

6/3/94  
C/O 3:00  
6/6/94  
12:30

6/7/94  
11:00

# PERMIT

02-339854

## SEWAGE DISPOSAL SYSTEM

### DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 49903A

A 38527

DISTRICT 2nd

DATE 3/1/94

DATE SYSTEM APPROVED 6/7/94

INSPECTOR C.B.

HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
~~XXXXXX~~ 313-2640

INDEXED

South Carroll Backhoe, Inc./Paul Schissler IS PERMITTED TO INSTALL X ALTER       

ADDRESS 4410 Salem Bottom Road, Westminster, Maryland 21157 PHONE 875-4197

SUBDIVISION Burleigh Manor LOT 696 ROAD 10348 Kingsbridge Road

PROPERTY OWNER Warren & Arlene Ross

ADDRESS \_\_\_\_\_

SEPTIC TANK CAPACITY 1500 GALLONS

NUMBER OF BEDROOMS 5

210 SQUARE FEET PER BEDROOM

210  
S  
1050  
320  
31050  
1

LINEAR FEET OF TRENCH REQUIRED 350 ✓

TRENCHES - Trench to be 3 feet wide. Inlet 4½ feet below original grade. Bottom maximum depth 6½ feet below original grade. Effective area begins at 4½ feet below original grade. Effective area begins at 4½ feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Start first trench 80 feet from left lot line and 300 feet from front lot line.

NOTES - Run trenches on contour toward right side of lot.  
- No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 2/28/94 DKS

PLANS APPROVED BY Mark Rifkin DATE 12/19/89

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

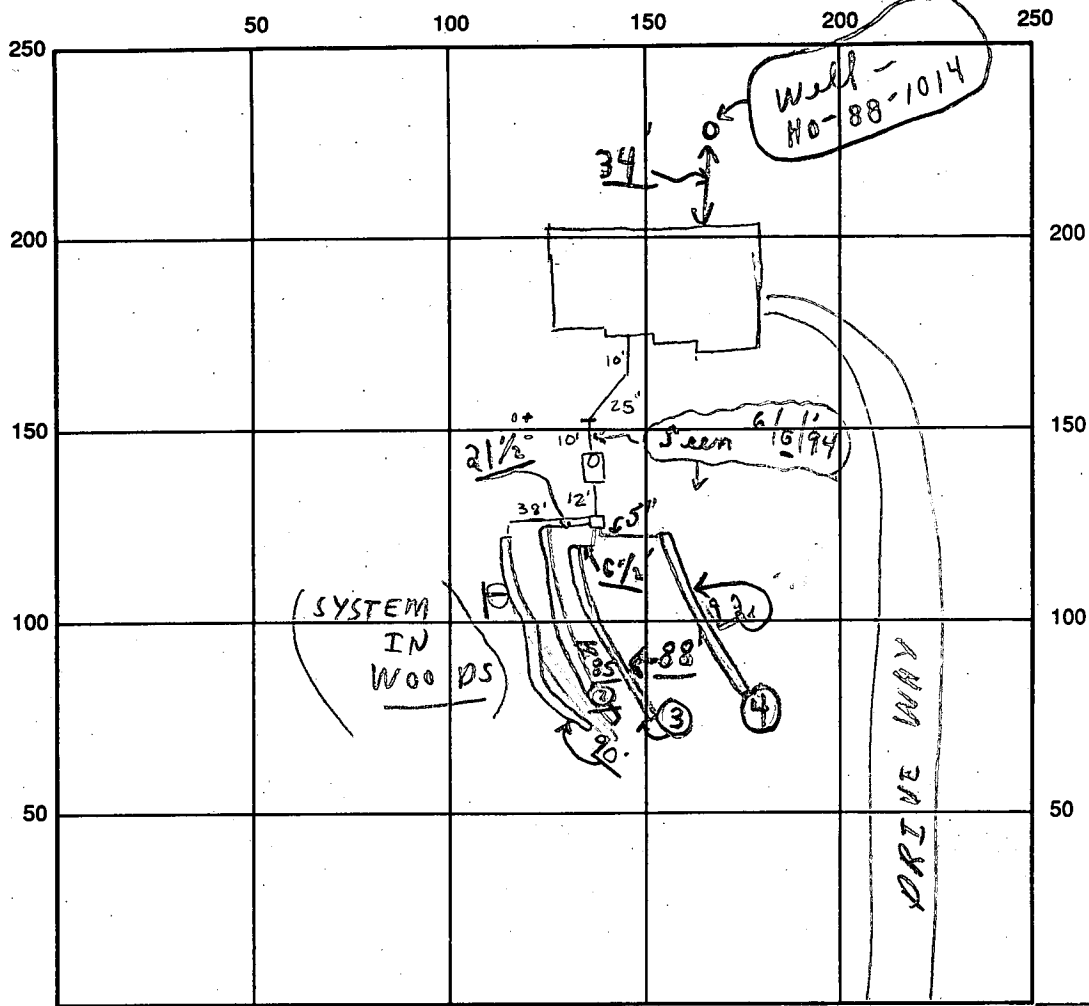
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON. CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

