

Building Address 13506 Mitchells Way

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

Census Tract _____ Subdivision Cloverfield

Section _____ Area _____ Lot 1

Tax Map _____ Parcel _____ Grid 8

Zoning _____ Map Coordinates _____ Lot Size _____

Existing Use Residential

Proposed Use -SAME-

Estimated Construction Cost \$ 20,000.00

Description of Work Install open deck 20x18.5 w/steps to grade

Occupant or Tenant _____

Contact Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Property Owner's Name George Crabbe

Address 13506 Mitchells Way

City West Friendship State MD Zip Code 21794

Home Phone 443-220-1837 Work Phone _____

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

Phone _____ Fax _____

Contractor Company The Deck & Fence Co.

Contact Person Jim Amend

Address 2010 ORMAND RD.

City DUNDALK State MD Zip Code 21222

License No. MHLC 86997

Phone 443-465-0124 Fax 443-407-0806

Engineer or Architect Company _____

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

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"/>
Use group: _____	Gas Yes <input type="checkbox"/> No <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	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
	Sprinkler system: N/A <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression # of Heads _____

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: _____ <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
Depth _____ Width _____ 1 st floor: <u>40x50 (Appx)</u> 2 nd floor: <u>40x50</u>	Sewage Disposal: _____ <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
Basement: _____ Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
No. of Bedrooms _____	Gas Yes <input type="checkbox"/> No <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: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Other Structure: _____ Dimensions: _____ Footings: _____ Roof: _____ <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	Sprinkler system: N/A <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other: _____

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]

Email Address _____

Title/Company OWNER / THE DECK & FENCE CO.

Print Name JAMES G. AMEND JR.

Date 4/19/2010

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

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	Filing fee	PROPERTY ID #
Land Development, DPZ			Front: _____	\$ _____	
State Highways			Rear: _____	\$ _____	
Building Officials			Side: _____	Excise tax \$ _____	
Dev. Engineering, DPZ			Side St.: _____	Add'l per fee \$ _____	
Health <u>4/19/10 [Signature]</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 \$ _____	
			Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # _____	
			Lot Coverage for New Town Zone _____	Validation # _____	
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			SDP/Red-line approval date _____	Accepted by _____	
ONE STOP SHOP: <input type="checkbox"/>					

HOWARD COUNTY
PERMIT APPLICATION

PERMIT NUMBER

B02003252

Building Address 13506 Mitchells Way
West Friendship, MD 21794
Suite/Apt. #: _____ SDP/WP/Petition #: _____
Census Tract 6034.00 Subdivision Claverfield
Section _____ Area _____ Lot 1
Tax Map 15 Parcel 4 Grid 8
Zoning _____ Map Coordinates _____ Lot size 1.12 Ac

Property Owner's Name _____
Address _____
City _____ State _____ Zip Code _____
Home Phone _____ Work Phone _____
Applicant's Name & Mailing Address, (if other than stated hereon): _____
Phone _____ Fax _____

Existing Use _____
Proposed Use New SFD w/Bathrooms
Estimated Construction Cost \$ _____ in Beresmit
Description of Work _____

Contractor Company Catonville Homes, LLC
Contact Person Frank Potepan
Address 11175 Stratfield Court
City Mariottsville State MD Zip Code 21104
License No. _____
Phone _____ 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: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <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: N/A <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 type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: <input type="checkbox"/> Public <input 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 type="checkbox"/> No <input type="checkbox"/>
Basement: _____	Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input 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 _____ Height: _____	Sprinkler system: N/A <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other:
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 Height: _____	
<input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	

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Applicant's Signature _____
Title/Company _____

Print Name _____
Date _____

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
** PLEASE WRITE NEATLY AND LEGIBLY. **
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AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official		
Dev. Engineering, DPZ		
Health	<u>12-9-08</u>	<u>Dona Bernard</u>
Fire Protection		

