

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

B00156290

Building Address 14910 Bushy Park Road
Woodbine, MD 21797
 Suite/Apt. #: 04 314069 SDP/WP/Petition #: _____
 Census Tract 604001 Subdivision _____
 Section _____ Area _____ Lot _____
 Tax Map RC-080 Parcel 69 Grid 21
 Zoning Map Coordinates 4A13 Lot size 3 Acres

Property Owner's Name Christopher G. and Joanne T. Allen
 Address 14910 Bushy Park Road
 City Woodbine State MD Zip Code 21797
 Home Phone 410-489-7873 Work Phone 443-745-3631
 Applicant's Name & Mailing Address, (if other than stated hereon):
 Phone _____ Fax _____

Existing Use single family home
 Proposed Use single family home future
 Estimated Construction Cost \$ 4350,000
 Description of Work build new single family home
and remove existing single family home
5 bedroom, 6 1/2 bath, 3 car attached garage,
finished basement

Contractor Company Owner
 Contact Person Christopher Allen
 Address 14910 Bushy Park Road
 City Woodbine State MD Zip Code 21797
 License No. _____
 Phone 410-489-7873 Fax 410-489-7873

Occupant or Tenant Christopher G. and Joanne T. Allen
 Contact Name Christopher Allen
 Address 14910 Bushy Park Road
 City Woodbine State MD Zip Code 21797
 Phone 410-489-7873 Fax 410-489-7873

Engineer or Architect Company Owner
 Contact Person Christopher Allen
 Address 14940 Bushy Park Road
 City Woodbine State MD Zip Code 21797
 Phone 410-489-7873 Fax 410-489-7873

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"/> 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: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____	Sprinkler system: N/A <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____
_____ State Certified Modular	

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1st floor: 95' 10 1/2" 55' 4 1/2" 2nd floor: 52' 0" 51' 6" Basement: 95' 10 1/2" 55' 4 1/2" Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms <u>5</u> Height: _____ 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 Height: _____ _____ State Certified Modular _____ Manufactured Home	Water Supply: _____ Public _____ Private _____ Sewage Disposal: _____ Public _____ Private _____ Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> 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 checked="" type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____

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 _____
 Title/Company _____
 Print Name Christopher Allen
 Date 1-30-15

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		
Fire Protection		
Sediment Control approval required prior to issuance?		
YES <input type="checkbox"/> NO <input type="checkbox"/>		
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>		
ONE STOP SHOP: <input type="checkbox"/>		

DPZ SETBACK INFORMATION	PROPERTY ID#
Front: _____	Filing fee \$ <u>100</u>
Rear: _____	Permit fee \$ _____
Side: _____	Excise tax \$ _____
Side St.: _____	Add'l per. fee \$ _____
All minimum setbacks met?	TOTAL FEES \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Is Entrance Permit required?	Balance due \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # <u>14547</u>
Historic District?	Validation # _____
YES <input type="checkbox"/> NO <input type="checkbox"/>	
Lot Coverage for NewTown Zone _____	
SDP/Red-line approval date _____	

Distribution of Copies: _____
 White: Building Official
 Green: LDD, DPZ
 Yellow: DED, DPZ
 Pink: Health
 Gold: SHA
 Accepted by _____
 Rev. 11/4/04

