

300137541

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVE
ELLICOTT CITY, MD 21043
PERMITS (410)313-2455 INSPECTIONS (410)313-1810
AUTOMATED INFORMATION (410) 313-3800

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER JB
300137541

Building Address 1756 Woodbine Rd.
Woodbine, MD 21797
Suite/Apt. #: _____ SDP/WP/Petition #: _____
Census Tract 604001 Subdivision _____
Section 7 Area _____ Lot _____
Tax Map 7 Parcel 126 Grid 17
Zoning RC Map Coordinates 3D 11 Lot size 9.7 acres

Property Owner's Name Estate of Paul H. Bowman
Address 1636 Woodbine Rd.
City Woodbine State MD Zip Code 21797
Home Phone 410-487-4831 Work Phone N/A
Applicant's Name & Mailing Address, (if other than stated hereon):
Phone _____ Fax _____

Existing Use S.F. Residence
Proposed Use S.F. Residence
Estimated Construction Cost \$ 12,000
Description of Work Add dormers to second floor
and finish into 2 BR, 2 B

Contractor Company Maenner Construction
Contact Person Kraig Maenner
Address 3090 Mardenius Rd
City Westminster State MD Zip Code 21157
License No 69403
Phone 410-848-7811 Fax 410-848-7811

Occupant or Tenant Jean + Donald Bowman
Contact Name either
Address 1756 Woodbine Rd
City Woodbine State MD Zip Code 21797
Phone 410-549-1586 Fax 410-487-7374

Engineer or Architect Company _____
Contact Person _____
Address _____
City _____ State _____ Zip Code _____
Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: <u>8.8</u>	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 _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/>
State Certified Modular _____	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"/>	Water Supply: _____ Public _____ Private <input checked="" type="checkbox"/>
1st floor: _____ Depth _____ Width _____	Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/>
2nd floor: _____	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Basement: _____	Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/>	Heating System: _____ Electric <input type="checkbox"/> Oil <input checked="" type="checkbox"/>
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Natural Gas <input type="checkbox"/>
No. of Bedrooms <u>2</u>	Propane Gas <input type="checkbox"/>
Multi-family dwellings: _____	Sprinkler system: <u>N/A</u> <input checked="" type="checkbox"/>
No. of efficiency units: _____	NFPA #13D _____
No. of 1 BR units: _____	NFPA #13R _____
No. of 2 BR units: _____	Other: _____
No. of 3 BR units: _____	
Other Structure: _____	
Dimensions: _____	
Footings: _____	
Roof: _____	
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.

