

# HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

B07004781

Building Address 14909 NE ...  
...

Suite/Apt. #: \_\_\_\_\_ SDP/WP/Petition #: \_\_\_\_\_

Census Tract \_\_\_\_\_ Subdivision \_\_\_\_\_

Section \_\_\_\_\_ Area \_\_\_\_\_ Lot 11

Tax Map \_\_\_\_\_ Parcel \_\_\_\_\_ Grid 11

Zoning \_\_\_\_\_ Map Coordinates \_\_\_\_\_ Lot size \_\_\_\_\_

Property Owner's Name ...

Address 14909 NE ...

City ... State MD Zip Code ...

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Applicant's Name & Mailing Address, (if other than stated hereon):  
Same as Contractor

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Existing Use ...

Proposed Use ...

Estimated Construction Cost \$ ...

Description of Work ...

Contractor Company ...

Contact Person ...

Address ...

City ... State MD Zip Code ...

License No. ...

Phone ... Fax ...

Occupant or Tenant ...

Contact Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Engineer or Architect Company \_\_\_\_\_

Contact Person N/A

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

**BUILDING DESCRIPTION - COMMERCIAL**

**BUILDING DESCRIPTION - RESIDENTIAL**

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

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

[Signature]  
Applicant's Signature

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

[Signature]  
Print Name

12-11-07  
Date

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 St.: _____	Add'l per. fee \$ _____
Health	<u>12/19/07</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 # <u>795</u>
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- White: Building Official			Lot Coverage for NewTown Zone _____	
Green: LDD, DPZ			SDP/Red-line approval date _____	Accepted by _____
Yellow: DED, DPZ				
Pink: Health				
Gold: SHA				

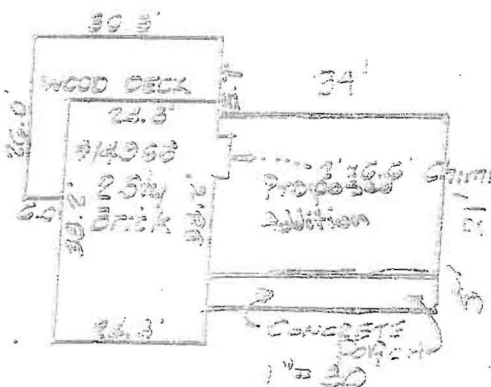
HOUSE LOCATION  
 14268 FREDERICK ROAD  
 LOT 11  
 JUSTIFIABLE  
 4TH. ELECTION DISTRICT  
 HOWARD COUNTY MD.

Passed Per. 45, May 1977

 Sewage Disposal Area

PROPOSED 500 GALLON  
 UNDERGROUND PROPOSED TANK  
 FINAL 5.4.81  
 RESERT: 4.20.83

LP tank locator  
 sk 12/19/87  
 Bo 700 4781  
 88



Howard County  
 Bolton, Md  
 307 90 3376

Percolation Certification Plan

Approved for private water and sewer supply 9/7/87

B. Wilbur Peter Beilenson  
 Howard County HEALTH OFFICER

SURVEYOR'S CERTIFICATE

I hereby certify that the position of all existing improvements on the above described property have been carefully established by a bench-top survey and that correct reference is made, there to be incorporated.

