

PERMIT NUMBER: B 23000795

DATE ACCEPTED:



### RESIDENTIAL BUILDING PERMIT APPLICATION

HOWARD COUNTY DEPARTMENT OF INSPECTIONS, LICENSES, AND PERMITS

3430 COURT HOUSE DRIVE, ELLICOTT CITY, MD 21043 - PHONE: (410) 313-2455 OPTION #4

www.howardcountymd.gov

#### BUILDING SITE ADDRESS REQUIRED

Street Address: 13111 195 E OF MAINTENANCE		Unit:
City: HIGHLAND	State: MD	Zip Code: 21773
Subdivision/Village/Complex Name: HIGHLAND GARDENS		SDP/WP/BA #:
Lot:	Tax Map:	Parcel: Grading Permit #:

#### DESCRIPTION OF WORK REQUIRED

Existing Use:	Proposed Use:	Estimated Cost: \$ 120,000
Trade Work to Be Completed (Separate Permits Required): <input type="checkbox"/> Mechanical (HVACR) <input checked="" type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> None		

#### PROPERTY OWNER INFORMATION REQUIRED

Owner(s) Name(s) (As it appears on tax records): 2112 - To Home Limited		Primary Residence: <input type="checkbox"/> Yes <input type="checkbox"/> No
Owner's Street Address: 13111 195 E OF MAINTENANCE		
City: HIGHLAND	State: MD	Zip Code: 21773
Phone: 301-330-7437	Email:	

#### APPLICANT NAME REQUIRED - INDIVIDUAL WHO SIGNS THIS APPLICATION

Business Name:	Contact Name: FRANK MUELLER
Street Address: 13111 195 E OF MAINTENANCE	
City: HIGHLAND	State: MD Zip Code: 21773
Phone: 301-330-7437	Email:

#### CONTRACTOR INFORMATION REQUIRED

Business Name: FRANK MUELLER	License #: 134976
Licensee's Name: FRANK MUELLER	
Street Address: 315 FREDERICK RD	
City: FAIRFAX	State: VA Zip Code: 22031
Phone: 717-402-1118	Email:

#### ARCHITECT/ENGINEER INFORMATION INDIVIDUAL WHO SIGNED PLANS, IF APPLICABLE

Business Name:	Name:
Street Address:	
City:	State: Zip Code:
Phone:	Email:

#### BUILDING CHARACTERISTICS REQUIRED

Primary Structure: <input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> SF Duplex <input type="checkbox"/> Mobile Home <input type="checkbox"/> Multi-Family Dwelling (MF*)	Condo: <input type="checkbox"/> Yes <input type="checkbox"/> No
Utilities: <input type="checkbox"/> Electric <input type="checkbox"/> Gas	Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private (Well)
Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private (Septic)	Heating System: <input checked="" type="checkbox"/> Electric <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane <input type="checkbox"/> Other:
Roadside Tree Project: <input type="checkbox"/> No <input type="checkbox"/> Yes: #	Sprinkler System: <input type="checkbox"/> NFPA 13 <input type="checkbox"/> NFPA 13R <input type="checkbox"/> NFPA 13D <input type="checkbox"/> None
Fire Alarm System: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Voice Evac	

#### ADDITIONAL RESIDENTIAL INFORMATION (PLEASE SELECT/COMPLETE ALL THAT APPLY)

Model Name & Options:				
# of Bedrooms (SF):	# of efficiency units (MF*):	# of 1 BR (MF*):	# of 2 BR (MF*):	# of 3 BR (MF*):
# Rooms:	# Full Baths:	# Half Baths:	# Fireplaces:	
Garage/Carport Info: <input type="checkbox"/> Attached Garage <input type="checkbox"/> Detached Garage <input type="checkbox"/> Integral Garage <input type="checkbox"/> Carport <input type="checkbox"/> None				
Basement/Foundation Info: <input type="checkbox"/> Slab on Grade <input type="checkbox"/> Post & Pier <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Finished Basement: <input type="checkbox"/> Full or <input type="checkbox"/> Partial				
1 <sup>st</sup> Fl Width:	1 <sup>st</sup> Fl Depth:	2 <sup>nd</sup> Fl Width:	2 <sup>nd</sup> Fl Depth:	Bsmt Width: Bsmt Depth:
Energy Method: <input type="checkbox"/> Prescriptive <input type="checkbox"/> Performance <input type="checkbox"/> UA Alternative <input type="checkbox"/> ERI		Gross Area: sq ft	Occupiable Area: sq ft	

#### AGREEMENT/ DISCALIMER REQUIRED

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 ORIGINAL SIGNATURE \_\_\_\_\_ DATE SIGNED \_\_\_\_\_

#### FOR OFFICE USE ONLY

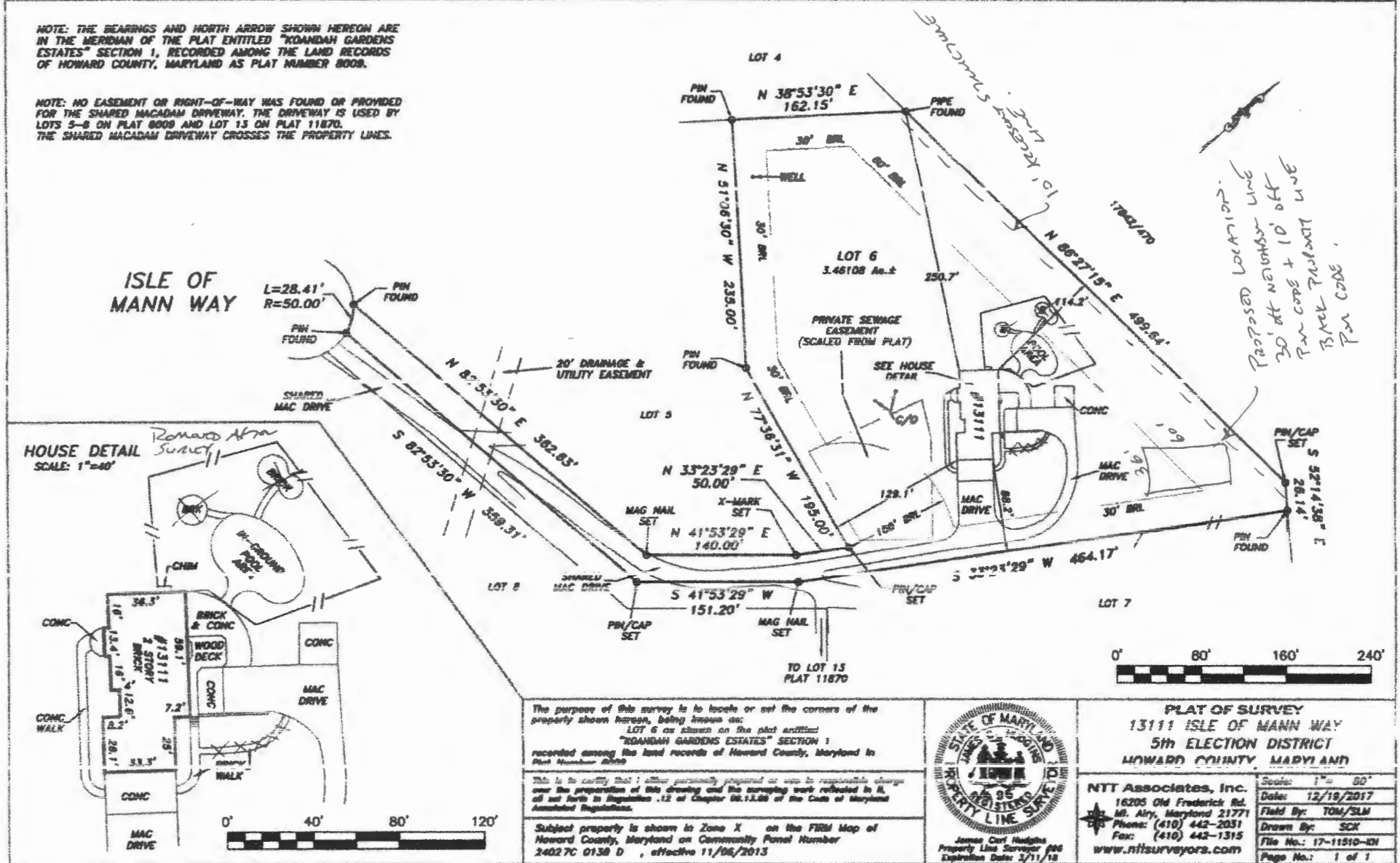
CHECKS PAYABLE TO: DIRECTOR OF FINANCE OF HOWARD COUNTY

AGENCIES REQUIRED/APPROVALS:					
<input checked="" type="checkbox"/> PR	<input type="checkbox"/> DPZ	<input checked="" type="checkbox"/> DED	<input checked="" type="checkbox"/> Health <i>R/E</i>	<input type="checkbox"/> SHA	<input type="checkbox"/> CID
SUBMITTAL FEES: 535.00		PAYMENT:		ACCEPTED BY: _____	

Approved B23000795  
4/10/2025

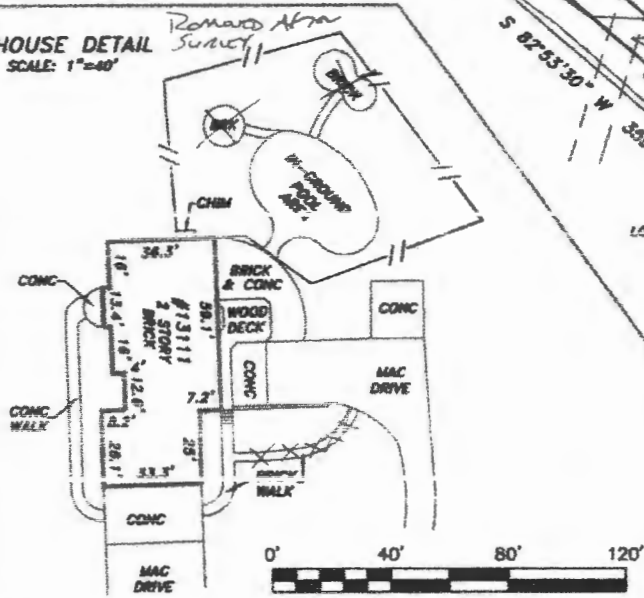
NOTE: THE BEARINGS AND NORTH ARROW SHOWN HEREON ARE IN THE MERIDIAN OF THE PLAT ENTITLED "KOANDAH GARDENS ESTATES" SECTION 1, RECORDED AMONG THE LAND RECORDS OF HOWARD COUNTY, MARYLAND AS PLAT NUMBER 8008.

