



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.: **B12003583**

Building Address: 14862 Meriwether Dr
 City: Colee State: md Zip Code: 21737
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: Meriwether Farm
 Section: _____ Area: _____ Lot: 35
 Tax Map: 21 Parcel: 28 Grid: 19
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: SFD
 Proposed Use: SFD w/ propane tank
 Estimated Construction Cost: \$ 8000
 Description of Work:
Install 1000 gal in-ground 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: Tall MD VII Limited Partnership
 Address: 7104 Columbia Gateway Dr
 City: Columbia State: md Zip Code: 21046
 Phone: _____ Fax: _____
 Email: _____

Applicant's Name & Mailing Address, (if other than stated herein)
 Applicant's Name: Jeremy Clary
 Address: PO Box 1253
 City: Assup State: md Zip Code: 20794
 Phone: 443-340-1229 Fax: _____
 Email: Jeremy@AppliedAndApproved

Contractor Company: Valley National Gas
 Contact Person: William Cerny
 Address: 7201 Montross Rd
 City: Assup State: md Zip Code: 20794
 License No.: 67793
 Phone: 410-799-1114 Fax: _____
 Email: _____

Engineer/Architect Company: _____
 Responsible Design Prof.: _____
 Address: Contractor
 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:
Use group:	<input type="checkbox"/> Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl Space <input type="checkbox"/> Slab on Grade
Construction type:	Multi-family Dwelling
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:
<input type="checkbox"/> Structural Steel	No. of efficiency units:
<input type="checkbox"/> Masonry	No. of 1 BR units:
<input type="checkbox"/> Wood Frame	No. of 2 BR units:
<input type="checkbox"/> State Certified Modular	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 checked="" type="checkbox"/> No	
Gas: <input checked="" 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 Clary Print Name: Jeremy Clary
 Email Address: Jeremy@AppliedAndApproved.com Date: 10/25/12
 Title/Company: Permit

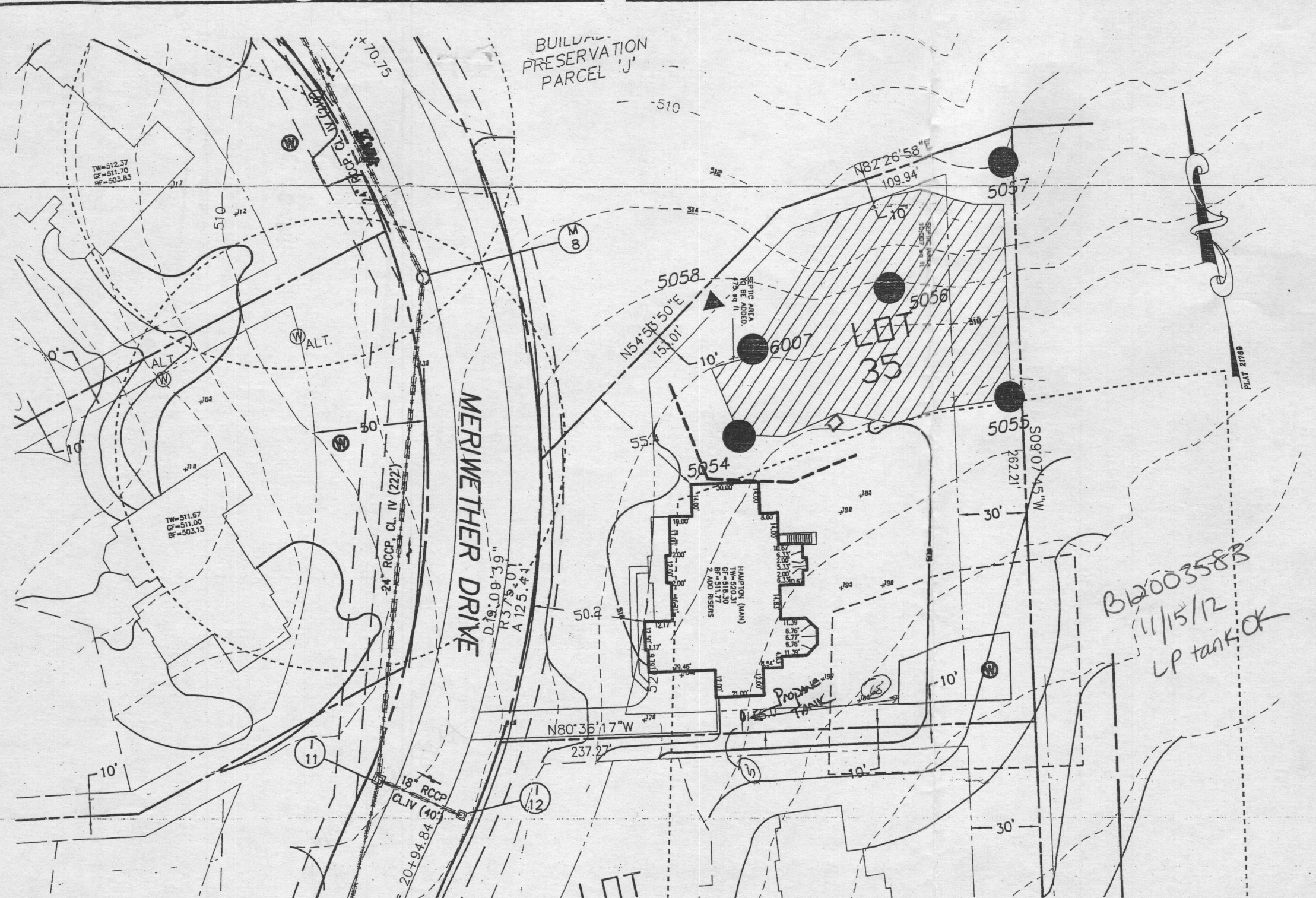
Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
 PLEASE WRITE NEATLY & LEGIBLY
 -FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
<input checked="" type="checkbox"/> Building Officials		
<input checked="" type="checkbox"/> PSZA (Zoning)		
<input checked="" type="checkbox"/> PSZA (Engineering)		
Health	<u>11/5/12</u>	<u>William Cerny</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	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	# <u>3141</u>



