approved 5-16-85
Stayer

5/15/85 5/14/85 AM-AS AP
2 PM

PERMIT

P 35319

A 24671

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
992-2330

03-289591

INDEXED

ELLICOTT CITY

DISTRICT 3rd.

DATE 4/18/85

Burgemeister - Bell, Inc. IS PERMITTED TO INSTALL X ALTER

ADDRESS 10331 S. Dolfield Road, Owings Mills, Maryland 21117 PHONE 363-0880

SUBDIVISION Berndell Estates ROAD 920 Windriver Drive LOT 37

PROPERTY OWNER Carlton Hayek

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 1000 GALLONS NUMBER OF BEDROOMS 3

TRENCHES - 170 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 10 feet below original grade. Effective area begins at 4 feet below original grade. 6 feet of stone below distribution pipe.
LOCATION: Start the trench 10 feet from the 864 ft. property line and 185 feet from the 695' property line measured along the 864' property line.
NOTE: Trench to be 85 ft. long for a 3 bedroom house without garbage grinder. Nottrench to exceed 100 feet in length. If more tahn one trench used, a distribution box is required. Trenches to be installed on level ground. Call for inppection of trench before and after gravel is installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

BLDG. PERMIT SIGNED AND RETURNED 5-10-99
Issued to Bob Hayes
Shed

PLANS APPROVED BY Moorefield/Frommelt DATE June 14, 1977

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: IF TRENCH IS USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH.

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.

BLDG. PERMIT SIGNED AND RETURNED 4/13/92
Issued # 41737 - Pool

PERMIT VOID AFTER THREE YEARS.

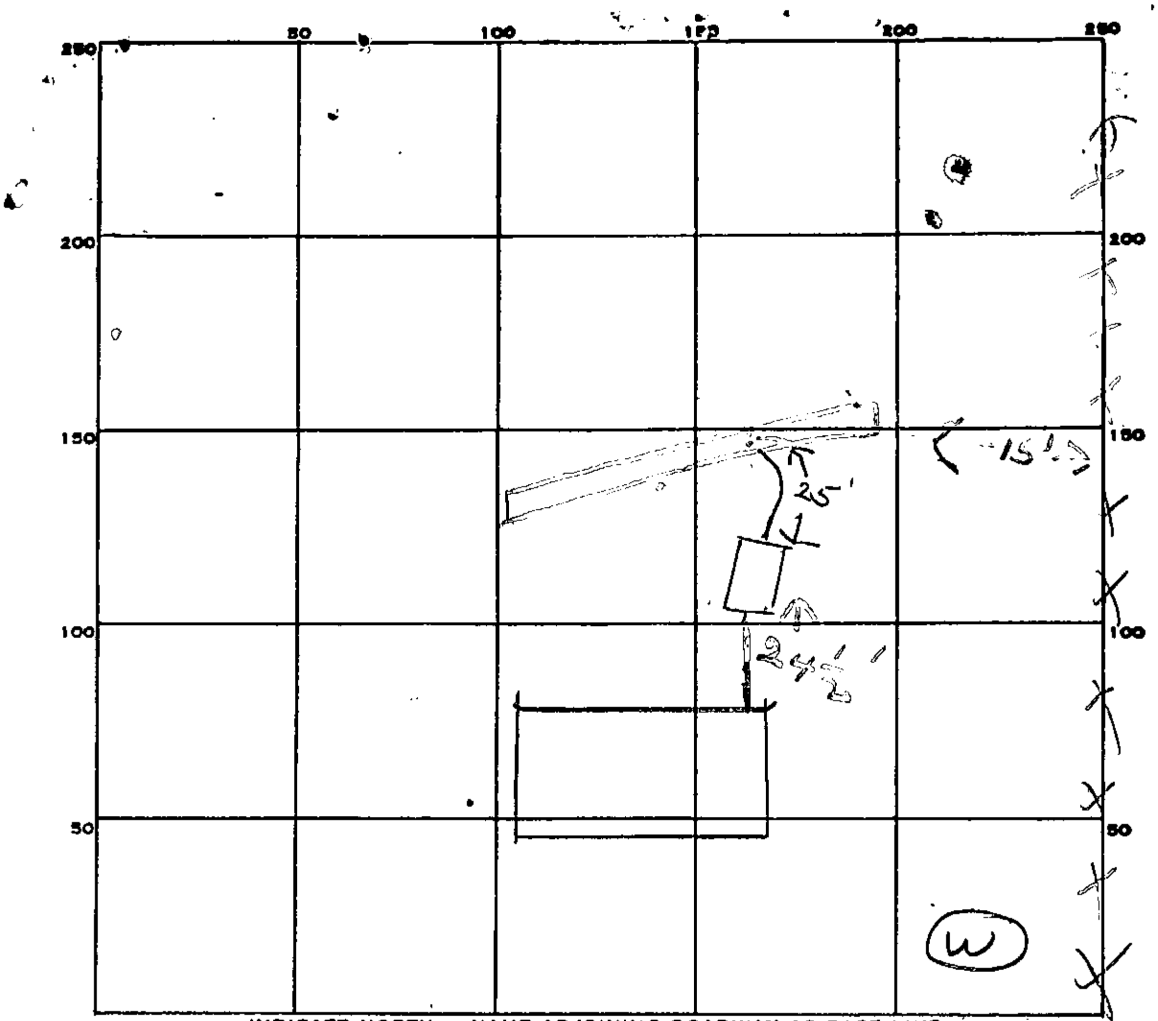
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED

A 24671

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

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082



INDICATE NORTH. – NAME ADJOINING ROADWAY AS BASE LINE.

Wandrevew Rd

PERMIT CARD

SEPTIC TANK, LEVEL ✓ 1000 gal CLEANOUTS ✓ Manhole

DISTRIBUTION BOX, LEVEL

TILE FIELD, DEPTH 10 FT. TRENCH WIDTH 2 FT.

GRAVEL DEPTH 6 IN. TOTAL LENGTH 86 FT.

NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA 516

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

ABSORBENT AREA 516 SQ. FT.

REMARKS 5/15/85 OK to cover to septic tank.
OK to add stones in trench JS
5/16/85 – OK to cover all work JS

DATE SYSTEM APPROVED 5-16-85 INSPECTOR Stager

APPLICATION

A 24671

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 3

DATE 11/3/76

* System First

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 ~~L & M, Inc~~ CARLTON HAYEK
~~Mrs. Lillian Podell~~

ADDRESS ~~4615 Old Court Rd. Pikesville~~ Md PHONE ~~Any questions call Browne Associates~~

PROPERTY LOCATION:

SUBDIVISION Berndell Estates LOT NO. 37

ROAD AND DESCRIPTION ~~River Rd. & Rt. 32~~ 920 Windriver Dr.

SIZE OF LOT ~~5.813 Acres~~ TYPE BLDG. 3 or 4
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE Single Fmly Dwelling

