

Property is Now Identified as Parkside lot 16 on current Tape Maps of 9/26/80

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

03-310450
INDEXED

DISTRICT 3rd

DATE 11/10/88

DATE SYSTEM APPROVED 11/30/88

INSPECTOR C. Waller

J. Emerson Feaga & Son Excavating

IS PERMITTED TO INSTALL X ALTER

ADDRESS 1625 Henryton Road, Marriottsville, MD

PHONE 442-5623

SUBDIVISION Bracciale Property

ROAD 1820 Woodstock Road

LOT 2

PROPERTY OWNER Vincent Bracciale

ADDRESS

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

GARBAGE GRINDER? YES NO X

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

TRENCHES - 160 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 3.0 feet below original grade. Bottom maximum depth 8.0 feet below original grade. Effective area begins at 3.0 feet below original grade. 5.0 feet of stone below distribution pipe.

LOCATION - From the right rear corner, place the distribution box 165 feet down the right (342.45') lot line and 130 feet off the same lot line as seen when facing the lot from Woodstock Road. Run trenches on contour toward the rear right corner AND

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

PLANS APPROVED BY

Sid Abel

DATE 8/19/88

COVER NO WORK UNTIL INSPECTED AND APPROVED

*EITHER 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

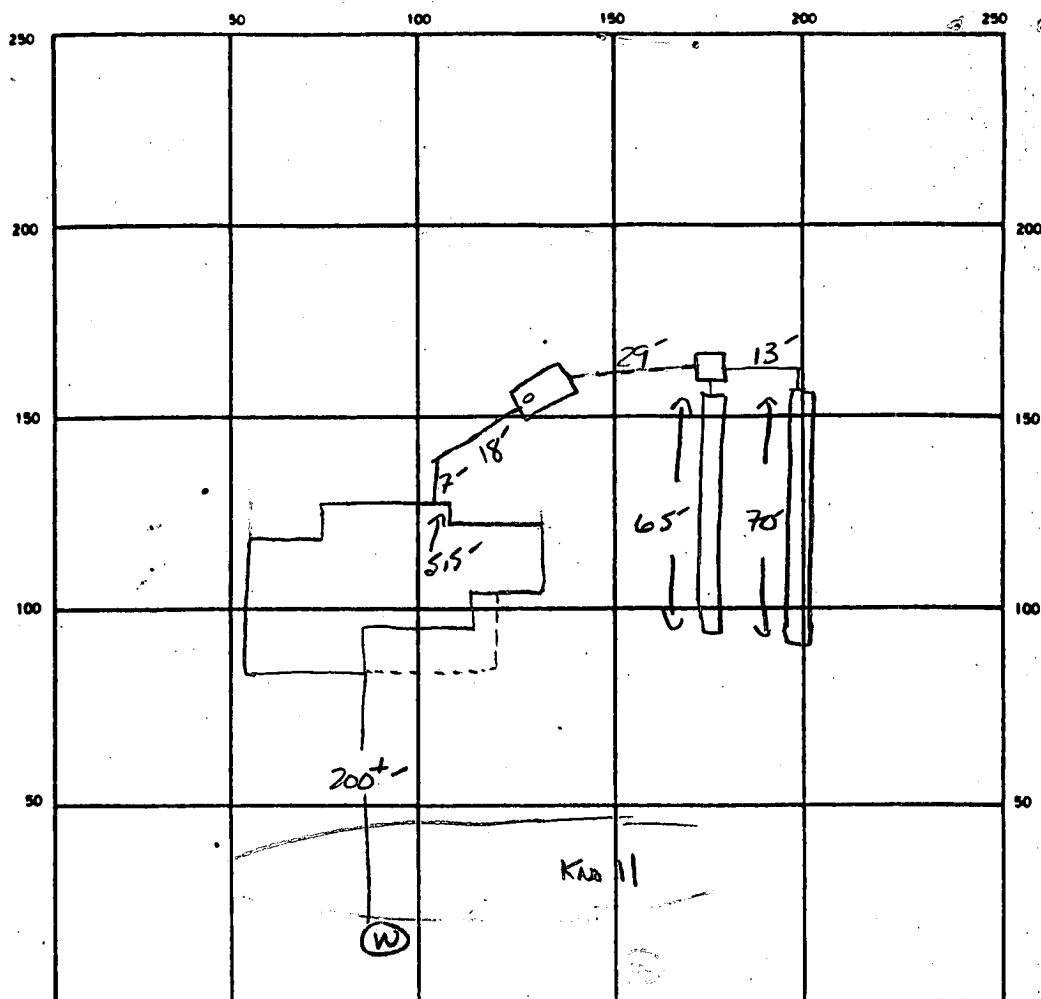
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

LOG PERMITS SIGNED
AND RETURNED 11/8/2000
B00127340 REPLACING
EXISTING GARAGE WITH ONE
OF DIFFERENT DIMENSIONS.

