

Building Address 7105 BIRCH LANE
Highland MD 20777
 Suite/Apt. #: N/A SDP/WP/Petition #: 6/21/00
 Census Tract 6051.2 Subdivision PATRIAL GHT
 Section N/A Area N/A Lot 20
 Tax Map 40 Parcel 70 Grid 10
 Zoning RRD20 Map Coordinates 14B13 lot size 1.189A

Property Owner's Name FRANK DIAMBIA
 Address 3640 Colbyfield Dr. Apt 3A
 City COLUMBIA State MD Zip Code 21045
 Home Phone 410-396-2828 Work Phone _____
 Applicant's Name & Mailing Address, (if other than stated hereon):
VIKRY MEYER
MD RIDG. PARTNRS, INC
 Phone 410-602-8779 Fax 410-515-5145

Existing Use WARRANT LOT
 Proposed Use NEW SURFACE LAM. DRIVE
 Estimated Construction Cost \$ 150,000
 Description of Work 2 stories asphalt, 1100 sq ft
3 CURB LANE DRIVEWAYS, 1100 sq ft
4 1/2" x 11" tiles -> in BSM!

Contractor Company BLANDERWOOD HERMAN LLC
 Contact Person RON BAQUOI
 Address 3002 MERRYMAN VILL RD
 City PHOENIX State MD Zip Code 21131
 License No. _____
 Phone 410-667-8426 Fax 667-8435

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

Engineer or Architect Company PALLEN LAG
 Contact Person JAMES PALLEN
 Address 305 CHESAPEAKE AVE. ST118
 City TOWSON State MD Zip Code 21204
 Phone 410-296-2140 Fax 410-296-0419

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

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: _____ _____ Public _____ Private
<u>Depth</u> _____ <u>Width</u> _____	Sewage Disposal: _____ _____ Public _____ Private
1st floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
2nd floor: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Finished Basement <input checked="" type="checkbox"/> Unfinished Basement <input type="checkbox"/>	Sprinkler system: <u>N/A</u> <input type="checkbox"/> _____ NFPA #13D _____ NFPA #13R _____ Other:
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	
No. of Bedrooms <u>4</u>	
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	

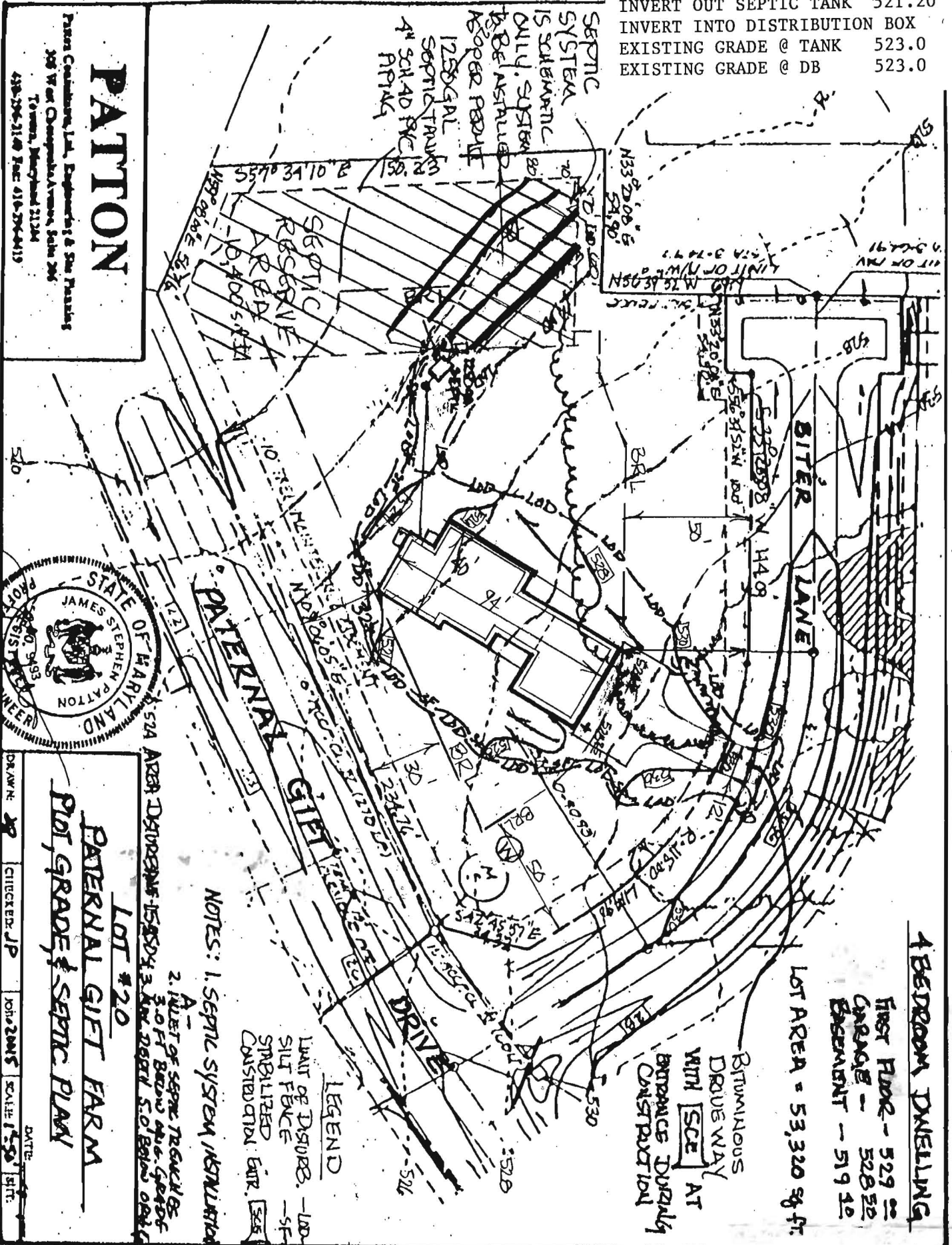
THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED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

