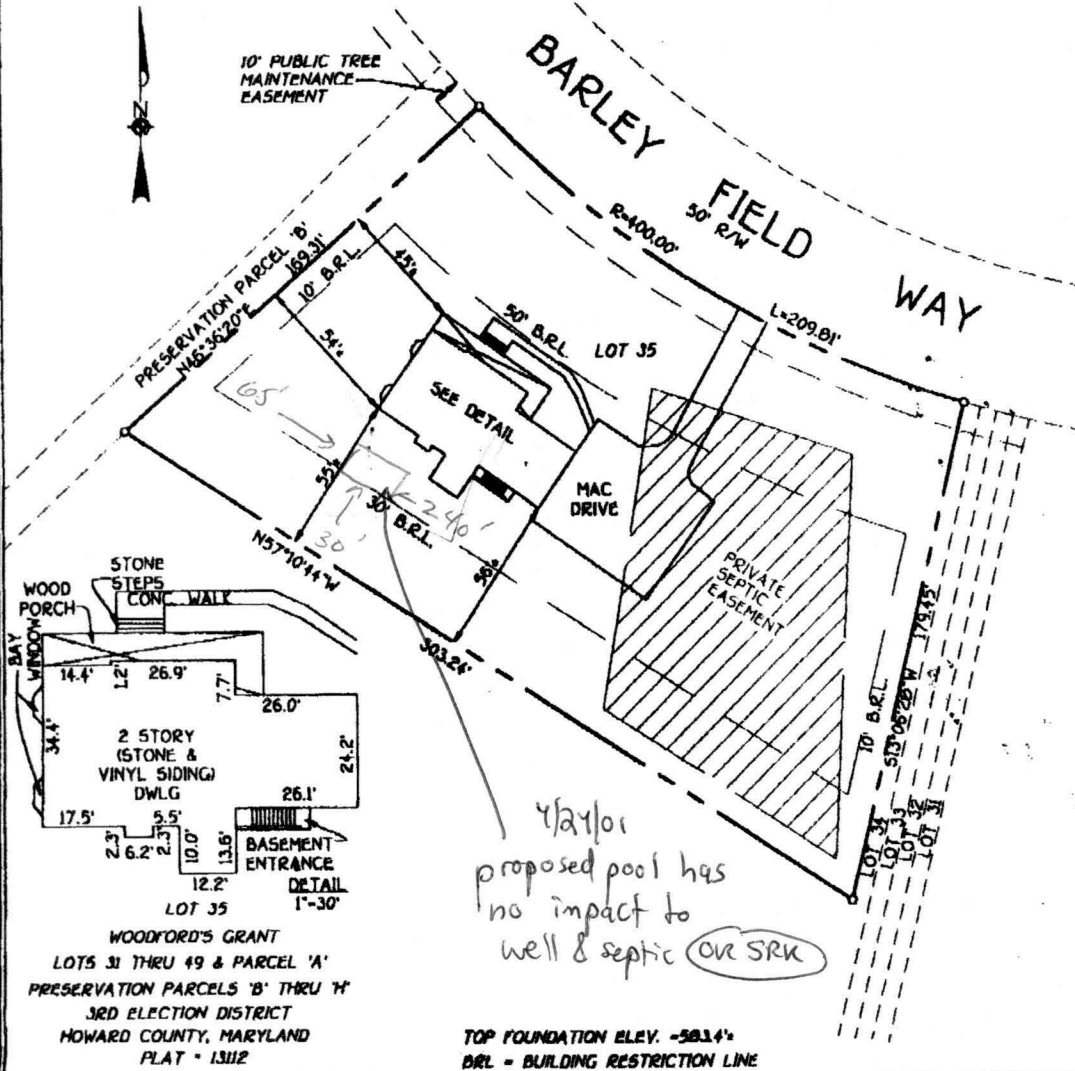


**GENERAL NOTES:**

- 1) THIS PLAT IS PREPARED FOR THE BENEFIT OF THE CLIENT SIGNING THE HOUSE LOCATION SURVEY APPROVAL FORM INsofar AS IT IS REQUIRED BY A LENDER OR TITLE INSURANCE COMPANY OR ITS AGENTS IN CONNECTION WITH THE CONTEMPLATED TRANSFER, FINANCING OR RE-FINANCING. UNLESS INDICATED AS BEING A BOUNDARY SURVEY, THIS PLAT IS NOT INTENDED FOR USE IN THE ESTABLISHMENT OF PROPERTY LINES AND IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATIONS OF FENCES, GARAGES, BUILDINGS OR OTHER EXISTING OR FUTURE IMPROVEMENTS. AS A RESULT, THIS PLAT DOES NOT PROVIDE FOR ACCURATE IDENTIFICATION OF PROPERTY LINE, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING OR RE-FINANCING.
- 2) SUBJECT PROPERTY IS SHOWN IN ZONE C ON THE NATIONAL FLOOD INSURANCE PROGRAM FLOOD INSURANCE RATE MAP OF HOWARD COUNTY, MARYLAND, COMMUNITY PANEL No. 2400440010 B, EFFECTIVE DATE: DEC. 1, 1986.
- 3) THE OFFSETS FROM BUILDING LINE TO PROPERTY LINE AS SHOWN ON THE PLAT HEREON ARE TO AN ACCURACY OF 1' PLUS OR MINUS (±).



300129595

**FISHER, COLLINS & CARTER, INC.**  
 CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS  
 CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE  
 ELLECIOTT CITY, MARYLAND 21042  
 (410) 486 - 2955

G:\DWG\61049\LOT 35HL.DWG

STATE OF MARYLAND  
 CHARLES J. CROVO, S.T.  
 PROFESSIONAL LAND SURVEYOR  
 No. 10763  
 REGISTERED

*[Signature]*  
 PROFESSIONAL LAND SURVEYOR  
 REG. - 10763

DATE: 11/15/99

**HOUSE LOCATION DRAWING**

FOUNDATION LOCATION: 6/30/99  
 FINAL LOCATION: 11/12/99  
 BOUNDARY SURVEY:

SCALE: 1"=50'  
 DATE: 11/15/99  
 DRAWN BY: L.P.F.  
 CHECKED BY: C.C.  
 PROJECT No. 61049

Building Address 11376 Barley Field Way  
MARRIOTTVILLE MD 21104

Suite/Apt. #: \_\_\_\_\_ SDP/WP/Petition #: \_\_\_\_\_

Census Tract C070.00 Subdivision Woodford's Grant Home Phone 410/442-5133 Work Phone 410/494-4994

Section \_\_\_\_\_ Area \_\_\_\_\_ Lot 35

Tax Map 10 Parcel 152 Grid 15

Zoning RC-200 Map Coordinates 5K11 Lot size \_\_\_\_\_

Property Owner's Name William R Floyd  
 Address 11376 Barley Field Way  
 City Mariottsville State MD Zip Code 21104  
 Applicant's Name & Mailing Address, (if other than stated hereon): \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Existing Use SFD

