



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: 1402 Morgan Station Rd
 City: Woodbine State: MD Zip Code: _____
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: _____
 Section: _____ Area: _____ Lot: 2
 Tax Map: _____ Parcel: _____ Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: NO Deck + Porch
 Proposed Use: To have deck + porch
 Estimated Construction Cost: \$ 60,000
 Description of Work: Construct a 12x20 screened porch and a 16x40 deck w/ steps

Occupant/Tenant Name: _____
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 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: _____
Area of construction (sq. ft.): _____	2 nd floor: _____
Use group: _____	Basement: _____
<u>Construction type:</u>	<input type="checkbox"/> Finished Basement
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Unfinished Basement
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Crawl Space
<input type="checkbox"/> Masonry	<input type="checkbox"/> Slab on Grade
<input type="checkbox"/> Wood Frame	No. of Bedrooms: _____
<input type="checkbox"/> State Certified Modular	<u>Multi-family Dwelling</u>
<input checked="" 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

Property Owner's Name: Raymond Everett
 Address: 1402 Morgan Station Rd
 City: Woodbine State: MD Zip Code: _____
 Phone: 410-489-7597 Fax: _____
 Email: _____

Applicant's Name & Mailing Address, (if other than stated herein)
 Applicant's Name: William Shaffer
 Address: 4900 Marabrooke Drive
 City: Eldersburg State: MD Zip Code: 21754
 Phone: 410-206-8695 Fax: _____
 Email: bfs227@yahoo.com

Contractor Company: Decks Unlimited, LLC
 Contact Person: Bill Shaffer
 Address: 4900 Marabrooke Drive
 City: Eldersburg State: MD Zip Code: 21754
 License No.: 94607
 Phone: 410-206-8695 Fax: _____
 Email: bfs227@yahoo.com

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

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 type="checkbox"/> Public	
<input checked="" 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.

William Shaffer
 Applicant's Signature
bfs227@yahoo.com
 Email Address
Owner / Decks Unlimited, LLC
 Title/Company

William Shaffer
 Print Name
11/28/17
 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>11-30-17</u>	<u>Bernard</u>

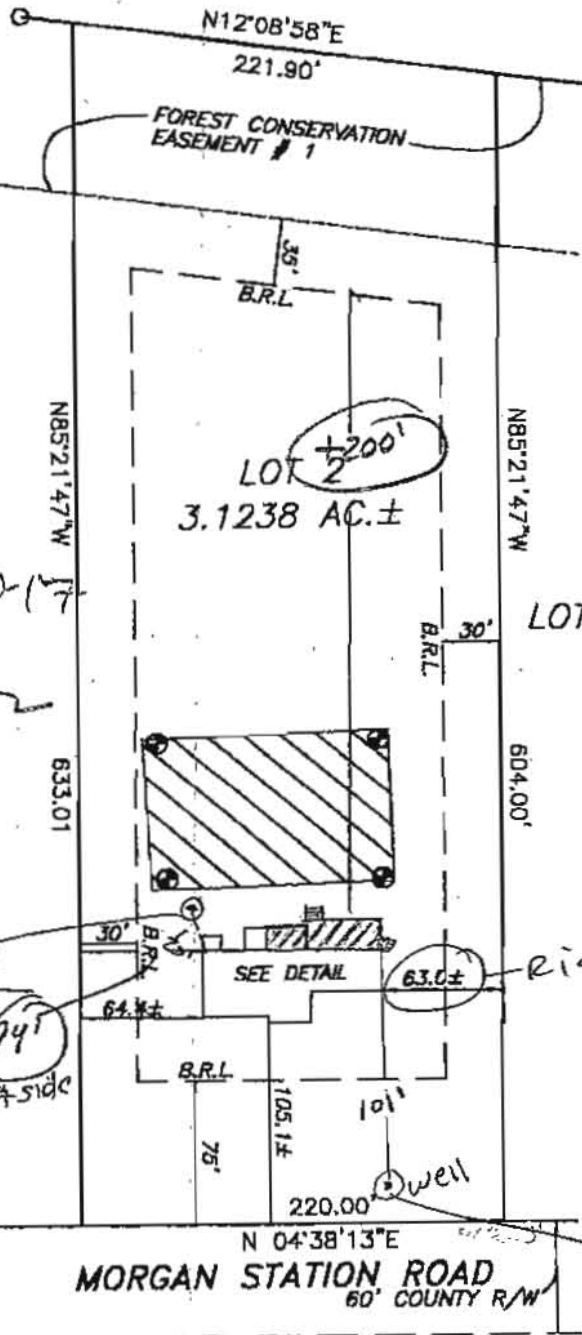
Is Sediment Control approval required for issuance? Yes No
 CONTINGENCY CONSTRUCTION START

