



Hearts

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.: B18003355

Building Address: 12902 Highland Rd
 City: Highland State: MD Zip Code: 20777
 Suite/Apt. #: _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: _____
 Section: _____ Area: _____ Lot: _____
 Tax Map: _____ Parcel: 117 Grid: 22
 Zoning: _____ Map Coordinates: _____ Lot Size: 1.258A

Property Owner's Name: Main Street Homes
 Address: 12902 Highland Rd
 City: Highland State: MD Zip Code: 20777
 Phone: 301-590-7340 Fax: _____
 Email: paellapiana@mainstreet.com

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

Existing Use: _____
 Proposed Use: 1000 gallon ug propane tank
 Estimated Construction Cost: \$ 4,900.00
 Description of Work: installing 1000 ug propane tank, hook to provided stub out.
 Occupant/Tenant Name: _____
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Contractor Company: Thompson Gas
 Contact Person: J Randall Thompson
 Address: 6708 Bladensburg PK
 City: Bonnsburg State: MD Zip Code: 21713
 License No.: 60003
 Phone: 301-432-6411 Fax: 301-362-8218
 Email: JFoster@thompsongas.com

Engineer/Architect Company: _____
 Responsible Design Prof.: _____
 Address: _____
 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: _____
Use group: _____	<input type="checkbox"/> Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl Space <input type="checkbox"/> Slab on Grade
Construction type:	No. of Bedrooms: _____
<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	
Electric:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Gas:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Water Supply	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Sewage Disposal	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
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: _____	

RECEIVED
SEP 20 2018
LICENSES & PERMITS
DIVISION

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: _____
 Email Address: _____
 Title/Company: _____

Print Name: J Randall Thompson
 Date: 9/11/18

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)	<u>10/5/18</u>	<u>RKS</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>110.00</u>
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

(F:\Operations\Updated Forms\Building applmp 09.13.2016.docx

* Mail once Issued *



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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: _____

Permit No.: _____

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 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: _____
 Section: _____ Area: _____ Lot: _____
 Tax Map: _____ Parcel: _____ Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: _____
 Proposed Use: _____
 Estimated Construction Cost: \$ _____
 Description of Work: ADD DECK
 Occupant/Tenant Name: _____
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Property Owner's Name: MAIN STREET HOMES, LLC
 Address: 506 MAIN ST
 City: CATHERSBURG State: MD Zip Code: 20778
 Phone: 301-790-9244 Fax: _____
 Email: PETE@NATELLI.COM

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

Contractor Company: MAIN STREET HOMES AT HICKORY RIDGE
 Contact Person: PETE
 Address: 506 MAIN ST
 City: CATHERSBURG State: MD Zip Code: 20778
 License No.: 7914
 Phone: 301-590-7340 Fax: _____
 Email: PETE@NATELLI.COM

Engineer/Architect Company: _____
 Responsible Design Prof.: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
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Commercial Building Characteristics	Residential Building Characteristics	
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No. of stories:	<u>Depth</u>	<u>Width</u>
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:	
> 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	
Electric:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Gas:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Water Supply	
<input type="checkbox"/> Public	
<input type="checkbox"/> Private	
Sewage Disposal	
<input type="checkbox"/> Public	
<input type="checkbox"/> Private	
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:	

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PETE
 Applicant's Signature
PETE@NATELLI.COM
 Email Address
PROJ. MANAGER FOR MAIN STREET HOMES AT HICKORY RIDGE
 Title/Company

