SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

INDEXED

DISTRICT 5th

DATE 3/6/74

Jack Fyock IS PERMITTED TO INSTALL X OR ALTER

ADDRESS Ten Oaks Road, Glenelg, Maryland PHONE 286-2930

A SEWAGE DISPOSAL SYSTEM LOCATED AT

SUBDIVISION Beauford Park 8372 ROAD Reservoir Road LOT 6, Blk. B, Se

PROPERTY OWNER Mr. Alfred M. Schrider

ADDRESS 13517 Grenoble Drive, Rockville, Maryland 20853 Phone: 942-5887

SPECIFICATIONS 4 bedrooms

DRAIN FIELD ____ DEPTH ____ FEET. BOTTOM AREA ____ SQ. FT.

SEEPAGE PITS ____ ABSORBENT SIDE-WALL AREA ____ SQ. FT.

SEPTIC TANK CAPACITY 1250 GALLONS

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 25% & TANK CAPACITY 50%.

OTHER DRY WELL - To have 115 sq. ft. effective absorbent sidewall area per bedroom below inlet. Inlet to be 4 ft. below originagl grade and maximum depth for dry well 10¼ ft. Locate dry well 25 ft. off right property line and 80 ft. back from front lot line. (Perc Holes 3 and 4).

NOTE: ALL PIPE FROM HOUSE TO DRY WELL MUST BE CAST IRON.
PERMIT VOID AFTER THREE YEARS.
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL.

PLANS APPROVED BY H. Snyder & Charles B. Streaker DATE 11/9/73

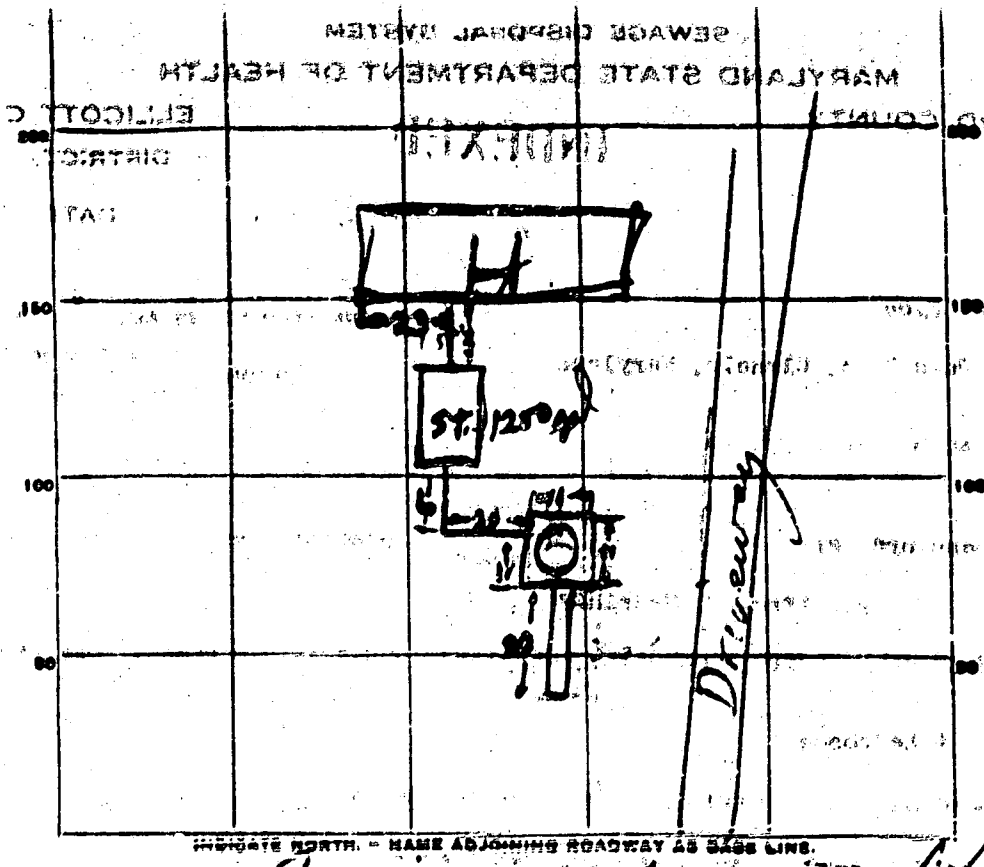
FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

