

Approved MPE  
3/28/25

Record Detail \* (This section is required.)

Permit Type	Permit Number	Opened Date
Building/Residential/Misc/Deck	B25000963	03/17/2025

Description of Work  
SFD/Construct a 24'x20' ground level deck with step.\*\*SUBJECT TO FIELD INSPECTION\*\*

[check spelling](#)

Online BP. Re-assigned. 3/8 3/14/25  
3/18/25

Address \* (This section is required.)

Search Reset Clear Get Parcel & Owner

Street #	Street Name	Street Type	
11711	JANNEY	CT	
Unit Type	Unit #	X Coordinate	Y Coordinate
-Select-		-76.91927	39.1704
City	State	Zip Code	Primary
CLARKSVILLE	MD	21029	Yes

Parcel \* (This section is required.)

Search Reset Clear Get Address & Owner

GIS ID *	Parcel	Parcel Area	Land Value	Improved Value	Exemption Value	Plan Area
914045	143	1.17	361700	716300	385710	RURAL

Legal Description  
LOT 11 1.170 A [ ]11711 JANNEY CT R/W [ ]EASTERN VIEW

[check spelling](#)

Block	Lot	Census Tract	Council Dist	Inspection Dist	Supervisor Dist	Map #	DAP Zone
9999	11	605102	4				
Plan Area	State Tax Id		Subdivision Name				
	1405425743						
Section	Area		Tax Map				
			41				
Grid	Zoning District		ADC Map				
41-8	RR-DEO		5052-C3				
SDP No.	Final Plan No.		WP File No.				
Record Plat No.	WS Contract No.		FDP No.		Primary		
12458					Yes		
Owner Occupied	Year Built		Historic District				
<input type="radio"/> Yes <input type="radio"/> No	1997		<input type="radio"/> Yes <input checked="" type="radio"/> No				
Historic District Registry No.	Stat Area		Flood Plain				
	5-15A		<input type="radio"/> Yes <input checked="" type="radio"/> No				
Building No							

Owner \* (This section is required.)

Search Reset Clear

Name \*  
Dey Me  
Address Line 1  
11711 JANNEY CT  
Address Line 2  
Address Line 3

Mail City  
CLARKSVILLE  
Mail State  
MD  
Mail Zip Code  
21029  
Phone  
443-766-0495  
Primary  
Yes  
E-mail

Cell Number                      Fax Number

**Professionals** (This section is not required.)

License #                      Business Name  
08010065612                      HNH CARPENTRY 01 65612  
License Type                      First Name                      Middle Name                      Last Name  
MHIC Ind                      HENRY                                           HOKE  
Primary                      Address Line 1  
Yes                      10622 STREAM EDGE DRIVE  
Address Line 2  
  
City                      State                      ZIP Code  
LAUREL                      MD                      20723-0000  
Phone 1                      Phone 2                      Fax  
4433245217                                           2405819955  
E-mail  
NOJOKEHOKE@AOL.COM

**Applicant** (This section is not required.)

Search      As Owner      As Lic. Prof      As Contact

Type                      First Name                      MI                      Last Name  
Applicant                      Henry                                           Hoke  
Relationship                      Full Name  
Applicant                      HENRY HOKE  
Primary                      Organization Name  
Yes                      HNH Deck and Porch  
Street Address  
10622 Stream Edge Dr., 10622 Stream Edge Dr.  
Address Line 2  
  
City                      State                      Zip Code  
Laurel                      MD                      20273  
Phone                      Cell                      Fax  
443-324-5217                      443-324-5217  
E-mail  
hnhdeckandporch@aol.com

**Addtl Info**

Est Construction Cost      Housing Units      Number of Buildings      Public Owned  
25000                      0                      0                      No  
Construction Type  
434 - Additions, Alterations and Conversions - Residential

**MISC PERMIT INFO**

**MISCELLANEOUS PERMIT INFORMATION**

Capital Project-No Fee      Capital Project Number      Fee Exempt      Roadside Tree Project Permit      Roadside Tree Project Permit #  
 Yes  No                      (Text)       Yes  No                       Yes  No                      (Text)  
Existing Use      Water      Sewage      Expiration Date  
SFD                      Private      Private      9/14/2025

