

Permits: 410-313-2455
 Inspections: 410-313-1810
 Automated Line: 410-313-3800

Howard County Building/Fire Permit Application
 Department of Inspections, Licenses & Permits
 3430 Court House Drive
 Ellicott City, MD 21043

Permit Number:

B12002826

Building Address: 13763 BARBERY WAY SYKESVILLE MD 21784
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: _____
 Section: _____ Area: _____ Lot: 26
 Tax Map: 0009 Parcel: 0307 Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

Property Owner's Name: JOSEPH + SANDRA MCQUAIN
 Address: 13763 BARBERY WAY SYKESVILLE MD 21784
 City: SYKESVILLE State: MD Zip Code: 21784
 Home Phone: 443 8124746 Work Phone: 410 8870944
 Applicant's Name & Mailing Address, (if other than stated herein):
SAME
 Phone: _____ Fax: _____
 Email: _____

Existing Use: NONE SFD
 Proposed Use: GARAGE
 Estimated Construction Cost: \$ \$12,000.00
 Description of Work: METAL ARCH GARAGE ON PAD, DETACHED 25X50
 Occupant or Tenant: _____
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Contractor Company: HOMEOWNER
 Contact Person: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 License No.: _____
 Phone: _____ Fax: _____
 Email: _____

Engineer/Architect Company: _____
 Responsible Design Prof.: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

BUILDING DESCRIPTION - COMMERCIAL	
Building Characteristics	Utilities
Height:	<u>Water Supply</u>
No. of stories:	<input type="checkbox"/> Public
Gross area, sq. ft./floor:	<input type="checkbox"/> Private
	<u>Sewage Disposal</u>
Area of construction (sq. ft.):	<input type="checkbox"/> Public
	<input type="checkbox"/> Private
Use group:	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<u>Construction type:</u>	<u>Heating System</u>
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Masonry	<u>Sprinkler System:</u>
<input type="checkbox"/> Wood Frame	<input type="checkbox"/> N/A
<input type="checkbox"/> State Certified Modular	<input type="checkbox"/> Full
<input checked="" type="checkbox"/> Roadside Tree Project Permit #	<input type="checkbox"/> Partial
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Other Suppression
<u>Roadside Tree Project Permit #</u>	No. of Heads:

BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics	Utilities
<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>
<u>Depth</u> <u>Width</u>	<input type="checkbox"/> Public
1 st floor:	<input checked="" type="checkbox"/> Private
2 nd floor:	<u>Sewage Disposal</u>
Basement:	<input type="checkbox"/> Public
<input type="checkbox"/> Finished Basement	<input checked="" type="checkbox"/> Private
<input type="checkbox"/> Unfinished Basement	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Crawl Space	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Slab on Grade	<u>Heating System</u>
No. of Bedrooms:	<input type="checkbox"/> Electric
<u>Multi-family Dwelling</u>	<input type="checkbox"/> Oil
No. of efficiency units:	<input type="checkbox"/> Natural Gas
No. of 1 BR units:	<input type="checkbox"/> Propane Gas
No. of 2 BR units:	
No. of 3 BR units:	
Other Structure:	
Dimensions:	
Footings:	<input checked="" type="checkbox"/> Roadside Tree Project Permit #
Roof:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> State Certified Modular	<u>Roadside Tree Project Permit #</u>
<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 THERE TO; (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.

Joseph M. McQuain
 Applicant's Signature
JOSEPH M. MCQUAIN
 Print Name
JFXMCGUAIN@GMAIL.COM
 Email Address
8-17-12
 Date
RECEIVED
 AUG 17 2012
 LICENSES & PERMITS DIVISION

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

AGENCY	DATE	SIGNATURE OF APPROVAL
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		
Fire Protection		

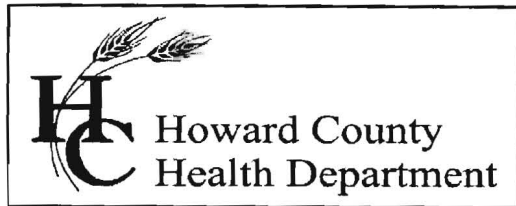
Is Sediment Control approval required for issuance? Yes No
 CONTINGENCY CONSTRUCTION START
 ONE STOP SHOP

