

MPZ 6/25/26
Approved

Record Detail * (This section is required.)

Permit Type Permit Number Opened Date
 Building/Residential/Misc/Deck B26001999 06/12/2026

Description of Work
 SFD/CONSTRUCT NEW APPROX 16'X18', 284 SQ.FT. OPEN DECK W/ STEPS TO GRADE.**SUBJECT TO FIELD INSPECTION**

Online BP.
8/2 6/15/26[check spelling](#)

Address * (This section is required.)

Search Reset Clear Get Parcel & Owner

Street # Street Name Street Type
 13980 BURNTWOODS RD

Unit Type Unit # X Coordinate Y Coordinate
 --Select-- -76.99826 39.27564

City State Zip Code Primary
 GLENELG MD 21737 Yes

Parcel * (This section is required.)

Search Reset Clear Get Address & Owner

GIS ID *	Parcel	Parcel Area	Land Value	Improved Value	Exemption Value	Plan Area
897607	110	1.12	353800	587700	233900	RURAL

Legal Description
 IMPSLOT 19 BL D S 3[]13980 BURNTWOODS RD[]BURNTWOODS

[check spelling](#)

Block	Lot	Census Tract	Council Dist	Inspection Dist	Supervisor Dist	Map #	DAP Zone
D	19	603000	5				

Plan Area State Tax Id Subdivision Name
 1403281418 BURNTWOOD

Section Area Tax Map
 22

Grid Zoning District ADC Map
 22-1 RR-DEO 4813-A6

SDP No. Final Plan No. WP File No.

Record Plat No. WS Contract No. FDP No. Primary
 10 20 Yes

Owner Occupied Year Built Historic District
☐ Yes ☐ No 1968 ☐ Yes ☒ No

Historic District Registry No. Stat Area Flood Plain
 3-04 ☐ Yes ☒ No

Building No

Owner * (This section is required.)

Search Reset Clear

Name *
 WEST

Address Line 1
 13980 BURNTWOODS RD

Address Line 2

Address Line 3

Mail City

GLENELG

Mail State

MD

Mail Zip Code

21737

Phone

240-888-6539

Primary

Yes

E-mail

Cell Number

Fax Number

Professionals (This section is not required.)

License # *

Business Name

License Type *

--Select--

Primary

Yes

First Name

Middle Name

Last Name

Address Line 1

Address Line 2

City

State

ZIP Code

Phone 1

Phone 2

Fax

E-mail

Applicant (This section is not required.)

Search

As Owner

As Lic. Prof

As Contact

Type *

Applicant

Relationship

Applicant

Primary

Yes

First Name

MI

Last Name

EDWARD

J

PACYLOWSKI

Full Name

EDWARD J PACYLOWSKI

Organization Name

PROBUILT CONSTRUCTION, INC.

Street Address

13330 CLARKSVILLE PIKE

Address Line 2

City

HIGHLAND

State

MD

Zip Code

20777

Phone

301-854-0821

Cell

301-854-9632

Fax

E-mail *

office@probuiltconstruction.com

Addtl Info

Est Construction Cost *

18150

Housing Units *

0

Number of Buildings * Public Owned

0

No

Construction Type

434 - Additions, Alterations and Conversions - Residential

MISC PERMIT INFO

MISCELLANEOUS PERMIT INFORMATION

* Capital Project-No Fee *	Capital Project Number	Fee Exempt *	Fee Exempt Group	Roadside Tree Project Permit *
☐ Yes ☒ No	(Text)	☐ Yes ☒ No	--Select--	☐ Yes ☒ No
Roadside Tree Project Permit #	Existing Use *	Water	Sewage	Expiration Date
(Text) SFD		Private	Private	12/12/2026

Submit

Cancel

SITE INSPECTION SHEET

OWNER: Mr. & Mrs. West PHONE #: _____

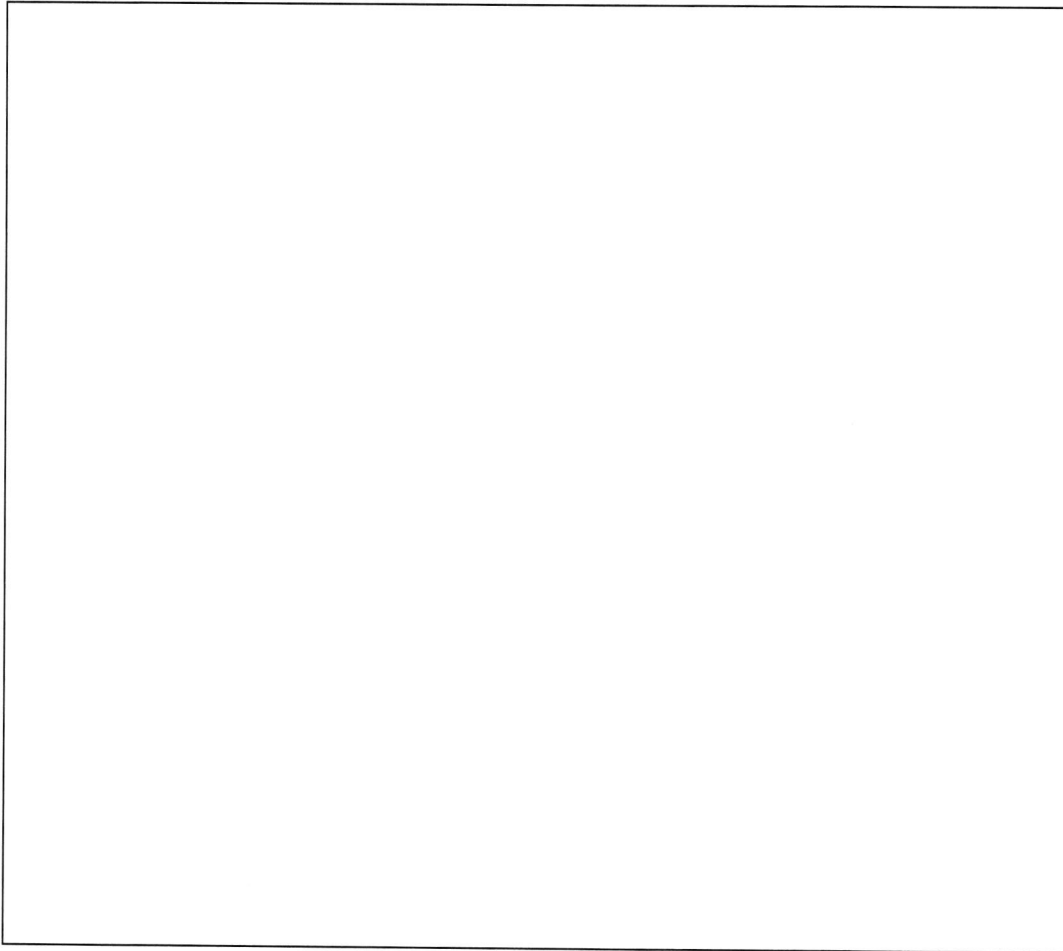
ADDRESS: 13980 Burntwoods Rd CONTRACTOR: _____

