

Menu Save Reset Cancel Help

Record Detail (This section is required.)

Permit Type Building/Residential/Misc/Tanks Permit Number B21000839 Opened Date 03/19/2021

Description of Work SFD/ INSTALL (1) 1000GAL UNDERGROUND PROPANE TANK

check spelling

Approved 4/9/21

Address (This section is required.)

Search Reset Clear Get Parcel & Owner

Street # 5027 Street Name GAITHERS CHANCE Street Type DR
Unit Type --Select-- Unit # X Coordinate -76.97824 Y Coordinate 39.23458
City CLARKSVILLE State MD Zip Code 21029 Primary Yes

Parcel (This section is required.)

Search Reset Clear Get Address & Owner

GIS ID 1105429 Parcel 45 Parcel Area 27.44 Land Value 492700 Improved Value 749100 Exemption Value 256400 Plan Area RURAL

Legal Description IMPSPAR. A & IMPS 27.44[ ]5027 GAITHERS CHANCE DR [ ]GAITHERS CHANCE

check spelling

Block Lot PAR A Census Tract 805101 Council Dist 5 Inspection Dist Supervisor Dist Map # DAP Zone
Plan Area State Tax Id 1405359066 Subdivision Name Gaither's Chance
Section Area Tax Map 28
Grid Zoning District RR-DEO ADC Map 4933-D3
SDP No. Final Plan No. ECP-14-067 WP File No.
Record Plat No. 23698-2370 WS Contract No. FDP No. Primary Yes
Owner Occupied Year Built 1747 Historic District No
Historic District Registry No. Stat Area 5-02A Flood Plain No
Building No

Owner (This section is required.)

Search Reset Clear

Name ZAMBIDIS ELIAS T
Address Line 1 5027 GAITHERS CHANCE DR
Address Line 2
Address Line 3
Mail City CLARKSVILLE Mail State MD Mail Zip Code 20129
Phone 301-725-3232 Primary Yes
E-mail
Cell Number Fax Number

Professionals (This section is not required.)

Search Reset Clear

License # *	Business Name		
20100103851	THE H. J. POIST GAS COMPANY, INC		
License Type *	First Name	Middle Name	Last Name
Propane Gs	SEAN	MICHAEL	UNDERWOOD
Primary	Address Line 1		
Yes	360 MAIN STREET		
	Address Line 2		
	City	State	ZIP Code
	LAUREL	MD	20707-0000
	Phone 1	Phone 2	Fax
	4434149582		
	E-mail		

Applicant (This section is not required.)

Search As Owner As Lic. Prof As Contact

Type *	First Name	MI	Last Name
Applicant	MICHELLE		CLANCY
Relationship	Full Name		
Applicant	MICHELLE CLANCY		
Primary	Organization Name		
Yes	APPLIED & APPROVED PERMITS LLC		
	Street Address		
	P.O. BOX 310		
	Address Line 2		
	City	State	Zip Code
	PERRY HALL	MD	21128
	Phone	Cell	Fax
	443-340-1229		
	E-mail *		
	MICHELLE@APPLIEDANDAPPROVED.COM		

Addtl Info

Est Construction Cost *	Housing Units *	Number of Buildings *	Public Owned
3000	0	0	No
Construction Type	--Select--		

TANK INFORMATION

RESIDENTIAL TANK INFORMATION

Capital Project-No Fee *	Capital Project Number	Fee Exempt *	Roadside Tree Project Permit *	Roadside Tree Permit #
<input type="radio"/> Yes <input checked="" type="radio"/> No		<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No	
Existing Use	Number of Tanks Installed *	Number of Tanks Removed *		
SFD	1	0		
Water Supply	Sewage Disposal	Expiration Date	Relocate Existing Tank *	
Public	Public	9/18/2021	0	

