

**HOWARD COUNTY
 PERMIT APPLICATION**

PERMIT NUMBER

307001455

Building Address 6555 PAPER PLACE

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

Census Tract _____ Subdivision _____

Section _____ Area _____ Lot _____

Tax Map _____ Parcel _____ Grid _____

Zoning _____ Map Coordinates _____ Lot size _____

Property Owner's Name Shawn Cooke

Address 6555 Paper Pl.

City Highland State MD Zip Code 20777

Home Phone 410 340 4945 Work Phone _____

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

Phone _____ Fax _____

Existing Use SFD

Proposed Use SFD

Estimated Construction Cost \$ _____

Description of Work Deck 19x41 irreg. (900sf)
 w/stairs

Contractor Company Welcome Home Impts.

Contact Person John Manzari

Address 2460 Johnson Mill Rd.

City Forest Hill State MD Zip Code 21050

Licensee No. 82887

Phone 443-752-3455 Fax _____

Occupant or Tenant Shawn Cooke

Contact Name _____

Address Same as above

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Engineer or Architect Company N/A

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"/> 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 _____ Structural Steel _____ Masonry _____ Wood Frame _____ State Certified Modular _____	Sprinkler system: <u>N/A</u> <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input checked="" 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 checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input checked="" 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: <u>N/A</u> <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: _____
Other Structure: _____ Dimensions: _____ Footings: _____ Roof Height: _____	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.

[Signature]
 Applicant's Signature

 Title/Company

John Manzari
 Print Name

4/25/07.
 Date

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

AGENCY	DATE	AGENCY APPROVAL	DEFERRED INFORMATION	PROPERTY ID#
Land Development Dept			Filing fee	\$ _____
			Permit fee	\$ _____
			Excise tax	\$ _____
			Adm'n fee	\$ _____
			TOTAL FEES	\$ _____
			Sub-total paid	\$ _____
			Balance due	\$ _____
			Check	\$ _____
			Void/Cancel	\$ _____
COMMERCIAL CONSTRUCTION START: <input type="checkbox"/> ONE STOP SHOP: <input type="checkbox"/>			Electric District? _____ YES <input type="checkbox"/> NO <input type="checkbox"/>	
Distribution of Copies: _____ Title Building Official _____ Granting LDD, DPZ _____ Planning Dept, DPZ _____ Public Health _____ Civil Eng _____			Use Conversion for New Town Zone _____ SDP/WP/Impr approval date _____ Accepted by _____	

KEENE PROPERTY
 LOT 1
 PLAT 5208
 ZONED RR-DEO

N87°31'23"E

100 Year Floodplain,
 Drainage & Utility Easement
 Plat #12949

LOT 4
 5.67 Ac.

Forest Conservation
 Area, A
 Plat #12949

N02°10'39"W

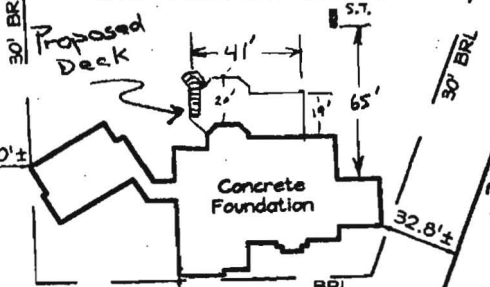
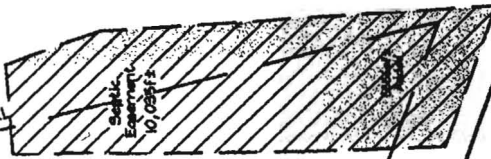
ZONED RR-DEO

894.93'

