

PERMIT NUMBER: B 22000293

DATE ACCEPTED: DILP 2022 JAN 31 PM3:22

RESIDENTIAL BUILDING PERMIT APPLICATION
 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

BUILDING SITE ADDRESS REQUIRED

Street Address: **3313 Velvet Valley Drive** Unit: **N/A**
 City: **West Friendship** State: **MD** Zip Code: **21794**
 Subdivision/Village/Complex Name: **Fox Valley Estates** SDP/WP/BA #:
 Lot: **70** Tax Map: **22** Parcel: **559** Grading Permit #:

DESCRIPTION OF WORK REQUIRED

Existing Use: **Unfinished Basement** Proposed Use: **Finished Basement** Estimated Cost: **\$100,000.00**
 Trade Work to Be Completed (Separate Permits Required): Mechanical (HVACR) Electrical Plumbing None
SFD Alterations to Existing Dwelling to Include: Finishing unfinished basement. Framing, drywall, and electrical for five (5) rooms including one (1) full bathroom. No bedrooms. No load bearing wall removal; only existing framing removed. No new windows or doors added. Approx 1,250 square feet.

br/si
A
1. Media Room
2. Gym room
3. Utility Room
4. Full Bath
5. Rec Room w/ Wet Bar

PROPERTY OWNER INFORMATION REQUIRED

Owner(s) Name(s) (As it appears on tax records): **George Wesley Girling** Primary Residence: Yes No
 Owner's Street Address: **3313 Velvet Valley Drive**
 City: **West Friendship** State: **MD** Zip Code: **21794**
 Phone: **(443) 789-2815** Email: **gwgirling@hotmail.com**

APPLICANT NAME REQUIRED - INDIVIDUAL WHO SIGNS THIS APPLICATION

Business Name: **George Wesley Girling** Contact Name: **Wes**
 Street Address: **3313 Velvet Valley Drive**
 City: **West Friendship** State: **MD** Zip Code: **21794**
 Phone: **(443) 789-2815** Email: **gwgirling@hotmail.com**

CONTRACTOR INFORMATION REQUIRED

Business Name: **George Girling acting as General Contractor** **(OWNER)**
 Licensee's Name: License #:
 Street Address:
 City: State: Zip Code:
 Phone: Email:

ARCHITECT/ENGINEER INFORMATION INDIVIDUAL WHO SIGNED PLANS, IF APPLICABLE

Business Name: **JRS Associates Architectural Design/Drafting** Name: **John Singletary**
 Street Address: **4700 Leyden Way**
 City: **Ellicott City** State: **MD** Zip Code: **21042**
 Phone: **(410) 982-4486** Email: **JRSing777@gmail.com**

BUILDING CHARACTERISTICS REQUIRED


Primary Structure: SF Dwelling SF Townhouse SF Duplex Mobile Home Multi-Family Dwelling (MF*) Condo: Yes No
 Utilities: Electric Gas Water Supply: Public Private (Well) Sewage Disposal: Public Private (Septic)
 Heating System: Electric Natural Gas Propane Other: Roadside Tree Project: No Yes: #
 Sprinkler System: NFPA 13 NFPA 13R NFPA 13D None Fire Alarm System: Yes No Voice Evac

ADDITIONAL RESIDENTIAL INFORMATION (PLEASE SELECT/COMPLETE ALL THAT APPLY)

Model Name & Options:
 # of Bedrooms (SF): **0** # of efficiency units (MF*): **0** # of 1 BR (MF*): **0** # of 2 BR (MF*): **0** # of 3 BR (MF*): **0**
 # Rooms: **5** # Full Baths: **1** # Half Baths: **0** # Fireplaces: **0**
 Garage/Carport Info: Attached Garage Detached Garage Integral Garage Carport None
 Basement/Foundation Info: Slab on Grade Post & Pier Unfinished Basement Finished Basement Full or Partial
 1st Fl Width: 1st Fl Depth: 2nd Fl Width: 2nd Fl Depth: Bsmt Width: Bsmt Depth:
 Energy Method: Prescriptive Performance UA Alternative ERI Gross Area: **1,250** sq ft Occupiable Area: **1,000** sq ft

