

**HOWARD COUNTY  
PERMIT APPLICATION**

**PERMIT NUMBER**

B-149200 MEF

Building Address 3208 Eleanor's Garden Way  
Woodbine MD 21797

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

Census Tract 60002 Subdivision Waterford Farms

Section \_\_\_\_\_ Area \_\_\_\_\_ Lot 21

Tax Map 20 Parcel \_\_\_\_\_ Grid 12

Zoning \_\_\_\_\_ Map Coordinates 30 Lot size \_\_\_\_\_

Property Owner's Name Toll MDZ LP.

Address 7164 Columbia Gateway Dr #230

City Columbia State MD Zip Code 21046

Home Phone \_\_\_\_\_ Work Phone 413 535 9294

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

Phone \_\_\_\_\_ Fax 413 535 9297

Existing Use Vacant Lot

Proposed Use Residential Home

Estimated Construction Cost \$ 300,000

Description of Work Modern Heritage w/  
Sun Room 1st Floor Guest Alt. Addition, Kitchen  
Garage + 5 Bed 4 1/2 Bath Pull-in Kitchen

Contractor Company Toll MDZ L.P.

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

Address 7164 Columbia Gateway Dr #230

City Columbia State MD Zip Code 21046

License No. 678

Phone 413 535 9297 Fax 413 535 9297

Occupant or Tenant Toll MDZ LP

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

Address 7164 Columbia Gateway Dr #230

City Columbia State MD Zip Code 21046

Phone 413 535 9297 Fax 413 535 9297

Engineer or Architect Company FSII Associates

Contact Person Zach Fisch

Address 8318 Forrest St

City Ellicott City State MD Zip Code 21043

Phone 410 750-2751 Fax 410 750-7350

**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 <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: Depth <u>90</u> Width <u>79</u>	Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/>
2nd floor: <u>90</u> <u>79</u>	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Basement: <u>90</u> <u>79</u>	Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/>	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input checked="" type="checkbox"/>
Crawl space <input type="checkbox"/> Slab on Grade <input checked="" type="checkbox"/>	Sprinkler system: N/A <input type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____
No. of Bedrooms <u>5</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 <input type="checkbox"/>	
Manufactured Home <input type="checkbox"/>	

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.

