



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: 11-1-13

Permit No.: B13004109

Building Address: 2025 DROVERS LN.
 City: Cooksville State: MD Zip Code: 21723
 Suite/Apt. #: - SDP/WP/BA #: GP-0986
 Census Tract: _____ Subdivision: Vista Ridge
 Section: _____ Area: _____ Lot: 20
 Tax Map: 8 Parcel: 176 Grid: 23
 Zoning: _____ Map Coordinates: 468249 Lot Size: _____

Property Owner's Name: DR HORTON INC.
 Address: 1356 BEVERLY RD. STE 300
 City: McLEAN State: VA Zip Code: 22101
 Phone: 571-723-0813 Fax: 800-551-5015
 Email: _____
 Applicant's Name & Mailing Address, (if other than stated herein)
 Applicant's Name: Vicky Meyer
 Address: 1602 PINNACLE RD
 City: TOWSON State: MD Zip Code: 21286
 Phone: 410-296-6900 Fax: _____
 Email: mdBldgPermits@comcast.net

Existing Use: VACANT LOT
 Proposed Use: NEW SFD
 Estimated Construction Cost: \$ _____
 Description of Work: SOMERSET - Elev. H w/4' FAM. ROOM EXT., REAR SUNROOM, 2 STORIES 3CM GARAGE w/BSMT, 4 BDRMS, 3 FB, 1 HB, FP
 Occupant or Tenant: FAM. BSMT to Rec. RM.
 Was tenant space previously occupied? Yes EXERCISE RM., Home theatre and FULL BATH
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Contractor Company: DR HORTON, INC.
 Contact Person: McLANE COOKE
 Address: 1356 BEVERLY RD. STE 300
 City: McLEAN State: VA Zip Code: 22101
 License No.: 535
 Phone: 571-723-0813 Fax: 800-551-5015
 Email: ML COOKE@DRHORTON.COM

Engineer/Architect Company: BENCHMARK ENGINEERING
 Responsible Design Prof.: JOHN CAMEY
 Address: 8480 BALHO, N'L PIKE
 City: ELLSWORTH CITY State: MD Zip Code: 21043
 Phone: 410-465-6105 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:	
Area of construction (sq. ft.):	2 nd floor:	
Use group:	Basement:	
	<input checked="" 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 checked="" type="checkbox"/> Wood Frame	No. of 2 BR units:	
<input type="checkbox"/> State Certified Modular	No. of 3 BR units:	
	Other Structure:	
	Dimensions:	
	Footings:	
	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 checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
Sprinkler System:	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number: <u>G 12000277</u>	
Building Shell Permit Number:	

RECEIVED
 NOV 01 2013
 LICENSES & PERMITS DIVISION

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: V. Meyer Print Name: Vicky Meyer
 Email Address: mdBldgPermits@comcast.net Date: 11/1/13
 Title/Company: AGENT

