

11/13/86
11:00 AM

11/13/86
Sealed
Original
(B)

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

P 36389
56538B
A 24005

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
~~887-2330~~
461-9933

05-304124
INDEXED

ELLICOTT CITY
DISTRICT 3rd
DATE 1/02/86

William H. Smith IS PERMITTED TO INSTALL X ALTER _____

ADDRESS _____ PHONE 879-7841

SUBDIVISION Wheeler Phelps Tract ROAD 1965 Mt. View Road LOT 3

PROPERTY OWNER David E. Wolf

ADDRESS _____

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

GARBAGE GRINDER? YES _____ NO X

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 200 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 9 feet below original grade. Effective area begins at 4 feet below original grade. 5 feet of stone below distribution pipe.

LOCATION: Start the first trench 133 feet from the front lot line and 118 feet from the right lot line as seen when facing the property from Mount View Road. Run trench(s) along level ground toward left side of lot. Run 2nd trench parallel to 1st and 10 feet away.

NOTE: No trench to exceed 100 feet in length. If more than one trench used, a distribution box is required. Call for inspection of trench(s) before and after gravel is installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. *ok/cw*

BUILDING PERMIT SIGNED
AND RETURNED 1/18/86
Serial # 72141-
2 level deck

PLANS APPROVED BY C. Williams DATE 5/17/85

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. **BUILDING PERMIT SIGNED AND RETURNED**

NOTE: IF TRENCH IS USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH. 10/16/2002 B00138896 EXTEND KITCHEN,

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER. NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH. GREAT ROOM, DECK

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 40 PVC OR ABS.

PERMIT VOID AFTER THREE 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

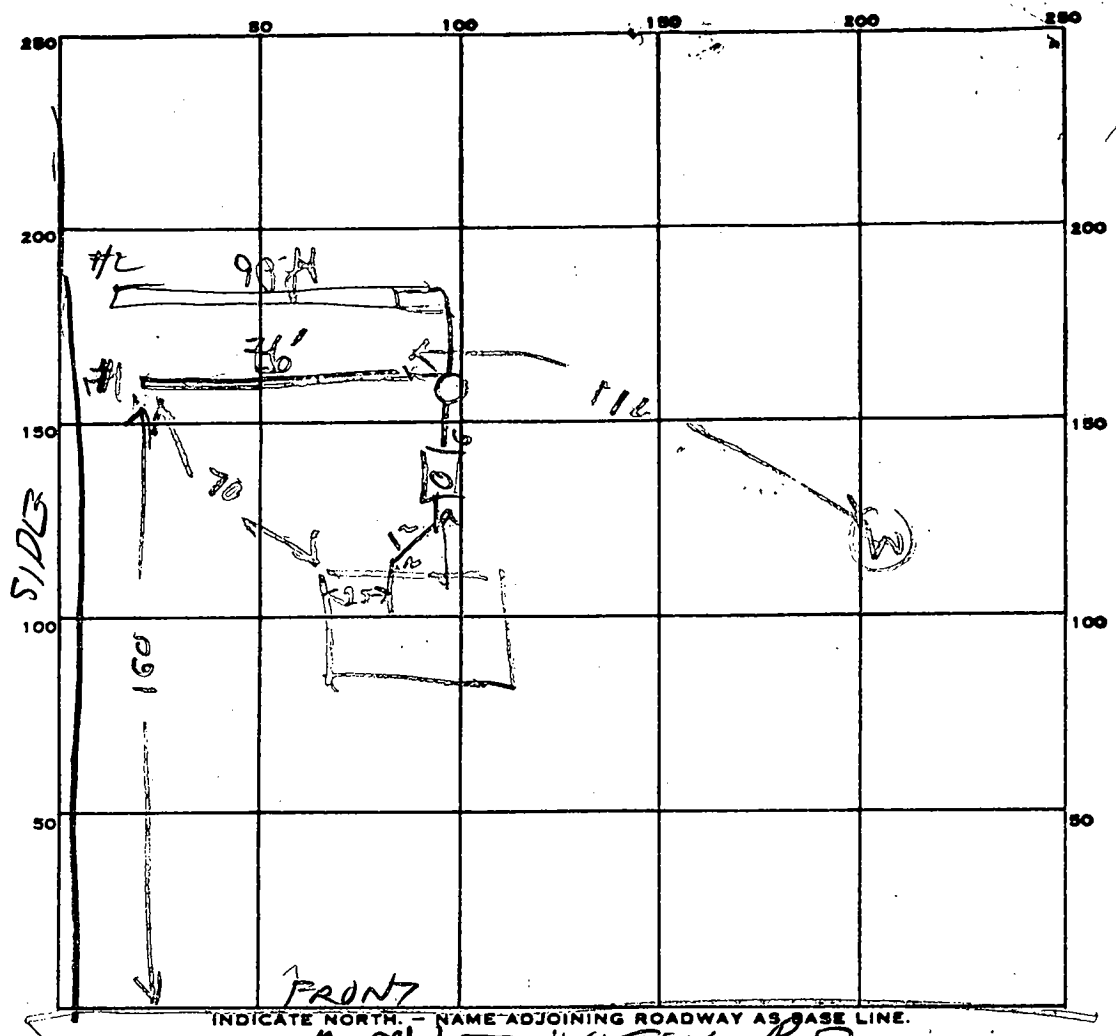
***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

CALL 993-2930 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

A
36538B
A
24005

76
40
12



76
112

PERMIT CARD

SEPTIC TANK, LEVEL OK 1500

CLEANOUTS 1 S.T.

