

PERMIT NUMBER: B

DATE ACCEPTED:

B20002142

RESIDENTIAL BUILDING PERMIT APPLICATION

HOWARD COUNTY DEPARTMENT OF INSPECTIONS, LICENSES, AND PERMITS

3430 COURT HOUSE DRIVE, ELLICOTT CITY, MD 21043 - PHONE: (410) 313-2455 OPTION #4

www.howardcountymd.gov

BUILDING SITE ADDRESS REQUIRED

Street Address: 3720 PARK OVERLOOK CT
City: ELLICOTT CITY MD
State: MD
Zip Code: 21042
Subdivision/Village/Complex Name:
SDP/WP/BA #:
Lot:
Tax Map: 03-299902
Parcel:
Grading Permit #:

DESCRIPTION OF WORK REQUIRED

Existing Use:
Proposed Use: IN GROUND SWIMMING POOL
Estimated Cost: \$ 30,000
Trade Work to Be Completed (Separate Permits Required):
Mechanical (HVAC)
Electrical
Plumbing
None
Electrical work for in-ground swimming pool

PROPERTY OWNER INFORMATION REQUIRED

Owner(s) Name(s) (As it appears on tax records): DONALD PLUMHOFF
Primary Residence: Yes
Owner's Street Address: 3720 PARK OVERLOOK CT
City: ELLICOTT CITY
State: MD
Zip Code: 21042
Phone: 443-631-1966
Email: DON PLUMHOFF@YAHOO.COM

APPLICANT NAME REQUIRED - INDIVIDUAL WHO SIGNS THIS APPLICATION

Business Name: Allegro Pool Service
Contact Name: DAVID DELEAN
Street Address: 3204 GINGER BROAD CT
City: ELLICOTT CITY
State: MD
Zip Code: 21042
Phone: 240 676 0297
Email: DAVE@ALLEGROPOOLS.COM

CONTRACTOR INFORMATION REQUIRED

Business Name: Allegro Pool Service
Licensee's Name: Allegro Pool Service
License #: MHC 128347
Street Address: 3204 GINGER BROAD CT
City: ELLICOTT CITY
State: MD
Zip Code: 21042
Phone: 703 994 5572
Email: SWIM@ALLEGROPOOLS.COM

ARCHITECT/ENGINEER INFORMATION INDIVIDUAL WHO SIGNED PLANS, IF APPLICABLE

Business Name: N/A
Name:
Street Address:
City:
State:
Zip Code:
Phone:
Email:

BUILDING CHARACTERISTICS REQUIRED

Primary Structure: SF Dwelling
Condo: No
Utilities: Electric
Water Supply: Private (Well)
Sewage Disposal: Private (Septic)
Heating System: Electric
Roadside Tree Project: No
Sprinkler System: None
Fire Alarm System: No

ADDITIONAL RESIDENTIAL INFORMATION (PLEASE SELECT/COMPLETE ALL THAT APPLY)

