



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: 3/26/13

Permit No.: B13001082

Building Address: 14820 Meriwether Dr
 City: Glenely State: MD Zip Code: 21737
 Suite/Apt. #: _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: _____
 Section: _____ Area: _____ Lot: 44
 Tax Map: _____ Parcel: _____ Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

Property Owner's Name: Toll MD VII LP
 Address: 7164 Columbia Gateway Dr
 City: Columbia State: MD Zip Code: 21046
 Phone: 410-489-7408 Fax: 410-489-2676
 Email: Kmonath@tollbrothersinc.com

Existing Use: Vacant lot
 Proposed Use: Single Family Dwelling
 Estimated Construction Cost: \$ 350,000
 Description of Work: Hampton Manor w/
Nogles Sunroom, playroom

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

Occupant or Tenant: _____
 Was tenant space previously occupied? Yes No
 Contact Name: Keith Monath
 Address: 14881 Meriwether Dr
 City: Glenely State: MD Zip Code: 21737
 Phone: 443-500-0606 Fax: 410-489-2676
 Email: Kmonath@tollbrothersinc.com

Contractor Company: _____
 Contact Person: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 License No.: 5050
 Phone: _____ 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"/> SF Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories:	Depth	Width
Gross area, sq. ft./floor:	1 st floor: <u>75'6"</u>	<u>68'</u>
Area of construction (sq. ft.):	2 nd floor: <u>65'8"</u>	<u>62'</u>
Use group:	Basement: <u>75'6"</u>	<u>68'</u>
	<input checked="" type="checkbox"/> Finished Basement	
	<input type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
Construction type:	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms: <u>4</u>	
<input type="checkbox"/> Structural Steel	Multi-family Dwelling	
<input type="checkbox"/> Masonry	No. of efficiency units:	
<input type="checkbox"/> Wood Frame	No. of 1 BR units:	
<input type="checkbox"/> State Certified Modular	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	

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Heating System	
<input checked="" type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Propane Gas	
Other:	
Sprinkler System:	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number: <u>G1200002</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: Keith Monath Print Name: Keith Monath
 Email Address: Kmonath@tollbrothersinc.com Date: 3/26/13
 Title/Company: cm / Toll Brothers Inc

RECEIVED
 MAR 26 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
<input checked="" type="checkbox"/> State Highways		
<input checked="" type="checkbox"/> Building Officials		
<input checked="" type="checkbox"/> PSZA (Zoning)		
<input checked="" type="checkbox"/> PSZA (Engineering)		
<input checked="" type="checkbox"/> Health	<u>4/9/13</u>	<u>DRuiter</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	\$ 100.00
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$ 50.00
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	# <u>09262376</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: 410-313-2458
www.howardcountymd.gov

Date Received: 4-30-13

Permit No.: B13001285

Problem Address & Real Property

Building Address: 14820 Meriweather Dr
 City: Greenleaf State: MD Zip Code: 21737
 Suite/Apt. #: _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: Meriweather Farms
 Section: _____ Area: _____ Lot: 44
 Tax Map: _____ Parcel: _____ Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

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

Property Owner's Name: Toll MD VII Limited
 Address: 7164 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 1353
 City: Sikesville State: MD Zip Code: 21784
 Phone: 410-350-1229 Fax: _____
 Email: Jeremy@appliedandapproved.com

Contractor Company: Valley National Gas
 Contact Person: William Gerwig
 Address: 221 Montevideo Rd
 City: Essex State: MD Zip Code: 20794
 License No.: 67793
 Phone: 410-799-1114 Fax: _____
 Email: _____

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

Commercial Building Characteristics	Residential Building Characteristics
Height:	<input 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:
Construction type:	<input type="checkbox"/> Finished Basement
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Unfinished Basement
<input checked="" type="checkbox"/> Structural Steel	<input type="checkbox"/> Craw Space
<input type="checkbox"/> Masonry	<input type="checkbox"/> Slab on Grade
<input type="checkbox"/> Wood Frame	No. of Bedrooms:
<input type="checkbox"/> State Certified Modular	Multi-family Dwelling
	No. of efficiency units:
	No. of 1 BR units:
	No. of 2 BR units:
	No. of 3 BR units:
	Other Structure:
	Dimensions:
<input checked="" type="checkbox"/> Roadside/Tree Project Permit	Footings:
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Roof:
Roadside Tree Project Permit #	<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 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
<input type="checkbox"/> Other:
Sprinkler System:
<input type="checkbox"/> Yes <input type="checkbox"/> No
Grading Permit Number:
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: Jeremy Clancy Print Name: Jeremy Clancy
 Email Address: Jeremy@appliedandapproved.com Date: 4/30/13

Permitto
 Heath; 9/4/13 R. Bieker Approved

THE EXISTING BUILDING IS TO BE DEMOLISHED AND THE ENTIRE LOT IS TO BE REDEVELOPED AS A RESIDENTIAL LOT. THE EXISTING BUILDING IS TO BE DEMOLISHED AND THE ENTIRE LOT IS TO BE REDEVELOPED AS A RESIDENTIAL LOT.