BLDG. PERMITS SIGNED AND RETURNED 11/9/90  
B00127370 Finish bsmt add closet  
BLDG. PERMITS SIGNED AND RETURNED 3/28/01 D00129225 SPA'S

A 38527



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

KINGSBIDGE ROAD, T.

SEPTIC TANK LEVEL OK CLEANOUTS OK (Mandhole Type)

DISTRIBUTION BOX LEVEL OK (Baffle is in)

DRAIN FIELD/TILE DEPTH 6 1/2 - 6 FT. TRENCH WIDTH 3' FT. INLET DEPTH 4 1/2' FT.

EFFECTIVE GRAVEL DEPTH 2' FT. TOTAL LENGTH 285' FT. } = 355

NUMBER OF TRENCHES 4 ONE SIDEWALL/BOTTOM AREA 1065 SQ. FT.

DRYWALL INSIDE DIAMETER      FT. EFFECTIVE DEPTH BELOW INLET      FT.

ABSORBENT AREA 1065<sup>+</sup> SQ. FT.

REMARKS: 6/3/94 OK to fill last 10' of trench w/ stone; cover. Call for reinspection Am  
6/6/94 partial ok to cover from house to dist. box and 3 trenches  
 (Note: 17' trench ④ left to dig and check @ next hole if not covered only)  
6/7/94 Final - last trench complete ok to cover all work.

P.M. 6/6/94 W.P.I. - ok - C.R.

DATE SYSTEM APPROVED 6/7/94 INSPECTOR Charles Deegan Stecker

# APPLICATION

PERCOLATION TESTING

A 38527

P \_\_\_\_\_

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

*3/19/88  
per OR 10 pending  
approved plat  
(B)*

DISTRICT \_\_\_\_\_

DATE 1-28-87

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 Gerald M. Katz, Trustee <sup>WARREN + Arlene Ross</sup> c/o Whitman, Requardt and Associates

ADDRESS 2315 Saint Paul Street, Baltimore, MD 21218 PHONE 410-465-1070  
(301) 235-3450

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

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

PROPERTY LOCATION: LOT 1016 on Prelim

SUBDIVISION Burleigh Manor Section 2 LOT NO. 10

ROAD AND DESCRIPTION West of the intersection of Centennial Lane and Old Annapolis Road  
(10348 Kingsbridge Road)

TAX MAP 23, 24 PARCEL # 290

SIZE OF LOT 3 Ac. TYPE BLDG. Single Family Dwelling  
(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.

*Stenslan*

(SIGNATURE OF APPLICANT)

APPROVED BY B Nipen FOR shallow system only DATE 2/9/88

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

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

REASONS FOR REJECTION OR HOLDING for field located holes & sub - plat

BLDG. PERMIT SIGNED  
AND RETURNED 11/30/83  
Serial # 57357  
SFD - 5 Bedrooms

# THIS IS NOT A PERMIT

210  
~~DATE~~ / BDRON  
 SWEST 4 1/2  
 MAX D 8 1/2  
 X̄ = 11" MIN

LOT LINES ADJUSTED  
 ON PASLIM (2/19/58)

③

SOIL PROFILE

brown/red  
 orange clay  
 (heavy)  
 3 1/2"  
 to orange  
 tan silty  
 loam w/  
 20% small  
 eye weathered  
 shell frags  
 7"  
 11" hard

