Lehsac Plumbing & Heating IS PERMITTED TO INSTALL ALTER

ADDRESS 202 Azar Court, Baltimore, MD 21227 PHONE 410-242-6888

SUBDIVISION Gaither Hunt LOT 57 ROAD 12009 Open Run Court

PROPERTY OWNER Ryan Homes **BUILDING PERMIT SIGNED**

ADDRESS _____ **AND RETURNED**

715-04 BOD1944B-DEK

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

TRENCHES - Trench to be 3 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 6 feet below original grade. Effective area begins at 4 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Place the distribution box 150 feet down the right lot line and 10 feet off this same lot line as seen from Open Run Road. Run trenches along contour towards the left lot line.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.
OK 6/21/99

PLANS APPROVED BY Donna K. Soe DATE 6-09-1999

COVER NO WORK UNTIL INSPECTED AND APPROVED

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS. 90° ELBOWS NOT ACCEPTABLE.

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

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

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR A2S

PERMIT VOID AFTER TWO YEARS

NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON, CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED.

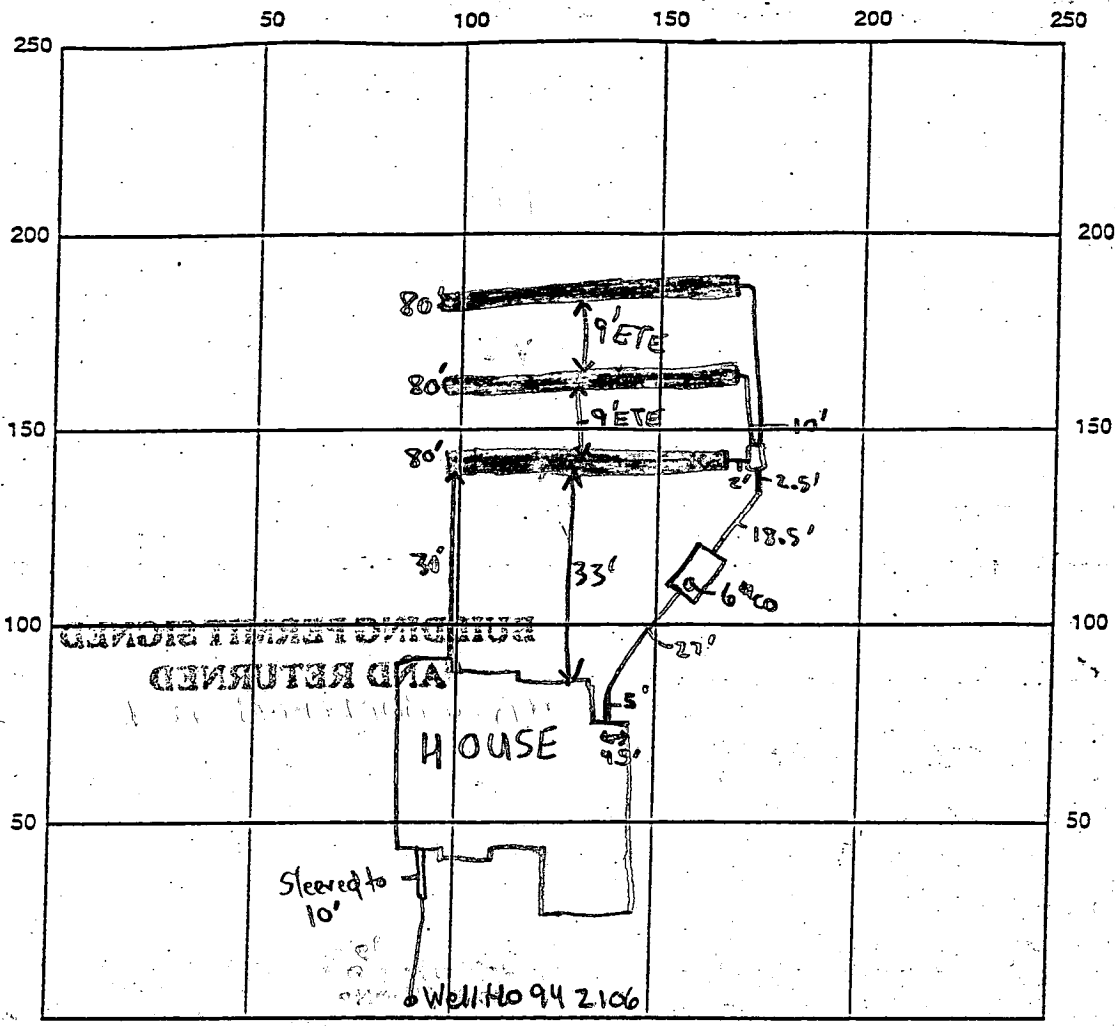
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

564306

NOT TO SCALE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
OPEN RUN CT

SEPTIC TANK LEVEL 1250 gallon midseam CLEANOUTS 6" @ Tank

DISTRIBUTION BOX LEVEL Baffle is in

DRAIN FIELD/TILE DEPTH 6 FT. TRENCH WIDTH 3 FT. INLET DEPTH 4 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 240 FT.

