



# 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: 4336 Buckskin Wood DR  
City: Ellicott City State: MD Zip Code: 21042  
Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
Census Tract: \_\_\_\_\_ Subdivision: Buckskin Ridge  
Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: 42  
Tax Map: 22 Parcel: 77 Grid: 21  
Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: 1.19

Property Owner's Name: Jason Rose  
Address: 4336 Buckskin Wood Dr  
City: Ellicott City State: MD Zip Code: 21042  
Phone: 443-878-4111 Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

**Applicant's Name & Mailing Address, (If other than stated herein)**  
Applicant's Name: Karen Rowley  
Address: 293 Southland Ct  
City: Dunkirk State: MD Zip Code: 20754  
Phone: 410-507-7705 Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

Existing Use: SFD  
Proposed Use: Inground pool  
Estimated Construction Cost: \$ 30,000.00  
Description of Work: 20' x 14' inground concrete pool, depth 3' to 8', fence to code 830 SF

Contractor Company: Johnson Pools  
Contact Person: \_\_\_\_\_  
Address: P.O. Box 667  
City: Columbia State: MD Zip Code: 21045  
License No.: 120855  
Phone: 410-956-3630 Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

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

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:	Depth	Width
Gross area, sq. ft./floor:	1 <sup>st</sup> floor:	
	2 <sup>nd</sup> floor:	
Area of construction (sq. ft.):	Basement:	
	<input type="checkbox"/> Finished Basement	
Use group:	<input type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
<b>Construction type:</b>	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:	
<input type="checkbox"/> Structural Steel	<b>Multi-family Dwelling</b>	
<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	
<b>Water Supply</b>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
<b>Sewage Disposal</b>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Heating System</b>	
<input type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other: _____	
<b>Sprinkler System:</b>	
<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.

Karen Rowley  
Applicant's Signature

Karen Rowley  
Print Name

\_\_\_\_\_  
Email Address  
Johnson Pool Co.  
Title/Company

10/19/2015  
Date

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>10/19/15</u>	<u>H. O'Connell</u>

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

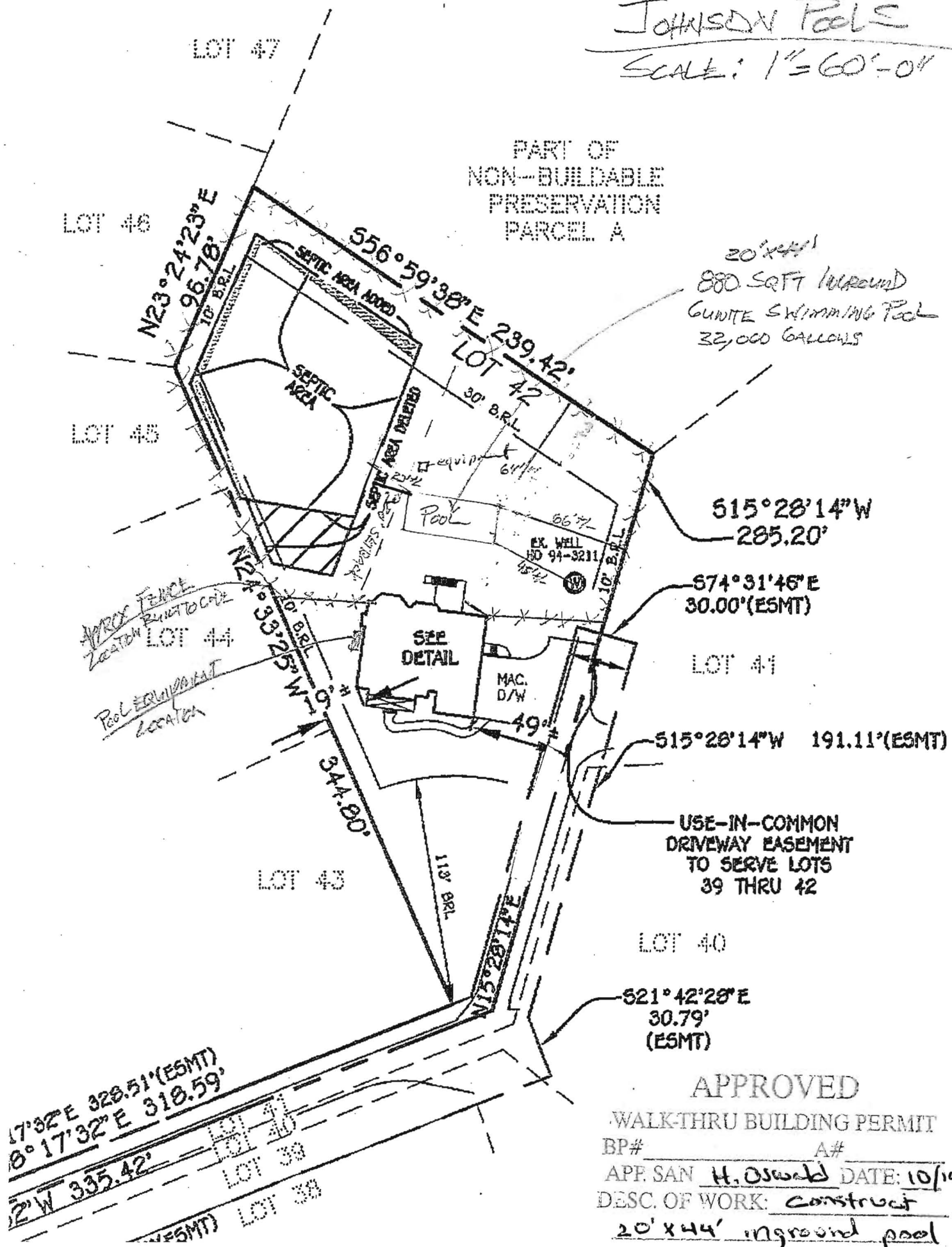
DPZ SETBACK INFORMATION	
Front:	
Rear:	
Side:	
Side St.:	
All minimum setbacks met?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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	#

