

HOWARD COUNTY
 PERMIT APPLICATION

PERMIT NUMBER

B07001732

Building Address 754 CHASSIE CROSSING WAY
WHEELING MARYLAND 21157
 Suite/Apt. #: _____ SDP/WP/Petition #: #10462
 Census Tract 604001 Subdivision Chassie Crossing
 Section 2 Area _____ Lot 24
 Tax Map 3 Parcel 4 Grid 19
 Zoning RC Map Coordinates _____ Lot size _____

Property Owner's Name _____
 Address _____
 City _____ State _____ Zip Code _____
 Home Phone 443-714-0356 Work Phone _____
 Applicant's Name & Mailing Address, (if other than stated hereon):
 Phone _____ Fax _____

Existing Use ED
 Proposed Use ED
 Estimated Construction Cost \$ _____
 Description of Work _____
19-15

Contractor Company _____
 Contact Person _____
 Address _____
 City _____ State _____ Zip Code _____
 License No. _____
 Phone _____ Fax _____

Occupant or Tenant _____
 Contact Name _____
 Address _____
 City _____ State _____ Zip Code _____
 Phone _____ Fax _____

Engineer or Architect Company _____
 Contact Person _____
 Address _____
 City _____ State _____ Zip Code _____
 Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: _____	Water Supply: _____ Public _____ Private _____
No. of stories: _____	Sewage Disposal: _____ Public _____ Private _____
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ State Certified Modular _____	Sprinkler system: N/A <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: _____ Public _____ Private <input checked="" type="checkbox"/>
1st floor: _____	Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/>
2nd floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: _____ Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
No. of Bedrooms _____ Height: _____ Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Sprinkler system: N/A <input checked="" type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____
Other Structure: _____ Dimensions: _____ Footings: _____ Roof Height: _____ State Certified Modular _____ Manufactured Home _____	

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 Signature _____
 Title/Company _____

Print Name _____
 Date _____

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
 ** PLEASE WRITE NEATLY AND LEGIBLY. **

FOR OFFICE USE ONLY

AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official		
Dev. Engineering, DPZ		
Health	<u>5/21/2007</u>	<u>Schiff A. Jc</u>
Fire Protection		

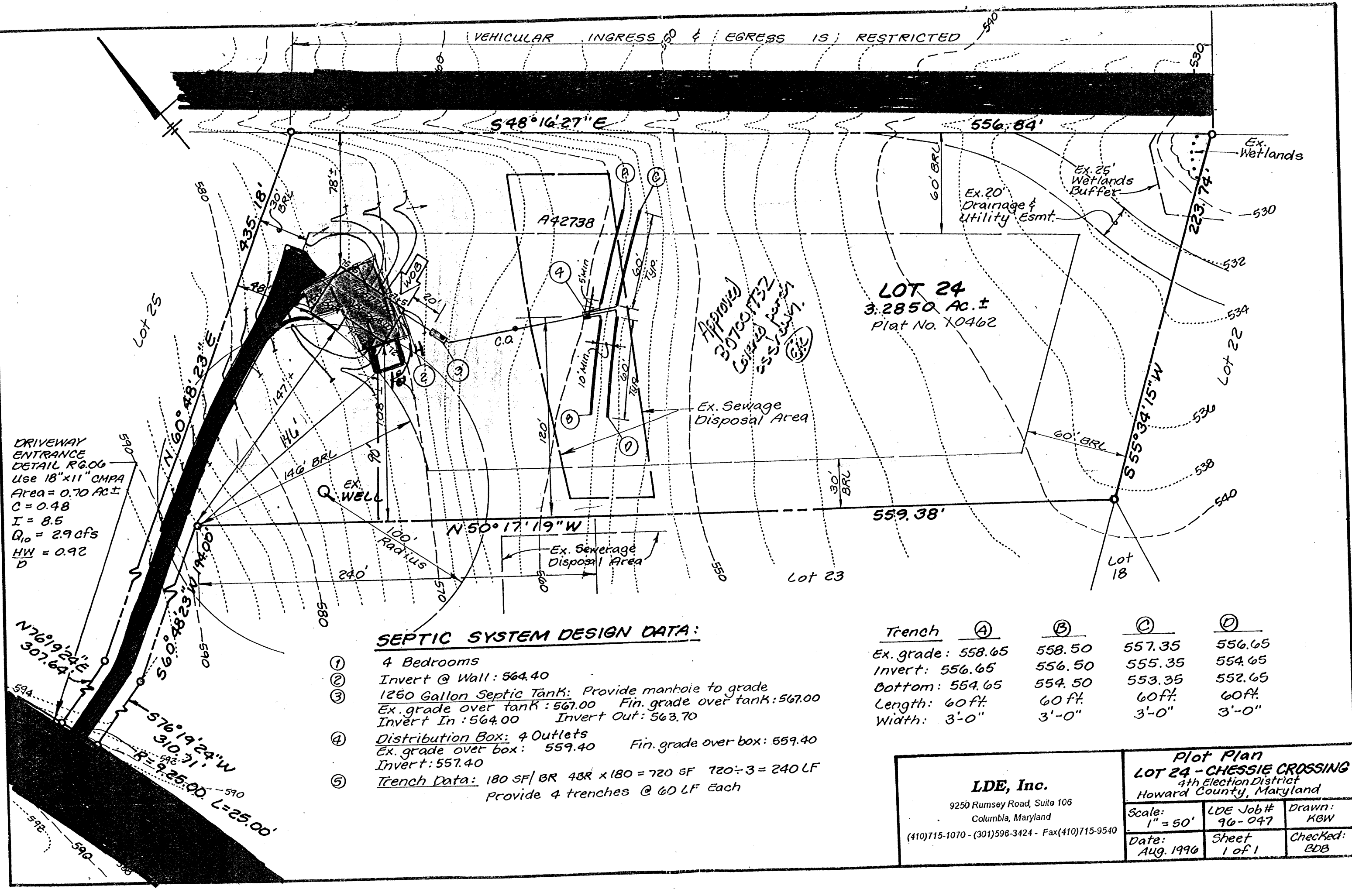
Is Sediment Control approval required prior to issuance?
 YES NO