NUMBER OF TRENCHES 3 ONE-SIDEWALL/BOTTOM AREA 720 SQ. FT.

DRYWELL INSIDE DIAMETER N/A FT. EFFECTIVE DEPTH BELOW INLET N/A FT.

ABSORBENT AREA N/A SQ. FT.

REMARKS: 9/24/99 - OK TO COVER ALL WORK (SRK)

DATE SYSTEM APPROVED 9/24/99 INSPECTOR Steven R. Kueg

APPLICATION

PERCOLATION TESTING

A 56429
P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

DISTRICT _____
DATE 3-27-96

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER J Thomas Scrivener RYAN HAMES

ADDRESS c/o Land Design & Development PHONE 410 740 5176

AGENT OR PROSPECTIVE BUYER Donald R. Renner Jr

ADDRESS 10805 Hickory Ridge Rd PHONE _____
21044

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 28 57

ROAD AND DESCRIPTION 12009 Open Run Court

TAX MAP 29 PARCEL # 21

~~NO PERMIT SIGNATURE~~
~~AND RETURNED 6-9-99~~
~~Serial # B10118340~~

SIZE OF LOT 1+ Acres TYPE BLDG. SFD-4 Bm
(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.

Don R Renner Jr
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

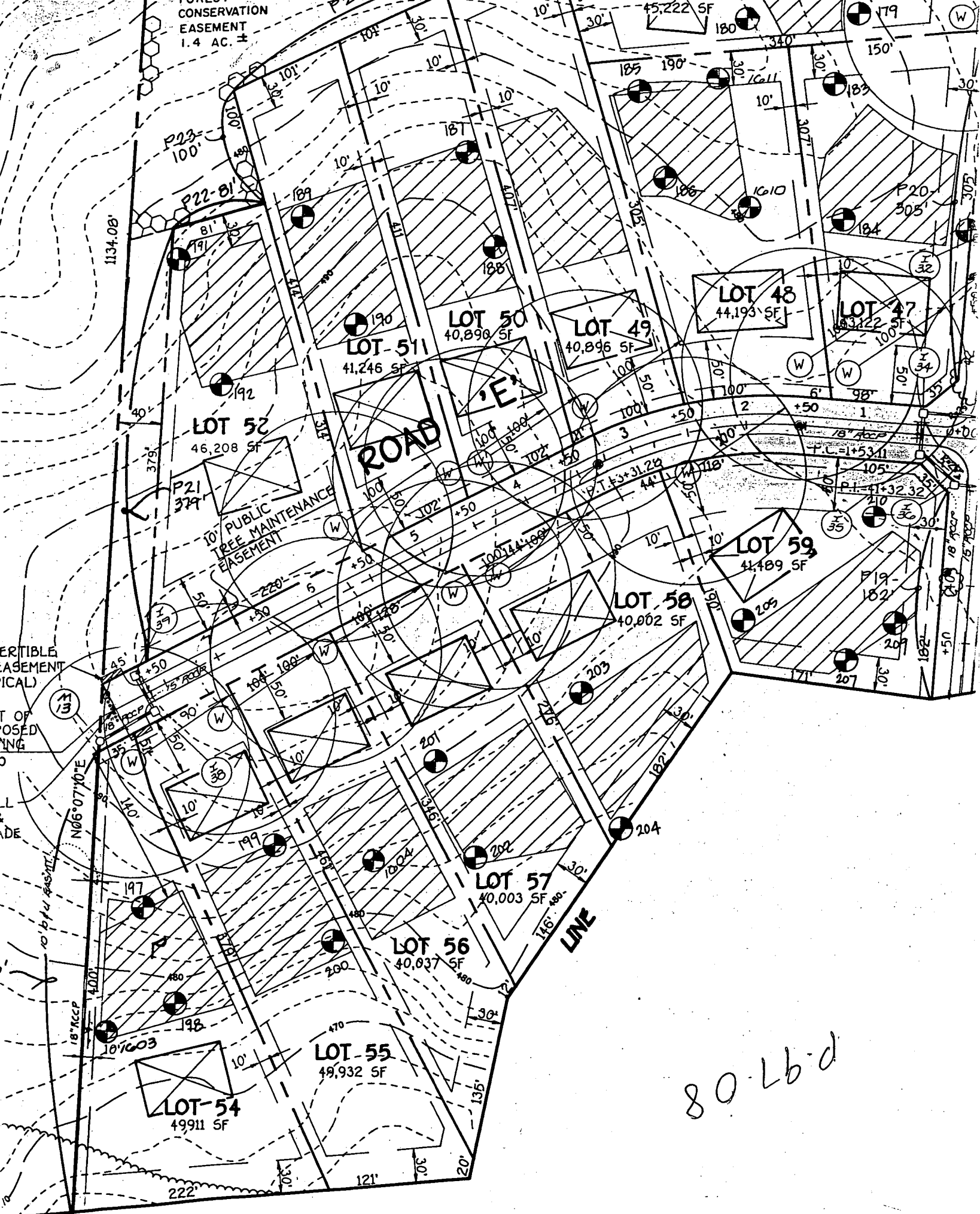
REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

