



Building Permit Application

Howard County Maryland
Department of Inspections, Licenses and Permits
3430 Court House Drive
Permits: 410-313-2455
www.howardcountymd.gov

Date Received: 6/18/13

Permit No.: B13002437

Building Address: 14886 Meriwether Dr
City: Glenelg State: MD Zip Code: 21737
Suite/Apt. #: _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: _____
Section: _____ Area: _____ Lot: 32
Tax Map: _____ Parcel: _____ Grid: _____
Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: Vacant Lot
Proposed Use: Single Family Dwelling
Estimated Construction Cost: \$ 350,000
Description of Work: Langley Federal w/ Solarium, Finished Basement

Occupant or Tenant: _____
Was tenant space previously occupied? Yes No
Contact Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Commercial Building Characteristics	Residential Building Characteristics	
Height:	<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories:	Depth	Width
Gross area, sq. ft./floor:	1 st floor: <u>62' 59'8"</u>	<u>59'8"</u>
Area of construction (sq. ft.):	2 nd floor: <u>60' 59'8"</u>	<u>59'8"</u>
Use group:	Basement: <u>48.2' 59'8"</u>	
<u>Construction type:</u>	<input checked="" type="checkbox"/> Finished Basement	
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Unfinished Basement	
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Crawl Space	
<input type="checkbox"/> Masonry	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Wood Frame	No. of Bedrooms: <u>4</u>	
<input type="checkbox"/> State Certified Modular	<u>Multi-family Dwelling</u>	
	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	

Property Owner's Name: Toll MD RILL LP
Address: 7164 Columbia Gateway Dr
City: Columbia State: MD Zip Code: 21046
Phone: 443-500-0606 Fax: 410-489-2676
Email: kmonath@tollbrothersinc.com

Applicant's Name & Mailing Address, (if other than stated herein)
Applicant's Name: Keith Monath
Address: 14881 Meriwether Dr
City: Glenelg State: MD Zip Code: 21737
Phone: 443-500-0606 Fax: 410-489-2676
Email: kmonath@tollbrothersinc.com

Contractor Company: Toll Brothers Inc
Contact Person: Keith Monath
Address: 14881 Meriwether Dr
City: Glenelg State: MD Zip Code: 21737
License No.: 5050
Phone: _____ Fax: _____
Email: _____

Engineer/Architect Company: _____
Responsible Design Prof.: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Utilities	
<u>Water Supply</u>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
<u>Sewage Disposal</u>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<u>Heating System</u>	
<input type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
<u>Sprinkler System:</u>	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number: <u>G12000002</u>	
Building Shell Permit Number: _____	

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]
Email Address: kmonath@tollbrothersinc.com
Title/Company: CM/Toll Brothers Inc

Print Name: Keith Monath
Date: 6/18/13

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>7/8/13</u>	<u>[Signature]</u>

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>100</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$ <u>50</u>
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	# <u>092910636</u>

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



Building Permit Application

Howard County Maryland
Department of Inspections, Licenses and Permits
3430 Court House Drive
Permits: 410-313-2455
www.howardcountymd.gov

Date Received: 08/05/13

Permit No.: B13003009

Building Address: 14886 Meriwether Dr.
 City: Glenelg State: MD Zip Code: 21737
 Suite/Apt. #: _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: _____
 Section: _____ Area: _____ Lot: 32
 Tax Map: 21 Parcel: 28 Grid: 16
 Zoning: _____ Map Coordinates: _____ Lot Size: 49793

Existing Use: SFD
 Proposed Use: SFD w/ TANK
 Estimated Construction Cost: \$ 8,000
 Description of Work: install 1000 Gal underground propane tank

Occupant or Tenant: owner
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Property Owner's Name: Toll Moby, LLC Limited Partnership
 Address: 1164 Columbia Gateway Dr.
 City: Columbia State: MD Zip Code: 21046
 Phone: _____ Fax: _____
 Email: _____

Applicant's Name & Mailing Address, (Other than stated herein)
 Applicant's Name: Jeremy Clancy
 Address: PO Box 1253
 City: Willesville State: MD Zip Code: 21784
 Phone: 4133401229 Fax: _____
 Email: Jeremy@appliedandapproved.com

