

HOWARD COUNTY
PERMIT APPLICATION

PERMIT NUMBER

D-158627

Building Address 16135 Ed Warfield Rd
Woodbine Md 21797
Suite/Apt. #: _____ SDP/WP/Petition #: _____
Census Tract 604002 Subdivision Moran Sub
Section _____ Area _____ Lot 1
Tax Map 13 Parcel 333 Grid 17
Zoning R-2 Map Coordinates 965 Lot size _____

Property Owner's Name James Walsh
Address 16135 Ed Warfield Rd
City Woodbine State Md Zip Code 21797
Home Phone 410-489-9074 Work Phone 410-912-5690
Applicant's Name & Mailing Address, (if other than stated hereon): _____
Phone _____ Fax _____

Existing Use Single Family
Proposed Use Same
Estimated Construction Cost \$ 58,000
Description of Work 36x26 3 car garage
With Storage above 14x36

Contractor Company Thomas General Contractor
Contact Person Thomas Biden
Address 337 Shames run drive
City Hamstead State Md Zip Code 21074
License No. _____
Phone 410-299-3619 Fax _____

Occupant or Tenant Owner
Contact Name James Walsh
Address 16135 Ed Warfield Rd
City Woodbine State Md Zip Code 21797
Phone 410-489-9094 Fax _____

Engineer or Architect Company _____
Contact Person Thomas Biden
Address _____
City _____ State _____ Zip Code _____
Phone 410-599-2442 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 <input checked="" type="checkbox"/>
1st floor: <u>26</u> Depth <u>36</u> Width <u>36</u>	Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/>
2nd floor: <u>14</u>	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Basement: _____	Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/>	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/>
Crawl space <input type="checkbox"/> Slab on Grade <input checked="" type="checkbox"/>	Natural Gas <input type="checkbox"/>
No. of Bedrooms <u>0</u>	Propane Gas <input type="checkbox"/>
Height: <u>11</u>	Sprinkler system: N/A <input checked="" type="checkbox"/>
Multi-family dwellings: _____	NFPA #13D _____
No. of efficiency units: _____	NFPA #13R _____
No. of 1 BR units: _____	Other: _____
No. of 2 BR units: _____	
No. of 3 BR units: _____	
Other Structure: _____	
Dimensions: _____	
Footings: _____	
Roof Height: _____	
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.

