1-31-97
2:30 C.O.
2/6/97
11:00

04-355032

PERMIT

P 5755 LB

SEWAGE DISPOSAL SYSTEM

A 41969

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT 4th

DATE 11/14/96

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
~~XXXX9933X~~ 313-2640

INDEXED

DATE SYSTEM APPROVED 2-7-97

INSPECTOR KM

South Carroll Backhoe, Inc. IS PERMITTED TO INSTALL X ALTER _____

ADDRESS 4410 Salem Bottom Road, Westminster, Maryland 21157 PHONE 875-4197

SUBDIVISION Choi Property LOT 6 ROAD 3302 Sang Road

PROPERTY OWNER Jacobsen Homes, LLC

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 180

Recommended tank location is outside of driveway. MANHOLE COVER REQUIRED TO GRADE

TRENCHES - Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 4 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Place distribution box 210 feet from front lot line (203.57') and 115 feet from left (556.16') lot line as viewed from Danmark Drive. Install trenches on contour in both directions.

NOTES - KEEP SEPTIC SYSTEM AT LEAST 100 FEET FROM WELL. No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. GS 12/2/96

PLANS APROVED BY Ronald Pinkley/Glen Savage DATE 10/03/96

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, 90° ELBOWS NOT ACCEPTABLE.

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

~~PLAN PERMIT SIGNED~~ AND RETURNED 3-21-02
B00135030
DECK W/STEPS

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

PERMIT VOID AFTER TWO YEARS

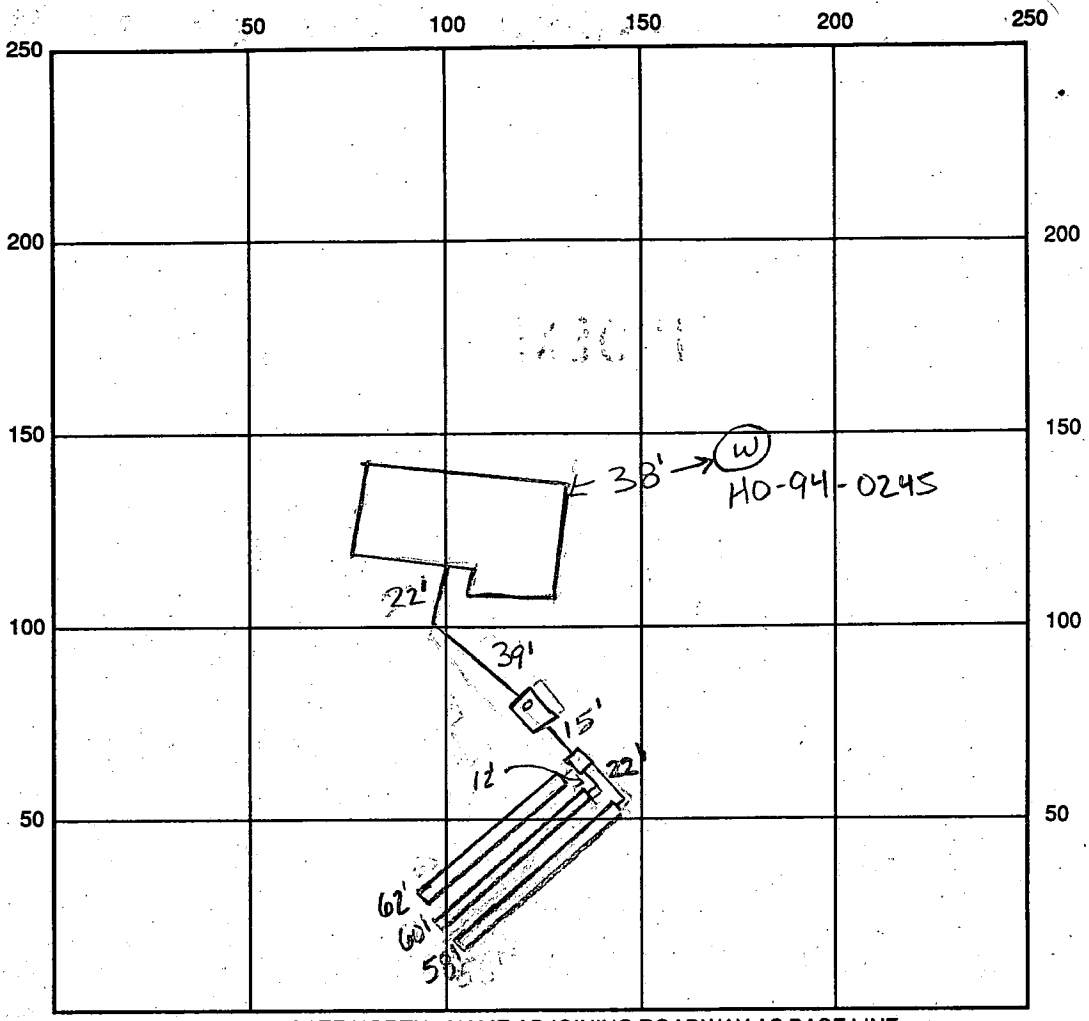
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON. CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**
*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

HD-260(6-90)

A 41969



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE Denmark Drive

SEPTIC TANK LEVEL OK, 1250 gallons CLEANOUTS 1 on tank

DISTRIBUTION BOX LEVEL ok, baffle in

DRAIN FIELD/TITLE DEPTH 8 FT. TRENCH WIDTH 2 FT. INLET DEPTH 4 FT.