DPZ SETBACK INFORMATION

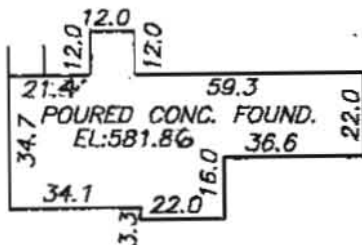
Front: _____
 Rear: _____
 Side: _____
 Side St.: _____
 All minimum setbacks met? Yes No
 Is Entrance Permit Required? Yes No
 Historic District? Yes No
 Lot Coverage for New Town Zone: _____
 SDP/Red-line approval date: _____

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



APPROVED
 WALK-THRU BUILDING PERMIT
 BP# _____ A# _____
 APP SAN Dana Branda 11030417
 DESC. OF WORK: 12x20 Deck
Approved as shown



DETAIL
 SCALE: 1"=50'



I HEREBY CERTIFY THAT I HAVE LOCATED THE IMPROVEMENTS AS SHOWN. THIS PLAT DOES NOT REPRESENT A BOUNDARY SURVEY AND CANNOT BE USED TO ESTABLISH PROPERTY LINES OR CORNERS.

Gregory Scott Shanaberger
SHANABERGER & LANE
 8726 TOWN AND COUNTRY BLVD.
 SUITE 201
 ELLICOTT CITY, MD. 21043
 (410)461-9563 FAX:461-9693

FOUNDATION LOCATION DRAWING
LOT 2
"FINE PROPERTY"
 LOTS 1-4
 PLAT #14027
 4TH ELECTION DISTRICT, HOWARD COUNTY, MD
 DEED REFERENCE:
 ZONED: RC-DEO
 SCALE: 1"=50'
 DATE: 5/25/01
 DATE OF LATEST FIELD WORK: 5/24/01

8/29/01
20:00
12:00

8/28/01
Sept. Co. ~~Following open~~
PH

01-27/01
K.D. ~~Plumbing~~
late p.m.

8/31/01
Septic Final + WPT
ASAP

ISSUE DATE: 8/27/2001

APPROVAL DATE: 8/30/01

PERMIT

INDEXED

P 516002

A 511091-B

ON-SITE SEWAGE DISPOSAL SYSTEM HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH

04-363213

WTC III Plumbing & Heating, Inc IS PERMITTED TO INSTALL ALTER

ADDRESS: 1820 Gillis Falls Road PHONE NUMBER: 410-489-4457

SUBDIVISION: Estate of Rhoda Fine LOT NUMBER: 2

ADDRESS: 1402 Morgan Station Road PROPERTY OWNER: Ray & Linda Everett

SEPTIC TANK CAPACITY (GALLONS): 1250

PUMP CHAMBER CAPACITY (GALLONS): N/A

NUMBER OF BEDROOMS: 4

SQUARE FEET PER BEDROOM: 180

LINEAR FEET OF TRENCH REQUIRED: 180

TRENCHES:	Trench to be 2.0 feet wide. Inlet 4.0 feet below original grade. Bottom maximum depth 8.0 feet below original grade. Effective area begins at 4.0 feet below original grade. 4.0 feet of stone below distribution pipe.
LOCATION:	Place the distribution box 180 feet down the right lot line and 120 feet off this same lot line. Run (3) 60-foot trenches on contour in either direction.
NOTES:	

