

LAYOUT 8/25/09 INSP 4 \_\_\_\_\_ INSP 7 \_\_\_\_\_  
INSP 2 8/27/09 INSP 5 \_\_\_\_\_ INSP 8 \_\_\_\_\_  
INSP 3 8/28/09 INSP 6 \_\_\_\_\_ INSP 8 \_\_\_\_\_

ISSUE DATE: 8/16/09

APPROVAL DATE: 8/31/09

## PERMIT COMMERCIAL

*Logged  
into folder*

P 531868

A UPGRADE

### ON-SITE SEWAGE DISPOSAL SYSTEM HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH

Hatfield's Equipment

IS PERMITTED TO

INSTALL ☒ ALTER ☐

ADDRESS: PO Box 519 Annapolis Junction 20701 PHONE NUMBER: 301-490-4289

FACILITY: Assisted Living Facility LOT NUMBER: N/A

ADDRESS: 6636 Cedar Lane PROPERTY OWNER: Lois Peters

SEPTIC TANK CAPACITY (GALLONS): 2000 OUTLET BAFFLE FILTER REQUIRED

PUMP CHAMBER CAPACITY (GALLONS): N/A COMPARTMENTED TANK REQUIRED

MAXIMUM DAILY DESIGN FLOW 1400

DESIGN LOADING RATE PER SQUARE FOOT 0.8

*\* ~~Simple~~ system Design:*

*" use cell 3 " 3x74' → West  
2' wide trenches 1x70' → East*

LINEAR FEET OF TRENCH REQUIRED: 292 FACILITY SERVED BY PUBLIC WATER ☒

TRENCHES:	Trenches to be 3.0 feet wide. Inlet 4.0 feet below original grade. Bottom maximum depth 9.0 feet below grade. Effective area begins at 4.0 feet below original grade. 5.0 feet of stone below distribution pipe.
LOCATION:	Install system as per approved sewage disposal plan per "Cell 1" Install a new 2,000 gallon tank Install 5 trenches on contour per "Cell 1" Abandon existing drywell and septic tank
NOTES:	System upgrade for an assisted living facility w/ 14 beds. Layout inspection required prior to installation. Stake easement corners.

PLANS APPROVED: HS DATE: 7/29/2009

NOTES: PERMIT VOID AFTER 2 YEARS

CONTRACTOR IS RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS

WATERTIGHT SEPTIC TANKS REQUIRED

ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL UNLESS SPECIFICALLY AUTHORIZED

MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS UNLESS SPECIFICALLY AUTHORIZED

CONTRACTOR RESPONSIBLE FOR COMPLIANCE WITH APPLICABLE REGULATIONS, GUIDELINES AND THE TERMS OF THIS 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 410-313-1771 FOR INSPECTION OF SEPTIC SYSTEM**

NOT TO SCALE

**TRENCH/DRAINFIELD DATA**

WIDTH 2' INLET 3-4 BOTTOM 9'

NUMBER OF TRENCHES 4

TOTAL LENGTH     

ABSORPTION AREA     

DISTRIBUTION BOX LEVEL Level

DISTRIBUTION BOX BAFFLE Yes

DISTRIBUTION BOX PORT Yes

**SEPTIC TANK DATA**

SEPTIC TANK 1 LEVEL Yes

MANUFACTURER Babylon

CAPACITY 2000 GAL

SEAM LOC Top

TANK LID DEPTH 2'

BAFFLES Yes

BAFFLE FILTER     

MANHOLE LOC Front

6" PORT LOC Rear

WATERTIGHT TEST     

SLOTTED Yes

DATE ON LID 6-28-09

**PUMP/SEPTIC TANK LEVEL**

MANUFACTURER     

CAPACITY      GAL

SEAM LOC     

TANK LID DEPTH     

BAFFLES     

BAFFLE FILTER     

MANHOLE LOC     

6" PORT LOC     

WATERTIGHT TEST     

SLOTTED     

DATE ON LID     

ROAD NAME

**PRE-CONSTRUCTION:**

8/25/09 Trenches poured out in field. Spec's changed to 2' wide trenches still @ 2924E of trench. Sidewall fractured @ 36% reduction. Install 3 x 74' trenches on contour running towards Rt. 32. Last trench will start roughly @ bottom 74' trench and run in opposite direction. Install tank just below ex. Tank. Call for flex insp. (Kew)

**INSTALLATION:**

8/27/09 (2pm) Arrived on-site to see top trench was installed with very dirty stone from rt 1 quarry. Will let contractor finish 2nd trench w/ dirty stone since they were 3/4 of the way finished but rest of system will require Howard Co. spec. stone. Tank & D box set. no connection made yet (Kew) Next stone load may require insp. before use. 8/28/09 Contractor switched stone to another quarry. Little bit cleaner but still some clay/fines. OK to backfill. Need to pump & collapse Ex. tanks and drywell. (Kew)