Contractor Company: Valley National Gas
 Contact Person: William Grenier
 Address: 7201 Monte Hedo Rd
 City: Essex State: MD Zip Code: 20794
 License No.: 67793
 Phone: 4107991114 Fax: _____
 Email: _____

Engineer/Architect Company: _____
 Responsible Design Prof.: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Commercial Building Characteristics	Residential Building Characteristics	
Height: _____	<input checked="" type="checkbox"/> Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories: _____	Depth	Width
Gross area, sq. ft./floor: _____	1 st floor: _____	_____
Area of construction (sq. ft.): _____	2 nd floor: _____	_____
Use group: _____	Basement:	
	<input type="checkbox"/> Finished Basement	
	<input type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
	<input type="checkbox"/> Slab on Grade	
Construction type:	No. of Bedrooms: _____	
<input type="checkbox"/> Reinforced Concrete	Multi-family Dwelling	
<input type="checkbox"/> Structural Steel	No. of efficiency units: _____	
<input type="checkbox"/> Masonry	No. of 1 BR units: _____	
<input type="checkbox"/> Wood Frame	No. of 2 BR units: _____	
<input type="checkbox"/> State Certified Modular	No. of 3 BR units: _____	
	Other Structure: _____	
	Dimensions: _____	
<input checked="" type="checkbox"/> Roadside Tree Project Permit	Footings: _____	
<input type="checkbox"/> Roadside Tree Project Permit # _____	Roof: _____	
	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Utilities	
Water Supply	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Sewage Disposal	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Heating System	
<input type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
Other: _____	
Sprinkler System:	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Grading Permit Number: _____	
Building Shell Permit Number: _____	

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Applicant's Signature: Jeremy Clancy Print Name: Jeremy Clancy
 Email Address: Permits Date: 8/5/13
 Title/Company: _____

RECEIVED
AUG 05 2013
LICENSES & PERMITS DIVISION

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

PLEASE WRITE NEATLY & LEGIBLY
FOR OFFICE USE ONLY

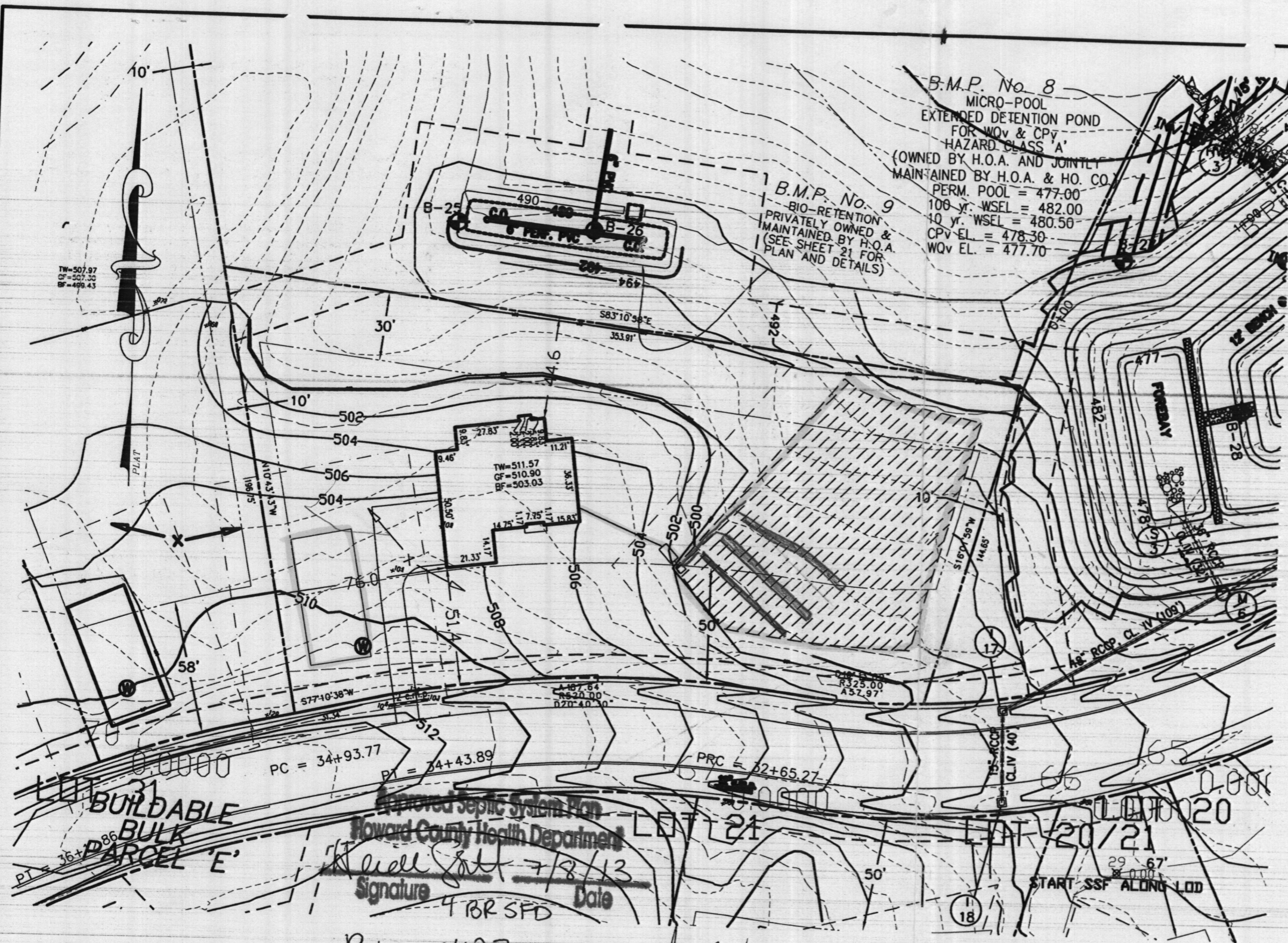
AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	<u>8/14/13</u>	<u>Heidi Scott</u>

