



Office of the Health Officer

7178 Columbia Gateway Drive, Columbia, MD 21046-2147

Main: 410-313-6300 | Fax: 410-313-6303

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

www.hchealth.org

Facebook: www.facebook.com/hocohealth

Twitter: HowardCoHealthDep

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

DATE: June 27, 2013

TO: Anne and Jeff Gellner

Via-e-mail: agellner@verizon.net

RE: **Building Permit # B13001609**

1149 Day Road

Sykesville, Maryland 21784

To Whom It May Concern:

On June 19th a complete review of your proposal requesting approval of building permit B13001609 has been placed on hold until the following requirements have been met. On June 27, 2013 the project manager Dan More of Viking Homes was notified of all requirements needed to proceed with the building plan. And they are as follows:

- Percolation Testing will be needed for soil profiles and verifying the systems functionality.
- After percolation testing, a percolation certification plan must be submitted and approved.
- Best Available Technology will be required for the new septic tank that is required because of the increase in living space.

Your building permit will be placed "on hold" until all Health Department requirements are met. If you have any questions or correspondence, I can be reached at the above address or by telephone at (410) 313-2775.

Respectfully,

Dana Bernard, REHS/RS

Environmental Specialist II

Bureau of Environmental Health

Well and Septic Program

Phone (410) 313-2775

E-mail: DBernard@howardcountymd.gov

cc: Well & Septic program file

Melissa Clark @ Blue House

Permit No.:

Building Address: 1149 DAY ROAD
City: SYKESVILLE State: MD Zip Code: 21784
Suite/Apt. # _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: DICKY FARM
Section: _____ Area: _____ Lot: 2B
Tax Map: 9 Parcel: _____ Grid: _____
Zoning: _____ Map Coordinates: _____ Lot Size: 2.9578

Property Owner's Name: ANNE & JEFF GEMNER
Address: 1149 DAY ROAD
City: SPYGLASSVILLE State: MO Zip Code: 21704
Phone: 410-489-4705 Fax: _____
Email: AGEMNER@VERIZON.NET

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

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

Existing Use: RESIDENTIAL
Proposed Use: RESIDENTIAL
Estimated Construction Cost: \$ 125,000
Description of Work: ADD: 2 CAR GARAGE,
BATH, OFFICE, DECK. EXPAND
KITCHEN & DINING ROOM
Occupant or Tenant:

Occupant or Tenant: _____

Was tenant space previously occupied? ☐ Yes ☐ No

Contact Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

Contractor Company: _____

Contact Person: _____

Address: _____

City: _____ State: _____ Zip Code: _____

License No. : _____

Phone: _____ Fax: _____

Email: _____

Engineer/Architect Company: bluehaze architecture

Responsible Design Prof.: MELISSA CLARK

Address: 1993 BARLEY RD

City: MARLBOROUGH State: MD Zip Code: 21104

Phone: 410 549 3377 Fax: 410 549 3377

Email: MCCLARK@BLUEHAWKRESEARCH.COM

Commercial Building Characteristics	Residential Building Characteristics
Height:	<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse
No. of stories: <u>1 + BASEMENT</u>	<u>Depth</u> <u>Width</u>
Gross area, sq. ft./floor:	1 st floor: <u>2535 SF</u>
	2 nd floor:
Area of construction (sq. ft.):	Basement:
<u>1633 FINISH. 270 DECK</u>	<input type="checkbox"/> Finished Basement
Use group:	<input type="checkbox"/> Unfinished Basement
	<input checked="" type="checkbox"/> Crawl Space
<u>Construction type:</u>	<input type="checkbox"/> Slab on Grade
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:
<input type="checkbox"/> Structural Steel	<u>Multi-family Dwelling</u>
<input type="checkbox"/> Masonry	No. of efficiency units:
<input checked="" 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:
> <u>Roadside Tree Project Permit</u>	Footings: <u>1' x 2' CONC.</u>
<input type="checkbox"/> Yes <input type="checkbox"/> No	Roof: <u>ASP. SHG / WD TRUSS</u>
<u>Roadside Tree Project Permit #</u>	<input type="checkbox"/> State Certified Modular
	<input type="checkbox"/> Manufactured Home

Utilities	
<u>Water Supply</u>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
<u>Sewage Disposal</u>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<u>Heating System</u>	
<input type="checkbox"/> Electric <input checked="" type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
<u>Sprinkler System:</u>	
<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
mcbride@bluehouseARCH.com
Email Address
bluehouse architecture, llc
Title/Company

PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.
Melissa Clark
 Print Name
04/25/13
 Date

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		

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	\$ 25.00
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

T:\Operations\Updated Forms\Building app\mp 8.2012.docx

057



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.: B13001609

Building Address: 1149 DAY ROAD
City: SYKEVILLE State: MD Zip Code: 21784
Suite/Apt. #: _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: DICKY FARMS
Section: _____ Area: _____ Lot: 28
Tax Map: 9 Parcel: _____ Grid: _____
Zoning: _____ Map Coordinates: _____ Lot Size: 2.4578 AC.

