1-27-99
C.O. 10:30 or 11:00

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

05-425360

P 511358

A 45760-C

DISTRICT

DATE 1/20/99

DATE SYSTEM APPROVED 1/27/99

INSPECTOR DKS

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
~~XXXXXXX~~ 410-313-2640

INDEXED

Van Sant Plumbing & Heating IS PERMITTED TO INSTALL X ALTER

ADDRESS 3 North Main Street Mt. Airy, MD 21771 PHONE 410-795-6566

SUBDIVISION Cashmark LOT 3 ROAD 7582 Sanner Road

PROPERTY OWNER Hamilton Reed

ADDRESS

BUILDING PERMIT SIGNED AND RETURNED

SEPTIC TANK CAPACITY 1250 GALLONS 5-5-04-B001417940-DECK

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

TRENCHES - Trench to be 3 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 5 feet below original grade. Effective area begins at 3 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Beginning from the intersection of the 174.32' and 157.92' lot lines, begin trenches 95 feet up the 157.92' lot line and 75 feet off that same lot line. Run trenches on contour toward the 412.71' lot line.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 11/5/98 DKS

PLANS APROVED BY Amy McMillen DATE 10-22-98

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

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.

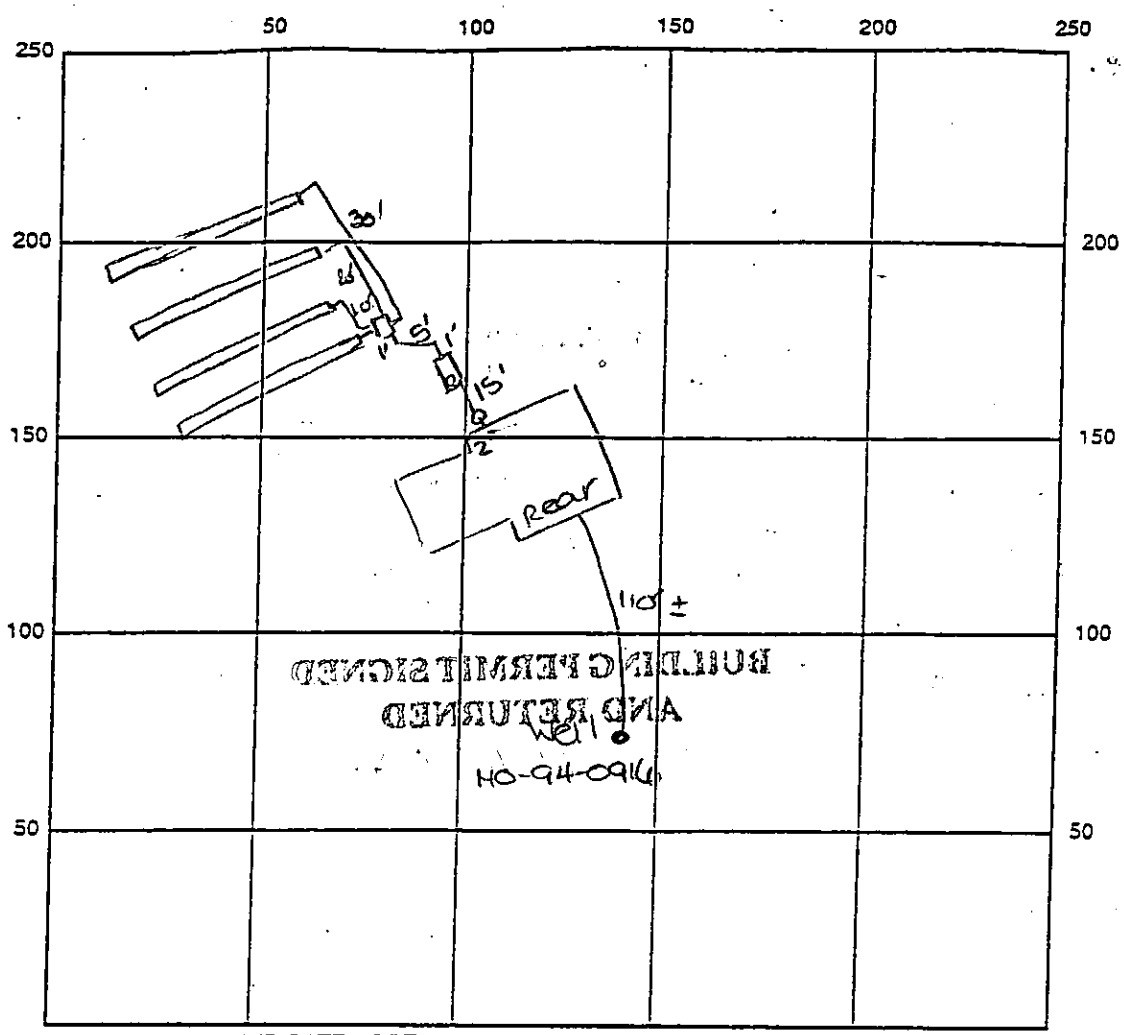
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

HD-260(6-90)

A 45760-C



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

Sanner Road

SEPTIC TANK LEVEL OK - 1250 gal CLEANOUTS one at house, one on sit.

DISTRIBUTION BOX LEVEL OK - baffle in

DRAIN FIELD/TITLE DEPTH 5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 4x60 FT. → 240

NUMBER OF TRENCHES 4 ONE SIDEWALL/BOTTOM AREA 720 SQ. FT.

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

ABSORBENT AREA — SQ. FT.

REMARKS: 1/27/99 FINAL INSP - OK to cover all work. DCS

DATE SYSTEM APPROVED 1/27/99 INSPECTOR [signature]

5/4/90
10.00

APPLICATION

A 45760

PERCOLATION TESTING

P

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

PROVIDED OK
TEST CIRCLED HOLES
OTHERS AS NECESSARY
DEPENDENDING UPON SOIL CONDITIONS.

DISTRICT

DATE 4/3/90

STANDARD STRIP RETAIL CENTER, NO FAST FOOD.
RE-ZONING PENDING

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 ~~JOHN CASHMACK & DAVID PATTON~~ Hamilton Reed

ADDRESS C/O JOHNS HOPKINS PLAZA ASSOCIATES PHONE ~~461-5482~~ 740-2100
ATTN: JOHN REUNER

PROSPECTIVE BUYER

ADDRESS 10505 HICKORY RIDGE ROAD PHONE
COLUMBIA, MD. 21046

PROPERTY LOCATION:

SUBDIVISION COMMERCIAL SITE LOT NO. —

ROAD AND DESCRIPTION CORNER OF JOHNS HOPKINS ROAD AND SANNER RD.
NORTH OF JOHNS HOPKINS, ~~WEST OF~~ 750± SANNER Road

TAX MAP 41 PARCEL # 121 BLDG. PERMIT SIGNED AND RETURNED 10-22-~~88~~ 45,000 SQ FT POTENTIAL SEPTIC AREA

SIZE OF LOT APP. 5 ACRES Build # B011443 TYPE BLDG COMMERCIAL
SFD-4Bm (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. John C. Reu 3/29/89
(SIGNATURE OF APPLICANT)

APPROVED BY FOR DATE

REJECTED BY FOR DATE

HOLD PENDING FURTHER TESTS DATE

REASONS FOR REJECTION OR HOLDING 5/7/90 PERC OK - HOLD FOR PLAT MR

* ORIGINAL PERC NOTES IN LOT 1 PROPERTY FILE *

HD-216

THIS IS NOT A PERMIT

(P1/3)

A 45760

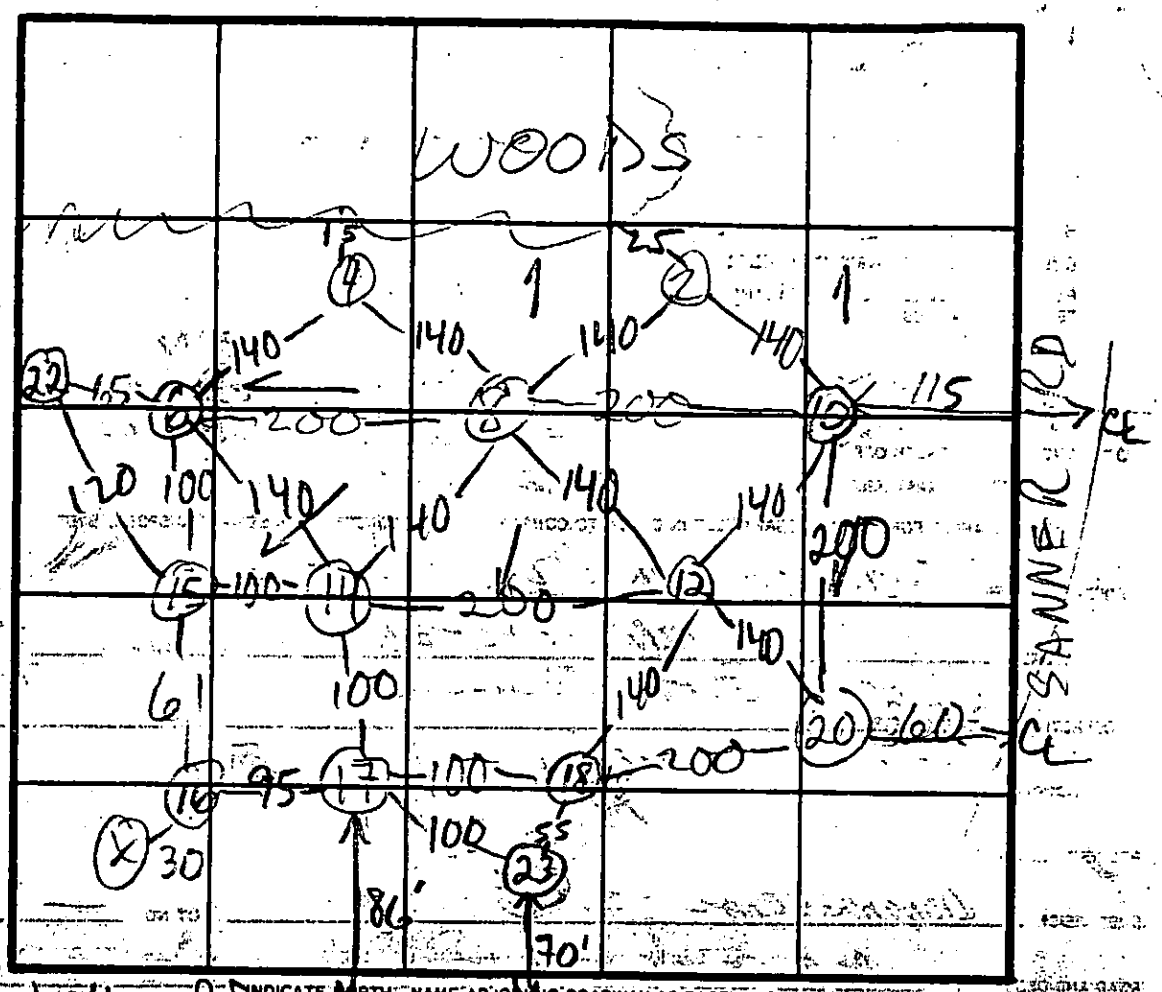
(18)

