

JUL 19 2021

PERMIT NUMBER: B

21002735

DATE ACCEPTED:

LICENSES & PERMITS DIVISION



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: 12719 Folly Quarter Road | | Unit: |
| City: Ellicott City | State: MD | Zip Code: 21042 |
| Subdivision/Village/Complex Name: | | SDP/WP/BA #: |
| Lot: 5-D | Tax Map: | Parcel: 05-358639 Grading Permit #: |

DESCRIPTION OF WORK REQUIRED

| | | |
|---|--|------------------------------------|
| Existing Use: Deck | Proposed Use: Deck for residential property | Estimated Cost: \$13,000.00 |
| Trade Work to Be Completed (Separate Permits Required): <input type="checkbox"/> Mechanical (HVACR) <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input checked="" type="checkbox"/> None | | |

We plan to replace and expand the current aging deck. Current size: 13 ft x 10.5 ft, with railed staircase on both sides (4 steps). The estimated size of the new deck: 18 ft x 16 ft with railed staircase on one side and open staircase at the corner of the other side. Please see the submitted drawing. The deck is not located in the draining field of the septic system.

PROPERTY OWNER INFORMATION REQUIRED

| | | |
|--|---------------------------------------|--|
| Owner(s) Name(s) (As it appears on tax records): Hsiang-Hsuan Yu and Ya-Yu Tsai | | Primary Residence: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Owner's Street Address: 17812 Canary Point Lane | | |
| City: Tampa | State: FL | Zip Code: 33647 |
| Phone: (410) 564-6071 | Email: michaelyu0622@yahoo.com | |

APPLICANT NAME REQUIRED - INDIVIDUAL WHO SIGNS THIS APPLICATION

| | |
|--|---|
| Business Name: Hsiang-Hsuan Yu and Ya-Yu Tsai | Contact Name: Ya-Yu Tsai |
| Street Address: 12719 Folly Quarter Road | |
| City: Ellicott City | State: MD Zip Code: 21042 |
| Phone: (410) 300-7875 | Email: ytsai@hotmail.com |

CONTRACTOR INFORMATION REQUIRED

| | | |
|--|------------|-----------|
| Business Name: N/A : self built | | |
| Licensee's Name: | License #: | |
| Street Address: | | |
| City: | State: | Zip Code: |
| Phone: | Email: | |

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: <input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> SF Duplex <input type="checkbox"/> Mobile Home <input type="checkbox"/> Multi-Family Dwelling (MF*) | Condo: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Utilities: <input checked="" type="checkbox"/> Electric <input type="checkbox"/> Gas | Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private (Well) Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private (Septic) |
| Heating System: <input checked="" type="checkbox"/> Electric <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane <input type="checkbox"/> Other: | Roadside Tree Project: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes: # |
| Sprinkler System: <input type="checkbox"/> NFPA 13 <input type="checkbox"/> NFPA 13R <input type="checkbox"/> NFPA 13D <input checked="" type="checkbox"/> None | Fire Alarm System: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Voice Evac |

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

| | | | | |
|--|-------------------------------------|---------------------------|-------------------------------------|----------------------------|
| Model Name & Options: | | | | |
| # of Bedrooms (SF): 4 | # of efficiency units (MF*): | # of 1 BR (MF*): | # of 2 BR (MF*): | # of 3 BR (MF*): |
| # Rooms: 4 | # Full Baths: 5 | # Half Baths: 0 | # Fireplaces: 1 | |
| Garage/Carport Info: <input checked="" type="checkbox"/> Attached Garage <input type="checkbox"/> Detached Garage <input type="checkbox"/> Integral Garage <input type="checkbox"/> Carport <input type="checkbox"/> None | | | | |
| Basement/Foundation Info: <input type="checkbox"/> Slab on Grade <input type="checkbox"/> Post & Pier <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/> Finished Basement: <input checked="" type="checkbox"/> Full or <input type="checkbox"/> Partial | | | | |
| 1 st Fl Width: 78 | 1 st Fl Depth: 65 | 2 nd Fl Width: | 2 nd Fl Depth: | Bsmt Width: Bsmt Depth: |
| Energy Method: <input type="checkbox"/> Prescriptive <input type="checkbox"/> Performance <input type="checkbox"/> UA Alternative <input type="checkbox"/> ERI | | Gross Area: sq ft | Occupiable Area: 4,800 sq ft | |

AGREEMENT/ DISCALIMER REQUIRED

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 ORIGINAL SIGNATURE

DATE SIGNED

July 15, 2021

FOR OFFICE USE ONLY

CHECKS PAYABLE TO: DIRECTOR OF FINANCE OF HOWARD COUNTY

| | | | | |
|--|---|---|---|---|
| AGENCIES REQUIRED/APPROVALS: | | | | |
| <input checked="" type="checkbox"/> PR | <input checked="" type="checkbox"/> DPZ | <input checked="" type="checkbox"/> DED | <input checked="" type="checkbox"/> Health 8/13/21 | <input type="checkbox"/> SHA <input type="checkbox"/> CID |