N02°10'39"W

S02°11'07"E

VANT HOFF PROF
 LOT 2
 PLAT 12949
 ZONED RR-DI



Well #HO-94-3893

S19°26'27"W

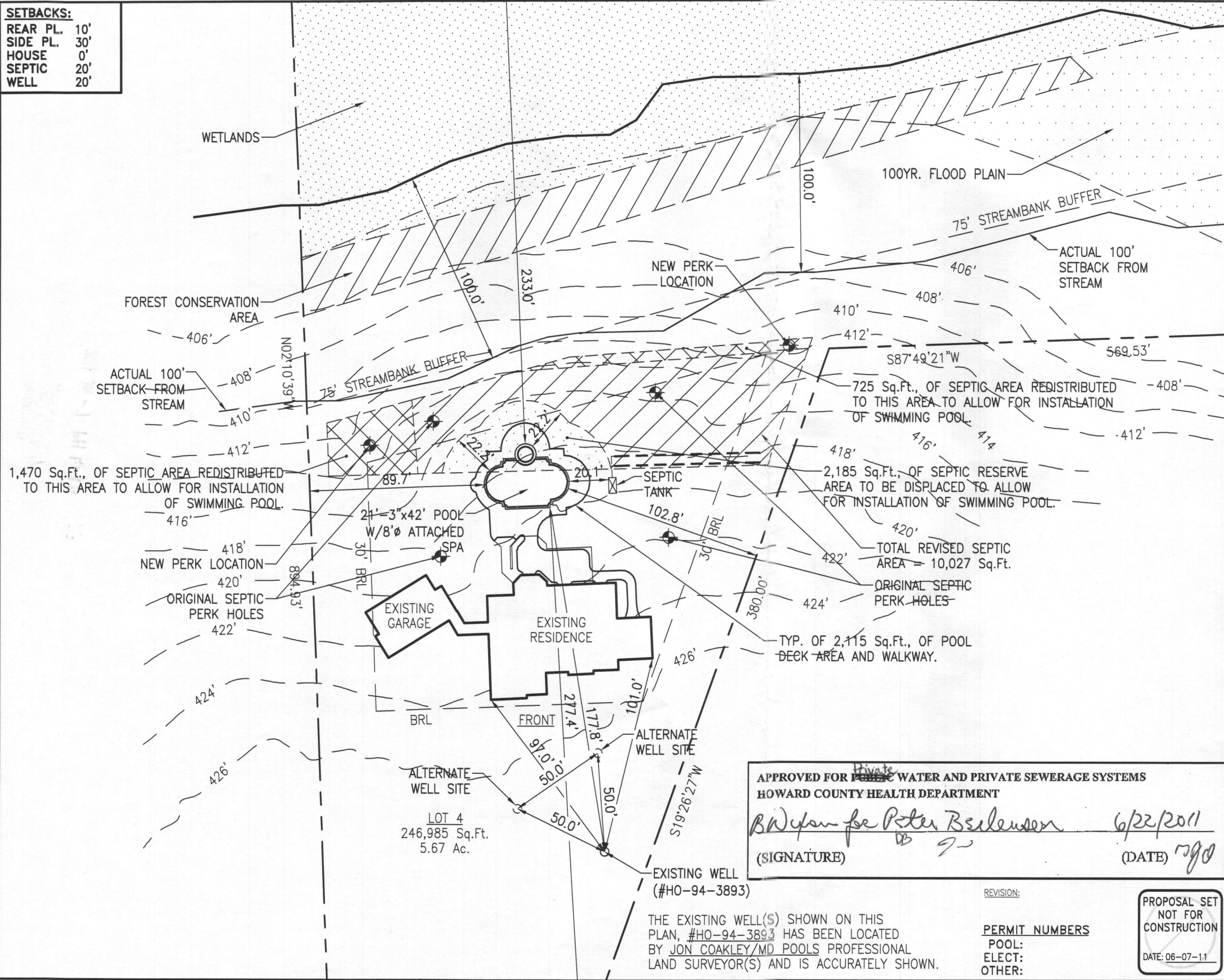
9/7/05
 well check ok
APPROVED
 WALK-THRU BUILDING PERMIT
 BP# 60700115 A#
 APP. SAN *R. B. Walker*
 DESC. OF WORK: concrete deck
 AS SHOWN & APPROX. 900 SF total

PLAN VIEW
 SCALE: 1"=60'

SETBACKS:

REAR PL.	10'
SIDE PL.	30'
HOUSE	0'
SEPTIC	20'
WELL	20'

Maryland POOLS Inc.
 9515 GERWIG LANE SUITE 121 COLUMBIA, MD 21046 410-995-6600
 11166 MAIN STREET SUITE 402 FAIRFAX, VA 22030 703-359-7192
 800-252-SWIM
 WWW.MARYLANDPOOLS.COM