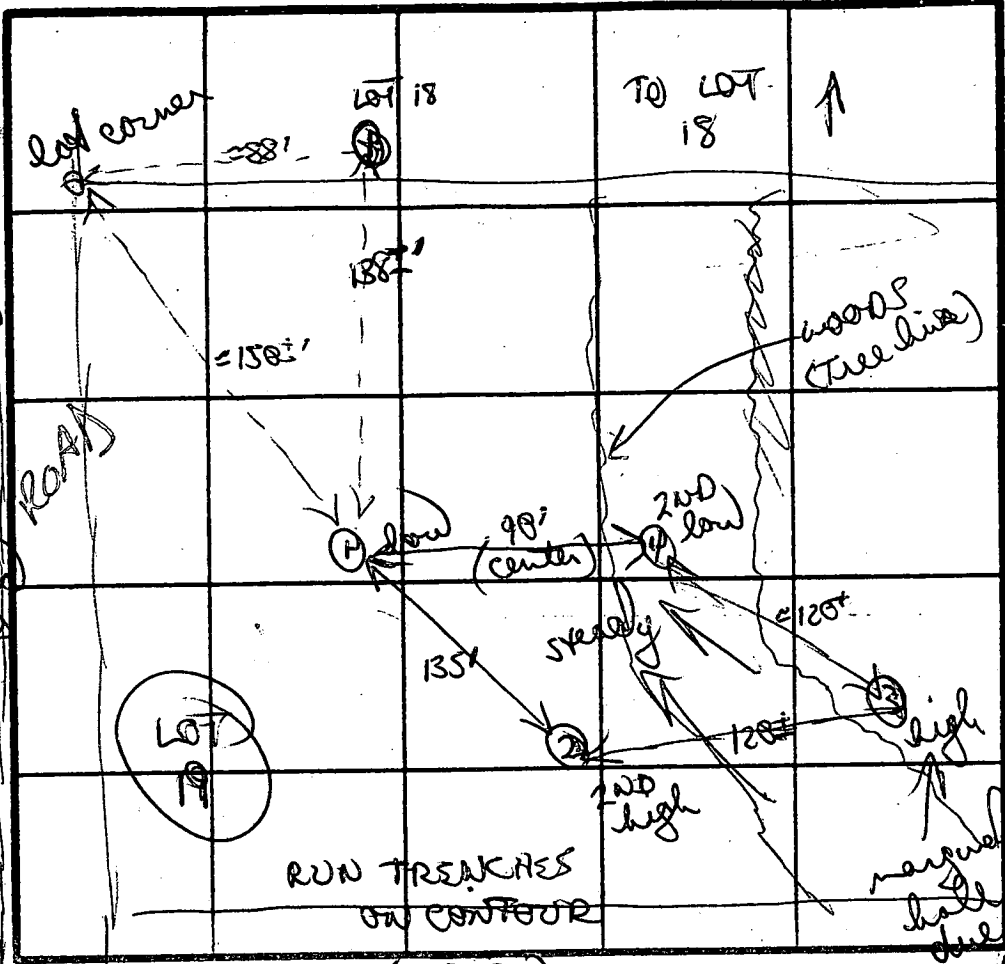
②

orange/brown  
 clay to clay  
 loam 3 1/2"  
 to mostly  
 orange tan  
 powdery silty  
 mica loam  
 410% small  
 weathered shell  
 frags scattered

12" D

①

Brown chert  
 gravelly 4"  
 (clay)  
 to mostly  
 tan/grey  
 silty mica  
 loam w/  
 small shell  
 frags b



orange clay  
 mixed w/  
 tan silty  
 loam 4 1/2"  
 to mostly  
 tan/brown  
 silty mica  
 loam

12" D  
 well area

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
	①	4' S	242	256	256	326	30 MIN	
		12' D	bottom (see profile)					
	②	4' S	245	254	254	309	15 MIN	
		12' D	bottom (see profile)					
	③	3 1/2' S	254	318	318	323	5 MIN	
		7' M	214	316	316	318	2 MIN	
		11' D	hard bottom (see profile)					
	④	4 1/2' S	257	303	303	308	5 MIN	
		12' D	bottom (see profile)					

(SHALLOW SYSTEM ONLY)

