



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: 01LP 2017 AUG 16 PM 3:06

Permit No.: _____

Building Address: 6959 Westcott Place
City: Clarksville State: MD Zip Code: 21029
Suite/Apt. #: _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: _____
Section: _____ Area: _____ Lot: 14
Tax Map: 0041 Parcel: 0458 Grid: 0001
Zoning: _____ Map Coordinates: _____ Lot Size: 2150SF

Existing Use: Residential
Proposed Use: 20x20 Sunroom Addition
Estimated Construction Cost: \$ 123,500.00
Description of Work: Sunroom Conservatory Addition 20 X 20

Occupant/Tenant Name: Gregory Pearce
Was tenant space previously occupied? ☐ Yes ☐ No
Contact Name: Gregory Pearce
Address: 6959 Westcott Place
City: Clarksville State: MD Zip Code: 21029
Phone: 301-704-6555 Fax: _____
Email: gregp1092@yahoo.com

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

☐ Roadside Tree Project Permit
☐ Yes ☒ No
 Roadside Tree Project Permit # _____

Property Owner's Name: Gregory Pearce
Address: 6959 Westcott Place
City: Clarksville State: MD Zip Code: 21029
Phone: 301-704-6555 Fax: _____
Email: gregp1092@yahoo.com

Applicant's Name & Mailing Address, (If other than stated herein)
Applicant's Name: Jennifer Snow
Address: 11 Newburg Ave. S.W. 100
City: Clarksville State: MD Zip Code: 21029
Phone: 410-746-3441 Fax: 410-746-6330
Email: jsnow@walltowall.net

Contractor Company: Wall Towall
Contact Person: Jennifer Snow
Address: 11 Newburg Ave. S.W. 100
City: Clarksville State: MD Zip Code: 21029
License No.: 123700
Phone: 410-746-3441 Fax: 410-746-6330
Email: jsnow@walltowall.net

Engineer/Architect Company: GBL Custom Home
Responsible Design Prof.: Greg Little
Address: PO Box 237
City: Finksburg State: MD Zip Code: 21048
Phone: 410-832-8321 Fax: _____
Email: gblplans@gbis.net

Utilities
Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
Water Supply
<input type="checkbox"/> Public
<input type="checkbox"/> Private
Sewage Disposal
<input type="checkbox"/> Public
<input type="checkbox"/> Private
Heating System
<input checked="" type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Other: _____
Sprinkler System:
<input type="checkbox"/> Yes <input 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: Jennifer Snow Print Name: Jennifer Snow
Email Address: jsnow@walltowall.net Date: 8/16/17
Title/Company: GBL Wall Towall Const. LLC

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		

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

DP2 SETBACK INFORMATION

Front: _____

Rear: _____

Side: _____

Side St.: _____

All minimum setbacks met? ☐ Yes ☐ No

Is Entrance Permit Required? ☐ Yes ☐ No

Historic District? ☐ Yes ☐ No

Lot Coverage for New Town Zone: _____

SDP/Red-line approval date: _____

Filing Fee	\$ <u>25.00</u>
Permit Fee	\$ _____
Tech Fee	\$ _____
Excise Tax	\$ _____
PSFS	\$ _____
Guaranty Fund	\$ _____
Add'l per Fee	\$ _____
Total Fees	\$ _____
Sub- Total Paid	\$ _____
Balance Due	\$ _____
Check	# _____

