12-11-85 ASAP

10-16-85 approved S, AGW

PERMIT

P 36082

A 30323

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
992-2330

INDEXED

ELLICOTT CITY
DISTRICT 3rd

{ I.C.O.P. Time expired }

DATE 10/09/85

Fogle Septic Cleaners IS PERMITTED TO INSTALL X ALTER

ADDRESS 1115 Streaker Road, Sykesville, Maryland 21784 PHONE 795-5670

SUBDIVISION Wynfield ROAD 2671 Wynfield Road LOT 14, Section 2

PROPERTY OWNER Keith Uithoven

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 - 180 sq. ft. per bedroom. Minimum Total sq. ft. for 3 bedrooms - ~~484~~ 540 sq. ft.
Trench 2 feet wide. Inlet 4½ feet below original grade. Maximum depth 11 feet below original grade. Effectiveaarea begins at 4½ feet below original grade. 6½ feet of stone below distribution pipe. LOCATION: Start the trench 85 feet from the front (330.45 ft. long) lot line and 175 feet from the right (481.56 ft. long) sideline. Continue to dig the trench on level ground the necessary distance, running towards the right front corner of the lot. NOTE: No trench to exceed 100 feet in length. If more than one trench used, a distribution box is required. Trenches to be installed on level ground. H/SA

PLANS APPROVED BY Frank Skinner DATE 5/21/85

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.

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 9/10/89 Sewal #23439

PERMIT VOID AFTER THREE YEARS.

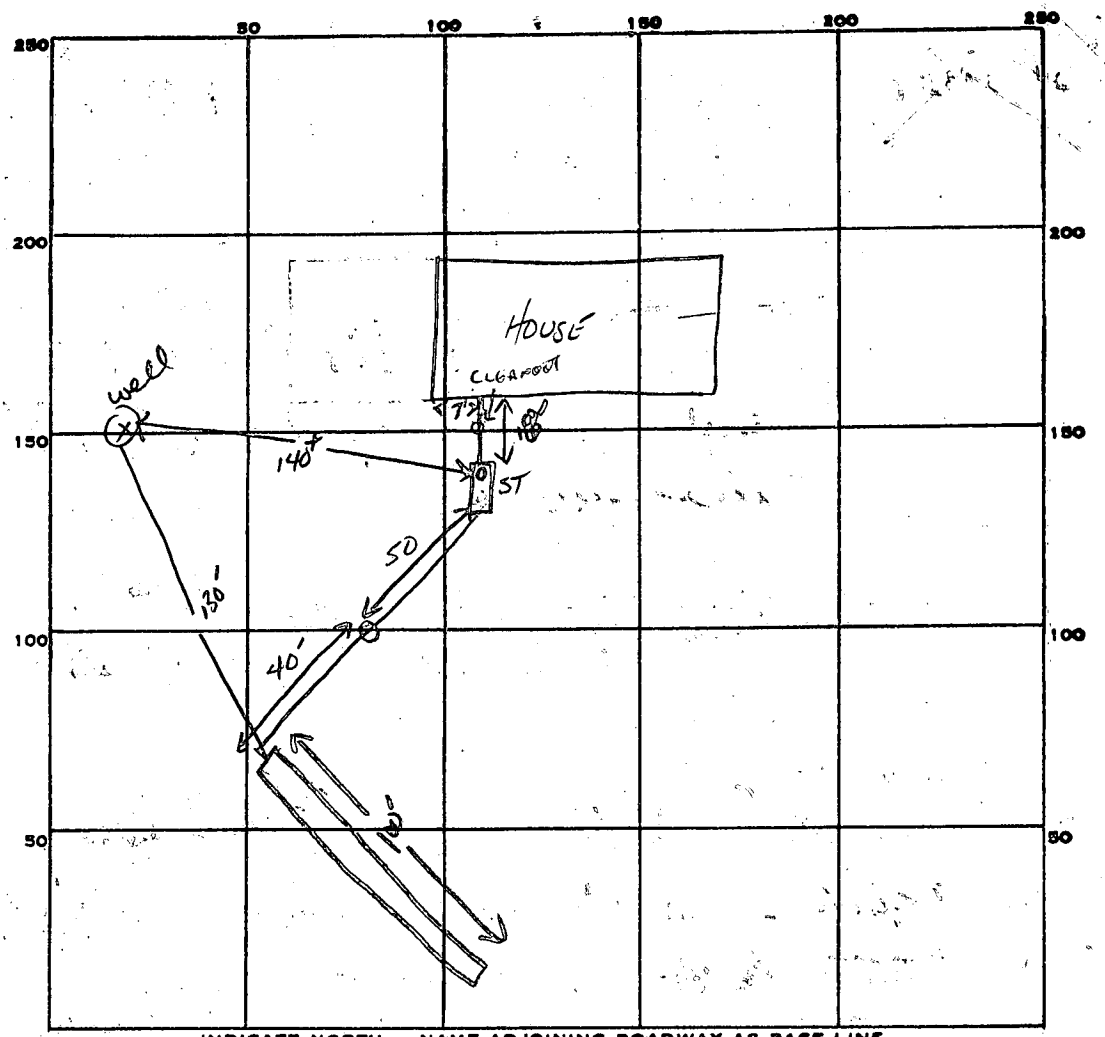
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED. 1 Story addition

A 30323

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

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082



WYNFIELD Rd,

PERMIT CARD _____

SEPTIC TANK, LEVEL ✓ 1000 GAL CLEANOUTS ST ✓ / 1 IN LINE

DISTRIBUTION BOX, LEVEL N/A

TILE FIELD, DEPTH 11' FT. TRENCH WIDTH 2 FT. INLET 5.5

GRAVEL DEPTH 5.5 Ft FT. TOTAL LENGTH 100 FT.