FINAL INSPECTOR

DATE OF APPROVAL

8/31/09

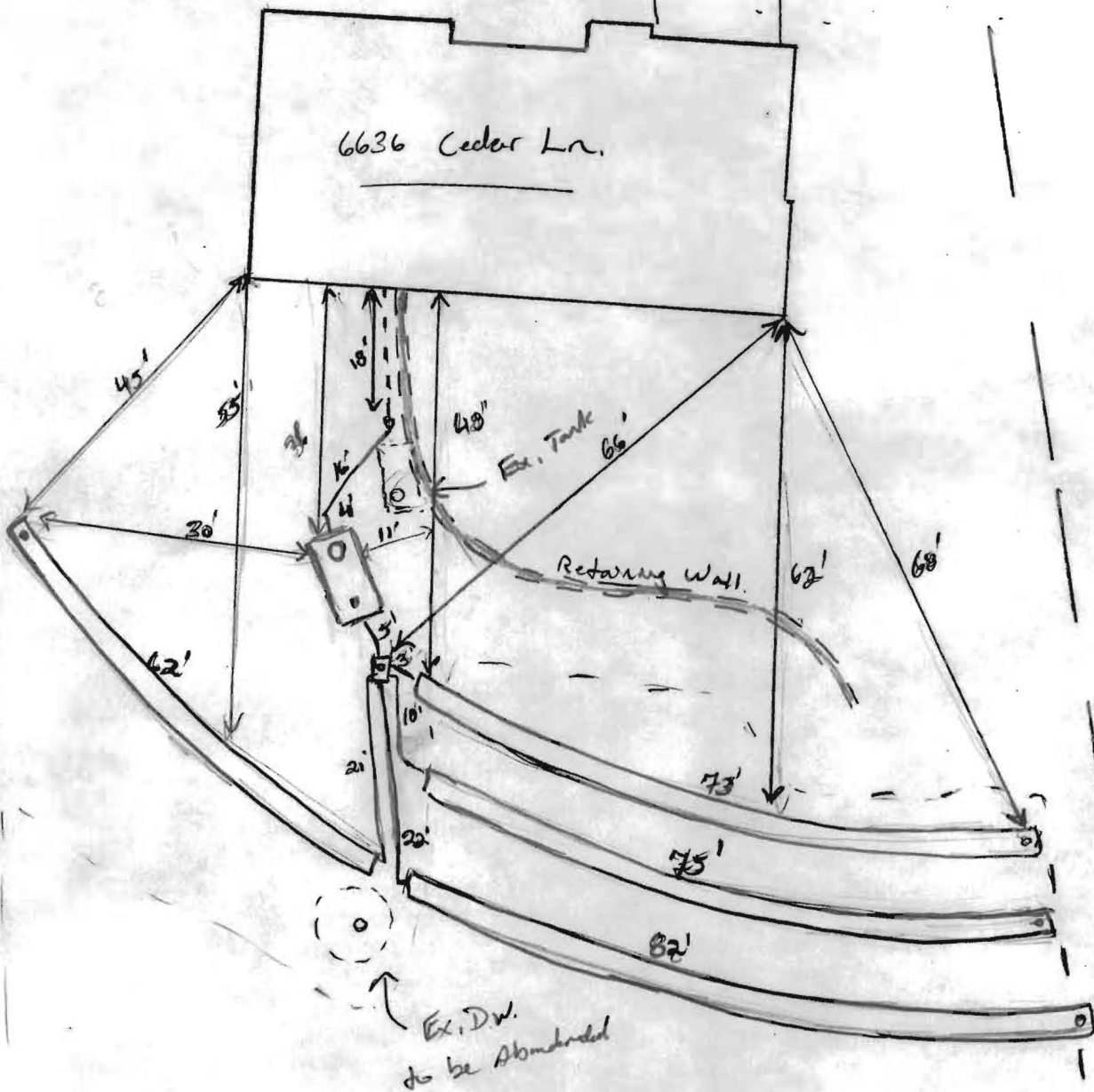
Ex. Paved,  
Drive

• Ex. Well to be  
sealed,  
connecting to  
Public H<sub>2</sub>O

6636 Cedar Ln.

Neighbor's  
Shed.

NOT TO SCALE







Howard County  
Health Department

Bureau of Environmental Health  
7178 Gateway Drive Columbia, MD 21046  
(410) 313-2640 Fax (410) 313-2648  
TDD (410) 313-2323 Toll Free 1-866-313-6300  
website: [www.hchealth.org](http://www.hchealth.org)

Peter L. Beilenson, M.D., M.P.H., Health Officer

**NOTICE OF VIOLATION**

**SENT VIA CERTIFIED and REGULAR MAIL:  
7007 1490 0000 5726 7775  
RETURN RECEIPT REQUESTED**

January 22, 2009

Lois Peters  
International Health Care  
P.O. Box 241  
Clarksville, MD 21029

**RE: Sewage overflow; pollution of ground surface  
6636 Cedar Lane**

Dear Mrs. Peters:

A site evaluation conducted by the Howard County Department of Inspections, Licenses and Permits (DILP) on January 9, 2009 identified a sewage overflow on the referenced property. The Howard County Health Department on January 14, 2009 completed a site inspection and confirmed the septic overflow had been corrected; however, the existing drywell is near failure. Information in a report forwarded by DILP to the Health Department on January 13, 2009, along with a Conditional Use petition submitted to our office in August 2008 and additional Health Department records, indicate that the septic system on the referenced property to be inadequate for the current property use as an assisted living facility.

Health Department records indicate that the septic system serving the property was installed on May 23, 1974 for a two bedroom home. No further improvements have been made to the septic system to support an increase in the number of the bedrooms or to support a change in use from a residential home to an assisted living facility (*Howard County Code Subtitle 8, Sec. 3.804(D)*). In addition, the *Howard County Code Subtitle 8, Sec 3.805* requires a sewage disposal area to be established on the property and the completion of a Percolation Certification Plan. The



Percolation Certification Plan must be submitted and approved by the Health Department to support any increase in living space and the adequacy of the septic system for the existing property use.

You have 7 (seven) days from the receipt of this notice to submit an application for a percolation test, along with the associated \$506.00 test fee and test plan, or return the property to its original use as a two bedroom home. In addition, you have 14 (fourteen) days from the receipt of this letter to schedule a percolation test. It is the property owner's responsibility to maintain the septic system to prevent any further overflows until a septic system upgrade can be performed. The septic contractor must obtain a septic permit from the Health Department prior to performing any work on the system, excluding pumping of the system.

Be advised that a sewage overflow is in violation of the *Code of Maryland (COMAR) 26.04.02.02(E)*: "A person may not dispose of sewage, body, or industrial wastes in any manner which may cause pollution of the ground surface, the waters of the State, or create a nuisance." A sewage overflow is also in violation of the *Howard County Code 3.804(a)(1)*, as such an overflow is defined as a nuisance, [12.110(a)].

Failure to comply will result in the issuance of a civil citation(s), *Howard County Code, paragraph 12.112*. Each day this violation is allowed to occur is considered a separate offense.