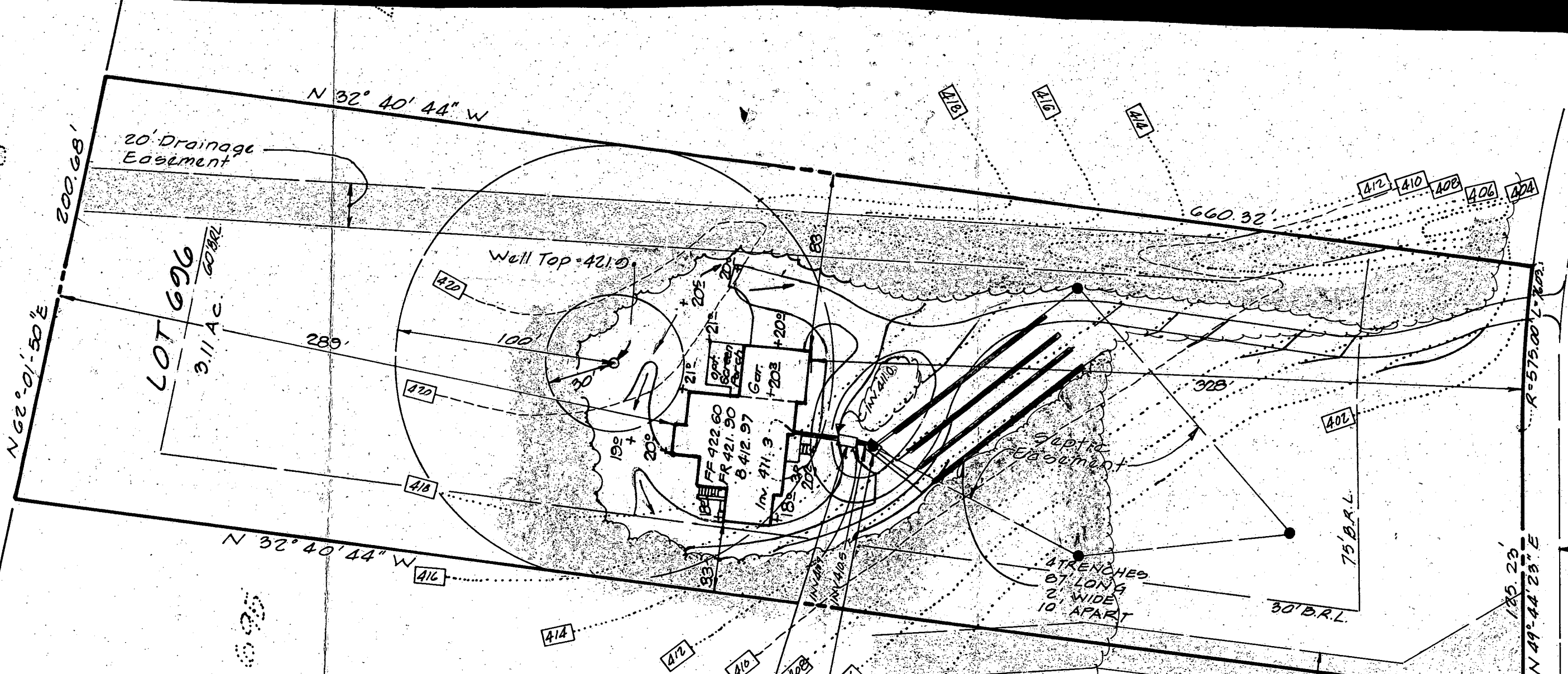
REMARKS original perc shape triangular; added 4th (20% low) hole. Others dug as per plot.

TYPE OF SOIL Chester soils; tan grey silty loam

TESTED BY B. Noyan

ALSO PRESENT Rocky, Bill

LOT 696  
3.11 AC  
60' B.R.L.



1500 GAL SEPTIC  
TANK  
EX. GRD. 416.5  
MANHOLE  
REQ'D ON S.T.

DISTRIBUTION BOX  
EX. GRD 415.0  
INVERT 410.5

BP 51354 5 BR elevations OK MR 11/30/93

Macadam Road  
26' B.R.L.

B 1 5672 SEQUENCE NO. (DP USE ONLY)  
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3 ON ALL CARDS)

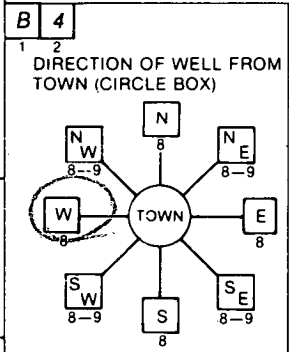
STATE OF MARYLAND PERMIT TO DRILL WELL  
 please print or type

STATE PERMIT NUMBER  
 HO-88-1014  
 fill in this form completely

Date Received (APA) 052389  
 OWNER INFORMATION  
 Last Name: CAVALIER, First Name: BAUM, Street or RFD: 1777 KENNISTERS TOWN RD, Town: BALTIMORE, State: MD, Zip: 21202

LOCATION OF WELL  
 COUNTY: HOWARD  
 SUBDIVISION: RURALICA MANOR  
 SECTION: 2, LOT: 696  
 NEAREST TOWN: ELLICOTT CITY  
 MILES FROM TOWN: 3.2 MI