NUMBER OF TRENCHES 1 ~~TOTAL BOTTOM~~ ONE SIDE WALL AREA 550 ✓

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

ABSORBENT AREA 550 SQ. FT.

REMARKS 10-16-85 OK TO SCRAPE TRENCH AS DUG -> TRENCH COVERED IN SAND

DATE SYSTEM APPROVED 10-16-85 INSPECTOR J. Abel

PRELIMINARY

APPLICATION

A 30323

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P _____

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

DISTRICT 3rd.

DATE 10/31/79

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

See extra signed prelim plat for Rock location RH

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Land Associates Keith Uithoven

ADDRESS 3450 Ft. Meade Rd., No. 206, Laurel, Md. 20810 PHONE Tom Munz - 792-2242 or Ted Snovell - 265-6543

PROPERTY LOCATION WYNFIELD

14 sect 2 on Final

SUBDIVISION ~~Hoffman property~~ LOT NO. 14

ROAD AND DESCRIPTION ~~Route 144~~ 2671 Wynfield Road 14 ~~on~~ signed prelim

SIZE OF LOT 3 acres TYPE BLDG. 3 or 4 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.

SIGNATURE OF APPLICANT /s/ Ted Snovell for Land Associates

APPROVED BY R.H. & D.W.M. FOR DRYWELL DATE 12/27/79

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING Will perc OK RH

Copy given to Jim D.

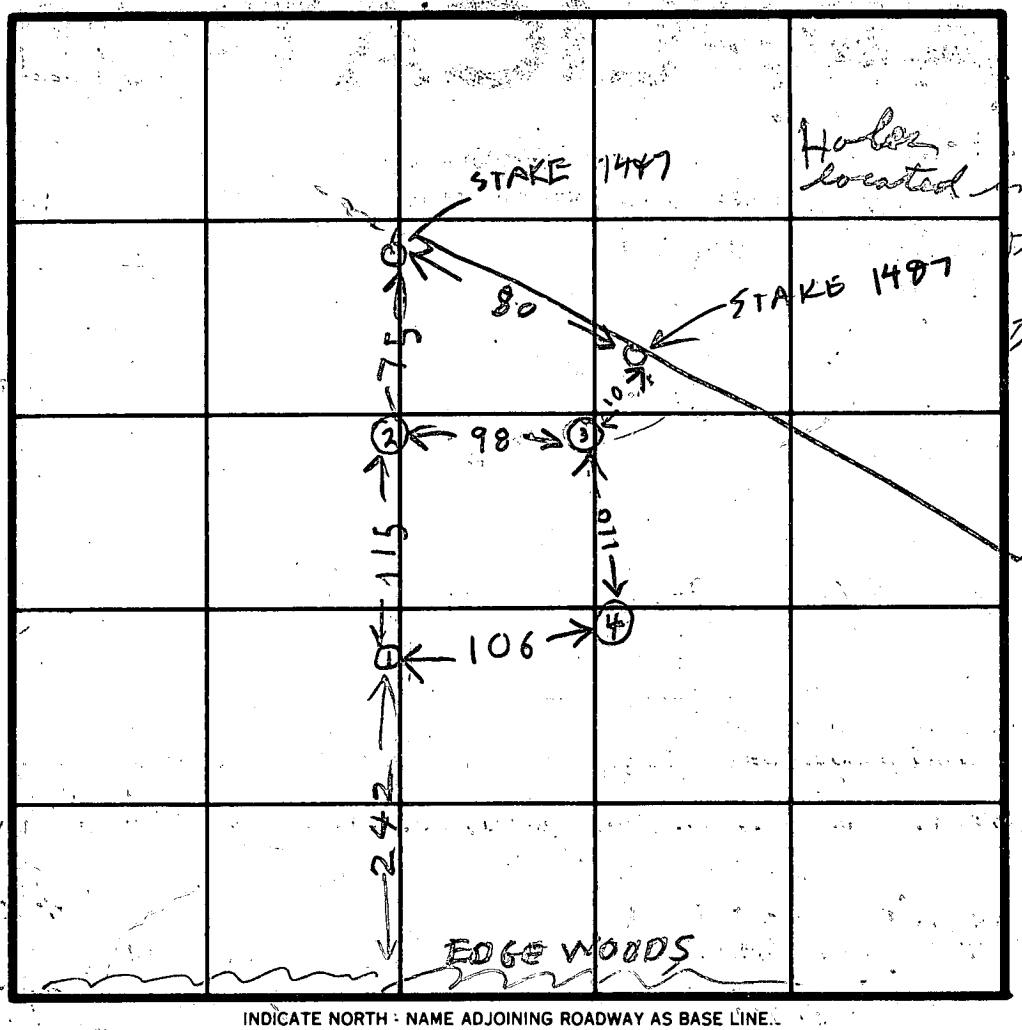
BLDG. PERMIT SIGNED AND RETURNED 7/25/80
Serial #65924