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

A 34925



INDICATE NORTH — NAME ADJOINING ROADWAY AS BASE LINE

WOODSTOCK Rd.

SEPTIC TANK. LEVEL ✓ 1500 GAL CLEANOUTS ST ✓

DISTRIBUTION BOX. LEVEL ✓

DRAIN FIELD/TILE FIELD. DEPTH 8 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 5 FT. TOTAL LENGTH (1) 65 (2) 70 135 FT

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 685 SQ. FT.

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

ABSORBENT AREA 685 SQ. FT.

REMARKS 11/29/88 OK TO ADD SPRING - Pipe from H → ST → DB SAG

11/30/88 OK TO COMEN. CW.

DATE SYSTEM APPROVED

11/30/88

INSPECTOR

CW [Signature]

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 34925

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT _____

DATE 2/04/85

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 Gleneing Manor Associates
12533 Folly Quarter Road
ADDRESS Ellicott City, Maryland 21043 PHONE 531-6455 Don Reuwer

PROPERTY LOCATION:

SUBDIVISION Bracciale Property LOT NO. X 2

ROAD AND DESCRIPTION Woodstock Road

SIZE OF LOT 3.08 Acres TYPE BLDG. 3 or 4 Bedrooms
(NUMBER OF BEDROOMS)

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. /s/ Donald R. Reuwer, Jr.
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

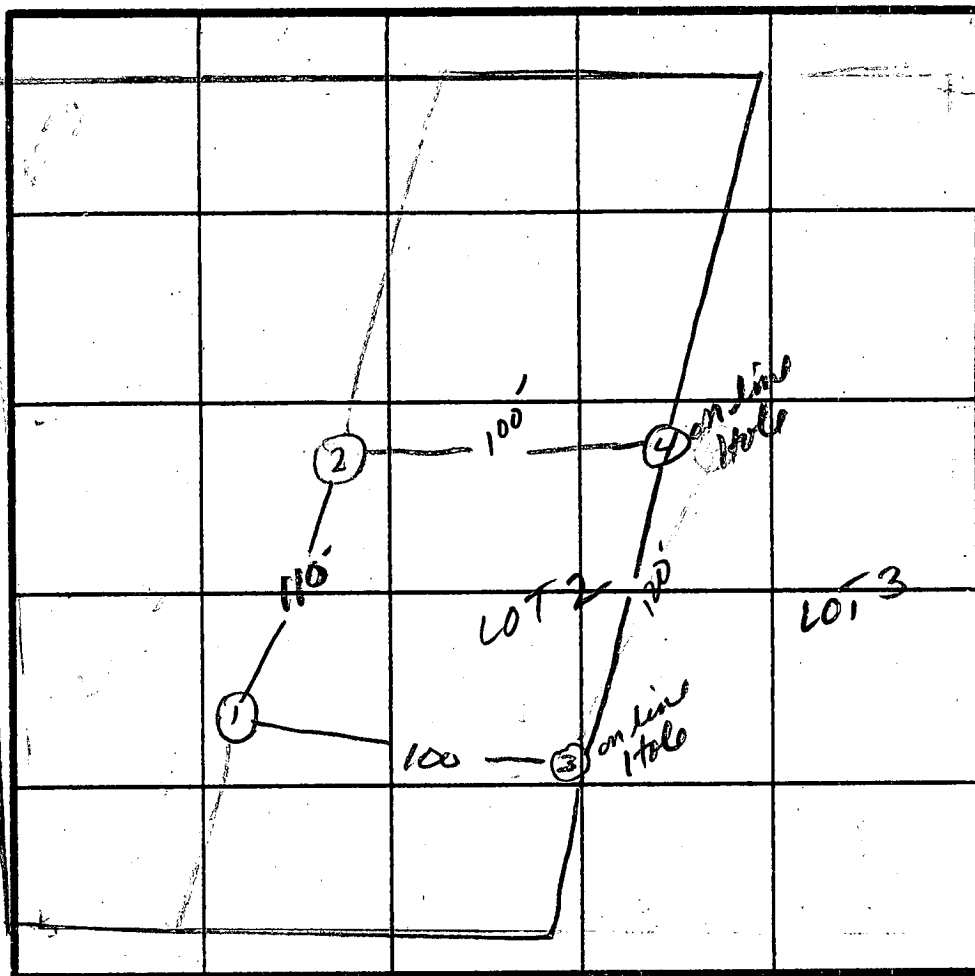
THIS IS NOT A PERMIT

① ② ③ ④
SOIL PROFILE

0'
1'
2.5'
14'

