

B1000 2452

Building Address 13707 Grey Fox Run
Colesburg Maryland 21737

Suite/Apt. #: _____ SDP/WP/Petition #: _____

Census Tract _____ Subdivision Foxtail Run

Section _____ Area _____ Lot 2

Tax Map _____ Parcel _____ Grid _____

Zoning R-1 Map Coordinates _____ Lot Size _____

Property Owner's Name Byler Homes Inc.
 Address P.O. Box 68
 City Colesburg State MD Zip Code 21738
 Home Phone _____ Work Phone _____
 Applicant's Name & Mailing Address, (if other than stated herein):

 Phone _____ Fax _____

Existing Use Vacant Lot
 Proposed Use Single Family Dwelling
 Estimated Construction Cost \$ 173,000
 Description of Work _____

 Occupant or Tenant _____
 Contact Name _____
 Address _____
 City _____ State _____ Zip Code _____
 Phone _____ Fax _____

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

Engineer or Architect Company _____
 Contact Person _____
 Address _____
 City _____ State _____ Zip Code _____
 Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: _____	Water Supply: _____ _____ Public _____ Private
No. of stories: _____	Sewage Disposal: _____ _____ Public _____ Private
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ State Certified Modular	Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
	Sprinkler system: N/A <input type="checkbox"/> _____ Full _____ Partial _____ Other Suppression _____ # of Heads

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: _____ _____ Public _____ Private
Depth _____ Width _____	Sewage Disposal: _____ _____ Public _____ Private
1 st floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
2 nd floor: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: _____	Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Propane Gas <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Sprinkler system: N/A <input type="checkbox"/> _____ NFPA #13D _____ NFPA #13R _____ Other:
No. of Bedrooms <u>4</u>	
Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	
Other Structure: _____ Dimensions: _____ Footings: _____ Roof: _____	
_____ State Certified Modular _____ Manufactured Home	

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 _____

Print Name _____

Email Address _____

Title/Company _____

Date _____

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
 PLEASE WRITE NEATLY AND LEGIBLY.

- FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE	APPROVAL
Land Development, DPZ			
State Highways			
Building Officials			
Dev. Engineering, DPZ			
Health	8-5-10	Debra Spitt	
Fire Protection			

DPZ SETBACK INFORMATION

Front: _____
 Rear: _____
 Side: _____
 Side St.: _____
 All minimum setbacks met?
 YES NO

	PROPERTY ID #
Filing fee	\$ _____
Permit fee	\$ _____
Excise tax	\$ _____
Add'l per fee	\$ _____
TOTAL FEES	\$ _____
Sub-total paid	\$ _____

Is Sediment Control approval required prior to issuance?
 YES NO

Is Entrance Permit Required?
 YES NO
 Historic District?
 YES NO

Balance due \$ _____
 Check # _____
 Validation # _____

CONTINGENCY CONSTRUCTION START:
 ONE STOP SHOP:

Lot Coverage for New Town Zone _____
 SDP/Red-line approval date _____

Accepted by _____

HOWARD SOIL CONSERVATION DISTRICT PERMANENT SEEDING NOTES

APPLY TO GRADED OR CLEARED AREAS NOT SUBJECT TO IMMEDIATE FURTHER DISTURBANCE WHERE A PERMANENT LONGLIVED VEGETATIVE COVER IS NEEDED.

SEEDBED PREPARATION: LOOSEN UPPER THREE INCHES OF SOIL BY RAKING, DISKING OR OTHER ACCEPTABLE MEANS BEFORE SEEDING, IF NOT PREVIOUSLY LOOSENED.

SOIL AMENDMENTS IN LIEU OF SOIL TEST RECOMMENDATIONS, USE ONE OF THE FOLLOWING SCHEDULES:

1) PREFERRED- APPLY 2 TONS PER ACRE DOLOMITIC LIMESTONE (92 LBS./1000 SQ.FT.) AND 600 LBS. PER ACRE 10-10-10 FERTILIZER (14 LBS./1000 SQ. FT.) BEFORE SEEDING. HARROW OR DISK INTO UPPER THREE INCHES OF SOIL. AT TIME OF SEEDING, APPLY 400 LBS. PER ACRE 30-0-0 UREAFORM FERTILIZER (9 LBS./1000 SQ. FT.)

2) ACCEPTABLE- APPLY 2 TONS PER ACRE DOLOMITIC LIMESTONE (92 LBS./1000 SQ. FT.) AND 1000 LBS. PER ACRE 10-10-10 FERTILIZER (23 LBS./1000 SQ.FT.) BEFORE SEEDING. HARROW OR DISK INTO UPPER THREE INCHES OF SOIL.

SEEDING- FOR THE PERIODS MARCH 1 THROUGH APRIL 30, AND AUGUST 1 THROUGH OCTOBER 15, SEED WITH 60 LBS. PER ACRE (1.4 LBS./1000 SQ. FT.) OF KENTUCKY 31" TALL FESCUE, FOR THE PERIOD MAY 1 THROUGH JULY 31, SEED WITH 60 LBS. KENTUCKY 31" TALL FESCUE PER ACRE AND 2 LBS. PER ACRE (0.5 LBS./1000 SQ.FT.) OF WEEPING LOVEGRASS, DURING THE PERIOD OF OCTOBER 16 THROUGH FEBRUARY 28. PROTECT SITE BY: OPTION (1) 2 TONS PER ACRE OF WELL-ANCHORED STRAW MULCH AND SEED AS SOON AS POSSIBLE IN THE SPRING. OPTION (2)- USE SOD. OPTION (3)- SEED WITH 60 LBS./ACRE KENTUCKY 31" TALL FESCUE AND MULCH WITH 2 TON/ACRE WELL-ANCHORED STRAW.

MULCHING- APPLY 1-1/2 TO 2 TONS PER ACRE (70 TO 90 LBS./1000 SQ. FT.) OF UNROTTED SMALL GRAIN STRAW IMMEDIATELY AFTER SEEDING. ANCHOR MULCH IMMEDIATELY AFTER APPLICATION USING A MULCH ANCHORING TOOL OR 218 GALLONS PER ACRE (5 GAL/1000 SQ.FT.) OF EMULSIFIED ASPHALT ON FLAT AREAS ON SLOPES OF 8 FEET OR HIGHER, USE 348 GALLONS PER ACRE (8 GAL/1000 SQ.FT.) FOR ANCHORING.

MAINTENANCE- INSPECT ALL SEEDING AREAS AND MAKE NEEDED REPAIRS, REPLACEMENTS AND RESEEDINGS.

TEMPORARY SEEDING NOTES

APPLY TO GRADED OR CLEARED AREAS LIKELY TO BE REDISTURBED WHERE A SHORT TERM VEGETATIVE COVER IS NEEDED.

SEEDBED PREPARATION: LOOSEN UPPER THREE INCHES OF SOIL BY RAKING, DISKING, OR OTHER ACCEPTABLE MEANS BEFORE SEEDING IF NOT PREVIOUSLY LOOSENED.