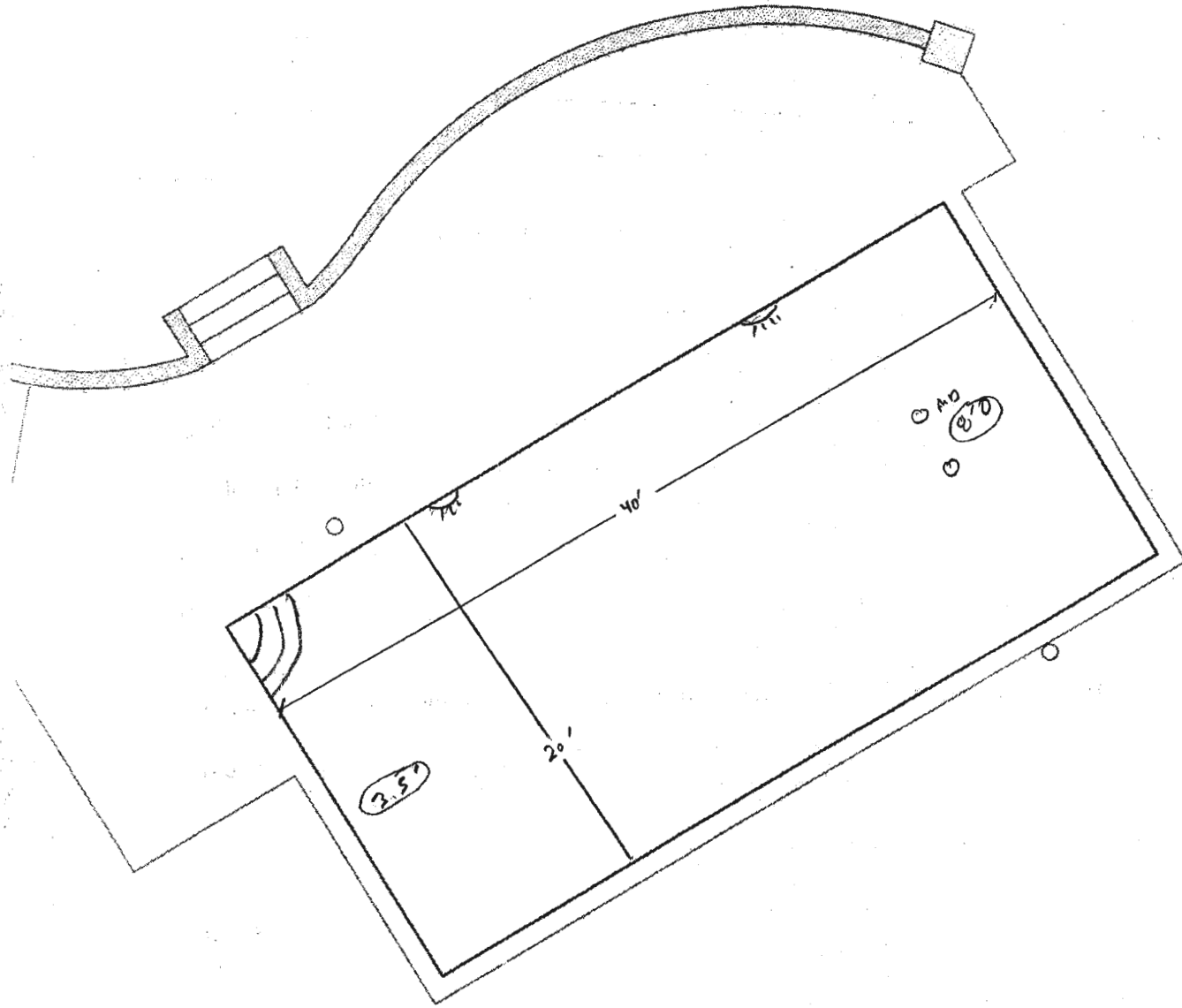
Model Name & Options:
# of Bedrooms (SF):
# of efficiency units (MF\*):
# of 1 BR (MF\*):
# of 2 BR (MF\*):
# of 3 BR (MF\*):
# Rooms:
# Full Baths:
# Half Baths:
# Fireplaces:
Garage/Carport Info:
Basement/Foundation Info:
1st Fl Width:
1st Fl Depth:
2nd Fl Width:
2nd Fl Depth:
Bsmt Width:
Bsmt Depth:

Handwritten signature

Plumbhoff  
INGROUND SWIMMING POOL 8200 L<sup>3</sup>  
3720 PARK OVERLOOK COURT, ELLICOTT CITY MD 21042