AP
Brown
CLAY LOAM
510% SAPROXITE
Brown
Silty
SAND
20-30%
SAPROXITE

PROPOSED RIGHT OF WAY



INLET 3.0'
DEPTH 9'
 $\bar{X}$ = 3min

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.
WOODSTOCK RD.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2/8/85	1S	4"	12:26	12:29	12:29	12:32	3min
	1V	14"					
11	2S	4"	12:28	12:29	12:29	12:31	2min
	2V	14"					
12	3S	3"	12:30	12:31	12:31	12:34	3min
	3V	14"					
	4S	3"	12:30	12:31	12:31	12:33	2min
	4V	14"					

REMARKS _____

TYPE OF SOIL Glenn - loam - minimal clay layer - micaceous

TESTED BY S. Abel / C. Williams

ALSO PRESENT KETTERMAN / REUWER

SEQUENCE NO.
(DP USE ONLY)STATE OF MARYLAND
PERMIT TO DRILL WELL

STATE PERMIT NUMBER

NUMBERS TO BE PUNCHED
ON ALL CARDSH0-88-0077
fill in this form completely

Approved (APA)

OWNER INFORMATION

8 319 13
 15 Last Name TEWISSATT Owner First Name COAST 34
 36 8401 MURRAY RD 55
 57 LAUREL Town 70 State 72 MD Zip 76 21040

DRILLER INFORMATION

Driller's Name Ronald L. Kyker 77 License No. 80 296
 Firm Name Westminster Rotary Well Drilling, Inc.
 P.O. Box #861., Westminster, Md. 21157
 Address Barnd L. Kyker Date 07/15/88

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 5
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 450

USE FOR WATER (CIRCLE APPROPRIATE BOX)

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

APPROXIMATE DEPTH OF WELL 240 FEETAPPROXIMATE DIAMETER OF WELL 6 INCH NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN
☒ AIR-ROTARY ☐ AIR-PERCUSION ☐ ROTARY (Hydraulic Rotary)
☐ CABLE ☐ REVERSE-ROTARY ☐ DRIVE-POINT
 other _____

REPLACEMENT OR DEEPEMED WELLS
(CIRCLE APPROPRIATE BOX)

- ☒ THIS WELL WILL NOT REPLACE AN EXISTING WELL
☐ THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
☐ THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
☐ THIS WELL WILL DEEPEMED AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) _____

Not to be filled in by driller (OEP USE ONLY)

APPROX. PERMIT NUMBER _____ G A P _____

FORCE CL WRITE INITIALS IN BOX PERMIT No. H0-88-0077

SPECIAL CONDITIONS

490-3666

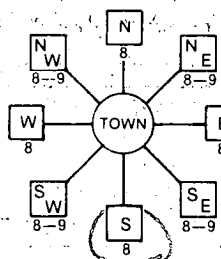
B 3

LOCATION OF WELL

H0WARD COUNTY
BRACCA, ALE. AREA SUBDIVISION
 SECTION 44 LOT 2
WOODSTOCK NEAREST TOWN
 MILES FROM TOWN (enter 0 if in town) 1 M I

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

Woodstock Road
NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

DISTANCE FROM ROAD 400ENTER FT or MI FTNOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

COUNTY NAME H0W COUNTY NO. A34925
 STATE SIGNATURE _____ INSERT S _____
 DATE ISSUED 080488 CO-SIGNATURE C. B. D. EXP. DATE 2/4/89
 NORTH GRID 542000 EAST GRID 0833000

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

- City
-
-

WRITE THE BOX NUMBER FROM THE MAP HERE

834
 540

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

N

8-17-88 10-10-80
 63' casing
 16 bags of cement
 8" casing above the ground
 Tag on 8/17
 C.B.D. 8/17
 Woodstock Rd.

COUNTY

1 of 1
August 17, 1988

Review OK 8/28/88 CW

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 88-0077
Location of property (road) Woodstock Road
Subdivision Bracciale Lot 2 Block Plat Sec.
Well Driller Westminster Rotary Owner Wimsatt Construction Co, T.E.

Depth of well 503 Ft.
Distance of measuring point (M.P.) above ground 2 Ft.
Static water level (S.W.L.) below M.P. 39

I. High rate pumping -- reservoir drawdown

Time pump started 7:55 Am Pumping rate 15
Total time to reach pumping water level ft. below M.P.