Is Sediment Control approval required prior to issuance?
YES NO

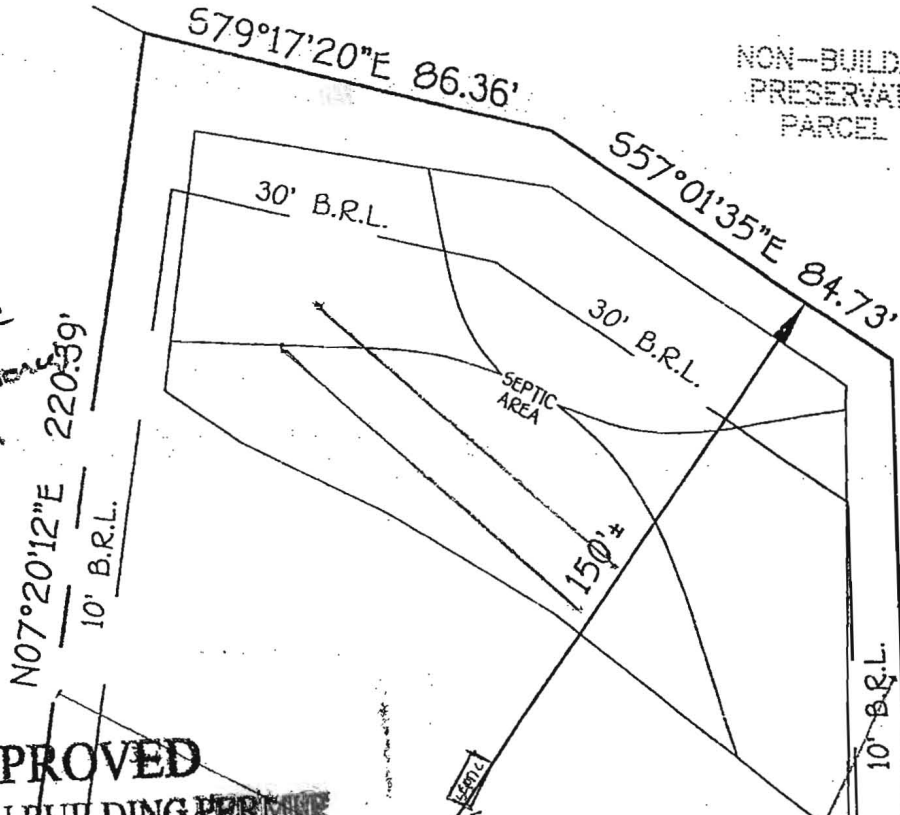
CONTINGENCY CONSTRUCTION START:
ONE STOP SHOP:

DPZ SETBACK INFORMATION	PROPERTY ID#:
Front: _____	Filing fee \$ <u>100.00</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>13887</u>
SDP/Red-line approval date _____	Validation # _____

Not to scale. See Normal D.R. from Deck.