NOTE: NO EASEMENT OR RIGHT-OF-WAY WAS FOUND OR PROVIDED FOR THE SHARED MACADAM DRIVEWAY. THE DRIVEWAY IS USED BY LOTS 5-8 ON PLAT 8008 AND LOT 13 ON PLAT 11870. THE SHARED MACADAM DRIVEWAY CROSSES THE PROPERTY LINES.



Proposed location:  
30' at NE corner line  
30' at NW corner line  
30' at SW corner line  
30' at SE corner line  
30' at NW corner line  
30' at SW corner line  
30' at SE corner line

HOUSE DETAIL  
SCALE: 1"=40'



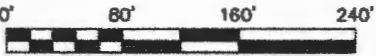
The purpose of this survey is to locate or set the corners of the property shown hereon, being known as:  
LOT 6 as shown on the plat entitled "KOANDAH GARDENS ESTATES" SECTION 1 recorded among the land records of Howard County, Maryland in Plat Number 8008.

This is to certify that I either personally prepared or was in responsible charge over the preparation of this drawing and the surveying work reflected in it, all set forth in Regulations 12 of Chapter 06.13.06 of the Code of Maryland Annotated Regulations.

Subject property is shown in Zone X on the FIRM Map of Howard County, Maryland on Community Panel Number 2402 7C 0138 D, effective 11/06/2013



James Carl Hudgins  
Property Line Surveyor #06  
Expiration Date: 3/11/18

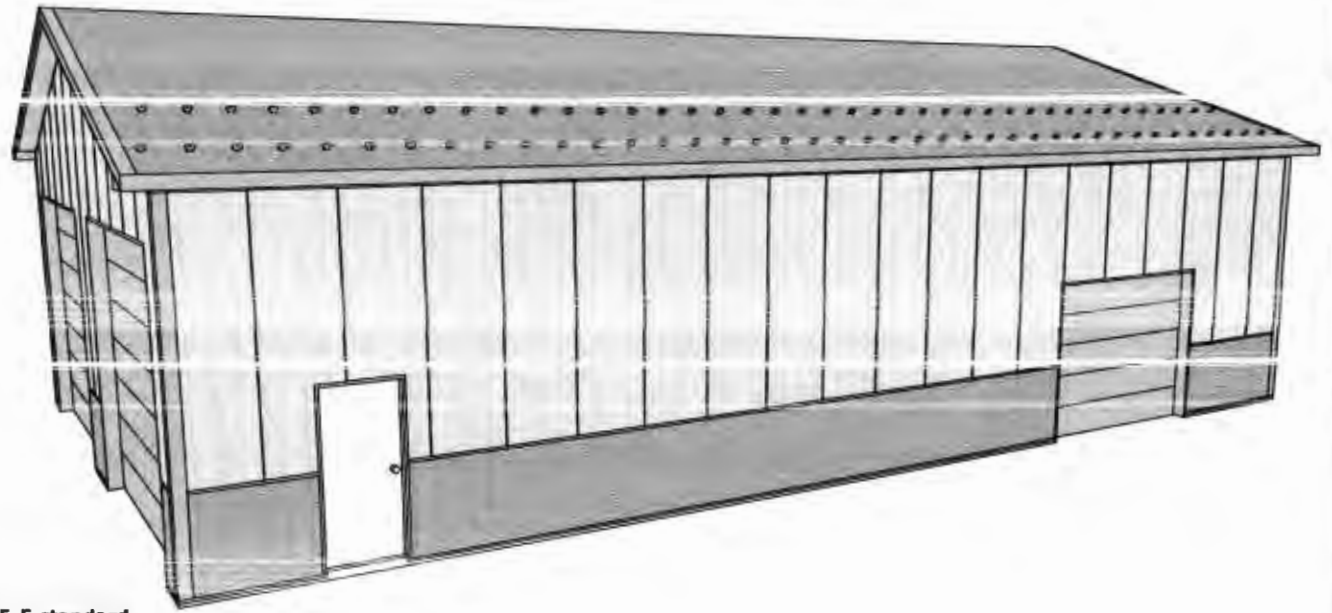


PLAT OF SURVEY  
13111 ISLE OF MANN WAY  
5th ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND

NTT Associates, Inc.  
16205 Old Frederick Rd.  
Mt. Airy, Maryland 21771  
Phone: (410) 442-2031  
Fax: (410) 442-1315  
www.nitsurveyors.com

Scale: 1"= 80'  
Date: 12/19/2017  
Field By: TOM/SLM  
Drawn By: SCR  
File No.: 17-11510-03H  
Page No.: 1 of 1

Set 1



Contract: 010FEJB23  
 Free Standing Building installed on your level site  
 36' width x 60' length x 14' inside height  
 Roof System: 4' o/c trusses Pitch: 4/12 Loading: 30-5-5 standard  
 Walls: 8' o/c 3-Ply 2x6 Glulam Load-Bearing Posts  
 Walls: Smart Post Option  
 Siding: 28 Gauge Painted Steel (Light Stone)  
 Trim Color (Clay)  
 Siding: 192 lineal ft 4' Wainscoting (Clay)  
 Roofing Type: 27 Gauge Painted Steel with Ridge Vent (Clay)  
 Roofing Type: Snow Guards - 2 Rows on Both Eaves (Clay)  
 Overhangs: 12" Boxed Vented on 2-eaves & 2-gables (Clay) soffit and fascia  
 Insulation/Underlayment: 2477 sqft of 1/4" Solex Insulation on Roof  
 Insulation/Underlayment: 2160 sqft of R-30 Blown Insulation on Ceiling  
 Insulation/Underlayment: 2817 sqft of R-19 Batt on Sides  
 Liner Panel: 2160 sqft of 29 gauge painted steel Liner Panel on Ceiling(White)  
 Liner Panel: 2817 sqft of 29 gauge painted steel Liner Panel on Sidewall (with 2x4s)(White)  
 Concrete Floor: 2160 sqft of 4" concrete floor 4000 psi w/fiber, control joints & spreading of stone supplied by customer with Vapor Barrier under concrete  
 Concrete Floor: 642 sqft of 5" concrete floor 4000 psi w/fiber, control joints & spreading of stone supplied by customer  
 2 - 14 X 12 Insulated Steel-Backed (Sandtone) Overhead Doors  
 1 - 10 X 8 Insulated Steel-Backed (Sandtone) Overhead Door with Hi-lift track  
 1 - 3' X 6'8" Steel Flush Entry Door(White)  
 124 lineal ft. of 5K Gutter(Clay) with 2 downspouts(4x3)

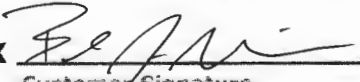
**Special Conditions:**  
 No Trash Removal  
 2x6 Treated Skirt Board  
 Rock Clause Agreement  
 Site Must be ready prior to start  
 For Contract: 010FEJB23

THIS BUILDING MEETS OR EXCEEDS THE 2018 IBC BUILDING CODE FOR POST FRAME CONSTRUCTION

**Cover Sheet**

**Client Name:** Brandon Massie  
**Address:** 13111 Isle Of Mann Wy.  
 Highland, MD 20777  
**Phone:** 301-633-7477

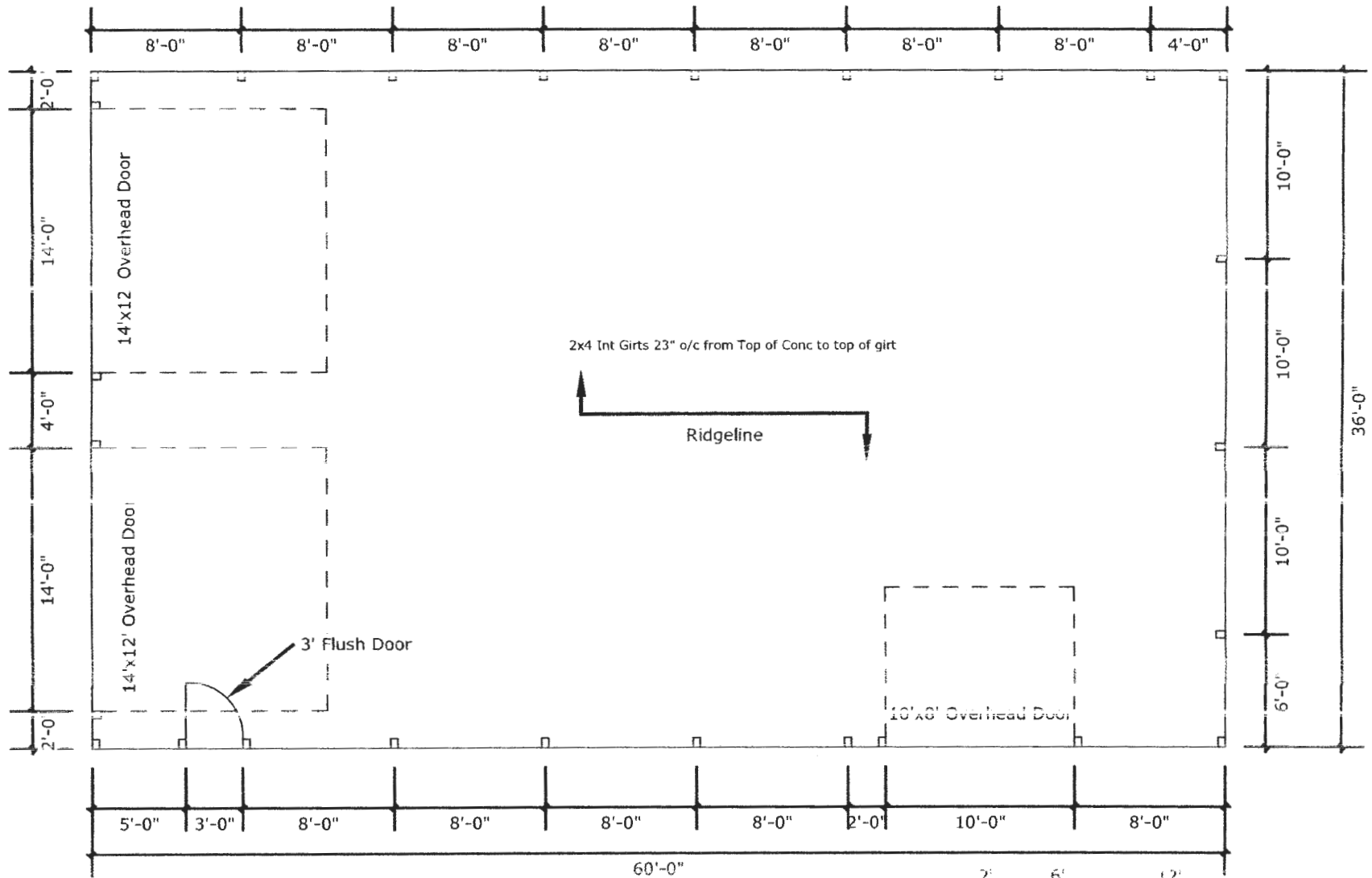
My Signature affirm this drawing & design to be correct & accurate. I have received my building permit and have forwarded any changes from code officials to Fetterville. I understand that there are no changes that can be made from this point forward without extracosts being incurred at my expense

