

HOWARD COUNTY
PERMIT APPLICATION

PERMIT NUMBER

B08001476

Building Address 1739 WOODSTOCK RD
WOODSTOCK MD 21163
Suite/Apt. #: _____ SDP/WP/Petition #: _____
Census Tract _____ Subdivision _____
Section _____ Area _____ Lot _____
Tax Map _____ Parcel _____ Grid _____
Zoning _____ Map Coordinates _____ Lot size _____

Property Owner's Name MIKE SMITH
Address 1739 WOODSTOCK RD
City WOODSTOCK State MD Zip Code 21163
Home Phone 301-580-5711 Work Phone 301-580-5111
Applicant's Name & Mailing Address, (if other than stated hereon):
SCOTT THOMAS T/A MAGNUM CONTRACTING
Phone 410-526-5922 Fax 410-526-5922

Existing Use SINGLE FAMILY DWELLING
Proposed Use SAME
Estimated Construction Cost \$ 180,000
Description of Work ADD 3 CAR GARAGE w/
MASTER BED ROOM OVER NEW GARAGE
36 x 36

Contractor Company MAGNUM CONTRACTING
Contact Person SCOTT THOMAS
Address 2917 CLUB HAVEN RD.
City FUNKSBURG State MD Zip Code 21048
License No. 48307
Phone 410-526-5922 Fax 410-526-5922

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

Engineer or Architect Company G3BL CUSTOM HOMES
Contact Person GREG L. HIA
Address 1006237
City FUNKSBURG State MD Zip Code 21048
Phone 410-833-8320 Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics		Utilities	
Height:		Water Supply:	
No. of stories:		Public	
Gross area, sq. ft. per floor:		Private	
Use group:		Sewage Disposal:	
Construction type:		Public	
Reinforced Concrete		Private	
Structural Steel		Electric Yes <input type="checkbox"/> No <input type="checkbox"/>	
Masonry		Gas Yes <input type="checkbox"/> No <input type="checkbox"/>	
Wood Frame		Heating System:	
State Certified Modular		Electric <input type="checkbox"/> Oil <input type="checkbox"/>	
		Natural Gas <input type="checkbox"/>	
		Propane Gas <input type="checkbox"/>	
		Sprinkler system: N/A <input type="checkbox"/>	
		Full	
		Partial	
		Other Suppression	
		# of Heads	

Building Characteristics		Utilities	
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/>		Water Supply:	
Depth	Width	Public	
1st floor:		Private	
2nd floor:		Sewage Disposal:	
Basement:		Public	
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/>		Private	
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>		Electric Yes <input type="checkbox"/> No <input type="checkbox"/>	
No. of Bedrooms		Gas Yes <input type="checkbox"/> No <input type="checkbox"/>	
Height:		Heating System:	
Multi-family dwellings:		Electric <input type="checkbox"/> Oil <input type="checkbox"/>	
No. of efficiency units:		Natural Gas <input type="checkbox"/>	
No. of 1 BR units:		Propane Gas <input type="checkbox"/>	
No. of 2 BR units:		Sprinkler system: N/A <input type="checkbox"/>	
No. of 3 BR units:		NFPA #13D	
Other Structure:		NFPA #13R	
Dimensions:		Other:	
Footings:			
Roof Height:			
State Certified Modular			
Manufactured Home			

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.

