

Menu Save Reset Cancel Help

Record Detail * (This section is required.)

Case

EH-PLANS-25-0

Type

Env: Health/Environmental Health/Plan Check/Application

Status

In Review

Opened Date

12/23/2025

Single Entry Edit-View Record Form

Application Name

B25005310

Description

SFD/ INSTALL (39) GROUND MOUNTED SOLAR PANELS & ENERGY STORAGE SYSTEM **SUBJECT TO FIELD INSPECTION**

Total Invoiced

0.00

Total Paid

0.00

Balance

0.00

Assigned to Department Current Department

Well and Septic Progra

Assigned to Staff Current User

Zack Silvest

Online BP. 12/31/25

Approved
MOC 1/5/26

Address * (This section is required.)

New Search Delete Set Primary

☐ Primary	Street # (start)	Direction	Street Name	Street Type	City	State	Zip Code	Address Status	Street Suffix (Direction)	Unit Type	U
☐ ☒	16220		Frederick	RD	Wood...	MD	21797				

Parcel (This section is not required.)

Search Delete Get Address & Owner Set Primary

☐ Primary	Parcel #	Book	Page	Parcel	Parcel Area	Land Value	Improved Value	Exemption Value	Legal Description	Tract
0 record(s) found.										

Owner (This section is not required.)

Search Delete Set Primary

☐ Primary	Name	Mail Address Line1	Mail Address Line2	Mail Address Line3	Mail City	Mail State	Mail Zip Code	Phone	Country/Region
☐ ☒	Geoffrey Warlick	16220 Frederick Rd.			Libson	MD	21765		US

Applicant * (This section is required.)

Search As Owner As Lic. Prof As Contact

Single Entry Applicant Form

Type *

Applicant

Primary

Yes

First Name *

Carly

Middle Name

Last Name *

Rademaker

Home Phone (xxx)xxx-xxxx

Organization Name *

n/a

Mobile Phone ((xxx)xxx-xxxx)

(813) 863-9462

E-mail

WATTMONK@SUNSPEAR.AI

Business Phone ((xxx)xxx-xxxx)

Preferred Channel

--Select--

Applicant Address

[New](#) [Look Up](#) [Deactivate](#) [Remove](#)

☐ Contact Address ID	Address Type	Address Line 1	City	State	Zip	Primary	Recipient	Status
0 record(s) found.								

Custom Fields

DATE TRACKING

Received Date

12/23/2025

Due Date

1/9/2026

Dates to Complete

14

(Number)

Received by Food

Food Review Type

--Select--

Equipment Specification Sheets Submitted

Equipment Specification Sheet

Received by Well and Septic

12/23/2025

FACILITY INFORMATION

Name of Business (dba) *

n/a (Text)

Associated Building Permit Number

(Text)

Owner Switch Date

Does the project include an Aquatic Facility such as a Public Pool? If Yes, forward to CH Program.

☐ Yes ☐ No

Does the project include Private Septic? If Yes, forward to WS Program.

☐ Yes ☐ No

Is this a Prototype Food Service Facility? If Yes, refer to State.

☐ Yes ☐ No

Facility Fax

0 (Text)

Days of Operation

0 (Text)

Does this project have a Building Permit?

☐ Yes ☐ No

Building Permit Issued Date

☐ Non-Profit

Does the project include Private Well? If Yes, forward to WS Program.

☐ Yes ☐ No

Does the project include Food Services? If Yes, forward to FP Program.

☐ Yes ☐ No

Facility Phone

0 (Text)

Facility Email

0 (Text)

PROPERTY INFORMATION

Water Source

Private

Sewage Disposal

Private

Design Wastewater Flow

0

(Number)

Permit Type

--Select--

PLAT STATS

Total Number of buildable lots to be recorded

0 (Number)

Total number of open space lots to be recorded

0 (Number)

Total number of bulk parcels to be recorded

0 (Number)

Total number of lots / parcels to be recorded

0 (Number)

New buildable lots created

0

(Number)

Date PLAT signed by Health Officer

PLAT Type

--Select--

Date Preliminary Plan Signed by HO

☐ Extension Granted**DEVELOPMENT PLANS**

Property Type

Residential ▾

Signature Required

☐ Yes ☐ No

Number of paper copies

0

(Number)

Number of buildable lots created

0

(Number)

Total Number of Lots

0

(Number)

Plan Version

Initial ▾

Engineer

0

(Text)

Number of mylar copies

0

(Number)

Number of non-buildable lots created

0

(Number)

Associated Plans

WELL AND SEPTIC INTERNAL

State Review Required

☐ Yes ☐ No

Coordinate State Review

☐ Yes ☐ No

Proposed Septic System Type

--Select-- ▾

FOOD ESTABLISHMENT FACILITY

Priority Assessment

--Select-- ▾

Licensed Type

--Select-- ▾

License Category

--Select-- ▾

FOOD ESTABLISHMENT INFORMATION

Hours of Operation

 (Text)☐ Operating Seasonally Only

If Operating Seasonally, What is the start month?

 (Text)

Are pets allowed in a outdoor seating area?

☐ Yes ☐ No

Full Bar?

