

**HOWARD COUNTY
PERMIT APPLICATION**

PERMIT NUMBER

B00110652

Building Address 605 MORGAN STATION RD
WOODBINE, MD 21277
Suite/Apt. #: _____ SDP/WP/Petition #: _____
Census Tract _____ Subdivision _____
Section _____ Area _____ Lot _____
Tax Map _____ Parcel _____ Grid _____
Zoning _____ Map Coordinates 336 Lot size 2974

Property Owner's Name RUTH LANDSMAN / SEH
Address 605 MORGAN STATION RD HAERY
City WOODBINE State MD Zip Code 21277
Home Phone 301-844-6503 Work Phone 410-437-4200
Applicant's Name & Mailing Address, (if other than stated hereon):
Phone _____ Fax _____

Existing Use RESIDENTIAL 900
Proposed Use RESIDENTIAL SEDO
Estimated Construction Cost \$ 30,000
Description of Work 1 story addition on crawl space
interior deck room 15x6
interior alterations in Family Room

Contractor Company OUUUV
Contact Person _____
Address _____
City _____ State _____ Zip Code _____
License No. _____
Phone _____ Fax _____

Occupant or Tenant with new windows
Contact Name _____
Address _____
City _____ State _____ Zip Code _____
Phone _____ Fax _____

Engineer or Architect Company SETH HARRY & ASSOC. INC
Contact Person SETH HARRY OR RUTH LANDSMAN
Address WV
City _____ State _____ Zip Code _____
Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics
Height: _____
No. of stories: 1
Gross area, sq. ft. per floor: _____
Use group: _____
Construction type:
 Reinforced Concrete
 Structural Steel
 Masonry
 Wood Frame
 State Certified Modular

Utilities
Water Supply:
 Public
 Private
Sewage Disposal:
 Public
 Private
Electric Yes No
Gas Yes No
Heating System:
Electric Oil
Natural Gas
Propane Gas
Sprinkler system: N/A
 Full
 Partial
 Other Suppression
of Heads _____

Building Characteristics
SF Dwelling SF Townhouse
Depth _____ Width _____
1st floor: 24' 42'
2nd floor: _____
Basement: _____
Finished Basement Unfinished Basement
Crawl space Slab on Grade
No. of Bedrooms 1
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: _____
 State Certified Modular
 Manufactured Home

Utilities
Water Supply:
 Public
 Private
Sewage Disposal:
 Public
 Private
Electric Yes No
Gas Yes No
Heating System:
Electric Oil
Natural Gas
Propane Gas
Sprinkler system: N/A
 NFPA #13D
 NFPA #13R
 Other: _____

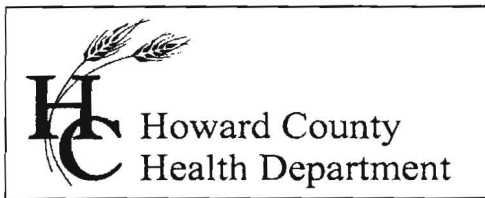
THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED 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 Ruth Landsman
OWNER
Title/Company _____

Print Name RUTH LANDSMAN
3/12/03
Date _____

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

AGENCY	DATE	SIGNATURE APPROVAL	DFZ SETBACK INFORMATION	PROPERTY ID#
Land Development DPZ			Front: _____	Filing fee \$ <u>25.00</u>
State Highways			Rear: _____	Permit fee \$ <u>31.00</u>
Building Official	<u>3/12/03</u>	<u>[Signature]</u>	Side: _____	Excise tax \$ <u>102</u>
Dev. Engineering DPZ			Side St: _____	Add'l per. fee \$ _____
Health	<u>3/12/03</u>	<u>[Signature]</u>	All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ <u>757.00</u>
Fire Protection			Is Entrance Permit required? 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"/>			Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
CONTINGENCY CONSTRUCTION START <input type="checkbox"/>			Lot Coverage for New Town Zone _____	Check # <u>2417</u>
ONE STOP SHOP: <input type="checkbox"/>			SDP/Red-line approval date _____	Validation # _____
				Accepted by <u>[Signature]</u>



