

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) 313-3900	<h2 style="margin:0;">HOWARD COUNTY</h2> <h2 style="margin:0;">PERMIT APPLICATION</h2>	<h2 style="margin:0;">PERMIT NUMBER</h2> <h1 style="margin:0;">B00124456</h1>
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Building Address <u>3615 TEN CREEK RD.</u> <u>GLENVIEW, MD. 21777</u> Suite/Apt. #: <u>N/A</u> SDP/WP/Petition #: <u>N/A</u> Census Tract <u>6430</u> Subdivision <u>N/A</u> Section <u>N/A</u> Area <u>N/A</u> Lot <u>N/A</u> Tax Map <u>22</u> Parcel <u>A</u> Grid <u>2</u> Zoning <u>PP-D-20</u> Map Coordinates _____ Lot size _____	Property Owner's Name <u>Matthew A. Smith</u> Address <u>625 TEN CREEK RD.</u> City <u>GLENVIEW</u> State <u>MD</u> Zip Code <u>21777</u> Home Phone <u>410-442-2618</u> Work Phone <u>410-231-4612</u> Applicant's Name & Mailing Address, (if other than stated hereon): _____ Phone _____ Fax _____
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Existing Use <u>SINGLE F.A. HOME</u> Proposed Use <u>same with addition</u> Estimated Construction Cost \$ <u>210,000</u> Description of Work <u>1 STORY 2 BATH</u> <u>2 BED. OVER FINISHED</u> <u>BASEMENT 11'6" x 14'6"</u>	Contractor Company <u>DAVE IS CONCRETE</u> Contact Person _____ Address _____ City _____ State _____ Zip Code _____ License No. _____ Phone _____ Fax _____
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Occupant or Tenant <u>OWNER</u> Contact Name _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____	Engineer or Architect Company _____ Contact Person _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____
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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: N/A <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 type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1st floor: _____ 2nd floor: _____ Basement: _____ Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> 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: _____ <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 checked="" 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 checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: N/A <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 THEREIN; (4) THAT HE/SHE WILL PERFORM NO WORK ON THIS ABOVE DESCRIBED 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>Matthew A. Smith</u> Applicant's Signature	<u>Matthew A. Smith</u> Print Name <u>9/1/00</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 Land Development, DPZ State Highways Building Official Dev. Engineering, DPZ Health Fire Protection Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>	DATE <u>9/1/00</u>	SIGNATURE APPROVAL <u>William</u>
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CONTINGENCY CONSTRUCTION START: ☐

ONE STOP SHOP: ☐

DPZ SETBACK INFORMATION
 Front: _____
 Rear: _____
 Side: _____
 Side St.: _____
 All minimum setbacks met?
 YES ☐ NO ☐
 Is Entrance Permit required?
 YES ☐ NO ☐
 Historic District?
 YES ☐ NO ☐
 Lot Coverage for New Town Zone _____
 SDP/Red-line approval date _____ Accepted by _____

PROPERTY ID#:
 Filing fee \$ 150.00
 Permit fee \$ _____
 Excise tax \$ _____
 Sub-total paid \$ _____
 Add'l permit fee \$ _____
 TOTAL FEES \$ _____
 Balance due \$ _____
 Check # 1036
 Validation # _____

