6/21/96 12:00 later c/o 6/24/96 WPI anytime 6/27/96 11:00 + later

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 56626A

A 49915A

DISTRICT 3rd

DATE 5/15/96

DATE SYSTEM APPROVED 6/27/96

INSPECTOR M.Rifkin

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

INDEXED

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

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

SUBDIVISION Sobus Farms LOT 19 ROAD ~~2936~~ 2926 Summer Hill Drive

PROPERTY OWNER Altieri Homes, Inc. / Buchheit

ADDRESS ____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 180

TRENCHES - Trench to be 2 feet wide. Inlet 2 feet below original grade. Bottom maximum depth 6 feet below original grade. Effective area begins at 2 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Place distribution box 180 feet up the right (350.00') lot line and 20 feet off that same lot line as seen when facing the lot from Summer Hill Drive. Run trenches on contour toward the left 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/cw

PLANS APROVED BY Amy McMillen DATE 09/26/95 jr

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

ALDG. PERMIT SIGNED AND RETURNED 11-5-98

PERMIT VOID AFTER TWO YEARS

Serial # BTO 114944

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.

detached garage

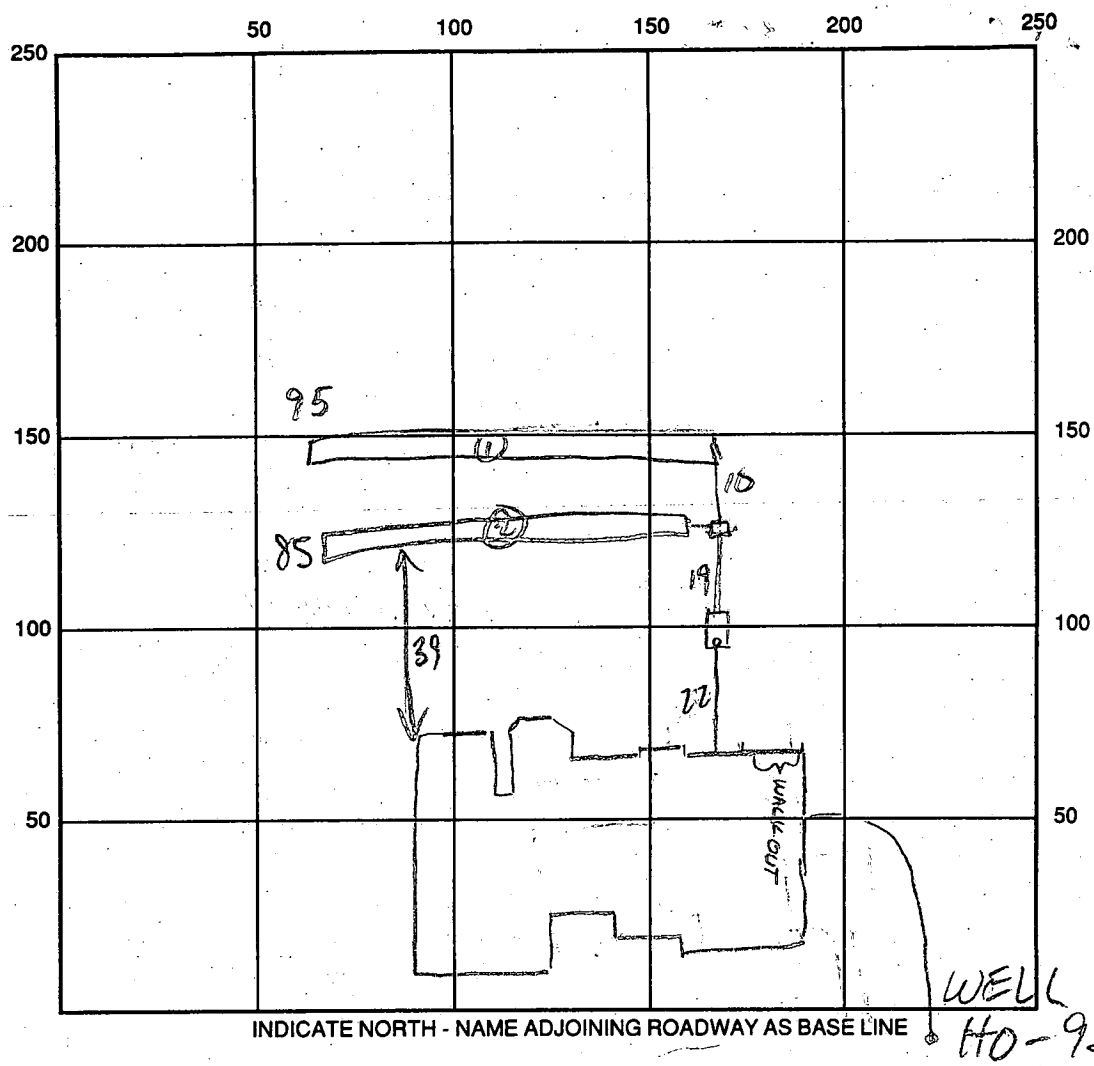
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

***CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.**

HD-260(6-90)

A 49915A



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1250 GAL OK CLEANOUTS OK

DISTRIBUTION BOX LEVEL OK BAFFLE IN

DRAIN FIELD/TITLE DEPTH 6-6½ FT. TRENCH WIDTH 2 FT. INLET DEPTH 2 FT.

EFFECTIVE GRAVEL DEPTH 4 FT. TOTAL LENGTH ①95 ②85 FT.

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA ①380 ②340 SQ. FT.

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

ABSORBENT AREA 720 SQ. FT.

REMARKS: 6/27/96 OK to cover house to DB AM

6/27/96 #2 TRENCH BOTTOMS NOT OBS'D; ACCEPTED INSTALLER'S REPORT OF TRENCH DEPTHS; OK TO COVER

MR

6/21/96 WPI OK to cover 5.5 below grade AM

DATE SYSTEM APPROVED 6/27/96 INSPECTOR M.R. Pkin

APPLICATION

PERCOLATION TESTING

A 4995A

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

DISTRICT 3

DATE 2/9/94

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Allied Homes, Inc. Hilltop Development Corporation

ADDRESS P.O. Box 208, Clarksville, Md. 21029 PHONE 410-796-5206 ~~410-531-5539~~

AGENT OR PROSPECTIVE BUYER Richard Demmitt

ADDRESS P.O. Box 208, Clarksville, Md. 21029 PHONE 410-531-5539

PROPERTY LOCATION:

SUBDIVISION Sabus Farms LOT NO. 19 (nineteen)

ROAD AND DESCRIPTION at the end of Winfield Rd.
(2926 Summer Hill Drive)

TAX MAP 15 PARCEL # 26 & 154

BLDG. PERMIT SIGNED AND RETURNED 1/26/96
Permit # 03 222-SFD-4Bm
S.F.D.