DRILLER INFORMATION  
 Driller's Name: Joseph L. Mayne, License No. 705  
 Firm Name: Joseph L. Mayne Well Drilling  
 Address: 5512 RINGBROOK DR, JENKINS 21771  
 Signature: Joseph L. Mayne, Date: 5/22/89



NEAR WHAT ROAD: Kingsbridge Rd.  
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): WEST  
 DISTANCE FROM ROAD: 400 FT  
 ENTER FT or MI: FT

WELL INFORMATION  
 APPROX. PUMPING RATE (GAL. PER MIN.): 5  
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY): 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)  
 HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)  
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)  
 INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)  
 PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)  
 TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL  
 COUNTY NAME: Howard, COUNTY NO.: A38527  
 STATE SIGNATURE: Mark E. Riffin, DATE ISSUED: 2/21/90  
 NORTH GRID: 521000, EAST GRID: 0834000

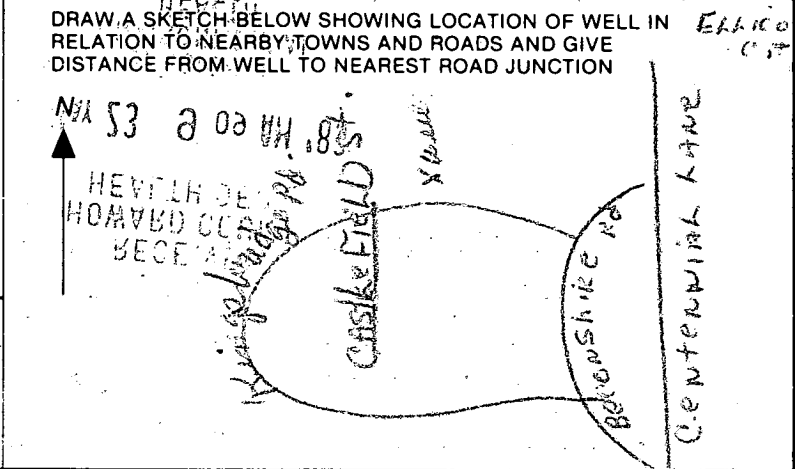
APPROXIMATE DEPTH OF WELL: 300 FEET

APPROXIMATE DIAMETER OF WELL: 6 INCH

METHOD OF DRILLING (circle one)  
 BORED (or Augered) AIR-ROTARY  
 JETTED AIR-PERCussion  
 Jetted & DRIVEN ROTARY (Hydraulic Rotary)  
 CABLE REVERSE-ROTARY  
 Drive-POINT  
 other: \_\_\_\_\_

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X  
 SOURCES OF DRILLING WATER:  
 1. WELL  
 2. \_\_\_\_\_  
 3. \_\_\_\_\_  
 WRITE THE BOX NUMBER FROM THE MAP HERE:  
 N 8324, E 5221  
 DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION

REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)  
 THIS WELL WILL NOT REPLACE AN EXISTING WELL  
 THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED  
 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY  
 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 (OEP USE ONLY)  
 APPROP. PERMIT NUMBER: \_\_\_\_\_ GAP \_\_\_\_\_  
 FORCE: MR, PERMIT NO.: HO-88-1014

SPECIAL CONDITIONS  
 COUNTY

C1 1128

SEQUENCE NO. (DENV USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

COUNTY NUMBER A38527

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED

Depth of Well 925 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-83-1014

OWNER Greenbaum, Isaac last name first name KING BRIDGE RD TOWN ELLEOTT CITY SUBDIVISION RIVER W. H. MANOR SECTION LOT 1 696

WELL LOG table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Includes handwritten entries: SANDstone, 19, 19, 925, and Corry Area Rock.

GROUTING RECORD section: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL: CEMENT (CM), BENTONITE CLAY (BC), NO. OF BAGS: 7, NO. OF POUNDS: 658, GALLONS OF WATER: 42, DEPTH OF GROUT SEAL: 21 ft.

CASING RECORD section: casing types insert appropriate code below: ST (STEEL), CO (CONCRETE), PL (PLASTIC), OT (OTHER). MAIN CASING TYPE: SA, Nominal diameter: 2, Total depth: 94.

OTHER CASING (if used) section: diameter, depth (feet) from to.

SCREEN RECORD section: screen type or open hole insert appropriate code below: ST (STEEL), BR (BRASS), HO (OPEN HOLE), PL (PLASTIC), OT (OTHER).

DEPTH (nearest ft.) table with rows for EACH CASING and SCREEN. Includes SLOT SIZE and DIAMETER OF SCREEN information.