☐ Yes ☐ No**RESTAURANT AND FOOD SERVICE**

Food Service Facility Secondary Category

--Select-- ▾

Total Seating Capacity

(Number)

Number of Restrooms

(Number)

Bar Seating Capacity

(Text)

Interior Restaurant Seating Capacity

(Number)

Outdoor Seating Capacity

(Text)

Does the restaurant have outdoor seating

☐ Yes ☐ No**EQUIPMENT**

Evaluated non NSF, ANSI, CF or other standards

☐ Yes ☐ No

Description of Refrigeration Units

Number of Walk-In Refrigerator Units

 (Number)

Description of Walk-In Freezer Units

 (Text)

Is there a bulk ice machine available

☐ Yes ☐ No

Space Limitation

Number of Hand Sinks Available

 (Number)

Hood System

(Text)

Ventless Equipment

 (Text)**PLUMBING**

Size and Installation of the water heater?

 (Text)

Is there a grease Interceptor or grease trap?

--Select-- ▾

SCOPE OF WORK:
TO INSTALL A GROUND MOUNTED SOLAR PHOTOVOLTAIC SYSTEM AT THE RESIDENCE LOCATED AT 16220 FREDERICK RD., WOODBINE, MD 21797, USA. THE POWER GENERATED BY THE PV SYSTEM WILL BE OFF GRID. THE PV SYSTEM DOES INCLUDE STORAGE BATTERIES.

EQUIPMENT SUMMARY	
39 CW ENERGY CWT410-108PMB10 410 WP(410W) MODULES	
1 EG4 FLEXBOSS 21 [240V] INVERTER	
39 TIGO TS4-A-F RAPID SHUTDOWN	
2 EG4 WALLMOUNT ALL WEATHER LITHIUM BATTERY 48V 280AH 14.3KWH	

- GENERAL NOTES:**
- THESE CONSTRUCTION DOCUMENTS HAVE BEEN BASED ON FIELD INSPECTIONS AND OTHER INFORMATION AVAILABLE AT THE TIME. ACTUAL FIELD CONDITIONS MAY REQUIRE MODIFICATIONS IN CONSTRUCTION DETAILS.
 - ARCHITECT HAS NOT BEEN RETAINED TO SUPERVISE ANY CONSTRUCTION OR INSTALLATION OF ANY EQUIPMENT AT SITE.
 - CONTRACTOR SHALL FURNISH ALL LABOR, MATERIAL, EQUIPMENT, TOOLS, OBTAINS ALL PERMITS, LICENSES AND PAY ALL REQUIRED FEES AND COMPLETE INSTALLATION.
 - CONTRACTOR HAS THE FULL RESPONSIBILITY TO CHECK AND VERIFY ALL DIMENSIONS AND EXISTING CONDITIONS. ANY DISCREPANCIES SHALL BE REPORTED TO THE ENGINEER BEFORE PROCEEDING WITH THE WORK. ANY WORK STARTED BEFORE CONSULTATION AND ACCEPTANCE BY THE ENGINEER SHALL BE THE SOLE RESPONSIBILITY OF THE CONTRACTOR AND SHALL BE SUBJECT TO CORRECTION BY THEM WITHOUT ADDITIONAL COMPENSATION.
 - DAMAGE CAUSED TO THE EXISTING STRUCTURE, PIPES, DUCTS, WINDOWS, WALL, FLOORS, ETC. SHALL BE REPAIRED TO THE ORIGINAL CONDITION OR REPLACED BY THE CONTRACTOR AT NO ADDITIONAL COST.
 - THE CONTRACTOR SHALL BE HELD RESPONSIBLE FOR THE PROPER INSTALLATION AND COMPLETION OF THE WORK WITH APPROVED MATERIALS.
 - NO CHANGES ARE TO BE MADE WITHOUT THE CONSULTATION AND APPROVAL OF THE ARCHITECT.
 - CONTRACTOR SHALL OBTAIN BUILDING PERMIT. NO WORK TO START UNLESS BUILDING PERMIT IS PROPERLY DISPLAYED.
 - ALL WORKMANSHIP AND MATERIALS SHALL BE OF FIRST QUALITY AND IN COMPLIANCE WITH THE REQUIREMENTS OF THE MD BUILDING CODE, THE DEPARTMENT OF ENVIRONMENTAL PROTECTION AND ALL PERTINENT AGENCIES.
 - IT IS ESSENTIAL THAT ALL WORK PROCEED WITH THE MAXIMUM COOPERATION OF ALL PARTIES AND WITH MINIMUM INTERFERENCE TO THE OCCUPANTS WITHIN THE BUILDING. THE OWNER'S DIRECTIONS IN THIS REGARD SHALL BE FULLY COMPLIED WITH.
 - ALL EXPOSED PLUMBING, HVAC, ELECTRICAL DUCTWORK, PIPING AND CONDUITS ARE TO BE PAINTED BY GENERAL CONTRACTOR.
 - THE CONTRACTOR SHALL PERFORM THE WORK IN STRICT CONFORMANCE WITH THE LOCAL LAWS, REGULATIONS AND THE NATIONAL ELECTRIC CODE.
 - THE CONTRACTOR SHALL OBTAIN ALL PERMITS, APPROVALS, AFFIDAVITS, CERTIFICATIONS, ETC. AND PAY ALL FEES AS REQUIRED BY THE LOCAL AUTHORITIES.
 - CONTRACTORS SHALL OBTAIN FIRE CERTIF. UPON COMPLETION OF WORK.

