

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
 2430 COURT HOUSE DRIVE
 ELLICOTT CITY, MD 21043
 PERMITS (410)313-2455 INSPECTIONS (410)313-1810
 AUTOMATED INFORMATION (410) 313-3800

**HOWARD COUNTY
 PERMIT APPLICATION**

PERMIT NUMBER

B00125594

Building Address 1227 HERB PROSEY
FREDERICK RD., ELLICOTT CITY
 Suite/Apt. #: N/A SDP/WP/Petition #: N/A
 Census Tract 0030 Subdivision HC33
 Section N/A Area N/A Lot 8
 Tax Map 15 Parcel 39 Grid 10
 Zoning RR-DFC Map Coordinates 10F1 Lot size

Property Owner's Name ENCLAVE L.L.C.
 Address 4231 LINTHICUM RD.
 City DAYTON State MD Zip Code 21036
 Home Phone 41531-3137 Work Phone 41531-8105
 Applicant's Name & Mailing Address, (if other than stated herein):
STEPHEN P. GRIFFIN
 Phone M 41984-6944 Fax 41531-8070

Existing Use VACANT LOT
 Proposed Use CONSTRUCTION TRAILER
 Estimated Construction Cost \$ 20,000
 Description of Work PLACE 12x54 TEMPORARY
CONSTRUCTION TRAILER PER
PLOT PLAN W/DECK & STEPS

Contractor Company THE GRIFFIN GROUP
 Contact Person STEVE GRIFFIN # 4211
 Address 4231 LINTHICUM RD
 City DAYTON State MD Zip Code 21036
 License No. _____
 Phone 410 984 6944 Fax 410 531 8070

Occupant or Tenant STEPHEN P. GRIFFIN
 Contact Name ABOVE
 Address 4231 LINTHICUM RD.
 City DAYTON State MD Zip Code 21036
 Phone 531 3137 Fax 531 8070

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

BUILDING DESCRIPTION - COMMERCIAL		BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics	Utilities	Building Characteristics	Utilities
Height: _____	Water Supply: _____ Public _____ Private _____	SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: _____ Public _____ Private _____
No. of stories: _____	Sewage Disposal: _____ Public _____ Private _____	1st floor: _____ 2nd floor: _____ Basement: _____	Sewage Disposal: _____ Public _____ 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"/>	Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms _____	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"/>	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"/>
Construction type: Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ State Certified Modular _____	Sprinkler system: N/A <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____	Other Structure: _____ Dimensions: _____ Footings: _____ Roof: _____ State Certified Modular _____ Manufactured Home _____	Sprinkler system: N/A <input type="checkbox"/> NFPA #13D _____ NFPA #13R _____ 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 THERE TO; (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 THE PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

