



# Building Permit Application

Howard County Maryland  
Department of Inspections, Licenses and Permits  
3430 Court House Drive  
Permits: 410-313-2455  
www.howardcountymd.gov

Date Received: 09/16/13

Permit No.: B13003493  
(3493)

Building Address: 11775 Chapel Estates  
 City: Charmersville State: MD Zip Code: 21029  
 Suite/Apt. # N.A. SDP/WP/BA #: 6.14.006  
 Census Tract: \_\_\_\_\_ Subdivision: Chapel Rise  
 Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: 9  
 Tax Map: 29 Parcel: \_\_\_\_\_ Grid: 8:14  
 Zoning: RC-DEO Map Coordinates: 4934-C3 Lot Size: 3.002 Ac

Property Owner's Name: Chris & Lisa Choochick  
 Address: 12021 Floating Clouds Path  
 City: Charmersville State: MD Zip Code: 21029  
 Phone: 410-369-3801 Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Existing Use: Vacant lot  
 Proposed Use: Construct New Single Family Home  
 Estimated Construction Cost: \$ 300,000.-  
 Description of Work: Construct New Single Family Home with 5 Bedrooms, 6 1/2 Baths, 3 car garage

Applicant's Name & Mailing Address, (If other than stated herein)  
 Applicant's Name: Ron Tash  
 Address: P.O. Box 999  
 City: Columbia State: MD Zip Code: 21044  
 Phone: 410-730-3959 Fax: 410-992-3020  
 Email: RTash@ColumbiaBuildersinc.com

Occupant or Tenant:  
 Was tenant space previously occupied?  Yes  No  
 Contact Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Contractor Company: Greenfield Family Homes  
 Contact Person: Ron Tash  
 Address: 6920 Autumn Sky Way  
 City: Columbia State: MD Zip Code: 21044  
 License No.: 6201  
 Phone: 410-730-3959 Fax: 410-992-3020  
 Email: RTash@ColumbiaBuildersinc.com

Engineer/Architect Company: ARUM ac, LLC  
 Responsible Design Prof.: Timothy J. Sosinski  
 Address: 5557 Twin Knolls Rd. Suite 435  
 City: Columbia State: MD Zip Code: 21045  
 Phone: 410-730-2300 Fax: 410-730-2796  
 Email: \_\_\_\_\_

Commercial Building Characteristics	Residential Building Characteristics
Height: _____	<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse
No. of stories: _____	Depth _____ Width _____
Gross area, sq. ft./floor: _____	1 <sup>st</sup> floor: <u>62'8" x 86'6"</u>
Area of construction (sq. ft.): _____	2 <sup>nd</sup> floor: <u>62'8" x 86'6"</u>
Use group: _____	Basement: <u>62'8" x 56"</u>
<b>Construction type:</b>	<input checked="" type="checkbox"/> Finished Basement
<input type="checkbox"/> Reinforced Concrete	<input checked="" type="checkbox"/> Unfinished Basement
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Crawl Space
<input type="checkbox"/> Masonry	<input type="checkbox"/> Slab on Grade
<input type="checkbox"/> Wood Frame	No. of Bedrooms: <u>5</u>
<input type="checkbox"/> State Certified Modular	<u>Multi-family Dwelling</u>
<input checked="" type="checkbox"/> Roadside Tree Project Permit	No. of efficiency units: _____
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	No. of 1 BR units: _____
<b>Roadside Tree Project Permit #</b>	No. of 2 BR units: _____
<u>N.A.</u>	No. of 3 BR units: _____
	Other Structure: _____
	Dimensions: _____
	Footings: _____
	Roof: _____
	<input type="checkbox"/> State Certified Modular
	<input checked="" type="checkbox"/> Manufactured Home

Utilities
<b>Water Supply</b>
<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Private
<b>Sewage Disposal</b>
<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Private
Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Gas: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Heating System</b>
<input type="checkbox"/> Electric <input type="checkbox"/> Oil
<input checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Other: _____
<b>Sprinkler System:</b>
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Grading Permit Number: <u>613000262</u>
Building Shell Permit Number: <u>N.A.</u>

