

12/9/99  
Anytime  
12/10/99 3:00  
12/13/99 3pm CANC  
12/14/99 1:00

# PERMIT

## SEWAGE DISPOSAL SYSTEM

### DEPARTMENT OF HEALTH AND MENTAL HYGIENE

05-347009

P 5/31/66  
A REPAIR

DISTRICT \_\_\_\_\_

DATE 12/9/99

DATE SYSTEM APPROVED 12/14/99

INSPECTOR M. Kiffin

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXXXX~~ 410-313-2640

### INDEXED

Zepp Plumbing

IS PERMITTED TO INSTALL \_\_\_\_\_ ALTER X

ADDRESS 6344 Ten Oaks Rd Clarksville PHONE 410-531-6712

SUBDIVISION Coleman-Lerch LOT 6 ROAD 14600 Triadelphia Mill Rd

PROPERTY OWNER Kammeyer

ADDRESS \_\_\_\_\_

SEPTIC TANK CAPACITY \_\_\_\_\_ GALLONS

NUMBER OF BEDROOMS \_\_\_\_\_

\_\_\_\_\_ SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED \_\_\_\_\_

PURPOSE - In support of B00118019 to connect plumbed garage sewer line to ex. house

PLANS APPROVED BY \_\_\_\_\_ DATE \_\_\_\_\_

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 VEGETATION (EXCEPT GRASS) UNLESS OTHERWISE AUTHORIZED)

**BUILDING PERMIT SIGNED AND RETURNED**

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES) 4/2/2003 B00140990 CLOSET + STORAGE AREA

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

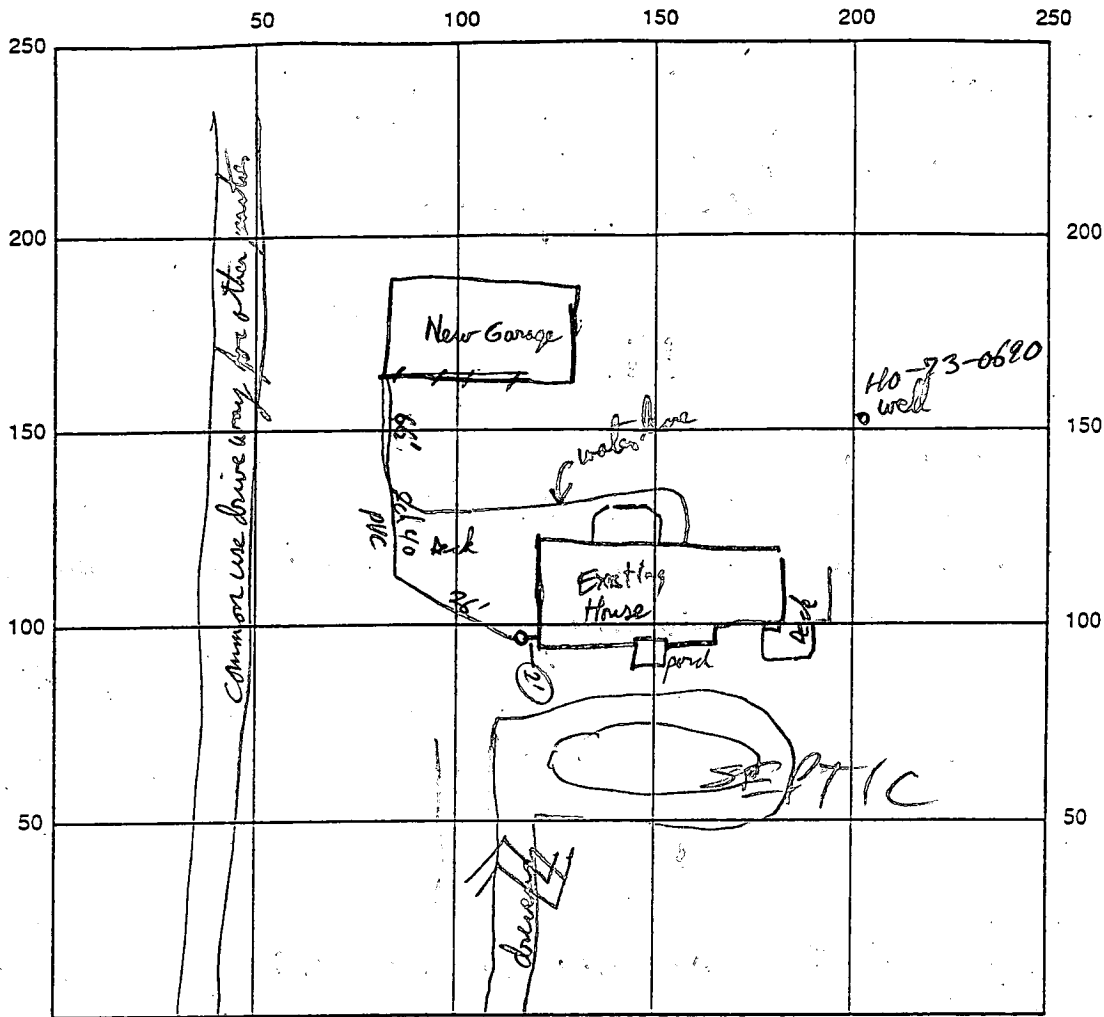
PERMIT VOID AFTER TWO YEARS

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

R579166



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL \_\_\_\_\_ CLEANOUTS \_\_\_\_\_

DISTRIBUTION BOX LEVEL \_\_\_\_\_

DRAIN FIELD/TITLE DEPTH \_\_\_\_\_ FT. TRENCH WIDTH \_\_\_\_\_ FT. INLET DEPTH \_\_\_\_\_ FT.