LOT 2
-KW

NON-BUILDABLE PRESERVATION PARCEL E



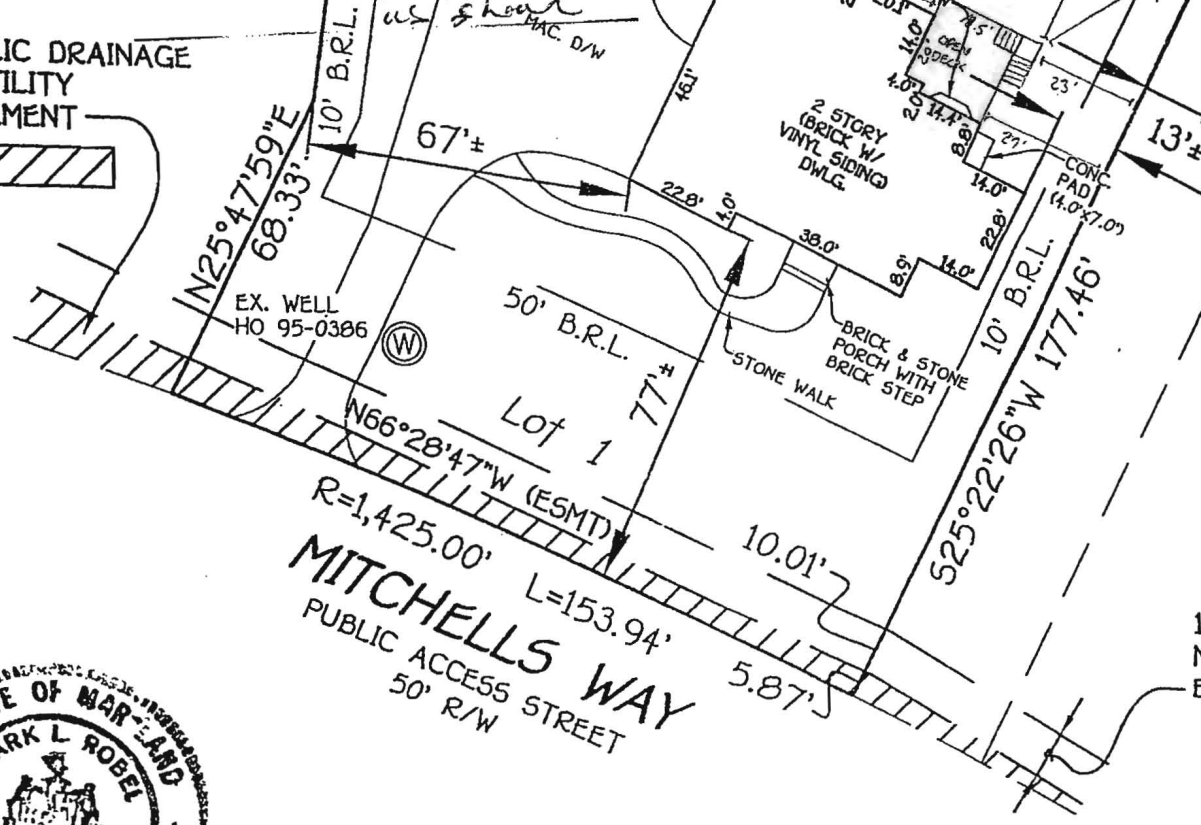
APPROVED

~~WALKTHRU BUILDING PERMIT~~

APR. SAN *K. Wall* DATE: *4/19/14*
DESC. OF WORK: *Proposed Deck*

30' PUBL DRAINAC STORMWA' MANAGEMEN UTILITY EASI

PUBLIC DRAINAGE UTILITY EASEMENT



PART OF BUILDABLE PRESERVATION PARCEL A

10' PUBLIC TREE MAINTENANCE EASEMENT

MITCHELLS WAY
PUBLIC ACCESS STREET
50' R/W

HOUSE LOCATION



SEDIMENT CONTROL NOTES

- A MINIMUM OF 48 HOURS NOTICE MUST BE GIVEN TO THE HOWARD COUNTY DEPARTMENT OF INSPECTIONS, LICENSING AND PERMITS, SEDIMENT CONTROL DIVISION PRIOR TO THE START OF ANY CONSTRUCTION (03-19-09).
- ALL VEGETATIVE AND STRUCTURAL PRACTICES ARE TO BE INSTALLED ACCORDING TO THE PROVISIONS OF THIS PLAN AND ARE TO BE IN CONFORMANCE WITH THE MOST CURRENT MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL AND REVISIONS THERETO.
- FOLLOWING INITIAL SOIL DISTURBANCE OR RE-DISTURBANCE, PERMANENT OR TEMPORARY STABILIZATION SHALL BE COMPLETED WITHIN 17 CALENDAR DAYS FOR ALL PERIMETER SEDIMENT CONTROL STRUCTURES, DICES, PERIMETER SLOPES AND ALL SLOPES STEEPER THAN 3:1, 30 14 DAYS AS TO ALL OTHERS DISTURBED OR GRADED AREAS ON THE PROJECT SITE.
- ALL SLOPED TERRAINS SHOWN MUST BE FENCED AND WARNING SIGNS POSTED IN ACCORDANCE WITH TITLE 17, CHAPTER 24, OF THE HOWARD COUNTY DESIGN MANUAL, STORM DRAINAGE.
- ALL DISTURBED AREAS MUST BE STABILIZED WITHIN THE TIME PERIOD SPECIFIED ABOVE IN ACCORDANCE WITH THE 1994 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL FOR PERMANENT SEEDING (SEC. 300.500 SEC. 54), TEMPORARY SEEDING (SEC. 300.500 SEC. 55), 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.
7. SITE ANALYSIS:
 - TOTAL AREA OF SITE: 1.125 ACRES
 - AREA DISTURBED: 0.832 ACRES
 - AREA TO BE ROOFED OR PAVED: 0.819 ACRES
 - AREA TO BE VEGETATIVELY STABILIZED: 0.504 ACRES
 - TOTAL CUT: 0 CUBIC YDS.
 - TOTAL FILL: 0 CUBIC YDS.

TEMPORARY SEEDING NOTES

APPLY TO GRADED OR CLEARED AREAS LIKELY TO BE REDISTURBED WHERE A SHORT-TERM VEGETATIVE COVER IS NEEDED.

SEEDING PREPARATION
LOOSEN UPPER THREE INCHES OF SOIL BY RAKING, DISCING OR OTHER ACCEPTABLE MEANS BEFORE SEEDING.

SOIL AMENDMENTS
APPLY 600 LBS. PER ACRE 10-10-10 FERTILIZER (4 LBS./1,000 SQ.FT.)

SEEDING
FOR THE PERIODS MARCH 1 THROUGH APRIL 30, AND AUGUST 1 THROUGH NOVEMBER 15, SEED WITH 1 1/2 BUSHEL PER ACRE OF UNWEEDING SMALL GRASS STRAW IMMEDIATELY AFTER SEEDING. ANCHOR MULCH IMMEDIATELY AFTER APPLICATION USING 200 GALLONS PER ACRE OF CALGAL/000 SQ.FT. OF EMULSIFIED ASPHALT ON FLAT AREAS, ON SLOPES 8 FEET OR HIGHER, USE 340 GALLONS PER ACRE (9 GAL./1,000 SQ.FT.) FOR ANCHORING.

MULCHING
APPLY 1 1/2 TO 2 TONS PER ACRE (70 TO 90 LBS./1,000 SQ.FT.) OF UNWEEDING SMALL GRASS STRAW IMMEDIATELY AFTER SEEDING. ANCHOR MULCH IMMEDIATELY AFTER APPLICATION USING 200 GALLONS PER ACRE OF CALGAL/000 SQ.FT. OF EMULSIFIED ASPHALT ON FLAT AREAS, ON SLOPES 8 FEET OR HIGHER, USE 340 GALLONS PER ACRE (9 GAL./1,000 SQ.FT.) FOR ANCHORING.

MAINTENANCE
INSPECT ALL SEEDING AREAS AND MAKE NEEDED REPAIRS, REPLACEMENTS AND RESEEDINGS.
* FOR PUBLIC PONDS SUBSTITUTE CHEMUNG CROWNWEED AT 15 LBS./ACRE AND KENTUCKY 31 TALL FESCUE AT 40 LBS./ACRE AS THE SEEDING REQUIREMENT. OPTIMUM SEEDING DATE FOR THIS MIXTURE IS MARCH 1 TO APRIL 30.

