

#408512
PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 47863

A 40046

DISTRICT 5th

DATE 2/28/92

DATE SYSTEM APPROVED 7/27/93

INSPECTOR CW

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

461-9933

INDEXED

~~Xaver N. Gramkow~~

Lack Fyock

IS PERMITTED TO INSTALL ☒ ALTER ☐

ADDRESS ~~13902 Hallowell Court, Dayton, Maryland 21036~~

PHONE ~~531-5294~~ 988-9270

SUBDIVISION Eagle Point Landing LOT 13 ROAD 5427 Talon Court

PROPERTY OWNER Eagle Point Landing Partnership/Xaver N. Gramkow

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

NOTE TO INSTALLER: BE ALERT TO 100' CLEARANCE

TO WELL

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 144 for 4 bedrooms. 36' per bedroom.

TRENCHES - 180 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 3 feet below original grade. 5 feet of stone below distribution pipe.

LOCATION - Starting from front left lot corner (on Talon Court) place distribution box 150' down left lot line (410') and 85" off this same lot line. Run trenches toward north lot line (408.56 ft).

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. 12/31/90 OK RY

PLANS APPROVED BY Mark Rifkin

DATE 11/23/88

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**

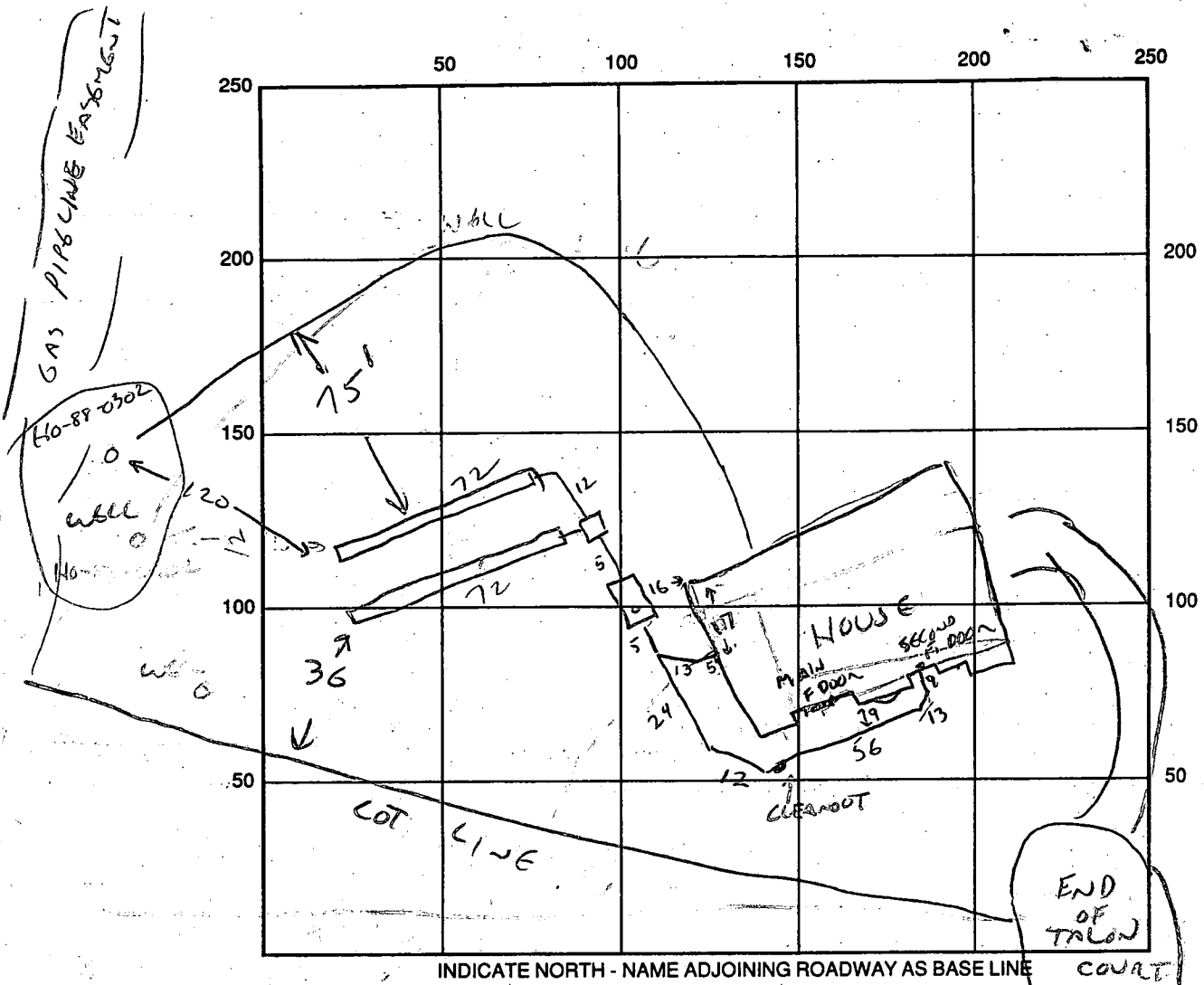
HD-260(6-90)