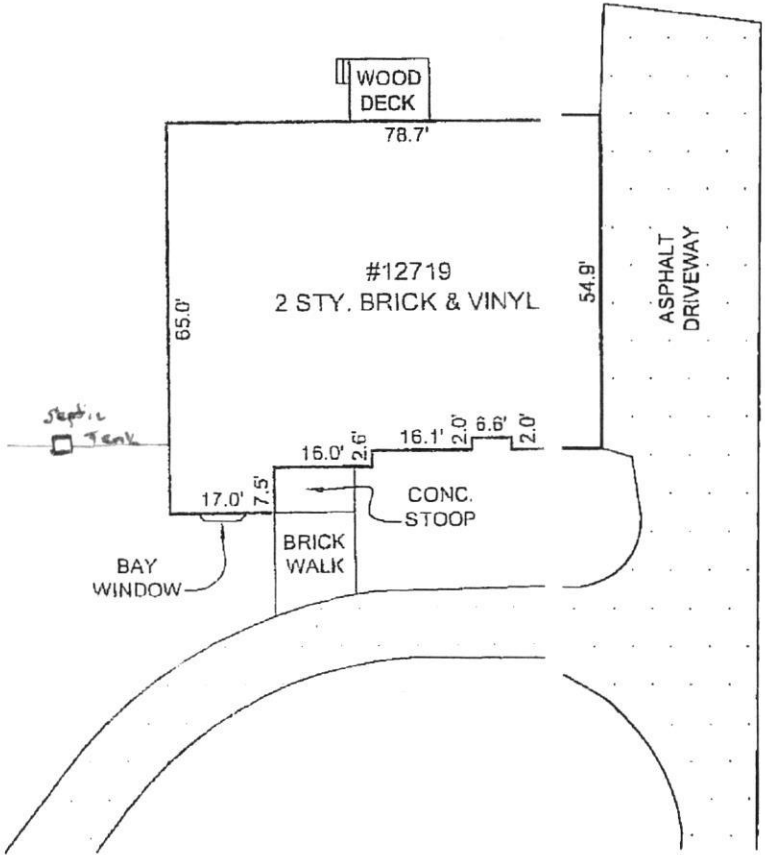
| | | |
|-----------------|----------|--------------|
| SUBMITTAL FEES: | PAYMENT: | ACCEPTED BY: |
|-----------------|----------|--------------|

See file for actual location drawing

DETAIL

SCALE: 1"=30'

(W)



THIS LOT DOES NOT APPEAR TO LIE WITHIN THE 100 YEAR FLOOD PLAIN AS SHOWN ON THE F.E.M.A. FLOOD HAZARD MAP 240044-0021-B AS REVISED DECEMBER 4, 1986.

CERTIFICATION

I HEREBY CERTIFY THAT I WAS IN RESPONSIBLE CHARGE OVER THE PREPARATION OF THIS LOCATION DRAWING AND THE SURVEY WORK REFLECTED IN IT, IS IN COMPLIANCE WITH REQUIREMENTS SET FORTH IN THE CODE OF MARYLAND TITLE 8, SUBTITLE 13, CHAPTER 06, REGULATION 12, AND THE POSITION OF EXISTING IMPROVEMENTS AS SHOWN HEREON, ARE CORRECT, TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Michael D. Adcock
 MICHAEL D. ADCOCK
 PROFESSIONAL LAND SURVEYOR
 NO. 21257, EXPIRATION DATE: 06-16-2015

Sill · Adc
Associate

Engineers · Survey
3300 North Ridge Road, Suite
Ellicott City, Maryland 21043
Phone: 443.325.7682 Fax
Email: mike@saaland.com

476

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

05-358639

P 45374

A 32255

DISTRICT 5th

DATE 2/2/90

DATE SYSTEM APPROVED 2/18/90

INSPECTOR R/H

INDEXED

Olen Ketterman IS PERMITTED TO INSTALL ALTER

ADDRESS 14960 Route 144, Woodbine, Maryland 21797 PHONE 442-1336

SUBDIVISION Glenelg Manor II ROAD 12719 12719 12705-Folly Quarter Rd LOT 5D

PROPERTY OWNER Rock & Sulette Tiffault

ADDRESS _____

~~IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 25%~~

GARBAGE GRINDER YES NO

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 180 sq. ft. per bedroom. Trench to be 3 feet wide. Inlet 2 1/2 feet below original grade. Bottom maximum depth 4 feet below original grade. Effective area begins at 3 feet below original grade. 1 1/2 feet of stone below distribution pipe.

LOCATION - Place distribution box 120 feet from the East (217.9') lot line and 120 feet from the South (200') lot line. Run trench(s) along level ground toward either side lot line, being certain to remain at least 100 feet from any well.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. ok/cw

PLANS APPROVED BY C. Williams DATE 11/06/85

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

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 40 PVC OR ABS

PERMIT VOID AFTER TWO YEARS

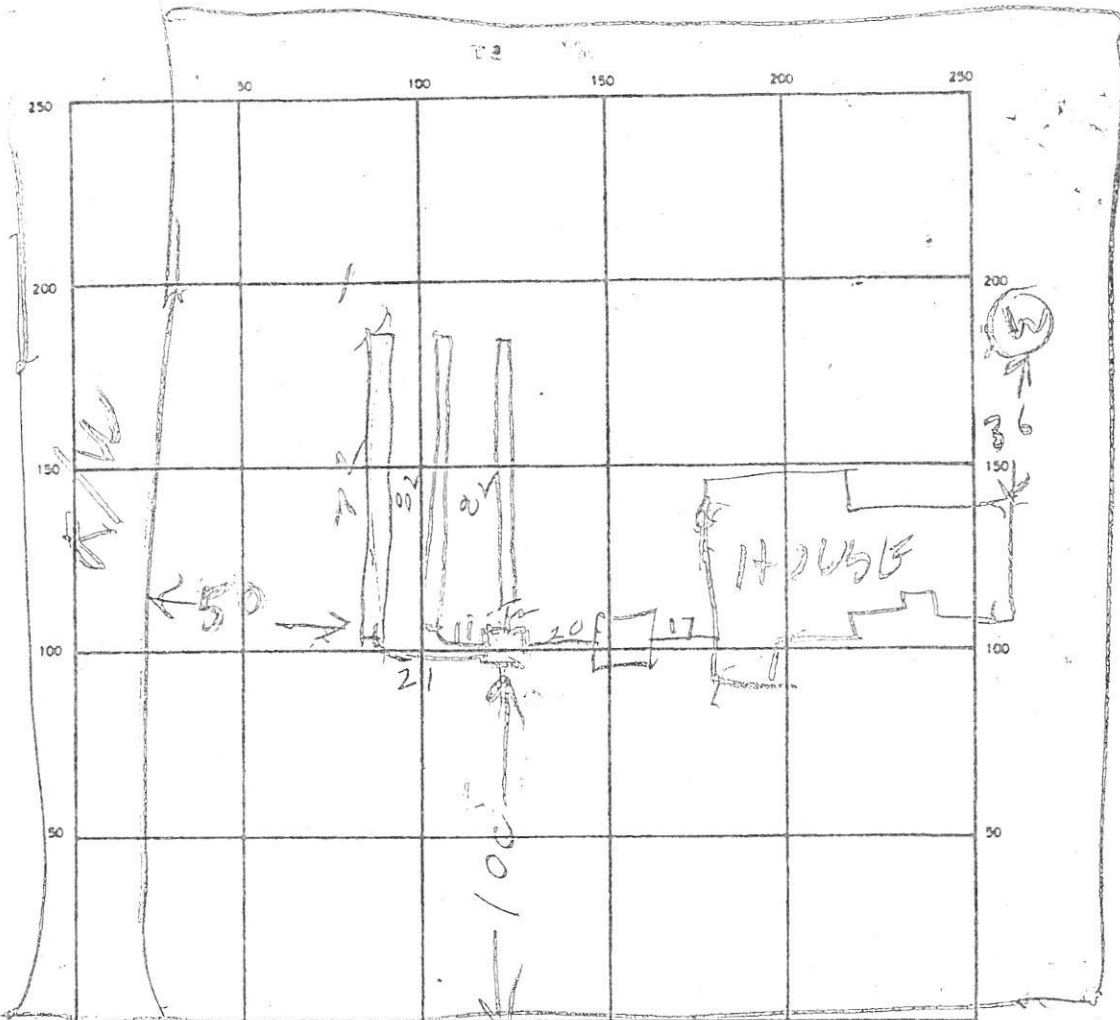
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA OR PVC OR ABS ACCEPTED IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

A 30055



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
 ← TO RILLY QUAMBER R/W

SEPTIC TANK LEVEL 1500 CLEANOUTS ST OK

DISTRIBUTION BOX LEVEL OK

DRAIN FIELD/TILE FIELD DEPTH 4-5 FT TRENCH WIDTH 3 FT INLET DEPTH 24-3 FT

EFFECTIVE GRAVEL DEPTH 3 1/2 FT TOTAL LENGTH 76 8 x 8 2 74 0'

