

**HOWARD COUNTY  
 PERMIT APPLICATION**

**PERMIT NUMBER**

*B100026931*

Building Address 16358 Cottan River Drive  
 Suite/Apt. #: \_\_\_\_\_ SDP/WP/Petition #: \_\_\_\_\_  
 Census Tract \_\_\_\_\_ Subdivision The Chase at Stony Brooke  
 Section \_\_\_\_\_ Area \_\_\_\_\_ Lot 20  
 Tax Map 7 Parcel 1 Grid 17  
 Zoning \_\_\_\_\_ Map Coordinates \_\_\_\_\_ Lot Size \_\_\_\_\_

Property Owner's Name Tanity Quality Homes  
 Address \_\_\_\_\_  
 City Ellicott City State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
 Applicant's Name & Mailing Address, (if other than stated herein):  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_

Existing Use Vacant Lot  
 Proposed Use SFD  
 Estimated Construction Cost \$ \_\_\_\_\_  
 Description of Work \_\_\_\_\_

Contractor Company \_\_\_\_\_  
 Contact Person \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 License No. \_\_\_\_\_  
 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**

<b>Building Characteristics</b>	<b>Utilities</b>
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 <input type="checkbox"/> 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"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads _____

<b>Building Characteristics</b>	<b>Utilities</b>
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private
Depth _____ Width _____	Sewage Disposal: _____ <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
1 <sup>st</sup> floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
2 <sup>nd</sup> floor: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: _____	Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input checked="" type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Sprinkler system: N/A <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other: _____
No. of Bedrooms <u>4</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: _____	
<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.

Applicant's Signature \_\_\_\_\_  
 Email Address \_\_\_\_\_  
 Title/Company \_\_\_\_\_

Print Name \_\_\_\_\_  
 Date \_\_\_\_\_

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

<b>AGENCY</b>	<b>DATE</b>	<b>SIGNATURE APPROVAL</b>
Land Development, DPZ		
State Highways		
Building Officials		
Dev. Engineering, DPZ		
Health	<u>3/31/2010</u>	<u>[Signature]</u>
Fire Protection		

Is Sediment Control approval required prior to 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