VIKRY MEYER
 Applicant's Signature
MD RIDG PARTNRS, INC
 Title/Company

VIKRY MEYER
 Print Name
10/4/00
 Date

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**

INVERT OUT OF HOUSE	524.50
INVERT INTO SEPTIC TANK	521.50
INVERT OUT SEPTIC TANK	521.20
INVERT INTO DISTRIBUTION BOX	
EXISTING GRADE @ TANK	523.0
EXISTING GRADE @ DB	523.0



6P01-38

Total linear feet of trench required 280 feet

Width of trench(es) 3.0 feet

Depth of trench(es) 8.0 feet

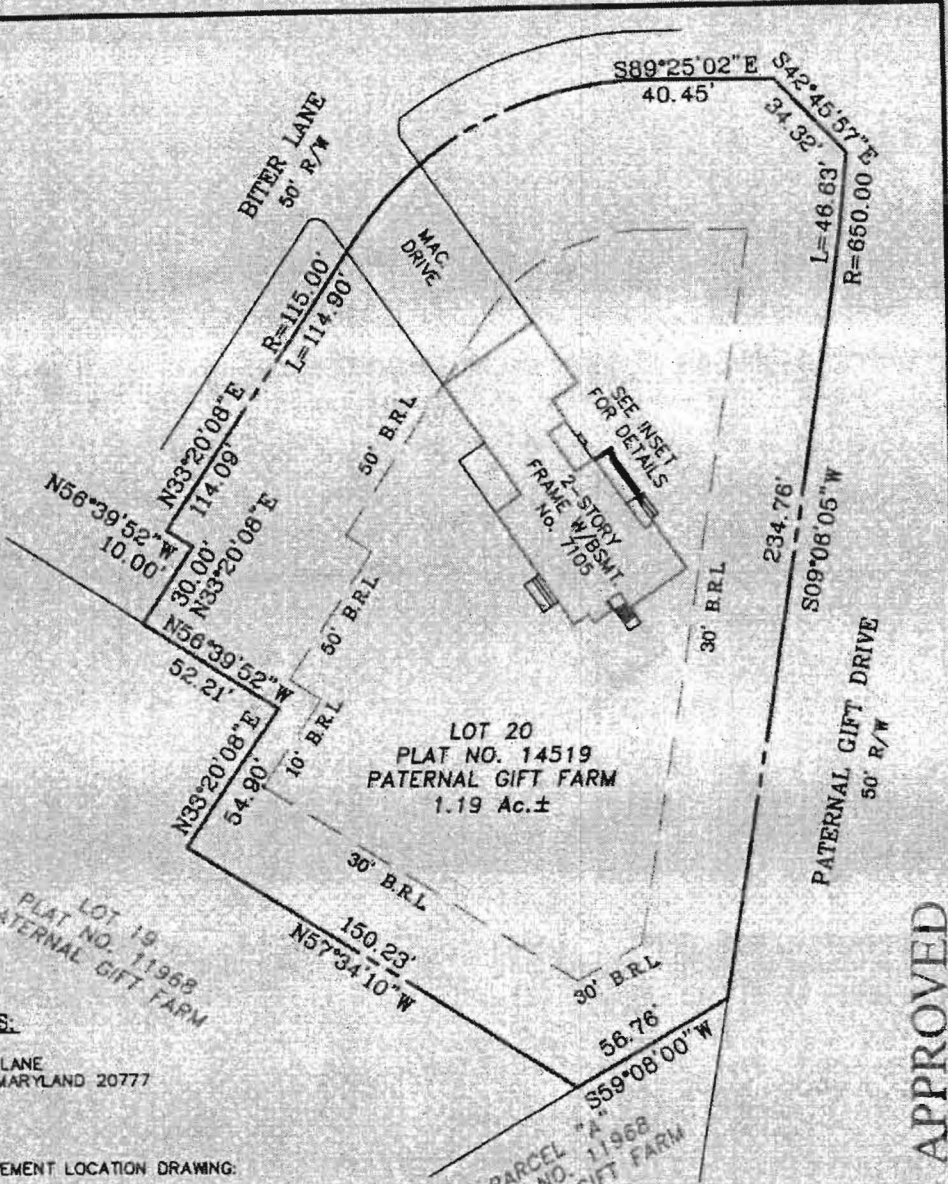
Depth of stone required below distribution pipe 2.0 feet

