

A 21854

PERMIT

P 514239

A REPAIR

SEWAGE DISPOSAL SYSTEM

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

410-313-2640

ISSUE DATE 9/11/2000

APPROVAL DATE 10/6/00

Rodney Waddell

IS PERMITTED TO INSTALL ☐ ALTER ☒

ADDRESS 766 W. Watersville Road, Mt. Airy, MD 21771

PHONE 301-829-1019

SUBDIVISION _____ LOT NUMBER _____ ADDRESS Same

PROPERTY OWNER Rodney Waddell

PROPERTY OWNER'S ADDRESS Same

SEPTIC TANK CAPACITY 1250 GALLONS (Top Sealed preferred)

PUMP CHAMBER CAPACITY NA GALLONS

NUMBER OF BEDROOMS 3 existing increasing to 4 Bedroom Proposed

SQUARE FEET PER BEDROOM $180 \div 3 \text{ BR} = 60 \text{ LF/BR}$

LINEAR FEET OF TRENCH REQUIRED 240 L.F.

TRENCHES: Trenches to be 3 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 5 feet below original grade. 2 feet of stone below distribution box.

LOCATION:

REPAIR - PURPOSE- To accommodate future addition to house.

Call for inspection when ground is opened so sanitarian can recommend repair 9-11-00

PLANS APPROVED

Ronald J. Pinkley

SRH

DATE

10/3/00

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

ORIGINAL PERMIT STAMP

AND RETURNED 3-25-02
300134886 BIRMINGHAM

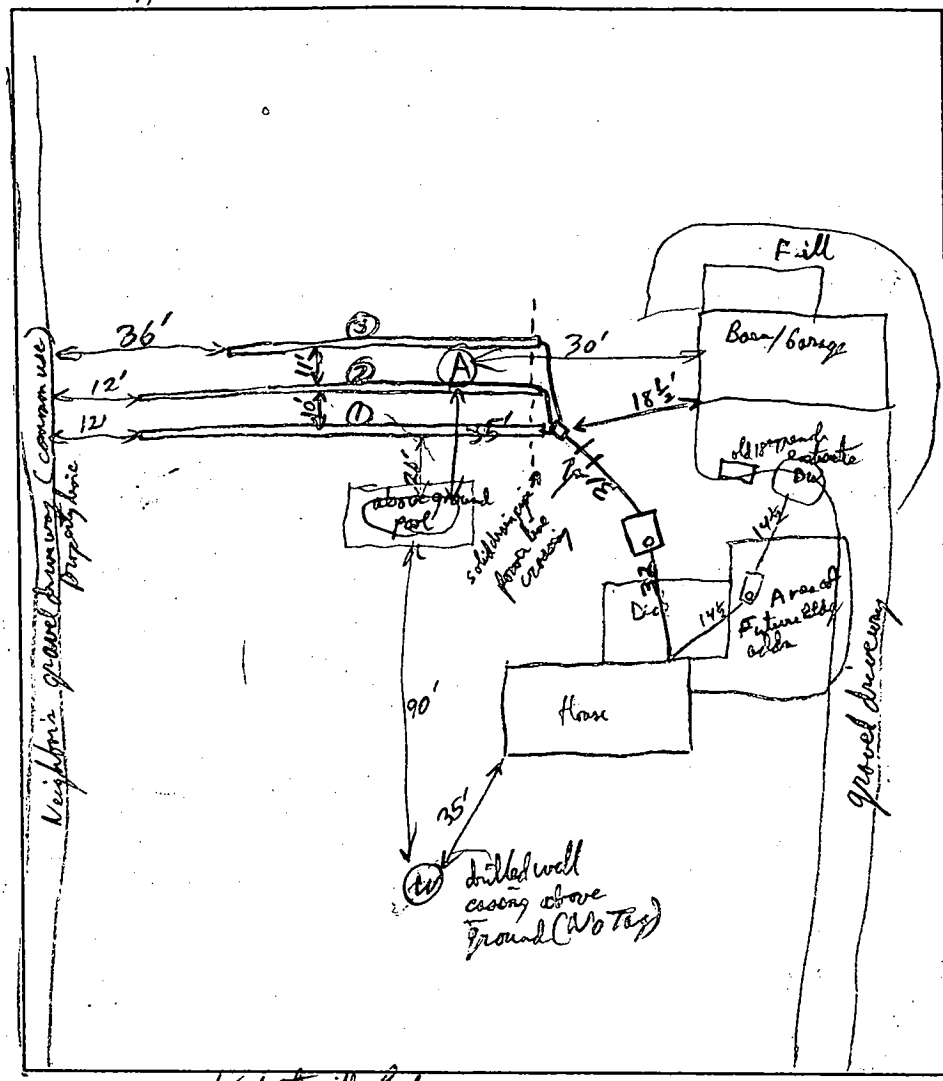
NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE
SUCCESSFUL OPERATION OF ANY SYSTEM

PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

A514239

PB14329
(A21854)



TRENCH DATA

TRENCH WIDTH 3'

TRENCH INLET DEPTH 3'

TRENCH BOTTOM DEPTH 5'

DEPTH OF STONE 2'

NUMBER OF TRENCHES 3

TOTAL TRENCH LENGTH 240
①-85, ②-85, ③-70'

ABSORBENT AREA 720 sq/ft

DISTRIBUTION BOX LEVEL ✓ (water check OK)

BAFFLE IN DISTRIBUTION BOX ✓

SEPTIC TANK DATA

SEPTIC TANK 1250 ^{Sealed} TOP GALLONS

MANHOLE RISER NA (20" cover)

6 INCH INSPECTION PORT yes

PUMP CHAMBER DATA

PUMP CHAMBER GALLONS NA

MANHOLE RISER N/A

ALARM N/A

PUMP PERFORMANCE TEST N/A

PRE-CONSTRUCTION INSPECTION:

$$4 \text{ Bdr. houses} \times 180 \text{ ft/Bdr} \div 3 \text{ ft on bottom} = 60 \text{ ft/Bdr} \times 4 = 240 \text{ L.Ft.}$$

INSPECTION COMMENTS: ^{"T"}Septic Tank, House piping, Baffles in Septic OK -; Dist box OK, water levelled, and bedded on gravel (used #2 Blue Stone) Trash OK to finish and then cover (piping goes to end of Tranche) OK to Cover all work. Needs House Connection and inspection when old S.T. & D.W. filled & abandoned. RJP 10/3/00
10/6/00- HOUSE CONNECTION MADE, OLD SEPTIC TANK & DRYWELL, PUMPED, DISCONNECTED & SEALED PROPERLY - (SRK)

INSPECTOR Steven R. King DATE SYSTEM APPROVED 10/6/00

PERMIT
SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 4th

DATE 12/17/75

INDEXED

William Hopkins

IS PERMITTED TO INSTALL X ALTER

ADDRESS Jennings Chapel Road, Woodbine, Md. 21797

PHONE 409-4711

A SEWAGE DISPOSAL SYSTEM LOCATED AT _____

SUBDIVISION _____

ROAD West Waterville Road

LOT 24

PROPERTY OWNER Dickey Farms, Inc.

M.W. WARDELL ← DATA-ORIGINAL

ADDRESS Foreythe Road, Sykesville, Md.

SPECIFICATIONS 3 bedrooms

DRAIN FIELD _____ **DEPTH** _____ **FEET** **SCYTON AREA** _____ **SQ. FT.**

SEEPAGE PITS _____ **ABSORBENT SIDEWALL AREA** _____ **SQ. FT.**

SEPTIC TANK CAPACITY 1000 **GALLONS**

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

NOTE: DRY WELL - 120 sq. ft. absorbent sidewall area per bedroom below the first 6 ft. of non-absorbent soil at original grade. Minimum depth of dry well to be 10 ft. Locate dry well 20 ft. from right lot line and 170 ft. from edge of West Waterville Road as shown when facing lot from West Waterville Road. If 4 bedroom house, dry well is to have 90 sq. ft., remainder in trench to left of dry well, parallel to West Waterville Road.

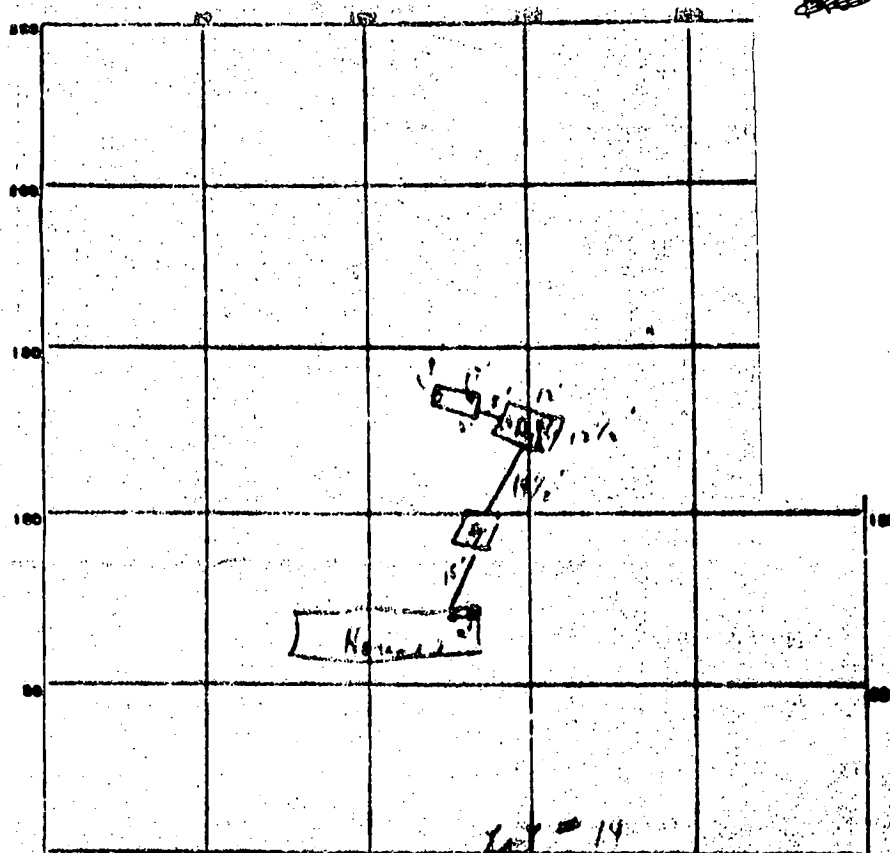
NOTE: ALL PIPES FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON. PERMIT VOID AFTER THREE YEARS. **NOTE:** INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA ACCEPTED.

PLANS APPROVED BY William W. Pepp

DATE 8/1/75

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.



SRK

INDICATE NORTH - NAME ADJOINING ROADWAY OR BASE LINE.

"1/14/25" N. Waterville Rd

PERMIT CARD _____ S.T. / D.W.

SEPTIC TANK, LEVEL _____ CLEANOUTS _____

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH _____ FT. TRENCH WIDTH _____ FT.

GRAVEL DEPTH _____ IN. TOTAL LENGTH _____ FT. = 0 11 4

NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA _____

SEEPAGE PITS, INSIDE DISTRIBUTION _____ FT. DEPTH BELOW INLET _____ FT. 24 5 3

ABSORBENT AREA _____ SQ. FT.

REMARKS "1/14/25 Trench 14' deep - 12' long ok for gravel -

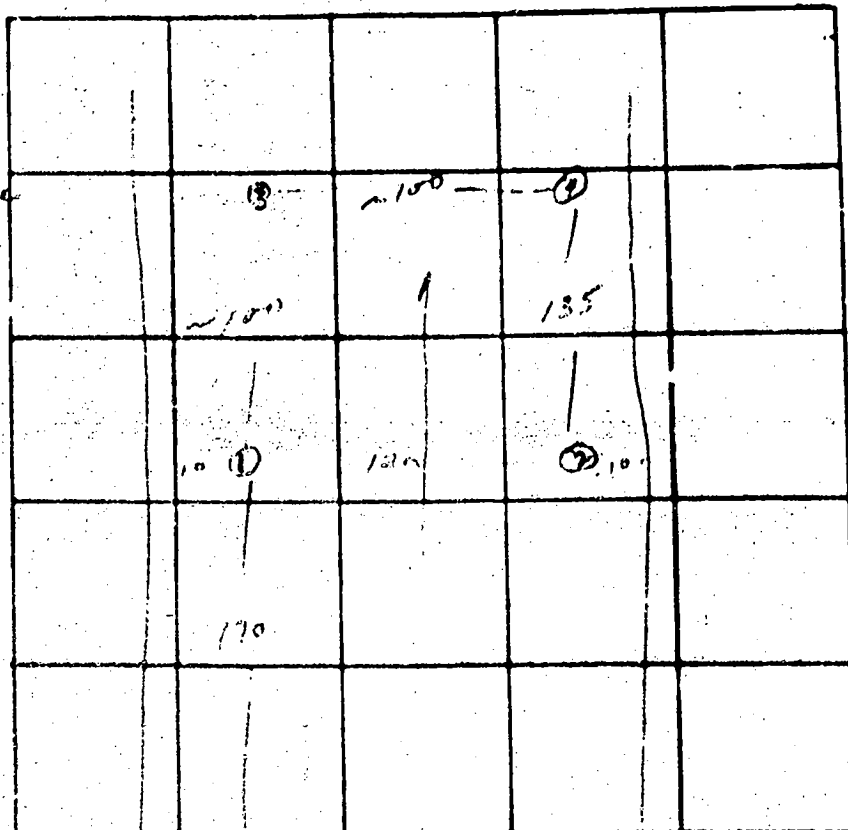
in 1/2' trench 14' Trench - 12' deep only"

"1/14/25 14' below 1st line"

DATE SYSTEM APPROVED _____ INSPECTOR _____

All holes
except 4, 4A

0
3 1/2' clayed
sandy type
to crumbly
shale
12' rock



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

ROAD

DATE	TEST NO	DEPTH	PNE-WET		TEST		TIME
			START	STOP	START	STOP	
7/8/55	1	4	1:48	1:53	1:53	2:02	9
	1A	12	1:49	1:51	1:51	1:56	5
	2	4	1:51	1:54	1:54	2:02	8
	2A	12	1:50	1:53	1:53	2:05	12
	3	13	Visual				
	4	4	2:04	2:06	2:06	2:09	3
	4A	10 1/2	2:05			2:06	1 min

REMARKS

4A still appears to be weathered, over

TYPE OF SOIL

shale, hard to dig

TESTED BY

W/2 R1

ALSO PRESENT:

K. Schneider

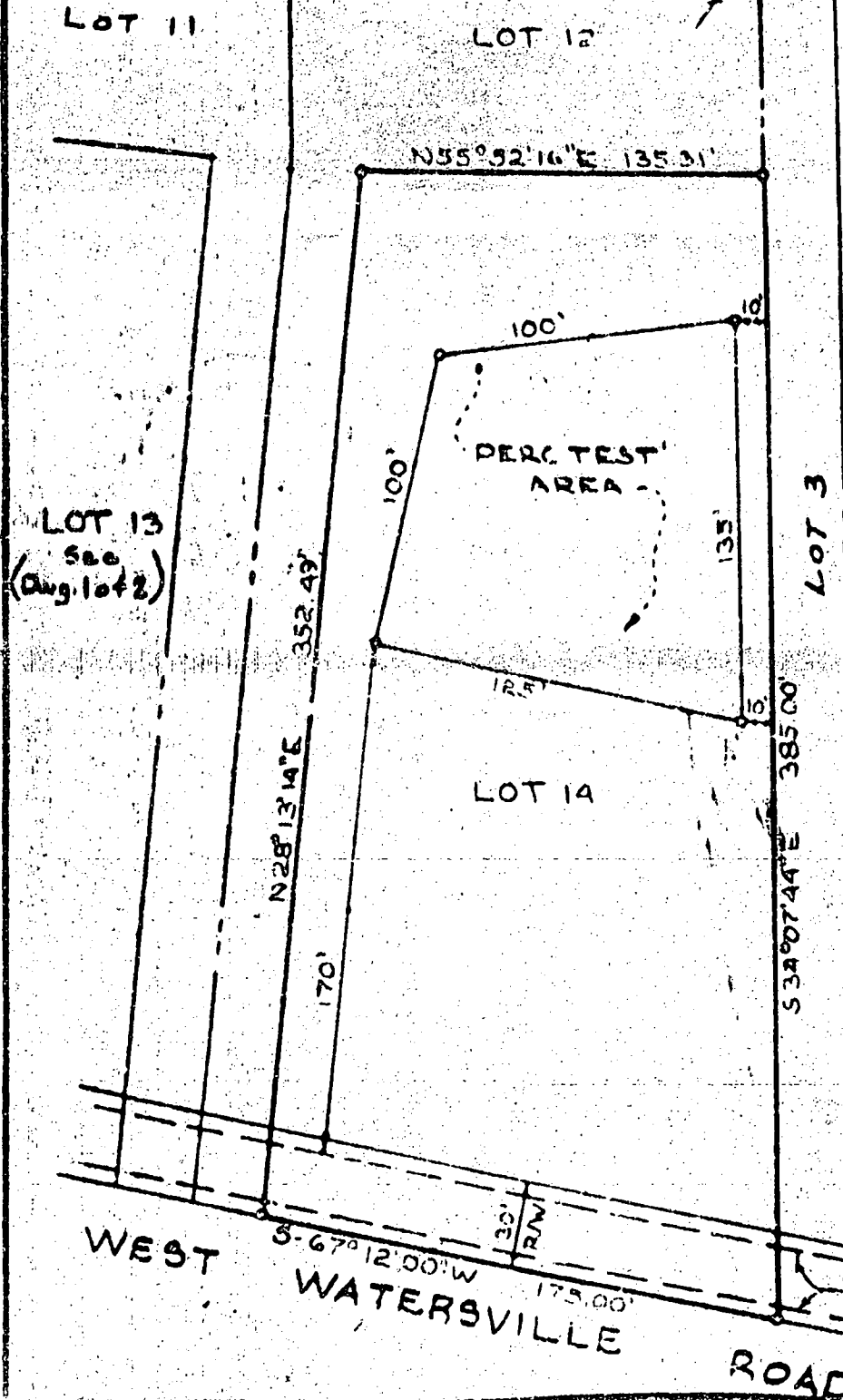
THE LOT STOWN HEREON COMPLIES WITH
THE MINIMUM OWNERSHIP WIDTH AND LOT
AREAS AS REQUIRED BY THE MARYLAND
STATE DEPARTMENT OF HEALTH.

APPROVED: PRIVATE WATER AND
PRIVATE SEWAGE SYSTEMS.

J. P. Morgan 8/26/75
HD. CO. HEALTH DEPT. DATE



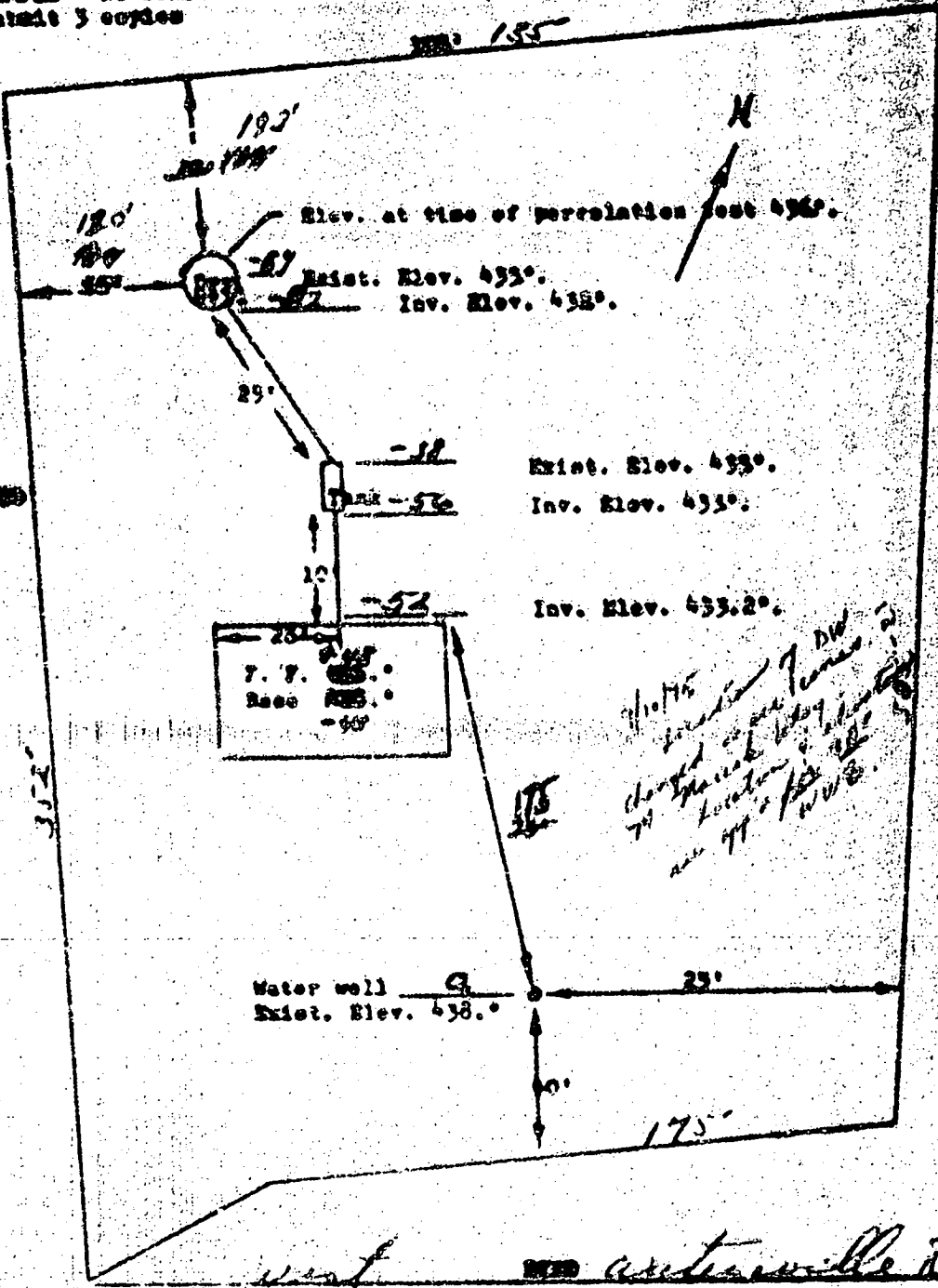
William H. Smith
7/28/75



2371-21

LET-14

Woodhouse
795-1414



I CERTIFY THE ABOVE MEASUREMENTS AND ELEVATION DIFFERENCES ARE ACTUAL AND CORRECT FOR THIS PROPERTY.

SIGNED: Winston March

Building Address
746 W. Watersville Rd
Mt. Airy, MD 21771

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

Census Tract 604001 Subdivision DICKERLY FARMS

Section - Area - Lot 14

Tax Map 2 Parcel 152 Grid 1A

Zoning RC Map Coordinates _____ Lot size _____

Property Owner's Name Rodney Waddell

Address 746 W. Watersville Rd

City Mt. Airy State MD Zip Code 21771

Home Phone 3018291019 Work Phone 313 7310

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

Phone _____ Fax _____

Existing Use Single Family Dwelling

Proposed Use Single Family Dwelling

Estimated Construction Cost \$ 15,000.00

Description of Work New Addition to existing 2nd story 30x40 lot, existing 1st floor, new 2nd floor house 39 X 52 Master Bedroom, 2nd floor Family room, Sun room, laundry room, bath, 3 Bedrooms, Rec. room, Hall Bath, front entry

Occupant or Tenant Same as owner

Contact Name Rodney Waddell

Address 746 W. Watersville Rd

City Mt. Airy State MD Zip Code 21771

Phone 3018291019 Fax _____

Contractor Company Same

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

License No. _____

Phone to den, playroom, library _____ 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: _____ 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.

Rodney Waddell
Applicant's Signature

Rodney Waddell
Print Name

Owner

3-15-02
Date

Title/Company

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

AGENCY _____ DATE _____ SIGNATURE APPROVAL _____

Land Development _____

State Highways _____

Building Official _____

Dev. Engineering/DPZ _____

Health _____ 5/25/02 Steven R. Kueg

Fire Protection _____

Is Sediment Control approval required prior to issuance? _____

YES ☐ NO ☐

CONINGENCY CONSTRUCTION START ☐

ONE-STOP SHOP _____

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

ST Forms PERMIT FRM _____

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 Covered for New Town Zone _____

SDP/Red-line approval date _____

Accepted by _____

PROPERTY ID: 74621

Filing fee: \$ _____

Permit fee: \$ _____

Excise tax: \$ _____

Add'l per. fee: \$ _____

TOTAL FEES: \$ _____

Sub-total paid: \$ _____

Balance due: \$ _____

Check # 2478

Validation _____

Rev. 5/17/00

NOTE: NO PROPERTY CORNERS FOUND.

This property lies within Zone C
MD Community Parcel Number 240044
0002 B
December 4, 1986

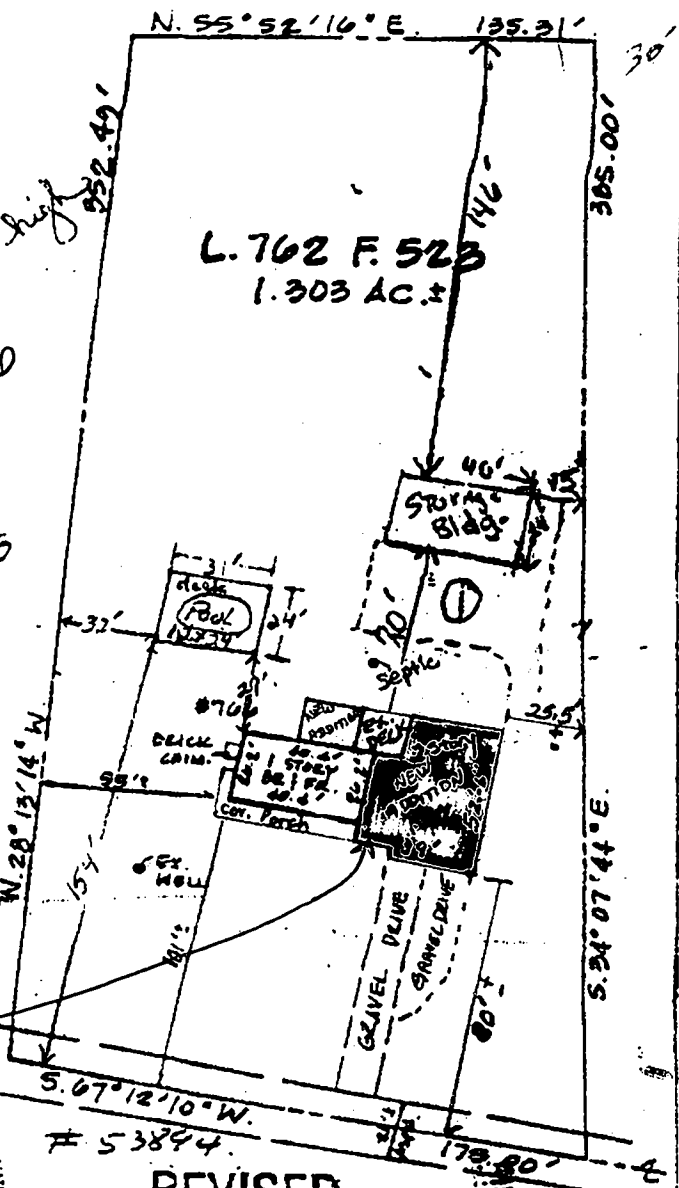
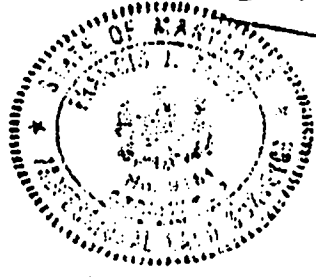


Fence around
entire deck 4' high
B00134886

3/25/02-
proposed addition
on SRK
House will have
a total of 4Bdms

5/16/94
proposed
addition has
no impact to
existing well
OR septic -
OK to proceed
A. McMillan

HOUSE LOCATION
PROPERTY OF
G.S. & T.D. DANA
LIBER 762 FOLIO 523
766 WEST WATERSVILLE ROAD
4TH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND



REVISED
Date: 5-16-94
Comments: Bldg moved per Health Dept

SCALE: 1" = 60'

HIGHLAND SURVEYS, INC.
LAND SURVEYORS - CONSULTANTS
102 WEST CHURCH STREET
FREDERICK, MD 21701
694-9680

DATE: 2-15-94

I hereby certify that the property delineated hereon is in accordance with the Plat of Subdivision and/or deed of record, that the improvements were located by accepted field practices and include permanent visible structures and encroachments, if any. This Plat is not for determining property lines, but prepared for exclusive use of present owners of property.

[Handwritten signature]

TITLE REPORT NOT FURNISHED
REFERENCE: N.B. L. 762 R. F. 523 JOB NO. 94-0046-01 DRAWN BY: KYT CHECKED BY: _____