



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: 7/1

Permit No.: B1300a /

Building Address: 8108 Holy Manor Way
City: Fulton State: MD Zip Code: 20759
Suite/Apt. #: _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: _____
Section: _____ Area: _____ Lot: _____
Tax Map: _____ Parcel: _____ Grid: _____
Zoning: _____ Map Coordinates: _____ Lot Size: _____

Property Owner's Name: New Home
Address: 8108 Holy Manor Way
City: Fulton State: MD Zip Code: 20759
Phone: 410-336-5905 Fax: _____
Email: John@cornerstone-homes.com

Applicant's Name & Mailing Address, (If other than stated herein)
Applicant's Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Existing Use: SFD under construction
Proposed Use: Heat
Estimated Construction Cost: \$ 4,200.00
Description of Work: Bring 500 gal Propane tank & Run 1/2" copper line to stub out on House.

Contractor Company: Post Gas Company
Contact Person: Michael Underwood
Address: 360 Main St
City: Luxon State: MD Zip Code: 20707
License No.: 100029
Phone: 301-725-3232 Fax: 301-725-7129
Email: Kevin@PostGas.com

Occupant or Tenant: _____
Was tenant space previously occupied? Yes No
Contact Name: John Connor's
Address: 8108 Holy Manor Way
City: Fulton State: MD Zip Code: 20759
Phone: 410-336-5905 Fax: _____
Email: _____

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:
	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 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 checked="" 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: Michael Underwood

Print Name: Michael Underwood

Email Address: Scam@PostGas.com

Date: 7/2/13

Service Manager: Post Gas Company
Title/Company

RECEIVED



Cornerstone Homes, Inc.

9695 Norfolk Avenue ■ Laurel, Maryland 20723
(410) 792-2565 ■ Fax (410) 792-2567

August ¹⁰~~2~~, 2012

RECEIVED
AUG 13 2012
LICENSES & PERMITS
DIVISION

Howard County Department of Inspections,
Licenses, and Permits
3430 Court House Drive
Ellicott City, MD 21043

To Whom It May Concern:

Attached are 6 new plot plans for the lot listed below. The Health Department requested a change in the position of the driveway.

SUBDIVISION:	Holly House Meadows
LOT# / ADDRESS:	8 – 8108 Holly Manor Way
PERMIT NUMBER:	B12002424
HOUSE TYPE:	Devonshire

Your consideration in this matter is greatly appreciated. If you have any questions, please feel free to call me at (410) 792-2565.

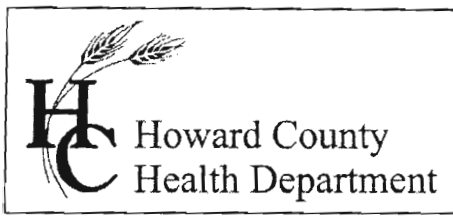
Sincerely,

Theresa M. Chevery
Office Manager
Cornerstone Homes, Inc.

Enclosures

tmc

cc: PTZ
DED



7178 Columbia Gateway Drive, Columbia MD 21046
Phone (410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
Website: www.hchealth.org

Peter L. Beilenson, M.D., M.P.H., Health Officer

July 26, 2012

TO: Cornerstone Homes, Inc.
C/o Brian Boy
Via-e-mail: TEETEE7761@COMCAST.NET

RE: **Building Permit # B12002424**
8108 Holly Manor Way Lot #8
Fulton, Maryland 20759
Building Site Plan

Mr. Boy,

Prior to building permit approval, an approved Building Plan is required. Further review is contingent upon submission of a Building Plan showing the following:

- Well box should be 10 feet away from the driveway. A new percolation certification plan must be submitted if any changes are made to the well box or the septic field.

Your building permit will be placed "on hold" until all Health Dept. requirements are met. If you have any questions or correspondence, I can be reached at the above address or by telephone at (410) 313-2775.

