

Record Detail \* (This section is required.)

Permit Type: Building/Residential/Misc/Tanks  
 Permit Number: B24000533  
 Opened Date: 02/20/2024  
 Description of Work: SFD//INSTALL (1) ONE 1000 GALLON UNDERGROUND PROPANE TANK

[check spelling](#)

Address \* (This section is required.)

Search Reset Clear Get Parcel & Owner

Street #: 6626 Street Name: CORINA Street Type: CT  
 Unit Type: --Select-- Unit #: X Coordinate: -76.88923 Y Coordinate: 39.19038  
 City: COLUMBIA State: MD Zip Code: 21044 Primary: Yes

2/21/24 - Wrong address on permit  
 (this permit info was changed)  
 it was initially listed under  
 7614 Sweet Hours Way - **PK**

2/21/24 - emailed applicant regarding  
 the discrepancy **PK**

3/1/24 - email to request a  
 new site plan - initial location  
 is right on top  
 of RV septic  
 line **PK**

Parcel \* (This section is required.)

Search Reset Clear Get Address & Owner

GIS ID: 845538 Parcel: 62 Parcel Area: 9911 Land Value: 182100 Improved Value: 518600 Exemption Value: 336500 Plan Area: COLUMB  
 Legal Description: LOT 5 3.009 A [ 6626 CORINA CT ] LA ISLA

[check spelling](#)

Block: 424 Census Tract: 606803 Council Dist: 3 Inspection Dist: Supervisor Dist: Map #: DAP Zone:  
 Plan Area: State Tax Id: 1416169463 Subdivision Name:  
 Section: Area: Tax Map: 42  
 Grid: Zoning District: NT ADC Map: 5053-B4  
 SDP No.: Final Plan No.: WP File No.:  
 Record Plat No.: 5049 WS Contract No.: FDP No.: Primary: Yes  
 Owner Occupied: Year Built: 1985 Historic District: No  
 Historic District Registry No.: Stat Area: 6-14 Flood Plain: No  
 Building No:

3/1/24 - Approved -  
 rec'd revised plan  
**PK**

Owner \* (This section is required.)

Search Reset Clear

Name: MOSMAN CATHY L TR  
 Address Line 1:

Address Line 2

Address Line 3

Mail City Mail State Mail Zip Code

Phone Primary Yes

E-mail

Cell Number Fax Number

Professionals (This section is not required.)

License # \* 68408 Business Name HJ POIST License Type \* Propane Gs Primary No Address Line 1 360 MAIN ST Address Line 2 City LAUREN State MD ZIP Code 20707 Phone 1 3017253232 Phone 2 Fax E-mail JEFF@HJPOIST.COM

Applicant (This section is not required.)