If you believe that the condition described above is not and could not be a hazard to health, or that the Health Department is not acting in compliance with pertinent laws and regulations, you may request a formal hearing before the Board of Health within 15 (fifteen) days of receipt of this letter. All requests are to be made in writing and directed to the Executive Secretary of the Board of Health at the above address.

If you have any questions regarding this letter, please contact me at the Bureau of Environmental Health, phone 410-313-1771.

Sincerely,

Sara Sappington, R.S.  
Bureau of Environmental Health  
Well and Septic Program

Copy: Executive Secretary, Board of Health  
Terri Hansen, Office of Aging  
Justina Taylor, Code Enforcement Officer, DILP  
File



HOWARD COUNTY DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS  
9250 Bendix Road ■ Columbia, Maryland 21045 ■ 410-313-1823

Robert J. Frances, P.E., Director  
bfrances@howardcountymd.gov

FAX 410-313-1861  
TDD 410-313-2323

**NOTICE OF VIOLATION**

February 13, 2009

Lois Peters  
International Health Care  
P. O. Box 241  
Clarksville, MD 21029

SUBJECT: License # T00010217  
Fire Safety/Property Maintenance Inspection  
Aastoria II Assisted Living  
6636 Cedar Lane, Columbia, MD 21044  
301-617-0083

Dear Mrs. Peters:

During the **February 12, 2009** fire safety/property maintenance reinspection of the above referenced property, the following violations of the Howard County Property Maintenance Code (PM) were still noted, and must be corrected by **March 15, 2009**. A reinspection to confirm compliance will take place on **March 16, 2009**, at **1:00 P.M.**


1. At a minimum, two (2) bedrooms and a bathroom were added to the previously identified carport. The enclosure of this structure appears to have been completed without the proper building permits. You will be required to produce building, electrical and plumbing permits for the construction. **(PM 106.1) Owner advised that she is in the process of obtaining "as-built" permits. Tom Frey, Building Inspector, and Darrell Smith, Plumbing Inspector, discussed inspections that would be scheduled following the acquisition of the required permits and potential problems with components of the construction both observed today and significant components unobserved that are hidden from view. All trade permits will be required; Mechanical permit including adequate sizing of the heating system for the structure, electrical, plumbing and building. In the interim you have removed the occupants and furniture from these rooms until the matter is resolved.**
2. Open slab appears to be plumbing ground work. Provide explanation; contractor information; permit(s). **(PM 504.1) Owner reported that no 'ground work' was placed in the area(s) of open basement slab. The slab where concrete has been removed and soils materials are exposed needs to be repaired; concrete replaced. Patched slab (1) rough-in stub observed (dehumidifier hose was routed to) appears to be plumbing ground work. Provide explanation; contractor information; permit(s). (PM 504.1) A toilet rough-in was observed at reinspection. Plumbing Inspector Darrel Smith advised the plug needs to be replaced and emissions of odor shall be eliminated.**
3. Caulk deteriorated at bathroom #2 shower-pan at floor. **(PM 503.4) Bathroom not currently in use.**
4. Septic is leeching to the surface. The Health Department and the Office on Aging have been advised. An immediate pumping of septic is required. (Inspector called Mrs. Peters on January 12, 2009 at 10 A.M. to notify her of the immediate need for action. Mrs. Peters advised she would call for service on January 12, 2009). A report on the viability of the septic will need to be submitted. This report shall include a recognition from the contractor that there are (8) clients in the above referenced assisted living property, the laundry requisite and the additional number of staff. Per the Memorandum from the Bureau of Environmental Health, dated August 25, 2008, *"Health Department records indicate the septic system serving the property was installed on May 23, 1974 for a two bedroom home."* **(PM 504.3, 506.2, 506.3) Owner is currently working with the Howard County Health Department and appropriate contractors, (Benchmark Engineering and Hatfield's), to meet the stipulations outlined in the notice from the Health Department dated January 22, 2009. Owner reported the septic is being pumped monthly, (by Fogle's), in the interim.**

Lois Peters  
International Health Care  
Notice of Violation  
February 13, 2009  
Page 2 of 2

*Failure to correct the violations will result in legal action being taken against you including the issuance of Civil Citations as authorized by Section PM-106.3, Local Amendments, with a minimum fine of \$250 per day for each day the violations are not corrected.*

Please call me at (410) 313-1835 if you have any questions regarding this matter. Your cooperation is appreciated.

Sincerely,  
INSPECTIONS & ENFORCEMENT DIVISION

  
Holley Robbins  
Code Enforcement Officer

HR/jw/6636CedarLn/H21ViolationLtr.doc

C File

Terri Hansen, Office on Aging  
Justina Taylor, Code Enforcement Officer  
Darrell Smith, Plumbing Inspector  
Tom Frey, Building Inspector  
Jim Jackson, Chief Electrical Inspector  
Sara Sappington, Health Department





Septic Tank

Dry Well  
~80% Full



Reset Form

Print Form

08 JUL -9 PM 1:49

For DPZ Office use only:

BA CASE NO.

BA 08-040C

Date Submitted

**CONDITIONAL USE PETITION  
TO THE HOWARD COUNTY HEARING AUTHORITY**

(This application will only be accepted after a pre-submission meeting. See attached info.)

**1. Conditional Use Request**

Conditional Use Category Assisted Living <sup>Senior</sup> Group Home  
Section 131.N. 36

Specific Use Requested Increase from 8 beds to 12 beds

**2. Name of Petitioner** Lois PETERS

Trading as (If applicable) International Healthcare Consultants

Mailing Address 6636 Cedar Lane Columbia MD 21044

Phone Number(s) 240-876-7443

E-Mail Address LoisPETERS @ msn.com

Name of Principal Contact (If different) Lois PETERS

**3. Counsel for Petitioner**

Mailing Address \_\_\_\_\_

Phone Number(s) \_\_\_\_\_

E-Mail Address \_\_\_\_\_

**4. Conditional Use Site Description**

Address/Street for Property 6636 Cedar Lane, Columbia MD 21044

Tax Map 35 Grid/Block 23 Parcel 154 Lot \_\_\_\_\_

Department of Assessments and Taxation Account No. \_\_\_\_\_

Total Land Area of Property 2.0 ( 2 Acres) ( \_\_\_\_\_ Square Feet) Check one.

Election District 5H

Zoning of Property R-20

Subdivision Name and Plat No. (If Applicable) Simpsonville 1405342007

Total Land Area of Use (If different than above) \_\_\_\_\_ ( 2 Acres) ( \_\_\_\_\_ Square Feet)

**5. Petitioner's Interest in Subject Property**

☒ OWNER (Including joint ownership)

☐ OTHER (Described and give name and address of owner)

Name of Owner LOIS PETERS

Mailing Address P.O. Box 241, CLARKSVILLE MD 21029

If the Petitioner is not the owner, written authorization for this petition from the owner must be submitted.

**6. Conditional Use Plan Requirements**

If the petition is approved, the conditional use plan will be made a part of the Hearing Examiner's Decision and Order, subject to modifications and conditions required by the Hearing Examiner.

The conditional use plan must be drawn to scale and must include the items listed below:

☒ (a) Courses and distances of outline boundary lines and the size of the property

☒ (b) North arrow

☒ (c) Zoning of subject property and adjoining properties

☒ (d) Scale of plan

☒ (e) Existing and proposed uses, structures, natural features and landscaping

☒ (f) Location and surface material of existing and proposed parking spaces, driveways, and points of access; number of existing and proposed parking spaces

☒ (g) Same as (e) and (f) above, of adjoining properties

☒ (h) Location of existing and/or proposed well and private septic easement area, if property is to be served by private water and septic facilities

☒ (i) Election District in which the subject property is located

☒ (j) Tax Map and Parcel Number(s) of the subject property

☒ (k) Name of local community in which the subject property is located or name of nearby community

☒ (l) Name, mailing address, telephone number (and e-mail address, if any) of the Petitioner

☐ (m) Name, mailing address, telephone number (and e-mail address, if any) of Counsel

☒ (n) Name, mailing address, telephone number of property owner

☒ (o) Floor area and height of structures, setback distances from property lines, and other numerical values necessary for the examination of the petition

☒ (p) Location of subject property in relation, by approximate dimension, to the center line of nearest intersection of two public roads

☒ (q) Ownership of abutting roads, right-of-way width, and existing pavement width

☐ (r) Any other information as may be necessary for full and proper consideration of the petition

**7. Additional Information Requirements**

a. Information regarding noise, dust, fumes, odors, lighting, vibrations, hazards or other physical conditions resulting from the use.

b. Supporting documentation, such as traffic studies, market studies, and noise studies as may be required by the Department of Planning and Zoning or by the Zoning Regulations.

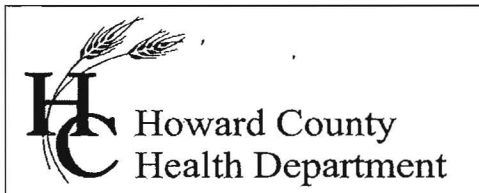
c. For expansions and enlargements, previous case number(s) and information regarding compliance with previous requirements and conditions.



## 8. Summary of Request

The following items should be answered by summary statements. If additional space is needed, please attach a Supplement to this petition.

- a. The present use of the subject property This house is licensed as an 12 bed group home. Somehow we have been informed that zoning requirements were not completed in 2006. Please authorize an increase from 8-12 beds in this petition.
- b. Details of the proposed use, including, **where applicable:** types of indoor and outdoor activities; hours of operation; number of employees, occupants, and/or customers; quantity and types of vehicles or equipment used; outdoor lighting to be used; quantities and capacities of materials stored; etc. This assisted living group home will have residents 24 hours per day, seven days per week. 2-3 employees will be in this home according to the number of residents admitted. These employees are not residents. Normal lighting for 6 bedroom single family home is present. Visitors vehicles are parked here periodically.
- c. Any additional information which will be useful in the evaluation of whether the conditional use complies with the specific criteria for the conditional use category within Section 131.N. The adjoining land to the south side of this property has been designated as a Howard County Public park to be done on 15 acres. Therefore we are requesting a reduction in the setback required by the zoning district.
- d. Will the conditional use generate any physical conditions such as noise, dust, fumes, odors, lighting, or vibrations which would be discernible from abutting and vicinal properties? No noise, dust, fumes, odors, lighting or vibration are discernible from the properties next door. Both sides of property are tree-studded at the property line, with tall grass on both sides of driveway going towards the back.



Bureau of Environmental Health  
7178 Columbia Gateway Drive, Columbia MD 21046  
(410) 313-2640 Fax (410) 313-2648  
TDD (410) 313-2323 Toll Free 1-866-313-6300  
website: [www.hchealth.org](http://www.hchealth.org)

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Peter L. Beilenson, M.D., M.P.H., Health Officer

**MEMORANDUM**

TO: George Beisser, Chief  
Division of Planning & Zoning Administration

FROM: Michael J. Davis *mjd*  
Assistant Director  
Bureau of Environmental Health

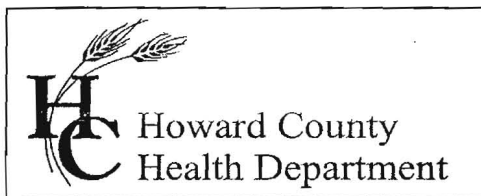
DATE: August 25, 2008

RE: Petition # **BA 08-040c**

*A# 12874  
6630 Cedar Ln*

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The Department of Health has reviewed the conditional use petition and recommends denial until the following issue has been addressed. Health Department records indicate the septic system serving the property was installed on May 23, 1974 for a two bedroom home. Therefore it is not adequate for the proposed use. Perc testing must be performed and a Perc Certification Plan must be submitted that demonstrates that the site has adequate on-site sewage disposal area. An adequate sewage disposal system must be installed prior to approval of the conditional use. Contact the Health Department at 410 313-1771 to discuss Perc Certification Plan requirements.



Bureau of Environmental Health  
7178 Columbia Gateway Drive, Columbia MD 21046  
(410) 313-2640 Fax (410) 313-2648  
TDD (410) 313-2323 Toll Free 1-866-313-6300  
website: [www.hchealth.org](http://www.hchealth.org)

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Peter L. Beilenson, M.D., M.P.H., Health Officer

October 13, 2009

Lois Peters  
6636 Cedar Lane  
Columbia, MD 21044

RE: **Variance Approval**  
6636 Cedar Lane

To Whom It May Concern:

This letter is a follow up to the verbal approval of your waiver request. The Health Department has received your waiver request faxed on June 5, 2009 requesting waivers to allow a Sewage Disposal Area to be located five (5) feet from the property lines and utilize cells 1 and 2 to avoid the use of a pump. This agency grants **approval** of the waivers. Any deviation from the Percolation Certification Plan signed on June 17, 2009 will require review by this Department. The property line along the sewage disposal area must be professionally staked prior to the trench installation.

Any questions regarding this decision may be directed to the Well and Septic Program of the Howard County Health Department.

Respectfully,

Michael J. Davis, R.S.  
Assistant Director  
Bureau of Environmental Health

c: File



## 9. Prior Petitions

Has any petition for the same, or substantially the same, conditional use as noted above for the subject property been denied by the Hearing Examiner within twenty four (24) months of the date of this petition?      ☐ Yes                      ☒ No

If yes, and six (6) months have elapsed since the last hearing, an affidavit must be attached which states the new and different grounds on which this re-submittal is based.

## 10. Additional Materials, Fees, Posting and Advertising Requirements

- a. Supplemental pages may be attached to the petition. **You must submit one original petition with original signatures, and one original of any other signed documents.** The following number of sets including petitions, plans and supplemental pages must be submitted:
  - *If the subject property adjoins a State road- original and 20 copies (application & plans)*
  - *If the subject property adjoins a County road- original and 18 copies (application & plans)*
- b. The Petitioner signing below hereby agrees to furnish such additional plats, plans, reports or other material as may be required by the Department of Planning and Zoning and/or the Hearing Examiner in connection with this petition.
- c. The Petitioner hereby agrees to pay all costs in accordance with the current schedule of fees.
- d. The Petitioner hereby agrees to properly post the property at least thirty (30) days immediately prior to the Hearing Examiner public hearing; to maintain the public notice posters until the public hearing is concluded; and to submit an affidavit of posting at, or before the time of the initial public hearing. The Petitioner also hereby agrees to advertise the public hearing by means of legal notices as prepared and approved by the Department of Planning and Zoning to be published one (1) time in at least two (2) newspapers of general circulation in Howard County, at least thirty (30) days prior to the Hearing Examiner public hearing, and to pay for such advertising costs; and agrees to submit two (2) approved certificates of the text and publication date(s) of the advertisement at or before the time of the hearing.

## 11. Signatures

The Petitioner hereby affirms that he/she has read the instructions on this form, filing herewith all of the required accompanying information, and affirms that all of the statements and information contained in, or filed with, this petition are true and correct.

Signature of Petitioner Lois Peters Date 6-10-08

Lois PETERS  
Print Name of Petitioner

Signature of Petitioner \_\_\_\_\_ Date \_\_\_\_\_

---

Print Name of Petitioner

Signature of Attorney \_\_\_\_\_ Date \_\_\_\_\_

---

Print Name of Attorney

## **General Standards for Conditional Uses**

All requests for conditional uses must meet the following general standards set forth in Section 131.B. of the Zoning Regulations for approval:

1. The proposed conditional use plan will be in harmony with the land uses and policies indicated in the Howard County General plan for the district in which it is located. In Evaluating the plan under this standard, the Hearing Examiner shall consider:
  - a. The nature and intensity of the use, the size of the site in relation to the use, and the location of the site with respect to streets giving access to the site; and
  - b. If a conditional use is combined with other conditional uses or permitted uses on a site, the overall intensity and scale of uses on the site is appropriate given the adequacy of proposed buffers and setbacks.
2. The proposed use at the proposed location will not have adverse effects on vicinal properties above and beyond those ordinarily associated with such uses. In evaluating the plan under this standard, the Hearing Examiner shall consider whether:
  - a. The impact of adverse effects such as noise, dust, fumes, odors, lighting, vibrations, hazards or other physical conditions will be greater at the subject site than it would generally elsewhere in the zone or applicable other zones.
  - b. The location, nature and height of structures, walls and fences, and the nature and extent of the landscaping on the site are such that the use will not hinder or discourage the development and use of adjacent land and structures more at the subject site than it would generally in the zone or applicable other zones.
  - c. Parking areas will be of adequate size for the particular use. Parking areas, loading areas, driveways and refuse areas will be properly located and screened from public roads and residential uses to minimize adverse impacts o adjacent properties.
  - d. The ingress and egress drives will provide safe access with adequate sight distance, based on actual conditions, and with adequate acceleration and deceleration lanes where appropriate.

In addition to the specific requirements of the appropriate subsection within Section 131.N of the Zoning Regulations, conditional uses within residential developments in the R-ED, R-SC, R-SA-8, R-A-15, R-MH or R-VH districts are subject to the standards enumerated in Section 131.C.



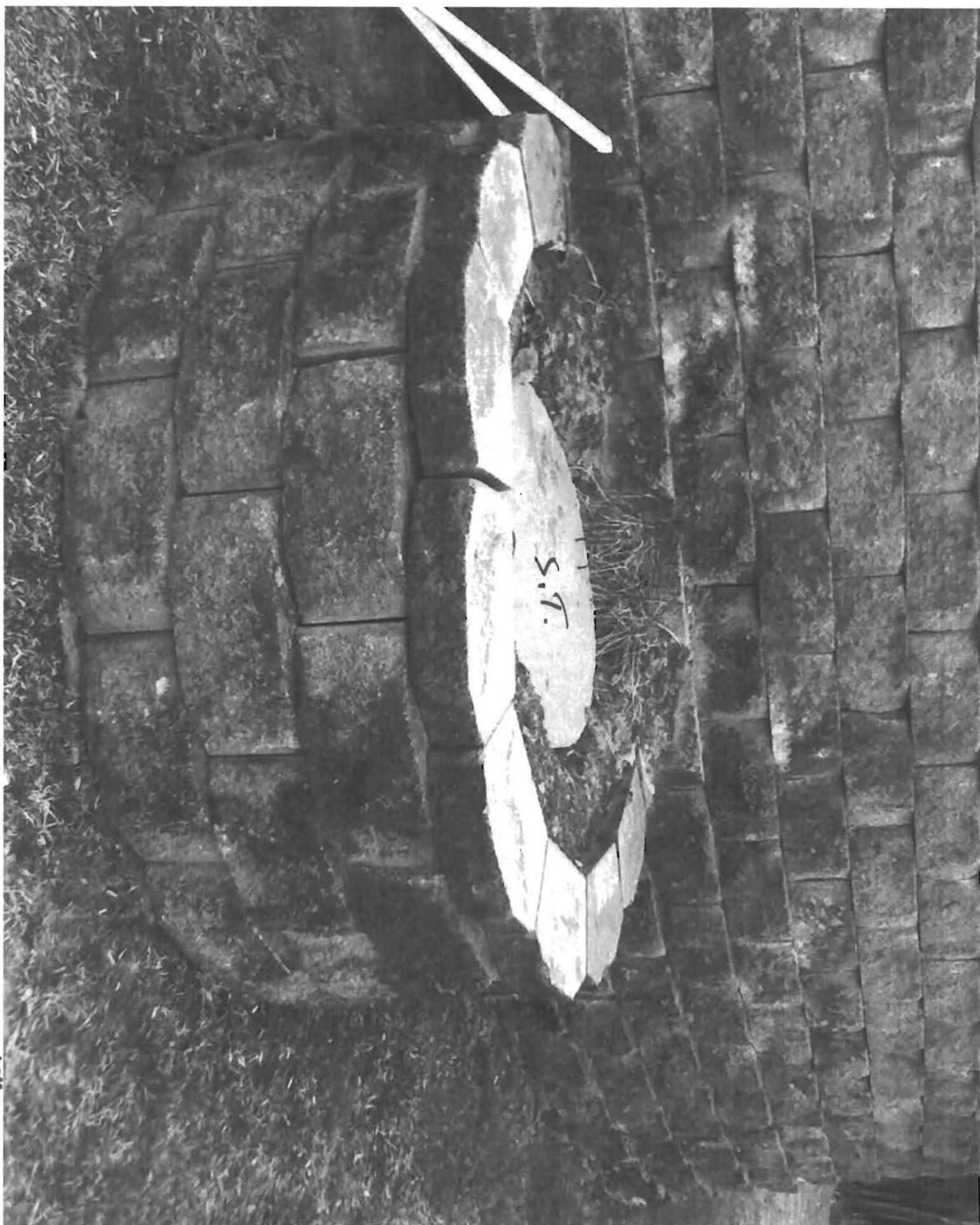
Restoring world  
↑

↑  
ST.

D.W.

↓

1/14/1994



PETITIONER International HealthCare Consultants

ADDRESS 6636 Cedar Lane Columbia md 21044

Affidavit made pursuant to the pertinent provisions of Title 22 of the Howard County Code as amended:

The person(s) signing below hereby declare(s) that no officer or employee of Howard County, whether elected or appointed, has received prior hereto or will receive subsequent hereto, any monetary or material consideration, any service or thing of value, directly or indirectly, upon more favorable terms than those granted to the public generally in connection with the submission, processing, issuance, grant or award of the attached petition to the Hearing Examiner for a conditional use as requested.

I, we, do solemnly declare and affirm under the penalties of perjury that the contents of the foregoing affidavit are true and correct to the best of my, our, knowledge, information and belief.

Donna A. K. Huns  
Witness

Joan Pitt  
Signature

6-10-08  
Date

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\*\*\*\*\*

Application Fee: \$500.00

Poster Fee: \$20.00 per sign/poster

Make check payable to: Director of Finance.

For DPZ use only:

Hearing fee: \$ \_\_\_\_\_  
Poster fee: \$ \_\_\_\_\_  
Total: \$ \_\_\_\_\_

Receipt No. \_\_\_\_\_

County Website: [www.howardcountymd.gov](http://www.howardcountymd.gov)

PLEASE CALL 410-313-2350 FOR AN APPOINTMENT TO SUBMIT YOUR APPLICATION.

T:\shared\PubSer\Applications\CondUse

Revised 10/07



June 4, 2006

Heidi Scott  
Well and Septic Program  
Howard County Health Department  
7178 Columbia Gateway Drive  
Columbia, MD 210046

Re: 6636 Cedar Lane  
Receipt Number A530296

Ms. Scott:

I am writing to request three variances for the on-site septic disposal area on my parcel.

The first variance is from the 10 foot setback between a lot line and a septic reserve area. One of the areas I am requesting a variance for is the southern side of my lot adjacent to the lands owned by Howard County, Department of Public Works. The second area I am requesting a variance for is the northern side of the lot adjacent to Hazel Wise's property (parcel 173).

The reason I need these variances is the overall required trench length is not available due to fill material at the rear of my parcel.

The Health Department, in letters dated April 6, 2009 and June 3, 2009 to Benchmark Engineering, Inc., you requested that the septic reserve area be adjusted away from this fill area. In order to comply with that request and to provide adequate trench design it was necessary to encroach into the required setback by 5 feet. We will still have the ability to maintain the trenches as there will be 5 feet of area between the adjoining lands and the septic reserve area. I do not feel that any of my neighbors will be impacted by this request.

