

3/16/00  
1:00

INDEXED

# PERMIT

P 513318

## SEWAGE DISPOSAL SYSTEM

A 58096

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH  
410-313-2640

ISSUE DATE 3/15/2000

APPROVAL DATE 3/16/00

04-361245

Jack Fyock Septic Service IS PERMITTED TO INSTALL X ALTER

ADDRESS P.O. Box 89, Glenelg, MD 21737 PHONE 410-988-9270

SUBDIVISION Stirn Farm LOT NUMBER \_\_\_\_\_ ADDRESS 671 W. Watersville Road

PROPERTY OWNER Crosen Homes, Inc. PROPERTY OWNER'S ADDRESS \_\_\_\_\_

SEPTIC TANK CAPACITY 1250 GALLONS TOP SEAMED TANK REQUIRED

PUMP CHAMBER CAPACITY \_\_\_\_\_ GALLONS

NUMBER OF BEDROOMS 4

SQUARE FEET PER BEDROOM 180

LINEAR FEET OF TRENCH REQUIRED 240

TRENCHES: Trenches to be 3 feet wide. Inlet 2.5 feet below original grade. Bottom maximum depth 4.5 feet below original grade. 2 feet of stone below distribution box.

LOCATION: Place the distribution box 150 feet off the front (241.53') lot line and 75 feet off the right (247.55') lot line as seen from West Watersville Road. Run trenches along contour in both directions.

NOTES: Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

PLANS APPROVED Donna K. Soe OK 1/21/00 SRH DATE 1-07-2000

PERMIT VOID AFTER 2 YEARS

NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS

NOTE: TOP OF SEPTIC TANKS ARE TO BE NO DEEPER THAN 3.0 FEET BELOW FINISH GRADE

NOTE: WATERTIGHT SEPTIC TANKS REQUIRED

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS, 90° ELBOWS ARE NOT ACCEPTABLE

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX, DRAINFIELDS) TO BE 100 FEET FROM ANY WATER WELL UNLESS OTHERWISE SPECIFICALLY AUTHORIZED

NOTE: NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH UNLESS SPECIFICALLY AUTHORIZED

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS

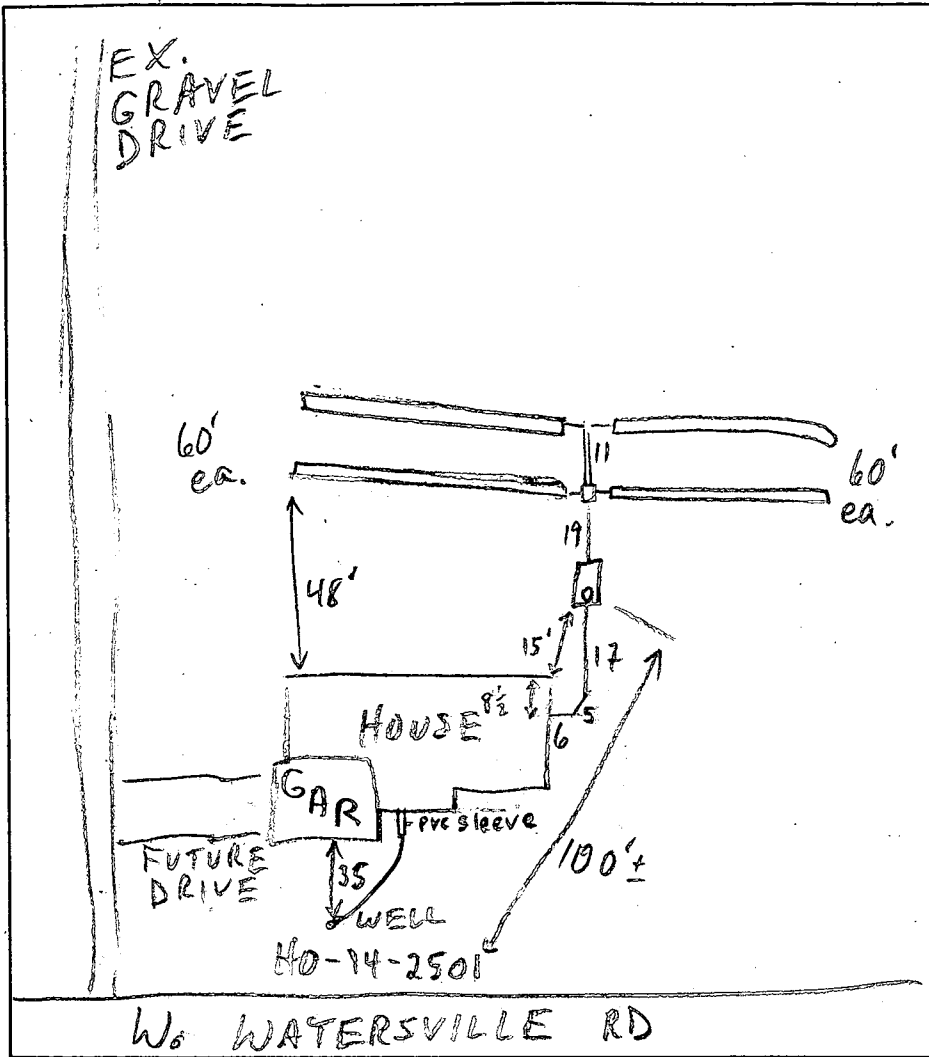
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

NOTE: IF PUMPED SEPTIC SYSTEM REQUIRED, (1) SEPTIC PUMP DETAIL TO BE PROVIDED BY INSTALLER PRIOR TO ISSUANCE OF SEPTIC PERMIT (2) PUMP PERFORMANCE TEST IS NECESSARY PRIOR TO HEALTH DEPARTMENT APPROVAL OF SEPTIC PERMIT

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM  
PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT  
CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

P-513318

NOT TO SCALE



**TRENCH DATA**

TRENCH WIDTH 3'

TRENCH INLET DEPTH 2.5'

TRENCH BOTTOM DEPTH 4.5'

DEPTH OF STONE 2'

NUMBER OF TRENCHES 4

TOTAL TRENCH LENGTH 240

ABSORBENT AREA 720

DISTRIBUTION BOX LEVEL OK

BAFFLE IN DISTRIBUTION BOX OK

**SEPTIC TANK DATA**

SEPTIC TANK 1250 T.S GALLONS

MANHOLE RISER \_\_\_\_\_

6 INCH INSPECTION PORT OK

**PUMP CHAMBER DATA**

PUMP CHAMBER GALLONS \_\_\_\_\_

MANHOLE RISER \_\_\_\_\_

ALARM \_\_\_\_\_

PUMP PERFORMANCE TEST \_\_\_\_\_

PRE-CONSTRUCTION INSPECTION: \_\_\_\_\_

INSPECTION COMMENTS: 3/16/00 OK TO COVER ALL (MR)

INSPECTOR M. Ripkin DATE SYSTEM APPROVED 3/16/00

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

5/18/00  
NOON

New Installation   
Replacement

Receipt # \_\_\_\_\_  
Date \_\_\_\_\_

Name of Installer Willoughby Plumbing

Telephone 410-781-7051

License Number # 6992

Certified Well Pump Installer  Well Driller  Registered Plumber

Name of Property Owner Crosen Homes Inc

Telephone 410-489-5242

Subdivision Ston Farm Lot # \_\_\_\_\_

Well Tag # 40-94-2551

Site Address 677 WEST WATERS VILLE Rd  
WOODBINE, MD 21797

Pump

Motor

Pitless Adapter

- 1. Type
  - a. Deep well jet \_\_\_\_\_
  - b. Shallow well jet \_\_\_\_\_
  - c. Submersible
- 2. Make TACUZZI
- 3. Model # \_\_\_\_\_
- 4. Capacity 7 GPM
- 5. Pump exceeds well capacity Yes  No

- 1. Horsepower 3/4 HP
- 2. RPM \_\_\_\_\_
- 3. Voltage \_\_\_\_\_
  - a. 110
  - b. 220

- 1. Make NAR YARD
- 2. Model # \_\_\_\_\_
- 3. Depth 4 FT

- 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 TAPE

Tank

- 1. Capacity 40 gal
- 2. Pressure relief valve? yes

Piping

- 1. Type CRESTLINE
- 2. Size 1"
- 3. NSF and/or BOCA Code approved yes
- 4. Depth of supply line 4 FT

Well data

- 1. Depth 425 ft.
- 2. Yield 7 GPM
- 3. Static water level 67 ft.
- 4. Will water supply be disinfected by installer?

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).

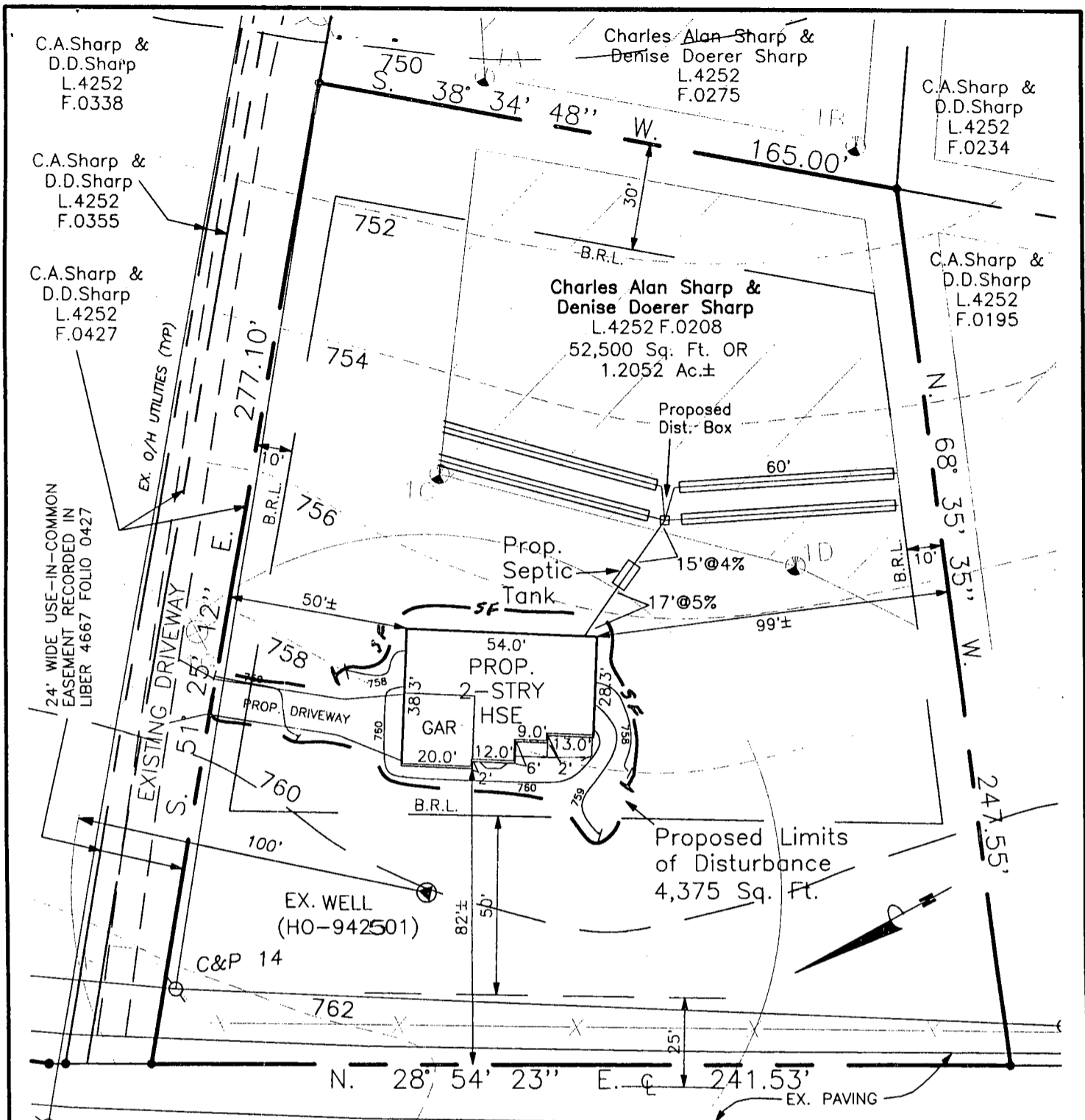
All information given above is true to the best of my knowledge.

Signature of Applicant: Chris Willoughby

Date: 5/17/00

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

NO-218 5/19/00 - WPI OK (SRK)



**WEST WATERSVILLE ROAD**

F26412

**NO BASEMENT SERVICE BY GRAVITY**

Proposed House: FF Elev=762.3 Bsmt =753.8 Inv. Out=754.3	Proposed Septic Tank: Ex. Elev=755.6 Inv. In =754.0 Inv. Out=753.7	Proposed Distribution Box: Ex. Elev=755.0 Inv. In =752.8 Inv. Out=752.5
---	---	--

Proposed Trenches:  
4@60' = 240 L.F.  
3'Wide, 2'Stone, Max. Depth=4.5

NOTE: Actual length and number of trenches for sewerage are to be determined at the time of septic system permit issuance.

**Plot Plan**

lands conveyed to

**Charles Alan Sharp & Denise Doerer Sharp**

Approved Septic System Plan  
Howard County Health Department

Liber 4252 Folio 0208  
#671 West Watersville Road  
Fourth Election District  
Howard County, Maryland

*[Signature]*  
Signature

1/7/00  
Date

Scale: 1"=40'

December, 1999  
File name: T:\EP\JOBS\89-2185\892185HC.dwg



12/28/99

I CERTIFY THIS PLAT TO BE CORRECT; IT IS THE RESULT OF AN ACTUAL FIELD SURVEY, BASED ON DATA FOUND AMONG THE LAND RECORDS OF HOWARD COUNTY, MARYLAND, AS REFERENCED HEREON.



**VANMAR ASSOCIATES, INC.**  
Engineers Surveyors Planners  
310 South Main Street P.O. box 328  
Mount Airy, Maryland 21771  
(301) 829 2890 (301)831 5015 (410) 549 2751

REFERENCE	JOB NO.
L. 4252 F. 0208	89-2185-0040-001

# APPLICATION

PERCOLATION TESTING

A 58096

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

PREVIEW OK -  
PROPOSED RECONSTRUCTION  
OF MULTIPLE PARCEL FARM  
TRUST AS SUBDIVISION;  
POST-TEST REVIEW SHOULD  
INCLUDE CONSIDERATION  
OF PREVIOUS (1976?)  
TESTS - TO BE DONE ON THIS FARM (CW)

P \_\_\_\_\_

DISTRICT \_\_\_\_\_

DATE \_\_\_\_\_

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 D. Stern CROSEN HOMES, INC

ADDRESS West Watersville PHONE \_\_\_\_\_

AGENT OR PROSPECTIVE BUYER C. Sharp

ADDRESS 3779 Sharp Rd Glenwood PHONE 410 4894630  
21738

PROPERTY LOCATION:  
SUBDIVISION STIRN LOT NO. 1

ROAD AND DESCRIPTION Old Frederick Rd. (671 West Watersville Road)

TAX MAP 2 PARCEL # 180 Ab parcel  
AND RETURNED 1-7-2000  
Serial # 370 122708  
SIZE OF LOT 1.21 To 3 acs TYPE BLDG. SFD - 4 Bedroom  
(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. Charles Stern  
(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

58096

COUNTY #

SOIL PROFILE

(A)

topsoil

red org  
brn  
cl lm

14 org  
brn  
to tan  
si lm

30%  
shale  
frag

(B)

topsoil

org brn  
cl lm

14 org  
brn  
si lm

25%  
frag

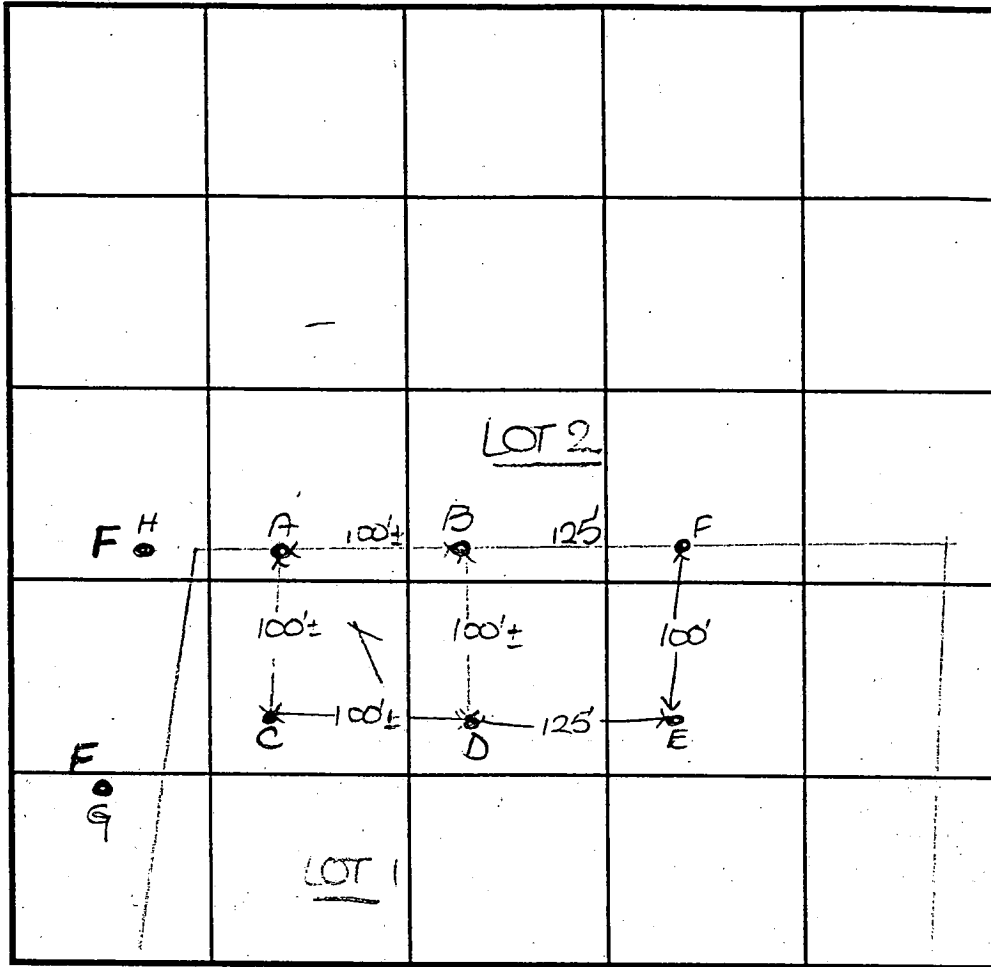
(C)

topsoil

org brn  
cl lm

14 org  
brn  
to beig  
si lm

20%  
frags



SOIL PROFILE

(D)

topsoil

red org  
brn  
cl lm

med rec  
brn  
si lm

20%  
frags

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

West Watersville Road

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
5-2-97	A	3' 4" S	10:40 <sub>3</sub>	10:41 <sub>3</sub>	10:41 <sub>3</sub>	10:43 <sub>3</sub>	2
		7.5' M	10:44	11:04	11:04	11:27	23
		12.0' D	Visual	OK			
	B	3' 4" S	10:52 <sub>3</sub>	10:53 <sub>3</sub>	10:53 <sub>3</sub>	10:55 <sub>3</sub>	~2
		10.0' D	Visual	OK			
	C	5.0' S	11:02	11:12	11:12	11:28	16
		12.5' D	Visual	OK			
	D	4' 2" S	10:57 <sub>3</sub>	10:59	10:59	11:01	2
		11.5' D	Visual	OK			

REMARKS holes tested as staked

TYPE OF SOIL \_\_\_\_\_

TESTED BY D. See

ALSO PRESENT C. Sharp

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 9

TRENCH WIDTH 3'

INLET DEPTH 2.5

MAXIMUM BOTTOM DEPTH 4.5

SQ. FT./BEDROOM 210

58096  
COUNTY #

SOIL PROFILE  
(E)

0'  
1' topsoil  
org brn  
cl lm  
5'  
3' pale  
org brn  
to lt  
org wh  
si sa lm  
5'  
5' ~~Rx patch~~  
15-20%  
Rx  
3'

(F)

0'  
1' topsoil  
org brn  
cl lm  
5'  
3' pale  
org brn  
si sa  
lm  
5'  
250%  
Rx  
1'

G/H

0'  
1' topsoil  
org red  
brn  
cl lm  
pale org  
brn  
si sa lm  
5'  
250%  
Rx  
1'


SOIL PROFILE

0'	

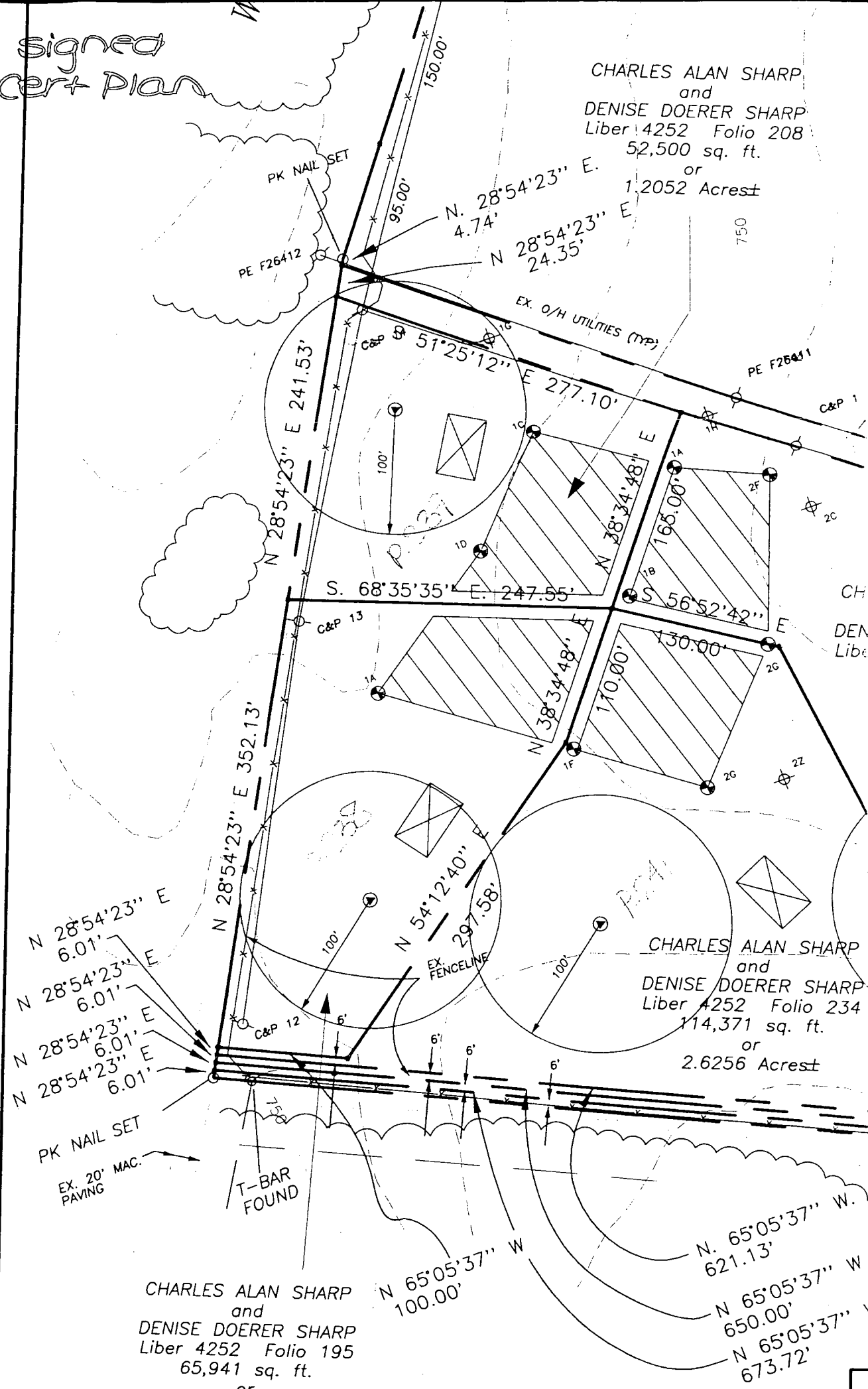
INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
6-4-97	E	4.0'S	10:58 <sub>3</sub>	11:00	11:00	11:03	3
		11.5'D	visual	OK			
	F	3.5'S	11:07 <sub>3</sub>	11:09	11:09	11:11	2
		11.0'D	visual	OK			
	G	10'8"D	Insuff depth to bedrock				F
	H	10.0'D	"	"	"	"	F

REMARKS \_\_\_\_\_  
 TYPE OF SOIL \_\_\_\_\_  
 TESTED BY D. See ALSO PRESENT C Sharp  
 TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME \_\_\_\_\_ TRENCH WIDTH \_\_\_\_\_  
 INLET DEPTH \_\_\_\_\_ MAXIMUM BOTTOM DEPTH \_\_\_\_\_ SQ. FT: BEDROOM \_\_\_\_\_

copy of signed  
Derc Cert Plan

CHARLES ALAN SHARP  
and  
DENISE DOERER SHARP  
Liber 4252 Folio 208  
52,500 sq. ft.  
or  
1.2052 Acrest



N 28°54'23" E 6.01'  
N 28°54'23" E 6.01'  
N 28°54'23" E 6.01'  
N 28°54'23" E 6.01'

PK NAIL SET  
EX. 20' MAC.  
PAVING

T-BAR  
FOUND

CHARLES ALAN SHARP  
and  
DENISE DOERER SHARP  
Liber 4252 Folio 195  
65,941 sq. ft.  
or

CHARLES ALAN SHARP  
and  
DENISE DOERER SHARP  
Liber 4252 Folio 234  
114,371 sq. ft.  
or  
2.6256 Acrest

N 65°05'37" W  
100.00'  
N 65°05'37" W  
621.13'  
N 65°05'37" W  
650.00'  
N 65°05'37" W  
673.72'

C1 07547

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED AFTER WELL IS COMPLETED.

COUNTY NUMBER A 53096

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED MM 12 DD 9 YY 99

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-2501

OWNER Crossen Homes STREET OR RFD W. Watersville TOWN Mt. Airy

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entries for Brown Shale and Blue Rock.

GROUTING RECORD WELL HAS BEEN GROUTED (Y/N) TYPE OF GROUTING MATERIAL (CM, BC) NO. OF BAGS 17 NO. OF POUNDS 1578

CASING RECORD casing types insert appropriate code below (ST, CO, PL, OT) MAIN CASING TYPE ST Nominal diameter 6 Total depth 60

OTHER CASING (if used) diameter inch depth (feet) from to

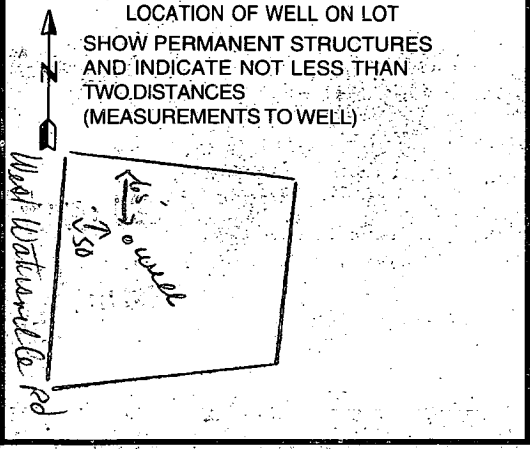
SCREEN RECORD screen type or open hole (ST, BR, HO, PL, OT) insert appropriate code below

PUMPING TEST HOURS PUMPED 3 PUMPING RATE 4.0 MEASURE PUMPING RATE Bucket WATER LEVEL 67 ft. TYPE OF PUMP USED S submersible

PUMP INSTALLED DRILLER INSTALLED PUMP YES (NO) CAPACITY: GALLONS PER MINUTE 31-35 PUMP HORSE POWER 37-41 CASING HEIGHT 2 (nearest foot)

NUMBER OF UNSUCCESSFUL WELLS 0 WELL HYDROFRACTURED (Y/N) CIRCLE APPROPRIATE LETTER A, E, P

DEPTH (nearest ft.) HO 58 425 SLOT SIZE 1 2 3 DIAMETER OF SCREEN 56-60



DRILLERS LIC. NO. MSD 024 DRILLERS SIGNATURE LIC. NO. D SITE SUPERVISOR responsible for sitework

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



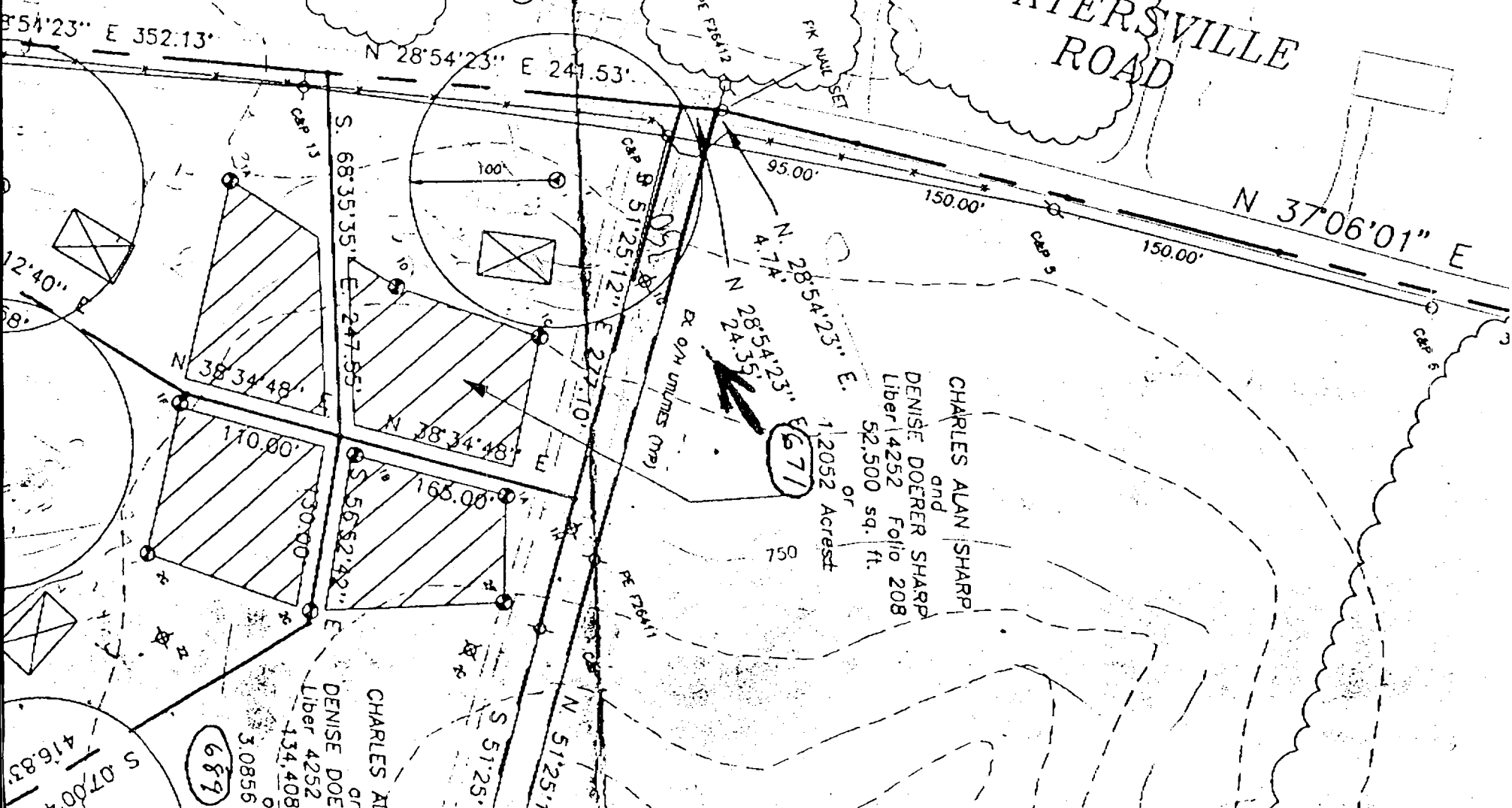


3825 Shady Lane  
Glenwood, MD 21738

671 WEST WATERSVILLE  
Road

STIRN FARM

WEST  
WATERSVILLE  
ROAD



123/99  
west side of  
road

(S)

671

CHARLES ALAN SHARP  
and  
DENISE DOERER SHARP  
Liber 4252 Folio 208  
52,500 sq. ft.  
or  
1.2052 Acres

689

CHARLES AL  
and  
DENISE DOE  
Liber 4252  
134,408  
3,0856

B 1 14333

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL please print or type

STATE PERMIT NUMBER

HO-94-2501

fill in this form completely

Date Received (APA) 11/18/99

OWNER INFORMATION

Crosen Homes, 3825 Shady Lane, Glenwood Md. 21738

LOCATION OF WELL

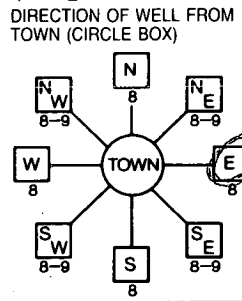
Howard County, Starn Farm, Mt Airy

DRILLER INFORMATION

Joseph L. Wayne, M.S.D. 24, Joseph L. Wayne Well Drilling, 5512 Ridge Rd. Mt. Airy Md. 21771, 11/16/99

MILES FROM TOWN (enter 0 if in town) 3

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



671 West Waterville Road

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) EAST

60 FT DISTANCE FROM ROAD

WELL INFORMATION

APPROX. PUMPING RATE 5 GAL. PER MIN., AVERAGE DAILY QUANTITY NEEDED 500 GAL. PER DAY

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard County, A 58096, STATE SIGNATURE, DATE ISSUED 12/6/99, CO SIGNATURE, EXP. DATE 12/5/00, NORTH GRID 555 000, EAST GRID 0766 000

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- Domestic Potable Supply & Residential Irrigation (circled), Farming, Industrial, Public Water Supply Well, Test, Geo-thermal

APPROXIMATE DEPTH OF WELL 300 FEET, APPROXIMATE DIAMETER OF WELL 6 INCH

METHOD OF DRILLING (circle one)

- AIR-ROTARY (circled), JETTED, ROTARY, CABLE, Drive-POINT

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

- THIS WELL WILL NOT REPLACE AN EXISTING WELL (circled), 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-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS, THIS WELL WILL DEEPEM AN EXISTING WELL

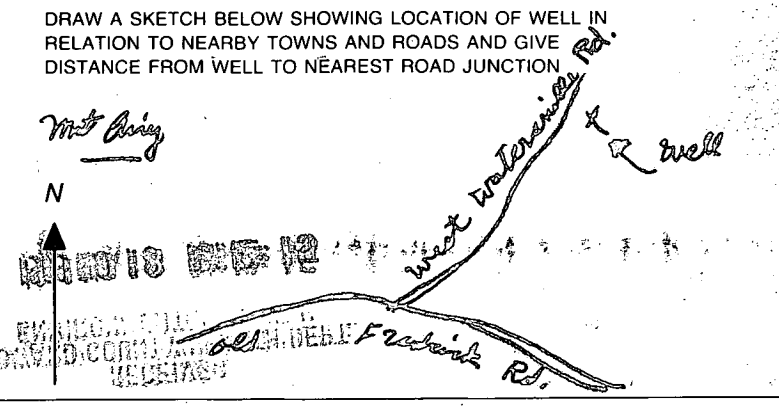
Not to be filled in by driller (MDE OR COUNTY USE ONLY), APPROP. PERMIT NUMBER 54, PERMIT No. HO-94-2501

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 7606, N 5525

12/9/99 9:30, 12/19/99 Missed, grant # HO-94-2501, BB



SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED



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**  
 B0011274660

Building Address 671 West Watersville Rd.  
MT. Airy, MD 21771  
 Suite/Apt. #: 1119 SDP/WP/Petition #: 111  
 Census Tract 111 Subdivision 111  
 Section 111 Area 111 Lot 111  
 Tax Map 2 Parcel 239 Grid 13  
 Zoning RC 111 Map Coordinates 255 Lot size

Property Owner's Name E. Michael + Karleen Debois  
 Address 671 West Watersville Rd  
 City MT Airy State MD Zip Code 21771  
 Home Phone (410)707-1712 Work Phone \_\_\_\_\_  
 Applicant's Name & Mailing Address, (if other than stated hereon):  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_

Existing Use single family home  
 Proposed Use attached garage  
 Estimated Construction Cost \$ 30,000.  
 Description of Work 24' x 30' garage

Contractor Company Crosen Homes, Inc  
 Contact Person Donald O. Crosen  
 Address 3825 Shady Lane  
 City Bloward State MD Zip Code 21735  
 License No. 452-904  
 Phone 410-522-5262 Fax 410-459-4175

Occupant or Tenant E. Michael + Karleen Debois  
 Contact Name \_\_\_\_\_  
 Address 671 West Watersville Rd  
 City MT Airy State MD Zip Code 21771  
 Phone (410)707-1712 Fax \_\_\_\_\_

Engineer or Architect Company VANMARR Assoc.  
 Contact Person \_\_\_\_\_  
 Address 100 E. 325  
 City MT Airy State MD Zip Code 21771  
 Phone (410)829-2890 Fax \_\_\_\_\_

**BUILDING DESCRIPTION - COMMERCIAL**

**BUILDING DESCRIPTION - RESIDENTIAL**

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

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

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.

Donald O. Crosen  
 Applicant's Signature  
 \_\_\_\_\_  
 Title/Company

Donald O. Crosen  
 Print Name  
11/22/00  
 Date

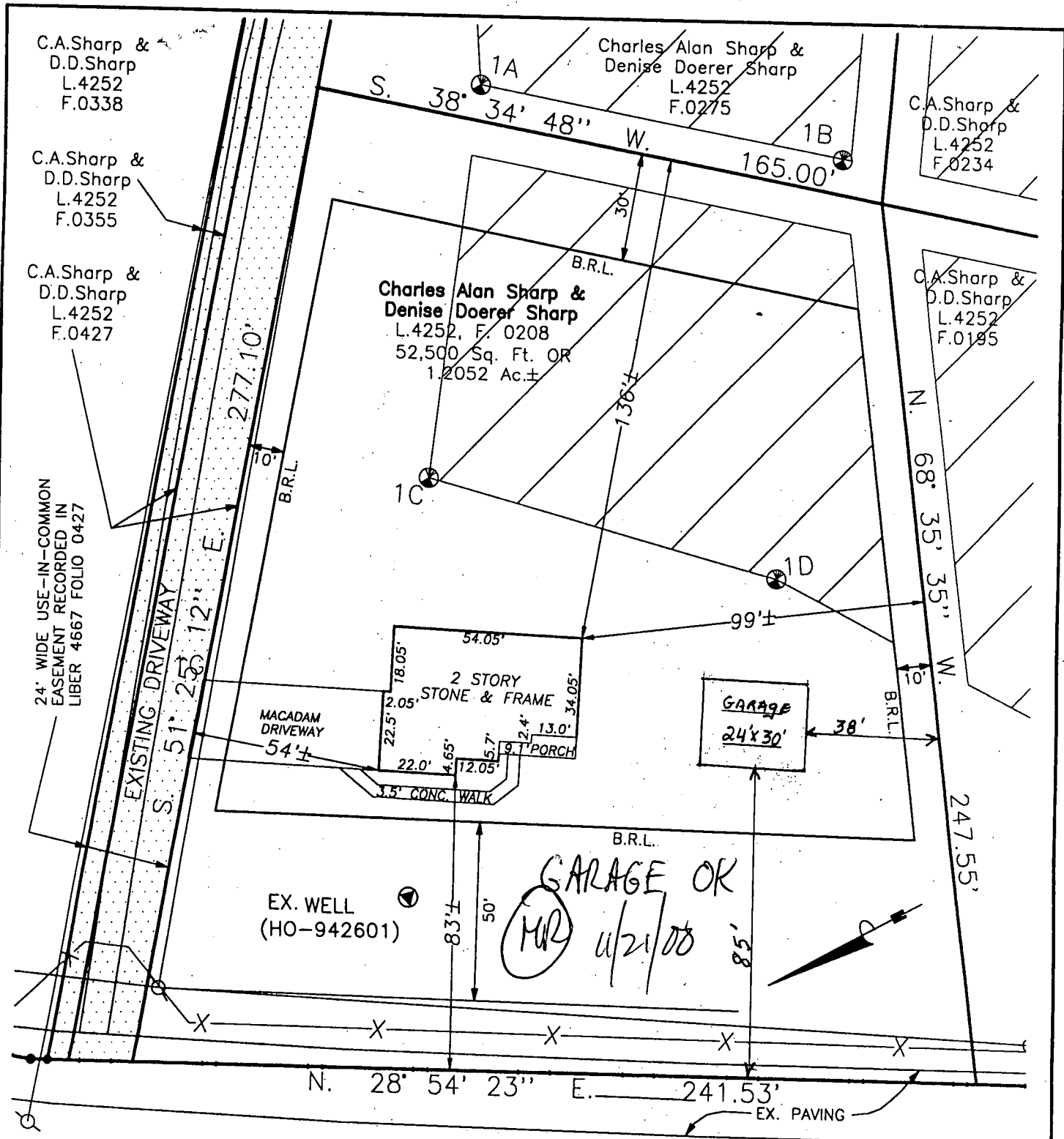
Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**  
 \*\* PLEASE WRITE NEATLY AND LEGIBLY. \*\*  
 - FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official		
Dev. Engineering, DPZ	<u>11/21/00</u>	<u>M. Reffin</u>
Health		
Fire Protection		

Is Sediment Control approval required prior to issuance?  
 YES  NO

CONTINGENCY CONSTRUCTION START   
 ONE STOP SHOP:

DPZ SETBACK INFORMATION	PROPERTY ID#
Front: _____	Filing fee \$ <u>75.00</u>
Rear: _____	Permit fee \$ _____
Side: _____	Excise tax \$ _____
Side St.: _____	Sub-total paid \$ _____
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	Add'l permit fee \$ _____
Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
Lot Coverage for New Town Zone _____	Check # <u>1119</u>
SDP/Red-line approval date _____	Validation # _____
Accepted by _____	

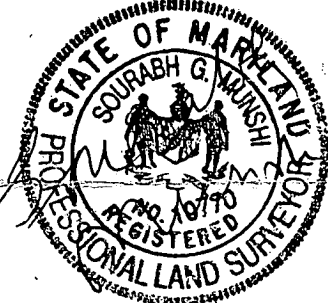
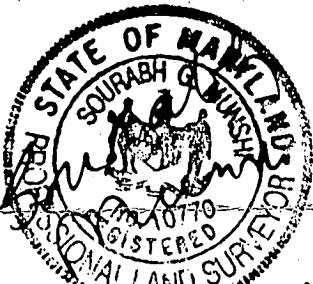


**WEST WATERSVILLE ROAD**

**HOUSE LOCATION DRAWING**  
lands conveyed to

**Denise Doerer Sharp**  
**Charles Alan Sharp &**

Liber 4252 Folio 0208  
#671 West Watersville Road  
Fourth Election District  
Howard County, Maryland  
Scale: 1"=40' NOVEMBER, 2000



**NOTES:**

1. THIS PLAT IS OF BENEFIT TO A CONSUMER ONLY INSOFAR AS IT IS REQUIRED BY A LENDER OR A TITLE INSURANCE COMPANY OR ITS AGENT IN CONNECTION WITH CONTEMPLATED TRANSFER, FINANCING OR REFINANCING.
2. THIS PLAT IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATION OF FENCES, GARAGES, BUILDINGS OR OTHER EXISTING OR FUTURE IMPROVEMENTS.
3. THIS PLAT DOES NOT PROVIDE FOR ACCURATE IDENTIFICATION OF PROPERTY BOUNDARY LINES, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING OR REFINANCING.
4. THIS PROPERTY LIES WITHIN ZONE C AS PLOTTED BY SCALE ON NATIONAL FLOOD INSURANCE PROGRAM, FLOOD INSURANCE RATE MAP, COMMUNITY PANEL NUMBER 240044 0002B.

I CERTIFY THIS PLAT TO BE CORRECT; IT IS THE RESULT OF AN ACTUAL FIELD SURVEY, BASED ON DATA FOUND AMONG THE LAND RECORDS OF HOWARD COUNTY, MARYLAND, AS REFERENCED HEREON.



**VANMAR ASSOCIATES, INC.**  
Engineers Surveyors Planners  
310 South Main Street P.O. box 328  
Mount Alry, Maryland 21771  
(301) 829 2890 (301)831 5015 (410) 549 2751

REFERENCE  
L 4252 F 0208

JOB NO.  
89 2185 0040 001