



# 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: 11/18/19

Permit No.: B14004217

Building Address: 5710 TROTTER RD  
City: LAURENS State: MD Zip Code: 21029  
Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
Census Tract: \_\_\_\_\_ Subdivision: \_\_\_\_\_  
Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: \_\_\_\_\_  
Tax Map: \_\_\_\_\_ Parcel: \_\_\_\_\_ Grid: \_\_\_\_\_  
Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: \_\_\_\_\_

Existing Use: \_\_\_\_\_  
Proposed Use: \_\_\_\_\_  
Estimated Construction Cost: \$ 100,000  
Description of Work: 3 BR 1.5 BATH, 2 CAR GARAGE

Occupant or Tenant: \_\_\_\_\_  
Was tenant space previously occupied?  Yes  No  
Contact Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

Property Owner's Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

**Applicant's Name & Mailing Address, (if other than stated herein)**  
Applicant's Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

Contractor Company: \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
License No.: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

Engineer/Architect Company: DEAN ROBERT  
Responsible Design Prof.: \_\_\_\_\_  
Address: 182 EAST MAIN ST  
City: REHOBOTHE State: MD Zip Code: 21157  
Phone: 410-876-6900 Fax: 410-876-9268  
Email: DEAN@INNOVATIONPRCA.COM

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

Utilities	
<b>Water Supply</b>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
<b>Sewage Disposal</b>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	<u>USE PREVIOUS SEPTIC</u>
Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No	<u>*SEE</u>
<b>Heating System</b>	
<input type="checkbox"/> Electric <input type="checkbox"/> Oil	<b>B14004215 FOR DEMO</b>
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
<b>Sprinkler System:</b>	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Grading Permit Number:</b> <u>614000363</u>	
<b>Building Shell Permit Number:</b>	

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
<input checked="" type="checkbox"/> State Highways		
<input checked="" type="checkbox"/> Building Officials		
<input checked="" type="checkbox"/> PSZA ( Zoning )		
<input checked="" type="checkbox"/> PSZA ( Engineering )		
<input checked="" type="checkbox"/> Health		

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	\$ <u>100</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$ <u>50</u>
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	# <u>5959</u>

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

Distribution of Copies: White: Building Officials Green: PSZA, Zoning Yellow: PSZA, Engineering Pink: Health Gold: SHA



HOWARD COUNTY DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS

3430 Courthouse Drive

Ellicott City, Maryland 21043

410-313-2433

Robert J. Frances, P.E., Director  
bfrances@howardcountymd.gov

FAX 410-313-3298  
TDD 410-313-2323

**CANCELLATION NOTICE**

**DATE:** 10/30/2015

**TO:** (X) Department of Planning Zoning  
(X) Development Engineering Division  
(X) Health Department  
(X) State Highways  
(X) Inspectors (Building)  
(X) Licenses and Permits Division  
( ) Tax Assessment Office  
(X) Owner  
(X) Division of Plan Review  
(X) Other: Contractor

**RE:** Cancellation and/or Expired Permit Application

Permit Number: B14004217

Application Date: 09/26/2014

Owner: Marc Gagnier

Location: 5710 Trotter Road

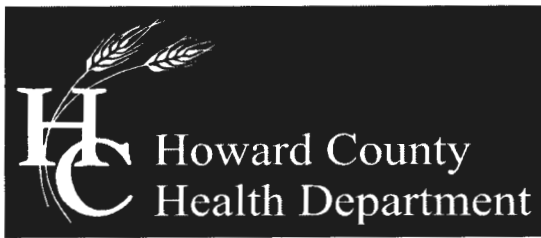
Description of Work: SFD/ 1-STORY ADDITION (13.5' X 20') ON FULL BSMT, 2 R, 1 BR, ENERGY PRESCRIPTIVE METHOD

**Reason for Permit Cancellation:** : This permit application was Denied by the Department of Planning and Zoning on August 25, 2015.

**FROM:** Sincerely,

Shari Logan, Chief – Licenses Permits Division  
Department of Inspections, Licenses, & Permits  
3430 Court House Dr, Ellicott City, MD 21043  
Phone Number (410) 313-2455

**NOTE:** Plans on file may be picked up no later than 15 days from date of notification between the hours of 8:00 am – 4:00pm, Monday through Friday.