SOIL AMENDMENTS: APPLY 600 LBS. PER ACRE 10-10-10 FERTILIZER (14 LBS./1000 SQ.FT.)

SEEDING: FOR PERIODS MARCH 1 THROUGH APRIL 30 AND AUGUST 15 THROUGH OCTOBER 15, SEED WITH 2-1/2 BUSHEL PER ACRE OF ANNUAL RYE (3.2 LBS./1000 SQ. FT.) FOR THE PERIOD OF MAY 1 THROUGH AUGUST 14, SEED WITH 3 LBS. PER ACRE OF WEEPING LOVEGRASS (0.7 LBS./1000 SQ.FT.) FOR THE PERIOD OF NOVEMBER 16 THROUGH NOVEMBER 28, PROTECT SITE BY APPLYING 2 TONS PER ACRE OF WELL ANCHORED STRAW MULCH AND SEED AS SOON AS POSSIBLE IN THE SPRING, OR USE SOD.

MULCHING: APPLY 1-1/2 TO 2 TONS PER ACRE (70 TO 90 LBS./1000 SQ.FT.) OF UNROTTED WHEED FREE SMALL GRAIN STRAW IMMEDIATELY AFTER SEEDING. ANCHOR IMMEDIATELY AFTER APPLICATION USING MULCH ANCHORING TOOL OR 218 GAL PER ACRE (5 GAL/1000 SQ.FT.) OF EMULSIFIED ASPHALT ON FLAT AREAS. ON SLOPES 8 FEET OR HIGHER, USE 348 GAL PER ACRE (8 GAL/1000 SQ.FT.) FOR ANCHORING.

REFER TO THE 1983 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL FOR ADDITIONAL RATES AND METHODS NOT COVERED.

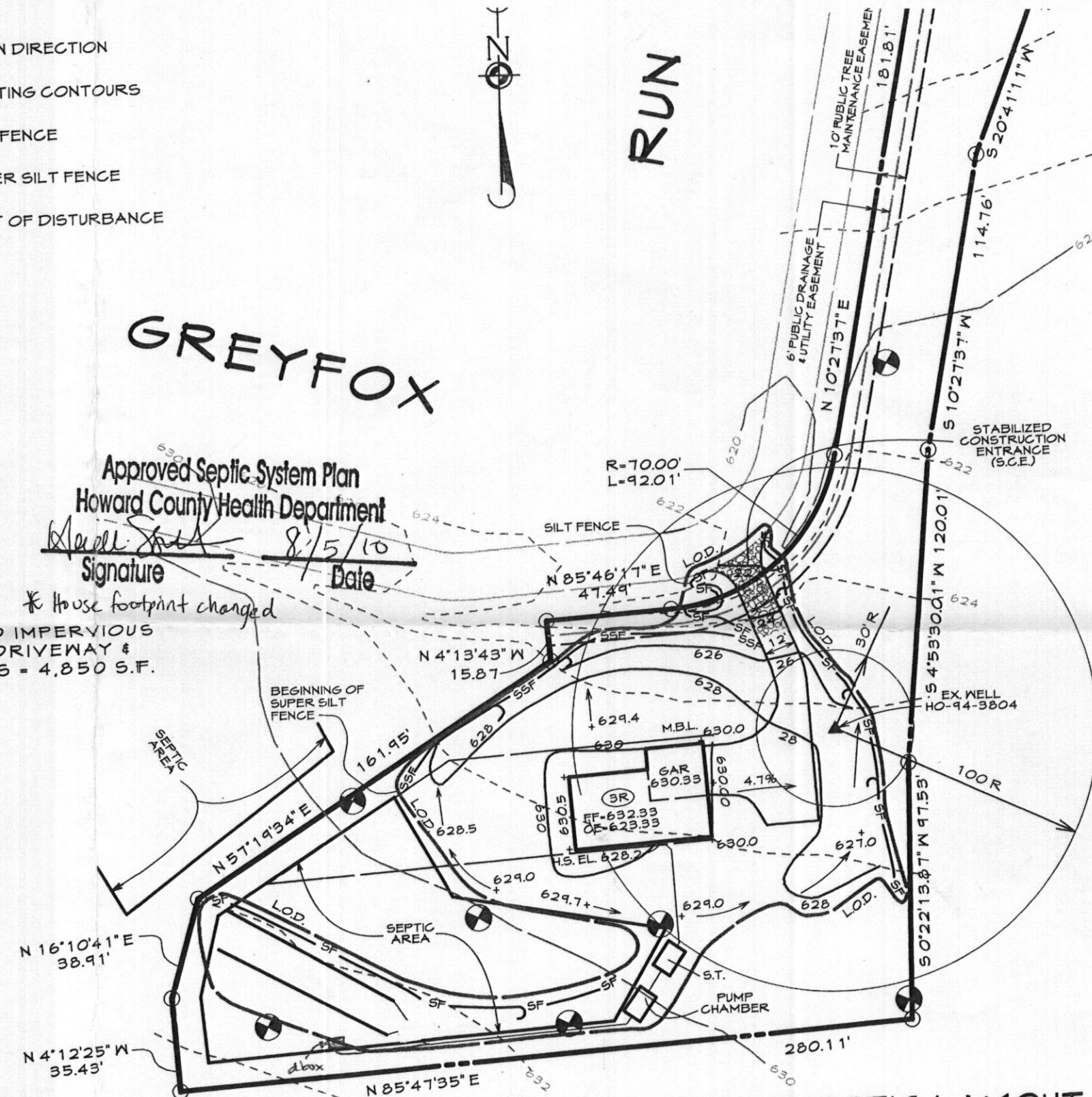
SEPTIC SYSTEM NOTES

1. SEPTIC EASEMENT SUBJECT TO HOWARD COUNTY HEALTH DEPARTMENT NO.
2. PROPOSED 1500 GALLON SEPTIC TANK.
3. A. FIRST FLOOR ELEVATION: 632.33
B. BASEMENT ELEVATION: 623.33
C. INVERT OF SEPTIC SYSTEM AT HOUSE: 628.20
D. INVERT AT SEPTIC TANK: 627.20
E. INVERT OUT AT SEPTIC TANK: 626.90
F. PROPOSED GRADE OVER SEPTIC TANK: 629.50
G. INVERT AT DISTRIBUTION BOX: 631.00
H. EXISTING GROUND OVER DISTRIBUTION BOX: 633.00
4. LENGTH OF TRENCH TO BE DETERMINED AT TIME OF SEPTIC PERMIT ISSUANCE.
5. CONTRACTOR / BUILDER TO VERIFY ELEVATIONS IN FIELD BEFORE BEGINNING ANY CONSTRUCTION.

BUILDER TO VERIFY AVAILABILITY OF BASEMENT SEWER SERVICE PRIOR TO DWELLING STAKEOUT.

