



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: _____

Permit No.: _____

Building Address: 4655 Manor Lane
 City: Ellicott City State: MD Zip Code: 21042
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: Manor Lane
 Section: _____ Area: _____ Lot: _____
 Tax Map: 29 Parcel: 107 Grid: 5
 Zoning: RC-DEO Map Coordinates: _____ Lot Size: _____

Property Owner's Name: Vladimir Blyukher
 Address: 4655 Manor Lane
 City: Ellicott City State: MD Zip Code: 21042
 Phone: 443-642-8549 Fax: _____
 Email: arzamas16@hotmail.com

Applicant's Name & Mailing Address, (If other than stated herein)
 Applicant's Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Existing Use: _____
 Proposed Use: _____
 Estimated Construction Cost: \$ 5,000.00
 Description of Work: Octagon Shed 10' side
Area 483 sq. ft on existing foundation
 Occupant/Tenant Name: _____
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Contractor Company: _____
 Contact Person: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 License No. : _____
 Phone: _____ Fax: _____
 Email: _____

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

Commercial Building Characteristics	Residential Building Characteristics	
Height:	<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories:	Depth	Width
Gross area, sq. ft./floor:	1 st floor:	
	2 nd floor:	
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 checked="" 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:	
> 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	
Electric:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Gas:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Water Supply	
<input type="checkbox"/> Public	
<input type="checkbox"/> Private	
Sewage Disposal	
<input type="checkbox"/> Public	
<input type="checkbox"/> Private	
Heating System	
<input type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
Sprinkler System:	
<input 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.

Vladimir Blyukher
Applicant's Signature
arzamas16@hotmail.com
Email Address

Title/Company

Vladimir Blyukher
Print Name
10/27/2016
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>10/27/16</u>	<u>[Signature]</u>

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	#

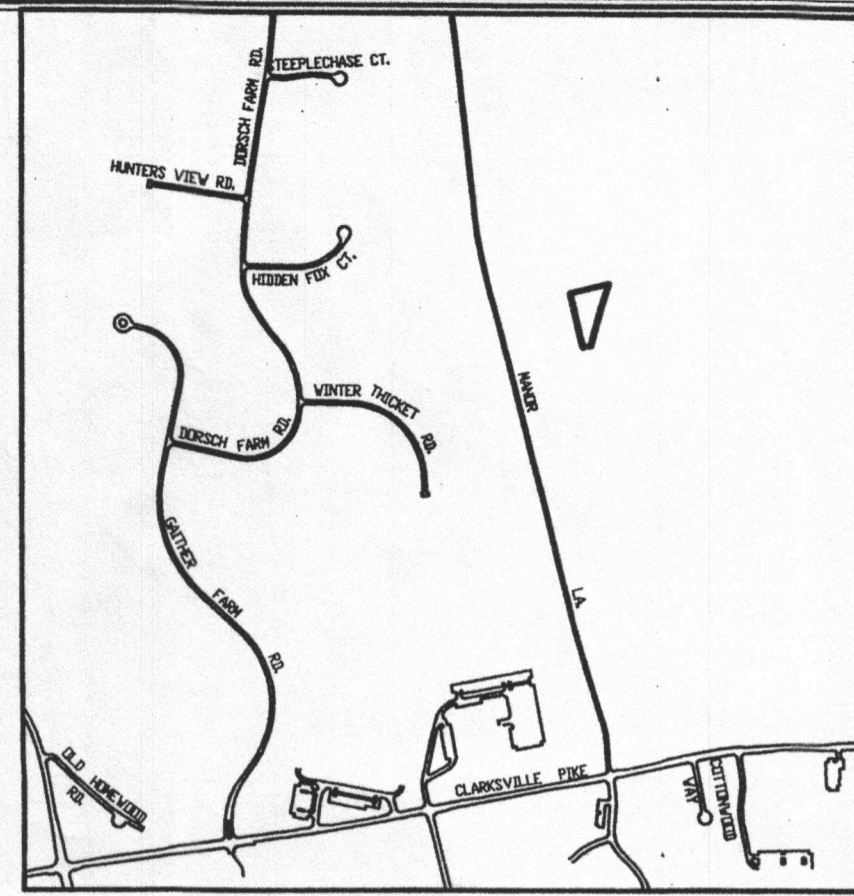
LEGEND

- - - - - EXISTING 2' CONTOURS
- - - - - EXISTING 10' CONTOURS
- ~~~~~ EXISTING TREE LINE
- GLB2 SOIL LINES AND TYPES
- MLC2
- ⊙ DENOTES PROPOSED WELL
- DENOTES FAILED PERC
- DENOTES PASSED PERC
- ⊕ DENOTES PROPOSED PERC
- ▭ DENOTES PROPOSED HOUSE
- ▭ DENOTES 15%-24.9% SLOPES
- ▭ DENOTES 25% AND GREATER SLOPE

PARCEL 80
C/IS KEETERMAN
DIXIE KEETERMAN
LIBER 926, FOLIO 594

PARCEL 6
JOHN H. HOMENS, JR. AND
KARAN LYNN HOMENS
LIBER 1769, FOLIO 374 * 446.47
Clean Out

PARCEL 8
DUANE F. ALEXANDER AND MARIANNE E. ALEXANDER
LIBER 4747, FOLIO 457
SAVE AND EXCEPT
a) Liber 172, folio 21
b) Liber 189, folio 30
c) Liber 190, folio 293
d) Liber 194, folio 86



VICINITY MAP
SCALE: 1" = 1200'

GENERAL NOTES:

1. THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF 8,952 SQUARE FEET AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWERAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWERAGE IS AVAILABLE. THESE EASEMENTS 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. RECORDATION OF A MODIFIED SEWERAGE EASEMENT SHALL NOT BE NECESSARY.
2. ADJUSTMENTS TO SEPTIC EASEMENT AREA IS NOT PERMITTED WITHOUT ADDITIONAL TESTING.
3. THE LOT SHOWN HEREON COMPLIES WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREA AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT.
4. EXISTING WELLS AND/OR SEWERAGE EASEMENTS WITHIN 100 FEET OF THE PROPERTY HAVE BEEN SHOWN FROM THE BEST AVAILABLE INFORMATION.
5. ALL HOUSE SITES SHOWN COMPLY WITH MINIMUM BUILDING RESTRICTION REGULATIONS.
6. ALL WELLS SHALL BE DRILLED PRIOR TO BUILDING PERMIT. IT IS THE DEVELOPERS RESPONSIBILITY TO SCHEDULE THE WELL DRILLING PRIOR TO BUILDING PERMIT. IT WILL NOT BE CONSIDERED "GOVERNMENT DELAY" IF THE WELL DRILLING HOLDS-UP THE HEALTH DEPARTMENT SIGNATURE PRIOR TO BUILDING PERMIT.
7. TOPOGRAPHY SHOWN IS FROM HOWARD COUNTY GIS TOPOGRAPHY AT 5' CONTOUR INTERVAL INTERPOLATED FOR 2' CONTOUR INTERVAL.
8. BOUNDARY OUTLINE BASED FIELD SURVEY BY FISHER, COLLINS & CARTER, INC.
9. DEED REFERENCE LIBER 9243 FOLIO 214.
10. EXISTING HOUSE IS TO BE RAZED PRIOR TO BUILDING PERMIT APPROVAL, UNLESS APPROVAL HAS BEEN GRANTED BY THE HEALTH DEPARTMENT FOR THE HOUSE TO BE RAZED PRIOR TO THE ISSUANCE OF THE USE AND OCCUPANCY PERMIT.
11. EXISTING SEPTIC SYSTEM MUST BE PROPERLY ABANDONED PRIOR TO BUILDING PERMIT APPROVAL, UNLESS APPROVAL HAS BEEN GRANTED BY THE HEALTH DEPARTMENT FOR EXISTING HOUSE TO BE RAZED PRIOR TO THE ISSUANCE OF THE USE AND OCCUPANCY PERMIT.
12. EXISTING WELL TO BE PROPERLY ABANDONED PRIOR TO BUILDING PERMIT APPROVAL.
13. UNEQUAL LENGTH TRENCHES WITHIN THE SEPTIC EASEMENT WILL REQUIRE A LOW PRESSURE DOSE SYSTEM.

LIBER 320, FOLIO 440
TAX MAP 29, GRID 5, PARCEL 7
GRANTOR: T. HUNT MAYFIELD ADMINISTRATOR OF THE ESTATE OF LOLA M. MORGRET, DECEASED.
GRANTEE: HERBERT M. COLBURN AND MARIAN B. COLBURN

PERC CERTIFICATION
I certify that the locations shown hereon are based on field locations done under my direct supervision and are correct to the best of my professional knowledge and belief.
Terrell A. Fisher
Signature of Professional Land Surveyor
Terrell A. Fisher, Professional Land Surveyor No. 10692
10/16/06
Date

APPROVED FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS,
HOWARD COUNTY HEALTH DEPARTMENT.
Robert J. Wake
COUNTY HEALTH OFFICER
10/27/06
DATE

SOILS LEGEND

SOIL	NAME	CLASS
EkB2	Elioak silt loam, 3 to 8 percent slopes, moderately eroded	B
ChB2	Chester silt loam, 3 to 8 percent slopes, moderately eroded	B

- NOTES:**
- * Hydric soils and/or contains hydric inclusions
 - ** May contain hydric inclusions
 - † Generally only within 100-year floodplain areas

APPROVED WALK-THRU BUILDING PERMIT
BP#
APP SAN DB
DESC. OF WORK: Detached Shed
DATE: 10-27-06
Approved as shown

PERC CERTIFICATION PLAT
4655 MANOR LANE

TAX MAP *29
SECOND ELECTION DISTRICT
SCALE: 1" = 30'
A522941
PARCEL: 107
HOWARD COUNTY, MARYLAND
DATE: OCTOBER 12, 2006

* 448.90
Clean Out