EFFECTIVE GRAVEL DEPTH 4 FT. TOTAL LENGTH 1×62 1×58 1×60 FT. → 180

NUMBER OF TRENCHES 3 ONE SIDEWALL/~~BOTTOM AREA~~ 720 SQ. FT.

DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA — SQ. FT.

REMARKS: 2-6-97 tank ok, driveway to be 6' inside of tank (towards house) as stated by builder and repeated by Chris from South Carroll house connection made ok to cover up to tank KM
2-7-97 ok to cover first trench (am) KM
2-7-97 ok to finish and to cover all work (pm) KM/RP

DATE SYSTEM APPROVED 2-7-97 INSPECTOR Kim Maisto

APPLICATION

PERCOLATION TESTING

A 41969

P

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

DISTRICT 4TH

DATE March 6, 1988

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 Sang Ho Company, Inc.

ADDRESS 8106 Cooper Street, Alexandria, Va. 22309 PHONE (703) 239-7541

PROSPECTIVE BUYER Unknown

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Choi Property LOT NO. 6

ROAD AND DESCRIPTION North side of Burntswood Rd., 1890± East of Hobbs Road.

TAX MAP 14 PARCEL # 106

SIZE OF LOT 3.00 Acre Minimum TYPE BLDG S.F.O.
(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. Dennis M. Ryals
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

HD-216

THIS IS NOT A PERMIT

Lot 6

A41969

SOIL PROFILE (1) (2) (3)

0

BROWN CLAY

4

LIGHT BROWN SAND LOAM

12½

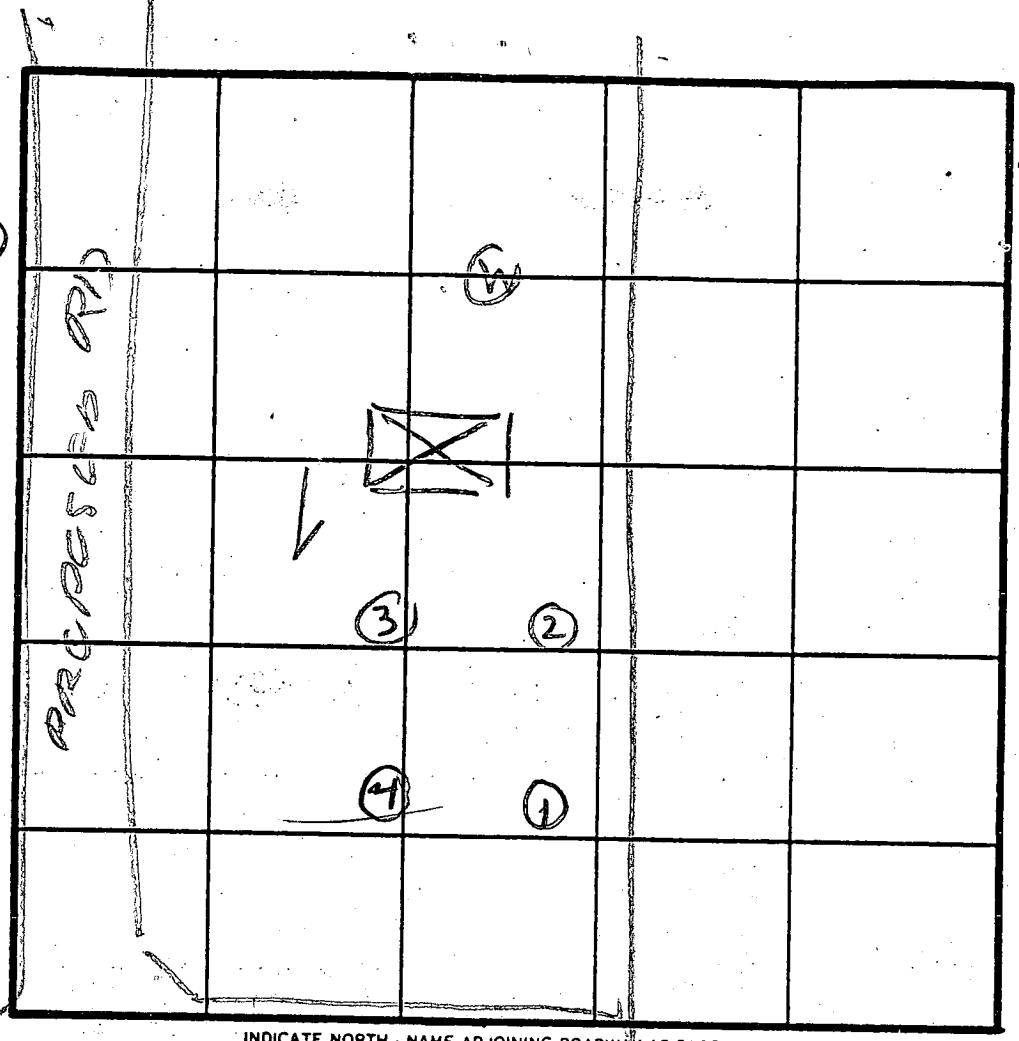
(3)

