

Building Address 12139 Frederick Road  
Ellicott City MD 21042

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

Census Tract \_\_\_\_\_ Subdivision \_\_\_\_\_

Section \_\_\_\_\_ Area \_\_\_\_\_ Lot \_\_\_\_\_

Tax Map \_\_\_\_\_ Parcel \_\_\_\_\_ Grid \_\_\_\_\_

Zoning \_\_\_\_\_ Map Coordinates \_\_\_\_\_ Lot Size \_\_\_\_\_

Property Owner's Name Bryan W Loar  
Address 12139 Frederick Road  
City Ellicott City State MD Zip Code 21042  
Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
Applicant's Name & Mailing Address, (if other than stated herein):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_

Existing Use Residential  
Proposed Use Residential  
Estimated Construction Cost \$ 1500  
Description of Work Remove 36" Basement window  
Install 36" basement door. Build 36"  
retaining wall

Occupant or Tenant \_\_\_\_\_

Contact Name Bryan Loar  
Address \_\_\_\_\_  
City \_\_\_\_\_ State MD Zip Code \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_

Contractor Company Home owner  
Contact Person Bryan Loar  
Address 12139 Frederick Road  
City Ellicott City State MD Zip Code 21042  
License No. \_\_\_\_\_  
Phone 410-804-8471 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: _____ Public _____ Private _____
No. of stories: _____	Sewage Disposal: _____ Public _____ 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: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ State Certified Modular _____	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 type="checkbox"/>
	Full _____
	Partial _____
	Other Suppression _____
	# of Heads _____

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: _____ Public _____
Depth _____ Width _____	Private <input checked="" type="checkbox"/>
1 <sup>st</sup> floor: _____	Sewage Disposal: _____ Public _____
2 <sup>nd</sup> floor: _____	Private <input checked="" type="checkbox"/>
Basement: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
No. of Bedrooms _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input checked="" type="checkbox"/>
Multi-family dwellings: _____	Natural Gas <input type="checkbox"/>
No. of efficiency units: _____	Propane Gas <input type="checkbox"/>
No. of 1 BR units: _____	Sprinkler system: N/A <input type="checkbox"/>
No. of 2 BR units: _____	NFPA #13D _____
No. of 3 BR units: _____	NFPA #13R _____
Other Structure: _____	Other: _____
Dimensions: _____	
Footings: _____	
Roof: _____	
State Certified Modular _____	
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.

Applicant's Signature \_\_\_\_\_  
Email Address \_\_\_\_\_  
Title/Company \_\_\_\_\_

