

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH

461-9933

05-409896

INDEXED

A 40714

DISTRICT 5th

DATE

12/27/89

DATE SYSTEM APPROVED

4-30-90

INSPECTOR

JEN

Frall Septic Service, Inc.

IS PERMITTED TO INSTALL ☒ ALTER

ADDRESS P. O. Box 659, Mt. Airy, Maryland 21771

PHONE 795-5674

SUBDIVISION Ashleigh Greene

ROAD 6964 Wescott Place

LOT 7

PROPERTY OWNER

Winchester Homes, Inc.

ADDRESS

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

GARBAGE GRINDER?

YES

NO

SEPTIC TANK CAPACITY

1250

GALLONS

NUMBER OF BEDROOMS

4

TRENCHES

180

sq. ft. per bedroom with garbage disposal. Trench to be 2 feet wide.

Inlet 4.5 feet below original grade. Bottom maximum depth 8.5 feet below original grade. Effective area begins at 4.5 feet below original grade.

4 feet of stone below distribution pipe.

LOCATION

Start the first trench 185 feet from the front lot line and 95 feet from the left lot line as seen when facing the lot from Wescott Place. Run 2-110 foot trenches on contour toward the right lot line.

NOTE

No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. *ok/cw*

PLANS APPROVED BY

Sid Abel

DATE

5/10/89

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: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX, TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

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 TWO 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

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

APPLICATION

PERCOLATION TESTING

A 40714

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

DISTRICT 5th

DATE 12/1/87

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 Winchester Homes, Inc. Real Estate Development Group

ADDRESS 6301 Ivy Lane Greenbelt, MD 20770 PHONE 301-220-1117

PROSPECTIVE BUYER N/A

ADDRESS N/A PHONE _____

PROPERTY LOCATION:

SUBDIVISION Ashleigh Greene Section I LOT NO 7

ROAD AND DESCRIPTION Intersection Hall Shop Road & Simpson Road
6964 Westcott Place

TAX MAP 41 PARCEL # 139

SIZE OF LOT 3.0 AC TYPE BLDG Single Family
(SINGLE FAMILY DWELLING OR COMMERCIAL)

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.

Paul G. Hamilton
(SIGNATURE OF APPLICANT)

APPROVED BY Sid Abel FOR St Dupond DATE 5-10-87

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 2-12-88 Pending subdivision plat approval and
perc hole locations JEN

