



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: 7901 James Ave
City: Ellicott City State: MD Zip Code: 21043
Suite/Apt. # _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: _____
Section: _____ Area: _____ Lot: _____
Tax Map: _____ Parcel: _____ Grid: _____
Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: Single Family Dwelling
Proposed Use: Single Family Dwelling
Estimated Construction Cost: \$ 4500-
Description of Work: Install 12'x20' pre-fabricated storage shed

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

Property Owner's Name: Chung Hwa Rhee
Address: 7901 James Ave
City: Ellicott City State: MD Zip Code: 21043
Phone: 443 510 0462 Fax: _____
Email: deborah 10 20 @ Yahoo.com

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

Contractor Company: Home Owner
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 checked="" 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 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 checked="" 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 checked="" type="checkbox"/> Public	
<input type="checkbox"/> Private	
Sewage Disposal	
<input type="checkbox"/> Public	
<input checked="" 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.

Applicant's Signature: [Signature]
Email Address: deborah 10 20 @ Yahoo.com
Title/Company: _____

Print Name: Chung Hwa Rhee
Date: 8-15-2017

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>8/15/17</u>	<u>[Signature]</u>

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

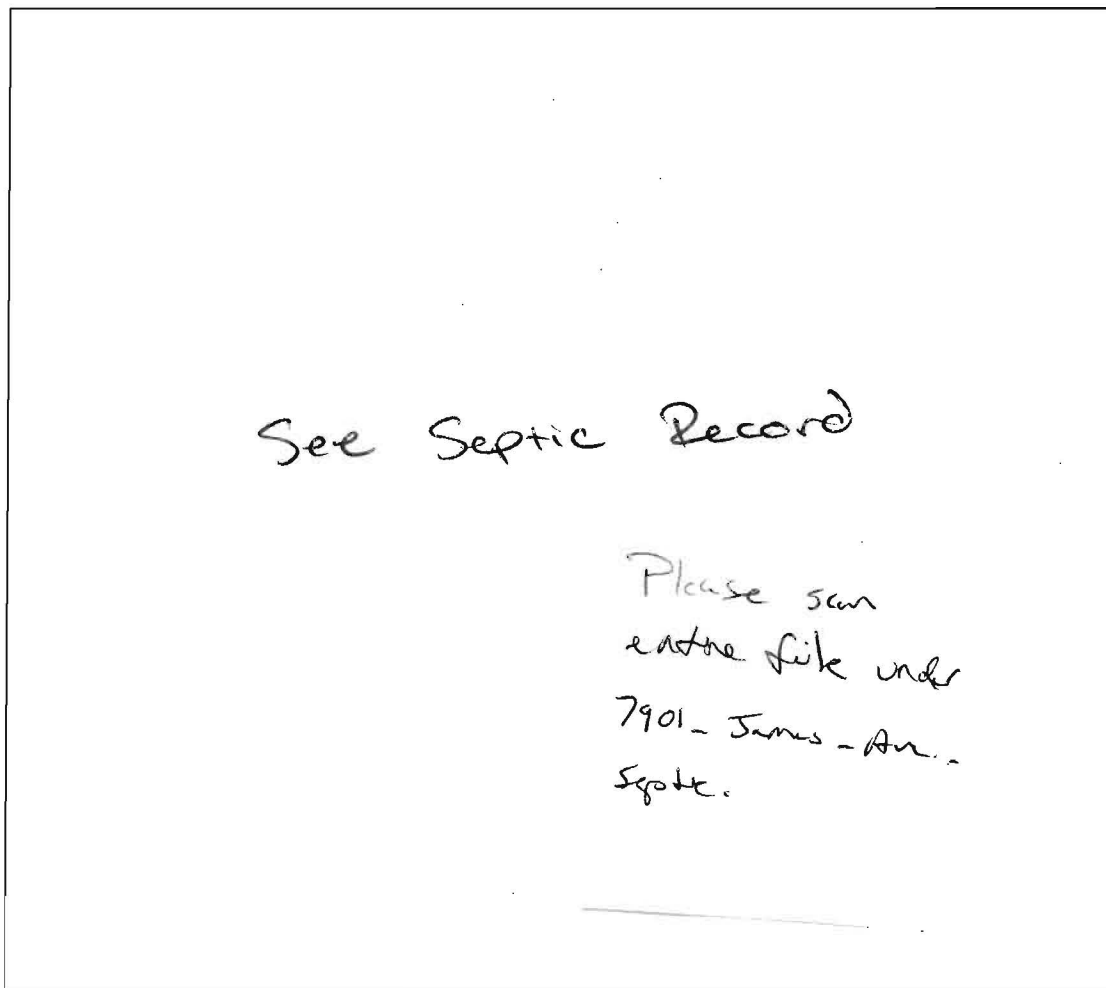
DPZ SETBACK INFORMATION
Front: _____
Rear: _____
Side: _____
Side St.: _____
All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District? <input type="checkbox"/> Yes <input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