Print Name \_\_\_\_\_  
Date 3/10/2010

Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

\*\*PLEASE WRITE NEATLY AND LEGIBLY.\*\*

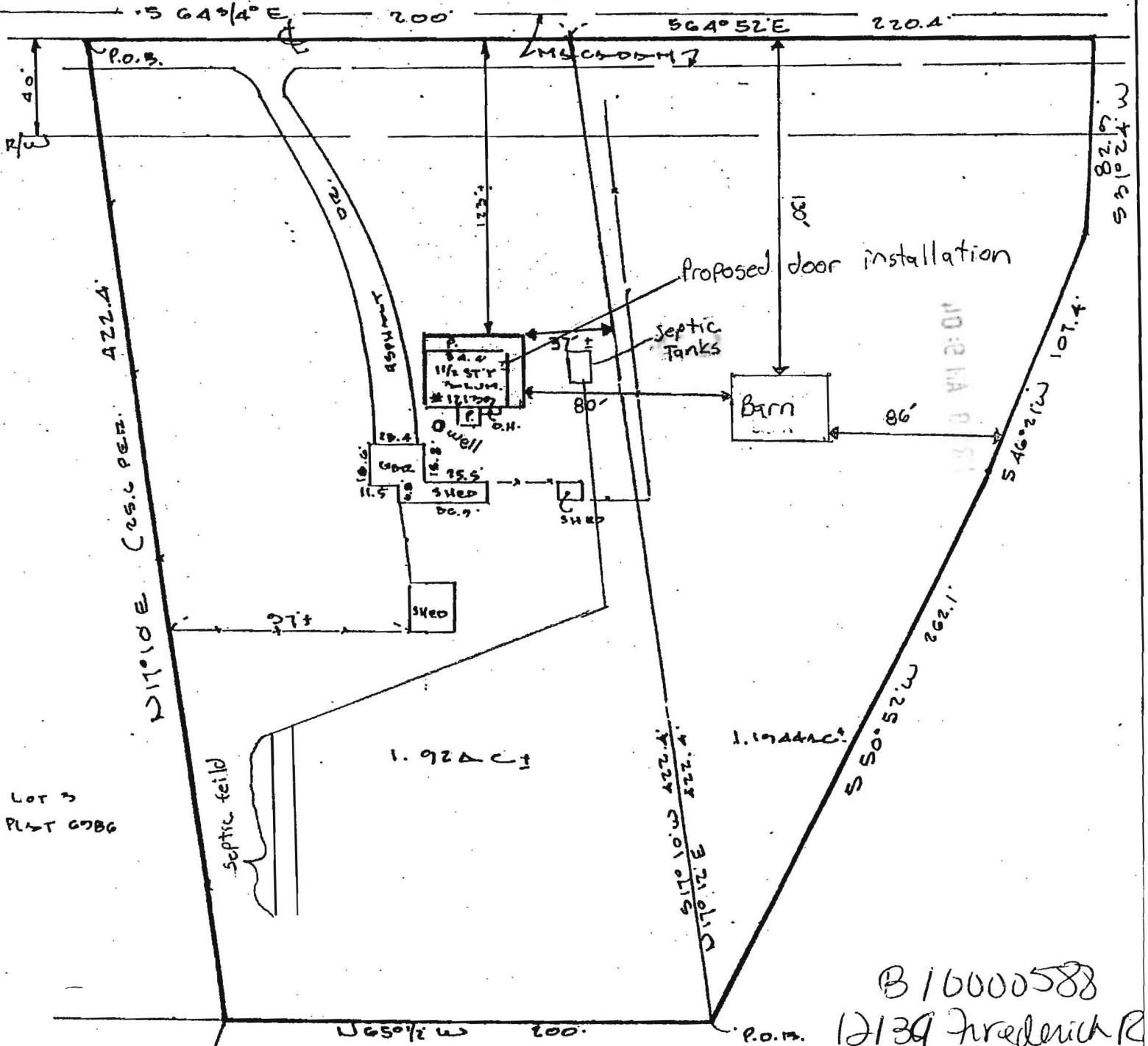
- FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID #
Land Development, DPZ			Front: _____	Filing fee \$ _____
State Highways			Rear: _____	Permit fee \$ _____
Building Officials			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ			Side St.: _____	Add'l per fee \$ _____
Health <u>4-12-10</u> <u>DBurnell</u>			All minimum setbacks met?	TOTAL FEES \$ _____
Fire Protection			YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>			Is Entrance Permit Required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
			Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # _____
			Lot Coverage for New Town Zone _____	Validation # _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			SDP/Red-line approval date _____	Accepted by _____
ONE STOP SHOP: <input type="checkbox"/>				

12139

FREDERICK ROAD

MD ROUTE 144  
80' R/W



B16000588  
12139 Frederick R

**LOCATION DRAWING**

**CERTIFICATION**

This is to certify that I have surveyed the property known as: 12139  
FREDERICK ROAD (RTE 144)

The information shown has been established by current acceptable survey procedures and from available record information. This drawing is to be used for Title Transfer Financing, or Refinancing Only and IS NOT to be used for the Establishment of Property Lines Location

**SEAL**



**SCALE 1" = 60'**

**DATE 4-22-1999**

**LDE Inc.**

9250 Rumsey Road Suite 106  
Columbia, Maryland 21045

(410) 715-1070 (Balt.)  
(301) 506-3424 (Wash)

**Bernard, Dana**

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**To:** Bryan Loar  
**Subject:** RE: Permit problem  
**Attachments:** 12139 Fred.pdf

Mr. Loar, I have attached a copy of the building plan you have submitted and the items requested are not shown on the plan. I have also included a copy of your original septic construction plan. If you have any questions, don't hesitate to give me a call.

Dana Bernard

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**From:** Bryan Loar [mailto:cowwhisperer@verizon.net]  
**Sent:** Thursday, March 25, 2010 5:31 PM  
**To:** Bernard, Dana  
**Subject:** Permit problem

To: Dana L Bernard  
From: Bryan W Loar  
Re: 12139 Frederick Road  
Ellicott City, MD. 21042

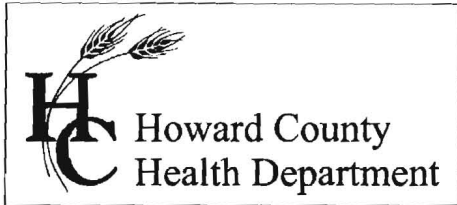
I received notice that you need me to:

Show retaining wall on plan  
Show septic easement on plan

For my permit to move forward.

I am confused as to what additional information is required. I drew and labeled the two 3' tall retaining walls on the plan. Do you need an actual picture as to what a 3' tall wall looks like? As to the septic plan, I submitted the same drawing, with the updates for this permit, that I have used for several permit applications in the past. It shows the location of the tanks and septic field. What further information do you need? Also as your office developed and oversaw the installation of the system several years ago, don't you have it on record?