CONTINGENCY CONSTRUCTION START:
 ONE STOP SHOP:

Distribution of Copies: White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA

DPZ SETBACK INFORMATION	PROPERTY ID#
Front: <u>146</u>	Filing fee \$ _____
Rear: <u>60</u>	Permit fee \$ _____
Side: <u>30</u>	Excise tax \$ _____
Side St: <u>NA</u>	Add'l per. fee \$ _____
All minimum setbacks met?	TOTAL FEES \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Is Entrance Permit required?	Balance due \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # <u>11593</u>
Historic District?	Validation # _____
YES <input type="checkbox"/> NO <input type="checkbox"/>	
Lot Coverage for NewTown Zone _____	
SDP/Red-line approval date _____	Accepted by _____

VEHICULAR INGRESS & EGRESS IS RESTRICTED



DRIVEWAY ENTRANCE
DETAIL R6.06
Use 18"x11" CMPA
Area = 0.70 AC ±
C = 0.48
I = 8.5
Q₁₀ = 2.9 cfs
HW = 0.92
D

SEPTIC SYSTEM DESIGN DATA:

- ① 4 Bedrooms
- ② Invert @ Wall: 564.40
- ③ 1250 Gallon Septic Tank: Provide manhole to grade
Ex. grade over tank: 567.00 Fin. grade over tank: 567.00
Invert In: 564.00 Invert Out: 563.70
- ④ Distribution Box: 4 Outlets
Ex. grade over box: 559.40 Fin. grade over box: 559.40
Invert: 557.40
- ⑤ Trench Data: 180 SF/BR 4BR x 180 = 720 SF 720 ÷ 3 = 240 LF
provide 4 trenches @ 60 LF Each

Trench	Ⓐ	Ⓑ	Ⓒ	Ⓓ
Ex. grade:	558.65	558.50	557.35	556.65
Invert:	556.65	556.50	555.35	554.65
Bottom:	554.65	554.50	553.35	552.65
Length:	60 ft.	60 ft.	60 ft.	60 ft.
Width:	3'-0"	3'-0"	3'-0"	3'-0"

<p>LDE, Inc. 9250 Rumsey Road, Suite 106 Columbia, Maryland (410)715-1070 - (301)596-3424 - Fax(410)715-9540</p>			<p>Plot Plan LOT 24 - CHESSIE CROSSING 4th Election District Howard County, Maryland</p>	
			<p>Scale: 1" = 50'</p>	<p>LDE Job # 90-047</p>
<p>Date: Aug. 1990</p>		<p>Sheet 1 of 1</p>	<p>Checked: BDB</p>	