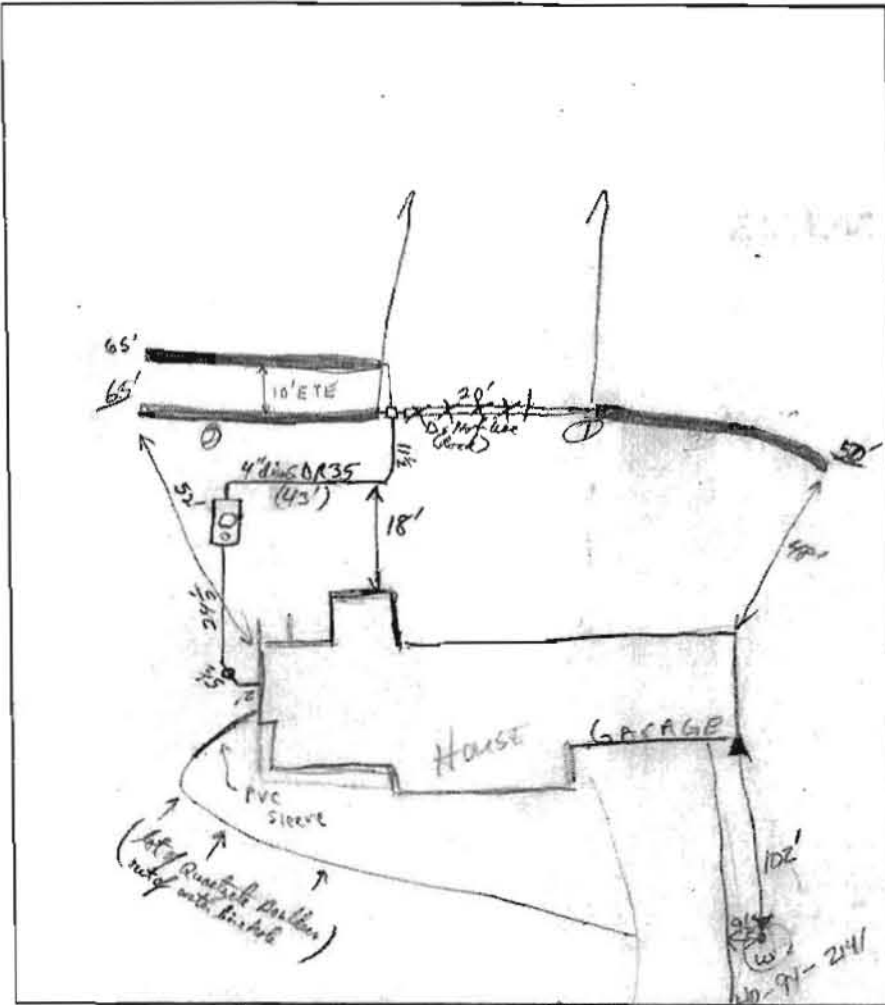
PLANS APPROVED: MER DATE: 4/20/01

- 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 NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

P516002

NOT TO SCALE



TRENCH DATA

TRENCH WIDTH 2'
 TRENCH INLET DEPTH 4'
 TRENCH BOTTOM DEPTH 8'
 DEPTH OF STONE 4'
 NUMBER OF TRENCHES 3
 ①-50' usable - (Foot 25' start at end) ②-65'
 TOTAL TRENCH LENGTH 180'
 ABSORBENT AREA 720ft²
 DISTRIBUTION BOX LEVEL
 BAFFLE IN DISTRIBUTION BOX

SEPTIC TANK DATA

SEPTIC TANK 1250TS GALLONS
 MANHOLE RISER on center
 6 INCH INSPECTION PORT on front

PUMP CHAMBER DATA

PUMP CHAMBER GALLONS NA
 MANHOLE RISER NA
 ALARM NA
 PUMP PERFORMANCE TEST NA

Moracum Station Road
 PRE-CONSTRUCTION INSPECTION: 8/27/01 Well needs to be 15' from driveway