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

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	\$ <u>100.00</u>
Tech Fee	\$ <u>10.00</u>
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	# <u>3599</u>

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



THE EXISTING WELL(S) SHOWN ON THIS PLAN (IDENTIFIED WITH THE ATTACHED WELL TAG NUMBER HO-95-2170) HAS BEEN FIELD LOCATED BY ESE CONSULTANTS, INC. - PROFESSIONAL LAND SURVEYOR(S), AND IS ACCURATELY SHOWN.

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

THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF AT LEAST 10,000 SQ. FT. AS REQUIRED BY THE STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA IS RESTRICTED UNTIL PUBLIC SEWER IS AVAILABLE. THIS EASEMENT SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT ADJUSTMENTS TO THE PRIVATE SEWERAGE EASEMENT. ANY CHANGES TO A PRIVATE SEWERAGE EASEMENT SHALL REQUIRE A REVISED PERCOLATION CERTIFICATION PLAN. RECORDATION OF A MODIFIED EASEMENT PLAT SHALL NOT BE NECESSARY.

THE LOT SHOWN HEREON WAS RECORDED ON THE PLAT FOR MERIWETHER FARMS, PLAT No. 21768, ET SEQ. REFER TO THIS PLAT FOR ANY RESTRICTIONS AND/OR PROVISIONS.

SWM FOR THIS LOT IS MANAGED PER PLAN F-09-044

E & S CONTROLS PER PLAN F-09-044

CULVERT FOR DRIVEWAY PER F-09-044

ADDRESS: 14886 MERIWETHER DRIVE
GLENELG, MD 21737

TOPOGRAPHIC INFORMATION ESTABLISHED AT TWO FOOT INTERVALS BASED ON AERIAL TOPOGRAPHY PROVIDED TO ESE BY FISHER, COLLINS & CARTER, INC.

INV. @ HOUSE	501.0
GROUND @ INV. @ HOUSE	505.0
INV. IN TANK	499.1
INV. OUT TANK	498.7
TOP OF TANK	499.7
GROUND OVER TANK	502.0
INV. IN DIST. BOX	498.3
INV. OUT DIST. BOX	498.0
GROUND @ BOX	502.0

TYPE: LANGLEY (FED)-
WALKOUT
THREE CAR SIDE ENTRY GARAGE
ADD'L 1' TO HEIGHT OF BASEMENT
SOLARIUM ADDITION

OPTION No. 017
OPTION No. 001
OPTION No. 070
OPTION No. 501

BUILDABLE BULK PARCEL 'E'