AGREEMENT/ DISCALIMER REQUIRED

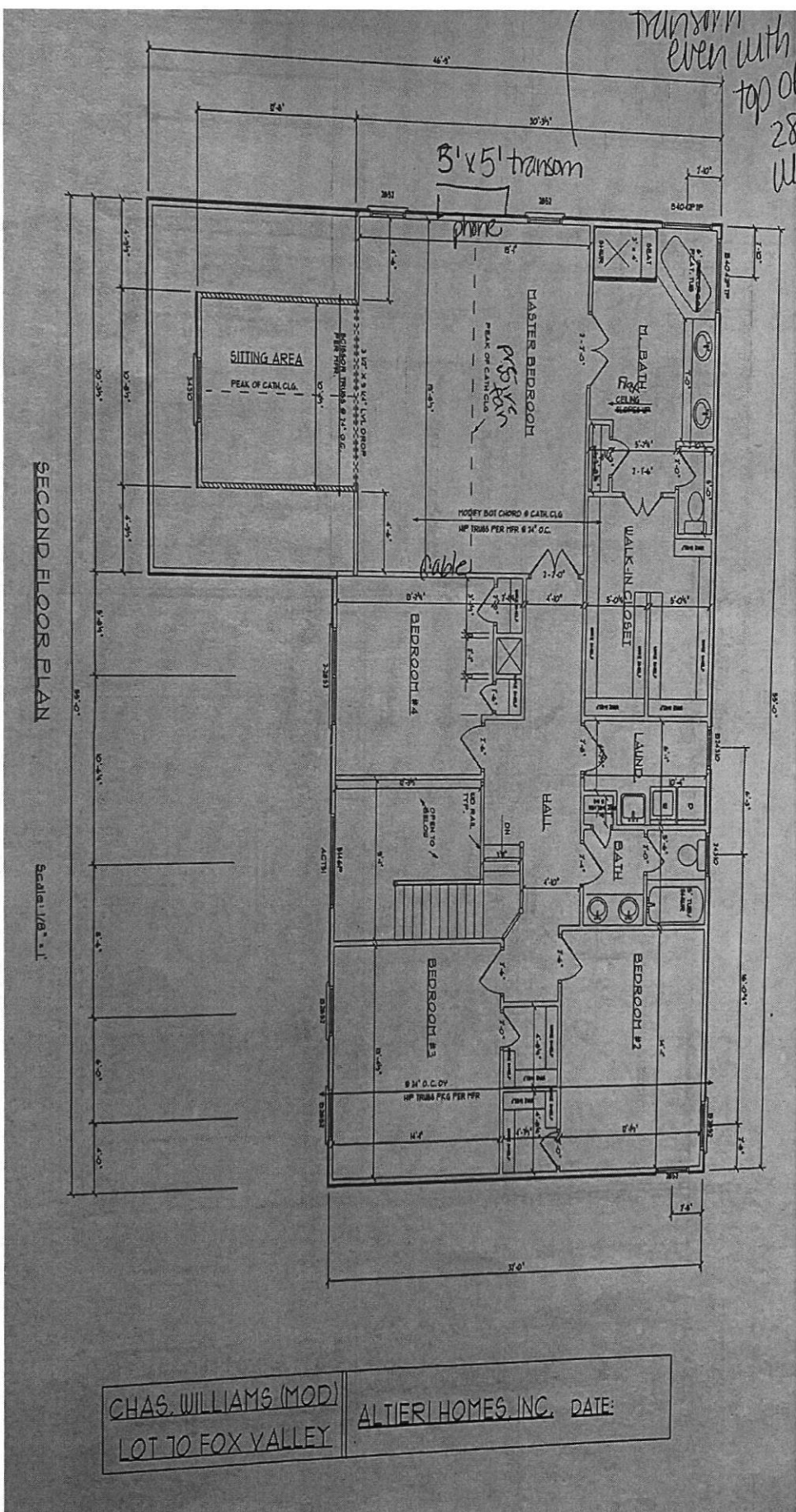
THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED 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.

 1.31.22
 APPLICANT'S ORIGINAL SIGNATURE DATE SIGNED

FOR OFFICE USE ONLY CHECKS PAYABLE TO: DIRECTOR OF FINANCE OF HOWARD COUNTY

AGENCIES REQUIRED/APPROVALS:
 PR DPZ DED Health SHA CID
 SUBMITTAL FEES: **\$135.00** PAYMENT: **PAY ONLINE** ACCEPTED BY: **AKH**