EFFECTIVE GRAVEL DEPTH \_\_\_\_\_ FT. TOTAL LENGTH \_\_\_\_\_ FT.

NUMBER OF TRENCHES \_\_\_\_\_ ONE SIDEWALL/BOTTOM AREA \_\_\_\_\_ SQ. FT.

DRYWALL INSIDE DIAMETER \_\_\_\_\_ FT. EFFECTIVE DEPTH BELOW INLET \_\_\_\_\_ FT.

ABSORBENT AREA \_\_\_\_\_ SQ. FT.

REMARKS: Block connector with But waterline lies in same trench right beside sewer line. It is jacketed for 9ft of length in corner trench & unjacketed where pipes emerge from under slab. There are properly sealed junctions on both ends of 2" Sch 40 pipe fittings. 12/9/89 water line should be 12' above top of sewer line or 10' minimum horizontal distance from sewer line. It to house & left house on 2nd side. 12/9/89 RJ

discussed problem & steps Mon 12/10/89

12/14/89 SLEEVING COMPLETE (M)

DATE SYSTEM APPROVED 12/14/89 INSPECTOR M. Ripken

7/2/74

# PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLCOTT CITY

## INDEXED

DISTRICT 1

DATE 8/30/74

Jack Frost IS PERMITTED TO INSTALL X ALTER

ADDRESS 728 Olive Road, Clarks, Md. PHONE 286-2300

A SEWAGE DISPOSAL SYSTEM LOCATED AT \_\_\_\_\_

SUBDIVISION \_\_\_\_\_ ROAD (14) 00 Colchic Mill LOT 30

PROPERTY OWNER Phillip & Ann Gordon Kenneth & Sonia Khameyer

ADDRESS 12622 Lehill Road, Silver Spring, Md. 20906 940-8452

SPECIFICATIONS - 3 bedrooms

DRAIN FIELD \_\_\_\_\_ DEPTH \_\_\_\_\_ FEET, BOTTOM AREA \_\_\_\_\_ SQ. FT.

SEEPAGE PITS \_\_\_\_\_ ADSORBENT SIDEWALL AREA \_\_\_\_\_ SQ. FT.

SEPTIC TANK CAPACITY 1,000 GALLONS

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 25% & TANK CAPACITY 50%

OTHER Dry well to have 125 sq. ft. effective adsorbent sidewall area per bedroom

below inlet. Inlet to be 2 ft. below original grade and maximum depth 104 ft.

Location 967 ft. from left front corner along left property line and to 120 ft. from

left property line, (Per hole 4 & 5)

NOTE: ALL PIPE FROM HOUSE TO DRY WELL MUST BE CAST IRON.  
FRIGHT VOID AFTER THREE YEARS.

PLANS APPROVED BY C. Stegok DATE 9/19/73

NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL.  
FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

