

Menu Save Reset Cancel Help

Record Detail * (This section is required.)

Case

EH-PLANS-26-0

Type

EnvHealth/Environmental Health/Plan Check/Application

Status

In Review

Opened Date

08/03/2026

Single Entry Edit-View Record Form

Application Name

B26002701

Description

SFD/RENOVATIONS TO EXISTING DECK TO INCLUDE NEW PVC SURFACE, RAILINGS, STEPS, REPLACE ANY ROT ON DECK FRAMING AS NEEDED**APPROVAL IS NOT FOR ANY STRUCTURAL DECK FRAMING - IF REPLACEMENT OF ANY FRAMING MEMBERS WILL REQUIRE A DECK FRAMING PLAN - SUBJECT TO FIELD INSPECTION**

Total Invoiced

0.00

Total Paid

0.00

Balance

0.00

Assigned to Department Current Department

Well and Septic Program

Assigned to Staff Current User

Zack Silvest

Address * (This section is required.)

New	Search	Delete	Set Primary									
☐ Primary	<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>	
☐ ☒	11640		Quarter...	DR	Ellic...	MD	21042					

Parcel (This section is not required.)

Search	Delete	Get Address & Owner		Set Primary								
☐ Primary		<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										
☐ Primary		<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>I</u>	
☐ ☒		Derek Murphy				Ellicott City	MD	21042		US		

Applicant * (This section is required.)

Search As Owner As Lic. Prof As Contact

Single Entry Applicant Form

Type *

Applicant

Primary

Yes

Full Name

Approved
MNE 8/5/26

Online BP. 8/3/26

First Name *

Michael

Middle Name

Last Name *

Arneson

Organization Name *

Cedarbrook Deck & Patio Inc.

Mobile Phone ((xxx)xxx-xxxx)

(301) 703-8728

Home Phone ((xxx)xxx-xxxx)

E-mail

sams@cedarbrookinc.com

Business Phone ((xxx)xxx-xxxx)

Preferred Channel

--Select--

Applicant Address

New	Look Up	Deactivate	Remove							
☐	Contact Address ID	Address Type	Address Line 1	City	State	Zip	Primary	Recipient	Status	
0 record(s) found.										

Custom Fields

DATE TRACKING

Received Date

8/3/2026

Due Date

8/17/2026

Dates to Complete

14

(Number)

Received by Food

Food Review Type

--Select--

Equipment Specification Sheets Submitted

Equipment Specification Sheet

Received by Community Hygiene

Received by Well and Septic

8/3/2026

FACILITY INFORMATION

Name of Business (dba) *

n/a

(Text)

Associated Building Permit Number

(Text)

Owner Switch Date

Does the project include an Aquatic Facility such as a Public Pool? If Yes, forward to CH Program.

☐ Yes ☐ No

Does the project include Private Septic? If Yes, forward to WS Program.

☐ Yes ☐ No

Is this a Prototype Food Service Facility? If Yes, refer to State.

☐ Yes ☐ No

Facility Fax

0

(Text)

Days of Operation

0

(Text)

Does this project have a Building Permit?

☐ Yes ☐ No

Building Permit Issued Date

☐ Non-Profit

Does the project include Private Well? If Yes, forward to WS Program.

☐ Yes ☐ No

Does the project include Food Services? If Yes, forward to FP Program.

☐ Yes ☐ No

Facility Phone

0

(Text)

Facility Email

0

(Text)

PROPERTY INFORMATION

Water Source

--Select--

Design Wastewater Flow

(Number)

Sewage Disposal

--Select--

Permit Type

--Select--

PLAT STATS

Total Number of buildable lots to be recorded

0 (Number)

Total number of bulk parcels to be recorded

0 (Number)

New buildable lots created

0 (Number)

PLAT Type

--Select--

Total number of open space lots to be recorded

0 (Number)

Total number of lots / parcels to be recorded

0 (Number)

