

PERMIT NUMBER: B 770017331

DATE ACCEPTED:



RESIDENTIAL BUILDING PERMIT APPLICATION

HOWARD COUNTY DEPARTMENT OF INSPECTIONS, LICENSES, AND PERMITS

3430 COURT HOUSE DRIVE, ELLICOTT CITY, MD 21043 - PHONE: (410) 313-2455 OPTION #4

www.howardcountymd.gov

BUILDING SITE ADDRESS REQUIRED

Street Address: 2560 Jennings Chapel Rd			Unit:	
City: Woodbine		State: MD		Zip Code: 21797
Subdivision/Village/Complex Name:			SDP/WP/BA #:	
Lot:	Tax Map:	Parcel:	Grading Permit #:	

DESCRIPTION OF WORK REQUIRED

Existing Use: Carpet	Proposed Use: Move carpet	Estimated Cost: \$ 4,000
Trade Work to Be Completed (Separate Permits Required): <input type="checkbox"/> Mechanical (HVACR) <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> None		
I plan to move an existing 24' X 24' carpet to a location approximately 100' from where it is now.		

PROPERTY OWNER INFORMATION REQUIRED

Owner(s) Name(s) (As it appears on tax records): Paul G. Shoffert		Primary Residence: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Owner's Street Address: 2560 Jennings Chapel Rd		
City: Woodbine	State: MD	Zip Code: 21797
Phone: 442-546-7797	Email: paulshoffert@gmail.com	

APPLICANT NAME REQUIRED - INDIVIDUAL WHO SIGNS THIS APPLICATION

Business Name:	Contact Name:	
Street Address: Owner		
City:	State:	Zip Code:
Phone:	Email:	

CONTRACTOR INFORMATION REQUIRED

Business Name:		
Licensee's Name:	License #:	
Street Address:		
City:	State:	Zip Code:
Phone:	Email:	

ARCHITECT/ENGINEER INFORMATION INDIVIDUAL WHO SIGNED PLANS, IF APPLICABLE

Business Name:	Name:	
Street Address:		
City:	State:	Zip Code:
Phone:	Email:	

BUILDING CHARACTERISTICS REQUIRED

Primary Structure: <input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> SF Duplex <input type="checkbox"/> Mobile Home <input type="checkbox"/> Multi-Family Dwelling (MF*)		Condo: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Utilities: <input type="checkbox"/> Electric <input checked="" type="checkbox"/> Gas	Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private (Well)	Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private (Septic)
Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Propane <input type="checkbox"/> Other:		Roadside Tree Project: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes: #
Sprinkler System: <input type="checkbox"/> NFPA 13 <input type="checkbox"/> NFPA 13R <input type="checkbox"/> NFPA 13D <input checked="" type="checkbox"/> None		Fire Alarm System: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Voice Evac

ADDITIONAL RESIDENTIAL INFORMATION (PLEASE SELECT/COMPLETE ALL THAT APPLY)

Model Name & Options:					
# of Bedrooms (SF):	# of efficiency units (MF*):	# of 1 BR (MF*):	# of 2 BR (MF*):	# of 3 BR (MF*):	
# Rooms:	# Full Baths:	# Half Baths:	# Fireplaces:		
Garage/Carport Info: <input type="checkbox"/> Attached Garage <input type="checkbox"/> Detached Garage <input type="checkbox"/> Integral Garage <input type="checkbox"/> Carport <input type="checkbox"/> None					
Basement/Foundation Info: <input type="checkbox"/> Slab on Grade <input type="checkbox"/> Post & Pier <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Finished Basement: <input type="checkbox"/> Full or <input type="checkbox"/> Partial					
1st Fl Width:	1st Fl Depth:	2nd Fl Width:	2nd Fl Depth:	Bsmt Width:	Bsmt Depth:
Energy Method: <input type="checkbox"/> Prescriptive <input type="checkbox"/> Performance <input type="checkbox"/> IIA Alternative <input type="checkbox"/> FRT		Gross Area:	sq ft	Occupiable Area:	sq ft

LAYOUT 5/19/09 INSP 4 _____
 INSP 2 5/20/09 INSP 5 _____
 INSP 3 5/21/09 INSP 6 _____

ISSUE DATE: 5/11/09
 APPROVAL DATE: 5/21/09

PERMIT

P 530994
 A 520334

Tax ID # 04-370546

**ON-SITE SEWAGE DISPOSAL SYSTEM
 HOWARD COUNTY HEALTH DEPARTMENT
 BUREAU OF ENVIRONMENTAL HEALTH**

FREEDOM SEPTIC SERVICE, INC IS PERMITTED TO INSTALL ALTER

ADDRESS: 2809 LIBERTY Ad PHONE NUMBER: 410-795-2940

SUBDIVISION: Chapel View LOT NUMBER: 5

ADDRESS: 2560 Jennings Chapel Road PROPERTY OWNER: Paul Shoffeitt

SEPTIC TANK CAPACITY (GALLONS): 1500 OUTLET BAFFLE FILTER REQUIRED

PUMP CHAMBER CAPACITY (GALLONS): _____ COMPARTMENTED TANK REQUIRED

NUMBER OF BEDROOMS: 3 APPLICATION RATE: _____

SQUARE FOOTAGE OF HOUSE: 1960

LINEAR FEET OF TRENCH REQUIRED: 120

TRENCHES:	Trenches to be 2.0 feet wide. Inlet 3.5 feet below original grade. Bottom maximum depth 5.5 feet below grade. Effective area begins at 4.0 feet below original grade. 2.0 feet of stone below distribution pipe.
LOCATION:	Set septic tank near planned location, 90 feet from foundation. Septic tank Invert In should be only 2.5 feet from soil surface. Set distribution box at top (east) boundary 40 feet from north septic easement corner. Install 3x40ft. trenches on contour, 2 to the south in top center of easement and the 3 rd trench (from below trench 2) toward east boundary of easement.
NOTES:	Install cleanout in sewer line 70 feet or less from foundation. Surveyor must stake septic easement corners. Call for layout inspection. Mark utilities. Gravel tickets must be available for Environmental Sanitarians.

PLANS APPROVED: Robert Bricker DATE: 3/13/09

- NOTE: PERMIT VOID AFTER 2 YEARS
- NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
- NOTE: WATERTIGHT SEPTIC TANKS REQUIRED
- NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL
- NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS

NEITHER THE HOWARD COUNTY COUNCIL OR 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 FOR INSPECTION OF SEPTIC SYSTEM

H0-95-
0177
A510

2560
Sentry's
Chapel Rd.

58'

63'

153'

63'

102'

49'

106'

14'

123'

20'

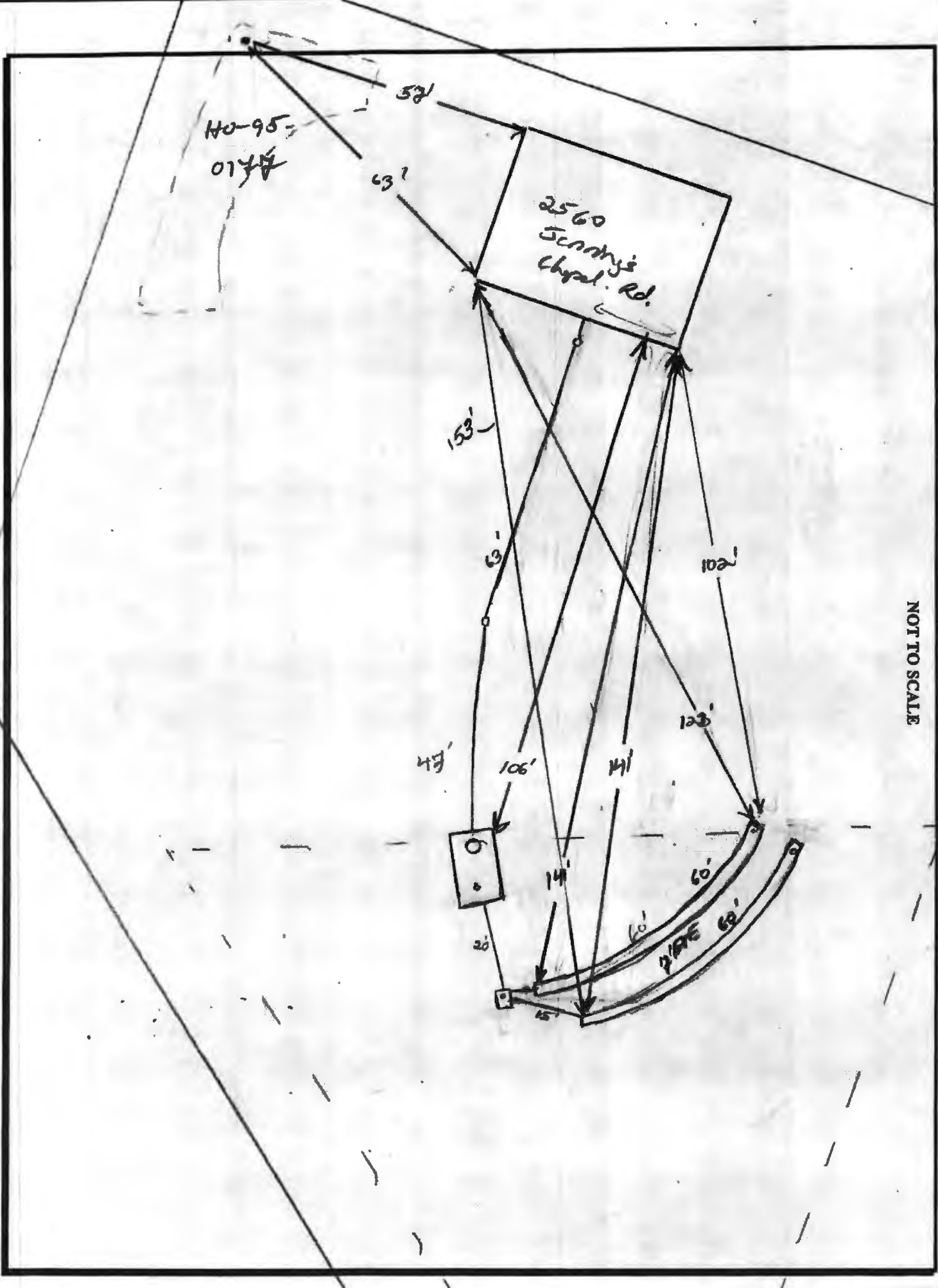
14'

60'

60'

PIPE 60'

NOT TO SCALE



LOT 4
CHAPEL VIEW FARM
Plat #18107

CHAPEL LOT 4
CHAPEL VIEW FARM
Plat #18107

LOT 5
1.00 Acre

BENNETT MARGARET P L/E
L. 6031 F. 1510
L. 7019

LOT 4
CHAPEL VIEW FARM
Plat #18107

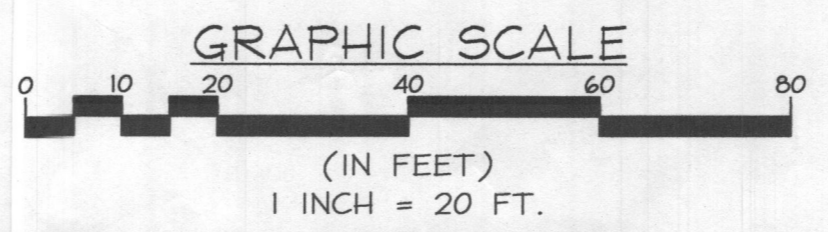
LOT 4
CHAPEL VIEW FARM
Plat #18107

SURVEY STAKE-OUT WORKSHEET
FOR PROPOSED CONCRETE PAD
CHAPEL VIEW FARM
LOT 5

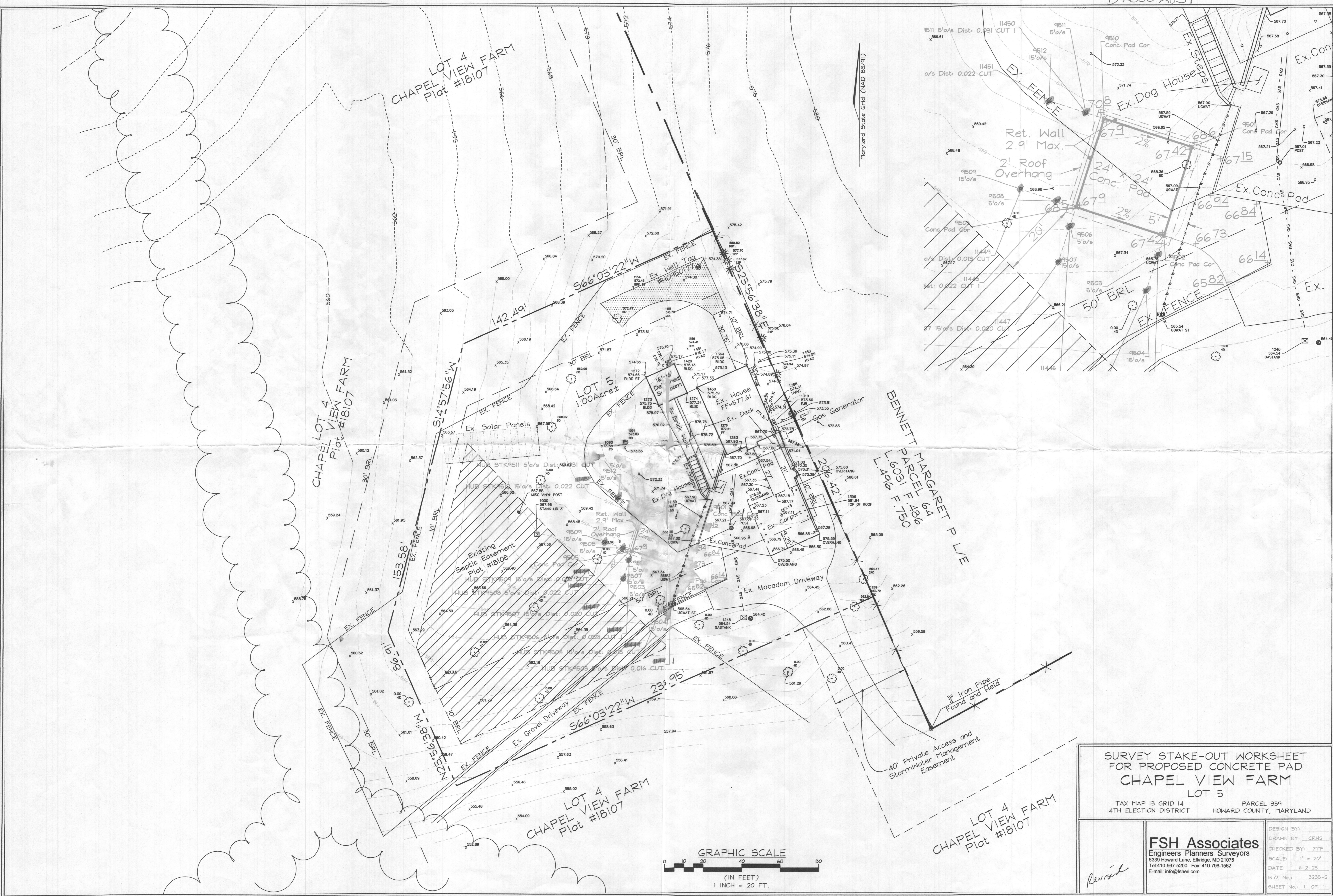
TAX MAP 13 GRID 14 PARCEL 339
4TH ELECTION DISTRICT HOWARD COUNTY, MARYLAND

FSH Associates
Engineers Planners Surveyors
6339 Howard Lane, Elkridge, MD 21075
Tel: 410-567-5200 Fax: 410-798-1562
E-mail: info@fsher.com

DESIGN BY: ---
DRAWN BY: CRH2
CHECKED BY: JTF
SCALE: 1" = 20'
DATE: 6-2-23
P.O. No.: 8235-2
SHEET No.: 1 OF 1



Rev. 4/23