BLDG. PERMIT, SIGNED
AND RETURNED 5-10-87

BP25460

THIS IS NOT A PERMIT

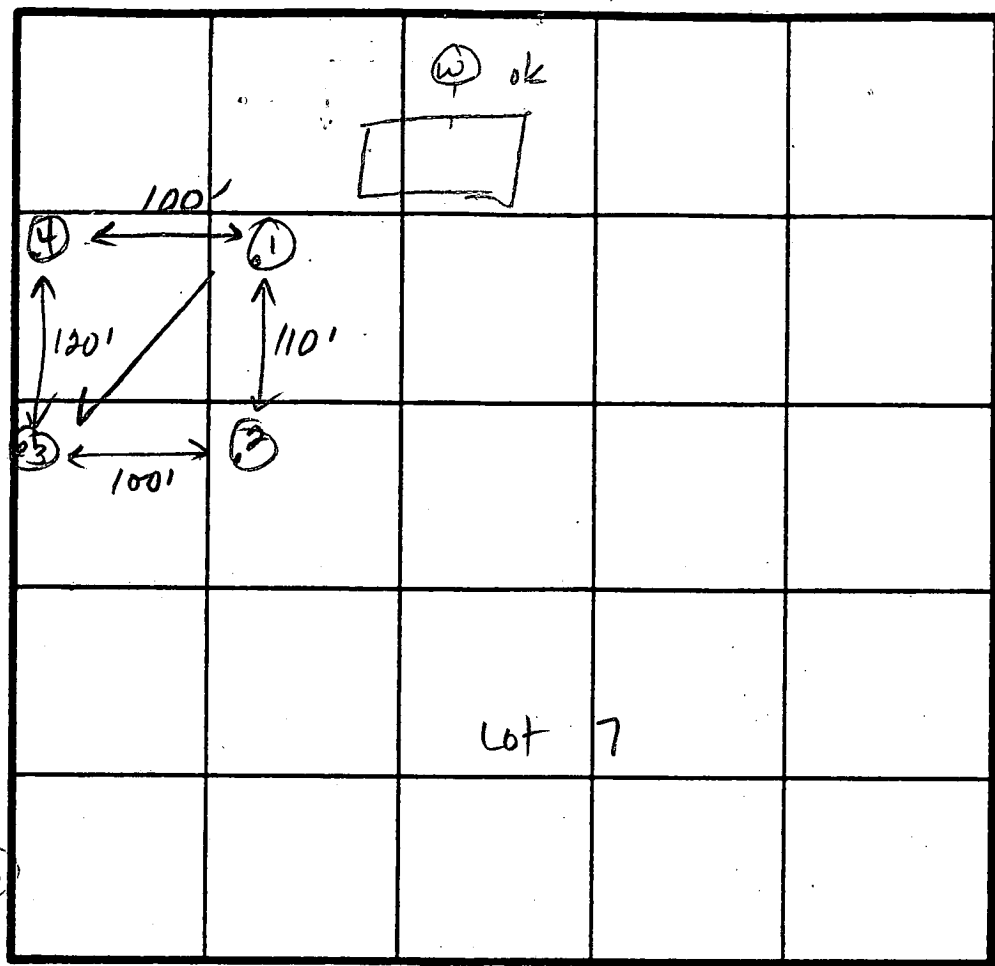
High 4
Low 3

Westcott Place

SOIL PROFILE

0-5.5 Rd-br si cl lm
5.5-11.5 Rd-br sa si lm
trc broken rock < 10%
11.5 Bottom

0-4.5 Rd-br si cl lm
4.5-13.5 Rd-br sa si lm
13.5 Bottom



0-3.0 Rd si cl m
3.0-11.5 Br-red sa si cl lm
trc mica
L5%
11.5 Bottom

0-7.0 Rd-br si cl lm
7.0-12.5 Rd-br sa si lm
12.5 Bottom

$\bar{x} = 3 \text{ min}$
Inlet 4.5 ft
Bottom 8.0 ft
180 sqft/bdmm

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

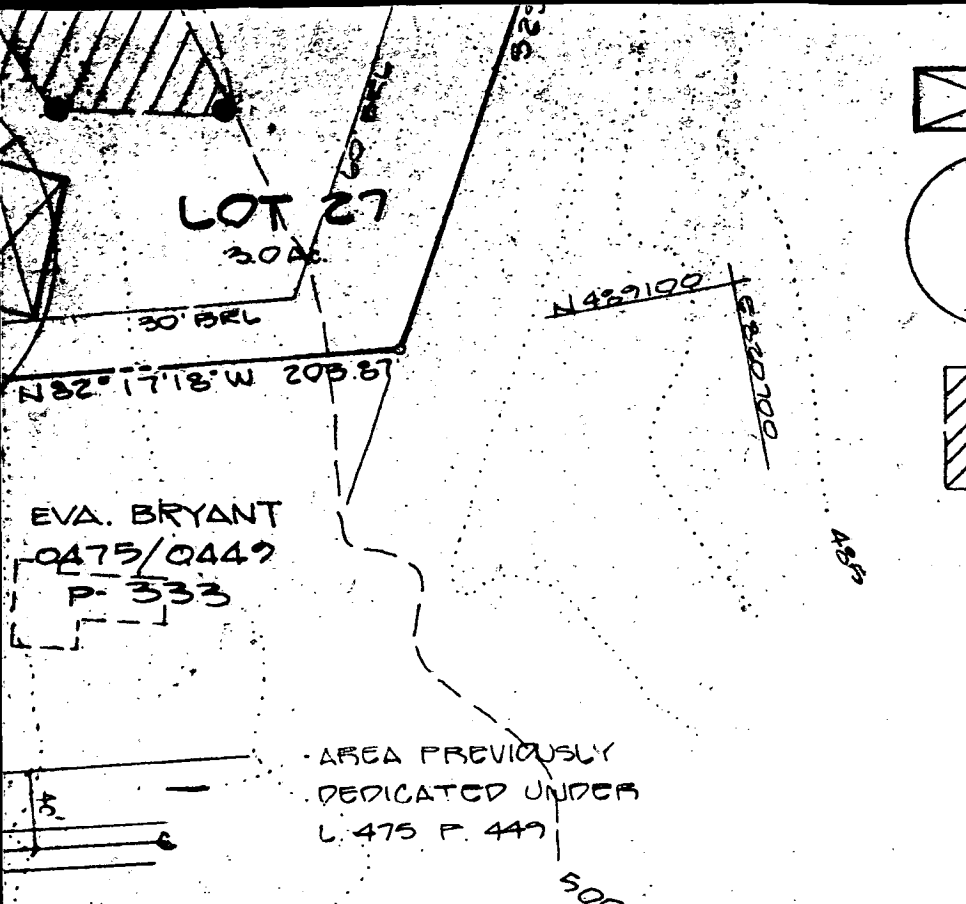
Hall Shop Rd

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2-17-88	1	5.5 S	1:38	1:41	1:41	1:46	5
		11.5 D	Bottom (see profile)				
	2	5.0 S	1:39	1:41	1:41	1:43	2
		11.5 D	Bottom (see profile)				
	3	4.5 S	1:44	1:46	1:46	1:50	4
		13.5 D	Bottom (see profile)				
	4	6.0 S	1:51	1:53	1:53	1:55	2
		8.5 M	1:51	1:53	1:53	1:55	2
		12.5 D	Bottom (see profile)				