Bureau of Environmental Health
7178 Columbia Gateway Drive, Columbia MD 21046
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

Penny E. Borenstein, M.D., M.P.H., Health Officer

April 17, 2006

Ruth Landsman
605 Morgan Station Road
Woodbine, MD 21797

RE: **Revised Variance Approval**
605 Morgan Station Road
Woodbine, MD 21797

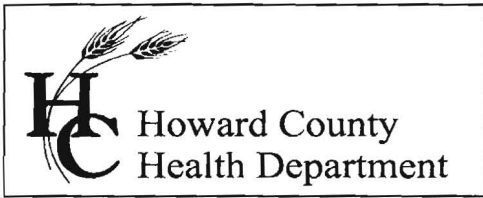
Dear Ms. Landsman,

The Department of Health has received your variance request dated April 7, 2006 for the above referenced property. This agency will grant **approval** of the variance provided that the detached garage is constructed without a basement and is constructed no closer than twenty feet to the existing well. Approval of a building permit will be granted by this Department provided that the site plan submitted with the building permit application is consistent with the site plan approved under this variance request and the construction plans illustrate the construction of a twenty-four (24) foot by twenty-eight (28) foot garage. Any deviations from the site plan submitted with the request will be subject to further review by this Department.

Any questions regarding this decision may be directed to the Well and Septic Program of the Howard County Health Department.

Respectfully,

Michael J. Davis, R.S.
Director, Well and Septic Programs



Bureau of Environmental Health
7178 Columbia Gateway Drive, Columbia MD 21046
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website: www.hchealth.org

Penny E. Borenstein, M.D., M.P.H., Health Officer

April 12, 2006

Ruth Landsman
605 Morgan Station Road
Woodbine, MD 21797

RE: 605 Morgan Station Road
Woodbine, MD 21797

Dear Ms. Landsman,

The Department of Health has received your variance request dated April 7, 2006 for the above referenced property. This agency will grant **approval** of the variance provided that the detached garage is constructed without a basement and is constructed no closer than twenty feet to the existing well. Approval of a building permit will be granted by this Department provided that the site plan submitted with the building permit application is consistent with the site plan approved under this variance request and the construction plans illustrate the construction of a twenty (20) foot by twenty-four (24) foot garage. Any deviations from the site plan submitted with the request will be subject to further review by this Department.

Any questions regarding this decision may be directed to the Well and Septic Program of the Howard County Health Department.

Respectfully,

Michael J. Davis, R.S.
Director, Well and Septic Programs

cc: File

April 7, 2006

Mike Davis
C/o Howard County
Department of Environmental Health
7178 Columbia Gateway Drive
Columbia, MD 21046

Re: Variance from a well to a foundation wall
Zone: RR
Address: 605 Morgan Station Road, Woodbine, Maryland 21797
Contact Information: Tel. 410.489.4725, email: Rlandsarch@aol.com

Dear Mr. Davis:

We are re-submitting our site plan and variance request as per your telephone message.

Thank you for assistance in securing our variance for us.