**Bureau of Environmental Health**

8930 Stanford Boulevard, Columbia, MD 21045

Main: 410-313-2640 | Fax: 410-313-2648

TDD 410-313-2323 | Toll Free 1-866-313-6300

[www.hchealth.org](http://www.hchealth.org)

Facebook: [www.facebook.com/hocohealth](http://www.facebook.com/hocohealth)

Twitter: HowardCoHealthDep

**Maura J. Rossman, M.D., Health Officer**

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December 3, 2014

TIMOTHY L HATFIELD  
TIMOTHY HATFIELD BUILDING & REMODELING, INC.  
289 EAST MAIN STREET  
WESTMINSTER, MD 21157

*Sent via email to: [INFO@TIMOTHYHATFIELDREMODELING.COM](mailto:INFO@TIMOTHYHATFIELDREMODELING.COM)*

**RE: B14004217**  
**5710 Trotter Road**  
**Clarksville, MD 21029**

TIMOTHY L HATFIELD:

This letter is in response to building permit B14004217. The application describes building a new single family dwelling. Upon review of the documents, the submittal did not include a copy of the floor plans for the new SFD. Additionally, a percolation certification application and site plan along with applicable fees is required. Please note that the septic system components serving the other house on the property should be included in the plans (Attached is a copy of the Percolation Test and Plan Requirements).

Building permit approval is being withheld until a revised site plan, floor plan and a percolation certification plan has been forwarded to the Health Department. I may be reached at (410) 313-1786, if you would like to discuss the project.

Respectfully,

*Hank Oswald*

Hank Oswald, L.E.H.S  
Bureau of Environmental Health  
Well & Septic Program



## Bureau of Environmental Health

8930 Stanford Blvd, Columbia, MD 21045  
Main: 410-313-2640 | Fax: 410-313-2648  
TDD 410-313-2323 | Toll Free 1-866-313-6300  
[www.hchealth.org](http://www.hchealth.org)

Facebook: [www.facebook.com/hocohealth](http://www.facebook.com/hocohealth)


Twitter: HowardCoHealthDep

**Maura J. Rossman, M.D., Health Officer**

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### MEMORANDUM

TO: Timothy Hatfield  
[info@timothyhatfieldremodeling.com](mailto:info@timothyhatfieldremodeling.com)

FROM: Ryan Rappaport, L.E.H.S.   
Well & Septic Program

RE: 5710 Trotter Road, Clarksville, MD. 21029  
Demolition of existing dwelling in advance of new dwelling construction

DATE: November 12, 2014

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This is to advise that the Howard County Health Department recommends issuance of a demolition permit for the dwelling on the above referenced property. This memorandum does not guarantee approval of future building permits for this property.

By accepting this recommendation, the owner agrees to the following conditions set forth by the Health Department:

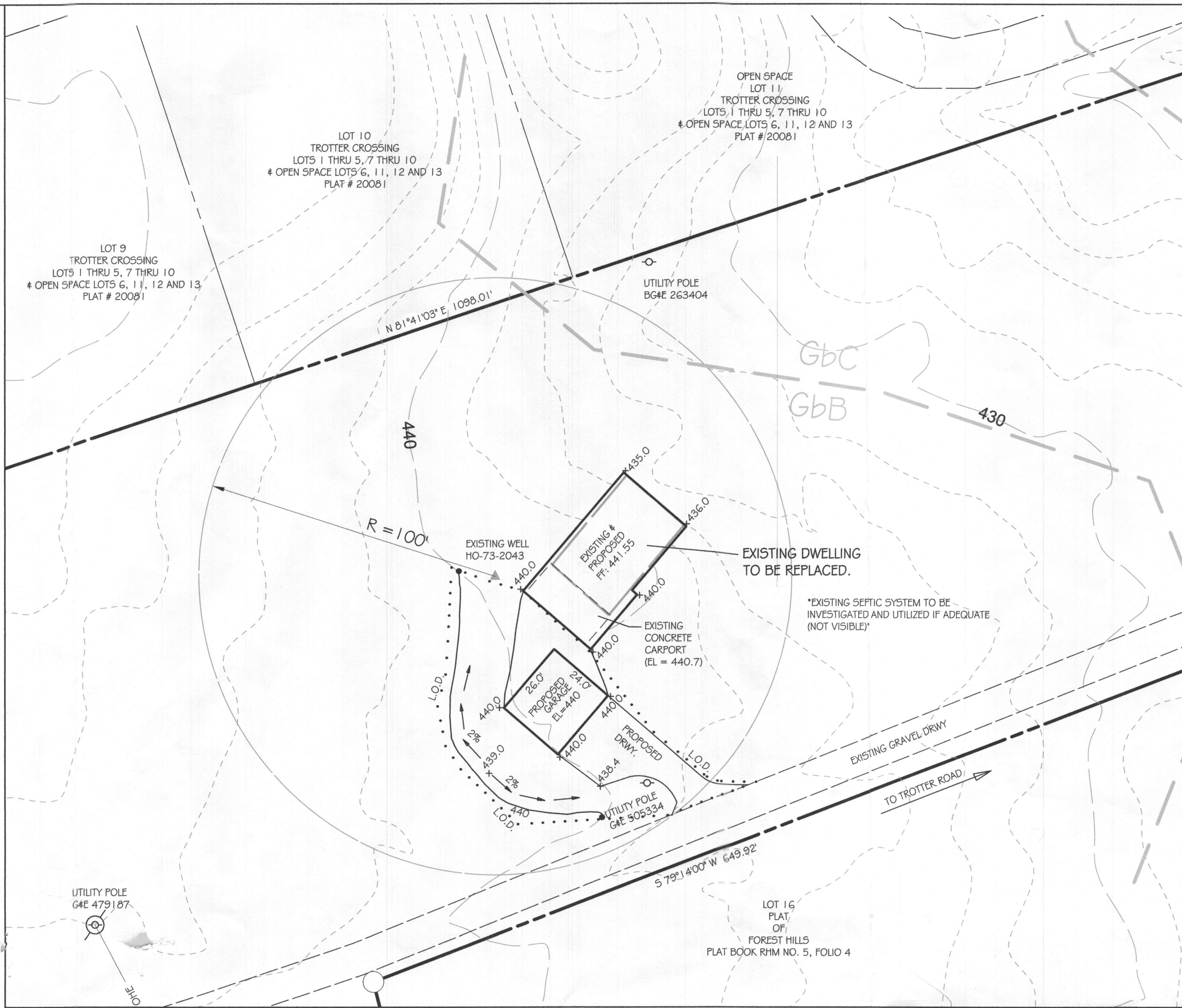
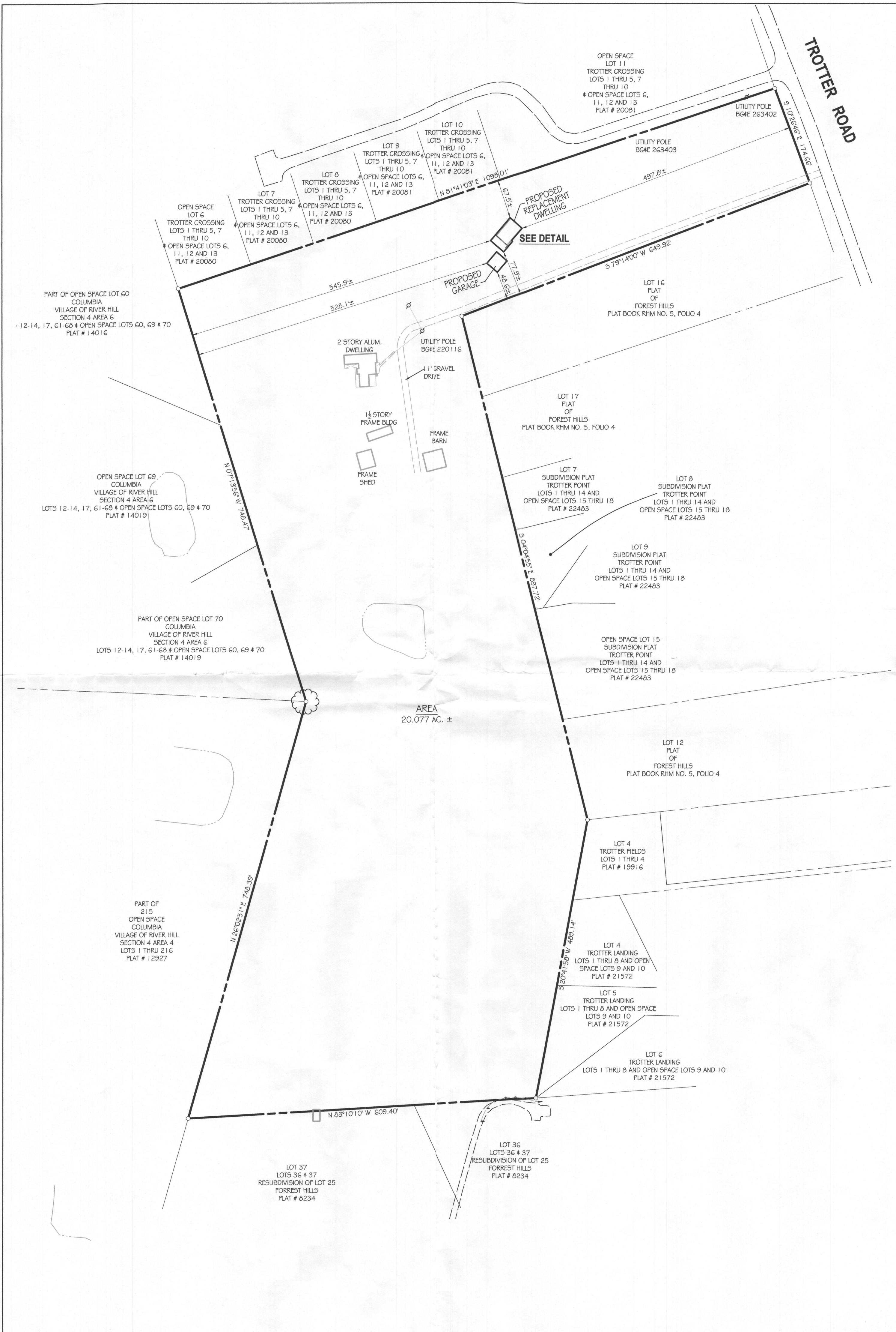
- The plumbing to the existing house must be disconnected and capped before demolition. Protective devices must be installed around the well location to prevent any damage during demolition. It is recommended that these devices remain in place during all phases of demolition and construction.
- The house connection to the existing septic system must be properly disconnected and capped before demolition of the dwelling. Protective devices must be installed around the septic system components to prevent any damage during demolition. It is recommended that these devices remain in place during all phases of demolition and construction.
- A Percolation Certification Plan establishing a reserve area for an initial and two future replacement septic systems must be approved by the Health Department prior to building permit review. Percolation testing will be required on the property in order to establish this reserve area. An application for percolation testing must be submitted along with an appropriate site plan and applicable fees to begin the percolation testing process. The Percolation Certification Plan must show the location of the proposed house. All setbacks to the existing potable well and onsite septic system must be met or they must be abandoned and replaced prior to the building permit approval.