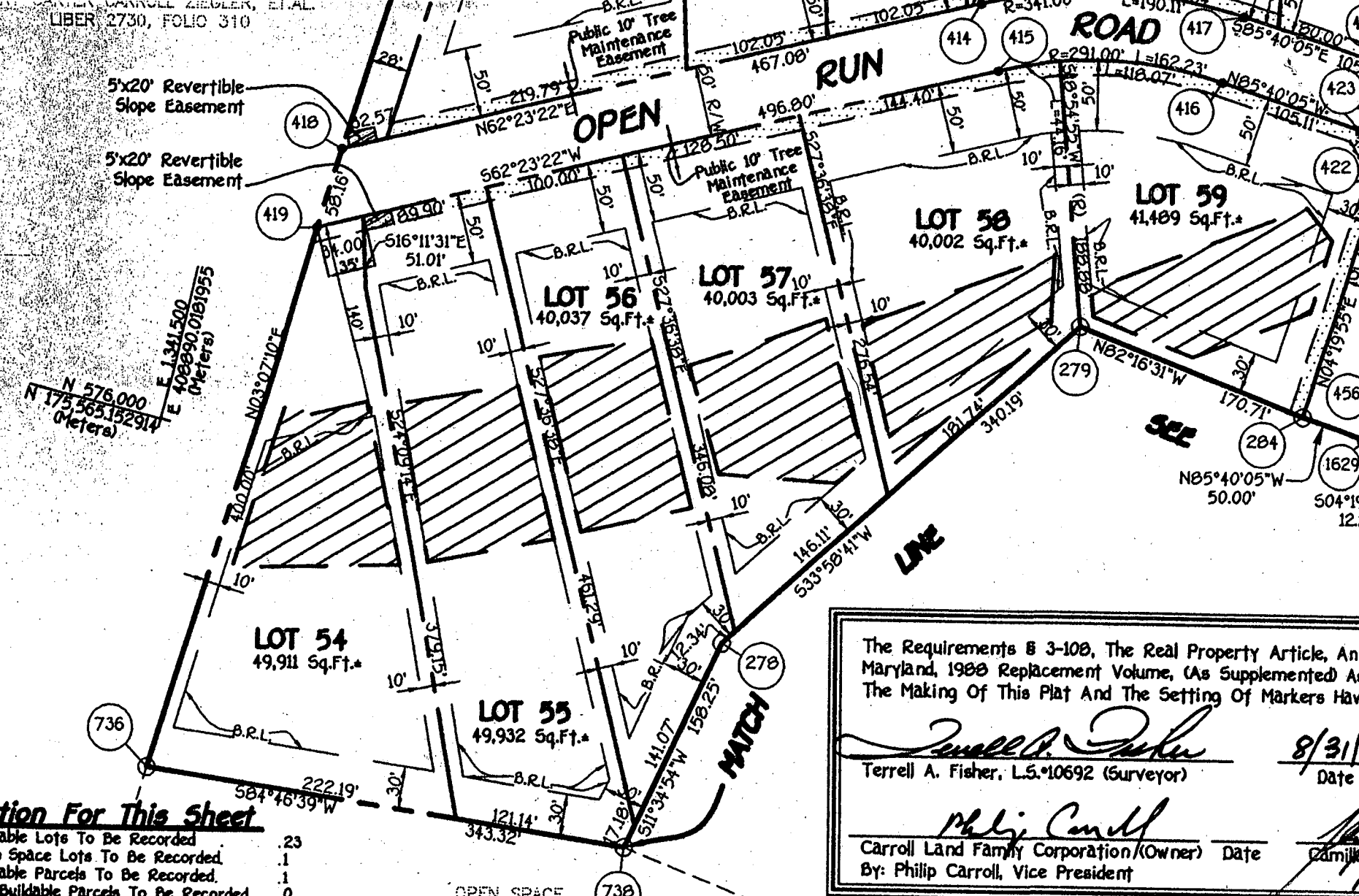
THIS IS NOT A PERMIT

FORE
CONSERVATION
EASEMENT
1.4 AC. ±



80-Lb-d

MATCH



N 576.000
E 1341.500
N 175.465132914
E 108890.0181955
(Meters)

