

Menu Save Reset Cancel Help

Record Detail \* (This section is required.)

Case #

EH-PLANS-24-0

Type

EnvHealth/Environmental Health/Plan Check/Application

Status

In Review

Opened Date

07/16/2024

Single Entry Edit-View Record Form

Application Name

B24002551

Description

SFD/ REMOVE EXISTING POOL AND INSTALL 25 X 50' RECTANGULAR, IN GROUND POOL 3.5' - 9' DEPTH RANGE, EXISTING FENCE TO CODE\*\*SUBJECT TO FIELD INSPECTION\*\*

Doc 7/30 Approved RFE 7/30/2024

Total Invoiced

0.00

Total Paid

0.00

Balance

0.00

Online BP. 8/8 7/17/24

Assigned to Department Current Department

Well and Septic Progr: v

Assigned to Staff Current User

Zack Silvast v

Address \* (This section is required.)

	New	Search	Delete	Set Primary										
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Street # (start)</u>	<u>Direction</u>	<u>Street Name</u>	<u>Street Type</u>	<u>City</u>	<u>State</u>	<u>Zip Code</u>	<u>Address Status</u>	<u>Street Suffix (Direction)</u>	<u>Unit Type</u>	<u>U</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>			12131		Serenity	LN	Marr...	MD	21104				

Parcel (This section is not required.)

	Search	Delete	Get Address & Owner	Set Primary										
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Parcel #</u>	<u>Book</u>	<u>Page</u>	<u>Parcel</u>	<u>Parcel Area</u>	<u>Land Value</u>	<u>Improved Value</u>	<u>Exemption Value</u>	<u>Legal Description</u>	<u>Tract</u>
0 record(s) found.														

Owner (This section is not required.)

	Search	Delete	Set Primary										
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Name</u>	<u>Mail Address Line1</u>	<u>Mail Address Line2</u>	<u>Mail Address Line3</u>	<u>Mail City</u>	<u>Mail State</u>	<u>Mail Zip Code</u>	<u>Phone</u>	<u>Country/Region</u>	
<input type="checkbox"/>	<input checked="" type="checkbox"/>			Kevin O'Brien	12131 Serenity Lane			Marriottsville	MD	21104	443-531-1064	US	

Applicant \* (This section is required.)

Search As Owner As Lic. Prof As Contact

Single Entry Applicant Form

Type \*

Applicant v

Primary

Yes v

First Name \*

Chelsea

Middle Name

Last Name \*

Trevey

Home Phone ((xxx)xxx-xxxx)

Organization Name \*

Rowan Landscape and Pool Co. Inc.

Mobile Phone ((xxx)xxx-xxxx)

(410) 489-0707  
E-mail  
OFFICE@ROWANLANDSCAPE.COM  
Business Phone ((XXX)XXX-XXXX)

Preferred Channel  
--Select--

Applicant Address

New Look Up Deactivate Remove

Custom Fields

DATE TRACKING

Received Date 7/12/2024 Due Date 7/26/2024  
Dates to Complete 14 Received by Food  
Food Review Type --Select-- Equipment Specification Sheets Submitted  
Equipment Specification Sheet Received by Community Hygiene

Received by Well and Septic  
7/12/2024

FACILITY INFORMATION

Name of Business (dba) \*

NA (Text)

Associated Building Permit Number

(Text)

Owner Switch Date

(Text)

Does the project include an Aquatic Facility such as a Public Pool? If Yes, forward to CH Program.

Yes  No

Does the project include Private Septic? If Yes, forward to WS Program.

Yes  No

Is this a Prototype Food Service Facility? If Yes, refer to State.

Yes  No

Facility Fax

0 (Text)

Days of Operation

0 (Text)

Does this project have a Building Permit?

Yes  No

Building Permit Issued Date

(Text)

Non-Profit

Does the project include Private Well? If Yes, forward to WS Program.

Yes  No

Does the project include Food Services? If Yes, forward to FP Program.

