



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: 1/19/16

Permit No.: B/1600291

Building Address: 16105 ED WORTHILL RD
 City: Woodbine State: MD Zip Code: 21797
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: ORLDALE
 Section: _____ Area: _____ Lot: 4
 Tax Map: 13 Parcel: 356 Grid: 23
 Zoning: _____ Map Coordinates: _____ Lot Size: 1.00 AC

Existing Use: SFD
 Proposed Use: SFD w/ propane tank
 Estimated Construction Cost: \$ 4000
 Description of Work: Install propane tank in ground propane tank

Occupant or Tenant: _____
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Property Owner's Name: SMITH FARRINGTON
 Address: 13813 POINE BELLE TR
 City: Dayton State: MD Zip Code: 21036
 Phone: _____ Fax: _____
 Email: _____

Applicant's Name & Mailing Address, (If other than stated herein)
 Applicant's Name: Jeremy Clonney
 Address: PO Box 310
 City: Perry Hall State: MD Zip Code: 21128
 Phone: 410-313-1329 Fax: _____
 Email: micuelli@AppliedandApproved.com

Contractor Company: Town Hill
 Contact Person: C. Nelson Harris
 Address: 11018 N MAIN RD
 City: Harrodsburg State: MD Zip Code: 21074
 License No.: 4605
 Phone: 410-239-9515 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 checked="" 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:	
	<input type="checkbox"/> Finished Basement	
Use group:	<input type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
Construction type:	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:	
<input type="checkbox"/> Structural Steel	Multi-family Dwelling	
<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 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 type="checkbox"/> No
Gas: <input type="checkbox"/> Yes <input checked="" 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: _____ Print Name: Jeremy Clonney
 Email Address: micuelli@AppliedandApproved.com Date: 1/19/16
 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>2/25/16</u>	<u>[Signature]</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	\$ <u>100.00</u>
Tech Fee	\$ <u>10.00</u>
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$ <u>110.00</u>
Sub-Total Paid	\$ <u>110.00</u>
Balance Due	\$
Check	# <u>000-4215</u>



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: 2/2/15

Permit No.: B15000412

Building Address: 1605 BR WASHINGTON ST
 City: ROCKVILLE State: MD Zip Code: 20797
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: _____
 Section: _____ Area: _____ Lot: A
 Tax Map: _____ Parcel: _____ Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: VACANT LOT
 Proposed Use: SFD
 Estimated Construction Cost: \$ 750,000
 Description of Work: NEW HOME CONSTRUCTION, 2900 SQ FT, 2 CAR GARAGE, 2.5 BATH
 Occupant or Tenant: _____
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Property Owner's Name: BUY + BUILD
 Address: 7715 GARDEN LANE
 City: FALLS CHURCH State: VA Zip Code: 22034
 Phone: 703-418-4882 Fax: _____
 Email: BUY+BUILD@GMAIL.COM

Applicant's Name & Mailing Address, (If other than stated herein)
 Applicant's Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Contractor Company: _____
 Contact Person: BUY + BUILD (OWNER)
 Address: 7715 GARDEN LANE
 City: FALLS CHURCH State: VA Zip Code: 22034
 License No.: _____
 Phone: _____ Fax: _____
 Email: _____

Engineer/Architect Company: JACK ANGLIS
 Responsible Design Prof.: TRACY ANGLIS
 Address: 7310 SOUTH HAVEN
 City: TRUCKEE State: CA Zip Code: 96166
 Phone: 1700 824 3505 Fax: _____
 Email: WWW.JACKANGLIS.COM

Commercial Building Characteristics	Residential Building Characteristics	
Height:	<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories:	Depth	Width
Gross area, sq. ft./floor:	1 st floor: <u>113 x 65</u>	2 nd floor: <u>50 x 32</u>
Area of construction (sq. ft.):	Basement: <u>113 x 65</u>	
Use group:	<input type="checkbox"/> Finished Basement	
	<input checked="" type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
Construction type:	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms: <u>3</u>	
<input type="checkbox"/> Structural Steel	Multi-family Dwelling	
<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:	
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 type="checkbox"/> No	
Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Heating System	
<input checked="" type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
Sprinkler System:	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number:	<u>G15000035</u>
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: [Signature]
 Email Address: BUY+BUILD@GMAIL.COM
 Title/Company: _____

Print Name: BUY + BUILD
 Date: 2/2/15

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>7/1/15</u>	<u>H. OSWALD</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	\$ <u>100.00</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	# <u>3310</u>

Oswald, Hank

From: Oswald, Hank
Sent: Monday, February 23, 2015 11:08 AM
To: [REDACTED]
Subject: B15000412_16105 Ed Warfield Road
Attachments: Septic Spec Workesheet_16105 Ed Warfield Road.pdf; BAT Site Plan Requirements.pdf; Perc Cert.pdf

Guy Farruggia:

This email is in response to building permit B150004112. The application describes the construction of a single family home. Upon review of the building permit and site plan, the submittal did not include a copy of the floor plans and a BAT plan.

