



# 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: \_\_\_\_\_

Permit No.: \_\_\_\_\_

Building Address: 13551 Triadelphia Mill Rd  
City: CLARKSVILLE State: MD Zip Code: 21029  
Suite/Apt. #: \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
Census Tract: \_\_\_\_\_ Subdivision: \_\_\_\_\_  
Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: \_\_\_\_\_  
Tax Map: 0028 Parcel: 0064 Grid: 0020  
Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: 2.4000 AC

Existing Use: Single Family Dwelling  
Proposed Use: Single Family Dwelling  
Estimated Construction Cost: \$ 5,000  
Description of Work: To MAKE SCREEN-IN ROOM  
size (24x16') Above existing SUNROOM  
that has Flat Roof which on side  
Occupant/Tenant Name: A HOUSE  
Was tenant space previously occupied? ☐ Yes ☐ No  
Contact Name: total 384 sq. feet  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

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 <sup>st</sup> floor:
Area of construction (sq. ft.):	2 <sup>nd</sup> 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	<u>Multi-family Dwelling</u>
<input checked="" type="checkbox"/> Roadside Tree Project Permit	No. of efficiency units:
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	No. of 1 BR units:
Roadside Tree Project Permit #	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

Property Owner's Name: DANIEL T. AND SHARITA RICHMOND  
Address: 13551 Triadelphia Mill Rd.  
City: CLARKSVILLE State: MD Zip Code: 21029  
Phone: 617-529-9687 Fax: \_\_\_\_\_  
Email: DRICKA39@GMAIL.COM

Applicant's Name & Mailing Address (If other than stated herein)  
Applicant's Name: Vicky Meyer  
Address: 1602 Pinnacle Rd.  
City: TOWSON State: MD Zip Code: 21286  
Phone: 410-296-6400 Fax: \_\_\_\_\_  
Email: mdbidgpermits@comcast.net

Contractor Company: RYLEA HOMES  
Contact Person: JIM RYAN  
Address: PO BOX 68  
City: GLENWOOD State: MD Zip Code: 21738  
License No.: \_\_\_\_\_  
Phone: 410-489-6030 Fax: \_\_\_\_\_  
Email: RYLEAHOMES@MSN.COM

Engineer/Architect Company: \_\_\_\_\_  
Responsible Design Prof.: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

Utilities
Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
Gas: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Water Supply
<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Private
Sewage Disposal
<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Private
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 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

Print Name

Email Address

Date

Title/Company

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	10/12/17	H. Oswald

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	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$
Check	#

