

call owner w# 88
 B00134540 ✓

Building Address 3024 Merlin Court
ELLICOTT CITY, MD 21042

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

Census Tract 10300 Subdivision Ferguson

Section _____ Area _____ Lot 1

Tax Map 16 Parcel 147 Grid 21

Zoning R1D10 Map Coordinates 1A6 Lot size 3.317Ac

Property Owner's Name Barry & Leigh Lake

Address 3187 Sonia Trail

City ELLICOTT CITY State MD Zip Code 21043

Home Phone (410)418-5227 Work Phone (410)854-7070

Applicant's Name & Mailing Address, (if other than stated hereon): _____

Phone _____ Fax _____

Existing Use Vacant Lot

Proposed Use Residential House

Estimated Construction Cost \$ 255,000

Description of Work Building a CUSTOM Colonial Style Personal Residence Attached 3 Car Garage

4 Bedrooms / 5 Baths / Partially Finished with Deck

Occupant or Tenant Barry Lake & Leigh Lake

Contact Name Same UNFINISHED ATTACH

Address 3187 Sonia Trail

City ELLICOTT CITY State MD Zip Code 21043

Phone (410)418-5227 Fax (410)418-5227

Contractor Company Homeowner

Contact Person Barry Lake

Address 3187 Sonia Trail

City ELLICOTT CITY State MD Zip Code 21043

License No. _____

Phone (410)418-5227(H) Fax (410)418-52271

Engineer or Architect Company Homeowner

Contact Person Barry Lake

Address 3187 Sonia Trail

City ELLICOTT CITY State MD Zip Code 21043

Phone (410)418-5227(H) Fax (410)418-5227

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

| Building Characteristics | Utilities |
|--|--|
| Height: <u>34' 5"</u> | Water Supply: _____ Public _____ Private <input checked="" type="checkbox"/> |
| No. of stories: <u>Basement + 2</u> | Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/> |
| Gross area, sq. ft. per floor: <u>1728 / floor</u> | Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| Use group: _____ | Gas Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry <input checked="" type="checkbox"/> Wood Frame | Heating System: _____ Electric <input checked="" type="checkbox"/> Oil <input type="checkbox"/> _____ Natural Gas <input checked="" type="checkbox"/> _____ Propane Gas <input type="checkbox"/> |
| _____ State Certified Modular | Sprinkler system: <u>N/A</u> <input checked="" type="checkbox"/> |
| | _____ Full _____ Partial _____ Other Suppression _____ # of Heads _____ |

| Building Characteristics | Utilities |
|--|--|
| SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> | Water Supply: _____ Public _____ Private <input checked="" type="checkbox"/> |
| 1st floor: <u>9'1" Depth</u> <u>48'x36' Width</u> | Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/> |
| 2nd floor: <u>8'1" Depth</u> <u>72'x36' Width</u> | Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| Basement: <u>8'9 1/2" Depth</u> <u>48'x36' Width</u> | Gas Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/> | Heating System: _____ Electric <input checked="" type="checkbox"/> Oil <input type="checkbox"/> _____ Natural Gas _____ Propane Gas <input type="checkbox"/> |
| Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> | Sprinkler system: <u>N/A</u> <input checked="" type="checkbox"/> |
| No. of Bedrooms <u>4</u> | _____ NFPA #13D _____ NFPA #13R _____ Other: _____ |
| Multi-family dwellings: _____ | |
| No. of efficiency units: _____ | |
| No. of 1 BR units: _____ | |
| No. of 2 BR units: _____ | |
| No. of 3 BR units: _____ | |
| Other Structure: _____ | |
| Dimensions: _____ | |
| Footings: _____ | |
| Roof: _____ | |
| _____ State Certified Modular _____ 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 Barry A. Lake / Leigh A. Lake
 Homeowner

Print Name Barry A. Lake / Leigh A. Lake
 Date 25 Feb 2002

Title/Company _____

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
 ** PLEASE WRITE NEATLY AND LEGIBLY. **
 - FOR OFFICE USE ONLY -

| AGENCY | DATE | SIGNATURE APPROVAL | DPZ SETBACK INFORMATION | PROPERTY ID# |
|--|----------------|---------------------|---|--------------------------------|
| Land Development, DPZ | | | Front: _____ | 53701 |
| State Highways | | | Rear: _____ | Filing fee \$ <u>100</u> |
| Building Official | | | Side: _____ | Permit fee \$ _____ |
| Dev. Engineering, DPZ | <u>3/15/02</u> | <u>Mark Riffkin</u> | Side St.: _____ | Excise tax \$ _____ |
| Health | | | All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/> | Add'l per. fee \$ _____ |
| Fire Protection | | | Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/> | TOTAL FEES \$ _____ |
| Is Sediment Control approval required prior to issuance? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> | | | Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/> | Sub-total paid \$ _____ |
| CONTINGENCY CONSTRUCTION START: <input type="checkbox"/> | | | Lot Coverage for New Town Zone _____ | Balance due \$ _____ |
| ONE STOP SHOP: <input type="checkbox"/> | | | SDP/Red-line approval date _____ | Check # <u>2360</u> |
| | | | | Validation # <u>40816</u> |
| | | | | Accepted by <u>[Signature]</u> |

ADDRESS: 3024 MERLIN CT., ELLICOTT CITY, MD 21042
 HOUSE TYPE: 2-STORY FRAMED W/ WALK-OUT BSMT.
 PROP. ELEV.

BASEMENT = 530.66
 FIRST FLR. = 540.33

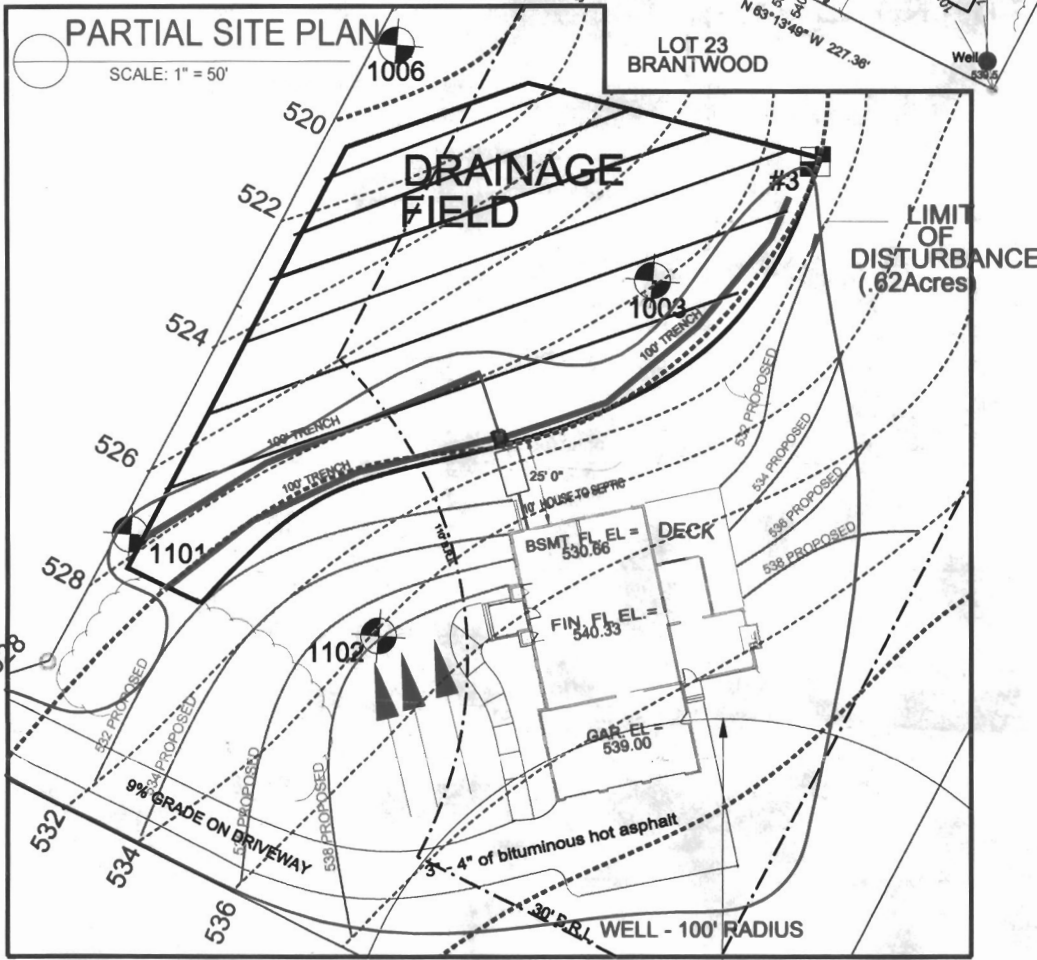
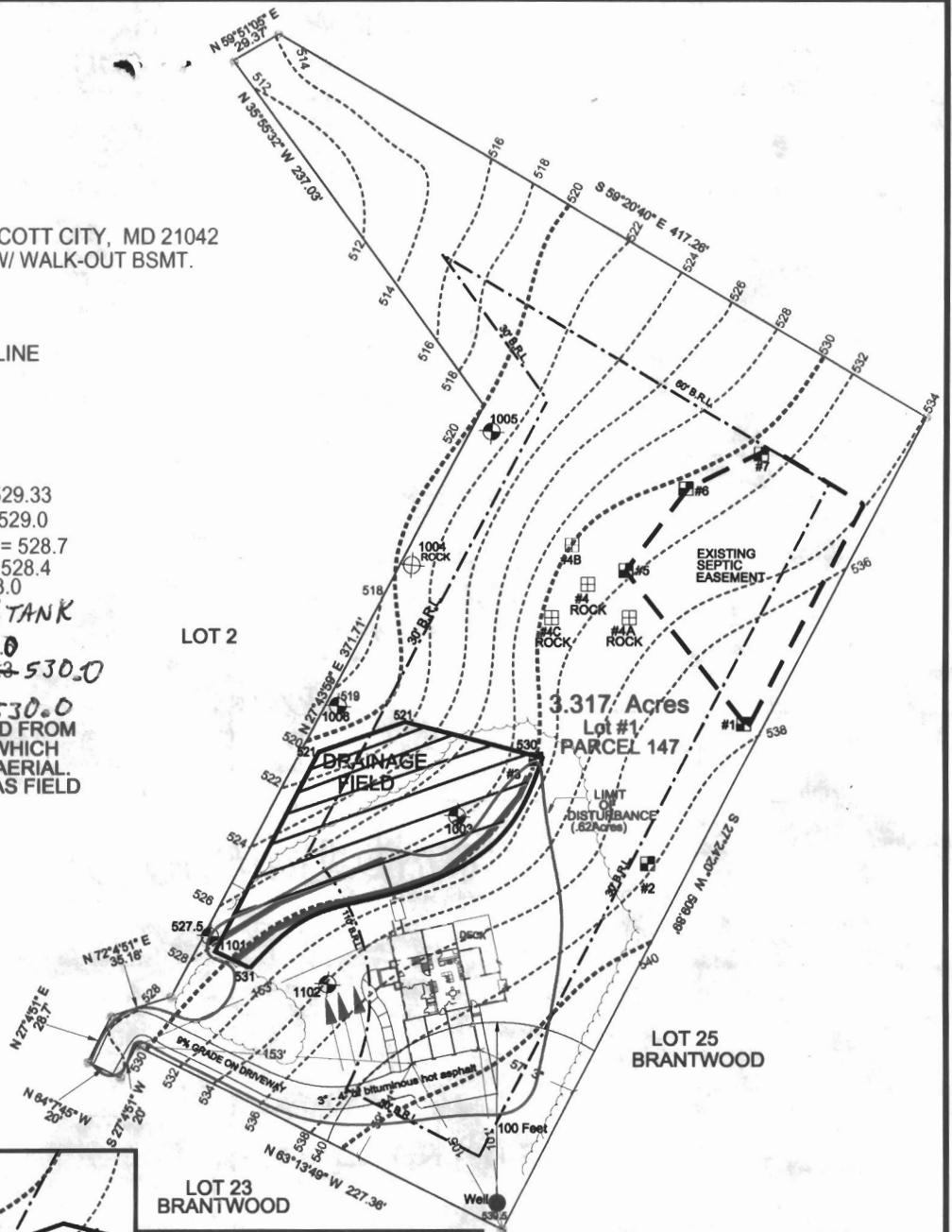
B.R.L. = BUILDING RESTRICTION LINE
 SUBDIVISION: FERGUSON LOT1
 ZONED: RC

LOT #1
 TAX MAP 16 - Parcel 147
 ELECTION DIST.: 5TH

INV. ELEV. (OUT) AT FDN WALL = 529.33
 INV. ELEV. (IN) AT SEPTIC TANK = 529.0
 INV. ELEV. (OUT) AT SEPTIC TANK = 528.7
 INV. ELEV. (OUT) AT DISTR. BOX = 528.4
 INV. ELEV. (OUT) AT TRENCH = 528.0

EXIST. ELEV. AT SEPTIC = 532.0
 PROP. ELEV. AT SEPTIC = 532.0
 EXIST. ELEV. AT DISTR. BOX = 530.0
 PROP. ELEV. AT DISTR. BOX = 530.0
 EXIST. ELEV. AT TRENCH = 530.0
 PROP. ELEV. AT TRENCH = 530.0

NOTE: TOPOGRAPHY WAS DERIVED FROM THE PERK CERTIFICATION PLAN WHICH UTILIZED THE HOWARD COUNTY AERIAL. THE SEWAGE DISPOSAL AREA WAS FIELD VERIFIED.



| | | | |
|---|---|---|-----------------------------------|
| STAMP | SITE PLAN FOR LAKE PROPERTY | | JOB # - L2001074 |
| | SITE PLAN PREPARED BY: BARRY LAKE (410) 418-5227 | OWNER: BARRY & LEIGH LAKE 3187 SONIA TRAIL ELLICOTT CITY, MD 2102 (410) 418-5227 | SCALE: 1"=100' DATE: 22 FEB 02 |
| CONSTRUCTION ADDRESS: 3024 MERLIN CT. ELLICOTT CITY, MD 21042 | BUILDER: BARRY LAKE 3187 SONIA TRAIL ELLICOTT CITY, MD 2102 (410) 418-5227 | DRAWN: BAL CHECKED: | |