

LAYOUT 3/21/05 INSP 4 \_\_\_\_\_  
INSP 2 3/22/05 INSP 5 \_\_\_\_\_  
INSP 3 \_\_\_\_\_ INSP 6 \_\_\_\_\_

ISSUE DATE: 3/10/2005

P 522024

APPROVAL DATE: 3/23/05

A 43077

**PERMIT  
INDEXED**

**ON-SITE SEWAGE DISPOSAL SYSTEM  
HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
3525-H ELLICOTT MILLS DRIVE, ELLICOTT CITY, MD 21043  
05-414660**

Hatfield's Equipment IS PERMITTED TO INSTALL ☒ ALTER ☐

ADDRESS: 13785 Burntwoods Road, Glenelg PHONE NUMBER: 410-531-6773

SUBDIVISION: Brierly 6

ADDRESS: 13831 Russell Zepp Drive PROPERTY OWNER: Sal & Patricia Gorgone

SEPTIC TANK CAPACITY (GALLONS): 1500 ~~1250~~ OUTLET BAFFLE FILTER REQUIRED ☐

PUMP CHAMBER CAPACITY (GALLONS): N/A COMPARTMENTED TANK REQUIRED ☐

NUMBER OF BEDROOMS: 4 2/3/05 5 bedrooms

SQUARE FEET PER BEDROOM: 240

LINEAR FEET OF TRENCH REQUIRED: 192 ~~175~~ HOUSE SERVED BY PUBLIC WATER ☐

TRENCHES:	Trench to be 2.0 feet wide. Inlet 4.0 feet below original grade. Bottom maximum depth 8.0 feet below original grade. Effective area begins at 4.0 feet below original grade. 4.0 feet of stone below distribution pipe.
LOCATION:	Place the distribution box in the highest elevation of the approved SDA in the center, as shown on the approved building permit plan. Run 3-60' trenches on contour.
NOTES:	No gravity basement service proposed. Sanitarian to verify clay % in tx area. Call inspections in PRIOR to #2 Stone placement.

PLANS APPROVED: Kacie Noonan DATE: 4/15/04

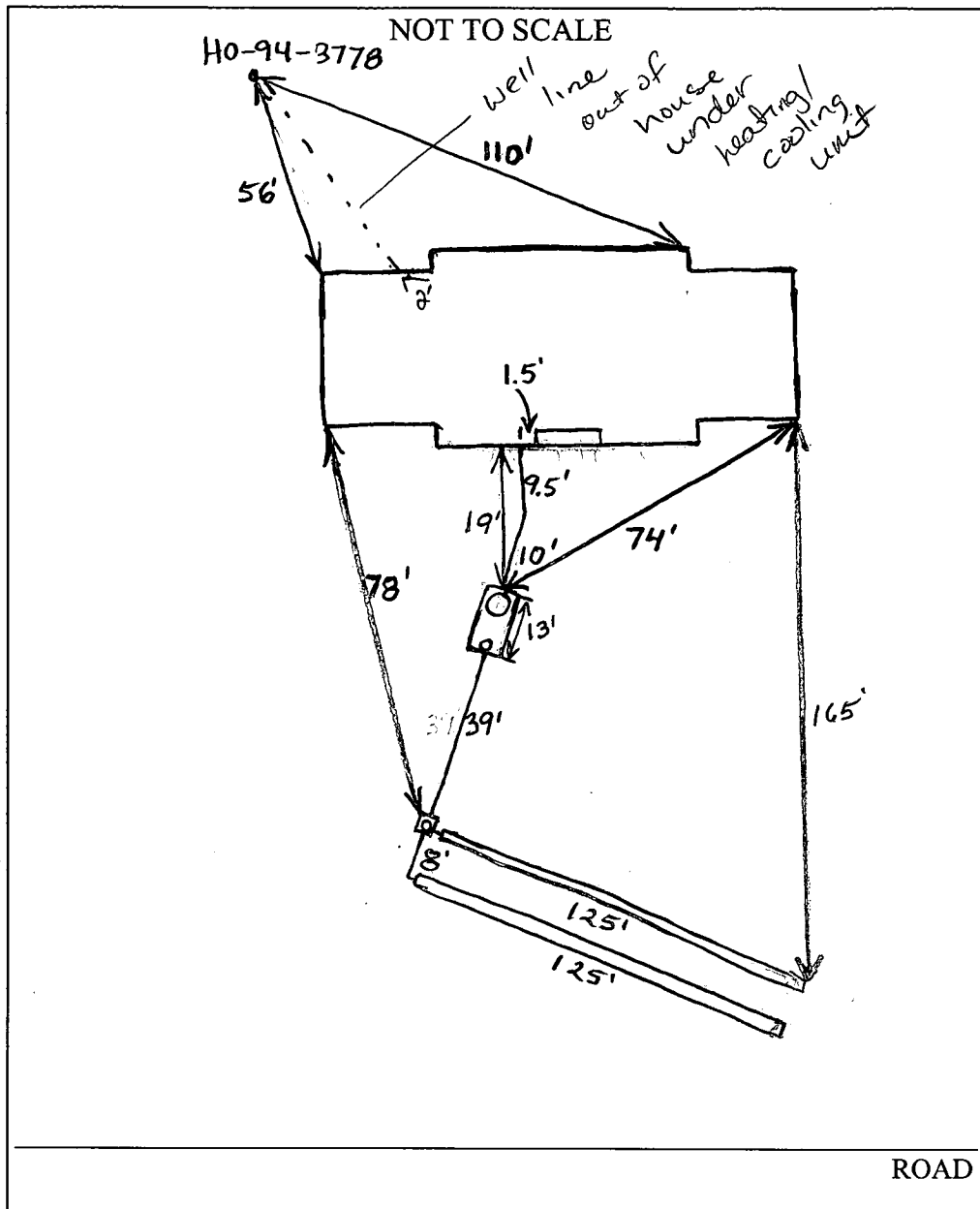
NOTES: PERMIT VOID AFTER 2 YEARS  
CONTRACTOR IS RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS  
WATERTIGHT SEPTIC TANKS REQUIRED  
ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL UNLESS SPECIFICALLY AUTHORIZED  
MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS UNLESS SPECIFICALLY AUTHORIZED  
CONTRACTOR RESPONSIBLE FOR COMPLIANCE WITH APPLICABLE REGULATIONS, GUIDELINES AND THE TERMS OF THIS PERMIT

**NEITHER THE HOWARD COUNTY COUNCIL OR THE HEALTH DEPARTMENT IS  
RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM  
PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT  
CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM  
DO NOT LEAVE ANY REQUEST FOR INSPECTION ON VOICEMAIL**

**BUILDING PERMIT SIGNED  
AND RETURNED**

4/14/04 B00146762 DETACHED GARAGE

A43077



**TRENCH/DRAINFIELD DATA**

WIDTH	INLET	BOTTOM
3'	4'-4.5'	6'

NUMBER OF TRENCHES 2

TOTAL LENGTH 250'

ABSORPTION AREA 750+ Sidewall

DISTRIBUTION BOX LEVEL Levelers

DISTRIBUTION BOX BAFFLE Yes

DISTRIBUTION BOX PORT Yes

**SEPTIC TANK DATA**

SEPTIC TANK 1-LEVEL Yes

CAPACITY 2000 GAL

2-Comp. SEAM LOC Top

TANK LID DEPTH 2'-3.5'

BAFFLES Yes

BAFFLE FILTER No

MANHOLE LOC Front

6" PORT LOC Rear

WATERTIGHT TEST No

SEPTIC TANK 2 LEVEL N/A

CAPACITY \_\_\_\_\_ GAL

SEAM LOC \_\_\_\_\_

TANK LID DEPTH \_\_\_\_\_

BAFFLES \_\_\_\_\_

BAFFLE FILTER \_\_\_\_\_

MANHOLE LOC \_\_\_\_\_

6" PORT LOC \_\_\_\_\_

WATERTIGHT TEST \_\_\_\_\_

PRE-CONSTRUCTION 3/21/05 To install 2 - 125' trenches starting uphill of easement area. This will allow maximum repair area. Trenches no deeper than 6'. Soil very rocky (BB)

INSTALLATION 3/22/05 System installed. O.K. to cover. (BB)

FINAL INSPECTOR B. Baker

BUILDING PERMIT SIGNED  
DATE OF APPROVAL 3/28/05

**HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
WATER AND SEWERAGE PROGRAM  
TEL: (410)313-2640 FAX: (410)313-2648**

**Information Form for the Installation of the Well Pump, Pitless Adapter, and Supply Piping**

**NOTE:** The installer is responsible for requesting an inspection prior to 9 am on the day of the desired inspection. No work is to be covered until approved by the Health Department. All installations must comply with the National Standard Plumbing Code (NSPC, as amended locally) and COMAR 26.04.04 (MD Well Construction Regulations). Submission of a complete form is required prior to Use and Occupancy approval.

Company Name: NICK DiBATTISTA P.H. Inc. Telephone #: 301 309 1644  
Address: 1059 Tate Street  
Rock MD 20860

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer

License # and name of individual responsible for the field installation:

Name (Print): NICHOLAS DiBATTISTA License# MPL 24631

\*A licensed individual must perform the actual installation. Apprentices must be under the direct supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification.

Name of Property Owner: Sal + Patricia Gorgone Telephone #: 240 388 1388  
Subdivision: Brierly Lot #: 6 Well Tag #: HO-94-3778  
Site Address: 13891 Russell Zepp Dr.  
Clarksville MD 21029 94-3778

**Submersible Pump Data**

Make: Gould  
Model #: 5GS10412  
Pump Capacity: 5 GPM  
Well Yield: 5.5 GPM

**Pitless Adapter**

Make: Campbell  
Model #: PA 800  
Depth: 48" (36" min)  
NSF approved: yes

**Well Cap and Electric Conduit**

Two piece watertight cap: yes  
Screened, vented well cap: yes  
Cap secured to casing: yes  
Conduit min 18" B.G.: yes  
Conduit secured to well cap: yes

Depth of well encountered at time of pump installation: 500 (feet)

If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4

Torque arrestors or Cable guards are required - Must circle one

Safety rope, if used, attached to inside of well casing with eye bolt yes

**Piping to house**

Type: 1" Black poly  
PSI: 200 (160 psi min)  
Depth of supply line: 48" (36" min)

**House Connection**

PVC sleeved to undisturbed soil at wall penetration: yes  
Approximate length of sleeve: 5'  
Sleeve caulked and sealed properly: yes

The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Signature of company representative responsible for installation: Nick DiBattista

5-26-05  
date

**For Health Department Use Only - Not to be completed by Installer**

Date Insp. Requested: \_\_\_\_\_

Date Insp. Approved: \_\_\_\_\_

Inspection Data: Pitless adapter and water supply line at least 36" below grade \_\_\_\_\_

Two piece cap installed and attached to casing securely \_\_\_\_\_

Elec. conduit extends at least 18" below grade/attached to cap properly \_\_\_\_\_

Safety rope installed inside of well casing \_\_\_\_\_

Correct well tag attached properly and casing 8" above finished grade \_\_\_\_\_

Water supply line sleeved adequately at house connection \_\_\_\_\_

Adequate ground observed below pitless adapter \_\_\_\_\_

HD-215 (Rev. 8/00)

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License # and name of individual responsible for the field installation:

Name (Print): \_\_\_\_\_ License# \_\_\_\_\_

\*A licensed individual must perform the actual installation. Apprentices must be under the direct supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification.

Name of Property Owner: \_\_\_\_\_ Telephone #: \_\_\_\_\_  
Subdivision: Brierly Lot #: 6 Well Tag #: HO-94-3778  
Site Address: 13831 Russell Zepp Dr.

