

PUB. SEWER STATUS VERIFIED BY _____

ISSUE DATE: 10/01/2004

PERMIT

P 521515

APPROVAL DATE: 10/1/04

A 518555

TAXID # 04-363108
**ON-SITE SEWAGE DISPOSAL SYSTEM
HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH**

E. Randolph Marriner IS PERMITTED TO INSTALL ALTER

ADDRESS: 3700 Cattail Greens Court, Glenwood PHONE NUMBER: 410-215-4001

SUBDIVISION: Specht Property LOT NUMBER: TM 21, Parcel 14

ADDRESS: 4401 Jennings Chapel Road PROPERTY OWNER: E. Randolph Marriner

SEPTIC TANK CAPACITY (GALLONS): 1250

PUMP CHAMBER CAPACITY (GALLONS): _____

NUMBER OF BEDROOMS: 4

SQUARE FEET PER BEDROOM: 180

LINEAR FEET OF TRENCH REQUIRED: _____

EX TRENCHES: <u>N/A</u>	Trench to be _____ feet wide. Inlet _____ feet below original grade. Bottom maximum depth _____ feet below original grade. Effective area begins at _____ feet below original grade. _____ feet of stone below distribution pipe.
LOCATION:	Connect new tank to ex. distribution box by gravity. No significant trench work required.
PURPOSE:	Pump and remove <u>call-in</u> existing septic tank. Verify end of high trench is at least 20' to proposed pool location. Remove any portion of trench less than 20' to proposed pool location.

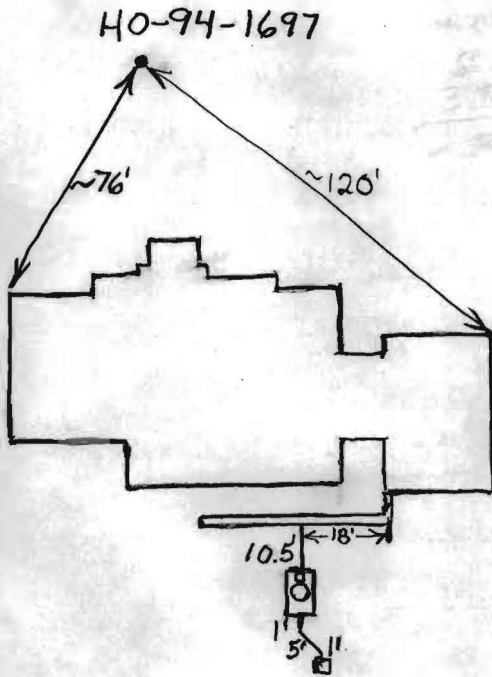
PLANS APPROVED: MER / KN DATE: 6/25/04

- NOTE: PERMIT VOID AFTER 2 YEARS
- NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
- NOTE: WATERTIGHT SEPTIC TANKS REQUIRED
- NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL
- NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS

NEITHER THE HOWARD COUNTY COUNCIL OR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

1518555

NOT TO SCALE



TRENCH/DRAINFIELD DATA

WIDTH	INLET	BOTTOM
_____	_____	_____
NUMBER OF TRENCHES _____		
TOTAL LENGTH _____		
ABSORPTION AREA _____		
DISTRIBUTION BOX LEVEL _____		
DISTRIBUTION BOX BAFFLE _____		
DISTRIBUTION BOX PORT _____		

SEPTIC TANK DATA

SEPTIC TANK 1 LEVEL

CAPACITY 1250 GAL

SEAM LOC Top

TANK LID DEPTH ~1 1/2'

