

HOWARD COUNTY
PERMIT APPLICATION

PERMIT NUMBER

Building Address 1714 Archers Glen
Sykesville MD 21784

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

Census Tract _____ Subdivision Archers Glen

Section _____ Area _____ Lot 7

Tax Map _____ Parcel _____ Grid _____

Zoning _____ Map Coordinates _____ Lot size 43,397 sq. ft.

Property Owner's Name Pascal Fagerstrom

Address 1714 ARCHERS GLEN

City SYKESVILLE State MD Zip Code 21784

Home Phone 443 266 7100 ^{cell} Work Phone 410 596 9232

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

Phone _____ Fax _____

Existing Use _____

Proposed Use deck 72 x 41

Estimated Construction Cost \$ \$19,000

Description of Work deck w/ steps -
trex material + wood

Contractor Company Self

Contact Person BRUCE or PASCAL FAGERSTROM

Address See above

City _____ State _____ Zip Code _____

License No. _____

Phone _____ Fax _____

Occupant or Tenant FAGERSTROM

Contact Name SAME

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Engineer or Architect Company Self

Contact Person _____

Address See above

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 _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
State Certified Modular _____	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"/> Depth _____ Width _____	Water Supply: _____ Public _____ Private <input checked="" type="checkbox"/>
1st floor: _____	Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/>
2nd floor: _____	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Basement: _____	Gas Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/>	Heating System: _____ Electric <input checked="" type="checkbox"/> Oil <input type="checkbox"/>
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Natural Gas <input checked="" type="checkbox"/>
No. of Bedrooms <u>4</u>	Propane Gas <input checked="" type="checkbox"/>
Height: _____	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.

Pascal Fagerstrom
Applicant's Signature

Title/Company

PASCAL FAGERSTROM
Print Name

2/28/07
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		
Health	<u>2/28/07</u>	<u>R. Buehler</u>
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 \$ _____
Rear: _____	Permit fee \$ _____
Side: _____	Excise tax \$ _____
Side St.: _____	Add'l per. fee \$ _____
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
Lot Coverage for NewTown Zone _____	Check # _____
SDP/Red-line approval date _____	Validation # _____
Accepted by _____	

**HOWARD COUNTY
PERMIT APPLICATION**

PERMIT NUMBER

B00157987

Building Address 1714 Archers Glen
Sykesville MD 21784 (G-POB-66)
Suite/Apt. #: 03-31100 SDP/WP/Petition #: PLAT # 1645
Census Tract 00300 Subdivision Archers Glen
Section _____ Area _____ Lot 7
Tax Map 9 Parcel 301 Grid 22
Zoning RC-050 Map Coordinates 5B12 Lot size 43,377

Property Owner's Name Bivens + the state Fagerstrom
Address 13074 Margaret Ct
City Narrickville State MD Zip Code 4104
Home Phone 410 516 4933 Work Phone _____
Applicant's Name & Mailing Address, (if other than stated hereon):
Phone _____ Fax _____

Existing Use Vacant lot
Proposed Use SFD 2 story Brick Front, 4 Bed
Estimated Construction Cost \$ 350,000
Description of Work 2 story 4 Bed, 4 Bath unit with
Basement, Brick Front

Contractor Company Viking Development Corp
Contact Person Cary Cumberland
Address 515 Windsor Dr
City Sykesville State MD Zip Code 21781
License No. 1185
Phone 410 977 2188 Fax 410 437-7613

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

Engineer or Architect Company CDW Works
Contact Person Dennis
Address Friedrick MD
City _____ State _____ Zip Code _____
Phone 500 766-730 Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics
Height: _____
No. of stories: _____
Gross area, sq. ft. per floor: _____
Use group: _____
Construction type:
 Reinforced Concrete
 Structural Steel
 Masonry
 Wood Frame
 State Certified Modular

Utilities
Water Supply: _____
 Public
 Private
Sewage Disposal: _____
 Public
 Private
Electric Yes No
Gas Yes No
Heating System:
Electric Oil
Natural Gas
Propane Gas
Sprinkler system: N/A
 Full
 Partial
 Other Suppression
of Heads _____

Building Characteristics
SF Dwelling SF Townhouse
Depth Width
1st floor: 45 55
2nd floor: 45 55
Basement: 45 55
Finished Basement Unfinished Basement
Crawl space Slab on Grade
No. of Bedrooms 4
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

Utilities
Water Supply: _____
 Public
 Private
Sewage Disposal: _____
 Public
 Private
Electric Yes No
Gas Yes No
Heating System:
Electric Oil
Natural Gas
Propane Gas
Sprinkler system: N/A
 NFPA #13D
 NFPA #13R
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.

