

Permits: 410-313-2455
 Inspections: 410-313-1810
 Automated Line: 410-313-3800

Heaven
 B11000248

Howard County Building/Fire Permit Application
 Department of Inspections, Licenses & Permits
 3430 Court House Drive
 Ellicott City, MD 21043

Permit Number:

B12001917

Building Address: 14127 Patterson Farm Ct Glenelg
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: Hopkins Choice
 Section: _____ Area: 2 Lot: 24
 Tax Map: 21 Parcel: 111 Grid: 12
 Zoning: _____ Map Coordinates: _____ Lot Size: 1.62

Existing Use: SFD
 Proposed Use: SFD w/ propane tank
 Estimated Construction Cost: \$ 8000
 Description of Work:
install 1000 gal underground propane tank

Occupant or Tenant: _____
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: owner
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Property Owner's Name: Toll MD II Limited partnership
 Address: 19775 Belmont Executive Plz
 City: Ashburn State: VA Zip Code: 20147
 Home Phone: _____ Work Phone: _____
 Applicant's Name & Mailing Address, (If other than stated herein):
JEREMY CLARY PO Box 1253
Eldersburg md 21754
 Phone: 443-310-1229 Fax: _____
 Email: JEREMY@AppliedAndApproved.com

Contractor Company: Valley National Gas
 Contact Person: William Grewig
 Address: 7201 Monticello Rd
 City: Jessup State: md Zip Code: 20794
 License No.: 07793
 Phone: 410-799-1114 Fax: _____
 Email: _____

Engineer/Architect Company: _____
 Responsible Design Prof.: _____
 Address: Contractor
 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
Roadside Tree Project Permit #	No. of Heads:

BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics	Utilities
<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>
Depth Width	<input type="checkbox"/> Public
1 st floor:	<input checked="" type="checkbox"/> Private
2 nd floor:	<u>Sewage Disposal</u>
Basement:	<input type="checkbox"/> Public
<input type="checkbox"/> Finished Basement	<input checked="" type="checkbox"/> Private
<input type="checkbox"/> Unfinished Basement	Electric: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Crawl Space	Gas: <input type="checkbox"/> Yes <input checked="" 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 checked="" type="checkbox"/> No
<input type="checkbox"/> State Certified Modular	Roadside Tree Project Permit #
<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: [Signature]
 Email Address: Jeremy@AppliedAndApproved.com
 Title/Company: permit

Print Name: Jeremy Clary
 Date: 6/4/12

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>6/2/12</u>	<u>[Signature]</u>
Fire Protection		