ck# 44185

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

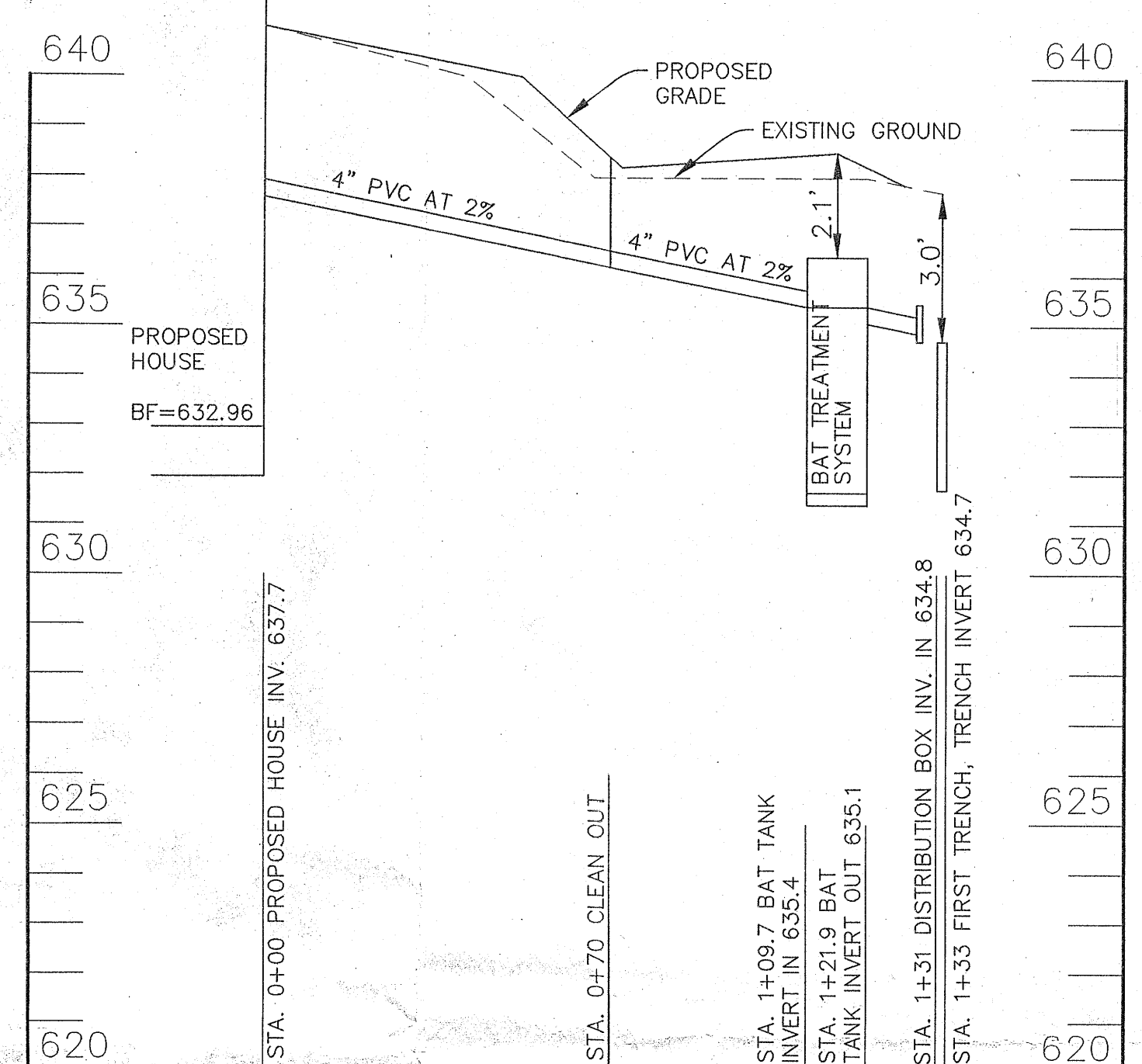
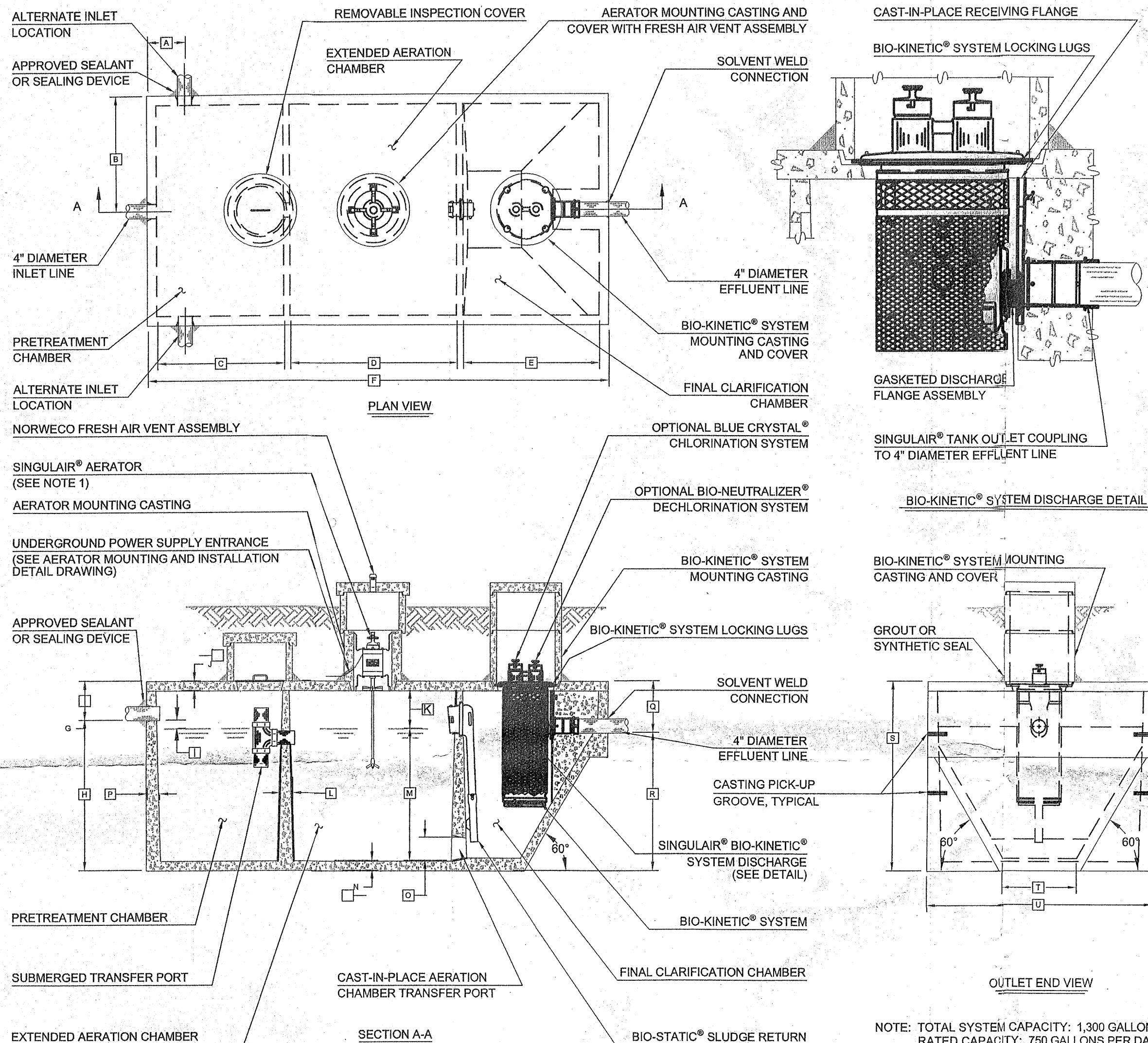
AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	<u>11/1</u>	<u>[Signature]</u>

