

Record Detail * (This section is required.)

Permit Type	Permit Number	Opened Date
Building/Residential/Addition/SFD	B25000332	01/26/2025

Description of Work
SFD/ CONSTRUCT 24'W x 20'D (1) STORY SUNROOM addition/, 1 STORY, Crawl Space, 1R, 0FB, 0HB, 0FP,
OTHER STRUCTURE = None, 0BR, PORCH/DECK = N/A, ENERGY METHOD = Prescriptive Method,

Approved
MPK 4/10/25

[check spelling](#)

Address * (This section is required.)

Search	Reset	Clear	Get Parcel & Owner
Street # 2710	Street Name JENNINGS CHAPEL	Street Type RD	
Unit Type -Select-	Unit #	X Coordinate -77.10477	Y Coordinate 39.29289
City WOODBINE	State MD	Zip Code 21797	Primary Yes

Parcel * (This section is required.)

Search	Reset	Clear	Get Address & Owner			
GIS ID *	Parcel	Parcel Area	Land Value	Improved Value	Exemption Value	Plan Area
926351	292	1	212500	539900	259900	RURAL
Legal Description LOT 2 1.000 A [] 2710 JENNINGS CHAPEL RD [] ASBURY PROPERTY						

[check spelling](#)

Block	Lot	Census Tract	Council Dist	Inspection Dist	Supervisor Dist	Map #	DAP Zone
	2	605601	5				
Plan Area	State Tax Id 1404374371		Subdivision Name Asbury Property				
Section	Area		Tax Map 13				
Grid 13-15	Zoning District RC-DEO		ADC Map 4811-D4				
SDP No.	Final Plan No. F-06-103		WP File No.				
Record Plat No. 20028-2003	WS Contract No.		FDP No.		Primary Yes		
Owner Occupied ☐ Yes ☐ No	Year Built 2010		Historic District ☐ Yes ☒ No				
Historic District Registry No.	Stat Area 4-07		Flood Plain ☐ Yes ☒ No				
Building No							

Owner (This section is not required.)

Search	Reset	Clear
Name *		
MOST		
Address Line 1		
2710 JENNINGS CHAPEL RD		
Address Line 2		
Address Line 3		
Mail City		
WOODBINE		
Mail State		
MD		
Mail Zip Code		
21797		
Phone		
240-475-7870		
Primary		
Yes		
E-mail		

MOSTDAVID@HOTMAIL.COM

Cell Number

Fax Number

Professionals (This section is not required.)

License # * 08010099528
License Type * MHIC Ind
Primary Yes
Business Name BERARDUCCI CONTRACTING
First Name CHRISTOPHER Middle Name Last Name BERARDUCCI
Address Line 1 1508 ABELL DRIVE
Address Line 2
City WESTMINSTER State MD ZIP Code 21157
Phone 1 4437979409 Phone 2 Fax
E-mail CFUCO1@HOTMAIL.COM

Applicant (This section is not required.)

Search As Owner As Lic. Prof As Contact

Type * Applicant
Relationship Applicant
Primary No
First Name CHRIS MI M Last Name BERARDUCCI
Full Name CHRIS M BERARDUCCI
Organization Name BERARDUCCI BUILDERS LLC
Street Address 1508 ABELL DRIVE
Address Line 2
City WESTMINSTER State MD Zip Code 21157
Phone 443-797-9409 Cell Fax
E-mail CFUCO1@HOTMAIL.COM

Contact (This section is not required.)

Search As Owner As Lic. Prof As Contact

Type Contact
Relationship Licensed Professional
Primary Yes
First Name CHRIS MI M Last Name BERARDUCCI
Full Name CHRIS M BERARDUCCI
Organization Name BERARDUCCI BUILDERS LLC
Street Address 1508 ABELL DRIVE
Address Line 2
City WESTMINSTER State MD Zip Code 21157
Phone 443-797-9409 Cell Fax
E-mail CFUCO1@HOTMAIL.COM

Addti Info

Est Construction Cost * 95000
Housing Units * 0
Number of Buildings * 0
Public Owned No
Construction Type 101 - Single Family Houses Detached

RESIDENTIAL ADDITION INFORMATION

RESIDENTIAL ADDITION INFORMATION

Capital Project-No Fee *

☐ Yes ☒ No

Capital Project Number

(Text)

Fee Exempt *

☐ Yes ☒ No

Roadside Tree Project Permit

☐ Yes ☒ No

Roadside Tree Pr

No of Stories *
1 (Text)

Foundation *
Crawl Space

Basement *
N/A

No of Rooms *
1 (Text)

Full Baths *
0 (Number)

Ha
0

Model *
SFD/ CONSTRUCT 24'W x 20'D (1) STORY SUNROOM addition/
[check spelling](#)

Other Structure *
None

Bedrooms *
0 (Number)

Porch Deck *
N/A

No of Fireplaces *
0 (Number)

Type of Fireplace
--Select--

W & S Fees Paid
☐ Yes ☐ No

Water *
Private

Sewage *
Privat

Utilities *
Gas & Electric

Heating System *
Electric & Propane Gas

Sprinkler System *
None

1st Floor Width
20 FT (Number)

1st Floor Depth
24 FT (Number)

2nd Floor Width
FT (Number)

2nd Floor Depth
FT (Number)

Basement Width
FT (Number)

Basement Depth
FT (Number)

Height
FT (Number)

Total Square Footage *
446 SQFT (Number)

Occupiable Square Footage *
446 SQFT (Number)

Affordable Housing Funding *
N/A

Foundation Measurement
20x24 (Text)

Walls
2x6 (Text)

Roof
gable/asp (Text)

Change In Use
☐ Yes ☒ No

Grading Permit No
(Text)

Senior Housing
☐ Yes ☒ No

MIHU Outside Downtown Columbia
☐ Yes ☒ No

Additional Description Info

Expiration Date
10/7/2025

MIHU Required Units
0 (Num)

[check spelling](#)

GREEN INFORMATION

Goal Level
--Select--

Actual Level
--Select--

Leed Registration Number
(Text)

Date of Leed Certification

STORM WATER MANAGEMENT

Green Roofs A1
☐ Yes ☐ No

Permeable Pavements A2
☐ Yes ☐ No

Reinforced Turf A3
☐ Yes ☐ No

Disconnection of Rooftop Runoff N1
(Number)

Sheetflow to Conservation Areas N3
☐ Yes ☐ No

Rainwater Harvesting M1
(Number)

Submerged Gravel Wetlands M2
(Number)

Landscape Infiltration
(Number)

Dry Wells M5
(Number)

Micro Bioretention M6
(Number)

Rain Gardens M7
(Number)

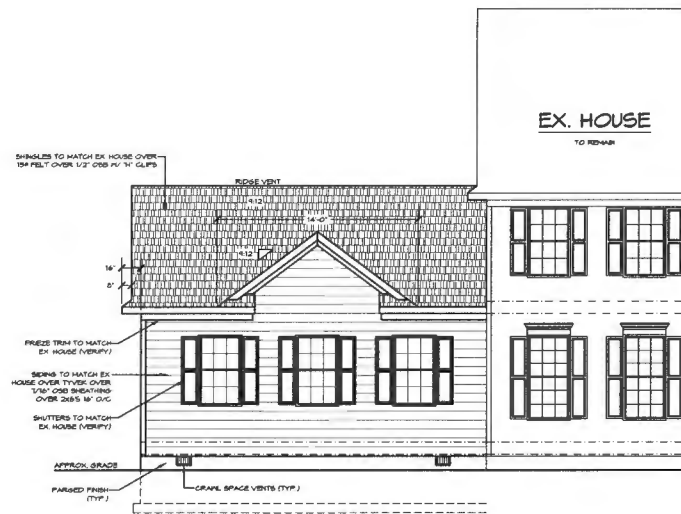
Swales M8
(Number)

PSWM Certification Received in CID on

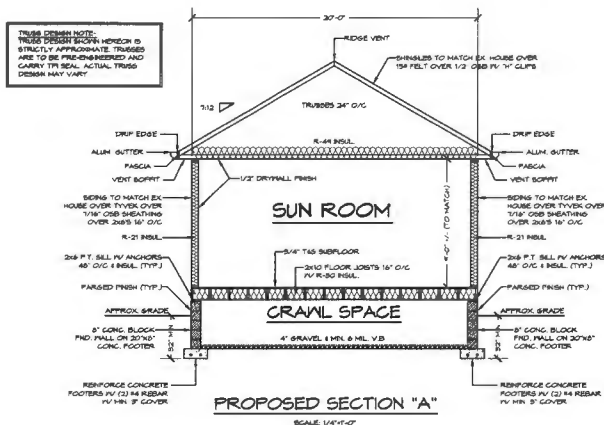
Submit Cancel



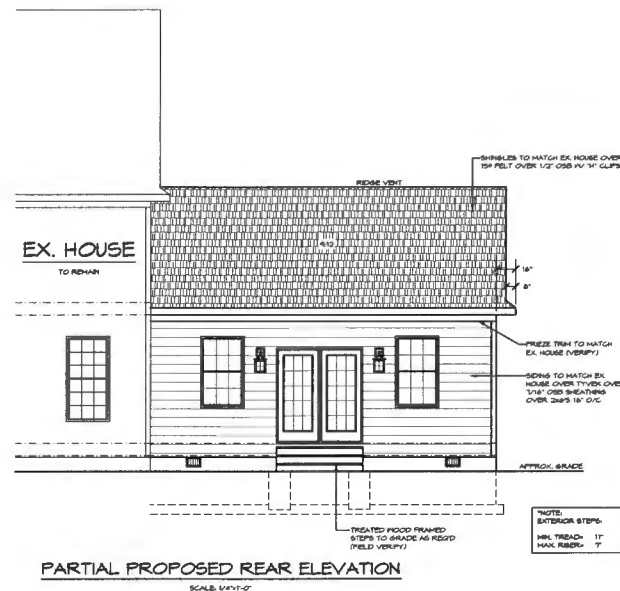
PROPOSED LEFT SIDE ELEVATION
SCALE: 1/4"=1'-0"



PARTIAL PROPOSED FRONT ELEVATION
SCALE: 1/4"=1'-0"



PROPOSED SECTION "A"
SCALE: 1/4"=1'-0"



PARTIAL PROPOSED REAR ELEVATION
SCALE: 1/4"=1'-0"

**ADDITION TO
THE MOST RESIDENCE
BERARDUCCI CONTRACTING, INC.**

FILE BERARDUCCI - MOST ADDITION

SCALE: 1/4"=1'-0"

DATE: 1/20/20

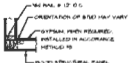
SHEET NO.: 2

**OBL CUSTOM HOME
DESIGN INC.**
PO BOX 1000000
PHOENIX, AZ 85010-0000
PHONE: 480-433-3330

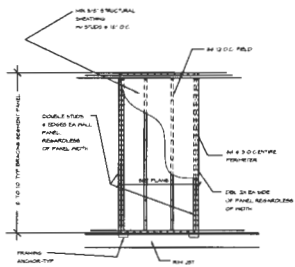
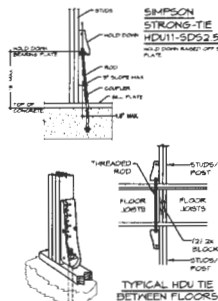
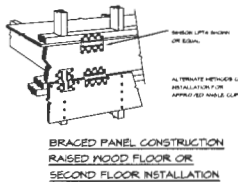
ADDITION TO THE MOST RESIDENCE BERARDUCCI CONTRACTING, INC.

GBL CUSTOM HOME
DESIGN, INC.
PO BOX 237 FARMERSBURG, MD 21068
PHONE 410-555-5555

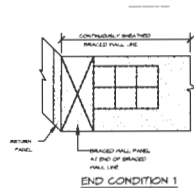
AT CORNERS, CONNECT
THE TWO PANELS TOGETHER
AS OUTLINED IN THIS
DETAIL TO PROVIDE
OVERLAPPING RESTRAINT



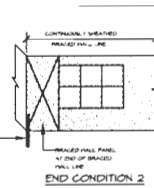
OUTSIDE CORNER DETAIL
SCALE: NOT TO SCALE



