

AKH

07/11/08

G00009390

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS  
3430 COURT HOUSE DRIVE  
ELLCOTT CITY, MD 21043  
PERMITS (410) 313-3455 INSPECTIONS (410) 313-1810  
AUTOMATED INFORMATION (410) 313-3800

# HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

D0900-drv3

Building Address 12052 Open Run Road  
Ellicott City, Md. 21043

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

Census Tract 603000 Subdivision Riverwood

Section \_\_\_\_\_ Area \_\_\_\_\_ Lot 17

Tax Map 29 Parcel 20 Grid 4

Zoning RCDEP Map Coordinates \_\_\_\_\_ Lot size 46,090

Property Owner's Name Wickert Homes

Address 6905 Rockledge Dr. #1800

City Bethesda State MD Zip Code 20817

Home Phone \_\_\_\_\_ Work Phone 301 803-4816

Applicant's Name & Mailing Address, (if other than stated hereon):  
Carol Weiss

Phone 279-1624 Fax \_\_\_\_\_

Existing Use Vacant

Proposed Use SFD

Estimated Construction Cost \$ 500,000

Description of Work Harrison w/Rear salar...  
3 car garage 2 story rear expansion  
Play rm finished bsmt 402 GFB  
210 FP driveway

Contractor Company Wickert Homes

Contact Person Ken O'Brien

Address Same as above

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

License No. \_\_\_\_\_

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

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

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

Address \_\_\_\_\_

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

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

Engineer or Architect Company Benchmark Engineering

Contact Person John Casey

Address 2450 Ballinger National Pk.

City Ellicott City State MD Zip Code 21043

Phone 410-465-6105 Fax 410-465-6644

### 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"/>
Use group: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ 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"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: _____ Public _____ Private <input checked="" type="checkbox"/>
1st floor: _____ 2nd floor: _____ Basement: _____	Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/>
Finished Basement <input checked="" type="checkbox"/> Unfinished Basement <input type="checkbox"/>	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
No. of Bedrooms <u>4</u>	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/>
Height: _____	Natural Gas <input type="checkbox"/>
Multi-family dwellings: _____	Propane Gas <input type="checkbox"/>
No. of efficiency units: _____	Sprinkler system: N/A <input type="checkbox"/>
No. of 1 BR units: _____	NFPA #13D _____
No. of 2 BR units: _____	NFPA #13R _____
No. of 3 BR units: _____	Other: _____
Other Structure: _____	
Dimensions: _____	
Footings: _____	
Roof Height: _____	
State Certified Modular _____	
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.