PETE DECAPIETRA
 Print Name
4/23/2018
 Date

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

PLEASE WRITE NEATLY & LEGIBLY

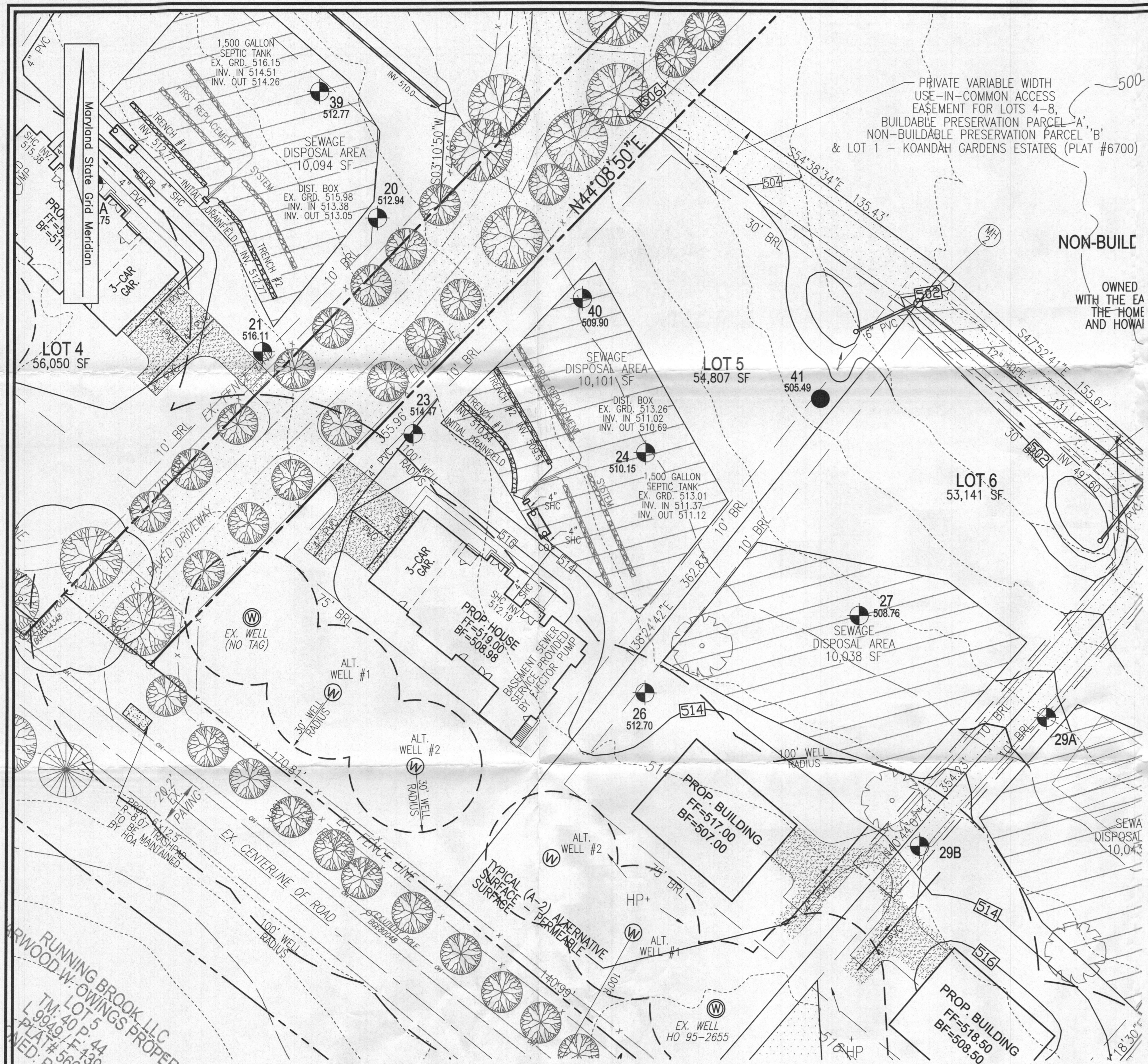
FOR OFFICE USE ONLY

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health		<u>4/23/18 [Signature]</u>

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	#

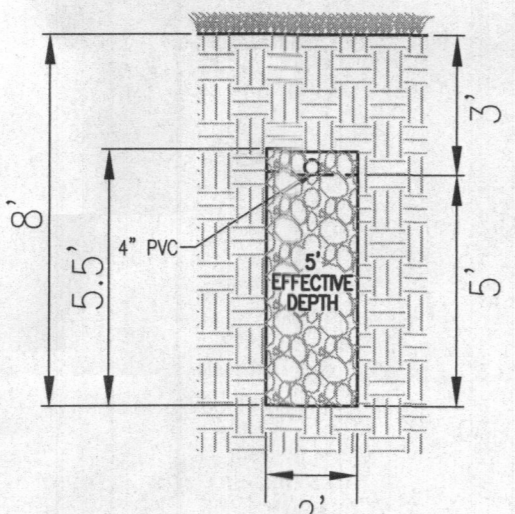
Distribution of Copies: White: Building Officials Green: PSZA,Zoning Yellow: PSZA,Engineering Pink: Health Gold: SHA



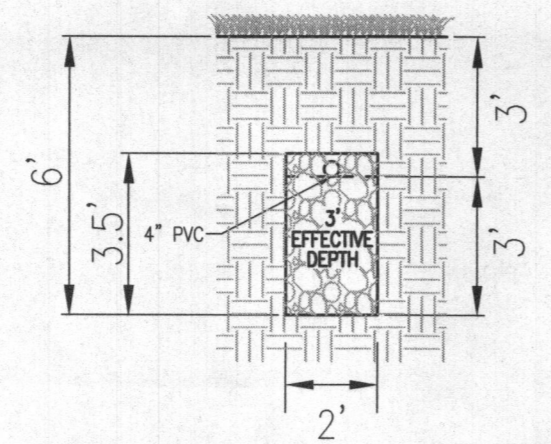
THIS AREA DESIGNATES A PRIVATE SEWAGE AREA OF AT LEAST 10,000 SQUARE FEET AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWERAGE IS AVAILABLE. THESE AREAS SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT ADJUSTMENTS TO THE PRIVATE SEWAGE AREA. RECONSTRUCTION OF A MODIFIED SEWAGE AREA SHALL NOT BE NECESSARY.

