

Approved
see 5/10/24

Record Detail (This section is required.)

Permit Type Building/Residential/Misc/Pavilion Permit Number B24001634 Opened Date 05/05/2024
Description of Work SFD/ CONSTRUCT A 20' x 22" open pavilion in rear yard & 27' x 21' deck on rear of SFD

Online BF.
-ZS 5/10/24

[check spelling](#)

Address (This section is required.)

Search Reset Clear Get Parcel & Owner

Street # 2730 Street Name JENNINGS CHAPEL Street Type RD
Unit Type --Select-- Unit # X Coordinate -77.10357 Y Coordinate 39.29098
City WOODBINE State MD Zip Code 21797 Primary Yes

Parcel (This section is required.)

Search Reset Clear Get Address & Owner

GIS ID 11061716 Parcel 0109 Parcel Area 0 Land Value 0 Improved Value 0 Exemption Value 0 Plan Area RURAL

Legal Description

[check spelling](#)

Block 21 Lot A Census Tract 605601 Council Dist 5 Inspection Dist Supervisor Dist Map # DAP Zone
Plan Area State Tax Id Subdivision Name Savage Property
Section Area Tax Map 13
Grid 13-21 Zoning District RC-DEO ADC Map 4811-D4
SDP No. Final Plan No. F-21-042 WP File No.
Record Plat No. 26014-2601 WS Contract No. FDP No. Primary Yes
Owner Occupied Year Built Historic District
 Yes No Yes No
Historic District Registry No. Stat Area 4-07 Flood Plain
 Yes No
Building No

Owner (This section is required.)

Search Reset Clear

Name Anthon
Address Line 1 2730 Jennings Chapel Road

Address Line 2

Address Line 3

Mail City

Woodbine

Mail State

MD

Mail Zip Code

21797

Phone

410-984-0851

Primary

Yes

E-mail

Cell Number

Fax Number

Professionals (This section is not required.)

License #

08010099528

License Type

MHIC Ind

Primary

Yes

Business Name

BERARDUCCI CONTRACTING

First Name

CHRISTOPHER

Middle Name

Last Name

BERARDUCCI

Address Line 1

1508 ABELL DRIVE

Address Line 2

City

WESTMINSTER

State

MD

ZIP Code

21157-0000

Phone 1

4437979409

Phone 2

Fax

E-mail

CFUCO1@HOTMAIL.COM

Applicant (This section is not required.)

Search

As Owner

As Lic. Prof

As Contact

Type

Applicant

Relationship

Applicant

Primary

Yes

First Name

CHRIS

MI

M

Last Name

BERARDUCCI

Full Name

CHRIS M BERARDUCCI

Organization Name

BERARDUCCI BUILDERS LLC

Street Address

1508 ABELL DRIVE

Address Line 2

City

WESTMINSTER

State

MD

Zip Code

21157

Phone

443-797-9409

Cell

Fax

E-mail

CFUCO1@HOTMAIL.COM

Addtl Info

Est Construction Cost

70000

Housing Units

0

Number of Buildings

0

Public Owned

No

Construction Type

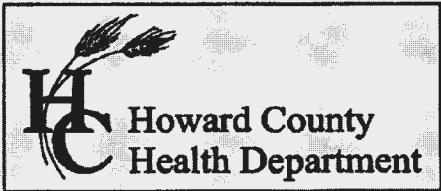
434 - Additions, Alterations and Conversions - Residential

PAVILION

PAVILION INFORMATION

Capital Project-No Fee	Capital Project Number	Fee Exempt	Roadside Tree Project Permit	Roadside Tree Project Permit #
<input type="radio"/> Yes <input checked="" type="radio"/> No	(Text)	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No	(Text)
Existing Use	Total Square Footage	Water Supply	Sewage Disposal	Expiration Date
SFD	▼ 440	SQFT (Number) Private	▼ Private	▼ 11/4/2024