THIS AREA IS DESIGNATED AS A PUBLIC HEALTH PROTECTION AREA BY THE STATE DEPARTMENT OF THE ENVIRONMENT FOR NON-POINT SOURCE POLLUTION. IMPROVEMENTS TO THE EXISTING SEWERAGE SYSTEM SHALL BE COMPLETED PRIOR TO THE COMMENCEMENT OF CONSTRUCTION OF ANY NEW BUILDING ON THIS AREA.

THE CONSTRUCTION OF A PUBLIC HEALTH PROTECTION AREA SHALL BE COMPLETED PRIOR TO THE COMMENCEMENT OF CONSTRUCTION OF ANY NEW BUILDING ON THIS AREA. THE CONSTRUCTION OF A PUBLIC HEALTH PROTECTION AREA SHALL BE COMPLETED PRIOR TO THE COMMENCEMENT OF CONSTRUCTION OF ANY NEW BUILDING ON THIS AREA.

THE LOT SHOWN HEREON WAS RECORDED ON THE PLAT FOR MORTGAGE PLANS, PLAT NO. 21777, ET SEQ. REFER TO THIS PLAT FOR ANY RESTRICTIONS AND/OR PROVISIONS.

SMI FOR THIS LOT IS MANAGED PER PLAN F-08-044
 E & S CONTROLS PER PLAN F-08-044
 CONVERT FOR DRIVEWAY PER F-08-044

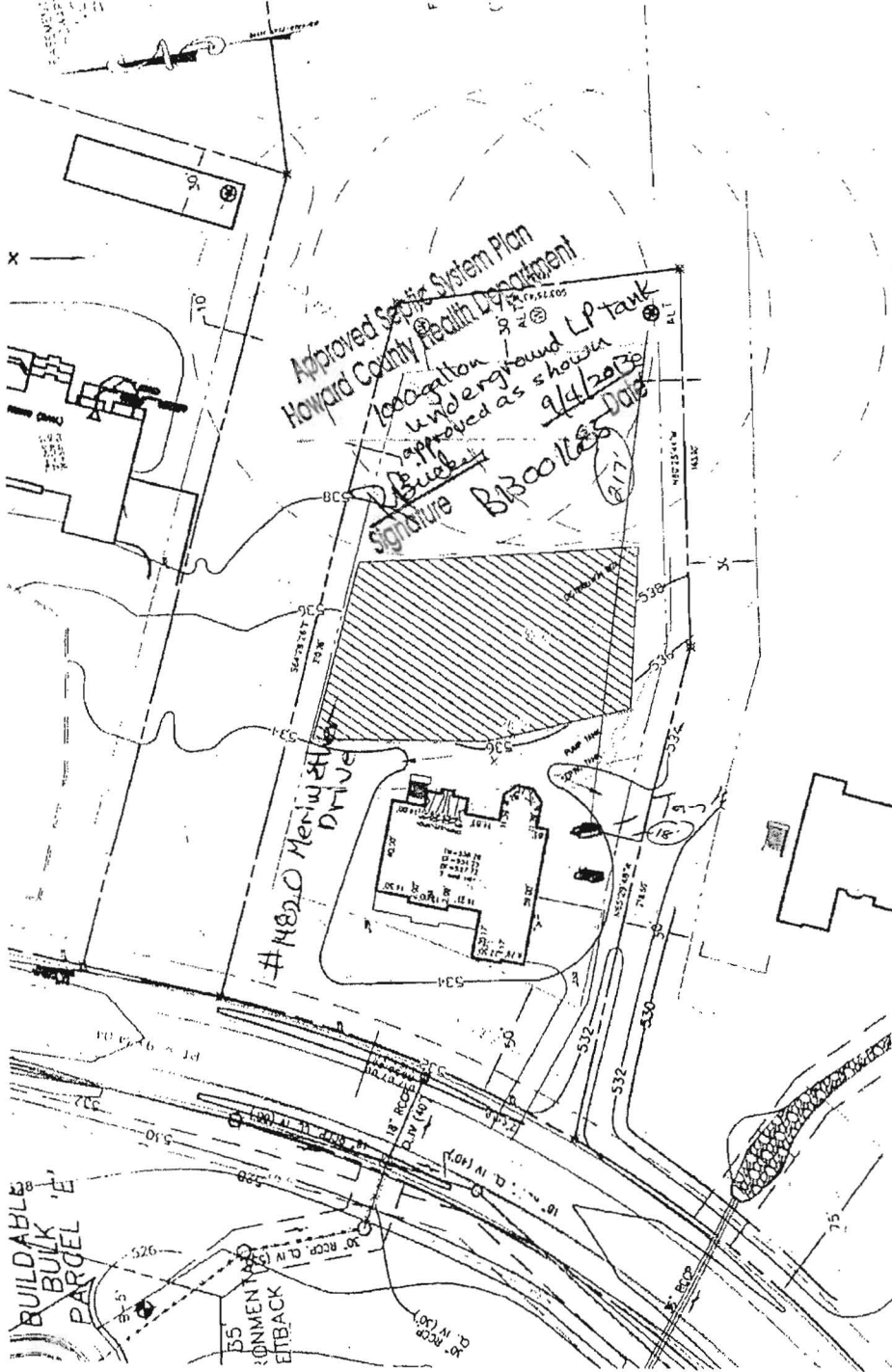
ADDRESS: 14820 MERIWETHER DRIVE
 GAITHERSBURG, MD 20878