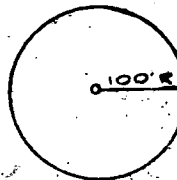
REMARKS All holes different from plat location.

TYPE OF SOIL 0-5 Rd-br si cl lm, 5-12 Rd-br sa si lm

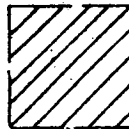
TESTED BY JE Nadeau ALSO PRESENT Rocky, Jack F



PROPOSED HOUSE



PROPOSED WELL & SETBACK



PROPOSED SEPTIC AREA 10,000 #

PLAN

SCALE: 1" = 100'

Approved plat. Road alignment and septic areas include several changes made after final record plat was signed. Use for septic specifications.

APPROVED FOR PRIVATE WATER & SEWAGE DISPOSAL SYSTEMS - HOWARD COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

COUNTY HEALTH OFFICE

DATE

PRELIMINARY PLAN
SECTION ONE

ASHLEIGH GREENE SUBDIVISION

5th ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
TAX MAP 41 PARCEL 70 139

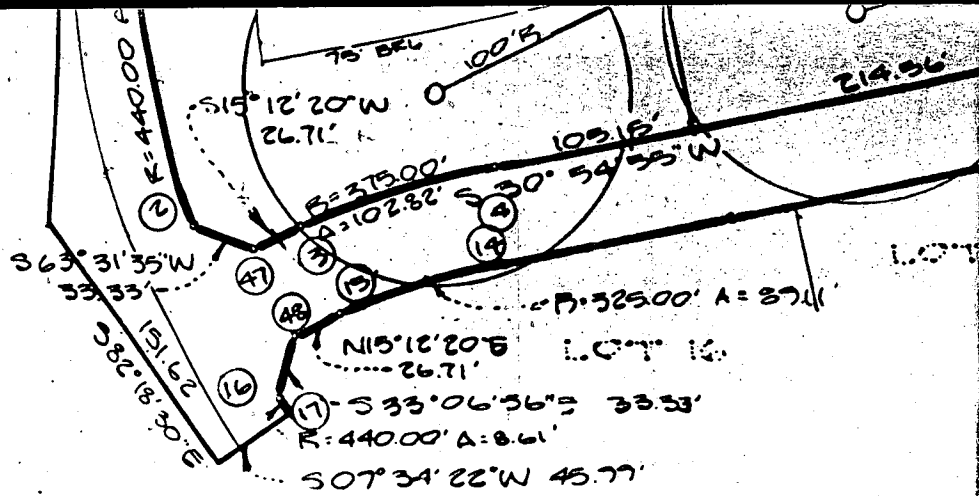
JENadeau 3-21-89

Ashleigh
Greene
See 1

S-88-57
P-88-54
WP-88-126

DATE
Feb, 1988
DRAWN
S.M.B.
CHECKED
M.L.S.
SCALE
1" = 100'

