

Search Result for HOWARD COUNTY

View Map			View GroundRent Redemption				View GroundRent Registration			
Tax Exempt:			Special Tax Recapture:							
Exempt Class:			NONE							
Account Identifier:			District - 01 Account Number - 195727							
Owner Information										
Owner Name:			OLVER LAURENCE C TRUSTEE OLVER KIMBERLY A TRUSTEE				Use: Principal Residence:		RESIDENTIAL YES	
Mailing Address:			5100 TALBOTS LANDING ELLCOTT CITY MD 21043-6830				Deed Reference:		/17822/ 00453	
Location & Structure Information										
Premises Address:			5100 TALBOTS LANDING ELLCOTT CITY 21043-0000				Legal Description:		LOT 2 1.525 A 5100 TALBOTS LANDING WRIGHT PROPERTY	
Map:	Grid:	Parcel:	Sub District:	Subdivision:	Section:	Block:	Lot:	Assessment Year:	Plat No:	5410
0031	0015	0545		0000			2	2018	Plat Ref:	
Special Tax Areas:				Town:			NONE			
				Ad Valorem:			104			
				Tax Class:						
Primary Structure Built		Above Grade Living Area		Finished Basement Area		Property Land Area		County Use		
1986		2,646 SF		400 SF		1.5200 AC				
Stories	Basement	Type	Exterior	Full/Half Bath	Garage	Last Major Renovation				
2	NO	SPLIT LEVEL	FRAME	2 full/ 1 half	1 Attached					
Value Information										
			Base Value		Value		Phase-in Assessments			
					As of		As of		As of	
					01/01/2018		07/01/2018		07/01/2019	
Land:			207,700		207,700					
Improvements			282,600		277,800					
Total:			490,300		485,500		485,500		485,500	
Preferential Land:			0						0	
Transfer Information										
Seller: OLVER LAURENCE C				Date: 09/22/2017				Price: \$0		
Type: NON-ARMS LENGTH OTHER				Deed1: /17822/ 00453				Deed2:		
Seller: OLVER LAURENCE C				Date: 11/10/1992				Price: \$0		
Type: NON-ARMS LENGTH OTHER				Deed1: /02690/ 00230				Deed2:		
Seller: WRIGHT CHARLES L				Date: 08/10/1983				Price: \$29,000		
Type: ARMS LENGTH IMPROVED				Deed1: /01180/ 00013				Deed2:		
Exemption Information										
Partial Exempt Assessments:		Class		07/01/2018		07/01/2019				
County:		000		0.00						
State:		000		0.00						
Municipal:		000		0.00 0.00		0.00 0.00				
Tax Exempt:			Special Tax Recapture:							
Exempt Class:			NONE							

HOWARD COUNTY HEALTH DEPARTMENT

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



BUREAU OF ENVIRONMENTAL HEALTH
TIBER PLACE
8306B FORREST STREET
ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 992-2330

February 16, 1984

Mr. Charles L. Wright - *existing house - A12051*
5101 Ilchester Road
Ellicott City, Maryland 21043

RE: Proposed resubdivision of Lot 4
Charles L. & Marlene Wright property

Dear Mr. Wright:

This is to inform you that the proposed resubdivision of the western section of your property at 5101 Ilchester Road, failed the standard percolation test on February 6, 1984.

If you have any questions relative to this matter, please do not hesitate to call me at 992-2330.

Very truly yours,

A handwritten signature in cursive script, reading "Frank A. Skinner".

Frank A. Skinner, Director
Water and Sewerage Program

FAS:hs

HOWARD COUNTY OFFICE OF PLANNING AND ZONING
DIVISION OF LAND DEVELOPMENT
COUNTY OFFICE BUILDING
3450 COURT HOUSE DRIVE
ELLCOTT CITY, MARYLAND 21043

DATE: 4-25-83

P & Z File No. F 83-17

Agencies

Office of Planning and Zoning

☐ Director, Department of Public Works
☐ Bureau of Engineering
☐ Bureau of Inspections and Permits
☐ Fire Administrator
☐ Police Department
☐ State Highway Administration
☒ Division of Environmental Health
☐ Howard County Public School System
☐ Recreation and Parks
☐ Soil Conservation Service
☐ County Assessment