DISTRIBUTION BOX, LEVEL

TILE FIELD, DEPTH 9.5 FT. TRENCH WIDTH 2

#1	#2
2	2

GRAVEL DEPTH 5 IN. TOTAL LENGTH 76 FT.

NUMBER OF TRENCHES 2 TOTAL BOTTOM AREA 380 450 = 830

800 total
MIN

SEEPAGE PITS, INSIDE DIAMETER FT. DEPTH BELOW INLET FT.

ABSORBENT AREA 830 SQ. FT.

REMARKS OK - 1ST TRENCH FINISHED & COVERED + DIG TRENCH #2

1/13/85 1 PM - 2ND TRENCH DUG & FILL WITH STONE & PUT CLEANOUT ON TANK. RH

1/13/86 OK to cover trench #2 S.T. c/o installed

DATE SYSTEM APPROVED 1/13/86 INSPECTOR B. Nelson (earlier R.H.)

APPLICATION

A 24005

P _____

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: 465-5000, EXT. 356

DISTRICT 3rd
DATE 9/24/76

*4-7.3 ft.
deep hole*

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 Wheeler-Phelps tract
ADDRESS Ruth Thompson property PHONE 823-3535
Any questions call Mr. Spellman

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 3

ROAD AND DESCRIPTION Old Frederick Road and ~~Route 99~~ MT VIEW

SIZE OF LOT 1.008 acres TYPE BLDG. 3 or 4 bedrooms
NUMBER OF BEDROOMS _____

IF NOT SINGLE RESIDENCE DESCRIBE _____

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ Robert E. Spellman

APPROVED BY P.P.O. Niell FOR Dry Well + Trenches DATE 11/17/76
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

B.P. # 66890

107-85

THIS IS NOT A PERMIT

B 1 0207

SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

OEP PERMIT NUMBER HO-81-1121

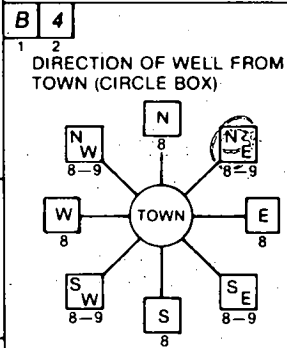
please print or type

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

OWNER INFORMATION: Date Received 7/31/85 9:30 AM, Owner WOLF David, Street RFD 9851 BRANCH LEIGH RD., Town RANDOLPH CRYSTOWN MD 21133

LOCATION OF WELL: COUNTY HOWARD, SUBDIVISION WHEELER PHILIPPS TRACT, SECTION 44, LOT 3, NEAREST TOWN WEST FRIENDSHIP, MILES FROM TOWN 0 MI

DRILLER INFORMATION: Driller's Name Stanley W. Bollinger Jr., License No. 308, Firm Name Stone Well Drilling Inc., Address P.O. Box 2035 West Md. 21157, Signature Stanley W. Bollinger Jr., Date 7/25/85



NEAR WHAT ROAD: MOUNT VIEW RD., ON WHICH SIDE OF ROAD: EAST, DISTANCE FROM ROAD: 75 FT, ENTER FT or MI: 75

WELL INFORMATION: APPROX. PUMPING RATE (GAL. PER MIN.) 5, AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 560

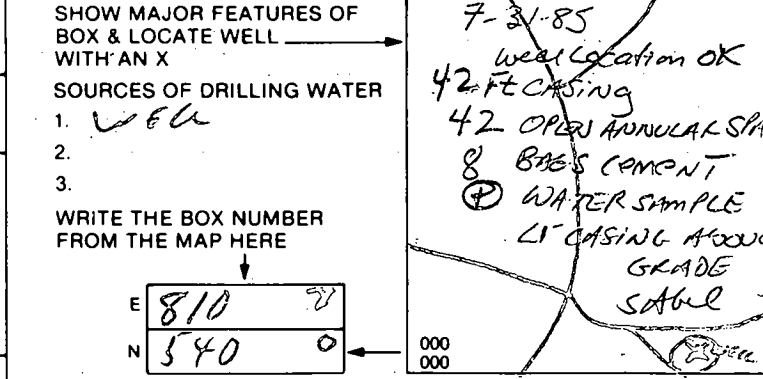
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL: COUNTY NAME HOWARD, COUNTY NO. A24005, OEP SIGNATURE Chris William, DATE ISSUED 1/26/85, NORTH GRID 540000, EAST GRID 081000

USE FOR WATER (CIRCLE APPROPRIATE BOX): HOME (D), FARMING (F), INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (I), PUBLIC OR PRIVATE WATER COMPANY (P), TEST, OBSERVATION, MONITORING (T)

APPROXIMATE DEPTH OF WELL 165 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

