

4/29/89

05-366860

5/02 { HOLD }
SEE BELOW

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

P 44609

A REPAIR

DISTRICT _____

DATE 6/28/89

DATE SYSTEM APPROVED _____

INSPECTOR _____

INDEXED

Jack Fyock

IS PERMITTED TO INSTALL _____ ALTER X

ADDRESS _____ PHONE 988-9270

SUBDIVISION _____ ROAD 4600 Ten Oaks Road LOT _____

PROPERTY OWNER Mr. Shumaker

ADDRESS 4600 Ten Oaks Road
Dayton, Maryland

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

GARBAGE GRINDER? YES _____ NO _____

SEPTIC TANK CAPACITY 1000 GALLONS NUMBER OF BEDROOMS 3

REPAIR - CALL FOR INSPECTION WHEN GROUND IS OPENED UP SO SANITARIAN CAN RECOMMEND REPAIR.

(NO INSP) TO SEND MR. WILLIAMS A DRAWING
ON THIS PER I.C.B.D. 5/02/89. LEFT PERMIT WITH
FYOCK'S MEN/C.W.

**BUILDING PERMIT SIGNED
AND RETURNED**

4/17/02
800 B5536-DARKROOM

PLANS APPROVED BY C. Williams

DATE 4/24/89

COVER NO WORK UNTIL INSPECTED AND APPROVED

C.B.D. saw 5/2/89

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 TRENCHES ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCHES)