- NOTES**
- ALL EXISTING WELLS ON THE SUBJECT PROPERTY AND WITHIN 100 FEET OF SUBJECT PROPERTY BOUNDARIES ARE REPRESENTED TO THE BEST OF MY KNOWLEDGE AND BELIEF.
 - TOPOGRAPHY ON THIS PLAN IS FROM HOWARD COUNTY (2004) AND IS VERIFIED TO ACCURATELY REPRESENT THE RELATIVE ELEVATION CHANGES ON AND NEAR THE SUBJECT PROPERTY.
 - THE LOT SHOWN HEREON COMPLIES WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREA AS REQUIRED BY THE MARYLAND DEPARTMENT OF ENVIRONMENT.
 - ANY CHANGES TO A PRIVATE SEWAGE EASEMENT SHALL REQUIRE A REVISED PERCOLATION CERTIFICATION PLAN.
 - THIS AREA DESIGNATES A PRIVATE SEWAGE BASEMENT OF AT LEAST 10,000 SQ. FT. AS REQUIRED BY THE MARYLAND DEPARTMENT OF ENVIRONMENT FOR INDIVIDUAL SEWAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS BASEMENT ARE RESTRICTED. THIS EASEMENT SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE AUTHORITY TO GRANT ADJUSTMENTS TO THE PRIVATE SEWAGE EASEMENT. RECORDATION OF A REVISED SEWAGE EASEMENT SHALL NOT BE NECESSARY.
 - THE PURPOSE FOR THIS PERCOLATION CERTIFICATION PLAN IS TO ADJUST THE BOUNDARIES OF THE EXISTING SEPTIC EASEMENT IN SUPPORT OF A BUILDING PERMIT TO CONSTRUCT AN IN-GROUND POOL.

I CERTIFY THAT THE INFORMATION SHOWN HEREON IS BASED ON WORK PERFORMED IN MY PRESENCE OR BY MY DIRECTION, AND IS CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.
[Signature] 6/7/2011
 (SIGNATURE) (DATE)

POOL STATISTICS

SIZE/SHAPE:	21'-3" x 42' - ATHENIAN
POOL AREA:	805
SPA:	50
OTHER:	
TOTAL AREA:	855
PERIMETER:	116
SPA:	25
GALLONAGE:	33,205
DEPTH:	3'-6" TO 8'-0"

DIRECTIONS TO SITE

DIRECTIONS:	MILES: 000	MAP #
32 WEST TO 108 SOUTH FOLLOW TO R/T ONTO HIGHLAND RD., (RT. 216). FOLLOW TO R/T ONTO PRESTWICK DR.-FOLLOW TO L/T ONTO PAPER PLACE, SITE AT END.		14
		GRID
		C-10

Jenny & Peter Yang
 6555 Paper Place
 Highland, Maryland 20777
 Howard County

HOME PHONE:
 OFFICE PHONE:
 CELL PHONE 1: 301-361-0624
 CELL PHONE 2: 410-949-4010

APPROVED FOR ~~Public~~ ^{Private} WATER AND PRIVATE SEWERAGE SYSTEMS
 HOWARD COUNTY HEALTH DEPARTMENT
[Signature] 6/22/2011
 (SIGNATURE) (DATE)

THE EXISTING WELL(S) SHOWN ON THIS PLAN, #HO-94-3893 HAS BEEN LOCATED BY JON COAKLEY/MD POOLS PROFESSIONAL LAND SURVEYOR(S) AND IS ACCURATELY SHOWN.

PROPOSAL SET NOT FOR CONSTRUCTION
 DATE: 06-07-11

LOT:	SUBDIVISION NAME:	DISTRICT:	PIN #
4	VAN'T HOFF PROPERTY	05	427061
SITE PLAN (ENLARGED VIEW)			ZONE:
			ONE
SCALE:	BY:	DATE:	JOB NUMBER:
1"=50'	J.L.R.	4/14/11	JC11-10195
SHEET #:			1.1

Permits: 410-313-2455
 Inspections: 410-313-1810
 Automated Line: 410-313-3800

Howard County Building/Fire Permit Application
 Department of Inspections, Licenses & Permits
 3430 Court House Drive
 Ellicott City, MD 21043

Permit Number:

B11001843

Building Address: 6555 Paper Place
Highland 20777

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

Census Tract: _____ Subdivision: _____

Section: _____ Area: _____ Lot: 4

Tax Map: 34 Parcel: B93 Grid: 17

Zoning: _____ Map Coordinates: 14C-10 Lot Size: _____

Property Owner's Name: Jingli Yang + Peter L.
 Address: 6555 Paper Place
 City: Highland State: _____ Zip Code: 20777
 Home Phone: 443-535-0433 Work Phone: _____

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

Phone: _____ Fax: _____

Email: _____

Existing Use: SFD
 Proposed Use: SFD + Pool

Estimated Construction Cost: \$ 25,000

Description of Work: Inground concrete pool 21 x 42 ft near yard w/ 48" high fence