X  X 3/3/23  
 Customer Signature Date

**Contact:**  
 Jack Burke  
 800-331-1875 Ext. 113  
 Email: Jack@fettervillesales.com  
 Drawn By: JR

**CONFIRM FINISH FLOOR  
HEIGHT WITH CUSTOMER**

**Floor Plan**  
Personal use, 2,160 sq. ft.



Post Layout / Header Height is 13'-11" from Top of Skirt Board to Top of Header



Scale: 1/8" = 1'



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**Address:** 13111 Isle Of Mann Wy.  
Highland, MD 20777  
**Phone:** 301-633-7477

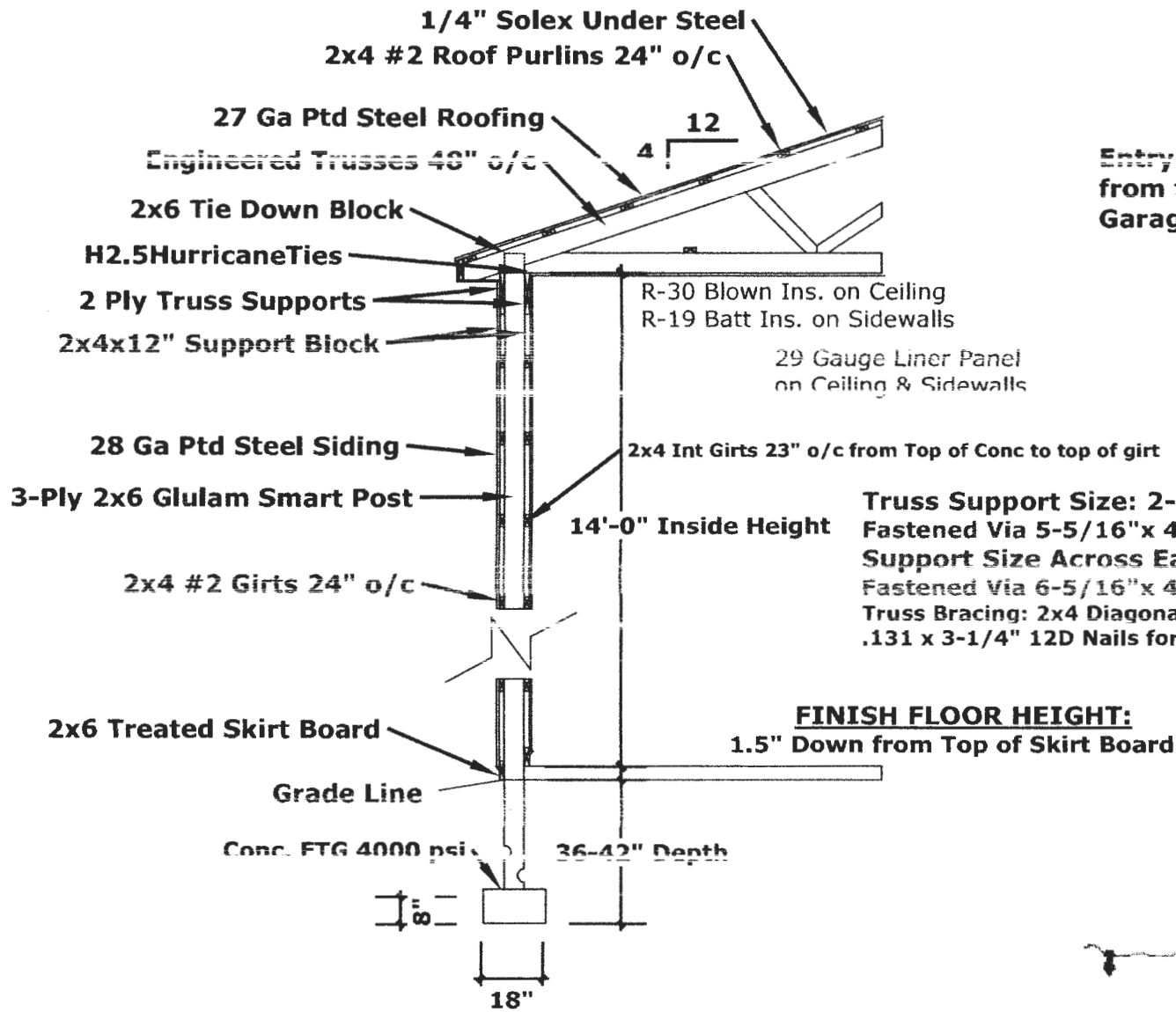
**Contact:**  
 Jack Burke  
 800-331-1875 Ext. 113  
 Email:  
 Jack@fettervillesales.com

**Fetterville Sales**  
 245 Fetterville Rd.  
 East Earl, PA, 17519  
 800-331-1875

**Page:**

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Drawn By: JR



**DOOR PLACEMENTS:**  
 Entry Door sets 1-1/2" Down  
 from top of Skirt Board  
 Garage Door sets 2" Down

**Truss Support Size: 2-Ply 2x12 #2 SYP**  
 Fastened Via 5-5/16"x 4" GRK's Per Connection  
**Support Size Across Eave 10' Span: 2-Ply 12" LVL's**  
 Fastened Via 6-5/16"x 4" GRK's Per Connection  
**Truss Bracing: 2x4 Diagonal, B/C Laterals, Web Bracing Per Print**  
 .131 x 3-1/4" 12D Nails for All 2x4 & 2x6 Girts, Purlins, Fascia

**FINISH FLOOR HEIGHT:**  
 1.5" Down from Top of Skirt Board

SCREW PATTERNS



No Scale

Typical Section View



**Client Name:** Brandon Massie  
**Address:** 13111 Isle Of Mann Wy.  
 Highland, MD 20777  
**Phone:** 301-633-7477

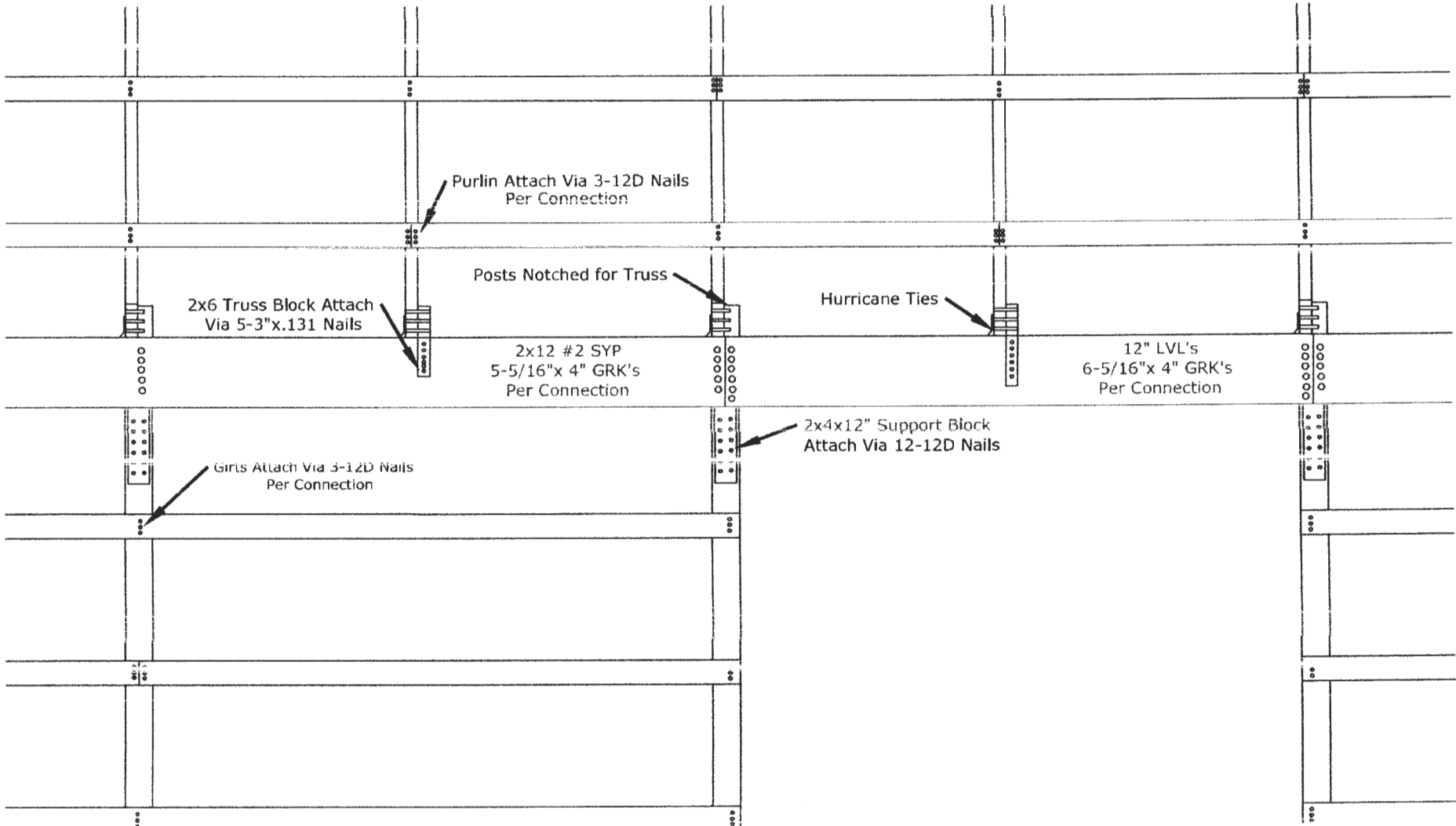
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Drawn By: JR