Attachments:

- Sewage Disposal System Specification Sheet
- BAT Site Plan Requirement
- Perc Cert

Building permit approval is being withheld until a revised site plan showing septic components, floor plans and a BAT plan have been forwarded to the Health Department for review and approval. Should you have any questions, please don't hesitate to ask.

Respectfully,

Hank

Hank Oswald, L.E.H.S.
Bureau of Environmental Health
Well & Septic Program

Hank Oswald, L.E.H.S.
Howard County Health Department
Bureau of Environmental Health
Well & Septic Program
410.313.1786

REVISED

Date: 2-18-16

Comments: Revised plan to move tank location

INITIAL SYSTEMS
(2) 70 FT TRENCHES

Approved for UPT
B16000291
RAT 2/25/16

NORWECO
SINGULAR TN
PRECAST CON
ADVANCED TR
SEE DETAIL #1

(2) REF
(3) GO

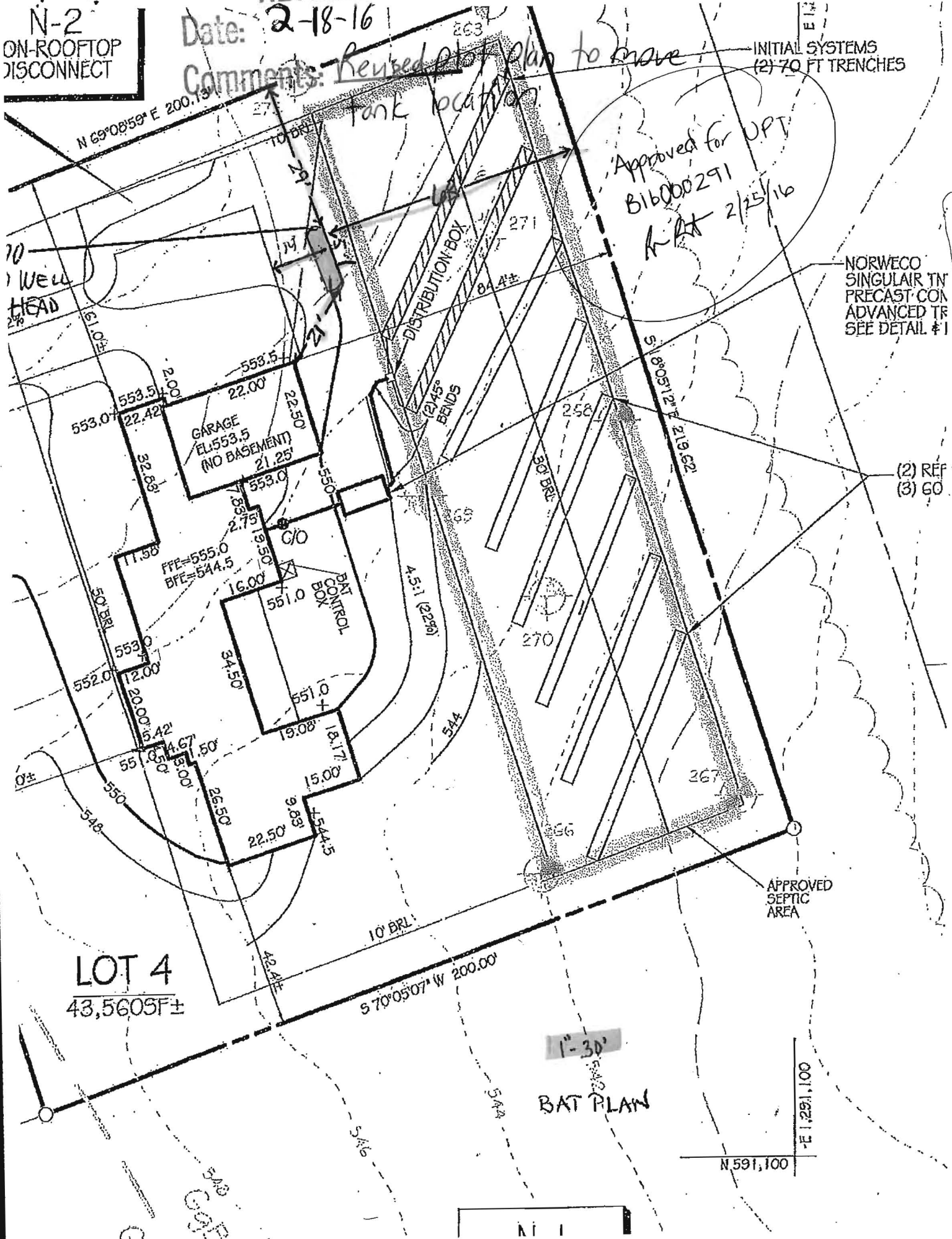
APPROVED
SEPTIC
AREA

BAT PLAN

N-2
ON-ROOFTOP
DISCONNECT

WELL
HEAD

LOT 4
43,560SF±



1" = 30'

N 591,100

E 1,291,100



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 Howard County Maryland
 Department of Inspections, Licenses and Permits
 3430 Court House Drive
 Permits: 410-313-2455
 www.howardcountymd.gov

Date Received: 2/2/15

Permit No.: B15000412

Building Address: 10105 60 WARFIELD ROAD
 City: WOODBINE State: MD Zip Code: 21197
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: _____
 Section: _____ Area: _____ Lot: 4
 Tax Map: _____ Parcel: _____ Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

Property Owner's Name: GUY + NANCY FARRUGGIA
 Address: 9713 GUBEL DRIVE
 City: ELLCOTT CITY State: MD Zip Code: 21042
 Phone: 410-418-4882 Fax: _____
 Email: gfarruggia@artec.com

Applicant's Name & Mailing Address, (If other than stated herein)
 Applicant's Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Existing Use: VACANT LOT
