



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: B13001006

Permit No.: ~~XXXXXXXXXX~~

Building Address: 14853 Meriwether Dr
 City: Glenely State: MD Zip Code: 21737
 Suite/Apt. #: _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: _____
 Section: _____ Area: _____ Lot: 16
 Tax Map: _____ Parcel: _____ Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

Property Owner's Name: Toll MD LP VIII
 Address: 7164 Columbia Gateway Dr
 City: Columbia State: MD Zip Code: 21046
 Phone: 410-489-7408 Fax: 410-489-2676
 Email: Kmonath@tollbrothersinc.com

Applicant's Name & Mailing Address, (if other than stated herein)
 Applicant's Name: Keith Monath
 Address: 14881 Meriwether Dr
 City: Glenely State: MD Zip Code: 21737
 Phone: 443-500-0606 Fax: 410-489-2676
 Email: Kmonath@tollbrothersinc.com

Existing Use: Vacant lot
 Proposed Use: Single Family Dwelling
 Estimated Construction Cost: \$ 350,000
 Description of Work: Large Carolina
Expanded family room, solarium

Contractor Company: Toll MD LP VIII
 Contact Person: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 License No.: 5050
 Phone: _____ Fax: _____
 Email: _____

Occupant or Tenant: _____
 Was tenant space previously occupied? Yes No
 Contact Name: Keith Monath
 Address: 14881 Meriwether Dr
 City: Glenely State: MD Zip Code: 21737
 Phone: 443-500-0606 Fax: 410-489-2676
 Email: Kmonath@tollbrothersinc.com

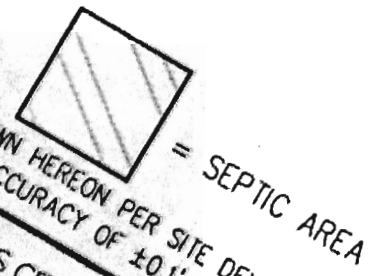
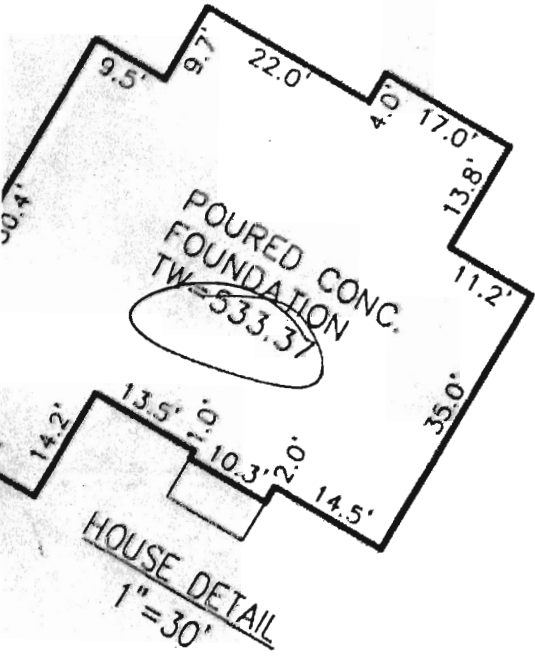
Engineer/Architect Company: _____
 Responsible Design Prof.: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Commercial Building Characteristics	Residential Building Characteristics	
Height:	<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories:	Depth	Width
Gross area, sq. ft./floor:	1 st floor: <u>56'</u>	<u>59'8"</u>
	2 nd floor: <u>56'</u>	<u>59'8"</u>
Area of construction (sq. ft.):	Basement: <u>56'</u>	<u>59'8"</u>
	<input checked="" type="checkbox"/> Finished Basement	
Use group:	<input type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Craw Space	
Construction type:	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms: <u>4</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:	
<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	