Yes  No

Facility Phone

0 (Text)

Facility Email

0 (Text)

PROPERTY INFORMATION

Water Source

Private

Sewage Disposal

Private

Design Wastewater Flow

0

(Number)

Permit Type

--Select--

PLAT STATS

Total Number of buildable lots to be recorded

0 (Number)

Total number of open space lots to be recorded

0 (Number)

Total number of bulk parcels to be recorded

0 (Number)

Total number of lots / parcels to be recorded

0 (Number)

New buildable lots created

0

(Number)

Date PLAT signed by Health Officer

(Text)

PLAT Type

--Select--

DEVELOPMENT PLANS

Property Type

Non-residential

Plan Version

Initial

Signature Required

Yes  No

Engineer

0

(Text)

Number of paper copies

0

(Number)

Number of mylar copies

0

(Number)

Number of buildable lots created

Number of non-buildable lots created

0  
(Number)  
**Total Number of Lots**

0  
(Number)  
**Associated Plans**

**WELL AND SEPTIC INTERNAL**

**State Review Required**  
 Yes  No

**Proposed Septic System Type**  
 --Select--

**Coordinate State Review**  
 Yes  No

**FOOD ESTABLISHMENT FACILITY**

**Priority Assessment**  
 --Select--

**License Category**  
 --Select--

**Licensed Type**  
 --Select--

**FOOD ESTABLISHMENT INFORMATION**

**Hours of Operation**  
 (Text)

**Operating Seasonally Only**

**If Operating Seasonally, What is the start month?**  
 (Text)

**Are pets allowed in a outdoor seating area?**  
 Yes  No

**Full Bar?**  
 Yes  No

**RESTAURANT AND FOOD SERVICE**

**Food Service Facility Secondary Category**  
 --Select--

**Total Seating Capacity**  
 (Number)

**Number of Restrooms**  
 (Number)

**Interior Restaurant Seating Capacity**  
 (Number)

**Bar Seating Capacity**  
 (Text)

**Outdoor Seating Capacity**  
 (Text)

