

PERMIT NUMBER: B

21002172

DATE ACCEPTED:

RECEIVED



RESIDENTIAL BUILDING PERMIT APPLICATION

HOWARD COUNTY DEPARTMENT OF INSPECTIONS, LICENSES, AND PERMITS

3430 COURT HOUSE DRIVE, ELLICOTT CITY, MD 21043

PHONE: (410) 313-2455 OPTION #4

www.howardcountymd.gov

JUN 03 2021

BUILDING SITE ADDRESS REQUIRED

Street Address: 11715 Teri-Lynn Drive

Unit: DIVISION

City: Fulton

State: MD

Zip Code: 20759

Subdivision/Village/Complex Name: Mooresfield

SDP/WP/BA #:

Lot: 4

Tax Map: 41

Parcel: 416

Grading Permit #: N/A

DESCRIPTION OF WORK REQUIRED

Existing Use:

Proposed Use:

Estimated Cost: \$ 49,930.00

Trade Work to Be Completed (Separate Permits Required): ☐ Mechanical (HVACR) ☐ Electrical ☐ Plumbing ☐ None

Remove & Replace existing 2 story deck/Porch - 24' x 17' with steps, upper deck 9' x 10' and lower deck 17' x 11'

PROPERTY OWNER INFORMATION REQUIRED

Owner(s) Name(s) (As it appears on tax records): Jason Blight

Primary Residence: ☒ Yes ☐ No

Owner's Street Address: 11715 Teri-Lynn Drive

City: Fulton

State: MD

Zip Code: 20759

Phone: 443-812-2020

Email: jmblight@gmail.com

APPLICANT NAME REQUIRED INDIVIDUAL WHO SIGNS THIS APPLICATION

Business Name: Remodel Works

Contact Name: Sam Giordano

Street Address: 400 Alameda Pkwy

City: Arnold

State: MD

Zip Code: 21012

Phone: 443-533-6500

Email: sam@remodelworks.com

CONTRACTOR INFORMATION REQUIRED

Business Name: Remodelworks INC

Licensee's Name: Sam Giordano

License #: 78624

Street Address: 400 Alameda Pkwy

City: Arnold

State: MD

Zip Code: 21012

Phone: 443-533-6500

Email: sam@remodelworks.com

ARCHITECT/ENGINEER INFORMATION INDIVIDUAL WHO SIGNED PLANS, IF APPLICABLE

Business Name: Roberts Architects

Name:

Street Address: 8630 M Guilford Rd suite 143

City: Columbia

State: MD

Zip Code: 21046

Phone: 410-971-6809

Email:

BUILDING CHARACTERISTICS REQUIRED

Primary Structure: ☒ SF Dwelling ☐ SF Townhouse ☐ SF Duplex ☐ Mobile Home ☐ Multi-Family Dwelling (MF*) Condo: ☐ Yes ☒ NoUtilities: ☒ Electric ☒ Gas Water Supply: ☐ Public ☐ Private (Well) Sewage Disposal: ☒ Public ☐ Private (Septic)Heating System: ☒ Electric ☐ Natural Gas ☐ Propane ☐ Other: Roadside Tree Project: ☒ No ☐ Yes: #Sprinkler System: ☐ NFPA 13 ☐ NFPA 13R ☐ NFPA 13D ☐ None Fire Alarm System: ☐ Yes ☒ No ☐ Voice Evac

ADDITIONAL RESIDENTIAL INFORMATION (PLEASE SELECT COMPLETE ALL THAT APPLY)

Model Name & Options:

of Bedrooms (SF): # of efficiency units (MF*): # of 1 BR (MF*): # of 2 BR (MF*): # of 3 BR (MF*):

Rooms: # Full Baths: # Half Baths: # Fireplaces:

Garage/Carport Info: ☐ Attached Garage ☐ Detached Garage ☐ Integral Garage ☐ Carport ☐ NoneBasement/Foundation Info: ☐ Slab on Grade ☐ Post & Pier ☐ Unfinished Basement ☐ Finished Basement: ☐ Full or ☐ Partial1st Fl Width: 1st Fl Depth: 2nd Fl Width: 2nd Fl Depth: Bsmt Width: Bsmt Depth:Energy Method: ☐ Prescriptive ☐ Performance ☐ UA Alternative ☐ ERI Gross Area: sq ft Occupiable Area: sq ft

AGREEMENT/ DISCALIMER REQUIRED

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 ORIGINAL SIGNATURE

DATE SIGNED

FOR OFFICE USE ONLY

CHECK & PAYABLE TO: DEPARTMENT OF FINANCE OF HOWARD COUNTY

AGENCIES REQUIRED/APPROVALS:

☒ PR ☒ DPZ ☒ CED ☒ Health ☐ SHA ☐ CID

SUBMITTAL FEES: 2500

PAYMENT: No Check

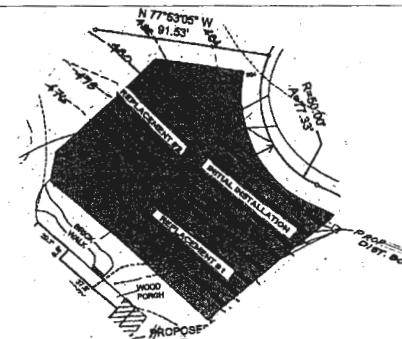
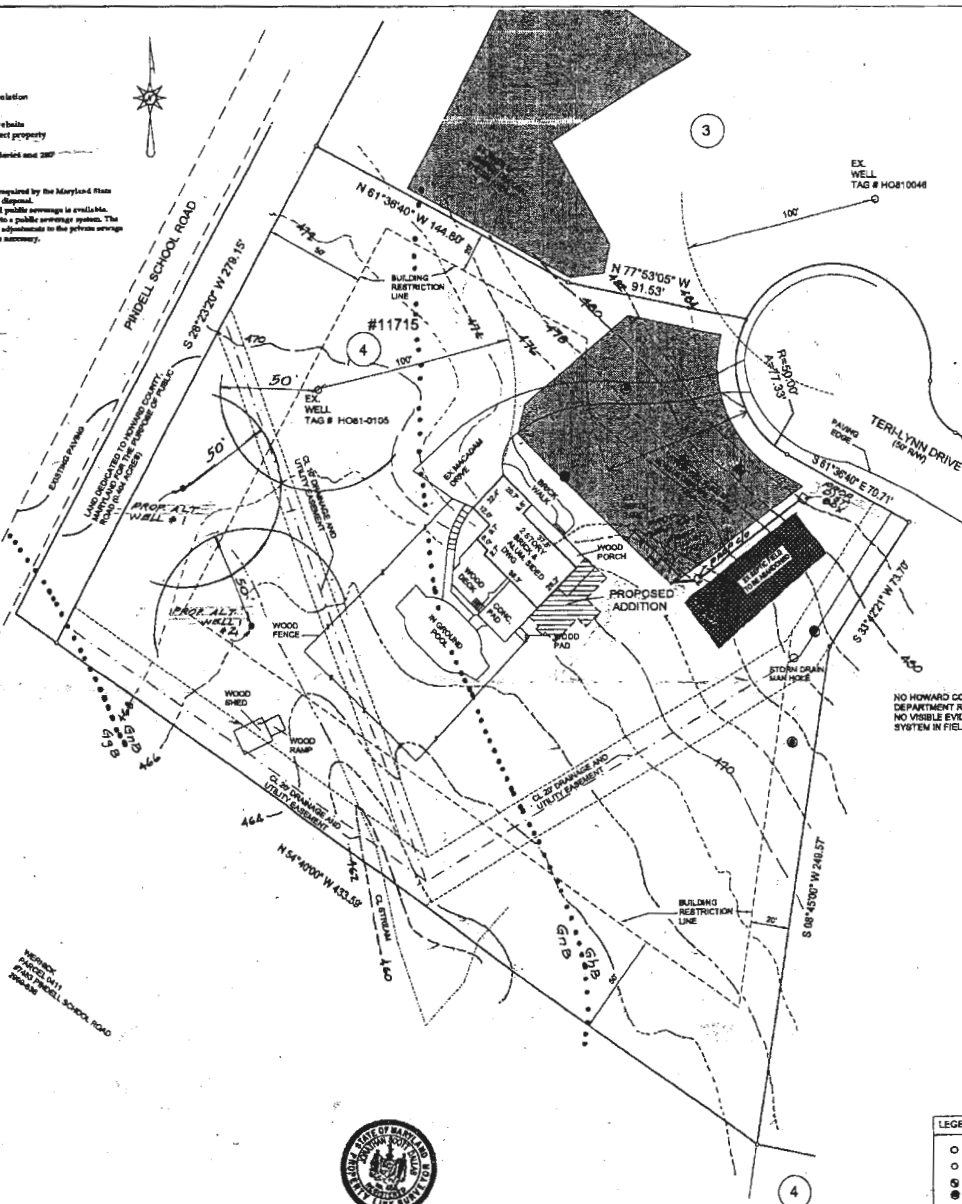
ACCEPTED BY: Dnp.Bx