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

TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE time to fill XX 1 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
7:55	39	4 Sec.		15
8:10	113	4 Sec.		15
8:25	143	4 Sec.		15
8:40	162	4 Sec.		15
8:55	174	4 Sec.		15
9:10	180	4 Sec.		15
9:25	184	4 Sec.		15
9:40	188	5 Sec.		12
9:55	190	5 Sec.		12
10:10	188	6 Sec.		10
10:25	186	6 Sec.		10
10:40	184	6 Sec.		10
10:55	182	6 Sec.		10
	PUMP SET AT 460 FEET			

08/17/88

T. E. Wimsatt Construction Co.
8401 Murphy Road
Laurel, Maryland 20707

Bracciale Property
Lot 2
Woodstock Road

State of Maryland-HO-88-0077
Howard County Health Dept. # A34925

LOG OF DRY HOLE #1 - 403 Feet

Dirt	0	1
Soft Brown & Red Clay	1	6
Soft Brown		
Mica	6	50
Hard Black Sandstone	50	60
Hard, Soft Brown & Blue Sandstone	60	80
Hard Black & Blue Mica	80	403

2 Bags Cement to
Backfill

2/2/89
PM

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

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation X
Replacement _____

Receipt # 43578
Date 2/1/89

Name of Installer FERGA Plumbing & Heating Telephone 442-5729

License Number 6318

Certified Well Pump Installer _____ Well Driller _____ Registered Plumber X

Name of Property Owner T.E. Wimsatt Const. Telephone 490-3666

Subdivision _____ Lot # 2 Well Tag # HO-88-0077

Site Address 1820 Woodstock Rd

Pump

1. Type

- a. Deep well jet _____
b. Shallow well jet _____
c. Submersible X

2. Make Gould

3. Model # _____

4. Capacity 5 GPM

5. Pump exceeds well capacity Yes _____ No X

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 X

Motor

1. Horsepower 1

2. RPM 1740

3. Voltage _____

a. 110 _____

b. 220 X

Pitless Adapter

1. Make _____

2. Model # _____

3. Depth _____

Tank

1. Capacity 429A1

2. Pressure relief valve? YES

Piping

1. Type PLASTIC

2. Size 1 in

3. NSF and/or BOCA Code approved _____

4. Depth of supply line 500 ft

Well data

1. Depth 500 ft.

2. Yield _____ GPM

3. Static water level _____ ft.

4. Will water supply be disinfected by installer? YES

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

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

Signature of Applicant: Kenny Leysa

Date: 2/1/89

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

HD-215

2/2/89 - Cover Outside work
Pressure Tank being installed now
RJ

9612

SEQUENCE NO.
(DENY USE ONLY)STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPETHIS REPORT MUST BE SUBMITTED WITHIN
45 DAYS AFTER WELL IS COMPLETED.COUNTY
NUMBER

A 34925

DATE WELL COMPLETED

08.17.98

Depth of Well

22 503 26
(TO NEAREST FOOT)PERMIT NO.
FROM "PERMIT TO DRILL WELL"

HO-88-0977

OWNER

last name first name TOWN

SUBDIVISION SECTION LOT

WELL LOG

Not required for driven wells

STATE THE KIND OF FORMATIONS
PENETRATED; THEIR COLOR, DEPTH,
THICKNESS AND IF WATER BEARINGDESCRIPTION (Use
additional sheets if needed)

FEET

FROM TO

Check
if water
bearing

Dirt	0	1	
Soft Brown			
Mica & Red			
Clay	1	8	
Soft Brown			
Mica	8	30	
Hard Blue			
Mica	30	42	
Hard, soft,			
Brown & Blue			
Mica	42	58	
Hard, soft,			
Brown & Blue			
Mica	58	90	X
Hard Blue &			
Black Mica	90	390	X
& Sandstone			
Hard Black			
Granite	390	440	X
Hard Blue &			
Black Mica	440	503	

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL

CEMENT **CM** BENTONITE CLAY **BC**

NO. OF BAGS 16 NO. OF POUNDS 1504

GALLONS OF WATER 96

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 41 ft.
(enter 0 if from surface)casing types
insert
appropriate
code
below
Casing Record
ST **CO**
STEEL CONCRETE
PL **OT**
PLASTIC OTHERMAIN Nominal diameter Total depth
CASING top (main) casing of main casing
TYPE (nearest inch) (nearest foot)**S** **T** **G** **G** **3**
60 61 63 64 66 70OTHER CASING (if used)
diameter depth (feet)
inch from toscreen type
or open hole
insert
appropriate
code
below
Screen Record
ST **BR** **HO**
STEEL BRASS OPEN
PL **OT**
PLASTIC OTHERC2
1 2
EACH SCREEN
DEPTH (nearest ft.)
1 8 9 11 15 17 21
2 23 24 26 30 32 36
3 38 39 41 45 47 51SLOT SIZE 1 2 3
DIAMETER OF SCREEN (NEAREST INCH)
56 60GRAVEL PACK
IF WELL DRILLED WAS
FLOWING WELL INSERT
F IN BOX 68OEP USE ONLY
(NOT TO BE FILLED IN BY DRILLER)
T (E.R.O.S.) WQ
70 72 74 75 76
TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min. to nearest gal.) 10

METHOD USED TO
MEASURE PUMPING RATE Submersible

WATER LEVEL (distance from land surface)

BEFORE PUMPING 39

WHEN PUMPING 181

TYPE OF PUMP USED (for test)

