

4/24/90 LATE

Acct# 410797

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED

P 45942
39903
A 39904

DISTRICT 5th

DATE 5/17/90

DATE SYSTEM APPROVED 4/24/90

INSPECTOR R10

Jack Fyock IS PERMITTED TO INSTALL ☒ ALTER ☐
ADDRESS 13775 Triadelphia Road, Glenelg, Maryland 21737 PHONE 988-9270
SUBDIVISION Twelve Hills ROAD 14009 Twelve Oaks Courtlot 40
PROPERTY OWNER John & Arnella Bing
ADDRESS

~~IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 25%~~

~~GARBAGE GRINDER XXXXX YES XXXXXXXXXXXXXXXX NO XXXXXXXX~~

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 180 sq. ft. per bedroom. Trench to be 3.0 feet wide. Inlet 3.0 feet below original grade. Bottom maximum depth 5.0 feet below original grade. Effective area begins at 3.0 feet below original grade. 2.0 feet of stone below distribution pipe.
LOCATION - Beginning at the right rear lot corner as seen when facing the lot from Twelve Oaks Court, place the distribution box 200 feet down the right lot line (253.17') and 100 feet off the same lot line. Run trenches on contour toward the front and rear lot lines. Maintain a minimum of 100 feet from the well.
NOTE - No trench to exceed 100 feet in length. Provide 6" @ 8" diameter cleanout and cap to grade or above on septic tank.

PLANS APPROVED BY Jane E. Nadeau CM DATE 05/09/89

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

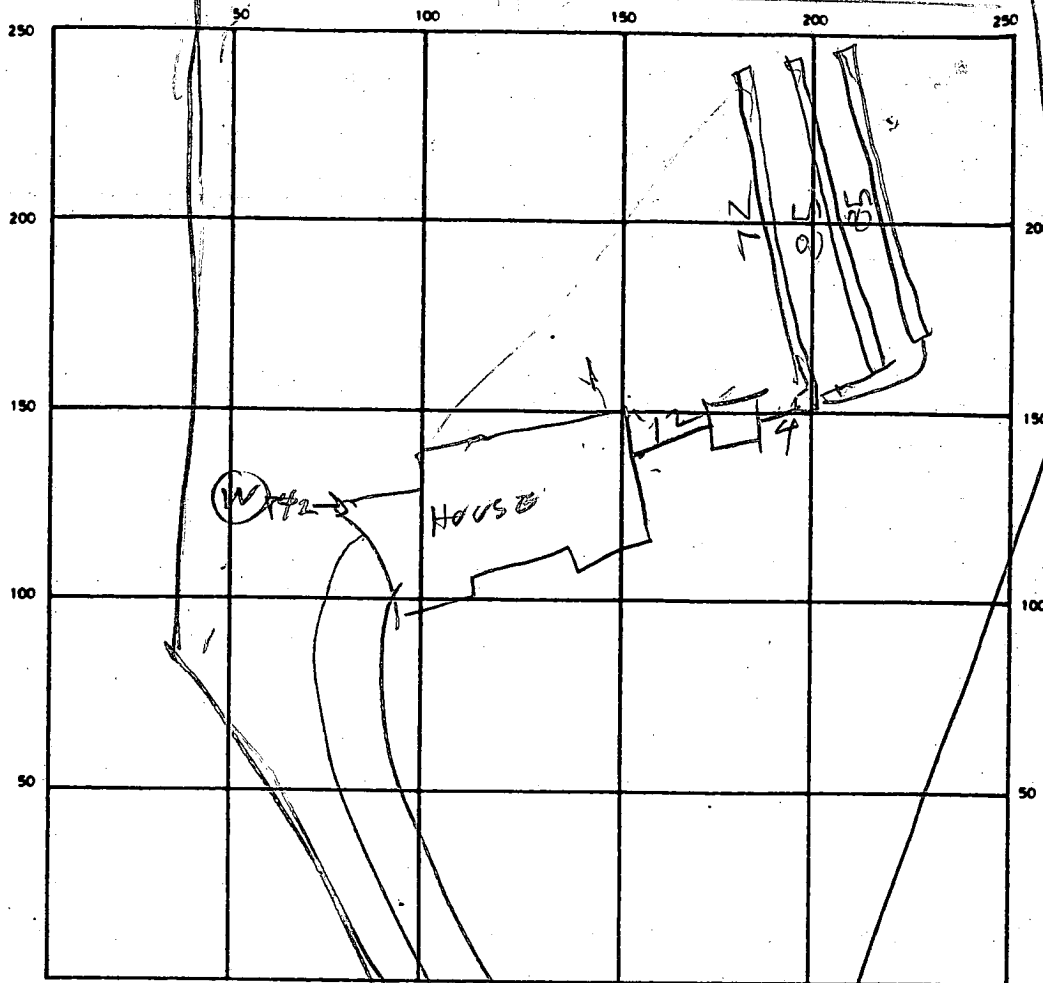
- NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS
- NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX, TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)
- NOTE: IF DEEP TRENCHES ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCHES
- 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 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 PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED
- NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES.