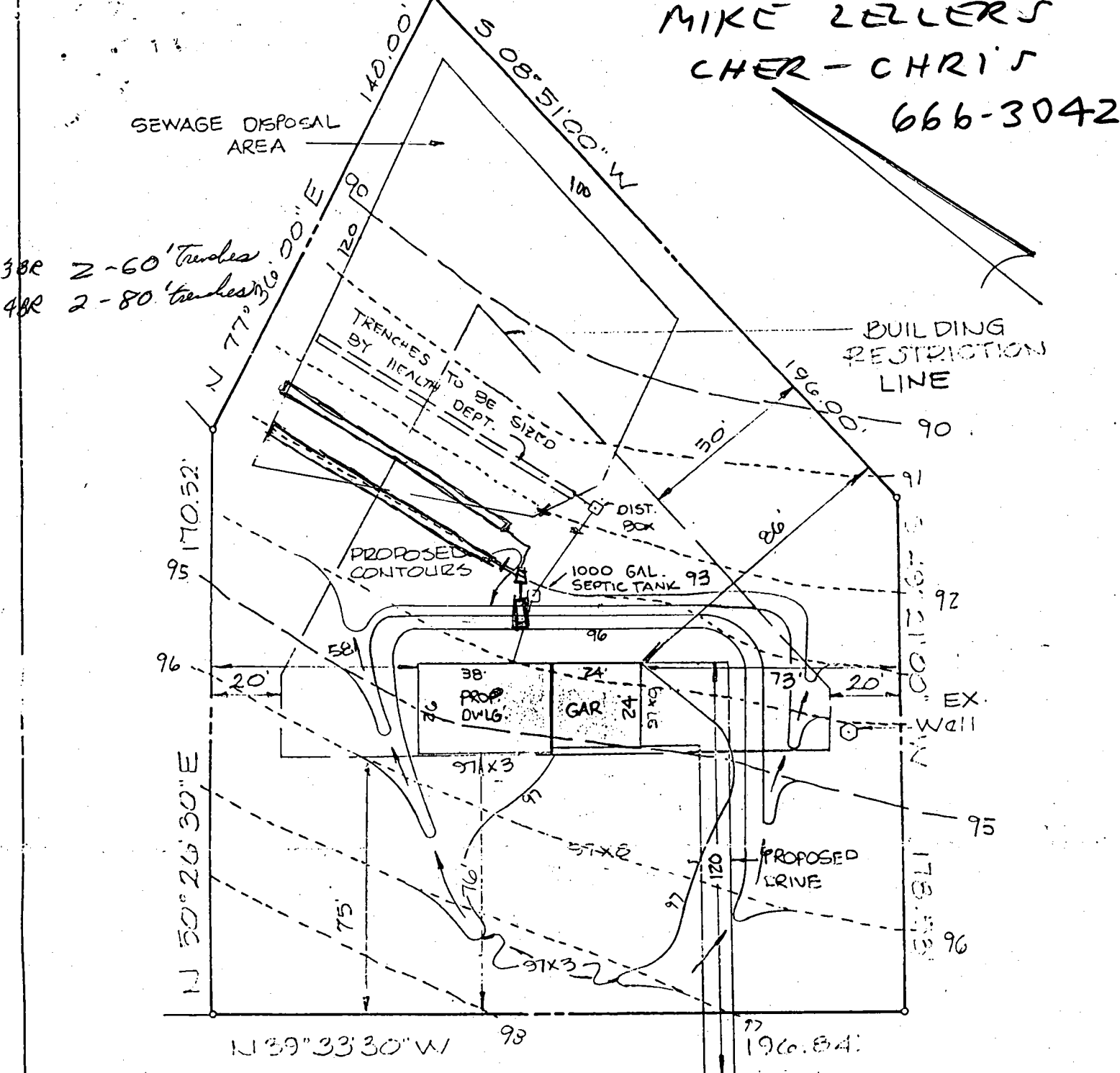


REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX): THIS WELL WILL NOT REPLACE AN EXISTING WELL (N), THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED (Y), THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY (S), THIS WELL WILL DEEPEM AN EXISTING WELL (D). PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41

Not to be filled in by driller (OEP USE ONLY): APPROP. PERMIT NUMBER GAP, FORCE INITIALS IN BOX, PERMIT No. HO-81-1121

SPECIAL CONDITIONS

MIKE ZELLERS
 CHR - CHRIS
 666-3042



MOUNT VIEW RD.