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 720 SQ FT

DRYWELL INSIDE DIAMETER _____ FT EFFECTIVE DEPTH BELOW INLET _____ FT

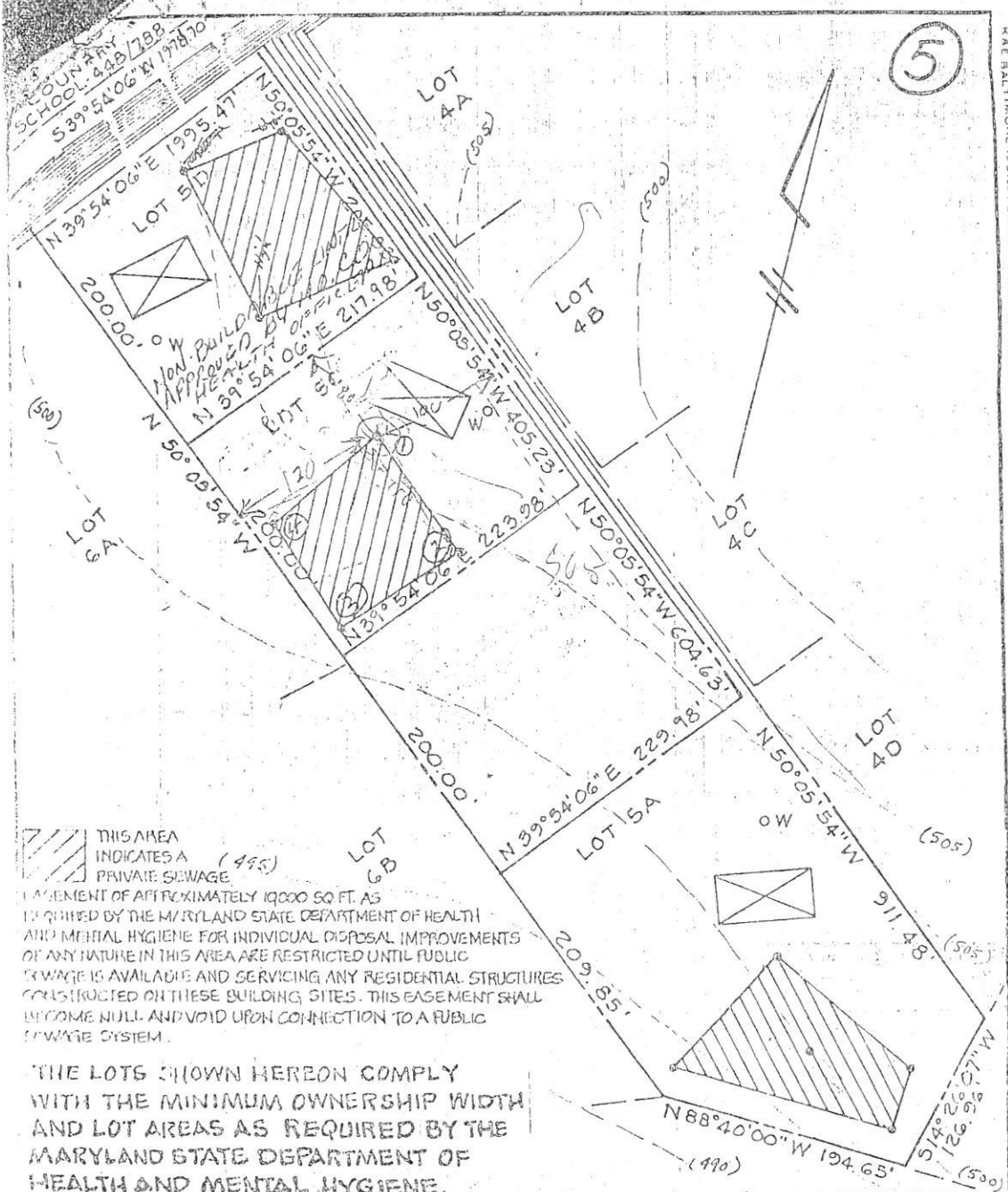
ABSORBENT AREA _____ SQ FT

REMARKS _____

DATE SYSTEM APPROVED 8/8/90

INSPECTOR Raymond Hodges

5



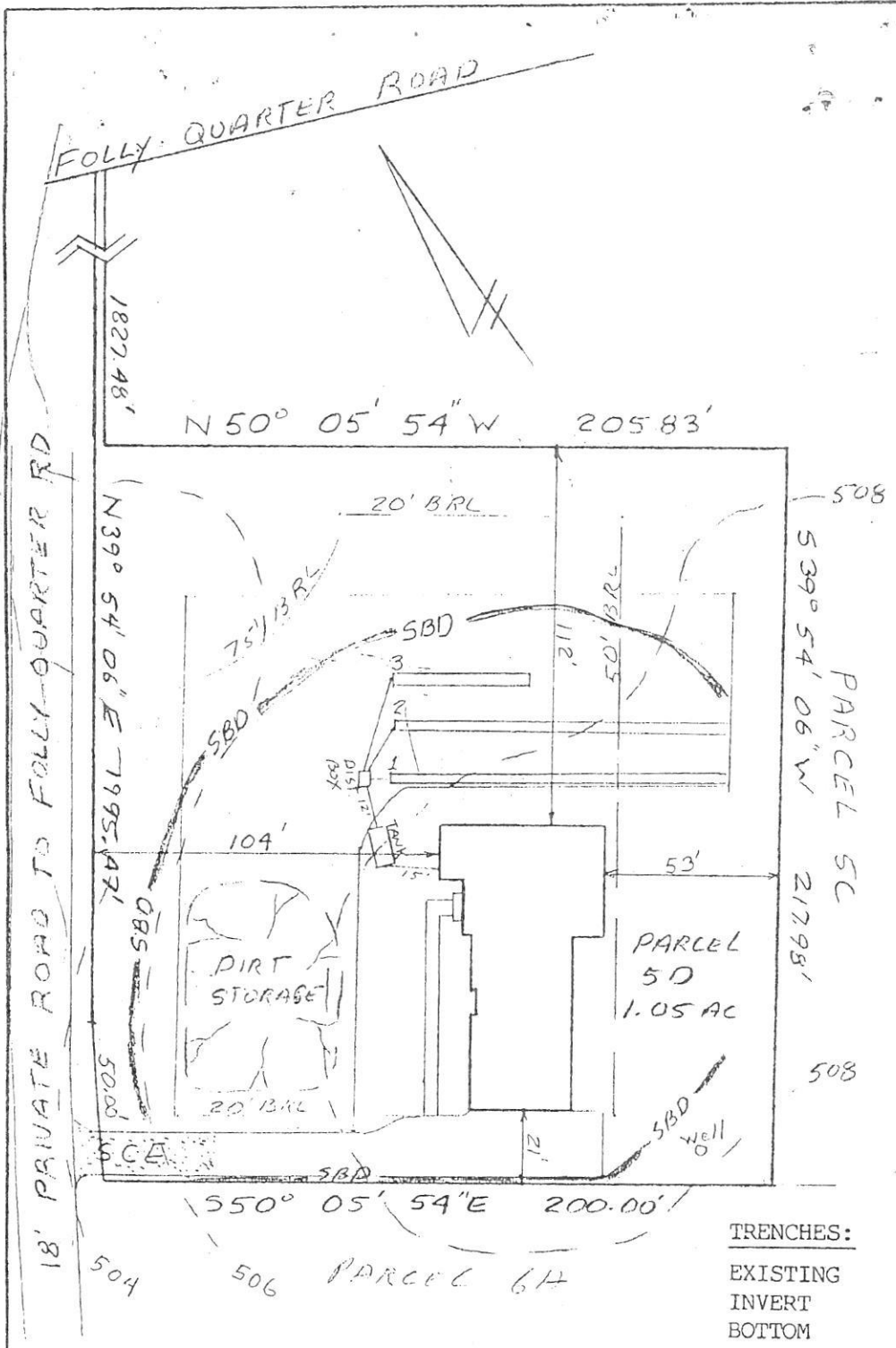
THIS AREA INDICATES A PRIVATE SEWAGE EASEMENT OF APPROXIMATELY 19000 SQ. FT. AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF HEALTH AND MENTAL HYGIENE FOR INDIVIDUAL DISPOSAL IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWAGE IS AVAILABLE AND SERVICING ANY RESIDENTIAL STRUCTURES CONSTRUCTED ON THESE BUILDING SITES. THIS EASEMENT SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWAGE SYSTEM.

THE LOTS SHOWN HEREON COMPLY WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREAS AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF HEALTH AND MENTAL HYGIENE.

NOTE: PERCOLATION TEST HOLES SHOWN HEREON HAVE BEEN FIELD LOCATED.

APPROVED: FOR PRIVATE WATER AND PRIVATE SEWAGE SYSTEMS.
 HOWARD COUNTY HEALTH DEPARTMENT
J. W. [Signature] 1-15-79
 COUNTY HEALTH OFFICER DATE

| | | | |
|---|----------------------|------------------------------------|---------------------|
| TITLE PERCOLATION TEST PLAT | | | |
| PROJECT LOT 5A, 5C & 5D GLENELG MANOR - SECTION TWO | | | |
| LOCATION 5TH ELECTION DISTRICT HOWARD COUNTY, MD. | | | |
| DATE: 6/27/77 | DESIGN BY: W.H.N. | DRAWN BY: W.H.N. | CHECKED BY: D.R. |
| SCALE: 1" = 100' | JOB NO.: 7778 | DRAWING NO.: 1 OF 1 | |
| boender associates | | engineers surveyors planners | |
| BALTIMORE 301-469-7777 • SALISBURY 301-749-1286 | | | |