 Proposed Use: SFD
 Estimated Construction Cost: \$ 750,000
 Description of Work: NEW HOME CONSTRUCTION, 2 STORY
3 BR, 3 CAR GARAGE, GREAT RM
DINING, KITCHEN, 2 FULL BATH 2 HALF BATH
 Occupant or Tenant:
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Contractor Company:
 Contact Person: GUY FARRUGGIA (OWNER)
 Address: 9713 GUBEL DRIVE
 City: ELLCOTT CITY State: MD Zip Code: 21042
 License No.: _____
 Phone: _____ Fax: _____
 Email: _____

Engineer/Architect Company: JACK ARNOLD
 Responsible Design Prof.: TREY ARNOLD
 Address: 7310 SOUTH YALE
 City: TOWSON State: OK Zip Code: 74136
 Phone: 18008243965 Fax: _____
 Email: WWW.JACKARNOLD.COM

Commercial Building Characteristics	Residential Building Characteristics
Height:	<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse
No. of stories:	Depth _____ Width _____
Gross area, sq. ft./floor:	1 st floor: <u>113 x 65</u>
	2 nd floor: <u>50 x 50</u>
Area of construction (sq. ft.):	Basement: <u>113 x 65</u>
	<input type="checkbox"/> Finished Basement
Use group:	<input checked="" type="checkbox"/> Unfinished Basement
	<input type="checkbox"/> Crawl Space
	<input type="checkbox"/> Slab on Grade
Construction type:	No. of Bedrooms: <u>3</u>
<input type="checkbox"/> Reinforced Concrete	Multi-family Dwelling
<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 type="checkbox"/> No	
Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Heating System	
<input checked="" type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
Sprinkler System:	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number: <u>G15000035</u>	
Building Shell Permit Number:	

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Applicant's Signature: Guy J Farruggia
 Email Address: GFARRUGGIA@ARTEC.COM
 Title/Company: HOMEOWNER