Filing Fee	\$
Permit Fee	\$ <u>50</u>
Tech Fee	\$ <u>5</u>
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$ <u>55.00</u>
Sub- Total Paid	\$
Balance Due	\$
Check	#

SITE INSPECTION SHEET

OWNER: Chang Hwa Ehee PHONE #: 443-510-0462
ADDRESS: 7901 James Ave CONTRACTOR: Homeowner
Ellicott City, MD 21043 WELL TAG #: _____
SUBDIVISION: _____ LOT: _____ COUNTY #: _____
PROPOSAL: _____

LOCATION DIAGRAM



COMMENTS: 8/16/2017 There was no evidence of
septic failure at the sewer line obs port, the
tank, or dry well. No evidence in yard of previous
system failure or effluent at grade.

DATE: 08/16/2017 INSPECTOR: [Signature]

check out 10/13/59 - 1:00

748

PERMIT

P. 01735

SEWAGE DISPOSAL SYSTEM

A. 01430

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

INDEXED

DISTRICT 1

DATE 9/28/59

Paul D. Gregor

IS PERMITTED TO INSTALL ALTER

ADDRESS Hanover PHONE _____

A SEWAGE DISPOSAL SYSTEM LOCATED AT _____

SUBDIVISION Pleasant View ROAD James Ave. LOT 61

PROPERTY OWNER W. E. Strathern

ADDRESS Kingwood Ellicott City

SPECIFICATIONS

DRAIN FIELD _____ DEPTH _____ FEET, BOTTOM AREA _____ SQ. FT.

SEEPAGE PITS ABSORBENT SIDE-WALL AREA 375 SQ. FT. below the top

SEPTIC TANK CAPACITY 750 GALLONS 4 ft. of Clay.

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 22% & TANK CAPACITY 50%.

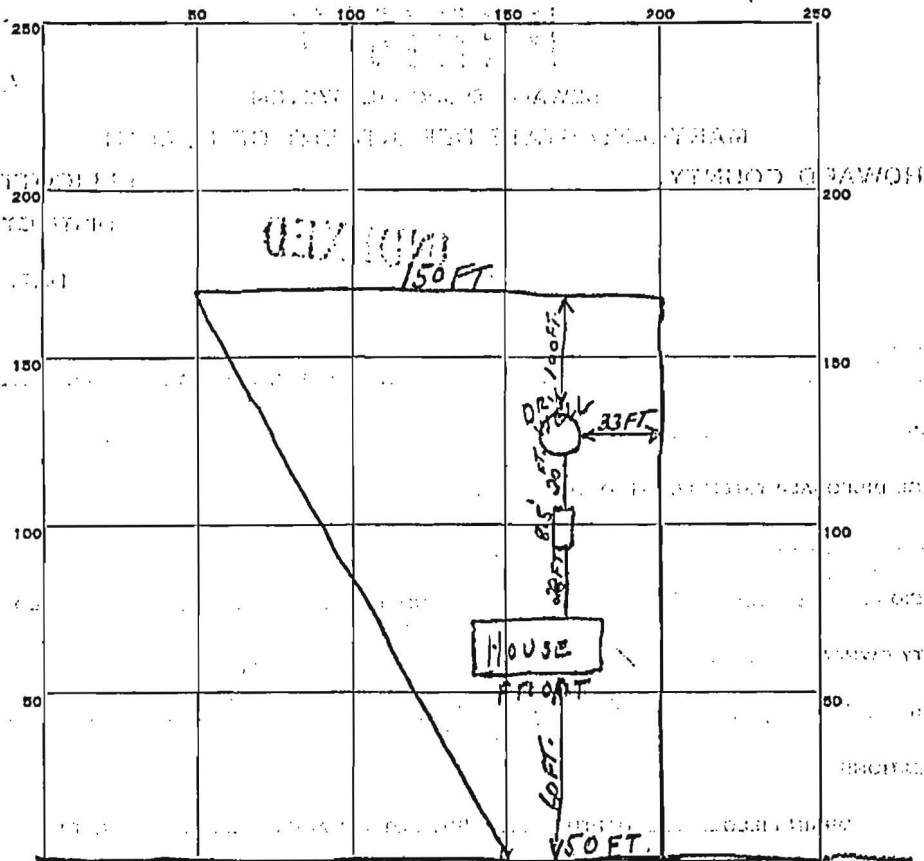
OTHER Place the dry well about 65 ft. from Lot 60 and about 100 ft. from the backline.

