



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: 5942 Clifton Oaks Dr
 City: Clarksville State: MD Zip Code: 21029
 Suite/Apt. #: _____ SDP/WP/BA #: _____
 Subdivision: _____
 Lot: _____ Tax Map: _____ Parcel: _____

Existing Use: Back yard
 Proposed Use: Swimming pool
 Estimated Construction Cost: \$ 100,000.00
 Description of Work: Inground pool

Occupant/Tenant Name: Occupant
 Was tenant space previously occupied? Yes No
 Contact Name: Nicholas Colombal
 Address: 5942 Clifton Oaks Dr
 City: Clarksville State: MD Zip Code: 21029
 Phone: 443-710-3928 Fax: _____
 Email: n.colombal@gmail.com

Property Owner's Name: Nicholas Colombal
 Address: 5942 Clifton Oaks Dr
 City: Clarksville State: MD Zip Code: 21029
 Phone: 443-710-3928 Fax: _____
 Email: n.colombal@gmail.com

Applicant's Name & Mailing Address, (if other than stated herein)
 Applicant's Name: Cristobal Vera
 Address: 1859 August Ave
 City: Dundalk State: MD Zip Code: 21222
 Phone: 443-5296472
 Email: Cris.V.Cisneros@gmail.com

Contractor Company: _____
 Contact Person: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 License No.: _____
 Phone: _____ Fax: _____
 Email: _____

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 checked="" type="checkbox"/> Finished Basement
Use group:	<input type="checkbox"/> Unfinished Basement
	<input type="checkbox"/> Crawl Space
	<input type="checkbox"/> Slab on Grade
Construction type:	No. of Bedrooms:
<input type="checkbox"/> Reinforced Concrete	Multi-family Dwelling
<input type="checkbox"/> Structural Steel	No. of efficiency units:
<input type="checkbox"/> Masonry	No. of 1 BR units:
<input type="checkbox"/> Wood Frame	No. of 2 BR units:
<input type="checkbox"/> State Certified Modular	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:
<input type="checkbox"/> 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 type="checkbox"/> No	
Grading Permit Number:	
Building Shell Permit Number:	

THE UNDERSIGNED HEREBY CERTIFIES AND WARRANTS 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 HOWARD COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature: Cristobal Vera Print Name: Cristobal Vera
 Email Address: Cris.V.Cisneros@gmail.com Date: _____
 Title/Company: _____

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>[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	#

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

- TEST 1 3 MIN. @ 4'-0" > 2 MIN. @ 11'-0"
- TEST 2 6 MIN. @ 4'-6" > 2 MIN. @ 11'-0"
- TEST 3 HEAVY MOTTLES @ 9'-6"
- TEST 4 4 MIN. @ 6'-7" > 2 MIN. @ 11'-6"
- TEST 5 OK to 14'-0"
- TEST 6 OK to 11'-0"
- TEST 7 6 MIN. @ 6'-6" > 2 MIN. @ 11'-0"
- TEST 8 OK to 13'-9"
- TEST 9 ROCK at 7'-6"
- TEST 10 2 MIN. @ 3'-0" 5 MIN. @ 5'-0"
- TEST 10 7 MIN. @ 3'-6" > 2 MIN. @ 9'-0"

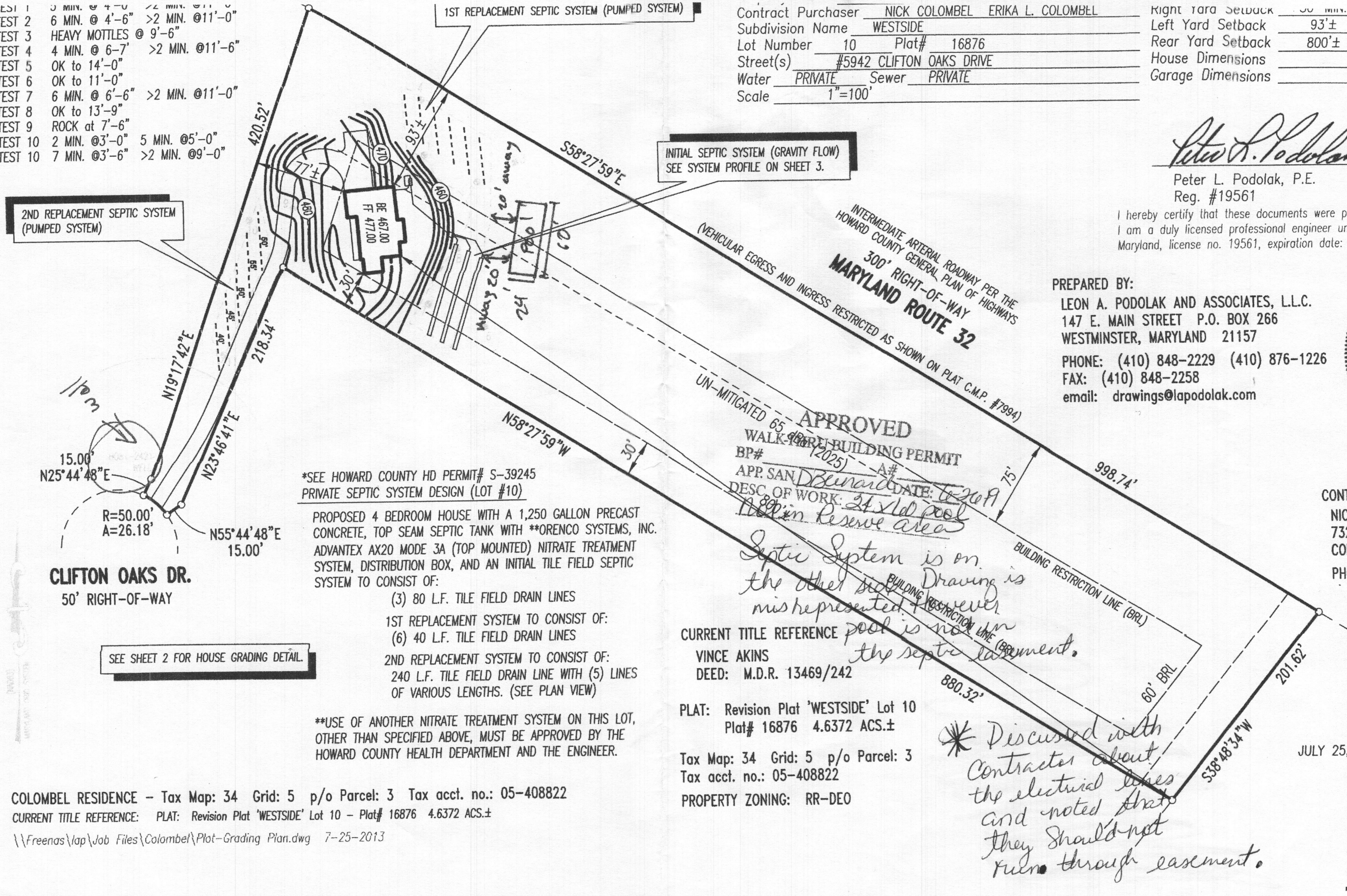
Contract Purchaser NICK COLOMBEL ERIKA L. COLOMBEL
 Subdivision Name WESTSIDE
 Lot Number 10 Plat# 16876
 Street(s) #5942 CLIFTON OAKS DRIVE
 Water PRIVATE Sewer PRIVATE
 Scale 1"=100'

