



# 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: 2/25/13

Permit No.: BI 3000 6606

8120

Building Address: 8702 Holly Manor Way  
City: Fulton State: MD Zip Code: 20759  
Suite/Apt. #: \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
Census Tract: \_\_\_\_\_ Subdivision: Holly House  
Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: 5  
Tax Map: \_\_\_\_\_ Parcel: \_\_\_\_\_ Grid: \_\_\_\_\_  
Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: \_\_\_\_\_

Existing Use: New  
Proposed Use: Residential  
Estimated Construction Cost: \$ 5000  
Description of Work: Install 1000 Gal. UG Tank

Occupant or Tenant: \_\_\_\_\_  
Was tenant space previously occupied?  Yes  No  
Contact Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

Property Owner's Name: Mitchell & Best  
Address: 1686 E. Gude Dr.  
City: Rockville State: MD Zip Code: 20850  
Phone: 301 762 9511 Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

Applicant's Name & Mailing Address, (if other than stated here):  
Applicant's Name: Ken W Smith  
Address: 10405 Bear Cr Dr.  
City: Hagerstown State: MD Zip Code: 21740  
Phone: 240 217 4325 Fax: 240 764 2883  
Email: \_\_\_\_\_

Contractor Company: Ferrelgas  
Contact Person: Ken Smith  
Address: 3601 FSK Hwy  
City: Hagerstown State: MD Zip Code: 21787  
License No.: 61543  
Phone: 240 217 4325 Fax: 240 764 2883  
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:  | <u>Depth</u>   | <u>Width</u> |
| 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                                 |              |
| Use group:   | <input type="checkbox"/> Unfinished Basement                               |              |
|  | <input type="checkbox"/> Crawl Space                                       |              |
| <b>Construction type:</b>  | <input type="checkbox"/> Slab on Grade                                     |              |
| <input type="checkbox"/> Reinforced Concrete                     | No. of Bedrooms:   |              |
| <input type="checkbox"/> Structural Steel                        | <b>Multi-family Dwelling</b>   |              |
| <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                                 |              |

| Utilities   |  |
|---|--|
| <b>Water Supply</b>   |  |
| <input type="checkbox"/> Public   |  |
| <input checked="" type="checkbox"/> Private                               |  |
| <b>Sewage Disposal</b>  |  |
| <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             |  |
| <b>Heating System</b>   |  |
| <input type="checkbox"/> Electric <input type="checkbox"/> Oil            |  |
| <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas |  |
| <input type="checkbox"/> Other:   |  |
| <b>Sprinkler System:</b>  |  |
| <input type="checkbox"/> Yes <input type="checkbox"/> No                  |  |
| Grading Permit Number: _____  |  |
| Building Shell Permit Number: <u>BI 2003341</u>                           |  |

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: Ken W Smith Print Name: Ken W Smith  
Email Address: ken.smith@ferrelgas.com Date: 2/25/13  
Title/Company: Operation Mgr. Ferrelgas

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>3/9/13</u> | <u>R. Bricker</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     | \$               |
| Permit Fee     | \$ <u>100.00</u> |
| Tech Fee       | \$ <u>10.00</u>  |
| Excise Tax     | \$               |
| PSFS           | \$               |
| Guaranty Fund  | \$               |
| Add'l per Fee  | \$               |
| Total Fees     | \$ <u>110.00</u> |
| Sub-Total Paid | \$               |
| Balance Due    | \$               |
| Check #        | #                |

2204621056023

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

\*MAIL TO APPLICANT

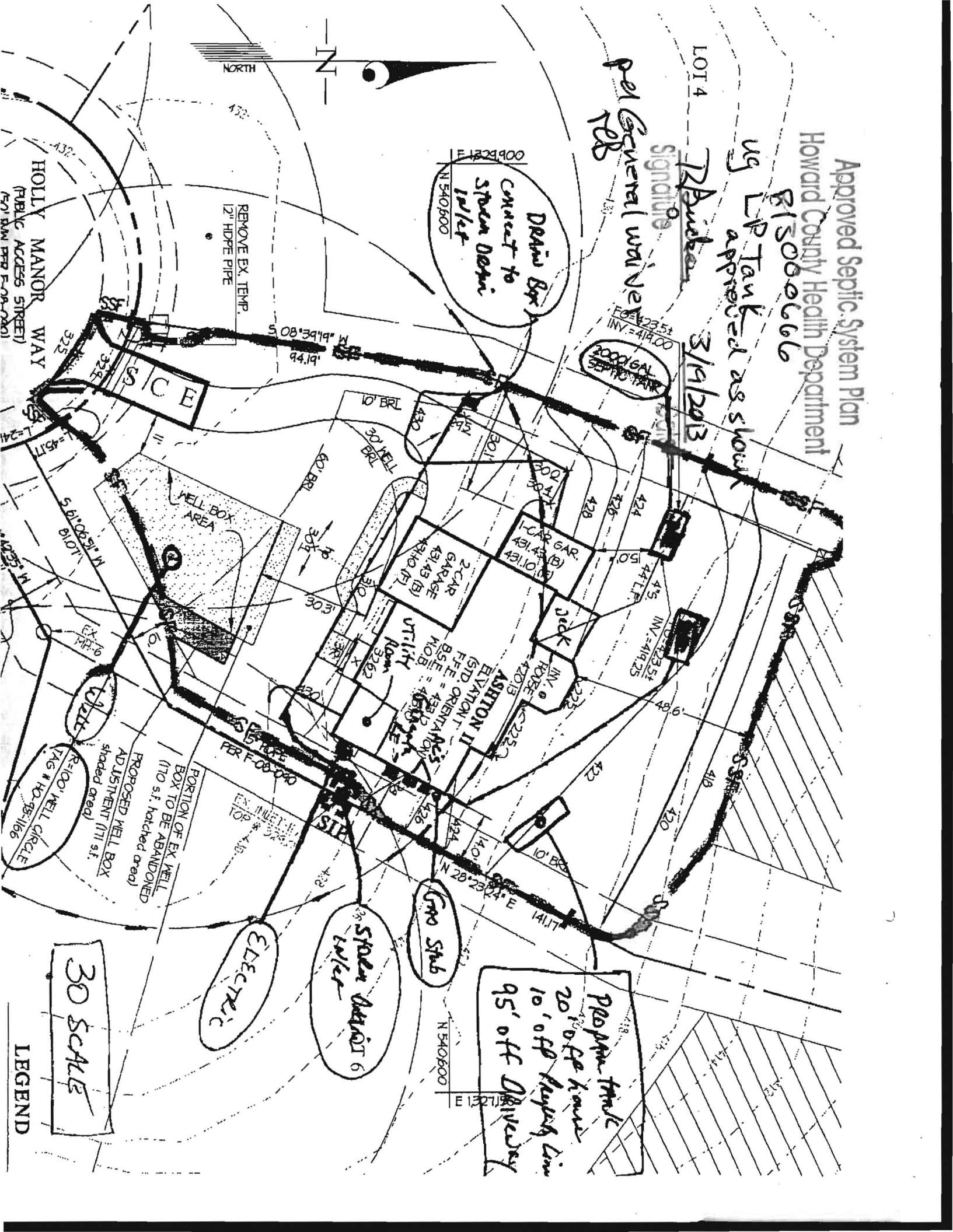
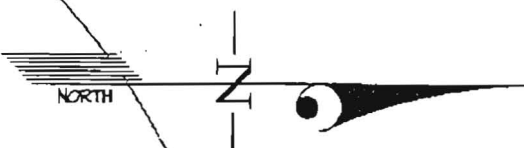
Approved Septic System Plan  
 Howard County Health Department  
 R15000666

ug LP Tank approved as shown

3/19/2013

Signature

per General waiver  
 RDB



Drain Box  
 Connect to  
 Storm Drain  
 1/16"

2000 GAL  
 6" DIA  
 LP TANK

ASHTON II  
 (STD ORIENTA)  
 ELEVATION T  
 F.F.E. = 432.12  
 B.S.E. = 432.12  
 MOB. = 432.12  
 1-CAR GAR.  
 431.43 (B)  
 2-CAR GARAGE  
 431.43 (B)  
 UTILITY ROOM  
 376.2

HOLLY MANOR WAY  
 (PUBLIC ACCESS STREET)  
 (50' B.W. PER F-108-040)

PORTION OF EX WELL  
 BOX TO BE ABANDONED  
 (170 s.f.; hatched area)  
 PROPOSED WELL BOX  
 ADJUSTMENT (711 s.f.;  
 shaded area)  
 R=100' WELL CIRCLE  
 TAG # HD-95-1166

Proposed front  
 20' off house  
 10' off property line  
 95' off driveway

Storm Drain 6  
 1/16"

Gas Stub

ELECTRIC

30 SCALE

LEGEND

Permits: 410-313-2455  
 Inspections: 410-313-1810  
 Automated Line: 410-313-3800

Howard County Building/Fire Permit Application  
 Department of Inspections, Licenses & Permits  
 3430 Court House Drive  
 Ellicott City, MD 21043

Permit Number:

**B12003341**

Building Address: **8120 Holly Manor Way**  
**Fulton, MD 20759**

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

Census Tract: \_\_\_\_\_ Subdivision: **Holly House Meadows**

Section: **6051.02** Area: \_\_\_\_\_ Lot: **5**

Tax Map: **45** Parcel: **24** Grid: **6**

Zoning: **RC-DEO** Map Coordinates: \_\_\_\_\_ Lot Size: **40,091 SF**

Existing Use: **Vacant**

Proposed Use: **Single Family Dwelling**

Estimated Construction Cost: \$ **362,793**

Description of Work: **Ashton II I Elevation, 2 car garage, court yard garage, full basement w/ BR, rear sunroom, deck, fireplace, 12 R, 4 FB, 1 HB, 5 BR, alt. kitchen. Seeking a Silver Certification Level of the National Green Building Standard ICC-700 through 3rd party verification by Pando Alliance (Verifier's info. attached)**