PERMANENT SEEDING NOTES

ALL DISTURBED AREAS SHALL BE STABILIZED AS FOLLOWS:

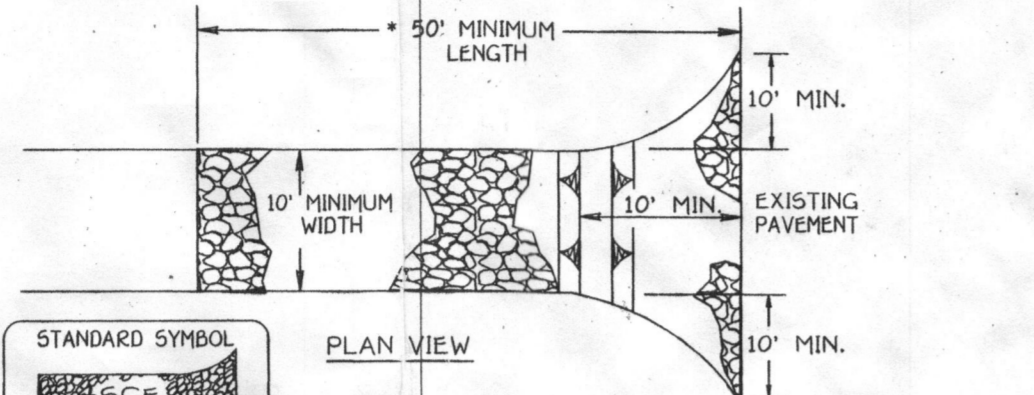
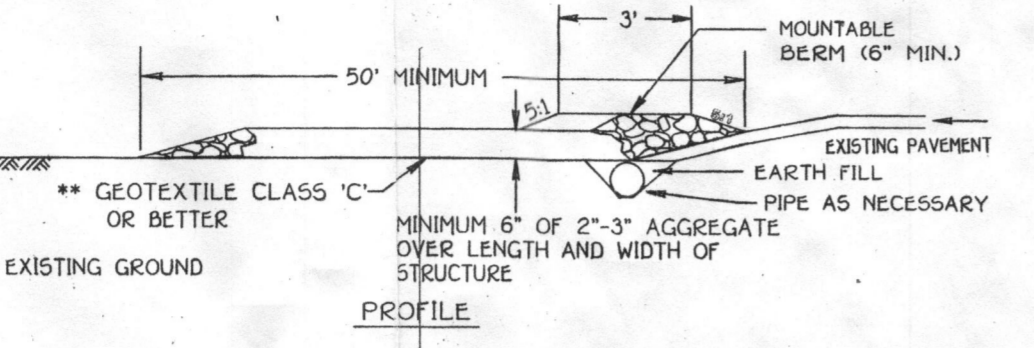
SEEDING PREPARATION
LOOSEN UPPER THREE INCHES OF SOIL BY RAKING, DISCING OR OTHER ACCEPTABLE MEANS BEFORE SEEDING.

SOIL AMENDMENTS
APPLY TWO TONS PER ACRE DOLOMITIC LIMESTONE (92 LBS./1,000 SQ.FT.) AND 600 LBS. PER ACRE 0-20-20 FERTILIZER (4 LBS./1,000 SQ.FT.) BEFORE SEEDING HARROW OR DISC INTO UPPER THREE INCHES OF SOIL. AT TIME OF SEEDING, APPLY 400 LBS. PER ACRE 30-0-0 UREAFORM FERTILIZER (9 LBS./1,000 SQ.FT.) AND 500 LBS. PER ACRE (0.5 LBS./1,000 SQ.FT.) OF 10-20-20 FERTILIZER.

SEEDING
FOR THE PERIODS MARCH 1 THROUGH APRIL 30, AND AUGUST 1 THROUGH OCTOBER 15, SEED WITH 100 LBS. PER ACRE (2 1/2 LBS./1,000 SQ.FT.) OF KENTUCKY 31 TALL FESCUE. FOR THE PERIOD MAY 1 THROUGH JULY 31, SEED WITH 60 LBS./ACRE (1.5 LBS./1,000 SQ.FT.) OF KENTUCKY 31 TALL FESCUE AND 2 LBS. PER ACRE (0.05 LBS./1,000 SQ.FT.) OF WEEDING LOGGERS. DURING THE PERIOD OF OCTOBER 15 THROUGH FEBRUARY 28, PROJECT SITE BY OPTION (D) - TWO TONS PER ACRE OF WELL ANCHORED STRAW MULCH AND SEED AS SOON AS POSSIBLE IN THE SPRING. OPTION (E) - USE 500 CUBIC YD. OF SEED WITH 100 LBS./ACRE KENTUCKY 31 TALL FESCUE AND MULCH WITH TWO TONS/ACRE WELL ANCHORED STRAW. ALL SLOPES SHOULD BE HYDROSEED.