SOIL PROFILE

0	tan + org clay + clay loam
5	org + brn silty sand loam 5% frags hi mica SOME MOTTLES at 12'
12	

(20)

	org + yel clay + clay loam
1½	pink
6	org sand loam <5% frags hi mica
11½	



INDICATE NORTH · NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
5/14/80	18 S	7	10:55	11:01	11:01	11:14	13
	18 V	12	see	profile			
	12 S	5½	11:09	11:24	11:24	11:47	23
	12 V	11½	sim to 18		bright org sand loam		NO MOTTLE
	20 S	5½	11:11	11:16	11:16	11:22	6
	20 V	11½	see	profile			
	10 S	6½	11:30	11:35	11:35	11:45	10 EST
	10 V	12	sim to	20 more org	sand loam		
	25	7	11:32	11:37	11:37	11:47	10 EST
	2 V	12½	sim to	20	see profile		

REMARKS ALL HOLES DUG PER PLAT EXC. (16) (22) + (23)

TYPE OF SOIL

TESTED BY M. Ripkin ALSO PRESENT OK + Dad

(p2/3) A45760

(4)

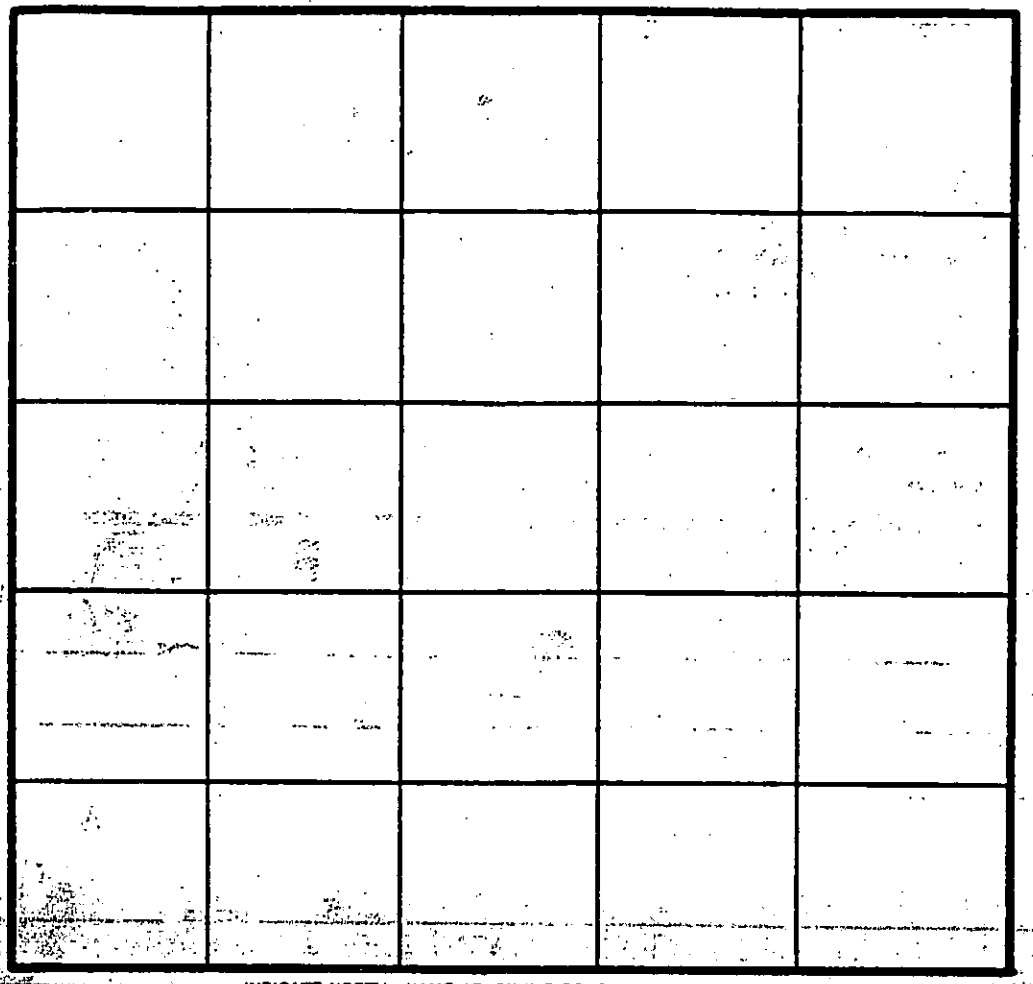
SOIL PROFILE

org clay

5½"

org, tan yel, beige sand loam - 5~~15~~% frags liquartz ↓ mica

12" rotten rocks ↑ w/depth



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
5/4/90	8 S	6	11:58	12:05	12:05	12:13	8 EST
		9	11:58+	12:05	12:05	12:14	9 EST
	8 V	12	sim to 18	more org	w/dec		NO MOTTLES composing rx
	4 S	7	12:07	12:06	12:06	12:11	5
	4 V	12	see profile				
	14 S	7	12:19	12:21	12:21	12:25	4
	14 V	12½	sim to 18		some sc shallow	attered rx at depths	more firm
	6 S	6½	12:29	12:33	12:33	12:43	10
	6 V	13½	sim to 18		MOTTLES	more firm	
	15	7	12:47	FAIL NO PERC			
	15	12	sim to 18		clay to 6-7"		

REMARKS

TYPE OF SOIL

TESTED BY

ALSO PRESENT

(P3/3) A45760

(24)

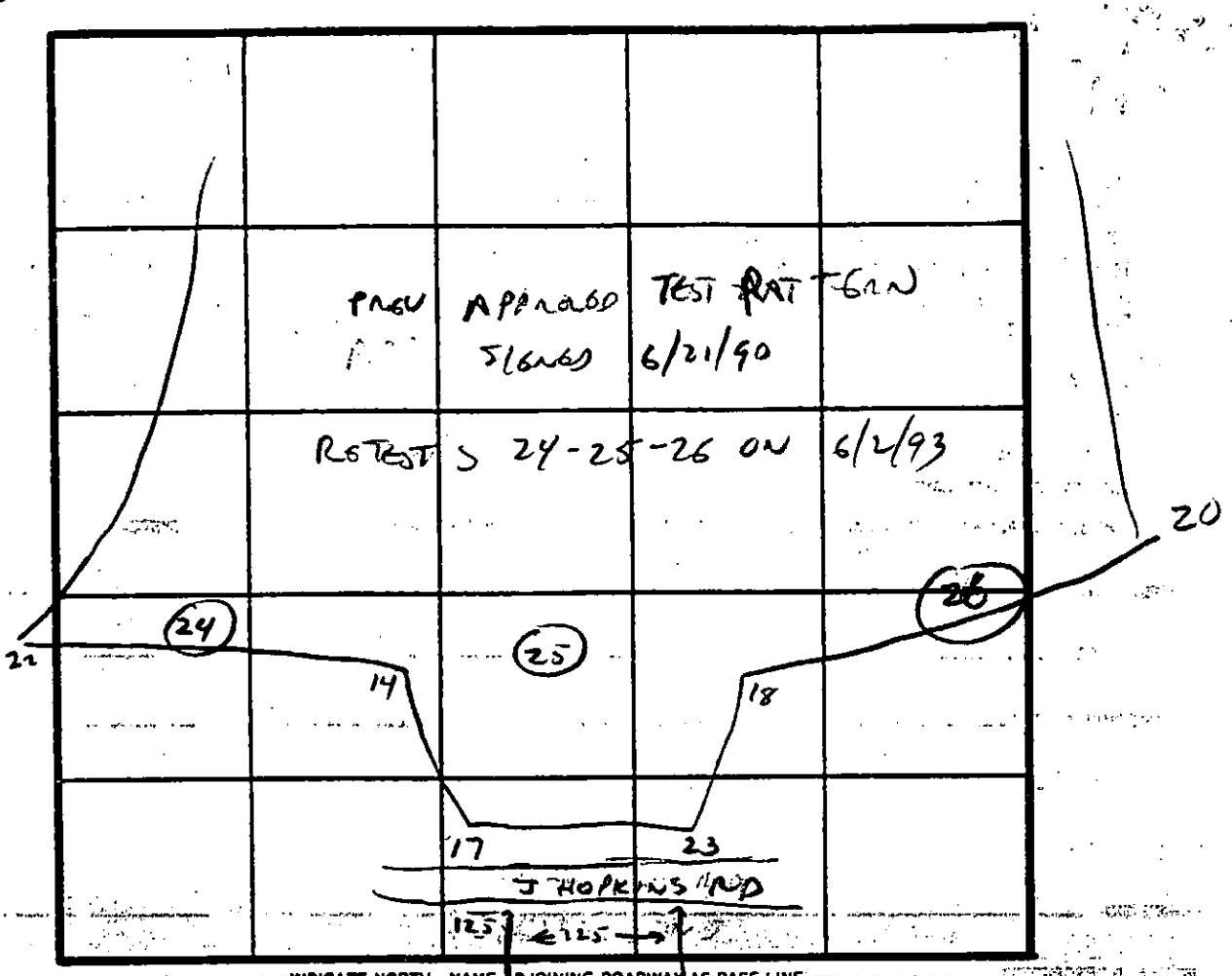
SOIL PROFILE

0 CLAY COMP

3 — 11" PATCHY COMP

MAGGLED COLOR

13 — WATER



(25) + (26)