THIS IS NOT A PERMIT

14

SOIL PROFILE

0'



LOT 14

4 3 = HIGH
2 = MEDIUM
1 = LOW

INDICATE NORTH : NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
11/8/79	1 D	14	1012	1022	1022	1043	21
11/8/79	1 S	5	1012	1020	1020	1038	18
	2 S	5½	1014	1028	1028	1056	28
	2 D	14½	1014	1019	1019	1025	6
	3 S	4	1020	1021	1021	1024	3
	3 D	14½	1021	1024	1024	1029	5
	4 S	5	1033	1035	1035	1040	5
11/8/79	4 D	15	1033	1037	1037	1041	4

12 MIN. AVG. 4'/inch

REMARKS @ 935 11/8/79

TYPE OF SOIL

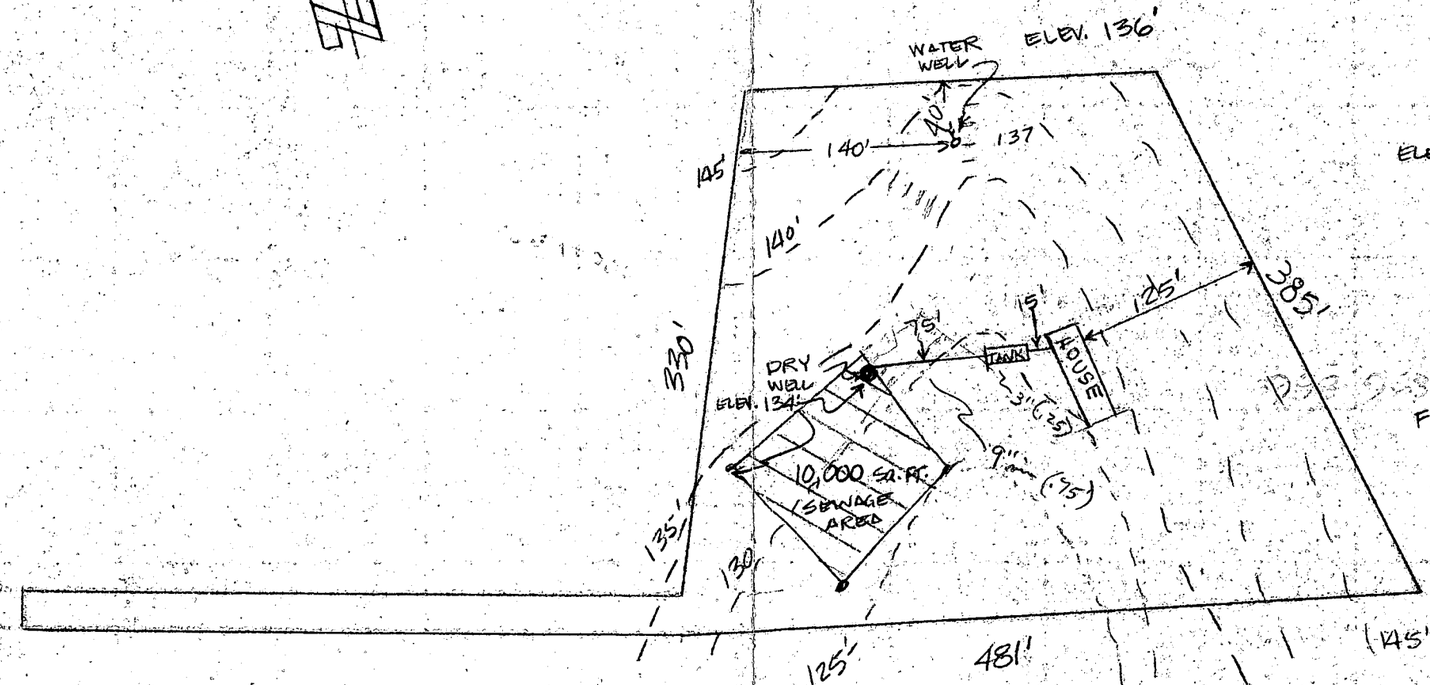
TESTED BY RH

ALSO PRESENT Jim Dusinski

Copy to

	Dia.	Tank	@ drop
3 -	15' Sq	+ 25'	+ 45'
4 -	15' Sq.	+ 60'	+ 90'

inlet 4½' mx.



ELEVATION: SEWAGE PIPE FROM HOUSE 130.5'
PIPE INTO SEPTIC TANK 130.25'
PIPE OUT OF TANK 130.50
PIPE INTO DRY WELL 129.25'
GRADE AT SEPTIC TANK 130.0'
GRADE AT DRY WELL 134.0'
FINISH GRADE AT HOUSE (PIPE EXIT) 134.5'

Invt. 129.5

VITHOVEN

B.P. # 65924

LOT 14, SECTION 2
"WYNFIELD," HOWARD COUNTY

8:00 AM - 6 hrs
9:30 grout.

