

Record Detail * (This section is required.)

Approved
MVE 8/13/22

Permit Type	Permit Number	Opened Date
Building/Residential/Garage/Detached	B26001790	05/29/2026

Description of Work
SFD/ CONSTRUCT 30' X 32' DETACHED GARAGE FOR EQUIPMENT STORAGE, 2 STORY, Slab on Grade, 3R, 0FB, 1HB, 0FP, OTHER STRUCTURE = Detached Garage, 0BR, PORCH/DECK = Rear Porch, ENERGY METHOD = Prescriptive Method, **NOT APPROVED AS AN ADU OR FOR SLEEPING ROOMS**

[check spelling](#)

Address * (This section is required.)

Search Reset Clear Get Parcel & Owner

Street #	Street Name	Street Type
12402	STELLA	DR
Unit Type	Unit #	X Coordinate
--Select--		-76.94122
		Y Coordinate
		39.18015
City	State	Zip Code
FULTON	MD	20759
	Primary	
	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
1101645	205	25	358500	910400	551900	RURAL

Legal Description

IMPSPAR B 25.003 A BUIL[]12402 STELLA DR[]FULTON MANOR II

[check spelling](#)

Block	Lot	Census Tract	Council Dist	Inspection Dist	Supervisor Dist	Map #	DAP Zone
	PAR B	605102	4				
Plan Area	State Tax Id	Subdivision Name					
	1405595842	Fulton Manor					
Section	Area	Tax Map					
		40					
Grid	Zoning District	ADC Map					
40-6	RR-DEO	5051-K2					
SDP No.	Final Plan No.	WP File No.					
	F-07-047						
Record Plat No.	WS Contract No.	FDP No.					
22479-2248							
Owner Occupied	Year Built	Historic District					
☐ Yes ☒ No	2015	☐ Yes ☒ No					
Historic District Registry No.	Stat Area	Flood Plain					
	5-15A	☐ Yes ☒ No					
Building No							

Owner (This section is not required.)

Search Reset Clear

Name *

PFAU I

Address Line 1

12402 STELLA DR

Address Line 2

Address Line 3

Mail City

FULTON

Mail State

MD

Mail Zip Code

20759

Phone

443-526-4597

Primary

Yes

E-mail

willowspringsmanor@gmail.com

Cell Number

Fax Number

4435264597

Professionals (This section is not required.)

License # *	Business Name		
License Type *	First Name	Middle Name	Last Name
--Select--			
Primary	Address Line 1		
Yes	Address Line 2		
	City	State	ZIP Code
	Phone 1	Phone 2	Fax
	E-mail		

Applicant (This section is not required.)

Search As Owner As Lic. Prof As Contact

Type *	First Name	MI	Last Name
Applicant	MARY	T	PFAU
Relationship	Full Name		
Applicant	PFAU MARY THERESE		
Primary	Organization Name		
No			
	Street Address		
	12402 STELLA DR		
	Address Line 2		
	City	State	Zip Code
	FULTON	MD	20759
	Phone	Cell	Fax
	443-526-4597	443-526-4597	
	E-mail *		
	willowspringsmanor@gmail.com		

Contact (This section is not required.)

Search As Owner As Lic. Prof As Contact

Type	First Name	MI	Last Name
Contact	MARY	T	PFAU
Relationship	Full Name		
Applicant	PFAU MARY THERESE		
Primary	Organization Name		
Yes			
	Street Address		
	12402 Stella Dr		
	Address Line 2		
	City	State	Zip Code
	FULTON	MD	20759
	Phone	Cell	Fax
	443-526-4597	443-526-4597	
	E-mail		
	willowspringsmanor@gmail.com		

Addtl Info

Est Construction Cost *	Housing Units *	Number of Buildings *	Public Owned
100000	0	0	No
Construction Type			
434 - Additions, Alterations and Conversions - Residential			

RESIDENTIAL ADDITION INFORMATION

RESIDENTIAL ADDITION INFORMATION

Capital Project-No Fee *

☐ Yes ☒ No

Capital Project Number

(Text)

Fee Exempt *

☐ Yes ☒ No

Roadside Tree Project Permit

☐ Yes ☒ No

Roadside Tree Pr

No of Stories * 2 (Text) Foundation * Slab on Grade Basement * N/A No of Rooms * 3 (Text) Full Baths * 0 (Number) Ha 1

Model * SFD/ CONSTRUCT 30' X 32' DETACHED GARAGE FOR EQUIPMENT STORAGE
[check spelling](#)

Other Structure * Detached Garage Bedrooms * 0 (Number) Porch Deck * Rear Porch No of Fireplaces * 0 (Number) Type of Fireplace --Select--
W & S Fees Paid Water * Private Sewage * Privat Utilities * Electric Heating System * Electric Sprinkler System * NFPA #13D
1st Floor Width 32 FT (Number) 1st Floor Depth 30 FT (Number) 2nd Floor Width 34 FT (Number) 2nd Floor Depth 30 FT (Number) Basement Width FT (Number) Basement Depth FT (Number) Height
Total Square Footage * 1474 SQFT (Number) Occupiable Square Footage * 616 SQFT (Number) Affordable Housing Funding * N/A Foundation Measurement 30 x 34 (Text)
Walls 2x6 16oc (Text) Roof gambrel/asj (Text) Change In Use ☐ Yes ☒ No Grading Permit No (Text) Senior Housing ☐ Yes ☐ No MIHU Outside Downtown Columbia ☐ Yes ☐ No
Additional Description Info **NOT APPROVED AS AN ADU OR FOR SLEEPING ROOMS**
[check spelling](#) Expiration Date 12/22/2026 MIHU Required Units (Num)

GREEN INFORMATION

Goal Level --Select-- Actual Level --Select-- Leed Registration Number (Text) Date of Leed Certification

STORM WATER MANAGEMENT

Green Roofs A1 ☐ Yes ☐ No Permeable Pavements A2 ☐ Yes ☐ No Reinforced Turf A3 ☐ Yes ☐ No Disconnection of Rooftop Runoff N1 (Number)
Sheetflow to Conservation Areas N3 ☐ Yes ☐ No Rainwater Harvesting M1 (Number) Submerged Gravel Wetlands M2 (Number) Landscape Infiltration
Dry Wells M5 (Number) Micro Bioretention M6 (Number) Rain Gardens M7 (Number) Swales M8 (Number)
PSWM Certification Received in CID on

Submit Cancel



NOTES

with an applied building code, documents, regulations and standards. The building code is a set of rules that govern the design, construction and use of buildings. It is a legal document that is enforced by the local government. The building code is a set of rules that govern the design, construction and use of buildings. It is a legal document that is enforced by the local government.

