

**HOWARD COUNTY  
 PERMIT APPLICATION**

**PERMIT NUMBER**

B110000601

Building Address 1811 Boka Valley Ct  
WOODBINE APT 21797  
 Suite/Apt. #: \_\_\_\_\_ SDP/WP/Petition #: \_\_\_\_\_  
 Census Tract \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Section \_\_\_\_\_ Area \_\_\_\_\_ Lot 11  
 Tax Map 10078 Parcel 0015 Grid 1517  
 Zoning \_\_\_\_\_ Map Coordinates \_\_\_\_\_ Lot Size \_\_\_\_\_

Property Owner's Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City REXVILLE State MD Zip Code 21225  
 Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
 Applicant's Name & Mailing Address, (if other than stated herein): \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_

Existing Use FF  
 Proposed Use FF  
 Estimated Construction Cost \$ \_\_\_\_\_  
 Description of Work INSTALL NEW 12' x 12' CEILING  
 Occupant or Tenant \_\_\_\_\_  
 Contact Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_

Contractor Company TEVIS PRODUCTIONS, LLC  
 Contact Person JOHN ANASTASIAK  
 Address 1115 N. TOWNSHIP  
 City HANDSPERD State MD Zip Code 21271  
 License No. \_\_\_\_\_  
 Phone 410-371-1515 Fax 410-371-2475  
 Engineer or Architect Company \_\_\_\_\_  
 Contact Person \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Phone \_\_\_\_\_ 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 \_\_\_\_\_  
 1<sup>st</sup> floor: \_\_\_\_\_  
 2<sup>nd</sup> floor: \_\_\_\_\_  
 Basement: \_\_\_\_\_  
 Finished Basement  Unfinished Basement  Crawl space  Slab on Grade   
 No. of Bedrooms \_\_\_\_\_  
 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: ROAD SIDE TREE  
REMOVE NO

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 TEVIS PRODUCTIONS, LLC  
 Title/Company \_\_\_\_\_

Print Name JOHN ANASTASIAK  
 Date 3/1/11

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 \$ <u>100.00</u>
Building Officials				Side: _____	Excise tax \$ <u>10.00</u>
Dev. Engineering, DPZ				Side St.: _____	Add'l per fee \$ _____
Health <u>3/1/11</u>		<u>R. Buckner</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? YES <input type="checkbox"/> NO <input type="checkbox"/>				Is Entrance Permit Required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
				Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # <u>1178</u>
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>				Lot Coverage for New Town Zone _____	Validation # _____
ONE STOP SHOP: <input type="checkbox"/>				SDP/Red-line approval date _____	Accepted by _____

MARYLAND STATE GRID(NAD 83/91)

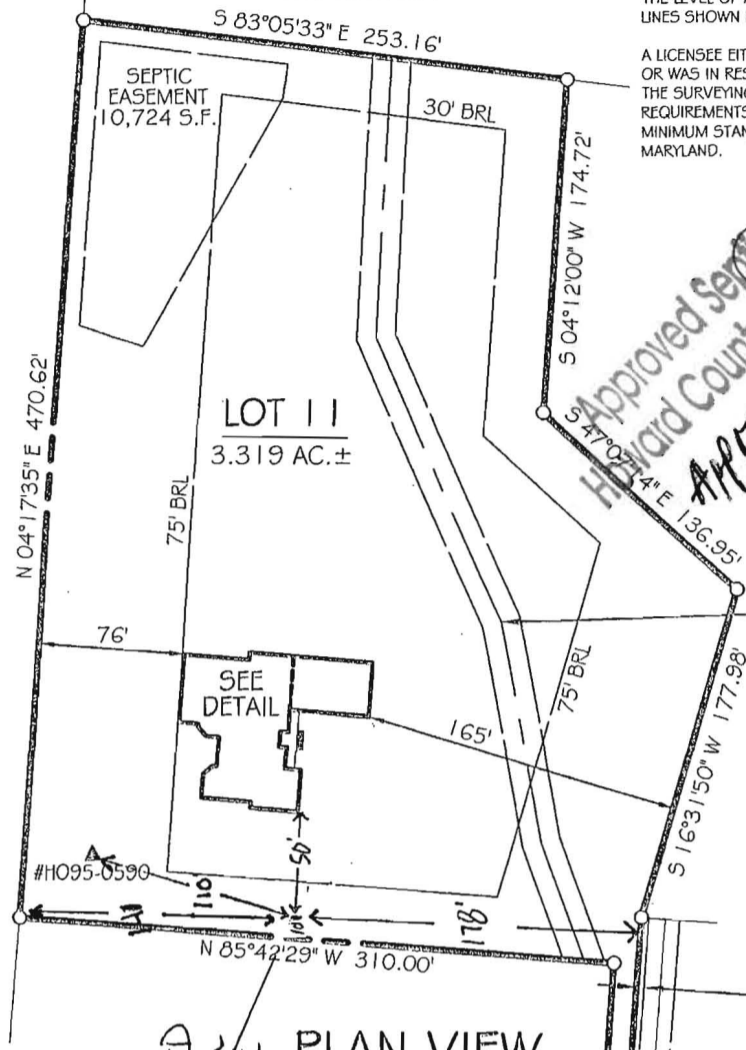
PARCEL 3 OF PARCEL 393  
TALLEY FAMILY  
LIMITED PARTNERSHIP  
L.5902 F.467  
ZONED RC-DEO  
PLAT NO. 17923

