



Building Address: 12960 LINDEN CHURCH ROAD
 City: CLARKSVILLE State: MD Zip Code: 21029
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: _____
 Section: _____ Area: _____ Lot: 1
 Tax Map: _____ Parcel: _____ Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: SFD
 Proposed Use: SFD W/PROPANE TANK
 Estimated Construction Cost: \$ 4,000

Description of Work:
INSTALL 1000 GAL UNDERGROUND PROPANE TANK

Occupant/Tenant Name: OWNER
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Property Owner's Name: RUY GARCIA-ZAMOR
 Address: 12960 LINDEN CHURCH ROAD
 City: CLARKSVILLE State: MD Zip Code: 21029
 Phone: _____ Fax: _____
 Email: _____

Applicant's Name & Mailing Address, (if other than stated herein)
 Applicant's Name: MICHELLE CLANCY
 Address: PO BOX 310
 City: PERRY HALL State: MD Zip Code: 21128
 Phone: 443-610-7514 Fax: _____
 Email: MICHELLE@APPLIEDANDAPPROVED.COM

Contractor Company: HJ POIST
 Contact Person: SEAN UNDERWOOD
 Address: 360 MAIN STREET
 City: LAUREL State: MD Zip Code: 20707
 License No.: 103851
 Phone: 301-725-3232 Fax: _____
 Email: _____

Engineer/Architect Company: CONTRACTOR
 Responsible Design Prof.: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

| Commercial Building Characteristics | Residential Building Characteristics |
|---|---|
| Height: | <input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse |
| No. of stories: | Depth Width |
| Gross area, sq. ft./floor: | 1 st floor: |
| | 2 nd floor: |
| Area of construction (sq. ft.): | Basement: |
| | <input type="checkbox"/> Finished Basement |
| Use group: | <input type="checkbox"/> Unfinished Basement |
| | <input type="checkbox"/> Crawl Space |
| Construction type: | <input type="checkbox"/> Slab on Grade |
| <input type="checkbox"/> Reinforced Concrete | No. of Bedrooms: |
| <input type="checkbox"/> Structural Steel | Multi-family Dwelling |
| <input type="checkbox"/> Masonry | No. of efficiency units: |
| <input type="checkbox"/> Wood Frame | No. of 1 BR units: |
| <input type="checkbox"/> State Certified Modular | No. of 2 BR units: |
| | No. of 3 BR units: |
| | Other Structure: |
| | Dimensions: |
| <input checked="" type="checkbox"/> Roadside Tree Project Permit | Footings: |
| <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Roof: |
| Roadside Tree Project Permit # | <input type="checkbox"/> State Certified Modular |
| | <input type="checkbox"/> Manufactured Home |

| Utilities | |
|---|---|
| Electric: | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Gas: | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Water Supply | |
| <input type="checkbox"/> Public | |
| <input checked="" type="checkbox"/> Private | |
| Sewage Disposal | |
| <input type="checkbox"/> Public | |
| <input checked="" type="checkbox"/> Private | |
| Heating System | |
| <input type="checkbox"/> Electric <input type="checkbox"/> Oil | |
| <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas | |
| <input type="checkbox"/> Other: | |
| Sprinkler System: | |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Grading Permit Number: | |
| Building Shell Permit Number: | |

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:
 MICHELLE@APPLIEDANDAPPROVED.COM
 Email Address
PERMITS
 Title/Company