Page ___ of ___
Date May 28, 1985

Review H 9415

JS

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-1028
Location of property (road) _____
Subdivision Wynfield Lot 14 Block ___ Plat ___ Sec. ___
Well Driller George Easterday Owner Barden Homes. (Goldsmith)

Depth of well 400'
Distance of measuring point (M.P.) above ground 1'
Static water level (S.W.L.) below M.P. 45'

I. High rate pumping -- reservoir drawdown

Time pump started 7:45 Pumping rate 8 GPM
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 # gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
8:30	95'	30 sec		2
8:45	95'	30		2
		120 40		
		120 1.5		
		240 50		
		25		
		15		

C 1 2534 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 30323

DATE Received

DATE WELL COMPLETED 05 28 85

Depth of Well 100 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-81-1028

OWNER Goldsmith (last name) Don (first name)

STREET OR RFD Wynfield Rd. TOWN West Friendship

SUBDIVISION Wynfield SECTION 2 LOT 14

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
Top Soil	0	2	
Clay	2	4	
Shaley	4	10	
Brown Mica	10	50	✓
Gray Mica	50	162	
Flint	162	165	✓
Mica	165	400	

GROUTING RECORD
WELL HAS BEEN GROUTED (Circle Appropriate Box) yes Y (44) no N (44)

TYPE OF GROUTING MATERIAL

CEMENT CM (45 46) BENTONITE CLAY BC (45 46)

NO. OF BAGS 12 NO. OF POUNDS 1200

GALLONS OF WATER 65

DEPTH OF GROUT SEAL (to nearest foot)

from 0 (48 TOP 52) ft. to 21 (54 BOTTOM 58) ft.

(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 (60 61)	6 (63 64)	27 (66 70)

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

EACH SCREEN		DEPTH (nearest ft.)	
1	HO (8 9)	27 (11 15)	400 (17 21)
2	(23 24)	(26 30)	(32 36)
3	(38 39)	(41 45)	(47 51)

SLOT SIZE 1 ____ 2 ____ 3 ____

DIAMETER OF SCREEN ____ (56 60) (NEAREST INCH)

GRAVEL PACK from ____ to ____

IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68 (68)

C 3

PUMPING TEST
HOURS PUMPED (nearest hour) 4 (8 9)

PUMPING RATE (gal. per min. to nearest gal.) 2 (11 15)

METHOD USED TO MEASURE PUMPING RATE BUCKET

WATER LEVEL (distance from land surface)

BEFORE PUMPING 45 (17 20)

WHEN PUMPING 75 (22 25)

TYPE OF PUMP USED (for test)

A (27) air — P (27) piston — T (27) turbine

C (27) centrifugal — R (27) rotary — O (27) other (describe below)

J (27) jet — S (27) 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: (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)

+ (49) above / − (49) below LAND SURFACE 2 (50 51) (nearest foot)

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. 40

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) Steve F Eastaday

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

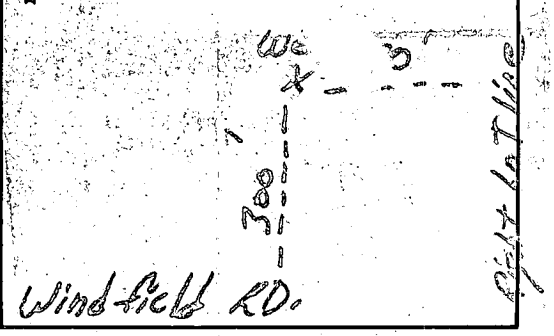
OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)

(E.R.O.S.) N/A (Food)

WQ (74 75 76)

TELESCOPE CASING (70) LOG INDICATOR (72) OTHER DATA

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)



HEALTH

Page 1 of 1
Date 10/21/85

Review OK 10/21/85 CWM

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-1028
Location of property (road) Wynfield Rd.
Subdivision Wynfield Lot 14 Block ___ Plat ___ Sec. 2
Well Driller George F. Easterday Owner Don Goldsmith

Depth of well 400 ft 1½
Distance of measuring point (M.P.) above ground 1 FT
Static water level (S.W.L.) below M.P. 45 FT

I. High rate pumping -- reservoir drawdown

Time pump started 7:45 Pumping rate 8 GPM 30 FT
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 l gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
7:45	45 FT	7 Sec		8 GPM
8:00	90 FT	30 Sec		2 GPM
8:15	95 FT	30 Sec		2 GPM
8:30	95 FT	30 Sec		2 GPM
8:45	95 FT	30 Sec		2 GPM
9:00	95 FT	30 Sec		2 GPM
9:15	95 FT	30 Sec		2 GPM
9:30	95 FT	30 Sec		2 GPM
9:45	95 FT	30 Sec		2 GPM
10:00	95 FT	30 Sec		2 GPM
10:15	95 FT	30 Sec		2 GPM
10:30	95 FT	30 Sec		2 GPM
10:45	95 FT	30 Sec		2 GPM
11:00	95 FT	30 Sec		2 GPM
11:15	95 FT	30 Sec		2 GPM
11:30	95 FT	30 Sec		2 GPM
11:45	95 FT	30 Sec		2 GPM
12:00	95 FT	30 Sec		2 GPM
12:15	95 FT	30 Sec		2 GPM
12:30	95 FT	30 Sec		2 GPM
12:45	95 FT	30 Sec		2 GPM
1:00	95 FT	30 Sec		2 GPM
1:15	95 FT	30 Sec		2 GPM
1:30	95 FT	30 Sec		2 GPM
1:45	95 FT	30 Sec		2 GPM

