

B11000243

Building Address: 14071 Patterson Farm Ct

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

Census Tract: _____ Subdivision: _____

Section: _____ Area: _____ Lot: 12

Tax Map: _____ Parcel: _____ Grid: _____

Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: vacant lot

Proposed Use: SFD

Estimated Construction Cost: \$ 400,000

Description of Work: Custom SFD -

Occupant or Tenant: _____

Was tenant space previously occupied? Yes No

Contact Name: Mike Martin

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

Property Owner's Name: Toll MD LLP

Address: 14118 Patterson Farm Court

City: Glendg State: MD Zip Code: 21237

Home Phone: _____ Work Phone: _____

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

Phone: _____ Fax: _____

Email: _____

Contractor Company: Toll Brothers

Contact Person: Mike Martin

Address: 7164 Col Gateway Dr

City: Columbia State: MD Zip Code: 21046

License No.: _____

Phone: _____ Fax: _____

Email: _____

Engineer/Architect Company: ESE

Responsible Design Prof.: Mike Bruce

Address: 7164 Columbia Gateway Dr

City: Columbia State: MD Zip Code: 21046

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 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 type="checkbox"/> Private
2 nd floor:	<u>Sewage Disposal</u>
Basement:	<input type="checkbox"/> Public
<input type="checkbox"/> Finished Basement	<input 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 _____

Email Address _____

Title/Company _____

Print Name _____

Date _____

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>4-12-11</u>	<u>DBernard</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