0 CLAY COMP

4 — ORANGE COMP "CONSISTENT"

14' — GRAY BOTTOM

"POTENTIAL" WATER TABLE

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
5/4/90	16 V	3	ALL	ROCK		FAIL	
	22 V	11	sim to	4			
	17 V	1/4	DRY	OK sim to	18 clay to	6	6½
	23 V	12½	DRY	sim to (4)	clay to	5-6	NO MOTT SEE
6/2/93	24						
		VIS	OK 3-13'	WATER AT 13'	AFTER 2 HRS		3 LOW HOLES ON CASHM. "PROPER CONFIR- M. GOOD.
	25						
		VIS OK 4-14'		NO WATER AFTER 2 HRS			
	26	VIS OK 4-14'		POTENTIAL WATER AT 14'			

6/2/93 C.

(27)

CLAY 4' MOTTLED 8 WATER

(28)

CLAY 4 COMP 10 LTLY MOTTLED 13 WATER

REMARKS 27, 28 } INFORMAL EVALUATION FOR POTENTIAL FUTURE USE #27 FAILS-WATER; #28 LIKELY OK 4-10'

TYPE OF SOIL (POTENTIAL 10,000-20,000 SQUARE FT AT HIGHEST GROUND, SOUTH SIDE J HOPKINS R

TESTED BY C Wellman (HOLES 24-28) ALSO PRESENT OK, JR, MARK REICH

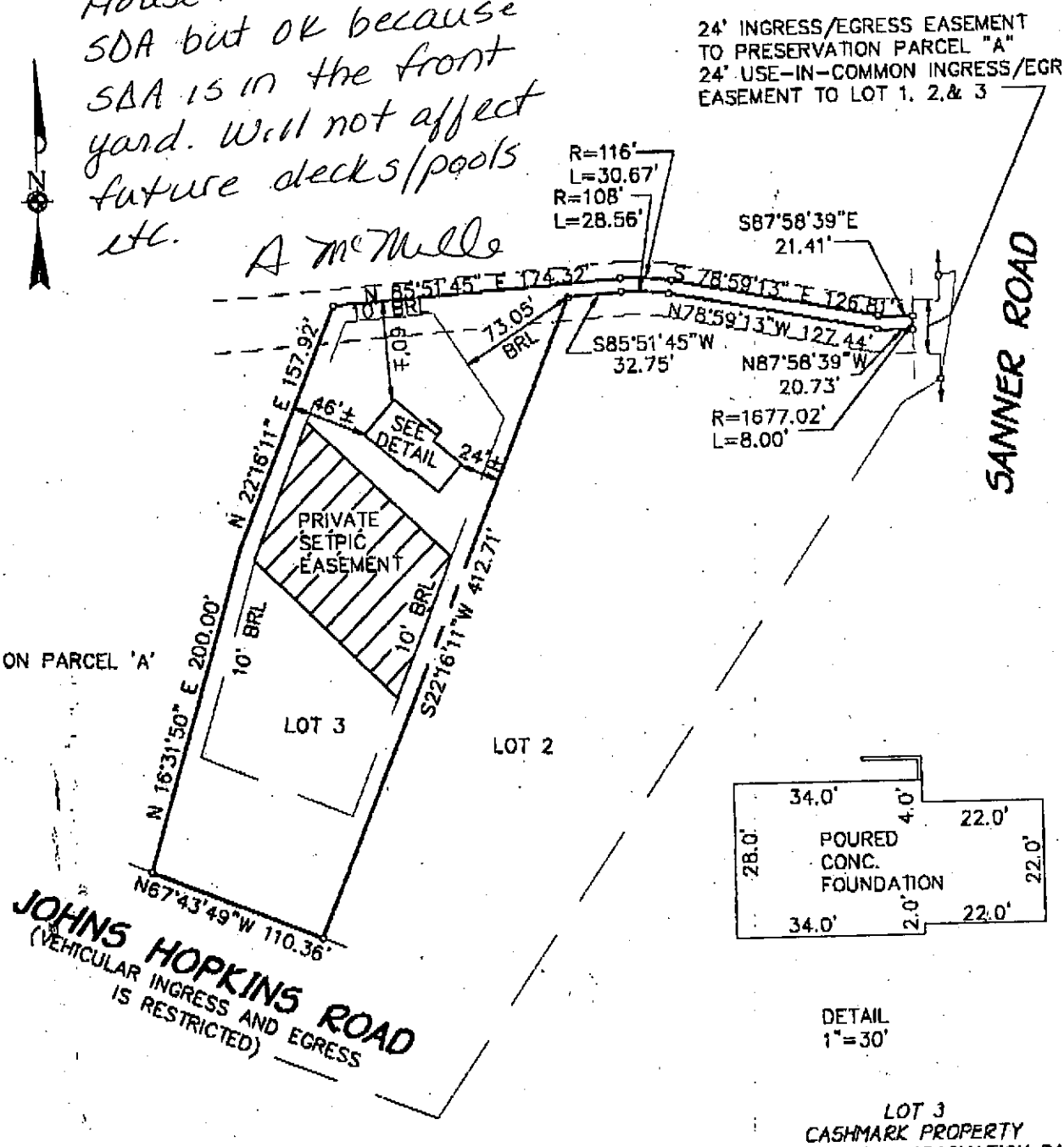
GENERAL NOTES:

1) THIS PLAT IS PREPARED FOR THE BENEFIT OF THE CLIENT SIGNING THE HOUSE LOCATION SURVEY APPROVAL FORM INSOFAR AS IT IS REQUIRED BY A LENDER OR TITLE INSURANCE COMPANY OR ITS AGENTS IN CONNECTION WITH THE CONTEMPLATED TRANSFER, FINANCING OR RE-FINANCING. UNLESS INDICATED AS BEING A BOUNDARY SURVEY, THIS PLAT IS NOT INTENDED FOR USE IN THE ESTABLISHMENT OF PROPERTY LINES AND IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATIONS OF FENCES, GARAGES, BUILDINGS OR OTHER EXISTING OR FUTURE IMPROVEMENTS. AS A RESULT, THIS PLAT DOES NOT PROVIDE FOR ACCURATE IDENTIFICATION OF PROPERTY LINE, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING OR RE-FINANCING.

2) SUBJECT PROPERTY IS SHOWN IN ZONE C ON THE NATIONAL FLOOD INSURANCE PROGRAM FLOOD INSURANCE RATE MAP OF HOWARD COUNTY, MARYLAND, COMMUNITY PANEL No. 240044 0030 B, EFFECTIVE DATE: DEC. 4, 1986.

3) THE OFFSETS FROM BUILDING LINE TO PROPERTY LINE AS SHOWN ON THE PLAT HEREON ARE TO AN ACCURACY OF 1' PLUS OR MINUS (±).

1/20/99
House moved closer to SDA but OK because SDA is in the front yard. Will not affect future decks/pools etc.
A McMullen



DETAIL
1"=30'

LOT 3
CASHMARK PROPERTY
LOTS 1 THRU 3 & PRESERVATION PARCEL 'A'
5th ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
PLAT REF.: 12405

TOP OF FOUNDATION ELEV. 432.7'±
BRL=BUILDING RESTRICTION LINE

FISHER, COLLINS & CARTER, INC.
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS
CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE
ELLICOTT CITY, MARYLAND 21042
(410) 461 - 2855