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

BLDG. PERMIT SIGNED AND RETURNED 10-22-98

Serial # B0114633
screened porch

39598-C



PERMIT CARD 19633

CLEANOUTS

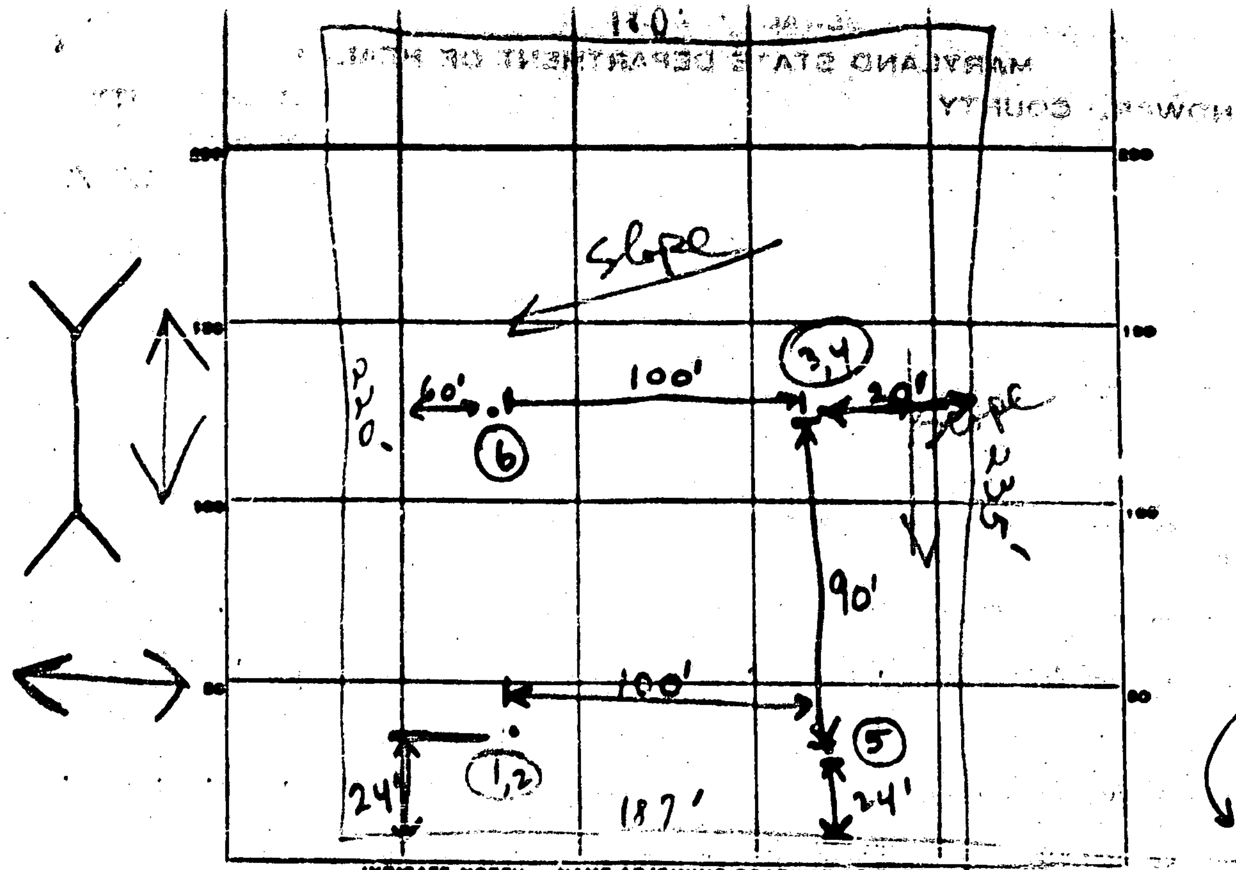
NUMBER OF TRENCHES 1 TOTAL Sidewall AREA 210 ft

SEEPAGE PITS, IF Perimeter 44 FT. DEPTH BELOW INLET 7 FT.

ABSORBENT AREA 518 SQ. FT.

REMARKS

DATE SYSTEM APPROVED 9/29/74 INSPECTOR



INDICATE NORTH. – NAME ADJOINING ROADWAY AS BASE LINE.