Respectfully,

Dana Bernard, REHS/RS
Bureau of Environmental Health
Well and Septic Program
Phone (410) 313-2775
E-mail: DBernard@howardcountymd.gov

cc: Well & Septic program file

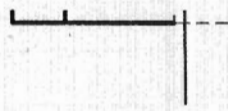
1. FULL DEFINITION, ALTERNATIVE

P-1 PAVING DETAIL

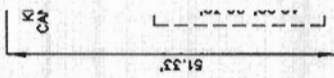
NOT TO SCALE

Build of B12002424

- 1. COUNTY HEALTH OFFICER SHALL PRIVATE SEWERAGE EASEMENT. F SHALL NOT BE NECESSARY.
- 3. EXACT LENGTH OF SEPTIC TR AT THE TIME OF PRECONSTRUCT
- 4. SPOIL FROM THE TRENCHING SIDE OF THE EXCAVATION FOR E
- 5. SEDIMENT AND EROSION CON CONSERVATION DISTRICT UNDER MARYLAND STANDARDS AND SPEI CONTROL.
- 6. STORMWATER MANAGEMENT FC EXTENDED DETENTION POND CON
- 7. THE EXISTING WELL (TAG NO. LOCATED BY BENCHMARK ENGINE ACCURATELY SHOWN.
- 8. DRIVEWAY CULVERT COMPUTA F-08-090.



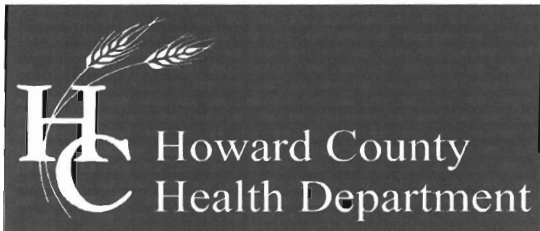
GRID NORTH



BIORDI RUDOLPH V
 BIORDI SUSAN GAY V/E
 MAP 45, GRID 6, PARCEL 23
 12202 LIME KILN RD
 LF 4884/261
 LF ZONE RR

HOLI
81C
TAX

PLAN VIEW



Office of the Health Officer

7178 Columbia Gateway Drive, Columbia, MD 21046-2147

Main: 410-313-6300 | Fax: 410-313-6303

TDD 410-313-2323 | Toll Free 1-866-313-6300

www.hchealth.org

Facebook: www.facebook.com/hocohealth

Twitter: HowardCoHealthDep

Maura J. Rossman, M.D., Acting Health Officer

DATE: July 25, 2013

TO: Michael Underwood

Via-e-mail: KEVIN@POISTGAS.COM

RE: **Building Permit # B13002627**

8108 Holy Manor Way

Fulton, Maryland 20759

Mr. Underwood,

Further review is contingent upon submission of a revised building plan showing the following:

- Propane tank must be 100' from the well.

Your building permit will be placed "on hold" until all Health Department requirements are met. If you have any questions or correspondence, I can be reached at the above address or by telephone at (410) 313-2775.

Respectfully,

Dana Bernard, REHS/RS

Environmental Specialist II

Bureau of Environmental Health

Well and Septic Program

Phone (410) 313-2775

E-mail: DBernard@howardcountymd.gov

cc: Well & Septic program file

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:

B12002424

Building Address: 8108 Hillman Ct, L104
Fulton, MD 20759

Suite/Apt. # _____ SDP/WP/BA #: LP/3-0120

Census Tract: _____ Subdivision: _____

Section: _____ Area: _____ Lot: 8

Tax Map: 315 Parcel: 24 Grid: 6

Zoning: BR-DEO Map Coordinates: _____ Lot Size: 10934

Existing Use: Vacant Lot

Proposed Use: New S.F.D.

Estimated Construction Cost: \$ 811,100

Description of Work: Demolish 2-story
full front 11R, 3FB, 1NB, FR, 4BR,
3Car Garage, Front 1/4 + Back