THIS DRAWING 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; IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATION OF FENCES, GARAGES, BUILDINGS, OR OTHER EXISTING OR FUTURE IMPROVEMENTS; AND DOES NOT PROVIDE FOR THE ACCURATE IDENTIFICATION OF PROPERTY BOUNDARY LINES, BUT THIS IDENTIFICATION MAY NOT BE REQUIRED, FOR THE TRANSFER OF TITLE OR SECURING FINANCING OR REFINANCING.

THE LEVEL OF ACCURACY OF DISTANCES TO APPARENT PROPERTY LINES SHOWN HEREON ARE 1".

A LICENSEE EITHER PERSONALLY PREPARED A LOCATION DRAWING OR WAS IN RESPONSIBLE CHARGE OVER ITS PREPARATION AND THE SURVEYING WORK REFLECTED IN IT, ALL IN COMPLIANCE WITH REQUIREMENTS SET FORTH IN REGULATION .12 OF CHAPTER 06, MINIMUM STANDARDS OF PRACTICE OF THE ANNOTATED CODE OF MARYLAND.

DAISY ROAD



LOT 11  
3.319 AC. ±



PLAN VIEW  
1"=50'

NOTE: EXISTING WELL TAG #H095-0590 HAS BEEN FIELD LOCATED AND IS ACCURATELY SHOWN HEREON.

PROPOSED  
1000 GAL  
L.P. TANK

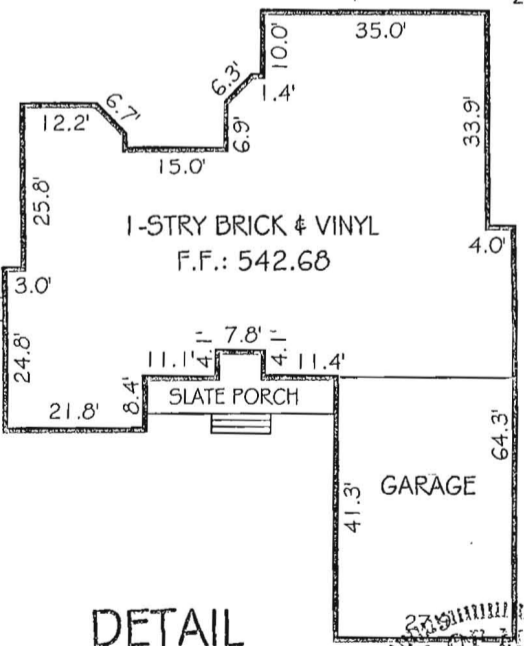
BOKA VALLEY  
LOT 2  
SECTION 1, AREA 1  
PLAT #8574  
ZONED RC-DEO

Approved Septic System  
Howard County Health Department  
Approved 1000-gallon  
underground septic tank  
as shown, 8/10/2011  
R. Bueber  
3/11/2011  
Date

20' PRIVATE DRAINAGE & UTILITY EASEMENT

4' USE-IN-COMMON INGRESS AND EGRESS AND UTILITY EASEMENT OVER LOTS 10 & 11 FOR THE USE AND BENEFIT OF LOTS 9, 10 & 11

EX. 20' USE-IN-COMMON INGRESS AND EGRESS EASEMENT PLAT NO. 10365 L.2496 F.689

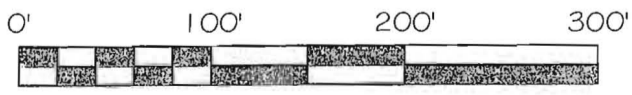


DETAIL  
1"=20'