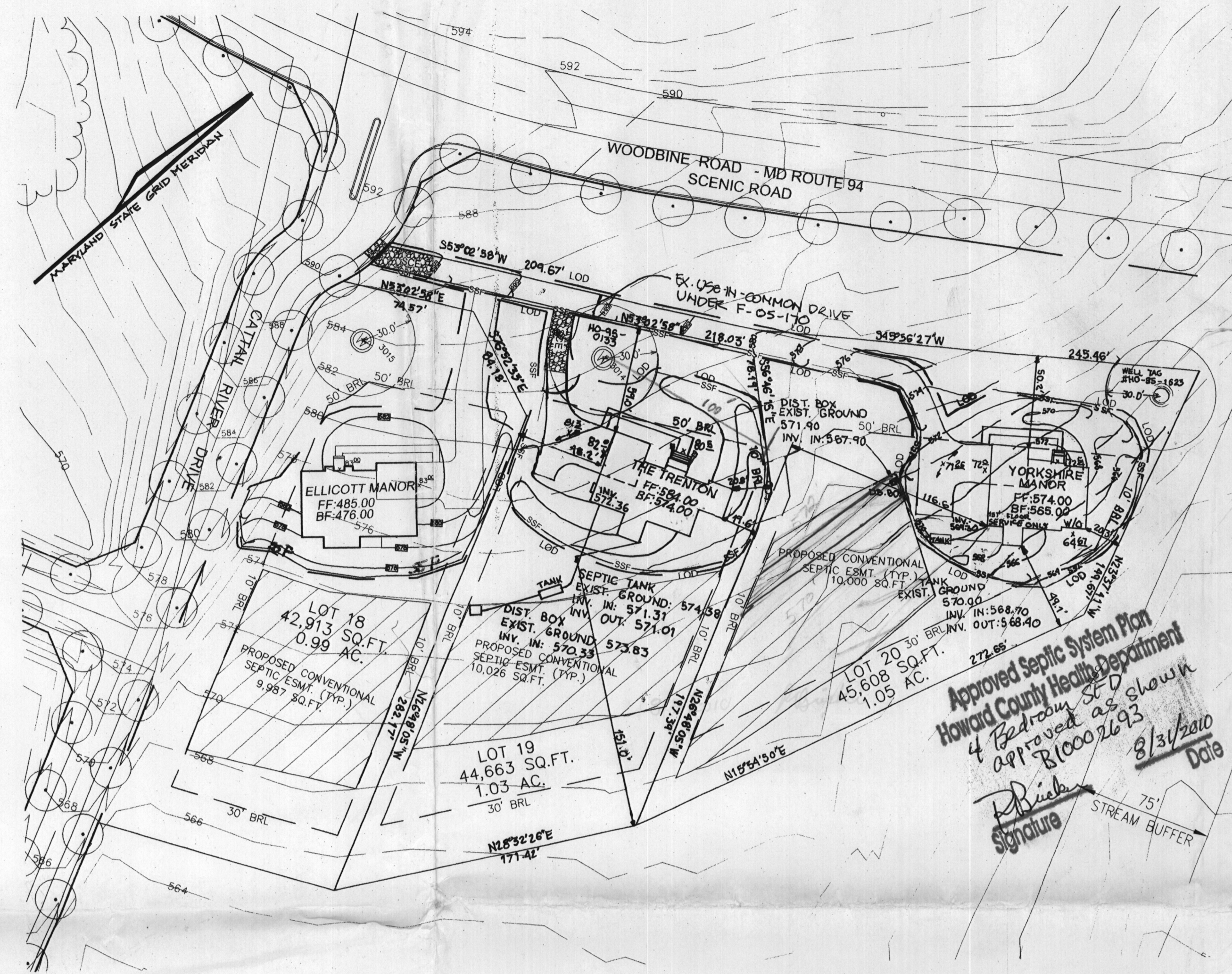
Historic District?  
 YES  NO

Lot Coverage for New Town Zone \_\_\_\_\_  
 SDP/Red-line approval date \_\_\_\_\_