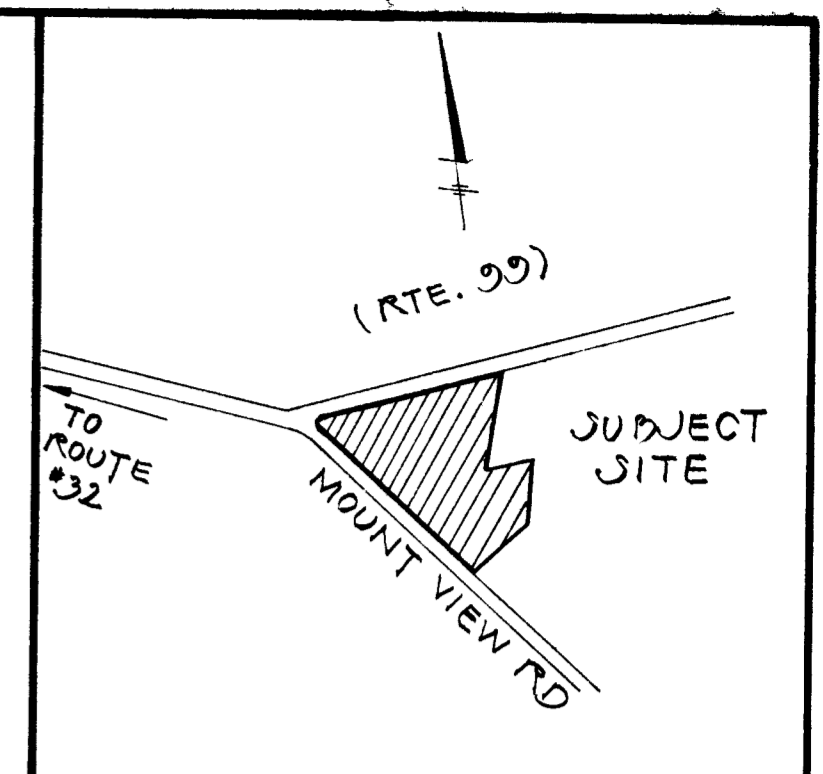
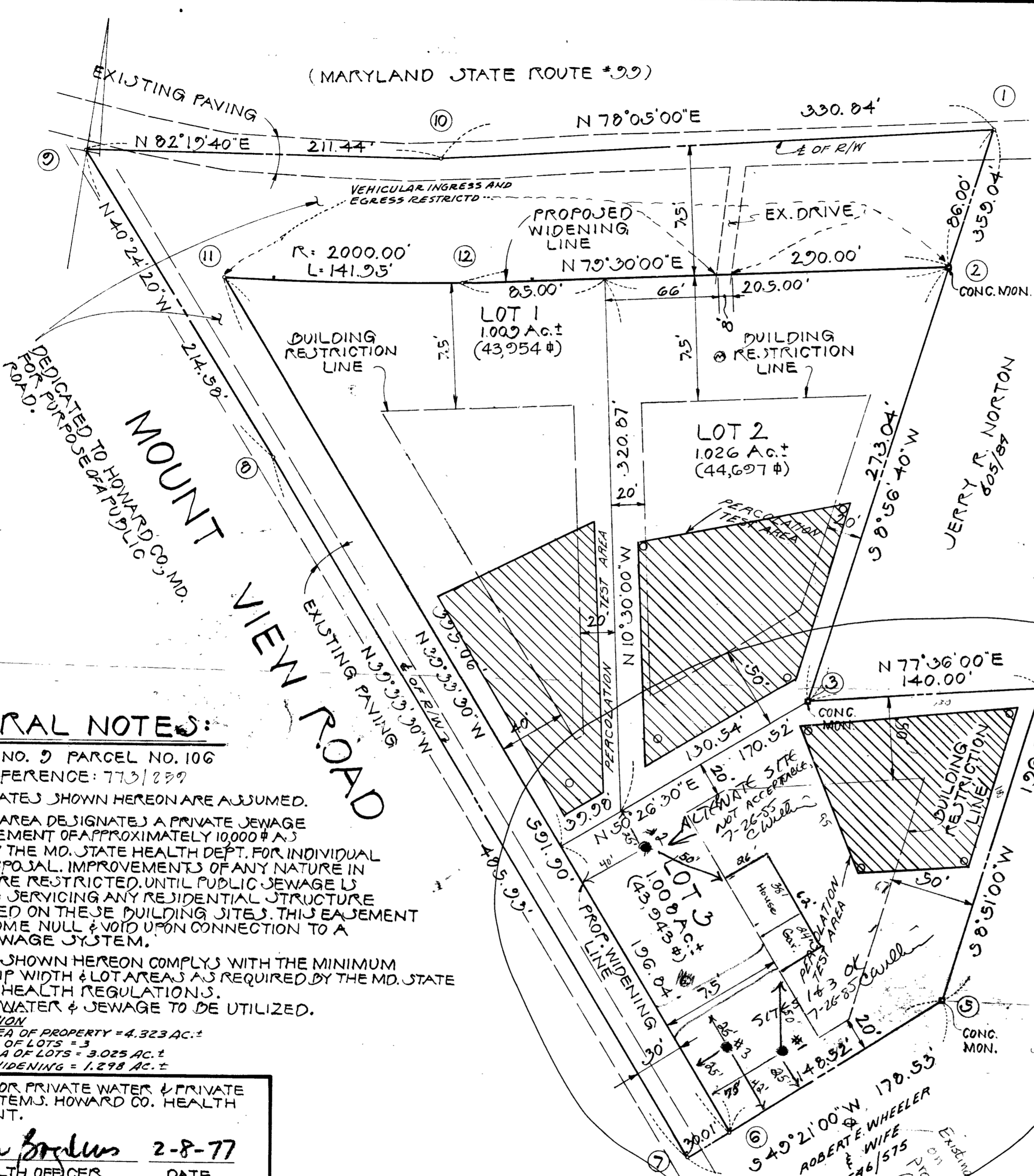
PROPOSED ELEVATIONS

FIRST FLOOR	99.2
GARAGE SLAB	97.2
BASEMENT	90.2
GRADE @ FRONT OF DWLG.	97.3
INV. OUT OF DWLG.	88.4 89.85
INV. INTO SEPTIC TANK	88.2 89.65
INV. OUT OF SEPTIC TANK	88.0 89.4
INV. INTO DISTRIBUTION BOX	87.7 89.2
INV. OUT OF DISTRIBUTION BOX	87.6 89.1
EX. GRADE AT TRENCH	87.5 93.0
INV. @ TRENCH	87.5 89.0

*changes de
 per #112
 10-1-85*

LOT 3
 WHEELER-PHELPS
 TRACT #3023
 3RD EL. DIST. HOWARD CO., MD

NOTE: CONTRACTOR TO PROVIDE
 POSITIVE DRAINAGE AWAY FROM
 FOUNDATION AT ALL TIMES.