BOKA VALLEY COURT

FOUNDATION  
LOCATION DRAWING  
OF  
LOT - 11  
BOKA VALLEY

LOTS 10 AND 11  
A RESUBDIVISION OF LOT 8  
BOKA VALLEY, PLAT #10365  
TAX MAP 08, GRID 19, PARCEL 43  
4TH ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND  
PLAT# 18813  
HOWARD COUNTY PLAN # F-06-027



RTF ASSOCIATES, INC. LAND SURVEYORS & PLANNERS  
PROFESSIONAL LAND SURVEYORS & PLANNERS  
410-848-2040 FAX-410-840-8387 410-876-1222  
142 EAST MAIN STREET  
WESTMINSTER, MD 21157

SCALE 1"=100'	DRAWN BY NCC	DATE 01-03-11	CHECKED BY JEL	DATE 01-03-11	JOB 10-25
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**HOWARD COUNTY  
 PERMIT APPLICATION**

**PERMIT NUMBER**

B10001156

Proposing Address 1811 Boka Valley Rd  
Woodbine Md 21797

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

Tract \_\_\_\_\_ Subdivision Boka Valley

Block \_\_\_\_\_ Area \_\_\_\_\_ Lot 11

Map 08 Parcel 43 Grid 19

Map Coordinates \_\_\_\_\_ Lot Size 3.319 AC

Proposed Use None

Proposed Use Residential New Home

Estimated Construction Cost \$ 531,000

Description of Work New Home Construction

Occupant or Tenant \_\_\_\_\_

Contact Name \_\_\_\_\_

Address \_\_\_\_\_

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

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

Property Owner's Name Ambrose To

Address 5411 McGrath Blvd Apt 1411

City North Bethesda State Md Zip Code 20850

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Applicant's Name & Mailing Address, (if other than stated herein):  
James Pacylowski  
7255 Lake Hills Ct  
Mariettaville Md 21104

Phone 443-864-6987 Fax \_\_\_\_\_

Contractor Company Mind Full Construction Inc

Contact Person James Pacylowski

Address 1335 Clarksville Pike HOMECOMER

City Hightstown State MD Zip Code 20577

License No. 5732

Phone 443-864-6987 Fax 201-854-0771

Engineer or Architect Company Mind Full Innovations

Contact Person James Pacylowski

Address 7255 Lake Hills Ct

City Mariettaville State Md Zip Code 21104

Phone 443-864-6987 Fax \_\_\_\_\_

**BUILDING DESCRIPTION - COMMERCIAL**

Building Characteristics	Utilities
Height: _____ Number of stories: _____ Floor area, sq. ft. per floor: _____ Group: _____ Construction type: Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ State Certified Modular _____	Water Supply: Public _____ Private _____ Sewage Disposal: Public _____ Private _____ Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <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 _____ Partial _____ Other Suppression _____ # of Heads _____

**BUILDING DESCRIPTION - RESIDENTIAL**

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1 <sup>st</sup> floor: <u>97' x 79'</u> 2 <sup>nd</sup> floor: _____ Basement: _____ Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/> 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 _____	Water Supply: Public _____ Private <input checked="" type="checkbox"/> Sewage Disposal: Public _____ Private <input checked="" type="checkbox"/> Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: Electric <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: N/A <input checked="" type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____

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 PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature [Signature]

Print Name James Pacylowski

Mail Address \_\_\_\_\_

Company \_\_\_\_\_

Print Name James Pacylowski

Date 5-6-10

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

NCY	DATE	SIGNATURE	APPROVAL	FOR OFFICE USE ONLY	PROPERTY ID #
Development: DPZ				DEPT SETBACK INFORMATION	\$1000
Highways				Front: _____	Filing fee
Engineering Officials				Rear: _____	Permit fee
Engineering: DPZ				Side: _____	Excise tax
Protection				Side St: _____	Add'l per fee
Environment Control approval required prior to issuance?				All minimum setbacks met?	TOTAL FEES \$
YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>				YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$
CONTINGENCY CONSTRUCTION START: _____				Is Entrance Permit Required?	Balance due \$
ONE STOP SHOP: _____				YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # <u>1006</u>
				Historic District?	Validation #
				YES <input type="checkbox"/> NO <input type="checkbox"/>	
				Lot Coverage for New Town Zone	
				SDP/Red-line approval date	Accepted by

