

PERMIT NUMBER: B

21001723
~~21001541~~

DATE ACCEPTED:

RECEIVED



RESIDENTIAL BUILDING PERMIT APPLICATION

HOWARD COUNTY DEPARTMENT OF INSPECTIONS, LICENSES, AND PERMITS & REGISTRARS
3430 COURT HOUSE DRIVE, ELLICOTT CITY, MD 21043 - PHONE: (410) 313-2455 OPTION #4
www.howardcountymd.gov

BUILDING SITE ADDRESS REQUIRED

Street Address: 12401 Benson Branch Rd		Unit:
City: Ellicott City	State: MD	Zip Code: 21042
Subdivision/Village/Complex Name:		SDP/WP/BA #:
Lot:	Tax Map:	Parcel:
		Grading Permit #:

DESCRIPTION OF WORK REQUIRED

Existing Use: SFD	Proposed Use: SFD	Estimated Cost: \$ 50,000.
Trade Work to Be Completed (Separate Permits Required): <input type="checkbox"/> Mechanical (HVACR) <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> None		
To add a patio to existing home, build deck of attached garage, and build out door (pavilion) next to pool. Deck 15x22 - Pavilion 18x24 size of deck + pavilion permit		

PROPERTY OWNER INFORMATION REQUIRED

Owner(s) Name(s) (As it appears on tax records): Chad Nelson	Primary Residence: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Owner's Street Address: 12401 Benson Branch Rd	
City: Ellicott City	State: MD
Phone: 413 419 1882	Email:
	Zip Code: 21042

APPLICANT NAME REQUIRED - INDIVIDUAL WHO SIGNS THIS APPLICATION

Business Name: Cumberland Dev Custom Homes	Contact Name: Curtis Cumberland
Street Address: 4132 Salem Bottom Rd.	
City: Westminster	State: MD
Phone: 301 252-1122	Email: Cumberlanddevcustomhomes@gmail.com
	Zip Code: 21557

CONTRACTOR INFORMATION REQUIRED

Business Name: Cumberland Dev Custom Homes	License #: 7714, MHIC 134655
Licensee's Name:	
Street Address:	
City:	State:
Phone:	Email:
	Zip Code:

ARCHITECT/ENGINEER INFORMATION INDIVIDUAL WHO SIGNED PLANS, IF APPLICABLE

Business Name: Carpworks	Name: Bill Ellis
Street Address: 332 West Pacific St.	
City: Frederick	State: MD
Phone: 301 695 9121	Email:
	Zip Code:

BUILDING CHARACTERISTICS REQUIRED

Primary Structure: <input 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 type="checkbox"/> No
Utilities: <input checked="" type="checkbox"/> Electric <input checked="" type="checkbox"/> Gas	Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private (Well)
Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane <input type="checkbox"/> Other:	Roadside Tree Project: <input 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 type="checkbox"/> None	Fire Alarm System: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Voice Evac

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: <input 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 type="checkbox"/> Finished Basement: <input type="checkbox"/> Full or <input type="checkbox"/> Partial				
1 st Fl Width:	1 st Fl Depth:	2 nd Fl Width:	2 nd Fl Depth:	Bsmt Width:
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:
sq ft				