Borrower/Client Debasish Sinha & Manashi Day

Property Address 11711 Janney Ct

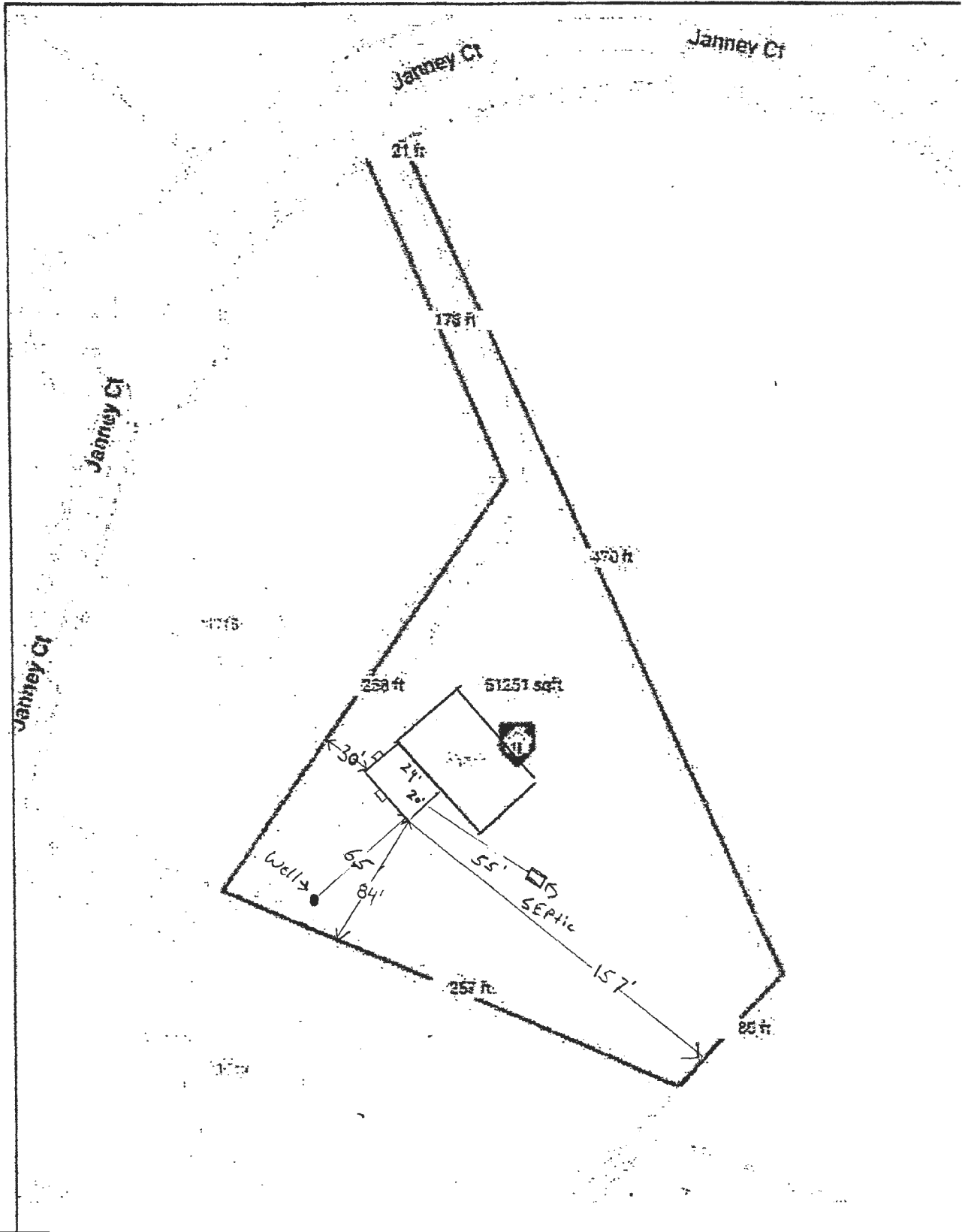