BLDG. PERMIT SIGNED
AND RETURNED 10/3/91
Serial # 39829-

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS. Deck & Pouch

A 39904
39903



SEPTIC TANK LEVEL 1250 CLEANOUTS OK

DISTRIBUTION BOX LEVEL _____

DRAIN FIELD/TILE FIELD. DEPTH 5 FT. TRENCH WIDTH 3 FT. INLET DEPTH _____ FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 12 | 25 | 25 FT. 242

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 726 SQ. FT. 720 PER 10'

DRYWELL INSIDE DIAMETER _____ FT. EFFECTIVE DEPTH BELOW INLET _____ FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS 4/24/90 OK Trench

DATE SYSTEM APPROVED 4/24/90 INSPECTOR [Signature]

APPLICATION

PERCOLATION TESTING

A 39904

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

DISTRICT 5TH

DATE 8-19-87

9-24-87
Percolation
pending plat
approval. Major
lot changes needed JEN

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER At Fred Busster John + Annella Bing

ADDRESS 4994 Shepherd Lane PHONE 531-2193

PROSPECTIVE BUYER N/A

ADDRESS _____ PHONE Final 40

PROPERTY LOCATION:

SUBDIVISION Twelve Hills Sec III LOT NO. 12

ROAD AND DESCRIPTION 1400 9 Twelve Oaks
Linden Church Rd

BLOG. PERMIT SIGNED
AND RETURNED 8/13/87
Serial # 28253
SFD

TAX MAP 28 PARCEL # 49

SIZE OF LOT 3 acres TYPE BLDG. SFD
(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE
FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY
WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

Mal D. Kinn
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 9-24-87 for perc hole locations, subdivision plat
approval. Must change lot lines and alter perc areas slightly to
obtain 10000 sq. ft. of area. Need house's well site JEN

THIS IS NOT A PERMIT

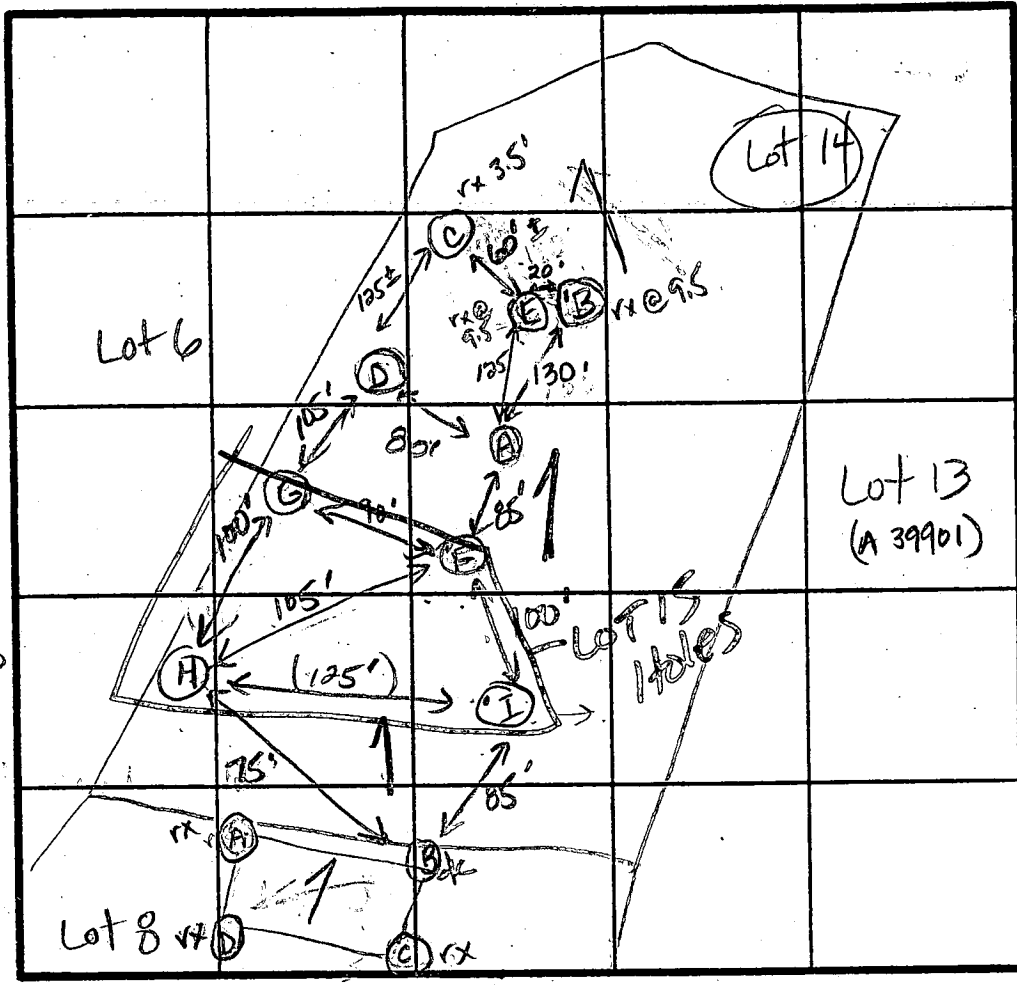
Highest

IF GAD BEE

A 39904
(B)

Low
SOIL PROFILE

0-4.5 Red br
cl sa si
loam,
trc gvl
L 15%
4.5-11.5 Brown
sandy
si lm,
little
gvl L 25%
11.5 Bottom



0-5.5 Br si cl lm
trc gvl,
L 20%
5.5-9.5 Br sa si
lm, little
gvl L 10%
9.5 Refusal

0-4 Red si
cl loam
4-11.0 Tan sa
silt, trc
mica
11. Bottom

0-3.5 Red sa si
clay
3.5-10.5 Tan sa
silt loam
10.5 Bottom

0-4.5 Red si
cl loam
4.5-11.5 Red cl
sa silt
11.5 Bottom

0-5 Br sa cl
si lm,
trc gvl
L 50%
5-10 Brown
sa si lm
some
broken
rock
frag
L 25%
10 Bottom

0-6 Red sa si
clay
6-11.5 Tan sa
silt
loam
11.5 Bottom

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
9-2-87	D	3.5 S	2:43	2:45	2:45	2:47	2
		11.5 D	Bottom (see profile)				
	A	3.5 S	2:50	2:52	2:52	2:55	3
		10.0 D	Bottom (see profile)				
	B	9.5 V	Refusal at 9.5', Clay layer to 5.5'				
	E	9.5 V	same as B		Refusal @ 9.5'		failed
✓	C	3.5 V	Refusal @ 3.5'				failed
9-24-87	✓ F	3.5 S	12:28	12:30	12:30	12:32	2
		11.0 D	Bottom (see profile)				
	✓ G	4.5 S	12:45	12:47	12:47	12:49	2
		11.5 D	Bottom (see profile)				
	✓ I	3.5 S	12:51	12:53	12:53	12:55	2
		6.5 M	12:49	12:51	12:51	12:53	2
		11.5 D	Bottom (see profile)				
	✓ H	10.5 V	(see profile)				

