

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

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

Permit Number:

B13001227

Building Address: 14577 Edgewoods Way
Greenbelt, MD 21737

Suite/Apt. # _____ SDP/WP/BA #: G07000150

Census Tract: _____ Subdivision: Edgewood Farm

Section: _____ Area: _____ Lot: 42

Tax Map: _____ Parcel: _____ Grid: _____

Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: Vacant lot

Proposed Use: Residential Home

Estimated Construction Cost: \$ 550,000

Description of Work: Hulley Contract, Versailles
2-story, 3 car garage

Occupant or Tenant: _____

Was tenant space previously occupied? Yes No

Contact Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

Property Owner's Name: Toll MD VLP

Address: 14540 Edgewoods Way

City: Greenbelt State: MD Zip Code: 21737

Home Phone: _____ Work Phone: 410 489 2275

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

Phone: _____ Fax: _____

Email: _____

Contractor Company: Toll MD VLP

Contact Person: Nathan Brandenburg

Address: 14540 Edgewoods Way

City: Greenbelt State: MD Zip Code: 21737

License No.: 3630

Phone: 410 489 2275 Fax: _____

Email: Nbrandenburg@tollbrothersinc.com

Engineer/Architect Company: ESE

Responsible Design Prof.: Mike Boyce

Address: 7164 Columbia Gateway Dr #230

City: Columbia State: MD Zip Code: 21036

Phone: 410 365 4175 Fax: _____

Email: Mboyce@ESEENG.com

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
	Sewage Disposal
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
Construction type:	Heating System
<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	Sprinkler System:
<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: <u>81'</u> <u>82'</u>	<input checked="" type="checkbox"/> Private
2 nd floor: <u>81'</u> <u>82'</u>	Sewage Disposal
Basement: <u>81'</u> <u>82'</u>	<input type="checkbox"/> Public
<input type="checkbox"/> Finished Basement	<input checked="" type="checkbox"/> Private
<input checked="" type="checkbox"/> Unfinished Basement	Electric: <input checked="" 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	Heating System
No. of Bedrooms: <u>4</u>	<input checked="" type="checkbox"/> Electric
	<input type="checkbox"/> Oil
Multi-family Dwelling	<input type="checkbox"/> Natural Gas
No. of efficiency units: _____	<input checked="" type="checkbox"/> Propane Gas
No. of 1 BR units: _____	
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: Nathan Brandenburg

Email Address: Nbrandenburg@tollbrothersinc.com

Title/Company: Toll Brothers

Print Name: Nathan Brandenburg

Date: 4/4/13

RECEIVED
 APR 04 2013
 LICENSES & PERMITS DIVISION

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
 PLEASE WRITE NEATLY & LEGIBLY
 FOR OFFICE USE ONLY

AGENCY	DATE	SIGNATURE OF APPROVAL
<input checked="" type="checkbox"/> State Highways		
<input checked="" type="checkbox"/> Building Officials		
<input checked="" type="checkbox"/> PSZA (Zoning)		
<input checked="" type="checkbox"/> PSZA (Engineering)		
<input checked="" type="checkbox"/> Health		<u>Dana Bernhart</u>
<input type="checkbox"/> Fire Protection		

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

DPZ SETBACK INFORMATION

Front: _____

Rear: _____

Side: _____

Slip 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	\$ 100.00
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$ 50.00
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$

CK #09261895

UNSATURATED WATER TABLE...
 RE: PRIVATE WATER & PRIVATE SEWAGE SYSTEMS...
 AT ENVIRONMENT FOR INDIVIDUAL TRACTS...
 AREA SHALL BEING...
 SEWERAGE SYSTEM...
 AUTHORITY TO TRANSFER...
 REPRODUCTION OF A RELATED SEWAGE TREATMENT SHALL NOT BE NECESSARY

ANY CHANGES TO A PRIVATE SEWAGE TREATMENT SHALL REQUIRE A REVISED PERCOLATION CERTIFICATION PLAN.

ALL WELLS AND SEPTIC SYSTEMS LOCATED WITHIN 100' OF THE PROPERTY BOUNDARIES AND 200' DOWN GRADIENT OF ANY WELLS AND/OR SEPTIC SYSTEMS HAVE BEEN SHOWN.

THE LOT SHOWN HEREON WAS RECORDED ON THE PLAT FOR EDGEWOOD FARMS, PLAT No. 19268. REFER TO THIS PLAT FOR ANY RESTRICTIONS AND/OR PROVISIONS.