City Clarksville

County Howard

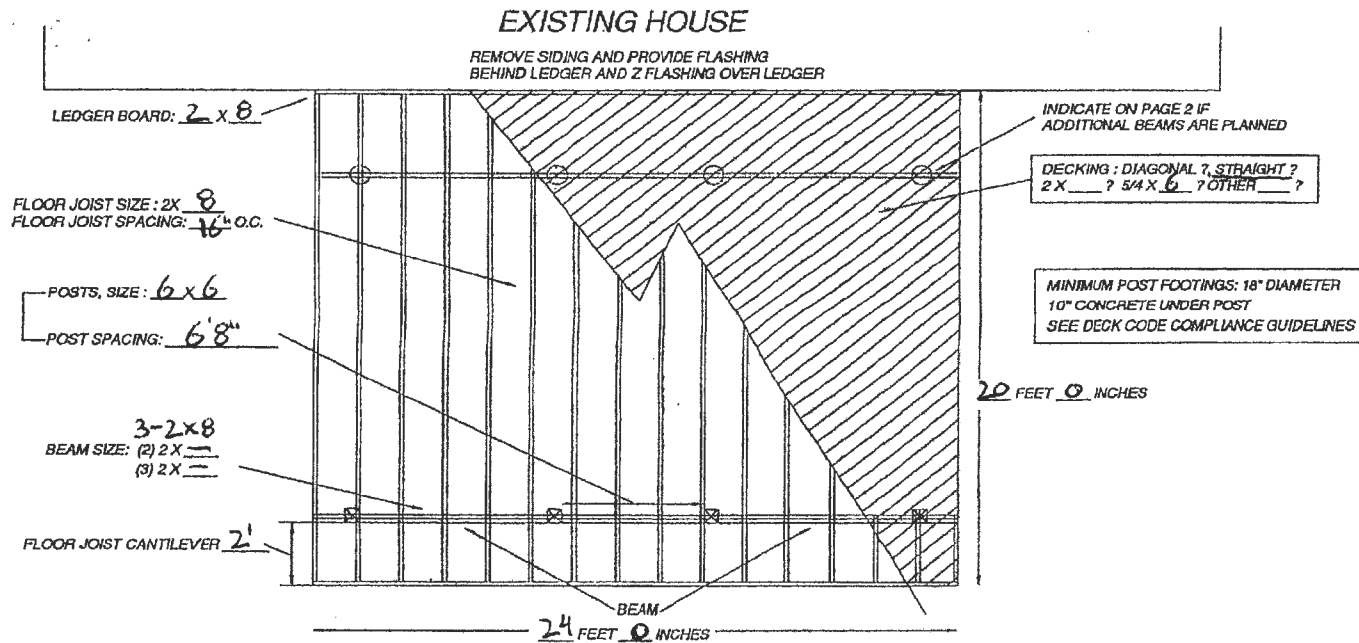
State MD

Zip Code 21029

Lender PN7458 - PNC Bank, N.A.