Robert H. Meyer #3116

CLARK • FINEFROCK & SACKETT

ENGINEERS • PLANNERS • SURVEYORS  
 11519 LOCKWOOD DRIVE SILVER SPRING, MD. 20904  
 TEL. NO 530-3400

REFERENCE	DRAWN BY MED	CHECKED BY PAS
FIG 3023	DATE 5.4.81	FILE NO.
	SCALE 1"=100'	7873-H

HOWARD COUNTY  
 PERMIT APPLICATION

PERMIT NUMBER

B0700 3346

Building Address <u>14968 FREDERICK RD</u> <u>Montrose MD 21797</u> Suite/Apt. #: _____ SDP/WP/Petition #: _____ Census Tract _____ Subdivision _____ Section _____ Area _____ Lot <u>11</u> Tax Map _____ Parcel _____ Grid _____ Zoning _____ Map Coordinates _____ Lot size <u>3.53 acres</u>	Property Owner's Name <u>HARRY R. HUBER JR</u> Address <u>14968 FREDERICK RD</u> City <u>Montrose</u> State <u>MD</u> Zip Code <u>21797</u> Home Phone <u>410 292 5750</u> Work Phone <u>301 925 4118</u> Applicant's Name & Mailing Address, (if other than stated hereon): <u>Scotsdale Contracting</u> Phone <u>410 292 3984</u> Fax _____
Existing Use <u>RESIDENTIAL (SFD)</u> Proposed Use _____ Estimated Construction Cost \$ <u>20,000.00</u> Description of Work <u>Add Entry Foyer, LEN AND SECOND BATHROOM 26' x 34'</u>	Contractor Company <u>Scotsdale Contracting</u> Contact Person <u>Tim Hesson - Tjhesson@zdelphi.net</u> Address <u>710 Scotsdale Rd</u> City <u>Westminster</u> State <u>MD</u> Zip Code <u>21157</u> License No. _____ Phone <u>410 292 3984</u> Fax _____ Engineer or Architect Company <u>N/A</u> Contact Person _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____
Occupant or Tenant <u>Owner</u> Contact Name _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____	City _____ State _____ Zip Code _____ Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

BUILDING CHARACTERISTICS		UTILITIES	
Height: _____	No. of stories: _____	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	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: 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"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads _____	SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 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 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	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 checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: Electric <input checked="" 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 \_\_\_\_\_

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

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

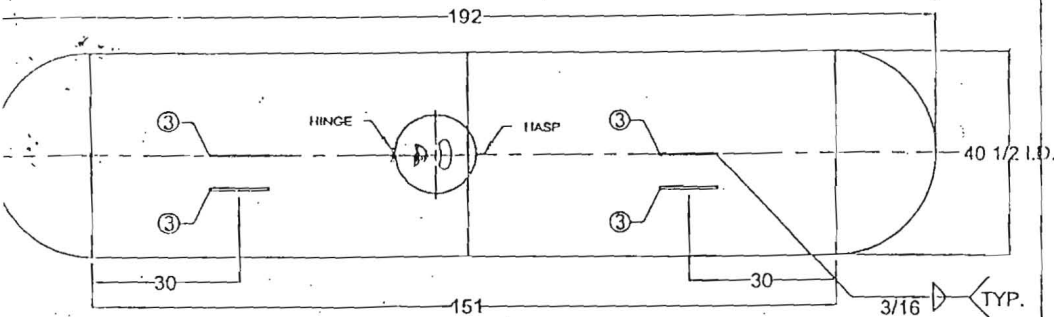
Date \_\_\_\_\_

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**  
 \*\* PLEASE WRITE NEATLY AND LEGIBLY. \*\*

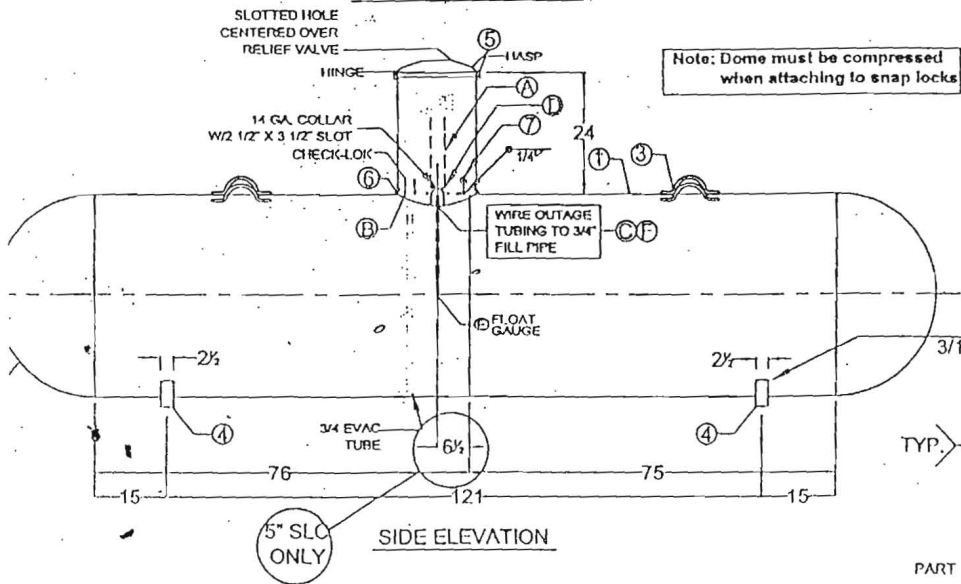
- FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL	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 St.: _____	Add'l per. fee \$ _____
Health <u>9/10/07</u>		<u>Bahia A. Jh</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 # <u>40401</u>
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 _____	
White: Building Official			SDP/Red-line approval date _____	Accepted by _____
Green: LDD, DPZ			Yellow: DED, DPZ	Pink: Health
T:\forms\PERMIT.FRM				Gold: SHA