Search As Owner As Lic. Prof As Contact

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

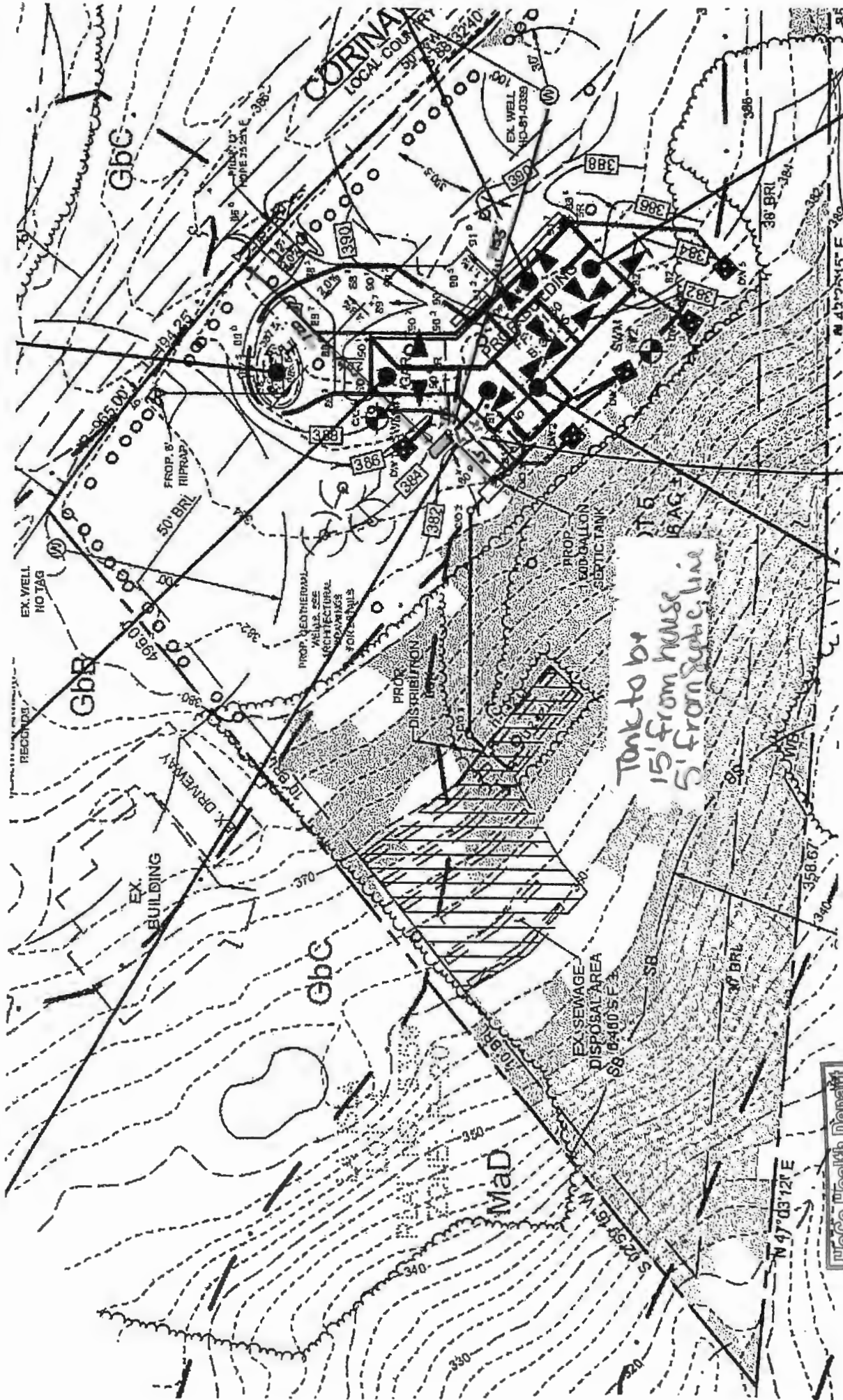
Addtl Info

Est Construction Cost \* 800 Housing Units \* 0 Number of Buildings \* 0 Public Owned No Construction Type 329 - Structures Other Than Buildings (Retaining Walls/Tents)

TANK INFORMATION

RESIDENTIAL TANK INFORMATION

Capital Project-No Fee \* Capital Project Number Fee Exempt \* Roadside Tree Project Permit \* Roadside Tree Permit # Existing Use \* SFD Number of Tanks Installed \* 1 Number of Tanks Removed \* 0 Water Supply Sewage Disposal Expiration Date Relocate Existing Tank \*



1" = 60'

Tank location

Approved for LP tank  
 B24000533  
 3/1/24 *KA*

Tank to be  
 15' from house  
 5' from septic line

Wedge Corina Ct

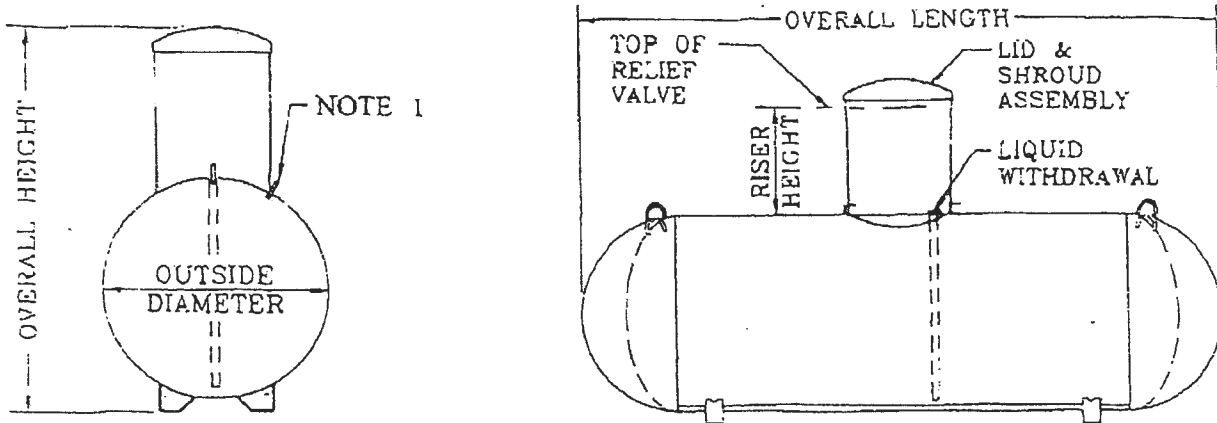
HOCO Health Depart  
 MAR 01 2024  
 Environmental Health