Was tenant space previously occupied?  Yes  No

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

Address: \_\_\_\_\_

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

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

Email: \_\_\_\_\_

Property Owner's Name: **Holly House Development LLC**

Address: **14045 Gared Dr.**

City: **Glenwood** State: **MD** Zip Code: **21738**

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Applicant's Name & Mailing Address, (if other than stated herein):

**Ralph Mobley, Jr., Mitchell & Best Homebuilders LLC**

**1686 East Gude Drive, Rockville, MD 20850**

Phone: **301-762-9511** Fax: **301-762-3954**

Email: **rmobley@mitchellbest.com**

Contractor Company: **Mitchell & Best Homebuilders LLC**

Contact Person: **Ralph Mobley**

Address: **1686 E. Gude Drive**

City: **Rockville** State: **MD** Zip Code: **20850**

License No.: **1457**

Phone: **301-762-9511** Fax: **301-762-3954**

Email: **rmobley@mitchellbest.com**

Engineer/Architect Company: \_\_\_\_\_

Responsible Design Prof.: \_\_\_\_\_

Address: \_\_\_\_\_

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

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

Email: \_\_\_\_\_

**BUILDING DESCRIPTION - COMMERCIAL**

| Building Characteristics  | Utilities   |
|---|---|
| Height:   | <u>Water Supply</u>   |
| No. of stories:   | <input type="checkbox"/> Public   |
| Gross area, sq. ft./floor:  | <input type="checkbox"/> Private  |
|   | <u>Sewage Disposal</u>  |
| Area of construction (sq. ft.):   | <input type="checkbox"/> Public   |
|   | <input type="checkbox"/> Private  |
| Use group:  | Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No        |
|   | Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No             |
| <u>Construction type:</u>   | <u>Heating System</u>   |
| <input type="checkbox"/> Reinforced Concrete                            | <input type="checkbox"/> Electric <input type="checkbox"/> Oil            |
| <input type="checkbox"/> Structural Steel                               | <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas |
| <input type="checkbox"/> Masonry  | <u>Sprinkler System:</u>  |
| <input type="checkbox"/> Wood Frame                                     | <input type="checkbox"/> N/A  |
| <input type="checkbox"/> State Certified Modular                        | <input type="checkbox"/> Full   |
| <input checked="" type="checkbox"/> <u>Roadside Tree Project Permit</u> | <input type="checkbox"/> Partial  |
| <input type="checkbox"/> Yes <input type="checkbox"/> No                | <input type="checkbox"/> Other Suppression                                |
| <u>Roadside Tree Project Permit #</u>                                   | No. of Heads:   |

**BUILDING DESCRIPTION - RESIDENTIAL**

| Building Characteristics  | Utilities   |
|---|---|
| <input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse | <u>Water Supply</u>   |
| <u>Depth</u> <u>Width</u>   | <input type="checkbox"/> Public   |
| 1 <sup>st</sup> floor: <b>50' - 77'-3"</b>  | <input checked="" type="checkbox"/> Private                                   |
| 2 <sup>nd</sup> floor: <b>44' - 62'-8"</b>  | <u>Sewage Disposal</u>  |
| Basement: <b>50' - 77'-8"</b>   | <input type="checkbox"/> Public   |
| <input checked="" type="checkbox"/> Finished Basement                                 | <input checked="" type="checkbox"/> Private                                   |
| <input type="checkbox"/> Unfinished Basement  | Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| <input type="checkbox"/> Crawl Space  | Gas: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No      |
| <input type="checkbox"/> Slab on Grade  | <u>Heating System</u>   |
| No. of Bedrooms: <b>5</b>   | <input checked="" type="checkbox"/> Electric                                  |
| <u>Multi-family Dwelling</u>  | <input type="checkbox"/> Oil  |
| No. of efficiency units:  | <input type="checkbox"/> Natural Gas  |
| No. of 1 BR units:  | <input checked="" type="checkbox"/> Propane Gas                               |
| No. of 2 BR units:  |   |
| No. of 3 BR units:  |   |
| Other Structure:  |   |
| Dimensions:   | <input checked="" type="checkbox"/> <u>Roadside Tree Project Permit</u>       |
| Footings:   | <input type="checkbox"/> Yes <input type="checkbox"/> No                      |
| Roof:   | <input type="checkbox"/> Yes <input type="checkbox"/> No                      |
| <input type="checkbox"/> State Certified Modular                                      | <u>Roadside Tree Project Permit #</u>   |
| <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.

*Ralph Mobley, Jr.*  
 Applicant's Signature

**rmobley@mitchellbest.com**

Email Address

**AVP of Land/Mitchell & Best Homebuilders LLC**

Title/Company

**Ralph Mobley, Jr.**  
 Print Name

**10/05/12**

Date

**G12000268**

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               | <b>11/9/12</b> | <b>H2</b>             |
| Fire Protection  |                |                       |

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

| 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      | \$ <b>100.00</b> |
| Permit Fee      | \$               |
| Tech Fee        | \$               |
| Excise Tax      | \$               |
| PSFS            | \$               |
| Guaranty Fund   | \$ <b>50.00</b>  |
| Add'l per Fee   | \$               |
| Total Fees      | \$               |
| Sub- Total Paid | \$               |
| Balance Due     | \$               |

**CK#000119**

**SEDIMENT CONTROL NOTES**

- A MINIMUM OF 24 HOURS NOTICE MUST BE GIVEN TO THE HOWARD COUNTY OFFICE OF INSPECTION AND PERMITS PRIOR TO THE START OF ANY CONSTRUCTION. (M) 316-1055
- ALL VEGETATIVE AND STRUCTURAL PRACTICES ARE TO BE INSTALLED ACCORDING TO THE PLAN AND ARE TO BE IN CONFORMANCE WITH THE '2011 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL' AND REVISIONS THERETO.
- FOLLOWING INITIAL SOIL DISTURBANCE OR REDISTURBANCE, PERMANENT OR TEMPORARY STABILIZATION SHALL BE COMPLETED WITHIN:
  - 3 CALENDAR DAYS AS TO THE SURFACE OF ALL PERIMETER DIKES, SHALES, DITCHES, PERIMETER SLOPES, AND ALL SLOPES STEEPER THAN 3 HORIZONTAL TO 1 VERTICAL (3:1), AND
  - 1 CALENDAR DAYS AS TO ALL OTHER DISTURBED OR GRADED AREAS ON THE PROJECT SITE UNDER ACTIVE GRADING.
- ALL SEDIMENT TRAPS/BASINS SHOWN MUST BE FENCED AND WARNING SIGNS POSTED AROUND THEIR PERIMETER IN ACCORDANCE WITH VOL. 1, CHAPTER 7, OF THE HOWARD COUNTY DESIGN MANUAL, STORM DRAINAGE.
- ALL DISTURBED AREAS MUST BE STABILIZED WITHIN THE TIME PERIOD SPECIFIED ABOVE IN ACCORDANCE WITH THE '2011 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL' FOR PERMANENT SEEDINGS, SOD, TEMPORARY SEEDINGS AND MULCHING (SEC. B). TEMPORARY STABILIZATION, WITH MULCH ALONE, CAN ONLY BE DONE WHEN RECOMMENDED SEEDING DATES DO NOT ALLOW FOR PROPER GERMINATION AND ESTABLISHMENT OF GRASSES.
- ALL SEDIMENT CONTROL STRUCTURES ARE TO REMAIN IN PLACE AND ARE TO BE MAINTAINED IN OPERATIVE CONDITION UNTIL PERMITS FOR THEIR REMOVAL HAS BEEN OBTAINED FROM THE HOWARD COUNTY SEDIMENT CONTROL INSPECTOR.

|                                     |            |
|-------------------------------------|------------|
| TOTAL AREA OF SITE                  | : 0.42 ac. |
| AREA DISTURBED                      | : 0.41 ac. |
| AREA TO BE ROOFED OR PAVED          | : 0.34 ac. |
| AREA TO BE VEGETATIVELY STABILIZED  | : 0.34 ac. |
| TOTAL CUT                           | : 400 cu.  |
| TOTAL FILL                          | : 400 cu.  |
| OFF-SITE WASTE/BORROW AREA LOCATION | : N/A      |

- ANY SEDIMENT CONTROL PRACTICE WHICH IS DISTURBED BY GRADING ACTIVITY FOR PLACEMENT OF UTILITIES MUST BE REPAIRED ON THE SAME DAY OF DISTURBANCE
- ADDITIONAL SEDIMENT CONTROL MUST BE PROVIDED, IF DEEMED NECESSARY BY THE HOWARD COUNTY DPM SEDIMENT CONTROL INSPECTOR.
- ON ALL SITES WITH DISTURBED AREAS IN EXCESS OF 2 ACRES, APPROVAL OF THE INSPECTION AGENCY SHALL BE REQUESTED UPON COMPLETION OF INSTALLATION OF PERIMETER EROSION AND SEDIMENT CONTROLS, BUT BEFORE PROCEEDING WITH ANY OTHER EARTH DISTURBANCE OR GRADING. OTHER BUILDING OR GRADING INSPECTION APPROVALS MAY NOT BE AUTHORIZED UNTIL THIS INITIAL APPROVAL BY THE INSPECTION AGENCY IS MADE.
- TRENCHES FOR THE CONSTRUCTION OF UTILITIES IS LIMITED TO 3 PIPE LENGTHS OR THAT WHICH SHALL BE BACKFILLED AND STABILIZED WITHIN 1 WORKING DAY, WHICHEVER IS SHORTER.