EMERGENCY/TEMP NO. IF ANY

B 1 | 8715 | 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: HO-81-1028

fill in this form completely

Date Received: 05/18/85

OWNER INFORMATION

GOLDSMITH LON
Last Name | Owner | First Name

3556 LAKEWAY DR
Street or RFD

ELLICOTT CITY MD 21043
Town | State | Zip

DRILLER INFORMATION

GEORGE F. EASTERDAY — 77 License No. 80: 410

Driller's Name

L. Franklin Easterday, Inc.
Firm Name

9205 Brown Church Rd. Mt. Airy, MD 21771
Address

George F Easterday — 5/16/85
Signature | Date

B 2 WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.): 5

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY): 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- (D) HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
- [F] FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
- [i] INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
- [P] PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
- [T] TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

APPROXIMATE DEPTH OF WELL: 200 FEET

APPROXIMATE DIAMETER OF WELL: 6 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

REPLACEMENT OR DEEPENED WELLS (CIRCLE APPROPRIATE BOX)

- (N) THIS WELL WILL NOT REPLACE AN EXISTING WELL
- [Y] THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
- [S] THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
- [D] THIS WELL WILL DEEPEN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENDED (IF AVAILABLE)

Not to be filled in by driller (OEP USE ONLY)

APPROP. PERMIT NUMBER: GAP

FORCE [F][S] WRITE INITIALS IN BOX — PERMIT No. HO-81-1028

B 3 LOCATION OF WELL

R 35330 $ 40.00

8 COUNTY: HOWARD

23 SUBDIVISION: Wynfield EST

SECTION 2 LOT 14

52 NEAREST TOWN: WESTFRIENDSHIP

MILES FROM TOWN (enter 0 if in town): 1 MI

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

NW 8–9 | N 8 | NE 8–9 | W 8 | TOWN | E 8 | SW 8–9 | S 8 | SE 8–9

NEAR WHAT ROAD: Wynfield Rd.

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): NORTH (N) WEST [W] 32 [E] EAST [S] SOUTH

DISTANCE FROM ROAD: 200

ENTER FT or MI: FT

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

HOWARD — COUNTY NAME — COUNTY NO. A30323

OEP SIGNATURE — STATE HEALTH INSERT S

DATE ISSUED: 05/21/85 — Frank Shum — CO SIGNATURE — 11/21/85 EXP. DATE

NORTH GRID: 53200 — EAST GRID: 08160

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER
1. WELL
2.
3.