Proposed Use Garage

Estimated Construction Cost 13000

Description of Work Two car Garage  
20' x 24'

Contractor Company Same as owner

Contact Person \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

License No. \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

Occupant or Tenant

Contact Name Bill Floyd

Address Same

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Engineer or Architect Company \_\_\_\_\_

Contact Person \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

BUILDING DESCRIPTION - <u>COMMERCIAL</u>		BUILDING DESCRIPTION - <u>RESIDENTIAL</u>	
Building Characteristics		Building Characteristics	
Height: _____	Utilities	SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/>	Utilities
No. of stories: _____	Water Supply: _____	1st floor: <u>20'</u> <u>24'</u>	Water Supply: _____
Gross area, sq. ft. per floor: _____	_____ Public	2nd floor: _____	_____ Public
Use group: _____	_____ Private	Basement: _____	_____ Private
Construction type: _____	Sewage Disposal: _____	Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/>	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
_____ Reinforced Concrete	_____ Public	Crawl space <input type="checkbox"/> Slab on Grade <input checked="" type="checkbox"/>	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
_____ Structural Steel	_____ Private	No. of Bedrooms _____	Heating System: _____
_____ Masonry	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>	Multi-family dwellings:	Electric <input checked="" type="checkbox"/> Oil <input type="checkbox"/>
_____ Wood Frame	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>	No. of efficiency units: _____	Natural Gas <input type="checkbox"/>
_____ State Certified Modular	Heating System: _____	No. of 1 BR units: _____	Propane Gas <input type="checkbox"/>
	Natural Gas <input type="checkbox"/>	No. of 2 BR units: _____	Sprinkler system: N/A <input type="checkbox"/>
	Propane Gas <input type="checkbox"/>	No. of 3 BR units: _____	_____ NFPA #13D
	Sprinkler system: N/A <input type="checkbox"/>	Other Structure: _____	_____ NFPA #13R
	_____ Full	Dimensions: _____	_____ Other:
	_____ Partial	Footings: _____	
	Other Suppression	Roof: _____	
	# of Heads _____	_____ 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.

