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DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3430 COURT HOUSE DRIVE ELLICOTT CITY, MD 21043 PERMITS (410) 313-2455 INSPECTIONS (410) 313-1810 AUTOMATED INFORMATION (410) 313-3800	HOWARD COUNTY PERMIT APPLICATION	PERMIT NUMBER B0900 3238
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Building Address 4820 Cartledge Rd  
Ellicott City, Md. 21042

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

Census Tract 603000 Subdivision Riverwood

Section \_\_\_\_\_ Area \_\_\_\_\_ Lot 45

Tax Map 29 Parcel 20 Grid 4

Zoning RC04 Map Coordinates \_\_\_\_\_ Lot size 51,686 sq ft

Property Owner's Name Winchester Homes

Address 6905 Rock Lodge Dr #800

City Bethesda State MD Zip Code 20817

Phone \_\_\_\_\_ Phone 301-803-4180

Applicant's Name & Mailing Address, (if other than stated hereon):  
410 \_\_\_\_\_ Coral Vireo

Phone 279-1624 Fax \_\_\_\_\_

Existing Use Vacant

Proposed Use SFD

Estimated Construction Cost \$ 350,000

Description of Work Belmont w/3 car  
side load garage 2 story full bsmt.  
1.8, 3 FB, 1 HA, FP, 4 BR

Contractor Company Winchester Homes

Contact Person Andrew Campbell

Address Same As Above

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

License No. 87

Phone 301-803-4803 Fax \_\_\_\_\_

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

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

Address \_\_\_\_\_

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

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

Engineer or Architect Company Benchmark Eng

Contact Person John Carey

Address 8480 Baltimore National Pike

City Ellicott City State MD Zip Code 21041

Phone 410-465-6105 Fax 410-465-6644

BUILDING DESCRIPTION - <u>COMMERCIAL</u>	BUILDING DESCRIPTION - <u>RESIDENTIAL</u>
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<p><b>Building Characteristics</b></p> <p>Height: _____</p> <p>No. of stories: _____</p> <p>Gross area, sq. ft. per floor: _____</p> <p>Use group: _____</p> <p>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</p>	<p><b>Utilities</b></p> <p>Water Supply:  <input type="checkbox"/> Public  <input type="checkbox"/> Private</p> <p>Sewage Disposal:  <input type="checkbox"/> Public  <input type="checkbox"/> Private</p> <p>Electric Yes <input type="checkbox"/> No <input type="checkbox"/>          Gas Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Heating System:          Electric <input type="checkbox"/> Oil <input type="checkbox"/>          Natural Gas <input type="checkbox"/>          Propane Gas <input type="checkbox"/></p> <p>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 _____</p>
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<p><b>Building Characteristics</b></p> <p>SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/>          Depth Width</p> <p>1st floor: _____          2nd floor: _____          Basement: _____</p> <p>Finished Basement <input checked="" type="checkbox"/> Unfinished Basement <input type="checkbox"/>  <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>          No. of Bedrooms <u>4</u>          Height: _____          Multi-family dwellings:          No. of efficiency units: _____          No. of 1 BR units: _____          No. of 2 BR units: _____          No. of 3 BR units: _____</p> <p>Other Structure: _____          Dimensions: _____          Footings: _____          Roof Height: _____</p> <p><input type="checkbox"/> State Certified Modular  <input type="checkbox"/> Manufactured Home</p>	<p><b>Utilities</b></p> <p>Water Supply:  <input type="checkbox"/> Public  <input checked="" type="checkbox"/> Private</p> <p>Sewage Disposal:  <input type="checkbox"/> Public  <input checked="" type="checkbox"/> Private</p> <p>Electric Yes <input type="checkbox"/> No <input type="checkbox"/>          Gas Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Heating System:          Electric <input type="checkbox"/> Oil <input type="checkbox"/>          Natural Gas <input type="checkbox"/>          Propane Gas <input type="checkbox"/></p> <p>Sprinkler system: N/A <input type="checkbox"/>  <input type="checkbox"/> NFPA #13D  <input type="checkbox"/> NFPA #13R  <input type="checkbox"/> Other: _____</p>
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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 Carol Vireo Print Name Carol Vireo

