Real Property Data Search (w2)

Search Result for HOWARD COUNTY

View Map)		/iew GroundR	ent Red	emption	<u> </u>		View Gr	oundRe	nt Regis	tration	
Tax Exempt: Exempt Class:		Special Tax Recapture: NONE										
Account Identifier:			District	t - 04 Ac	count N	umber - 347	943					
					Owne	r Information						
Owner Nan	ne:		BARNARD PAUL			Use: Principal Residence:		RES YES	IDENTIA	L		
Mailing Address:		1045 SAINT MIC RD MOUNT AIRY M 3205				ce:	/018	80/ 0051	0			
				Loca	ation & S	tructure Infor	mation					
Premises Address:		RD	1045 SAINT MICHAELS RD MOUNT AIRY 21771-0000		•	Legal Description:		1045	LOT 3 3.7171 A 1045 SAINT MICHAELS RD DAYTON B BARNARD PROF			
Мар:	Grid:	Parcel:	Sub District:	Subdiv	vision:	Section:	Block:	Lot:	Assess Year:	sment	Plat No:	7887
0007	0003	0279		0000				3	2017		Plat Ref:	
Special Tax Areas:					Town: Ad Valoren Tax Class:	n:			NONE 100			
Primary S Built 1989	Structi	ıre	Above Grade Area 2,164 SF	e Living		Finished Bas Area	sement	Are	perty La a 100 AC	ind	Coui Use	nty
Stories	Bas YES	ement	Type STANDARD	UNIT	Exterio BRICK	r Full/Ha 2 full/ 1		Garage 1 Attach		ast Majo	r Reno	vation
					Value	Information				· · · · · · · · · · · · · · · · · · ·		
			Base	Value		Value		Phase-ir	n Assess	ments		
						As of 01/01/2017		As of 07/01/20	18	As 6	of 01/2019	
Land:			225,30	00		225,300						
Improver	nents		317,80	00	274,600							
Total:			543,10	00		499,900		499,900		499	,900	
Preferent	tial La	nd:	0							0		
					Transf	er Informatio	n					
Seller: B/	ARNAF	RD DAYTO	ON B		Date: 0	9/08/1988				Price:	\$0	
Type: AR	MS LE	NGTH M	ULTIPLE		Deed1	: /01880/ 005	510			Deed	2:	
Seller:					Date:					Price:		
Type:					Deed1	:				Deed	2:	
Seller:					Date:					Price:		
Type:					Deed1	:				Deed	2:	
					Exempt	ion Informati	on					
Partial Exe Assessme			Class				1/2018		07/0	1/2019		
County:			000			0.00						
State:			000			0.00						
Municipal:			000			0.00			0.00	0.00		
	npt:				Spacia	al Tax Recap	oture:					