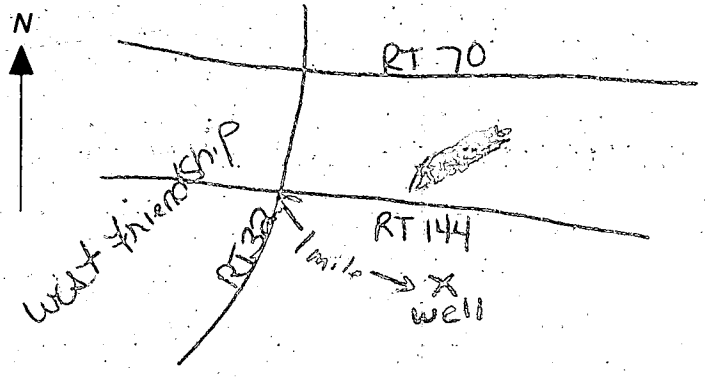
WRITE THE BOX NUMBER FROM THE MAP HERE

E 810 6
N 530 2

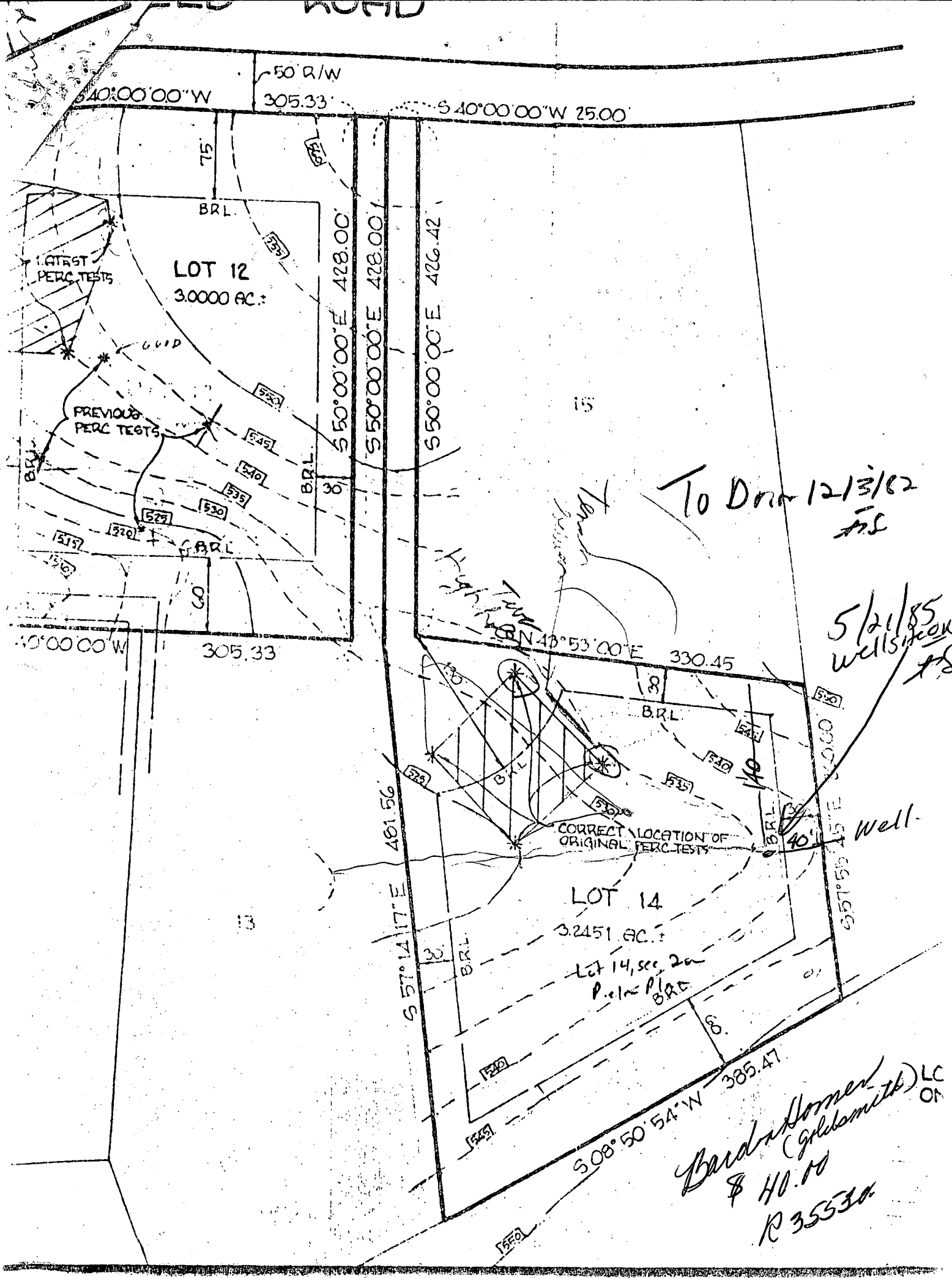
000 000

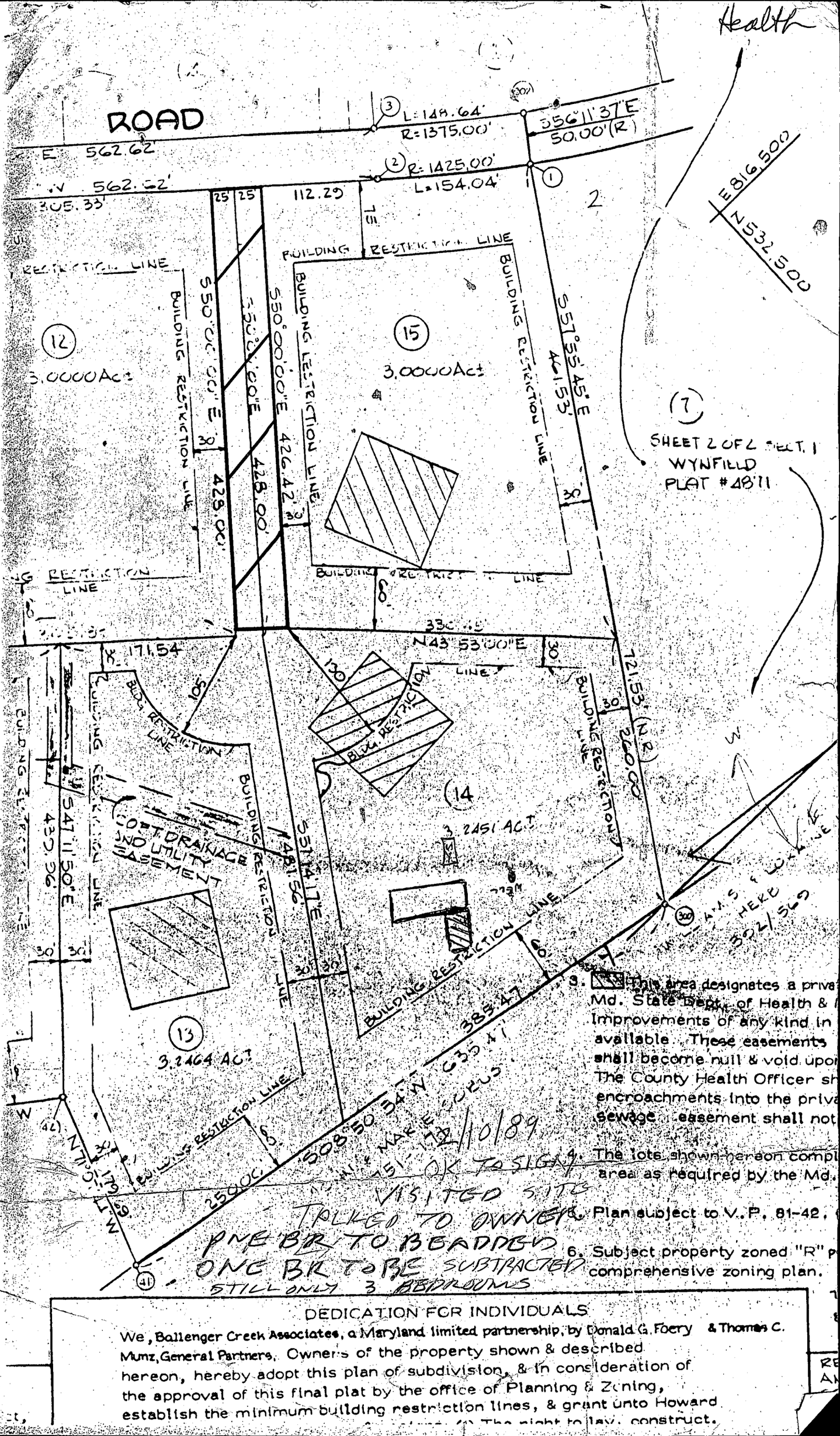
Location of
29' - Casing
27' - open
12 - Neat Cement
5/28/85
JS
X WELL