Glen Ridge MD WELL TAG #: Hc-95-0152

SUBDIVISION: _____ LOT: _____ COUNTY #: Howard

PROPOSAL: Duck proposal is rear of property, previous
duck on HD record & rear dock presents safety concern.

LOCATION DIAGRAM



COMMENTS: No concerns with well or septic
area. Septic tank cleared accessible walkway
bricks covering existing tank removable for
septic tank pump-out

DATE: 6/24/16 INSPECTOR: Melanie Kishuboff

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

APPLICATION FOR WAIVER

To Howard Co Code Subtitle 8: Onsite Sewage Disposal Systems and Subtitle 9: Individual Potable Water Supply Systems

Date Submitted: 06/25/2026

Property Address: 13980 Burntwoods Road, Glenelg, MD 21737

Burntwood	19	22		110	1403281418
Subdivision	Lot	Tax Map	Grid	Parcel	Tax Account #

Provide a brief site history including previously submitted and active plans with the Health Department or the County (subdivision plans, perc test applications, Building Permit applications):
The current well was drilled in 2007 to replace the old shallow well. The current septic system was installed in 1985 to replace the old system.

No additional permits or applications have been submitted for this property.

In the area below, list the specific section of the Howard Co Code to which a waiver is being requested and provide a brief summary of the regulation and an explanation of why the waiver is being requested (Attach a separate sheet if necessary).

Regulation Section	Summary and Explanation
1. <u>HC Sec.3.805</u>	We are requesting a waiver to the Howard County PC Plan requirement (HC Sec.3.805) due to the following: (see attached)
2. _____	

William A. West & Phyllis A. West

Property Owner's Signature

Health Department Use Only

Reviewed by

[Signature]
HCHD Staff

6/25/20
Date

Comments/Conditions:

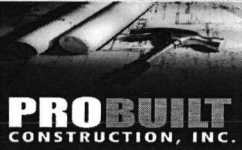
Approved by:

BEH Deputy Director

Date

**Reasons for Request of Waiver to PC Plan requirement (HC Sec. 3.805 for 13980
Burntwoods Road, Glenelg, MD 21737:**

1. The new deck structure will be greater than 250 square feet. It is not a garage/similar structure;
 2. The project does **not** increase our living space;
 3. The proposed deck is within the 100 foot radius of the well installed in 2007 (Tag # HO-95-0752).
 4. The existing onsite septic system is adequate for current property use. (Note: Only two residents have and currently still live on the property since the early 1990's--seniors).
 5. We have regular maintenance (pump out) performed by a local well and septic company every three to five years on the septic system.
-



ProBuilt Construction, Inc.
12871 Highland Road
Highland, MD 20777
(301) 854-0821

