

Permits: 410-313-2455
Inspections: 410-313-1810
Automated Line: 410-313-3800

Howard County Building/Fire Permit Application
Department of Inspections, Licenses & Permits
3430 Court House Drive
Ellicott City, MD 21043

Permit Number:

B11001095

Building Address: 10981 Scaggsville Rd
Laurel MD 20723
Suite/Apt. # _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: LONAS Sub
Section: _____ Area: _____ Lot: 2
Tax Map: 46 Parcel: 336 Grid: 5
Zoning: _____ Map Coordinates: 19C-6 Lot Size: _____

Existing Use: SFD
Proposed Use: SFD + Pool
Estimated Construction Cost: \$ 25,000
Description of Work: Inground concrete pool 25x37' in rear yard w/48" high fence
Occupant or Tenant: _____
Was tenant space previously occupied? ☐ Yes ☐ No
Contact Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

BUILDING DESCRIPTION - COMMERCIAL	
Building Characteristics	Utilities
Height:	<u>Water Supply</u>
No. of stories:	<input type="checkbox"/> Public
Gross area, sq. ft./floor:	<input type="checkbox"/> Private
	<u>Sewage Disposal</u>
Area of construction (sq. ft.):	<input type="checkbox"/> Public
	<input type="checkbox"/> Private
Use group:	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<u>Construction type:</u>	<u>Heating System</u>
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Masonry	<u>Sprinkler System:</u>
<input type="checkbox"/> Wood Frame	<input type="checkbox"/> N/A
<input type="checkbox"/> State Certified Modular	<input type="checkbox"/> Full
<input checked="" type="checkbox"/> <u>Roadside Tree Project Permit</u>	<input type="checkbox"/> Partial
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Other Suppression
<u>Roadside Tree Project Permit #</u>	No. of Heads:

Property Owner's Name: Doreen Roberts
Address: 10981 Scaggsville Rd
City: Laurel State: _____ Zip Code: 20723
Home Phone: 301-490-0265 Work Phone: _____
Applicant's Name & Mailing Address, (If other than stated herein): _____
Phone: _____ Fax: _____
Email: _____
Contractor Company: Maryland Pools
Contact Person: Joanne Latham
Address: 9515 Gerwig Lane
City: Columbia State: _____ Zip Code: 21046
License No.: 62674
Phone: 410-795-6600 Fax: _____
Email: _____
Engineer/Architect Company: _____
Responsible Design Prof.: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics	Utilities
<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>
<u>Depth</u> <u>Width</u>	<input checked="" type="checkbox"/> Public
1 st floor:	<input type="checkbox"/> Private
2 nd floor:	<u>Sewage Disposal</u>
Basement:	<input type="checkbox"/> Public
<input type="checkbox"/> Finished Basement	<input checked="" type="checkbox"/> Private
<input type="checkbox"/> Unfinished Basement	Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Crawl Space	Gas: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Slab on Grade	<u>Heating System</u>
No. of Bedrooms:	<input type="checkbox"/> Electric
<u>Multi-family Dwelling</u>	<input type="checkbox"/> Oil
No. of efficiency units:	<input type="checkbox"/> Natural Gas
No. of 1 BR units:	<input type="checkbox"/> Propane Gas
No. of 2 BR units:	
No. of 3 BR units:	
Other Structure:	
Dimensions:	
Footings:	<input checked="" type="checkbox"/> <u>Roadside Tree Project Permit</u>
Roof:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> State Certified Modular	<u>Roadside Tree Project Permit #</u>
<input type="checkbox"/> 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.

Applicant's Signature

Email Address

Title/Company

Print Name

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	<u>4-21-11</u>	<u>EP Burand</u>
Fire Protection		

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

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	\$

Distribution of Copies: White: Building Officials Green: PSZA,Zoning Yellow: PSZA,Engineering Pink: Health Gold: SHA
T:\Operations\Updated Forms\New building app 11.10.2010.docx

SETBACKS:
 REAR PL. 10'
 SIDE PL. 10'
 HOUSE 0'
 SEPTIC 20'
 WELL N/A

**PUBLIC WATER
& PRIVATE SEPTIC**



**Maryland
POOLS**
Inc.

9515 GERWIG LANE SUITE 121 COLUMBIA, MD 21046 410-995-6600
 11166 MAIN STREET SUITE 402 FAIRFAX, VA 22030 703-359-7192
 800-252-SWTM

