

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
02/26/2024

Single Entry Edit View Record Form

Application Name
B24000254

Description
SFD/INTERIOR ALTERATIONS TO RENOVATE KITCHEN INCLUDING DEMO OF NON-LOAD BEARING WALL, REPLACE WINDOW, INSTALL QTY 2. FIREPLACE INSERTS ON THE EXISTING WOOD BURNING FIREPLACE(S) IN THE MAIN FLOOR

Total Invoiced
0.00

Total Paid
0.00

Balance
0.00

Online BP.
3/2 2/26/24

Assigned to Department Current Department
Well and Septic Progr

Assigned to Staff Current User
Zack Silvast

Address (This section is required.)

New	Search	Delete	Set Primary								
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Primary	Street # (start)	Direction	Street Name	Street Type	City	State	Zip Code	Address Status	Street Suffix (Direction)	Unit Type	U
<input type="checkbox"/>	@	11007	Gaither...	RD	Elli...	MD	21042				

Parcel (This section is not required.)

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

Owner (This section is not required.)

Search	Delete	Set Primary										
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Primary	Name	Mail Address Line1	Mail Address Line2	Mail Address Line3	Mail City	Mail State	Mail Zip Code	Phone	Country/Regio			
<input type="checkbox"/>	○	Bryant Mclver	11007 Gaither Farm Rd.		Ellicott City	MD	21042	301-663-3818	US			

Applicant (This section is required.)

Search As Owner As Lic. Prof As Contact

Single Entry Applicant Form

Type
Applicant

Primary
Yes

First Name
Bryant

Middle Name

Last Name
Mclver

Home Phone
(301) 663-3818

Organization Name
n/a

Mobile Phone (XXX) X X X

E-mail

Business Phone

Preferred Channel
--Select--

Applicant Address

New Look Up Deactivate Remove

Contact	Address ID	Address Type	Address Line 1	City	State	Zip	Primary	Recipient	Status
0 record(s) found.									

Custom Fields

DATE TRACKING

Received Date 2/23/2024	Due Date 2/27/2024
Dates to Complete 14 (Number)	Received by Food
Food Review Type --Select--	Equipment Specification Sheets Submitted
Equipment Specification Sheet	Received by Community Hygiene

Received by Well and Septic
2/23/2024

FACILITY INFORMATION

Name of Business (dba) n/a (Text)	Does this project have a Building Permit? <input type="radio"/> Yes <input type="radio"/> No
Associated Building Permit Number (Text)	Building Permit Issued Date
Owner Switch Date	<input type="checkbox"/> Non-Profit
Does the project include an Aquatic Facility such as a Public Pool? If Yes, forward to CH Program. <input type="radio"/> Yes <input type="radio"/> No	Does the project include Private Well? If Yes, forward to WS Program. <input type="radio"/> Yes <input type="radio"/> No
Does the project include Private Septic? If Yes, forward to WS Program. <input type="radio"/> Yes <input type="radio"/> No	Does the project include Food Services? If Yes, forward to FP Program. <input type="radio"/> Yes <input type="radio"/> No
Is this a Prototype Food Service Facility? If Yes, refer to State. <input type="radio"/> Yes <input type="radio"/> No	Facility Phone 0 (Text)
Facility Fax 0 (Text)	Facility Email 0 (Text)
Days of Operation 0 (Text)	

PROPERTY INFORMATION

Water Source Private	Sewage Disposal Private
Design Wastewater Flow (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
PLAT Type --Select--	

DEVELOPMENT PLANS

Property Type

Residential

Signature Required

Yes No

Number of paper copies

0
(Number)

Number of buildable lots created

0
(Number)

Total Number of Lots

0
(Number)

Plan Version

Initial

Engineer

0

(Text)

Number of mylar copies

0
(Number)

Number of non-buildable lots created

0
(Number)

Associated Plans

WELL AND SEPTIC INTERNAL

State Review Required

Yes No

Coordinate State Review

Yes No

Proposed Septic System Type

--Select--

FOOD ESTABLISHMENT FACILITY

Priority Assessment

--Select--

Licensed Type

--Select--

License Category

--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--