Cary Cumberland
Applicant's Signature
President
Title/Company

Cary Cumberland
Print Name
2-1-06
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		
Health		
Fire Protection		

DPZ SETBACK INFORMATION
Front: _____
Rear: _____
Side: _____
Side St.: * _____
All minimum setbacks met?
YES NO
Is Entrance Permit required?
YES NO
Historic District?
YES NO
Lot Coverage for NewTown Zone _____
SDP/Red-line approval date _____

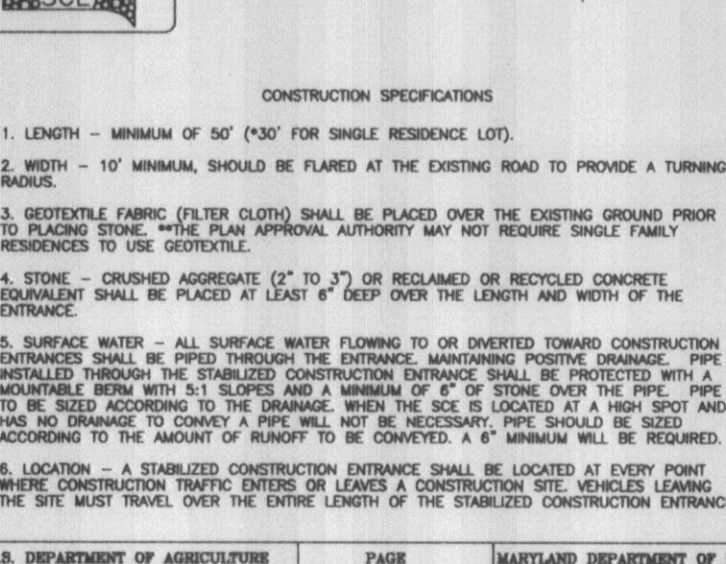
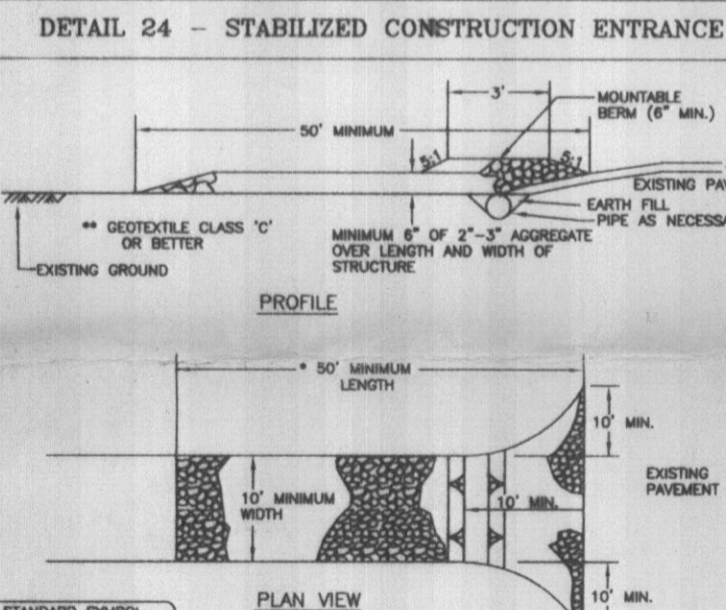
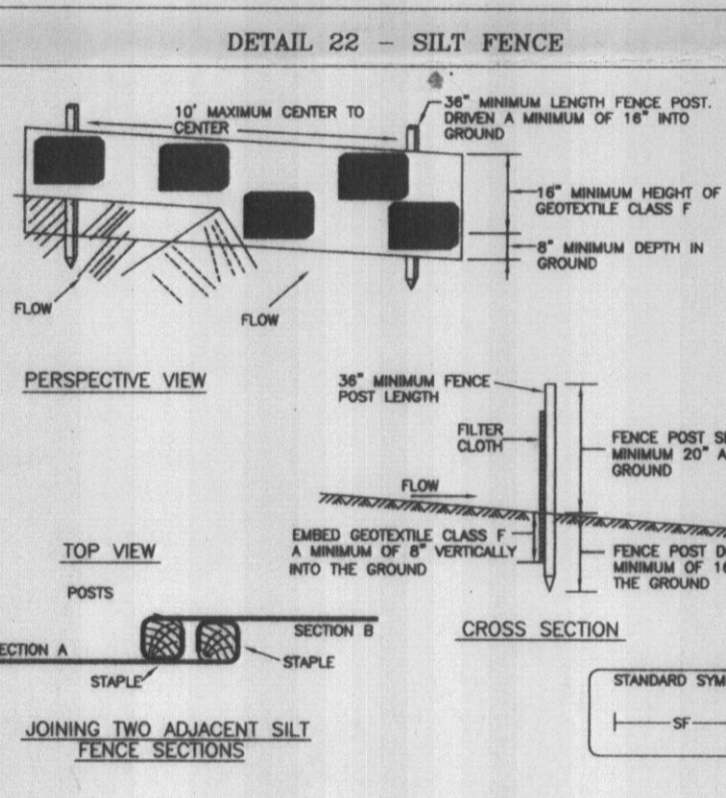