SIZE OF LOT 1 acre + TYPE BLDG. _____
(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. Richard Demmitt
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

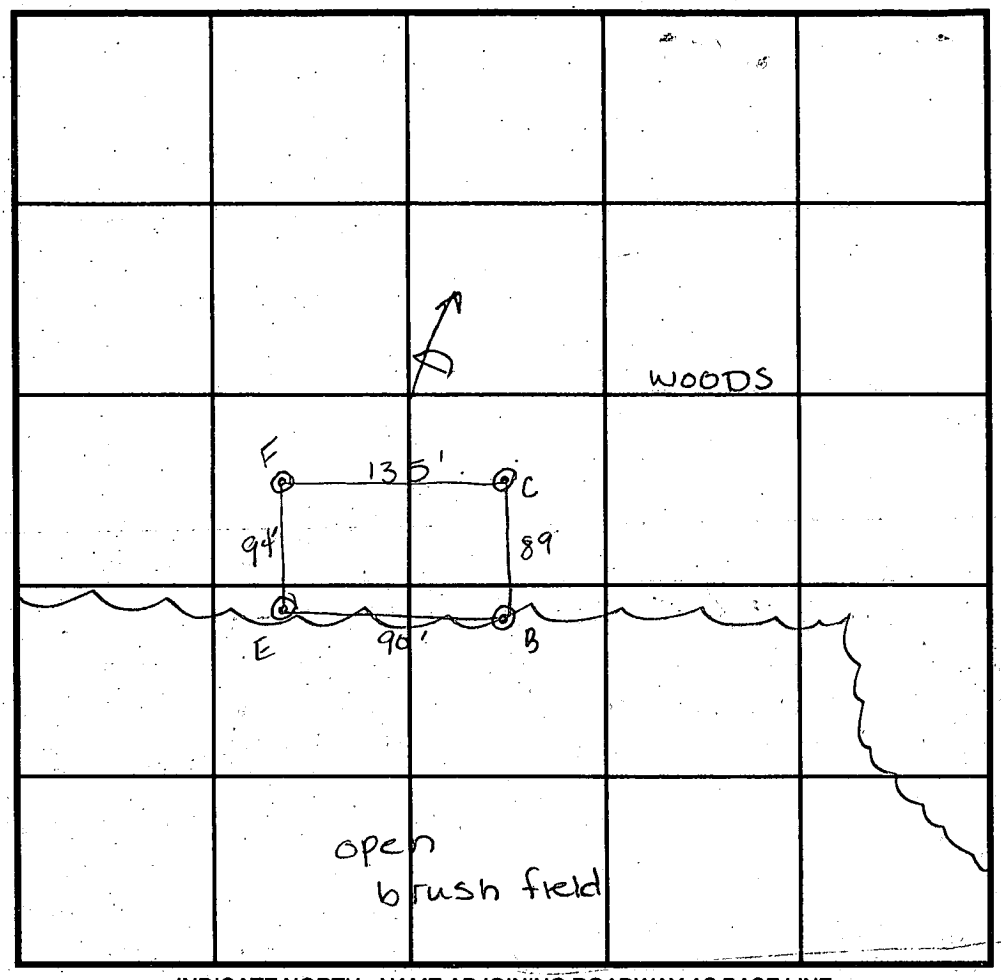
HD-216 (3/92)

A49915A
COUNTY #

SOIL PROFILE
F
0'
red/orang SCL
1
lgt yel/tan SL 15% mica OK
10'

E
same as F but 5-10% mica
11'

B
red brn CL
1
brn SL
3
lgt grey SL <5% shale
11½



SOIL PROFILE
C
0'
bright red CSL
3'
yel/tan SL mica chunks 5%
12'

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
3/25/94	F	3' / V 10'	11:29 10	11:30 05	11:30 05	11:31	1 MIN
	E	4' / V 11'	11:33 15	11:33 50	11:33 50	11:34 40	50 sec
	B	3' / V 11½'	11:23 20	11:23 40	11:23 40	11:24 15	35 sec
		5' / V 11½'	11:22 05	11:22 25	11:22 25	11:23 05	40 sec
		repour	11:25 05	11:25 55	11:25 55	11:26 50	1 min
	C	5½ / V 12	11:14 15	11:15 15	11:15 15	11:16 30	1¼ min
		3 / V 12	11:15 15	11:15 45	11:15 45	11:16 45	1 min

