

Received 9/3/10 dH

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS  
3430 COURT HOUSE DRIVE  
ELLCOTT CITY, MD 21043  
PERMITS (410) 313-2455 INSPECTIONS (410) 313-1910  
AUTOMATED INFORMATION (410) 313-3800

# HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

B/DPZ 2757

Building Address 1743 Ardening Circle  
S. Brentwood and 71784  
Suite/Apt. #: \_\_\_\_\_ SDP/WP/Petition #: \_\_\_\_\_  
Census Tract \_\_\_\_\_ Subdivision Ardening  
Section \_\_\_\_\_ Area \_\_\_\_\_ Lot 17  
Tax Map 7 Parcel 701 Grid 301 22  
Zoning \_\_\_\_\_ Map Coordinates \_\_\_\_\_ Lot size 1070

Property Owner's Name Michael...  
Address 8110 Brightbridge Rd  
City Ellicott City State MD Zip Code 21043  
Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
Applicant's Name & Mailing Address, (if other than stated hereon):  
Jeremy...  
Phone 410 720 2222 Fax Ellicott City MD 21043

Existing Use SI  
Proposed Use SI  
Estimated Construction Cost \$ 6000  
Description of Work  
SI 1 500 gal propane tank (UG)

Contractor Company Vella National  
Contact Person William...  
Address 1201...  
City Jessup State MD Zip Code 21751  
License No. 607715  
Phone 1201 292 4444 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: _____ Public <input type="checkbox"/> Private <input type="checkbox"/>
No. of stories: _____	Sewage Disposal: _____ Public <input type="checkbox"/> Private <input type="checkbox"/>
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: _____ Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/>	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
State Certified Modular <input type="checkbox"/>	Sprinkler system: N/A <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: _____ Public <input type="checkbox"/> Private <input type="checkbox"/>
1st floor: _____	Sewage Disposal: _____ Public <input type="checkbox"/> Private <input type="checkbox"/>
2nd floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/>	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Crawl space <input type="checkbox"/> Stab on Grade <input type="checkbox"/>	Sprinkler system: N/A <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other: _____
No. of Bedrooms _____	
Height: _____	
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: _____	
State Certified Modular <input type="checkbox"/>	
Manufactured Home <input type="checkbox"/>	

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 \_\_\_\_\_  
Title/Company \_\_\_\_\_

Print Name \_\_\_\_\_  
Date \_\_\_\_\_

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

**- FOR OFFICE USE ONLY -**

AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official		
Dev. Engineering, DPZ		
Health	9/28/10	<i>[Signature]</i>
Fire Protection		
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>		

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

CONTINGENCY CONSTRUCTION START:   
ONE STOP SHOP:   
Distribution of Copies- White: Building Official Green: LDD, DPZ  
T:\Forms\PERMIT.FRM

Accepted by \_\_\_\_\_



# 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.: \_\_\_\_\_

Building Address: 1743 Archers Glen  
 City: Sykesville State: MD Zip Code: 21784  
 Suite/Apt. #: \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
 Census Tract: \_\_\_\_\_ Subdivision: Archers Glen  
 Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: 17  
 Tax Map: 341216 Parcel: 0301 Grid: 0022  
 Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: 607AC

Property Owner's Name: Michael Meaney  
 Address: 1743 Archers Glen  
 City: Sykesville State: MD Zip Code: 21784  
 Phone: 410-746-7808 Fax: \_\_\_\_\_  
 Email: meaney.michael@gmail.com

Applicant's Name & Mailing Address, (if other than stated herein)  
 Applicant's Name: Jay Schneider  
 Address: 400 E Pratt St #800  
 City: Baltimore State: MD Zip Code: 21202  
 Phone: 410-299-3124 Fax: \_\_\_\_\_  
 Email: jay@elitepools.com

Contractor Company: Elite Pools  
 Contact Person: Jay Schneider  
 Address: 400 E Pratt St #800  
 City: Baltimore State: MD Zip Code: 21202  
 License No.: 716753  
 Phone: 410-299-3124 Fax: \_\_\_\_\_  
 Email: jay@elitepools.com

Engineer/Architect Company: \_\_\_\_\_  
 Responsible Design Prof.: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Existing Use: SFD  
 Proposed Use: SFD w/ pool  
 Estimated Construction Cost: \$ \_\_\_\_\_  
 Description of Work: Installation of in-ground concrete swimming pool, 20'x40' w/ fence  
 Occupant or Tenant: Occupant  
 Was tenant space previously occupied?  Yes  No  
 Contact Name: \_\_\_\_\_  
 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:	Depth	Width
Gross area, sq. ft./floor:	1 <sup>st</sup> floor:	
	2 <sup>nd</sup> floor:	
Area of construction (sq. ft.):	Basement:	
	<input type="checkbox"/> Finished Basement	
Use group:	<input type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
	<input type="checkbox"/> Slab on Grade	
<b>Construction type:</b>	No. of Bedrooms:	
<input type="checkbox"/> Reinforced Concrete		
<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 checked="" type="checkbox"/> No	Roof:	
<b>Roadside Tree Project Permit #</b>	<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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Gas:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Heating System</b>	
<input type="checkbox"/> Electric	<input type="checkbox"/> Oil <input checked="" type="checkbox"/> N/A
<input type="checkbox"/> Natural Gas	<input type="checkbox"/> Propane Gas
<input type="checkbox"/> Other:	
<b>Sprinkler System:</b>	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Grading Permit Number:	
Building Shell Permit Number:	