Area Tabulation For This Sheet

Total Number Of Buildable Lots To Be Recorded	.23
Total Number Of Open Space Lots To Be Recorded	.1
Total Number Of Buildable Parcels To Be Recorded	.1
Total Number Of Non-Buildable Parcels To Be Recorded	.0
Total Number Of Lots And Parcels To Be Recorded	.25
Total Area Of Buildable Lots To Be Recorded	.23,790 Ac.*
Total Area Of Open Space Lots To Be Recorded	.1,493 Ac.*
Total Area Of Non-Buildable Parcels To Be Recorded	.0,000 Ac.*
Total Area Of Buildable Parcels To Be Recorded	.6,970 Ac.*
Total Area Of Lots And Parcels To Be Recorded	.32,253 Ac.*
Total Area Of Roadway To Be Recorded	.2,521 Ac.*
Total Area To Be Recorded	.34,774 Ac.*

F.98-76
GATHER HUNT
SECTION 1, AREA 1
PLAT No. 13211

The Requirements B 3-10B, The Real Property Article, An
Maryland, 1988 Replacement Volume, (As Supplemented) As
The Making Of This Plat And The Setting Of Markers Hav

Terrell A. Fisher
Terrell A. Fisher, L.S.#10692 (Surveyor) 8/31/11
Date

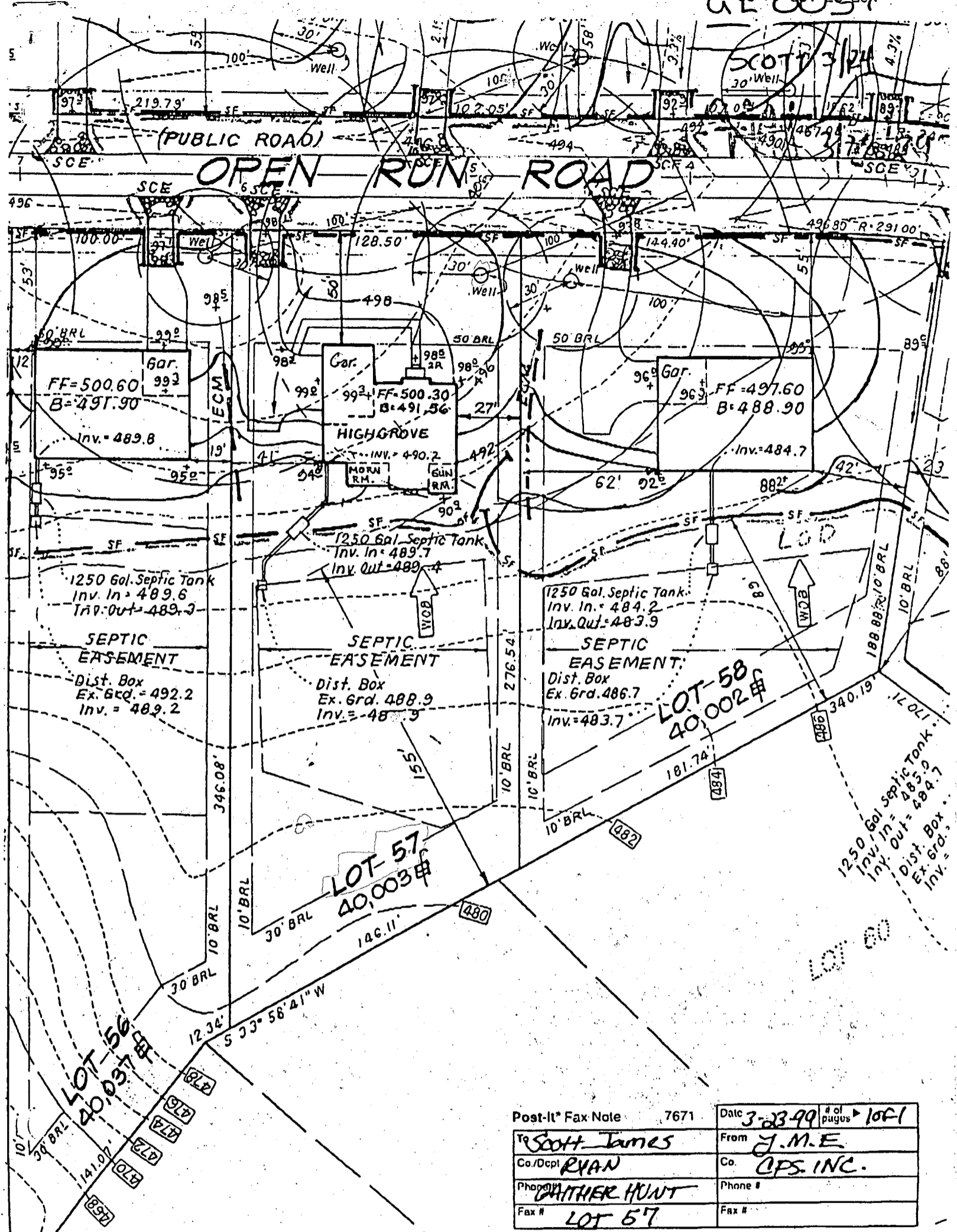
Philip Carroll
Carroll Land Family Corporation/(Owner) Date
By: Philip Carroll, Vice President