Date PLAT signed by Health Officer

Date Preliminary Plan Signed by HO

☐ Extension Granted**DEVELOPMENT PLANS**

Property Type

Residential

Plan Version

Initial

Signature Required

☐ Yes ☐ No

Engineer

0

(Text)

Number of paper copies

0 (Number)

Number of mylar copies

0

(Number)

Number of buildable lots created

0 (Number)

Number of non-buildable lots created

0

(Number)

Total Number of Lots

0 (Number)

Associated Plans

WELL AND SEPTIC INTERNAL

State Review Required

☐ Yes ☐ No

Coordinate State Review

☐ Yes ☐ No

Proposed Septic System Type

--Select--

FOOD ESTABLISHMENT FACILITY

Priority Assessment

--Select--

Licensed Type

--Select--

License Category

--Select--

FOOD ESTABLISHMENT INFORMATION

Hours of Operation

(Text)

☐ Operating Seasonally Only

If Operating Seasonally, What is the start month?

(Text)

Are pets allowed in a outdoor seating area?

☐ Yes ☐ No

Full Bar?

☐ Yes ☐ No**RESTAURANT AND FOOD SERVICE**

Food Service Facility Secondary Category

--Select--

Total Seating Capacity

(Number)

Number of Restrooms

(Number)

Interior Restaurant Seating Capacity

(Number)

Bar Seating Capacity

(Text)

Outdoor Seating Capacity

(Text)

Does the restaurant have outdoor seating

☐ Yes ☐ No**EQUIPMENT**

Evaluated non NSF, ANSI, CF or other standards

☐ Yes ☐ No

Description of Refrigeration Units

Number of Walk-In Refrigerator Units

(Number)

Description of Walk-In Freezer Units

(Text)