3.0 CONCRETE/FOUNDATIONS

10) MINIMUM SPECIFIED COMPRESSIVE STRENGTH @ 28 DAYS	LOCATION OF CONCRETE	FL. OF SLAB
BASEMENT WALLS AND FOUNDATIONS WITH		2400

1990	1990
BASEMENT WALLS, EXTERIOR FOUNDATION WALLS AND OTHER WORK EXPEND TO ADDRESS	DECK WOOD, CURBS, WALKS, PATIOS, PORCHES, STEPS/STAIRS AND LIGHTED GARAGE SLABS

STRUCTURAL DRAINAGE SYSTEM, TO THE SITE SOIL AND GROUND CONDITIONS.

[illegible]

CONCRETE REINFORCING AT THE
AND WOOD FRAME CONSTRUCTION, OVER
BECKS, PONCHES, AND THE ARE AT TACED
SECTION AT ROOF TO WALL AND ROOF TO
ROOF VALLEYS, AT ALL ROOF PENETRATIONS,
AT ALL ROOF PENETRATIONS, AT ALL ROOF PENETRATIONS

AND MOBILE VEHICLES AT VARIOUS CITIES 1-88

FOR SHALL BE RESPONSIBLE FOR CALCULATING
OF ATTIC TO ALLOW FREE AIR FLOW

[illegible]

COMPONENT	REQUIRED VALUE
-----------	----------------

2024 IECC E	
COMPLIANCE PART	
BATHING WALLS:	R 10 CONT RADIANT OR R 13 GIFTY
SLAB	R 10, T 10/11
CORR. SPACE WALLS	R 10 CONT RADIANT OR R 13 GIFTY

COMMENTS	REASON
Q	Q
Q 1.5. AND THIS IS THE SMITHS' ALLOWANCE FOR ELEC. WORK 5.2	
Q PARCELO - 0.30 MAAS, 50-00 - 0.40 MAAS	
Q PARCELO - 0.15 MAAS, 50-00 - 0.40 MAAS	
Q 1.5. AND THIS IS THE SMITHS' ALLOWANCE FOR ELEC. WORK 5.2	
Q PARCELO - 0.30 MAAS, 50-00 - 0.40 MAAS	
Q PARCELO - 0.15 MAAS, 50-00 - 0.40 MAAS	

2	3	4
---	---	---

22	8403

OPTION 1	
CATEGORY	DESCRIPTION
1	RECORD 100
2	RECORD 101
3	RECORD 102
4	RECORD 103
5	RECORD 104
6	RECORD 105
7	RECORD 106
8	RECORD 107
9	RECORD 108
10	RECORD 109
11	RECORD 110
12	RECORD 111
13	RECORD 112
14	RECORD 113
15	RECORD 114
16	RECORD 115
17	RECORD 116
18	RECORD 117
19	RECORD 118
20	TOTAL

OR

OPTION 2	
CATEGORY	DESCRIPTION
1	RECORD 200
2	RECORD 201
3	RECORD 202
4	RECORD 203
5	RECORD 204
6	RECORD 205
7	RECORD 206
8	RECORD 207
9	RECORD 208
10	RECORD 209
11	RECORD 210
12	RECORD 211
13	RECORD 212
14	RECORD 213
15	RECORD 214
16	RECORD 215
17	RECORD 216
18	RECORD 217
19	RECORD 218
20	TOTAL

OR

OPTION 3	
CATEGORY	DESCRIPTION
1	RECORD 300
2	RECORD 301
3	RECORD 302
4	RECORD 303
5	RECORD 304
6	RECORD 305
7	RECORD 306
8	RECORD 307
9	RECORD 308
10	RECORD 309
11	RECORD 310
12	RECORD 311
13	RECORD 312
14	RECORD 313
15	RECORD 314
16	RECORD 315
17	RECORD 316
18	RECORD 317
19	RECORD 318
20	TOTAL

OR

OPTION 4	
CATEGORY	DESCRIPTION
1	RECORD 400
2	RECORD 401
3	RECORD 402
4	RECORD 403
5	RECORD 404
6	RECORD 405
7	RECORD 406
8	RECORD 407
9	RECORD 408
10	RECORD 409
11	RECORD 410
12	RECORD 411
13	RECORD 412
14	RECORD 413
15	RECORD 414
16	RECORD 415
17	RECORD 416
18	RECORD 417
19	RECORD 418
20	TOTAL

OR

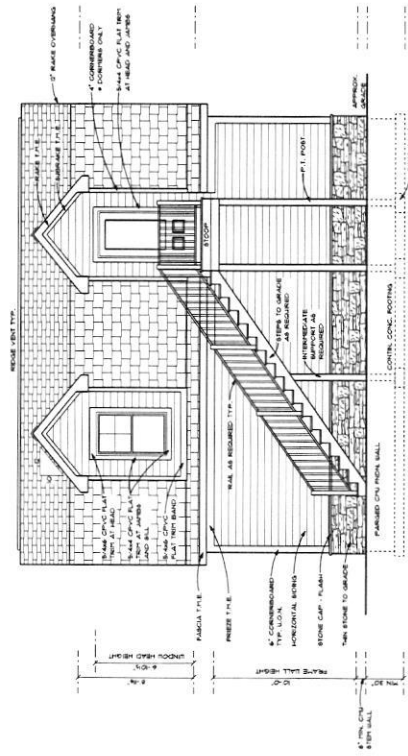
OPTION 5	
CATEGORY	DESCRIPTION
1	RECORD 500
2	RECORD 501
3	RECORD 502
4	RECORD 503
5	RECORD 504
6	RECORD 505
7	RECORD 506
8	RECORD 507
9	RECORD 508
10	RECORD 509
11	RECORD 510
12	RECORD 511
13	RECORD 512
14	RECORD 513
15	RECORD 514
16	RECORD 515
17	RECORD 516
18	RECORD 517
19	RECORD 518
20	TOTAL