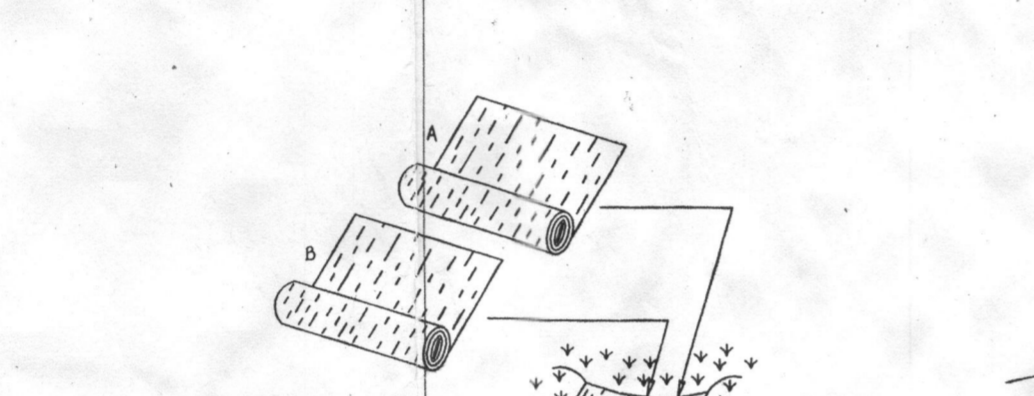
MULCHING
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MAINTENANCE
INSPECT ALL SEEDING AREAS AND MAKE NEEDED REPAIRS, REPLACEMENTS AND RESEEDINGS.
* FOR PUBLIC PONDS SUBSTITUTE CHEMUNG CROWNWEED AT 15 LBS./ACRE AND KENTUCKY 31 TALL FESCUE AT 40 LBS./ACRE AS THE SEEDING REQUIREMENT. OPTIMUM SEEDING DATE FOR THIS MIXTURE IS MARCH 1 TO APRIL 30.



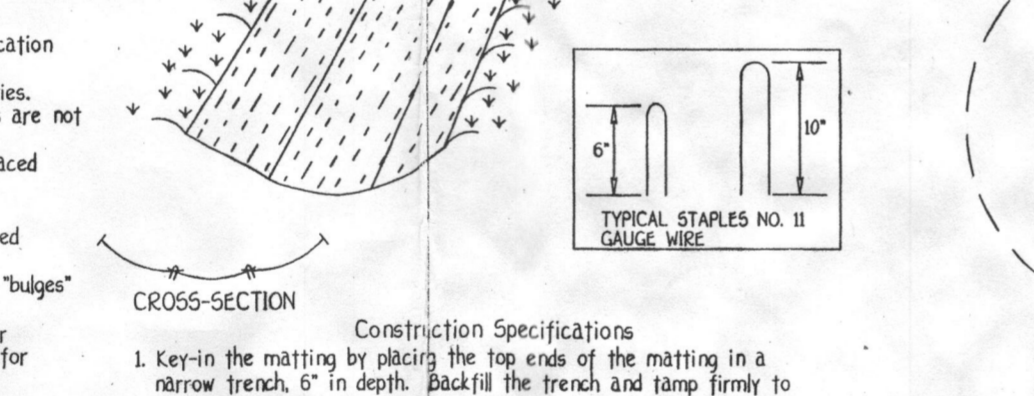
STABILIZED CONSTRUCTION ENTRANCE
NOT TO SCALE

Construction Specification
1. Length - minimum of 50' x 30' for single residence lot.
2. Width - 12' minimum, should be placed at the existing road to provide a turning radius.
3. Geotextile fabric (filter cloth) shall be placed over the existing ground prior to placing stone. *The plan approval authority may not require single family residences to use geotextile.
4. Stone - crushed aggregate (2" to 3") or reclaimed or recycled concrete equivalent shall be placed at least 6" deep over the length and width of the entrance.
5. Surface Water - all surface water flowing to or diverted toward construction entrances shall be piped through the entrance, maintaining positive drainage. Pipe installed through the stabilized construction entrance shall be protected with a mountable berm with 6" slopes and a minimum of 6" of stone over the pipe. Pipe shall be used according to the details. When the 6" is located at a high spot and has to discharge to cover a pipe will not be necessary. Pipe should be sized according to the amount of runoff to be covered. A 6" minimum will be required.
6. Location - A stabilized construction entrance shall be located at every point where construction traffic enters or leaves a construction site. Vehicles leaving the site must travel over the entire length of the stabilized construction entrance.



SUPER SILT FENCE
NOT TO SCALE

Construction Specifications
1. Fencing shall be 42" in height and constructed in accordance with the latest Maryland State Highway Details for Chain Link Fencing. The specification for a 6' fence shall be used, substituting 42" fabric and 6" length posts.
2. Chain link fence shall be fastened securely to the fence posts with wire ties. The lower tension wires and trim rods, drive anchors and post caps are not required except on the ends of the fence.
3. Filter cloth shall be fastened securely to the chain link fence with ties spaced every 24" at the top and mid section.
4. Filter cloth shall be embedded a minimum of 8" into the ground.
5. When two sections of filter cloth adjoin each other, they shall be overlapped by 6" and fabric.
6. Maintenance shall be performed as needed and silt buildup removed when "bulges" develop in the silt fence, or when silt reaches 50% of fence height.
7. Filter cloth shall be fastened securely to each fence post with wire ties or staples at top and mid section and shall meet the following requirements for Geotextile Class I:
Tensile Strength: 50 lbs/in (min) Test: MHT 509
Tensile Modulus: 20 lbs/in (min) Test: MHT 509
Flow Rate: 0.3 gal/(15/minute) (max) Test: MHT 322
Filtering efficiency: 75% (min) Test: MHT 322