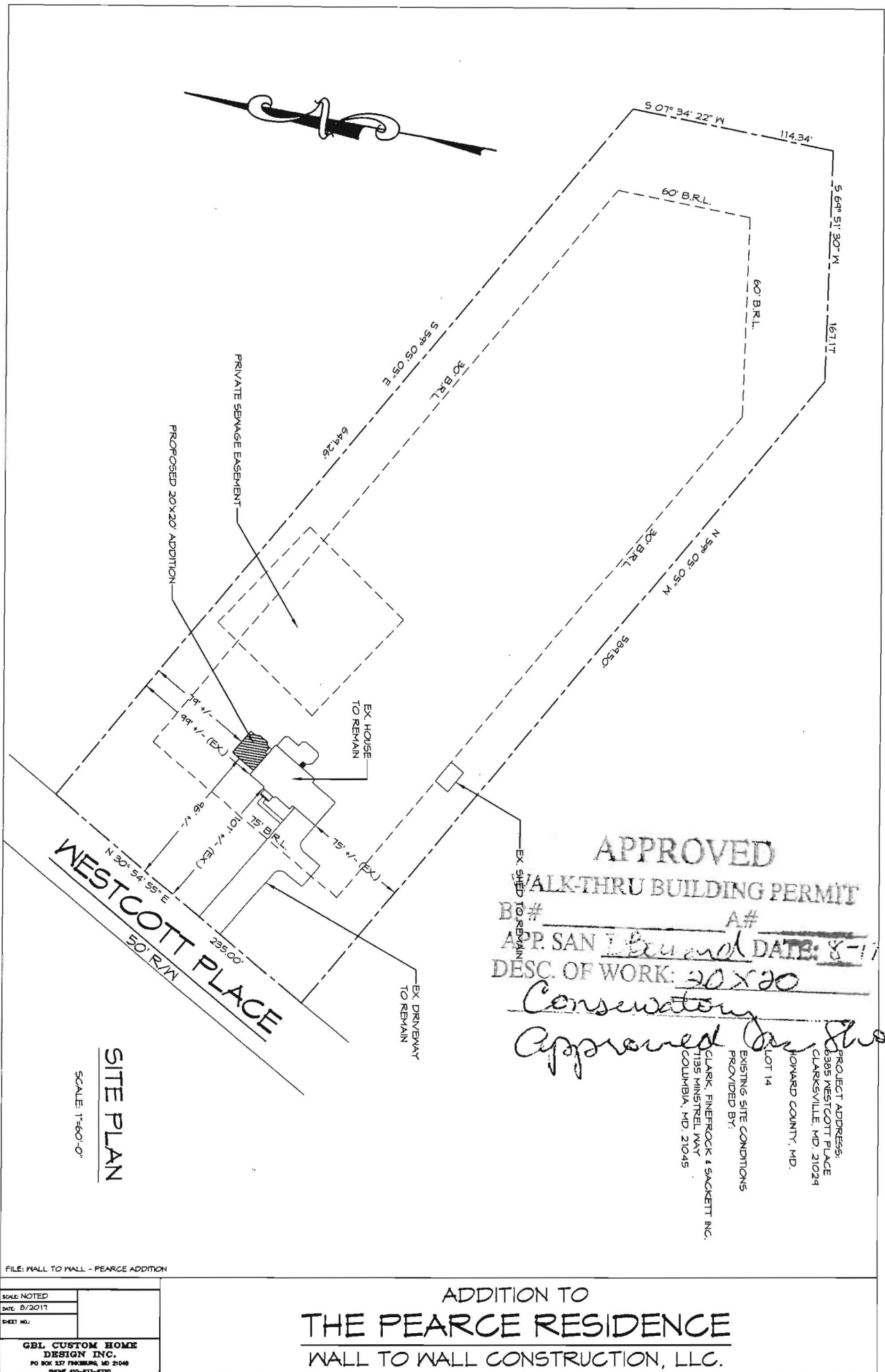
Distribution of Copies: White: Building Officials

Green: PSZA, Zoning

Yellow: PSZA, Engineering

Pink: Health

Gold: SHA



APPROVED
 WALK-THRU BUILDING PERMIT
 B.# _____ A.# _____
 APP. SAN Lee and DATE: 8-17-17
 DESC. OF WORK: 20X20
Conservatory
Approved as shown

PROJECT ADDRESS:
 2385 WESTCOTT PLACE
 CLARKSVILLE, MD. 21024
 HOWARD COUNTY, MD.
 LOT 14
 EXISTING SITE CONDITIONS
 PROVIDED BY:
 CLARK, FINEROCK & SACKETT INC.
 7135 MINISTREL WAY
 COLUMBIA, MD. 21045

FILE: WALL TO WALL - PEARCE ADDITION
 SCALE NOTED
 DATE: 8/2017
 SHEET NO.:
 GBL CUSTOM HOME
 DESIGN INC.
 PO BOX 327 FARMERSBURG, MD 21040
 PHONE 410-833-8330

ADDITION TO
THE PEARCE RESIDENCE
 WALL TO WALL CONSTRUCTION, LLC.

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

461-9933

05-409977

INDEXED

P 46533

A 40721

DISTRICT 5th

DATE 10/26/90

DATE SYSTEM APPROVED 10/30/90

INSPECTOR BGF

Frall Septic Service

IS PERMITTED TO INSTALL ☒ ALTER ☐

ADDRESS P.O. Box 659, Mt. Airy, Maryland 21771 PHONE 795-5674

SUBDIVISION Ashleigh Greene LOT 14, Sec. 1 ROAD 6989 Westcott Place

PROPERTY OWNER Winchester Homes

ADDRESS BUILDING PERMIT SIGNED

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 180

AND RETURNED

3/4/04 BOD 146457-DECK

TRENCHES - Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 7 feet below original grade. Effective area begins at 3 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Place the distribution box 160 feet down the left lot line and 100 feet off the same lot line as seen when facing the lot from Westcott Place. Run trenches on contour toward the right lot line. MAINTAIN A MINIMUM OF 100 FEET FROM ALL WELLS.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

OK/CW J.G.