- ELECTRICAL NOTES:**
- THE EQUIPMENT AND ALL ASSOCIATED WIRING AND INTERCONNECTION SHALL BE INSTALLED ONLY BY QUALIFIED PEOPLE. A QUALIFIED PERSON IS ONE WHO HAS SKILLS AND KNOWLEDGE RELATED TO THE CONSTRUCTION AND OPERATION OF THE ELECTRICAL EQUIPMENT AND INSTALLATIONS AND HAS RECEIVED SAFETY TRAINING TO RECOGNIZE AND AVOID THE HAZARDS INVOLVED. (NEC 690.4(E) AND 705.6)
 - LOCAL UTILITY PROVIDER SHALL BE NOTIFIED PRIOR TO USE AND ACTIVATION OF ANY SOLAR PHOTOVOLTAIC INSTALLATION. FOR A LINE SIDE TAP CONNECTION, UTILITY NEEDS TO BE NOTIFIED WELL IN ADVANCE TO COORDINATE BUILDING ELECTRICAL SHUT OFF.
 - NEW CONDUIT ROUTING SHOWN IS ESSENTIALLY SCHEMATIC. SUBCONTRACTOR SHALL LAY OUT RUNS TO SUIT FIELD CONDITIONS AND THE COORDINATION REQUIREMENTS OF OTHER TRADES.
 - ARRAY WIRING SHOULD NOT BE READILY ACCESSIBLE EXCEPT TO QUALIFIED PERSONNEL.
 - ALL EXTERIOR CONDUIT, FITTINGS, AND BOXES SHALL BE WATERTIGHT AND APPROVED FOR USE IN WET LOCATIONS. (NEC 314.15A).
 - WIRING METHODS FOR PV SYSTEM CONDUCTORS AREN'T PERMITTED WITHIN 10 IN. OF THE ROOF DECKING OR SHEATHING EXCEPT WHERE LOCATED DIRECTLY BELOW THE ROOF SURFACE THAT'S COVERED BY PV MODULES AND ASSOCIATED EQUIPMENT WIRING.
 - BACKFED BREAKER MUST BE AT THE OPPOSITE END OF BUS BAR FROM THE MAIN BREAKER OR MAIN LUG SUPPLYING CURRENT FROM THE UTILITIES.
 - ALL CONDUCTORS AND WIRE TIES EXPOSED TO SUNLIGHT ARE LISTED AS UV RESISTANT.
 - CONTRACTOR SHALL FOLLOW ALL ELECTRICAL EQUIPMENT LABELING REQUIREMENTS IN NEC 690 AND NEC 2020 PV SOURCE, OUTPUT AND INVERTER CIRCUITS SHALL BE IDENTIFIED AT ALL POINTS OF TERMINATION, CONNECTION, AND SPLICES. THE MEANS OF ID CAN BE SEPARATE COLOR CODING, MARKING TAPE, TAGGING ETC. (NEC 690.4).
 - MEASURE THE LINE-TO-LINE AND LINE-TO-NEUTRAL VOLTAGE OF ALL SERVICE ENTRANCE CONDUCTORS PRIOR TO INSTALLING ANY SOLAR EQUIPMENT. THE VOLTAGES FOR THE 240VAC RATED.

GOVERNING CODES	
2021 INTERNATIONAL BUILDING CODE	
2021 INTERNATIONAL FIRE CODE	
2021 INTERNATIONAL RESIDENTIAL CODE	
2020 NATIONAL ELECTRICAL CODE	
AHJ: HOWARD COUNTY	

SYSTEM RATING	
15,990 KWDC	
16,000 KWAC	
SHEET INDEX	
PV1	COVER PAGE
PV2	SITE PLAN
PV3	ARRAY PLAN & MODULES
PV4	STRING LAYOUT & BOM
PV5	EQUIPMENT ELEVATION
PV6	ATTACHMENT DETAIL
PV7-PV7A	ELECTRICAL LINE DIAGRAM & CALC'S.
PV8	SPECIFICATIONS & NOTES
PV9-PV9A	SIGNAGE
PV10-PV17	EQUIPMENT SPECIFICATIONS

- WIRING AND CONDUIT NOTES:**
- ALL CONDUIT SIZES AND TYPES, SHALL BE LISTED FOR ITS PURPOSE AND APPROVED FOR THE SITE APPLICATIONS
 - ALL PV CABLES AND HOMERUN WIRES BE #10AWG *USE-2, PV WIRE, OR PROPRIETARY SOLAR CABLING SPECIFIED BY MFR, OR EQUIVALENT; ROUTED TO SOURCE CIRCUIT COMBINER BOXES AS REQUIRED
 - ALL CONDUCTORS AND OCPD SIZES AND TYPES SPECIFIED ACCORDING TO [NEC 690.8 (A)(1) & (B)(1)], [NEC 240] [NEC 690.7] FOR MULTIPLE CONDUCTORS
 - ALL PV DC CONDUCTORS IN CONDUIT EXPOSED TO SUNLIGHT SHALL BE DERATED ACCORDING TO [NEC TABLE 310.15 (B)(2)(C)] BLACK ONLY**
 - EXPOSED ROOF PV DC CONDUCTORS SHALL BE USE-2, 90°C RATED, WET AND UV RESISTANT, AND UL LISTED RATED FOR 600V. UV RATED SPIRAL WRAP SHALL BE USED TO PROTECT WIRE FROM SHARP EDGES
 - PHASE AND NEUTRAL CONDUCTORS SHALL BE DUAL RATED THINWALL-2 INSULATED, 90°C RATED, WET AND UV RESISTANT, RATED FOR 600V PER NEC 2020 OR 1000V PER NEC 2020
 - 4-WIRE DELTA CONNECTED SYSTEMS HAVE THE PHASE WITH THE HIGHER VOLTAGE TO GROUND MARKED ORANGE OR IDENTIFIED BY OTHER EFFECTIVE MEANS
 - ALL SOURCE CIRCUITS SHALL HAVE INDIVIDUAL SOURCE CIRCUIT PROTECTION
 - VOLTAGE DROP LIMITED TO 2%
 - AC CONDUCTORS >4AWG COLOR CODED OR MARKED: PHASE A OR L1- BLACK, PHASE B OR L2- RED, PHASE C OR L3- BLUE, NEUTRAL- WHITE/GRAY

