DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVE
ELLICOTT CITY, MD 21043
PERMITS (410)313-2455 INSPECTIONS (410)313-1810
AUTOMATED INFORMATION (410) 313-3800

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER B00129746

Building Address 11152 Whitehall Ln.
Ellicott City 21043

Suite/Apt. #: SDP/WP/Petition #:

Census Tract 6030 Subdivision Quarterfield III

Section 3 Area Lot 8

Tax Map 23 Parcel 77+84 Grid 15

Zoning RC Map Coordinates Lot size

Owner's Name Stokes

Address 1115 Old Hill Rd.

City Ellicott City State MD Zip Code 21042

Home Phone 410-461-8085 Work Phone 410-577-7200

Applicant's Name & Mailing Address, (if other than stated hereon):

410-203 2320

Phone Fax

Existing Use Vacant lot

Proposed Use Single family home

Estimated Construction Cost $ 30,000

Description of Work

4 bedroom 1/2 bath partially finished basement

Contractor Company JST Builders

Contact Person John Startt

Address 6030 Daybreak Cir. Suite 150 Box 146

City Clarksville State Md Zip Code 21029

License No. 806

Phone 410-854-0334 Fax 410-884-9983

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 Characteristics

Height:

No. of stories:

Gross area, sq. ft. per floor:

Use group:

Construction type:
___ Reinforced Concrete
___ Structural Steel
___ Masonry
___ Wood Frame

___ State Certified Modular

Utilities

Water Supply:
___ Public
___ Private

Sewage Disposal:
___ Public
___ Private

Electric Yes ☐ No ☐
Gas Yes ☐ No ☐

Heating System:
Electric ☐ Oil ☐
Natural Gas ☐
Propane Gas ☐

Sprinkler system: N/A ☐
___ NFPA #13
___ Full
___ Partial
___ Other Suppression

BUILDING DESCRIPTION - *RESIDENTIAL*

Building Characteristics

SF Dwelling ☒ SF Townhouse ☐

	Depth	Width
1st floor:	40	
2nd floor:		
Basement:		24

Finished Basement ☒ Unfinished Basement ☐
Crawl space ☐ Slab on Grade ☐
No. of Bedrooms 4

Multi-family dwellings:
No. of efficiency units:
No. of 1 BR units:
No. of 2 BR units:
No. of 3 BR units:

Other:
Dimensions:
Footings:
Roof:

___ State Certified Modular
___ Manufactured Home

Utilities

Water Supply:
___ Public
✓ Private

Sewage Disposal:
___ Public
✓ Private

Electric Yes ☒ No ☐
Gas Yes ☒ No ☐

Heating System:
Electric ☐ Oil ☐
Natural Gas ☐
Propane Gas ☐

Sprinkler system: N/A ☐
___ NFPA #13D
___ NFPA #13R
___ Other:

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.

VALIDATION

Applicant's Signature [signature] *Print Name* JOHN S. STARTT

Title/Company JST Builders Clarksville *Date* 4/20/01

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	5/7/01	Mark Rifkin
Fire Protection		

Is Sediment Control approval required prior to issuance?
YES ☐ NO ☐

CONTINGENCY CONSTRUCTION START: ☐
ONE STOP SHOP: ☐

DPZ SETBACK INFORMATION
Front:
Rear:
Side:
Side St.:
All minimum setbacks met?
YES ☐ NO ☐
Is Entrance Permit required?
YES ☐ NO ☐
Historic District?
YES ☐ NO ☐
Lot Coverage for NewTown Zone
SDP/Red-line approval date

PROPERTY ID#: 47429
Filing Fee $
Permit Fee $
(.10 sq. ft. ☐) (.15 sq. ft. ☐)
Excise Tax $
(.40 sq. ft. ☐) (.80 sq. ft. ☐)
TOTAL FEES
Check #
Validation #
Accepted by:

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

s:\permit.frm Rev. 8/25/98

under 5 Acres
nd apply soil Amendments as specified in 20.0 vegetative stabilization-
ilization Methods and Materials.

Approved Septic System Plan
Howard County Health Department

Mark Rifkin 5/7/01
Signature Date

THIS PLAN TO UTILIZE THE EXISTING SUPER SILT FENCE.

WHITE-TAIL LA

PLAN TO ACC
FOR BU
QUAR

2. PROPOSED 1500 GALLON SEPTIC TANK.
3. A. FIRST FLOOR ELEVATION 406.20
B. BASEMENT ELEVATION 396.53
C. INVERT OF SEPTIC SYSTEM AT HOUSE: 394.03
D. INVERT IN AT SEPTIC TANK: 393.55
E. INVERT OUT AT SEPTIC TANK: 393.23
F. PROPOSED GRADE OVER SEPTIC TANK: 396.00
G. INVERT AT DISTRIBUTION BOX: 386.00
H. EXISTING GROUND OVER DISTRIBUTION BOX: 390.00
4. LENGTH OF TRENCH TO BE DETERMINED AT TIME OF SEPTIC PERMIT ISSUANCE.
5. CONTRACTOR / BUILDER TO VERIFY ELEVATIONS IN FIELD BEFORE BEGINNING ANY CONSTRUCTION.
6. [illegible]

Total linear feet of trench required 240 feet

Width of trench(es) 3 feet

Depth of trench(es) 6 feet

Depth of stone required below distribution pipe 2 feet

1:30 PLAN BY FCC