Existing Use: RESIDENTIAL
Proposed Use: RESIDENTIAL
Estimated Construction Cost: \$ 125,000
Description of Work: ADD: 2 CAR GARAGE, BATH, OFFICE, DECK. EXPAND KITCHEN & DINING ROOM
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: <u>1 + BASEMENT</u>	Depth: _____ Width: _____
Gross area, sq. ft./floor: _____	1 st floor: <u>2535 SF</u>
Area of construction (sq. ft.): _____	2 nd floor: _____
<u>103 FINISH. 270 DECK</u>	Basement: _____
Use group: _____	<input type="checkbox"/> Finished Basement
Construction type: _____	<input type="checkbox"/> Unfinished Basement
<input type="checkbox"/> Reinforced Concrete	<input checked="" type="checkbox"/> Crawl Space
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Slab on Grade
<input type="checkbox"/> Masonry	No. of Bedrooms: _____
<input checked="" type="checkbox"/> Wood Frame	<u>Multi-family Dwelling</u>
<input type="checkbox"/> State Certified Modular	No. of efficiency units: _____
	No. of 1 BR units: _____
	No. of 2 BR units: _____
	No. of 3 BR units: _____
	Other Structure: _____
	Dimensions: _____
<input checked="" type="checkbox"/> Roadside Tree Project Permit	Footings: <u>1'x2' CONC.</u>
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Roof: <u>ASP. SHG/ND TRUSS</u>
Roadside Tree Project Permit # _____	<input type="checkbox"/> State Certified Modular
	<input type="checkbox"/> Manufactured Home

Property Owner's Name: ANNE & JEFF GEMNER
Address: 1149 DAY ROAD
City: SYKEVILLE State: MD Zip Code: 21784
Phone: 410-407-4765 Fax: _____
Email: AGEMNER@VERIZON.NET

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: _____
City: _____ State: _____ Zip Code: _____
License No.: _____
Phone: _____ Fax: _____
Email: _____

Engineer/Architect Company: bluehaze architecture
Responsible Design Prof.: MELISSA CLARK
Address: 1993 DARLEY RD
City: MARRIOTTVILLE State: MD Zip Code: 21104
Phone: 410-549-3317 Fax: 410-549-3317
Email: MCLARK@BLUEHAZEARCH.COM

Utilities	
<u>Water Supply</u>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
<u>Sewage Disposal</u>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<u>Heating System</u>	
<input type="checkbox"/> Electric <input checked="" type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other: _____	
<u>Sprinkler System:</u>	
<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: Melissa Clark
Email Address: mclark@bluehazeARCH.com
bluehaze architecture, llc
Title/Company