- A QUALIFIED PERSON IS ONE WHO HAS SKILLS AND KNOWLEDGE RELATED TO THE CONSTRUCTION AND OPERATION OF THE ELECTRICAL EQUIPMENT AND INSTALLATIONS AND HAS RECEIVED SAFETY TRAINING TO RECOGNIZE AND AVOID THE HAZARDS INVOLVED. (NEC 690.4(E) AND 705.6)
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- MEASURE THE LINE-TO-LINE AND LINE-TO-NEUTRAL VOLTAGE OF ALL SERVICE ENTRANCE CONDUCTORS PRIOR TO INSTALLING ANY SOLAR EQUIPMENT. THE VOLTAGES FOR THE 240VAC RATED.



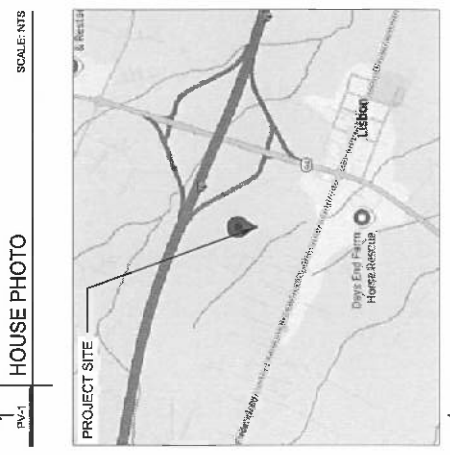
Richard Pantel
P.E.
MD Lic. No. 39701

Digitally signed by Richard Pantel
DN: cn=Richard Pantel, o=Professional Engineer, ou=State of Maryland, email=rpantel@pantel.com, c=US

Reviewed and approved
Richard Pantel, P.E.
MD Lic. No. 39701

Professional Certification: I hereby certify that I am a duly licensed professional engineer in the State of Maryland, and that I am the author of the design and calculations on this drawing.

SYSTEM INFO.	
39 CW ENERGY CWT410-108PMB10 410 WP(410W) MODULES	
1 EG4 FLEXBOSS 21 [240V] INVERTER	
DC SYSTEM SIZE: 15,990 KWDC	
AC SYSTEM SIZE: 16,000 KWAC	



DIV
HOMEOWNERS

REVISIONS

DESCRIPTION	DATE	REV
REVISION	10/15/2025	A
REVISION	10/20/2025	B

Signature with Seal

PROJECT NAME & ADDRESS

GEOFFREY WARLICK
/JANE LUCAS
RESIDENCE
16220 FREDERICK RD.,
WOODBINE, MD 21797, USA
Email: gswarlick@gmail.com
PH #: (281) 839-0283

COVER PAGE

DATE: 10/20/2025
SHEET NAME

SHEET SIZE
ANSI B
11" X 17"

SHEET NUMBER
PV-1



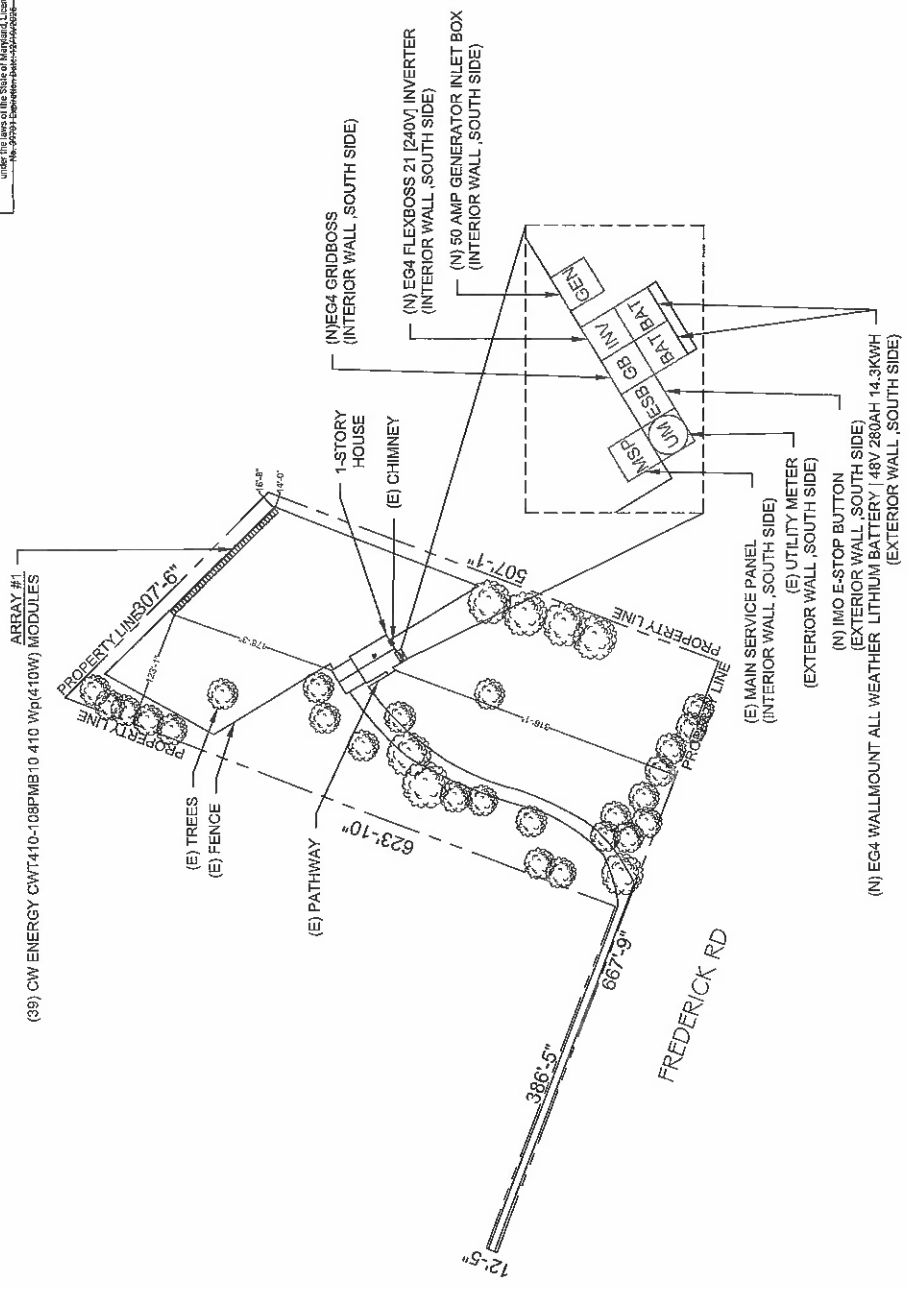
Reviewed and approved
Richard Pantel, P.E.
MD Lic. No. 39701