Begin trench layout per plan Septic pipe begins under footing (KG/BB)

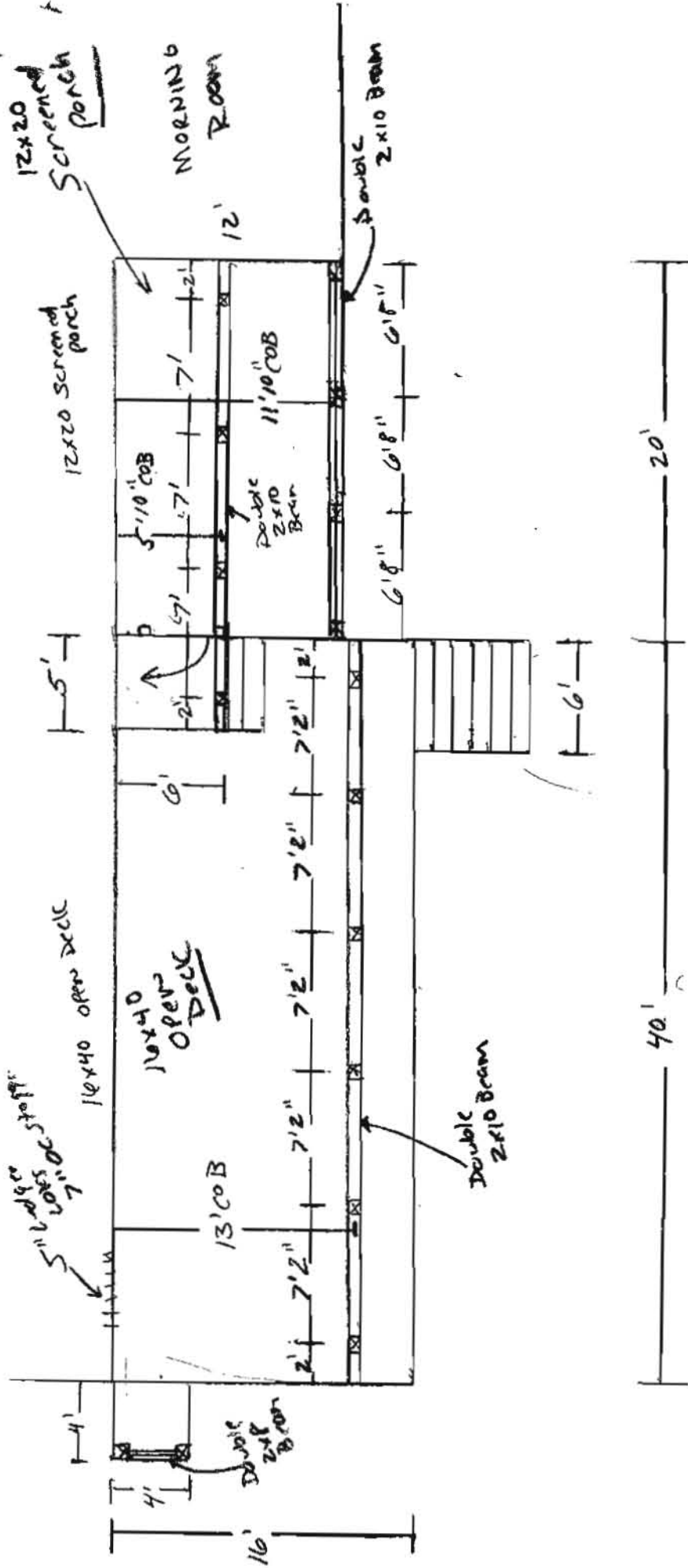
INSPECTION COMMENTS: Start, part of supply line in, Foot 25' has very bad bottom, do not use Foot 25' (backfill with sand & bridge solid pipe) OK to run rest two trenches in opposite direction. App 8/29/01

Trench #2 gravel filled & piped (except end which was open - OK - No rock in Trench), Trench #1 Foot 20' backfilled & piped & bridged 20' of solid pipe - then 50ft of usable trench OK. OK to cover both trenches when prepared.

