

Permits: 410-313-2455
Inspections: 410-313-1810
Automated Line: 410-313-3800

Howard County Building/Fire Permit Application
Department of Inspections, Licenses & Permits
3430 Court House Drive
Ellicott City, MD 21043

Permit Number:

Building Address: 11445 Butterfruit Way
Ellicott City 21042

Suite/Apt. # _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: Brantwood
Section: _____ Area: _____ Lot: 11
Tax Map: 0016 Parcel: 0436 Grid: _____
Zoning: _____ Map Coordinates: 4814 ES Lot Size: _____

Existing Use: SFO
Proposed Use: SFO + Pool
Estimated Construction Cost: \$ 25,000
Description of Work: Inground pool 23' x 36' in
rear yard w/ 48" high fence
to enclose

Occupant or Tenant: _____
Was tenant space previously occupied? ☐ Yes ☐ No
Contact Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

BUILDING DESCRIPTION - COMMERCIAL	
Building Characteristics	Utilities
Height:	<u>Water Supply</u>
No. of stories:	<input type="checkbox"/> Public
Gross area, sq. ft./floor:	<input checked="" type="checkbox"/> Private
	<u>Sewage Disposal</u>
Area of construction (sq. ft.):	<input type="checkbox"/> Public
	<input checked="" type="checkbox"/> Private
Use group:	Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Gas: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<u>Construction type:</u>	<u>Heating System</u>
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Masonry	<u>Sprinkler System:</u>
<input type="checkbox"/> Wood Frame	<input type="checkbox"/> N/A
<input type="checkbox"/> State Certified Modular	<input type="checkbox"/> Full
<input checked="" type="checkbox"/> Roadside Tree Project Permit	<input type="checkbox"/> Partial
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Other Suppression
Roadside Tree Project Permit #	No. of Heads:

Property Owner's Name: Mehdad + Anahita Sarlak
Address: 11445 Butterfruit Way

City: Ellicott City State: MD Zip Code: 21042
Home Phone: 443-926-3352 Work Phone: _____

Applicant's Name & Mailing Address, (If other than stated herein): _____
Phone: _____ Fax: _____
Email: _____

Contractor Company: Maryland Pools Inc
Contact Person: Bob Brooks
Address: 9515 Gerwig Lane
City: Columbia State: _____ Zip Code: 21046
License No.: 6694
Phone: 410-995-6600 Fax: _____
Email: _____

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

BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics	Utilities
<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>
<u>Depth</u> <u>Width</u>	<input type="checkbox"/> Public
1 st floor:	<input type="checkbox"/> Private
2 nd floor:	<u>Sewage Disposal</u>
Basement:	<input type="checkbox"/> Public
<input type="checkbox"/> Finished Basement	<input type="checkbox"/> Private
<input type="checkbox"/> Unfinished Basement	Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Crawl Space	Gas: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Slab on Grade	<u>Heating System</u>
No. of Bedrooms:	<input type="checkbox"/> Electric
<u>Multi-family Dwelling</u>	<input type="checkbox"/> Oil
No. of efficiency units:	<input type="checkbox"/> Natural Gas
No. of 1 BR units:	<input type="checkbox"/> Propane Gas
No. of 2 BR units:	
No. of 3 BR units:	
Other Structure:	
Dimensions:	
Footings:	<input checked="" type="checkbox"/> Roadside Tree Project Permit
Roof:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> State Certified Modular	Roadside Tree Project Permit #
<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.

Applicant's Signature: [Signature] Print Name: Joanne Cathan
Email Address: Maryland Pools Date: _____
Title/Company: _____

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
PLEASE WRITE NEATLY & LEGIBLY
-FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL	DPZ SETBACK INFORMATION	Filing Fee	\$
State Highways			Front:	Permit Fee	\$
Building Officials			Rear:	Tech Fee	\$
PSZA (Zoning)			Side:	Excise Tax	\$
PSZA (Engineering)			Side St.:	PSFS	\$
Health			All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No	Guaranty Fund	\$
Fire Protection			Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No	Add'l per Fee	\$
Is Sediment Control approval required for issuance? <input type="checkbox"/> Yes <input type="checkbox"/> No			Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No	Total Fees	\$
<input type="checkbox"/> CONTINGENCY CONSTRUCTION START			Lot Coverage for New Town Zone:	Sub- Total Paid	\$
<input type="checkbox"/> ONE STOP SHOP			SDP/Red-line approval date:	Balance Due	\$

SETBACKS:
REAR PL. 10'
SIDE PL. 10'
HOUSE 0'
SEPTIC 10'/20'
WELL 20'

