

Permits: 410-313-2455  
Inspections: 410-313-1810  
Automated Line: 410-313-3800  
610000390

Howard County Building/Fin Permitt Application  
Department of Inspections, Licenses & Permits  
3430 Court House Drive  
Ellicott City, MD 21043

Permit Number:  
B10003948

Building Address: 13756 TRADITION MILL RD  
13756 TRADITION MILL RD, MD 21029

Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_

Census Tract: \_\_\_\_\_ Subdivision: \_\_\_\_\_

Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: \_\_\_\_\_

Tax Map: \_\_\_\_\_ Parcel: \_\_\_\_\_ Grid: \_\_\_\_\_

Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: \_\_\_\_\_

Existing Use: VACANT LOT

Proposed Use: SFD

Estimated Construction Cost: \$ 400000

Description of Work: CONSTRUCT NEW SFD

Occupant or Tenant: \_\_\_\_\_

Was tenant space previously occupied? ☐ Yes ☐ No

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Property Owner's Name: ROBERT BRADLEY

Address: 13756 TRADITION MILL RD

City: ELICOTT CITY State: MD Zip Code: 21029

Home Phone: 410 549 4444 Work Phone: \_\_\_\_\_

Applicant's Name & Mailing Address, (If other than stated herein):  
PAUL MUELLER  
7520 MARSH ST SUITE 201 SYKESTOWN  
Phone: 410 549 4444 Fax: 410 549 4444

Email: PAUL.MUELLER@HARRIS-OWC.COM

Contractor Company: MUELLER HARRIS-OWC

Contact Person: PAUL MUELLER

Address: 7520 MARSH ST SUITE 201 SYKESTOWN

City: SYKESTOWN State: MD Zip Code: 21784

License No.: 22

Phone: 410 549 4444 Fax: 410 549 4444

Email: PAUL.MUELLER@HARRIS-OWC.COM

Engineer/Architect Company: \_\_\_\_\_

Responsible Design Prof.: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

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

BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics	Utilities
<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>
<u>Depth</u> <u>Width</u>	<input type="checkbox"/> Public
1 <sup>st</sup> floor: 38 38	<input checked="" type="checkbox"/> Private
2 <sup>nd</sup> floor: 38 38	<u>Sewage Disposal</u>
Basement: 38 38	<input type="checkbox"/> Public
<input type="checkbox"/> Finished Basement	<input checked="" type="checkbox"/> Private
<input checked="" type="checkbox"/> Unfinished Basement	Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Crawl Space	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Slab on Grade	<u>Heating System</u>
No. of Bedrooms:	<input checked="" type="checkbox"/> Electric
<u>Multi-family Dwelling</u>	<input type="checkbox"/> Oil
No. of efficiency units:	<input type="checkbox"/> Natural Gas
No. of 1 BR units:	<input checked="" type="checkbox"/> Propane Gas
No. of 2 BR units:	
No. of 3 BR units:	
Other Structure:	
Dimensions:	
Footings:	
Roof:	
<input type="checkbox"/> State Certified Modular	
<input type="checkbox"/> 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: [Signature] Print Name: PAUL MUELLER

Email Address: PAUL.MUELLER@HARRIS-OWC.COM Date: 12/17/10

Title/Company: MUELLER HARRIS-OWC, INC.

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY  
\*\*PLEASE WRITE NEATLY & LEGIBLY\*\*  
-FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA ( Zoning )		
PSZA ( Engineering )		
Health	1-12-11	[Signature]
Fire Protection		