HOUSE:

| | |
|-------------|--------|
| FIRST FLOOR | 510.5 |
| BASEMENT | 501.5 |
| INVERT | 506.39 |

SEPTIC TANK:

| | |
|----------------|--------|
| EXISTING GRADE | 508.0 |
| PROPOSED GRADE | 508.0 |
| INVERT IN | 506.08 |
| INVERT OUT | 505.83 |

DISTRIBUTION BOX:

| | |
|----------------|-------|
| EXISTING GRADE | 507.9 |
| INVERT IN | 505.7 |
| INVERT OUT | 505.6 |

TRENCHES:

| | #1 | #2 | #3 |
|----------|-------|-------|-------|
| EXISTING | 508.0 | 508.0 | 507.5 |
| INVERT | 505.5 | 505.5 | 505.0 |
| BOTTOM | 504.0 | 504.0 | 503.5 |
| STONE | 1.5 | 1.5 | 1.5 |
| WIDTH | 3 | 3 | 3 |
| LENGHT | 100 | 100 | 40 |

I certify the above measurements and elevations to be actual and true for this property.

J. Carl Hudgins
 J. Carl Hudgins

7/27/89
 PLANS UIC
 BUT SYSTEM FIRST

7/27/89 OK TO SIGN TALKED TO OLEN KETTERMAN HE SAID HOUSE WILL BE INSTALLED PER PLANS & WELL LOCATED PER PLANS ALREADY

PLOT PLAN
 PARCEL 5D
 GLENELG MANOR
 SECTION TWO
 TAX MAP 22 PARCEL 343
 5th ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND
 SCALE 1"=50' DATE 6/6/89

INGRESS & EGRESS EASEMENT
.. 1135, F. 459 (FIRST EASEMENT)

WAY

N39°54'06"E

S39°54'06"W

205.83'

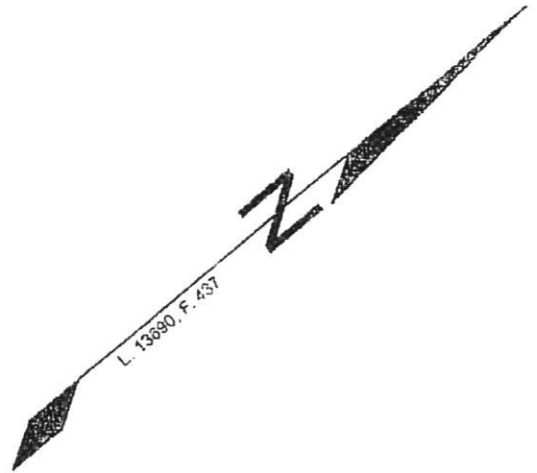
S50°05'54"E

N/F PETER A DECESARE &
DOROTHY STODT DECESARE
L. 2187, F. 692
PARCEL 478
LOT 4-A

INGRESS & EGRESS
EASEMENT
L. 1135, F. 459
(THIRD EASEMENT)