# TRINITY INDUSTRIES, INC.

## Underground Vesse



### General Specifications

Conforms to the latest edition and addenda of the ASME, Section VIII, div.1 code for Pressure Vessels. Complies with NFPA 58 and is listed by Underwriters Laboratories, Inc.

Rated at 250 psig from -20°F. to 125°F. All tanks may be evacuated to a full (14.7 psi) vacuum.

Vessel Finish: Coated with epoxy red powder.

Applicable federal, state or local regulations may contain specific requirements for protective coatings and cathodic protection. The purchaser and installer are responsible for compliance with such federal, state or local regulations.

All vessel dimensions are approximate

WATER CAPACITY	OUTSIDE DIAMETER	HEAD TYPE	OVERALL LENGTH	OVERALL HEIGHT		WEIGHT	QUANTITY IN FULL LOAD
				14" Riser Height	28" Riser Height		
120 wg 454.2 L	24" 609.6 mm	Ellip	5' - 5 7/8" 1671.6 mm	3' - 9 7/8" 1165.2 mm	4' - 8 3/8" 1431.9 mm	252 lbs. 114.3 kg	63
250 wg 946.3 L	31.5" 800.1 mm	Hemi	7' - 2 1/2" 2197.1 mm	4' - 5 3/8" 1355.7 mm	5' - 3 3/8" 1609.7 mm	472 lbs. 214.1 kg	42
320 wg 1211.2 L	31.5" 800.1 mm	Hemi	8' - 11 3/4" 2736.9 mm	4' - 5 3/8" 1355.7 mm	5' - 3 3/8" 1609.7 mm	588 lbs. 266.7 kg	35
500 wg 1892.5 L	37.42" 950.5 mm	Hemi	9' - 10" 2997.2 mm	4' - 11 3/8" 1506.6 mm	5' - 9 7/8" 1773.2 mm	921 lbs. 417.8 kg	25
1000 wg 3785.0 L	40.96" 1040.4 mm	Hemi	15' - 10 7/8" 4846.6 mm	5' - 2 7/8" 1597.0 mm	6' - 1 3/8" 1863.7 mm	1731 lbs. 785.2 kg	15
2000 wg 3785.6 L	46.614" 1183.9 mm	Ellip	23' - 9 3/8" 7248.5 mm	5' - 8 13/16" 1747.8 mm	6' - 7 5/16" 2014.5 mm	3685 lbs. 1671.4 kg	8

\*\*\*

\*\*\*

## Rappaport, Ryan

---

**From:** Rappaport, Ryan  
**Sent:** Friday, March 1, 2024 8:16 AM  
**To:** Michelle Clancy  
**Subject:** RE: B24000533 - 7614 Sweet Hours Way

Good Morning, I'm so sorry for the huge delay, life was not cooperating with me. I'm in the process of looking for the file to send you the asbuilt for the septic system. But I can tell you that after taking a look at it, I did the inspections on the install of this septic system. There is a septic line for the RV that runs up that side of the house. The line is right below where they want to put the lp tank. Please find a new location and resubmit a revised plan. Just let me know when it's uploaded to DILP accel. If I can find the missing file I'll send you a larger scaled plan.

Ryan

**From:** Michelle Clancy <michelle@appliedandapproved.com>  
**Sent:** Wednesday, February 21, 2024 5:16 PM  
**To:** Rappaport, Ryan <RRappaport@howardcountymd.gov>  
**Subject:** Re: B24000533 - 7614 Sweet Hours Way

[Note: This email originated from outside of the organization. Please only click on links or attachments if you know the sender.]