THE EXISTING WELL(S) SHOWN ON THIS PLAN (IDENTIFIED WITH THE ATTACHED WELL TAG NUMBER HO-95-_____) 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. 21769, ET SEQ. REFER TO THIS PLAT FOR ANY RESTRICTIONS AND/OR PROVISIONS.

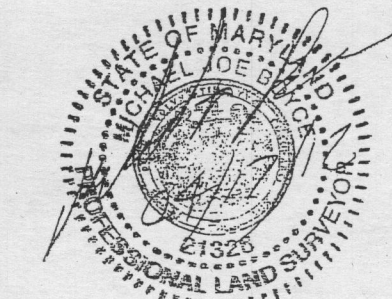
SWM FOR THIS LOT IS MANAGED PER PLAN F-09-044

E & S CONTROLS PER PLAN F-09-044

CULVERT FOR DRIVEWAY PER F-09-044

ADDRESS: 14862 MERIWETHER DRIVE
GLENELG, MD 21737

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



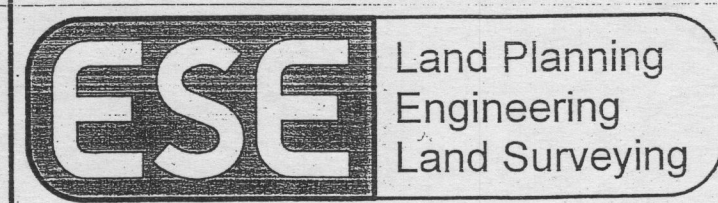
APPROVED:
FOR PRIVATE WATER & PRIVATE SEWAGE SYSTEMS
HOWARD COUNTY HEALTH DEPARTMENT

COUNTY HEALTH OFFICER _____ DATE _____

TYPE: HAMPTON (MAN)-
DAY LIGHT BASEMENT
ADD'L 1' TO HEIGHT OF BASEMENT
CONSERVATORY ELITE ADDITION
ADD 1 CAR FRONT ENTRY GARAGE
NAPLES SUNROOM

OPTION No. 018	INV. @ HOUSE	516.7
OPTION No. 070	GROUND @ INV. @ HOUSE	519.5
OPTION No. 039	INV. IN TANK	515.8
OPTION No. 501	INV. OUT TANK	515.5
OPTION No. 529	TOP OF TANK	516.5
	GROUND OVER TANK	519.5
	INV. IN DIST. BOX	516.3
	INV. OUT DIST. BOX	516.0
	GROUND @ BOX	520.0
	BASEMENT DOES NOT GRAVITY SEWER	

PLOT PLAN
LOT #35
MERIWETHER FARMS
LIBER 12124, FOLIO 0120
PLAT No. 21769, ET SEQ.
FOURTH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND



ESE Consultants Inc.
7164 Columbia Gateway Dr.
Suite 203
Columbia, MD 21046
TEL: 410-872-9105
FAX: 410-872-4870

