



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.: **B16002378**

Building Address: **497 W. Watersville Rd**
City: **MT Airy** State: **MD** Zip Code: **21771**
Suite/Apt. #: _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: _____
Section: _____ Area: _____ Lot: _____
Tax Map: _____ Parcel: _____ Grid: _____
Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: **residential**
Proposed Use: **residential**
Estimated Construction Cost: \$ **40,000**
Description of Work: **adding 1 bedroom and 2 bathrooms w/ family room (AS-built)**
Occupant or Tenant: **occupant**
Was tenant space previously occupied? ☐ Yes ☐ No
Contact Name: _____
Address: **N/A**
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: _____	Depth Width
Gross area, sq. ft./floor: N/A	1 st floor: 54' 32'
Area of construction (sq. ft.): _____	2 nd floor: N/A
Use group: _____	Basement:
	<input checked="" type="checkbox"/> Finished Basement
	<input type="checkbox"/> Unfinished Basement
	<input checked="" type="checkbox"/> Crawl Space
Construction type:	<input type="checkbox"/> Slab on Grade
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms: _____
<input type="checkbox"/> Structural Steel	Multi-family Dwelling
<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: N/A
	Other Structure: _____
	Dimensions: _____
<input checked="" type="checkbox"/> Roadside Tree Project Permit	Footings: _____
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Roof: _____
Roadside Tree Project Permit # _____	<input type="checkbox"/> State Certified Modular
	<input type="checkbox"/> Manufactured Home

Property Owner's Name: **Michael A. Dice**
Address: **497 W. Watersville Rd**
City: **MT Airy** State: **MD** Zip Code: **21771**
Phone: **301-340-8424** Fax: _____
Email: **mikedicebctd@gmail.com**

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

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

Contractor Company: **Same**
Contact Person: _____
Address: _____
City: _____ State: _____ Zip Code: _____
License No.: _____
Phone: _____ Fax: _____
Email: _____

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

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.

Signature: **Michael A. Dice**
Applicant's Signature
Email Address: **mikedicebctd@gmail.com**

Print Name: **Michael A. Dice**
Date: **5/27/14**

Title/Company _____

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

PLEASE WRITE NEATLY & LEGIBLY

-FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL
<input checked="" type="checkbox"/> State Highways		
<input checked="" type="checkbox"/> Building Officials		
<input checked="" type="checkbox"/> PSZA (Zoning)		
<input checked="" type="checkbox"/> PSZA (Engineering)		
<input checked="" type="checkbox"/> 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? <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	\$	2500
Permit Fee	\$	
Tech Fee	\$	
Excise Tax	\$	
PSFS	\$	
Guaranty Fund	\$	
Add'l per Fee	\$	
Total Fees	\$	
Sub-Total Paid	\$	
Balance Due	\$	
Check	#	129

