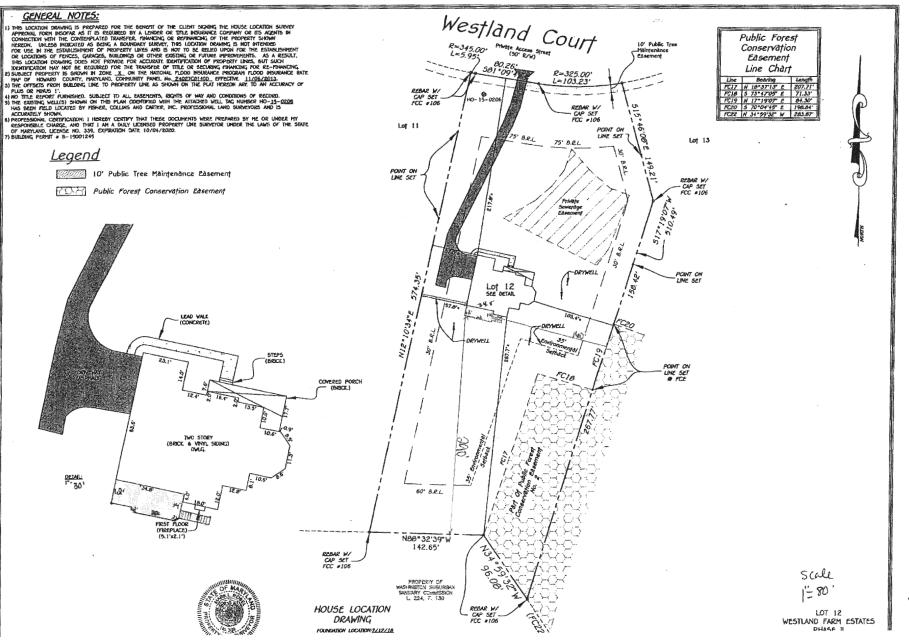
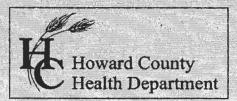
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Plan Area Section	Census Tract	Council Dist	Inspection Di	ist Supervisor I	Dist Map#	DAP Zone
Section	605102	[5				
	State Tax Id		odivision Name			
	1405599563 Area		estland Farm Estate: « Map	5		
Crid	niea niea	45				
	Zoning District		С Мар			
45-5	RR-DEO		51-H7			
SDP No.	Final Plan No.	the state of the s	File No.	PRODUCTION OF STREET		
	ECP-15-028			Primary	,	
Record Plat No.	WS Contract No.	FD	P No.	Yes	~	
23985-2398						
Owner Occupied	Year Built	His	toric District			
○ Yes ③ No			Yes No			
Historic District Registry N			od Plain			
	5-15A	0	Yes No			
Building No						
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Search Reset	uired.)					

Name *			-				
WBG WESTLAND FARI	M LLC						
Address Line 1		***************************************					
5485 HARPERS FARM	RD						
Address Line 2							
SUITE 200							
Address Line 3	THE STATE OF THE S		Since the same was all the same and sam				
Mail City	Mail State		Code				
COLUMBIA	MD	∨ 21044					
Phone	Primary						
410-969-4444	Yes		~				
E-mail							
Cell Number	Fax Number						
ofessionals (This sect Search Reset	ion is not required.)						
License # *	Business Name						
08050045780	FENCE & DECK C	CONNECTION	1]	
License Type *	First Name		Middle Name	Last Name			
	JAMES		W	RUBUSH	110000000000000000000000000000000000000]	
Primary	Address Line 1					-	
Yes	8057 VETERANS	HIGHWAY]	
	Address Line 2					-	
	City			State	ZIP Code		
				11		7	
	MILLERSVILLE			MD	21108-0000		
	Phone 1	Phon	e 2	Fax	21108-0000]	
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	Phone 1	Phon	e 2	Fax]	
	Phone 1 4109694444			Fax]	
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MISC PERMIT	INFO									
MISCELLANE	OUS PERM	IT INFORMAT	ION							
Capital Project-No Fee *		Capital Project Number Fee Exempt *			Roadside Tree	Roadside Tree Project Permit *		Roadside Tree Project Permit		
O Yes N	lo			0	∕es ● No	O Yes N	0			
Existing Use	*		Water	Sewage	Expiration	n Date				
SFD		~	Private	✔ Private	9/27/2020					
PAYMENT INF	ORMATION	١								
Check 1	Payee 1			Check 2	Payee 2	;	SAP Doc No		SAP Entered	
							Subi	mit	Cancel	