THIS VESSEL IS DESIGNED FOR THE STORAGE  
OF LIQUEFIED PETROLEUM GAS ONLY

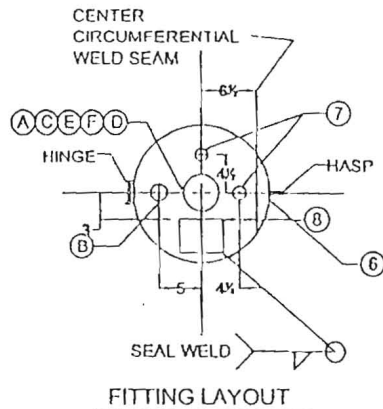
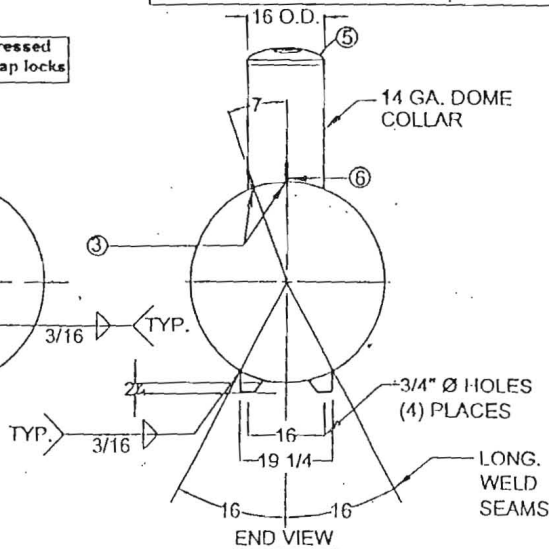


TOP VIEW (R - 1000MW)



SIDE ELEVATION

Note: Dome must be compressed  
when attaching to snap locks



FITTING LAYOUT

PART NO: 0110003X  
0110004X

QTY.	SIZE	TYPE	FITTINGS		SERVICE	MATERIAL	QTY.	DESCRIPTION	DWG. NO.
			REGO	SHERWOOD					
1	2 1/2	REGO. 10PPE FLG. 2 1/2" HEM. NICKEL 80 PIPE 1.04 X 3.5 W/ 1/2" DOME HT. LIF.	G8475RV	PV200SA	MULTIVALVE	1	2	SHELL - 0.238" X 75 3/4" X 127 5/16" - SA455 / SA414G	
1	2 1/2	REGO. 10PPE FLG. 2 1/2" HEM. NICKEL 80 PIPE 1.04 X 3.5 W/ 1/2" DOME HT. LIF.	G8475RV	PV200SA	MULTIVALVE	2	2	HEADS - 40 1/2" I.D. X 0.202" - HEM. SA414G	
1	3/4	3/4 FLG. W/ EVAC TUBE	7500U	PV5130	CHEK-LOK	3	4	LIFTING LUGS	D - 2
1	3/4	SCH. 40 PIPE (T.O.E.)			FILL PIPE ATTACHMENT	4	4	TANK LEGS, 1/4" X 2 1/2"	D - 2
1	2 1/2	XH SOCKET WELD FLG			RELIEF VALVE ATTACHMENT	5	1	DOME, 2 PIECE, HINGED	D - 5
1	1 1/4	4 - BOLT Style			FLYING GAUGE	0	2	SNAP-LOCK CLIPS	D-284D-30
1	1/8	GLASS TUBE			OUTAGE TUBE, 17 3/16" DIA 14 3/16" LR	7	2	ANODE ATTACHMENT (ROUND DISK W/ WIRE)	D - 7
						8	1	DATA PLATE, 1000 GAL., UG	