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Applicant's Signature: Jay Schneider Print Name: Jay Schneider  
 Email Address: jay@elitepools.com Date: 5/7/2015  
 Title/Company: Elite Pools

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

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health		

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

DPZ SETBACK INFORMATION
Front:
Rear:
Side:
Side St.:
All minimum setbacks met? <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	#

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

B1 0000174

Building Address 1743 Archers Glen Sykesville  
MD 21784

Property Owner's Name Mike and Michele Meaney  
Address 1743 Archers Glen  
City Sykesville State MD Zip Code 21784  
Home Phone \_\_\_\_\_ Work Phone 410-221-2111  
Applicant's Name & Mailing Address, (if other than stated herein):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

Census Tract \_\_\_\_\_ Subdivision Archers Glen

Section \_\_\_\_\_ Area \_\_\_\_\_ Lot 17

Tax Map 7 Parcel 311 Grid 72

Zoning P-10 Map Coordinates \_\_\_\_\_ Lot Size 46,171 sq ft

Existing Use 2 car garage

Proposed Use garage

Estimated Construction Cost \$ 750,000

Description of Work 4 car garage 3.5 ft high  
2 car detached garage

Occupant or Tenant \_\_\_\_\_

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

Address \_\_\_\_\_

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

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

Phone 410-221-2111 Fax \_\_\_\_\_

Contractor Company Viking Development Grp.

Contact Person Craig Colburn

Address 815 Dick Custer Road

City Sykesville State MD Zip Code 21784

License No. 1185

Phone 410-977-2188 Fax 410-489-7213

Engineer or Architect Company T&H

Contact Person Tom H.

Address 11177 St. ...

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

Phone 410-221-5145 Fax \_\_\_\_\_

**BUILDING DESCRIPTION - COMMERCIAL**

**BUILDING DESCRIPTION - RESIDENTIAL**

Building Characteristics	Utilities
Height: _____	Water Supply: _____ Public <input type="checkbox"/> Private <input type="checkbox"/>
No. of stories: _____	Sewage Disposal: _____ Public <input type="checkbox"/> Private <input type="checkbox"/>
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: _____ Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular <input type="checkbox"/>	Sprinkler system: N/A <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 _____ 1 <sup>st</sup> floor: <u>14x18</u> 2 <sup>nd</sup> floor: <u>14x18</u> Basement: <u>14x18</u> } <u>Saw</u> <u>7550 sq ft</u>	Water Supply: _____ Public <input type="checkbox"/> Private <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Sewage Disposal: _____ Public <input type="checkbox"/> Private <input type="checkbox"/>
No. of Bedrooms <u>3</u>	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> 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: _____	Sprinkler system: N/A <input type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____
State Certified Modular <input type="checkbox"/> Manufactured Home <input type="checkbox"/>	

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Applicant's Signature [Signature]  
Title/Company [Signature]

Print Name [Signature]  
Date 1-21-2010

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

AGENCY	DATE	SIGNATURE	APPROVAL
Land Development, DPZ			
State Highways			
Building Officials			
Dev. Engineering, DPZ			
Health	<u>1/21/2010</u>	<u>[Signature]</u>	
Fire Protection			
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/> ONE STOP SHOP: <input type="checkbox"/>			

DPZ SETBACK INFORMATION	PROPERTY ID #
Front: _____	Filing fee \$ <u>120.00</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 New Town Zone _____	Check # <u>4454</u>
SDP/Red-line approval date _____	Validation # _____
	Accepted by <u>[Signature]</u>

**PERMANENT SEEDING NOTES**

Apply to graded or cleared areas not subject to immediate further disturbance where a permanent long-lived vegetative cover is needed.

**Seedbed Preparation:** Loosen upper three inches of soil by raking, disking or other acceptable means before seeding, if not previously loosened.

**Soil Amendments:** In lieu of soil test recommendations, use one of the following schedules:  
 1. Preferred -- Apply 2 tons/acre dolomitic limestone (92 lbs/1000 sq. ft.) and 600 lbs/acre 10-10-10 fertilizer (14 lbs/1000 sq. ft.) before seeding. Harrow or disk into upper three inches of soil. At time of seeding, apply 400 lbs/acre 30-0-0 ureaform fertilizer (9 lbs/1000 sq. ft.).  
 2. Acceptable -- Apply 2 tons/acre dolomitic limestone (92 lbs/1000 sq. ft.) and 1000 lbs/acre 10-10-10 fertilizer (23 lbs/1000 sq. ft.) before seeding. Harrow or disk into upper three inches of soil.

**Seeding:** For the periods March 1 -- April 30, and August 1 -- October 15, seed with 60 lbs/acre (1.4 lbs/1000 sq. ft.) of Kentucky 31 Tall Fescue. For the period May 1 -- July 31, seed with 50 lbs Kentucky 31 Tall Fescue per acre and 2 lbs/acre (.05 lbs/1000 sq. ft.) of weeping lovegrass. During the period of October 16 -- February 28, protect site by:  
 Option 1 -- Two tons per acre of well anchored straw mulch and seed as soon as possible in the spring.  
 Option 2 -- Use sod. Option 3 -- Seed with 60 lbs/acre Kentucky 30 Tall Fescue and mulch with 2 tons/acre well anchored straw.