LOCATION PLAN
SCALE: 1" = 100'

COORDINATES		
NO.	NORTH	EAST
1	5096.54	1533.26
2	5011.59	1519.89
3	4741.87	1477.44
4	4771.93	1614.17
5	4578.27	1584.02
6	4481.51	1471.33
7	4461.96	1448.56
8	4036.61	1139.09
9	5000.00	1000.00
10	5028.23	1209.55
11	4237.86	1094.37
12	4958.74	1234.74

CURVE DATA					
NO.	R	L	Δ	T	CHD. BEARING
11-12	2000'	141.95'	44°	71.09'	N 81° 32' E 141.92'

GENERAL NOTES:

- TAX MAP NO. 9 PARCEL NO. 106
- DEED REFERENCE: 773/259
- COORDINATES SHOWN HEREON ARE ASSUMED.
- THIS AREA DESIGNATES A PRIVATE SEWAGE EASEMENT OF APPROXIMATELY 10,000 # A.S. REQUIRED BY THE MD. STATE HEALTH DEPT. FOR INDIVIDUAL SEWAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWAGE IS AVAILABLE & SERVICING ANY RESIDENTIAL STRUCTURE CONSTRUCTED ON THESE BUILDING SITES. THIS EASEMENT SHALL BECOME NULL & VOID UPON CONNECTION TO A PUBLIC SEWAGE SYSTEM.
- THE LOTS SHOWN HEREON COMPLY WITH THE MINIMUM OWNERSHIP WIDTH & LOT AREAS AS REQUIRED BY THE MD. STATE DEPT. OF HEALTH REGULATIONS. PRIVATE WATER & SEWAGE TO BE UTILIZED.

AREA TABULATION
 1) TOTAL AREA OF PROPERTY = 4.323 AC.±
 2) TOTAL NO. OF LOTS = 3
 3) TOTAL AREA OF LOTS = 3.025 AC.±
 4) AREA OF WIDENING = 1.298 AC.±

APPROVED: FOR PRIVATE WATER & PRIVATE SEWAGE SYSTEMS. HOWARD CO. HEALTH DEPARTMENT.

Joseph Brooks 2-8-77
 COUNTY HEALTH OFFICER DATE

APPROVED: HOWARD COUNTY OFFICE OF PLANNING & ZONING.

Thomas Hamish 2-16-77
 DIRECTOR DATE

APPROVED: FOR STORM DRAINAGE SYSTEMS & PUBLIC ROADS. HOWARD COUNTY DEPT. OF PUBLIC WORKS.

John Pagan 2-10-77
 DIRECTOR DATE

SURVEYORS CERTIFICATE:

I HEREBY CERTIFY THAT THE FINAL PLAT SHOWN HEREON IS CORRECT, THAT IT IS A SUBDIVISION OF ALL OF THE LANDS CONVEYED BY ESTHER T. WHEELER & LORRAINE T. PHELPS, PERSONAL REPRESENTATIVES, TO ESTHER T. WHEELER & LORRAINE T. PHELPS BY DEED DATED JUNE 28, 1976 & RECORDED AMONG THE LAND RECORDS OF HOWARD CO. IN LIBER 773 FOLIO 259, AND THAT ALL MONUMENTS ARE IN PLACE AS SHOWN IN ACCORDANCE WITH THE ANNOTATED CODE OF MD.

Robert E. Spellman
 ROBERT E. SPELLMAN, P.L.S. NO. 4503
 DATE: SEPT. 17, 1976

NOTE: NO BUILDING ADDITIONS OR ALTERATIONS TO ANY EXISTING STRUCTURE MAY TAKE PLACE AT A DISTANCE LESS THAN THE BUILDING SETBACK LINE INDICATED HEREON.

DEDICATION FOR INDIVIDUALS

WE, *Esther Phelps* AND *Esther Wheeler* OWNERS OF THE PROPERTY SHOWN & DESCRIBED HEREON, HEREBY ADOPT THIS PLAN OF SUBDIVISION, AND IN CONSIDERATION OF THE APPROVAL OF THIS FINAL PLAT BY THE OFFICE OF PLANNING & ZONING, ESTABLISH THE MINIMUM BUILDING RESTRICTION LINES & GRANT UNTO HOWARD CO., MD., ITS SUCCESSORS & ASSIGNS, (1) THE RIGHT TO LAY, CONSTRUCT & MAINTAIN SEWERS, DRAINS, WATER PIPES & OTHER MUNICIPAL UTILITIES & SERVICES, IN & UNDER ALL ROADS & STREETS RIGHT-OF-WAYS & THE SPECIFIC EASEMENT AREAS SHOWN HEREON; (2) DEDICATE TO PUBLIC USE THE DEPS OF THE STREETS &/OR ROADS & FLOODPLAINS & OPEN SPACE WHERE APPLICABLE, & FOR ONE DOLLAR (\$100) CONSIDERATION, HEREBY GRANT THE RIGHT & OPTION TO HOWARD CO. TO ACQUIRE THE FEE SIMPLE TITLE TO THE DEPS OF THE STREETS &/OR ROADS & FLOODPLAINS & OPEN SPACE WHERE APPLICABLE; (3) THAT NO BUILDING OR SIMILAR STRUCTURE OF ANY KIND SHALL BE ERECTED ON OR OVER THE SAID EASEMENTS & RIGHT-OF-WAYS AND (4) IT IS FURTHER AGREED THAT MAINTENANCE OF ALL WATERWAYS, DRAINAGE EASEMENTS &/OR FLOODPLAINS SHOWN HEREON ARE THE RESPONSIBILITY OF THE PROPERTY OWNER, ITS SUCCESSORS & ASSIGNS.
 WITNESS MY/OUR HANDS THIS 3RD DAY OF DECEMBER 1976.
M. B. Phelps