Camilla Carroll
4400 Manor Lane
Ellicott City, Maryland 21042

OWNER'S CERTIFICATE

Carroll Land Family Corporation, By Philip Carroll, Vice-President, And Camilla Carroll, Owners Of The Proper
Described Hereon, Hereby Adopt This Plan Of Subdivision, And In Consideration Of The Approval Of This Plan
Department Of Planning And Zoning, Establish The Minimum Building Restriction Lines And Grant Unto How
Maryland, Its Successors And Assigns, (1) The Right To Use, Possess, Enjoy, Sell, Lease, Convey, Mortgage, Encumber, or

Approved For Private Water And Private Sewerage Systems,
ward County Health Department.



Post-It* Fax Note	7671	Date	3-23-99	# of pages	1 of 1
To	SCOTT JAMES	From	J.M.E.		
Co./Dept	RYAN	Co.	CPS, INC.		
Phone #	GATHER HUNT	Phone #			
Fax #	LOT 57	Fax #			

410 381 7500 P. 01

Agreement Septic System Plan
 toward County Health Department

[Signature]
 Date 6/9/99

Total linear feet of trench required 240 feet
 Width of trench(es) 3 feet
 Depth of trench(es) 6 feet
 Depth of stone required below distribution pipe 2 feet

C1 9890

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED AFTER WELL IS COMPLETED. COUNTY NUMBER A56429

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED 3 27 99

Depth of Well 450 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-2106

OWNER Russell Dev. LLC STREET OR RFD Open Run Rd TOWN ELICHAH CITY SUBDIVISION Gaither Hunt SECTION 7 LOT 57

WELL LOG

Table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), check if water bearing. Rows include Red clay, Brown soil, Gray Granite, Hard Tan Sandstone, Hard Gray Granite.

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) YES (Y) NO (N) TYPE OF GROUTING MATERIAL (Circle one) CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 110 NO. OF POUNDS 504 GALLONS OF WATER 96 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 61 ft.

CASING RECORD

MAIN CASING TYPE (circle appropriate code below) ST (STEEL), PL (PLASTIC), CO (CONCRETE), OT (OTHER). Nominal diameter top (main) casing (nearest inch): 06. Total depth of main casing (nearest foot): 61.

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

SCREEN RECORD

screen type or open hole (circle appropriate code below) ST (STEEL), BR (BRASS), PL (PLASTIC), HO (OPEN HOLE), OT (OTHER).

C2 DEPTH (nearest ft.)

Table with columns: T, A, C, H, S, R, E, N. Rows for depth measurements: 61, 450. Includes SLOT SIZE and DIAMETER OF SCREEN.

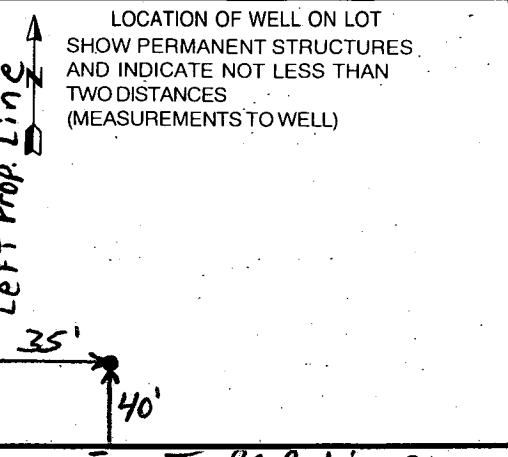
C3

PUMPING TEST

HOURS PUMPED (nearest hour) 6. PUMPING RATE (gal. per min.) 2. METHOD USED TO MEASURE PUMPING RATE watch & bucket. WATER LEVEL (distance from land surface) BEFORE PUMPING 35' ft. WHEN PUMPING 116' ft. TYPE OF PUMP USED (for test) S (submersible).

PUMP INSTALLED

DRILLER INSTALLED PUMP (CIRCLE) (YES or NO) YES (NO). IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS. TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 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. LAND SURFACE below 2 (nearest foot).