DARK BROWN CLAY

4

PINK BROWN SAND LOAM

14



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DANMARK RD

X 6 MIN

180 ft/BR

INLET 4'

BOTTOM 8'

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
8/30/66	1S	4.5	347	352	352	358	6
	1V	12.5	OK				
	2S	4.5	350	401	401	404	3
	2D	7.5	358	400	400	402	2
	2V	12.5	OK				
	3V	12	OK				
	4S	5	402	408	408	417	9
	4V	12	OK				

REMARKS Holes Dug Per Latest Surveyor Plat

TYPE OF SOIL

TESTED BY B. HODGES ALSO PRESENT WILLY & SKIP OF F20

2/19/97
a.m. WPI

2/12/97
WPI ok to cover well line
needs 2 piece water tight cap
FM/DKS

FM 410 313 2640

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
8836-H Elliott Mills Drive
Ellicott City, MD 21043
461-9633
410-313-2640

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

Receipt # _____
Date _____

New Installation ✓
Replacement ____

Name of Installer Ben Lewis Inc
Telephone _____

License Number 11202
Certified Well Pump Installer ____ Well Driller ____ Registered Plumber ✓

Name of Property Owner Jacobsen Const Co
Telephone _____
Subdivision Budgetport Lot # 6 Well Tag # _____
Site Address 3302 SANG Rd

Pump
1. Type
   a. Deep well jet ____
   b. Shallow well jet ____
   c. Submersible ✓
2. Make Grundfos 5SQE5-42
3. Model # _____
4. Capacity _____ GPM
5. Pump exceeds well capacity Yes ____ No ✓
6. If Yes, is low pressure cutoff switch installed? Yes ____ No ____
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors ____ Cable guards ✓ Other ____

Motor
1. Horsepower 1/3
2. RPM _____
3. Voltage _____
   a. 110 ____
   b. 230 ✓

Pitless Adapter
1. Make _____
2. Model # _____
3. Depth 42"

Tank
1. Capacity 80
2. Pressure relief valve? Yes

Piping
1. Type Blk 160 PE
2. Size 1"
3. NSF and/or BOCA Code approved Yes
4. Depth of supply line _____

Well Data
1. Depth 242 ft.
2. Yield ____ GPM
3. Static water level 30 ft.
4. Will water supply be disinfected by installer? Yes

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

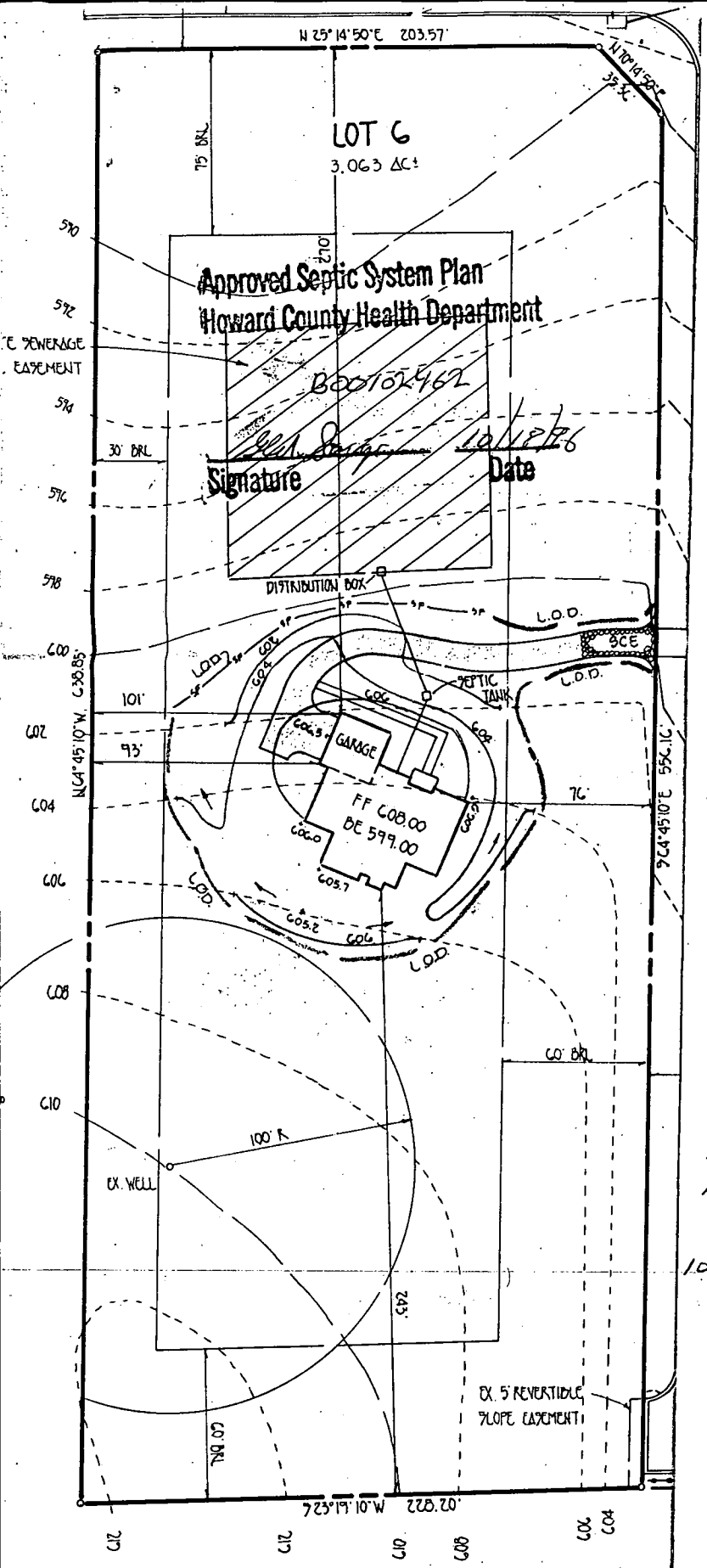
All information given above is true to the best of my knowledge.