FCC *

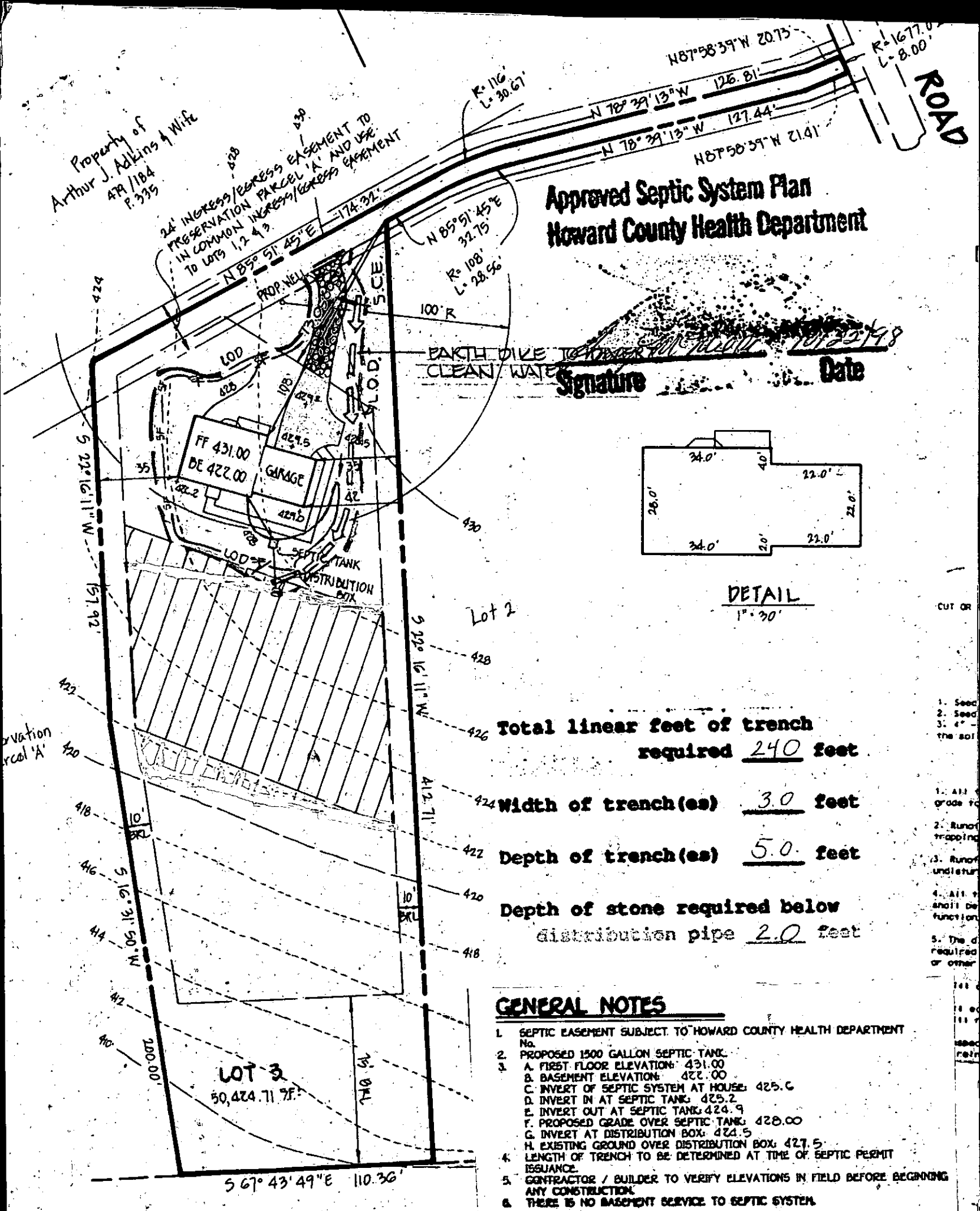
STATE OF MARYLAND
MARK L ROBEL
NO. 339
REGISTERED
PROPERTY LINE SURVEYOR

Mark L. Robel 11/24/98
PROFESSIONAL LAND SURVEYOR DATE
REG. # 339

HOUSE LOCATION DRAWING

FOUNDATION LOCATION: 11/23/98
FINAL LOCATION: _____
BOUNDARY SURVEY: _____

SCALE: 1"=100'
DATE: 11/24/98
DRAWN BY: T.P.F.
CHECKED BY: M.R.L.
PROJECT No.: 61283



Approved Septic System Plan
Howard County Health Department

10/22/98
Signature Date

Total linear feet of trench required 240 **feet**

Width of trench(es) 3.0 **feet**

Depth of trench(es) 5.0 **feet**

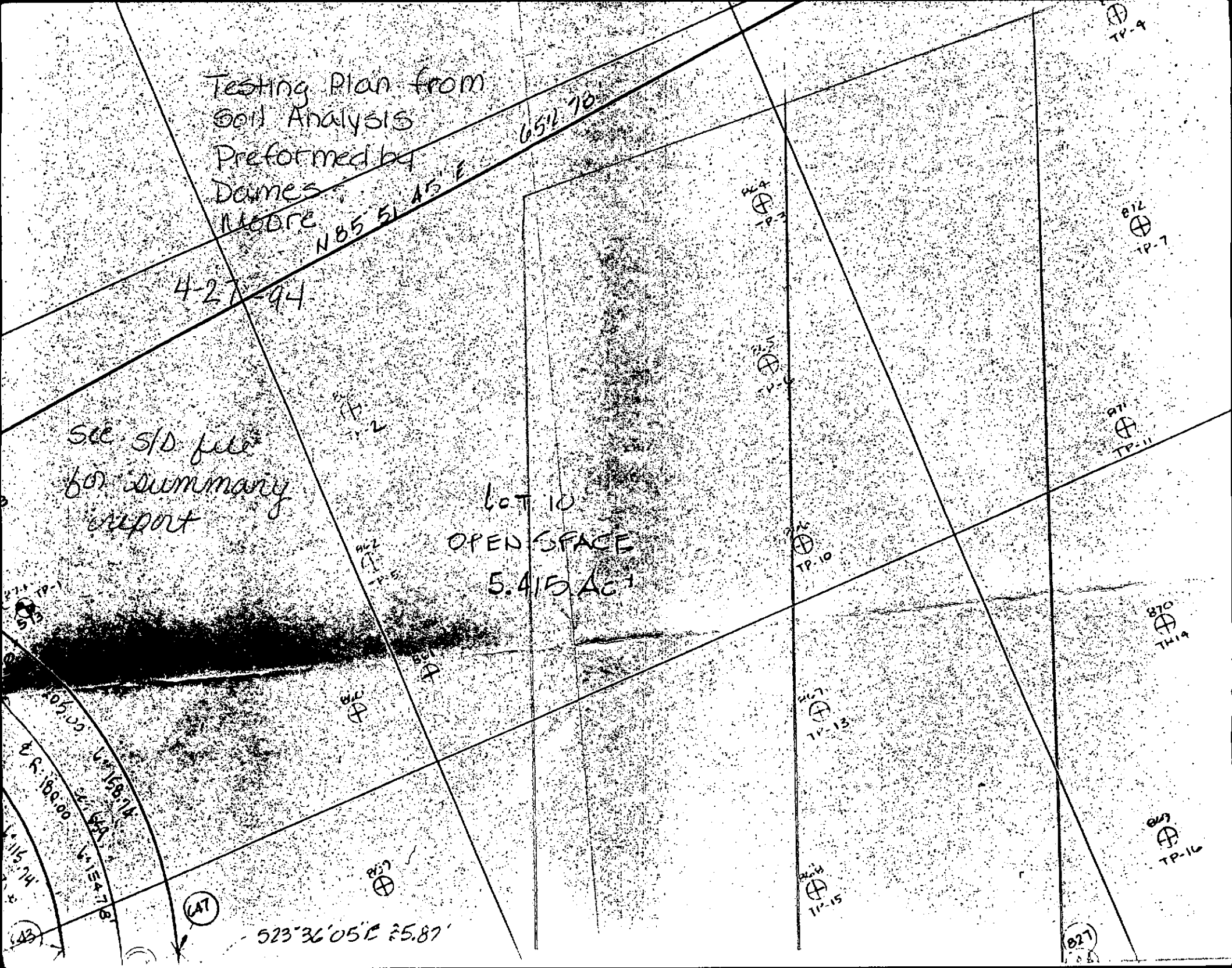
Depth of stone required below distribution pipe 2.0 feet

GENERAL NOTES

1. SEPTIC EASEMENT SUBJECT TO HOWARD COUNTY HEALTH DEPARTMENT No.
2. PROPOSED 1500 GALLON SEPTIC TANK.
3. A. FIRST FLOOR ELEVATION: 431.00
   B. BASEMENT ELEVATION: 422.00
   C. INVERT OF SEPTIC SYSTEM AT HOUSE: 425.6
   D. INVERT IN AT SEPTIC TANK: 425.2
   E. INVERT OUT AT SEPTIC TANK: 424.9
   F. PROPOSED GRADE OVER SEPTIC TANK: 428.00
   G. INVERT AT DISTRIBUTION BOX: 424.5
   H. EXISTING GROUND OVER DISTRIBUTION BOX: 427.5
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.
6. THERE IS NO BASEMENT SERVICE TO SEPTIC SYSTEM.