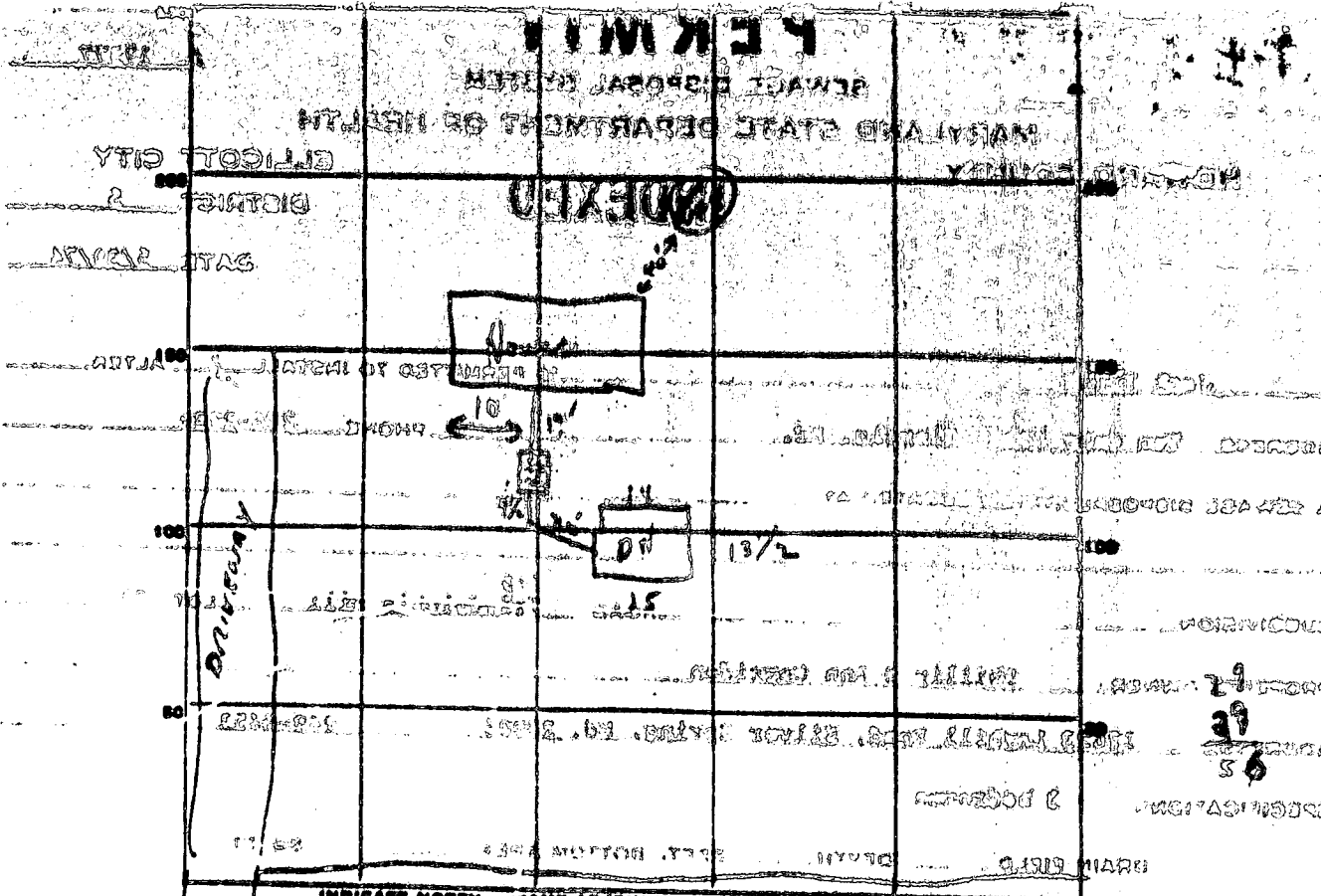
NEITHER THE HOWARD COUNTY COMMISSIONERS NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

SEWAGE PERMIT SIGNED  
RETURNED 6-14-77  
Serial # 53568 SF.O  
detached 3 on quays