Occupant or Tenant: _____

Contractor Company: Maryland Pools
 Contact Person: Jeanne Latham
 Address: 9515 Geowig Lane
 City: Columbia State: _____ Zip Code: 21046
 License No.: 6694
 Phone: 410-995-6600 Fax: _____
 Email: _____

Was tenant space previously occupied? Yes No

Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

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

BUILDING DESCRIPTION - COMMERCIAL

Building Characteristics	Utilities
Height:	<u>Water Supply</u>
No. of stories:	<input type="checkbox"/> Public
Gross area, sq. ft./floor:	<input type="checkbox"/> Private
	<u>Sewage Disposal</u>
Area of construction (sq. ft.):	<input type="checkbox"/> Public
	<input type="checkbox"/> Private
Use group:	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<u>Construction type:</u>	<u>Heating System</u>
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Masonry	<u>Sprinkler System:</u>
<input type="checkbox"/> Wood Frame	<input type="checkbox"/> N/A
<input type="checkbox"/> State Certified Modular	<input type="checkbox"/> Full
<input checked="" type="checkbox"/> <u>Roadside Tree Project Permit</u>	<input type="checkbox"/> Partial
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Other Suppression
<u>Roadside Tree Project Permit #</u>	No. of Heads:

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>
<u>Depth</u> <u>Width</u>	<input type="checkbox"/> Public
1 st floor:	<input checked="" type="checkbox"/> Private
2 nd floor:	<u>Sewage Disposal</u>
Basement:	<input type="checkbox"/> Public
<input type="checkbox"/> Finished Basement	<input checked="" type="checkbox"/> Private
<input type="checkbox"/> Unfinished Basement	Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Crawl Space	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Slab on Grade	<u>Heating System</u>
No. of Bedrooms:	<input type="checkbox"/> Electric
<u>Multi-family Dwelling</u>	<input type="checkbox"/> Oil
No. of efficiency units:	<input type="checkbox"/> Natural Gas
No. of 1 BR units:	<input type="checkbox"/> Propane Gas
No. of 2 BR units:	
No. of 3 BR units:	
Other Structure:	
Dimensions:	
Footings:	<input checked="" type="checkbox"/> <u>Roadside Tree Project Permit</u>
Roof:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> State Certified Modular	<u>Roadside Tree Project Permit #</u>
<input type="checkbox"/> Manufactured Home	

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Applicant's Signature: [Signature]
 Print Name: JEANNE LATHAM
 Email Address: _____
 Title/Company: Maryland Pools

Print Name: JEANNE LATHAM
 Date: _____

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>6-21-11</u>	<u>[Signature]</u>
Fire Protection		

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

DPZ SETBACK INFORMATION

Front: _____
 Rear: _____
 Side: _____
 Side St.: _____

All minimum setbacks met? Yes No
 Is Entrance Permit Required? Yes No
 Historic District? Yes No
 Lot Coverage for New Town Zone: _____
 SDP/Red-line approval date: _____