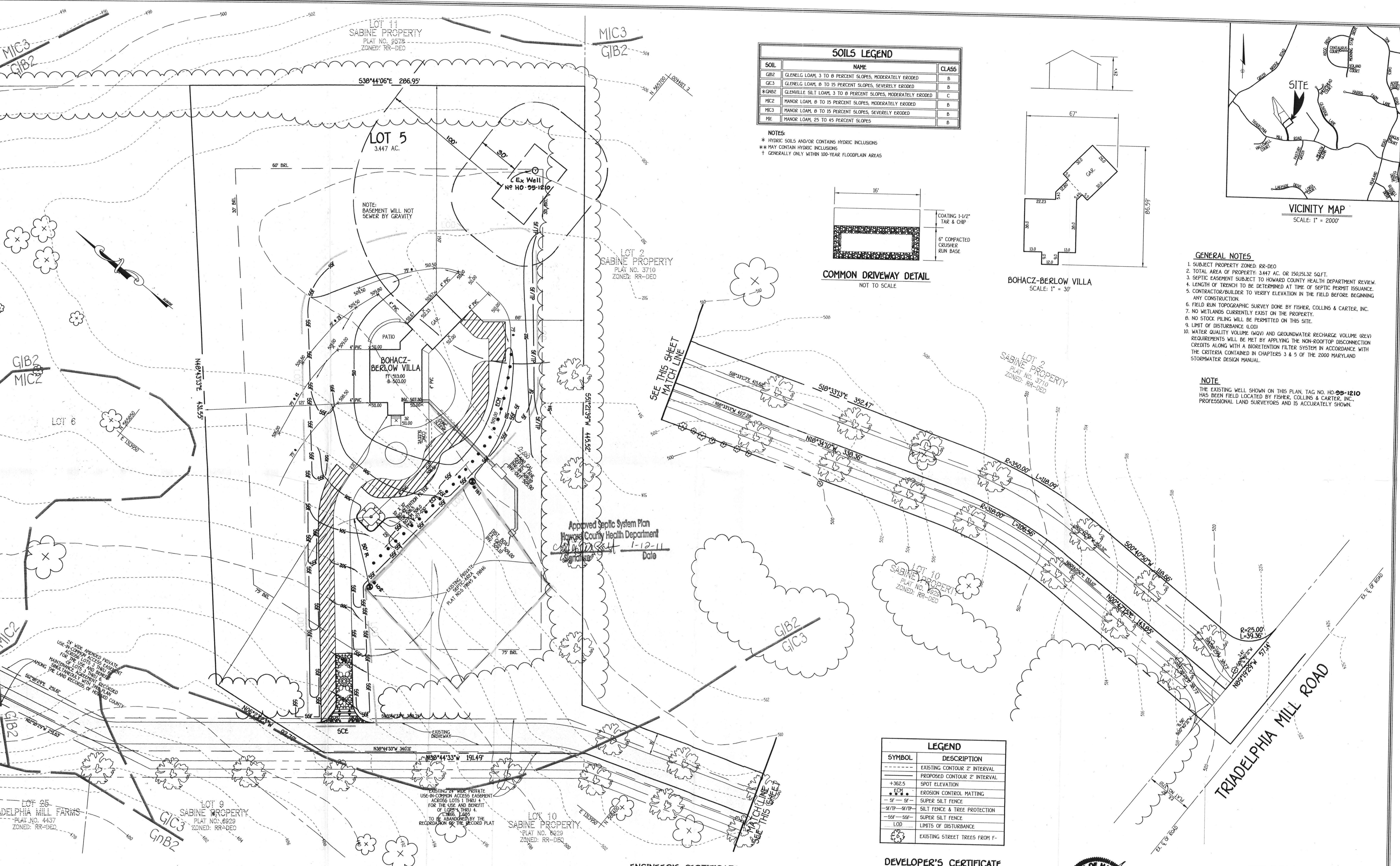
Is Sediment Control approval required for issuance? ☐ Yes ☐ No  
☐ CONTINGENCY CONSTRUCTION START  
☐ ONE STOP SHOP

DPZ SETBACK INFORMATION	
Front:	
Rear:	
Side:	
Side St.:	
All minimum setbacks met?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Lot Coverage for New Town Zone:	
SDP/Red-line approval date:	