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

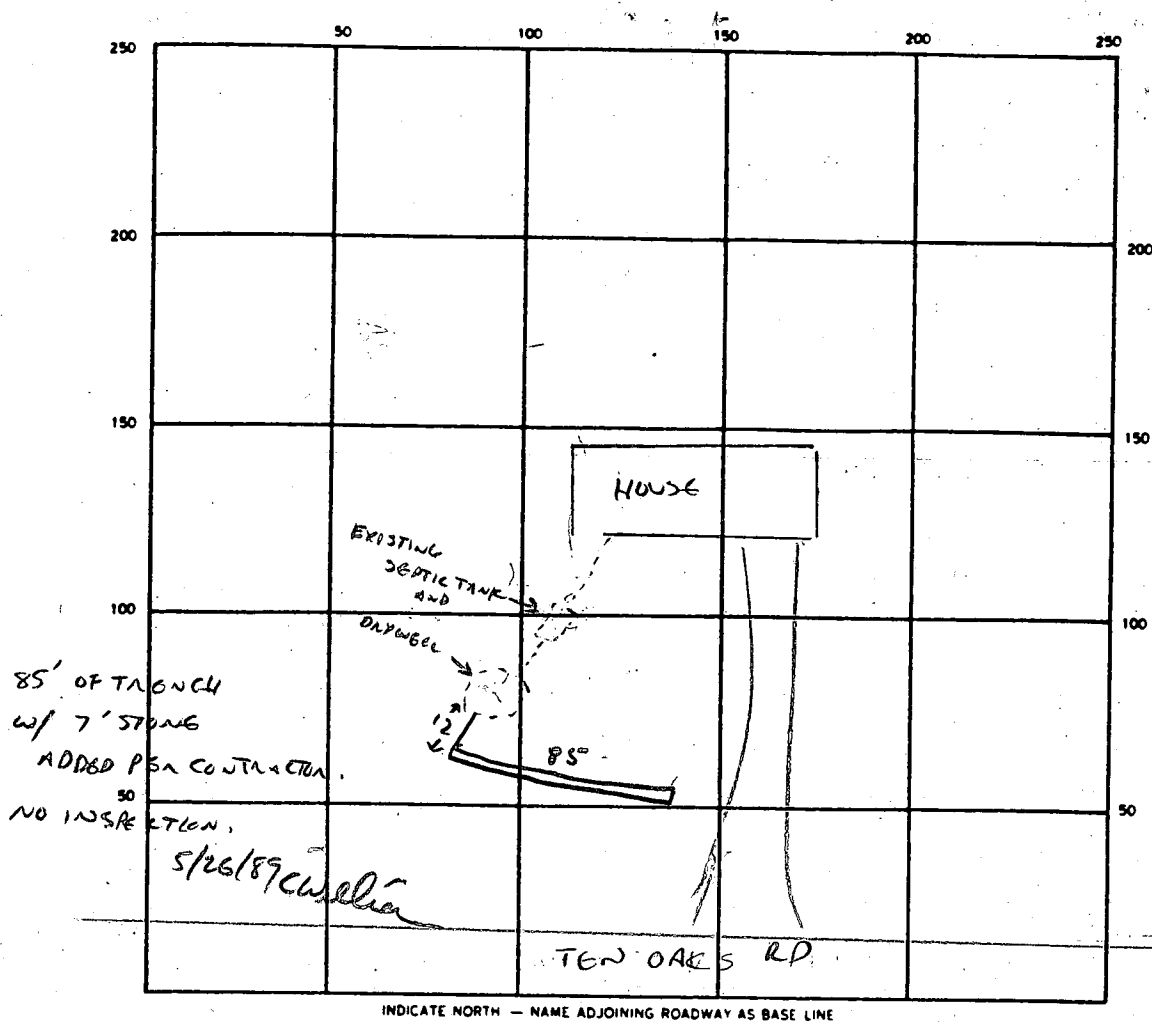
**BUILDING PERMIT SIGNED
AND RETURNED**

9/12/90
Serial #39576-garage

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

44609



SEPTIC TANK. LEVEL EXISTING **BUILDING PERMIT SIGNED** N/A

DISTRIBUTION BOX. LEVEL N/A **AND RETURNED**

DRAIN FIELD/TILE FIELD. DEPTH 11 FT. TRENCH WIDTH 2 FT. INLET DEPTH 4 FT.

EFFECTIVE GRAVEL DEPTH 7 FT. TOTAL LENGTH 85 FT.

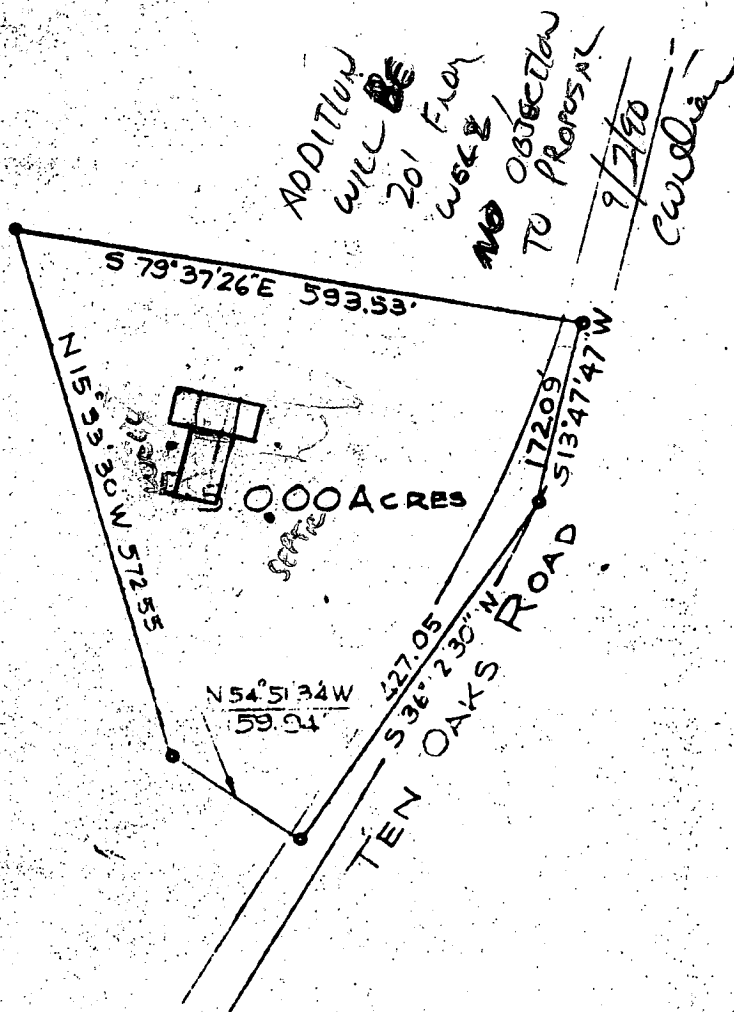
NUMBER OF TRENCHES 1 ONE SIDEWALL/BOTTOM AREA 595 SQ FT.

