

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3430 COURT HOUSE DRIVE ELLCOTT CITY, MD 21043 PERMITS (410)313-2455 INSPECTIONS (410)313-1810 AUTOMATED INFORMATION (410) 313-3800		HOWARD COUNTY PERMIT APPLICATION		PERMIT NUMBER B0035102	
Building Address <u>3020 Seneca Chief Trail</u> <u>Ellicott City, MD 21042</u>			Property Owner's Name <u>Madhu Bhasin</u>		
Suite/Apt. #: <u> </u> SDP/WP/Petition #: <u> </u>			Address <u>3020 Seneca Chief Trail</u>		
Census Tract <u>11310</u> Subdivision <u>Brantwood</u>			City <u>Ellicott City</u> State <u>MD</u> Zip Code <u>21042</u>		
Section <u> </u> Area <u> </u> Lot <u>25</u>			Home Phone <u>410-531-0483</u> Work Phone <u>410-362-3505</u>		
Tax Map <u>110</u> Parcel <u>436</u> Grid <u>21</u>			Applicant's Name & Mailing Address, (if other than stated hereon):		
Zoning <u>R1A</u> Map Coordinates <u>11A6</u> Lot size <u> </u>			Phone <u> </u> Fax <u> </u>		
Existing Use <u>SFD</u>			Contractor Company <u>Homeowner</u>		
Proposed Use <u>SFD w/deck</u>			Contact Person <u>Madhu Bhasin</u>		
Estimated Construction Cost \$ <u>5,000</u>			Address <u>3020 Seneca Chief</u>		
Description of Work <u>Deck, see plan for size + detail, 1 level deck, irregular shape w/steps 1500 sq. ft. w/ 10' screened gazebo</u>			City <u>Ellicott City</u> State <u>MD</u> Zip Code <u>21042</u>		
Occupant or Tenant <u>Same</u>			License No. <u> </u> Phone <u> </u> Fax <u> </u>		
Contact Name <u> </u>			Engineer or Architect Company <u> </u>		
Address <u> </u>			Contact Person <u> </u>		
City <u> </u> State <u> </u> Zip Code <u> </u>			Address <u> </u>		
Phone <u> </u> Fax <u> </u>			City <u> </u> State <u> </u> Zip Code <u> </u>		
Phone <u> </u> Fax <u> </u>			Phone <u> </u> Fax <u> </u>		

BUILDING DESCRIPTION - <u>COMMERCIAL</u>		BUILDING DESCRIPTION - <u>RESIDENTIAL</u>	
Building Characteristics	Utilities	Building Characteristics	Utilities
Height: <u> </u>	Water Supply: <u> </u> ☐ Public ☐ Private	SF Dwelling ☒ SF Townhouse ☐ Depth <u> </u> Width <u> </u>	Water Supply: <u> </u> ☒ Public ☐ Private
No. of stories: <u> </u>	Sewage Disposal: <u> </u> ☐ Public ☐ Private	1st floor: <u> </u> 2nd floor: <u> </u> Basement: <u> </u>	Sewage Disposal: <u> </u> ☒ Public ☐ Private
Gross area, sq. ft. per floor: <u> </u>	Electric Yes ☐ No ☐ Gas Yes ☐ No ☐	Finished Basement ☒ Unfinished Basement ☐ Crawl space ☐ Slab on Grade ☐ No. of Bedrooms <u> </u>	Electric Yes ☐ No ☒ Gas Yes ☒ No ☐
Use group: <u> </u>	Heating System: <u> </u> Electric ☐ Oil ☐ Natural Gas ☐ Propane Gas ☐	Multi-family dwellings: No. of efficiency units: <u> </u> No. of 1 BR units: <u> </u> No. of 2 BR units: <u> </u> No. of 3 BR units: <u> </u>	Heating System: <u> </u> Electric ☐ Oil ☐ Natural Gas ☒ Propane Gas ☐
Construction type: ☐ Reinforced Concrete ☐ Structural Steel ☐ Masonry ☐ Wood Frame	Sprinkler system: <u>N/A</u> ☐ ☐ Full ☐ Partial ☐ Other Suppression # of Heads <u> </u>	Other Structure: <u> </u> Dimensions: <u> </u> Footings: <u>post + pier</u> Roof: <u> </u>	Sprinkler system: <u>N/A</u> ☒ ☐ NFPA #13D ☐ NFPA #13R ☐ Other: <u> </u>
☐ State Certified Modular		☒ 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.