Filing Fee	\$ 150
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$

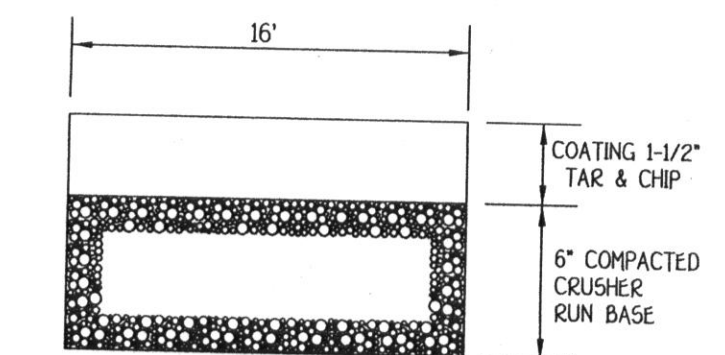
OK 1001



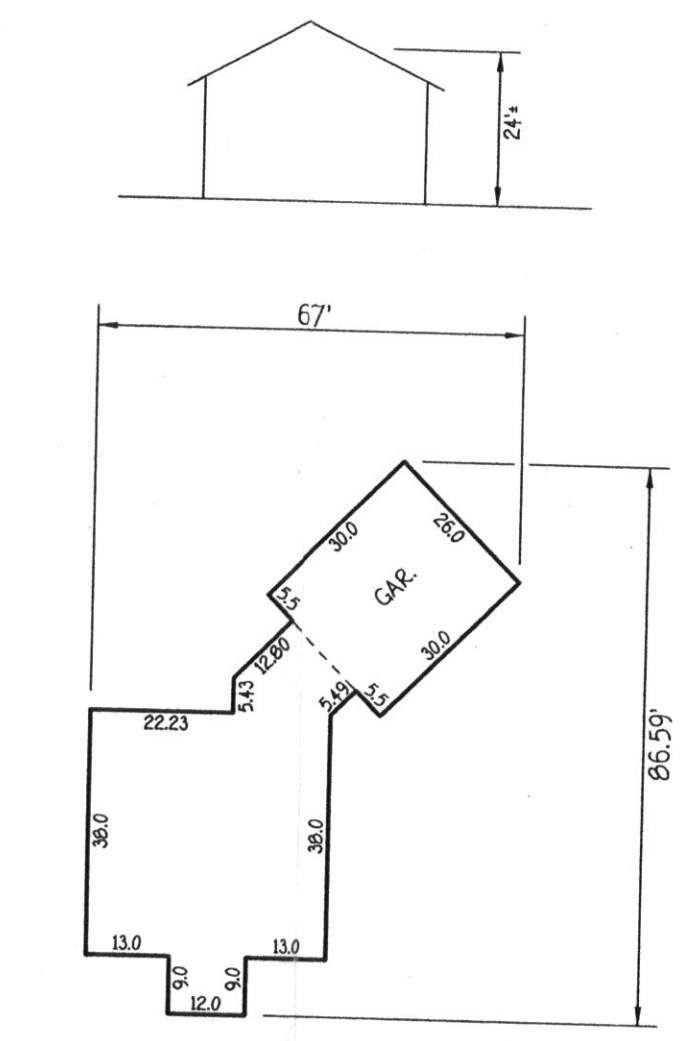


SOILS LEGEND		
SOIL	NAME	CLASS
GIB2	GLENELG LOAM, 3 TO 8 PERCENT SLOPES, MODERATELY ERODED	B
GIC3	GLENELG LOAM, 8 TO 15 PERCENT SLOPES, SEVERELY ERODED	B
*GIB2	GLENELG SILT LOAM, 3 TO 8 PERCENT SLOPES, MODERATELY ERODED	C
MIC2	MANOR LOAM, 8 TO 15 PERCENT SLOPES, MODERATELY ERODED	B
MIC3	MANOR LOAM, 8 TO 15 PERCENT SLOPES, SEVERELY ERODED	B
MIC	MANOR LOAM, 25 TO 45 PERCENT SLOPES	B