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

ABSORBENT AREA 595 + EXISTING SQ FT.

REMARKS APPROVAL GIVEN TO INSTALL SYSTEM w/o INSPECTION. INFO SUPPLIED BY
CONTRACTOR. 5/26/89 CW.

DATE SYSTEM APPROVED 5/26/89 INSPECTOR CW. Williams



PLAT OF SURVEY
FOR
ALLEN M. BROWN
FIFTH ELECTION DIST, HOWARD Co
DAYTON, MARYLAND
SCALE: 1 IN = 200 FT. JUNE 11, 1973

Claude M. Skinner Jr.

Claude M. Skinner Jr.
Reg. Professional Engineer &
Land Surveyor No. 2237

note: The lot shown hereon complies with the
minimum ownership and lot area as required
by the Maryland State Health Department.
approved: Private Water and Private Sewer

Palmer F. White

7-16-73

Howard County Health Officer

Claude M. Skinner Jr.

June 12, 1973

Building Address
4600 TEIJUNGS RD.
DUNSTON, MD. 21056

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

Census Tract 1510 Subdivision _____

Section _____ Area _____ Lot 12

Tax Map 28 Parcel 221 Grid 2

Zoning RR-DT Map Coordinates 4313 Lot size _____

Property Owner's Name
Steven Averbach

Address
4600 TEIJUNGS RD.

City Dayton State MD Zip Code _____

Home Phone (410) 591-5554 Work Phone (410) 591-3700

Applicant's Name & Mailing Address, (if other than stated hereon):
CHARLES P. TERPPE
4710 BUNKER AVENUE
DUNSTON, MD. 21056

Phone (410) 591-7012 Fax (410) 591-4186

Existing Use Unfinished Basement - SFD

Proposed Use FINISHED BASEMENT

Estimated Construction Cost \$ 23,450,000.00

Description of Work 1000 SODALITY ST. / 1200 JAMES ST.
ACACIA ST. 1000 SODALITY ST. 1200 JAMES ST.
TRAILER REPAIRS, ROOFING, (2) BATHROOMS,
DARKWOOD, WHITE OAK, STAINLESS STEEL

Contractor Company CHARLES P. TERPPE

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

License No. 24714

Phone _____ Fax _____

Occupant or Tenant _____

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

Utilities

Height: _____

No. of stories: _____

Gross area, sq. ft. per floor: _____

Use group: _____

Construction type:
Reinforced Concrete
Structural Steel
Masonry
Wood Frame
State Certified Modular

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

Utilities

SF Dwelling ☒ SF Townhouse ☐

Depth Width

1st floor: 30 70

2nd floor: 20 30

Basement: 70 70

Finished Basement ☐ Unfinished Basement ☒

Crawl space ☐ Slab on Grade ☐

No. of Bedrooms 4

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

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 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.

