

HOWARD COUNTY  
 PERMIT APPLICATION

PERMIT NUMBER  
B00158884

Building Address 13908 Folly Quarter Rd  
Ellicott City, Md 21040  
 Suite/Apt. #: 03-242727 SDP/WP/Petition #: \_\_\_\_\_  
 Census Tract \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Section \_\_\_\_\_ Area \_\_\_\_\_ Lot \_\_\_\_\_  
 Tax Map 22 Parcel 565 Grid 16  
 Zoning \_\_\_\_\_ Map Coordinates 10B11 Lot size 2.68 AC

Property Owner's Name Daniel Alteri  
 Address 13908 Folly Quarter Rd.  
 City Ellicott City State MD Zip Code 21040  
 Home Phone 410-796-2714 Work Phone \_\_\_\_\_  
 Applicant's Name & Mailing Address, (if other than stated hereon):  
 Phone 410-796-3714 Fax \_\_\_\_\_

Existing Use SEW  
 Proposed Use SEW Pool  
 Estimated Construction Cost \$ 46,800  
 Description of Work Improved pool - 22' x 40' - depth 3'6" - 5'6" - Filled by truck. Fence by owner.

Contractor Company Blue Haven Pools  
 Contact Person \_\_\_\_\_  
 Address 9104 Industry Dr  
 City MANASSAS State Va. Zip Code 20108  
 License No. 30083  
 Phone 888-257-0007 Fax \_\_\_\_\_

Occupant or Tenant owner  
 Contact Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_

Engineer or Architect Company \_\_\_\_\_  
 Contact Person \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: _____	Water Supply: _____ <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
No. of stories: _____	Sewage Disposal: _____ <input type="checkbox"/> Public <input checked="" 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: _____ <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"/>
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 Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: _____ <input type="checkbox"/> Public <input checked="" 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: _____ <input type="checkbox"/> Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> <input type="checkbox"/> Crawlspace <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	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"/>
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: _____
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: _____	
<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 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.

Daniel Alteri  
 Applicant's Signature  
Blue Haven Pools  
 Title/Company

Daniel A. Minsick (Agent)  
 Print Name  
4/5/06  
 Date

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	<u>4/5/06</u>	<u>[Signature]</u>
Health		
Fire Protection		
Is 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 \$ _____
Rear: _____	Permit fee \$ _____
Side: _____	Excise tax \$ _____
Side St.: _____	Add'l per. fee \$ _____
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Historic District? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Balance due \$ _____
Lot Coverage for New Town Zone _____	Check # <u>7975</u>
SDP/Red-line approval date _____	Validation # _____

HENRY E. NIESE & WF  
12924 FOLLY QUARTER ROAD  
MAP 22, PARCEL 191

12908 FOLLY QUARTER ROAD  
MAP-22, PARCEL 565  
8878/72

**APPROVED**  
WALK-THRU BUILDING PERMIT

BP# 600158884 A# 521568  
APP. SAN sf DATE 5/5/06  
DESC. OF WORK: 22' x 4' pool  
improvement  
pool

EX WELL  
HO-94-4100

FENCE PER CODE  
BY OWNER

EX. SEPTIC

L.O.D.

F.F.E. 516.5  
B.E. 506.5

PRIVATE SEWERAGE  
EASEMENT  
(10,100 S.F.)

PROP. DRIVEWAY @ 6.7%

S 45°09' E 208.70'

N 45°09' W 208.70'

EX. FENCE  
(TO BE  
REMOVED)

EX. DRIVEWAY TO BE REMOVED

GREIG G. ALTIERI  
12904 FOLLY QUARTER ROAD  
MAP 22, PARCEL 96  
8882/631

PRIVATE SEWERAGE  
EASEMENT  
(10,000 S.F.)

EX WELL  
HO-94-4099

EX DRIVE (TO REMAIN)

EX. DRIVE (TO REMAIN)

EX. DRIVE (TO REMAIN)

N 47°47' E 293.03'

N 47°47' E 590.00'

311'

100'

410'

L.O.D.