Print Name: MICHELLE CLANCY
 Date: 12/21/19

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>12/21/19</u> | <u>RA</u> |

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

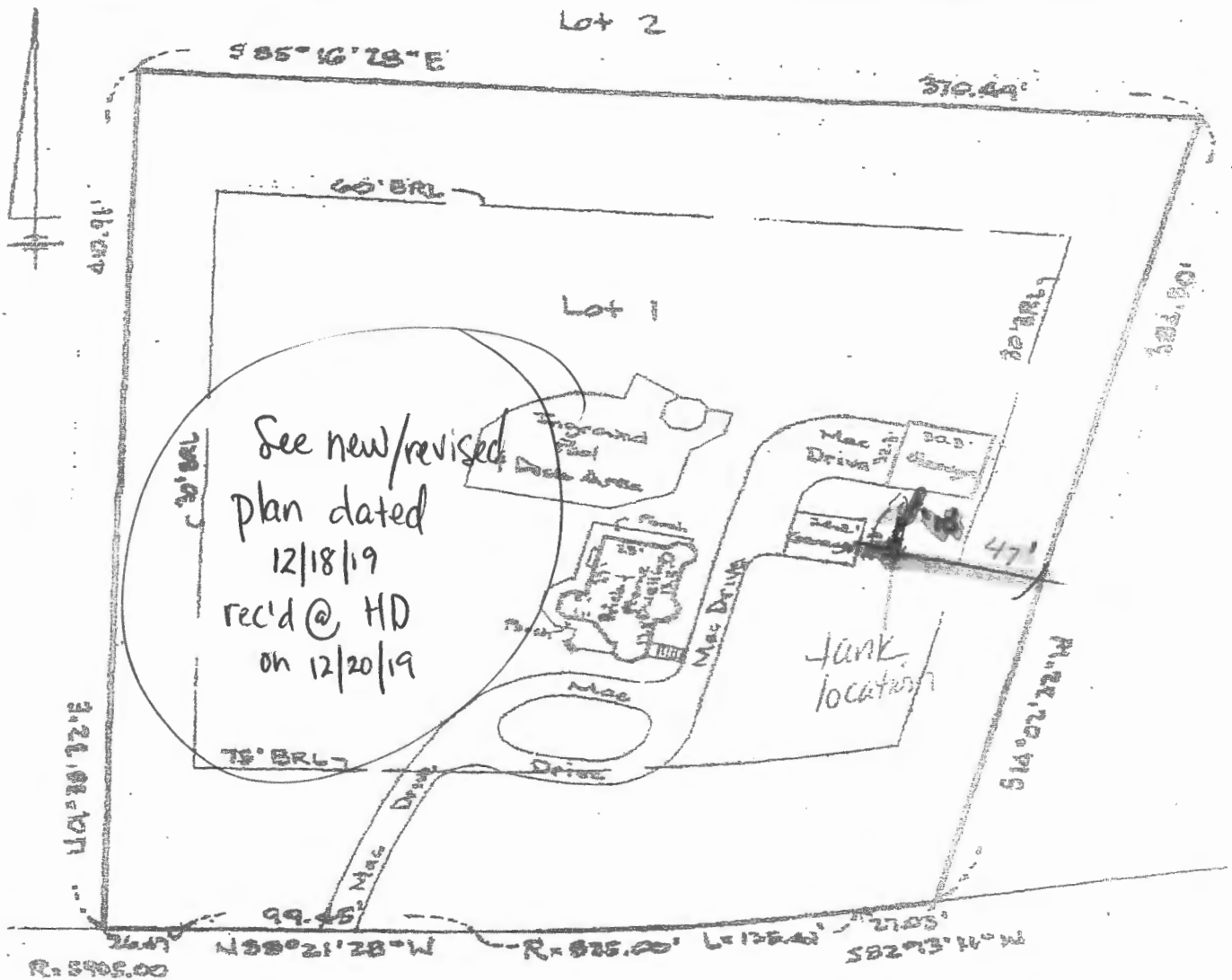
| DPZ SETBACK INFORMATION |
|---|
| Front: |
| Rear: |
| Side: |
| Side St.: |
| All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Lot Coverage for New Town Zone: |
| SDP/Red-line approval date: |

| | |
|---------------------|------------------|
| Filing Fee | \$ |
| Permit Fee | \$ <u>100</u> |
| Tech Fee | \$ <u>10</u> |
| Excise Tax | \$ |
| PSFS | \$ |
| Guaranty Fund | \$ |
| Add'l per Fee | \$ |
| Total Fees | \$ <u>110.00</u> |
| Sub- Total Paid | \$ |
| Balance Due | \$ |
| Check # <u>7354</u> | # |

410-879-5354
222115

HOPKINS ENGINEERING

3653 Harmony Church Road • Havre de Grace, Maryland 21078
410-879-5354 - Phone • 410-893-5185 - Fax



See new/revise
plan dated
12/18/19
rec'd @ HD
on 12/20/19

LINDEN CHURCH ROAD

12960 Linden Church Rd



LOCATION DRAWING

ADDRESS: 12960 LINDEN CHURCH ROAD HOWARD COUNTY MD

DEED REF: 7540/514 PLAT REF: CMP #7391 SUBDIVISION: "TWO WILLS"