OR

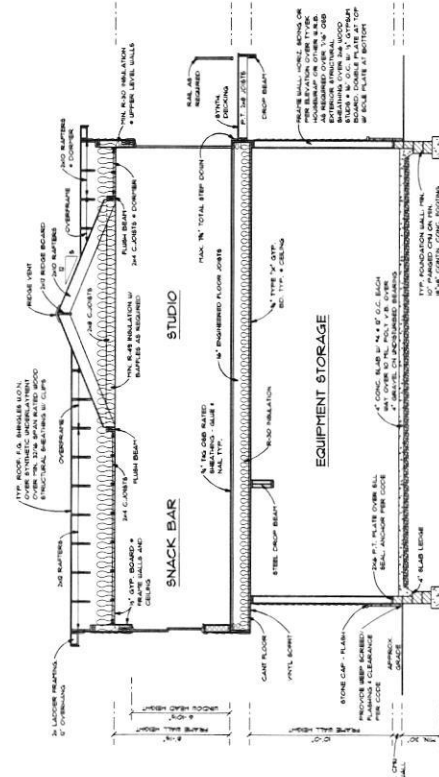
OPTION 6	
CATEGORY	DESCRIPTION
1	RECORD 600
2	RECORD 601
3	RECORD 602
4	RECORD 603
5	RECORD 604
6	RECORD 605
7	RECORD 606
8	RECORD 607
9	RECORD 608
10	RECORD 609
11	RECORD 610
12	RECORD 611
13	RECORD 612
14	RECORD 613
15	RECORD 614
16	RECORD 615
17	RECORD 616
18	RECORD 617
19	RECORD 618
20	TOTAL

OR

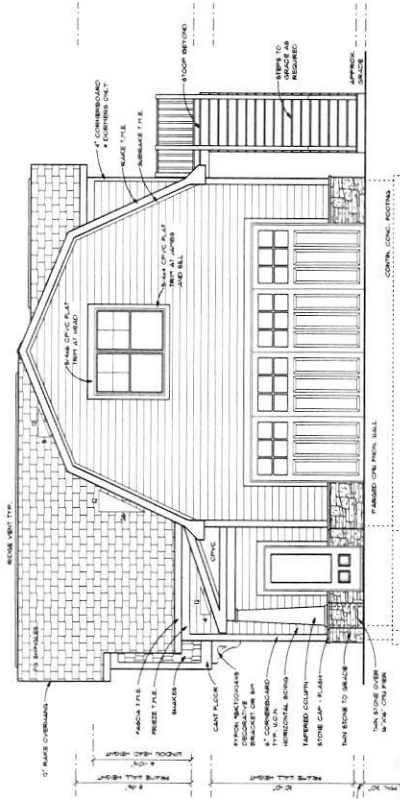
OPTION 7	
CATEGORY	DESCRIPTION
1	RECORD 700
2	RECORD 701
3	RECORD 702
4	RECORD 703
5	RECORD 704
6	RECORD 705
7	RECORD 706
8	RECORD 707
9	RECORD 708
10	RECORD 709
11	RECORD 710
12	RECORD 711
13	RECORD 712
14	RECORD 713
15	RECORD 714
16	RECORD 715
17	RECORD 716
18	RECORD 717
19	RECORD 718
20	TOTAL



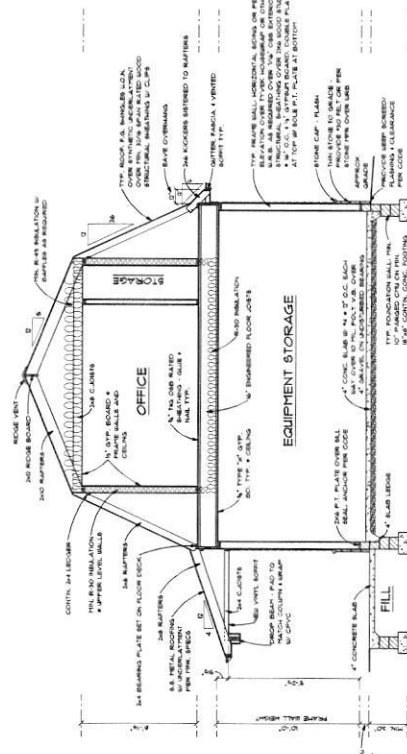
Rear Elevation
SCALE: 1/4" = 1'-0"



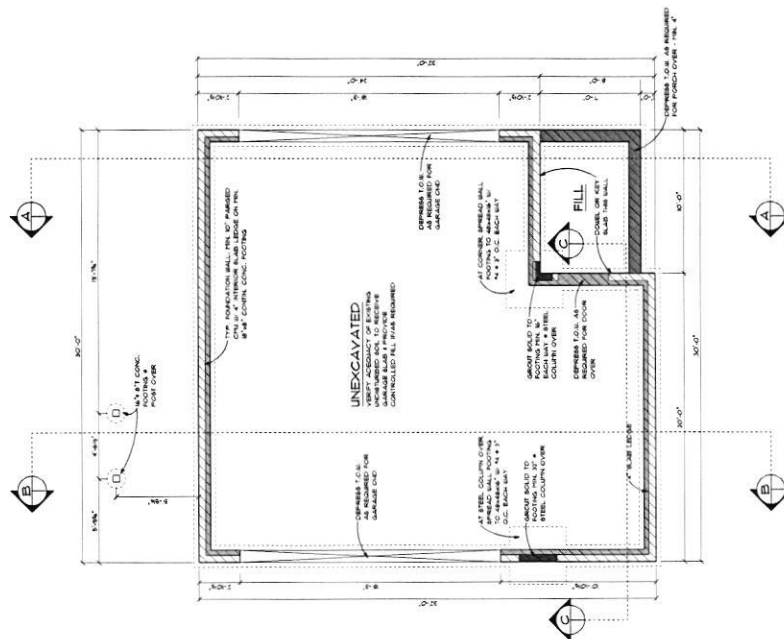
Section B
SCALE: 1/4" = 1'-0"