BAFFLES Yes

BAFFLE FILTER No

MANHOLE LOC Middle

6" PORT LOC Front

WATERTIGHT TEST No

SEPTIC TANK 2 LEVEL N/A

CAPACITY _____ GAL

SEAM LOC _____

TANK LID DEPTH _____

BAFFLES _____

BAFFLE FILTER _____

MANHOLE LOC _____

6" PORT LOC _____

WATERTIGHT TEST _____

ROAD

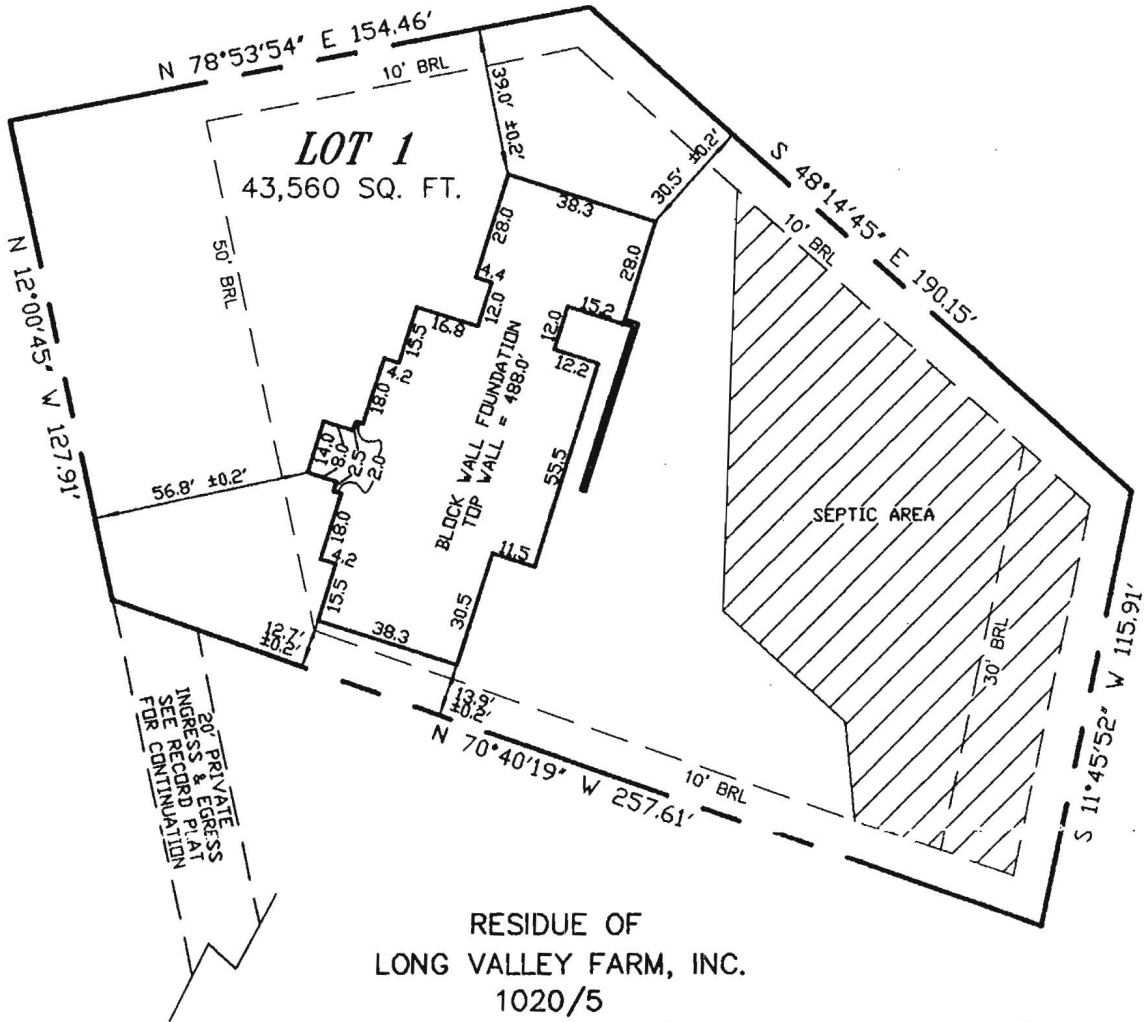
PRE-CONSTRUCTION 9/13/04 - Met w/ Builder, D.B. is 25' off house wall. SRA staked. Proposed pools appear to be 20'

INSTALLATION off corner stake. Keep S.T. 10' off wall. (50)

10/1/04 Old tank pumped out and filled in per builder. New tank installed and connected to house and distribution box. (BB)

FINAL INSPECTOR B. Baker DATE OF APPROVAL 10/1/04

RESIDUE OF
LONG VALLEY FARM, INC.
1020/5



RESIDUE OF
LONG VALLEY FARM, INC.
1020/5

*10/1/04
Plan to scale
House essent.
no north*

LEGEND

- O/H = OVERHANG
- H/P = HEAT PUMP/AIR COND.
- G/M = GAS METER
- E/M = ELECTRIC METER
- F/P = FIREPLACE
- B/W = BAY WINDOW
- D/W = DRIVEWAY
- CONC = CONCRETE

LOT 1

SPECHT PROPERTY

TAX MAP 21 PARCEL 14

PLAT NO. 13864-13865
ELECTION DISTRICT No. 4
HOWARD COUNTY, MARYLAND

ADDRESS: #4401 JENNINGS CHAPEL ROAD

THE INFORMATION SHOWN HAS BEEN ESTABLISHED BY CURRENT ACCEPTABLE SURVEY PROCEDURES AND FROM AVAILABLE RECORD INFORMATION. THIS DRAWING IS TO BE USED FOR TITLE TRANSFER FINANCING, OR REFINANCING ONLY AND IS NOT TO BE USED FOR THE ESTABLISHMENT OF PROPERTY LINES, LOCATION OF FENCES, GARAGES, BUILDINGS, OR OTHER EXISTING OR FUTURE IMPROVEMENTS.