Print Name: Melissa Clark
Date: 04/25/13

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

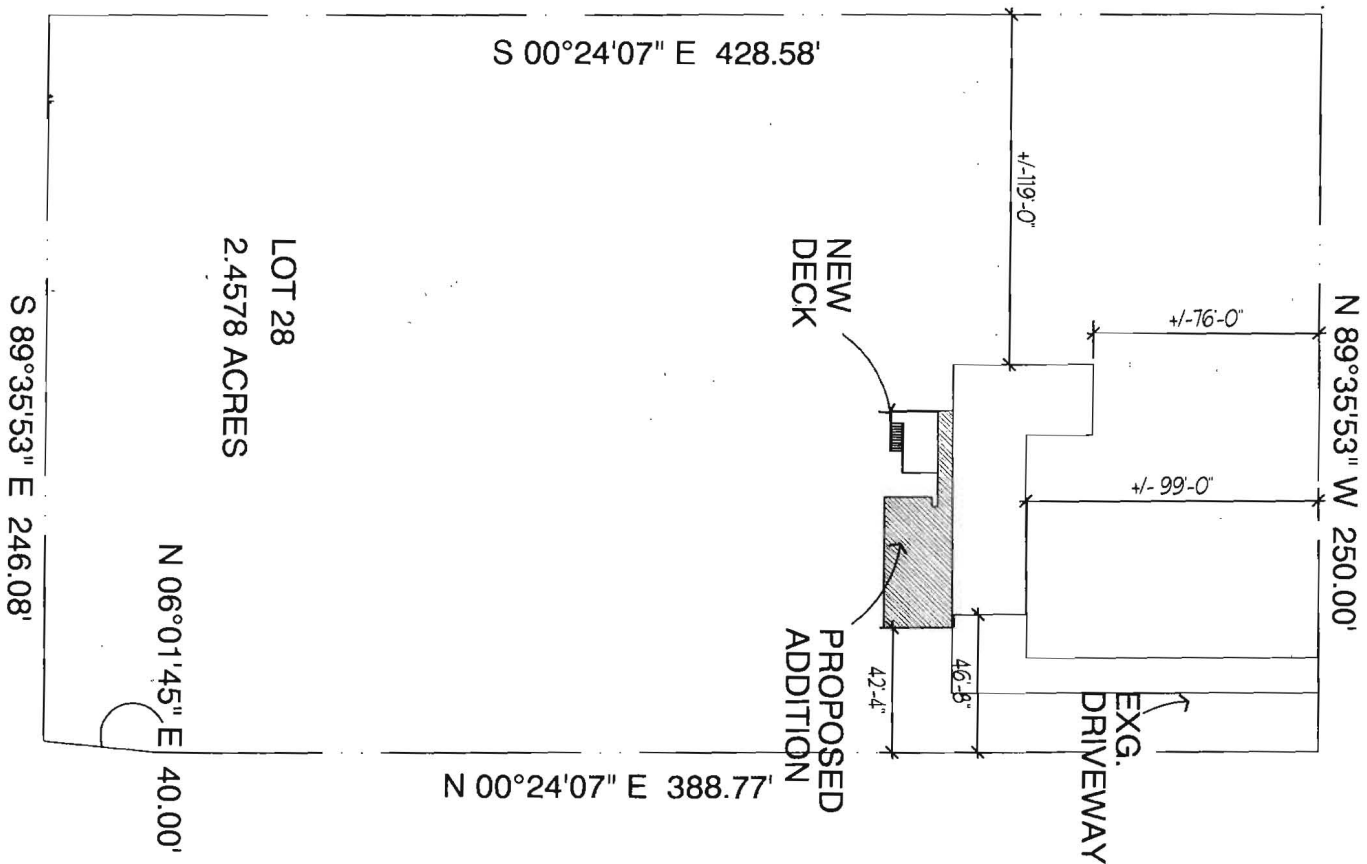
DPZ SETBACK INFORMATION

Front: _____
Rear: _____
Side: _____
Side St: _____
All minimum setbacks met? ☐ 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>25.00</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	#

0571

DAY ROAD



BASED ON SURVEY PREPARED BY HUDKINS & ASSOCIATES, INC., JUNE 23, 1986

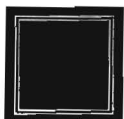
NORTH

DRAWING TITLE

PROPOSED SITE PLAN

PROJECT NAME

GELLNER RESIDENCE ADDITION



bluehouse architecture, llc

1993 Barley Road
Marriottsville, Maryland 21104
mclantz@bluehouseARCH.com

Phone: 410-549-3377
Fax: 410-549-3377
www.bluehouseARCH.com

FOR DESIGN
REVIEW ONLY -
NOT FOR
CONSTRUCTION

SCALE :

1/64" = 1'-0"

DATE :

©04/07/2013

FILE No. :

12012-cd

PROJ. NO.

12012

DRAWING NO.

site

1 of XX



Office of the Health Officer

7178 Columbia Gateway Drive, Columbia, MD 21046-2147

Main: 410-313-6300 | Fax: 410-313-6303

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

www.hchealth.org

Facebook: www.facebook.com/hocohealth

Twitter: HowardCoHealthDep

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

DATE: May 16, 2013

TO: Anne and Jeff Gellner

Via-e-mail: agellner@verizon.net

RE: **Building Permit # B13001609**

1149 Day Road

Sykesville, Maryland 21784

To Whom It May Concern:

Further review is contingent upon submission of a revised building plan showing the following:

- Well and septic system with all components must be shown on plan.
- Plan must be to scale.
- Garage must be 20 feet away from septic easement and well.

Your building permit will be placed "on hold" until all Health Department requirements are met. If you have any questions or correspondence, I can be reached at the above address or by telephone at (410) 313-2775.