PAYMENT INFORMATION

Check 1	Payee 1	Check 2	Payee 2	SAP Doc No	SAP Entered

Submit Cancel





### 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: **B20000196**

Building Address: 5027 Gaithers Chance Dr.  
 City: Clarksville State: MD Zip Code: 21029  
 Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: F-15-043  
 Subdivision: Gaithers Chance  
 Lot: \_\_\_\_\_ Tax Map: \_\_\_\_\_ Parcel: A  
Plat No. 23698-23702  
 Existing Use: ?  
 Proposed Use: residential  
 Estimated Construction Cost: \$ 900,000  
 Description of Work: 2 stories with loft, 4 BR, 4 1/2 bathrooms, attached garage, 5200 sq ft. occupiable space - existing structure to be razed  
 Occupant/Tenant Name: 10 RMS  
 Was tenant space previously occupied?  Yes  No  
 Contact Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Property Owner's Name: Elias Zambidis/Ann Peters  
 Address: 3270 St. John's Lane  
 City: Ellicott City State: MD Zip Code: 21042  
 Phone: 443 710 7650 Fax: \_\_\_\_\_  
 Email: ezambid1@jhmi.edu  
 Applicant's Name & Mailing Address, (If other than stated herein)  
 Applicant's Name: Elias Zambidis  
 Address: 3270 St. John's Lane  
 City: Ellicott City State: MD Zip Code: 21042  
 Phone: 443 710 7650 Fax: \_\_\_\_\_  
 Email: ezambid1@jhmi.edu  
 Contractor Company: TBD  
 Contact Person: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 License No.: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Engineer/Architect Company: Sutton Yantis Assoc. Architects  
 Responsible Design Prof.: Martin G. Yantis  
 Address: 8300 Buone Blvd. suite 750  
 City: Vienna State: VA Zip Code: 22182  
 Phone: (703) 734-9733 Fax: (703) 842-9171  
 Email: gyantis@SYAA.com

3 stories, 4 1/2 house originally with in 1947

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: <u>46'-0" X 68'-2"</u>	
Area of construction (sq. ft.):	2 <sup>nd</sup> floor: <u>46'-0" X 68'-2"</u>	
	Basement: <u>46'-8" X 68'-10"</u>	
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 checked="" type="checkbox"/> Reinforced Concrete	No. of Bedrooms: <u>4</u>	
<input checked="" type="checkbox"/> Structural Steel	Multi-family Dwelling	
<input checked="" 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 checked="" 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Water Supply	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private (well)	
Sewage Disposal	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private septic tank	
Heating System	
<input checked="" type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
Sprinkler System:	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number:	<u>GR 20-50</u>
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.

Applicant's Signature: Elias T. Zambidis  
 Print Name: Elias T. Zambidis  
 Email Address: ezambid1@jhmi.edu  
 Date: 1/9/20  
 Title/Company: \_\_\_\_\_

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

AGENCY	DATE	SIGNATURE OF APPROVAL	DPZ SETBACK INFORMATION	Filing Fee	Permit Fee
State Highways			Front: <u>35</u>	\$ <u>100.00</u>	\$
Building Officials			Rear: <u>33</u>	Tech Fee	\$
PSZA (Zoning)			Side: <u>30</u>	Excise Tax	\$
PSZA (Engineering)			Side St.:	PSFS	\$
Health		<u>Steve R...</u>	All minimum setbacks met? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Guaranty Fund	\$ <u>50.00</u>
Is Sediment Control approval required for issuance? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Is Entrance Permit Required? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Add'l per Fee	\$
<input type="checkbox"/> CONTINGENCY CONSTRUCTION START			Historic District? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Total Fees	\$
			Lot Coverage for New Town Zone:	Sub- Total Paid	\$
			SDP/Red-line approval date:	Balance Due	\$
				Check	# <u>1114</u>

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

T:\Operations\Updated Forms\BuildingPermitApplication03.29.2018.docx

Existing dwelling still on lot

Check MITU see MITU note.

JP

replacement sheet 32 being circulated.