LOT: 1 BLOCK: SECTION: C/S SCALE: 1" = 60'

- 1) THIS DRAWING IS OF BENEFIT TO A CONSUMER ONLY INsofar AS IT IS REQUIRED BY A LENDER OR A TITLE INSURANCE COMPANY OR ITS AGENT IN CONNECTION WITH TRANSFER OR FINANCING OF PROPERTY AND HAS BEEN PREPARED FOR TITLE PURPOSES ONLY WITHOUT THE BENEFIT OF A TITLE REPORT.
- 2) THIS DRAWING IS NOT THE PRODUCT OF A BOUNDARY SURVEY AND IS THEREFORE NOT TO BE RELIED UPON FOR THE LOCATION OF FENCES, GARAGES, DRIVES, SIDEWALKS, BUILDINGS OR OTHER EXISTING OR FUTURE IMPROVEMENTS, RELATIVE TO PROPERTY BOUNDARIES.
- 3) THIS DRAWING DOES NOT PROVIDE FOR THE ACCURATE IDENTIFICATION OF PROPERTY BOUNDARY LINES, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING.
- 4) ALL COURSES SHOWN HEREON REFLECT THOSE REFERRED TO IN THE TITLE DEED UNLESS OTHERWISE STATED.
- 5) THIS DRAWING WAS PREPARED UNDER MY RESPONSIBLE CHARGE IN ACCORDANCE WITH MINIMUM STANDARDS FOR MARYLAND SURVEYORS.
- 6) ALL BUILDING STRUCTURES AND OTHER IMPROVEMENTS SHOWN HEREON ARE IN APPROXIMATE RELATION TO THE APPARENT BOUNDARY LINES AND REFLECT AN ACCURACY OF ± 3'

**COMPLETE THIS FORM WHEN DROPPING OFF ANY
CORRESPONDENCE AND/OR PLANS TO THE HOWARD COUNTY
DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS COUNTER:**

Date: 12/17/19

To: Ryan Rappaport
(Person's Name and Division)

From: Michelle Clancy 4436107574
(Your Name, Company Name and Telephone Number)

Subject: Project name _____
Project site address 12960 Linden Church Rd
Permit # B19004191 SDP # _____
Other information pertinent to this project _____

- Please check the attachments below that you are submitting with this transmittal:
- Letter of response to address plan review comment letter
 - Revised plans and/or revised details: When submitting for a complete re-review, **duplicate sets shall be submitted.**
 - Letter Summarizing Changes
 - Energy conservation calculations
 - Copies of Site plans showing wells & septic (be specific)
 - Health Department Request DPZ/ DED Request Applicant's Request
 - Two sets of single family dwelling model plans to be placed on permanent file: Model name and/or # _____
 - Other _____

Contact Person Information: (Required)

Michelle Clancy
Please Print Name

4436107574
Telephone No:

michelle@appliedandapproved.com
E-Mail Address:

PLEASE ASSURE ALL DOCUMENTS AND/OR REVISIONS ARE APPROPRIATELY SIGNED AND SEALED, IF NECESSARY, BY A LICENSED ARCHITECT OR ENGINEER. PLEASE BE ADVISED THAT INSUFFICIENT INFORMATION MAY RESULT IN THE DELAY OF REVIEW BY THE PLANS EXAMINER. THE DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS WILL CONTACT YOU IF THERE IS A PROBLEM. IN ADDITION, ONCE THE BUILDING PERMIT IS APPROVED BY THE PLAN REVIEW DIVISION AND ALL OTHER REQUIRED SIGNATORY AGENCIES, AND THE BUILDING PERMIT IS READY FOR ISSUANCE, THE PERMIT DIVISION WILL NOTIFY THE APPROPRIATE CONTACT PERSON FOR PERMIT PICK UP. ALL PERMIT STATUS INQUIRIES SHALL BE DIRECTED TO THE PERMIT DIVISION AT 410-313-2455. CODE RELATED QUESTIONS AND PLAN REVIEW INQUIRIES SHALL BE DIRECTED TO THE PLAN REVIEW DIVISION AT 410-313-2436. PLEASE ALLOW A MINIMUM OF FIVE (5) WORKING DAYS FOR ANY PLAN SUBMITTALS TO BE REVIEWED. THANK YOU.

