

Menu Save Reset Cancel Help

Approved 7/19/25
-HO.

Online BP

9/8 7/7/25

Record Detail * (This section is required.)

Case #
EH-PLANS-25-0
Type
EnvHealth/Environmental Health/Plan Check/Application

Status
In Review

Opened Date
07/03/2025

Single Entry Edit-View Record Form

Application Name
B25002603

Description
SFD/ CONSTRUCT 34' X 16' DECK WITH STEPS TO GRADE

Total Invoiced
0.00

Total Paid
0.00

Balance
0.00

Assigned to Department Current Department

Well and Septic Progr

Assigned to Staff Current User

Zack Silvast

Address * (This section is required.)

New Search Delete Set Primary

<input type="checkbox"/> Primary	Street # (start)	Direction	Street Name	Street Type	City	State	Zip Code	Address Status	Street Suffix (Direction)	Unit Type	U
<input type="checkbox"/> <input checked="" type="radio"/>	4352		Buckski...	DR	Elli...	MD	21042				

Parcel (This section is not required.)

Search Delete Get Address & Owner Set Primary

<input type="checkbox"/> Primary	Parcel #	Book	Page	Parcel	Parcel Area	Land Value	Improved Value	Exemption Value	Legal Description	Tract
0 record(s) found.										

Owner (This section is not required.)

Search Delete Set Primary

<input type="checkbox"/> Primary	Name	Mail Address Line1	Mail Address Line2	Mail Address Line3	Mail City	Mail State	Mail Zip Code	Phone	Country/Regi
<input type="checkbox"/> <input checked="" type="radio"/>	Adafoh Okojie	4352 Buckskin Wood Dr.			Ellicott City	MD	21042		US

Applicant * (This section is required.)

Search As Owner As Lic. Prof As Contact

Single Entry Applicant Form

Type *
Applicant

Primary
Yes

First Name *
Joseph

Middle Name

Last Name *
Chandler

Home Phone ((xxx)xxx-xxxx)

Organization Name *
 Maryland Decks & Hardscape, LLC.
Mobile Phone ((XXX)XXX-XXXX)
 (240) 882-8076
E-mail
 pbchandler@gmail.com
Business Phone ((XXX)XXX-XXXX)

Preferred Channel
 --Select--

Applicant Address

New **Look Up** **Deactivate** **Remove**

<input type="checkbox"/> Contact Address ID	Address Type	Address Line 1	City	State	Zip	Primary	Recipient	Status
---	--------------	----------------	------	-------	-----	---------	-----------	--------

0 record(s) found.

Custom Fields

DATE TRACKING

Received Date **Due Date**
 07/03/2025 7/18/2025

Dates to Complete **Received by Food**
 14 (Number)

Food Review Type **Equipment Specification Sheets Submitted**
 --Select--

Equipment Specification Sheet **Received by Community Hygiene**

Received by Well and Septic
 7/3/2025

FACILITY INFORMATION

Name of Business (dba) *
 n/a (Text)

Associated Building Permit Number
 (Text)

Owner Switch Date
 (Text)

Does the project include an Aquatic Facility such as a Public Pool? If Yes, forward to CH Program.
 Yes No

Does the project include Private Septic? If Yes, forward to WS Program.
 Yes No

Is this a Prototype Food Service Facility? If Yes, refer to State.
 Yes No

Facility Fax
 (Text)

Days of Operation
 (Text)

Does this project have a Building Permit?

Yes No

Building Permit Issued Date

Non-Profit

Does the project include Private Well? If Yes, forward to WS Program.

Yes No

Does the project include Food Services? If Yes, forward to FP Program.

Yes No

Facility Phone
 (Text)

Facility Email
 (Text)

PROPERTY INFORMATION

Water Source **Sewage Disposal**
 Private Private

Design Wastewater Flow **Permit Type**
 (Number) --Select--

DEVELOPMENT PLANS

Property Type **Plan Version**
 Residential Initial

Signature Required **Engineer**
 Yes No 0

Number of paper copies **Number of mylar copies**
 0 0

Number of buildable lots created **Number of non-buildable lots created**

0 (Number)	0 (Number)
Total Number of Lots	Associated Plans
0 (Number)	