**MILDENBERG
BOENDER, & ASSOC., INC.**

Engineers Planners Surveyors
5072 Dorsey Hall Drive, Suite 202, Ellicott City, Maryland 21042
(410) 997-0296 Balt. (301) 621-5521 Wash. (410) 997-0298 Fax.



FOUNDATION	DATE: 09/04/04	FINAL	DATE:
DRAWN BY: D.FOGEL	SCALE: 1"=50'		
PROJECT NO.: 99066	LOCATION DRAWING		

JOHN MILDENBERG
PROF. LAND SURVEYOR
MARYLAND No. 10718

**HOWARD COUNTY
PERMIT APPLICATION**

PERMIT NUMBER

B00/48419 *MAN*

13864

Building Address 4401 JENNINGS CHAPEL RD.
BELLEVILLE, MD 20833
Suite/Apt. #: _____ SDP/WP/Petition #: _____
Census Tract 604002 Subdivision Speech Property
Section _____ Area _____ Lot # 1
Tax Map 21 Parcel 14 Grid X 19
Zoning R1D Map Coordinates _____ Lot size 1.00 ACRE

Property Owner's Name E. RANDOLPH MARRINER
Address 3702 CAPITAL QUEENS CT.
City GLENNEED State MD Zip Code 21738
Home Phone 410-442-5544 Work Phone 410-715-1500
Applicant's Name & Mailing Address, (if other than stated hereon): _____
Phone _____ Fax _____

Existing Use RESIDENTIAL - SFD
Proposed Use RESIDENTIAL - SFD
Estimated Construction Cost \$ 1,350,000
Description of Work CONSTRUCTION OF NEW
SINGLE FAMILY 1 WELLING IN EXISTING
LOT 4 BR UNFINISHED BASEMENT W/RT

Contractor Company OWNER
Contact Person _____
Address _____
City _____ State _____ Zip Code _____
License No. _____
Phone _____ Fax _____

Occupant or Tenant OWNER 4 FULL TJS BATH
Contact Name 3 CAL GARLAND
Address 5000 WOODLAWN
City _____ State _____ Zip Code _____
Phone _____ Fax _____

Engineer or Architect Company TERRI REITER
Contact Person TERRI REITER
Address 3929 PLETEK RD.
City MT. AIRY State MD Zip Code 21771
Phone 301-829-4635 Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: _____	Water Supply: _____ Public _____ Private _____
No. of stories: _____	Sewage Disposal: _____ Public _____ Private _____
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ State Certified Modular _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
	Sprinkler system: N/A <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: _____ Public _____ Private <input checked="" type="checkbox"/>
1st floor: <u>4632 SF</u>	Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/>
2nd floor: <u>2800 SF</u>	Electric: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Basement: <u>4036 SF</u>	Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/>	Heating System: _____ Electric <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Sprinkler system: N/A <input checked="" type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____
No. of Bedrooms <u>4</u>	
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 _____	

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.

S. [Signature]
Applicant's Signature
OWNER

E. RANDOLPH MARRINER
Print Name
5-26-04
Date

Title/Company _____

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
** PLEASE WRITE NEATLY AND LEGIBLY. **
- FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official		
Dev. Engineering, DPZ		
Health	<u>6/25/04</u>	<u>Mark [Signature]</u>
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

DPZ SETBACK INFORMATION

Front: 50
Rear: 30
Side: 10
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#: 44012