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

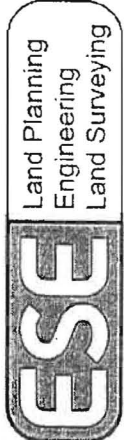
BY HOUSE	531.5
GROUND @ DWY @ HOUSE	531.5
BY IN TANK	530.5
TOP OF TANK	530.5
GROUND OVER TANK	531.5
BY IN PUMP TANK	531.5
GROUND @ PUMP TANK	531.5
BASEMENT DOES NOT DRAIN SEWER	531.5

APPROVED FOR PRIVATE WATER & PRIVATE SEWER SYSTEMS
 HOWARD COUNTY HEALTH DEPARTMENT

COUNTY HEALTH OFFICER DATE



ESE CONSULTANTS INC.
 7157 Columbia Gateway Dr.
 Suite 203
 Columbia, MD 21046
 TEL 410-872-9105
 FAX 410-872-4872



DATE: 08/28/12
 CHK'D: MJB
 SCALE: 1"=20'
 FILE: LOT_#44_PP
 DRAWN: MJB

LOT #44
MERIWETHER FARMS
 LIBER #3779, FOLIO 0484
 PLAT No. 21777, ET SEQ.
 FOURTH ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND

OPTION No. 001
 OPTION No. 015
 OPTION No. 070
 OPTION No. 121
 OPTION No. 523
 OPTION No. 156

TYPE: MAJOR/24' QUANT.
 USE: FOR EXISTING GARAGE
 EXISTING BASEMENT
 LOSS 1' TO HEIGHT OF BASEMENT
 PLAYROOM
 NURSERY ROOM
 BAY WINDOWS





14820

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: _____

Permit No.: _____

Building Address: 14880 Roxbury Rd
 City: Glenelg State: MD Zip Code: 21737
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: _____
 Section: _____ Area: _____ Lot: _____
 Tax Map: _____ Parcel: _____ Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: SF
 Proposed Use: Finished Basement
 Estimated Construction Cost: \$ 28,700
 Description of Work: 1 Bedroom, 1 Media Room, 1 den, 1 Recreation Room, 1 wetbar: 1200

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

Property Owner's Name: Zheng, Xuewen wei
 Address: 14880 Roxbury Rd
 City: Glenelg State: MD Zip Code: 21737
 Phone: _____ Fax: _____
 Email: _____

Applicant's Name & Mailing Address, (if other than stated herein)
 Applicant's Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Contractor Company: Beijing Construction Inc
 Contact Person: Jie Zhang
 Address: 9600 newporter farm CT,
 City: Damascus State: MD Zip Code: 20872
 License No.: 87647
 Phone: 301526-2118 Fax: _____
 Email: Qiang.zhao668@yahoo.com