Sincerely,

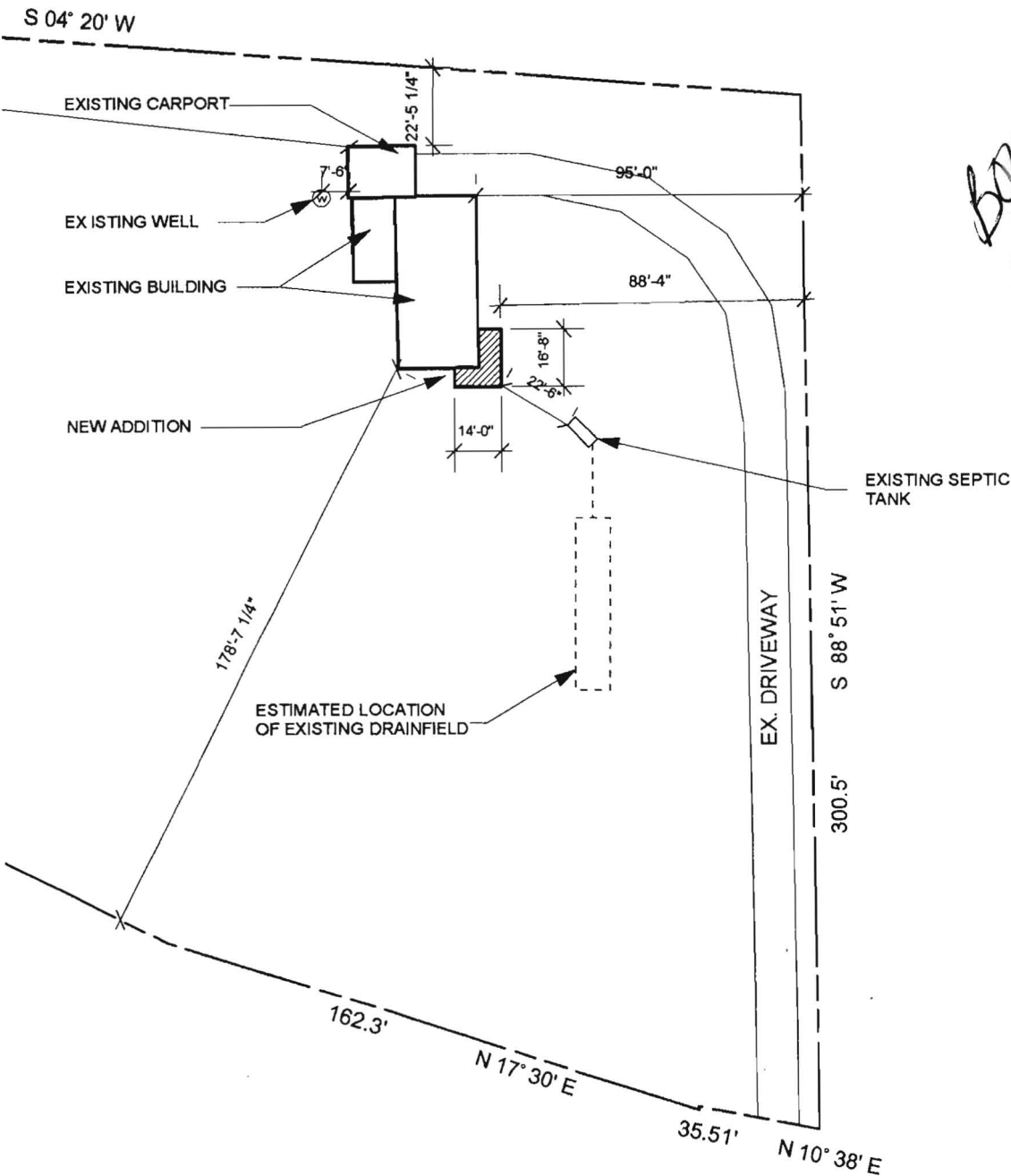


Ruth Landsman

Enc. Site plan



3/12/03
 O.K. for bedroom
 extension,

BOON/40652
 3/12/03



605 MORGAN STATION ROAD
 WOODBINE, MARYLAND 21797

SQUARE FOOTAGE OF ADDITION = 152 S.F.

-  EXISTING BUILDING
-  NEW CONSTRUCTION



SETH HARRY & ASSOCIATES, INC. ARCHITECTS AND PLANNERS
 605 MORGAN STATION ROAD WOODBINE, MARYLAND 21797
 TEL 410 489 4725 FAX 410 489 7554 E-MAIL SCHARRY@aol.com

Residential Addition for
 605 Morgan Station Road
 Woodbine, Maryland 21797

SITE PLAN

Scale 1/8" = 1'-0"

Date 3/1/03

SP-1

**HOWARD COUNTY
 PERMIT APPLICATION**

309002548
 PERMIT NUMBER

Building Address 605 MORLAN STATION ROAD, WOODBINE, 21747
 Suite/Apt. #: _____ SDP/WP/Petition #: _____
 Census Tract _____ Subdivision _____
 Section _____ Area _____ Lot _____
 Tax Map 3 Parcel 25 Grid 21
 Zoning RC Map Coordinates _____ Lot Size 2.43A
 Existing Use RESIDENTIAL
 Proposed Use RESIDENTIAL
 Estimated Construction Cost \$ _____
 Description of Work NEW DECK
 Occupant or Tenant _____
 Contact Name _____
 Address _____
 City _____ State _____ Zip Code _____
 Phone _____ Fax _____

Property Owner's Name RUTH LANDSMAN
 Address SETH HARTZ
 City _____ State _____ Zip Code _____
 Phone _____ Phone 910-459-4725
 Applicant's Name & Mailing Address, (if other than stated herein):
605 MORLAN STATION RD
WOODBINE, MD. 21747
 Phone _____ Fax _____
 Contractor Company _____
 Contact Person _____
 Address _____
 City _____ State _____ Zip Code _____
 License No. _____
 Phone _____ Fax _____
 Engineer or Architect Company _____
 Contact Person _____
 Address _____
 City _____ State _____ Zip Code _____
 Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