☐ Director
☐ Chief, Division of Land Development
☐ Transportation Planning
☐ File
☐ Division of Comprehensive Planning
☐ Division of Zoning
☐ Planning Board Members

RE: C. Wright Property, Lots 1 to 4

FOR PLAN REVIEW MEETING OF _____
(Date) (Time) (Place)

ENCLOSED FOR YOUR: _____ Signature Approval _____ Review & Comments ☒ Files

THE ENCLOSED: _____ Original ☒ Copy

No. of Sheets

No. of Sheets

<input type="checkbox"/> Preliminary Plan	_____	<input type="checkbox"/> Final Road and/or Storm Drainage Plan	_____
<input type="checkbox"/> Preliminary Road Profile	_____	<input type="checkbox"/> Final Storm Drainage Computations	_____
<input type="checkbox"/> Preliminary Drainage Study and/or Computations	_____	<input type="checkbox"/> Site Development Plan	_____
<input type="checkbox"/> Final Development Criteria	_____	<input type="checkbox"/> Sketch Plan	_____
<input type="checkbox"/> Final Development Plan	_____	_____	_____
<input checked="" type="checkbox"/> Final Plat	_____	_____	_____

WAS: _____ Received _____ Tentatively Approved ☒ Recorded
_____ Received & Revised _____ Approved On 4-19-83

COMMENTS: _____

☐ Check box and return to Office of Planning and Zoning if plan is approved with no comments.

HOWARD COUNTY OFFICE OF PLANNING AND ZONING
DIVISION OF LAND DEVELOPMENT
COUNTY OFFICE BUILDING
3450 COURT HOUSE DRIVE
ELLICOTT CITY, MARYLAND 21043

DATE: 8-23-82

P & Z File No. F 83-17

Agencies

Office of Planning and Zoning

3 Director, Department of Public Works
3 Bureau of Engineering
1 Bureau of Inspections and Permits
1 Fire Administrator
1 Police Department
1 State Highway Administration
1 Division of Environmental Health
1 Howard County Public School System
1 Recreation and Parks
1 Soil Conservation Service
1 County Assessment

1 Director
1 Chief, Division of Land Development
1 Transportation Planning
2 File
1 Division of Comprehensive Planning
1 Division of Zoning
1 Planning Board Members
1 BG 4E
1 C 4P

RE: Wright Property
FOR PLAN REVIEW MEETING OF _____
(Date) (Time) (Place)

ENCLOSED FOR YOUR: _____ Signature Approval X Review & Comments _____ Files

THE ENCLOSED: _____ Original X Copy

No. of Sheets

No. of Sheets

<u>1</u> Preliminary Plan	<u>1</u> Final Road and/or Storm Drainage Plan
<u>1</u> Preliminary Road Profile	<u>1</u> Final Storm Drainage Computations
<u>1</u> Preliminary Drainage Study and/or Computations	<u>1</u> Site Development Plan
<u>1</u> Final Development Criteria	<u>1</u> Sketch Plan
<u>1</u> Final Development Plan	<u>1</u>
<u>X</u> Final Plat	<u>1</u>

WAS: X Received _____ Tentatively Approved _____ Recorded _____
_____ Received & Revised _____ Approved _____ On 8-19-82

COMMENTS: due 9-16-82

☒ Check box and return to Office of Planning and Zoning if plan is approved with no comments.

(OVER)

Charles Wright Prop
9/17/82 Permit Plat

- ① Title block indicates private water
I thought city water was to be
made available here
- ② General notes incomplete Need
 - a) Field Location perc / hole statement
 - b) Minimum ownership statement
 - c) Percolation areas & water wells for adjoining
lot statement
- ③ Lot 1 sewage disposal area
not located correctly
- ④ Lot 3 sewage disposal area not
located correctly
- ⑤ Recommend a Perc Cert plat
showing location & elevation of House
line / holes, water well (if not city water)

Called J.C. Hudgens Left message

9/22/82 Called J.C. Hudgens
Discussed above items He will call
for appointment later to discuss above
items in more specific detail R/H