Reservoir Rd   Lot #9 B

count Section 4 Holes not indic! in perc

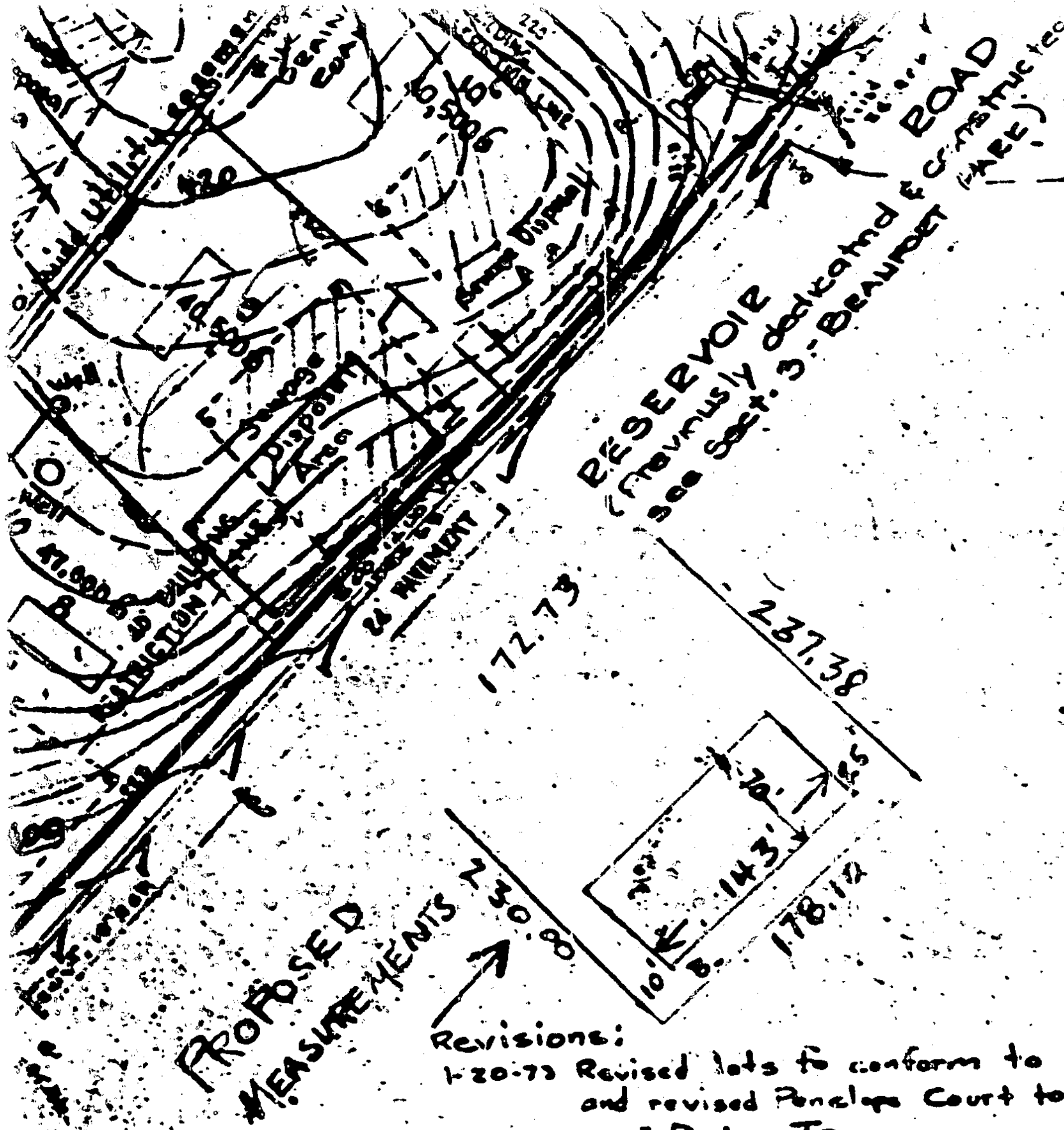
DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
	1	3½'	11:25	11:27	11:27	11:28	1
	2	9'	11:25	11:31	11:31	11:37	6
	3	4'	11:30	11:36	11:36	11:48	12
	4	10½'	11:30	11:35	11:35	11:40	5
	(5)	Top 3' – clay Bottom – Good Sand (Rock?)					Dry
	6	Top 3' – clay Bottom 8' 2 Good Sand				(Dry)	

(6 min av)