**Framing Connection Detail**



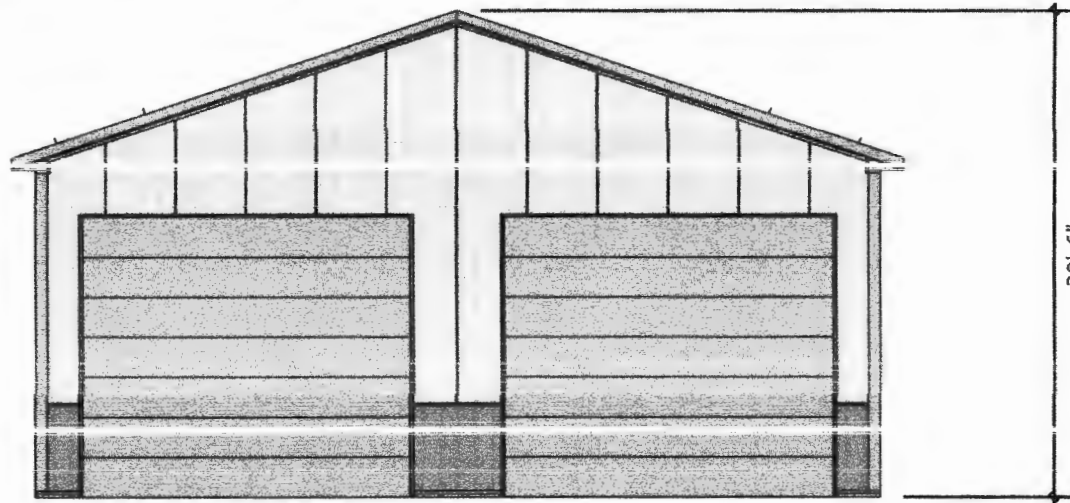
**Client Name:** *Brandon Massie*  
**Address:** *13111 Isle Of Mann Wy. Highland, MD 20777*  
**Phone:** *301-633-7477*

**Contact:**  
*Jack Burke*  
**800-331-1875 Ext. 113**  
**Email:**  
*Jack@fettervillesales.com*

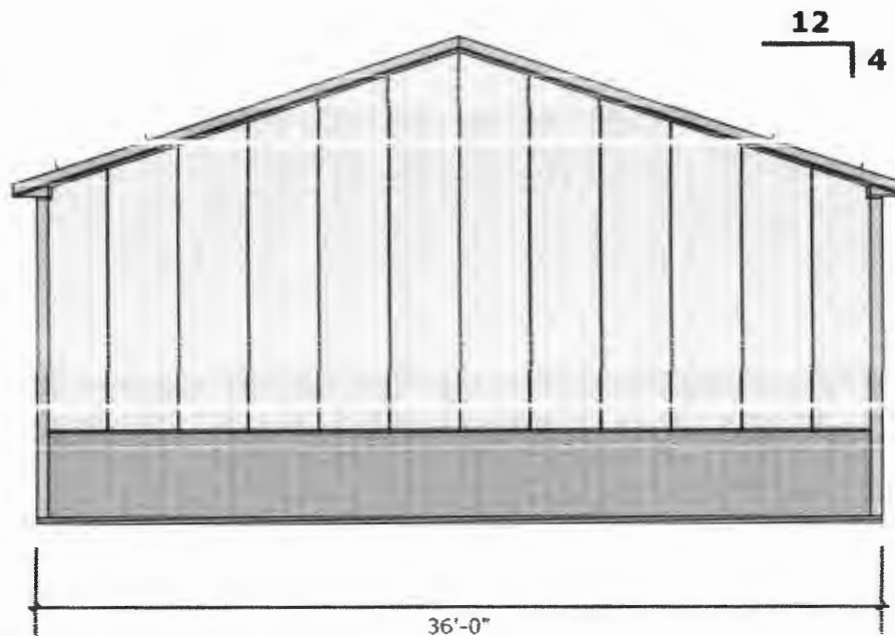
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**245 Fetterville Rd.**  
**East Earl, PA, 17519**  
**800-331-1875**

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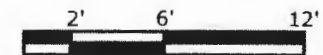
*Drawn By: JR*



**Front**



**Rear**



Scale: 1/8" = 1'

**Elevation View**



**Client Name:** *Brandon Massie*

**Address:** *13111 Isle Of Mann Wy.  
Highland, MD 20777*

**Phone:** *301-633-7477*

**Contact:**

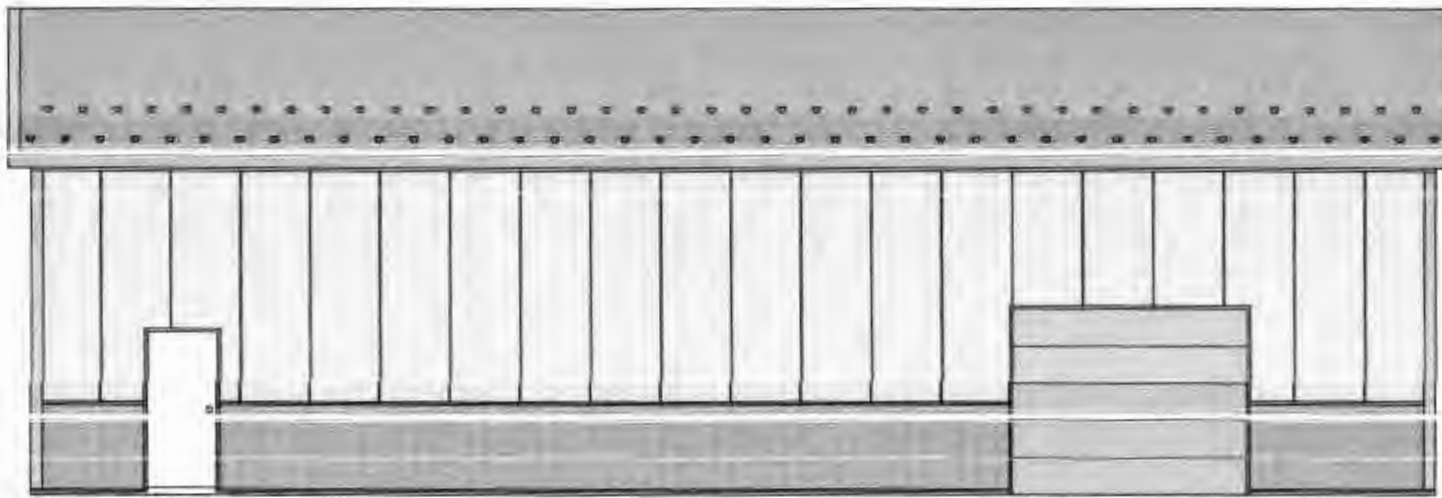
*Jack Burke  
800-331-1875 Ext. 113  
Email:  
Jack@fettervillesales.com*

**Fetterville Sales  
245 Fetterville Rd.  
East Earl, PA, 17519  
800-331-1875**

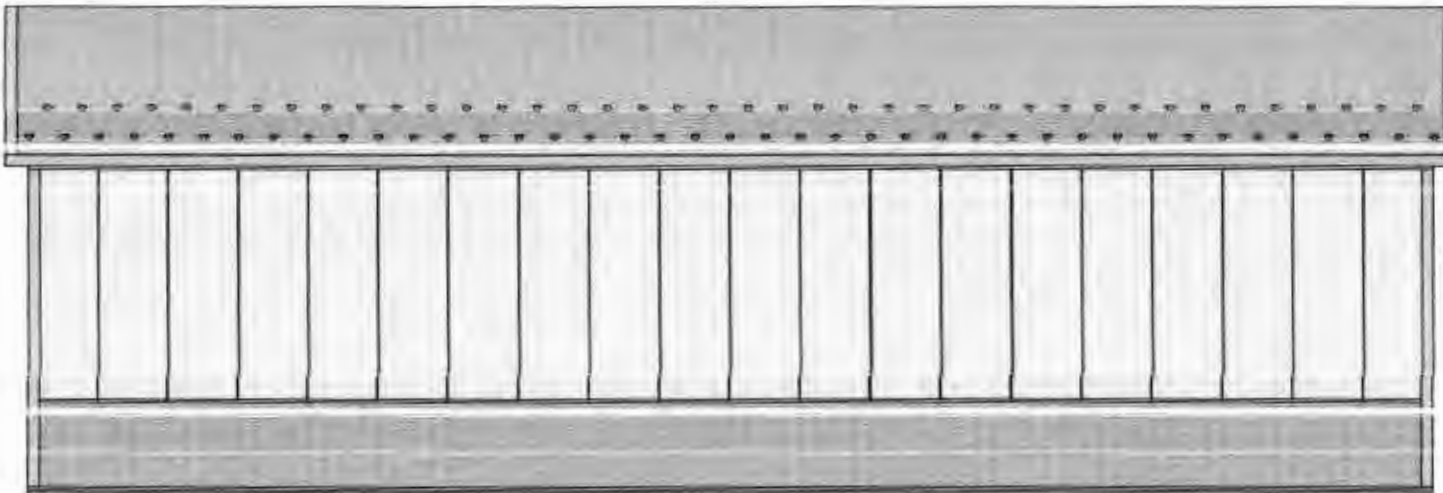
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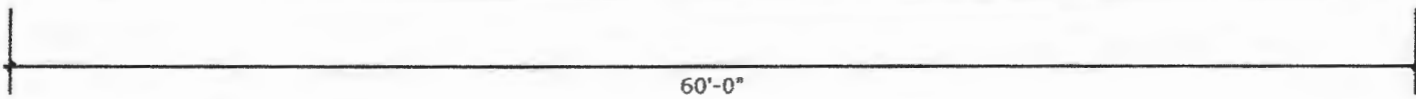
*Drawn By: JR*



Right



Left



Elevation View

Scale: 1/8" = 1'



**Client Name:** Brandon Massie  
**Address:** 13111 Isle Of Mann Wy.  
Highland, MD 20777  
**Phone:** 301-633-7477

**Contact:**  
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800-331-1875 Ext. 113  
Email:  
Jack@fettervillesales.com

**Fetterville Sales**  
245 Fetterville Rd.  
East Earl, PA, 17519  
800-331-1875

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Drawn By: JR

## Freemon, Robert

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**From:** Freemon, Robert  
**Sent:** Monday, April 10, 2023 12:57 PM  
**To:** Brandon Massie  
**Subject:** RE: 13111 Isle of Mann Way

Hi Brandon,

I spoke with my supervisor regarding your situation. With what you are proposing, the timeframe in which regulation changes were made, and the locations of the well and septic systems, the Health Dept. is willing to approve the proposed pole barn. You can ignore my email regarding needing to revise the SDA on a Percolation Certification Plan.

Initially, state regulations did not allow on-site sewage disposal systems to be upgrade of the any well. However, no distance was set and over time we learned this was inevitable (given some topographies). The 200ft rule did not come about till 2007, so there are properties in Howard County that fall into your similar category. Since you are proposing a nonliving space addition and the well and septic systems are separated by at least 100ft the Health Dept. can approve the building permit. If you have future plans to add living space to the property I would highly recommend scheduling and appt. with the Health Dept. (Well and Septic Program) to discuss the possible requirements. Building permit B23000795 has been approved by the Health Dept.