**B-44 STANDARDS AND SPECIFICATIONS FOR TEMPORARY STABILIZATION**

- DEFINITION**  
TO STABILIZE DISTURBED SOILS WITH VEGETATION FOR UP TO 6 MONTHS.
- PURPOSE**  
TO USE FAST GROWING VEGETATION THAT PROVIDES COVER ON DISTURBED SOILS. CONDITIONS WHERE PRACTICE APPLIES EXPOSED SOILS WHERE GROUND COVER IS NEEDED FOR A PERIOD OF 6 MONTHS OR LESS. FOR LONGER DURATION OF TIME, PERMANENT STABILIZATION PRACTICES ARE REQUIRED.
- CRITERIA**
- SELECT ONE OR MORE OF THE SPECIES OR SEED MIXTURES LISTED IN TABLE B.1 FOR THE APPROPRIATE PLANT HARDNESS ZONE (FROM FIGURE B.3), AND ENTER THEM IN THE TEMPORARY SEEDING SUMMARY (BELOW ALONG WITH APPLICATION RATES, SEEDING DATES AND SEEDING DEPTHS). IF THIS SUMMARY IS NOT PUT ON THE PLAN AND COMPLETED, THEN TABLE B.1 PLUS FERTILIZER AND LIME RATES MUST BE PUT ON THE PLAN.
  - FOR SITES HAVING SOIL TESTS PERFORMED, USE AND SHOW THE RECOMMENDED RATES BY THE TESTING AGENCY SOIL TESTS ARE NOT REQUIRED FOR TEMPORARY SEEDING.
  - WHEN STABILIZATION IS REQUIRED OUTSIDE OF A SEEDING SEASON, APPLY SEED AND MULCH OR STRAW MULCH ALONE AS PRESCRIBED IN SECTION B-4-3A.1.B AND MAINTAIN UNTIL THE NEXT SEEDING SEASON.

**TEMPORARY SEEDING SUMMARY**

| HARDNESS ZONE: 6b |                 | SEED MIXTURE: #9 (Tall Fescue, Kentucky Bluegrass) |                                     | FERTILIZER RATE (10-10-10) |                                | LIME RATE                     |            |
|-------------------|-----------------|--|-------------------------------------|----------------------------|--------------------------------|-------------------------------|------------|
| No.               | SPECIES         | APPLICATION RATE (lb./ac.)                         | SEEDING DATES                       | SEEDING DEPTHS             | (10-10-10)                     | (10-10-10)                    | LIME RATE  |
| 1.                | ANNUAL RYEGRASS | 40 lb./ac.   | Mar. 1 to May 15, Aug. 1 to Oct. 15 | 0.5 INCHES                 | 436 lb./ac. (10 lb./1,000 sq.) | 90 lb./ac. (90 lb./1,000 sq.) | 2 tons/ac. |
| 2.                | PEARL MILLET    | 20 lb./ac.   | May 16 to July 31                   | 0.5 INCHES                 | 436 lb./ac. (10 lb./1,000 sq.) | 90 lb./ac. (90 lb./1,000 sq.) | 2 tons/ac. |

**DEVELOPER'S/BUILDER'S CERTIFICATE**

"I/WE CERTIFY THAT ALL DEVELOPMENT AND/OR CONSTRUCTION WILL BE DONE ACCORDING TO THIS PLAN, AND THAT ANY RESPONSIBLE PERSONNEL INVOLVED IN THE CONSTRUCTION PROJECT WILL HAVE A CERTIFICATE OF ATTENDANCE AT A MARYLAND DEPARTMENT OF THE ENVIRONMENT APPROVED TRAINING PROGRAM FOR THE CONTROL OF SEDIMENT AND EROSION BEFORE BEGINNING THE PROJECT. I ALSO AUTHORIZE PERIODIC ON-SITE INSPECTION BY THE HSCD."

*John B. Cogan* 9/26/2012  
SIGNATURE OF DEVELOPER/BUILDER DATE

**ENGINEER'S CERTIFICATE**

"I CERTIFY THAT THIS PLAN FOR EROSION AND SEDIMENT CONTROL REPRESENTS A PRACTICAL AND REASONABLE PLAN BASED ON MY PERSONAL KNOWLEDGE OF THE SITE CONDITIONS AND THAT IT WAS PREPARED IN ACCORDANCE WITH THE REQUIREMENTS OF THE HOWARD COUNTY CONSERVATION DISTRICT."

*John R. Robertson* 9/26/12  
SIGNATURE OF ENGINEER DATE

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

COUNTY HEALTH OFFICER DATE

**GLWGUTSCHICK LITTLE & WEBER, P.A.**  
CIVIL ENGINEERS, LAND SURVEYORS, SLATE PLANNERS, LANDSCAPE ARCHITECTS  
3909 NATIONAL DRIVE SUITE 250 - BURTNSVILLE OFFICE PARK  
BURTNSVILLE, MARYLAND 20866  
TEL: 301-421-4024 FAX: 301-421-4186

**B-45 STANDARDS AND SPECIFICATIONS FOR PERMANENT STABILIZATION**

- DEFINITION**  
TO STABILIZE DISTURBED SOILS WITH PERMANENT VEGETATION.
- PURPOSE**  
TO USE LONG-LIVED PERENNIAL GRASSES AND LEGUMES TO ESTABLISH PERMANENT GROUND COVER ON DISTURBED SOILS.
- CONDITIONS WHERE PRACTICE APPLIES**  
EXPOSED SOILS WHERE GROUND COVER IS NEEDED FOR 6 MONTHS OR MORE.
- CRITERIA**
- GENERAL USE
    - SELECT ONE OR MORE OF THE SPECIES OR MIXTURES LISTED IN TABLE B.3 FOR THE APPROPRIATE PLANT HARDNESS ZONE (FROM FIGURE B.3) AND BASED ON THE SITE CONDITION OR PURPOSE FOUND ON TABLE B.2. ENTER SELECTED MIXTURE(S), APPLICATION RATES, AND SEEDING DATES IN THE PERMANENT SEEDING SUMMARY. THE SUMMARY IS TO BE PLACED ON THE PLAN.
    - ADDITIONAL PLANTING SPECIFICATIONS FOR EXCEPTIONAL SITES SUCH AS SHORELINES, STREAM BANKS, OR DUNES OR FOR SPECIAL PURPOSES SUCH AS WILDLIFE OR AESTHETIC TREATMENT MAY BE FOUND IN USDA-NRCS TECHNICAL FIELD OFFICE GUIDE, SECTION 342 - CRITICAL AREA PLANTING.
    - FOR SITES HAVING DISTURBED AREA OVER 5 ACRES, USE AND SHOW THE RATES RECOMMENDED BY THE SOIL TESTING AGENCY.
    - FOR AREAS RECEIVING LOW MAINTENANCE, APPLY UREA FORM FERTILIZER (46-0-0) AT 3 1/2 POUNDS PER 1000 SQUARE FEET (50 POUNDS PER ACRE) AT THE TIME OF SEEDING IN ADDITION TO THE SOIL AMENDMENTS SHOWN IN THE PERMANENT SEEDING SUMMARY.
  - TURFGRASS MIXTURES
    - AREAS WHERE TURFGRASS MAY BE DESIRED INCLUDE LAWNS, PARKS, PLAYGROUNDS, AND COMMERCIAL SITES WHICH WILL REQUIRE A MEDIUM TO HIGH LEVEL OF MAINTENANCE.
    - SELECT ONE OR MORE OF THE SPECIES OR MIXTURES LISTED BELOW BASED ON THE SITE CONDITIONS OR PURPOSE. ENTER SELECTED MIXTURE(S), APPLICATION RATES, AND SEEDING DATES IN THE PERMANENT SEEDING SUMMARY. THE SUMMARY IS TO BE PLACED ON THE PLAN.
      - KENTUCKY BLUEGRASS, FULL SUN MIXTURE. FOR USE IN AREAS THAT RECEIVE INTENSIVE MANAGEMENT. IRRIGATION REQUIRED. IN THE AREAS OF CENTRAL MARYLAND AND EASTERN SHORE, RECOMMENDED CERTIFIED KENTUCKY BLUEGRASS SEEDING RATE: 15 TO 20 POUNDS PER 1000 SQUARE FEET. CHOOSE A MINIMUM OF THREE KENTUCKY BLUEGRASS CULTIVARS WITH EACH RANGING FROM 10 TO 35 PERCENT OF THE TOTAL MIXTURE BY WEIGHT.
      - KENTUCKY BLUEGRASS/PERENNIAL RYE, FULL SUN MIXTURE. FOR USE IN FULL SUN AREAS WHERE RAPID ESTABLISHMENT IS NECESSARY AND WHEN TURF WILL RECEIVE MEDIUM TO INTENSIVE MANAGEMENT. CERTIFIED PERENNIAL RYEGRASS CULTIVARS/CERTIFIED KENTUCKY BLUEGRASS SEEDING RATE: 2 POUNDS MIXTURE PER 1000 SQUARE FEET. CHOOSE A MINIMUM OF THREE KENTUCKY BLUEGRASS CULTIVARS WITH EACH RANGING FROM 10 TO 35 PERCENT OF THE TOTAL MIXTURE BY WEIGHT.
      - TALL FESCUE/KENTUCKY BLUEGRASS, FULL SUN MIXTURE FOR USE IN DROUGHT PRONE AREAS AND/OR FOR AREAS RECEIVING LOW TO MEDIUM MANAGEMENT IN FULL SUN TO MEDIUM SHADE. RECOMMENDED MIXTURE INCLUDES: CERTIFIED TALL FESCUE CULTIVARS 45 TO 100 PERCENT, CERTIFIED KENTUCKY BLUEGRASS CULTIVARS TO 5 PERCENT. SEEDING RATE: 5 TO 9 POUNDS PER 1000 SQUARE FEET. USE ONE OR MORE CULTIVARS MAY BE BLENDED.
      - KENTUCKY BLUEGRASS/FINE FESCUE, SHADE MIXTURE. FOR USE IN AREAS WITH SHADE IN BLUEGRASS LAWNS FOR ESTABLISHMENT IN HIGH QUALITY, INTENSIVELY MANAGED TURF AREA. MIXTURE INCLUDES: CERTIFIED KENTUCKY BLUEGRASS CULTIVARS 30 TO 40 PERCENT AND CERTIFIED FINE FESCUE AND 60 TO 3 PERCENT. SEEDING RATE: 1 1/2 TO 3 POUNDS PER 1000 SQUARE FEET.