DAISY ROAD

N 04°17'35" E 470.62'

*Easement*  
**LOT 11**  
 3.319 AC. ±  
*not on plan*  
 6-10-10

1500 GAL. SEPTIC TANK W/PUMP  
 PROP. GRADE 541.4  
 INV. IN: 537.4  
 INV. OUT: 537.0

1500 GAL. TANK  
 PROP. GRADE 541.0  
 INV. IN: 538.0  
 INV. OUT: 537.7

Approved Septic System Plan  
 Howard County Health Department

*Dana Beinaud*  
 Signature  
 6-11-10  
 Date

S 04°12'00" W 174.72'

S 47°07'14" E 136.95'

S 16°31'50" W 177.98'

N 04°17'33" E 424.30'  
 S 04°17'33" W 441.93'

NOTE: EXISTING WELL TAG #H095-0590  
 HAS BEEN FIELD LOCATED AND IS  
 ACCURATELY SHOWN HEREON.

**PLAN VIEW**

1"=50'

NOTE: STORMWATER MANAGEMENT HAS  
 PREVIOUSLY BEEN ADDRESSED FOR THIS  
 LOT BY GRADING AND GRASS CHANEL  
 DISCONNECTS. SEE HOWARD COUNTY  
 F-PLAN NUMBER F-06-027.

SHEET 2 OF 2

PLOT PLAN

OF

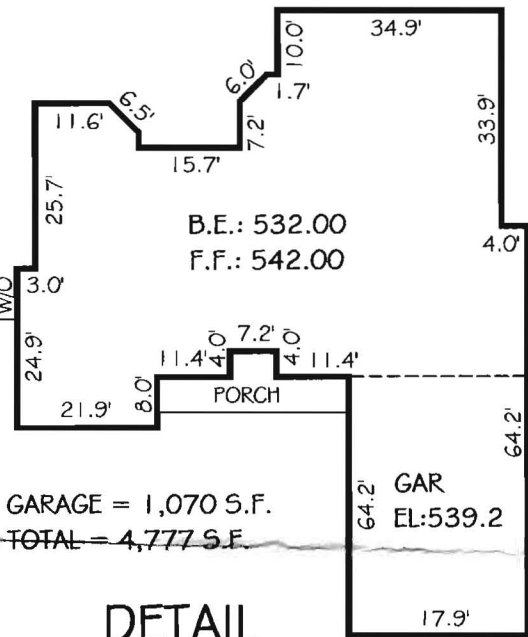
LOT - 11

**BOKA VALLEY**

LOTS 10 AND 11  
 A RESUBDIVISION OF LOT 8  
 BOKA VALLEY, PLAT #10365  
 TAX MAP 08, GRID 19, PARCEL 43  
 4TH ELECTION DISTRICT  
 HOWARD COUNTY, MARYLAND  
 PLAT# 18813  
 HOWARD COUNTY PLAN # F-06-027

**DETAIL**

1"=20'



GARAGE = 1,070 S.F.  
 TOTAL = 4,777 S.F.