L.O.D.

L.O.D.

L.O.D.

L.O.D.

L.O.D.

L.O.D.

L.O.D.

L.O.D.

L.O.D.

L.O.D.

L.O.D.

L.O.D.

L.O.D.

L.O.D.

L.O.D.

L.O.D.

L.O.D.

L.O.D.

L.O.D.

L.O.D.

L.O.D.

L.O.D.

L.O.D.

L.O.D.

L.O.D.

L.O.D.

L.O.D.

L.O.D.

L.O.D.

L.O.D.

L.O.D.

L.O.D.

L.O.D.

L.O.D.

L.O.D.

L.O.D.

20'

110'

153.5

38'

3.5'

513.5

512

510.5

509.3

508

506

505

504

503

502

501

500

499

498

497

496

495

494

493

492

491

490

489

488

487

486

485

484

483

482

481

480

479

478

477

476

475

474

473

472

471

470

469

468

467

466

465

464

463

462

461

460

459

458

457

456

455

454

453

452

451

450

449

448

447

446

445

444

443

442

441

440

439

438

437

436

435

434

433

432

431

430

429

428

427

426

425

424

423

422

421

420

419

418

417

416

415

414

413

412

411

410

409

408

407

406

405

404

403

402

401

400

399

398

397

396

395

394

393

392

391

390

389

388

387

386

385

384

383

382

381

380

379

378

377

376

375

374

373

372

371

370

369

368

367

366

365

364

363

362

361

360

359

358

357

356

355

354

353

352

351

350

349

348

347

346

345

344

343

342

341

340

339

338

337

336

335

334

333

332

331

330

329

328

327

326

325

324

323

322

321

320

319

318

317

316

315

314

313

312

311

310

309

308

307

306

305

304

303

302

301

300

299

298

297

296

295

294

293

292

291

290

289

288

287

286

285

284

283

282

281

280

279

278

277

276

275

274

273

272

271

270

269

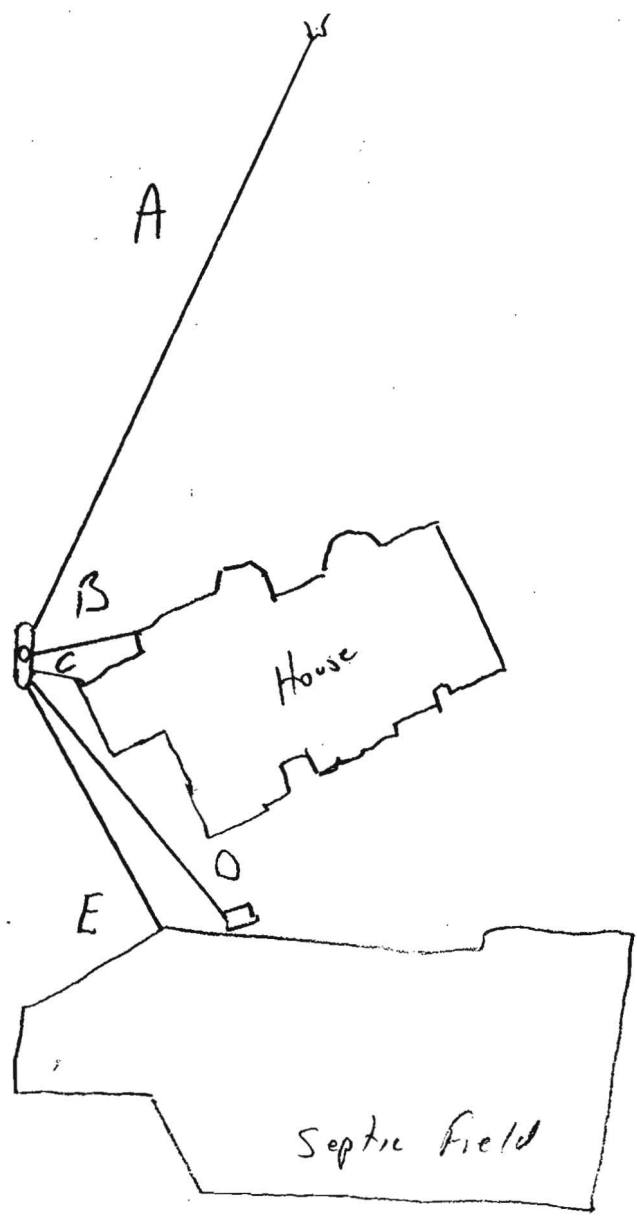
268

267



Darrin Altieri  
12908 Folly Quarter Road  
Ellicott City, Md.

- A) from propane tank to well = 165'
- B) " " " " House = 28'
- C) " " " " Garage = 13'
- D) " " " " Septic tank = 75'
- E) " " " " Septic field = 70'



Scale  
1" = 50'

(Health) 320

Building Address <u>12908 Folly Quarter Rd</u> <u>Ellicott City</u> Suite/Apt. #: _____ SDP/WP/Petition #: _____ Census Tract <u>603000</u> Subdivision _____ Section _____ Area _____ Lot _____ Tax Map <u>22</u> Parcel <u>191</u> <del>565</del> Grid <u>16</u> Zoning <u>RR-DEP</u> Map Coordinates <u>10611</u> Lot size _____	Property Owner's Name <u>Danner Altieri</u> Address <u>6116 Nighthorse Ct</u> City <u>Elkridge</u> State <u>MD</u> Zip Code <u>21075</u> Home Phone _____ Work Phone _____ Applicant's Name & Mailing Address, (if other than stated hereon): _____ Phone _____ Fax _____