Scott Thomas
Applicant's Signature

Scott Thomas
Print Name

Title/Company

Date

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
** PLEASE WRITE NEATLY AND LEGIBLY. **
- FOR OFFICE USE ONLY -

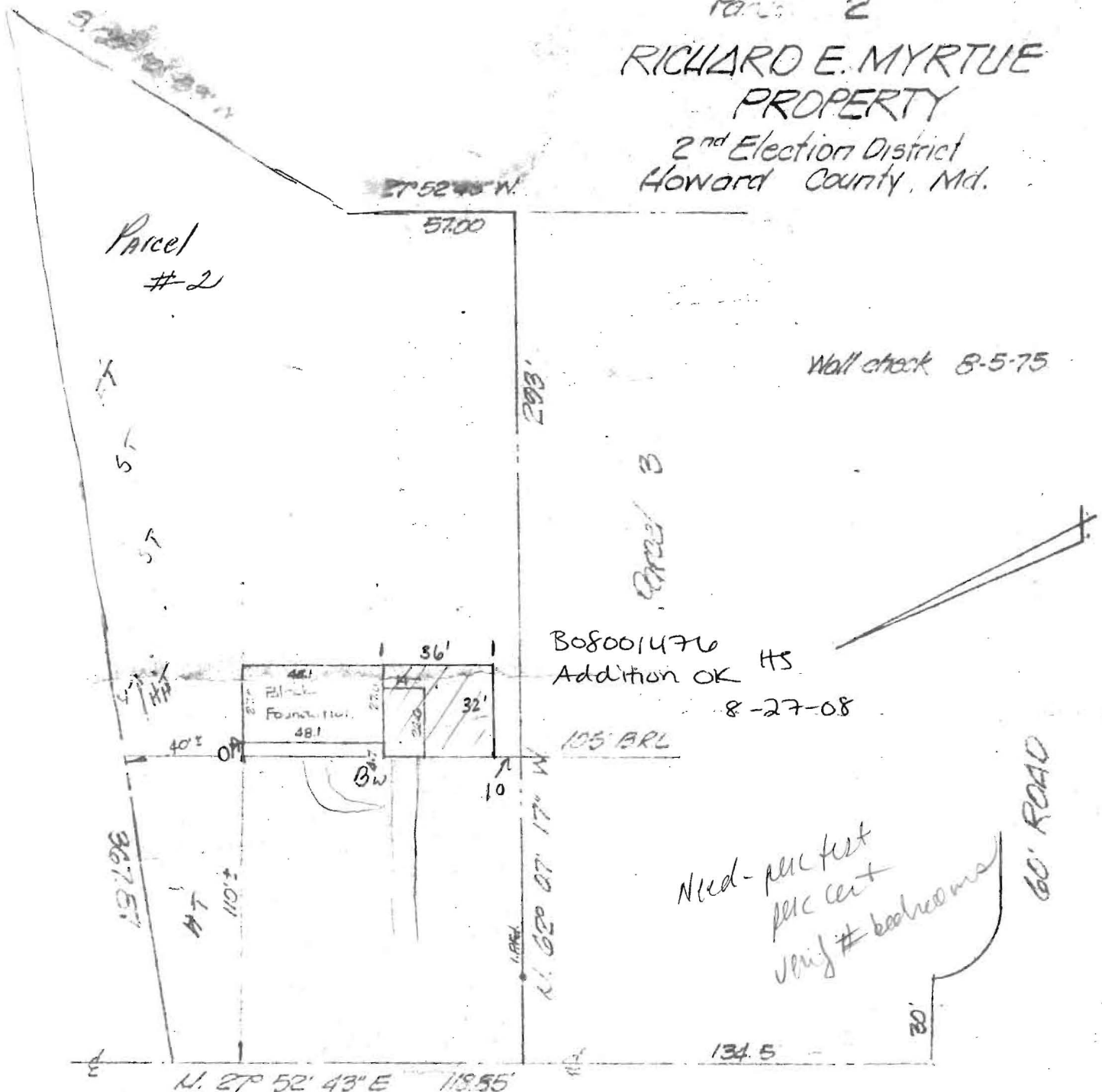
AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official		
Dev. Engineering, DPZ		
Health	8/27/08	<u>Scott Thomas</u>
Fire Protection		
Is Sediment Control approval required prior to issuance?		
YES <input type="checkbox"/> NO <input type="checkbox"/>		
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>		
ONE STOP SHOP: <input type="checkbox"/>		

DPZ SETBACK INFORMATION		PROPERTY ID#
Front:	Filing fee	\$
Rear:	Permit fee	\$
Side:	Excise tax	\$
Side St.:	Add'l per. fee	\$
All minimum setbacks met?	TOTAL FEES	\$
YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid	\$
Is Entrance Permit required?	Balance due	\$
YES <input type="checkbox"/> NO <input type="checkbox"/>	Check	\$
Historic District?	Validation	\$
YES <input type="checkbox"/> NO <input type="checkbox"/>		
Lot Coverage for New Town Zone		
SDP/Red-line approval date		

HOUSE LOCATION
Woodstock Rd.
Parcel 2

RICHARD E. MYRTUE
PROPERTY

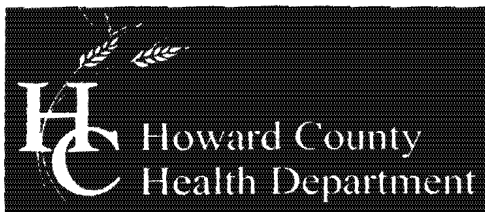
2nd Election District
Howard County, Md.



WOODSTOCK ROAD
(60' R/W)

NOTE: Lot corners have not been set by this survey unless otherwise indicated. H-1019-7

ENGINEER'S CERTIFICATE	REFERENCE	LIGHT, ELLIOTT & ASSOC.	
I hereby certify that I have carefully surveyed the property shown and described hereon, in accordance with record description, and have located all of the existing improvements thereon by a transit-tape survey, and that corners have been found or placed as shown, and that there are no encroachments either way across the property except as indicated.	PLAT BOOK	ENGINEERS-PLANNERS-SURVEYORS	
	PLAT N ^o	8508 ADELPHI ROAD,	
	LIBER CMP. 714	ADELPHI, MARYLAND 20783	
	FOLIO	422-6080 CHECKED: <input checked="" type="checkbox"/> SCALE: 1" = 50'	RECORD NUMBER



Bureau of Environmental Health
7178 Columbia Gateway Drive, Columbia, MD 21046-2147
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

Peter L. Beilenson, M.D., M.P.H., Health Officer

June 10, 2008

Mike Smith
1739 Woodstock Rd
Woodstock, MD 21163

RE: B08001476
1739 Woodstock Rd

Dear Mr. Smith,

Building permit application #B08001476 for the referenced property has been reviewed by our office and has been placed "On Hold." The site plan submitted must indicate the location of both the septic system and well. In addition, the *Howard County Code Subtitle 8, Section 3.805* requires a Percolation Certification Plan for an increase in living space over 250 square feet.

In order to proceed, a Percolation Test Application with a \$506 application fee and a plan showing the proposed sewage disposal area, the existing septic system location, and well location will need to be submitted to the Health Department. Also include the total number of bedrooms the house will have after the addition. At the time of percolation testing, the existing well and septic system will be evaluated to determine if an upgrade will be required.

Enclosed are the current well and septic setback requirements and the requirements for a percolation certification plan. If you have any questions regarding this matter, please contact me at the above address or by calling (410) 313-4261. Information is available online at:

http://www.howardcountymd.gov/Health/HealthMain/EnvironmentalHealth/EnvironmentalHealth_WaterSewerage.htm

Sincerely,

Sara Sappington, R.S.
Well and Septic Program
Development Coordination Section