EXISTING TOPOGRAPHY IS TAKEN FROM 1 05-108 PLANS
 DRIVEWAY CULVERT IS NOT REQUIRED FOR THIS LOT

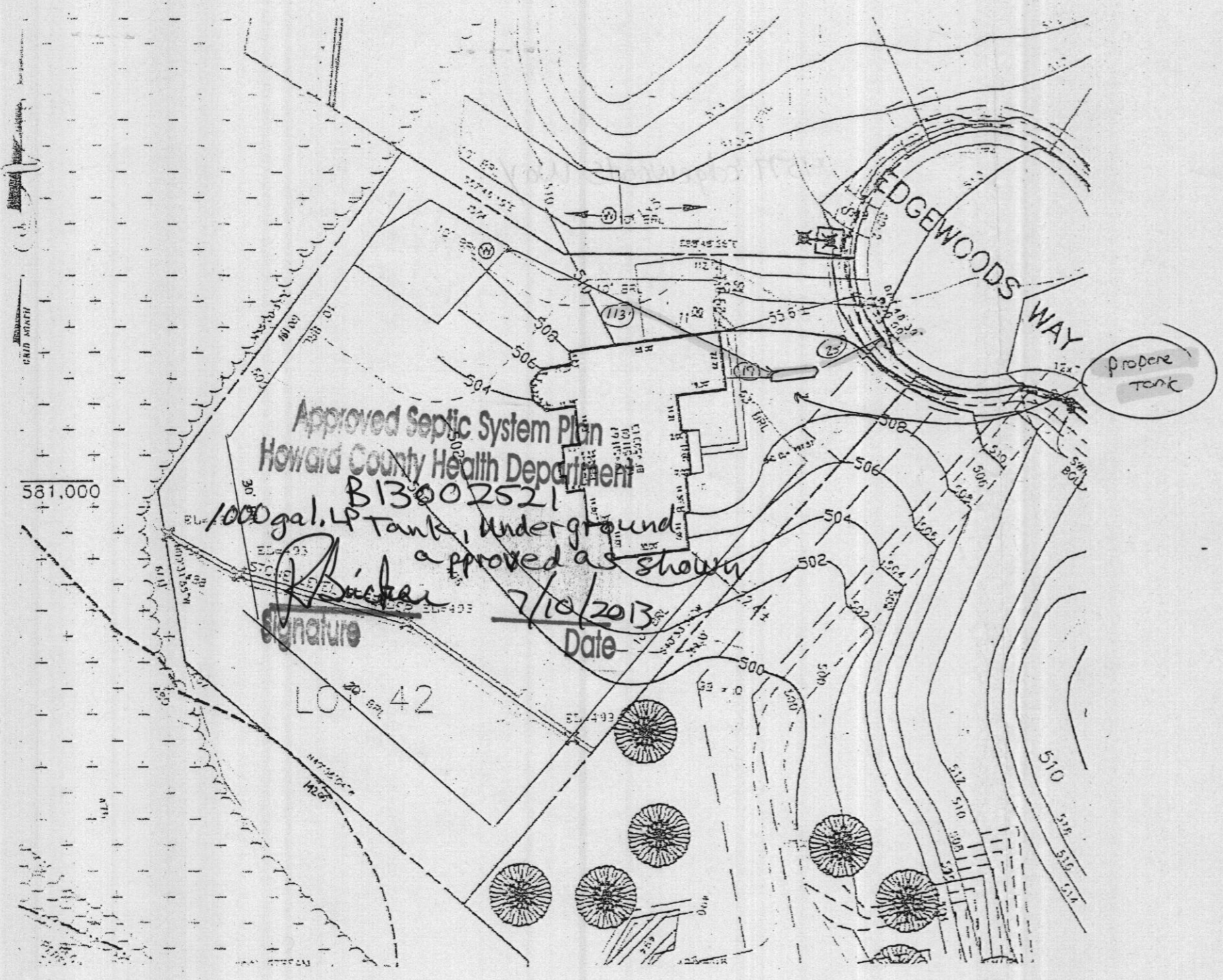
SWM FOR THIS LOT IS MANAGED PER PLAN F 05-108 E&S CONTROLS PER PLAN F 05-108
 BUILDING SETBACKS (B.R.L.'s) SHOWN HEREON PER SITE DEVELOPEMENT PLAN SETBACK DISTANCES SHOWN HEREON AS "E" HAVE AN ACCURACY OF ±0.1' FOOT

THE EXISTING WELL(S) SHOWN ON THIS PLAN (IDENTIFIED WITH THE ATTACHED WELL TAG NUMBER - 91-219) HAS BEEN FIELD LOCATED BY ESE CONSULTANTS, INC. - PROFESSIONAL LAND SURVEYOR(S), AND IS ACCURATELY SHOWN.

THIS LOT ON SHARED SEPTIC WITH GRINDER PUMP ELEVATION = 497.87

APPROVED FOR PRIVATE WATER & PRIVATE SEWAGE SYSTEMS
 HOWARD COUNTY HEALTH DEPARTMENT

COUNTY HEALTH OFFICER DATE



Approved Septic System Plan
 Howard County Health Department
 B13002521
 1000 gal. 4 Tank, Underground
 approved as shown
 Signature: [Signature]
 Date: 7/10/2013

LOT #42

ADDRESS 14577 EDGEWOODS WAY
 GLENELG, MD 21737

TRP: HENLEY L. WESSMAN, ESQ.
 HALL OUT BASEMENT
 BEDROOM ABOVE ELITE
 CONSERVATORY ELITE
 HALLS ELITE
 ADD 1' TO BASEMENT

OPTION No. 017
 OPTION No. 021
 OPTION No. 022
 OPTION No. 023
 OPTION No. 070

PLOT PLAN
 LOT #42
 EDGEWOOD FARM
 LIBER 10677, FOLIO 46
 PLAT No. 19268
 FOURTH ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND



Land Planning
 Engineering
 Land Surveying

ESE Consultants, Inc.
 7164 Columbia Gateway Dr.
 Suite 102
 Columbia, MD 21046
 TEL 410-373-9105
 FAX 410-372-4370