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 _____ State Certified Modular	Sprinkler system: N/A <input type="checkbox"/> _____ Full _____ Partial _____ Other Suppression _____ # of Heads

BUILDING DESCRIPTION - RESIDENTIAL

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

Ruth Landsman
 Applicant's Signature

 Title/Company

RUTH LANDSMAN
 Print Name
9/24/09
 Date

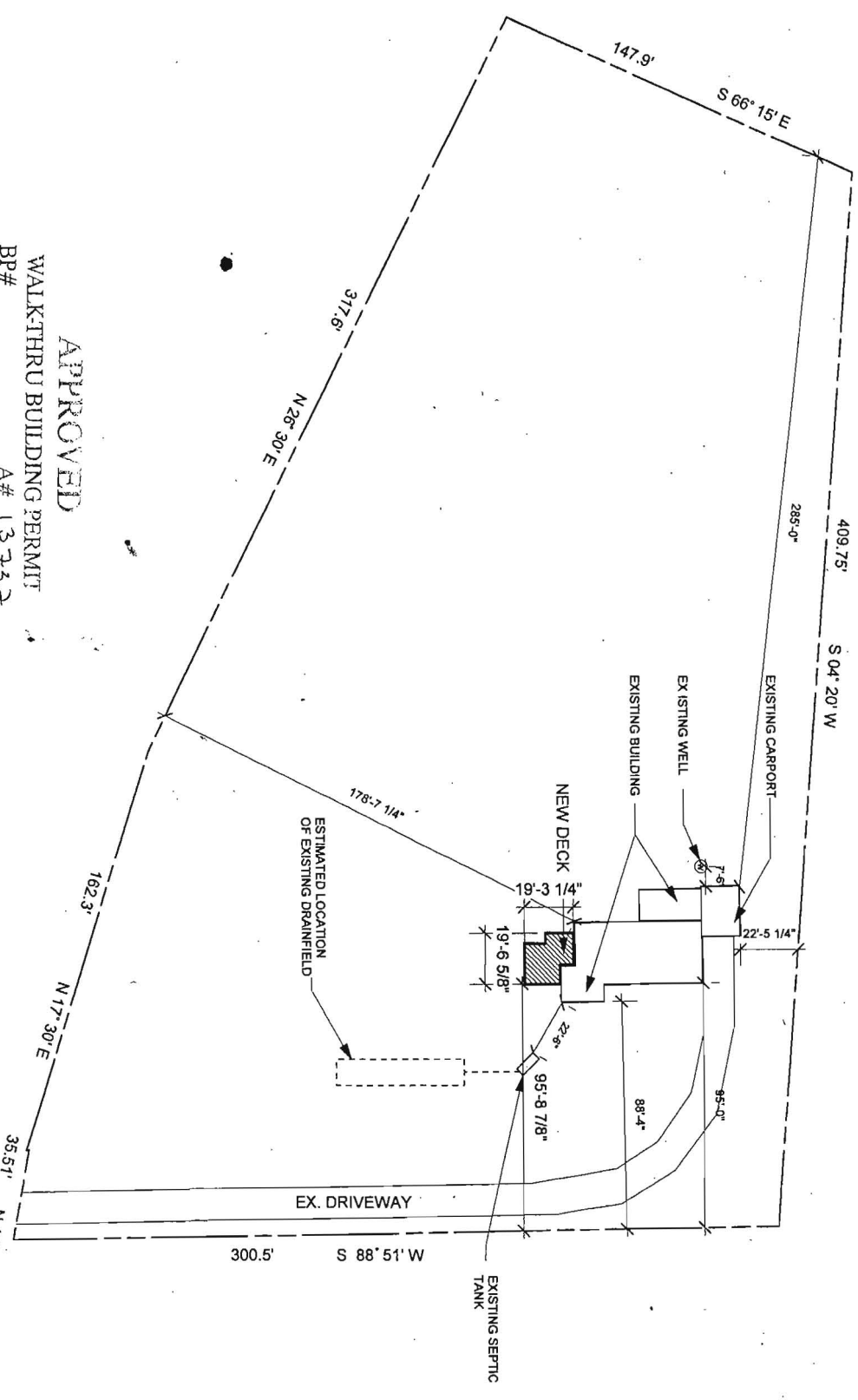
Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
 PLEASE WRITE NEATLY AND LEGIBLY
 - FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE	APPROVAL	DEPT. CHECK INFORMATION	PROPERTY INFO
Planning & Zoning Dept.				Map	Filing Fee \$
State Health Dept.				Res.	Permit Fee \$
Planning Office				Site	Excise Tax \$
Dev. Projects				ENR	Add'l per fee \$
Health				All minimum setbacks met	TOTAL FEES \$
Fire Dept.				Setbacks	Subtotal \$
Fire Dept.				Is Encl. Permit required?	Balance due \$
Fire Dept.				YES <input type="checkbox"/> NO <input type="checkbox"/>	Taxes
Fire Dept.				YES <input type="checkbox"/> NO <input type="checkbox"/>	Valid thru
Fire Dept.				Is Certificate for New Town Zone	Accepted by
Fire Dept.				SP required approval date	
Fire Dept.					

