

**HOWARD COUNTY
PERMIT APPLICATION**

PERMIT NUMBER

B. 8001138

Building Address 1945 Old Annapolis Rd
Woodbine, MD 21797
Suite/Apt. #: _____ SDP/WP/Petition #: _____
Census Tract 607001 Subdivision _____
Section _____ Area 4 Lot 1
Tax Map _____ Parcel _____ Grid _____
Zoning RE Map Coordinates 3A13 Lot size 2.00 AC

Property Owner's Name Ronald J. Miller Jr
Address 1208 Willowbrook Dr.
Pasadena City _____ State _____ Zip Code 21122
Home Phone _____ Work Phone _____
Applicant's Name & Mailing Address, (if other than stated hereon):
Phone _____ Fax _____

Existing Use _____
Proposed Use _____
Estimated Construction Cost \$ _____
Description of Work _____

Contractor Company _____
Contact Person Ronald J. Miller Jr
Address 1208 Willowbrook Dr.
City Pasadena State MD Zip Code 21122
License No. _____
Phone 410-313-1227 Fax 410-313-2200

Occupant or Tenant _____
Contact Name _____
Address _____
City _____ State _____ Zip Code 21122
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"/>
Use group: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ State Certified Modular _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
	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 <input checked="" type="checkbox"/>
1st floor: _____	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 checked="" 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.

Ronald J. Miller Jr
Applicant's Signature
Ronald J. Miller Jr
Title/Company

Ronald J. Miller Jr
Print Name
4/29/08
Date

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

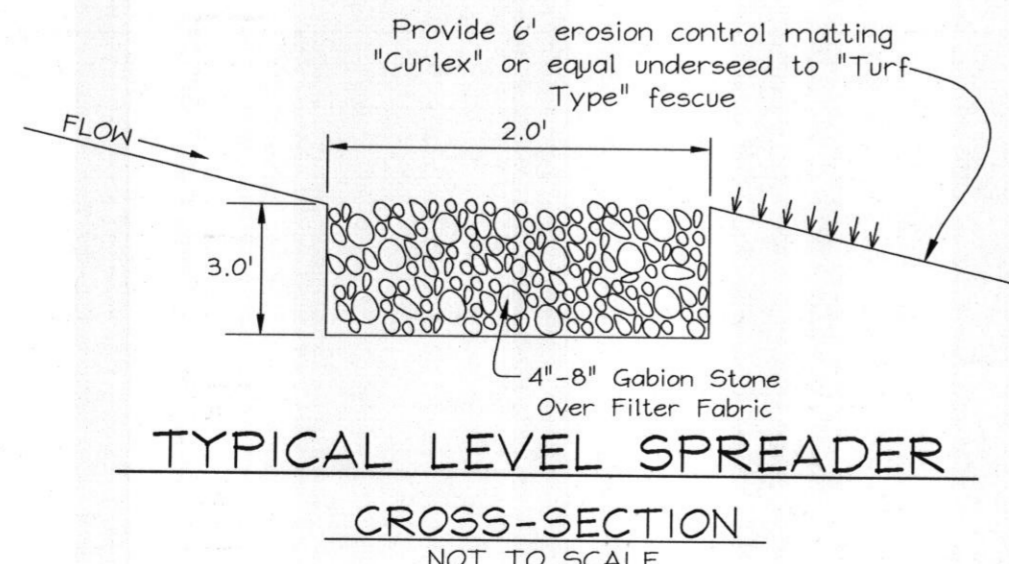
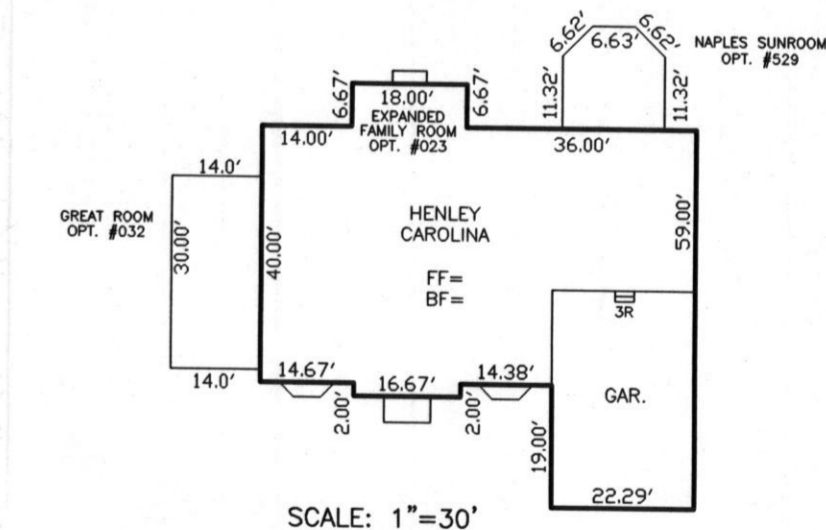
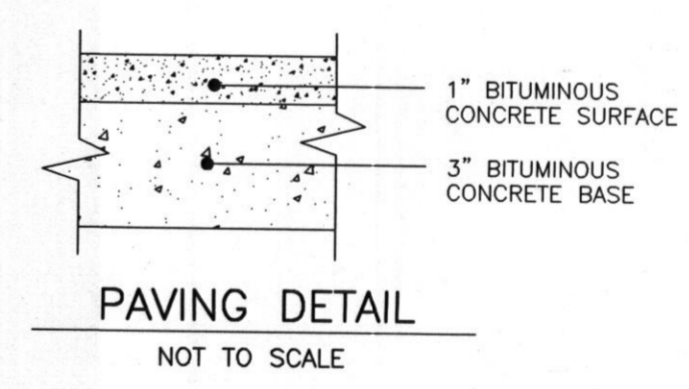
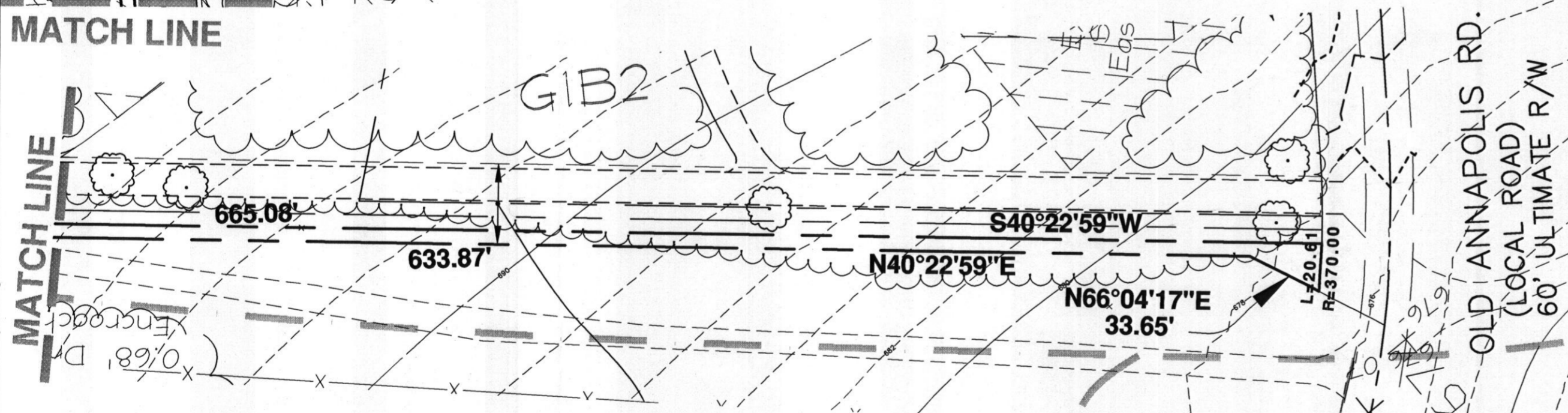
AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#:
Land Development, DPZ			Front: _____	Filing fee \$ _____
State Highways			Rear: _____	Permit fee \$ _____
Building Official			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ			Side St.: _____	Add'l per. fee \$ _____
Health	<u>4/29/08</u>	<u>[Signature]</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 # <u>6679</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>
T:\forms\PERMIT.FRM			SDP/Red-line approval date _____	
			Yellow: DED, DPZ	
			Pink: Health	
			Gold: SHA	

NOTES:

1. THE LOT SHOWN HEREON WAS RECORDED ON 04-20-2006 AS PLAT NUMBER 18207. 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 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-05-155.
7. THE EXISTING WELL (TAG NO. HO-95-0184) SHOWN ON THIS PLAN HAS BEEN FIELD LOCATED BY BENCHMARK ENGINEERING, INC. ON 4/2/08 AND IS ACCURATELY SHOWN.

LEGEND

- EXISTING CONTOURS
- EXISTING TREELINE
- EXISTING STREAM
- SOILS DELINEATION
- SOILS TYPE
- 1500 S.F. WELLBOX
- PERC HOLE
- EXISTING WELL



SEPTIC INFORMATION

INV. AT HOUSE	680.6
GRADE AT INV. AT HOUSE	685.0
INV. IN TANK	676.65
INV. OUT TANK	676.4
GROUND OVER TANK	679.5
INV. IN DIST. BOX	675.5
INV. OUT DIST. BOX	675.4
GROUND AT DIST. BOX	677.0

BENCHMARK
ENGINEERS LAND SURVEYORS PLANNERS
ENGINEERING, INC.

8480 BALTIMORE NATIONAL PIKE SUITE 418
ELLCOTT CITY, MARYLAND 21043
PHONE: 410-465-6105 FAX: 410-465-6644
www.bei-civilengineering.com

UILDER: RICK MILLER
1208 WILLOWBROOK DRIVE
PASADENA, MARYLAND 21122
1-443-336-1027

SARTORIO PROPERTY PERMIT PLAN
LOT 1
1945 OLD ANNAPOLIS ROAD

TAX MAP: 7 GRID: 21 PARCEL: 536
ELECTION DISTRICT NO. 4
HOWARD COUNTY, MARYLAND
PLAT No. 18207

HOUSE TYPE: HENLEY CAROLINA

DATE: APRIL, 2008	PROJECT NO. 2131
SCALE: 1" = 50'	DRAWING 1 OF 1