Thomas Biden
Applicant's Signature
Thomas General Contractor
Title/Company

Thomas Biden
Print Name
3-20-06
Date

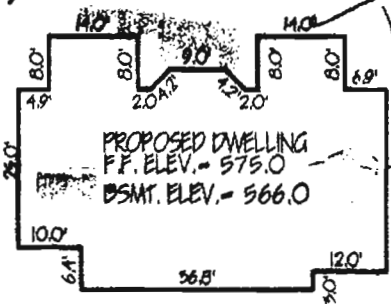
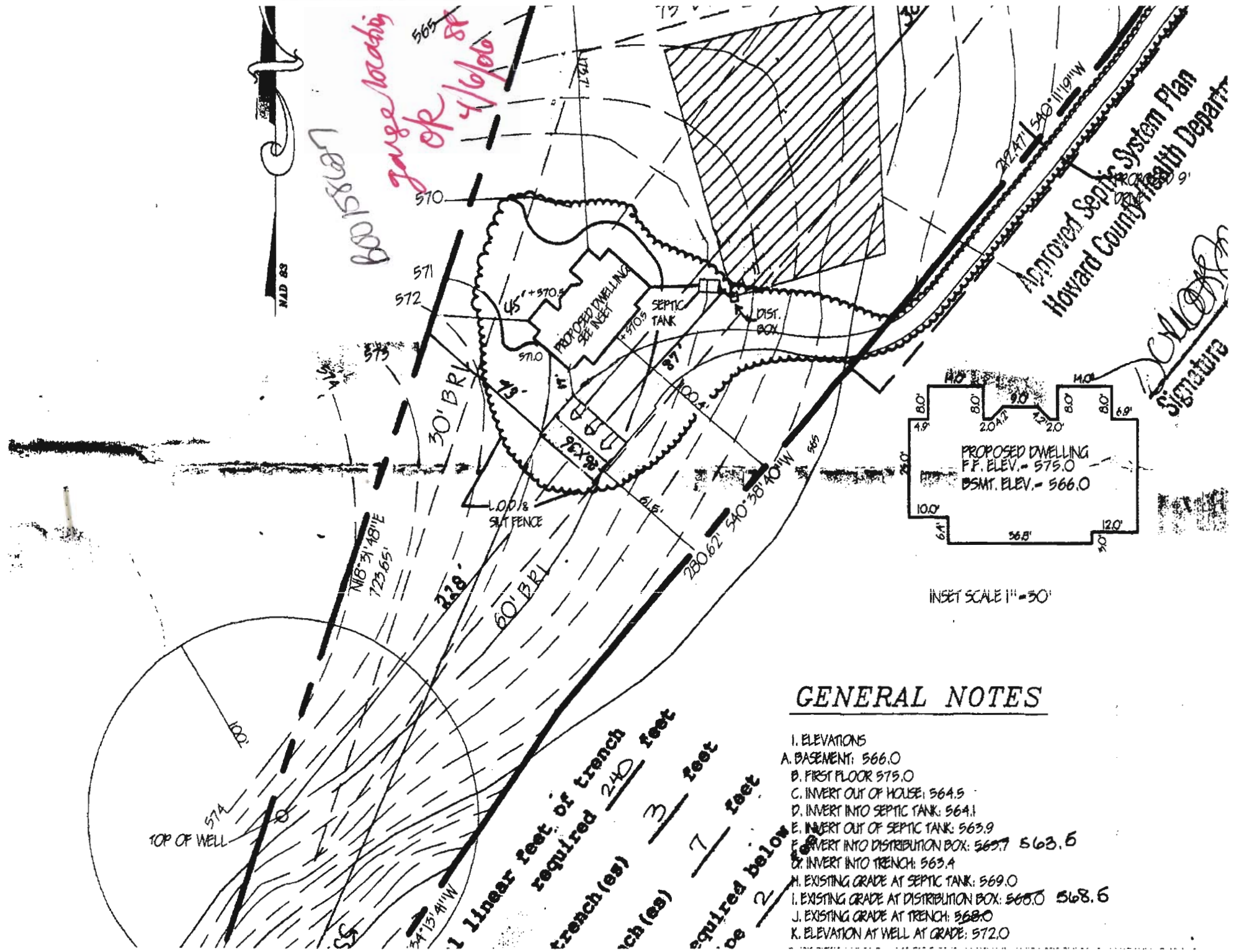
Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
** PLEASE WRITE NEATLY AND LEGIBLY. **

38724

AGENCY	DATE	SIGNATURE APPROVAL	DEVELOPER TRACK INFORMATION	PROPERTY INFO
Land Development, DPZ			Front: _____	Filing fee \$ <u>22.00</u>
State Highway			Rear: _____	Permit fee \$ _____
Building Official			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ			Side St: _____	Add'l per. fee \$ _____
Health	<u>4/16/06</u>	<u>Thomas Biden</u>	All minor setbacks met? <input type="checkbox"/>	TOTAL FEE \$ _____
Fire Protection			Entrance Permit required? <input type="checkbox"/>	Sub-total paid \$ _____
Is Sediment Control approval required prior to issuance?			Yes <input type="checkbox"/> No <input type="checkbox"/>	Balance due \$ _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Historic District? <input type="checkbox"/>	Check # <u>10590</u>
ONE STOP SHOP: <input type="checkbox"/>			Yes <input type="checkbox"/> No <input type="checkbox"/>	Validation # _____
Distribution of Copies: _____			Lot Coverage % <input type="checkbox"/> New Town Zone _____	Accepted by <u>[Signature]</u>
Building Official			SDP/Red-line approval date _____	Green: LDD, DPZ
Green: LDD, DPZ			Yellow: DED, DPZ	Pink: Health
Yellow: DED, DPZ			Pink: Health	Gold: SHA
Pink: Health			Gold: SHA	Rev. 11/04



*base location
zone ok 4/6/06*



Approved Septic System Plan
 Howard County Health Department

[Signature]
 Signature

GENERAL NOTES

- I. ELEVATIONS
- A. BASEMENT: 566.0
- B. FIRST FLOOR 575.0
- C. INVERT OUT OF HOUSE: 564.5
- D. INVERT INTO SEPTIC TANK: 564.1
- E. INVERT OUT OF SEPTIC TANK: 563.9
- F. INVERT INTO DISTRIBUTION BOX: 563.7 563.6
- G. INVERT INTO TRENCH: 563.4
- H. EXISTING GRADE AT SEPTIC TANK: 569.0
- I. EXISTING GRADE AT DISTRIBUTION BOX: 568.0 568.6
- J. EXISTING GRADE AT TRENCH: 568.0
- K. ELEVATION AT WELL AT GRADE: 572.0

1 Linear feet of trench
 required 240 feet
 trench (es) 3 feet
 required below
 trench (es) 7 feet
 required below