

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

B08002559

Building Address 15524 Cottail Oaks Dr
 Suite/Apt. #: _____ SDP/WP/Petition #: _____
 Census Tract _____ Subdivision Princess Anne
 Section _____ Area _____ Lot _____
 Tax Map _____ Parcel _____ Grid _____
 Zoning _____ Map Coordinates _____ Lot size _____

Property Owner's Name Clare Smart
 Address _____
 City _____ State MD Zip Code 21714
 Home Phone (410) 492-4665 Work Phone _____
 Applicant's Name & Mailing Address, (if other than stated hereon): _____
 Phone _____ Fax _____

Existing Use _____
 Proposed Use _____
 Estimated Construction Cost \$ _____
 Description of Work 4

Contractor Company _____
 Contact Person _____
 Address _____
 City _____ State _____ Zip Code _____
 License No. MDTCEP1711
 Phone _____ Fax _____

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

Paul B...
 Applicant's Signature
 Title/Company

Paul B...
 Print Name
 Date

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

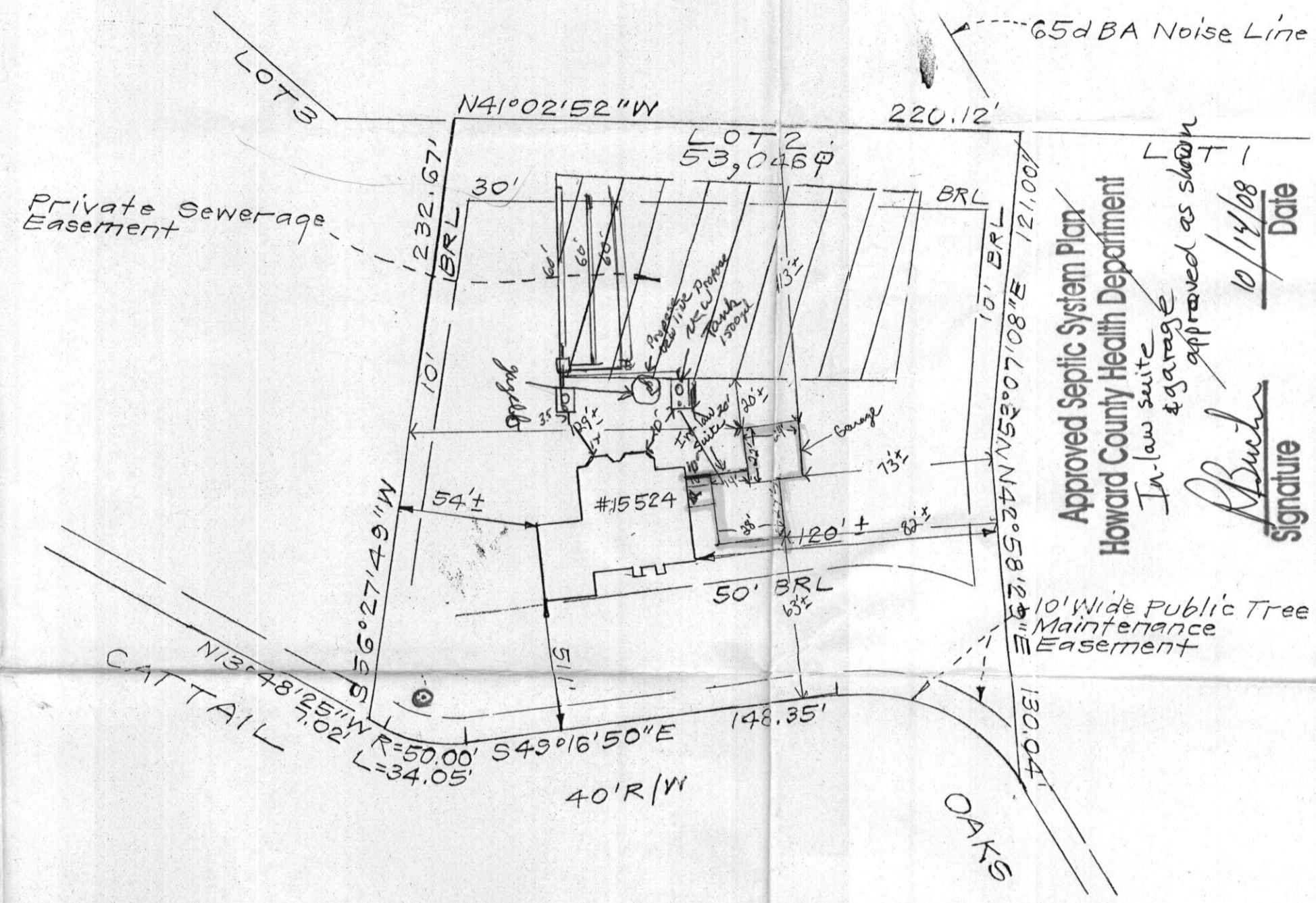
AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official		
Dev. Engineering, DPZ		
Health	<u>10/14/2008</u>	<u>R...</u>
Fire Protection		
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>		
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>		
ONE STOP SHOP: <input type="checkbox"/>		