CIRCLE APPROPRIATE LETTER: A (WELL WAS ABANDONED AND SEALED), E (ELECTRIC LOG OBTAINED), P (TEST WELL CONVERTED TO PRODUCTION WELL).

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT...

DRILLERS IDENT. NO. 38

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

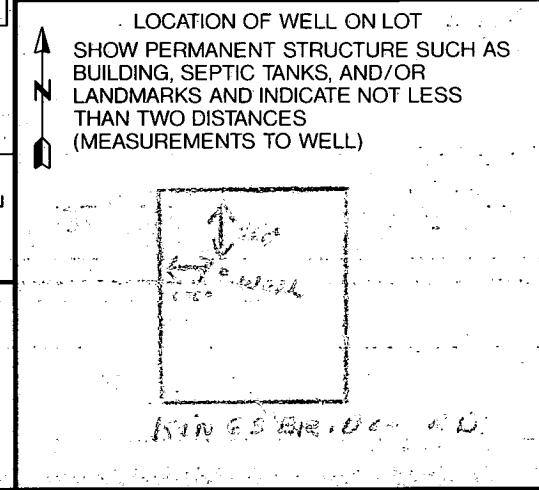
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

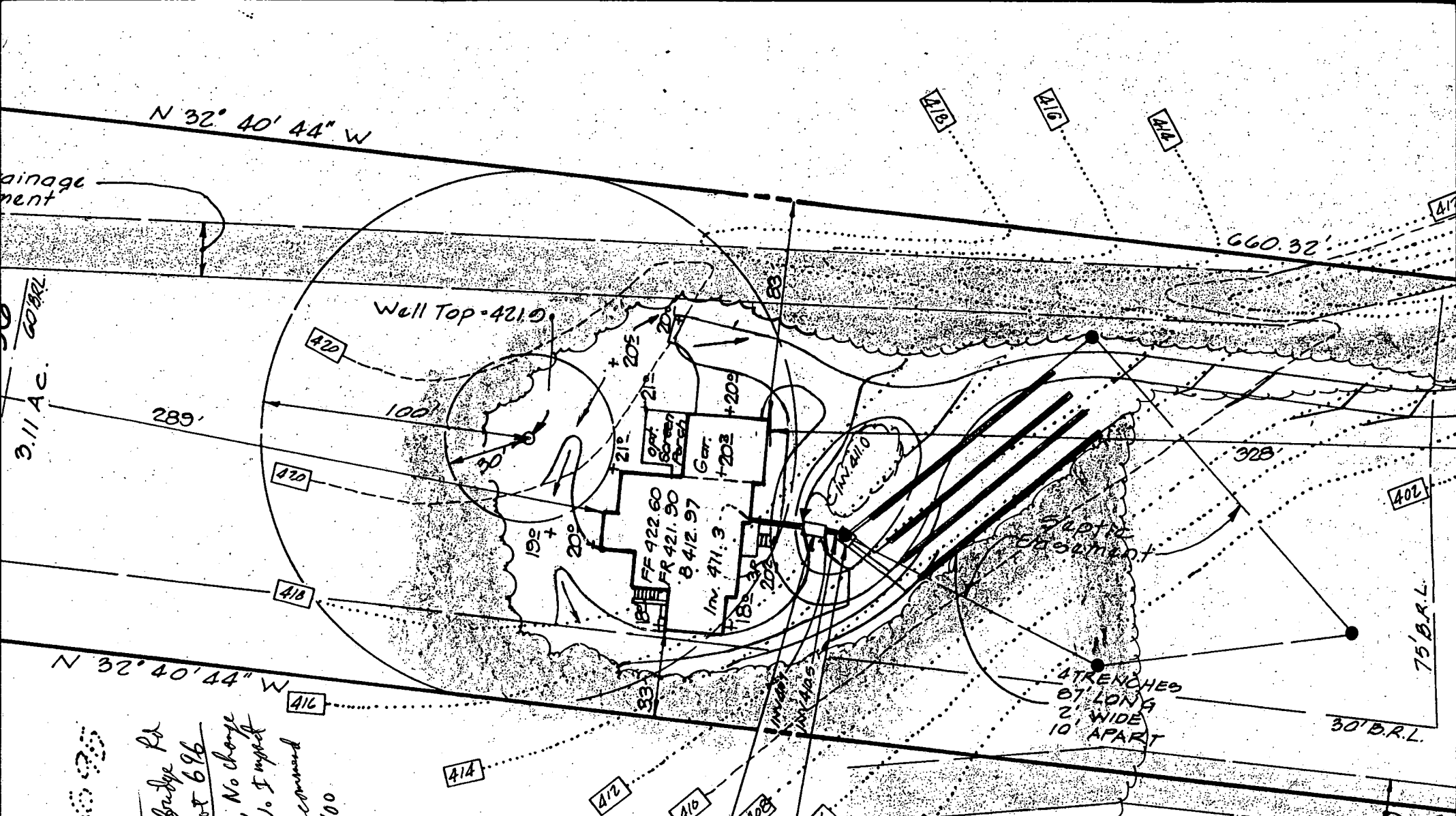
OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER): T (E.R.O.S.), W Q (74, 75, 76), TELESCOPE CASING, LOG INDICATOR, OTHER DATA.