DATE: 03/21/13 SCALE: 1"=50'
 CHK'D: MJB JOB#: 1498 FILE: LOT 40 PP
 DRAWN: MJB



Building Permit Application

Howard County Maryland
Department of Inspections, Licenses and Permits
3430 Court House Drive
Permits: 410-313-2455
www.howardcountymd.gov

Date Received: 6-24-13

Permit No.: B13002521

Building Address: 14577 Edgewoods way
 City: Glendeg State: md Zip Code: 21737
 Suite/Apt. #: _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: Edgewood Farm
 Section: _____ Area: 2 Lot: 42
 Tax Map: 21 Parcel: 90 Grid: 22
 Zoning: _____ Map Coordinates: _____ Lot Size: 1.09 @

Property Owner's Name: Toll MD V Limited Partnership
 Address: 7164 Columbia Gateway Dr # 230
 City: Columbia State: md Zip Code: 21046
 Phone: _____ Fax: _____
 Email: _____

Existing Use: SFD
 Proposed Use: SFD w/ propane tank
 Estimated Construction Cost: \$ 8000
 Description of Work:
Install 1000 gal in-ground propane
Tank
 Occupant or Tenant: _____
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: owner
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Applicant's Name & Mailing Address, (if other than stated herein)
 Applicant's Name: JEREMY CLANCY
 Address: PO Box 1257
 City: Eldersburg State: md Zip Code: 21784
 Phone: 443-340-1229 Fax: _____
 Email: Jeremy@AppliedAndApproved.com

Contractor Company: Valley National Gas
 Contact Person: William Gerwig
 Address: 7201 Montevideo Rd
 City: Jessup State: md Zip Code: 20794
 License No.: 67793
 Phone: 410-799-1114 Fax: _____
 Email: _____

Engineer/Architect Company: _____
 Responsible Design Prof.: _____
 Address: Contractor
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Commercial Building Characteristics	Residential Building Characteristics	
Height:	<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories:	<u>Depth</u>	<u>Width</u>
Gross area, sq. ft./floor:	1 st floor:	
	2 nd floor:	
Area of construction (sq. ft.):	Basement:	
	<input type="checkbox"/> Finished Basement	
Use group:	<input type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
Construction type:	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:	
<input type="checkbox"/> Structural Steel	<u>Multi-family Dwelling</u>	
<input type="checkbox"/> Masonry	No. of efficiency units:	
<input type="checkbox"/> Wood Frame	No. of 1 BR units:	
<input type="checkbox"/> State Certified Modular	No. of 2 BR units:	
	No. of 3 BR units:	
	Other Structure:	
	Dimensions:	
<input checked="" type="checkbox"/> Roadside Tree Project Permit	Footings:	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Roof:	
<input checked="" type="checkbox"/> Roadside Tree Project Permit	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Utilities	
Water Supply	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Sewage Disposal	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Electric: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Gas: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Heating System	
<input type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
Sprinkler System:	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number: _____	
Building Shell Permit Number: <u>B13001227</u>	

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] Print Name: JEREMY CLANCY
 Email Address: Jeremy@AppliedAndApproved.com Date: 6/24/13
 Title/Company: permits

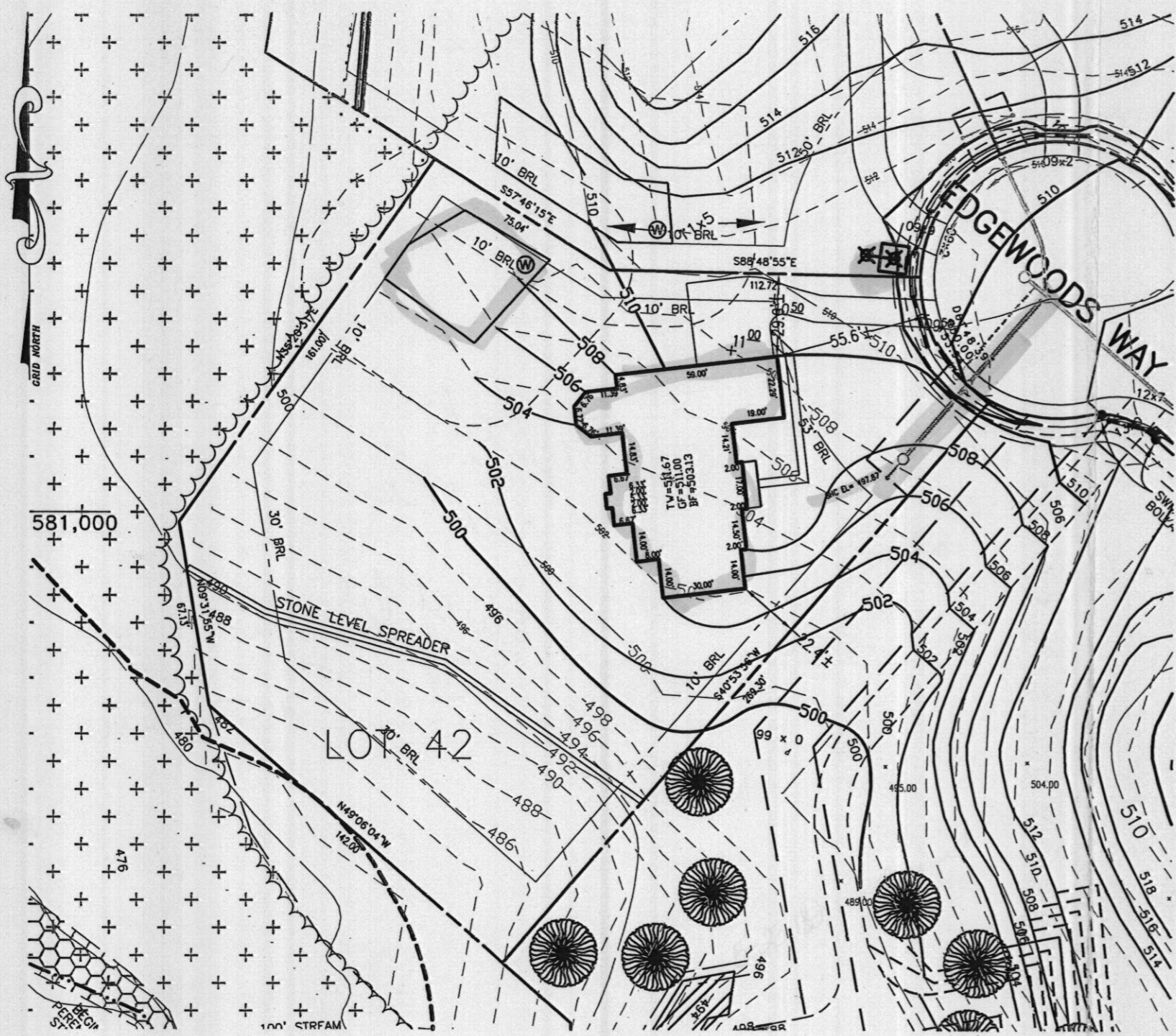
Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
 PLEASE WRITE NEATLY & LEGIBLY
 FOR OFFICE USE ONLY


AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health		<u>7/10/13 R. Becker</u>

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

DPZ SETBACK INFORMATION	
Front:	
Rear:	
Side:	
Side St.:	
All minimum setbacks met?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Lot Coverage for New Town Zone:	
SDP/Red-line approval date:	

Filing Fee	\$
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	# <u>3502</u>



 THIS AREA DESIGNATES A PRIVATE SEWAGE DISPOSAL AREA OF AT LEAST 10,000 SQ. FT. AS REQUIRED BY THE MARYLAND DEPARTMENT OF ENVIRONMENT FOR INDIVIDUAL SEWAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED. THIS SEWAGE DISPOSAL AREA SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE AUTHORITY TO GRANT ADJUSTMENTS TO THE PRIVATE SEWAGE EASEMENT. RECORDATION OF A REVISED SEWAGE EASEMENT SHALL NOT BE NECESSARY.

ANY CHANGES TO A PRIVATE SEWAGE EASEMENT SHALL REQUIRE A REVISED PERCOLATION CERTIFICATION PLAN.

ALL WELLS AND SEPTIC SYSTEMS LOCATED WITHIN 100' OF THE PROPERTY BOUNDARIES AND 200' DOWN GRADIENT OF ANY WELLS AND/OR SEPTIC SYSTEMS HAVE BEEN SHOWN.

THE LOT SHOWN HEREON WAS RECORDED ON THE PLAT FOR EDGEWOOD FARMS, PLAT No. 19268. REFER TO THIS PLAT FOR ANY RESTRICTIONS AND/OR PROVISIONS.

EXISTING TOPOGRAPHY IS TAKEN FROM f 06-108 PLANS
DRIVEWAY CULVERT IS NOT REQUIRED FOR THIS LOT

SWM FOR THIS LOT IS MANAGED PER PLAN F 06-108 E&S CONTROLS PER PLAN F 06-108
BUILDING SETBACKS (B.R.L.'s) SHOWN HEREON PER SITE DEVELOPEMENT PLAN SETBACK DISTANCES SHOWN HEREON AS "±" HAVE AN ACCURACY OF ±0.1' FOOT.

THE EXISTING WELL(S) SHOWN ON THIS PLAN (IDENTIFIED WITH THE ATTACHED WELL TAG NUMBER HO 95-0796 HAS BEEN FIELD LOCATED BY ESE CONSULTANTS, INC.- PROFESSIONAL LAND SURVEYOR(S), AND IS ACCURATELY SHOWN.

THIS LOT ON SHARED SEPTIC WITH GRINDER PUMP ELEVATION =497.87

Approved Septic System Plan
Howard County Health Department
Carla Bernard 5-23-13
Signature Date
B13001227
4BR Only

APPROVED:
FOR PRIVATE WATER & PRIVATE SEWAGE SYSTEMS
HOWARD COUNTY HEALTH DEPARTMENT

COUNTY HEALTH OFFICER _____ DATE _____

ADDRESS: 14577 EDGEWOODS WAY
GLENELG, MD 21737

TYPE: HENLEY (VERSAILLES)-
WALK OUT BASEMENT
BEDROOM ABOVE ELITE
CONSERVATORY ELITE
NAPLES SUNROOM
ADD 1' TO BASEMENT

OPTION No. 017
OPTION No. 521
OPTION No. 039
OPTION No. 529
OPTION No. 070

PLOT PLAN
LOT #42
EDGEWOOD FARM
LIBER 10677, FOLIO 461
PLAT No. 19268
FOURTH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND

ESE Land Planning
Engineering
Land Surveying

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

DATE: 03/21/13 SCALE: 1"=50' FILE: LOT 40 PP
CHK'D: MJB JOB#: 1498 DRAWN: MJB





Building Permit Application

Howard County Maryland
Department of Inspections, Licenses and Permits
3430 Court House Drive
Permits: 410-313-2455
www.howardcountymd.gov

Date Received: _____

Permit No.: _____

Building Address: 14577 Edgewoods Way
City: Glencolg State: _____ Zip Code: 21737
Suite/Apt. # _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: Edgewood Farm
Section: _____ Area: _____ Lot: 42
Tax Map: 0021 Parcel: 0090 Grid: 0022
Zoning: _____ Map Coordinates: 4812 F9 Lpt Size: _____

Property Owner's Name: Richard + Cheryl Kirby
Address: 14577 Edgewoods Way
City: Glencolg State: _____ Zip Code: 21737
Phone: 301-854-0981 Fax: _____
Email: _____

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

Applicant's Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Existing Use: SFD
Proposed Use: SFD + Pool
Estimated Construction Cost: \$ 25,000
Description of Work: Inground concrete pool 20x60 in rear yard w/48" high fence to code

Contractor Company: Maryland Pools
Contact Person: Bob Brooks
Address: 9515 Gerwig Lane
City: Columbia State: _____ Zip Code: 21046
License No.: 6694
Phone: 410-995-6600 Fax: _____
Email: _____

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

Engineer/Architect Company: _____
Responsible Design Prof.: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Commercial Building Characteristics	Residential Building Characteristics	
Height:	<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories:	Depth	Width
Gross area, sq. ft./floor:	1 st floor:	
	2 nd floor:	
Area of construction (sq. ft.):	Basement:	
	<input type="checkbox"/> Finished Basement	
Use group:	<input type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
Construction type:	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:	
<input type="checkbox"/> Structural Steel	Multi-family Dwelling	
<input type="checkbox"/> Masonry	No. of efficiency units:	
<input type="checkbox"/> Wood Frame	No. of 1 BR units:	
<input type="checkbox"/> State Certified Modular	No. of 2 BR units:	
	No. of 3 BR units:	
	Other Structure:	
	Dimensions:	
<input checked="" type="checkbox"/> Roadside Tree Project Permit	Footings:	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Roof:	
Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Utilities	
Water Supply	
<input checked="" type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Sewage Disposal	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Heating System	
<input type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
Sprinkler System:	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number:	
Building Shell Permit Number:	

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

Email Address

Date

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		

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

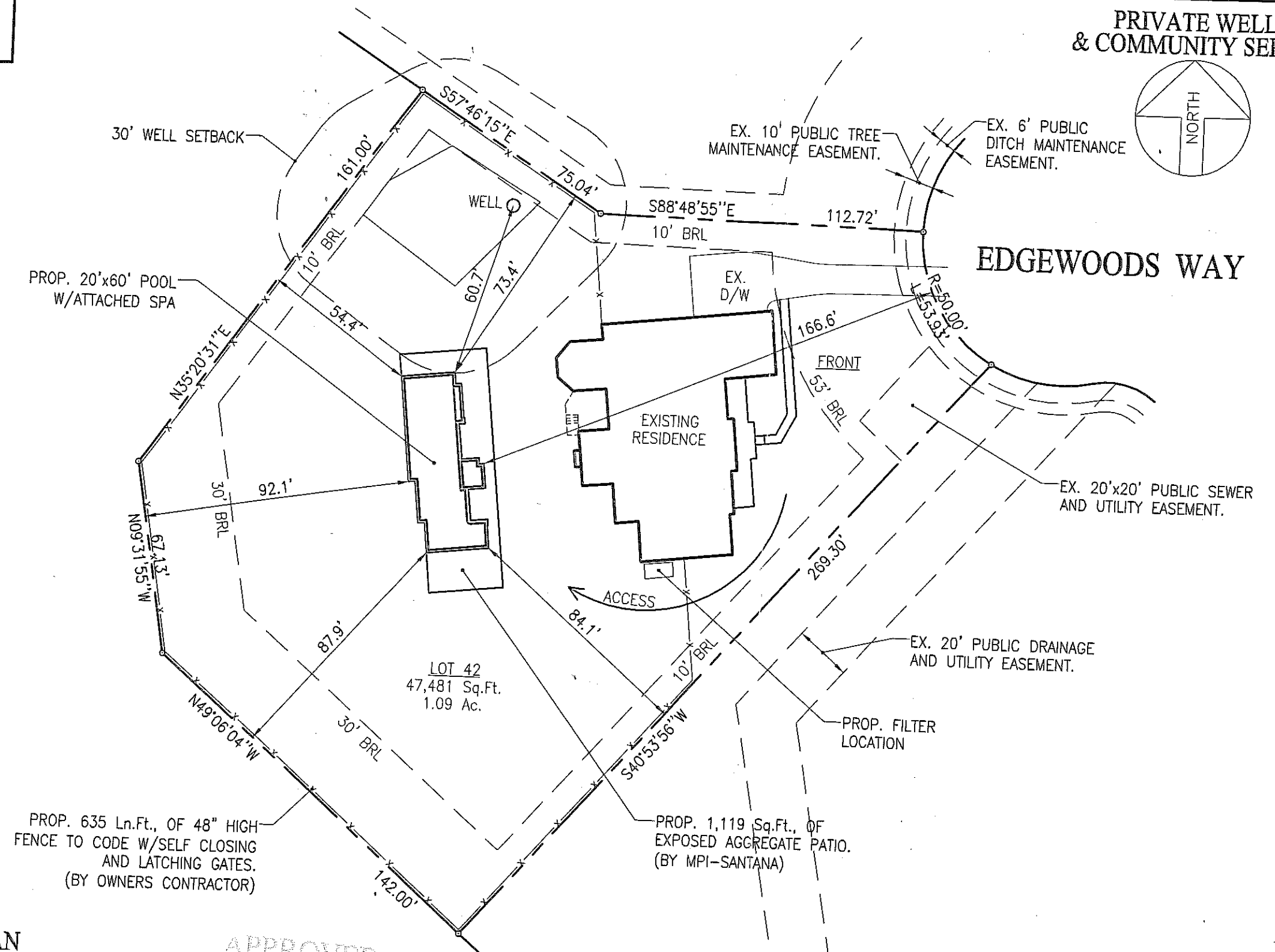
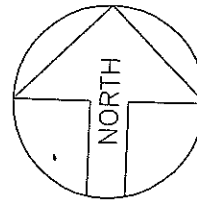
DPZ SETBACK INFORMATION	
Front:	
Rear:	
Side:	
Side St.:	
All minimum setbacks met?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Lot Coverage for New Town Zone:	
SDP/Red-line approval date:	

