

**HOWARD COUNTY
 PERMIT APPLICATION**

PERMIT NUMBER

B07003810

Building Address 14645 Mustang Point
Glenwood MD 21738

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

Census Tract _____ Subdivision _____

Section _____ Area _____ Lot _____

Tax Map _____ Parcel _____ Grid _____

Zoning _____ Map Coordinates _____ Lot size _____

Property Owner's Name John Brannon

Address 14645 Mustang Point
21738

City Glenwood State MD Zip Code 21738

Home Phone 301-529-5041 Work Phone _____

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

Phone _____ Fax _____

Existing Use S.F.

Proposed Use S.F. w/ th Screened Porch & Deck

Estimated Construction Cost \$ 9,000

Description of Work
ADD 12X20 Screen Porch
ADD 10X30 P.T. Deck

Contractor Company Robert Wartz Inc.

Contact Person Robert Wartz

Address 5293 Kays Rd

City Ellicott State MD Zip Code 21043

License No. 37267

Phone 410-747-8929 Fax 410-747-8353

Occupant or Tenant _____

Contact Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Engineer or Architect Company _____

Contact Person N/A

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics

Height: _____

No. of stories: _____

Gross area, sq. ft. per floor: _____

Use group: _____

Construction type:
 Reinforced Concrete
 Structural Steel
 Masonry
 Wood Frame
 State Certified Modular

Utilities

Water Supply:
 Public
 Private

Sewage Disposal:
 Public
 Private

Electric Yes No
 Gas Yes No

Heating System:
 Electric Oil
 Natural Gas
 Propane Gas

Sprinkler system: N/A
 Full
 Partial
 Other Suppression
 # of Heads _____

Building Characteristics

SF Dwelling SF Townhouse
Depth Width

1st floor: _____

2nd floor: _____

Basement:
 Finished Basement Unfinished Basement
 Crawl space Slab on Grade
 No. of Bedrooms: _____

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: _____

State Certified Modular
 Manufactured Home

Utilities

Water Supply:
 Public
 Private

Sewage Disposal:
 Public
 Private

Electric Yes No
 Gas Yes No

Heating System:
 Electric Oil
 Natural Gas
 Propane Gas

Sprinkler system: N/A
 NFPA #13D
 NFPA #13R
 Other: _____

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 [Signature]
 Title/Company _____

Print Name Robert Wartz
 Date 8-30-07

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 \$ _____	
State Highways			Rear: _____	Permit fee \$ _____	
Building Official			Side: _____	Excise tax \$ _____	
Dev. Engineering DPZ			Side St: _____	Add'l per. fee \$ _____	
Health	<u>9/6/07</u>	<u>[Signature]</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 # _____	
			Historic District?	Validation \$ _____	
			YES <input type="checkbox"/> NO <input type="checkbox"/>		
			Lot Coverage for New/Town Zone _____		
			SDP/Red-line approval date _____	Accepted by _____	
Distribution of Copies -	White: Building Official	Green: LDD, DPZ	Yellow: DED, DPZ	Pink: Health	Gold: SHA
T:\Normal\PERMIT.FRM					



Under
Circuit

Proposed

25

N 26°56'38" W 199.78'

S 58°25'06" W

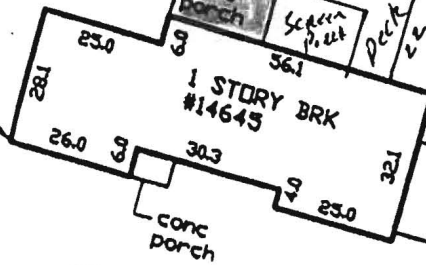
122.63±2.0'

shed

20'

20' 22' 32'

85.5'±2.0'



N 57°28'43" E

24359'

APPROVED

WALK-THRU BUILDING PERMIT

BP# B07003810 A# 19204

APP. SAN SF DATE: 9/10/07

DESC. OF WORK:
26' porch 12x20' screen porch
52,265 sf and 10x30 deck

265.00'

75' PRL

L=112.00 R=360.00

S 37°55'17" E 92.23'

MUSTANG PATH



No evidence of property corners was found.
Apparent occupation is shown.