JOHN'S HOPKINS ROA

PLAN TO


Testing Plan from
Soil Analysis
Preformed by
Dames
Moore
4-27-94
N85°51'45"E
65.12'
See S/D file
for summary
report
LOT 10
OPEN SPACE
5.415 AC±
TP-1
TP-2
TP-3
TP-5
TP-7
TP-9
TP-10
TP-11
TP-13
TP-15
TP-16
TH19
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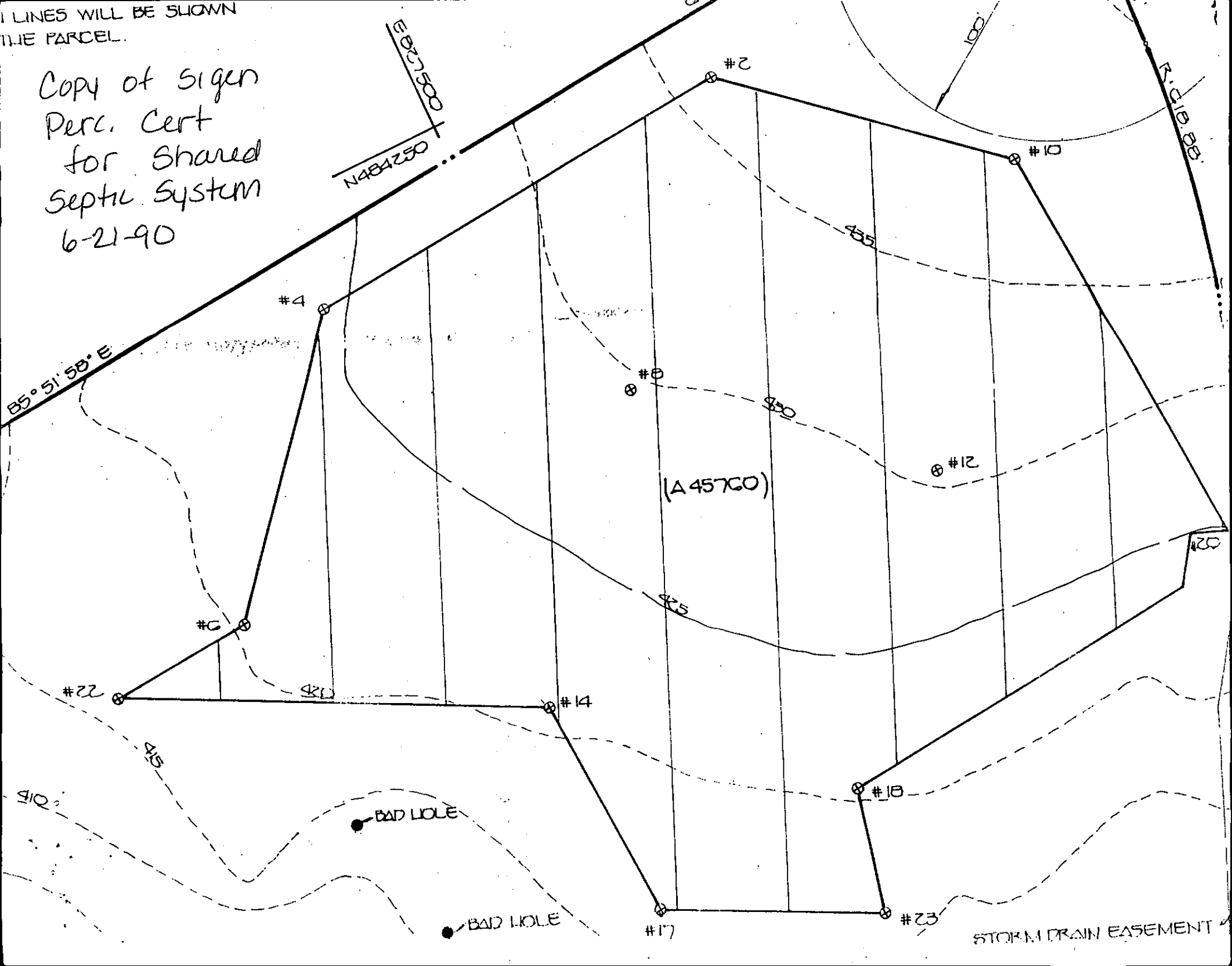
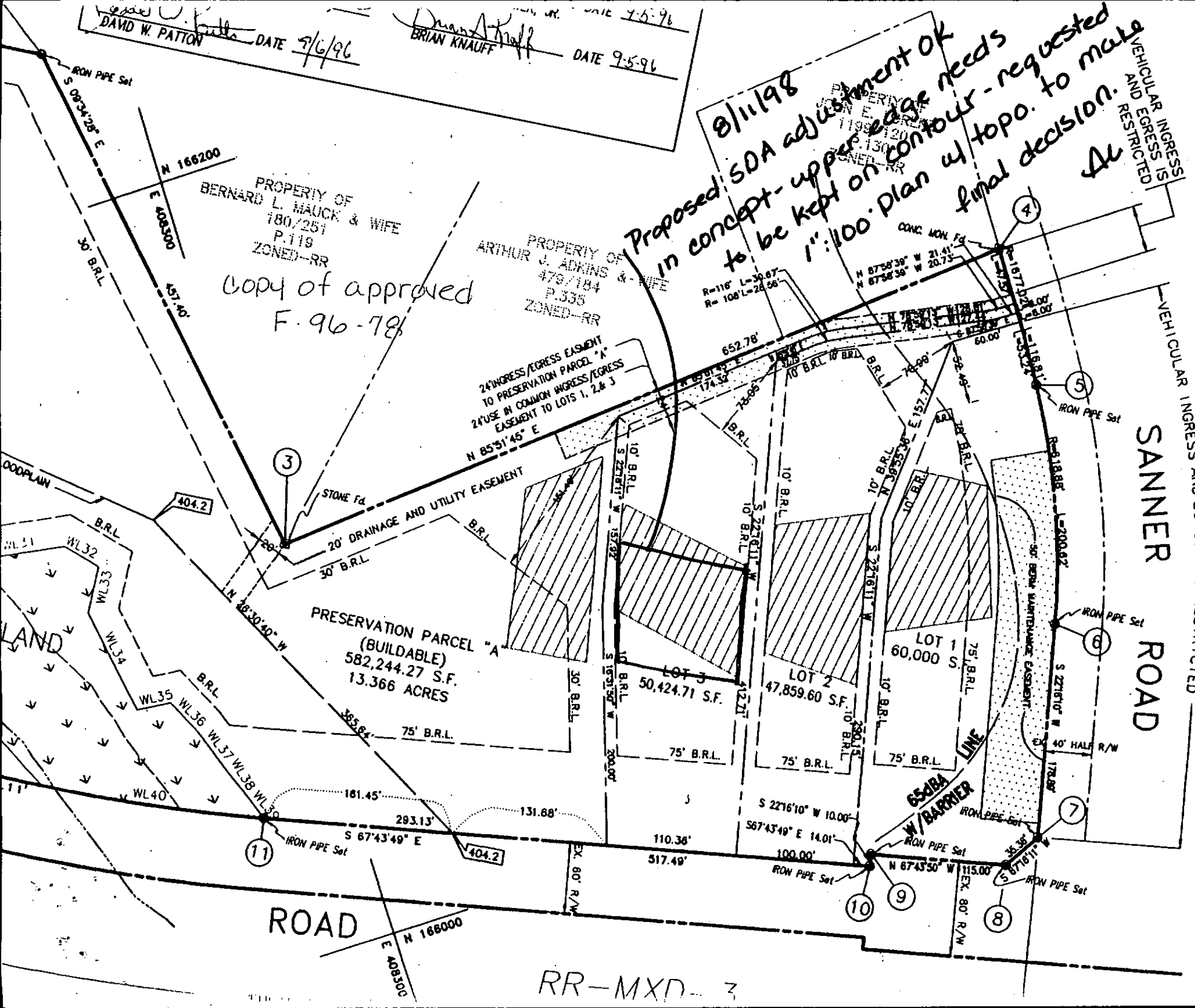
B-1000
S23°36'05"E 25.87'
L=115.74'
R=180.00'
L=158.14'
L=154.78'
(43)
(47)

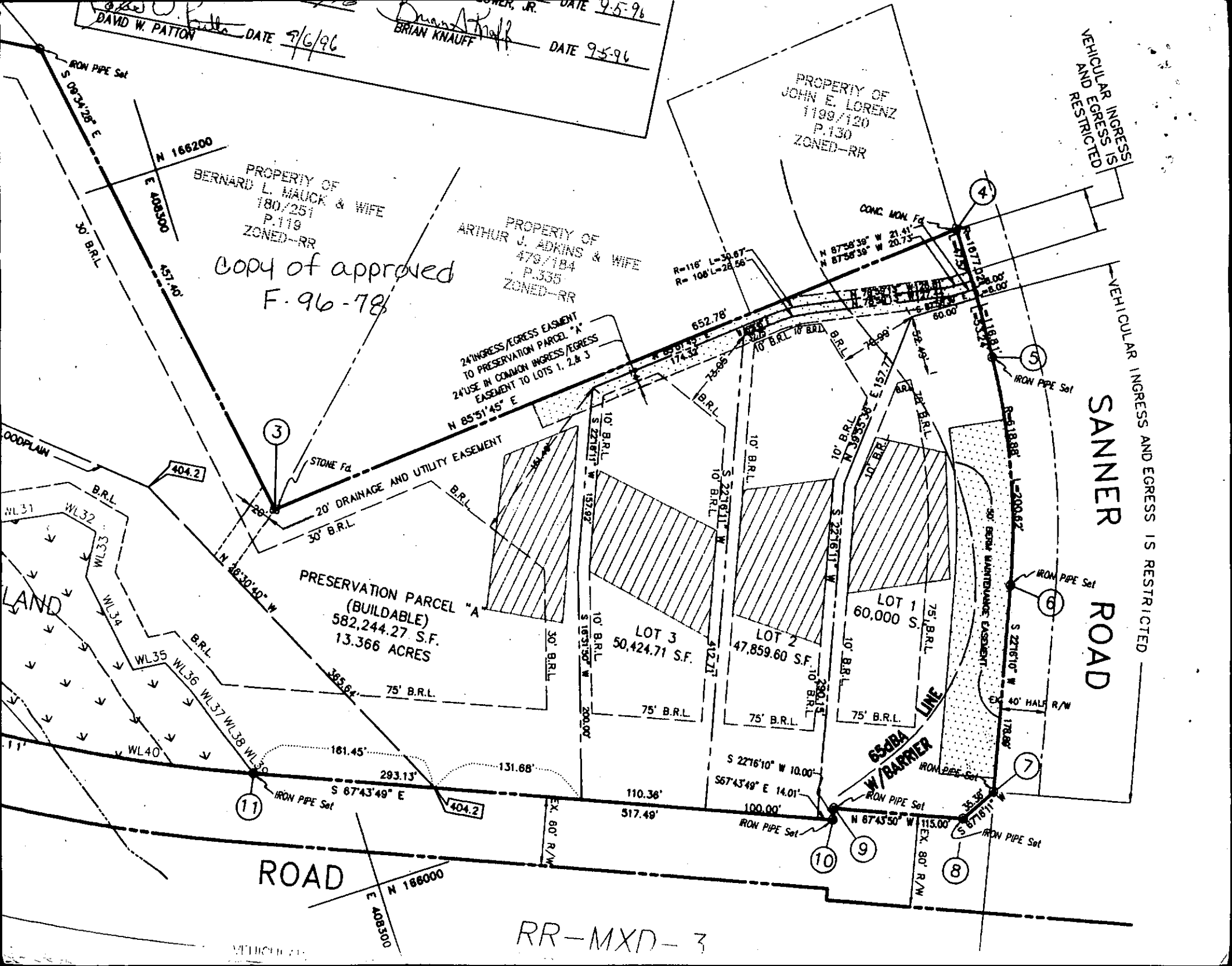
I LINES WILL BE SHOWN
THE PARCEL.