EROSION CONTROL MATTING
NOT TO SCALE

Construction Specifications
1. Key-in the matting by placing the top ends of the matting in a narrow trench, 6" in depth. Backfill the trench and tamp firmly to conform to the channel cross-section. Secure with a row of staples about 4" down slope from the trench. Spacing between staples is 6".
2. Staple the 4" overlap in the channel center using an 18" spacing between staples.
3. Before stapling the outer edges of the matting, make sure the matting is smooth and in firm contact with the soil.
4. Staples shall be placed 2' apart with 4 rows for each strip. 2 outer rows, and 2 intermediate rows down the center.
5. Where one roll of matting ends and another begins, the end of the top strip shall overlap the upper end of the lower strip by 4", shingle fashion. Reinforce the overlap with a double row of staples spaced 6" apart in a staggered pattern on either side.
6. The discharge end of the matting liner should be similarly secured with 2 double rows of staples.
Note: If flow will enter from the edge of the matting then the area effected by the flow must be key-in.

LEGEND

SYMBOL	DESCRIPTION
---	EXISTING CONTOUR 2' INTERVAL
- - - -	PROPOSED CONTOUR 2' INTERVAL
+362.5	SPOT ELEVATION
55F	EROSION CONTROL MATTING
55F	SUPER SILT FENCE
---	LIMITS OF DISTURBANCE
---	EXISTING STREET TREES FROM F-10-191

SEQUENCE OF CONSTRUCTION

- OBTAIN GRADING PERMIT. 1 DAY
- INSTALL SEDIMENT AND EROSION CONTROL DEVICES AS SHOWN ON PLAN. 1 DAY
- CLEAR AND GRUB TO LIMITS OF DISTURBANCE AND MASS GRADE TO SUB-BASE. 1 DAY
- INSTALL TEMPORARY SEEDING. 1 DAY
- CONSTRUCT BUILDINGS. 2 MONTHS
- FINE GRADE SITE AND INSTALL PERMANENT SEEDING AND LANDSCAPE. 1 DAY
- REMOVE SEDIMENT CONTROL DEVICES AS UPLAND AREAS ARE STABILIZED AND PERMSSION IS GRANTED BY E/S CONTROL INSPECTOR. 2 DAYS

DEVELOPER'S CERTIFICATE

"I/WE CERTIFY THAT ALL DEVELOPMENT AND 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 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 HOWARD SOIL CONSERVATION DISTRICT."

BUILDER/DEVELOPER
CATONVILLE BUILDERS
1175 STRATFIELD COURT
MARIOTTVILLE, MARYLAND 2104
410-442-2211

Signature: *John K. Robertson*
DATE: 10/29/08

ENGINEER'S CERTIFICATE

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

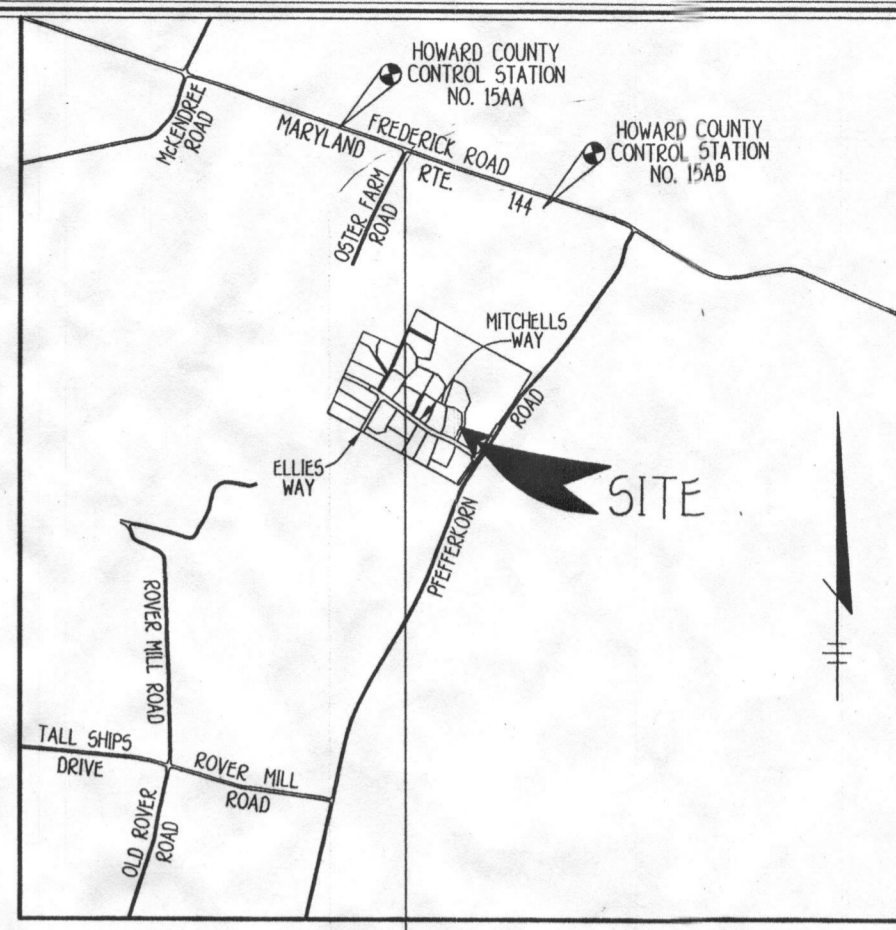
Signature: *Earl D. Collins*
DATE: 10/29/08