PUMPING TEST section: PUMPING TEST, HOURS PUMPED: 3, PUMPING RATE: 606 gal. per min., METHOD USED TO MEASURE PUMPING RATE: bucket, WATER LEVEL: 24, WHEN PUMPING: 134, TYPE OF PUMP USED: S (submersible).

PUMP INSTALLED section: DRILLER WILL INSTALL PUMP: YES NO, TYPE OF PUMP INSTALLED: S, CAPACITY: GALLONS PER MINUTE, PUMP HORSE POWER, PUMP COLUMN LENGTH, CASING HEIGHT: + above, - below, LAND SURFACE.







B00/27370  
 10345 Kingsbridge Rd  
 Dunleigh Manor Lot 696  
 Interior Work only. No change  
 in Bedroom Size. No Impact  
 on well or Septic. Recommended  
 approval. App 11/8/00

1500 GAL SEPTIC  
 TANK  
 EX. GRD. 416.5  
 MANHOLE  
 REQ'D ON S.T.

DISTRIBUTION BOX  
 EX. GRD 415.0  
 INVERT 410.5

20' Drainage  
 Easement

BP 51354 5 BR elevations OK MR 11/30/93

Building Address 10348 KINGSBRIDGE ROAD,  
ELLICOTT CITY, MARYLAND 21042

Suite/Apt. #: \_\_\_\_\_ SDP/WP/Petition #: \_\_\_\_\_

Census Tract \_\_\_\_\_ Subdivision BURLEIGH MANOR

Section 2 Area \_\_\_\_\_ Lot 696

Tax Map 23 Parcel B-2 Grid \_\_\_\_\_

Zoning \_\_\_\_\_ Map Coordinates \_\_\_\_\_ Lot size 3.11 AC.

Property Owner's Name WARLEN CARLEVE LOSS

Address 10348 KINGSBRIDGE ROAD

City ELLICOTT CITY State MD Zip Code 21042

Home Phone (410) 750-9248 Work Phone (410) 531-2224

Applicant's Name & Mailing Address, (if other than stated hereon): \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Existing Use SINGLE FAMILY DWELLING

Proposed Use SAME, WITH SPAS

Estimated Construction Cost \$ 20,500.00

Description of Work CONCRETE IN-GROUND SPAS WITH D.E. FILTER  
1- SPA 150" AND 1 SPA 50"  
3.6' DEEP AND 3.0' DEEP  
1,100 LIN FEET OF 4" HIGH FENCE PER CODE

Contractor Company ANTHONY & SYLVAN POOLS, INC.  
AGENT FOR

Contact Person GEORGE A. SCHWEICH CONTRACTOR

Address 10840 GUILDFORD ROAD, SUITE 407

City ANNAPOLIS State MD Zip Code 20701

License No. 19347

Phone (301) 490-1930 Fax (410) 742-2818

Occupant or Tenant SAME AS OWNER

Contact Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Engineer or Architect Company N/A

Contact Person A

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ 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"/>
Use group: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Construction type: <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame	Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <input type="checkbox"/> Propane Gas <input type="checkbox"/>
<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 <input type="checkbox"/> # of Heads _____

**BUILDING DESCRIPTION - RESIDENTIAL**

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
Depth _____ Width _____	Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
1st floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
2nd floor: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: _____	Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/>	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other: _____
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	
No. of Bedrooms _____	
Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	
Other Structure: <u>IN-GROUND SPAS</u>	
Dimensions: <u>150" AND 50"</u>	
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 THEREIN; (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 IN SUCH INSTANCES.