Applicant's Signature _____

Print Name _____
Date 7-17-02

Title/Company _____

Date _____

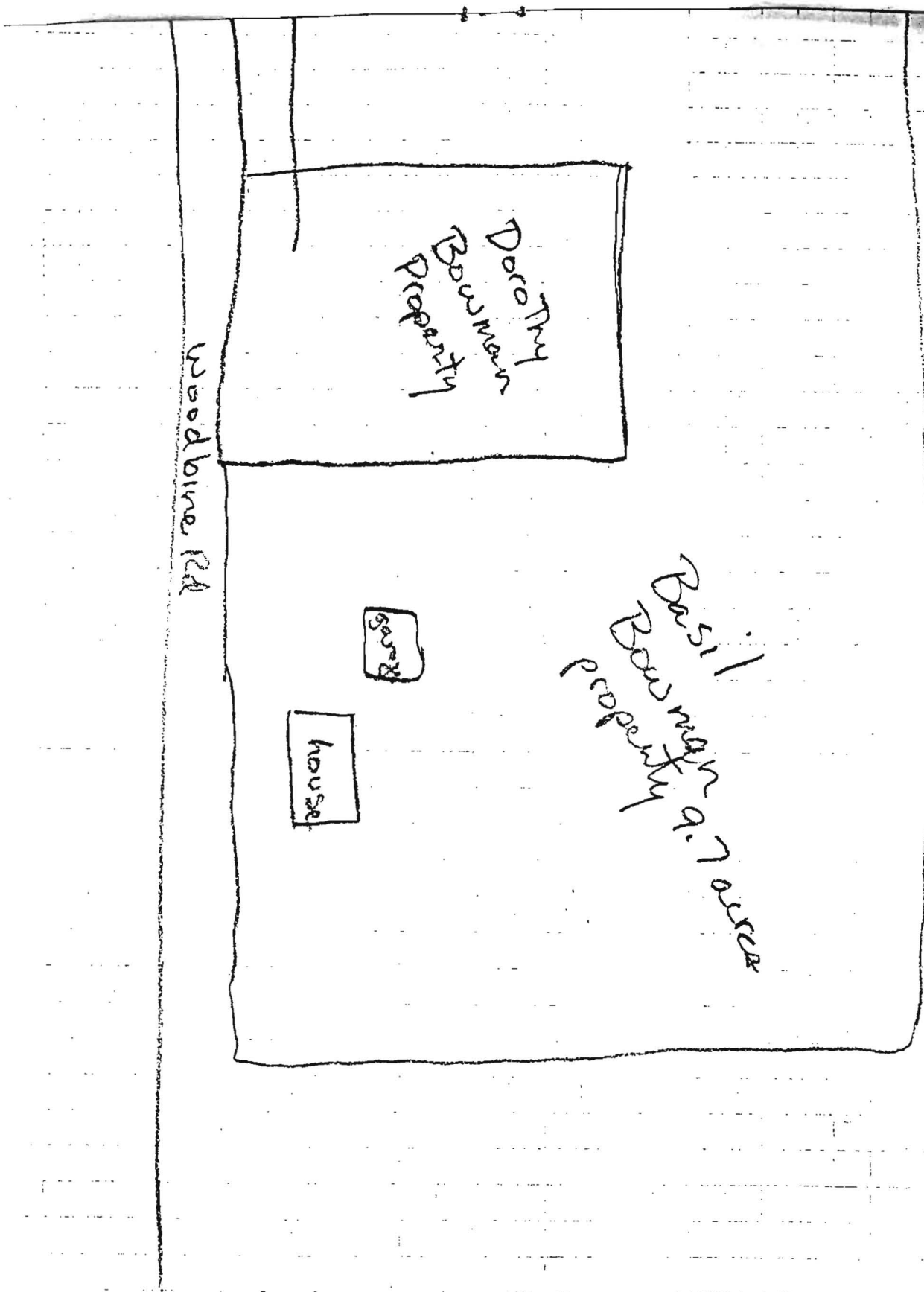
Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
** PLEASE WRITE NEATLY AND LEGIBLY. **