House

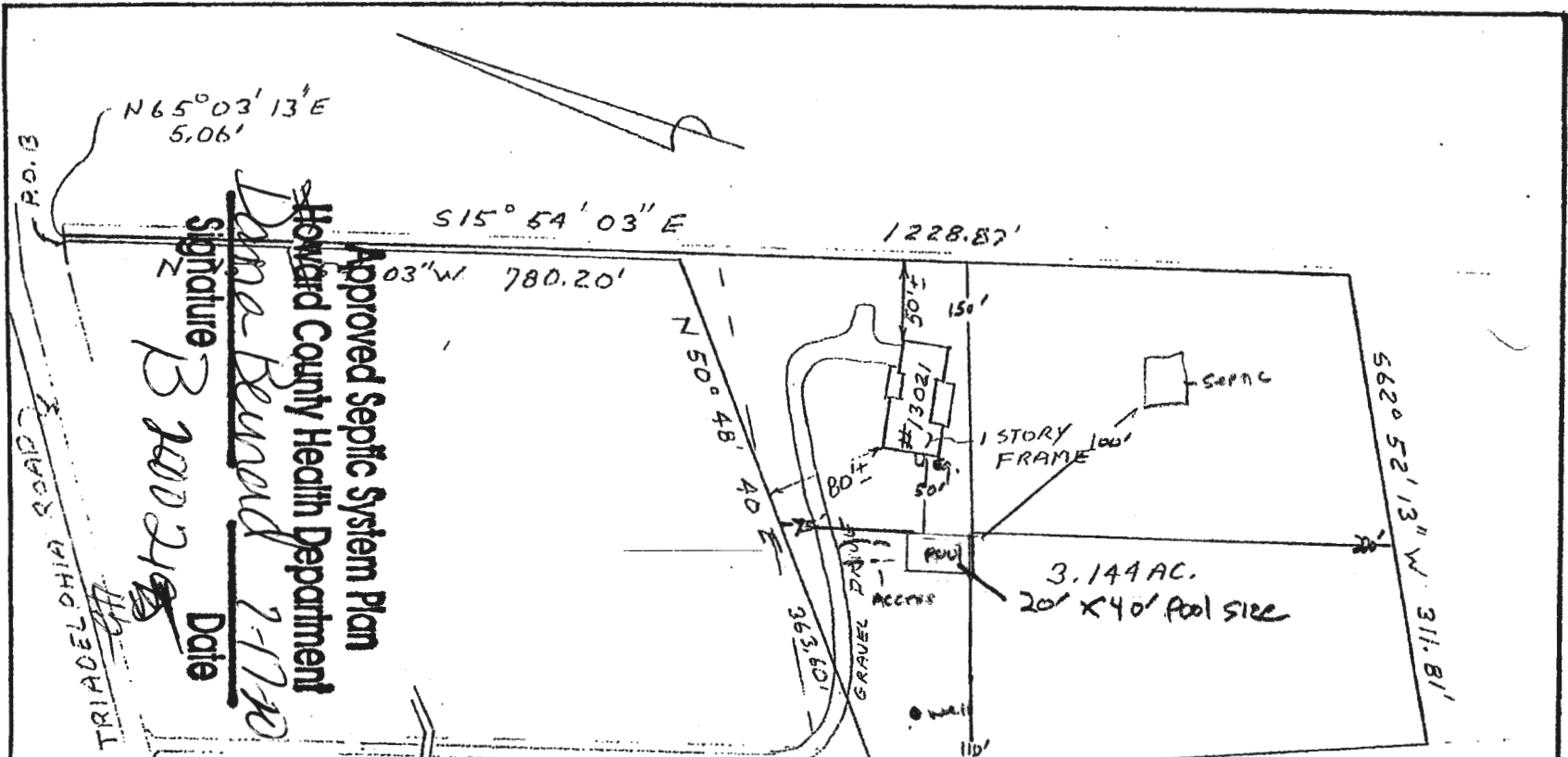
□ - Filter EQ



Allegro Pool Service  
MHFC 128347

EQUIPMENT

- Pentair cartridge filter
- Hayward 1/2 HP pump
- Polaris booster
- Rheem heat pump