REMARKS

TYPE OF SOIL Want to move Lot 8 downhill to use G, H, F, I for septic field. Lot 14 would have A, D, G, F
TESTED BY J E Nademan ALSO PRESENT Glen K. Daves

failed
X Perc
2 min
180' per
inlet 30'
bottom 50'

APPLICATION

PERCOLATION TESTING

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

A 39903
P _____

DISTRICT 5TH
DATE 8-19-87

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Alfred Bassler

ADDRESS 4994 Shepherd Lane PHONE 531-2193

PROSPECTIVE BUYER N/A

ADDRESS _____ PHONE Final - Not used

PROPERTY LOCATION:

SUBDIVISION Twelve Hills Sec III LOT NO. 11

ROAD AND DESCRIPTION Linden Church Rd

TAX MAP 28 PARCEL # 49

SIZE OF LOT 3 acres TYPE BLDG. SFD
(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

Mal D. Kinn
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR (HOLDING) See Lot 14, 9-24-87. May have septic area on Lot 14. Hold for perc hole locations and subdivision plat approval. Need lot lines redrawn. DEN

THIS IS NOT A PERMIT

A 39903

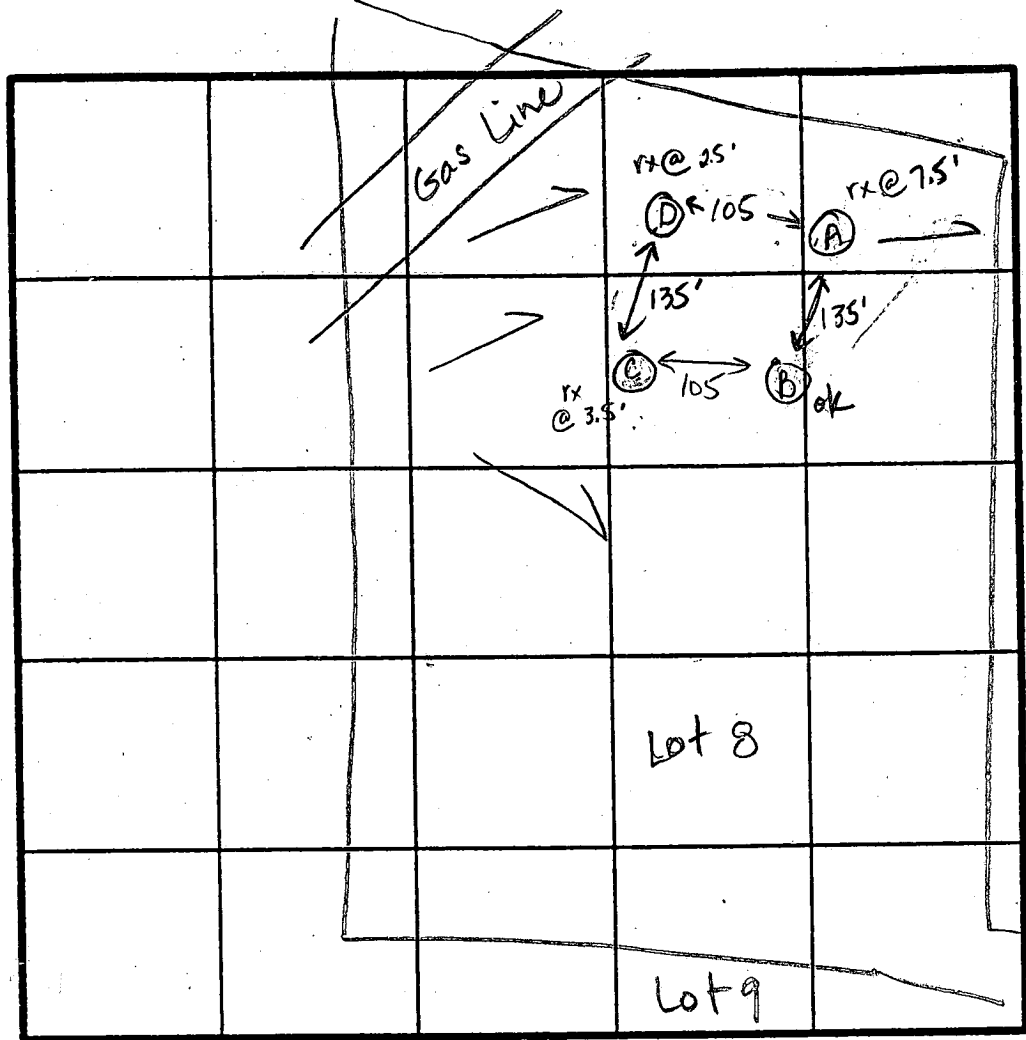
Highest @
D
A
B
Low
(B)
SOIL PROFILE

0-3.5 Brown sa si lm
3.5-6.5 Red-br sa si lm
6.5-12.0 White to tan sa si lm, trace of mica
12.0 Bottom