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION



SPECIAL CONDITIONS


50' R/W
S 40°00'00"W 305.33'
S 40°00'00"W 25.00'
75'
BRL
LOT 12
3.0000 AC.±
4 ATEST PERC TESTS
PREVIOUS PERC TESTS
S 50°00'00"E 428.00'
S 50°00'00"E 428.00'
S 50°00'00"E 426.42'
BRL
30'
40'
N 43°53'00"E 330.45
461.56
S 57°14'17"E
S 57°59'15"E
CORRECT LOCATION OF ORIGINAL PERC TESTS
LOT 14
3.2451 AC.±
Lot 14, sec 2a
Pelican Bay
60'
S 08°50'54"W 385.47
305.33
13
15
To Dan 12/3/82
5/21/85
Well
Barbara Horner
(Goldsmith)
$ 40.00
R 35530



DEDICATION FOR INDIVIDUALS

We, Ballenger Creek Associates, a Maryland limited partnership, by Donald G. Foery & Thomas C. Munz, General Partners, Owners of the property shown & described hereon, hereby adopt this plan of subdivision, & in consideration of the approval of this final plat by the office of Planning & Zoning, establish the minimum building restriction lines, & grant unto Howard

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) 313-3800

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER B0014730

Building Address 2671 WYNFIELD ROAD
WEST FRIENDSHIP, MD 21794

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

Census Tract 6030 Subdivision WYNFIELD

Section 2 Area _____ Lot 19

Tax Map 15 Parcel _____ Grid _____

Zoning RC-DEO Map Coordinates 10E4 Lot size 3

Property Owner's Name KEITH + BEVERLY UNHOVEN

Address 2671 WYNFIELD ROAD

City WEST FRIENDSHIP State MD Zip Code 21794

Home Phone 410-442-4063 Work Phone 410-843-5000

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

DAVE BUSCHMAN

Phone _____ Fax _____

Existing Use SFD

Proposed Use SFD W/ Porch

Estimated Construction Cost $ 10,000

Description of Work 12'6" X 19' SCREEN PORCH ON PIER FOUNDATIONS. EXISTING PORCH ENCLOSED FOR LIVING SPACE.

Contractor Company BUSCHMAN DESIGN-BUILD

Contact Person DAVE BUSCHMAN

Address 1530 EVERLEA ROAD

City MARRIOTTSVILLE State MD Zip Code 21104

License No. 23579

Phone 410-442-3818 Fax _____

Occupant or Tenant OWNER OCCUPIED

Contact Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Engineer or Architect Company _____

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 ☐
____ Full
____ Partial
____ Other Suppression
____ # of Heads

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 Structure: _____
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.