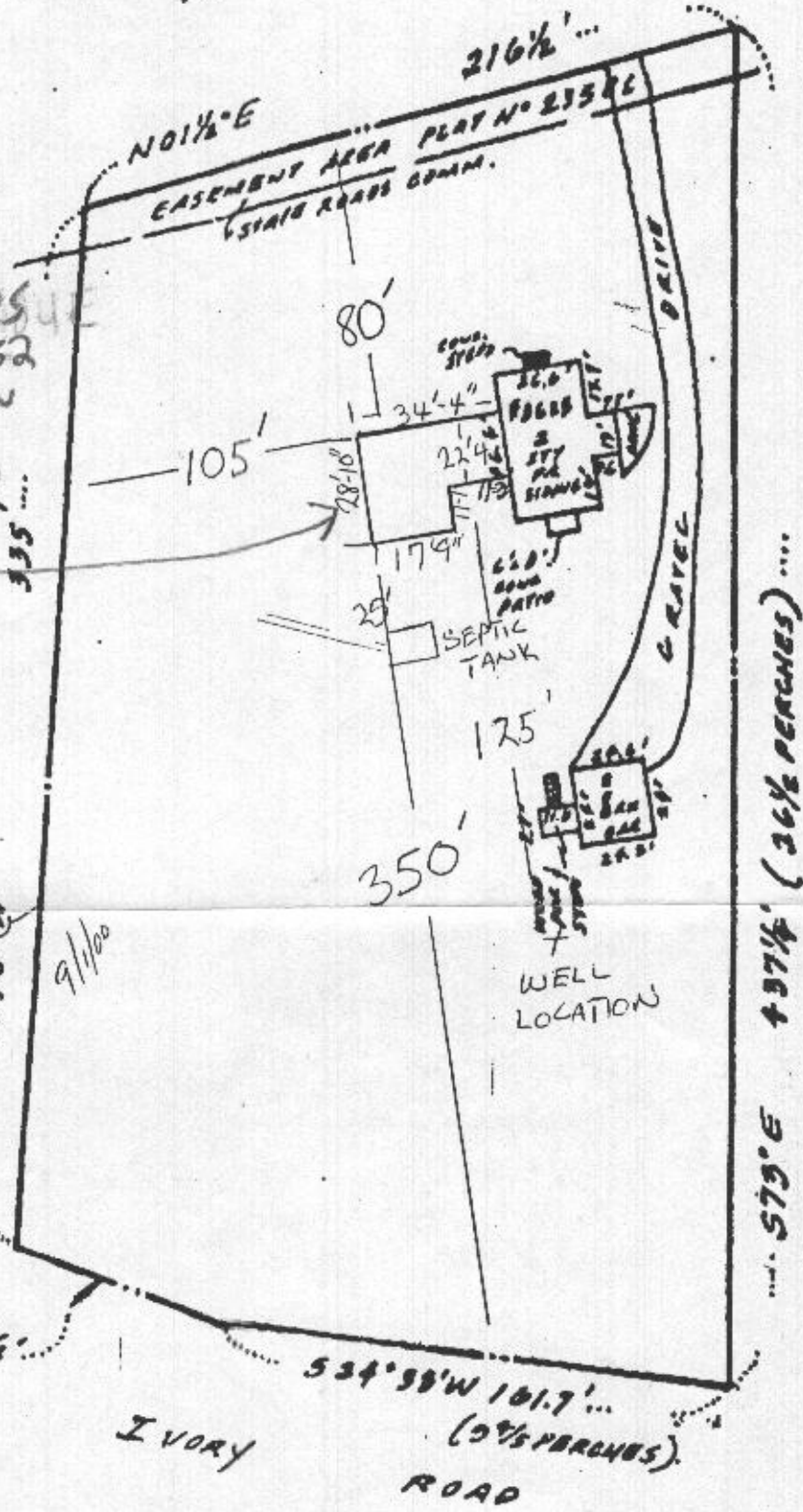


TEN OAKS ROAD
(PAVED 25 1/2 MAC.)

8/9/01-
Proposed
ADDITION
NOT BUILT DUE
TO HOMEOWNERS
CONCERN OF RT 32
EXPANSION
(SRX)

00012445
Proposed
ADDITION
OK BASED
ON SANJ
MOUND
PLND
SUBMITTED BY
REBECCA SMITH
9/1/00

Rebecca Smith
9/1/00
N70W



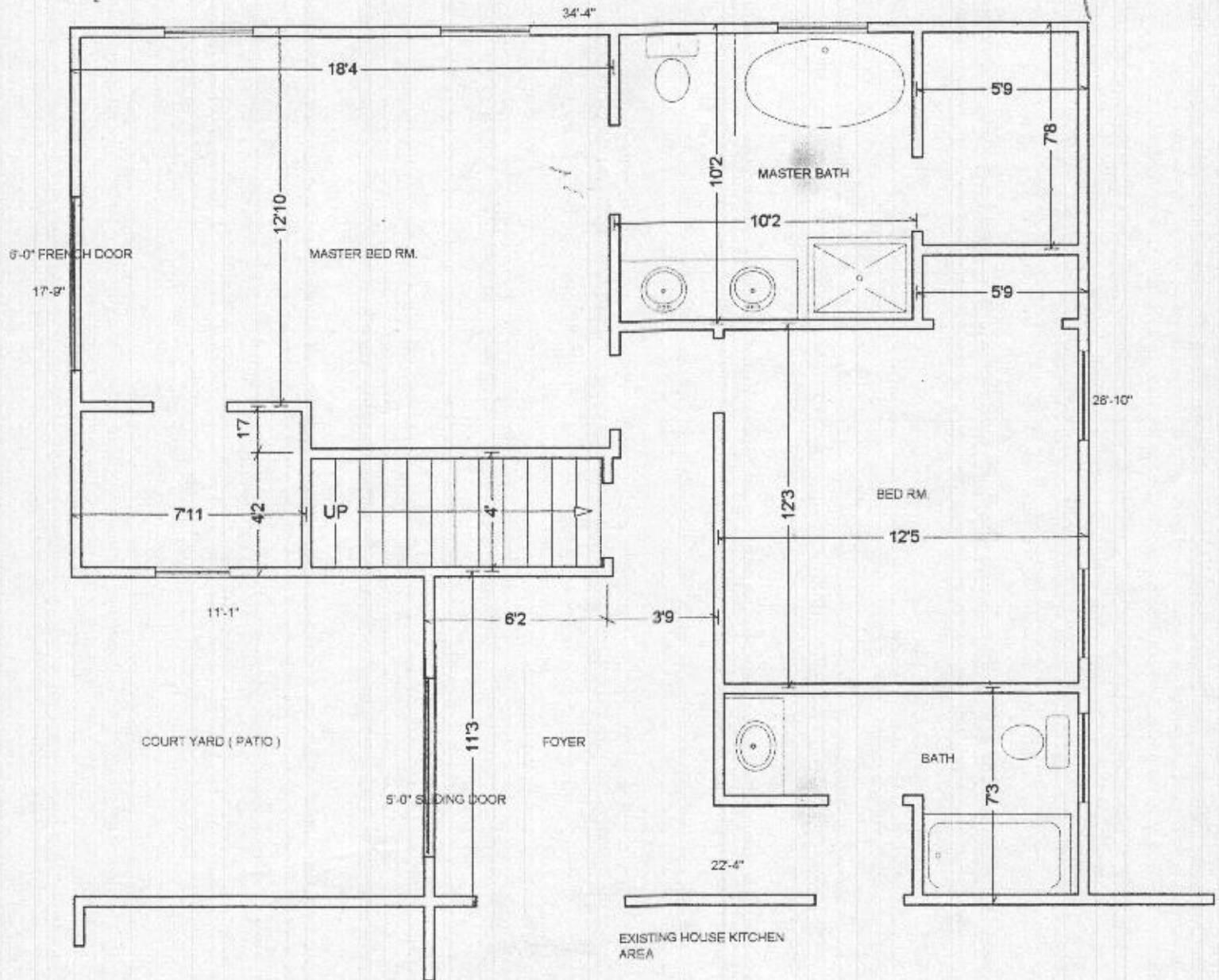
FLOOD INSURANCE RATE
MAP ZONE: "C"

