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DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3430 COURT HOUSE DRIVE ELICOTT CITY, MD 21043 PERMITS (410) 313-2485 INSPECTIONS (410) 313-1810 AUTOMATED INFORMATION (410) 313-3900	HOWARD COUNTY PERMIT APPLICATION	PERMIT NUMBER B 00142876
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Building Address <u>11722 Wayneridge St.</u> <u>Fulton MD 20759</u>	Property Owner's Name <u>M/M Ken Ellis</u> Address <u>11722 Wayneridge St.</u> City <u>Fulton</u> State <u>MD</u> Zip Code <u>20759</u> Home Phone <u>301-725-6190</u> Work Phone <u>----</u> Applicant's Name & Mailing Address, (if other than stated hereon): Phone _____ Fax _____
Suite/Apt. #: _____ SDP/WP/Petition #: _____ Census Tract <u>605102</u> Subdivision <u>Mooresfield</u> Section <u>2</u> Area _____ Lot <u>3</u> Tax Map <u>41</u> Parcel <u>293</u> Grid <u>14</u> Zoning <u>RRD</u> Map Coordinates <u>18-13</u> Lot size <u>1 acre</u>	Contractor Company <u>Charles H. Shaw & Son, Inc.</u> Contact Person <u>Ron Shaw</u> Address <u>7040 Guilford Rd.</u> City <u>Clarksville</u> State <u>MD</u> Zip Code <u>21029</u> License No. <u>130</u> Phone <u>410-531-5405</u> Fax <u>410-531-1877</u>
Existing Use <u>SFD</u> Proposed Use <u>same</u> Estimated Construction Cost \$ <u>115,000.00</u> Description of Work <u>master bedroom suite & addition to garage</u>	Engineer or Architect Company <u>none</u> Contact Person _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____
Occupant or Tenant <u>M/M Ken Ellis</u> Contact Name <u>Ken Ellis</u> Address <u>11722 Wayneridge St.</u> City <u>Fulton</u> State <u>MD</u> Zip Code <u>20759</u> Phone <u>301-725-6190</u> Fax _____	

BUILDING DESCRIPTION - <u>COMMERCIAL</u>		BUILDING DESCRIPTION - <u>RESIDENTIAL</u>	
Building Characteristics Height: _____ No. of stories: _____ Gross area, sq. ft. per floor: _____ Use group: _____ Construction type: <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular	Utilities Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads _____	Building Characteristics SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> 1st floor: <u>31'</u> <u>16 1/2'</u> 2nd floor: <u>none</u> Basement: <u>none</u> Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input checked="" type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms <u>1</u> Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____ Other Structure: <u>garage</u> Dimensions: <u>12' x 32.6'</u> Footings: _____ Roof: _____ <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	Utilities Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Heating System: Electric <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> 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.

<u>Charles H. Shaw</u> Applicant's Signature <u>President, Charles H. Shaw & Son</u> Title/Company	<u>Ron Shaw</u> Print Name <u>July 7, 2003</u> Date
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Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
** PLEASE WRITE NEATLY AND LEGIBLY **
- FOR OFFICE USE ONLY -

