

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

B06206620

Building Address 5540 Adams Ridge Rd

Suite/Apt. #: _____ SDP/WP/Petition #: _____

Census Tract _____ Subdivision Adams Beach S-2

Section _____ Area _____ Lot 19

Tax Map _____ Parcel _____ Grid _____

Zoning _____ Map Coordinates _____ Lot size _____

Property Owner's Name Robert Feinstein

Address _____

City _____ State MD Zip Code _____

Home Phone _____ Work Phone _____

Applicant's Name & Mailing Address, (if other than stated hereon):

Phone 410 531 1856 Fax cell # 443-812-4935

Existing Use _____

Proposed Use _____

Estimated Construction Cost \$ _____

Description of Work Pole Barn (Detached)
24 x 40 1-story

Contractor Company _____

Contact Person _____

Address _____

City _____ State MD Zip Code _____

License No. _____

Phone _____ Fax _____

Occupant or Tenant _____

Contact Name _____

Address _____

City _____ State MD Zip Code _____

Phone _____ Fax _____

Engineer or Architect Company _____

Contact Person _____

Address _____

City _____ State MD Zip Code _____

Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: <u>12</u>	Water Supply: <u>N/A</u> <input type="checkbox"/> Public <input type="checkbox"/> Private
No. of stories: <u>1</u>	Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> 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: <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
1st floor: _____	Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
2nd floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: _____	Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms _____	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other: _____
Height: _____	
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 Height: _____	
<input type="checkbox"/> State Certified Modular <input type="checkbox"/> 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 _____
 Title/Company _____

Print Name _____
 Date _____

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 \$ <u>25.00</u>
State Highways			Rear: _____	Permit fee \$ _____
Building Official			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ			Side St.: _____	Add'l per. fee \$ _____
Health	<u>12/19/06</u>	<u>Arabyal</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?			Is Entrance Permit required?	Balance due \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # <u>5737</u>
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Historic District?	Validation # _____
ONE STOP SHOP: <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	
Distribution of Copies: White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA			Lot Coverage for NewTown Zone _____	Accepted by <u>1</u>
T:\norma\PERMIT.FRM			SDP/Red-line approval date _____	

Mike J. Davis

From: "Bob Firestein" <bfirestein@sveconway.com>
To: <mjdavis@co.ho.md.us>
Cc: <sfegel@co.ho.md.us>; "Mark Stevens" <mstevens@stevensbuilders.com>
Sent: Wednesday, December 13, 2006 4:35 PM
Subject: Pole Barn Permit Application #B06006620

Mr. Mike Davis,

I am writing this email regarding my Pole Barn Permit application for my home address, 5540 Adams Ridge Road Clarksville MD 21029.

Your contact information was forwarded to me by Ms. Sarah Fegal, who is reviewing my application for the Howard County Health Department. Ms. Fegal had informed me that a perk test would be required in order for my application to be approved by the Health Department. I respectfully disagreed with Sarah and asked her what steps I needed to take to appeal this opinion / decision. She suggested that I contact you.

I would appreciate an opportunity to come and meet with you or anyone else so I can plead my case regarding my permit application.

What I disagree with and do not understand is the following:

Why is there a need for a perk test if my property's approved site plan (dated 8/19/97) has approximately 10,000 square feet of "Private Sewage Easement" clearly allocated. According to my builder that is enough space for my current septic field as well as a second and a third should my original fail. I assume that I would have to go through the perk test process again should my current septic field fail, which would make sense at that point. It obviously doesn't make any sense to me for this Pole Barn, which for the record has no plumbing or electricity.

If the reason for a perk test is to be sure that I am not building the Pole Barn in any area that may be a current or future sewage easement, the site plan / layout clearly indicates I am not anywhere close to the previously approved sewage easement.

Another item to consider is that my lot size is 3.408 acres (148,452 sq. ft.), my house occupies approximately 3,200 sq. ft., the approved septic area occupies 10,000 sq ft., the pole barn would be 960 sq. ft.. I have over 90% of my lot left to utilize as a future sewage easement should my current field fail. The Pole Barn only utilizes 1/2 of 1% of my property in regards to square footage.

Lastly, I have spoken with 2 neighbors that have recently built Pole Barns both indicating to me that they were not required to perform a perk test. Also another neighbor constructed an attached 2 car garage, this also did not require a perk test.

Mr. Davis, I would truly appreciate your assistance with this matter and would welcome an opportunity to discuss further should you desire.

Thank you in advance for your time and consideration. I will patiently await your decision.

Sincerely

Robert Firestein
Vice President
Svec / Conway Printing Inc.
2618 Pittman Drive
Silver Spring MD 20910
(301) 589 - 6666 phone
(301) 585 - 5135 fax
(443) 812 - 4935 mobile