



# 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: 13571 ARGO DRIVE  
 City: DAYTON State: MD Zip Code: 21036-1103  
 Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
 Census Tract: \_\_\_\_\_ Subdivision: \_\_\_\_\_  
 Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: 16  
 Tax Map: 0028 Parcel: 0289 Grid: \_\_\_\_\_  
 Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: 3,145ac

Existing Use: SFD  
 Proposed Use: SFD with New Kitchen and Full BATH  
 Estimated Construction Cost: \$ 150,000  
 Description of Work: Remove existing interior walls, expand kitchen into existing dining room, add full bath to first floor  
 Occupant/Tenant Name: \_\_\_\_\_  
 Was tenant space previously occupied?  Yes  No  
 Contact Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Property Owner's Name: Robert FRANCIS + MOIRA CHIACCIERINI  
 Address: Same as building address  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: BFRANCIS42@VERIZON.NET / mchiac@gmw.com

Applicant's Name & Mailing Address, (If other than stated herein)  
 Applicant's Name: DANA BORG  
 Address: 13964 TRIADELPHIA RD  
 City: GLENEG State: MD Zip Code: 21737  
 Phone: 410-984-2486 Fax: \_\_\_\_\_  
 Email: BGMBUILDERS INC @ AOL

Contractor Company: BGMBUILDERS INC  
 Contact Person: DANA BORG  
 Address: 13964 TRIADELPHIA RD  
 City: GLENEG State: MD Zip Code: 21737  
 License No.: 9608Y  
 Phone: 410-984-2486 Fax: \_\_\_\_\_  
 Email: BGMBUILDERS INC @ AOL

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 <sup>st</sup> floor: _____  |
| Area of construction (sq. ft.): _____                               | 2 <sup>nd</sup> floor: _____  |
| Use group: _____  | <input type="checkbox"/> Finished Basement  |
| Construction type: _____  | <input checked="" type="checkbox"/> Unfinished Basement                               |
| <input type="checkbox"/> Reinforced Concrete                        | <input type="checkbox"/> Crawl Space  |
| <input type="checkbox"/> Structural Steel                           | <input type="checkbox"/> Slab on Grade  |
| <input type="checkbox"/> Masonry                                    | No. of Bedrooms: _____  |
| <input type="checkbox"/> Wood Frame                                 | <b>Multi-family Dwelling</b>  |
| <input type="checkbox"/> State Certified Modular                    | No. of efficiency units: _____  |
|   | No. of 1 BR units: _____  |
|   | No. of 2 BR units: _____  |
|   | No. of 3 BR units: _____  |
|   | Other Structure: _____  |
|   | Dimensions: _____   |
| <input checked="" type="checkbox"/> Roadside Tree Project Permit    | Roof: _____   |
| <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <input type="checkbox"/> State Certified Modular                                      |
| Roadside Tree Project Permit # _____                                | <input type="checkbox"/> Manufactured Home  |

| Utilities   |  |
|---|--|
| Electric: <input checked="" 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 checked="" 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 checked="" 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.

DANA BORG  
 Applicant's Signature  
BGMBUILDERS INC @ AOL  
 Email Address  
OWNER  
 Title/Company

