

**HOWARD COUNTY
 PERMIT APPLICATION**

**B10000505
 PERMIT NUMBER**

Building Address: 13021 Deanna Drive
Highland MD 20777
 Suite/Apt. #: _____ SDP/WP/Petition #: _____
 Census Tract _____ Subdivision Owings
 Section _____ Area _____ Lot 32
 Tax Map 4 Parcel 111 Grid _____
 Zoning _____ Map Coordinates _____ Lot Size _____

Property Owner's Name: Richard Kaiser
 Address: P.O. Box 99
 City: Highland State: MD Zip Code: 20777
 Home Phone _____ Work Phone _____
 Applicant's Name & Mailing Address, (if other than stated herein): _____
 Phone _____ Fax _____

Existing Use _____
 Proposed Use _____
 Estimated Construction Cost \$ _____
 Description of Work: _____
 Occupant or Tenant _____
 Contact Name _____
 Address _____
 City _____ State _____ Zip Code _____
 Phone _____ Fax _____

Contractor Company: Compass Homes
 Contact Person: Ann Ferrier
 Address: 14000 Glen Way
 City: Clarksville State: MD Zip Code: 21029
 License No. _____
 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"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ State Certified Modular _____	Sprinkler system: N/A <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____

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

Applicant's Signature _____
 Title/Company _____

Print Name _____
 Date _____

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
****PLEASE WRITE NEATLY AND LEGIBLY.****

AGENCY	DATE	SIGNATURE	APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID #
Land Development, DPZ				Front: _____	Filing fee \$ _____
State Highways				Rear: _____	Permit fee \$ _____
Building Officials				Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ				Side St.: _____	Add'l per fee \$ _____
Health	<u>3-19-10</u>	<u>Heidi Smith</u>		All minimum setbacks met?	TOTAL FEES \$ _____
Fire Protection				YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Sediment Control approval required prior to issuance?				Is Entrance Permit Required?	Balance due \$ _____
YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>				YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # <u>1113</u>
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>				Historic District?	Validation # _____
ONE STOP SHOP: <input type="checkbox"/>				YES <input type="checkbox"/> NO <input type="checkbox"/>	
				Lot Coverage for New Town Zone _____	Accepted by <u>_____</u>
				SDP/Red-line approval date _____	

NOTES:

1. TOPOGRAPHY SHOWN HEREON WAS FIELD-RUN BY SHANABERGER & LANE IN OCTOBER, 2009.
2. EXISTING WELLS SHOWN ON THIS PLAN WERE FIELD-LOCATED.
3. LEGEND
 - DESIGNATES LIMIT OF DISTURBANCE
 - - - - DESIGNATES PROPOSED SILT FENCE
 - 542 --- DESIGNATES EXISTING CONTOUR
 - 542 --- DESIGNATES PROPOSED CONTOUR
 - 542x3 --- DESIGNATES PROPOSED SPOT ELEVATION
 - DESIGNATES BUILDING RESTRICTION LINE
 - [] DESIGNATES PROPOSED DRIVEWAY
 - [] DESIGNATES EXISTING DRIVEWAY
 - [] DESIGNATES EXISTING DRAINAGE & UTILITY EASEMENT
 - [] DESIGNATES REVISED PRIVATE SEWAGE EASEMENT APPROVED 2/8/2010
 - [] DESIGNATES ORIGINAL REVISED PRIVATE SEWAGE PER PLATS #18941-2
 - ⊙ DESIGNATES EXISTING WELL LOCATION
4. TOTAL DISTURBED AREA 20,186 SQ. FT.±
5. STORMWATER MANAGEMENT WAS PROVIDED WITH F-07-137.
6. TOTAL AMOUNT OF SILT FENCE SHOWN: 220 LF

