

B	1	2024	SEQUENCE NO. (WRA USE ONLY)	STATE OF MARYLAND WATER RESOURCES ADMINISTRATION TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401 APPLICATION FOR PERMIT TO DRILL WELL	WRA PERMIT NUMBER HO-2583438
<small>1 2 3 (SEQ. NO.) 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)</small>				FILL IN THIS FORM COMPLETELY	

DATE RECEIVED (WRA USE ONLY)	OWNER <u>Adel</u> Richard <small>COL 15 LAST NAME FIRST NAME COL. 34</small>				
	STREET OR RFD <u>1420 MARRIOTTSVILLE ROAD</u> <small>COL 36 COL. 55</small>				
	POST OFFICE <u>MARRIOTTSVILLE MARYLAND 21104</u> <small>COL 57 COL. 76</small>				

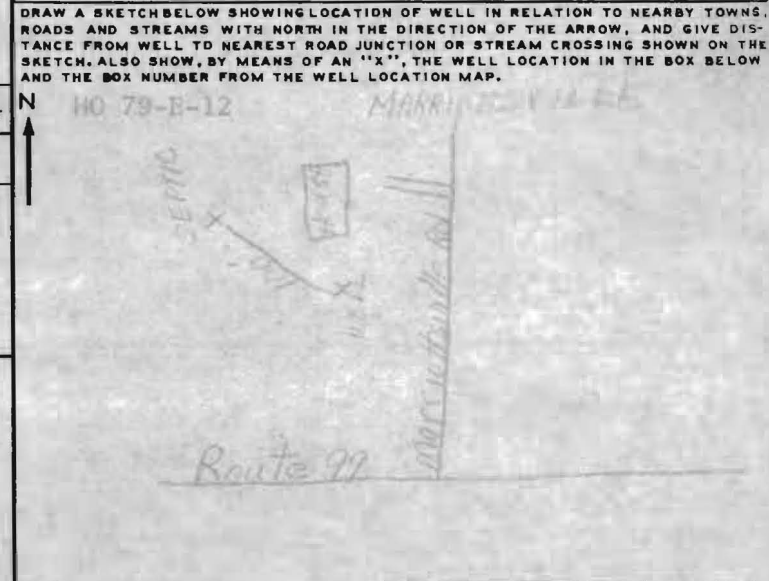
B	1	CONTINUED	DRILLER INFORMATION
<small>1 2 3 (SEQ. NO.) 6</small>			
DATE <u>9/9/79</u>		LICENSE NUMBER <u>231</u>	
<u>Jack C. Harley & Son</u>		<u>77</u> <u>80</u>	
FIRST NAME		DRILLER	
SIGNATURE _____			

B	3	LOCATION OF WELL
<small>1 2 3 (SEQ. NO.) 6</small>		
COUNTY <u>Howard</u>		<small>21</small>
SUBDIVISION _____		<small>23</small> <small>42</small>
SECTION _____		<small>44</small> <small>46</small> <small>48</small> <small>50</small>
NEAREST TOWN <u>MARRIOTTSVILLE</u>		<small>52</small> <small>71</small>
MILES FROM TOWN (ENTER 0 IF IN TOWN) _____		<small>73</small> <small>76</small> <small>77</small> <small>78</small>

B	2	WELL INFORMATION
<small>1 2 3 (SEQ. NO.) 8</small>		
MAXIMUM PUMPING RATE (GALLONS PER MINUTE) _____		<small>8</small> <small>12</small>
AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) <u>750</u>		<small>14</small> <small>20</small>
USE FOR WATER (CIRCLE APPROPRIATE BOX)		
<input type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)		
<input type="checkbox"/> FARMING, AGRICULTURE, IRRIGATION		
<input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT.		
<input checked="" type="checkbox"/> MUNICIPAL WATER SUPPLY		
<input type="checkbox"/> PRIVATE WATER COMPANY		
<input type="checkbox"/> TEST		

B	4	DIRECTION FROM TOWN
<small>1 2 3 (SEQ. NO.) 6</small>		
(CIRCLE APPROPRIATE BOX)		
<input type="checkbox"/> NORTH <input type="checkbox"/> EAST <input type="checkbox"/> N E NORTHEAST <input type="checkbox"/> S E SOUTHEAST <input checked="" type="checkbox"/> SOUTH <input type="checkbox"/> WEST <input type="checkbox"/> N W NORTHWEST <input type="checkbox"/> S W SOUTHWEST		
NEAR WHAT ROAD <u>MARRIOTTSVILLE ROAD</u>		
<small>11</small> NORTH SOUTH EAST WEST <small>30</small> ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <small>32</small>		
DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) <u>45</u> <small>34</small> <small>37</small> <small>38</small> <small>39</small>		