N/F ROBERT A. PHELPS
& KATHLEEN M. PHELPS
L. 3077, F. 201
PARCEL 479
LOT 4-B

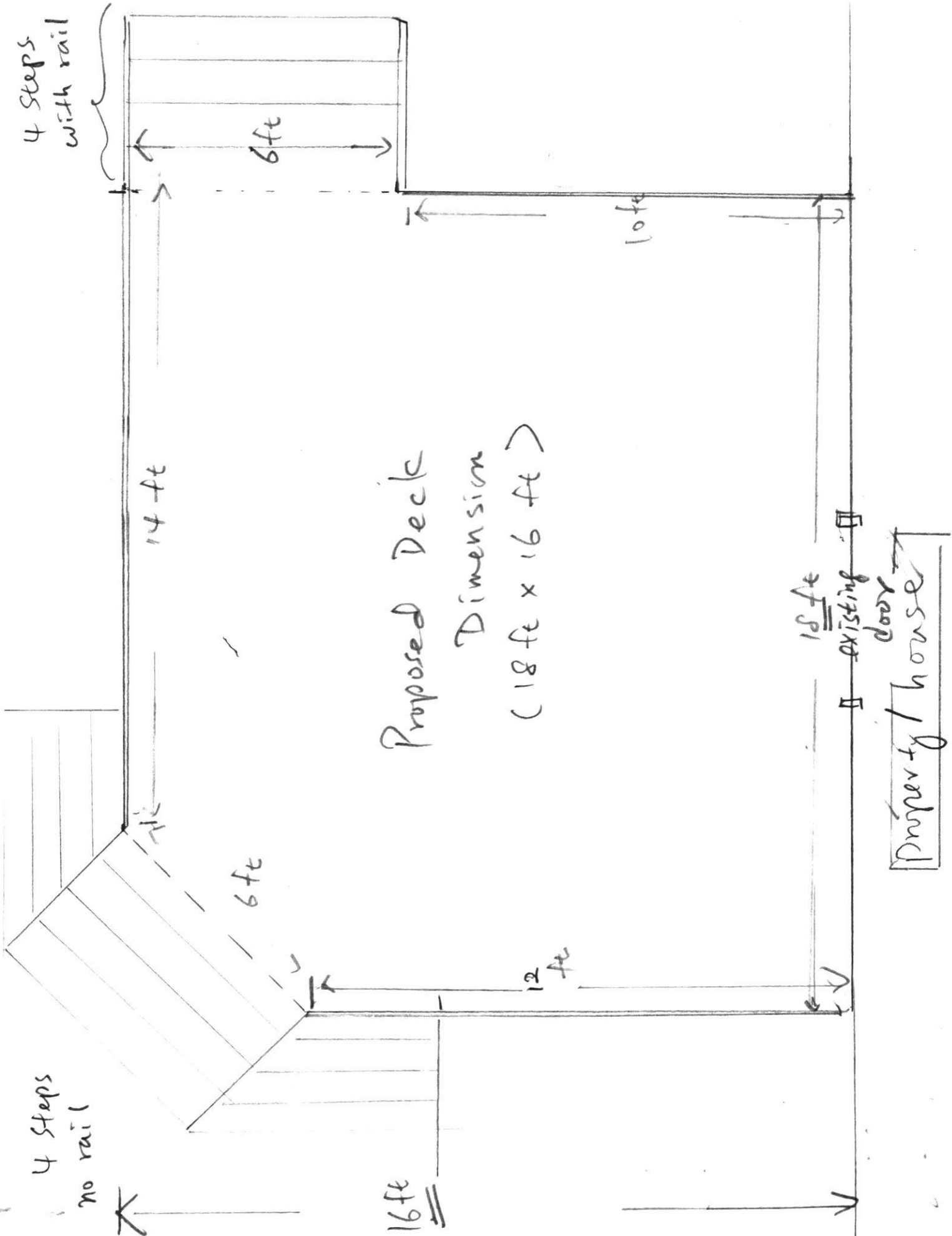
L. 13680, F. 437

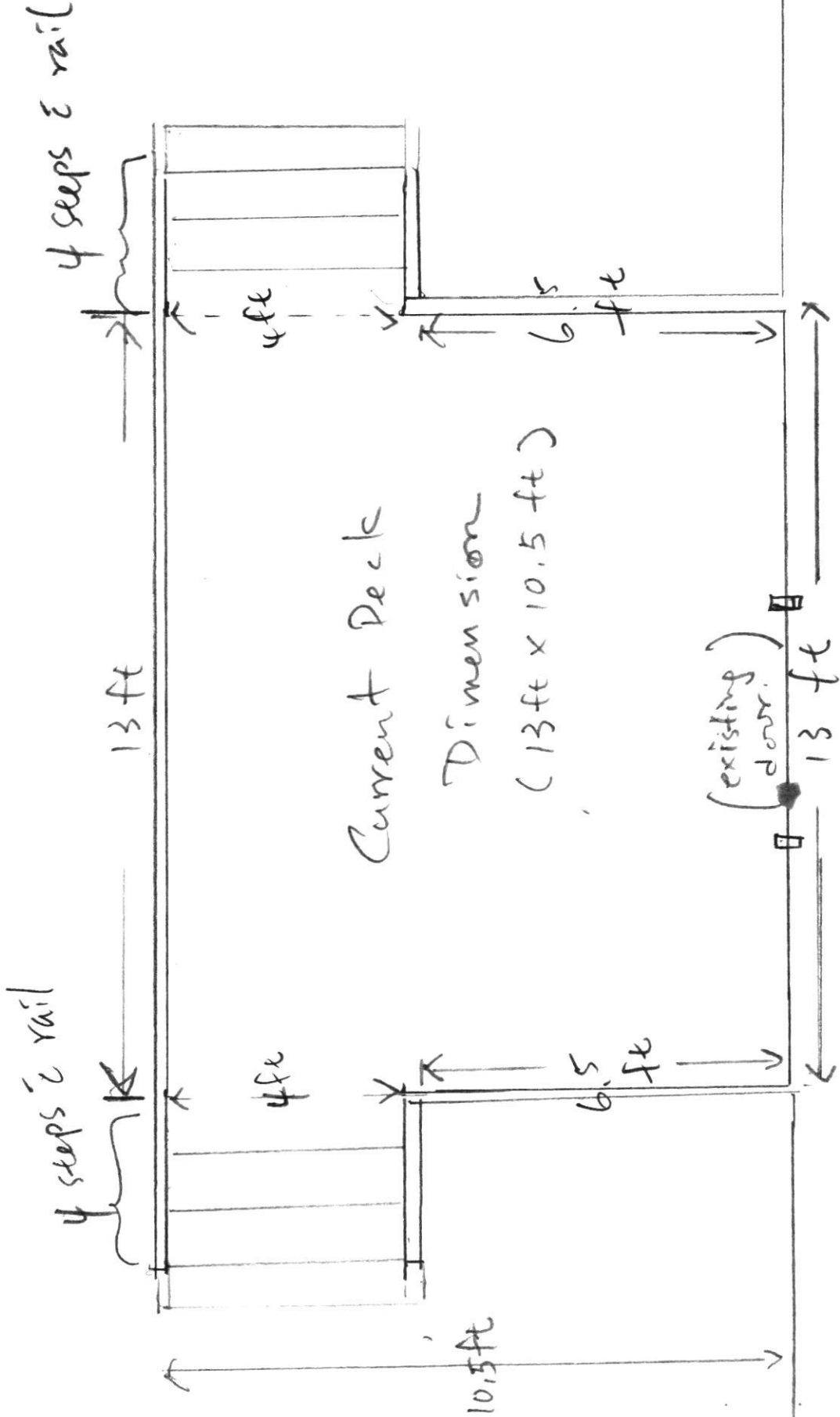


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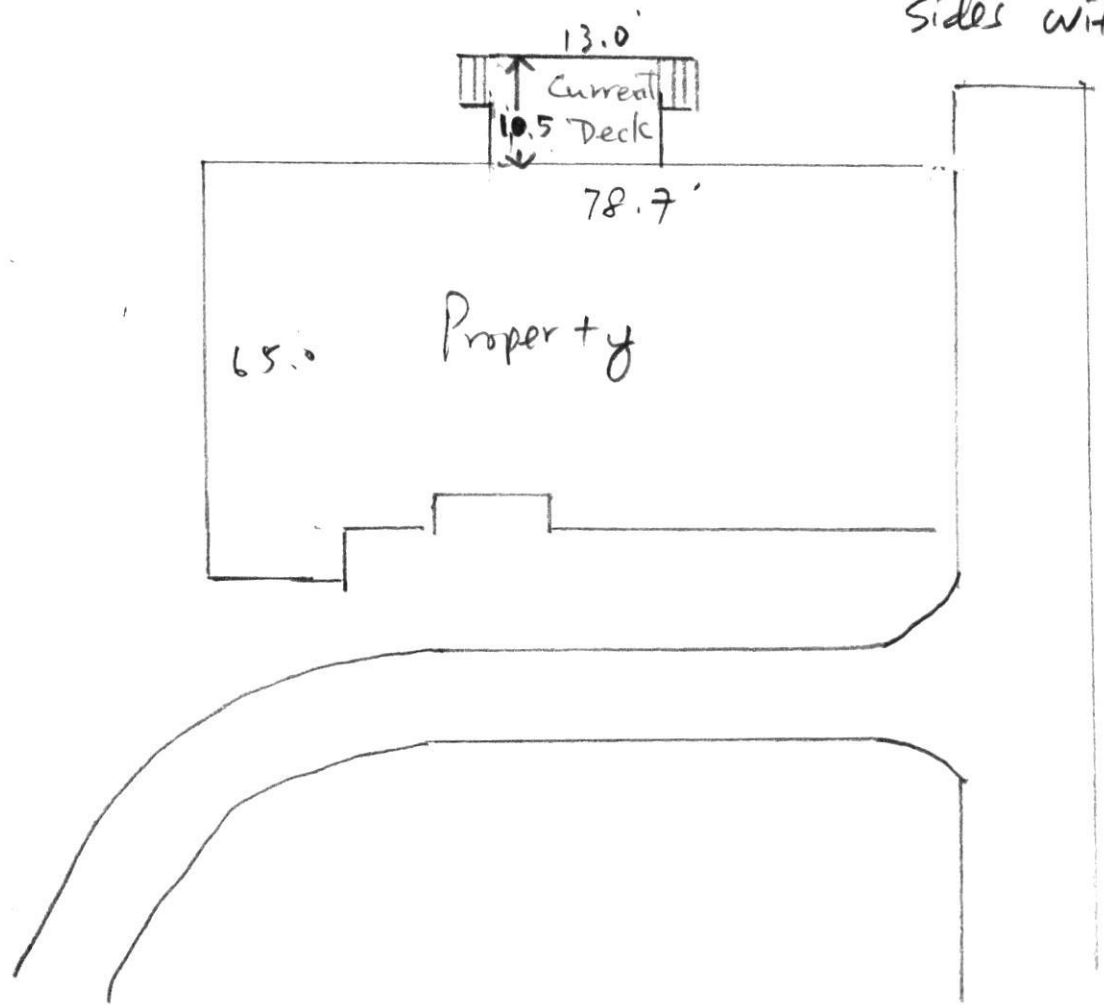


Property/House -

Property line

Current deck
(13.0' x 10.5')
4 stairs on both
sides with rail

Property
line



Original Septic and Well
permit showing the
deck is not located
in the draining field,
septic system, or
well.