Respectfully,

Dana Bernard, REHS/RS

Environmental Specialist II

Bureau of Environmental Health

Well and Septic Program

Phone (410) 313-2775

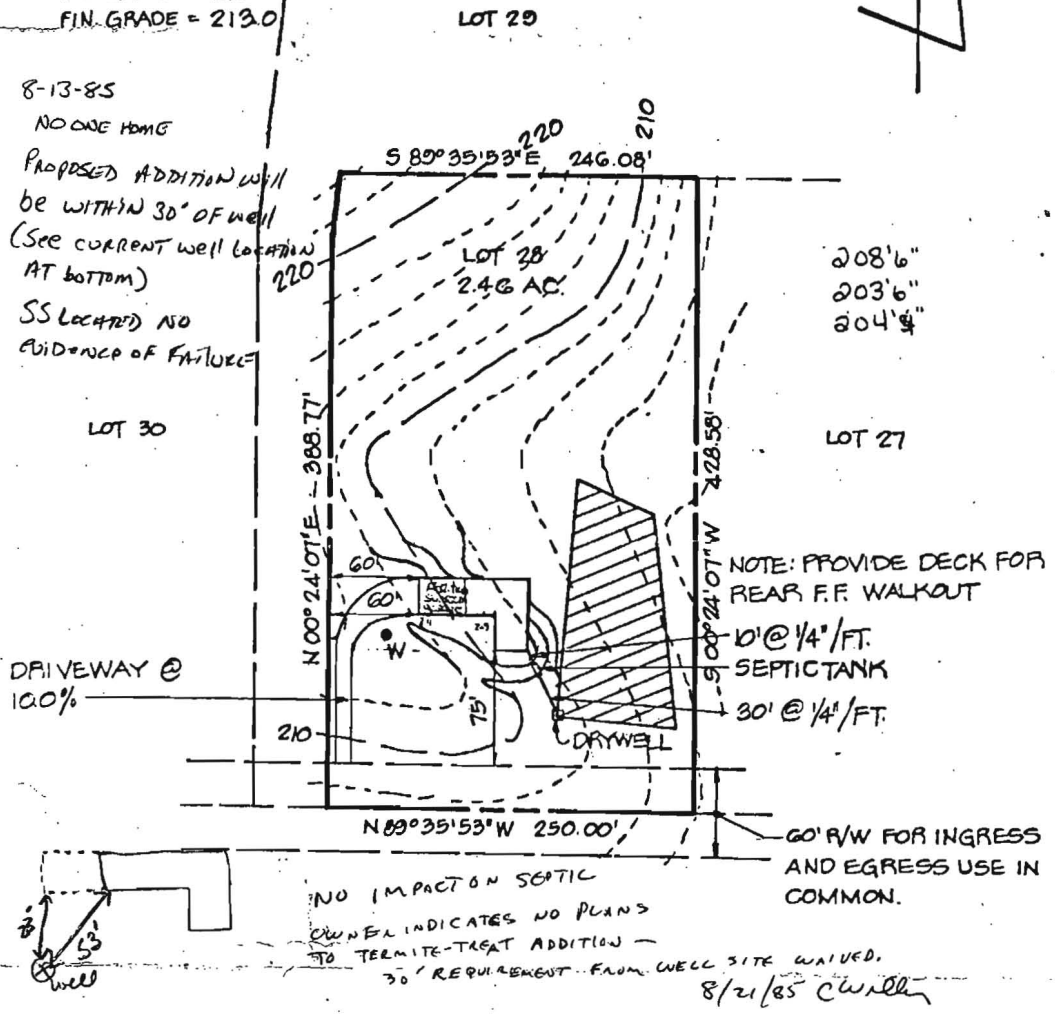
E-mail: DBernard@howardcountymd.gov

cc: Well & Septic program file

K&E BALTIMORE 18 818 ALABAMA 6-77 MCALP

HOUSE
F.F. = 213.5
SMT. = 204.7
INV. OUT = 206.3
SEPTIC TANK
EX. GRADE = 208.0
FIN. GRADE = 211.0
INV. IN = 206.1
INV. OUT = 205.8
DRYWELL
EX. GRADE = 208.7
FIN. GRADE = 208.7
INV. IN = 205.2
WELL
EX. GRADE = 213.0
FIN. GRADE = 213.0

8-13-85
NO ONE HOME
PROPOSED ADDITION WILL
BE WITHIN 30' OF WELL
(SEE CURRENT WELL LOCATION
AT BOTTOM)
SS LOCATED NO
EVIDENCE OF FAILURE

