Real Property Data Search

Search Result for HOWARD COUNTY

View Map | **View GroundRent Redemption** | **View GroundRent Registration**

Tax Exempt: None
Special Tax Recapture: None
Exempt Class: None

Account Identifier: **District -** 04 **Account Number -** 337751

Owner Information

Owner Name:	HUNT CLYDE EDWARD HUNT SUSAN KENNY	**Use:** **Principal Residence:**	RESIDENTIAL YES
Mailing Address:	17601 TIMBERLEIGH WAY WOODBINE MD 21797-7901	**Deed Reference:**	/13526/ 00366

Location & Structure Information

Premises Address:	17601 NW TIMBERLEIGH WAY WOODBINE 21797-0000	**Legal Description:**	LOT 6 1.000 A 17601 TIMBERLEIGH WAY KENNEY SUB

Map:	Grid:	Parcel:	Neighborhood:	Subdivision:	Section:	Block:	Lot:	Assessment Year:	Plat No:	10668
0012	0012	0069	4010102.14	1002		6	1	2020	Plat Ref:	

Special Tax Areas: None
Town: None
Ad Valorem: 100
Tax Class: None

Primary Structure Built	Above Grade Living Area	Finished Basement Area	Property Land Area	County Use
1978	3,044 SF		1.0000 AC	

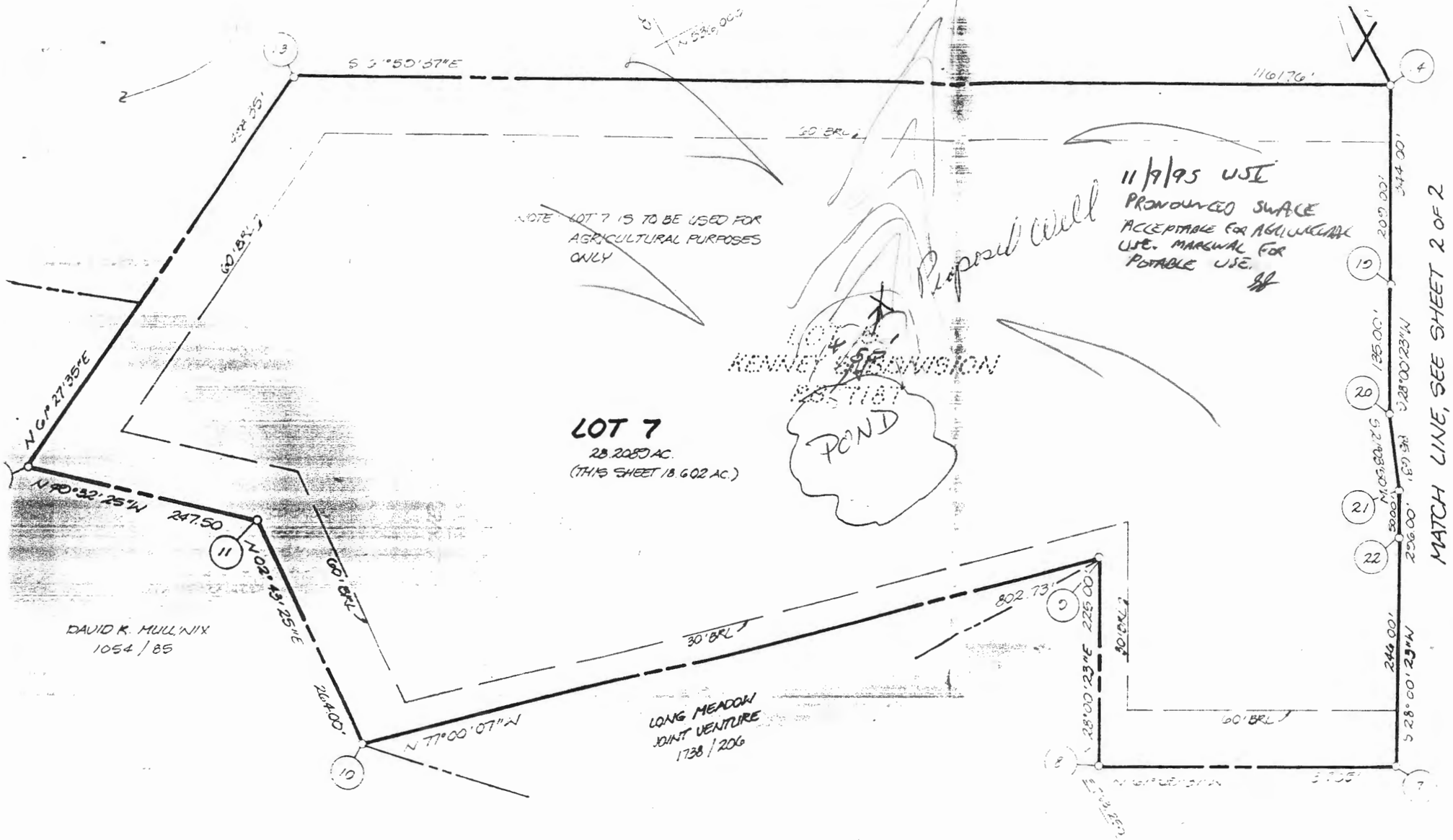
Stories	Basement	Type	Exterior	Quality	Full/Half Bath	Garage	Last Notice of Major Improvements
2	YES	STANDARD UNIT	FRAME/	4	2 full/ 1 half	1Att/1Det	