Received by XA

CC: P R
DPL
DED
Health A 12/24/19

White-Plan Review / Yellow-Applicant / Pink-Permit Division
t:\Operations\Updated forms\transmit.frm - Rev. 04/2014

3/23/88 om

05-406056

WPI
+ N

PERMIT

P 41246
38265
A 38625

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

DISTRICT 5th

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED

DATE 3/22/88

DATE SYSTEM APPROVED 3/23/88

INSPECTOR RH

C. C. Cissel

IS PERMITTED TO INSTALL ALTER

ADDRESS 14079 Brighton Dam Road, Clarksville, Maryland 21029 PHONE 854-2006

SUBDIVISION Twelve Hills ROAD 12960 Linden Church Rd LOT 1

PROPERTY OWNER Mark Collett

ADDRESS _____

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES NO

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 187 sq. ft. per bedroom. Trench to be 3 feet wide. Inlet 3 1/2 feet below original grade. Bottom maximum depth 5 1/2 feet below original grade. Effective area begins at 3 1/2 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - SHALLOW SYSTEM. Beginning from right front lot corner, place the 1st trench 200 feet down the right (384.50') lot line and 35 feet off the line as seen when facing property from Linden Church Road. Run trenches along contour towards the left (410.91') lot line.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. ok/cw

* SYSTEM TO BE AS NIBN INTO PENC AREA AS POSSIBLE, CW

PLANS APPROVED BY Bert Nixon

DATE 10/02/87

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 4/2/88

Serial # 37332

BLDG. PERMIT SIGNED

AND RETURNED 5/12/88

Serial # 35488

***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1186

A
38265

APPLICATION

PERCOLATION TESTING

A 38265

P _____

*Preliminary
11/9/86
9:30*

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

DISTRICT _____

DATE 12/16/86

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 ~~Hugh B. Hill Jr~~ Mark Collett

ADDRESS 12994 Linden Church Rd PHONE 531-2610

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION ~~Attogether Twelve Hills Sec. 1~~ LOT NO. 1

12960 ROAD AND DESCRIPTION Linden Church Rd + Rt 32

Final

TAX MAP 28 PARCEL # 66

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. *Mark Collett*
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 11/2/87 PERC OK