DPZ SETBACK INFORMATION	PROPERTY ID#:
Front: _____	Filing fee \$ _____
Rear: _____	Permit fee \$ _____
Side: _____	Excise tax \$ _____
Side St.: _____	Add'l per. fee \$ _____
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
Lot Coverage for NewTown Zone _____	Check # <u>CM...</u>
SDP/Red-line approval date _____	Validation # _____
	Accepted by <u>...</u>

NOTE: This lot appears to lie in an area classified as Zone C, area of minimal flooding, as shown on FIRM MAP of Howard County, Maryland, Community Panel Number 2400440020B, Panel 20 of 45, dated December 4, 1986.

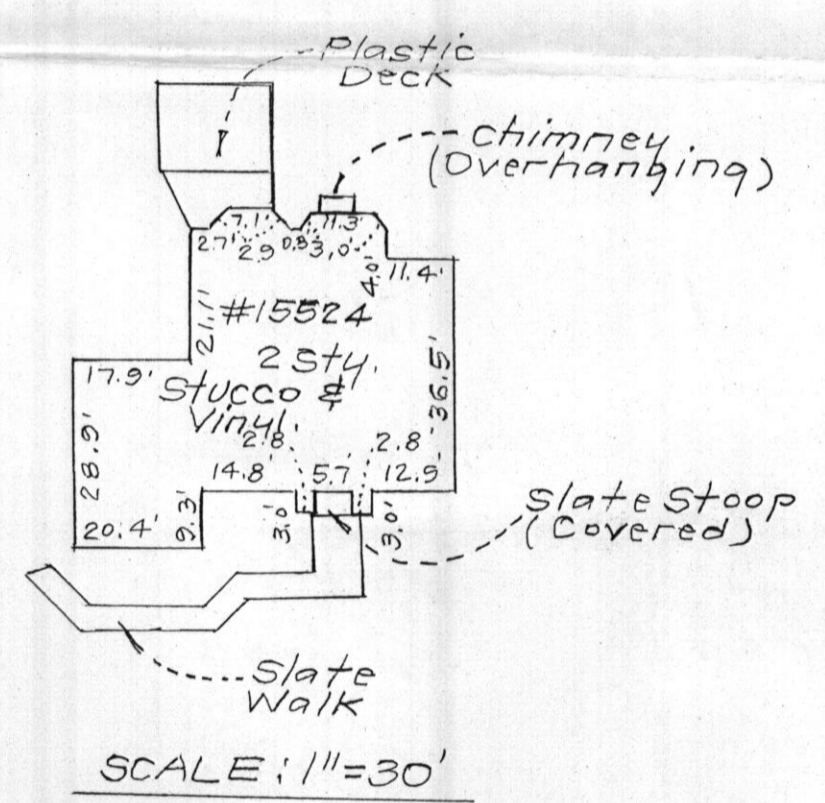
Wall Check: 02-07-01
Top of Wall Elev.: 551.2
Final: 6-7-01

Septic Installation Plan



Well - 548
 Ex Tank 546.25
 outlet
 Inlet to - 546.4
 Dis box
 1st floor level - 552.175
 New Tank 545.5
 Inlet
 Grade over 548
 New Tank

Approved Septic System Plan
 Howard County Health Department
 In-law suite & garage approved as shown
 10/14/08
 Date
 Signature



CONSUMER INFORMATION

1. This plat is of benefit to the consumer only insofar as it is required by a lender of a title insurance company or its agent in connection with contemplated transfer, financing or refinancing purposes;
2. This plat is not to be relied upon for the establishment or location of fences, garages, buildings or other existing or future structures;
3. This plat does not provide for the accurate identification of property boundary lines, but such identification may not be required for the transfer of title or for securing financing or refinancing.

