

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:

B12002165

G10000140

Building Address: 4058 CANDLE LIGHT DR
DAYTON 21036

Suite/Apt. # _____ SDP/WP/BA #: GP-10-81

Census Tract: 605101 Subdivision: CASTLEBERRY AT THE OAKS

Section: _____ Area: _____ Lot: 20

Tax Map: 22 Parcel: 60 Grid: _____

Zoning: RR-DEA Map Coordinates: 4813 Lot Size: 42,897

Existing Use: VACANT LOT

Proposed Use: SFD

Estimated Construction Cost: \$ 263,754

Description of Work: 2 STORY, FULL BSMT,
9 R, 2 FB, 1 HB, FP & GARAGE
(4 BR) YORKSHIRE MAJOR PLANS ON

Occupant or Tenant: NIA FILE

Was tenant space previously occupied? Yes No

Contact Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

Property Owner's Name: TRINITY QUALITY HOMES

Address: 3675 PARK AVE #301 INC

City: ELLICOTT CITY State: MD Zip Code: 21043

Home Phone: _____ Work Phone: 410-313-8722

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

Phone: _____ Fax: 410-313-8731

Email: SALLY@TRINITYHOMES.COM

Contractor Company: TRINITY QUALITY HOMES INC

Contact Person: SALLY HODGE

Address: 3675 PARK AVE #301

City: ELLICOTT CITY State: MD Zip Code: 21043

License No.: 699

Phone: 410-313-8722 Fax: 410-313-8731

Email: SALLY@TRINITYHOMES.COM

Engineer/Architect Company: NIA

Responsible Design Prof.: _____

Address: _____

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
Area of construction (sq. ft.):	<u>Sewage Disposal</u>
Use group:	<input type="checkbox"/> Public
Construction type:	<input type="checkbox"/> Private
<input type="checkbox"/> Reinforced Concrete	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Structural Steel	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Masonry	<u>Heating System</u>
<input type="checkbox"/> Wood Frame	<input type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> State Certified Modular	<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input checked="" type="checkbox"/> Roadside Tree Project Permit	<u>Sprinkler System:</u>
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A
Roadside Tree Project Permit #	<input type="checkbox"/> Full
	<input type="checkbox"/> Partial
	<input type="checkbox"/> Other Suppression
	No. of Heads: _____

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
<input checked="" 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:	<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 checked="" type="checkbox"/> Unfinished Basement	Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Crawl Space	Gas: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Slab on Grade	<u>Heating System</u>
No. of Bedrooms:	<input checked="" type="checkbox"/> Electric
<u>Multi-family Dwelling</u>	<input type="checkbox"/> Oil
No. of efficiency units:	<input checked="" 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	<u>Roadside Tree Project Permit #</u>
<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.

Sally J. Hodge
 Applicant's Signature
SALLY@TRINITYHOMES.COM
 Email Address
VP, OPERATIONS - TRINITY
 Title/Company

SALLY HODGE
 Print Name
6/21/12
 Date

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>3/19/13</u>	<u>David Scott</u>
<input type="checkbox"/> Fire Protection		

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

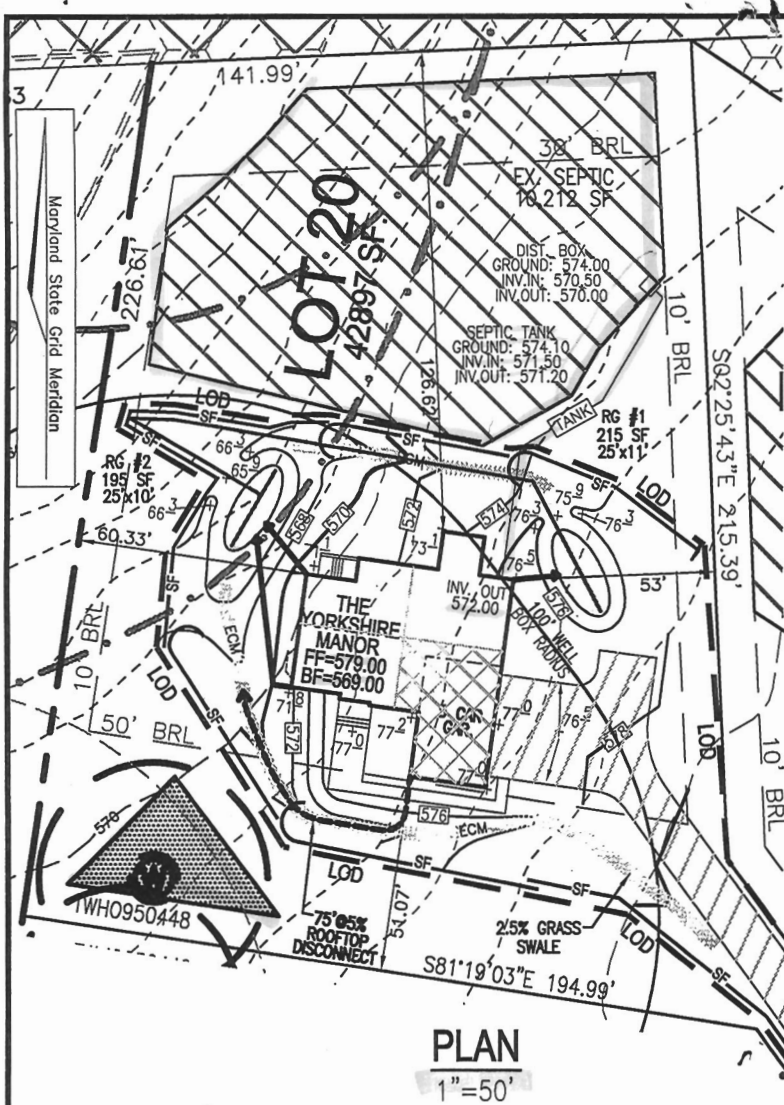
DPZ SETBACK INFORMATION
Front:
Rear:
Side:
Side St.:
All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No
Lot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

Filing Fee	\$ 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#025122

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

T:\Operations\Updated Forms\New building app 11.10.2010.docx



THE EXISTING WELL SHOWN ON LOT 20 TAG NO. 95-0448 HAS BEEN FIELD LOCATED BY ROBERT H. VOGEL ENGINEERING, INC., AND IS ACCURATELY SHOWN.

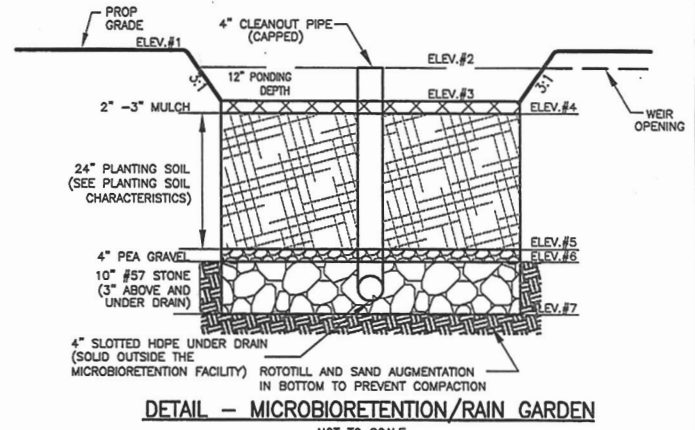
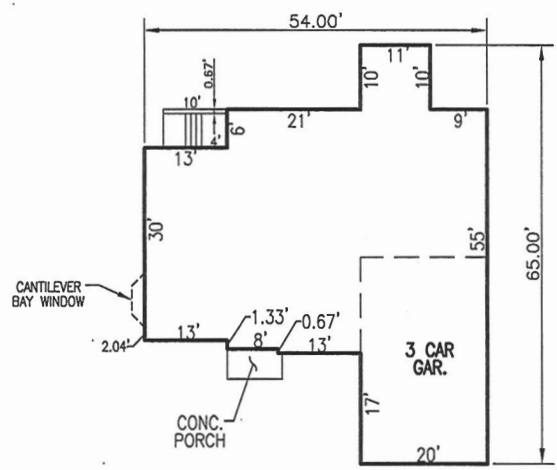
BUILDING OF LOT 20 FLOOR AREAS:
 BASEMENT FLOOR AREA: 1690
 FIRST FLOOR AREA: 1710
 SECOND FLOOR AREA: 1930
 BEDROOMS: 5

NOTE: STORMWATER MANAGEMENT FOR THIS LOT IS PROVIDED BY 2 RAIN GARDENS, ROOFTOP DISCONNECTS, AND A GRASS SWALE

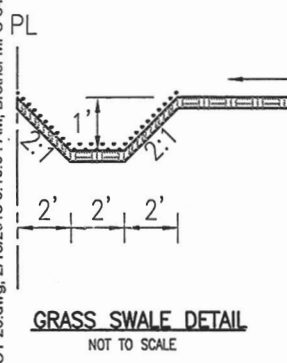
BUILDING PERMIT NO. _____

- ROOFTOP DISCONNECT (N-1)
- IMPERVIOUS TO GRASS SWALE (M-8)
- ROOFTOP DISCONNECT
- PROPOSED RAIN GARDEN (M-6)

B12002105
 Approved Septic System Plan
 Howard County Health Department
[Signature] 3/10/13
 Date
 YBR SPD



RAIN GARDEN ELEVATIONS										
LOT #	RAIN GARDEN	1	2	3	4	5	6	7	4" INV.	4" INV. OUTFALL
LOT 20	RG 1	576.30	575.90	574.90	574.65	572.65	572.32	571.49	571.74	561.54
	RG 2	566.30	565.90	564.90	564.65	562.65	562.32	561.49	561.74	561.54



SCALE: AS SHOWN
 DRAWN BY: JMR
 CHECKED BY: RHV
 DATE: FEBRUARY 2013
 PROJECT #: 2017085
 SCALE: AS SHOWN
 SHEET#: 1 OF 1

PLOT PLAN
CASTLEBERRY AT TEN OAKS
LOT 20
 REF: F-06-130
 TAX MAP 22 PARCEL 90
 BLOCK 19
 5TH ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND

ADDRESS
 4058 CANDLE LIGHT DR.
 DAYTON, MD 21036
 GP: 10-81

OWNER
 CASTLEBERRY AT TEN OAKS, LLC.
 3875 PARK AVENUE, SUITE 301
 ELLICOTT CITY, MARYLAND 21043
 (410) 740-9401

ROBERT H. VOGEL ENGINEERING, INC.
 ENGINEERS • SURVEYORS • PLANNERS
 8407 MAIN STREET
 ELLICOTT CITY, MD 21043
 TEL: 410.461.7666
 FAX: 410.461.8961



dedicated to excellence and service

March 1, 2013

RE: Building Permit #B12002165
Lot #20 Castleberry at Ten Oaks
4058 Candle Light Dr.
Dayton, MD 21036

Dear Shari Logan,

Please approve the following revisions to the above mentioned permit. The Yorkshire Manor elevation has changed, adding a hip roof, 3rd car garage, 2 story 11x10 morning room extension and a bay window to the Dining room. 10 rooms, 3 full baths, 1 half bath. Partial finished basement with full bath.

2 sets of construction drawings are included.

Thank you,

Sherry Mewshaw
Trinity Quality Homes, Inc.
410-531-5813

CC: DED
Heath

\$50.00 revision fee

Check # 027459

invoice # 309331