



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: 7/24/14

Permit No.: BH4002609

Building Address: 14845 Bushy Park Road
 City: Woodbine State: MD Zip Code: 21797
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: CJ Sands
 Section: _____ Area: _____ Lot: Parcel 1
 Tax Map: 8 Parcel: 90 Grid: 22
 Zoning: AC-2EO Map Coordinates: _____ Lot Size: 3.1 AC

Existing Use: Vacant lot
 Proposed Use: New SFD
 Estimated Construction Cost: \$ 300,000
 Description of Work: New SFD, 2 story, 2-car garage side-load, partial stone front, sitting room, finished LL, FP, 4 BRs, 3.5 baths, Reverse plan
 Occupant or Tenant: _____
 Was tenant space previously occupied? Yes No
 Contact Name: Bob Gentry
 Address: 7939 Honeygo Blvd. Ste. 112
 City: White Marsh State: MD Zip Code: 21236
 Phone: 410-925-5992 Fax: 443-267-0079
 Email: rgentry@envisionbuild.net

Property Owner's Name: Wungkeon Cha
 Address: 5290 Wertz Road
 City: Hampstead State: MD Zip Code: 21074
 Phone: 410-652-5785 Fax: _____
 Email: bhotherr@envisionbuild.net

Applicant's Name & Mailing Address, (if other than stated herein)
 Applicant's Name: Bob Gentry
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Contractor Company: Envision Builders, LLC
 Contact Person: Bob Gentry
 Address: 7939 Honeygo Blvd. Ste. 112
 City: White Marsh State: MD Zip Code: 21236
 License No.: 6356
 Phone: 410-925-5992 Fax: 443-267-0079
 Email: rgentry@envisionbuild.net

Engineer/Architect Company: DW Taylor + Assoc., Inc.
 Responsible Design Prof.: Don Taylor
 Address: 5624 Dorsey Hall Drive, Ste. 203
 City: Ellicott City State: MD Zip Code: 21042
 Phone: 410-984-1181 Fax: _____
 Email: dwtaylor@dwataylor.com

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 st floor: <u>48'</u>	<u>48'</u>
Area of construction (sq. ft.): _____	2 nd floor: <u>60'</u>	<u>38'</u>
Use group: _____	Basement: <u>60'</u>	<u>48'</u>
<u>Construction type:</u>	<input checked="" type="checkbox"/> Finished Basement	
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Unfinished Basement	
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Craw Space	
<input type="checkbox"/> Masonry	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Wood Frame	No. of Bedrooms: <u>4</u>	
<input type="checkbox"/> State Certified Modular	<u>Multi-family Dwelling</u>	
	No. of efficiency units: _____	
	No. of 1 BR units: _____	
	No. of 2 BR units: _____	
	No. of 3 BR units: _____	
	Other Structure: _____	
	Dimensions: _____	
<input type="checkbox"/> Roadside Tree Project Permit	Footings: _____	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Roof: _____	
<input type="checkbox"/> Roadside Tree Project Permit # _____	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Utilities	
<u>Water Supply</u>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
<u>Sewage Disposal</u>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No	
<u>Heating System</u>	
<input checked="" type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other: _____	
<u>Sprinkler System:</u>	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number: <u>G14000231</u>	
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: Robert Gentry
 Print Name: Robert Gentry
 Email Address: rgentry@envisionbuild.net
 Title/Company: Principal / Envision Builders
 Date: 7/24/14

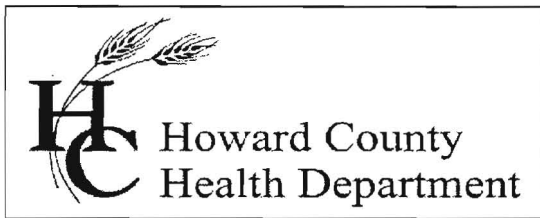
Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
 PLEASE WRITE NEATLY & LEGIBLY
 -FOR OFFICE USE ONLY-

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>Robert Gentry</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	\$ <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	# <u>1959</u>



Bureau of Environmental Health

8930 Stanford Blvd., Columbia, MD 21045
Main: 410-313-1774 | Fax: 410-313-2648
TDD 410-313-2323 | Toll Free 1-866-313-6300
www.hchealth.org

Facebook: www.facebook.com/hocohealth

Twitter: HowardCoHealthDep

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

Date: August 11, 2014

To: Robert Gentry, Applicant
rgentry@envisionbuild.net

RE: B14002609; proposal for new construction (SFD) 14845 Bushy Park Road

Dear Mr. Gentry,

Please be advised that the proposed construction cannot be permitted by the Health Department at this time. (1) The BAT Site Plan requires several edits to be approvable, and (2) the capacity of the proposed residence is greater than the treatment capacity of the BAT unit that is proposed.

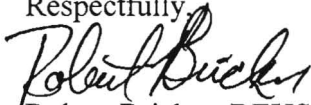
The floor plan for the proposed residence has been reviewed, and is found to have six (6) rooms that fit the definition of bedroom as enforced by Howard County Health Department, 4 on the Upper Floor, and 2 in the Basement. I have attached that definition as it is written in Howard County Code [3.801(B)]. Either of the rooms in the basement would not be considered a bedroom if the opening to the room is 4-feet wide and without a door, and the closet is removed.

The submitted BAT Plan must be edited as follows;

1. The entire property must be visible in the Plan view, and the boundaries must be labeled accurately for direction and distance.
2. Illustrate all percolation test locations and label them accurately.
3. Label the initial system trenches and the replacement system trenches with the elevations of the inverts for the respective distribution pipes in each of those trenches.
4. Delete the 'Blower' from the Plan view.
5. One of the required BAT Notes is missing; add this Note:
THE NORWECO BAT UNIT DOES NOT REQUIRE A REMOTELY LOCATED BLOWER.
6. Correct the Well Tag number in the last Note.

Should you have any questions concerning this matter, you may contact me by calling 410-313-2691.

Respectfully,



Robert Bricker, REHS/R.S., L.E.H.S.

Environmental Sanitarian II, Well and Septic Program
Howard County Bureau of Environmental Health

Enclosures (1)

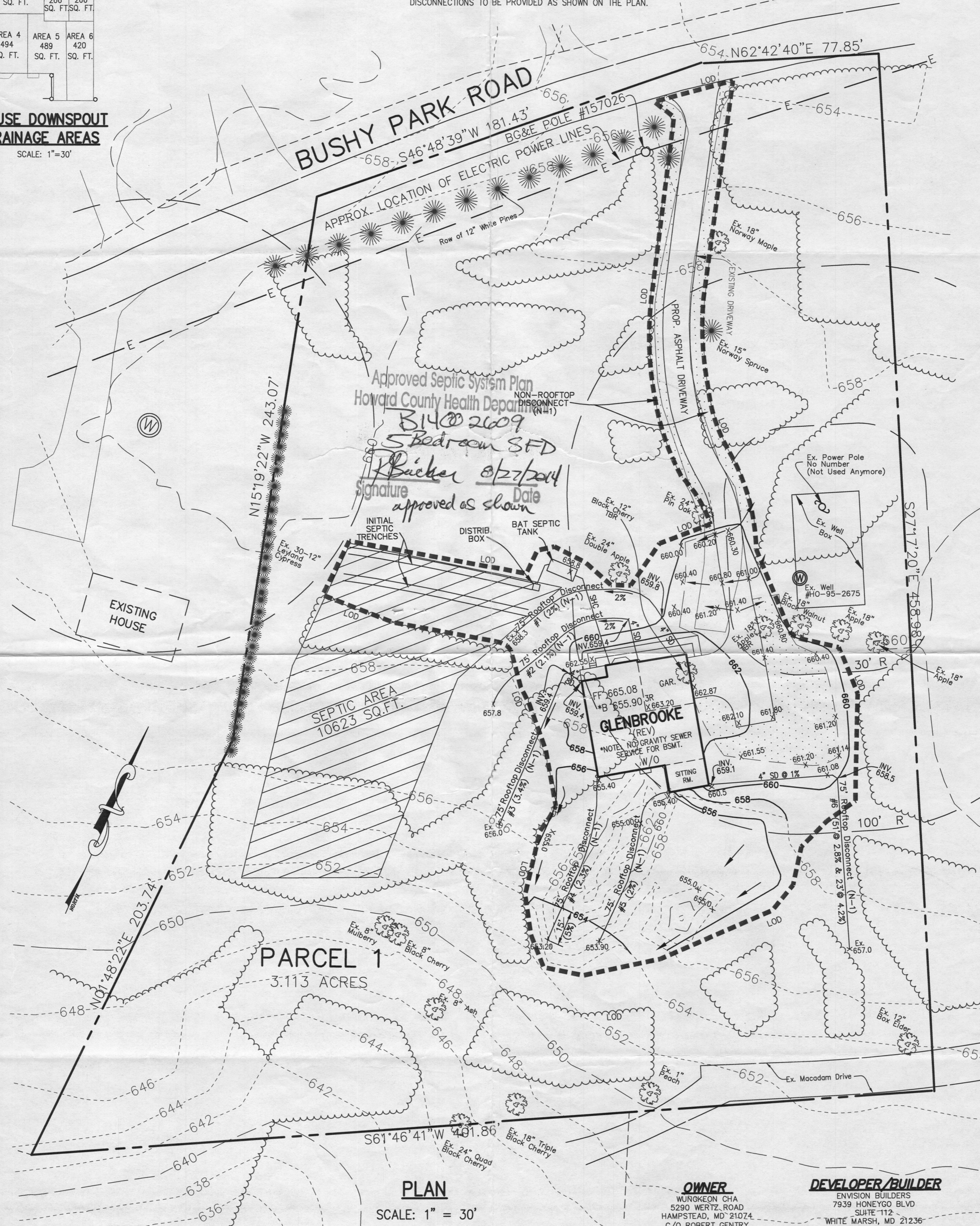
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AREA 3 498 SQ. FT.	AREA 2 266 SQ. FT.	AREA 1 GAR. 266 SQ. FT.
AREA 4 494 SQ. FT.	AREA 5 489 SQ. FT.	AREA 6 420 SQ. FT.

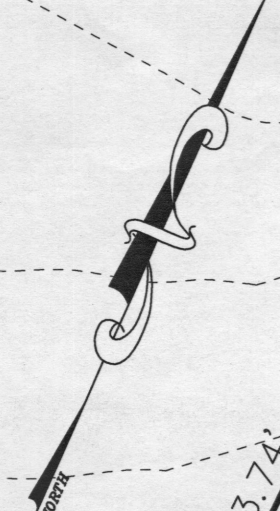
**HOUSE DOWNSPOUT
DRAINAGE AREAS**
SCALE: 1"=30'

NOTE:

THE DOWNSPOUT LOCATIONS SHOWN ON THE PLAN MUST BE
INSTALLED AS SHOWN ON THE PLAN, TO ENABLE THE ROOFTOP
DISCONNECTIONS TO BE PROVIDED AS SHOWN ON THE PLAN.



Approved Septic System Plan
Howard County Health Department
B1402609
S Bedroom SFD
Signature: [Signature]
Date: 8/27/2014
approved as shown



PLAN

SCALE: 1" = 30'

OWNER
WUNGEON CHA
5290 WERTZ ROAD
HAMPSTEAD, MD 21074
C/O ROBERT GENTRY
PH: 410-652-5785

DEVELOPER/BUILDER
ENVISION BUILDERS
7939 HONEYGO BLVD
SUITE 112
WHITE MARSH, MD 21236
PH: 410-652-5785
ATT: ROBERT GENTRY

WELL CERTIFICATION:
THE EXISTING WELL, TAG NO. HO-95-2675, HAS BEEN
FIELD LOCATED AND IS ACCURATELY SHOWN.

FISHER, COLLINS & CARTER, INC.
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS
CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE
ELLCOTT CITY, MARYLAND 21042

**PERMIT SITE PLAN
FOR
PARCEL 1**
14845 BUSHY PARK ROAD

C J SANDS
DEEDED PARCEL 1
14845 BUSHY PARK ROAD
ZONED: RC-DEO
TAX MAP NO.: 8 GRID NO.: 22 PARCEL NO.: 90
4TH ELECTION DISTRICT HOWARD COUNTY, MARYLAND
SCALE: 1" = 30' DATE: JULY 23, 2014
SHEET 1 OF 1