Submersible Pump Data

Make: \_\_\_\_\_  
Model #: \_\_\_\_\_  
Pump Capacity \_\_\_\_\_ GPM  
Well Yield: \_\_\_\_\_ GPM

Pitless Adapter

Make: \_\_\_\_\_  
Model#: \_\_\_\_\_  
Depth: \_\_\_\_\_ (36" min)  
NSF approved: \_\_\_\_\_

Well Cap and Electric Conduit

Two piece watertight cap: \_\_\_\_\_  
Screened, vented well cap: \_\_\_\_\_  
Cap secured to casing: \_\_\_\_\_  
Conduit min 18" B.G.: \_\_\_\_\_  
Conduit secured to well cap: \_\_\_\_\_

Depth of well encountered at time of pump installation: \_\_\_\_\_ (feet)  
If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4

Torque arrestors or Cable guards are required – Must circle one

Safety rope, if used, attached to inside of well casing with eye bolt \_\_\_\_\_

Piping to house

Type: \_\_\_\_\_  
PSI: \_\_\_\_\_ (160 psi min)

House Connection

PVC sleeved to undisturbed soil at wall penetration: \_\_\_\_\_  
Approximate length of sleeve (5 foot minimum): \_\_\_\_\_

Depth of supply line: \_\_\_\_\_ (36" min)      Sleeve caulked and sealed properly: \_\_\_\_\_

The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Signature of company representative responsible for installation \_\_\_\_\_ date \_\_\_\_\_

For Health Department Use Only – Not to be completed by Installer

Date Insp. Requested: \_\_\_\_\_ Date Insp. Approved: 5/26/05  
Inspection Data: Pitless adapter and water supply line at least 36" below grade ☒  
Two piece cap installed and attached to casing securely ☒  
Elec. conduit extends at least 18" below grade/attached to cap properly ☒  
Safety rope installed inside of well casing ☒  
Correct well tag attached properly and casing 8" above finished grade ☒  
Water supply line sleeved adequately at house connection ☒  
Adequate grout observed below pitless adapter ☒

O-Ring sticking out  
3/28/05  
Well line installed and covered without inspection  
33 Bags

5/19/05 Rope Outside Casing  
O-Ring Sticking Out, Saw Pictures of Pitless and Conduit - O.K., Need to Verify Sleeve Length. (BA) (BB)

DRILLER: REMOVE COPY AND RETAIN FOR YOUR RECORDS. RETURN COUNTY COPY TO COUNTY ENVIRONMENTAL AGENCY. SUBMIT COPY TO OWNER. RETURN ALL OTHER PARTS TO DEPARTMENT OF ENVIRONMENT, 2500 BROENING HIGHWAY, BALTIMORE, MARYLAND 21224.

<b>C1 3999</b>		SEQUENCE NO. (MDE USE ONLY)		<b>STATE OF MARYLAND WELL COMPLETION REPORT</b> FILL IN THIS FORM COMPLETELY PLEASE TYPE		THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.																																																																																																																																																																																																																																										
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NUMBER OF UNSUCCESSFUL WELLS: <b>0</b>				<b>WELL HYDROFRACTURED</b> <b>Y</b> <b>N</b>																																																																																																																																																																																																																																												
CIRCLE APPROPRIATE LETTER <b>A</b> A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED <b>E</b> ELECTRIC LOG OBTAINED <b>P</b> 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 LIC. NO. <b>MWD040</b> <b>Geary F. Enderburg</b> DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) <b>LIC. NO. JW D7227</b> <b>James D. Schuler</b>				GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68																																																																																																																																																																																																																																												
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)				MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q																																																																																																																																																																																																																																												

9.15.03

12:30

## Review

Well Permit No. HO - 94-3778  
Location of property (road) Russell Zapp Drive  
Subdivision Brierly Lot 6 Block      Plat      Sec.       
Well Driller EASTERDAY Owner SALVATORE

Depth of well 500' - 5 gpm  
Distance of measuring point (M.P.) above ground 2 ft  
Static water level (S.W.L.) below M.P. 26

I. High rate pumping -- reservoir drawdown

Time pump started 9:18 Pumping rate 1200  
Total time 27 to reach pumping water level 640 ft. below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes

[illegible]

B 1 <b>0845</b> 1 2 3 6	SEQUENCE NO. (MDE USE ONLY)	<b>STATE OF MARYLAND</b> <b>APPLICATION FOR PERMIT TO DRILL WELL</b> 519037 please type <b>KN</b>	STATE PERMIT NUMBER <b>HO - 94 - 3778</b> 70 fill in this form completely 79
Date Received (APA) <b>07 02 03</b> 8. MM DD YY 13 <b>OWNER INFORMATION</b> 9501 15 <u>SALVATORE GORGONE &amp; PAT</u> 34 Last Name Owner First Name 36 <u>18308 POWHATAN COURT</u> 55 Street or RFD 57 <u>GAITHERSBURG, MD 20877</u> 76 Town State Zip		<b>LOCATION OF WELL</b> B 3 8 <u>Howard</u> 21 COUNTY 23 <u>Brierly</u> 42 SUBDIVISION SECTION <u>44</u> 46 LOT <u>6</u> 48 50 <u>Clarksville</u> 52 NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) <u>4</u> M I 73 76 77 78	
<b>DRILLER INFORMATION</b> <u>George F. Easterday</u> M W D <u>040</u> Driller's Name 76 License No. 81 <u>L. Franklin Easterday, Inc.</u> Firm Name <u>9265 Brown Church Rd., MT. Airy, Md. 21771</u> Address <u>George F. Easterday</u> 6/27/2003 Signature Date		<b>WELL INFORMATION</b> B 2 1 2 APPROX. PUMPING RATE <u>5</u> (GAL. PER MIN.) 8 12 AVERAGE DAILY QUANTITY NEEDED <u>500</u> (GAL. PER DAY) 14 20	
<b>USE FOR WATER</b> (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, DEWATERING <input type="checkbox"/> PUBLIC WATER SUPPLY WELL <input type="checkbox"/> TEST, OBSERVATION, MONITORING <input type="checkbox"/> GEO-THERMAL		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL <u>Howard</u> <u>A43077</u> COUNTY NAME COUNTY NO. STATE SIGNATURE INSERT S. 41 DATE ISSUED <u>08/11/03</u> <u>Kacie Norman</u> 8/11/08 43 MM DD YY 48 CO SIGNATURE EXP. DATE NORTH GRID <u>502</u> 0 0 0 EAST GRID <u>807</u> 0 0 0 50 55 57 63	
APPROXIMATE DEPTH OF WELL <u>300</u> FEET 24 28 APPROXIMATE DIAMETER OF WELL <u>6</u> INCH NEAREST		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. wells 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE E <u>800'7</u> N <u>500'2</u> 000 000 DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION <u>13K7</u>	
<b>METHOD OF DRILLING</b> (circle one) BORED (or Augered) JETTED Jetted & DRIVEN 30 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary) 37 CABLE REVERSE-ROTARY Drive-POINT other		<b>REPLACEMENT OR DEEPEMED WELLS</b> (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS <input type="checkbox"/> THIS WELL WILL DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52	
Not to be filled in by driller (MDE OR COUNTY USE ONLY)			
APPROP. PERMIT NUMBER <u>G</u> PERMIT No. <u>HO - 94 - 3778</u> 70 71 72 73 74 75 76 77 78 79			
SPECIAL CONDITIONS <u>Facing LOT FROM ROAD. Drill well 30' off left lot line and Clarksville</u> NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED			

689.68	750.00	819.78	62° 37' 55"	456
760.800	700.00	778.11	63° 41' 20"	434

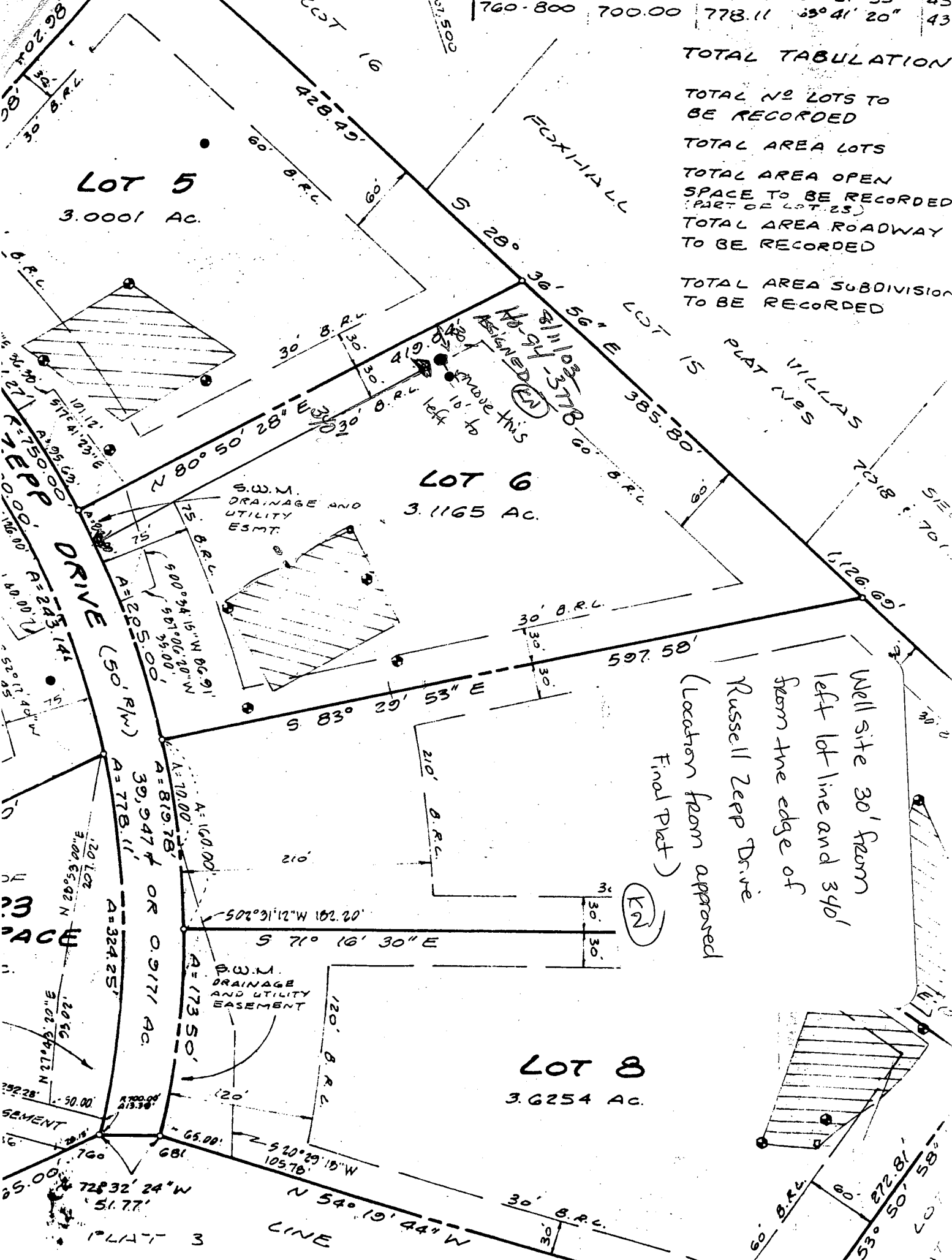
# TOTAL TABULATION

- TOTAL NO LOTS TO BE RECORDED
- TOTAL AREA LOTS
- TOTAL AREA OPEN SPACE TO BE RECORDED (PART OF LOT 25)
- TOTAL AREA ROADWAY TO BE RECORDED
- TOTAL AREA SUBDIVISION TO BE RECORDED

**Lot 5**  
3.0001 AC.

**Lot 6**  
3.1165 AC.

**Lot 8**  
3.6254 AC.



Well site 30' from  
left lot line and 340'  
from the edge of  
Russell Zepp Drive  
(Location from approved  
Final Plat)

(K2)



# APPLICATION

PERCOLATION TESTING

A 43077

P \_\_\_\_\_

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

DISTRICT 574

DATE 9-20-88

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 RUSSELL ZEPP

ADDRESS 13790 HIGHLAND RD PHONE 854-2797

PROSPECTIVE BUYER HENRY L. BLEVINS

ADDRESS 2600 WATERSVILLE RD PHONE 795-2337

MT. AIRY, MD 21771

PROPERTY LOCATION:

SUBDIVISION ZEPP SUBDIVISION LOT NO. 6

ROAD AND DESCRIPTION HIGHLAND ROAD HOWARD CO

ZIP: 21029

TAX MAP 34 PARCEL # 7

SIZE OF LOT 3.10 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.

(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING \_\_\_\_\_

## THIS IS NOT A PERMIT

SOIL PROFILE

0'


INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
3/10/89	6S	6	1:08	1:28	—	—	FAIL
1:6	6V	12	5-10%	frags	clay	to 6-7'	
	7S	5	1:13	1:15	1:15	1:17	2
	7V	4 1/2	clay to	3 1/2	5%	frags	

REMARKS \_\_\_\_\_

TYPE OF SOIL \_\_\_\_\_

TESTED BY M. Rifkin ALSO PRESENT D. Hopkins

# APPLICATION

PERCOLATION TESTING

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

A 43077

P \_\_\_\_\_

DISTRICT 5 126

DATE 9-20-88

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 RUSSELL ZEPP

ADDRESS 13790 HIGHLAND RD PHONE 854-2797

PROSPECTIVE BUYER HENRY L. BLEVINS

ADDRESS 2600 MATERSVILLE RD PHONE 795-2337

MT. AIRY, MD 21771

PROPERTY LOCATION:

SUBDIVISION ZEPP SUBDIVISION LOT NO. 6

ROAD AND DESCRIPTION HIGHLAND ROAD HOWARD CO

ZIP: 21029

TAX MAP 34 PARCEL # 7

SIZE OF LOT 3.10 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.