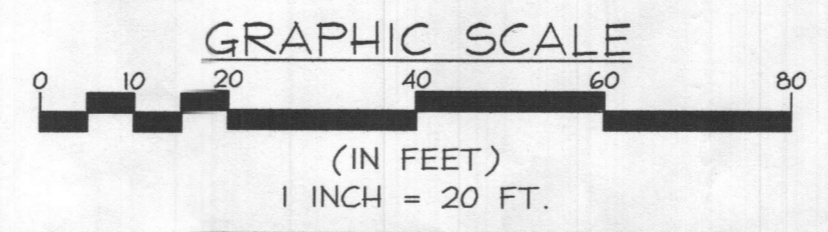
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Plat #18107

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LOT 4
CHAPEL VIEW FARM
Plat #18107

BENNETT MARGARET P L/E
PARCEL F 18100



EXISTING CONDITIONS PLAN, AS SURVEYED CHAPEL VIEW FARM LOT 5	
TAX MAP 13 GRID 14	PARCEL 339
4TH ELECTION DISTRICT	HOWARD COUNTY, MARYLAND
1823002841	FSH Associates Engineers Planners Surveyors 6338 Howard Lane, Elkridge, MD 21075 Tel: 410-567-5200 Fax: 410-796-1562 E-mail: info@fisher.com
DESIGN BY: _____	DRAWN BY: CRH2
CHECKED BY: JTF	SCALE: 1" = 20'
DATE: 9-18-23	W.O. No.: 3295-2
SHEET No.: 1 OF 1	

P:\Chapel View\18100\18100_Site Plan.dwg, 9/18/2023 11:03:18 AM, DWG by: FSH (GMD), Plot: 18100.dwg, 9/18/2023 11:03:18 AM, 11