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

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 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
<input type="checkbox"/> Other:
Sprinkler System:
<input type="checkbox"/> Yes <input type="checkbox"/> No
Grading Permit Number:
Building Shell Permit Number:

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Applicant's Signature: _____
 Email Address: _____
 Title/Company: _____

Print Name: Jie Zhang
 Date: 3/6/14

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		

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

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



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Contractor Company: _____
 Contact Person: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
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 Phone: _____ Fax: _____
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 Address: _____
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Area of construction (sq. ft.):	2 nd floor: <u>65'8"</u>	<u>68'</u>
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Use group:	<input checked="" type="checkbox"/> Finished Basement	
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	<input type="checkbox"/> Crawl Space	
Construction type:	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms: <u>4</u>	
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<input type="checkbox"/> State Certified Modular	No. of 2 BR units:	
	No. of 3 BR units:	
	Other Structure:	
	Dimensions:	
<input checked="" type="checkbox"/> Roadside Tree Project Permit	Footings:	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Roof:	
Roadside Tree Project Permit #	<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 type="checkbox"/> Private	
Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Heating System	
<input checked="" type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input 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>G1200002</u>
Building Shell Permit Number:	

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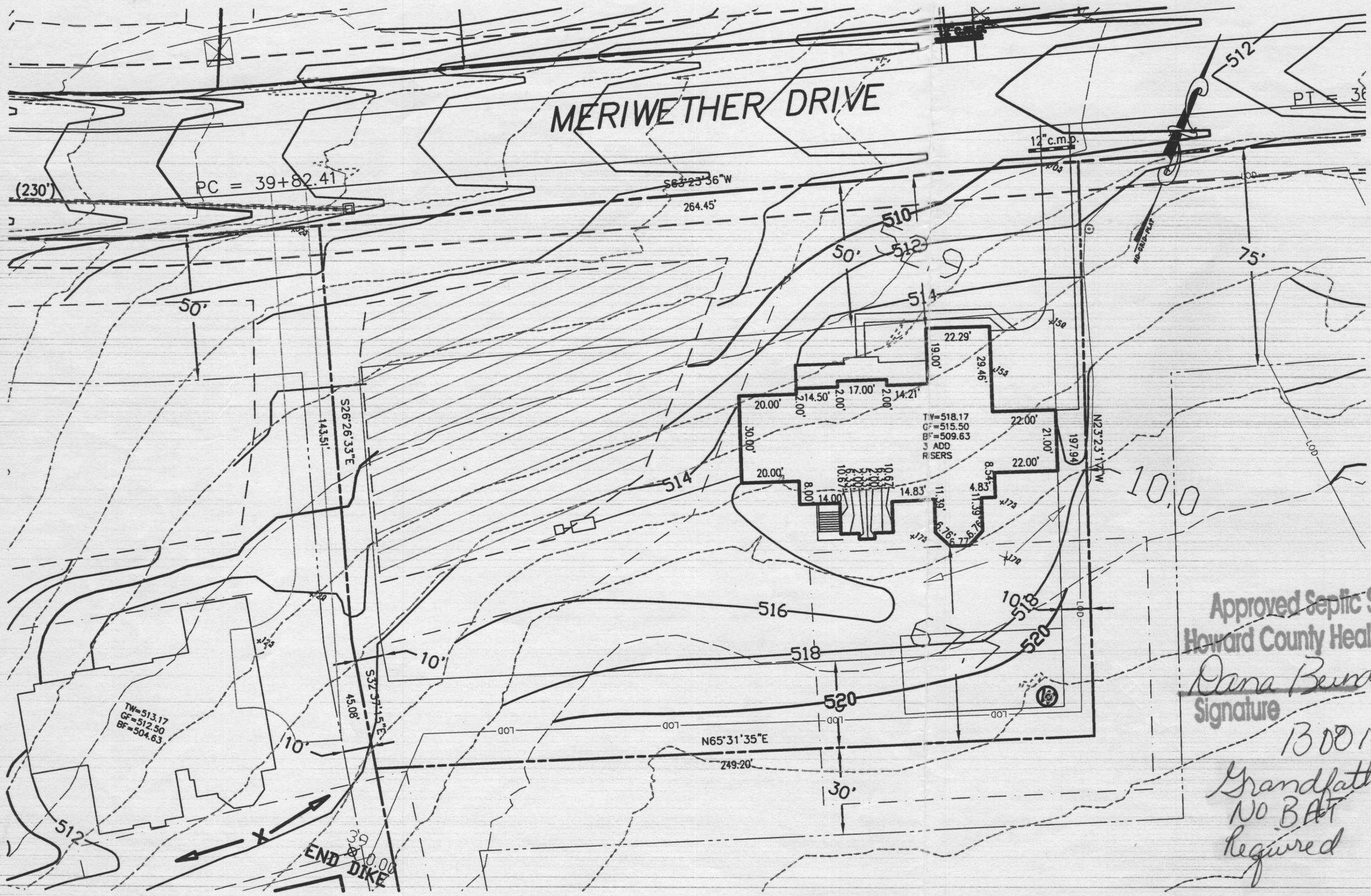
Applicant's Signature: Keith Monath Print Name: Keith Monath
 Email Address: Kmonath@tollbrothersinc.com Date: 3/26/13
 Title/Company: cm / Toll Brothers Inc