(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING perc ok, hold for plat

HD-216

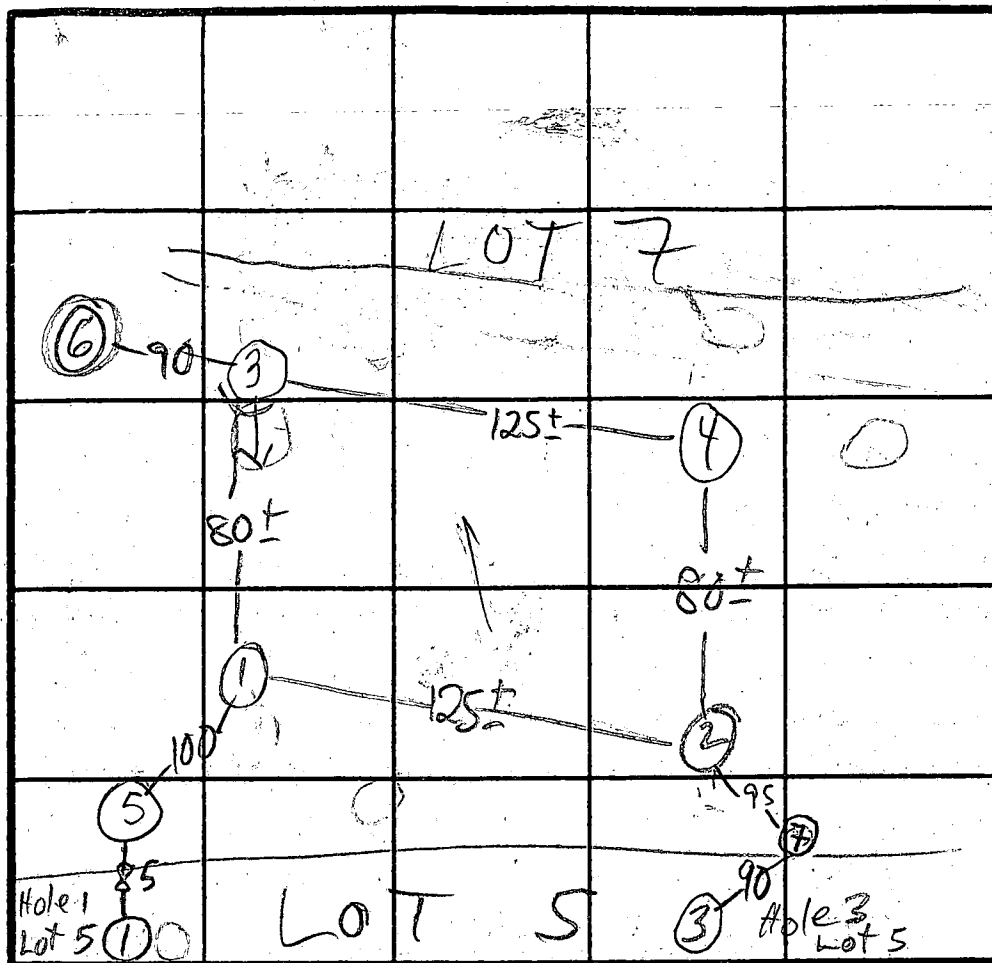
## THIS IS NOT A PERMIT

LOT 6

A-43022

SOIL PROFILE

6' top soil  
4' deep dk  
brn  
silt clay  
loam  
lt. beige  
to dk.  
brn  
sandy  
silt loam  
10%  
frags



① MEDHI  
② HI  
③④ LO  
 $\bar{x} = 10^{20}$   
240  $\Delta$  BR  
Inlet 4  
Bottom 8

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2/1/89	1 S	4 1/2'	4:40	4:43	4:43	4:48	6
	1 V	11	as profiled				
	2 S	5'	4:51	4:58	4:58	5:08	10
	2 V	11	lt. grey	lt. tan mix	30%	Frags clay to 5'	
3/2/89	3 S	7 1/2'	10:27	10:41	10:41	11:10	29
11	3 V	12 1/2'	dk orange/yellow/red clay	to 6 1/2'		<5% frags	
	4 S	6'	10:29	10:34	10:34	10:42	8
	4 V	12 1/2'	dk red/orange/yellow clay	to 6 1/2'		5% frags	
3/10/89	5 S	6'	12:56	12:58	12:58	1:00	2
	5 V	11	Clay to 5'		10% frags		

REMARKS HOLES DUG PER PLAT; SHIFT PERC AREA 25' toward Lot 5

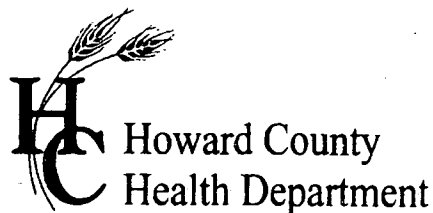
TYPE OF SOIL

TESTED BY

M. Rifkin

ALSO PRESENT

D. Hopkins



# APPLICATION

## FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) \_\_\_\_\_ TEST TIME \_\_\_\_\_ A/P \_\_\_\_\_

AGENCY REVIEW: \_\_\_\_\_ DATE \_\_\_\_\_

DO NOT WRITE ABOVE THIS LINE

I HEREBY APPLY FOR THE NECESSARY TESTING/EVALUATION PRIOR TO ISSUANCE OF SEWAGE DISPOSAL SYSTEM PERMIT(S) TO:

CHECK AS NEEDED:

- ☐ CONSTRUCT NEW SEPTIC SYSTEM(S)
- ☐ REPAIR/ADD TO AN EXISTING SEPTIC SYSTEM
- ☐ REPLACE AN EXISTING SEPTIC SYSTEM

CHECK AS NEEDED:

- ☐ NEW STRUCTURE(S)
- ☐ ADDITION TO AN EXISTING STRUCTURE
- ☐ REPLACE AN EXISTING STRUCTURE

CHECK ONE:

- ☐ CREATE NEW LOT(S)
- ☐ BUILD ON AN EXISTING LOT IN A SUBDIVISION
- ☐ BUILD ON AN EXISTING PARCEL OF RECORD

IS THE PROPERTY WITHIN 2500' OF ANY RESERVOIR?

- ☐ YES
- ☐ NO

THE TYPE OF STRUCTURE IS:

- ☐ RESIDENTIAL WITH \_\_\_\_\_ PROPOSED BEDROOMS IN THE COMPLETED STRUCTURE (NOTE **UNKNOWN** IF APPROPRIATE)
- ☐ COMMERCIAL (PROVIDE DETAIL OF NUMBERS AND TYPES OF EMPLOYEES/ CUSTOMERS ON ACCOMPANYING PLAN)
- ☐ INSTITUTIONAL/GOVERNMENT (PROVIDE DETAIL OF NUMBERS AND TYPES OF EMPLOYEES/USERS ON ACCOMPANYING PLAN)

PROPERTY OWNER(S) \_\_\_\_\_

DAYTIME PHONE \_\_\_\_\_ CELL \_\_\_\_\_ FAX \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_  
STREET CITY/TOWN STATE ZIP

APPLICANT \_\_\_\_\_

DAYTIME PHONE \_\_\_\_\_ CELL \_\_\_\_\_ FAX \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_  
STREET CITY/TOWN STATE ZIP

APPLICANT'S ROLE: DEVELOPER BUILDER BUYER RELATIVE/FRIEND REALTOR CONSULTANT

PROPERTY LOCATION  
SUBDIVISION/PROPERTY NAME Brierly LOT NO. 6

PROPERTY ADDRESS 13831 Russell Zepp Drive  
STREET TOWN/POST OFFICE

TAX MAP PAGE(S) \_\_\_\_\_ GRID \_\_\_\_\_ PARCEL(S) \_\_\_\_\_ PROPOSED LOT SIZE \_\_\_\_\_

AS APPLICANT, I UNDERSTAND THE FOLLOWING: THE SYSTEM INSTALLED SUBSEQUENT TO THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC SEWERAGE IS AVAILABLE. THIS APPLICATION IS COMPLETE WHEN ALL APPLICABLE FEES AND A SUITABLE SITE PLAN HAVE BEEN RECEIVED. I ACCEPT THE RESPONSIBILITY FOR COMPLIANCE WITH ALL M.O.S.H.A. AND "MISS UTILITY" REQUIREMENTS. APPROVAL IS BASED UPON SATISFACTORY REVIEW OF A PERC CERTIFICATION PLAN. TEST RESULTS WILL BE MAILED TO APPLICANT.

SIGNATURE OF APPLICANT \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT, BUREAU OF ENVIRONMENTAL HEALTH, WELL AND SEPTIC PROGRAM  
3525-H ELLICOTT MILLS DRIVE, ELLICOTT CITY, MARYLAND 21043-4544 (410) 313-1771 FAX (410) 313-2648  
TDD (410) 313-2323 TOLL FREE 1-877-4MD-DHMH

COUNTY #

SOIL PROFILE

0'

11.5'

Fill

Red Br  
Sa Cl Loam  
and Sa Loam

Trace Rock

3'

Light Br  
Sa Loam~60%  
Platy  
Rock

12'

(B)

Red Br  
Sa Cl Loam  
~20% Rock

2.5'-3'

Grey and  
Tan Sa  
Loam~70%  
Platy  
Rock

12'

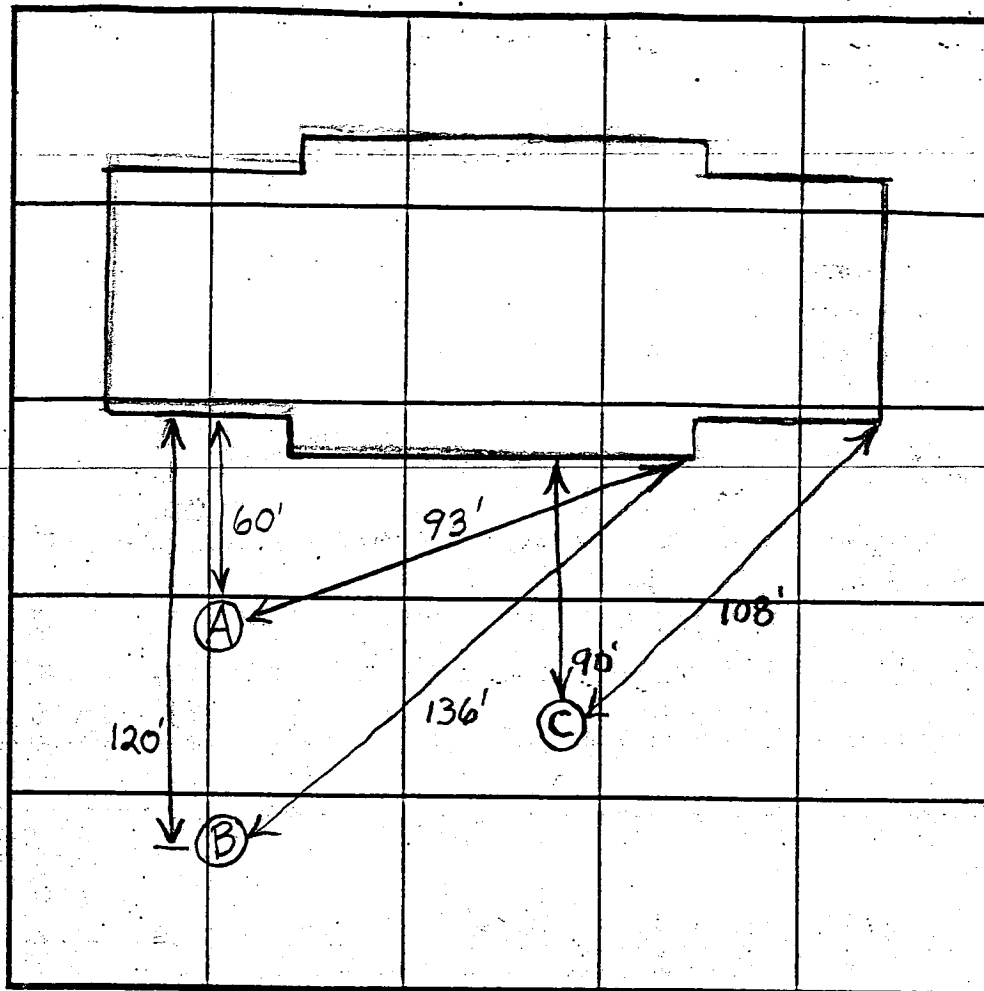
(C)