Signature of Applicant: _____

Date: 2/11/97

Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.

HO-816



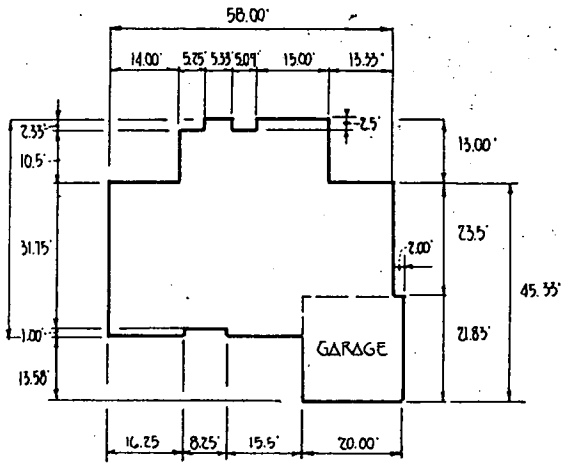
1" = 40'

VICINITY MAP

SCALE: 1"=2000'

GENERAL NOTES

1. SEPTIC EASEMENT SUBJECT TO HOWARD COUNTY HEALTH DEPARTMENT No.
2. PROPOSED 1500 GALLON SEPTIC TANK.
3. A. FIRST FLOOR ELEVATION: 608.00
   B. BASEMENT ELEVATION: 599.00
   C. INVERT OF SEPTIC SYSTEM AT HOUSE: 597.9
   D. INVERT IN AT SEPTIC TANK: 597.3
   E. INVERT OUT AT SEPTIC TANK: 597.0
   F. PROPOSED GRADE OVER SEPTIC TANK: 603.00
   G. INVERT AT DISTRIBUTION BOX: 596.0
   H. EXISTING GROUND OVER DISTRIBUTION BOX: 599.0
4. LENGTH OF TRENCH TO BE DETERMINED AT TIME OF SEPTIC PERMIT ISSUANCE.
5. CONTRACTOR / BUILDER TO VERIFY ELEVATIONS IN FIELD BEFORE BEGINNING ANY CONSTRUCTION.



TAYLOR RESIDENCE

NOT TO SCALE

10/18/96 THIS REVISED PLAN OK FOR SEPTIC TANK RELOCATION, WELL LOCATION IS STILL IN DOUBT - SEE PREVIOUS SITE PLAN NOTES. LET, MSG. FOR JACOBSON, HOMES,

10/18/96 GS

OK - WELL SHOWN ON EAX OF SAME DATE,

GS

PLAN TO ACCOMPANY APPLICATION FOR BUILDING PERMIT

CHOI PROPERTY

LOT 6

TAX MAP 14 PARCEL 106

4th ELECTION DIST. HOWARD COUNTY, MARYLAND

~~SCALE 1" = 50'~~ DATE: SEPTEMBER 24 1996.

SECNOT2.DWG

C 1 5909 — SEQUENCE NO. (DENV USE ONLY)

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPE

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

COUNTY NUMBER A 41969

ST/CO USE ONLY
DATE Received

DATE WELL COMPLETED 12/02/94

Depth of Well 265 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-0245

OWNER Jacobsen (last name) Carl (first name)

STREET OR RFD Danmark Dr TOWN Glenwood

SUBDIVISION CHOI Property SECTION LOT 6

WELL LOG
Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (Use additional sheets if needed)	FEET FROM	FEET TO	Check if water bearing
SAND	0	49	
GRAY MICA ROCK	49	265	V

IN HARD ROCK AREAS, IDENTIFY SPECIFICALLY WHERE SATURATED FRACTURES WERE OBSERVED.