Copy of Sigen
Perc. Cert
for Shared
Septic System
6-21-90



Copy of Signed
Percolation Certification
Plan
12-1-95


DAVID W. PATTON DATE 9/6/96
BRIAN KNAUFF DATE 9-5-96
8/11/98
Proposed SDA adjustment OK in concept - upper edge needs to be kept on contour - requested 1":100' plan w/ topo. to make final decision.
VEHICULAR INGRESS AND EGRESS IS RESTRICTED
PROPERTY OF BERNARD L. MAUCK & WIFE 180/251 P.119 ZONED-RR
Copy of approved F.96-78
PROPERTY OF ARTHUR J. ADKINS & WIFE 479/184 P.335 ZONED-RR
PROPERTY OF JOHN E. [illegible] 1199/120 P.130 ZONED-RR
IRON PIPE Set
S 09°34'28" E
457.40'
N 166200
E 408300
30' B.R.L.
24' INGRESS/EGRESS EASEMENT TO PRESERVATION PARCEL "A"
24' USE IN COMMON INGRESS/EGRESS EASEMENT TO LOTS 1, 2 & 3
N 85°51'45" E
652.78'
174.52'
20' DRAINAGE AND UTILITY EASEMENT
STONE Fd.
N 16°30'40" W
385.84'
PRESERVATION PARCEL "A"
(BUILDABLE)
582,244.27 S.F.
13.366 ACRES
LOT 3
50,424.71 S.F.
LOT 2
47,859.60 S.F.
LOT 1
60,000 S.F.
75' B.R.L.
10' B.R.L.
S 22°16'11" W
157.27'
S 22°16'10" W
178.88'
SANNER ROAD
50' BERM MAINTENANCE EASEMENT
EX. 40' HALF R/W
65dBA W/BARRIER LINE
S 22°16'10" W 10.00'
S67°43'49" E 14.01'
100.00'
N 67°43'50" W 115.00'
S 67°16'11" W 35.36'
IRON PIPE Set
WL31 WL32 WL33 WL34 WL35 WL36 WL37 WL38 WL39 WL40
161.45'
131.68'
293.13'
S 67°43'49" E
110.36'
517.49'
404.2
EX. 60' R/W
ROAD
N 166000
E 408300
RR-MXD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ZONED-RR
PROPERTY OF
JOHN E. LORENZ
1199/120
P.130
ZONED-RR
VEHICULAR INGRESS AND EGRESS IS RESTRICTED
CONC. MON. Fd.
N 87°58'39" W 21.41'
N 87°58'39" W 20.73'
R=116' L=30.67'
R=108' L=28.56'
652.78'
24' INGRESS/EGRESS EASEMENT TO PRESERVATION PARCEL "A"
24' USE IN COMMON INGRESS/EGRESS EASEMENT TO LOTS 1, 2 & 3
N 85°51'45" E
174.32'
20' DRAINAGE AND UTILITY EASEMENT
STONE Fd.
N 46°30'40" W
404.2
FLOODPLAIN
WL31
WL32
WL33
WL34
WL35
WL36
WL37
WL38
WL39
WL40
B.R.L.
PRESERVATION PARCEL "A"
(BUILDABLE)
582,244.27 S.F.
13.366 ACRES
LOT 3
50,424.71 S.F.
LOT 2
47,859.60 S.F.
LOT 1
60,000 S.F.
10' B.R.L.
75' B.R.L.
30' B.R.L.
S 22°16'11" W 157.92'
S 16°31'30" W 200.00'
S 22°16'11" W 412.77'
S 22°16'11" W 230.13'
N 56°35'38" E 152.77'
R=618.88' L=200.62'
50' BGE&I MAINTENANCE EASEMENT
IRON PIPE Set
S 22°16'10" W
EX. 40' HALF R/W
178.89'
65dBA W/BARRIER LINE
S 22°16'10" W 10.00'
S 67°43'49" E 14.01'
N 67°43'50" W 115.00'
S 67°16'11" W 35.38'
EX. 80' R/W
161.45'
131.68'
293.13'
S 67°43'49" E
110.36'
517.49'
100.00'
EX. 60' R/W
N 166000
E 408300
ROAD
SANNER ROAD
RR-MXD-3
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STATE USE INDUSTRIES
JESSUP, MD 20794

EMERGENCY/TEMP NO. IF ANY

B | 1 | 7 - 8261 | SEQUENCE NO. (MDE USE ONLY)
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
PERMIT TO DRILL WELL
please print or type

STATE PERMIT NUMBER: HO-94-0916
fill in this form completely

Date Received (APA): 09/03/96

OWNER INFORMATION

Last Name / Owner: SOHMS HOPKINS
First Name: PLAZA
Street or RFD: 10805 HICKORY RIDGE
Town: COLUMBIA
State: MD
Zip: 21044

DRILLER INFORMATION

CIRCLE: MSD / MGD / MWD
Driller's Name: Ralph Mayne
License No.: 116
Firm Name: Ralph Mayne Well Drilling
Address: 9120 Brown Church Rd. Mt. Airy
Signature: Ralph Mayne Date: 9/2/96

LOCATION OF WELL

B | 3
8 COUNTY: HOWARD
23 SUBDIVISION: CASHMARK
SECTION: 1 LOT: 3
52 NEAREST TOWN: SCAGGSVILLE
MILES FROM TOWN (enter 0 if in town): 2 MI

B | 4
DIRECTION OF WELL FROM TOWN (CIRCLE BOX): NW 8-9 | N 8 | NE 8-9 | W 8 | TOWN | E 8 | SW 8-9 | S 8 | SE 8-9

NEAR WHAT ROAD: John Hopkins Rd.
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): NORTH (N) | WEST (W) | EAST (E) | SOUTH (S)
DISTANCE FROM ROAD: 500
ENTER FT OR MI: FT

TAX MAP: 41 BLK: _____ PARCEL _____

WELL INFORMATION

B | 2
APPROX. PUMPING RATE (GAL. PER MIN.): 5
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY): 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- (D) HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
- (F) FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
- (I) INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
- (P) PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
- (T-) TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL for Lot
COUNTY NAME: Howard Co. A45760
COUNTY NO.: 3
STATE SIGNATURE _____ INSERT S
DATE ISSUED: 09/04/96 A. McMillen 9/3/97
CO SIGNATURE EXP. DATE
NORTH GRID: 484000 EAST GRID: 082800

APPROXIMATE DEPTH OF WELL: 150 FEET
APPROXIMATE DIAMETER OF WELL: 6" NEAREST 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 DEEPENED WELLS

(CIRCLE APPROPRIATE BOX)

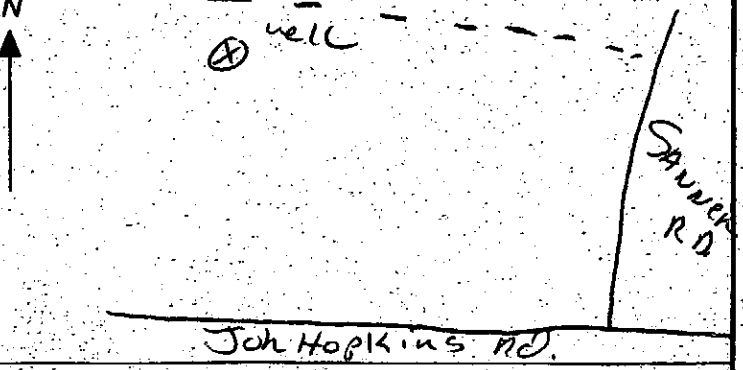
- (N) THIS WELL WILL NOT REPLACE AN EXISTING WELL
- (Y) THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
- (S) THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY. CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
- (D) THIS WELL WILL DEEPEN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENED (IF AVAILABLE):

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: E 828 N 4804 000 000

9/16/96
12 CASE GROUT } PER DRILLER
30 OPEN
60 CASING
360' DEED
(X) 2 SAMPLES
LOCATION OK

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION



Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROP. PERMIT NUMBER: GAP
FORCE: AM (WRITE INITIALS IN BOX) PERMIT No.: HO-94-0916

SPECIAL CONDITIONS
NOTE = APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED =

COUNTY

C 1 | 5949 | SE[illegible]NO. (MDE USE ONLY)

1 2 3 4 5 6
(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 [redacted] A457600

ST/CO USE ONLY
DATE Received 11-22-98 (MM DD YY) (8–13)

DATE WELL COMPLETED 09 16 96 (MM DD YY) (15–20)

Depth of Well 22 360 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" H0 94 0916 (28–37)

OWNER John Hopkins Plazza Assoc Partnership

STREET OR RFD 10305 Hickory Ridge (last name / first name) TOWN Columbia MD

SUBDIVISION John Hopkins Plazza SECTION S/D Cashmark LOT 3

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
Top Soil	00	2	
Sandy	2	40	✓
Sand Stone	40	45	
Micka	45	90	
Sand Stone	90	95	✓
Micka	95	360	

NUMBER OF UNSUCCESSFUL WELLS: 0

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 LIC. NO.: MSD 116
Kelly Mayne
DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO.: MSD 117
Kelly 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) (44) no (N) (44)

TYPE OF GROUTING MATERIAL (Circle one)
CEMENT (CM) (45 46) BENTONITE CLAY (BC)

NO. OF BAGS 12 NO. OF POUNDS (45 46) 1280

GALLONS OF WATER 72

DEPTH OF GROUT SEAL (to nearest foot)
from 0 (48 TOP 52) ft. to 30 (54 BOTTOM 58) 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)
PL (60 61)	6 (63 64)	50 (66 70)

OTHER CASING (if used) — EACH CASING

diameter inch	depth (feet) from	depth (feet) 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

DEPTH (nearest ft.) — EACH SCREEN

1	HO (8 9)	LR (11 15)	360 (17 21)
2	(23 24)	(26 30)	(32 36)
3	(38 39)	(41 45)	(47 51)

SLOT SIZE 1 ____ 2 ____ 3 ____

DIAMETER OF SCREEN ____ (NEAREST INCH) (56 60)

from	to

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68 (68)

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)
T (70) (E.R.O.S.) (72) W Q (74 75 76)
TELESCOPE CASING | LOG INDICATOR | OTHER DATA

C 3

PUMPING TEST
HOURS PUMPED (nearest hour) 3 (8 9)

PUMPING RATE (gal. per min.) 10. (11 15)

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 20 (17 20) ft.