A air **P** piston **T** turbine
27 27 27
C centrifugal **R** rotary **O** other (describe below)
27 27 27
J jet **S** submersible
27 27

PUMP INSTALLED

DRILLER WILL INSTALL PUMP YES NO

IF DRILLER INSTALLS PUMP, THIS SECTION
MUST BE COMPLETED FOR ALL WELLS
EXCEPT HOME USE
TYPE OF PUMP INSTALLED
PLACE (A,C,J,P,R,S,T,O)
IN BOX - SEE ABOVE: 29CAPACITY:
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)+ above
- below
LAND SURFACE 2 (nearest foot)
49 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)CIRCLE APPROPRIATE LETTER
A WELL WAS ABANDONED AND SEALED
WHEN THIS WELL WAS COMPLETED

E ELECTRIC LOG OBTAINED

P TEST WELL CONVERTED TO PRODUCTION
WELLI HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN
ACCORDANCE WITH COMAR 10.17.13 "WELL CONSTRUCTION"
AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE
ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION
PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST
OF MY KNOWLEDGE.

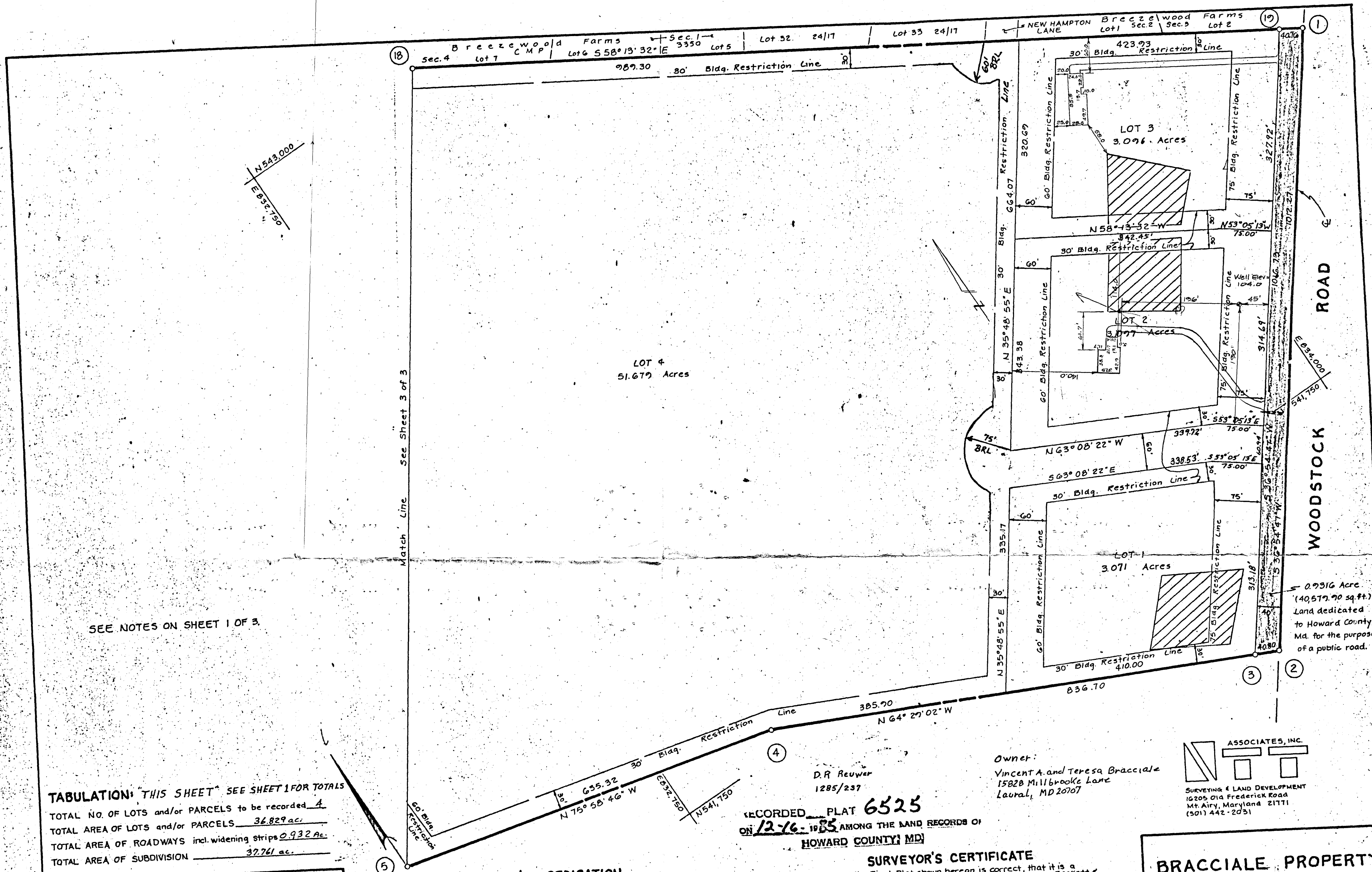
DRILLERS IDENT. NO. 296

Ronald L. Kyker

DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)SITE SUPERVISOR (sign. of driller or journeyman
responsible for sitework if different from permittee)