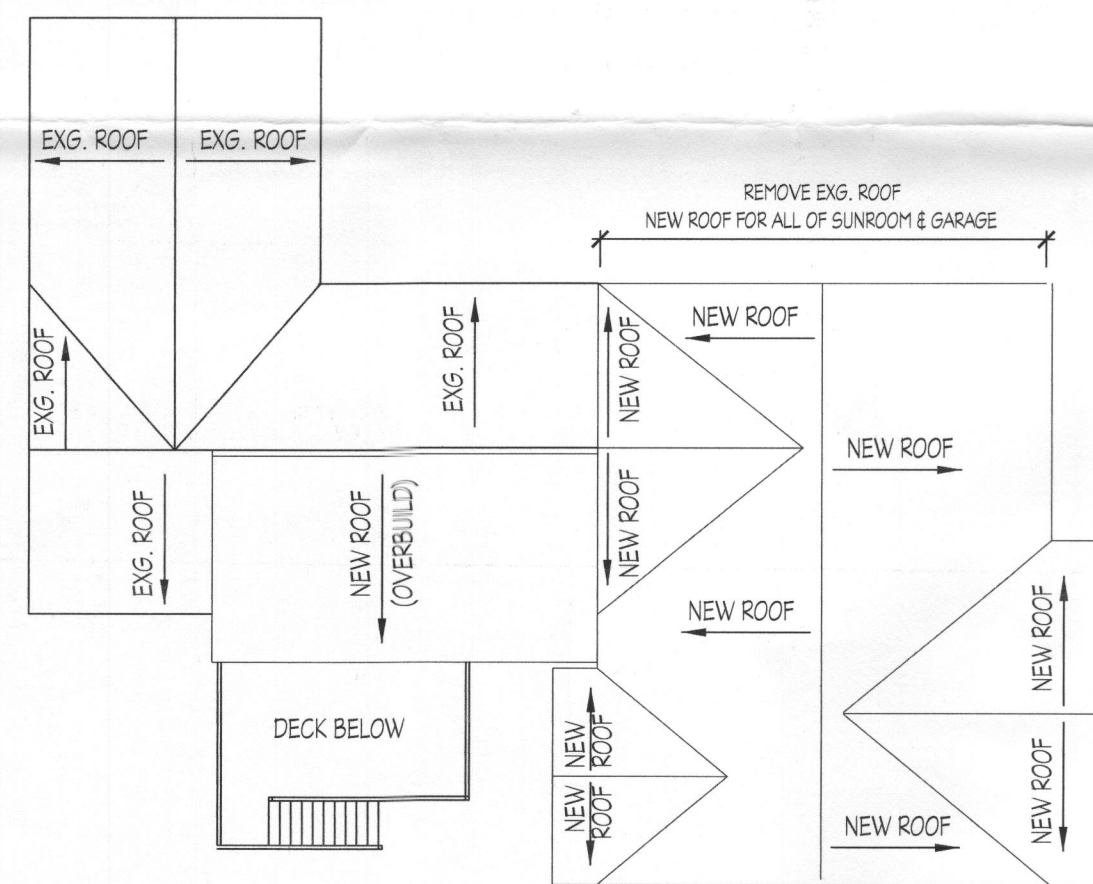


TITLE GRADING STUDY			
PROJECT DICKEY FARMS - LOT 28			
LOCATION 3RD ELECTION DISTRICT		HOWARD CO., MD.	
DATE: SEPT., 1978	DESIGN BY: W.H.N.	DRAWN BY: J.B.	CHECKED BY: W.H.N.
SCALE: 1" = 100'	JOB NO.: 78126	DRAWING NO.: 1 OF 1	
boender associates		engineers surveyors planners	
BALTIMORE 301-465-7777 • SALISBURY 301-749-1286			