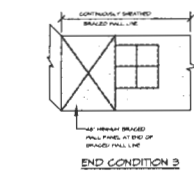
1 **BRACED PANEL CONSTRUCTION (APA METHOD)**
RAISED WOOD FLOOR OR 2ND FLOOR
SCALE: NOT TO SCALE



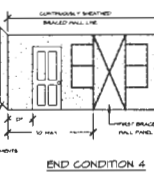
END CONDITION 1



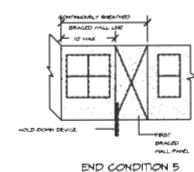
END CONDITION 2



END CONDITION 3



END CONDITION 4



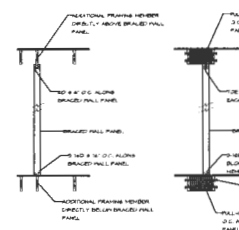
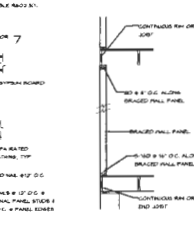
END CONDITION 5

REQUIREMENTS

1. FOR BRACED WALL LINES SHEATHED WITH WOOD STRUCTURAL PANELS:
a. ALL BRACED WALL LINES SHEATHED WITH STRUCTURAL FLOORING
b. 2\"/>

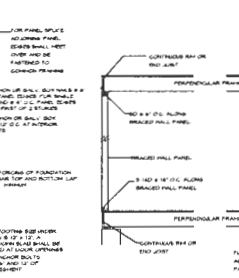
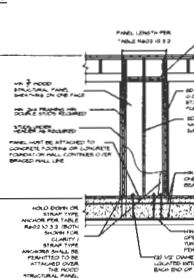
CORNER CONDITIONS

NOT TO SCALE



PARALLEL CONNECTIONS

NOT TO SCALE



PERPENDICULAR CONNECTIONS

NOT TO SCALE

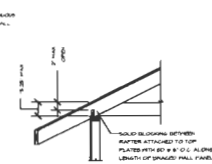


FIGURE R602.10.5.2(1)
BRACED WALL PANEL CONNECTION TO PERPENDICULAR RAFTERS

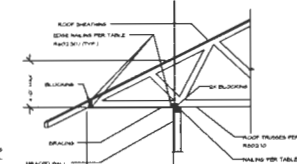


FIGURE R602.10.5.2(2)
BRACED WALL PANEL CONNECTION OPTION TO PERPENDICULAR RAFTERS OR ROOF TRUSSES

ROOF CONNECTIONS

NOT TO SCALE



P. J. BERARDUCCI - 10007 - SECTION

SCALE: 1/4\"/>

DATE: 1/20/08

SHEET NO. 4

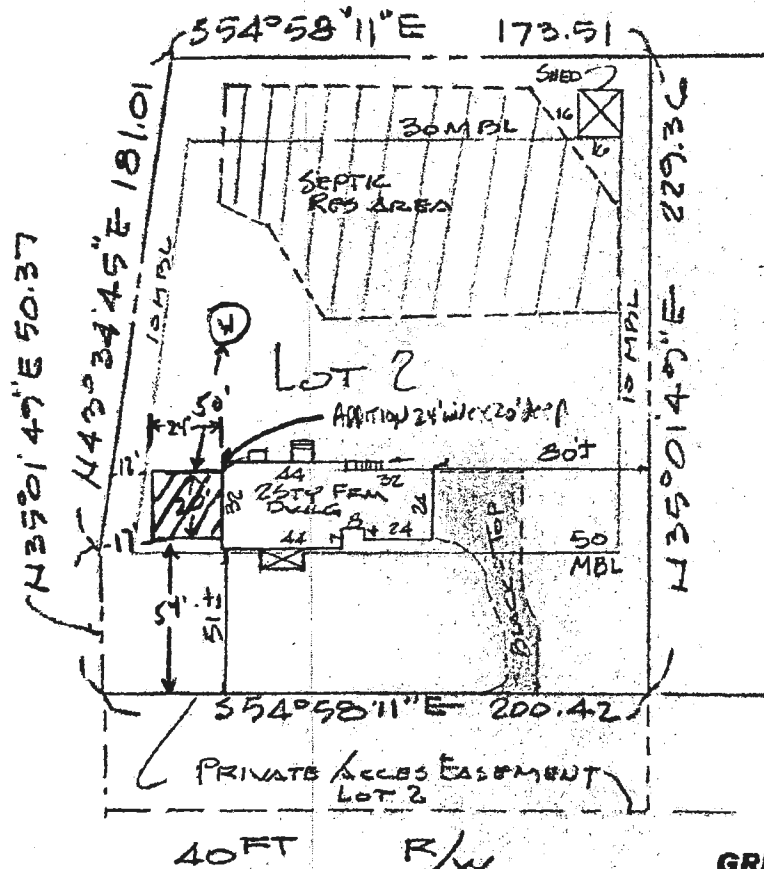
SURVEYORS CERTIFICATE:

1. This plat is a benefit to a consumer only insofar as it is required by a lender or a title insurance company or its agent in connection with a contemplated transfer, financing, or refinancing.
2. This plat is NOT to relied upon for the establishment or location of fences, garages, buildings, or other existing or future improvements.
3. This plat does NOT provide 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.
4. This is to certify that we have surveyed the property for the purpose of locating the improvements and that they are located as shown hereon within the indicated tolerances specified below. This survey did not include the marking of property corners.
5. This plat is for title purposes only. No title report is being furnished.
6. This is to certify that this drawing meets the Minimum Standards of Practice of the State of Maryland.

TOLERANCES:

Structure dimensions have been shown to ± 1.05 feet.
Setback dimensions have been shown to ± 2.0 feet.

EDWIN J. KIRBY, JR. Prof Land Surveyor
Expires 07-2015



LOT 1

MID STATE GRID

LOCATION DRAWING
NO. 2710 JENNINGS CHAPEL ROAD
LOT NO. 2, AGRICULTURAL PRESERVATION
SUBDIVISION PLAT FOR ASBURY PROPERTY
HOWARD CO., MD.

A licensed Maryland Surveyor either personally prepared this Plat or was in responsible charge over its preparation and the Surveying work reflected in it, in compliance with the Maryland Minimum Standards of Practice for Land Surveyors.

GREENSPRING SURVEYS
P.O. BOX# 761
BROOKLANDVILLE, MD. 21022
410-337-7942 CELL 410-409-5237
FAX 410-876-3176
SURVEYOR@NETSCAPE.COM

DATE: 08-12-14 SCALE 1"= 60'

Eshenbaugh, Melanie

From: Eshenbaugh, Melanie
Sent: Thursday, February 20, 2025 2:13 PM
To: Chris Berarducci
Subject: B25000332
Attachments: 1000020648.jpg; 1000020649.jpg; 1000020650.jpg

Good afternoon,

After review of the building permit request and conducting a site visit at this property, I noticed that the well condition is of concern. The conduit is cracked which can present a groundwater contamination risk. Additionally, we kindly request existing simplified floor plans to gain approval of building permit #B25000332, along with the repair of the well conduit. This requirement is in response to conducting the site visit to the property on 2/14 and observing the condition of the well/conduit (see attached photos). The well conduit will need to be secured under the cap and will need repaired to ensure water potability standards for the residence in accordance with Health Dept. code (code requirements in COMAR 26.04.04.25). Please submit to the Health Dept. office documentation of the well repair via email or mail as proof of completion of the work. Also, please submit floor plans for the entire residence in order to move forward with our review of the building permit approval process. Any additions/renovations to existing dwellings must include simplified floor plans. The floor plans must contain a diagram of each room, labeled with intended use and level of the dwelling including windows, doors, plumbing fixtures, and rough-in plumbing. Please upload the floor plans to DILP. Also, we strongly recommend water testing for bacteria to ensure there is no potential health risk to the occupants of the property. Please contact the Community Hygiene program (410-313-1773) and someone can assist with scheduling water sampling if there is a desire to have the well water tested. Let me know if you have any questions and thank you kindly.

Melanie Eshenbaugh
Bureau of Environmental Health
Howard County Health Dept.
8930 Stanford Blvd. Columbia, MD 21045
www.hchealth.org



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