Distribution of Copies: White: Public Officials Green: LDD, DEP Yellow: DEP, DP7 Pink: Health Gold: SHD
 (E for use in building appeal applications) REV 10/28/04

APPROVED
 WALKTHRU BUILDING PERMIT
 BP# _____ A# 13-732
 APP SAN #8 DATE: 9-24-09
 DESC. OF WORK: deck as shown

605 MORGAN STATION ROAD
 WOODBINE, MARYLAND 21797



SP-1

SITE PLAN

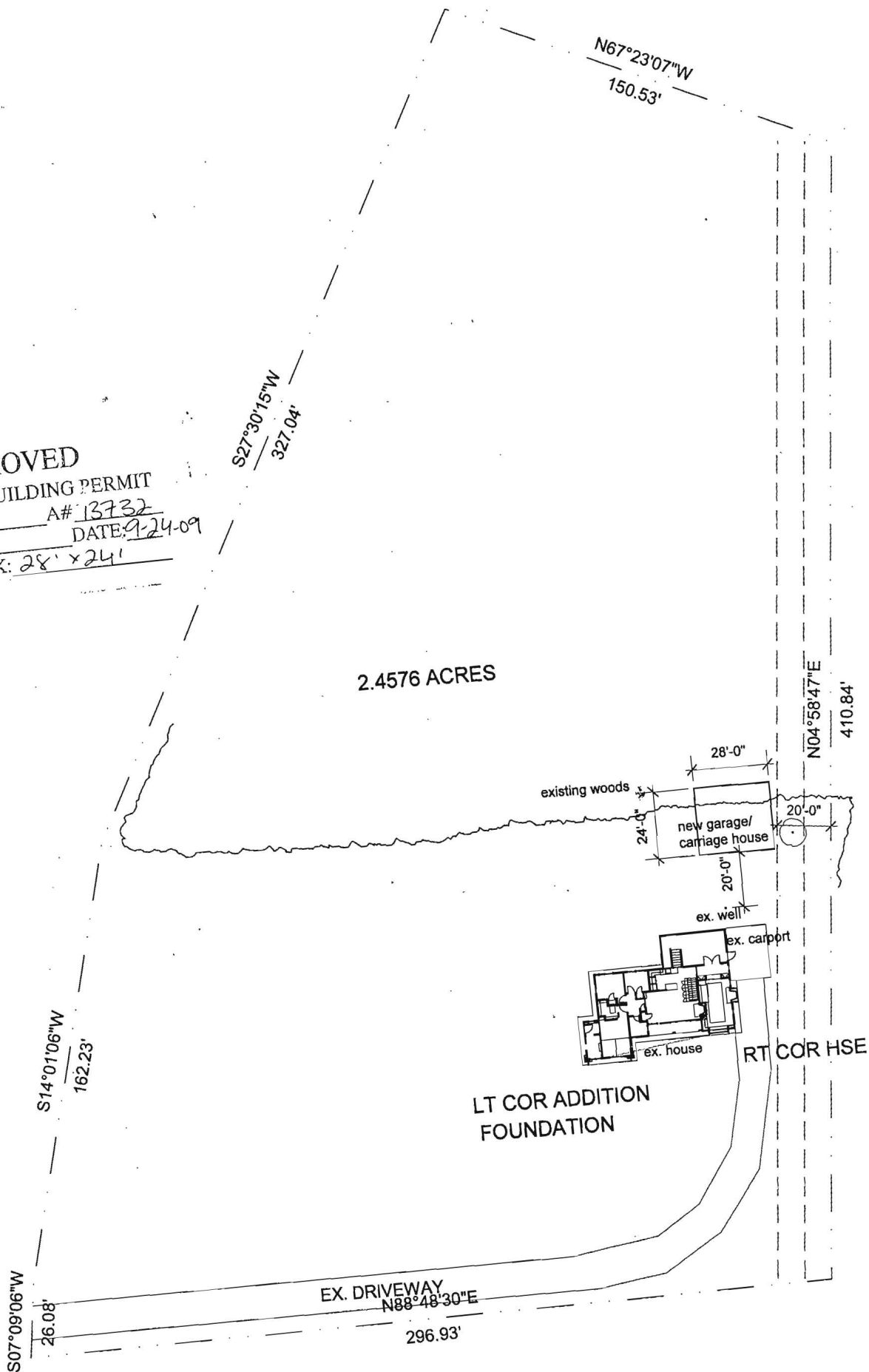
Deck for
 605 Morgan Station Road
 Woodbine, Maryland 21797

SETH HARRY & ASSOCIATES, INC. ARCHITECTS AND PLANNERS
 605 MORGAN STATION ROAD WOODBINE, MARYLAND 21797
 TEL 410 489 4725 FAX 410 489 7554 E-MAIL SCHarry@aol.com

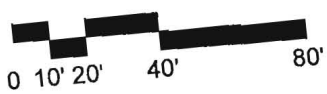
Scale 1" = 50'-0"
 Date 8/27/09

APPROVED
 WALK-THRU BUILDING PERMIT
 BP# _____ A# 13732
 APP. SAN HS DATE: 9-24-09
 DESC. OF WORK: 28' x 24'
 garage.

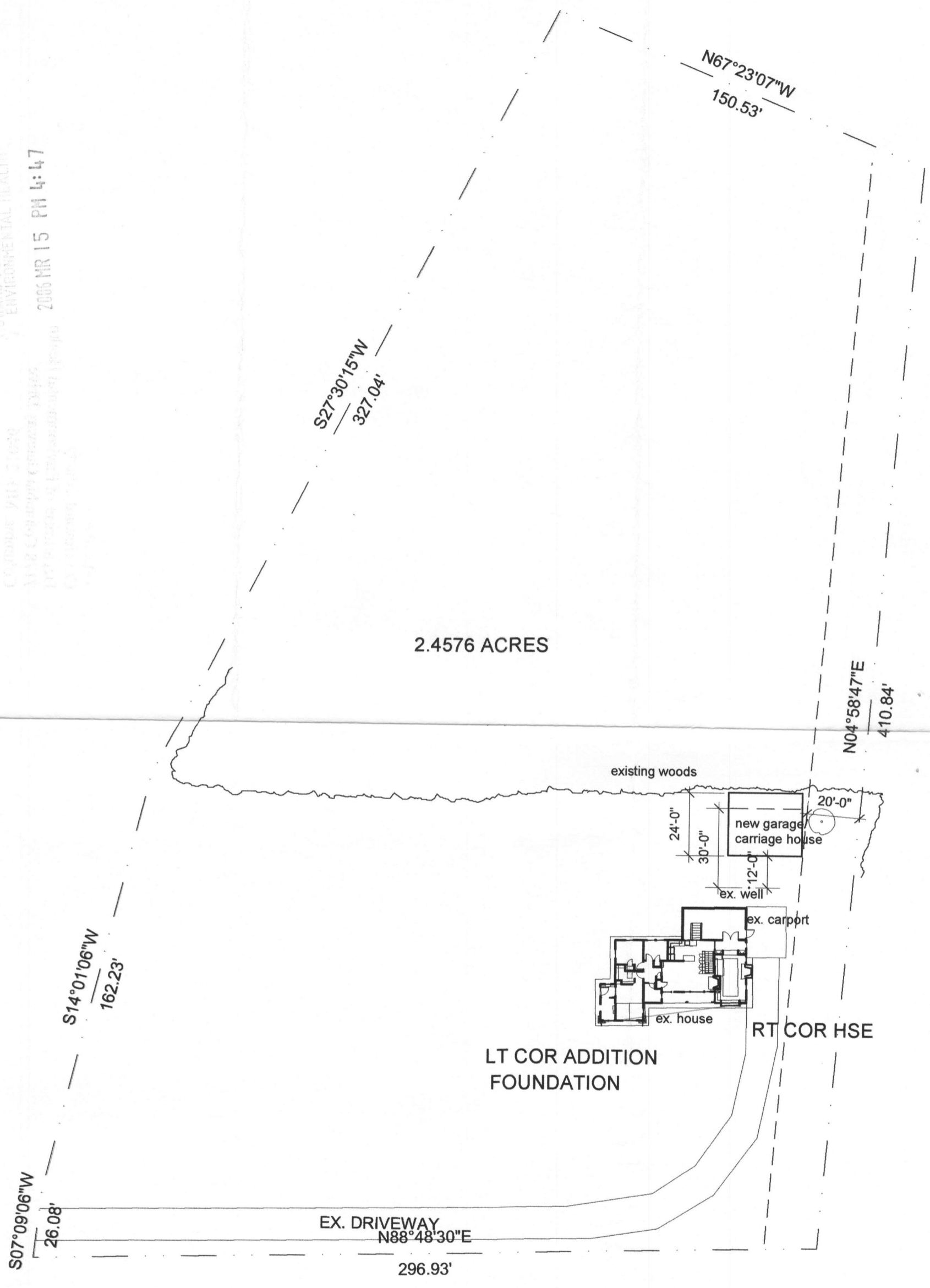
2.4576 ACRES



**FINAL BOUNDARY FROM
 NEW SURVEY**

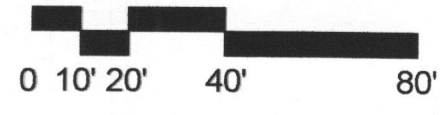


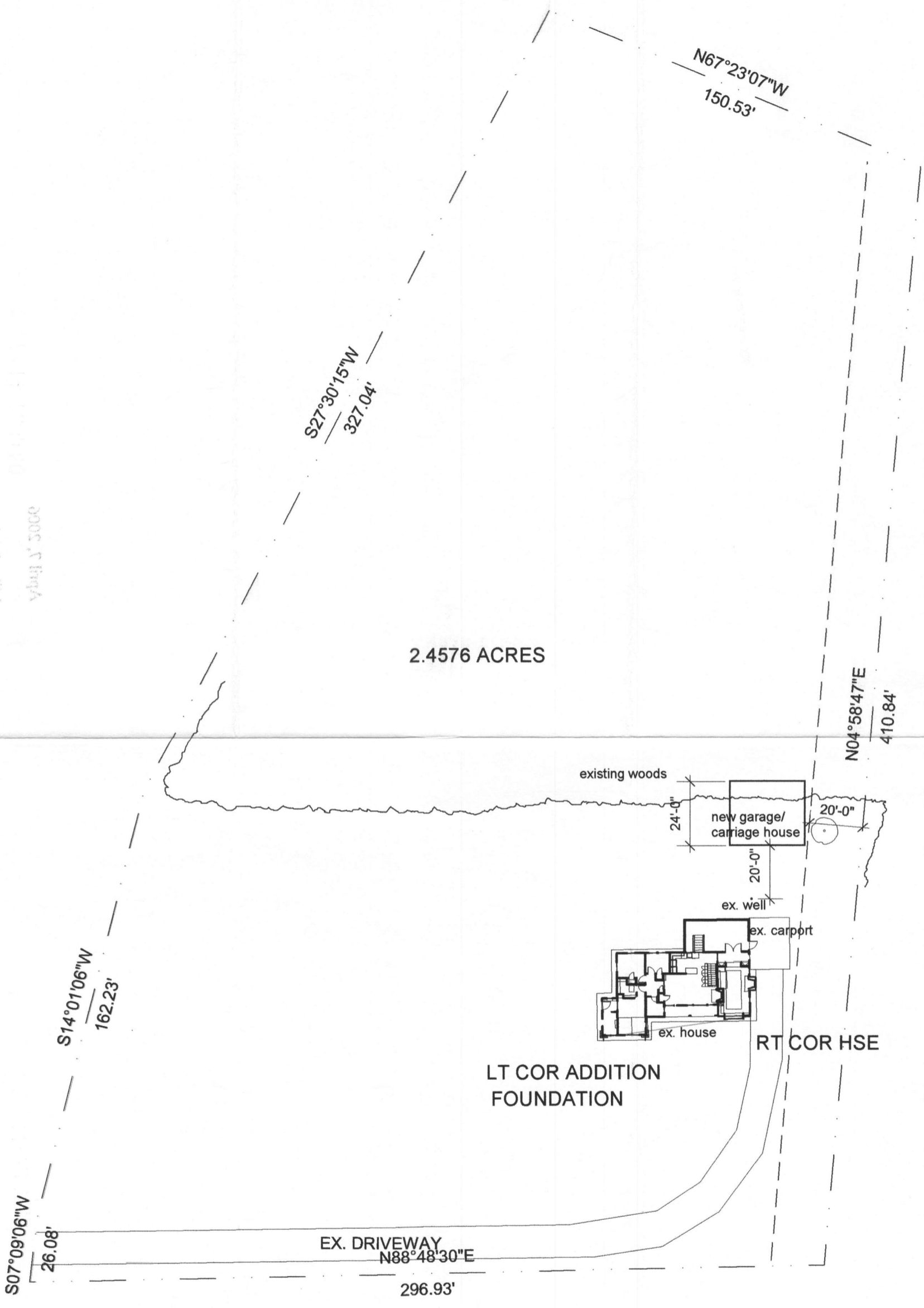
RECEIVED
STOWARD COUNTY HEALTH DEPT.
ENVIRONMENTAL HEALTH
2006 MR 15 PM 4:47
COUNTY HEALTH DEPT.
3152 COLUMBIA UNIVERSITY BLVD
COLUMBIA, SC 29208



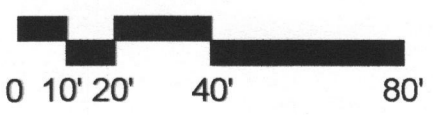
2.4576 ACRES

FINAL BOUNDARY FROM
NEW SURVEY





FINAL BOUNDARY FROM
NEW SURVEY



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 CIVIL ENGINEERING CONSULTANTS
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