

**HOWARD COUNTY
PERMIT APPLICATION**

PERMIT NUMBER

808000807

Building Address 11538 Fox River Drive
Ellicott City, MD. 21043

Suite/Apt. #: _____ SDP/WP/Petition #: _____

Census Tract _____ Subdivision _____

Section _____ Area _____ Lot 26

Tax Map 29 Parcel 28 Grid 9

Zoning _____ Map Coordinates _____ Lot size _____

Existing Use SFD

Proposed Use SFD w/Deck

Estimated Construction Cost \$ 63,900.-

Description of Work Approx 19'-4" x 44'-8" Deck
with steps to grade
(irreg. shape)

Occupant or Tenant _____

Contact Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Property Owner's Name Okunowo Ebenezer
Olubukunola

Address 11538 Fox River Drive

City Ellicott City State MD Zip Code 21043

Home Phone 443-760-0234 Work Phone _____

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

Phone _____ Fax _____

Contractor Company Pro-Built Construction, Inc.

Contact Person Edward Pacylowski

Address 3330 Clarksville Pike

City Highland State MD Zip Code 20777

License No. 20247

Phone 301-854-0821 Fax 301-854-9632

Engineer or Architect Company _____

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

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: 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 _____ Width _____	Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/>
2nd floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/>	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/>
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Natural Gas <input type="checkbox"/>
No. of Bedrooms _____	Propane Gas <input type="checkbox"/>
Height: _____	Sprinkler system: N/A <input type="checkbox"/> NFA #13D _____ NFA #13R _____ Other: _____
Multi-family dwellings: _____	
No. of efficiency units: _____	
No. of 1 BR units: _____	
No. of 2 BR units: _____	
No. of 3 BR units: _____	
Other Structure: <u>Deck</u>	
Dimensions: <u>19'-4" x 44'-8" Deck</u>	
Footings: <u>post and pier</u>	
Roof Height: _____	
State Certified Modular _____	
Manufactured Home _____	

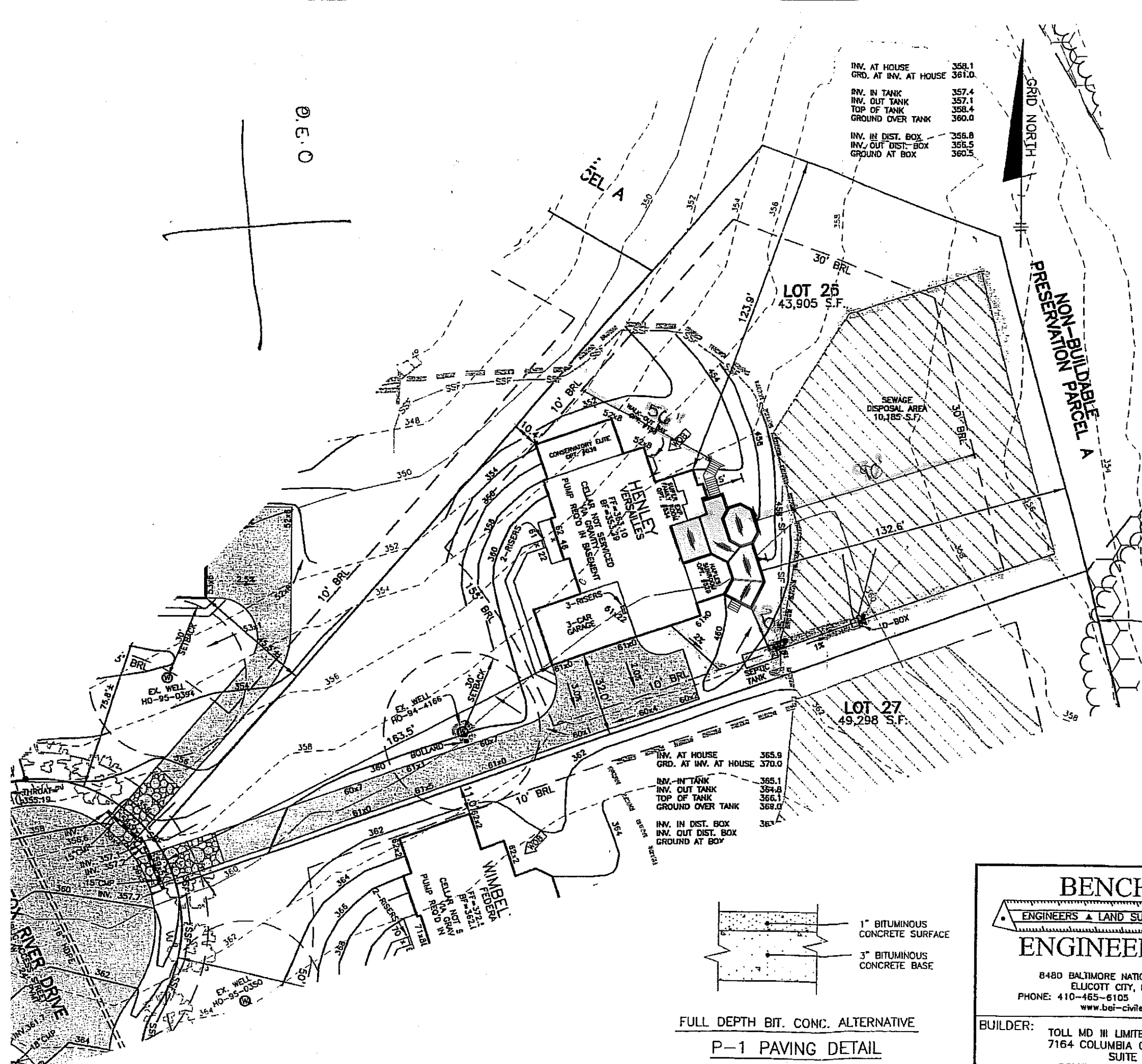
THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED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

Edul Pakati
Applicant's Signature
President
Title/Company

Edward Pacylowski
Print Name
3/27/08
Date

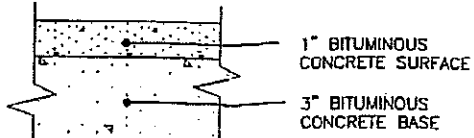
Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
** PLEASE WRITE NEATLY AND LEGIBLY. **
- FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#:
Land Development, DPZ			Front: _____	Filing fee \$ _____
State Highways			Rear: _____	Permit fee \$ _____
Building Official			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ			Side St.: _____	Add'l per. fee \$ _____
Health <u>3/27/2008</u>		<u>R. Bricker</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?			Is Entrance Permit required?	Balance due \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Historic District?	Validation # _____
ONE STOP SHOP: <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	
Distribution of Copies -			Lot Coverage for NewTown Zone _____	
White: Building Official			SDP/Red-line approval date _____	Accepted by _____
Green: LDD, DPZ			Yellow: DED, DPZ	Pink: Health
T:\norma\PERMIT.FRM			Pink: Health	Gold: SHA



INV. AT HOUSE	359.1
GRD. AT INV. AT HOUSE	361.0
INV. IN TANK	357.4
INV. OUT TANK	357.1
TOP OF TANK	358.4
GROUND OVER TANK	360.0
INV. IN DIST. BOX	356.8
INV. OUT DIST. BOX	356.5
GROUND AT BOX	360.5

INV. AT HOUSE	365.9
GRD. AT INV. AT HOUSE	370.0
INV. IN TANK	365.1
INV. OUT TANK	364.8
TOP OF TANK	366.1
GROUND OVER TANK	368.0
INV. IN DIST. BOX	363.7
INV. OUT DIST. BOX	363.7
GROUND AT BOX	363.7



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

- NOTES:**
1. THE LOT SHOWN HEREON WAS RECORDED ON 12-13-05 AS PLAT NUMBER 17889. 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-94-4166) SHOWN ON THIS PLAN HAS BEEN FIELD LOCATED BY BENCHMARK ENGINEERING, INC. ON 6-2-2006 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.

APPROVED
 BUILDING PERMIT
 BY: [Signature]
 DATE: 3/27/2008
 Deck, irregular, as-shown

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
- SSF SUPER SILT FENCE INSTALLED UNDER F-05-031
- SSF SUPER SILT FENCE INSTALLED UNDER GP-06-94
- SF SILT FENCE INSTALLED UNDER F-05-031
- LIMIT OF DISTURBANCE UNDER F-05-031

BENCHMARK
 ENGINEERS ▲ LAND SURVEYORS ▲ PLANNERS
ENGINEERING, INC.
 8480 BALTIMORE NATIONAL PIKE ▲ SUITE 418
 ELUCOTT CITY, MARYLAND 21043
 PHONE: 410-465-6105 FAX: 410-465-6644
 www.bei-civilengineering.com

HOMEWOOD CROSSING
PLOT PLAN
LOT 26
 11538 FOX RIVER DRIVE
 TAX MAP 29, GRID 9 - PARCEL 28
 3rd ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND

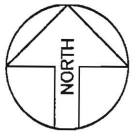
BUILDER:
 TOLL MD III LIMITED PARTNERSHIP
 7164 COLUMBIA GATEWAY DRIVE
 SUITE 230
 COLUMBIA, MARYLAND 21046
 410-872-9105

HOUSE TYPE:		HENLEY VERSAILLES ELEVATION	
DATE:	JANUARY 16, 2007	PROJECT NO.	1913
SCALE:	1" = 40'	DRAWING	1 OF 1

SETBACKS:

REAR PL.	10'
SIDE PL.	10'
HOUSE	0'
SEPTIC	20'
WELL	20'

PRIVATE WELL & SEPTIC

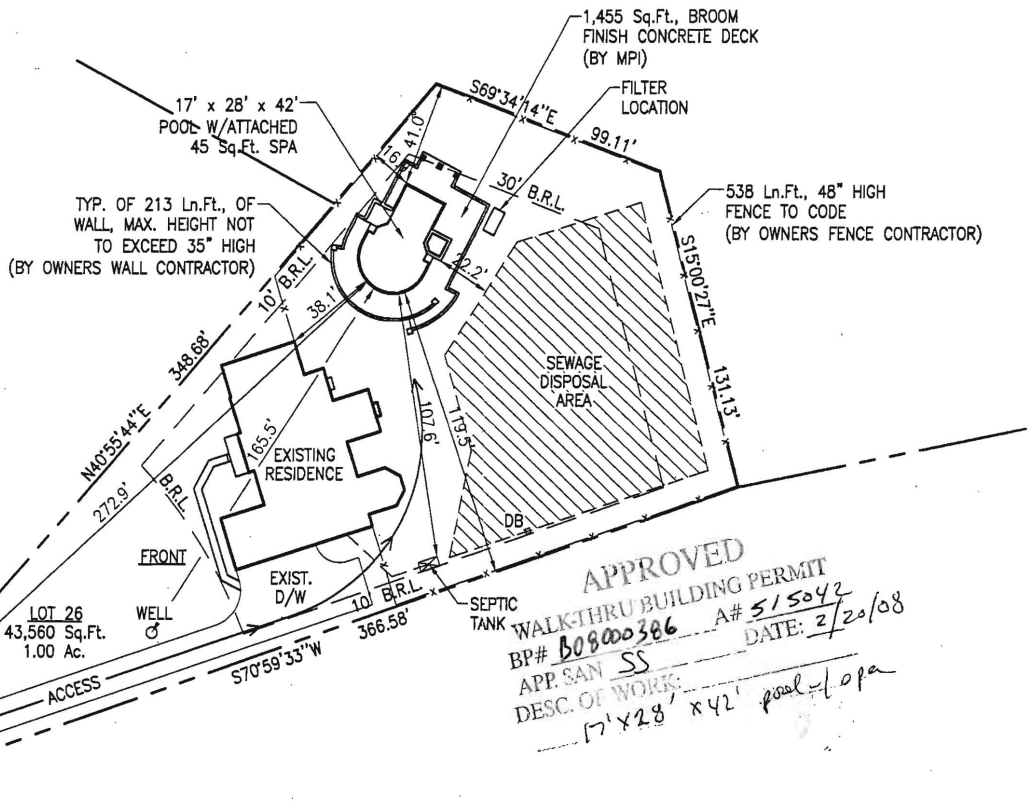


SITE PLAN

1"=50'
LOT 26

HOMWOOD CROSSING

TAX ACCOUNT #441579
MAP 29, GRID 9, PARCEL 28
ELECTION DISTRICT NO.05
HOWARD COUNTY, MARYLAND



APPROVED
WALK-THRU BUILDING PERMIT
BP# *08000386* A# *515042*
APP. SAN *SS* DATE: *2/20/08*
DESC. OF WORK: *17' x 28' x 42' pool w/ spa*

FOX RIVER DRIVE
(PUBLIC ACCESS STREET)

MAILING ADDRESS:
2 KENTBURY COURT
OWINGS MILL, MARYLAND 21117

REVISION:

PERMIT NUMBERS
POOL:
ELECT:
OTHER:

PERMIT SET

DATE: 02-19-08

Maryland POOLS Inc.

9515 GERRIG LANE | 11166 MAIN STREET
SUITE 121 | SUITE 402
COLUMBIA, MD 21046 | FAIRFAX, VA 22030
410-995-6600 | 703-359-7192
800-252-SWIM
WWW.MARYLANDPOOLS.COM

POOL DATA

SIZE/SHAPE: 17' x 28' x 42' - CUSTOM (TYPE III)
POOL AREA: 865 SPA: 45 OTHER:
TOTAL AREA: 910
PERIMETER: 125 SPA: 27
GALLONAGE: 35,318 DEPTH: 3'-0" TO 8'-0"

DIRECTIONS TO SITE

DIRECTIONS:
32/WEST TO RT.108, R/T OFF RAMP. L/T INTO PATUXENT
CHASE DEVELOPMENT (NEW) LOTS OF FLAGS. 2ND L/T TO FOX
RIVER RD., END ON RIGHT. 1/4 MILE WEST OF HOMWOOD RD.

MAP #	15
GRID	
A-2	

Juwan Okunowo
11538 Fox River Drive
Ellicott City, Maryland 21042
Howard County

HOME PHONE:
CELL PHONE 1: 443-760-0234
CELL PHONE 2:
OFFICE PHONE:

LOT:	SUBDIVISION NAME:	DISTRICT:	PIN #
26	HOMWOOD CROSSING	05	441579

SITE PLAN
ZONE: ONE

SCALE:	BY:	DATE:	JOB NUMBER:	SHEET #:
1"=50'	J.L.R.	2/19/08	DW08-9494	1.0

G00005991

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVE
ELLCOTT CITY, MD 21043
PERMITS (410) 313-2455 INSPECTIONS (410) 313-1810
AUTOMATED INFORMATION (410) 313-3800

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

B07000165

Building Address 11538 Fox River Dr.
Ellicott City, MD 21042

Suite/Apt. #: _____ SDP/WP/Petition #: _____

Census Tract 6051.01 Subdivision Homewood Crossing

Section _____ Area _____ Lot 26

Tax Map 25 Parcel 28 Grid 9

Zoning RC-050 Map Coordinates _____ Lot size _____

Property Owner's Name Toll MD 3LP

Address 7164 Columbia Gateway Dr #230

City Columbia State MD Zip Code 21046

Home Phone _____ Work Phone 410-992-5978

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 cont. Versailles w/ Conservatory

Contractor Company Toll MD 3LP

Contact Person Nathan Beidle

Address 7164 Columbia Gateway Dr. #230

City Columbia State MD Zip Code 21046

License No. 50118

Phone 410-992-5978 Fax 410-992-3234

Occupant or Tenant Toll MD 3LP

Contact Name Nathan Beidle

Address 7164 Columbia Gateway Dr #230

City Columbia State MD Zip Code 21046

Phone 410-992-5978 Fax 410-992-3234

Engineer or Architect Company Benchmark Eng

Contact Person Dave Thompson

Address 8480 Baltimore North Pike

City Ellicott City State MD Zip Code 21043

Phone 410-466-6105 Fax 410-466-6694

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: 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: <u>28'</u> <u>25'</u> <u>82'</u>	Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/>
2nd floor: <u>69'</u> <u>9'</u> <u>82'</u>	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Basement: <u>78'</u> <u>9'</u> <u>82'</u>	Gas Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/>	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/>
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Natural Gas <input checked="" type="checkbox"/>
No. of Bedrooms <u>4</u>	Propane Gas <input type="checkbox"/>
Height: <u>40'</u>	Sprinkler system: N/A <input type="checkbox"/>
Multi-family dwellings: _____	NFPA #13D _____
No. of efficiency units: _____	NFPA #13R _____
No. of 1 BR units: _____	Other: _____
No. of 2 BR units: _____	
No. of 3 BR units: _____	
Other Structure: _____	
Dimensions: _____	
Footings: _____	
Roof Height: _____	
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.

Nathan A Beidle
Applicant's Signature

Title/Company


Nathan A Beidle
Print Name

1/18/07
Date

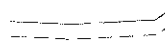



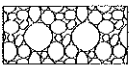
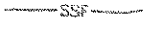
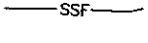
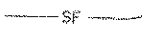