BLDG. PERMIT SIGNED  
AND RETURNED 7/25/73  
Serial # 53568 SF.O

17577

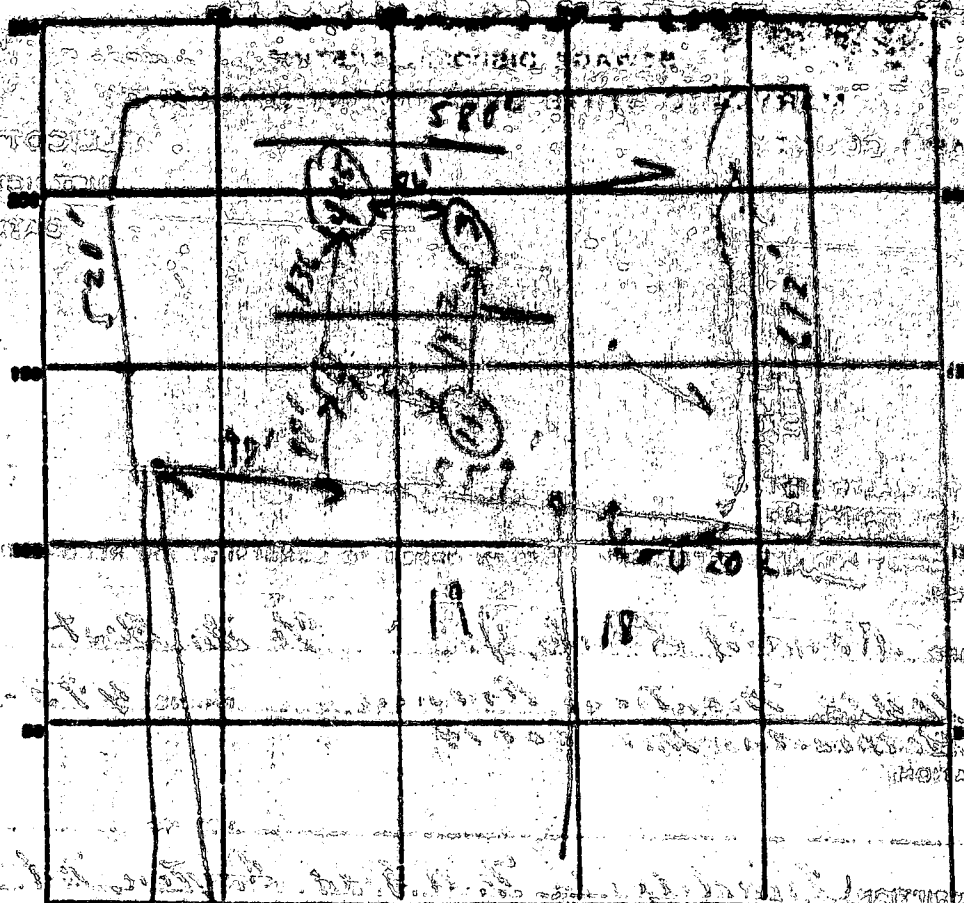
34467-A



PERMIT CARD \_\_\_\_\_  
 SEPTIC TANK, LEVEL \_\_\_\_\_  
 DISTRIBUTION BOX, LEVEL \_\_\_\_\_  
 TILE FIELD, DEPTH \_\_\_\_\_ FT. TRENCH WIDTH \_\_\_\_\_ FT.  
 GRAVEL DEPTH \_\_\_\_\_ FT. TOTAL LENGTH \_\_\_\_\_ FT. **375**  
 NUMBER OF TRENCHES \_\_\_\_\_ TOTAL BOTTOM AREA \_\_\_\_\_  
 SEEPAGE PITS, INSIDE DIAMETER outside permit **56 3/4** FT. DEPTH BELOW INLET **7 1/2** FT. **2**  
 ABSORBENT AREA **420** SQ. FT. **38**

REMARKS \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

DATE SYSTEM APPROVED 7/2/94 INSPECTOR C. [Signature]



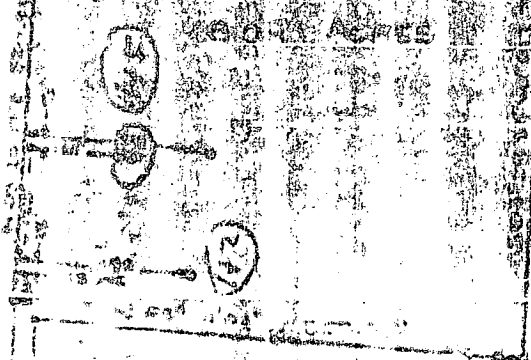
INDICATE NORTH - NAME ADJOINING ROADWAY AS EDGE LINE.

*Trudolph Rd*

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11/9/73	1	4'	2:10	2:12	2:12	2:15	3 min
	2	11'	2:10	2:12	2:12	2:17	5 min
	3	10'	Soil coil				
	4	3'	2:21	2:23	2:23	2:28	5 min
	5	10 1/2'	2:21	2:24	2:24	2:30	6 min
	6	11'	Soil coil				4/19

SOIL AUGER FINDING: *Moist soil Base*  
 TESTED BY: *K. J. [unclear]* *Hold at 10 1/2' Rock below to*

INVERTED



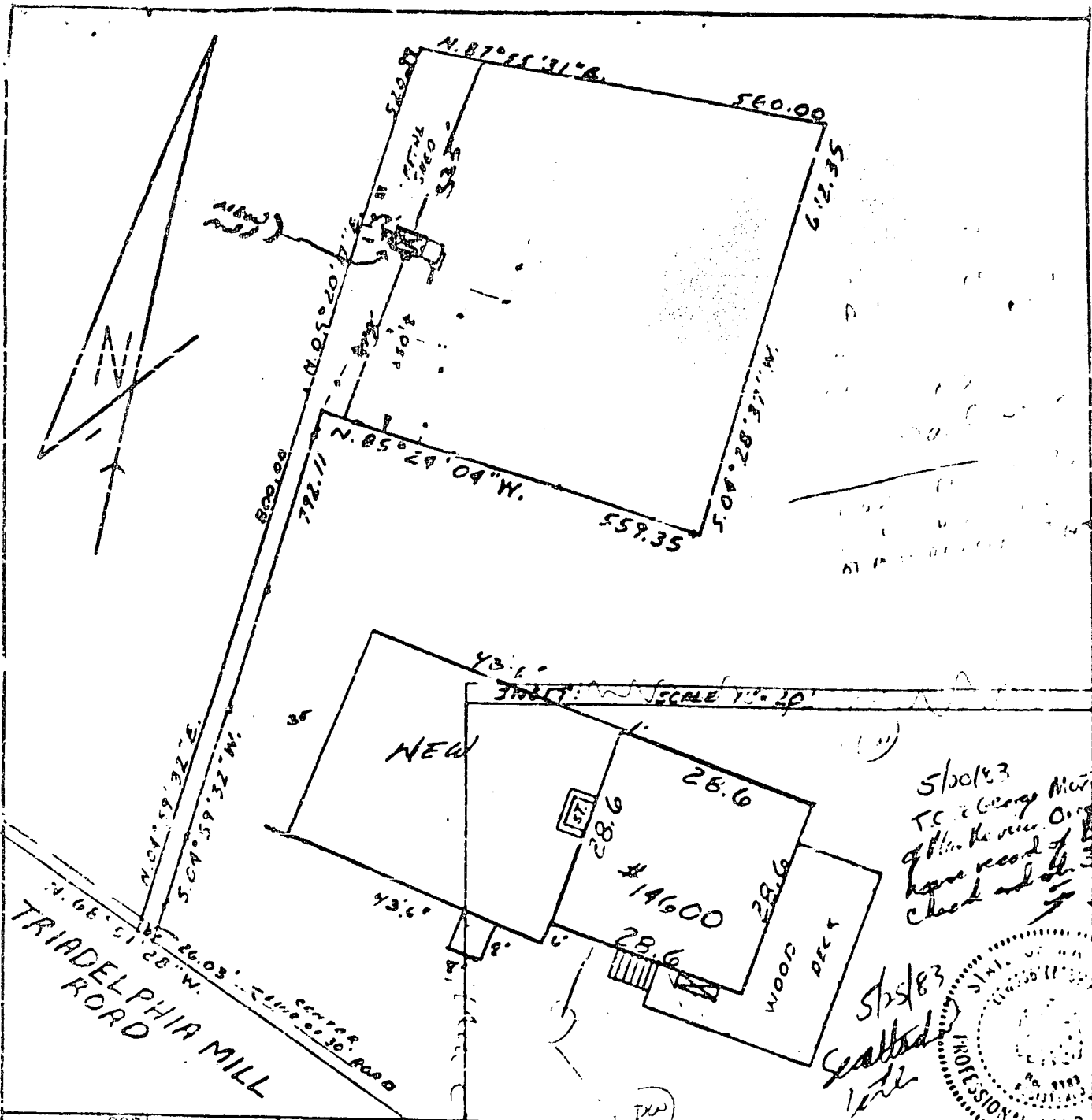
PLAT OF SURVEY  
 FOR  
 DONALD LEE  
 FIFTH ELECTION DISTRICT  
 DAYTON, OHIO  
 SCALE: 1" = 200 FT

