

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

000127961 4

Building Address 1710 Oakdale DR
Rockville, MD 20850
Suite/Apt. #: --- SDP/WP/Petition #: ---
Census Tract 60110 Subdivision Monticello
Section --- Area --- Lot 3
Tax Map --- Parcel --- Grid ---
Zoning --- Map Coordinates --- Lot size ---

Property Owner's Name D. R. Horton Custom Homes
Address 1370 Piccard Dr., St. 230
Rockville, MD 20850
City --- State --- Zip Code ---
Home Phone --- Work Phone 301 771-1144
Applicant's Name & Mailing Address, (if other than stated hereon):
Victoria Meyer
Maryland Bldg. Permits, Inc.
Phone --- Fax ---

Existing Use vacant lot
Proposed Use single fam. dwelling
Estimated Construction Cost \$ ---
Description of Work Partial w/ Sunroom
2 stories w/ 1 BR 1 RR 3 FB 1 HB
EP Sunrm (Garage 4 BR)

Contractor Company D. R. Horton Custom Homes
Contact Person ---
Address ---
City --- State --- Zip Code ---
License No. --- Phone --- Fax ---

Occupant or Tenant see owner
Contact Name ---
Address ---
City --- State --- Zip Code ---
Phone --- Fax ---

Engineer or Architect Company SEARCHMARK Eng.
Contact Person ---
Address ---
City --- State --- Zip Code ---
Phone --- Fax ---

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: _____	Water Supply: _____ Public <input type="checkbox"/> Private <input type="checkbox"/>
No. of stories: _____	Sewage Disposal: _____ Public <input type="checkbox"/> Private <input type="checkbox"/>
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 <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular <input type="checkbox"/>	Sprinkler system: N/A <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: _____ Public <input type="checkbox"/> Private <input checked="" type="checkbox"/>
1st floor: _____	Sewage Disposal: _____ Public <input type="checkbox"/> Private <input checked="" type="checkbox"/>
2nd floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: _____	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 _____	Sprinkler system: N/A <input type="checkbox"/> NFA #13D <input type="checkbox"/> NFA #13R <input type="checkbox"/> 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: _____ Dimensions: _____ Footings: _____ Roof: _____ State Certified Modular <input type="checkbox"/> Manufactured Home <input type="checkbox"/>	

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 Victoria Meyer
Maryland Bldg. Permits, Inc.
Title/Company

Print Name Victoria Meyer
Date 1/31/01

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

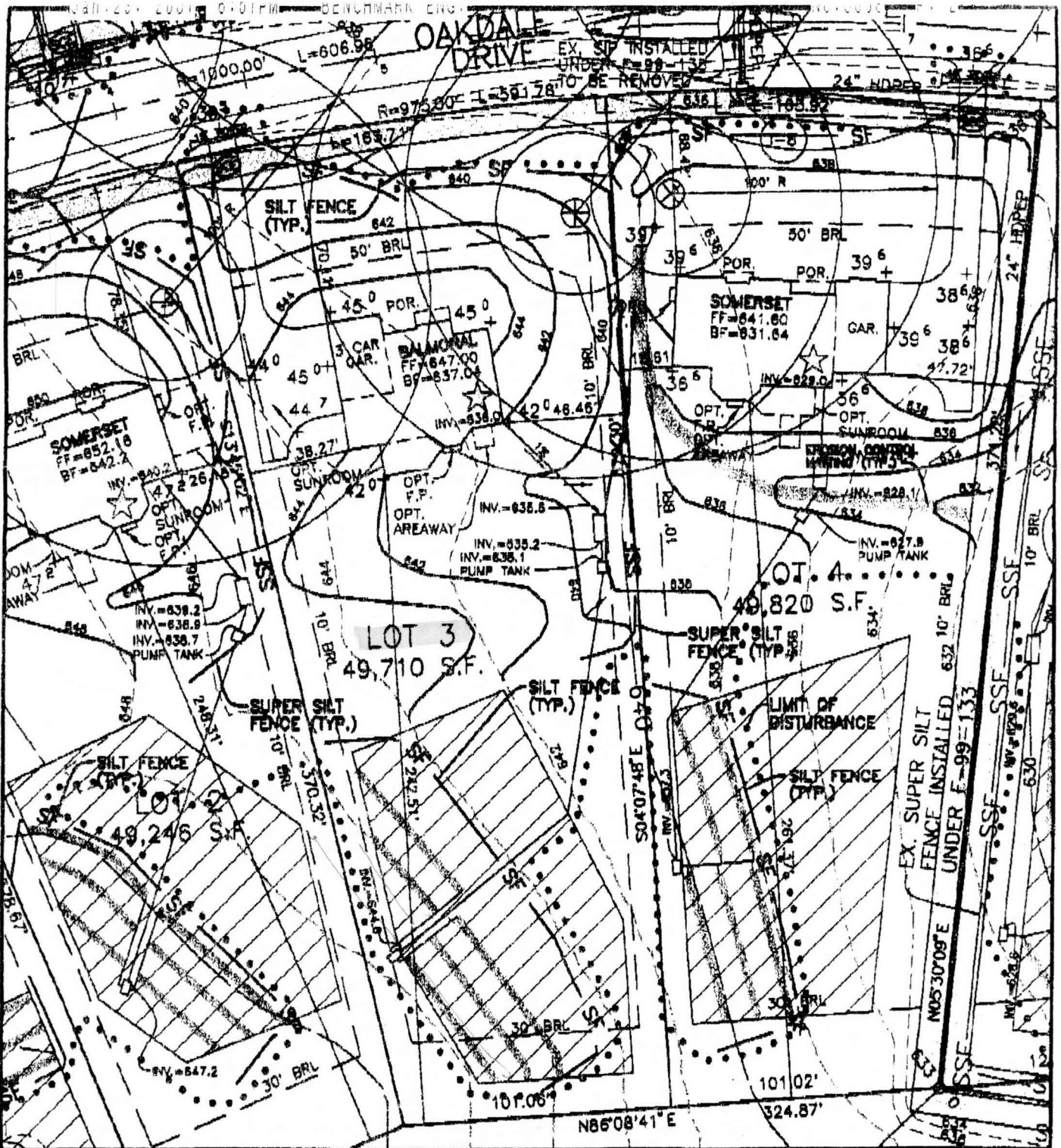
AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ	1/31/01	[Signature]
State Highways		
Building Official		
Dev. Engineering, DPZ		
Health	1/31/01	[Signature]
Fire Protection		

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 NewTown Zone _____
SDP/Red-line approval date _____ Accepted by _____

PROPERTY ID#: _____
Filing fee \$ _____
Permit fee \$ _____
Excise tax \$ _____
Sub-total paid \$ _____
Add'l permit fee \$ _____
TOTAL FEES \$ _____
Balance due \$ _____
Check # _____
Validation # _____

CONTINGENCY CONSTRUCTION START:
ONE STOP SHOP:

Distribution of Copies- White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA



FIRST FLOOR ELEVATION = 647.00
 BASEMENT ELEVATION = 637.04
 SPOT ELEVATION AT GARAGE = 645.0

SLOPE OF DRIVEWAY = 3%
 NUMBER OF RISERS IN GAR. = 3
 NUMBER OF RISERS ON LEAD WALK = 3

BENCHMARK
 ENGINEERING, INC.

8480 BALTIMORE NATIONAL PIKE • SUITE 418 • ELICOTT CITY, MD 21043
 PHONE: 410-465-8105 FAX: 410-465-8644

MONTICELLO
 LOT 3 - REVISED SEPTIC

FOURTH ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND
 SCALE: 1" = 50' DATE: 12/23/00

Approved Septic System Plan
 Howard County Health Department

Ann M. Miel 1/24/01
 Signature Date

Total linear feet of trench
 required 240 feet

Width of trench(es) 2.0 feet

Depth of trench(es) 6.0 feet

Depth of stone required below
 distribution pipe 3.0