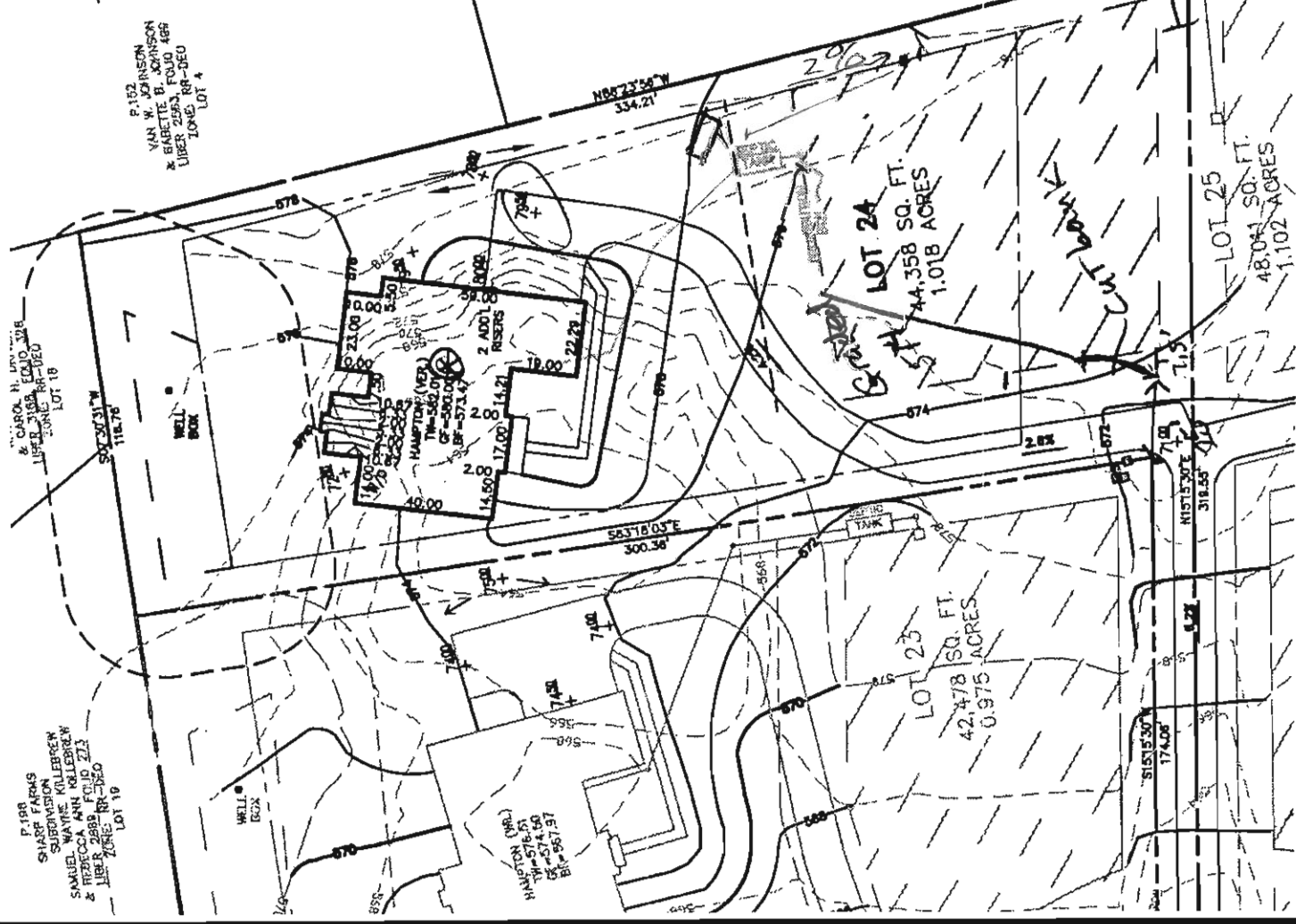
Is Sediment Control approval required for issuance? Yes No
 CONTINGENCY CONSTRUCTION START
 ONE STOP SHOP

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: _____
 SUIP/Red-line approval date: _____

Filing Fee	\$
Permit Fee	\$ <u>100</u>
Tech Fee	\$ <u>10</u>
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$ <u>110</u>
Balance Due	\$ <u>0</u>

check 2914



P.198
SHARP FARMS
SUBDIVISION
SAMUEL WAYNE KILBREW
& REBECCA ANN KILBREW
LIBER 2883, P.100, 213
ZONE: RR-3EO
LOT 19

P.192
VAN W. JOHNSON
& BARBETTE B. JOHNSON
LIBER 2593, P.100, 466
ZONE: RR-3EO
LOT 4

P.183
BRUCE R. KENDALL
& VALERIE L. KENDALL
LIBER 4185, P.100, 616
ZONE: RR-3EO
LOT 5

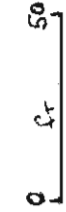
P.198
SHARP FARMS
SUBDIVISION
SAMUEL WAYNE KILBREW
& REBECCA ANN KILBREW
LIBER 2883, P.100, 213
ZONE: RR-3EO
LOT 19

ALL WELLS AND SEPTIC SYSTEMS LOCATED WITHIN THE PROPERTY BOUNDARIES AND 200' DOWN GRADATION FROM ANY WELLS AND/OR SEPTIC SYSTEMS HAVE BEEN RECORDED ON THE LOT SHOWN HEREON WAS RECORDED ON THE PLAN FOR HOPKINS CHOICE - PHASE I, PLAT No. 17900 TO THIS PLAT FOR ANY RESTRICTIONS AND/OR EXISTING TOPOGRAPHY IS TAKEN FROM A FIELD SURVEY WITH 2 - FOOT CONTOUR INTERVALS PROVIDED BY CONSULTANTS, PERFORMED ON OCTOBER 14, 2003. THE EXISTING WELL(S) SHOWN ON THIS PLAN (IC THE ATTACHED WELL TAG NUMBER HO-94-4108) FIELD LOCATED BY ESE CONSULTANTS, INC. - PROFESSIONAL LAND SURVEYOR(S), AND IS ACCURATELY SHOWN AS SHOWN ON THIS PLAN (IC THE ATTACHED WELL TAG NUMBER HO-94-4108) E & S CONTROLS PER PLAN GP 10-74 DRIVEWAY CULVERT NOT REQUIRED ON THIS LOT SWM FOR THIS LOT IS ADDRESSED BY THE APPLICANT'S BUILDING SETBACKS (B.R.L.'s) SHOWN HEREON PROVIDED DEVELOPMENT PLAN SETBACK DISTANCES SHOWN AS "±" HAVE AN ACCURACY OF ±0.1' FOOT.

INV. @ HOUSE	474.5
GROUND @ INV. @ HOUSE	579.5
INV. IN TANK	572.9
INV. OUT TANK	572.6
TOP OF TANK	573.6
GROUND OVER TANK	576.6
INV. IN DIST. BOX	572.3
INV. OUT DIST. BOX	572.0
GROUND @ BOX	576.0

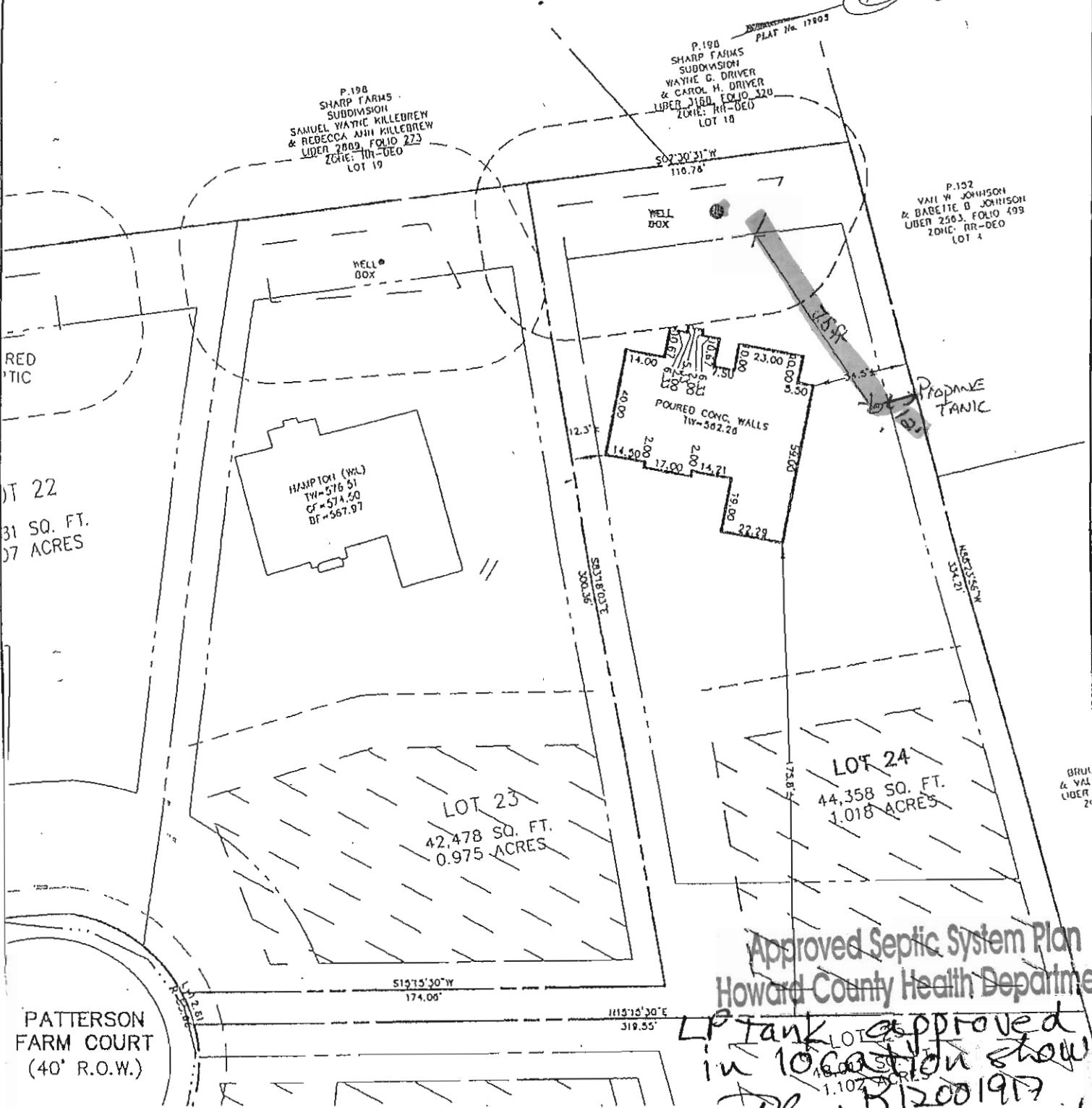
BASEMENT NOT SERVICED VIA GRAVITY SEWER.

ADDRESS:



APPROVED:
FOR PRIVATE WATER
HOWARD COUNTY HEALTH
COUNTY HEALTH

PROFESSIONAL CERTIFICATION: I HEREBY CERTIFY THAT THESE DOCUMENTS WERE PREPARED BY ME OR UNDER MY RESPONSIBLE CHARGE, AND THAT I AM A DULY LICENSED PROFESSIONAL LAND SURVEYOR UNDER THE LAWS OF THE STATE OF MARYLAND, LICENSE NO. 21328, EXPIRATION DATE 1/8/13.



Approved Septic System Plan
Howard County Health Department

LP Tank approved in location shown
B. B. B. 12001917
Signature Date 6/22/12

ADDRESS: 14127 PATTERSON FARM COURT
GLENELG, MD 21737

SURVEYOR'S CERTIFICATE

THIS WALLCHECK WAS PREPARED WITHOUT THE BENEFIT OF A CURRENT TITLE REPORT. THIS PROPERTY IS SUBJECT TO ANY AND ALL EASEMENTS, RIGHT-OF-WAYS, 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. THIS IS NOT A "LOCATION DRAWING" AND IS NOT TO BE USED FOR SETTLEMENT PURPOSES.

SIGNATURE: MICHAEL JOE BOYCE MD. LIC NO. 21328 DATE

WALL CHECK
LOT #24
HOPKINS CHOICE
LIBER 12186, FOLIO 256
PLAT No. 17903
FOURTH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND



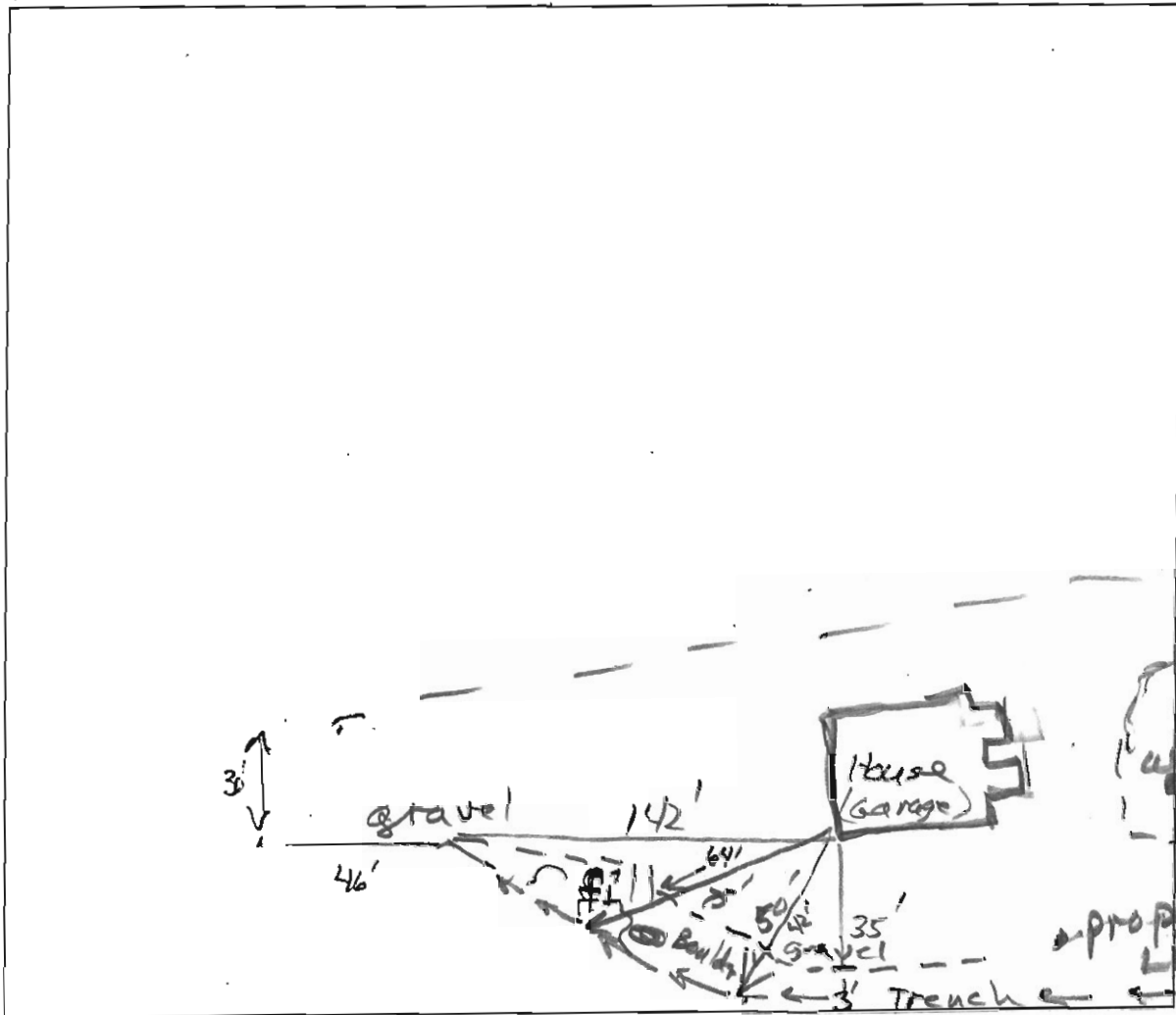
ESE Consultants Inc.
7164 Columbia Gateway Dr.
Suite 203
Columbia, MD 21046
TEL: 410-872-9105
FAX: 410-872-4870

DATE: 04/19/12 SCALE: 1"=50' FILE: 2975_LOT 24 WC
CHK'D: MJB JOB#: 2975 DRAWN: WST

SITE INSPECTION SHEET

OWNER: Toll Bros PHONE #: _____
ADDRESS: 14127 Patterson Farm Ct CONTRACTOR: _____
SUBDIVISION: Hopkins Choice LOT: 24 WELL TAG #: _____
PROPOSAL: (Colonel Estates) COUNTY #: _____
Field Review for LP Tank

LOCATION DIAGRAM



COMMENTS: Shallow (1') Trench dissects septic reserve
Fill about 1'± w/ boulders on septic reserve
between driveway & house

DATE: 6/20/2012 INSPECTOR: R Buckner

B11000248

Building Address: 14127 Patterson Farm Court

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

Census Tract: _____ Subdivision: _____

Section: _____ Area: _____ Lot: 24

Tax Map: _____ Parcel: _____ Grid: _____

Zoning: _____ Map Coordinates: _____ Lot Size: _____

Property Owner's Name: Full Name

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: 410 489-7407 Work Phone: _____

Applicant's Name & Mailing Address, (If other than stated herein): _____

Phone: _____ Fax: _____

Email: _____

Existing Use: Vacant Lot

Proposed Use: Single Family Dwelling

Estimated Construction Cost: \$ 150,000

Description of Work: Full Build of Single Family Dwelling

Occupant or Tenant: _____

Was tenant space previously occupied? Yes No

Contact Name: Michael Martin

Address: 14127 Patterson Farm Court

City: Ellicott City State: MD Zip Code: 21117

Phone: 410-489-7407 Fax: 410-489-7407

Email: Michael.Martin@TowersPennington.com

Contractor Company: Full Name

Contact Person: _____

Address: _____

City: _____ State: MD Zip Code: _____

License No.: _____

Phone: _____ Fax: _____

Email: _____

Engineer/Architect Company: ESF

Responsible Design Prof.: Mike Joyce

Address: _____

City: _____ State: MD Zip Code: 21117

Phone: 410-489-7407 Fax: 410-489-7407

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 type="checkbox"/> Partial
	<input type="checkbox"/> Other Suppression
	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: <u>41.6</u> <u>60</u>	<input checked="" type="checkbox"/> Private	
2 nd floor: <u>41.2</u> <u>60</u>	<u>Sewage Disposal</u>	
Basement: <u>41.6</u> <u>60</u>	<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Finished Basement	<input checked="" 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: <u>4</u>	<input checked="" 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 checked="" type="checkbox"/> Propane Gas	
No. of 2 BR units:		
No. of 3 BR units:		
Other Structure:		
Dimensions:		
Footings:		
Roof:		
<input type="checkbox"/> State Certified Modular		
<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: Michael Martin

Email Address: _____ Date: 2/9/11

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>2/9/11</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</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$

Toll Brothers Inc -Glenelg Estates/Hopkins Choice
14116 Patterson Farm Court
Glenelg Maryland 21737

March 16, 2012

Ms. Avis L. Corbin-
Chief of Licenses and Permits Division
3430 Court House Drive
Ellicott City Maryland 21043

RECEIVED

MAR 16 2012

LICENSES & PERMITS
DIVISION

Re: Permit Revision
B11000248- Permit Number
14127 Patterson Farm Ct.
Hopkins Choice Lot #24

Dear Ms. Corbin

Thank you for taking the time to review the attached documentation. The reason for the letter is that the homeowner re-selected their house type. Included in the documentation are a revised blue prints, revised site plan, and an amendment check

Please accept my apologies for the trouble. Please contact me with any questions or concerns of any kind at 410-320-0223 or mmartin3@tollbrothersinc.com.

Sincerely,



Michael Martin
TOLL BROTHERS, INC.
Project Manager

CC: zoning
DED
Heath



50
 1" = 50'
 PLAT NO. 17903

Approved Septic System Plan
 Howard County Health Department

4 Bed room SFD approved as shown
 4 Bed room SFD should be 577
 11000 248 Revision 4/6/12
 S.D. elevation should be 577
 Date

Signature: *S.H.S. Seb*
 Sleeve

ALL WELLS AND SEPTIC SYSTEMS LOCATED WITHIN 100' OF THE PROPERTY BOUNDARIES AND 200' DOWN GRADIENT C ANY WELLS AND/OR SEPTIC SYSTEMS HAVE BEEN SHOWN THE LOT SHOWN HEREON WAS RECORDED ON THE PLAT FOR HOPKINS CHOICE- PHASE I, PLAT No. 17903. REFER TO THIS PLAT FOR ANY RESTRICTIONS AND/OR PROVISIONS

EXISTING TOPOGRAPHY IS TAKEN FROM A FIELD RUN TOP SURVEY WITH 2 - FOOT CONTOUR INTERVALS PREPARED CONSULTANTS, PERFORMED ON OCTOBER 14, 2009.

THE EXISTING WELL(S) SHOWN ON THIS PLAN (IDENTIFIED THE ATTACHED WELL TAG NUMBER HO-94-4108) HAS BE FIELD LOCATED BY ESE CONSULTANTS, INC.- PROFESSION LAND SURVEYOR(S), AND IS ACCURATELY SHOWN.

E & S CONTROLS PER PLAN GP 10-74 DRIVEWAY CULVERT NOT REQUIRED ON THIS LOT

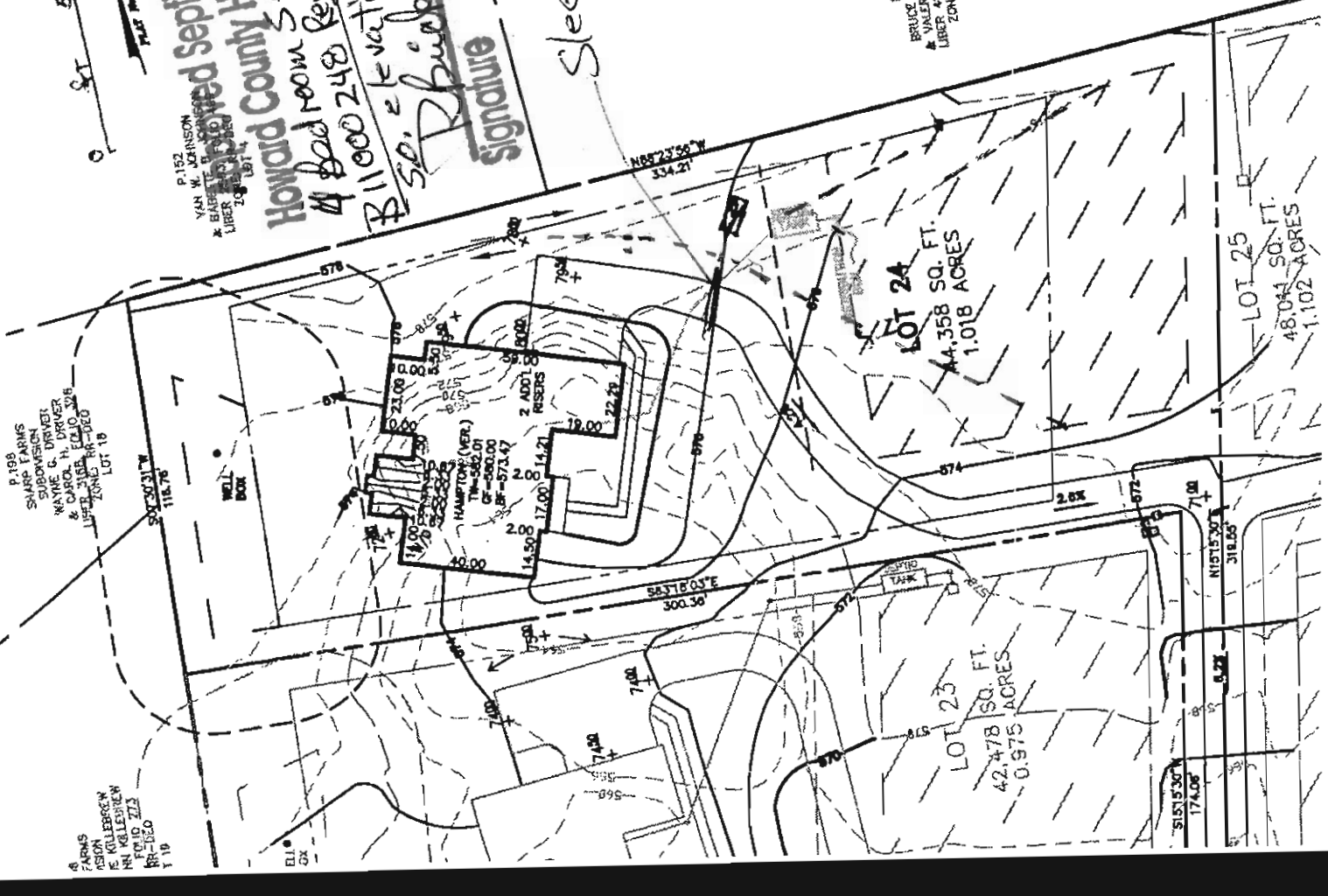
SWM FOR THIS LOT IS ADDRESSED BY THE APPROVED PLU BUILDING SETBACKS (B.R.L.'s) SHOWN HEREON PER SITE DEVELOPEMENT PLAN SETBACK DISTANCES SHOWN HEREON AS "±" HAVE AN ACCURACY OF ±0.1' FOOT.

INV. @ HOUSE	474.5	577.7
GROUND @ INV. @ HOUSE	579.5	
INV. IN TANK	572.9	574.7
INV. OUT TANK	572.6	
TOP OF TANK	573.6	
GROUND OVER TANK	576.6	578
INV. IN DIST. BOX	572.3	
INV. OUT DIST. BOX	572.0	574
GROUND @ BOX	576.0	577

BASEMENT NOT SERVICED VIA GRAVITY SEWER.

ADDRESS: 14127 PAT GLENELG, MD

APPROVED:
 FOR PRIVATE WATER & PRIVA
 HOWARD COUNTY HEALTH DE
 COUNTY HEALTH OFFICER



P.153
 BRUCE R. KENDALL
 VALENE L. FORD 518
 LIBER 4185, P.150 518
 ZONE: R-1-150
 LOT 6