B. D. Buschman
Applicant's Signature

B. DAVID BUSCHMAN
Print Name

PRESIDENT BUSCHMAN DESIGN-BUILD
Title/Company

6-9-00
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	6/8/00	
State Highways		
Building Official		
Dev. Engineering, DPZ		
Health	6/08/00	
Fire Protection		

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

CONTINGENCY CONSTRUCTION START: ☐
ONE STOP SHOP: ☐

DPZ SETBACK INFORMATION
Front: 60 Ft
Rear: 30 Ft
Side: 30 Ft
Side St.: N/A
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#: 466608

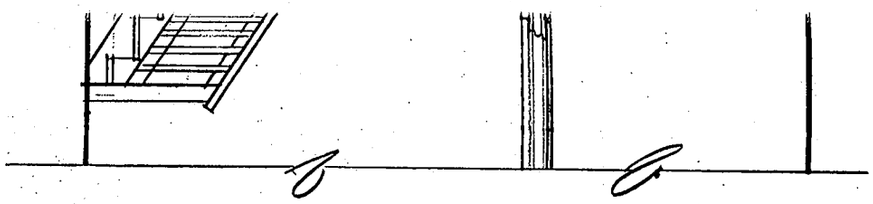
Filing fee	$ 25
Permit fee	$ 47
Excise tax	$ 15
Sub-total paid	$
Add'l permit fee	$
TOTAL FEES	$ 244
Balance due	$
Check	# 6132
Validation	#

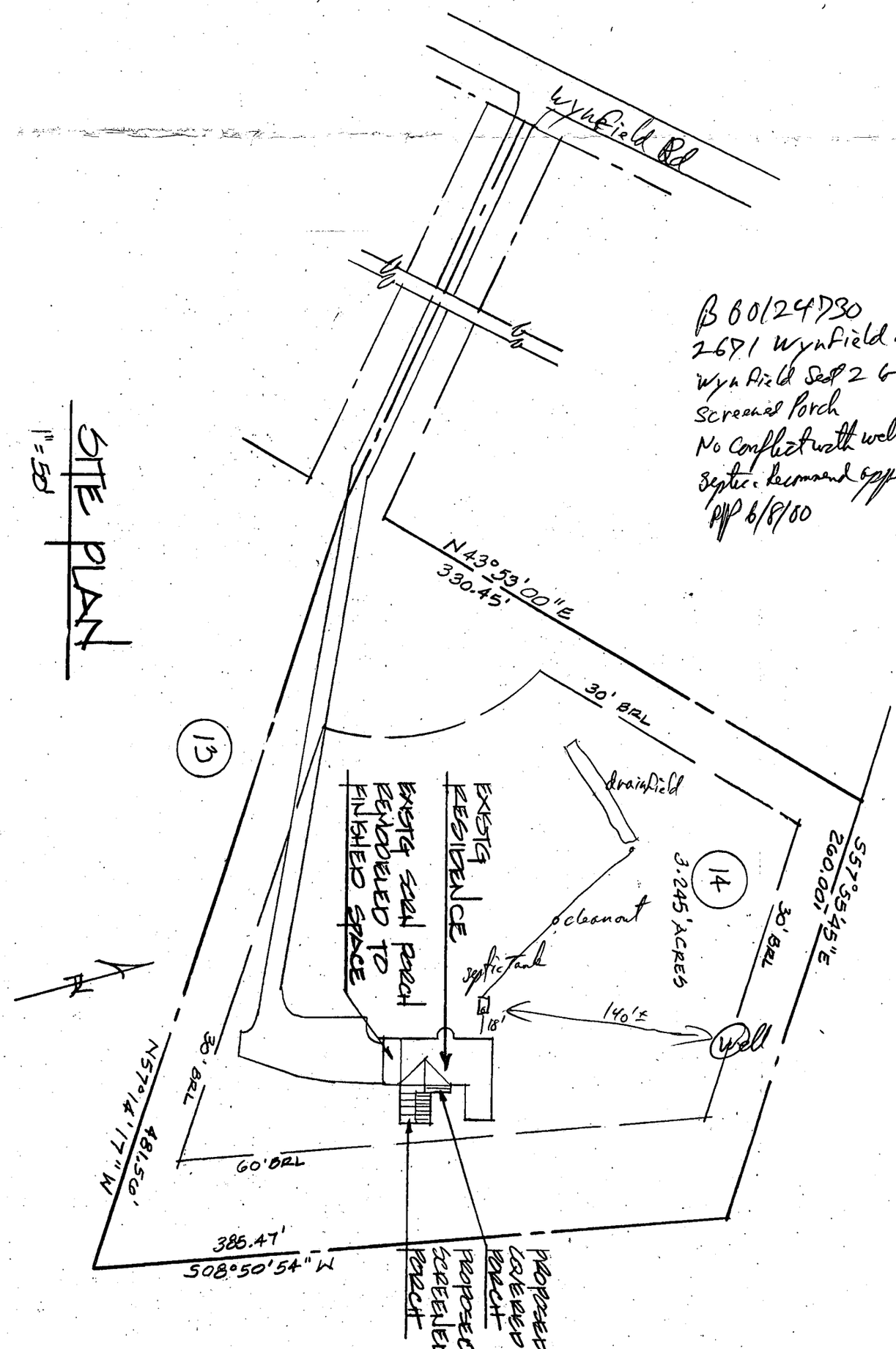
Accepted by _____

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

s:\permit.fm

Rev. 10/15/98





SITE PLAN
1" = 50'

FOUNDATION PLAN 1/4" = 1'-0"

00002	○	ADDITIONS & ALTERATIONS FOR
SHEET 1 of 2		KEITH & BEVERLI UITOVEN 2671 WYNFIELD ROAD, WEST FRIENDSHIP, MARYLAND 21794-951