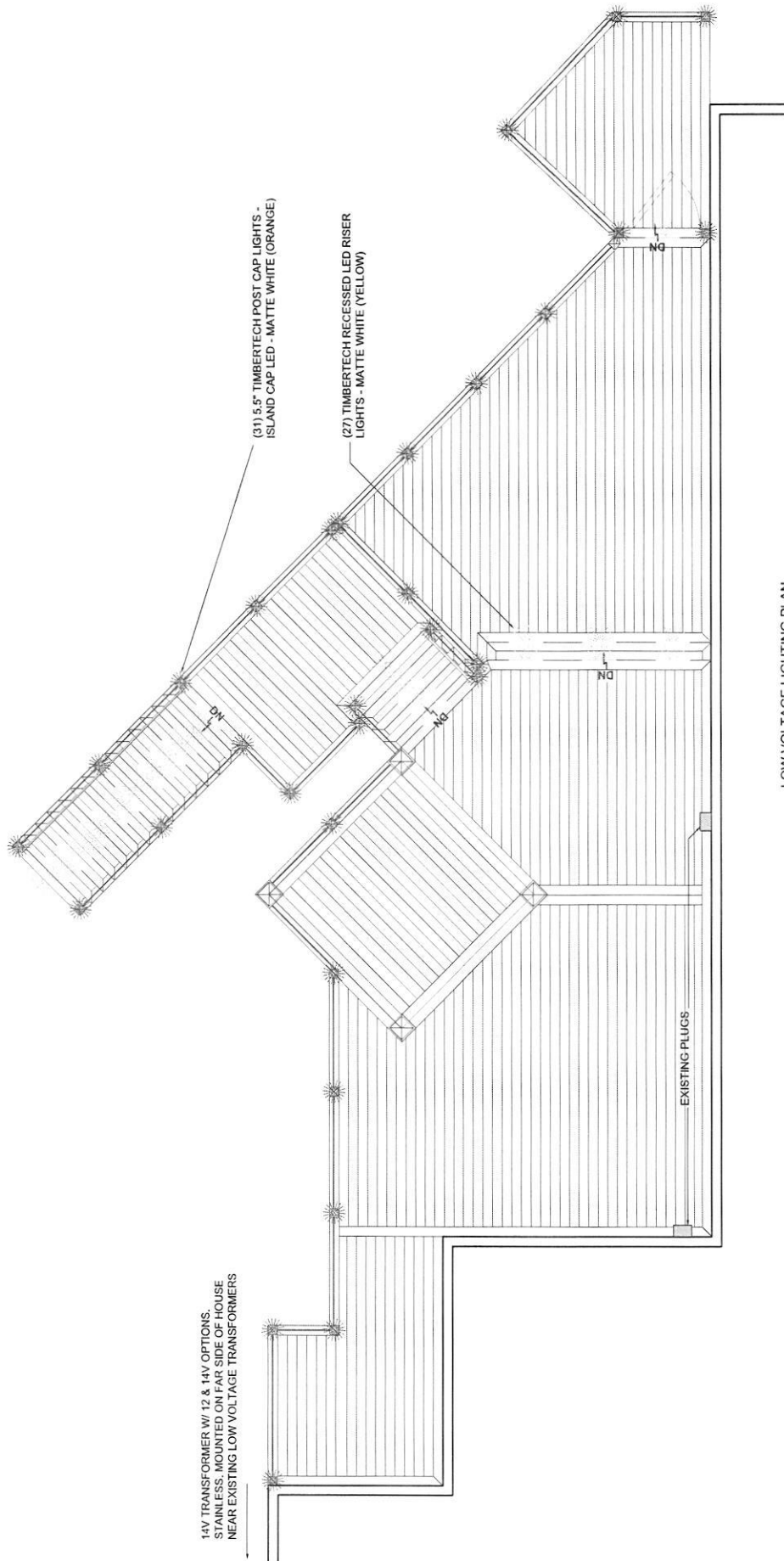
Is there a bulk ice machine available

☐ Yes ☐ No

Space Limitation

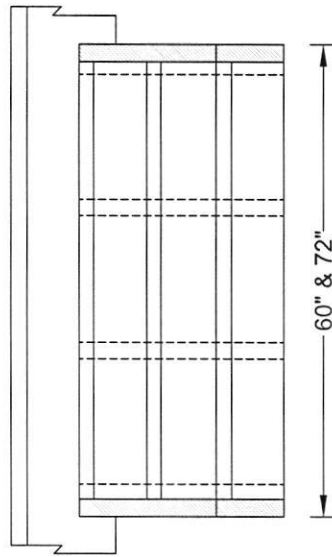
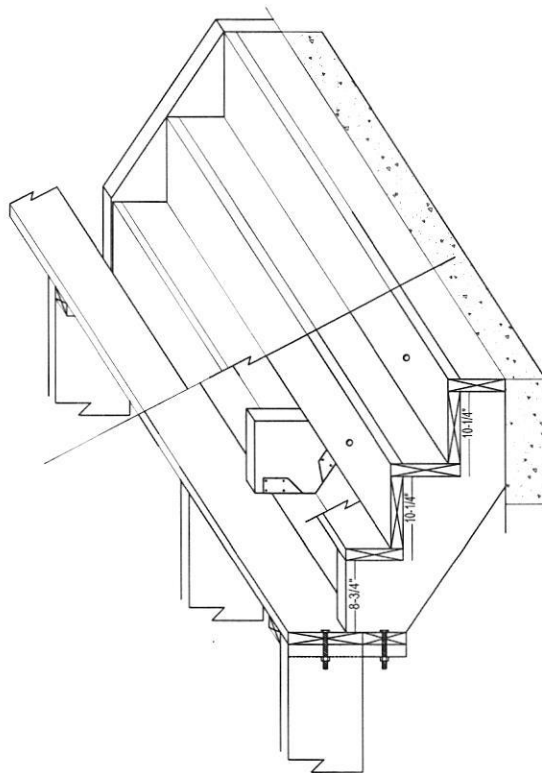
Number of Hand Sinks Available