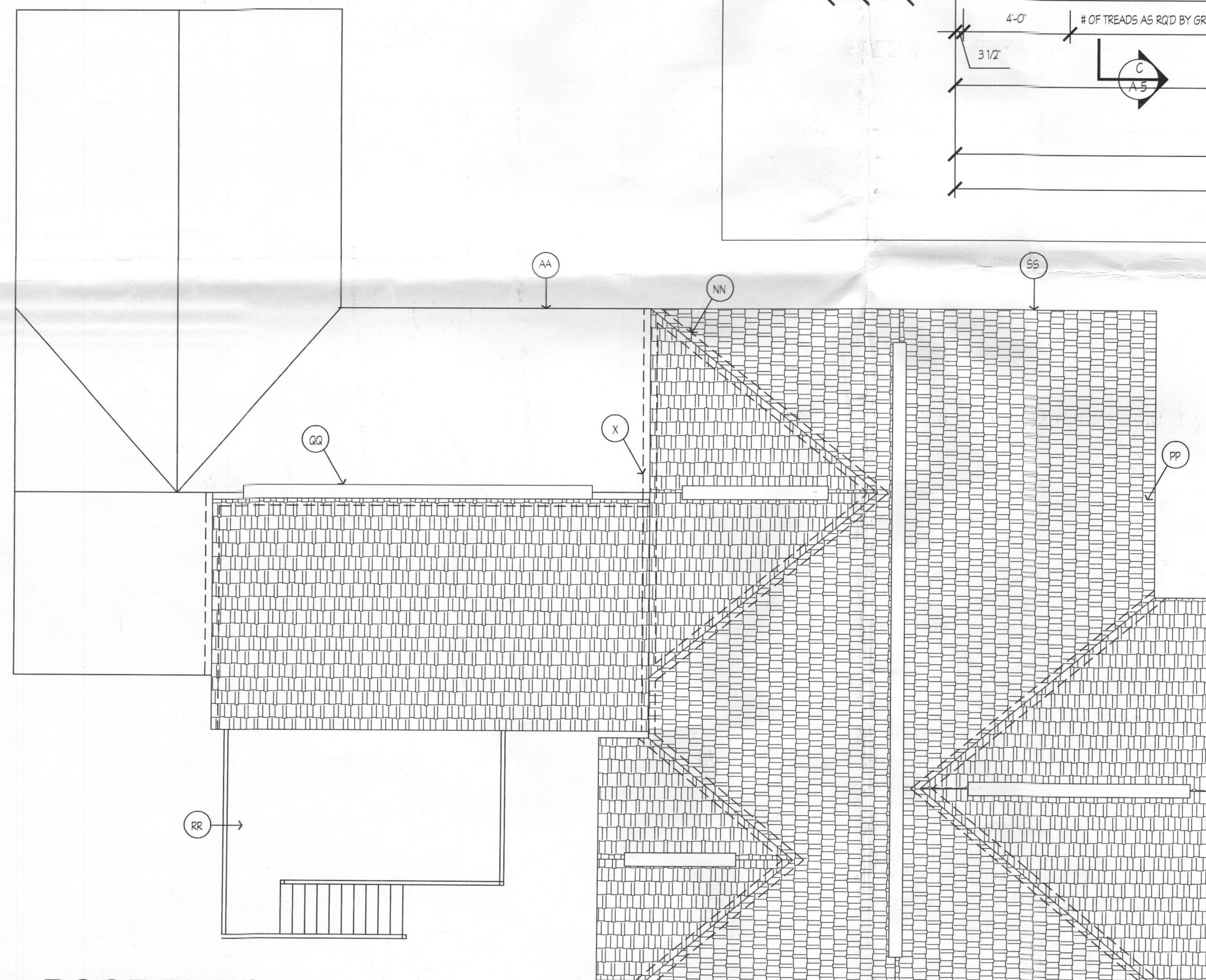
RR DECK BELOW

SS ALIGN ROOF OVERHANGS ON FRONT W/ EXG. ROOF.
ALL OTHER NEW ROOF OVERHANGS SHALL BE 12"
BE 12" (KITCHEN ROOF OVERBUILD SHALL HAVE 6" OVERHANG)