Sales Consultant
Ed Pacylowski

Design Consultant
Christina Speiden

Project Manager
Ryan Speiden

Date of Drawing
06/10/2026

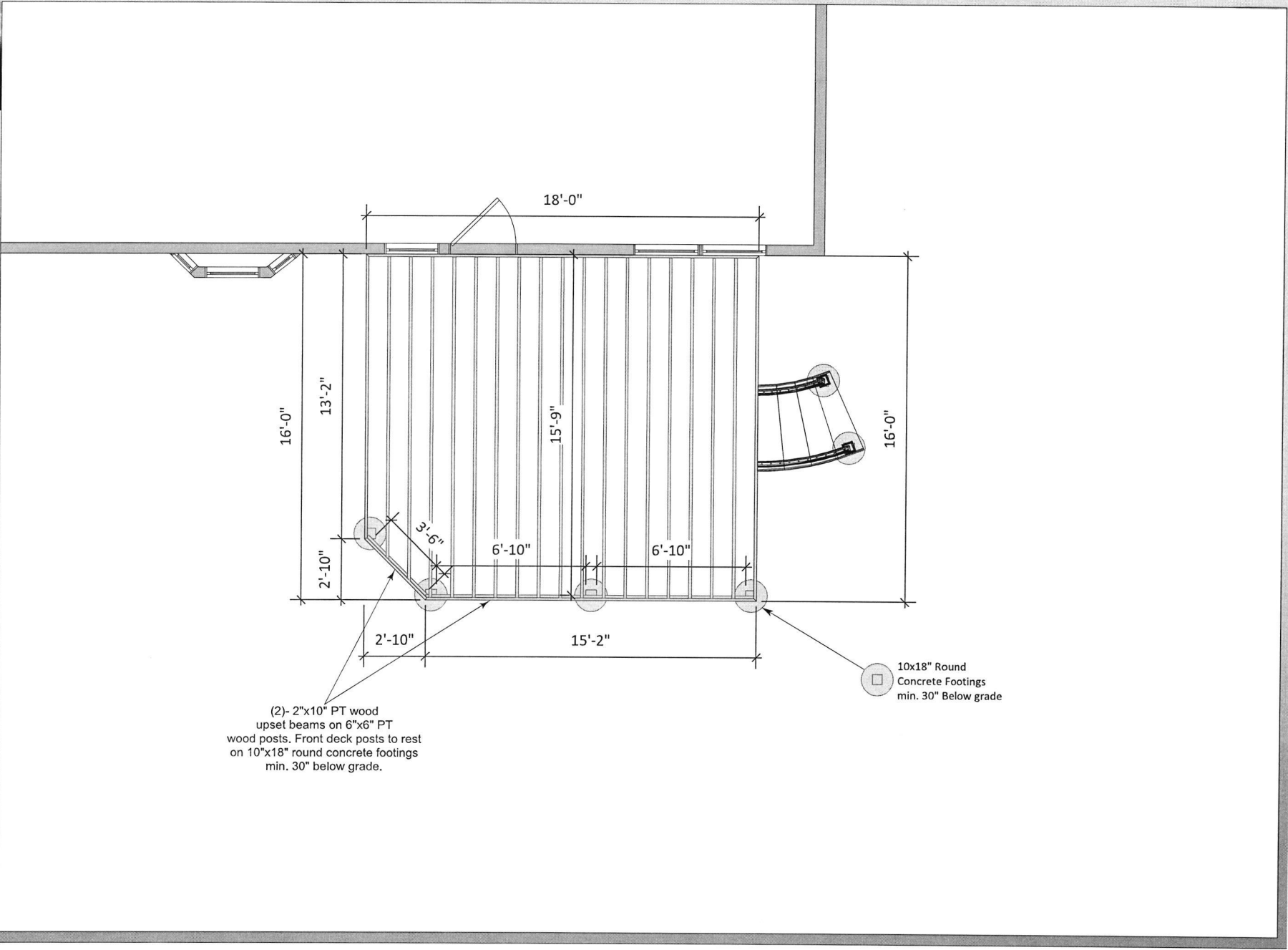
Drawing Title
West Permit
Footing Plan

Drawing Scale
1/4" = 1'0"

Project Information
West Residence
13980 Burntwoods Road
Gelneg, MD 21737

Renderings, drawings, samples and other intellectual properties provided by ProBuilt Construction to the client above are for the express benefit of the client. Note that ProBuilt Construction has SOLE OWNERSHIP of all documents. Client can never own, use and/or distribute documents without written consent of ProBuilt Construction.

If client uses and/or distributes any 3D renderings, 2D drawings, and/or any other intellectual properties provided by ProBuilt Construction to a third party, an invoice of \$1,500 will be immediately sent to the client to cover the cost of the intellectual property used without permission of ProBuilt Construction and must be paid.



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Christina Speiden

Project Manager

Ryan Speiden

Date of Drawing

06/10/2026

Drawing Title

West Permit
Framing Plan

Drawing Scale

1/4" = 1'0"

Project Information

West Residence
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Gethel, MD 21737

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Lateral Support:
LTT19 Simpson Tension Tie

2x10" PT Wood Ledger to be attached to house rim board using 1/2" dia.lag screws or LedgerLOK Fasteners staggered 10" o.c.

18'-0"

Notes:

- 1- Decking to be installed parallel and to be 5/4"x 6" Trex Transcend composite decking material.
- 2- Decking to be installed using Tiger Claw Hidden Fasteners as per manufacturers recommendations.
- 3- Rails to be 36" Trex Transcend Composite Railing system see attached rail detail for specs.

2x10" PT WD Joists
12" o.c. Simpson
joist hangers for
joist attachment to
2x10" ledger board

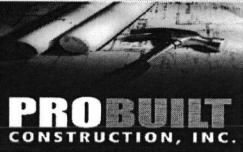
See Step Detail
Drawing for specs

(2)- 2"x10" PT wood
upset beams on 6"x6" PT
wood posts. Front deck posts to rest
on 10"x18" round concrete footings
min. 30" below grade.

Diagonal Bracing:
Simpson AC Bracket
for middle post
connection to beam

Diagonal Bracing:
Simpson LCE4 Bracket
for Lateral Support
Connecting to beam for
corner deck posts

6x6" PT WD Support
Posts Notched to
support DB. 2x10" Beam



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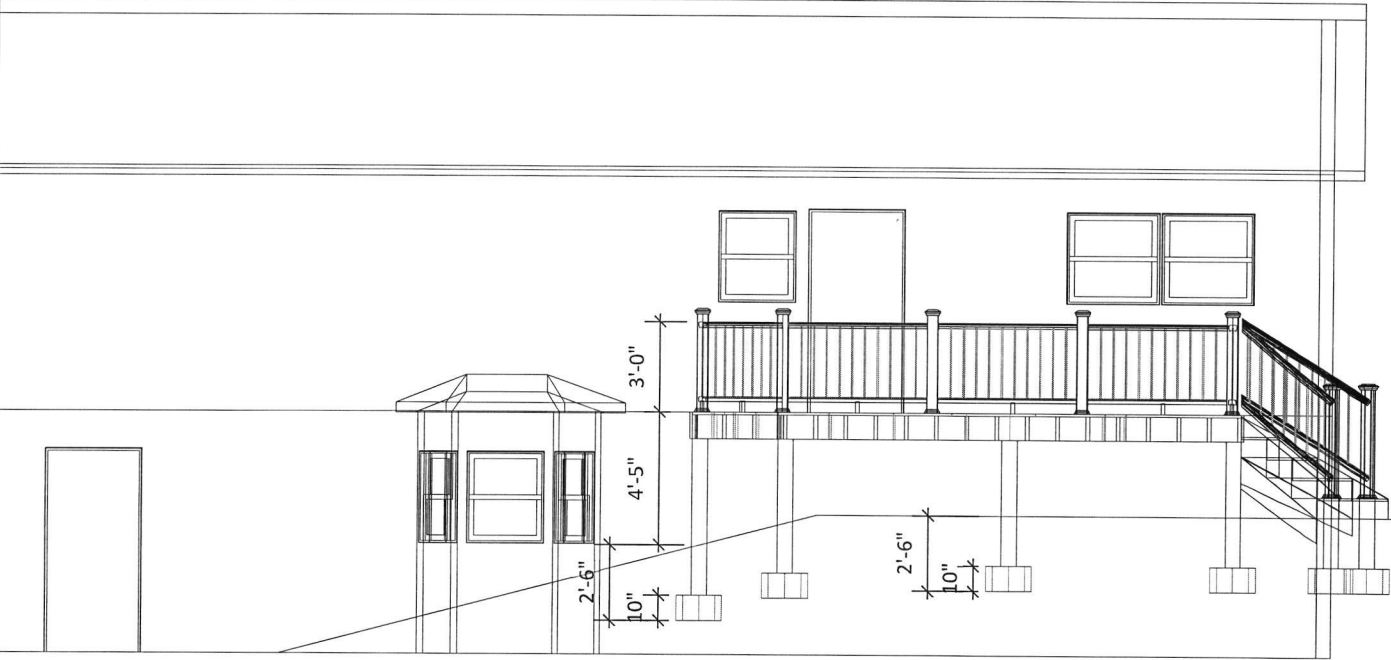
Drawing Title
West Permit
Rear Elevation