Print Name: GUY J FARRUGGIA
 Date: 2/2/15
RECEIVED
 FEB 02 2015
 LICENSES & PERMITS DIVISION

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

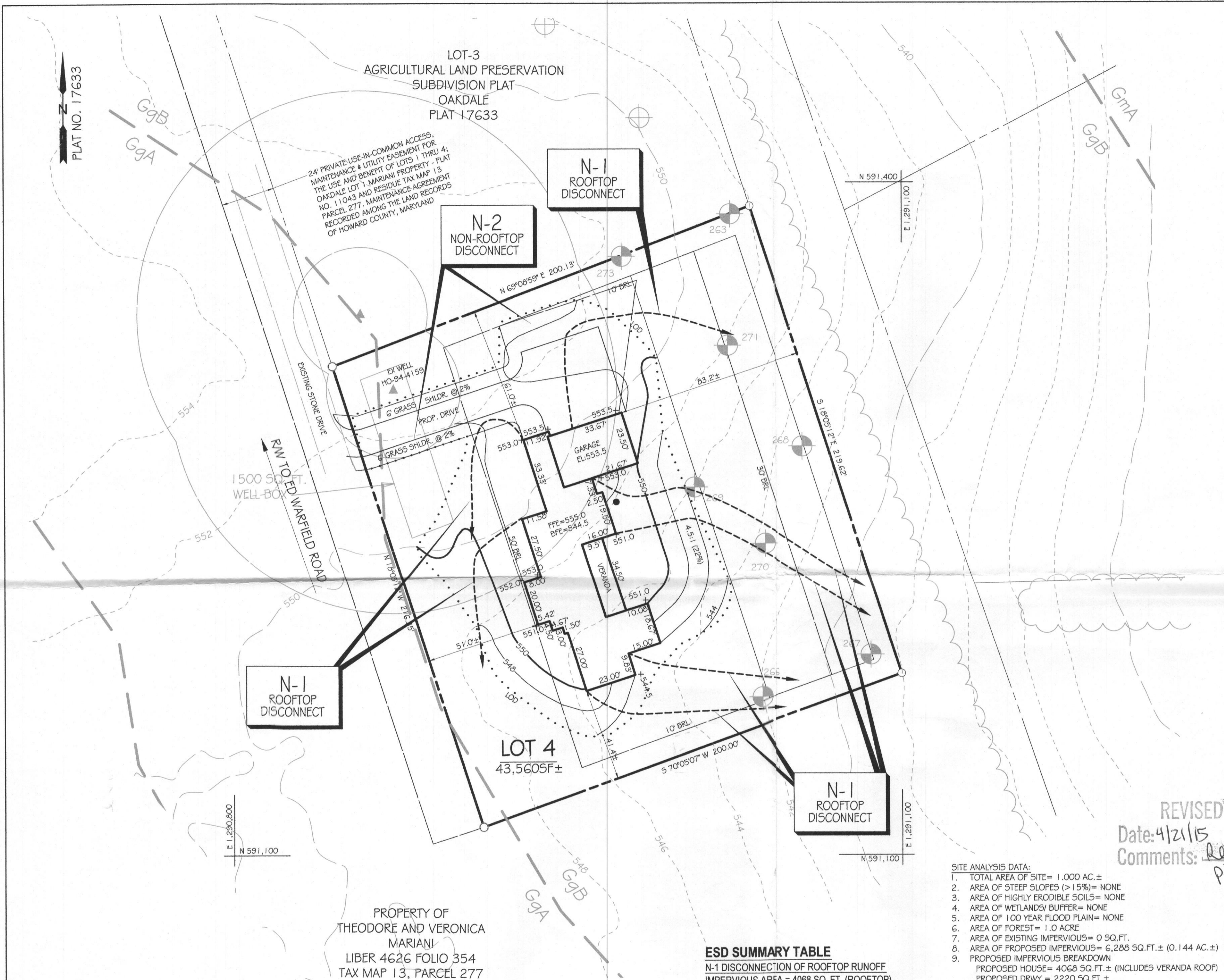
AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health		

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	\$ <u>100.00</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	# <u>3316</u>

Distribution of Copies: White: Building Officials Green: PSZA Zoning Yellow: PSZA, Engineering Pink: Health Gold: SHA
 SIMPLIFIED ECP approved by PT OK per JON WENG



24' PRIVATE USE-IN-COMMON ACCESS, MAINTENANCE & UTILITY EASEMENT FOR THE USE AND BENEFIT OF LOTS 1 THRU 4; OAKDALE LOT 1, MARIANI PROPERTY - PLAT NO. 11043 AND RESIDUE TAX MAP 13 PARCEL 277. MAINTENANCE AGREEMENT RECORDED AMONG THE LAND RECORDS OF HOWARD COUNTY, MARYLAND

1500 SQ. FT. WELL-BO

PROPERTY OF THEODORE AND VERONICA MARIANI
LIBER 4626 FOLIO 354
TAX MAP 13, PARCEL 277

OPERATION AND MAINTENANCE SCHEDULE FOR PRIVATELY OWNED AND MAINTAINED DISCONNECTION OF ROOFTOP RUNOFF (N-1) AND DISCONNECTION OF NON-ROOFTOP RUNOFF (N-2)
A. MAINTENANCE OF AREAS RECEIVING DISCONNECTED RUNOFF IS GENERALLY NO DIFFERENT THAN THAT REQUIRED FOR OTHER LAWN OR LANDSCAPED AREAS. THE OWNER SHALL ENSURE THE AREAS RECEIVING RUNOFF ARE PROTECTED FROM FUTURE COMPACTION OR DEVELOPMENT OF IMPERVIOUS AREA.