COUNTY

1 DRY HOLE - 403 FT.



APPROVED: FOR Private WATER and Private SEWERAGE SYSTEMS, IN CONFORMANCE WITH THE MASTER PLAN OF WATER AND SEWERAGE FOR HOWARD CO., HOWARD CO. DEPT. OF HEALTH and MENTAL HYGIENE

Joyce M. Boyd M.D. per F.S. 11-18-85
County Health Officer Date

APPROVED: HOWARD COUNTY OFFICE OF PLANNING AND ZONING

James L. Harris 12-13-85
Director Date

APPROVED: FOR STORM DRAINAGE SYSTEMS, PUBLIC WATER and PUBLIC SEWER, and PUBLIC ROADS, HOWARD CO. DEPT. OF PUBLIC WORKS

Walter F. Newmyer 12-11-85
Director Date

OWNER'S DEDICATION

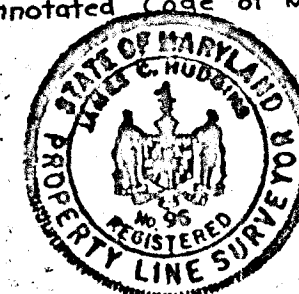
I, (We) Vincent A. and Teresa Bracciale owner(s) of the property shown and described hereon, hereby adopt this plan of subdivision and in consideration of the approval of this Final Plat by the Office of Planning and Zoning, establish the min. Bldg. Restriction Lines and grant unto Howard Co., Md., its successors and assigns, (1) the right to lay, construct and maintain sewers, drains, water pipes and other municipal utilities and services, in and under all roads and street rights-of-way and the specific easement areas shown hereon; (2) the right to require dedication for public use the beds of the streets and/or roads and floodplains and open space where applicable, and for good and other valuable consideration, hereby grant the right and option to Howard County, Md., to acquire the fee simple title to the beds of the streets and/or roads and floodplains, storm drainage facilities and open space where applicable; (3) the right to require dedication of waterways and drainage easements for the specific purpose of their construction, repair and maintenance; and (4) that no bldg. or similar structure of any kind shall be erected on or over the said easements and rights-of-way.

Owner Vincent A. and Teresa Bracciale Date 2/18/85
Witness James L. Harris Date 3/12/85

RECORDED PLAT 6525
ON 12-16-85 AMONG THE LAND RECORDS OF
HOWARD COUNTY, MD.

SURVEYOR'S CERTIFICATE

I hereby certify that the Final Plat shown hereon is correct, that it is a subdivision of all the lands conveyed by Russell V. and Hazel L. Beckett & Frank F. and Emma E. Favazza to Vincent A. and Teresa Bracciale deed dated Sept. 12, 1984 and recorded in the Land Records of Howard County in Liber 1285 Folio 247, and that all monuments are in place, or will be in place prior to the acceptance of the streets in the subdivision by Howard Co. as shown, in accordance with the Annotated Code of Maryland, as amended.



James L. Harris 3-15-85
Surveyor Date

BRACCIALE PROPERTY
LOTS 1, 2, 3 and 4
Parcel 36 Tax Map 10
SHEET 2 OF 3

3rd Election District, Howard County, Md.
Scale: 1" = 100' Date: 3-15-85

F-85/14

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3430 COURT HOUSE DRIVE ELLCOTT CITY, MD 21043 PERMITS (410)313-2456 INSPECTIONS (410)313-1810 AUTOMATED INFORMATION (410) 313-3800	HOWARD COUNTY PERMIT APPLICATION	PERMIT NUMBER <u>B 00127340</u>
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Building Address <u>1820 Woodstock Rd.</u> <u>Woodstock MD 21163</u>	Property Owner's Name <u>DAVID M. AL-ABED</u> Address <u>1820 Woodstock Rd.</u> City <u>Woodstock</u> State <u>MD</u> Zip Code <u>21163</u> Home Phone <u>410-465-1814</u> Work Phone <u>301-483-7161</u> Applicant's Name & Mailing Address, (if other than stated hereon): Phone _____ Fax _____
Suite/Apt. #: _____ SDP/WP/Petition #: _____ Census Tract <u>6030</u> Subdivision <u>Bracciano</u> Section <u>16</u> Area _____ Lot <u>16</u> Tax Map <u>10</u> Parcel <u>36</u> Grid <u>24</u> Zoning <u>RC</u> Map Coordinates <u>6013</u> Lot size _____	Contractor Company <u>R. Wayne Kline Bldr.</u> Contact Person <u>Wayne Kline</u> Address <u>9306 Lenks Rd.</u> City <u>Linkersville</u> State <u>MD</u> Zip Code <u>21793</u> License No. <u>17880</u> Phone <u>301-898-3218</u> Fax _____
Existing Use <u>SFD with Garage</u> Proposed Use <u>SFD with Garage Replaced</u> Estimated Construction Cost \$ <u>36,500</u> Description of Work <u>Building 25x24 detached</u> <u>garage / 24x26 w/ 8 ft</u>	Engineer or Architect Company _____ Contact Person _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____
Occupant or Tenant <u>DAVID M. AL-ABED</u> Contact Name <u>DAVID M. AL-ABED</u> Address <u>1820 Woodstock Rd.</u> City <u>Woodstock</u> State <u>MD</u> Zip Code <u>21163</u> Phone <u>410-465-1814</u> Fax _____	