Value Information

	Base Value	Value As of 01/01/2017	Phase-in Assessments As of 07/01/2019	As of 07/01/2020
Land:	180,000	180,000		
Improvements	202,300	202,300		
Total:	382,300	382,300	382,300	
Preferential Land:	0			

Transfer Information

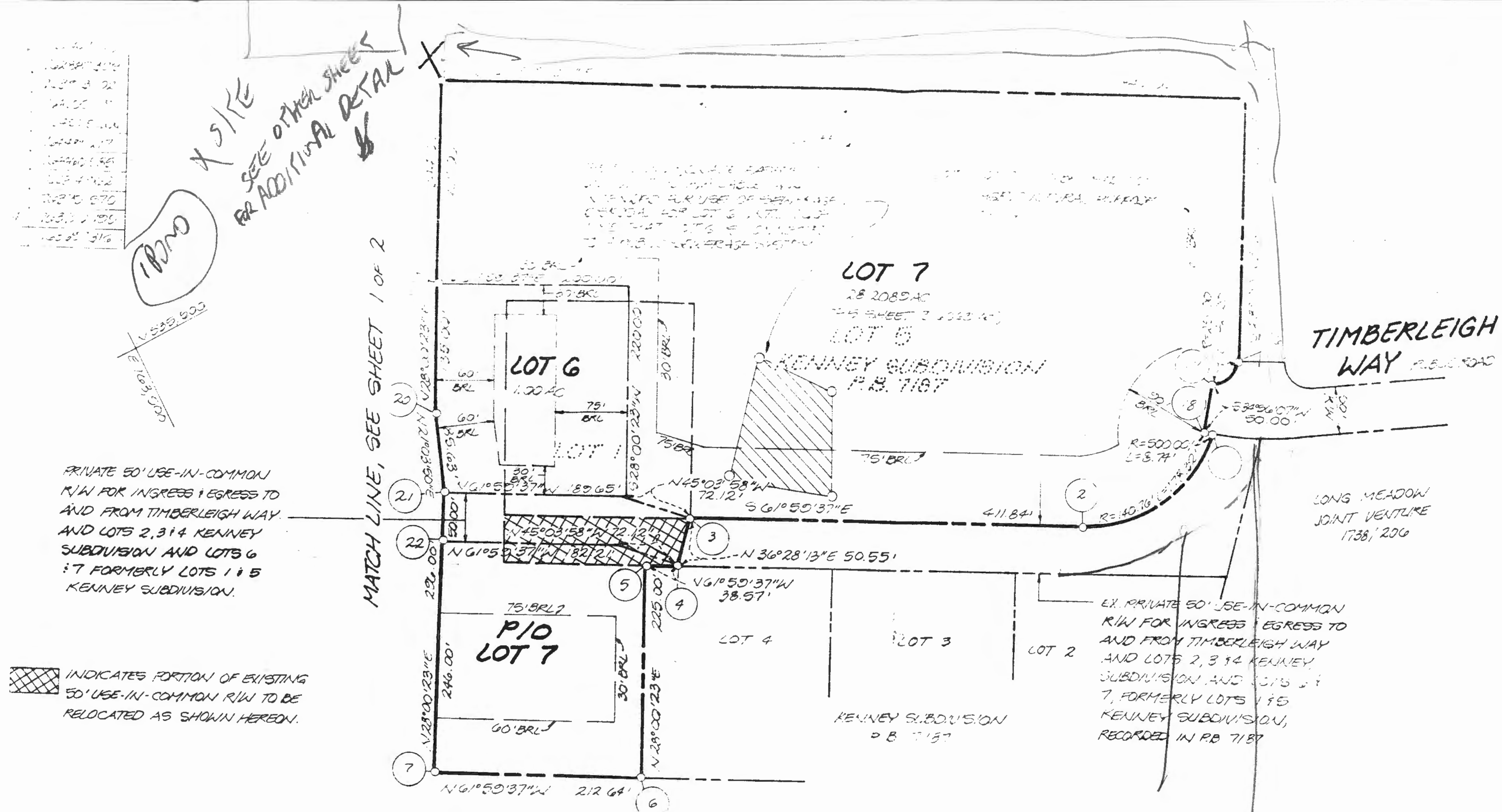
Seller: KENNEY WILLIAM D	**Date:** 10/24/2011	**Price:** $600,000
Type: ARMS LENGTH MULTIPLE	**Deed1:** /13526/ 00366	**Deed2:**
Seller: KENNEY WILLIAM D	**Date:** 05/05/2005	**Price:** $0
Type: NON-ARMS LENGTH OTHER	**Deed1:** /09153/ 00077	**Deed2:**
Seller:	**Date:**	**Price:**
Type:	**Deed1:**	**Deed2:**