Harond 820001041



Bureau of Environmental Health

8930 Stanford Boulevard, Columbia, MD 21045 Main: 410-313-2640 | Fax: 410-313-2648 TDD 410-313-2323 | Toll Free 1-866-313-6300 www.hchealth.org

Facebook: www.facebook.com/hocohealth

Maura J. Rossman, M.D., Health Officer

RECEIPT	DATE: 11/4/19 ONSITE SEWAGE DISPOSAL SYSTEM P 566430
APPROVAL	DATE: 2 02 DEC PERMIT: CONSTRUCTION A
PROPERTY A	
SUBDIVISION	V: Westland Farm Estates LOT: 12 TAX ID:
CONTRACTO	R: Hatfield's Equipment EMAIL: <u>ken@hatfieldsequipment.com</u>
CONTRACTOR	ADDRESS: P.O. Box 519, Annapolis Junction, MD 21701 PHONE: 301-490-4289
PROPERTY O	WNER: Williamsburg Group Westland Farm LLC EMAIL: billmcbride@williamsburgllc.com
OWNER ADDR	RESS: 5485 Harpers Farm Road, Columbia, MD 21044 PHONE: 410-997-8800
SEPTIC TANK	SIZE (GALLONS): 2000 TANK MANUFACTURER: Babylon Vault
PUMP MODEL	PUMP SIZE PUMP TANK CAPACITY:
DISTRIBUTIO	N SYSTEM: GRAVITY PRESSURE DOSED BEDROOMS: 7 APPLICATION RATE: 1.2
	LINEAR FEET REQUIRED: 182.3 INLET DEPTH: 2
TRENCHES:	TRENCH WIDTH: 3 MAXIMUM BOTTOM DEPTH: 6
	MINIMUM SPACE BETWEEN TRENCHES: 10 EFFECTIVE AREA BEGINNING DEPTH: 4
LOCATION:	PER APPROVED SITE PLAN. SEWAGE DISPOSAL AREA AND TANK LOCATIONS MUST BE STAKED BY LICENSED SURVEYOR PRIOR TO PRE-CONSTRUCTION INSPECTION.
	Use 3 trenches @ 60.8
NOTES:	
ISSUED BY:	Hank Oswald ISSUE DATE: 11/4/19 EXPIRATION DATE: 11/4/20
NOTE: CON	TRACTOR MUST SCHEDULE A PRE-CONSTRUCTION INSPECTION PRIOR TO BEGINNING ANY INSTALLATION
NOTE: CON	TRACTOR MUST SCHEDULE AN INSPECTION AND GAIN APPROVAL OF ALL COMPONENTS PRIOR TO COVERING
NOTE: STON	NE MUST BE APPROVED BY HEALTH DEPARTMENT AND GRAVEL TICKET MUST BE AVAILABLE FOR REVIEW.
	ERTIGHT TANKS REQUIRED
	PARTS OF SEPTIC SYSTEM SHALL BE AT LEAST 100 FEET DOWNGRADIENT FROM ANY WATER WELL IHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS
NOTE: AN E	LECTRICAL PERMIT IS REQUIRED FOR INSTALLATION OF ANY ELECTRICAL COMPONENTS OF THE SYSTEM ELECTRICAL PERMIT ISSUED E
	RECOMMENDS SEPTIC TANKS, BAT, AND OTHER PRETREATMENT UNITS BE PUMPED AT A FREQUENCY ADEQUATE NSURE THAT SOLIDS ARE NOT DISCHARGED TO THE DISPOSAL AREA
	ER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE

PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT.

CALL 410-313-1771 TO SCHEDULE INSPECTIONS.