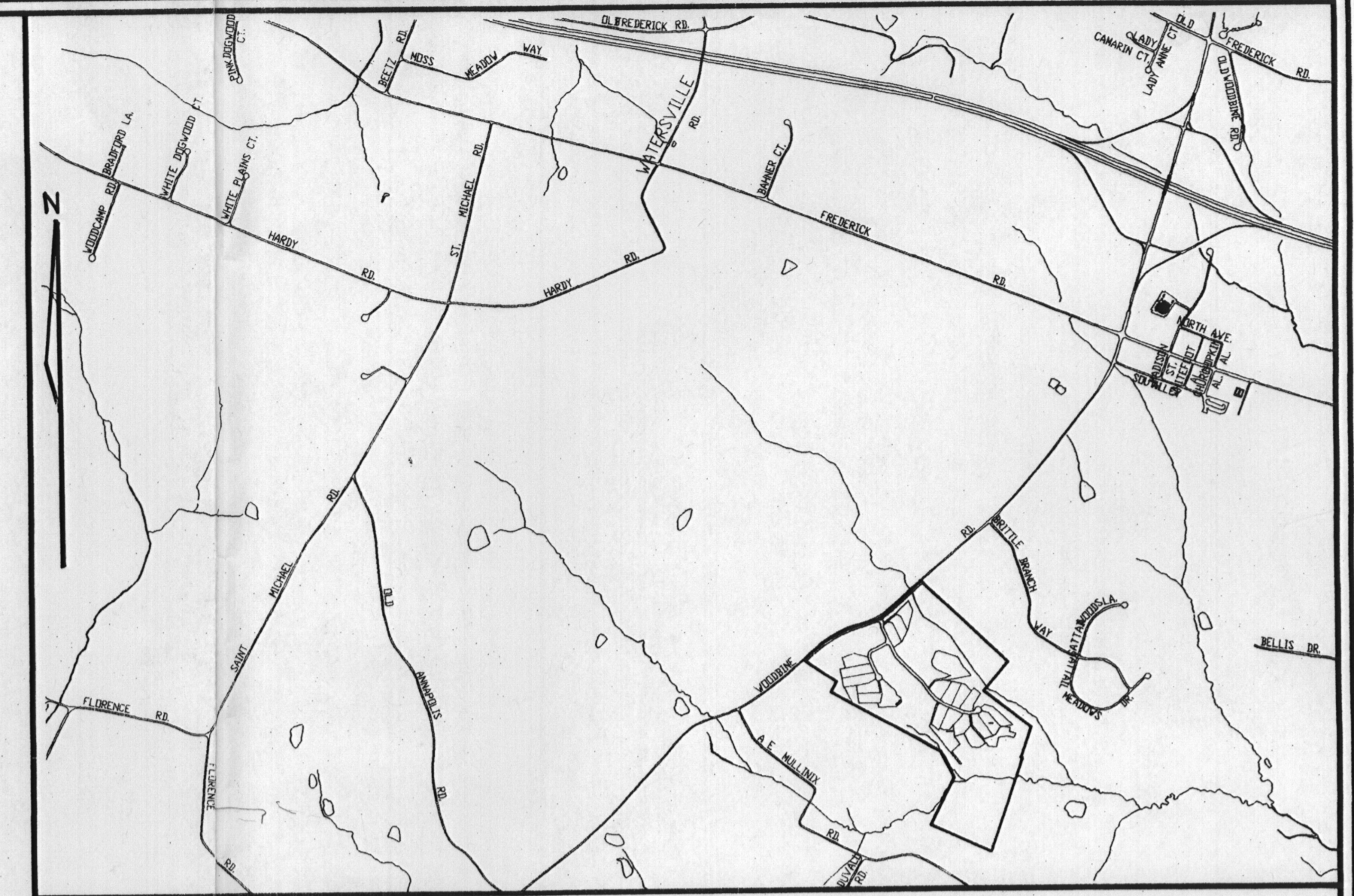
**PROPERTY ID #**

Filing fee \$ \_\_\_\_\_  
 Permit fee \$ \_\_\_\_\_  
 Excise tax \$ \_\_\_\_\_  
 Add'l per fee \$ \_\_\_\_\_  
 TOTAL FEES \$ \_\_\_\_\_  
 Sub-total paid \$ \_\_\_\_\_  
 Balance due \$ \_\_\_\_\_  
 Check # \_\_\_\_\_  
 Validation # \_\_\_\_\_

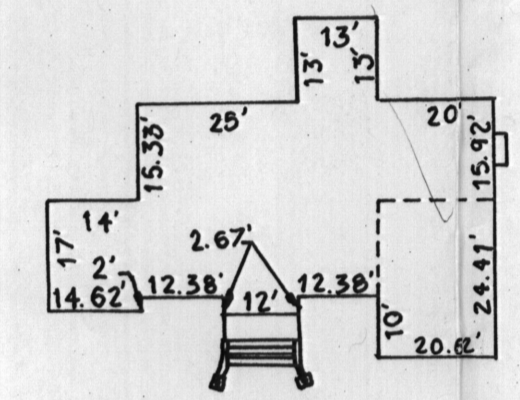
Accepted by \_\_\_\_\_



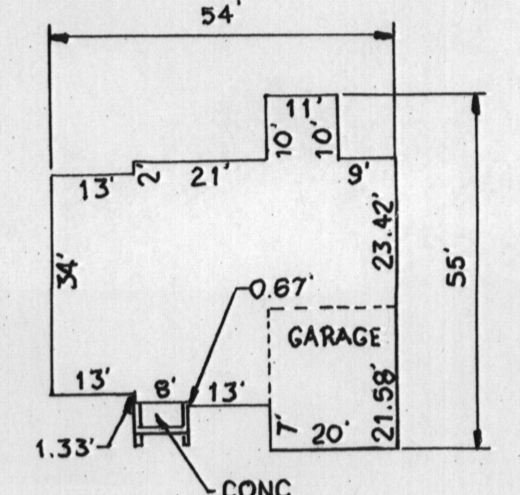
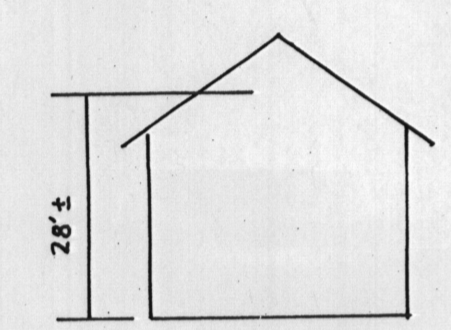
PLAN  
SCALE: 1"=50'



