



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: 12149 Haywood Farmway
 City: Ellicott City State: MD Zip Code: _____
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: _____
 Section: _____ Area: _____ Lot: _____
 Tax Map: _____ Parcel: _____ Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: SFD
 Proposed Use: 12x24 Deck
 Estimated Construction Cost: \$ 12,000.00
 Description of Work: CONSTRUCT APPROX 12' X 21' COMPOSITE W. TH APPROX 10 STEPS TO GRASS

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

Property Owner's Name: MANU KUPPALLI
 Address: 12149 Haywood Farmway
 City: Ellicott City State: MD Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Applicant's Name & Mailing Address, (if other than stated herein)
 Applicant's Name: ANTHONY HESSLER
 Address: 9501 Robin Meadow Ct
 City: Perry Hall State: MD Zip Code: 21128
 Phone: 410-718-0388 Fax: _____
 Email: _____

Contractor Company: ARH Decks
 Contact Person: ANTHONY
 Address: 9501 ROBIN MEADOW CT
 City: Perry Hall State: MD Zip Code: 21128
 License No.: 944412
 Phone: 410-718-0388 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 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:
➤ 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	
Electric:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Gas:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Water Supply	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Sewage Disposal	
<input checked="" type="checkbox"/> Public	
<input type="checkbox"/> Private	
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.

Anthony Hessler
 Applicant's Signature

 Email Address _____
 Title/Company _____

ANTHONY HESSLER
 Print Name
6-1-17
 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>6/1/17</u>	<u>H. Oswald</u>

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	#

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

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

GENERAL NOTES:

- 1) THIS LOCATION DRAWING IS PREPARED FOR THE BENEFIT OF THE CLIENT SIGNING THE HOUSE LOCATION SURVEY APPROVAL FORM INsofar AS IT IS REQUIRED BY A LENDER OR TITLE INSURANCE COMPANY OR ITS AGENTS IN CONNECTION WITH THE CONTEMPLATED TRANSFER, FINANCING OR REFINANCING OF THE PROPERTY SHOWN HEREON. UNLESS INDICATED AS BEING A BOUNDARY SURVEY, THIS LOCATION DRAWING IS NOT INTENDED FOR USE IN THE ESTABLISHMENT OF PROPERTY LINES AND IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATIONS OF FENCES, GARAGES, BUILDINGS OR OTHER EXISTING OR FUTURE IMPROVEMENTS. AS A RESULT, THIS LOCATION DRAWING DOES NOT PROVIDE FOR ACCURATE IDENTIFICATION OF PROPERTY LINES, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING FOR RE-FINANCING.
- 2) SUBJECT PROPERTY IS SHOWN IN ZONE X ON THE NATIONAL FLOOD INSURANCE PROGRAM FLOOD INSURANCE RATE MAP OF HOWARD COUNTY, MARYLAND, COMMUNITY PANEL No. 24027C01300 EFFECTIVE NOV. 6, 2013.
- 3) THE OFFSETS FROM BUILDING LINE TO PROPERTY LINE AS SHOWN ON THE PLAT HEREON ARE TO AN ACCURACY OF PLUS OR MINUS 1'.
- 4) NO TITLE REPORT FURNISHED. SUBJECT TO ALL EASEMENTS, RIGHTS OF WAY AND CONDITIONS OF RECORD.
- 5) THE EXISTING WELL(S) SHOWN ON THIS PLAN (IDENTIFIED WITH THE ATTACHED WELL TAG NUMBER HO-95-2372 HAS BEEN FIELD LOCATED BY FISHER, COLLINS AND CARTER, INC. PROFESSIONAL LAND SURVEYORS AND IS ACCURATELY SHOWN.
- 6) PROFESSIONAL CERTIFICATION: I HEREBY CERTIFY THAT THESE DOCUMENTS WERE PREPARED BY ME OR UNDER MY RESPONSIBLE CHARGE, AND THAT I AM A DULY LICENSED PROPERTY LINE SURVEYOR UNDER THE LAWS OF THE STATE OF MARYLAND, LICENSE NO. 339, EXPIRATION DATE 10/04/2016.
- 7) BUILDING PERMIT #B-15002504
- 8) LOTS 23 THRU 68 WILL BE SERVED BY LOW PRESSURE FLOW SYSTEM WITH A LIMIT OF (5) FIVE BEDROOMS AT 150 GALLONS PER BEDROOM FOR A TOTAL DESIGN FLOW OF 34,500 GALLONS PER DAY.
- 9) LOTS 23 THRU 68 OF THIS SUBDIVISION ARE CONNECTED TO THE SHARED SEWAGE DISPOSAL FACILITY GOVERNED BY SECTIONS 18.1200 ET SEQ. OF THE HOWARD COUNTY CODE. THE DEVELOPER IS OBLIGATED TO CONSTRUCT THE FACILITY UNDER THE PROVISION OF THE DEVELOPER AGREEMENT NUMBER 50-4441-D DATED APRIL 8, 2009. A BUILDING PERMIT FOR LOTS 23 THRU 68 MAY NOT BE ISSUED UNTIL THE CONSTRUCTION OF THE FACILITY IS COMPLETED. ACTIVITY ON THESE LOTS IS RESTRICTED AND IS SUBJECT TO THE DECLARATION OF COVENANTS, CONDITIONS, RIGHT-OF-ENTRY, AND RESTRICTION FOR SHARED SEWAGE DISPOSAL FACILITY INTENDED TO BE RECORDED AMONG THE LAND RECORDS OF HOWARD COUNTY, MARYLAND. LOTS 23 THRU 68 SHALL BE ASSESSED SHARED SEWAGE DISPOSAL FACILITY CHARGES AND ASSESSMENTS PURSUANT TO SECTIONS 20.800 ET SEQ. OF THE HOWARD COUNTY CODE