WELL HYDROFRACTURED: yes [Y] no (N)

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 WELL

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "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. 24

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) Joseph L. Mayne

SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

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

TYPE OF GROUTING MATERIAL

CEMENT [CM] BENTONITE CLAY [BC]

NO. OF BAGS 13 NO. OF POUNDS 1222

GALLONS OF WATER 78

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 33 ft.

(enter 0 if from surface)

CASING RECORD
casing types insert appropriate code below

[ST] STEEL [CO] CONCRETE [PL] PLASTIC [OT] OTHER

MAIN CASING TYPE	Nominal diameter top (main) casing (nearest inch)	Total depth of main casing (nearest foot)
ST	6	53

EACH CASING — OTHER CASING (if used)

diameter inch	depth (feet) from	to

SCREEN RECORD
screen type or open hole — insert appropriate code below

[ST] STEEL [BR] BRASS BRONZE [HO] OPEN HOLE [PL] PLASTIC [OT] OTHER

C 2

EACH SCREEN	DEPTH (nearest ft.)	
1	HO	51 to 265
2		
3		

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 ____

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)

T ____ (E.R.O.S.) ____ W Q ____

TELESCOPE CASING — LOG INDICATOR — OTHER DATA

C 3

PUMPING TEST
HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min. to nearest gal.) 6

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 49

WHEN PUMPING 156

TYPE OF PUMP USED (for test)

[A] air [P] piston [T] turbine

[C] centrifugal [R] rotary [O] other (describe below)

[J] jet (S) submersible

PUMP INSTALLED
DRILLER WILL INSTALL PUMP (CIRCLE) (YES or NO) 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) ____

PUMP HORSE POWER ____

PUMP COLUMN LENGTH (nearest ft.) ____

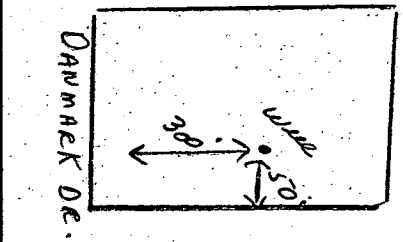
CASING HEIGHT (circle appropriate box and enter casing height)

(+) above / (–) below LAND SURFACE

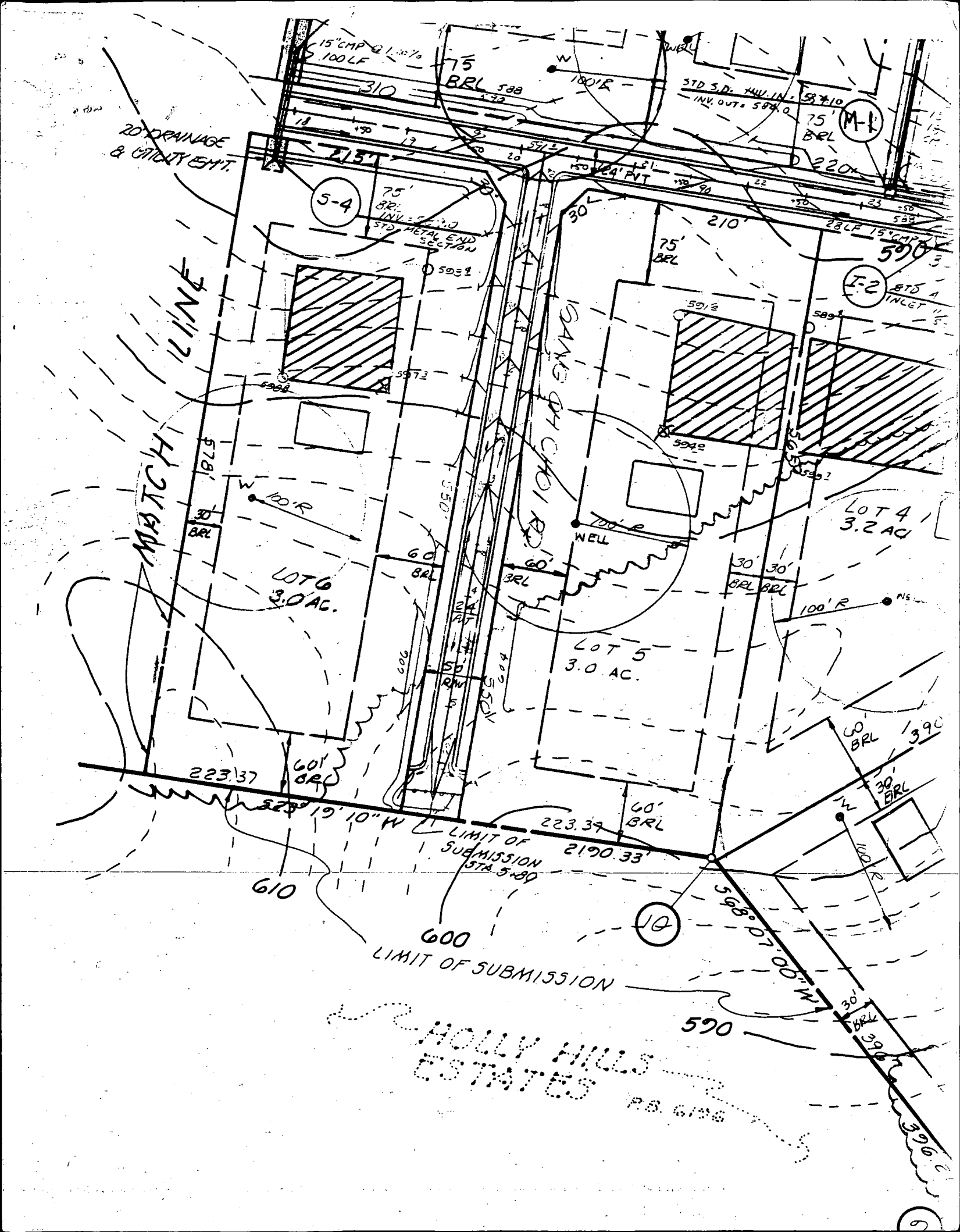
2 (nearest foot)