TOTAL AREA TABULATIONS

TOTAL AREA TABULATIONS

TOTAL AREA OF LOT(S) TO BE RECORDED: 28.2080 AC.
TOTAL AREA OF ROADWAYS TO BE RECORDED INCLUDING WIDENING STRIPS: NONE
TOTAL AREA OF OPENSPACE TO BE RECORDED: NONE
TOTAL AREA OF FLOODPLAIN TO BE RESTRICTED: NONE


X SITE
SEE OTHER SHEETS FOR ADDITIONAL DETAIL
MATCH LINE, SEE SHEET 1 OF 2
LOT 7
LOT 5
KENNEY SUBDIVISION
P.B. 7187
LOT 6
1.00 AC
P/O
LOT 7
TIMBERLEIGH
WAY
LOT 4
LOT 3
LOT 2
KENNEY SUBDIVISION
LONG MEADOW
JOINT VENTURE
1738/206
LONG MEADOW
JOINT VENTURE
1738/206
N 28°00'23"E
N 61°59'37"W
S 28°00'23"W
N 45°03'58"W
72.12'
S 61°59'37"E
N 36°28'13"E 50.55'
N 61°59'37"W
38.57'
N 61°59'37"W 212.64'
N 28°00'23"E
246.00'
225.00'
220.00'
411.84'
R=500.00'
L=8.74'
50.00'
189.65'
182.21'
75' BRL
60' BRL
30' BRL
PRIVATE 50' USE-IN-COMMON R/W FOR INGRESS & EGRESS TO AND FROM TIMBERLEIGH WAY AND LOTS 2, 3 & 4 KENNEY SUBDIVISION AND LOTS 6 & 7 FORMERLY LOTS 1 & 5 KENNEY SUBDIVISION.
INDICATES PORTION OF EXISTING 50' USE-IN-COMMON R/W TO BE RELOCATED AS SHOWN HEREON.
EX. PRIVATE 50' USE-IN-COMMON R/W FOR INGRESS & EGRESS TO AND FROM TIMBERLEIGH WAY AND LOTS 2, 3 & 4 KENNEY SUBDIVISION AND LOTS 6 & 7, FORMERLY LOTS 1 & 5 KENNEY SUBDIVISION, RECORDED IN P.B. 7187
N 535,500
E 1,63,000
N 534,750

... REQUIREMENTS SECTION 3-108, THE REAL PROPERTY ARTICLE, ANNOTATED CODE OF MARYLAND, 1988 REPLACEMENT VOLUME (AS SUPPLEMENTED) AS FAR AS THEY RELATE TO THE MAKING OF THIS PLAT AND THE SETTING OF MARKERS HAVE BEEN COMPLIED WITH.

WILLIAM G. HARTEL, P.L.S., MD NO. 9436 — DATE

DYER KENNEY — DATE

TABULATIONS (THIS SHEET)

- LOTS TO BE RECORDED: 2
- LOTS TO BE RECORDED: 10.6069 AC.
- STRIPS: NONE
- OPEN SPACE TO BE RECORDED: NONE
- FLOODPLAIN TO BE RECORDED: NONE
- SUBDIVISION TO BE RECORDED: 10.6069 AC.