PLAN VIEW
SCALE: 1"=30'

TRENCH	TRENCH LENGTH	TRENCH INVERT	INTO BOTTOM OF EXISTING TRENCH	EXISTING GROUND
1	30'	510.54	505.54	513.54
2	50'	509.51	504.51	512.51



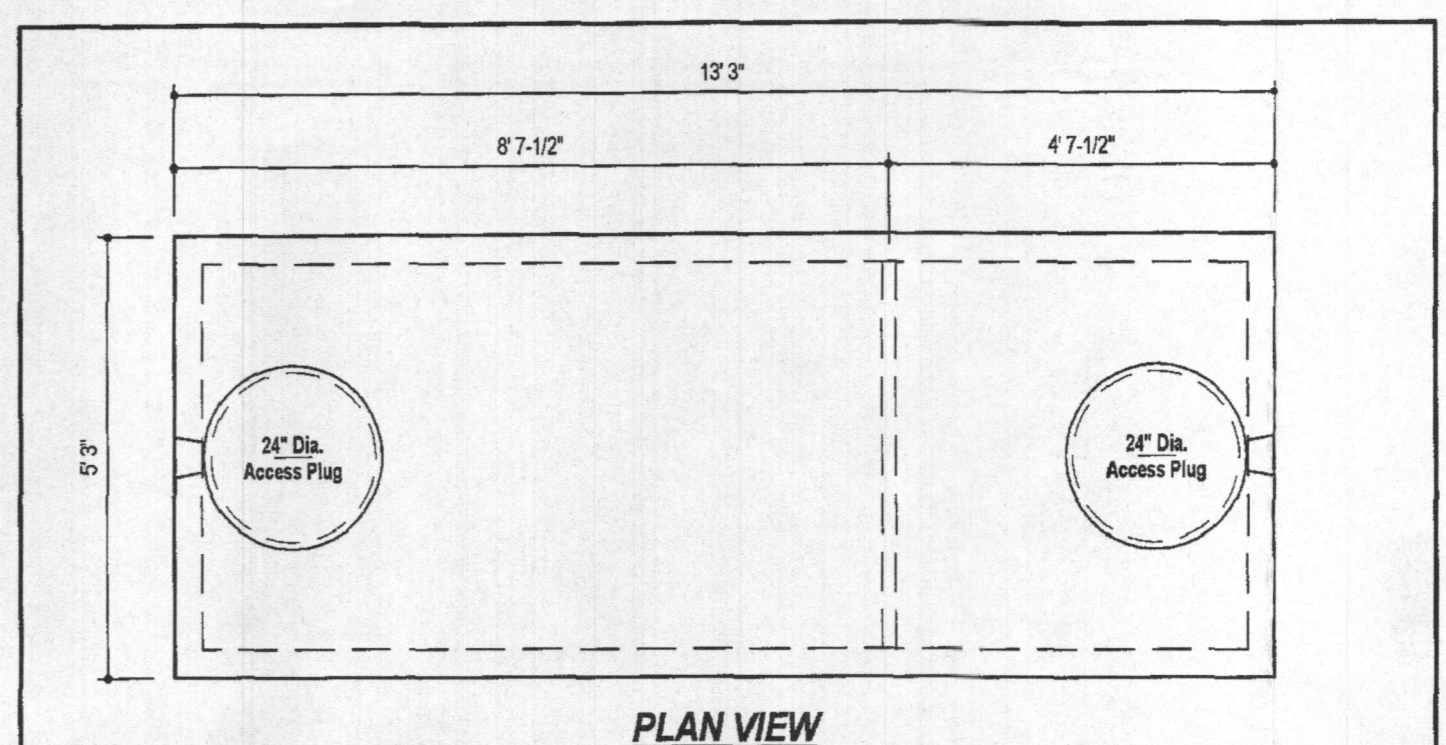
INITIAL SYSTEM TRENCH DETAIL
NOT TO SCALE



