

**HOWARD COUNTY  
PERMIT APPLICATION**

**PERMIT NUMBER**

**B 00 149696**

Building Address 3224 Eleanor's Garden Way  
Woodbine MD 21797

Property Owner's Name Toll MDR LP  
Address 714 Columbia Gateway Dr #230  
City Columbia State MD Zip Code 21046

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

Home Phone \_\_\_\_\_ Work Phone 410-335-7000  
Applicant's Name & Mailing Address, (if other than stated hereon):

Census Tract 60012 Subdivision Waterford Farms

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

Section \_\_\_\_\_ Area \_\_\_\_\_ Lot 22

Tax Map 20 Parcel 139 Grid 726

Zoning RD20 Map Coordinates 3411 Lot size 104

Existing Use Vacant Lot

Contractor Company Toll MDR LP

Proposed Use Residential Use

Contact Person Briff Roberts

Estimated Construction Cost \$ 300,000

Address 714 Columbia Gateway Dr #230

Description of Work Manly/Garage 4Bd, 4.5 Bath

City Columbia State MD Zip Code 21046

3 Car Side Entry Garage Expanded Family Rm

License No. \_\_\_\_\_

Blm Rm Sunroom Glass Rm Utility/Suites Above

Phone 410-370-1105 Fax 410-370-7141

Occupant or Tenant Toll MDR LP

Engineer or Architect Company F&H Associates

Contact Name Briff Roberts

Contact Person Zach

Address 714 Columbia Gateway Dr #230

Address 8136 Forest St

City Columbia State MD Zip Code 21046

City Ellicott City State MD Zip Code 21113

Phone 410-335-9796 Fax 410-335-1297

Phone 410-750-7251 Fax 410-750-7350

**BUILDING DESCRIPTION - COMMERCIAL**

**BUILDING DESCRIPTION - RESIDENTIAL**

Building Characteristics

Utilities

Building Characteristics

Utilities

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

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 \_\_\_\_\_

SF Dwelling  SF Townhouse   
Depth Width  
1st floor: 73'4" 68'  
2nd floor: 73'4" 68'  
Basement: 73'4" 68'  
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

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.

Applicant's Signature P. Briff Roberts  
Title/Company Asst. Construction Mgr. Toll Bros

Print Name P. Briff Roberts  
Date 07/20/04

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

AGENCY	DATE	SIGNATURE APPROVAL
<input checked="" type="checkbox"/> Land Development, DPZ		
<input checked="" type="checkbox"/> State Highways		
<input checked="" type="checkbox"/> Building Official		
<input checked="" type="checkbox"/> Dev. Engineering, DPZ		
<input checked="" type="checkbox"/> Health	<u>8/6/04</u>	<u>[Signature]</u>
<input checked="" type="checkbox"/> Fire Protection		
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>		
ONE STOP SHOP: <input type="checkbox"/>		

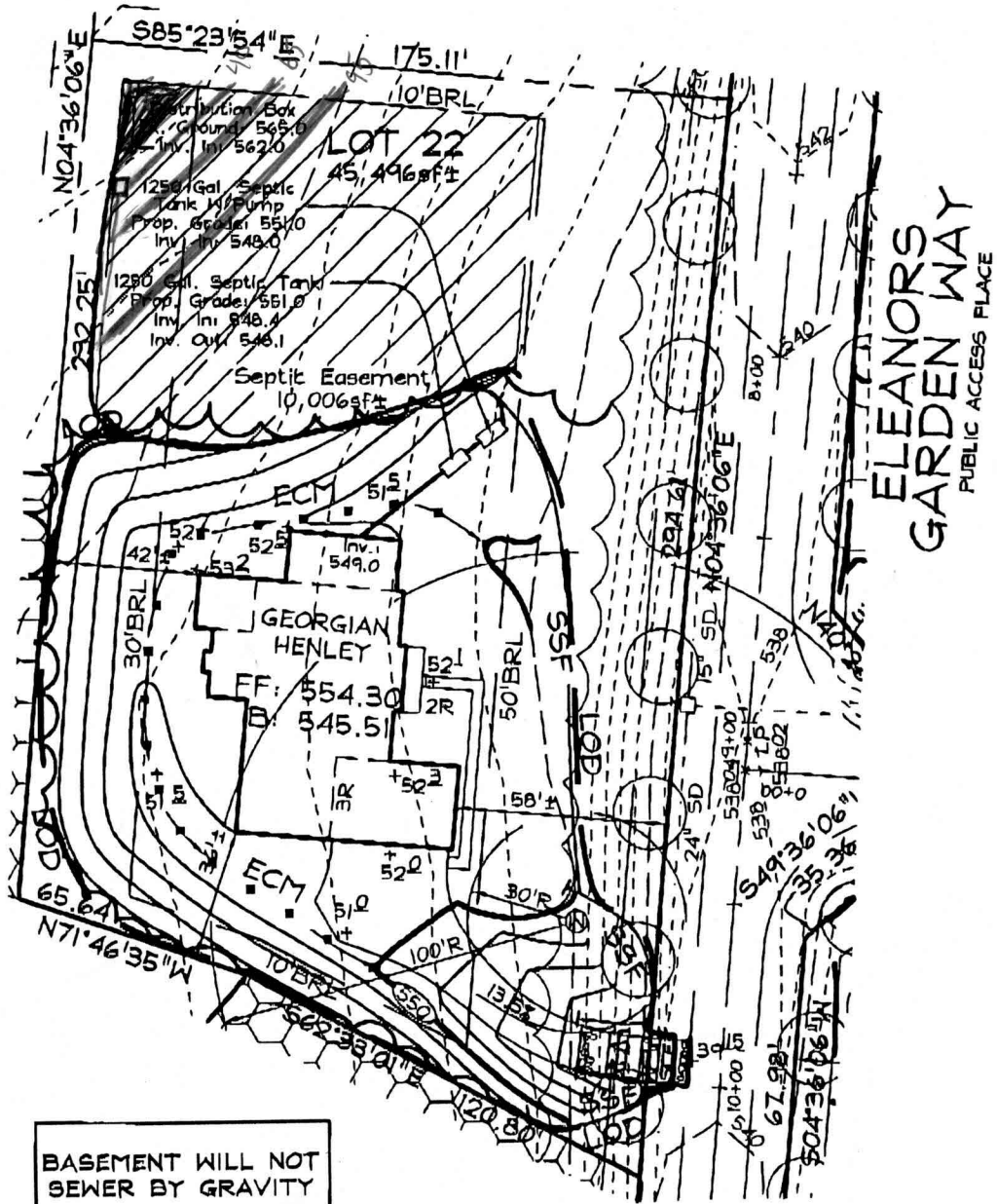
DPZ SETBACK INFORMATION
Front: _____
Rear: _____
Side: _____
Side St.: _____
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>
Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>
Historic District? YES <input type="checkbox"/> NO <input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

PROPERTY ID#:	63033
Filing fee \$	<u>100.00</u>
Permit fee \$	
Excise tax \$	
Add'l per. fee \$	
TOTAL FEES \$	
Sub-total paid \$	
Balance due \$	
Check #	<u>1076499</u>
Validation #	<u>75233</u>

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

Accepted by [Signature]

Maryland State Grid (NAD 83/91)



BASEMENT WILL NOT SEWER BY GRAVITY

Approved Septic System Plan  
Howard County Health Department

*[Signature]*  
Signature

8/6/04  
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-94-3568) has been field located by C. B. Miller professional surveyor and is accurately shown.

# 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: AY  
CHECKED BY: ZYF  
SCALE: 1"=50'  
DATE: July 29, 2004  
W.O. No.: 3217  
SHEET No.: 1 OF 1

## LOT RESITE LOT 22 CATTAIL TRACE

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

PARCEL 20, 67, & 312  
HOWARD COUNTY, MARYLAND