(C)
0-3.5 Brown sandy silt
3.5 Refusal in large pieces of broken rock

(A)
0-7.5 Red-brown sa si lm
7.5 Refusal on large broken rock pieces

(D)
0-2.5 Br sa silty loam
2.5 Refusal on large broken rock pieces
EH-12-1079



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

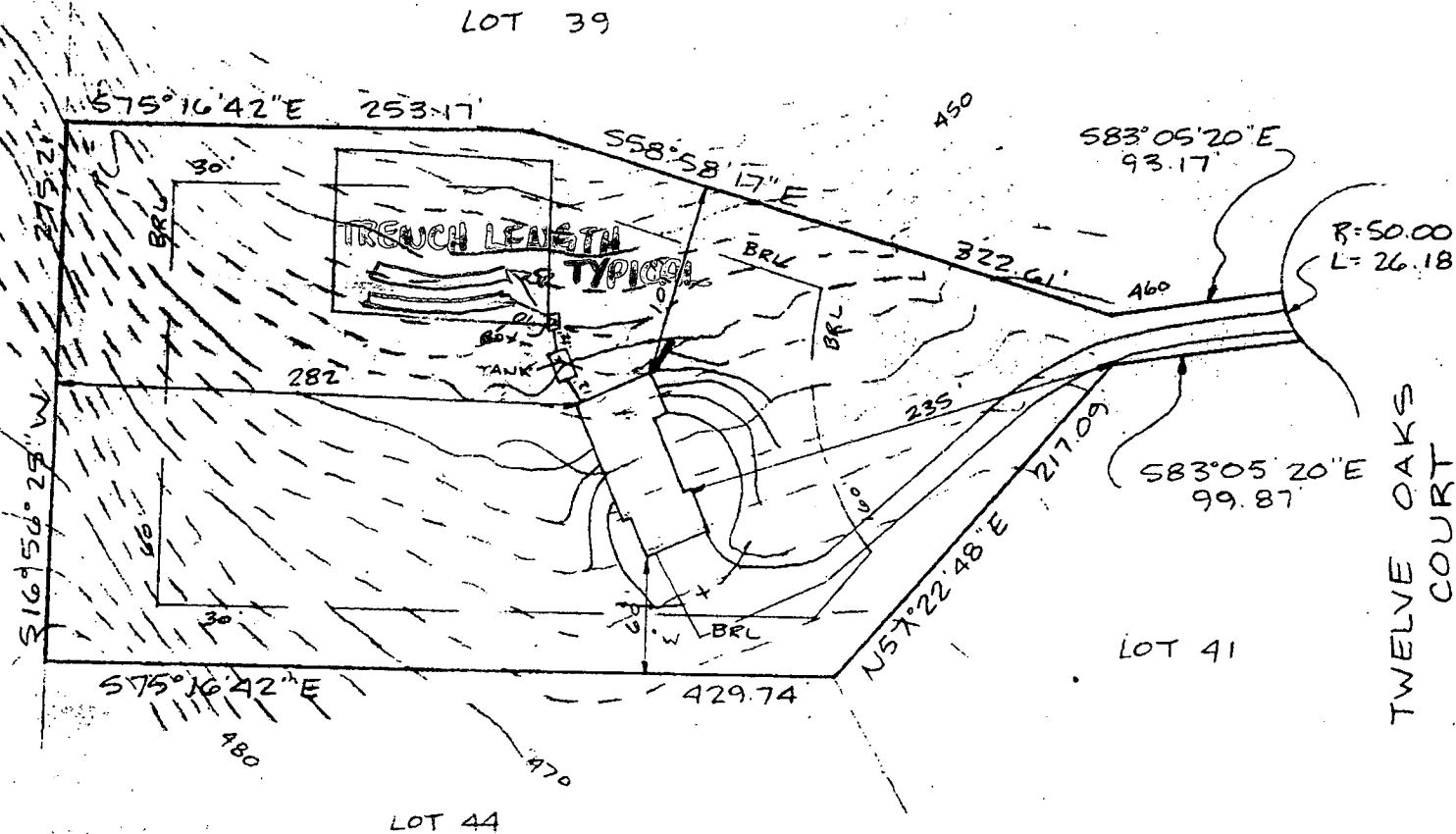
DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
9-1-87	B	S	4.5	2:50	2:52	2:52	2:54	2
		D	12.0	Bottom (see profile)				
	C	✓	Broken rock	at 3.5 ft			failed	
	A	✓	Broken rock	@ 7.5 ft			failed	
✓	D	✓	Broken rock	@ 2.5 ft			failed	