---	--

Existing Use <u>SFD</u> Proposed Use <u>SFD</u> Estimated Construction Cost \$ <u>500,000</u> Description of Work <u>Buy a propane tank</u> <u>and run line to home</u> <u>1-1000 gallon</u>	Contractor Company <u>United Propane</u> Contact Person <u>Doug Milkew</u> Address <u>205 Naylor Road</u> City <u>Middleville</u> State <u>MD</u> Zip Code <u>21108</u> License No. <u>01475</u> Phone <u>410-987-500</u> Fax <u>410-987-5906</u>
---	--

Occupant or Tenant <u>N/A</u> Contact Name _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____	Engineer or Architect Company <u>N/A</u> Contact Person _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____
--	---

BUILDING DESCRIPTION - <u>COMMERCIAL</u>		BUILDING DESCRIPTION - <u>RESIDENTIAL</u>	
Building Characteristics	Utilities	Building Characteristics	Utilities
Height: _____	Water Supply: Public <input type="checkbox"/> Private <input type="checkbox"/>	SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: Public <input type="checkbox"/> Private <input checked="" type="checkbox"/>
No. of stories: _____	Sewage Disposal: Public <input type="checkbox"/> Private <input type="checkbox"/>	1st floor: _____	Sewage Disposal: Public <input type="checkbox"/> Private <input checked="" type="checkbox"/>
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>	2nd floor: _____	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>	Basement: _____	Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Construction type: Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular <input type="checkbox"/>	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 _____	Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input checked="" type="checkbox"/>
	Sprinkler system: N/A <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads _____	Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Sprinkler system: N/A <input type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____
		Other Structure: _____ Dimensions: _____ Footings: _____ Roof: _____ State Certified Modular <input type="checkbox"/> Manufactured Home <input type="checkbox"/>	

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.