OH

April 23, 2020

Lisa Logan-Roussell  
Regulation Support Technician II  
Howard County Dept of Inspections, Licenses, and Permits  
3430 Court House Drive  
Ellicott City MD 21043

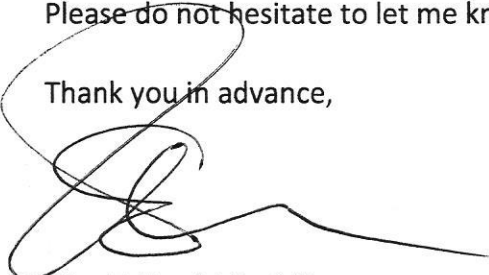
Re: Building Permit #**B20000196** 5027 Gaithers Chance Drive, Clarksville, MD 21029

Dear Ms. Logan-Roussell,

As per our recent email communication, please find enclosed original hardcopy prints of our architect's revision of the upper floor plan for your files, as well as Mr. Bricker's letter asking for these revisions to the "Her Office" room. Mr. Bricker had advised that this floor plan should be re-designed by our architect so that the "Her Office" room does not qualify by Howard County code definition as a "bedroom". These revisions which delete the original design and do not qualify the use of this home office space as a bedroom should hopefully now allow the building permit (#**B20000196**) process to be completed.

Please do not hesitate to let me know if there are any additional questions.