OWNER & DEVELOPER

ESTHER T. WHEELER & LORRAINE T. PHELPS
 1975 MOUNT VIEW RD. MARRIOTTSVILLE, MD. 21104
 RECORDED PLAT 3623
 2-17-77

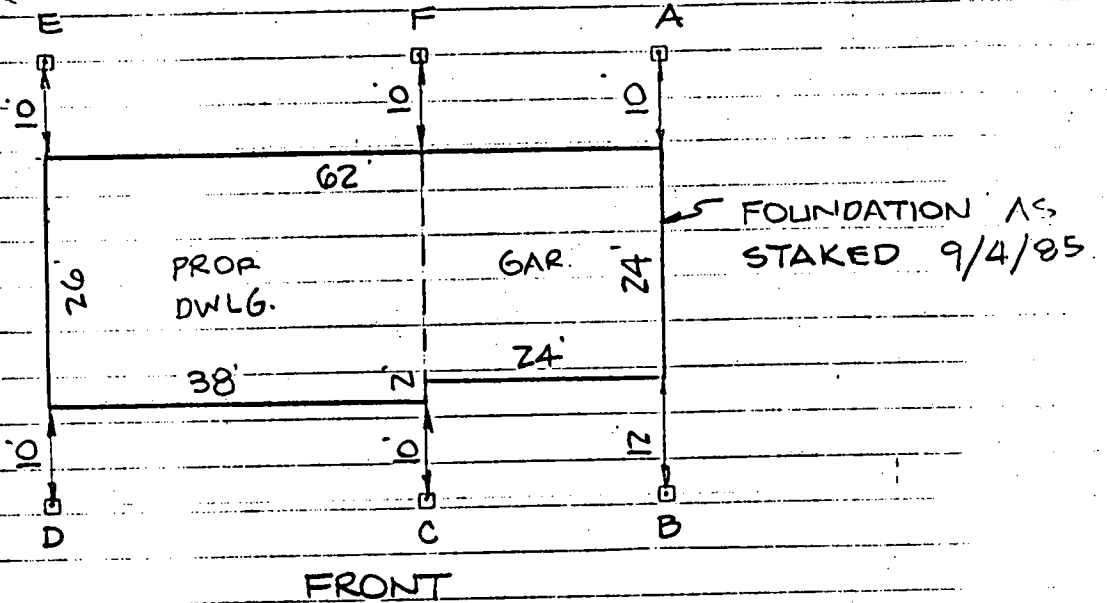
SPELLMAN, LARSON & ASSOCIATES, INC.
 CIVIL ENGINEERS & LAND SURVEYORS
 SUITE 110 JEFFERSON BLDG.
 TOWSON, MARYLAND 21204
 823-3535

FINAL SUBDIVISION PLAT
 OF
"WHEELER-PHELPS TRACT"
 3RD ELECTION DISTRICT HOWARD COUNTY, MD.
 SCALE: 1" = 50'
 SEPTEMBER 17, 1976