House Connection OK. App 8/29/01 8/30/01-OK TO COVER ALL WORK - (SRK)

8/28/01
W/P, pitless adapter OK, vent pipe on lot pipe, grant ok, well line not connected to house yet App.

INSPECTOR Steven R. Kueg DATE SYSTEM APPROVED 8/30/01



Framing

- 2x10 Joists (12" OC)
- 2x10 Double Beams
- 4x4 supports
- 4x4 Rail Posts
- 2x12 stringers
- vinyl Railings
- 1/2" hex bolts for Beams/Rail Posts
- Aztec PVC Decking

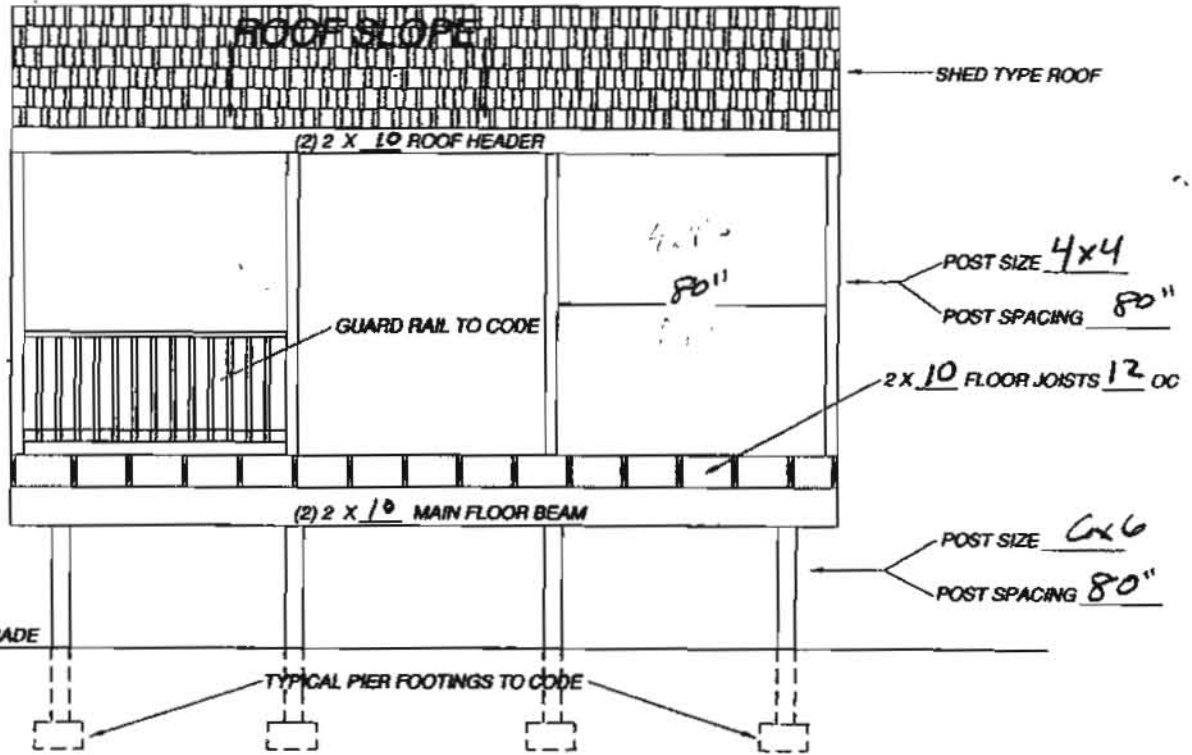
Footings

- 30" Deep
- 16" Diameter - for Deck
- 18" Diameter - for Porch
- 10" concrete

Standard form

EXISTING HOUSE

ROOF PITCH $\frac{4}{12}$ or $\frac{5}{12}$



DECK WITH SHED TYPE ROOF
FRONT VIEW

Standard forms