AGENCY <input checked="" type="checkbox"/> Land Development, DPZ <input type="checkbox"/> State Highways <input type="checkbox"/> Building Official <input checked="" type="checkbox"/> Dev. Engineering, DPZ <input type="checkbox"/> Health <input type="checkbox"/> Fire Protection Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/> CONTINGENCY CONSTRUCTION START: <input type="checkbox"/> ONE STOP SHOP: <input type="checkbox"/>	DATE <u>8-18-03</u> <u>Kacie Noonan</u> SIGNATURE APPROVAL	DPZ SETBACK INFORMATION Front: _____ Rear: _____ Side: _____ Side St.: _____ All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/> Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/> Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/> Lot Coverage for NewTown Zone _____ SDP/Red-line approval date _____	PROPERTY ID# <u>56791</u> Filing fee \$ <u>25.00</u> Permit fee \$ _____ Excise tax \$ _____ Add'l per. fee \$ _____ TOTAL FEES \$ _____ Sub-total paid \$ _____ Balance due \$ _____ Check # <u>13598</u> Validation # <u>25209</u> Accepted by <u>CP</u>
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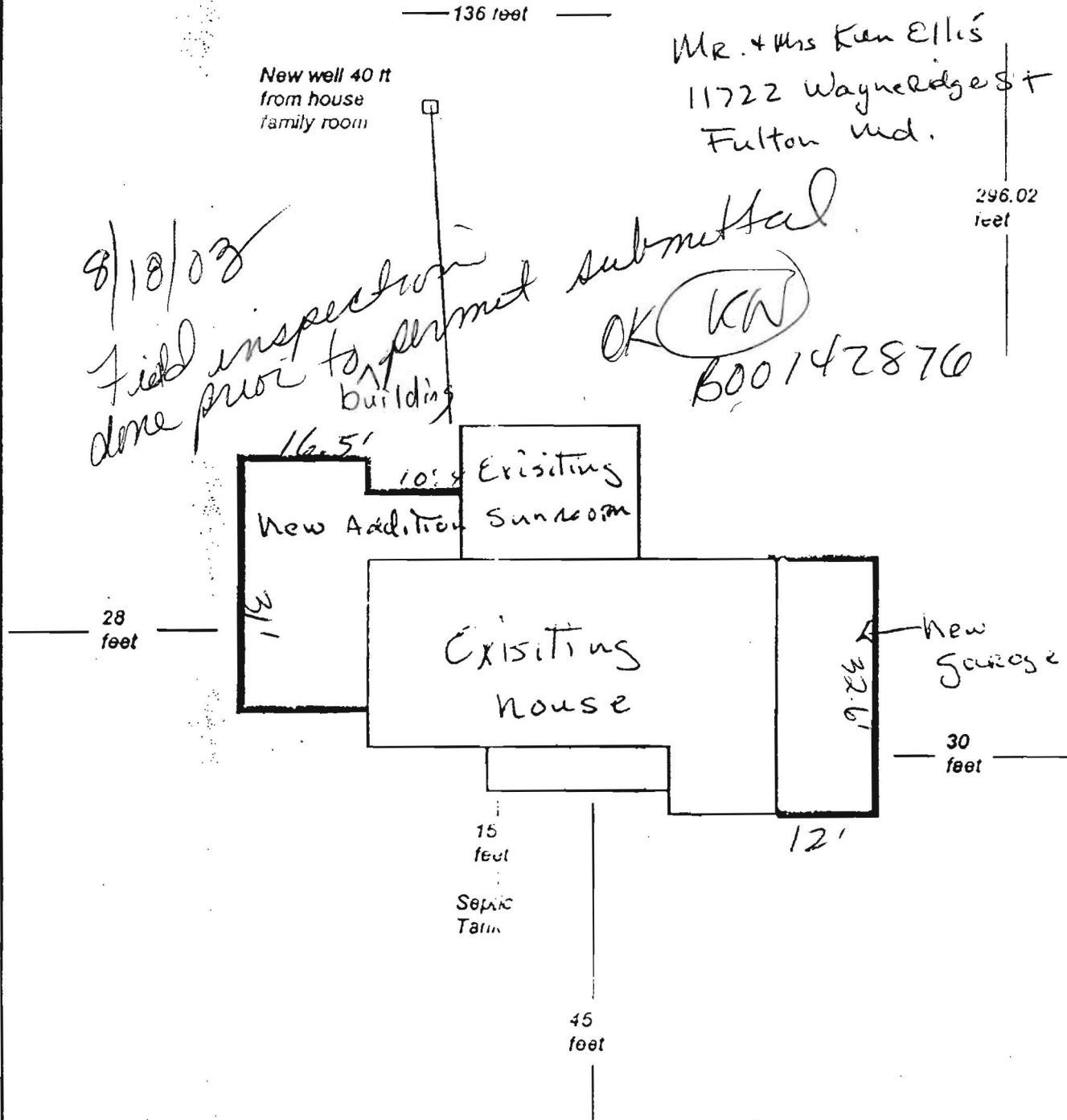
CHARLES H. SHAW & SON, INC.
7040 GUILFORD ROAD
CLARKSVILLE, MD 21029