2nd Floor. Proposed and Existing. No Changes



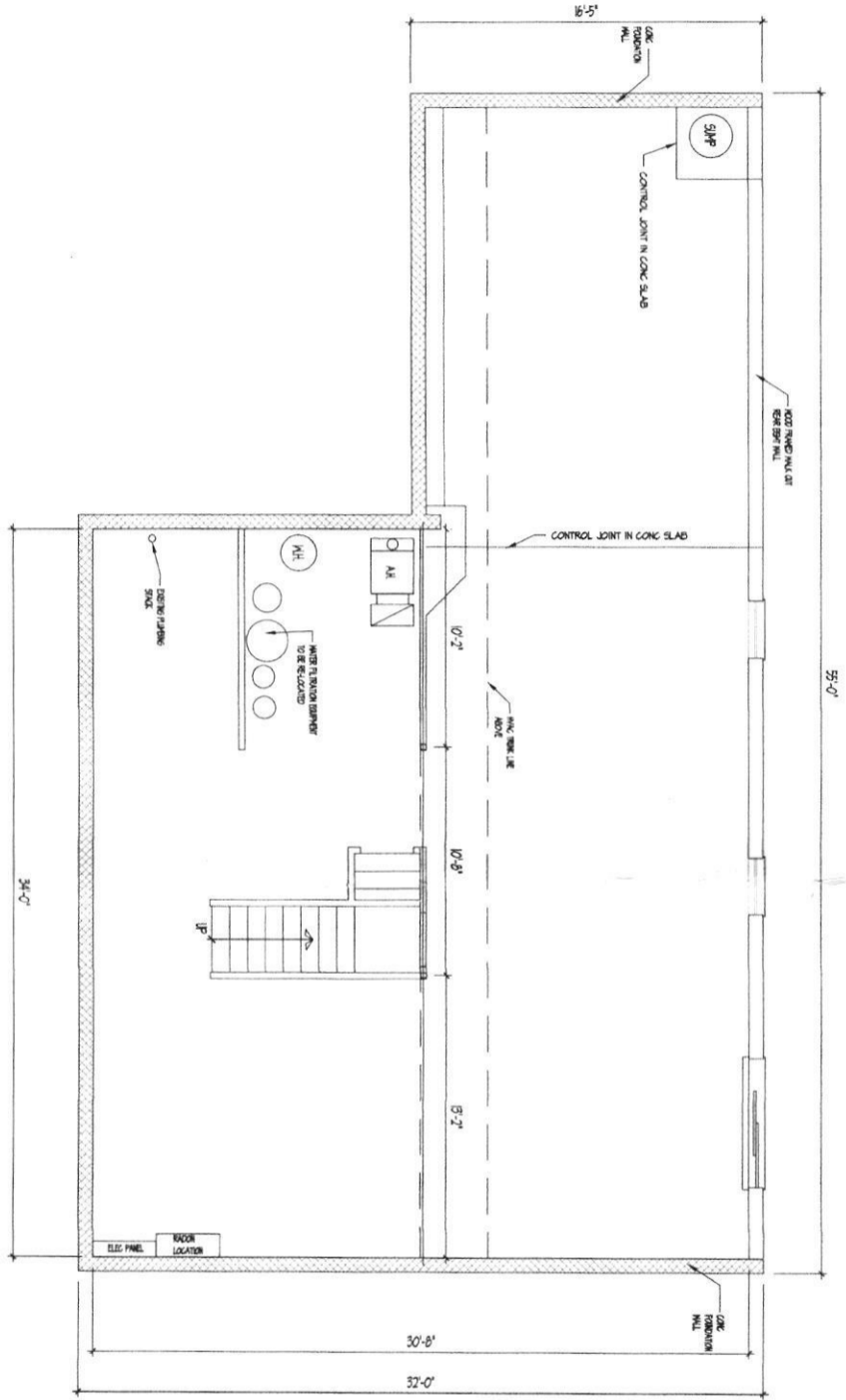
SECOND FLOOR PLAN

Scale: 1/8" = 1'

CHAS. WILLIAMS (MOD) ALTER HOMES, INC. DATE:
 LOT 10 FOX VALLEY

3313 Velvet Valley Dr.
 B22000293

EXISTING PLAN



Approved
JSZ
2/16/2022
RLK

BID AND PERMIT SET ONLY
 FOR THE EXCLUSIVE USE OF
 THE GIRLING FAMILY

JRS Associates
 Architectural Design / Drafting
 4700 Leyden Way
 Ellicott City,
 Maryland 21042
 Phone (410) 982-4486
 jrs@jrsassoc.com

DATE	REVISIONS

Drawn by	JRS	checked by	
Scale	NOTED	Date	1/10/22

PROJECT TITLE
 GIRLING BASEMENT
 RENOVATION PROJECT

CONTENT
 EXISTING
 FLOOR PLAN

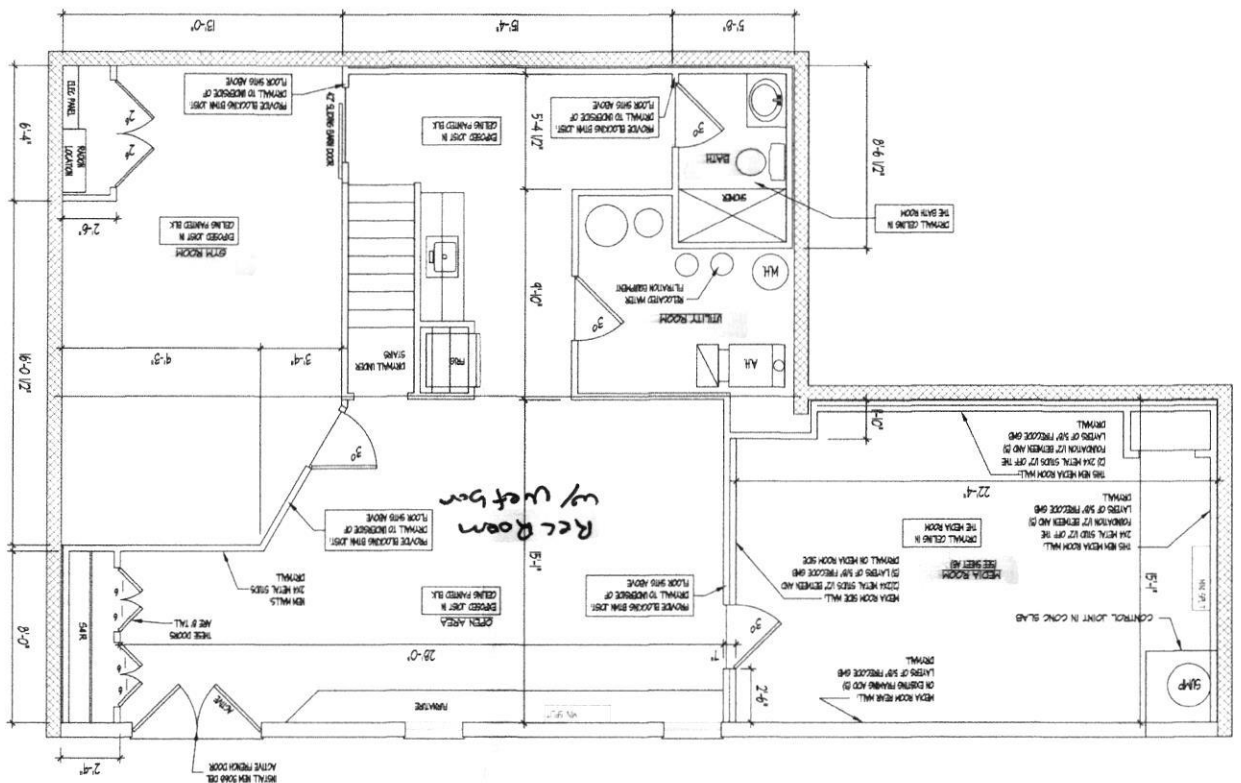
PROJECT NUMBER	2101	DRAWING NUMBER	A1
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PROJECT NUMBER		2101	
DRAWING NUMBER		A3	
PROPOSED RENOVATION PLAN			
CONTENT			
GIRLING BASEMENT RENOVATION PROJECT			
PROJECT TITLE			
DATE	BY	NOTED	SCALE
	JRS		1/8"=1'
DRAWN BY		CHECKED BY	
REVISIONS			
NO.	DATE	DESCRIPTION	BY

