



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: 10/5/16

Permit No.: _____

Building Address: 12747 Fully Quarter Rd
 City: Ellicott City State: MD Zip Code: 21042
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: _____
 Section: _____ Area: _____ Lot: _____
 Tax Map: _____ Parcel: _____ Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: SFR
 Proposed Use: SFR
 Estimated Construction Cost: \$ 4000
 Description of Work: Frame drywall, paint + tile
full bathroom in the basement
40 sqft basement used as family
room no bedrooms
 Occupant or Tenant: _____
 Was tenant space previously occupied? Yes No
 Contact Name: (Michael Herzog)
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Property Owner's Name: Baskar Swaminathan
 Address: 12747 Fully Quarter Rd
 City: Ellicott City State: MD Zip Code: 21042
 Phone: 443-852-6575 Fax: _____
 Email: _____

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

Contractor Company: Perfect Painting and More, Inc.
 Contact Person: Michael Herzog
 Address: 4207 Kolb Ave
 City: Baltimore State: MD Zip Code: 21206
 License No.: 122417
 Phone: 443-829-4218 Fax: _____
 Email: mike@myperfectpainters.com

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

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:	
	2 nd floor:	
Area of construction (sq. ft.):	Basement:	
	<input type="checkbox"/> Finished Basement	
Use group:	<input type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
Construction type:	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:	
<input type="checkbox"/> Structural Steel	Multi-family Dwelling	
<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 checked="" type="checkbox"/> No	Roof:	
Roadside Tree Project Permit #	<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 type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Heating System	
<input 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 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.

Mike @ My Perfect Painters.com
 Applicant's Signature _____
 Email Address _____
 Title/Company President / Perfect Painting and More, Inc.

Michael Herzog
 Print Name _____
10/5/16
 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>10-6-16</u>	<u>Bernard</u>

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

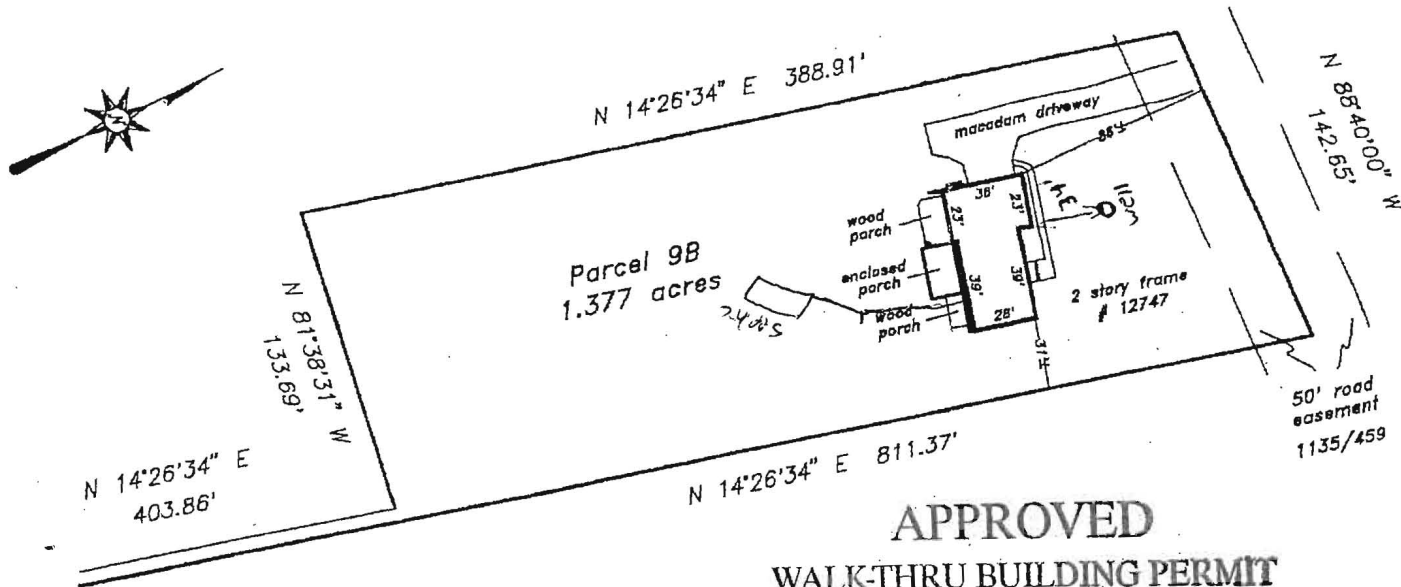
DPZ SETBACK INFORMATION
Front:
Rear:
Side:
Side St.:
All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No
Lot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

tribution of Copies: White: Building Officials Green: PSZA,Zoning Yellow: PSZA,Engineering Pink: Health Gold: SHA

NOTES:

- 1) B.R.L. information, if shown, was obtained from existing record plat or local agencies and is not guaranteed by NTT, Inc.
- 2) Building line and/or Flood Zone information is subject to the interpretation of the originator.
- 3) NTT, Inc. does not certify to unshown or unrecorded encroachments or overlaps.
- 4) Property markers not found, or guaranteed by this location.
- 5) Setback distance accuracy: \pm .



APPROVED

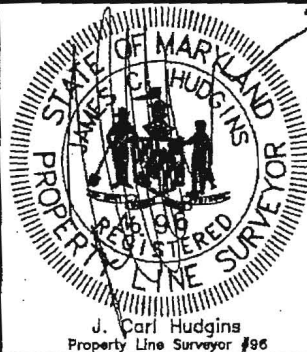
WALK-THRU BUILDING PERMIT

BP# _____ A# _____
 APP. SAN Bernard DATE: 10-6-16
 DESC. OF WORK: Bath Room
Basement. Contractor stated on app.
that the basement was a family room
not bedroom. Approved as shown

Subject property is shown in Zone C on the National Flood Insurance Program Flood Insurance Rate Map of Howard County, Maryland. Panel # 21 of 45 Community Panel # 240044-0021 B Effective date: December 4, 1986

This is to certify that I have surveyed the property shown hereon, being known as Parcel 9B 12747 Folly Quarter Road recorded in the Land Records of Howard County, Maryland in Plat BK. Liber 1368 Folio 375 for the purpose of locating the improvements thereon.

- * This plat is of benefit to the 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 purposes.
- * This plat is not to be relied upon for the establishment of location of fences, garages, buildings, or other existing or future structures.
- * This plat does not provide for the accurate identification of property boundary lines, but such identification may not be required for the transfer of title or for securing financing or refinancing.