SURVEYOR'S CERTIFICATE

I hereby certify that a field survey of this property has been made under my supervision for the purpose of locating the improvements shown hereon, and that they are located as shown.

6-11-01
DATE

Signature of Surveyor

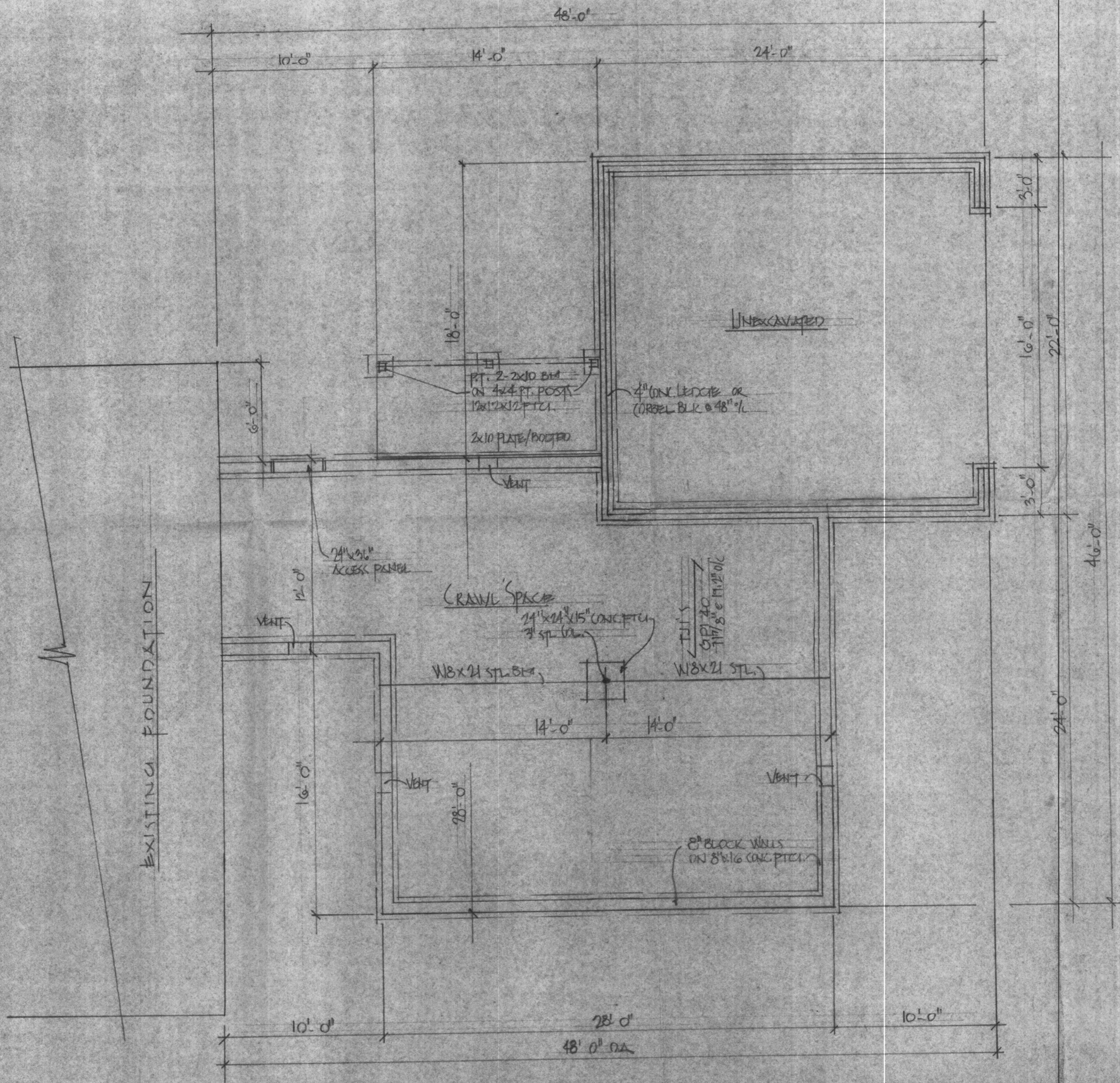


NOTES:

1. The ± setback distance accuracy = 1'

Plat Reference: Plat No. 14573

CLARK • FINEFROCK & SACKETT, INC. ENGINEERS • PLANNERS • SURVEYORS 7135 MINSTREL WAY • COLUMBIA, MD 21045 • (410) 381-7500 BALT. • (301) 621-8100 WASH.		
DESIGNED	LOCATION DRAWING 15524 CATTAIL OAKS LOT 2	SCALE 1"=50'
DRAWN	PEACEFIELDS AT CATTAIL CREEK LOTS 1 THRU 15 AND PRESERVATION PARCELS 'A' THRU 'C' ZONED: RR-DEO	DRAWING 1 OF 1
CHECKED	(A RESUBDIVISION OF LOTS 1 AND 2, "PEACEFIELDS - LOTS 1 AND 2", PLAT No. 11105) FOURTH ELECTION DISTRICT HOWARD COUNTY, MARYLAND	JOB NO. 00-022
DATE	06-08-01	FILE NO. 00-022-0



FOUNDATION PLAN - SCALE 1/4" = 1'-0"

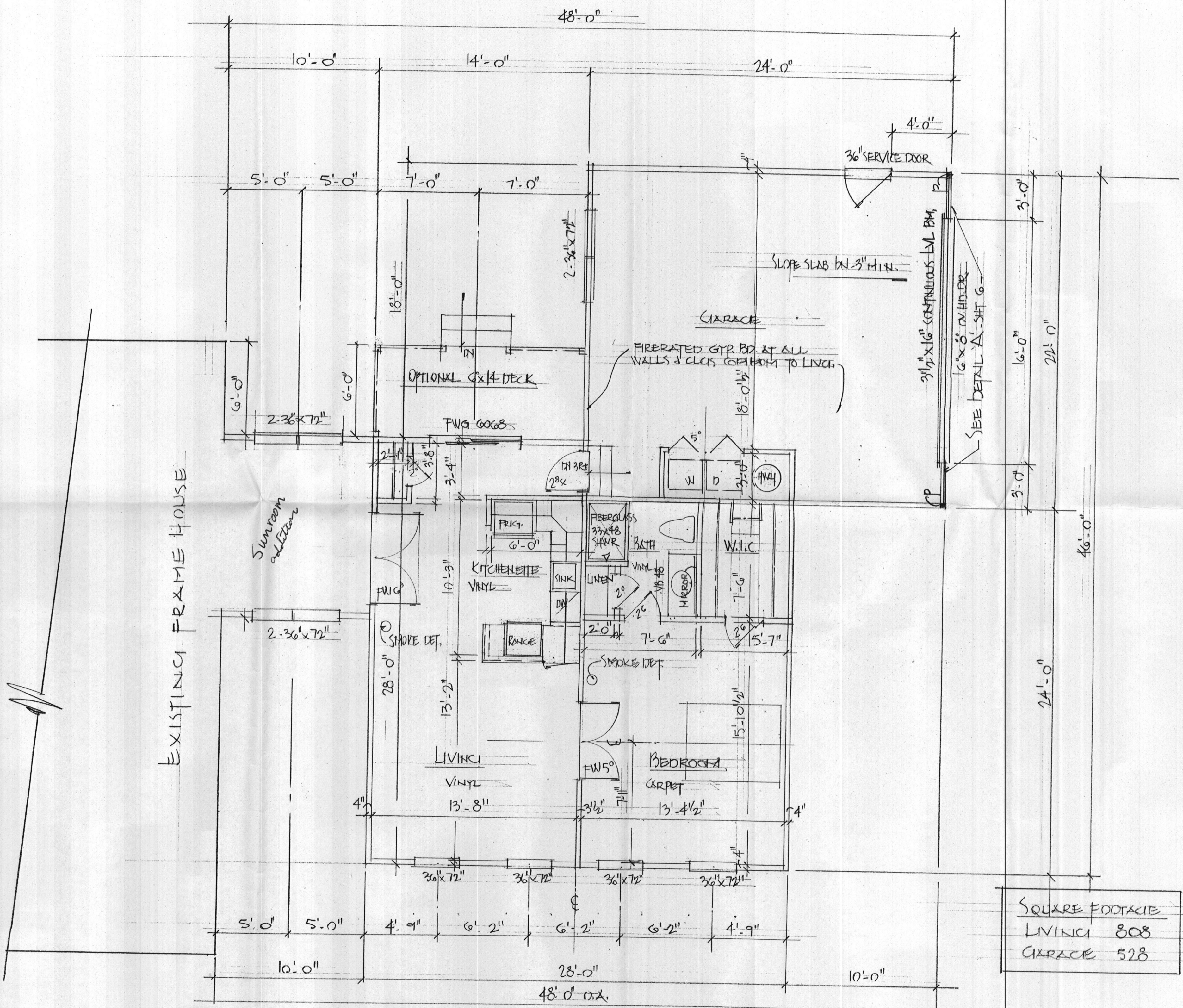
PROPOSED ADDITION TO THE
 SMART RESIDENCE
 HOWARD COUNTY, MD

DATE
 3 JUNE 2008
 26 JULY 2008

BARNARD BROTHERS CONSTRUCTION
 WOODBINE, MD
 410-489-7821

TERRI REITER
 DRAFTING SERVICE
 3929 BOTTLER RD
 MT AIRY, MD 21771
 301-829-4635

SHEET
 3
 OF 6



EXISTING FRAME HOUSE

Sunroom addition

SQUARE FOOTAGE	
LIVING	808
GARAGE	528

MAIN FLOOR PLAN - SCALE 1/4"=1'-0"

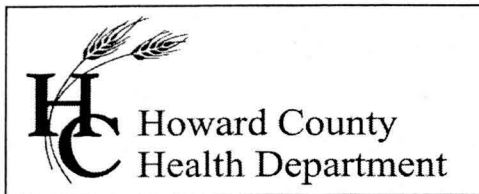
PROPOSED ADDITION TO THE
SMART RESIDENCE
 HOWARD COUNTY, MD

DATE
 2 JUNE 2008
 26 AUG. 2008

BARNARD BROTHERS CONSTRUCTION
 WOODBINE, MD
 410-489-7621

FERRI REITER
 DRAFTING SERVICE
 3929 BOTTLER RD
 MT AIRY, MD 21771
 301-829-4635

SHEET
 4
 OF 6



Bureau of Environmental Health
7178 Columbia Gateway Drive, Columbia MD 21046
(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

September 17, 2008

Elaine Smart-Hoffman
15524 Cattail Oaks
Glenwood, MD 21738

RE: **Variance Approval**
15524 Cattail Oaks
Glenwood, MD 21738

Dear Madam:

The Department of Health has received your variance request dated September 16, 2008 for the above referenced property. This agency will grant **approval** of the variance provided that the attached garage is constructed no closer than ten (10) feet to the existing sewage disposal area and the driveway is not constructed over the sewage disposal area. Approval of a building permit will be granted by this Department provided that the site plan submitted with the building permit application is consistent with the site plan approved under this variance request and illustrates a driveway location that does not extend over the sewage disposal area. Any deviations from the site plan submitted with the request will be subject to further review by this Department.

Any questions regarding this decision may be directed to the Well and Septic Program of the Howard County Health Department.

Respectfully,

Michael J. Davis, R.S.
Assistant Director
Bureau of Environmental Health

cc: File

September 16, 2008

Michael Davis
Assistant Director
Bureau of Environmental Health

Dear Sir:

This letter is to request a variance from requirement of 20 Feet setback to structural foundation per Howard County Code (3.808C).

The proposed garage is on slab, septic easement is slightly down slope, the distance of current approved easement from proposed garage ranges from 20 ft. to minimum of 15 feet.