JRS Associates
 Architectural Design / Drafting
 4700 Leyden Way
 Ellicott City
 Maryland 21042
 Phone (410) 982-4486
 jrs@jrs77.com

BID AND PERMIT SET ONLY
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 THE GIRLING FAMILY

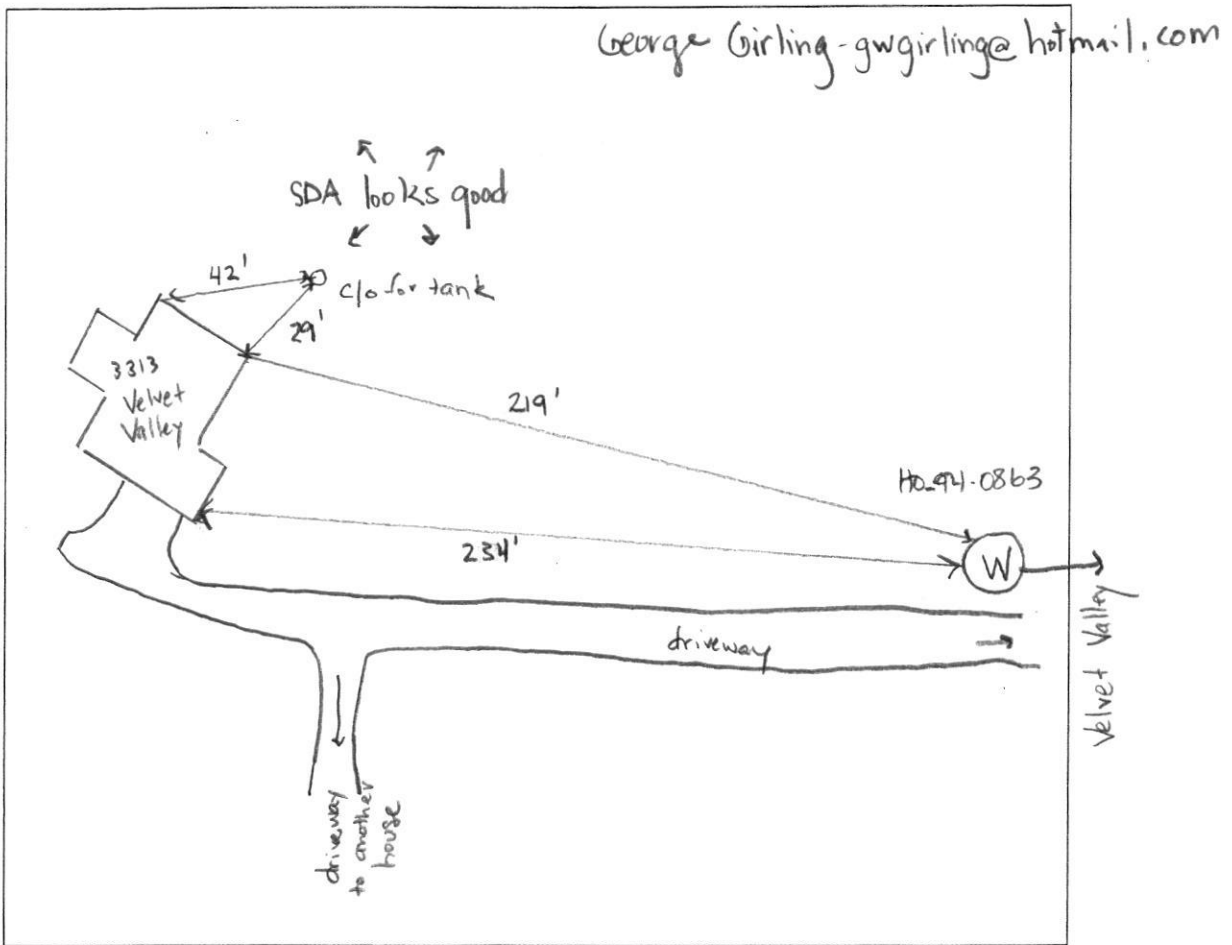
PROPOSED PLAN



SITE INSPECTION SHEET

OWNER: George & Kathryn Girling PHONE #: 443-789-2815
ADDRESS: 3313 Velvet Valley Dr CONTRACTOR: Homeowner to act as Contractor
West Friendship 21794 WELL TAG #: HO-94-0863
SUBDIVISION: West Friendship LOT: 70 COUNTY #: 03-321665
PROPOSAL: SFD-finish basement for media room, gym, 1 full bath, &
wet bar.

LOCATION DIAGRAM



COMMENTS: _____

Site inspection completed - septic c/o's intact and SDA looks good - no evidence of failure Well is in satisfactory condition w/ a two-piece cap and well tag Well was gps'd.