APPLICATION

PERCOLATION TESTING

A 39877

Р _____

HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH

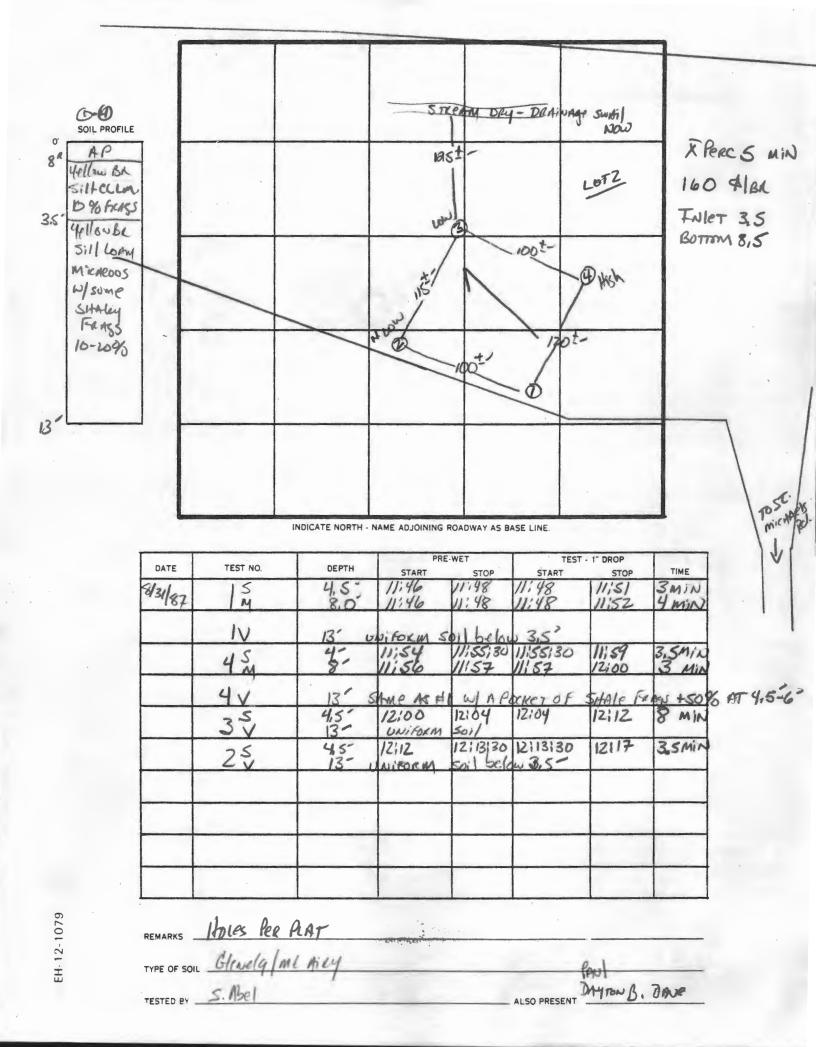
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043 TELEPHONE: 461-9933

DATE _ 4- 14. 87

DISTRICT Fourth

TO: THE COUNTY HEALTH OFFICER ELLICOTT CITY, MARYLAND			
I. HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUC	T (OR RECONSTRUCT) A SEWAGE	DISPOSAL SYSTEM.	
PROPERTY OWNER Dayton B. Barnard			
ADDRESS 1837 88. michaels Rd 14+, C	ilry MD 21771	PHONE 485-	4036
PROSPECTIVE BUYER AONE			
ADDRESS		PHONE NO N	<
PROPERTY LOCATION:			
SUBDIVISION Dayton B. Barnard	LC	DT NO2	
ROAD AND DESCRIPTION SOLNT Michaels 25			
one and half miles pass 1	ishen on the	leff	
TAX MAP 7 PARCEL # 279			
SIZE OF LOT 3.7407 AC =	TYPE	SINGLE FAMI) ·
THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE	ONLY UNTIL PUBLIC FACILITI	ES BECOME AVAILABI	LE. I FULLY UNDERSTAND THE
FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION			
WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.	Van ton (SIGNAT	Bama URE OF APPLICANT)	end
APPROVED BY	_ FOR	DATE	Ē
REJECTED BY	FOR	DATE	
HOLD PENDING FURTHER TESTS		DATE	
REASONS FOR REJECTION OR HOLDING 8/31/87 RIAC SA	TE (Revory; 160	o for PEDT.	SAZ

