



Building Permit Application

Howard County Maryland
Department of Inspections, Licenses and Permits
3430 Court House Drive
Permits: 410-313-2455
www.howardcountymd.gov

Date Received: 3/23/16

Permit No.: B/600/210

Building Address: 4243 Buckskin Lake Dr
City: Elliot City State: MD Zip Code: 21042
Suite/Apt. #: _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: Buckskin Woods
Section: _____ Area: _____ Lot: 30
Tax Map: 22 Parcel: 535 Grid: 22
Zoning: _____ Map Coordinates: _____ Lot Size: 3.05

Existing Use: SFD
Proposed Use: SFD w/ propane tank
Estimated Construction Cost: \$ 8000

Description of Work:
install 1000 gal in-ground propane tank

Occupant or Tenant: _____

Was tenant space previously occupied? ☐ Yes ☐ No

Contact Name: _____

Address: OWN

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

Commercial Building Characteristics	Residential Building Characteristics
Height:	<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse
No. of stories:	Depth Width
Gross area, sq. ft./floor:	1 st floor:
	2 nd floor:
Area of construction (sq. ft.):	Basement:
	<input type="checkbox"/> Finished Basement
Use group:	<input type="checkbox"/> Unfinished Basement
	<input type="checkbox"/> Crawl Space
Construction type:	<input type="checkbox"/> Slab on Grade
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:
<input type="checkbox"/> Structural Steel	Multi-family Dwelling
<input type="checkbox"/> Masonry	No. of efficiency units:
<input type="checkbox"/> Wood Frame	No. of 1 BR units:
<input type="checkbox"/> State Certified Modular	No. of 2 BR units:
	No. of 3 BR units:
	Other Structure:
	Dimensions:
> Roadside Tree Project Permit	Footings:
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Roof:
Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular
	<input type="checkbox"/> Manufactured Home

Property Owner's Name: Craig Steinberg
Address: 4243 Buckskin Lake Dr
City: Elliot City State: MD Zip Code: 21042
Phone: 410-535-6207 Fax: _____
Email: _____

Applicant's Name & Mailing Address (If other than stated herein)
Applicant's Name: Jeremy Clancy
Address: PO Box 310
City: Perry Hall State: MD Zip Code: 21128
Phone: 410-340-1229 Fax: _____
Email: Jeremy@AppliedAndApproved.com

Contractor Company: Texas Oil
Contact Person: C. Newn Haines
Address: 1618 N. Main St
City: Hampstead State: MD Zip Code: 21074
License No.: 468
Phone: 410-239-9515 Fax: _____
Email: _____

Engineer/Architect Company: _____

Responsible Design Prof.: _____

Address: Contractor

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

Utilities
Water Supply
<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Private
Sewage Disposal
<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Private
Electric: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Gas: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Heating System
<input type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
Other:
Sprinkler System:
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Grading Permit Number:
Building Shell Permit Number:

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: Jeremy Clancy
Email Address: Jeremy@AppliedAndApproved.com

Print Name: Jeremy Clancy
Date: 3/22/16

RECEIVED

MAR 23 2016

Title/Company: Permits

LICENSES & PERMITS DIVISION 12:43 PM

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

PLEASE WRITE NEATLY & LEGIBLY

-FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	<u>4/12/2016</u>	<u>Paul</u>

Is Sediment Control approval required for issuance? ☐ Yes ☐ No
☐ CONTINGENCY CONSTRUCTION START

DPZ SETBACK INFORMATION
Front:
Rear:
Side:
Side St.:
All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No
Lot Coverage for New Town Zone:
SDP/Red-line approval date:

Filing Fee	\$
Permit Fee	\$ 100.00
Tech Fee	\$ 10.00
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$ 110.00
Sub-Total Paid	\$
Balance Due	\$
Check	# 5111

Distribution of Copies: White: Building Officials

Green: PSZA, Zoning

Yellow: PSZA, Engineering

Pink: Health

Gold: SHA

Operations\Updated Forms\Building applmp 8.2012.docx

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

Date: 4/6/16

To: Robert Freeman (HEALTH)
(Person's Name and Division)