(1)  
 (2)  
 (3)

Note: Percolation test holes shown here  
 were located and plotted April 10, 1910

*James H. [unclear]*

TRIANGLE ROAD



5/20/83  
 To George Mitchell  
 of the record Original  
 have record of B.P.  
 check and all 36.6  
 5

5/24/83  
 Seal  
 verify



SCALE: 1" = 200'  
 RECORDED IN  
 LIBER - 632  
 FOLIO - 625

**HOUSE LOCATION**  
**PROPERTY ON TRIADELPHIA MILL ROAD**  
 (FORMERLY TRIADELPHIA ROAD)  
 HOWARD COUNTY, MARYLAND

NOTE: This drawing is not intended to establish property lines nor are the existence of corner markers guaranteed. All information shown herein taken from the land records of the county in which the property is located. Do not attempt to erect fences from information contained on this drawing.

I hereby certify that the position of all the existing improvements on the above described property has been established by a transit tape measurement.

Date: July 14, 1979

By Elwood L. Renn  
 ELWOOD L. RENN  
 REGISTERED LAND SURVEYOR, MD NO. 2988

*Frank Skinner*  
ZANE G. WALKER CONSTRUCTION COMPANY  
14516 MacClintock Court  
Glenwood, Maryland 21738

May 23, 1983

NOTICE

Permits Department  
Howard County, Maryland

Re: CR No. 55214  
License/Permit No. 53568  
Residence of Kenneth & Sonia Kammeyer, Applicants

Application filed April 28, 1983 failed to indicate that one bedroom in existing home will be converted to a library; therefore, no additional bedrooms will be added to the structure.

Respectfully submitted,

*Zane G. Walker*  
Zane G. Walker, Owner



Building Address 14600 Triadelphia Mill Rd  
Dayton, MD 21036  
 Suite/Apt. #: \_\_\_\_\_ SDP/WP/Petition #: \_\_\_\_\_  
 Census Tract 6051 Subdivision Coleman + Lerch  
 Section 11A Area 11A Lot 6  
 Tax Map 27 Parcel 96 Grid 1916  
 Zoning RC Map Coordinates 1363 Lot size 8 ACRES

Property Owner's Name Kenneth & SONIA Kammeyer  
 Address 14600 Triadelphia Mill Rd  
 City Dayton State MD Zip Code 21036  
 Home Phone (301) 854-0842 Work Phone (301) 884-8700  
 Applicant's Name & Mailing Address (if other than stated hereon):  
SAME PAGER 527-8188  
 Phone: \_\_\_\_\_ Fax (301) 854-0719

Existing Use single family dwelling  
 Proposed Use \_\_\_\_\_  
 Estimated Construction Cost \$ 40,000  
 Description of Work Building a detached  
2 car garage with work area +  
studio on top floor

Contractor Company STURDY BUILT MFG  
 Contact Person Dan Patete  
 Address P.O. BOX 187  
 City EAST FREEDOM State PA Zip Code 16637  
 License No. 9976  
 Phone 1-800-722-0466 Fax (814) 696-7916

Occupant or Tenant \_\_\_\_\_  
 Contact Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_

Engineer or Architect Company STURDY BUILT  
 Contact Person CARMEN J. PATETE  
 Address P.O. BOX 187  
 City EAST FREEDOM State PA Zip Code 16637  
 Phone 1-800-722-0466 Fax 814-696-7916

BUILDING DESCRIPTION - COMMERCIAL	
Building Characteristics	Utilities
Height: _____	Water Supply: _____ Public <input type="checkbox"/> Private <input type="checkbox"/>
No. of stories: _____	Sewage Disposal: _____ Public <input type="checkbox"/> Private <input type="checkbox"/>
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Construction type: _____ Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular <input type="checkbox"/>	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
	Sprinkler system: <u>N/A</u> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads _____

BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: _____ Public <input type="checkbox"/> Private <input checked="" type="checkbox"/>
1st floor: _____	Sewage Disposal: _____ Public <input type="checkbox"/> Private <input checked="" type="checkbox"/>
2nd floor: _____	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Basement: _____	Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/>	Heating System: _____ Electric <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Sprinkler system: <u>N/A</u> <input checked="" type="checkbox"/> NFA #13D <input type="checkbox"/> NFA #13R <input type="checkbox"/> Other: _____
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: <u>15' x 16'6"</u>	
Dimensions: <u>30' x 40'</u>	
Footings: <u>MONOLITHIC SLAB</u>	
Roof: <u>ASPHALT SHINGLES</u>	
State Certified Modular <input type="checkbox"/>	
Manufactured Home <input type="checkbox"/>	

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 \_\_\_\_\_  
 Title/Company \_\_\_\_\_

Print Name Kenneth C.W. Kammeyer  
 Date 5-18-99

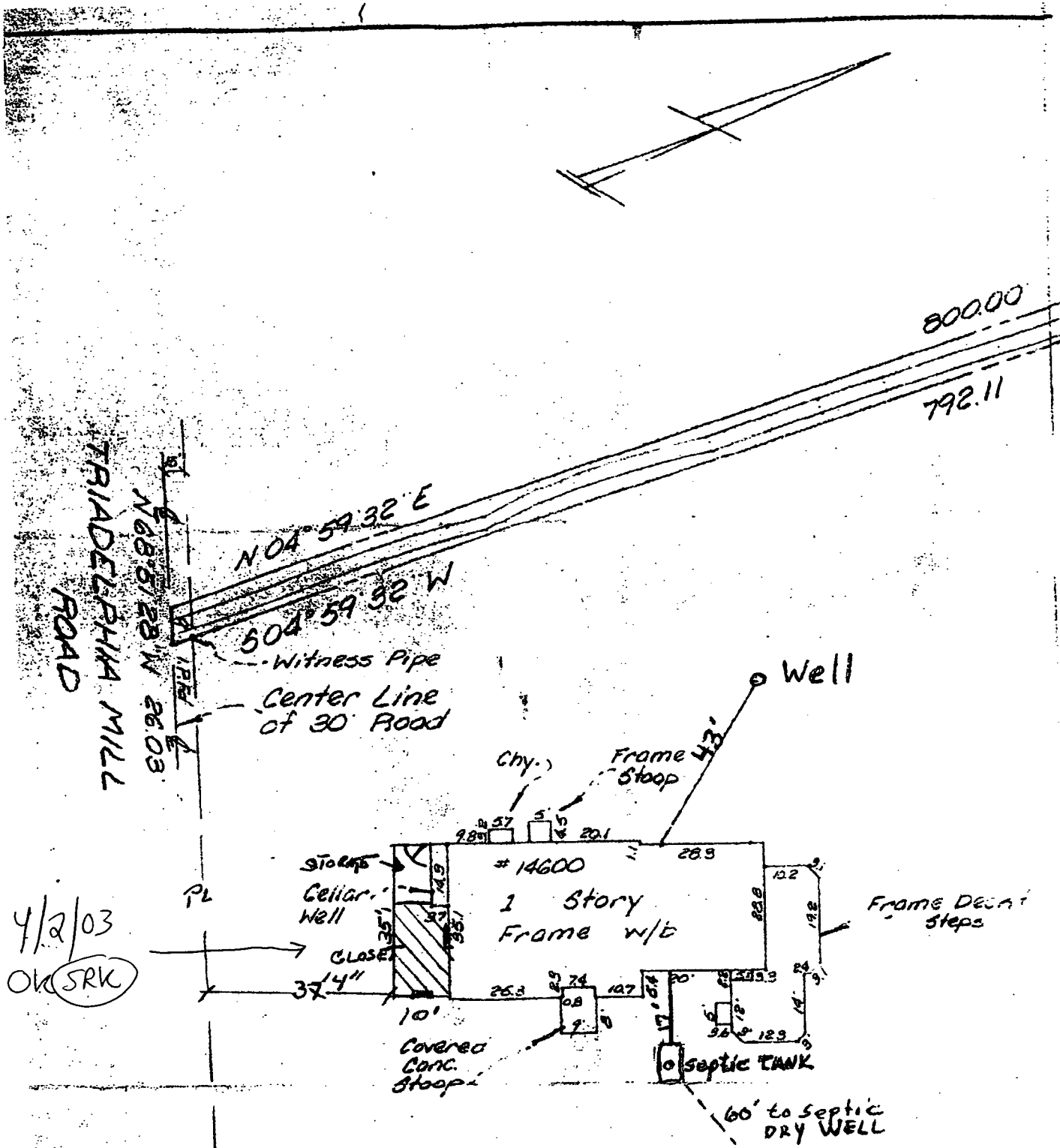
Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY  
 \*\* PLEASE WRITE NEATLY AND LEGIBLY. \*\*  
 \* FOR OFFICE USE ONLY \*

AGENCY	DATE	SIGNATURE APPROVAL
<input checked="" type="checkbox"/> Land Development DPZ		
<input checked="" type="checkbox"/> State Highways		
<input checked="" type="checkbox"/> Building Official		
<input checked="" type="checkbox"/> Dev. Engineering DPZ	<u>6/1/99</u>	<u>Mark E. Rippe</u>
<input checked="" type="checkbox"/> Health		
<input checked="" type="checkbox"/> Fire Protection		
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>		
CONTINGENCY CONSTRUCTION START <input type="checkbox"/>		
ONE STOP SHOP <input type="checkbox"/>		