if removed shall require a revised percolation

taken from the Howard County, MD website
 permit the relative changes on the subject property
 21.00/2.7)

signature a private sewage disposal area is required by the Maryland State
 1 of the Department for Individual Sewerage Disposal.
 use of any nature in this area restricted until public sewerage is available.
 all houses will and void upon connection to a public sewerage system. The
 the Office should have the authority to grant adjustments to the private sewerage
 system of a modified sewerage system shall not be necessary.

PERMIT CAN BE RELEASED
 30 MUST PASS POTABILITY TEST
 SECURED.



TRENCH DETAIL 1"=30'
 ALL TRENCHES ARE 2' WIDE WITH 6" HORIZONTAL SEPARATION,
 BEGIN AT 8" BELOW GRADE AND ARE 6.8' DEEP.
 INITIAL INSTALLATION AND REPLACEMENT #1 CONSIST OF
 4 TRENCHES 67.5' LONG.
 REPLACEMENT #2 CONSISTS OF 4 TRENCHES 45' LONG.

NO HOWARD COUNTY ENV HEALTH
 DEPARTMENT RECORDS AVAILABLE.
 NO VISIBLE EVIDENCE OF SEPTIC
 SYSTEM IN FIELD

Approved for Private Water and Private Sewerage Systems

Barbara Peter Brinkman 3/1/2012
 Health Officer, Howard County Health Dept Date

OWNER: JAMES W. & CHERI B. HORNE
 11715 TERI LYNN DR.
 FULTON, MD. 20759
 PHONE 301-490-5218

PERCOLATION CERTIFICATION PLAN
 AND SITE PLAN

11715 TERI LYNN DRIVE
 LOT 4 (PLAT MAP No. 5078)
 LOTS 1, 2, 3 & 4
 MOORESTOWN
 SECTION 3
 5TH ELECTION DISTRICT HOWARD COUNTY, MD.
 1"=30' JANUARY 27, 2012
 R.W. 2-15-2012

J.O. # 11-180

LAS, INC
 D ENGINEERING
 10X 26
 BRYLAND 21013
 017-4600

SEPTIC
 TANK
 OVERFLOW

I certify that the information shown hereon is based on field work performed by me or
 under my direct supervision, and is correct, to the best of my knowledge and belief.

[Signature]

1-27-2012



LEGEND	
○	EX. WELL
○	EX. SEPTIC TANK
●	TEST HOLE PASSED 1-17-2012
●	TEST HOLE PASSED 6-29-76
■	SEWAGE DISPOSAL SYSTEM AREA

• Existing well and/or sewerage easements within 100 feet of the property
 have been shown.

• The issuance of this Percolation Certification Plan is to establish a record.

bed until public sewerage is available.
 action to a public sewerage system. The
 to grant adjustments to the private sewerage
 if not be necessary.

EST

