

Building Address: 11028 Hunters View Rd

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

Census Tract: _____ Subdivision: Riverwood

Section: _____ Area: _____ Lot: 8

Tax Map: 29 Parcel: 20 Grid: 4

Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: JFH

Proposed Use: deck

Estimated Construction Cost \$: 2,000

Description of Work: Construct open 20x15 deck w/ landing & steps.

Occupant or Tenant: _____

Contact Name: 25617

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Property Owner's Name: Winchester Homes

Address: 6905 Rockledge Dr

City: Bethesda State: MD Zip Code: 20817

Home Phone: _____ Work Phone: _____

Applicant's Name & Mailing Address, (if other than stated herein):
Jessica Rice
4512 Sandy Spring Rd
Burtonsville, MD 20816

Phone: 301-924-2111 Fax: 301-549-4266

Contractor Company: TFA Contractors, Inc.

Contact Person: _____

Address: SAME AS APPLICANT

City: _____ State: _____ Zip Code: _____

License No.: 17489

Phone: 301-924-2111 Fax: 301-549-4266

Engineer or Architect Company: _____

Contact Person: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

BUILDING DESCRIPTION - COMMERCIAL

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"/> 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: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ State Certified Modular _____	Sprinkler system: N/A <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____

BUILDING DESCRIPTION - RESIDENTIAL

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: _____ 2 nd floor: _____ Basement: _____	Electric Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
No. of Bedrooms: _____	Sprinkler system: N/A <input checked="" type="checkbox"/> NFA #13D _____ NFA #13R _____ Other: _____
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: Jessica Rice Print Name: Jessica Rice

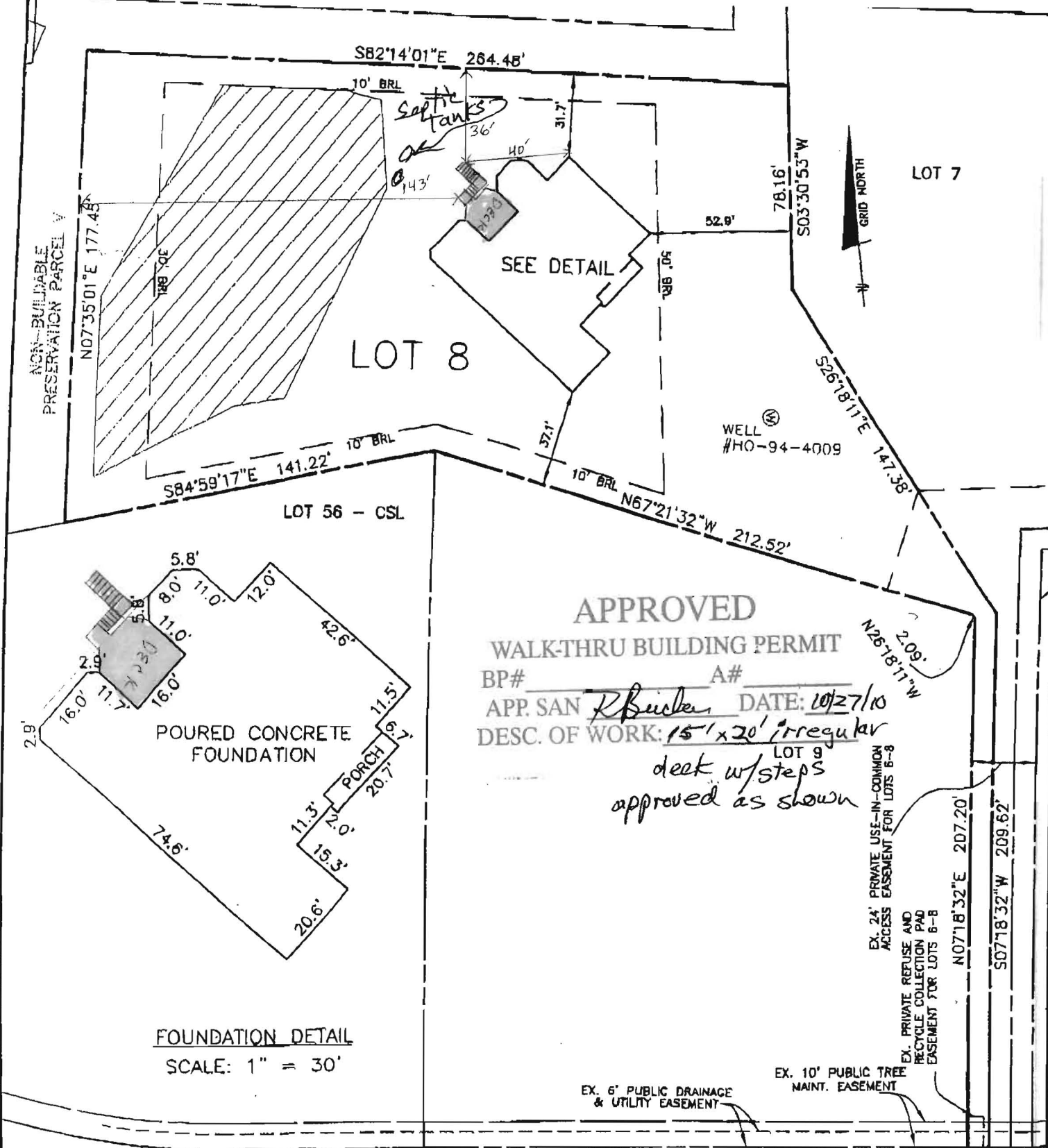
Email Address: Jessica.Rice@sundeckshanda.com

Title/Company: Authorized Agent / TFA Catha. Date: October 27, 2010

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

FOR OFFICE USE ONLY

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID #
Land Development, DPZ			Front: _____	Filing fee \$ _____
State Highways			Rear: _____	Permit fee \$ _____
Building Officials			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ			Side St: _____	Add'l per fee \$ _____
Health: <u>10/27/10</u> <u>R. Bunker</u>			All minimum setbacks met?	TOTAL FEES \$ _____
Fire Protection			YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>			Is Entrance Permit Required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
CONTINGENCY CONSTRUCTION START <input type="checkbox"/> ONE STOP SHOP: <input type="checkbox"/>			Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # _____
			Lot Coverage for New Town Zone SDP/Red-line approval date _____	Validation # _____
				Accepted by _____



APPROVED
WALK-THRU BUILDING PERMIT
 BP# _____ A# _____
 APP. SAN *R. Buckler* DATE: *10/27/10*
 DESC. OF WORK: *15' x 20' irregular*
deck w/ steps
approved as shown

FOUNDATION DETAIL
 SCALE: 1" = 30'

HUNTERS VIEW ROAD
 EX. PUBLIC ACCESS STREET
 (50' R/W)

SURVEYOR'S CERTIFICATE

I HEREBY CERTIFY TO THE BEST OF MY PROFESSIONAL KNOWLEDGE, INFORMATION AND BELIEF, THAT THE DIMENSIONS OF THE BUILDING WALLS SHOWN HEREON ARE CORRECT; THAT THEY ARE BASED ON A FIELD RUN SURVEY PERFORMED BY BENCHMARK ENGINEERING, INC. ON 09/08/10.

Donald A. Mason
 DONALD A. MASON
 PROFESSIONAL LAND SURVEYOR
 MD REG. No. 21320
 FOR BENCHMARK ENGINEERING, INC.
 MD REG. No. 351
 FEMA FIRM No. 240044 0027 B
 ZONE: C
 DATED: 12/04/86



BENCHMARK ENGINEERING, INC.
 8480 BALTIMORE NATIONAL PIKE A SUITE 418
 ELLICOTT CITY, MARYLAND 21043
 phone: 410-485-6105 fax: 410-485-6644
 www.bei-civilengineering.com

TOP OF FOUNDATION WALL ELEVATION = 451.4'
 OFFSET DIMENSIONS TO PROPERTY LINES ARE ± 0.1'

WALL CHECK
RIVERWOOD
PHASE 1
PLAT No. 18036
LOT No. 8

11028 HUNTERS VIEW ROAD
 3RD ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND
 SCALE: 1" = 50' DATE: 09/08/10

FIELD OBS. BY DH&AIS
 COMP. BY EWF
 DRAWN BY EWF

Building Address 11028 Hunters View Rd
Ellicott City Md. 21042

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

Census Tract _____ Subdivision Brimwood

Section _____ Area _____ Lot 8

Tax Map 29 Parcel 20 Grid 4

Zoning R200 Map Coordinates _____ Lot Size 49 782.1

Existing Use Shed
 Proposed Use SFO
 Estimated Construction Cost \$ 350,000

Description of Work St Andrew's 1 story
French chateau. FR 368 145 48 3 BR
Expanded to 3 car garage

Occupant or Tenant _____

Contact Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Property Owner's Name William & Susan Adams
 Address 6905 Rockledge Dr. # 800
 City Bethesda State MD Zip Code 20817
 Home Phone _____ Work Phone 301 502 9181
 Applicant's Name & Mailing Address, (if other than stated herein):

Phone 410 379 1634 Fax _____

Contractor Company _____
 Contact Person John C. ...
 Address _____
 City _____ State _____ Zip Code _____
 License No. 57
 Phone _____ Fax _____

Engineer or Architect Company Brimwood
 Contact Person John C. ...
 Address 8480 Ball ...
 City Ellicott City State MD Zip Code 21042
 Phone 410 405 6100 Fax 410 405 6111

BUILDING DESCRIPTION - COMMERCIAL

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: N/A <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression # of Heads _____

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1 st floor: <u>772 74</u> 2 nd floor: _____ Basement: <u>772 64</u>	Water Supply: _____ <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms <u>2</u>	Sewage Disposal: _____ <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Other Structure: _____ Dimensions: _____ Footings: <u>16 x 24</u> Roof: <u>Asph/Flt</u>	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
<input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	Sprinkler system: N/A <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other: _____

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.

Carol Viers
 Applicant's Signature

Carol Viers
 Title/Company

Carol Viers
 Print Name

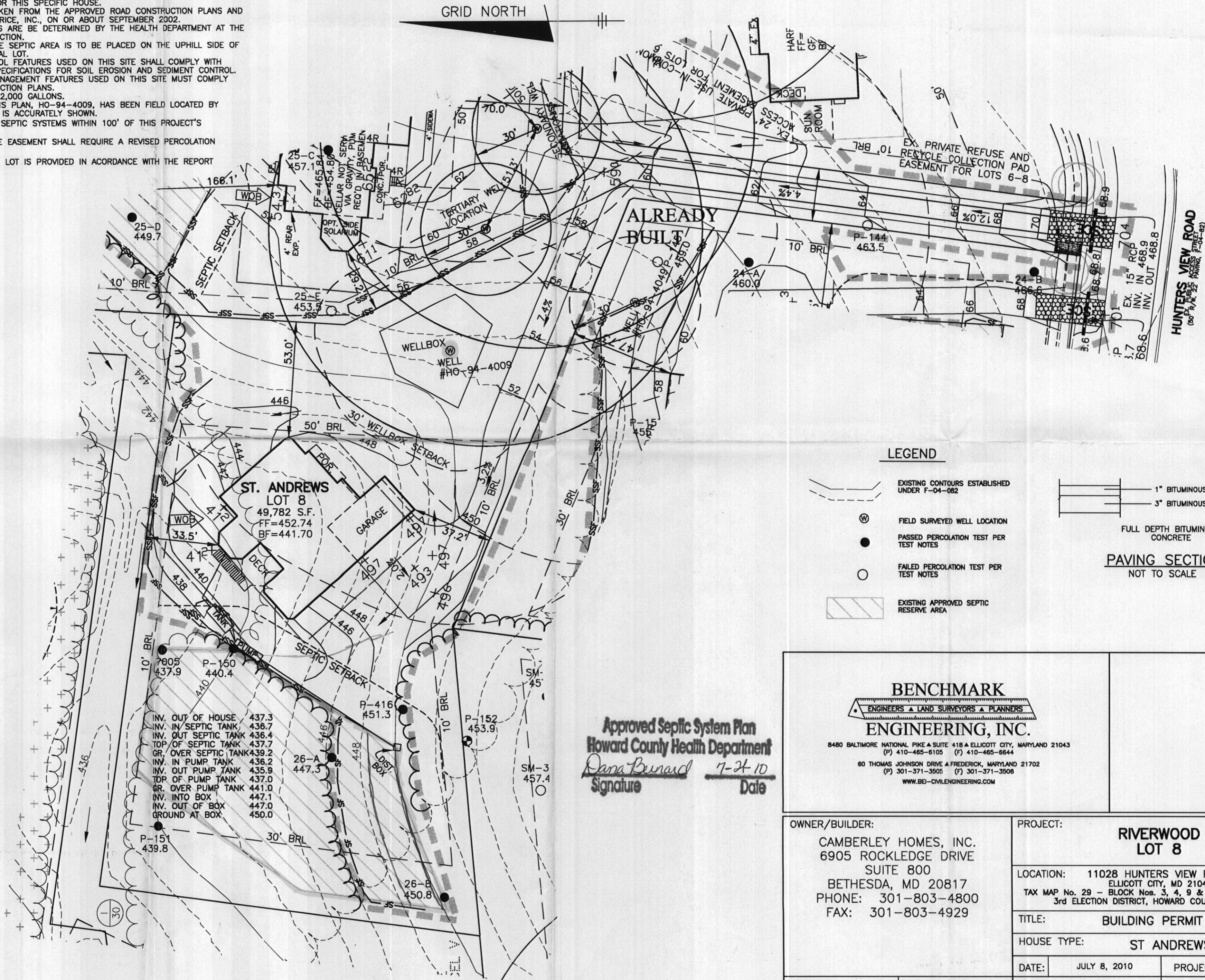
7-13-10
 Date

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

AGENCY	DATE	SIGNATURE	APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID #
<input checked="" type="checkbox"/> Land Development, DPZ				Front: _____	Filing fee \$ <u>150.00</u>
<input checked="" type="checkbox"/> State Highways				Rear: _____	Permit fee \$ _____
<input checked="" type="checkbox"/> Building Officials				Side: _____	Excise tax \$ _____
<input checked="" type="checkbox"/> Dev. Engineering, DPZ				Side St.: _____	Add'l per fee \$ _____
<input checked="" type="checkbox"/> Health <u>7-21-10</u> <u>DBernard</u>				All minimum setbacks met?	TOTAL FEES \$ _____
<input checked="" type="checkbox"/> Fire Protection				YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>				Is Entrance Permit Required? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Balance due \$ _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/> ONE STOP SHOP: <input type="checkbox"/>				Historic District? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Check # <u>133001</u>
				Lot Coverage for New Town Zone SDP/Red-line approval date _____	Validation # <u>133001</u>
					Accepted by <u>9</u>

NOTES:

1. THE LOT SHOWN HEREON WAS RECORDED ON THE PLAT FOR RIVERWOOD, PLAT No. 18036. REFER TO THE PLAT FOR LOT DIMENSIONS, LOT AREAS AND ALL EASEMENTS.
2. THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF 10,000 SQUARE FEET AS REQUIRED BY THE STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWERAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA IS RESTRICTED UNTIL PUBLIC SEWER IS AVAILABLE. THIS EASEMENT 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. ANY CHANGES TO A PRIVATE SEWERAGE EASEMENT SHALL REQUIRE A REVISED PERCOLATION CERTIFICATION PLAN. RECORDATION OF A MODIFIED SEWERAGE EASEMENT PLAT SHALL NOT BE NECESSARY.
3. SEDIMENT AND EROSION CONTROLS WERE APPROVED BY HOWARD SOIL CONSERVATION DISTRICT UNDER GP-05-31 AND MODIFIED FOR THIS SPECIFIC HOUSE.
4. TOPOGRAPHY SHOWN HEREON IS TAKEN FROM THE APPROVED ROAD CONSTRUCTION PLANS AND HAS BEEN FIELD VERIFIED BY J.A. RICE, INC., ON OR ABOUT SEPTEMBER 2002.
5. EXACT LENGTH OF SEPTIC TRENCHES ARE TO BE DETERMINED BY THE HEALTH DEPARTMENT AT THE TIME OF TRENCH LAYOUT AND INSPECTION.
6. SPOIL FROM THE TRENCHING OF THE SEPTIC AREA IS TO BE PLACED ON THE UPHILL SIDE OF THE EXCAVATION FOR EACH INDIVIDUAL LOT.
7. ALL SEDIMENT AND EROSION CONTROL FEATURES USED ON THIS SITE SHALL COMPLY WITH 1994 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL.
8. ALL DRAINAGE AND STORMWATER MANAGEMENT FEATURES USED ON THIS SITE MUST COMPLY WITH THE APPROVED ROAD CONSTRUCTION PLANS.
9. SEPTIC TANK FOR THIS LOT TO BE 2,000 GALLONS.
10. THE EXISTING WELL SHOWN ON THIS PLAN, HO-94-4009, HAS BEEN FIELD LOCATED BY BENCHMARK ENGINEERING, INC. AND IS ACCURATELY SHOWN.
11. THERE ARE NO EXISTING WELLS OR SEPTIC SYSTEMS WITHIN 100' OF THIS PROJECT'S BOUNDARY EXCEPT AS NOTED.
12. ANY CHANGES TO A PRIVATE SEWERAGE EASEMENT SHALL REQUIRE A REVISED PERCOLATION CERTIFICATION PLAN.
13. STORMWATER MANAGEMENT FOR THIS LOT IS PROVIDED IN ACORDANCE WITH THE REPORT DATED NOVEMBER, 2009.



INV. OUT OF HOUSE	437.3
INV. IN SEPTIC TANK	436.7
INV. OUT SEPTIC TANK	436.4
TOP OF SEPTIC TANK	437.7
GR. OVER SEPTIC TANK	439.2
INV. IN PUMP TANK	436.2
INV. OUT PUMP TANK	435.9
TOP OF PUMP TANK	437.0
GR. OVER PUMP TANK	441.0
INV. INTO BOX	447.1
INV. OUT OF BOX	447.0
GROUND AT BOX	450.0

GRID NORTH

LEGEND

- EXISTING CONTOURS ESTABLISHED UNDER F-04-082
- FIELD SURVEYED WELL LOCATION
- PASSED PERCOLATION TEST PER TEST NOTES
- FAILED PERCOLATION TEST PER TEST NOTES
- EXISTING APPROVED SEPTIC RESERVE AREA
- 1" BITUMINOUS CONCRETE SURFACE
- 3" BITUMINOUS CONCRETE BASE
- FULL DEPTH BITUMINOUS CONCRETE

PAVING SECTION
NOT TO SCALE

Approved Septic System Plan
Howard County Health Department
Dana Bernard Signature 7-2-10 Date

BENCHMARK
ENGINEERS • LAND SURVEYORS • PLANNERS
ENGINEERING, INC.

8480 BALTIMORE NATIONAL PIKE A SUITE 418 A ELLICOTT CITY, MARYLAND 21043
(P) 410-465-6105 (F) 410-465-6644
60 THOMAS JOHNSON DRIVE A FREDERICK, MARYLAND 21702
(P) 301-371-3505 (F) 301-371-3506
WWW.BEI-CVLENGINEERING.COM

OWNER/BUILDER: CAMBERLEY HOMES, INC. 6905 ROCKLEDGE DRIVE SUITE 800 BETHESDA, MD 20817 PHONE: 301-803-4800 FAX: 301-803-4929		PROJECT: RIVERWOOD LOT 8	
LOCATION: 11028 HUNTERS VIEW ROAD ELLICOTT CITY, MD 21042		TAX MAP No. 29 - BLOCK Nos. 3, 4, 9 & 10 - PARCEL No. 20 3rd ELECTION DISTRICT, HOWARD COUNTY, MARYLAND	
TITLE: BUILDING PERMIT PLAN			
HOUSE TYPE: ST ANDREWS			
DATE:	JULY 8, 2010	PROJECT NO.	1950
DESIGN:	JMC	DRAFT:	JMC
SCALE:	1" = 30'	DRAWING	1 OF 1