

Building Address: 1547 Long Center Road
Mount Airy, MD 21771

Suite/Apt. # N/A SDP/WP/BA #: N/A

Census Tract: 6041001 Subdivision: _____

Section: _____ Area: _____ Lot: _____

Tax Map: 6 Parcel: 93(1/2) Grid: _____

Zoning: RC-200 Map Coordinates: 2-C12 Lot Size: 1.5216

Property Owner's Name: Ma... ..

Address: 5775

City: Ellicott City State: MD Zip Code: 21041

Home Phone: 410 196 2023 Work Phone: _____

Applicant's Name & Mailing Address, (If other than stated herein): _____

Phone: _____ Fax: 410 196 1111

Email: _____

Existing Use: Residential

Proposed Use: SFU

Estimated Construction Cost: \$ 133,000

Description of Work: Re-1

Contractor Company: ...

Contact Person: ...

Address: ...

City: Ellicott City State: MD Zip Code: 21041

License No.: ...

Phone: 410 196 1111 Fax: ...

Email: _____

Occupant or Tenant: N/A

Was tenant space previously occupied? Yes No

Contact Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

Engineer/Architect Company: ...

Responsible Design Prof.: ...

Address: ...

City: Ellicott City State: MD Zip Code: 21041

Phone: 410 833 8720 Fax: _____

Email: _____

BUILDING DESCRIPTION - COMMERCIAL	
Building Characteristics	Utilities
Height:	<u>Water Supply</u>
No. of stories: <u>2</u>	<input type="checkbox"/> Public
Gross area, sq. ft./floor: <u>237</u>	<input checked="" type="checkbox"/> Private
	<u>Sewage Disposal</u>
Area of construction (sq. ft.):	<input type="checkbox"/> Public
	<input checked="" type="checkbox"/> Private
Use group:	Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Gas: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<u>Construction type:</u>	<u>Heating System</u>
<input type="checkbox"/> Reinforced Concrete	<input checked="" type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Masonry	<u>Sprinkler System:</u>
<input checked="" type="checkbox"/> Wood Frame	<input checked="" type="checkbox"/> N/A
<input type="checkbox"/> State Certified Modular	<input type="checkbox"/> Full
	<input type="checkbox"/> Partial
	<input type="checkbox"/> Other Suppression
	No. of Heads: _____

BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics	Utilities
<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>
<u>Depth</u> <u>Width</u>	<input type="checkbox"/> Public
1 st floor: <u>...</u>	<input checked="" type="checkbox"/> Private
2 nd floor: <u>...</u>	<u>Sewage Disposal</u>
Basement: <u>...</u>	<input type="checkbox"/> Public
<input type="checkbox"/> Finished Basement	<input checked="" type="checkbox"/> Private
<input checked="" type="checkbox"/> Unfinished Basement	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Crawl Space	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Slab on Grade	<u>Heating System</u>
No. of Bedrooms: <u>4</u>	<input checked="" type="checkbox"/> Electric
<u>Multi-family Dwelling</u>	<input type="checkbox"/> Oil
No. of efficiency units:	<input type="checkbox"/> Natural Gas
No. of 1 BR units:	<input type="checkbox"/> Propane Gas
No. of 2 BR units:	
No. of 3 BR units:	
Other Structure:	
Dimensions:	
Footings:	
Roof:	
<input type="checkbox"/> State Certified Modular	
<input type="checkbox"/> Manufactured Home	

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.

Applicant's Signature: _____

Email Address: _____

Title/Company: _____

Print Name: _____

Date: 11/12/10

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
 PLEASE WRITE NEATLY & LEGIBLY
 -FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	<u>11/7/10</u>	<u>...</u>
Fire Protection		

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: _____

Filing Fee	\$
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$

Is Sediment Control approval required for issuance? Yes No
 CONTINGENCY CONSTRUCTION START
 ONE STOP SHOP

ROBERT H. VOGEL ENGINEERING, INC.
ENGINEERS • SURVEYORS • PLANNERS

February 10, 2011

Mr. Robert Bricker
Howard County Health Department
Well and Septic Program
7178 Columbia Gateway Drive
Columbia, Maryland 21046

Re: 1564 Long Corner Road

Dear Robert,

In accordance with our previous meeting concerning the referenced property and building permit B10001963, we prepared the attached exhibit locating a replacement well. The existing well is approximately 17' from the existing house and would be approximately 7' from the proposed addition.

The attached exhibit shows that a replacement well cannot meet all separation criteria utilizing the revised private sewerage easement recently recorded in conjunction with Paragon Property, Lot 4. The original easement configuration allows approximately 5 additional feet between the sewerage easement and the subject property.

The proposed well location constraints include:

1. Lot 4 Paragon Property 100' separation to septic easement.
2. Lot 2 Windsor Forest Knolls 100' separation to septic easement.
3. Septic tank for existing house 100' separation.
4. 30' proposed well to proposed house addition.

The above criteria could be accomplished based on the original septic easement established for Paragon Property Parcel A. However, the recent change in the septic area for Paragon Property Lot 4 requires that we request a reduction to the 100' separation between proposed well and septic to 94'. All other parameters can be accommodated.