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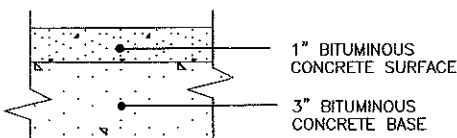
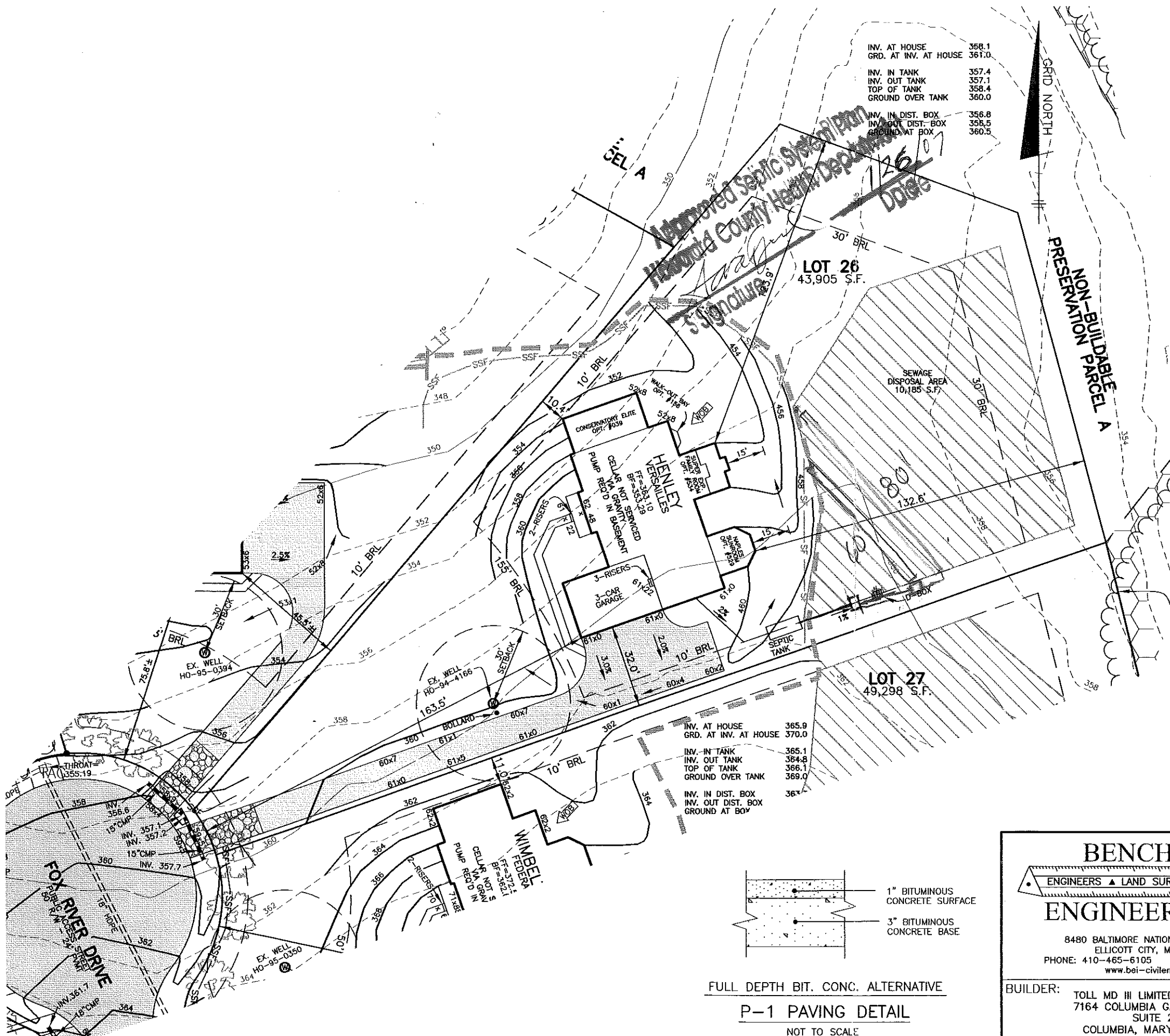
AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#:
Land Development, DPZ			Front: _____	Filing fee \$ <u>100.00</u>
State Highways			Rear: _____	Permit fee \$ _____
Building Official			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ	<u>1/26/07</u>	<u>[Signature]</u>	Side St.: _____	Add'l per. fee \$ _____
Health			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?			Is Entrance Permit required?	Balance due \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # <u>8714970</u>
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Historic District?	Validation # _____
ONE STOP SHOP: <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	
Distribution of Copies: _____	White: Building Official	Green: LDD, DPZ	Lot Coverage for NewTown Zone _____	Accepted by <u>[Signature]</u>
			SDP/Red-line approval date _____	
			Yellow: DED, DPZ	
			Pink: Health	
			Gold: SHA	

NOTES:

1. THE LOT SHOWN HEREON WAS RECORDED ON 12-13-05 AS PLAT NUMBER 17889. 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.
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LEGEND

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-  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

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 26

11538 FOX RIVER DRIVE
 TAX MAP 29, GRID 9 - PARCEL 28
 3rd ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND

HOUSE TYPE: HENLEY
 VERSAILLES ELEVATION

DATE:	JANUARY 16, 2007	PROJECT NO.	1913
SCALE:	1" = 40'	DRAWING	1 OF 1