Approved Septic System Plan
 Howard County Health Department

Amy McMe 10/23/00
 Signature Date



PLAT NORTH



LOT 20
PLAT NO. 14519
PATERNAL GIFT FARM
1.19 Ac.±

LOT 19
PLAT NO. 11968
PATERNAL GIFT FARM

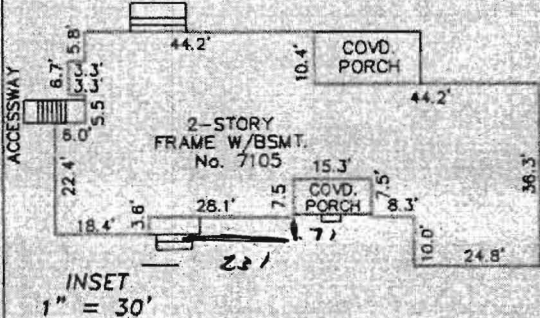
PARCEL 7A
PLAT NO. 11968
PATERNAL GIFT FARM

ADDRESS:

7105 BITER LANE
HIGHLAND, MARYLAND 20777

NOTES:

1. THIS IMPROVEMENT LOCATION DRAWING:
 - A. IS OF BENEFIT TO A CONSUMER ONLY INsofar AS IT IS REQUIRED BY A LENDER OR A TITLE INSURANCE COMPANY OR ITS AGENT IN CONNECTION WITH CONTEMPLATED TRANSFER, FINANCING OR REFINANCING;
 - B. IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATION OF FENCES, GARAGES, BUILDINGS, OR OTHER EXISTING OR FUTURE IMPROVEMENTS; AND
 - C. DOES NOT PROVIDE FOR THE ACCURATE IDENTIFICATION OF PROPERTY BOUNDARY LINES, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING OR REFINANCING.
2. THE LEVEL OF ACCURACY OF APPARENT SETBACK DISTANCES IS ONE FOOT, MORE OR LESS.
3. THIS PLAT WAS PREPARED WITHOUT BENEFIT OF A TITLE REPORT.



INSET
1" = 30'

APPROVED

WALK-THRU BUILDING PERMIT
BP# 600157246 A# 49709
APP. SAN. SED DATE: 12/1/05
DESC. OF WORK: Front Porch
Permits

I HEREBY CERTIFY THAT IMPROVEMENTS ARE LOCATED AS SHOWN HEREON AND TO THE BEST OF MY INFORMATION, PROFESSIONAL KNOWLEDGE AND BELIEF, THERE ARE NO ENCROACHMENTS EXCEPT AS SHOWN.