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

**BUILDING PERMIT SIGNED
AND RETURNED**

8-27-02
800-138084-REBUILD HOUSE
7-15-03-800/42981-46 PROPRANE

A 40046



SEPTIC TANK LEVEL 1250 ✓ CLEANOUTS 57V IN LINE ✓

DISTRIBUTION BOX LEVEL ✓

DRAIN FIELD/TITLE DEPTH 8 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 5 FT. TOTAL LENGTH 144 FT.

NUMBER OF TRENCHES 2 @ 72' ONE SIDEWALL/BOTTOM AREA 720 SQ. FT.

DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA — SQ. FT.

REMARKS: 7/22/93 WELL LOCATION NOT AS PER PLANS. OK TO INSTALL

SYSTEM SLIGHTLY HIGHER ON LOT AND CLOSER TO HOUSE THAN SHOWN

PER BP SITE PLAN IN ORDER TO MAXIMIZE SEPARATION FROM SEPTIC TO WELL

7/23/93 2 HOUSE SEWER CONNECTIONS PRIOR TO TANK

SYSTEM COMPLETE - OK TO COVER. (CW)

DATE SYSTEM APPROVED 7/23/93 INSPECTOR C. Williams

APPLICATION

PERCOLATION TESTING

A 40046

P _____

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

DISTRICT 5D

DATE 9-1-87

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 Smith Roberts & Assoc Eagle Point Landings Partnership

ADDRESS 8307 Main St Ellicott City PHONE 958-9178
465-5855

PROSPECTIVE BUYER N/A

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Talbot Property LOT NO. 13

ROAD AND DESCRIPTION Ten Oaks Rd 5427 Talen Court

TAX MAP 28 PARCEL # 46-A

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. Rein
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

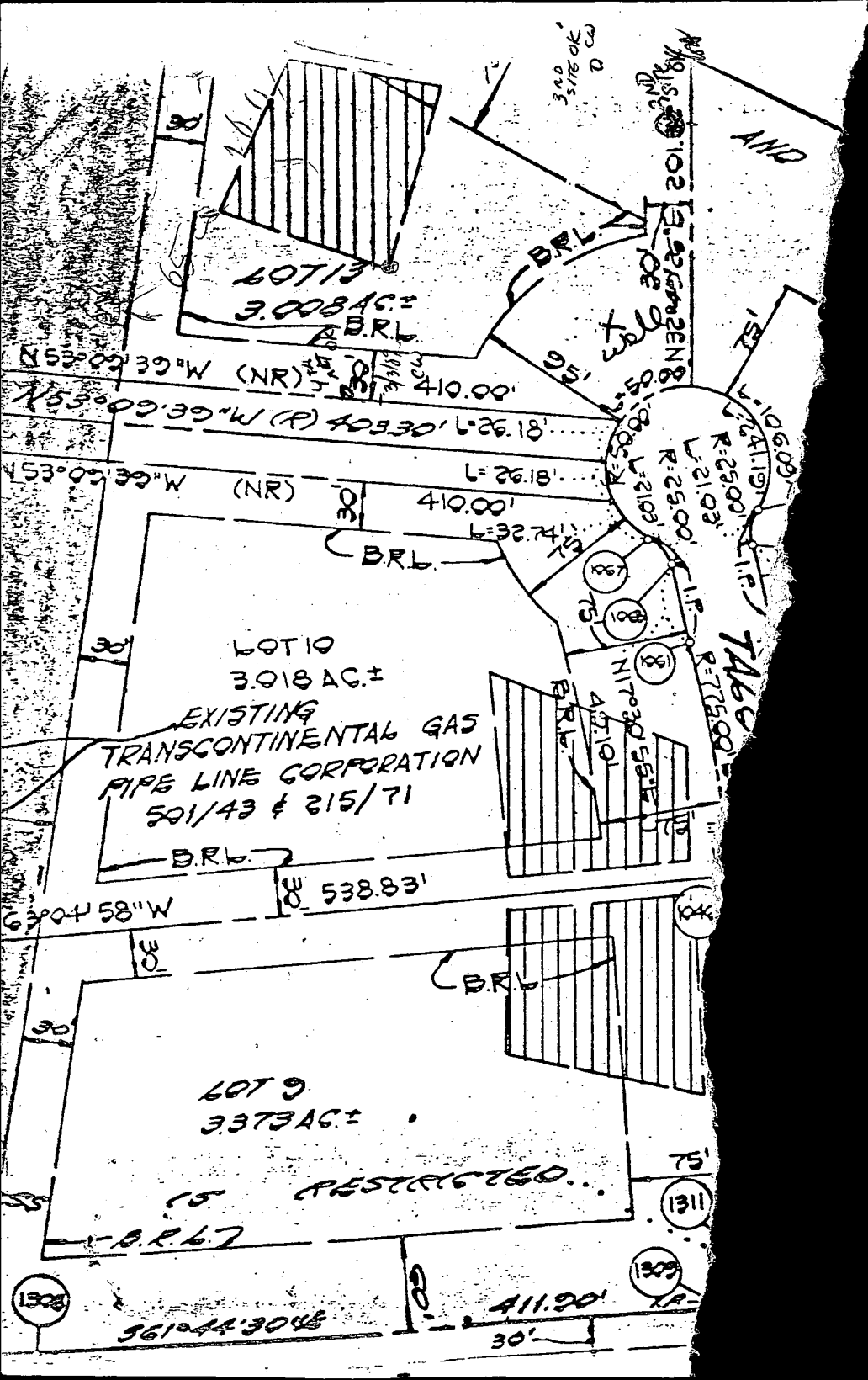
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 10/17/87 Perc OK Held for Plat R/H