PUMP CHAMBER NOTES

- ENTRANCE
- DENOTES FLOW DIRECTION
- DENOTES EXISTING CONTOURS
- DENOTES SILT FENCE
- DENOTES SUPER SILT FENCE
- DENOTES LIMIT OF DISTURBANCE



NOTE: TOTAL PROPOSED IMPERVIOUS AREA INCLUDING DRIVEWAY & HOUSE ROOF TOPS = 4,850 S.F.

L.O.D.-DENOTES LIMIT OF DISTURBANCE TOTAL AREA=23,800 S.F.

HOUSE GRADING & SEPTIC LAYOUT SCALE: 1"=50'

THIS AREA DESIGNATES A PRIVATE SEPTIC RESERVE AREA OF 10,000 SQUARE FEET AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWAGE IS AVAILABLE. THIS RESERVE AREA SHALL BECOME NULL AND VOID UPON CONNECTION OF PUBLIC SEWAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT ADJUSTMENTS TO THE PRIVATE SEWAGE RESERVE AREA. RECORDATION OF A MODIFIED SEWAGE EASEMENT SHALL NOT BE NECESSARY.

APPROVED FOR PRIVATE WATER AND PRIVATE SEWAGE SYSTEMS, HOWARD COUNTY HEALTH DEPARTMENT

ENGINEER: THAT THIS PLAN FOR EROSION AND SEDIMENT CONTROL IS A PRACTICAL AND WORKABLE PLAN BASED ON MY PERSONAL KNOWLEDGE OF THE SITE CONDITIONS. THIS PLAN WAS PREPARED IN ACCORDANCE WITH THE REQUIREMENTS OF THE HOWARD SOIL CONSERVATION DISTRICT.

DATE: 22 July 08

DEVELOPER'S CERTIFICATE: I, the undersigned, hereby certify that all development and construction will be done in accordance with this plan and that any responsible persons engaged in the construction project will have a certificate of approval from a department of the environment approved program for the control of sediment and erosion before the project. I also authorize periodic inspection by the HOWARD SOIL CONSERVATION DISTRICT OR THEIR AUTHORIZED AGENTS.

DATE: 7/22/08

STANDARDS AND SPECIFICATIONS FOR TOPSOIL CONSTRUCTION AND MATERIAL SPECIFICATIONS

I. Topsoil salvaged from the existing site may be used provided that it meets the standards as set forth in these specifications. Typically, the depth of topsoil to be salvaged for a given soil type can be found in the representative soil or site section in the survey submitted by USDA-SCS in cooperation with Maryland Agricultural Experiment Station.

II. Topsoil specifications - Soil to be used as topsoil must meet the following:

- Topsoil shall be a loam, sandy loam, clay loam, silt loam, sandy clay loam, loamy sand. Other soils may be used if recommended by an agronomist or soil scientist and approved by the appropriate authority. Representative topsoil shall not be a mixture of contrasting textured subsoils and shall contain less than 5% by volume of cinders, stones, slag, concrete fragments, gravel, sticks, roots, trash, or other materials larger than 1" in diameter.
- Topsoil must be free of plants or plant parts such as Bermuda grass, quack grass, Johnson grass, nutgrass, poison ivy, thistle, or others as specified.
- If the subsoil is either highly acidic or composed of heavy clay, ground limestone shall be spread at the rate of 4-5 tons per acre (200-400 pounds per 1,000 square feet) prior to the placement of topsoil. Lime shall be distributed uniformly over designated areas and worked into the soil in conjunction with tillage operations as described in the following procedures.

III. For sites having disturbed areas under 5 acres:

- Place topsoil (if required) and apply soil amendments as specified in 2.00 Vegetative Stabilization - Section 1 - Vegetative Stabilization Methods and Materials.

IV. For sites having disturbed areas over 5 acres:

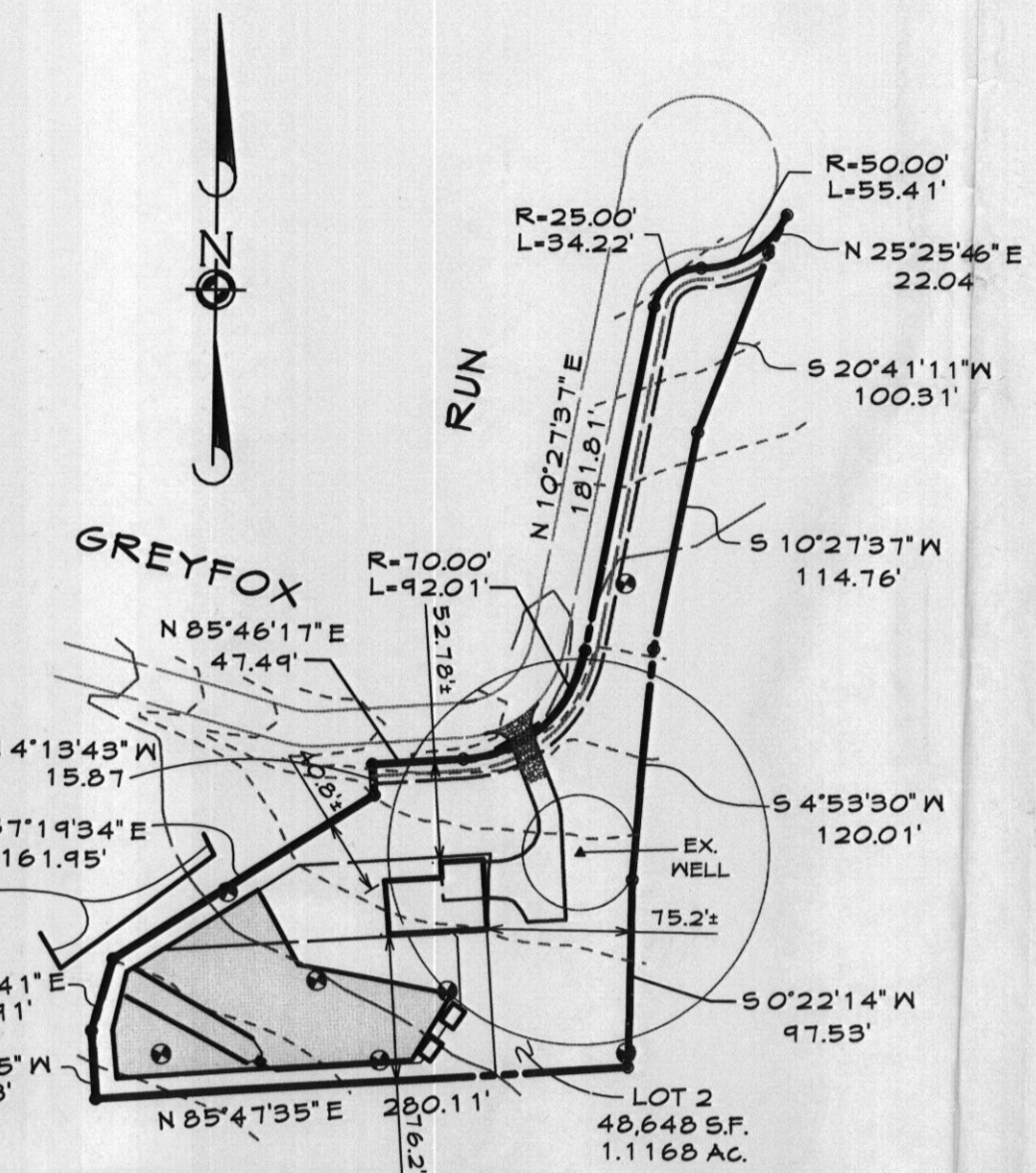
- On soil meeting Topsoil specifications, obtain test results dictating fertilizer and lime amendments required to bring the soil into compliance with the following:
 - pH for topsoil shall be between 6.0 and 7.5. If the tested soil demonstrates a pH of less than 6.0, sufficient lime shall be prescribed to raise the pH to 6.5 or higher.
 - Organic content of topsoil shall be not less than 1.5 percent by weight.
 - Topsoil having soluble salt content greater than 500 parts per million shall not be used.
 - No sod or seed shall be placed on soil which has been treated with soil sterilants or chemicals used for weed control until sufficient time has elapsed (14 days minimum) to permit dissipation of phytotoxic materials.
- Place topsoil (if required) and apply soil amendments as specified in 2.00 Vegetative Stabilization - Section 1 - Vegetative Stabilization Methods and Materials.