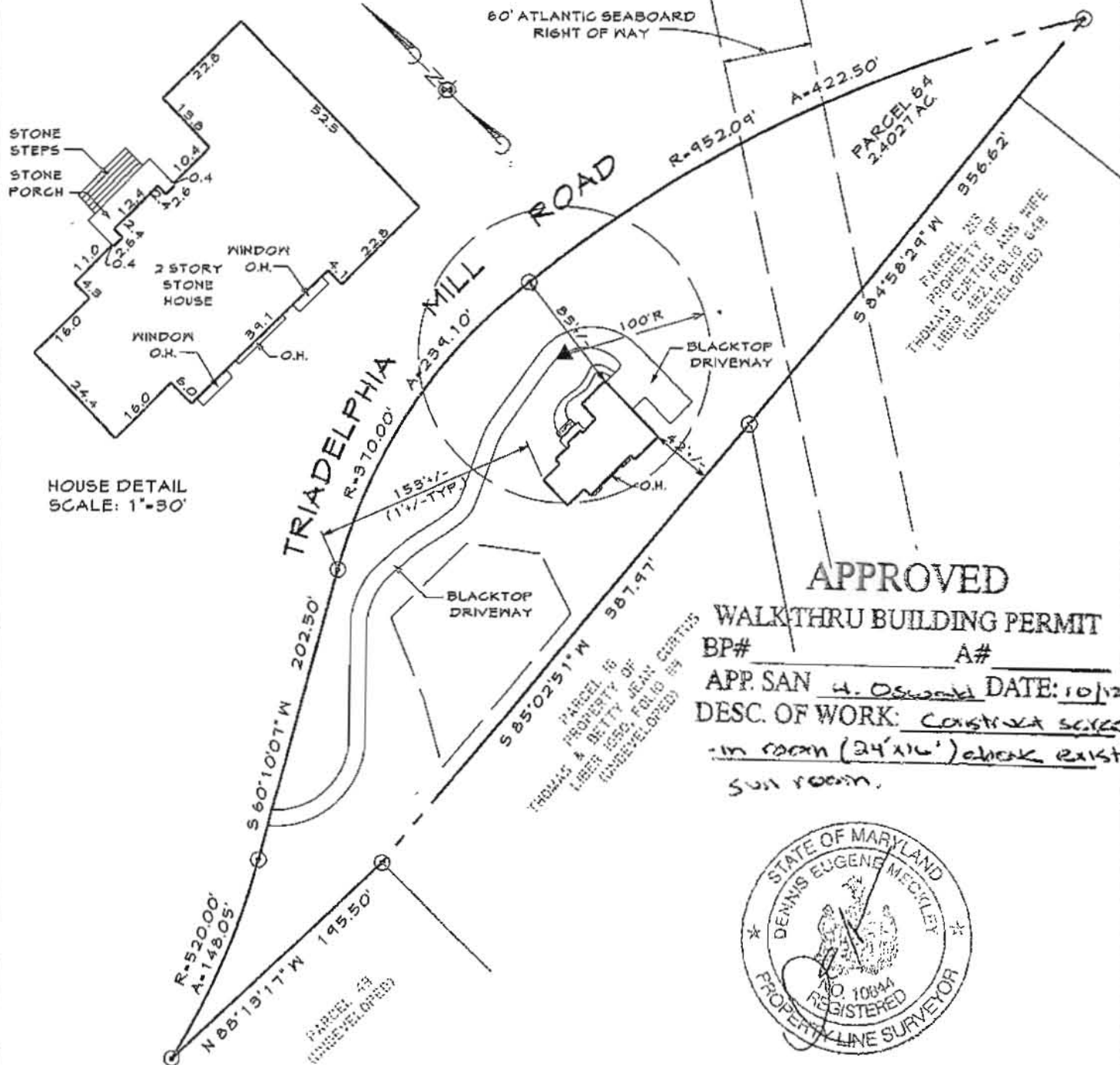
Distribution of Copies: White: Building Officials

Green: PSZA, Zoning

Yellow: PSZA, Engineering

Pink: Health

Gold: SHA



I hereby certify that I have surveyed the property shown hereon for the sole purpose of locating the improvements. This plan is a benefit to the customer only in so far as it is required by a lender or a title insurance company or its agent in connection with contemplated transfer, financing or refinancing. It is not to be relied upon for the establishment of boundary, easement of right-of-way lines for any reason, such as the location of fences, garages, buildings, or other existing or future improvements. Offsets of buildings to property lines are to the nearest foot (1') unless otherwise noted.

By: Dennis E. Meckley Date: 3/18/11  
Dennis E. Meckley Property Line Surveyor No. 10844

A licensed Maryland Surveyor either personally prepared this Location Drawing, or was in responsible charge over its preparation and the surveying work reflected in it, in compliance with the Maryland Minimum Standards of Practice for Land Surveyors.

UPDATE 03-17-11  
LOCATION DRAWING  
FOR

**13551 TRIADELPHIA MILL ROAD**

5th ELECTION DISTRICT HOWARD COUNTY, MD.  
DEED REF.: 8683/074.



439 East Main Street Westminster, MD 21157-5539  
(410) 548-1790 FAX (410) 548-1791

DRAWN BY:	CDD/KMB
DESIGN BY:	
REVIEW BY:	DEM
DATE:	11-13-07
SCALE:	1"=100'
JOB NO:	2004156
SHEET:	1 OF 1

24x16' Screen-IN RM.

