



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: 819 Brookwood Farm Road
 City: Fulton State: MD Zip Code: 20759-9658
 Subdivision: _____
 Lot: 31.87A Tax Map: _____ Parcel: 05-419964

Property Owner's Name: Harold & Patricia Sandusky
 Address: 819 Brookwood Farm Road
 City: Fulton State: MD Zip Code: 20759
 Phone: 301-317-0798 Fax: _____
 Email: haroldsandusky@msn.com

Existing Use: Deck with pergola
 Proposed Use: Screened porch
 Estimated Construction Cost: \$20,000
 Description of Work: Remove existing pergola
 Lower raised section of deck to make it one level
 Replace kitchen/deck door within existing framing
 Replace one bedroom window with smaller one
 Add roof to deck and screening to walls
 Occupant/Tenant Name: Harold & Patricia Sandusky
 Was tenant space previously occupied? Yes No
 Contract Name: Harold & Patricia Sandusky
 Address: 819 Brookwood Farm Road
 City: Fulton State: MD Zip Code: 20759
 Phone: 301-317-0798 Fax: _____
 Email: haroldsandusky@msn.com

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

Contractor Company: None
 Contact Person: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 License No.: _____
 Phone: _____ Fax: _____
 Email: _____

Engineer/Architect Company: None
 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: 40	45
	2 nd floor: 30	45
Area of construction (sq. ft.):	Basement:	
Use group:	<input checked="" type="checkbox"/> Finished Basement	
	<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: 5	
<input type="checkbox"/> Structural Steel	Multi-family Dwelling	
<input type="checkbox"/> Masonry	No. of efficiency units:	
<input checked="" 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 type="checkbox"/> No	Roof:	
Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Utilities	
Electric:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Gas:	<input type="checkbox"/> Yes <input checked="" 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.
 Harold Sandusky

Applicant's Signature: *Harold Sandusky* Print Name: Harold Sandusky
 Email Address: haroldsandusky@msn.com Date: 3/28/19
 Title/Company: Owner

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	3/28/19	H. Oswald

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

DZP 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/Real-time 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	#

LH02-67-1 8119 BROOKWOOD FARM RD FULTON HOW 1/15/02 G00Z Case#2002001

Fema Panel: 240044 0037B

Flood Zone: C

LOT 3

SHEET 3 OF 4

BROOKWOOD FARMS

Book: 11847

Folio:

Dist: 5

Co: HOWARD

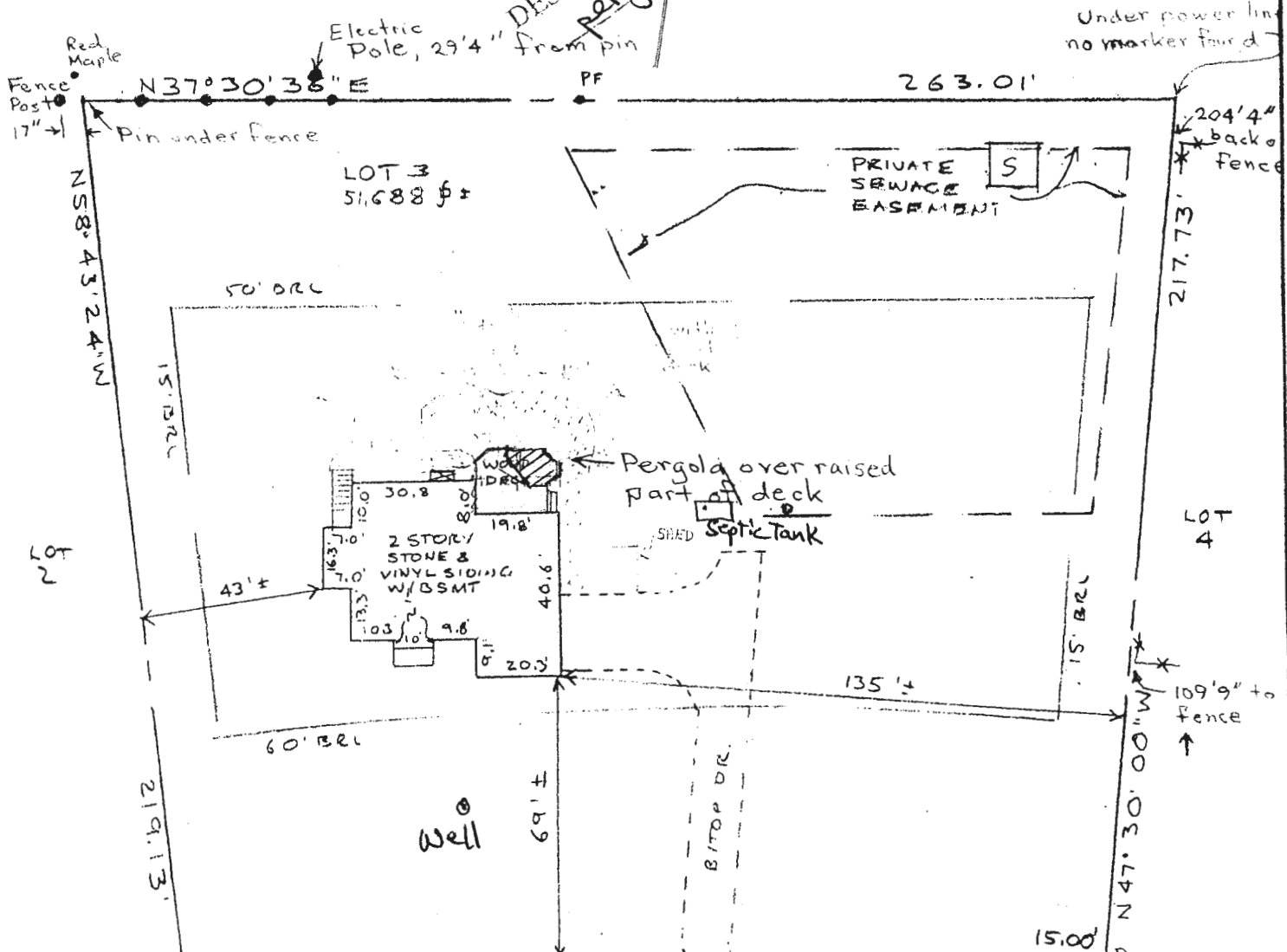
MD

Scale 1" = 40'

1/4" = 10'
1/40" = 1'

~~APPROVED~~
~~WALK-THRU BUILDING PERMIT~~

BP# RB A# 71608 DATE: 7/16/08
APP. SAN H. Oswald
DESC. OF WORK: 18 x 8 Pergola over ex. raised portion of deck



~~APPROVED~~

WALK-THRU BUILDING PERMIT

BP# RB A# 71608 BROOKWOOD FARM RD

APP. SAN H. Oswald DATE: 3/28/19 50' R/W

DESC. OF WORK: Remove pergola
Construct screened in deck
using existing deck

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

INDEXED

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH
313-2640

P 56956A

A 49952E

DISTRICT 5th

DATE 5-30-96

DATE SYSTEM APPROVED 8-23-96

INSPECTOR DKS (verified)
by phone w/ Tom Williamsburg

05-419969

Jack Fyock Septic Service

IS PERMITTED TO INSTALL ALTER

ADDRESS 13775 Triadelphia Road, Glenelg, Maryland 21737 PHONE 988-9270

SUBDIVISION Brookwood Farms LOT 3 ROAD 8119 Brookwood Farm Road

PROPERTY OWNER Williamsburg Group L.L.C. / JAMES HORN

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 210

TRENCHES - Trench to be 2 feet wide. Inlet 4 1/2 feet below original grade. Bottom maximum depth 8 1/2 feet below original grade. Effective area begins at 4 1/2 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Place the distribution box 130 feet from the left lot line and 55 feet off the rear lot line as seen when facing the lot from Brookwood Farm Road. Run trenches on contour toward the rear lot line.

NOTES - No trench to exceed 100 feet in length. Provide 6' - 8" diameter cleanout and cap to grade or above on septic tank. *5/17/96 OK AM*

PLANS APPROVED BY Glen Savage

DATE 04/02/96

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: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS, 90° ELBOWS NOT ACCEPTABLE.