VICINITY MAP  
SCALE: 1"=2000'



THE TRENTON HOUSE PLAN  
1"=30'



THE YORKSHIRE MANOR HOUSE PLAN  
1"=30'

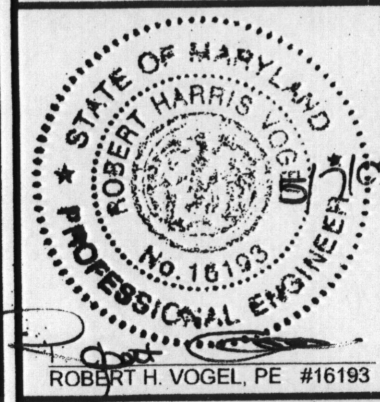
THE EXISTING WELL SHOWN ON LOT 20 TAG NO. HD 951623 HAS BEEN FIELD LOCATED BY ROBERT H. VOGEL ENGINEERING, INC. BUILDING OF LOT 20 FLOOR AREAS:  
BASEMENT FLOOR AREA: 1605 S.F.  
FIRST FLOOR AREA: 1710 S.F.  
SECOND FLOOR AREA: 1790 S.F.  
NUMBER OF BEDROOMS: Four  
SWM FOR THESE LOTS IS PROVIDED BY AN EXISTING EXTENDED DETENTION FACILITY UNDER F-05-170.

LEGEND	
—202—	EXISTING 2 FT CONTOUR
—200—	EXISTING 10 FT CONTOUR
LOD	LIMIT OF DISTURBANCE
—SSF—	SUPER SILT FENCE

FOR GRADING PERMIT REFERENCE GP-07-69

GRADING AND SEDIMENT EROSION CONTROL PLAN  
THE CHASE AT STONEYBROOK  
PHASE I LOTS 18-20  
BUILDING PERMIT NO. \_\_\_\_\_  
REF. S-01-21, P-05-001, F-05-170  
ZONED: RC-DEO  
TAX MAP: 7 BLOCK: 17  
4TH ELECTION DISTRICT  
PARCEL 133  
HOWARD COUNTY, MARYLAND

**ROBERT H. VOGEL ENGINEERING, INC.**  
ENGINEERS • SURVEYORS • PLANNERS  
8407 MAIN STREET  
ELLCOTT CITY, MD 21043  
TEL: 410.461.7666  
FAX: 410.461.8961



DESIGN BY: RJ  
DRAWN BY: RJ  
CHECKED BY: RHV  
DATE: JANUARY 2007  
SCALE: 1"=50'  
W.D. NO.: 06-34-00

3 SHEET OF 4

OWNER / DEVELOPER  
TRINITY QUALITY HOMES, INC.  
3675 PARK AVENUE, SUITE 301  
ELLCOTT CITY, MARYLAND 21043  
(410) 480-0023

NOTE: STOCKPILING WILL BE PERMITTED ON EACH LOT ONLY.

