



Building Permit Application

Howard County Maryland
Department of Inspections, Licenses and Permits
3430 Court House Drive
Permits: 410-313-2455
www.howardcountymd.gov

Date Received: _____

Permit No.: _____

Building Address: 1801 QUARTER HORSE DR
City: WOODSTOCK State: MD Zip Code: _____
Suite/Apt. #: _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: _____
Section: _____ Area: _____ Lot: _____
Tax Map: _____ Parcel: _____ Grid: _____
Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: SFH W/ FENCE 6FT TALL
Proposed Use: SF W/ IRON FENCE REPLACEMENT
Estimated Construction Cost: \$ 5000.00
Description of Work: REPLACING EXISTING FENCE WITH NEW FENCE, BUILD ENTRANCE COLUMNS
Occupant or Tenant: _____

Was tenant space previously occupied? ☐ Yes ☐ No

Contact Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Commercial Building Characteristics	Residential Building Characteristics
Height:	<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse
No. of stories:	Depth Width
Gross area, sq. ft./floor:	1 st floor:
	2 nd floor:
Area of construction (sq. ft.):	Basement:
	<input type="checkbox"/> Finished Basement
Use group:	<input type="checkbox"/> Unfinished Basement
	<input type="checkbox"/> Crawl Space
Construction type:	<input type="checkbox"/> Slab on Grade
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:
<input type="checkbox"/> Structural Steel	Multi-family Dwelling
<input type="checkbox"/> Masonry	No. of efficiency units:
<input type="checkbox"/> Wood Frame	No. of 1 BR units:
<input type="checkbox"/> State Certified Modular	No. of 2 BR units:
	No. of 3 BR units:
	Other Structure:
	Dimensions:
> Roadside Tree Project Permit	Footings:
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Roof:
Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular
	<input type="checkbox"/> Manufactured Home

Property Owner's Name: JASVINDER SINGH
Address: 1801 QUARTER HORSE DR
City: WOODSTOCK State: MD Zip Code: 21043
Phone: 443 829-9500 Fax: _____
Email: SGILL999@GMAIL.COM

Applicant's Name & Mailing Address, (If other than stated herein)

Applicant's Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Contractor Company: _____
Contact Person: _____
Address: HOME OWNER
City: _____ State: _____ Zip Code: _____
License No.: _____
Phone: _____ Fax: _____
Email: _____

Engineer/Architect Company: _____
Responsible Design Prof.: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Utilities
Water Supply
<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Private
Sewage Disposal
<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Private
Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
Heating System
<input type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
Other:
Sprinkler System:
<input type="checkbox"/> Yes <input type="checkbox"/> No
Grading Permit Number:
Building Shell Permit Number:

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]
Email Address: SGILL999@GMAIL.COM
Title/Company: _____

Print Name: SURJEEET SINGH
Date: 12/9/13

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		

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

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

Distribution of Copies: White: Building Officials Green: PSZA,Zoning Yellow: PSZA,Engineering Pink: Health Gold: SHA

APPROVED

WALK-THRU BUILDING PERMIT

BP#

AP#

APP. SANITARY BOARD DATE:

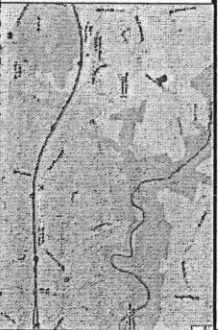
DESIG. OF WORK: 10 ft. tall wood fence

Approved by 8/30/09

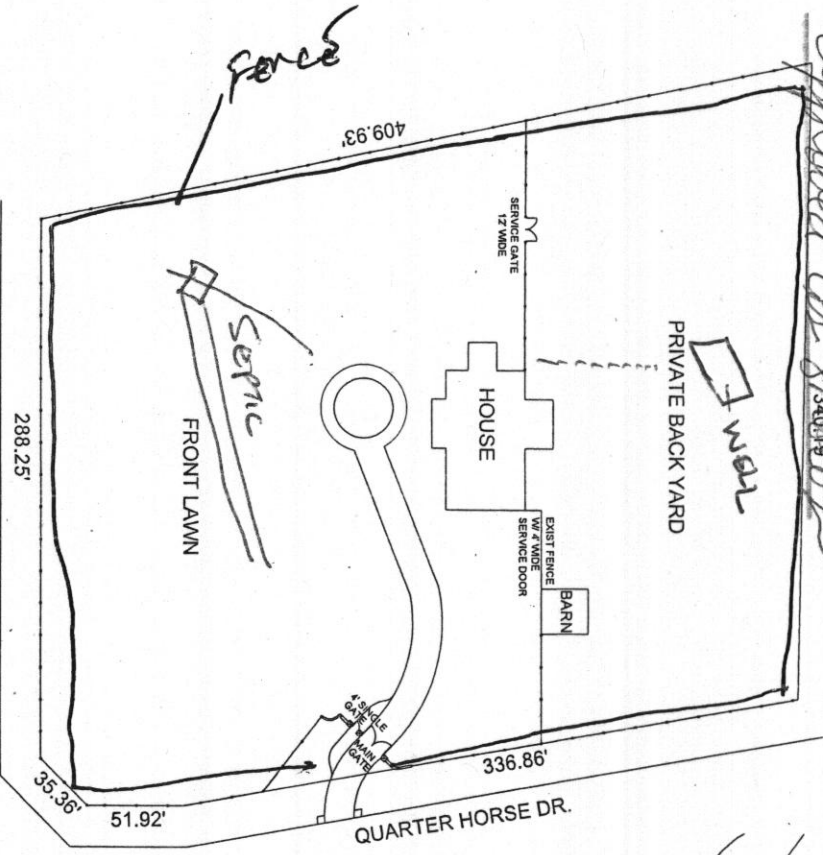
GENERAL REQUIREMENTS

- THE WORK TO BE PERFORMED SHALL BE IN CONFORMANCE WITH THE FOLLOWING:
1. THE INTERNATIONAL RESIDENTIAL CODE 2006 FOR ONE AND TWO FAMILY DWELLINGS AND ALL LOCAL CODES AND ORDINANCES FOR ALL JURISDICTIONS HAVING AUTHORITY.
 2. IN AREAS WHERE THE DRAWINGS DO NOT ADDRESS METHODOLOGY, THE CONTRACTOR SHALL BE BOUND TO PERFORM IN STRICT COMPLIANCE WITH MANUFACTURER'S SPECIFICATIONS AND/OR RECOMMENDATIONS.
 3. THE DRAWINGS ARE INTENDED TO CONVEY THE SCOPE OF THE WORK AND IN NO WAY ARE TO BE CONSTRUED AS TOTALLY COMPREHENSIVE CONSTRUCTION DOCUMENTS.
 4. THE CONTRACTOR IS RESPONSIBLE TO MAKE ALL NECESSARY PENETRATIONS THROUGH WALLS, FLOORS, ROOFS, AND CEILINGS FOR ALL DUCTS, PIPES, ETC. WHETHER OR NOT SUCH PENETRATIONS ARE SPECIFICALLY SHOWN ON THE ARCHITECTURAL DRAWINGS.
 5. THE CONTRACTOR SHALL PROVIDE ALL LABOR, MATERIALS, EQUIPMENT, SUPERVISION, DIRECTION, EXECUTION AND PROTECTION OF ALL OPERATIONS NECESSARY TO COMPLETE THE WORK IN ACCORDANCE WITH THE CONTRACT DOCUMENTS.
 6. THE CONTRACTOR SHALL BE SOLELY RESPONSIBLE FOR ALL CONSTRUCTION MEANS, METHODS, TECHNIQUES, SEQUENCES, AND PROCEDURES AND FOR COORDINATING ALL PORTIONS OF THE WORK UNDER THE CONTRACT.
 7. THE CONTRACTOR SHALL PAY ALL APPLICABLE TAXES AND FEES AND SHALL SECURE AND PAY FOR ALL PERMITS NECESSARY FOR COMPLETION OF THE WORK.
 8. ON-SITE VERIFICATION OF ALL DIMENSIONS AND CONDITIONS SHALL BE THE RESPONSIBILITY OF THE CONTRACTOR AND HIS SUBCONTRACTORS.
 9. SHOULD THE CONTRACTOR OR SUBCONTRACTOR FIND, AFTER A VISIT TO THE SITE OR DURING CONSTRUCTION, ANY DISCREPANCIES, OMISSIONS, AMBIGUITIES, OR CONFLICTS IN OR AMONG THE CONTRACT DRAWINGS, OR BE IN DOUBT AS TO THEIR MEANING, HE SHOULD BRING THESE ITEMS TO THE ATTENTION OF THE ARCHITECT FOR DIRECTION BEFORE PROCEEDING WITH ANY OF THE WORK IN QUESTION.
 10. THE GENERAL NOTES AND TYPICAL DETAILS APPLY THROUGHOUT THE DRAWINGS UNLESS OTHERWISE NOTED OR SHOWN.
 11. DIMENSIONS SHALL BE READ OR CALCULATED AND NEVER SCALED. ALL DIMENSIONS ARE TO THE FINISH UNLESS NOTED OTHERWISE.
 12. THE CONTRACTOR WARRANTS TO THE OWNER THAT ALL MATERIALS AND EQUIPMENT FURNISHED UNDER THE CONTRACT WILL BE NEW AND THAT ALL WORK SHALL BE PERFORMED BY LABOR SKILLED IN THE TASK BEING PERFORMED AND THAT THE WORK WILL BE OF GOOD QUALITY, FREE FROM FAULTS AND DEFECTS, AND IN CONFORMANCE WITH THE CONTRACT DOCUMENTS.
 13. AT THE COMPLETION OF THE JOB, THE CONTRACTOR SHALL PROVIDE GUARANTEES COVERING ALL MATERIALS AND WORKMANSHIP PERFORMED BY HIM AND HIS SUBCONTRACTORS FOR A PERIOD OF ONE YEAR FROM THE DATE OF SUBSTANTIAL COMPLETION. THE CONTRACTOR SHALL TURN OVER TO THE OWNER ALL GUARANTEES OF ALL MATERIALS USED IN THE WORK OF THE CONTRACT.
 14. THE ARCHITECT ASSUMES NO RESPONSIBILITY FOR CHANGES MADE BY THE CONTRACTOR, HIS FORCES, OR THE OWNER DURING CONSTRUCTION.
 15. THE PROJECT IS NOT SUBJECT TO SUPERVISION BY THE ARCHITECT DURING CONSTRUCTION.