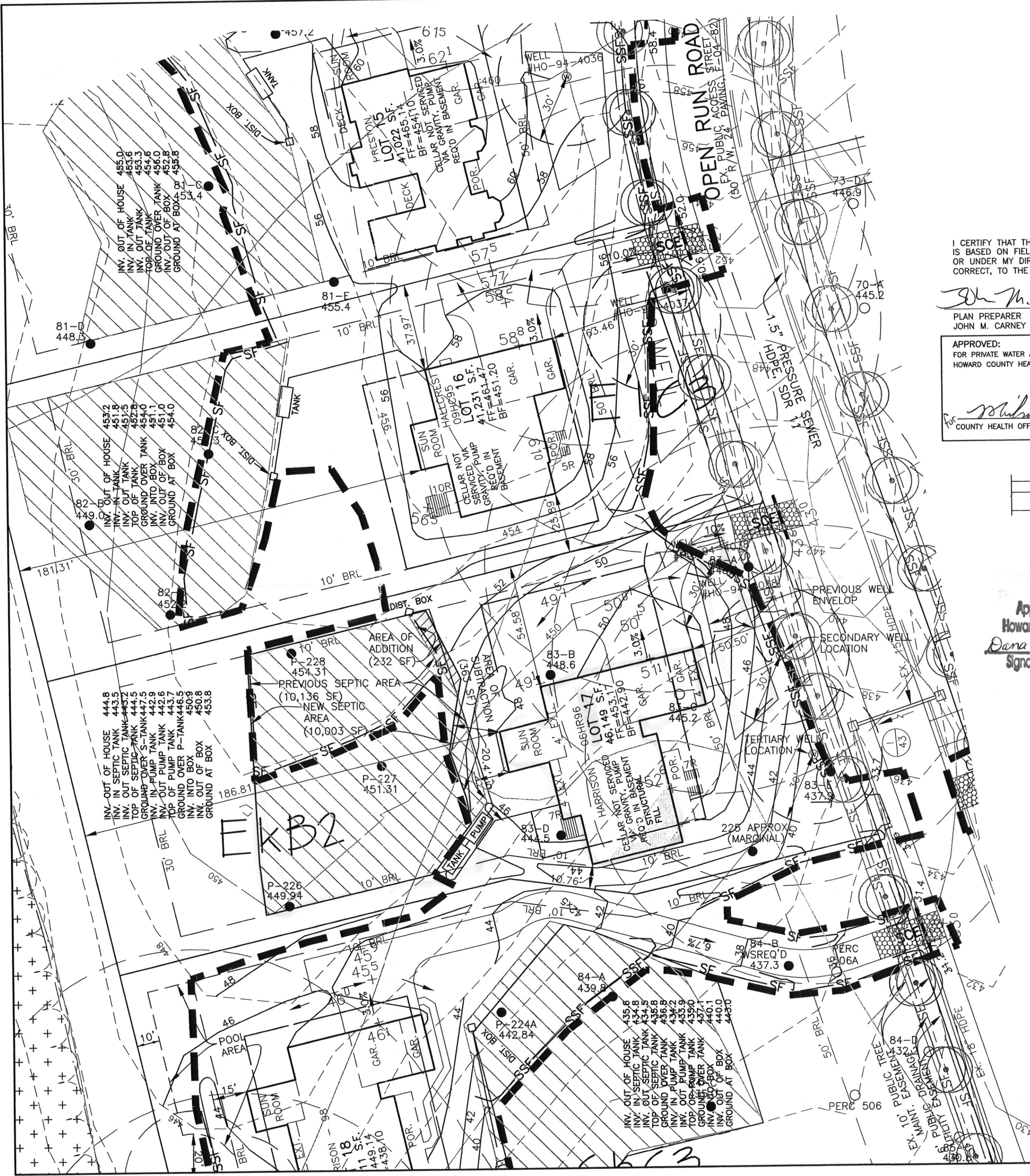
Carol Weiss  
Applicant's Signature  
Perm. & Review  
Title/Company

Carol Weiss  
Print Name  
7/11/08  
Date

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

AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official		
Dev. Engineering, DPZ		
Health	<u>8-8-08</u>	<u>Dana Bernard</u>
Fire Protection		
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>		
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>		
ONE STOP SHOP: <input type="checkbox"/>		
Distribution of Copies - White: Building Official Green: LDD, DPZ		

DPZ SETBACK INFORMATION	PROPERTY ID#:
Front: _____	Filing fee \$ <u>100.00</u>
Rear: _____	Permit fee \$ _____
Side: _____	Excise tax \$ _____
Side St.: _____	Add'l per. fee \$ _____
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
Lot Coverage for NewTown Zone _____	Check # <u>20507</u>
SDP/Red-line approval date _____	Validation # _____
Accepted by <u>[Signature]</u>	



**NOTES:**

1. THE LOT SHOWN HEREON WAS RECORDED ON THE PLAT FOR RIVERWOOD, PHASE 1, PLAT No. 18037. REFER TO THE PLAT FOR LOT DIMENSIONS, LOT AREAS AND ALL EASEMENTS.
2. THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF 10,000 SQUARE FEET AS REQUIRED BY THE STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWERAGE 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 SEWER 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 SEWERAGE EASEMENT PLAT SHALL NOT BE NECESSARY.
3. SEDIMENT AND EROSION CONTROLS WERE APPROVED BY HOWARD SOIL CONSERVATION DISTRICT UNDER GP-05-31 AND MODIFIED FOR THIS SPECIFIC HOUSE.
4. TOPOGRAPHY SHOWN HEREON IS TAKEN FROM THE APPROVED ROAD CONSTRUCTION PLANS.
5. EXACT LENGTH OF SEPTIC TRENCHES ARE TO BE DETERMINED BY THE HEALTH DEPARTMENT AT THE TIME OF TRENCH LAYOUT AND INSPECTION.
6. SPOIL FROM THE TRENCHING OF THE SEPTIC AREA IS TO BE PLACED ON THE UPHILL SIDE OF THE EXCAVATION FOR EACH INDIVIDUAL LOT.
7. ALL SEDIMENT AND EROSION CONTROL FEATURES USED ON THIS SITE SHALL COMPLY WITH 1994 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL.
8. ALL DRAINAGE AND STORMWATER MANAGEMENT FEATURES USED ON THIS SITE MUST COMPLY WITH THE APPROVED ROAD CONSTRUCTION PLANS.
9. SEPTIC TANK FOR THIS LOT TO BE 2,000 GALLONS.
10. THE EXISTING WELL SHOWN ON THIS PLAN, HO-94-4038, HAS BEEN FIELD LOCATED BY BENCHMARK ENGINEERING, INC. AND IS ACCURATELY SHOWN.