The other variance I am requesting is of the pump tank. I do not wish at this time to install a pump tank as I wish to use cells 1 and 2 for my initial system and first repair. The repair system designated as cell 3 will be the last on site disposal system. This property is within the Metropolitan District and is in the 5-10 year planned service area. Public sewer service is not currently available to my property but should be in the future. Hopefully I will be able to avoid the expense of installing a pump tank but I acknowledge that I may need to install the pump tank in the future.

Thanks you for your time and effort on this project.

Sincerely,



Lois Peters

Owner

Date: 8/15/08

Petition: see application

SIGNATURE



# HOWARD COUNTY DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS

9250 Bendix Road

Columbia, Maryland 21045

410-313-1823

Robert J. Frances, P.E., Director  
bfrances@howardcountymd.gov

FAX 410-313-1861  
TDD 410-313-2323

## NOTICE OF VIOLATION

January 13, 2009

Mrs. Lois Peters  
International Health Care  
P. O. Box 241  
Clarksville, MD 21029

SUBJECT: License - #T00010217  
Fire Safety/Property Maintenance Inspection  
Aastoria II Assisted Living  
6636 Cedar Lane  
301-617-0083

Dear Mrs. Peters:

During the **January 9, 2009** fire safety/property maintenance inspection of the above referenced property, the following violations of the Howard County Property Maintenance Code (PM) were noted, and must be corrected by **February 10, 2009, with the exception of the verbal notice given on January 12, 2009 regarding the immediate need to pump the septic.** A reinspection to confirm compliance will take place on **February 12, 2009.**

1. Annual Sprinkler system inspection by a Maryland Licensed Contractor is overdue. No inspection was found to be conducted in 2007. A National Fire Protection Association (NFPA) report and certification is required to be submitted annually. **(PM 704.1, NFPA72)**
2. At a minimum, two (2) bedrooms and a bathroom were added at the previously identified carport. The enclosure of this structure appears to have been completed without the proper building permits. You will be required to produce Building, Electrical and Plumbing permits for the construction. **(PM 106.1)**
3. Kitchen:  
No stove hood vent. **(PM 403.4)**  
Single door by refrigerator is not weather-tight. Daylight can be seen around door at frame; door does not fit tightly in frame. **(PM 304.13)**  
Floor is not finished to baseboard behind refrigerator. Dirt and food cannot be cleaned as it falls into this unfinished space. **(PM 305.1)**
4. Bedroom (#2) -Entry door knob is broken. **(PM 305.6)**
5. Bedrooms (#3 and #4) and any other bedrooms where older wood frame windows are present;  
Windows are painted shut and could not be opened. Windows must be openable, remain open with window hardware and be able to lock when within 6' of grade. Window glazing is deteriorated, cracked and peeling. Glazing must be restored. **(PM 304.13, 304.13.1, 304.13.2)**
6. Bedroom (#6) -Electrical receptacle and plate not flush at wall. **(PM 605.1)**  
(2) Sprinkler heads painted. Sprinkler heads cannot be cleaned and must be replaced. **(PM 704.1, NFPA13)**
7. Basement:  
No stair rail at basement stairs. **(PM 305.5)**  
Multiple extension cords and power bars in use. Refrigerator plugged into power bar. Extension cord to staff sleeping area; dehumidifier on extension cord. **(PM 605.1, 605.2)**  
Plastic tarp attached to ceiling (floor joists) in staff sleeping area. **(PM 703.1)**  
Open slab appears to be plumbing ground work. Provide explanation; contractor information; permit(s). **(PM 504.1)**  
Patched slab (1) rough-in stub observed (dehumidifier hose was routed to) appears to be plumbing ground work. Provide explanation; contractor information; permit(s). **(PM 504.1)**  
No switch plate at switch near pressure tank. **(PM 605.1)**  
Numerous interior foundation cracks, horizontally and vertically, at front foundation near sprinkler holding tank and pressure tank. **(PM 304.5)**  
Sewer and drain venting observed passing vertically at exterior framing covered only by siding; no insulation or wall covering at interior. **(PM 304.6)**

Framing at left of basement stair deteriorated and damaged; associated floor joists at this framed wall notched and would be in jeopardy if this wall were to fail. (PM 305.2)

Slide latch at top basement exterior door. (PM 304.18.1)

Obstructed electrical panel. Clearance must be maintained 30" each side and 36" at front of panel. (PM 605.1)

Remove lint from dryer vent attached to sprinkler heads and floor joists. (PM 305.1)

Sprinkler holding tank, sprinkler valve area and pressure tank all obstructed. Clearances must be maintained for inspection, maintenance and operation. (PM 704.1)

(3) Additional sprinkler heads needed in spare head box. (PM 704.1)

Oxygen tanks must be stored properly or disposed of. (PM 705.1)

8. Caulk deteriorated at bathroom #2 shower-pan at floor. (PM 503.4)

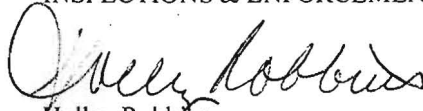
9. Septic is leeching to the surface. The Health Department and the Office on Aging have been advised. An immediate pumping of septic is required. (Inspector called Mrs. Peters on 1.12.09 at 10 A.M. to notify her of the immediate need for action. Mrs. Peters advised she would call for service on 1.12.09). A report on the viability of the septic will need to be submitted. This report shall include a recognition from the contractor that there are (8) clients in the above referenced assisted living property, the laundry requisite and the additional number of staff. Per the Memorandum from the Bureau of Environmental Health, dated August 25, 2008, "Health Department records indicate the septic system serving the property was installed on May 23, 1974 for a two bedroom home." (PM 504.3, 506.2, 506.3)

***Failure to correct the violations will result in legal action being taken against you including the issuance of Civil Citations as authorized by Section PM-106.3, Local Amendments, with a minimum fine of \$250 per day for each day the violations are not corrected.***

Please call me at (410) 313-1835 if you have any questions regarding this matter. Your cooperation is appreciated.