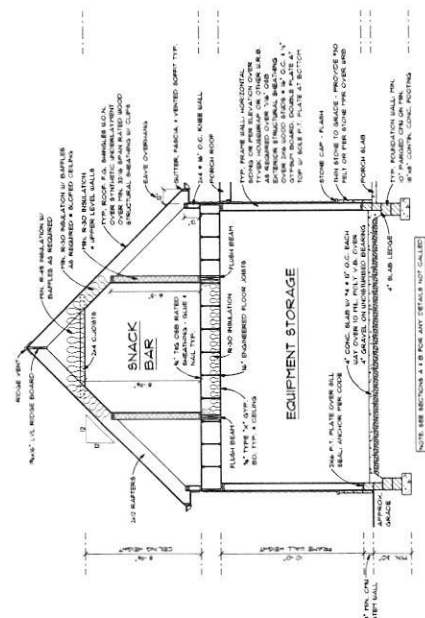
Right Elevation
SCALE: 1/4" = 1'-0"



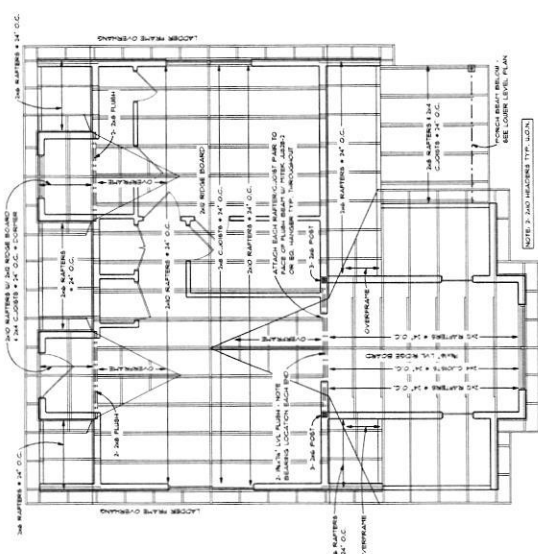
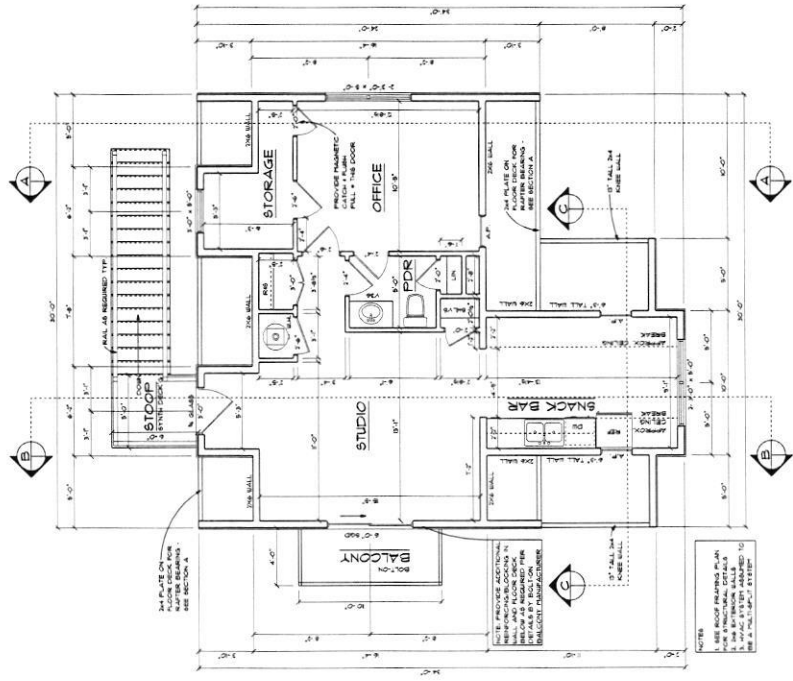
Section A
SCALE: 1/4" = 1'-0"



Foundation Plan
SCALE: 1/4" = 1'-0"



Section C
SCALE: 1/4" = 1'-0"