Okie dokie - the permit address was corrected in the system :-)

Michelle Clancy  
Applied & Approved Permit Service  
[appliedandapproved.com](http://appliedandapproved.com)  
443-610-7514

On Feb 21, 2024, at 9:42 AM, Michelle Clancy <[michelle@appliedandapproved.com](mailto:michelle@appliedandapproved.com)> wrote:

Geeze - thank you for catching that - I have a feeling he gave me the mailing address...I will figure out and have the address corrected for permit :-)

Michelle Clancy  
Applied & Approved Permit Service  
[appliedandapproved.com](http://appliedandapproved.com)  
443-610-7514

On Feb 21, 2024, at 9:40 AM, Rappaport, Ryan <[RRappaport@howardcountymd.gov](mailto:RRappaport@howardcountymd.gov)> wrote:

Hello, The site plan attached to this record is for a property on Corina Ct. Also this area is in the public water and sewer area so it may no need review by the HD.

*Ryan Rappaport, LEHS*  
Bureau of Environmental Health  
Howard County Health Department  
8930 Stanford Blvd.  
Columbia, MD. 21045  
Phone 410-313-1781  
Fax 410-313-2648  
[www.co.ho.md.us](http://www.co.ho.md.us)

<image001.png>

DISCLAIMER: This e-mail is intended only for the individual to whom it is addressed. It may be used only in accordance with applicable laws. If you are not the intended recipient, you are strictly prohibited from reading, disseminating, distributing, or copying this message. If you received this e-mail by mistake, please notify the sender and destroy this e-mail.

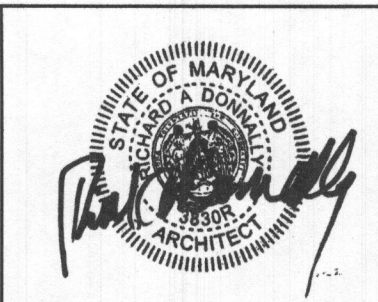
PERMIT NUMBER: B 23001969

DATE ACCEPTED:

DILP 2023 JUN 2 PM 2:30

<b>RESIDENTIAL BUILDING PERMIT APPLICATION</b>					
HOWARD COUNTY DEPARTMENT OF INSPECTIONS, LICENSES, AND PERMITS 3430 COURT HOUSE DRIVE, ELLICOTT CITY, MD 21043 - PHONE: (410) 313-2455 OPTION #4 <a href="http://www.howardcountymd.gov">www.howardcountymd.gov</a>					
<b>BUILDING SITE ADDRESS</b> <small>REQUIRED</small>					
Street Address: <b>6626 Corlina Court</b>				Unit:	
City: <b>Columbia</b>		State: <b>MD</b>		Zip Code: <b>21044</b>	
Subdivision/Village/Complex Name: <b>La Isla</b>				SDP/WP/BA #: <b>SDP-23-008</b>	
Lot: <b>5</b>	Tax Map: <b>35</b>	Parcel: <b>113</b>	Grading Permt #:		
<b>DESCRIPTION OF WORK</b> <small>REQUIRED</small>					
Existing Use: <b>Vacant Land</b>		Proposed Use: <b>Construction of new SFD</b>		Estimated Cost: <b>\$1,500,000.00</b>	
Trade Work to Be Completed (Separate Permits Required): <input checked="" type="checkbox"/> Mechanical (HVACR) <input checked="" type="checkbox"/> Electrical <input checked="" type="checkbox"/> Plumbing <input type="checkbox"/> None					
<b>SFD / Custom / 1 &amp; 1/2 Story, Full Basement - Partly Finished, 15 R, 3 FB, 1 HB, 2 FP, Front Load Garage, 3 BR, Open Porch, Screened in Porch and Deck Areas. Energy Method - Prescriptive. Revised Plans added to show Precast Concrete Wall Option</b>					
<b>PROPERTY OWNER INFORMATION</b> <small>REQUIRED</small>					
Owner(s) Name(s) (As it appears on tax records): <b>Mike and Cathy Mosman</b>				Primary Residence: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Owner's Street Address: <b>7614 Sweet Hour Way</b>					
City: <b>Columbia</b>		State: <b>MD</b>		Zip Code: <b>21046</b>	
Phone: <b>(410) 338-0803</b>		Email: <b>mikemosman@aol.com</b>			
<b>APPLICANT NAME</b> <small>REQUIRED - INDIVIDUAL WHO SIGNS THIS APPLICATION</small>					
Business Name: <b>Crosen Homes LLC</b>			Contact Name: <b>Mike Crosen</b>		
Street Address: <b>3785 Shady Lane</b>					
City: <b>Glenwood</b>		State: <b>MD</b>		Zip Code: <b>21738</b>	
Phone: <b>(443) 324-4775</b>		Email: <b>mike@crosenhomes.com</b>			
<b>CONTRACTOR INFORMATION</b> <small>REQUIRED</small>					
Business Name: <b>Crosen Homes LLC</b>					
Licensee's Name: <b>Mike Crosen</b>			License #: <b>7683</b>		
Street Address: <b>3785 Shady Lane</b>					
City: <b>Glenwood</b>		State: <b>MD</b>		Zip Code: <b>21738</b>	
Phone: <b>(443) 324-4775</b>		Email: <b>mike@crosenhomes.com</b>			
<b>ARCHITECT/ENGINEER INFORMATION</b> <small>INDIVIDUAL WHO SIGNED PLANS, IF APPLICABLE</small>					
Business Name: <b>RDA Architects LLC</b>			Name: <b>Richard Donnally</b>		
Street Address: <b>11606A Shipwreck Road</b>					
City: <b>Ocean City</b>		State: <b>MD</b>		Zip Code: <b>21842</b>	
Phone: <b>(240) 372-5944</b>		Email: <b>rdonnally788@gmail.com</b>			
<b>BUILDING CHARACTERISTICS</b> <small>REQUIRED</small>					
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 type="checkbox"/> Electric <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane <input checked="" 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 checked="" type="checkbox"/> NFPA 13D <input type="checkbox"/> None			Fire Alarm System: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Voice Evac		
<b>ADDITIONAL RESIDENTIAL INFORMATION</b> <small>(PLEASE SELECT, COMPLETE ALL THAT APPLY)</small>					
Model Name & Options: <b>Mosman Residence</b>					
# of Bedrooms (SF): <b>3</b>		# of efficiency units (MP*):		# of 1 BR (MP*):	
# of 2 BR (MP*):		# of 3 BR (MP*):		# of 1/2 BR (MP*):	
# Rooms: <b>15</b>		# Full Baths: <b>3</b>		# Half Baths: <b>1</b>	
# Fireplaces: <b>2</b>		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 & Pler <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/> Finished Basement: <input type="checkbox"/> Full or <input checked="" type="checkbox"/> Partial					
1 <sup>st</sup> Fl Width: <b>88</b>		1 <sup>st</sup> Fl Depth: <b>40</b>		2 <sup>nd</sup> Fl Width: <b>0</b>	
2 <sup>nd</sup> Fl Depth: <b>0</b>		Bsmt Width: <b>88</b>		Bsmt Depth: <b>40</b>	
Energy Method: <input checked="" type="checkbox"/> Prescriptive <input type="checkbox"/> Performance <input type="checkbox"/> UA Alternative <input type="checkbox"/> ERI			Gross Area: sq ft		
Occupable Area: sq ft					
<b>AGREEMENT/ DISCALIMER</b> <small>REQUIRED</small>					
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.					
<i>Michael J Mosman</i>				<b>3 Mar 2023</b>	
APPLICANT'S ORIGINAL SIGNATURE				DATE SIGNED	
<b>FOR OFFICE USE ONLY</b>					
<small>FEES PAYABLE TO: DIRECTOR OF FINANCE OF HOWARD COUNTY</small>					
<b>AGENCIES REQUIRED/APPROVALS:</b>					
<input checked="" type="checkbox"/> PR	<input checked="" type="checkbox"/> DPZ	<input type="checkbox"/> DED	<input checked="" type="checkbox"/> Health	<input type="checkbox"/> SHA	<input checked="" type="checkbox"/> CID
SUBMITTAL FEES: <b>150</b>		PAYMENT: <b>1103</b>		ACCEPTED BY:	





Professional Certification:  
I hereby certify that these documents  
were prepared or approved by me,  
and that I am a duly licensed  
Professional Architect under the laws of  
The State of Maryland. License number 3830.  
Expiration Date 06-27-2024

**RDA ARCHITECTS, LLC**  
RICHARD DONNALLY, RA, LEED AP  
11606A SHIPWRECK ROAD  
OCEAN CITY, MD 21842  
PH: 240-372-5944