SOIL AUGER FINDING: ______ Dry Well (3,4) 4' inlet

TESTED BY: H Snyder

REMARKS: ______



Standard entrance as shown on page 170 of Howard Co. Construction Code

Revisions:
1-20-73 Revised lots to conform to Perc. Tests and revised Penelope Court to miss 60" Poplar Trees

—'PREL
S

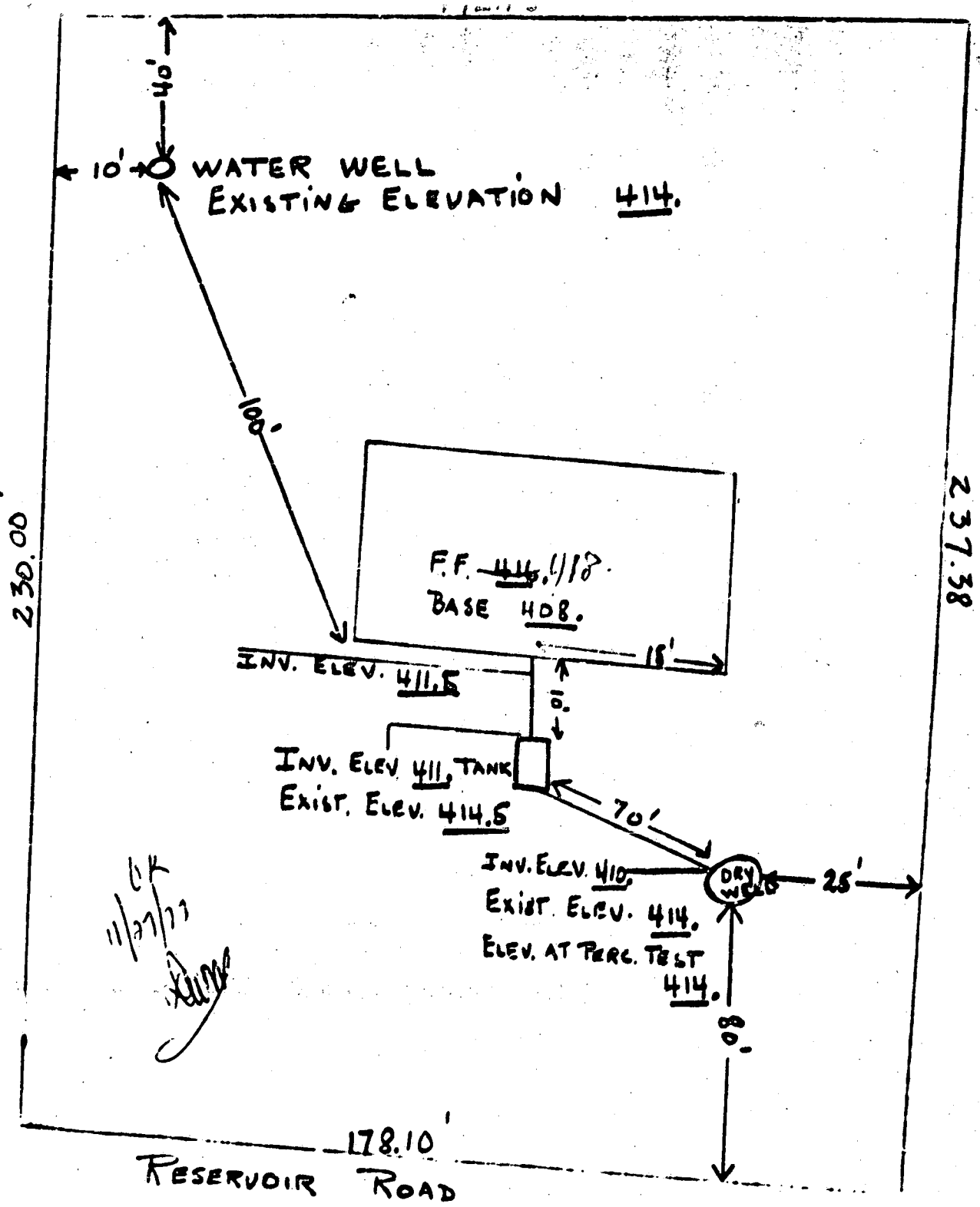
BEA

HOWA
SCAL

Owner &
Developer:
Anne
Beau
Tel.