- During the percolation testing of the lot, the Health Department will evaluate the existing septic system to determine if it may remain in service for the future dwelling. If it is determined that a new system is needed, the existing system must be properly abandoned prior the installation of the new system. Please note that the existing septic tank is sized for three bedrooms. If it is determined that a new septic system must be installed, a Best Available Technology (BAT) unit will be required.
- Once connected to the new dwelling, the well water supply must be tested for potability and the results submitted to the Health Department for issuance of a Certificate of Potability. This certificate will be necessary for a Use and Occupancy release.
- If no suitable sewage disposal area can be found onsite or offsite, connection to the public sewer system will be required prior to the building permit approval.

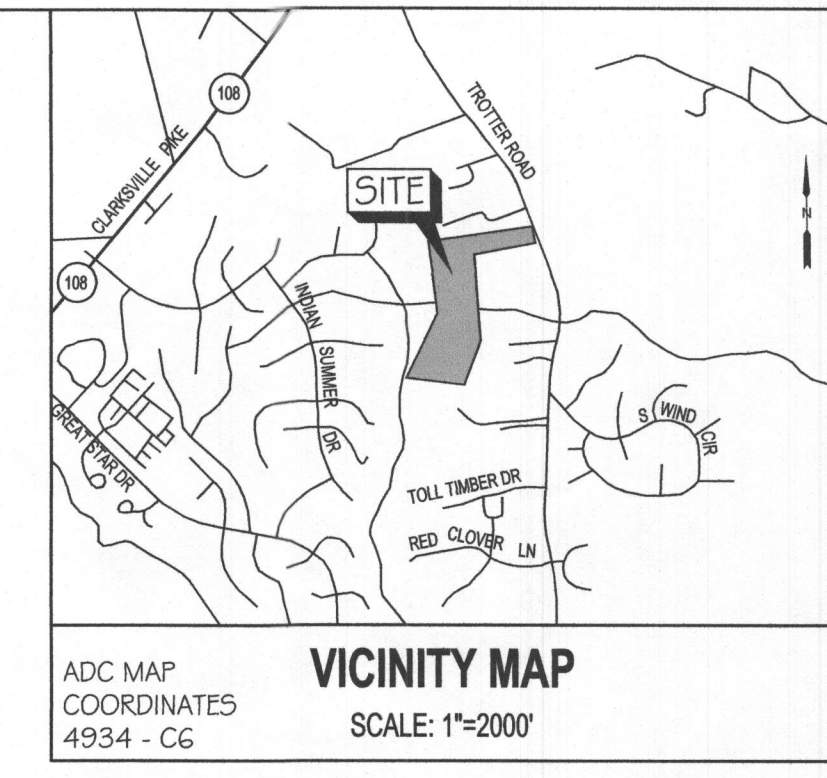
If any problems arise concerning the well and/or septic systems during demolition, please notify this office immediately.