Hood System



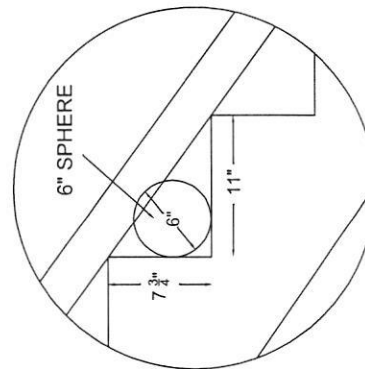
LOW VOLTAGE LIGHTING PLAN
SCALE: 3/16" = 1'-0"

	MHIC # 131359 Mt. Airy, MD 21771 301-703-8728	Owner: Murphy Residence 11640 Quarterfield Drive Ellicott City, MD 21042	County: Howard	Page: Low Voltage Lighting Plan	Estimator: David Boswell	Drawn By: S.S	Scale: 3/16"=1'-0"	Date: 07-31-26	Sheet # 4 of 4
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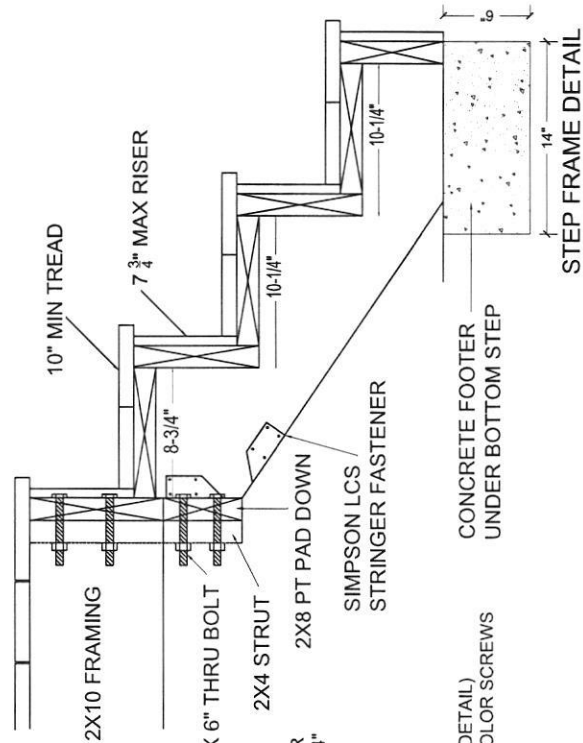


NOTES:

- STEP FRAMING WILL BE 2X12 @ 16" O.C
- STEP DOWN BLOCKING W/ (4) THROUGH BOLTS THROUGH EACH DROP DOWN STRUT
- 2X8 CONTINUOUS RISER HEADER
- 2X10 BRIDGING FOR TREAD SUPPORT
- 3/4" MIN WEEP HOLE @ 16 O.C 2X10 BRIDGING
- (1) SIMPSON LCS STRINGER FASTENER PER/STRINGER
- TOP TREAD OF STRINGER FRAME WILL BE CUT @ 8-3/4"
- ALL OTHER TREADS WILL BE CUT @ 10-1/4"
- RISER HEIGHT WILL BE DETERMINED IN FIELD
- RISER HEIGHT WILL NOT EXCEED 7-1/2"
- TREAD WIDTH IS PRE-DETERMINED @ 10-1/4"
- PVC TRIM (SEE DETAIL)
- PVC FASTENED W/ CORTEX- WHITE
- COMPOSIT TRIM WILL HAVE SMALL BOTTOM RIP (SEE DETAIL)
- COMPOSIT TRIM WILL BE FASTENED W/ CORTEX OR COLOR SCREWS
- COMPOSIT TRIM MUST BE PRE-DRILLED
- (4) 3/4" X 6" THROUGH BOLTS PER/STRUT
- LSCZ (1) EACH STRINGER