9/25/82 Called J.C. Hudgens Not There
Left Message to call R/H

10/25/82 Called J.C. Hudgens Not There
Left message to call

11/29/82 Called Not There Left message to call Back

1/11/82 - Called J C Hudgens
Not There left message to call back
RH

2/3/82 Called J C Hudgens
Not There Left message to call back
RH

2/18/83 J C Hudgens said
plat was held up at Public
works due to dispute
about road. He will
submit revised plat soon
Conflict with Public Works has
been resolved

PRELIMINARY

APPLICATION

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: 992-2330

A 33448

P _____

DISTRICT 1st

DATE 1/9/84

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 Charles L. Wright and Marlene Wright

ADDRESS 5101 Ilchester Road, Ellicott City, Md. 21043 PHONE 744-4682

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. New Lot

ROAD AND DESCRIPTION adjacent to 5101 Ilchester Road - house that existing house is on
to be subdivided.

SIZE OF LOT (?) TYPE BLDG. 3 or 4 bedrooms
(NUMBER OF 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. I ALSO AGREE TO COMPLY
WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT. /s/ J. Carl Hudgins for Charles L. Wright

(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

SOIL PROFILE

0'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

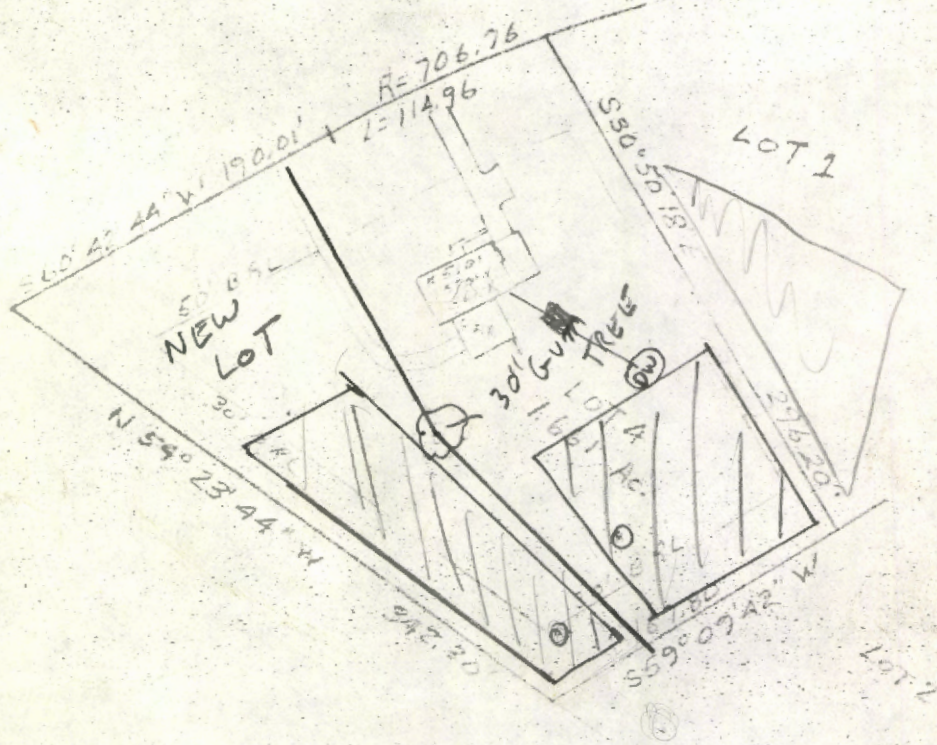
DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	