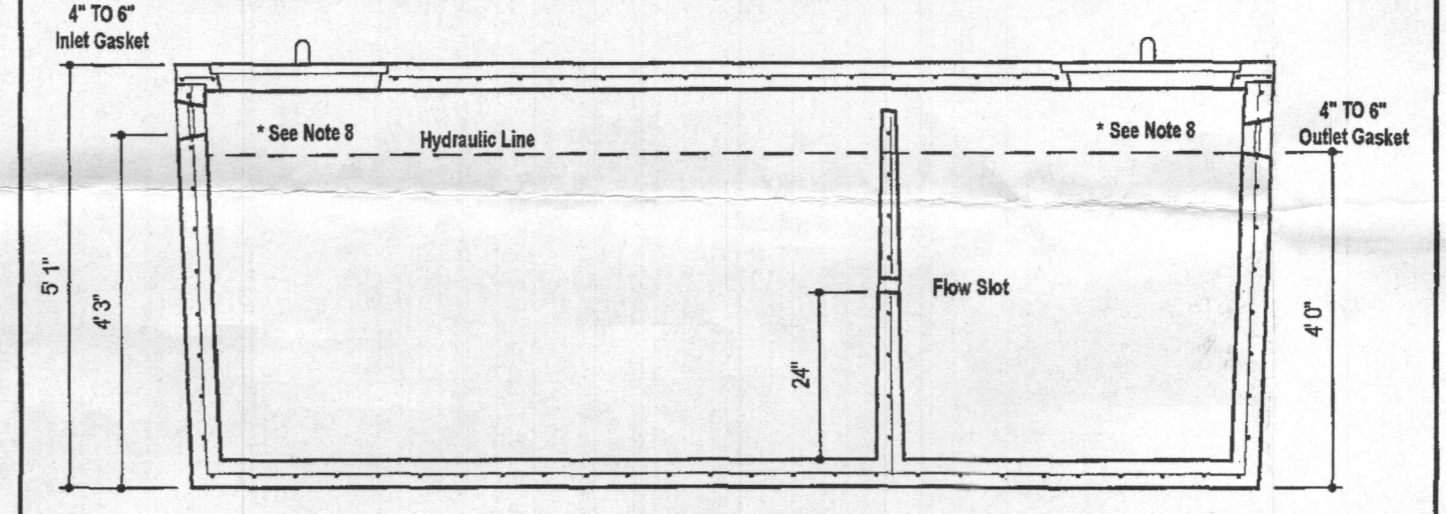
1ST REPLACEMENT TRENCH DETAIL
NOT TO SCALE

SYSTEM CALCULATIONS:
INITIAL SYSTEM:
5 BEDROOMS AT 750gpd / 1.2 ABSORPTION RATE = 625 SQ. FT.
625 SQ. FT. / 2 (TRENCH WIDTH) x .31 (SIDEWALL REDUCTION) = 97 LINEAR FEET
100 TOTAL LINEAR FEET OF TRENCH ARE PROVIDED WITH THE INITIAL SYSTEM.
FIRST REPLACEMENT SYSTEM:
5 BEDROOMS AT 750gpd / 1.2 ABSORPTION RATE = 625 SQ. FT.
625 SQ. FT. / 2 (TRENCH WIDTH) x .44 (SIDEWALL REDUCTION) = 138 LINEAR FEET
150 TOTAL LINEAR FEET OF TRENCH ARE PROVIDED WITH THE FIRST REPLACEMENT SYSTEM.

GENERAL NOTES:
1. ANY CHANGE TO THE LOCATIONS OR DEPTHS TO ANY COMPONENTS MUST BE APPROVED BY THE ENGINEER AND THE HOWARD COUNTY HEALTH DEPARTMENT PRIOR TO INSTALLATION. A REVISED SITE PLAN MAY BE REQUIRED.
2. THE MAXIMUM EARTH COVER OVER THE TANK IS 3 FEET. GREATER EARTH COVER WILL REQUIRE A HEAVY LOAD BEARING TANK.
3. ELECTRICAL WORK FOR THE INSTALLATION MUST BE PERFORMED BY A LICENSED ELECTRICIAN.
4. THE WELL (NO TAG) HAS BEEN FIELD LOCATED AND IS ACCURATELY SHOWN.
5. ALL WELLS AND SEPTIC SYSTEMS LOCATED WITHIN 100' OF THE PROPERTY BOUNDARIES AND 200' DOWN GRADIENT OF ANY WELLS AND/OR SEPTIC SYSTEMS HAVE BEEN SHOWN.



PLAN VIEW



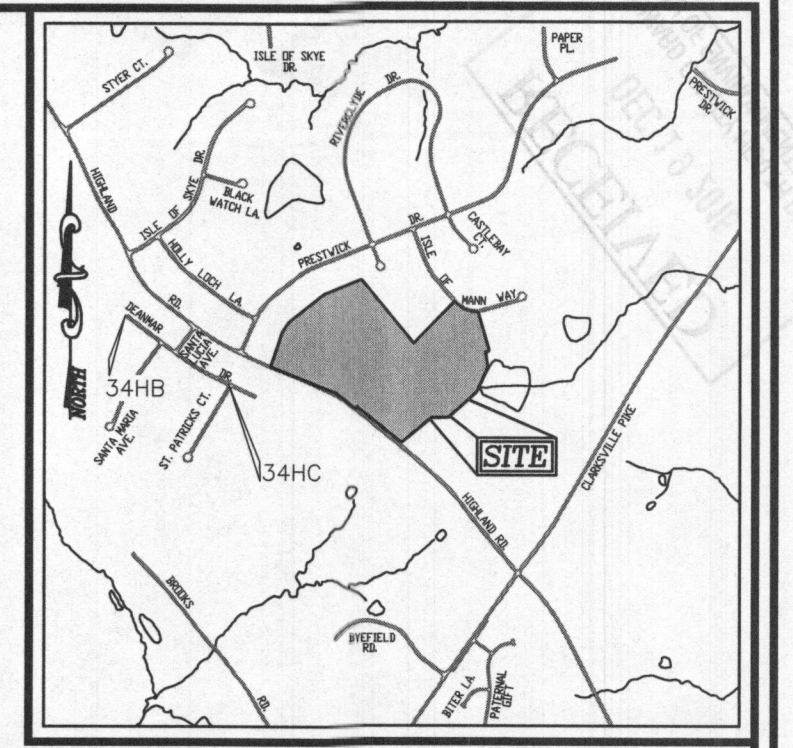
SECTION A-A

DESIGN DATA & GENERAL NOTES
[1] Concrete strength f'c=4,000 p.s.i. @ 28 days. Density = 150 pcf.
[2] Cement - Portland Type III per ASTM C 150-02.
[3] Aggregate & proportions per ASTM C 209-02 & C 494-02.
[4] Reinforcing per ASTM A 98. Min. 1-1/2" cover.
[5] Top slab sealed with butyl rope mastic.
[6] 4" wall, base, & top thickness.
[7] Max 5-1/2" of cover.
[8] Depending on use of tank, Inlet & Outlet baffles may be required by code.

WEIGHT = 16,750 lbs.

M B I
Mayer Bros, Inc.
www.mayerbrosprecast.com

1,500 GALLON TANK (Non-Traffic) 2-Compartment		
Stock Item		
Dwg. No. 1500-2C	No Scale	Aug 11, 2008

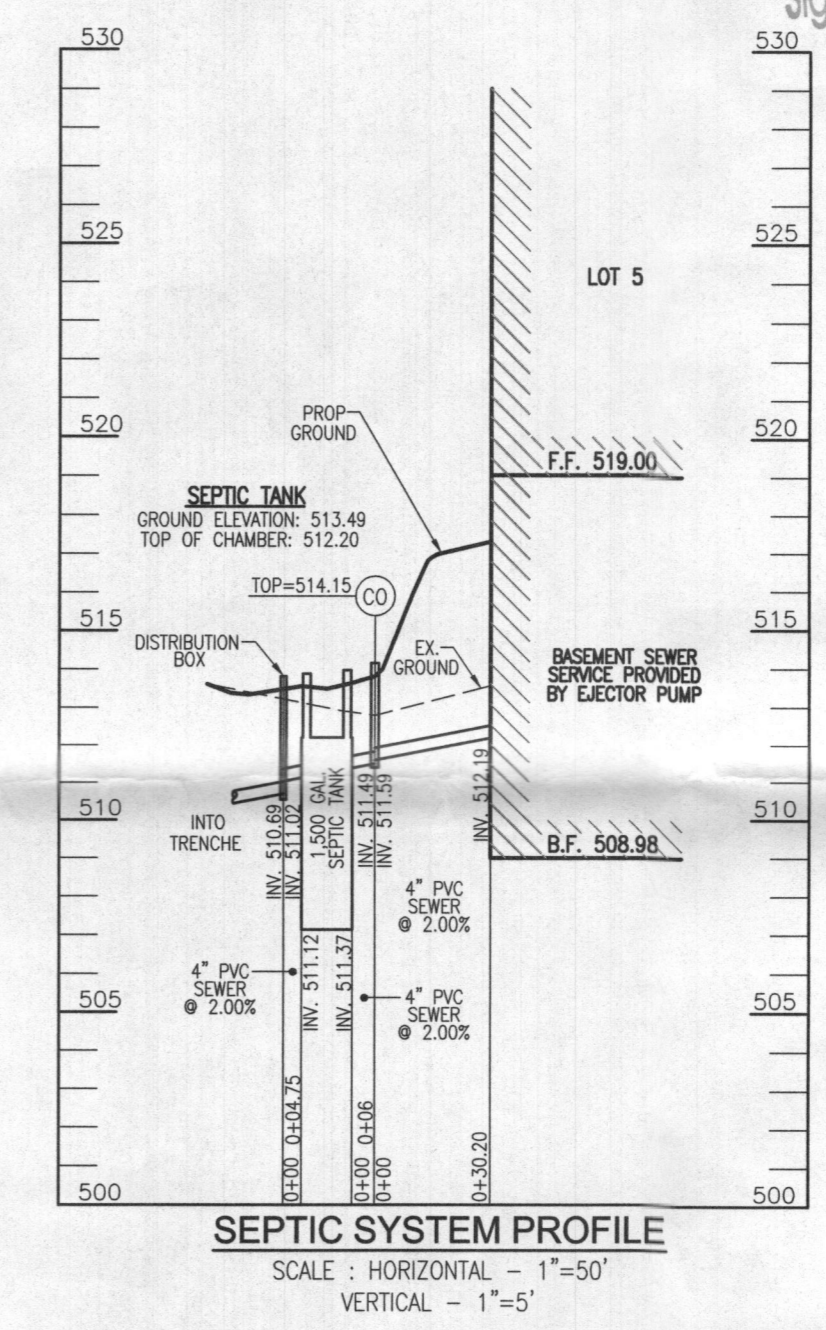


VICINITY MAP
SCALE: 1"=2000'
ADC MAP COORDINATE: 31, B5

LEGEND:

	BOUNDARY LINE
	RIGHT-OF-WAY LINE
	EXISTING EDGE OF PAVING
	EXISTING UTILITY POLE
	EXISTING FENCE LINE
	EXISTING 10' CONTOUR
	EXISTING 2' CONTOUR
	EXISTING TREES
	PRIVATE VARIABLE WIDTH USE-IN-COMMON ACCESS EASEMENT
	PRIVATE VARIABLE WIDTH STORMWATER MANAGEMENT DRAINAGE & UTILITY EASEMENT
	PROP. ALTERNATE WELL LOCATION
	EX. WELL LOCATION
	FAILED PERC. TEST
	PASSED PERC. TEST
	APPROVED SEPTIC AREA

Approved Septic System Plan
Howard County Health Department
1500-gal Septic Tank
to Gravity drain field
for 5-bedroom SFD
R. Buck 6/7/2017
Signature Date
B17001922



SEPTIC SYSTEM PROFILE
SCALE: HORIZONTAL - 1"=50'
VERTICAL - 1"=5'

OWNER/DEVELOPER
JOHN P. MCDANIEL
13032 HIGHLAND ROAD
HIGHLAND, MD 20777
ATTN: MR. JOE RUTTER
(443) 367-0422

ONSITE SEWAGE DISPOSAL SYSTEM DESIGN PLAN

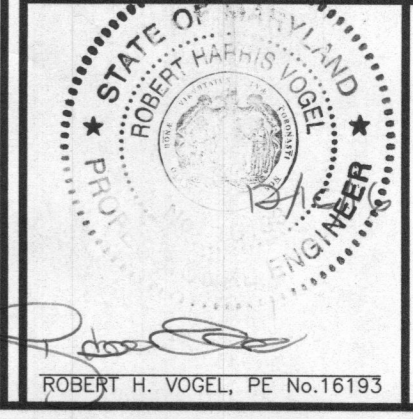
MCDANIEL PROPERTY - LOT 5
12992 HIGHLAND ROAD
HIGHLAND, MD 20777

BUILDING PERMIT #

TAX MAP: 34 GRID: 22
TAX MAP: 40 GRID: 4
5TH ELECTION DISTRICT

ZONED: RR-DEO
PARCEL: 117 & 78 (LOT 29)
HOWARD COUNTY, MARYLAND

ROBERT H. VOGEL ENGINEERING, INC.
ENGINEERS • SURVEYORS • PLANNERS
8407 MAIN STREET
ELICOTT CITY, MD 21043
TEL: 410.461.7666
FAX: 410.461.8961



PROFESSIONAL CERTIFICATE
I HEREBY CERTIFY THAT THESE DOCUMENTS WERE PREPARED OR APPROVED BY ME, AND THAT I AM A FULLY LICENSED PROFESSIONAL ENGINEER UNDER THE LAWS OF THE STATE OF MARYLAND, LICENSE NO. 16193, EXPIRATION DATE: 09-27-2018.

DESIGN BY: RHV
DRAWN BY: JMR
CHECKED BY: RHV
DATE: DECEMBER 2016
SCALE: AS SHOWN
W.O. NO.: 08-43

OK
C. B. Bat



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: 5/16/17

Permit No.: B17001922

Building Address: 12992 HIGHLAND ROAD
 City: HIGHLAND State: MD Zip Code: 20777
 Suite/Apt. #: N/A SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: 3440 MCDANIELS PROP
 Section: _____ Area: _____ Lot: 5
 Tax Map: 0034 Parcel: 0117 Grid: 0022
 Zoning: RR Map Coordinates: _____ Lot Size: 1,2580

Property Owner's Name: JOHN P. MCDANIEL
 Address: 13032 HIGHLAND ROAD
 City: HIGHLAND State: MD Zip Code: 20777
 Phone: 410-350-5151 Fax: _____
 Email: jpm@hickoryridgegroup.com

Applicant's Name & Mailing Address, (if other than stated herein)
 Applicant's Name: DAVID DOMBERT
 Address: 506 MAIN STREET 3rd FLOOR
 City: GANNESBURG State: MD Zip Code: 20878
 Phone: 301-370-5233 Fax: 301-576-0347
 Email: ddombert@natelli.com

Contractor Company: MAIN STREET HOMES @ HICKORY
 Contact Person: DAVID DOMBERT
 Address: 506 MAIN STREET 3rd FLOOR
 City: GANNESBURG State: MD Zip Code: 20878
 License No.: 7914
 Phone: 301-370-5233 Fax: 301-576-0347
 Email: ddombert@natelli.com

Engineer/Architect Company: CUSTOM DESIGN CONCEPTS
 Responsible Design Prof.: MARK SULLENBERGER
 Address: 6710 WHITTIER BLVD
 City: MCLEAN State: VA Zip Code: 22101
 Phone: 703-749-9040 Fax: _____
 Email: mark@cdcarch.com

Existing Use: FARM
 Proposed Use: SINGLE FAMILY RESIDENCE
 Estimated Construction Cost: \$ 800,000.00
 Description of Work: 2 STORY + BASEMENT W/ 3 CAR GARAGE 5 BEDROOM 5 1/2 BATH NEW CONSTRUCTION
 Occupant/Tenant Name: N/A
 Was tenant space previously occupied? Yes No
 Contact Name: N/A
 Address: _____
 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: <u>59' 98'</u>
Area of construction (sq. ft.):	2 nd floor: <u>59' 98'</u>
Use group:	Basement: <u>59' 98'</u>
Construction type:	<input checked="" type="checkbox"/> Finished Basement
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Unfinished Basement
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Crawl Space
<input checked="" type="checkbox"/> Masonry	<input type="checkbox"/> Slab on Grade
<input checked="" type="checkbox"/> Wood Frame	No. of Bedrooms: <u>5</u>
<input type="checkbox"/> State Certified Modular	Multi-family Dwelling
	No. of efficiency units:
	No. of 1 BR units:
	No. of 2 BR units:
	No. of 3 BR units:
	Other Structure:
	Dimensions:
<input checked="" type="checkbox"/> Roadside Tree Project Permit	Footings:
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Building Shell Permit Number:	

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Applicant's Signature: [Signature] Print Name: DAVID DOMBERT
 Email Address: ddombert@natelli.com Date: 4/29/17
 Title/Company: General Manager Main Street Homes

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

PLEASE WRITE NEATLY & LEGIBLY

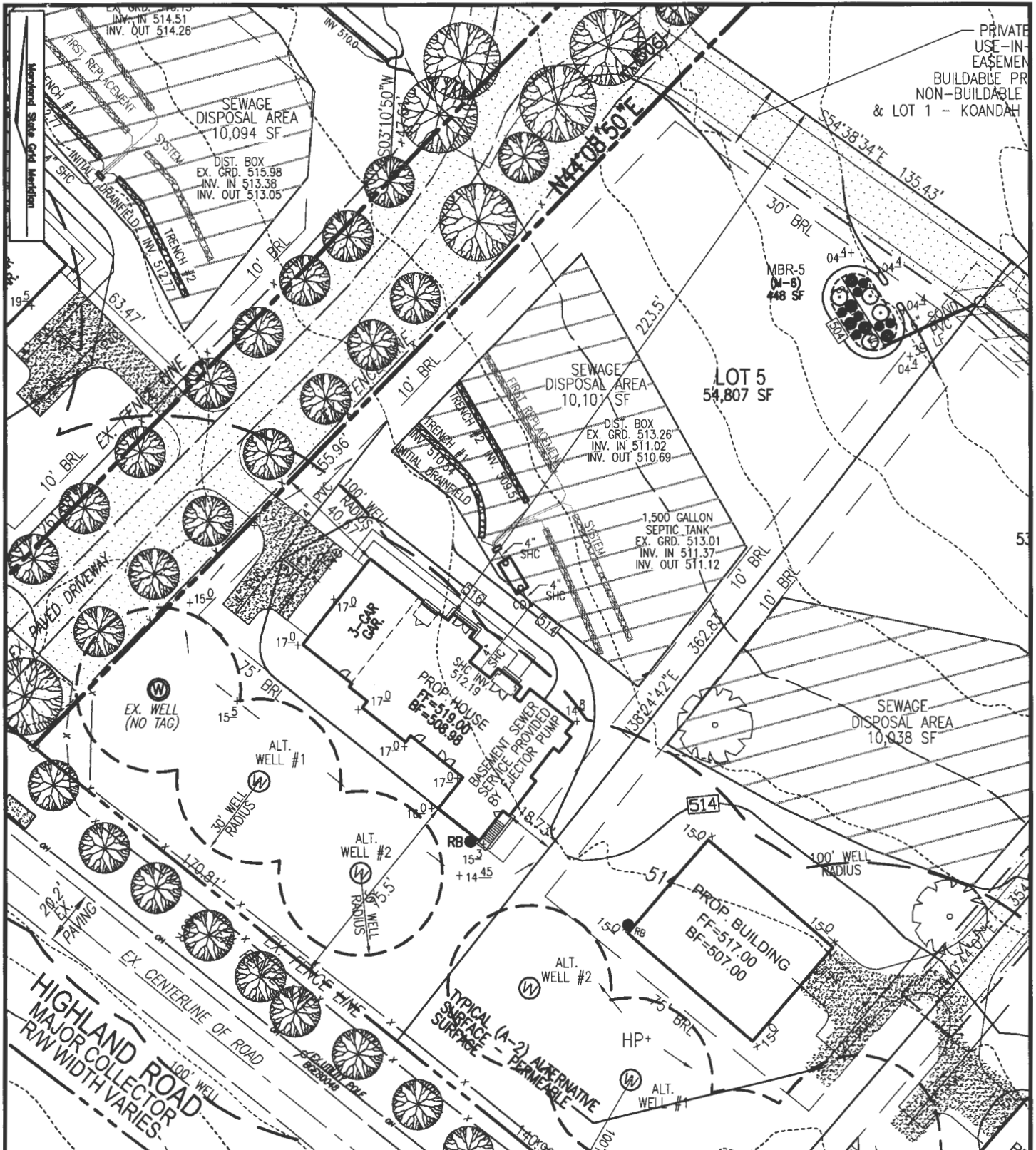
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Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	<u>4/27/17</u>	<u>[Signature]</u>