PLANS APPROVED BY Raymond Hodges DATE 7/24/59

FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

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

A01430



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

JAMES ST.

PERMIT CARD YES

SEPTIC TANK, LEVEL OK CLEANOUTS 1 - STAND PIPE

DISTRIBUTION BOX, LEVEL NONE

TILE FIELD, DEPTH _____ FT. TRENCH WIDTH _____ FT.

GRAVEL DEPTH _____ IN. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA _____

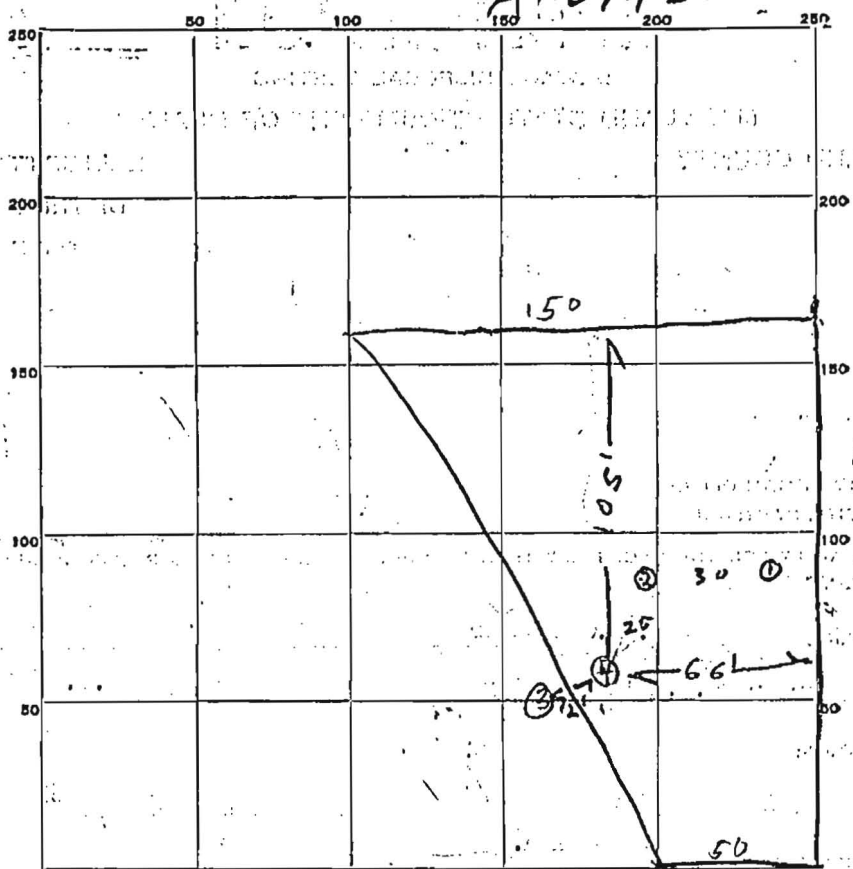
SEEPAGE PITS, INSIDE DIAMETER 12 FT. DEPTH BELOW INLET 10 FT. 8 in.

ABSORBENT AREA 394 SQ. FT.

REMARKS _____

DATE SYSTEM APPROVED 10-13-59 INSPECTOR J. Hengeman

A# 01430



Lot #60

INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.
 JAMES AVE TO BERGER DRIVE

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
7/29/59	1	3	1238	127	1"	49 min	
	2	3	1240	100	no perc	20 min	
	3	3	1242	1250	1253	1.00	10 min
	4	12	1103	107	111	123	12 min

SOIL AUGER FINDING: (4) Top 1' Clay Middle 2' Clay Sand Bottom 4' sand & sandstone