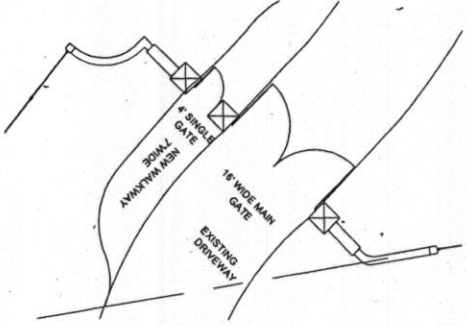
1 LOCATION PLAN
A-1 SCALE: NTS



2 SITE PLAN
A-1 SCALE: 1"=50'-0"



3 GATE PLAN
A-1 SCALE: 1"=50'-0"



NOT TO SCALE
OWNER IS
Responsible for
fence

REVISIONS				PROJECT:	SHEET NO.
REV	DATE	BY	DESCRIPTION		
				FENCE INSTALLATION 1801 QUARTER HORSE DR. WOODSTOCK HOWARD COUNTY, MD	A-1
OWNER NAME: MR. SUKJEET GILL CONTACT: 443-829-9500				SHEET TITLE: SITE PLAN & NOTES	ZB Architectural Management Services Design / Build, Project Planning Construction Administration/CAD 912 CRAIN HWY N, GLEN BURNIE, MD 21061 Tel: 443-618-5497 email: zbs1@live.com DATE: 12-1-13

4/1/91 / 1/2 11/20/90
ASAP
P.A.

PERMIT

File

4/1/91(2) P.C.O.
P 46749 C.B.O.

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 34924

DISTRICT 3rd

DATE 01/14/91

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

461-9933

DATE SYSTEM APPROVED 4/2/91

INSPECTOR C.B.O.

INDEXED

VanSant Plumbing & Heating, Inc. IS PERMITTED TO INSTALL ☒ ALTER ☐

ADDRESS 5 N. Main Street, Mt. Airy, Maryland 21771 PHONE 795-6566

SUBDIVISION Bracciale Property LOT 1 ROAD 1840 Woodstock Road

PROPERTY OWNER Williamsburg Builders

ADDRESS

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 180+

TRENCHES - 180 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 7 feet below original grade. Effective area begins at 3 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Start the first trench 165 feet from the front lot line and 95 feet from the left lot line as seen when facing the lot from Woodstock Road. Run trenches on contour in both directions.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 16 JAN 91 R11

PLANS APPROVED BY Sid Abel cm DATE 05/25/89

COVER NO WORK UNTIL INSPECTED AND APPROVED

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS, 90° ELBOWS NOT ACCEPTABLE.

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

PERMIT VOID AFTER TWO YEARS

NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON. CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

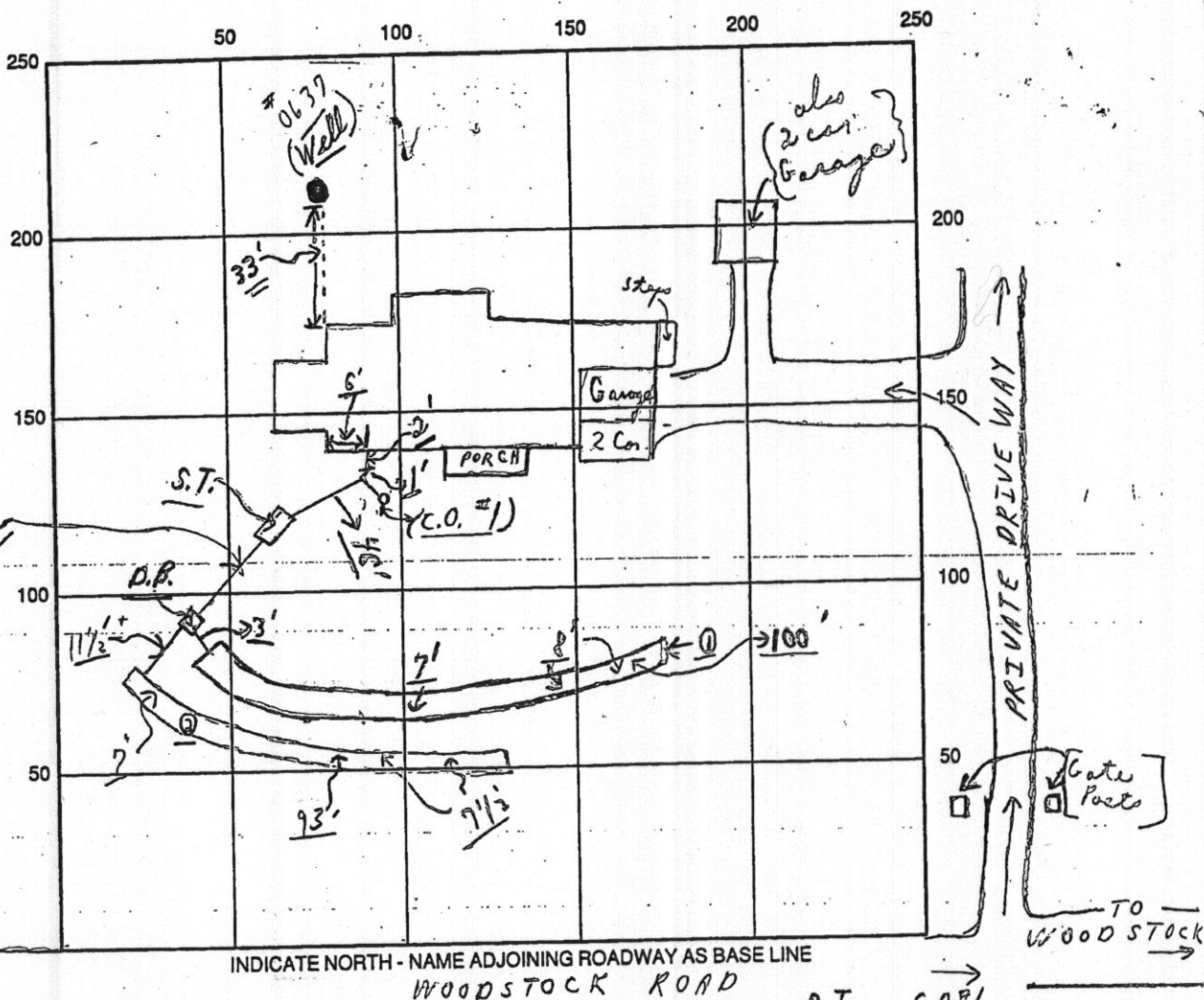
*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

HD-260(6-90)

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

46749

SEPTIC CONSTRUCTION 1801 QUARTER #1



SEPTIC TANK LEVEL OK CLEANOUTS S.T. OK C.O.#1 OK

DISTRIBUTION BOX LEVEL OK (Baffles is in)

DRAIN FIELD/TITLE DEPTH 7' away TRENCH WIDTH 2 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 4 FT. TOTAL LENGTH 193'

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 772 SQ. FT.

DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA 772 SQ. FT. #

REMARKS: A.M. 4/1/91 Partial - trench - ok for stone only; P.M. -
4/1/91 Trench #1 and plumbing from house to C.B. ok
ok to cover Trench #2 ok for stone; C.B. {HOLD FOR A CALL 4/2/91}
4/2/91 FINAL - OK TO COVER LAST TRENCH.

4/1/91 W.P.I. ok at well only. A.M. - Partial; on 4/2/91. C.B. Final & Home

DATE SYSTEM APPROVED 4/2/91 INSPECTOR Charles B. Ryan, Theodor

SEPTIC 1801 QUATER HORSE