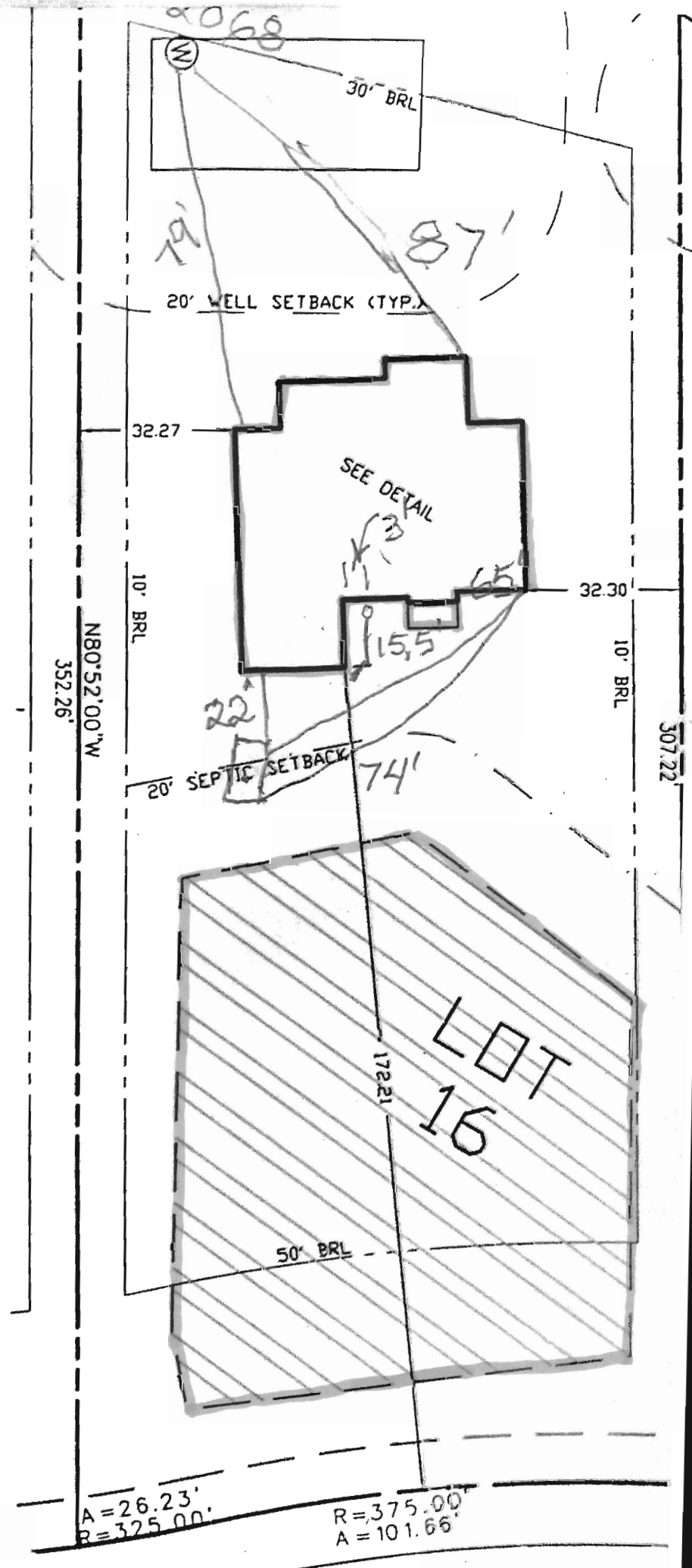
Utilities	
Water Supply	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Sewage Disposal	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Heating System	
<input checked="" type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
Sprinkler System:	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number:	<u>G12000002</u>
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: Keith Monath Print Name: Keith Monath
 Email Address: Kmonath@tollbrothersinc.com Date: 3/21/13
 Health 4/9/2013 R Buch



IN HEREON PER SITE DEVELOPMENT PLAN SETBACK DISTANCES
ACCURACY OF ±0.1' FOOT.
CERTIFICATE
OF A CURRENT TITLE REPORT, THIS
RIGHT-OF-WAYS, COVENANTS, AND
MAY OR MAY NOT BE SU
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EN FIELD VERIF
USED





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: 4-30-13

Permit No.: B13001683

*Problem address
reapprop*

Building Address: 14853 Meriwether Dr
 City: Claremont State: MD Zip Code: 21737
 Suite/Apt. #: _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: Meriwether Farms
 Section: _____ Area: _____ Lot: No
 Tax Map: _____ Parcel: _____ Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: SFD
 Proposed Use: SFD w/ Tank
 Estimated Construction Cost: \$ 8,000
 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 VIII Limited Partnership
 Address: 7164 Columbia Gateway Dr
 City: Columbia State: MD Zip Code: 21046
 Phone: _____ Fax: _____
 Email: _____

Applicant's Name & Mailing Address (other than stated herein)
 Applicant's Name: Jeremy Clancy
 Address: PO Box 1253
 City: Sikesville State: MD Zip Code: 21784
 Phone: 410 340 1229 Fax: _____
 Email: Jeremy@appliedandapproved.com

Contractor Company: Valley National Gas
 Contact Person: William Benzag
 Address: 7201 Montevideo Rd
 City: Essex 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:	Depth	Width
Gross area, sq. ft./floor:	1 st floor:	
Area of construction (sq. ft.):	2 nd floor:	
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	<input type="checkbox"/> Unfinished Basement	
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	<input type="checkbox"/> Slab on Grade	
Construction type:	Multi-family Dwelling	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:	
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	<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 type="checkbox"/> No	
Gas: <input 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:	

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Applicant's Signature: Jeremy Clancy Print Name: Jeremy Clancy
 Email Address: Jeremy@appliedandapproved.com Date: 4/30/13
 Title/Company: Permito

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

PLEASE WRITE NEATLY & LEGIBLY
FOR OFFICE USE ONLY

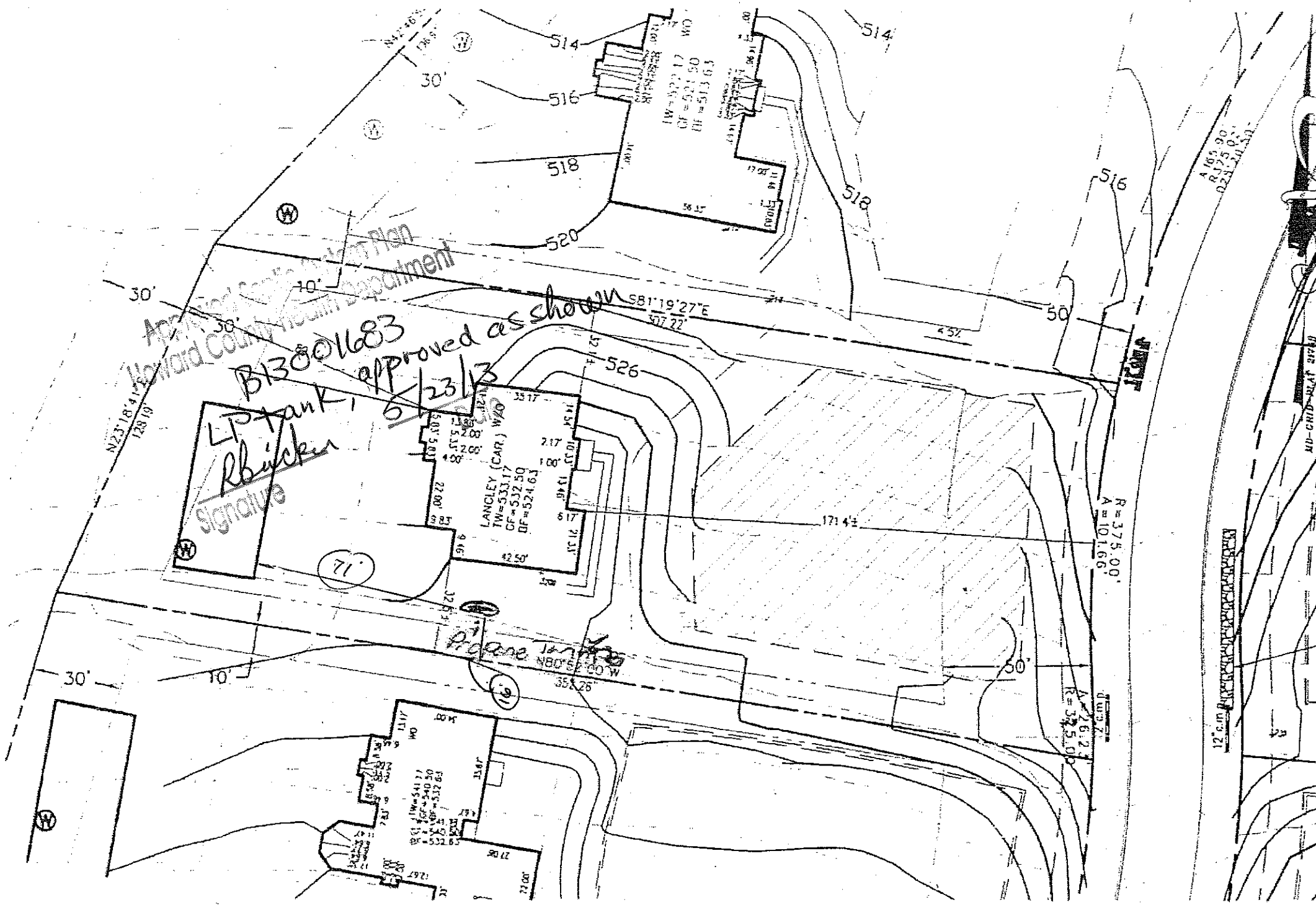
AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
<input checked="" type="checkbox"/> Building Officials		
<input checked="" type="checkbox"/> PSZA (Zoning)		
<input checked="" type="checkbox"/> PSZA (Engineering)		
<input checked="" type="checkbox"/> Health	<u>5/23/13</u>	<u>[Signature]</u>

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	\$ <u>110</u>
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	#

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



THE EXISTING WELL(S) SHOWN ON THIS PLAN (IDENTIFIED WITH THE ATTACHED WELL TAG NUMBER H3-95-7068) HAS BEEN FIELD LOCATED BY ESE CONSULTANTS, INC., PROFESSIONAL LAND SURVEYER(S), AND IS ACCURATELY SHOWN.