Title/Company \_\_\_\_\_ Date 11-24-09

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>100.00</u>
State Highways			Rear: _____	Permit fee \$ _____
Building Official			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ			Side St.: _____	Add'l per. fee \$ _____
Health <u>1/8/2010</u>		<u>R. Buckner</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?			Is Entrance Permit required?	Balance due \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # <u>2192</u>
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Historic District?	Validation # _____
ONE STOP SHOP: <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	
Distribution of Copies- White: Building Official Green: LDD, DPZ			Lot Coverage for NewTown Zone _____	Accepted by _____
T:\forms\PERMIT.FRM			SDP/Red-line approval date _____	Yellow: DED, DPZ Pink: Health Gold: SHA

*Wal K. Shum*

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) 313-3800	<b>HOWARD COUNTY PERMIT APPLICATION</b>	<b>PERMIT NUMBER</b> <i>B10002603</i>
Building Address <i>4820 CASTLE BRIDGE RD. ELLICOTT CITY, MD 21042</i>	Property Owner's Name <i>WINCHESTER HOMES</i>	Address <i>6905 ROCKLEDGE DR. STE 800</i>
Suite/Apt. #: _____ SDP/WP/Petition #: _____	City <i>BETHESDA</i> State <i>MD</i> Zip Code <i>20817</i>	Home Phone _____ Work Phone _____
Census Tract _____ Subdivision _____	Applicant's Name & Mailing Address, (if other than stated herein): _____	
Section _____ Area _____ Lot <i>45</i>	Phone _____ Fax _____	
Tax Map <i>29</i> Parcel <i>20</i> Grid <i>4</i>	Contractor Company <i>T&amp;A CONTRACTORS, INC</i>	
Zoning _____ Map Coordinates _____ Lot Size _____	Contact Person <i>DALE VOLATO</i>	
Existing Use <i>SFA</i>	Address <i>4512 SANDY SPRING RD.</i>	
Proposed Use <i>CONSTRUCT DECK</i>	City <i>BURTONSVILLE</i> State <i>MD</i> Zip Code <i>20866</i>	
Estimated Construction Cost \$ <i>8,000</i>	License No <i>MDIC 17489</i>	
Description of Work <i>CONSTRUCT 26x14 OPEN DECK W/ STAIRS</i>	Phone <i>301/924-2111</i> Fax <i>301/549-4264</i>	
Occupant or Tenant _____	Engineer or Architect Company _____	
Contact Name <i>T&amp;A CONTRACTORS, INC</i>	Contact Person _____	
Address <i>4512 SANDY SPRING RD.</i>	Address _____	
City <i>BURTONSVILLE</i> State <i>MD</i> Zip Code <i>20866</i>	City _____ State _____ Zip Code _____	
Phone <i>301/924-2111</i> Fax _____	Phone _____ Fax _____	

BUILDING DESCRIPTION - COMMERCIAL		BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics	Utilities	Building Characteristics	Utilities
Height: <i>3'</i>	Water Supply: _____ Public _____ Private _____	SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: _____ Public _____ Private _____
No. of stories: <i>1</i>	Sewage Disposal: _____ Public _____ Private _____	Depth _____ Width _____	Sewage Disposal: _____ Public _____ Private _____
Gross area, sq. ft. per floor: <i>3424</i>	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>	1 <sup>st</sup> floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>	2 <sup>nd</sup> floor: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ <input checked="" type="checkbox"/> 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"/>	Basement: _____ Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <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: <i>N/A</i> <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____	No. of Bedrooms: _____	Sprinkler system: <i>N/A</i> <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: _____	
		State Certified Modular _____ 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.

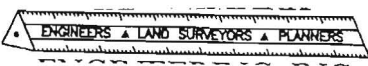
Applicant's Signature: *[Signature]* Print Name: *JOHN J. SEKELY*  
 Email Address: *JOHNS@SUNDECKS.BY.TANDA.COM*