DATE: 2/11/22 INSPECTOR: R. Rappaport

8/1/99 2PM

8/15/99 2PM

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 512012

A 48763

DISTRICT _____

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXX~~ 410-313-2640

DATE 7/19/99

DATE SYSTEM APPROVED 8/5/99

INSPECTOR S.R.N.

INDEXED

South Carroll Backhoe, Inc. IS PERMITTED TO INSTALL ALTER _____

ADDRESS 4410 Salem Bottom Road, Westminster, MD 21157 PHONE 410-875-4197

SUBDIVISION West Friendship Estates LOT 70 ROAD 3313 Velvet Valley Drive

PROPERTY OWNER _____ Altieri Homes

ADDRESS _____

BUILDING PERMIT SIGNED

SEPTIC TANK CAPACITY 1250 GALLONS

AND RETURNED

NUMBER OF BEDROOMS 4

87804 BODM926 DECK

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 280

TRENCHES - Trench to be 3 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 6 feet below original grade. Effective area begins at 4 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Starting at the end of the pipestem, place the distribution box 110 feet down the 207.49' lot line and 10 feet off that same lot line. Run trenches on contour toward the left side of the lot.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK/MR

PLANS APPROVED BY Donna K. Soe

REVISED DATE 4-28-1999

COVER NO WORK UNTIL INSPECTED AND APPROVED

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

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

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

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH

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

PERMIT VOID AFTER TWO 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 OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED.

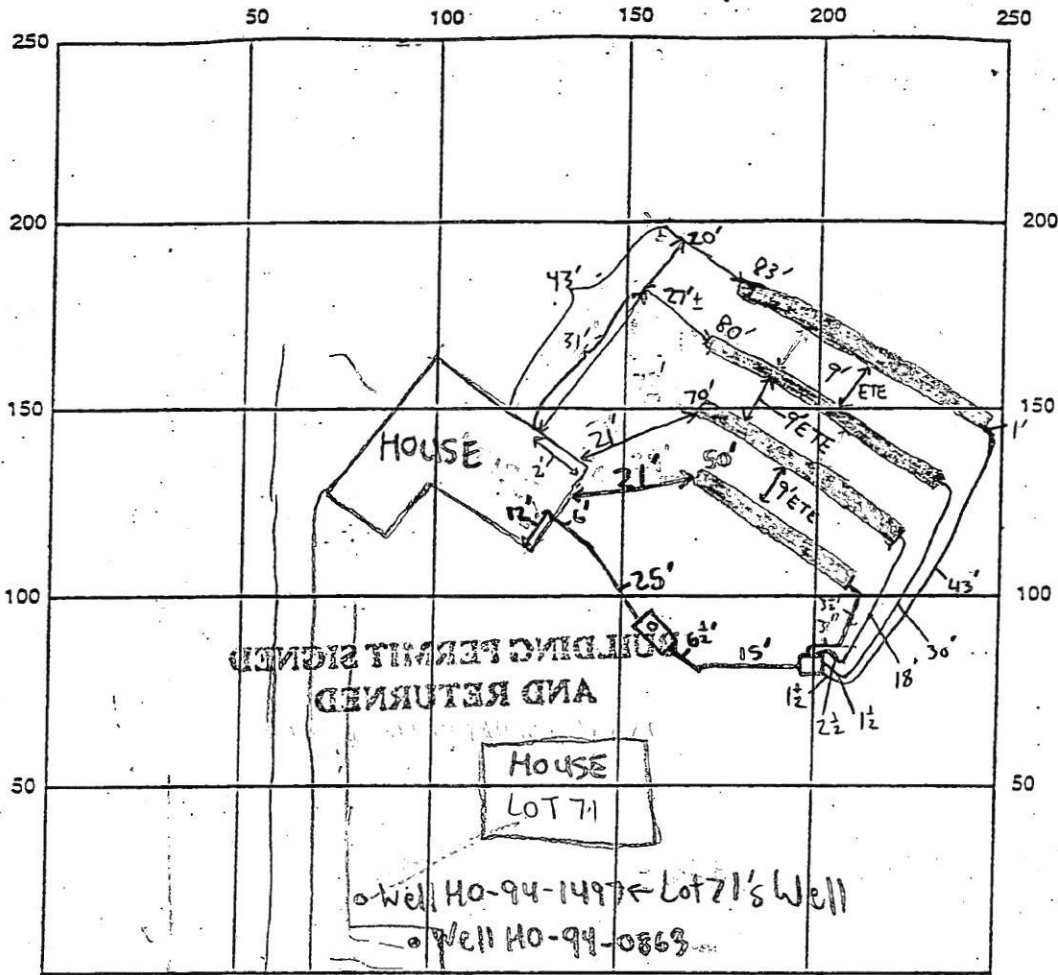
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

HD-260(6-90)

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

V-18763



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
VELVET VALLEY DRIVE

SEPTIC TANK LEVEL 1500 gallon top section CLEANOUTS 6" @ Tank

DISTRIBUTION BOX LEVEL ✓ Baffle is in

DRAIN FIELD/TITLE DEPTH 6 FT. TRENCH WIDTH 3 FT. INLET DEPTH 4 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 283 FT.

NUMBER OF TRENCHES 4 ONE-SIDEWALL/BOTTOM AREA 849 SQ. FT.

DRYWALL INSIDE DIAMETER N/A FT. EFFECTIVE DEPTH BELOW INLET N/A FT.

ABSORBENT AREA N/A SQ. FT.