DATE: 4/17/12 SCALE: 1" = 50' FILE: LOT_35_PP
CHK'D: MJB JOB#: 3184 DRAWN: MJB

Building Address: 14862 Meriwether Dr
Glenn, MD 21737

Suite/Apt. # _____ SDP/WP/BA #: _____

Census Tract: _____ Subdivision Meriwether Farm

Section: _____ Area: _____ Lot: 35

Tax Map: 0021 Parcel: 0028 Grid: 0016

Zoning: _____ Map Coordinates: 4312F10 Lot Size: _____

Property Owner's Name: Dean + Wendy Turner

Address: 14862 Meriwether Dr

City: Glenn State: MD Zip Code: 21737

Home Phone: 410-552-0477 Work Phone: _____

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

Phone: _____ Fax: _____

Email: _____

Existing Use: SPD

Proposed Use: SPD + Pool

Estimated Construction Cost: \$ 25,000

Description of Work: Inground concrete pool
23' x 39' in rear yard w/ 48" high fence

Occupant or Tenant: _____

Was tenant space previously occupied? Yes No

Contact Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

Contractor Company: Maryland Pools

Contact Person: Bob Brooks

Address: 9515 Gerwig Ln

City: Columbia State: _____ Zip Code: 21046

License No.: 6694

Phone: 410-975-6600 Fax: _____

Email: _____

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"/> Roadside Tree Project Permit	<input type="checkbox"/> Partial
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Other Suppression
Roadside Tree Project Permit #	No. of Heads:

BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics	Utilities
<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>
<u>Depth</u> <u>Width</u>	<input type="checkbox"/> Public
1 st floor:	<input checked="" type="checkbox"/> Private
2 nd floor:	<u>Sewage Disposal</u>
Basement:	<input type="checkbox"/> Public
<input type="checkbox"/> Finished Basement	<input 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Slab on Grade	<u>Heating System</u>
No. of Bedrooms:	<input 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 type="checkbox"/> Propane Gas
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:	<u>Roadside Tree Project Permit #</u>
<input type="checkbox"/> State Certified Modular	
<input type="checkbox"/> Manufactured Home	

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Applicant's Signature: [Signature] Print Name: Joanne Cathan

Email Address: Maryland Pools Inc Date: 3-13

Title/Company: _____

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>3/19/13</u>	<u>[Signature]</u>
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? 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	\$
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$

DEPT. OF INSPECTIONS, LICENSES AND PERMITS 3430 COURT HOUSE DRIVE ELLICOTT CITY, MD 21043 PERMITS (410) 313-2455 INSPECTIONS (410) 313-1810 AUTOMATED INFORMATION (410) 313-1800		HOWARD COUNTY PERMIT APPLICATION		PERMIT NUMBER	
Building Address <u>14267 Meriwether Dr</u>		Property Owner's Name <u>Toll Brothers Inc</u> Address <u>14116 Patterson Farm Ct</u> City <u>Glennville</u> State <u>MD</u> Zip Code <u>21731</u> Home Phone <u>410-489-7400</u> Work Phone _____ Applicant's Name & Mailing Address, (if other than stated herein): <u>Keith Monath</u> <u>14116 - Patterson Farm Ct</u> <u>Glennville, MD 21737</u>			
Suite/Apt. #: _____ SDP/WP/Petition #: _____		Phone <u>301-252-4412</u> Fax _____			
Census Tract _____ Subdivision _____		Contractor Company <u>2X4 Contractor</u> Contact Person <u>Angel Sarto</u> Address _____ City _____ State _____ Zip Code _____ License No. _____ Phone <u>301-252-4412</u> Fax _____			
Section _____ Area _____ Lot _____		Engineer or Architect Company _____			
Tax Map _____ Parcel _____ Grid _____		Contact Person _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____			
Zoning _____ Map Coordinates _____ Lot Size _____		Existing Use <u>SFD</u> Proposed Use <u>SFD w/ DECK</u> Estimated Construction Cost \$ _____ Description of Work <u>DECK added to rear of home</u> <u>155sq ft</u>			
Occupant or Tenant _____		Building Description - <u>COMMERCIAL</u>			
Contact Name <u>Keith Monath</u>		Building Description - <u>RESIDENTIAL</u>			
Address <u>14116 Patterson Farm Ct</u>		Building Characteristics: SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth <u>Width</u> 1 st floor: _____ 2 nd floor: _____ Basement: _____ Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms _____ Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____ Other Structure: _____ Dimensions: _____ Footings: _____ Roof: _____ _____ State Certified Modular _____ Manufactured Home			
City <u>Glennville</u> State <u>MD</u> Zip Code <u>21737</u>		Water Supply: _____ _____ Public _____ Private Sewage Disposal: _____ _____ Public _____ Private Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: <u>N/A</u> <input type="checkbox"/> _____ Full _____ Partial _____ Other Suppression _____ # of Heads			
Phone _____ Fax _____		Water Supply: _____ _____ Public _____ Private Sewage Disposal: _____ _____ Public _____ Private Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: <u>N/A</u> <input type="checkbox"/> _____ NFPA #13D _____ NFPA #13R _____ Other:			