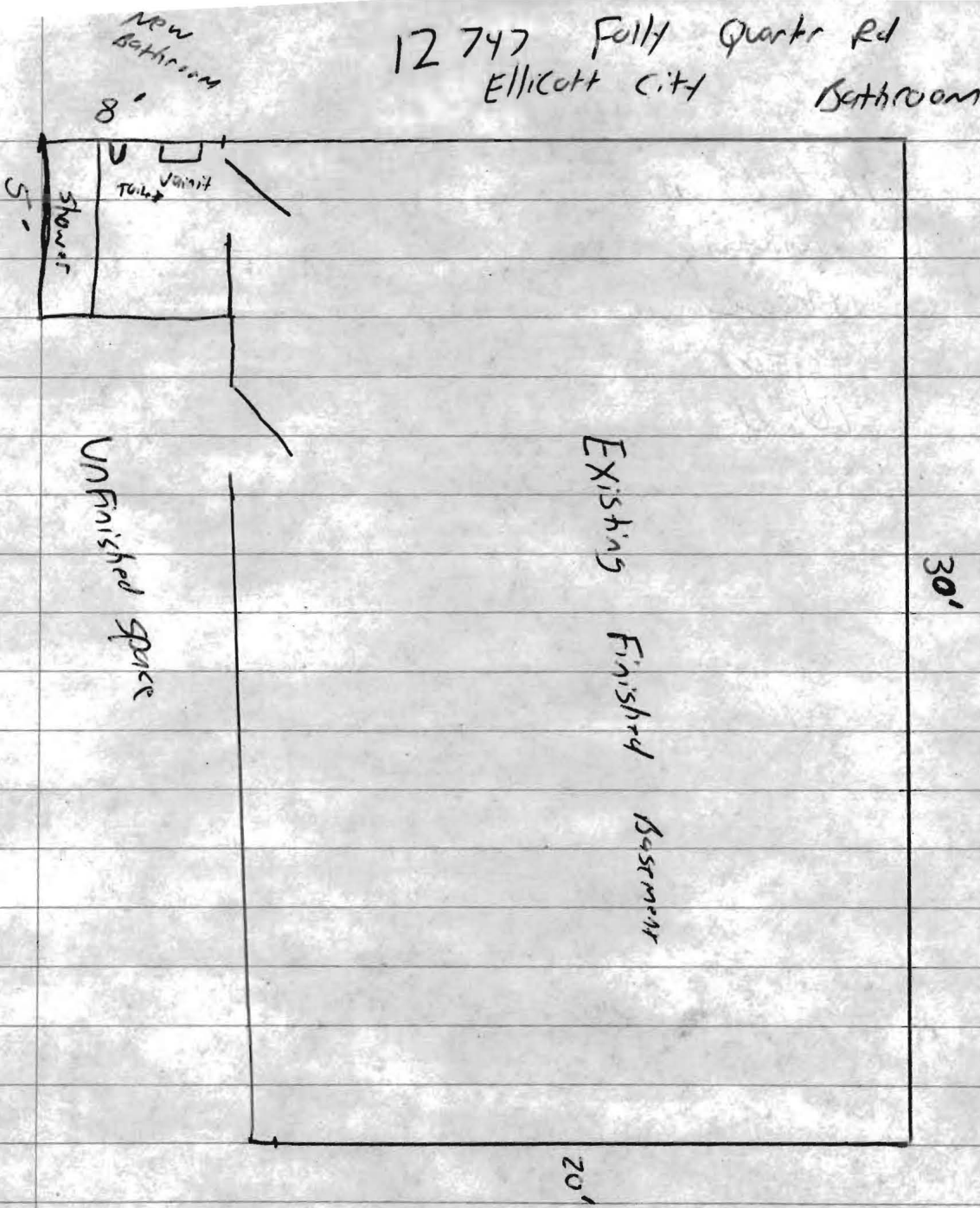


LOCATION DRAWING
 12747 Folly Quarter Road
 Glenelg Manor
 5th election district
 HOWARD COUNTY, MARYLAND

NTT Associates, Inc.
 16205 Old Frederick Road
 Mt. Airy, Maryland 21771
 Ph. (410)442-2031
 Fax No. (410)442-1315

Scale:	1" = 80'
Date:	January 25, 1999
Field by:	JLM
Drawn by:	JLM
Drawing #	3789BE

12747 Fully Quarter Rd
Ellicott City Bathroom



Plot Plan

Drawing

House

Septic

Well

Floor Plans

→

~~8-27-85~~
~~APPROVED~~
8-27-85
9:30 AM
AND LATE AM

WPT- 9/19/85

8-27-85
approved
S. Aul

2150
x 5

P 3572250

A 26732
26723 3180

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
992-2330

05-374367

ELLICOTT CITY

DISTRICT 5th

DATE 7/2/85

INDEXED

Paul Schissler IS PERMITTED TO INSTALL ALTER

ADDRESS _____ PHONE 875-4197

SUBDIVISION Glenely Manor II ROAD 12747 Folly Quarter LOT 9B, Section 2

PROPERTY OWNER Fred Weaver

ADDRESS _____

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES NO

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 180 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 9 feet below original grade. Effective area begins at 4 feet below original grade. 5 feet of stone below distribution pipe. LOCATION: Start the first trench 165 feet from the 142.6' lot line and 25 feet from the 388.9' lot line. Run trench(s) along level ground toward the 811' lot line. NOTE: No trench to exceed 100 feet in length. If more than one trench used, a distribution box is required. Call for inspection of trench before and after gravel is installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

PLANS APPROVED BY C. Williams DATE 4/23/85

COVER NO WORK UNTIL INSPECTED AND APPROVED.

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

NOTE: IF TRENCH IS USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH.

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER. NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH.

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 40 PVC OR ABS.

PERMIT VOID AFTER THREE YEARS.