- NOTES**
- SELECT TURFGRASS VARIETIES FROM THOSE LISTED IN THE MOST CURRENT UNIVERSITY OF MARYLAND PUBLICATION, AGRONOMY ENO 111, "TURFGRASS CULTIVAR RECOMMENDATIONS FOR MARYLAND"
  - CHOOSE CERTIFIED MATERIAL. CERTIFIED MATERIAL, THE BEST GUARANTEE OF CULTIVAR PURITY, THE CERTIFICATION PROGRAM OF THE MARYLAND DEPARTMENT OF AGRICULTURE, TURF AND SEED SECTION, PROVIDES A RELIABLE MEANS OF CONSUMER PROTECTION AND ASSURES A PURE GENETIC LINE.
  - IDEAL TIMES OF SEEDING FOR TURF GRASS MIXTURES:
    - EASTERN MD. MARCH 15 TO JUNE 1, AUGUST 1 TO OCTOBER 1 (HARDNESS ZONES: 5b, 6a)
    - CENTRAL MD. MARCH 1 TO MAY 15, AUGUST 1 TO OCTOBER 1 (HARDNESS ZONE: 6b)
    - SOUTHERN MD. EASTERN SHORE: MARCH 1 TO MAY 15 (AUGUST 15 TO OCTOBER 15 (HARDNESS ZONES: 7a, 7b))
  - TILL AREAS TO RECEIVE SEED BY DISKING OR OTHER APPROVED METHODS TO A DEPTH OF 2 TO 4 INCHES LEVEL, AND GRADE THE AREAS TO SPARE A PROPER SEEDBED. REMOVE STONELINES DEEPER OVER 1 1/2 INCHES IN DEPTH. THE RESULTING SEEDBED MUST BE IN SUCH CONDITION THAT FUTURE MOWING OF GRASSES WILL POSE NO DIFFICULTY.
  - IF SOIL MOISTURE IS REQUIRED, SUPPLY NEW SEEDINGS ADEQUATE WATER FOR PLANT GROWTH (1/2 TO 1 INCH EVERY 3 TO 4 DAYS DEPENDING ON SOIL TEXTURE) UNTIL THEY ARE FIRMLY ESTABLISHED. THIS IS ESPECIALLY TRUE WHEN SEEDINGS ARE MADE LATE IN THE PLANTING SEASON, IN ABNORMALLY DRY HOT SEASONS, OR ON ADVERSE SITES.