LAYOUT 3/24/08 INSP 4 \_\_\_\_\_  
INSP 2 3/26/08 INSP 5 \_\_\_\_\_  
INSP 3 3/31/08 INSP 6 \_\_\_\_\_

ISSUE DATE: \_\_\_\_\_

APPROVAL DATE: 4/2/08

## PERMIT

P 528435

A 520329

TAX ID # 05369118

**ON-SITE SEWAGE DISPOSAL SYSTEM  
HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH**

Rylea Homes Inc \_\_\_\_\_ IS PERMITTED TO INSTALL ☒ ALTER ☐

ADDRESS: P.O. Box 68, Glenwood MD 21738 PHONE NUMBER: \_\_\_\_\_

SUBDIVISION: \_\_\_\_\_ LOT NUMBER: \_\_\_\_\_

ADDRESS: 13551 Triadelphia Mill RA PROPERTY OWNER: Rylea Homes

SEPTIC TANK CAPACITY (GALLONS): 2000 OUTLET BAFFLE FILTER REQUIRED ☐

PUMP CHAMBER CAPACITY (GALLONS): \_\_\_\_\_ COMPARTMENTED TANK REQUIRED ☒

NUMBER OF BEDROOMS: 5

SQUARE FEET PER BEDROOM: \_\_\_\_\_

LINEAR FEET OF TRENCH REQUIRED: 194' or close To It

*Trenches 2' Wide  
Inlet 5'  
Bottom 9'*

TRENCHES:	Trench to be <del>3.0</del> feet wide. Inlet <del>3.5</del> feet below original grade. Bottom maximum depth <del>7.5</del> feet below original grade. Effective area begins at 5.5 feet below original grade. 4.0 feet of stone below distribution pipe.
LOCATION:	
NOTES:	

