

Permits: 410-313-2455
 Inspections: 410-313-1810
 Automated Line: 410-313-3800

Walk through
 Howard County Building/Fire Permit Application
 Department of Inspections, Licenses & Permits
 3430 Court House Drive
 Ellicott City, MD 21043

Permit Number:

Building Address: 4042 Candlelight Dr Dayton 21036
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: Candlelight
 Section: _____ Area: _____ Lot: 16
 Tax Map: 22 Parcel: 90 Grid: 19
 Zoning: _____ Map Coordinates: _____ Lot Size: 1.01

Property Owner's Name: Jason Pearlman
 Address: 4042 Candlelight Dr
 City: Dayton State: MD Zip Code: 21036
 Home Phone: 410-967-1862 Work Phone: _____
 Applicant's Name & Mailing Address, (If other than stated herein):
Karen Rowley
297 Southland Ct Dunkirk MD 20754
 Phone: 410-507-7705 Fax: _____
 Email: khrkpermits05@yahoo.com

Existing Use: SFD
 Proposed Use: Inground pool
 Estimated Construction Cost: \$ 30,000.00
 Description of Work: 46' x 18' inground concrete pool, depth 3' to 8', fence to code, filled by truck
 Occupant or Tenant: _____
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Contractor Company: Anthony + Sylvan Pools
 Contact Person: Karen Rowley
 Address: 344 C Ritchie Hwy
 City: Severna Park State: MD Zip Code: 21146
 License No.: 95872
 Phone: _____ Fax: _____
 Email: _____

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

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

BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics	Utilities
<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>
<u>Depth</u> <u>Width</u>	<input type="checkbox"/> Public
1 st floor:	<input type="checkbox"/> Private
2 nd floor:	<u>Sewage Disposal</u>
Basement:	<input type="checkbox"/> Public
<input type="checkbox"/> Finished Basement	<input type="checkbox"/> Private
<input type="checkbox"/> Unfinished Basement	Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Crawl Space	Gas: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Slab on Grade	<u>Heating System</u>
No. of Bedrooms:	<input type="checkbox"/> Electric
<u>Multi-family Dwelling</u>	<input type="checkbox"/> Oil
No. of efficiency units:	<input type="checkbox"/> Natural Gas
No. of 1 BR units:	<input type="checkbox"/> Propane Gas
No. of 2 BR units:	
No. of 3 BR units:	
Other Structure:	
Dimensions:	
Footings:	<input checked="" type="checkbox"/> <u>Roadside Tree Project Permit</u>
Roof:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> State Certified Modular	<u>Roadside Tree Project Permit #</u>
<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.

Karen Rowley
 Applicant's Signature
 Email Address: _____
 Title/Company: _____

Karen Rowley
 Print Name
 Date: 3/6/2014

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>4.9.14</u>	<u>Deborah</u>
Fire Protection		

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	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$

CR

4042 Candle Light

PERCOLATION CERTIFICATION PLAN

4042 Candle Light Drive
Dayton, MD 2036

AREA: 1350
R AREA: 1930
PERMITS: 4

BEARDY AUTOMATIC ONKS



APPROVED

WALK-THRU BUILDING PERMIT

BP#

APP. SAN Beardy DATE: 4-8-14

DESC. OF WORK: Drainage

with fence. Approved
as shown

NOTES

1. ALL EXISTING WELLS ON THE SUBJECT PROPERTY AND WITHIN 100 FEET OF SUBJECT PROPERTY BOUNDARIES ARE REPRESENTED TO THE BEST OF MY KNOWLEDGE AND BELIEF.
2. TOPOGRAPHY AND WELL LOCATIONS ON THIS PLAN ARE FROM THE BUILDING PERMIT APPLICATION SITE PLAN FOR THE EXISTING RESIDENCE AND ARE VERIFIED TO ACCURATELY REPRESENT WELL LOCATIONS AND THE RELATIVE ELEVATION CHANGES ON AND NEAR THE SUBJECT PROPERTY.
3. THE LOT SHOWN HEREON COMPLES WITH THE MARYLAND OWNERSHIP WIDTH AND LOT AREA AS REQUIRED BY THE MARYLAND DEPARTMENT OF ENVIRONMENT.
4. ANY CHANGES TO A PRIVATE SEWAGE EASEMENT SHALL REQUIRE A REVISED PERCOLATION CERTIFICATION PLAN.
5. THE AREA DESIGNATES A PRIVATE SEWAGE EASEMENT OF AT LEAST 10,000 SQ. FT. AS REQUIRED BY THE MARYLAND DEPARTMENT OF ENVIRONMENT FOR INDIVIDUAL SEWAGE DISPOSAL IMPROVEMENTS OF ANY NATURE IN THIS EASEMENT IS RESTRICTED.
6. THE EASEMENT SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE EASEMENT. THE COUNTY HEALTH OFFICER SHALL HAVE AUTHORITY TO GRANT ADJUSTMENTS TO THE PRIVATE SEWAGE EASEMENT. RECORDATION OF A REVISED SEWAGE EASEMENT SHALL NOT BE NECESSARY.
7. THE EXISTING RESIDENCE, SEPTIC TANK, DISTRIBUTION BOX AND DISTRIBUTION TRENCHES WILL REMAIN.
8. THE PURPOSE OF THIS PERCOLATION CERTIFICATION PLAN REVISION IS TO ADJUST THE SEWAGE DISPOSAL AREA TO ACCOMMODATE AN ANTICIPATED INGROUND POOL.
9. THE EXISTING SEPTIC SYSTEM MUST BE MODIFIED TO MEET CODE REQUIREMENTS FOR SETBACK TO POOL AND FOR TRENCH ABSORPTION AREA PRIOR TO HEALTH DEPARTMENT APPROVAL OF THE BUILDING PERMIT.

I CERTIFY THAT THE INFORMATION SHOWN HEREON IS BASED ON WORK PERFORMED IN MY PRESENCE OR BY MY DIRECTION, AND IS CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Tom Beardy SIGNATURE
DATE: 3-19-2014

DATE

Approved For Private Water and Private Sewage System

Barbara for Monica Robinson
Health Officer, Howard County Health Department

Date: 4/8/2014

MS

SCALE: 1" = 50' 0"

LEGEND

	SEPTIC TANK
	PERC TEST PASS
	PERC TEST FAIL
	9957 sf SEPTIC EASEMENT REMAIN
	1265 sf SEPTIC EASEMENT REMOVE
	85 SF SEPTIC EASEMENT ADD
	CONTOUR LINES
	SOL MAP UNIT LINE