Thank you in advance,

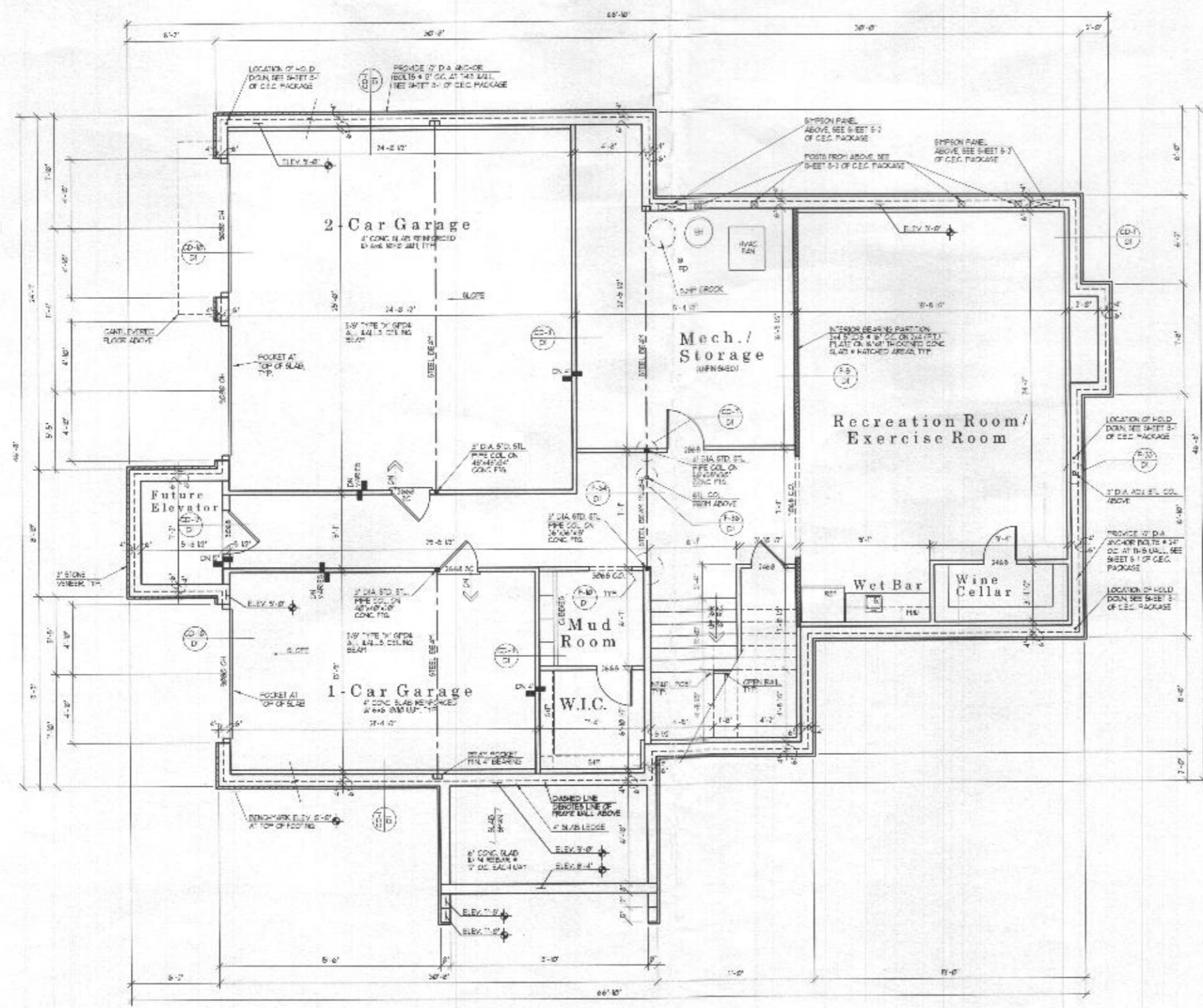


Elias T. Zambidis, MD  
[ezambid1@jhmi.edu](mailto:ezambid1@jhmi.edu)  
Cell: 443-710-7650

RECEIVED  
APR 23 2020  
LICENSING & PERMITS  
DIVISION

CC: Health  
P+Z

B2000196



*See 2nd Floor  
of Her Office  
otherwise OK*

**FOUNDATION/BASEMENT FLOOR PLAN**

UNLESS OTHERWISE NOTED ALL INTERIOR PARTS ARE TO BE 3" R

1/4"=1'-0"

**ADJUSTABLE STEEL COLUMNS**  
 THE FOLLOWING ARE APPROVED 1 1/2" DIA. ADJUSTABLE STEEL COLUMNS FOR USE AS SPECIFIED IN ADJUSTABLE STEEL COLUMN CONNECTION DRAWING 11-020 - 10" ADJUSTABLE COLUMN CONNECTION REPORT ERM-19-11  
 1) ARON - 10" ADJUSTABLE COLUMN CONNECTION REPORT ERM-19-11  
 2) ARON - 10" ADJUSTABLE COLUMN CONNECTION REPORT ERM-19-11  
 3) HERSHALL - EXTEND-C COLUMN CONNECTION REPORT ERM-19-11

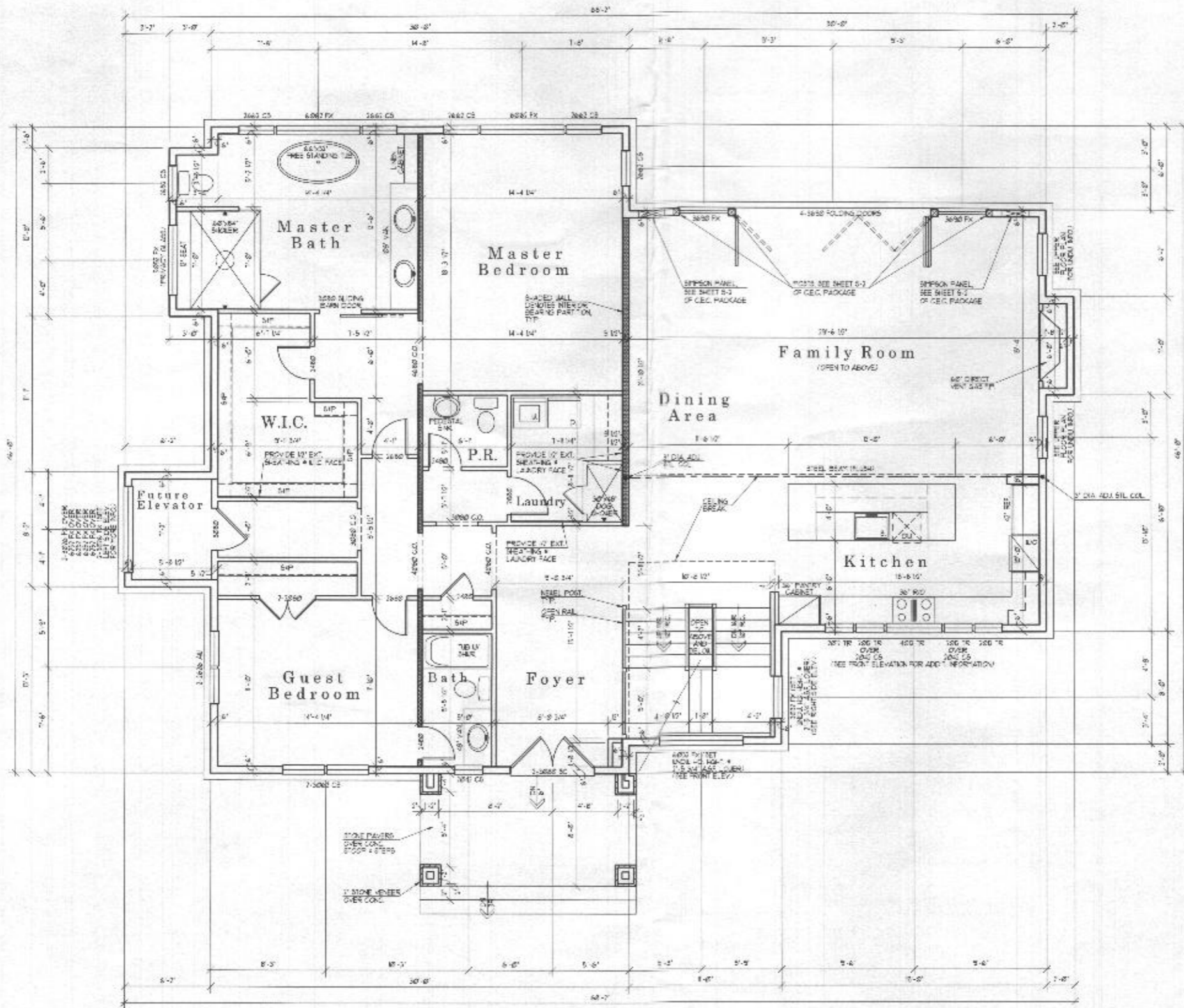
DOB	
A.C. 07/11/14 DG	
A.C. 07/08/19 DG	
A.C. 07/04/07 DG	
PR. 07/08/19 DG	

Project Number: 18070-02  
**ZAMBIDIS RESIDENCE**  
**5027 GAITHERS CHANCE DRIVE**  
**CLARKSBURG, MARYLAND**

Architect

**SUTTON YANTIS ASSOCIATES ARCHITECTS**  
 10000 GREEN VALLEY LANE, SUITE 100, CLARKSBURG, MARYLAND 21550  
 WWW.SYASB.COM TEL: 703.547.9173 FAX: 703.547.9171

Sheet Number **2**



**MAIN FLOOR PLAN**

UNLESS OTHERWISE NOTED ALL INTERIOR PARTITIONS TO BE 5/8\"/>

1/4"=1'-0"

**ADJUSTABLE STEEL COLUMNS**  
 THE FOLLOWING ARE APPROVED E-COLS FROM A  
 MANUFACTURER'S CATALOG FOR USE AS SPECIFIED IN  
 THESE CONSTRUCTION DRAWINGS  
 1) 6"X6" - 75# ADJUSTABLE COLUMN  
 ICC-ES REPORT: ESR-1140  
 2) 8"X8" - 100# ADJUSTABLE COLUMN  
 ICC-ES REPORT: ESR-1140  
 3) 10"X10" - 150# ADJUSTABLE COLUMN  
 ICC-ES REPORT: ESR-1140  
 4) 12"X12" - 200# ADJUSTABLE COLUMN  
 ICC-ES REPORT: ESR-1140

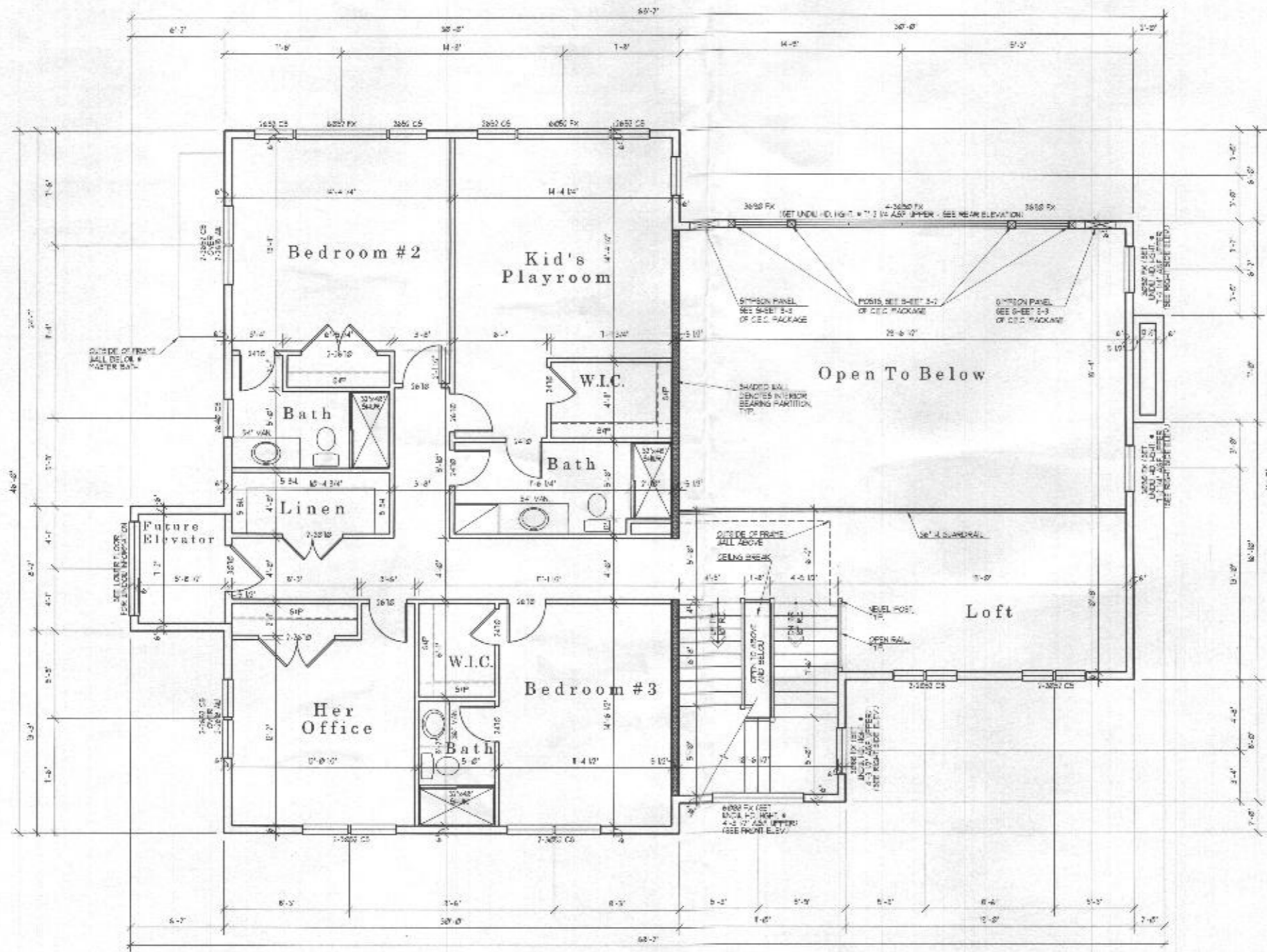
Date	
AC. PROJECT DS	
AC. DRAWING DS	
AC. DRAWING DS	
PS. DRAWING DS	

Project Number: 18078-01  
**ZAMBIDIS RESIDENCE**  
**5027 GAITHERS CHANCE DRIVE**  
**CLARKSBURG, MARYLAND**

Architect



Sheet Number  
**3**



UPPER FLOOR PLAN

UNLESS OTHERWISE NOTED ALL INTERIOR PARTITIONS TO BE 5/8" UNLESS OTHERWISE NOTED AND DOOR HEADS TO BE 1 1/4" ASP UPPER

1/4"=1'-0"