HUB LAYOUT PLAN

9/7/85

□ - DENOTES ⊕ HUB + TACK SET



HUB	ELEV.
A	93.40
B	95.49
C	95.56
D	96.14
E	94.16
F	93.51

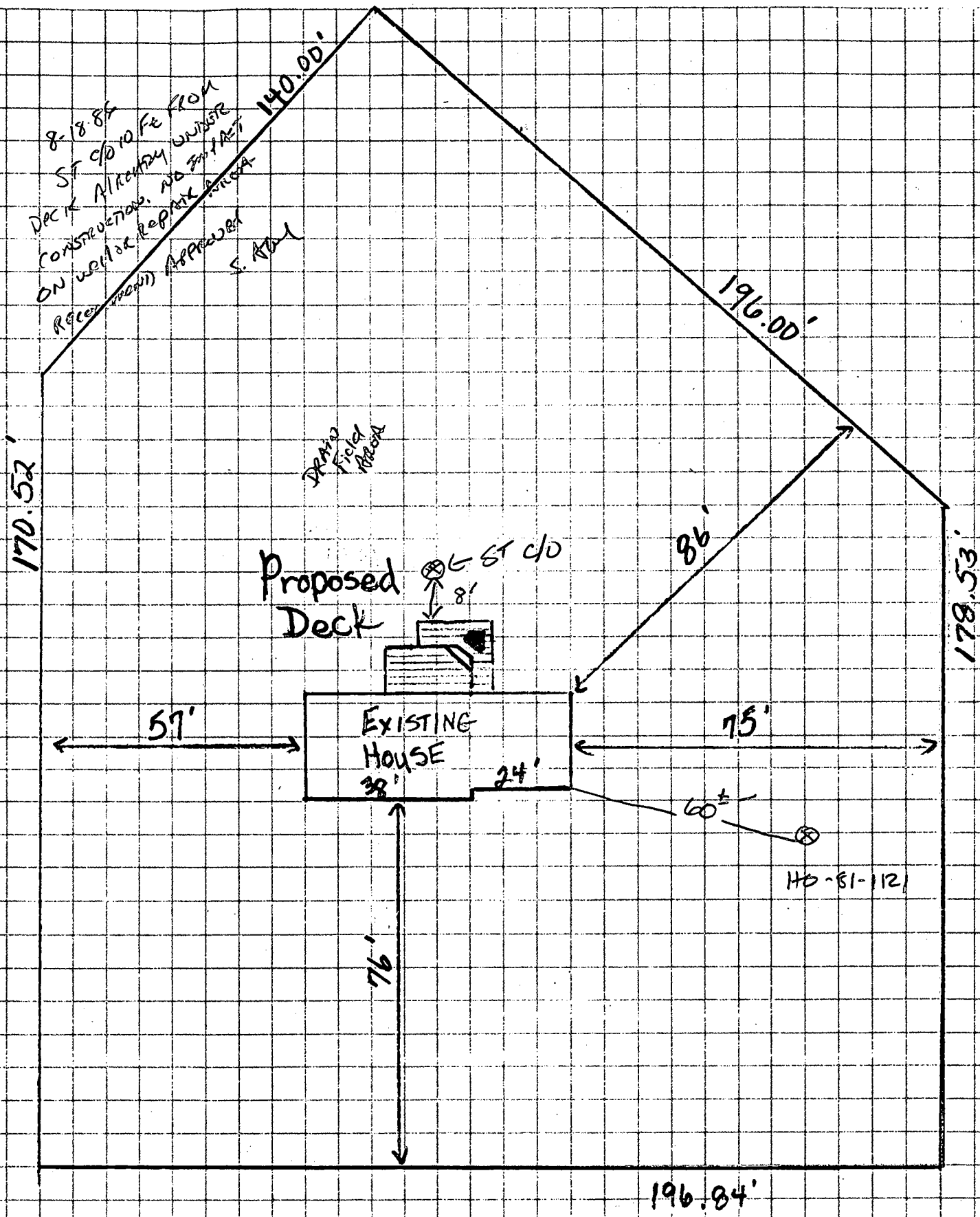
7 28 29 30	18 19 20 21 22 23 24 25 26 27 28 29 30 31	22 23 24 25 26 27 28 29 30 31
OCTOBER	NOVEMBER	DECEMBER
M T W T F S	S M T W T F S	S M T W T F S
1 2	1 2 3 4 5 6	1 2 3 4
3 4 5 6 7 8 9	7 8 9 10 11 12 13	5 6 7 8 9 10 11
11 12 13 14 15 16	14 15 16 17 18 19 20	12 13 14 15 16 17 18
17 18 19 20 21 22 23	21 22 23 24 25 26 27	19 20 21 22 23 24 25
24 25 26 27 28 29 30	28 29 30	26 27 28 29 30 31

BALTIMORE, MD. 21202

FREE TELEPHONE

685-2997

CALL 1



HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER
300138896

Building Address 1965 Mt View Rd
Plummersville Md. 21044
Suite/Apt. #: _____ SDP/WP/Petition #: N/A
Census Tract 6030 Subdivision Whelan/Philips Tract
Section _____ Area _____ Lot 3
Tax Map 9 Parcel 297 Grid 24
Zoning RH-D-20 Map Coordinates 5113 Lot size 1.018 AC

Property Owner's Name David & Lynn Wolf
Address 1965 Mt. View Rd. 21044
City Plummersville State MD Zip Code 21044
Home Phone 410-442-1872 Work Phone _____
Applicant's Name & Mailing Address, (if other than stated hereon):
NORMA L. LEMMON
10235 Shiloh Meadows Ct.
ELICOTT CITY MD. 21042
Phone 410-313-8828 Fax 410-313-8828

Existing Use SFD Residence
Proposed Use SFD Residence 75,000
Estimated Construction Cost \$ _____
Description of Work Garage Addition 107' x 16'
Kitchen Addition & Addition to Deck
on gravel - new

Contractor Company Future Builders
Contact Person NORMA LEMMON
Address 10235 Shiloh Meadows Ct.
City ELICOTT State MD Zip Code 21042
License No. CTR 01753
Phone 410-313-8828 Fax SAME

Occupant or Tenant Owner
Contact Name Owner
Address _____
City _____ State _____ Zip Code _____
Phone _____ Fax _____

Engineer or Architect Company KMA Architects
Contact Person Kevin McKenna
Address P.O. Box 722
City Columbia State MD Zip Code 21045
Phone 410-381-5817 Fax 410-381-0929

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: _____	Water Supply: _____ Public _____ Private _____
No. of stories: _____	Sewage Disposal: _____ Public _____ Private _____
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
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: <u>N/A</u> <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____

Building Characteristics

SF Dwelling SF Townhouse
 Addition Depth _____ Width _____
 1st floor: 32' 24'
 2nd floor: 28' 26'
 Basement _____
 Finished Basement Unfinished Basement
 Crawl space Slab on Grade
 No. of Bedrooms 2
 Multi-family dwellings: _____
 No. of efficiency units: N/A
 No. of 1 BR units: _____
 No. of 2 BR units: _____
 No. of 3 BR units: _____
 Other Structure: Deck Addition
 Dimensions: 10' x 16'
 Footings: 1' x 11" 16"
 Roof: Asph/Flt
 _____ 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 ON TO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