**THE MOSMAN RESIDENCE**  
MR. & MRS. Michael Mosman

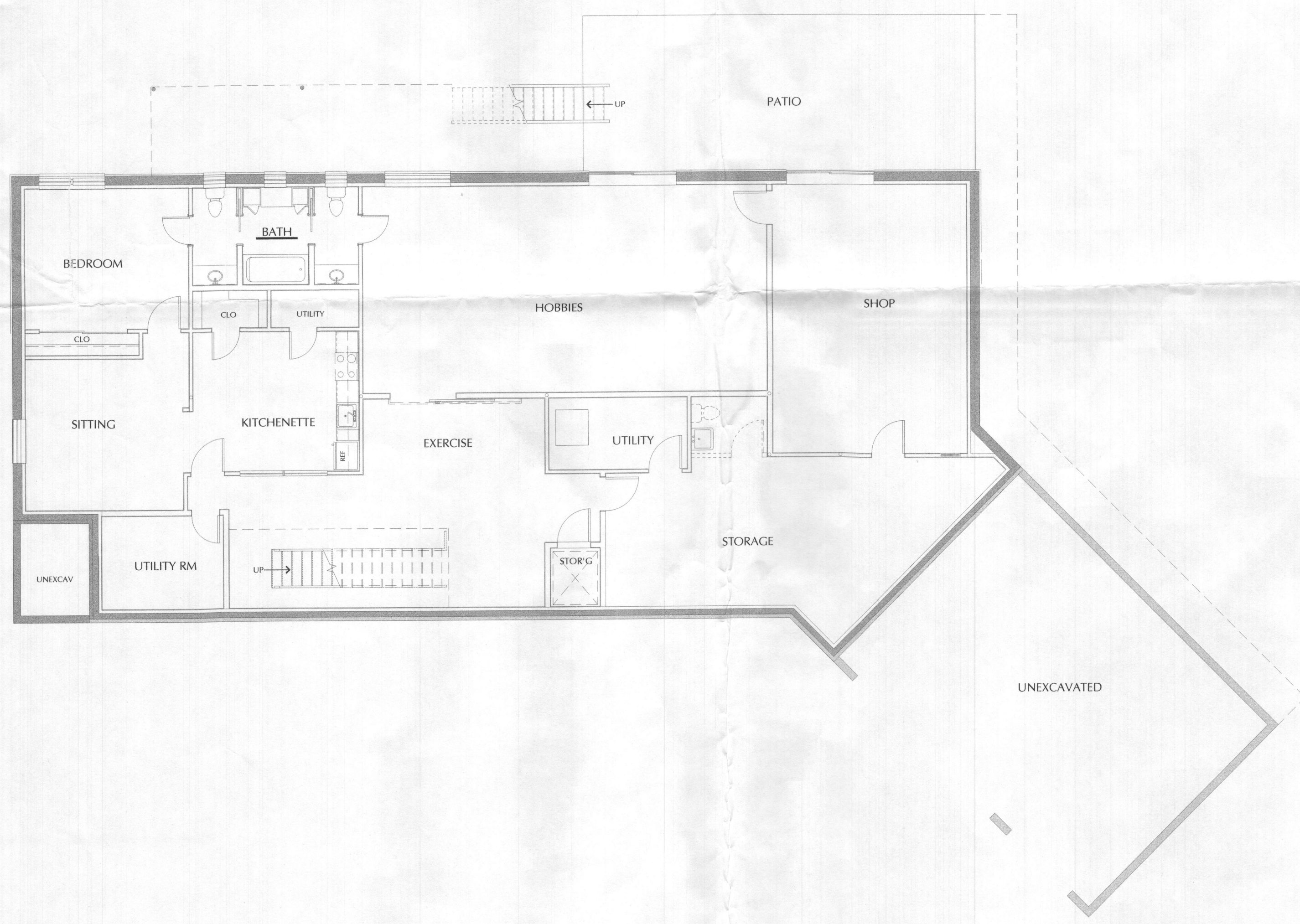
**DIAGRAM PLAN**

REVISIONS	
1.	4/15/22 PRICING & REVIEW
2.	6/28/22 PERMIT
3.	9/15/22 WINDOWS
4.	9/21/22 PORCH-DECK
5.	2/12/23 OWNER CHG

ISSUED:  
JULY 7, 2022

