

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

05-350492

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXX~~

410-313-2640

INDEXED

P 1
A 51350-B
A 21295 B

DISTRICT _____

DATE _____

DATE SYSTEM APPROVED _____

INSPECTOR _____

_____ IS PERMITTED TO INSTALL _____ ALTER _____

ADDRESS _____ PHONE _____

SUBDIVISION _____ LOT _____ ROAD 12859 Rt. 108

PROPERTY OWNER Ronald Regan

ADDRESS _____

SEPTIC TANK CAPACITY _____ GALLONS

NUMBER OF BEDROOMS _____

_____ SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED _____

PLANS APPROVED BY _____ DATE _____

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

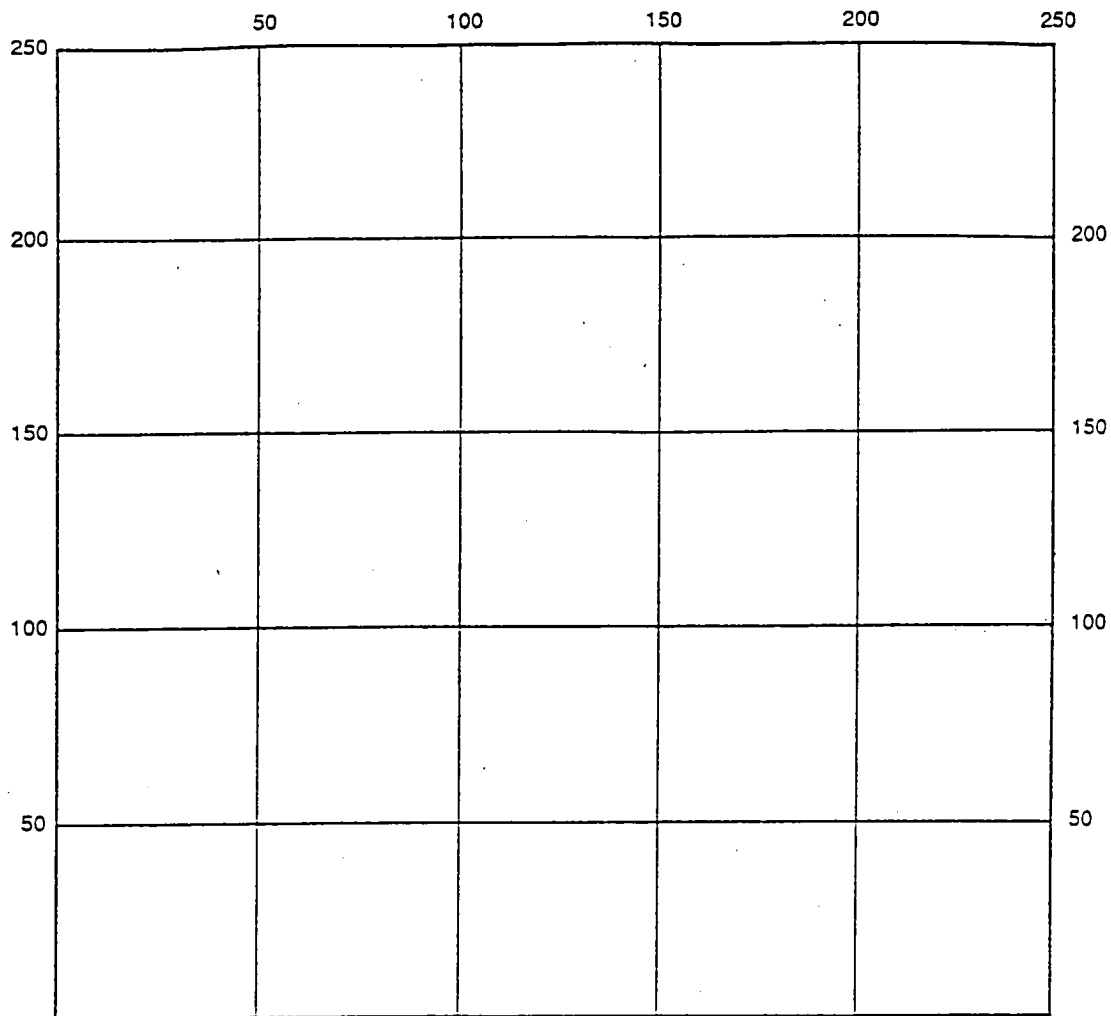
NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

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 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



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL _____ CLEANOUTS _____

DISTRIBUTION BOX LEVEL _____

DRAIN FIELD/TITLE DEPTH _____ FT. TRENCH WIDTH _____ FT. INLET DEPTH _____ FT.

EFFECTIVE GRAVEL DEPTH _____ FT. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ ONE SIDEWALL/BOTTOM AREA _____ SQ. FT.

DRYWALL INSIDE DIAMETER _____ FT. EFFECTIVE DEPTH BELOW INLET _____ FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS: _____

DATE SYSTEM APPROVED _____ INSPECTOR _____

21270

Health Dept.

DEPARTMENT PERMITS (410) 313-3800	SECTIONS, LICENSES AND PERMITS COURT HOUSE DRIVE CITY, MD 21043 2455 INSPECTIONS (410) 313-1810 AUTOMATED INFORMATION (410) 313-3800	HOWARD COUNTY PERMIT APPLICATION	PERMIT NUMBER B00121235
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Building Address <u>12859 Route 108</u> <u>HIGHLAND, MD 20777</u>	Property Owner's Name <u>Kaymaud Regan</u>
Suite/Apt. #: <u>N/A</u> SDP/WP/Petition #: <u>N/A</u>	Address <u>12859 Route 108</u>
Census Tract <u>6051-02</u> Subdivision <u>N/A</u>	City <u>Highland</u> State <u>MD</u> Zip Code <u>20777</u>
Section <u>N/A</u> Area <u>N/A</u> Lot <u>N/A</u>	Home Phone <u>(301) 854-2415</u> Work Phone _____
Tax Map <u>3A</u> Parcel <u>200</u> Grid <u>24</u>	Applicant's Name & Mailing Address, (if other than stated hereon): <u>Kelly Regan</u> <u>12859 Route 108</u> <u>Highland, MD 20777</u>
Zoning <u>RR-DEO</u> Map Coordinates <u>14C11</u> Lot size _____	Phone <u>(301) 854-2415</u> Fax <u>(301) 854-2415</u>
Existing Use <u>Residential - SF Dwelling</u>	Contractor Company <u>Inside Line</u>
Proposed Use <u>Residential - SF Dwelling</u>	Contact Person <u>Kelly Regan</u>
Estimated Construction Cost \$ <u>100,000</u>	Address <u>12859 Route 108</u>
Existing kitchen to be demolished removed	City <u>Highland</u> State <u>MD</u> Zip Code <u>20777</u>
Description of Work <u>Addition to</u>	License No. <u>49674</u>
<u>existing structure: 2 story</u>	Phone <u>(301) 854-2415</u> Fax <u>(301) 854-2415</u>
<u>3 bedrooms, 3 1/2 baths, kitchen, family</u>	Engineer or Architect Company <u>Living Concepts</u>
Occupant or Tenant <u>Kelly Regan Room's shared</u>	Contact Person _____
Contact Name <u>Kelly Regan</u>	Address <u>7400 Carmel Executive Park</u>
Address <u>12859 Route 108</u>	City <u>Charlotte</u> State <u>NC</u> Zip Code <u>28226</u>
City <u>Highland</u> State <u>MD</u> Zip Code <u>20777</u>	Phone <u>(704) 541-5917</u> Fax <u>(704) 542-1499</u>
Phone <u>(301) 854-2415</u> Fax <u>(301) 854-2415</u>	

BUILDING DESCRIPTION - COMMERCIAL		BUILDING DESCRIPTION - RESIDENTIAL	
<u>Building Characteristics</u>	<u>Utilities</u>	<u>Building Characteristics</u>	<u>Utilities</u>
Height: _____	Water Supply: _____	SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: _____
No. of stories: _____	Public <input type="checkbox"/> Private <input type="checkbox"/>	Depth <u>48'</u> Width <u>70'</u>	Public <input type="checkbox"/> Private <input checked="" type="checkbox"/>
Gross area, sq. ft. per floor: _____	Sewage Disposal: _____	1st floor: _____	Sewage Disposal: _____
Use group: _____	Public <input type="checkbox"/> Private <input type="checkbox"/>	2nd floor: <u>42'</u>	Public <input type="checkbox"/> Private <input checked="" type="checkbox"/>
Construction type: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>	Basement: <u>N/A</u>	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Reinforced Concrete <input type="checkbox"/>	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>	Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/>	Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Structural Steel <input type="checkbox"/>	Heating System: _____	Crawl space <input checked="" type="checkbox"/> Slab on Grade <input type="checkbox"/>	Heating System: _____
Masonry <input type="checkbox"/>	Electric <input type="checkbox"/> Oil <input type="checkbox"/>	No. of Bedrooms <u>4</u>	Electric <input checked="" type="checkbox"/> Oil <input type="checkbox"/>
Wood Frame <input type="checkbox"/>	Natural Gas <input type="checkbox"/>	Multi-family dwellings: _____	Natural Gas <input type="checkbox"/>
State Certified Modular <input type="checkbox"/>	Propane Gas <input type="checkbox"/>	No. of 1 BR units: _____	Propane Gas <input type="checkbox"/>
	Sprinkler system: <u>N/A</u> <input type="checkbox"/>	No. of 2 BR units: _____	
	Full <input type="checkbox"/>	No. of 3 BR units: _____	
	Partial <input type="checkbox"/>	Other Structure: _____	
	Other Suppression <input type="checkbox"/>	Dimensions: _____	
	# of Heads _____	Footings: _____	
		Roof: _____	
		State Certified Modular <input type="checkbox"/>	
		Manufactured Home <input type="checkbox"/>	

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 THERE TO, (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.

Applicant's Signature <u>Kelly Regan</u>	Print Name <u>KELLY REGAN</u>
Title/Company <u>Inside Line G.C.</u>	Date <u>11/5/99</u>

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

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#
Land Development, DPZ			Front: _____	43845
State Highways			Rear: _____	Filing fee \$ <u>25</u>
Building Official			Side: _____	Permit fee \$ _____
Dev. Engineering, DPZ			Side St.: _____	Excise tax \$ _____
Health	<u>11/29/99</u>	<u>[Signature]</u>	All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Fire Protection			Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Add'l permit fee \$ _____
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>			Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Lot Coverage for New Town Zone _____	Balance due \$ _____
ONE STOP SHOP: <input type="checkbox"/>			SDP/Red-line approval date _____	Check # <u>1388</u>
				Validation # <u>23662</u>
				Accepted by <u>[Signature]</u>



HOWARD COUNTY HEALTH DEPARTMENT

Diane L. Matuszak, M.D., M.P.H., County Health Officer

November 18, 1999

MEMORANDUM

TO: Raymoud Regan
12859 Route 108
Highland, Maryland 20777

FROM: Amy Mc Millen, R.S.
Water & Sewerage Program *AM*

RE: Building Permit # B00121235
12859 Route 108
Proposed Addition

This office has recently received the above referenced building permit application; however, we are unable to recommend approval of the application at this time. The application indicates that the proposal is to construct a 2-story addition including additional bedrooms.

Health Department records indicate that the existing septic system was installed on October 20, 1975 for a three bedroom house. Therefore, since the size of a septic system is based on the number of bedrooms in a home, it shall be necessary for the existing septic system to be inspected and upgraded to accommodate the potential increase in sewage flow associated with the added bedrooms.

If you wish to continue with the proposal, please contact me at the address below or by calling (410) 313-2640 to request the necessary septic repair permit (permit fee \$25.00). Initiation of this process is necessary prior to Health Department consideration of approval of the proposal.

Thank you in advance for your cooperation regarding this matter.

cc:file

*11/29/99
Resolved
see floor plans
★*

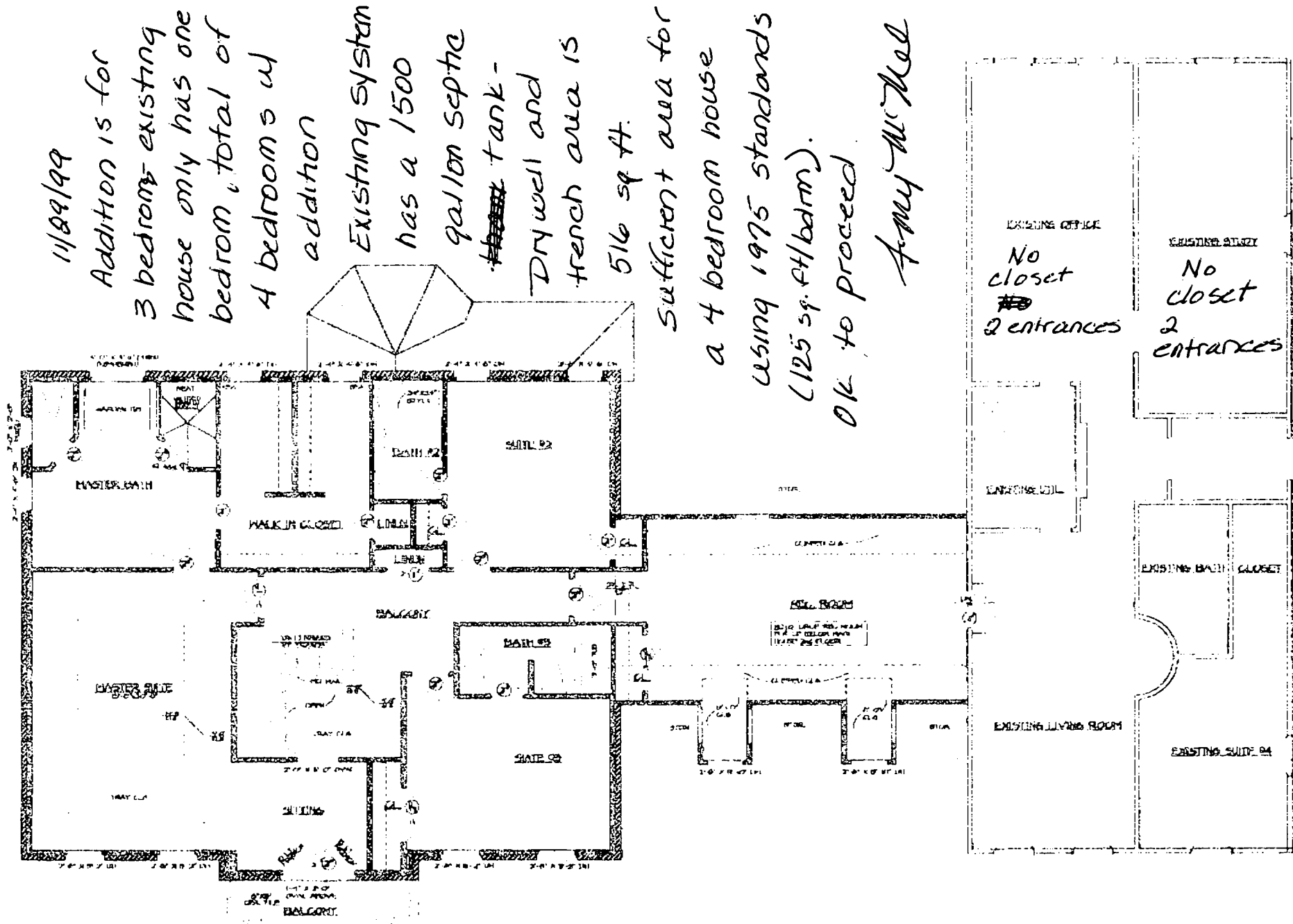
11/29/99

Addition is for
3 bedrooms existing
house only has one
bedroom, total of
4 bedrooms w/
addition

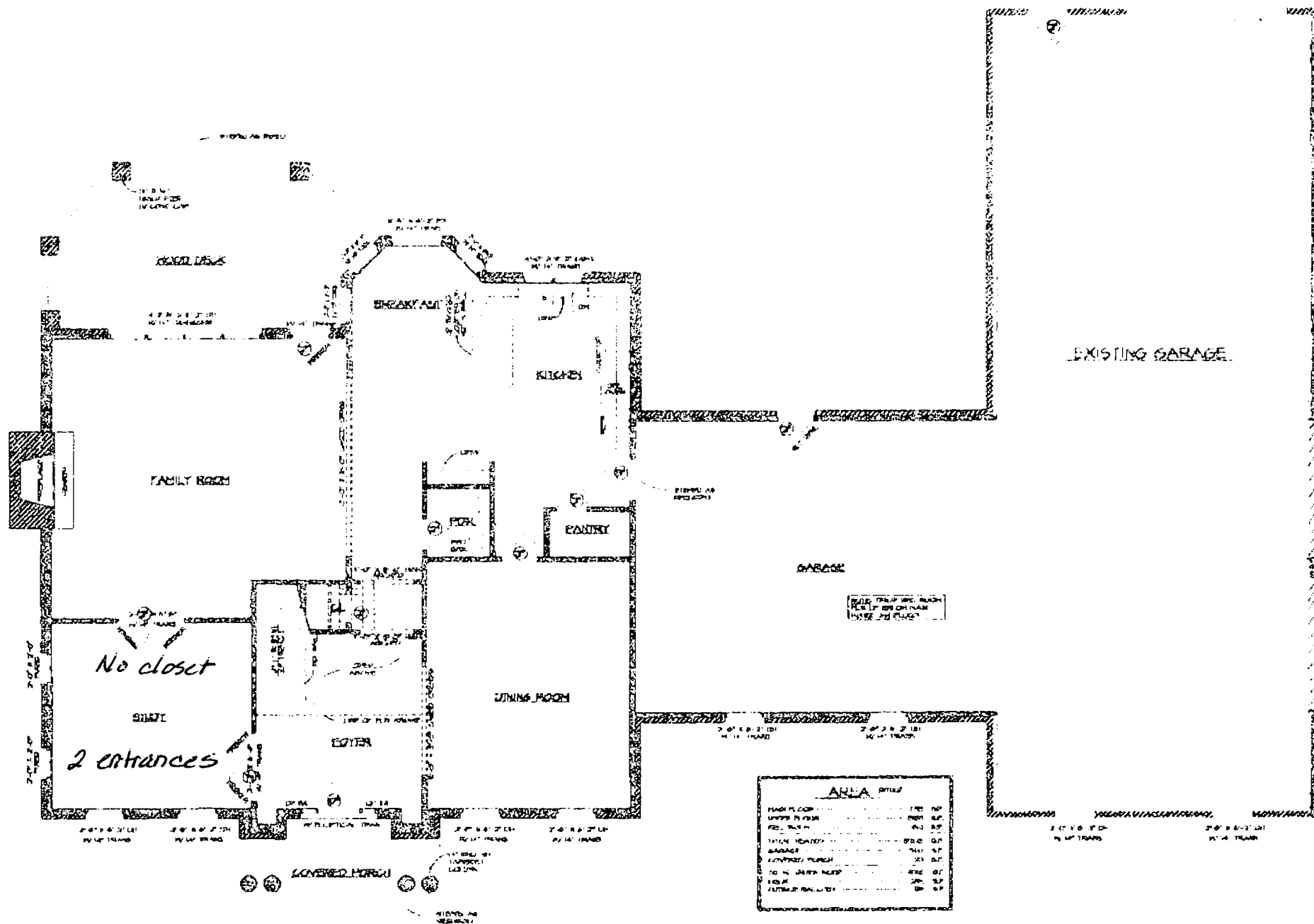
Existing system
has a 1500
gallon septic
tank -
dry well and
trench area is
516 sq ft.

Sufficient area for
a 4 bedroom house
using 1975 standards
(125 sq. ft./bdrm).
OK to proceed

Amy McNeil



ADDITION - UPPER FLOOR PLAN



James Hamilton Easter, et ux
309/212

Max A. Smith
181/261

John T. Swann, et ux
215/224

William L. Swann
465/133

John T. Swann
215/224

Cuyler W. McNeil
152/571

G.R. Cooney
541/547

Max A. Smith
181/261

Commerce Realty
660/164

83.505 ACRES ±

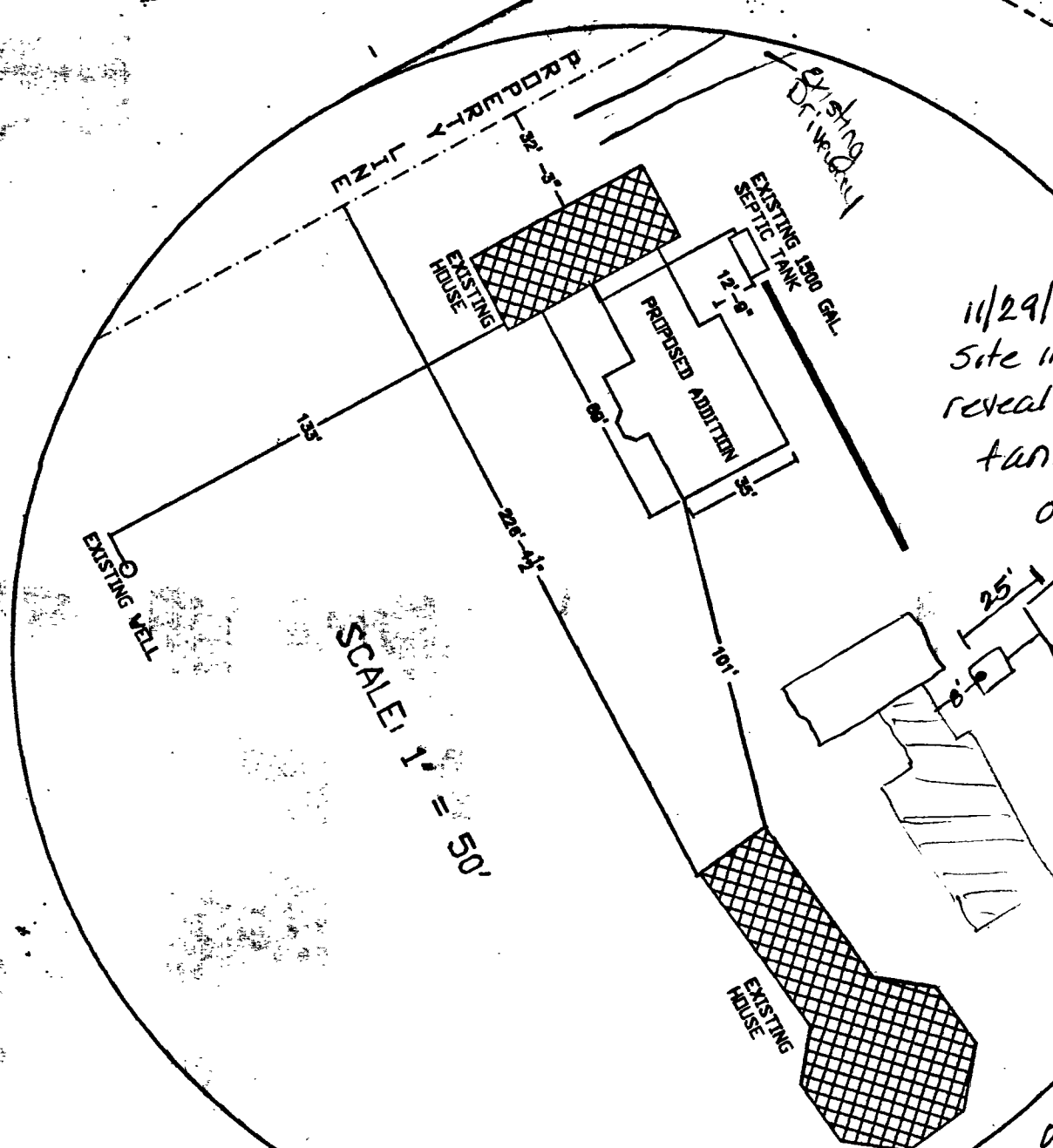
ELECTION DISTRICT: 05

LOCATED IN RECORDED SUBDIVISION: YES ☒ NO

LOT NO. N/A BLOCK NO. N/A NAME OF SUBDIVISION N/A SECTION

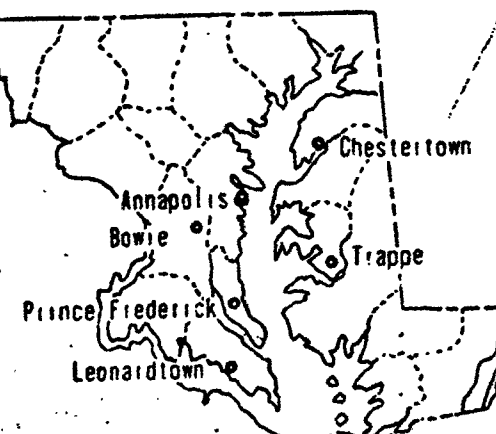
ZONING OF PROPERTY RR-BEO

AVAILABILITY OF PUBLIC WATER AND SEWER
WATER: YES ☐ NO ☒ SEWER: YES ☐ NO ☒



Foundation is dug
8' to foundation hole -
they are always overdog
by 12' so 10' separation
will be maintained
Proposal is for 4 bedroom total
because ex dwelling would have
been sized for 3 bedroom min
has one barn now-increasing
to 4 total will not affect functioning
of septic system

REGISTERED PROFESSIONAL ENGINEERS
AND LAND SURVEYORS



Scale 1"=200'
Drawn By H.T.F.
Approved By
Date 3/20/75
Job No 9410690
Folder Ref 9/1069
File No

SURVEY		Sheet No
VIRGINIA GAITHER ESTATE 83.505 ACRES		Seal STATE OF MARYLAND No. 2085 REGISTERED LAND SURVEYOR
NEAR HIGHLAND, CLARKSVILLE DIST. NO. 5 HOWARD CO., MD.		
FOR RAYMOND REGAN		