APPROVED

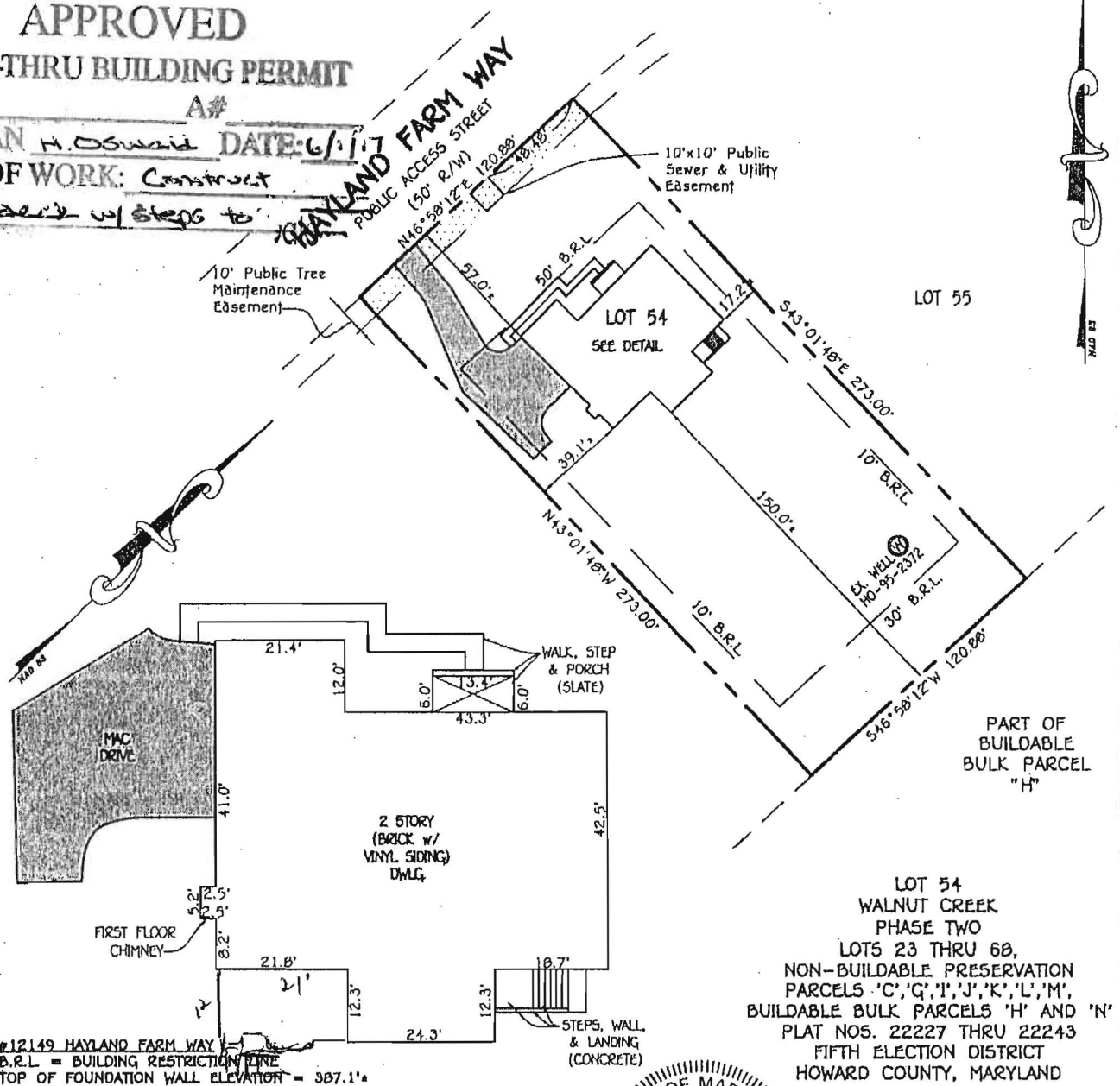
WALK-THRU BUILDING PERMIT

BP# _____ A# _____

APP. SAN H. Oswald DATE: 6/17/15

DESC. OF WORK: Construct

12' x 21' deck w/ steps to
grade.



#12149 HAYLAND FARM WAY
B.R.L. = BUILDING RESTRICTION LINE
TOP OF FOUNDATION WALL ELEVATION = 387.1'

LOT 54
WALNUT CREEK
PHASE TWO
LOTS 23 THRU 68,
NON-BUILDABLE PRESERVATION
PARCELS 'C', 'G', 'I', 'J', 'K', 'L', 'M',
BUILDABLE BULK PARCELS 'H' AND 'N'
PLAT NOS. 22227 THRU 22243
FIFTH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND

FISHER, COLLINS & CARTER, INC.
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS
CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE
ELLCOTT CITY, MARYLAND 21042
(410) 461-2055

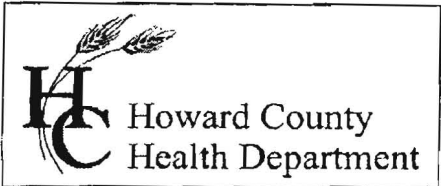


Mark Robel 12/17/15
PROPERTY LINE SURVEYOR DATE
REG. #339

HOUSE LOCATION DRAWING

FOUNDATION LOCATION: 9/21/15
FINAL LOCATION: 12/14/15
BOUNDARY SURVEY: _____

SCALE: 1"=30'
DATE: 12/17/15
