



Building Permit Application

Howard County Maryland
Department of Inspections, Licenses and Permits
3430 Court House Drive
Permits: 410-313-2455
www.howardcountymd.gov

Date Received: 03/01/16

Permit No.: B160007060

Building Address: 3109 Longfield Rd
 City: Glenwood State: MID Zip Code: 21738
 Suite/Apt. #: _____ SDP/WP/BA #: F-08-34
 Census Tract: _____ Subdivision: Wellington
 Section: 1 Area: 1 Lot: 82
 Tax Map: 10214 Parcel: 779 Grid: 01
 Zoning: _____ Map Coordinates: _____ Lot Size: 2.79

Existing Use: Vaca + Lot
 Proposed Use: SFD
 Estimated Construction Cost: \$ 65000
 Description of Work: New Home SFD

Occupant or Tenant: _____
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Property Owner's Name: Todd Jr + Steve Stup
 Address: 3709 Cherry Valley Dr
 City: Clney State: MID Zip Code: 20832
 Phone: 246 401 3316 Fax: _____
 Email: Tstupa2@bflaming.com

Applicant's Name & Mailing Address, (If other than stated herein)
 Applicant's Name: Anvil Homes LLC Steve Reitel
 Address: 4552 Cap Stine Rd
 City: Frederick State: MID Zip Code: 21703
 Phone: 246 905 0388 Fax: _____
 Email: anvilhomes@aol.com

Contractor Company: Anvil Homes LLC
 Contact Person: Steve Reitel
 Address: 4552 Cap Stine Rd
 City: Frederick State: MID Zip Code: 21703
 License No.: 7684
 Phone: 246 905 0388 Fax: _____
 Email: anvilhomes@aol.com

Engineer/Architect Company: _____
 Responsible Design Prof.: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Commercial Building Characteristics	Residential Building Characteristics
Height: _____	<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse
No. of stories: <u>3 1/2</u>	Depth Width
Gross area, sq. ft./floor: <u>5000</u>	1 st floor: <u>548</u> <u>816</u>
	2 nd floor: <u>428</u> <u>736</u>
Area of construction (sq. ft.): _____	Basement: _____
	<input type="checkbox"/> Finished Basement
Use group: _____	<input type="checkbox"/> Unfinished Basement
	<input type="checkbox"/> Crawl Space
Construction type:	<input type="checkbox"/> Slab on Grade
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms: _____
<input type="checkbox"/> Structural Steel	Multi-family Dwelling
<input type="checkbox"/> Masonry	No. of efficiency units: _____
<input type="checkbox"/> Wood Frame	No. of 1 BR units: _____
<input type="checkbox"/> State Certified Modular	No. of 2 BR units: _____
	No. of 3 BR units: _____
	Other Structure: _____
	Dimensions: _____
<input checked="" type="checkbox"/> Roadside Tree Project Permit	Footings: _____
<input type="checkbox"/> Yes <input type="checkbox"/> No	Roof: _____
Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular
	<input type="checkbox"/> Manufactured Home

Utilities
Water Supply
<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Private
Sewage Disposal
<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Private
Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
Heating System
<input type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Propane Gas
<input type="checkbox"/> Other: _____
Sprinkler System:
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Grading Permit Number: _____
Building Shell Permit Number: _____

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.

Steve Reitel
 Applicant's Signature
anvilhomes@aol.com
 Email Address
ANVILHOME@AOL.COM
 Title/Company

Steve Reitel
 Print Name
3/1/16
 Date

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
 PLEASE WRITE NEATLY & LEGIBLY
 -FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	<u>4/27/16</u>	<u>Paul...</u>

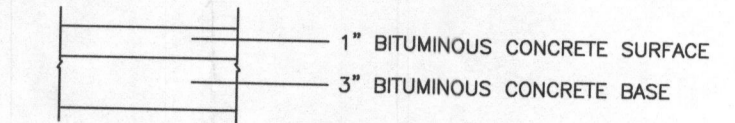
Is Sediment Control approval required for issuance? Yes No
 CONTINGENCY CONSTRUCTION START

DPZ SETBACK INFORMATION
Front: _____
Rear: _____
Side: _____
Side St.: _____
All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No
Lot Coverage for New Town Zone: _____
SDP/Red-line approval date: _____

Filing Fee	\$
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	#

SOILS CHART - SOIL SURVEY HOWARD COUNTY, MARYLAND					
SYMBOL	HYDRIC	HYDROLOGIC GROUP	ALTERNATE GROUP	NAME	K-VALUE
GgB		B		GLENELG LOAM, 3 TO 8 PERCENT SLOPES	0.2
GmB*	YES	C		GLENVILLE SILT LOAM, 3 TO 8 PERCENT SLOPES	0.37
MaC		B		MANOR LOAM, 8 TO 15 PERCENT SLOPES	0.24