If there are any questions, please feel free to contact me at 410-313-1781 or [rrappaport@howardcountymd.gov](mailto:rrappaport@howardcountymd.gov).

Cc: File



**DETAIL**  
SCALE: 1"=30'



- GENERAL NOTES:**
1. ZONING = R-20 - LOW DENSITY RESIDENTIAL
  2. TAX MAP: 35, GRID: 2, PARCEL: 13
  3. TOPOGRAPHY SHOWN HEREON IS TAKEN FROM HOWARD COUNTY GIS DATA, (SPRING, 2011) & SUPPLEMENTED WITH FIELD RUN TOPOGRAPHY BY RTF ASSOCIATES, INC. ON OR AROUND OCTOBER, 2014.
  4. ADC MAP COORDINATES = 4934-C6
  5. FIELD VERIFICATION OF SITE CONDITIONS AND NATURAL RESOURCES MAP WAS PERFORMED OCTOBER 30, 2014 BY RTF ASSOCIATES, INC.
  6. ALL AREAS SHOWN HEREON ARE MORE OR LESS.
  7. THIS PROPERTY IS EXEMPT FROM FOREST CONSERVATION AS THE AREA OF DISTURBANCE IS LESS THAN 20,000 SQUARE FEET (WOODED).
  8. THIS PROPERTY IS EXEMPT FROM STORM WATER MANAGEMENT AS THE AREA OF DISTURBANCE IS LESS THAN 5,000 SQ. FT.
  9. L.O.D. = LIMITS OF DISTURBANCE

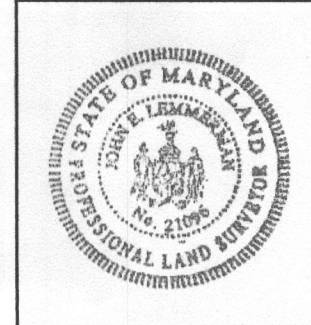
- SITE ANALYSIS DATA:**
1. TOTAL AREA OF SITE = 20.077 AC. ±
  2. AREA OF 100 YEAR FLOOD PLAIN = NONE
  3. TOTAL AREA OF DISTURBANCE = 4,660 SQ. FT. ±
  4. TOTAL AREA OF TREE REMOVAL = 0 SQ. FT. ±
  5. WATERSHED = 02131106

**TITLE REFERENCE**  
JOSEPH MARC GAGNIER  
15150-45  
JUNE 25, 2013

**OWNER / DEVELOPER**  
JOSEPH MARC GAGNIER  
5710 TROTTER ROAD  
CLARKSVILLE, MD 21029  
PHONE # 443-340-4868

**REPLACEMENT DWELLING**  
SITE PLAN  
OF  
**GAGNIER PROPERTY**  
5710 TROTTER ROAD  
5TH ELECTION DISTRICT, HOWARD CO. MD  
TAX MAP: 35, GRID: 2, PARCEL: 13

*John E. Lemmerman*  
**JOHN E. LEMMERMAN**  
REGISTERED PROFESSIONAL LAND SURVEYOR NO. 21096  
EXP. 6-3-15



142 EAST MAIN STREET WESTMINSTER, MD 21157  
410-848-2040 FAX# 443-289-8942 410-876-1222  
EMAIL: RTF142@GMAIL.COM WWW.RTFSURVEYING.COM  
CHECKED BY: JEL DATE: 11-13-2014  
DRAWN BY: SP DATE: 11-12-2014  
SCALE: 1" = 100' R.T.F. JOB # 14-82