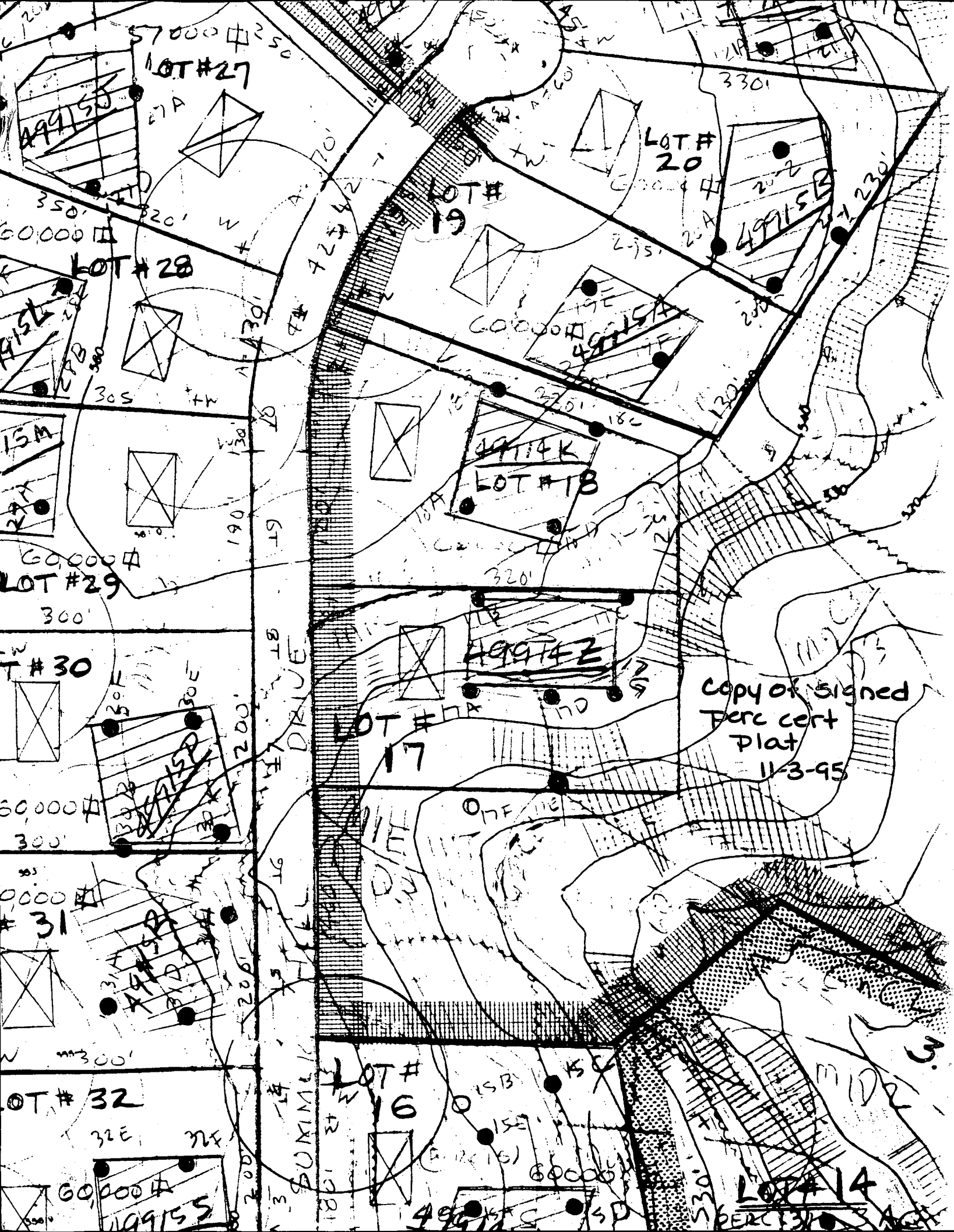
REMARKS _____

TYPE OF SOIL Ch B_2 Chester Silt Loam

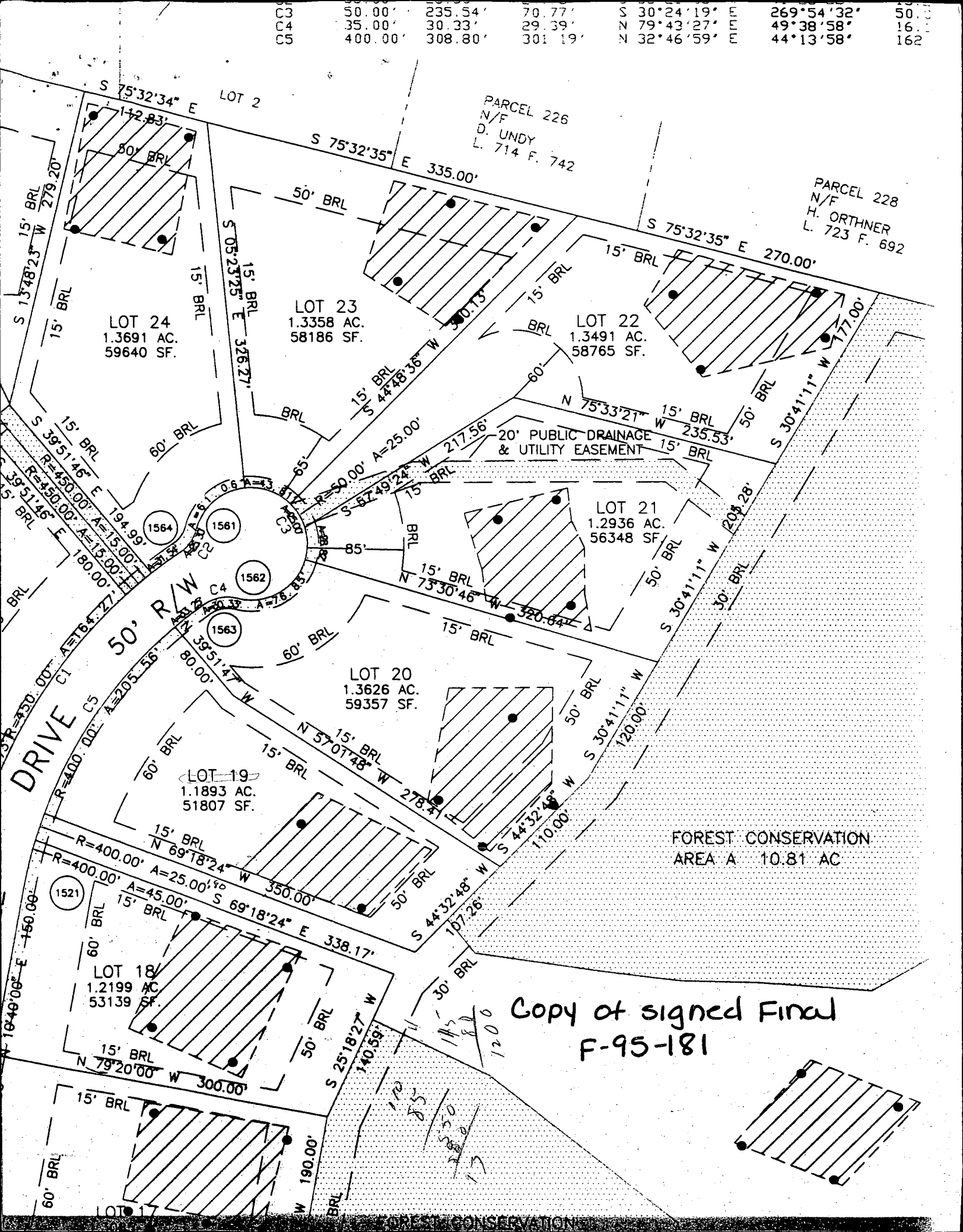
TESTED BY A. McMillen/M. Rifkin ALSO PRESENT R. Demitt

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 2 min TRENCH WIDTH 2'

INLET DEPTH 2' MAXIMUM BOTTOM DEPTH 6' SQ. FT/BEDROOM 180 ft²


LOT #27
LOT #28
LOT #29
LOT #30
LOT #31
LOT #32
LOT #19
LOT #20
LOT #18
LOT #17
LOT #16
LOT #14
DRIVE
Copy of signed
Perc cert
Plat
11-3-95

