

# HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

**B10003981**

Building Address 13542 MITCHELLS WAY  
 Suite/Apt. #: \_\_\_\_\_ SDP/WP/Petition #: \_\_\_\_\_  
 Census Tract \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Section \_\_\_\_\_ Area \_\_\_\_\_ Lot 7  
 Tax Map \_\_\_\_\_ Parcel \_\_\_\_\_ Grid \_\_\_\_\_  
 Zoning \_\_\_\_\_ Map Coordinates \_\_\_\_\_ Lot size \_\_\_\_\_

Property Owner's Name Chouffield Pfeiffer-Korn LLC  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
 Applicant's Name & Mailing Address, (if other than stated hereon): \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_

Existing Use \_\_\_\_\_  
 Proposed Use \_\_\_\_\_  
 Estimated Construction Cost \$ 3  
 Description of Work SFD

Contractor Company \_\_\_\_\_  
 Contact Person \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 License No. \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_

Occupant or Tenant \_\_\_\_\_  
 Contact Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_

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"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Construction type: _____ _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ State Certified Modular	Sprinkler system: N/A <input type="checkbox"/> _____ Full _____ Partial _____ Other Suppression _____ # of Heads

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: _____ _____ Public _____ Private
1st floor: _____	Sewage Disposal: _____ _____ Public _____ Private
2nd floor: <u>Sq Ft. of House</u>	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: <u>4035</u>	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms <u>4</u>	Sprinkler system: N/A <input type="checkbox"/> _____ NFPA #13D _____ NFPA #13R _____ Other:
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	

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 \_\_\_\_\_  
 Date \_\_\_\_\_

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

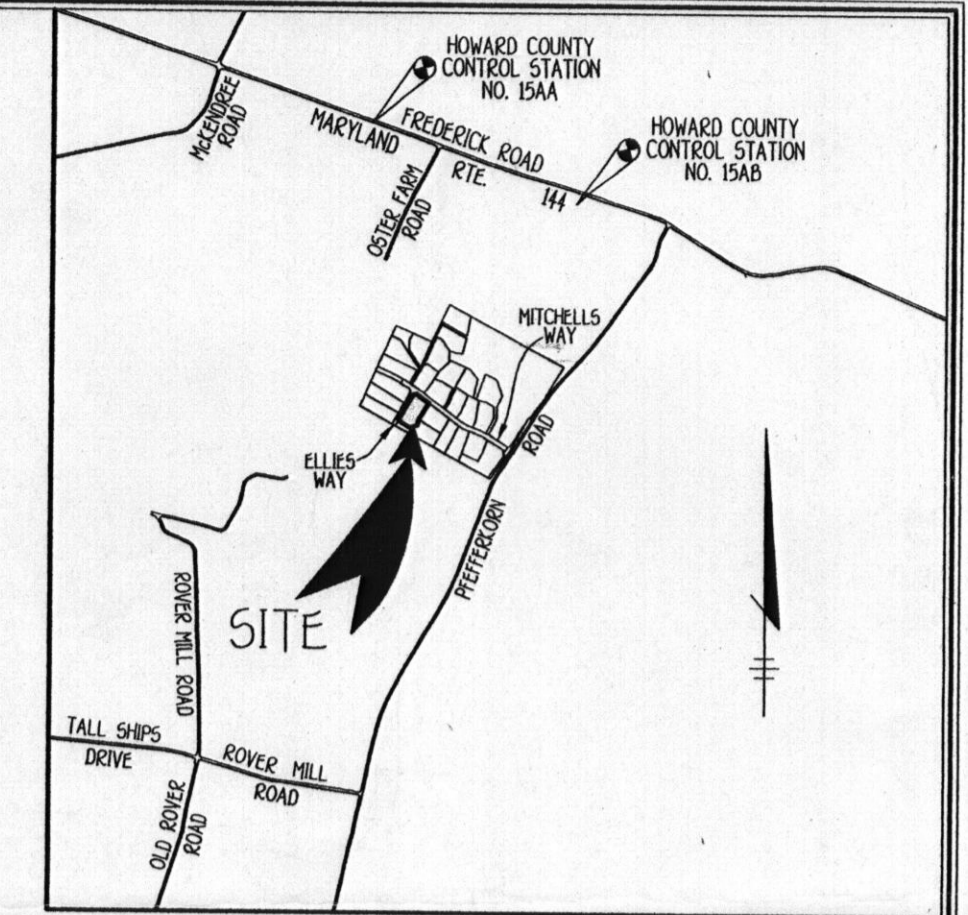
AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official		
Dev. Engineering, DPZ		
Health	<u>2-16-11</u>	<u>DBernard</u>
Fire Protection		

Is Sediment Control approval required prior to issuance?  
 YES  NO

CONTINGENCY CONSTRUCTION START:   
 ONE STOP SHOP:

DPZ SETBACK INFORMATION	PROPERTY ID#:
Front: _____	Filing fee \$ <u>150.00</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 # <u>1162310</u>
SDP/Red-line approval date _____	Validation # _____

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



VICINITY MAP  
SCALE: 1" = 2,000'

**GENERAL NOTES**

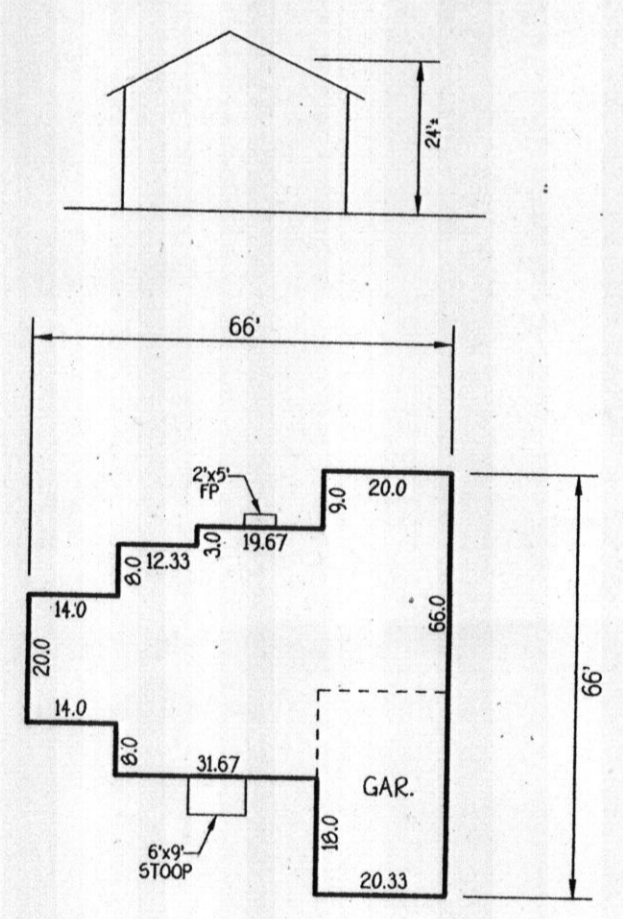
1. SUBJECT PROPERTY ZONED RC-DEO
2. TOTAL AREA OF PROPERTY 58,410 SQ.FT.
3. SEPTIC EASEMENT SUBJECT TO HOWARD COUNTY HEALTH DEPARTMENT REVIEW.
4. LENGTH OF TRENCH TO BE DETERMINED AT TIME OF SEPTIC PERMIT ISSUANCE.
5. CONTRACTOR/BUILDER TO VERIFY ELEVATION IN THE FIELD BEFORE BEGINNING ANY CONSTRUCTION.
6. TOPOGRAPHIC SURVEY WAS BASED ON 2" CONTOUR, SURVEY PROVIDED BY 30" LLC, DATED APRIL, 2001 AND SUPPLEMENTED BY FIELD RUN SURVEY PREPARED BY FISHER, COLLINS & CARTER, INC. DATED APRIL, 2002.
7. NO WETLANDS CURRENTLY EXIST ON THE PROPERTY.
8. DRIVEWAY CULVERTS SHALL BE CONSTRUCTED AT SITE DEVELOPMENT PLAN STAGE.
9. STORMWATER MANAGEMENT IS PROVIDED UNDER F-06-110.
10. SEDIMENT/EROSION CONTROL FENCING TO BE UPGRADED TO "SUPER" SILT FENCE AT THE DIRECTION OF THE SEDIMENT CONTROL INSPECTOR.

**NOTE**

THE EXISTING WELL SHOWN ON THIS PLAN, TAG NO. HO 95-0377 HAS BEEN FIELD LOCATED BY FISHER, COLLINS & CARTER, INC., PROFESSIONAL LAND SURVEYORS AND IS ACCURATELY SHOWN.



Approved Septic System Plan  
Howard County Health Department  
*Signature*  
7-20-09  
Date



CHARLESTON CF-17  
SCALE: 1" = 30'

LEGEND	
SYMBOL	DESCRIPTION
	EXISTING CONTOUR 2' INTERVAL
	PROPOSED CONTOUR 2' INTERVAL
	SPOT ELEVATION
	WALK OUT BASEMENT
	SUPER SILT FENCE
	LIMITS OF DISTURBANCE
	EXISTING STREET TREES FROM F-06-110

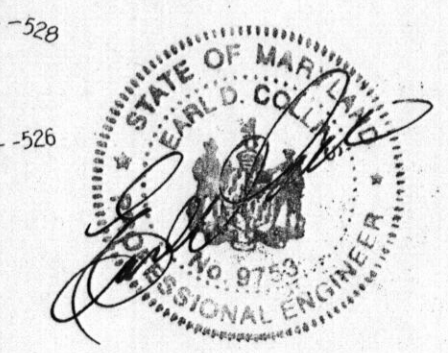
THIS DEVELOPMENT IS APPROVED FOR SOIL EROSION AND SEDIMENT CONTROL BY THE HOWARD SOIL CONSERVATION DISTRICT.  
*Signature* 7/17/09  
HOWARD SOIL CONSERVATION DISTRICT

**BUILDER/DEVELOPER**  
CATONVILLE BUILDERS  
1175 STRATFIELD COURT  
MARRIOTTVILLE, MARYLAND 21104  
410-442-2211

**DEVELOPER'S CERTIFICATE**  
I/WE CERTIFY THAT ALL DEVELOPMENT AND CONSTRUCTION WILL BE DONE ACCORDING TO THIS PLAN 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* 7/6/09  
SIGNATURE OF DEVELOPER DATE

**ENGINEER'S CERTIFICATE**  
I HEREBY CERTIFY THAT THIS PLAN FOR EROSION AND SEDIMENT CONTROL REPRESENTS A PRACTICAL AND WORKABLE PLAN BASED ON MY PERSONAL KNOWLEDGE OF THE SITE CONDITION AND THAT IT WAS PREPARED IN ACCORDANCE WITH THE REQUIREMENTS OF THE HOWARD SOIL CONSERVATION DISTRICT.  
*Signature* 7.6.09  
EARL D. COLLINS DATE

**PROFESSIONAL CERTIFICATION**  
I HEREBY CERTIFY THAT THESE DOCUMENTS WERE PREPARED OR APPROVED BY ME AND THAT I AM A DULY LICENSED PROFESSIONAL ENGINEER UNDER THE LAWS OF THE STATE OF MARYLAND, LICENSE NO. 9753, EXPIRATION DATE: 2/28/10.  
*Signature* 7.6.09  
EARL D. COLLINS DATE



Approved Site Plan  
SITE DEVELOPMENT,  
SEDIMENT/EROSION CONTROL PLAN  
**CLOVERFIELD**  
LOT 17  
ZONED: RC-DEO PLAT NO. 18955  
TAX MAP NO.: 15 PARCEL NO.: 4 GRID NO.: 8  
3RD ELECTION DISTRICT HOWARD COUNTY, MARYLAND  
SCALE: 1" = 30' DATE: JUNE, 2009  
SHEET 1 OF 2

3P.09-96