**Mulching:** Apply 1-1/2 to 2 tons per acre (70 to 90 lbs/1000 sq. ft.) of unrotted, small grain straw immediately after seeding. Anchor mulch immediately after application using mulch anchoring tool or 218 gallons per acre (5 gal/1000 sq. ft.) of emulsified asphalt on flat areas. On slope 8 feet or higher, use 348 gallons per acre (8 gal/1000 sq. ft.) for anchoring.

**Maintenance:** Inspect all seeding areas and make needed repairs, replacements and reseedings.

**TEMPORARY SEEDING NOTES**

Apply to graded or cleared areas likely to be re-disturbed where a short-term vegetative cover is needed.

**Seedbed preparation:** Loosen upper three inches of soil by raking, disking or other acceptable means before seeding, if not previously loosened.

**Soil Amendments:** Apply 600 lbs/acre 10-10-10 fertilizer (14 lbs/1000 sq. ft.).

**Seeding:** For the periods March 1 -- April 30 and from August 15 -- October 15, seed with 2-1/2 bushel per acre of annual rye (3.2 lbs/1000 sq. ft.). For the period May 1 -- August 14, seed with 3 lbs/acre of weeping lovegrass (.07 lbs/1000 sq. ft.). For the period November 16 -- February 28, protect site by applying 2 tons/acre of well anchored straw mulch and seed as soon as possible in the spring, or use sod.

**Mulching:** Apply 1-1/2 to 2 tons/acre (70 to 90 lbs/1000 sq. ft.) of unrotted weed-free, small grain straw immediately after seeding. Anchor mulch immediately after application using mulch anchoring tool or 218 gal. per acre (5 gal/1000 sq. ft.) of emulsified asphalt on flat areas. On slope 8 ft. or higher, use 348 gal. per acre (8 gal/1000 sq. ft.) for anchoring.

**STANDARD SEDIMENT CONTROL NOTES**

1. A minimum of 48 hours notice must be given to the Howard County Department of Inspections, Licenses and Permits, Sediment Control Division prior to the start of any construction (313-1855).

2. 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.

3. Following initial soil disturbance or re-disturbance, permanent or temporary stabilization shall be completed within: a) 7 calendar days for all perimeter sediment control structures, dikes, perimeter slopes and all slopes greater than 3:1; b) 14 days as to all other disturbed or graded areas on the project site.

4. All sediment traps/basins shown must be fenced and warning signs posted around their perimeter in accordance with Vol 1, Chapter 12 of the HOWARD COUNTY DESIGN MANUAL, Storm Drainage.

5. 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. 51), sod (Sec. 54), temporary seeding (Sec. 50) and mulching (Sec. 52). Temporary stabilization with mulch alone can only be done when recommended seeding dates do not allow for proper germination and establishment of grasses.

6. All sediment control structures are to remain in place and are to be maintained in operative condition until permission for their removal has been obtained from the Howard County Sediment Control Inspector.

7. Site Analysis:  
 Total Area of Site: 46671 SQ. FT.  
 Area Disturbed: 20018 SQ. FT.  
 Area to be roofed or paved: 9797 SQ. FT.  
 Area to be vegetatively stabilized: 10777 SQ. FT.  
 Total Cut: 577 CU. Yds.  
 Total Fill: 577 CU. Yds.  
 Offsite waste/borrow area location: NONE

8. Any sediment control practice which is disturbed by grading activity for placement of utilities must be repaired on the same day of disturbance.

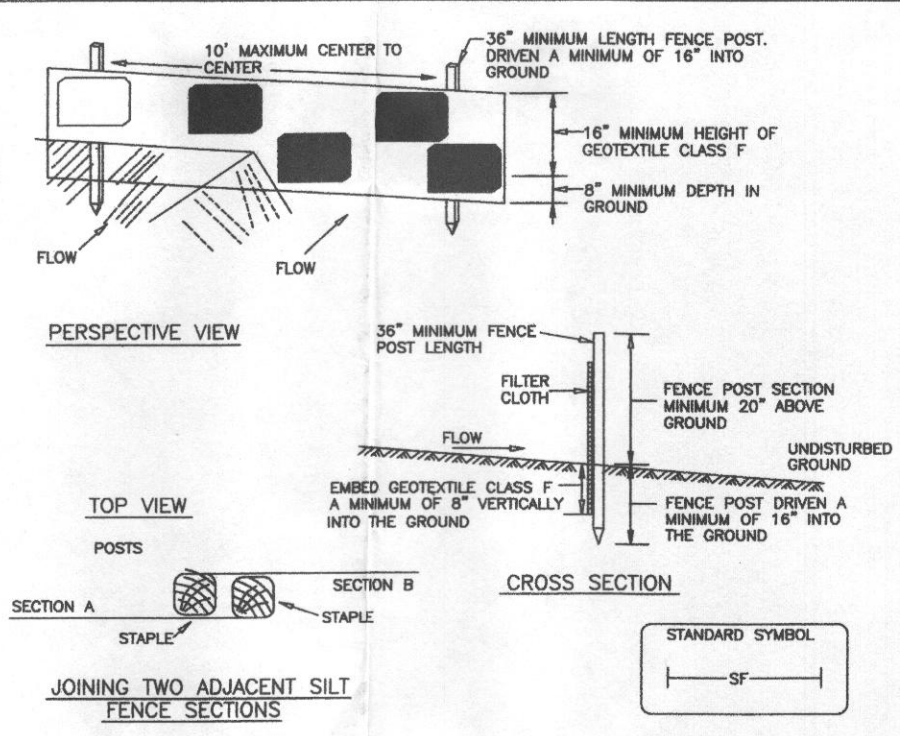
9. Additional sediment control must be provided, if deemed necessary by the Howard County Sediment Control Inspector.