C 1 | 2876 — SEQUENCE NO. (MDE USE ONLY)
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPE

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

COUNTY NUMBER W-50915

ST/GO USE ONLY
DATE Received

DATE WELL COMPLETED 01/30/96

Depth of Well 400 (TO NEAREST FOOT) — OK 3/29/96 (CW)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-93-0090

OWNER TIMBERLEIGH HILL NURSERY (last name / first name)
STREET OR RFD 17601 TIMBERLEIGH WAY TOWN WOODBINE
SUBDIVISION KENNET SECTION LOT

WELL LOG
Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (Use additional sheets if needed)	FEET FROM	FEET TO	check if water bearing
Top Soil	0	2	
Shaley Clay	2	6	
brown Slate	6	15	
blue slate	15	30	
brown slate	30	31	✓
green Slate & Flint mixed	31	400	

NUMBER OF UNSUCCESSFUL WELLS:

WELL HYDROFRACTURED — yes [Y] no [N]

CIRCLE APPROPRIATE LETTER
- A — A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED
- E — ELECTRIC LOG OBTAINED
- P — TEST WELL CONVERTED TO PRODUCTION WELL

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

TYPE: MWD/MSD/MGD
DRILLERS LIC. NO. 40
Geo F Eatinday
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)
LIC. NO. 501
Charles P Fallon
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

GROUTING RECORD
WELL HAS BEEN GROUTED (Circle Appropriate Box) — yes [Y] no [N]
TYPE OF GROUTING MATERIAL (Circle one)
CEMENT [CM] BENTONITE CLAY [BC]
NO. OF BAGS 19 NO. OF POUNDS 1900
GALLONS OF WATER 95
DEPTH OF GROUT SEAL (to nearest foot)
from 0 ft. (TOP) to 19 ft. (BOTTOM) (enter 0 if from surface)

CASING RECORD
casing types insert appropriate code below: [ST] STEEL [CO] CONCRETE [PL] PLASTIC [OT] OTHER

MAIN CASING TYPE	Nominal diameter top (main) casing (nearest inch)	Total depth of main casing (nearest foot)
ST	6	20

OTHER CASING (if used)
EACH CASING

diameter inch	depth (feet) from	to

SCREEN RECORD
screen type or open hole insert appropriate code below: [ST] STEEL [BR] BRASS BRONZE [HO] OPEN HOLE [PL] PLASTIC [OT] OTHER

C 2

EACH SCREEN	DEPTH (nearest ft.)	
1	320	400
2		
3		

SLOT SIZE 1 ____ 2 ____ 3 ____
DIAMETER OF SCREEN ____ (NEAREST INCH)

	from	to
GRAVEL PACK		
IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68		

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)
(E.R.O.S.) W Q
70 TELESCOPE CASING — 72 LOG INDICATOR — 74 75 76 OTHER DATA

C 3

PUMPING TEST
HOURS PUMPED (nearest hour) 3
PUMPING RATE (gal. per min.) 12
METHOD USED TO MEASURE PUMPING RATE Air
WATER LEVEL (distance from land surface)
BEFORE PUMPING 0 ft.
WHEN PUMPING 400 ft.

TYPE OF PUMP USED (for test)
[A] air [P] piston [T] turbine
[C] centrifugal [R] rotary [O] other (describe below)
[J] jet [S] submersible

PUMP INSTALLED
DRILLER WILL INSTALL PUMP (CIRCLE) (YES or NO) YES NO
IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.
TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29.
CAPACITY: GALLONS PER MINUTE (to nearest gallon)
PUMP HORSE POWER
PUMP COLUMN LENGTH (nearest ft.)
CASING HEIGHT (circle appropriate box and enter casing height) [+] above [−] below LAND SURFACE (nearest foot)

LOCATION OF WELL ON LOT
SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND /OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)

N

Sideline 300± well
500±
Timberleigh Way

COUNTY

STATE USE INDUSTRIES JESSUP, MD 20794

EMERGENCY/TEMP NO. IF ANY

B 1 | 6384 | SEQUENCE NO. (MDE USE ONLY)
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
PERMIT TO DRILL WELL
please print or type