Right Yard Setback 93'±
 Left Yard Setback 93'±
 Rear Yard Setback 800'±
 House Dimensions _____
 Garage Dimensions _____

Peter L. Podolak
 Peter L. Podolak, P.E.
 Reg. #19561

I hereby certify that these documents were prepared by me, I am a duly licensed professional engineer under the laws of Maryland, license no. 19561, expiration date: 3/31/2014

PREPARED BY:
 LEON A. PODOLAK AND ASSOCIATES, L.L.C.
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 WESTMINSTER, MARYLAND 21157
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 email: drawings@lapodolak.com



*SEE HOWARD COUNTY HD PERMIT# S-39245
 PRIVATE SEPTIC SYSTEM DESIGN (LOT #10)

PROPOSED 4 BEDROOM HOUSE WITH A 1,250 GALLON PRECAST CONCRETE, TOP SEAM SEPTIC TANK WITH **ORENCO SYSTEMS, INC. ADVANTEX AX20 MODE 3A (TOP MOUNTED) NITRATE TREATMENT SYSTEM, DISTRIBUTION BOX, AND AN INITIAL TILE FIELD SEPTIC SYSTEM TO CONSIST OF:

- (3) 80 L.F. TILE FIELD DRAIN LINES
- 1ST REPLACEMENT SYSTEM TO CONSIST OF:
- (6) 40 L.F. TILE FIELD DRAIN LINES
- 2ND REPLACEMENT SYSTEM TO CONSIST OF:
- 240 L.F. TILE FIELD DRAIN LINE WITH (5) LINES OF VARIOUS LENGTHS. (SEE PLAN VIEW)

**USE OF ANOTHER NITRATE TREATMENT SYSTEM ON THIS LOT, OTHER THAN SPECIFIED ABOVE, MUST BE APPROVED BY THE HOWARD COUNTY HEALTH DEPARTMENT AND THE ENGINEER.

CLIFTON OAKS DR.
 50' RIGHT-OF-WAY

SEE SHEET 2 FOR HOUSE GRADING DETAIL.

APPROVED
 WALK-OUT BUILDING PERMIT
 BP# 12025 - A#
 APP. SAND BERNARD DATE: 6-20-09
 DESC. OF WORK: 24' x 12' pool
 in Reserve area

Septic System is on the other side of the pool is not in the septic easement.
 Drawing is misrepresented. Building Restriction Line (BRL) is not shown.

CURRENT TITLE REFERENCE
 VINCE AKINS
 DEED: M.D.R. 13469/242

PLAT: Revision Plat 'WESTSIDE' Lot 10
 Plat# 16876 4.6372 ACS.±

Tax Map: 34 Grid: 5 p/o Parcel: 3
 Tax acct. no.: 05-408822

PROPERTY ZONING: RR-DEO

* Discussed with contractors about the electrical lines and noted that they should not run through easement.

CONTF
 NICK
 732:
 COLI
 PHO

JULY 25,

COLOMBEL RESIDENCE - Tax Map: 34 Grid: 5 p/o Parcel: 3 Tax acct. no.: 05-408822
 CURRENT TITLE REFERENCE: PLAT: Revision Plat 'WESTSIDE' Lot 10 - Plat# 16876 4.6372 ACS.±