BUILDING DESCRIPTION - <u>COMMERCIAL</u>		BUILDING DESCRIPTION - <u>RESIDENTIAL</u>	
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 Characteristics SF Dwelling ☐ SF Townhouse ☐ Depth _____ Width _____ 1st floor: _____ 2nd floor: _____ Basement: _____ Finished Basement ☐ Unfinished Basement ☐ Crawl space ☐ Slab on Grade ☐ No. of Bedrooms _____ Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____ Other Structure: _____ Dimensions: _____ Footings: _____ Roof: _____ ☐ State Certified Modular ☐ Manufactured Home	Utilities Water Supply: _____ ☐ Public ☒ Private Sewage Disposal: _____ ☐ Public ☒ Private Electric Yes ☐ No ☐ Gas Yes ☐ No ☐ Heating System: Electric ☐ Oil ☐ Natural Gas ☐ Propane Gas ☐ Sprinkler system: ☐ N/A ☐ ☒ NFPA #13D ☐ NFPA #13R ☐ Other

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

<u>David M. Al-Abed</u> Applicant's Signature <u>V.P. Manufacturing / CIENA</u> Title/Company	<u>DAVID M. AL-ABED</u> Print Name/ <u>11/7/00</u> Date
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Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**

**** PLEASE WRITE NEATLY AND LEGIBLY. ****

- FOR OFFICE USE ONLY -

AGENCY ☒ Land Development, DPZ ☒ State Highways ☒ Building Official ☒ Dev. Engineering, DPZ ☒ Health ☒ Fire Protection Is Sediment Control approval required prior to issuance? YES ☐ NO ☐	DATE <u>11/7/00</u> SIGNATURE APPROVAL <u>[Signature]</u> DPZ SETBACK INFORMATION Front: <u>75 FT</u> Rear: <u>60 FT</u> Side: <u>10 FT (Garage)</u> Side St.: <u>60 FT only</u> 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# <u>48656</u> Filing fee \$ <u>25</u> Permit fee \$ <u>175</u> Excise tax \$ <u>0.14</u> Sub-total paid \$ _____ Add'l permit fee \$ _____ TOTAL FEES \$ <u>200</u> Balance due \$ _____ Check # <u>2201</u> Validation # <u>29846</u> Accepted by <u>[Signature]</u>
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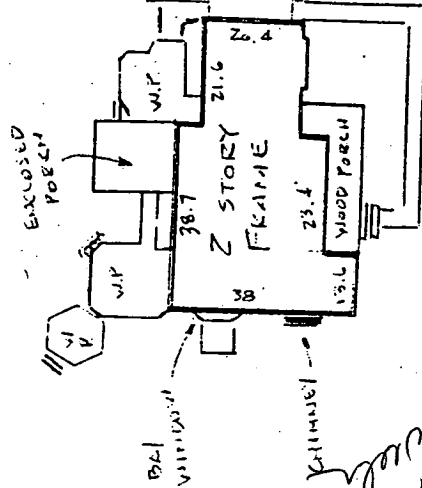
CONTINGENCY CONSTRUCTION START: ☐
ONE STOP SHOP: ☐

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

APR 8 1964

2000 NO -8 PM 3:10
MACADAM
LINEWAY

MACADAMIA
DRIVE Wd.