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	\$ 180.00
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$ 50.00
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	# 441785

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



SEWER PROFILE - LOT 20
SCALE: VERTICAL 1"=3', HORIZONTAL 1"=30'

NOTE: TOTAL SYSTEM CAPACITY: 1,300 GALLONS
RATED CAPACITY: 750 GALLONS PER DAY
PER MANUFACTURER.

GENERAL NOTES:

- SINGULAIR® AERATOR, AS TESTED AND ACCEPTED BY NSF, OPERATING 60 MINUTES ON / 60 MINUTES OFF.
- FALL THROUGH SINGULAIR® PLANT FROM INLET INVERT TO OUTLET INVERT IS FOUR INCHES. INLET INVERT IS TWELVE INCHES BELOW TANK TOP.
- ON DEEPER INSTALLATIONS, PRECAST RISERS MUST BE USED TO EXTEND AERATOR MOUNTING CASTING AND BIO-KINETIC® SYSTEM MOUNTING CASTING TO GRADE.
- TANK REINFORCED PER ACI STD. 318-05.
- REMOVABLE COVERS ON RISERS WEIGH IN EXCESS OF SEVENTY-FIVE POUNDS EACH TO PREVENT UNAUTHORIZED ACCESS.
- CONTACT THE LOCAL, LICENSED SINGULAIR® DISTRIBUTOR FOR ELECTRICAL REQUIREMENTS.