Engineer:

Hugh W.



OK
11/27/77

I CERTIFY THE ABOVE MEASUREMENTS AND ELEVATION DIFFERENCES ARE ACTUAL AND CORRECT FOR THIS PROPE

Alfred M. Schrader

ALFRED M. SCHRADER - OWNER

17217 MHIL

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) 313-3600

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER B 00114633

Building Address 8372 Reservoir Rd
FULTON, MD 20759

Suite/Apt. #: _____ SDP/WP/Petition #: _____

Census Tract _____ Subdivision BERRY PARK

Section 4 Area ONE Lot 6

Tax Map _____ Parcel _____ Grid _____

Zoning _____ Map Coordinates _____ Lot size 1 ACRE

Owner's Name Alfred M. & Joyce A. Schrider

Address 8372 RESERVOIR RD

City FULTON State MD Zip Code 20759

Home Phone 301-490-0315 Work Phone _____

Applicant's Name & Mailing Address, (if other than stated hereon):

Phone _____ Fax _____

Existing Use SINGLE FAMILY HOME

Proposed Use SAME W/ SCREENED PORCH

Estimated Construction Cost $ 1,200.00

Description of Work 16X16 Screened Porch
REAR OF HOME

Contractor Company SELF

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

License No. _____

Phone _____ Fax _____

Occupant or Tenant OWNER

Contact Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Engineer or Architect Company _____

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

BUILDING DESCRIPTION - *COMMERCIAL*

Building Characteristics

Height:

No. of stories:

Gross area, sq. ft. per floor:

Use group:

Construction type:
_____ Reinforced Concrete
_____ Structural Steel
_____ Masonry
_____ Wood Frame

_____ State Certified Modular

Utilities

Water Supply:
____ Public
____ Private

Sewage Disposal:
____ Public
____ Private

Electric Yes ☐ No ☐
Gas Yes ☐ No ☐

Heating System:
Electric ☐ Oil ☐
Natural Gas ☐
Propane Gas ☐

Sprinkler system: N/A ☐
____ NFPA #13
____ Full
____ Partial
____ Other Suppression

BUILDING DESCRIPTION - *RESIDENTIAL*

Building Characteristics

SF Dwelling ☐ SF Townhouse ☐

	Depth	Width
1st floor:		
2nd floor:		
Basement:		

Finished Basement ☐ Unfinished Basement ☐
Crawl space ☐ Slab on Grade ☐
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: _____
Dimensions: _____
Footings: MEP + POST
Roof: GABLE

_____ State Certified Modular
_____ Manufactured Home

Utilities

Water Supply:
____ Public
✓ Private

Sewage Disposal:
____ Public
✓ Private

Electric Yes ☐ No ☐
Gas Yes ☐ No ☐

Heating System:
Electric ☐ Oil ☐
Natural Gas ☐
Propane Gas ☐

Sprinkler system: N/A ☐
____ NFPA #13D
____ NFPA #13R
____ 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 THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED 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.

Alfred M. Schrider — ALFRED M. SCHRIDER
Applicant's Signature *Print Name*

OWNER
Title/Company *Date*

Checks payable to: *DIRECTOR OF FINANCE OF HOWARD COUNTY*
** PLEASE WRITE NEATLY AND LEGIBLY. **

VALIDATION

- FOR OFFICE USE ONLY -

38186

AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official		
Dev. Engineering, DPZ		
Health	10/22/98	A McMillen
Fire Protection		

Is Sediment Control approval required prior to issuance?
YES ☐ NO ☐

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 NewTown Zone _____
SDP/Red-line approval date _____