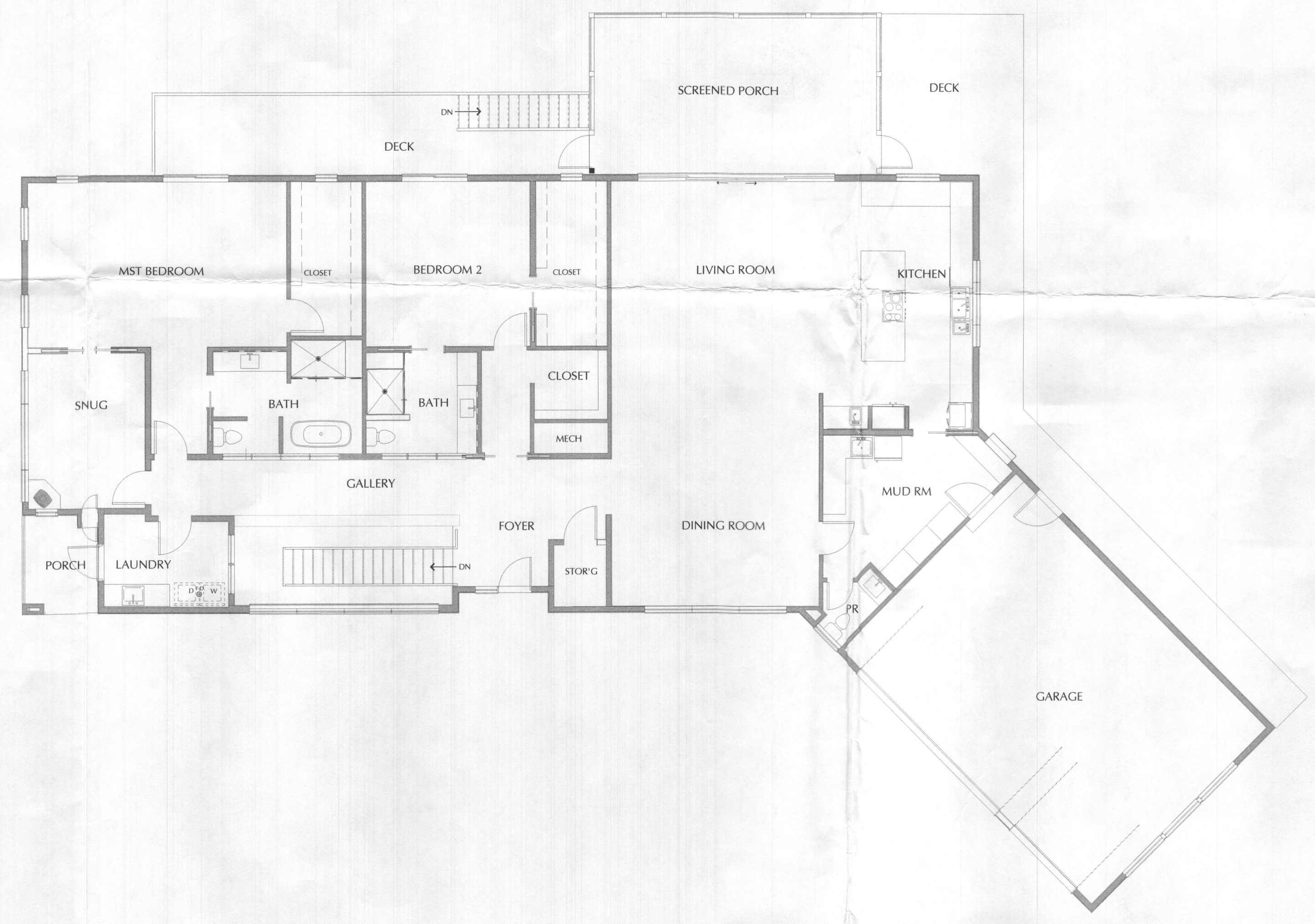
JOB NUMBER	
DRAWN	CHECKED

DRAWING  
**A-1.04**



**LOWER FLOOR DIAGRAM**

SCALE 1/8" = 1'-0" 3,233 sf OCC, 4,341 GSF



**UPPER FLOOR DIAGRAM**

SCALE 1/8" = 1'-0" 3,270 sf OCC, 392 sf S.P., 736 sf GAR, 4,217 GSF