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

SIGNATURE OF APPLICANT Mrs. Lillian Podell

APPROVED BY R Moorefield FOR DW & French (KIND OF SYSTEM) DATE 24 June 77

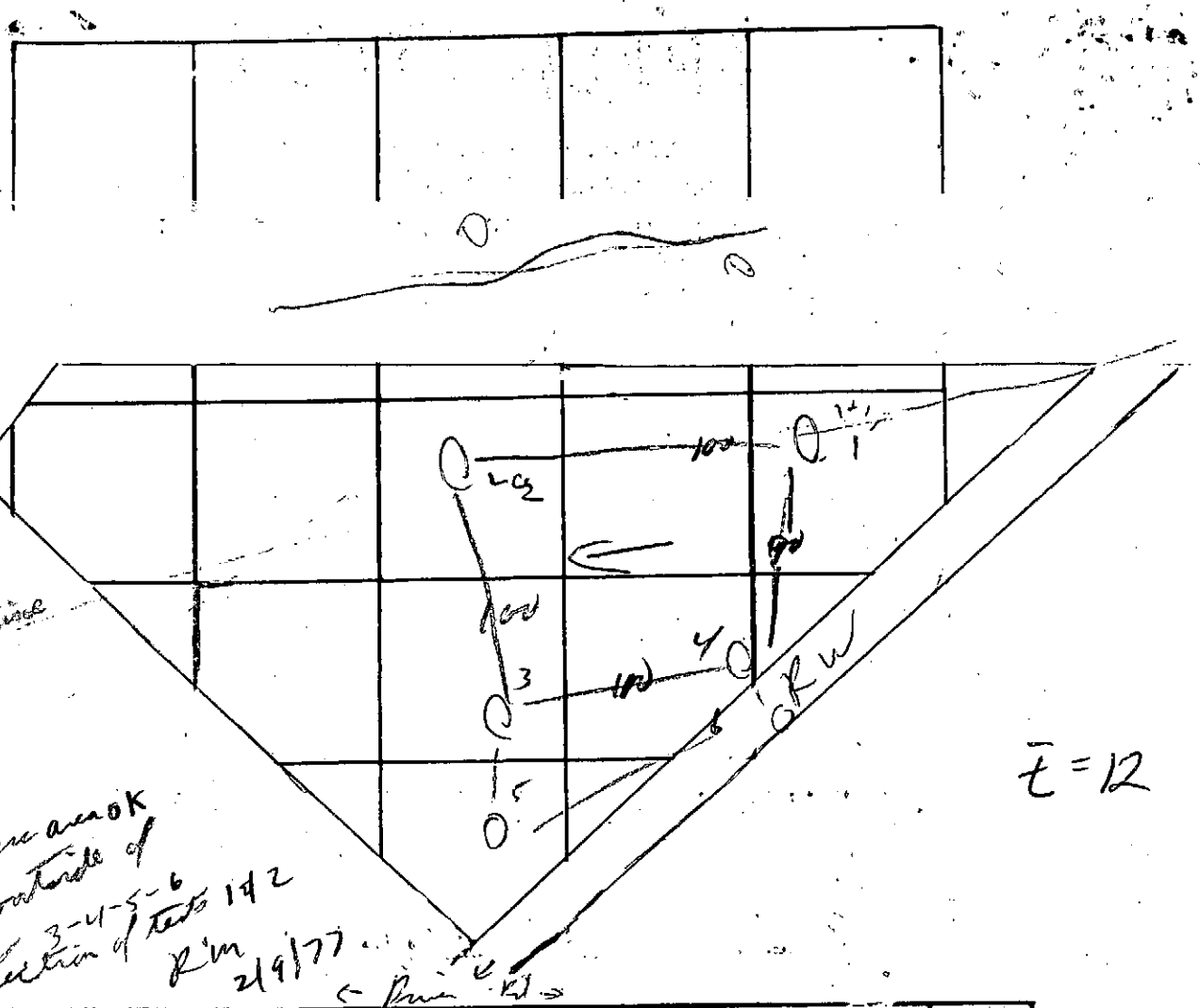
REJECTED BY _____ FOR _____ (KIND OF SYSTEM) DATE _____