B.P. 15334

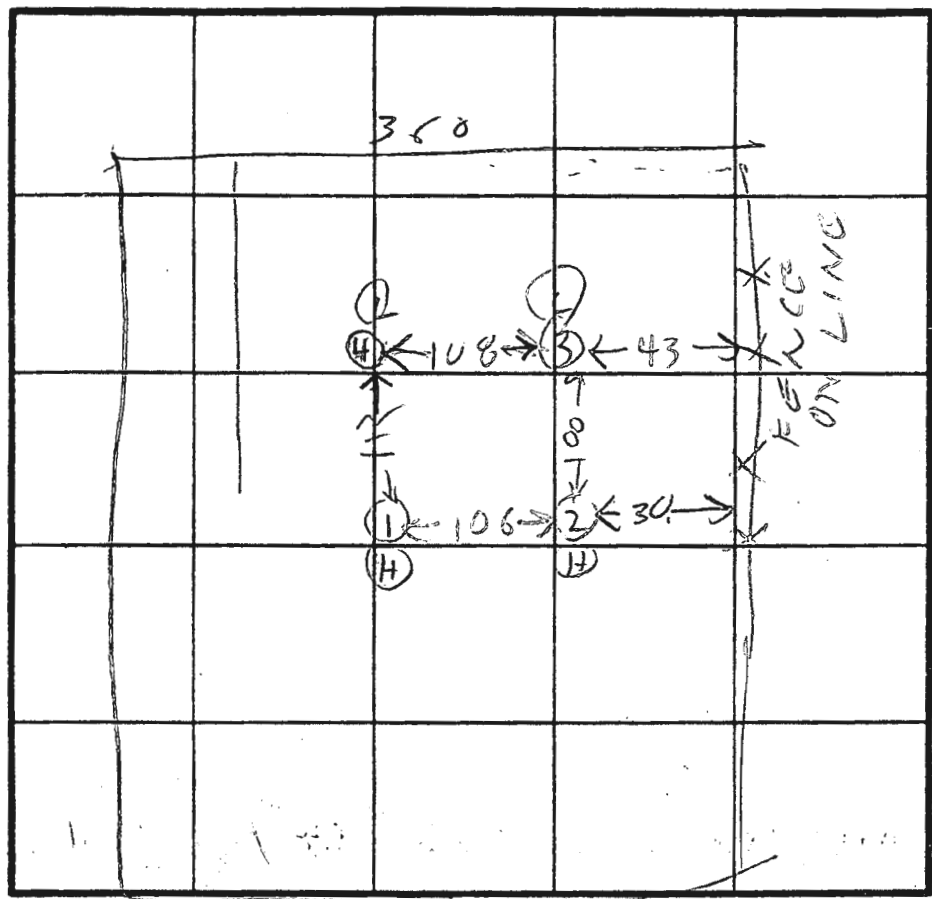
REC. FILED AND RETURNED 10-30-87

THIS IS NOT A PERMIT

Lot 1

SOIL PROFILE

0' BROWN CLAY
3' BROWN SAND LOAM
10% SHALE



X Perc 6 min
180# BR
FIRST 3'
BOTTOM 8'
making shallower
SEE TEST PLAT

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

C. LINCOLN CHURCH RD

| DATE | TEST NO. | DEPTH | PRE-WET | | TEST - 1" DROP | | TIME |
|---------|----------|-------|---------|------|----------------|------|------|
| | | | START | STOP | START | STOP | |
| 11/2/87 | 1S | 5 | 1036 | 1041 | 1041 | 1048 | 7 |
| | 1V | 9 | 1036 | 1041 | 1041 | 1048 | 7 |
| | 1V | 13 | OK | | | | |
| | 2S | 5 | 1040 | 1045 | 1045 | 1049 | 4 |
| | 2V | 11 | OK | | | | 21 |
| | 3S | 5.5 | 1052 | 1054 | 1054 | 1058 | 4 |
| | 3V | 12 | OK | | | | |
| 11/2/87 | 4S | 4.5 | 1054 | 1057 | 1057 | 1064 | 7 |
| | 4V | 12 | OK | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