11/17/89 Order Plat 2R R/H

BLDG. PERMIT SIGNED
AND RETURNED 12/24/90
Serial # 35843 - SFD
4 Bedroom

THIS IS NOT A PERMIT



C1	6651	SEQUENCE NO. (DENV USE ONLY)	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.
1 2 3 4 5 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)				COUNTY NUMBER <u>A40047</u>

DATE Received	DATE WELL COMPLETED	Depth of Well	PERMIT NO.
<div><div></div><div></div><div></div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div><div></div><div></div><div></div></div> <u>091489</u>	<div><div></div><div></div><div></div><div></div><div></div><div></div></div> <u>205</u> (TO NEAREST FOOT)	FROM "PERMIT TO DRILL WELL" <u>110-88-0302</u>
8 13		22 26	28 29 30 31 32 33 34 35 36 37

OWNER	last name	first name	TOWN
<u>CARROLL</u>		<u>TALL</u>	<u>DENV</u>
STREET OR RFD			
SUBDIVISION	SECTION	LOT <u>13</u>	

WELL LOG Not required for driven wells			GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) <u>Y</u> <u>N</u>			C 3		
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING			TYPE OF GROUTING MATERIAL CEMENT <u>CM</u> BENTONITE CLAY <u>BC</u>			PUMPING TEST		
DESCRIPTION (Use additional sheets if needed)			NO. OF BAGS <u>9</u> NO. OF POUNDS <u>700</u>			HOURS PUMPED (nearest hour) <u>6</u>		
FEET FROM TO			GALLONS OF WATER <u>54</u>			PUMPING RATE (gal. per min. to nearest gal.) <u>3</u>		
Check if water bearing			DEPTH OF GROUT SEAL (to nearest foot) from <u>0</u> ft. to <u>35</u> ft. (enter 0, if from surface)			METHOD USED TO MEASURE PUMPING RATE <u>Buck +</u>		
Top Soil 0 2			CASING RECORD			WATER LEVEL (distance from land surface) BEFORE PUMPING <u>35</u>		
Shale 2 70			casing types insert appropriate code below			WHEN PUMPING <u>100</u>		
Mika 30 55			<u>ST</u> <u>CO</u> STEEL CONCRETE			TYPE OF PUMP USED (for test)		
Sandstone 55 60			<u>PL</u> <u>OT</u> PLASTIC OTHER			<u>A</u> air <u>P</u> piston <u>T</u> turbine		
Mika 60 70			MAIN: Nominal diameter Total depth CASING top (main) casing of main casing TYPE (nearest inch) (nearest foot)			<u>C</u> centrifugal <u>R</u> rotary <u>O</u> other (describe below)		
Sandstone 70 75			<u>PL</u> <u>6</u> <u>40</u>			<u>J</u> jet <u>S</u> submersible		
Mika 75 205			OTHER CASING (if used) diameter depth (feet) inch from to			PUMP INSTALLED		
			EACH CASING			DRILLER WILL INSTALL PUMP YES <u>NO</u>		
			screen type or open hole insert appropriate code below			IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE		
			<u>ST</u> <u>BR</u> <u>HO</u> STEEL BRASS OPEN HOLE			TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE: <u>29</u>		
			<u>PL</u> <u>OT</u> PLASTIC OTHER			CAPACITY: GALLONS PER MINUTE (to nearest gallon) <u>31</u> <u>35</u>		
			C 2			PUMP HORSE POWER <u>37</u> <u>41</u>		
			DEPTH (nearest ft.)			PUMP COLUMN LENGTH (nearest ft.) <u>43</u> <u>47</u>		
			<u>H0</u> <u>35</u> <u>170</u>			CASING HEIGHT (circle appropriate box and enter casing height)		
			EACH SCREEN			<u>+</u> above } LAND SURFACE <u>-</u> below } (nearest foot)		
			SLOT SIZE 1 2 3					
			DIAMETER OF SCREEN <u>56</u> <u>60</u> (NEAREST INCH)					
			from to					
			GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68					
			OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)					
			T (E.R.O.S.) WQ					
			70 72 74 75 76					
			TELESCOPE CASING LOG INDICATOR OTHER DATA					

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			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)		
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.			Linden Church		
DRILLERS IDENT. NO. <u>453</u>			TOWN <u>Town</u>		
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)			210'		
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)					

COUNTY

FIRST FLOOR ELEV	580.0
BSMT FLOOR ELEV.	571.0
INV. OUT OF HOUSE ELEV.	573.50
SEPTIC TANK -	
EXIST. GROUND ELEV.	573.15
INV. IN	572.90
INV. OUT	572.65
DISTRIBUTION BOX -	
EXIST. GROUND ELEV.	575.25
INV. IN	572.25
WELL	
EXIST. GROUND ELEV.	576.0

LOT 13

5427 TALON Ct, Clarksville

"EAGLE POINT LANDING"