10-12-05 OK

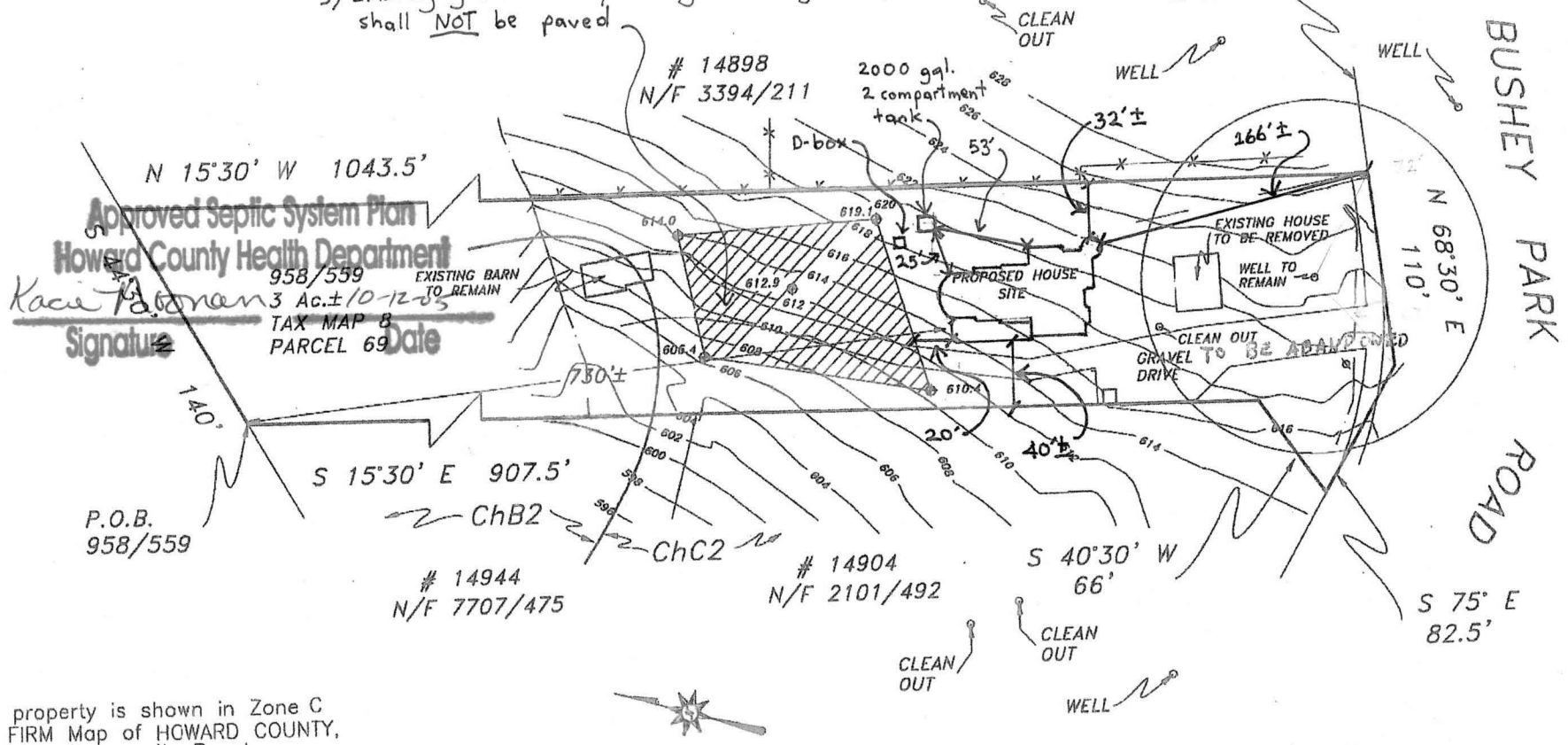
NOTES:

- 1) ALL EXISTING WELLS AND SEPTIC WITHIN 100' OF THE PROPERTY BOUNDARY HAVE BEEN SHOWN.
- 2) THE TOPOGRAPHY SHOWN HEREON IS DERIVED FROM A FIELD RUN SURVEY PERFORMED BY N.T.T. ASSOC. INC. IN APRIL 2005.
- 3) EXISTING CLEANOUT TO BE ABANDONED.

- 4) THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF A MINIMUM OF 10,000sq' AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWERAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWER IS AVAILABLE. THIS EASEMENT SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWER SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT ADJUSTMENTS TO THE PRIVATE SEWERAGE EASEMENT. RECORDATION OF A MODIFIED SEWERAGE EASEMENT PLAT SHALL NOT BE REQUIRED.
- 5) Existing gravel driveway through sewerage easement shall NOT be paved

F.F Elev. 627.1
 Base. Elev. 616.4
 Exist. Elev 620.0
 @ septic tank
 Elev. to top 618.5
 of septic tank

Invert into Tank 617.5
 Invert @ house 618.3
 (note: House to have ejector pump for basement)
 Elev. @ well 623.0
 (Well tag # H0-94-0125)



Approved Septic System Plan
 Howard County Health Department
 Kacie Taboran
 Signature
 958/559
 3 Ac.± 10-12-05
 TAX MAP 8
 PARCEL 69
 Date

Subject property is shown in Zone C on the FIRM Map of HOWARD COUNTY, Maryland on Community Panel 240044 0042 B.Effective DECEMBER 4, 1986

This is to certify that I have surveyed the property shown hereon, being known as # 14910 BUSHEY PARK ROAD

and recorded among the land records of HOWARD County, Maryland in Liber 958 FOLIO 559 for the purpose of locating the improvements thereon.