Title/Company: \_\_\_\_\_ Date: *8/26/2010*

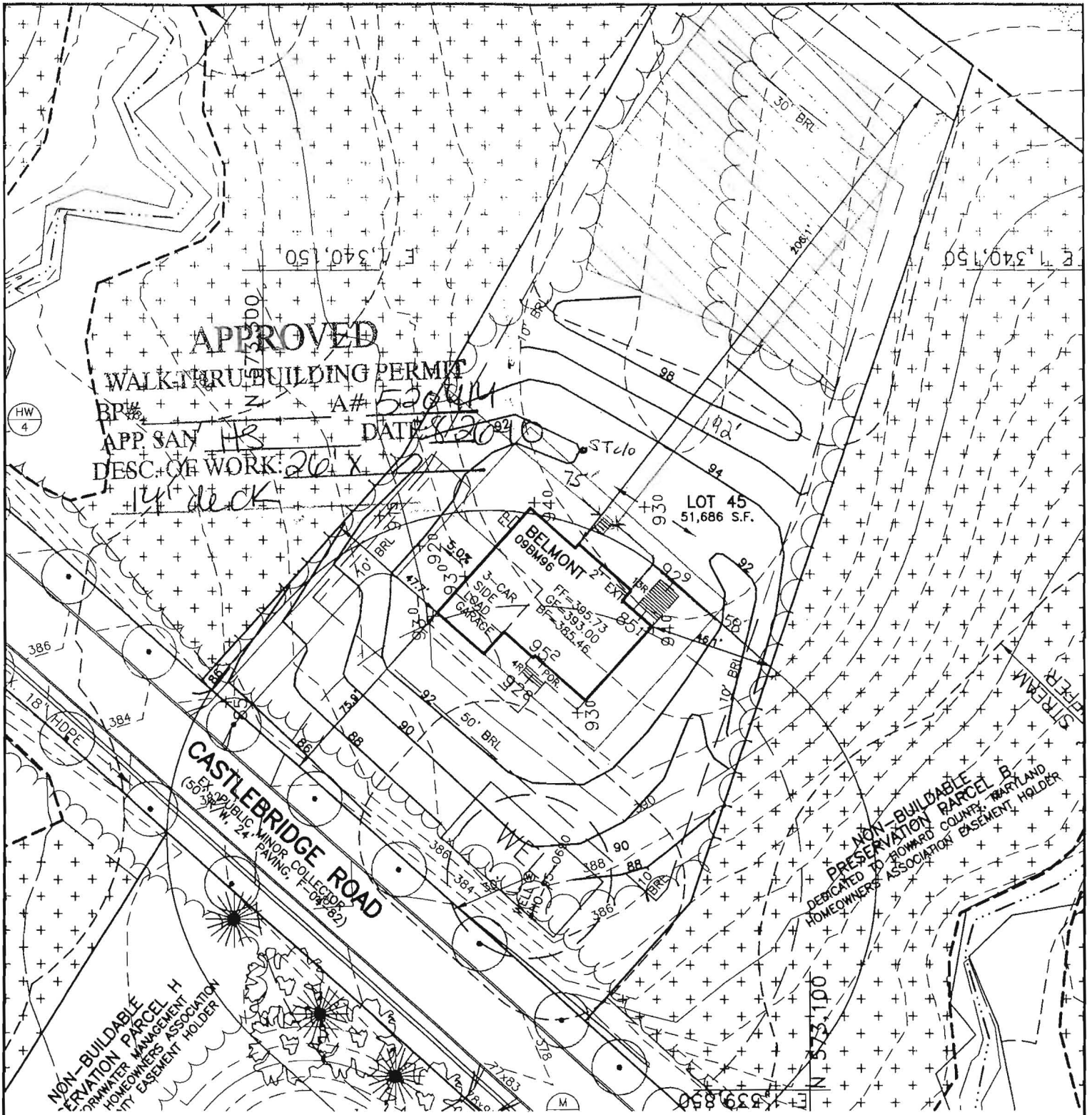
Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY  
 \*\*PLEASE WRITE NEATLY AND LEGIBLY\*\*

AGENCY	DATE	SIGNATURE APPROVAL	FOR OFFICE USE ONLY	PROPERTY ID #
Land Development, DPZ			DPZ SETBACK INFORMATION	
State Highways			Front: _____	Filing fee \$ _____
Building Officials			Rear: _____	Permit fee \$ _____
Dev. Engineering, DPZ			Side: _____	Excise tax \$ _____
Health	<i>8/26/10</i>	<i>[Signature]</i>	Side St: _____	Add'l per fee \$ _____
Fire Protection			All minimum setbacks met?	TOTAL FEES \$ _____
Is Sediment Control approval required prior to issuance?			YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
			Is Entrance Permit Required?	Balance due \$ _____
			YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # _____
			Historic District?	Validation # _____
			YES <input type="checkbox"/> NO <input type="checkbox"/>	
			Lot Coverage for New-Town Zone	
			SDP/Red-line approval date _____	Accepted by _____