### Well and Septic Program

Robert "Spencer" Freemon

Phone: 410-313-6357

Email: [rfreemon@howardcountymd.gov](mailto:rfreemon@howardcountymd.gov)

Website: <https://www.howardcountymd.gov/health/well-septic-program>

**From:** Brandon Massie <massiebrandon@yahoo.com>  
**Sent:** Tuesday, March 28, 2023 4:16 PM  
**To:** Freemon, Robert <rfreemon@howardcountymd.gov>  
**Subject:** Re: 13111 Isle of Mann Way

[Note: This email originated from outside of the organization. Please only click on links or attachments if you know the sender.]

Spencer,

I was able to talk to a few surveyors and engineers over the last few days and also walked the property (with a newly educated view) to get a batter sense of the various reference points. I do have a few questions based on that work.

I can see the neighbors well and agree that our septic replacement area would not meet codes given the distance. My question though, our home was built in 1994. The neighbors house was built in 2005. Was the well location in the front of their yard and acceptable place in 2005? I'm certainly not trying to start a war with my neighbor as we get along very well, just trying to understand how we got into this situation? The placement of that well essentially boxed us in to significant incremental costs if our approved septic areas were ever to need repair. Given the geography of the property and existing improvements and well location, there is really only one location that a new field could go, specifically the large unimproved area on the west side of our property.

I do understand the County's desire to have these updated plans on file when/if they are needed; however, this comes at a tremendous expense to the homeowner. I would also add that in this case I am not adding anything that would attach to the septic (new living areas, bathrooms, etc.), nor am I crossing any septic component for either construction or final product. The proposed building would also be constructed in an area that could never be used as a septic field (replacement or otherwise) since it is significantly uphill from the home per the experts I spoke to. I received ballpark estimates of \$5K-\$10K (or more in some cases) to do this work and upwards of 6 months to fully complete, which, as you noted, is not to certify the existing operating system. I really cannot see how this burden is necessary, especially when it

Info Legend About

13111 ISLE OF MANN WAY

Detailed Search

Add Layer

Howard County Base Map

BASE MAP LAYERS

HEALTH SPECIAL LAYERS

100FT WELLS BUFFER

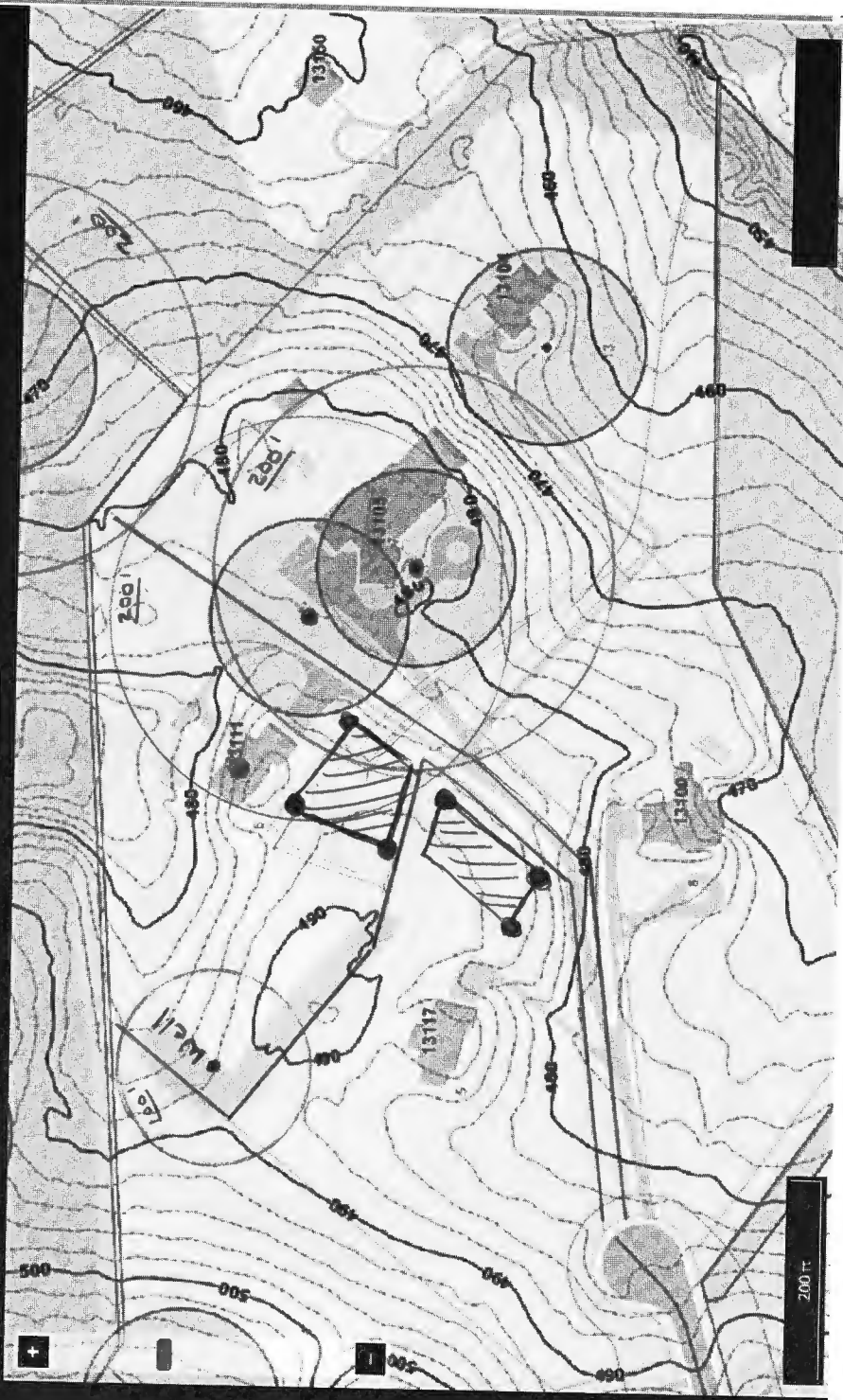
WELLS - 7.270 - 02/2023

WELL/SEPTIC FILES



UTILITY LAYERS

GEOGRAPHY

Home Length Area Select Point Line Polygon Clear



GPM 1.1 • HO-81-0181 13105 well comp. 06/19/89 (One Drive)  
 GPM 6.5 • HO-88-0951 13105 well comp. 10/3/89

 13111 SDA Approved 5/87  
 OSDS Installed 6/94 (One Drive)  
 13111 Estimated well location

13105 SFD Built 2005  
13111 SFD Built 1995

05-408954

# PERMIT

## SEWAGE DISPOSAL SYSTEM

### DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 50101

A 37589

DISTRICT 4th

DATE 6/20/94

DATE SYSTEM APPROVED 6/24/94

INSPECTOR DIOS

**HOWARD COUNTY HEALTH DEPARTMENT**

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXXXX~~ 313-2640

\*Time Expired for  
F.C.O.P. Compliance

INDEXED

Harrison Contracting

IS PERMITTED TO INSTALL  ALTER

ADDRESS 2858 Flag Marsh Road, Mount Airy, Maryland 21771 PHONE 795-8691

SUBDIVISION Koandah Gardens LOT 6 ROAD 13111 Isle of Mann Way

PROPERTY OWNER Tony Landini

ADDRESS \_\_\_\_\_

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 180

**BUILDING PERMIT SIGNED  
AND RETURNED 4/24/02  
B001350130 - U618PTANK  
720 41720**

TRENCHES - Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 4 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Starting from lot corner at end of pipestem, (Common to Lots 5 & 6), start first trench 110 feet down left (195.00') lot line and 60 feet off this same lot line. Run trenches along contours toward pipestem.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. *OK MR 6/7/94*

PLANS APPROVED BY Mark Rifkin REVISED \_\_\_\_\_ DATE 12/29/93

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.

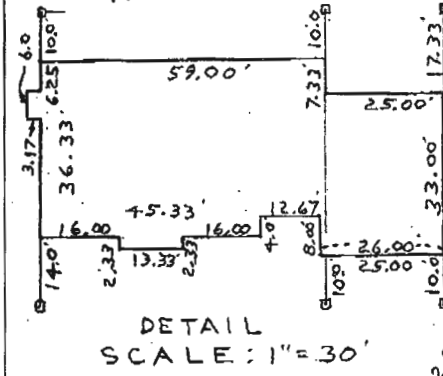
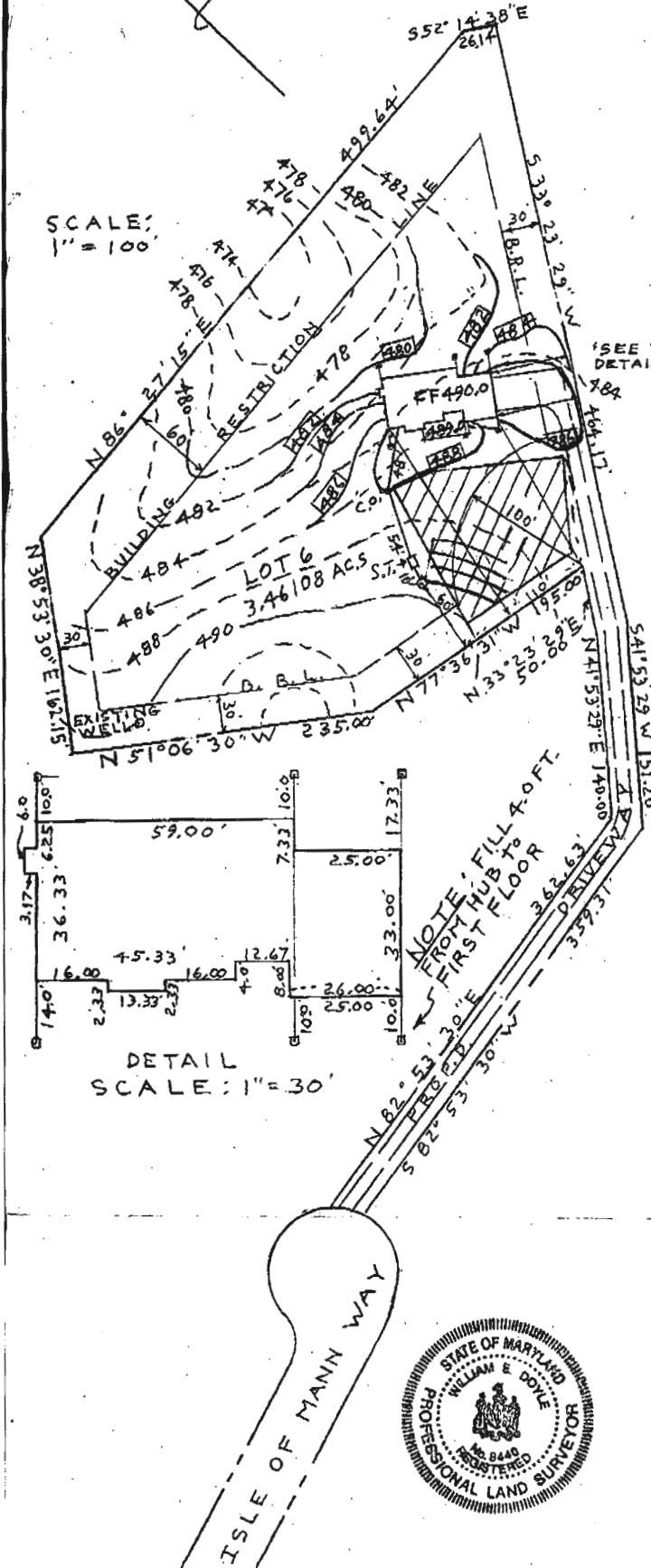
**RECORDED 321-00**  
**B00135013**  
**16.000L**  
**B.L.G. PERMIT SIGNED**  
**AND RETURNED 5/4/95**  
**Serial # 59376 deck**