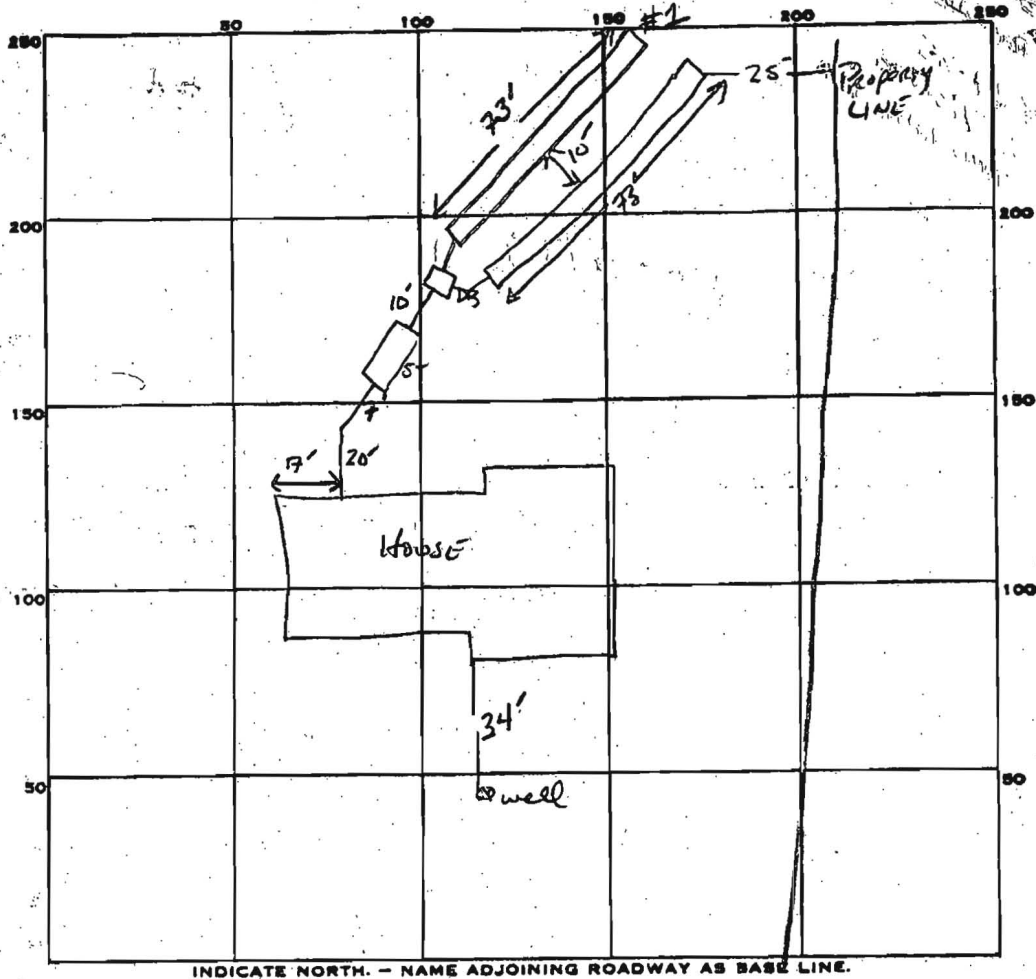
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

A 2167223



180
7 20' ✓
144 FE TRENCH
5 730
11/23/85

PERMIT CARD

SEPTIC TANK, LEVEL 1500 GAL CLEANOUTS ST

DISTRIBUTION BOX, LEVEL

TILE FIELD, DEPTH 9' 9' FT. TRENCH WIDTH 2 FT. INLET 4' 144
730

GRAVEL DEPTH 5' 5' IN TOTAL LENGTH 73' 73' FT. TOTAL 146

NUMBER OF TRENCHES 2 ONE SIDE WALL TOTAL BOTTOM AREA 730

SEEPAGE PITS, INSIDE DIAMETER _____ FT. DEPTH BELOW INLET _____ FT.

ABSORBENT AREA 730 SQ. FT.

REMARKS 8-26-85 OK TO ADD STONE TO TRENCH #1 ; OR TO COVER TRENCH #1 ; Dig #2 AND CALL FOR INSPECTION. S. Abel

DATE SYSTEM APPROVED 8-27-85 INSPECTOR S. Abel

APPLICATION

A 26723

P _____

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DISTRICT 5th

DATE 8/17/77

OKDM

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Howard Associates Fred Weaver

ADDRESS 10370 K PHONE Rhett Realty 465-4920

PROPERTY LOCATION:

SUBDIVISION Gleneig Manor - Section 2 LOT NO. 9B - Section 2

ROAD AND DESCRIPTION 12747
off Folly Quarter Rd.

SIZE OF LOT 40,000 square feet ± TYPE BLDG. 3 or 4
NUMBER OF BEDROOMS _____

IF NOT SINGLE RESIDENCE DESCRIBE N/A

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ Dale Maisel

APPROVED BY Raymond Hodge FOR DITCH DATE 2/15/83
(KIND OF SYSTEM)

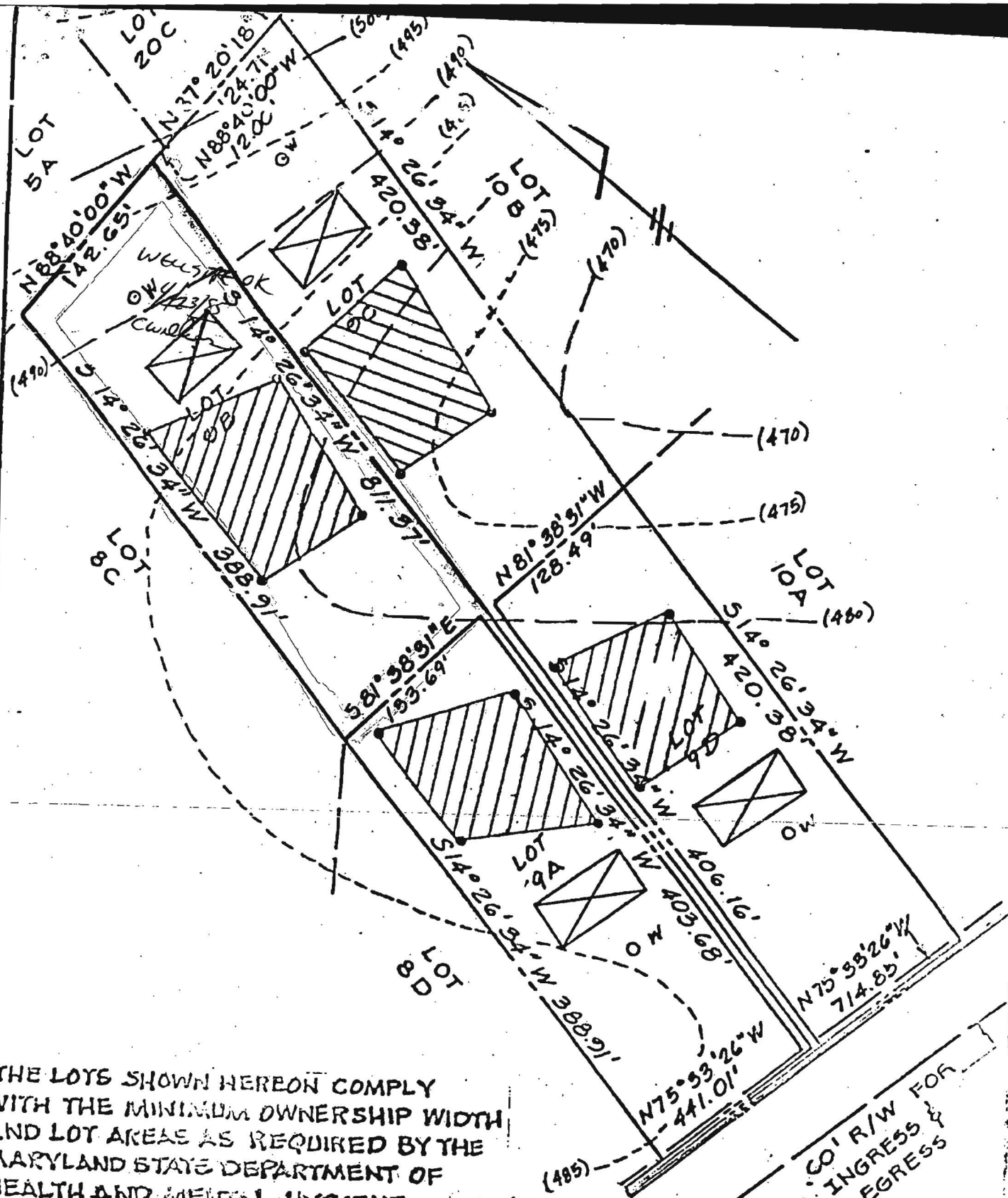
REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

BLDG. PERMIT SIGNED
AND RETURNED 6/9/83
Serial # 65233
S.F.L.