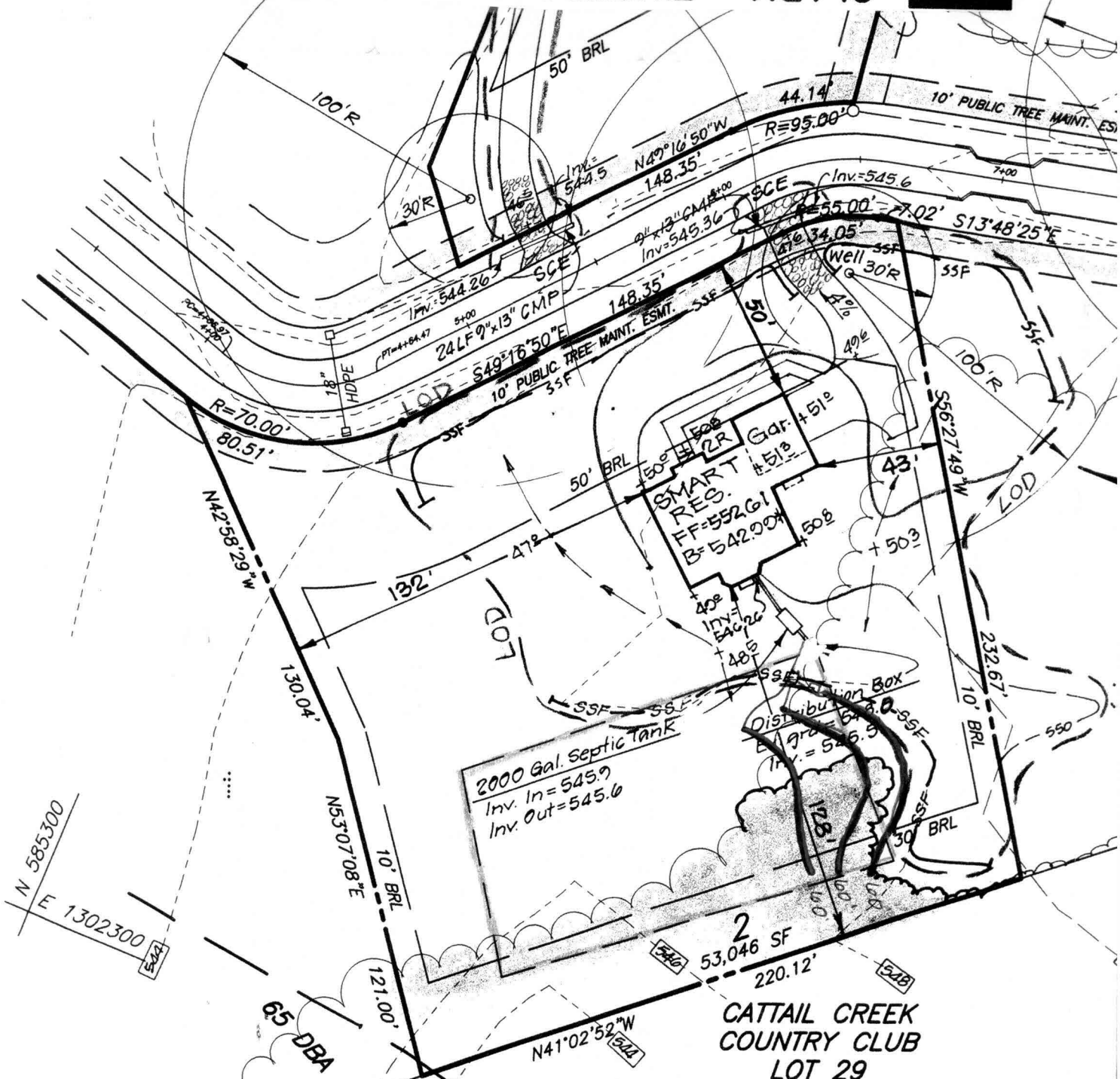
Building Permit (B08002559) proposed is to add a one bedroom In-Law suite and attached garage to existing four bedroom single family dwelling.

Sincerely,

Elaine Smart-Hoffman

Elaine Smart-Hoffman
15524 Cattail Oaks
Glenwood, MD 21738

CLARK • FINEFROCK & SACKETT, INC.
 ENGINEERS • PLANNERS • SURVEYORS



Approved Septic System Plan
 Howard County Health Department

Total linear feet of trench
 required 180 feet

Width of trench(es) 2.0 feet

Depth of trench(es) 6.5 feet

Depth of stone required below
 distribution pipe 4.5 feet

Ami M. Hill
 Signature Date 1/24/01