Red Br Sa  
Cl Loam  
~10% Rock

2.5'-3'

Light Br  
Sa Loam~55%  
Platy  
RockHard  
Bottom

11.5'



SOIL PROFILE

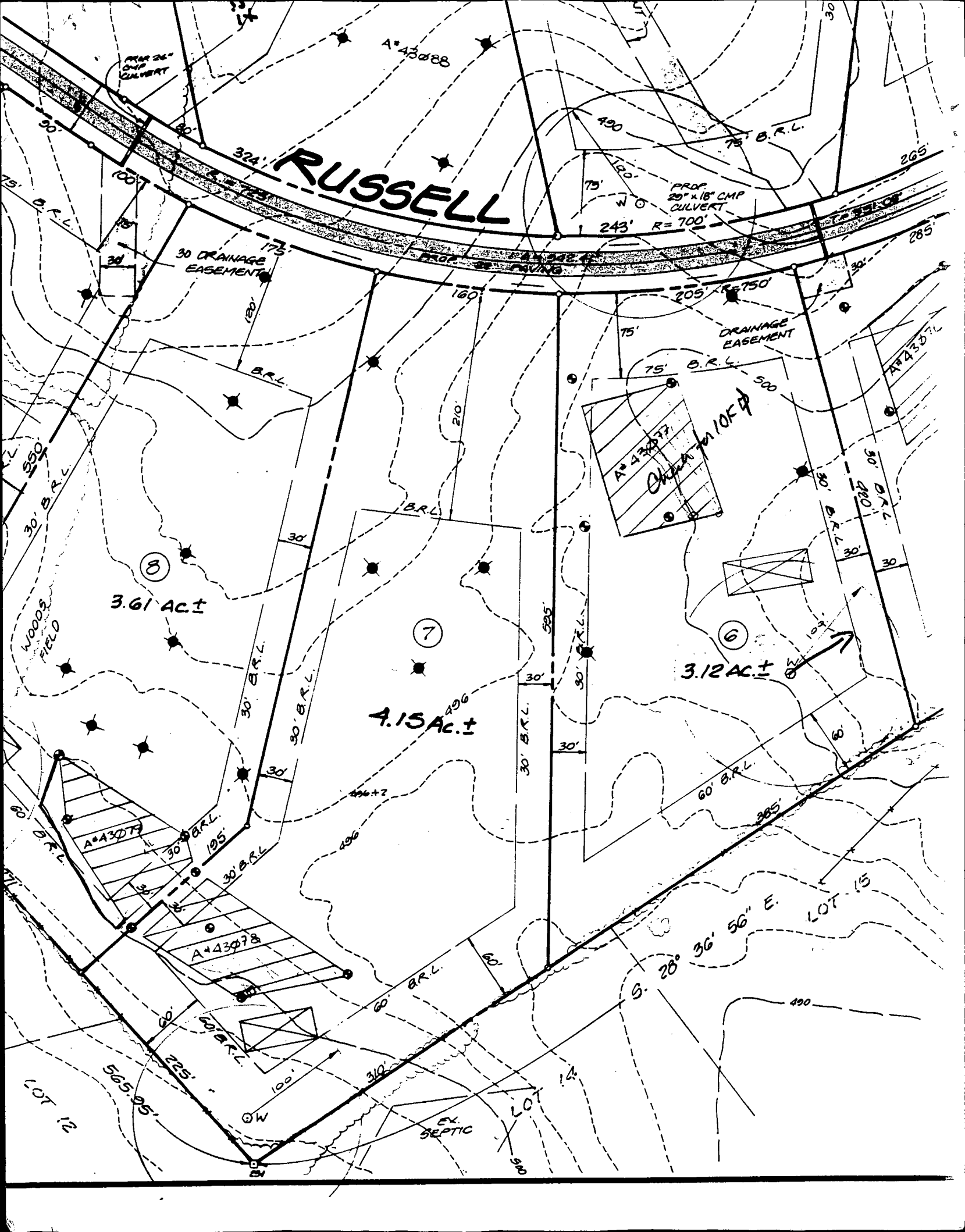
0'

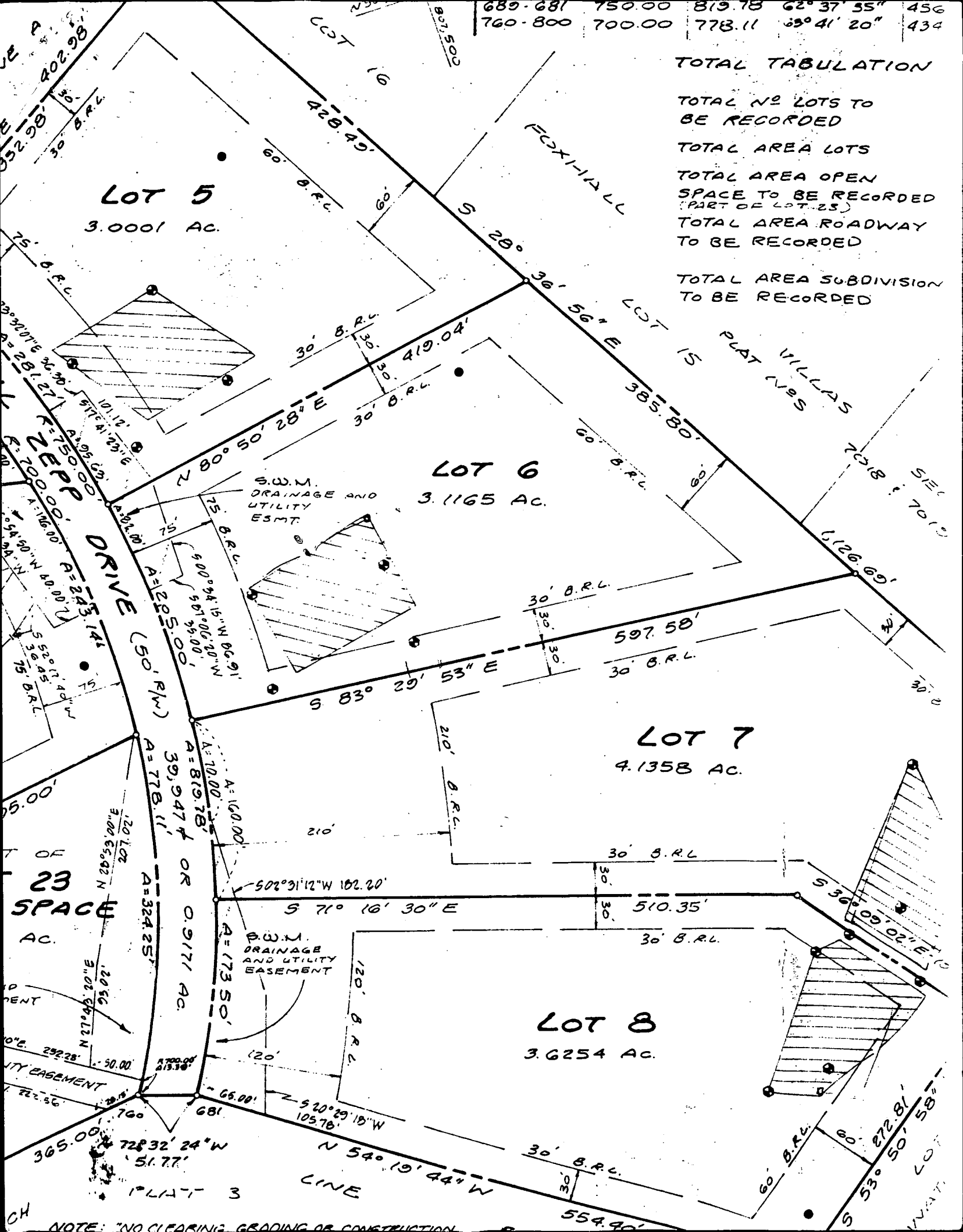
INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Russell Zepp Drive

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
3/21/05	A	3' / 12' V	11:37:30	11:41:15	11:41:15	11:48:15	7
		5.5'	11:35:15	11:40:30	11:40:30	11:48:45	8
	B	3' / 12' V	< 1/4" in 10 Minutes				Slow
		6.5	12:17:15	12:22	12:22	12:30	8
		3.5'	12:32	12:46	12:46	1:15	29
	C	11.5' V					

REMARKS Test Depths Include Fill - All Holes Contain Excessive  
 TYPE OF SOIL Amounts of Rock But Perc. Rates are O.K.  
 TESTED BY B. Baker ALSO PRESENT Hatfields  
 TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 13 TRENCH WIDTH 3'  
 INLET DEPTH \_\_\_\_\_ MAXIMUM BOTTOM DEPTH \_\_\_\_\_ SQ. FT/BEDROOM 210







CT>68  
#25  
CR84923

18308 Powhatan Court  
Gaithersburg, MD 20877

# C & S Gorgone Construction, Inc.

Telephone (301) 990-7219

Date: January 21, 2005

**RECEIVED**

To Whom It May Concern:

JAN 21 2005

This is in reference to the new home being built for:

**LICENSES & PERMITS  
DIVISION**

Salvatore and Patrice Gorgone  
at 13831 Russell Zepp Drive, Clarksville, Maryland 21029

Permit No. B-00146146-A

The house elevations have changed from the original plot plans. Due to the existing ground conditions, the house elevation had to be lowered.

If there are any questions, please contact me at (240-388-1318). → SAL GORGONE

Thank you.

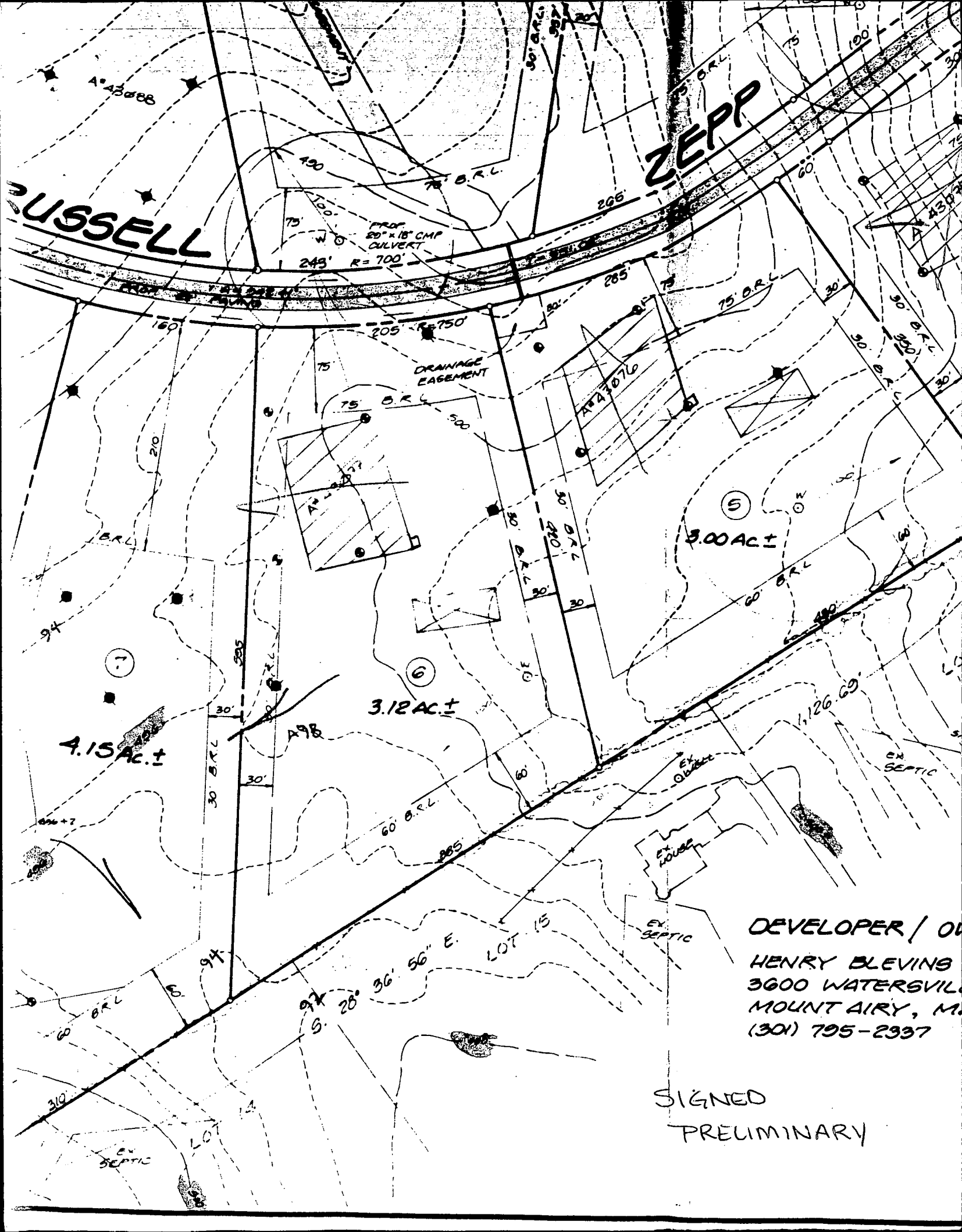
FG1  
Health Dept  
cc: Builder & Inspector  
owner  
file  
Salvatore Gorgone