NOTES

- ALL EXISTING WELLS ON THE SUBJECT PROPERTY AND WITHIN 100 FEET OF SUBJECT PROPERTY BOUNDARIES ARE REPRESENTED TO THE BEST OF MY KNOWLEDGE AND BELIEF.
- THE EXISTING WELL ON THE SUBJECT PROPERTY (HO-94-2395) HAS BEEN FIELD LOCATED AND IS ACCURATELY SHOWN.
- TOPOGRAPHY ON THIS PLAN IS FROM HOWARD COUNTY AND IS VERIFIED TO ACCURATELY REPRESENT THE RELATIVE ELEVATION CHANGES ON AND NEAR THE SUBJECT PROPERTY.
- THE LOT SHOWN HEREON COMPLIES WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREA AS REQUIRED BY THE MARYLAND DEPARTMENT OF ENVIRONMENT.
- ANY CHANGES TO A PRIVATE SEWAGE EASEMENT SHALL REQUIRE A REVISED PERCOLATION CERTIFICATION PLAN.
- THIS AREA DESIGNATES A PRIVATE SEWAGE EASEMENT OF AT LEAST 10,000 SQ. FT. AS REQUIRED BY THE MARYLAND DEPARTMENT OF ENVIRONMENT FOR INDIVIDUAL SEWAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS EASEMENT ARE RESTRICTED. THIS EASEMENT SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE AUTHORITY TO GRANT ADJUSTMENTS TO THE PRIVATE SEWAGE EASEMENT. RECORDATION OF A REVISED SEWAGE EASEMENT SHALL NOT BE NECESSARY.
- THE PURPOSE FOR THIS PERCOLATION CERTIFICATION PLAN IS TO ADJUST THE EXISTING SEWAGE DISPOSAL EASEMENT TO ACCOMMODATE CONSTRUCTION OF AN INGROUND POOL.
- ENTIRE PROPERTY IN SOIL MAP UNIT M6C GmB

I CERTIFY THAT THE INFORMATION SHOWN HEREON IS BASED ON WORK PERFORMED IN MY PRESENCE OR BY MY DIRECTION, AND IS CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

(SIGNATURE) (DATE)

APPROVED FOR PRIVATE WATER AND PRIVATE SEWAGE SYSTEMS
HOWARD COUNTY HEALTH DEPARTMENT

(SIGNATURE) (DATE)

TITLE: PERCOLATION CERTIFICATION PLAN, "11445 BUTTERFRUIT WAY"

OWNER: MEHRDAD SARLAK

LEGEND

- PERC TEST PASS #1189 (09/20/95)
- PERC TEST PASS #1190 (09/20/95)
- PERC TEST PASS #5012

SEPTIC NOTE:

TWO TRENCHES OF THE EXISTING SEPTIC SYSTEM WIL BE ABANDONED AND REPLACED PRIOR TO HEALTH DEPARTMENT APPROVAL OF THE BUILDING PERMIT FOR THE PROPOSED INGROUND POOL.

SITE PLAN

1"=60'