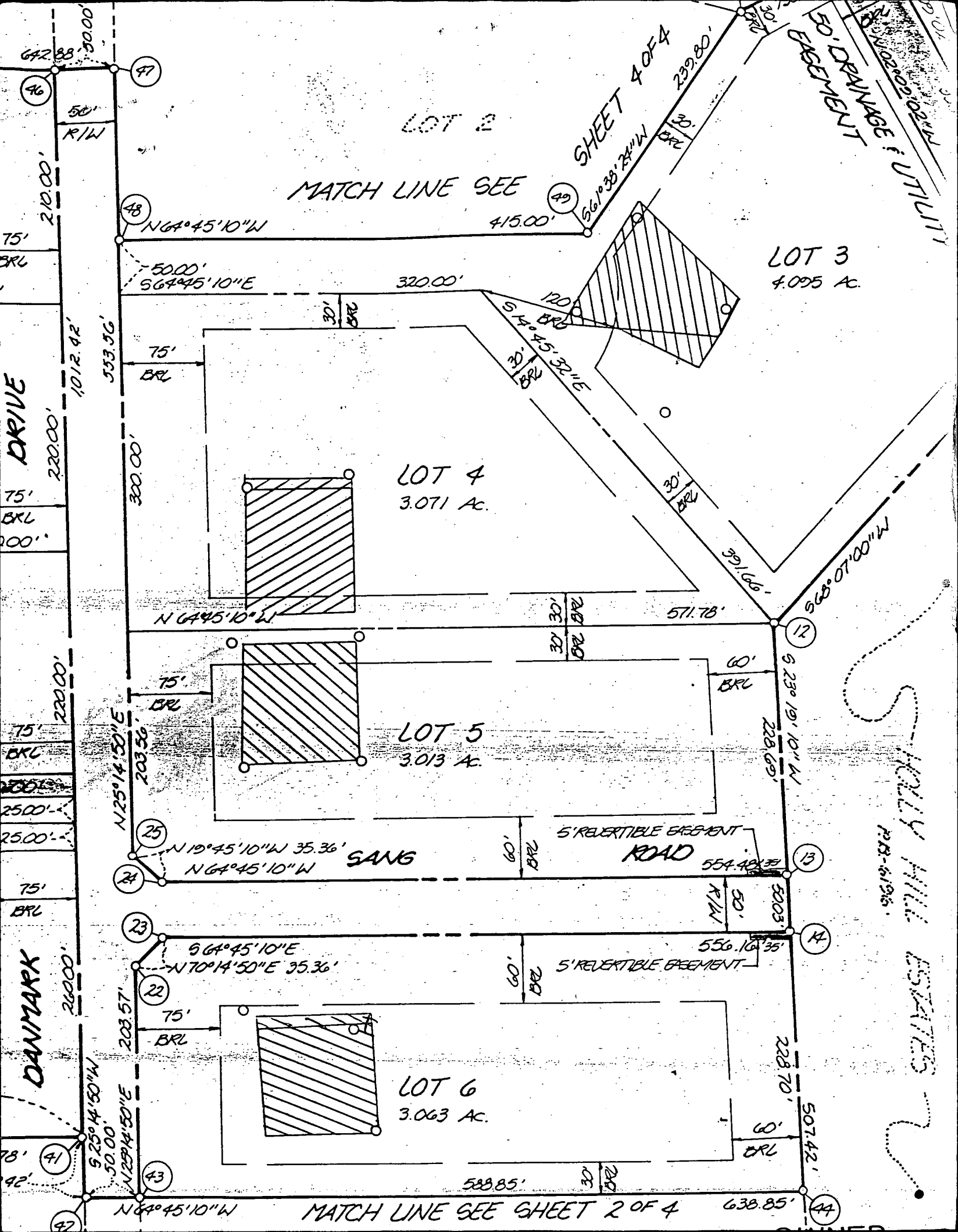
LOCATION OF WELL ON LOT
SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)