WWW.MARYLANDPOOLS.COM

EQUIPMENT LIST

DIRT/GRADING: MOST STAY
SPA: NONE
RAISED BEAM: NONE
TILE: TO BE DETERMINED
COPING: STD. 'SUIT SAVER'
PLASTER: WHITE MARBELITE
FILTER SYS: C&C 420 SF CART. W/
CLEANING SYS: PCC-2000
TREATMENT SYS: MINERAL SPRINGS
CONTROL SYS: NONE
HEATER: 900 (HEAT PUMP)
LIGHTS: (1) LED **WATTS:** 300 **VOLTS:** 120
LOVESEAT: (2) @ 6' W/(2) JETS EACH (OUTSIDE)
AQUA BENCH: NONE
RAIL GOODS: NONE
DECKING: 645 Sq.Ft., EXPOSED AGGREGATE
FENCE: BY OWNERS FENCE CONTRACTOR
POOL COVER: NONE **TYPE:** N/A
CHEMICALS: \$100 CHEMICAL ALLOWANCE
OTHER ITEMS: 6' DIVING BOARD & STAND; INITIAL WATER FILL;
 2ND STEP TANNING LEDGE (50 SF); DUMPSTER AND DEMO OF EXIST.
 WOOD WALLS; 285 SF OF TIMBER WALLS W/70' OF DRAIN (STONE
 W/PIPE) BEHIND WALLS; 16 LF EXPOSED AGGREGATE DECK RISERS
ELECTRIC: 200 FT. (TRI-STAR)

POOL STATISTICS

SIZE/SHAPE: 25' x 37' - LA PAZ
POOL AREA: 600 **SPA:** **OTHER:** 24
TOTAL AREA: 624
PERIMETER: 110 **SPA:**
GALLONAGE: 23,625 **DEPTH:** 2'-9" TO 8'-0"

DIRECTIONS TO SITE

DIRECTIONS: MILES: 000 **MAP #**
 32/E TO I-95/S, 1ST EXIT RT.216/E (R/T). AT 2ND LIGHT L/T
 ON CREST FOLLOW 2 BLOCKS TO STOP. R/T ON SCAGGSVILLE
 RD., WATCH CLOSELY FOR 10981 ON LEFT.
 NOTE: MULTIPLE HOME DRIVEWAY, YELLOW HOUSE AT REAR OF
 PROPERTY, IF YOU PASS NAPA GARAGE, YOU JUST MISSED IT. **GRID**
C-6