REV	BY:	DESCRIPTION	DATE:
15	CDH	CORRECTED OUTAGE TUBE LENGTH	7/24/00
16	WFO	CHANGED GROUND METHOD	4/12/01
17	CDH	CORRECTED QTY. OF ANODE ATTACH.	5/14/01
18	CDH	NEW NAMEPLATE & CHEK-LOK	10/19/01
19	CDH	REVISED LEGS & MOVED TO	10/22/01
20	CDH	REVISED FILL PIPE LENGTHS	12/19/01
21	CDH	CORRECTED MARK "1" TO TWO SHELLS	4/15/02
22	CDH	REVISED MOUNT PRESSURE TO 250 PSI	8/13/02
23	CDH	DELETED DOME LUGS, ADDED SNAP LOCKS	9/3/02
24	CDH	REPOSITIONED SNAP LOCK DETAIL	10/18/02
25	CDH	ADDED NOTE FOR LUG IN SIDE ELEVATION	3/11/03
26	CDH	ADDED FLOAT GAUGE DESCRIPTIONS	5/7/03
27	CDH	CORRECTED SHELL LENGTH	11/12/03
28	WFO	ADDED SA414G SHELL OPTION	9/17/04

HALL RD. SERIAL No. [ ]

**CERTIFIED BY: AMERICAN WELDING & TANK**  
HARSCO CORPORATION GAS & FLUID CONTROL GROUP

JESUP, GEORGIA-BLOOMFIELD, IOWA, SALT LAKE CITY, UTAH-FREMONT, OHIO

MAX. ALLOW. WORKING PRESS [ 250 ] PSI AT [ 400 ] °F  
MOUNT [ 20 ] °F AT [ 250 ] PSI PLANT NO. [ ]

U  
SERIAL NO. [ Y ] YEAR BUILT [ 20 ]  
LENGTH [ 192 ] IN. OUTSIDE DIA [ 41 ] IN.  
HEAD THK. [ .202 ] IN. SHELL THK [ .230 ] IN.  
UNDER GROUND TYPE [ AWT-UG ] SURFACE AREA [ 172 ] SQ. FT.  
LISTED CONTAINER ASSEMBLY FOR LP GAS 695A HEAD D.R. [ HEMI ] WATER CAPACITY [ 1000 ] GAL. S.

THIS CONTAINER SHALL NOT CONTAIN A PRODUCT HAVING A VAPOR PRESSURE IN EXCESS OF 215 PSIA AT 100 °F.  
DIP TUBE LENGTH-89% FULL @ 50 DEG. F. D.T. = 8.0 IN.

DATA PLATE DETAIL

GENERAL NOTES:

- LIFTING LUGS DESIGNED FOR TOTAL LIFTING WEIGHT OF 2700#
- TOTAL EMPTY WEIGHT IS 179#
- ALL DIMENSIONS ARE IN INCHES UNLESS OTHERWISE SPECIFIED.
- COMPLETE TANK DRIED TO REMOVE ALL MOISTURE.
- NOTE DELETED.
- EXTERIOR OF TANK TO BE GRIT BLASTED.
- PAINT PER SHOP ORDER.
- VACUUM PURGE TANK.
- DIMENSIONS ARE SUBJECT TO CHANGE WITH OUT NOTICE. (NON-PRESSURE RETAINING COMPONENTS ONLY)
- THREADS OF ALL FITTINGS TO BE COATED WITH COMPOUND SUITABLE FOR USE WITH LP GAS.
- FLOAT GAUGE TO BE INSTALLED WITH FLOAT ARM 45° OFF LONGITUDINAL CENTERLINE OF TANK.
- DOUBLE LIFTING LUGS ON LONG RISER TANKS ONLY