V. Topsoil Application

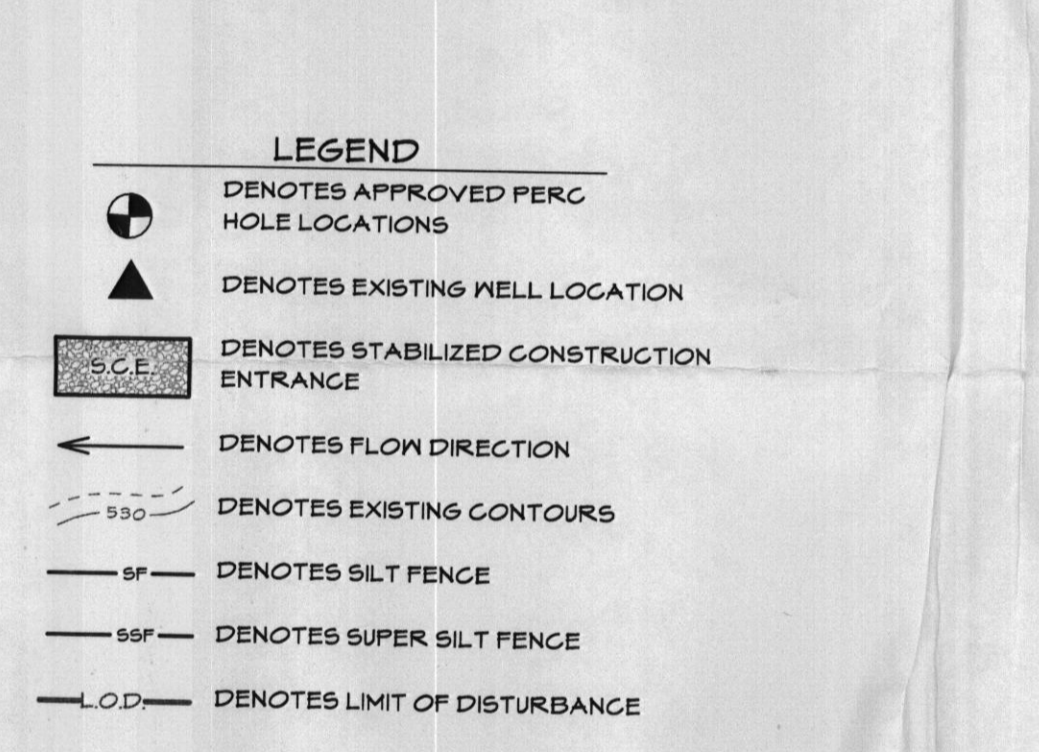
- When topsoiling, maintain needed erosion and sediment control practices such as diversions, grade stabilization structures, earth dikes, slope staking and erosion traps and basins.
- Grades on the areas to be topsoiled, which have been previously established shall be maintained, about 4"-8" higher in elevation.
- Topsoil shall be uniformly distributed in a 4"-8" layer and lightly compacted to a minimum thickness of 4". Spreading shall be performed in such a manner that sodding or seeding can proceed with a minimum of additional soil.
- Preparation and tillage. Any irregularities in the surface resulting from topsoiling and other operations shall be corrected in order to prevent the formation of depressions or water pockets.
- Topsoil shall not be placed while the topsoil or subsoil is in a frozen or muddy condition, when the subsoil is excessively wet, or in a condition that may otherwise be detrimental to proper grading and seeding of the area.
- Alternative for Permanent Seeding - Instead of applying the full amounts of lime and fertilizer, composted sludge and amendments may be applied as specified below.

SEQUENCE OF CONSTRUCTION

- OBTAIN GRADING PERMIT.
- INSTALL SEDIMENT CONTROLS AS SHOWN ON PLAN. (1 DAY)
- PERFORM NECESSARY GRADING AND STABILIZE THE SITE. BUILD HOUSE (6 MOS.)
- AFTER THE SITE IS STABILIZED AND PERMISSION IS GRANTED FROM THE SEDIMENT CONTROL INSPECTOR, REMOVE SEDIMENT CONTROLS AND STABILIZE ANY REMAINING DISTURBED AREAS. (2 DAYS)



LOCATION PLAN SCALE: 1"=100'



HOWARD SOIL CONSERVATION DISTRICT PERMANENT SEEDING NOTES

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SEEDBED PREPARATION: LOOSEN UPPER THREE INCHES OF SOIL BY RAKING, DISKING OR OTHER ACCEPTABLE MEANS BEFORE SEEDING, IF NOT PREVIOUSLY LOOSENED.

SOIL AMENDMENTS: IN LIEU OF SOIL TEST RECOMMENDATIONS, USE ONE OF THE FOLLOWING SCHEDULES:

- PREFERRED: APPLY 2 TONS PER ACRE DOLOMITIC LIMESTONE (14 LBS./1,000 SQ. FT.) AND 800 LBS. PER ACRE 10-10-10 FERTILIZER (14 LBS./1,000 SQ. FT.) BEFORE SEEDING. HARROW OR DISK INTO UPPER THREE INCHES OF SOIL AT TIME OF SEEDING. APPLY 400 LBS. PER ACRE 30-0-0 UREA OR FERTILIZER (4 LBS./1,000 SQ. FT.)
- ACCEPTABLE: APPLY 2 TONS PER ACRE DOLOMITIC LIMESTONE (14 LBS./1,000 SQ. FT.) AND 1,000 LBS. PER ACRE 10-10-10 FERTILIZER (28 LBS./1,000 SQ. FT.) BEFORE SEEDING. HARROW OR DISK INTO UPPER THREE INCHES OF SOIL.