RECEIVED
 MAR 26 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	DPZ SETBACK INFORMATION	Filing Fee
<input checked="" type="checkbox"/> State Highways			Front:	\$ 100.00
<input checked="" type="checkbox"/> Building Officials			Rear:	\$
<input checked="" type="checkbox"/> PSZA (Zoning)			Side:	\$
<input checked="" type="checkbox"/> PSZA (Engineering)			Side St.:	\$
<input checked="" type="checkbox"/> Health			All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No	Guaranty Fund \$ 50.00
			Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No	Add'l per Fee \$
			Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No	Total Fees \$
			Coverage for New Town Zone:	Sub-Total Paid \$
			SDP/Red-line approval date:	Balance Due \$
				Check # <u>09262376</u>

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



THE EXISTING WELL(S) SHOWN ON THIS PLAN (IDENTIFIED WITH THE ATTACHED WELL TAG NUMBER HO-95-2160) 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 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 EASEMENT PLAT SHALL NOT BE NECESSARY.

THE LOT SHOWN HEREON WAS RECORDED ON THE PLAT FOR MERIWETHER FARMS, PLAT No. 21765, 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: 14901 MERIWETHER DRIVE
GLENELG, MD 21737

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

Approved Septic System Plan
Howard County Health Department
Dana Beard 4-10-13
Signature Date



13001061
Grandfathered
No BAT
Required

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

COUNTY HEALTH OFFICER _____ DATE _____

- | | |
|------------------------------------|-------------------|
| TYPE: HAMPTON (MAN)- | |
| DAY LIGHT BASEMENT | OPTION No. 018 |
| ADD'L 1' TO HEIGHT OF BASEMENT | OPTION No. 070 |
| PLAYROOM | OPTION No. 121 |
| EXPANDED FAMILY ROOM/GREAT ROOM | OPTION No. 023 |
| 5TH BEDROOM | OPTION No. 028 |
| GRAND CONSERVATORY ELITE | OPTION No. 037 |
| 1ST FLOOR BEDROOM IN LIEU OF STUDY | OPTION No. 075 |
| ADD 2 CAR FRONT ENTRY GARAGE | OPTION No. 263019 |
| ADD POWDER ROOM | OPTION No. 377 |
| NAPLES SUNROOM | OPTION No. 529 |
| PLAYROOM ABOVE CONSERVATORY | OPTION No. 550 |

- | | |
|---------------------------------|-------|
| INV. @ HOUSE | 512.5 |
| GROUND @ INV. @ HOUSE | 516.0 |
| INV. IN TANK | 511.4 |
| INV. OUT TANK | 511.1 |
| TOP OF TANK | 512.1 |
| GROUND OVER TANK | 514.5 |
| INV. IN DIST. BOX | 510.8 |
| INV. OUT DIST. BOX | 510.5 |
| GROUND @ BOX | 514.5 |
| BASEMENT DOES NOT GRAVITY SEWER | |

PLOT PLAN
LOT #22
MERIWETHER FARMS
LIBER 12124, FOLIO 120
PLAT No. 21765, ET SEQ.
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: 03/21/13 SCALE: 1"=40' FILE: LOT_22_PP
CHK'D: MJB JOB#: 3184 DRAWN: MJB