JOHNSON POOL

SCALE: 1" = 60'-0"

PART OF  
NON-BUILDABLE  
PRESERVATION  
PARCEL A



20' x 44'  
880 SQFT Inground  
GUNITE SWIMMING POOL  
32,000 GALLONS

515°28'14"W  
285.20'

574°31'46"E  
30.00'(ESMT)

LOT 41

515°28'14"W 191.11'(ESMT)

USE-IN-COMMON  
DRIVEWAY EASEMENT  
TO SERVE LOTS  
39 THRU 42

LOT 40

521°42'28"E  
30.79'  
(ESMT)

APPROVED

WALK-THRU BUILDING PERMIT

BP# \_\_\_\_\_ A# \_\_\_\_\_

APP. SAN H. Oswald DATE: 10/14/15

DESC. OF WORK: Construct  
20' x 44' inground pool

LAYOUT 11/13/09 INSP 4 \_\_\_\_\_  
 INSP 2 11/16/09 INSP 5 \_\_\_\_\_  
 INSP 3 \_\_\_\_\_ INSP 6 \_\_\_\_\_

ISSUE DATE: 11/4/09  
 APPROVAL DATE: 11/17/09

**PERMIT**  
 P 531985  
 A 513618

**Tax ID # 05435978**  
**ON-SITE SEWAGE DISPOSAL SYSTEM**  
**HOWARD COUNTY HEALTH DEPARTMENT**  
**BUREAU OF ENVIRONMENTAL HEALTH**