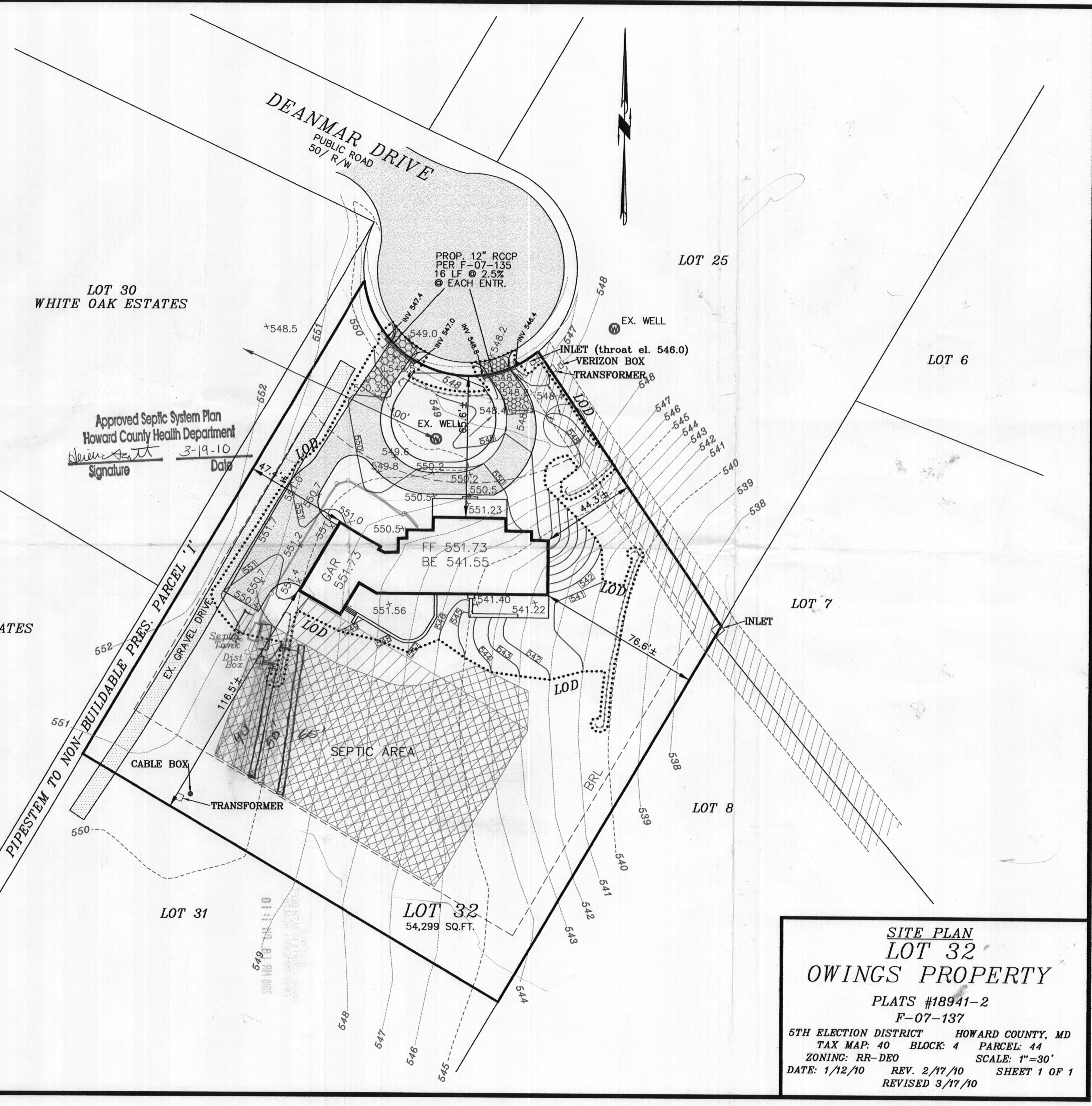
SEPTIC SYSTEM DATA

HOUSE	
INV. AT HOUSE	548.3
SEPTIC TANK	
EX. GRADE	550.7
FIN. GRADE	550.7
INV. IN	546.80
INV. OUT	546.50
DISTRIBUTION BOX	
EX. GRADE	550.6
FIN. GRADE	550.6
INV. IN	546.40