EPA permit 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 Signature: \_\_\_\_\_  
 Print Name: Ron Tash  
 Date: 7.16.13  
 Email Address: RTash@ColumbiaBuildersinc.com  
 Title/Company: Agent / Greenfield Family Homes

RECEIVED

SEP 16 2013

LICENSES & PERMITS DIVISION

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY  
 \*\*PLEASE WRITE NEATLY & LEGIBLY\*\*  
 FOR OFFICE USE ONLY

AGENCY	DATE	SIGNATURE OF APPROVAL
<input checked="" type="checkbox"/> State Highways		
<input checked="" type="checkbox"/> Building Officials		
<input checked="" type="checkbox"/> PSZA (Zoning)		
<input checked="" type="checkbox"/> PSZA (Engineering)		
<input checked="" type="checkbox"/> Health		<u>[Signature]</u>

Is Sediment Control approval required for guidance?  Yes  No  
 CONTINGENCY CONSTRUCTION START

**DPZ SETBACK INFORMATION**

Front: \_\_\_\_\_  
 Rear: \_\_\_\_\_  
 Side: \_\_\_\_\_  
 Side St.: \_\_\_\_\_

All minimum setbacks met?  Yes  No  
 Is Entrance Permit Required?  Yes  No  
 Historic District?  Yes  No  
 Lot Coverage for New Town Zone: \_\_\_\_\_  
 SDP/Red-line approval date: \_\_\_\_\_

Filing Fee	\$ <u>100.00</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$ <u>50.00</u>
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	#



# Building Permit Application

Howard County Maryland  
Department of Inspections, Licenses and Permits  
3430 Court House Drive  
Permits: 410-313-2455  
www.howardcountymd.gov

Date Received: \_\_\_\_\_

Permit No.: \_\_\_\_\_

Building Address: 11775 CHAPEL ESTATES DR  
 City: CLARKSVILLE State: MD Zip Code: 21029  
 Suite/Apt. #: \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
 Census Tract: \_\_\_\_\_ Subdivision: \_\_\_\_\_  
 Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: 9  
 Tax Map: 29 Parcel: \_\_\_\_\_ Grid: \_\_\_\_\_  
 Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: \_\_\_\_\_

Property Owner's Name: CHRYSTOPHER HODMICKI  
 Address: 11775 CHAPEL ESTATES DR  
 City: CLARKSVILLE State: MD Zip Code: 21029  
 Phone: 410-531-0278 Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Applicant's Name & Mailing Address, (If other than stated herein)  
 Applicant's Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Existing Use: \_\_\_\_\_  
 Proposed Use: NEW INGROUND SWIMMING POOL  
 Estimated Construction Cost: \$ 60K  
 Description of Work: 45' X 18' POOL + 12 X 6' SPA  
AUTO ELECTRIC COVER, + FENCE REQUIRED.  
FILL'D BY WATER TRUCK.  
 Occupant or Tenant: \_\_\_\_\_  
 Was tenant space previously occupied?  Yes  No  
 Contact Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Contractor Company: CUSTOM HOME POOLS INC.  
 Contact Person: MIKE BEAVAN  
 Address: 3920 SOBUS DR, VC  
 City: WEST FRINGE State: MD Zip Code: 21784  
 License No.: 124874  
 Phone: 410-489-9890 Fax: SAME  
 Email: CUSTOMHOMEPOOLS@VERIZON.NET

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

Commercial Building Characteristics	Residential Building Characteristics	
Height:	<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories:	Depth	Width
Gross area, sq. ft./floor:	1 <sup>st</sup> floor:	
	2 <sup>nd</sup> floor:	
Area of construction (sq. ft.):	Basement:	
	<input type="checkbox"/> Finished Basement	
Use group:	<input type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
<b>Construction type:</b>	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:	
<input type="checkbox"/> Structural Steel	<b>Multi-family Dwelling</b>	
<input type="checkbox"/> Masonry	No. of efficiency units:	
<input type="checkbox"/> Wood Frame	No. of 1 BR units:	
<input type="checkbox"/> State Certified Modular	No. of 2 BR units:	
	No. of 3 BR units:	
	Other Structure:	
	Dimensions:	
<input checked="" type="checkbox"/> <b>Roadside Tree Project Permit</b>	Footings:	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Roof:	
<b>Roadside Tree Project Permit #</b>	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Utilities	
<b>Water Supply</b>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
<b>Sewage Disposal</b>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Heating System</b>	
<input type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
<b>Sprinkler System:</b>	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number:	
Building Shell Permit Number:	