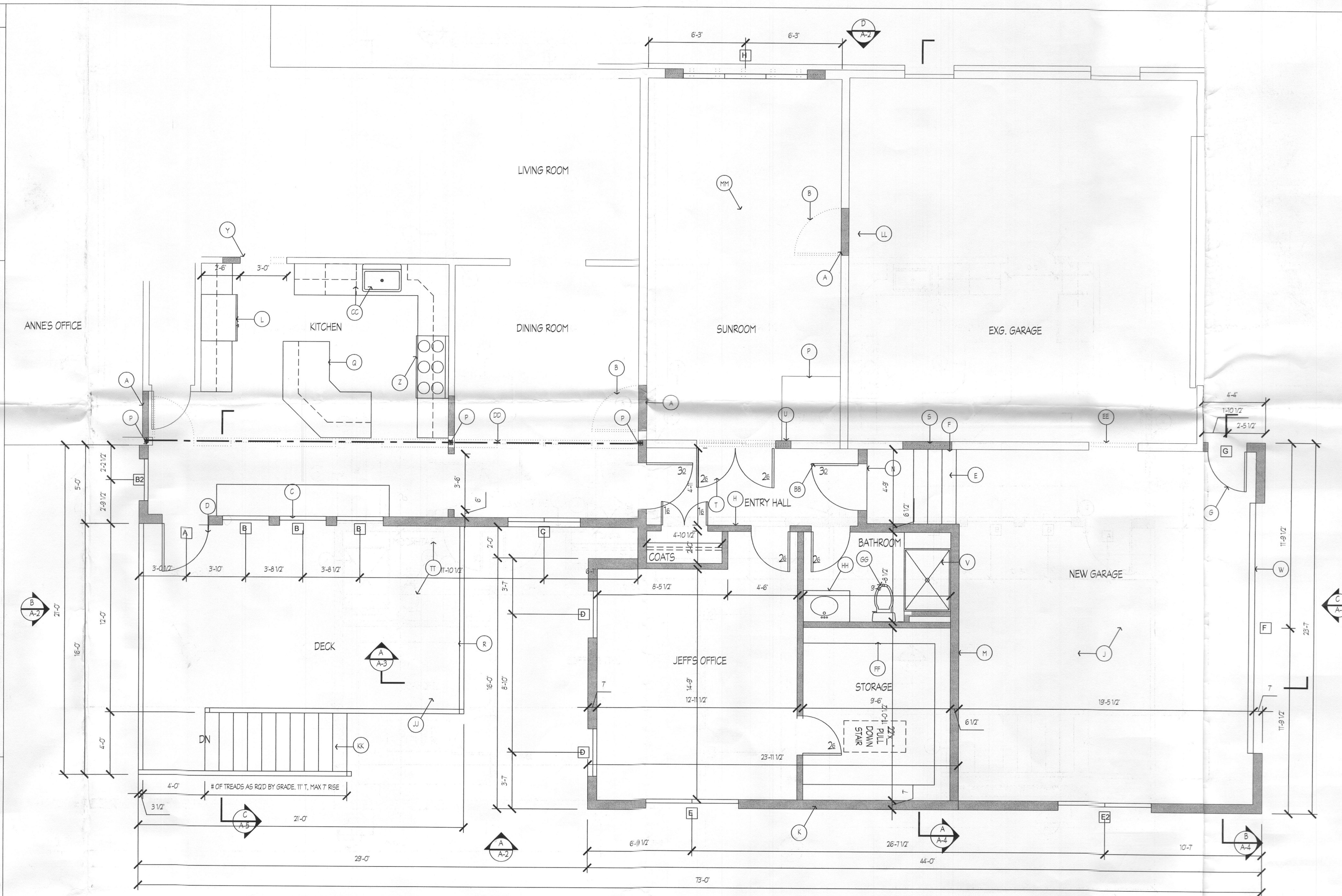
TT REMOVE EXG. CHIMNEY & DECK



A	ROOF
A-1	1/16" = 1'-0"



B	ROOF
A-1	1/8" = 1'-0"



A-1 $1/4" = 1'-0"$

ROOM FINISH SCHEDULE				
ROOM	FLOOR		WALL FINISH	CEILING FINISH
	FINISH	BASE		
KITCHEN	DURACERAMIC	PT. WD.	PAINTED DRYWALL	GPDW
DINING ROOM	MATCH EXG. HDWD	PT. WD.	PAINTED DRYWALL	GPDW
ENTRY HALL	DURACERAMIC	PT. WD.	PAINTED DRYWALL	GPDW
SUNROOM	DURAPLANK	PT. WD.	PAINTED DRYWALL	GPDW
JEFF'S OFFICE	DURAPLANK	PT. WD.	PAINTED DRYWALL	GPDW
STORAGE	DURAPLANK	PT. WD.	PAINTED DRYWALL	GPDW
BATHROOM	DURACERAMIC	PT. WD.	PAINTED DRYWALL	GPDW
NEW GARAGE	CONC.	-	F.R. GPDW	F.R. GPDW

A-1	N.T.S.
-----	--------

EXTERIOR DOOR & WINDOW SCHEDULE				
NO.	ANDERSEN EAGLE MODEL:	WINDOW OPTIONS:	NOTES	
A	FDO3073	①	SINGLE FRENCH DOOR	
B	CMT3034	①	LEFT OPEN, FIXED, RIGHT OPEN	HEADER SIZED BY TRUSS MANUF.
B2	CMT2834	①	TEMPERRED	
C	(2)CMT2446	①	-	
D	CMT3046	①	-	
E	(2)CMT3046	①	-	
E2	(2)CMT3046	②	-	
F	16'X8'	①	GARAGE DOOR	HEADER SIZED BY TRUSS MANUF
G	3068		GARAGE PERSON DOOR	
H	(3)CMT2850	①	LEFT OPEN, FIXED, RIGHT OPEN	
J	NOT USED		-	
K	3068		INSULATED SIX-PANEL DOOR	
L	30XX		INSULATED DOOR- HEIGHT AS ALLOWABLE BY GRADE	

NOTE: ALL HEADERS SHALL BE (2) 2X12S EXCEPT AS NOTED OTHERWISE.