NUMBER OF UNSUCCESSFUL WELLS: 0. WELL HYDROFRACTURED YES (Y) NO (N).

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 26.04.04 "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 LIC. NO. M 40355. DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) Max B. Jones. LIC. NO. Sub 341.

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.

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

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 94-2106
 Location of property (road) Bittersweet Ct
 Subdivision Open Run ROAD Lot 57 Block Plat Sec. II
 Well Driller MICHAEL BARLOW Owner RUSSELL DEVELOPMENT

Depth of well 450 Feet
 Distance of measuring point (M.P.) above ground
 Static water level (S.W.L.) below M.P.

I. High rate pumping -- reservoir drawdown

Time pump started Pumping rate 2 g.p.m
 Total time to reach pumping water level ft. below M.P.

II. 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 5 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
9:00	35'	5 sec		12
9:15	116'	30 sec		2
9:30	116'	30 sec		2
9:45	116'	30 sec		2
10:00	116'	30 sec		2
10:15	116'	30 sec		2
10:30	116'	30 sec		2
10:45	116'	30 sec		2
11:00	116'	30 sec		2
11:15	116'	30 sec		2
11:30	116'	30 sec		2
11:45	116'	30 sec		2
12:00	116'	30 sec		2
12:15	116'	30 sec		2
12:30	116'	30 sec		2
12:45	116'	30 sec		2
1:00	116'	30 sec		2
1:15	116'	30 sec		2
1:30	116'	30 sec		2
1:45	116'	30 sec		2
2:00	116'	30 sec		2
2:15	116'	30 sec		2
2:30	116'	30 sec		2
2:45	116'	30 sec		2

B 1 5136

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL please print or type

STATE PERMIT NUMBER

HO-94-2106 fill in this form completely

OWNER INFORMATION: Date Received (APA) 012699, Russell Development LLC, 8808 Centre Park Dr. Suite 209, Columbia MD 21045

LOCATION OF WELL: Howard County, Gaither Hunt Subdivision, Section 1, Lot 57, Ellicott City, 4 miles from town

DRILLER INFORMATION: Michael Barkow, MWD 355, Michael Barkow Well Drilling, 912 Fawn Ct. Toppe MD 2085, Signature, Date 1-21-99

WELL INFORMATION: APPROX. PUMPING RATE 5 GAL. PER MIN., AVERAGE DAILY QUANTITY NEEDED 500 GAL. PER DAY, USE FOR WATER: DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL: Howard Co A56429, DATE ISSUED 021199, NORTH GRID 515 000, EAST GRID 830 000

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

USE FOR WATER: DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION, FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION), INDUSTRIAL, COMMERCIAL, DEWATERING, PUBLIC WATER SUPPLY WELL, TEST, OBSERVATION, MONITORING, GEO-THERMAL

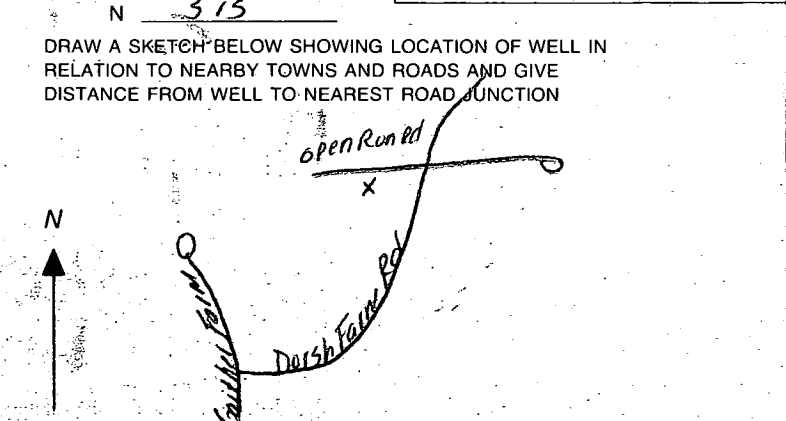
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X: 3, SOURCES OF DRILLING WATER, WRITE THE BOX NUMBER FROM THE MAP HERE: E 830, N 515

APPROXIMATE DEPTH OF WELL 200 FEET, APPROXIMATE DIAMETER OF WELL 4 INCH, NEAREST TOWN

METHOD OF DRILLING (circle one): BORED (or Augered), AIR-ROTary, CABLE, JETTED, AIR-PERCussion, ROTARY (Hydraulic Rotary), REVERSE-ROTary, DRIVE-POINT

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-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS, THIS WELL WILL DEEPEAN AN EXISTING WELL

Not to be filled in by driller (MDE OR COUNTY USE ONLY): APPROP. PERMIT NUMBER 54, PERMIT No. HO-94-2106



HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043

~~461-9999~~
410313-2640

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation
Replacement

Receipt # _____
Date _____

Name of Installer LEHSAC CORP

Telephone 410-242-6888

License Number 3344

Certified Well Pump Installer _____ Well Driller _____ Registered Plumber

Name of Property Owner RYAN

Telephone 410-654-0501

Subdivision GAITHER HUNT Lot # 57

Well Tag # HO-94-2106

Site Address 12009 OPEN RUN COURT

Pump

1. Type
a. Deep well jet _____
b. Shallow well jet _____
c. Submersible

Motor

1. Horsepower 1
2. RPM _____
3. Voltage _____
a. 110 _____
b. 220°

Pitless Adapter

1. Make WILKINS
2. Model # _____
3. Depth 42"

2. Make JACUZZI

3. Model # TIS4521B-52

4. Capacity 5 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

1. Capacity 86
2. Pressure relief valve? YES

Piping

1. Type 16016
2. Size 1"
3. NSF and/or BOCA Code approved
4. Depth of supply line 42"

Well data

1. Depth 450 ft.
2. Yield 2 GPM
3. Static water level 61 ft.
4. Will water supply be disinfected by installer? YES

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

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

10/28/99-WPS/OK
SRM

Signature of Applicant: [Signature]

Date: 11/18/99

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

NOTES:

- 1) B.R.L. information, if shown, was obtained from existing record plat or local agencies and is not guaranteed by NTT, Inc.
- 2) Building line and/or Flood Zone information is subject to the interpretation of the originator.
- 3) NTT, Inc. does not certify to unshown or unrecorded encroachments or overlaps.
- 4) Property markers not found, or guaranteed by this location.
- 5) Setback distance accuracy: 1'

WALK-THRU BUILDING PERMIT
 BP# 80019943 A# S6430-6
 APP SAN YLL DATE: 2/5/04
 DESC. OF WORK: deck

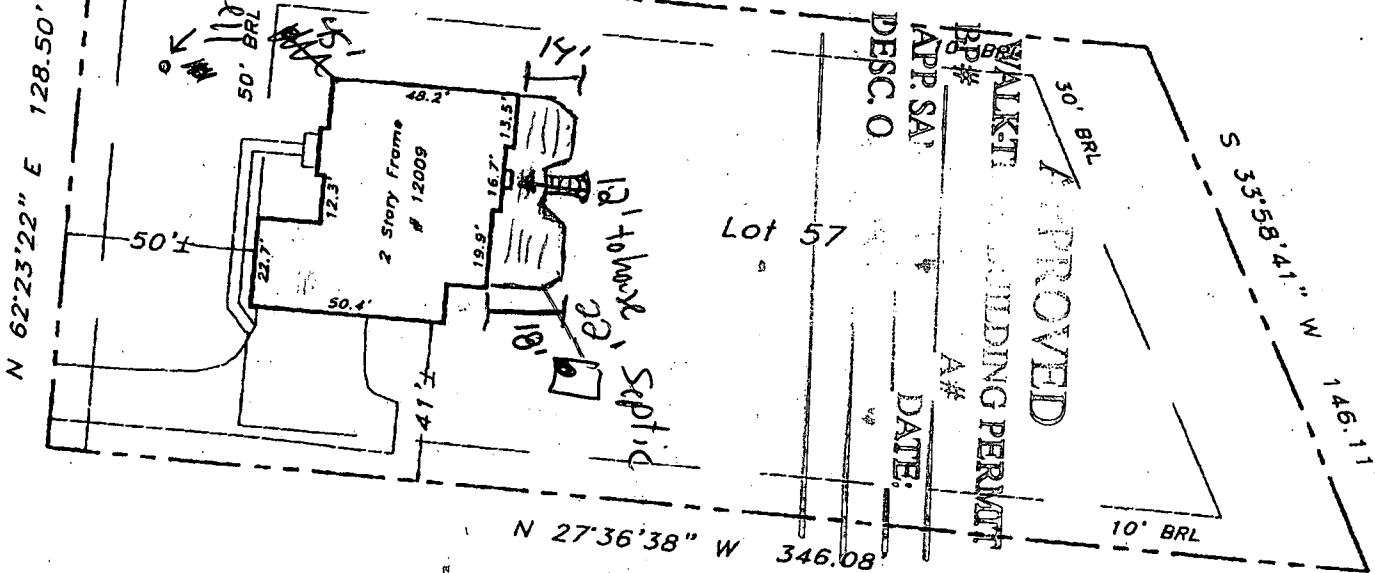
APPROVED

Open Run Road
 (50' Right of way)

Public 10' Tree
 Maintenance Easement

Lot 58

S 27°36'38" E 276.54'