NOT TO SCALE	NUMBER OF TRENCHES 3 TOTAL LENGTH 83 ABSORPTION AREA 549 DISTRIBUTION BOX LEVEL 95 DISTRIBUTION BOX BAFFLE 95 DISTRIBUTION BOX PORT 95
SEE ATTACHED AS BOLLT	SEPTIC TANK DATA SEPTIC TANK I LEVEL MANUFACTURER CAPACITY SEAM LOC TANK LID DEPTH BAFFLES BAFFLE FILTER MANHOLE LOC WATERTIGHT TEST SLOTTED DATE ON LID PUMP/SEPTIC TANK LEVEL MANUFACTURER CAPACITY GAL SEAM LOC TANK LID DEPTH BAFFLES
ROAD NAME	BAFFLE FILTER MANHOLE LOC 6" PORT LOC WATERTIGHT TEST SLOTTED DATE ON LID
PRE-CONSTRUCTION: 11/22/2007 TANK, SDA, TRENCH STAKED. OF DIFFERENCE, SOIL OR, INV OK TO STE TO STAFT DUSE LASER TO DIG PRO TO END STAKE (ON SAME COUNT OF INSTALLATION: 11/26/2009 SHC AND SEWER LIN SET. (+) 12/2009 BAFFUES INSTALLED TO	AICHTEN TRENCHES. OF WIMAL TO DISTAL END ONTOUR PER PLANS
ADEQUATELY SLEEVED. RAIN LINE CRO	TE. HOD LINE IS
FINAL INSPECTION JOSEPH DATE OF	FAPPROVAL 12 2 See

DATE ACCEPTED:

RECEIVED

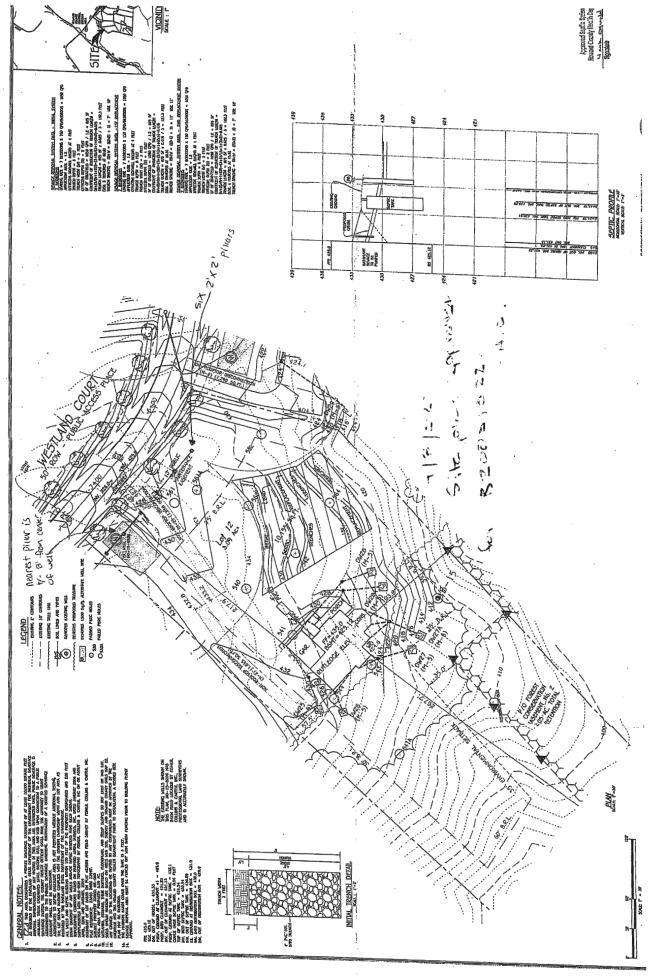


RESIDENTIAL BUILDING PERMIT APPLICAT

HOWARD COUNTY DEPARTMENT OF INSPECTIONS, LICENSES, AND PERMITS 3430 COURT HOUSE DRIVE, ELLICOTT CITY, MD 21043 - PHONE: (410) 313-2455 OPTION #4