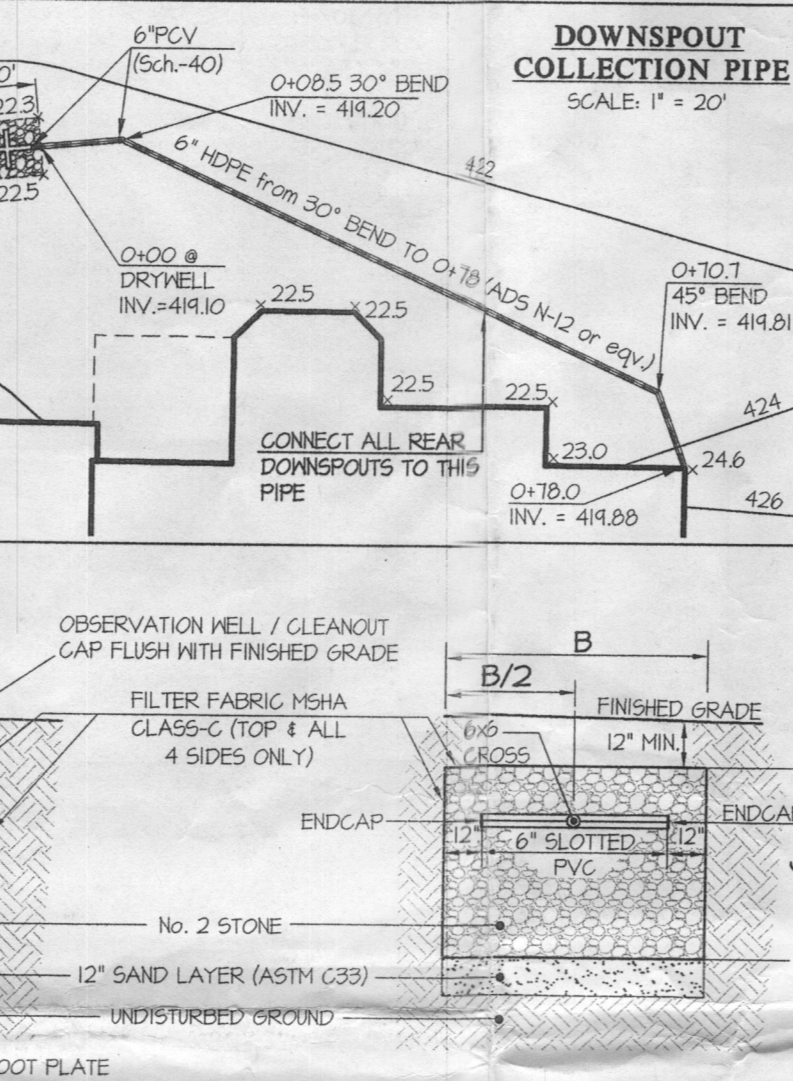
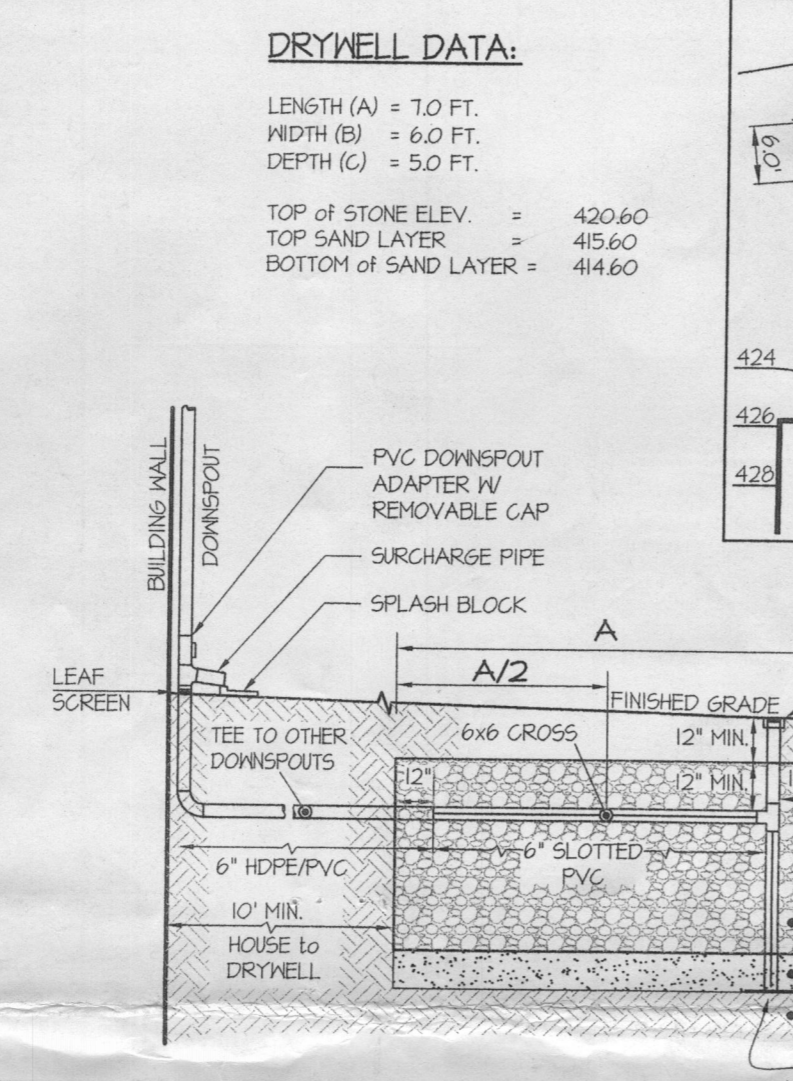
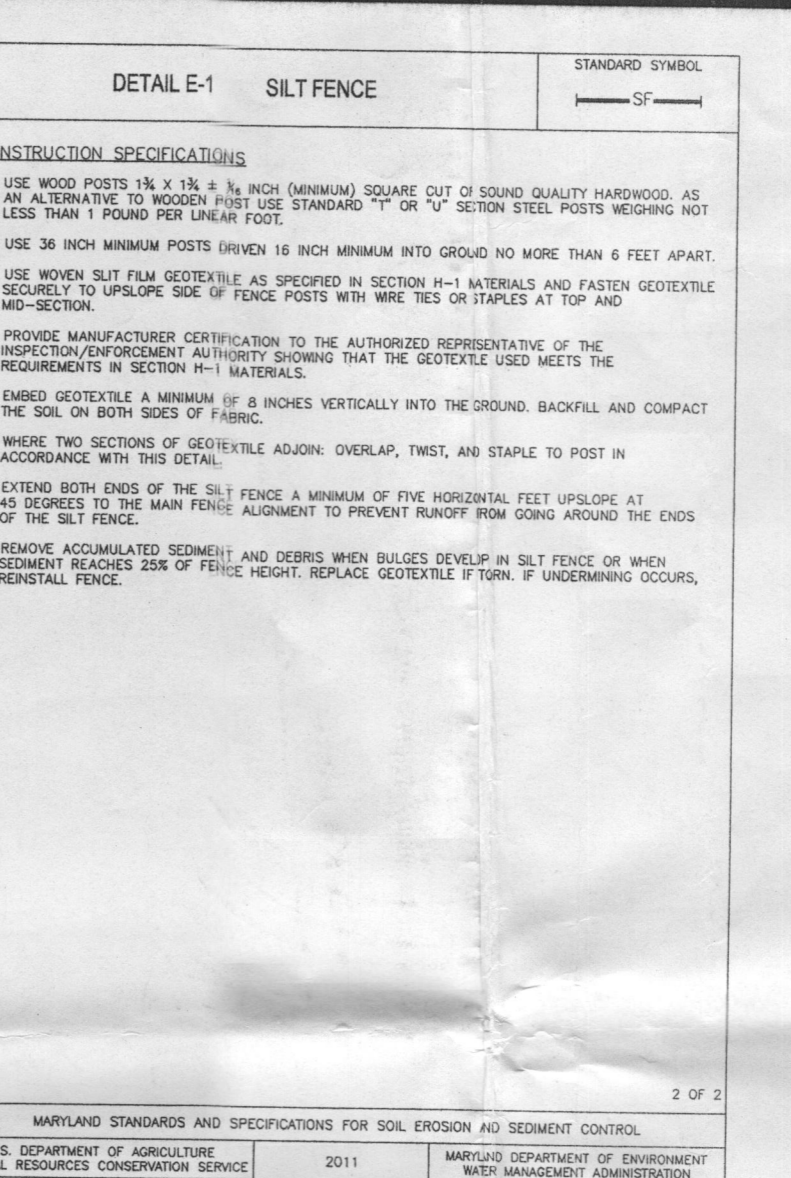
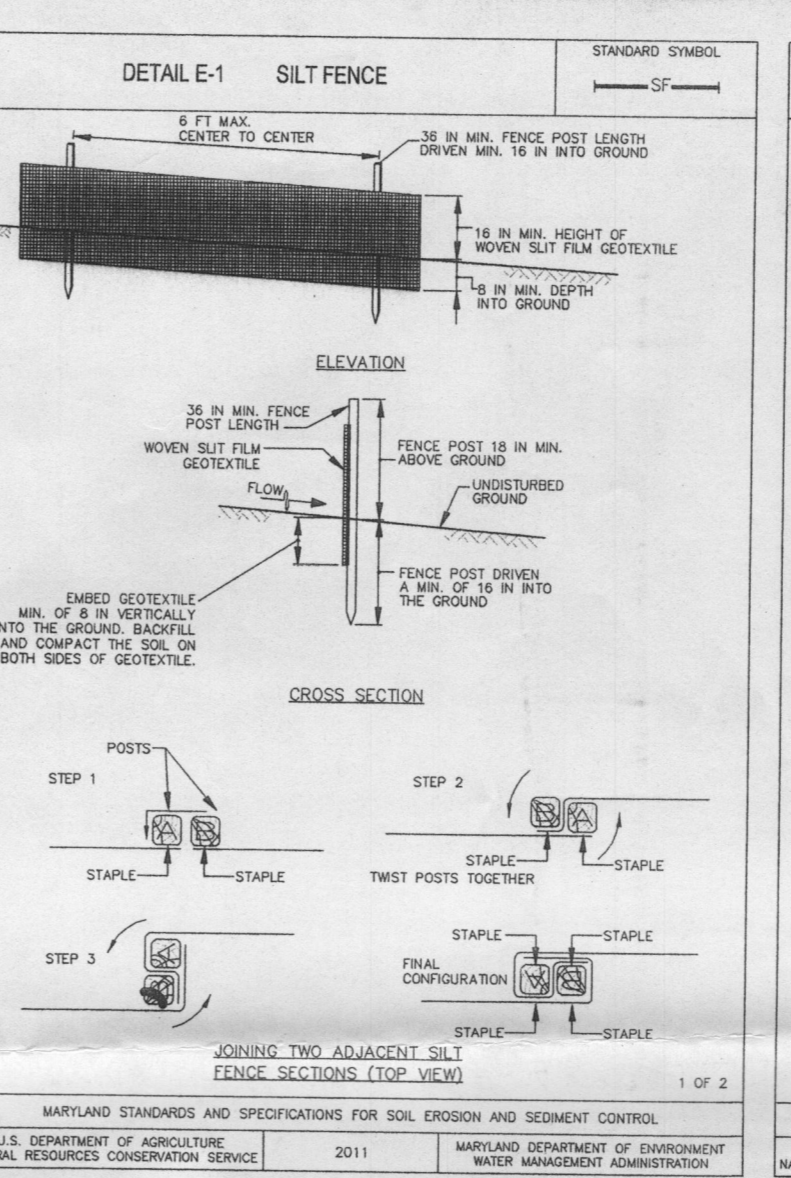
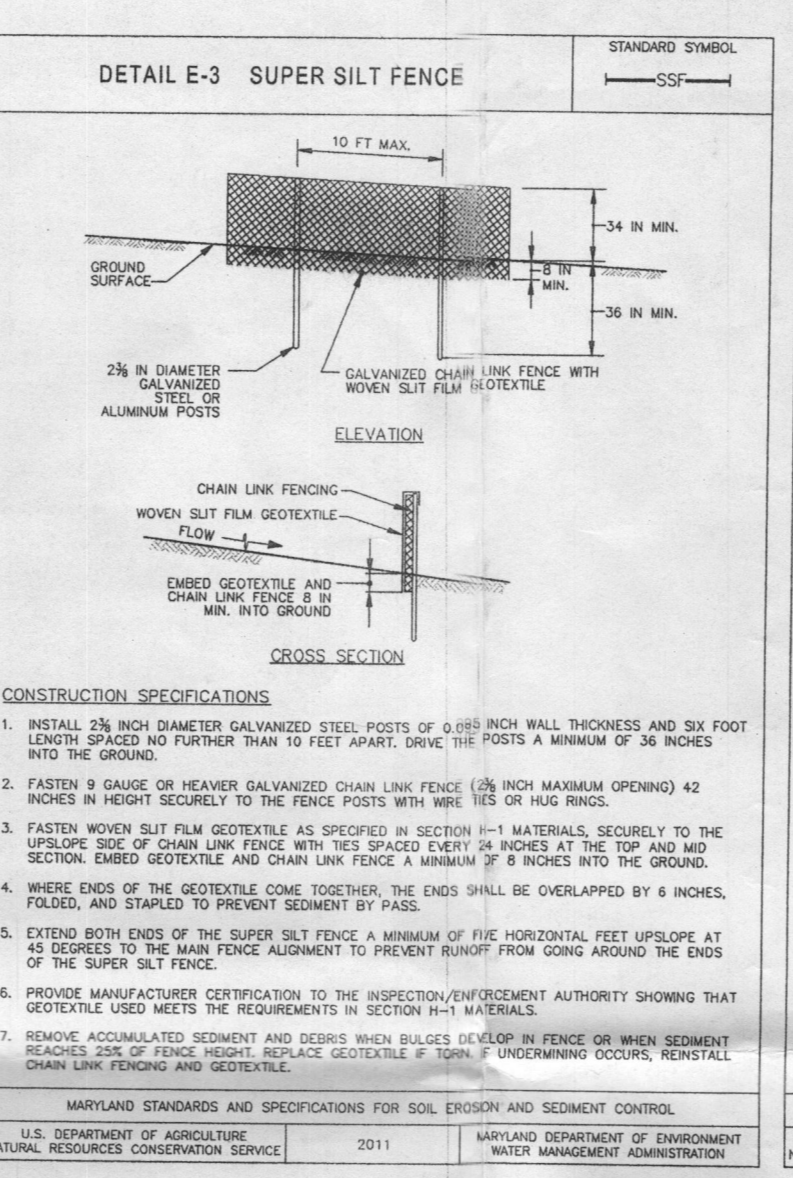
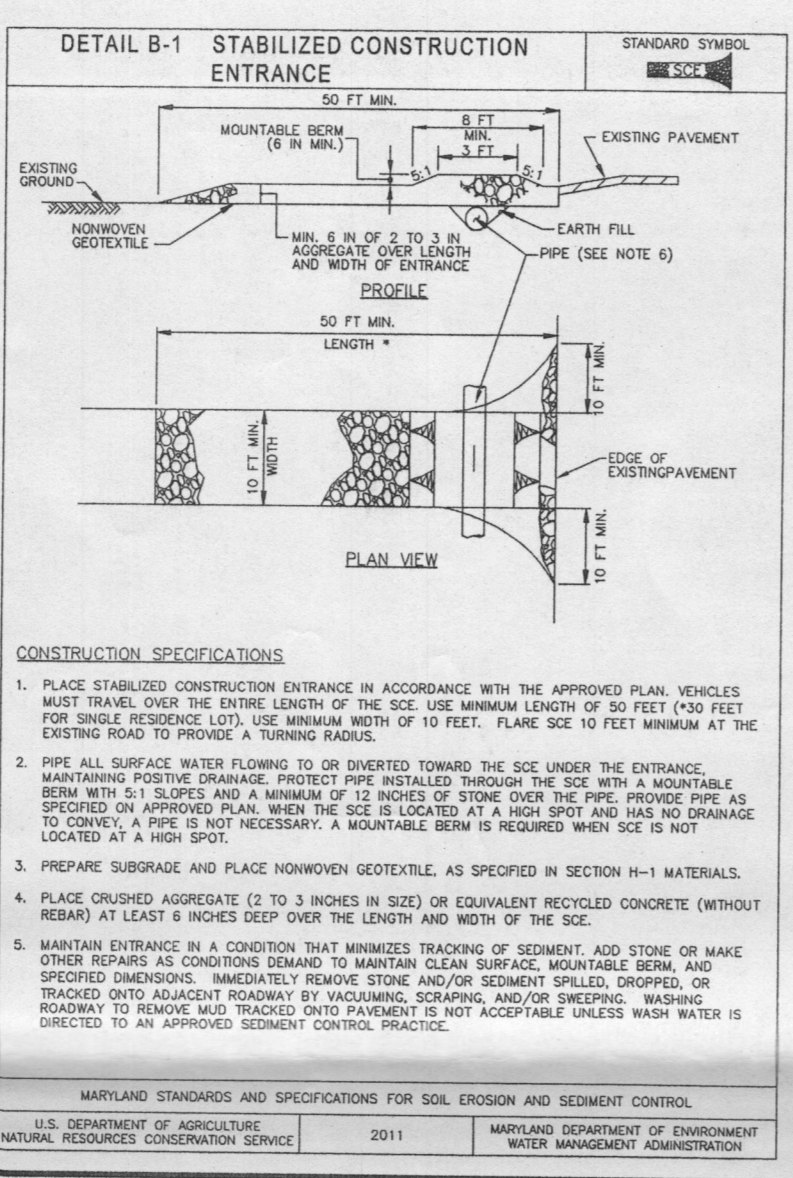
**PERMANENT SEEDING SUMMARY**

