

B10002834

Building Address 14365 Musgrove Farm Ct
Glenwood 21738

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

Census Tract _____ Subdivision _____

Section _____ Area _____ Lot _____

Tax Map _____ Parcel _____ Grid _____

Zoning _____ Map Coordinates _____ Lot Size _____

Property Owner's Name Tom Olive
 Address 14365 Musgrove Farm Ct
 City Glenwood State MD Zip Code 21738
 Home Phone 410 489 4839 Work Phone 301 776 0561
 Applicant's Name & Mailing Address, (if other than stated herein): _____

Existing Use SFD
 Proposed Use SFD with Mini Barn
 Estimated Construction Cost \$ 6000
 Description of Work:
Place shed (12' x 24')
Portable Type " Premade and Delivered"

Occupant or Tenant _____

Contact Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Contractor Company Myers Mini Barns
 Contact Person Gary Myers
 Address 16041 Frederick Rd
 City Lisbon State MD Zip Code 21765
 License No. _____
 Phone _____ Fax _____

Engineer or Architect Company Myers Barns
 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 checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1 st floor: _____ 2 nd floor: _____ Basement: _____	Water Supply: _____ Public _____ Private _____ Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/> <u>Shared Multi Use</u>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Other Structure: <input checked="" type="checkbox"/> Dimensions: <u>12' x 24' shed</u> Footings: <u>4" x 4" timbers</u> Roof: <u>"A" Frame</u> State Certified Modular _____ Manufactured Home _____	Sprinkler system: N/A <input type="checkbox"/> 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.

Tom S. Olive
 Applicant's Signature
TOOLIVE22@gmail.com
 Email Address

_____ Title/Company

Tom Olive
 Print Name
9/2/10
 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 Officials			
Dev. Engineering, DPZ			
Health	<u>9/2/2010</u>	<u>R. Bickel</u>	
Fire Protection			

DPZ SETBACK INFORMATION	PROPERTY ID #
Front: _____	Filing fee \$ _____
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 New Town Zone _____	Check # _____
SDP/Red-line approval date _____	Validation # _____
Accepted by _____	

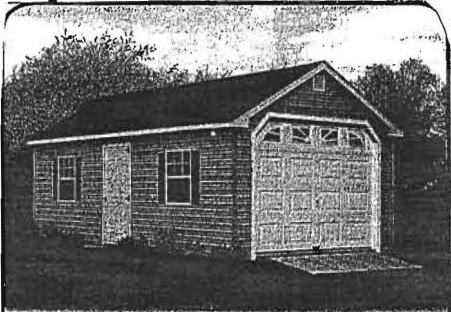
CONTINGENCY CONSTRUCTION START:
 ONE STOP SHOP:

NOTE: THIS LOCATION DRAWING IS OF BENEFIT TO A CONSUMER ONLY INsofar AS IT IS REQUIRED BY A LENDER OR A TITLE INSURANCE COMPANY OR ITS AGENT IN CONNECTION WITH A CONTEMPLATED TRANSFER, FINANCING OR REFINANCING; AND IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATION OF FENCES, SHEDS, GARAGES, BUILDINGS, LANDSCAPING, OR OTHER EXISTING OR FUTURE IMPROVEMENTS; AND DOES NOT PROVIDE FOR THE ACCURATE IDENTIFICATION OF PROPERTY BOUNDARY LINES, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING OR REFINANCING.

THIS LOCATION DRAWING WAS PREPARED WITHOUT THE BENEFIT OF A CURRENT TITLE REPORT. THIS PROPERTY IS SUBJECT TO ANY AND ALL EASEMENTS, RIGHTS-OF-WAY, COVENANTS, AND RESTRICTIONS, ETC. OF RECORD, SOME OR ALL OF WHICH MAY OR MAY NOT BE SHOWN AND/OR REFERENCED HEREON. BEARINGS AND DISTANCES OF THE PROPERTY BOUNDARY LINES SHOWN HEREON ARE PER AVAILABLE RECORDS AND HAVE NOT BEEN FIELD VERIFIED.

THE LICENSEE BELOW WAS IN RESPONSIBLE CHARGE OVER THE PREPARATION OF THIS LOCATION DRAWING AND THE SURVEYING WORK REFLECTED IN IT, ALL IN COMPLIANCE WITH REQUIREMENTS SET FORTH IN COMAR TITLE 09, SUBTITLE 13, CHAPTER 06, REGULATION .12.

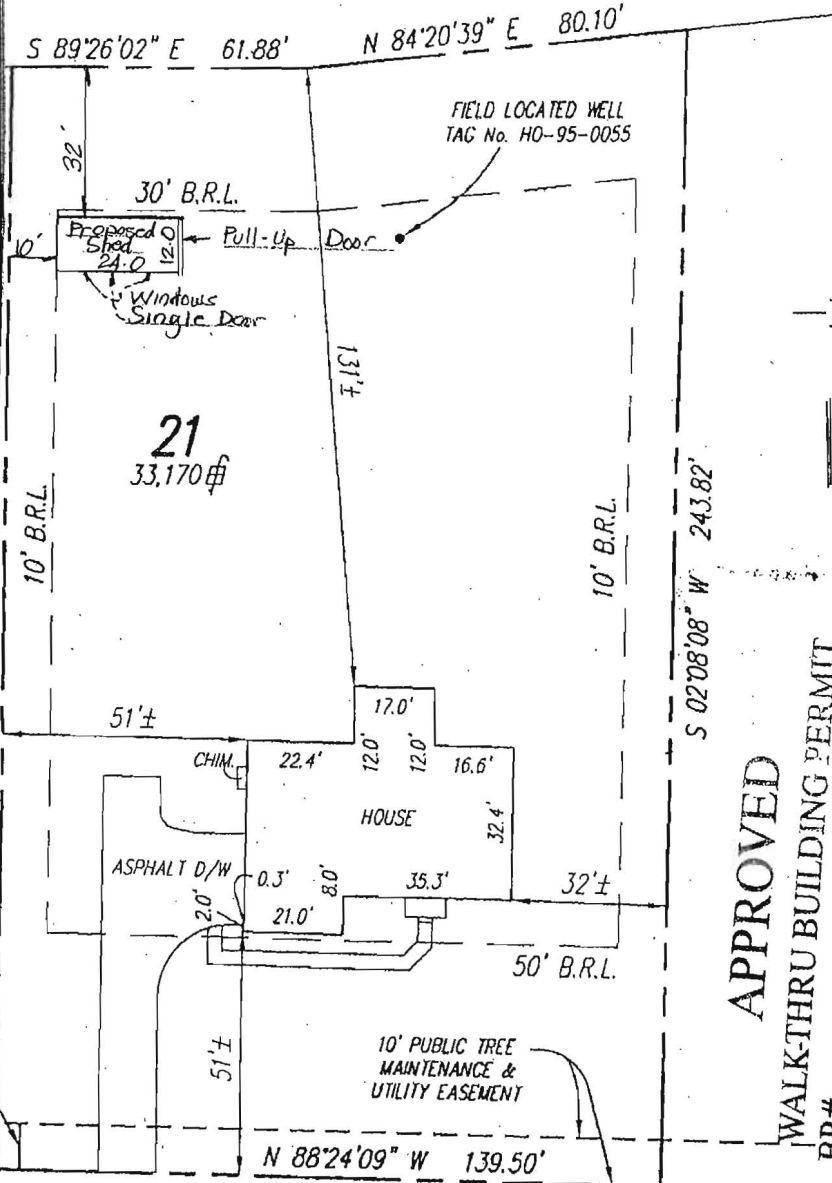
BUILDABLE PRESERVATION PARCEL 'A'



12' x 24' CAPE

Pewter Vinyl Siding, White Trim,
Black Shingles, Black Shutters,
7/12 Pitch

Options Shown: 30" x 36" Slider
Windows, Vents, 7' Walls, 3' Steel
Door, Overhead Door with optional
Sun Ray Glass, Ramp



APPROVED
WALK-THRU BUILDING PERMIT
BP# _____
A# _____

APP. SAN R. BICKERDATE: 9/2/2010
DESC. OF WORK: 12' x 24' MOVABLE shed
approved as shown

MUSGROVE FARM COURT (PUBLIC ACCESS STREET) (50' R/W)

BUILDING SETBACKS (B.R.L.'s) SHOWN HEREON PER PLAT No. 19125
SETBACK DISTANCES SHOWN HEREON AS "±" HAVE AN ACCURACY OF ± 1' FOOT.

<p>GLW GUTSCHICK LITTLE & WEBER, P.A. CIVIL ENGINEERS, LAND SURVEYORS, LAND PLANNERS, LANDSCAPE ARCHITECTS 3909 NATIONAL DRIVE - SUITE 250 - BURTONSVILLE OFFICE PARK BURTONSVILLE, MARYLAND 20866 TEL: 301-421-4024 BALT: 410-880-1820 DC/VA: 301-989-2524 FAX: 301-421-4186</p>	THE PROPERTY SHOWN HEREON LIES WITHIN ZONE C (AREA OF MINIMAL FLOODING) AS SHOWN ON THE F.E.M.A. FLOOD INSURANCE RATE MAP, COMMUNITY PANEL No. 240044 0020 B, REVISED DECEMBER 4, 1986.		
	REFERENCE : PLAT No. 19125		
	DATE OF LATEST FIELD WORK: 09-04-09		
	DRAWN BY : JVC/SDS	SCALE : 1"=40'	GLW FILE No. 05-066
CHECKED BY : TOY			

SURVEYOR'S CERTIFICATE

THIS IS TO CERTIFY TO:
"RYAN HOMES",

THAT TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF, THIS LOCATION DRAWING WAS PREPARED IN ACCORDANCE WITH THE MINIMUM STANDARDS OF PRACTICE FOR PROFESSIONAL LAND SURVEYORS OF THE STATE OF MARYLAND

For Gutschick, Little and Weber, P.A. :
 Thomas C. O'Connor, Jr., Professional Land Surveyor, No. 10954

THIS LOCATION DRAWING IS VALID ONLY WITH AN ORIGINAL SIGNATURE AND EMBOSSED SEAL OF THE ABOVE SURVEYOR.

LOCATION DRAWING
"MUSGROVE FARM"
LOT 21
14365 MUSGROVE FARM COURT
HOWARD COUNTY, MARYLAND

Handwritten initials and date: 9/10/09

604000069

Handwritten initials

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

**HOWARD COUNTY
 PERMIT APPLICATION**

PERMIT NUMBER
B09001213

Building Address 14365 Musgrove Farm Ct
Glenwood, MD 21738

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

Census Tract 605601 Subdivision Musgrove Farm (MF)

Section _____ Area _____ Lot 21

Tax Map 21 Parcel _____ Grid 21-12

Zoning RR-DEO Map Coordinates _____ Lot size _____

Property Owner's Name Ryan Homes
 Address 6031 University Blvd, Suite 250

City Ellicott City State MD Zip Code 21043

Phone 410.796.0980 Phone _____

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

Phone _____ Fax _____

Existing Use Vacant Lot

Proposed Use New - Single Family Home

Estimated Construction Cost \$250,000

Description of Work Model Courtland w/Morn Rm
2 Story, Full Bsmt, 11R, 2FB, 1HB
& Garage (4-BR) Opt-FP

Contractor Company Ryan Homes

Contact Person Kevin Bowser

Address 6031 University Blvd, Suite 250

City Ellicott City State MD Zip Code 21043

License No. 56

Phone 410.796.0980 Fax 410.796.7094

Occupant or Tenant Ryan Homes

Contact Name Kevin Bowser

Address 6031 University Blvd, Suite 250

City Ellicott City State MD Zip Code 21043

Phone 410.796.0980 Fax 410.796.7094

Engineer or Architect Company Gutschick Little & Weber

Contact Person _____

Address 3909 National Drive, Suite 250

City Burtonsville State MD Zip Code 20866

Phone 301.421.4024 Fax 301.421.4186

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

Sewer 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
1 st Floor:	52	56
2 nd Floor:	32	56
Basement:	44	56

Finished Basement:
 Unfinished Basement

Crawl space Slab on Grade

No. of Bedrooms: 4
 Height: 30
 Multi-family dwellings: _____
 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

Sewer 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.

IS M
 Applicant's Signature

Project Manager
 Title/Company

Ben Mucci
 Print Name

05/14/2009
 Date

5/29/09

Checks payable: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
 ** PLEASE WRITE NEATLY AND LEGIBLY. **

FOR OFFICE USE ONLY			DPZ SETBACK INFORMATION	PROPERTY ID#
AGENCY	DATE	SIGNATURE	Front	Filing Fee \$ <u>100.00</u>
APPROVAL			Rear	Permit Fee \$ _____
Land Development DPZ			Side	Excise tax \$ _____
State Highways			Side St	Add'l per. fee \$ <u>50.00</u>
Building Official			All minimum setbacks met?	TOTAL FEES \$ _____
Dev. Engineering DPZ			YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Health			Is Entrance Permit required?	Balance due \$ _____
Fire Protection			YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # <u>565517/519</u>
Is Sediment Control Approval required prior to issuance?			Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Validation # _____
YES <input type="checkbox"/> NO <input type="checkbox"/>			Lot coverage for New Town Zone	
			SDP/Red-line approval date	Accepted by _____
CONTINGENCY CONSTRUCTION START <input type="checkbox"/>				
ONE STOP SHOP <input type="checkbox"/>				
Distribution of Copies -	White Building Official	Green LDD DPZ	Yellow DED DPZ	Pink Health
				Gold SHA