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

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 35/40 PVC OR ABS

PERMIT VOID AFTER TWO 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 PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

HD-260(6-90)

***CALL 461-8833 FOR INSPECTION OF SEPTIC SYSTEM.**

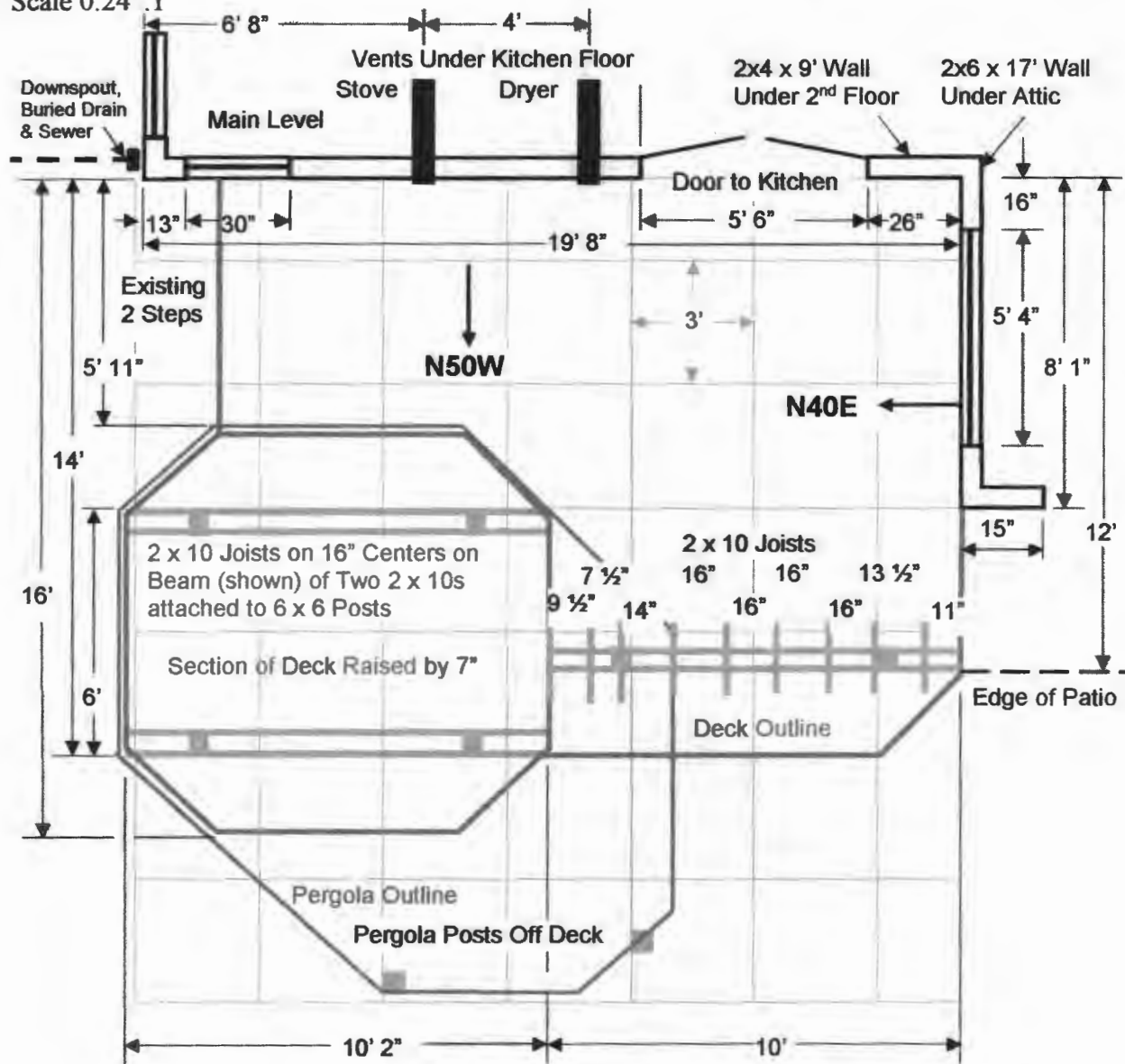
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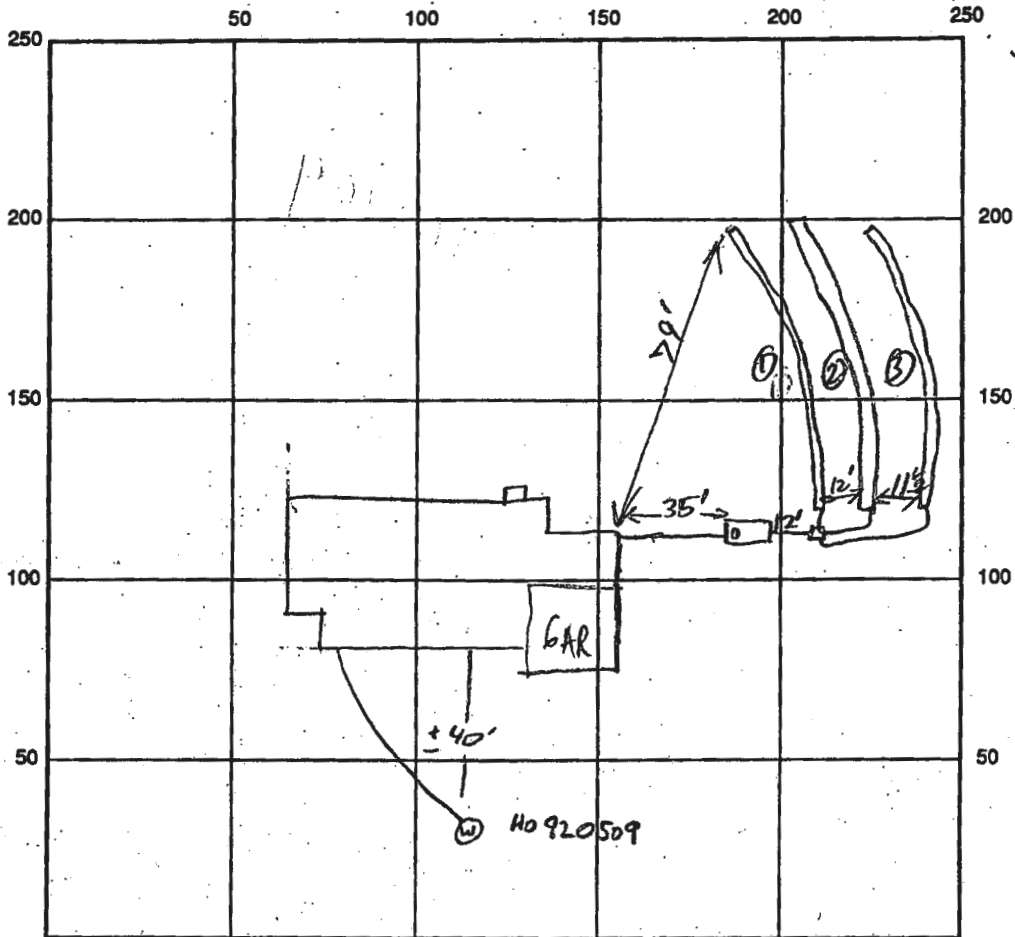
OLD PERMIT SIGNED AND RETURNED 10-1-97 Sewell # 2010 8770 deck

*6-7-96
CD, 1:20pm
CPT 7/8/96
OK*

Existing Deck & Pergola, Plan View

Scale 0.24":1'





INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

7/8/96
WPI ok

SEPTIC TANK LEVEL 1250 gal CLEANOUTS ST

DISTRIBUTION BOX LEVEL _____

DRAIN FIELD/TITLE DEPTH 8 1/2 - 9' FT. TRENCH WIDTH 2 FT. INLET DEPTH 4 1/2 FT.

EFFECTIVE GRAVEL DEPTH 4 FT. TOTAL LENGTH 70 / 70 / 75 FT. = 215

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 860 SQ. FT.

DRYWALL INSIDE DIAMETER _____ FT. EFFECTIVE DEPTH BELOW INLET _____ FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS: 1 trench + ST + supply line up to 15' from house ok to cover

No House Connection yet, HP 6/7/96

8/23/96 HOUSE CONN VERIFIED BY T/C w/BLDR. DKS

Need 2 pie well caps
well casing is just at or slightly below final grade - Needs an 18" extension 6/7/96

DATE SYSTEM APPROVED 8/23/96 INSPECTOR DKS