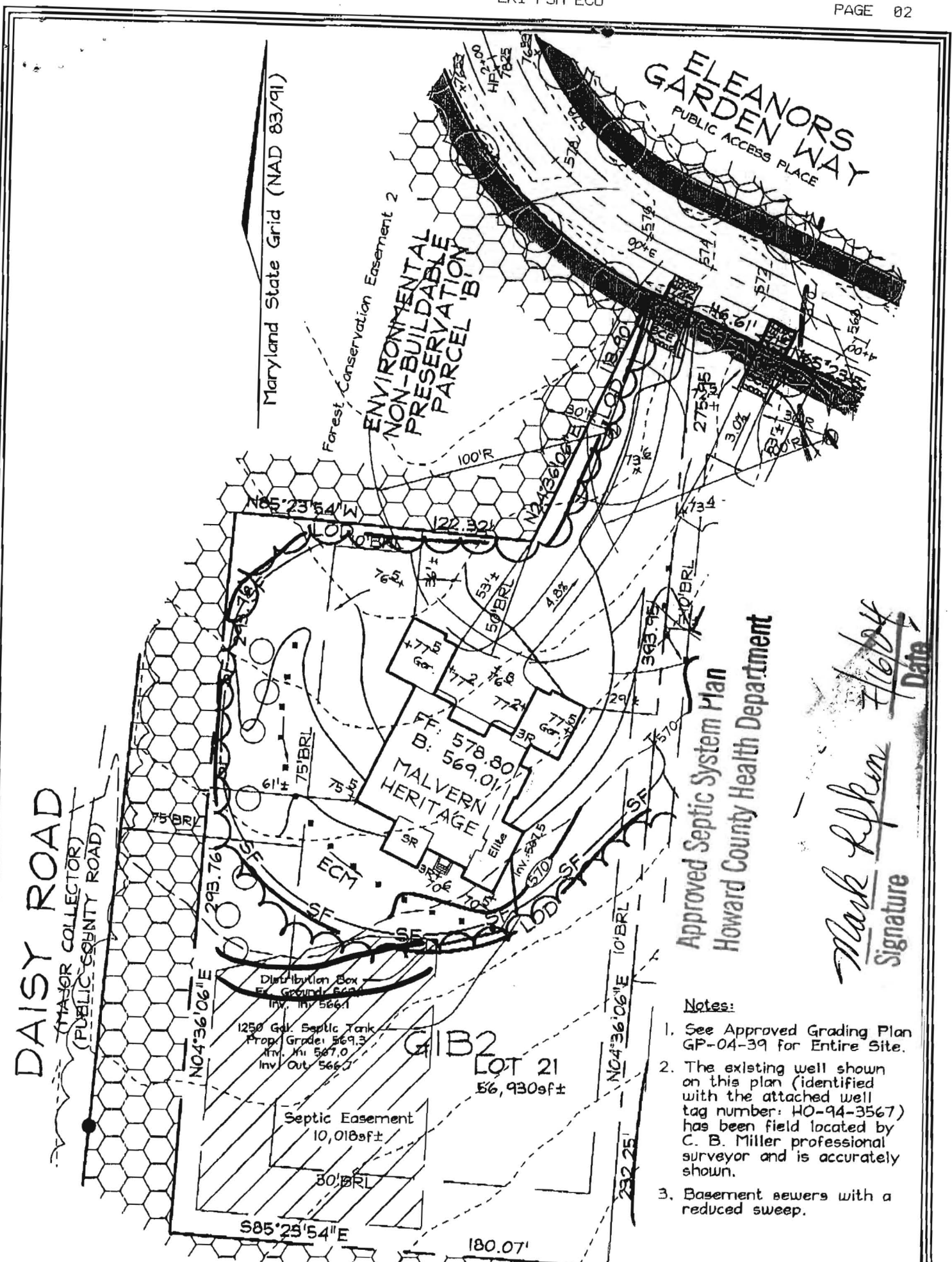
P. Brent Roberts  
Applicant's Signature  
ACM/Toll Brothers  
Title/Company

Brent Roberts  
Print Name  
6/30/04  
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		
Dev. Engineering, DPZ	<u>7/16/04</u>	<u>Mark R. [Signature]</u>
Health		
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"/>		

DPZ SETBACK INFORMATION	PROPERTY ID#
Front: _____	<u>60763</u>
Rear: _____	Filing fee \$ _____
Side: _____	Permit fee \$ _____
Side St.: _____	Excise tax \$ _____
All minimum setbacks met?	Add'l per. fee \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
Is Entrance Permit required?	Sub-total paid \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
Historic District?	Check # <u>71634</u>
YES <input type="checkbox"/> NO <input type="checkbox"/>	Validation # <u>71634</u>
Lot Coverage for NewTown Zone _____	
SDP/Red-line approval date _____	Accepted by _____



Approved Septic System Plan  
 Howard County Health Department

*Mark R. R. R.*  
 Signature

*7/16/04*  
 Date

- Notes:
1. See Approved Grading Plan GP-04-39 for Entire Site.
  2. The existing well shown on this plan (identified with the attached well tag number: HO-94-3567) has been field located by C. B. Miller professional surveyor and is accurately shown.
  3. Basement sewers with a reduced sweep.

**FSH Associates**

Engineers Planners Surveyors  
 8318 Forrest Street Ellicott City, MD 21043  
 Tel: 410-750-2251 Fax: 410-750-7350  
 E-mail: FSHAssociates@cs.com

**OWNER/DEVELOPER**

Toll MD II, LP  
 7164 Columbia Gateway Drive  
 Suite 230  
 Columbia, Maryland 21046  
 410.872.9185

DESIGN BY: PS  
 DRAWN BY: MS  
 CHECKED BY: ZYF  
 SCALE: 1"=50'  
 DATE: June 21, 2004  
 W.O. No.: 3217  
 SHEET No.: 1 OF 1

**LOT RESITE**  
**LOT 21**  
**CATTAIL TRACE**

TAX MAPS 13, 14, 20 & 21  
 GRIDS 7, 12, 19 & 24  
 4TH ELECTION DISTRICT

PARCEL 20, 67, & 312  
 HOWARD COUNTY, MARYLAND