



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: 8-29-14

Permit No.: B14003209

PROBLEM ADDRESS

Building Address: 10833 Scaggsville Rd
City: Laurel State: _____ Zip Code: _____
Suite/Apt. #: _____ SDP/WP/BA #: F-14-03
Census Tract: _____ Subdivision: Roseville Oaks
Section: _____ Area: _____ Lot: _____
Tax Map: 46 Parcel: 56 Grid: 11
Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: Vacant Lot
Proposed Use: Sales trailers
Estimated Construction Cost: \$ 10,000
Description of Work: Sales trailers
60x12

Occupant or Tenant: Owner
Was tenant space previously occupied? ☐ Yes ☐ No
Contact Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Property Owner's Name: CM Haddon LLC
Address: 1355 Beverly Rd Ste 330
City: McLean State: VA Zip Code: 22101
Phone: 703-898-0233 Fax: _____
Email: _____

Applicant's Name & Mailing Address (if other than stated herein)
Applicant's Name: Rachel Carr
Address: 6553 Ballymore Ln
City: Charlesville State: MD Zip Code: 20829
Phone: 240-988-7305 Fax: _____
Email: Carrcrache@gmail.com

Contractor Company: Craftmark Homes
Contact Person: Dan Schopen
Address: 1355 Beverly Rd Ste 330
City: McLean State: VA Zip Code: 22101
License No.: 451-1131
Phone: 703-898-0233 Fax: _____
Email: _____

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

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

☐ Roadside Tree Project Permit
☐ Yes ☒ No

Roadside Tree Project Permit # _____

Utilities	
Water Supply	
<input checked="" type="checkbox"/> Public	
<input type="checkbox"/> Private	
Sewage Disposal	
<input checked="" type="checkbox"/> Public	
<input type="checkbox"/> Private	
Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Heating System	
<input checked="" 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 checked="" 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: Rachel Carr Print Name: Rachel Carr
Email Address: Carrcrache@gmail.com Date: 8/29/14
Title/Company: Owner/CP

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	<u>9/18/14</u>	<u>H. Oswald</u>

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

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 New Town Zone: _____
SDP/Red-line approval date: _____

Filing Fee	\$ <u>55.00</u>
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

Oswald, Hank

From: David Schoen [dschoen@CraftmarkHomes.com]
Sent: Wednesday, September 17, 2014 4:19 PM
To: Oswald, Hank
Subject: RE: Sales trailer at Reservoir Estates pending

It will be pumped into the holding tank unless you think I should do something different. The water is to fill the toilet bowl and wash hands only. We will have bottled water for consumption.

Dave Schoen
Production Manager
Craftmark Homes, Inc.
703-898-0377

From: Oswald, Hank [mailto:hoswald@howardcountymd.gov]
Sent: Wednesday, September 17, 2014 4:17 PM
To: David Schoen
Subject: RE: Sales trailer at Reservoir Estates pending

Mr. Schoen:

Is the trailer being directly supplied by public water or is water being pumped into the holding tank?

Hank

From: David Schoen [mailto:dschoen@CraftmarkHomes.com]
Sent: Wednesday, September 17, 2014 2:54 PM
To: Oswald, Hank
Cc: carrache@gmail.com
Subject: RE: Sales trailer at Reservoir Estates pending
Importance: High

Mr. Oswald,

Please see attached response letter. Please let me know if you need any additional information.

Thanks,

Dave Schoen
Production Manager
Craftmark Homes, Inc.
Manager for Reservoir Estates
703-898-0377

From: "Oswald, Hank" <hoswald@howardcountymd.gov>
Date: September 17, 2014 at 1:39:23 PM EDT
To: Rachel Carr <carrache@gmail.com>
Subject: RE: Sales trailer at Reservoir Estates pending

Hi Rachel:

Please see attached letter regarding BP # B14003209.

Thanks,

Hank

Hank Oswald, L.E.H.S.
Howard County Health Department
Well & Septic Program
8930 Stanford BLVD
Columbia, MD 21045
410-313-1786
410-313-2648 (Fax)

From: Rachel Carr [<mailto:carrache@gmail.com>]
Sent: Tuesday, September 16, 2014 1:30 PM
To: Oswald, Hank
Subject: Sales trailer at Reservoir Estates pending

Hi Hank,

I was looking into our application for a sales trailer at Reservoir Estates and found that is pending still in health. Can you please provide a status update on this and what if anything you need from us for it to get approval.

Application number is

B14003209.

Thank you,
Rachel Carr
Carr Permitting Solutions



Bureau of Environmental Health

8930 Stanford Boulevard, Columbia, MD 21045

Main: 410-313-2640 | Fax: 410-313-2648

TDD 410-313-2323 | Toll Free 1-866-313-6300

www.hchealth.org

Facebook: www.facebook.com/hocohealth

Twitter: [HowardCoHealthDep](https://twitter.com/HowardCoHealthDep)

Maura J. Rossman, M.D., Health Officer

September 17, 2014

CARR PERMITTING SOLUTIONS
6557 BALLYMORE LANE
CLARKSVILLE, MD 21029
RACHEL CARR

*Sent via email to: **CARRRACHE@GMAIL.COM***

RE: B14003209
10833 Scaggsville Road
Laurel, MD

RACHEL CARR:

This letter is in response to building permit B14003209. The application describes a 60' x 12' temporary sales trailer connected to public water but private septic. This office will need confirmation that the sewer tanks will be attached to the trailer.

Building permit approval is being withheld until this requirement is confirmed in writing to the Health Department. I may be reached at (410) 313-1786 if you would like to discuss the project.

Respectfully,

Hank Oswald

Hank Oswald, L.E.H.S
Bureau of Environmental Health
Well & Septic Program