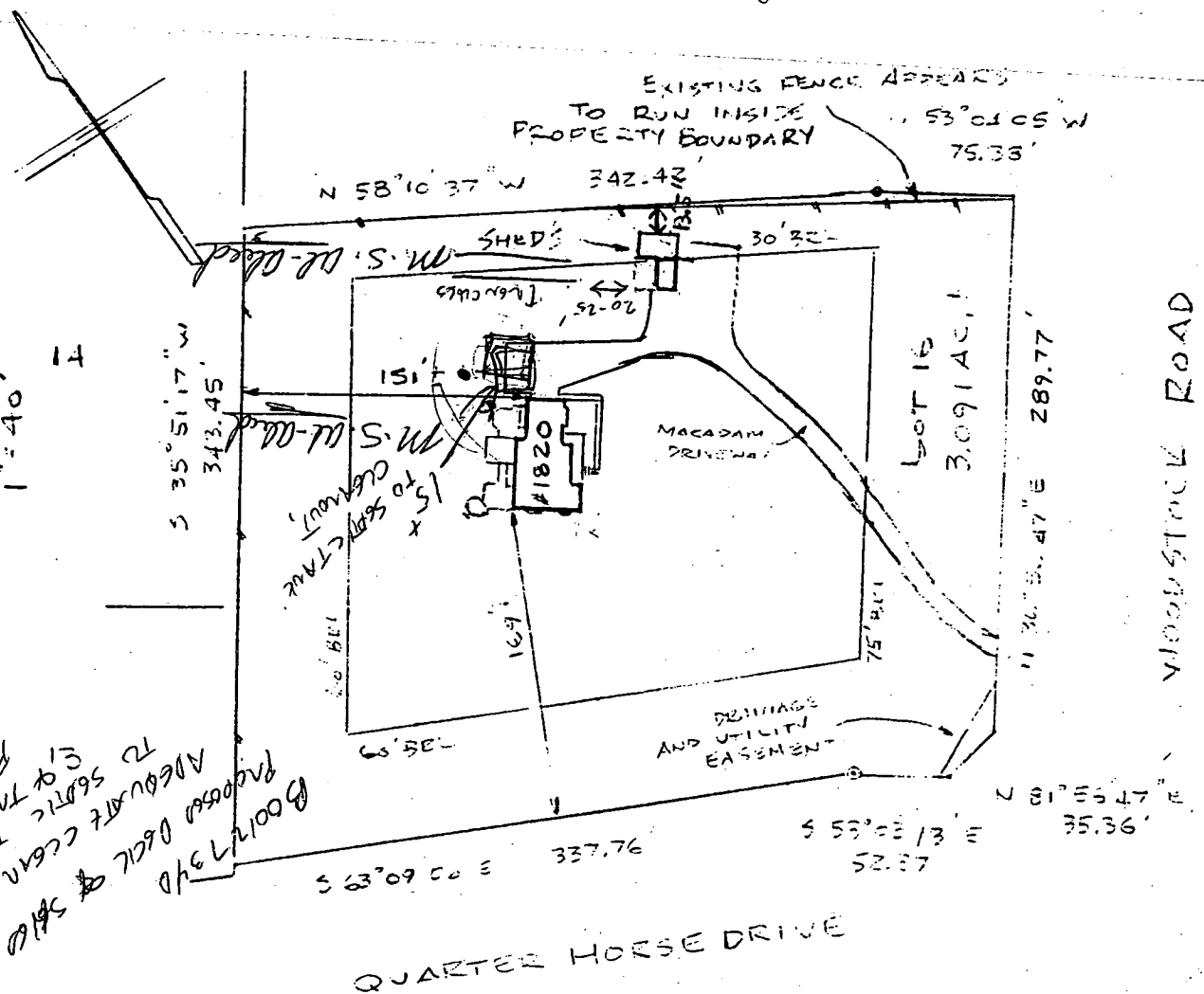


ENLARGEMENT

140

7/8/06
How
BTL
VIRGINIA

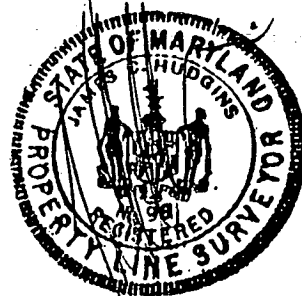
Booth 17340
ADGENT CLEANANCE
TO S6012 TAKE
C14 TRUCKS
11/8/05
Pavilion.



Subject property is shown in Zone C
on the National Flood Insurance Program
Flood Insurance Rate Map of Howard
County, Maryland. Panel # 16CP-45
Community Panel # 240044-0010B
Effective Date: DEC. 4, 1986

This is to certify that I have surveyed the property known as LOT 16
1820 WOODSTOCK ROAD
sheet of recorded PLAT NO 9682 among the Land Records of HOWARD County, Maryland for the purpose of locating the improvements thereon.

THIS PLAT SHOWS ONLY THAT THE IMPROVEMENTS ARE
CONTAINED WITHIN THE OUTLINES OF THE LOT AND IS
NOT TO BE USED TO ESTABLISH PROPERTY LINES.



J. Carl Huggins PLS#96

LOCATION SURVEY
1820 WOODSTOCK ROAD
PARKSIDE
3RD ELECTION DISTRICT
HOWARD COUNTY, MD.

NTT ASSOCIATES, INC.
16205 Old Frederick Road
Mt. Airy, Maryland 21771
Phone 442-2031

Scale 1" = 100'
Date OCTOBER 6, 1999
Field By ✓
Drawn By ✓
Drawing # AZC 60-1