THIS IS NOT A PERMIT



THE LOTS SHOWN HEREON COMPLY WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREAS AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF HEALTH AND MENTAL HYGIENE.

NOTE: PERCOLATION TEST HOLES SHOWN HEREON HAVE BEEN FIELD LOCATED.

APPROVED: FOR PRIVATE WATER AND PRIVATE SEWAGE SYSTEMS.
 HOWARD COUNTY HEALTH DEPARTMENT
Joyce M. Brydges 6-5-78
 COUNTY HEALTH OFFICER - DATE

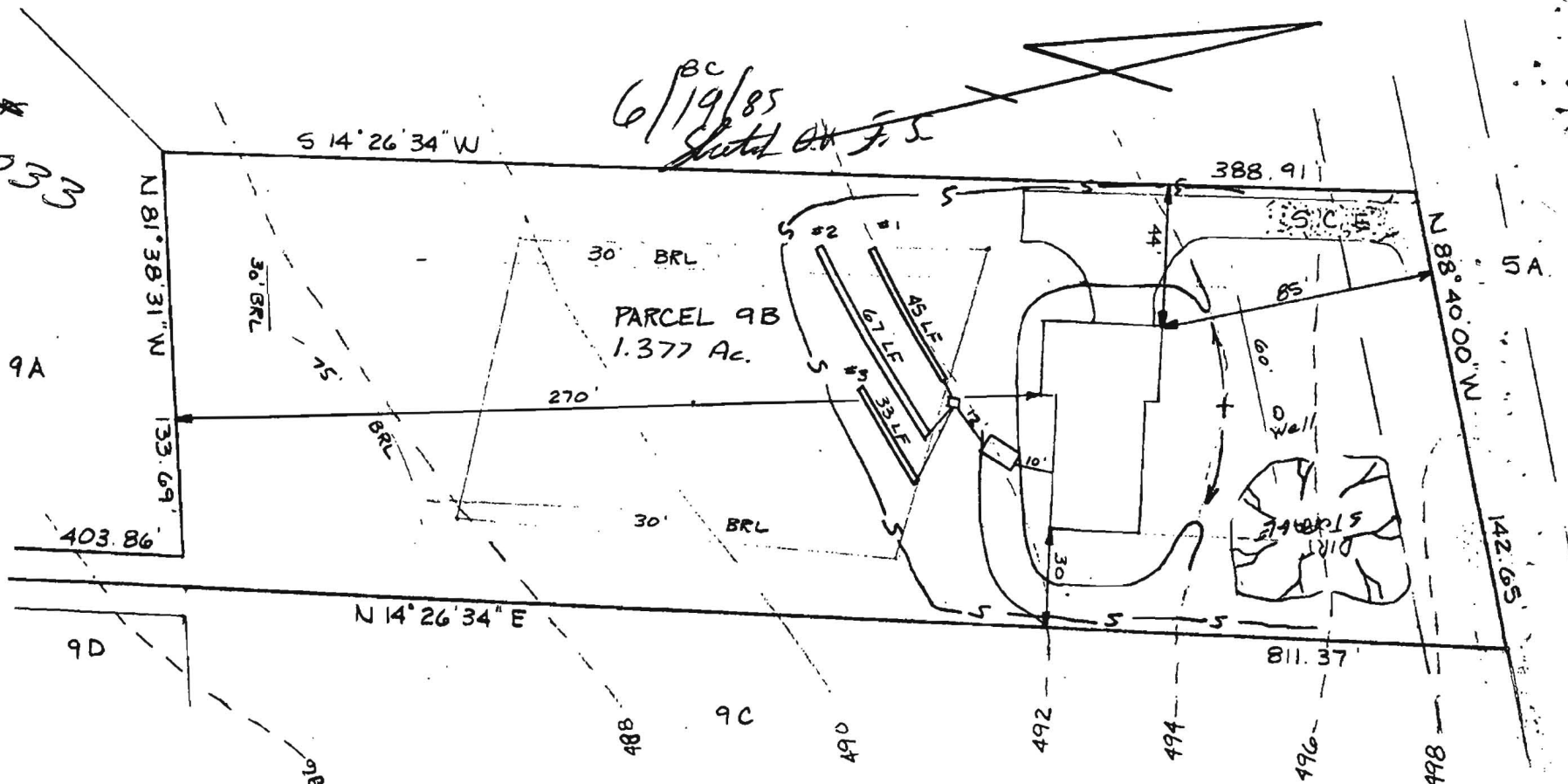
TITLE

PERCOLATION TEST PLAT

F.L.

6/19/85
Sketch of F.S.

B.P.#
 65233



HOUSE:

FIRST FLOOR	496.0
BASEMENT	487.0
INVERT	488.79

SEPTIC TANK:

EXISTING GRADE	492.0
PROPOSED GRADE	493.0
INVERT IN	488.58
INVERT OUT	488.33

DISTRIBUTION BOX:

EXISTING GRADE	492.0
INVERT IN	488.2
INVERT OUT	488.1

TRENCH:

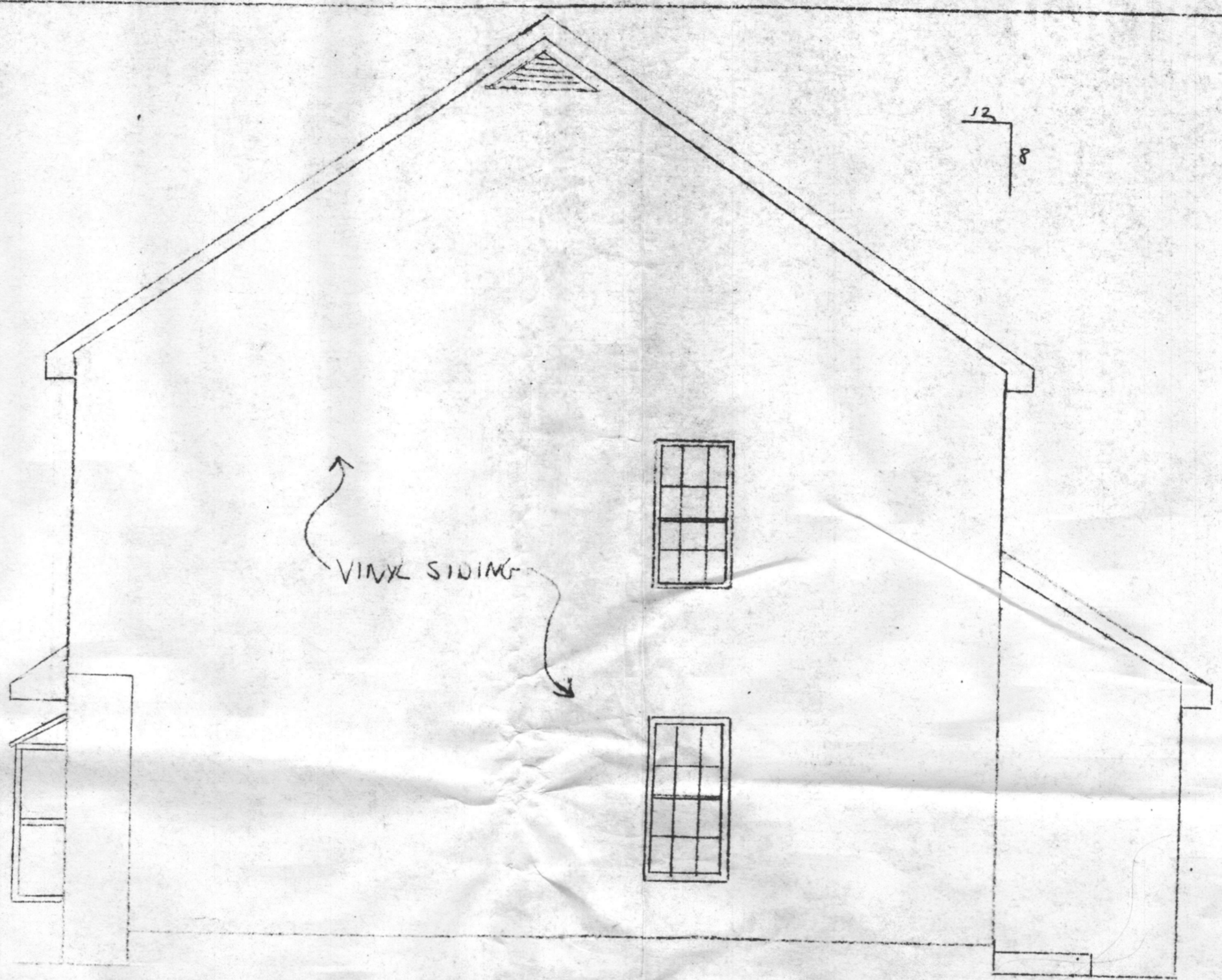
	# 1	# 2	# 3
EXISTING GRADE	492.0	491.8	491.5
INVERT	488.0	487.8	487.5
BOTTOM	483.0	482.8	482.5
STONE	5'	5'	5'
WIDTH	2'	2'	2'
LENTH	45'	67'	33'

I certify the above measurements
 and elevations to be actual and true
 for this property.

J. Carl Hudgins
 J. Carl Hudgins

PLOT PLAN
 PARCEL 9B
 TAX MAP 22 PARCEL 446
 GLENELG MANOR II
 5TH ELECTION DISTRICT
 HOWARD COUNTY, MD.
 SCALE 1"=50' DATE 5/24/85
 DRAWN BY: RIK

PROJECT TO BE EXAMINED BY THE BOARD OF ARCHITECTS, MISSOURI
OCT 22 1958
RECEIVED

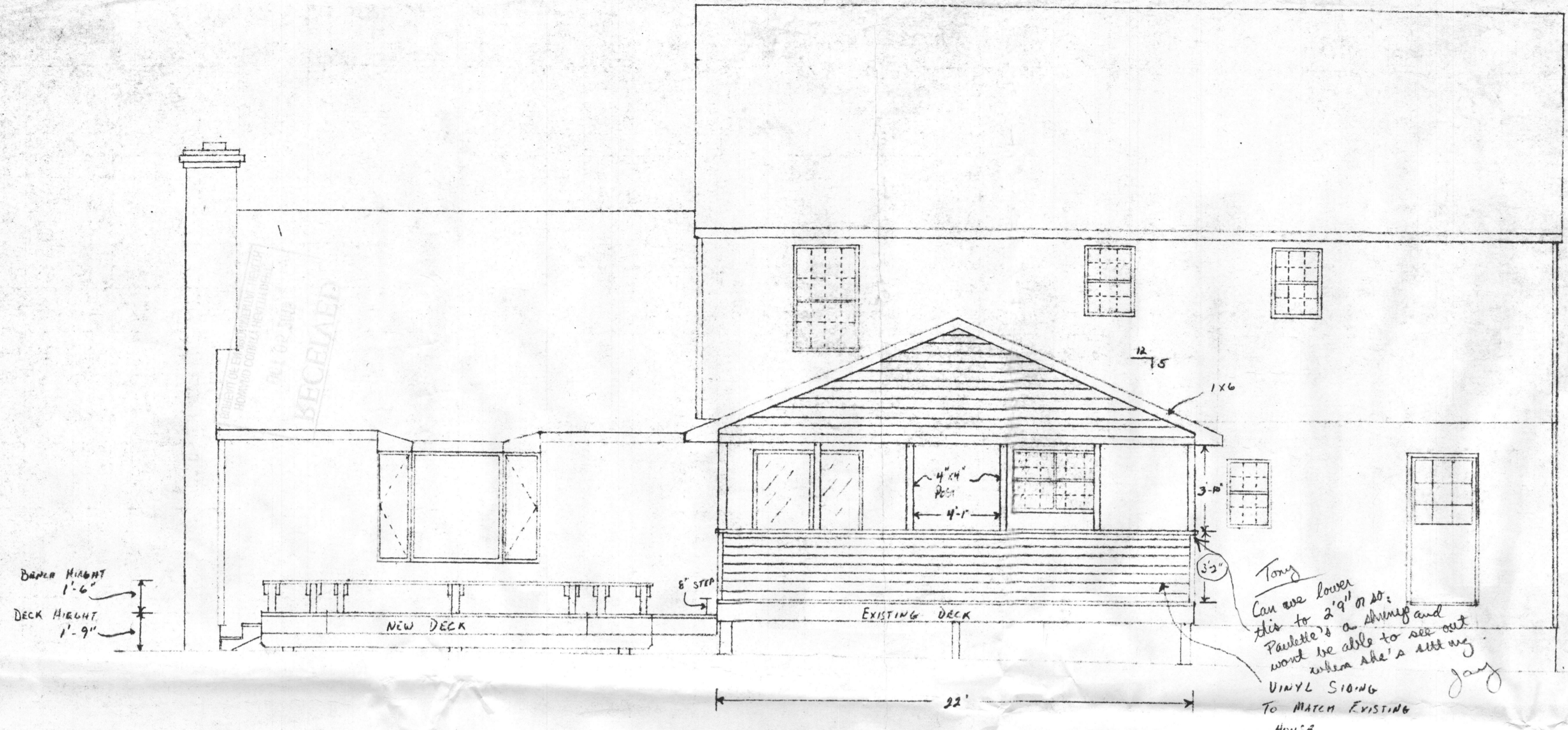


LEFT ELEVATION
SCALE: 1/4" = 1'-0"