| No. | SPECIES   | APPLICATION RATE | SEEDING DATES                        | SEEDING DEPTHS | FERTILIZER RATE (10-20-20)        | LIME RATE           |
|-----|---|------------------|--------------------------------------|----------------|-----------------------------------|---------------------|
| 1.  | Certified Tall Fescue blend (95% by weight), Falcon IV, Penn 1901 & Rebel Exotic and Certified Kentucky Bluegrass blend (5% by weight), Courtyard, Raven & Yankee | 6-8 lb/1000 sq.  | Mar. 1 to May 15, Aug. 15 to Oct. 15 | 0.5 INCHES     | 1.0 lb/1000 sq. s.f. (45 lb/acre) | 90 lb/1000 sq. s.f. |

\* Other cultivars listed as "proven" in the most current UMD TIF may also be used

**B. SOD. TO PROVIDE QUICK COVER ON DISTURBED AREAS (21 GDE OR FLATLER).**

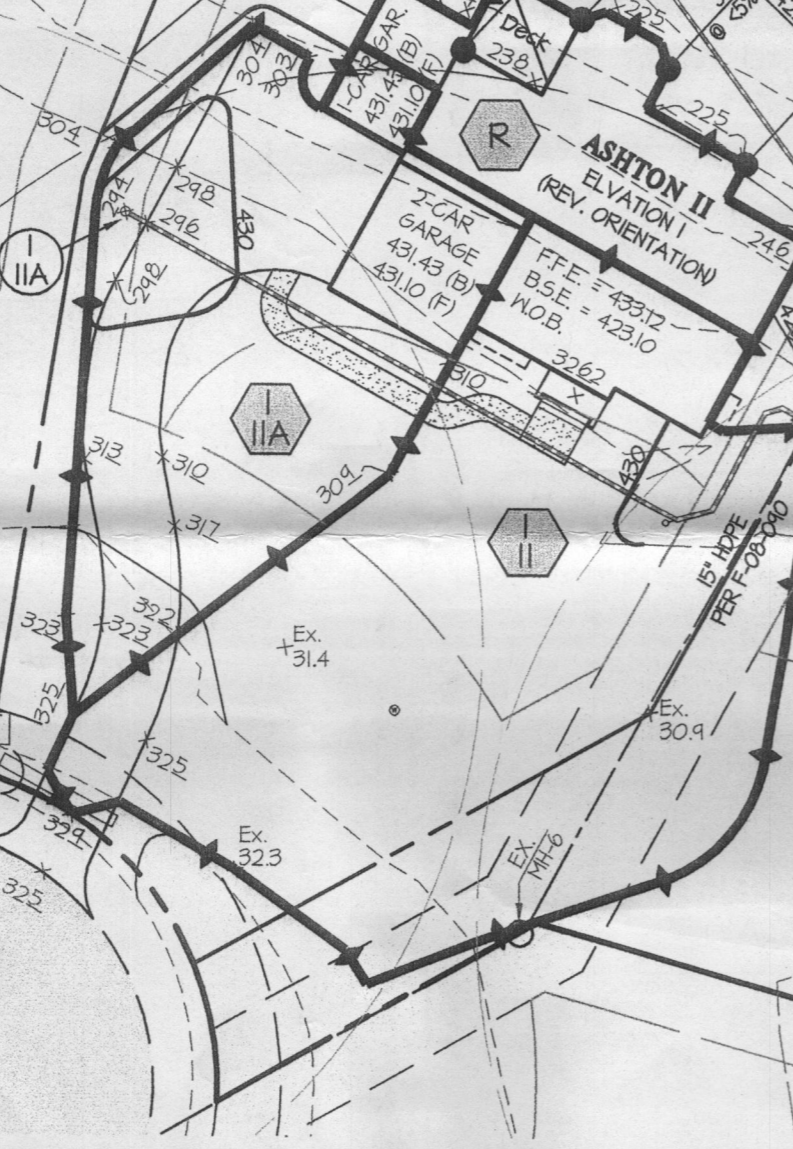
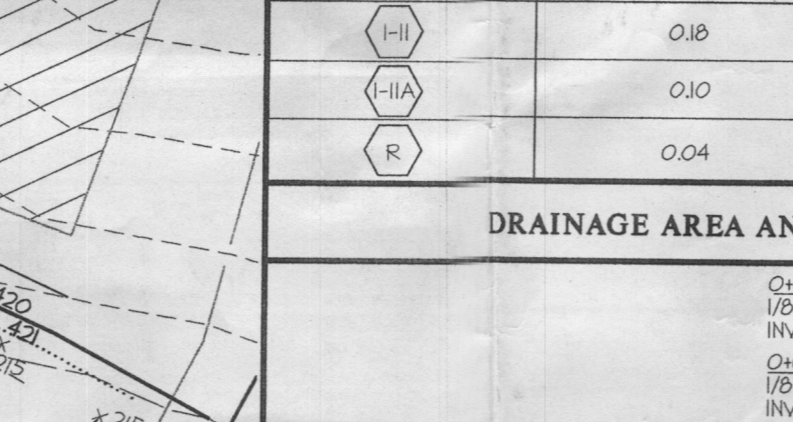
- GENERAL SPECIFICATIONS
  - CLASS OF TURFGRASS SOD MUST BE MARYLAND STATE CERTIFIED. SOD LABELS MUST BE MADE AVAILABLE TO THE JOB FOREMAN AND INSPECTOR.
  - SOD MUST BE MACHINE CUT AT A UNIFORM SOIL THICKNESS OF 3/4 INCH PLUS OR MINUS 1/4 INCH, AT THE TIME OF CUTTING. MEASUREMENT FOR THICKNESS MUST EXCLUDE TOP GROWTH AND THAT ALL BROKEN PADS AND TORN OR BURN ENDS WILL NOT BE ACCEPTABLE.
  - STANDARD SIZE SECTIONS OF SOD MUST BE STRONG ENOUGH TO SUPPORT THEIR OWN WEIGHT AND RETAIN THEIR SIZE AND SHAPE WHEN SUBJECTED VERTICALLY WITH A FIRM GRASP ON THE UPPER 10 PERCENT OF THE SECTION.
  - SOD MUST NOT BE HARVESTED OR TRANSPORTED WHEN MOISTURE CONTENT EXCESSIVELY DRY OR WET MAY ADVERSELY AFFECT SURVIVAL.
  - SOD MUST BE HARVESTED, DELIVERED, AND INSTALLED WITHIN A PERIOD OF 36 HOURS. SOD NOT TRANSPORTED WITHIN THIS PERIOD MUST BE PROVIDED BY AN AGRONOMIST OR SOIL SCIENTIST PRIOR TO ITS INSTALLATION.
- SOD INSTALLATION
  - DURING PERIODS OF EXCESSIVELY HIGH TEMPERATURES IN AREAS HAVING DRY SUBSOIL, LIGHTLY IRRIGATE THE SUBSOIL IMMEDIATELY PRIOR TO LAYING THE SOD.
  - LAY THE FIRST ROW OF SOD IN A STRAIGHT LINE WITH SEQUENT ROWS PLACED PARALLEL TO IT AND TIGHTLY WEDGED AGAINST EACH OTHER. STAGGER LATERAL JOINTS TO PROMOTE MORE UNIFORM GROWTH AND STRONGER BOND. SOD IS NOT STRETCHED OR OVERLAPPED AND THAT ALL JOINTS ABUTTED TIGHT IN ORDER TO PREVENT Voids WHICH WOULD CAUSE AIR DRYING OF ROOTS.
  - PRESERVER POSSIBLE LAY SOD WITH THE LONG EDGES PARALLEL TO THE CONTOUR AND WITH STAGGERING JOINTS. ROLL AND TAMP. PEG OR ORNISE SECURE THE SOD TO PREVENT SLIPPAGE ON SLOPES. ENSURE SOLID CONTACTS BETWEEN SOD ROOTS AND THE UNDERLYING SOIL SURFACE.
  - WATER THE SOD IMMEDIATELY FOLLOWING ROLLING AND TAMPING UNTIL THE UNDERSIDE OF THE NEW SOD PAD AND SOIL SURFACE BELOW THE P. ARE THOROUGHLY WET. COMPLETE THE OPERATIONS OF LAYING, TAMPING AND WEATING FOR ANY PEG OF SOD WITHIN EIGHT HOURS.
- SOD MAINTENANCE
  - IN THE ABSENCE OF ADEQUATE RAINFALL, WATER DAILURING THE FIRST WEEK OR AS OFTEN AND SUFFICIENTLY AS NECESSARY TO MAINTAIN SOIL TO A DEPTH OF 4 INCHES. WATER SOD DURING THE HEAT OF THE DAY TO PREVENT DRYING.
  - AFTER THE FIRST WEEK, SOD WATERING IS REQUIRED NECESSARY TO MAINTAIN ADEQUATE MOISTURE CONTENT.
  - DO NOT MOW UNTIL THE SOD IS FIRMLY ROOTED. NO MOWING OF THE GRASS LEAF MUST BE REMOVED BY THE INITIAL CUTTING OR SUBSEQUENT CUTTINGS. MAINTAIN A GRASS HEIGHT OF AT LEAST 3 INCHES UNLESS OTHERWISE SPECIFIED.