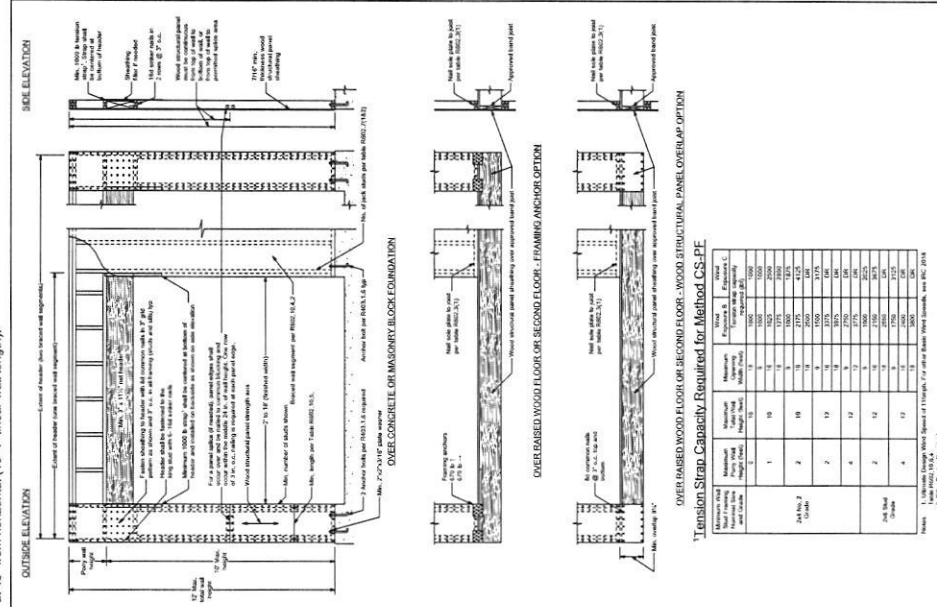


NOTES

Methods WSP & CS-WSP: Min. 7/16" OSB Wood Structural Panel sheathing attached to framing with 6d at 6" o.c. at panel edges and 12" o.c. at intermediate framing members.
 Note: At Braced Wall Lines incorporating Continuously Sheathed bracing methods (CS-WSP & CS-PF), all exterior walls along the Braced Wall Line must be fully sheathed with min 7/16" OSB Wood Structural Panel sheathing fastened per IRC 2018 Tables R602.3(1), R602.3(2), and R602.3(3).

Method GB: Min. 1/2" gypsum board applied to each side of framing with adhesive and Type S or W screws or nails per IRC 2018 Table R702.3.5 @ 7" o.c. at panel edges and all intermediate framing members.

Method LB: Simpson WBG/WBC straps installed in an "X" pattern on one face of wall, fasten with 2-10d nails at top and bottom plates and 1-3d nail per stud. 5' tall walls to use either WB100/WB100C installed at 60" min horizontal (4-8' vertical wall length) or WB125/WB125C installed at 45" from horizontal (6'-10' vertical wall length). 10' tall walls to use WB143C installed at 45" from horizontal (10'-1' linear wall length).

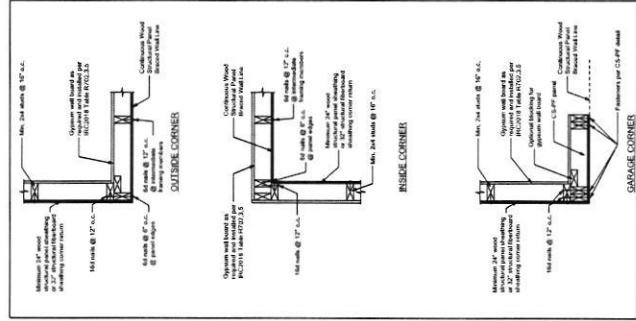
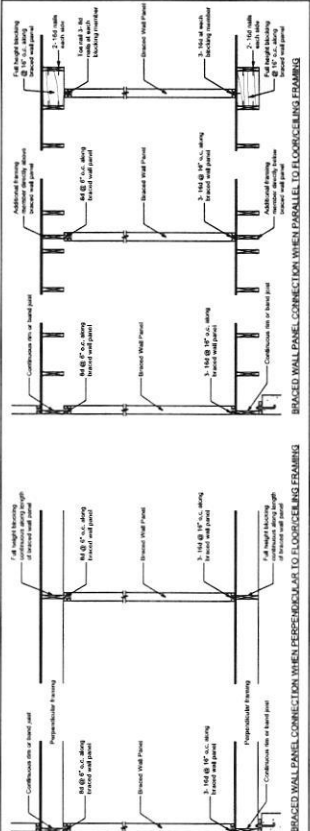