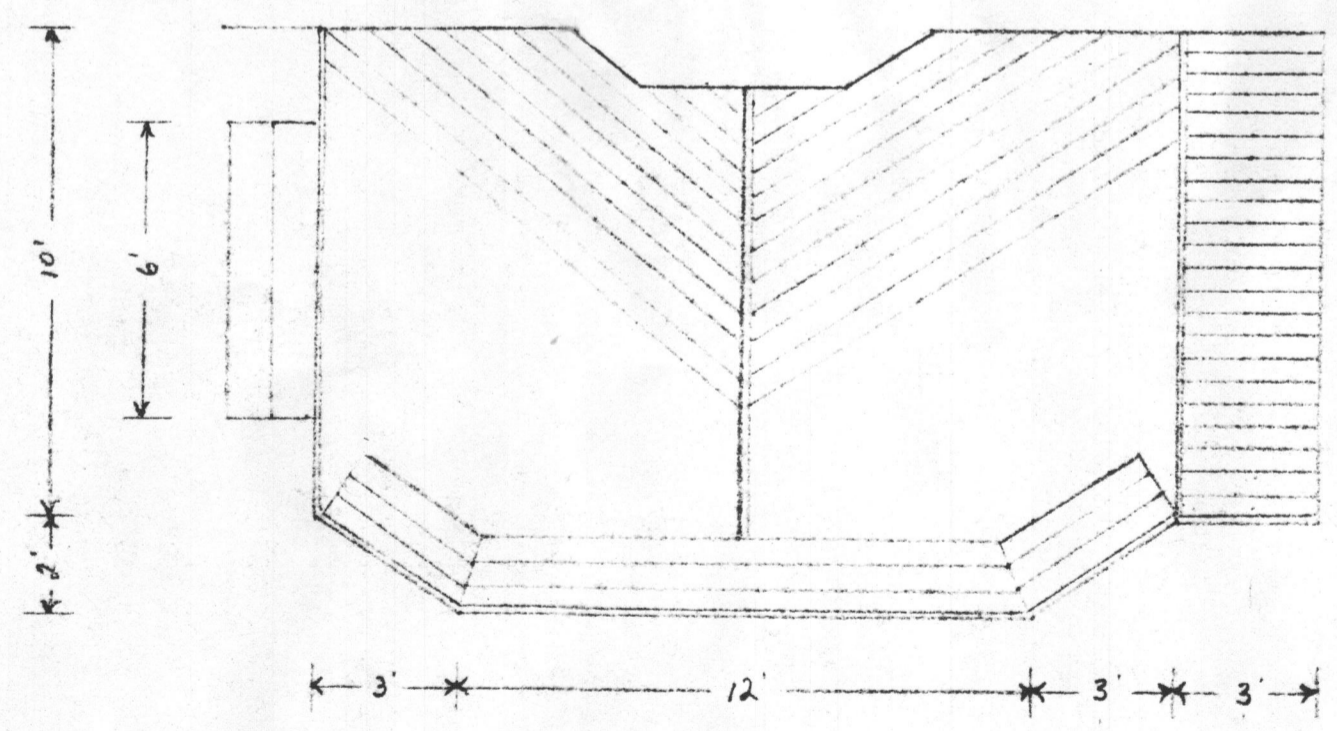


FRONT ELEVATION
SCALE: 1/4" = 1'-0"

SCALE 1/4" = 1'



Tony
 Can use lower
 this to 2'9" or so.
 Paulette's a shrimp and
 won't be able to see out
 when she's sitting
 VINYL SIDING
 TO MATCH EXISTING
 HOUSE.
 Jany