REVIEWED FOR  
CODE COMPLIANCE  
DEPARTMENT OF INSPECTIONS,  
LICENSED PERMITS  
HOWARD COUNTY

DATE: 1/21/05  
BY: [Signature]

☐ SUBJECT TO COMMENTS OF LETTER  
☒ SUBJECT TO FIELD INSPECTION  
☐ SUBJECT TO COMMENTS ON PLANS  
☒ AMENDMENT ☐ FINAL

Revised elevation



RUSSELL

ZEPP

PROP  
20' x 18' CMP  
CULVERT

DRAINAGE  
EASEMENT

4.15 AC.±

3.12 AC.±

3.00 AC.±

DEVELOPER / OWNER  
HENRY BLEVING  
3600 WATERSVILLE  
MOUNT AIRY, NC  
(301) 795-2337

SIGNED  
PRELIMINARY

COORDINATE DATA		
PT.	NORTH	EAST
251	500,517.8233	807,833.3072
310	501,506.0360	807,234.3020
633	501,344.5442	806,310.7786
574	500,772.0000	806,267.0000
681	500,547.2453	806,281.5558
682	500,223.9596	807,431.3333
683	501,326.7685	806,330.6250
714	501,175.1358	806,341.7105
715	501,501.5833	806,810.3361
760	500,562.7827	806,332.1673
800	501,301.2814	806,347.6080
801	500,524.3438	806,363.1364
802	500,804.8166	806,533.4334

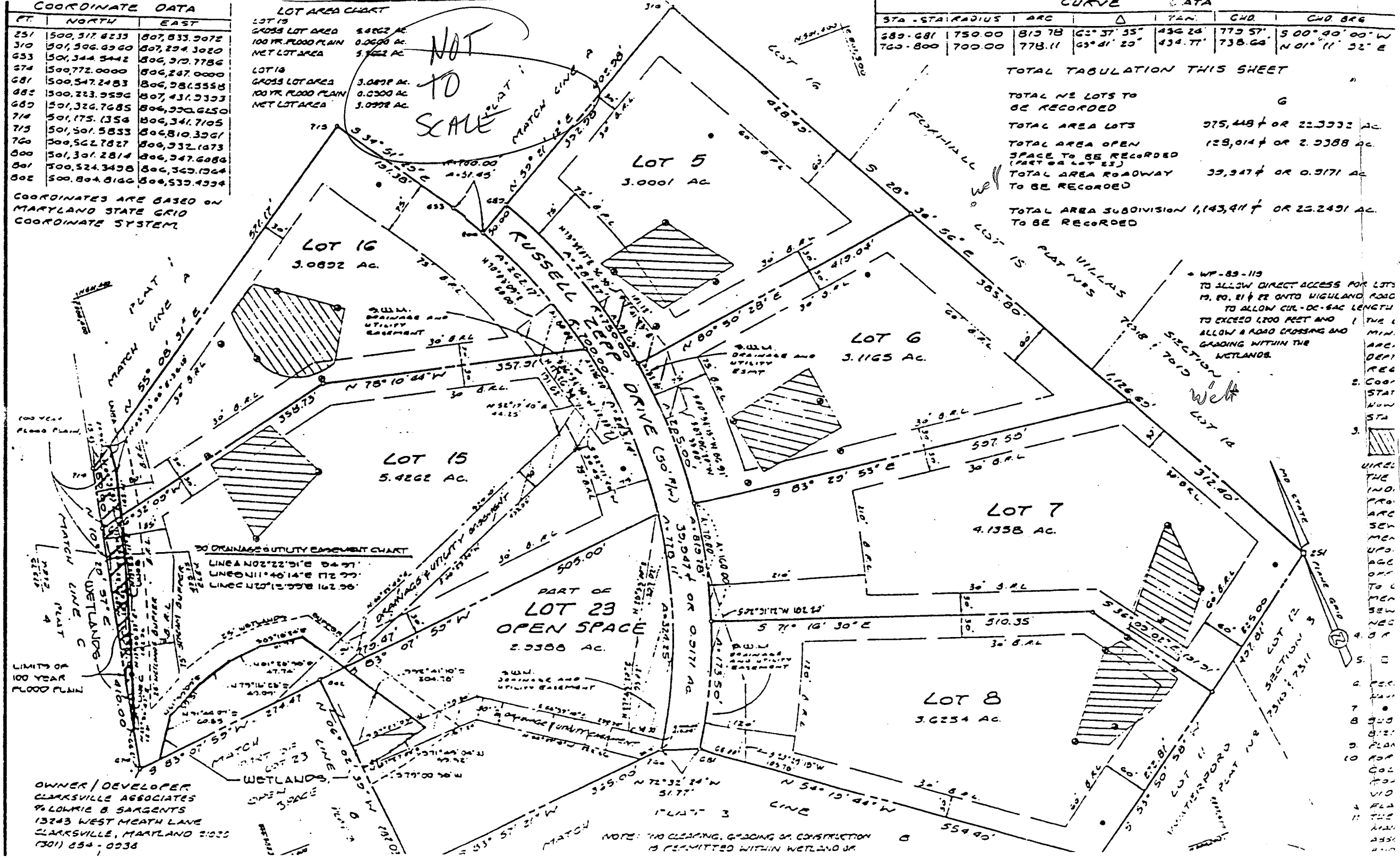
COORDINATES ARE BASED ON MARYLAND STATE GRID COORDINATE SYSTEM

LOT AREA CHART		
LOT 15	GROSS LOT AREA	5.4262 AC.
	100 YR. FLOOD PLAIN	0.0600 AC.
	NET LOT AREA	5.3662 AC.
LOT 16	GROSS LOT AREA	3.0892 AC.
	100 YR. FLOOD PLAIN	0.0300 AC.
	NET LOT AREA	3.0592 AC.

NOT TO SCALE

CURVE DATA			CURVE DATA		
STA.	STAIRADIUS	ARC	Δ	TAN	CHD
589-681	750.00	813.78	63° 37' 35"	436.24	773.57
760-800	700.00	778.11	63° 31' 25"	434.77	738.68

TOTAL TABULATION THIS SHEET	
TOTAL NET LOTS TO BE RECORDED	6
TOTAL AREA LOTS	375,448 ± OR 22,3332 AC.
TOTAL AREA OPEN SPACE TO BE RECORDED (PART OF LOT 23)	129,014 ± OR 2.3388 AC.
TOTAL AREA ROADWAY TO BE RECORDED	33,347 ± OR 0.9171 AC.
TOTAL AREA SUBDIVISION TO BE RECORDED	1,143,411 ± OR 22,2491 AC.



• WP-89-119 TO ALLOW DIRECT ACCESS FOR LOTS 15, 16, 21 & 22 ONTO MICHIGAN ROAD TO ALLOW CUR-DC-BAC LENGTH TO EXCEED 1200 FEET AND 1/2 MIN. ALLOW A ROAD CROSSING AND GRADING WITHIN THE WETLANDS.

well

OWNER/DEVELOPER  
CLARKVILLE ASSOCIATES  
P. LOKKIE B. SARGENTS  
13243 WEST MEATH LANE  
CLARKVILLE, MARYLAND 21033  
(301) 654-0238

NOTE: NO CLEARING, GRADING OR CONSTRUCTION IS PERMITTED WITHIN WETLAND OR



B00146146

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3630 COURT HOUSE DRIVE ELICOTT CITY, MD 21043 PERMITS (410) 313-3455 INSPECTIONS (410) 313-1570 AUTOMATED INFORMATION (410) 313-3600	HOWARD COUNTY PERMIT APPLICATION	PERMIT NUMBER B00146762
--	-------------------------------------	----------------------------

Building Address <u>12831 Russell Loop Dr</u> <u>Clarksville, MD 21029</u>	Property Owner's Name <u>Sal &amp; Patricia Gorgore</u>
Suite/Apt. #: _____ SDP/WP/Petition #: _____	Address <u>15308 Powhatan Ct.</u>
Census Tract <u>605101</u> Subdivision <u>BRIERLY</u>	City <u>Gaithersburg</u> State <u>MD</u> Zip Code <u>20877</u>
Section <u>1</u> Area _____ Lot <u>6</u>	Home Phone <u>301-940-7519</u> Work Phone <u>same</u>
Tax Map <u>34</u> Parcel <u>7</u> Grid <u>3</u>	Applicant's Name & Mailing Address, (if other than stated hereon): _____
Zoning <u>RRDEP</u> Map Coordinates <u>13K7</u> Lot size _____	Phone _____ Fax _____
Existing Use <u>vacant lot</u>	Contractor Company <u>owner</u>
Proposed Use <u>house with detached garage</u>	Contact Person _____
Estimated Construction Cost \$ <u>50,000</u>	Address _____
Description of Work <u>28'x38' 3 car detached garage 1 story</u>	City _____ State _____ Zip Code _____
Occupant or Tenant <u>Sal Gorgore</u>	License No. _____ Phone _____ Fax _____
Contact Name <u>Sal Gorgore</u>	Engineer or Architect Company _____
Address <u>18208 Powhatan Ct.</u>	Contact Person _____
City <u>Gaithersburg</u> State <u>MD</u> Zip Code <u>20877</u>	Address _____
Phone <u>301-940-7519</u> Fax _____	City _____ State _____ Zip Code _____
	Phone _____ Fax _____

BUILDING DESCRIPTION - <u>COMMERCIAL</u>		BUILDING DESCRIPTION - <u>RESIDENTIAL</u>	
<b>Building Characteristics</b>	<b>Utilities</b>	<b>Building Characteristics</b>	<b>Utilities</b>
Height: _____	Water Supply: _____ Public _____ Private _____	SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: _____ Public _____ Private <input checked="" type="checkbox"/>
No. of stories: _____	Sewage Disposal: _____ Public _____ Private _____	1st floor: _____	Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/>
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>	2nd floor: _____	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>	Basement: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____	Sprinkler system: N/A <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____	Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms _____	Sprinkler system: N/A <input type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____
State Certified Modular <u>4-14-04</u>		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 _____	