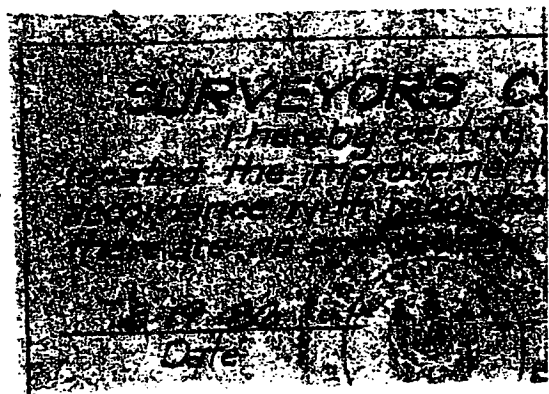
DFZ SETBACK INFORMATION	PROPERTY ID#
Front: _____	<u>1111</u>
Rear: _____	Filing fee \$ _____
Side: _____	Permit fee \$ _____
Side St: _____	Excise tax \$ _____
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Add'l permit fee \$ _____
Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
Lot Coverage for New Town Zone	Balance due \$ _____
SDP/Red-line approval date _____	Check # _____
Accepted by _____	Validation # _____

Distribution of Copies: White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA  
 permit.fmt Rev. 10/15/98

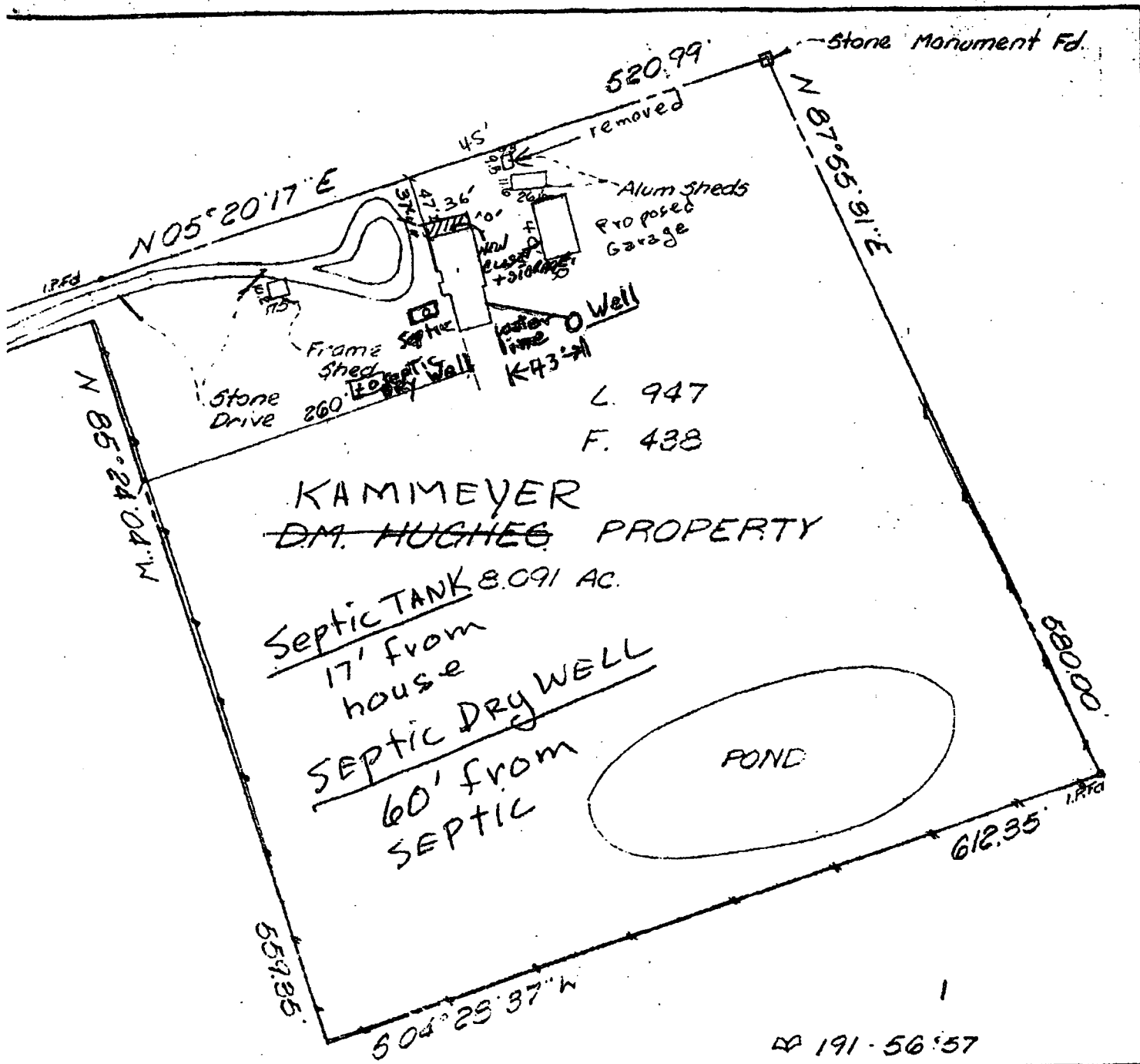




Note: Lot Corners have not been set by  
 This Survey unless Otherwise  
 Indicated.