[Signature]
 Applicant's Signature
 Title/Company _____

STEPHEN P. GRIFFIN
 Print Name
7/21/00
 Date

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

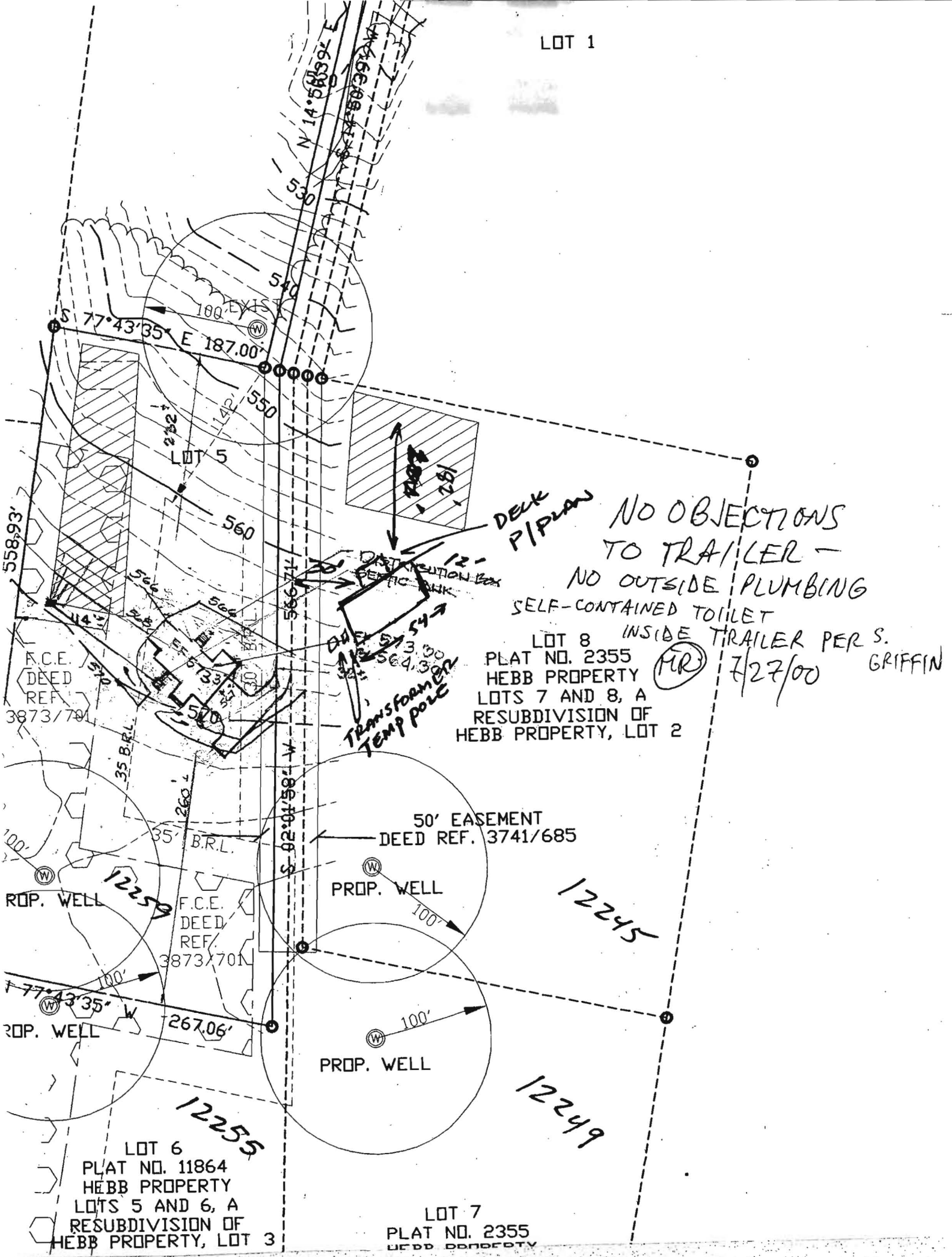
AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official		
Dev. Engineering, DPZ	<u>7/27/00</u>	<u>[Signature]</u>
Health		
Fire Protection		

Is Sediment Control approval required prior to issuance?
 YES NO

CONTINGENCY CONSTRUCTION START:
 ONE STOP SHOP:

DPZ SETBACK INFORMATION	PROPERTY ID#:
Front: _____	<u>47271</u>
Rear: _____	Filing fee \$ <u>100.00</u>
Side: _____	Permit fee \$ _____
Side St.: _____	Excise tax \$ _____
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Add'l permit fee \$ _____
Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
Lot Coverage for New Town Zone _____	Balance due \$ _____
SDP/Red-line approval date _____	Check # <u>2279</u>
Accepted by _____	Validation # _____

LOT 1



DECK PIPING

NO OBJECTIONS TO TRAILER - NO OUTSIDE PLUMBING SELF-CONTAINED TOILET

LOT 8 INSIDE TRAILER PER S. GRIFFIN

PLAT NO. 2355
HEBB PROPERTY
LOTS 7 AND 8, A RESUBDIVISION OF HEBB PROPERTY, LOT 2

MR 7/27/00

F.C.E. DEED REF. 3873/791

35' B.R.L.

260.4

F.C.E. DEED REF. 3873/701

ROP. WELL

12259

50' EASEMENT
DEED REF. 3741/685

PROP. WELL

PROP. WELL

LOT 6
PLAT NO. 11864
HEBB PROPERTY
LOTS 5 AND 6, A RESUBDIVISION OF HEBB PROPERTY, LOT 3

LOT 7
PLAT NO. 2355
HEBB PROPERTY

12245

12249

HOWARD COUNTY
PERMIT APPLICATION

PERMIT NUMBER

300152729

Building Address 12245 FACEDRICK RD.
ELLICOTT CITY, MD. 21042-1
Suite/Apl. #: JAY ED #03-321479 SDP/WP/Petition #: _____
Census Tract 6030 Subdivision HEBB PROPERTIES
Section _____ Area _____ Lot 8
Tax Map 15 Parcel 39 Grid 18
Zoning RR-OED Map Coordinates 10P4 Lot size 4.147 AC.