STRINGER
CLEARANCE DETAIL



- RESURFACE EXISTING DECK WITH TIMBERTECH ADVANCED PVC MATERIAL
-CONSTRUCT NEW STAIRS W/ PRESSURE TREATED LUMBER (SEE STAIR
DETAILS PAGE FOR DETAILS)
-REPLACE RAILING POSTS & RAILING W/ NEW COMPOSITE MATERIAL
-ADD NEW FASCIA ON OUTSIDE OF DECK IN WHITE PVC MATERIAL
-WRAP EXISTING BEAMS & SUPPORT POSTS UNDER DECK W/ PVC MATERIAL
-ADD LOW VOLTAGE LIGHTING TO RAILING POSTS & STEP RISERS

*DECK FRAME ON PATIO & DECORATIVE
 GRAVEL: WRAP DROP BEAMS UNDER
 MAIN DECK IN WHITE AZEK PVC & WRAP
 POSTS IN WHITE 8" AZEK PVC POST
 WRAPS W/ BASE KIT ON BOTTOM
 ACCENT WRAP XI BED KIT

REMAINING SUPPORT POSTS UNDER
DECK: WRAP POSTS IN WHITE 8" AZEK
PVC POST WRAPS (NO BASE KIT)

—WRAP CONFIGURATION OF POSTS
—UNDER DECK CLOSE TOGETHER TO BE
—DETERMINED AFTER REMOVING
—EXISTING WRAP W/ 8" AZEK PVC POST
—WRAP W/ BASE KIT BOTTOM ACCENT
—WRAP XL BED KIT

Owner:

e
d Drive
21042

County:
Howard

Page:
Deck & Rail
Plan

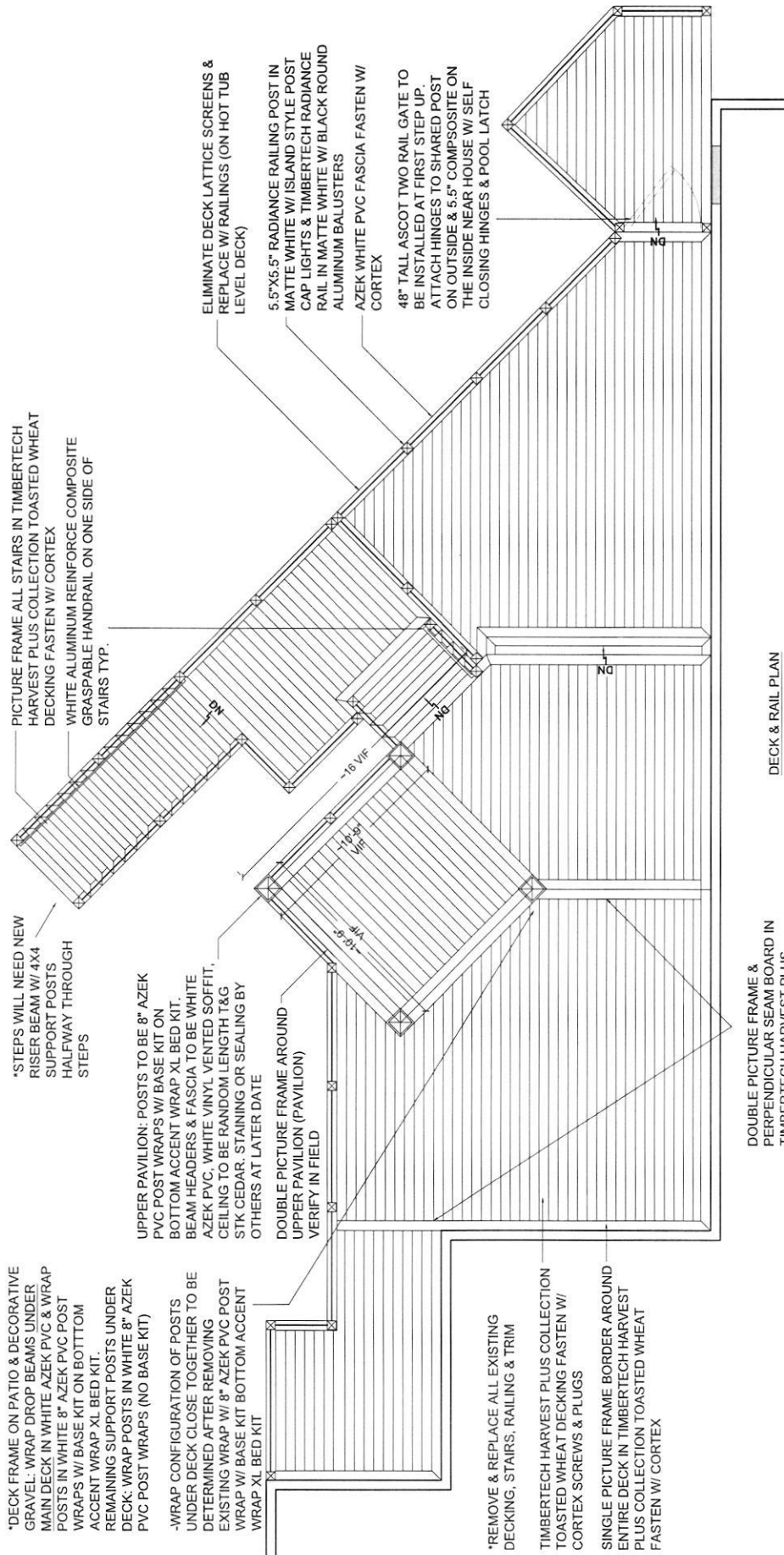
Estimator:
David Boswe

Drawn By: S.S

Scale:

Date: 07-31-26

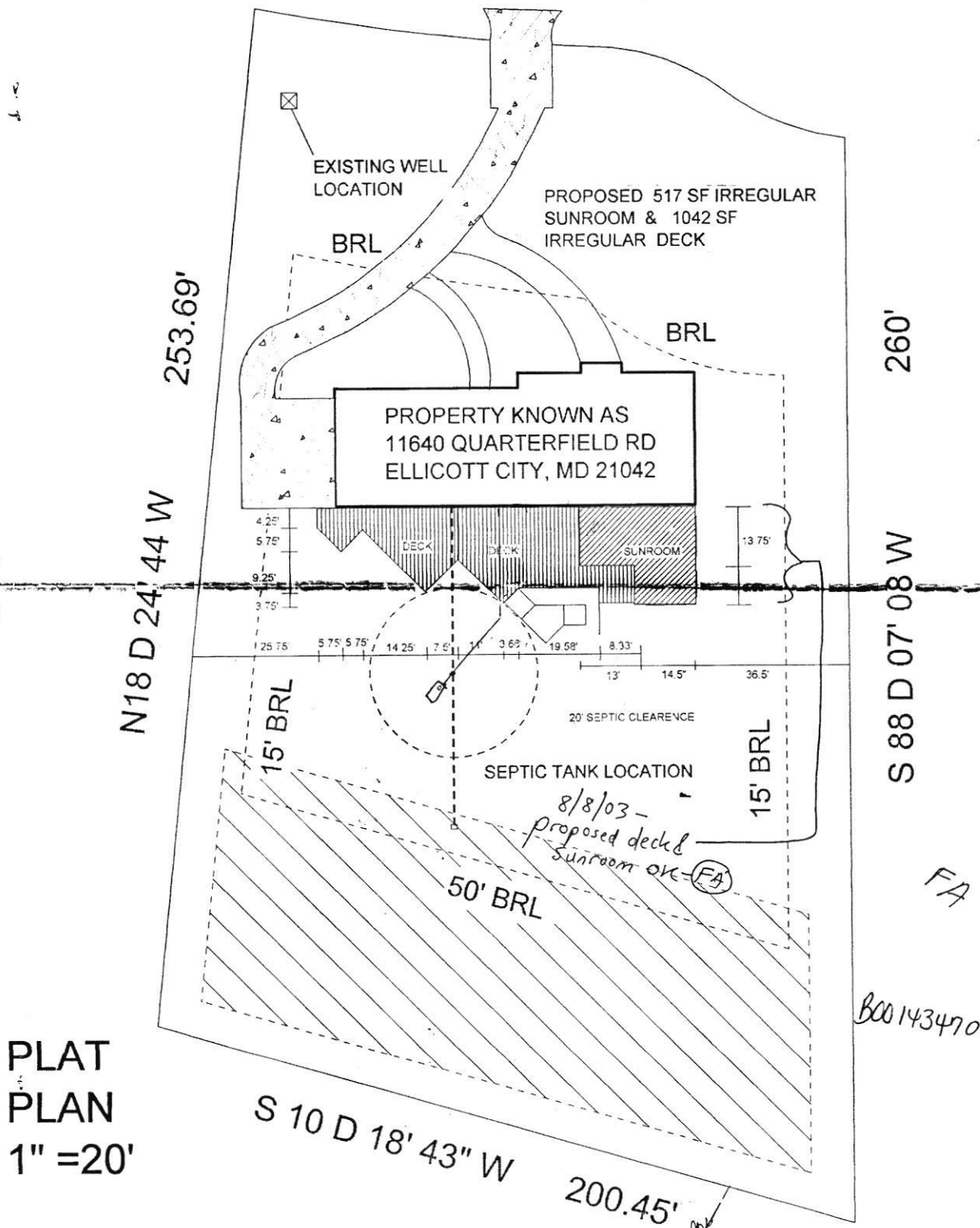
Sheet #
1 of 4



DECK & RAIL PLAN

DOUBLE PICTURE FRAME &
PERPENDICULAR SEAM BOARD IN
TIMBERTECH HARVEST PLUS
COLLECTION TOASTED WHEAT DECKING

QUARTERFIELD RD.



PLAT
PLAN
1" = 20'

MENTON
SUNROOM

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without expressed written approval

The Baywood Design/Build Group, Inc.
5550 Sterrett Place Suite 100
Columbia, MD 21044
410.995.6363 Fax 410.992.3211

1/8" = 1'-0"

REVISED
7-19-03

6/28/03

3-17-97
p.m. CO.
and later afternoon

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

TAX ID# 03-320251

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

XXXXXXX 313-2640

INDEXED

P 58016B

A 48835

DISTRICT 3rd

DATE 3/11/97

DATE SYSTEM APPROVED 3-24-97

INSPECTOR KM

Fogle's Septic Clean, Inc.

IS PERMITTED TO INSTALL ☒ ALTER ☐

ADDRESS 558 Obrecht Road, Sykesville, Maryland 21784 PHONE 795-5674

SUBDIVISION Quarterfield LOT 19 ROAD 11640 Quarterfield Road

PROPERTY OWNER Thomas and Janie Menton

ADDRESS **BUILDING PERMIT SIGNED**

SEPTIC TANK CAPACITY 171750 GALLONS **AND RETURNED**

NUMBER OF BEDROOMS 6

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 270

TRENCHES - Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 4 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Place the distribution box 185 feet down the right lot line and 90 feet off this same lot line. Run trenches on contour in both directions.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 9/4/96 DKS

PLANS APPROVED BY Mark Rifkin/Amy McMillen DATE 08/26/96

COVER NO WORK UNTIL INSPECTED AND APPROVED

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS, 90° ELBOWS NOT ACCEPTABLE.