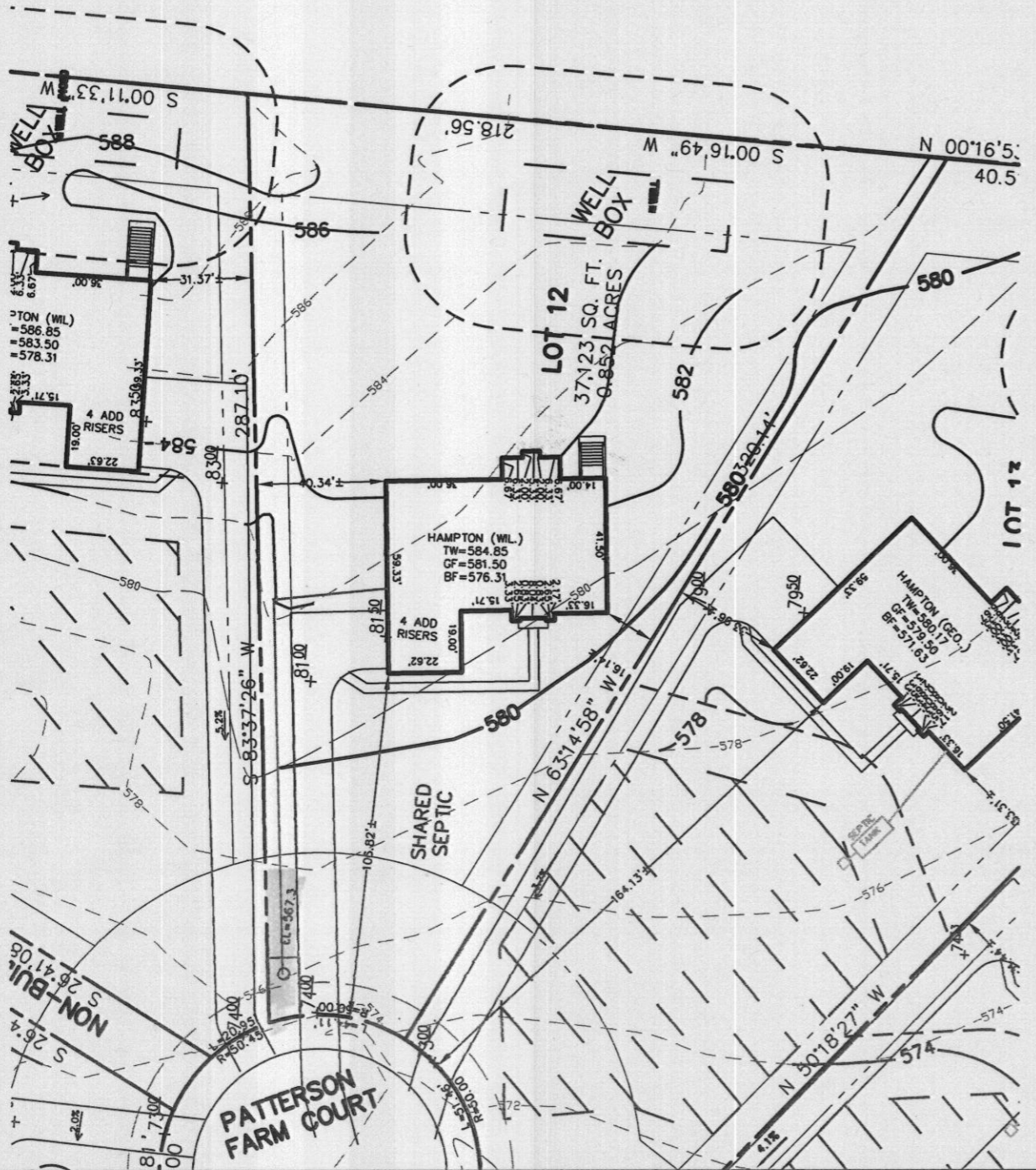
Lot Coverage for New Town Zone: _____

SDP/Red-line approval date: _____

Filing Fee	\$ <u>150.00</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$

Is Sediment Control approval required for issuance? Yes No
 CONTINGENCY CONSTRUCTION START
 ONE STOP SHOP

442 09051597



ALL WELLS AND SEPTIC SYSTEMS LOCATED WITHIN 100' OF THE PROPERTY BOUNDARIES AND 200' DOWN GRADIENT OF ANY WELLS AND/OR SEPTIC SYSTEMS HAVE BEEN SHOWN.

THE LOT SHOWN HEREON WAS RECORDED ON THE PLAT FOR HOPKINS CHOICE- PHASE I, PLAT No. 17725. REFER TO THIS PLAT FOR ANY RESTRICTIONS AND/OR PROVISIONS.

EXISTING TOPOGRAPHY IS TAKEN FROM A FIELD RUN TOPOGRAPHIC SURVEY WITH 2 - FOOT CONTOUR INTERVALS PREPARED BY ESE CONSULTANTS, PERFORMED ON OCTOBER 14, 2009.

THE EXISTING WELL(S) SHOWN ON THIS PLAN (IDENTIFIED WITH THE ATTACHED WELL TAG NUMBER HO-94-4081) HAS BEEN FIELD LOCATED BY ESE CONSULTANTS, INC.- PROFESSIONAL LAND SURVEYOR(S), AND IS ACCURATELY SHOWN.

E & S CONTROLS PER PLAN GP 10-74

DRIVEWAY CULVERT NOT REQUIRED ON THIS LOT
SWM FOR THIS LOT IS ADDRESSED BY THE APPROVED PLAN F-05-29.

BUILDING SETBACKS (B.R.L.'s) SHOWN HEREON PER SITE DEVELOPEMENT PLAN SETBACK DISTANCES SHOWN HEREON AS "±" HAVE AN ACCURACY OF ±0.1' FOOT.

THIS LOT SERVICED BY SHARED SEPTIC "A" BASEMENT DOES NOT GRAVITY SEWER

**Approved Septic System Plan
Howard County Health Department**

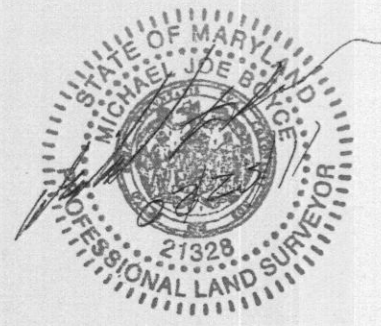
Dana Beard 4-12-11
Signature Date

*Approved for 4 BR
only*

ADDRESS: 14071 PATTERSON FARM COURT
GLENELG, MD 21737

APPROVED:
FOR PRIVATE WATER & PRIVATE SEWAGE SYSTEMS
HOWARD COUNTY HEALTH DEPARTMENT

COUNTY HEALTH OFFICER _____ DATE _____



TYPE: HAMPTON (WILLIAMSBURG)-
ADD'L 1' TO HEIGHT OF BASEMENT
OPTION No. 070

PERMIT PLOT PLAN
LOT #12
HOPKINS CHOICE
LIBER 12186, FOLIO 256
PLAT No. 17725
FOURTH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND

**Land Planning
Engineering
Land Surveying**

ESE Consultants Inc.
7164 Columbia Gateway Dr.
Suite 203
Columbia, MD 21046
TEL: 410-872-9105
FAX: 410-872-4870

DATE: 12/17/10 SCALE: 1" = 50' FILE: 2975 PHANTOM PP 12-2010
CHK'D: MJB JOB#: 2975 DRAWN: MJB

5011 Y6 - 8 WH 10: 20

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:
B12000471

Building Address: 14071 Patterson Farm Ct
Glennlg MD 21737

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

Census Tract: _____ Subdivision: Hopkins Chase

Section: _____ Area: _____ Lot: _____

Tax Map: 31 Parcel: 111 Grid: _____

Zoning: _____ Map Coordinates: _____ Lot Size: 5710.3

Existing Use: SED

Proposed Use: SED

Estimated Construction Cost: \$ 8000

Description of Work: 1100 sq ft
1000 sq ft

Occupant or Tenant: _____

Was tenant space previously occupied? Yes No

Contact Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

Property Owner's Name: John and Jill ...