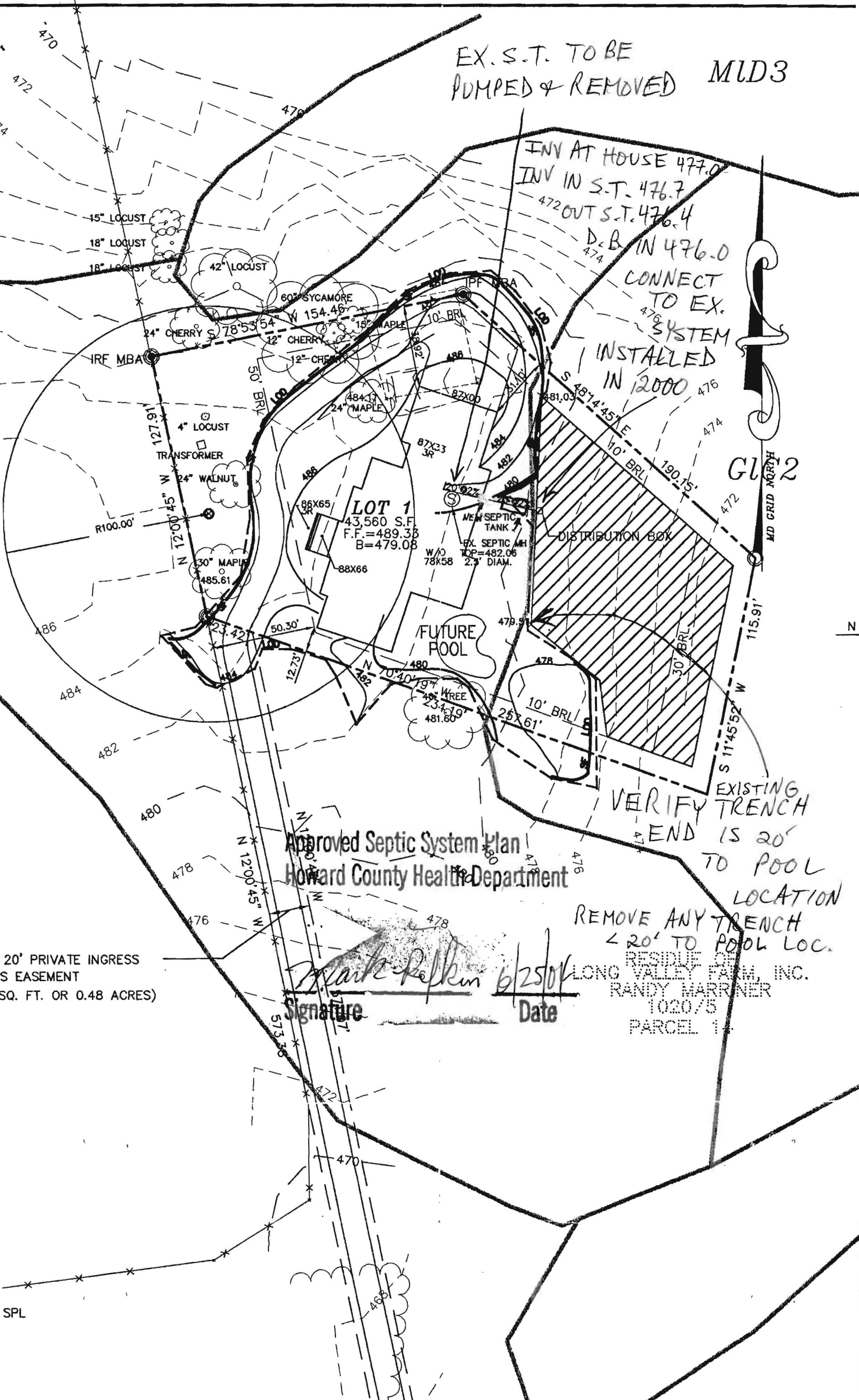
Filing fee \$ 100
Permit fee \$ _____
Excise tax \$ _____
Add'l per. fee \$ _____
TOTAL FEES \$ _____
Sub-total paid \$ _____
Balance due \$ _____
Check # 47654
Validation # 47654

Accepted by GEM

EX. S.T. TO BE PUMPED & REMOVED MLD3

INV AT HOUSE 477.0
INV IN S.T. 476.7
472 OUT S.T. 476.4
D.B. IN 476.0
CONNECT TO EX. SYSTEM INSTALLED IN 2000

GL 2



Approved Septic System Plan
Howard County Health Department

Mark Pelkin 6/25/06
Signature Date

REMOVE ANY TRENCH < 20' TO POOL LOC.
RESIDUE OF
LONG VALLEY FARM, INC.
RANDY MARRNER
1020/5
PARCEL 1

20' PRIVATE INGRESS
EASEMENT
SQ. FT. OR 0.48 ACRES)