AGREEMENT/ DISCALIMER REQUIRED

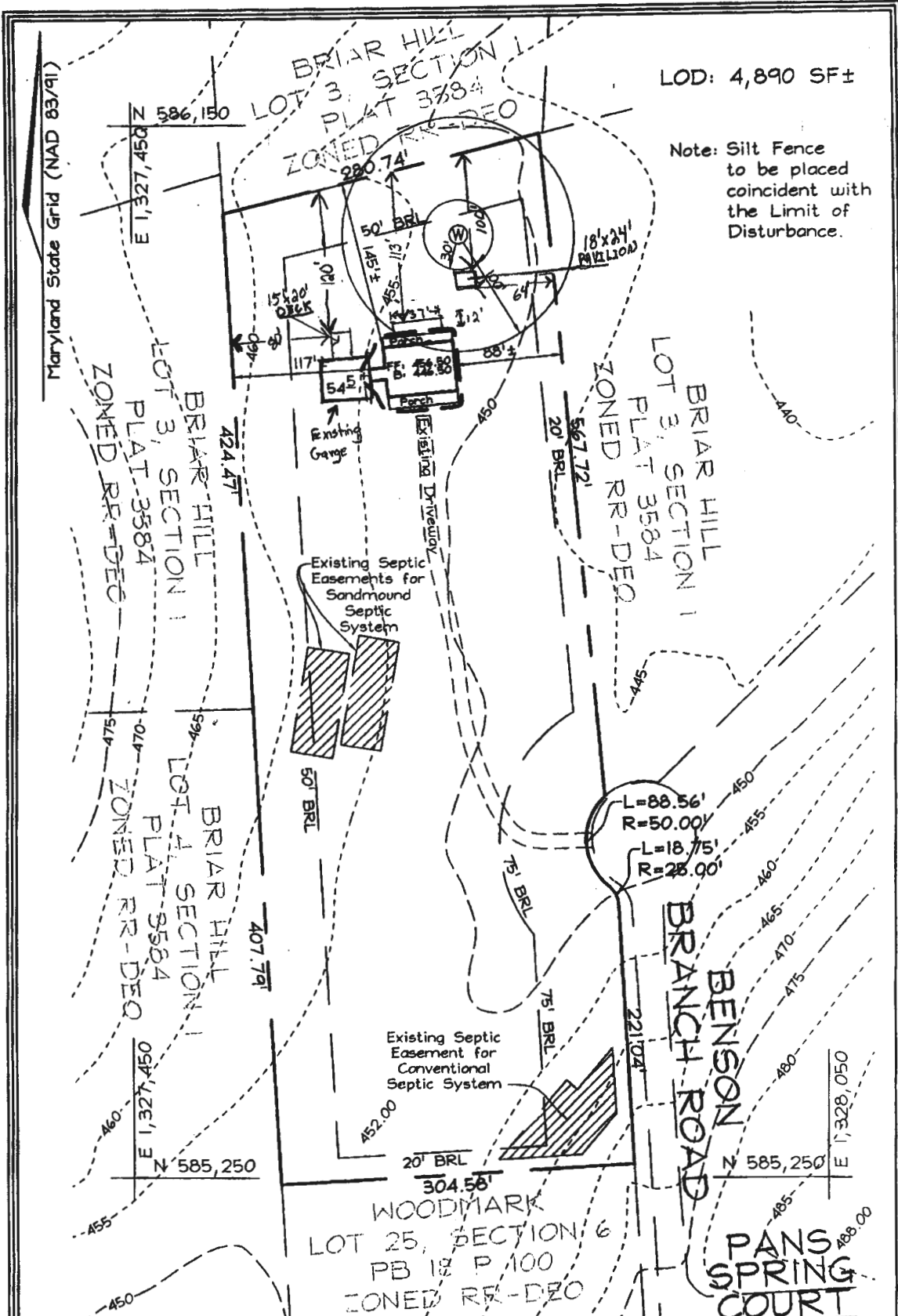
THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED 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.

Curtis Cumberland APPLICANT'S ORIGINAL SIGNATURE
4/21/21 DATE SIGNED

FOR OFFICE USE ONLY

CHECKS PAYABLE TO: DIRECTOR OF FINANCE OF HOWARD COUNTY

AGENCIES REQUIRED/APPROVALS:					
<input type="checkbox"/> BR	<input type="checkbox"/> DPZ	<input type="checkbox"/> DED	<input checked="" type="checkbox"/> Health	<input type="checkbox"/> SHA	<input type="checkbox"/> CID
SUBMITTAL FEES: 25		PAYMENT: 2534 wages paid		ACCEPTED BY: [Signature]	



LOD: 4,890 SF±

Note: Silt Fence to be placed coincident with the Limit of Disturbance.

