

Menu Save Reset Cancel Help

Record Detail \* (This section is required.)

Case #  
EH-PLANS-24-0

Type  
EnvHealth/Environmental Health/Plan Check/Application

Status  
In Review

Opened Date  
02/15/2024

Single Entry Edit-View Record Form

Application Name  
003003674

Approved R-1E  
5/16/2024

Description  
SFD/ Partially finish basement TO INCLUDE FAMILY ROOM \*\*SLEEPING ROOMS ARE NOT PERMITTED UNLESS EGRESS REQUIREMENTS ARE MET, SMOKE DETECTORS REQUIRED

Total Invoiced

0.00

Total Paid  
0.00

Balance  
0.00

Online BP assigned  
to RSF. gld 2/16/24

Assigned to Department Current Department  
Well and Septic Progr

Assigned to Staff Current User  
Zack Silvast

Address \* (This section is required.)

New	Search	Delete	Set Primary														
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Primary</u>	<u>Street # (start)</u>	<u>Direction</u>	<u>Street Name</u>	<u>Street Type</u>	<u>City</u>	<u>State</u>	<u>Zip Code</u>	<u>Address Status</u>	<u>Street Suffix (Direction)</u>	<u>Unit Type</u>	<u>U</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>						7224		Wolverton	CT	Clar...	MD	21029				

Parcel (This section is not required.)

Search	Delete	Get Address & Owner	Set Primary											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Primary</u>	<u>Parcel #</u>	<u>Book</u>	<u>Page</u>	<u>Parcel</u>	<u>Parcel Area</u>	<u>Land Value</u>	<u>Improved Value</u>	<u>Exemption Value</u>	<u>Legal Description</u>	<u>Tract</u>
0 record(s) found.														

Owner (This section is not required.)

Search	Delete	Set Primary											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Primary</u>	<u>Name</u>	<u>Mail Address Line1</u>	<u>Mail Address Line2</u>	<u>Mail Address Line3</u>	<u>Mail City</u>	<u>Mail State</u>	<u>Mail Zip Code</u>	<u>Phone</u>	<u>Country/Region</u>	<u>!</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>			Phillip Leung	7224 Wolerton Ct.			Clarksville	MD	21029	301-854-9124	US	

Applicant \* (This section is required.)

Search As Owner As Lic. Prof As Contact

Single Entry Applicant Form

Type \*

Applicant

Primary

Yes

First Name \*  
Phillip

Middle Name

Last Name \*  
Leung

Home Phone (xxxx)xxx-xxxx

Organization Name

n/a
Mobile Phone (XXX XXX XXXX)
(301) 846-8596
E-mail
launpgd@msn.com
Business Phone (XXX XXX XXXX)

Preferred Channel

--Select--

Applicant Address

New Look Up Deactivate Remove

Table with columns: Contact Address ID, Address Type, Address Line 1, City, State, Zip, Primary, Recipient, Status. Below the table: 0 record(s) found.

Custom Fields

DATE TRACKING

Received Date, Due Date, Dates to Complete, Received by Food, Food Review Type, Equipment Specification Sheets Submitted, Equipment Specification Sheet, Received by Community Hygiene

Received by Well and Septic
10/5/2023

FACILITY INFORMATION

Name of Business (dba), Associated Building Permit Number, Owner Switch Date, Does the project include an Aquatic Facility..., Does the project include Private Septic..., Is this a Prototype Food Service Facility..., Facility Fax, Days of Operation, Does this project have a Building Permit?, Building Permit Issued Date, Non-Profit, Does the project include Private Well..., Does the project include Food Services..., Facility Phone, Facility Email

PROPERTY INFORMATION

Water Source, Sewage Disposal, Design Wastewater Flow, Permit Type

PLAT STATS

Total Number of buildable lots to be recorded, Total number of open space lots to be recorded, Total number of bulk parcels to be recorded, Total number of lots / parcels to be recorded, New buildable lots created, Date PLAT signed by Health Officer, PLAT Type

DEVELOPMENT PLANS

<b>Property Type</b> Residential	<b>Plan Version</b> Initial
<b>Signature Required</b> <input type="radio"/> Yes <input checked="" type="radio"/> No	<b>Engineer</b> 0 (Text)
<b>Number of paper copies</b> 0 (Number)	<b>Number of mylar copies</b> 0 (Number)
<b>Number of buildable lots created</b> 0 (Number)	<b>Number of non-buildable lots created</b> 0 (Number)
<b>Total Number of Lots</b> 0 (Number)	<b>Associated Plans</b>

WELL AND SEPTIC INTERNAL

<b>State Review Required</b> <input type="radio"/> Yes <input checked="" type="radio"/> No	<b>Coordinate State Review</b> <input type="radio"/> Yes <input checked="" type="radio"/> No
<b>Proposed Septic System Type</b> --Select--	

FOOD ESTABLISHMENT FACILITY

<b>Priority Assessment</b> --Select--	<b>Licensed Type</b> --Select--
<b>License Category</b> --Select--	

FOOD ESTABLISHMENT INFORMATION

<b>Hours of Operation</b> (Text)	<input type="checkbox"/> <b>Operating Seasonally Only</b>
<b>If Operating Seasonally, What is the start month?</b> (Text)	<b>Are pets allowed in a outdoor seating area?</b> <input type="radio"/> Yes <input type="radio"/> No
<b>Full Bar?</b> <input type="radio"/> Yes <input type="radio"/> No	

RESTAURANT AND FOOD SERVICE

<b>Food Service Facility Secondary Category</b> --Select--	<b>Total Seating Capacity</b> (Number)
<b>Number of Restrooms</b> (Number)	<b>Interior Restaurant Seating Capacity</b> (Number)
<b>Bar Seating Capacity</b> (Text)	<b>Outdoor Seating Capacity</b> (Text)
<b>Does the restaurant have outdoor seating</b> <input type="radio"/> Yes <input type="radio"/> No	

EQUIPMENT

<b>Evaluated non NSF, ANSI, CF or other standards</b> <input type="radio"/> Yes <input type="radio"/> No	<b>Description of Refrigeration Units</b>
<b>Number of Walk-In Refrigerator Units</b> (Number)	<b>Description of Walk-In Freezer Units</b> (Text)
<b>Is there a bulk ice machine available</b> <input type="radio"/> Yes <input type="radio"/> No	<b>Space Limitation</b>
<b>Number of Hand Sinks Available</b> (Number)	<b>Hood System</b> (Text)
<b>Ventless Equipment</b> (Text)	

PLUMBING

<b>Size and installation of the water heater?</b> (Text)	<b>Is there a grease interceptor or grease trap?</b> --Select--
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REFUSE AND RECYCLABLES

<b>Dumpsters Located on a impervious surface?</b> --Select--	<b>Will there be a grease receptacle?</b> --Select--
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1-3003 14  
April  
3/27/2024  
Finished Area  
of Box