FISHER, COLLINS & CARTER, INC.
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS
CENTRAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE
ELICOTT CITY, MARYLAND 21042
410-661-8955

THIS DEVELOPMENT IS APPROVED FOR SOIL EROSION AND SEDIMENT CONTROL BY THE HOWARD SOIL CONSERVATION DISTRICT.
APPROVED: *John K. Robertson* 10/29/08
HOWARD SOIL CONSERVATION DISTRICT

Signature: *John K. Robertson*
DATE: 10/29/08

Signature: *Earl D. Collins*
DATE: 10/29/08



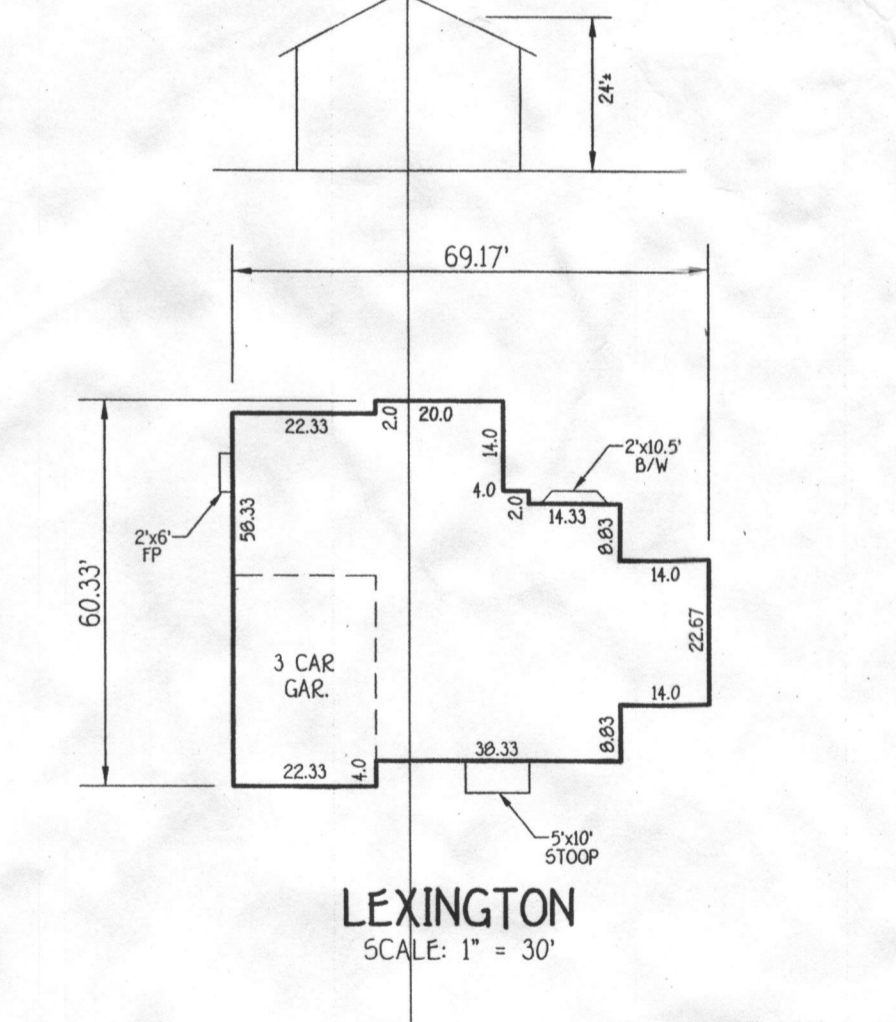
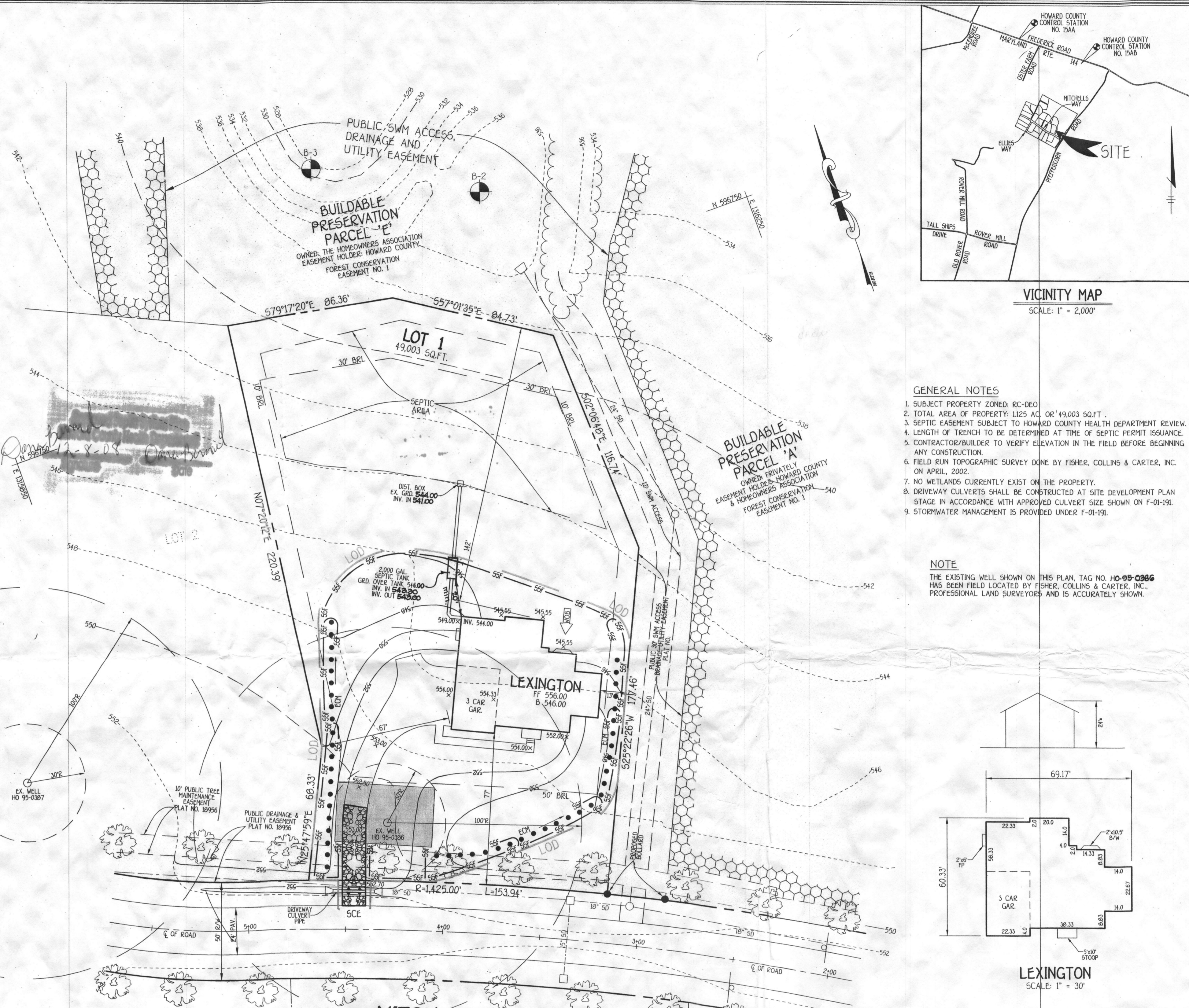
VICINITY MAP
SCALE: 1" = 2,000'

