

<small>DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3430 COURT HOUSE DRIVE ELLSWORTH CITY, MD 21043 PERMITS (410) 313-2555 INSPECTIONS (410) 313-1810 AUTOMATED INFORMATION (410) 313-3000</small>	HOWARD COUNTY PERMIT APPLICATION	PERMIT NUMBER B08000412
Building Address <u>13920 Forsythe Rd</u> <u>Sykesville Md. 21784</u> Suite/Apt. #: _____ SDP/WP/Petition #: _____ Census Tract _____ Subdivision _____ Section _____ Area _____ Lot _____ Tax Map <u>9</u> Parcel _____ Grid _____ Zoning _____ Map Coordinates _____ Lot size <u>10. ACRES</u>	Property Owner's Name <u>Dan Ricker</u> Address <u>13890</u> City <u>Sykesville</u> State <u>MD</u> Zip Code <u>21784</u> Phone _____ Phone <u>410 442 3613</u> Applicant's Name & Mailing Address, (if other than stated hereon): Phone <u>Same</u> Fax _____	
Existing Use <u>Residential, Home</u> Proposed Use <u>Same</u> Estimated Construction Cost \$ <u>30,000</u> Description of Work <u>ADD. KICK 3LI. SUPP. WORK</u> <u>Sitting & living room</u>	Contractor Company <u>SELF</u> Contact Person <u>SELF</u> Address <u>13890 Forsythe Rd</u> City <u>Sykesville</u> State <u>MD</u> Zip Code <u>21784</u> License No. <u>1293</u> Phone <u>410-442-3613</u> Fax <u>410-469-0319</u>	
Occupant or Tenant _____ Contact Name <u>Self</u> Address <u>Same</u> City <u>Same</u> State _____ Zip Code _____ Phone _____ Fax _____	Engineer or Architect Company <u>DRS</u> Contact Person <u>Dan Staley</u> Address _____ City <u>Cresminster</u> State <u>MD</u> Zip Code _____ Phone _____ Fax _____	

BUILDING DESCRIPTION - <u>COMMERCIAL</u>		BUILDING DESCRIPTION - <u>RESIDENTIAL</u>	
Building Characteristics Height: <u>16</u> No. of stories: <u>1</u> Gross area, sq. ft. per floor: _____ Use group: _____ 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	Utilities Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <input type="checkbox"/> Propane Gas <input type="checkbox"/> 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 SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> <u>Depth</u> <u>Width</u> 1st floor: _____ 2nd floor: _____ Basement: _____ <input type="checkbox"/> Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms: _____ 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: _____ Dimensions: _____ Footings: _____ Roof Height: _____ <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	Utilities Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other:

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.

<u>[Signature]</u> Applicant's Signature <u>PHE PAINT.</u> Title/Company	<u>Daniel Ricker</u> Print Name _____ Date
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Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
 ** PLEASE WRITE NEATLY AND LEGIBLY. **
 FOR OFFICE USE ONLY

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#
Land Development, DPZ			Front: _____	Filing fee \$ _____
State Highways			Rear: _____	Permit fee \$ _____
Building Official			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ			Side SL: _____	Add'l per. fee \$ _____
Health	<u>2/20/08</u>	<u>[Signature]</u>	All minimum setbacks met?	TOTAL FEES \$ _____
Fire Protection			YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Is Sediment Control approval required prior to issuance?			Is Entrance Permit required?	Balance due \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Historic District?	Validation # _____
ONE STOP SHOP: <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	
Distribution of Copies:			Lot Coverage for NewTown Zone _____	Accepted by _____
White: Building Official			SDP/Red-line approval date _____	
Green: LDD, DPZ				
Yellow: DED, DPZ				
Pink: Health				
Gold: SHA				

T:\Norms\PERMIT.FRM Rev. 11/4/04

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

B070000620

Building Address 13920 Follytree Rd
Sikesville Md 21784
Suite/Apt. #: _____ SDP/WP/Petition #: _____
Census Tract _____ Subdivision MO + 13530
Cross Property
Section _____ Area _____ Lot List 2
Tax Map _____ Parcel 69 Grid _____
Zoning REDED Map Coordinates _____ Lot size 10.3 AC.