David Wolf
Applicant's Signature

David Wolf
Print Name

Title/Company

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

AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official		
Health Engineering, DPZ	<u>10/16/02</u>	<u>[Signature]</u>
Health		
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#: _____

Filing fee	\$ <u>21</u>
Permit fee	\$ <u>1004</u>
Excise tax	\$ <u>1004</u>
Add'l per. fee	\$ _____
TOTAL FEES	\$ <u>2029</u>
Sub-total paid	\$ _____
Balance due	\$ _____
Check	# <u>0073</u>
Validation	# _____

SITE PLAN: 1"=30'

MARRIOTTVILLE - HOWARD COUNTY - MD
Map 9 GRID 24 PARCEL 297

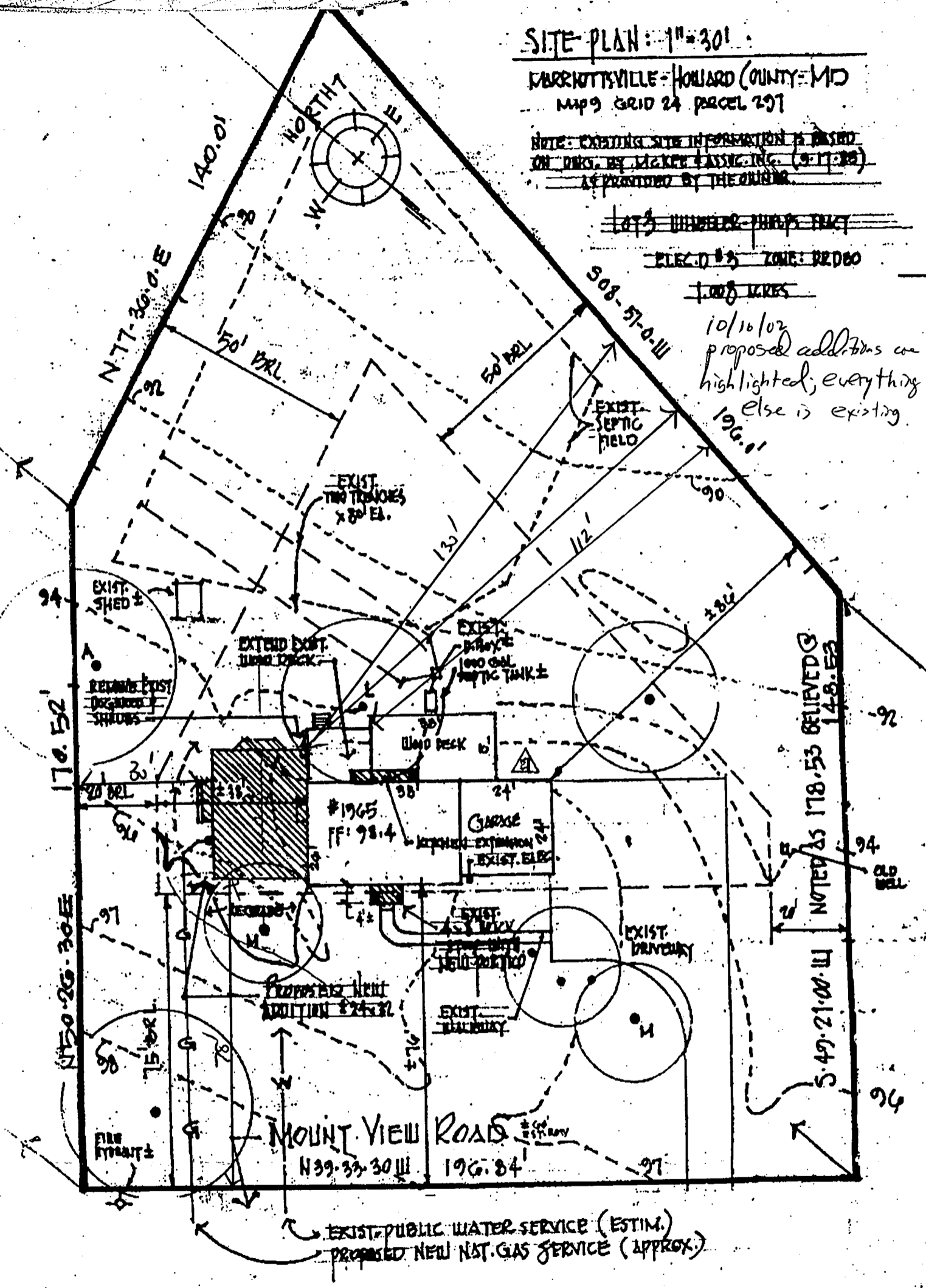
NOTE: EXISTING SITE INFORMATION IS BASED
ON DATA BY MCKER FASSING, INC. (9-17-88)
AS PROVIDED BY THE OWNER

~~LOT 3 UNIMPLEM. TRACT~~

ELECT. #3 ZONE: R2DEO

1000 WRES

10/16/02
proposed additions are
highlighted; everything
else is existing.



EXIST. PUBLIC WATER SERVICE (ESTIM.)
PROPOSED NEW NAT. GAS SERVICE (APPROX.)