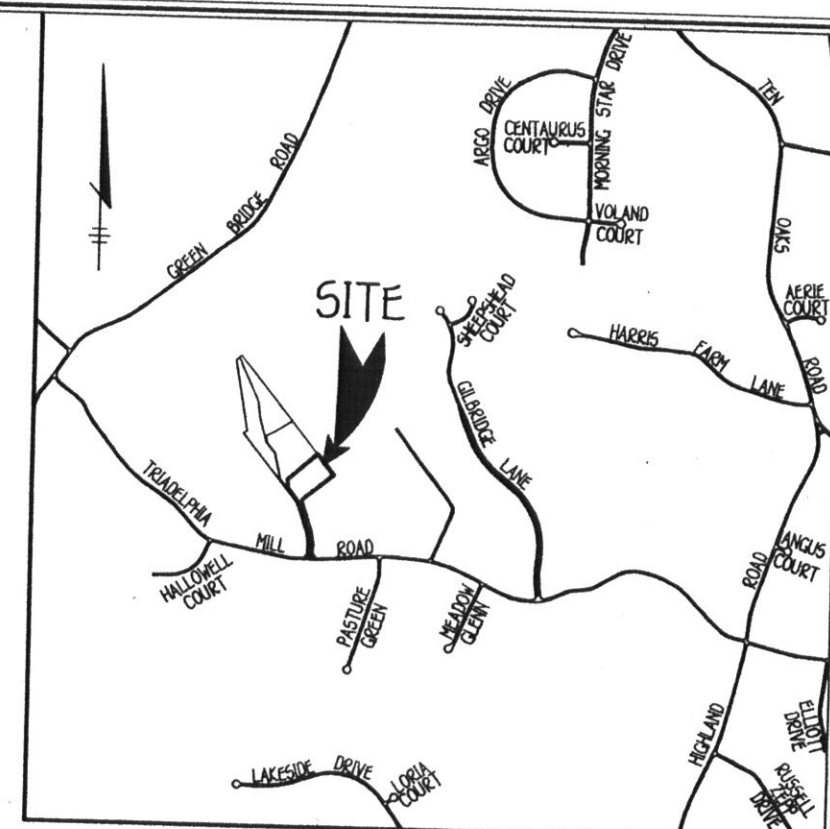
NOTES:  
\* HYDRIC SOILS AND/OR CONTAINS HYDRIC INCLUSIONS  
\*\* MAY CONTAIN HYDRIC INCLUSIONS  
† GENERALLY ONLY WITHIN 100-YEAR FLOODPLAIN AREAS



COMMON DRIVEWAY DETAIL  
NOT TO SCALE



BOHACZ-BERLOW VILLA  
SCALE: 1" = 30'




VICINITY MAP  
SCALE: 1" = 2000'

GENERAL NOTES

- SUBJECT PROPERTY ZONED: RR-DEO
- TOTAL AREA OF PROPERTY: 3.447 AC. OR 150,151.32 SQ. FT.
- SEPTIC EASEMENT SUBJECT TO HOWARD COUNTY HEALTH DEPARTMENT REVIEW.
- LENGTH OF TRENCH TO BE DETERMINED AT TIME OF SEPTIC PERMIT ISSUANCE.
- CONTRACTOR/BUILDER TO VERIFY ELEVATION IN THE FIELD BEFORE BEGINNING ANY CONSTRUCTION.
- FIELD RUN TOPOGRAPHIC SURVEY DONE BY FISHER, COLLINS & CARTER, INC.
- NO WETLANDS CURRENTLY EXIST ON THE PROPERTY.
- NO STOCK PILING WILL BE PERMITTED ON THIS SITE.
- LIMIT OF DISTURBANCE (LOD)
- WATER QUALITY VOLUME (WQV) AND GROUNDWATER RECHARGE VOLUME (REV) REQUIREMENTS WILL BE MET BY APPLYING THE NON-ROOFTOP DISCONNECTION CREDITS ALONG WITH A BIORETENTION FILTER SYSTEM IN ACCORDANCE WITH THE CRITERIA CONTAINED IN CHAPTERS 3 & 5 OF THE 2000 MARYLAND STORMWATER DESIGN MANUAL.

NOTE

THE EXISTING WELL SHOWN ON THIS PLAN, TAG NO. 10-95-1210, HAS BEEN FIELD LOCATED BY FISHER, COLLINS & CARTER, INC. PROFESSIONAL LAND SURVEYORS AND IS ACCURATELY SHOWN.

LEGEND	
SYMBOL	DESCRIPTION
-----	EXISTING CONTOUR 2' INTERVAL
-----	PROPOSED CONTOUR 2' INTERVAL
+362.5	SPOT ELEVATION
ECM	EROSION CONTROL MATTING
-5' - 5'	SUPER SILT FENCE
-5'11" - 5'11"	SILT FENCE & TREE PROTECTION
-55' - 55'	SUPER SILT FENCE
LOD	LIMITS OF DISTURBANCE
	EXISTING STREET TREES FROM F-

ENGINEER'S CERTIFICATE

"I HEREBY CERTIFY THAT THIS PLAN FOR EROSION AND SEDIMENT CONTROL REPRESENTS A PRACTICAL AND WORKABLE PLAN BASED ON MY PERSONAL KNOWLEDGE OF THE SITE CONDITION AND THAT IT WAS PREPARED IN ACCORDANCE WITH THE REQUIREMENTS OF THE HOWARD SOIL CONSERVATION DISTRICT."

*Earl D. Collins*  
EARL D. COLLINS

12/15/10  
DATE

DEVELOPER'S CERTIFICATE

"I/WE CERTIFY THAT ALL DEVELOPMENT AND CONSTRUCTION WILL BE DONE ACCORDING TO THIS PLAN AND THAT ANY RESPONSIBLE PERSONNEL INVOLVED IN THE CONSTRUCTION PROJECT WILL HAVE A CERTIFICATE OF ATTENDANCE AT A DEPARTMENT OF THE ENVIRONMENT APPROVED TRAINING PROGRAM FOR THE CONTROL OF SEDIMENT AND EROSION BEFORE BEGINNING THE PROJECT. I ALSO AUTHORIZE PERIODIC ON-SITE INSPECTION BY THE HOWARD SOIL CONSERVATION DISTRICT."

*Lawrence*  
SIGNATURE OF DEVELOPER

12/15/10  
DATE



SITE DEVELOPMENT & SEDIMENT/EROSION CONTROL PLAN  
PHELPS ESTATES  
LOT 5

ZONED RR-DEO  
5TH ELECTION DISTRICT  
SCALE: 1" = 30'

PLAT NO. 20454  
HOWARD COUNTY, MARYLAND  
DATE: DECEMBER, 2010

SHEET 1 OF 2  
GP-11-47

GP-11-47

FISHER, COLLINS & CARTER, INC.  
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS  
CONTINENTAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE  
ELLCOTT CITY, MARYLAND 21042  
4100 460 - 2000

THIS DEVELOPMENT IS APPROVED FOR SOIL EROSION AND SEDIMENT CONTROL BY THE HOWARD SOIL CONSERVATION DISTRICT. APPROVED:

*John R. Roberts*  
12/16/10  
DATE

BUILDER/DEVELOPER

MUELLER HOMES, INC.  
BERLOW  
7520 MAIN STREET  
SUITE 201  
SYKESVILLE, MARYLAND 21784  
410-549-4444



DEPARTMENT OF INSPECTIONS, LICENSES & PERMITS 3430 COURT HOUSE DRIVE ELLICOTT CITY, MD 21043 PERMITS (410) 313-2455 INSPECTIONS (410) 313-1850	<b>HOWARD COUNTY  RESIDENTIAL  HEATING-VENTILATION-AIR  CONDITIONING AND  REFRIGERATION PERMIT  APPLICATION</b>	HVACR PERMIT # <u>M11000533</u> BUILDING PERMIT # <u>B10003948</u>
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BUILDING ADDRESS: SUITE/APT: <u>13756 Tridelphia mill Rd</u>	OWNERS NAME: <u>Robert Berlow</u> ADDRESS: <u>13756 Tridelphia mill Rd</u>
SUBDIVISION: CENSUS TRACT: SECTION: AREA: LOT: TAX MAP: PARCEL: BLOCK: ZONE:	CITY: <u>Clarks ville</u> STATE: <u>MD</u> ZIP CODE: <u>21029</u> HOME PHONE: WORK PHONE:
PROPERTY ID: MAP COORDINATES: TYPE OF IMPROVEMENTS: USE:	

<u>CHECK ONE</u>	<u>HOW MANY</u>	COMPANY NAME: <u>All Temp Heating &amp; A/C</u>
SINGLE FAMILY DWELLING <input checked="" type="checkbox"/>	<u>2</u> ZONES	LICENSEE NAME: <u>John Guanti</u>
SINGLE FAMILY TOWNHOUSE <input type="checkbox"/>	___ ZONES	ADDRESS: <u>1701 Parkman Ave</u>
MULTI-FAMILY / HOTEL/MOTEL <input type="checkbox"/>	___ ROOMS	CITY: <u>Baltimore</u>
ASSISTED LIVING HOMES (16 OR FEWER RESIDENTS) <input type="checkbox"/>	___ ROOMS	STATE: <u>MD</u> ZIP CODE: <u>21230</u>
		PHONE: <u>410-467-3311</u> HVACR LICENSE NO: <u>16470</u>

<b>New</b> <input type="checkbox"/> Heating and Air Conditioning <input checked="" type="checkbox"/> Geo Thermal System	<input type="checkbox"/> Heating System Only <input type="checkbox"/> Ductless Mini Splits	<input type="checkbox"/> Other Work (Describe): <input type="checkbox"/> Thru The Wall Systems
<b>Replacement</b> <input type="checkbox"/> Heating <input type="checkbox"/> Air Conditioning <input type="checkbox"/> Heating and Air Conditioning	<u>6/29/2011</u> <u>Approved</u>	<b>Additions and Alterations</b> <input type="checkbox"/> Heating <input type="checkbox"/> Air Conditioning <input type="checkbox"/> Heating and Air Conditioning

\*\*\*\*Replacement Geo Thermal Systems are not required; However, if a tax credit is being sought a permit is required\*\*\*\*

<b>Zones</b> Permit Fee = # of Zones x \$40 = <u>80</u> Technology Fee (10% of Permit Fee) = <u>8.00</u> Plus Application Fee <u>\$50.00</u> Total Fees Due = <u>138.00</u>	<b>Rooms</b> Permit Fee = # of Rooms x \$80 = _____ Technology Fee (10% of Permit Fee) = _____ Plus Application Fee \$50 <u>\$50.00</u> Total Fees Due = _____
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I HAVE CAREFULLY EXAMINED AND READ THIS APPLICATION AND KNOW IT IS TRUE AND CORRECT. THE WORK DESCRIBED HEREIN WILL BE PERFORMED BY A STATE HVACR LICENSED PERSON(S), AND ALL WORK WILL BE PERFORMED IN COMPLIANCE WITH APPLICABLE CODES AND STANDARDS OF HOWARD COUNTY THE STATE OF MARYLAND.

SIGNATURE OF LICENSEE John Guanti DATE \_\_\_\_\_  
PRINT NAME OF LICENSEE Kristi @ All Temp HVAC INC. Com  
Email Address \_\_\_\_\_

<b>Validation</b> Check Number: <u>11271</u> Cash: _____ Receipt Number: <u>242541</u>
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Make check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

Word doc: T:\Updated Forms\hvac application  
Rev:10.2009

Well + Septic