Property Owner's Name RAJU VARGHES
Address 4091 km 4231 LINTHICUM RD.
City DAYTON State MD Zip Code 21036
Home Phone (410) 461-551 Work Phone N/A
Applicant's Name & Mailing Address, (if other than stated hereon):
Phone 410 461-531-8105 Fax (410) 531-8070

Existing Use VACANT LOT
Proposed Use NEW SINGLE FAMILY RESIDENCE
Estimated Construction Cost \$ 850,000
Description of Work SINGLE FAMILY HOME 6 BEDROOM, 8 BATH, A 4 CAR GARAGE, WALKOUT BASEMENT, ALL BRICK

Contractor Company THE GRATTIUM GROUP LLC
Contact Person STEVE GRIFFIN
Address 11231 LINTHICUM RD.
City DAYTON State MD Zip Code 21036
License No. 1307
Phone (410) 531-8105 Fax (410) 531-8070

Occupant or Tenant N/A
Contact Name _____
Address _____
City _____ State _____ Zip Code _____
Phone _____ Fax _____

Engineer or Architect Company FISHER COLLINS CARTER
Contact Person BAIAN LUCASALCIT
Address 10272 BALT. NAT'L. PIKE.
City ELLICOTT CITY State MD Zip Code 21042
Phone (410) 461-2855 Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics		Utilities	
Height:		Water Supply:	
No. of stories:		Public <input type="checkbox"/>	
Gross area, sq. ft. per floor:		Private <input type="checkbox"/>	
Use group:		Sewage Disposal:	
Construction type:		Public <input type="checkbox"/>	
Reinforced Concrete <input type="checkbox"/>		Private <input type="checkbox"/>	
Structural Steel <input type="checkbox"/>		Electric Yes <input type="checkbox"/> No <input type="checkbox"/>	
Masonry <input type="checkbox"/>		Gas Yes <input type="checkbox"/> No <input type="checkbox"/>	
Wood Frame <input type="checkbox"/>		Heating System:	
State Certified Modular <input type="checkbox"/>		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"/>	
		Full <input type="checkbox"/>	
		Partial <input type="checkbox"/>	
		Other Suppression <input type="checkbox"/>	
		# of Heads _____	

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 ON TO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature [Signature]
Title/Company PRINCIPAL, THE GRATTIUM GROUP LLC

Print Name STEPHEN P. GRIFFIN
Date 3-21-05

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	PROPERTY ID#
Land Development, DPZ			Front: _____	Filing fee \$ <u>100</u>
State Highways			Rear: _____	Permit fee \$ _____
Building Official			Side: _____	Excise tax \$ _____
City Engineering, DPZ			Side St: _____	Add'l per. fee \$ _____
Env. Protection			All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
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"/>	Sub-total paid \$ _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
ONE STOP SHOP: <input type="checkbox"/>			Lot Coverage for New Town Zone _____	Check # <u>4376</u>
Number of Copies: White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA			SDP/Red-line approval date _____	Validation # <u>51380</u>
Accepted by _____				

Frederick Rd

B06030013

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVE
ELLICOTT CITY, MD 21040
PERMITS (410) 313-2455 INSPECTIONS (410) 313-1810
AUTOMATED INFORMATION (410) 313-3800

HOWARD COUNTY
PERMIT APPLICATION

PERMIT NUMBER

B00159967

Building Address 12245 ~~Frederick Rd~~
ELLICOTT CITY MD 21043
Suite/Apt. #: _____ SDP/WP/Petition #: _____
Census Tract 6030 Subdivision Hebb Property
Section _____ Area _____ Lot 8
Tax Map 15 Parcel 39 Grid 18
Zoning RR-DEO Map Coordinates 1057 Lot size _____

Property Owner's Name RAJU VARGHESE
Address 12245 Rt. 144
City ELLICOTT CITY State MD Zip Code 21043
Home Phone 410-461-1061 Work Phone _____
Applicant's Name & Mailing Address, (if other than stated hereon):
Phone _____ Fax _____

Existing Use SFO
Proposed Use W/TRANS
Estimated Construction Cost \$ 7800.00
Description of Work INSTALL 1500 LAUNDERGROUND PROPANE TANK AND LINES

Contractor Company THOMPSON GAS
Contact Person JANU BLEDZU
Address P.O. BOX 157
City BOON HARBOR State MD Zip Code 21113
License No. GAS OILCH
Phone 301-422-6611 Fax 301-422-7147