HOLD PENDING FURTHER TESTS _____ DATE BP # 61912

REASONS FOR REJECTION OR HOLDING _____

PERMIT ISSUED 12-19-84

THIS IS NOT A PERMIT



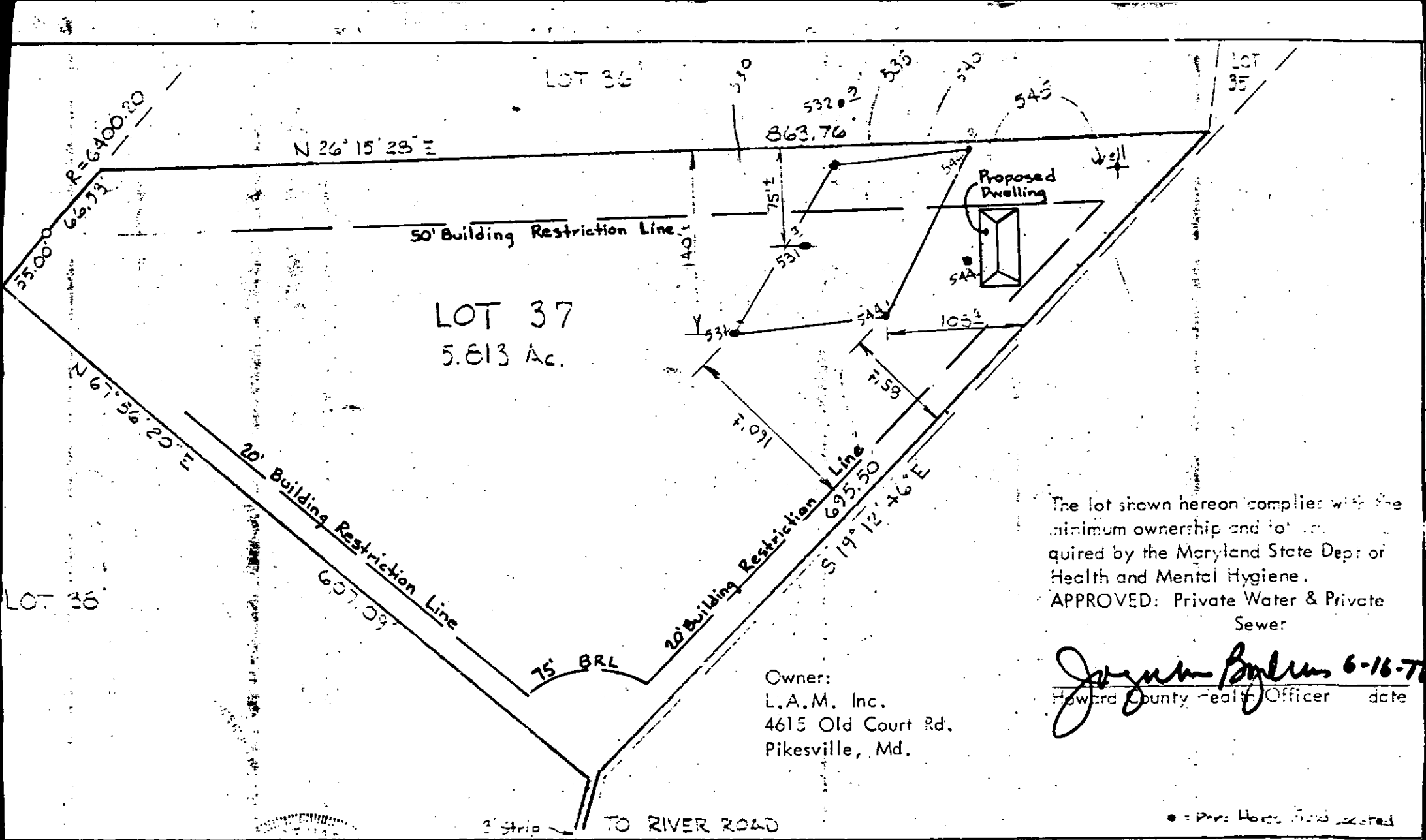
Dim perc area OK
to property outside of
border 3-4-5-6
in direction of tests 1 & 2
Rim 2/9/77
← Rim →

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
11/17/76	1	4	3 12	3 25	3 25	3 32	12
	1A	13	3 12	↓	↓	3 36	11
	2	4	3 28	3 34	3 34	3 40	6
	2A	13	3 28	3 33	3 33	3 40	7
	3	4	3 39	3 45	3 45	3 55	10
	3A	13	3 39	↓	↓	↓	10
	4	12½		4 15			
11/23	5	3	10 58	11 03	11 03	11 12	9
↓	5A	13	10 58	11 05	11 18	11 23	15
↓	6	12½	vis	sa	me	—	—

REMARKS _____

TYPE OF SOIL _____

TESTED BY _____ ALSO PRESENT: _____



The lot shown hereon complies with the minimum ownership and lot ... required by the Maryland State Dept of Health and Mental Hygiene.
APPROVED: Private Water & Private Sewer

Howard County Health Officer date 6-16-7

Owner:
L.A.M. Inc.
4615 Old Court Rd.
Pikesville, Md.

● = Pipe Here Found Located

REFERENCE MERIDIAN

RICHARD P. BROWNE ASSOCIATES
CONSULTING ENGINEERS, PLANNERS
WAYNE, N.J. COLUMBIA, MD.

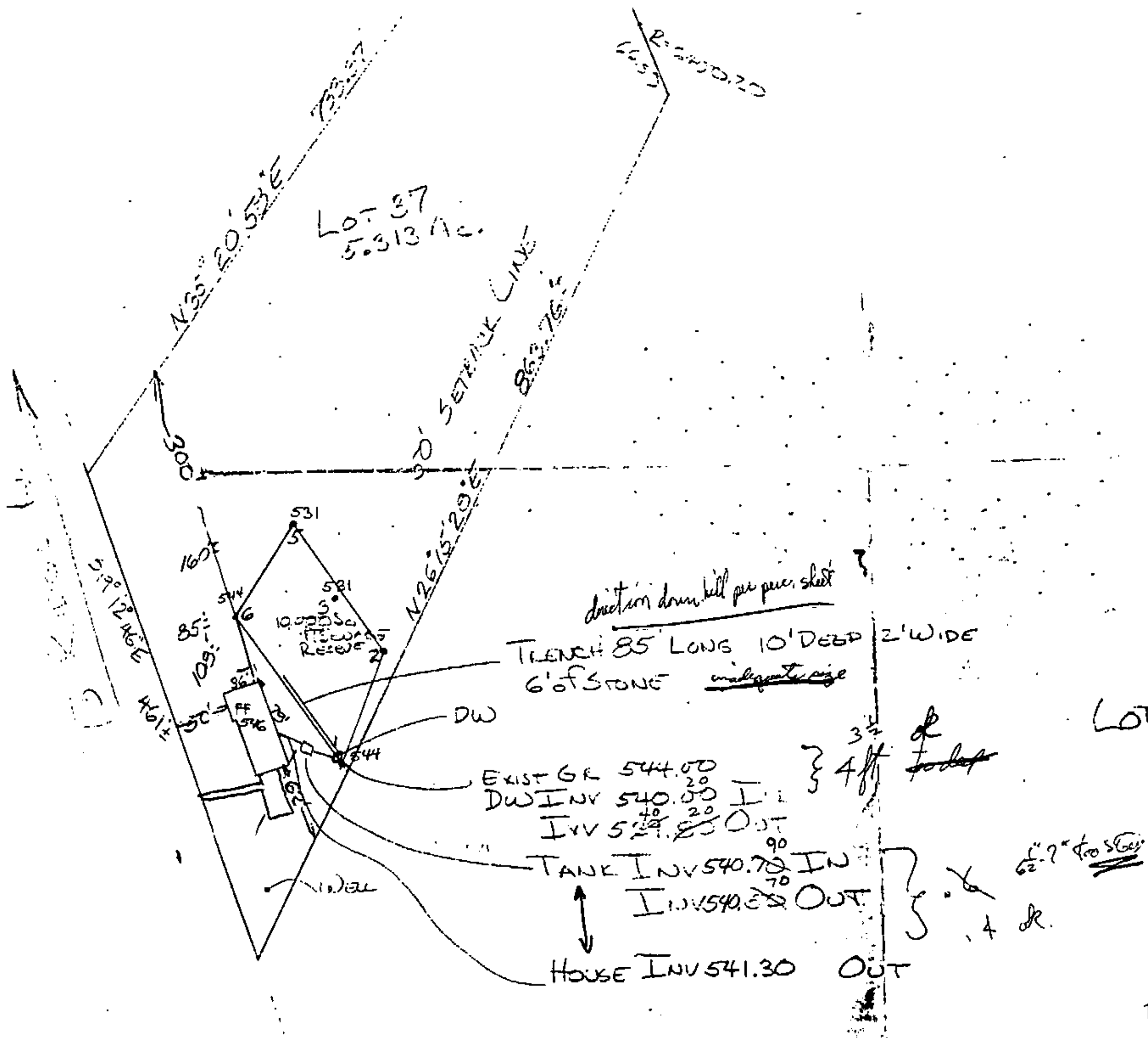
MAP OF PROPERTY OF
L A M Inc

SITUATED IN
2nd ... District Howard ... Md

SCALE: 1"=100' DATE: ...7

No. ...