Distribution of Copies: White: Building Officials

Green: PSZA/Zoning

Yellow: PSZA/Engineering

Pink: Health

Gold: SHA

CANCELLED

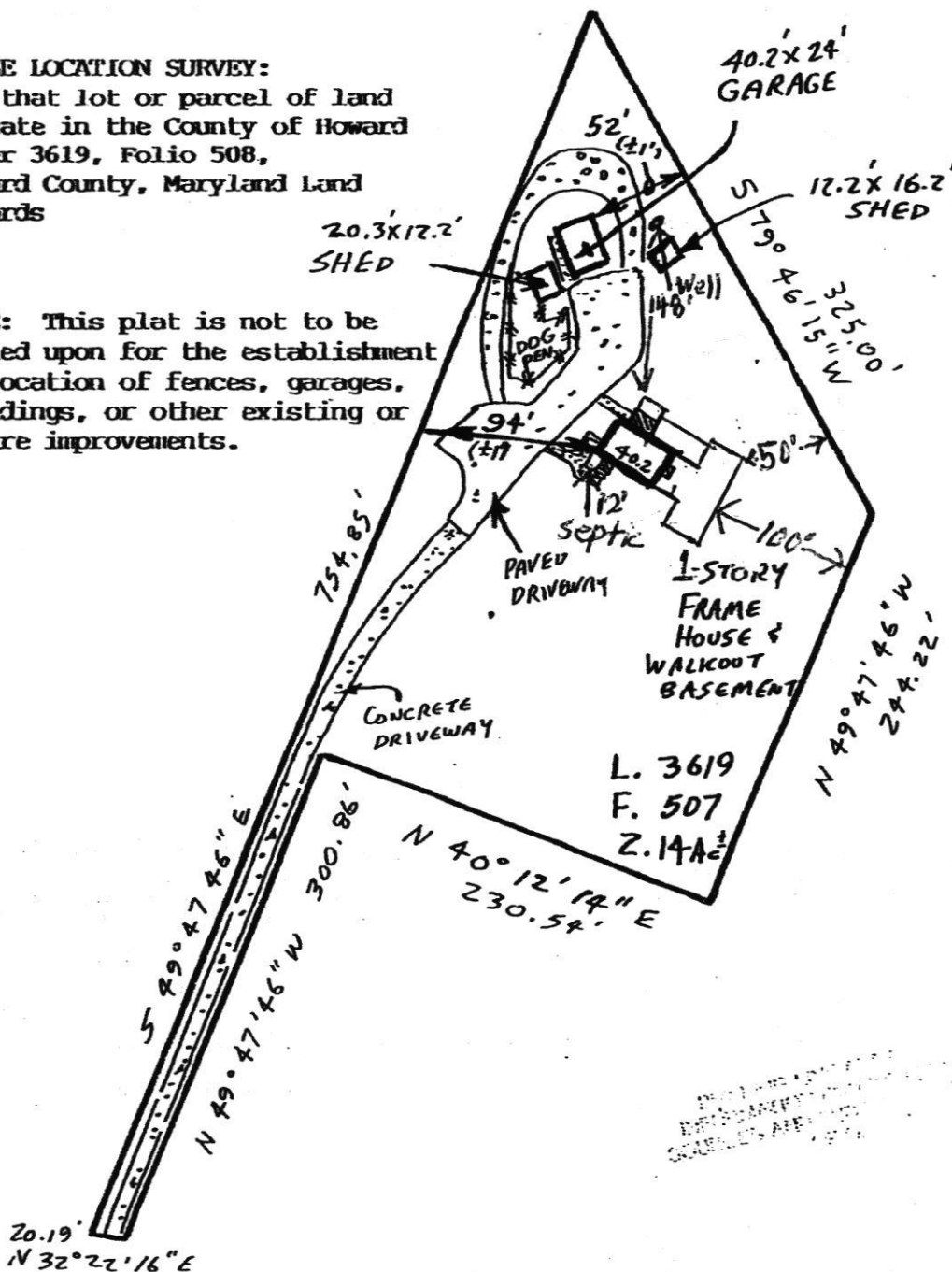
RECEIVED
MAY 27 2016
LICENSES & PERMITS
DIVISION

ALL that lot or parcel of land situate, lying and being in the County of Howard, State of Maryland as recorded in Liber 3619, Folio 508, one of the Land Records of Howard County, Maryland, also locally known as 497 West Watersville Road, Howard County, Maryland.

HOUSE LOCATION SURVEY:

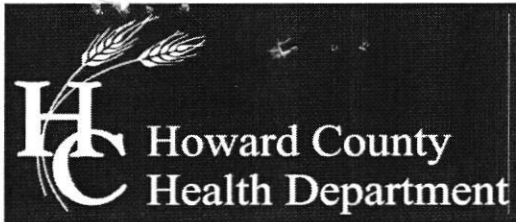
All that lot or parcel of land situate in the County of Howard Liber 3619, Folio 508, Howard County, Maryland Land Records

NOTE: This plat is not to be relied upon for the establishment or location of fences, garages, buildings, or other existing or future improvements.



497 WEST WATERSVILLE ROAD

NOTE: This location is for title purposes only and not to be used for determining property lines. Property corner markers are NOT guaranteed by this location.



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

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

MEMORANDUM

TO: Michael A. Dice
497 West Waterville Rd.
Mt. Airy MD 21771

FROM: Robert Freemon *RF*
Well & Septic Program

RE: 497 West Watersville Rd.
Mt. Airy MD 21771
Before BP Approval

DATE: 6/14/2016

I am reviewing building permit **B16002378** for **497 West Watersville** and have some comments. Before this building permit can be approved the follow requirements must be met.

- A Site Plan drawn to scale showing the location of the septic system & components, well, existing house and the proposed addition.
- Submit floor plans for all levels of the existing house and proposed addition.
- Percolation testing to establish an SDA (Sewage Disposal Area) for the initial septic system and 2 replacement systems. This will require a Percolation Application and Test Plan prior to testing. The fee for this will be \$506 which includes the Application and Test Plan Review.
- Evaluation of the well and septic system to make sure they are adequate and up to code for the existing house and the additions. This includes verifying the system sized appropriately for the proposed number of bedrooms and has a soil buffer of at least 4ft below the bottom of the system. This can be done during Percolation Testing.
- If the well is not up to current code standards including the setbacks than an upgrade or replacement well will need to be installed.
- If the septic system is inadequate an upgrade including a BAT Unit may need to be installed.