

PERMIT NUMBER: B23003917

DATE ACCEPTED:

### RESIDENTIAL BUILDING PERMIT APPLICATION

HOWARD COUNTY DEPARTMENT OF INSPECTIONS, LICENSES, AND PERMITS

3430 COURT HOUSE DRIVE, ELLICOTT CITY, MD 21043 - PHONE: (410) 313-2455 OPTION #4

www.howardcountymd.gov

#### BUILDING SITE ADDRESS REQUIRED

Street Address: 4196 TEN OAKS RD		Unit:
City: GLENELG	State: MD	Zip Code: 21036
Subdivision/Village/Complex Name: 1001		SDP/WP/BA #:
Lot:	Tax Map: 0022	Parcel: 0179
Grading Permit #:		

#### DESCRIPTION OF WORK REQUIRED

Existing Use:	Proposed Use: RESIDENTIAL HOUSE	Estimated Cost: \$ 300,000
Trade Work to Be Completed (Separate Permits Required): <input type="checkbox"/> Mechanical (HVACR) <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> None		
NEW RESIDENTIAL HOUSE		
5 BEDROOM, OFFICE, MEDIA, UTILITY, BATHROOM, KITCHEN, DINING		
LIVING, GARAGE, REAR PORCH, FLEX, LANDSCAPE, FENCE		

#### PROPERTY OWNER INFORMATION REQUIRED

Owner(s) Name(s) (As it appears on tax records): INNAZELAH REV. TRUST	Primary Residence: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Owner's Street Address: 10904 KATHLEEN CT	
City: COLUMBIA	State: MD
Phone: 443-997-3989	Zip Code: 21044
Email: USABASH007@GMAIL.COM	

#### APPLICANT NAME REQUIRED - INDIVIDUAL WHO SIGNS THIS APPLICATION

Business Name: BASHAER ABDALA	Contact Name: Bashir Abdala
Street Address: 10904 Kathleen Ct	
City: Columbia	State: MD
Phone: 443-997-3989	Zip Code: 21044
Email: USABASH007@GMAIL.COM	

#### CONTRACTOR INFORMATION REQUIRED

Business Name: OWNER CONTRACTOR	License #:
Street Address: 10904 Kathleen Ct	
City: Columbia	State: MD
Phone: 443-997-3989	Zip Code: 21044
Email: USABASH007@GMAIL.COM	

#### ARCHITECT/ENGINEER INFORMATION INDIVIDUAL WHO SIGNED PLANS, IF APPLICABLE

Business Name: Bluehouse Architects LLC	Name: Melissa Clark
Street Address: 1993 Barkley Rd	
City: Marriottsville	State: MD
Phone: 443-542-2277	Zip Code: 21104
Email: melissa@bluehousearch.com	

#### BUILDING CHARACTERISTICS REQUIRED

Primary Structure: <input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> SF Duplex <input type="checkbox"/> Mobile Home <input type="checkbox"/> Multi-Family Dwelling (MF*)	Condo: <input type="checkbox"/> Yes <input type="checkbox"/> No
Utilities: <input type="checkbox"/> Electric <input checked="" type="checkbox"/> Gas	Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private (Well)
Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane <input type="checkbox"/> Other:	Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private (Septic)
Sprinkler System: <input type="checkbox"/> NFPA 13 <input type="checkbox"/> NFPA 13R <input type="checkbox"/> NFPA 13D <input type="checkbox"/> None	Roadside Tree Project: <input type="checkbox"/> No <input type="checkbox"/> Yes: #
Fire Alarm System: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Voice Evac	

#### ADDITIONAL RESIDENTIAL INFORMATION (PLEASE SELECT/COMPLETE ALL THAT APPLY)

Model Name & Options:	
# of Bedrooms (SF): 5	# of efficiency units (MF*):
# of 1 BR (MF*):	# of 2 BR (MF*):
# of 3 BR (MF*):	
# Rooms: 9	# Full Baths: 3
# Half Baths: 1	# Fireplaces: 1
Garage/Carport Info: <input type="checkbox"/> Attached Garage <input type="checkbox"/> Detached Garage <input type="checkbox"/> Integral Garage <input type="checkbox"/> Carport <input type="checkbox"/> None	
Basement/Foundation Info: <input type="checkbox"/> Slab on Grade <input type="checkbox"/> Post & Pier <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Finished Basement: <input type="checkbox"/> Full or <input type="checkbox"/> Partial	
1st Fl Width: 40	1st Fl Depth: 32
2nd Fl Width: 40	2nd Fl Depth: 20
Bsmt Width: 50	Bsmt Depth: 16
Energy Method: <input type="checkbox"/> Prescriptive <input type="checkbox"/> Performance <input type="checkbox"/> UA Alternative <input type="checkbox"/> ERI	Gross Area: 2527 sq ft
Occupiable Area: 1460 sq ft	