**CROSS SECTION**

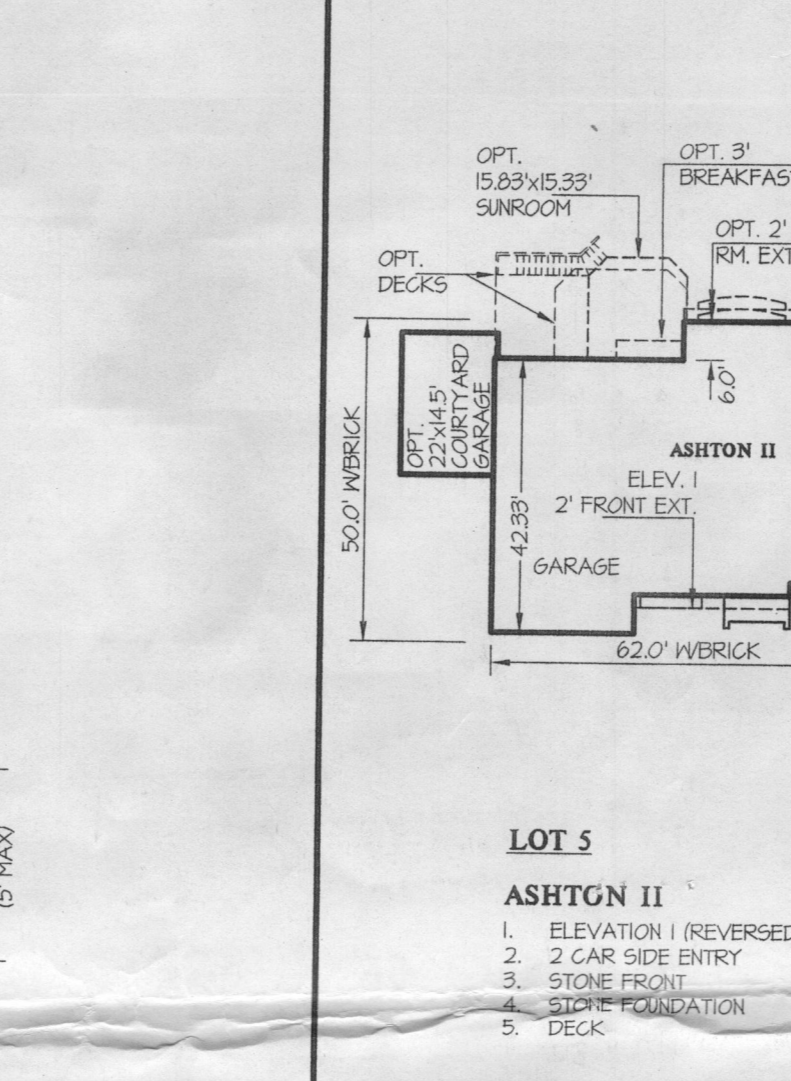
| DRAINAGE AREA | SIZE (AC.) | IMPERVIOUS (AC./IN.) |
|---------------|------------|----------------------|
| I             | 0.18       | 0.02 / 11%           |
| II            | 0.10       | 0.06 / 60%           |
| R             | 0.04       | 100%                 |

**DRAINAGE AREA ANALYSIS**



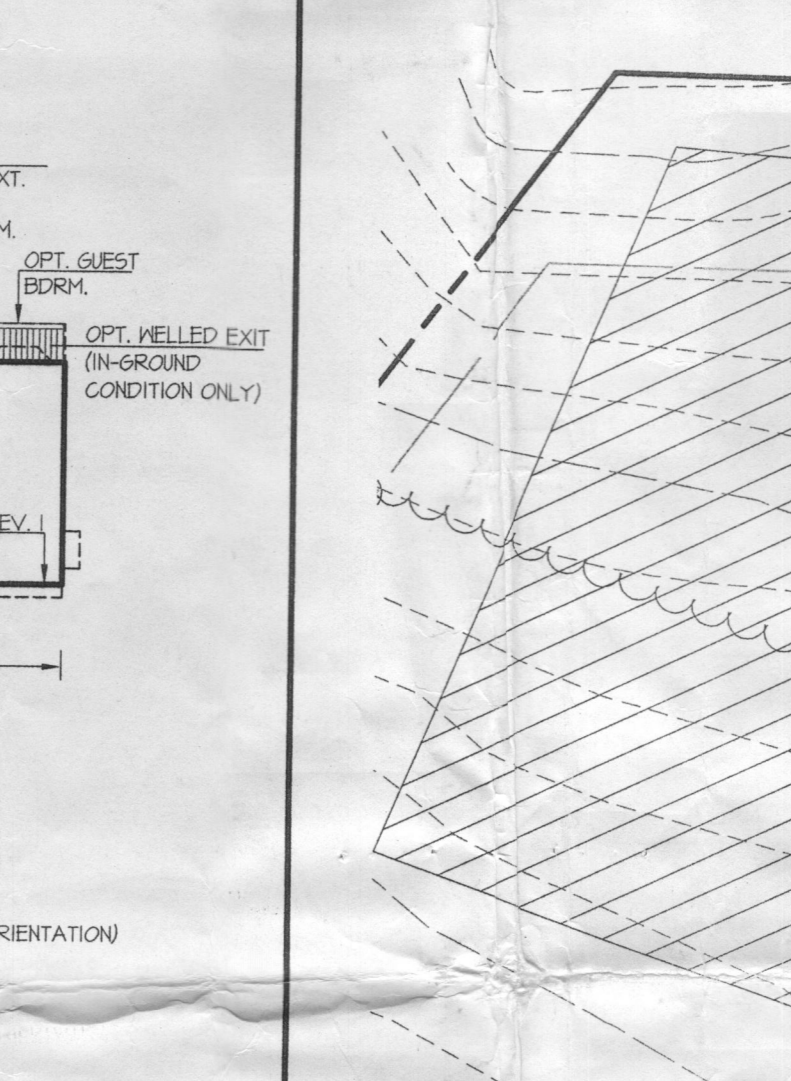
**LEGEND**

- EXISTING CONTOUR
- PROPOSED CONTOUR
- TREE LINE
- PROPOSED SILT FENCE
- PROPOSED SUPER SILT FENCE
- STABILIZED CONSTRUCTION ENTRANCE
- LIMIT OF DISTURBANCE
- DRY WELL
- PROPOSED STORM DRAIN PIPE
- DRAINAGE DIVIDE
- DRAINAGE AREA
- ROOFTOP DISCONNECT