Continuous Portal Frame

NOT TO SCALE

Braced Wall Panel Connections to Floor and Ceiling Framing

NOT TO SCALE



Corner Framing Details

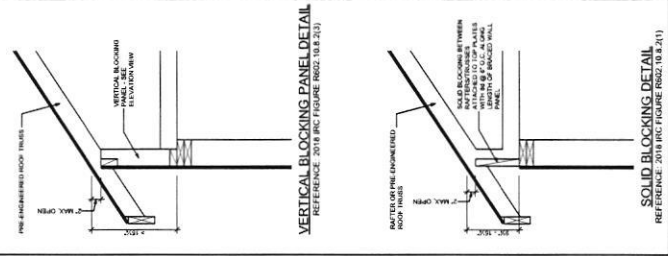
NOT TO SCALE

Standard Wall Bracing Details

RONALD JOHNSTON AND ASSOCIATES, ARCHITECTS
 11407 BARLEY FIELD WAY
 MARRIOTTSTOWN, MD 21104 • 410.442.3667

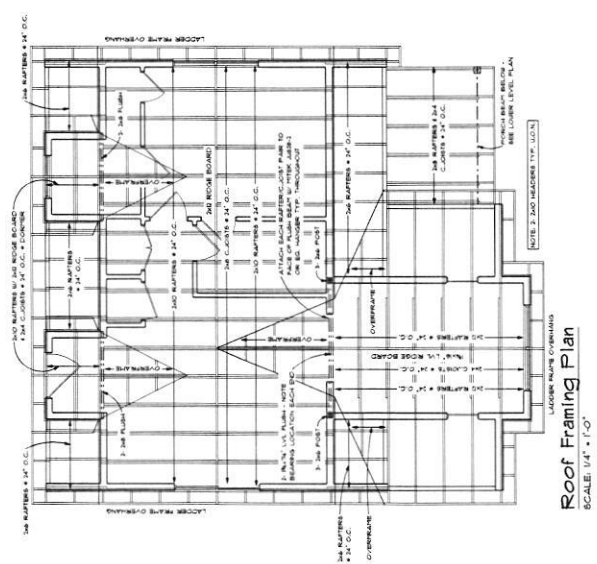
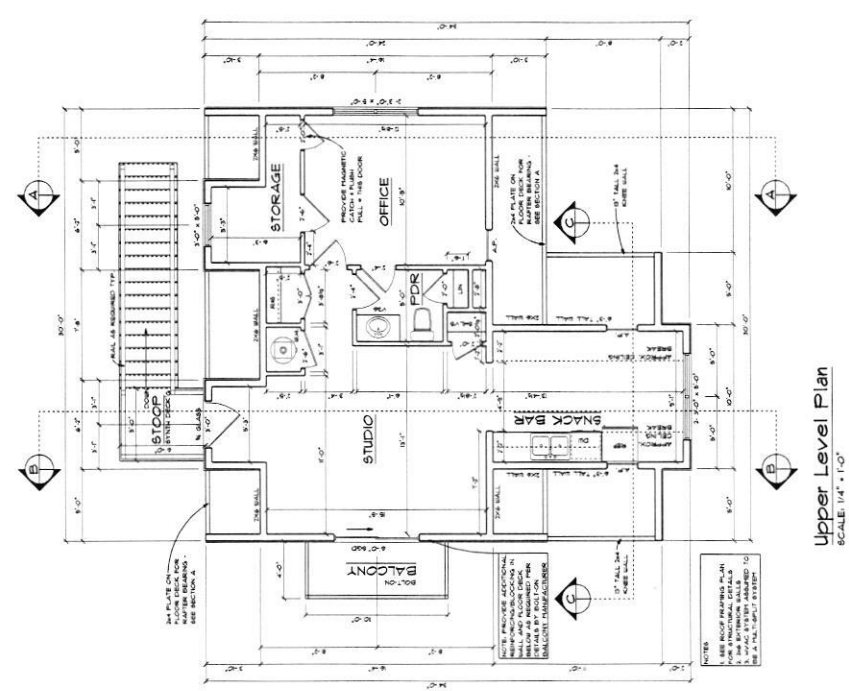
PROFESSIONAL CERTIFICATION

DATE: 07/12/2024



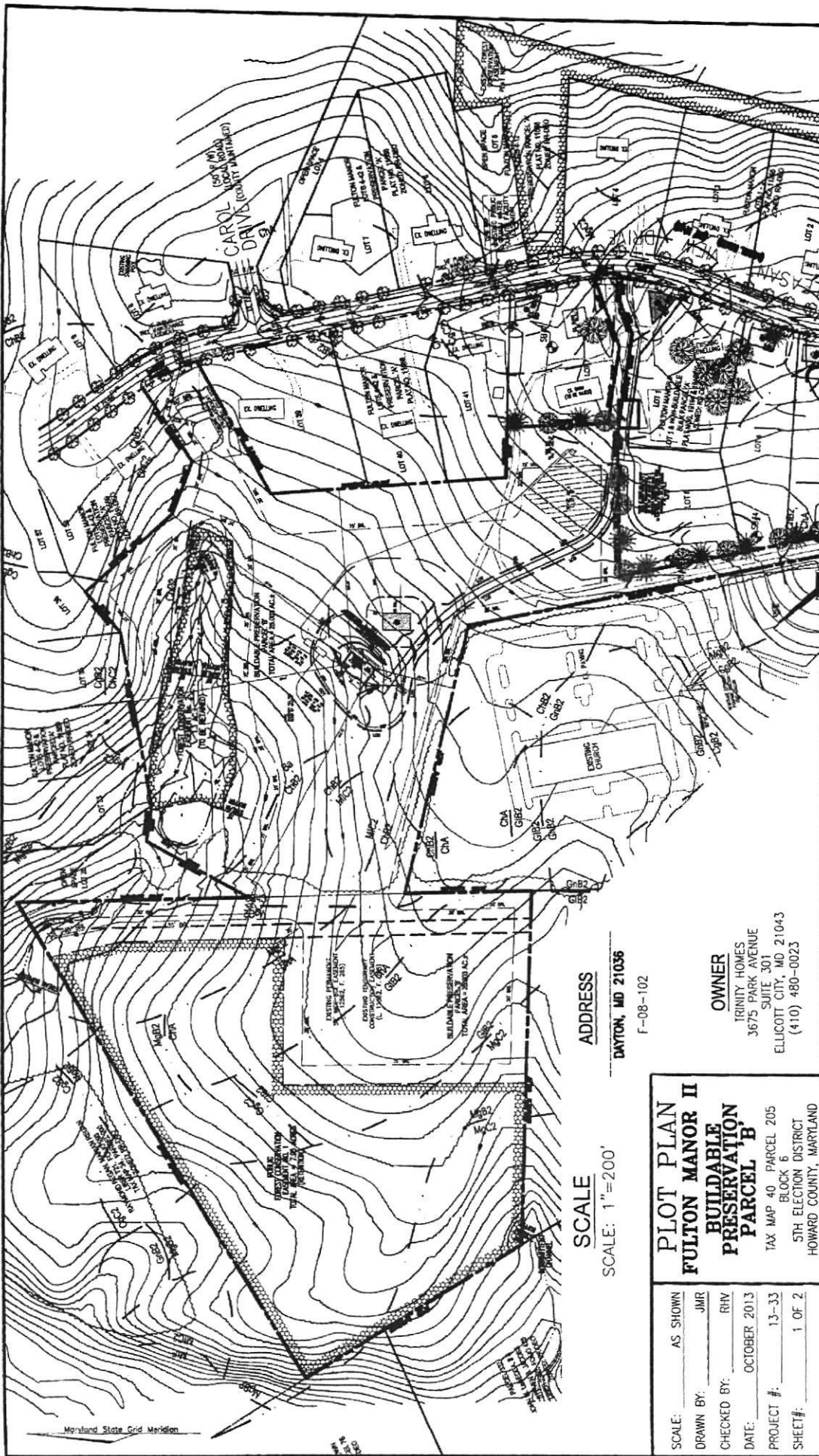
Roof Blocking Details

NOT TO SCALE



Water Service to be 1" Black Rolly
42" deep situated across drive way w/ 2" 3x4s





SCALE: 1"=200'

ADDRESS

DAYTON, MD 21036

F-08-102

OWNER

TRINITY HOMES
3675 PARK AVENUE
SUITE 301
ELLICOTT CITY, MD 21043
(410) 480-0023

PLOT PLAN FULTON MANOR II BUILDABLE PRESERVATION PARCEL B

TAX MAP 40 PARCEL 205
BLOCK 6
5TH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND

SCALE: AS SHOWN
DRAWN BY: JMR
CHECKED BY: RRV
DATE: OCTOBER 2013
PROJECT #: 13-33
SHEET#: 1 OF 2

Prepared by



Howard County
Health Department

Bureau of Environmental Health
7178 Gateway Drive Columbia, MD 21046
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

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

RECEIPT DATE: 7/10/14

ONSITE SEWAGE DISPOSAL SYSTEM

P 554535

INSTALLATION

APPROVAL DATE: 3/12/15 *(KMD)*

PERMIT CONSTRUCTION

A _____

PROPERTY ADDRESS: 12402 Stella Drive

SUBDIVISION: Fulton Manor II

LOT: P/B

TAX ID: _____

CONTRACTOR: Freedom Septic Clean Inc.

EMAIL: _____

CONTRACTOR ADDRESS: 2809 Liberty Road, Eldersburg, MD 21784

PHONE: 410-795-2947

PROPERTY OWNER: Trinity Quality Homes

EMAIL: _____

OWNER ADDRESS: 3675 Park Avenue Ste 301, Ellicott City, MD 21043

PHONE: 443-324-9806

BAT UNIT MODEL: Norweco

BAT UNIT SIZE: 600GPD

PUMP CHAMBER CAPACITY (GALLONS): _____

PUMP SIZE: _____

NUMBER OF BEDROOMS: 4

HOUSE SQ. FT. _____

APPLICATION RATE: 0.8

DISTRIBUTION SYSTEM: GRAVITY FED ☒

LOW PRESSURE DOSED ☐

TRENCHES:	LINEAR FEET REQUIRED: <u>214'</u>	INLET DEPTH: <u>SEE BAT PLAN</u> <u>4'</u>
	TRENCH WIDTH: <u>2'</u>	MAXIMUM BOTTOM DEPTH: <u>8'</u>
	MINIMUM SPACE BETWEEN TRENCHES: <u>SEE BAT PLAN</u>	EFFECTIVE AREA BEGINNING DEPTH: <u>6'</u>
LOCATION:	PER APPROVED SITE PLAN. SEWAGE DISPOSAL AREA AND BAT UNIT LOCATION MUST BE STAKED BY LICENSED SURVEYOR PRIOR TO PRE-CONSTRUCTION INSPECTION.	
NOTES:	Set BAT unit per plan.	

ISSUED BY: Jeff Williams

ISSUE DATE: _____

EXPIRATION DATE: 7/10/15

NOTE: CONTRACTOR MUST SCHEDULE A PRE-CONSTRUCTION INSPECTION PRIOR TO BEGINNING ANY INSTALLATION

NOTE: CONTRACTOR MUST SCHEDULE AN INSPECTION AND GAIN APPROVAL OF ALL COMPONENTS PRIOR TO COVERING

NOTE: STONE MUST BE APPROVED BY HEALTH DEPARTMENT AND GRAVEL TICKET MUST BE AVAILABLE FOR REVIEW.

NOTE: WATERTIGHT SEPTIC TANKS REQUIRED

NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE AT LEAST 100 FEET DOWNGRADE FROM ANY WATER WELL

NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS

NOTE: AN ELECTRICAL PERMIT IS REQUIRED FOR INSTALLATION OF ANY ELECTRICAL COMPONENTS OF THE SYSTEM

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

PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT.

CALL 410-313-1771 TO SCHEDULE INSPECTIONS.

NOT TO SCALE

See As-Built Drawing
On Separate Sheet

ROAD NAME

TRENCH/DRAINFIELD DATA

WIDTH 2' INLET 4' BOTTOM 8'
NUMBER OF TRENCHES 3
TOTAL LENGTH 215'
ABSORPTION AREA 330
DISTRIBUTION BOX LEVEL Yes
DISTRIBUTION BOX BAFFLE Elbow
DISTRIBUTION BOX PORT Yes

SEPTIC TANK DATA

SEPTIC TANK I LEVEL Yes
MANUFACTURER Back River Pre-cast
CAPACITY 1300 GAL
SEAM LOC Top
TANK LID DEPTH 1'-2'
BAFFLES No
BAFFLE FILTER N/A
MANHOLE LOC Front, Middle, Rear
6" PORT LOC None
WATERTIGHT TEST No
SLOTTED N/A
DATE ON LID 9/29/2014

PUMP/SEPTIC TANK LEVEL Yes

MANUFACTURER Back River Pre-cast
CAPACITY 1000 GAL
SEAM LOC Top
TANK LID DEPTH 1'-1.5'
BAFFLES None
BAFFLE FILTER No
MANHOLE LOC Middle
6" PORT LOC None
WATERTIGHT TEST No
SLOTTED No
DATE ON LID Dry

PRE-CONSTRUCTION:

10/14/2014 Layout done. Install similar to plan. (BB)

INSTALLATION: 10/20/2014 Tanks set. Plumbing from house to septic tanks covered without inspection. (BB)

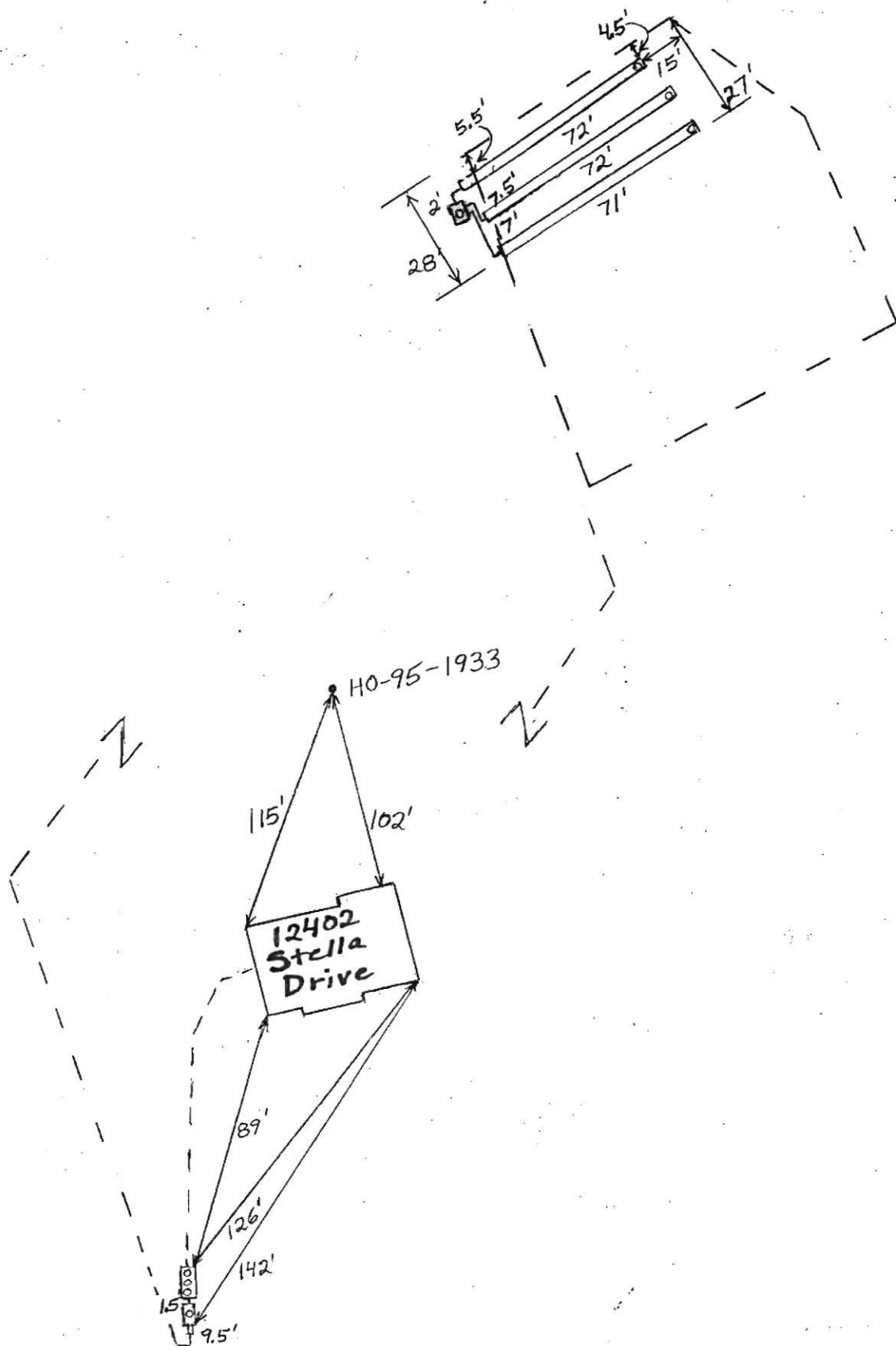
10/23/2014 (AM) Pump line installed. Starting on trenches. (BB)
10/23/2014 (PM) System finished except for pump and alarm test and BAT certification from Norweco inspector. (BB)
3/12/15 Pump/Alarm test OK.

FINAL INSPECTOR

J. H. Hoff

DATE OF APPROVAL

3/12/15



Eshenbaugh, Melanie

From: Matthew Gilbert <matthewmrg@hotmail.com>
Sent: Wednesday, August 12, 2026 9:05 AM
To: Eshenbaugh, Melanie
Subject: 12402 Stella Dr
Attachments: 12402 Stella Drive Garage Sewer and Water.jpeg

WARNING!!!

This email originated from someone outside of Howard County
DO NOT CLICK LINKS OR OPEN ATTACHMENTS
unless you recognize the sender and know for sure that the content is safe

Good morning Melanie

I have attached the requested diagram.

Thanks Matt

Eshenbaugh, Melanie

From: Mary Pfau <mymary73@gmail.com>
Sent: Tuesday, August 11, 2026 2:09 PM
To: Eshenbaugh, Melanie
Subject: Re: 12402 Stella drive Fulton

WARNING!!!

This email originated from someone outside of Howard County
*****DO NOT CLICK LINKS OR OPEN ATTACHMENTS*****
unless you recognize the sender and know for sure that the content is safe

410-935-6653

Thank you,

Mary

Sent from my iPhone

On Aug 11, 2026, at 1:41 PM, Eshenbaugh, Melanie
<MEshenbaugh@howardcountymd.gov> wrote:

Hi Mary,

What's a good number to call you on? Thanks.

Melanie Eshenbaugh
Bureau of Environmental Health
Howard County Health Dept.
8930 Stanford Blvd. Columbia, MD 21045
www.hchealth.org

<image001.png>

CONFIDENTIALITY NOTICE

This message and the accompanying documents are intended only for the use of the individual or entity to which they are addressed and may contain information that is privileged, confidential, or exempt from disclosure under applicable law. If the reader of this email is not the intended recipient, you are hereby notified that you are strictly prohibited from reading, disseminating, distributing, or copying this communication. If you have received this email in error, please notify the sender immediately and destroy the original transmission.

From: Mary Pfau <mymary73@gmail.com>
Sent: Tuesday, August 11, 2026 11:56 AM
To: Eshenbaugh, Melanie <MEshenbaugh@howardcountymd.gov>
Subject: 12402 Stella drive Fulton

WARNING!!!

This email originated from someone outside of Howard County

*****DO NOT CLICK LINKS OR OPEN ATTACHMENTS*****

unless you recognize the sender and know for sure that the content is safe

Hi Melanie, here's the breakdown of what plumber told me. Sorry I've been slammed with work this week and it took so long to get back to you.

He told me that the water supply and drain will be run from the garage into the house to be connected. We will not be going around the pool.

Does that help?

Please feel free to reach me by phone or email. Thank you for all your help,

Mary Pfau

Sent from my iPhone