



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: 13439 Allnut Lane
 City: Hyland State: MD Zip Code: 20770
 Suite/Apt. #: _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: Allnut Farms Estates
 Section: 2 Area: _____ Lot: 17
 Tax Map: _____ Parcel: _____ Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: Patio
 Proposed Use: Deck
 Estimated Construction Cost: \$ 16,000
 Description of Work: Putting in Deck of Back of house

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

Property Owner's Name: Eddie and Polly Record
 Address: 13439 Allnut Lane
 City: Hyland State: MD Zip Code: 20770
 Phone: _____ Fax: _____
 Email: _____

Applicant's Name & Mailing Address, (If other than stated herein)
 Applicant's Name: Bob Trauwick
 Address: 604 W. Watersville Rd
 City: Hyland State: MD Zip Code: 21771
 Phone: 301-942-4517 Fax: _____
 Email: Bob@JTTrauwickCo.com

Contractor Company: J.T. Trauwick Co Inc.
 Contact Person: Bob Trauwick
 Address: 604 W. Watersville Rd
 City: Hyland State: MD Zip Code: 21771
 License No.: MHC 38011
 Phone: 301-607-9017 Fax: _____
 Email: Bob@JTTrauwickCo.com

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:	<u>Depth</u>	<u>Width</u>
Gross area, sq. ft./floor:	1 st floor:	
	2 nd floor:	
Area of construction (sq. ft.):	Basement:	
	<input type="checkbox"/> Finished Basement	
Use group:	<input type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
Construction type:	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:	
<input type="checkbox"/> Structural Steel	Multi-family Dwelling	
<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"/> Roadside Tree Project Permit	Footings:	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Roof:	
Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Utilities	
Water Supply	
<input type="checkbox"/> Public	
<input type="checkbox"/> Private	
Sewage Disposal	
<input type="checkbox"/> Public	
<input type="checkbox"/> Private	
Electric:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Gas:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Heating System	
<input type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
Sprinkler System:	
<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: Bob@JTTrauwickCo.com
 Email Address: _____
 Title/Company: Owner

Print Name: James L Trauwick
 Date: 6-10-14

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>6/11/14</u>	<u>[Signature]</u>

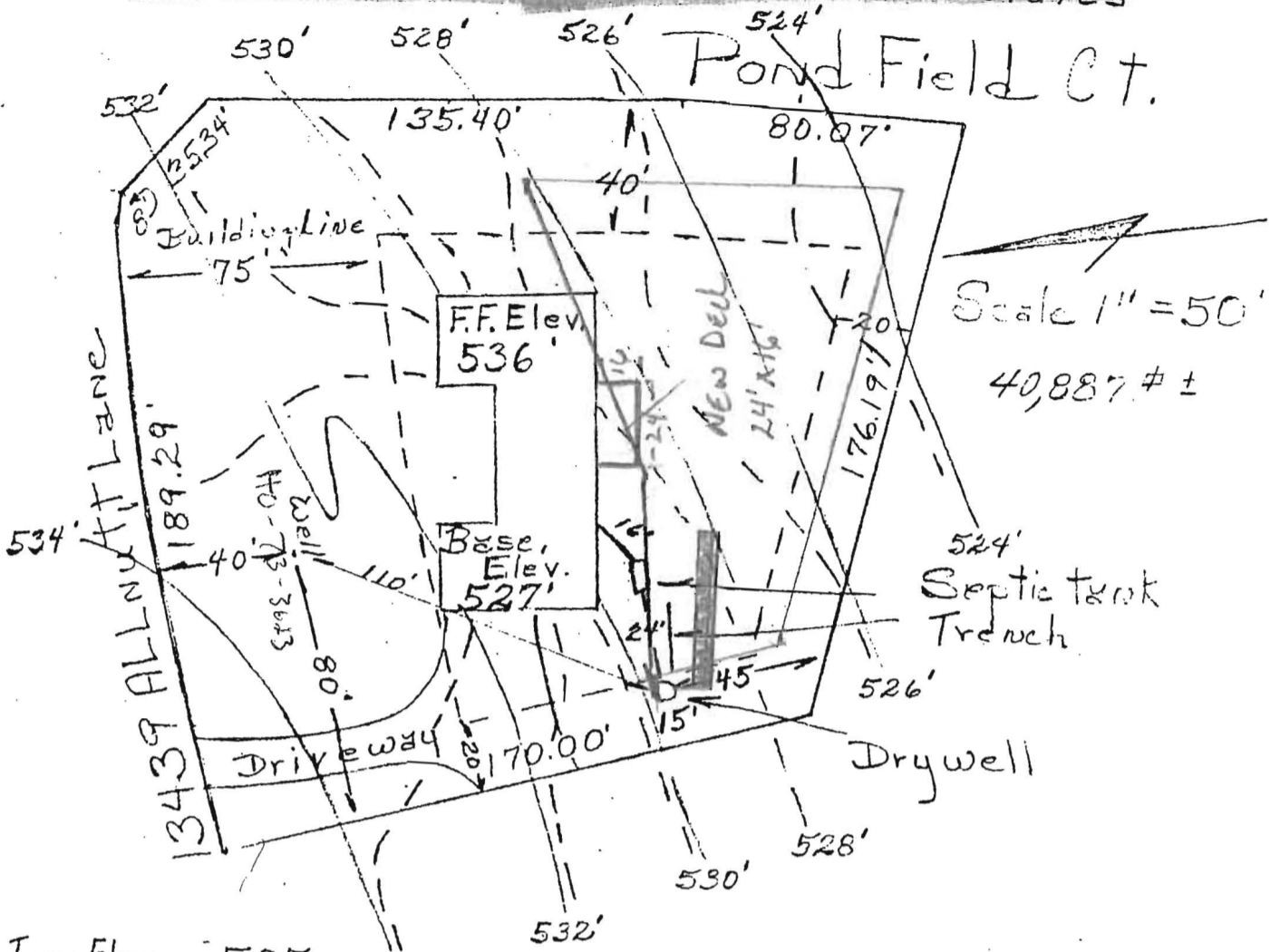
Is Sediment Control approval required for issuance? Yes No
 CONTINGENCY CONSTRUCTION START

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	#

Distribution of Copies: White: Building Officials Green: PSZA,Zoning Yellow: PSZA,Engineering Pink: Health Gold: SHA

Lot 17 Sec 2 Allnutt Farms Estates



- House Inv. Elev. 527
- Tank Inv. Elev. 526.67
- Tank Exist. Elev. 530
- Drywell Inv Elev. 526
- Drywell Exist. Elev. 530
- Elev at Time of perc. 530
- Well Complete Elev. Exist. 534'

I certify the measurements & elev. are actual & correct.
 Donald Souder

Souder Builders Inc
 9335 Old Scaggsville Rd
 Laurel Md 20810
 Phone 725 5772

APPROVED
 WALK-THRU BUILDING PERMIT
 BP# walk-thru A# _____
 APP. SAN [Signature] DATE: 6/11/14
 DESC. OF WORK: deck



Bureau of Environmental Health

8930 Stanford Boulevard, Columbia, MD 21045

Main: 410-313-2640 | 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

June 11, 2014

Property owner(s)
13439 Allnutt Lane
Highland, MD 20770

RE: Variance Approval
13439 Allnutt Lane
Highland, MD 20770

Dear Sir or Madam:

The Health Department received your waiver for the above referenced property. This agency will grant approval of the waiver to the five (5) foot setback for the proposed deck that will be constructed over an existing concrete patio. The structure will encroach into the existing sewage disposal area, however a waiver to move the area within five (5) feet of the property line will easily make up the lost area. A waiver request shall be required at the point when that area is needed for on-site sewage disposal system repair.

Be advised that any future addition may require percolation testing and a Percolation Certification Plan will be required. 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,

A handwritten signature in black ink, which appears to read 'Michael J. Davis'. The signature is written in a cursive style.

Michael J. Davis
Assistant Director
Bureau of Environmental Health

Housko County Health Department

I'm Asking For A Waiver For set Back on
Septic Field @ 13439 Allent Lane Highlands, MD 20770
We ARE putting in A Deck over the Existing Concrete
Patio. With that said, some of the Existing Patio and
House ARE in the Septic Field by A Few Feet.

Thanks Bob Trawick
J.R. Trawick Co Inc.

MHC 38011



6/11/14

Approved

M. Davis