10. 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.

11. Trenches for the construction of utilities is limited to three pipe lengths or that which shall be back-filled and stabilized by the end of each work day, whichever is shorter.

12. The Total Amount Of Silt Fence = 307 LF  
 The Total Amount Of Super Silt Fence = 68 LF

**DETAIL 22 - SILT FENCE**



**CONSTRUCTION SPECIFICATIONS**

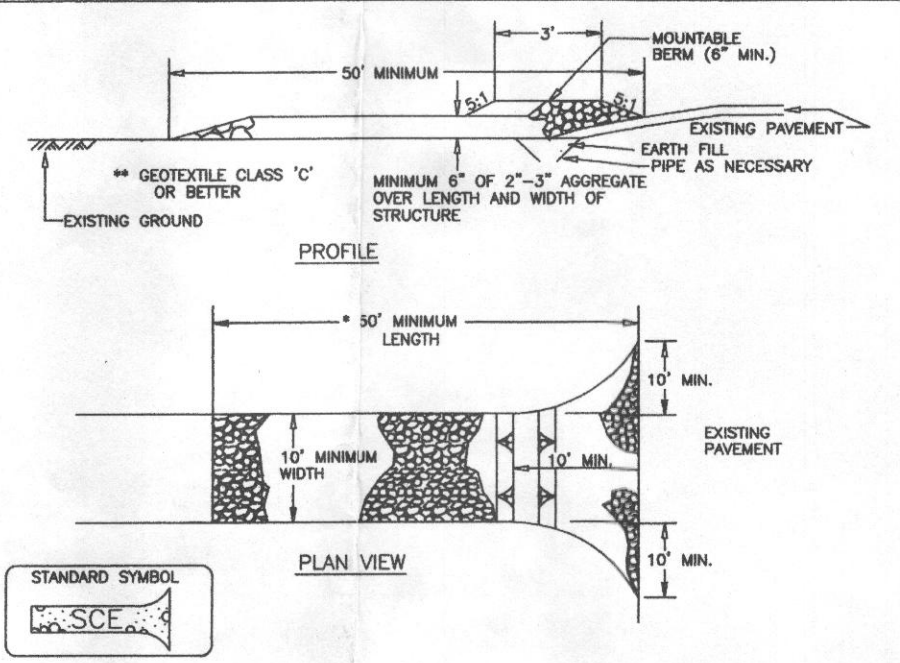
- FENCE POSTS SHALL BE A MINIMUM OF 30" LONG DRIVEN 1/4" MINIMUM INTO THE GROUND. WOOD POSTS SHALL BE 1-1/2" x 1-1/2" SQUARE UNPAVED OR 1-3/4" DIAMETER (MINIMUM) ROUND AND SHOULD BE OF SOUND QUALITY HARDWOOD. STEEL POSTS WILL BE STANDARD I OR U SECTION WEIGHING NOT LESS THAN 1.00 LBS PER LINEAR FOOT.
- GEOTEXTILE SHALL BE FASTENED SECURELY TO EACH FENCE POST WITH WIRE TIES OR STAPLES. TOP AND MID-SECTION AND SHALL MEET THE FOLLOWING REQUIREMENTS FOR GEOTEXTILE CLASS 'F':

TENSILE STRENGTH	50 LBS/IN (MIN.)	TEST: MGMT 509
TENSILE MODULUS	20 LBS/IN (MIN.)	TEST: MGMT 509
FLOW RATE	0.3 GAL/FT <sup>2</sup> /MINUTE (MAX.)	TEST: MGMT 322
FILTERING EFFICIENCY	75% (MIN.)	TEST: MGMT 322

- WHERE ENDS OF GEOTEXTILE FABRIC COME TOGETHER, THEY SHALL BE OVERLAPPED, FOLDED AND STAPLED TO PREVENT SEDIMENT BYPASS.
- SILT FENCE SHALL BE INSPECTED AFTER EACH RAINFALL EVENT AND MAINTAINED WHEN RAINAGES OCCUR OR WHEN SEDIMENT ACCUMULATION REACHED SIZE OF THE FABRIC HEIGHT.

U.S. DEPARTMENT OF AGRICULTURE PAGE E-15-3 MARYLAND DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES WATER MANAGEMENT ADMINISTRATION

