

NEED SITE INSP

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS  
3000 COURT HOUSE DRIVE  
ELICOTT CITY, MD 21043  
PERMITS (410) 313-2456 INSPECTIONS (410) 313-1070  
AUTOMATED INFORMATION (410) 313-3800

# HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

00 145 322 KN

Building Address 3560 Woodbine Rd  
Woodbine MD 21797  
Suite/Apt. #: \_\_\_\_\_ SDP/WP/Petition #: \_\_\_\_\_  
Census Tract 604001 Subdivision \_\_\_\_\_  
Section \_\_\_\_\_ Area \_\_\_\_\_ Lot \_\_\_\_\_  
Tax Map \_\_\_\_\_ Parcel \_\_\_\_\_ Grid \_\_\_\_\_  
Zoning \_\_\_\_\_ Map Coordinates 7G6 Lot size \_\_\_\_\_

Property Owner's Name William Helen Phobus  
Address 3560 Woodbine Rd  
City Woodbine State MD Zip Code 21797  
Home Phone 410-489-7774 Work Phone \_\_\_\_\_  
Applicant's Name & Mailing Address, (if other than stated hereon):  
Teris Oil / Carol Hoffman  
82 John St.  
Westminster MD  
Phone 410-848-9459 Fax 410-840-8789

Existing Use 310  
Proposed Use \_\_\_\_\_  
Estimated Construction Cost \$ 2425  
Description of Work Install sanding propane tank  
for generator, inside to fl room htr

Contractor Company Teris Oil  
Contact Person Dave Noyes / Carol Hoffman  
Address 82 John St  
City Westminster State MD Zip Code 21158  
License No. 468  
Phone 410-848-9459 Fax \_\_\_\_\_

Occupant or Tenant William Helen Phobus  
Contact Name William Phobus  
Address 3560 Woodbine Rd  
City Woodbine State MD Zip Code 21797  
Phone 410-489-7774 Fax \_\_\_\_\_

Engineer or Architect Company \_\_\_\_\_  
Contact Person \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_

### BUILDING DESCRIPTION - COMMERCIAL

### BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: _____	Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private
No. of stories: _____	Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Construction type: <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame  <input type="checkbox"/> State Certified Modular	Sprinkler system: N/A <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private
1st floor: _____ 2nd floor: _____ Basement: _____	Sewage Disposal: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Other Structure: _____ Dimensions: _____ Footings: _____ Roof: _____	Sprinkler system: N/A <input type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____
<input type="checkbox"/> State Certified Modular <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.

Carol Hoffman  
Applicant's Signature  
Carol Hoffman  
Title/Company

Carol Hoffman  
Print Name  
10-3-03  
Date

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**  
\*\* PLEASE WRITE NEATLY AND LEGIBLY. \*\*  
- FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL
Land Development DPZ		
State Highways		
Building Official		
Health	<u>4/06/04</u>	<u>[Signature]</u>
Fire Protection		
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>		
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>		
ONE STOP SHOP: <input type="checkbox"/>		

DPZ SETBACK INFORMATION

Front: \_\_\_\_\_  
Rear: \_\_\_\_\_  
Side: \_\_\_\_\_  
Side St.: \_\_\_\_\_

All minimum setbacks met? YES  NO

Is Entrance Permit required? YES  NO

Historic District? YES  NO

Lot Coverage for NewTown Zone \_\_\_\_\_

SDP/Req-line approval date \_\_\_\_\_

PROPERTY ID# 60325

Filing fee \$ \_\_\_\_\_  
Permit fee \$ 100.00  
Special fee \$ \_\_\_\_\_  
Add'l per. fee \$ \_\_\_\_\_  
TOTAL FEES \$ 100.00  
Sub-total paid \$ \_\_\_\_\_  
Balance due \$ \_\_\_\_\_  
Check # 3254  
Validation # 3254

Accepted by [Signature]

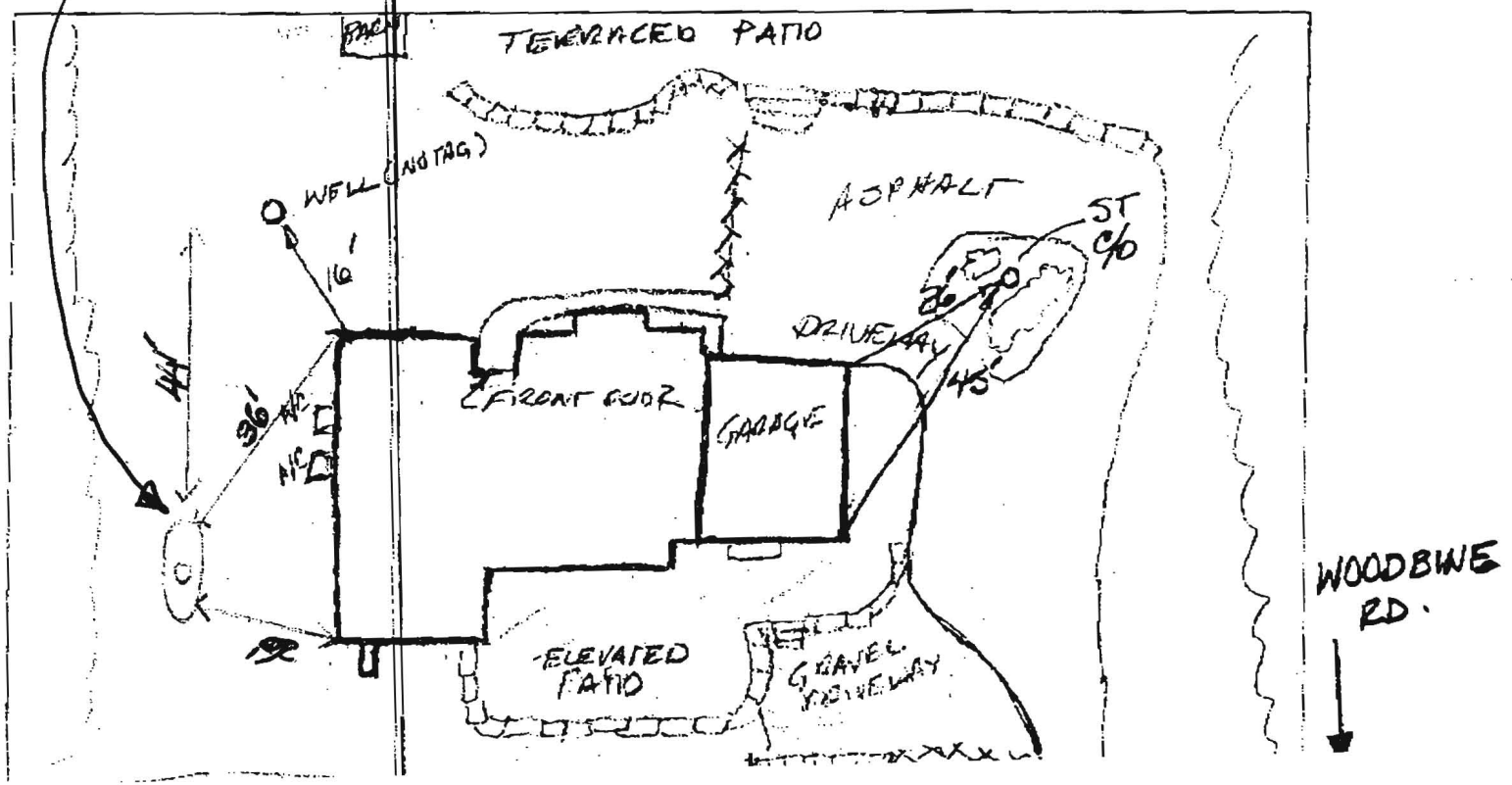
Distribution of Copies: White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA

12/22/03

SITE INSPECTION SHEET

OWNER: WILLIAM & HELEN PHEBUS PHONE #: 410-489-7774  
 ADDRESS: 3560 WOODBINE RD. CONTRACTOR: \_\_\_\_\_  
 WELL TAG #: ? HO-69-0128  
 SUBDIVISION: \_\_\_\_\_ LOT: \_\_\_\_\_ COUNTY #: HOWARD  
 PROPOSAL: BP 00146522- Propane Tank. (FR)

LOCATION DIAGRAM



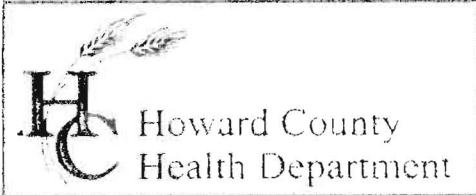
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HO CO ENV HEALTH

Jan 07 04 04:45p





3525 H Ellicott Mills Drive, Ellicott City, MD 21043  
(410) 313-2640 Fax (410) 313-2648  
TDD (410) 313-2323 Toll Free 1-866-313-6300  
website: www.hchealth.org

Penny E. Borenstein, M.D., M.P.H., Health Officer

January 2, 2004

Mr. William Phebus  
3560 Woodbine RD  
Woodbine, MD 21797

**RE: BP 00145322  
Propane Tank @  
3560 Woodbine RD**

Dear Mr. Phebus

Our office has approved the above building permit. I have contacted your contractor (Mr. David Honeycutt) by phone and requested a final drawing with distances from the corners of the house to the proposed tank location (no less than 20ft from the wall of the house) and its distance to the well (no less than 30ft from the well).

**Please keep in mind that any future additions to your home, or evidence of failure on your existing septic system would require soils percolation testing to establish adequate area for an upgrade and future septic repair.** The testing would most likely occur in the large, open and moderately sloped area facing the front of your house. Such an upgrade would require a properly sized tank and pump tank if percolation-testing results indicated that a conventional trench field would suffice.

If you have any questions I may be reached at (410)-313-2669.

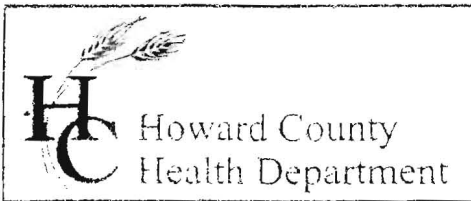
Sincerely,

A handwritten signature in black ink, appearing to read 'Frank Alfonso', written over a horizontal line.

Frank Alfonso, RS

FA/fa

Cc Mr. David Honeycutt, Tevis Oil



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Penny E. Borenstein, M.D., M.P.H., Health Officer

December 31, 2003

Mr. Phebus  
3560 Woodbine Road  
Woodbine, MD 21797

Re: Propane Tank Permit Application  
3560 Woodbine Road

# B00145322


Dear Mr. Phebus:

Our office conducted a site inspection on December 22, 2003 to locate the existing well and assess the condition of the septic system. Although your site plan locates the septic system with an 'X', the system was not identifiable in the field. Our records indicate the age of the house and thus the age of the septic system is 34 years old. The average life expectancy for a septic system ranges from 25 to 35 years depending on the usage and soil profile. If the septic system lasts for an extraordinary period of time, it may indicate the system is located in high water table or excessive rock. In order to process the propane tank permit, you must provide evidence that the septic system is functioning properly (COMAR 26.04.02.02 D4). Due to the natural land features and age of the septic system, our concern is that the current septic system is not functioning properly.

If you have records of a septic repair in the recent past and/or regular septic tank maintenance via pumping out the sludge, please submit the information to our office to help support the process of the propane tank permit. However, if you do not have records, our office requests a septic contractor to contact our office for an appointment to assess the existing septic system. If you need a list of septic contractors, we have one available to you. Please note the list is not all-inclusive but includes the septic contractors we typically issue permits to for Howard County installations and repairs. If you choose not to continue with the propane tank permit process, we strongly urge you to have your septic system assessed and possibly repaired/ upgraded at your earliest convenience.

Thank you for your time in this important matter. If you have any questions or need further assistance, contact our office at 410-313-1771.

Sincerely,

  
Frank Alfonso  
Registered Sanitarian

KN

Enclosures

Cc: file