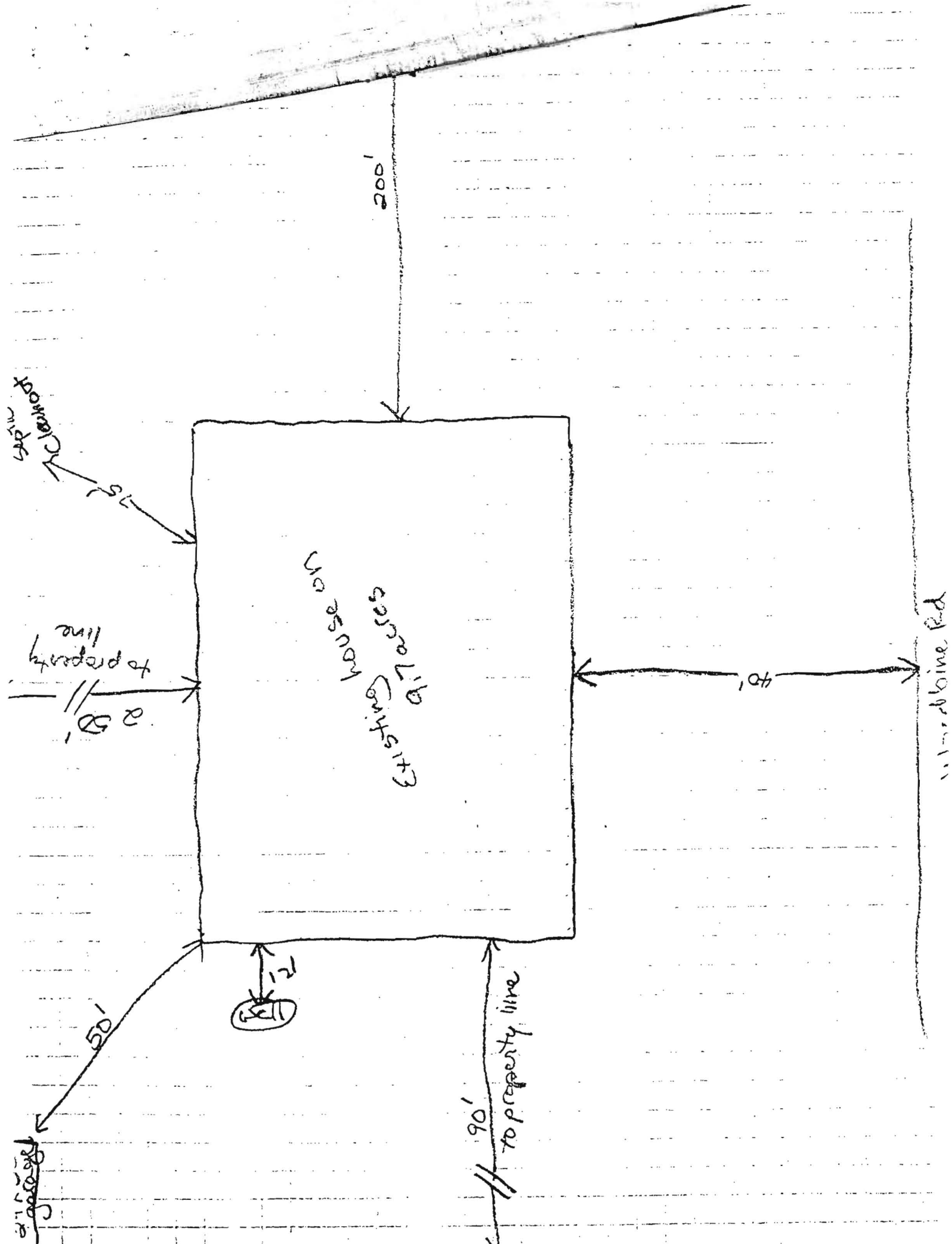
FOR OFFICE USE ONLY

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#
Land Development DPZ			Front: _____	52568
State Highways			Rear: _____	Filing fee \$ _____
Building Official			Side: _____	Permit fee \$ _____
Dev. Engineering DPZ			Side-St: _____	Excise tax \$ _____
Health	<u>JULY 8/13/02</u>		All minimum setbacks met?	Add'l per. fee \$ _____
Fire Protection			YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
Is Sediment Control approval required prior to issuance?			Is Entrance Permit required?	Sub-total paid \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Historic District?	Check # <u>160</u>
ONE STOP SHOP: <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	Validation # _____
			Lot Coverage for New Town Zone _____	
			SDP/Red-line approval date _____	Accepted by _____

Distribution of Copies: White: Building Official / Green: LDD, DPZ / Yellow: DED, DPZ / Pink: Health / Gold: SHA

Plot plan / both sides





200'

75' to property line

250' to property line

3 Pitac's Existing house on

40'

road line Rd

50'

12'

90' to property line

Property line

Walk-Through

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3430 COURT HOUSE DRIVE ELICOTT CITY, MD 21043 PERMITS (410) 313-2455 INSPECTIONS (410) 313-1810 AUTOMATED INFORMATION (410) 313-3800		HOWARD COUNTY PERMIT APPLICATION	PERMIT NUMBER B11000191
Building Address <u>1756 Woodbine Rd</u> <u>Woodbine MD 21797</u>		Property Owner's Name <u>Donald Jean Bowman</u>	
Suite/Apt. #: _____ SDP/WP/Petition #: _____		Address <u>1756 Woodbine Rd</u>	
Census Tract _____ Subdivision _____		City <u>Woodbine</u> State <u>MD</u> Zip Code <u>21797</u>	
Section _____ Area _____ Lot _____		Phone <u>410-489-7374</u>	
Tax Map _____ Parcel _____ Grid _____		Applicant's Name & Mailing Address, (if other than stated hereon): _____	
Zoning _____ Map Coordinates _____ Lot size _____		Phone _____ Fax _____	
Existing Use <u>GARAGE STORAGE</u>		Contractor Company <u>StraightUP Custom Homes Inc.</u>	
Proposed Use <u>Tractor Storage</u>		Contact Person <u>Bill Brown</u>	
Estimated Construction Cost \$ <u>20,000.00</u>		Address <u>2425 Flag Marsh Rd</u>	
Description of Work <u>Remove Roof From Existing Garage Replace with New Truss Roof and Extend Roof at Rear 24' to create tractor parking 24x32</u>		City <u>Mt. Airy</u> State <u>MD</u> Zip Code <u>21771</u>	
License No. <u>120853</u>		Phone <u>410-795-6279</u> Fax <u>301-829-1592</u>	
Occupant or Tenant _____		Engineer or Architect Company _____	
Contact Name _____		Contact Person _____	
Address _____		Address _____	
City _____ State _____ Zip Code _____		City _____ State _____ Zip Code _____	
Phone _____ Fax _____		Phone _____ Fax _____	