STATE PERMIT NUMBER: Ho-93-0090
fill in this form completely

Date Received (APA): 10/04/95

OWNER INFORMATION
TIMBERLEIGH HILL MUR
Last Name / Owner / First Name
17601 TIMBERLEIGH WAY
Street or RFD
WOODBINE MD 21797
Town / State / Zip

DRILLER INFORMATION
George F. Easterday
Driller's Name
CIRCLE: MSD/MGD/MWD: 40
License No.
L. Franklin Easterday, Inc.
Firm Name
9265 Brown Church Rd., Mt. Airy, Md. 21771
Address
George F. Easterday 10-2-95
Signature / Date

B 2 WELL INFORMATION
APPROX. PUMPING RATE (GAL. PER MIN.): 10
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY): 1000

USE FOR WATER (CIRCLE APPROPRIATE BOX)
- D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
- (F) FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
- I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
- P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
- T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

APPROXIMATE DEPTH OF WELL: 400 FEET

APPROXIMATE DIAMETER OF WELL: 6 NEAREST INCH

METHOD OF DRILLING (circle one)
BORED (or Augered) | JETTED | Jetted & DRIVEN
(AIR-ROTary) | AIR-PERcussion | ROTARY (Hydraulic Rotary)
CABLE | REVerse-ROTary | DRive-POINT
other

REPLACEMENT OR DEEPENED WELLS
(CIRCLE APPROPRIATE BOX)
- (N) THIS WELL WILL NOT REPLACE AN EXISTING WELL
- Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
- S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY - CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
- D THIS WELL WILL DEEPEN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENED (IF AVAILABLE):

Not to be filled in by driller (MDE OR COUNTY USE ONLY)
APPROP. PERMIT NUMBER: GAP
FORCE: GS (WRITE INITIALS IN BOX) PERMIT No. Ho-93-0090

B 3 LOCATION OF WELL
8 COUNTY: HOWARD
23 SUBDIVISION: KENNEY SUBDIVISION
SECTION: LOT:
52 NEAREST TOWN: FLORENCE
MILES FROM TOWN (enter 0 if in town): 1 M I

B 4
DIRECTION OF WELL FROM TOWN (CIRCLE BOX): N 8, NW 8-9, NE 8-9, W 8, TOWN, E 8, SW 8-9, S 8, SE 8-9

TIMBERLEIGH WAY
NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): NORTH, WEST, EAST, SOUTH
DISTANCE FROM ROAD: 500
ENTER FT OR MI: FT

TAX MAP: _____ BLK: _____ PARCEL _____

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

HOWARD — W-50915
COUNTY NAME / COUNTY NO.

STATE SIGNATURE _____ INSERT S

DATE ISSUED: 11/13/95 — CO SIGNATURE — EXP. DATE: 11-13-95

NORTH GRID: 536000 EAST GRID: 763000

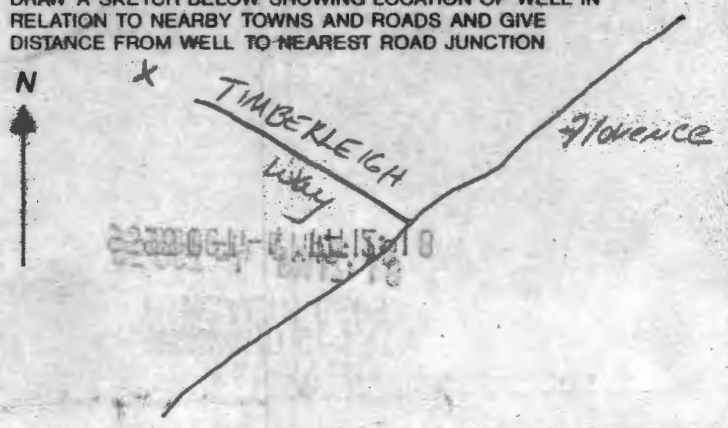
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

1/30/96 9:00 grout
NO INSP

SOURCES OF DRILLING WATER
1. Wells
2.
3.

WRITE THE BOX NUMBER FROM THE MAP HERE
E 7603
N 5306
000 000

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



SPECIAL CONDITIONS
NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -
MUST COMPLY WITH CONDITIONS OF G.W.A.P.