I CERTIFY THAT THE INFORMATION SHOWN HEREON IS BASED ON FIELD WORK PERFORMED BY ME OR UNDER MY DIRECT SUPERVISION, AND IS CORRECT, TO THE BEST OF KNOWLEDGE AND BELIEF.

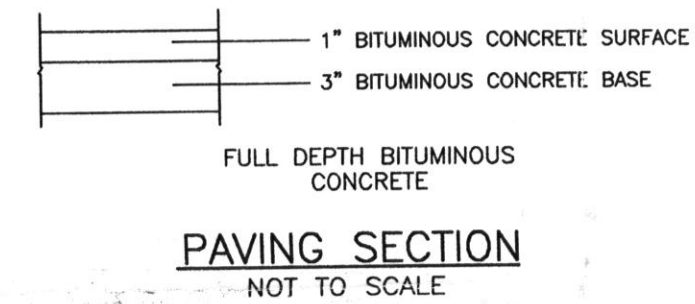
*John M. Carney* 7/28/08  
 PLAN PREPARER  
 JOHN M. CARNEY FOR BENCHMARK ENGINEERING, INC.

APPROVED:  
 FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS  
 HOWARD COUNTY HEALTH DEPARTMENT

*Dana Bernard* 8/8/08  
 COUNTY HEALTH OFFICER DATE

**LEGEND**

- EXISTING CONTOURS ESTABLISHED UNDER F-04-082
- FIELD SURVEYED WELL LOCATION
- PASSED PERCOLATION TEST PER TEST NOTES
- PASSED PERCOLATION TEST PER TEST NOTES
- FAILED PERCOLATION TEST PER TEST NOTES
- FAILED PERCOLATION TEST PER TEST NOTES
- FAILED SAND MOUND TEST PER TEST NOTES
- FAILED SAND MOUND TEST PER TEST NOTES
- EXISTING APPROVED SEPTIC RESERVE AREA
- PROPOSED RESERVED SEPTIC RESERVE AREA



Approved Septic System Plan  
 Howard County Health Department  
*Dana Bernard* 8-8-08  
 Signature Date



NO.	DATE	REVISION

**BENCHMARK**  
 ENGINEERS ▲ LAND SURVEYORS ▲ PLANNERS  
**ENGINEERING, INC.**

8480 BALTIMORE NATIONAL PIKE ▲ SUITE 418  
 ELLICOTT CITY, MARYLAND 21043  
 PHONE: 410-465-6105 ▲ FAX: 410-465-6644  
 EMAIL: benchmark@ceis.com

OWNER/BUILDER: CAMBERLEY HOMES, INC. 6905 ROCKLEDGE DRIVE SUITE 800 BETHESDA, MD 20817 PHONE: 301-803-4800 FAX: 301-803-4929	PROJECT: <b>RIVERWOOD LOT 17</b>
LOCATION: 12052 OPEN RUN ROAD ELLICOTT CITY, MD 21042 TAX MAP No. 29 - BLOCK Nos. 3, 4, 9 & 10 - PARCEL No. 20 3rd ELECTION DISTRICT, HOWARD COUNTY, MARYLAND	TITLE: <b>PERMIT PLAN AND REVISED PERCOLATION CERTIFICATION PLAN</b>
HOUSE TYPE: <b>HARRISON</b>	DATE: JUNE 19, 2008 JULY 28, 2008
DESIGN: JMC	DRAFT: JMC
SCALE: 1" = 30'	PROJECT NO. 1950 DRAWING 1 OF 1