AN EJECTOR PUMP WILL BE USED.
1.24% SLOPE FROM INV. AT HOUSE TO TANK.
DIST.BOX & TRENCH INVERTS, NUMBER & LENGTH OF TRENCHES, TO BE DETERMINED BY BUREAU OF ENVIRONMENTAL HEALTH

SHANABERGER & LANE

8726 TOWN & COUNTRY BLVD.
SUITE 201
ELLCOTT CITY, MD. 21043
PHONE: 410-461-9563
FAX: 410-461-9693



**SITE PLAN
LOT 32
OWINGS PROPERTY**

PLATS #18941-2
F-07-137
5TH ELECTION DISTRICT HOWARD COUNTY, MD
TAX MAP: 40 BLOCK: 4 PARCEL: 44
ZONING: RR-DEO SCALE: 1"=30'
DATE: 1/12/10 REV. 2/17/10 SHEET 1 OF 1
REVISED 3/17/10

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

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

Permit Number:
B/1000031

Building Address: 13021 Dean Mar Rd
Highland, MD 20777

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

Census Tract: _____ Subdivision: _____

Section: _____ Area: _____ Lot: _____

Tax Map: _____ Parcel: _____ Grid: _____

Zoning: _____ Map Coordinates: _____ Lot Size: _____

Property Owner's Name: Richard Kaiser
 Address: 13021 Dean Mar Rd
 City: Highland State: MD Zip Code: 20777
 Home Phone: 301-586-8400 Work Phone: 301-922-7867

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

Phone: _____ Fax: _____
 Email: _____

Existing Use: Self Dwelling
 Proposed Use: Same
 Estimated Construction Cost: \$ 4,000
 Description of Work: To buy 1-500 gallon propane tank

Contractor Company: Suburban Propane
 Contact Person: James McKenney
 Address: 31 Derwood Cr.
 City: Rockville State: MD Zip Code: 20850
 License No.: 78260
 Phone: 301-573-7442 Fax: 301-551-8931
 Email: jmckenney@suburbanpropane.com

Occupant or Tenant: _____

Was tenant space previously occupied? Yes No

Contact Name: Richard Kaiser
 Address: 13021 Dean Mar Rd
 City: Highland State: MD Zip Code: 20777
 Phone: 301-922-7867 Fax: _____
 Email: _____

Engineer/Architect Company: _____
 Responsible Design Prof.: _____
 Address: _____
 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 checked="" type="checkbox"/> Roadside Tree Project Permit	<input type="checkbox"/> Partial
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Other Suppression
<u>Roadside Tree Project Permit #</u>	No. of Heads:

BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics	Utilities
<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>
<u>Depth</u> <u>Width</u>	<input type="checkbox"/> Public
1 st floor:	<input checked="" type="checkbox"/> Private
2 nd 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:	<input checked="" type="checkbox"/> Roadside Tree Project Permit
Footings:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Roof:	<u>Roadside Tree Project Permit #</u>
<input type="checkbox"/> State Certified Modular	
<input type="checkbox"/> Manufactured Home	

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Applicant's Signature: [Signature] Print Name: James McKenney
 Email Address: jmckenney@suburbanpropane.com Date: 1/4/11
 Title/Company: Operations Mgr./Suburban Propane

RECEIVED
 JAN 4 2011

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

LICENSES & PERMITS DIVISION

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	<u>1/4/11</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? Yes No
 Is Entrance Permit Required? Yes No
 Historic District? Yes No
 Lot Coverage for New Town Zone: _____
 SDP/Red-line approval date: _____

Filing Fee	\$	<u>710.00</u>
Permit Fee	\$	
Tech Fee	\$	
Excise Tax	\$	
PSFS	\$	
Guaranty Fund	\$	
Add'l per Fee	\$	
Total Fees	\$	
Sub- Total Paid	\$	
Balance Due	\$	

Discover
228286