Occupant or Tenant: _____

Was tenant space previously occupied? Yes No

Contact Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

Property Owner's Name: Cornerstone Home

Address: 9625 Norfolk Avenue

City: Lanham State: MD Zip Code: 20723

Home Phone: 775-2227 Work Phone: 775-3565

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

Phone: _____ Fax: _____

Email: tree@7761.comcast.net

Contractor Company: James A. Duran

Contact Person: James A. Duran

Address: 9625 Norfolk Avenue

City: Lanham State: MD Zip Code: 20723

License No.: # 21

Phone: _____ Fax: _____

Email: tree@7761.comcast.net

Engineer/Architect Company: Barthelme Engineering

Responsible Design Prof.: Chris Barthelme

Address: 3400 Baltimore Ave, Suite 100

City: Lanham State: MD Zip Code: 20723

Phone: 410-654-125 Fax: 410-654-694

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 checked="" type="checkbox"/> No
	Gas: <input type="checkbox"/> Yes <input checked="" 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 checked="" type="checkbox"/> No	<input type="checkbox"/> Other Suppression
Roadside Tree Project Permit #	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>44' x 62'</u>	<input type="checkbox"/> Private
2 nd floor: <u>40' x 54'</u>	<u>Sewage Disposal</u>
Basement: <u>22' x 54'</u>	<input type="checkbox"/> Public
<input type="checkbox"/> Finished Basement	<input 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: <u>3</u>	<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: <u>Front</u>	
Dimensions: <u>82' x 114'</u>	
Footings: <u>40' x 28"</u>	<input checked="" type="checkbox"/> Roadside Tree Project Permit
Roof: <u>Asph/Flt</u>	<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.

Applicant's Signature: tree@7761.comcast.net Print Name: James A. Duran

Email Address: tree@7761.comcast.net Date: 7/6/12

Title/Company: President/Cornerstone Homes, Inc.

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>8/2-12</u>	<u>Dana Bernard</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>200.00</u>
Permit Fee	\$ <u>200.00</u>
Tech Fee	\$ <u>300.00</u>
Excise Tax	\$ <u>720.00</u>
PSFS	\$ <u>88.81</u>
Guaranty Fund	\$ <u>50.00</u>
Add'l per Fee	\$ _____
Total Fees	\$ <u>1458.81</u>
Sub- Total Paid	\$ <u>500.00</u>
Balance Due	\$ <u>958.81</u>

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

LEGEND

- EXISTING CONTOURS
- 1500 S.F. WELL BOX
- FIELD LOCATED WELL
- PRIVATE SEWAGE DISPOSAL AREA
- SILT FENCE
- SUPER SILT FENCE
- LIMIT OF DISTURBANCE
- EROSION CONTROL MATING PER
- STABILIZED CONSTRUCTION ENTRANCE

SEPTIC INFORMATION

INV. AT HOUSE	425.50
GRD. AT INV. AT HOUSE	431.0
INV. IN TANK	424.9
INV. OUT TANK	424.6
TOP OF TANK	426.5
GROUND OVER TANK	429.0
INV. IN DIST. BOX	424.3
INV. OUT DIST. BOX	424.5
GROUND AT BOX	429.0

BENCHMARK

ENGINEERS & LAND SURVEYORS & PLANNERS

ENGINEERING, INC.

P:2372 Holly House Meadows/ing 802dcusum; Lot 8/ing Permit Plan 7/31/2012 2:08:12 PM

PLAN VIEW
SCALE: 1" = 40'

Date: _____
Comments: _____

REVISED

BIOPIRI RUMPOLO V
PROJECT SURVEYOR
1200 W. WILSON RD
LAUREL, MD 20723
LF: 455/7261

OWNER/BUILDER:
CORNERSTONE HOMES INC.
9695 NORFOLK AVENUE
LAUREL, MD 20723

HOLLY HOUSE MEADOWS

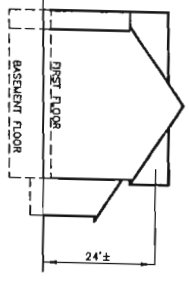
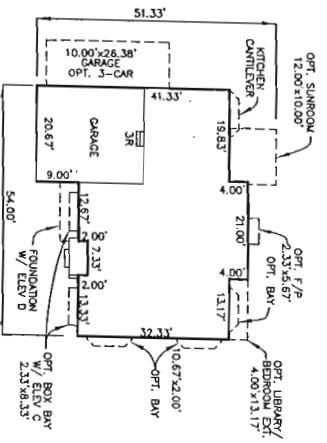
LOT 8
8108 HOLLY MANOR WAY

TAX MAP: 45 GRID: 6 PARCEL: 24
ZONED: RR-DEO
ELECTION DISTRICT NO. 5
HOWARD COUNTY, MARYLAND

DEVONSHIRE MODEL

DATE: JUNE 2012 BEI PROJECT NO. 2372
SCALE: AS SHOWN DRAWING 1 OF 1

FOOTPRINT
SCALE: 1" = 30'



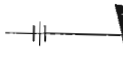
P-1 PAVING DETAIL
NOT TO SCALE

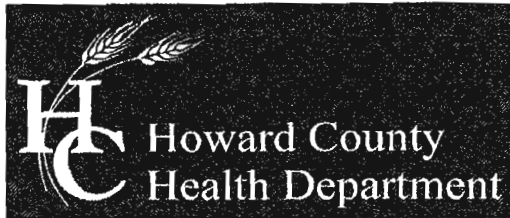


NOTES:

1. THE LOT SHOWN HEREON WAS RECORDED ON 12-04-2008 AS PLAT NUMBER 20378. 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. THIS EASEMENT SHALL BE PLACED ON THE LOT SHOWN IN THIS AREA'S RESTRICTED DEVELOPMENT SPECIFICATIONS. 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. RECORDED OF A MODIFIED SEWERAGE EASEMENT PLAT SHALL NOT BE NECESSARY.
3. EXACT LENGTH OF SEPTIC TRENCHES ARE TO BE DETERMINED BY THE HEALTH DEPARTMENT AT THE TIME OF PRECONSTRUCTION INSPECTION.
4. SOIL 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 WERE APPROVED BY HOWARD SOIL CONSERVATION DISTRICT UNDER F-08-090 AND SHALL COMPLY WITH THE 1994 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL.
6. STORMWATER MANAGEMENT FOR THIS LOT IS PROVIDED IN THE P-1 MICROPOOL-EXTENDED DETENTION POND CONSTRUCTED UNDER F-08-090.
7. THE EXISTING WELL, (TAG NO. HO-95-1169) SHOWN ON THIS PLAN WAS FIELD LOCATED BY BENCHMARK ENGINEERING, INC. IN NOVEMBER, 2010 AND IS ACCURATELY SHOWN.
8. DRIVEWAY CULVERT COMPUTATIONS WERE PROVIDED AND APPROVED UNDER F-08-090.

GRID NORTH





Office of the Health Officer
7178 Columbia Gateway Drive, Columbia, MD 21046-2147
Main: 410-313-6300 | Fax: 410-313-6303
TDD 410-313-2323 | Toll Free 1-866-313-6300
www.hchealth.org
Facebook: www.facebook.com/hocohealth
Twitter: HowardCoHealthDep

Maura J. Rossman, M.D., Acting Health Officer

DATE: July 25, 2013

TO: Michael Underwood
Via-e-mail: KEVIN@POISTGAS.COM

RE: **Building Permit # B13002627**
8108 Holly Manor Way
Fulton, Maryland 20759

RECEIVED
SEP 19 2013
LICENSES & PERMITS
DIVISION

Mr. Underwood,

Further review is contingent upon submission of a revised building plan showing the following:

- Propane tank must be 100' from the well.

Done

Your building permit will be placed "on hold" until all Health Department requirements are met. If you have any questions or correspondence, I can be reached at the above address or by telephone at (410) 313-2775.

Respectfully,

Dana Bernard, REHS/RS
Environmental Specialist II
Bureau of Environmental Health
Well and Septic Program
Phone (410) 313-2775
E-mail: DBernard@howardcountymd.gov

cc: Well & Septic program file

**COMPLETE THIS FORM WHEN DROPPING OFF ANY
CORRESPONDENCE AND/OR PLANS TO THE HOWARD COUNTY
DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS COUNTER:**

Date: 9-19-13
 To: Health Dept.
 (Person's Name and Division)
 From: Underwood-Poist Gas CO (301) 725-3232
 (Your Name, Company Name and Telephone Number)
 Subject: Project name Cornucopia Stone
 Project site address 8108 Holly Manor Way
 Permit Number B13002627 SDP # _____
 Other information pertinent to this project _____

✓ Please check the attachments below that you are submitting with this transmittal:

- Letter of response to Howard County plan review code letter
- Revised plans and/or revised details: When submitting for a complete re-review, duplicate sets shall be submitted.
- Structural steel certification
- Energy conservation calculations
- Certification for _____ (be specific).
- Copies of _____ (be specific).
- Two sets of single family dwelling model plans to be placed on permanent file: Model name and/or # _____
- ✓ Other Revised plot per Health Dept.