#### AGREEMENT/ DISCALIMER REQUIRED

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 ORIGINAL SIGNATURE:	DATE SIGNED: 9/26/23
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#### FOR OFFICE USE ONLY

CHECKS PAYABLE TO: DIRECTOR OF FINANCE OF HOWARD COUNTY				
AGENCIES REQUIRED/APPROVALS:	<input type="checkbox"/> PR	<input type="checkbox"/> DPZ	<input type="checkbox"/> DED	<input checked="" type="checkbox"/> Health
	<input type="checkbox"/> SHA	<input type="checkbox"/> CID		
SUBMITTAL FEES: \$10,000	PAYMENT: check #170	ACCEPTED BY: TR		



HOWARD COUNTY  
DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS  
3430 COURT HOUSE DRIVE - ELLICOTT CITY, MD 21043  
\* THIS PERMIT MUST BE CONSPICUOUSLY POSTED ON SITE \*

Residential Electrical New Home Permit

PERMIT NUMBER: E24004620

APPLICATION DATE: 8/14/2024

ISSUE DATE: 8/28/2024

**SITE ADDRESS:**

4196 TEN OAKS RD  
DAYTON, MD 21036

**PROPERTY OWNER INFO:**

INNALELLAH REV TRUST  
10904 KATHLEEN CT  
COLUMBIA, MD 21044  
Phone #: 4439923989

Subdivision:

Lot No.:

Tax Map: 22

Grid: 22-20

ADC Map: 4813-C10 SDP No.:

Zoning: RR-DEO

Census Tract: 605101

**DESCRIPTION OF WORK:**

NEW SFD - (2) 200 AMP SERVICES; AUDIO DEVICE, FIRE ALARM DEVICE, & SECURITY DEVICE  
B23003917

**PRIMARY CONTRACTOR INFO:**

Licensee: BEHROUZ RAYAT

HC Elec State License No.: ES 10106

Business Name: VOLTA ELECTRIC SERVICES LLC

License Address: 20 NORRIS RUN CT

REISTERSTOWN, MD 21136

**Building / Electrical Characteristics**

Building Permit #:	B23003917	Utility Company:	BGE
Residential Use:	SFD	WMS No.:	
Commercial Use:		Service Equipment AMPS:	400
Improvement Type:		Heavy Up AMPS:	0
Miscellaneous Type:		No. of Service Feeders:	
Bonding:	No	No. of Devices:	
Trench:	No	Low Voltage:	Yes

**Permit Fees:**

Total Fees Invoiced: \$270.00

Total Fees Paid: \$270.00

Balance Due: \$0.00

To schedule an inspection or check the results of an inspection please call (410) 313-3800

**APPROVED BY THE DIRECTOR OF INSPECTIONS, LICENSES AND PERMITS - BUILDING OFFICIAL**

Record Detail \* (This section is required.)

Permit Type Building/Residential/Misc/Tanks Permit Number B24004678 Opened Date 12/11/2024

Description of Work SFD/ Install 500 gallon underground propane tank

check spelling

Approved 12/17/24

Address \* (This section is required.)

Search Reset Clear Get Parcel & Owner

Street # 4196 Street Name TEN OAKS Street Type RD
Unit Type --Select-- Unit # X Coordinate -76.98396 Y Coordinate 39.25557
City DAYTON State MD Zip Code 21036 Primary Yes

Parcel \* (This section is required.)

Search Reset Clear Get Address & Owner

GIS ID \* 24165 Parcel Parcel Area 3.61 Land Value 275700 Improved Value 275700 Exemption Value 0 Plan Area RURAL

Legal Description 3.609 A [ ]TEN OAKS RD [ ]DAYTON

check spelling

Block Lot Census Tract 605101 Council Dist 5 Inspection Dist Supervisor Dist Map # DAP Zone

Plan Area State Tax Id 1405362695 Subdivision Name

Section Area Tax Map 22

Grid 22-20 Zoning District RR-DEO ADC Map 4813-C10

SDP No. Final Plan No. WP File No. Primary Yes

Record Plat No. WS Contract No. FDP No.

Owner Occupied Year Built 0 Historic District Yes No

Historic District Registry No. Stat Area 5-01 Flood Plain Yes No

Building No

Owner \* (This section is required.)