BUILDING SETBACKS (B.P.L.) SHOWN HEREON PER SITE DEVELOPMENT PLAN. SETBACK DISTANCES SHOWN HEREON AS '1' HAVE AN ACCURACY OF ±0.1' FOOT.

THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF AT LEAST 10,000 SQ. FT. AS REQUIRED BY THE STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWAGE 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. ANY CHANGES TO A PRIVATE SEWERAGE EASEMENT SHALL REQUIRE A REVISED PERCOLATION CERTIFICATION PLAN. RECORDATION OF A MODIFIED EASEMENT PLAT SHALL NOT BE NECESSARY.

THE LOT SHOWN HEREON WAS RECORDED ON THE PLAT FOR MERIWETHER FARMS, PLAT No. 21769, ET SEQ. REFER TO THIS PLAT FOR ANY RESTRICTIONS AND/OR PROVISIONS.

SWM FOR THIS LOT IS MANAGED PER PLAN F-09-044.

E & S CONTROLS PER PLAN F-09-044.

CULVERT FOR DRIVEWAY PER F-09-044.

ADDRESS: 14853 MERIWETHER DRIVE
GLENELG, MD 21737

TOPOGRAPHIC INFORMATION ESTABLISHED AT TWO FOOT INTERVALS BASED ON AERIAL TOPOGRAPHY PROVIDED TO ESE BY FISHER, COLLINS & CARTER, INC.

INV @ HOUSE	526.5
GROUND @ INV @ HOUSE	532.5
INV IN TANK	525.2
INV OUT TANK	525.0
TOP OF TANK	526.0
GROUND OVER TANK	525.0
INV IN DIST. BOX	524.8
INV. OUT DIST. BOX	524.5
GROUND @ BOX	528.5

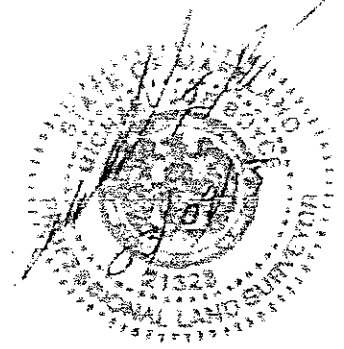
BASEMENT DOES NOT GRAVITY SEWER.

THE INITIAL SEPTIC SYSTEM DISTRIBUTION TRENCHES MUST BE INSTALLED IN THE UPPERMOST PORTION OF THE SEPTIC RESERVE AREA.

IF THE ELEVATION OF THE HOUSE SEWER IS DIFFERENT THAN THAT SHOWN ON THIS PLAN AT TIME THAT THE SEWER HOUSE CONNECTION (SHC) IS COMPLETED, THE ATTENDING ENVIRONMENTAL SANITARIAN MAY REQUIRE INSTALLATION OF A PUMP AND PUMP CHAMBER TO DELIVER SEPTIC TANK EFFLUENT TO THE UPPERMOST PORTION OF THE SEPTIC RESERVE AREA.

- TYPE: LANGLEY (CARDINA)-
- WALKOUT BASEMENT
- EXPANDED FAMILY ROOM/GREAT ROOM
- ADDL 1" TO HEIGHT OF BASEMENT
- SOLARIUM ADDITION

- OPTION No. 017
- OPTION No. 023
- OPTION No. 070
- OPTION No. 501



PLOT PLAN
LOT #16
MERIWETHER FARMS
LIBER 12124, FOLIO 120
PLAT No. 21769, ET SEQ
FOURTH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND

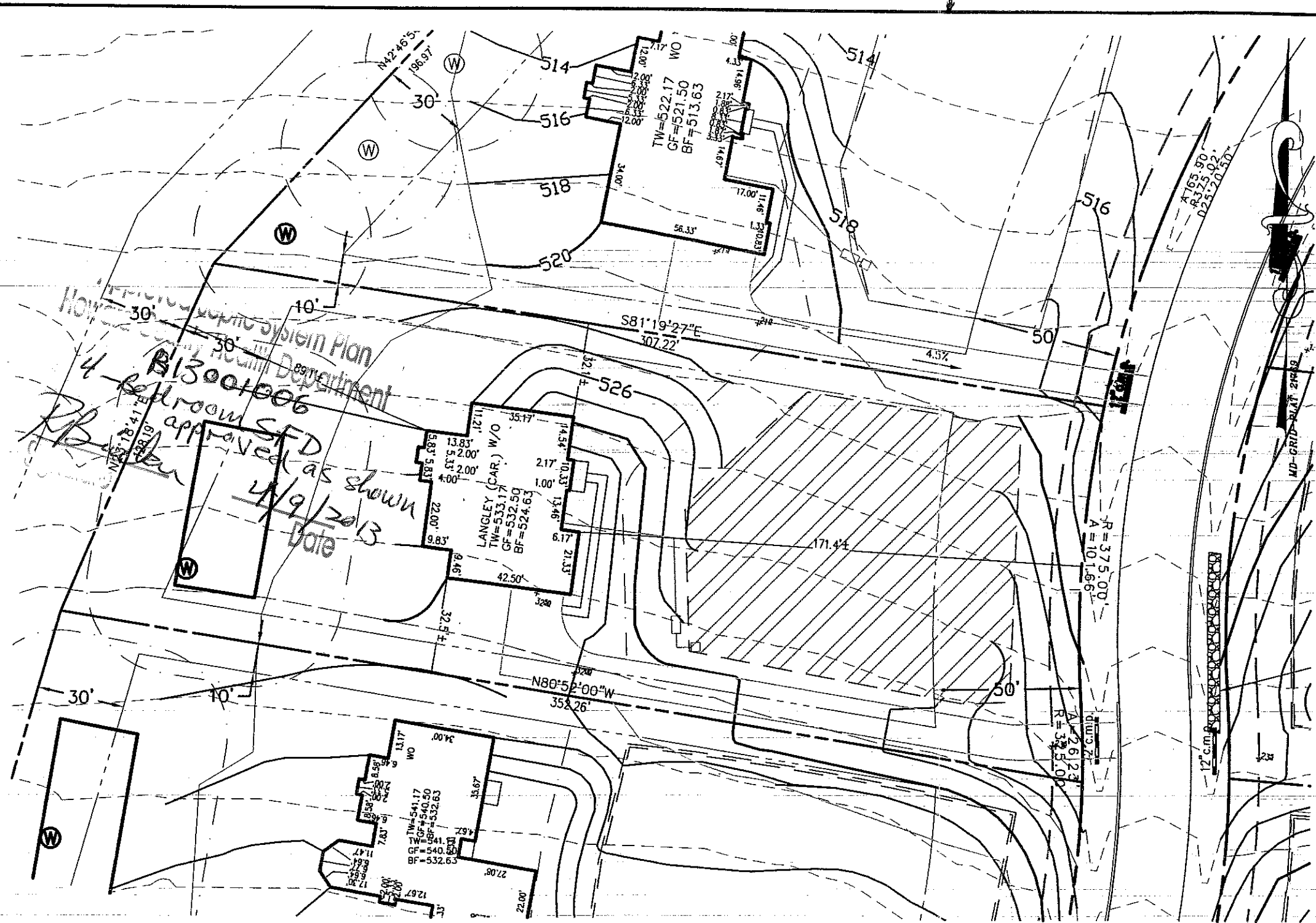
ESE Consultants Inc.
7164 Columbia Gateway Dr.
Suite 203
Columbia, MD 21045
TEL: 410-872-9105
FAX: 410-872-4870

ESE

Land Planning
Engineering
Land Surveying

DATE: 03/01/2013 SCALE: 1"=40' FILE: LOT 16 PP LANGLEY CAP.
CHK'D: MJB JOB#: 3184 DRAWN: GVS

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 1/08/15.



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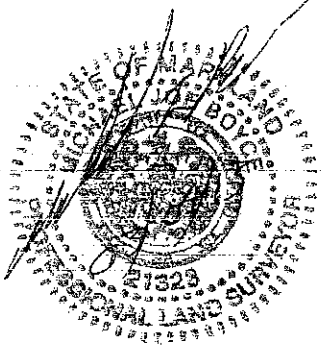
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WALKOUT BASEMENT
EXPANDED FAMILY ROOM/GREAT ROOM
ADD'L 1' TO HEIGHT OF BASEMENT
SOLARIUM ADDITION

- OPTION No. 017
- OPTION No. 023
- OPTION No. 070
- OPTION No. 501



PLOT PLAN
LOT #16
MERIWETHER FARMS
LIBER 12124, FOLIO 120
PLAT No. 21769, ET SEQ.
FOURTH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND

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

DATE: 03/01/2013 SCALE: 1"=40' FILE: LOT 16 PP LANGLEY CAR.
CHK'D: MJB JOB#: 3184 DRAWN: GVS

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