

B12001564

Building Address: 14855 Michele Drive
Glencely MD 21737

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

Census Tract: _____ Subdivision: The Warfield II

Section: _____ Area: _____ Lot: 27

Tax Map: 27 Parcel: 114 Grid: 5

Zoning: _____ Map Coordinates: _____ Lot Size: 41956 sq ft

Existing Use: SFD

Proposed Use: SFD w/ propane tank

Estimated Construction Cost: \$ 8000

Description of Work: Install 1000 Gal. in ground propane tank

Occupant or Tenant: _____

Was tenant space previously occupied? Yes No

Contact Name: Owner

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

Property Owner's Name: Kennard & Mary Warfield

Address: 14451 Tridelpia Rd.

City: Glencely State: MD Zip Code: 21737

Home Phone: _____ Work Phone: _____

Applicant's Name & Mailing Address, (if other than stated herein):
Jeremy Clancy PO Box 1253
Sikeston MD 21784

Phone: 443607574 Fax: _____

Email: Jeremy@appliedandapproved.com

Contractor Company: Valley National Gas

Contact Person: William Gerwig

Address: 7201 Montemarlo Rd

City: Jessup State: MD Zip Code: 20794

License No.: 62793

Phone: 4107991114 Fax: _____

Email: jkennedy@mathesonogas.com

Engineer/Architect Company: Contractor

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 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 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 checked="" type="checkbox"/> No
<input type="checkbox"/> Crawl Space	Gas: <input type="checkbox"/> Yes <input checked="" 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:	<input checked="" type="checkbox"/> Roadside Tree Project Permit
Roof:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> State Certified Modular	<u>Roadside Tree Project Permit #</u>
<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: Jeremy Clancy

Email Address: Permit

Title/Company: _____

Print Name: Jeremy Clancy

Date: 5/9/10

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>5-23-10</u>	<u>Dana Bernard</u>
Fire Protection		