LOCATION DRAWING

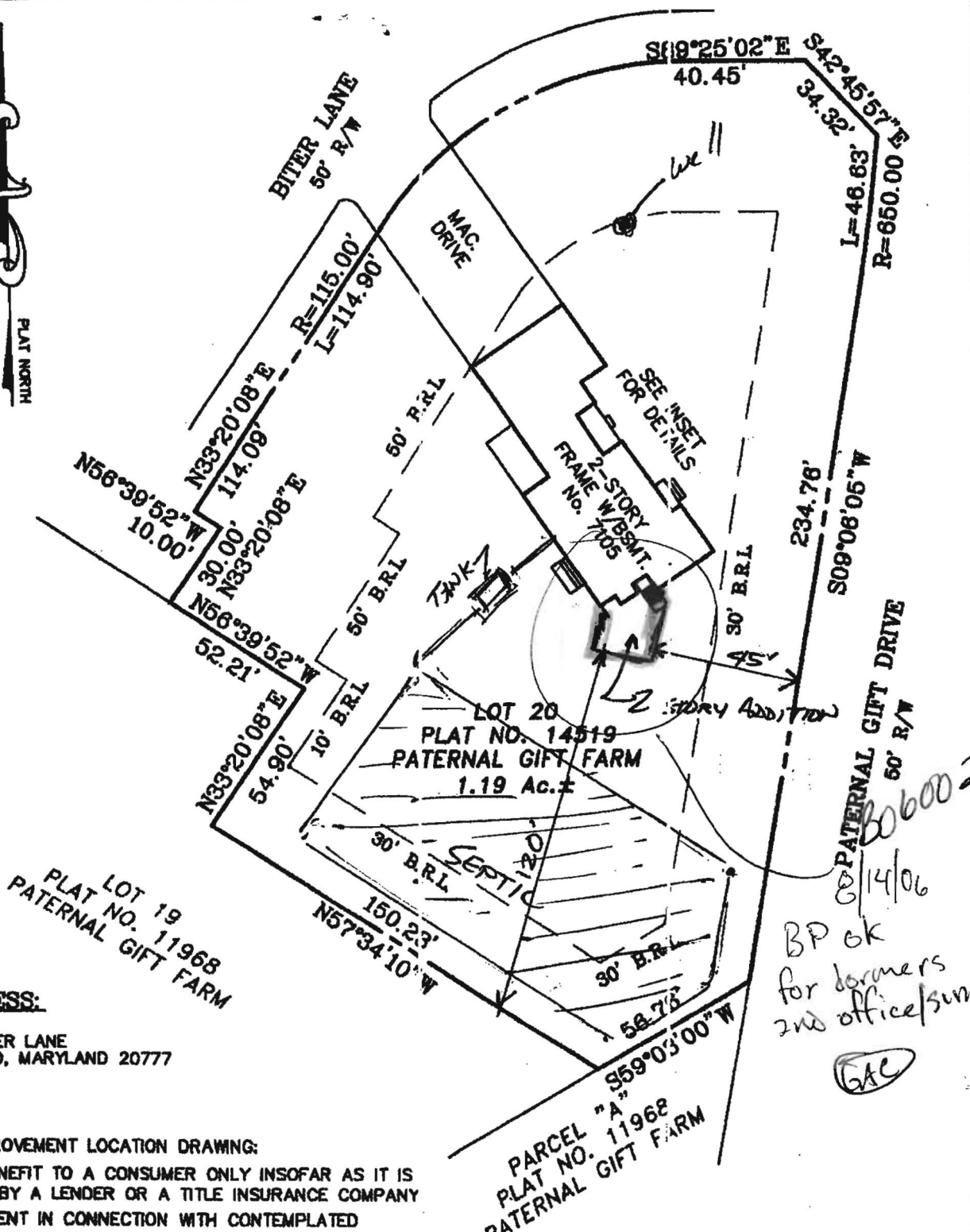
L01834
05-12014

LOT 20
PLAT NO. 14519
PATERNAL GIFT FARM REVIS
HIGHLAND, MARYLAND
SCALE: 1" = 50' DATE: AUGUST 23, 2005

M.N. Roshan
M.N. ROSHAN, L.S. DATE: 08/23/05
MD REG. No. 11049



NJR & ASSOCIATES, LLC.
LAND SURVEYING AND PLANNING
1813 MONTEVIDEO ROAD
JESSUP, MARYLAND 20794
TEL: (240)508-3200 FAX: (410)799-5523



BP ok for farmers 2nd office/sun 804

1/14/06

606002260

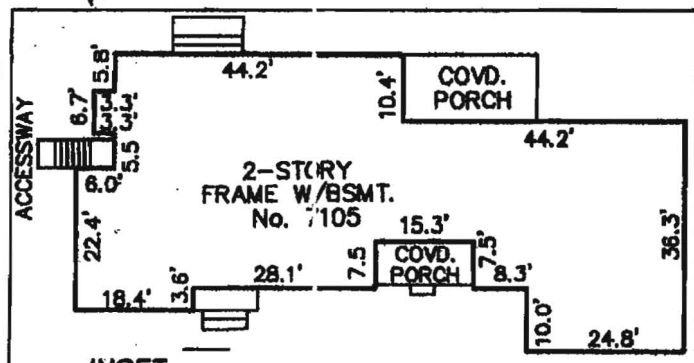
GAC

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HIGHLAND, MARYLAND 20777

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