

607000139

Building Address: 13536 Mitchells Way
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: Cloverfield
 Section: _____ Area: _____ Lot: U
 Tax Map: _____ Parcel: _____ Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: 1.28

Property Owner's Name: Cloverfield Pfefferkorn
 Address: 1175 Stratfield Court
 City: Marysville State: MD Zip Code: 21104
 Home Phone: _____ Work Phone: _____
 Applicant's Name & Mailing Address, (If other than stated herein): _____
 Phone: _____ Fax: _____
 Email: _____

Existing Use: SFD
 Proposed Use: _____
 Estimated Construction Cost: \$ _____
 Description of Work: _____
 Occupant or Tenant: 11/1
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Contractor Company: _____
 Contact Person: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 License No.: _____
 Phone: _____ Fax: _____
 Email: _____
 Engineer/Architect Company: _____
 Responsible Design Prof.: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

BUILDING DESCRIPTION - COMMERCIAL	
Building Characteristics	Utilities
Height:	<u>Water Supply</u>
No. of stories:	<input type="checkbox"/> Public
Gross area, sq. ft./floor:	<input type="checkbox"/> Private
	<u>Sewage Disposal</u>
Area of construction (sq. ft.):	<input type="checkbox"/> Public
	<input type="checkbox"/> Private
Use group:	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<u>Construction type:</u>	<u>Heating System</u>
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Masonry	<u>Sprinkler System:</u>
<input type="checkbox"/> Wood Frame	<input type="checkbox"/> N/A
<input type="checkbox"/> State Certified Modular	<input type="checkbox"/> Full
<input checked="" type="checkbox"/> Roadside Tree Project Permit	<input type="checkbox"/> Partial
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Other Suppression
<u>Roadside Tree Project Permit #</u>	No. of Heads:

BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics	Utilities
<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>
<u>Depth</u> <u>Width</u>	<input type="checkbox"/> Public
1 st floor:	<input type="checkbox"/> Private
2 nd floor:	<u>Sewage Disposal</u>
Basement:	<input type="checkbox"/> Public
<input type="checkbox"/> Finished Basement	<input type="checkbox"/> Private
<input type="checkbox"/> Unfinished Basement	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Crawl Space	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Slab on Grade	<u>Heating System</u>
No. of Bedrooms:	<input type="checkbox"/> Electric
<u>Multi-family Dwelling</u>	<input type="checkbox"/> Oil
No. of efficiency units:	<input type="checkbox"/> Natural Gas
No. of 1 BR units:	<input type="checkbox"/> Propane Gas
No. of 2 BR units:	
No. of 3 BR units:	
Other Structure:	
Dimensions:	
Footings:	<input checked="" type="checkbox"/> Roadside Tree Project Permit
Roof:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> State Certified Modular	<u>Roadside Tree Project Permit #</u>
<input type="checkbox"/> 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.

Applicant's Signature _____ Print Name _____
Email Address _____ Date _____
Title/Company _____

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
 PLEASE WRITE NEATLY & LEGIBLY
 -FOR OFFICE USE ONLY-

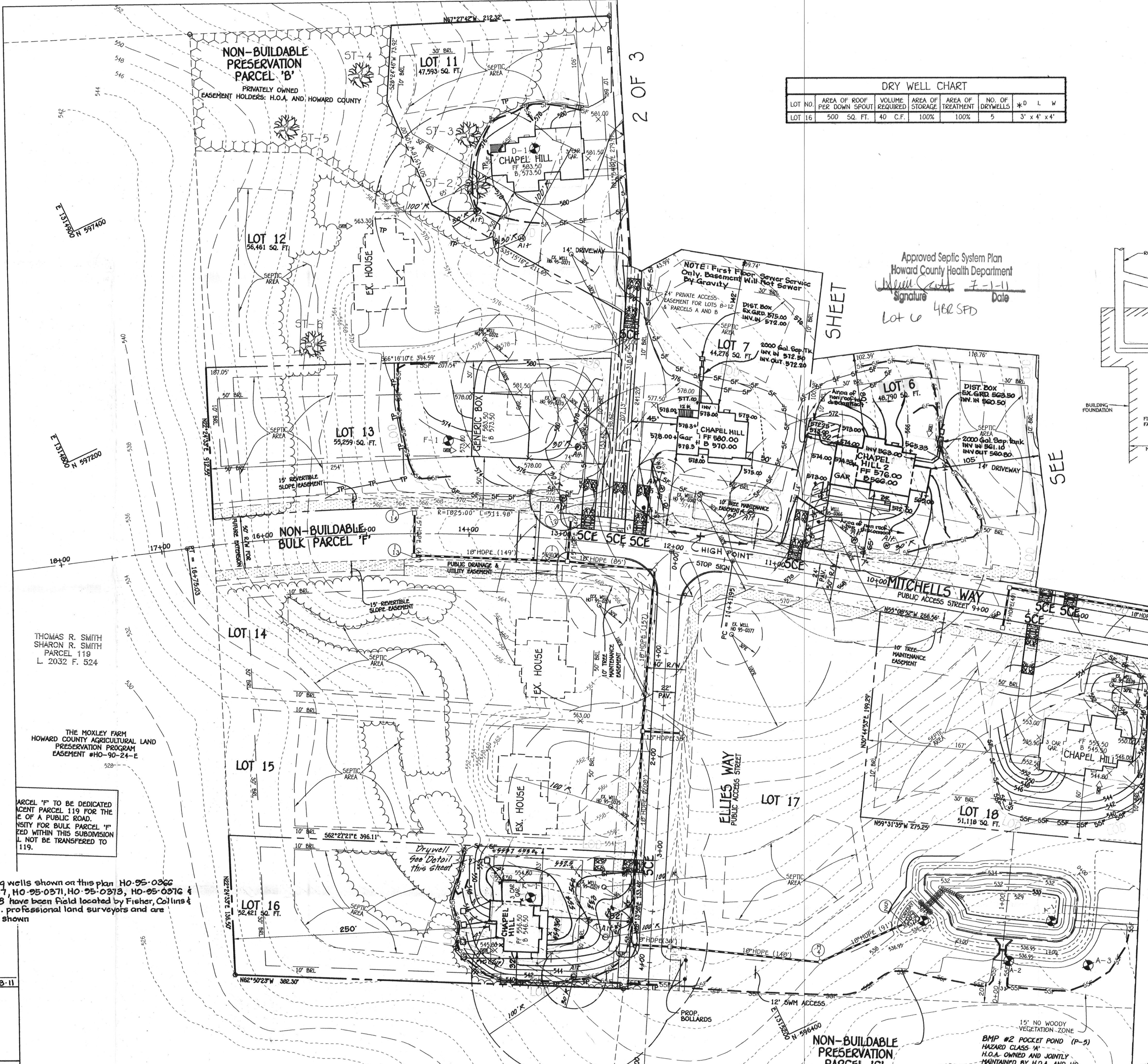
AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	<u>7/5/11</u>	<u>[Signature]</u>
Fire Protection		

Is Sediment Control approval required for issuance? Yes No
 CONTINGENCY CONSTRUCTION START
 ONE STOP SHOP

DPZ SETBACK INFORMATION

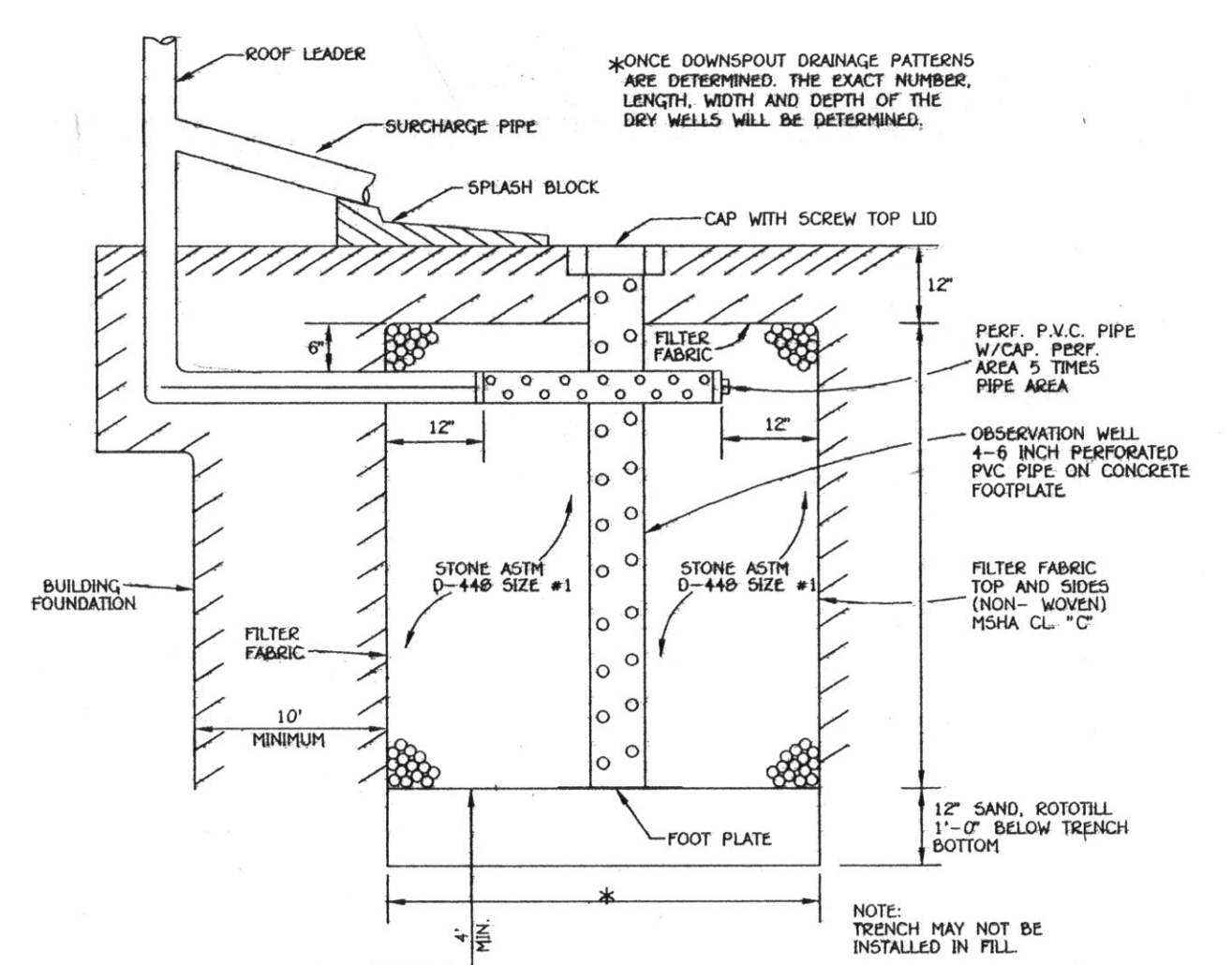
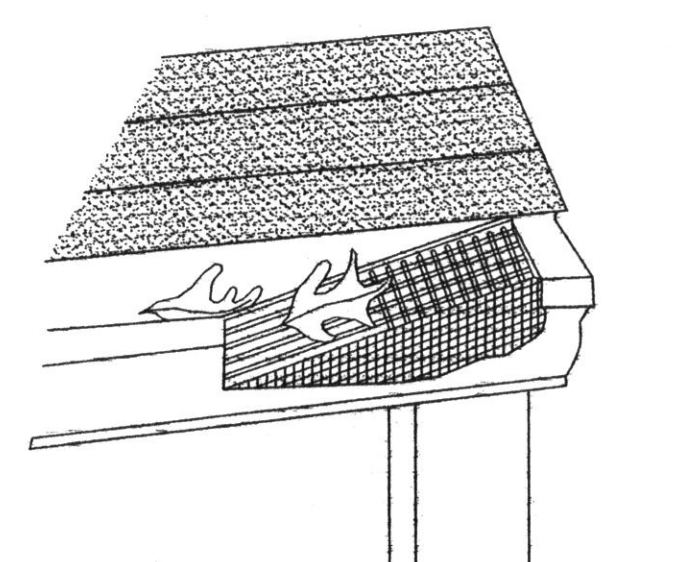
Front: _____
 Rear: _____
 Side: _____
 Side St.: _____
 All minimum setbacks met? Yes No
 Is Entrance Permit Required? Yes No
 Historic District? Yes No
 Lot Coverage for New Town Zone: _____
 SDP/Red-line approval date: _____

Filing Fee	\$ <u>150.00</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$



DRY WELL CHART

LOT NO.	AREA OF ROOF PER DOWN SPOUT	VOLUME REQUIRED	AREA OF STORAGE	AREA OF TREATMENT	NO. OF DRYWELLS	*D L W
LOT 16	500 SQ. FT.	40 C.F.	100%	100%	5	3' x 4' x 4'



- STORMWATER MANAGEMENT NOTES**
1. STORMWATER MANAGEMENT IS PROVIDED IN ACCORDANCE WITH CHAPTER 5 "ENVIRONMENTAL SITE DESIGN" OF THE 2007 MARYLAND STORMWATER MANAGEMENT DESIGN MANUAL EFFECTIVE MAY 4, 2010.
 2. MAXIMUM CONTRIBUTING ROOF TOP AREA TO EACH DOWNSPOUT SHALL BE 500 SQ. FT. OR LESS.
 3. DRYWELL SHALL BE PROVIDED AT LOCATIONS WHERE THE LENGTH OF DISCONTINUITY IS LESS THAN 75' AT 5%. THE SIZE AND CONSTRUCTION OF THE DRYWELL SHALL BE IN ACCORDANCE WITH THE DETAIL SHOWN ON THIS SHEET.

Approved Septic System Plan
Howard County Health Department
Signature: *[Signature]* 7-11
Date
Lot 6 482 SFD

NOTE:
The existing wells shown on this plan HO-95-0366 HO-95-0367 HO-95-0371 HO-95-0373 HO-95-0376 & HO-95-0378 have been field located by Fisher, Collins & Carter, Inc. professional land surveyors and are accurately shown

5 Rev hsc Lot 6, per new arch plans	6-3-11
4 Add drywells & detail for Lot 16	2-24-11
3 Rev Lot 16, Chapel Hill per new arch plans	2-1-2011
2 Alt well loc. added to G, T, 11, 12, 13 & 16	1-2010
1 Rev hsc type 4 and Lot 7, add septic information	12-9-10

This development plan is approved for soil erosion and sediment control by the HOWARD SOIL CONSERVATION DISTRICT.
Signature: *[Signature]* 3/23/10
Date

BUILDER/DEVELOPER'S CERTIFICATE
"I/We certify that all development and construction will be done according to this plan, for sediment and erosion control and that any responsible personnel involved in the construction project will have a Certificate of Attendance at a Department of the Environment Approved Training Program for the Control of Sediment and Erosion before beginning the project. I also authorize periodic on-site inspection by the Howard Soil Conservation District."
Signature: *[Signature]* 3/1/10
Date

ENGINEER'S CERTIFICATE
"I certify that this plan for erosion and sediment control represents a practical and workable plan based on my personal knowledge of the site conditions and that it was prepared in accordance with the requirements of the Howard Soil Conservation District."
Signature: *[Signature]* 3/19/10
Date

OWNER/BUILDER/DEVELOPER
CATONVILLE BUILDERS
1175 STRATFIELD COURT
MARKKOTTSVILLE, MARYLAND 21104
410-442-2211



SITE DEVELOPMENT, SEDIMENT/EROSION CONTROL PLAN SINGLE FAMILY DETACHED CLOVERFIELD
LOTS 3-8, 11, 13, 16, 18, 20 & 21
PLAT NO'S. 18953-18959
MAP NO.: 15 GRID NO.: 8 PARCEL NO.: 4
ELECTION DISTRICT HOWARD COUNTY, MARYLAND
SCALE: 1" = 50' DATE: MARCH, 2010
SHEET 17 OF 3

GP-10-72

FISHER, COLLINS & CARTER, INC.
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS
CORPORATE OFFICE: 10722 BALTIMORE NATIONAL PIKE
ELKTON CITY, MARYLAND 21828
(410) 661-8999