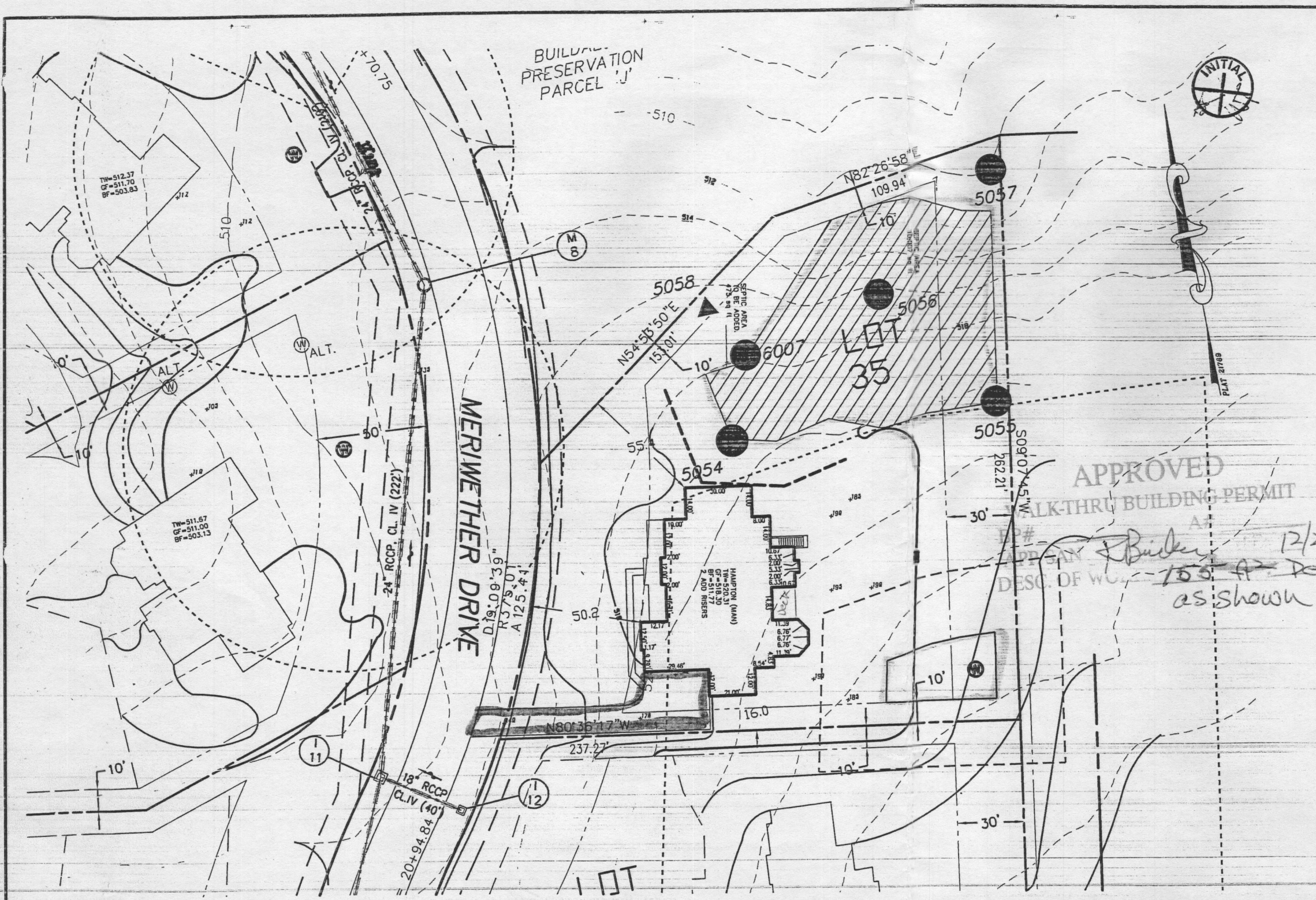
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Keith Monath
 Applicant's Signature Print Name
Kmonath@tollbrothersinc.com
 Email Address
Toll Brothers Inc 12/20/12
 Title/Company Date

Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
 PLEASE WRITE NEATLY AND LEGIBLY.