WHEN PUMPING 120 (22 25) ft.

TYPE OF PUMP USED (for test)
- A (27) air
- P (27) piston
- T (27) turbine
- C (27) centrifugal
- R (27) rotary
- O (27) other (describe below)
- J (27) jet
- S (27) 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.

TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29. (29)

CAPACITY: GALLONS PER MINUTE (to nearest gallon) (31 35)

PUMP HORSE POWER (37 41)

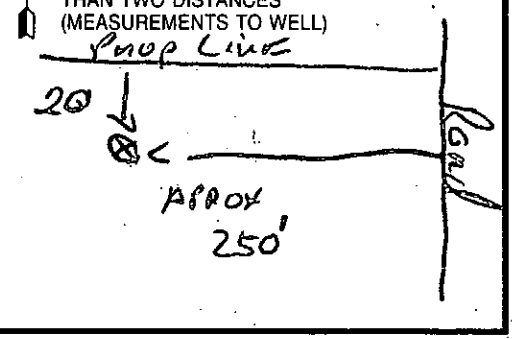
PUMP COLUMN LENGTH (nearest ft.) (43 47)

CASING HEIGHT (circle appropriate box and enter casing height)
- + (49) above
- – (49) below

LAND SURFACE

2 (nearest foot) (50 51)

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)



COUNTY

Fnl # 313-2645
1/27/99

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525 N Ellicott Mills Drive
Ellicott City, MD 21043
461-9933

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation ✓ Receipt # _____
Replacement _____ Date _____

Name of Installer CLARKE P+H Inc Telephone 410-489-4029

License Number 3808
Certified Well Pump Installer _____ Well Driller _____ Registered Plumber ✓

Name of Property Owner Hamilton Reed Telephone 740-2100
Subdivision Cashmere Lot # 3 Well Tag # _____
Site Address 7582 Sanner Road

Pump
1. Type
   a. Deep well jet _____
   b. Shallow well jet _____
   c. Submersible ✓
2. Make _____
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 _____
2. RPM _____
3. Voltage _____
   a. 110 _____
   b. 220 ✓

Pitless Adapter
1. Make CT-800
2. Model # _____
3. Depth 42"

Tank
1. Capacity 42
2. Pressure relief valve? 75

Piping
1. Type Plastic
2. Size 1"
3. NSF and/or BOCA Code approved _____
4. Depth of supply line 42"

Well data
1. Depth _____ ft.
2. Yield _____ GPM
3. Static water level _____ ft.
4. Will water supply be disinfected by installer? NO

1/27/99 well line, p.a. 3.5 lbs. well casing 1.5 a.g. PVC conduit pipe ag. 5pc well cap installed. OK to cover. (DLS)

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: Kenneth C Clarke

Date: 1-26-99

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

HD-215

C X A-45760

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVE
ELLICOTT CITY, MD 21043
PERMITS (410)313-2455 INSPECTIONS (410)313-1610
AUTOMATED INFORMATION (410) 313-3600

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER B00123257

Building Address 7582 Sommer Rd
Clarksville, MD

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

Census Tract 6051.02 Subdivision Cashmere K

Section _____ Area _____ Lot 3

Tax Map 41 Parcel 428 Grid 16

Zoning RR-DEO Map Coordinates _____ Lot size _____

Property Owner's Name Jeff & Joan Smith

Address 7582 Sommer Rd

City Clarksville State MD Zip Code 20723

Home Phone 410-730-2817 Work Phone _____

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

Phone _____ Fax _____

Existing Use SFD

Proposed Use Same

Estimated Construction Cost $ 20,500

Description of Work Sunroom 17X12 Addition w/12'Proj x 9'wide Deck w/Stairs off Deck

Contractor Company Sunroom Designs of Annapolis

Contact Person Wayne Brechtel

Address 810 E. College Pkwy

City Annapolis State MD Zip Code 21401

License No. 66781

Phone 410 349-0600 Fax 410 349-2099

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

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:
X Public
X Private

Sewage Disposal:
X Public
X 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.

Applicant's Signature _____

Print Name Wayne Brechtel

Title/Company _____

Date 3/30/00

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

- FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL
X Land Development, DPZ	3/30/00	
State Highways		
X Building Official	3/30/00	
X Dev. Engineering, DPZ		
X Health	3/31/00	
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#: 3792

Filing fee	$ 25
Permit fee	$ 25
Excise tax	$ 15
Sub-total paid	$
Add'l permit fee	$
TOTAL FEES	$ 65
Balance due	$
Check	# Cash
Validation	# 3201

Accepted by _____

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

Rev. 10/15/98

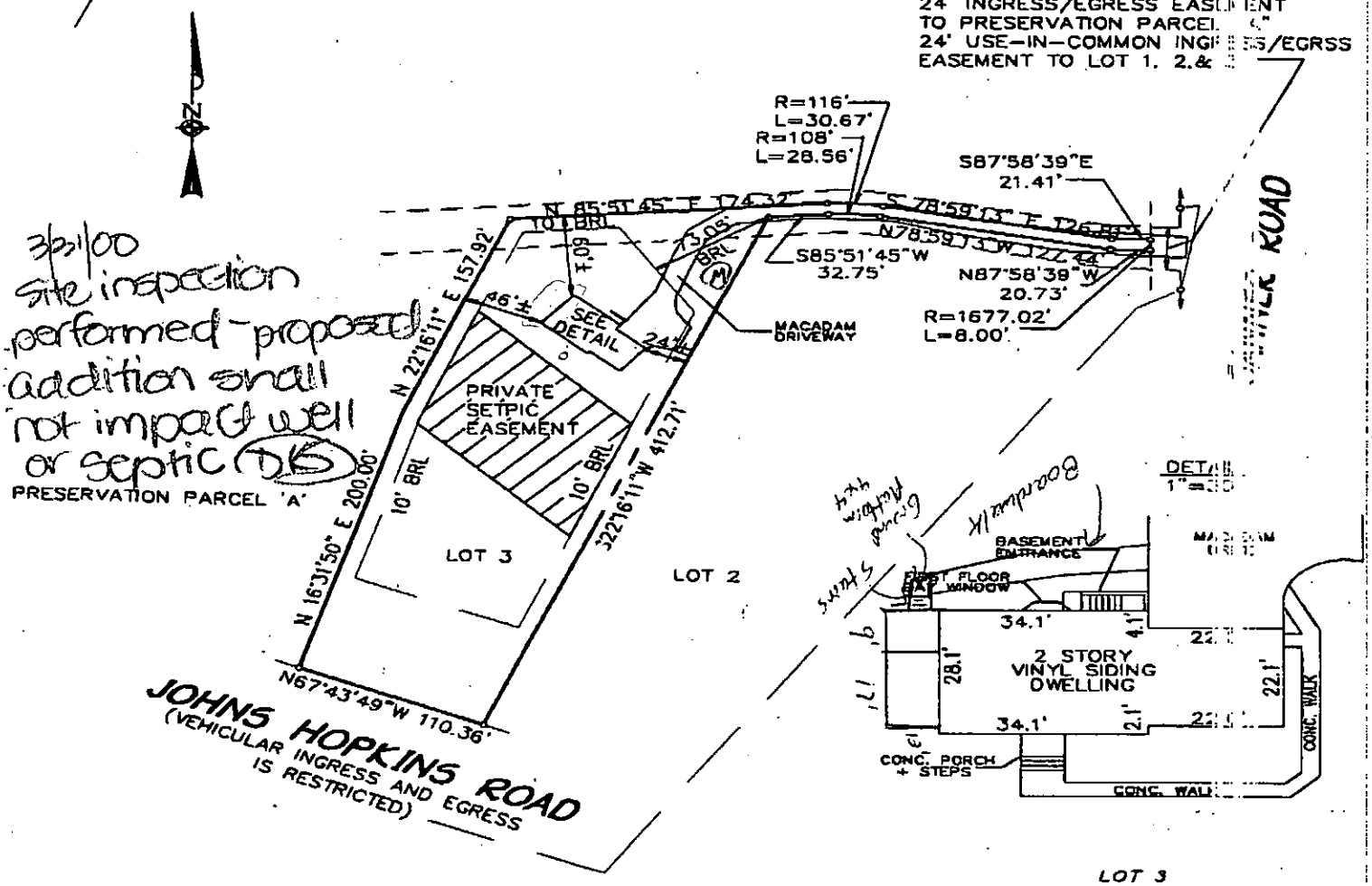
GENERAL NOTES:

1) THIS PLAT IS PREPARED FOR THE BENEFIT OF THE CLIENT SIGNING THE HOUSE LOCATION SURVEY APPROVAL FORM INSOFAR AS IT IS REQUIRED BY A LENDER OR TITLE INSURANCE COMPANY OR ITS AGENTS IN CONNECTION WITH THE CONTEMPLATED TRANSFER, FINANCING OR RE-FINANCING. UNLESS INDICATED AS BEING A BOUNDARY SURVEY, THIS PLAT IS NOT INTENDED FOR USE IN THE ESTABLISHMENT OF PROPERTY LINES AND IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATIONS OF FENCES, GARAGES, BUILDINGS OR OTHER EXISTING OR FUTURE IMPROVEMENTS. AS A RESULT, THIS PLAT DOES NOT PROVIDE FOR ACCURATE IDENTIFICATION OF PROPERTY LINE, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING OR RE-FINANCING.