ESD SUMMARY TABLE

N-1 DISCONNECTION OF ROOFTOP RUNOFF
 IMPERVIOUS AREA = 4068 SQ. FT. (ROOFTOP)
 Pe = 1 INCH
 ESDv REQUIRED = 339 CU. FT.
 ESDv PROVIDED = 339 CU. FT.

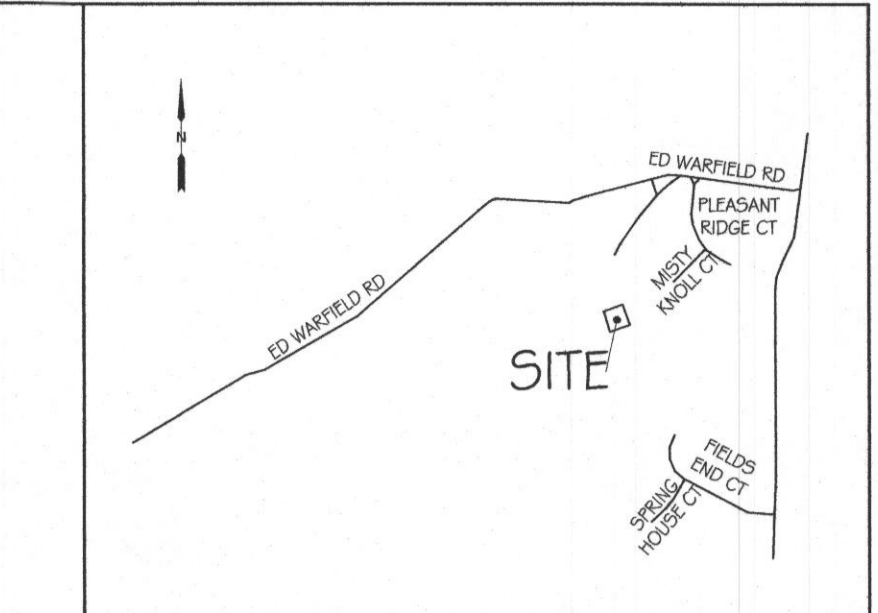
N-2 DISCONNECTION OF NON-ROOFTOP RUNOFF
 IMPERVIOUS AREA = 2220 SQ. FT. (DRIVEWAY)
 ESDv REQUIRED = 185 CU. FT.
 ESDv PROVIDED = 185 CU. FT.

SOILS TABLE

MAP UNIT SYMBOL	MAP UNIT NAME	K FACTOR RATING	HYDROLOGIC GROUP	HIGHLY ERODIBLE	HYDRIC
GgA	GLENELG LOAM, 0 TO 3 PERCENT SLOPES	0.28	B	NO	NO
GgB	GLENELG LOAM, 3 TO 8 PERCENT SLOPES	0.28	B	NO	NO

ON-SITE STORM WATER MANAGEMENT PRACTICES

DISCONNECTION TYPE	IMPERVIOUS AREA TREATED	DRAINAGE AREA
N-1 DISCONNECTION OF ROOFTOP RUNOFF	4068 SQ.FT.	4068 SQ.FT.
N-2 DISCONNECTION OF NON-ROOFTOP RUNOFF	2220 SQ.FT.	2220 SQ.FT.



ADC MAP COORDINATES 4811-H4
VICINITY MAP
 SCALE: 1"=2000'