REVIEWED FOR HOWARD SCD AND MEETS TECHNICAL REQUIREMENTS  
*Jim Meyer* 5/1/07  
DATE

ENGINEERS CERTIFICATE  
I CERTIFY THAT THIS PLAN FOR SEDIMENT AND EROSION CONTROL REPRESENTS A PRACTICAL AND WORKABLE PLAN BASED ON MY PERSONAL KNOWLEDGE OF THE SITE CONDITIONS AND THAT IT WAS PREPARED IN ACCORDANCE WITH THE REQUIREMENTS OF THE HOWARD SOIL CONSERVATION DISTRICT.  
*Robert H. Vogel* 5/1/07  
ROBERT H. VOGEL, PE #16193 DATE

DEVELOPER'S CERTIFICATE  
I/WE CERTIFY THAT ALL DEVELOPMENT AND CONSTRUCTION WILL BE DONE ACCORDING TO THIS PLAN FOR SEDIMENT AND EROSION CONTROL, AND THAT ALL RESPONSIBLE PERSONNEL INVOLVED IN THE CONSTRUCTION PROJECT WILL HAVE A CERTIFICATE OF ATTENDANCE AT A DEPARTMENT OF THE ENVIRONMENT APPROVED TRAINING PROGRAM FOR THE CONTROL OF SEDIMENT AND EROSION BEFORE BEGINNING THE PROJECT. I ALSO AUTHORIZE PERIODIC ON-SITE INSPECTION BY THE HOWARD SOIL CONSERVATION DISTRICT.  
*Michael L. Pfaud* 05/12/07  
MICHAEL L. PFAU DATE

GP-07-69

Permits: 410-313-2455  
 Inspections: 410-313-1810  
 Automated Line: 410-313-3800

*Walk-Through*  
 Howard County Building/Fire Permit Application  
 Department of Inspections, Licenses & Permits  
 3430 Court House Drive  
 Ellicott City, MD 21043

Permit Number:

*B10003400*

Building Address: 16358 Cattail River Dr  
Woodbine md 21797

Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_

Census Tract: \_\_\_\_\_ Subdivision: Chase @ Stonebrook

Section: \_\_\_\_\_ Area: 2 Lot: 20

Tax Map: 7 Parcel: 133 Grid: 17

Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: 1.05 A

Existing Use: SFD

Proposed Use: SFD

Estimated Construction Cost: \$ 6,000

Description of Work:  
Install 500 gal. inground propane  
Tank

Occupant or Tenant: \_\_\_\_\_

Was tenant space previously occupied?  Yes  No

Contact Name: \_\_\_\_\_

Address: Homeowner

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Property Owner's Name: Trinity Quality Homes inc.

Address: 3675 park Ave. Ste. 301

City: Ellicott City State: md Zip Code: 21043

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Applicant's Name & Mailing Address, (If other than stated herein):  
Jeremy Clancy 7051 macbeth way  
Eldersburg md 21784

Phone: 443-340-1229 Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Contractor Company: Valley National Gas

Contact Person: William Gernig

Address: 7201 montevideo Rd

City: Jessup State: md Zip Code: 20794

License No.: 67793

Phone: 410-799-1114 Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Engineer/Architect Company: \_\_\_\_\_

Responsible Design Prof.: \_\_\_\_\_

Address: Contractor

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

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 type="checkbox"/> No
	Gas: <input type="checkbox"/> Yes <input 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 type="checkbox"/> Partial
	<input type="checkbox"/> Other Suppression
	No. of Heads: _____

**BUILDING DESCRIPTION - RESIDENTIAL**

Building Characteristics	Utilities
<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>
<u>Depth</u> <u>Width</u>	<input type="checkbox"/> Public
1 <sup>st</sup> floor:	<input checked="" type="checkbox"/> Private
2 <sup>nd</sup> floor:	<u>Sewage Disposal</u>
Basement:	<input type="checkbox"/> Public
<input type="checkbox"/> Finished Basement	<input checked="" type="checkbox"/> Private
<input type="checkbox"/> Unfinished Basement	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Crawl Space	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Slab on Grade	<u>Heating System</u>
No. of Bedrooms:	<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:	
Dimensions:	
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.