2) SUBJECT PROPERTY IS SHOWN IN ZONE C ON THE NATIONAL FLOOD INSURANCE PROGRAM FLOOD INSURANCE RATE MAP OF HOWARD COUNTY, MARYLAND, COMMUNITY PANEL No. 240044 0038 B, EFFECTIVE DATE: DEC. 4, 1986.

3) THE OFFSETS FROM BUILDING LINE TO PROPERTY LINE AS SHOWN ON THE PLAT HEREON ARE TO AN ACCURACY OF 1' PLUS OR MINUS (±).

1"=40'



3/21/00
Site inspection performed - proposed addition shall not impact well or septic (DK)

TOP OF FOUNDATION ELEV. 432.7'±
BRL-BUILDING RESTRICTION LINE

LOT 3
CASHMARK PROPERTY
LOTS 1 THRU 3 & PRESERVATION PARCEL 'A'
5th ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
PLAT REF.: 12405

FISHER, COLLINS & CARTER, INC.
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS
CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE
ELLICOTT CITY, MARYLAND 21042
(410) 461 - 2855

FCC •

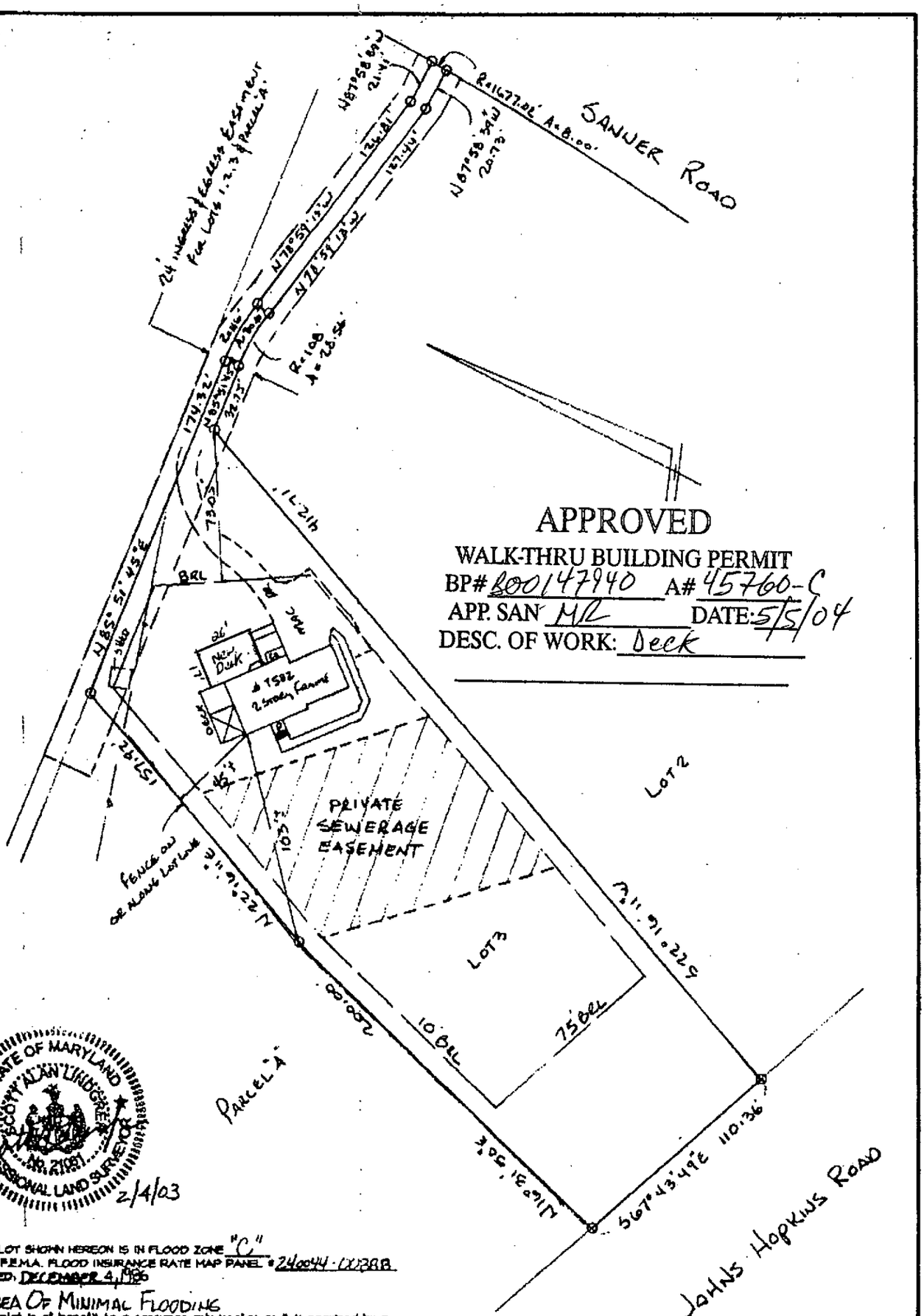
STATE OF MARYLAND
MARK L. ROBEL
NO. 339
REGISTERED
PROPERTY LINE SURVEYOR

Mark L. Robel — 4/2/99
PROFESSIONAL LAND SURVEYOR — DATE
REG. • 339

HOUSE LOCATION DRAWING

FOUNDATION LOCATION: 11/23/98
FINAL LOCATION: 05-28-99
BOUNDARY SURVEY:

SCALE: 1"=100'
DATE: 06-02-99
DRAWN BY: T.P.
CHECKED BY: M.R.
PROJECT No.: 6



APPROVED
WALK-THRU BUILDING PERMIT
BP# B00147940 A# 45760-C
APP. SAN MR DATE: 5/5/04
DESC. OF WORK: Deck

STATE OF MARYLAND
TIMOTHY ALAN UNDERCOFLER
No. 21081
PROFESSIONAL LAND SURVEYOR
2/4/03

THE LOT SHOWN HEREON IS IN FLOOD ZONE "C"
PER F.E.M.A. FLOOD INSURANCE RATE MAP PANEL # 240044-0038B
DATED: DECEMBER 4, 1986

AREA OF MINIMAL FLOODING

This plat is of benefit to a consumer only insofar as it is required by a Lender/Title Insurance Company or their agent in connection with the contemplated transfer, financing or re-financing. This 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 the accurate identification of property boundary lines, but such identification is not required for the transfer of title or securing financing or re-financing of the property shown hereon.
The setback dimensions shown hereon and as they relate to structures noted are to be interpreted as being within 2 feet either way of the dimension shown.

GERHOLD, CROSS & ETZEL, LTD.
REGISTERED PROFESSIONAL LAND SURVEYORS
Suite 100
320 East Towsontown Boulevard
Towson, Maryland 21286
PH: (410)823-4470 FAX: (410)823-4473

LOCATION DRAWING

7582 SANNER ROAD
LOT 3 CASHMARK PROPERTY LOTS 1 THRU 3
& PRESERVATION PARCEL 'A' PLAT # 12405
HOWARD COUNTY MARYLAND

FIELD WORK: CP	DRAWN: CP	DATE: 2.1.03	SCALE: 1"=60'

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVE
ELLICOTT CITY, MD 21043
PERMITS (410) 313-2455 INSPECTIONS (410) 313-1910
AUTOMATED INFORMATION (410) 313-3500

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER T00147940

Building Address 7582 Sanner Rd
Elkridge MD 21075

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

Census Tract _____ Subdivision Cashmark

Section _____ Area _____ Lot 2

Tax Map 41 Parcel 4 Grid _____

Zoning _____ Map Coordinates _____ Lot size 1.03Ac

Property Owner's Name Jeffery & Joan Smith

Address [illegible]

City _____ State MD Zip Code 21075

Home Phone [illegible] Work Phone [illegible]

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

Phone _____ Fax _____

Existing Use SFD

Proposed Use SFD Deck

Estimated Construction Cost $ 5000

Description of Work 17X26

Deck w/steps on rear of SFD

Contractor Company D & A [illegible]

Contact Person [illegible]

Address [illegible]

City [illegible] State MD Zip Code 21075

License No. [illegible]

Phone [illegible] Fax [illegible]

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

Height: 4

No. of stories:

Gross area, sq. ft. per floor: 2574

Use group:

Construction type:
- ____ Reinforced Concrete
- ____ Structural Steel
- ____ Masonry
- X Wood Frame

____ State Certified Modular

Utilities

Water Supply:
- X Public
- ____ Private

Sewage Disposal:
- ____ Public
- X 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:
- X Public
- ____ Private

Sewage Disposal:
- ____ Public
- X 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.

Applicant's Signature _____ *Print Name* _____

Title/Company _____ *Date* _____

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

615 OK

FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official	5/5/04	[illegible]
Dev. Engineering, DPZ		
Health	5/5/04	Mark Rifkin
Fire Protection		

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

CONTINGENCY CONSTRUCTION START: ☐
ONE STOP SHOP: ☐

DPZ SETBACK INFORMATION

From: _____
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#: 7980

Filing fee $	
Permit fee	$ 50
Excise tax	$
Add'l per. fee	$ 5
TOTAL FEES	$ 55
Sub-total paid	$
Balance due	$
Check	#
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