Property Owner's Name PERSONAL
Address 13920 Follytree Rd
City Sikesville State MD Zip Code 21784
Home Phone 410-313-1199 Work Phone _____
Applicant's Name & Mailing Address, (if other than stated hereon):
Phone _____ Fax _____

Existing Use Residential
Proposed Use Pool
Estimated Construction Cost \$ 100,000.00
Description of Work Swimming Pool
Building around 7' x 10' - 24' x 12'
Aluminum siding + pool

Contractor Company Self
Contact Person PERSONAL
Address _____
City _____ State _____ Zip Code _____
License No. _____
Phone 410-313-1199 Fax _____

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

Engineer or Architect Company Self
Contact Person _____
Address _____
City _____ State _____ Zip Code _____
Phone 410-313-1199 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: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1st floor: <u>40</u> <u>170</u> 2nd floor: <u>Pool Building</u> Basement: _____ Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms _____ 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: _____ Dimensions: <u>10</u> <u>170</u> Footings: _____ Roof Height: <u>23 Feet</u> <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	Water Supply: _____ <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Sewage Disposal: _____ <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other: _____

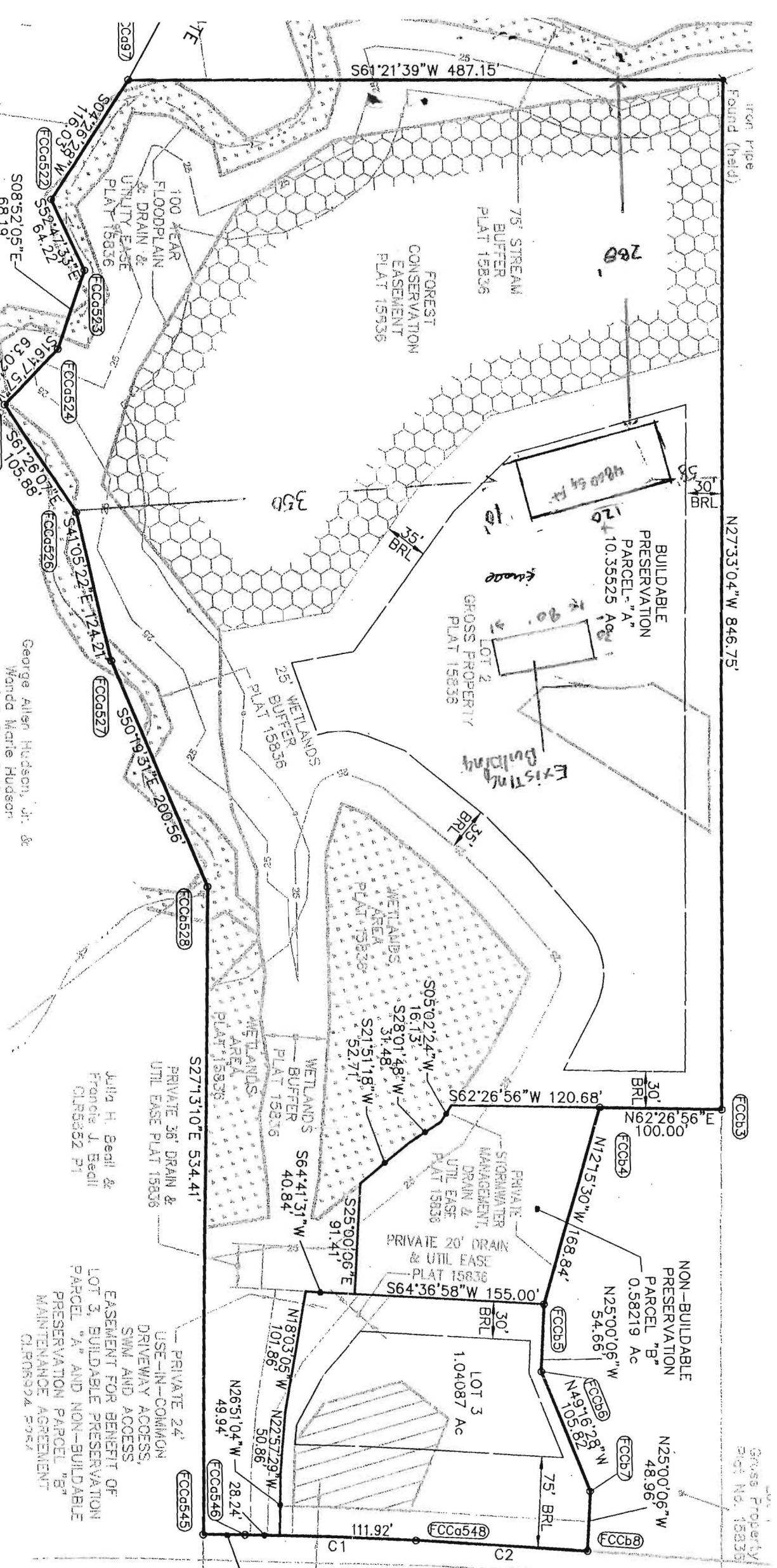
THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED 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 _____
Date/Company _____