REMARKS _____

TYPE OF SOIL _____

TESTED BY _____ ALSO PRESENT _____

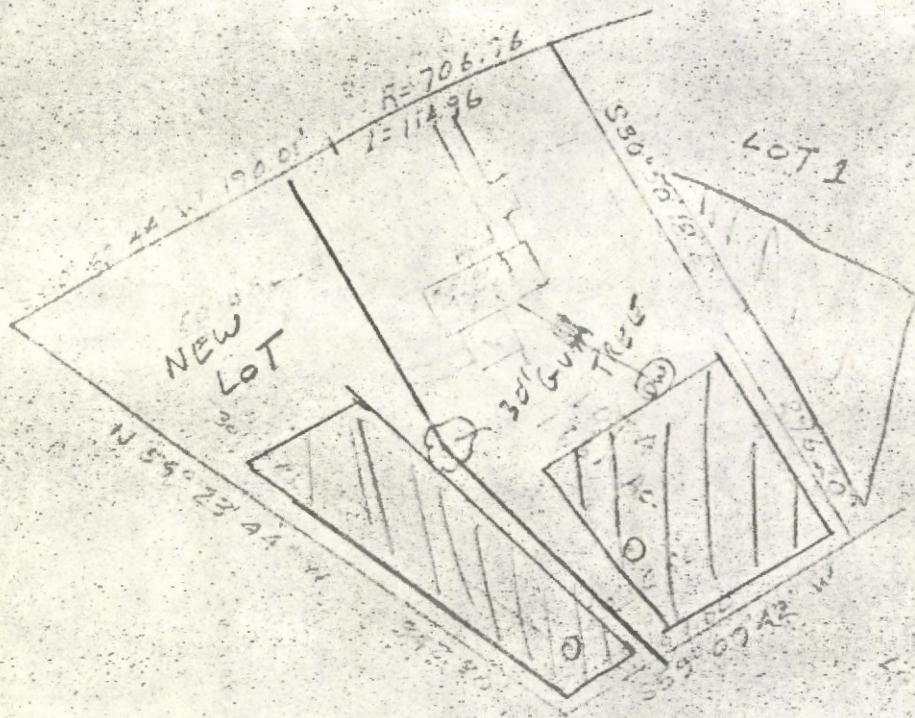
EH-12-1079



LOCATION SURVEY
 5101 Ilchester Road
 1st Election District
 Howard County Md
 Section 10 Date 5/

This is to certify that I have surveyed the property known as lot # 1
 CHARLES L. MARLENEA, WRIGHT PROPERTY
 sheet - of - recorded as PLAT # 54-1-1 among the
 land records of Howard County, Maryland, the purpose
 of locating the improvements thereon.