(A) FILL ENG. CASSED OPENING. PATCH TO MATCH ADJACENT

(B) REMOVE ENG. DOOR

(C) NEW WINDOW- SEE SCHEDULE

(D) NEW EXTERIOR DOOR-SEE SCHEDULE

(E) PRESSURE-TREATED DECKING ON STAR TREAD

(F) W.D. RAIL

(G) ENTRY DOOR

(H) INTERIOR PARTITION: 2X4 STUD @16" O.C. 1/2" GPWD ON EACH SIDE-TYP.

(I) 5/8" F.R. DRYWALL ON ALL WALLS & CEILING OF GARAGE OR PER LOCAL CODE

(K) SIDING ON AIR INFILTRATION BARRIER
ON 1/2" PLWD. ON 2X6 STUD @16" O.C. (V.B. ON WARM SIDE OF WALL). 1/2" GPWD ON INTERIOR

(L) REFRIGERATOR

(M) 2X6 STUD @16" O.C. W/ 5/8" F.R. GPWD ON GARAGE SIDE, 1/2" GPWD ON INT.

(N) STEP DOWN 6" TO LANDING

(P) ENG. WD. STOVE TO REMAIN IN THIS LOCATION

(Q) ISLAND CABINET & COUNTER

(R) P.T. WD. RAILING & PICKETS

(S) REMOVE ENG. WINDOW. PATCH TO MATCH ADJACENT

(T) NEW INTERIOR FRENCH DOOR

(U) REMOVE ENG. SIDING-PARTION TO ACCOMMODATE NEW DOOR

(V) PREFAB SHOWER 3'X5' W/ SEAT

(W) GARAGE DOOR- SEE ELEVATION & SPECS

(X) FLASH NEW DOOR INTO ENG.

(Y) RELOCATE ENG. OPENINGS AS SHOWN FOR NEW CASSED OPENING
W/ (2) 2X2 HEADER

(Z) RANGE & HOOD

(AA) ENG. ROOF TO REMAIN

(BB) INSULATED FIRE-RATED DOOR W/D OOR CLOSER AS ROOF BY CODE

(CC) SINK & DISHWASHER

(DD) REMOVE ENG. LOAD-BEARING WALL. TRUSS MANUF. TO PROVIDE TRUSS OR LVL. TO SUPPORT NEW & ENG. ROOF.
POSSIBLE BEARING POINTS SHOWN

(EE) REMOVE ENG. WINDOW & WALL BELOW TO CREATE
OPENINGS TO NEW GARAGE BAY

(FF) STORAGE SHELVING

(GG) NEW TOILET

(HH) 36" VANITY, SINK, & COUNTER

(JJ) DECKING ON P.T. WD. STRUCTURE

(KK) DECKING ON P.T. WD. STAR STRUCTURE

(LL) REMOVE ENG. GARAGE STAR

(MM) REMOVE ENG. SUNROOM FLOOR & ROOF. PROVIDE NEW

(NN) CONCEALED FLASHING

(PP) NEW ASPHALT SHINGLEWD. TRUSS ROOF

(QQ) ROOF VENT

Approved for release to:

<input type="checkbox"/> Permit	Owner
<input type="checkbox"/> Bid/Negotiation	Date
<input type="checkbox"/> Construction	

SEAL

PROFESSIONAL CERTIFICATION. I certify that these documents were prepared or approved by me, and that I am a duly licensed architect under the laws of the State of Maryland, License No. 14875
Expiration Date: 02-07-2015

SCALE:	AS NOTED
DATE:	© 05/23/2013
FILE NO.:	12012-CD
PROJ. NO.	12012
DRAWING NO.	A-1 1 of 5

DRAWING TITLE
FIRST FLOOR PLAN, ROOF PLAN & ROOF
DRAINAGE, SCHEDULES


PROJECT NAME
GELLNER RESIDENCE ADDITION

bluehouse architecture, llc
390 Irving Road
Pine 415-548-3377
info@bluehouse402.com
www.bluehouse402.com

 390 Irving Road
Pine 415-548-3377
info@bluehouse402.com
www.bluehouse402.com

DRAWING TITLE
FIRST FLOOR PLAN, ROOF PLAN & RO
DRAINAGE, SCHEDULES

PROJECT NAME
GELLNER RESIDENCE ADDITION

 bluehouse architecture, llc