A 37589

*William E. Doyle*

LAND SURVEYOR 8440

8312 EMERALD DRIVE SYKESVILLE, MARYLAND 21784 PHONE (301) 798-2210



Approved Septic System Plan  
Howard County Health Department

*Mark E. R. Flynn* 1/28/94  
Signature Date

TRENCH LENGTH  
45 FT. PER BEDROOM  
4 BEDROOMS  
TOTAL TRENCH  
LENGTH = 180 FT. by 2 FT. WIDE

PLOT PLAN  
LOT 6, ISLE OF MANN WAY  
KONDANAH GARDENS ESTATES  
SECTION 1  
ELECTION DISTRICT, 4  
HOWARD COUNTY, MD.

SCALE: AS SHOWN  
DRAWN: JANUARY 7, 1994  
REVISED: JANUARY 27, 1994

EXIST, GRN. AT DISTR. BOX	489.80
INV. IN DISTR. BOX	485.80
INV. OUT OF SEPTIC TANK	485.90
INV. INTO SEPTIC TANK	486.30
INV. OUT OF DWELLING	487.40
FIRST FLOOR ELEV.	490.00
CELLAR ELEV.	481.00
WELL ELEV.	490.00
NO. OF BEDROOMS	4
ACREAGE	3.46108 AC.S.

I CERTIFY THE ABOVE MEASUREMENTS  
AND ELEVATIONS ARE ACTUAL AND  
CORRECT FOR THIS PROPERTY.

signed *William E. Doyle*



FILE NO. 925-7

# APPLICATION

PERCOLATION TESTING

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

9/2/86  
perc OK'd  
plat approved  
(SR)

A 57589

P \_\_\_\_\_

DISTRICT 5

DATE 7/10/86

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

Tony Landini  
JAMES & EMILY SANDORF HCHP-I Limited Partnership  
9 Falling Creek Ct

ADDRESS

4907 Ten Oaks Rd., Dayton, Md. 21036 Silver Spring, MD 20904  
PHONE 531-544  
301-384-8847

PROSPECTIVE BUYER \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_

PROPERTY LOCATION:

SUBDIVISION

KOANDAH GARDENS ESTATES

LOT NO.

(LOT 15 ON PRELIM)  
FINAL MR  
LOT 6 2/21/89

ROAD AND DESCRIPTION

S EAST SIDE HIGHLAND RD. S WEST END OF ISLE OF MANN WAY  
1311 Isle of Mann Way, Highland, MD

TAX MAP

3A

PARCEL #

37B

SIZE OF LOT

3 AC.

TYPE BLDG.

SINGLE-FAMILY

(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.

Scott Shandberger for James H. Sandorf  
(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_

FOR \_\_\_\_\_

DATE \_\_\_\_\_

REJECTED BY \_\_\_\_\_

FOR \_\_\_\_\_

DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS \_\_\_\_\_

DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING

for certified plat plan

BLDG. PERMIT SIGNED

AND RETURNED

1/28/94  
Serial # 52278  
SFD-4Bim

BLDG PERMIT SIGNED

AND RETURNED 9-22-89

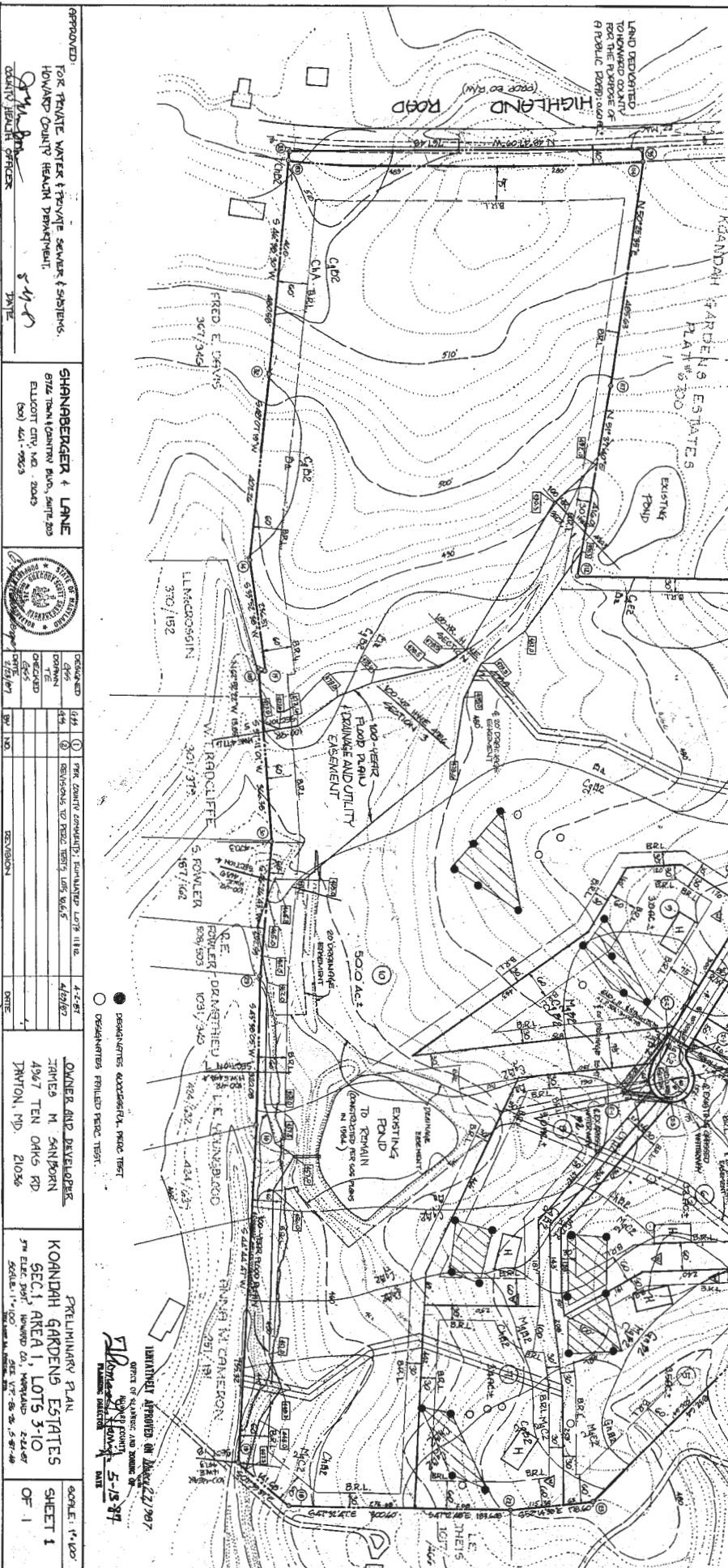
BP # 29586 4 bdrms

# THIS IS NOT A PERMIT

BLK	NORTH	EAST
14	491904.715	818685.797
15	491911.07	818702.797
16	491917.209	818719.797
17	491923.348	818736.797
18	491929.487	818753.797
19	491935.626	818770.797
20	491941.765	818787.797
21	491947.904	818804.797
22	491954.043	818821.797
23	491960.182	818838.797
24	491966.321	818855.797
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26	491978.599	818889.797
27	491984.738	818906.797
28	491990.877	818923.797
29	491997.016	818940.797
30	492003.155	818957.797
31	492009.294	818974.797
32	492015.433	818991.797
33	492021.572	819008.797
34	492027.711	819025.797
35	492033.850	819042.797
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39	492058.427	819110.797
40	492064.566	819127.797
41	492070.705	819144.797
42	492076.844	819161.797
43	492082.983	819178.797
44	492089.122	819195.797
45	492095.261	819212.797
46	492101.400	819229.797
47	492107.539	819246.797
48	492113.678	819263.797
49	492119.817	819280.797
50	492125.956	819297.797
51	492132.095	819314.797
52	492138.234	819331.797
53	492144.373	819348.797
54	492150.512	819365.797
55	492156.651	819382.797
56	492162.790	819399.797
57	492168.929	819416.797
58	492175.068	819433.797
59	492181.207	819450.797
60	492187.346	819467.797
61	492193.485	819484.797
62	492200.000	819501.797
63	492206.139	819518.797
64	492212.278	819535.797
65	492218.417	819552.797
66	492224.556	819569.797
67	492230.695	819586.797
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69	492242.973	819620.797
70	492249.112	819637.797
71	492255.251	819654.797
72	492261.390	819671.797
73	492267.529	819688.797
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75	492279.807	819722.797
76	492285.946	819739.797
77	492292.085	819756.797
78	492298.224	819773.797
79	492304.363	819790.797
80	492310.502	819807.797
81	492316.641	819824.797
82	492322.780	819841.797
83	492328.919	819858.797
84	492335.058	819875.797
85	492341.197	819892.797
86	492347.336	819909.797
87	492353.475	819926.797
88	492359.614	819943.797
89	492365.753	819960.797
90	492371.892	819977.797
91	492378.031	819994.797
92	492384.170	820011.797
93	492390.309	820028.797
94	492396.448	820045.797
95	492402.587	820062.797
96	492408.726	820079.797
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98	492421.004	820113.797
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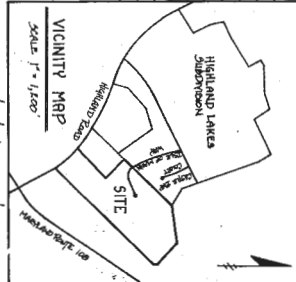
**GENERAL NOTES**

1. All dimensions shown herein are single line dimensions.
2. All dimensions are in feet and inches.
3. All dimensions are to the center of the line unless otherwise noted.
4. All dimensions are to the center of the line unless otherwise noted.
5. All dimensions are to the center of the line unless otherwise noted.
6. All dimensions are to the center of the line unless otherwise noted.
7. All dimensions are to the center of the line unless otherwise noted.
8. All dimensions are to the center of the line unless otherwise noted.
9. All dimensions are to the center of the line unless otherwise noted.
10. All dimensions are to the center of the line unless otherwise noted.