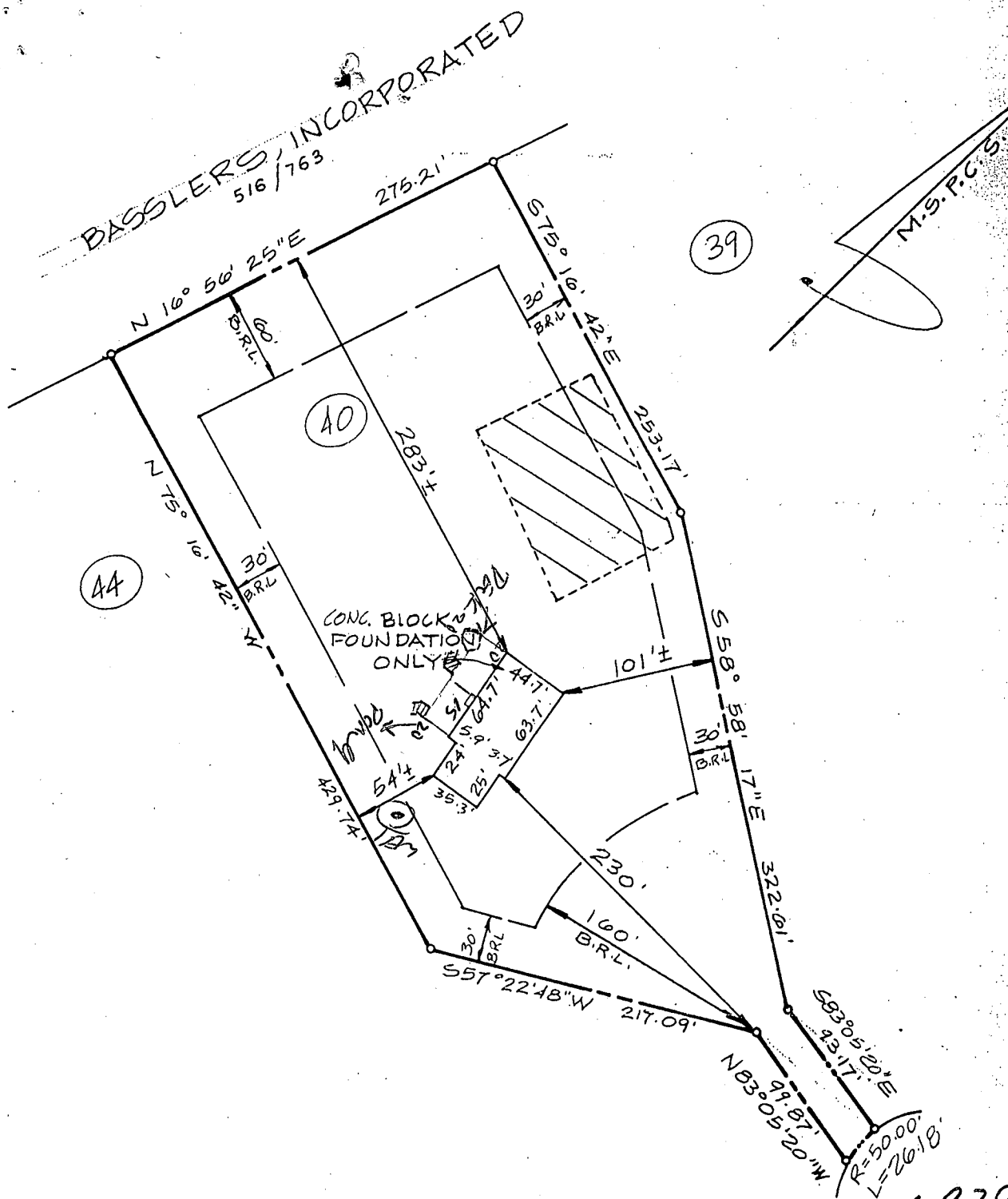
REMARKS See lot 14, may be able to combine perc areas.
Holes at plat location. Holes A, C & D are rocky at 2.5' to 7.5'.
TYPE OF SOIL 0-3.5' Brown sa si lm, 3.5 to 7.5 Brown sa si with large rock pieces.
TESTED BY JE Nadeau ALSO PRESENT O. Ketterman, Mark W.