DRAWN BY: GAD
CHECKED BY: MLR
PROJECT No.: 04001-3002



Bureau of Environmental Health
 8930 Stanford Boulevard, Columbia, MD 21045
 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

Maura J. Rossman, M.D., Health Officer

RECEIPT DATE: 10/15/15 **ONSITE SEWAGE DISPOSAL SYSTEM** P 557412
 INSTALLATION APPROVAL DATE: 12-9-15 **PERMIT** A _____
SEWER HOUSE CONNECTION

PROPERTY ADDRESS: 12149 Hayland Farm Way
 SUBDIVISION: Walnut Creek LOT: 54 TAX ID: 05-595195
 CONTRACTOR: Craftmark Homes Inc. EMAIL: jpavlik@craftmarkhomes.com
 CONTRACTOR ADDRESS: 1355 Beverly Road Suite 300, McClean VA, 22101 PHONE: _____
 PROPERTY OWNER: W Creek LC EMAIL: _____
 OWNER ADDRESS: 1355 Beverly Road, McClean VA, 22101 PHONE: _____

NUMBER OF BEDROOMS: 4 CONNECTED TO PUBLIC WATER: YES NO

LOCATION:	INSTALL 4" SEWER LINE PER APPROVED SITE PLAN.
NOTES:	Install cleanouts at bends in SHC and at connection of SHC to grinder pit. Install sleeve on SHC under driveway.