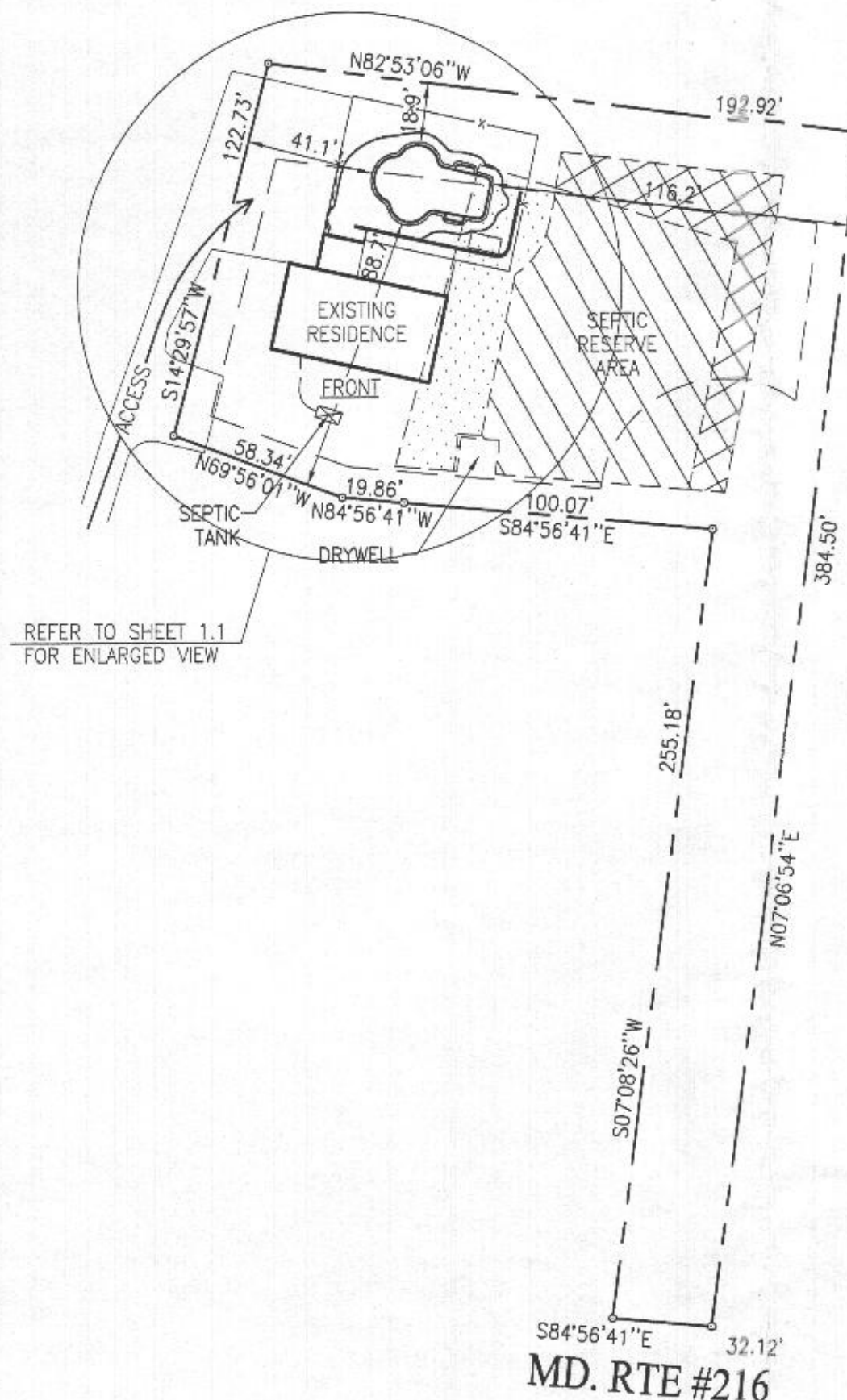
Doreen Roberts
10981 Scaggsville Road
Laurel, Maryland 20723
Howard County

HOME PHONE: 301-490-0265
OFFICE PHONE:
CELL PHONE 1: 301-356-0342
CELL PHONE 2:

LOT: 2	SUBDIVISION NAME: LONAS SUBDIVISION	DISTRICT: 06	PIN # 452426
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SITE PLAN **ZONE:** ONE

SCALE: 1"=50'	BY: J.L.R.	DATE: 4/6/11	JOB NUMBER: DW11-10156	SHEET #: 1.0
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APPROVED

WALK-THRU BUILDING PERMIT

BP# _____ A# _____
 APP. SAN DBernard DATE: 4-6-11
 DESC. OF WORK 25x37 in ground pool

REVISION:

PERMIT NUMBERS

POOL:
ELECT:
OTHER:

PERMIT SET

DATE: 4-20-11

SITE PLAN

1"=50'

LOT #2

LONAS SUBDIVISION

TAX ACCOUNT # 452426
 MAP 46, GRID 5, PARCEL 336
 ELECTION DISTRICT: 06
 HOWARD COUNTY, MARYLAND

MD. RTE #216

SETBACKS:

REAR PL. 10'
SIDE PL. 10'
HOUSE 0'
SEPTIC 20'
WELL N/A

Maryland POOLS Inc.