**PERCOLATION TEST RESULTS**

LOT NO.	PERCENTAGE	PERCENTAGE	PERCENTAGE
1	4	3	5
2	4	3	5
3	4	3	5
4	4	3	5
5	4	3	5
6	4	3	5
7	4	3	5
8	4	3	5
9	4	3	5
10	4	3	5



APPROVED:  
FOR PRIVATE WATER & SEWER SERVICE & EMBEZZLEMENTS  
HOWARD COUNTY HEALTH DEPARTMENT  
*[Signature]*  
DATE: 5-14-87

SHANBERGER & LANE  
6712 TOWN CENTER BLVD., SUITE 200  
ELICOTT CITY, MD. 21043  
(301) 461-9823



DATE	BY	NO.	REVISION
5/14/87	SL	1	PRELIMINARY PLAN
5/14/87	SL	2	FOR PRIVATE WATER & SEWER SERVICE & EMBEZZLEMENTS
5/14/87	SL	3	FOR PRIVATE WATER & SEWER SERVICE & EMBEZZLEMENTS
5/14/87	SL	4	FOR PRIVATE WATER & SEWER SERVICE & EMBEZZLEMENTS
5/14/87	SL	5	FOR PRIVATE WATER & SEWER SERVICE & EMBEZZLEMENTS
5/14/87	SL	6	FOR PRIVATE WATER & SEWER SERVICE & EMBEZZLEMENTS
5/14/87	SL	7	FOR PRIVATE WATER & SEWER SERVICE & EMBEZZLEMENTS
5/14/87	SL	8	FOR PRIVATE WATER & SEWER SERVICE & EMBEZZLEMENTS
5/14/87	SL	9	FOR PRIVATE WATER & SEWER SERVICE & EMBEZZLEMENTS
5/14/87	SL	10	FOR PRIVATE WATER & SEWER SERVICE & EMBEZZLEMENTS

OWNER AND DEVELOPER:  
JAMES M. SANBORN  
4967 TEN OAKS RD  
DARTON, MD. 21036

PRELIMINARY PLAN  
KANDAH GARDENS ESTATES  
SEC. 1, AREA 1, LOTS 3-10  
OF 1  
SCALE: 1" = 100'  
DATE: 5-14-87  
DRAWN BY: SL  
CHECKED BY: SL  
DATE: 5-14-87

**NOTES:**

1. TOPOGRAPHY SHOWN HEREIN WAS FIELD-MAN BY SHAMBERGER & LANE IN JULY 2003.
2. THE EXISTING MEDIUM DRAIN SHOWN HEREIN WAS FIELD-LOCATED BY SHAMBERGER & LANE IN FEBRUARY OF 1998.
3. THIS AREA DESIGNATED A PRIVATE SEWAGE DISPOSAL AREA OF AT LEAST 14,000 SF AS REQUIRED BY THE MD STATE DEPT. OF THE ENVIRONMENT FOR INDIVIDUAL SEWAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED. THIS DISPOSAL AREA SHALL REMAIN SEPARATE & NOT BE CONNECTED TO A PUBLIC SEWAGE SYSTEM. THE COUNTY HEALTH DIVISION SHALL HAVE THE AUTHORITY TO GRANT ADJUSTMENTS TO ENCROACHMENTS INTO THE PRIVATE SEWAGE DISPOSAL AREA.
4.
  - DESIGNATED APPROVED PERC TEST (JULY 2003)
  - DESIGNATED APPROVED PERC TEST (JULY 2003)
  - DESIGNATED FAILED PERC TEST
  - △ DESIGNATED EXISTING WELL LOCATION
5. [Hatched Area] IS PRIVATE SEWAGE DISPOSAL AREA PER PLAT #8009
6. ALL WELLS AND PERC TESTS WERE FIELD-LOCATED BY THE LOT #8009 SURVEYOR.

Part of  
13.105, Isle of  
Mann Way  
Record

APPROVED FOR PRIVATE WATER AND PRIVATE SEWAGE SYSTEMS.  
HOWARD COUNTY HEALTH DEPARTMENT.  
*Barbara Brewster*  
COUNTY HEALTH OFFICER/PLC DATE

ISLE OF MANN WAY  
R=30.00  
L=25.33

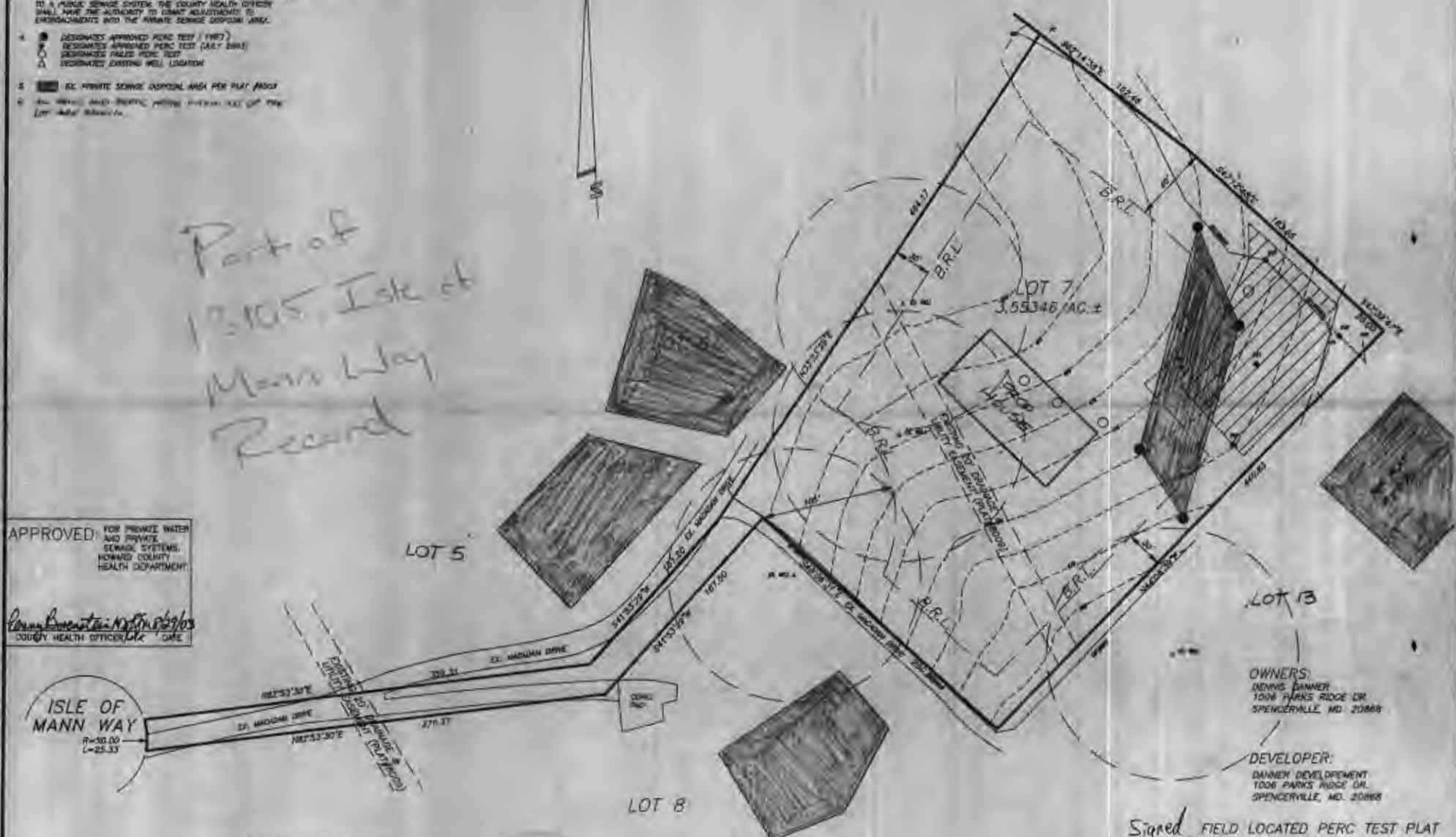
SHAMBERGER & LANE  
8738 TOWN & COUNTRY BLVD.  
SUITE 201  
ELICOTT CITY, MD. 21043  
PHONE: 410-481-3563  
FAX: 410-481-3697

PERC CERTIFICATION  
I CERTIFY THAT THE LOCATIONS SHOWN (●) HEREIN ARE BASED ON FIELD-LOCATIONS DONE UNDER MY DIRECT SUPERVISION, AND ARE CORRECT TO THE BEST OF MY PROFESSIONAL KNOWLEDGE AND BELIEF.  
*Scott Shamberger*  
SCOTT SHAMBERGER  
PROFESSIONAL LAND SURVEYOR #10845  
DATE 7/26/03

OWNERS:  
DENNIS BANNER  
1006 PARKS RIDGE DR.  
SPRINGVILLE, MD. 20868

DEVELOPER:  
DANNEN DEVELOPMENT  
1006 PARKS RIDGE DR.  
SPRINGVILLE, MD. 20868

Signed FIELD LOCATED PERC TEST PLAT  
PC519015 LOT 7  
KOANDAH GARDENS ESTATES  
SECTION 1 LOTS 3-10  
(PLAT #8009)  
D&M MAP 34 PARCEL 378  
3RD ELECTION DIST. HOWARD COUNTY, MD.  
SCALE 1"=30' JULY 21, 2003



DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS  
 3430 COURT HOUSE DRIVE  
 ELLICOTT CITY, MD 21043  
 PERMITS (410)313-2485 INSPECTIONS (410)313-1810  
 AUTOMATED INFORMATION (410) 313-3800

**HOWARD COUNTY  
 PERMIT APPLICATION**

**PERMIT NUMBER**  
800135013

Building Address 13111 ISLE OF MANN  
 HIGHLAND, MD. 20777-9788  
 Suite/Apt. #: \_\_\_\_\_ SDP/WP/Petition #: \_\_\_\_\_  
 Census Tract 605101 Subdivision KOANDAH GARDENS S-1  
 Section \_\_\_\_\_ Area \_\_\_\_\_ Lot 6  
 Tax Map 34 Parcel 78 Grid 22  
 Zoning RD800 Map Coordinates 14B11 Lot size 3.46 AC.