Approved Septic System Plan
Howard County Health Department
Signature: *[Signature]* Date: 7/8/13
4 BR SFD

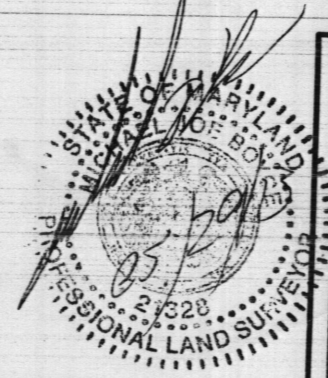
APPROVED: FOR HOWARD COUNTY DEPARTMENT OF PLANNING & ZONING

CHIEF, DEVELOPMENT ENGINEERING DIVISION

DIRECTOR

DATE _____

DATE _____



PLOT PLAN
LOT #32
MERIWETHER FARMS
LIBER 12124, FOLIO 0120
PLAT No. 21768, ET SEQ.
FOURTH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND

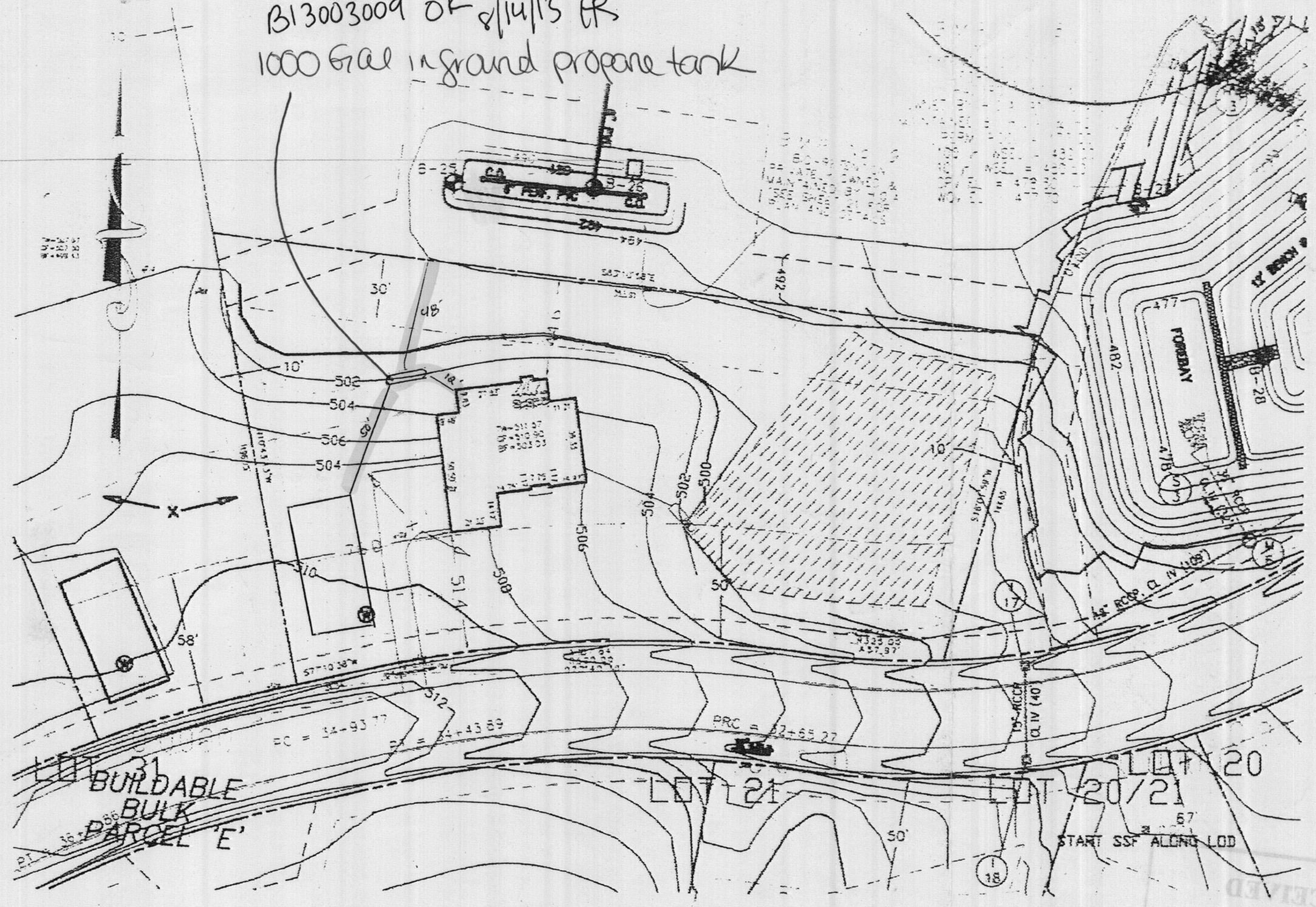
ESE Land Planning
Engineering
Land Surveying