3599 ... PLAN ... CHECK



Lot 37 Berndell Es

Rev 1-22-80

B.P. #61912
Permit signed 12/17/84

...m Built Residence

Krs Carlton Hauek
- 37 Berndell Estates

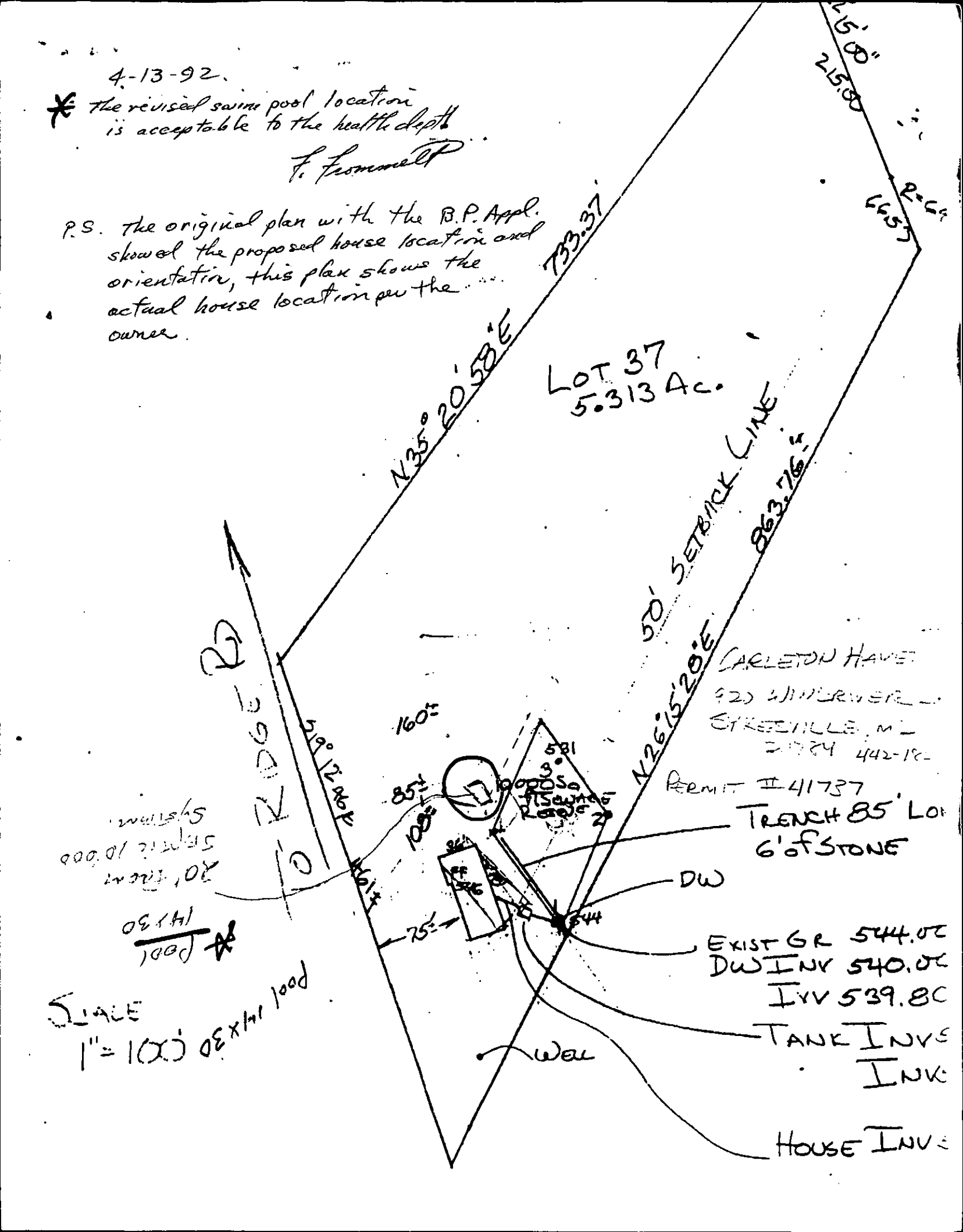
Matthews - Brown
Contractors Inc.
1707 Reisterstown Rd.
Pikesville Md. 21208

4-13-92.

* The revised swim pool location is acceptable to the health dept.

F. Fennell P

P.S. The original plan with the B.P. Appl. showed the proposed house location and orientation, this plan shows the actual house location per the owner.



C 1 3305 — SEQUENCE NO. (OEP USE ONLY)
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPE

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

COUNTY NUMBER A 24671

DATE Received
DATE WELL COMPLETED 07 07 84
Depth of Well 200 (TO NEAREST FOOT)
PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-81-0602

OWNER MATHEWS + BROWN CONSTRUCTION
STREET OR RFD WIND RIVER RD (last name / first name) TOWN WEST FRIENDSHIP
SUBDIVISION BERNDELL ESTATES SECTION LOT 37 (38?)

WELL LOG
Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (Use additional sheets if needed)	FEET FROM	FEET TO	Check if water bearing
OVER BURDEN	0	10	
SHALE	10	45	
GRAY ROCK —	45	200	X

correct
Carlton
Hayek

GROUTING RECORD
WELL HAS BEEN GROUTED (Circle Appropriate Box) yes Y / no N
TYPE OF GROUTING MATERIAL
CEMENT CM BENTONITE CLAY BC
NO. OF BAGS 9 NO. OF POUNDS 900
GALLONS OF WATER 54
DEPTH OF GROUT SEAL (to nearest foot)
from 0 ft. TOP to 45 ft. BOTTOM (enter 0 if from surface)

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

MAIN CASING TYPE	Nominal diameter top (main) casing (nearest inch)	Total depth of main casing (nearest foot)
ST	6	45

OTHER CASING (if used) — EACH CASING

diameter inch	depth (feet) from	to

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

C 2

		DEPTH (nearest ft.)	
EACH SCREEN 1	HO	45	200
2			
3			

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

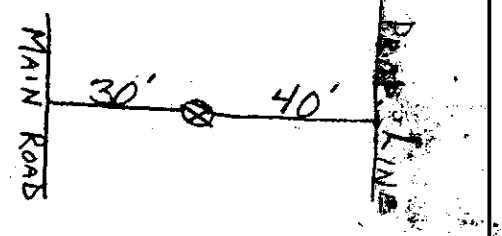
GRAVEL PACK from ____ to ____
IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

C 3

PUMPING TEST
HOURS PUMPED (nearest hour) 3
PUMPING RATE (gal. per min. to nearest gal.) 10
METHOD USED TO MEASURE PUMPING RATE SUBMERSIBLE
WATER LEVEL (distance from land surface)
BEFORE PUMPING 39
WHEN PUMPING 46
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 (CIRCLE) (YES or NO) 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 / − below LAND SURFACE (nearest foot)

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 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. 120
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

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

HEALTH

RECEIVED
HOWARD COUNTY
HEALTH DEPT.