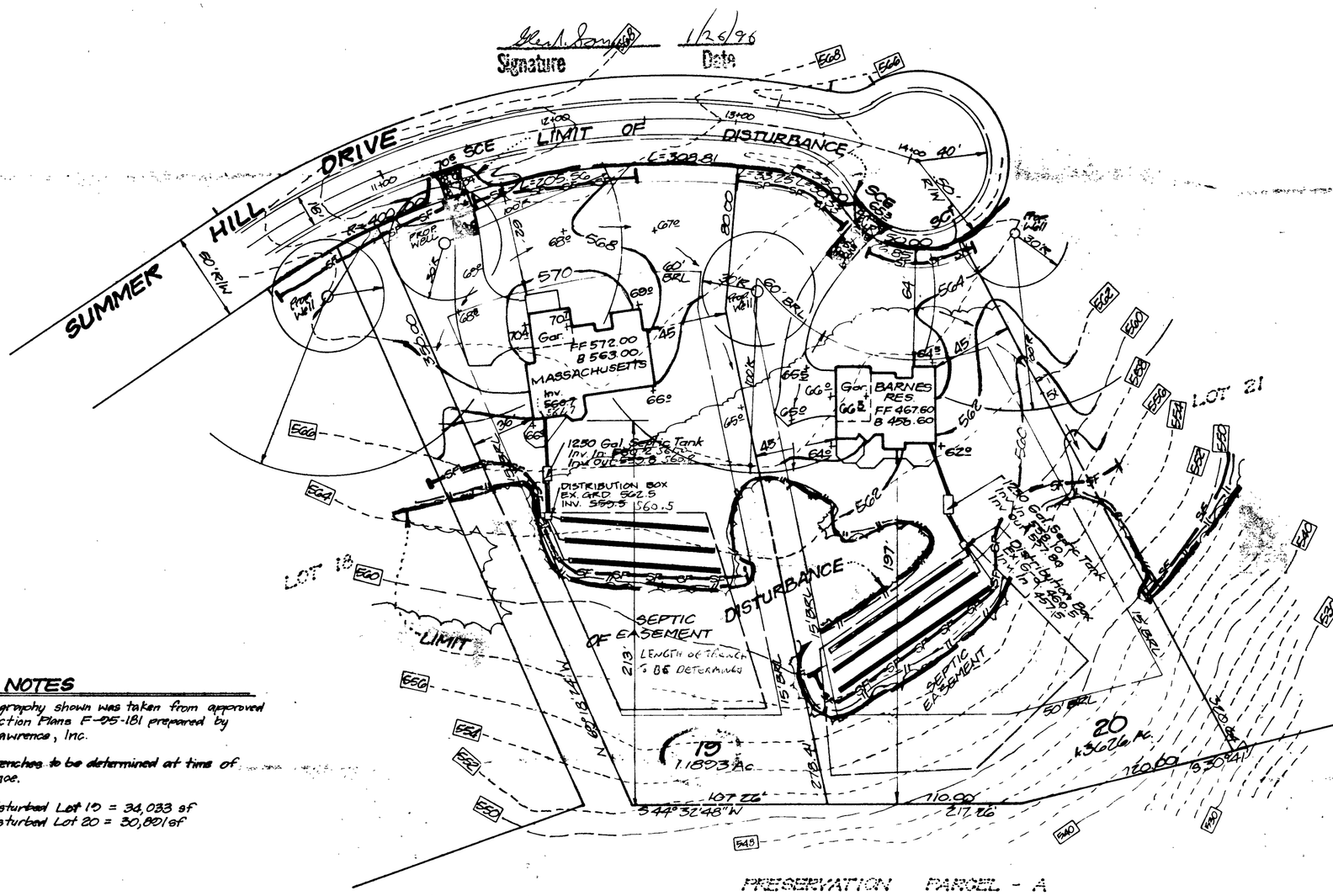
C3	50.00'	235.54'	70.77'	S 30°24'19" E	269°54'32"	50.
C4	35.00'	30.33'	29.39'	N 79°43'27" E	49°38'58"	16.
C5	400.00'	308.80'	301.19'	N 32°46'59" E	44°13'58"	162

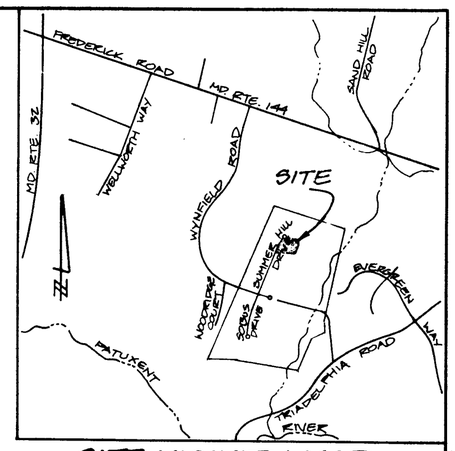


Copy of signed Final
F-95-181

Approved Septic System Plan
Howard County Health Department

Glenn A. Sampsell 1/26/96
Signature Date





SITE VICINITY MAP
SCALE: 1" = 2000'

LEGEND

- Contour Interval 2 Ft.
- Existing Contour ——— 570 ———
- Proposed Contour ——— 570 ———
- Spot Elevation + 70.2
- Direction of Drainage →
- Walkout Basement
- Existing Trees To Be Saved
- Tree Protection Fence —— // ——
- Silt Fence —SF—SF—SF—
- Super Silt Fence —SSF—SSF—
- Earth Dike → E.D. (A-1) →
- Stabilized Construction Entrance SCE

GENERAL NOTES

1. Existing Topography shown was taken from approved Road Construction Plans F-95-181 prepared by Oconnell & Lawrence, Inc.
2. Length of Trenches to be determined at time of Permit Issuance.
3. Total Area disturbed Lot 19 = 34,033 sf
   Total Area disturbed Lot 20 = 30,801 sf

CLARK • FINEFROCK & SACKETT, INC.
ENGINEERS • PLANNERS • SURVEYORS
7135 MINSTREL WAY • COLUMBIA, MD 21045 • (410) 381-7500 – BALTO • (301) 621-8100 – WASH

DESIGNED JME KIWM	SEDIMENT and EROSION CONTROL PLAN	SCALE 1" = 50'
DRAWN PS	SOBUS FARMS LOTS 19 AND 20	DRAWING 1 OF 1
CHECKED JME	TAX MAP: 15 PARCELS: 267154 3rd ELECTION DISTRICT HOWARD COUNTY, MARYLAND	JOB NO. 95-209
DATE 1-22-96	FOR: ALTIERI HOMES, INC. 7349 Gardenview Drive Elkridge, MD 21227	FILE NO. 95-209X

C 1 | 2896 | SEQUENCE NO. (MDE USE ONLY)

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

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

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

COUNTY NUMBER A49915A

ST/CO USE ONLY
DATE Received

DATE WELL COMPLETED: 1/12/95

Depth of Well: 380 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL": HO-93-0087

OWNER Dennitt (last name) Richard (first name)

STREET OR RFD Summer Hill Dr TOWN W. Friendship

SUBDIVISION SOBUS FARMS SECTION LOT 19

WELL LOG
Not required for driven wells

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

DESCRIPTION (Use additional sheets if needed)	FEET FROM	FEET TO	check if water bearing
Sand	0	24	
Gray Mica Rock	24	380	x

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.