Applicant's Signature
OWNER T/A NETWORKS

Title/Company

Print Name
CHARLES P. TERPPE

Date
4/15/02

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

AGENCY
and Development DPZ

DATE
4/15/02

SIGNATURE APPROVAL
M. RPK

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 New Town Zone _____

SDP/Red-line approval date _____

PROPERTY ID#

Filing fee \$ 25

Permit fee \$ 13

Excise tax \$

Add'l per. fee \$

TOTAL FEES \$ 38

Sub-total paid \$

Balance due \$

Check \$

Validation \$

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

CONTINGENT CONSTRUCTION START: ☐

ONE STOP SHOP: ☐

Distribution of Copies

White: Building Official

Green: LDD, DPZ

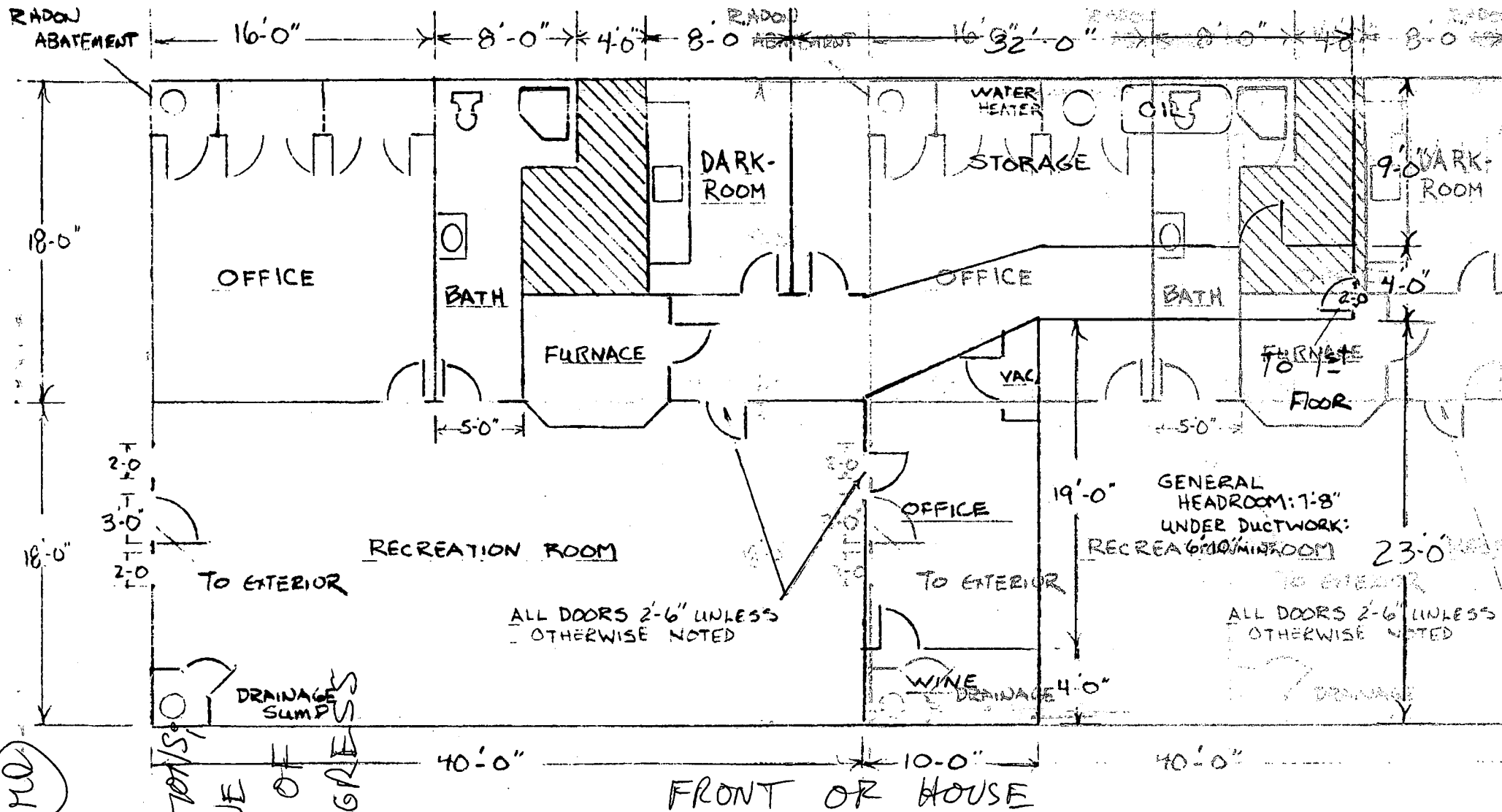
Yellow: DED, DPZ

Pink: Health

Gold: SHA

Rev: 5/17/00

wooden shed 1-3 on lot 1100



AUERBACH BASEMENT PLAN

AUERBACH BASEMENT

4/7/02
OK FOR
INTERIOR
ALTERATIONS,
NO BR DUE
TO LACK OF
EMERG. EGRESSES