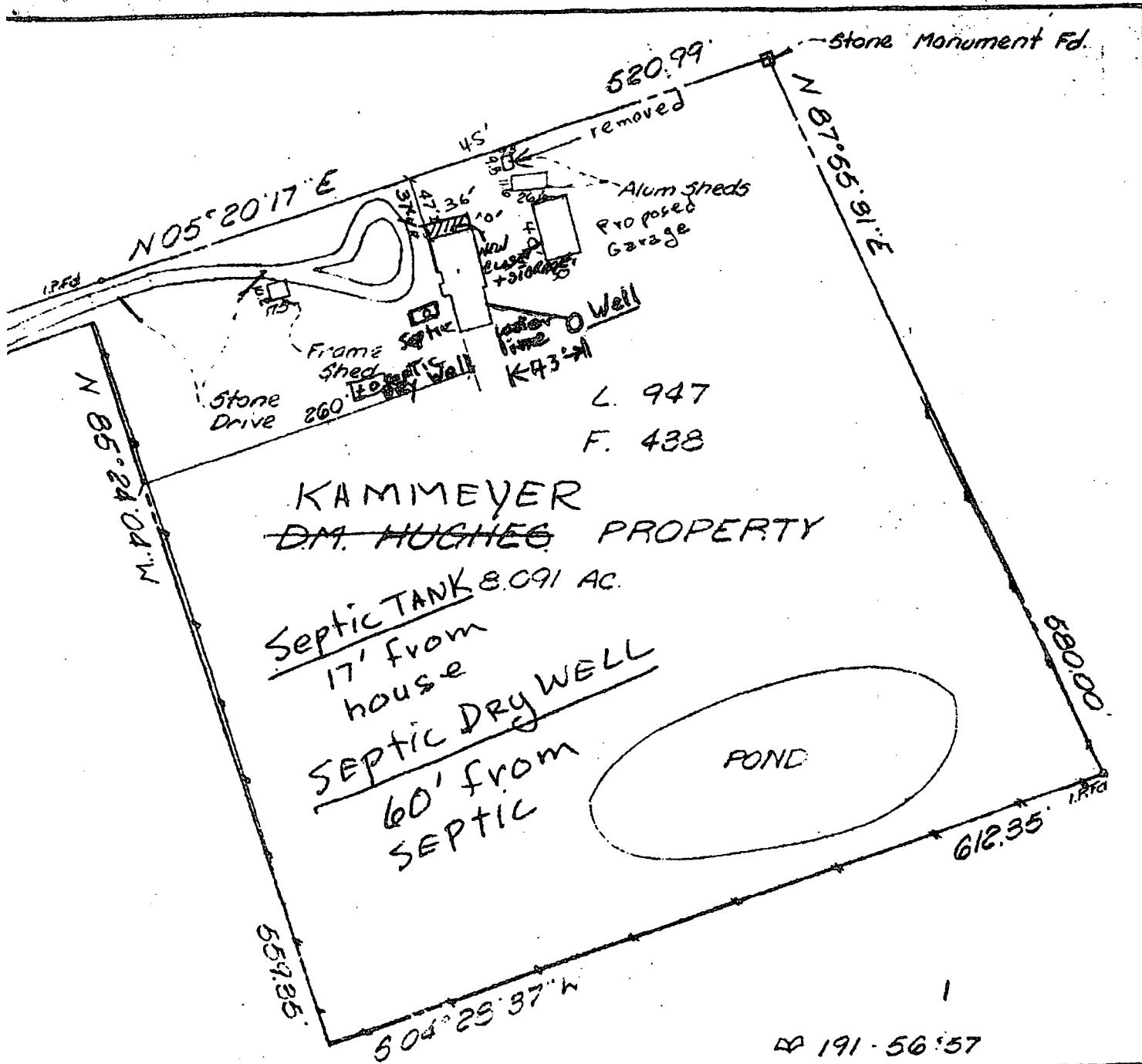
HOUSE LOCATION  
14600 Triadelphia Mill Road  
~~HUGHES~~ PROPERTY  
KAMMEYER  
Clarksville Election District  
Howard County, Maryland

DESIGNED BY \_\_\_\_\_ SCALE 1"=100' DATE 3-11-86 PHONE: 422-6080

Light, Elliott, & Associates

**CERTIFICATE**  
I have carefully  
examined the  
plans and  
specifications  
and find them  
correct as shown.

DRAWN BY \_\_\_\_\_



HOUSE LOCATION  
 14600 Triadelphia Mill Road  
~~HUGHES~~ PROPERTY  
 KAMMEYER  
 Clarksville Election District  
 Howard County, Maryland

DESIGNED BY \_\_\_\_\_ SCALE 1"=100' DATE 3-11-86 PHONE: 422-6080

Light, Elliott, & Associates

DRAWN BY \_\_\_\_\_