JUL 13 12 09 PM '8

DIVISION OF
ENVIRONMENTAL
HEALTH

(call contractor)

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVE
ELLICOTT CITY, MD 21043
PERMITS (410)313-2455 INSPECTIONS (410)313-1810
AUTOMATED INFORMATION (410) 313-3900

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER B00116450

Building Address 920 Windriver Drive Sykesville, MD 21784
Suite/Apt. #: SDP/WP/Petition #:
Census Tract 6030 Subdivision N/A
Section N/A Area 4.4 Lot 37
Tax Map 9 Parcel 250 Grid 5
Zoning RR-DEO Map Coordinates 5 18 Lot size

Owner's Name Mr. & Mrs. Carlton Hayek
Address 920 Windriver Drive
City Sykesville State MD Zip Code 21784
Home Phone 442-1859 Work Phone
Applicant's Name & Mailing Address, (if other than stated hereon): Martin J. Niessner Const. Inc. 4839 Rollingtop Road Ellicott City, MD 21043
Phone 410-465-0435 Fax 410-461-8390

Existing Use SFD
Proposed Use SFD
Estimated Construction Cost $ 86000.00
Description of Work Remove exist. shed-type roof & screen & build gable-type roof over exist. 12' x 16'6" deck. w/ landing & steps

Contractor Company Martin J. Niessner Const. Inc
Contact Person Martin J. Niessner, Sr.
Address 4839 Rollingtop Road
City Ellicott City State MD Zip Code 21043
License No. 59080
Phone 41-465-0435 Fax 410-461-8390

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

Engineer or Architect Company n/a
Contact Person
Address
City State Zip Code
Phone Fax

BUILDING DESCRIPTION - *COMMERCIAL*

Building Characteristics
Height:
No. of stories:
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 ☐
___ NFPA #13
___ Full
___ Partial
___ Other Suppression

BUILDING DESCRIPTION - *RESIDENTIAL*

Building Characteristics
SF Dwelling ☒ SF Townhouse ☐
Depth Width
1st floor:
2nd floor:
Basement:
Finished Basement ☐ Unfinished Basement ☐
Crawl space ☐ Slab on Grade ☐
No. of Bedrooms
Multi-family dwellings:
No. of efficiency units:
No. of 1 BR units:
No. of 2 BR units:
No. of 3 BR units:
Other:
Dimensions:
Footings: pier
Roof: gable
___ State Certified Modular
___ Manufactured Home

Utilities
Water Supply:
X Public
X Private
Sewage Disposal:
___ Public
X 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 THE APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THE PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

VALIDATION

[signature] Martin J. Niessner, Sr.
Applicant's Signature *Print Name*
Martin J. Niessner Const. Inc. 2-24-99
Title/Company *Date*

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		
Dev. Engineering, DPZ		
Health	3/10/99	Mark E. Kilbin
Fire Protection		