N



COUNTY


15" CMP @ 1.00%
100 LF
75 BRL
310
100'R
STD S.D. MH. IN. 588.10
INV. OUT = 588.0
75' BRL
M-1
20' DRAINAGE & UTILITY ESM'T.
215'
220'
S-4
75' BRL
INV. = 590.0
STD METAL END SECTION
30'
210'
75' BRL
28 LF 15" CMP
590
I-2
STD A INLET
MATCH LINE
SANG CHOI RD.
WELL
100'R
30' BRL
LOT 6
3.0 AC.
60' BRL
LOT 4
3.2 AC
LOT 5
3.0 AC.
30' BRL
30' BRL
100'R
50' R/W
60' BRL
60' BRL
223.37
60' BRL
S 88° 19' 10" W
223.34
2190.33
LIMIT OF SUBMISSION STA 5+80
610
600
LIMIT OF SUBMISSION
10
S 88° 07' 00" W
590
30' BRL
396
HOLLY HILLS ESTATES
P.B. 6/58


SHEET 4 OF 4
LOT 2
MATCH LINE SEE
50' DRAINAGE & UTILITY EASEMENT
N02°02'02"W
239.80'
S61°38'34"W
415.00'
N64°45'10"W
50.00'
S64°45'10"E
320.00'
LOT 3
4.095 Ac.
120
S14°45'32"E
391.66'
S68°07'00"W
LOT 4
3.071 Ac.
571.78'
LOT 5
3.013 Ac.
S23°19'10"W
228.69'
N25°14'50"E
203.36'
N19°45'10"W 35.36'
N64°45'10"W
5' REVERTIBLE EASEMENT
ROAD
554.48'
S03°
556.16'
S64°45'10"E
N70°14'50"E 35.36'
LOT 6
3.063 Ac.
228.70'
507.42'
S25°14'50"W
50.00'
N25°14'50"E
588.85'
N64°45'10"W
MATCH LINE SEE SHEET 2 OF 4
638.85'
642.88'
50.00'
50' R/W
210.00'
1012.42'
553.56'
300.00'
220.00'
DRIVE
DANMARK
SANG
75' BRL
60' BRL
30' BRL
50' R/W

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 B00137030

Building Address 3302 SANG ROAD
GLENWOOD MD 21738

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

Census Tract 6040 Subdivision GLEN. PARK

Section _____ Area _____ Lot 6

Tax Map 17 Parcel 106 Grid 21

Zoning RR-DEO Map Coordinates 9E6 Lot size

Property Owner's Name RON RODRIGUEZ

Address 3302 SANG ROAD

City GLENWOOD State MD Zip Code 21738

Home Phone (410)489-5054 Work Phone _____

Applicant's Name & Mailing Address, (if other than stated hereon):
STEVE BOWERS
11 HAYMARKET CRT
BALTIMORE MD 21236

Phone (410)529-6138 Fax _____

Existing Use SFD

Proposed Use SFD W/ DECK

Estimated Construction Cost $ 10000.-

Description of Work 20' X 16' OPEN WOOD DECK W/ STEPS TO GRADE

Contractor Company LONG FENCE CO

Contact Person STEVE BOWERS

Address 1114 RT 3 NORTH

City CROFTON State MD Zip Code 21114

License No. 7615.01

Phone (410) 793-0600 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 ☐
____ Full
____ Partial
____ Other Suppression
____ # of Heads

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 Structure: _____
Dimensions: _____
Footings: _____
Roof: _____

_____ 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.

R. Steven Bowers
Applicant's Signature

AGENT
Title/Company

R. STEVEN BOWERS
Print Name

3/21/2002
Date

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

- FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official	3/21/02	
Dev. Engineering, DPZ		
Health	3/21/02	Mark Kiffle
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#: 2-2017