Design Your Own Home™ The Hampton

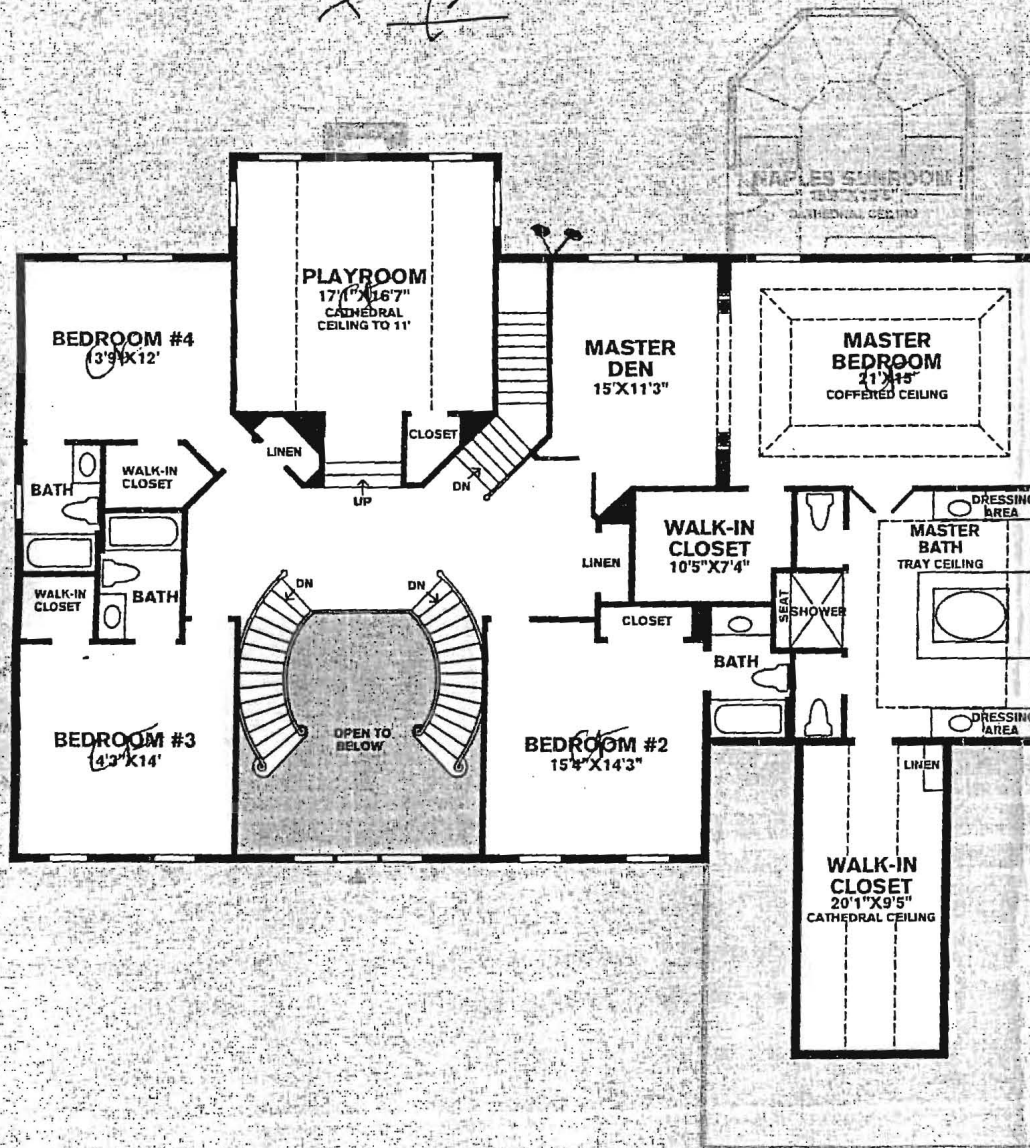
Zheny + Wang
#44 - Cattail overlook

Toll Brothers
 America's Luxury Home Builder™

Second Floor Options:

- 0195 Curved Oak Staircase
- 0144 Coffered Ceiling in Master Bedroom
- 0121 Playroom

X B.W.



The actual appearance of these options in a particular home design may vary from the images shown on this page. Please consult the sales manager and the written details describing these options for exact specifications. All dimensions are approximate and are subject to field variations. Some windows and floor plan may vary with elevations. Some features may vary from community to community. Please consult Sales Manager for details. Options purchased must be specified in exhibit B. The floorplans and elevations of Toll Brothers homes are copyrighted. We have enforced and will continue to enforce our federal copyrights to protect the investment of our homebuyers.