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: \_\_\_\_\_  
 Email Address: permit@customhomepools.com  
 Title/Company: CUSTOM HOME POOLS

Print Name: MIKE BEAVAN  
 Date: \_\_\_\_\_

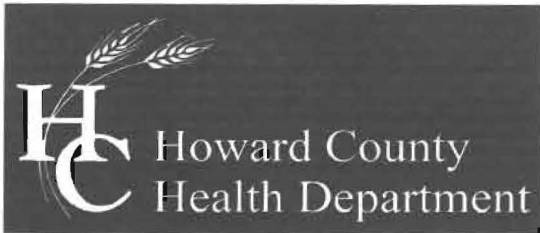
Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY  
 \*\*PLEASE WRITE NEATLY & LEGIBLY\*\*  
 -FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA ( Zoning )		
PSZA ( Engineering )		
Health		<u>MIKE BEAVAN</u>

Is Sediment Control approval required for issuance?  Yes  No  
 CONTINGENCY CONSTRUCTION START

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	\$
Check	#



## Bureau of Environmental Health

7178 Columbia Gateway Drive, Columbia, MD 21046-2147

Main: 410-313-2640 | Fax: 410-313-2648

TDD 410-313-2323 | Toll Free 1-866-313-6300

[www.hchealth.org](http://www.hchealth.org)

Facebook: [www.facebook.com/hocohealth](http://www.facebook.com/hocohealth)

Twitter: [HowardCoHealthDep](https://twitter.com/HowardCoHealthDep)