REMARKS: 8/4/99 - HOUSE CONNECTION MADE, OK TO CONTINUE WORK (SRW)

8/5/99 - OK TO COVER ALL WORK - (SRW)

DATE SYSTEM APPROVED 8/5/99 INSPECTOR Steven R. Kueg

Approved Septic System Plan
Howard County Health Department

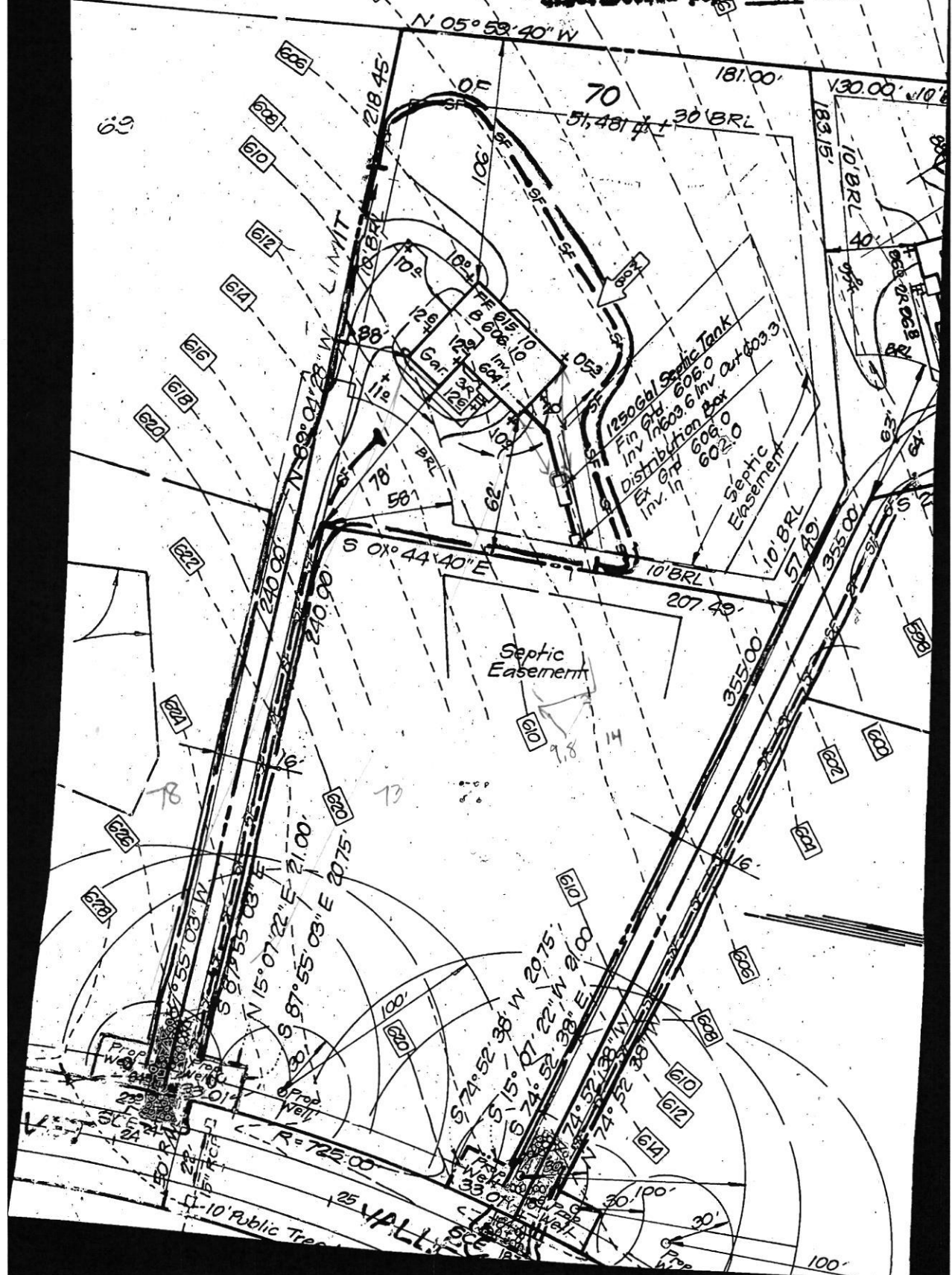
Total linear feet of trench
 required 280 feet

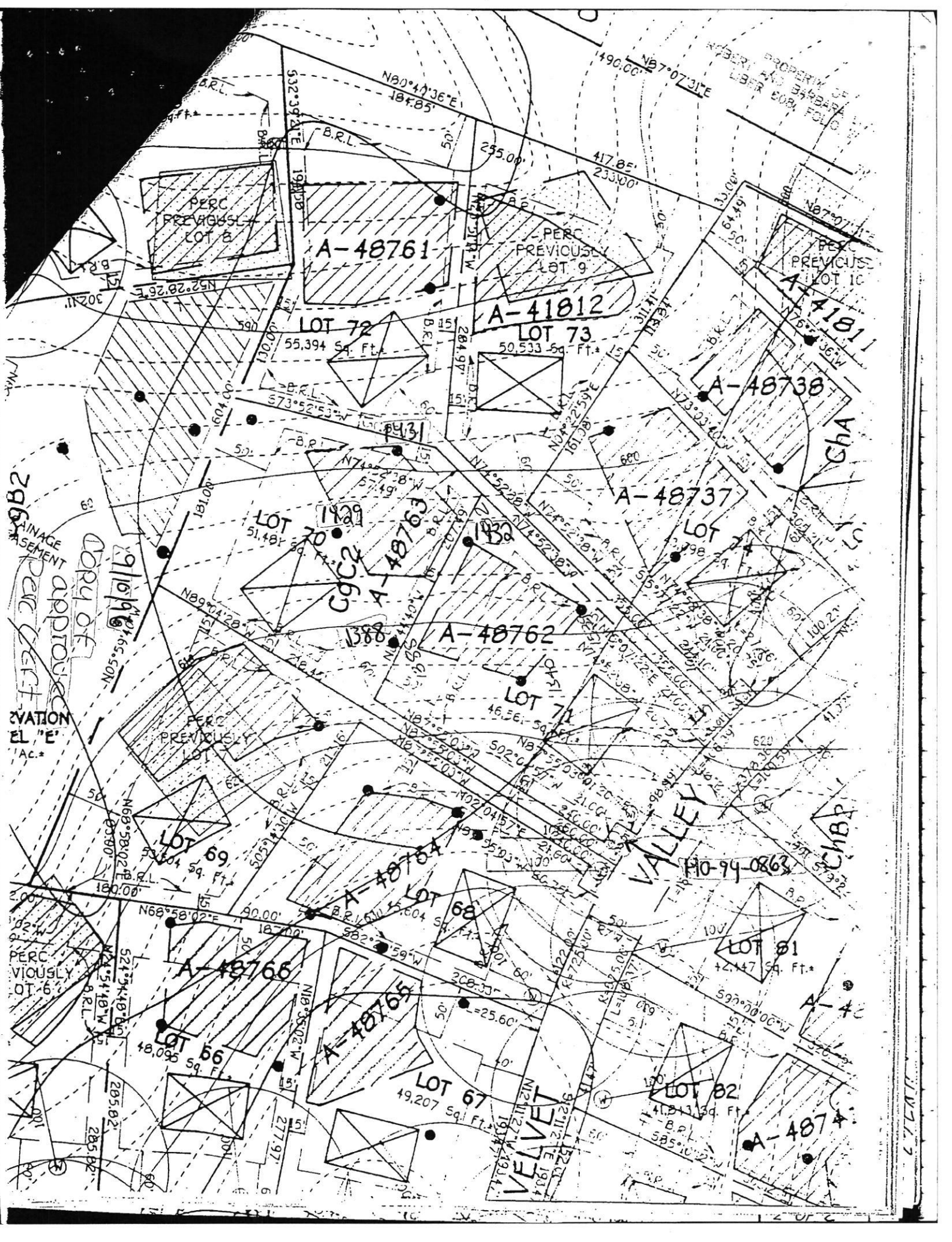
Width of trench (es) 3 feet
 PRESERVATION PARCEL E

Depth of trench (es) 6 feet

Depth of stone required below
 distribution pipe 2 feet

[Handwritten Signature]
 Signature _____ Date 4/28/09





9/16/94
COPY OF
APPROVED
PERMITS
CERTIFICATE
OF
EVALUATION
EL "E"
AC. #

VALLEY

CHA

CHUBB

VELVET

10-94-0863

10-7-7

C1 7961 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 48763

ST/CO USE ONLY DATE Received 090996 DATE WELL COMPLETED 082296 Depth of Well 125 (TO NEAREST FOOT) PERMIT NO. FROM "PERMIT TO DRILL WELL" H0-94-0863

OWNER LDO last name RT32 first name TOWN W. FRIENDSHIP
 STREET OR RFD SUBDIVISION W. FRIENDSHIP EST SECTION 2 LOT 70

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		check if water bearing
	FROM	TO	
TOP SOIL	0	5	
Brown Shell	6	33	
Sandstone + Blue Rock	34	125	
GOT water at			90 115

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 11 NO. OF POUNDS 1034
 GALLONS OF WATER 66
 DEPTH OF GROUT SEAL (to nearest foot)
 from 0 ft. to 43 ft.
 (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) 6 1/4
 Total depth of main casing (nearest foot) 45

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

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

NUMBER OF UNSUCCESSFUL WELLS: 0
 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. 043

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)
 W. Harley

LIC. NO. 350-0002
 DRILLER SIGNATURE
 W. Harley

SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

DEPTH (nearest ft.)

H0	44	125
8	9	11
15	17	21
23	24	26
30	32	36
38	39	41
45	47	51

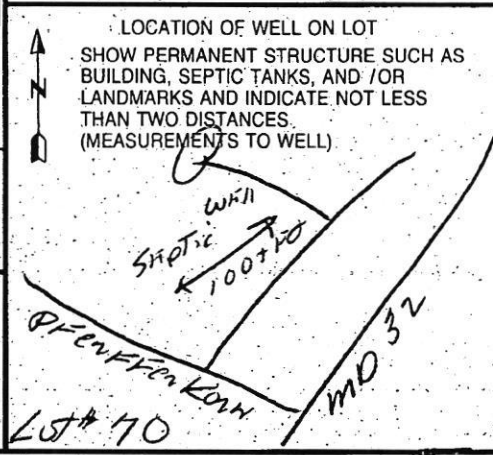
SLOT SIZE 1 2 3
 DIAMETER OF SCREEN (NEAREST INCH)
 from to