6	2	
7	3	
8	3	
9	2	
10	2	
11	2	
12	2	
13	3	
14	2	
15	4	
16	3	
17	3	
18	2	
19	3	
20	3	
21	3	
22	3	
23 (old 34)	3	
24 (old 35)	3	
25 (old 36)	4	
26 (old 37)	3	
27 (old 38)	2	



NOTE: FOR FLAG OR PIPE STEM LOTS, REFUSE CO
 SNOW REMOVAL AND ROAD MAINTENANCE TO BE
 AT THE JUNCTION OF FLAG OR PIPE STEM AND T
 R/W AND NOT ONTO THE FLAG OR PIPE STEM O

APPROVED: For private water and private
 sewerage Howard County Health Department.

Joyce M. Boyd 12-16-88
 HOWARD COUNTY HEALTH OFFICER DATE

APPROVED: Howard County Office of Planning
 and Zoning.

Joyce R. Riddle 12/28/88
 A/DIRECTOR DATE LKS

APPROVED: For storm drainage systems
 & public roads. Howard County Department of Public
 Works.

James J. [Signature] 12/23/88
 DIRECTOR DATE

OWNERS
 AND IN CON
 ABUSE THE
 AND ASSIGN
 AND SERVICE
 (2) THE RIGH
 AND OPEN
 AND OPTION
 ROADS AND
 QUIRE DEC
 REPAIR AND
 OR OVER FENCE
 WITNESS
Marilyn
 MARILYN

E
 CORRECT,
 X THE

RECORDED AMONG THE LAND RECORDS OF
 HOWARD COUNTY, MARYLAND ON 12-30-88
 AS PLAT NUMBER 8343

Sheet 2 of 4

SECTION 1
 LOTS 1 TRU 27

ASHLEIGH GREENE SUBDIVISION

5th ELECTION DISTRICT

HOWARD COUNTY, MARYLAND

SCALE: 1"=100' ZONE: R APRIL, 1988
 TAX MAP: 41

OWNER

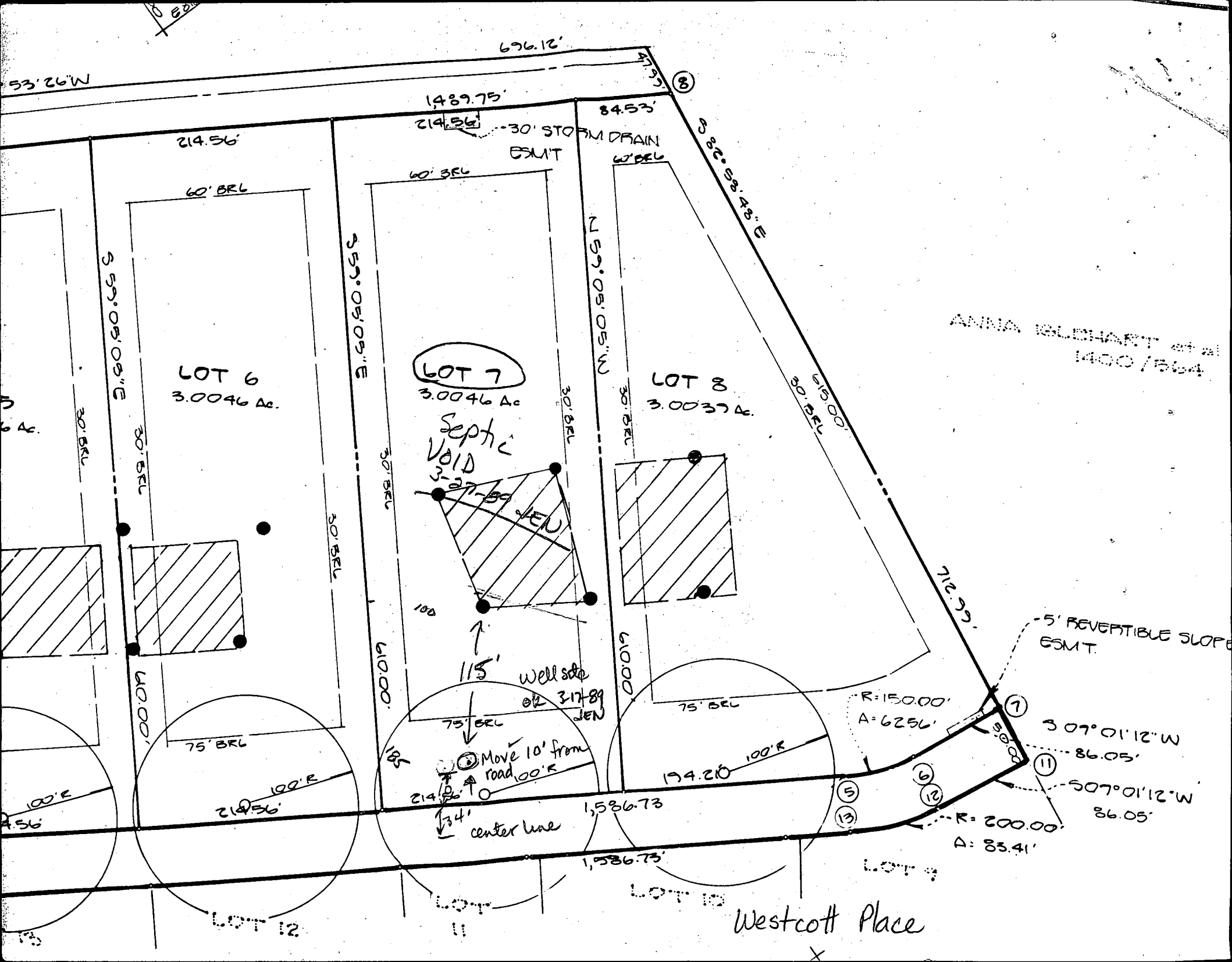
WINCHESTER HOMES
 6301 IVY LANE S. 174
 GREENBELT, MD. 20770
 (301) 222-1117



DEVELOPMENT
 CONSULTANTS
 GROUP, INC.

17904 GEORGIA AVENUE
 OLNEY, MARYLAND 20832
 (301) 924-4570

F-88-248



B 1	2581	SEQUENCE NO. (DP USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER H0-88-0162 fill in this form completely
Date Received (APA) 082488 OWNER INFORMATION WILM HESTER HOMES INC 6301 IVY LANE GREENBELT MD 20770 LOCATION OF WELL HOWARD COUNTY ASHLEIGH GREENE SUBDIVISION SECTION 44 LOT 7 HIGHLAND NEAREST TOWN MILES FROM TOWN (enter 0 if in town) 2 MI				
DRILLER INFORMATION George F. Easterday L. Franklin Easterday, Inc. 9265 Brown Church Rd., Mt. Airy, Md. 21771 8/23/88 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 5 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500				
USE FOR WATER (CIRCLE APPROPRIATE BOX) ☒ HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) ☐ FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) ☐ INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) ☐ PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) ☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)				
APPROXIMATE DEPTH OF WELL 256 FEET APPROXIMATE DIAMETER OF WELL 6 INCH				
METHOD OF DRILLING (circle one) ☒ BORED (or Augered) ☐ JETTED ☐ Jetted & DRIVEN ☒ AIR-ROTARY ☐ AIR-PERCussion ☐ ROTARY (Hydraulic Rotary) ☐ CABLE ☐ REVERSE-ROTARY ☐ Drive-POINT other _____				
REPLACEMENT OR DEEPEND WELLS (CIRCLE APPROPRIATE BOX) ☒ THIS WELL WILL NOT REPLACE AN EXISTING WELL ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY ☐ THIS WELL WILL DEEPEEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEND (IF AVAILABLE) _____				
NOT TO BE FILLED IN BY DRILLER (OEP USE ONLY) APPROX. PERMIT NUMBER _____ FORCE ☒ WRITE INITIALS IN BOX PERMIT NO. H0-88-0162 SPECIAL CONDITIONS _____				
HEALTH DEPARTMENT APPROVAL HOWARD COUNTY NAME 40714 COUNTY NO. STATE SIGNATURE _____ DATE ISSUED 3/6/89 Charles E. Ryan CO SIGNATURE 3/6/89 EXP. DATE NORTH GRID 489000 EAST GRID 0819000 SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. WELL 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE 8189 4589 4-5-87 GROUT 10 BAGS 42' CASING COMPLETE 48' OPEN NOT OBS'D 15' CASING A.G. MR. VTAGOK 4/5/89 DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION N HIGHLAND HALL SHOP STRIPSON				

C1 0685

SEQUENCE NO.
(DENV USE ONLY)STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPETHIS REPORT MUST BE SUBMITTED WITHIN
45 DAYS AFTER WELL IS COMPLETED.COUNTY
NUMBER

A # 40714

PERMIT NO.

FROM "PERMIT TO DRILL WELL"

H0-88-0162

DATE Received

DATE WELL COMPLETED

Depth of Well

8 13

040389

22 400.0 26
(TO NEAREST FOOT)

28 29 30 31 32 33 34 35 36 37

OWNER

WINCHESTER HOMES INC.

STREET OR RFD

last name

WESCOTT PLACE

first name

TOWN

HIGHLAND

SUBDIVISION

ASHLEIGH GREENE SECTION 1

LOT

7

WELL LOG

Not required for driven wells

STATE THE KIND OF FORMATIONS
PENETRATED, THEIR COLOR, DEPTH,
THICKNESS AND IF WATER BEARINGDESCRIPTION (USE
additional sheets if needed)

FEET

FROM

TO

Check
if water
bearing

Topsoil 0 4
Shale 4 7
Sandy Green Clay 7 31
Grey Mica 38 62
Brown Mica 62 64
Grey Mica 64 400 ✓

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)yes no
Y N

TYPE OF GROUTING MATERIAL

CEMENT CM

BENTONITE CLAY BC

NO. OF BAGS 10 NO. OF POUNDS 1000

GALLONS OF WATER 50

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 40 ft.
(enter 0 if from surface)casing
types
insert
appropriate
code
below

CASING RECORD

ST CO
STEEL CONCRETE
PL OT
PLASTIC OTHERMAIN Casing Nominal diameter Total depth
TYPE top (main) casing of main casing
(nearest inch) (nearest foot)

ST 1 42

EACH
CASING

OTHER CASING (if used)

diameter depth (feet)
inch from toscreen type
or open hole
insert
appropriate
code
below

SCREEN RECORD

ST BR HO
STEEL BRASS OPEN
HOLE
PL OT
PLASTIC OTHER

C2

EACH
SCREEN

DEPTH (nearest ft.)

1 10 40 400

SLOT SIZE 1 2 3

DIAMETER OF SCREEN (NEAREST INCH)

from to

GRAVEL PACK

IF WELL DRILLED WAS
FLOWING WELL INSERT
F IN BOX 68

OEP USE ONLY

(NOT TO BE FILLED IN BY DRILLER)

T

(E.R.O.S.)

WQ

70

72

74 75 76

TELESCOPE
CASINGLOG
INDICATOR

OTHER DATA

C3

1 2

PUMPING TEST

HOURS PUMPED (nearest hour) 2

PUMPING RATE (gal.-per min. to nearest gal.) 9

METHOD USED TO
MEASURE PUMPING RATE Pump test

WATER LEVEL (distance from land surface)

BEFORE PUMPING 42

WHEN PUMPING 113

TYPE OF PUMP USED (for test)

A air P piston T turbine
C centrifugal R rotary O other
J jet S submersible

PUMP INSTALLED

DRILLER WILL INSTALL PUMP YES NO

IF DRILLER INSTALLS PUMP, THIS SECTION
MUST BE COMPLETED FOR ALL WELLS
EXCEPT HOME USE
TYPE OF PUMP INSTALLED
PLACE (A,C,J,P,R,S,T,O)
IN BOX - SEE ABOVE:CAPACITY:
GALLONS PER MINUTE (to nearest gallon) 31 35

PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH (nearest ft.) 43 47

CASING HEIGHT (circle appropriate box
and enter casing height)above } LAND SURFACE (nearest foot)
below }

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURE SUCH AS
BUILDING, SEPTIC TANKS, AND/OR
LANDMARKS AND INDICATE NOT LESS
THAN TWO DISTANCES
(MEASUREMENTS TO WELL)

CIRCLE APPROPRIATE LETTER

A A WELL WAS ABANDONED AND SEALED
WHEN THIS WELL WAS COMPLETED

E ELECTRIC LOG OBTAINED

P TEST WELL CONVERTED TO PRODUCTION
WELLI HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN
ACCORDANCE WITH COMAR 10.17.13 "WELL CONSTRUCTION"
AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE
ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION
PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST
OF MY KNOWLEDGE.

DRILLERS IDENT. NO. 40

DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)SITE SUPERVISOR (sign. of driller or journeyman
responsible for sitework if different from permittee)

COUNTY

VICINITY MAP

Scale: 1" = 2000'

SIMPSON ROAD

LOT 7
3.0046 AC.

BASEMENT DOES NOT
SEWER BY GRAVITY

DOES NOT
SEWER BY GRAVITY

DISTR. BOX
Ex. Grd. = 514.2
Inv. = 509.2

SEPTIC TANK
1500 GAL
Ex. Grd. = 514.5

OPT. DECK

142

85

25

23

3R

52

75' B.R.L.

85'

100'

214.56'

1,586.73'

082

LOT #7

214.56'

1,586.73'

082

LOT #7

214.56'

100'
DISTR. BOX
Ex. Grd. = 511.4
Inv. = 506.9

Inv. = 506.90

Inv. = 507.2

Inv. = 509.2

Inv. = 509.6

Inv. = 509.6

Inv. = 509.6

Inv. = 509.6

Inv. = 509.6

Inv. = 509.6

Inv. = 509.6

Inv. = 509.6

Inv. = 509.6

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Inv. = 509.6

Inv. = 509.6

Inv. = 509.6

Inv. = 509.6

Inv. = 509.6

Inv. = 509.6

Inv. = 509.6

RALEIGH
FF = 516.53
SR = 513.93
B = 506.42

SEPTIC TANK
1250 GAL
EX. GRD. = 511.6

OPT. SUN RM

56'

75' B.R.L.

85'

100'

214.56'

1,586.73'

082

LOT #7

214.56'

1,586.73'

082

LOT #7

214.56'

1,586.73'

082

LOT #7

214.56'

1,586.73'

082

BWDG. PERMIT, SIGNED
AND RETURNED

6-10-89

BP25460

88

A 40 114

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) 313-3800	HOWARD COUNTY PERMIT APPLICATION	PERMIT NUMBER <u>B00122483</u>
---	---	--

Building Address <u>6964 Westcott Place</u> <u>Clarksville</u> <u>Howard County, MD 21037</u>	Property Owner's Name <u>MR & MRS Charles Collins</u>
Suite/Apt. #: _____ SDP/WP/Petition #: _____	Address <u>6964 Westcott Place</u>
Census Tract <u>6051.02</u> Subdivision <u>Ashley Green</u>	City <u>Clarksville</u> State <u>MD</u> Zip Code <u>21037</u>
Section <u>1</u> Area _____ Lot <u>7</u>	Home Phone <u>410 531 6081</u> Work Phone _____
Tax Map <u>41</u> Parcel <u>458</u> Grid <u>1</u>	Applicant's Name & Mailing Address, (if other than stated hereon): _____
Zoning <u>RR</u> Map Coordinates <u>146-2</u> Lot size _____	Phone _____ Fax _____

Existing Use <u>Single Family</u>	Contractor Company <u>BABCO CONTRACTORS MD, INC</u>
Proposed Use <u>Sun Room</u>	Contact Person <u>Bill A Burns - President</u>
Estimated Construction Cost \$ <u>28,000</u>	Address <u>1118 Willow-Back Drive</u>
Description of Work <u>Construct 23' x 30' Sun Room</u>	City <u>Maryland</u> State <u>MD</u> Zip Code <u>21122</u>
<u>ADDITIONAL 4' x 6' x 10' w/ POWDER ROOM</u>	License No. <u>40666</u> Phone _____ Fax <u>410 437-8010</u>

Occupant or Tenant <u>Same as property owner</u>	Engineer or Architect Company <u>BABCO CONTRACTORS</u>
Contact Name _____	Contact Person <u>Bill Burns</u>
Address _____	Address <u>Same as above</u>
City _____ State _____ Zip Code _____	City _____ State _____ Zip Code _____
Phone _____ Fax _____	Phone <u>410 437-8010</u> Fax <u>410 437-8010</u>

BUILDING DESCRIPTION - COMMERCIAL		BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics	Utilities	Building Characteristics	Utilities
Height: _____	Water Supply: _____ Public _____ Private _____	SF Dwelling ☒ SF Townhouse ☐	Water Supply: _____ Public _____ Private ☒
No. of stories: <u>2</u>	Sewage Disposal: _____ Public _____ Private _____	Depth Width 1st floor: <u>28.3</u> <u>59'</u>	Sewage Disposal: _____ Public _____ Private ☒
Gross area, sq. ft. per floor: _____	Electric Yes ☐ No ☐ Gas Yes ☐ No ☐	2nd floor: <u>28</u> <u>39'</u>	Electric Yes ☒ No ☐ Gas Yes ☐ No ☒
Use group: <u>Single</u>	Heating System: _____ Electric ☐ Oil ☐ Natural Gas ☐ Propane Gas ☐	Basement: <u>27</u> <u>38'</u>	Heating System: _____ Electric ☒ Oil ☐ Natural Gas ☐ Propane Gas ☐
Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ ☒ Wood Frame _____	Sprinkler system: <u>N/A</u> ☐ Full _____ Partial _____ Other Suppression _____ # of Heads _____	Finished Basement ☐ Unfinished Basement ☐ Crawl space ☐ Slab on Grade ☐ No. of Bedrooms <u>3</u>	Sprinkler system: <u>N/A</u> ☐ NFPA #13D _____ NFPA #13R _____ Other: _____
State Certified Modular _____		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: _____	
		State Certified Modular _____ Manufactured Home _____	

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.

Applicant's Signature <u>[Signature]</u>	Print Name <u>Charles Collins</u>
Title/Company _____	Date <u>2/16/00</u>

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
**** PLEASE WRITE NEATLY AND LEGIBLY. ****
- FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#
Land Development DPZ			Front: <u>75'</u>	Filing fee \$ <u>205.7</u>
State Highways			Rear: <u>60'</u>	Permit fee \$ _____
Building Official			Side: <u>30'</u>	Excise tax \$ _____
Dev. Engineering DPZ			Side St: _____	Sub-total paid \$ <u>55.6</u>
Health			All minimum setbacks met? YES ☐ NO ☐	Add'l permit fee \$ _____
Fire Protection			Is Entrance Permit required? YES ☐ NO ☐	TOTAL FEES \$ _____
Is Sediment Control approval required prior to issuance? YES ☐ NO ☐			Historic District? YES ☐ NO ☐	Balance due \$ _____
CONTINGENCY CONSTRUCTION START: ☐			Lot Coverage for NewTown Zone _____	Check # <u>4262</u>
ONE STOP SHOP: ☐			SDP/Red-line approval date _____	Validation # <u>5117</u>
			Accepted by <u>[Signature]</u>	

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

1512-W

Ronald J. Smith #6059