WELL AND SEPTIC INTERNAL

State Review Required Yes No Coordinate State Review Yes No

Proposed Septic System Type
--Select--

FOOD ESTABLISHMENT FACILITY

Priority Assessment --Select-- Licensed Type --Select--

License Category
--Select--

FOOD ESTABLISHMENT INFORMATION

Hours of Operation (Text) Operating Seasonally Only

If Operating Seasonally, What is the start month? (Text) Are pets allowed in a outdoor seating area? Yes No

Full Bar? Yes No

RESTAURANT AND FOOD SERVICE

Food Service Facility Secondary Category --Select-- Total Seating Capacity (Number)

Number of Restrooms (Number) Interior Restaurant Seating Capacity (Number)

Bar Seating Capacity (Text) Outdoor Seating Capacity (Text)

Does the restaurant have outdoor seating Yes No

EQUIPMENT

Evaluated non NSF, ANSI, CF or other standards Yes No Description of Refrigeration Units (Text)

Number of Walk-In Refrigerator Units (Number) Description of Walk-In Freezer Units (Text)

Is there a bulk ice machine available Yes No Space Limitation (Text)

Number of Hand Sinks Available (Number) Hood System (Text)

Ventless Equipment (Text)

PLUMBING

Size and Installation of the water heater? (Text) Is there a grease Interceptor or grease trap? --Select--

REFUSE AND RECYCLABLES

Dumpsters Located on a impervious surface? --Select-- Will there be a grease receptacle? --Select--

WAREWASHING DISHWASHING

Dishwashing Method
--Select--

HACCP

Plan Review Response Letter Received Yes No Date HACCP Approved by the State

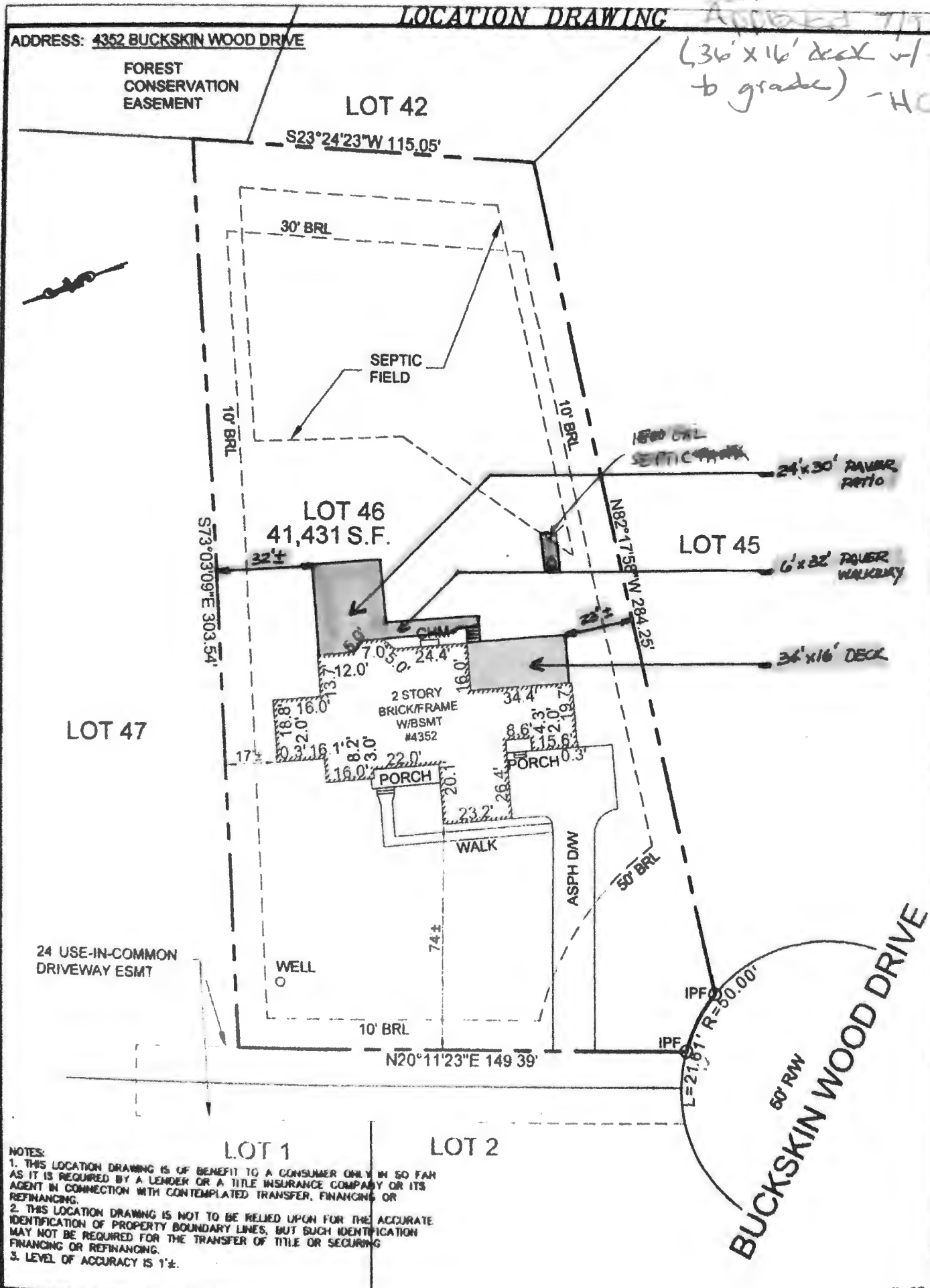
Date HACCP Plan Submitted HACCP Plan Approved