**Maura J. Rossman, M.D. Acting Health Officer**

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### MEMORANDUM

TO: Stephanie Tuite  
FCC

FROM: Heidi Scott  
Well and Septic Program  
Development Coordination Section

RE: Building Permit Site Plan – B13003493  
**11775 Chapel Estates**

DATE: October 2, 2013

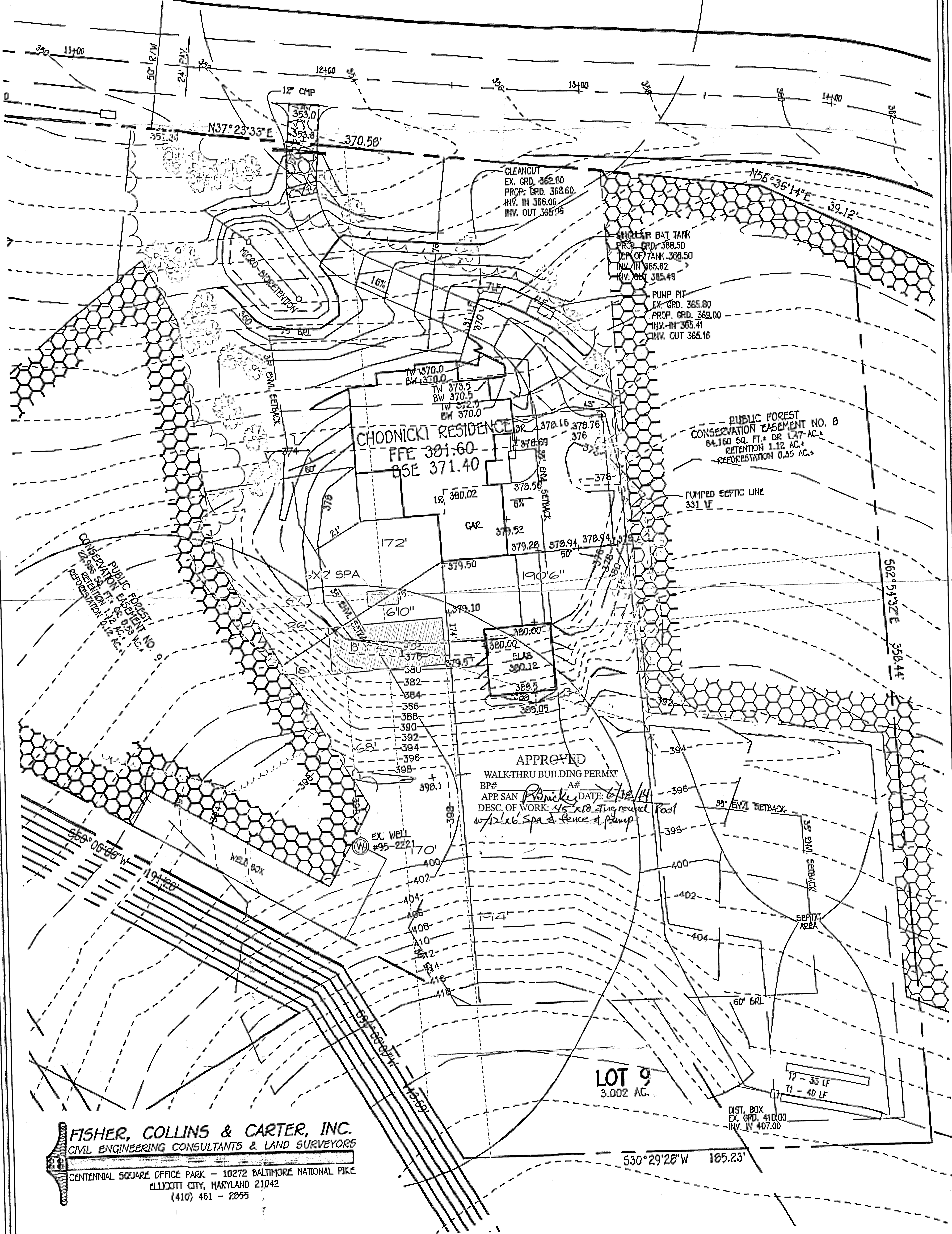
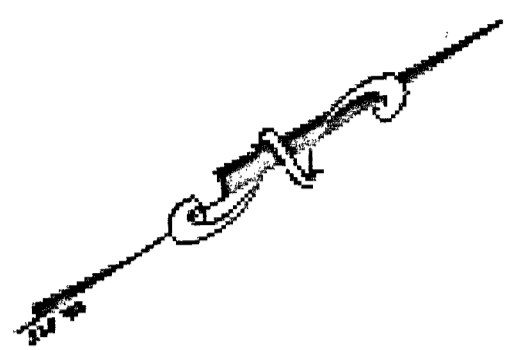
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The comments below must be addressed for the above referenced plan. Please revise and resubmit prior to plan approval:

- As a condition of a variance granted by MDE, an advanced pre-treatment system which utilizes B.A.T. to perform nitrogen reduction must be installed on the sewage disposal system on Lot 9.
- Additional B.A.T. information must be added to the site plan.

**CHAPEL ESTATES DRIVE**  
(PUBLIC COUNTRY ROAD)

(W)



**FISHER, COLLINS & CARTER, INC.**  
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS  
CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE  
ELLSWORTH CITY, MARYLAND 21042  
(410) 461 - 2295

WITH THE EXCEPTION OF THIS HOMESITE, HOUSE TYPES ON OTHER HOMESITES ARE SUBJECT TO CHANGE WITHOUT NOTICE. ALL DIMENSIONS ARE APPROXIMATE.

WITNESS	BUYER	DATE
WITNESS	BUYER	DATE
	COLUMBIA BUILDERS, INC.	
WITNESS	SELLER	DATE

**BUYER'S PLAN**  
**CHAPEL RISE**

LOT 9

ZONED RC-DEO PLAT NO. 22022  
TAX MAP NO.: 29 GRID NO'S.: B & 14  
5TH ELECTION DISTRICT HOWARD COUNTY, MARYLAND  
SCALE: 1" = 20' DATE: OCTOBER, 2013

SHEET 1 OF 1

I:\2012\12060\dwg\12060 SDP LOT 9 Buyers Plan 020313.dwg, Buyers Plan, 2/10/2014 10:48:04 AM, 1:1