WR Floyd  
 Applicant's Signature

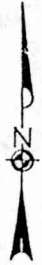
William R Floyd  
 Print Name

5/24/01  
 Date

\_\_\_\_\_  
 Title/Company

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: _____	<u>41187</u>
State Highways			Rear: _____	Filing fee \$ <u>21</u>
Building Official	<u>5/30/01</u>	<u>[Signature]</u>	Side: _____	Permit fee \$ <u>58</u>
Dev. Engineering, DPZ			Side St.: _____	Excise tax \$ _____
Health	<u>5/30/01</u>	<u>Mark R. [Signature]</u>	All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	Add'l. per. fee \$ _____
Fire Protection			Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ <u>83</u>
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>			Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Lot Coverage for NewTown Zone _____	Balance due \$ _____
ONE STOP SHOP: <input type="checkbox"/>			SDP/Red-line approval date _____	Check # <u>7409</u>
Distribution of Copies- White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA				Validation # <u>39061</u>
				Accepted by _____



10' PUBLIC TREE MAINTENANCE EASEMENT

BARLEY FIELD WAY

PRESERVATION PARCEL 'B'  
N46°36'20"E 169.31'  
10' B.R.L.

R=400.00' 50' R/W

L=209.81'

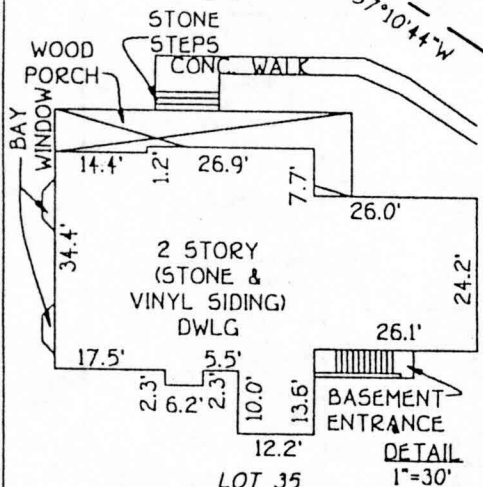
LOT 35

SEE DETAIL

MAC DRIVE

PRIVATE SEPTIC EASEMENT

1 story detached garage



5/30/01

EX. S.T. TO BE MOVED TO MEET 10' MIN.

\$25 REPAIR FEE PAID  
P515264

WOODFORD'S GRANT  
LOTS 31 THRU 49 & PARCEL 'A'  
PRESERVATION PARCELS 'B' THRU 'H'  
3RD ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND  
PLAT • 13112

TOP FOUNDATION ELEV. -583.4'  
BRL = BUILDING RESTRICTION LINE

FISHER, COLLINS & CARTER, INC.  
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS  
CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE  
ELLICOTT CITY, MARYLAND 21042  
(410) 461 - 2855



PROFESSIONAL LAND SURVEYOR  
REG. • 10763

### HOUSE LOCATION DRAWING

FOUNDATION LOCATION: 6/30/99  
FINAL LOCATION: 11/12/99  
BOUNDARY SURVEY:

SCALE: 1"=50'  
DATE: 11/15/99  
DRAWN BY: T.P.E.  
CHECKED BY: C.C.  
PROJECT No.: 61049

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS  
 3430 COURT HOUSE DRIVE  
 ELLICOTT CITY, MD 21043  
 PERMITS (410)313-2455 INSPECTIONS (410)313-1810  
 AUTOMATED INFORMATION (410) 313-3600