Print Name PERSONAL
Date _____

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** PLEASE WRITE NEATLY AND LEGIBLY. **
- FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#
Development, DPZ			Front: _____	Filing fee \$ <u>25.00</u>
Highways			Rear: _____	Permit fee \$ _____
Engineering, DPZ	<u>5/31/07</u>	<u>Jaedre</u>	Side: _____	Excise tax \$ _____
Protection			Side St.: _____	Add'l per. fee \$ _____
Admittment Control approval required prior to issuance?			All minimum setbacks met?	TOTAL FEES \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Is Entrance Permit required?	Balance due \$ _____
ONE STOP SHOP: <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # _____
Distribution of Copies - White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA			Historic District?	Validation # _____
PERMIT.FRM			YES <input type="checkbox"/> NO <input type="checkbox"/>	
			Lot Coverage for NewTown Zone _____	Accepted by _____
			SDP/Red-line approval date _____	



FORSYTHE ROAD
MINOR COLLECTOR

PRIVATE 24' USE-IN-COMMON DRIVEWAY ACCESS EASEMENT FOR BENEFIT OF LOTS 1 & 3 CLR08924 P254

Howard County
CLR07680
Land Dedicated to
County, Maryland
for the Purposes

Gross Property
Size: 10.35525 Ac

George Allen Hudson, Jr. &
Wanda Marie Hudson

Julia H. Beall &
Francis J. Beall
CLR08924 P1

EASEMENT FOR BENEFIT OF
LOT 3, BUILDABLE PRESERVATION
PARCEL "A" AND NON-BUILDABLE
PRESERVATION PARCEL "B"
MAINTENANCE AGREEMENT
CLR08924 P254

**PATAPSCO HOMES
13898 FORSYTHE ROAD
SYKESVILLE, MARYLAND 21784**

Custom Home Builders

Phone: 410-442-2421

August 6, 2007

Department of Inspections, Licenses and Permits
George Howard Building
3430 Court House Drive
Ellicott City, MD 21043

Attn: Avis L. Corbin
Chief Licenses and Permits Division

Re: Residential Building Permit #07000620

Dear Ms Corbin,

The above mentioned permit is for a one story pole storage building measuring 42 x 120 ft. In response to the Building Inspector, Tom Huskins suggestion, we respectfully request an amendment to the permit increasing the size of the building to 130 x 50 ft.

Thank you for your consideration in this matter.

