



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: APR 29/14

LICENSES & PERMITS

Permit No.: B14001395

Building Address: 14560 Edgewoods Way
City: Glenelig State: MD Zip Code: 21737
Suite/Apt. #: _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivisions: Edgewood Farm
Section: _____ Area: _____ Lot: 49
Tax Map: 21 Parcel: 90 Grid: 22
Zoning: _____ Map Coordinates: _____ Lot Size: 1.03 AC

Property Owner's Name: Toll MD V Limited
Address: 7104 Columbia Gateway Dr
City: Columbia State: MD Zip Code: 21046
Phone: _____ Fax: _____
Email: _____

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

Applicant's Name: Michelle Regal
Address: PO BOX 6253
City: Sikeston State: MD Zip Code: 21784
Phone: 443 610 7514 Fax: _____
Email: michelle@appliedandapproved.com

Existing Use: SFD
Proposed Use: SFD w/ tank
Estimated Construction Cost: \$ 8,000
Description of Work: install 1000 gal inground propane tank
Occupant or Tenant: none
Was tenant space previously occupied? Yes No
Contact Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Contractor Company: Tech Air
Contact Person: John Grant
Address: 8099 D Hillmark Court
City: Frederick State: MD Zip Code: 21704
License No.: 91274
Phone: 443 545 4393 Fax: _____
Email: _____

Engineer/Architect Company: Contractor
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:	
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 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 checked="" 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: *Michelle Regal*
Email Address: michelle@appliedandapproved.com
Title/Company: Permits

Print Name: Michelle Regal
Date: 4/30/14

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

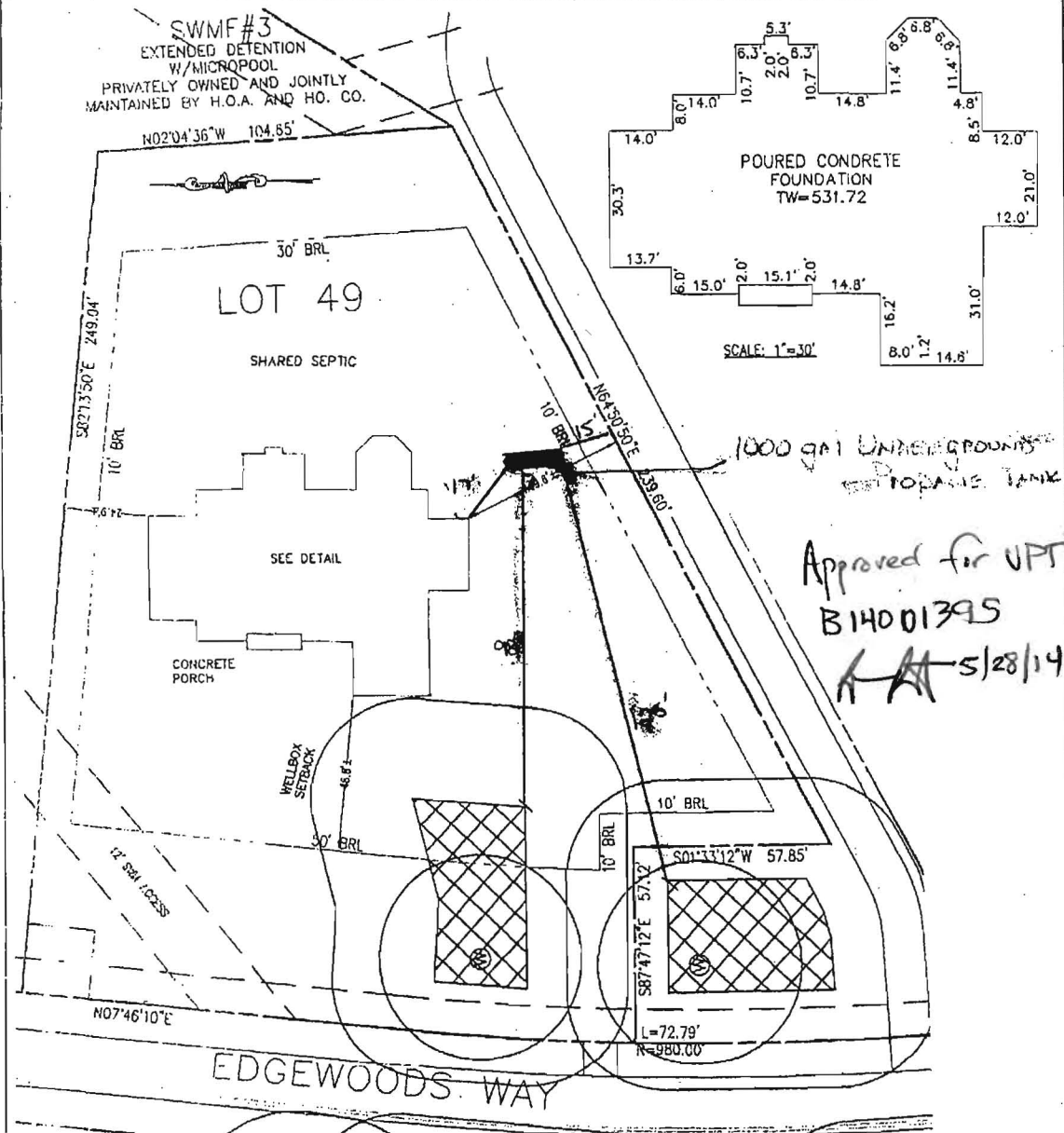
AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	5/1/14	<i>RAT</i>

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 checked="" type="checkbox"/> No
Is Entrance Permit Required?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Historic District?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Lot Coverage for New Town Zone:	
SDP/Red-line approval date:	

Filing Fee	\$
Permit Fee	\$ 100.00
Tech Fee	\$ 10.00
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	# 3612

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 1/8/15.



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

ADDRESS: 14560 EDGEWOODS GREENFIELD 20774

SURVEYOR'S NOTE

THIS WALLCHECK WAS PREPARED WITHOUT THE BENEFIT OF A CURRENT TITLE REPORT. THIS PROPERTY IS SUBJECT TO ANY AND ALL EASEMENTS, RIGHT-OF-WAYS, COVENANTS, AND RESTRICTIONS, ETC. OF RECORD, SOME OR ALL OF WHICH MAY OR MAY NOT BE SHOWN AND/OR REFERENCED HEREON. BEARINGS AND DISTANCES OF THE PROPERTY BOUNDARY LINES SHOWN HEREON ARE PER AVAILABLE RECORDS AND HAVE NOT BEEN FIELD VERIFIED. THIS IS NOT A "LOCATION DRAWING" AND IS NOT TO BE USED FOR SETTLEMENT PURPOSES.

SIGNATURE: MICHAEL JOE BOYCE
 MD. LIC. NO. 21328
 DATE 12/16/13

WALLCHECK
 LOT #49
EDGEWOOD FARM
 LIBER 10677, FOLIO 0461
 PLAT No. 19269
 FOURTH ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND



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

DATE: 12/16/13 SCALE: 1"=40' FILE: Lot 49
 CHK'D: M.J.B. JOB#: 1498 DRAWN: JLN



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: 8/15/13
Permit No.: 3163
131300

Building Address: 14560 Edgewoods Way
 City: Greenbelt State: MD Zip Code: 21737
 Suite/Apt. #: _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: Edgewood Farm
 Section: _____ Area: _____ Lot: 49
 Tax Map: _____ Parcel: _____ Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: Vacant lot
 Proposed Use: Residential Home
 Estimated Construction Cost: \$ 600,000
 Description of Work: Hardy Carling, 4 car garage
Asph screen, consistency

Occupant or Tenant: _____
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 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>76'</u> <u>62'</u>
Area of construction (sq. ft.): _____	2 nd floor: <u>76'</u> <u>62'</u>
Use group: _____	Basement: <u>76'</u> <u>62'</u>
<u>Construction type:</u>	<input type="checkbox"/> Finished Basement
<input type="checkbox"/> Reinforced Concrete	<input checked="" type="checkbox"/> Unfinished Basement
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Craw Space
<input type="checkbox"/> Masonry	<input type="checkbox"/> Slab on Grade
<input checked="" type="checkbox"/> Wood Frame	No. of Bedrooms: <u>4</u>
<input type="checkbox"/> State Certified Modular	<u>Multi-family Dwelling</u>
	No. of efficiency units: _____
	No. of 1 BR units: _____
	No. of 2 BR units: _____
	No. of 3 BR units: _____
	Other Structure: _____
	Dimensions: _____
	Footings: _____
	Roof: _____
	<input type="checkbox"/> State Certified Modular
	<input type="checkbox"/> Manufactured Home

Property Owner's Name: Toil MD V LP
 Address: 14540 Edgewoods Way
 City: Greenbelt State: MD Zip Code: 21737
 Phone: 410 489 2275 Fax: _____
 Email: Nbradaborg@toilbrothersinc.com

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

Contractor Company: Toil MD V LP
 Contact Person: John Brinkley
 Address: 14540 Edgewoods Way
 City: Greenbelt State: MD Zip Code: 21737
 License No.: 3630
 Phone: 410 489 2275 Fax: _____
 Email: Nbradaborg@toilbrothersinc.com

Engineer/Architect Company: ESE
 Responsible Design Prof.: Mike Boyce
 Address: 7164 Columbus Gateway Dr. #230
 City: Columbia State: MD Zip Code: 21046
 Phone: 410 365 4175 Fax: _____
 Email: Mboyce@ESEENG.com

Utilities	
<u>Water Supply</u>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
<u>Sewage Disposal</u>	
<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	
<u>Heating System</u>	
<input checked="" type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other: _____	
<u>Sprinkler System:</u>	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number: <u>607000150</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 UNTIL 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: Nbradaborg@toilbrothersinc.com
 Title/Company: Toil Brothers

Print Name: Nathan Brandenburg
 Date: 8/13/13

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

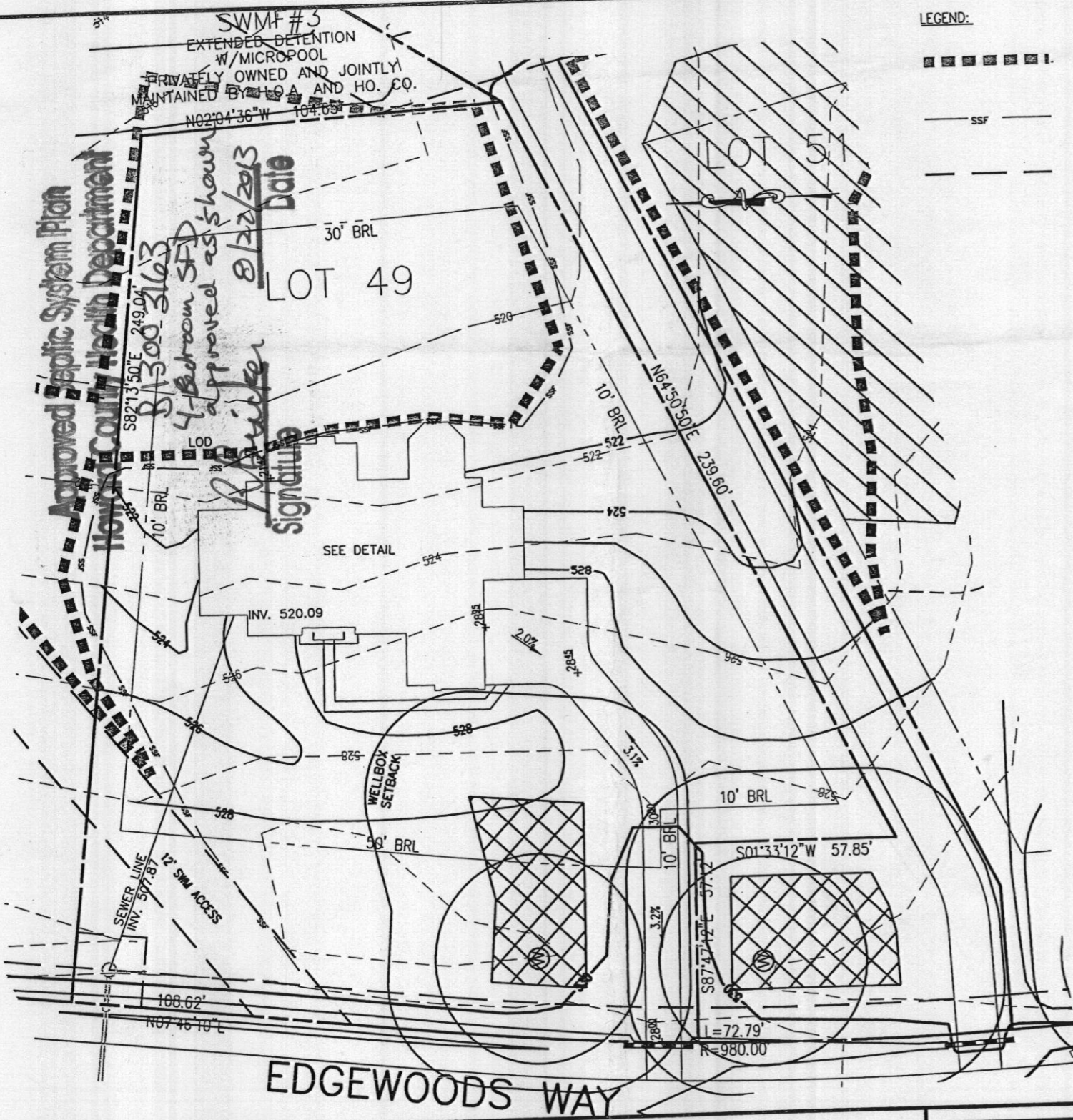
AGENCY	DATE	SIGNATURE OF APPROVAL
<input checked="" type="checkbox"/> State Highways		
<input checked="" type="checkbox"/> Building Officials		
<input checked="" type="checkbox"/> PSZA (Zoning)		
<input checked="" type="checkbox"/> PSZA (Engineering)		
<input checked="" type="checkbox"/> Health		<u>8/22/13 RBieber</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: _____
SOP/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	\$
Check	# 09300005

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



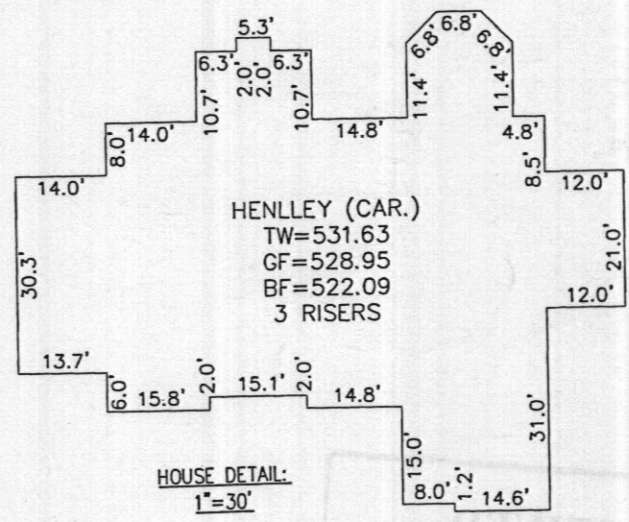
LEGEND:

- ▣ LOD
- SSF — SUPER SILT FENCE
- - - SWM EASEMENT

GENERAL NOTES:

1. THE LOT SHOWN HEREON WAS RECORDED ON MAY 4, 2007 AS PLAT NUMBER 19269. REFER TO THIS PLAT FOR LOT DIMENSIONS, LOT AREAS, ALL EASEMENTS AND BUILDING RESTRICTIONS.
- 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 EDGEWOODS FARMS, PLAT No. 19269. REFER TO THIS PLAT FOR ANY RESTRICTIONS AND/OR PROVISIONS.
- TOPOGRAPHIC INFORMATION ESTABLISHED AT TWO FOOT INTERVALS BASED FIELD RUN TOPO BY ESE CONSULTANTS.
- BUILDING SETBACKS (B.R.L.'s) SHOWN HEREON PER SITE DEVELOPMENT 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-95-0508 HAS BEEN FIELD LOCATED BY ESE CONSULTANTS, INC. - PROFESSIONAL LAND SURVEYOR(S), AND IS ACCURATELY SHOWN.

SWM PER F-06-108



ADDRESS: 14560 EDGEWOODS WAY
 GLENELG MD 21737

APPROVED:
 FOR PRIVATE WATER SYSTEMS
 HOWARD COUNTY HEALTH DEPARTMENT

COUNTY HEALTH OFFICER _____ DATE _____



- TYPE: HENLEY (CAR)**
- | | |
|---------------------------------|----------------|
| FINISHED LOWER LEVEL | OPTION No. 013 |
| EXPANDED FAMILY ROOM | OPTION No. 023 |
| CONSERVATION ELITE ADDITION | OPTION No. 039 |
| ADD 1' TO HEIGHT OF BASEMENT | OPTION No. 070 |
| BATH FOR FINISHED LOWER LEVEL | OPTION No. 383 |
| ADDITIONAL ONE CAR GARAGE | OPTION No. 506 |
| BEDROOM SUITES ABOVE ELITE ADD. | OPTION No. 521 |
| NAPLES SUNROOM | OPTION No. 529 |

PERMIT PLOT PLAN
 LOT #49
EDGEWOOD FARM
 LIBER 10677, FOLIO 461
 PLAT No. 19269
 FOURTH ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND

**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: 08/01/13 SCALE: 1"=40' FILE: LOT 49 PP HENLEY CAR.
 CHK'D: MJB JOB#: 1498 DRAWN: JLN