**DETAIL 24 - STABILIZED CONSTRUCTION ENTRANCE**

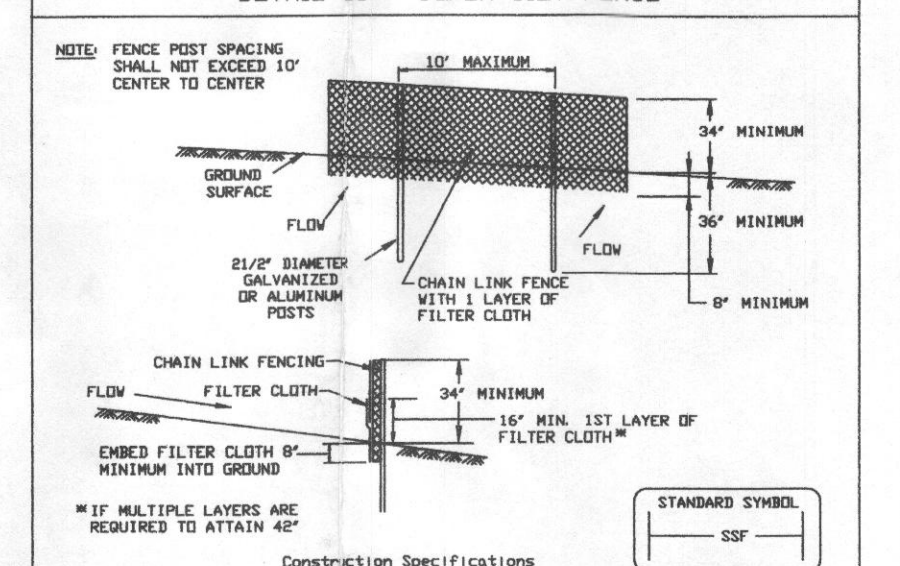


**CONSTRUCTION SPECIFICATIONS**

- LENGTH - MINIMUM OF 50' (30' FOR SINGLE RESIDENCE LOT).
- WIDTH - 10' MINIMUM, SHOULD BE FLARED AT THE EXISTING ROAD TO PROVIDE A TURNING RADIUS.
- GEOTEXTILE FABRIC (FILTER CLOTH) SHALL BE PLACED OVER THE EXISTING ROAD PRIOR TO CONSTRUCTION. HOUSING APPLICATOR AUTHORITY MAY NOT REQUIRE SINGLE FAMILY RESIDENCES TO USE GEOTEXTILE.
- STONE - CRUSHED AGGREGATE (0.5" TO 3" OR RECLAIMED OR RECYCLED CONCRETE EQUIVALENT) SHALL BE PLACED AT LEAST 4" DEEP OVER THE LENGTH AND WIDTH OF THE ENTRANCE.
- SURFACE WATER - ALL SURFACE WATER FLOWING TO OR OVER THE TOWARD CONSTRUCTION ENTRANCES SHALL BE PIPED THROUGH THE ENTRANCE, MAINTAINING POSITIVE DRAINAGE. PIPE INSTALLED THROUGH THE STABILIZED CONSTRUCTION ENTRANCE SHALL BE PROTECTED WITH A MOBILE BERM WITH 5:1 SLOPES AND A MINIMUM OF 8" OF STONE OVER THE PIPE. PIPE HAS TO BE SIZED ACCORDING TO THE DRAINAGE WHEN THE SIZE IS LOCATED AT A HIGH SPOT AND HAS NO DAMAGE TO CONCRETE A PIPE WILL NOT BE NECESSARY. PIPE SHOULD BE SIZED ACCORDING TO THE AMOUNT OF RUNOFF TO BE CONVEYED. A 6" MINIMUM WILL BE REQUIRED.
- 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.

U.S. DEPARTMENT OF AGRICULTURE PAGE F-17-3 MARYLAND DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES WATER MANAGEMENT ADMINISTRATION