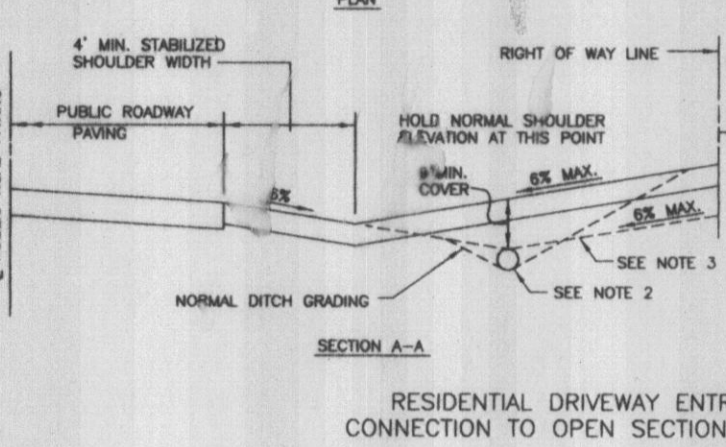
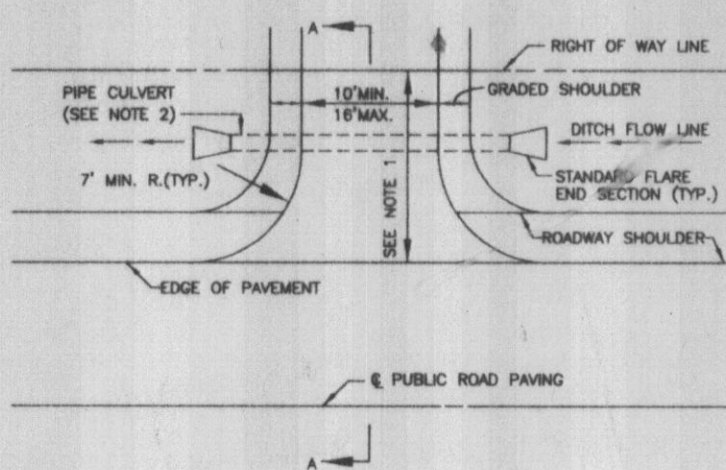
PROPERTY ID#: 65587
Filing fee \$ 100
Permit fee \$ _____
Excise tax \$ _____
Add'l per. fee \$ _____
TOTAL FEES \$ _____
Sub-total paid \$ _____
Balance due \$ _____
Check # 5653
Validation # 105997

Is Sediment Control approval required prior to issuance?
YES NO

CONTINGENCY CONSTRUCTION START:
ONE STOP SHOP:

Accepted by [Signature]

Distribution of Copies - White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA



- NOTES:
- THE TOPOGRAPHY SHOWN HEREON WAS FIELD-RUN BY SHANABERGER & LANE ON APRIL 26, 2004.
 - B.R.L. DESIGNATES BUILDING RESTRICTION LINE
 - DESIGNATES EX. WELL
 - THIS AREA DESIGNATES A PRIVATE SEWAGE DISPOSAL AREA AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWAGE DISPOSAL IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED. THIS DISPOSAL AREA SHALL BECOME NULL & VOID UPON CONNECTION TO A PUBLIC SEWAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT ADJUSTMENTS TO THE PRIVATE SEWAGE DISPOSAL AREA.
 - SUBJECT PROPERTY ZONED: RC-DEO
 - LIMIT OF DISTURBANCE: [Symbol]

- SEDIMENT CONTROL NOTES
- A MINIMUM OF 48 HOURS NOTICE MUST BE GIVEN TO THE HOWARD COUNTY DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS, SEDIMENT CONTROL DIVISION PRIOR TO THE START OF ANY CONSTRUCTION (11-1855).
 - ALL VEGETATIVE AND STRUCTURAL PRACTICES ARE TO BE INSTALLED ACCORDING TO THE PROVISIONS OF THIS PLAN AND ARE TO BE IN CONFORMANCE WITH THE 1984 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL, AND REVISIONS THEREOF.
 - FOLLOWING INITIAL SOIL DISTURBANCE OR REDISTURBANCE, PERMANENT OR TEMPORARY STABILIZATION SHALL BE COMPLETED WITHIN:
 A) 7 CALENDAR DAYS FOR ALL PERIMETER SEDIMENT CONTROL STRUCTURES, DIKES, PERMETER SLOPES AND ALL SLOPES GREATER THAN 3:1
 B) 14 DAYS AS TO ALL OTHER DISTURBED OR GRADED AREAS ON THE PROJECT SITE.
 FOR PERMANENT SEEDING, SOIL TEMPORARY SEEDING AND MULCHING (22-60)
 - ALL DISTURBED AREAS MUST BE STABILIZED WITHIN THE TIME PERIOD SPECIFIED ABOVE, IN ACCORDANCE WITH THE 1984 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL. TEMPORARY STABILIZATION WITH MULCH ALONE CAN ONLY BE DONE WHEN RECOMMENDED SEEDING DATES DO NOT ALLOW FOR PROPER GERMINATION AND ESTABLISHMENT OF GRASSES.
 - ADDITIONAL SEDIMENT CONTROL MUST BE PROVIDED, IF DEEMED NECESSARY BY THE HOWARD COUNTY DPW SEDIMENT CONTROL INSPECTOR.
 - SEED ANALYSIS:
 TOTAL AREA OF SITE: 43,397 SF ±
 AREA TO BE ROOFED OR PAVED: 15,588 SF ±
 AREA TO VEGETATIVELY STABILIZED: 4,930 SF ±
 TOTAL FILL: 10,658 SF ±
 OFFSITE WASTE/BORROW AREA LOCATION: [Symbol] SITE WITH AN APPROVED ACTIVE GRADING PERMIT
 *** EXISTING QUANTITIES ARE APPROXIMATE AND ARE NOT TO BE USED AS BASIS FOR ANY BIDDING OR CONTRACTS ***
 - ANY SEDIMENT CONTROL PRACTICE WHICH IS DISTURBED BY GRADING ACTIVITY FOR PLACEMENT OF UTILITIES MUST BE REPAIRED ON THE SAME DAY OF DISTURBANCE.
 - ADDITIONAL SEDIMENT CONTROL MUST BE PROVIDED, IF DEEMED NECESSARY BY THE HOWARD COUNTY DPW SEDIMENT CONTROL INSPECTOR.
 - ON ALL SITES WITH DISTURBED AREAS IN EXCESS OF 2 ACRES, APPROVAL OF THE INSPECTION AGENCY SHALL BE REQUESTED UPON THE COMPLETION OF THE INSTALLATION OF PERIMETER EROSION AND SEDIMENT CONTROLS, BUT BEFORE PROCEEDING WITH ANY OTHER EARTH DISTURBANCE OR GRADING. OTHER BUILDING OR GRADING INSPECTION APPROVALS MAY NOT BE AUTHORIZED UNTIL THIS INITIAL APPROVAL BY THE INSPECTION AGENCY IS MADE.
 - TRENCHES FOR THE CONSTRUCTION OF UTILITIES IS LIMITED TO THREE PIPE LENGTHS OR THAT WHICH SHALL BE BACKFILLED AND STABILIZED WITHIN ONE WORKING DAY, WHICHEVER IS SHORTER.
 - THE TOTAL AMOUNT OF SILT FENCE = 224 LF.

SEPTIC SYSTEM DATA

INV. AT HOUSE: 590.8

SEPTIC TANK

EX. GRADE: 591.3
 FIN. GRADE: 592.0
 INV. IN: 589.5
 INV. OUT: 589.2

DISTRIBUTION BOX

EX. GRADE: 590.8
 FIN. GRADE: 590.8
 INV. IN: 587.0
 INV. OUT: 586.8

TRENCHES

INLET DEPTH: 4'
 BOTTOM DEPTH: 8'
 WIDTH: 18"

NOTE: TRENCH LENGTH AND ORIENTATION TO BE DETERMINED BY HEALTH DEPARTMENT AT TIME OF SEPTIC SYSTEM LAYOUT INSPECTION.

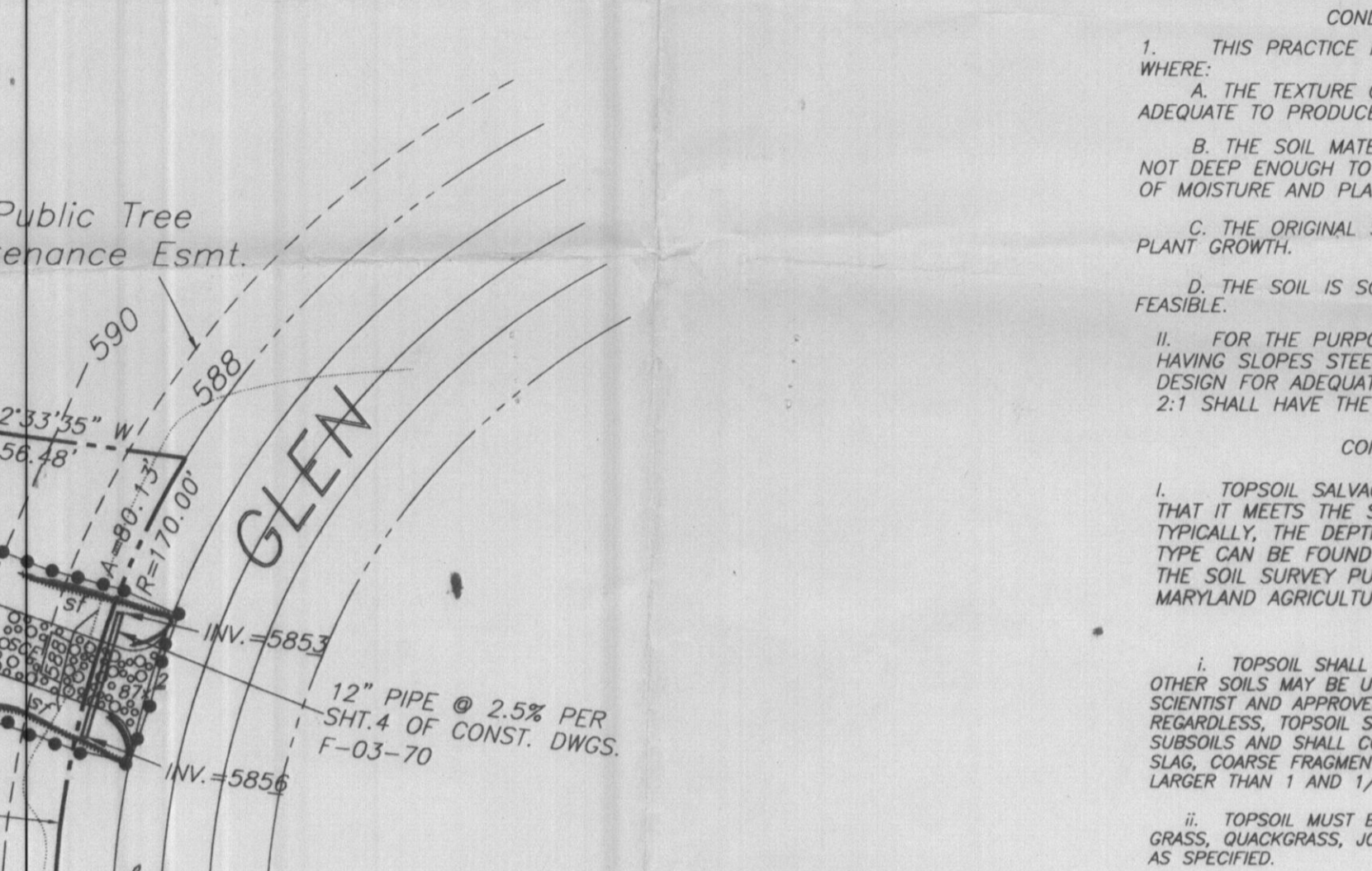
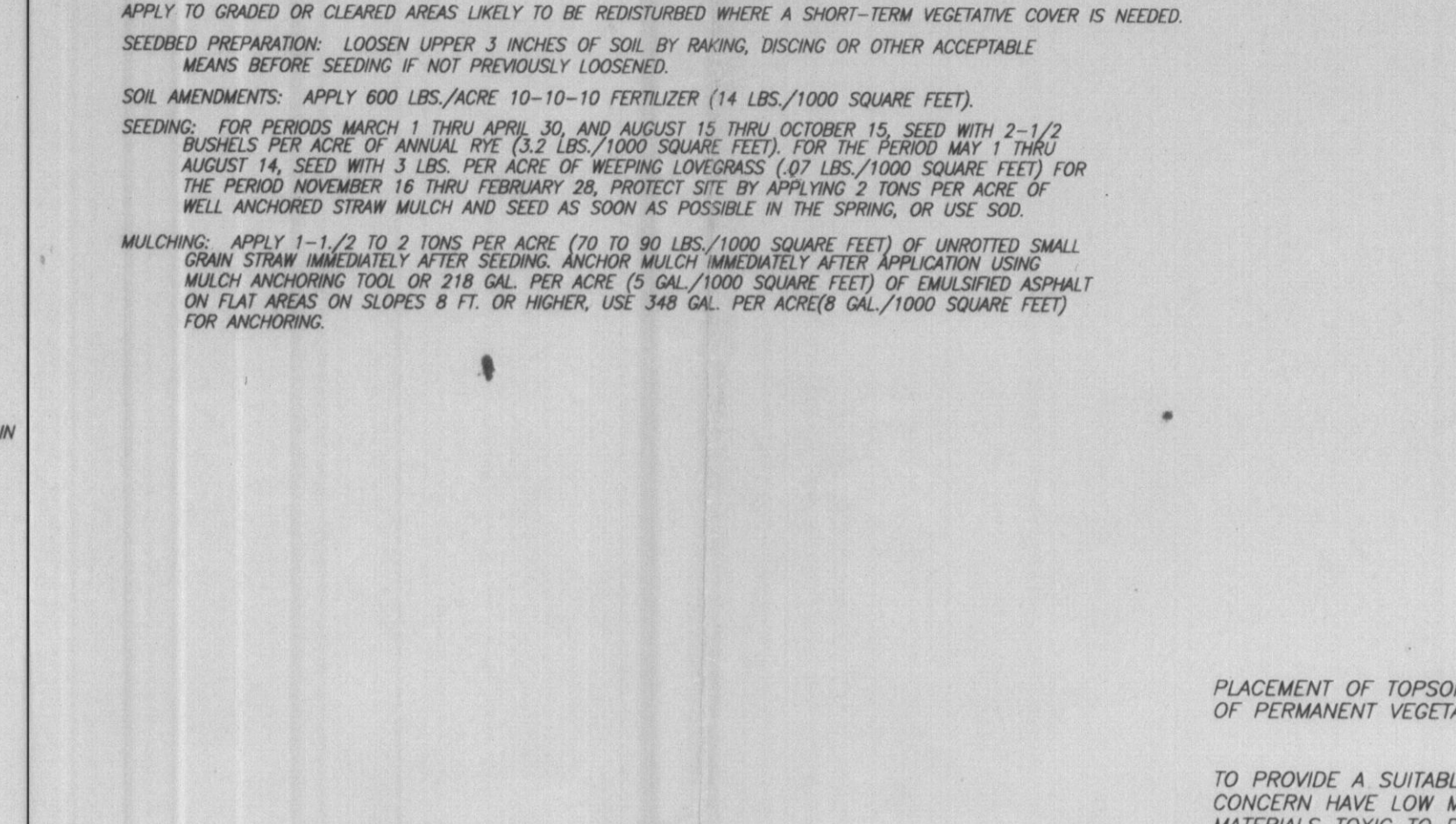
* AN EJECTOR PUMP WILL BE REQUIRED FOR SEWER SERVICE TO BASEMENT LEVEL.

SEQUENCE OF CONSTRUCTION

- OBTAIN GRADING PERMIT.
- INSTALL STABILIZED CONSTRUCTION ENTRANCE.
- INSTALL PERIMETER AND EROSION CONTROL DEVICES AND STABILIZE.
- EXCAVATE FOUNDATIONS, ROUGH GRADE AND TEMPORARILY STABILIZE.
- CONSTRUCT WALKS, SIDEWALKS AND DRIVEWAYS.
- FINAL GRADE AND STABILIZE IN ACCORDANCE WITH STDS. & SPECS.
- UPON APPROVAL OF THE SEDIMENT CONTROL INSPECTOR, REMOVE SEDIMENT AND EROSION CONTROL DEVICES AND STABILIZE.

- PERMANENT SEEDING NOTES
- APPLY TO GRADED OR CLEARED AREAS NOT SUBJECT TO IMMEDIATE FURTHER DISTURBANCE WHERE A PERMANENT LOG-LINED VEGETATIVE COVER IS NEEDED.
- SEEDING PREPARATION: LOOSEN UPPER 3 INCHES OF SOIL BY RAKING, DISCING OR OTHER ACCEPTABLE MEANS BEFORE SEEDING. IF NOT PREVIOUSLY LOOSENED.
- SOIL AMENDMENTS: USE ONE OF THE FOLLOWING SCHEDULES:
 1. PREFERRED - APPLY 2 TONS PER ACRE DOLOMITE LIMESTONE (92 LBS./SQUARE FOOT) AND 800 LBS. PER ACRE 10-10-10 FERTILIZER (14 LBS./1000 SQUARE FEET) BEFORE SEEDING. HARROW OR DISC INTO THREE INCHES OF SOIL. AT TIME OF SEEDING, APPLY 400 LBS. PER ACRE 30-0-0 UREA/FORM FERTILIZER (9 LBS./1000 SQUARE FEET).
 2. ACCEPTABLE - APPLY 2 TONS PER ACRE DOLOMITE LIMESTONE (92 LBS./1000 SQUARE FEET) AND 1000 LBS. PER ACRE 10-10-10 FERTILIZER (23 LBS./1000 SQUARE FEET) BEFORE SEEDING. HARROW OR DISC INTO UPPER THREE INCHES OF SOIL.
- SEEDING: FOR THE PERIODS MARCH 1 THRU APRIL 30, AND FROM AUGUST 15 THRU NOVEMBER 15, SEED WITH 2 1/2 BSHL. PER ACRE OF ANNUAL RYE (3.2 LBS./1000 SQUARE FEET) FOR THE PERIOD MAY 1 THRU AUGUST 14, SEED WITH 3 LBS. PER ACRE OF WEEPING LOVEGRASS (0.7 LBS./1000 SQUARE FEET) FOR THE PERIOD NOVEMBER 1 THRU FEBRUARY 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 SOU.
- MULCHING: APPLY 1-1/2 TO 2 TONS PER ACRE (70 TO 90 LBS./1000 SQUARE FEET) OF UNROTTED SMALL GRAIN STRAW IMMEDIATELY AFTER SEEDING. ANCHOR MULCH IMMEDIATELY AFTER APPLICATION USING MULCH ANCHORING TOOL OR 218 GAL. PER ACRE (5 GAL./1000 SQUARE FEET) OF EMULSIFIED ASPHALT FLAT AREAS ON SLOPES 8 FT. OR HIGHER, USE 348 GAL. PER ACRE (8 GAL./1000 SQUARE FEET) FOR ANCHORING.
- MAINTENANCE: INSPECT ALL SEEDING AREAS AND MAKE NEEDED REPAIRS DISCING OR OTHER RESEEDING.

- TEMPORARY SEEDING NOTES
- APPLY TO GRADED OR CLEARED AREAS LIKELY TO BE REDISTURBED WHERE A SHORT-TERM VEGETATIVE COVER IS NEEDED.
- SEEDING PREPARATION: LOOSEN UPPER 3 INCHES OF SOIL BY RAKING, DISCING OR OTHER ACCEPTABLE MEANS BEFORE SEEDING IF NOT PREVIOUSLY LOOSENED.
- SOIL AMENDMENTS: APPLY 600 LBS./ACRE 10-10-10 FERTILIZER (14 LBS./1000 SQUARE FEET).
- SEEDING: FOR PERIODS MARCH 1 THRU APRIL 30, AND AUGUST 15 THRU OCTOBER 15, SEED WITH 2-1/2 BUSHELS PER ACRE OF ANNUAL RYE (3.2 LBS./1000 SQUARE FEET). FOR THE PERIOD MAY 1 THRU AUGUST 14, SEED WITH 3 LBS. PER ACRE OF WEEPING LOVEGRASS (0.7 LBS./1000 SQUARE FEET) FOR THE PERIOD NOVEMBER 1 THRU FEBRUARY 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 SOU.
- MULCHING: APPLY 1-1/2 TO 2 TONS PER ACRE (70 TO 90 LBS./1000 SQUARE FEET) OF UNROTTED SMALL GRAIN STRAW IMMEDIATELY AFTER SEEDING. ANCHOR MULCH IMMEDIATELY AFTER APPLICATION USING MULCH ANCHORING TOOL OR 218 GAL. PER ACRE (5 GAL./1000 SQUARE FEET) OF EMULSIFIED ASPHALT FLAT AREAS ON SLOPES 8 FT. OR HIGHER, USE 348 GAL. PER ACRE (8 GAL./1000 SQUARE FEET) FOR ANCHORING.



OWNER/DEVELOPER:
 VIKING DEVELOPMENT
 815 WINDRIVER DR.
 SYKESVILLE, MD. 21784

DESIGNED: RDH
 DRAWN: RDH
 CHECKED: GSS
 DATE: 1/19/06

GRADING, SEDIMENT & EROSION CONTROL PLAN
 LOT 7
 "ARCHERS GLEN"
 LOTS 6 THRU 22 AND
 PRESERVATION PARCELS 'A' THRU 'C'
 (PLAT #16455)
 TAX MAP 9 GRID 22 PARCEL 301
 THIRD ELECTION DIST. HOWARD CO., MD.
 SCALE: 1"=30' JANUARY 19, 2006

"I CERTIFY THAT THIS PLAN FOR EROSION AND SEDIMENT CONTROL REPRESENTS 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 COUNTY CONSERVATION DISTRICT"

G. SCOTT SHANABERGER
 PROFESSIONAL L.S. #10849
 DATE: 1/19/06

DEVELOPERS CERTIFICATE

"I CERTIFY THAT ALL DEVELOPMENT AND/OR CONSTRUCTION WILL BE DONE ACCORDING TO THESE PLANS, AND THAT ANY RESPONSIBLE PERSONNEL INVOLVED IN THE CONSTRUCTION PROJECT WILL HAVE A CERTIFICATE OF ATTENDANCE AT A DEPARTMENT OF NATURAL RESOURCES APPROVED TRAINING PROGRAM FOR THE CONTROL OF SEDIMENT AND EROSION BEFORE BEGINNING THE PROJECT. I ALSO AUTHORIZE PERIODIC ON-SITE INSPECTION BY THE HOWARD COUNTY CONSERVATION DISTRICT."

NAME AND TITLE: [Signature]
 DATE: 1/19/06

REVIEWED FOR HOWARD SCD AND MEETS TECHNICAL REQUIREMENTS

THIS DEVELOPMENT PLAN IS APPROVED FOR SOIL EROSION AND SEDIMENT CONTROL BY THE HOWARD SOIL CONSERVATION DISTRICT.

SHANABERGER & LANE
 8726 TOWN & COUNTRY BLVD.
 SUITE 201
 ELLICOTT CITY, MD., 21043
 (410)-461-9563

BY: [Signature] NO. [Signature] REVISION

DATE: 2/1/06

DESIGNED	RDH
DRAWN	RDH
CHECKED	GSS
DATE	1/19/06

SCALE: 1"=30'	SHEET
DRAWING: 0412SP7.dwg	
JOB NO.: 0412-10	OF 1
FILE NO.: SDP-0	