APPROVED FOR PRIVATE WATER AND SEWERAGE SYSTEMS

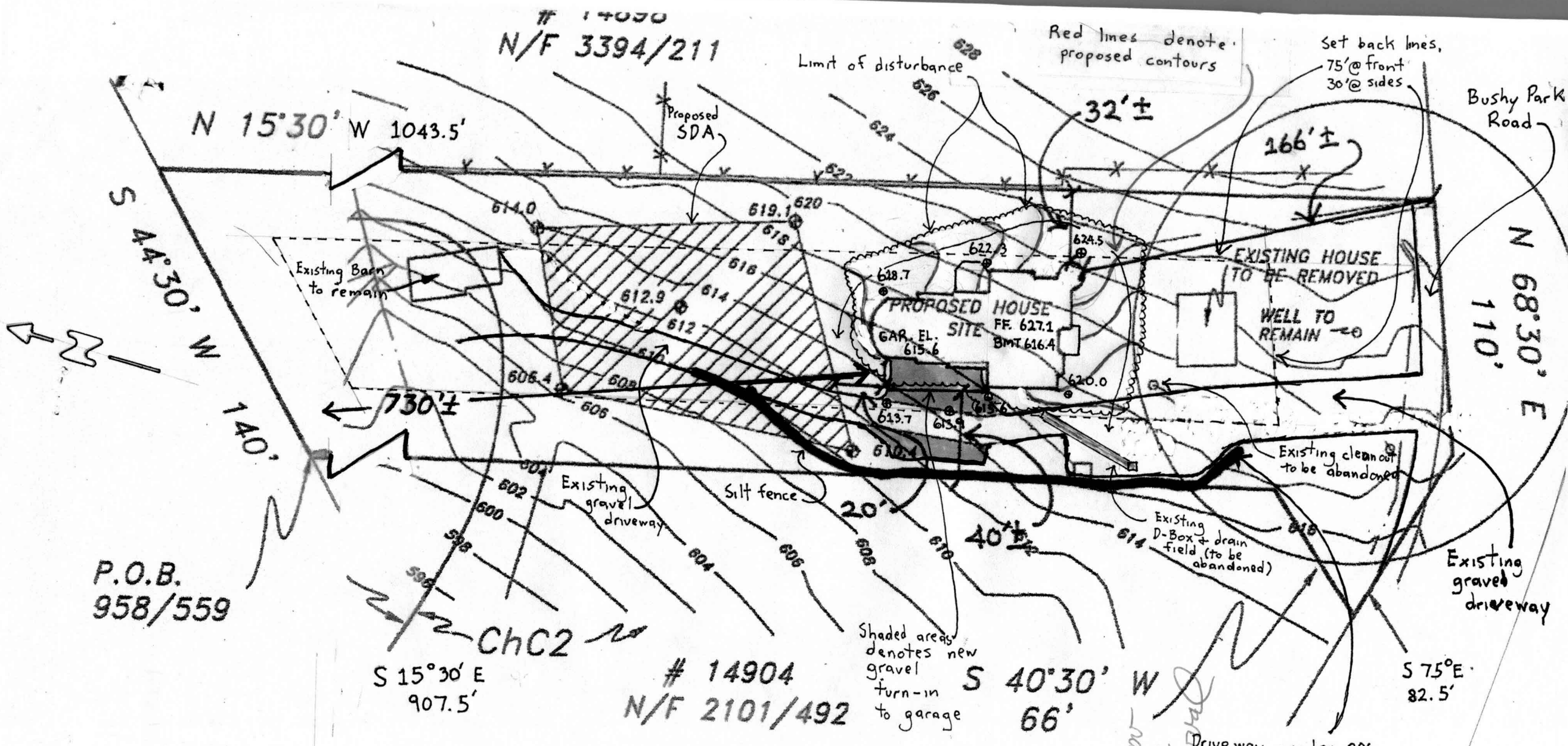
Robert A. Wade 6/3/05



PERC CERTIFICATION PLAN
 14910 BUSHEY PARK ROAD
 4th ELECTION DISTRICT
 HOWARD COUNTY, MD.

NTT Associates, Inc.
 16205 Old Frederick Road
 Mt. Airy, Maryland 21771
 Ph. (410)442-2031
 Fax No. (410)442-1315

Scale: 1"=100'
 Date: 08MAY05
 Field By: RIK
 Drawn By: RIK
 Drawing # MISC8359



- Notes:
- 1) No trees to be removed.
 - 2) Source of topography: field run survey by NTT Associates, Inc in April 2005.
 - 3) Existing gravel driveway to be used, existing drive consists of min. 4" of #7 stone over a base of 4" of #3 stone above geo-textile fabric.

10/5/05
 driveway grade not allowed
 new septic easement
 (RA)
 Is driveway gravel? I will submit variance to allow existing driveway for possible approval

Owner: Christopher and Joanne Allen
Builder: Stigler-Allen Construction, Inc.
Address: 14910 Bushy Park Road
Date: 9/27/05