\*\*\* SEE DECK CODE COMPLIANCE GUIDELINES FOR MINIMUM SPECIFICATIONS

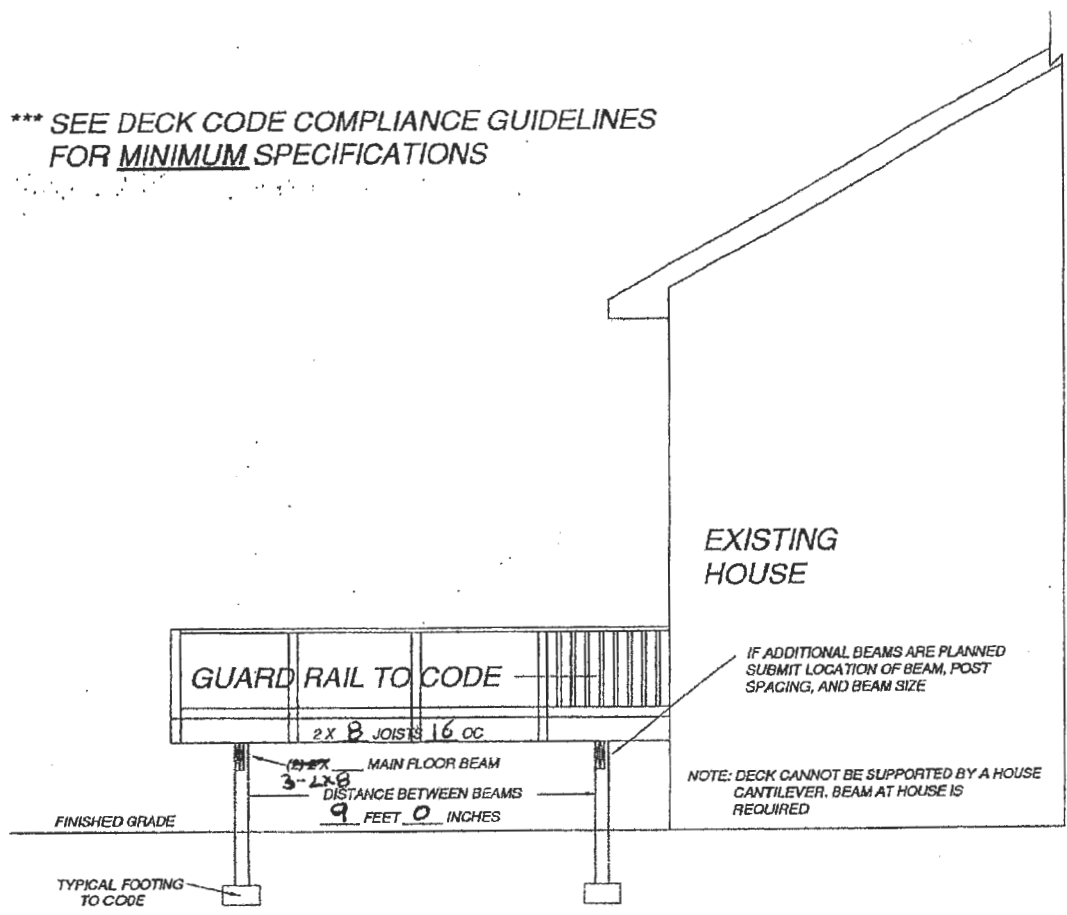


Sample ① DECK FLOOR FRAMING PLAN EXAMPLE

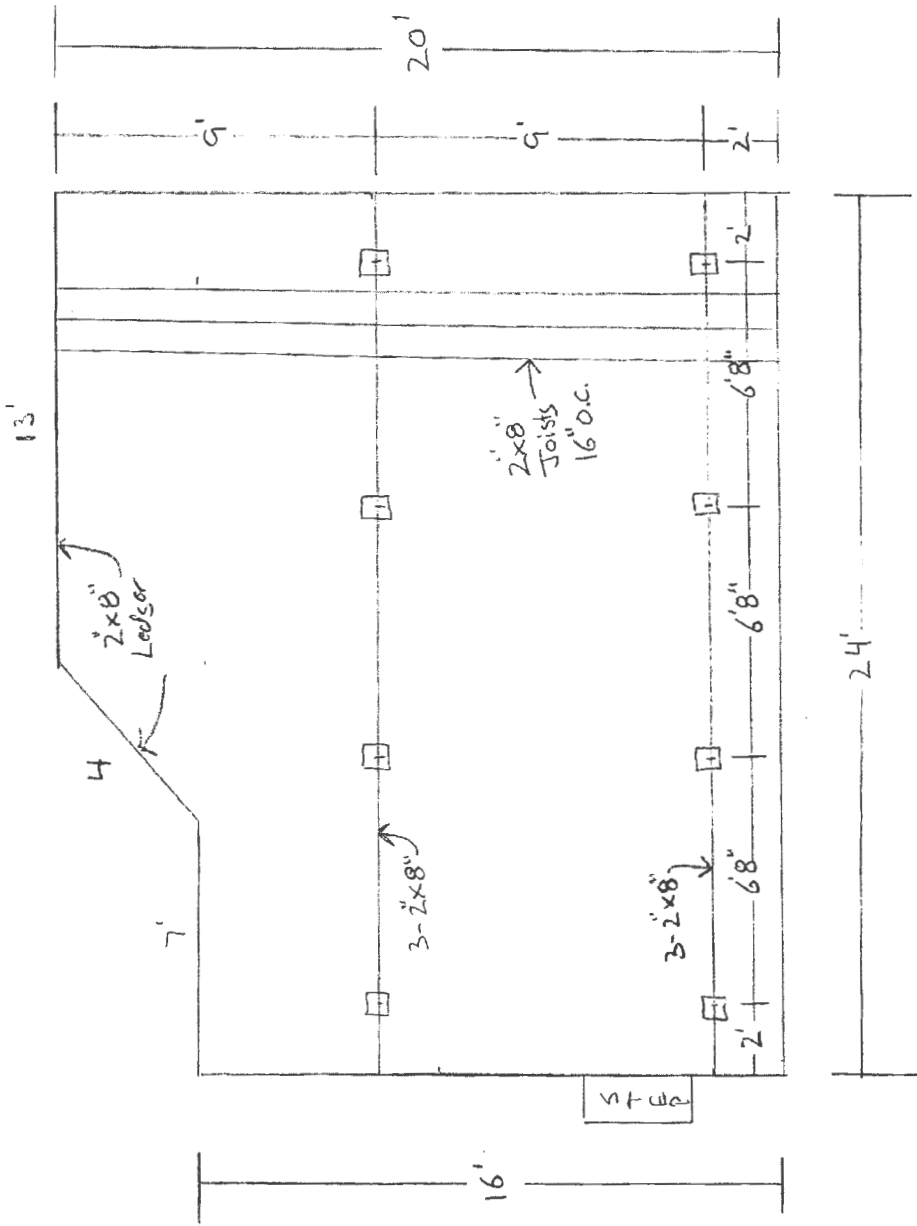
1 OF 2

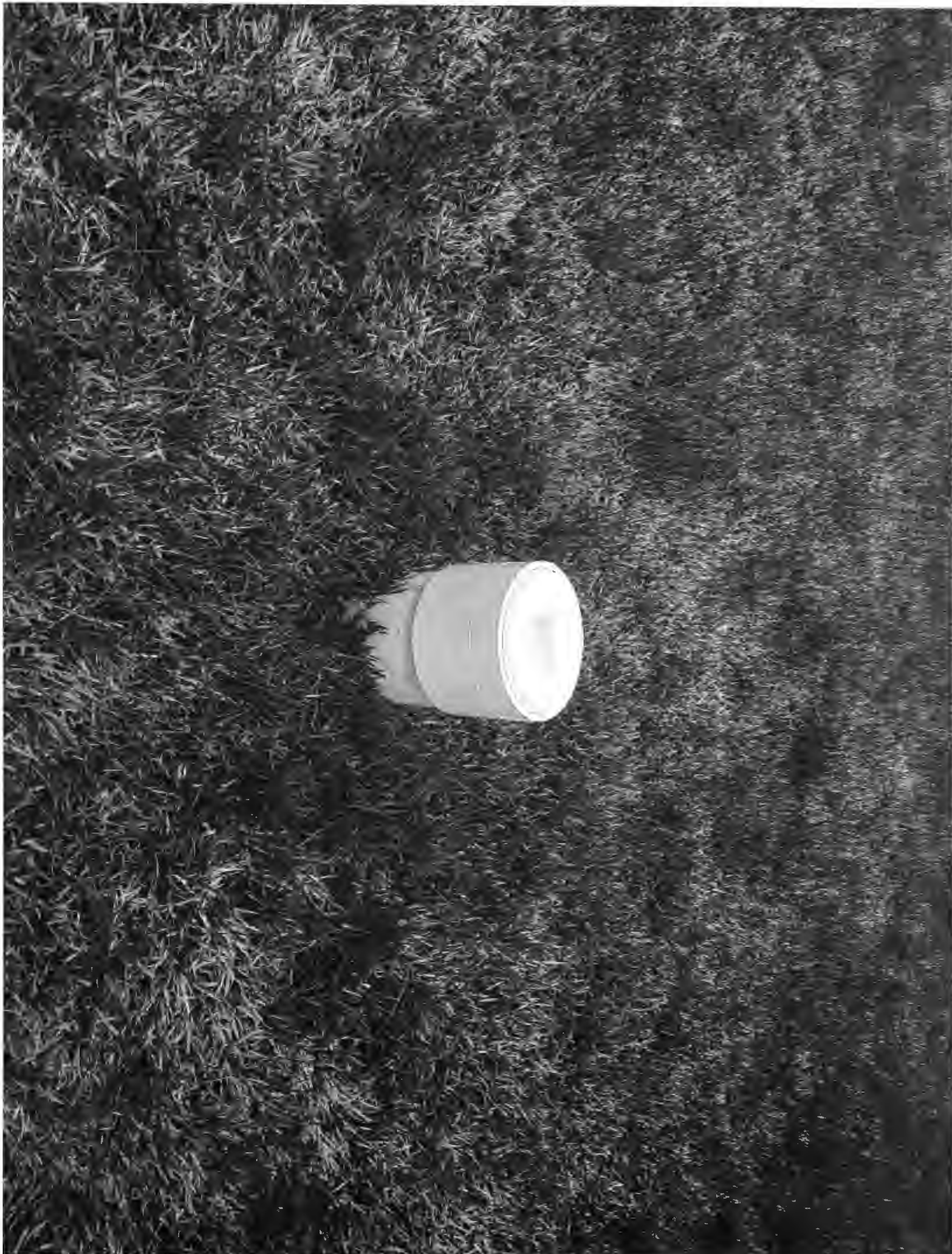
OPEN DECK

\*\*\* SEE DECK CODE COMPLIANCE GUIDELINES  
FOR MINIMUM SPECIFICATIONS



DECK CROSS SECTION





## Eshenbaugh, Melanie

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**From:** Silvast, Zackary  
**Sent:** Friday, March 28, 2025 1:41 PM  
**To:** Rink21029@yahoo.com  
**Cc:** Eshenbaugh, Melanie  
**Subject:** RE: 11711 Janney Court well & septic repairs/B25000963

**Follow Up Flag:** Follow up  
**Flag Status:** Flagged

Hello,

Conditional approval has been granted, please remain in steady communication with you're assigned Health Specialist. I will release the final inspection HOLD once you have met all the well and septic requirements. I am going to add a 90 day compliance window. Thank you and have a great weekend.