PLANS APPROVED BY Jane Nadeau

DATE 5/23/89

COVER NO WORK UNTIL INSPECTED AND APPROVED

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS, 90° ELBOWS NOT ACCEPTABLE.

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

PERMIT VOID AFTER TWO YEARS

NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON. CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

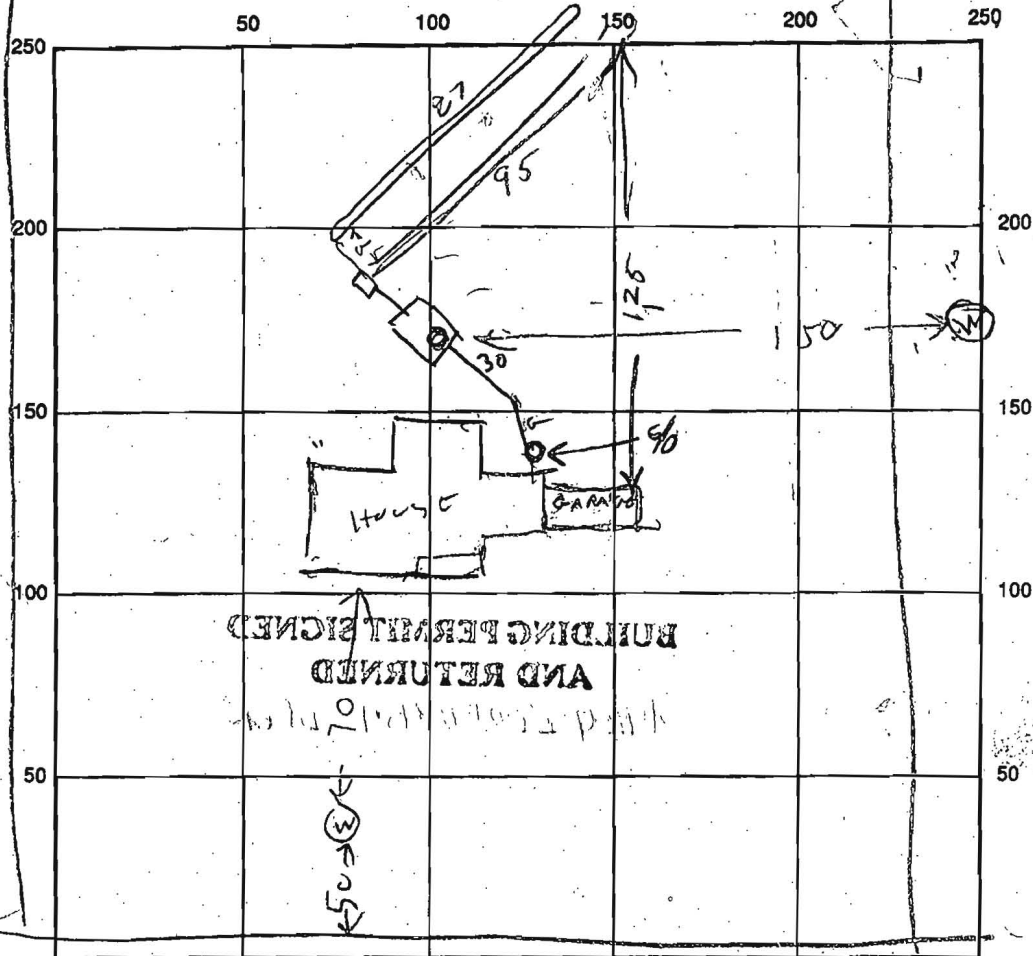
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

HD-260(6-90)

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

40721



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1250

CLEANOUTS OK

DISTRIBUTION BOX LEVEL 112

DRAIN FIELD/TITLE DEPTH 7 1/2 FT.

TRENCH WIDTH 2 1/2 FT.

INLET DEPTH 3 1/2 FT.

EFFECTIVE GRAVEL DEPTH 4 4 FT.

TOTAL LENGTH 95 27 FT. 102

NUMBER OF TRENCHES 2

ONE SIDEWALL/BOTTOM AREA 28 SQ. FT.

DRYWALL INSIDE DIAMETER FT.

EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA SQ. FT.

REMARKS: 10/29/90 - LOCATION OK PER PLAN TRENCH #1 DUG

ADD STONE TO TRENCH #1 & DIG TRENCH #2 R.H.

10/30/90 TRENCH #1 FINISHED OK. TRENCH #2 DUG

ADD STONE TO TRENCH #2 10/30/90 STONE ADDED TO TRENCH #2.

DATE SYSTEM APPROVED 10/30/90

INSPECTOR Raymond Hodges