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Design Your Own Home™ The Hampton

Zheng & Wang

Toll Brothers
America's Luxury Home Builder

First Floor Options:

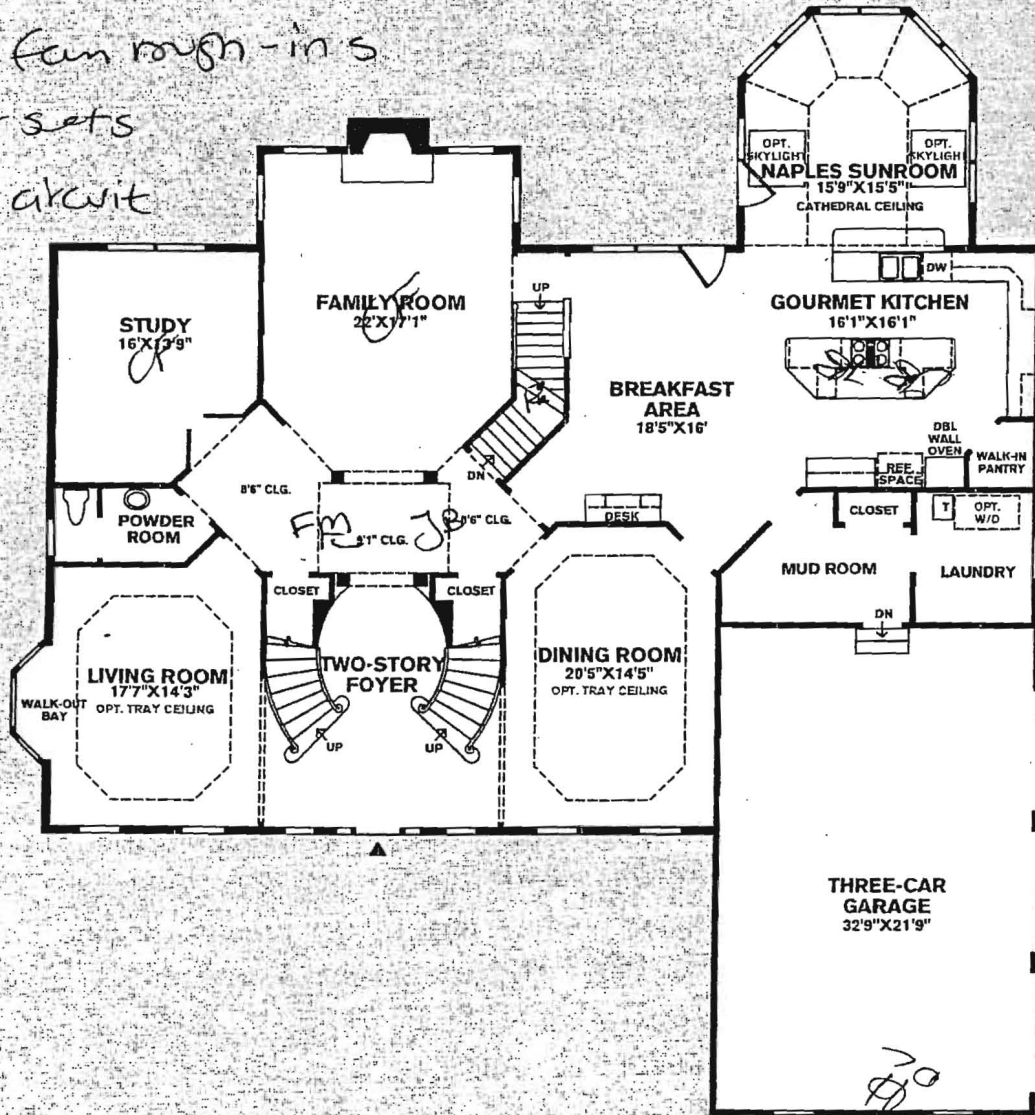
- 0121 Playroom
- 0529 Naples Sun Room Addition
- 0195 Oak Curved Main Stairs ILO Std
- 155a Walk - Out Bay Living Room

X B.W.

