



# Building Permit Application

Howard County Maryland  
Department of Inspections, Licenses and Permits  
3430 Court House Drive  
Permits: 410-313-2455  
[www.howardcountymd.gov](http://www.howardcountymd.gov)

Date Received: 10-21-13

Permit No.: B13003944

Building Address: 12208 Basslers Way  
 City: Clarksville State: MD Zip Code: 21029  
 Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: 0-P-13-058  
 Census Tract: \_\_\_\_\_ Subdivision: Walnut Creek  
 Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: 19  
 Tax Map: 28 Parcel: 49 Grid: 17 & 18  
 Zoning: RC-DEO Map Coordinates: \_\_\_\_\_ Lot Size: 48,466 sq ft

Property Owner's Name: Trinity Quality Homes Inc.  
 Address: 3675 Park Ave #301  
 City: Ellicott City State: MD Zip Code: 21043  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Applicant's Name & Mailing Address, (if other than stated herein)  
 Applicant's Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Existing Use: Vacant Lot  
 Proposed Use: SFD  
 Estimated Construction Cost: \$ 426,798  
 Description of Work: 2 story, FP, 3 car garage, full finished basement with full bath, 10 room, 4 bed rooms, 5 full baths, 1 half bath  
 Occupant or Tenant: \_\_\_\_\_  
 Was tenant space previously occupied?  Yes  No  
 Contact Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Contractor Company: Trinity Quality Homes Inc.  
 Contact Person: Sherry Mewshaw  
 Address: 3675 Park Ave #301  
 City: Ellicott City State: MD Zip Code: 21043  
 License No.: 699  
 Phone: 443-535-8516 Fax: \_\_\_\_\_  
 Email: sherry@trinityhomes.com

Engineer/Architect Company: NA  
 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 <sup>st</sup> floor: _____ 2 <sup>nd</sup> floor: _____
Area of construction (sq. ft.):	Basement: _____ <input type="checkbox"/> Finished Basement <input checked="" type="checkbox"/> Unfinished Basement
Use group:	<input type="checkbox"/> Crawl Space <input type="checkbox"/> Slab on Grade
Construction type:	<input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular
	No. of Bedrooms: <u>4</u> <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: _____
<input 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	
<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 type="checkbox"/> No	
<u>Heating System</u>	
<input type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input checked="" type="checkbox"/> Natural Gas <input 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>G13000238</u>	
Building Shell Permit Number: _____	

THE UNDERSIGNED HEREDY 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.

Sherry Mewshaw  
 Applicant's Signature  
 sherry@trinityhomes.com  
 Email Address  
 Selections Director  
 Title/Company

Sherry Mewshaw  
 Print Name  
10/21/13  
 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		