Subject property is shown in Zone C  
 on the National Flood Insurance Program  
 Flood Insurance Rate Map of HOWARD  
 County, Maryland. Panel # 210E45  
 Community Panel # 240044 0021B  
 Effective Date: DEC 4 1986

Address change to 3720 PARK OVER LOOK CT EC 21042

This is to certify that I have surveyed the  
 property shown hereon, being the same property  
 described in a deed from MARY C. BRANDT  
 to DAVID LOUIS FLUMHOFF JR. to be  
 recorded among the land records of HOWARD  
 COUNTY in Liber Folio for the  
 purpose of locating the improvements thereon.

THIS PLAT SHOWS ONLY THAT THE IMPROVEMENTS ARE  
 CONTAINED WITHIN THE OUTLINES OF THE LOT AND IS  
 NOT TO BE USED TO ESTABLISH PROPERTY LINES.



J. Carl Hudgins PLS#96

**LOCATION SURVEY**  
 13021 TRIADELPHIA ROAD  
 3rd ELECTION DISTRICT  
 HOWARD COUNTY MO

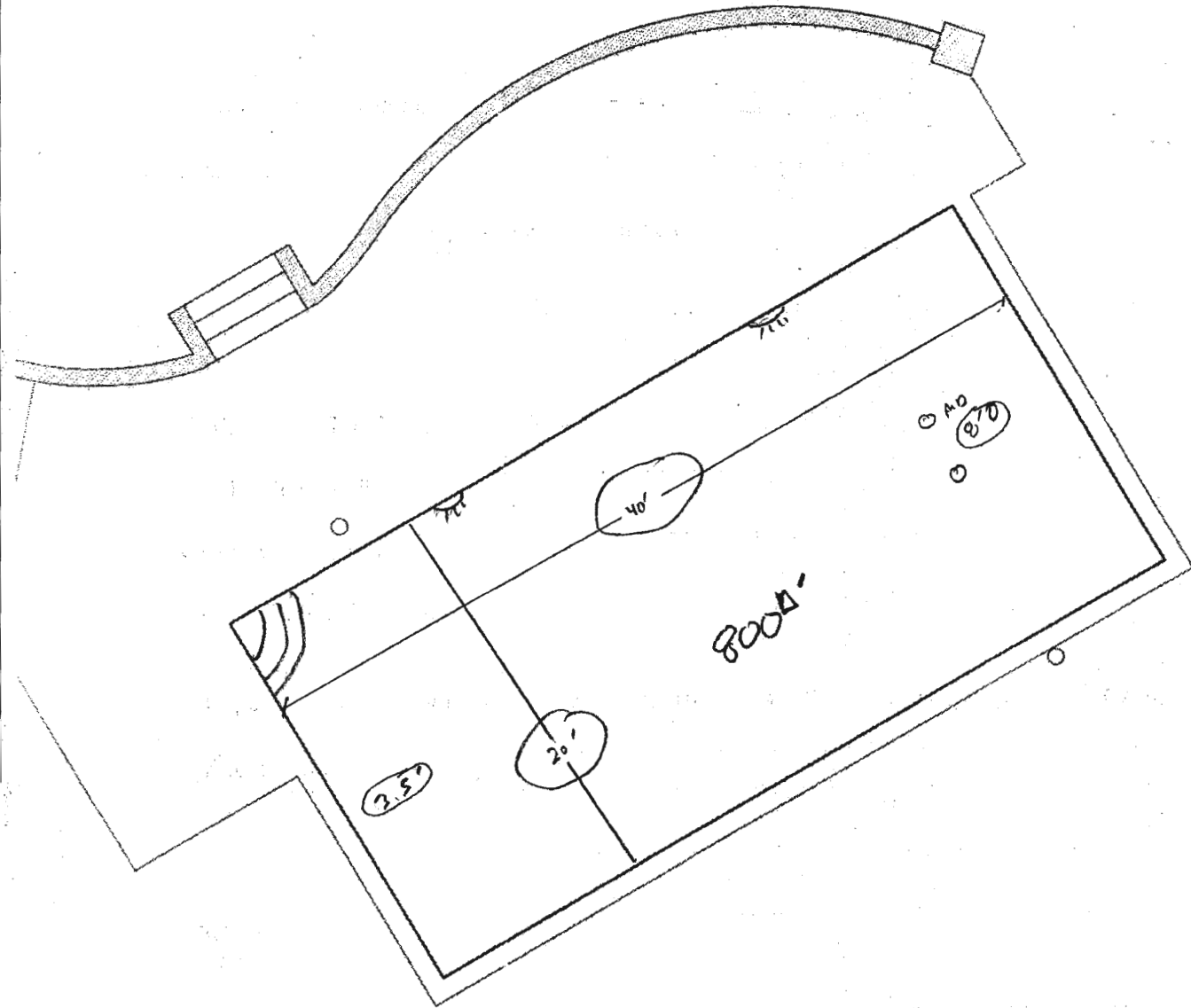
NTT ASSOCIATES, INC.  
 16205 Old Frederick Road  
 Mt. Airy, Maryland 21771  
 Phone 442-2031