SEE MANUFACTURER'S SPECIFICATIONS FOR DETAILS. WWW.NORWECO.COM

CRITICAL DIMENSIONS			
A	1'-0"	N	0'-3"
B	3'-0"	O	0'-6"
C	3'-4"	P	0'-3"
D	4'-5"	Q	1'-4"
E	3'-7"	R	3'-8"
F	12'-2"	S	5'-0"
G	1'-0"	T	2'-0"
H	4'-0"	U	6'-0"
I	0'-3"	V	
J	0'-3"	W	
K	1'-0"	X	
L	0'-2"	Y	
M	3'-6"	Z	

U.S. AND FOREIGN PATENTS PENDING	norweco	3-25-07	B
MMVII	LOW-PROFILE SINGULAIR® BIO-KINETIC® WASTEWATER TREATMENT SYSTEM MODEL THTLP-600 GPD	DATE	10-16-06
		DESIGNED BY	BDS
		APPROVED BY	JMM
		DATE	10-16-06
		SCALE	NTS
		PROJECT	PC-5-7091

Required BAT Site Plan Notes

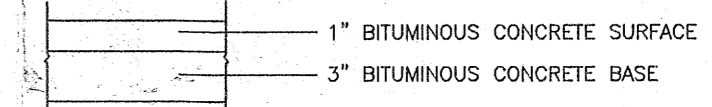
- Any change to the locations or depths to any components must be approved by the engineer and the Howard County Health Department prior to installation. A revised sit plan may be required.
- The maximum depth of the BAT shall be per the manufacturer's specification, 3.0'.
- The blower may not be located further from the tank than the manufacturer's specifications, 75'.
- The BAT system shall be maintained and operated for the life of the system.
- The BAT shall be operated by and maintained by a certified service provider.
- Within one month of installation, a person installing the BAT system shall report to the Maryland Department of the Environment (MDE) in a manner acceptable to MDE, the address and date of completion of the BAT installation and the type of BAT installed.
- Electrical work for the BAT installation must be performed by a licensed electrician.
- An agreement and Easement must be completed and signed by all applicable parties, and recorded in Land Records of Howard County.
- The Health Department requires documentation for the start-up certification from the manufacturer prior to final approval of the installation.

<p>BENCHMARK ENGINEERS ▲ LAND SURVEYORS ▲ PLANNERS</p> <p>ENGINEERING, INC.</p> <p>8480 BALTIMORE NATIONAL PIKE ▲ SUITE 315 ELLCOTT CITY, MARYLAND 21043 PHONE: 410-465-6105 ▲ FAX: 410-465-6644 BEI@BEI-CIVILENGINEERING.COM</p>		<p>Professional Certification. I hereby certify that these documents were prepared or approved by me, and that I am a duly licensed professional engineer under the laws of the State of Maryland, License No. 28559, Expiration Date: 7-22-2015.</p> <p>FOR SEWER PROFILE ONLY</p> <p>STATE OF MARYLAND BRIAN F. CLEARY No. 28559 REGISTERED PROFESSIONAL ENGINEER 10/23/2013</p>	
<p>OWNER/BUILDER: DR HORTON, INC. 1356 BEVERLY ROAD SUITE 300 McLEAN, VA 22101 PHONE: 571-723-0813 FAX: 800-551-5015</p>		<p>PROJECT: VISTA RIDGE LOT 20</p>	
<p>DESIGN: JMC DRAFT: JMC</p>		<p>LOCATION: 2025 DROVERS LANE COOKSVILLE, MD 21723 TAX MAP No. 8 - BLOCK No. 23 - PARCEL No. 176 4TH ELECTION DISTRICT, HOWARD COUNTY, MARYLAND TAX ID NUMBER 04-595485</p>	
<p>DATE: OCTOBER 22, 2013</p>		<p>TITLE: BUILDING PERMIT PLAN AND BAT SITE PLAN</p>	
<p>HOUSE TYPE: SOMERSET</p>		<p>PROJECT NO. 1635</p>	
<p>SCALE: 1" = 30'</p>		<p>DRAWING 2 OF 2</p>	