DPZ SETBACK INFORMATION

Front: _____

Rear: _____

Side: _____

Side St.: _____

All minimum setbacks met? Yes No

Is Entrance Permit Required? Yes No

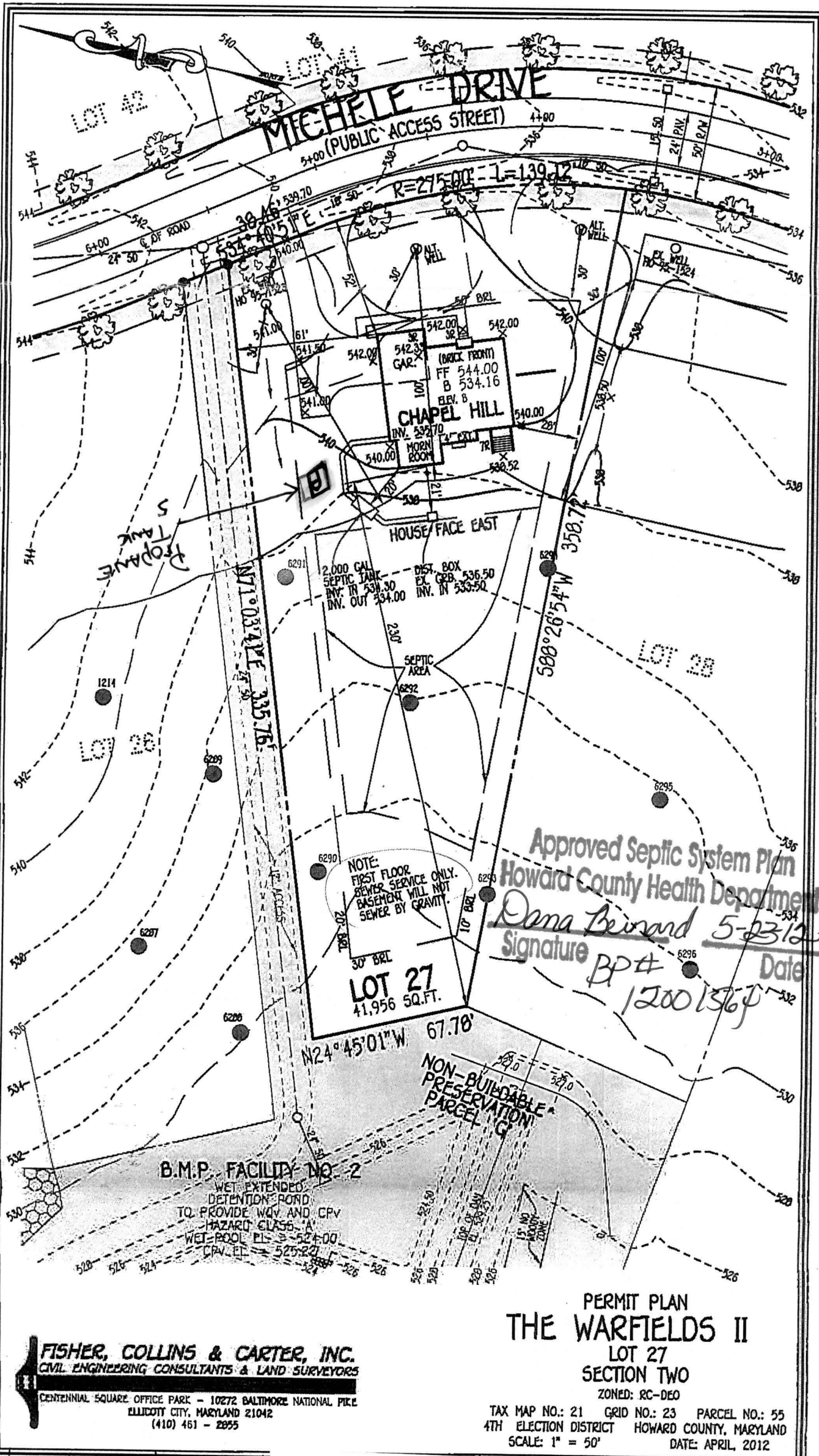
Historic District? Yes No

Lot Coverage for New Town Zone: _____

SDP/Red-line approval date: _____

Filing Fee	\$
Permit Fee	\$ <u>1000.00</u>
Tech Fee	\$ <u>100.00</u>
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$ <u>1100.00</u>
Sub- Total Paid	\$ <u>1100.00</u>
Balance Due	\$ <u>0</u>

2871



APPROVED FOR CONSTRUCTION

Approved Septic System Plan
 Howard County Health Department
Dana Beard 5-23-12
 Signature BPT# 1200156J Date

B.M.P. FACILITY NO. 2
 WET-EXTENDED
 DETENTION POND
 TO PROVIDE WQV AND CPV
 HAZARD CLASS - A
 WET-POOL PL. = 524.00
 CPV EL. = 525.22

**PERMIT PLAN
 THE WARFIELDS II
 LOT 27
 SECTION TWO
 ZONED: RC-DEO**

FISHER, COLLINS & CARTER, INC.
 CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS
 CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE
 ELLICOTT CITY, MARYLAND 21042
 (410) 461 - 2955

TAX MAP NO.: 21 GRID NO.: 23 PARCEL NO.: 55
 4TH ELECTION DISTRICT HOWARD COUNTY, MARYLAND
 SCALE: 1" = 50' DATE: APRIL, 2012

4/9/12 4/15/12

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:

B12001183

G12000912

Building Address: 14855 Michele Drive
Glenelg, MD 21737

Suite/Apt. # _____ SDP/WP/BA #: GP 10-090

Census Tract: _____ Subdivision: Warfield Estates

Section: _____ Area: _____ Lot: 910027

Tax Map: _____ Parcel: _____ Grid: _____

Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: vacant lot

Proposed Use: single family home

Estimated Construction Cost: \$ 300,000

Description of Work: New 2 story "Chaple Hill" with 2 car garage, morning room, 4' EXT to family room, sitting area with covered porch

Occupant or Tenant: _____

Was tenant space previously occupied? Yes No

Contact Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

Property Owner's Name: NVR Inc

Address: 9720 Patuxent Woods Drive

City: Columbia State: MD Zip Code: 2104

Home Phone: _____ Work Phone: 410-379-59

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

Jim Kerwin

P.O. Box 552, Woodbine, MD 21

Phone: 413-309-7772

Email: _____

Contractor Company: NV Homes

Contact Person: Ryan Johnson

Address: 9720 Patuxent Woods Dr

City: Columbia State: MD Zip Code: 21046

License No.: 510

Phone: 410-379-5956 Fax: 410-379-24

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"/> <u>Roadside Tree Project Permit</u>	<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 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 st floor: <u>58' x 54'</u>	<input checked="" type="checkbox"/> Private
2 nd floor: <u>58' x 54'</u>	<u>Sewage Disposal</u>
Basement: <u>58' x 54'</u>	<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Finished Basement	<input checked="" type="checkbox"/> Private
<input type="checkbox"/> Unfinished Basement	Electric: <input checked="" 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: <u>4</u>	<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 checked="" type="checkbox"/> Propane Gas
No. of 2 BR units:	
No. of 3 BR units:	
Other Structure:	
Dimensions:	
Footings:	<input checked="" type="checkbox"/> <u>Roadside Tree Project Perm</u>
Roof:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> State Certified Modular	<u>Roadside Tree Project Permit #</u>
<input type="checkbox"/> Manufactured Home	

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Jim Kerwin
 Applicant's Signature

Print Name Jim Kerwin

Date 4/16/2012

Email Address _____
 Title/Company agent/NV Homes

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	<u>4/16/12</u>	<u>Oliver</u>
<input checked="" type="checkbox"/> PSZA (Zoning)		
<input checked="" type="checkbox"/> PSZA (Engineering)		
<input checked="" type="checkbox"/> Health	<u>5-10-12</u>	<u>Dan Bernard</u>
<input checked="" type="checkbox"/> Fire Protection		

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	\$ <u>10000</u>
Permit Fee	\$ <u>7162.50</u>
Tech Fee	\$ <u>110.25</u>
Excise Tax	\$ <u>6273.25</u>
PSFS	\$ <u>7128.00</u>
Guaranty Fund	\$ <u>5000</u>
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$

Check 681897

PLANS RECEIVED
 NVR' drawer

PERC CERTIFICATION
 I CERTIFY THAT THE LOCATIONS SHOWN HEREON ARE BASED ON FIELD LOCATIONS DONE UNDER MY DIRECT SUPERVISION AND ARE CORRECT TO THE BEST OF MY PROFESSIONAL KNOWLEDGE AND BELIEF.