AGENCY _____ DATE _____ SIGNATURE _____ APPROVAL _____		FOR OFFICE USE ONLY - DPZ SETBACK INFORMATION		PROPERTY ID # _____	
Land Development, DPZ _____		Front: _____		Filing fee \$ _____	
State Highways _____		Rear: _____		Permit fee \$ _____	
Building Officials _____		Side: _____		Excise tax \$ _____	
Dev. Engineering, DPZ _____		Side St.: _____		Add'l per. fee \$ _____	
Health: <u>12/20/12</u> <u>R. Bickel</u>		All minimum setbacks met?		TOTAL FEES \$ _____	
Fire Protection _____		YES <input type="checkbox"/> NO <input type="checkbox"/>		Sub-total paid \$ _____	
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>		Is Entrance Permit Required? YES <input type="checkbox"/> NO <input type="checkbox"/>		Balance due \$ _____	
_____ CONINGENCY CONSTRUCTION START <input type="checkbox"/> ONE STOP SHOP: <input type="checkbox"/>		Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>		_____ # _____	
_____		Lot Coverage for New Town Zone _____		_____ # _____	
_____		SDP/Red-line approval date _____		_____	

Distribution of Copies: _____ White: Building Officials Green: LDD, DPZ Yellow: DED, D... Pink: Health _____



THE EXISTING WELL(S) SHOWN ON THIS PLAN (IDENTIFIED WITH THE ATTACHED WELL TAG NUMBER HO-95-_____) 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 SEWERAGE 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. 21769, ET SEQ. REFER TO THIS PLAT FOR ANY RESTRICTIONS AND/OR PROVISIONS.

SWM FOR THIS LOT IS MANAGED PER PLAN F-09-044

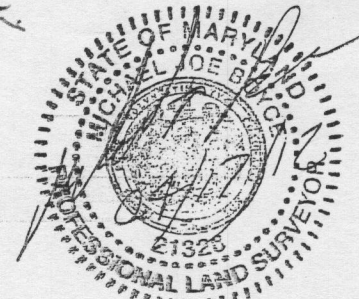
E & S CONTROLS PER PLAN F-09-044

CULVERT FOR DRIVEWAY PER F-09-044

ADDRESS: 14862 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
WALK-THRU BUILDING PERMIT
DESC. OF W...
12/20/12
as shown



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

COUNTY HEALTH OFFICER _____ DATE _____

TYPE: HAMPTON (MAN)-
DAY LIGHT BASEMENT
ADD'L 1' TO HEIGHT OF BASEMENT
CONSERVATORY ELITE ADDITION
ADD 1 CAR FRONT ENTRY GARAGE
NAPLES SUNROOM

OPTION No. 018	INV. @ HOUSE	516.7
OPTION No. 070	GROUND @ INV. @ HOUSE	519.5
OPTION No. 039	INV. IN TANK	515.8
OPTION No. 501	INV. OUT TANK	515.5
OPTION No. 529	TOP OF TANK	516.5
	GROUND OVER TANK	519.5
	INV. IN DIST. BOX	516.3
	INV. OUT DIST. BOX	516.0
	GROUND @ BOX	520.0
	BASEMENT DOES NOT GRAVITY SEWER	

