1 65164

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVE
ELLICOTT CITY, MD 21043
PERMITS (410) 313-2455 INSPECTIONS (410) 313-1910
AUTOMATED INFORMATION (410) 313-3000

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER B 00147533

Building Address 15179 Triadelphia Mill Rd
Glenelg Md 21737

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

Census Tract 605.01 Subdivision James Brown Prop

Section _____ Area _____ Lot 1

Tax Map 27 Parcel 149 Grid 9

Zoning RC DEO Map Coordinates 13A2 Lot size

Property Owner's Name KD Builders, LLC

Address 6420 Autumn Sky Way

City Columbia State Md Zip Code 21044

Home Phone _____ Work Phone (443) 324-4732

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

Phone _____ Fax _____

Existing Use S.F. Home

Proposed Use Single Family W 1000UG LP TANK

Estimated Construction Cost $ 3500

Description of Work DIG HOLE FOR 1000UG LP TANK
AND HOOK TO STUB OUT @ HOUSE

Contractor Company United Propane

Contact Person Rick

Address 114 W Patrick Blvd

City Mt. Airy State Md Zip Code 21771

License No. [illegible]

Phone (301) 829-2828 Fax (301) 829-4394

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 ☐
____ Full
____ Partial
____ Other Suppression
____ # of Heads

BUILDING DESCRIPTION - *RESIDENTIAL*

Building Characteristics

SF Dwelling ☑ SF Townhouse ☐

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

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

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

Other Structure: _____
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.

Alicia E Barrett
Applicant's Signature

Alicia E. Garrett
Print Name

_____
Title/Company

4/19/04
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	4/27/04	
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#: 57940

Filing fee	$	
Permit fee	$	100.00
Excise tax	$	10.00
Add'l per. fee	$	
TOTAL FEES	$	110.00
Sub-total paid	$	
Balance due	$	
Check	#	[illegible]
Validation	#	[illegible]

Accepted by _____

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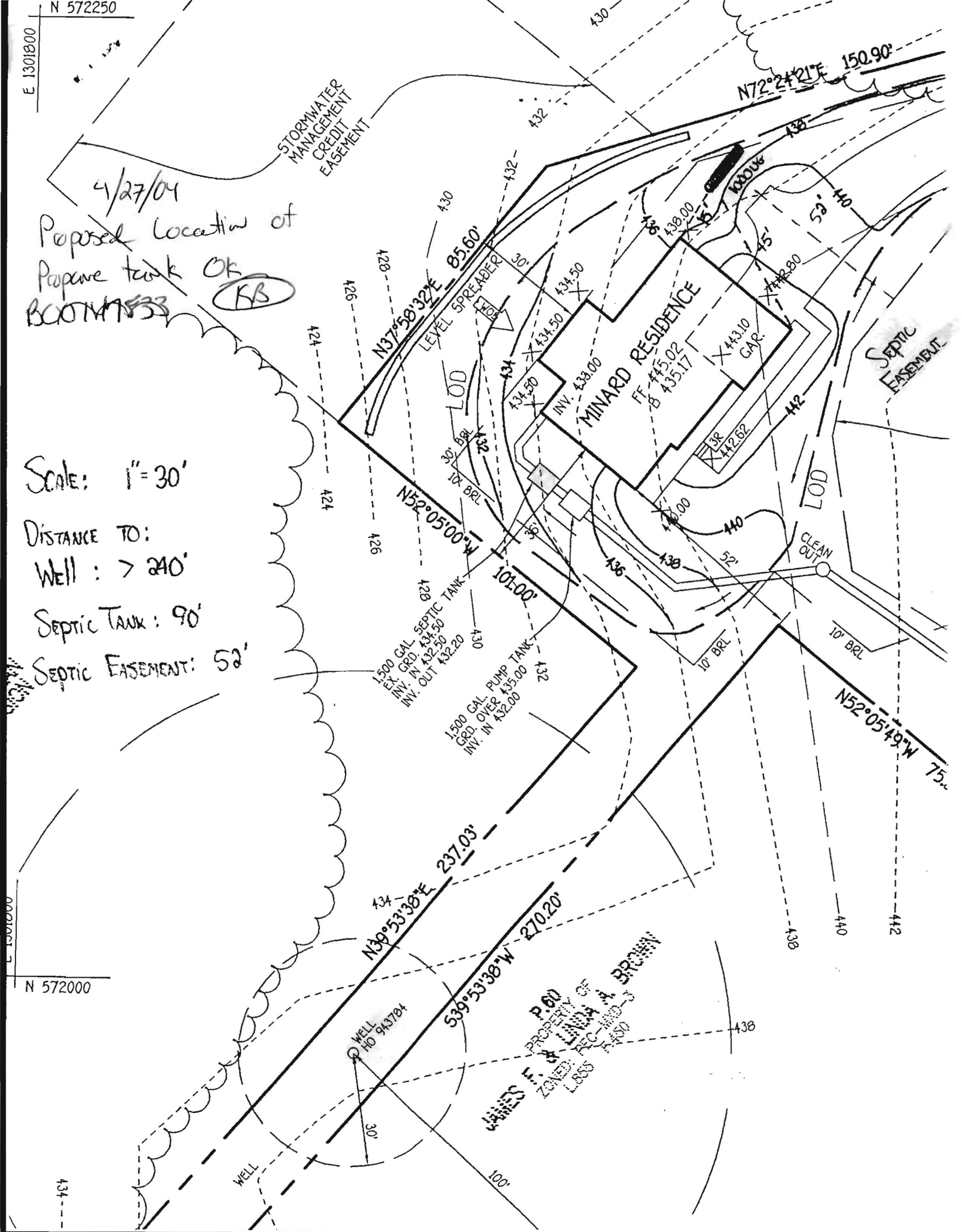
Rev. 5/17/00