Filing Fee	\$
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	#

SETBACKS:

REAR PL.	10'
SIDE PL.	10'
HOUSE	0'
SEPTIC WELL	10'/20'
WELL	20'

PRIVATE WELL & COMMUNITY SEPTIC



Maryland POOLS Inc.
 9515 GER WIG LANE
 SUITE 121
 COLUMBIA, MD 21046
 410-995-6600
 800-252-SWIM
 WWW.MARYLANDPOOLS.COM

EQUIPMENT LIST

DIRT/GRADING: STAY
 SPA: 57 SF W/6 JTS, 100W LGHT & BLWR
 RAISED BEAM: 12" HIGH FACED W/STONE (31 Sq.Ft.)
 TILE: ME44
 COPING: 12" PA FULL RANGE FLAGSTONE (CUT)
 PLASTER: WHITE MARBELITE
 FILTER SYS: C&C 420 SF CART. W/VS-3050
 CLEANING SYS: PCC-2000
 TREATMENT SYS: MINERAL SPRINGS
 CONTROL SYS: EASYTOUCH 8
 HEATER: 400K BTU (PROPANE)
 LIGHTS: THREE WATTS: 500 VOLTS: 120
 LOVESEAT: (1) @ 12' (OUTSIDE)
 AQUA BENCH: (1) @ 16'
 RAIL GOODS: NONE
 DECKING: 1,119 Sq.Ft., EXPOSED AGGREGATE
 FENCE: BY OWNERS CONTRACTOR
 POOL COVER: NONE TYPE: N/A
 CHEMICALS: \$100 CHEMICAL ALLOWANCE
 OTHER ITEMS: (3) DOOR ALARMS; LENS KIT; (2) 48" S.D. UNIT; EQUIPOTENTIAL BONDING GRID; 27 Ln.Ft., OF EXPOSED AGGREGATE RISERS;
 ELECTRIC: 736 FT. (TRI-STAR)

POOL STATISTICS

SIZE/SHAPE: 20' x 60' - CUSTOM
 POOL AREA: 1,022 SPA: 57 OTHER: 24
 TOTAL AREA: 1,103
 PERIMETER: 173 SPA: 32
 GALLONAGE: 43,158 DEPTH: 3'-0" TO 8'-0"

DIRECTIONS TO SITE

DIRECTIONS: MILES: 000 MAP #
 RTE 70 WEST - EXIT #76 RTE 97 SOUTH LEFT/ROXBURY RD. LEFT/EDGEWOODS WAY - HOUSE @ END OF CUL-DE-SAC ON LEFT. 4812
 GRID
 F-9

Cheryl & Richard Kirby
 14577 Edgewoods Way
 Glenelg, Maryland 21737
 Howard County

HOME PHONE: 301-854-0481
 OFFICE PHONE:
 CELL PHONE 1: 240-593-1162 (His)
 CELL PHONE 2:

LOT: 42	SUBDIVISION NAME: EDGEWOOD FARM	DISTRICT: 04	PIN #: 372700
SITE PLAN			ZONE: ONE
SCALE:	BY:	DATE:	JOB NUMBER:
			SHEET #:

PROP. 635 Ln.Ft., OF 48" HIGH FENCE TO CODE W/SELF CLOSING AND LATCHING GATES. (BY OWNERS CONTRACTOR)

PROP. 1,119 Sq.Ft., OF EXPOSED AGGREGATE PATIO. (BY MPI-SANTANA)

SITE PLAN

1"=40'

LOT #42
 EDGEWOOD FARM
 TAX ACCOUNT # 372700
 MAP 0021, GRID 0022, PARCEL 0090
 ELECTION DISTRICT: 04
 HOWARD COUNTY, MARYLAND

APPROVED
 WALKTHRU BUILDING PERMIT
 AP#
 DATE: 3-18-14
 DESC. OF WORK: 20x60 Pool w/ attached spa
 Approved as shown

REVISION:

PERMIT NUMBERS
 POOL:
 ELECT:
 OTHER:

PERMIT SET
 DATE: 3-18-14



Building Permit Application

Howard County Maryland
Department of Inspections, Licenses and Permits
3430 Court House Drive
Permits: 410-313-2455
www.howardcountymd.gov

Date Received: _____

Permit No.: _____

Building Address: 16330 Cattail River Dr
 City: Woodbine State: MD Zip Code: 21797
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: _____
 Section: _____ Area: _____ Lot: _____
 Tax Map: _____ Parcel: _____ Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

Property Owner's Name: Kemp & Theresa Wood
 Address: 16330 Cattail River Dr.
 City: Woodbine State: MD Zip Code: 21797
 Phone: 410-489-7957 Fax: _____
 Email: Mong7@verizon.net

Applicant's Name & Mailing Address, (if other than stated herein)
 Applicant's Name: Barry Ellis
 Address: 2236 Rock Spring Rd
 City: Forest Hill State: MD Zip Code: 21050
 Phone: 410-420-0426 Fax: _____
 Email: _____

Existing Use: SFO
 Proposed Use: SFA
 Estimated Construction Cost: \$ 25,000
 Description of Work: 16x16 Screen Door
15x12 Deck with Steps

Contractor Company: T.W. Ellis
 Contact Person: Barry Ellis
 Address: 2236 Rock Spring Rd
 City: Forest Hill State: MD Zip Code: 21050
 License No.: 44947
 Phone: 410-420-0740 Fax: 410-420-0102
 Email: _____

Occupant or Tenant: _____
 Was tenant space previously occupied? Yes No
 Contact Name: Barry Ellis
 Address: 2236 Rock Spring Rd
 City: Forest Hill State: MD Zip Code: 21050
 Phone: 410-420-0740 Fax: _____
 Email: Barry - Twellis@verizon.net

Engineer/Architect Company: _____
 Responsible Design Prof.: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Commercial Building Characteristics	Residential Building Characteristics	
Height: <u>7'0"</u>	<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories: <u>2</u>	Depth Width	
Gross area, sq. ft./floor:	1 st floor:	
	2 nd floor:	
Area of construction (sq. ft.):	Basement:	
	<input type="checkbox"/> Finished Basement	
Use group:	<input checked="" type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
Construction type:	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms: <u>3</u>	
<input type="checkbox"/> Structural Steel	Multi-family Dwelling	
<input type="checkbox"/> Masonry	No. of efficiency units:	
<input type="checkbox"/> Wood Frame	No. of 1 BR units: <u>1</u>	
<input type="checkbox"/> State Certified Modular	No. of 2 BR units:	
	No. of 3 BR units:	
	Other Structure:	
	Dimensions:	
<input checked="" type="checkbox"/> Roadside Tree Project Permit	Footings:	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Roof:	
Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Utilities	
Water Supply	
<input checked="" type="checkbox"/> Public	
<input type="checkbox"/> Private	
Sewage Disposal	
<input checked="" type="checkbox"/> Public	
<input type="checkbox"/> Private	
Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Heating System	
<input type="checkbox"/> Electric <input checked="" type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
Sprinkler System:	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number:	
Building Shell Permit Number:	

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: Barry-twellis@verizon.net
 Title/Company: V.P. T.W. Ellis

Print Name: Barry Ellis
 Date: 3/19/14

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		
Is Sediment Control approval required for issuance? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> CONTINGENCY CONSTRUCTION START		

DPZ SETBACK INFORMATION	
Front:	
Rear:	
Side:	
Side St.:	
All minimum setbacks met?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Lot Coverage for New Town Zone:	
SDP/Red-line approval date:	