Drawing Scale
1/4" = 1'0"

Project Information
West Residence
13980 Burntwoods Road
Gelnelg, MD 21737

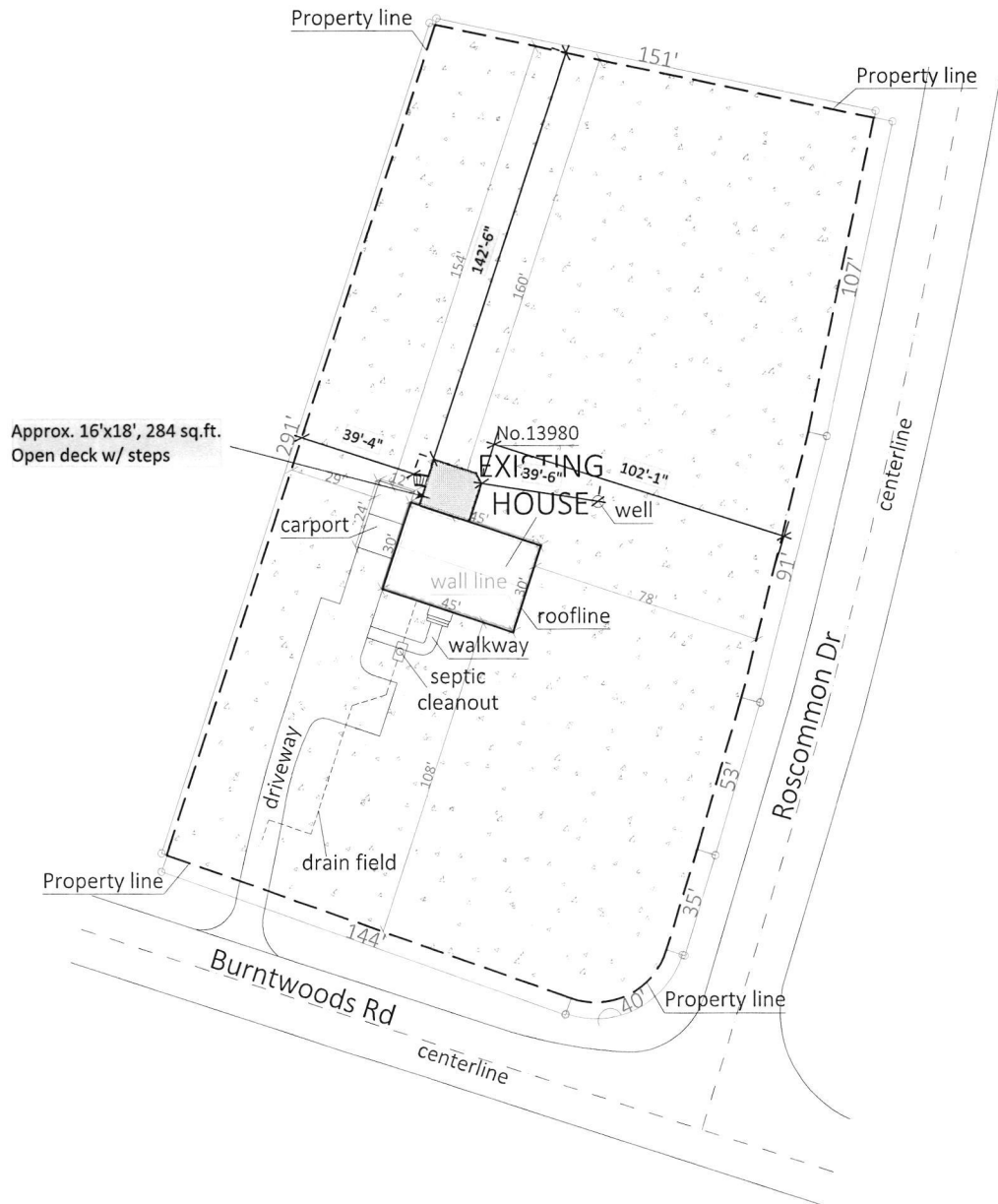
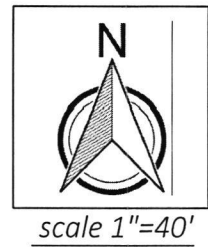
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SITE PLAN

13980 Burntwoods Rd
Glenelg, MD 21737
Parcel ID: 03-281418
Lot area: 1.12 Acres
Paper Size: 11"x17"



Disclaimer

This is not a Legal Survey, nor is it intended to be or replace one.
These measurements are approximate and are for illustrative purposes only.
This work product represents only generalized location affixures, objects or boundaries and should not be relied upon as being legally authoritative for the precise location of any feature, objects or boundary.

1/7/85
NORM

approved
1-7-85 Cullen

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
992-2330

83-281418

ELLICOTT CITY

DISTRICT _____

DATE 1/7/85

INDEXED

P 34750

A REPAIR

Jack Fyock

IS PERMITTED TO INSTALL _____ ALTER ☒

ADDRESS _____ PHONE _____

SUBDIVISION _____ ROAD 13980 Burntwoods Road LOT _____

PROPERTY OWNER Mr. & Mrs. West

13980 Burntwoods Road

ADDRESS Glenelg, Maryland

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES _____ NO _____

SEPTIC TANK CAPACITY _____ GALLONS NUMBER OF BEDROOMS _____

REPAIR - CALL FOR INSPECTION WHEN GROUND IS OPENED UP SO SANITARIAN CAN

RECOMMEND REPAIR.

PLANS APPROVED BY Frank Skinner DATE 1/7/85

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: IF TRENCH IS USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH.

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 40 PVC OR ABS.

PERMIT VOID AFTER THREE YEARS.