proposed addition
not built

MATTHEW A. SMITH
2625 TEN CAKS RD.
GLENELG MD.

1ST FLOOR PLAN

671 SQ. FT.





HOWARD COUNTY HEALTH DEPARTMENT

Diane L. Matuszak, M.D., M.P.H., County Health Officer

June 26, 2000

Mathew Smith
3625 Ten Oaks Rd.
Glenelg, Md. 21737

Re: Building Permit Application B00124456
Proposed Bath and Bedroom Addition
3625 Ten Oaks Rd.

Dear Mr. Smith,

The purpose of this letter is to provide an update on the status of the above referenced building permit application and its relation to the not-yet-complete septic system repair.

As background, you will recall the following detail:

- the application was questioned by this office on the issue of adequate septic capacity for the potential increase-in-flow;
- problems with the existing septic system were acknowledged;
- percolation testing conducted May 31, 2000 revealed soil conditions unsuited to conventional trench installation; conditions suited to a sandmound or similar lowpressure distribution system were found, but only in a location that conflicted with the existing well;
- the existing leaking septic tank was replaced with a (temporarily) sealed tank; (an issue of insufficient inspection, now resolved, is detailed in separate letters of June 9 and June 26 to Joseph Tunney).

At this point, you are considering whether or not to proceed with the rest of the repair. Replacement of the well would need to occur before installation of the disposal field and recommendation for approval of the Building permit application is on-hold by this office until there is commitment to complete the septic system repair. Plans for an appropriately designed disposal field would have to be prepared by a consultant and reviewed by this office prior to approval to proceed with installation of a disposal field.

In the event that you determine that it is impractical to complete the repair, then the septic tank would have to be formally converted to a holding tank with an approved holding tank agreement recorded as a deed attachment. In that case, provision of additional storage capacity would be recommended; submittal of a valid service contract for pumpout and provision of an audible highwater alarm would both be required.

JUNE 26, 2000

page 2/2 smith - 3625 Ten Oaks Rd.

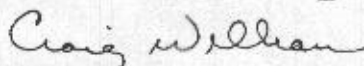
It is understood that commitment to this repair is a costly proposition affecting the overall value of the property, and that it may take time to make a sound decision and make the necessary financial arrangements. The septic repair permit was issued on May 25, 2000 and is valid for 2 years from date of issuance. We would expect conclusion of this matter by the expiration date of the repair permit.

In the interim, there is not objection from this office to continue use of the septic tank as a holding tank, provided it is properly maintained and pumped out to prevent overflow or unauthorized discharge.

Additionally, it is our understanding that there is a highstrength surcharge for septic tank contents taken to the County Wastewater Treatment Facility (the only legitimate point-of-disposal), and an exemption process to a portion of those fees for lower strength waste from a properly maintained holding tank. You may wish to have your contractor contact the facility to determine how you can qualify for the exemption.

Please keep this office advised of your plans as they develop, and feel free to contact me if you have any additional questions on how to proceed or about the contents of this letter.

Yours truly,



Craig Williams, Sanitarian

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