TYPE: MWD/MSD/MGD

DRILLERS LIC. NO. 24

Joseph L. Mayne

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO.

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

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

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT CM | BENTONITE CLAY BC

NO. OF BAGS 7 NO. OF POUNDS 658

GALLONS OF WATER 42

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 24 ft. (enter 0 if from surface)

CASING RECORD
casing types insert appropriate code below

ST STEEL | CO CONCRETE | PL PLASTIC | OT OTHER

MAIN CASING TYPE	Nominal diameter top (main) casing (nearest inch)!	Total depth of main casing (nearest foot)
ST	6	27

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

EACH SCREEN	DEPTH (nearest ft.)		SLOT SIZE	DIAMETER OF SCREEN (NEAREST INCH)
1	HO	26		
2				
3				

GRAVEL PACK from to

IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

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

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

TELESCOPE CASING | LOG INDICATOR | OTHER DATA

C 3

PUMPING TEST
HOURS PUMPED (nearest hour): 6

PUMPING RATE (gal. per min.): 001.5

METHOD USED TO MEASURE PUMPING RATE: Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING: 29 ft.

WHEN PUMPING: 356 ft.

TYPE OF PUMP USED (for test)

A air | P piston | T turbine | C centrifugal | R rotary | O other (describe below) | J jet | S submersible

PUMP INSTALLED
DRILLER WILL INSTALL PUMP (CIRCLE) (YES or NO): YES / NO

IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.

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

CAPACITY: GALLONS PER MINUTE (to nearest gallon)

PUMP HORSE POWER

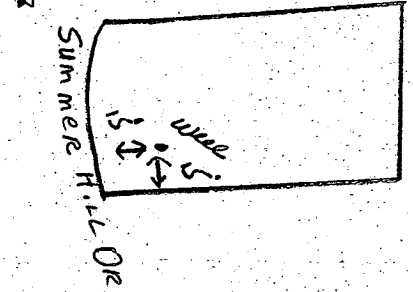
PUMP COLUMN LENGTH (nearest ft.)

CASING HEIGHT (circle appropriate box and enter casing height)

+ above / − below LAND SURFACE

(nearest) foot

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



COUNTY

STATE USE INDUSTRIES
JESSUP, MD 20794

EMERGENCY/TEMP NO. IF ANY

B 1 | 1991 | 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-93-0087
fill in this form completely

Date Received (APA): 10/23/95

OWNER INFORMATION

Owner: DEMMITT RICHARD
Street or RFD: PO BOX 228
Town: CLARKSVILLE | State: MD | Zip: 21029

DRILLER INFORMATION

CIRCLE: MSD/MGD/MWD

Driller's Name: Joseph L. Mayne | License No. 80: 24
Firm Name: Joseph L. Mayne Well Drilling
Address: 5512 Ridge Rd. Mt. Airy, Md. 21771
Signature: Joseph L. Mayne | Date: 10/23/95

WELL INFORMATION

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

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- (H) 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)

APPROXIMATE DEPTH OF WELL: 300 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):

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

APPROP. PERMIT NUMBER: GAP
FORCE: MR (WRITE INITIALS IN BOX) PERMIT No. HO-93-0087

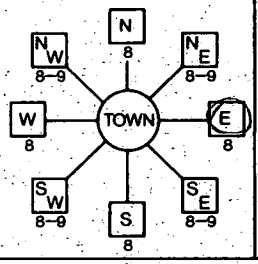
LOCATION OF WELL

B 3

8 COUNTY: HOWARD
23 SUBDIVISION: SOBUS FARMS
SECTION: | LOT: 19
52 NEAREST TOWN: WESTFRIENDSHIP
MILES FROM TOWN (enter 0 if in town): 1 1/2 MI

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



NEAR WHAT ROAD: Summer Hill Drive

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): NORTH (N) | WEST (W) | 32 | EAST (E) | SOUTH (S)

DISTANCE FROM ROAD: 20
ENTER FT OR MI: FT

TAX MAP: 15 BLK: PARCEL 26

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

COUNTY NAME: Howard | COUNTY NO.: A49915A

STATE SIGNATURE | INSERT S

DATE ISSUED: 11/08/95 | CO SIGNATURE: Mark E. Riffkin | EXP. DATE: 11/8/96

NORTH GRID: 531000 | EAST GRID: 081800

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER
1. WELL
2.
3.