PLANS APPROVED: Ashley Trump DATE: 4/2/07

NOTE: PERMIT VOID AFTER 2 YEARS

NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS

NOTE: WATERTIGHT SEPTIC TANKS REQUIRED

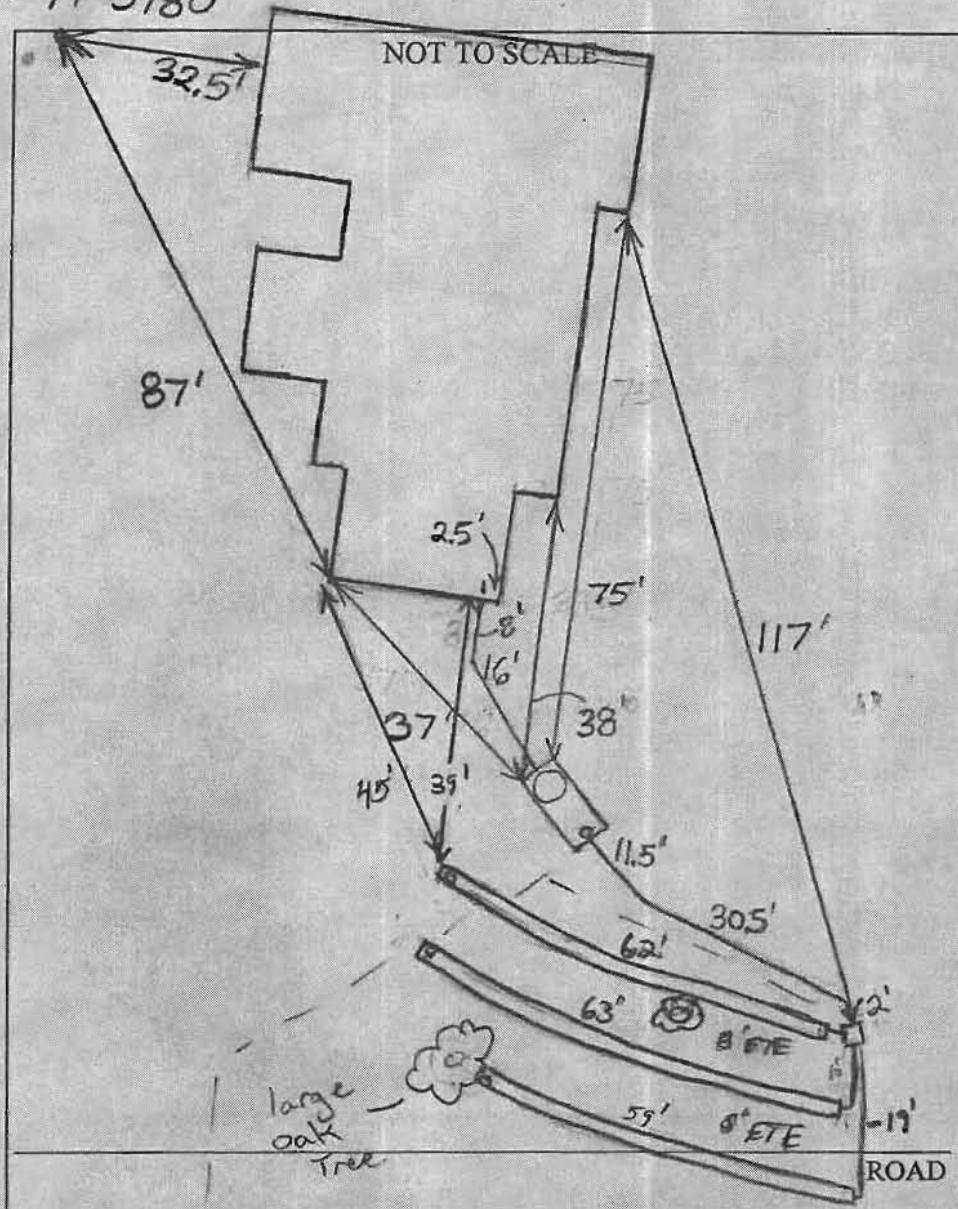
NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL

NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS UNLESS SPECIFICALLY AUTHORIZED

**NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS  
RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM  
PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT  
CALL 410-313-1771 FOR INSPECTION OF SEPTIC SYSTEM**



HO-94-3980



TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
2'	3-4	9'
NUMBER OF TRENCHES	3	
TOTAL LENGTH	184'	
ABSORPTION AREA	368'±SW	
DISTRIBUTION BOX LEVEL	hucles	
DISTRIBUTION BOX BAFFLE	Yes	
DISTRIBUTION BOX PORT	No	

SEPTIC TANK DATA	
SEPTIC TANK 1 LEVEL	Yes
CAPACITY	2000 GAL
SEAM LOC	Top
TANK LID DEPTH	0.5-1.5'
BAFFLES	Rear, Front?
BAFFLE FILTER	No
MANHOLE LOC	Front
6" PORT LOC	Rear
WATERTIGHT TEST	No
SEPTIC TANK 2 LEVEL	N/A
CAPACITY	GAL
SEAM LOC	
TANK LID DEPTH	
BAFFLES	
BAFFLE FILTER	
MANHOLE LOC	
6" PORT LOC	
WATERTIGHT TEST	

PRE-CONSTRUCTION 3/24/08 Transit not on site. To place the distribution box near the top center of the field or INSTALLATION near the upper right easement stake and install 185-195 feet of trench. O.K. to start trenches slightly above corner easement stakes to avoid trees. Changed trench specs. (PB) 3/26/08 Swale going through bottom part of easement. Tank set and plumbing to box finished. Still need to layout exact location of trenches with transit. (PB) 3/31/08 Install 3x63' trucks on contour running north. (Kud) 4/2/08 Sys complete OK to backfill

FINAL INSPECTOR J. de W. H. Y. DATE OF APPROVAL 4/2/08 (15)