Property Owner's Name MIRA & THOMAS ENDLER  
 Address 13111 ISLE OF MANN  
 City HIGHLAND State MD. Zip Code 20777-9788  
 Home Phone 301-854-1586 Work Phone \_\_\_\_\_  
 Applicant's Name & Mailing Address, (if other than stated hereon):  
AL ERDI  
1460 RITCHIE PREMIERE  
1460 RITCHIE HWY. SUITE 108  
 Phone ARNOLD, MD. 21012 Fax \_\_\_\_\_

Existing Use DETACHED DWELLING  
 Proposed Use " w/ POOL  
 Estimated Construction Cost \$ 20,000-  
 Description of Work  
INSTALL IN THE REAR YARD  
AIR INGROUND SWIMMING POOL 19'x38'  
600" (3.5-8 DEEP) WITH FENCE (330')  
PER CODE. TO BE FILLED BY TRUCK.

Contractor Company SUNRISE PREMIERE  
 Contact Person DON SCYFFERTH  
 Address 1460 RITCHIE HWY. SUITE 108  
 City ARNOLD State MD. Zip Code 21012  
 License No. MINC # 45494  
 Phone 1-877-349-POOL Fax \_\_\_\_\_

Occupant or Tenant THE OWNERS  
 Contact Name SEE OWNER  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_

Engineer or Architect Company C.C.M.I.N.C.  
 Contact Person AL ERDI  
 Address P.O. BOX 333  
 City PHOENIX State MD. Zip Code 21131  
 Phone 410-592-5153 Fax \_\_\_\_\_

**BUILDING DESCRIPTION - COMMERCIAL**

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

**BUILDING DESCRIPTION - RESIDENTIAL**

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private
1st floor: _____	Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
2nd floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: <u>19'x38' POOL</u>	Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms _____	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other
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.

Applicant's Signature [Signature]  
 Title/Company RESIDENT  
C.C.M.I.N.C.

Print Name AL ERDI  
 Date 3/20/02

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

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID# <u>10587</u>
Land Development/DPZ			Front: _____	Filing fee \$ _____
State Highways			Rear: _____	Permit fee \$ <u>200</u>
Building Official			Side: _____	Excise tax \$ _____
Dev. Engineering/DPZ			Side St. _____	Add'l per. fee \$ _____
Health		<u>[Signature]</u>	All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ <u>210</u>
Fire Protection			Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>			Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
CONTINGENCY CONSTRUCTION START <input type="checkbox"/>			Lot Coverage for New Town Zone _____	Check <u>4156</u>
ONE STOP SHOP <input type="checkbox"/>			SDP/Red-line approval date _____	Validation <u>6/16/02</u>
Distribution of Copies: White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA			Accepted by <u>[Signature]</u>	





8/1/94  
ASAP  
7/25/94  
anytime

HOWARD COUNTY HEALTH DEPARTMENT  
Bureau of Environmental Health  
3525-H Ellicott Mills Drive  
Ellicott City, MD 21043  
461-9933

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation  Replacement   
 Receipt # \_\_\_\_\_ Date 7/22/94  
 Name of Installer GREG C. FRYFOGLE Telephone 526-0003  
 License Number 9081  
 Certified Well Pump Installer  Well Driller  Registered Plumber   
 Name of Property Owner TONY LANOINI Telephone 1-800-258-3883  
 Subdivision KOANDAH GARDENS Lot # 6 Well Tag # HO-88-0180  
 Site Address 1311 ISLE OF MANN WAY

**Pump**  
 1. Type  
 a. Deep well jet \_\_\_\_\_  
 b. Shallow well jet \_\_\_\_\_  
 c. Submersible   
 2. Make JACUZZI  
 3. Model # SANDHANDLER  
 4. Capacity 10 GPM  
 5. Pump exceeds well capacity Yes \_\_\_\_\_ No   
 6. If Yes, is low pressure cutoff switch installed? Yes \_\_\_\_\_ No \_\_\_\_\_  
 7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors \_\_\_\_\_ Cable guards  Other \_\_\_\_\_

**Motor**  
 1. Horsepower 3/4  
 2. RPM \_\_\_\_\_  
 3. Voltage \_\_\_\_\_  
 b. 220

**Pitless Adapter**  
 1. Make HARVARD  
 2. Model # PT 800  
 3. Depth 42" MIN

**Tank**  
 1. Capacity WX 250  
 2. Pressure relief valve? YES  
 Pitless adapter OK - Need PVC jacket over water line where less than 16 ft from static line - R/F 7/25/94

**Piping**  
 1. Type WELL PIPE 1/2" x 1/2"  
 2. Size 1"  
 3. NSF and/or BOCA Code approved YES  
 4. Depth of supply line 42"  
 10' PVC Jacket @ house OK R/F 8/1/94

**Well data**  
 1. Depth 265 ft.  
 2. Yield 15 GPM  
 3. Static water level \_\_\_\_\_ ft.  
 4. Will water supply be disinfected by installer? NO

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

Signature of Applicant: Greg C Fryfogle  
 Date: 7/22/94

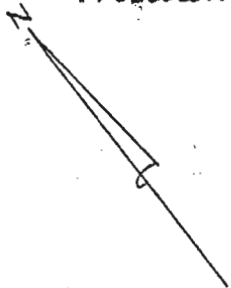
Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.

William E. Doyle

PROFESSIONAL LAND SURVEYOR 8440

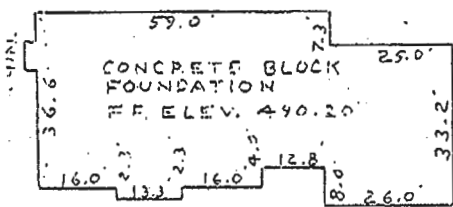
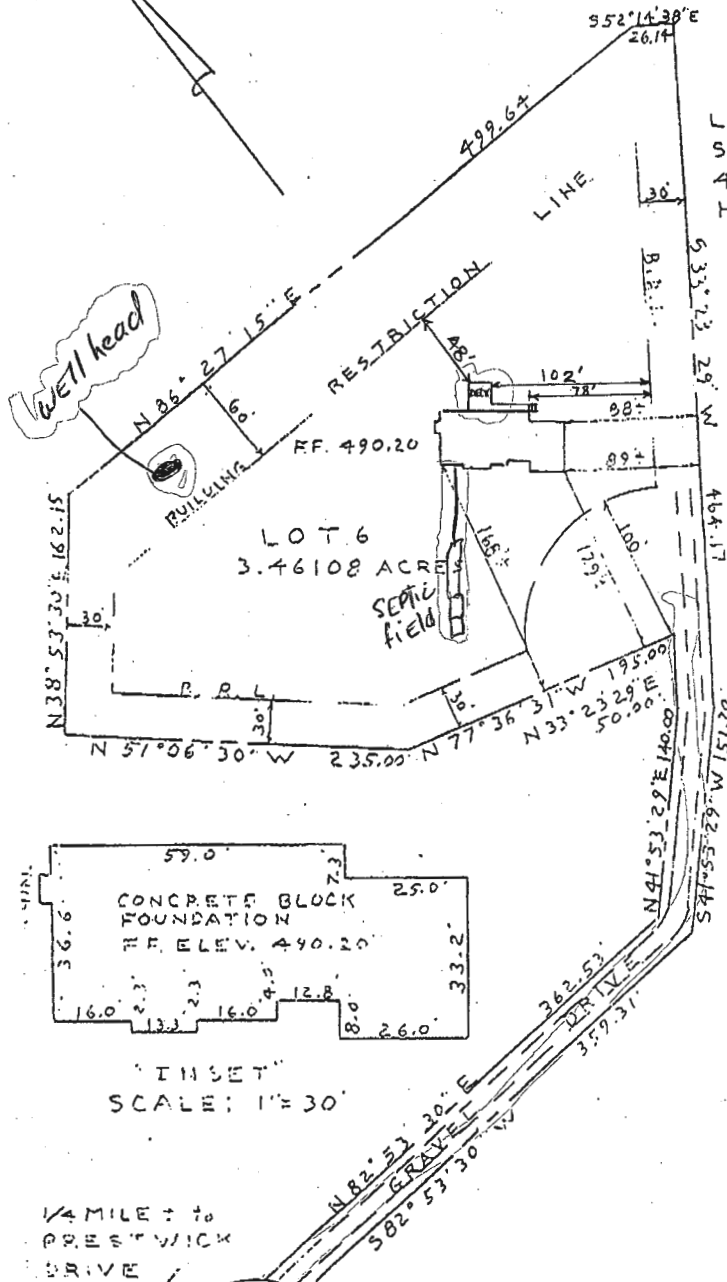
SINCE 1973

5312 EMERALD DRIVE SYKESVILLE, MARYLAND 21784 PHONE & FAX NO. (410) 795-2210



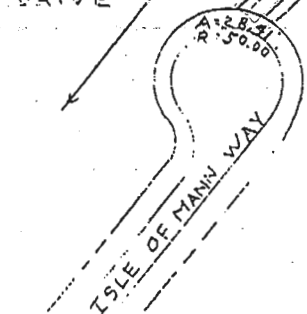
LOCATION SURVEY

ISLE OF MANN WAY  
LOT 6, KOANDAH GARDENS ESTAT  
SECTION 1, PLAT NO. 2009  
4TH ELECTION DISTRICT  
HOWARD COUNTY, MARYLA



"INSET"  
SCALE: 1" = 30'

1/4 MILE + to  
PRESTWICK  
DRIVE



THIS IS TO CERTIFY THAT THIS HOUSE  
DOES NOT LIE WITHIN A FLOOD PLAIN  
UNLESS SHOWN HEREON.

THIS IS TO CERTIFY THAT WE HAVE MADE A  
LOCATION SURVEY OF THE IMPROVEMENTS,  
AND THAT THEY ARE LOCATED ON THE LOT  
AS SHOWN HEREON.

SCALE \_\_\_\_\_ ft. - inch  
File No. 925-7

Signed This 08 day AUGUST 1924

William E. Doyle

NOTE: This plat cannot be used to establish  
property lines or corners.

For #59376

5/4/95

OK as shown.  
OK as per C.O. of  
6/24/94  
CBO