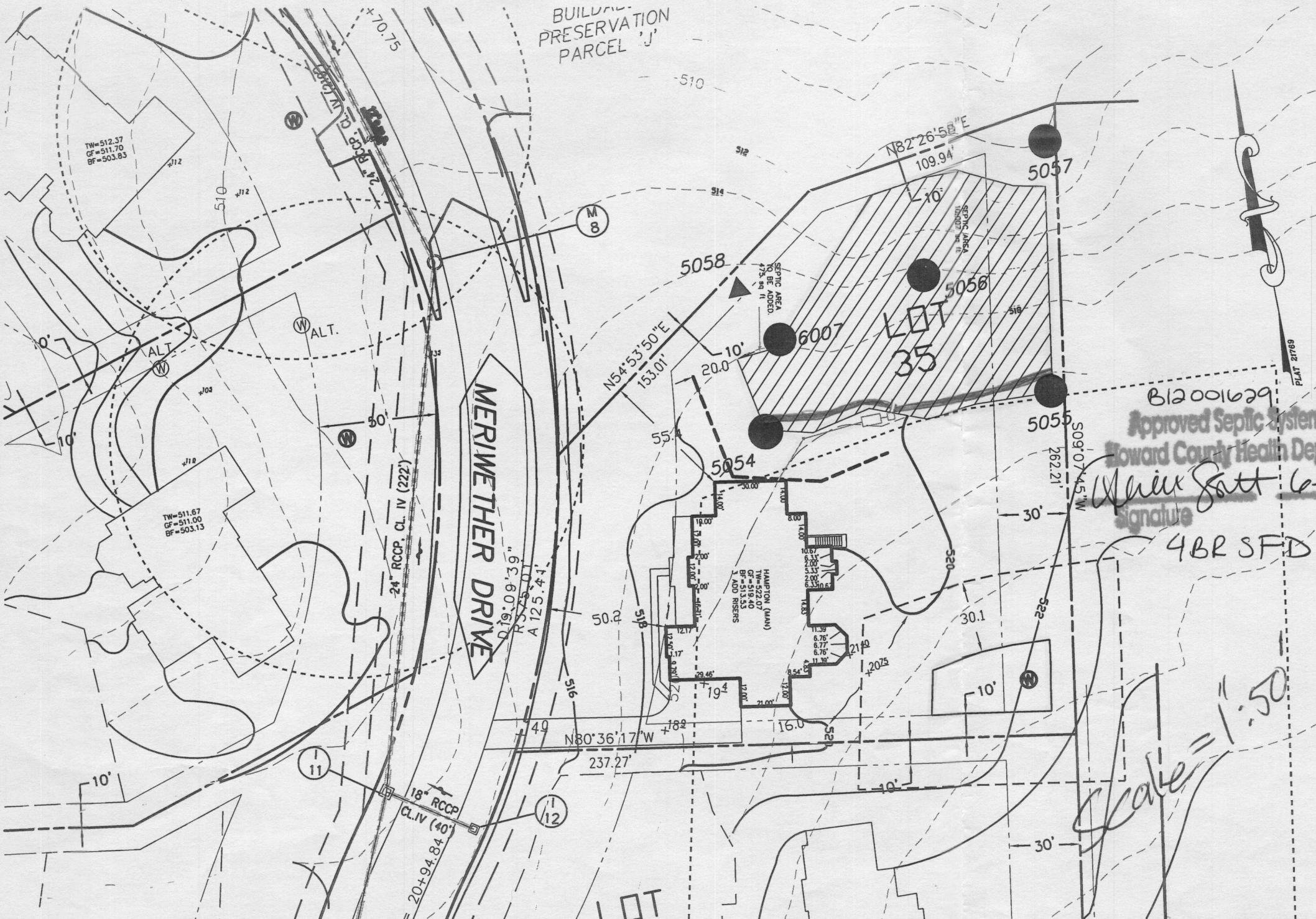
PLOT PLAN
LOT #35
MERIWETHER FARMS
LIBER 12124, FOLIO 0120
PLAT No. 21769, ET SEQ.
FOURTH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND

**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: 4/17/12 SCALE: 1"=40' FILE: LOT_35_PP
CHK'D: MJB JOB#: 3184 DRAWN: MJB

BUILDING PRESERVATION PARCEL 'J'



THE EXISTING WELL(S) SHOWN ON THIS PLAN (IDENTIFIED WITH THE ATTACHED WELL TAG NUMBER HO-95-2112) 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.

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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: 14862 MERIWETHER DRIVE
GLENELG, MD 21737

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

B12001629
Approved Septic System Plan
Howard County Health Department
Walter Satt 6-21-12
signature Date

4BR SFD

Scale = 1" = 50'



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

COUNTY HEALTH OFFICER _____ DATE _____

TYPE: HAMPTON (MAN)-
DAY LIGHT BASEMENT
ADD'L 1' TO HEIGHT OF BASEMENT
CONSERVATORY ELITE ADDITION
ADD 1 CAR FRONT ENTRY GARAGE
NAPLES SUNROOM

OPTION No. 018
OPTION No. 070
OPTION No. 039
OPTION No. 501
OPTION No. 529

INV. @ HOUSE 516.7
GROUND @ INV. @ HOUSE 519.5
INV. IN TANK 515.8
INV. OUT TANK 515.5
TOP OF TANK 516.5
GROUND OVER TANK 519.5
INV. IN DIST. BOX 516.3
INV. OUT DIST. BOX 516.0
GROUND @ BOX 520.0
BASEMENT DOES NOT GRAVITY SEWER

PLOT PLAN
LOT #35
MERIWETHER FARMS
LIBER 12124, FOLIO 0120
PLAT No. 21769, ET SEQ.
FOURTH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND

ESE Land Planning
Engineering
Land Surveying

ESE Consultants Inc.
1764 Columbia Gateway Dr.
Suite 203
Columbia, MD 21046
TEL: 410-872-9105
FAX: 410-872-4870

DATE: 4/17/12
CHK'D: MJB

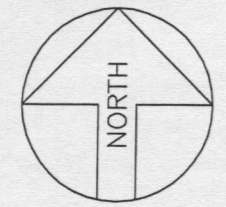
SCALE: 1" = 40'
JOB#: 3184

FILE: LOT_35_PP
DRAWN: MJB

SETBACKS:	
REAR PL.	10'
SIDE PL.	10'
HOUSE	N/A
SEPTIC	10'
WELL	20'