Is Sediment Control approval required prior to issuance? YES ☐ NO ☐

CONTINGENCY CONSTRUCTION START: ☐
ONE STOP SHOP: ☐

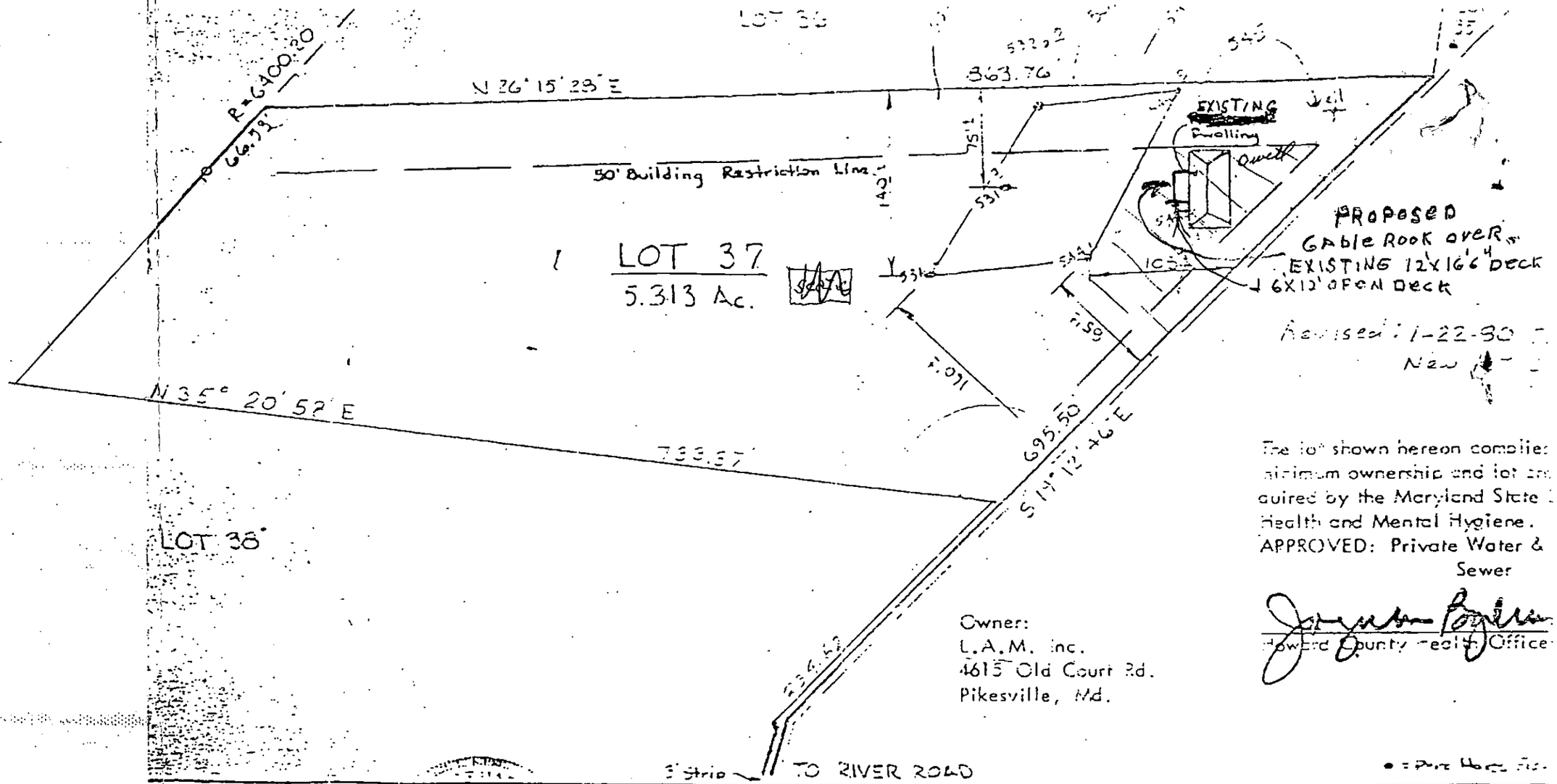
DPZ SETBACK INFORMATION
Front:
Rear:
Side:
Side St.:
All minimum setbacks met? YES ☐ NO ☐
Is Entrance Permit required? YES ☐ NO ☐
Historic District? YES ☐ NO ☐
Lot Coverage for NewTown Zone
SDP/Red-line approval date

PROPERTY ID#:
Filing Fee $ 25
Permit Fee $ 25 pd
(.10 sq. ft. ☐) (.15 sq. ft. ☐)
Excise Tax $
(.40 sq. ft. ☐) (.80 sq. ft. ☐)
TOTAL FEES 50
Check # 14615
Validation #
Accepted by:

Distribution of Copies- White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA

s:\permit.fm Rev. 8/25/98

1999 MAR -4 AM 8:38



Revised: 1-22-80

The lot shown hereon complies with minimum ownership and lot area required by the Maryland State Department of Health and Mental Hygiene.
APPROVED: Private Water & Sewer

Howard County Health Office

Owner:
L.A.M. Inc.
4615 Old Court Rd.
Pikesville, Md.

REFERENCE MERIDIAN

RICHARD P. BROWNE ASSOCIATES
CONSULTING ENGINEERS, PLANNERS
WAYNE, N.J. COLUMBIA, MD.

MAP OF PROPERTY OF
L.A.M. Inc.

SITUATED IN
3rd Election District Howard County

SCALE: 1"=100' DATE:

No.