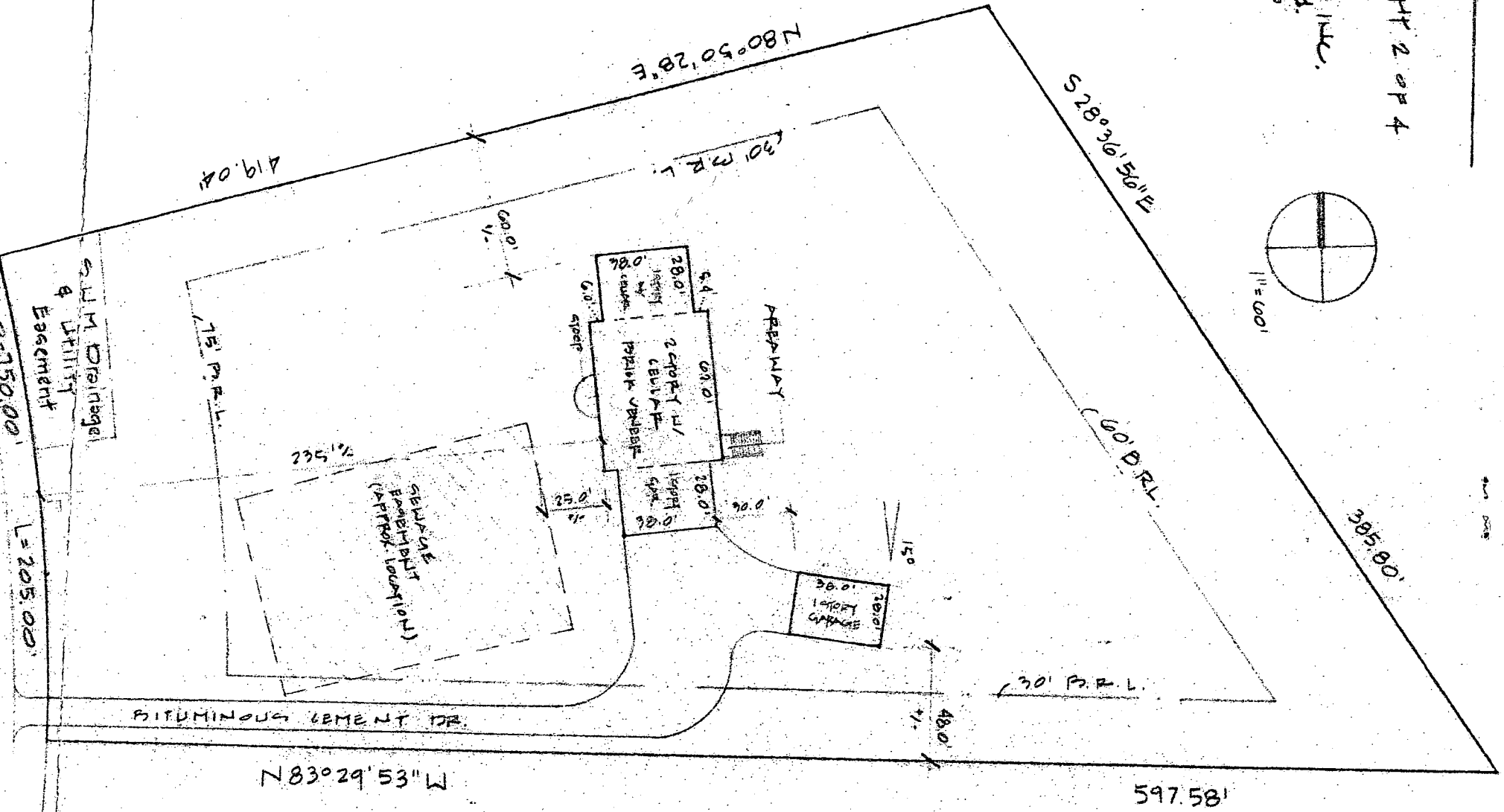
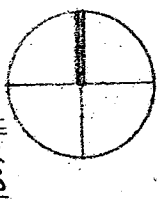
THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERE TO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED 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.

<u>Patricia Gorgore</u> Applicant's Signature Vice President, C&S Gorgore Construction Title/Company	<u>Patricia Gorgore</u> Print Name <u>2/12/04</u> Date
---	---

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# <u>60941</u>
<u>Land Development, DPZ</u>			Front: _____	Filing fee \$ <u>25</u>
<u>State Highways</u>			Rear: _____	Permit fee \$ _____
<u>Building Official</u>			Side: _____	Excise tax \$ _____
<u>Dev. Engineering, DPZ</u>			Side St: _____	Add'l per. fee \$ _____
<u>Health</u> <u>4-19-04</u> <u>Race Norman</u>			All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
<u>Fire Protection</u>			Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>			Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Lot Coverage for New Town Zone _____	Check # <u>4532</u>
ONE STOP SHOP: <input type="checkbox"/>			SDP/Red-line approval date _____	Validation # <u>41277</u>
				Accepted by <u>[Signature]</u>

10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100, 101, 102, 103, 104, 105, 106, 107, 108, 109, 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120, 121, 122, 123, 124, 125, 126, 127, 128, 129, 130, 131, 132, 133, 134, 135, 136, 137, 138, 139, 140, 141, 142, 143, 144, 145, 146, 147, 148, 149, 150, 151, 152, 153, 154, 155, 156, 157, 158, 159, 160, 161, 162, 163, 164, 165, 166, 167, 168, 169, 170, 171, 172, 173, 174, 175, 176, 177, 178, 179, 180, 181, 182, 183, 184, 185, 186, 187, 188, 189, 190, 191, 192, 193, 194, 195, 196, 197, 198, 199, 200, 201, 202, 203, 204, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216, 217, 218, 219, 220, 221, 222, 223, 224, 225, 226, 227, 228, 229, 230, 231, 232, 233, 234, 235, 236, 237, 238, 239, 240, 241, 242, 243, 244, 245, 246, 247, 248, 249, 250, 251, 252, 253, 254, 255, 256, 257, 258, 259, 260, 261, 262, 263, 264, 265, 266, 267, 268, 269, 270, 271, 272, 273, 274, 275, 276, 277, 278, 279, 280, 281, 282, 283, 284, 285, 286, 287, 288, 289, 290, 291, 292, 293, 294, 295, 296, 297, 298, 299, 300, 301, 302, 303, 304, 305, 306, 307, 308, 309, 310, 311, 312, 313, 314, 315, 316, 317, 318, 319, 320, 321, 322, 323, 324, 325, 326, 327, 328, 329, 330, 331, 332, 333, 334, 335, 336, 337, 338, 339, 340, 341, 342, 343, 344, 345, 346, 347, 348, 349, 350, 351, 352, 353, 354, 355, 356, 357, 358, 359, 360, 361, 362, 363, 364, 365, 366, 367, 368, 369, 370, 371, 372, 373, 374, 375, 376, 377, 378, 379, 380, 381, 382, 383, 384, 385, 386, 387, 388, 389, 390, 391, 392, 393, 394, 395, 396, 397, 398, 399, 400, 401, 402, 403, 404, 405, 406, 407, 408, 409, 410, 411, 412, 413, 414, 415, 416, 417, 418, 419, 420, 421, 422, 423, 424, 425, 426, 427, 428, 429, 430, 431, 432, 433, 434, 435, 436, 437, 438, 439, 440, 441, 442, 443, 444, 445, 446, 447, 448, 449, 450, 451, 452, 453, 454, 455, 456, 457, 458, 459, 460, 461, 462, 463, 464, 465, 466, 467, 468, 469, 470, 471, 472, 473, 474, 475, 476, 477, 478, 479, 480, 481, 482, 483, 484, 485, 486, 487, 488, 489, 490, 491, 492, 493, 494, 495, 496, 497, 498, 499, 500, 501, 502, 503, 504, 505, 506, 507, 508, 509, 510, 511, 512, 513, 514, 515, 516, 517, 518, 519, 520, 521, 522, 523, 524, 525, 526, 527, 528, 529, 530, 531, 532, 533, 534, 535, 536, 537, 538, 539, 540, 541, 542, 543, 544, 545, 546, 547, 548, 549, 550, 551, 552, 553, 554, 555, 556, 557, 558, 559, 560, 561, 562, 563, 564, 565, 566, 567, 568, 569, 570, 571, 572, 573, 574, 575, 576, 577, 578, 579, 580, 581, 582, 583, 584, 585, 586, 587, 588, 589, 590, 591, 592, 593, 594, 595, 596, 597, 598, 599, 600, 601, 602, 603, 604, 605, 606, 607, 608, 609, 610, 611, 612, 613, 614, 615, 616, 617, 618, 619, 620, 621, 622, 623, 624, 625, 626, 627, 628, 629, 630, 631, 632, 633, 634, 635, 636, 637, 638, 639, 640, 641, 642, 643, 644, 645, 646, 647, 648, 649, 650, 651, 652, 653, 654, 655, 656, 657, 658, 659, 660, 661, 662, 663, 664, 665, 666, 667, 668, 669, 670, 671, 672, 673, 674, 675, 676, 677, 678, 679, 680, 681, 682, 683, 684, 685, 686, 687, 688, 689, 690, 691, 692, 693, 694, 695, 696, 697, 698, 699, 700, 701, 702, 703, 704, 705, 706, 707, 708, 709, 710, 711, 712, 713, 714, 715, 716, 717, 718, 719, 720, 721, 722, 723, 724, 725, 726, 727, 728, 729, 730, 731, 732, 733, 734, 735, 736, 737, 738, 739, 740, 741, 742, 743, 744, 745, 746, 747, 748, 749, 750, 751, 752, 753, 754, 755, 756, 757, 758, 759, 760, 761, 762, 763, 764, 765, 766, 767, 768, 769, 770, 771, 772, 773, 774, 775, 776, 777, 778, 779, 780, 781, 782, 783, 784, 785, 786, 787, 788, 789, 790, 791, 792, 793, 794, 795, 796, 797, 798, 799, 800, 801, 802, 803, 804, 805, 806, 807, 808, 809, 810, 811, 812, 813, 814, 815, 816, 817, 818, 819, 820, 821, 822, 823, 824, 825, 826, 827, 828, 829, 830, 831, 832, 833, 834, 835, 836, 837, 838, 839, 840, 841, 842, 843, 844, 845, 846, 847, 848, 849, 850, 851, 852, 853, 854, 855, 856, 857, 858, 859, 860, 861, 862, 863, 864, 865, 866, 867, 868, 869, 870, 871, 872, 873, 874, 875, 876, 877, 878, 879, 880, 881, 882, 883, 884, 885, 886, 887, 888, 889, 890, 891, 892, 893, 894, 895, 896, 897, 898, 899, 900, 901, 902, 903, 904, 905, 906, 907, 908, 909, 910, 911, 912, 913, 914, 915, 916, 917, 918, 919, 920, 921, 922, 923, 924, 925, 926, 927, 928, 929, 930, 931, 932, 933, 934, 935, 936, 937, 938, 939, 940, 941, 942, 943, 944, 945, 946, 947, 948, 949, 950, 951, 952, 953, 954, 955, 956, 957, 958, 959, 960, 961, 962, 963, 964, 965, 966, 967, 968, 969, 970, 971, 972, 973, 974, 975, 976, 977, 978, 979, 980, 981, 982, 983, 984, 985, 986, 987, 988, 989, 990, 991, 992, 993, 994, 995, 996, 997, 998, 999, 1000



4-14-04  
 No Septic or well  
 issues Proposed garage  
 (800146762) (KN)  
 RUSSELL  
 Edge Mac  
 50' P.W.  
 ZEPPE DRIVE  
 22 1/2' Mac Paving  
 L=205.00'  
 R=150.00'

al Notes

Gorgone - New House  
 Lot 6, Russell Zepp Drive  
 Howard County, MD

SAMUEL DYER, AIA  
 3939 Legation St., N.W.  
 Washington, DC 20015  
 202 966 - 3221



1

date: 20 Dec '03



DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3400 COUNTY HOUSE DRIVE ELICOTT CITY, MD 21043 PERMITS (410) 313-2455 INSPECTIONS (410) 313-1910 AUTOMATED INFORMATION (410) 313-3800		HOWARD COUNTY PERMIT APPLICATION	PERMIT NUMBER PM146146 KN																																																						
Building Address <u>13231</u> <u>18308 Russell Zappa</u> <u>Drive Clarksville MD</u>		Property Owner's Name <u>Sal Gorgone (PARRUE)</u>																																																							
Suite/Apt. #: _____ SDP/WP/Petition #: _____		Address <u>18308 Bowhater Ct</u>																																																							
Census Tract <u>6051.1</u> Subdivision <u>Brandy</u>		City <u>Geithersburg</u> State <u>MD</u> Zip Code <u>20857</u>																																																							
Section _____ Area _____ Lot <u>6</u>		Home Phone <u>301 990-7219</u> Work Phone <u>240 388-1318</u>																																																							
Tax Map <u>39</u> Parcel <u>7</u> Grid <u>3</u>		Applicant's Name & Mailing Address, (if other than stated hereon): <u>1320</u>																																																							
Zoning <u>RR</u> Map Coordinates <u>12K7</u> Lot size <u>3.4</u>		Phone _____ Fax <u>301 990-7819</u>																																																							
Existing Use <u>Vacant Lot</u>		Contractor Company <u>Owner</u>																																																							
Proposed Use <u>Single Family Home</u>		Contact Person _____																																																							
Estimated Construction Cost \$ <u>9700.000</u>		Address _____																																																							
Description of Work <u>New Home</u>		City _____ State _____ Zip Code _____																																																							
Occupant or Tenant _____		License No. _____																																																							
Contact Name _____		Phone _____ Fax _____																																																							
Address _____		Engineer or Architect Company _____																																																							
City _____ State _____ Zip Code _____		Contact Person <u>Samuel Dyer AIA</u>																																																							
Phone _____ Fax _____		Address <u>3939 Legation St. N.W.</u>																																																							
		City <u>Washington</u> State <u>DC</u> Zip Code <u>20015</u>																																																							
		Phone <u>202 966-3551</u> Fax _____																																																							
BUILDING DESCRIPTION - <u>COMMERCIAL</u>		BUILDING DESCRIPTION - <u>RESIDENTIAL</u>																																																							
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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>Sal Gorgone</u>		Print Name <u>Sal Gorgone</u>																																																							
Title/Company _____		Date <u>4/14/04</u>																																																							
Checks payable to: <u>DIRECTOR OF FINANCE OF HOWARD COUNTY</u> ** PLEASE WRITE NEATLY AND LEGIBLY ** FOR OFFICE USE ONLY																																																									
AGENCY <u>Land Development, DPZ</u>		PROPERTY ID# <u>60941</u>																																																							
DATE <u>4-14-04</u>		Filing fee \$ <u>100.00</u>																																																							
SIGNATURE APPROVAL <u>Karen Homan</u>		Permit fee \$ _____																																																							
Health <u>4-14-04</u>		Excise tax \$ _____																																																							
Fire Protection <u>4-14-04</u>		Add'l per. fee \$ _____																																																							
Departmental Approval required prior to issuance? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		TOTAL FEES \$ _____																																																							
CONTINGENCY CONSTRUCTION START <input type="checkbox"/>		Sub-total paid \$ _____																																																							
Distribution of Copies: _____		Balance due \$ _____																																																							
When Issued Official _____		Check # <u>4496</u>																																																							
Green: LDD, DPZ _____		Validation # <u>30404</u>																																																							
Yellow: DED, DPZ _____		Accepted by _____																																																							
Pink: Health _____																																																									
Gold: SHA _____																																																									
T: Form 100-1001 (Rev. 5/17/00)																																																									