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 _____ Private _____
No. of stories: _____	Sewage Disposal: _____ Public _____ 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: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ 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"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: _____ Public _____ Private <input checked="" type="checkbox"/>
1st floor: _____	Sewage Disposal: _____ Public _____ Private <input checked="" 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"/>
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Natural Gas <input type="checkbox"/>
No. of Bedrooms _____	Propane Gas <input checked="" type="checkbox"/>
Height: _____	Sprinkler system: N/A <input type="checkbox"/> NFPA #13D _____ NFPA #13R _____ 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: _____	
State Certified Modular _____	
Manufactured Home _____	

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Applicant's Signature _____
Title/Company _____

Print Name _____
Date 4/1/06

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 Planning		
Building Official		
Dev. Engineering, DPZ		
Health	<u>4/9/06</u>	<u>[Signature]</u>
Fire Protection		
Is Sediment Control approval required prior to issuance?		
YES <input type="checkbox"/> NO <input type="checkbox"/>		
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>		
ONE STOP SHOP: <input type="checkbox"/>		
Distribution of Copies	White: Building Official	Green: LDD, DPZ

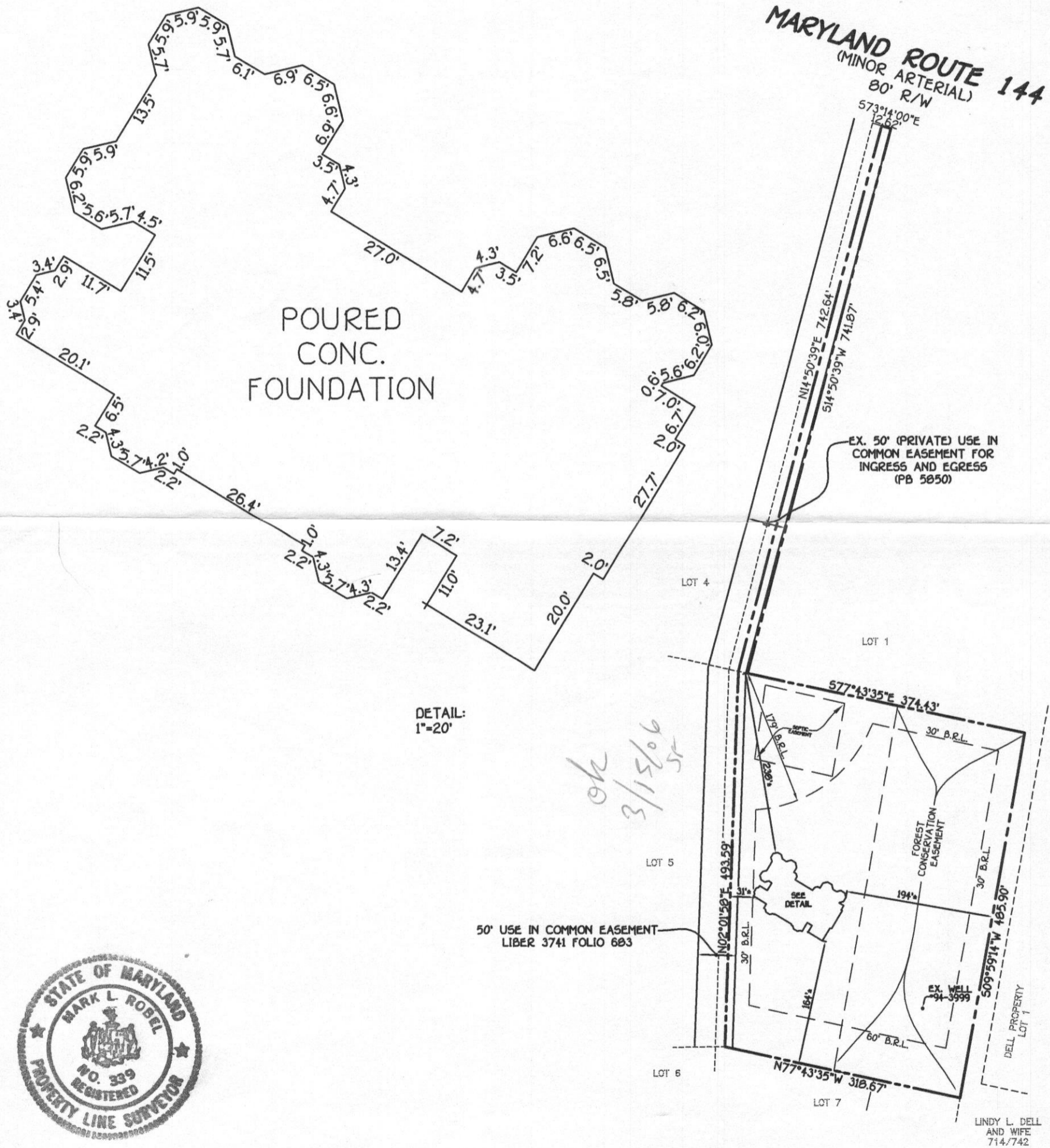
DPZ SETBACK INFORMATION	PROPERTY INFO
Front: _____	Filing fee \$ _____
Rear: _____	Permit fee \$ <u>100.00</u>
Side: _____	Excise tax \$ <u>10.00</u>
Side St: _____	Add'l per. fee \$ _____
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ <u>110.00</u>
Is 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 \$ _____
Let Coverage for New Town Zone _____	Check \$ <u>95.31</u>
SDP/Red-line approval date _____	Validation \$ <u>115.925</u>
Accepted by <u>[Signature]</u>	