Permit # 28253 Capitano Custom Construction 988-9178

P.02

JUL 12 '89 12:12 NTT ASSO. 301 4421315





TOP OF CONC. BLOCK FOUNDATION = 465.2

LEGEND

~~~~~ 10.000' PRIVATE SEWAGE EASEMENT

B.R.L. : BUILDING RESTRICTION LINE

Note: The information on this plat shows only that the improvements indicated hereon are contained within the outlines of the lot upon which they were erected, unless otherwise noted, and is not to be used to establish property lines or corners.

I hereby certify that I have examined the current Flood Insurance Rate Map (FIRM Map # 240014-0026B) for the subject property and it does not lie in an area identified by the Secretary of Housing and Urban Development as having Special Flood or mudslide hazards.



FOUNDATION  
Location Survey of #14009 TWELVE OAKS COURT

Vitti, Robel and Associates, Inc.

ENGINEERING & SURVEYING

1717 York Road Suite 2B Lutherville, MD 21093

252-4552

job no. 89-117

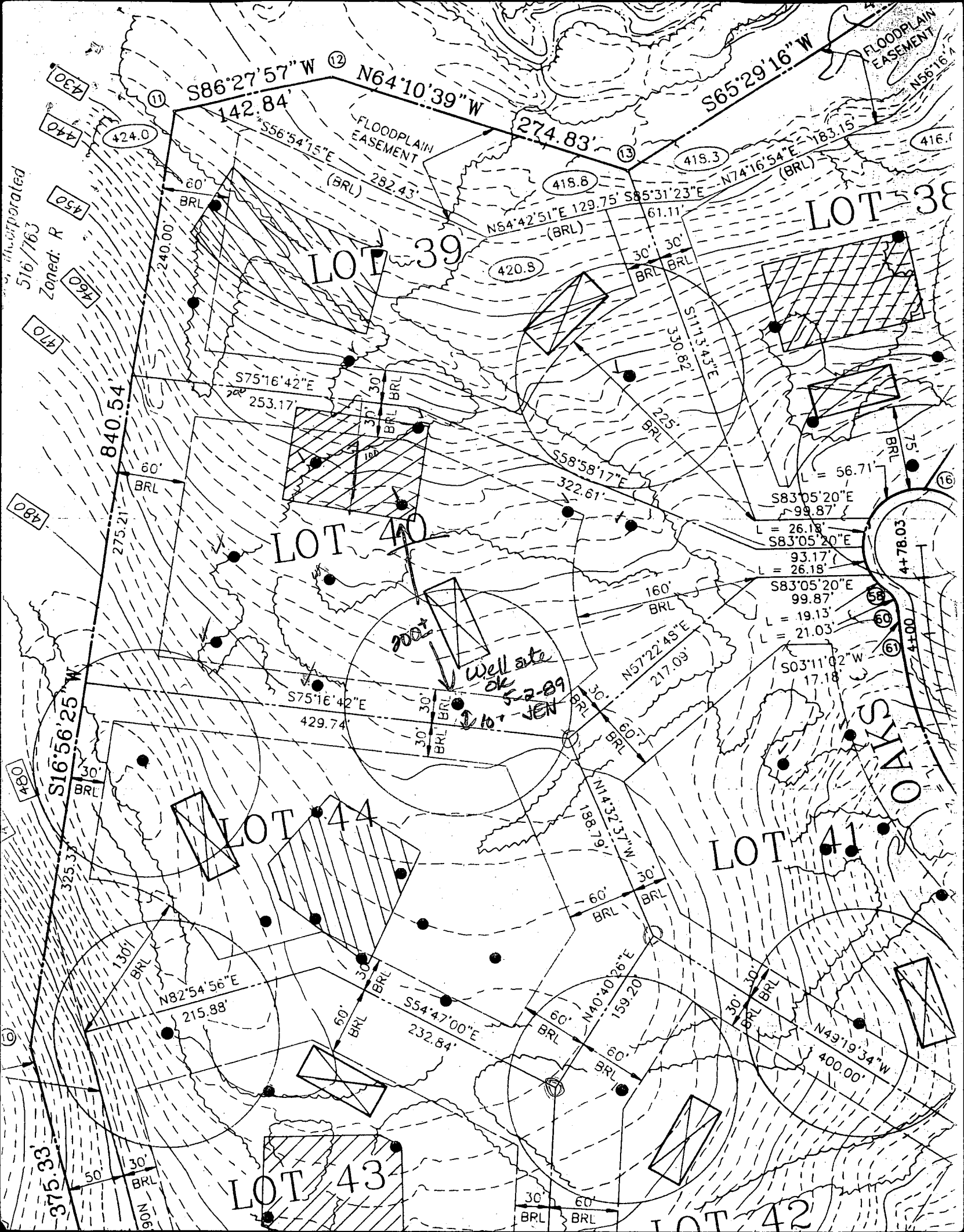
scale 1" = 100'

date 12-18-89

drawn S.B.

checked MAR





|                                                             |      |                                 |                                                                                                     |                   |                                           |  |
|-------------------------------------------------------------|------|---------------------------------|-----------------------------------------------------------------------------------------------------|-------------------|-------------------------------------------|--|
| C 1                                                         | 6731 | SEQUENCE NO.<br>(DENV USE ONLY) | STATE OF MARYLAND<br>WELL COMPLETION REPORT<br>FILL IN THIS FORM COMPLETELY<br>PLEASE PRINT OR TYPE |                   | PERMIT NO.<br>FROM "PERMIT TO DRILL WELL" |  |
|                                                             |      |                                 |                                                                                                     |                   | H0-88-0599                                |  |
| (THIS NUMBER IS TO BE PUNCHED<br>IN COLS. 3-6 ON ALL CARDS) |      |                                 | COUNTY<br>NUMBER                                                                                    |                   |                                           |  |
|                                                             |      |                                 | A 39904                                                                                             |                   |                                           |  |
| DATE Received                                               |      | DATE WELL COMPLETED             |                                                                                                     | Depth of Well     |                                           |  |
| 8 13                                                        |      | 15 20                           |                                                                                                     | 22 26             |                                           |  |
|                                                             |      | 053259                          |                                                                                                     | 165               |                                           |  |
|                                                             |      |                                 |                                                                                                     | (TO NEAREST FOOT) |                                           |  |

|               |                      |            |
|---------------|----------------------|------------|
| OWNER         | ALTOGETHER LTD. PART |            |
| STREET OR RFD | last name            | first name |
| TWELVE HILLS  | TWELVE               | HILLS      |
| SUBDIVISION   | SECTION              | LOT        |
| TWELVE HILLS  | 3                    | 40         |

|                                                                                                   |      |                              |
|---------------------------------------------------------------------------------------------------|------|------------------------------|
| WELL LOG                                                                                          |      |                              |
| Not required for driven wells                                                                     |      |                              |
| STATE THE KIND OF FORMATIONS<br>PENETRATED, THEIR COLOR, DEPTH,<br>THICKNESS AND IF WATER BEARING |      |                              |
| DESCRIPTION (Use<br>additional sheets if needed)                                                  | FEET | Check<br>if water<br>bearing |
|                                                                                                   | FROM | TO                           |
| Top Soil                                                                                          | 0    | 2                            |
| Shale                                                                                             | 2    | 10                           |
| Mika                                                                                              | 10   | 30                           |
| Sandstone                                                                                         | 30   | 45                           |
| Mika                                                                                              | 45   | 60                           |
| Sandstone                                                                                         | 60   | 65                           |
| Mika                                                                                              | 65   | 75                           |