**HOWARD COUNTY  
 PERMIT APPLICATION**

**PERMIT NUMBER**

BC0018014

Building Address <u>11376 Bradley Field Way</u> <u>Masonville MD 21104</u>	Property Owner's Name <u>Hamilton Road</u>
Suite/Apt. #: _____ SDP/WP/Petition #: <u>GP 99-07</u>	Address _____
Census Tract <u>6030</u> Subdivision <u>Woodlands Court</u>	City <u>3000 MAIN ST</u> Zip Code _____
Section _____ Area _____ Lot <u>35</u>	Home Phone <u>ELLICOTT CITY MD 21043</u> Work Phone _____
Tax Map <u>10</u> Parcel <u>2752</u> Grid <u>15</u>	Applicant's Name & Mailing Address, (if other than stated hereon): _____
Zoning <u>REDED</u> Map Coordinates <u>51R1</u> Lot size _____	Phone _____ Fax _____
Existing Use <u>Vacant Lot</u>	Contractor Company _____
Proposed Use <u>S.F. Home</u>	Contact Person _____
Estimated Construction Cost \$ <u>205,000</u>	Address _____
Description of Work <u>2 Story Column 4 BR</u> <u>Full Bath 15' x 10' 2' Ceiling</u> <u>Full Bath 10' x 10' 2' Ceiling</u> <u>Full Bath 10' x 10' 2' Ceiling</u>	City <u>SAME</u> State _____ Zip Code _____
Occupant or Tenant _____	License No. _____ Phone _____ Fax _____
Contact Name _____	Engineer or Architect Company <u>EC</u>
Address _____	Contact Person <u>Mark R. Rife</u>
City _____ State _____ Zip Code _____	Address <u>ELLICOTT CITY MD</u>
Phone _____ Fax _____	City _____ State _____ Zip Code _____
	Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL		BUILDING DESCRIPTION - RESIDENTIAL	
<b>Building Characteristics</b>	<b>Utilities</b>	<b>Building Characteristics</b>	<b>Utilities</b>
Height: _____	Water Supply: _____ Public _____ Private _____	SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: _____ Public _____ Private <input checked="" type="checkbox"/>
No. of stories: _____	Sewage Disposal: _____ Public _____ Private _____	1st floor: _____	Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/>
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>	2nd floor: _____	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>	Basement: _____	Gas Yes <input type="checkbox"/> No <input checked="" 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"/>	Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" 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"/>
State Certified Modular _____	Sprinkler system: N/A <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____	No. of Bedrooms <u>4</u>	Sprinkler system: N/A <input checked="" type="checkbox"/> NFFA #13D _____ NFFA #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 THEREUNTO; (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 Mark R. Rife Print Name Mark R. Rife  
 Title/Company \_\_\_\_\_ Date 3/13/99

Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY  
 \*\* PLEASE WRITE NEATLY AND LEGIBLY. \*\*  
 - FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL	DEZ SETBACK INFORMATION	PROPERTY ID#
Land Development, DPZ			Front: _____	41187
State Highways			Rear: _____	Filing fee \$ <u>95</u>
Building Official			Side: _____	Permit fee \$ _____
Dev. Engineering, DPZ	<u>6/8/99</u>	<u>Mark R. Rife</u>	Side St: _____	Excise tax \$ _____
Health			All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Fire Protection			Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Add'l permit fee \$ _____
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>			Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Lot Coverage for New Town Zone _____	Balance due \$ _____
ONE STOP SHOP: <input type="checkbox"/>			SDP/Red-line approval date _____	Check # <u>6901</u>
			Accepted by <u>[Signature]</u>	Validation # _____

Approved Septic System Plan  
Howard County Health Department

Mark E. Tolkin 6/8/99  
[Signature]