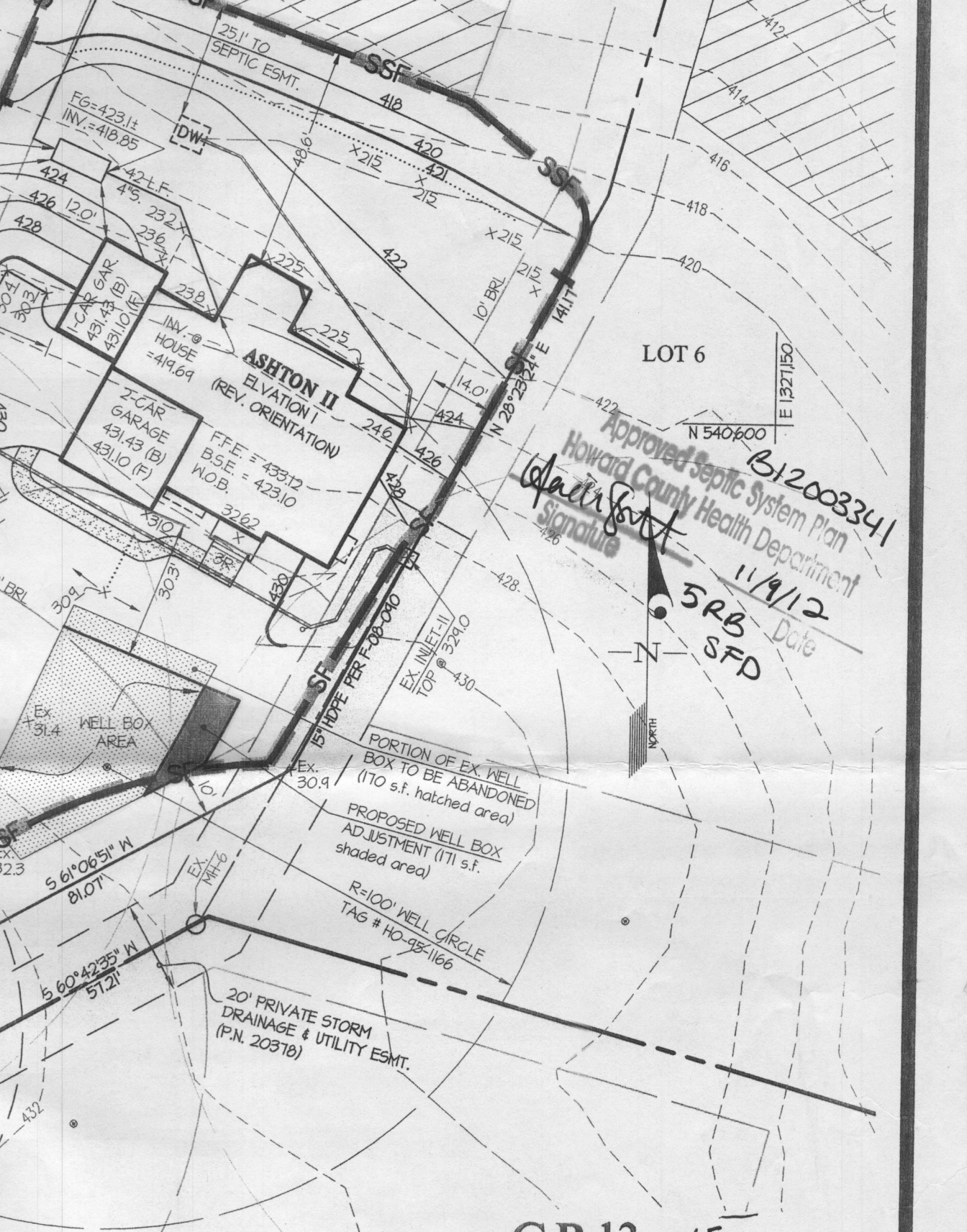
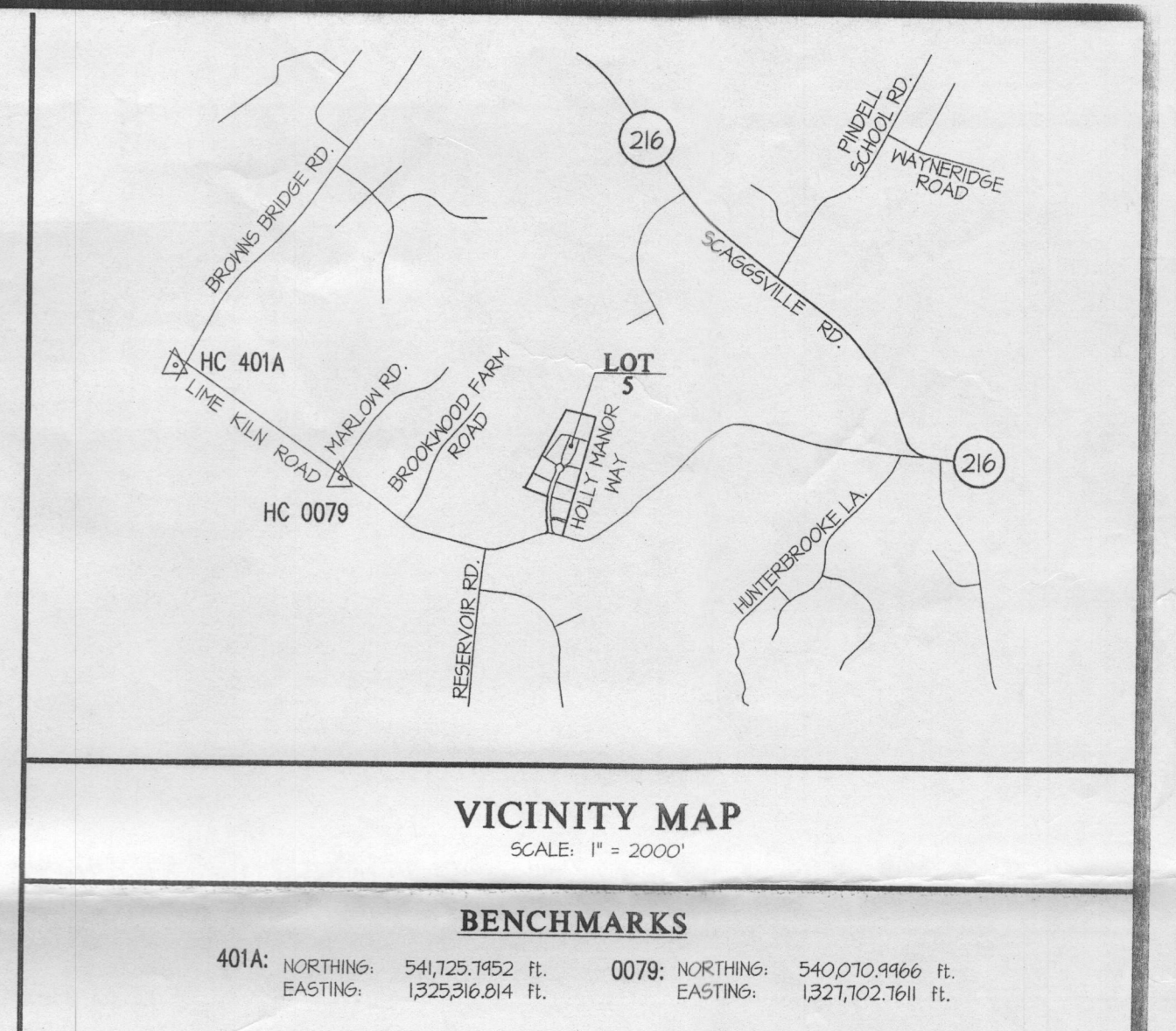
**SEQUENCE OF CONSTRUCTION**

- APPLY FOR A GRADING PERMIT AND A BUILDING PERMIT.
- INSTALL THE SUPER SILT FENCE (SSF), SILT FENCE (SF) AND THE STABILIZED CONSTRUCTION ENTRANCE (SCE) FOR THIS LOT AS SHOWN.
- CONSTRUCT THIS HOME SITE.
- STABILIZE ALL REMAINING DISTURBED AREAS IN ACCORDANCE WITH THE PERMANENT SEEDING NOTES OR WITH MARYLAND CERTIFIED SOD.
- OBTAIN PERMISSION FROM THE INSPECTOR TO REMOVE ANY SEDIMENT CONTROL FEATURES THAT ARE NO LONGER NEEDED.



**NOTES**

- THE LOT SHOWN IS 40.041 SF. AND IT IS RECORDED UNDER PLAT NO. 20371-20378 AMONG THE LAND RECORDED OF HOWARD COUNTY, MARYLAND.
- EXISTING TOPOGRAPHY IS FROM F-08-090. CALL G.L.W. IF FIELD CONDITIONS ARE SUBSTANTIALLY DIFFERENT.
- THIS LOT IS SERVED BY A PRIVATE WELL AND PRIVATE SEPTIC FIELD PER F-08-090.
- STORM-WATER MANAGEMENT IS PROVIDED BY THE SWM FACILITY UNDER F-08-090 AND A DRY WELL BEHIND THIS LOT.
- THE EXISTING WELL SHOWN ON THIS PLAN IDENTIFIED WITH THE WELL TAG NUMBER HO-45-166) HAS BEEN FIELD LOCATED BY G.L.W. PROFESSIONAL LAND SURVEYORS) AND IS ACCURATELY SHOWN ON THIS PLAN.
- LOT 5 DRIVEWAY IS AT TOP (HIGH POINT) OF SHALE AND CL-DE-SAG. SO A CURB PER DPM F-08-090 IS NOT NECESSARY.
- PIPE ALL DOWN SPOUTS IN THE REAR YARD TO THE DRY WELL 6\"/>



PREPARED FOR:  
OWNER: HOLLY HOUSE DEVELOPMENT, LLC  
14045 GARDEN DRIVE, GLENWOOD, MD 21738

BUILDER (Contract Purchase): MITCHELL & BEST  
1688 EAST GULF DRIVE, ROCKVILLE, MD 20850  
PH: (301) 762-9511  
ATN: JOHN CORGAN

PROFESSIONAL CERTIFICATION  
I HEREBY CERTIFY THAT THESE PLANS 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. 12878  
EXPIRATION DATE: MAY 26, 2014  
9-25-12

**GLWGUTSCHICK LITTLE & WEBER, P.A.**  
CIVIL ENGINEERS, LAND SURVEYORS, SLATE PLANNERS, LANDSCAPE ARCHITECTS  
3909 NATIONAL DRIVE SUITE 250 - BURTNSVILLE OFFICE PARK  
BURTNSVILLE, MARYLAND 20866  
TEL: 301-421-4024 FAX: 301-421-4186