47271

GENERAL NOTES:

VARGHESE
HARTFIELD/HEBB

- 1) THIS LOCATION DRAWING IS PREPARED FOR THE BENEFIT OF THE CLIENT SIGNING THE HOUSE LOCATION SURVEY APPROVAL FORM INsofar AS IT IS REQUIRED BY A LENDER OR TITLE INSURANCE COMPANY OR ITS AGENTS IN CONNECTION WITH THE CONTEMPLATED TRANSFER, FINANCING OR REFINANCING OF THE PROPERTY SHOWN HEREON. UNLESS INDICATED AS BEING A BOUNDARY SURVEY, THIS LOCATION DRAWING IS NOT INTENDED FOR USE IN THE ESTABLISHMENT OF PROPERTY LINES AND IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATIONS OF FENCES, GARAGES, BUILDINGS OR OTHER EXISTING OR FUTURE IMPROVEMENTS. AS A RESULT, THIS LOCATION DRAWING DOES NOT PROVIDE FOR ACCURATE IDENTIFICATION OF PROPERTY LINES, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING FOR RE-FINANCING.
- 2) SUBJECT PROPERTY IS SHOWN IN ZONE C ON THE NATIONAL FLOOD INSURANCE PROGRAM FLOOD INSURANCE RATE MAP OF HOWARD COUNTY, MARYLAND, COMMUNITY PANEL No. 2400440015B/2400440016B EFFECTIVE DEC. 4, 1986.
- 3) THE OFFSETS FROM BUILDING LINE TO PROPERTY LINE AS SHOWN ON THE PLAT HEREON ARE TO AN ACCURACY OF PLUS OR MINUS 1' (±)
- 4) NO TITLE REPORT FURNISHED. SUBJECT TO ALL EASEMENTS, RIGHTS OF WAY AND CONDITIONS OF RECORD.
- 5) THE EXISTING WELL(S) SHOWN ON THIS PLAN (IDENTIFIED WITH THE ATTACHED WELL TAG NUMBER HO-94 -3999) HAS BEEN FIELD LOCATED BY FISHER, COLLINS AND CARTER, INC. PROFESSIONAL LAND SURVEYORS AND IS ACCURATELY SHOWN.



DETAIL:
1"=20'

ok
3/15/06
sr



HOUSE LOCATION DRAWING

Mark L. Robel 6/30/05
PROFESSIONAL LAND SURVEYOR DATE
REG. # 339

FOUNDATION LOCATION: 06/29/05
FINAL LOCATION: _____
BOUNDARY SURVEY: _____

SCALE: 1"=150'
DATE: 06/30/05
DRAWN BY: VLJ
CHECKED BY: MLR
PROJECT No.: 04131-6001

VARGHESE
LOT 8
HEBB PROPERTY
LOTS 7 AND 8
A RESUBDIVISION OF
HEBB PROPERTY, LOT 2
THIRD ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
PLAT #12355

*12245 FREDERICK ROAD
B.R.L.= BUILDING RESTRICTION LINE
TOP OF FOUNDATION ELEV.= 574.0±

LINDY L. DELL
AND WIFE
714-742

FISHER, COLLINS & CARTER, INC.
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS
CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE
ELLCOTT CITY, MARYLAND 21042
(410) 461-2895

Drawing Name: