

BR 00142819

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3630 COURT HOUSE DRIVE
ELLCOTT CITY, MD 21043
PERMITS (410) 313-2400 INSPECTIONS (410) 313-1070
AUTOMATED INFORMATION (410) 313-2222

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER
300144945

Building Address 1015 Neade Mill Rd.
Woodburne MD 21797
Suite/Apt. #: _____ SDP/WP/Petition #: _____
Census Tract 604002 Subdivision Noah's Woodrow
Section 1 Area _____ Lot 1
Tax Map 8 Parcel 166 Grid 5
Zoning RCDDO Map Coordinates _____ Lot size _____

Property Owner's Name Pulte Homes
Address 15015 Edgewood Street
City Baltimore State MD Zip Code 21227
Home Phone _____ Work Phone 443-271-8879
Applicant's Name & Mailing Address, (if other than stated hereon):
Dwight F Brunk T/A Suburban Program
P.O. Box 305
Restertown MD 21136
Phone 410 833 1400 Fax 410 861 8435

Existing Use residential
Proposed Use residential
Estimated Construction Cost \$ 2800.00
Description of Work Install one buried
1000 gallon propane tank connect
to stub out on house

Contractor Company Suburban Program
Contact Person Dwight F Brunk
Address P.O. Box 305
City Restertown State MD Zip Code 21136
License No. GA503094
Phone 410 833 1400 Fax 410 861 8435

Occupant or Tenant _____
Contact Name _____
Address _____
City _____ State _____ Zip Code _____
Phone _____ Fax _____

Engineer or Architect Company _____
Contact Person _____
Address _____
City _____ State _____ Zip Code _____
Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

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

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

Dwight F Brunk
Applicant's Signature
Suburban Program
Title/Company

DWIGHT F BRUNK
Print Name
11-5-2003
Date

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

AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official		
Dev. Engineering, DPZ	<u>11/2/03</u>	<u>[Signature]</u>
Health		
Fire Protection		

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 _____

PROPERTY ID#: 53791

Filing fee \$ _____
Permit fee \$ 100.00
Excise tax \$ 10.00
Add'l per. fee \$ _____
TOTAL FEES \$ 110.00
Sub-total paid \$ _____
Balance due \$ _____
Check # 1917
Validation # 30534

CONTINGENCY CONSTRUCTION START:
ONE STOP SHOP:

Accepted by [Signature]

Distribution of Copies - White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA

SEP-15-2003 14:41

FISHER, COLLINS & CARTER

410 750 3784 P.02/03

GENERAL NOTES:

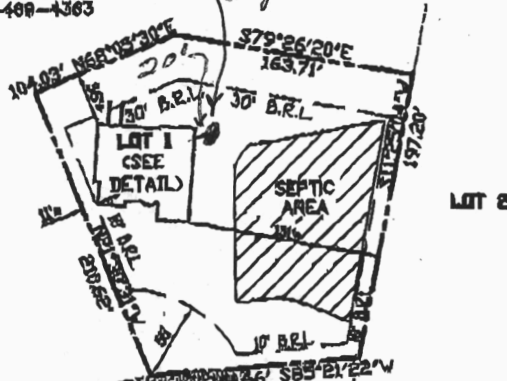
- 1) THIS LOCATION DRAWING IS PREPARED FOR THE BENEFIT OF THE CLIENT SIGNING THE HOUSE LOCATION SURVEY APPROVAL FORM INsofar AS IT IS REQUIRED BY A LENDER OR TITLE INSURANCE COMPANY OR ITS AGENTS IN CONNECTION WITH THE COMTEMPLATED TRANSFER, FINANCING OR REFINANCING OF THE PROPERTY SHOWN HEREON. UNLESS INDICATED AS BEING A BOUNDARY SURVEY, THIS LOCATION DRAWING IS NOT INTENDED FOR USE IN THE ESTABLISHMENT OF PROPERTY LINES AND IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATIONS OF FENCES, GARAGES, BUILDINGS OR OTHER EXISTING OR FUTURE IMPROVEMENTS. AS A RESULT, THIS LOCATION DRAWING DOES NOT PROVIDE FOR ACCURATE IDENTIFICATION OF PROPERTY LINES, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING FOR RE-FINANCING.
- 2) SUBJECT PROPERTY IS SHOWN IN ZONE C ON THE NATIONAL FLOOD INSURANCE PROGRAM FLOOD INSURANCE RATE MAP OF HOWARD COUNTY, MARYLAND, COMMUNITY PANEL No. 2400440002, EFFECTIVE DEC. 4, 1986.
- 3) THE OFFSETS FROM BUILDING LINE TO PROPERTY LINE AS SHOWN ON THE PLAT HEREON ARE TO AN ACCURACY OF PLUS OR MINUS 1/4"
- 4) NO TITLE REPORT FURNISHED. SUBJECT TO ALL EASEMENTS, RIGHTS OF WAY AND CONDITIONS OF RECORD.

OWNER/DEVELOPER
 ELIZABETH C. MULLINEX
 14420 HOWARD ROAD
 DAYTON, MARYLAND 21036-1013
 410-408-4363



HOODS MILL ROAD
 (MD. RTE. 97)
 (EX. 30' R/W FUTURE 60' R/W)

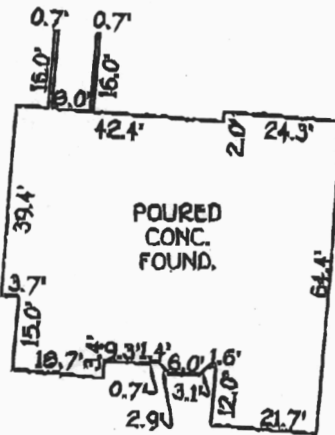
PROPOSED PRIVATE
 USE-IN-COMMON
 ACCESS EASEMENT
 FOR LOTS 1 & 2
 AND
 REMAINDER OF
 PARCEL No. 166



PROPOSED PRIVATE
 STORMWATER MANAGEMENT,
 DRAINAGE AND UTILITY EASEMENT

REMAINDER
 ELIZABETH C. MULLINEX
 L. 896 F. 217
 72,206 AC. ±

BOO 142819
7/03 L.P. Tank
Location OK
(SO)



BOO142819

LOT 1
 NOAH'S MEADOW
 SECTION 1
 LOTS 1 AND 2
 FOURTH ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND
 PLAT REF. 15971

*1015 HOODS MILL ROAD
 B.R.L. = BUILDING RESTRICTION LINE
 TOP OF FOUNDATION ELEV. -609.4'

FISHER, COLLINS & CARTER, INC.
 CIVIL, ARCHITECTURAL, CONSTRUCTION & LAND SURVEYORS
 CERTIFIED, DELAWARE OFFICE - 10700 BALTIMORE NATIONAL PKWY
 GAITHERSBURG, MARYLAND 20878
 410-408-2895



PROFESSIONAL LAND SURVEYOR DATE
 REG. 362

HOUSE LOCATION DRAWING

FOUNDATION LOCATION: 9/22/03
 FINAL LOCATION: _____
 BOUNDARY SURVEY: _____

SCALE: 1"=30'
 DATE: 9/22/03
 DRAWN BY: R.L.K.
 CHECKED BY: S.R.P.
 PROJECT No.: 51863

**HOWARD COUNTY
PERMIT APPLICATION**

PERMIT NUMBER

300/42819 BB

Building Address 1015 Route 97
Woodbine Md 21797
Suite/Apt. #: _____ SDP/WP/Petition #: GP03-68
Census Tract 6040.02 Subdivision Noah's Meadow
Section I Area _____ Lot 1
Tax Map 8 Parcel 1016 Grid 5
Zoning RCOE2 Map Coordinates 409 Lot size _____

Property Owner's Name Pulte Homes Inc
Address 1501 S. Edgewood Street
City Baltimore State Md Zip Code 21227
Home Phone _____ Work Phone 410-644-5703
Applicant's Name & Mailing Address, (if other than stated hereon): _____
Phone _____ Fax _____

Existing Use VACANT LOT
Proposed Use SINGLE FAMILY DWELLING
Estimated Construction Cost \$ 120,000
Description of Work CONSTRUCT "COMPLETION"
2STY, FULL BMT, GR, 4FB, 1HB, FP,
3CAR (SBR) OPT: FIN LWT+BATH,
Occupant or Tenant WELLED EXIT
Contact Name _____
Address _____
City _____ State _____ Zip Code _____
Phone _____ Fax _____

Contractor Company Pulte Homes Inc
Contact Person DIANNA WENZLAFF
Address 1501 S. Edgewood St
City Baltimore State Md Zip Code 21227
License No. 516
Phone 410-644-5703 Fax 410-644-2643
Engineer or Architect Company _____
Contact Person _____
Address _____
City _____ State _____ Zip Code _____
Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

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

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1st floor: <u>64'</u> <u>66'</u> 2nd floor: <u>36'</u> <u>66'</u> Basement: <u>64'</u> <u>66'</u> Finished Basement <input checked="" type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms <u>5</u> 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 _____	Water Supply: _____ Public _____ Private <input checked="" type="checkbox"/> Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/> Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input checked="" type="checkbox"/> Sprinkler system: N/A <input checked="" type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____

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 THIS WORK PERMITTED AND POSTING NOTICES.

Scott Link
Applicant's Signature
PULTE HOMES
Title/Company

Scott Link
Print Name
7/3/03
Date

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: _____	58791
State Highways			Rear: _____	Filing fee \$ <u>100</u>
Building Official			Side: _____	Permit fee \$ _____
Dev. Engineering, DPZ	<u>3/7/03</u>	<u>Brian Rubin</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 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>90297</u>
				Validation # <u>27521</u>
				Accepted by _____