**DETAIL 33 - SUPER SILT FENCE**

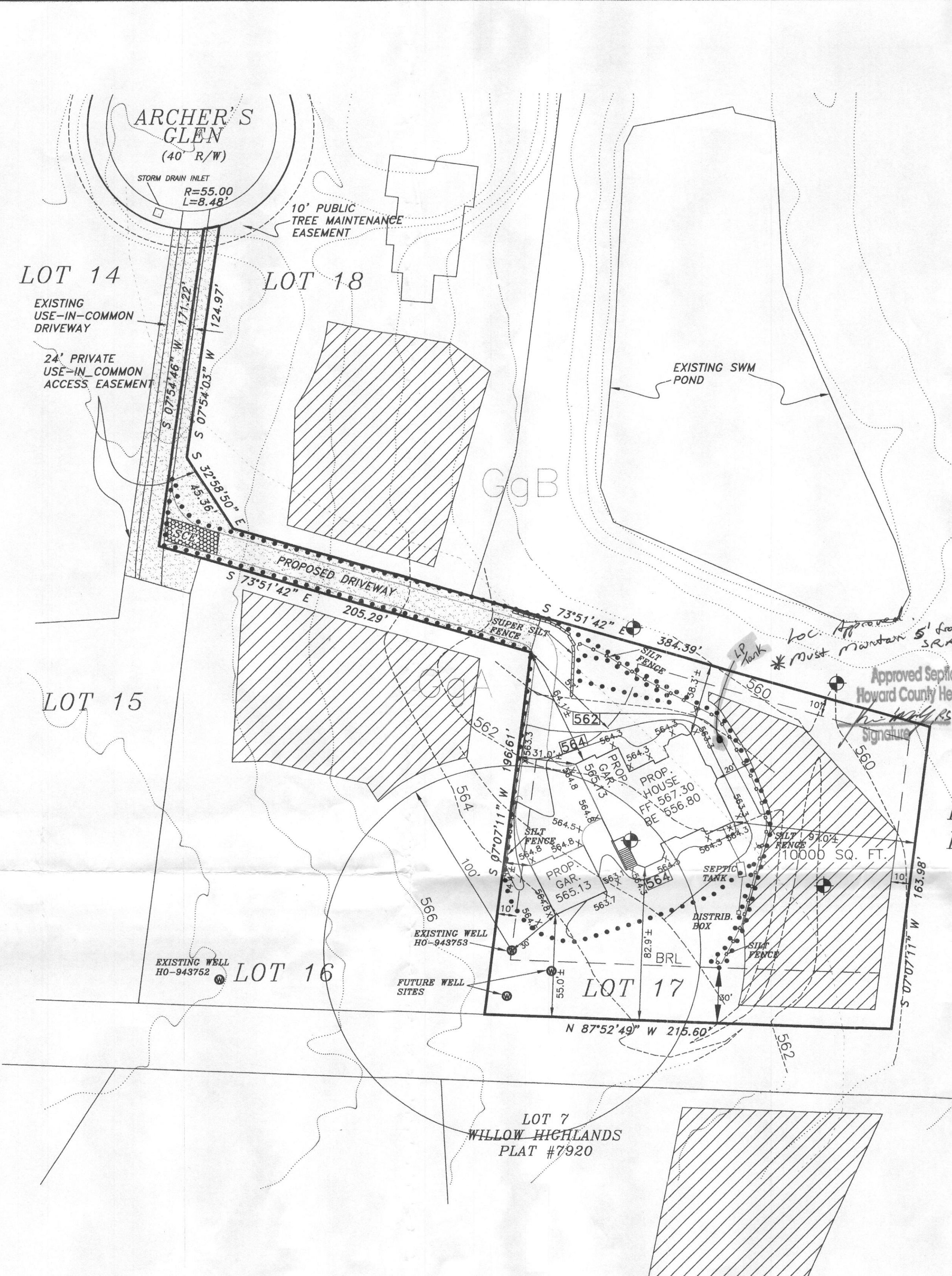


**CONSTRUCTION SPECIFICATIONS**

- Fencing shall be 40" in height and constructed in accordance with the latest Maryland State Highway Details For Drain Link Fencing. The Specification for a 6" fence shall be used, substituting 40" fabric and 6" length posts.
- Chain link fence shall be fastened securely to the fence posts with wire ties. The lower tension wire, brace and lower rods, drive anchors and post caps are not required except on the ends of the fence.
- Filter cloth shall be fastened securely to the chain link fence with ties spaced every 24" at the top and mid section.
- Filter cloth shall be embedded a minimum of 8" into the ground.
- When two sections of filter cloth adjoin each other, they shall be overlapped by 6" and folded.
- Maintenance shall be performed as needed and silt bulge removed when "bulgers" develop in the silt fence, or when silt reaches size of fence height.
- 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 'F':

TENSILE STRENGTH	50 LBS/IN (MIN.)	TEST: MGMT 509
TENSILE MODULUS	20 LBS/IN (MIN.)	TEST: MGMT 509
FLOW RATE	0.3 GAL/FT <sup>2</sup> /MINUTE (MAX.)	TEST: MGMT 322
FILTERING EFFICIENCY	75% (MIN.)	TEST: MGMT 322

U.S. DEPARTMENT OF AGRICULTURE PAGE E-15-3 MARYLAND DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES WATER MANAGEMENT ADMINISTRATION



- NOTES:**
- TOPOGRAPHY SHOWN WITHIN THE LOT ITSELF WAS FIELD RUN BY SHANABERGER & LANE IN APRIL 2004. TOPOGRAPHY SHOW OUTSIDE THE LOT IS FROM HOWARD COUNTY TOPO MAPS.
  - THIS AREA DESIGNATES A PROPOSED PRIVATE SEWAGE DISPOSAL AREA AS REQUIRED BY THE MD STATE DEPT. OF THE ENVIRONMENT FOR INDIVIDUAL SEWAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED. THIS SEWAGE DISPOSAL AREA SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT ADJUSTMENTS TO THE PRIVATE SEWAGE DISPOSAL AREA.
  - DESIGNATES EXISTING OR PROPOSED WELL LOCATION  
 DESIGNATES PROPOSED HOUSE LOCATION  
 DESIGNATES FIELD-RUN CONTOURS  
 DESIGNATES CONTOURS DERIVED FROM HOWARD COUNTY TOPO MAPS  
 DESIGNATES PROPOSED CONTOUR  
 DESIGNATES PROPOSED SPOT ELEVATION  
 DESIGNATES PROPOSED DRIVEWAY  
 DESIGNATES EXISTING DRIVEWAY  
 DESIGNATES EXISTING PRIVATE USE-IN-COMMON ACCESS EASEMENT  
 DESIGNATES PROPOSED SILT FENCE  
 DESIGNATES PROPOSED SUPER SILT FENCE  
 DESIGNATES LIMIT OF DISTURBANCE
  - BEARINGS, DISTANCES, AND ACREAGE SHOWN HEREON ARE FROM AVAILABLE PLAT OF RECORD.
  - ANY CHANGES TO A PRIVATE SEWAGE EASEMENT SHALL REQUIRE A REVISED PERC CERTIFICATION PLAN.
  - PROPERTY IS ZONED RC-DEO.
  - TOTAL AREA DISTURBED 19,447 SQ. FT.±
  - GRAVITY SEWER SERVICE TO BASEMENT LEVEL IS NOT PROVIDED. AN EJECTOR PUMP WILL BE USED.
  - STORMWATER MANAGEMENT BY EXTENDED DETENTION FACILITY WAS PROVIDED BY F-03-70.