- Zack S.

**From:** Eshenbaugh, Melanie <MEshenbaugh@howardcountymd.gov>  
**Sent:** Friday, March 28, 2025 10:37 AM  
**To:** Rink21029@yahoo.com  
**Cc:** Silvast, Zackary <zsilvast@howardcountymd.gov>  
**Subject:** 11711 Janney Court well & septic repairs/B25000963

Good morning Manashi,

It was very nice meeting you on Wednesday. As previously discussed, I relayed the HD requirements to you during my site visit on 3/26 with your well cap and septic cleanout cap. My supervisor is willing to put a condition on the building permit for final inspection approval of your deck, pending the necessary repairs that we spoke about. Currently, the well cap/conduit are not secured to the casing and are missing bolts which can present a groundwater contamination risk. As a condition of final approval of your building permit (#B25000963), we kindly request that the repair of the well conduit/cap and septic cleanout be taken care of to ensure that these components are watertight and in compliance with water potability standards for the residence in accordance with Health Dept. code (code requirements in COMAR 26.04.04.25). Please submit to the Health Dept. office documentation of the well/septic repairs via email or mail as proof of completion of the work. Also, please forward the appointment scheduled for next month with the well company and we strongly recommend water testing for bacteria to ensure there is no potential health risk to the occupants of the property. Please contact the Community Hygiene program (410-313-1773) and someone can assist with scheduling water sampling if there is a desire to have the well water tested. Let me know if you have any questions and thank you kindly.

Melanie Eshenbaugh  
Bureau of Environmental Health  
Howard County Health Dept.  
8930 Stanford Blvd. Columbia, MD 21045  
[www.hchealth.org](http://www.hchealth.org)