ADDITIONAL SETBACKS:	
RESERVE AREA	= 20'
DIST. BOX	= 15'
SEPTIC TRENCH	= 20'

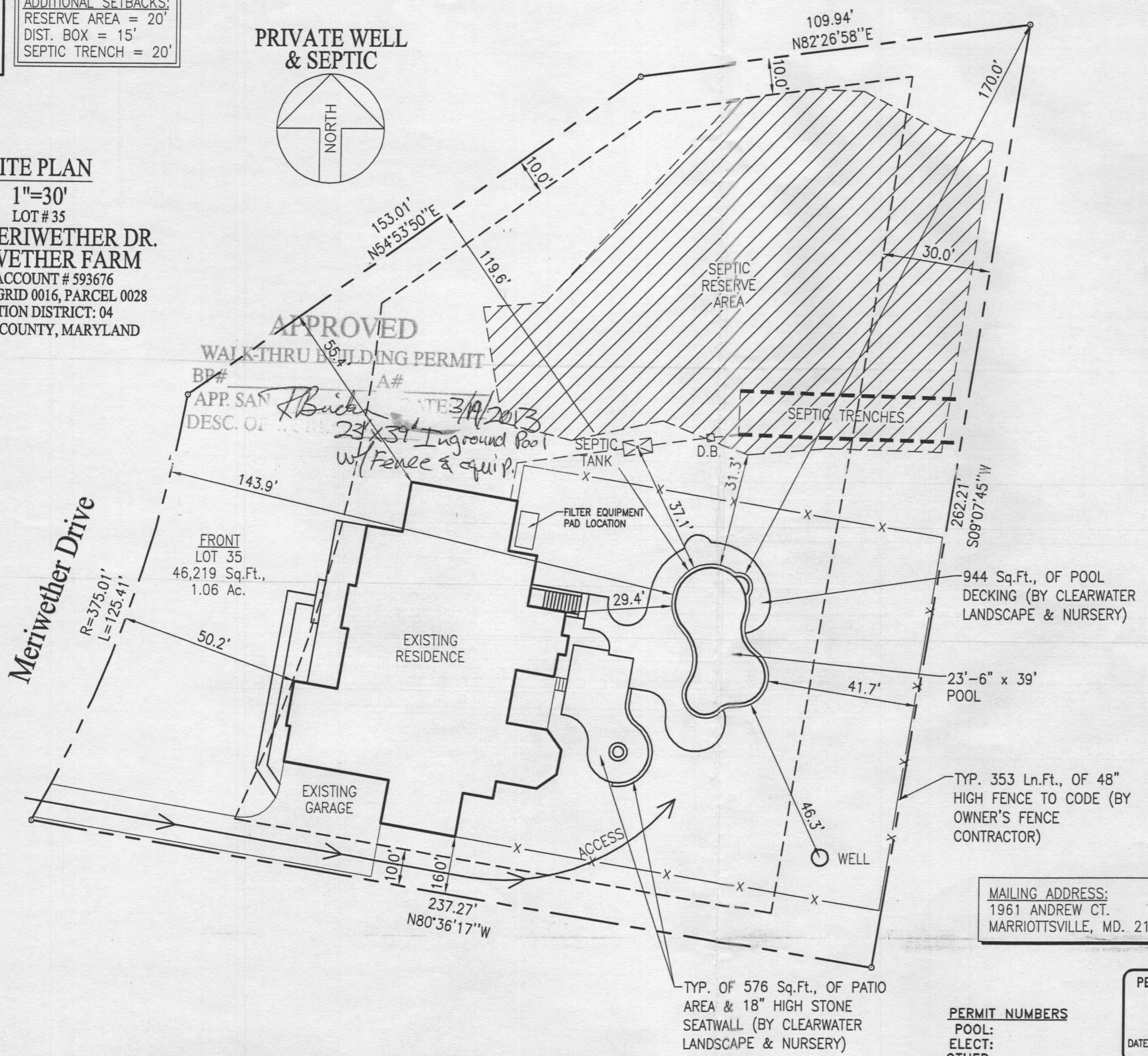
PRIVATE WELL & SEPTIC



SITE PLAN

1"=30'
LOT # 35

14862 MERIWETHER DR.
MERIWETHER FARM
TAX ACCOUNT # 593676
MAP 0021, GRID 0016, PARCEL 0028
ELECTION DISTRICT: 04
HOWARD COUNTY, MARYLAND



APPROVED
WALK-THRU BUILDING PERMIT

BP# _____ A# _____
DATE 3/19/2013
APP. SAN [Signature] DATE 3/19/2013
DESC. OF [Signature] 23' x 39' Inground Pool w/ Fence & equip.

