

HOWARD COUNTY  
PERMIT APPLICATION

PERMIT NUMBER

Building Address 1871 Florence Rd.  
Mt. Airy MD 21771  
Suite/Apt. #: 604001 SDP/WP/Petition #: Florence Est  
Census Tract 604001 Subdivision Florence Est.  
Section \_\_\_\_\_ Area \_\_\_\_\_ Lot 3  
Tax Map 6 Parcel 238 Grid 23  
Zoning RC-DEO Map Coordinates \_\_\_\_\_ Lot size \_\_\_\_\_

Property Owner's Name Garry & Kathleen Bowring  
Address 1871 Florence Rd.  
City Mt. Airy State MD Zip Code 21771  
Home Phone 301-829-9929 Work Phone 301-890-5700  
Applicant's Name & Mailing Address, (if other than stated hereon):  
Cell 301-641-6151  
Phone \_\_\_\_\_ Fax 301-890-5651

Existing Use \_\_\_\_\_  
Proposed Use \_\_\_\_\_  
Estimated Construction Cost \$ \_\_\_\_\_  
Description of Work  
24' x 32' Two Car Garage  
w/second floor storage

Contractor Company \_\_\_\_\_  
Contact Person Garry Bowring  
Address 1871 Florence Rd.  
City Mt. Airy State MD Zip Code 21771  
License No. \_\_\_\_\_  
Phone 301-829-9929 301-890-5651

Occupant or Tenant \_\_\_\_\_  
Contact Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_

Engineer or Architect Company  
Sturdy Built Manufacturing  
Contact Person Chris Peteat  
Address P.O. Box 187  
City East Freedom State PA Zip Code 16637  
Phone 800-722-0466 Fax 814-696-7916

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: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private
1st floor: _____	Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private
2nd floor: _____	Electric Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Basement: Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
No. of Bedrooms: _____	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other:
Height: _____	
Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	
Other Structure: <u>Garage</u> Dimensions: <u>32' x 24'</u> Footings: <u>24" x 8"</u> Roof Height: <u>18' 5"</u>	
<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.

Applicant's Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Title/Company \_\_\_\_\_

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		
Dev. Engineering, DPZ		
Health	<u>5/8/07</u>	<u>R. B. ...</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"/>		
Distribution of Copies- White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA		

DPZ SETBACK INFORMATION	PROPERTY ID#:
Front: _____	Filing fee \$ _____
Rear: _____	Permit fee \$ _____
Side: _____	Excise tax \$ _____
Side St.: _____	Add'l per. fee \$ _____
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
Lot Coverage for NewTown Zone _____	Check # _____
SDP/Red-line approval date _____	Validation # _____
Accepted by _____	

Health

200'



690  
685  
680

APPROVED

WALK-THRU BUILDING PERMIT

BP#

A#

APP. SAN R. Buckler DATE: 5/8/07

DESC. OF WORK: Proposed  
32'x24' Garage, as shown

Well Elev 695'  
House 1st Flr 696'  
Basement 688'

Inv out house 689' 7"  
Inv into Septic Tk 689' 2"  
Inv out Septic Tk 688' 11"  
Inv in Dist Box 688' 6"

Existing Elev  
at Dist. Box 691' 6"

SCALE: 1" = 50'

LOT 3 FLORENCE ESTATES

GARRY & KATHLEEN BOWRING

450'

Trenches

SEPTIC

Dist Box

Septic Tank

HOUSE

WELL

*elevations of  
8-14-82  
S. B. W.*

BLDG. PERMIT SIGNED  
AND RETURNED 8-14-85

S. B. W.  
BP# 72287

ROAD EDGE

FLORENCE RD.

Proposed Garage

40'

67'

100'

100'

20'

10'

20'

69'

130'

90'

68'

34'

52'

215'

68'

80'

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Howard County  
Health Department

Bureau of Environmental Health  
7178 Columbia Gateway Drive, Columbia MD 21046  
(410) 313-2640 Fax (410) 313-2648  
TDD (410) 313-2323 Toll Free 1-866-313-6300  
website: [www.hchealth.org](http://www.hchealth.org)

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Peter L. Beilenson, M.D., M.P.H., Health Officer

May 9, 2007

Mr. Garry E. Bowring  
1871 Florence Rd.  
Mt. Airy, MD 21771

RE: **Variance Approval**  
1871 Florence Rd.  
Mt. Airy, MD 21771

Dear Sir:

The Department of Health has received your variance request dated May 9, 2007 for the above referenced property. This agency will grant **approval** of the variance provided that the detached garage is constructed no closer than ten (10) feet to the existing sewage disposal area. Approval of a building permit will be granted by this Department provided that the site plan submitted with the building permit application is consistent with the site plan approved under this variance request and illustrates a driveway location that does not extend over the sewage disposal area. Any deviations from the site plan submitted with the request will be subject to further review by this Department.

Any questions regarding this decision may be directed to the Well and Septic Program of the Howard County Health Department.

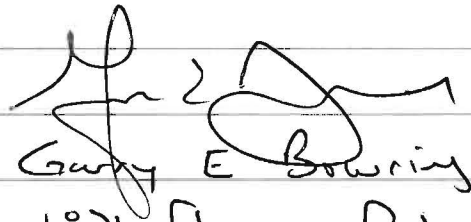
Respectfully,

Michael J. Davis, R.S.  
Director, Well and Septic Programs

cc: File

5/8/07

I hereby request for locating a 24' x 32' garage a variance to reduce the set back distance on septic easement to 10 feet. The nearest corner of the garage to the highest existing distribution trench is planned at 22 feet.



1871 Florence Rd

Mt. Airy, Md. 21771