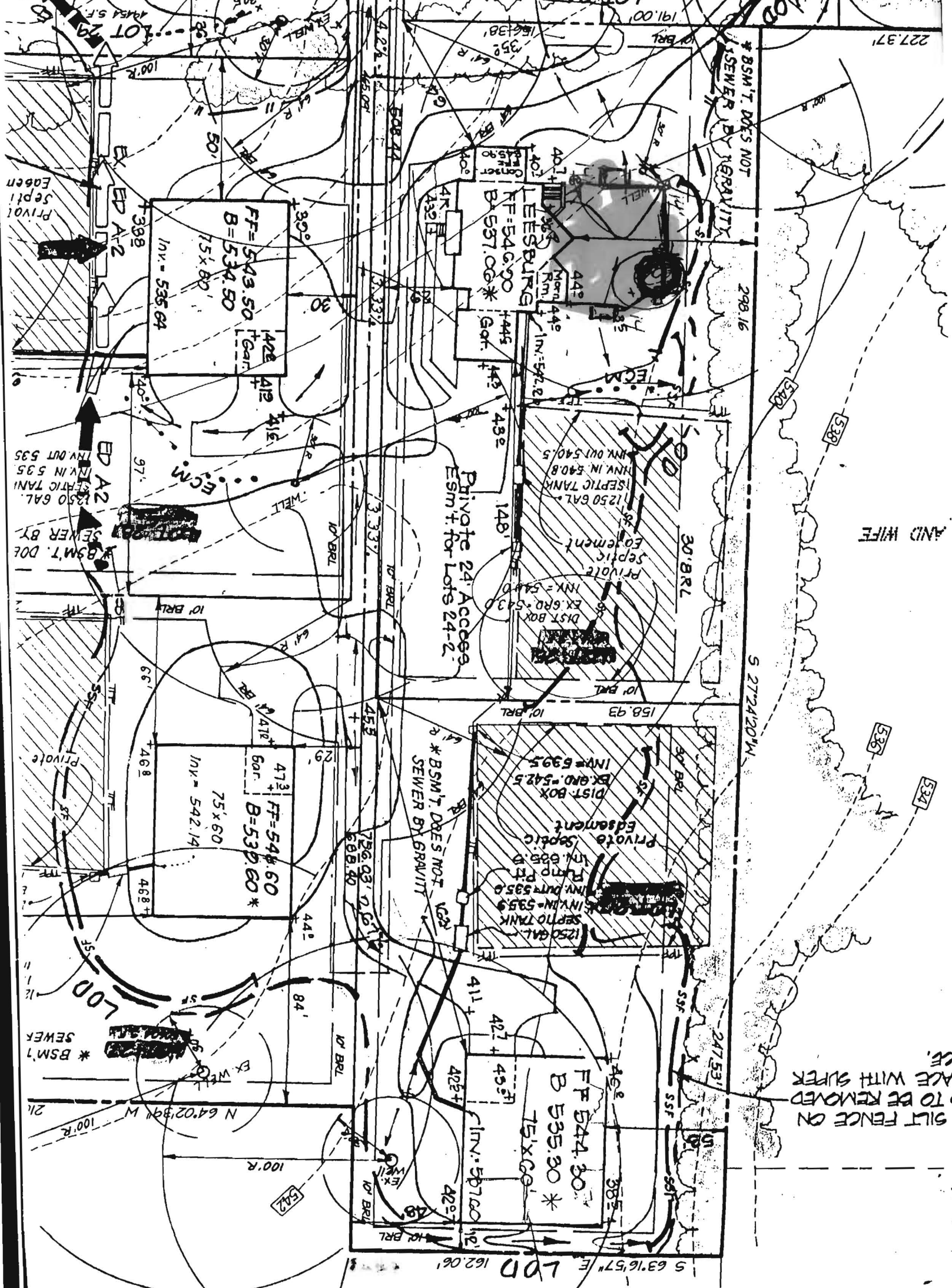
Madhu Bhasin
Applicant's Signature
Owner
Title/Company

MADHU BHASIN
Print Name
3/27/02
Date

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
** PLEASE WRITE NEATLY AND LEGIBLY. **
- FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#
Land Development DPZ			Front: <u> </u>	51083
State Highways			Rear: <u> </u>	Filing fee \$ <u>50</u>
Building Official			Side: <u> </u>	Permit fee \$ <u> </u>
Dev. Engineering DPZ			Side St.: <u> </u>	Excise tax \$ <u> </u>
Health	<u>3/27/02</u>	<u>Karen Goede</u>	All minimum setbacks met? ☐ YES ☐ NO	Add'l per. fee \$ <u> </u>
Fire Protection			Is Entrance Permit required? ☐ YES ☐ NO	TOTAL FEES \$ <u>30</u>
Is Sediment Control approval required prior to issuance?			Historic District? ☐ YES ☐ NO	Sub-total paid \$ <u> </u>
CONTINGENCY CONSTRUCTION START ☐			Lot Coverage for New Town Zone <u> </u>	Balance due \$ <u>12.33</u>
ONE STOP SHOP ☐			SDP/Red-line approval date <u> </u>	Check # <u>4754</u>
Distribution of Copies: White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA				Validation # <u> </u>
				Accepted by <u> </u>

Wed & Thur Walkthru 13



SILT FENCE ON
TO BE REMOVED
FACE WITH SILT
FENCE.

AND WIFE

Private 24' Access
Esm't for Lots 24-2

* BSM'T. DOES NOT
SEWER BY GRAVITY

S 27°24'20" W

S 63°16'57" E

227.37'

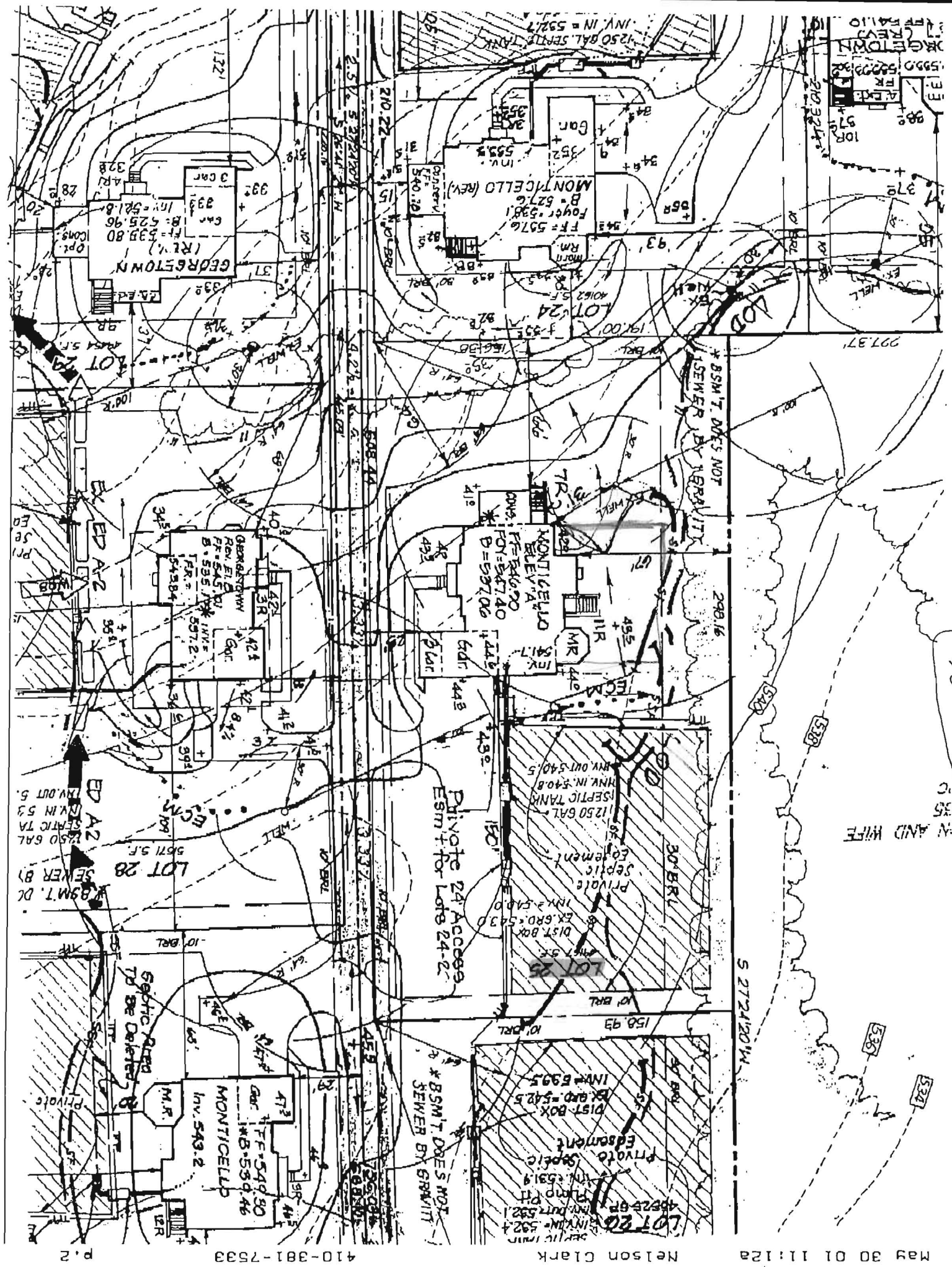
298.16

* BSM'T. DOES NOT
SEWER BY GRAVITY

Private
Septic
Tank

Private
Septic
Tank

* BSM'T.
SEWER



28-1025

N AND WIFE

Total linear feet of trench required 240 feet

Width of trench(es) 3.0 feet

Depth of trench(es) 4.0 feet

Depth of stone required below distribution pipe 1.5 feet

Approved Septic System Plan
Howard County Health Department

Amy M. M. C. 6/20/01
Signature Date