MAILING ADDRESS:
1961 ANDREW CT.
MARRIOTTSTVILLE, MD. 21104

PERMIT SET
DATE: 03-13-13

PERMIT NUMBERS
POOL:
ELECT:
OTHER:

Maryland POOLS Inc.

9515 GERWIG LANE
SUITE 121
COLUMBIA, MD 21046
410-995-6600
800-252-SWIM
WWW.MARYLANDPOOLS.COM

POOL STATISTICS

SIZE/SHAPE: 23'-6" x 39' - CUSTOM TURNER
POOL AREA: 677 SPA: OTHER: 12
TOTAL AREA: 689
PERIMETER: 115 SPA:
GALLONAGE: 27,930 DEPTH: 3'-0" TO 8'-6"

DIRECTIONS TO SITE

DIRECTIONS: MILES: 000
32-N. TO WESTMINSTER PASS RT. 108-LEFT ON W. LINDEN CHURCH-RT. ONTO TEN OAKS-CONTINUE STRAIGHT ONTO LINTHICUM RD.-LEFT ONTO HOWARD RD.-LEFT ONTO TRIADELPHIA RD.-RIGHT ONTO ROXBURY RD.-RIGHT ONTO MERIWETHER DR INTO CATTAIL OVERLOOK (NEW SUBDIVISION-SEE SIGNS ON RIGHT FOR CATTAIL OVERLOOK)

MAP #
4812
GRID
F-10

Dean & Wendy Turner
14862 Meriwether Drive
Glenelg, Maryland 21737
Howard County

HOME PHONE: 410-552-0477
OFFICE PHONE 1: 443-634-0633 (Mrs.)
CELL PHONE 1: 443-540-0826 (Mr.)
CELL PHONE 2:

LOT: 35	SUBDIVISION NAME: 14862 MERIWETHER DR.	DISTRICT: 04	PIN # 593676
SITE PLAN			ZONE: ONE
SCALE: 1"=30'	BY: DLC	DATE: 03/12/13	JOB NUMBER: JK13-10510
			SHEET #: 1.0

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:

B12001629

Building Address: 14862 Meenwater Drive
Glendy Ma 21737

Suite/Apt. # _____ SDP/WP/BA #: _____

Census Tract: _____ Subdivision: _____

Section: _____ Area: _____ Lot: 35

Tax Map: _____ Parcel: _____ Grid: _____

Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: Vacant Lot

Proposed Use: Single Family Dwelling

Estimated Construction Cost: \$ 350,000

Description of Work: Haupton Manor w/ Sunroom, 3 car Garage, and additional 1 car side addition Garage

Occupant or Tenant: _____

Was tenant space previously occupied? Yes No

Contact Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

Property Owner's Name: Toll MD VIII Limited Partnership

Address: 7164 Columbia Gateway Drive

City: Columbia State: MD Zip Code: 21277

Home Phone: 410-489-7407 Work Phone: 21046

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

Phone: _____ Fax: _____

Email: MMaria3@Tollbrothersinc.com

Contractor Company: Toll Brothers

Contact Person: Mike Marz

Address: 14116 Patterson Farm Ct.

City: Glendy 1 State: MD Zip Code: 21737

License No.: _____

Phone: 410-489-7407 Fax: _____

Email: _____

Engineer/Architect Company: ESE

Responsible Design Prof.: Mike Boyle

Address: 7164 Columbia Gateway Drive

City: Columbia State: MD Zip Code: 21046

Phone: 410-489-7407 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"/> Roadside Tree Project Permit	<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 st floor: <u>60</u> <u>57</u>	<input checked="" type="checkbox"/> Private
2 nd floor: <u>60</u> <u>57</u>	<u>Sewage Disposal</u>
Basement:	<input type="checkbox"/> Public
<input type="checkbox"/> Finished Basement	<input checked="" type="checkbox"/> Private
<input checked="" type="checkbox"/> Unfinished Basement	Electric: <input 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:	<input 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:	
Footings:	<input checked="" type="checkbox"/> Roadside Tree Project Permit
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.

Applicant's Signature: MMaria3@Tollbrothersinc.com

Email Address: MMaria3@Tollbrothersinc.com

Title/Company: ATM Toll

Print Name: Mike Marz

Date: 5/6/12

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>6-21-12</u>	<u>Heidi Scott</u>
<input type="checkbox"/> 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	\$ <u>100.00</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$ <u>5000</u>
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$

Check 09180996
 INV # 278480