at
Tunnel
6 min

max
Depth
3 ft

2
BROWN CLAY
3
BROWN SAND LOAM
10% SHALE
11
HARD

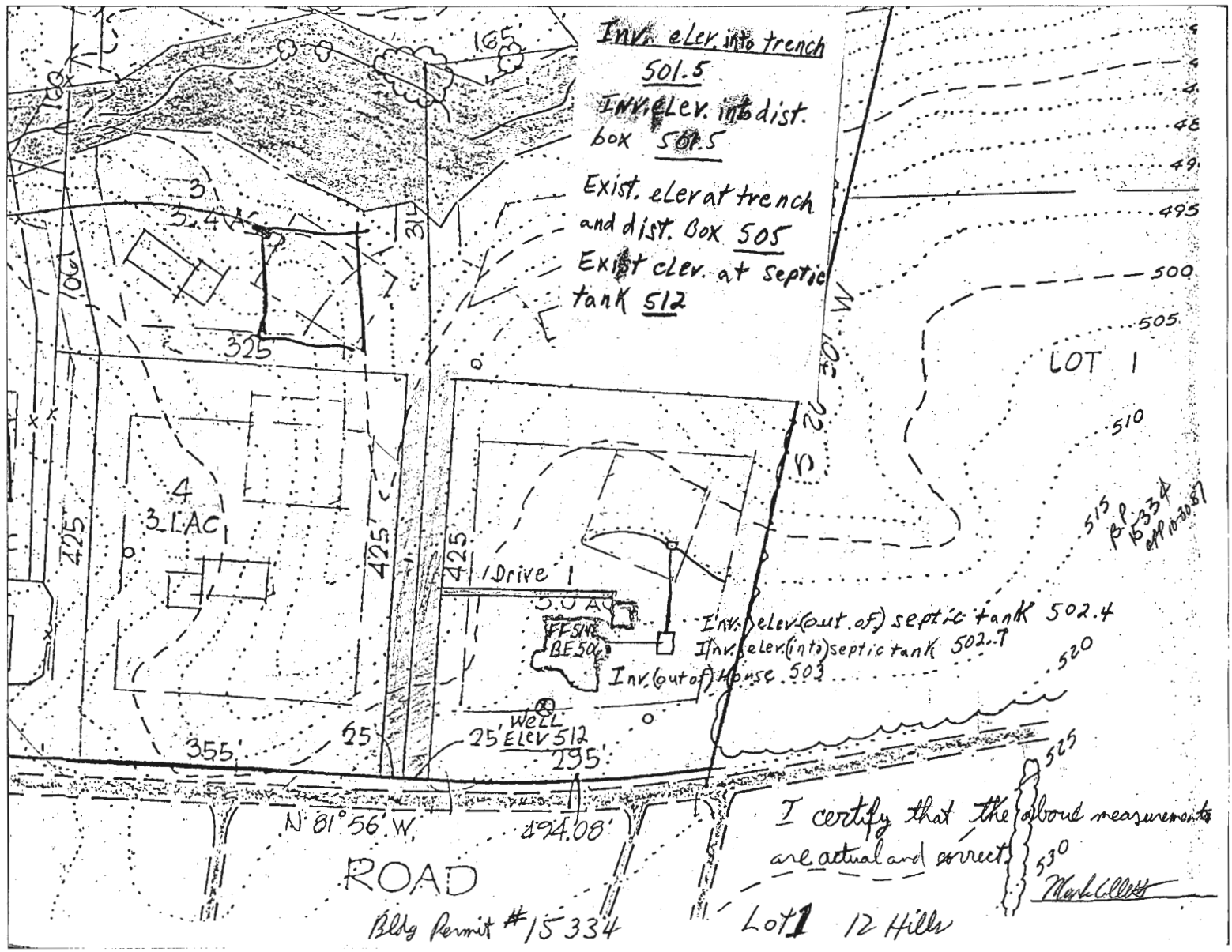
4
BROWN CLAY
BROWN SAND LOAM
10% SHALE

REMARKS: Holes Pushed Down Similar to Test Plat

TYPE OF SOIL: _____

TESTED BY: RHODGES ALSO PRESENT: CLINT KERTZMAN





Inv. elev. into trench
501.5
 Inv. elev. into dist.
 box 501.5
 Exist. elev. at trench
 and dist. Box 505
 Exist. elev. at septic
 tank 512

LOT 1

Inv. elev. (out of) septic tank 502.4
 Inv. elev. (into) septic tank 502.7
 Inv. (out of) House 503

Well
 BE 502
 25' ELEV 512
 295'

N 81° 56' W 494.08'

ROAD

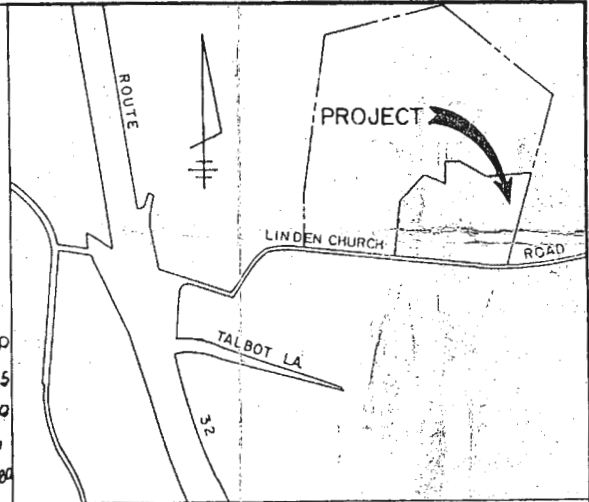
Bldg Permit # 15334

I certify that the above measurements are actual and correct.

Lot 1 12 Hills

530
Mark Clout

FLAG OR PIPE STEM LOTS, REFUSE COLLECTION, SEWERAGE REMOVAL AND ROAD MAINTENANCE TO BE PROVIDED AT THE JUNCTION OF FLAG OR PIPE STEM ROAD R/W AND NOT ONTO THE FLAG OR PIPE STEM LANEWAY.