LOT #11

BRANTWOOD

ACCOUNT NO.: 331539

MAP 0016, GRID 0022, PARCEL 0436

ELECTION DISTRICT: 03

HOWARD COUNTY, MARYLAND

APPROVED

WALK-THRU BUILDING PERMIT

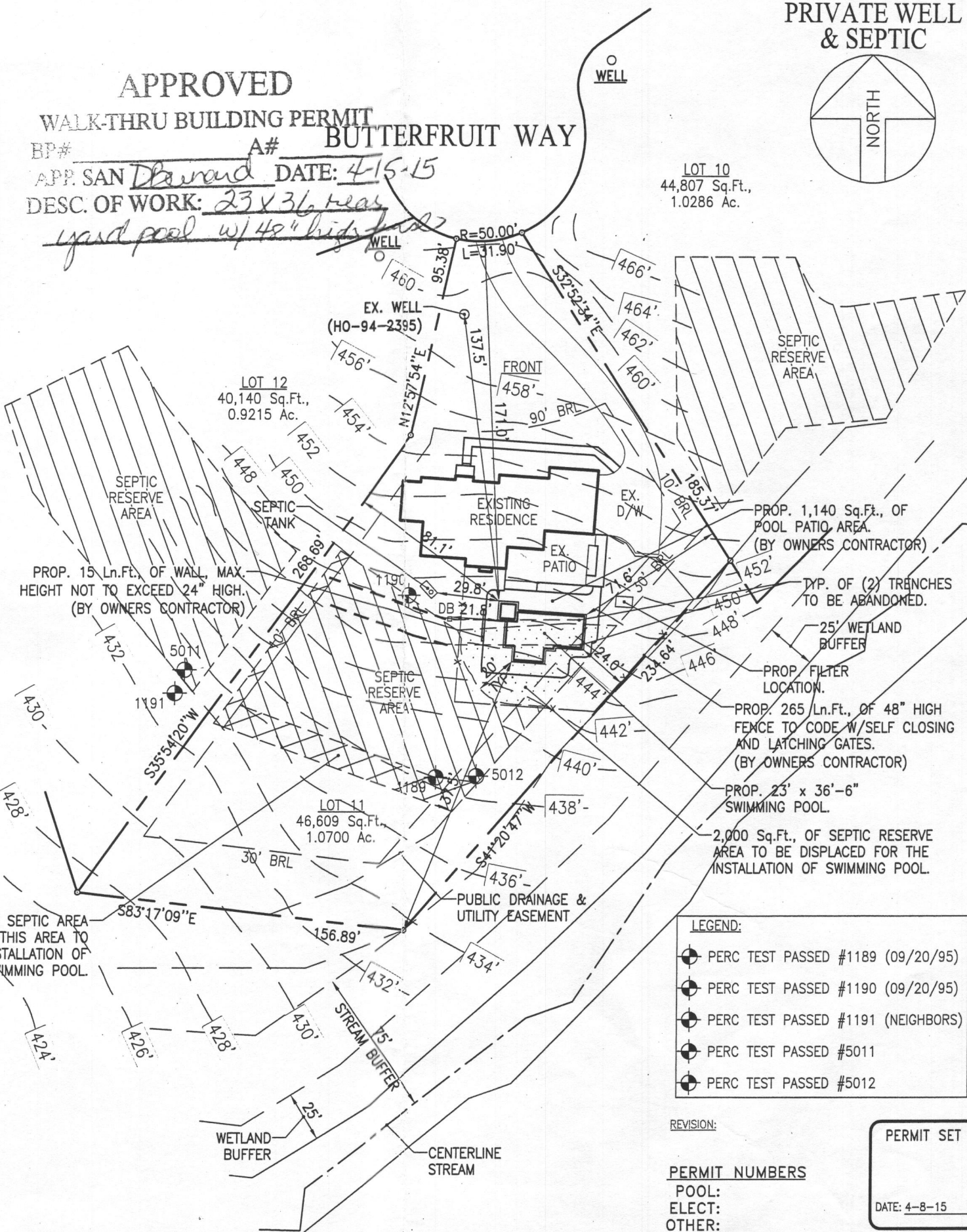
BP#

A#

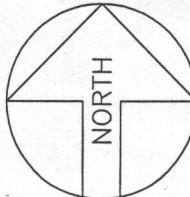
BUTTERFRUIT WAY

APP. SAN Demond DATE: 4-15-15

DESC. OF WORK: 23' x 36' Ingrd pool w/ 48" high fence



PRIVATE WELL
& SEPTIC



Maryland
POOLS
Inc.

9515 GERWIG LANE
SUITE 121
COLUMBIA, MD 21046
410-995-6600
800-252-SWIM

WWW.MARYLANDPOOLS.COM

EQUIPMENT LIST

DIRT/GRADING: ON SITE
SPA: 49 SF W/6 JTS, LED LGHT & BLWR
RAISED BEAM: 24" HIGH FACED W/CULT. STONE (106 SF)
TILE: TO BE DETERMINED
COPING: 12" ROUNDNOSE BRICK (TYPE: TBD)
PLASTER: WHITE MARBELITE
FILTER SYS: C&C 420 SF CART. W/VS-3050
CLEANING SYS: PCC 2000
TREATMENT SYS: MINERAL SPRINGS
CONTROL SYS: EASYTOUCH 8SC W/SCREEN LOGIC
HEATER: 400K BTU (NATURAL GAS)
LIGHTS: (2) LED WATTS: 300 VOLTS: 120
LOVESEAT: (1) @ 6' W/STEP (INSIDE)
AQUA BENCH: (1) @ 6.5'
RAIL GOODS: NONE
DECKING: BY OWNERS CONTRACTOR
FENCE: BY OWNERS CONTRACTOR
POOL COVER: NONE TYPE: N/A
CHEMICALS: \$100 CHEMICAL ALLOWANCE
OTHER ITEMS: 6' DIVING BOARD & STAND; 2ND STEP
TANNING LEDGE (75 SF); 4' BENCH; 36" S.D. UNIT; INITIAL
WATER FILL;

ELECTRIC: 0 FT.

POOL STATISTICS

SIZE/SHAPE: 23' x 36'-6" - CUSTOM
POOL AREA: 650 SPA: 49 OTHER:
TOTAL AREA: 699
PERIMETER: 119 SPA: 28
GALLONAGE: 27,600 DEPTH: 3'-0" TO 8'-0"

DIRECTIONS TO SITE

DIRECTIONS: MILES: 000 MAP #
32/W TO 144/E, FOLLOW 144 TO R/T ONTO LANCELOT CROSS,
FOLLOW TO FIRST EXIT OFF CIRCLE ONTO BUTTERFRUIT, GO TO
SITE AT END. 4814
GRID
E-5

Mehrdad & Anahita Sarlak
11445 Butterfruit Way
Ellicott City, Maryland 21042
Howard County

HOME PHONE:
OFFICE PHONE:
CELL PHONE 1: (443) 926-3352 (Mr.)
CELL PHONE 2:

LOT:	SUBDIVISION NAME:	DISTRICT:	ACCOUNT NO.:
11	BRANTWOOD	03	331539
SITE PLAN			ZONE:
			ONE
SCALE:	BY:	DATE:	JOB NUMBER:
1"=60'	JLR	11/07/14	JC14-10751
			SHEET #:
			1.0