HATFIELD'S EQUIPMENT IS PERMITTED TO INSTALL  ALTER

ADDRESS: \_\_\_\_\_ PHONE NUMBER: 301-854-6172

SUBDIVISION: Buckskin Ridge LOT NUMBER: 42

ADDRESS: 4336 Buckskin Wood Drive PROPERTY OWNER: Columbia Builders Inc

SEPTIC TANK CAPACITY (GALLONS): 2000 OUTLET BAFFLE FILTER REQUIRED

PUMP CHAMBER CAPACITY (GALLONS): \_\_\_\_\_ COMPARTMENTED TANK REQUIRED

NUMBER OF BEDROOMS: 5 APPLICATION RATE: 1.2

SQUARE FOOTAGE OF HOUSE: Unkn

LINEAR FEET OF TRENCH REQUIRED: 130

*Trenches 3' Wide  
 Inlet 4.5, Bottom 6.5'  
 55' and 85' Trenches*

TRENCHES:	Trenches to be 3.0 feet wide. Inlet 3.5 feet below original grade. Bottom maximum depth 5.5 feet below grade. Effective area begins at <u>3.5</u> feet below original grade. 2.0 feet of stone below distribution pipe. <u>4</u>
LOCATION:	Set septic tank per layout inspection. Set distribution box per layout inspection. Set distribution box at the highest point in the center at the top of the easement Near the North side of the property. Install 130 feet of trench on contour (2) two 65' trenches per layout inspection.
NOTES:	Stake septic easement corners. Call for layout inspection. Mark utilities. Gravel tickets must be available for Environmental Sanitarians. Stone must meet Howard County specs. Subject to approval.

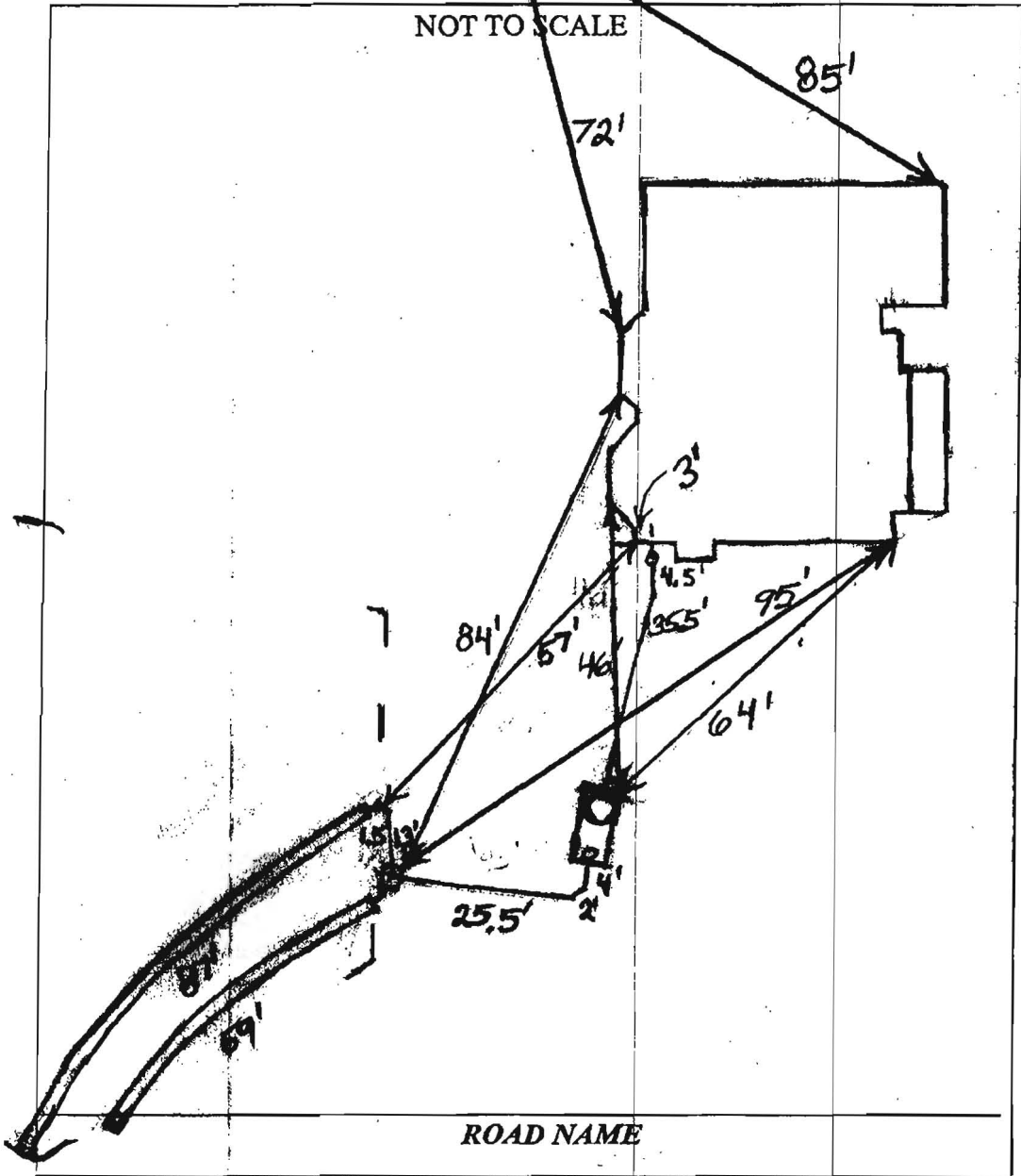
PLANS APPROVED: Dana Bernard DATE: 10/1/09