Address: 1775 ...

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Work Phone: _____

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

Phone: 410-310-227 Fax: _____

Email: john.m...@...com

Contractor Company: ...

Contact Person: ...

Address: ...

City: _____ State: _____ Zip Code: _____

License No.: ...

Phone: _____ Fax: _____

Email: ...

Engineer/Architect Company: _____

Responsible Design Prof.: ...

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

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Building Characteristics	Utilities
Height:	<u>Water Supply</u>
No. of stories:	<input type="checkbox"/> Public
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Area of construction (sq. ft.):	<input type="checkbox"/> Public
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Use group:	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
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<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
Roadside Tree Project Permit #	No. of Heads:

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<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 type="checkbox"/> No
<input type="checkbox"/> State Certified Modular	<u>Roadside Tree Project Permit #</u>
<input type="checkbox"/> Manufactured Home	

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Applicant's Signature: _____ Print Name: _____

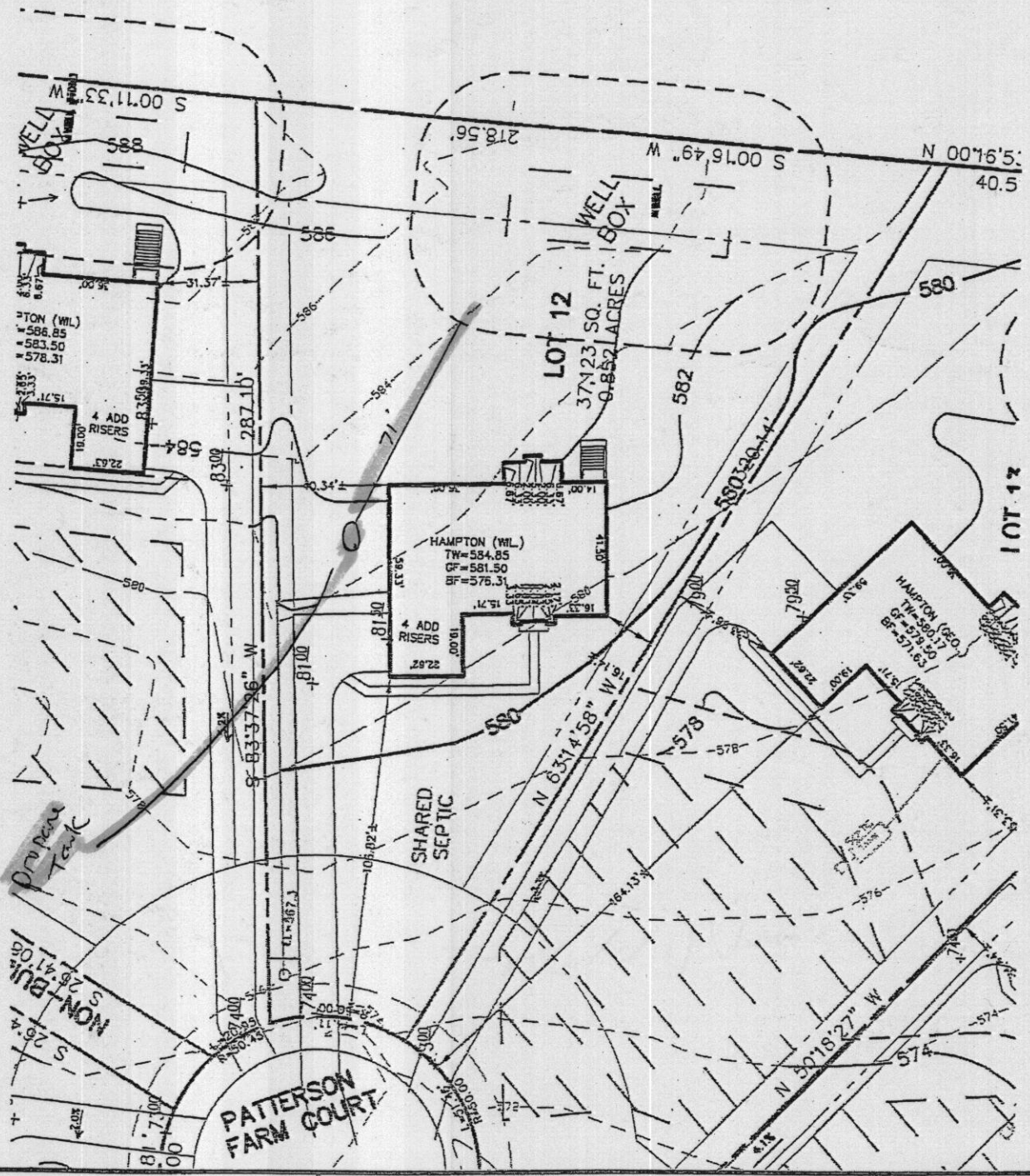
Email Address: _____ Date: _____

Title/Company: _____

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

AGENCY	DATE	SIGNATURE OF APPROVAL	DPZ SETBACK INFORMATION	Filing Fee	\$
State Highways			Front:	Permit Fee	\$
Building Officials			Rear:	Tech Fee	\$
PSZA (Zoning)			Side:	Excise Tax	\$
PSZA (Engineering)			Side St.:	PSFS	\$
Health	<u>2-27-22</u>	<u>Dana Bernard</u>	All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No	Guaranty Fund	\$
Fire Protection			Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No	Add'l per Fee	\$
Is Sediment Control approval required for issuance? <input type="checkbox"/> Yes <input type="checkbox"/> No			Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No	Total Fees	\$
<input type="checkbox"/> CONTINGENCY CONSTRUCTION START			Lot Coverage for New Town Zone:	Sub- Total Paid	\$
<input type="checkbox"/> ONE STOP SHOP			SDP/Red-line approval date:	Balance Due	\$

Distribution of Copies: White: Building Officials Green: PSZA,Zoning Yellow: PSZA,Engineering Pink: Health Gold: SHA