DANA BORG  
 Print Name  
 \_\_\_\_\_  
 Date

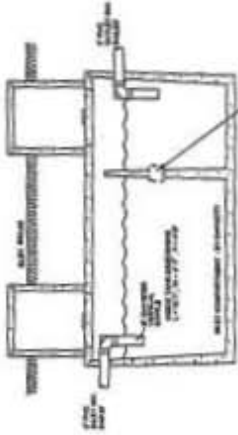
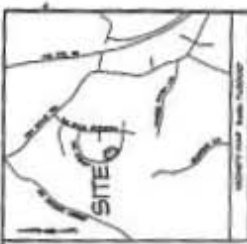
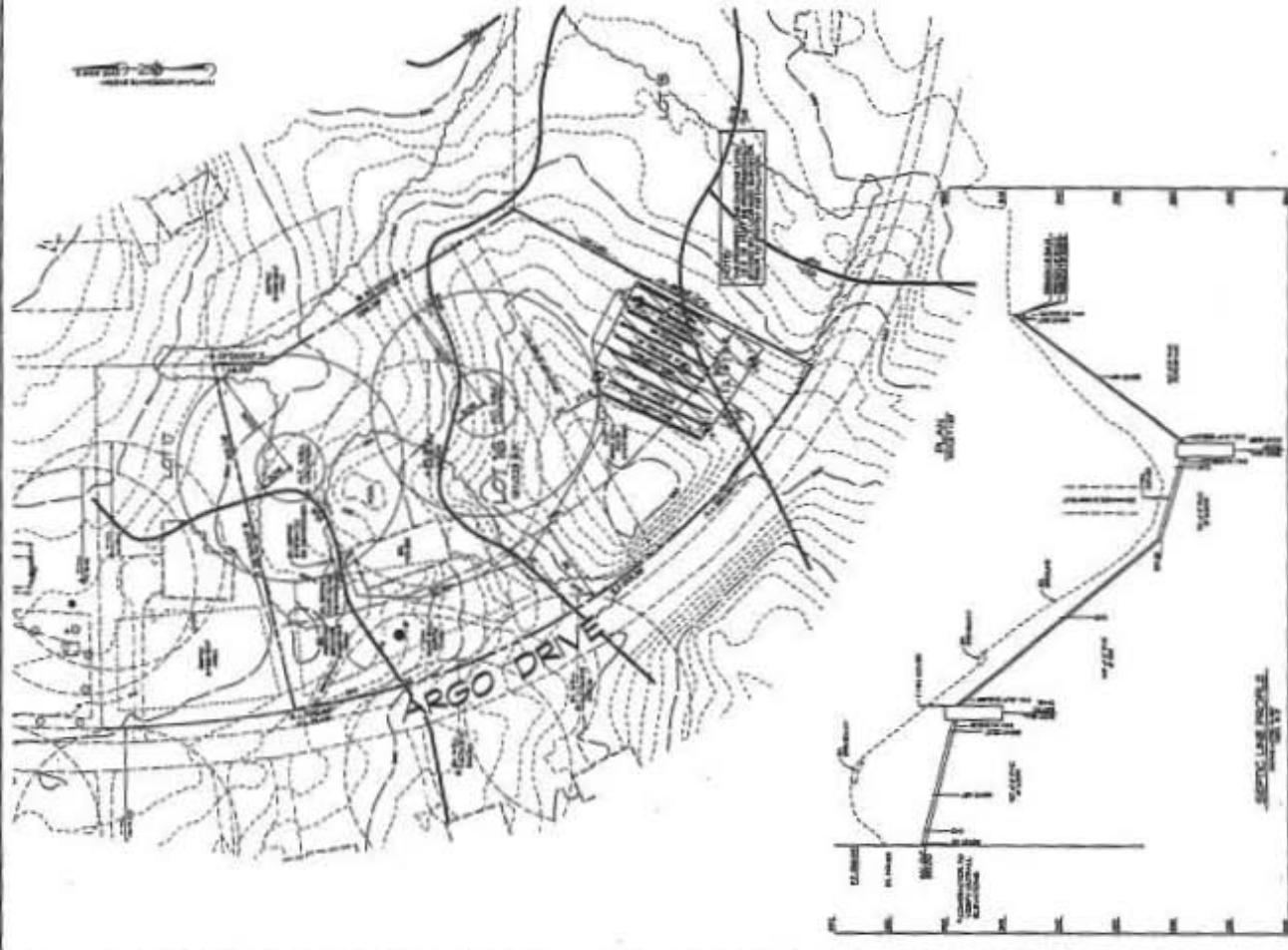
Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY  
 \*\*PLEASE WRITE NEATLY & LEGIBLY\*\*  
 -FOR OFFICE USE ONLY-

| AGENCY               | DATE           | SIGNATURE OF APPROVAL |
|----------------------|----------------|-----------------------|
| State Highways       |                |                       |
| Building Officials   |                |                       |
| PSZA ( Zoning )      |                |                       |
| PSZA ( Engineering ) |                |                       |
| Health               | <u>2/27/18</u> | <u>[Signature]</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          | #  |



NOTE: THE SEPTIC TANK NEEDS TO BE INSTALLED AT LEAST 4 FEET FROM ANY FOUNDATION.

NOTE: TOP SEAM 1500 GAL SEPTIC TANK PER PLAN.

NOTE: 4" DIA. MAIN SEWER LINE TO BE INSTALLED IN CENTER OF LINDEN DRIVE.