Professional Certification: I hereby certify that this drawing was prepared by me or under my direct supervision and that I am a duly licensed professional engineer in the State of Maryland.

LEGEND

(E)	UTILITY METER
(E)	MAIN SERVICE PANEL
(N)	EG4 FLEXBOSS 21 [240V] INVERTER
(N)	EG4 ELECTRONICS MICRO-GRID INTERCONNECTION DEVICE
(N)	EG4 GRID BOSS (MICRO-GRID INTERCONNECTION DEVICE)
(N)	IMO E-STOP BUTTON
(N)	50 AMP GENERATOR INLET BOX
(V)	VENT, ATTIC FAN (ROOF OBSTRUCTION)

CW ENERGY CHW7410-108PMB10.410 WP(410W) MODULES



DIY
HOMEOWNERS

SYSTEM INFO.

(39) CW ENERGY CHW7410-108PMB10.410 WP(410W) MODULES
(1) EG4 FLEXBOSS 21 [240V] INVERTER
DC SYSTEM SIZE: 16,890 KWDC
AC SYSTEM SIZE: 16,500 KWAC

REVISIONS

DESCRIPTION	DATE	REV
REVISION	10/15/2025	A
REVISION	10/26/2025	B

Signature with Seal

PROJECT NAME & ADDRESS

GEOFFREY WARLICK
/JANE LUCAS
RESIDENCE
16220 FREDERICK RD,
WOODBINE, MD 21797, USA
PH #: (281) 839-0283
Email: gswarlick@gmail.com