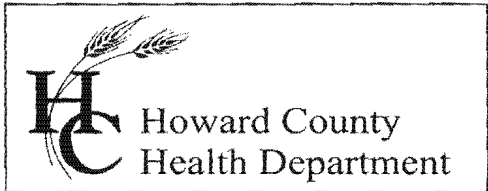
Sincerely,

Jennie A. Ricker

Jennie A. Ricker

cc: zoning } no plot plan resubmitted
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

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

March 9, 2007

Adrienne Gross
13920 Forsythe Road
Sykesville, Maryland 21784

RE: Building Permit # B07000620
Proposed Wooden Pole Building

Dear Adrienne Gross,

Review of building permit #B07000620 for the referenced property has been completed by our office. The file for the existing property contains limited information pertaining to your current septic system and the required sewage disposal area. As a result, it will be necessary to establish a sewage disposal area of 10,000 square feet as required by the Health Department prior to building permit approval. In order to establish a sewage disposal area, percolation testing is required and an approved percolation certification plan needs to be on file with the Howard County Health Department. I have enclosed the requirements for percolation testing and a percolation certification plan. The building permit will be placed on hold until all Health Department requirements are met.

If you have any questions regarding this matter, please contact me at the above address or by calling (410) 313-1775.

Found File
(AT)