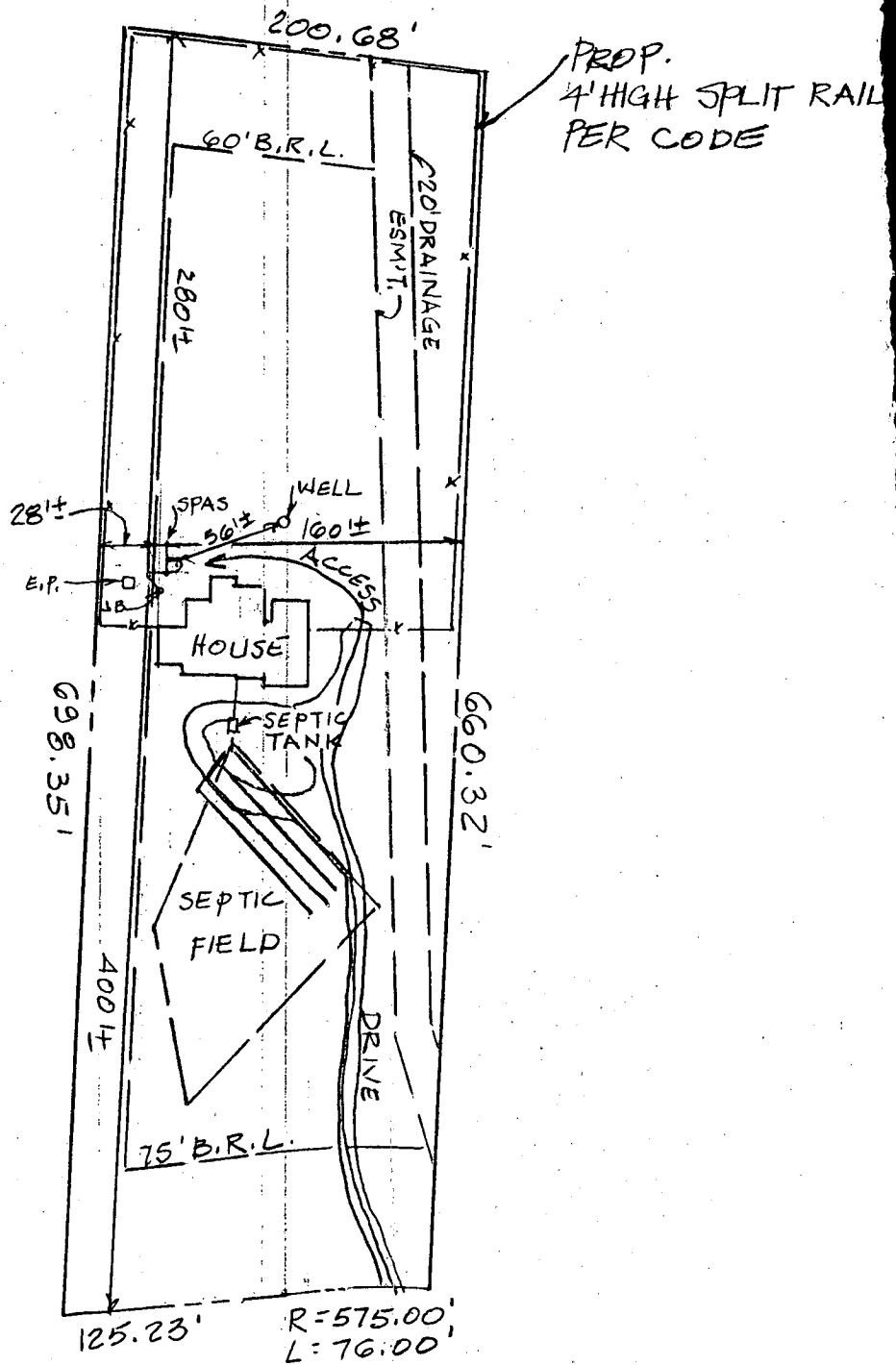
George A. Schweich  
 Applicant's Signature  
AGENT FOR CONTRACTOR  
 Title/Company

GEORGE A. SCHWEICH  
 Print Name  
MARCH 28, 2001  
 Date

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#
Land Development, DPZ			Front: _____	Filing fee \$ _____
State Highways			Rear: _____	Permit fee \$ _____
Building Official			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ			Side St: _____	Sub-total paid \$ _____
Health	<u>step 1</u>	<u>[Signature]</u>	All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	Add'l permit fee \$ _____
Fire Protection			Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
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 # _____
ONE STOP SHOP: <input type="checkbox"/>			SDP/Red-line approval date _____	Validation # _____
			Accepted by _____	

step 1  
 proposed spa  
 location OK  
 as shown



KINGSBRIDGE ROAD

LOT 696

3.11 AC.

SCALE: 1" = 100'