J. C. Hodges
 Surveyor

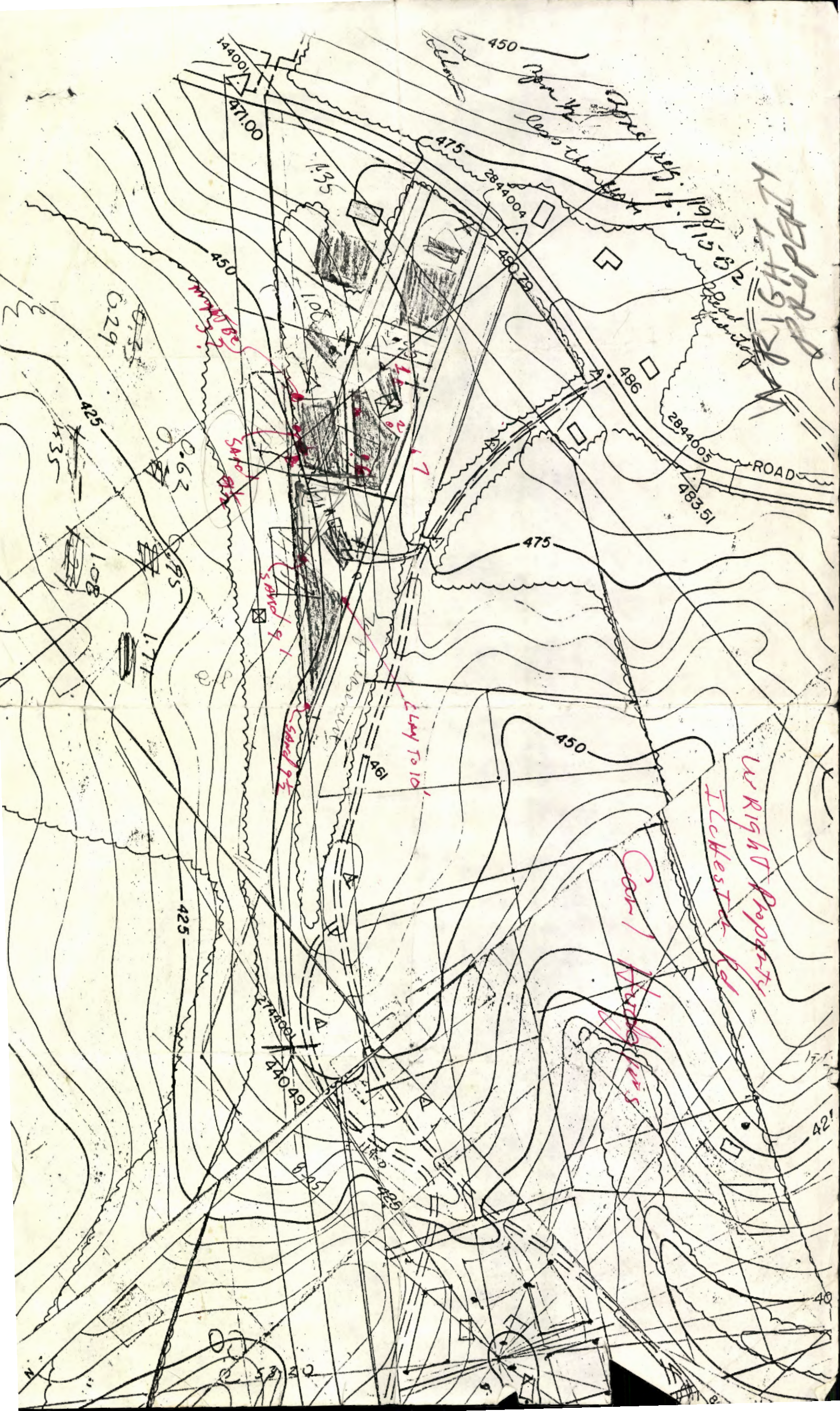


LOCATION SURVEY

of the ...

I hereby certify that I have surveyed the ...

DATE



OFFICE OF PLANNING & ZONING

FINAL PLAT/ORIGINAL

SIGNATURE APPROVAL

File No. F 83-17

Wright Prop.
(Name)
Pub. Works & Septic

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
T. Brown 4/4 4/4
Reviewing Agent

Rejected For: _____

DPW/HEALTH Date In Date Forwarded
S. S. Smith 4-6-83 4-8-83
Reviewing Agent

Rejected For: _____

HEALTH/DPW Date In Date Forwarded
J. S. Smith 4/11/83 4/12/83 UNSIGNED
Reviewing Agent 4/13/83 4/14/83

Rejected For: 4/14/83 Plat as revised OK. J.S.

OPZ Date Received Owner/Engineer Notified

Reviewing Agent _____

Actions or Revisions Needed: _____

PRELIMINARY

APPLICATION

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: 992-2330

A 33448

P _____

DISTRICT 1st

DATE 1/9/84

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 Charles L. Wright and Marlene Wright

ADDRESS 5101 Ilchester Road, Ellicott City, Md. 21043 PHONE 744-4682

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. New Lot

ROAD AND DESCRIPTION adjacent to 5101 Ilchester Road - house that existing house is on
to be subdivided.

SIZE OF LOT (?) TYPE BLDG. 3 or 4 bedrooms
(NUMBER OF 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. I ALSO AGREE TO COMPLY
WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT. /s/ J. Carl Hudgins for Charles L. Wright
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY C. Williams FOR ANY DATE 2-6-84

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 11' CLAY ACROSS LOT. C. Williams