Applicant's Signature: [Signature]

Print Name: Jeremy Clancy

Date: 11/1/10

Applied And Approved By: Auto.com

Email Address: Permits

Title/Company: \_\_\_\_\_

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>1-1-10</u>	<u>[Signature]</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? <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:
SDP/Red-line approval date:

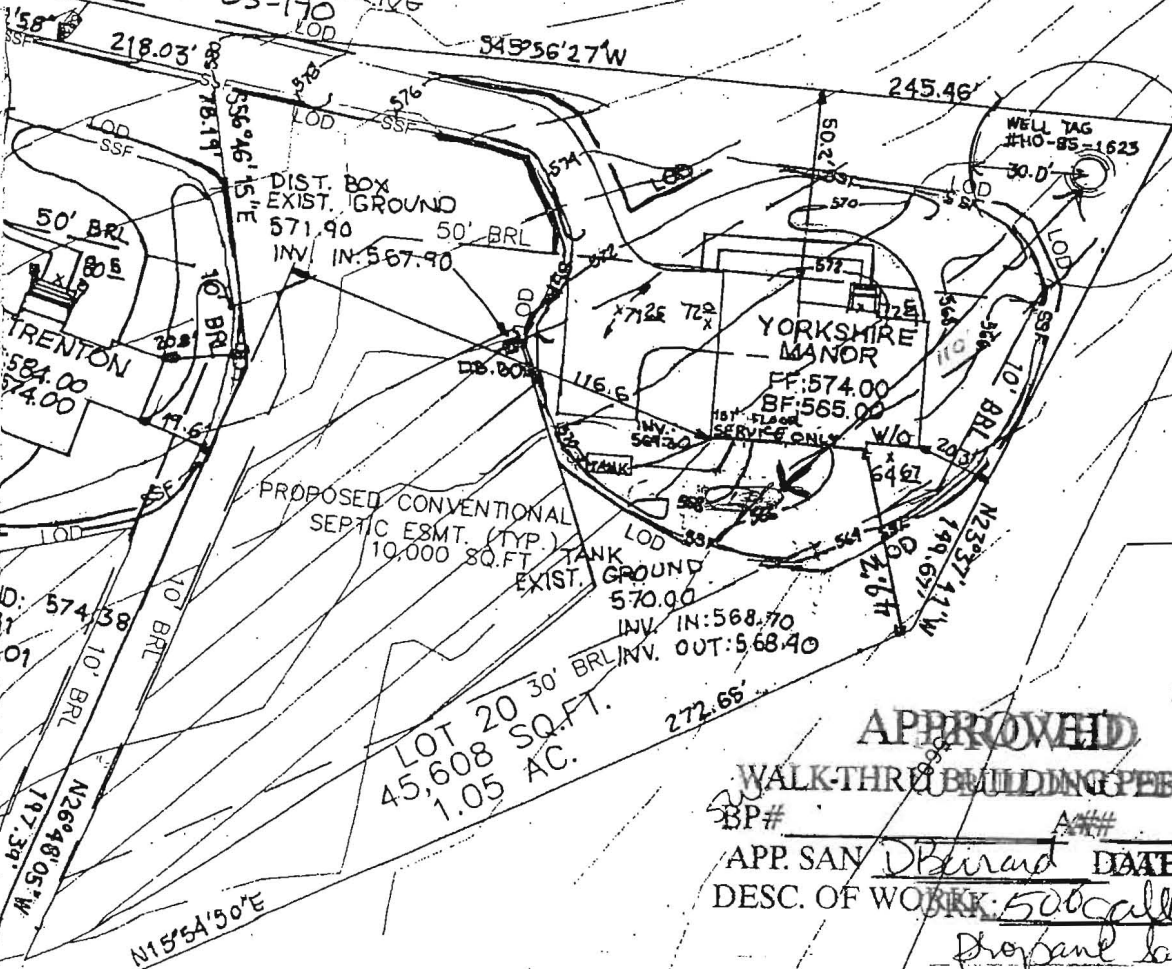
Filing Fee	\$
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$

Scale 1"=50'

116358 Cattail River Dr.

BINE ROAD - MD ROUTE 94  
SCENIC ROAD

EX. USE IN-COMMON DRIVE  
UNDER F-05-170



LOT 20 30' BRL  
45,608 SQ.FT.  
1.05 AC.

**APPROVED**  
**WALK-THRU BUILDING PERMIT**

BP# \_\_\_\_\_ A# \_\_\_\_\_  
APP. SAN D. Beard DATE: 1-1-10

DESC. OF WORK: 500 gallon inground propane tank