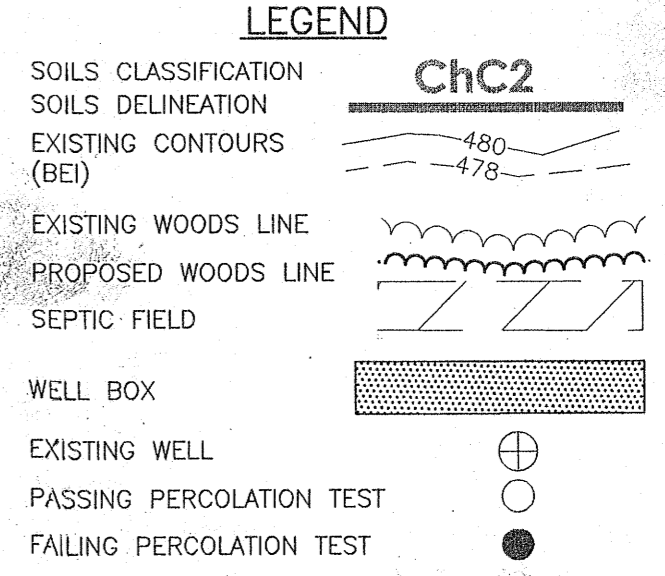


SOILS LEGEND		
MAP SYMBOL	SOIL GROUP	SOIL TYPE
GnB2	C	GLENVILLE, SILT LOAM, 3 TO 8 PERCENT SLOPES, MODERATELY ERODED
MgC2	B	MANOR GRAVELLY LOAM, 8 TO 15 PERCENT SLOPES, MODERATELY ERODED
-	-	-

* INDICATES HYDRIC SOILS
TAKEN FROM SOILS SURVEY, ISSUED JULY 1968, MAP NO. 33



PAVING SECTION
NOT TO SCALE



- BUILDING PERMIT PLAN NOTES:**
1. THE LOT SHOWN HEREON WAS RECORDED ON THE PLAT FOR VISTA RIDGE, PLAT Nos. 22430-22435. REFER TO THE PLATS FOR LOT DIMENSIONS, LOT AREAS, ALL EASEMENTS AND CONDITIONS.
 2. SEDIMENT AND EROSION CONTROLS WERE APPROVED BY HOWARD SOIL CONSERVATION DISTRICT UNDER A GRADING PLAN AND MODIFIED FOR THIS SPECIFIC HOUSE.
 3. TOPOGRAPHY SHOWN HEREON IS TAKEN FROM THE APPROVED ROAD CONSTRUCTION PLANS AND TOPOGRAPHIC INFORMATION PROVIDED BY ACCUBID, INC., ON OR ABOUT JUNE 27, 2013.
 4. ALL SEDIMENT AND EROSION CONTROL FEATURES USED ON THIS SITE SHALL COMPLY WITH THE 2011 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL.
 5. ALL DRAINAGE AND STORMWATER MANAGEMENT FEATURES USED ON THIS SITE MUST COMPLY WITH THE APPROVED ROAD CONSTRUCTION PLANS EXCEPT AS WAIVED.
 6. THE EXISTING WELL SHOWN ON THIS PLAN, HO-95-2395, HAS BEEN FIELD LOCATED BY BENCHMARK ENGINEERING, INC., AND IS ACCURATELY SHOWN.
 7. THERE ARE NO EXISTING WELLS OR SEPTIC SYSTEMS WITHIN 100' OF THIS PROJECT'S BOUNDARY EXCEPT AS NOTED.
 8. ANY CHANGES TO A PRIVATE SEWAGE EASEMENT OR WELL BOX SHALL REQUIRE A REVISED PERCOLATION CERTIFICATION PLAN.
 9. STORMWATER MANAGEMENT FOR THIS LOT WAS DESIGNED TO BE PROVIDED BY BOTH POND #1, A POCKET POND, AND IN POND #2, A MICROPOOL ED POND.
 10. THE DRIVEWAY CULVERT REQUIRED FOR THIS LOT WAS SIZED UNDER THE ROAD CONSTRUCTION PLANS. A 15" HDPEP OR 15" RCP IS REQUIRED.
 11. THIS PLAN HAS BEEN REVISED TO REFLECT THE LIMITS OF GRADING AS SHOWN ON F-08-136.

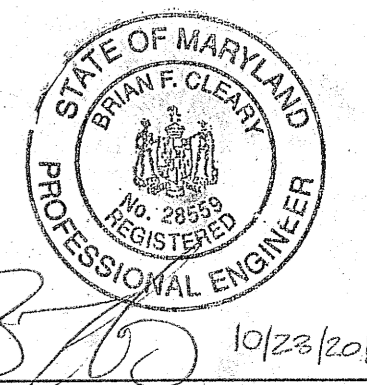
Professional Certification. I hereby certify that these documents were prepared or approved by me, and that I am a duly licensed professional engineer under the laws of the State of Maryland.

License No. 29559 Expiration Date: 2/22/15

BENCHMARK
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