GAR  
 EL:539.2



**RTF ASSOCIATES, INC.**

PROFESSIONAL LAND SURVEYORS & PLANNERS

410-848-2040 FAX-410-840-8387 410-876-1222

142 EAST MAIN STREET

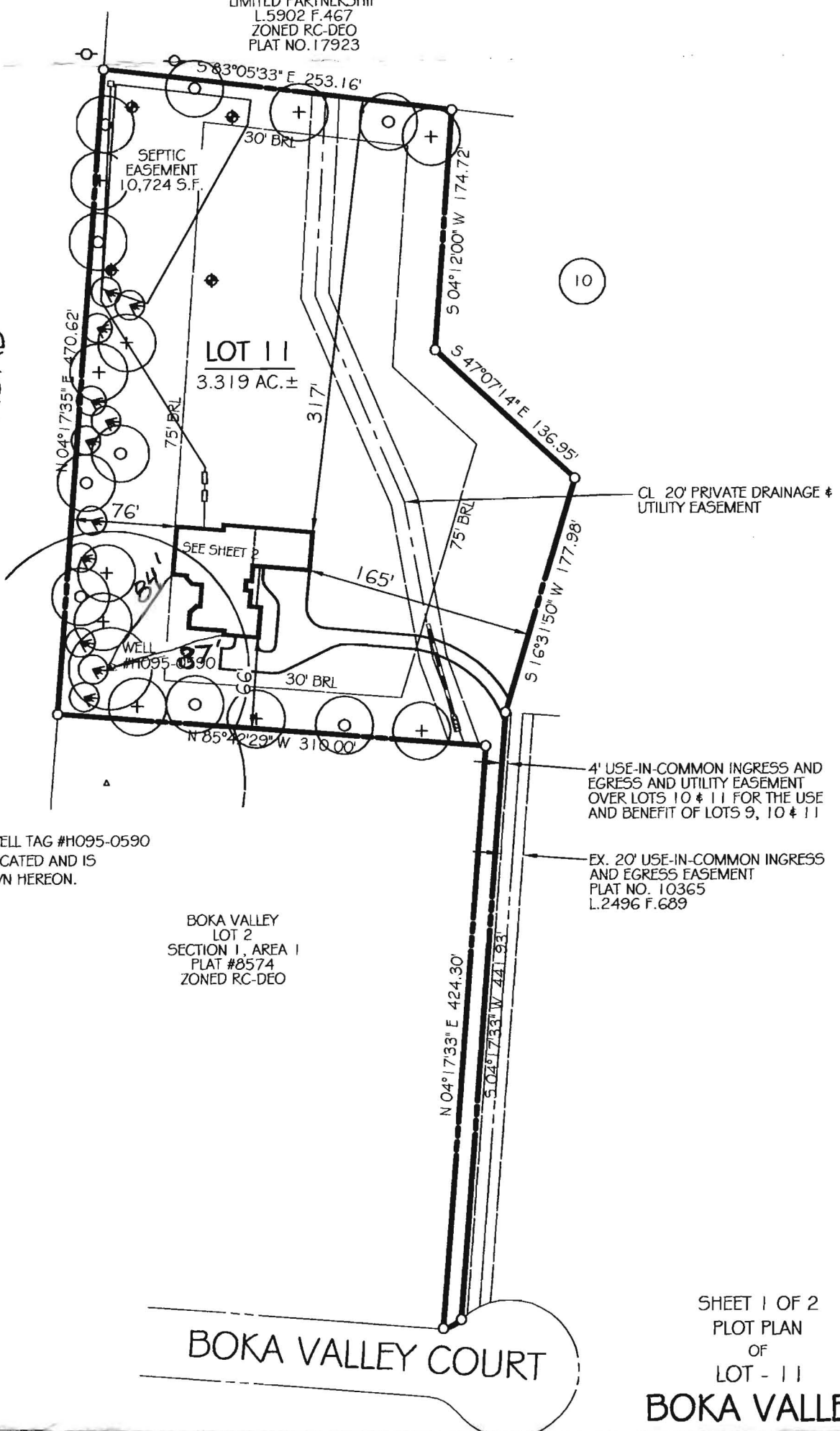
WESTMINSTER, MD 21157

REVISED: 06-07-2010 PER HEALTH DEPT AND COUNTY COMMENTS

SCALE	DRAWN BY	DATE	CHECKED BY	DATE	JOB
AS SHOWN	SP	04-27-10	IFI	04-27-10	10-25

PARCEL 3 OF PARCEL 393  
 TALLEY FAMILY  
 LIMITED PARTNERSHIP  
 L.5902 F.467  
 ZONED RC-DEO  
 PLAT NO. 17923

DAISY ROAD



NOTE: EXISTING WELL TAG #1095-0590 HAS BEEN FIELD LOCATED AND IS ACCURATELY SHOWN HEREON.

BOKA VALLEY  
 LOT 2  
 SECTION 1, AREA 1  
 PLAT #8574  
 ZONED RC-DEO

BOKA VALLEY COURT

SHEET 1 OF 2  
 PLOT PLAN  
 OF  
 LOT - 11  
**BOKA VALLEY**

LOTS 10 AND 11  
 A RESUBDIVISION OF LOT 8  
 BOKA VALLEY, PLAT #10365  
 TAX MAP 08, GRID 19, PARCEL 43  
 4TH ELECTION DISTRICT  
 HOWARD COUNTY, MARYLAND  
 PLAT# 18813



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 142 EAST MAIN STREET  
 WESTMINSTER, MD 21157

REVISED: 06-07-2010 PER HEALTH DEPT AND COUNTY COMMENTS

SCALE	DRAWN BY	DATE	CHECKED BY	DATE	JOB
1"=100'	SP	04-27-10	IFI	04-27-10	10-25