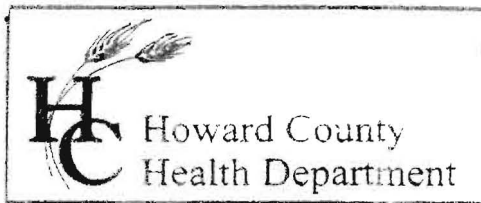
MR. & MRS. Ken Ellis
11722 Wayne Ridge St
Fulton Md.

296.02
feet

8/18/03
Field inspection
done prior to permit
building
submittal
OK (KW)
B00142870

New well 40 ft
from house
family room





3525 H Ellicott Mills Drive, Ellicott City, MD 21043
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

Penny E. Borenstein, M.D., M.P.H., Health Officer

October 8, 2003

Mr. Ellis
11722 Wayneridge Street
Fulton, MD 20759

Re: Septic System Upgrade
BP#: 00142876
11722 Wayneridge Street

Dear Mr. Ellis:

Our records indicate that your building permit was signed on 8/18/03 for the addition of a bedroom to the existing house. The signature was signed upon the given condition that the septic system would be upgraded. Our request is legally supported by COMAR 26.04.02.02 D(4).

We are aware that your new well has been drilled and the existing well was abandoned. As I see, you are making progress on your plans. Please contact our office at your earliest convenience and let us know when you intend to have the septic system upgraded and whom you have chosen to upgrade the system. In order to release the permit to your chosen contractor, please write a check for \$180.00 to the Director of Finance and mail it to our office. An envelope is enclosed for your convenience.

If you have any questions, please do not hesitate to call our office at 410-313-1771. Thank you for your time in this important matter.

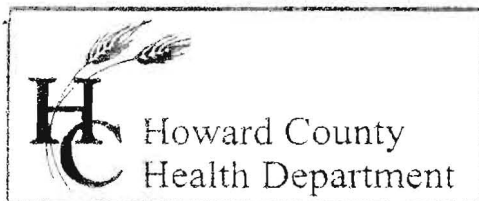
Sincerely,

Kacie Noonan
Sanitarian
Well and Septic Program

KN

Cc: file

REINDEXED



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website: www.hchealth.org

Penny E. Borenstein, M.D., M.P.H., Health Officer

July 21, 2003

Mr. Ellis
11722 Wayneridge St.
Fulton, MD 20759

RE: **Replacement Well & Building Permit Issues**
11722 Wayneridge St.
Well Permit #: HO-94-3671
BP #: 00142876

Dear Mr. Ellis:

This office has recently received the above referenced building permit application; however, we are unable to recommend approval of the application at this time until the following concerns are addressed.

The proposal is to add one bedroom to the existing house. Any proposal for an increase in the number of bedrooms in a house indicates a potential increase in sewage flow for existing or future residents. Health department records of the septic system currently serving the existing house indicate a system sized for three bedrooms, installed in 1978. Therefore, prior to consideration for Health Department recommendation for approval, evaluation and upgrade of the existing septic system shall be necessary per our discussion on March 24, 2003.

Additionally, a condition of the well drilling permit was the proper abandonment and sealing of the existing well. This abandonment process is important to restore the subsurface geologic conditions, which existed before the well was drilled and to help protect the groundwater resource from potential contamination. This should be completed as soon as possible to avoid delays in the issuance of potability certification and approval for the bedroom addition permit. The well abandonment process must be accomplished by a licensed well driller, who may perform the work without inspection; however, the driller must then file an abandonment report with this office.

It is recommended that you will contact a septic contractor who will call our office to schedule an upgrade of your septic system. Thank you for your attention to these important matters.

Sincerely,

Kacie Noonan
Environmental Sanitarian
Well and Septic Program

Enclosures

cc: File