DATE: 10/20/2025

SHEET NAME

SITE PLAN

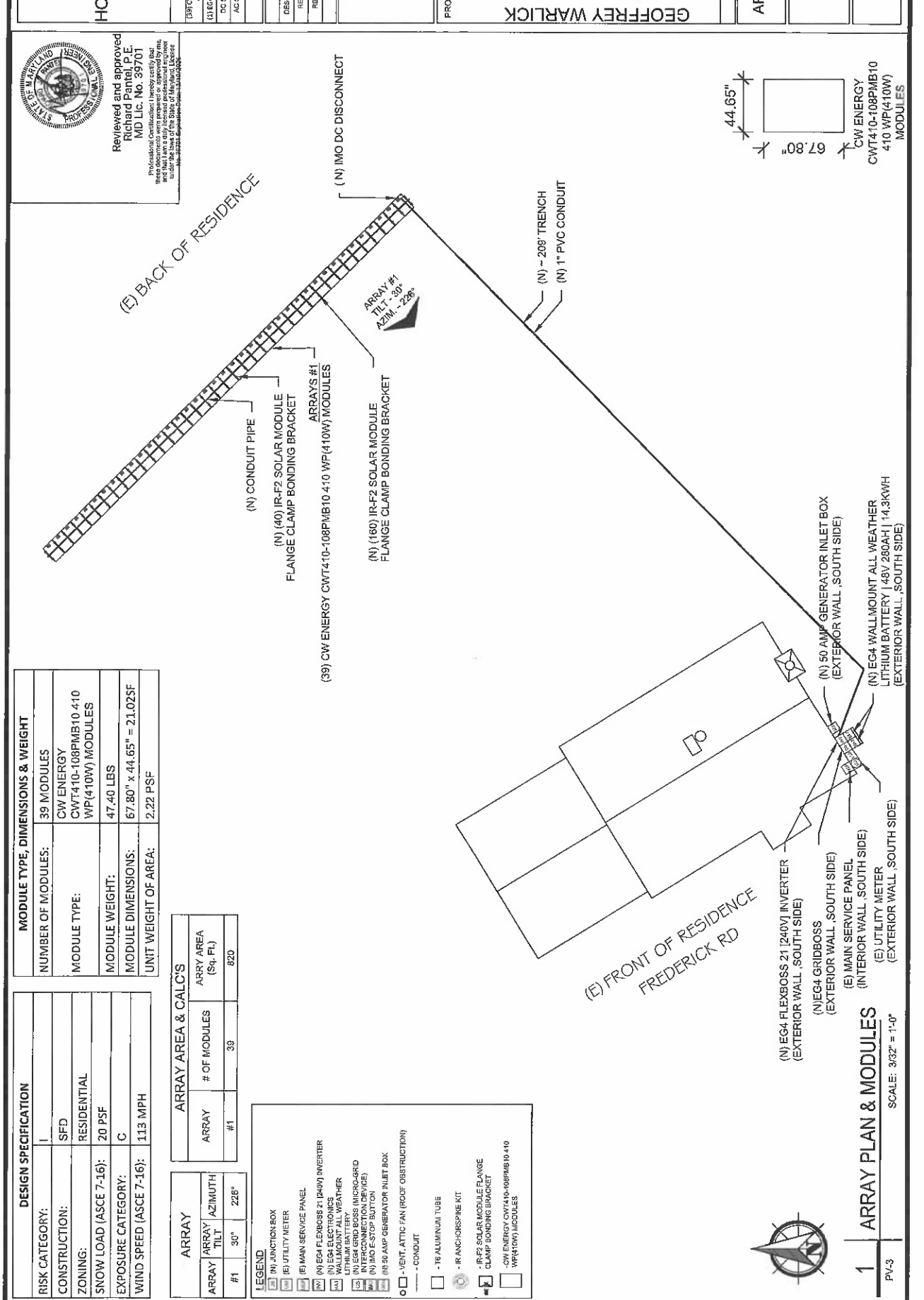
SHEET SIZE

ANSI B
11" X 17"

SHEET NUMBER

PV-2





DESIGN SPECIFICATION	
RISK CATEGORY:	I
CONSTRUCTION:	SFD
ZONING:	RESIDENTIAL
SNOW LOAD (ASCE 7-16):	20 PSF
EXPOSURE CATEGORY:	C
WIND SPEED (ASCE 7-16):	113 MPH

MODULE TYPE, DIMENSIONS & WEIGHT	
NUMBER OF MODULES:	39 MODULES
MODULE TYPE:	CW ENERGY CWT410-108PMB10 410 WP(410W) MODULES
MODULE WEIGHT:	47.40 LBS
MODULE DIMENSIONS:	67.80" x 44.65" = 21.02SF
UNIT WEIGHT OF AREA:	2.22 PSF

ARRAY AREA & CALC'S		
ARRAY	# OF MODULES	ARRAY AREA (Sq. Ft.)
#1	39	820

LEGEND

- (N) JUNCTION BOX
- (E) UTILITY METER
- (E) MAIN SERVICE PANEL
- (N) EG4 FLEXBOSS 21 [240V] INVERTER
- (N) EG4 ELECTRONICS
- (N) EG4 GRID BOSS (MICRO-4RD)
- (N) EG4 GRID BOSS (MICRO-4RD) INTERCONNECTION DEVICE
- (N) MD-ESTOP BUTTON
- (N) 50 AMP GENERATOR INLET BOX
- (N) 160 IR-F2 SOLAR MODULE
- (N) 40 IR-F2 SOLAR MODULE
- (N) CONDUIT
- (N) 16 ALUMINUM TUBE
- (N) R-ANCHOR SPIKE KIT
- (N) IR-F2 SOLAR MODULE FLANGE CLAMP BONDING BRACKET
- (N) CW ENERGY CWT410-108PMB10 410 WP(410W) MODULES

DIY HOMEOWNERS

REVISIONS

DESCRIPTION	DATE	REV
REVISION	10/15/2025	A
REVISION	10/30/2025	B

Signature with Seal

PROJECT NAME & ADDRESS

GEOFFREY WARLICK
/JANE LUCAS
RESIDENCE
16220 FREDERICK RD,
WOODBINE, MD 21797, USA
PH #: (281) 839-0283
Email: gswarlick@gmail.com

DATE: 10/30/2025

SHEET NAME: ARRAY PLAN & MODULES

SHEET SIZE: ANSI B 11" X 17"

SHEET NUMBER: PV-3

Reviewed and approved
Richard Pantel, P.E.
MD Lic. No. 39701

Professional Certification: I hereby certify that the design and construction of this project conform to the applicable codes and standards of the State of Maryland, and that I am a duly-licensed professional engineer.



1 **ARRAY PLAN & MODULES**
SCALE: 3/32" = 1'-0"
PV-3

8/28/85
p.m.
8/29/85 - AM

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
992-2330

04-318765

INDEXED

ADP-023
8/29/85
P 34755
A 10275 24649

ELLICOTT CITY

DISTRICT 4th

DATE 7/2/85

Arthur Bell

IS PERMITTED TO INSTALL ☒ ALTER

ADDRESS 10331 South Dolfield Road. Baltimore, MD 21117 PHONE 363-0880

SUBDIVISION Lower Trail ROAD 16212 Route 144 LOT 17

PROPERTY OWNER Robert Dewberry

ADDRESS Mr. Robin

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES ☒ NO

SEPTIC TANK CAPACITY 1500 GALLONS NUMBER OF BEDROOMS 3

TRENCHES - 224 sq. ft. per bedroom with garbage grinder. Trench to be 2 feet wide. Inlet 4 1/2 feet below original grade. Bottom maximum depth 9 1/2 feet below original grade. Effective area begins at 4 1/2 feet below original grade. 5 feet of stone below distribution pipe. LOCATION: Start the first trench 275 feet from the back (North) lot line and 125 feet from the right (East) lot line. Run trenches along level ground toward East lot line. NOTE: No trench to exceed 100 feet in length. If more than one trench used, a distribution box is required. Trenches to be installed on level ground. Call for inspection of trench(s) before and after gravel is installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

8/29/85 - W.P.T. is OK see other sheet RH

PLANS APPROVED BY C. Williams DATE 4/3/85

COVER NO WORK UNTIL INSPECTED AND APPROVED.