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

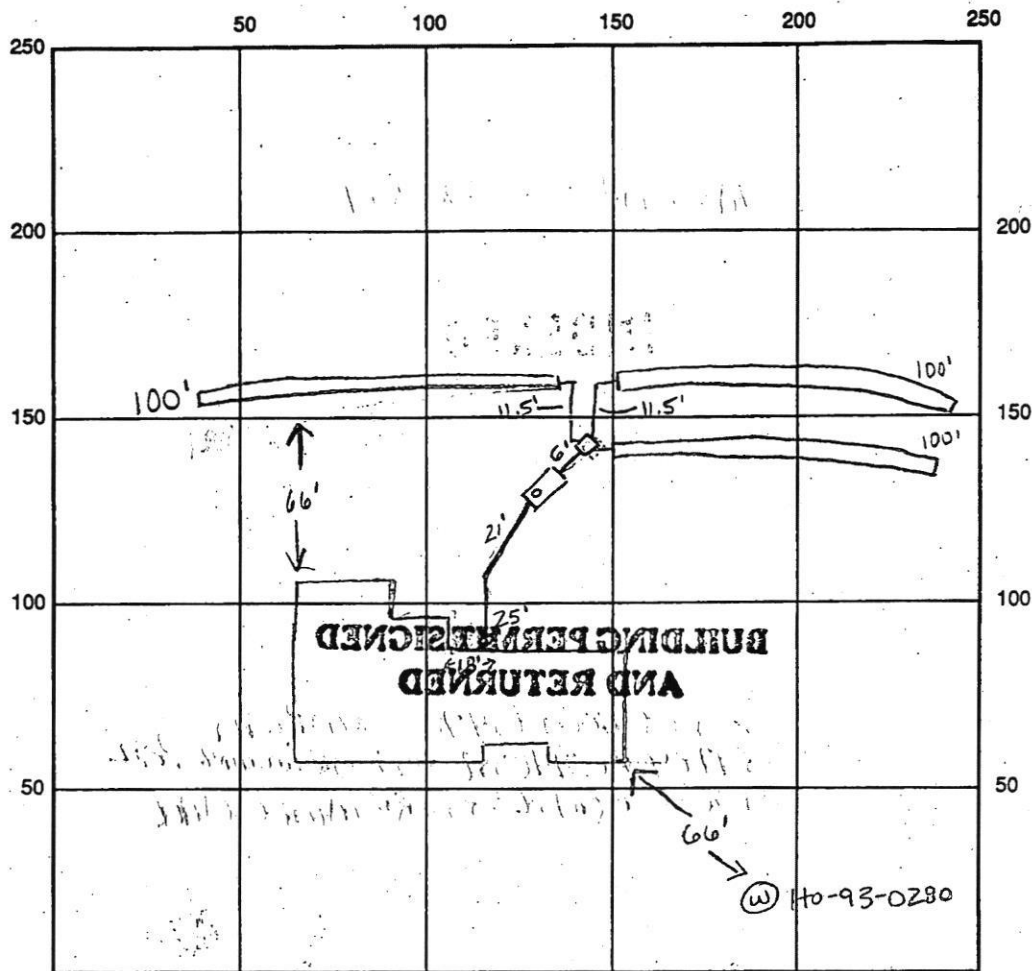
PERMIT VOID AFTER TWO YEARS

NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON. CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

A 48835



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE Quarterfield Drive

SEPTIC TANK LEVEL OK, 1750 gallons CLEANOUTS 1 on tank, 1 at house

DISTRIBUTION BOX LEVEL OK, baffle in

DRAIN FIELD/TITLE DEPTH 8 FT. TRENCH WIDTH 2 FT. INLET DEPTH 4 FT.

EFFECTIVE GRAVEL DEPTH 4 FT. TOTAL LENGTH 3 x 100 FT. → 300

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 1200 SQ. FT.

DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA — SQ. FT.

REMARKS: 3-17-97 OK to continue, leaving ends of trenches open, OK to cover up
to distribution box, house conn. made KM

3-18-97 (12:40pm) OK to cover 1st two trenches and continue KM

3-18-97 (2:00pm) leave ends of 3rd trench open for final inspection KM

3-24-97 OK to cover all work KM

3-25-97 WPI OK to cover well line, 2 piece watertight cap, casing 1' above grade KM

DATE SYSTEM APPROVED 3-24-97

INSPECTOR Kimberly Maule

P.A. 4.5' below grade KM