RECEIVED
 SEP 19 2013
 LICENSES & PERMITS
 DIVISION

Is there anyone else that should be contacted regarding this project if there are questions?

If so, please list that person's name and telephone number below:

 (Person's name) (Telephone number)

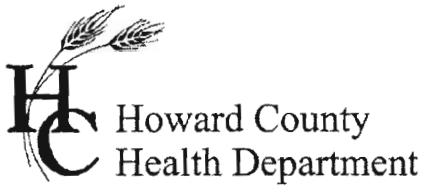
PLEASE ASSURE ALL DOCUMENTS AND/OR REVISIONS ARE APPROPRIATELY SIGNED AND SEALED, IF NECESSARY, BY A LICENSED ARCHITECT OR ENGINEER. PLEASE BE ADVISED THAT INSUFFICIENT INFORMATION MAY RESULT IN THE DELAY OF REVIEW BY THE PLANS EXAMINER. THE DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS WILL CONTACT YOU IF THERE IS A PROBLEM. IN ADDITION, ONCE THE BUILDING PERMIT IS APPROVED BY THE PLAN REVIEW DIVISION AND ALL OTHER REQUIRED SIGNATORY AGENCIES, AND THE BUILDING PERMIT IS READY FOR ISSUANCE, THE PERMIT DIVISION WILL NOTIFY THE APPROPRIATE CONTACT PERSON FOR PERMIT PICK UP. ALL PERMIT STATUS INQUIRIES SHALL BE DIRECTED TO THE PERMIT DIVISION AT 410-313-2455. CODE RELATED QUESTIONS AND PLAN REVIEW INQUIRIES SHALL BE DIRECTED TO THE PLAN REVIEW DIVISION AT 410-313-2436. PLEASE ALLOW A MINIMUM OF FIVE (5) WORKING DAYS FOR ANY PLAN SUBMITTALS TO BE REVIEWED. THANK YOU.

Received by CWA

Revision #1
(already scanned)

white: Plan Review Division
 yellow: Applicant
 pink: Permit Division

t:\Updated forms\transmit.frm - Rev. 5/08
 CC: DPZ Bldg
 PED



7178 Columbia Gateway Drive, Columbia MD 21046
Phone (410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
Website: www.hchealth.org

Peter L. Beilenson, M.D., M.P.H., Health Officer

July 26, 2012

TO: Cornerstone Homes, Inc.
C/o Brian Boy
Via-e-mail: TEETEE7761@COMCAST.NET

RE: **Building Permit # B12002424**
8108 Holly Manor Way Lot #8
Fulton, Maryland 20759
Building Site Plan

Mr. Boy,

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- Well box should be 10 feet away from the driveway. A new building plan must be submitted to reflect the change.

Your building permit will be placed "on hold" until all Health Dept. requirements are met. If you have any questions or correspondence, I can be reached at the above address or by telephone at (410) 313-2775.

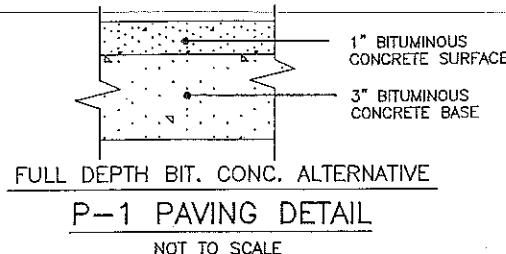
Respectfully,

Dana Bernard, REHS/RS
Bureau of Environmental Health
Well and Septic Program
Phone (410) 313-2775
E-mail: DBernard@howardcountymd.gov

cc: Well & Septic program file

LEGEND

- EXISTING CONTOURS
- 1500 S.F. WELL BOX
- FIELD LOCATED WELL
- PRIVATE SEWAGE DISPOSAL AREA
- SILT FENCE
- SUPER SILT FENCE
- LIMIT OF DISTURBANCE
- EROSION CONTROL MATTING PER
- STABILIZED CONSTRUCTION ENTRANCE



- NOTES:**
1. THE LOT SHOWN HEREON WAS RECORDED ON 12-04-2008 AS PLAT NUMBER 20378. REFER TO THIS PLAT FOR LOT DIMENSIONS, LOT AREAS, ALL EASEMENTS AND BUILDING RESTRICTIONS.
 2. THIS AREA DESIGNATES A PRIVATE SEWAGE 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 SEWAGE 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 WERE APPROVED BY HOWARD SOIL CONSERVATION DISTRICT UNDER F-08-090 AND SHALL COMPLY WITH THE 1994 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL.
 6. STORMWATER MANAGEMENT FOR THIS LOT IS PROVIDED IN THE P-1 MICROPOOL EXTENDED DETENTION POND CONSTRUCTED UNDER F-08-090.
 7. THE EXISTING WELL (TAG NO. HO-95-1169) SHOWN ON THIS PLAN WAS FIELD LOCATED BY BENCHMARK ENGINEERING, INC. IN NOVEMBER, 2010 AND IS ACCURATELY SHOWN.
 8. DRIVEWAY CULVERT COMPUTATIONS WERE PROVIDED AND APPROVED UNDER F-08-090.



SEPTIC INFORMATION

INV. AT HOUSE	425.50
GRD. AT INV. AT HOUSE	431.0
INV. IN TANK	424.9
INV. OUT TANK	424.6
TOP OF TANK	426.5
GROUND OVER TANK	429.0
INV. IN DIST. BOX	424.3
INV. OUT DIST. BOX	424.5
GROUND AT BOX	429.0

BENCHMARK

ENGINEERS ▲ LAND SURVEYORS ▲ PLANNERS
ENGINEERING, INC.

PLAN VIEW
SCALE: 1" = 40'

Approved Septic System Plan
Howard County Health Department
Dana Burd 10-1-13
Signature Date

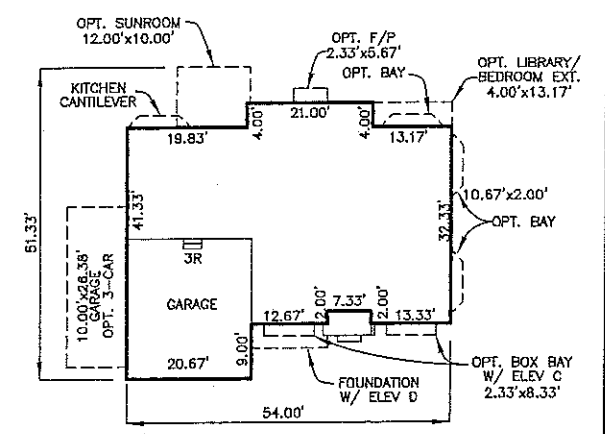
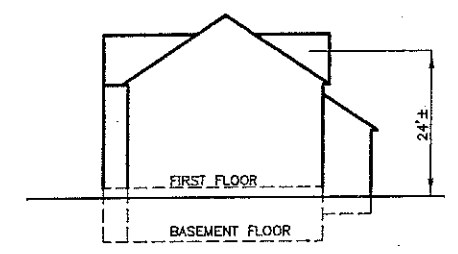
B13002627

BIGDOL RUDOLPH V
BIGDOL SUSAN GAY I/E
MAP 45, GRID 6, PARCEL 23
12202 LINE KILN RD
L.F. 4584/261
REVISED

Date: 9-19-13
Comments: per Neau

OWNER/BUILDER:
CORNERSTONE HOMES INC.
9695 NORFOLK AVENUE
LAUREL, MD 20723

GRID NORTH



FOOTPRINT
SCALE: 1" = 30'

HOLLY HOUSE MEADOWS
LOT 8
8108 HOLLY MANOR WAY
TAX MAP: 45 GRID: 6 PARCEL: 24
ZONED: RR-DEO
ELECTION DISTRICT NO. 5
HOWARD COUNTY, MARYLAND
DEVONSHIRE MODEL

DATE: JUNE 2012	BEI PROJECT NO. 2372
SCALE: AS SHOWN	DRAWING 1 OF 1

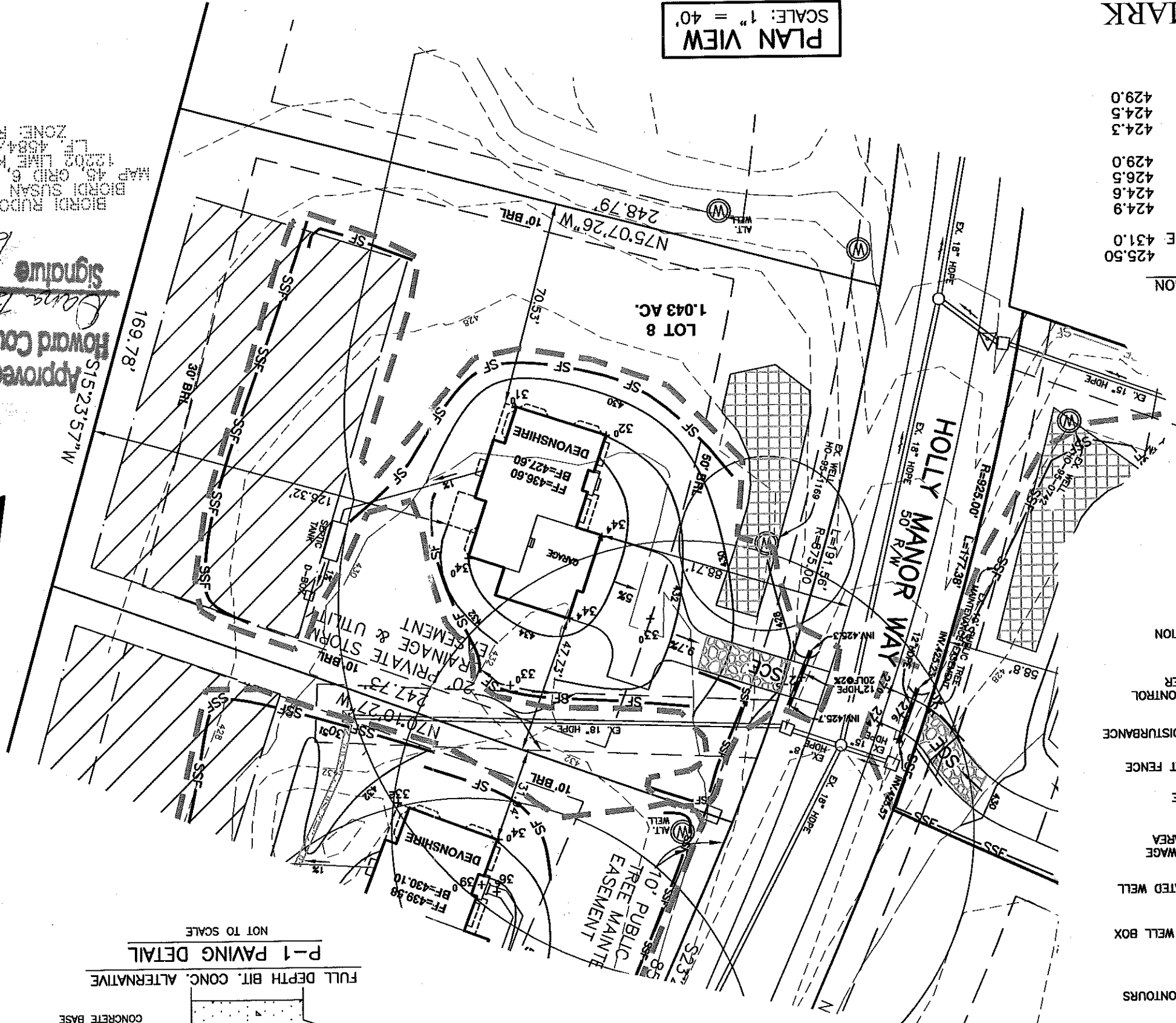
BENCHMARK ENGINEERING, INC.
ENGINEERS & LAND SURVEYORS & PLANNERS

P:\2372 Holly House Meadows\dwg\8026custom_Lot8.dwg, 8/22/2012 1:23:25 PM

SEPTIC INFORMATION

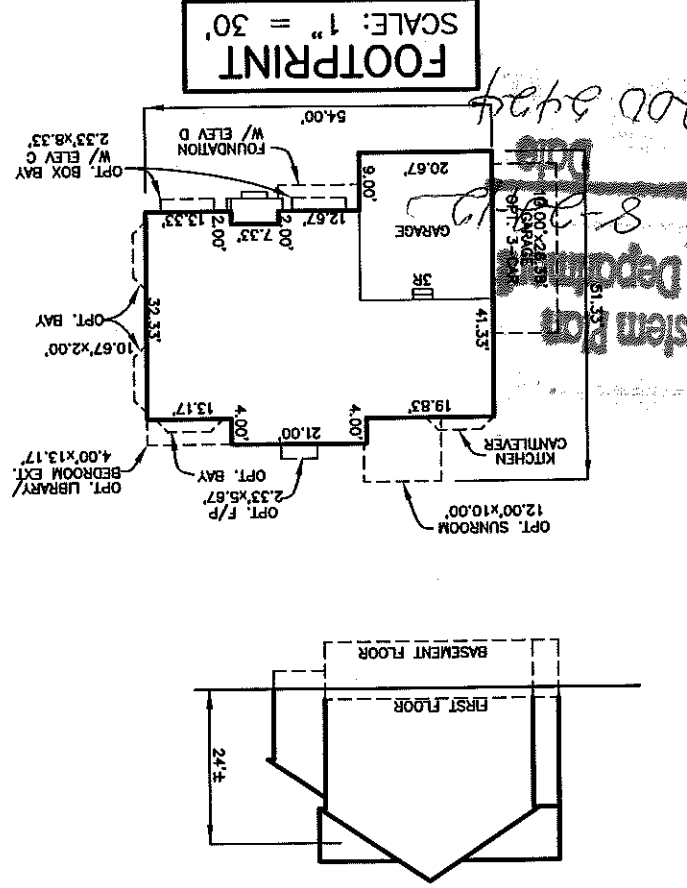
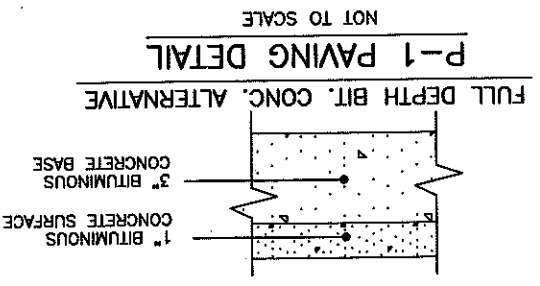
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GROUND AT BOX	429.0

PLAN VIEW
SCALE: 1" = 40'



LEGEND

EXISTING CONTOURS	
1500 S.F. WELL BOX	
FIELD LOCATED WELL	
PRIVATE SEWAGE DISPOSAL AREA	
SILT FENCE	
SUPER SILT FENCE	
LIMIT OF DISTURBANCE	
EROSION CONTROL MATING PER	
STABILIZED CONSTRUCTION ENTRANCE	



HOLLY HOUSE MEADOWS
LOT 8
8108 HOLLY MANOR WAY
TAX MAP: 45 GRID: 6 PARCEL: 24
ELECTION DISTRICT NO. 5
HOWARD COUNTY, MARYLAND

DATE: JUNE 2012
BEI PROJECT NO. 2372
SCALE: AS SHOWN
DRAWING 1 OF 1

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Approved Septic System Plan
Howard County Health Department
Boris Bernard 8-29-12
Signature
Boris Bernard
BPD# 1200 3494
BIOLODI RUDOLPH V
BIOLODI SUSAN GAY L/E
MAP 45, GRID 6, PARCEL 23
12202 LINE MLN RD
LF 4584/261
ZONE RR