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

NOTE: IF TRENCH IS USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH.

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER. NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH.

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 40 PVC OR ABS.

PERMIT VOID AFTER THREE YEARS.

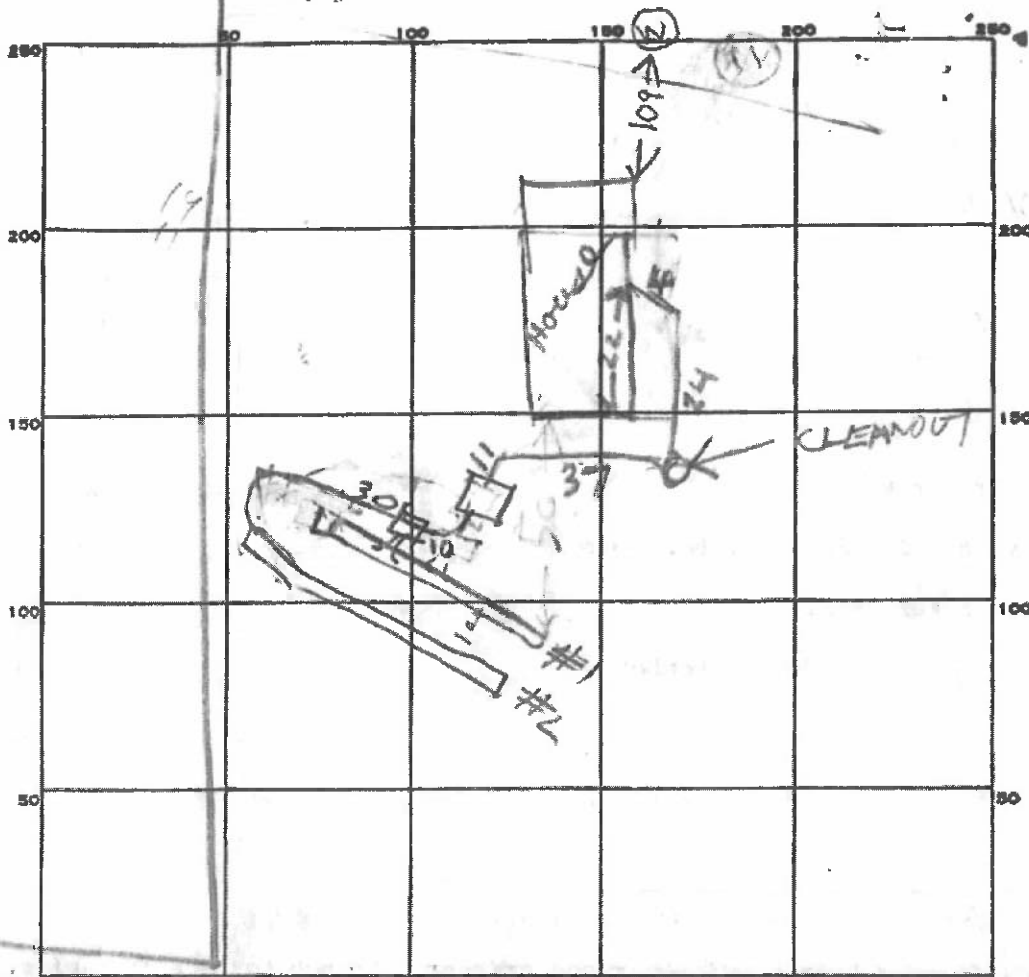
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

10275
24649



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD _____

SEPTIC TANK, LEVEL OK 1500

CLEANOUTS ST SEWER
MANHOLE OK

DISTRIBUTION BOX, LEVEL OK

TILE FIELD, DEPTH #1 #2 9 10.5 FT. TRENCH WIDTH #1 #2 2 2 FT.

GRAVEL DEPTH #1 IN. TOTAL LENGTH #1 #2 70 70 FT.

NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA ONE SIDE #1 #2 315 420

SEEPAGE PITS, INSIDE DIAMETER _____ FT. DEPTH BELOW INLET _____ FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS 8/29/85 LOCATION OK ADD STONE TO TRENCH #1