DPZ SETBACK INFORMATION

Front: _____
 Rear: _____
 Side: _____
 Side St.: _____
 All minimum setbacks met? Yes No
 Is Entrance Permit Required? Yes No
 Historic District? Yes No
 Lot Coverage for New Town Zone: _____
 SDP/Red-line approval date: _____

Filing Fee	\$ 25.00
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$

CK # 502



Office of the Health Officer

7178 Columbia Gateway Drive, Columbia, MD 21046-2147

Main: 410-313-6300 | Fax: 410-313-6303

TDD 410-313-2323 | Toll Free 1-866-313-6300

www.hchealth.org

Facebook: www.facebook.com/hocohealth

Twitter: [HowardCoHealthDep](https://twitter.com/HowardCoHealthDep)

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

8/27/2012

TO: Joseph and Sandra McQuaid, owner/applicant
13763 Barberry Way, Sykesville, MD 21784

FROM: Robert Bricker, REHS/R.S., Environmental Sanitarian
Well and Septic Program

RE: Building Permit Application 12002826, Percolation Certification Plan required

Dear Mr. and Mrs. McQuaid,


The referenced building permit application cannot be approved by the Health Department at this time. The Annotated Code of Maryland [COMAR, 26.04.02.02.D(4)] requires the Approving Authority, i.e. the Health Department, to certify existing on-site sewage disposal and water supply systems prior to issuance of a construction permit by the county. Furthermore, Howard County Code [3.805(A)(2)(X)] requires that each lot created prior to March 1972 have a septic easement (re: septic reserve area) having "adequate area for an initial septic system and two (2) repairs".

The Howard County Health Department requires that you have an approved Percolation Certification Plan. The content of this plan [Howard County Code 3.805] and the supporting data serve as Health Department's justification for approving the current building permit application (B120028266) and any subsequent building permit applications.

If a septic reserve area must be established, percolation tests will need to be conducted. Certification of the existing on-site sewage disposal system is required and may be accomplished by exposing, and documenting the condition of, the components of the septic system. If an existing distribution trench or dry well appears suitable for continued use, a soil profile observation is dug nearby to describe and prove that an adequate soil buffer extends 4 feet deeper [COMAR 26.04.02.04.C(1)] than the bottom of the trench or dry well. An Environmental Sanitarian records data of these evaluations.

Usually the data are compiled in a technical drawing by a Licensed Land Surveyor or Professional Engineer, and submitted to the Health Department for approval. The Health Department maintains lists of excavation contractors and engineers or surveyors who are known to offer their services in Howard County

You may contact me at the Bureau of Environmental Health, 410-313-1771 if you have questions about these contents.