N 572250
E 1301800
STORMWATER MANAGEMENT CREDIT EASEMENT
4/27/04
Proposed Location of Propane tank OK
KB
Scale: 1" = 30'
Distance to:
Well : > 240'
Septic Tank : 90'
Septic Easement: 52'
N72°24'21"E 150.90'
N37°58'32"E 85.60'
LEVEL SPREADER
LOD
MINARD RESIDENCE
FF 445.02
B 435.17
GAR.
INV. 433.00
30' BRL
10' BRL
N52°05'00"W
101.00'
1,500 GAL. SEPTIC TANK
EX. GRD. 434.50
INV. IN 432.50
INV. OUT 432.20
1,500 GAL. PUMP TANK
GRD. OVER 435.00
INV. IN 432.00
CLEAN OUT
Septic Easement
N52°05'49"W
N39°53'38"E 237.03'
S39°53'38"W 270.20'
N 572000
WELL HO 943784
WELL
JAMES E. & LINDA A. BROWN
P.60
PROPERTY OF
ZONED: REC-MHD-3
L.855 F.450
100'
30'

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) 313-3900

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER B00144749

Building Address 15179 Tridelphia Mill Road
Glenelg, MD 21737
Suite/Apt. #: NA SDP/WP/Petition #:
Census Tract 6401 Subdivision James B. Parcel
Section Area Lot 1
Tax Map 27 Parcel 60 Grid 9
Zoning ~~PEC-MXD~~ RC-DEO Map Coordinates 13 A-1 Lot size 1 acre

Property Owner's Name KD Builders, LLC
Address c/o B. James Greenfield, 6420 Autumn Sky Way
City Columbia State MD Zip Code 21044
Home Phone Work Phone (410)730-3939
Applicant's Name & Mailing Address, (if other than stated hereon):
Phone Fax

Existing Use Vacant property
Proposed Use Single Family Dwelling
Estimated Construction Cost $ 100,000.00
Description of Work "Minard House" model

Contractor Company KD Builders, LLC
6420 Autumn Sky Way
Contact Person B. James Greenfield or Dee Sperling
Address Same
City Columbia State MD Zip Code 21044
License No. 3525
Phone 410-531-4934 Fax 410 992 3020

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

Engineer or Architect Company D.W. Taylor
Contact Person Michael
Address 5024 Dorsey Hall Drive, Ste. 203
City Ellisott City State MD Zip Code 21043
Phone 410-964-1181 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 ☐
____ Full
____ Partial
____ Other Suppression
____ # of Heads

BUILDING DESCRIPTION - *RESIDENTIAL*

Building Characteristics

SF Dwelling ☒ SF Townhouse ☐
Depth Width
1st floor:
2nd floor:
Basement: Partial
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 Structure:
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.

B. James Greenfield
Applicant's Signature
Owner, KD Builders, LLC
Title/Company

B. James Greenfield
Print Name
10/24/03
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	11/24/03	Mark Lipkin
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 Accepted by

PROPERTY ID#: 53943

Filing fee	$ 100.00
Permit fee	$
Excise tax	$
Sub-total paid	$
Add'l permit fee	$
TOTAL FEES	$
Balance due	$
Check	# 27068
Validation	# 249356

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Rev. 10/15/98