SIGNATURE OF PROFESSIONAL LAND SURVEYOR
 TERRELL A. FISHER, PROFESSIONAL LAND SURVEYOR NO. 10692 DATE

APPROVED FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS,
 HOWARD COUNTY HEALTH DEPARTMENT.
 Signature for Peter Bieleman 7/30/2010
 COUNTY HEALTH OFFICER DATE



EXISTING WELLS TAG NUMBER CHART

LOT NO.	WELL TAG NO.
21	HO 95-1517
22	HO 95-1520
23	HO 95-1523
24	HO 95-1520
25	HO 95-1521
26	HO 95-1522
27	HO 95-1523
28	HO 95-1524
41	HO 95-1553
42	HO 95-1554
43	HO 95-1555
44	HO 95-1556
45	HO 95-0389
46	HO 95-0390

9	Rev. Use of Lot 27 from Regent's Pk. to Chapel Hill	4-5-12
8	Rev. grds. & remove side access, Lot 25	2-18-12
7	Rotate Use, Lot 25	2-22-12
6	Rev. Use of Lot 24 from Regent's Pk. to Remington Pl.	2-17-12
5	Rev. Use of Lot 25 from Clifton Pk. to Remington Pl.	2-16-12
4	Rev. Use of Lot 21 from Remington Place to Remington Place	3/29/11
3	Rev. Use of Lot 49 from Remington Place to Clifton Pk.	11/10/10
2	Rev. Septic Tank & Dist. Box Location, Lot 22	7/27/10
1	Rev. Use of Lot 22 Express Elev. 1'	7/27/10
102		DATE

NOTE
 THE EXISTING WELLS SHOWN ON THIS PLAN, TAG NOS HO 95-1517 THRU HO 95-1524, HO 95-1553 THRU HO 95-1556, HO 95-0389 & HO 95-0390 HAVE BEEN FIELD LOCATED BY FISHER, COLLINS & CARTER, INC., PROFESSIONAL LAND SURVEYORS AND IS ACCURATELY SHOWN.

DEVELOPER'S CERTIFICATE
 I/WE CERTIFY THAT ALL DEVELOPMENT AND CONSTRUCTION WILL BE DONE ACCORDING TO THIS PLAN AND THAT ANY 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.

Signature: *John R. Blanton* DATE: 7/6/10
 HOWARD SOIL CONSERVATION DISTRICT

DEVELOPER'S CERTIFICATE
 I/WE CERTIFY THAT ALL DEVELOPMENT AND CONSTRUCTION WILL BE DONE ACCORDING TO THIS PLAN AND THAT ANY 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.

Signature: *Ryan Johnson* DATE: 6/30/10
 SIGNATURE OF DEVELOPER RYAN JOHNSON DATE

ENGINEER'S CERTIFICATE
 I HEREBY CERTIFY THAT THIS PLAN FOR EROSION AND SEDIMENT CONTROL REPRESENTS A PRACTICAL AND WORKABLE PLAN BASED ON MY PERSONAL KNOWLEDGE OF THE SITE CONDITION AND THAT IT WAS PREPARED IN ACCORDANCE WITH THE REQUIREMENTS OF THE HOWARD SOIL CONSERVATION DISTRICT.

Signature: *Earl D. Collins* DATE: 6-30-10
 EARL D. COLLINS DATE

PROFESSIONAL CERTIFICATION
 I HEREBY CERTIFY THAT THESE DOCUMENTS WERE PREPARED OR APPROVED BY ME AND THAT I AM A DAILY LICENSED PROFESSIONAL ENGINEER UNDER THE LAWS OF THE STATE OF MARYLAND, LICENSE NO. 9753, EXPIRATION DATE: 2/28/12.

Signature: *Earl D. Collins* DATE: 6-30-10
 EARL D. COLLINS DATE



BUILDER/DEVELOPER
 NV HOMES DRIVE
 SUITE 430
 ELK RIDGE, MARYLAND 21075
 410-796-9956

PERC RECERTIFICATION & SITE DEVELOPMENT PLAN THE WARFIELDS II LOTS 17 THRU 28, 31 THRU 33 & 35 THRU 51 SECTION TWO

ZONED: RC-DEO
 TAX MAP NO: 21 GRID NO: 23 PARCEL NO: 55
 4TH ELECTION DISTRICT HOWARD COUNTY, MARYLAND
 SCALE: 1" = 50' DATE: MAY, 2010
 SHEET 2 OF 7

GP 10-90

D:\Drawings\303010 Warfield\Homeowner\FINAL\303010_Shp_Lots 21-28 & 41-46.dwg, 6/30/2010 10:11:12 AM, bny