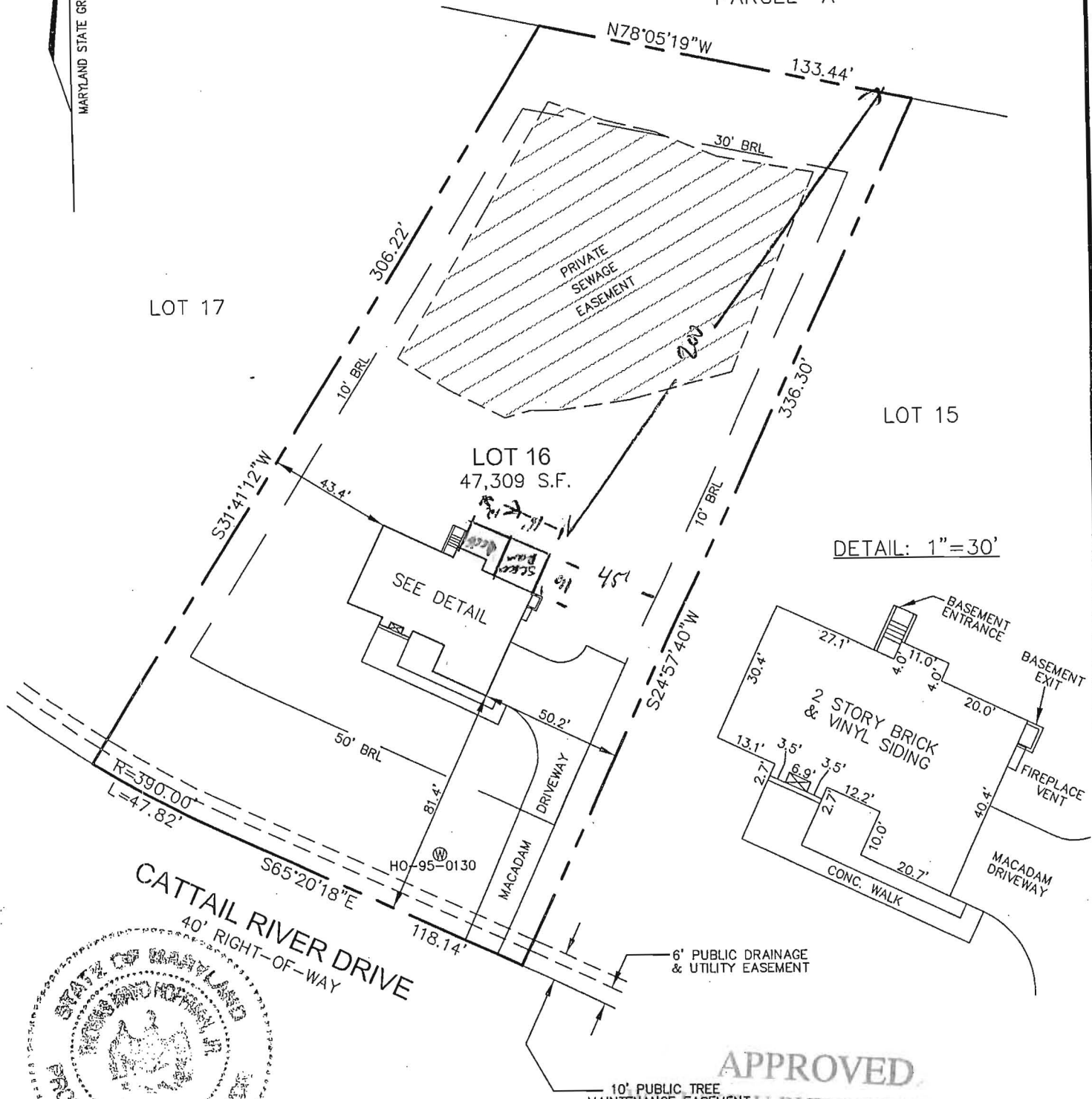
Filing Fee	\$
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	<u>[Signature]</u>

Distribution of Copies: White: Building Officials Green: PSZA, Zoning Yellow: PSZA, Engineering Pink: Health Gold: SHA

THIS PLAT IS OF BENEFIT TO A CONSUMER ONLY INsofar AS IT IS REQUIRED BY THE LENDER OR TITLE INSURANCE COMPANY OR IT'S AGENT IN CONNECTION WITH CONTEMPLATED TRANSFER, FINANCING OR REFINANCING. THIS PLAT IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATION OF FENCES, GARAGES, BUILDINGS OR FUTURE IMPROVEMENTS. THIS PLAT DOES NOT PROVIDE 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 PLAT CONTAINS A TOLERANCE OF ACCURACY OF 0.5' MORE OR LESS.

MARYLAND STATE GRID MERIDIAN (NAD83/91)

BUILDABLE PRESERVATION
PARCEL "A"



DETAIL: 1"=30'

CATTAIL RIVER DRIVE
40' RIGHT-OF-WAY



I HEREBY CERTIFY TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF THAT THE IMPROVEMENTS ARE LOCATED AS SHOWN AND THERE ARE NO ENCROACHMENTS EXCEPT AS SHOWN.

Thomas M. Hoffman Jr.

5.10.11

THOMAS M. HOFFMAN JR., PROPERTY LINE SURVEYOR #267 DATE

APPROVED
FOR BUILDING PERMIT

BP# _____ A# _____
APP. SAN *Donchun* DATE: *3-19-11*
DESC OF WORK: *11x11 Screened beam
15x12 Deck with steps*

B.P.# B10002889
16330 CATTAIL RIVER DRIVE

Approved as shown

SCALE 1"=50'	DATE 05/09/11	ROBERT H. VOGEL ENGINEERING, INC. ENGINEERS - SURVEYORS - PLANNERS 8407 MAIN STREET ELLCOTT CITY, MARYLAND 21043 TEL:410-461-7666 FAX:410-461-8961	FINAL LOCATION DRAWING LOT 16 THE CHASE AT STONEY BROOK PLAT No. 18648 4th ELECTION DISTRICT HOWARD COUNTY, MARYLAND
DRAWN BY A.M.S.	CHECKED BY T.M.H.		
PLAT NUMBER 18644-18649	JOB NUMBER 06-34.00		