APPROXIMATE DEPTH OF WELL <u>300</u> FEET	
APPROXIMATE DIAMETER OF WELL _____ (NEAREST INCH)	
METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)	
<input checked="" type="checkbox"/> BORED (OR AUGERED) <input type="checkbox"/> JETTED <input type="checkbox"/> DRIVEN <input checked="" type="checkbox"/> AIR-ROTARY <input type="checkbox"/> AIR-PERCUSSION <input type="checkbox"/> ROTARY (HYDRAULIC ROTARY) <input type="checkbox"/> CABLE <input type="checkbox"/> REVERSE-ROTARY <input type="checkbox"/> DRIVE-POINT	
OTHER (DESCRIBE) _____	



REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)	
<input type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL	
<input checked="" type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED	
<input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY	
<input type="checkbox"/> THIS WELL WILL DEEPEIN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) _____	

NOT TO BE FILLED IN BY DRILLER (WRA USE ONLY)	
APPROPRIATION PERMIT NUMBER _____	ENGINEER REVIEW DISTRICT NO. _____
FORCE _____	CONDITIONS _____


BOX NUMBER E _____ N <u>540</u>	NORTH COORDINATE _____ EAST COORDINATE _____ ELEVATION AT WELL HEAD (FEET) _____
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B	4	HEALTH DEPARTMENT APPROVAL
<small>1 2 3 (SEQ. NO.) 6</small>		
STATE HEALTH (CIRCLE BOX) <input checked="" type="checkbox"/>		COUNTY NAME <u>Howard</u> COUNTY NO. <u>130167</u>
DATE _____		APPROVED BY <u>Fred Frommelt Sanitarian</u>

B	5	SPECIAL CONDITIONS 8-63 (WRA USE ONLY)
<small>1 2 3 (SEQ. NO.) 6</small>		

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	Maryland Department of Assessments and Taxation HOWARD COUNTY Real Property Data Search	Go Back View Map New Search
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Account Identifier: District - 03 Account Number - 282538

Owner Information

Owner Name: MIHM ANDREW C
 MIHM JOY E

INDEXED

Use: RESIDENTIAL
Principal Residence: YES
Deed Reference: 1) / 1891/ 81
 2) / 1891/ 83

Mailing Address: 1420 MARRIOTTSVILLE RD
 MARRIOTTSVILLE MD 21104-1333

Location & Structure Information

Premises Address
 1420 MARRIOTTSVILLE RD.
 MARRIOTTSVILLE 21104

Zoning
 RCDEO

Legal Description
 1.01 A
 1420 MARRIOTTSVILLE RD
 MARRIOTTSVILLE

Map	Grid	Parcel	Sub District	Subdivision	Section	Block	Lot	Group	Plat No:
10	16	132						80	Plat Ref:

Special Tax Areas

Primary Structure Built	Enclosed Area	Property Land Area	County Use
1945	2,112 SF	1.01 AC	

Stories	Basement	Type	Exterior
2	YES	STANDARD UNIT	SIDING

Town Ad Valorem Tax Class NO A/V, NO M/P, RURAL FIRE TAX

Value Information

	Base Value	Phase-in Assessments		
		Value As Of 01/01/2001	As Of 07/01/2002	As Of 07/01/2003
Land:	80,100	90,100		
Improvements:	65,750	69,560		
Total:	145,850	159,660	155,056	159,660
Preferential Land:	0	0	0	0

Transfer Information

Seller: BASSLER HUNT PARTNERSHIP Type: IMPROVED ARMS-LENGTH	Date: 09/28/1988 Deed1: / 1891/ 81	Price: \$113,000 Deed2: / 1891/ 83
Seller: AUVIL RICHARD Type: IMPROVED ARMS-LENGTH	Date: 09/28/1988 Deed1:	Price: \$113,000 Deed2:
Seller: Type:	Date: Deed1:	Price: Deed2:

Exemption Information

Partial Exempt Assessments	Class	07/01/2002	07/01/2003
County	000	0	0
State	000	0	0
Municipal	000	0	0

Tax Exempt: NO
Exempt Class:

Special Tax Recapture:

* NONE *

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