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**Approved Septic System Plan
Howard County Health Department**

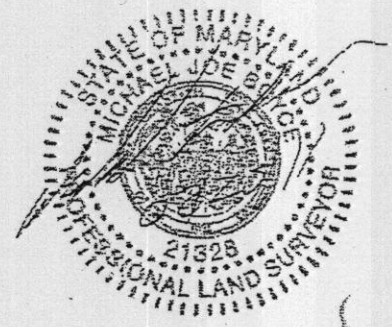
Dana Bernard 2-27-12
Signature Date

BPT# B12008711
Approved w/ Variance

ADDRESS: 14071 PATTERSON FARM COURT
GLENELG, MD 21737

APPROVED:
FOR PRIVATE WATER & PRIVATE SEWAGE SYSTEMS
HOWARD COUNTY HEALTH DEPARTMENT

COUNTY HEALTH OFFICER _____ DATE _____



TYPE: HAMPTON (WILLIAMSBURG)-
ADD'L 1' TO HEIGHT OF BASEMENT

OPTION No. 070

PERMIT PLOT PLAN
LOT #12
HOPKINS CHOICE
LIBER 12186, FOLIO 256
PLAT No. 17725
FOURTH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND

ESE Land Planning
Engineering
Land Surveying

ESE Consultants Inc.
1764 Columbia Gateway Dr.
Suite 203
Columbia, MD 21046
TEL: 410-872-9105
FAX: 410-872-4870

DATE: 12/17/10 SCALE: 1" = 50' FILE: 2975 PHANTOM PP 12-2010
DRAWN: MJB JOB#: 2975

B12000471

2/15/2012

Mr. Mike Davis or Approving Authority
Howard County Health Department

Mr. Davis,

We are requesting a variance on lot 12, Glenelg Estates in Glenelg, Maryland. The lp gas tank is placed in the only location that meets all requirements except the 100 feet from a well head. The lp gas tank is well over 50 feet from the well head. I am submitting the variance with the permit application.

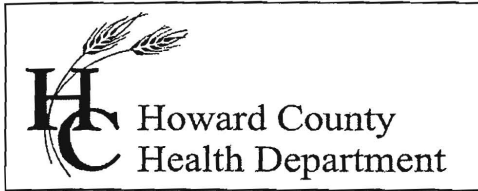
Your careful consideration of this matter would be greatly appreciated.

Please find the address for the aforementioned lot below:

Lot 12
14071 Patterson Farm dr
Glenelg, Md. 21737

Thank you,

Bob Kilby
410-799-1114
Propane Manager
Matheson Inc. (rkilby@mathesongas.com)



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

February 24, 2012

Valley National Gases, Inc.
Bob Kilby
7201 Montevideo Road
Jessup, MD 20794

RE: Waiver **Approval**
14071 Patterson Farm Drive

Dear Mr. Kilby,

The Health Department has received your waiver request dated February 15, 2012 for the above referenced property. The Health Department grants **approval** of the waiver. Approval of the building permit will be granted by this Department provided that the site plan submitted with the building permit application is revised with this approval. Any deviations from this approval 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,

A handwritten signature in black ink, appearing to read 'Michael J. Davis', is written over the typed name.

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