Scale 1"=100'  
 Date NOV 7 1994  
 Field By JLM  
 Drawn By JCH  
 Drawing # 9327 CAT

Plumbhoff  
INGROUND SWIMMING POOL 8004"  
3720 PARK OVERLOOK COURT, ELLICOTT CITY MD 21042

House

□ - Filter EQ



Allegro Pool Service  
MHFC 128347

EQUIPMENT

Pentair carbon filter  
Hayward 1/2 HP PUMP  
Polaris booster  
Rheem HEAT PUMP

# HOWARD COUNTY RESIDENTIAL BUILDING & TRADES ONLINE COMPUTER REGISTRATION FORM

Select one:  Home Builder (MHBR)  MHIC Contractor  Fire Sprinkler (MSC)  
 Electrician (HoCo)  HVAC  Utility Contractor (HoCo)  Plumber/Gas Fitter

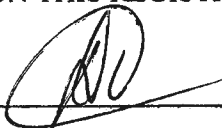
## REGISTRATION FOR LICENSEE:

License Number 128347 Expiration Date 06/16/2022  
Name of Licensee ALLEGRO POOL SERVICE  
Business Name ALLEGRO POOL SERVICE  
Business Address 3204 GINGER BREAD COURT  
Street Address  
ELLCOTT CITY MD 21042  
City State Zip Code  
Primary Phone (240) 676-0297 Business Phone (703) 994-5572 Fax (410) 480-5099  
E-Mail SWIM@ALLEGROPOOLS.COM

## AUTHORIZED AGENT FOR THE ABOVE LICENSEE (If Applicable):

Name of Individual DAVID DELEAN  
Business Name ALLEGRO POOL SERVICE  
Business Address 3204 GINGER BREAD COURT  
Street Address  
ELLCOTT CITY MD 21042  
City State Zip Code  
Primary Phone (240) 676-0297 Business Phone (703) 994-5572 Fax \_\_\_\_\_  
E-Mail DAVE@ALLEGROPOOLS.COM

UNDER PENALTY OF PERJURY, THE LICENSEE AND PERMIT AGENT HEREBY CERTIFIES THAT THE INFORMATION PROVIDED ON THIS REGISTRATION FORM IS AUTHORIZED, TRUE, ACCURATE, AND COMPLETE.