Distribution of Copies - White: Building Officials Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA



ADDITIONAL REMARKS: \_\_\_\_\_  
 THIRD ELECTION DISTRICT  
 HOWARD COUNTY, MARYLAND



**APPROVED**  
**WALKOUT BUILDING PERMIT**  
 BP# \_\_\_\_\_ A# 520011  
 APP SAN HS DATE 8/20/04  
 DESC. OF WORK: 20' x 14' deck

**BELMONT**  
 09BM96  
 FF=305.73  
 GF=393.00  
 BF=385.46  
 3-CAR SIDE-LOAD GARAGE  
 2' REAR EXT.

**CASTLEBRIDGE ROAD**  
 (50'-3" W. 24' PAVING. F-04/92)

**NON-BUILDABLE PRESERVATION PARCEL B**  
 DEDICATED TO HOWARD COUNTY, MARYLAND HOMEOWNERS ASSOCIATION EASEMENT HOLDER

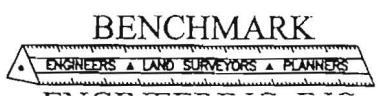
ITEM	RESPONSE	REMARKS
ADDITIONAL CLEARING	NO	FROM INTERIM PLAN
HOUSE OFF PAD	NO	-
RAISED HOUSE	YES	BASEMENT PER ARCH.
LOWERED HOUSE	NO	-
DRIVEWAY % CHANGE	NO	-
CURB CUT CHANGE	NO	-
HOUSE WITHIN BRL	YES	-
REVISED FRONT/SIDE/REAR/DIMENSIONS	YES	PER ARCH.
ASKED FOR AS-BUILT TOPO ON ADJACENT LOTS (EXAMPLE: IF LOTS ARE SODDEN, ETC.)	NO	-
NOTE ANY GRADES UNDER 4%	YES	SWALE SLOPES 3%
DO IMPERVIOUS AREA MEET REQUIREMENT	YES	-