DIG TRENCH #2 COVER HOUSE SEWER RH

8/29/85 1100 AM TRENCH #1 OK TO COVER ADD STONE TO TRENCH #2

8/29/85 200 PM STONE ADDED TO TRENCH #2

8/29/85 235 PM TRENCH #2 CONNECTED TO BOX

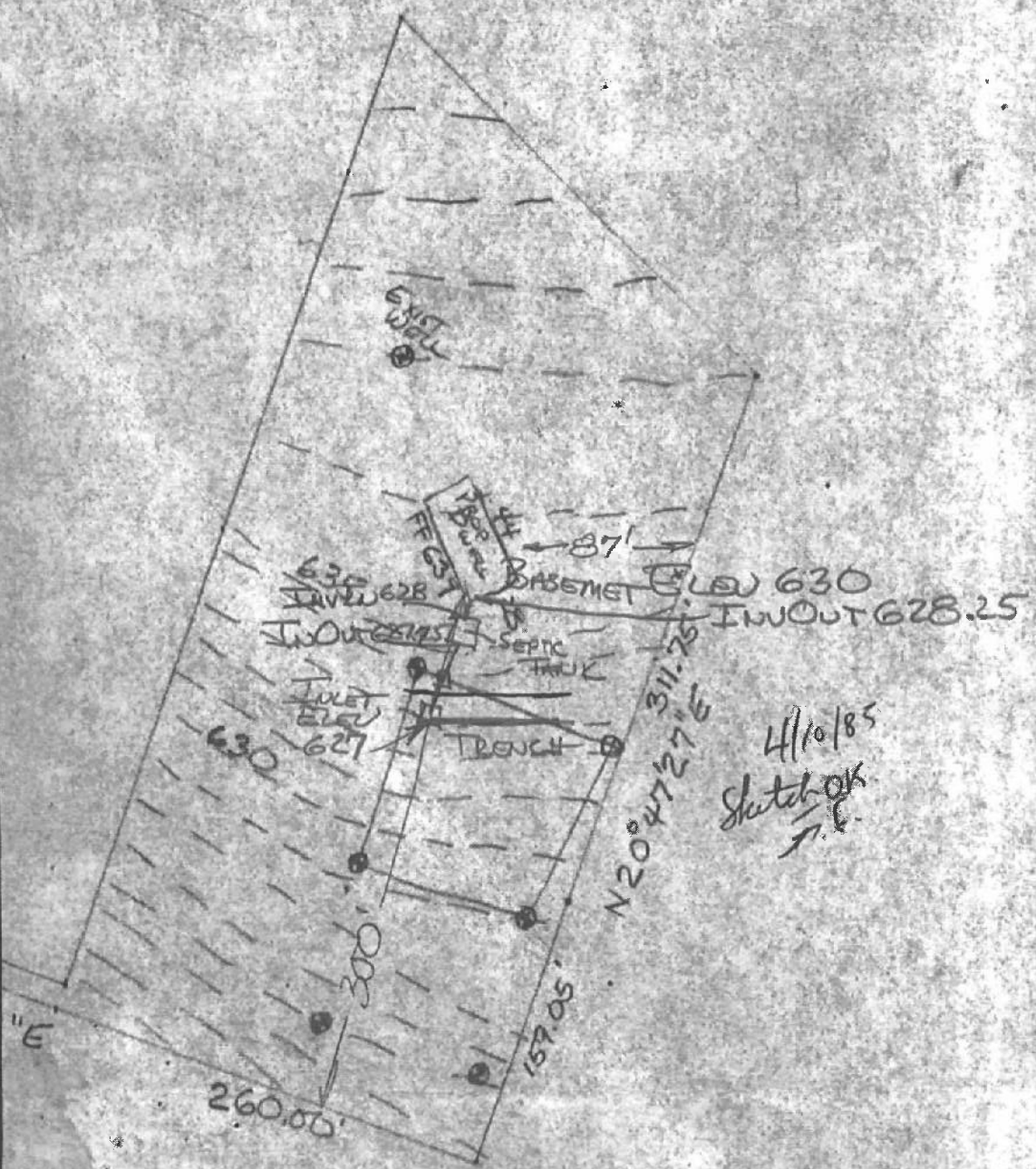
DATE SYSTEM APPROVED

8/29/85

INSPECTOR

Raymond Hodge

130 61



4/10/85
Sketch OK
F.E.

SCALE 1" = 100'

22 Ac. ±

Eshenbaugh, Melanie

From: Geoff Warlick <gswarlick@gmail.com>
Sent: Sunday, January 11, 2026 2:06 PM
To: Eshenbaugh, Melanie
Cc: Jane.warlick@yahoo.com
Subject: Re: B25005310
Attachments: IMG_2075.jpeg; IMG_2078.jpeg; IMG_2077.jpeg; IMG_2076.jpeg

WARNING!!!

This email originated from someone outside of Howard County
*****DO NOT CLICK LINKS OR OPEN ATTACHMENTS*****
unless you recognize the sender and know for sure that the content is safe

Good afternoon Melanie,

Thank you for this find, I've never noticed the missing bolts or opened to check the seal so I'm glad to have it corrected. Please see attached photos, I've replaced all of the bolts and purchased and installed a new seal as of today, 11JAN26.

Thank you,

Geoff Warlick

On Thu, Jan 8, 2026 at 4:51 PM Eshenbaugh, Melanie <MEshenbaugh@howardcountymd.gov> wrote:

Good afternoon Jane,

It was a pleasure meeting you on Monday. I wanted to reach out regarding the conditional approval for your building permit that we spoke about during my site visit to your property. As discussed, the condition of the well cap presents a potability concern for your residence and will need to be secured onto the well casing (see attached). The cap is missing some bolts and the seal wasn't observed. Please perform this repair and follow-up with a photo/documentation once this has been taken care of to ensure the well meets current code standards. Also, we strongly recommend water testing for bacteria/nitrates and our Community Hygiene program (410-313-1773) can assist with scheduling water sampling. Please let me know if you have any questions and best wishes.

Melanie Eshenbaugh

Bureau of Environmental Health

Howard County Health Dept.

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