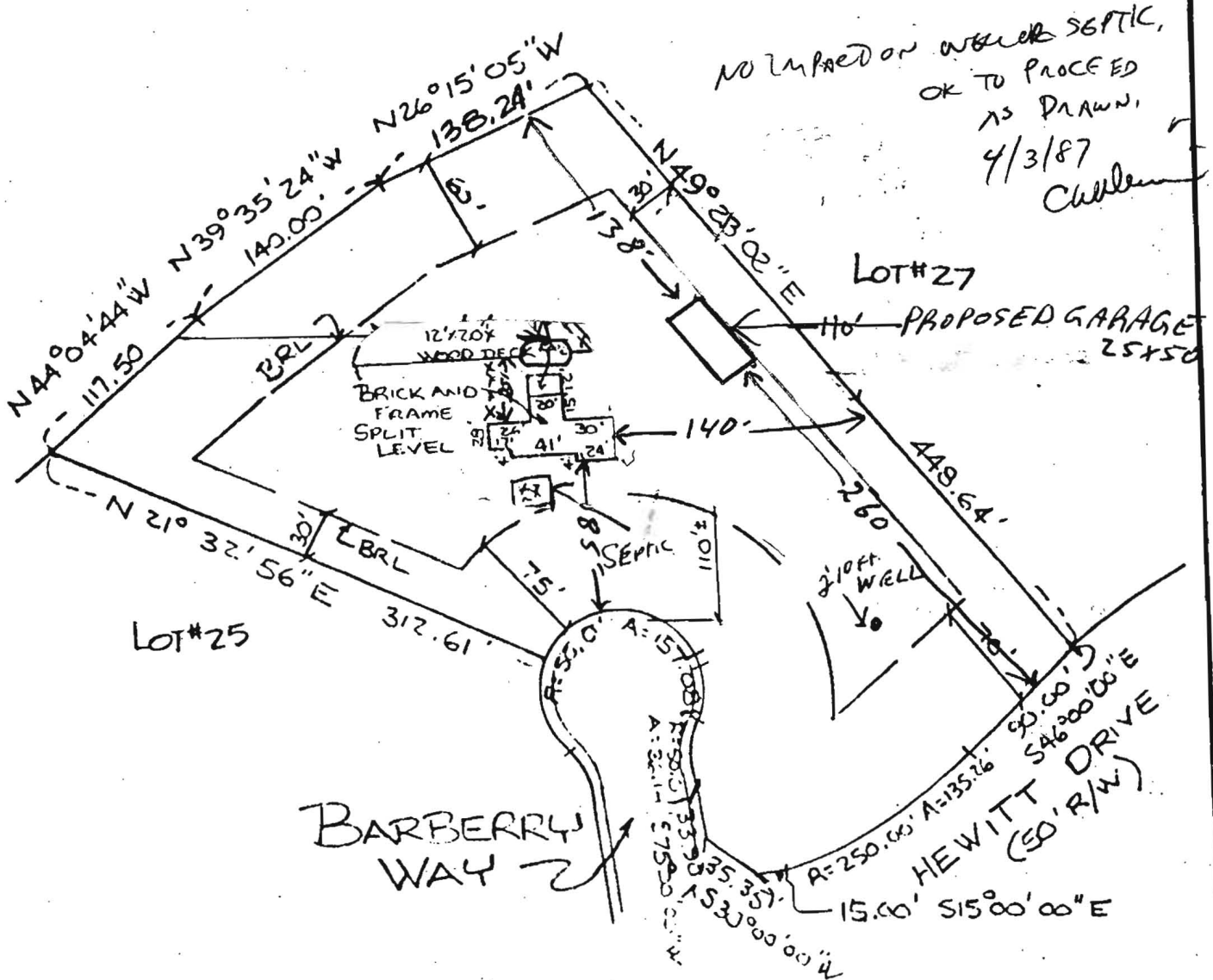
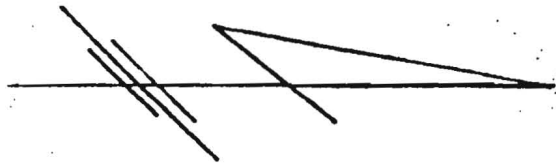
RB 
Copy: file

LOT 26

SECTION II

"WESTCLIFF MANOR"

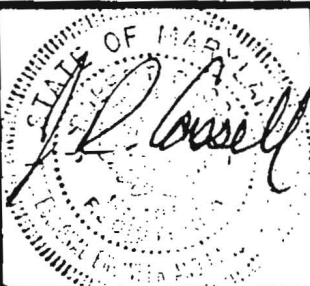
PLAT BOOK # 4045



NO IMPROVEMENT ON ~~NEAR~~ SEPTIC,
OK TO PROCEED
AS DRAWN,
4/3/87
Challen

THE INFORMATION ON THIS PLAT SHOWS ONLY THAT THE IMPROVEMENTS INDICATED HEREON ARE CONTAINED WITHIN THE OUTLINES OF THE LOT UPON WHICH THEY ARE ERECTED AND IS NOT TO BE CONSTRUED AS ESTABLISHMENT OF PROPERTY LINES.

ATLANTIC
ENGINEERING
corp.
198 Pennsylvania Ave.
Westminster, Md. 21157
(301) 876-1288



HOUSE LOCATION SURVEY		
13763 BARBERRY WAY		
LIBER FOLIO		
HOWARD COUNTY, MD		
Date	Signed	Scale 1"=100'
3/13/87	GAG/RHC	File 247-1630-011