TAKEN FROM WEB SOILS SURVEY MAP NO. 10, WOODBINE SE



FULL DEPTH BITUMINOUS CONCRETE
PAVING SECTION
NOT TO SCALE

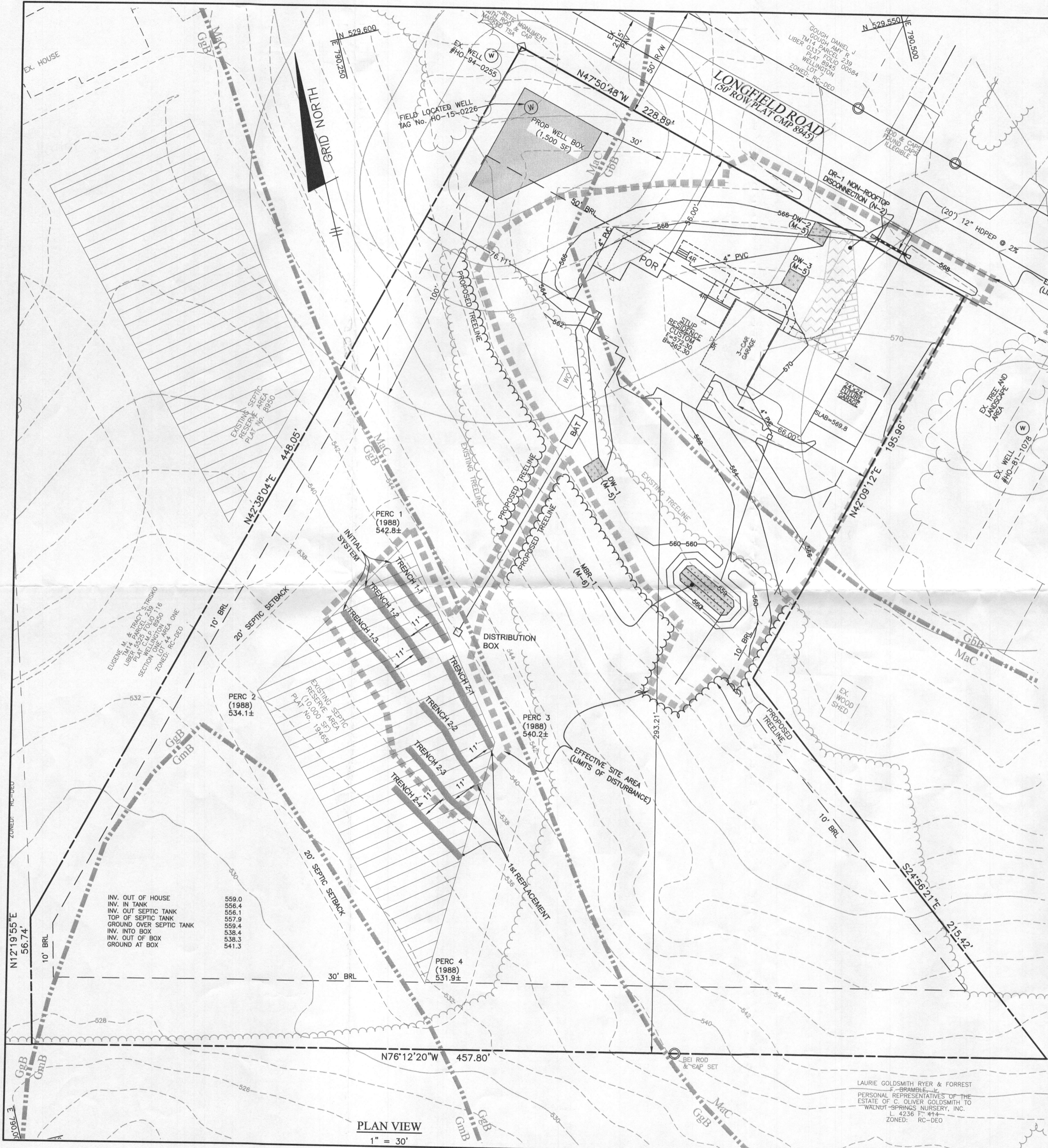
Approved for ISP
RM

REVISED
Date: 4-28-16
Comments: revise per Health
B16000706

LEGEND		GgB
SOILS CLASSIFICATION		
SOILS DELINEATION		
EXISTING CONTOURS (GIS)	-560 -578	
PROPOSED CONTOURS (GIS)	-570	
EXISTING WOODS LINE		
PROPOSED WOODS LINE		
EXISTING SEPTIC FIELD		
EXISTING WELL	(W)	
PROPOSED WELL BOX		
PASSING PERCOLATION TEST		
PROPOSED STRUCTURE		
PROPOSED ESD PRACTICE		
LIMIT OF DISTURBANCE/ EFFECTIVE SITE AREA		

NOTES

1. THE LOT SHOWN HEREON COMPLIES WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREA AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT.
2. THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF AT LEAST 10,000 SQUARE FEET AS REQUIRED BY THE STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWER DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA IS RESTRICTED UNTIL PUBLIC SEWER IS AVAILABLE. THIS EASEMENT SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT ADJUSTMENTS TO THE PRIVATE SEWERAGE EASEMENT. ANY CHANGES TO A PRIVATE SEWERAGE EASEMENT SHALL REQUIRE A REVISED PERCOLATION CERTIFICATION PLAN. RECORDATION OF A MODIFIED SEWERAGE EASEMENT SHALL NOT BE NECESSARY.
3. THE SEDIMENT AND EROSION CONTROLS, APPROVED BY HOWARD SOIL CONSERVATION DISTRICT BY GRADING PLAN: GP-16-043, SHALL BE USED FOR THE BUILDING PERMIT PLAN.
4. TOPOGRAPHY SHOWN HEREON IS TAKEN FROM HOWARD COUNTY GIS AND HAS BEEN FIELD VERIFIED BY BENCHMARK ENGINEERING, INC., ON OR ABOUT OCTOBER, 2015.
5. EXACT LENGTH OF SEPTIC TRENCHES ARE TO BE DETERMINED BY THE HEALTH DEPARTMENT AT THE TIME OF TRENCH LAYOUT AND INSPECTION.
6. SPOIL FROM THE TRENCHING OF THE SEPTIC AREA IS TO BE PLACED ON THE UPHILL SIDE OF THE EXCAVATION FOR EACH INDIVIDUAL LOT.
7. ALL SEDIMENT AND EROSION CONTROL FEATURES USED ON THIS SITE SHALL COMPLY WITH 2011 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL.
8. ALL DRAINAGE AND STORMWATER MANAGEMENT FEATURES USED ON THIS SITE MUST COMPLY WITH THE APPROVED ROAD CONSTRUCTION PLANS, ENVIRONMENTAL CONCEPT PLAN OR BUILDING PERMIT PLANS.
9. COMAR SEPTIC TANK FOR THIS LOT WOULD BE 2,000 GALLONS. THE BAT TANK SIZE IS 1,300 GALLONS.
10. THERE ARE NO EXISTING WELLS OR SEPTIC SYSTEMS WITHIN 100' OF THIS PROJECT'S BOUNDARY EXCEPT AS NOTED.
11. ANY CHANGES TO A PRIVATE SEWERAGE EASEMENT SHALL REQUIRE A REVISED PERCOLATION CERTIFICATION PLAN.
12. STORMWATER MANAGEMENT FOR THE DRIVEWAY IS PROVIDED BY NON-ROOFTOP DISCONNECTION (MDE DESIGNATION N-2) AND MICRO-BIORETENTION (MDE DESIGNATION M-6). STORMWATER MANAGEMENT FOR THE ROOFTOP IS PROVIDED BY DRYWELLS (MDE DESIGNATION M-5) AND MICRO-BIORETENTION (M-6).
13. THE DESIGN OF THIS SEPTIC AREA REQUIRES THE USE OF A DEEP TRENCH SYSTEM. CALCULATIONS ARE SHOWN ON SHEET 2. THE SEPTIC DISPOSAL SYSTEM FOR THIS LOT REQUIRES ADVANCED PRE-TREATMENT IN ACCORDANCE WITH MDE REGULATIONS.
14. THE EXISTING WELL SHOWN ON THIS PLAN, HO-15-0226, HAS BEEN FIELD LOCATED BY BENCHMARK ENGINEERING, INC., AND IS ACCURATELY SHOWN.



PLAN VIEW
1" = 30'

BENCHMARK
ENGINEERS ▲ LAND SURVEYORS ▲ PLANNERS
ENGINEERING, INC.

8480 BALTIMORE NATIONAL PIKE ▲ SUITE 315
ELLCOTT CITY, MARYLAND 21043
PHONE: 410-465-6105 ▲ FAX: 410-465-6644
BEI@BEI-CIVILENGINEERING.COM

OWNER:
TODD STUP
BUSINESS FLOORING INC.
3709 CHERRY VALLEY DR
OLNEY, MD 20832
240-401-3316

PROJECT:
WELLINGTON SECTION ONE, AREA 1
LOT 82
(FORMERLY KNOWN AS LOT 45)

LOCATION:
3109 LONGFIELD ROAD
GLENWOOD, MD 21738
TAX MAP No. 14 - GRID 21 - PARCEL No. 239
4TH ELECTION DISTRICT, HOWARD COUNTY, MARYLAND
TAX ID NUMBER: 14-349717

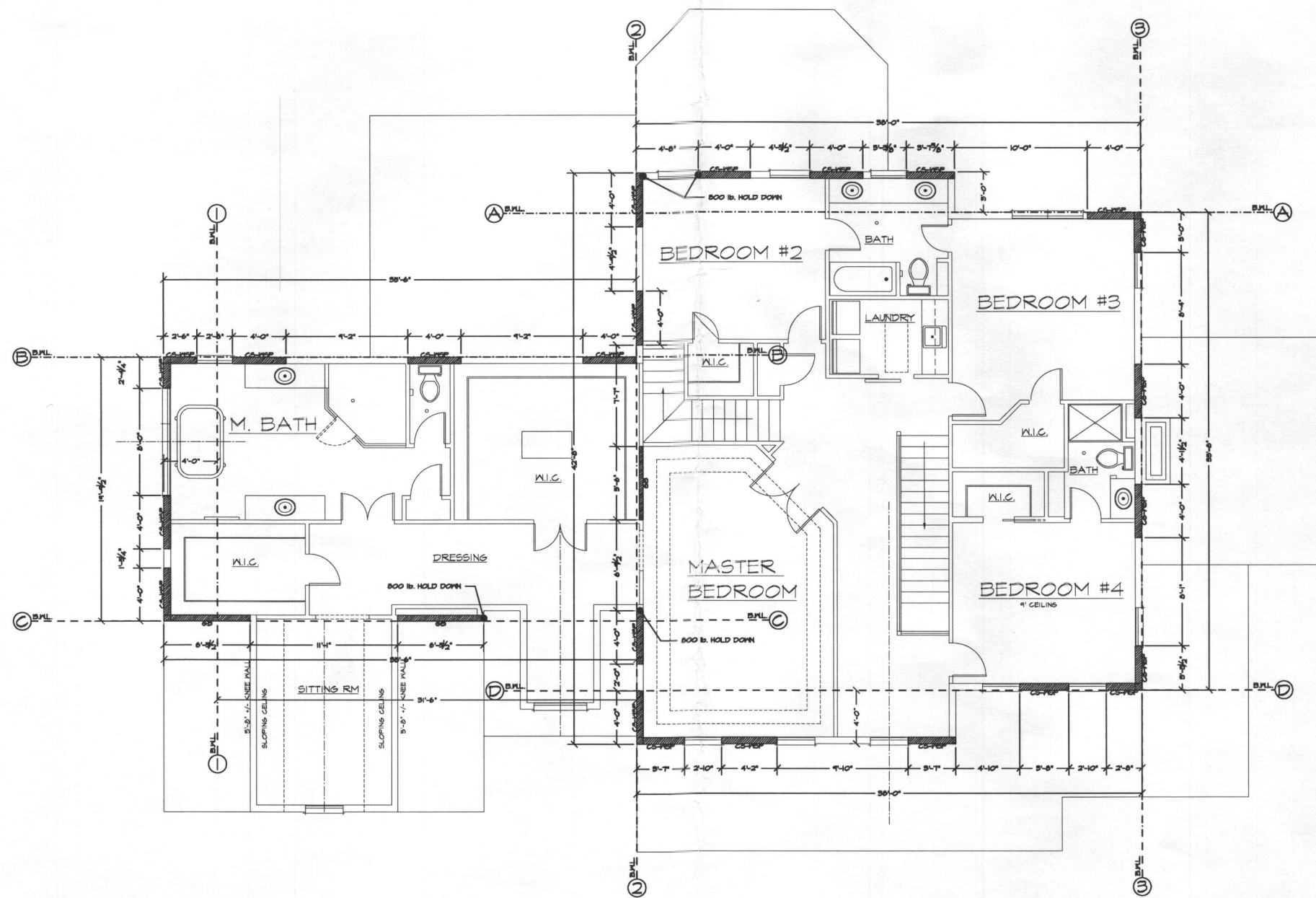
TITLE: BUILDING PERMIT PLAN
HOUSE TYPE: STUP RESIDENCE

DATE: APRIL, 2016	PROJECT NO.: 2722
SCALE: 1" = 30'	DRAWING: 1 OF 1

DESIGN: JMC/NAF **DRAFT:** NAF

Laurie Goldsmith Ryer & Forrest
F-BRANDS-JC
PERSONAL REPRESENTATIVES OF THE
ESTATE OF C. OLIVER GOLDSMITH TO
WALNUT SPRINGS NURSERY, INC.
L 4236 F 414
ZONED: RC-DEO

INV. OUT OF HOUSE	559.0
INV. IN TANK	556.4
INV. OUT SEPTIC TANK	556.1
TOP OF SEPTIC TANK	557.9
GROUND OVER SEPTIC TANK	559.4
INV. INTO BOX	538.4
INV. OUT OF BOX	538.3
GROUND AT BOX	541.3



STBR

SECOND FLOOR-WALL BRACING LAYOUT

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

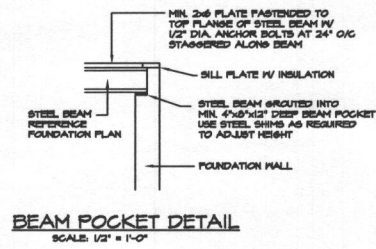
B.M.L. = BRACED WALL LINE

HOLD-DOWN DEVICE: 800 LB. CAPACITY FASTENED TO THE EDGE OF THE BRACED WALL PANEL, CLOSEST TO THE CORNER AND TO THE FOUNDATION OR FLOOR FRAMING BELOW. (R60210)

THE STUP RESIDENCE

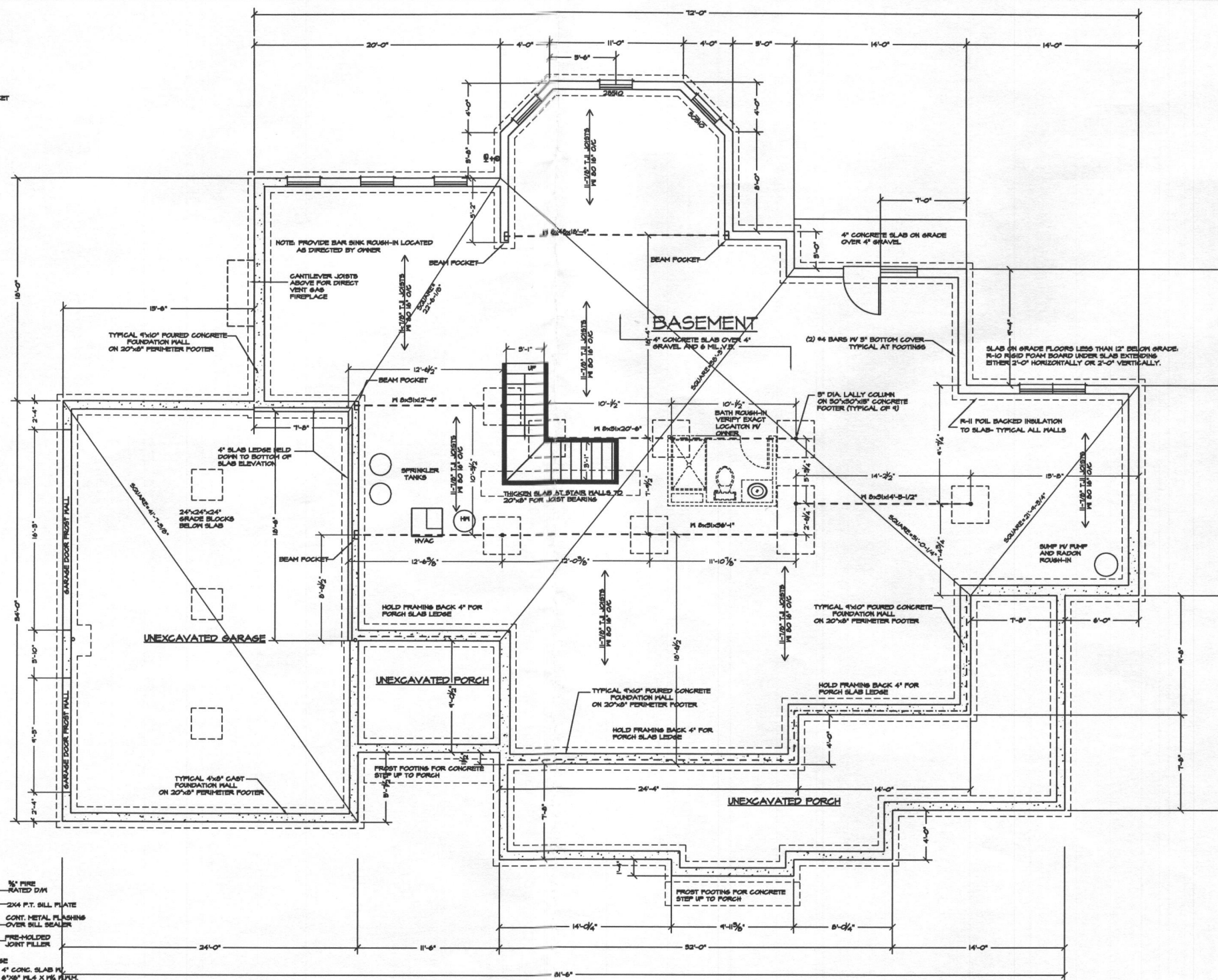
PLAN SET REVISED 2/6/16

SCALE: 1/4" = 1'-0"	GBL CUSTOM HOME DESIGN INC. PO BOX 237 FINKSBURG, MD 21048 PHONE 410-833-8300
DATE: 2/20/16	
SHEET NO.: 12	



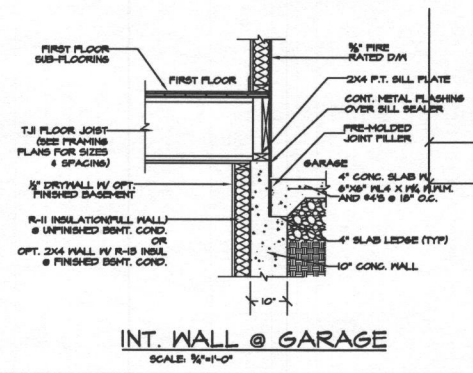
BEAM POCKET DETAIL
SCALE: 1/2" = 1'-0"

Potential for
Future BR
Additions



FOUNDATION PLAN
SCALE: 1/4" = 1'-0"

NOTE: PROVIDE BAR SINK ROUGH-IN LOCATED AS DIRECTED BY OWNER

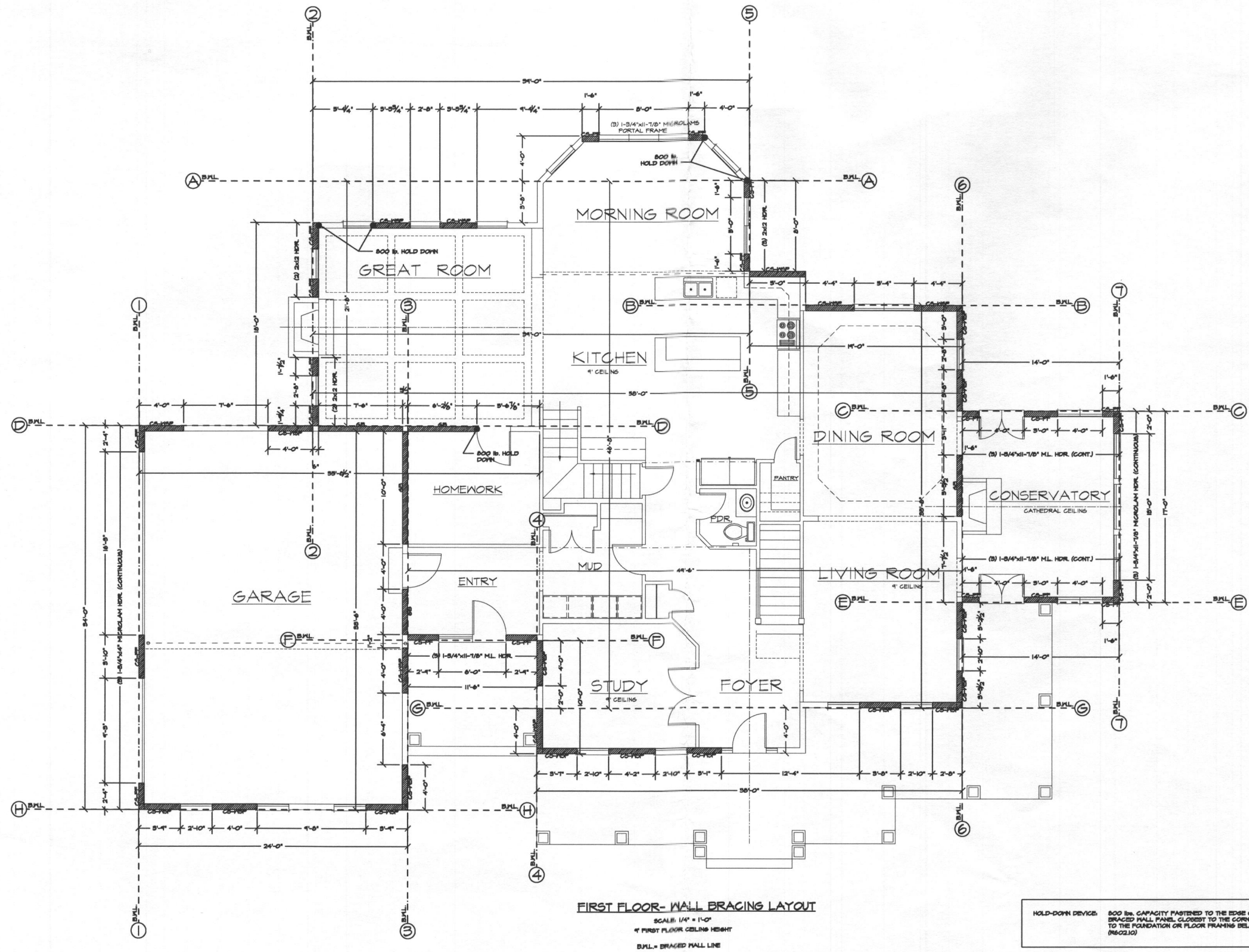


INT. WALL @ GARAGE
SCALE: 3/8" = 1'-0"

THE STUP RESIDENCE

PLAN SET REVISED 2/8/16

SCALE: 1/4" = 1'-0"	GBL CUSTOM HOME DESIGN INC. PO BOX 237 FUNKSBURG, MD 21048 PHONE: 410-833-8320
DATE: 2/2016	
SHEET NO.: 9	



FIRST FLOOR- WALL BRACING LAYOUT
 SCALE: 1/4" = 1'-0"
 4' FIRST FLOOR CEILING HEIGHT
 BWL = BRACED WALL LINE

HOLD-DOWN DEVICE: 800 LB. CAPACITY FASTENED TO THE EDGE OF THE BRACED WALL PANEL, CLOSEST TO THE CORNER AND TO THE FOUNDATION OR FLOOR FRAMING BELOW (R602.10)

THE STUP RESIDENCE

PLAN SET REVISED 2/8/16

SCALE: 1/4" = 1'-0"
 DATE: 2/20/16
 SHEET NO.: II

GBL CUSTOM HOME DESIGN INC.
 PO BOX 237 PINGSBURG, MD 21048
 PHONE 410-833-8330

**COMPLETE THIS FORM WHEN DROPPING OFF ANY
CORRESPONDENCE AND/OR PLANS TO THE HOWARD COUNTY
DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS COUNTER:**

Date: April 27, 2016

To: Health
(Person's Name and Division)

From: Benchmark Engineering IN (410) 465-6105
(Your Name, Company Name and Telephone Number)

Subject: Project name Wellington Sec one Area 1 Lot 82 (Formerly Lot 45)
Project site address 3109 Longfield Rd Glenwood MD 21738
Permit # B 16000 TA6 SDP # _____
Other information pertinent to this project _____

Please check the attachments below that you are submitting with this transmittal:

- Letter of response to address plan review comment letter
- Revised plans and/or revised details: When submitting for a complete re-review, **duplicate sets shall be submitted.**
- Letter Summarizing Changes
- Energy conservation calculations
- Copies of Building Permit Plan (be specific).
_____ Health Department Request _____ DPZ/ DED Request _____ Applicant's Request
- Two sets of single family dwelling model plans to be placed on permanent file: Model name and/or # _____
- Other _____

Contact Person Information: (Required)

John Carney
Please Print Name

Telephone No: 410-465-6105

E-Mail Address: bei@bei-civilengineering.com

PLEASE ASSURE ALL DOCUMENTS AND/OR REVISIONS ARE APPROPRIATELY SIGNED AND SEALED, IF NECESSARY, BY A LICENSED ARCHITECT OR ENGINEER. PLEASE BE ADVISED THAT INSUFFICIENT INFORMATION MAY RESULT IN THE DELAY OF REVIEW BY THE PLANS EXAMINER. THE DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS WILL CONTACT YOU IF THERE IS A PROBLEM. IN ADDITION, ONCE THE BUILDING PERMIT IS APPROVED BY THE PLAN REVIEW DIVISION AND ALL OTHER REQUIRED SIGNATORY AGENCIES, AND THE BUILDING PERMIT IS READY FOR ISSUANCE, THE PERMIT DIVISION WILL NOTIFY THE APPROPRIATE CONTACT PERSON FOR PERMIT PICK UP. ALL PERMIT STATUS INQUIRIES SHALL BE DIRECTED TO THE PERMIT DIVISION AT 410-313-2455. CODE RELATED QUESTIONS AND PLAN REVIEW INQUIRIES SHALL BE DIRECTED TO THE PLAN REVIEW DIVISION AT 410-313-2436. PLEASE ALLOW A MINIMUM OF FIVE (5) WORKING DAYS FOR ANY PLAN SUBMITTALS TO BE REVIEWED. THANK YOU.

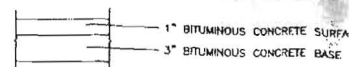
Received by

ASherman



SYMBOL	HYDRIC	HYDROLOGIC GROUP	SOIL SURVEY	ALTERNATE GROUND
GgB		B		
GmB	YES	C		
MBC		B		

TAKEN FROM WEB SOILS SURVEY



FULL DEPTH BITUMINOUS CONCRETE
PAVING SECTION
NOT TO SCALE

REVISED
Date: 4-28-16
Comments: *Revised design*
B16000706 *Kath*

NOTES

1. THE LOT SHOWN HEREON COMPLIES WITH THE M REQUIRED BY THE MARYLAND STATE DEPARTMENT
2. THIS AREA DESIGNATES A PRIVATE SEWAGE EASEMENT. IMPROVEMENTS OF ANY NATURE IN THIS AREA SHALL BE SUBJECT TO THE APPROVED SEWAGE EASEMENT. THIS EASEMENT SHALL BECOME A SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICE ADJUSTMENTS TO THE PRIVATE SEWAGE EASEMENT SHALL REQUIRE A REVISED PERCOLATION MODIFIED SEWAGE EASEMENT PLAT. THIS PLAT SHALL NOT BE SUBJECT TO THE SEWAGE EASEMENT APPROVED BY GRADING PLAN: GP-16-043. SHALL BE USED BY GRADING PLAN: GP-16-043. SHALL BE USED BY GRADING PLAN: GP-16-043.
3. TOPOGRAPHY SHOWN HEREON IS TAKEN FROM THE VERIFIED BY BENCHMARK ENGINEERING, INC., ON EXACT LENGTH OF SEPTIC TRENCHES ARE BE DURING TIME OF TRENCH LAYOUT AND INSPECTION.
4. SPOIL FROM THE TRENCHING OF THE SEPTIC ARE THE EXCAVATION FOR EACH INDIVIDUAL LOT.
5. ALL SEDIMENT AND EROSION CONTROL FEATURES MARYLAND STANDARDS AND SPECIFICATIONS FOR ALL DRAINAGE AND STORMWATER MANAGEMENT WITH THE APPROVED ROAD CONSTRUCTION PLANS PERMIT PLANS.
6. COMAR SEPTIC TANK FOR THIS LOT WOULD BE 100 GALLONS.
7. THERE ARE NO EXISTING WELLS OR SEPTIC SYSTEM BOUNDARY EXCEPT AS NOTED.
8. ANY CHANGES TO A PRIVATE SEWAGE EASEMENT CERTIFICATION PLAN.
9. STORMWATER MANAGEMENT FOR THE DRIVEWAY IS (MDE DESIGNATION N-2) AND MICRO-BIORETENT MANAGEMENT FOR THE ROOFTOP IS PROVIDED BY MICRO-BIORETENT (M-6).
10. THE DESIGN OF THIS SEPTIC AREA REQUIRES THE CALCULATIONS ARE SHOWN ON SHEET 2. THE SE ADVANCED PRE-TREATMENT IN ACCORDANCE WITH THE EXISTING WELL SHOWN ON THIS PLAN, HO, BENCHMARK ENGINEERING, INC., AND IS ACCURATE.

Approval BP B16000706
R/E

BENCHMARK



ENGINEERING, INC.

8480 Baltimore National Pike • Suite 315 • Ellicott City, Maryland 21043
 410-465-6105 410-465-6644 (Fax)

LETTER OF TRANSMITTAL

DATE	4/25/16	PROJECT No.	2722
ATTENTION	Robert Freeman		
RE:	3109 Longfield Rd		
	B16000706		

TO: Health Dept.

- WE ARE SENDING YOU Attached Under separate cover via _____ the following items
- Photocopies Prints Originals Samples
 Specifications Invoices Change Order Other _____

COPIES of	No. of SHEETS	DESCRIPTION
3	2	Revised BAT Plan

THESE ARE TRANSMITTED as checked below

- For Comment For your use For Approval
 For Review As requested Other _____

REMARKS: ① Revised general note 9 as approved by your email.

② Added general note 14 per email.

COPY TO: _____

RECEIVED BY: [Signature]

SIGNED: John Carney

If enclosures are not as noted, kindly notify us at once.

Freemon, Robert

From: John Carney <jcarney@bei-civilengineering.com>
Sent: Wednesday, March 16, 2016 9:17 AM
To: Freemon, Robert
Subject: RE: 3109 Longfield Rd.

Robert, apparently the builder has submitted the preliminary house siting as a building permit plan. Normally the building permit plan would be submitted and would contain more information, notes, details etc. Additionally we'd also submit the BAT plan and architectural at that point. I've let the owner know that they are out of sequence. You will see a building permit plan soon that contains all the information that is normally required. Also we'll submit the BAT plan and architectural plans, directly to Health, around the same time. Thanks for the spec sheet. John

From: Freemon, Robert [<mailto:rfreemon@howardcountymd.gov>]
Sent: Wednesday, March 16, 2016 8:37 AM
To: jcarney@bei-civilengineering.com
Subject: 3109 Longfield Rd.

Hi John,

I have reviewed BP16000706 for 3109 Longfield Rd. and have some comments. Before we can approve the Building Permit a Well needs to be drilled and approved by the Health Dept. To obtain a Well Permit a surveyor needs to stake the proposed Well Box as well as fill out a stake form and have it submitted to the Health Dept. Additionally, BAT Plan will need to be submitted to the Health Dept. along with a Floor Plans.

Comments concerning the plot plan include Drywell 1 (DW-1) needs to be 100^{ft} from the well box. I have attached the Spec Sheet and a link to the BAT plan checklist for your reference.

<https://www.howardcountymd.gov/LinkClick.aspx?fileticket=1mQGft8OxK4%3d&portalid=0>

Robert Freemon
Howard County Health Department
Well and Septic Program
Phone: 410-313-6357
Email: rfreemon@howardcountymd.gov