on 4-14-04 KN Reviewed full-sized plan with Mr Gorgone  
Plan Design Layout is for 4 bedrooms (KN)

# FILE INQUIRY FORM

Property Address: 13831 Russel Zepp Dr.

2/24/05 Spoke w/ Boris, then

Mr. Gorgone. Needs to bring in wall  
check & check for septic permit.

Hole to be dug during layout to

pull system uphill. Mr Gorgone

informed me house raised 1'

& about 6-8" fill added to area  
in front of house, possibly in

SDA, KN

3-8-05 Spoke w/ engineer - will  
send wallcheck -





# Fredericktowne Labs Inc.

ENVIRONMENTAL TESTING

3020 Ventrie Court • P.O. BOX 245 • Myersville, MD 21773 • 800-332-3340 • FAX 301-293-2388  
 www.fredericktownelabs.com • info@fredericktownelabs.com

## Certificate of Analysis

Acct. No. 4771 - 1

### Field Record

Site visit performed on: Thursday, May 19, 2005 9:20 AM  
 by: John Straits State ID No. 4729JS  
 Affiliation: Fredericktowne Labs, Inc.  
 Property Owner: Sal Gorgone  
 Property Address: 13831 Russell Zepp Drive  
 Clarksville, MD  
 Sample Source: Bathroom Sink  
 Treatment Devices Noted: No Treatment Devices Present  
 Sample taken after treatment: No  
 Well No.: HO-94-3778  
 Field pH: 8.0  
 Res. Cl.: 0.0 mg/l

### Laboratory Report

Sample Received at laboratory: 5/19/05 2:00 PM

#### Bacteriological results:

<u>Total Colif. (/100ml)</u>	<u>E.coli. (/100ml)</u>	<u>Date/Time Analysis Started</u>	<u>Method</u>	<u>Analyst</u>
<1	<1	5/19/05 2:45 PM	9221B	KMW

Bacteriological analysis of this sample indicates the water is safe for human consumption.  
 Analysis was performed according to the 20th edition of Standard Methods

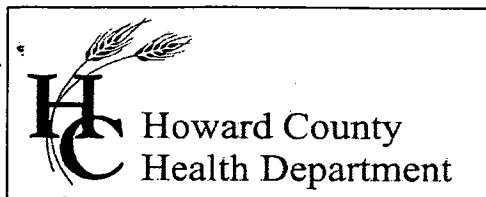
#### Inorganic Chemical results:

<u>Parameter</u>	<u>Result Units</u>	<u>MCL</u>	<u>Date of Analysis</u>	<u>Method</u>	<u>Analyst</u>
Turbidity	9.8 NTU'	10	5/19/05	180.1	SER
Nitrate-Nitrogen	2.4 mg/l	10	5/20/05	353.2	PH
Sand	<2 mg/l	5	5/20/05	0.065mm Filter	KMW

Verified by:

M. H. Wilson / gmp 5/23/05  
 Date

Fredericktowne Labs, Inc. is a State Certified Water Quality Laboratory



7178 Columbia Gateway Drive, Columbia Maryland 21046  
(410) 313-1771 Fax (410) 313-2648  
TDD (410) 313-2323 Toll Free 1-866-313-6300  
website: www.hchealth.org

Pennv E. Borenstein, M.D.. M.P.H.. Health Officer

May 31, 2005

Sal Gorgone  
18308 Powhatan Court  
Gaithersburg, MD 20877

SENT VIA FACSIMILE 301-990-7219

RE: Brierly, Lot 6  
13831 Russell Zepp Drive  
Clarksville, MD 21029  
BP #: B00146146  
Well Permit # HO-94-3778

Dear Sir:

-----This is to advise you that the septic system for the above referenced property has been installed and inspected. **Final approval of the septic system was granted on 03/28/2005. Final approval of the well line connection to the dwelling was approved on 05/25/2005.**

The water sample results indicate that the water samples submitted for testing were free of coliform and fecal coliform bacteria at the time of sampling and are bacteriologically safe for drinking. The water sample results were found to be in compliance with COMAR water quality standards.

#### INTERIM CERTIFICATE OF POTABILITY

This certifies that the initial sampling requirements of COMAR 26.04.04 "Well Regulations" have been met for the water supply system installed under well permit #HO-94-3778. Although the submitted sample results are in compliance with COMAR standards, the Health Department does not guarantee water supplies. Based upon satisfactory investigation and evaluation, the Howard County Health Department as authorized by the Maryland Department of the Environment accepts this well system as required by COMAR 26.04.04.

This certificate may become final upon completion of the second bacteriological test, which is to be taken by the county health department within six months of receipt of this letter. **Please contact (410) 313-1773 to schedule a final water sample appointment. Currently, there is no charge for this final sampling.**

Date of Water Samples: 05/19/2005  
Date of Well Completion: 09/16/2003

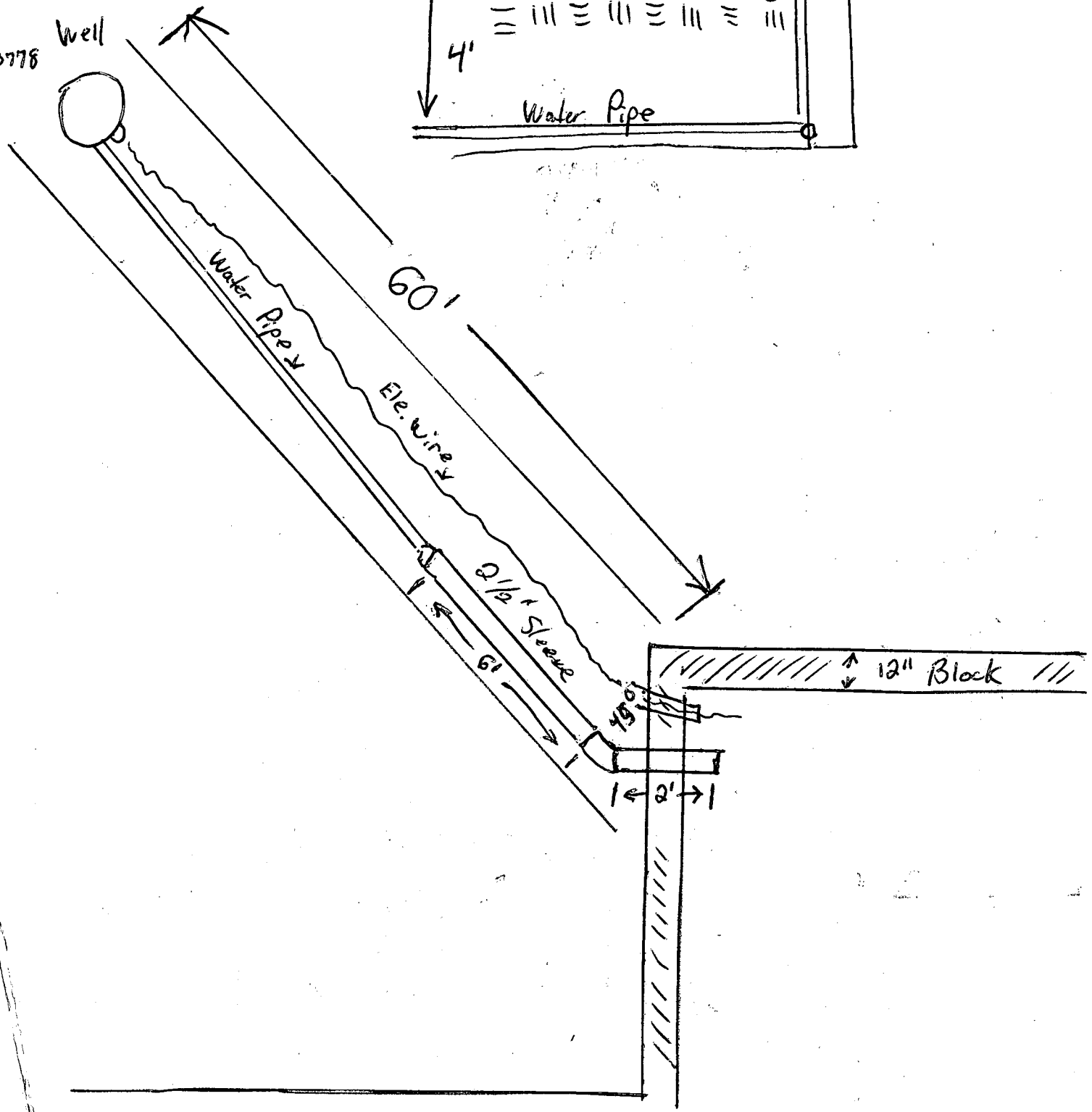
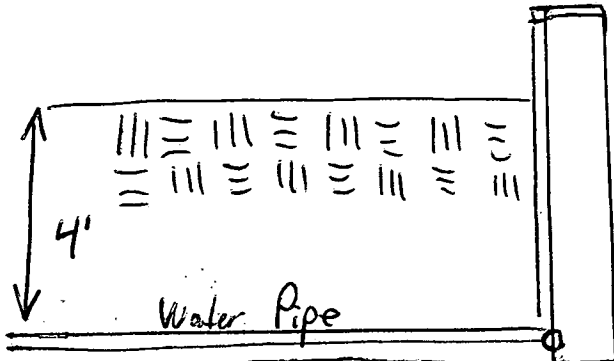
Approving Authority,