**SEPTIC SYSTEM TRENCH DESIGN**

- SEPTIC SYSTEM**
- 1. 1500 GAL. SEPTIC TANK
  - 2. 4" DIA. MAIN SEWER LINE
  - 3. 12" DIA. TRENCH
  - 4. 12" DIA. ABSORPTION PITS
- REPLACEMENT SYSTEMS**
- 1. 1500 GAL. SEPTIC TANK
  - 2. 4" DIA. MAIN SEWER LINE
  - 3. 12" DIA. TRENCH
  - 4. 12" DIA. ABSORPTION PITS

- REPLACEMENT SYSTEMS**
- 1. 1500 GAL. SEPTIC TANK
  - 2. 4" DIA. MAIN SEWER LINE
  - 3. 12" DIA. TRENCH
  - 4. 12" DIA. ABSORPTION PITS

**GENERAL NOTES**

1. SEE PLAN FOR TRENCH LOCATION.
2. SEE PLAN FOR TRENCH WIDTH.
3. SEE PLAN FOR TRENCH DEPTH.
4. SEE PLAN FOR TRENCH SLOPE.

**APPROVED**

**WALK-THRU BUILDING PERMIT**

BP# A#

APP. SAN Robert From DATE: 2/27/18

DESC. OF WORK: Expanding kitchen with Full Bath

**TRENCH CHART**

| TRENCH DEPTH (IN FEET) | TRENCH WIDTH (IN FEET) | TRENCH SLOPE | TRENCH SLOPE |
|------------------------|------------------------|--------------|--------------|
| 1                      | 12"                    | 1:1          | 1:1          |
| 2                      | 12"                    | 1:1          | 1:1          |
| 3                      | 12"                    | 1:1          | 1:1          |

**SEPTIC LINE PROFILE**

| STATION | ELEVATION | PIPE SIZE | PIPE SLOPE |
|---------|-----------|-----------|------------|
| 1       | 10.00     | 4"        | 0.00       |
| 2       | 10.00     | 4"        | 0.00       |
| 3       | 10.00     | 4"        | 0.00       |

REGULATION TEST RESULTS: AP - A800283

ON-SITE SEWAGE DISPOSAL SYSTEM DESIGN PLAN

LOT 16 LINDEN CHAPEL HILLS

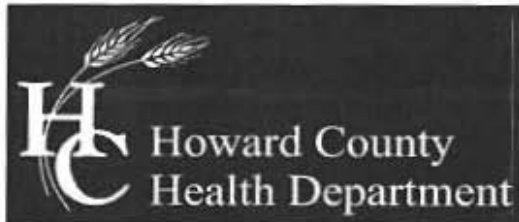
CLSI

400 Parkway Drive, Suite 100, Raleigh, NC 27604

APPROVED: [Signature]

| NO. | DATE    | DESCRIPTION       |
|-----|---------|-------------------|
| 1   | 2/27/18 | ISSUED FOR PERMIT |





## 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](http://www.hchealth.org)

Facebook: [www.facebook.com/hocohealth](https://www.facebook.com/hocohealth)

Twitter: [HowardCoHealthDep](https://twitter.com/HowardCoHealthDep)

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

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### MEMORANDUM

TO: Robert Francis  
13571 Argo Dr.  
Dayton, MD 21036

FROM: Robert Freemon *RF*  
Well & Septic Program

RE: 13571 Argo Dr.  
Dayton, MD 21036  
*"Future Building Permit"*

DATE: 2/24/2017

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Based on the information you sent me here is what the Health Dept. would require.

- We would first require percolation testing in order to designate an area for sewage disposal. Records indicate there is an existing sewage disposal area (SDA) that we can accept however it lacks sufficient test data needed to install a replacement system.
- As for your existing septic system it was designed to handle a 3 bedroom house. Since there are more than 3 bedrooms already existing in the house a septic system upgrade would be required. Additionally the bedroom increase (1<sup>st</sup> Floor Den) and living space increase from an unfinished to finished basement would also trigger the septic system upgrade. Since this upgrade would be replacing the existing septic system perc testing would be required.
- Based on the lots position and contour an upgrade would likely require a variance request from Maryland Department of the Environment (MDE) since a new septic system would likely be up gradient from neighboring wells. An SDA up gradient from a well requires a Best Available Technology (BAT) unit and MDE would most likely require a Low Pressure Dosing System (LPD). These systems are considered to be the best systems in residential wastewater treatment and are unfortunately expensive. To avoid having to install a BAT unit and LPD percolation testing could be done on the other side of the swale/drainage easement. The contour of the lot in this area would not be considered up gradient to neighboring wells however, this area has a higher risk of failing perc testing due to its proximity to the swale/drainage easement.
- This is a lot of information to understand over email so if you wish I would be happy to set up an appointment with you to discuss further in detail possible options.