SEEDING - FOR THE PERIODS MARCH 1 THROUGH APRIL 30 AND AUGUST 1 THROUGH OCTOBER 15, SEED WITH 60 LBS. PER ACRE (1.4 LBS./1,000 SQ. FT.) OF KENTUCKY 31 TALL FESCUE FOR THE PERIOD MAY 1 THROUGH JULY 31, SEED WITH 60 LBS. PER ACRE (1.4 LBS./1,000 SQ. FT.) OF KENTUCKY 31 TALL FESCUE FOR THE PERIOD AUGUST 1 THROUGH OCTOBER 15 THROUGH FEBRUARY 28. PROTECT SITE BY OPTION (1) SEED WITH 60 LBS. PER ACRE OF MELL ANCHORED STRAW MULCH AND SEED AS SOON AS POSSIBLE IN THE SPRING. OPTION (2) - USE 500 LBS. PER ACRE OF MELL ANCHORED STRAW MULCH.

MULCHING: APPLY 1-1/2 TO 2 TONS PER ACRE (10 TO 14 LBS./1,000 SQ. FT.) OF UNROTTED PINE OR SMALL GRASS STRAW IMMEDIATELY AFTER SEEDING. ANCHOR MULCH IMMEDIATELY AFTER APPLICATION USING MULCH ANCHORING TOOL OR 2 1/2 GALLONS PER ACRE (9 GAL./1,000 SQ. FT.) OF EMULSIFIED ASPHALT ON FLAT AREAS; ON SLOPES 8 FEET OR HIGHER, USE 340 GALLONS PER ACRE (9 GAL./1,000 SQ. FT.) FOR ANCHORING.

MAINTENANCE: INSPECT ALL SEEDING AREAS AND MAKE NEEDED REPAIRS, REPLACEMENTS AND RESEEDINGS.

TEMPORARY SEEDING NOTES

APPLY TO GRADED OR CLEARED AREAS LIKELY TO BE REDISTURBED WHERE A SHORT TERM VEGETATIVE COVER IS NEEDED.

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SOIL AMENDMENTS: APPLY 600 LBS. PER ACRE 10-10-10 FERTILIZER (14 LBS./1,000 SQ. FT.)

SEEDING - FOR PERIODS MARCH 1 THROUGH APRIL 30 AND AUGUST 15 THROUGH OCTOBER 15, SEED WITH 2-1/2 BUSHEL PER ACRE OF ANNUAL RYE (3.2 LBS./1,000 SQ. FT.) FOR THE PERIOD MAY 1 THROUGH AUGUST 15, SEED WITH 3 LBS. PER ACRE OF PEEPLING LOVEGRASS (3 LBS./1,000 SQ. FT.) FOR THE PERIOD OF NOVEMBER 15 THROUGH NOVEMBER 28. PROTECT SITE BY APPLYING 2 TONS PER ACRE OF MELL ANCHORED STRAW MULCH AND SEED AS SOON AS POSSIBLE IN THE SPRING, OR USE 500 LBS. PER ACRE OF MELL ANCHORED STRAW MULCH.

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REFER TO THE 1983 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL FOR ADDITIONAL RATES AND METHODS NOT COVERED.

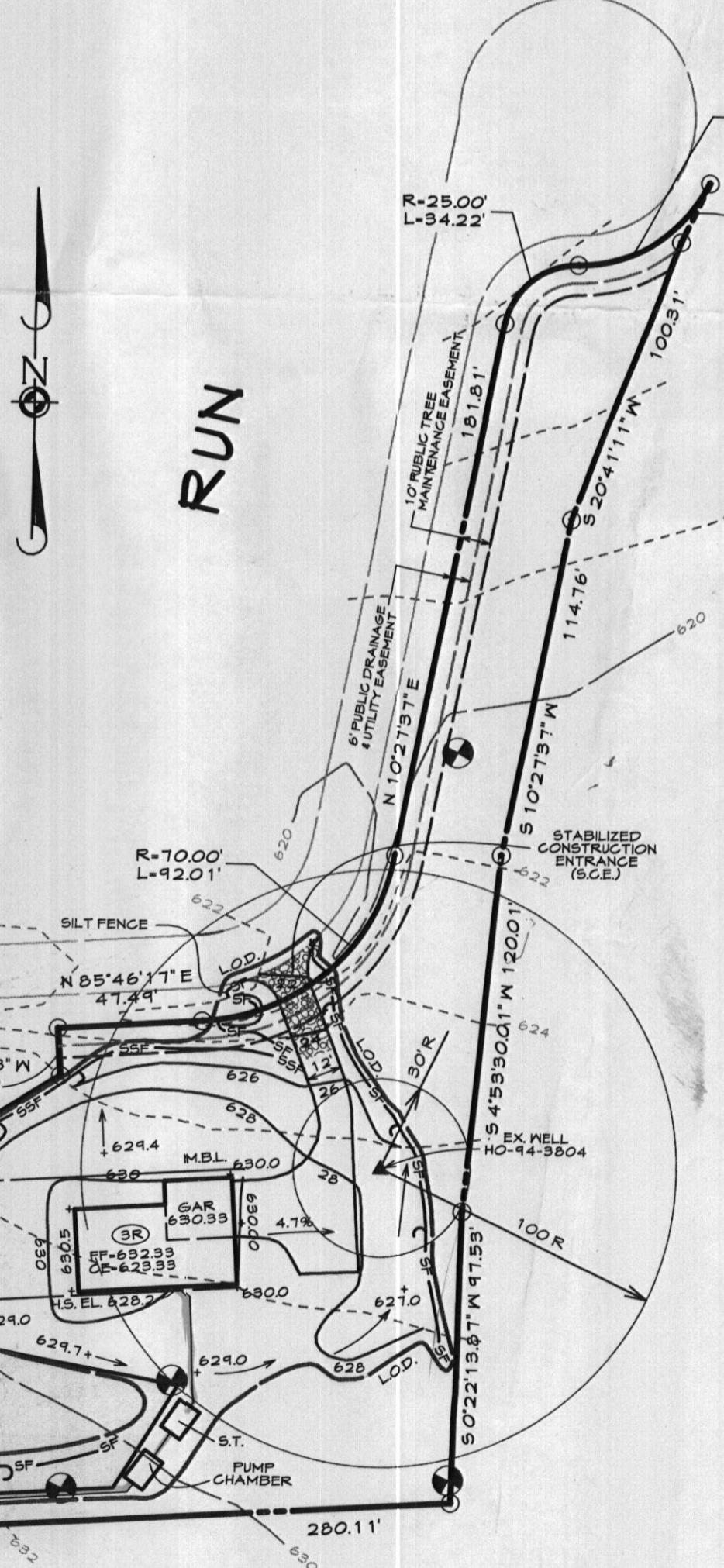
SEPTIC SYSTEM NOTES

- SEPTIC EASEMENT SUBJECT TO HOWARD COUNTY HEALTH DEPARTMENT NO. 2 PROPOSED 1500 GALLON SEPTIC TANK.
3. A FIRST FLOOR ELEVATION: 623.33
3. B BASEMENT ELEVATION: 623.33
- C INVERT OF SEPTIC SYSTEM AT HOUSE: 620.20
- D INVERT AT SEPTIC TANK: 621.20
- E INVERT OUT AT SEPTIC TANK: 626.40
- F PROMISED GRADE OVER SEPTIC TANK: 624.50
- G INVERT AT DISTRIBUTION BOX: 631.00
- H EXISTING GROUND OVER DISTRIBUTION BOX: 633.00
- I LENGTH OF TRENCH TO BE DETERMINED AT THE SEDIMENT PERMIT ISSUANCE.
- J CONTRACTOR/BUILDER TO VERIFY ELEVATIONS IN FIELD BEFORE BEGINNING ANY CONSTRUCTION.

BUILDER TO VERIFY AVAILABILITY OF BASEMENT SEWER SERVICE PRIOR TO DRILLING STACKOUT.

PUMP CHAMBER NOTES

- PUMP CHAMBER SUBJECT TO HOWARD COUNTY HEALTH DEPARTMENT NO. 2
- PROMISED 1500 GALLON CHAMBER
- INVERT AT PUMP CHAMBER: 626.60
- INVERT OUT OF PUMP CHAMBER: 623.30
- PROPOSED GRADE OVER PUMP CHAMBER: 630.40

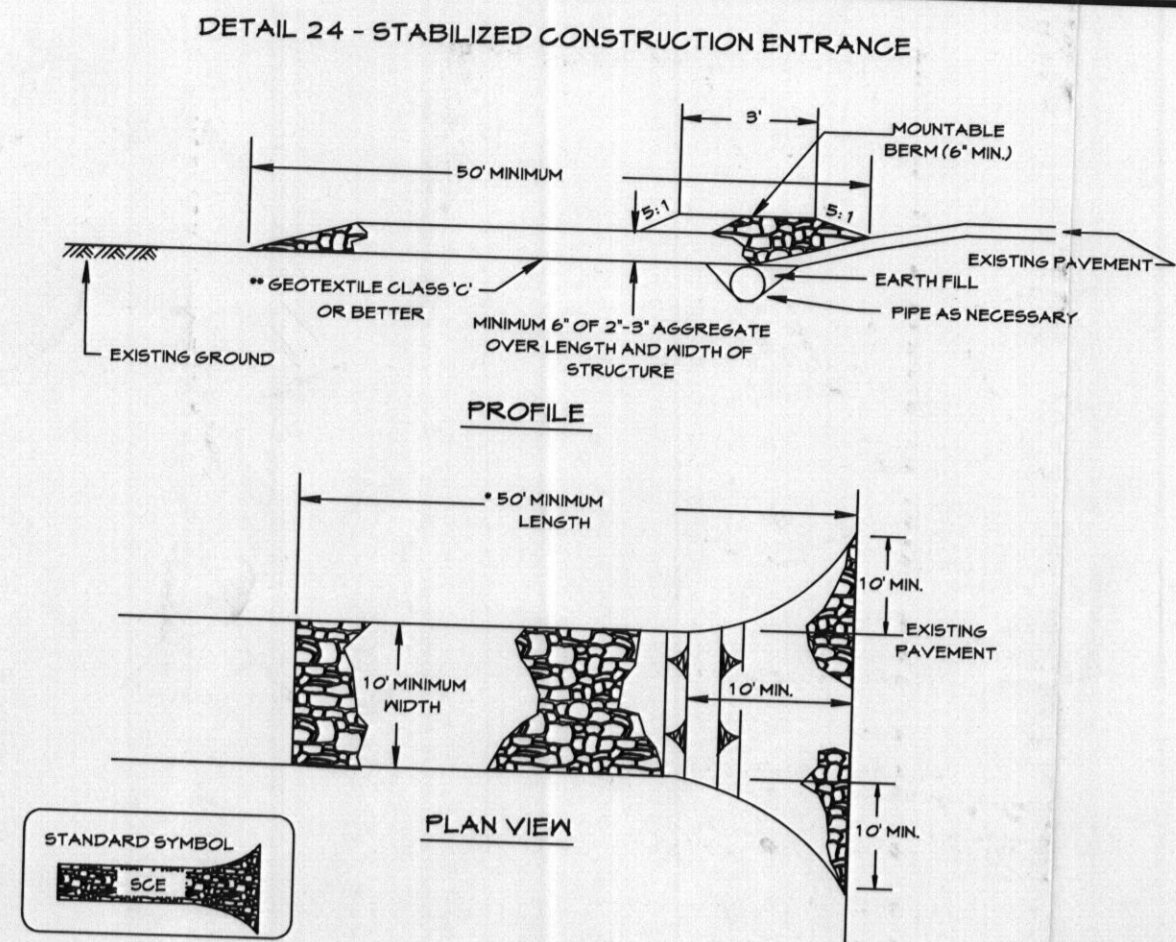


HOUSE GRADING & SEPTIC LAYOUT SCALE: 1"=50'

NOTE: THIS AREA DESIGNATES A PRIVATE SEPTIC RESERVE AREA OF 10,000 SQUARE FEET AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWAGE DISPOSAL IMPROVEMENTS AVAILABLE. THIS RESERVE AREA SHALL BECOME NULL AND VOID UPON CONNECTION OF PUBLIC SEWAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT ADJUSTMENTS TO THE PRIVATE SEWAGE RESERVE AREA. RECORDATION OF A MODIFIED SEWAGE EASEMENT SHALL NOT BE NECESSARY.

APPROVED FOR PRIVATE WATER AND PRIVATE SEWAGE SYSTEMS, HOWARD COUNTY HEALTH DEPARTMENT

COUNT HEALTH OFFICER DATE



1. LENGTH - MINIMUM OF 50' (30' FOR SINGLE RESIDENCE LOT).

2. WIDTH - 10' MINIMUM SHOULD BE FLARED AT THE EXISTING ROAD TO PROVIDE A TURNING RADIUS.

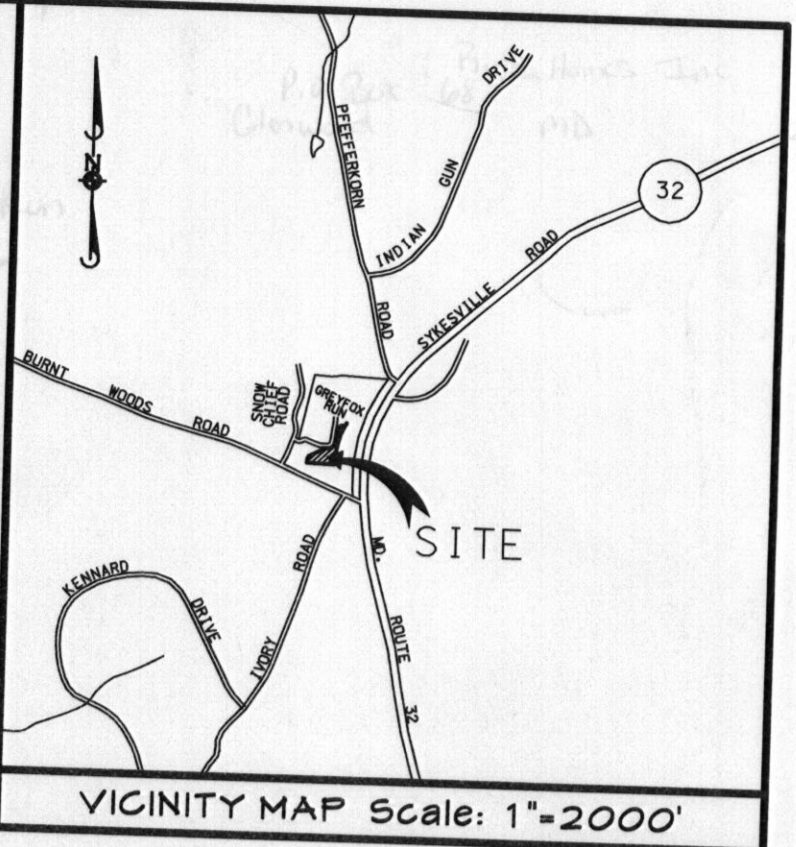
3. GEOTEXTILE FABRIC (FILTER CLOTH) SHALL BE PLACED OVER THE EXISTING GROUND PRIOR TO PLACING STONE. THE PLAN APPROVAL AUTHORITY MAY NOT REQUIRE SINGLE FAMILY RESIDENCES TO USE GEOTEXTILE.

4. STONE - CRUSHED AGGREGATE (2" TO 3") OR RECLAIMED OR RECYCLED CONCRETE EQUIVALENT SHALL BE PLACED AT LEAST 6" DEEP OVER THE LENGTH AND WIDTH OF THE ENTRANCE.

5. SURFACE WATER - ALL SURFACE WATER FLOWING TO OR DIVERTED TOWARD CONSTRUCTION ENTRANCES SHALL BE PIPED THROUGH THE ENTRANCE, MAINTAINING POSITIVE DRAINAGE. PIPE SHALL BE INSTALLED THROUGH THE ENTRANCE WITH A MINIMUM OF 6" OF STONE OVER THE PIPE. PIPE HAS TO BE SIZED ACCORDING TO THE DRAINAGE. WHEN THE SIZE IS LOCATED AT A HIGH SPOT AND HAS NO DRAINAGE TO CONVEY A PIPE WILL NOT BE NECESSARY. PIPE SHOULD BE SIZED ACCORDING TO THE AMOUNT OF RAINFALL TO BE CONVEYED. A 6" MINIMUM WILL BE REQUIRED.

6. LOCATION - A STABILIZED CONSTRUCTION ENTRANCE SHALL BE LOCATED AT EVERY POINT WHERE CONSTRUCTION TRAFFIC ENTERS OR LEAVES A CONSTRUCTION SITE. VEHICLES LEAVING THE SITE MUST TRAVEL OVER THE ENTIRE LENGTH OF THE STABILIZED CONSTRUCTION ENTRANCE.

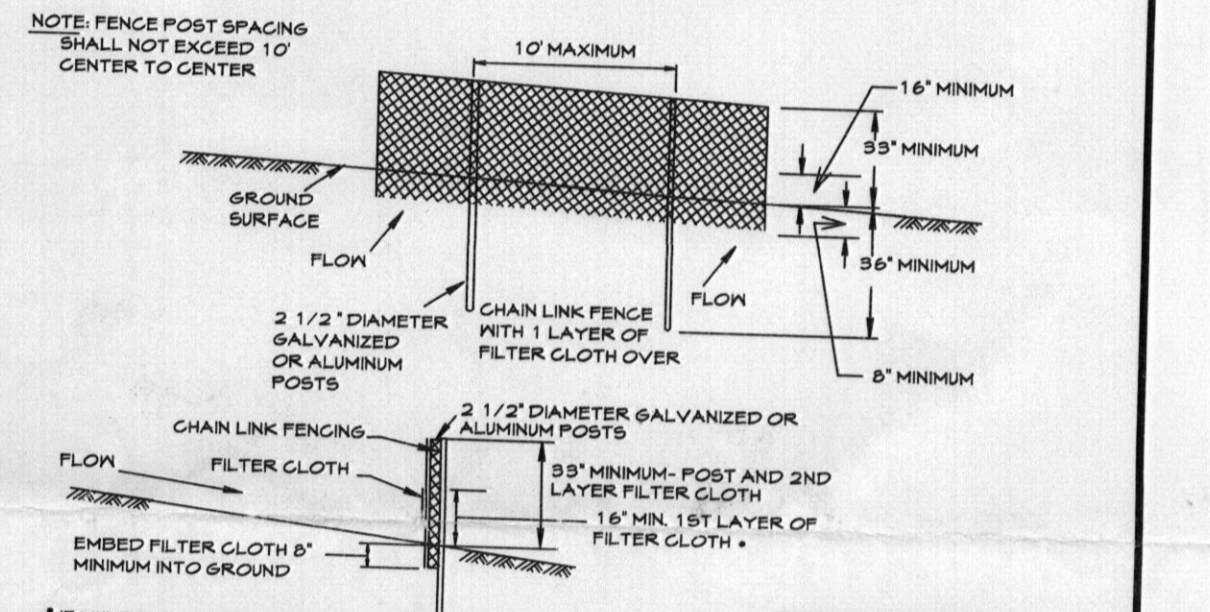
BUILDING SETBACKS	
FRONT	30'
SIDE	10'
REAR	75'



GENERAL NOTES

- THE LOT SHOWN HEREON COMPLIES WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREA AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT.
- EXISTING WELLS AND/OR SEWAGE EASEMENTS WITHIN 100 FEET OF THE PROPERTY HAVE BEEN SHOWN FROM THE BEST AVAILABLE INFORMATION.
- ALL HOUSE SITES SHOWN COMPLY WITH MINIMUM BUILDING RESTRICTION REGULATIONS.
- ALL WELLS SHALL BE DRILLED PRIOR TO FINAL PLAT RECORDATION. IT IS THE DEVELOPERS RESPONSIBILITY TO SCHEDULE THE WELL DRILLING PRIOR TO FINAL PLAT SUBMISSION. IT WILL NOT BE CONSIDERED GOVERNMENT DELAY RECORD PLAT.
- ANY CHANGES TO A PRIVATE SEWAGE EASEMENT SHALL REQUIRE A REVISED PERCOLATION CERTIFICATION PLAN.
- STORMWATER MANAGEMENT IS WAIVED BECAUSE THE TOTAL IMPERVIOUS AREA OF 4,050 S.F. IS IN ACCORDANCE WITH M.D.E. AND HOWARD COUNTY REQUIREMENTS.