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

DATE: 05/29/13 SCALE: 1"=50' FILE: LOT 32 PP
CHK'D: MJB JOB#: 3184 DRAWN: MJB

PROFESSIONAL CERTIFICATION: I HEREBY CERTIFY THAT THESE DOCUMENTS WERE PREPARED BY ME OR UNDER MY RESPONSIBLE CHARGE, AND THAT I AM A DULY LICENSED PROFESSIONAL LAND SURVEYOR UNDER THE LAWS OF THE STATE OF MARYLAND, LICENSE NO. 21245, EXPIRATION DATE 1/08/15.

B13003009 OK 8/14/13 HRS
 1000 Gal in ground propane tank



THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF AT LEAST 1000 SQ. FT. AS REQUIRED BY THE STATE DEPARTMENT OF THE ENVIRONMENT FOR LOCAL SEWAGE DISPOSAL IMPROVEMENTS OF ANY NATURE IN THE AREA IS RESTRICTED UNTIL PUBLIC SEWER IS AVAILABLE. THIS EASEMENT SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWER SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT ADJUSTMENTS TO THE PRIVATE SEWAGE EASEMENT. ANY CHANGES TO A PRIVATE SEWAGE EASEMENT SHALL REQUIRE A REVISED PERCOLATION CERTIFICATION PLAN. RECORDATION OF A MODIFIED EASEMENT PLAT SHALL NOT BE NECESSARY.

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E & S CONTROLS PER PLAN F-09-044

CULVERT FOR DRIVEWAY PER F-09-044

14886 Meriwether Dr.

ADDRESS: 14886 MERIWETHER DRIVE
 GLENELD, MD 21737

TOPOGRAPHIC INFORMATION ESTABLISHED AT TWO FOOT INTERVALS BASED ON AERIAL TOPOGRAPHY PROVIDED TO ESE BY FISHER, COLLINS & CARTER, INC.

INV @ HOUSE	501.0
GROUND @ INV @ HOUSE	505.0
INV IN TANK	499.1
INV OUT TANK	492.7
TOP OF TANK	499.7
GROUND OVER TANK	502.0
INV IN DIST. BOX	495.3
INV OUT DIST. BOX	495.0
GROUND @ BOX	502.0

TYPE LANGLEY (FEET)-
 WALKOUT
 THREE CAR SIDE ENTRY GARAGE
 ADD. 1' TO HEIGHT OF BASEMENT
 SOLAR JM ADDITION

OPTION No. 017
OPTION No. 001
OPTION No. 070
OPTION No. 001

APPROVED FOR HOWARD COUNTY DEPARTMENT OF PLANNING & ZONING

CHIEF, DEVELOPMENT ENGINEERING DIVISION

DATE

DIRECTOR

DATE



PLOT PLAN
 LOT #32
MERIWETHER FARMS
 LIBER 12124, FOLIO 0120
 PLAT No. 21768, ET SEC
 FOURTH ELECTON DISTRICT
 HOWARD COUNTY, MARYLAND

ESE 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: 06/29/13 SCALE: 1"=50' FILE: LOT 32 PP
 CHK'D: MJB JOB#: 3124 DRAWN: MJB

PROFESSIONAL CERTIFICATION: I HEREBY CERTIFY THAT THESE DOCUMENTS WERE PREPARED BY ME OR UNDER MY RESPONSIBLE CHARGE, AND THAT I AM A DULY LICENSED PROFESSIONAL LAND SURVEYOR UNDER THE LAWS OF THE STATE OF MARYLAND, LICENSE NO. 21246, EXPIRATION DATE 1/08/15