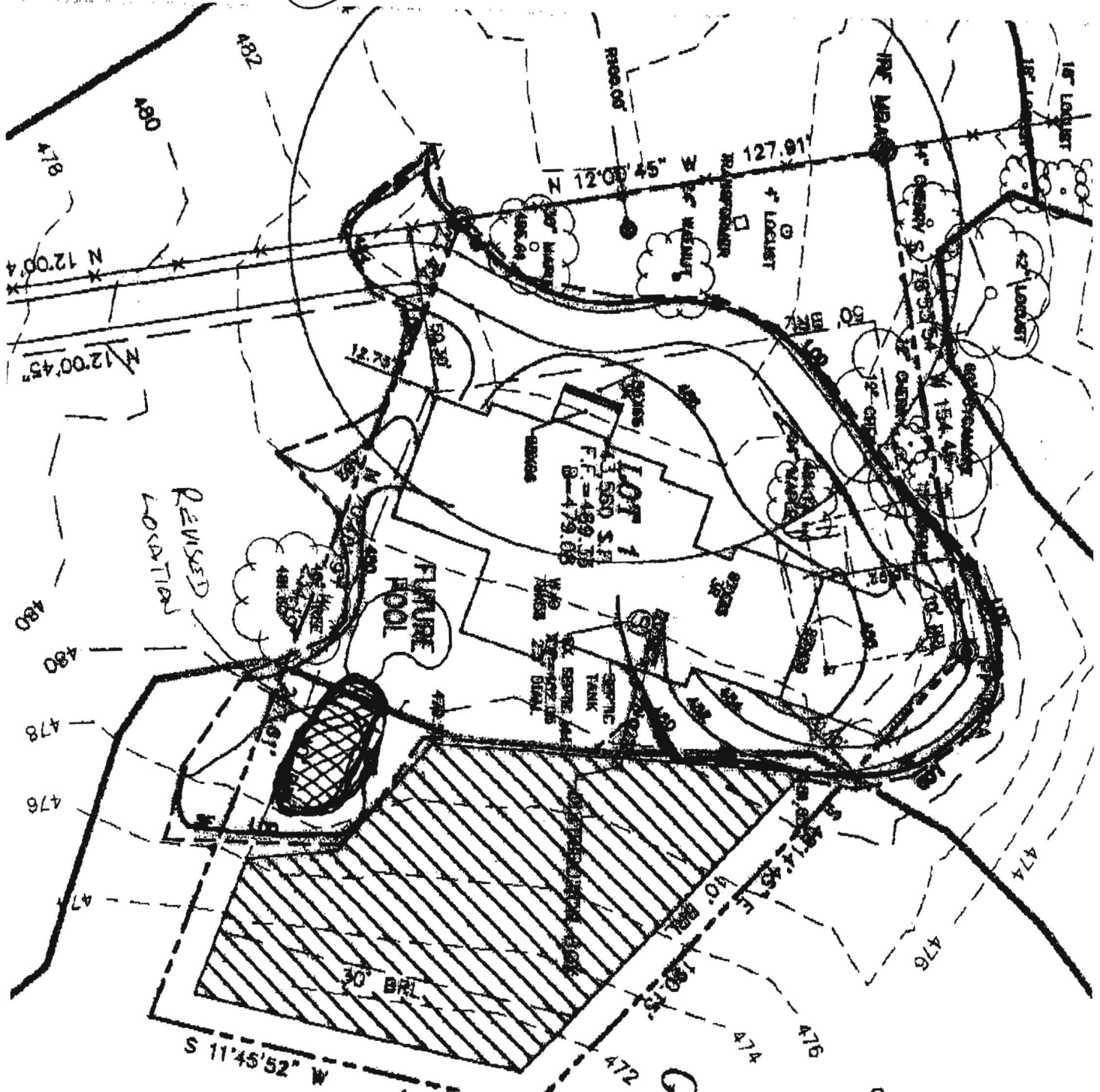
SPL

Bob — NEW POOL LOCATION

8/24/05
Dropped off
prior to
bp for pool
KN

4401 JENNINGS CHAPEL ROAD
MARRINER PROPERTY
REVISED POOL LOCATION

Per Sheet 4
8/24/05



C O V E R

FAX

S H E E T

To: Kacie Noonan
Fax #: 410-313-2648
Subject: 4401 Jennings Chapel Road- Marriner Property
Date: 8-24-05
Pages: 2

COMMENTS:

Dear Kacie:

Attached is a revise site plan for the home site located at 4401 Jennings Chapel Road. As you can see, the pool location has change because of grading requirements and the installation of the porch which will be in the area of the prior pool location. The new pool location is outside the perimeter of the existing approved sewage reserve area. Could you please review and contact me if we can proceed.

Thank you,

Bob Sheesley

From the desk of...

Robert W. Sheesley
Eco Sense, Inc.
8354 Chestnut Farm Lane
Ellicott City, Md 21043
410-750-9925
Fax 410-750-0273