GENERAL NOTES

- SUBJECT PROPERTY ZONED RC-DEO
- TOTAL AREA OF PROPERTY 1.125 AC OR 49,003 SQ.FT.
- SEPTIC EASEMENT SUBJECT TO HOWARD COUNTY HEALTH DEPARTMENT REVIEW.
- LENGTH OF TRENCH TO BE DETERMINED AT TIME OF SEPTIC PERMIT ISSUANCE.
- CONTRACTOR/BUILDER TO VERIFY ELEVATION IN THE FIELD BEFORE BEGINNING ANY CONSTRUCTION.
- FIELD RAIN TOPOGRAPHIC SURVEY DONE BY FISHER, COLLINS & CARTER, INC. ON APRIL, 2002.
- NO WETLANDS CURRENTLY EXIST ON THE PROPERTY.
- DRIVEWAY CULVERTS SHALL BE CONSTRUCTED AT SITE DEVELOPMENT PLAN STAGE IN ACCORDANCE WITH APPROVED CULVERT SIZE SHOWN ON F-01-191.
- STORMWATER MANAGEMENT IS PROVIDED UNDER F-01-191.

NOTE

THE EXISTING WELL SHOWN ON THIS PLAN, TAG NO. HO-05-0266 HAS BEEN FIELD LOCATED BY FISHER, COLLINS & CARTER, INC., PROFESSIONAL LAND SURVEYORS AND IS ACCURATELY SHOWN.



LEXINGTON
SCALE: 1" = 30'

SITE DEVELOPMENT, SEDIMENT/EROSION CONTROL PLAN CLOVERFIELD LOT 1

ZONED: RC-DEO
TAX MAP NO: 15
3RD ELECTION DISTRICT
SCALE: 1" = 30'

PLAT NO. 18955
PARCEL NO: 4
GRID NO: B
HOWARD COUNTY, MARYLAND
DATE: OCTOBER, 2008

SHEET 1 OF 1

G.P. 09-27