PLAT REFERENCE #7962

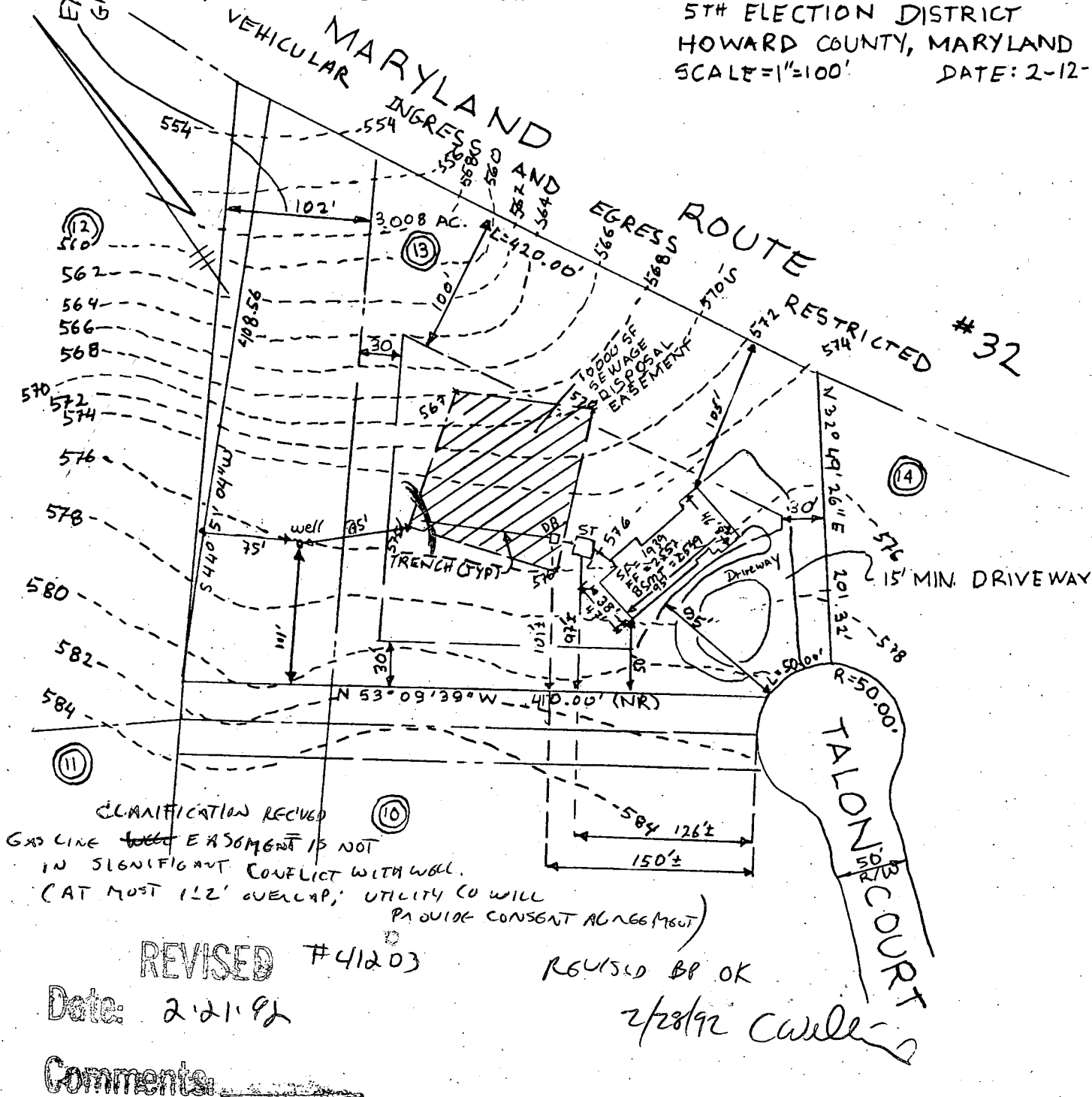
TAX MAP # 28 P/O PARCEL # 388

5TH ELECTION DISTRICT

HOWARD COUNTY, MARYLAND

SCALE = 1" = 100'

DATE: 2-12-92



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

HOWARD COUNTY
PERMIT APPLICATION

PERMIT NUMBER
300138081

Building Address5427 Talon Ct

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

Census Tract10510SubdivisionEagle Point/Landing

SectionAreaLot13

Tax Map28Parcel288Grid21

ZoningRRMOMap CoordinatesLot size

Existing UseVacant Lot - House Banded

Proposed UseNew Single Family Home

Estimated Construction Cost\$504,000

Description of Work

Occupant or Tenant

Contact Name

Address

CityStateZip Code

PhoneFax

Property Owner's NameXAVIER GLAMKOW

Address5427 TALON CT

CityDAYTONStateMDZip Code

Home Phone410-531-5294Work Phone301-671-0789

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

PhoneFax

Contractor CompanyOwner -

Contact Person

Address

CityStateZip Code

License No.

PhoneFax

Engineer or Architect Company

Contact Person

Address

CityStateZip Code

PhoneFax

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics

Utilities

Building Characteristics

Utilities

Height:

No. of stories:

Gross area, sq. ft. per floor:

Use group:

Construction type:

Reinforced Concrete

Structural Steel

Masonry

Wood Frame

State Certified Modular

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

Full

Partial

Other Suppression

of Heads

SF Dwelling Depth

SF Townhouse Width

1st floor:

2nd floor:

Basement:

Finished Basement Unfinished Basement

Crawl space Slab on Grade

No. of Bedrooms4

Multi-family dwellings:

No. of efficiency units:

No. of 1 BR units:

No. of 2 BR units:

No. of 3 BR units:

Other Structure:

Dimensions:

Footings:

Roof:

State Certified Modular

Manufactured Home

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

Xavier Glamkow

Applicant's Signature

Print Name

Title/Company

Date

Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

** PLEASE WRITE NEATLY AND LEGIBLY **

FOR OFFICE USE ONLY

AGENCYDATESIGNATURE APPROVAL

DPZ SETBACK INFORMATION

PROPERTY ID#

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

Distribution of Copies

White: Building Official

Green: LDD, DPZ

Yellow: DED, DPZ

Pink: Health

Gold: SHA

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

Filing fee

Permit fee

Excise tax

Add'l per. fee

TOTAL FEES

Sub-total paid

Balance due

Check

Validation

Accepted by

T:\forms\PERMIT.FRM

Rev: 5/17/00

EXISTING TRANSCONTINENTAL
GAS PIPE LINE CORPORATION
501/43 / 215/71

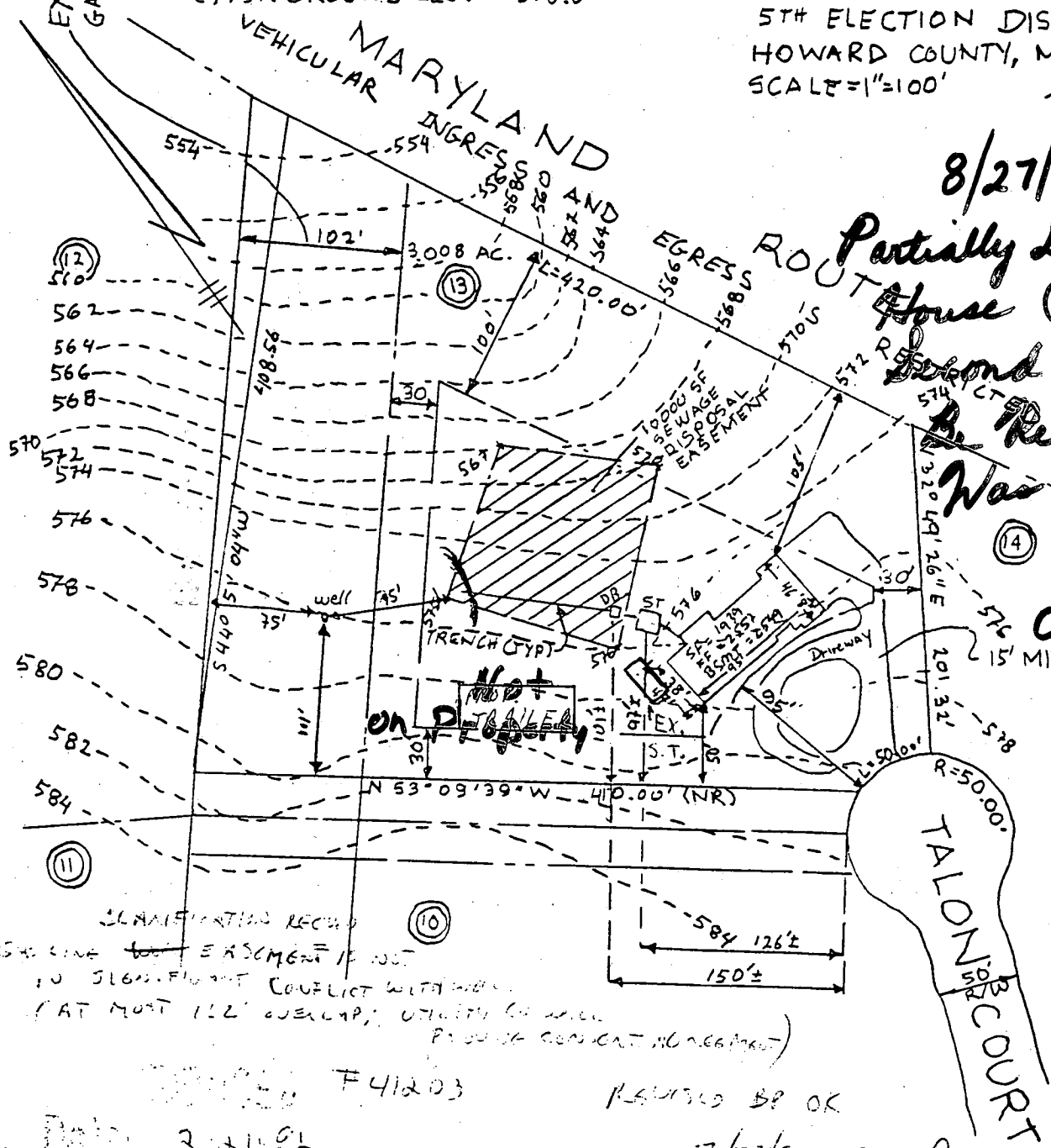
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Xaver & Cynthia Gramkow
LOT 13
5427 TALON Ct, Clarksville
"EAGLE POINT LANDING"
PLAT REFERENCE #7962
TAX MAP #28 P/B PARCEL #388
5TH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
SCALE = 1" = 100' DATE: 2-12-92

8/27/02

Partially Destroyed
House (Mostly
Second Floor) to
Be Rebuilt as
Was Before

14
True
O.K. (BB)
15' MIN. DRIVEWAY



F41203

PLANNED BY OK

Date: 2-21-92

2/23/92 CWL

Comments: