

HOWARD COUNTY
PERMIT APPLICATION

PERMIT NUMBER

B/10/28/10

Building Address 18355 Ann Street Rd.
Suite/Apt. #: _____ SDP/WP/Petition #: _____
Census Tract 604001 Subdivision Jolly Lane Apt.
Section _____ Area _____ Lot 2
Tax Map 6 Parcel 19 Grid 4
Zoning _____ Map Coordinates _____ Lot size _____

Property Owner's Name Early, Mrs. J. Anne
Address 3230 Bethany Lane
City Ellicott City State MD Zip Code 21042
Phone 410-418-4900 Phone _____
Applicant's Name & Mailing Address, (if other than stated hereon):
Phone _____ Fax _____

Existing Use SFD under construction
Proposed Use SFD w/underground tank
Estimated Construction Cost \$ _____
Description of Work 1,000 gal. L.P. Tank

Contractor Company Early, Mrs. J. Anne, Inc.
Contact Person John Thomas
Address 3230 Bethany Lane
City Ellicott City State MD Zip Code 21042
License No. 410045
Phone 410-418-4900 Fax _____

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

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

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics		Utilities		Building Characteristics		Utilities	
Height:		Water Supply:		SF Dwelling <input type="checkbox"/>	SF Townhouse <input type="checkbox"/>	Water Supply:	
No. of stories:		Public <input type="checkbox"/>	Private <input type="checkbox"/>	Depth	Width	Public <input type="checkbox"/>	Private <input checked="" type="checkbox"/>
Gross area, sq. ft. per floor:		Sewage Disposal:		1st floor:		Sewage Disposal:	
Use group:		Public <input type="checkbox"/>	Private <input type="checkbox"/>	2nd floor:		Public <input type="checkbox"/>	Private <input checked="" type="checkbox"/>
Construction type:		Electric Yes <input type="checkbox"/> No <input type="checkbox"/>	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>	Basement:		Electric Yes <input type="checkbox"/> No <input type="checkbox"/>	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Reinforced Concrete <input type="checkbox"/>		Heating System:		Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/>		Heating System:	
Structural Steel <input type="checkbox"/>		Electric <input type="checkbox"/> Oil <input type="checkbox"/>	Natural Gas <input type="checkbox"/>	Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>		Electric <input type="checkbox"/> Oil <input type="checkbox"/>	Natural Gas <input type="checkbox"/>
Masonry <input type="checkbox"/>		Propane Gas <input type="checkbox"/>	Sprinkler system: N/A <input type="checkbox"/>	No. of Bedrooms _____		Propane Gas <input type="checkbox"/>	Sprinkler system: N/A <input type="checkbox"/>
Wood Frame <input type="checkbox"/>		Full <input type="checkbox"/>	Partial <input type="checkbox"/>	Height: _____		NFPA #13D <input type="checkbox"/>	NFPA #13R <input type="checkbox"/>
State Certified Modular <input type="checkbox"/>		Other Suppression <input type="checkbox"/>	# of Heads _____	Multi-family dwellings:		Other: _____	
				No. of efficiency units: _____			
				No. of 1 BR units: _____			
				No. of 2 BR units: _____			
				No. of 3 BR units: _____			
				Other Structure: _____			
				Dimensions: _____			
				Footings: _____			
				Roof Height: _____			
				State Certified Modular <input type="checkbox"/>			
				Manufactured Home <input type="checkbox"/>			

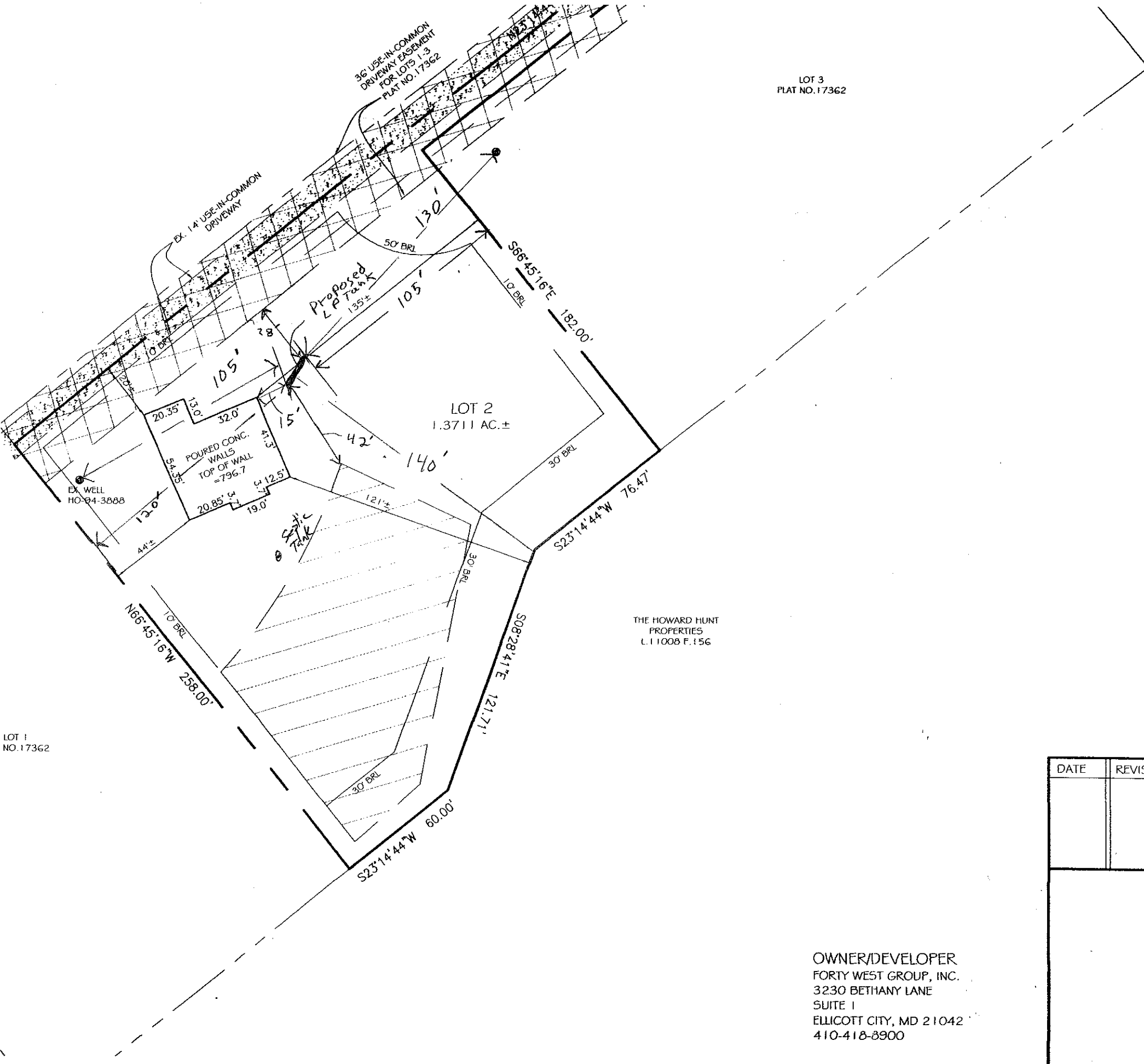
THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED 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 John Thomas
Title/Company _____

Print Name John Thomas
Date 4-16-10

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 Official			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ			Side St.: _____	Add'l per. fee \$ _____
Health <u>7-26-10</u>		<u>Dana Bernard</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?			Is Entrance Permit required?	Balance due \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Historic District?	Validation # _____
ONE STOP SHOP: <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	
Distribution of Copies: White: Building Official			Lot Coverage for NewTown Zone _____	
Green: LDD, DPZ			SDP/Red-line approval date _____	Accepted by _____
Yellow: DED, DPZ				
Pink: Health				
Gold: SHA				



LOT 3
PLAT NO. 17362

LOT 2
1.3711 AC.±

THE HOWARD HUNT
PROPERTIES
L 11008 F.156

LOT 1
NO. 17362

18355 Penn Shop Rd.
B10002176

RECORDED AS PLAT NO. 17362 AMONG THE LAND RECORDS OF

DATE	REVISIONS

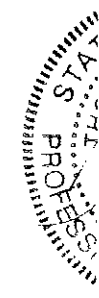
WALL CHECK DRAWING
LOT 2
JEFF HARRISON PRC

SITUATED ON PENN SHOP ROAD
FOURTH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
SCALE: 1"=50' MAY 2010

OWNER/DEVELOPER
FORTY WEST GROUP, INC.
3230 BETHANY LANE
SUITE 1
ELLCOTT CITY, MD 21042
410-418-8900



VANMAR ASSOCIATES, INC.
Engineers Surveyors Pl.
310 South Main Street Mount Airy,
(301) 829-2890 (301) 831-5015
Fax (301) 831-5603 ©Copyright



HAROLD & ERMALYN
CROWDER
L.390 F.372

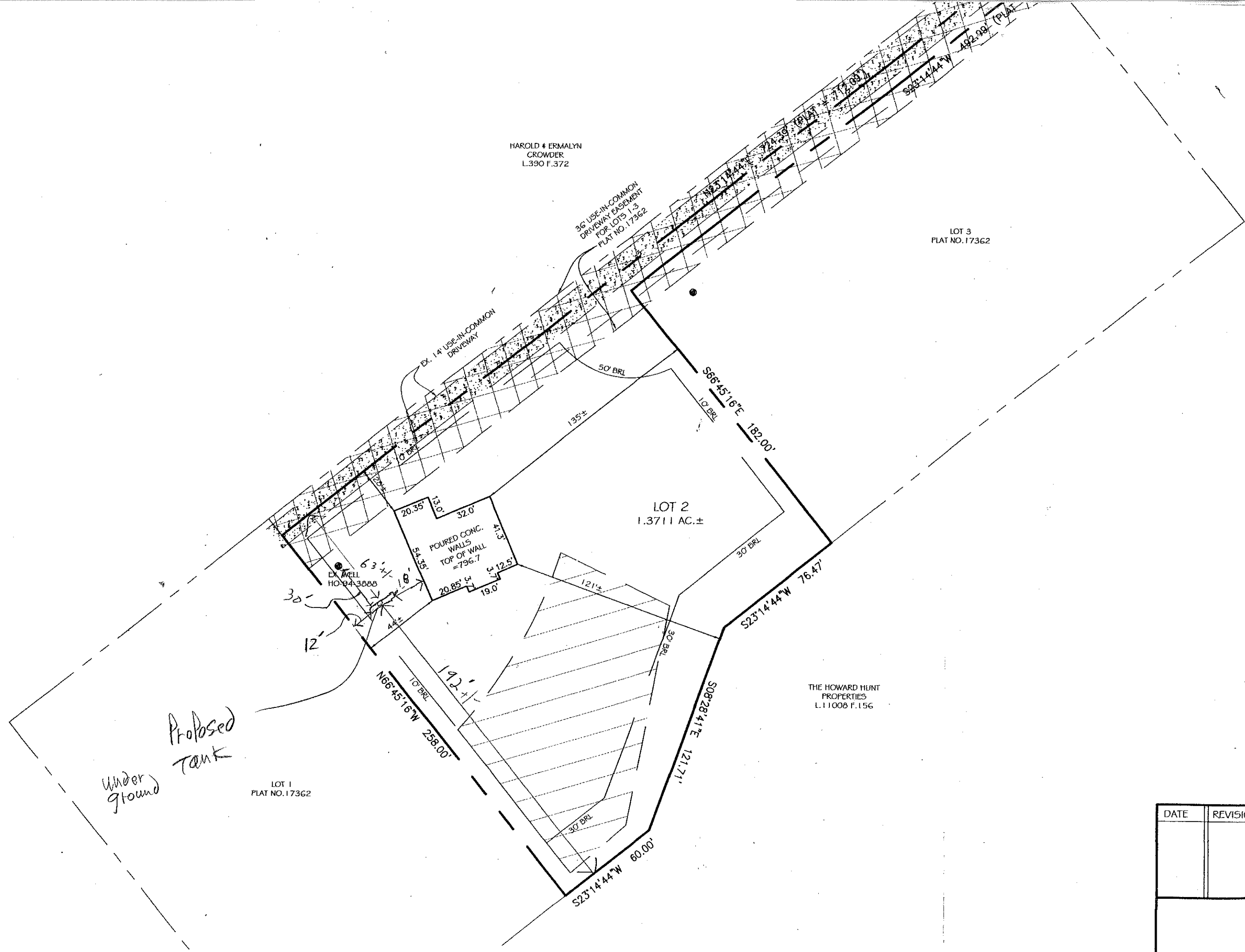
LOT 3
PLAT NO. 17362

LOT 2
1.3711 AC.±

THE HOWARD HUNT
PROPERTIES
L.11008 F.156

LOT 1
PLAT NO. 17362

*Under ground
Proposed
TANK*



DATE	REVISIONS

610000051

DEPARTMENT OF INSPECTIONS, LICENCES AND PERMITS
3430 COURT HOUSE DRIVE
ELLICOTT CITY, MD 21043
PERMITS (410) 313-2455 INSPECTIONS (410) 313-1810
AUTOMATED INFORMATION (410) 313-3800

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER
B10000573

Building Address 18355 Plover Shore Drive
Montgomery, MD 21771

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

Census Tract 6090.01 Subdivision Inter-Highway Property

Section _____ Area _____ Lot 2

Tax Map 6 Parcel 19 Grid 4

Zoning PD-00 Map Coordinates _____ Lot size 1.3711 acres

Property Owner's Name F. J. ...

Address 3230 ...

City Albany State MD Zip Code 21712

Phone _____ Phone _____

Applicant's Name & Mailing Address, (if other than stated hereon):

Phone _____ Fax _____

Existing Use Vacant

Proposed Use ... 500

Estimated Construction Cost \$ 280,000

Description of Work "Well ..."
4.22 4.5 ...

Contractor Company ...

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

License No. _____

Phone _____ Fax _____

Occupant or Tenant _____

Contact Name _____

Address _____

City _____ State _____ Zip Code _____

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 <input type="checkbox"/> Private <input type="checkbox"/>
No. of stories: _____	Sewage Disposal: _____ Public <input type="checkbox"/> Private <input type="checkbox"/>
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 <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular <input type="checkbox"/>	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 <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads _____

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

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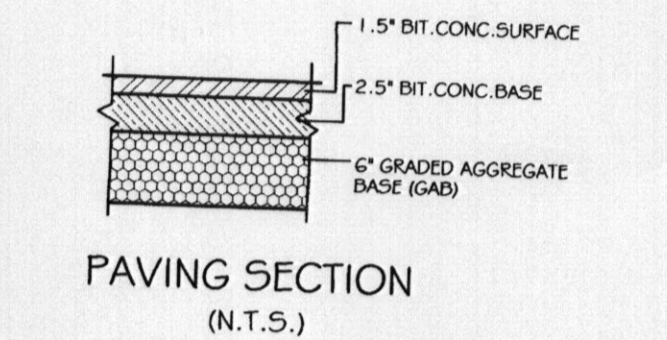
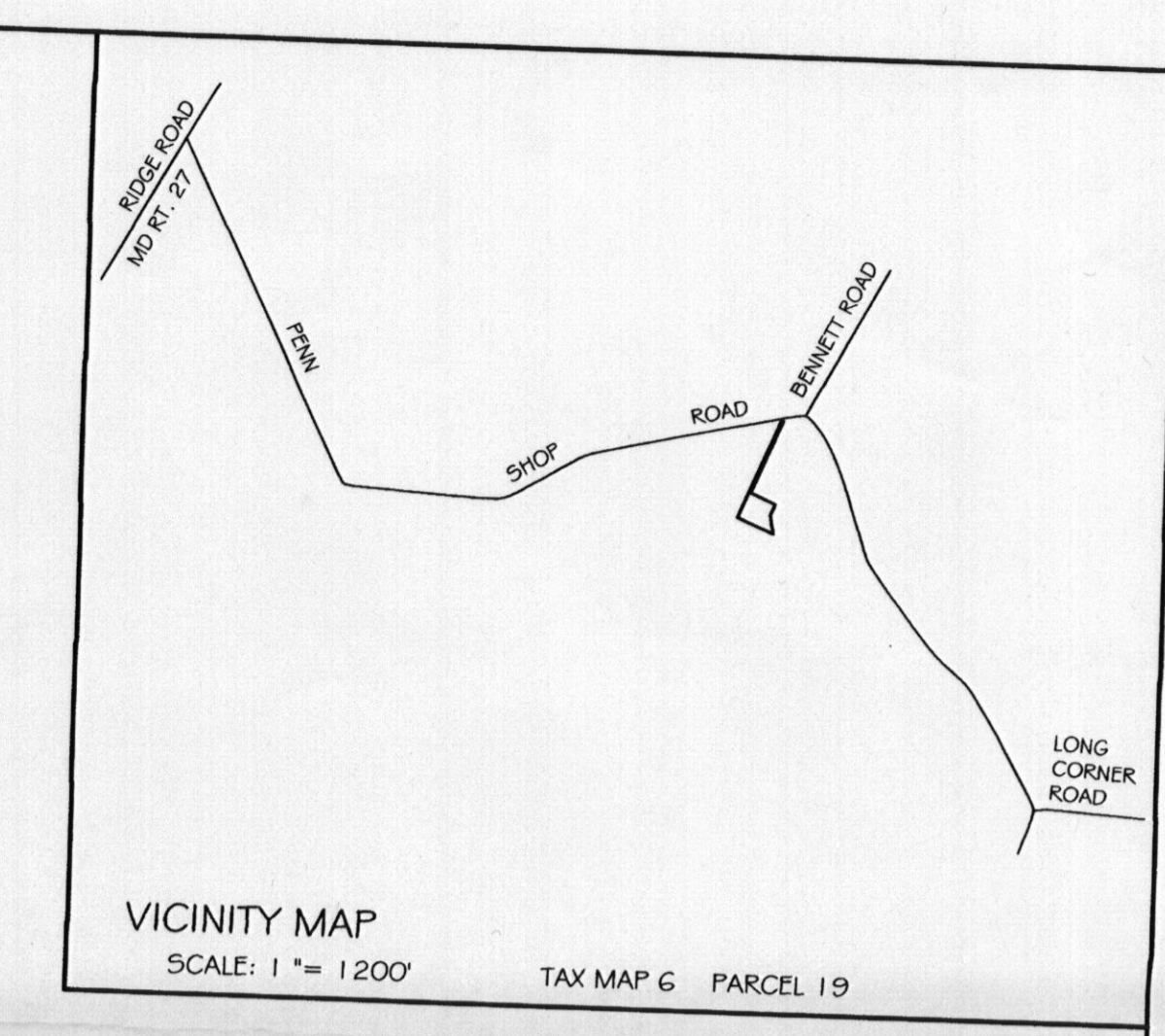
Applicant's Signature _____
Title/Company _____

Print Name Paul Cost
Date 3/12/10

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

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#
Land Development, DPZ			Front: _____	Filing fee \$ _____
State Highways			Rear: _____	Permit fee \$ _____
Building Official			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ	<u>4-2-10</u>	<u>Rona Bernard</u>	Side St.: _____	Add'l per. fee \$ _____
Health			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?			Is Entrance Permit required?	Balance due \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Historic District?	Validation # _____
ONE STOP SHOP: <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	
Distribution of Copies - White: Building Official			Lot Coverage for NewTown Zone _____	
Green: LDD, DPZ			SDP/Red-line approval date _____	Accepted by _____
Yellow: DED, DPZ			Yellow: DED, DPZ	Pink: Health
Pink: Health				Gold: SHA
Gold: SHA				

MCS (NAD83/91)



SEPTIC ELEVATIONS

PROPOSED HOUSE:	F.F. ELEV. = 797.5
	BSMT. ELEV. = 787.5
	GARAGE ELEV. = 796.0
	INV. OUT = 779.4
PROPOSED SEPTIC TANK:	EX GRD. ELEV. = 762.0
	PROP. GRD. ELEV. = 762.0
	INV. IN = 778.9
	INV. OUT = 776.7
PROPOSED DISTRIBUTION BOX:	EX GRD. ELEV. = 760.0
	INV. IN = 776.5
	INV. OUT = 776.3

- NOTES:
- The basis of bearings for this drawing is the Maryland Coordinate System, NAD83/91, per Plat No. 17362.
 - Contours shown hereon are from a Boundary and Topographic Survey by Fisher, Collins & Carter, Inc. dated February 2006 (2' interval), supplemented with field-run topo by VanMar Assoc., Inc. in 2/10. Vertical datum is NAVD83.
 - Actual length and number of trenches for sewerage to be determined at time of septic system permit issuance.
 - Proposed house is 4 bedrooms.
 - Limits of disturbance (LOD): 11,170 Sq. Ft.
 - The existing well shown hereon (H094-3888) was field located by VanMar Assoc., Inc. and is accurately shown.
 - Denotes 25% slopes.

Approved Septic System Plan
 Howard County Health Department
Anna-the-nurd 4-21-10
 Signature Date
 *For a four (4) Bedroom
 Only! *

64
 54
 67
 57
 58

STORM WATER MANAGEMENT NOTES:

Existing condition:	Grass	=	53,713 s.f.
Proposed condition:	Grass	=	50,012 s.f.
(No forest disturbance)	Impervious	=	3,701 s.f.

Net impervious disturbance is less than 5,000 s.f., therefore no storm water management is required.

RECORDED AS PLAT NO. 17362 AMONG THE LAND RECORDS OF HOWARD COUNTY, MARYLAND.

PLOT PLAN
 LOT 2
JEFF HARRISON PROPERTY

SITUATED ON PENN SHOP ROAD
 FOURTH ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND
 SCALE: 1"=50' MARCH 2010

VANMAR ASSOCIATES, INC.
 Engineers Surveyors Planners
 310 South Main Street Mount Airy, Maryland 21771
 (301) 829-2890 (301) 831-5015 (410) 548-2751
 Fax (301) 831-5603 ©Copyright, Latest Date Shown

DATE: 3/25/10
 4/15/10
 REVISIONS:
 PER COMMENTS
 PER COMMENTS

OWNER/DEVELOPER
 FORTY WEST GROUP, INC.
 3330 BETHANY LANE
 SUITE 1
 ELLICOTT CITY, MD 21042
 410-418-8900

300 HS 13 WH11-02

STATE OF MARYLAND
 PROFESSIONAL SURVEYOR
 THOMAS L. WILSON
 4/15/10

BO-5189