THIS IS NOT A PERMIT



R. 3 9:30 M

APPLICATION

PERCOLATION TESTING

A 39876

HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH

P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043 TELEPHONE: 461-9933

THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

APPROVED BY

HOLD PENDING FURTHER TESTS

DISTRICT Fourth

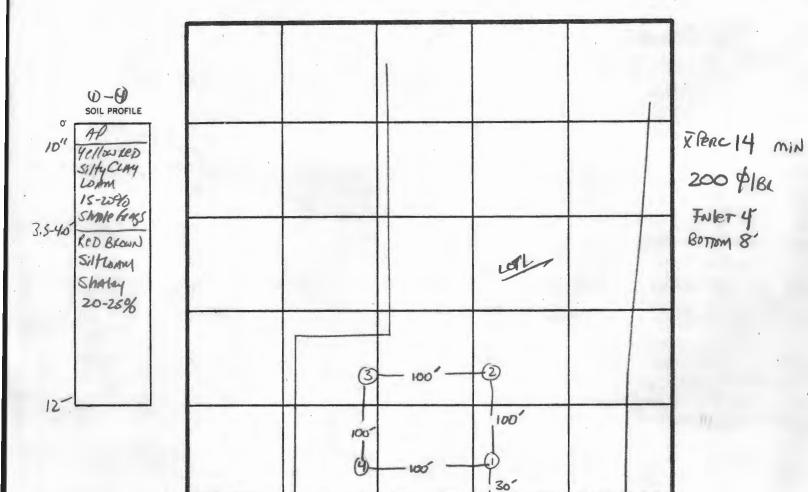
ok to Process

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

PROPERTY OWNER Day 100 B. Machine M. Alice M. Alice

THIS IS NOT A PERMIT

8/31/87 Penc SATISFACTION



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

	TEST NO.	050511	1	RE-WET	TES	T - 1" DROP	
DATE		DEPTH	START	STOP	START	STOP	TIME
8/31/87	15	3,5	10:48	11:20	11:20	12:00	40 MIN
731187	IM	8.0	10:44	10:50	10:50	11:04	14 min
	1	120	Ni FORM S	ail below	4,0		
	25	4.0'	10:48	10:50	10:50	10:54	4 MIN
	25	4.0'	10:53	10:56	10:56	11:02	6 MIN
	av	12- 0	Wiform S	ol below	35'		
	05	3,5	11:04	11:16	11:16	11:40	24 Min
	33	7.0'	11:04	11:10	11:10	11:26	16 MIN
	31	12-	UNIFORM .	sail belan	3.5-	1.0-	
		4-	11:12	11:14	11:14	11:17	3 Min
	45M	8-	11:17	11:19	11:19	11:23	4 MIN
	· 4v	12,50	UNIFOKM.	soil below	3,5-		
		-	-			-	-

REMARKS	HOLES PER PLAT				
TYPE OF SOIL	Mt Airy	·-			
TESTED BY _	s.Abel		_ ALSO PRESENT	DAYPH	BALNAKI)
TESTED BY _	100		ALSO PRESENT		

EH-1-2-1079

HOWARD COUNTY HEALTH DEPARTMENT

JOYCE M. BOYD, M.D., M.P.H.
COUNTY HEALTH OFFICER



Bureau of Environmental Health 3525 Ellicott Mills Drive Ellicott City, Maryland 21043

Director - 461-9956 Water & Sewerage, Permits - 461-9933 Community Environmental Health - 461-9944 Technical Services - 461-9955

September 4, 1987

Mr. Dayton Barnard 1037 St. Michael Road Mt. Airy, Maryland 21771

RE: Percolation Testing
Barnard Property
Tax Map 7 Parcel 279

Dear Mr. Barnard's

Percolation testing conducted August 31, 1987 on the above referenced property indicated satisfactory soil conditions.

Approval is contingent upon submission by a registered engineer of a plat showing certified test hole locations and a suitable house and well site.

This should be submitted within sixty (60) days to allow field verification if necessary.

If you have any questions regarding this matter, please feel free to contact me at the above address or by calling 461-9933.

Very truly yours,

Crain Wielu

Craig Williams, Director Water and Sewerage Program

CW:JR

Estic

OrFIC	E O	F PI	LANN	ING	& 1	ZONING
-------	-----	------	------	-----	-----	--------

FINAL PLAT/ORIGINAL

201	Horn	Be	ina	d
/	(Na	me)	P	4.3

File No.

SIGNATURE APPROVAL

This form is for the processing of final plat originals for signature approvals. If it is found necessary for any corrections or additions to be made on the original, the corrections needed must be stated and forwarded to the next agency, minus the signature, and then returned to the Office of Planning and Zoning for processing. All or any revisions required to the final plat original will be compiled and forwarded to the owner to enable the owner's engineer to make the revisions at one time or to contact the appropriate County agency on questions concerning such revisions.

OPZ	Date Received	Date Forwarded
Reviewing Agent	5-19-88	5-19-88
Rejected For:		
DPW/HEALTH	Date In	Date Forwarded
Reviewing Agent	5-20	5-2 -88.
Rejected For: orgac Z		Van de la company
HEALTH/DPW	Date In	Date Forwarded
Reviewing Agent		
Rejected For:		
<u>OPZ</u>	Date Received	Owner/Engineer Notified
Reviewing Agent		
Actions or Revisions Needed:		

OPZ-DOLD & ZA