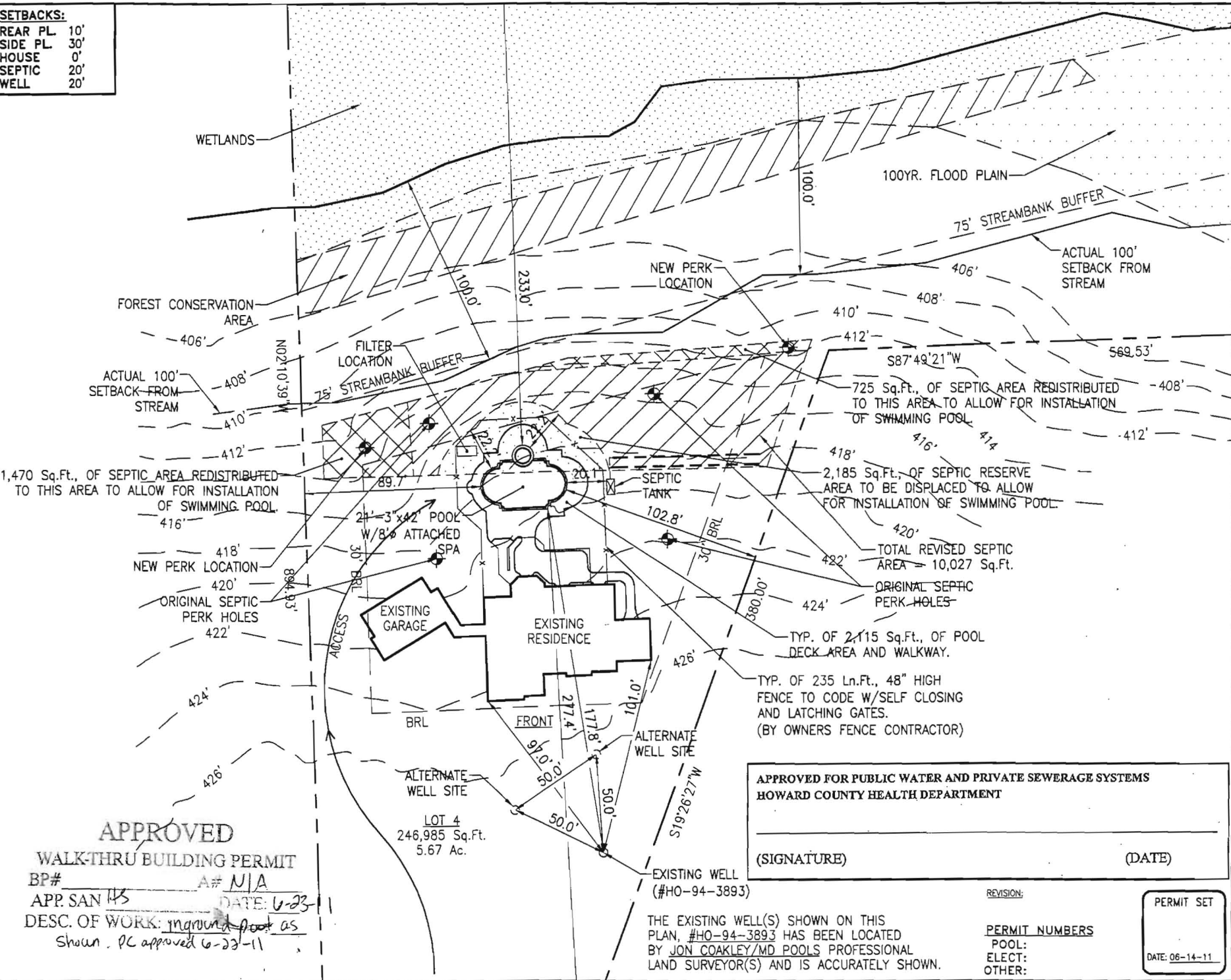
Filing Fee	\$
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$

SETBACKS:

REAR PL	10'
SIDE PL	30'
HOUSE	0'
SEPTIC	20'
WELL	20'

Maryland POOLS Inc.

9515 GERWIG LANE SUITE 121 COLUMBIA, MD 21046 410-995-6600
 11166 MAIN STREET SUITE 402 FAIRFAX, VA 22030 703-359-7192
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(SIGNATURE) _____ (DATE) _____

POOL STATISTICS

SIZE/SHAPE: 21'-3" x 42' - ATHENIAN	
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TOTAL AREA: 855	
PERIMETER: 116	SPA: 25
GALLONAGE: 33,205	DEPTH: 3'-6" TO 8'-0"

DIRECTIONS TO SITE

DIRECTIONS:	MILES: 000	MAP #
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		GRID
		C-10

Jingli Yang & Peter Li
 6555 Paper Place
 Highland, Maryland 20777
 Howard County

HOME PHONE: 443-535-0438
 OFFICE PHONE:
 CELL PHONE 1:
 CELL PHONE 2:

LOT: 4	SUBDIVISION NAME: VAN'T HOFF PROPERTY	DISTRICT: 05	PIN #: 427061
SITE PLAN (ENLARGED VIEW)			ZONE: ONE
SCALE: 1"=50'	BY: J.L.R.	DATE: 6/14/11	JOB NUMBER: JC11-10195
			SHEET #: 1.1

APPROVED
 WALK-THRU BUILDING PERMIT
 BP# _____ A# N/A
 APP. SAN 145 DATE: 6-23-11
 DESC. OF WORK: in-ground pool as shown. PC approved 6-23-11

APPROVED FOR PUBLIC WATER AND PRIVATE SEWERAGE SYSTEMS
 HOWARD COUNTY HEALTH DEPARTMENT

(SIGNATURE) _____ (DATE) _____

THE EXISTING WELL(S) SHOWN ON THIS PLAN, #HO-94-3893 HAS BEEN LOCATED BY JON COAKLEY/MD POOLS PROFESSIONAL LAND SURVEYOR(S) AND IS ACCURATELY SHOWN.

REVISION:
 PERMIT NUMBERS
 POOL:
 ELECT:
 OTHER:

PERMIT SET
 DATE: 06-14-11

LOT 4
 246,985 Sq.Ft.
 5.67 Ac.