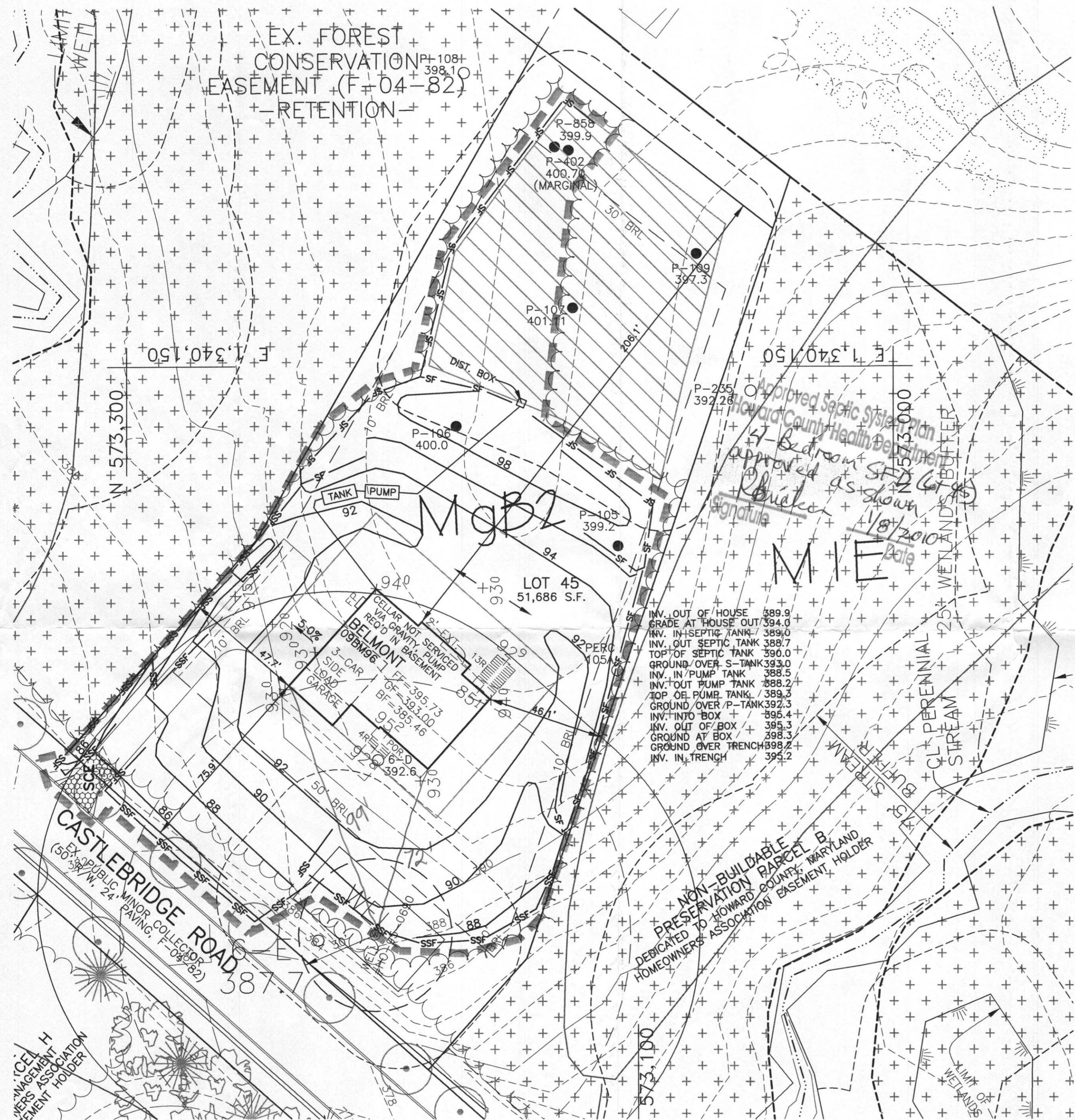
# RIVERWOOD

## LOT 45

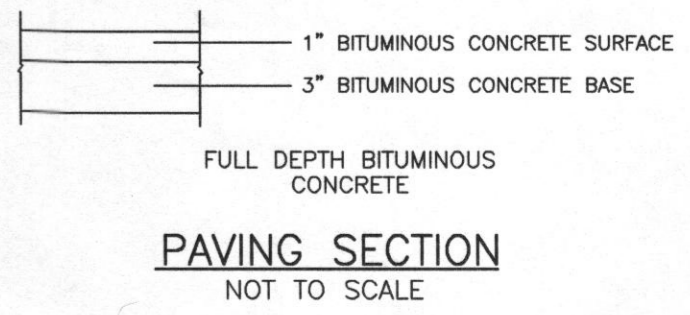
MODEL: BELMONT  
 ELEVATION: 09BM96  
 WALKOUT: NO  
 REVERSERED: NO  
 OPTIONS: 3 CAR GAR., REAR EXT.