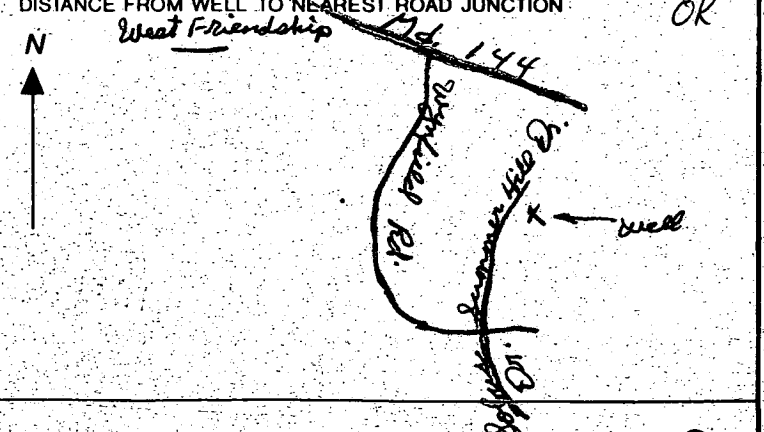
WRITE THE BOX NUMBER FROM THE MAP HERE

E 818
N 531

11/22/95 9:30 MR
27' CASING
24' OPEN
7 BAGS GROUT OK NOT OBS'D
1' CASING A.G.
000 000 TAG OK (X) LOC 11/22/95

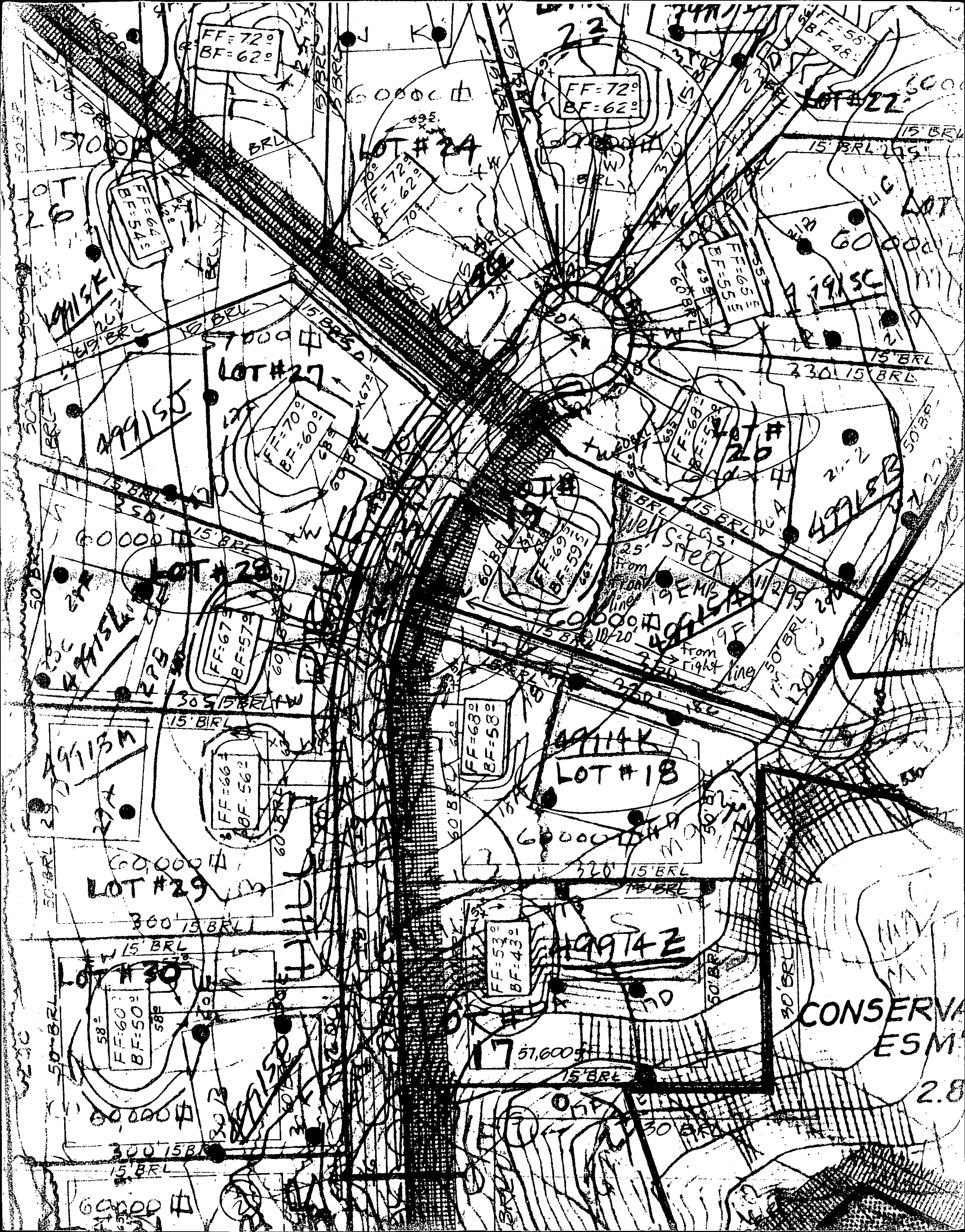
DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION

SEEMS OK



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

COUNTY



FF:72°
BF:62°
LOT #24
LOT #22
LOT #27
LOT #28
LOT #29
LOT #30
LOT #18
LOT #26
57000
60000
15' BRL
FF:64°
BF:54°
FF:65°
BF:55°
FF:70°
BF:60°
FF:68°
FF:69°
BF:59°
FF:67°
BF:57°
FF:63°
BF:58°
FF:66°
BF:56°
FF:53°
BF:43°
FF:60°
BF:50°
FF:58°
BF:48°
49915J
49914K
49914Z
49913M
49918B
17
51,600
330
320
300
CONSERVA
ESM
2.8

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVE
ELLICOTT CITY, MD 21043
PERMITS (410)313-2455 INSPECTIONS (410)313-1810
AUTOMATED INFORMATION (410) 313-3800

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER B00114944

Building Address 2926 Summer Hill Dr. West Friendship, MD 21794

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

Census Tract _____ Subdivision Sabus Farms

Section _____ Area _____ Lot 19

Tax Map _____ Parcel _____ Grid _____

Zoning Map Coordinates Lot size

Owner's Name Doug + Debbie Burchfield

Address same

City _____ State ____ Zip Code _____

Home Phone 410-489-5120 Work Phone 410-461-7600

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

Phone Fax

Existing Use SFD

Proposed Use Detached Garage

Estimated Construction Cost $ 15,000.00

Description of Work Build 18x22 Detached Garage

Contractor Company Coastal Builders, Inc

Contact Person John M. Watts

Address PO Box 1613

City Ellicott City State MD Zip Code 21041

License No. 38013

Phone 410-461-9908 Fax 410-750-3701

Occupant or Tenant Owner

Contact Name _____

Address _____

City _____ State _____ Zip Code _____

Phone Fax

Engineer or Architect Company _____

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

Phone Fax

BUILDING DESCRIPTION - *COMMERCIAL*

Building Characteristics

Height:

No. of stories:

Gross area, sq. ft. per floor:

Use group:

Construction type:
_____ Reinforced Concrete
_____ Structural Steel
_____ Masonry
_____ Wood Frame

_____ State Certified Modular

Utilities

Water Supply:
____ Public
____ Private
Sewage Disposal:
____ Public
____ Private

Electric Yes ☐ No ☐
Gas Yes ☐ No ☐

Heating System:
Electric ☐ Oil ☐
Natural Gas ☐
Propane Gas ☐

Sprinkler system: N/A ☐
____ NFPA #13
____ Full
____ Partial
____ Other Suppression

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: Garage (Detached)
Dimensions: 18'x22'
Footings: 8x16 concrete
Roof: A

_____ State Certified Modular
_____ Manufactured Home

Utilities

Water Supply:
____ Public
✓ Private
Sewage Disposal:
____ Public
✓ Private

Electric Yes ☒ No ☐
Gas Yes ☐ No ☒

Heating System:
Electric ☐ Oil ☐
Natural Gas ☐
Propane Gas ☐ None

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.

John M. Watts — John M. Watts
Applicant's Signature *Print Name*

President Coastal Builders, Inc. — 11/4/98
Title/Company *Date*

VALIDATION

Checks payable to: ***DIRECTOR OF FINANCE OF HOWARD COUNTY***

** PLEASE WRITE NEATLY AND LEGIBLY. **

- FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official		
Dev. Engineering, DPZ		
Health	11/5/98	Kim Morita
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#: _____
Filing Fee $ _____
Permit Fee $ _____
(.10 sq. ft. ☐) (.15 sq. ft. ☐)
Excise Tax $ _____
(.40 sq. ft. ☐) (.80 sq. ft. ☐)
TOTAL FEES _____
Check # _____
Validation # _____
Accepted by: _____

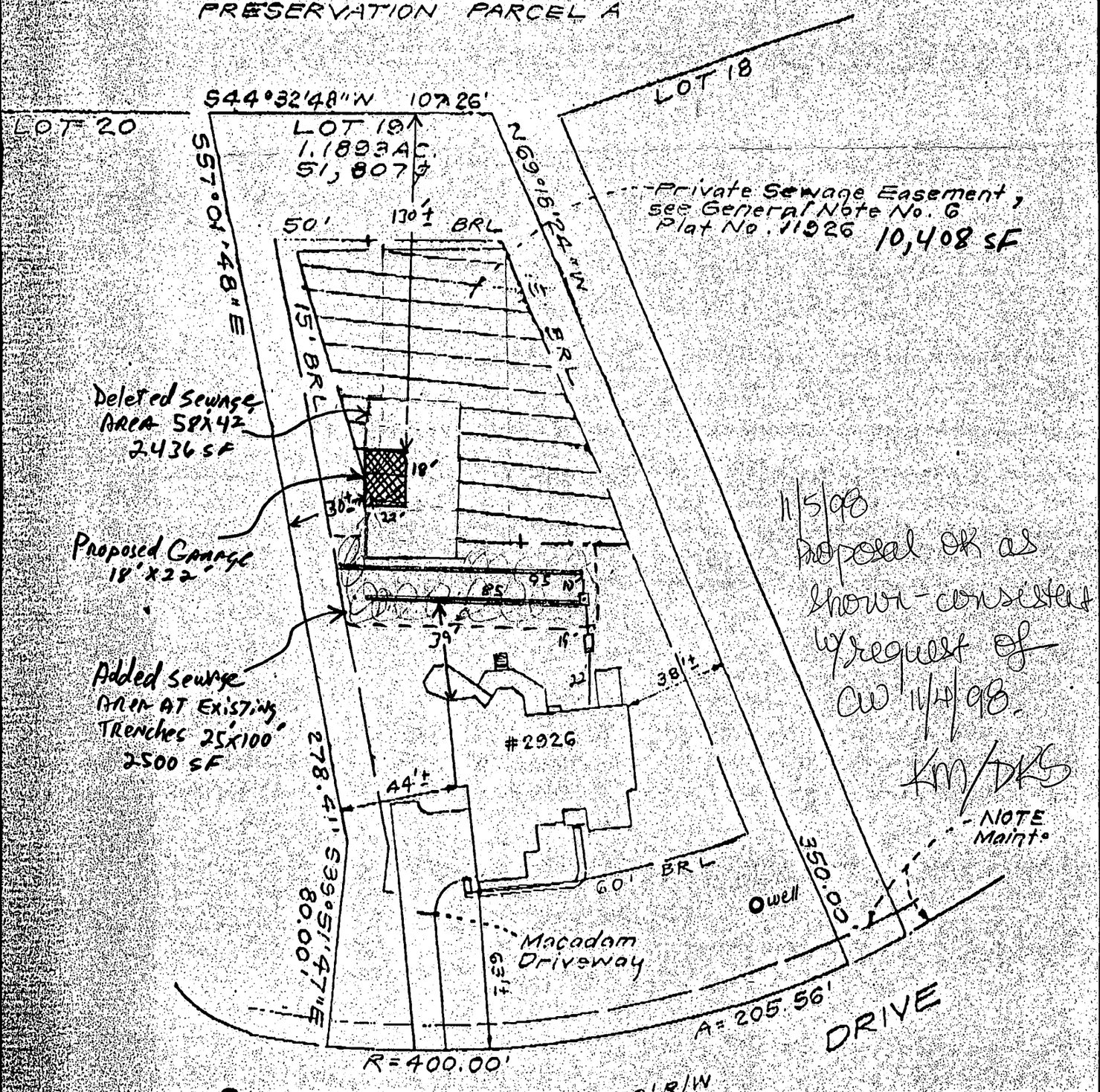
A

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

a:\permit.frm

Rev. 8/25/98

BURCHARDT - LOT 19



11/5/98
Proposal OK as shown - consistent w/request of CW 11/4/98.
KM/DKG

- NOTE Maint.

SCALE 50' = 1"

Burchardt Garage
2926 Summer Hill Dr.
West Friendship, MD 21794

Coastal Builders, Inc.
410-461-5508

Coastal Builders, INC.
Your Guarantee of Quality and Value
P.O. Box 1613, Ellicott City, Maryland 21041-1613
Telephone: 410-461-9908 Fax: 410-750-3570

FAX COVER SHEET

Attn: Craig Williams Fax #: 313-2648

Company: Bureau of Environmental Health Date: 11/5/98

Number of pages including cover sheet 2

Description or message:

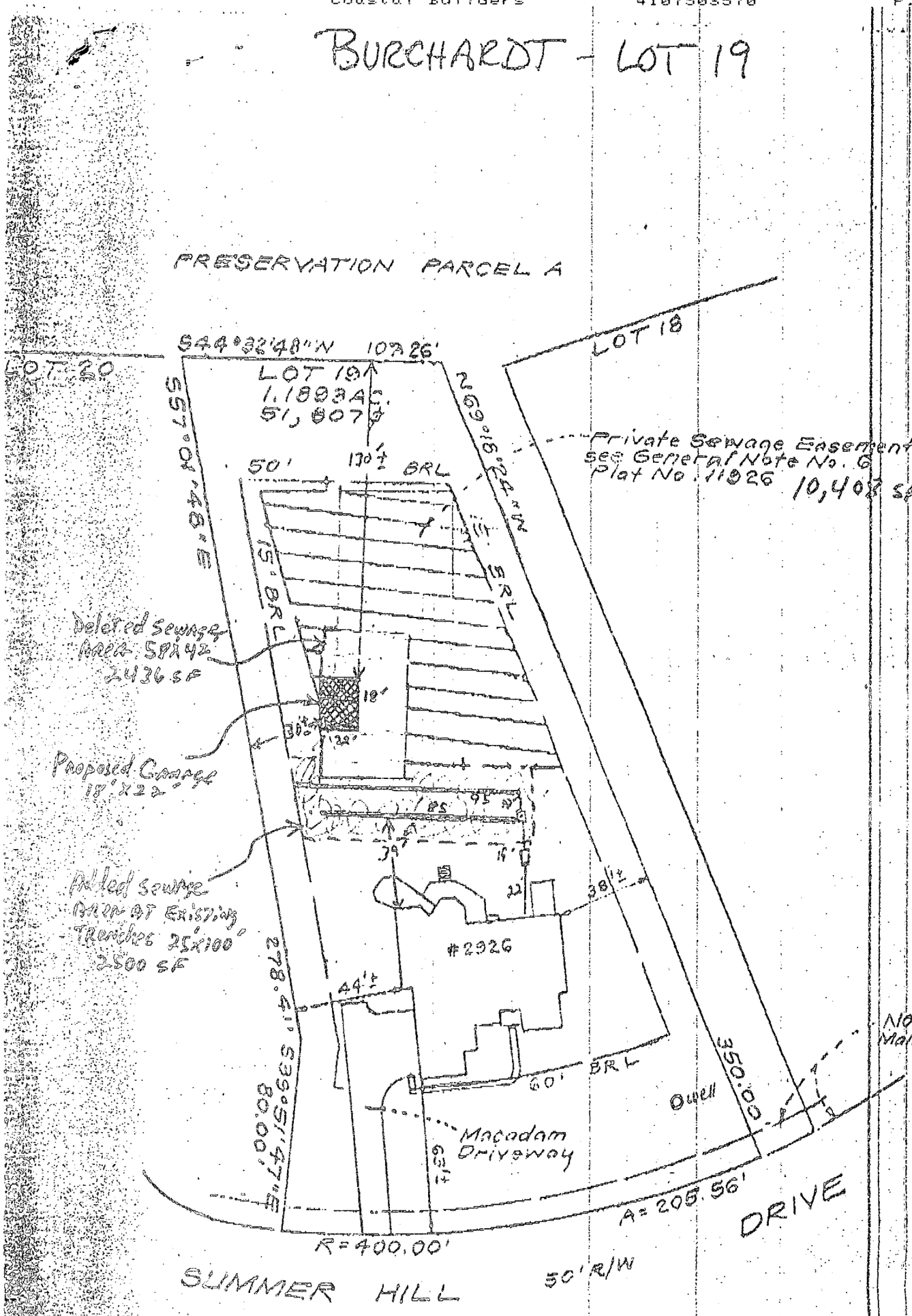
Mr. Williams - here is the revised site plan per our conversation yesterday RE Sobus Form Lot #19, showing the "as built" trenches and adding the area they encompass. I have deleted the area of the building and a 20' buffer around it. Scaling the original area yielded 10,408 SF. We are adding 2436 SF where the existing trenches are and deleting 2436 SF for the garage. The new total sewage area is now 10,472 SF, or virtually identical to the area initially. I just want to make sure this will fly so I can get the permit today. Please page me at 410-582-7850 to discuss this when you get it.

From:

Thanks!

John M. Watts

BURCHARDT - LOT 19



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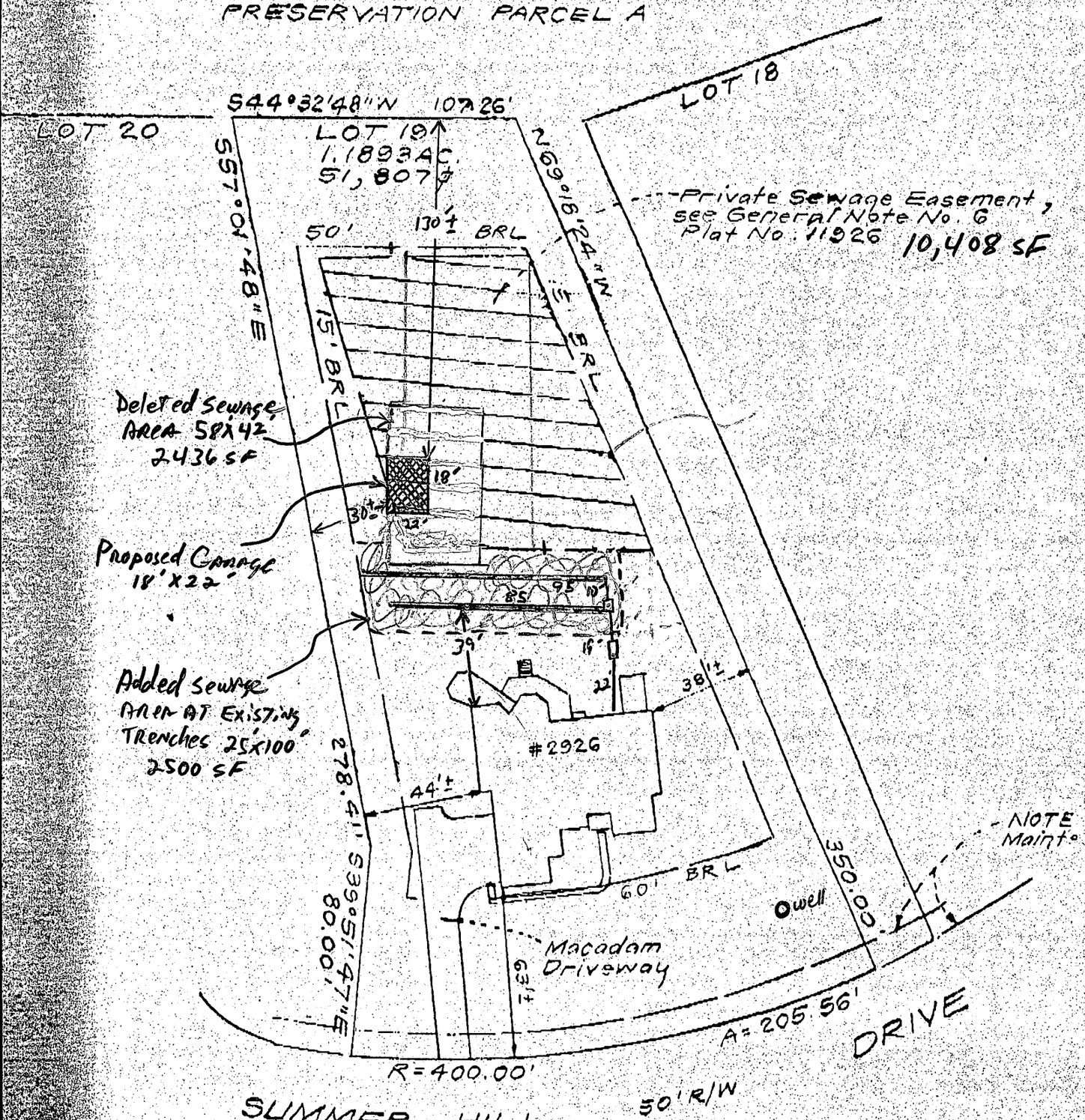
410-461-5508

BURCHARDT - LOT 19



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