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

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: \_\_\_\_\_

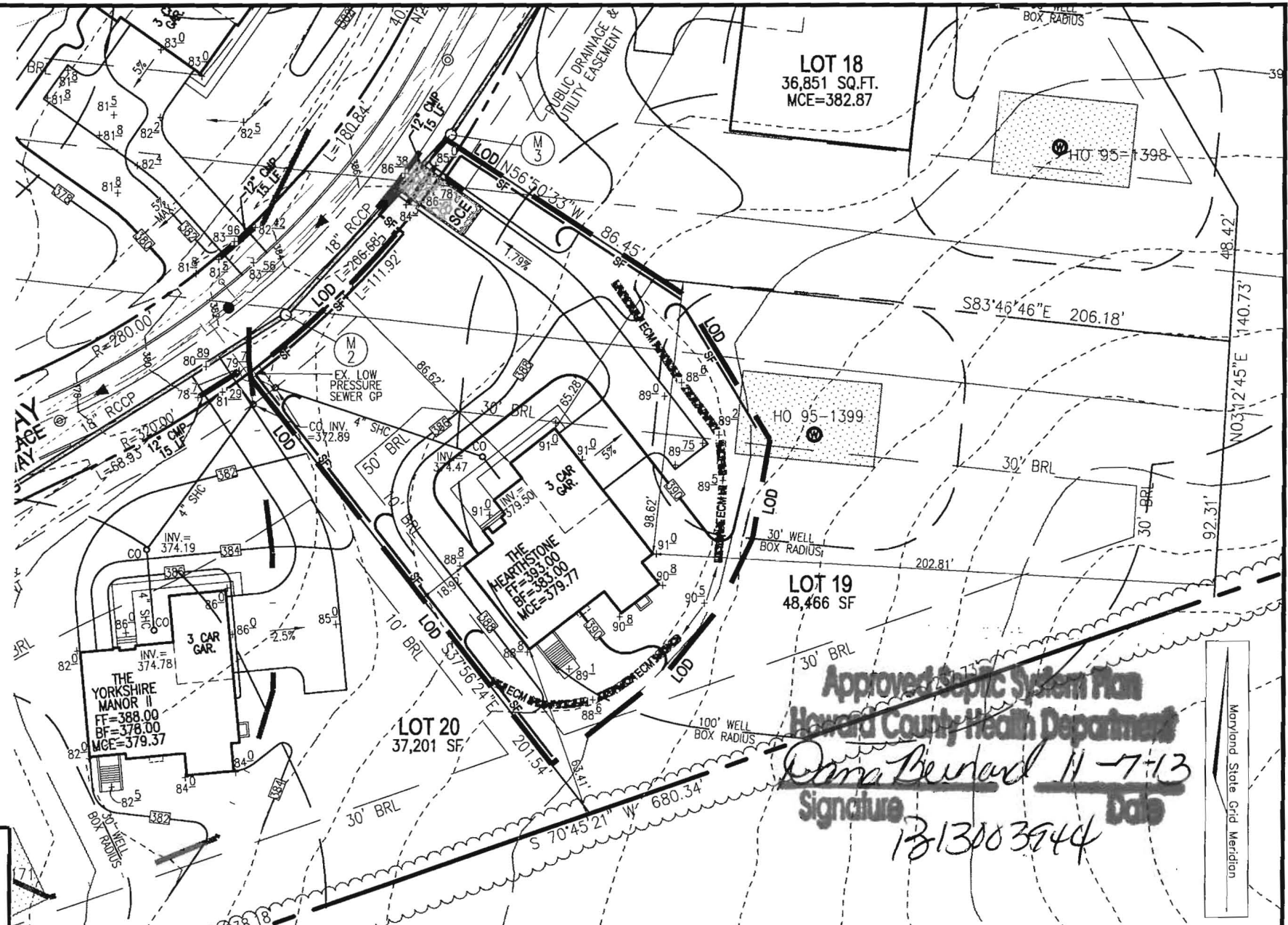
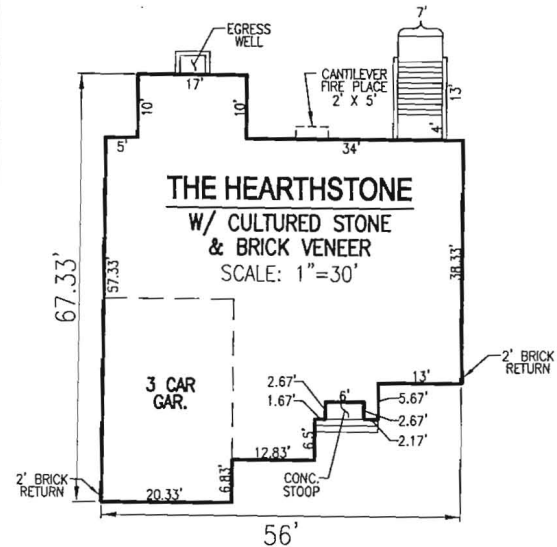
Filing Fee	\$	<u>100</u>
Permit Fee	\$	
Tech Fee	\$	
Excise Tax	\$	
PSFS	\$	
Guaranty Fund	\$	<u>50</u>
Add'l per Fee	\$	
Total Fees	\$	
Sub-Total Paid	\$	
Balance Due	\$	
Check	#	<u>025128</u>

THE EXISTING WELL SHOWN ON LOT 19 TAG NO. 95-1399 HAS BEEN FIELD LOCATED BY FISHER, COLLINS, & CARTER, INC., AND IS ACCURATELY SHOWN.

BUILDING OF LOT 19 FLOOR AREAS:  
 BASEMENT FLOOR AREA: 2,190  
 FIRST FLOOR AREA: 2,220  
 SECOND FLOOR AREA: 2,770  
 BEDROOMS: 5

NOTE: STORMWATER MANAGEMENT (WQv AND CPv) IS PROVIDED BY EXTENDED DETENTION FACILITY, ONE RAIN GARDEN, ROADWAY GRASS CHANNELS, AND ON-LOT LEVEL SPREADERS (F-07-076). LOT 19 DOES NOT REQUIRE ANY PRACTICES.

BUILDING PERMIT NO. \_\_\_\_\_



LOT 18  
36,851 SQ.FT.  
MCE=382.87

LOT 19  
48,466 SF

LOT 20  
37,201 SF

Approved Septic System Plan  
 Howard County Health Department

*Dana Bernard* 11-7-13  
 Signature Date

1313003944

SCALE: AS SHOWN  
 DRAWN BY: JMR  
 CHECKED BY: RHV  
 DATE: OCTOBER 2013  
 PROJECT #: 13-21  
 SHEET#: 1 OF 1

**PLOT PLAN**  
**WALNUT CREEK**  
**LOT 19**  
**REF: F-07-076**  
 TAX MAP 28 PARCEL 49  
 BLOCK 11  
 5TH ELECTION DISTRICT  
 HOWARD COUNTY, MARYLAND

**VE ROBERT H. VOGEL ENGINEERING, INC.**  
 ENGINEERS • SURVEYORS • PLANNERS  
 8407 MAIN STREET ELLICOTT CITY, MD 21043 TEL: 410.461.7666 FAX: 410.461.8961

**SCALE**  
1"=50'

**OWNER**  
 TRINITY QUALITY HOMES, INC.  
 3675 PARK AVENUE, SUITE 301  
 ELLICOTT CITY, MARYLAND 21043  
 (410) 480-0023

**ADDRESS**  
 12208 BASSLERS WAY  
 ELLICOTT CITY, MD 21042  
 GP: 13-038

Maryland State Grid Meridian