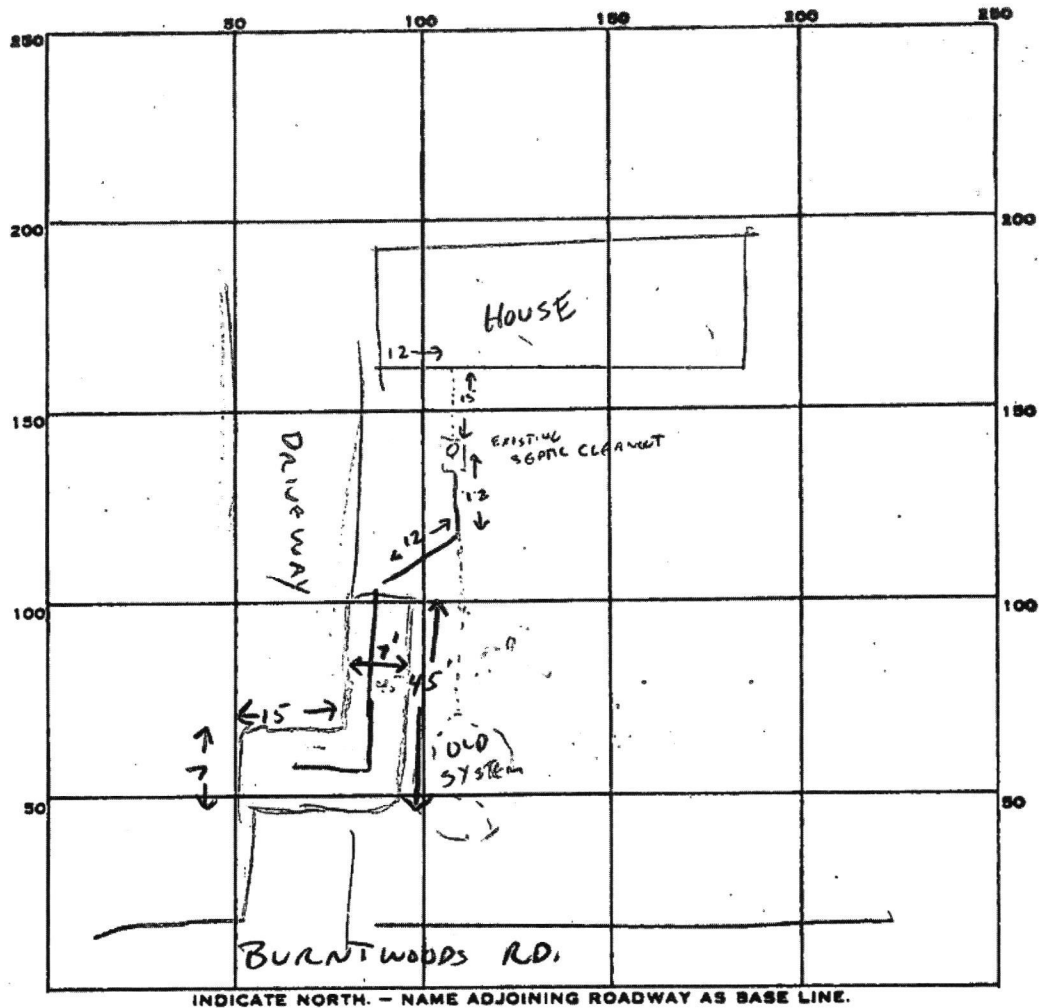
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH-2-1082

P 34750
Repair



PERMIT CARD ✓

SEPTIC TANK, LEVEL EXISTING

CLEANOUTS EXISTING

DISTRIBUTION BOX, LEVEL 100

LEACHING BED

TILE FIELD, DEPTH 6 1/2' FT. TRENCH WIDTH 7' FT.

GRAVEL DEPTH 1 1/2 FT IN. TOTAL LENGTH 60 FT.

NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA 7 x 60 = 420 + EXISTING

SEEPAGE PITS, INSIDE DIAMETER 4 FT. DEPTH BELOW INLET 1 FT.

ABSORBENT AREA 420 SQ. FT. + EXISTING

1-7-85
REMARKS LEACHING BED OK TO COVER. ORIGINAL SYSTEM STILL CONNECTED CW

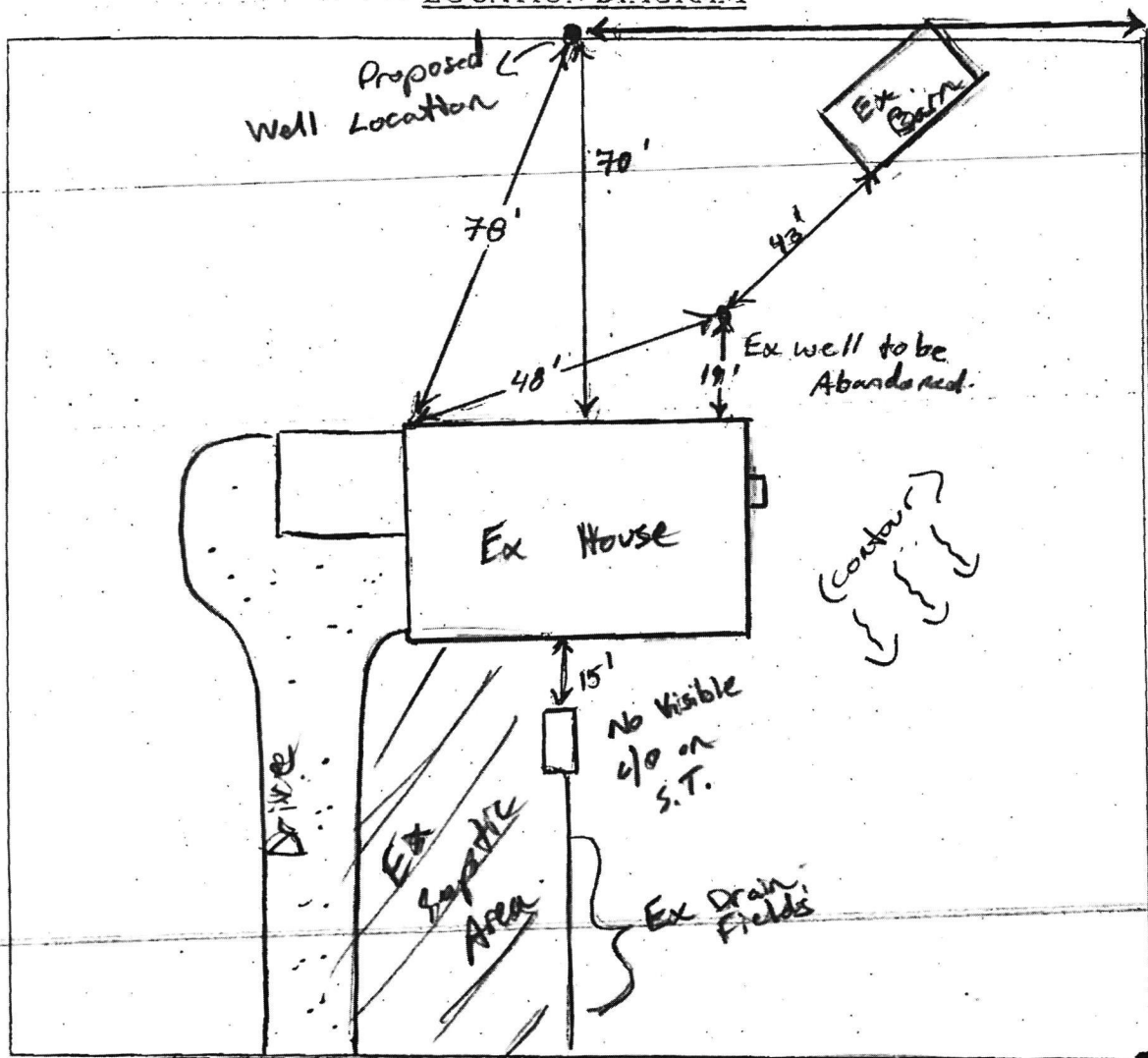
DATE SYSTEM APPROVED 1-7-85

INSPECTOR C. Williams

SITE INSPECTION SHEET

OWNER: Bill West PHONE #: _____
 ADDRESS: 13980 Buntwoods Rd. CONTRACTOR: Jones Well Drilling
 WELL TAG #: _____
 SUBDIVISION: _____ LOT: 19 COUNTY #: 13
 PROPOSAL: Replacement well site Insp.

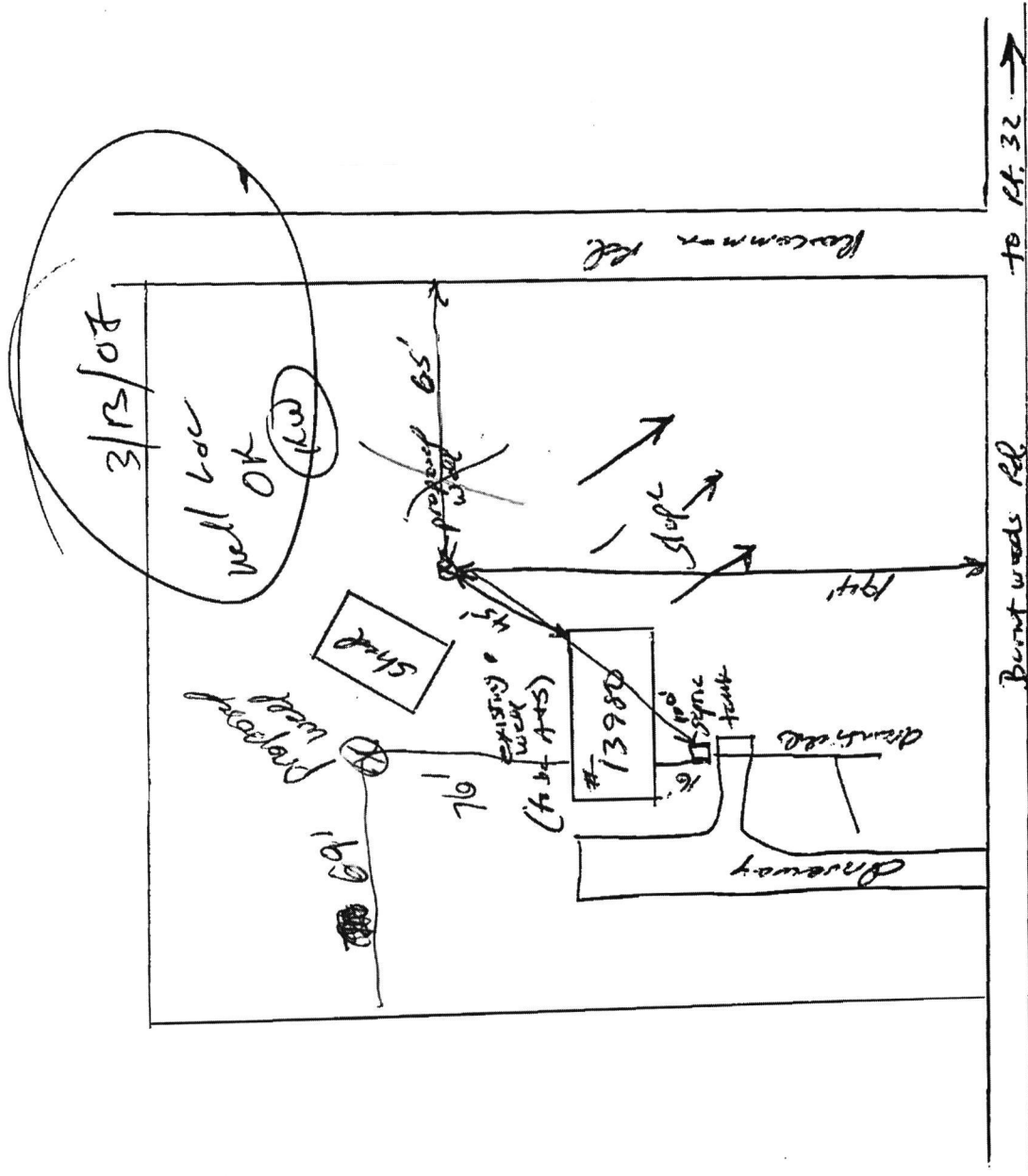
LOCATION DIAGRAM



COMMENTS: Buntwoods Rd.
Location for new well. Corner lot. Nearest Septic
North ~120' from proposed well loc. (KW)

DATE: 3/13/07 INSPECTOR: (KW)

C1 1238 1 2 3 4 5 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE TYPE	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED. COUNTY NUMBER A08975																																																																																																										
ST/CO USE ONLY DATE Received MM DD YY 8 13	DATE WELL COMPLETED MM DD YY 03 14 07	Depth of Well 22 300 26 (TO NEAREST FOOT)	PERMIT NO. FROM "PERMIT TO DRILL WELL" H0-95-0752 28 29 30 31 32 33 34 35 36 37																																																																																																										
OWNER <u>West William</u> STREET OR RFD <u>13980 Burntwoods Rd.</u> TOWN <u>Glenridge</u> SUBDIVISION _____ SECTION _____ LOT <u>19</u>																																																																																																													
WELL LOG Not required for driven wells STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">DESCRIPTION (Use additional sheets if needed)</th> <th colspan="2">FEET</th> <th rowspan="2">check if water bearing</th> </tr> <tr> <th>FROM</th> <th>TO</th> </tr> </thead> <tbody> <tr><td>soft brown</td><td>0</td><td>78</td><td></td></tr> <tr><td>hard gray</td><td>78</td><td>85</td><td></td></tr> <tr><td>med-hard gray</td><td>85</td><td>90</td><td></td></tr> <tr><td>hard tan</td><td>90</td><td>94</td><td></td></tr> <tr><td>med-hard tan</td><td>94</td><td>96</td><td>X</td></tr> <tr><td>hard gray/tan</td><td>96</td><td>100</td><td></td></tr> <tr><td>hard gray</td><td>100</td><td>125</td><td></td></tr> <tr><td>med-hard gray</td><td>125</td><td>129</td><td></td></tr> <tr><td>hard gray</td><td>129</td><td>133</td><td></td></tr> <tr><td>med-hard gray</td><td>133</td><td>135</td><td>X</td></tr> <tr><td>hard gray</td><td>135</td><td>137</td><td></td></tr> <tr><td>med-hard gray/tan</td><td>137</td><td>139</td><td></td></tr> <tr><td>hard gray</td><td>139</td><td>151</td><td></td></tr> <tr><td>med-hard gray</td><td>151</td><td>160</td><td></td></tr> <tr><td>hard gray</td><td>160</td><td>169</td><td></td></tr> <tr><td>med-hard gray</td><td>169</td><td>171</td><td></td></tr> <tr><td>hard light gray</td><td>171</td><td>207</td><td></td></tr> <tr><td>med-hard gray</td><td>207</td><td>212</td><td></td></tr> <tr><td>hard gray</td><td>212</td><td>275</td><td></td></tr> <tr><td>med-hard gray</td><td>275</td><td>278</td><td>X</td></tr> <tr><td>hard gray</td><td>278</td><td>300</td><td></td></tr> </tbody> </table>		DESCRIPTION (Use additional sheets if needed)	FEET		check if water bearing	FROM	TO	soft brown	0	78		hard gray	78	85		med-hard gray	85	90		hard tan	90	94		med-hard tan	94	96	X	hard gray/tan	96	100		hard gray	100	125		med-hard gray	125	129		hard gray	129	133		med-hard gray	133	135	X	hard gray	135	137		med-hard gray/tan	137	139		hard gray	139	151		med-hard gray	151	160		hard gray	160	169		med-hard gray	169	171		hard light gray	171	207		med-hard gray	207	212		hard gray	212	275		med-hard gray	275	278	X	hard gray	278	300		GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) Y N TYPE OF GROUTING MATERIAL (Circle one) CM BC CEMENT BENTONITE CLAY NO. OF BAGS <u>23</u> NO. OF POUNDS <u>2162</u> GALLONS OF WATER <u>115</u> DEPTH OF GROUT SEAL (to nearest foot) from <u>0</u> TOP 52 ft. to <u>80</u> BOTTOM 58 ft. (enter 0 if from surface) CASING RECORD casing types insert appropriate code below <table style="width:100%;"> <tr> <td>ST STEEL</td> <td>CO CONCRETE</td> </tr> <tr> <td>PL PLASTIC</td> <td>OT OTHER</td> </tr> </table> <table style="width:100%;"> <tr> <td>MAIN CASING TYPE <u>PL</u></td> <td>Nominal diameter top (main) casing (nearest inch) <u>6</u></td> <td>Total depth of main casing (nearest foot) <u>82</u></td> </tr> <tr> <td>60 61</td> <td>63 64</td> <td>66 67 70</td> </tr> </table> OTHER CASING (if used) diameter inch depth (feet) from to EACH CASING _____ SCREEN RECORD screen type or open hole insert appropriate code below <table style="width:100%;"> <tr> <td>ST STEEL</td> <td>BR BRASS</td> <td>HO OPEN HOLE</td> </tr> <tr> <td></td> <td>PL PLASTIC</td> <td>OT OTHER</td> </tr> </table>		ST STEEL	CO CONCRETE	PL PLASTIC	OT OTHER	MAIN CASING TYPE <u>PL</u>	Nominal diameter top (main) casing (nearest inch) <u>6</u>	Total depth of main casing (nearest foot) <u>82</u>	60 61	63 64	66 67 70	ST STEEL	BR BRASS	HO OPEN HOLE		PL PLASTIC	OT OTHER
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NUMBER OF UNSUCCESSFUL WELLS: <u>0</u> WELL HYDROFRACTURED Y 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. DRILLERS LIC. NO.: <u>MW D 304</u> <u>David Kelly</u> DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO.: <u>MW D 564</u> <u>Mark Moffitt</u> SITE SUPERVISOR (sign of driller or journeyman responsible for sitework if different from permittee)		C2 DEPTH (nearest ft.) <table style="width:100%;"> <tr> <td>1 <u>PL</u> 80 140</td> <td>2 <u>ST</u> 140 161</td> <td>3 <u>HO</u> 161 300</td> </tr> <tr> <td>8 9 11 15 17 21</td> <td>23 24 26 30 32 36</td> <td>38 39 41 45 47 51</td> </tr> </table> SLOT SIZE 1- <u>25</u> 2 _____ 3 _____ DIAMETER OF SCREEN <u>5</u> (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) T _____ (E.R.O.S.) W Q _____ 70 _____ 72 _____ 74 75 76 TELESCOPE CASING LOG INDICATOR OTHER DATA		1 <u>PL</u> 80 140	2 <u>ST</u> 140 161	3 <u>HO</u> 161 300	8 9 11 15 17 21	23 24 26 30 32 36	38 39 41 45 47 51																																																																																																				
1 <u>PL</u> 80 140	2 <u>ST</u> 140 161	3 <u>HO</u> 161 300																																																																																																											
8 9 11 15 17 21	23 24 26 30 32 36	38 39 41 45 47 51																																																																																																											
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) 		PUMPING TEST HOURS PUMPED (nearest hour) <u>2</u> PUMPING RATE (gal. per min.) <u>800</u> METHOD USED TO MEASURE PUMPING RATE <u>timer</u> WATER LEVEL (distance from land surface) BEFORE PUMPING <u>30</u> ft. WHEN PUMPING <u>298</u> 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 INSTALLED 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. <u>29</u> CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 35 PUMP HORSE POWER 37 41 PUMP COLUMN LENGTH (nearest ft.) 43 47 CASING HEIGHT (circle appropriate box and enter casing height) + above } LAND SURFACE - below } <u>2</u> (nearest foot) 49 50 51																																																																																																											



