



Health

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

Date Received: _____
Permit No.: B19002811

Building Address: 3273 Jones Rd.
 City: Woodbine State: MD Zip Code: 21797
 Suite/Apt. #: _____ SDP/WP/BA #: _____
 Subdivision: 1003
 Lot: 8 Tax Map: _____ Parcel: _____

Existing Use: residential
 Proposed Use: residential
 Estimated Construction Cost: \$ 4,200

Description of Work: Set 500 gallon Underground propane tank and connect to emergency generator

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

Property Owner's Name: David Groves
 Address: 3273 Jones Rd
 City: Woodbine State: MD Zip Code: 21797
 Phone: 240-506-2711 Fax: _____
 Email: bahfw30@yahoo.com

Applicant's Name & Mailing Address, (If other than stated herein)
 Applicant's Name: Steve Dannenfeldt
 Address: 230 Lincoln Way East
 City: New Oxford State: PA Zip Code: 17355
 Phone: 717-577-5923 Fax: _____
 Email: sdannenfeldt@aeroenergy.com

Contractor Company: Aero-Energy
 Contact Person: Steve Dannenfeldt
 Address: 230 Lincoln Way East
 City: New Oxford State: PA Zip Code: 17350
 License No.: 79809
 Phone: 717-577-5923 Fax: _____
 Email: sdannenfeldt@aeroenergy.com

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 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 type="checkbox"/> Public	
<input checked="" 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:	

HE 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.

SDannenfeldt
Applicant's Signature
sdannenfeldt@aeroenergy.com
Email Address

Steve Dannenfeldt
Print Name
8-26-19
Date
* mail *

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>9/4/19</u>	<u>H. Oswald</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:	

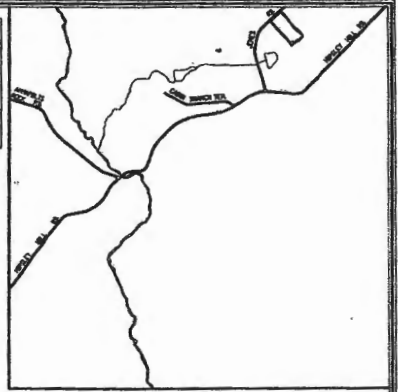
Filing Fee	\$ <u>110.00</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$
Check	# <u>1107</u>

SH

LEGEND

- - - - - EXISTING 2' CONTOURS
- - - - - EXISTING 10' CONTOURS
- - - - - EXISTING TREE LINE
- SOIL LINES AND TYPES
- ⊙ DENOTES PROPOSED WELL
- ⊙ DENOTES FAILED PERC
- ⊙ DENOTES PASSED PERC
- ALTERNATE WELL SITE

PERC CERTIFICATION
 I certify that the locations shown hereon were tested and analyzed under my direct supervision and are correct to the best of my knowledge and belief.
Terrell A. Fisher
 Signature of Professional Land Surveyor
 Terrell A. Fisher, Professional Land Surveyor No. 123456789
 6/4/13
 Date



GENERAL NOTES: **VICINITY MAP**
 SCALE: 1" = 1200'

1. THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF AT LEAST 10,000 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 ALL REASONABLE EFFORTS.
5. ALL HOUSE SITES SHOWN COMPLY WITH MINIMUM BUILDING RESTRICTION REGULATIONS.
6. THE EXISTING WELL AND SEPTIC SYSTEM SHALL BE UPGRADED PRIOR TO BUILDING PERMIT APPROVAL.
7. TOPOGRAPHY SHOWN IS FROM HOWARD COUNTY GPS TOPOGRAPHY AT 2' CONTOUR INTERVAL INTERPOLATED FOR 2' CONTOUR INTERVAL.
8. BOUNDARY OUTLINE BASED ON AVAILABLE DEED OF RECORD WITHOUT THE BENEFIT OF A FIELD SURVEY AT THIS TIME.
9. ANY CHANGES TO A PRIVATE SEWERAGE EASEMENT SHALL REQUIRE A REVISED PERC CERTIFICATION PLAN.
10. DEED REFERENCE LIBER 3078 FOLIO 63.
11. THIS PLAN IS IN SUPPORT OF AN ADDITION TO INCLUDE AN ADDITIONAL BEDROOM.

SOILS LEGEND

SOIL	NAME	CLASS
GbB	Gladstone loam, 3 to 6 percent slopes	D
GbC	Gladstone loam, 6 to 12 percent slopes	B
GmB	Glenville silt loam, 3 to 6 percent slopes	C

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

FISHER, COLLINS & CARTER, INC.
 CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS
 CENTRAL SQUARE OFFICE PARK • 10725 BALDWIN NATIONAL PIKE
 ELLESMERE CITY, MARYLAND 21042
 410-821-7895

APPROVED FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS,
 HOWARD COUNTY HEALTH DEPARTMENT.
William A. Moore
 COUNTY HEALTH OFFICER
 DATE: 7/15/2013

PERC RECERTIFICATION PLAT
MILL GREEN
 LOT 8

TAX MAP #20 GRID #3 PARCEL: 36
 4TH ELECTION DISTRICT HOWARD COUNTY, MARYLAND
 SCALE: 1"=50' DATE: JUNE 4, 2013