325002603

LOCATION DRAWING

ADDRESS: 4352 BUCKSKIN WOOD DRIVE

(36' x 16' deck w/ steps to grade) - HO.



LOT 42

S23°24'23"W 115.05'

FOREST CONSERVATION EASEMENT

30' BRL

SEPTIC FIELD

10' BRL

10' BRL

1500 GAL SEPTIC TANK

24' x 30' PAVEMENT DRIVE

LOT 46
41,431 S.F.

LOT 45

6' x 22' POWER WALKWAY

S73°03'09"E 303.54'

N82°17'58"W 284.25'

36' x 16' DECK

LOT 47

2 STORY BRICK/FRAME W/BSMT #4352

PORCH

PORCH

WALK

ASPH D/W

50' BRL

24 USE-IN-COMMON DRIVEWAY ESMT

WELL

10' BRL

N20°11'23"E 149.39'

IPFO

IPFO

L=21.67' R=50.00'

50' RW

BUCKSKIN WOOD DRIVE

LOT 1

LOT 2

- NOTES:
1. THIS LOCATION DRAWING IS OF BENEFIT TO A CONSUMER ONLY IN SO FAR AS IT IS REQUIRED BY A LENDER OR A TITLE INSURANCE COMPANY OR ITS AGENT IN CONNECTION WITH CONTEMPLATED TRANSFER, FINANCING OR REFINANCING.
 2. THIS LOCATION DRAWING IS NOT TO BE RELIED UPON FOR THE ACCURATE IDENTIFICATION OF PROPERTY BOUNDARY LINES, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING OR REFINANCING.
 3. LEVEL OF ACCURACY IS 1"±.

Oswald Jr, Woodin

From: Oswald Jr, Woodin
Sent: Tuesday, July 8, 2025 2:58 PM
To: pbchandler@gmail.com
Cc: ENNERLARIOS@YAHOO.COM
Subject: B25002603_4352 Buckskin Wood Drive
Attachments: WS_BuckskinWoodDrive_4352_SepticPermit_2006.pdf; Well and On-site Sewage Disposal System Setbacks 10-2402018 (1).pdf

Hi Mr. Chandler:

I am contacting you about building permit # B25002603 (4352 Buckskin Wood Drive). Please revise the site plan to include the septic tank location. I've attached the septic record for this property. The as-built drawing on page #2 shows the location of the septic tank.

Please let me know when the revised site plan has been uploaded, so I may look for it in the system. Should you have any questions, please don't hesitate to contact me.

Regards,

Hank

Hank Oswald
Licensed Environmental Health Specialist
Bureau of Environmental Health
Howard County Health Department
8930 Stanford Blvd. Columbia, MD 21045
(410) 313 - 1786
www.hchealth.org

DISCLAIMER: This e-mail is intended only for the individual to whom it is addressed. It may be used only in accordance with applicable laws. If you are not the intended recipient, you are strictly prohibited from reading, disseminating, distributing, or copying this message. If you received this e-mail by mistake, please notify the sender and destroy this e-mail