Not to Scale

Owner: William West
 13780 Burntwoods Rd.
 Glenside Md 21737
 410-442-2747 (H)
 240-588-6539 (C)

9/28/67 - Approved - gk

9/28/67
S. J. Smith
OK

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

INDEXED

P 13050

A 08975

ELLICOTT CITY

DISTRICT 3

DATE 8/30/67

Robert Dubin Co. IS PERMITTED TO INSTALL ☒ ALTER

ADDRESS Rt. 2 - Haviland Mill Road, Clarksville, Md. PHONE 774-9615

A SEWAGE DISPOSAL SYSTEM LOCATED AT

SUBDIVISION Burnt Wood ROAD Burnt Woods Rd. & LOT 19, Blk. D, Sec. 3, Pt. 1

PROPERTY OWNER Burnt Woods Development Co.

ADDRESS

SPECIFICATIONS - 3 bedrooms

DRAIN FIELD DEPTH FEET, BOTTOM AREA SQ. FT.

SEEPAGE PITS ABSORBENT SIDE-WALL AREA SQ. FT.

SEPTIC TANK CAPACITY 750 GALLONS (Installed no deeper than 3 ft. below original grade)

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 22% & TANK CAPACITY 50%.

OTHER Leaching Bed - 201 sq. ft. bottom area per bedroom - installed no deeper than 3 ft. below original grade including gravel.

Place leaching bed between 15 and 60 ft. from front lot line and between 15 and 75 ft. from left side as seen when facing lot from Burnt Woods Rd.

CALL FOR INSPECTION OF LEACHING BED WHEN HOLE IS DUG BEFORE GRAVEL IS INSTALLED.
PERMIT VOID AFTER THREE YEARS.

PLANS APPROVED BY D. W. Monaghan DATE 7/28/64

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.

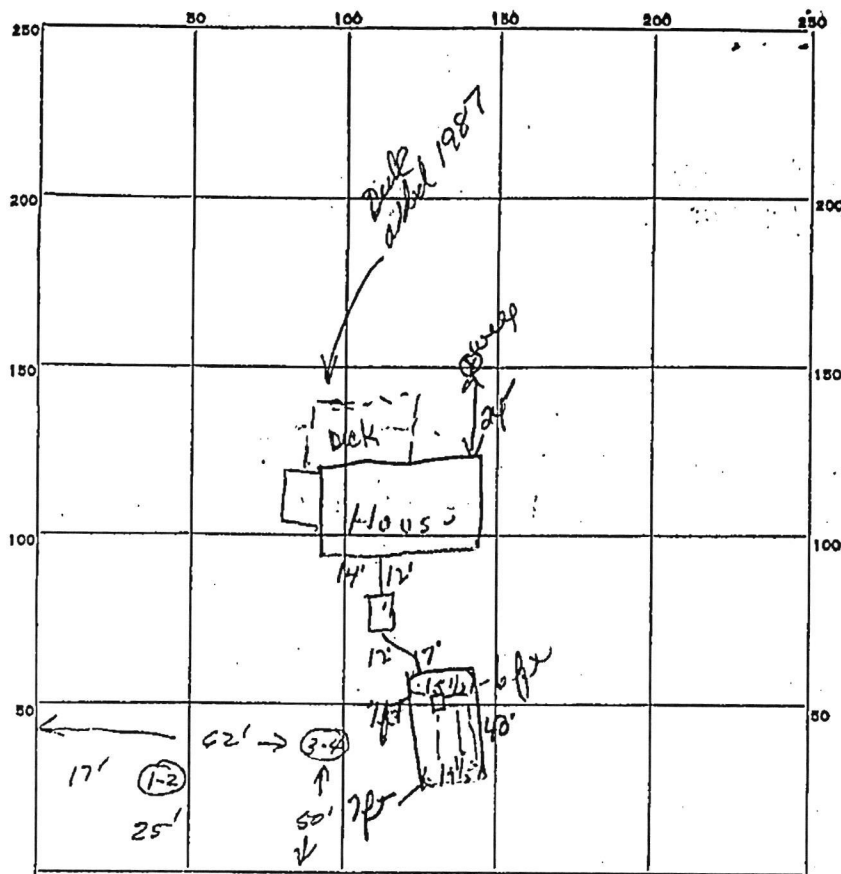
BLDG. PERMIT SIGNED

AND RETURNED

7/23/67
L. J. Smith

NOTIFY THE HEALTH DEPARTMENT 48 HOURS
BEFORE EXCAVATIONS ARE TO BE BACK FILLED.

08975

$$\begin{array}{r} 43 \\ 15 \\ \hline 215 \\ 42 \\ \hline 43645 \\ 154 \\ \hline 31 \\ 2 \end{array}$$


INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

Bauntwren Road

SEPTIC TANK, LEVEL OK

CLEANOUTS OK

DISTRIBUTION BOX, LEVEL

2 Ded
TILE FIELD, DEPTH 7 FT. TRENCH WIDTH 15 ft gull
14 ft

GRAVEL DEPTH 36 IN. ^{Y Red} TOTAL LENGTH 43 FT.

NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA 6.45 sq. ft.

SEEPAGE PITS, INSIDE DIAMETER_____FT. DEPTH BELOW INLET_____FT.

ABSORBENT AREA 6 SQ. FT.

REMARKS 7/25/17 - Tides in at Fort Mifflin

9-10-64 tested where L.B. installed ① 12 min. at $10\frac{1}{2}$ ft ② 5 ft no perc.
③ 12 min at $10\frac{1}{2}$ ft ④ 29 min. at 5 ft. DWM
(1st 5 ft. clay)

DATE SYSTEM APPROVED

INSPECTOR

9/28/67

J. H. Kilmore.