DETAIL 22 - SILT FENCE



CONSTRUCTION SPECIFICATIONS

FENCES SHALL BE 42" HIGH AND CONSTRUCTED IN ACCORDANCE WITH THE LATEST MARYLAND STATE HIGHWAY DETAILS FOR CHAIN LINK FENCING. THE SPECIFICATION FOR A 6" FENCE SHALL BE USED, SUBSTITUTING 42" FABRIC AND 6" LENGTH POSTS.

- THE POLES DO NOT NEED TO BE SET IN CONCRETE.
- CHAIN LINK FENCE SHALL BE FASTENED SECURELY TO THE FENCE POSTS WITH WIRE TIES. THE LOWER TENSION WIRE BRACE AND TRUSS RODS, DRIVE ANCHORS AND POST CAPS ARE NOT REQUIRED EXCEPT ON THE ENDS OF THE FENCE.
- FILTER CLOTH SHALL BE FASTENED SECURELY TO THE CHAIN LINK FENCE WITH TIES SPACED EVERY 24" AT THE TOP AND MID SECTION.
- FILTER CLOTH SHALL BE EMBEDDED A MINIMUM OF 8" INTO THE GROUND.
- WHEN TWO SECTIONS OF FILTER CLOTH ADJOIN EACH OTHER, THEY SHALL BE OVERLAPPED BY 6" AND FOLDED.
- MAINTENANCE SHALL BE PERFORMED AS NEEDED AND SILT BUILDUPS REMOVED WHEN 'BULGES' DEVELOP IN THE SILT FENCE, OR WHEN SILT REACHES 50% OF FENCE HEIGHT.
- FILTER CLOTH SHALL BE FASTENED SECURELY TO EACH FENCE POST WITH WIRE TIES OR STAPLES AT TOP AND MID SECTION AND SHALL MEET THE FOLLOWING REQUIREMENTS FOR GEOTEXTILE CLASS 'F':

TENSILE STRENGTH	50 LBS./IN. (MIN)	TEST: MSMT 504
TENSILE MODULUS	20 LBS./IN. (MIN)	TEST: MSMT 504
FLOW RATE	0.3 GAL./FT ² /MINUTE (MAX)	TEST: MSMT 322
FILTERING EFFICIENCY	15% (MIN)	TEST: MSMT 922

DESIGN CRITERIA

SLOPE	SLOPE STEEPNESS	SLOPE LENGTH (MAXIMUM)	SILT FENCE LENGTH (MAXIMUM)
0 - 10%	0 - 10:1	UNLIMITED	UNLIMITED
10 - 20%	10:1 - 5:1	200 FEET	1,500 FEET
20 - 33%	5:1 - 3:1	100 FEET	1,000 FEET
33 - 50%	3:1 - 2:1	100 FEET	500 FEET
50% +	2:1 +	50 FEET	250 FEET

DATE	REVISIONS	BY
10/13/05	ADDRESS COUNTY COMMENTS, SHOW S.C.E. & L.O.D.	JEP
06/20/07	RESITE NEAR HOUSE FOUNDATION & REVISE GRADES	JEP
01/21/07	REVISED FOR SDI REVISIONS, ADDED PUMP TANK, INFO, ETC.	JEP
04/07/10	RESITE NEAR HOUSE FOUNDATION & REVISE GRADES	LOD

Revised Percolation Certification Plan and Site Plan to Accompany Application for Building Permit

Plot Plan
LOT 2
GREYFOX RUN
FOXTAIL RUN

3RD ELECTION DISTRICT, HOWARD COUNTY, MD.
PLAT NO. 17124 & 17125

www.clsi-civileng.com

FREDERICK OFFICE: 3111 Regulus Court, Suite B, Frederick, MD 21704-0318, (301) 662-1799, FAX (301) 662-8004

WESTMINSTER OFFICE: 439 East Main Street, Westminister, MD 21157-5539, (410) 848-1790, FAX (410) 848-1791

Professional Engineer Registration No. 23446
Date: 9/26/05
Drawing No: 2005003
County File No:

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

BO 7002823

Building Address 10847 ...
 Suite/Apt. #: _____ SDP/WP/Petition #: _____
 Census Tract 1030 Subdivision ...
 Section _____ Area _____ Lot 2
 Tax Map 22 Parcel 2 Grid 8
 Zoning RR-DEC Map Coordinates _____ Lot size 1.12 AC.

Property Owner's Name _____
 Address _____
 City _____ State _____ Zip Code _____
 Home Phone _____ Work Phone _____
 Applicant's Name & Mailing Address, (if other than stated hereon):
 Phone _____ Fax _____

Existing Use ...
 Proposed Use ...
 Estimated Construction Cost \$...
 Description of Work ...

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

Occupant or Tenant _____
 Contact Name ...
 Address _____
 City _____ State _____ Zip Code _____
 Phone 410 499 6030 Fax ...

Engineer or Architect Company ...
 Contact Person ...
 Address _____
 City _____ State _____ Zip Code _____
 Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: _____	Water Supply: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private
No. of stories: _____	Sewage Disposal: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Construction type: _____ <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular	Sprinkler system: <u>N/A</u> <input checked="" type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: _____ <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
1st floor: _____	Sewage Disposal: _____ <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
2nd floor: _____	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Basement: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Propane Gas <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms _____ Height: _____ Multi-family dwellings: _____ No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Sprinkler system: <u>N/A</u> <input checked="" type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other: _____
Other Structure: _____ Dimensions: _____ Footings: _____ Roof Height: _____ <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	

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 _____
 Title/Company _____

Print Name _____
 Date _____

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
 ** PLEASE WRITE NEATLY AND LEGIBLY. **

- FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official		
Dev. Engineering, DPZ	<u>7/4/07</u>	<u>[Signature]</u>
Health		
Fire Protection		
Is Sediment Control approval required prior to issuance?		
YES <input type="checkbox"/> NO <input type="checkbox"/>		
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>		
ONE STOP SHOP: <input type="checkbox"/>		
Distribution of Copies:	White: Building Official	Green: LDD, DPZ

DPZ SETBACK INFORMATION	PROPERTY ID#
Front: _____	Filing fee \$ <u>112.00</u>
Rear: _____	Permit fee \$ _____
Side: _____	Excise tax \$ _____
Side St: _____	Add'l per. fee \$ _____
All minimum setbacks met?	TOTAL FEES \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Is Entrance Permit required?	Balance due \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # <u>0465</u>
Historic District?	Validation # _____
YES <input type="checkbox"/> NO <input type="checkbox"/>	
Lot Coverage for NewTown Zone _____	
SDP/Red-line approval date _____	Accepted by _____