DATE: February 20, 2006

PLOT PLAN
NELSON RESIDENCE
LOT 5

SCALE: 1"=100'

TAX MAP 22 GRIDS 6 & 12
 3RD ELECTION DISTRICT

PARCEL 520
 HOWARD COUNTY, MARYLAND

Name of Requestor: Cumberland Dev. Custom Homes
Street Address: 11606 Handboard Rd Union Bridge MD 21791
City, State, Zip: _____
Date: 1-24-22

Amendment, Permit # 21001723

Ms. Debbie Whalen
Division of Plan Review
Department of Inspections, Licenses and Permits
Howard County Government
3430 Court House Dr
Ellicott City, MD 21043

JAN 24 2022
LICENSES & PER
DIVISION

Dear Ms. Whalen:

I am requesting to amend Permit # 21001723 at
12401 Benson Branch Rd. Ellicott City MD 21042 to
(Site Address)

Finish space above existing garage.
Game room / Gym. 720 sq. ft.
NEW window, door and no stove

Enclosed:

- 1 Fee: _____
- 3 Plot Plans
- 3 Sets of Construction Drawings
- Other: _____

If there is anything we can do to assist you, please let me know.

Sincerely,

Name: Curtis Cumberland
Title: Owner

Phone and/or Email: 301 252-1122 Cumberlanddevcustomhomes@gmail.com

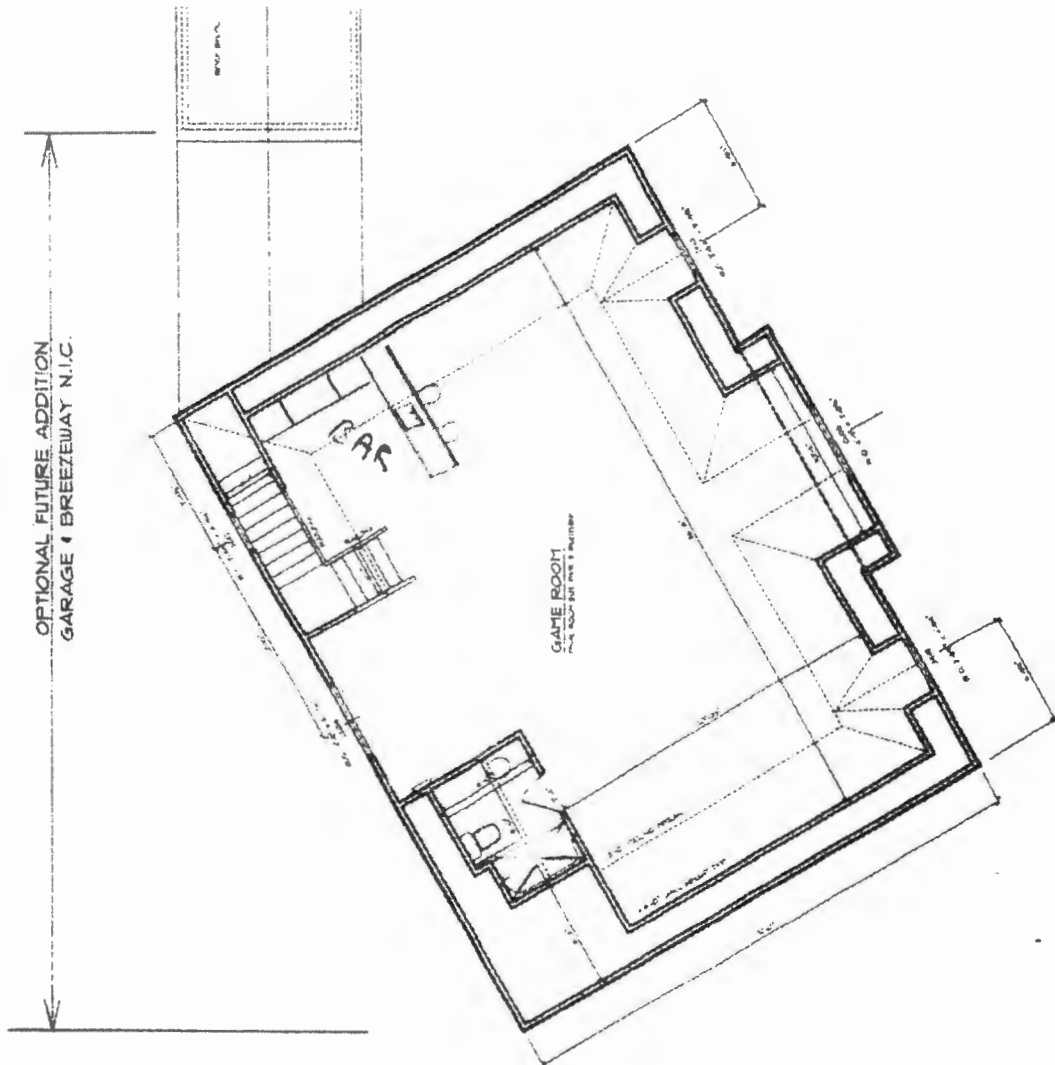
CC: PIZ, Heath

Amendment
Invoice =
paid
CR # 5

REVISED

Date: 1-24-22

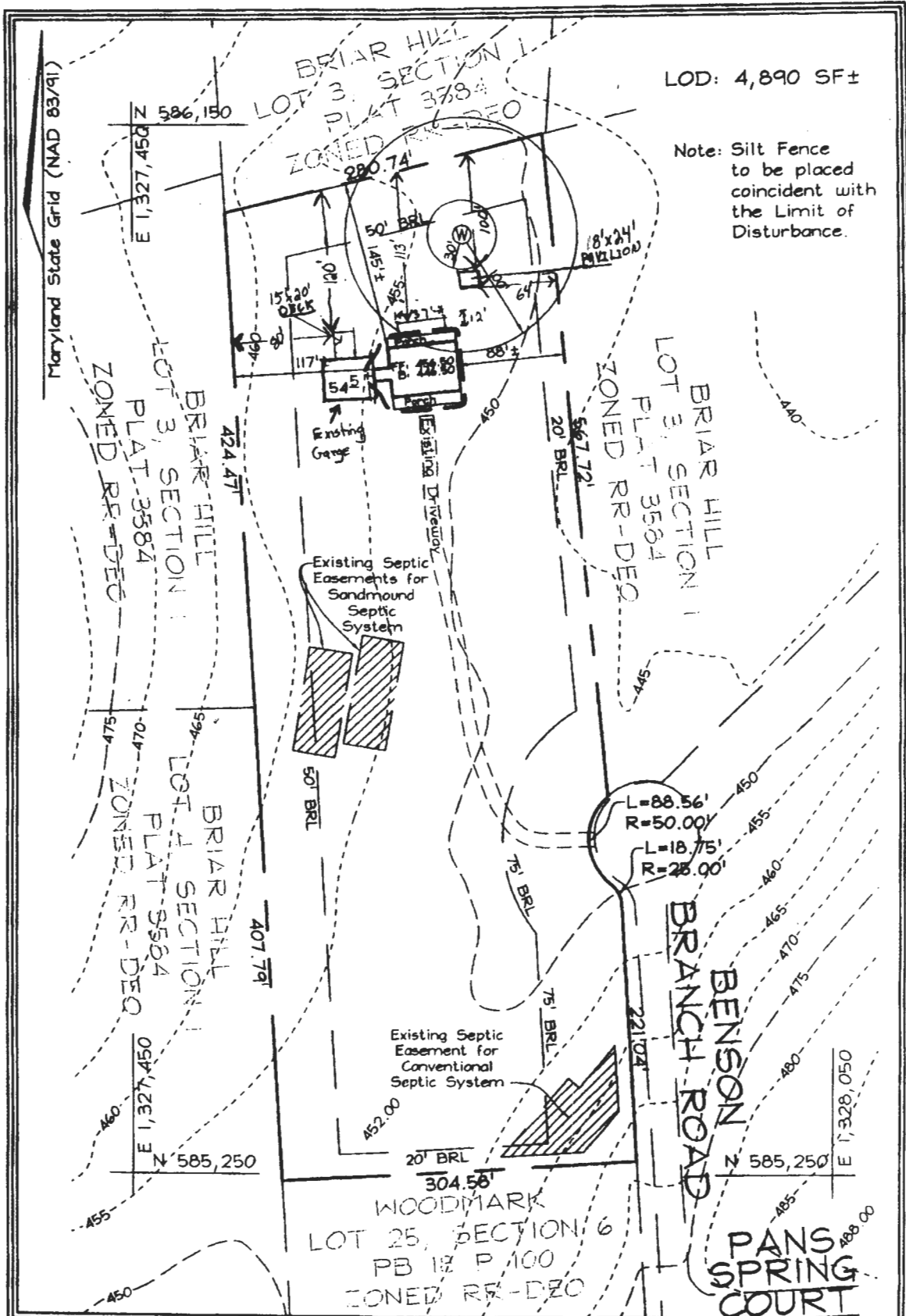
Comments: Amendme. I request +



RECEIVED

JAN 27 2021

11



DATE: February 20, 2006