- GENERAL NOTES:**
- ZONING = RC-DEO
 - TAX MAP: 13, GRID: 23, PARCEL: 356
 - BRL = BUILDING RESTRICTION LINE
 - TOPOGRAPHY SHOWN HEREON IS TAKEN FROM HOWARD COUNTY GIS DATA, (SPRING, 2011) & SUPPLEMENTED WITH FIELD RUN TOPOGRAPHY BY RTF ASSOCIATES, INC. ON OR AROUND SEPTEMBER 2014.
 - ADC MAP COORDINATES = 4811-H4
 - FIELD VERIFICATION OF SITE CONDITIONS AND NATURAL RESOURCES MAP WAS PERFORMED SEPTEMBER 24, 2014 BY RTF ASSOCIATES, INC.
 - ALL AREAS SHOWN HEREON ARE MORE OR LESS.
 - SINCE THIS WAS AN AGRICULTURAL PRESERVATION SUBDIVISION, THE DRIVEWAY SURFACES CAN REMAIN GRAVEL AND SHALL BE A MINIMUM 12 FOOT WIDE FOR USE BY A SINGLE LOT AND A MINIMUM 14' WIDE FOR A SHARED DRIVEWAY.
 - QUANTITY AND QUALITY STORM WATER MANAGEMENT REQUIREMENTS ARE MET BY APPLYING THE ROOFTOP DISCONNECTION AND NON-ROOFTOP DISCONNECTION CREDITS IN ACCORDANCE WITH CHAPTER 5 OF THE 2000 MARYLAND STORM WATER MANAGEMENT DESIGN MANUAL.
 - THIS PROPERTY IS EXEMPT FROM THE REQUIREMENTS OF THE FOREST CONSERVATION PROGRAM IN ACCORDANCE WITH SECTION 16.1202(b)(1)(v) OF THE SUBDIVISION & LAND DEVELOPMENT REGULATIONS BECAUSE THE PROPERTY IS IN THE AGRICULTURAL PRESERVATION PROGRAM.
 - PREVIOUS COUNTY FILE NUMBER F-05-127
 - APPROVAL OF THIS SIMPLIFIED ECP DOES NOT CONSTITUTE AN APPROVAL OF ANY SUBSEQUENT AND ASSOCIATED SUBDIVISION PLAN OR GRADING PERMIT.

TITLE REFERENCE
 GUY J FARRUGGIA
 15355-503
 NOVEMBER 13, 2013

OWNER / DEVELOPER
 GUY J FARRUGGIA
 NANCY J FARRUGGIA
 9713 GUELD DRIVE
 ELLICOT CITY, MD 21043
 443-722-7798

SIMPLIFIED ENVIRONMENTAL CONCEPT PLAN & INDIVIDUAL LOT - RESIDENTIAL SITE PLAN OF LOT - 4 AGRICULTURAL LAND PRESERVATION SUBDIVISION PLAT **OAKDALE** LOTS 1 - 4 AS RECORDED ON PLAT No. 17633 16105 ED WARFIELD ROAD 4TH ELECTION DISTRICT, HOWARD CO. MD TAX MAP: 13, GRID: 23, PARCEL: 356

REVISED
 Date: 4/21/15
 Comments: Revised plot plan

- SITE ANALYSIS DATA:**
- TOTAL AREA OF SITE = 1.000 AC. ±
 - AREA OF STEEP SLOPES (> 15%) = NONE
 - AREA OF HIGHLY ERODIBLE SOILS = NONE
 - AREA OF WETLANDS/ BUFFER = NONE
 - AREA OF 100 YEAR FLOOD PLAIN = NONE
 - AREA OF FOREST = 1.0 ACRE
 - AREA OF EXISTING IMPERVIOUS = 0 SQ. FT.
 - AREA OF PROPOSED IMPERVIOUS = 6,288 SQ. FT. ± (0.144 AC. ±)
 - PROPOSED IMPERVIOUS BREAKDOWN
 PROPOSED HOUSE = 4068 SQ. FT. ± (INCLUDES VERANDA ROOF)
 PROPOSED DRWY. = 2220 SQ. FT. ±
 - TOTAL IMPERVIOUS AREA = 6,288 SQ. FT. ± (0.144 AC. ±)
 - TOTAL AREA OF DISTURBANCE = 18,434 SQ. FT. ±
 - TOTAL AREA OF TREE REMOVAL = 18,434 SQ. FT. ±
 - WATERSHED = 02131108

REVISED 04-14-2015: ADDED VERANDA

John E. Lemmerman
JOHN E. LEMMERMAN
 REGISTERED PROFESSIONAL LAND SURVEYOR NO. 21096
 EXP. 8-3-15



RTF
 ssociates, Inc.
 LAND SURVEYORS & PLANNERS

142 EAST MAIN STREET WESTMINSTER, MD 21157
 410-848-2040 FAX# 443-289-8942 410-876-1222
 EMAIL: RTF142@GMAIL.COM WWW.RTFSSURVEYING.COM

CHECKED BY: JEL DATE: 10-31-2014
 DRAWN BY: SP DATE: 10-30-2014
 SCALE: 1" = 30' R.T.F. JOB # 14-106