\$ 173353

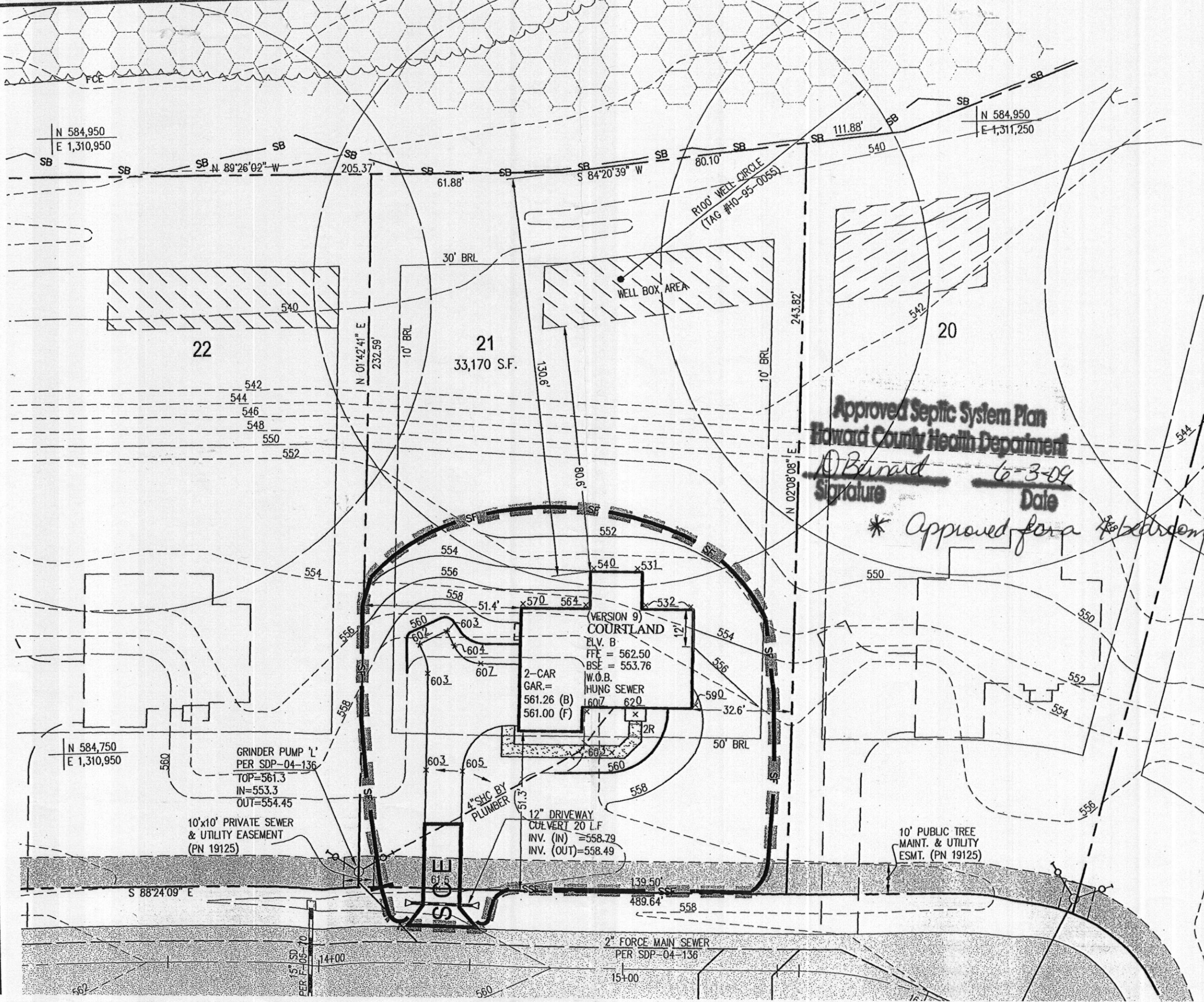
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IBOL

ENVIRONMENT
ISTRATION

SECTION
ABOVE
UNDISTURBED
GROUND
DRIVEN A
16" INTO

YMBOL



Approved Septic System Plan
 Howard County Health Department

O. Bernard
 Signature Date 6-3-09

* Approved for a *Robertson SFD*