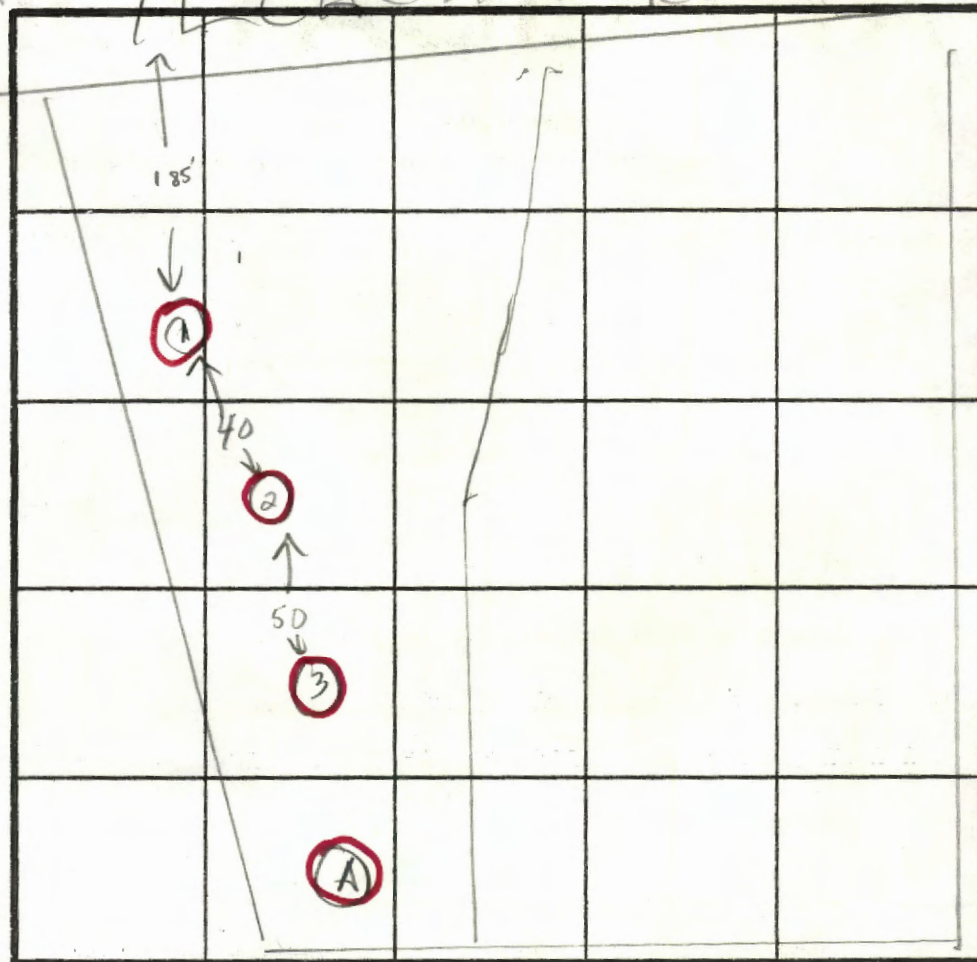
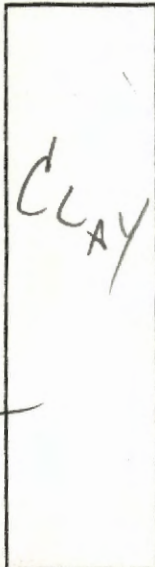
THIS IS NOT A PERMIT

"CENTER OF" 12 CHESTER RD

3 HOLES

SOIL PROFILE

0'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2-6-84	(1)	11	YELLOW	CLAY (BAND OF SAND 1' THICK AT 6')			X FAILS
2-6-84	(2)	9	DISTURBED SOIL (CLAY)				X
			BUILT DEBRIS AT 8'				
2-6-84	(3)	11	YELLOW CLAY				X
1975	(A)		HOLE DUG ON PREVIOUS TEST				1975 FAILED

REMARKS FAILS - NO PERC

TYPE OF SOIL CLAY

TESTED BY C. Williams

ALSO PRESENT KETTERMAN, HODGINS

EH-12-1079

OFFICE OF PLANNING & ZONING

FINAL PLAT/ORIGINAL

SIGNATURE APPROVAL

File No. F 83-17

Wright Prop
(Name)

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.

<u>OPZ</u>	<u>Date Received</u>	<u>Date Forwarded</u>
<u>T. Brown</u>	<u>4/4</u>	<u>4/4</u>
Reviewing Agent		

Rejected For: _____

<u>DPW/HEALTH</u>	<u>Date In</u>	<u>Date Forwarded</u>
<u>K. Adams</u>	<u>4-6-83</u>	<u>4-8-83</u>
Reviewing Agent		

Rejected For: _____

<u>HEALTH/DPW</u>	<u>Date In</u>	<u>Date Forwarded</u>
<u>F. Chen</u>	<u>4/11/83</u>	<u>4/12/83 UNSIGNED</u>
Reviewing Agent		

Rejected For: _____

<u>OPZ</u>	<u>Date Received</u>	<u>Owner/Engineer Notified</u>
Reviewing Agent		

Actions or Revisions Needed: _____