GENERAL SPECIFICATIONS

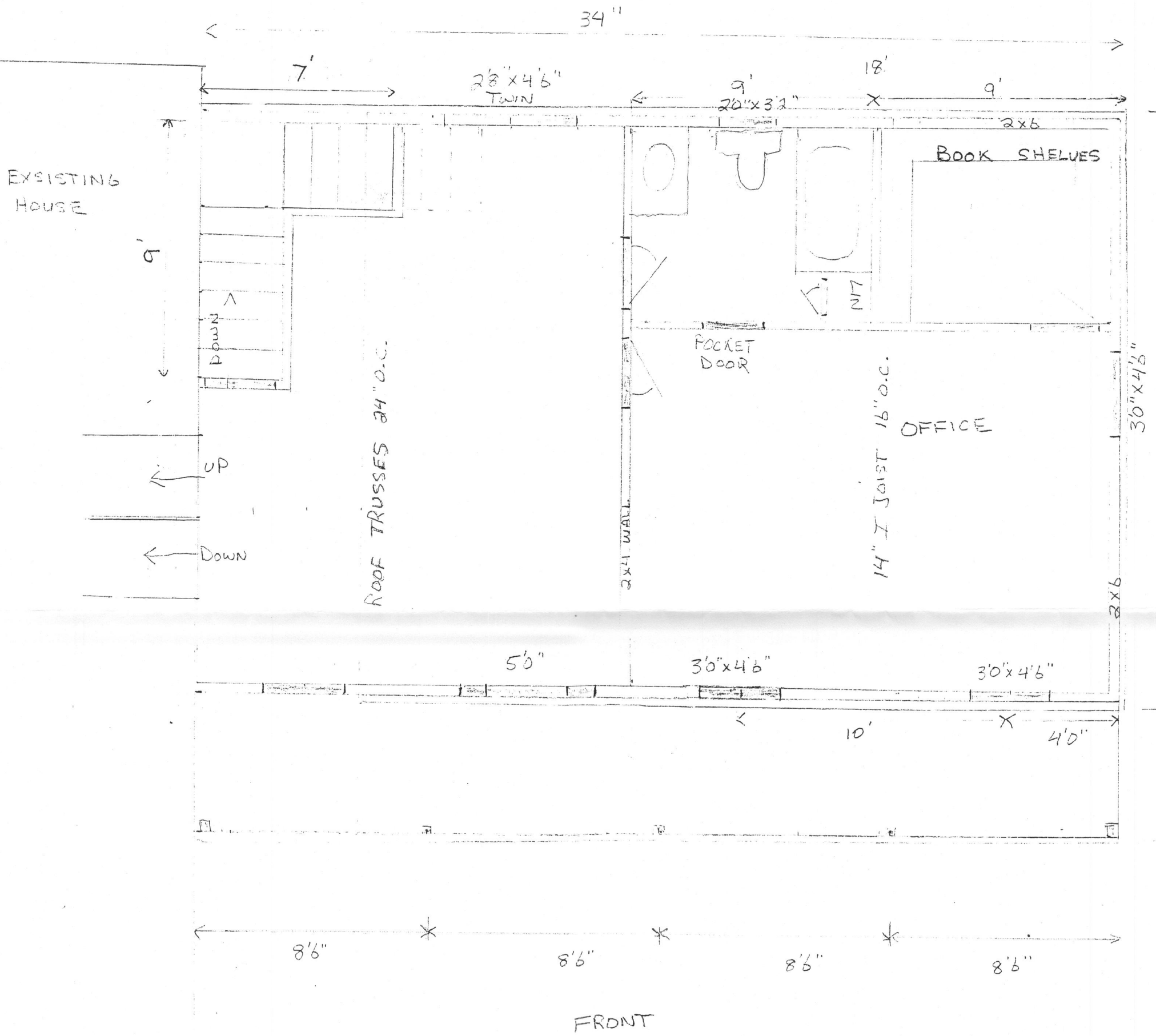
WATER CAPACITY (GALLONS)	1000
ALLOWABLE WORKING PRESSURE (PSIG)	250
JOINT EFFICIENCY:	
ASME UW-51 LONG SEAM	100 %
ASME UW-52 HEAD TO SHELL	80 %
HYDROSTATIC TEST PRESSURE (PSIG)	325
SURFACE AREA (SQ. FT.)	172
RELIEF VALVE SETTING (PSIG)	250
RELIEF DISCHARGE RATE - (CFM @ 100° F.)	1096
CODE:	ASME SECTION VIII DIV. I
STANDARDS:	UNDERWRITERS LABORATORIES INC. MII-5127
	N.F.P.A. 58 LP GAS CODE
MATERIAL SPECS:	
	COUPLINGS SA-105
	TANK FLANGES SA-105
	ADAPTOR SA-105
	PIPE SA-353 OR SA-105B

1000 W.G. UNDERGROUND  
PROPANE TANK-TYPE-AWT-UG

DATE:	01/03/00	DESIGNED BY:	RAC	CHECKED BY:	CDH	DATE:	01/03/00	DESIGNED BY:	RAC	CHECKED BY:	CDH	DATE:	01/03/00
-------	----------	--------------	-----	-------------	-----	-------	----------	--------------	-----	-------------	-----	-------	----------

HARRY HUBER ADDITION  
 14968 FREDERICK ROAD  
 FLOOR PLAN  
 SCALE 1/4" PER FOOT

PAGE 2



- 14" I JOIST 16" O.C.
- 2x6 EXTERIOR W
- 2x4 INTERIOR W
- 2x4 TRUSSES 24"
- 7/16" PLYWOOD SHEATHING W + ROOF
- 3/4" ADVANTEC - SUBFLOOR