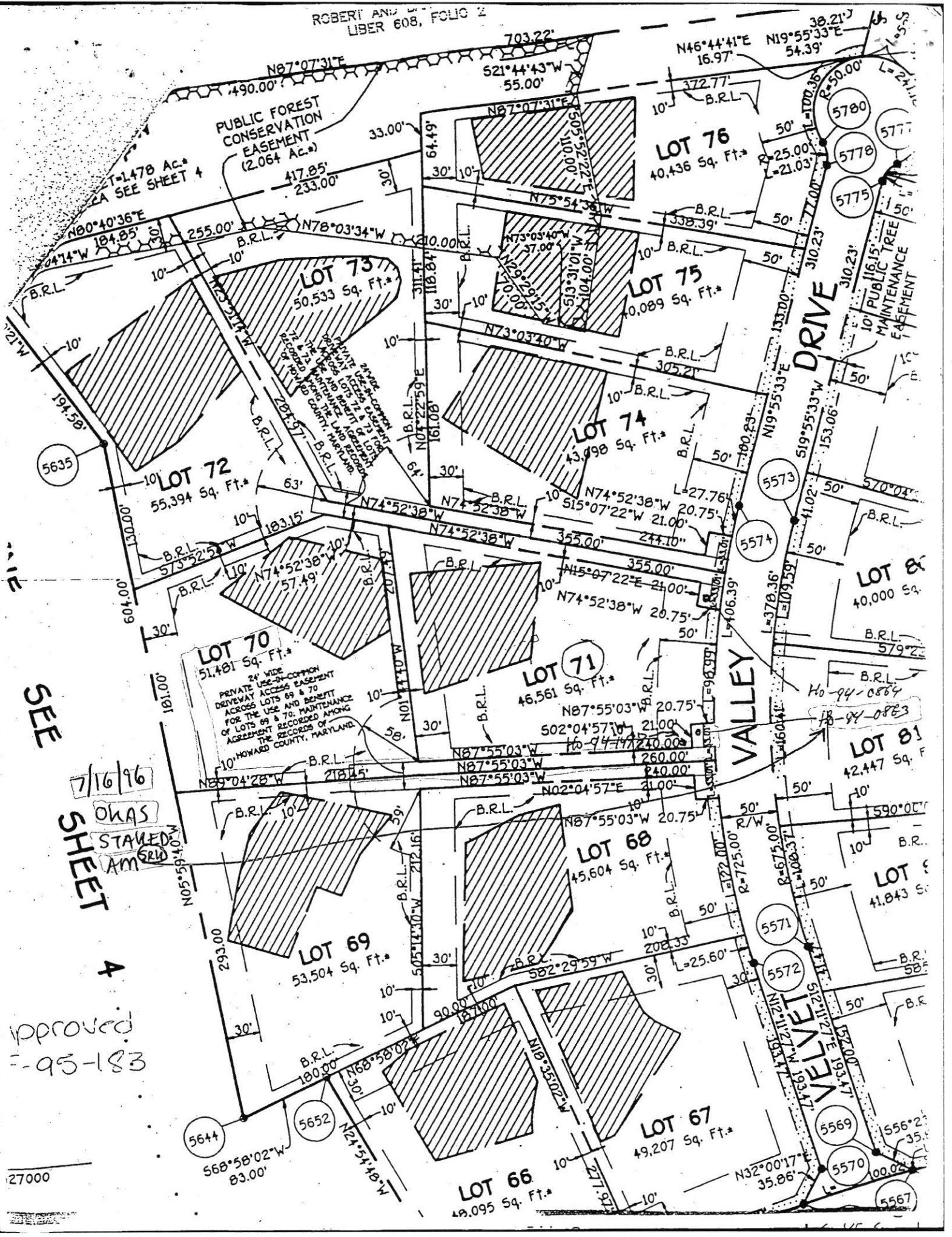
GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT 'F' IN BOX 68

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

PUMPING TEST
 HOURS PUMPED (nearest hour) 3
 PUMPING RATE (gal. per min.) 15
 METHOD USED TO MEASURE PUMPING RATE Submersible
 WATER LEVEL (distance from land surface)
 BEFORE PUMPING 27 ft.
 WHEN PUMPING 37 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 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 LAND SURFACE (nearest foot)
 (-) below





T=1478 Ac.
SEE SHEET 4

PUBLIC FOREST
CONSERVATION
EASEMENT
(2.054 Ac.)

SEE
SHEET
4

Approved
-95-183

27000

7/16/96

OKAS
STAYED
AM

4

LOT 70
51,481 Sq. Ft.
24' WIDE
PRIVATE USE-IN-COMMON
DRIVEWAY ACCESS EASEMENT
ACROSS LOTS 69 & 70
FOR THE USE AND BENEFIT
OF LOTS 69 & 70. MAINTENANCE
AGREEMENT RECORDED AMONG
THE RECORDS OF
HOWARD COUNTY, MARYLAND.

LOT 76
40,436 Sq. Ft.

LOT 75
40,089 Sq. Ft.

LOT 74
43,498 Sq. Ft.

LOT 72
55,394 Sq. Ft.

LOT 73
50,533 Sq. Ft.

LOT 71
46,561 Sq. Ft.

LOT 69
53,504 Sq. Ft.

LOT 68
45,604 Sq. Ft.

LOT 81
42,447 Sq. Ft.

LOT 8
40,000 Sq. Ft.

LOT 67
49,207 Sq. Ft.

LOT 66
49,095 Sq. Ft.

5780
5778
5775

5573

5574

Ho-94-0884
18-94-0883

5571

5572

5644

5652

5569

5570

5567

DRIVE

VALLEY

VELVET

PUBLIC TREE
MAINTENANCE
EASEMENT

21'

10'

10'

10'

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