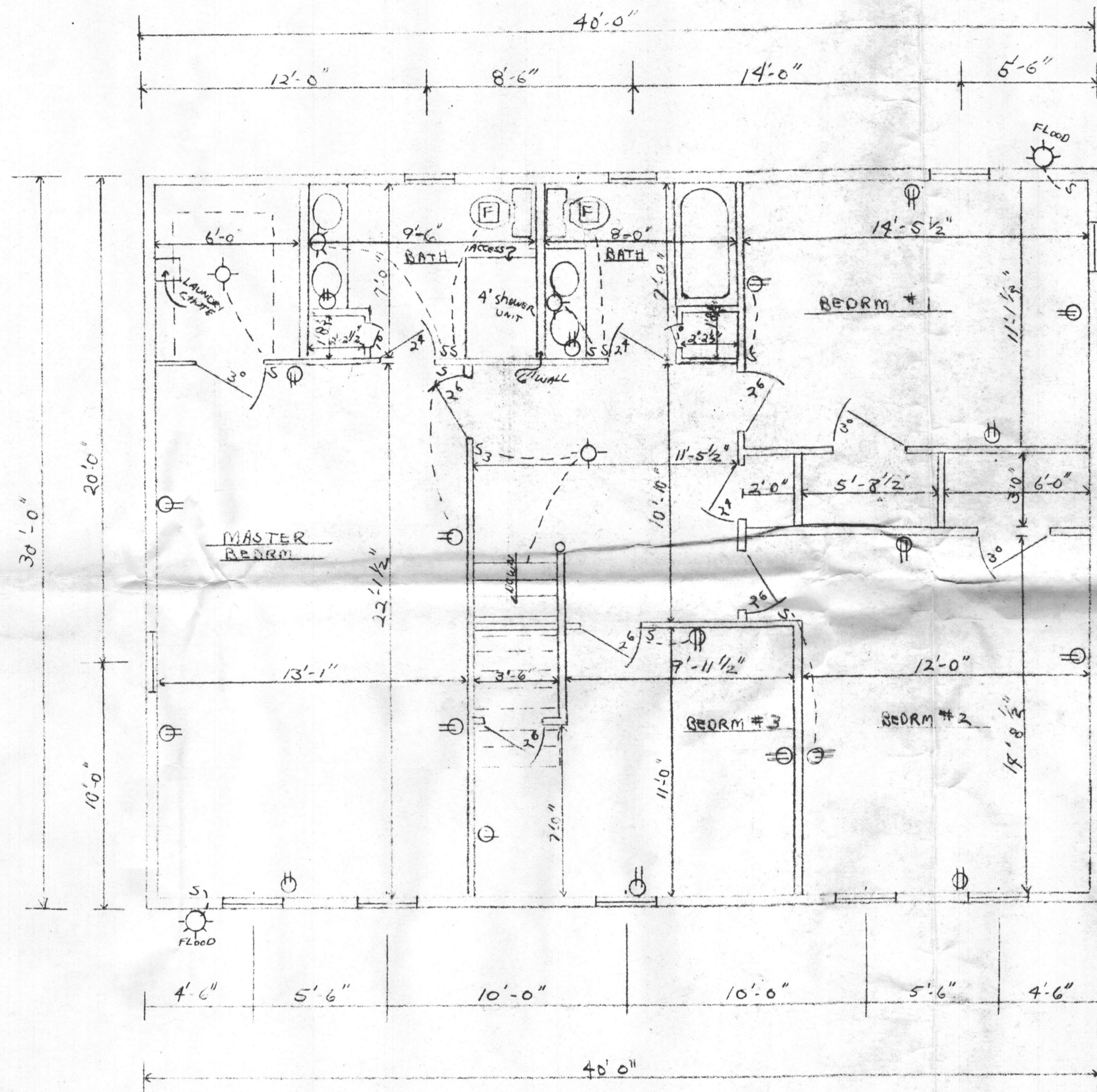


- 1) ALL DECKING MATERIAL TO BE PRESSURE TREATED
- 2) SUPPORT POST TO BE SET ON CONCRETE PISAS THAT ARE POURED DOWN BELOW FROST LINE
- 3) SIDING WILL BE DOUBLE 4" VINYL SIDING TO MATCH EXISTING SIDING
- 4) ROOF MATERIAL TO BE FIBERGLASS 15 yr SHINGLE TO MATCH EXISTING ROOF SHINGLES

Reviewed + approved per
 Glenside Manor Architectural
 Committee on May 18, 1991
 Mack L. Gashager

PREPARED FOR
 JAMES + PAULATTE TURKAL

JAMES
 TURKAL

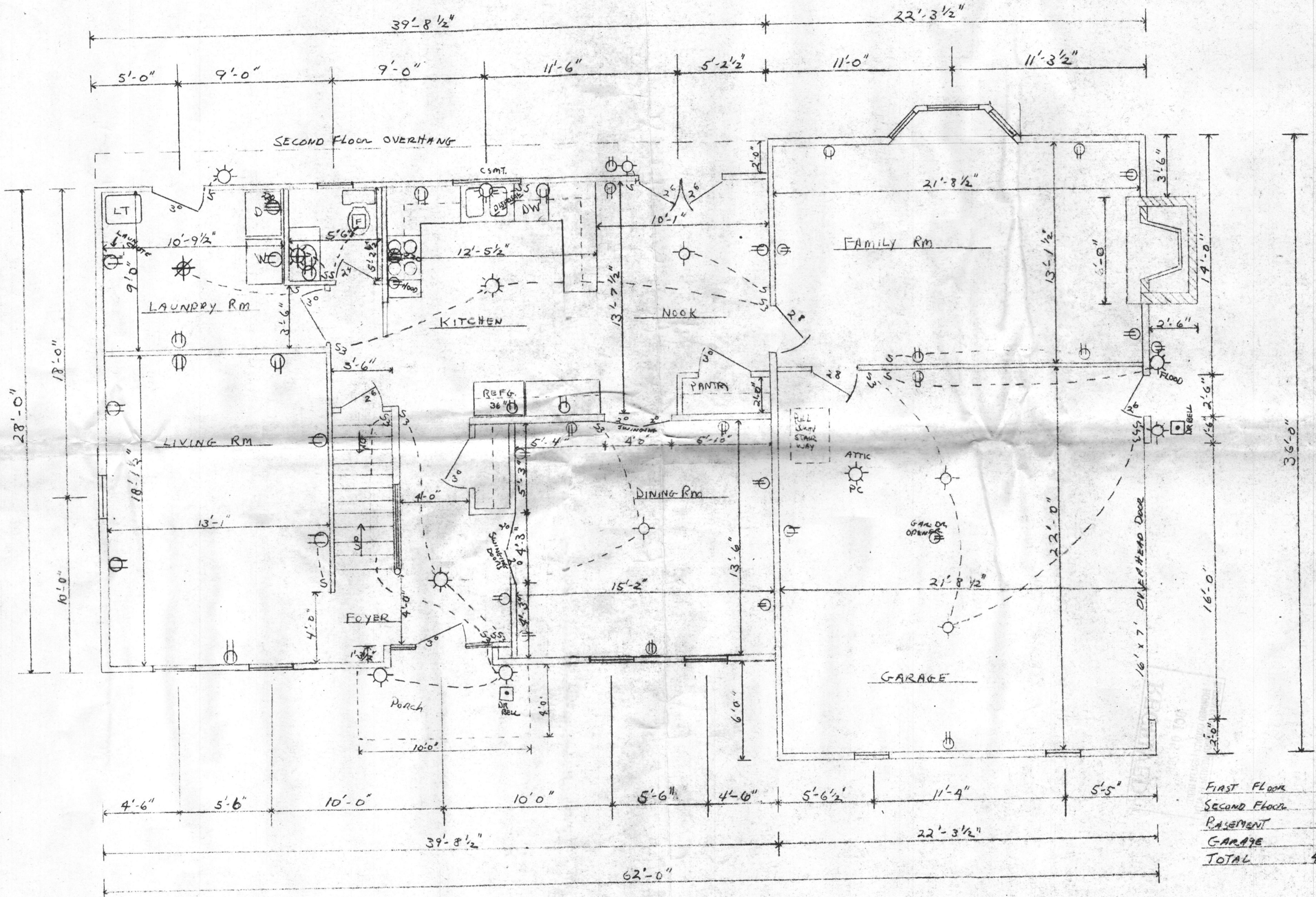


SECOND FLOOR PLAN

RECEIVED

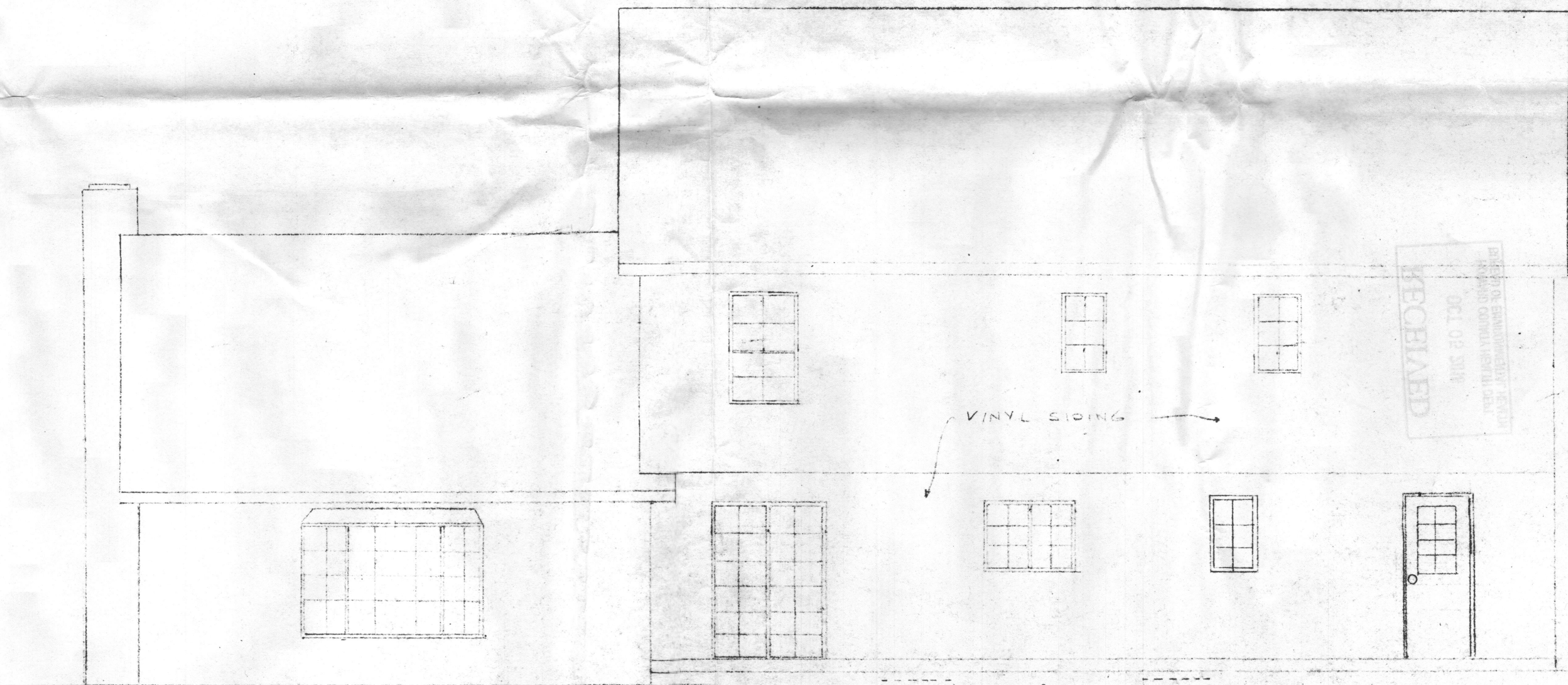
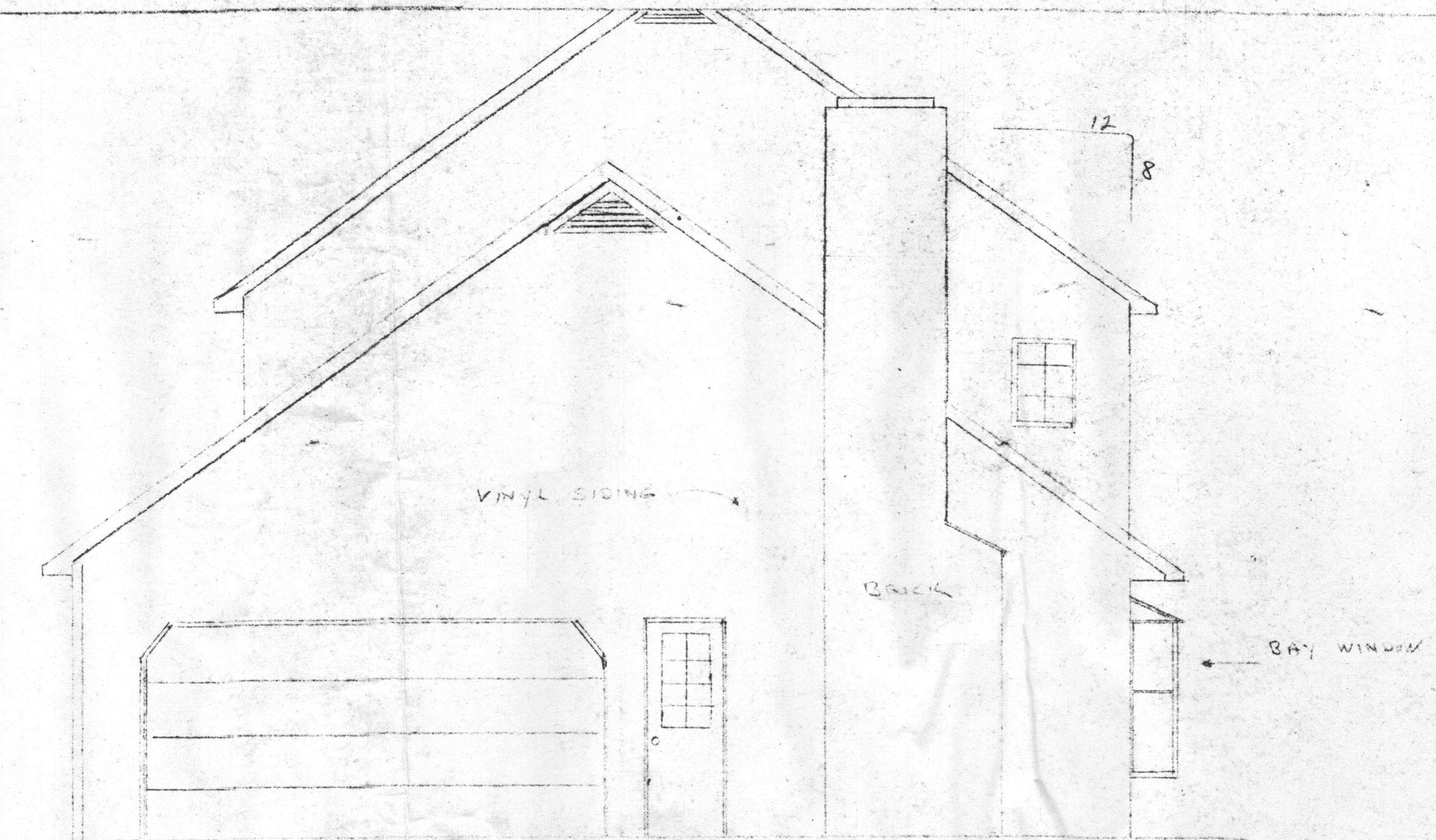
SECOND FLOOR 1200 Sq FT

SCALE 1/4" = 1'-0"	
TURKEL RESIDENCE	PAGE 4
C&S HOMES INC	OF 5
ELLIOTT CITY MD	



FIRST FLOOR	140 SQ. FT.
SECOND FLOOR	1200 SQ. FT.
BASEMENT	1120 SQ. FT.
GARAGE	484 SQ. FT.
TOTAL	4214 SQ. FT.

RIGHT ELEVATION
SCALE: 1/4" = 1'-0"



REAR ELEVATION
SCALE: 1/4" = 1'-0"

RECEIVED
OCT 02 2010
DEPT. OF ENVIRONMENTAL HEALTH
PLANNING AND CONSTRUCTION
1000 CENTRAL AVENUE, SUITE 100
ELICOTT CITY, MD 21043