#44 - (Cattail Overlook)

1 ceiling fan rough-in's
 2 tracklight sets
 1 dedicated circuit
 1 job
 1 recessed

note: 1 job's over island
 put on individual
 switch



2 convert
 recessed
 lights over
 kitchen
 island
 to jobs

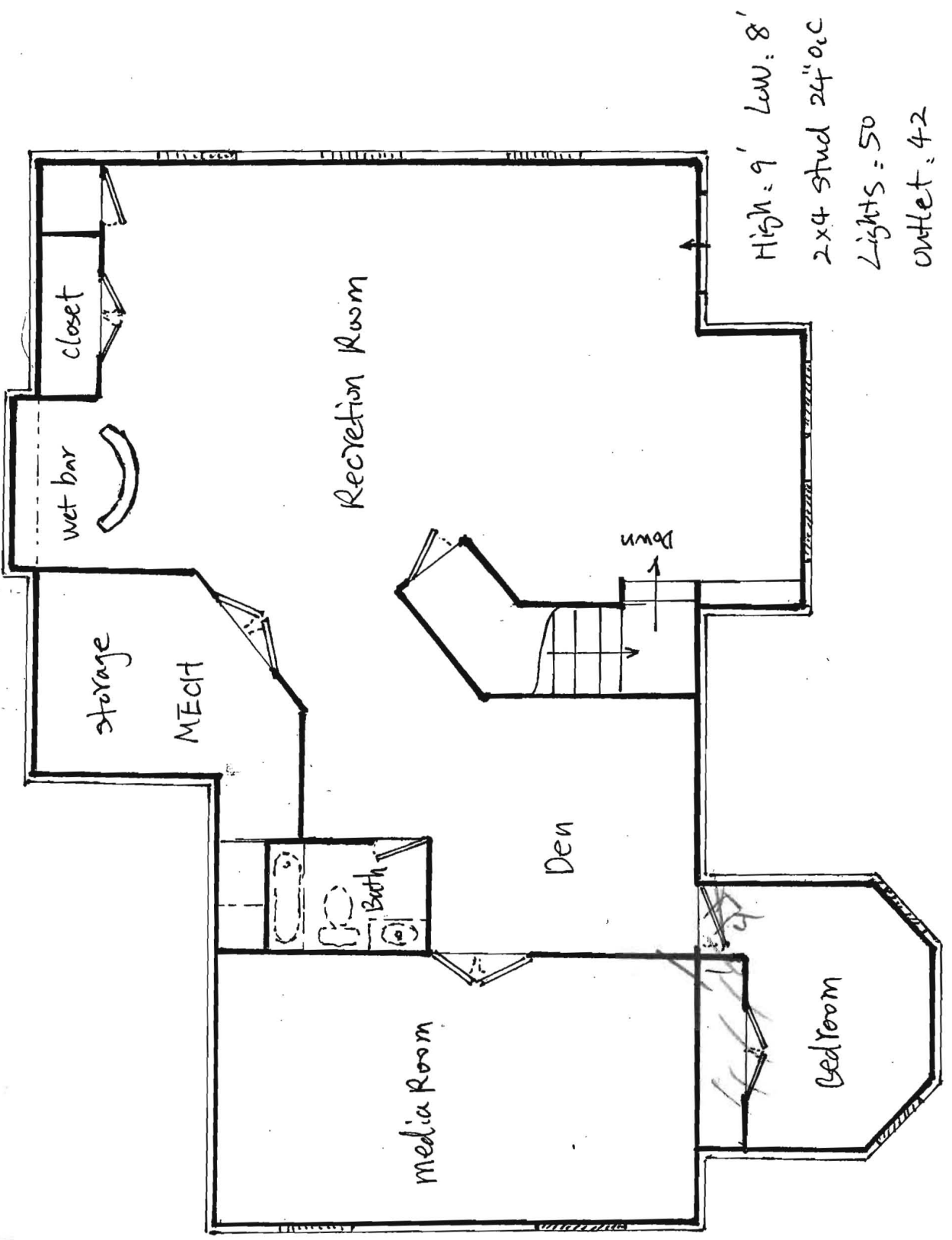
Hose bib
 chrome
 from std
 front location

The actual appearance of these options in a particular home design may vary from the images shown on this page. Please consult the sales manager and the written details describing these options for exact specifications. All dimensions are approximate and are subject to field variations. Some windows and floor plan may vary with elevations. Some features may vary from community to community. Please consult Sales Manager for details. Options purchased must be specified in exhibit B. The floorplans and elevations of Toll Brothers homes are copyrighted. We have enforced and will continue to enforce our federal copyrights to protect the investment of our homebuyers.

Mr. Zheng, Xinmin
Mrs. Wang, Bao

14880 Roxbury Rd

Glenelg, MD 21737



High: 9' Low: 8'
2x4 stud 24" o.c
Lights: 50
Outlet: 42
Breaker: 12