



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: 11790 FARNSIDE RD.
 City: ELLMOTT CITY State: MD Zip Code: 21042
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: _____
 Section: _____ Area: _____ Lot: 49
 Tax Map: _____ Parcel: _____ Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: NATIO
 Proposed Use: 1 STORY ADDITION
 Estimated Construction Cost: \$89,200
 Description of Work: BUILD ONE STORY ADDITION

Occupant or Tenant: OCCUPANT
 Was tenant space previously occupied? Yes No
 Contact Name: GREG WALL
 Address: 11 NEWBURG AVE
 City: CATONSVILLE State: MD Zip Code: 21228
 Phone: 410-361-0231 Fax: _____
 Email: GWALL@WALLZWALL.NET

Property Owner's Name: JOE SCALFANI
 Address: 11790 FARNSIDE RD.
 City: ELLMOTT CITY State: MD Zip Code: 21042
 Phone: 410-992-7971 Fax: _____
 Email: JSALFANI@YAHOO.COM

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

Contractor Company: WALLZWALL CONSTRUCTION LLC
 Contact Person: GREG WALL
 Address: 11 NEWBURG AVE
 City: CATONSVILLE State: MD Zip Code: 21228
 License No.: 123700
 Phone: 410-361-0231 Fax: _____
 Email: GWALL@WALLZWALL.NET

Engineer/Architect Company: WZ WALL CONSTRUCTION
 Responsible Design Prof.: _____
 Address: 11 NEWBURG AVE
 City: CATONSVILLE State: MD Zip Code: 21228
 Phone: 410-361-0231 Fax: _____
 Email: GWALL@WALLZWALL.NET

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>38</u>	<u>77</u>
Area of construction (sq. ft.):	2 nd floor: <u>38</u>	<u>77</u>
Use group:	Basement: <u>38</u>	<u>77</u>
Construction type:	<input type="checkbox"/> Finished Basement	
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Unfinished Basement	
<input type="checkbox"/> Structural Steel	<input checked="" type="checkbox"/> Crawl Space	
<input type="checkbox"/> Masonry	<input type="checkbox"/> Slab on Grade	
<input checked="" type="checkbox"/> Wood Frame	No. of Bedrooms:	
<input type="checkbox"/> State Certified Modular	Multi-family Dwelling	
<input type="checkbox"/> Roadside Tree Project Permit	No. of efficiency units:	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	No. of 1 BR units:	
Roadside Tree Project Permit #	No. of 2 BR units:	
	No. of 3 BR units:	
	Other Structure:	
	Dimensions:	
	Footings:	
	Roof:	
	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Utilities	
Water Supply	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Sewage Disposal	
<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 checked="" type="checkbox"/> No	
Heating System	
<input checked="" 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 checked="" 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: EODIE TOWLAN
 Email Address: ETOWLAN@WALLZWALL.NET
 Title/Company: WALL Z WALL CONSTRUCTION

Print Name: EODIE TOWLAN
 Date: 9-24-2015

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>9/24/15</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

Prepared By:

www.exactaMD.com
Toll Free: 866-735-1916 Fax: 866-744-2882

Farside Rd



PROPERTY ADDRESS: 1790 Farside Road Ellicott City, Maryland 21042

SURVEY NUMBER: 1204.1863

FIELD WORK DATE: 5/15/2012

REVISION HISTORY: (rev. 0 5/15/2012)

APPROVED

WALK-THRU BUILDING PERMIT

BP#

A#

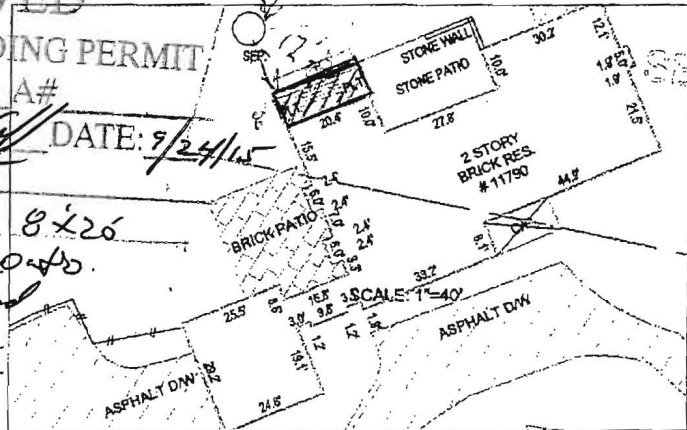
APP. SAN

DATE: 9/24/15

DESC. OF WORK:

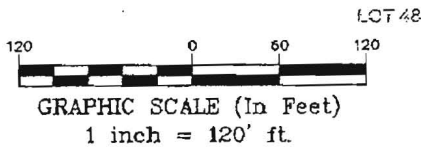
1204.1863
BOUNDARY SURVEY
LOT 49
FARSIDE
HOWARD COUNTY, MARYLAND
05-11-2012 SCALE 1"=120'

existing septic
Proposed 1 story 8x26
addition over ex. patio.
Wave request approval
for P.C. to see
3.805

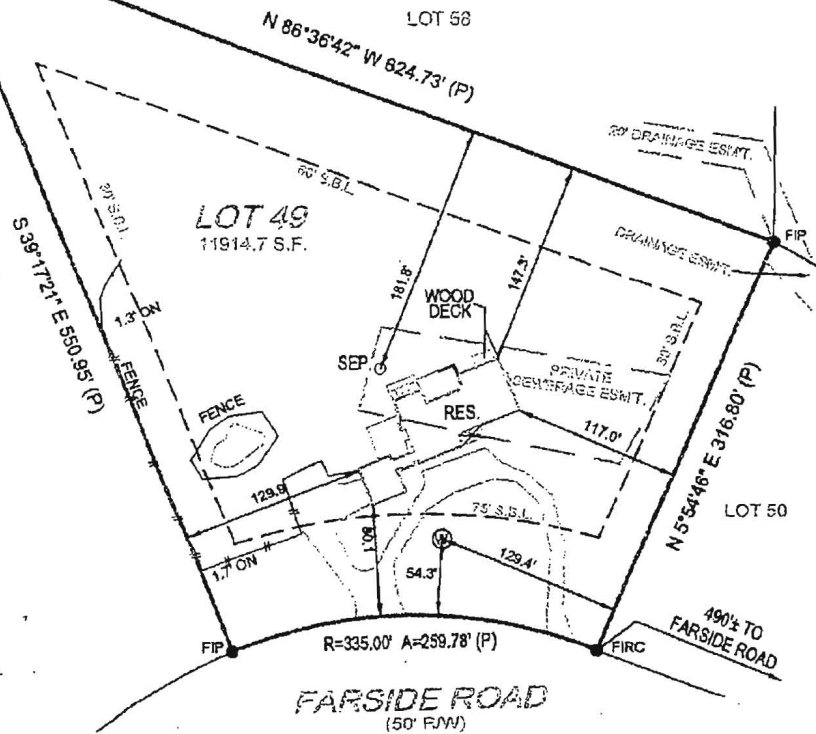


NOTES:

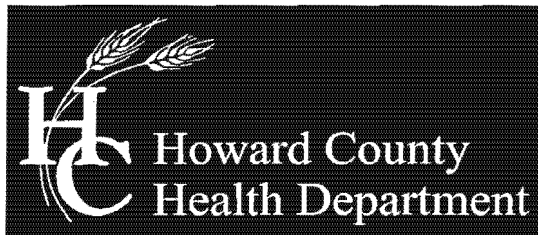
1. THE PROPERTY SHOWN HEREON IS IDENTIFIED AS TAX ACCOUNT 0307283 AMONG THE ASSESSMENT RECORDS OF HOWARD COUNTY, MARYLAND.
2. THE PROPERTY IS NOW IN THE NAME OF JOSEPH A. SCALFANI AND VINCENTA V. SCALFANI BY DEED RECORDED IN LIBER 10783 AT FOLIO 681 AMONG THE LAND RECORDS OF HOWARD COUNTY, MARYLAND.



John E. Krobath
EXPIRES 5-26-12



POINTS OF INTEREST:



Bureau of Environmental Health

7178 Columbia Gateway Drive, Columbia, MD 21046-2147

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., Acting Health Officer

September 24, 2015

Thomas Edward Toulan
11790 Farside Road
Ellicott City, MD 21042

RE: Variance Approval
11790 Farside Road
Ellicott City, MD 21042

Mr. Toulan:

This letter is being issued in response to your variance request dated September 24, 2015. This agency will grant **approval** of the waiver to the required Percolation Certification Plan and perc testing to establish a septic reserve area, as required by the *Howard County Code, Subtitle 8, Section 3.805*. The waiver has been approved on the basis that the proposed addition does not impact on the available area for on-site sewage disposal. Please note that any future addition of living space or other property improvements will likely require testing and a percolation certification plan. Any deviations from the site plan submitted with the building permit 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, appearing to read 'Michael J. Davis', is written over the typed name.

Michael J. Davis
Assistant Director

Bureau of Environmental Health

9-24-2015

I am Requesting a WAIVER to Sec 3.805
For the Pere Certification

The ADDRESS is 11790 FARSIDE RD
IN ELlicott City, MD 21042.

The Property owners are JOE & JENNIFER
410-992-7971

Selknam. The Builder is Wall to Wall
Construction. The project is an 8x20 2 story
addition.

THOMAS EDWARD TOLAN
410-925 6718

9/24/15
Approved
Mark J. Davis