Submit **Cancel**



Bureau of Environmental Health
 8930 Stanford Boulevard, Columbia, MD 21045
 Main: 410-313-2640 | Fax: 410-313-2648
 TDD 410-313-2323 | Toll Free 1-866-313-6300
www.hchealth.org
 Facebook: www.facebook.com/hocohealth

Maura J. Rossman, M.D., Health Officer

RECEIPT DATE: 11/7/22 **ONSITE SEWAGE DISPOSAL SYSTEM** P 572694
 APPROVAL DATE: 2/10/23 **PERMIT: CONSTRUCTION** A _____
 PROPERTY ADDRESS: 2730 JENNINGS CHAPEL ROAD, WOODBINE, MD 21797
 SUBDIVISION: SAVAGE PROPERTY LOT: P. 'A' TAX ID: 04-327268
 CONTRACTOR: Pogles Septic Clean Inc EMAIL: Kmp@poglesinc.com
 CONTRACTOR ADDRESS: 580 Dorcht. Rd, Sykesville, MD 21784 PHONE: 410-795-5670
 PROPERTY OWNER: JENNY & ANTHONY BERARUCCI EMAIL: _____
 OWNER ADDRESS: 13904 RYON DRIVE, GLENELG, MD 21737 PHONE: (443)797-9409
 SEPTIC TANK SIZE (GALLONS): 2000 TANK MANUFACTURER: MAYER BROS., INC.
 PUMP MODEL: n.a. PUMP SIZE n.a. PUMP TANK CAPACITY: n.a.

DISTRIBUTION SYSTEM: GRAVITY PRESSURE DOSED BEDROOMS: 6 APPLICATION RATE: 1.2

TRENCHES:	LINEAR FEET REQUIRED: <u>104</u>	INLET DEPTH: <u>2.0</u>
	TRENCH WIDTH: <u>3</u>	MAXIMUM BOTTOM DEPTH: <u>7.0</u>
	MINIMUM SPACE BETWEEN TRENCHES: <u>11</u>	EFFECTIVE AREA BEGINNING DEPTH: <u>3.0</u>
LOCATION:	PER APPROVED SITE PLAN. SEWAGE DISPOSAL AREA AND TANK LOCATIONS MUST BE STAKED BY LICENSED SURVEYOR PRIOR TO PRE-CONSTRUCTION INSPECTION.	
NOTES:	INSTALL AT LEAST 2 CLEANOUTS IN SHC. LOCATE AND PROPERLY ABANDON EXISTING SEPTIC TANK IF IT WAS NOT ABANDONED DURING DEMOLITION.	

ISSUED BY: R BRICKER ISSUE DATE: 11-28-22 EXPIRATION DATE: 11-7-23

- NOTE: CONTRACTOR MUST SCHEDULE A PRE-CONSTRUCTION INSPECTION PRIOR TO BEGINNING ANY INSTALLATION
- NOTE: CONTRACTOR MUST SCHEDULE AN INSPECTION AND GAIN APPROVAL OF ALL COMPONENTS PRIOR TO COVERING
- NOTE: STONE MUST BE APPROVED BY HEALTH DEPARTMENT AND GRAVEL TICKET MUST BE AVAILABLE FOR REVIEW.
- NOTE: WATERTIGHT TANKS REQUIRED
- NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE AT LEAST 100 FEET DOWNGRADE FROM ANY WATER WELL
- NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS
- NOTE: AN ELECTRICAL PERMIT IS REQUIRED FOR INSTALLATION OF ANY ELECTRICAL COMPONENTS OF THE SYSTEM
 ELECTRICAL PERMIT ISSUED E n.a.
- NOTE: MDE RECOMMENDS SEPTIC TANKS, BAT, AND OTHER PRETREATMENT UNITS BE PUMPED AT A FREQUENCY ADEQUATE TO ENSURE THAT SOLIDS ARE NOT DISCHARGED TO THE DISPOSAL AREA

**NEITHER THE HOWARD COUNTY COUNCIL NOR 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 TO SCHEDULE INSPECTIONS.**

