

Building Address 11623 Fox Chase Ct.
Ellicott City, MD 21042

Suite/Apt. #: 05-44/455 SDP/WP/Petition #: #17891

Census Tract 605101 Subdivision Woodmont

Section _____ Area _____ Lot 16

Tax Map 29 Parcel 9 Grid 28

Zoning RC Map Coordinates _____ Lot size 1.12A

Property Owner's Name TBI MD 3 LP

Address 7165 Columbia Gateway Dr 21046

City Columbia State MD Zip Code 21042

Home Phone 410-992-5478 Work Phone 410-992-3234

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

Phone _____ Fax _____

Existing Use Vacant lot

Proposed Use Residential Dwelling

Estimated Construction Cost \$ 350,000

Description of Work Subpart 2-3c

Contractor Company TBI MD 3 LP

Contact Person Nathan Beidle

Address 7165 Columbia Gateway Dr 21046

City Columbia State MD Zip Code 21046

License No. SO 518

Phone 410-992-5478 Fax 410-992-3234

Occupant or Tenant TBI MD 3 LP

Contact Name Nathan Beidle

Address 7165 Columbia Gateway Dr 21046

City Columbia State MD Zip Code 21046

Phone 410-992-5478 Fax 410-992-3234

Engineer or Architect Company Seckman Eng

Contact Person John Thompson

Address 8480 Baltimore Hill Rd # 200

City Ellicott City State MD Zip Code 21043

Phone 410-465-0105 Fax 410-465-6674

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 |
|----------------------|-----------|
| 1st floor: <u>27</u> | <u>20</u> |
| 2nd floor: <u>27</u> | <u>20</u> |
| Basement: <u>27</u> | <u>20</u> |

Finished Basement Unfinished Basement
 Crawl space Slab on Grade
 No. of Bedrooms 4
 Height: _____
 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 Height: _____

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: _____

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 _____
 Title/Company _____

Print Name Nathan Beidle
 Date 7/19/06

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 | | |
| Building Official | | |
| Dev. Engineering DPZ | | |
| Health | <u>8/29/06</u> | <u>[Signature]</u> |
| Fire Protection | | |

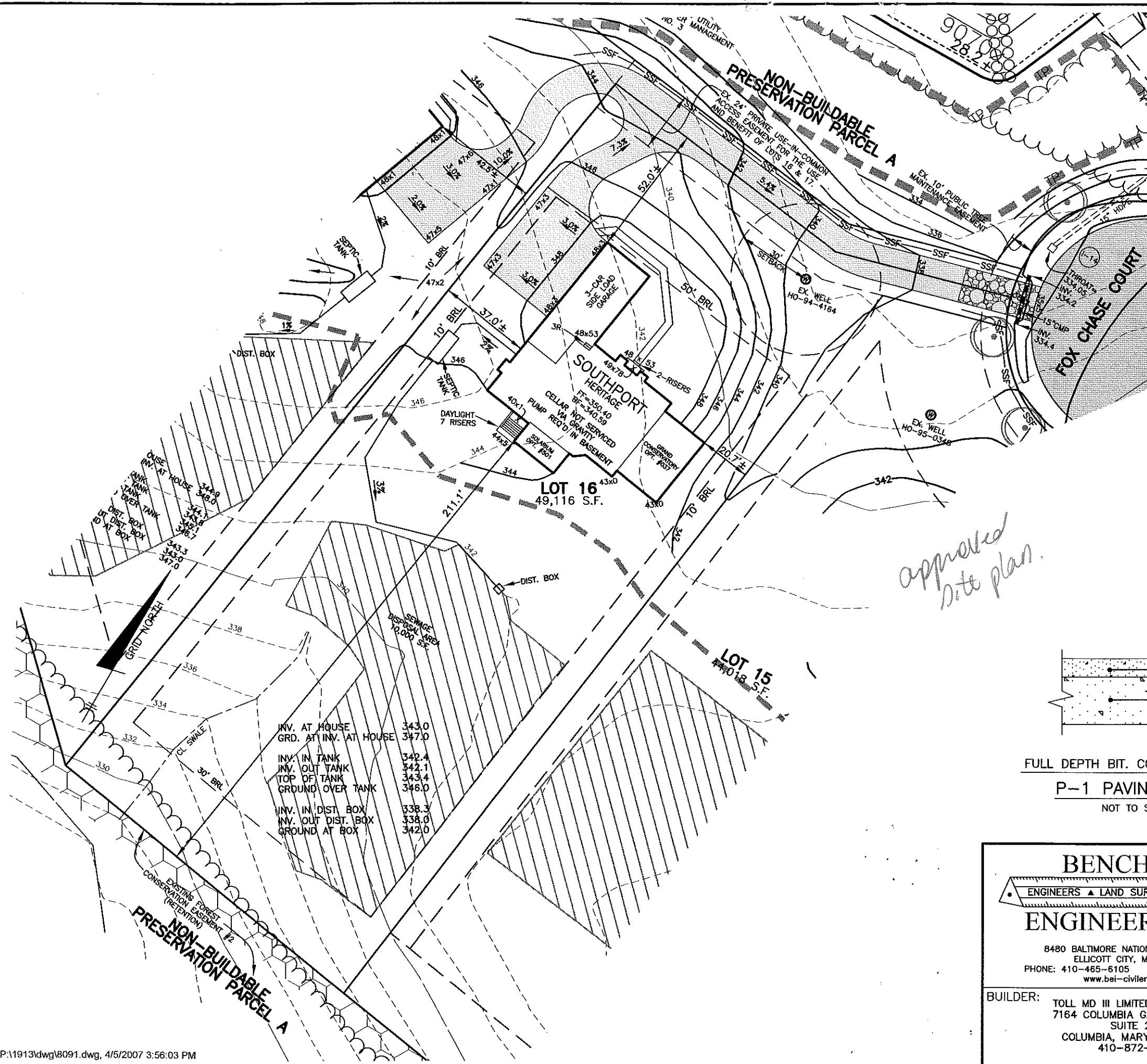
Is Sediment Control approval required prior to issuance?
 YES NO

CONTINGENCY CONSTRUCTION START:
 ONE STOP SHOP:

Distribution of Copies: White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA
 T:\forms\PERMIT.FRM

| DPZ SETBACK INFORMATION | PROPERTY ID# |
|--|-----------------------------|
| Front: _____ | Filing fee \$ <u>105.00</u> |
| Rear: _____ | Permit fee \$ _____ |
| Side: _____ | Excise tax \$ _____ |
| Side St.: _____ | Add'l per. fee \$ _____ |
| All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/> | TOTAL FEES \$ _____ |
| Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/> | Sub-total paid \$ _____ |
| Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/> | Balance due \$ _____ |
| Lot Coverage for NewTown Zone _____ | Check # _____ |
| SDP/Red-line approval date _____ | Validation # _____ |

Accepted by _____

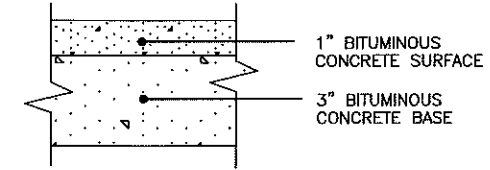


NOTES:

1. THE LOT SHOWN HEREON WAS RECORDED ON 12-13-05 AS PLAT NUMBER 17891. REFER TO THIS PLAT FOR LOT DIMENSIONS, LOT AREAS, ALL EASEMENTS AND BUILDING RESTRICTIONS.
2. THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF 10,000 SQUARE FEET AS REQUIRED BY THE STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWERAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA IS RESTRICTED UNTIL PUBLIC SEWER IS AVAILABLE. THIS EASEMENT SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT ADJUSTMENTS TO THE PRIVATE SEWERAGE EASEMENT. RECORDATION OF A MODIFIED SEWERAGE EASEMENT PLAT SHALL NOT BE NECESSARY.
3. EXACT LENGTH OF SEPTIC TRENCHES ARE BE DETERMINED BY THE HEALTH DEPARTMENT AT THE TIME OF PRECONSTRUCTION INSPECTION.
4. SPOIL FROM THE TRENCHING OF THE SEPTIC AREA IS TO BE PLACED ON THE UPHILL SIDE OF THE EXCAVATION FOR EACH INDIVIDUAL LOT.
5. SEDIMENT AND EROSION CONTROLS WERE APPROVED BY HOWARD SOIL CONSERVATION DISTRICT UNDER F-05-031 AND GP-06-94 AND SHALL COMPLY WITH THE 1994 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL.
6. STORMWATER MANAGEMENT FOR THIS LOT WAS PROVIDED UNDER F-05-031.
7. THE EXISTING WELL (TAG NO. HO-94-4164) SHOWN ON THIS PLAN HAS BEEN FIELD LOCATED BY BENCHMARK ENGINEERING, INC. ON 6-1-06 AND IS ACCURATELY SHOWN.
8. DRIVEWAY CULVERT COMPUTATIONS HAVE BEEN PROVIDED WITH THIS BUILDING PERMIT PLOT PLAN. THE CULVERT SHALL BE 15" CMP OR ELLIPTICAL EQUIVALENT.

LEGEND

- EXISTING CONTOURS ESTABLISHED UNDER F-05-031
- FIELD SURVEYED WELL LOCATION
- STREET TREES INSTALLED UNDER F-05-031
- INDICATES WALK-OUT BASEMENT LOCATION
- STABILIZED CONSTRUCTION ENTRANCE INSTALLED UNDER GP-06-94
- SUPER SILT FENCE INSTALLED UNDER F-05-031
- SUPER SILT FENCE INSTALLED UNDER GP-06-94
- SILT FENCE INSTALLED UNDER F-05-031
- LIMIT OF DISTURBANCE UNDER F-05-031



FULL DEPTH BIT. CONC. ALTERNATIVE
P-1 PAVING DETAIL
 NOT TO SCALE

approved site plan.

| | |
|-----------------------|-------|
| INV. AT HOUSE | 343.0 |
| GRD. AT INV. AT HOUSE | 347.0 |
| INV. IN TANK | 342.4 |
| INV. OUT TANK | 342.1 |
| TOP OF TANK | 343.4 |
| GROUND OVER TANK | 346.0 |
| INV. IN DIST. BOX | 338.3 |
| INV. OUT DIST. BOX | 338.0 |
| GROUND AT BOX | 342.0 |

BENCHMARK
 ENGINEERS ▲ LAND SURVEYORS ▲ PLANNERS
ENGINEERING, INC.

8480 BALTIMORE NATIONAL PIKE ▲ SUITE 418
 ELLICOTT CITY, MARYLAND 21043
 PHONE: 410-465-6105 FAX: 410-465-6644
 www.bei-civilengineering.com

BUILDER: TOLL MD III LIMITED PARTNERSHIP
 7164 COLUMBIA GATEWAY DRIVE
 SUITE 230
 COLUMBIA, MARYLAND 21046
 410-872-9105

HOMEWOOD CROSSING
PLOT PLAN
LOT 16

11623 FOX CHASE COURT
 TAX MAP 29, GRID 9 - PARCEL 28
 3rd ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND

HOUSE TYPE: SOUTHPORT
 HERITAGE ELEVATION

| | | | |
|---------------|---------------|--------------------|--------|
| DATE: | APRIL 5, 2007 | PROJECT NO. | 1913 |
| SCALE: | 1" = 40' | DRAWING | 1 OF 1 |