From: Jeremy Clancy (443) 340-1229
(Your Name, Company Name and Telephone Number)

Subject: Project name Buckskin Lake Proper Tank
Project site address 4243 Buckskin Lake Dr
Permit # B1600210 SDP # _____
Other information pertinent to this project _____

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

- ☒ Letter of response to address plan review comment letter
- _____ Revised plans and/or revised details: When submitting for a complete re-review, **duplicate sets shall be submitted.**
- _____ Letter Summarizing Changes
- _____ Energy conservation calculations
- ☒ Copies of Revised Plan (be specific).
- _____ ☒ Health Department Request _____ DPZ/ DED Request _____ Applicant's Request
- _____ Two sets of single family dwelling model plans to be placed on permanent file: Model name and/or # _____
- _____ Other _____

Contact Person Information: (Required)

Jeremy Clancy
Please Print Name

Telephone No: 443-340-1229

E-Mail Address: Jeremy@appliedandapproved.com

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

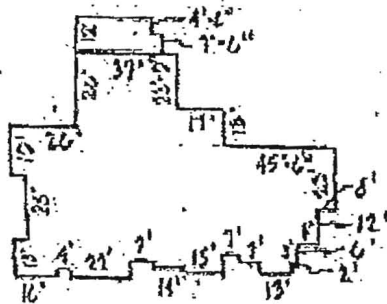
L. Hurman

White-Plan Review / Yellow-Applicant / Pink-Permit Division
t:\forms\transmit.frm - Rev. 04/2014

APR 07 2016

**LICENSES & PERMITS
DIVISION**

Approved BP
B16001210
Rmt IV



HOUSE:

FT = 552.00 ✓

BSMT = 544.00 ✓

INV. OUT = 541.30 ✓ @ BSMT

SEPTIC TANK:

EX. GR. = 548.50 ✓

FIN. GR. = 548.50 ✓

INV. IN = 548.45 ✓ MANHOLE

INV. OUT = 540.35 ✓ REQUIRED

DISTRIBUTION BOX:

EX. GR. = 544.50 ✓

FIN. GR. = 546.50 ✓

INV. IN = 539.60 ✓ 100' DEEP

WELL:

EX. GR. = 548.70

FIN. GR. = 548.70

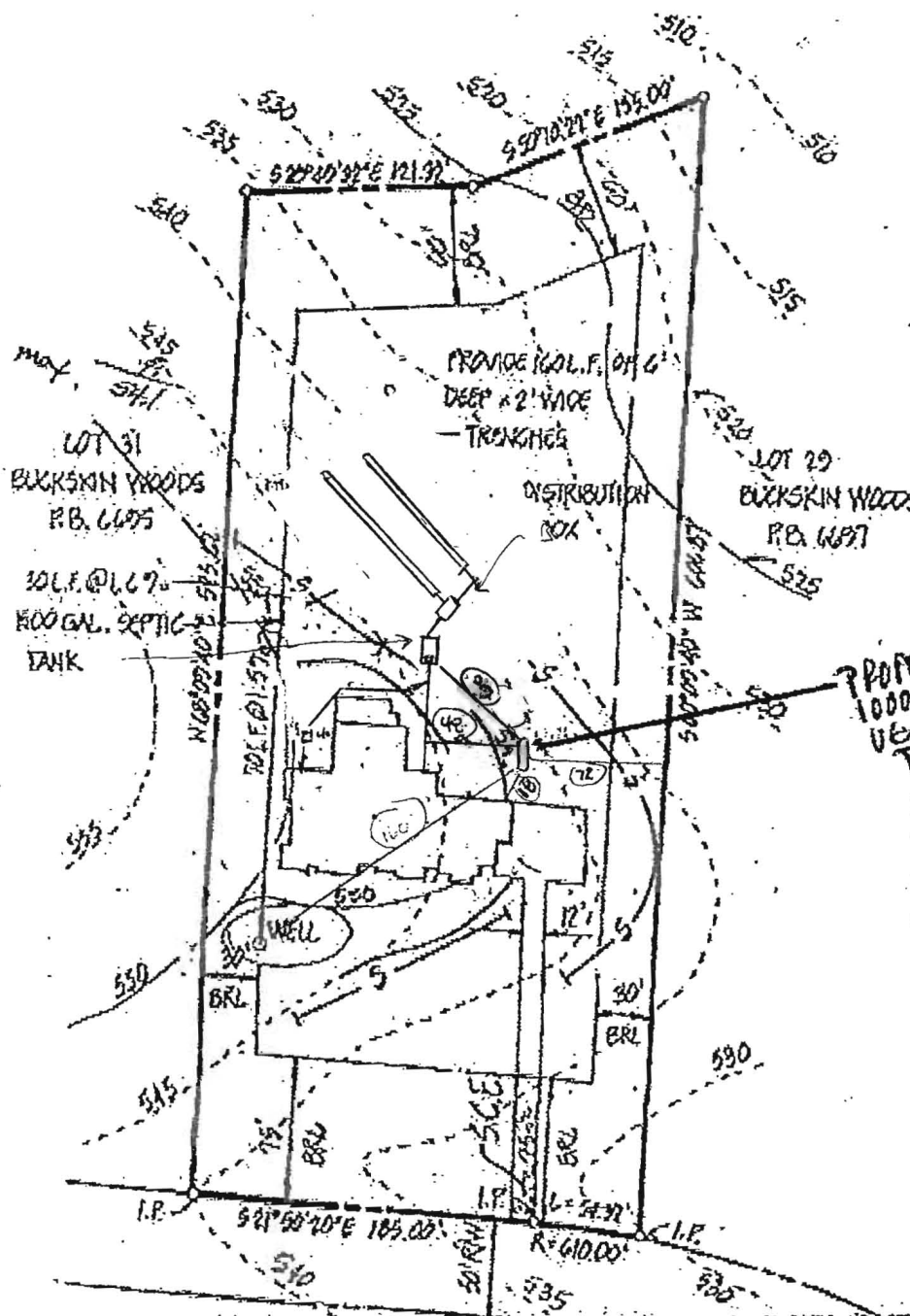
TRENCH EXISTING ~ 544.5

(TRENCH INLET TO
BE 4' below existing
grade)

PROPOSED
1000 GAL
UG PROPANE
TANKS:

1. TAX MAP: 22; PARCEL: 526
2. PLAT REFERENCE: PLAT 6696
3. HOUSE TO HAVE 6 BEDROOMS
4. CONTRACTOR TO SET GRADES IN FIELD.
5. TOPOGRAPHY SHOWN HEREON IS BASED ON HOWARD COUNTY 1"=200' AERIAL PHOTOGRAMMETRICS.

156/101
4'-9" - 14'31"
3'-9" - 14'30"



BUCKSKIN LAKE DRIVE
50' R/W

PLAT REFERENCE: "BUCKSKIN WOODS - SECT. 1 - LOTS 1-31 - A RESUBDIVISION OF
BUCKSKIN FARM 15 - LOTS 1, 5 AND 8" PLATS 6692-6698

TITLE: GRADING STUDY.				
PROJECT: BUCKSKIN WOODS - SECTION 1 - LOT 30				
LOCATION: 5TH ELECTION DISTRICT TAX MAP: 22 HOWARD CO., MD.				
SCALE: 1"=100'	DESIGNED BY: JA.	DRAWN BY: DR	CHECKED BY: LB	DATE: JUNE, 1987
FIELD BOOK: —	PAGE NO.: —	JOB NO.: B1123	DRAWING NO.: 1 OF 1	

boender associates
inc.
consulting engineers
land surveyors
land planners

COURTHOUSE SQUARE
3565 ELLICOTT MILLS DRIVE
ELLICOTT CITY, MD. 21043
(301) 465-7777