**Does the restaurant have outdoor seating**  
 Yes  No

**EQUIPMENT**

**Evaluated non NSF, ANSI, CF or other standards**  
 Yes  No

**Description of Refrigeration Units**

**Number of Walk-In Refrigerator Units**  
 (Number)

**Description of Walk-In Freezer Units**  
 (Text)

**Is there a bulk ice machine available**  
 Yes  No

**Space Limitation**

**Number of Hand Sinks Available**  
 (Number)

**Hood System**  
 (Text)

**Ventless Equipment**  
 (Text)

**PLUMBING**

**Size and installation of the water heater?**  
 (Text)

**Is there a grease interceptor or grease trap?**  
 --Select--

**REFUSE AND RECYCLABLES**

**Dumpsters Located on a impervious surface?**  
 --Select--

**Will there be a grease receptacle?**  
 --Select--

**WAREWASHING DISHWASHING**

**Dishwashing Method**  
 --Select--

**HACCP**

**Plan Review Response Letter Received**  
 Yes  No

**Date HACCP Approved by the State**

**Date HACCP Plan Submitted**

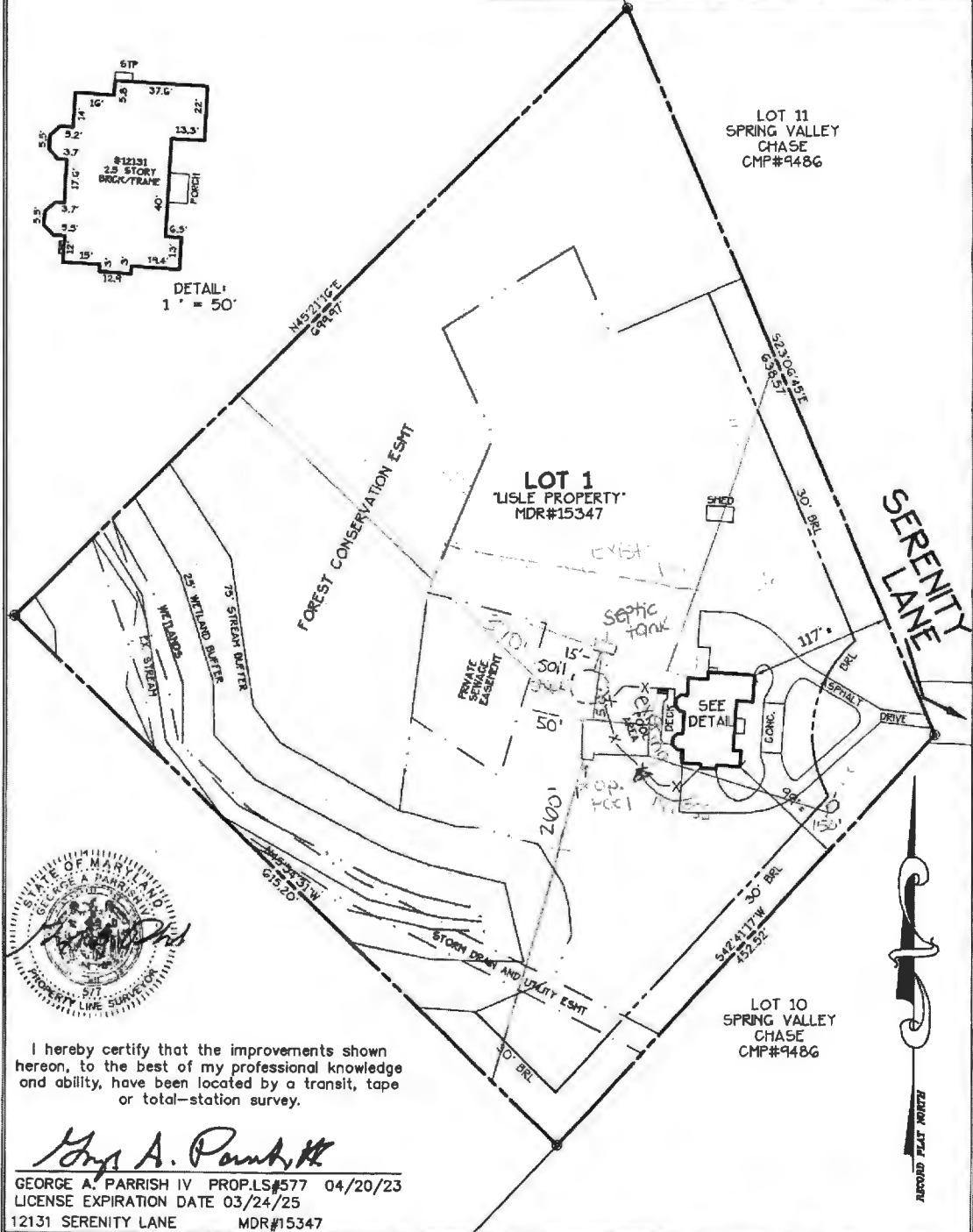
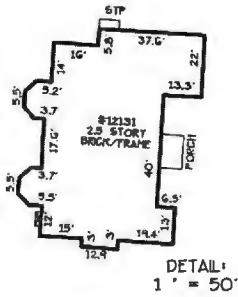
**HACCP Plan Approved**

Approved B24002551  
 7/15 7/30/2024

**Lakeside**  
 SURVEY COMPANY

SHEET 1 OF 2

This is a two page  
 LEGAL (8 1/2"x14") sized  
 document and is not  
 valid without both  
 pages. See page two  
 (or reverse) for  
 Survey Notes.



I hereby certify that the improvements shown hereon, to the best of my professional knowledge and ability, have been located by a transit, tape or total-station survey.

*George A. Parrish IV*

GEORGE A. PARRISH IV PROP.LS#577 04/20/23  
 LICENSE EXPIRATION DATE 03/24/25  
 12131 SERENITY LANE MDR#15347

LOCATION DRAWING  
 LOT 1  
**LISLE PROPERTY**  
 THIRD DISTRICT  
 HOWARD COUNTY, MARYLAND  
 SCALE: 1" = 100' APRIL 2023  
 PROJECT#66214  
 F/N: LISLEPROPERTY-L1  
 DRAWN BY: BTG