<u>Danner Altieri</u> Applicant's Signature <u>Sales / United Propane</u> Title/Company	<u>Doug Milkew</u> Print Name <u>4/11/06</u> Date
--	--

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

<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>AGENCY</th> <th>DATE</th> <th>SIGNATURE APPROVAL</th> </tr> </thead> <tbody> <tr> <td>Land Development, DPZ</td> <td></td> <td></td> </tr> <tr> <td>State Highways</td> <td></td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> Building Official</td> <td></td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> Dev. Engineering, DPZ</td> <td></td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> Health</td> <td><u>4/20/06</u></td> <td><u>[Signature]</u></td> </tr> <tr> <td>Fire Protection</td> <td></td> <td></td> </tr> <tr> <td>Is Sediment Control approval required prior to issuance?</td> <td></td> <td></td> </tr> <tr> <td>YES <input type="checkbox"/> NO <input type="checkbox"/></td> <td></td> <td></td> </tr> <tr> <td>CONTINGENCY CONSTRUCTION START: <input type="checkbox"/></td> <td></td> <td></td> </tr> <tr> <td>ONE STOP SHOP: <input type="checkbox"/></td> <td></td> <td></td> </tr> </tbody> </table>	AGENCY	DATE	SIGNATURE APPROVAL	Land Development, DPZ			State Highways			<input checked="" type="checkbox"/> Building Official			<input checked="" type="checkbox"/> Dev. Engineering, DPZ			<input checked="" type="checkbox"/> Health	<u>4/20/06</u>	<u>[Signature]</u>	Fire Protection			Is 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"/>			<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>DPZ SETBACK INFORMATION</th> <th>PROPERTY ID#: <u>67302</u></th> </tr> </thead> <tbody> <tr> <td>Front: _____</td> <td>Filing fee \$ _____</td> </tr> <tr> <td>Rear: _____</td> <td>Permit fee \$ <u>100.00</u></td> </tr> <tr> <td>Side: _____</td> <td>Excise tax \$ <u>10.00</u></td> </tr> <tr> <td>Side St.: _____</td> <td>Add'l per. fee \$ _____</td> </tr> <tr> <td>All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/></td> <td>TOTAL FEES \$ <u>110.00</u></td> </tr> <tr> <td>Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/></td> <td>Sub-total paid \$ _____</td> </tr> <tr> <td>Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/></td> <td>Balance due \$ _____</td> </tr> <tr> <td>Lot Coverage for NewTown Zone _____</td> <td>Check # <u>Discover</u></td> </tr> <tr> <td>SDP/Rel-line approval date _____</td> <td>Validation # <u>112643</u></td> </tr> </tbody> </table>	DPZ SETBACK INFORMATION	PROPERTY ID#: <u>67302</u>	Front: _____	Filing fee \$ _____	Rear: _____	Permit fee \$ <u>100.00</u>	Side: _____	Excise tax \$ <u>10.00</u>	Side St.: _____	Add'l per. fee \$ _____	All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ <u>110.00</u>	Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____	Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____	Lot Coverage for NewTown Zone _____	Check # <u>Discover</u>	SDP/Rel-line approval date _____	Validation # <u>112643</u>	Accepted by <u>[Signature]</u>
AGENCY	DATE	SIGNATURE APPROVAL																																																					
Land Development, DPZ																																																							
State Highways																																																							
<input checked="" type="checkbox"/> Building Official																																																							
<input checked="" type="checkbox"/> Dev. Engineering, DPZ																																																							
<input checked="" type="checkbox"/> Health	<u>4/20/06</u>	<u>[Signature]</u>																																																					
Fire Protection																																																							
Is 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#: <u>67302</u>																																																						
Front: _____	Filing fee \$ _____																																																						
Rear: _____	Permit fee \$ <u>100.00</u>																																																						
Side: _____	Excise tax \$ <u>10.00</u>																																																						
Side St.: _____	Add'l per. fee \$ _____																																																						
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ <u>110.00</u>																																																						
Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____																																																						
Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____																																																						
Lot Coverage for NewTown Zone _____	Check # <u>Discover</u>																																																						
SDP/Rel-line approval date _____	Validation # <u>112643</u>																																																						