ORDERED BY: ANDREW CAMPBELL  
 SITED BY: JOHN CARNEY  
 ADDITIONAL REMARKS: -





- NOTES:**
1. THE LOT SHOWN HEREON WAS RECORDED ON THE PLAT FOR RIVERWOOD, PLAT No. 19721. REFER TO THE PLAT FOR LOT DIMENSIONS, LOT AREAS AND ALL EASEMENTS.
  2. THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF 10,000 SQUARE FEET AS REQUIRED BY THE STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWERAGE 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 SEWERAGE EASEMENT PLAT SHALL NOT BE NECESSARY.
  3. SEDIMENT AND EROSION CONTROLS WERE APPROVED BY HOWARD SOIL CONSERVATION DISTRICT UNDER GP-05-31 AND MODIFIED FOR THIS SPECIFIC HOUSE.
  4. TOPOGRAPHY SHOWN HEREON IS TAKEN FROM THE APPROVED ROAD CONSTRUCTION PLANS AND HAS BEEN FIELD VERIFIED BY J.A. RICE, INC., ON OR ABOUT SEPTEMBER 2002.
  5. EXACT LENGTH OF SEPTIC TRENCHES ARE TO BE DETERMINED BY THE HEALTH DEPARTMENT AT THE TIME OF TRENCH LAYOUT AND INSPECTION.
  6. SPOIL FROM THE TRENCHING OF THE SEPTIC AREA IS TO BE PLACED ON THE UPHILL SIDE OF THE EXCAVATION FOR EACH INDIVIDUAL LOT.
  7. ALL SEDIMENT AND EROSION CONTROL FEATURES USED ON THIS SITE SHALL COMPLY WITH 1994 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL.
  8. ALL DRAINAGE AND STORMWATER MANAGEMENT FEATURES USED ON THIS SITE MUST COMPLY WITH THE APPROVED ROAD CONSTRUCTION PLANS.
  9. SEPTIC TANK FOR THIS LOT TO BE 2,000 GALLONS.
  10. THE EXISTING WELL SHOWN ON THIS PLAN, HO-95-0690, HAS BEEN FIELD LOCATED BY BENCHMARK ENGINEERING, INC. AND IS ACCURATELY SHOWN.
  11. THERE ARE NO EXISTING WELLS OR SEPTIC SYSTEMS WITHIN 100' OF THIS PROJECT'S BOUNDARY EXCEPT AS NOTED.
  12. ANY CHANGES TO A PRIVATE SEWERAGE EASEMENT SHALL REQUIRE A REVISED PERCOLATION CERTIFICATION PLAN.
  13. STORMWATER MANAGEMENT FOR THIS LOT IS PROVIDED IN POND #4 OF F-04-082, A WET ED POND.
  14. THE TOTAL LIVING SPACE FOR LOT 45 IS 3,793 S.F.



**LEGEND**

- EXISTING CONTOURS ESTABLISHED UNDER F-04-082
- FIELD SURVEYED WELL LOCATION
- PASSED PERCOLATION TEST PER TEST NOTES
- FAILED PERCOLATION TEST PER TEST NOTES
- EXISTING APPROVED SEPTIC RESERVE AREA
- PROPOSED RESERVE SEPTIC RESERVE AREA

- INV. OUT OF HOUSE 389.9
- GRADE AT HOUSE OUT 394.0
- INV. IN SEPTIC TANK 389.0
- INV. OUT SEPTIC TANK 388.7
- INV. OF SEPTIC TANK 390.0
- TOP OF SEPTIC S-TANK 393.0
- GROUND OVER S-TANK 388.5
- INV. IN PUMP TANK 388.2
- INV. OUT PUMP TANK 389.3
- TOP OF PUMP TANK 392.3
- GROUND OVER P-TANK 395.4
- INV. INTO BOX 395.3
- INV. OUT OF BOX 398.3
- GROUND AT BOX 398.7
- GROUND OVER TRENCH 393.2
- INV. IN TRENCH 393.2

**BENCHMARK**  
ENGINEERS ▲ LAND SURVEYORS ▲ PLANNERS

**ENGINEERING, INC.**

8480 BALTIMORE NATIONAL PIKE ▲ SUITE 418  
ELLCOTT CITY, MARYLAND 21043  
PHONE: 410-465-6105 ▲ FAX: 410-465-6644  
EMAIL: benchmark@ccis.com

<p>OWNER/BUILDER:</p> <p>CAMBERLEY HOMES, INC. 6905 ROCKLEDGE DRIVE SUITE 800 BETHESDA, MD 20817 PHONE: 301-803-4800 FAX: 301-803-4929</p>	<p>PROJECT:</p> <p style="text-align: center;"><b>RIVERWOOD LOT 45</b></p> <p>LOCATION: 4820 CASTLEBRIDGE ROAD ELLCOTT CITY, MD 21042 TAX MAP No. 29 - BLOCK Nos. 3, 4, 9 &amp; 10 - PARCEL No. 20 3rd ELECTION DISTRICT, HOWARD COUNTY, MARYLAND</p> <p>TITLE: <b>BUILDING PERMIT PLAN</b></p> <p>HOUSE TYPE: <b>BELMONT</b></p> <p>DATE: JANUARY, 2010 PROJECT NO. 1950</p> <p>SCALE: 1" = 30' DRAWING 1 OF 1</p>
DESIGN: JMC	DRAFT: JMC