**SEPTIC SYSTEM DATA**

<b>HOUSE</b>	
INV. AT HOUSE	561.0
<b>SEPTIC TANK</b>	
EX. GRADE	562.9
FIN. GRADE	562.9
INV. IN	560.56
INV. OUT	560.23
<b>DISTRIBUTION BOX</b>	
EX. GRADE	562.2
FIN. GRADE	562.2
INV. IN	558.2
AN EJECTOR PUMP WILL BE USED.	
DIST. BOX & TRENCH INVERTS, NUMBER & LENGTH OF TRENCHES, TO BE DETERMINED BY BUREAU OF ENVIRONMENTAL HEALTH	

**SEQUENCE OF CONSTRUCTION**

- OBTAIN GRADING PERMIT. (3 weeks)
- INSTALL STABILIZED CONSTRUCTION ENTRANCE AND SILT FENCE (2 days)
- EXCAVATE FOR FOUNDATION, ROUGH GRADE AND TEMPORARILY STABILIZE. (3 weeks)
- CONSTRUCT HOUSE, UTILITY CONNECTIONS, AND DRIVEWAY. (20 weeks)
- FINAL GRADE AND STABILIZE IN ACCORDANCE WITH STANDARDS & SPECIFICATIONS. (2 weeks)
- UPON APPROVAL OF THE SEDIMENT CONTROL INSPECTOR, REMOVE SEDIMENT AND EROSION CONTROL DEVICES AND STABILIZE. (1 week)

THIS DEVELOPMENT PLAN IS APPROVED FOR SOIL EROSION AND SEDIMENT CONTROL BY THE HOWARD COUNTY SOIL CONSERVATION DISTRICT.

*John R. Blanton*  
 HOWARD SCD  
 DATE 11/4/10

**DEVELOPER'S CERTIFICATE**

I CERTIFY THAT ALL DEVELOPMENT AND/OR CONSTRUCTION WILL BE DONE ACCORDING TO THESE PLANS, AND THAT ANY RESPONSIBLE PERSONNEL INVOLVED IN THE CONSTRUCTION PROJECT WILL HAVE A CERTIFICATE OF ATTENDANCE AT A DEPARTMENT OF NATURAL RESOURCES 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.

NAME AND TITLE DATE

**CONSULTANT'S CERTIFICATE**

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

*Scott Shanaberger*  
 G. SCOTT SHANABERGER  
 PROFESSIONAL L.S. #10849  
 DATE 11/12/10

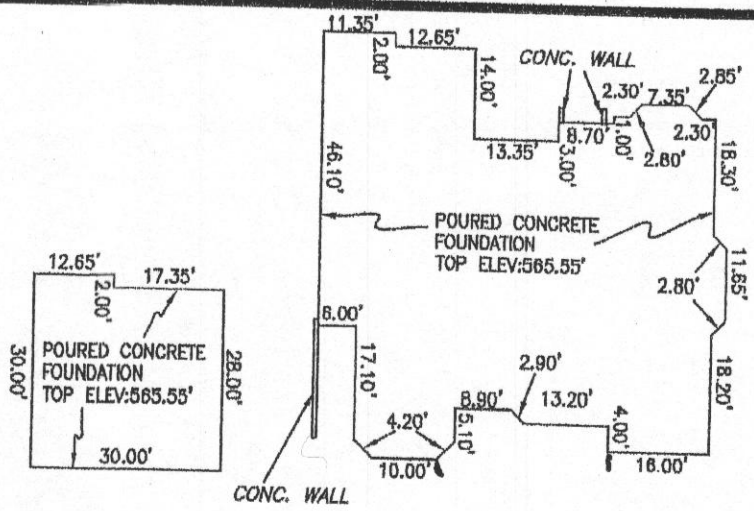
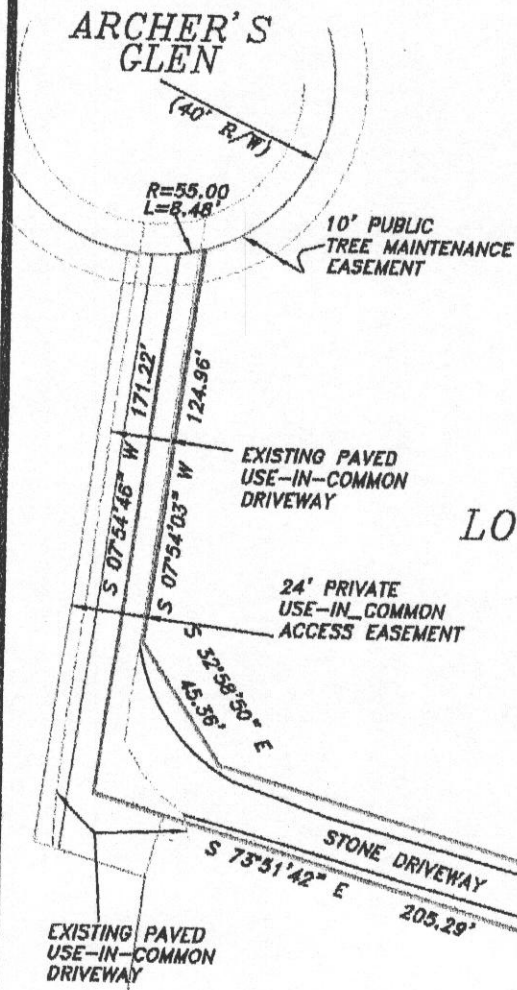
**SHANABERGER & LANE**  
 8726 TOWN & COUNTRY BLVD.  
 SUITE 201  
 ELLICOTT CITY, MD. 21043  
 PHONE: 410-461-9563  
 FAX: 410-461-9693