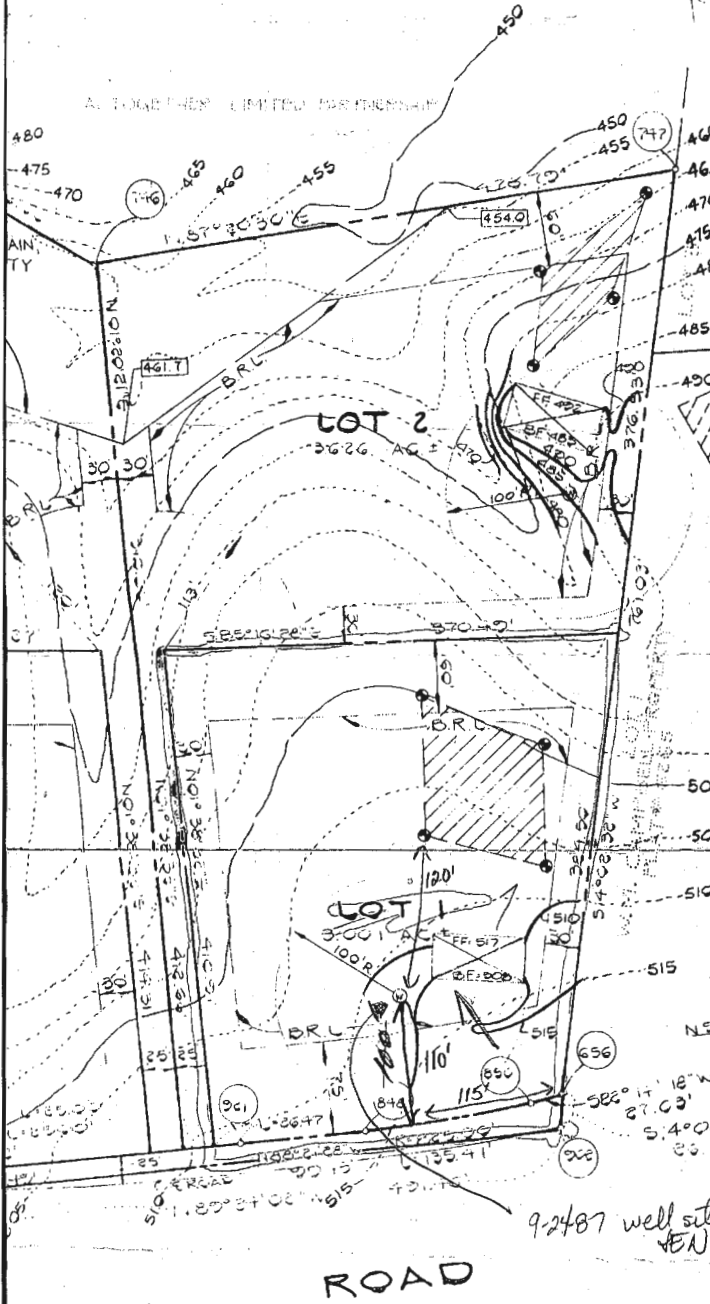


VICINITY MAP

SCALE: 1"=1200'



1. THIS AREA DESIGNATES A PRIVATE SEWAGE EASEMENT OF 10,000 SQUARE FEET AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF HEALTH AND MENTAL HYGIENE FOR INDIVIDUAL SEWAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWAGE IS AVAILABLE. THESE EASEMENTS SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENTS INTO THE PRIVATE SEWAGE EASEMENT. RECORDATION OF A MODIFIED SEWAGE EASEMENT SHALL NOT BE NECESSARY.
2. THE LOTS SHOWN HEREON COMPLY WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREA AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF HEALTH AND MENTAL HYGIENE.



Charles P. Smith

PERG CERTIFICATION DRAWING

ALTOGETHER

SECTION ONE

LOTS 1-6

TAX MAP 28

P/O TAX MAP PARCEL 66

ZONING R

FIFTH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND

SCALE: 1"=100'

APRIL 16, 1987

OWNER AND DEVELOPER
ALTOGETHER LIMITED PARTNERSHIP
C/O HOWARD COUNTY LAND SERVICES INC.
8307 MAIN STREET
BELLGATE CITY, MARYLAND 21043

ROAD