| Sandstone                                                                                         | 75   | 80                           |
| Mika                                                                                              | 80   | 165                          |

|                                                   |                |
|---------------------------------------------------|----------------|
| GROUTING RECORD                                   |                |
| WELL HAS BEEN GROUTED<br>(Circle Appropriate Box) |                |
| TYPE OF GROUTING MATERIAL                         |                |
| CEMENT                                            | BENTONITE CLAY |
| CM                                                | BC             |
| NO. OF BAGS                                       | NO. OF POUNDS  |
| 5                                                 | 300            |
| GALLONS OF WATER                                  |                |
| DEPTH OF GROUT SEAL (to nearest foot)             |                |
| from                                              | ft. to         |
| 48                                                | 58             |
| (enter 0 if from surface)                         |                |

|                                                           |          |    |
|-----------------------------------------------------------|----------|----|
| CASING RECORD                                             |          |    |
| casing<br>types<br>insert<br>appropriate<br>code<br>below |          |    |
| ST                                                        | CO       |    |
| STEEL                                                     | CONCRETE |    |
| PL                                                        | OT       |    |
| PLASTIC                                                   | OTHER    |    |
| MAIN CASING TYPE                                          |          |    |
| Nominal diameter top (main) casing (nearest inch)         |          |    |
| Total depth of main casing (nearest foot)                 |          |    |
| PL                                                        | L        | 21 |
| 60                                                        | 61       | 66 |

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

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

|                                   |           |    |    |    |    |
|-----------------------------------|-----------|----|----|----|----|
| C 2                               |           |    |    |    |    |
| DEPTH (nearest ft.)               |           |    |    |    |    |
| EACH SCREEN                       |           |    |    |    |    |
| 1                                 | H0 18 144 |    |    |    |    |
| 2                                 |           |    |    |    |    |
| 3                                 |           |    |    |    |    |
| 38                                | 39        | 41 | 45 | 47 | 51 |
| SLOT SIZE 1 2 3                   |           |    |    |    |    |
| DIAMETER OF SCREEN (NEAREST INCH) |           |    |    |    |    |
| 56 60                             |           |    |    |    |    |

|                           |                                                              |
|---------------------------|--------------------------------------------------------------|
| 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 10.17.13 "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 IDENT. NO.                                                                                   | 453                  |
| DRILLERS SIGNATURE                                                                                    | Frank L. [Signature] |
| (MUST MATCH SIGNATURE ON APPLICATION)                                                                 |                      |
| SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee) |                      |

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

|                                                  |               |            |
|--------------------------------------------------|---------------|------------|
| OEP USE ONLY<br>(NOT TO BE FILLED IN BY DRILLER) |               |            |
| T                                                | (E.R.O.S.)    | WQ         |
| 70                                               | 72            | 74 75 76   |
| TELESCOPE CASING                                 | LOG INDICATOR | OTHER DATA |

|                                              |             |                        |
|----------------------------------------------|-------------|------------------------|
| C 3                                          |             |                        |
| PUMPING TEST                                 |             |                        |
| HOURS PUMPED (nearest hour)                  |             |                        |
| 3                                            |             |                        |
| PUMPING RATE (gal. per min. to nearest gal.) |             |                        |
| 12                                           |             |                        |
| METHOD USED TO MEASURE PUMPING RATE          |             |                        |
| Bucket                                       |             |                        |
| WATER LEVEL (distance from land surface)     |             |                        |
| BEFORE PUMPING                               |             |                        |
| 30                                           |             |                        |
| WHEN PUMPING                                 |             |                        |
| 40                                           |             |                        |
| TYPE OF PUMP USED (for test)                 |             |                        |
| A                                            | P           | T                      |