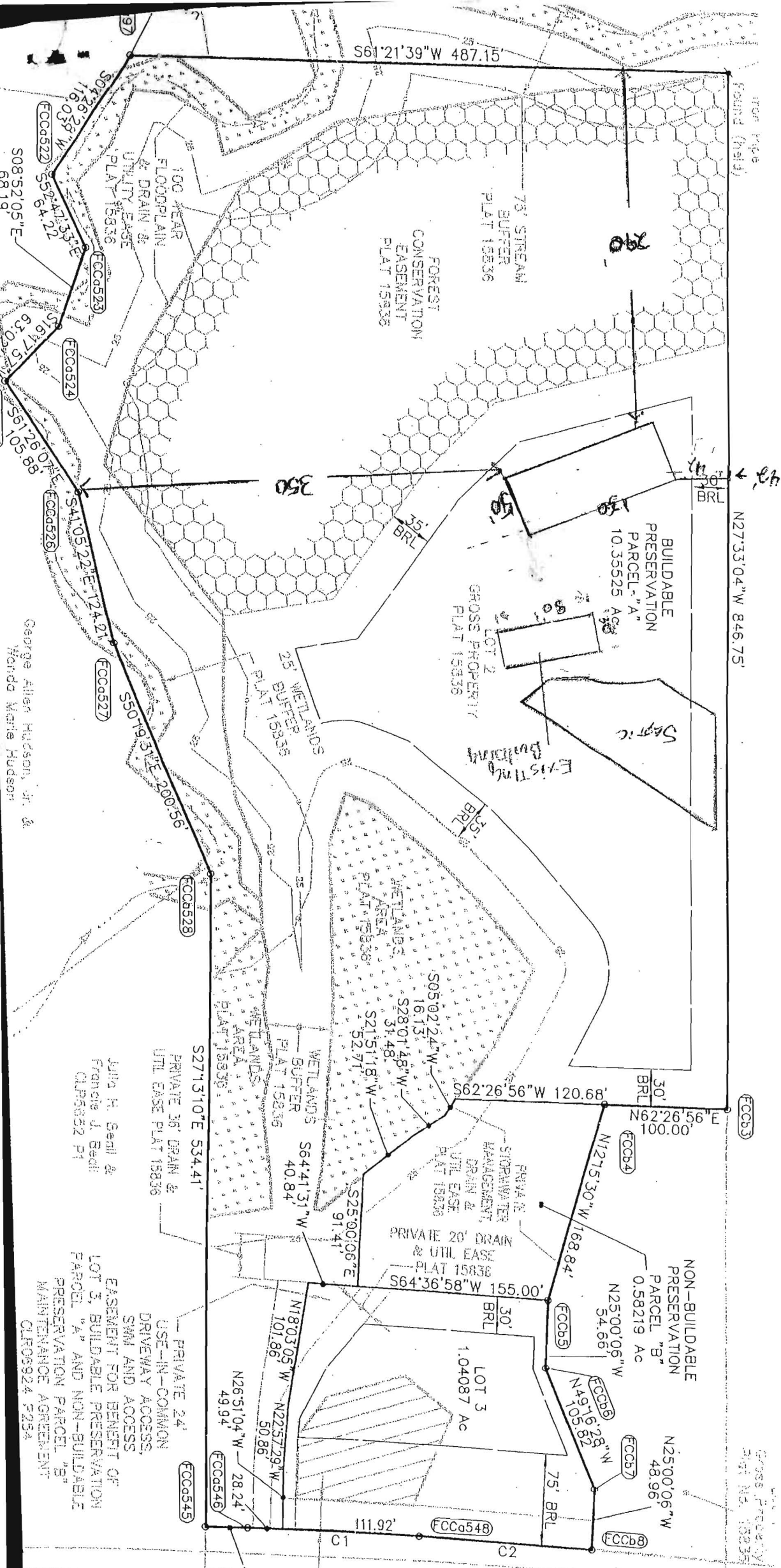
Sincerely,

Ashley Trump
Well and Septic Program
Development Coordination Section

Enclosures
CC: File

1" = 100 feet

SCALE



FORSYTHE ROAD
MINOR COLLECTOR

Howard County
CLR07680
Long Distance
County Map

PRIVATE 24' USE-IN-COMMON
DRIVEWAY ACCESS
EASEMENT FOR BENEFIT OF
LOTS 1 & 3
CLR06924 P25

George Allen Hudson, Jr. &
Wanda Marie Hudson

Gross Property
Map No. 15835

COMPLETE THIS FORM WHEN DROPPING OFF ANY CORRESPONDENCE AND/OR PLANS TO THE HOWARD COUNTY DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS COUNTER:

Date: 8/13/07
To: George Martin
(Person's Name and Division)
From: Jennie Ricker 443.250.1789
(Your Name, Company Name and Telephone Number)
Subject: Project name Pole Barn
Project site address 13920 Forsythe Rd Sykesville
Building permit # 07000620 SDP #
Other information pertinent to this project

RECEIVED

AUG 13 2007

PLAN REVIEW DIVISION

✓ Please check the attachments below that you are submitting with this transmittal:

- Letter of response to Howard County plan review code letter
- ✓ Revised plans and/or revised details: When submitting for a complete re-review, duplicate sets shall be submitted.
- Structural steel certification
- Energy conservation calculations
- Certification for (be specific).
- ✓ Copies of site plan (be specific).
- Two sets of single family dwelling model plans to be placed on permanent file: Model name and/or #
- Other

CC: ZONING
health
product

Is there anyone else that should be contacted regarding this project if there are questions?

If so, please list that person's name and telephone number below:

(Person's name) (Telephone number)

PLEASE ASSURE ALL DOCUMENTS AND/OR REVISIONS ARE APPROPRIATELY SIGNED AND SEALED, IF NECESSARY, BY A LICENSED ARCHITECT OR ENGINEER. PLEASE BE ADVISED THAT INSUFFICIENT INFORMATION MAY RESULT IN THE DELAY OF REVIEW BY THE PLANS EXAMINER. THE DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS WILL CONTACT YOU IF THERE IS A PROBLEM. IN ADDITION, ONCE THE BUILDING PERMIT IS APPROVED BY THE PLAN REVIEW DIVISION AND ALL OTHER REQUIRED SIGNATORY AGENCIES, AND THE BUILDING PERMIT IS READY FOR ISSUANCE, THE PERMIT DIVISION WILL NOTIFY THE APPROPRIATE CONTACT PERSON FOR PERMIT PICK UP. ALL PERMIT STATUS INQUIRIES SHALL BE DIRECTED TO THE PERMIT DIVISION AT 410-313-2455. CODE RELATED QUESTIONS AND PLAN REVIEW INQUIRIES SHALL BE DIRECTED TO THE PLAN REVIEW DIVISION AT 410-313-2436. PLEASE ALLOW A MINIMUM OF FIVE (5) WORKING DAYS FOR ANY PLAN SUBMITTALS TO BE REVIEWED. THANK YOU.

Received by [Signature]

white: Plan Review Division
yellow: Applicant
pink: Permit Division