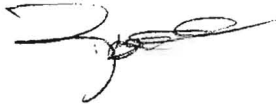
8407 Main Street • Ellicott City • Maryland 21043
Tel 410.461.7666 • Fax 410.461.8961

Mr. Robert Bricker
February 10, 2011
Page Two

In the event that this reduction is not approved we respectfully request the Health Department pursue restoring the north side of the Paragon Property Lot 4 sewerage easement to its previous location, thereby providing a suitable well replacement location for the subject property.

Should you have any questions regarding this matter, please do not hesitate to contact this office.

Sincerely,
ROBERT H. VOGEL ENGINEERING, INC.

A handwritten signature in black ink, appearing to read 'R. Vogel', with a stylized flourish at the end.

Robert H. Vogel, P.E.
President

RHV:mcb

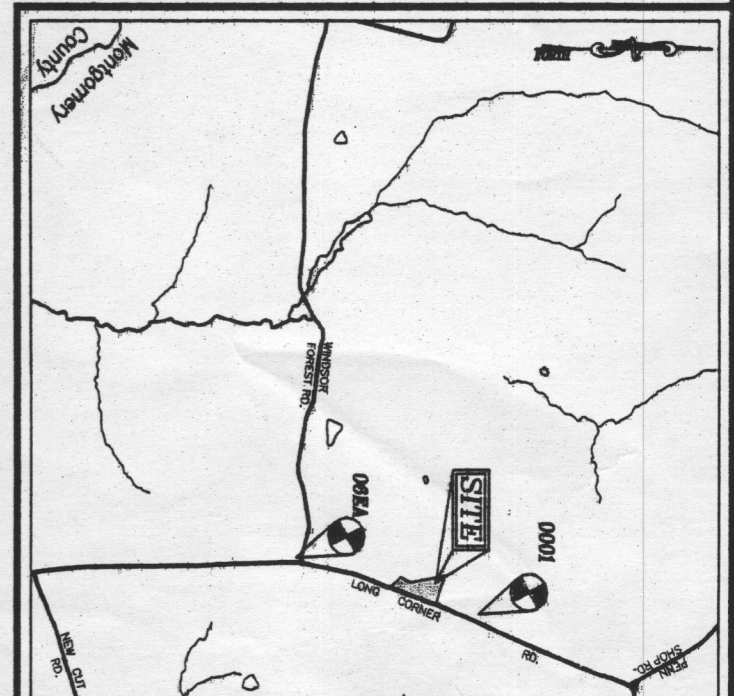
cc: Mr. Joseph Snodgrass

GENERAL NOTES:

1. THE BOUNDARY AND TOPO SHOWN HEREON ARE BASED ON A FIELD SURVEY.
2. THIS PLAN IS SUBJECT TO ANY AND ALL RECORD PLATS, DEEDS, EASEMENTS, RIGHTS-OF-WAY TO 35'.
3. THE PROPOSED LIMIT OF DISTURBANCE IS 4.96067' THEREFORE STORMWATER MANAGEMENT IS NOT REQUIRED FOR THIS SITE.
4. THIS PROPERTY IS ZONED RC-DEO.
5. EXISTING WELL TAG # HO-95-1884, HAS BEEN FIELD LOCATED AND IS ACCURATELY SHOWN.

BENCHMARKS

HOWARD COUNTY BENCHMARK 0001 (CONCRETE MONUMENT)
 N 607303.2145 E 1268306.1185 ELEV. 812.778
 HOWARD COUNTY BENCHMARK 005A (CONCRETE MONUMENT)
 N 605662.2772 E 1267924.3235 ELEV. 785.452



LEGEND

	RIGHT-OF-WAY
	ADJACENT BOUNDARY LINE
	EXISTING EASEMENT
	EXISTING WATER LINE
	EXISTING SEWER LINE
	EXISTING OVERHEAD LINES
	EXISTING 10' CONCRETE
	EXISTING 2' CONCRETE
	FIELD OBSERVATION
	PROPOSED WELL LOCATION
	EXISTING WELL LOCATION
	PROPOSED WELL LOCATION
	PROPOSED WELL LOCATION



NOTE: EXISTING WELL TAG # HO-95-1884, HAS BEEN FIELD LOCATED AND IS ACCURATELY SHOWN.

SOILS LEGEND

SOIL	NAME	SLOPE	CLASSIFICATION
MIS2	MT AFT CHANNERY LOAM	3% - 8% MODERATELY ERODED	A

PLAN VIEW

SCALE: 1" = 30'

1540 LONG CORNER ROAD

ROBERT H. VOGEL ENGINEERING, INC.
 ENGINEERS • SURVEYORS • PLANNERS
 8407 MAIN STREET, MD 21043
 TEL: 410-481-7556
 FAX: 410-481-7556

DESIGN BY: RHV
 DRAWN BY: JCO
 CHECKED BY: RHV
 DATE: DECEMBER 2010
 SCALE: 1" = 30'
 W.O. NO.: 043305

DEVELOPER
 MAIN STREET BUILDERS
 5705 LANDING ROAD
 ELKRIORCE, MARYLAND 21075
 (410) 798-2003