**DEVELOPER**  
 VIKING DEVELOPMENT  
 816 WINDRIVER DR.  
 SYKESVILLE, MD 21784  
 (410) 977-2188

GP-10-46  
 GRADING, EROSION, & SEDIMENT CONTROL PLAN  
**ARCHER'S GLEN - LOT 17**  
 1743 ARCHER'S GLEN  
 SYKESVILLE, MD. 21784  
 PLAT #16456 F-03-70  
 DEED REF: 8031/429  
 TAX MAP 9 GRID 22 PARCEL 301 LOT 17  
 3RD ELECTION DIST. HOWARD COUNTY, MD.  
 SCALE: 1"=40' 12/15/2009 REV. 1/12/2009

**NOTES:**

1. ACCURACY OF BUILDING MEASUREMENTS: 0.1'
2. ACCURACY OF SETBACK DIMENSIONS: 0.2'
3. ACCURACY OF BUILDING ELEVATIONS: 0.2'
4. THE PROPERTY SHOWN HEREON LIES IN ZONE "NO SPECIAL FLOOD HAZARD AREAS" AS SHOWN ON FLOOD INSURANCE RATE MAP NO: 240044 0009B(UNPRINTED)



**DETAIL**  
SCALE: 1" = 30'

**APPROVED**  
**WALK-THRU BUILDING PERMIT**  
BP# \_\_\_\_\_ A# \_\_\_\_\_  
APP. SAN Kevin Wall DATE: 5/7/15  
DESC. OF WORK: Prepared  
Inground as shown  
**PRESERVATION**  
**PARCEL "C"**

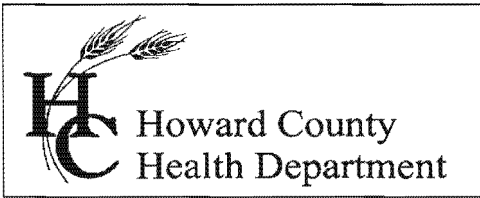
*Note:*  
If we encounter well line during excavation, it will be moved safely out of the way & called back in for re-inspection.

**PRESERVATION**  
**PARCEL "C"**

THE INFORMATION SHOWN HAS BEEN ESTABLISHED BY CURRENT ACCEPTABLE SURVEY PROCEDURES AND FROM AVAILABLE RECORD INFORMATION. THIS DRAWING IS TO BE USED FOR TITLE TRANSFER FINANCING OR REFINANCING ONLY AND IS NOT TO BE USED FOR THE ESTABLISHMENT OF PROPERTY LINES, LOCATION OF FENCES, GARAGES, BUILDINGS, OR OTHER EXISTING OR FUTURE IMPROVEMENTS. IT DOES NOT PROVIDE ACCURATE IDENTIFICATION OF PROPERTY LINES; SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR TITLE TRANSFER, FINANCING, OR REFINANCING. IT WAS PREPARED UNDER MY DIRECT SUPERVISION IN ACCORDANCE WITH SEC. 16.13.06.06. OF THE ANNOTATED CODE OF MD.

**SHANABERGER & LANE**  
8726 TOWN AND COUNTRY BLVD., SUITE 201  
ELLCOTT CITY, MD. 21043  
(410)461-9563 FAX: (410)461-9693

**FOUNDATION LOCATION DRAWING**  
**LOT 17**  
**ARCHERS GLEN PLAT #16546**  
**#1743 ARCHER'S GLEN**  
DEED REFERENCE: 12320/525  
TAX MAP 9 GRID 22 PARCEL 301  
3RD ELECTION DISTRICT HOWARD COUNTY, MD  
SCALE: 1"=60' DATE: MARCH 29, 2010  
DATE OF LATEST FIELD WORK: 03/29/10



7178 Columbia Gateway Drive, Columbia MD 21046  
(410) 313-2640 Fax (410) 313-2648  
TDD (410) 313-2323 Toll Free 1-866-313-6300  
website: [www.hchealth.org](http://www.hchealth.org)

Peter L. Beilenson, M.D., M.P.H., Health Officer

**MEMORANDUM**

TO: Valley National Gas  
ATTN: William Gerwig

FROM: Kevin M. Wolf, R.E.H.S./R.S. *(KMW)*  
Well and Septic Program  
Groundwater Management Section

RE: BP Plan # B10002757  
1743 Archers Glen, Lot 17  
*Install Propane Tank*

DATE: September 20<sup>th</sup>, 2010

The following comments apply to the above referenced plan. The Building Permit has been placed on hold. Please revise and resubmit prior to approval:

- The well location you have shown on the building permit plan is inaccurate. The location you have shown for the proposed LP tank on the submitted plan is in the actual location of the current existing well serving this dwelling. Please refer to the correct surveyed plan showing proper surveyed well locations and re-submit the plan for approval.

Well to below ground Liquid Propane Tank	100'
Septic Reserve Area to Liquid Propane Tank	5'
Septic Tank to Liquid Propane Tank	5'

KW  
C.C. File