READ CAREFULLY

Office hours 9 A.M. to 4 P.M. Saturdays 9 A.M. to 12 A.M. TA: Ellicott City 718

Permit	No	ら改	
Distric	t 4		
Date _	April	24,	1950;
Zoned	R-A		

COUNTY COMMISSIONERS OF HOWARD COUNTY

OFFICE OF THE BUILDINGS ENGINEER COURT HOUSE, ELLICOTT CITY, MARYLAND

Owner		Address_	Errovik	ville, M.	P	ione
(Name of person bolding legal title of land) Size of Lot X Acreage Lot	No.	Blo	ck	Section_	1	
	Front	Depth	Hei	ght Area	V	olume
Size of Building	33-8	26-8	15	898s_f	. 17,960	ca.M.
Size of basement (if any)	rall					
Distance in feet from road right-of-way line to	front buil	ding line	60 M		·	
Side yard setback 20 ft.			Maryani, aragama proje			
Use of Building (dwelling, store, garage, etc.)		rty line to side ype of Buil		7-7/5	Compar of stori	and back)
	Footing	Founda		Sidewalls	Roof	
Character of Construction of New Building	6220	12*0100				
Alteration						
Improvements to be installed: Check those app	licable, Ele	ectric (*)	4	lxtures) bing (*) E	ath 🔻)	Fireplace ()
Contract Price	Nam	e of Contr	actor.	5+14*		
Total cost of material and labor if not being but	ilt under c	ontract	87,0	<u> </u>	ortespublicarys (Other Ct)	·
mena 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	les and re	gulations of covered by	f all I y this	epartments Permit.	of Howard	County which
The owner hereby agrees to comply with all ru are applicable hereto and to do no work not	specincally	7		mi.	-	hone
are applicable hereto and to do no work not a	(Con	wr) Ad	dress_	Abum	P	110110
are applicable hereto and to do no work not	(Con	Ad	dress_	Abarro		IIVIIG
Signed (Applicant) (Connection with Op	eration)		<u> </u>	1950i Hot	Ha	100110

Notify Inspector 24 hrs. before footings are to be poured.

(Over)

APPLICATION -- EXCRETA DISPOSAL PERMIT

HOWARD COUNTY HEALTH DEPARTMENT

To: THE COUNTY HEALTH OFFICER Ellicott City, Maryland

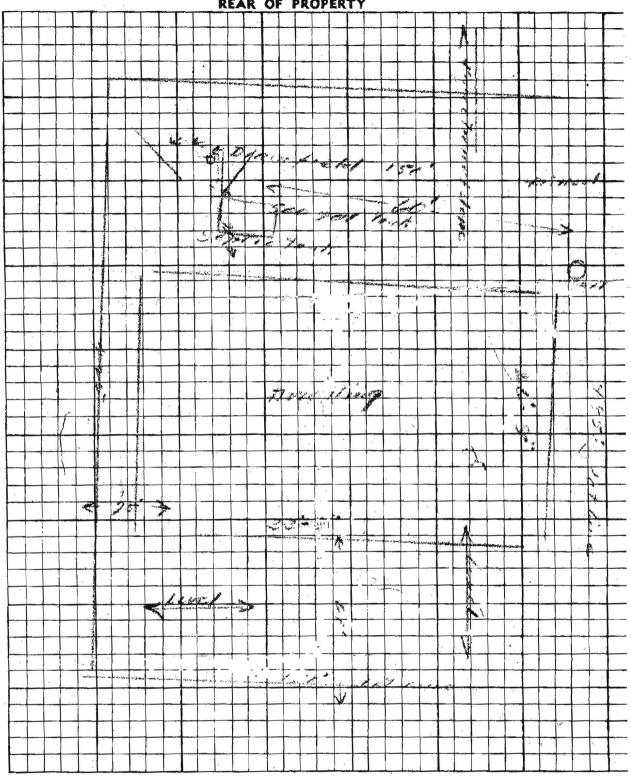
Date
I hereby apply for a permit to construct (or reconstruct) the following excreta disposal plant:
Nature of plant (septic tank, privy)
Of what material constructed Place No. of ft. of field Type of soil Ty
Is the ground sloping Amount of slope 3 5 Direction 16 Depth of
trenches 2 Slope of trenches and the from septic tank per 50 ft 3
Distance of sewage system from dwelling 20 Well 60 Nearest adjoining dwelling
200 Nearest adjoining well 200 Is the plant to serve: Dwelling
Store Hotel No. of rooms 7 No. of baths
No. bedrooms T Is building old or new 116 Size of lot Con 12 Lot No.
Block No. Location of the property St. Mukash Road, Louth /44
Source of water supply Dill Wall Is permit for new disposal plant or for
reconstruction of old plant has Is public sewer within reach of property No.
Percolation test results never Owner of property Kunsul & Honday
Address of owner Burkerle Md. Telephone No.
Occupant of property Assault India Telephone No.
Name of person who will construct plant Person Will Construct plant
Address of same
P. N. No. Signature of Applicant
Address Beville M. Telephone No.

Procedure: Mail or bring this application, together with a scale drawing on the reverse side in triplicate, to the Howard County Health Department, 171 Main Street, Ellicott City, Maryland.