PLOT PLAN
 NELSON RESIDENCE
 LOT 5

TAX MAP 22 GRIDS 6 & 12
 3RD ELECTION DISTRICT

PARCEL 520
 HOWARD COUNTY, MARYLAND

SCALE: 1"=100'

Freemon, Robert

✓ HA ✓ DR

From: Freemon, Robert
Sent: Monday, January 31, 2022 11:59 AM
To: CUMBERLANDDEVCUSTOMHOMES@GMAIL.COM
Subject: 12401 Benson Branch Rd.
Attachments: Floor Plan Memo.pdf; HCHD BP Process.pdf

Hi,

I received the amendment for B21001723 and before I can complete my review I need additional information. Since we are adding a significant amount of living space (720sqft) I need to see floor plans of entire existing house (all levels). I need to see the existing house as is with all levels showing individual rooms, finished/unfinished space, full/half baths, windows, doors, etc. I will also need to see a floor plan showing the existing garage as is currently (unfinished). In addition, I will have someone from our office do a site visit to check the well and septic system. Please see the attached memo regarding floor plan details. If you have any questions let me know.

Note: The proposed living space increase above the garage at this point is considered a bedroom addition. Please see the attached memo (HCHD BP Process) regarding the Health Dept.'s definition for a bedroom. You find the definition along with options for eliminating this room as a bedroom. If you have any questions about this let me know.



