

G-9621

DEPARTMENT OF INSPECTIONS AND PERMITS  
3430 COURT HOLY  
ELK COTT CITY, MD 21077  
PERMITS (410) 313-2455 INSPECTION (410) 313-1810  
AUTOMATED INFORMATION (410) 313-3900

# HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

1300158965

Building Address 14341 Howard Rd  
Glen Ely, Md 21737  
 Suite/Apt. #: 05-407826 SDP/WR/Petition #: 06-67  
 Census Tract 605101 Subdivision Wheatfield 1K1D  
 Section 27 Area \_\_\_\_\_ Lot 206 Stab 2  
 Tax Map 27 Parcel 206 Grid \_\_\_\_\_  
 Zoning RC20P Map Coordinates \_\_\_\_\_ Lot size 3.00A

Property Owner's Name NVR Inc.  
 Address 6805 Marshakee Dr. Ste 130  
 City Elkridge State MD Zip Code 21077  
 Home Phone \_\_\_\_\_ Work Phone 410-379-5958  
 Applicant's Name & Mailing Address, (if other than stated hereon):  
RS Cecil - Permit App Service  
 Phone 443-944-9702 Fax (410) 379-

Existing Use Vernon  
 Proposed Use SR  
 Estimated Construction Cost \$ 17700 185,000  
 Description of Work Mt. Vernon - need  
Worksheet Mt Vernon - Sun Room -  
3 Car Garage - (HBR)

Contractor Company NVR Inc.  
 Contact Person Kimberly Cecil  
 Address 7601 Lewinsville Rd.  
 City Mcheas State Wt Zip Code 2214  
 License No. 56  
 Phone 443-944-9702 Fax \_\_\_\_\_

Occupant or Tenant \_\_\_\_\_  
 Contact Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_

Engineer or Architect Company \_\_\_\_\_  
 Contact Person \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_

### BUILDING DESCRIPTION - COMMERCIAL

### BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: _____	Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private
No. of stories: _____	Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <input type="checkbox"/> Propane Gas <input type="checkbox"/>
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	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads _____

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

Applicant's Signature [Signature]  
 Title/Company NVR Inc.

Print Name RS Cecil Agent NVR Inc.  
 Date 4-10-06

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

AGENCY	DATE	SIGNATURE	APPROVAL
<input checked="" type="checkbox"/> Land Development, DPZ			
<input checked="" type="checkbox"/> State Highways			
<input checked="" type="checkbox"/> Building Official			
<input checked="" type="checkbox"/> Dev. Engineering, DPZ			
<input checked="" type="checkbox"/> Health	<u>4/27/06</u>	<u>[Signature]</u>	
<input checked="" type="checkbox"/> Fire Protection			
<input checked="" type="checkbox"/> Is Sediment Control approval required prior to issuance?			
YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>			
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			
ONE STOP SHOP: <input type="checkbox"/>			

DPZ SETBACK INFORMATION	PROPERTY ID#
Front: _____	Filing fee \$ <u>100</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>240877</u>
SDP/Red-line approval date _____	Validation # <u>110947</u>

Distribution of Copies: White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA  
 Accepted by [Signature]

# HOWARD ROAD

562°06'33"E 114.68' R=1000.00' L=109.11' 568°21'39"E 70.30' 29.28' 564°45'47"E

**LOT 1**  
3.0000 ACRES

75' BRL

NOTE  
BASEMENT WILL NOT  
SEWER BY GRAVITY

535°33'41"W 401.98'

N30°29'60"E 474.47'

DIST. BOX  
EX. GRD. 532.00  
INV. IN 529.20

SEPTIC AREA

1,500 GAL. SEPTIC TANK  
INV. IN 529.50  
INV. OUT 529.20

Inv = 527.00  
38" 4" PVC @  
3.95%

SB# 4  
Bio-Retention  
System #2

Cleanouts  
Inv. 528.5

MOUNT VERNON  
E.F. 535.30  
B. 525.60  
SB.# 3

Bio-Retention  
System #1  
Cleanouts  
Inv = 525.5

SUN ROOM  
3 CAR GAR.  
4" PVC ROOF UNDER DRAIN

30" INGRESS/EGRESS  
DRIVEWAY EASEMENT  
FOR LOTS 1 THRU 4

EX. WELL G  
HO 95-0151

EX. WELL  
HO 9