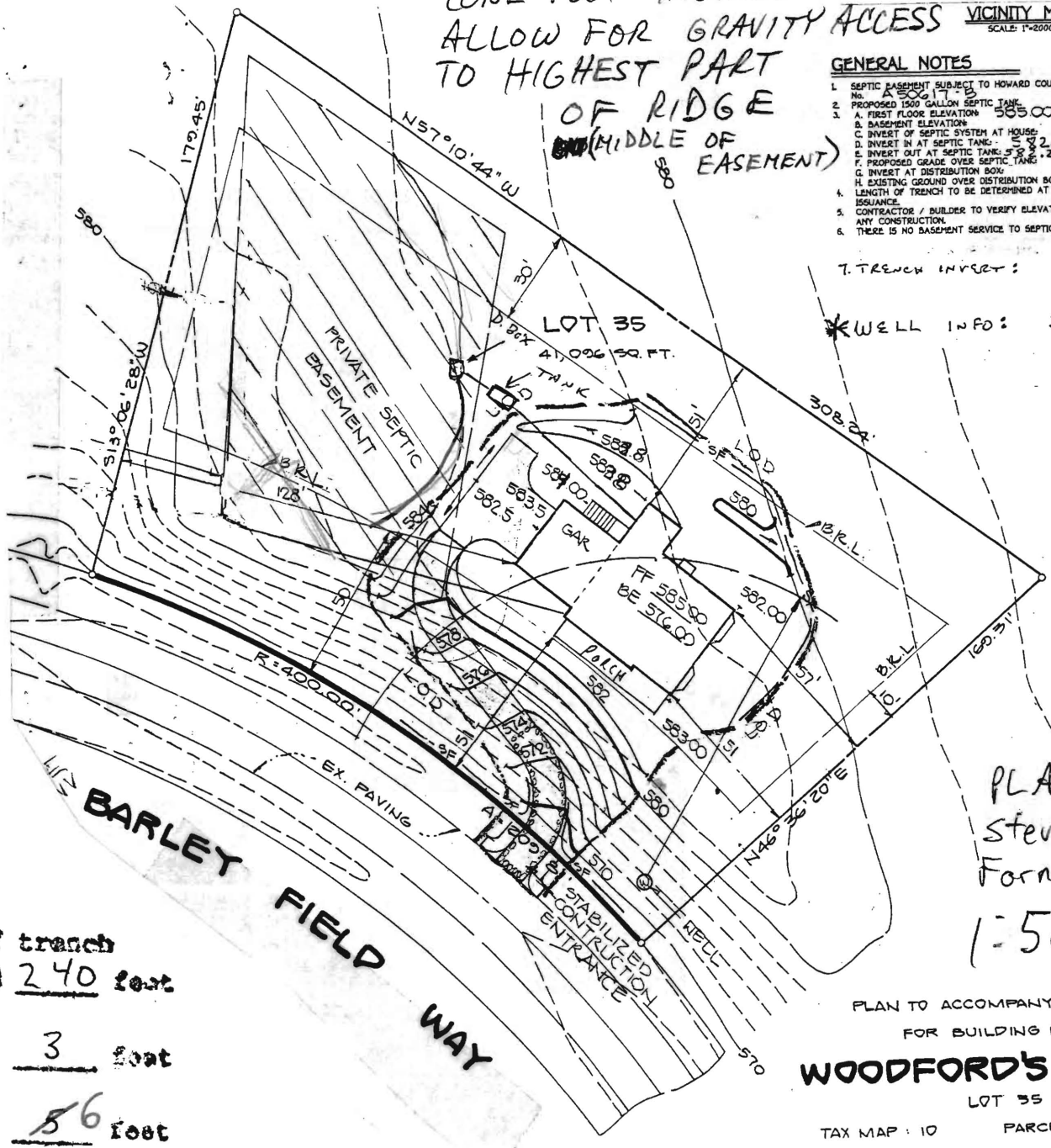
DISTRIBUTION BOX @ 582.00  
(ONE FOOT HIGHER THAN TRENCH) TO  
ALLOW FOR GRAVITY ACCESS  
TO HIGHEST PART  
OF RIDGE  
(MIDDLE OF EASEMENT)

VICINITY MAP  
SCALE: 1"=200'

GENERAL NOTES

1. SEPTIC BASEMENT SUBJECT TO HOWARD COUNTY HEALTH DEPARTMENT
2. PROPOSED 1500 GALLON SEPTIC TANK
3. A. FIRST FLOOR ELEVATION: 585.00
4. B. BASEMENT ELEVATION: 576.00
5. C. INVERT OF SEPTIC SYSTEM AT HOUSE: 583.50
6. D. INVERT IN AT SEPTIC TANK: 582.50
7. E. INVERT OUT AT SEPTIC TANK: 582.20
8. F. PROPOSED GRADE OVER SEPTIC TANK: 582.00
9. G. INVERT AT DISTRIBUTION BOX: 584.00
10. H. EXISTING GROUND OVER DISTRIBUTION BOX: 584.00
11. I. LENGTH OF TRENCH TO BE DETERMINED AT TIME OF SEPTIC PERMIT ISSUANCE.
12. J. CONTRACTOR / BUILDER TO VERIFY ELEVATIONS IN FIELD BEFORE BEGINNING ANY CONSTRUCTION.
13. K. THERE IS NO BASEMENT SERVICE TO SEPTIC SYSTEM.

T. TRENCH INVERT: 581.00  
\*WELL INFO: 300' DEEP  
4.3 GAL PER MIN.



PLAN BY  
Steve  
Forney + FCC  
1:50

Total linear feet of trench  
required 240 feet  
Width of trench (as) 3 foot  
Depth of trench (as) 56 foot  
Depth of stone required below  
distribution pipe 2.0 feet

PLAN TO ACCOMPANY APPLICATION  
FOR BUILDING PERMIT  
**WOODFORD'S GRANT**  
LOT 35  
TAX MAP: 10 PARCELS: 27, 29, 1151