If the specifications of this application are found to comply with the rules and regulations of the County Health Department a permit will be issued giving authority to begin construction. During construction keep red card posted on a tree, stake, or other conspicuous place on the property.

It is suggested that the owner or builder file this application so that specifications can be correctly submitted.

(SEE REVERSE SIDE)



FRONT OF PROPERTY

Draw to scale, count one small space per 5 feet above. Show exact location of septic tank and general location of irrigation trenches. Designate direction of slope and distance to house, property lines, adjacent streets and all nearby wells.

NOTE:-Have your workman keep with him your copy of the application specifications and (on the reverse side thereof) a plot. Notify the Health Department forty eight (48) hours before you are ready to fill in the trenches. Trenches must not be filled in until the Health Department inspection has been made and COMPLETION CERTIFICATE ISSUED.

Schedule of Building Permit Fees to take effect on 1st day of January, 1953. Fees for new building permits shall be based upon the following rates, which are in cents per one thousand cubic feet of gross volume, or fraction thereof. The gross volume of the building is figured from outside dimensions, and includes basements and roof space. The minimum fee for any new dwelling shall be \$7.50. The minimum fee for any building permit shall be \$3.00. The minimum fee for a single car garage shall be \$3.00 and for a double car garage \$4.00.

OCCUPANCY OF BUILDING

Fees in cents per thousand cubic feet or fraction thereof

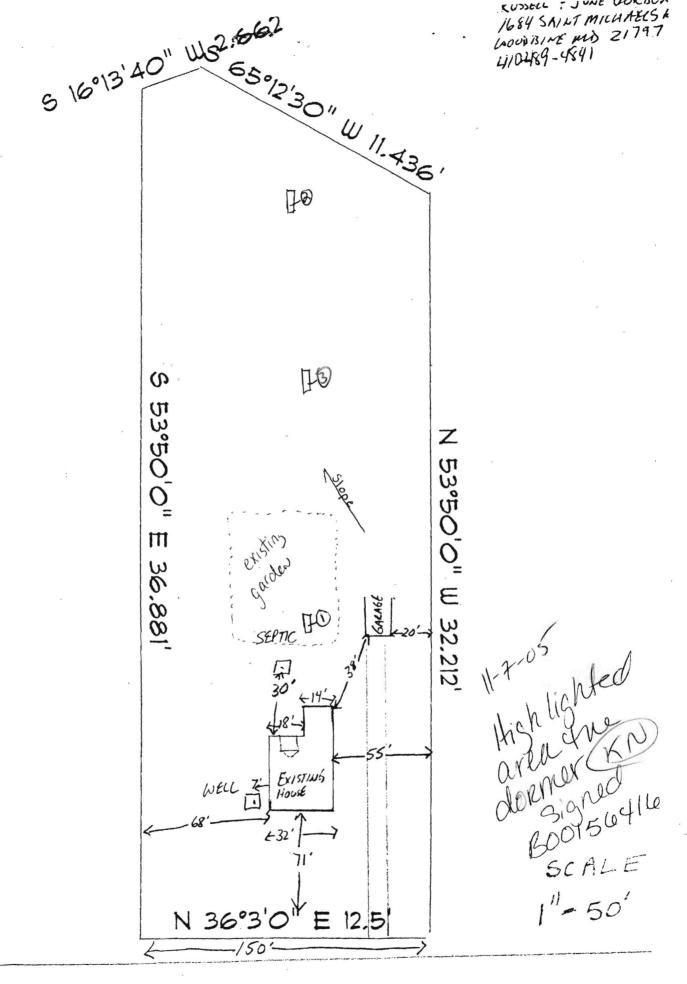
• •	. ,	æ		1:	st 500,00 ubic fee	0 t	Portio	n above cubic fe	500,00 et
Public					50c			25c	× ×
Institutional			· 		- 50c	18		25c	
Residence		· · · · · · · · · · · · · · · · · · ·			50c			25c	
Business			· 		50c	-		25c	
Storage	Mark	**************************************	- 1		35c			15c	
					90				×

COUNTY	COM	MISSIO	NER'S	REC	CEIP	r
***	T 4 T 4 T 7 T 7 T 7 T 7 T 7 T 7 T 7 T 7	acim marr				. ~

No. 4000

SITE INSPECTION SHEET

OWNER:		PHONE #:		
ADDRESS: 1684 St. Michael	ls Rd	CONTRACTOR:	Delph	Constr.
Lisbon?		WELL TAG #:		
SUBDIVISION:LO	OT:	COUNTY#:		
PROPOSAL: BUILDING PERMIT	- ADDMON	<u>)</u>		
<u>I</u>	OCATION DI	<u>AGRAM</u>		
	T Mizi	1001		
	1.7. TICE	AEL RD	K 40	
			2	
			STATE:	
	2 story House		· · · ;	
	20 3	Septia Tauk		-
			r · · · · ·	
	* .		** E	
			20	
			8	
COMMENTS: Inlet of Septie	Tank ~ 1-	1,5' below gr	ade.	Water (effhant)
level @ ~ 6 below grad		lusion - likely		
a crack in septic Tank.	Unable	to locate tr	enches	and/or
Drywell				2
DATE: 10/5/05	INSPECTO	DR: GABE ORE	16 HTO	J



SAINT MICHAELS ROAD