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WWW.MARYLANDPOOLS.COM

EQUIPMENT LIST

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SPA: NONE
RAISED BEAM: NONE
TILE: TO BE DETERMINED
COPING: STD. 'SUIT SAVER'
PLASTER: WHITE MARBELITE
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CLEANING SYS: PCC-2000
TREATMENT SYS: MINERAL SPRINGS
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LOVESEAT: (2) @ 6' W/(2) JETS EACH (OUTSIDE)
AQUA BENCH: NONE
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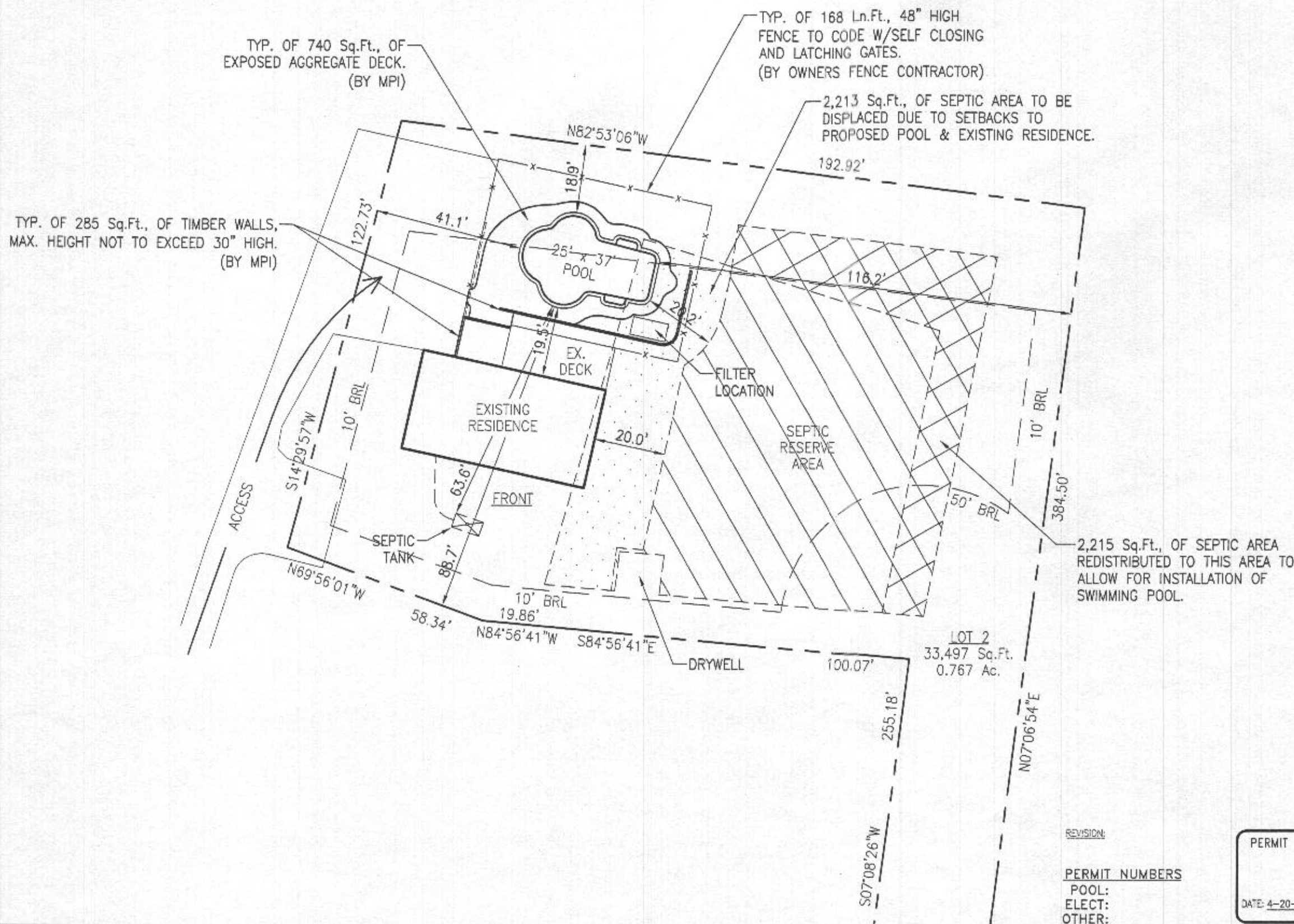
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LOT: 2	SUBDIVISION NAME: LONAS SUBDIVISION	DISTRICT: 06	PIN # 452426
SITE PLAN (ENLARGED)			ZONE: ONE
SCALE: 1"=30'	BY: J.L.R.	DATE: 4/6/11	JOB NUMBER: DW11-10156
			SHEET #: 1.1



REVISION:

PERMIT NUMBERS
POOL:
ELECT:
OTHER:

PERMIT SET

DATE: 4-20-11