ISSUED BY: Hank Oswald ^{OK}  ISSUE DATE: 10/15/15 EXPIRATION DATE: 10/15/16

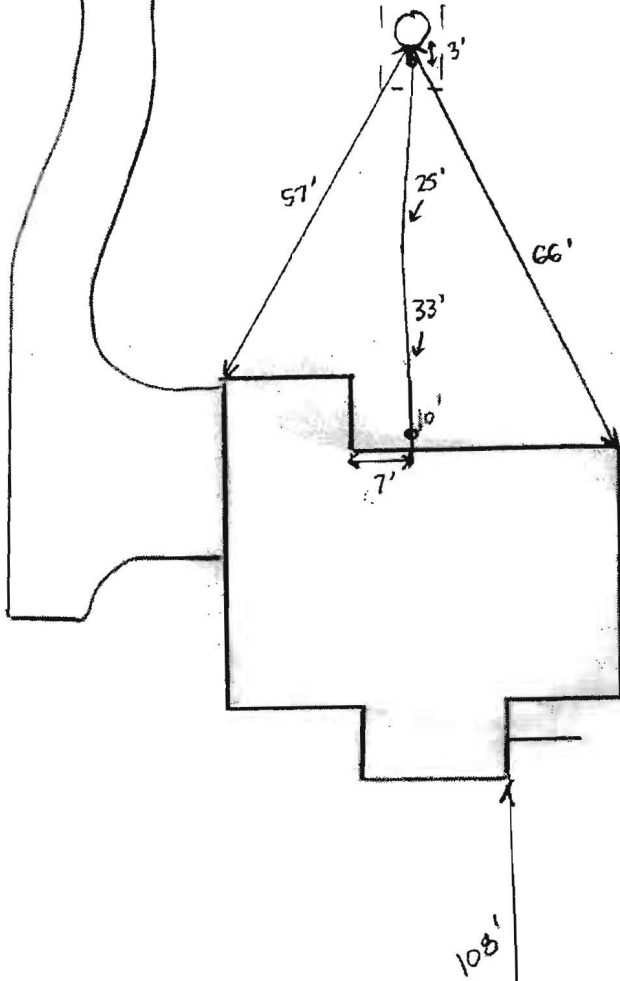
- NOTE: HOWARD COUNTY BUREAU OF UTILITIES APPROVAL OF GRINDER PUMP INSTALLATION IS REQUIRED PRIOR TO SEPTIC PERMIT APPROVAL
- NOTE: CONTRACTOR MUST SCHEDULE AN INSPECTION AND GAIN APPROVAL OF ALL COMPONENTS PRIOR TO COVERING
- NOTE: AN ELECTRICAL PERMIT IS REQUIRED FOR INSTALLATION OF ANY ELECTRICAL COMPONENTS OF THE SYSTEM

NEITHER THE HOWARD COUNTY COUNCIL NOR 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.

1" = 30'

NOT TO SCALE

Hayland Farm Way



TRENCH/DRAINFIELD DATA

WIDTH	INLET	BOTTOM
_____	_____	_____
NUMBER OF TRENCHES	_____	
TOTAL LENGTH	_____	
ABSORPTION AREA	_____	
DISTRIBUTION BOX LEVEL	_____	
DISTRIBUTION BOX BAFFLE	_____	
DISTRIBUTION BOX PORT	_____	

SEPTIC TANK DATA

SEPTIC TANK I LEVEL

MANUFACTURER _____

CAPACITY _____ GAL

SEAM LOC _____

TANK LID DEPTH _____

BAFFLES _____

BAFFLE FILTER _____

MANHOLE LOC _____

6" PORT LOC _____

WATERTIGHT TEST _____

SLOTTED _____

DATE ON LID _____

PUMP/SEPTIC TANK LEVEL

MANUFACTURER _____

CAPACITY _____ GAL

SEAM LOC _____

TANK LID DEPTH _____

BAFFLES _____

BAFFLE FILTER _____

MANHOLE LOC _____

6" PORT LOC _____

WATERTIGHT TEST _____

SLOTTED _____

DATE ON LID _____

ROAD NAME

PRE-CONSTRUCTION:

INSTALLATION:

HO-95-2372

10/16/15 Not quite underway. Only 10' of sch 40 installed. Told contractor to verify inverts to make good. Very close. (Kaw)

10/21/15 Sewer house connection complete. Line bedded with #57 stone. Contractor verified 1 1/2 fall of line. Need approval from Bureau of Utilities for grinder pump startup. (SC)

FINAL INSPECTOR _____, DATE OF APPROVAL 12-9-15