Lot 57

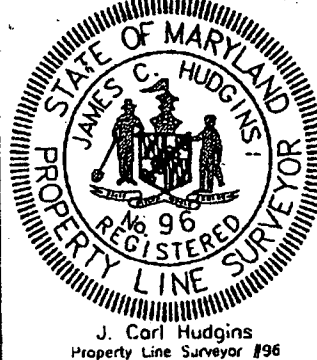
N 27°36'38" W 346.08'

Lot 56

Subject property is shown in Zone C on the National Flood Insurance Program Flood Insurance Rate Map of Howard County, Maryland. Panel # 27 of 45 Community Panel # 240044-0027 D Effective date: December 4, 1986

This is to certify that I have surveyed the property shown hereon, being known as Lot 57
12009 Open Run Road
 recorded in the Land Records of Howard County, Maryland in Plat Bk. 13488 Liber 4978 Folio 603 for the purpose of locating the improvements thereon.

- * This plat is of benefit to the consumer only insofar as it is required by a lender or a title insurance company or its agent in connection with contemplated transfer, financing, or refinancing purposes.
- * This plat is not to be relied upon for the establishment of location of fences, garages, buildings, or other existing or future structures.
- * This plat does not provide for the accurate identification of property boundary lines, but such identification may not be required for the transfer of title or for securing financing or refinancing.



J. Carl Hudgins
 Property Line Surveyor #96

LOCATION DRAWING
 12009 Open Run Road
 Gaither Hunt
 5th election district
 HOWARD COUNTY, MARYLAND

NTT Associates, Inc.
 16205 Old Frederick Road
 Mt. Airy, Maryland 21771
 Ph. (410)442-2031
 Fax No. (410)442-1315

Scale:	1" = 50'
Date:	April 16, 2004
Field by:	JLM
Drawn by:	JLM
Drawing #	90404041

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

PD23/47443

Building Address: 2009 OPEN RUN ROAD
ELICOTT CITY, MD 21042-6110

Suite/Apt. #: _____ SDP/WP/Petition #: _____

Census Tract: 60030 Subdivision: _____

Section: 1 Area: 2 Lot: 57

Tax Map: _____ Parcel: 21 Grid: 5

Zoning: REDP Map Coordinates: (10) Lot size: 200 SF

Property Owner's Name: ANDREW + SANDY HOVEU

Address: 2009 OPEN RUN ROAD

City: ELICOTT CITY State: MD Zip Code: 21042

Home Phone: 410 864 8746 Work Phone: _____

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

Phone: _____ Fax: _____

Existing Use: RESIDENCE

Proposed Use: DRIVE

Estimated Construction Cost: \$ 25,000

Description of Work: BUILD 700 SQ FT
DRIVEWAY AND SIDE WALK
TO ACCOMMODATE TRAILER

Contractor Company: J.P. GUNTON BUILDERS

Contact Person: BRIANT ESKAY

Address: 27904A BURNS ROAD

City: DANMUSCUS State: MD Zip Code: 20613

License No: 1706167

Phone: 410 446 9511 Fax: 301 253 1525

Occupant or Tenant: OWNER

Contact Name: 15 X 20 X 16 X 10 X 13 X 14

Address: W/PLUMBING + STAIRS

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

Height: 8'

No. of stories: 3

Gross area, sq. ft. per floor: _____

Use group: _____

Construction type:
 Reinforced Concrete
 Structural Steel
 Masonry
 Wood Frame
 State Certified Modular

Utilities

Water Supply:
 Public
 Private

Sewage Disposal:
 Public
 Private

Electric Yes No
 Gas Yes No

Heating System:
 Electric Oil
 Natural Gas
 Propane Gas

Sprinkler system: N/A
 Full
 Partial
 Other Suppression
 # of Heads: _____

Building Characteristics

SF Dwelling SF Townhouse

Depth: _____ Width: _____

1st floor: _____
 2nd floor: _____
 Basement: _____

Finished Basement Unfinished Basement
 Crawled space Slab on Grade

No. of Bedrooms: 3

Multi-family dwellings:
 No. of efficiency units: _____
 No. of 1 BR units: _____
 No. of 2 BR units: _____
 No. of 3 BR units: _____

Other Structure: DRIVE

Dimensions: _____
 Footings: _____
 Roof: _____

State Certified Modular
 Manufactured Home

Utilities

Water Supply:
 Public
 Private

Sewage Disposal:
 Public
 Private

Electric Yes No
 Gas Yes No

Heating System:
 Electric Oil
 Natural Gas
 Propane Gas

Sprinkler system: N/A
 NFPA #13D
 NFPA #13R
 Other

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.

R. BRIANT ESKAY
 Applicant's Signature

R. BRIANT ESKAY
 Print Name

JULY 15 2004
 Date

MR 7/15/04
 Title/Company

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