Howard County Health Department
8930 Stanford Blvd. Columbia, MD 21045
Bureau of Environmental Health

Well and Septic Program
Robert "Spencer" Freemon
Phone: 410-313-6357

Email: rfreemon@howardcountymd.gov
Website: <https://www.howardcountymd.gov/health/well-septic-program>

Wetseason
Soil

No issues w/
neighboring
Properties
Setback
wise

12401 Benson Branch
(B21001723)

Amendment to add 720 sqft Living Space
above existing garage (Technically BR)

WEM

- Have completion report w/ test notes
- HO-94-4160

OSDS?

- Conventional System

(3 BR 1500 FT
1000 FT)

- Size 150 Linear Feet

$$150 \times 3 = 450$$

(2' BA)
450 / 1.2 = 375

(2' SWC)
375 \times .62 = 232.5

$$232.5 / 3 \text{ ' side} = 77.5$$

$$3 \text{ BR} = 77.5$$

- Laterals/Trenches not equal length. Has Pump Tank But no LPD

PC

- Has Per notes w/ signed PC (1 conventional + 2 sand mounds)

★ Needs to show sand mounds on handle addition BR or Adjust Floor Plans to eliminate bedroom/apt.

★ Ask if plumbing will be connected with the rest of in house plumbing or outside. If outside need plan showing elevation and profiles of connection.

★ Need Floor Plans of entire house

★ Need site visit