www.howardcountymd.gov

DOILDING SITE AD		sam Bernson									
Street Address: 12517 W	ESTLAND	CT							Unit:		
City: FULTON					State: MD				Zip Code: 20	759	
Subdivision/Village/Comple	x Name: WE	STLAND F	ARM				SDI	P/WP/BA #	:		
Lot:12	Tax Ma			el:28		Gradino					
DESCRIPTION OF W		EQUIRED									
Existing Use:SFD			Proposed Use	SFD					Estimated Co	ost: \$20.0	0
Trade Work to Be Complet	ed <i>(Separate</i>	Permits Real			ACR) D	Electrical		Plumbing	■ None	7_010	
NSTALL SIX (6) STO											
PROPERTY OWNER	TNEORMA	TION B	REQUIRED								
Owner(s) Name(s) (As it a				AND EAD	MILIC				Driman, Deci	idence:	Yes ■ No
Owner's Street Address:54				·	IN LLO				Trillary Acco	derice.	103 = 110
City: COLUMBIA	103 HAILE	LNO FARM	IND	-	State: MD				Zip Code: 21	046	
Phone:				Email:	State. NID				Zip Code.Z	040	
APPLICANT NAME	50 F F F 1 F 7 F	ered reserve			11 7 6° 11 10 15 11 7 11 7 11 7 11 11 11 11 11 11 11 11	AS CHECKENERS AND					
			TOUAL WHO	DIGIND II			LOU	1DCON			
Business Name: FENCE			JN		Contact Nan	ne:JUSF	1 511	IPSUN			
Street Address: 8057 VE	I ERANS I	HIGHWAY			CL L MED				71. 6. 1. 04	1400	
City: MILLERSVILLE					State: MD	105056	21/0	2111507	Zip Code: 21	108	
Phone: (410) 969-4444				mail:PER	MITS@FEN	ICEDEC	CKC	ONNECT	,COM		`
CONTRACTOR INFO			RED								
Business Name: SAME A								110000			
Licensee's Name: Jar	nes ki	160SM			License #:	WHIZ	EC_	4518	<u>XO</u>		
Street Address:	w as	appli	Tona						T =		
City.	- 40				State:				Zip Code:		
Phone:				Email:							
ARCHITECT/ENGIN	EER INFO	RMATION	INDIVIDU	AL WHO S		NS, IF A	popol.	CABLE			
Business Name:					Name:						
Street Address:									T		
City:					State:				Zip Code:		
Phone:				Email:							· · · · ·
BUILDING CHARAC								10 (0 a male)			
Primary Structure: ■ SF D										do: Yes	
	Gas	Water Supply		■ Private	(Well)			osal: 🗖 Pu		vate (Septic	:)
Heating System: Electr									■ No □ Ye		
Sprinkler System: NFP/	A 13 🔲 N	FPA 13R	NFPA 13D	□ None	Fire Ala	arm Syster	m: [☐ Yes ☐	No 🗖 Void	ce Evac	
ADDITIONAL RESID	DENTIAL	INFORMAT	ION (PLE	ise selec	T/COMPLE	TE ALL T	THAT	APPLY)			
Model Name & Options:											
# of Bedrooms (SF):	# of effici	ency units (Mi	F*):	# of 1 BR (N	ሳF*):	# of 2 B	BR (M	F*): 	# 0	f 3 BR (MF*	*):
# Rooms:		# Full Baths:			# Half Bath	5:			# Fireplace	es:	
Garage/Carport Info:	Attached Gar	age 🗖 De	tached Garage	☐ Integ	ral Garage	□ Carpor	rt 1	□ None			
Basement/Foundation Info	: 🗖 Slab o	n Grade 🗖	Post & Pier	Unfinish	ed Basement	☐ Fini	ished	Basement:	☐ Full or ☐	l Partial	
1st Fl Width:	1st Fl Depth		2 nd Fl Width:		2 nd Fl Depth	:		Bsmt Width	າ:	Bsmt Dep	oth:
Energy Method: D Prescr	iptive 🗖 Pe	rformance 🗆	UA Alternative	ERI ERI	Gross Area:			sq ft	Occupiable /	Area:	sq f
AGREEMENT/ DISC		REQUIR									
THE UNDERSIGNED HEREBY CERT WITH ALL REGULATIONS OF HON	IFIES AND AGRE	ES AS FOLLOWS: (1) THAT HE/SHE IS	AUTHORIZED TO	O MAKE THIS APP	LICATION; (2	THAT	THE INFORMA	ATION IS CORRECT	; (3) THAT HE	SHE WILL COMPL
THIS APPLICATION; (5) THAT	HE/SHE GRANT	S COUNTY OFFICIA	ALS THE RIGHT TO E	NTER ONTO TH	IS PROPERTY FOR	THE PURPO	SE OF I	NSPECTING TH	HE WORK PERMIT	TED AND POST	ING NOTICES.
	1	-				3/1	6/	2020	>		
APPLICANT'S ORIGINAL SIGNA	TURE					TE SIGNED					
FOR OFFICE USE OF	NLY				CHECKS PAY	ABLE TO: D	IRECT	OR OF FIMAL	NCE OF HOWAR	D COUNTY	
AGENÇIES REQUIRED/APP											
				/			/	41	20 200-		T
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Joyce Davis