COUNTY

Page _____ of _____ Review _____

Date _____

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 93-0090

Location of property (road) 17601 TIMBERLEIGH WAY

Subdivision KENNEY Lot ____ Block ____ Plat ____ Sec. ____

Well Driller GEORGE EASTERDAY Owner _____

Depth of well _____

Distance of measuring point (M.P.) above ground _____

Static water level (S.W.L.) below M.P. _____

I. High rate pumping -- reservoir drawdown

Time pump started _____ Pumping rate _____

Total time _____ to reach pumping water level _____ ft. below M.P.

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

TIME (in 15 minute intervals	WATER LEVEL below M.P.	PUMPING RATE time to fill 5 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)

APPLICATION FOR A PERMIT TO APPROPRIATE AND USE WATERS OF THE STATE

Water Resources Administration
Water Supply Section
Tawes Office Building
Annapolis, Maryland 21401

☐ Surface Water ☑ Groundwater ☑ New Application ☐ Change in Existing Permit

Number _____

APPLICATION

TIMBERLEIGH HILL NURSERY
(Owner's Name) (Telephone Number)

17601 TIMBERLEIGH WAY, WOODBINE, MD 21797
(Owner's Address) (Street) (Town) (State) (Zip Code)

WITHDRAWAL

GROUNDWATER

Appropriate and use a yearly average of

1000 gallons per day,
[total annual use ÷ 365 days]

and 5000 gallons
[highest total monthly use ÷ days in month]

for the average day of the maximum month, from

1 well(s) having a diameter of
[number]

6 inches, and a depth of
[estimate]

200-250 ft.
[estimate]

SURFACE WATER

Appropriate and use a yearly average of

_____ gallons per
[total annual use ÷ 365 days]

day, and a maximum use of _____

gallons in any one day, from: N/A

_____
[name of stream]

_____
[exact location of withdrawal]

PROJECT LOCATION

17601 TIMBERLEIGH WAY
[Location — be specific]

County HOWARD Subdivision or town FLORENCE Phone number 253-5155-W
831-5466-H

Name and type of business NURSERY

ALL APPLICATIONS MUST INCLUDE A COPY OF A U.S.G.S. TOPOGRAPHIC OR SIMILAR MAP SHOWING PROJECT

PURPOSE

The water will be used for:

- ☐ Community Water Supply
- ☐ Non-Potable supply (sanitary uses, not for drinking water)
- ☐ Potable Supply (drinking water, etc.)
- ☐ Cooling Water
- ☑ Irrigation
- ☐ Process Water
- ☐ Other _____ [explain]

_____

WASTEWATER TREATMENT AND DISPOSAL

- ☐ Public Sewer _____ [name of system]
- ☐ Groundwater
  - ☐ Subsurface (tilefield, seepage pit, etc.)
  - ☐ Spray Irrigation
  - ☐ Other, explain _____
- ☐ Surface Water _____ [name of stream]

N/A

Discharge Permit # _____

or applied for _____

SIGNATURE

Please sign here ➡ William Dyer Kenney
[signature]

William Dyer KENNEY - owner 10/2/95
[please print name, title, and date here]

THIS APPLICATION CANNOT BE PROCESSED WITHOUT SIGNATURE

APPROVAL BY COUNTY HEALTH DEPARTMENT OR DESIGNATED AGENCY

THIS SECTION NOT TO BE COMPLETED BY APPLICANT

Is this Project consistent with the County Water and Sewerage Plan and local planning and zoning?

☒ YES ☐ NO, explain _____

Signature of county representative William Dyer Kenney [signature] _____ [title] _____ [date]

IMPORTANT MESSAGE

TO G.S

DATE 11-8-95 TIME 11:05 A.M. / P.M.

M Kenny (OVER)

OF

PHONE 301-253-5155
Area Code Number Extension

FAX

TELEPHONED		PLEASE CALL	
CAME TO SEE YOU		RETURNED YOUR CALL	
WANTS TO SEE YOU		WILL CALL AGAIN	
WILL FAX YOU		URGENT!	

Message well permit-
Timberly.

Signed

SCM

Howard County H ... th Department

To: FILE

I COULD NOT LOCATE
THE WELL SITE
I CALLED THE DRILLER THEY
REQUIRE THE OWNER TO STAKE SITE
I LEFT A MESSAGE FOR THE
OWNER
OYER KENNET
301 253 5155
831 5466

From: GLEN

Date:

HD-170

To: SHERRI BEAL CALLED

RE WELL SITE - OWNER
ON VACATION, SHE WILL
HAVE THE OWNERS SON
CALL US

From: GS

Date: 11/1/95

HD-170