| air                                          | piston      | turbine                |
| C                                            | R           | O                      |
| centrifugal                                  | rotary      | other (describe below) |
| J                                            | S           |                        |
| jet                                          | submersible |                        |

|                                                                                        |  |
|----------------------------------------------------------------------------------------|--|
| PUMP INSTALLED                                                                         |  |
| DRILLER WILL INSTALL PUMP YES (NO)                                                     |  |
| IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE |  |
| TYPE OF PUMP INSTALLED                                                                 |  |
| PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE:                                            |  |
| 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                                                                                |  |
| 2 (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) |  |
| Twelve Hills Rd                                                                                                                           |  |
| Twelve Hills Rd                                                                                                                           |  |

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS  
3430 COURT HOUSE DRIVE  
ELLCOTT CITY, MD 21043  
PERMITS (410)313-2455 INSPECTIONS (410)313-1810  
AUTOMATED INFORMATION (410) 313-3800

HOWARD COUNTY  
PERMIT APPLICATION

PERMIT NUMBER  
B00122830

Building Address 14009 Twelve Oaks Court  
Clarksville, MD 21029

Suite/Apt. #: SDP/WP/Petition #:

Census Tract Subdivision Twelve Hills

Section 3 Area Lot 40

Tax Map Parcel Grid

Zoning Map Coordinates 14-B1 H Lot size

Owner's Name John Bing

Address 14009 Twelve Oaks Court

City Clarksville State MD Zip Code 21029

Home Phone 301-594-9219 Work Phone 410-938-7391

Applicant's Name & Mailing Address, (if other than stated hereon):

Phone Fax

Existing Use Single Family Dwelling

Proposed Use Inground Pool 28'x46', 3' to 8' deep

Estimated Construction Cost \$ 25,000.00

Description of Work Natural Shape / 28' x 46' (950 sq. ft.)  
3' to 8' deep / truck filled

Contractor Company Rowan Landscape Co., Inc.

Contact Person Mary Rowan

Address 8671 Reservoir Rd

City Fulton State MD Zip Code 20759

License No. CTR 03729

Phone 301-204-9150 Fax 301-204-9150

Occupant or Tenant

Contact Name

Address

City State Zip Code

Phone Fax

Engineer or Architect Company

Contact Person

Address

City State Zip Code

Phone Fax

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics

Height:

No. of stories:

Gross area, sq. ft. per floor:

Use group:

Construction type:

Reinforced Concrete

Structural Steel

Masonry

Wood Frame

State Certified Modular

Utilities

Water Supply:

Public

Private

Sewage Disposal:

Public

Private

Electric Yes No

Gas Yes No

Heating System:

Electric Oil

Natural Gas

Propane Gas

Sprinkler system: N/A

NFPA #13

Full

Partial

Other Suppression

Building Characteristics

SF Dwelling SF Townhouse

Depth Width

1st floor:

2nd floor:

Basement:

Finished Basement Unfinished Basement

Crawl space Slab on Grade

No. of Bedrooms

Multi-family dwellings:

No. of efficiency units:

No. of 1 BR units:

No. of 2 BR units:

No. of 3 BR units:

Other:

Dimensions:

Footings:

Roof:

State Certified Modular

Manufactured Home

Utilities

Water Supply:

Public

Private

Sewage Disposal:

Public

Private

Electric Yes No

Gas Yes No

Heating System:

Electric Oil

Natural Gas

Propane Gas

Sprinkler system: N/A

NFPA #13D

NFPA #13R

Other:

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 THE PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES

Mary E. Rowan

Mary E. Rowan

Applicant's Signature Print Name

Sec Rowan Landscape Co Inc 3-8-00

Title/Company Date

Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY  
\*\* PLEASE WRITE NEATLY AND LEGIBLY. \*\*

VALIDATION

AGENCY DATE SIGNATURE APPROVAL

Land Development, DPZ

State Highways

Building Official

Dev. Engineering, DPZ

Health

Fire Protection

Is Sediment Control approval required prior to issuance?

YES NO

CONTINGENCY CONSTRUCTION START: ONE STOP SHOP:

DPZ SETBACK INFORMATION

Front:

Rear:

Side:

Side St.:

All minimum setbacks met?

YES NO

Is Entrance Permit required?

YES NO

Historic District?

YES NO

Lot Coverage for New Town Zone

SDP/Red-line approval date

PROPERTY ID#:

Filing Fee \$

Permit Fee \$

(.10 sq. ft. ) (.15 sq. ft. )

Excise Tax \$

(.40 sq. ft. ) (.80 sq. ft. )

TOTAL FEES

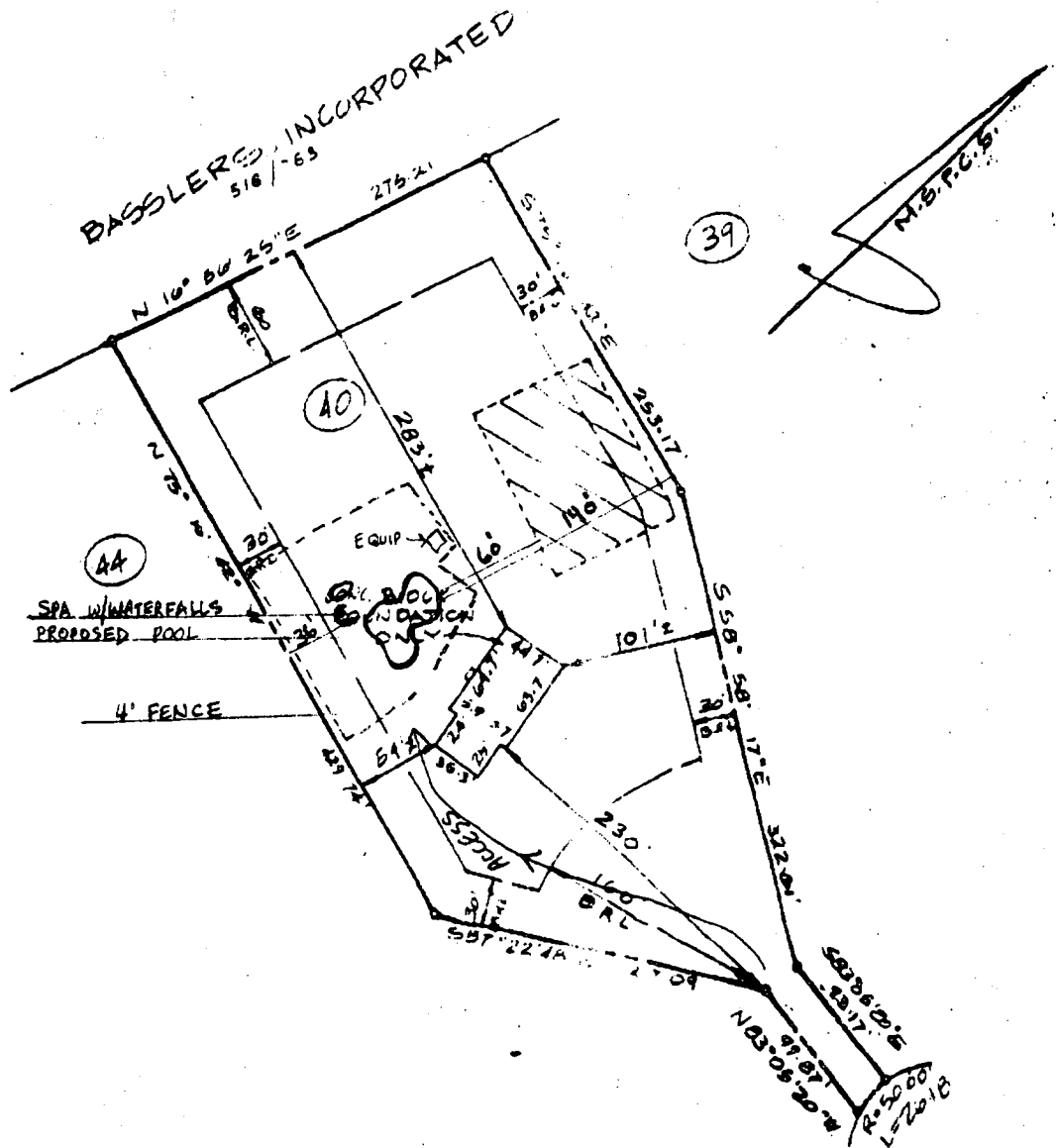
Check #

Validation #

Accepted by:

3/9/00  
 Proposed pool  
 location OK  
 as shown

For: Timothy Pancake  
 From: John & Arvella Bing



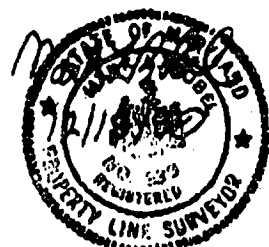
TOP OF CONC. BLOCK FOUNDATION = 465.2

LEGEND  
 ZZZZ 10' 000' PRIVATE SEWAGE EASEMENT  
 B.R.L. BUILDING RESTRICTION LINE

LOT 40, SECTION 3  
 TWELVE HILLS  
 PLAT REFERENCE:  
 5TH ELECTION DISTRICT  
 HOWARD COUNTY, MD

Note: The information on this plat shows only that the improvements indicated hereon are contained within the outlines of the lot upon which they were erected, unless otherwise noted, and is not to be construed as establishing property lines or corners.

I hereby certify that I have examined the current Flood Insurance Rate Map (FIRM Map) # 240014-0026B for the subject property and it does not lie in an area identified as the Special Flood Hazard and Urban Development as having Special Flood or Moderate hazards.



FOUNDARY  
 Location Survey of #14009 TWELVE OAKS COURT  
**Vitti, Robel and Associates, Inc.**  
 ENGINEERING & SURVEYING  
 1717 York Road Suite 2B Lutherville, MD 21093  
 252 4552

Job no. 01-117  
 scale 1" = 100'  
 date 12-18-01  
 drawn S.B.  
 checked MTR