April 7, 2020

12517 Westland Farms Court

Fulton, MD 20759

RE: Well Easement

To Whom It May Concern:

I am in agreement that should a new well need to be drilled the gate may need to be removed in accordance with your comment:

"Lastly, if the pillars are shown within the well box, we would like a written statement from the homeowner acknowledging to us that they will remove the gate if they need to drill a new well"

Joyce Davis

Oswald, Hank

From: Sent: To:	Oswald, Hank Wednesday, April 08, 2020 7:57 AM Josh Simpson
Subject:	RE: B20001022_12517 Westland Court_Site Plan
Hi Josh:	
You should be able to upload a co office. They have a drop box.	py of the new site plan to Accela, or you may drop off the updated copy to the permit
Thanks,	
Hank.	
From: Josh Simpson < jsimpson@f Sent: Tuesday, April 07, 2020 2:27 To: Oswald, Hank < hoswald@how Subject: Re: B20001022_12517 W	7 PM vardcountymd.gov>
[Note: This email originated from you know the sender.]	rom outside of the organization. Please only click on links or attachments if
Hank,	
I am unsure how to add files to a	permit once it is in review so I have attached your requested files to the email.
Let me know if this is suitable.	
Thanks,	
Josh	
On Tue, Apr 7, 2020 at 9:09 AM Jo Hank,	osh Simpson < <u>isimpson@fencedeckconnect.com</u> > wrote:
Thank you for the new documen requested letter from the prope	its. I have marked them with the proposed pillars and will send them along with the rty owner once we have that.
Thank you	
Josh	
On Mon, Apr 6, 2020 at 8:25 AM Hello Mr. Simpson:	Oswald, Hank < hoswald@howardcountymd.gov > wrote:

Good morning. The site plan submitted with building permit # B200010200 was not scale. In addition, the site plan must show the exact location of the existing well and well box per the As-Built drawing and septic plan (see attached). We would also like to see the existing well a few feet from any proposed brick pillar. Lastly, if the pillars are shown within the well box, we would like a written statement from the homeowner acknowledging to us that they will remove the gate if they need to drill a new well. Please submit the revised site plan through permits. should you have any questions, please don't hesitate to ask.

Respectfully,

Hank

Hank Oswald, LEHS
Howard County Health Department
Well and Septic Program

Josh Simpson
Permit Coordinator
Fence & Deck Connection
8057 Veterans Highway
Millersville, MD 21108
410-969-4444
jsimpson@fencedeckconnect.com

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This message may contain confidential and/or privileged information. If you are not the addressee or authorized to receive this for the addressee, you may not use, copy, disclose, or take any action based on this message or any information or attachments herein. If you have received this message in error, please advise the sender immediately by reply e-mail and delete this message. Thank you for your cooperation.

• Parick to Be 72 over EANDE • Person 4 H Fyramidal cap • 26" Deep Formera (1×26'×36") • Block construction to Grave