SIGNATURE OF LICENSEE  DATE 7/9/2020

**\*\*\*SEE REVERSE SIDE FOR INSTRUCTIONS\*\*\***



LICENSE • REGISTRATION • CERTIFICATION • PERMIT  
STATE OF MARYLAND  
MARYLAND DEPARTMENT OF LABOR

Lawrence J. Hogan  
Governor  
Boyd K. Rutherford  
Lt. Governor  
Tiffany P. Robinson  
Secretary

**MARYLAND HOME IMPROVEMENT COMMISSION**

**CERTIFIES THAT:**

**ALLEGRO POOL SERVICE INC**

**IS AN AUTHORIZED: 05 - CONTRACTOR/SALESMAN (CORP/PAR**

<u>LIC/REG/CERT</u>	<u>EXPIRATION</u>	<u>EFFECTIVE</u>	<u>CONTROL NO</u>
128347	06-16-2022	N/A	5515784

Signature of Bearer

Secretary



**ELECTRICAL PERMIT APPLICATION**

DEPARTMENT OF INSPECTIONS, LICENSES & PERMITS  
 3430 Court House Drive, Ellicott City, MD 21043  
 (410) 313-2455 PERMITS; (410) 313-3322 FAX  
 (410) 313-1820 INSPECTORS; [www.howardcountymd.gov](http://www.howardcountymd.gov)

ELECTRICAL PERMIT NO. \_\_\_\_\_  
 BUILDING PERMIT NO. \_\_\_\_\_  
 DATE FILED/MAILED \_\_\_\_\_

INSPECTION ADDRESS 3720 Park Overlook Ct, Ellicott City MD 21042  
 OCCUPANT/TENANT NAME: Donald Plumhoff TYPE OF USE: In Ground Swimming Pool  
 SUITE NO. \_\_\_\_\_ UTILITY COMPANY: BGE ALLEGHENY POWER \_\_\_\_\_ WMS#: \_\_\_\_\_

PROPERTY OWNER INFORMATION		ELECTRICAL CONTRACTOR INFORMATION	
NAME <u>Donald Plumhoff</u>	TRADE NAME <u>Tri Star</u>	ADDRESS <u>2979 JESSUP</u>	
ADDRESS <u>3720 Park Overlook Ct</u>	ADDRESS <u>2979 JESSUP</u>	CITY <u>JESSUP</u>	STATE <u>MD</u> ZIP <u>20794</u>
CITY <u>Ellicott City</u> STATE <u>MD</u> ZIP <u>21042</u>	CITY <u>JESSUP</u>	PHONE _____	CELL _____
PHONE _____ CELL _____	PHONE _____ CELL _____	EMAIL <u>Bremor@tristarselectric.net</u>	
EMAIL <u>donplumhoff@yahoo.com</u>	EMAIL _____		

Residential  Commercial \_\_\_\_\_ Building: NEW EXISTING \_\_\_\_\_ ADDITION \_\_\_\_\_ DEMO \_\_\_\_\_  
 Building Type (check one): SFD \_\_\_\_\_ MFD \_\_\_\_\_ Mobile Home \_\_\_\_\_ Temporary Trailer \_\_\_\_\_ Swimming Pool  Sign \_\_\_\_\_ Construction Service \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

**EQUIPMENT LIST**

**New Service Equipment (Utility Meter Release)**

List each Service Separately  
 Quantity \_\_\_\_\_ Size(amps) \_\_\_\_\_  
 Quantity \_\_\_\_\_ Size(amps) \_\_\_\_\_

**New Sub-Panels (Do not list xformer secondary panels)**

Quantity 1 Size(amps) 40  
 Quantity \_\_\_\_\_ Size(amps) \_\_\_\_\_  
 Quantity \_\_\_\_\_ Size(amps) \_\_\_\_\_  
 Quantity \_\_\_\_\_ Size(amps) \_\_\_\_\_  
 Quantity \_\_\_\_\_ Size(amps) \_\_\_\_\_