Date: 4-17-07
Plat Book:
Plat No.: 3498
Work Order: 07-1939
Address: 14845 MUSTANG PATH
District: 4
Jurisdiction: HOWARD COUNTY, MD

Scale: 1"=40' Dm: [Signature]
NO TITLE REPORT FURNISHED

Surveyor's Certification

I hereby certify that the survey shown hereon is correct to the best of my knowledge and that, unless noted otherwise, it has been prepared utilizing description of record. This survey is not a boundary survey and the location or existence of property corners is neither guaranteed nor implied. Fence lines, if shown, are approximate in location. Building restriction lines shown are as per available information and are subject to the interpretation of the originator.

[Signature of Stephen Wenthold]

LOCATION DRAWING
LOT 28
SECTION ONE
GLENWOOD ESTATES

NOTE: This plat is of benefit to a consumer only insofar as it is required by a lender or a title insurance company or its agent in connection with contemplated transfer, financing or refinancing. This plat is not to be relied upon for the establishment or location of fences, garages, buildings, or other existing or future improvements. This plat does not provide for the accurate identification of property boundary lines. but



Meridian Surveys, Inc.
811 Russell Avenue
Suite #303
Gaithersburg, MD 20879
(301) 794-0000

HOWARD COUNTY
PERMIT APPLICATION

PERMIT NUMBER
307002496

Building Address 14645 Mustang Pass
Greenwood MD 21738

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

Census Tract _____ Subdivision _____

Section _____ Area _____ Lot _____

Tax Map _____ Parcel _____ Grid _____

Zoning _____ Map Coordinates _____ Lot size _____

Property Owner's Name John Anne Bignone

Address 14645 Mustang Pass

City Greenwood State MD Zip Code 21738

Home Phone 301-529-5011 Work Phone _____

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

Phone SAW Fax _____

Existing Use S. Family

Proposed Use S. Family w/ Sunroom

Estimated Construction Cost \$ 45,000

Description of Work ADD 20'x24' SUNROOM
SLAB ON GRADE 1 STORY

Contractor Company Robert Weisz Inc.

Contact Person ROBERT WEISZ

Address 5293 Keegan Rd

City Ellicott State MD Zip Code 21043

License No. 37267

Phone 410-747-9929 Fax 410-747-9353

Occupant or Tenant _____

Contact Name SAW

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Engineer or Architect Company _____

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: _____	Water Supply: _____ Public <input type="checkbox"/> Private <input type="checkbox"/>
No. of stories: _____	Sewage Disposal: _____ Public <input type="checkbox"/> Private <input type="checkbox"/>
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Construction type: _____ Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular <input type="checkbox"/>	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
	Sprinkler system: N/A <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: _____ Public <input type="checkbox"/> Private <input type="checkbox"/>
1st floor: <u>30'</u> <u>6'</u>	Sewage Disposal: _____ Public <input type="checkbox"/> Private <input checked="" type="checkbox"/>
2nd floor: _____	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Basement: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/>	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Sprinkler system: N/A <input type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____
No. of Bedrooms _____	
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: _____	
State Certified Modular <input type="checkbox"/>	
Manufactured Home <input type="checkbox"/>	

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 Robert Weisz Inc.

Title/Company _____

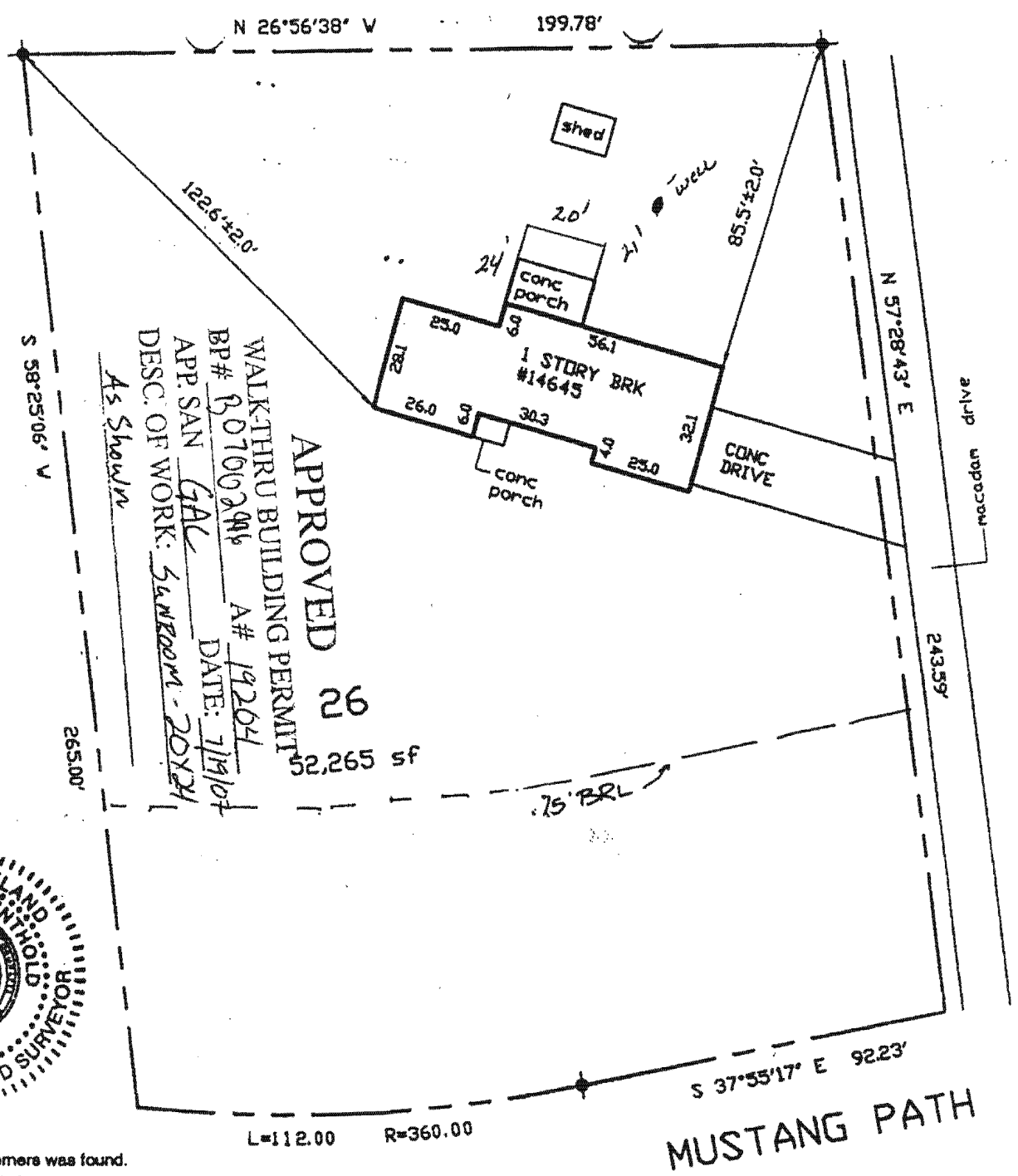
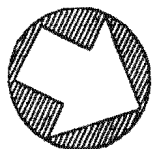
Print Name Robert Weisz

Date 7-5-07

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
** PLEASE WRITE NEATLY AND LEGIBLY. **
- FOR OFFICE USE ONLY -

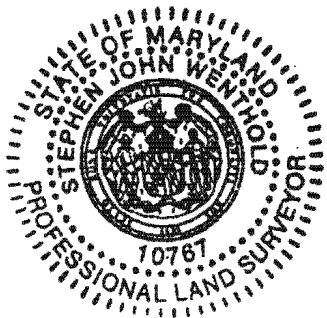
AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official		
Dev. Engineering, DPZ	<u>7/19/2007</u>	<u>[Signature]</u>
Health		
Fire Protection		
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>		
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>		
ONE STOP SHOP: <input type="checkbox"/>		
Distribution of Copies- White: Building Official	Green: LDD, DPZ	Yellow: DED, DPZ
Pink: Health	Gold: SHA	

DPZ SETBACK INFORMATION	PROPERTY ID#:
Front: _____	Filing fee \$ _____
Rear: _____	Permit fee \$ _____
Side: _____	Excise tax \$ _____
Side St.: _____	Add'l per. fee \$ _____
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
Lot Coverage for NewTown Zone _____	Check # _____
SDP/Red-line approval date _____	Validation # _____
Accepted by _____	



APPROVED
 WALK-THRU BUILDING PERMIT
 BP# B0700296 A# 19204
 APP SAN GAC DATE: 7/19/07
 DESC. OF WORK: SANITROOM - 20X24
 As Shown
 52,265 SF

25



No evidence of property corners was found.
 Apparent occupation is shown.

Date: 4-17-07
 Plat Book:
 Plat No.: 3498
 Work Order: 07-1939
 Address: 14845 MUSTANG PATH
 District: 4
 Jurisdiction: HOWARD COUNTY, MD

Scale: 1"=40' Drn: *[Signature]*
 NO TITLE REPORT FURNISHED

Surveyor's Certification

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[Signature of Stephen Wenthold]



Meridian Surveys, Inc.
 811 Russell Avenue
 Suite #303
 Gaithersburg, MD 20879
 (301) 704-0400

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FILE INQUIRY NOTES

DATE	RESULTS OF REVIEW FOR FILE
7/19/07	<p>Walk thru BP for 14645 Mustang Path for 2 sunroom - No perc-cert on file. Did site visit afternoon of 7/13/07 - Auger (A) confirmed good soils. Also noticed that adjacent wells (opposite side of street) are located and were approved in locations possibly < 100' from - (14676) the originally proposed SDA. Also at least 1 well (14684) is directly downslope of this homes septic system - unsure of exact distance. Potentially impacted addresses (known) are - 14645 Mustang Path, ^{septic} 14676 Mustang Path 14684 Mustang Path (wells) Also looks like possible impacts at 14684 14653 uphill of 14692 and possibly < 100' of separation - See preliminary plan approved in Glenwood Estates file for approved locations of wells/septics.</p>
7/19/07	<p>OK'd By Mike Davis</p> <p>These issues need to be addressed at the time of Septic Repair, Well replacement, perc, Bedroom or other major additions. Perc Cert Requirement was waived in this circumstance due to minor nature of the Building Permit. No opportunity for improvement @ this time</p> <p>* Situation needs to be addressed. * John A. gr</p>

* Please Scan *



25

26

52,265 sf



No evidence of property corners was found.
Apparent occupation is shown.

Date: 4-17-07
Plat Book:
Plat No.: 3498
Work Order: 07-1939
Address: 14645 MUSTANG PATH
District: 4
Jurisdiction: HOWARD COUNTY, MD

Scale: 1"=40' Drn: *[Signature]*
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[Signature: Stephen Wenthold]

LOCATION DRAWING
LOT 26
SECTION ONE
GLENWOOD ESTATES

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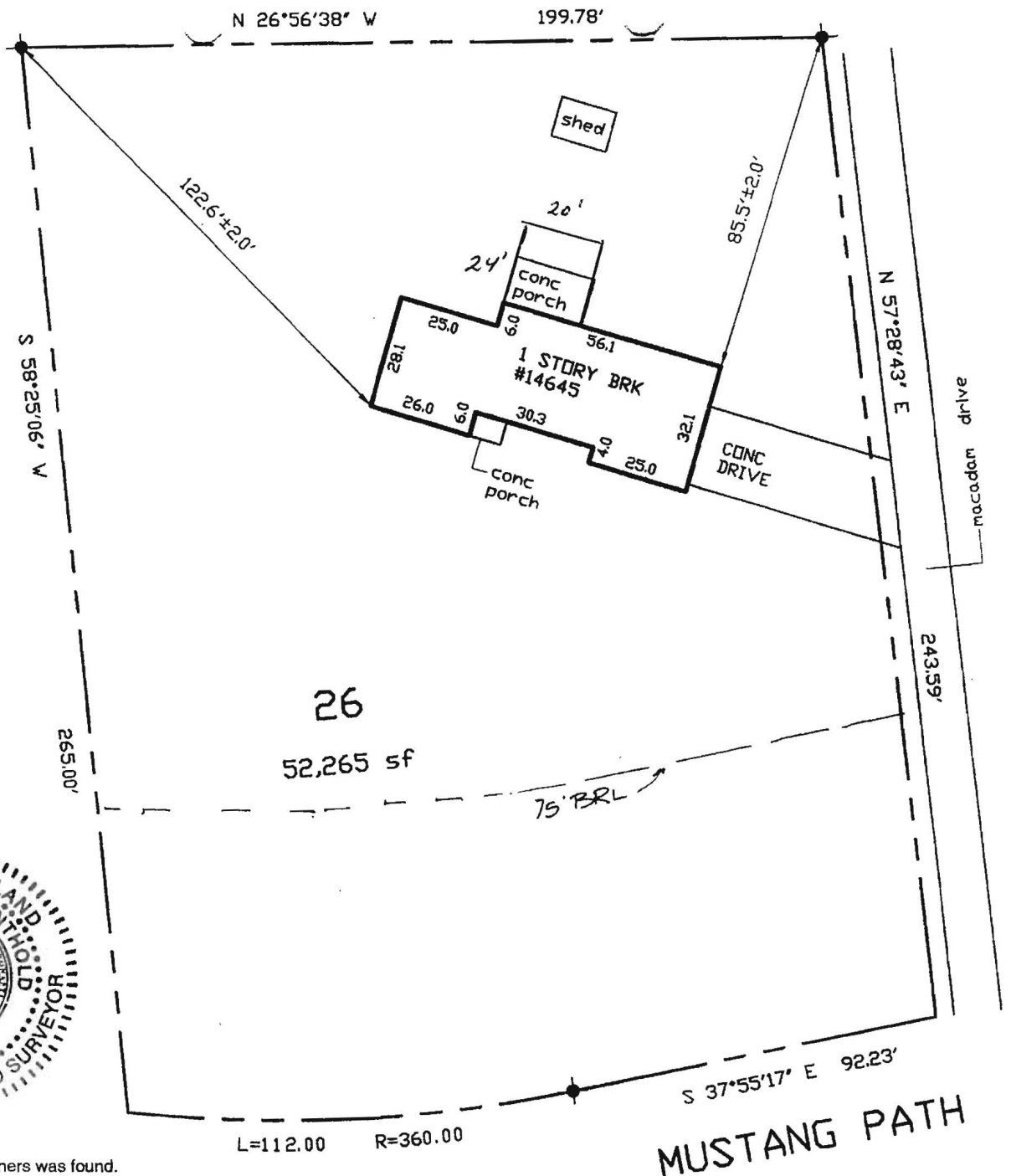
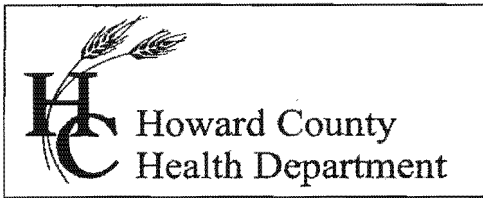


Photo A



Photo B





Bureau of Environmental Health
7178 Columbia Gateway Drive, Columbia MD 21046
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

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

July 2, 2007

Mr. John Giannone
14645 Mustang Path
Glenwood, MD 21738

RE: **Variance Approval**
14645 Mustang Path
Glenwood, MD 21738

Dear Mr. Giannone,

The Department of Health has received your variance request dated June 27, 2007 for the above referenced property. This agency will grant **approval** of the variance provided that the twenty by twenty-four foot sunroom is constructed without a basement and is constructed no closer than twenty-one feet to the existing well. Approval of a building permit will be granted by this Department provided that the site plan submitted with the building permit application is consistent with the site plan approved under this variance. 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,

Michael J. Davis, R.S.
Director, Well and Septic Programs

cc: File

June 27, 2007

Mr. Mike Davis
Howard County Health Department
7178 Columbia Gateway Drive
Columbia, MD 21046

Re: 20' x 24' Sunroom Addition
Giannone Residence
14645 Mustang Path
Glenwood, MD 21738

Dear Mr. Davis:

We are requesting a variance to build a 20' wide by 24' deep sunroom on the above reference property. The property currently has a 20' wide by 12' deep concrete porch with a foundation extending to the frost line level, approximately 32".

The existing well sits approximately 30 feet from the existing concrete porch.

Our request is to add 12' to the existing concrete slab for a total of 24' from the face brick. Therefore, the well will be approximately 21' from the slab. We understand that current guidelines mandate a 30' distance from a well to a foundation, but since this is going to be on a slab not a conventional foundation we believe our request for a variance is appropriate and reasonable.

For your review, we have included:

- The plot plan showing the well location in relation to the house.
- The septic layout, showing the system's existence at the front of the house
- Pictures which better describe our situation.
- Photo A shows the proposed side view of the sunroom location to the existing well, while Photo B shows the rear view of the well location to the proposed 24' sunroom.
- Plan A is the new proposed 20'x24' addition.

The new slab extension will include a concrete footing, block, and slab condition or a turn-down slab technique. Both methods are county-approved options.

Please be advised that this will be a solid slab and will not have a full basement or a crawl space foundation.

The total square footage of the existing slab and new proposed slab will be a total of 480 square feet.

Your consideration for granting this variance is appreciated.


John Giannone

Should you have any questions or require additional information, please contact me at 301-529-5041 or e-mail at john.giannone@johnsonDiversey.com or feel free to contact my contractor Robert Wertz at 410-747-8929 or e-mail at RWertzRemodeling@aol.com.