Sincerely,

INSPECTIONS & ENFORCEMENT DIVISION



Holley Robbins  
Code Enforcement Officer

HR/jw/6636CedarLn/H21-FireSafetyPropertyMaintenanceViolationLtr.doc

C Terri Hansen, Office on Aging

Michael Davis, Bureau of Environmental Health

Justina Taylor, Code Enforcement Officer, DILP

File

UNITED STATES POSTAL SERVICE



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USPS  
Permit No. G-10

- Sender: Please print your name, address, and ZIP+4 in this box •

Howard County Health Dept.

Bureau of Environmental Health

Attn: Sara Sappington

71778 Columbia Gateway Dr.

Columbia, MD 21046



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- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

**1. Article Addressed to:**

Lois Peters  
Astoria II Assisted Living  
6636 Cedar Lane  
Columbia, MD 21044

**2. Article Number**

(Transfer from service label)

7007 1490 0000 5726 7775

**COMPLETE THIS SECTION ON DELIVERY****A. Signature****X**

*Pat Byrd*

☐ Agent☐ Addressee**B. Received by (Printed Name)**

*Pat Byrd*

**C. Date of Delivery****D. Is delivery address different from item 1?**☐ Yes

If YES, enter delivery address below:

☐ No**3. Service Type**☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.**4. Restricted Delivery? (Extra Fee)**☐ Yes

U.S. Postal Service™

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7007 1490 0000 5726 7775

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**IMPORTANT: Save this receipt and present it when making an inquiry.**

PS Form 3800, August 2006 (Reverse) PSN 7530-02-000-9047

LIBER 5874

FOLIO 641

2.0002 AC. ±  
87,131 S.F. ±  
(RECORD)

1.8814 AC. ±  
81,953 S.F. ±  
(SURVEY)

○ — Trees

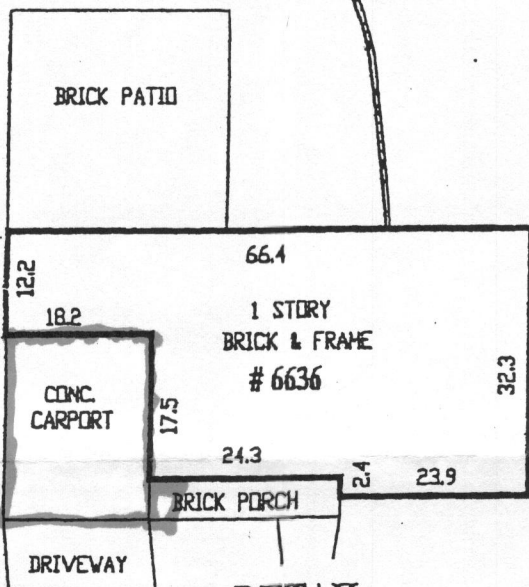
▲ — Shrubs

▨ — Flower Bed

⊗ — Septic Tank  
N/F

▩ — Septic Field  
L.299 F.279

⊠ — Parking Space



DETAIL

SCALE: 1"=30'


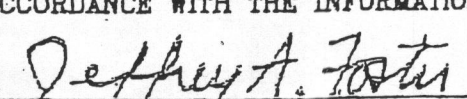
CEDAR LANE  
(MD ROUTE 32)

HEARING EXAMINER  
APPLICANT: PROTESTANT  
EXHIBIT #  
BA CASE # 08-0406  
DATE: 11/24/08

PLAT OF SURVEY  
INTERNATIONAL HEALTHCARE  
CONSULTANTS INC. PROPERTY  
LIBER 5874 FOLIO 641

HOWARD COUNTY, MARYLAND

Building Line and/or Flood Zone Information is taken from Available Sources and is Subject

SURVEYOR'S CERTIFICATE		REFERENCES	
I HEREBY CERTIFY THAT THE INFORMATION SHOWN HEREON HAS BEEN BASED UPON THE RESULTS OF A FIELD SURVEY PURSUANT TO THE DEED OR PLAT OF RECORD. PROPERTY MARKERS HAVE BEEN RECOVERED OR PLACED IN ACCORDANCE WITH THE INFORMATION SHOWN.		PLAT BK.	
		PLAT NO.	
 MARYLAND PROPERTY LINE SURVEYOR REG. NO. 537		LIBER 5874	DATE OF LOCATIONS
		FOLIO 641	
			PROP. CORS.: 10-24-02
			HSE. LOC.: 08-07-02



PERENNIAL STREAM

S56°57'31"E

Ggc

Gmb  
Ggc

SEPTIC RESERVE AREA  
13,456 S.F.

HAZEL N. WISE  
PARCEL 173  
LIBER 204 FOLIO 583  
ZONED R-20

Approved Septic System Plan  
Howard County Health Department

*Wm Scott*  
Signature

8-5-09  
Date

P-5  
O FAILED  
315.6

CELL 1

20' SEPTIC SETBACK

EXISTING STRUCTURE

N62°25'29"W

P-1  
318.1

CELL 2

CELL 3

DISTR. BOX

TANK 2

TANK 1

FUTURE PUMP TANK

EXISTING SEPTIC TANK NOT TO BE REUSED

20' SEPTIC SETBACK

Ggc

EXISTING RETAINING WALL

EXISTING DWELLING TO REMAIN

FF=334.18  
BF=325.70

EXISTING WELL NO TAG

EXISTING DRIVEWAY

619.20'

23.24  
= 320.4  
= 320.1  
= 321.4  
323.6  
319.7  
= 319.4  
= 320.5  
323.1  
18.7  
318.6  
= 321.6

HOWARD COUNTY  
DEPT OF PUBLIC WORKS  
PARCEL 87  
PLAT NO. 20408  
ZONED R-ED

EXISTING STRUCTURE