<u>Outlets</u>			
	<u>Quantity</u>	<u>Quantity</u>	<u>Quantity</u>
Receptacles	_____	Pole Lights	_____
Switches	_____	Smoke Det.'s	_____
Emerg. Lights	_____	Lighting	_____
Exit Lights	_____	VAV	_____
LED Lights	_____		
		Sign Circuit	_____
		Solar Panels	_____
		System Furniture	_____
		Other	_____
			<u>Quantity</u> <u>Size</u>
		Motor less than 5 HP	_____ / _____

**EQUIPMENT AND APPLIANCES:**

	<u>Quantity</u>	<u>kw/kva/amps/HP</u>
Water Heater	_____	_____
RTU	_____	_____
A/C	_____	_____
AHU	_____	_____
Chiller	_____	_____
Motors 5hp+	_____	_____
Transformer	_____	_____
UPS	_____	_____
Generator	_____	_____
Dryer	_____	_____

**EQUIPMENT AND APPLIANCES:**

	<u>Quantity</u>	<u>kw/kva/amps/HP</u>
Inverter	_____	_____
Appliances	_____	_____
PDU	_____	_____
Medical Eq.	_____	_____
Walk-in Box	_____	_____
Elevator	_____	_____
Hot Tub	_____	_____
Range/Oven	_____	_____
Other	_____	_____
Other	_____	_____

**LOW VOLTAGE:**

	<u># Devices</u>
Voice Data	_____
Fire Alarm	_____
Security	_____
Occ. Sensors	_____
Access Control	_____
Audio	_____
Other	_____

**NO ELECTRICAL WORK SHALL COMMENCE PRIOR TO THE ISSUANCE OF AN ELECTRICAL PERMIT**

*Tri Star will apply on line*

I, the undersigned, hereby declare and affirm under penalty of perjury, that I hold a current master electrician's license issued by the Howard County Board of Electrical Examiners.

LICENSEE'S SIGNATURE: \_\_\_\_\_  
 PRINT NAME: \_\_\_\_\_  
 HOWARD COUNTY LICENSE NO.: \_\_\_\_\_

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

THE ELECTRICAL PERMIT IS VALID FOR 6 MONTHS FROM DATE OF ISSUANCE

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS

HOWARD COUNTY MARYLAND

**WATER SHALL NOT BE PLACED INTO THE POOL UNTIL A FINAL BUILDING INSPECTION IS APPROVED**

**THE FINAL INSPECTION WILL NOT BE APPROVED UNTIL ALL REQUIRED SWIMMING POOL SAFETY DEVICES ARE INSTALLED AND FULLY OPERATIONAL**

All Swimming Pools are required to have an Electrical Permit by a Licensed Electrician

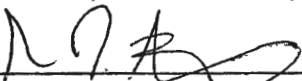
Gas Fired Pool Heaters

NO  YES - Plumbing Permit required by a Licensed Plumber / Gas Fitter


DECLARATION OF INTENT TO INSTALL SWIMMING POOL SAFETY DEVICES

Date 7/6/2020 Building Permit # \_\_\_\_\_ Address 3720 PARK OVERLOOK CT, EC. MD 21042

The undersigned, being the owner(s) of the above referenced property, hereby accept(s) the responsibility for the installation of an approved fence and safety devices required by Section 3109 of the 2018 Edition of the International Building Code. I (We) agree that the approved minimum 48" high fence and approved safety devices shall be installed prior to the placement of any water in the pool and that fences shall comply with the setback requirements of the Department of Planning and Zoning.

  
Owner(s) Donald L. Plumhoff

3720 PARK OVERLOOK CT. ELLICOTT CITY MD  
Address

  
Witness DAVE DELEAN

For 3720 PARK OVERLOOK CT EC. MD  
Address

Please call the Plan Review Division (Department of Inspections, Licenses and Permits) at 410-313-2436 for information regarding the fence design or safety devices. For information regarding fence setback requirements, please call the Zoning Administration (Department of Planning and Zoning) at 410-313-2393. Copy of Section 3109 of The International Building Code is on reverse side for your information.