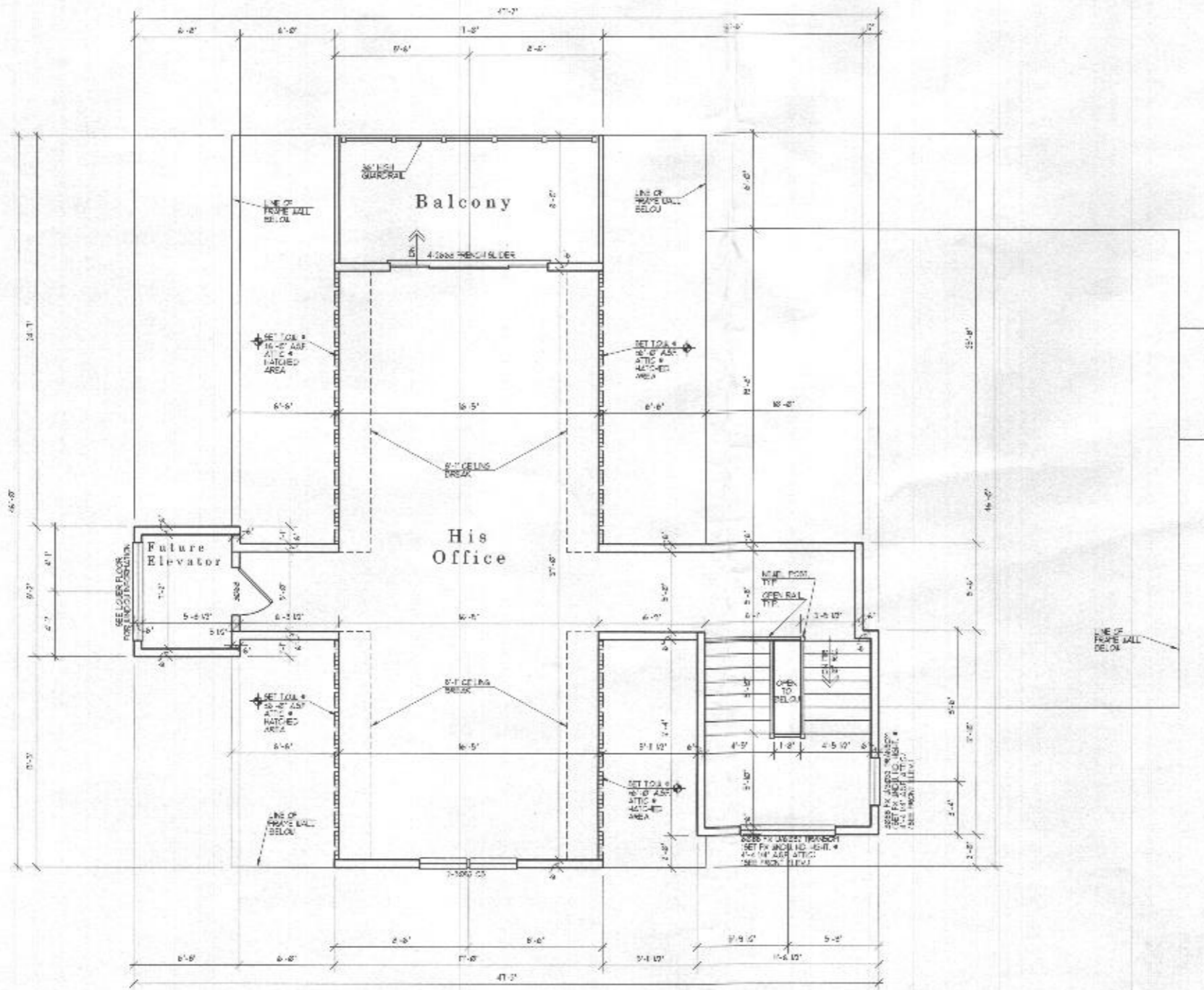
Date	
A.C. 09/13 DG	
A.C. 08/09 DG	
A.C. 08/08 DG	
P.A. 02/08 DG	

Project Number: 1870-e4  
**ZAMBIDIS RESIDENCE**  
**5027 GAITHERS CHANCE DRIVE**  
**CLARKSBURG, MARYLAND**

Architect



Sheet Number  
**4**



**ATTIC FLOOR PLAN**

UNLESS OTHERWISE NOTED ALL INTERIOR PARTITIONS TO BE 5'-0"  
 UNLESS OTHERWISE NOTED WINDOW HEAD HEIGHT TO BE 8'-0" ASS. ATTIC

1/4"=1'-0"

Date	By
AC 07/11/10 DG	
AC 08/03/10 DG	
AC 08/18/10 DG	
PA 02/02/10 DG	

Project Number: 8070-05  
**ZAMBIDIS RESIDENCE**  
**5027 GAITHERS CHANCE DRIVE**  
**CLARKSBURG, MARYLAND**

Architect



Sheet Number  
**5**