Search Reset Clear

Name \* ABDAL

Address Line 1 4196 Ten Oaks Rd

Address Line 2

**Mail City**  
 Dayton  
**Mail State**  
 MD  
**Mail Zip Code**  
 21036  
**Phone**  
 443-992-3989  
**Primary**  
 Yes  
**E-mail**  
 \_\_\_\_\_  
**Cell Number**      **Fax Number**  
 \_\_\_\_\_

**Professionals** (This section is not required.)

**License # \*** 20100079809      **Business Name** MID ATLANTIC COOPERATIVE SOLUTIONS DBA AERO ENERGY  
**License Type \*** Propane Gs      **First Name** RICHARD      **Middle Name** THOMAS      **Last Name** JARCY  
**Primary** Yes  
**Address Line 1** 230 LINCOLN WAY EAST  
**Address Line 2** \_\_\_\_\_  
**City** NEW OXFORD      **State** PA      **ZIP Code** 17350-0000  
**Phone 1** 2406744592      **Phone 2** 717-624-5809      **Fax** \_\_\_\_\_  
**E-mail** RJARCY@AEROENERGY.COM

**Applicant** (This section is not required.)

Search      As Owner      As Lic. Prof      As Contact

**Type \*** Applicant      **First Name** steve      **MI**      **Last Name** dannenfeldt  
**Relationship** Applicant      **Full Name** steve dannenfeldt  
**Primary** Yes  
**Organization Name** Aero Energy  
**Street Address** 230 lincoln way East  
**Address Line 2** \_\_\_\_\_  
**City** New Oxford      **State** PA      **Zip Code** 17350  
**Phone** 717-577-5923      **Cell**      **Fax** \_\_\_\_\_  
**E-mail \*** sdannenfeldt@aeroenergy.com

**Addtl Info**

**Est Construction Cost \*** 6600      **Housing Units \*** 0      **Number of Buildings \*** 0      **Public Owned** No  
**Construction Type** 329 - Structures Other Than Buildings (Retaining Walls/Tents)

**TANK INFORMATION**

**RESIDENTIAL TANK INFORMATION**

**Capital Project-No Fee \***  Yes  No      **Capital Project Number** \_\_\_\_\_ (Text)  
**Fee Exempt \***  Yes  No      **Roadside Tree Project Permit \***  Yes  No      **Roadside Tree Permit #** \_\_\_\_\_ (Text)  
**Existing Use \*** SFD      **Number of Tanks Installed \*** 1 (Number)      **Number of Tanks Removed \*** 0 (Number)

Needs . . .

BAT/LPD

plan from

FCC. - 25

## Silvast, Zackary

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**From:** Silvast, Zackary  
**Sent:** Wednesday, November 22, 2023 10:32 AM  
**To:** Paul Cavanaugh; Luke Groom  
**Cc:** Freemon, Robert; Williams, Jeffrey; Mike J. McCann  
**Subject:** RE: regarding approved OSDS plan for 4196 Ten Oaks Road  
**Attachments:** signed Variance from MDE (4196 Ten Oaks Rd).pdf

Good Morning Paul,

Yes, we will work diligently to get it done by next week is my goal. Better to have caught it now then way down the road, luckily Spencer double-checked. Always good to have multiple eyes!

As for your request, please see the attached variance approval. And I am sorry I did not catch it earlier on.

Have a great Thanksgiving as well! I will be back in the office on Nov 28<sup>th</sup>.

- ZS

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**From:** Paul Cavanaugh <PaulC@fcc-eng.com>  
**Sent:** Tuesday, November 21, 2023 5:11 PM  
**To:** Silvast, Zackary <zsilvast@howardcountymd.gov>; Luke Groom <L.groom@fcc-eng.com>  
**Cc:** Freemon, Robert <rfreemon@howardcountymd.gov>; Williams, Jeffrey <jewilliams@howardcountymd.gov>; Mike J. McCann <mike.mccann@fcc-eng.com>  
**Subject:** RE: regarding approved OSDS plan for 4196 Ten Oaks Road

[Note: This email originated from outside of the organization. Please only click on links or attachments if you know the sender.]

Zack,

Please send over the MDE variance for our records when you have a chance, we will do our best to get you a revised plan next week.

As you typically do, we know you will work with us to get a quick turnaround for the owner when we get into these unique situations.

Have a great and safe Thanksgiving weekend.

Paul

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**From:** Silvast, Zackary <zsilvast@howardcountymd.gov>  
**Sent:** Tuesday, November 21, 2023 4:30 PM  
**To:** Luke Groom <L.groom@fcc-eng.com>  
**Cc:** Paul Cavanaugh <PaulC@fcc-eng.com>; Freemon, Robert <rfreemon@howardcountymd.gov>; Williams, Jeffrey <jewilliams@howardcountymd.gov>  
**Subject:** regarding approved OSDS plan for 4196 Ten Oaks Road

Good Afternoon,

After doing some research in relation to the building permit, the formerly approved OSDS plan requires revisions. The signed Perc Certification Plan requires that 4196 Ten Oaks Road be required to have a BAT and LPD system design in correlation with the approved variance from MDE. The current OSDS plan only shows 2000 GAL Tank & pumped to gravity dispersal. I am sorry that I did not catch this error earlier, I believe when I had done my initial reviews I did so without being able to pinpoint the original file location.

We are requesting updated plans be submitted, so that I can approve Mr. Basheer's building permit. Thank you.

- ZS

**Zack Silvast (LEHS)**

*Plan Review Supervisor - Water & Sewer Division*

*410-313-1777*

Environmental Health Bureau

Howard County Health Department