BUILDING DESCRIPTION - COMMERCIAL		BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics	Utilities	Building Characteristics	Utilities
Height: _____	Water Supply: _____ Public _____ Private _____	SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: _____ Public _____ Private _____
No. of stories: _____	Sewage Disposal: _____ Public _____ Private _____	1st floor: _____	Sewage Disposal: _____ Public _____ Private _____
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>	2nd floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>	Basement: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>	Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/>	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
_____ State Certified Modular	Sprinkler system: N/A <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____	Other Structure: _____ Dimensions: _____ Footings: _____ Roof Height: _____	Sprinkler system: N/A <input type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____
		_____ State Certified Modular _____ Manufactured Home	

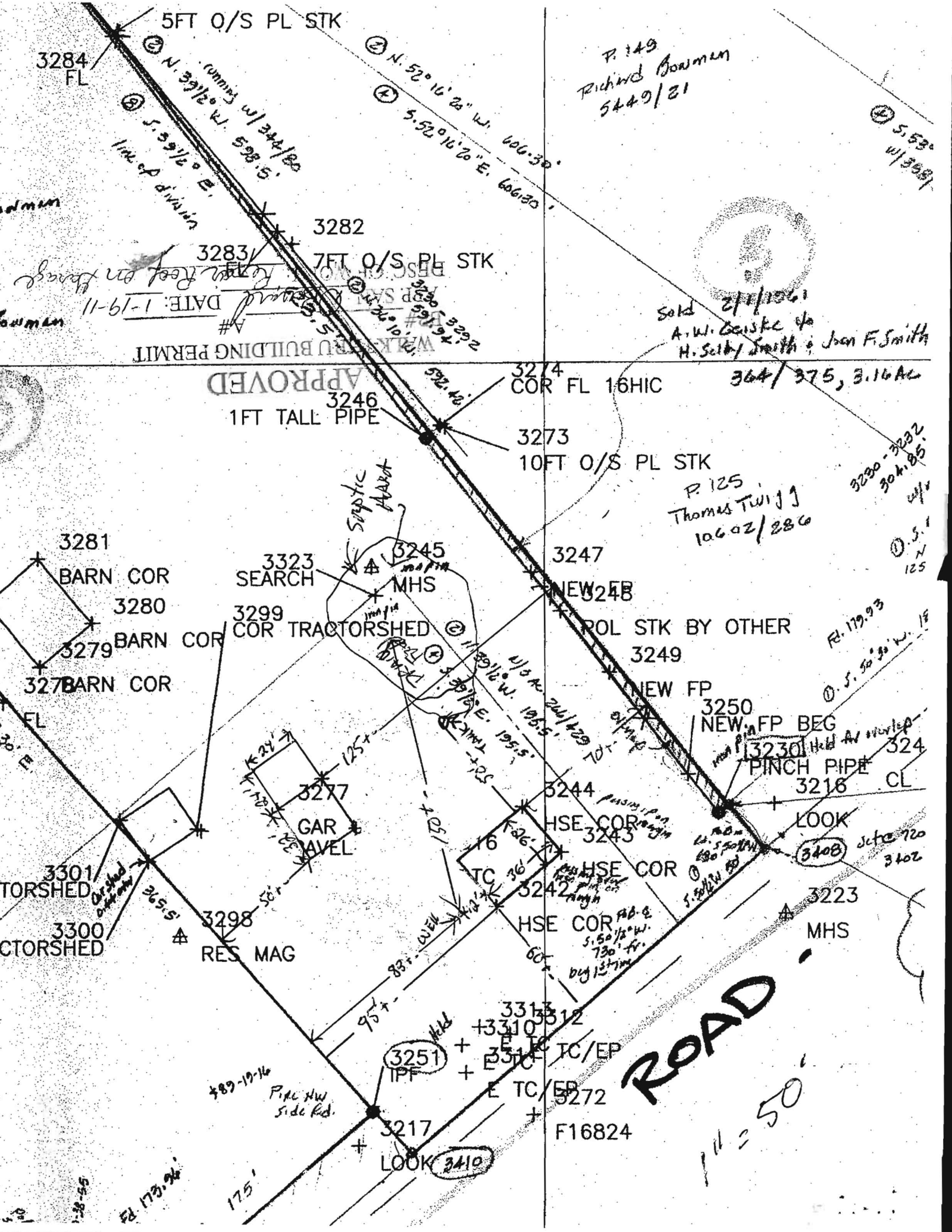
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William H Brown Jr
 Applicant's Signature
President
 Title/Company