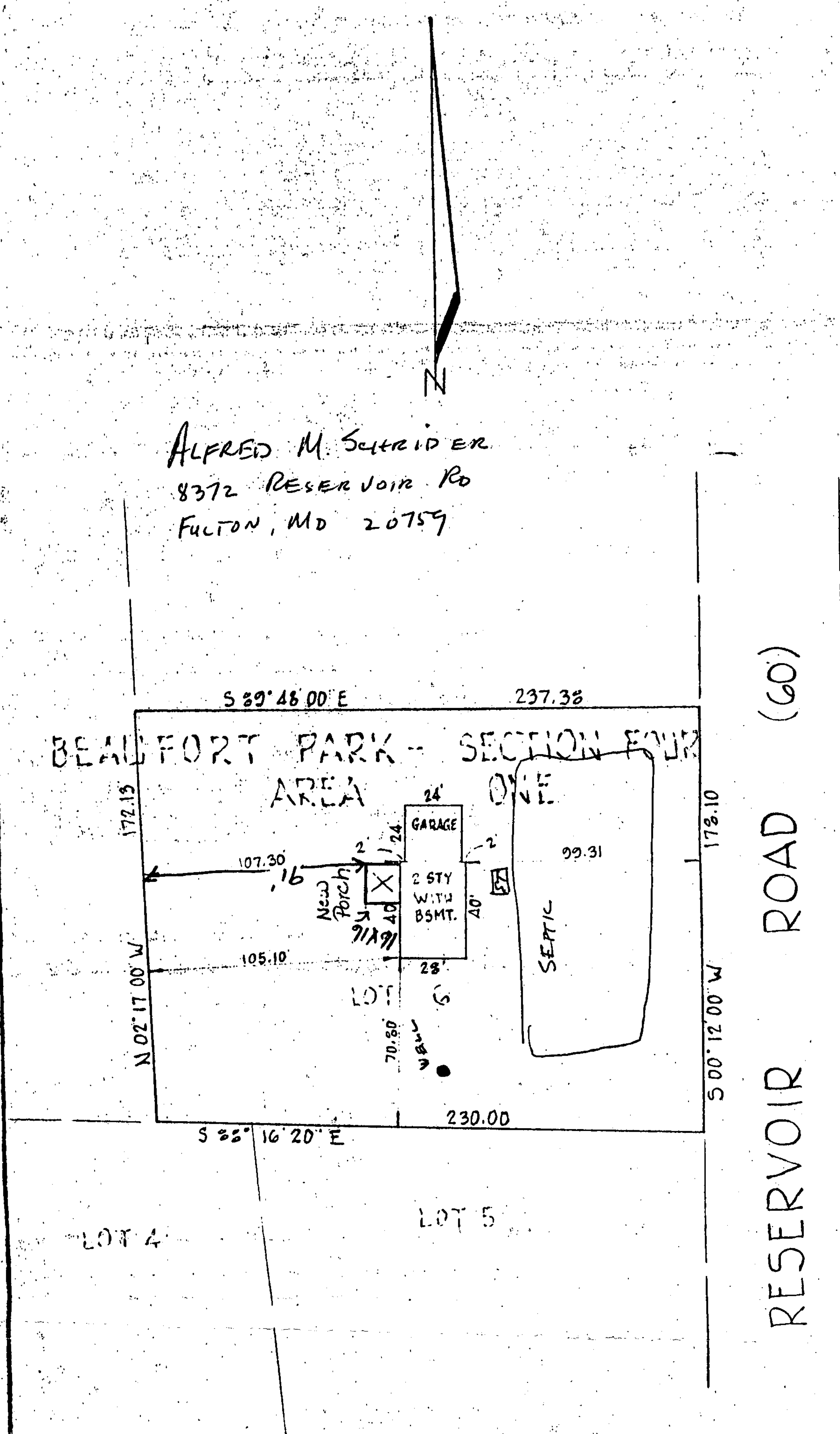
PROPERTY ID#:

Filing Fee $	25
Permit Fee $	26
(.10 sq. ft. ☐) (.15 sq. ft. ☐)	
Excise Tax $	
(.40 sq. ft. ☐) (.80 sq. ft. ☐)	
TOTAL FEES	51
Check #	
Validation #	
Accepted by:	

Distribution of Copies- White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA

a:\permit.fm

Rev. 8/25/98



10/22/98 Shown porch addition will have no impact to the existing well or septic
Amy McMullen

I CERTIFY THAT THE HOUSE SHOWN HEREON HAS BEEN ACCURATELY LOCATED BY TRANSIT AND STEEL TAPE SURVEY

A. W. Wilkerson

A.W. WILKERSON P.L.S. #54

SCALE : 1" = 60'

DATE : MAR 18, 1974

HOUSE LOCATION SURVEY ON LOT 6 - SECTION FOUR AREA ONE - BEAUFORT PARK - 5TH ELECTION DISTRICT - HOWARD COUNTY, MD	HUGH W. WILKERSON & ASSOCIATES ENGINEERS AND SURVEYORS RT. 1 BOX 311 LOTHIAN, MD. 20820 TEL. 257-3332