TESTED BY: Raymond Hodges

REMARKS: _____

ALSO PRESENT: C. M. Stoller LOT NO. 61

APPROVED

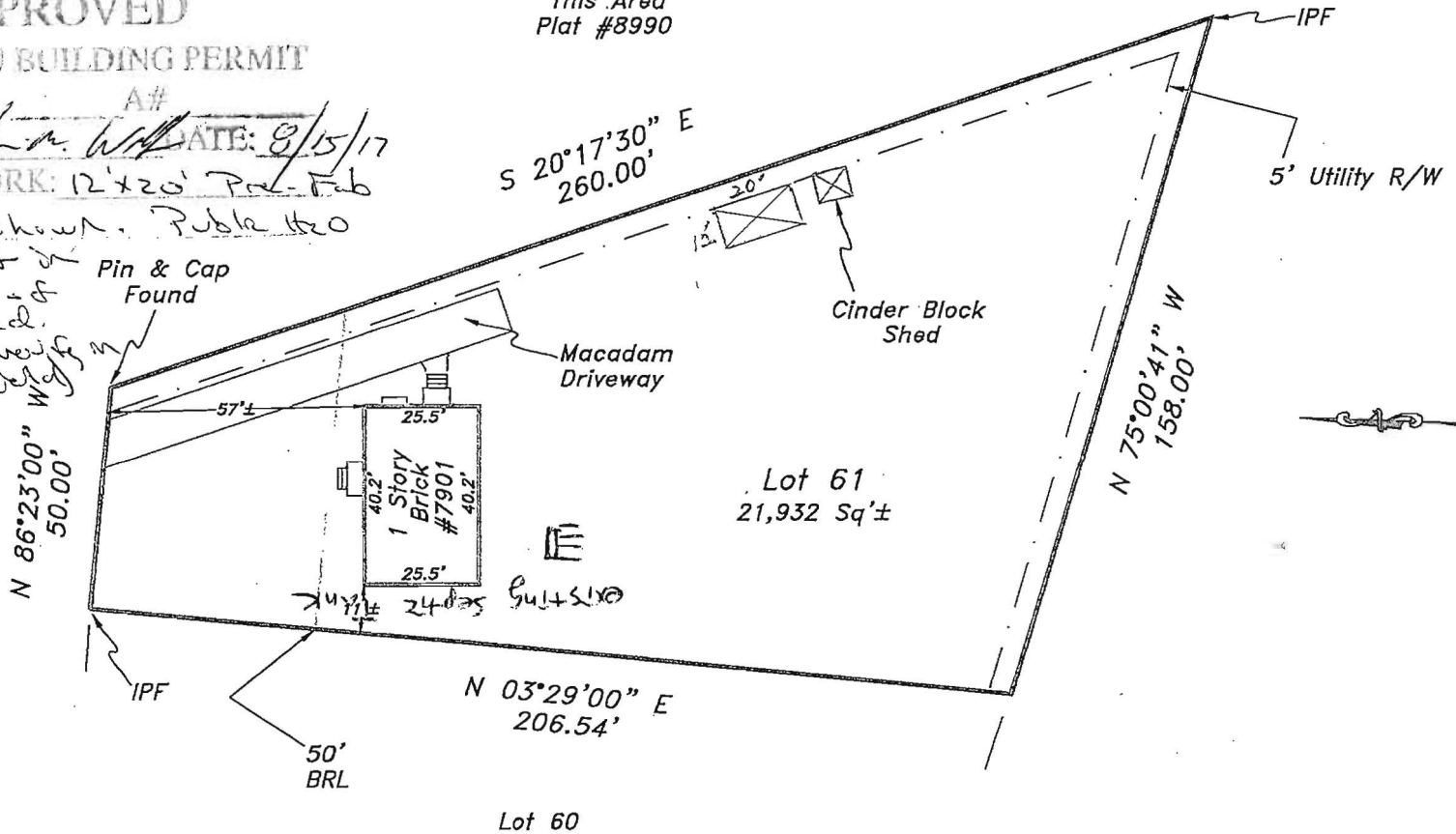
WALK-THRU BUILDING PERMIT

BP# _____ A# _____
APP. SAN *John W. [Signature]* DATE: 8/15/17
DESC. OF WORK: 12'x20' Pre-Fab

*shed as shown. Public Use
Sept 1st of year of shed.
(will verify date)*

This Area
Plat #8990

James Avenue
(aka James Street)



The purpose of this drawing is to locate, describe, and represent the positions of buildings and substantial improvements affecting the property shown hereon, being known as:

Lot 61, Map of
PLEASANT VIEW Section 4
recorded among the land records of Howard County, Maryland in
Plat Book 6 Plat 67

This is to certify that I either personally prepared or was in responsible charge over the preparation of this drawing and the surveying work reflected in it, all set forth in Regulation .12 of Chapter 09.13.06 of the Code of Maryland Annotated Regulations.

This is page one of a two page document. The advice found on the affixed page is an integral part of this drawing, and is not valid without all pages.



James Carl Hudgins
Property Line Surveyor #96
Expiration Date: 3/11/18

LOCATION DRAWING
7901 James Avenue
1st ELECTION DISTRICT
HOWARD COUNTY, MARYLAND

NTT Associates, Inc.
16205 Old Frederick Rd.
Mt. Airy, Maryland 21771
Phone: (410) 442-2031
Fax: (410) 442-1315
www.nttsurveyors.com

Scale: 1"= 40'
Date: 3-26-17
Field By: DR
Drawn By: DR
File No.: G17-677
Page No.: 1 of 2