Thanks for the help  
Bryan Loar



7178 Columbia Gateway Drive, Columbia MD 21046  
Phone (410) 313-2640 Fax (410) 313-2648  
TDD (410) 313-2323 Toll Free 1-866-313-6300  
Website: [www.hchealth.org](http://www.hchealth.org)

**Peter L. Beilenson, M.D., M.P.H., Health Officer**

March 23, 2010

RE: 12139 Frederick Road  
Ellicott City, Maryland 21042  
Building Permit Site Plan

Mr. Bryan Loar:

Further review is contingent upon submission of a Building Site Plan showing the following:

- Show retaining wall on plan.
- Show septic easement (i.e. trenches, septic tank, and distribution box)

I hope these comments are helpful in preparing your plan. Your building permit will be placed "on hold" until all Health Dept. requirements are met. If you have any questions or correspondence, I can be reached at the above address or by telephone at (410) 313-2775.

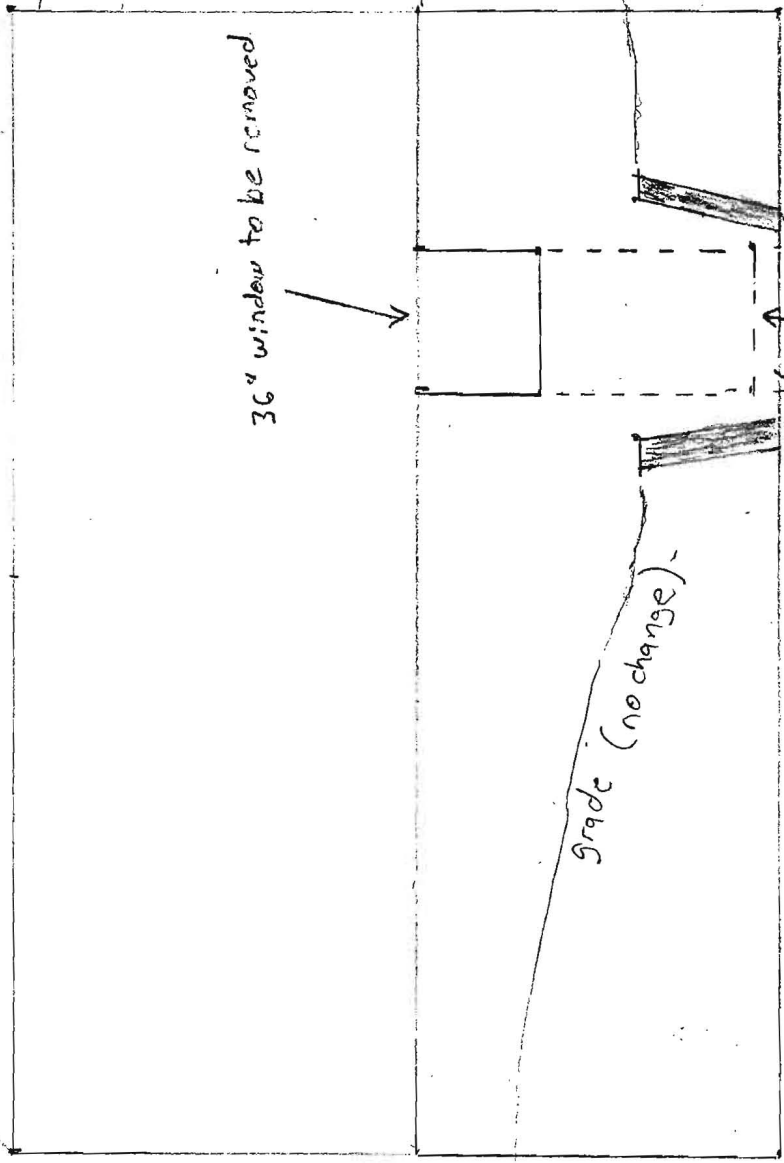
Respectfully,

Dana L. Bernard, Environmental Sanitarian  
Bureau of Environmental Health  
Well and Septic Program  
Development and Coordination  
Phone (410) 313-2775  
E-mail: [DBernard@howardcountymd.gov](mailto:DBernard@howardcountymd.gov)

cc: Well & Septic program file

Loar

12139 Frederick Road  
Ellicott City MD 21042



Scale 1/4" = 1'

36" Versa Lock retaining wall to be installed (see detail)

Retaining wall Detail

12139 Frederick Road

Loar, Bryan W.

Versa-Lock walls (x 2)

scale 1" = 1'