Stuart F. Oster, R. S.  
Well & Septic Program

cc: Building Inspector's Office  
Community Health Services  
File

# 40943778

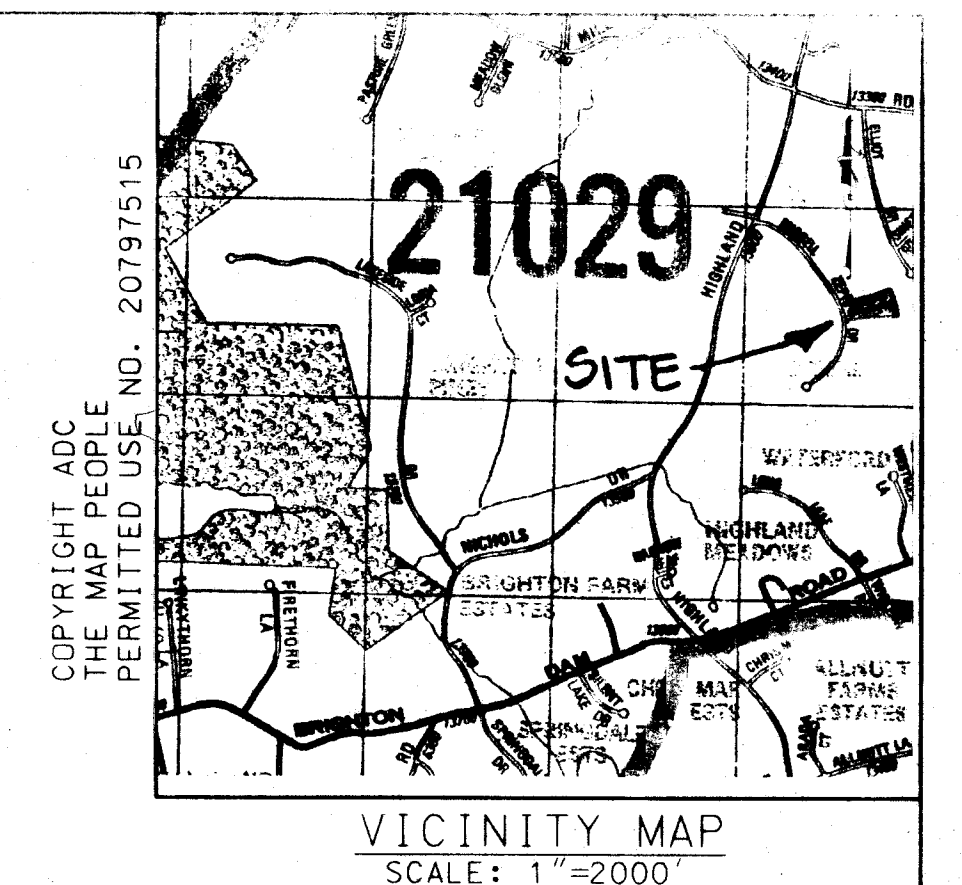
Well



**HICKS ENGINEERING CO., INC.**  
ENGINEERS, SURVEYORS & PLANNERS  
200 EAST JOPPA ROAD - SUITE 402  
TOWSON, MARYLAND 21286-3180  
(410) 484-0001

NO STATE PLANE GRID

LIMIT OF DISTURBANCE  
37,224.88 S.F. / 0.854 ACS. +/-



**SITE DATA**

TOTAL SITE AREA:	3.1165 AC
EXISTING ZONING:	RR-DEO
EXISTING USE:	VACANT
PROPOSED USE:	ONE-SINGLE FAMILY DWELLING
DEED REFERENCE:	4526/304
TAX ACCOUNT NO.:	05-414660
PLAT REFERENCE:	MDR No 10003 "BRIERLY"

**LEGEND**

---	EXISTING CONTOURS
---	PROPOSED CONTOURS
---	LIMIT OF DISTURBANCE (L.O.D.)
---	PROPERTY BOUNDARY
●	PERC TEST LOCATION
●	PERC TEST LOCATION

**FLOOD PLAIN NOTE**  
SUBJECT PROPERTY DOES NOT LIE WITHIN A FLOOD PLAIN. REFER TO FLOOD MAP.

**BENCHMARK**  
THIS PLAN IS BASED ON FIELD-RUN TOPOGRAPHY PERFORMED BY HICKS ENGINEERING COMPANY, INC. IN MARCH, 2004. REFER TO GEODETIC SURVEY CONTROL POINTS 0046 AND 288A PROVIDED BY THE HOWARD COUNTY DEPARTMENT OF PUBLIC WORKS.

**GP-04-85**

REVISIONS

DATE	DESCRIPTION	BY
1/9/05	SLAB ELEVATION AS-BUILT	HEC
4/20/04	REV. PER HO. CO. HEALTH DEPT. COMMENTS	HEC
4/15/04	REV. PER HO. CO. SOIL CONSERVATION DISTRICT	HEC

OWNER:

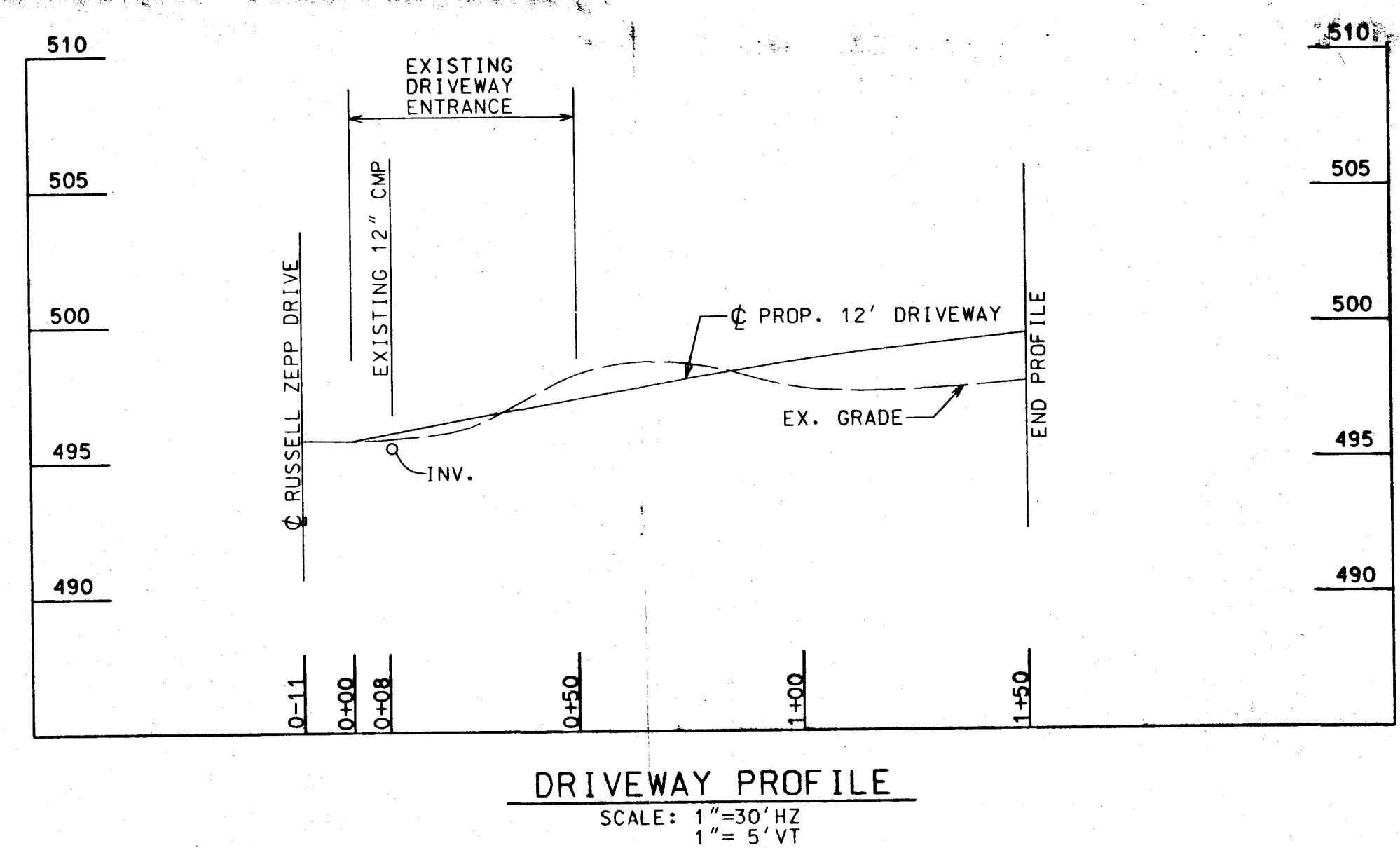
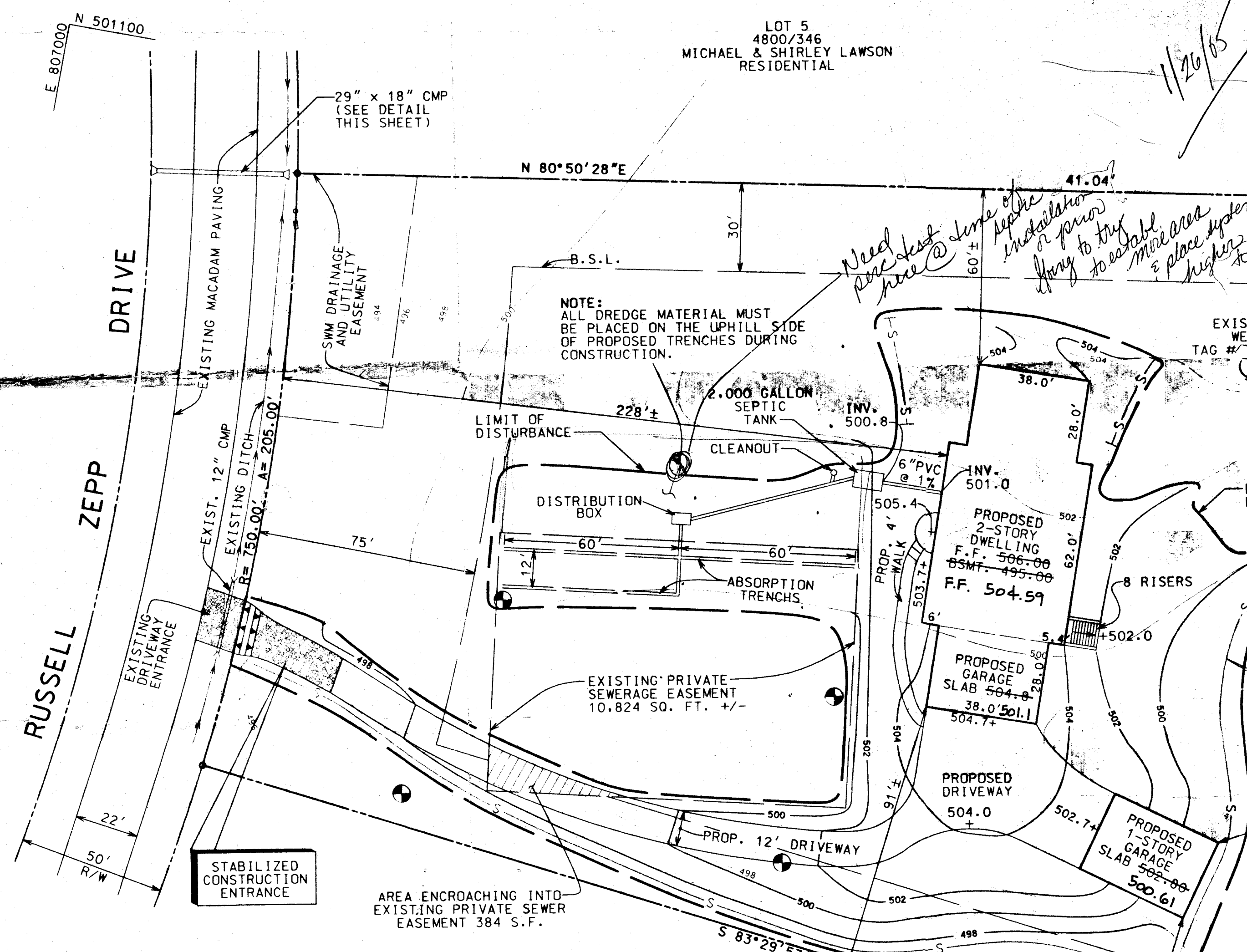
MR. & MRS. SALVATORE C. GORGONE  
18308 POWHATTAN COURT  
GAITHERSBURG, MD 20877  
301-446-2277

**HICKS ENGINEERING CO., INC.**  
ENGINEERS, SURVEYORS & PLANNERS  
200 EAST JOPPA ROAD, SUITE 102  
TOWSON, MARYLAND 21286-3150  
(410) 494-0001

**PROJECT TITLE:**  
GORGONE PROPERTY  
TAX MAP 34-GRID 3-PARCEL 7  
5TH ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND

**DRAWING TITLE:**  
SITE PLAN TO ACCOMPANY  
BUILDING PERMIT APPLICATION

JOB NO.:	21535	DRAWING NO.:	<b>C-1</b>
DRAWN BY:	JPM		
CHECKED BY:	PMN		
DATE:	APRIL 5, 2004		
SCALE:	1"=30'	SHEETS PER SET:	1 OF 2



**APPROVED: SOIL CONSERVATION SERVICE**  
REVIEW FOR HOWARD SCD AND MEETS TECHNICAL REQUIREMENTS.

*Jim Meyer* 4/21/04  
USDA-NATURAL RESOURCE CONSERVATION SERVICE

*John R. Robertson* 4/21/04  
HOWARD SOIL CONSERVATION DISTRICT

THIS DEVELOPMENT PLAN IS APPROVED FOR SOIL EROSION AND SEDIMENT CONTROL BY THE HOWARD SOIL CONSERVATION DISTRICT

2/3/05  
K.M. called  
engineer

REVISED  
Date: 1-21-05  
Comments: *div. change*