William H Brown Jr
 Print Name
1-13-11
 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>1-19-11</u>	<u>D. Brown</u>	All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____	
Fire Protection			Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____	
Is Sediment Control approval required prior to issuance?			Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____	
YES <input type="checkbox"/> NO <input type="checkbox"/>			Lol Coverage for New Town Zone _____	Check # <u>10176</u>	
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			SDP/Red-line approval date _____	Validation # _____	
ONE STOP SHOP: <input type="checkbox"/>			Accepted by _____		
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5FT O/S PL STK

3284 FL

N. 39 1/2° E. 598.5'
 5.59 1/2° E.
 1/4" of division

N. 52° 16' 26" W. 1006.30'
 5.52° 16' 26" E. 606.20'

P. 149
 Richard Bowman
 5449/21

5.53°
 w/398'

3282

7FT O/S PL STK

3283

DATE: 1-19-11
 # 11-61
 WALKER BUILDING PERMIT

Sold 2/1/1961
 A.W. Goiske &
 H. Selby Smith & Joan F. Smith

3246
 1FT TALL PIPE

3274
 COR FL 16HIC

364/375, 3.16 AC

3273
 10FT O/S PL STK

P. 125
 Thomas Twigg
 10602/286

3290-3292
 30x105'
 w/4'

3281

BARN COR

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BARN COR

3279

BARN COR

3278

FL

3323
 SEARCH

3245
 MHS

3247

NEW 24" B

3299
 COR TRACTORSHED

POL STK BY OTHER

3249

NEW FP

3250
 NEW FP BEG

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HOWARD COUNTY HEALTH DEPARTMENT

Bureau of Environmental Health
3525-H Ellicott Mills Drive, Ellicott City, Maryland 21043-4544
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-877-4MD-DHMH

Penny E. Borenstein, M.D., M.P.H., Acting County Health Officer

July 24, 2002

Donlad & Jenn Bauman
1756 Woodbine Road
Woodbine, MD 21797

RE: Building Permit Application B00137541
1756 Woodbine Road
Proposed Addition w/ 2 Bedrooms

Dear Mr. & Mrs. Bauman:

This office has received the above referenced building permit application, but cannot recommend approval at this time because of concerns about the capacity of the existing septic system to handle the potential increase in flow associated with this proposal.

No records could be located for the existing septic system on your property, suggesting that the system is older than 40 years, severely undersized, poorly constructed, or in some other way does not meet minimum standards. Therefore, the septic system would not be expected to be able to accommodate the potential increase in sewage flow from the increase in house capacity (represented by the proposed construction of two additional bedrooms).

A Health Department recommendation for approval is contingent upon installation of additional septic capacity via a septic system repair (permit fee \$25) suitable for a 4-bedroom house. The process is best completed through a professional septic contractor prior to building permit issuance.

Please contact this office at (410) 313-2640 if you have any questions or to arrange permit issuance.

Very Truly Yours,

John A. Boris, Jr., R.S.
Well and Septic Program

MR
cc: Department of Inspections, Licenses & Permits
Maenner Construction
File

8/13/02
Perc Repair
done - two
systems sized.
okay to sign
B. Permit B00137541
KN