APPLICATION

HOWARD COUNTY

SERIAL NUMBER

PERMIT APPLICATION

DEPARTMENT OF INSPECTIONS, LICENSES & PERMIT
3430 COURT HOUSE DRIVE, ELLICOTT CITY, MARYLAND 21043

BUILDING ADDRESS (HOUSE NO., STREET, TOWN OR AREA)
*754 Chessie Crossing Way
Woodbine, MD 21797*

GRADING/SEDIMENT CONTROL YES NO SDP #

DESCRIPTION OF WORK AUTHORIZED
*18x42 OVAL 3'-8"
INGROUND SWIMMING
POOL*

LOT NO.	PARCEL NO.	SEC.	AREA	BLOCK NO.	LIBER	FOLIO
<i>24</i>						
SUB DIVISION		ZONE	ZONE MAP	ELEC. DIST.	CENSUS TR.	
<i>Chessie Crossing</i>						

OWNER NAME AND ADDRESS
*GILLESPIE Kevin Lee
754 Chessie Crossing Way*
PHONE NO. *(410) 489-2973*

SIZE OF BLDG.	FRONT	DEPTH	HEIGHT

OCCUPANT'S NAME AND ADDRESS
same as above
PHONE NO.

TYPE OF BLDG.	AREA	VOLUME	ROOF
B. ROOMS ROOMS BATHS FIREPLACES			

ARCHITECT OR ENGINEER'S NAME AND ADDRESS
PHONE NO.

FOOTINGS	FOUNDATION	S. WALLS

CONTRACTOR'S NAME AND ADDRESS
*Tri-County Pools, Inc. (301) 898-3030
13410 Mason Road
Thurmont MD 21788*
PHONE NO.

UTILITIES					
WATER/WELL	SEWER/SEPTIC	GAS	ELECTRICITY	TYPE OF HEAT	AC

I have carefully examined and read this application and know the same is true and correct, and that is doing this work, all provisions of Howard County Ordinances and the State Laws of Maryland will be complied with, whether specified or not; and I will notify the Department of Inspections, and Permits twenty-four hours in advance when I am ready for the inspections called for elsewhere in the application; and that no work will be covered up until such inspections have been completed with.

EXISTING USE
PROPOSED USE
INGROUND POOL

EST. CONSTRUCTION COST *20,132.20*
LICENSE NUMBER *34414-01*
PERMIT FEE

Pres. / Owner
SIGNATURE
DATE *6/11/97*

FOR OFFICE USE ONLY

DISTRICT IN FEET FROM R/W LINE TO FRONT BUILDING LINE _____
SIDE YARD _____
(DISTANCE IN FEET FROM SIDE BLDG. LINE TO SIDE PROPERTY LINE)
TO SIDE BUILDING LINE _____
DISTANCE IN FEET, REAR YD. REQUIRING SET
BACK _____ (CORNER LOT ONLY) _____
SDP # _____

FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING		
SHA		
SEDIMENT/GRADING		
BUILDING OFFICIAL		
WATER & SEWER		
HEALTH DEPT.	<i>6/12/97</i>	<i>Mark E. Ripkin</i>
FIRE PROTECTION		
STORM WATER MGM.		

Check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

CAUTION
To begin construction before a permit placard has been issued and displayed on the job is a violation of the law.
Use and occupancy permit must be applied for two weeks before it will be issued.

IMPORTANT: PLEASE SHOW ZIP CODES AND AREA CODES WHEREVER REQUIRED.

LP-69-591

APPROVED _____ DATE _____
Distribution of Copies:
White - Building Official
Green - Planning & Zoning
Yellow - Engineering
Pink - Health Dept.
Gold - S.H.A.

MIN. 20'
SEPARATION
BETW. POOL &
SEPTIC
POOL LOC.

TENTATIVELY OK
PENDING RESUBMITTALS
OF ACCURATE
HOUSE SITE
PLAN MR 6/12/97
BP ~~XXXX~~ SIGNED

DRIVEWAY
ENTRANCE
DETAIL R6.06
Use 18"x11" CMPA
Area = 0.70 AC ±
C = 0.48
I = 8.5
Q₁₀ = 2.9 cfs
HW/D = 0.92

N 76° 19' 28" E
307.64'

VEHICULAR INGRESS & EGRESS IS

WOODBINE ROAD

S 48° 16' 27" E

A42738

APPROX.
HOUSE
SITE

Ex. Sewage
Disposal Area

Ex. Sewerage
Disposal Area

Lot 23

SEPTIC SYSTEM DESIGN DATA:

- ① 4 Bedrooms
- ② Invert @ Wall: 564.40
- ③ 1250 Gallon Septic Tank: Provide manhole to grade