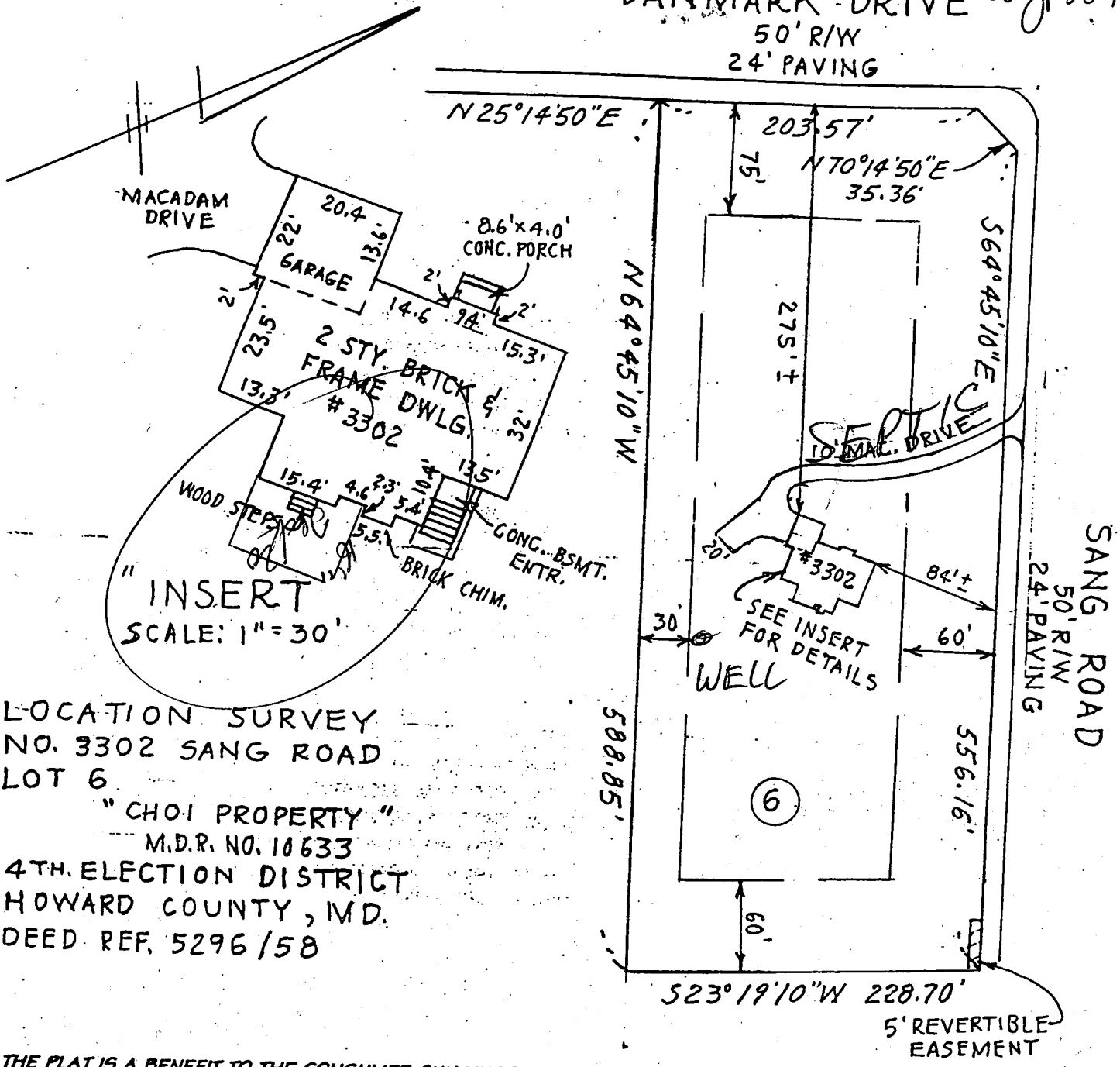
Filing fee	$
Permit fee	$ 50
Excise tax	$
Add'l per fee	$
TOTAL FEES	$ 50
Sub-total paid	$
Balance due	$
Check #	6141
Validation #	

Accepted by

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

T:\forms\PERMIT.FRM Rev. 5/17/00

COMMUNITY PANEL NO. 240044 0014 B
ZONE "C"
THIS PROPERTY IS NOT LOCATED IN A FLOOD HAZARD ZONE



LOCATION SURVEY
NO. 3302 SANG ROAD
LOT 6
"CHOI PROPERTY"
M.D.R. NO. 10633
4TH. ELECTION DISTRICT
HOWARD COUNTY, MD.
DEED REF. 5296/58

THE PLAT IS A BENEFIT TO THE CONSUMER ONLY INSOFAR AS IT IS REQUIRED BY A LENDER OR A TITLE INSURANCE COMPANY OR ITS AGENT IN CONNECTION WITH CONTEMPLATED TRANSFER, FINANCING OR REFINANCING. THE PLAT IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATION OF FENCES, GARAGES, BUILDINGS OR OTHER EXISTING OR FUTURE IMPROVEMENTS. THE PLAT DOES NOT PROVIDE FOR ACCURATE IDENTIFICATION OF PROPERTY BOUNDARY LINES, SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING OR REFINANCING. I HEREBY CERTIFY THAT THE LOT SHOWN HEREBY HAS BEEN SURVEYED FOR THE PURPOSE OF LOCATING ALL IMPROVEMENTS ONLY.

STATE OF MARYLAND
J. FILGHMAN DOWNEY JR.
No. 114
REGISTERED
PROPERTY LINE SURVEYOR

#01-2155

DRAWN BY	SURVEYED BY	CHECKED BY	SCALE	DATE
G.O.S.	L.B.	V.J.M.	1"=100'	8-29-2001

SITE RITE SURVEYING, INC
200 E. JOPPA ROAD
SHELL BUILDING, ROOM 1C
TOWSON, MD 21286
(410)828-9060