- NOTE: PERMIT VOID AFTER 2 YEARS
- NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
- NOTE: WATERTIGHT SEPTIC TANKS REQUIRED
- NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL
- NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS

**NEITHER THE HOWARD COUNTY COUNCIL OR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT CALL 410-313-1771 FOR INSPECTION OF SEPTIC SYSTEM**

HO-74-3211

NOT TO SCALE



TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
3'	4'-5'	6'-7'
NUMBER OF TRENCHES		2
TOTAL LENGTH		146'
ABSORPTION AREA		438 + Sidewalk
DISTRIBUTION BOX LEVEL		Levelers
DISTRIBUTION BOX BAFFLE		Yes
DISTRIBUTION BOX PORT		Yes

SEPTIC TANK DATA	
SEPTIC TANK I LEVEL	Yes
MANUFACTURER	Babylon
CAPACITY	2000 GAL
SEAM LOC	Top
TANK LID DEPTH	2'-3'
BAFFLES	Yes
BAFFLE FILTER	No
MANHOLE LOC	Front
6" PORT LOC	Rear
WATERTIGHT TEST	No
SLOTTED	Yes
DATE ON LID	No

PUMP/SEPTIC TANK LEVEL	
N/A	
MANUFACTURER	
CAPACITY	GAL
SEAM LOC	
TANK LID DEPTH	
BAFFLES	
BAFFLE FILTER	
MANHOLE LOC	
6" PORT LOC	
WATERTIGHT TEST	
SLOTTED	
DATE ON LID	

PRE-CONSTRUCTION:

11/13/09 O.K. to set tank in deleted part of septic  
 easement. Didn't do trench layout because of rain. (BB)  
 11/16/09 Tank set and house connection made. Laid  
 out trenches. (BB) 11/17/09 System finished. O.K. to backfill. (BB)

INSTALLATION:

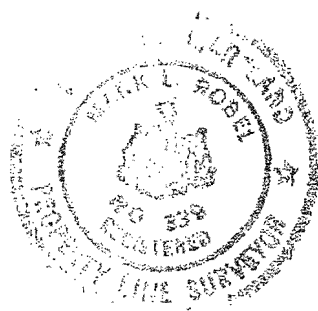
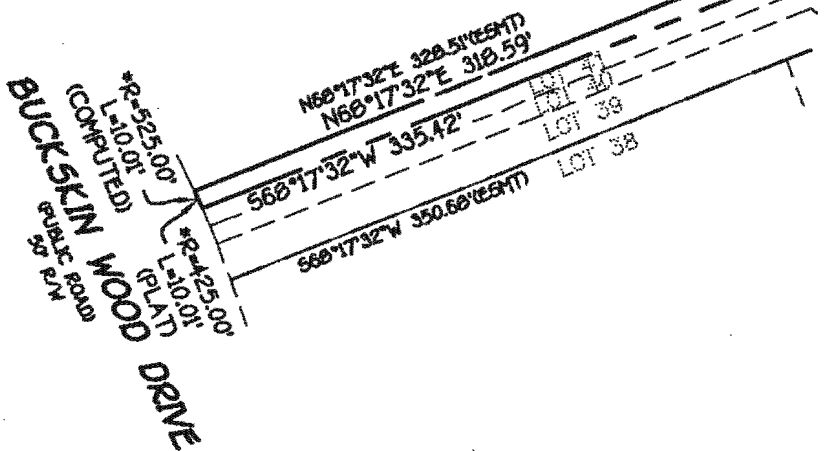
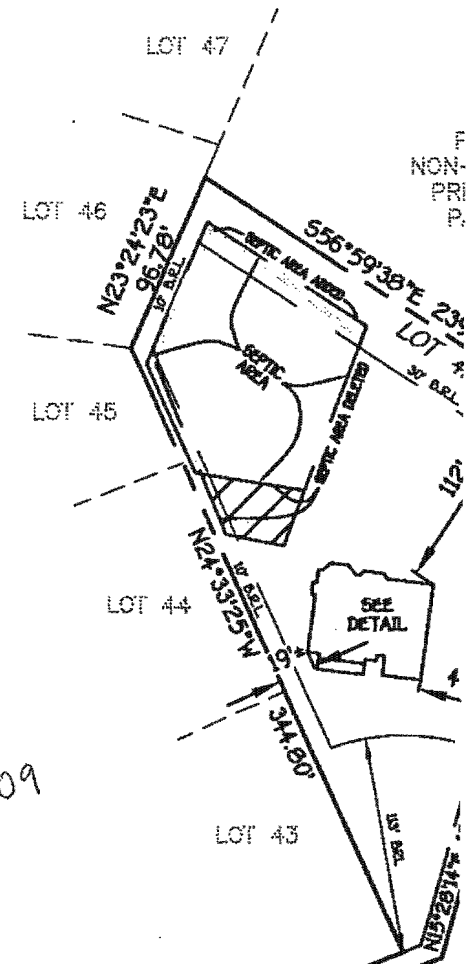
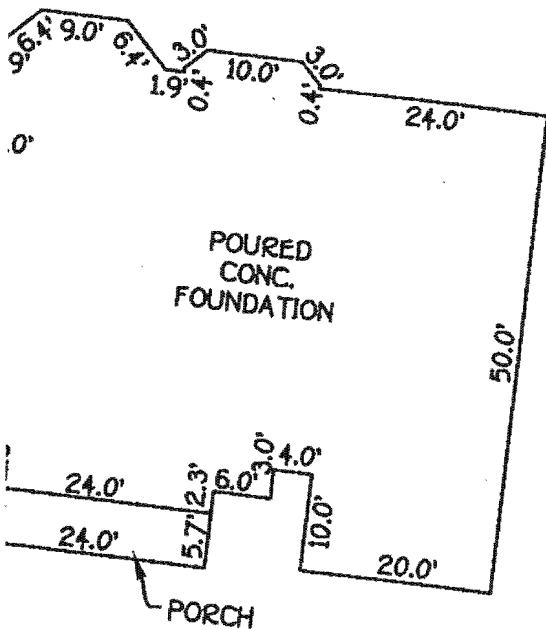
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FINAL INSPECTOR B. Baber DATE OF APPROVAL 11/17/09

IS REQUIRED BY A LENDER OR TITLE INSURANCE COMPANY OR ITS AGENTS IN  
 LATED TRANSFER, FINANCING OR REFINANCING OF THE PROPERTY SHOWN  
 BEING A BOUNDARY SURVEY, THIS LOCATION DRAWING IS NOT INTENDED  
 OF PROPERTY LINES AND IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT  
 AGES, BUILDINGS OR OTHER EXISTING OR FUTURE IMPROVEMENTS. AS A RESULT,  
 NOT PROVIDE FOR ACCURATE IDENTIFICATION OF PROPERTY LINES, BUT SUCH  
 QUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING FOR RE-FINANCING.  
 I ZONE C ON THE NATIONAL FLOOD INSURANCE PROGRAM FLOOD INSURANCE RATE  
 LAND, COMMUNITY PANEL No. 2400440021B EFFECTIVE DEC. 4, 1985.  
 IE TO PROPERTY LINE AS SHOWN ON THE PLAT HEREON ARE TO AN ACCURACY OF

BJECT TO ALL EASEMENTS, RIGHTS OF WAY AND CONDITIONS OF RECORD.  
 THIS PLAN (IDENTIFIED WITH THE ATTACHED WELL TAG NUMBER HO-94-3211)  
 ISHER, COLLINS AND CARTER, INC. PROFESSIONAL LAND SURVEYORS AND IS

MATHEMATICAL ERRORS.



LOT 42  
 REVISION PLAT  
 BUCKSKIN RIDGE  
 LOTS 1 THRU 47 AND