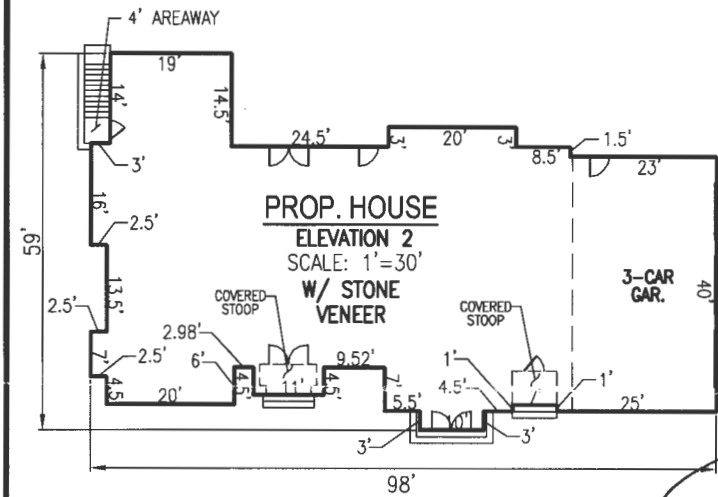
Is Sediment Control approval required for Issuance? Yes No
 CONTINGENCY CONSTRUCTION START

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Front:
Rear:
Side:
Side St.:
All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No
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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	\$ <u>50.00</u>
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$
Check	#



SCALE
1"=50'



STORMWATER MANAGEMENT FOR THIS DEVELOPMENT IS PROVIDED BY THE USE OF PERVIOUS PAVING PRACTICES & MICRO-SCALE PRACTICES IN ACCORDANCE WITH ENVIRONMENTAL SITE DESIGN CRITERIA.

Approved Septic System Plan
Howard County Health Department
5-Bed room SFD, as illustrated

R. Bieler
Signature

6/7/2017
BUILDER
Date

B17001922

SCALE: AS SHOWN
DRAWN BY: JMR
CHECKED BY: EDS
DATE: JANUARY 2017
PROJECT #: 08-43
SHEET #: 1 OF 1

PLOT PLAN
MCDANIEL PROPERTY
LOT 5
REF: F-14-021
PARCEL: 117 & 78 (LOT 29)
TAX MAP: 34 BLOCK: 22
TAX MAP: 40 BLOCK: 4
5TH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND

ADDRESS
12992 HIGHLAND ROAD
HIGHLAND, MD 20777
GP: 17-035

OWNER/DEVELOPER
JOHN P. MCDANIEL
13032 HIGHLAND ROAD
HIGHLAND, MD 20777
ATTN: MR. JOE RUTTER
(443) 367-0422

ROBERT H. VOGEL ENGINEERING, INC.
ENGINEERS • SURVEYORS • PLANNERS
8407 MAIN STREET ELLICOTT CITY, MD 21043 TEL: 410.461.7666 FAX: 410.461.8961

Name: MAIN STREET HOMES AT HICKORY RIDGE FARM LLC
Street Address: 506 MAIN STREET
City, State, Zip: GAITHERSBURG, MD 20878
Date: 4/25/2018

Amendment, Permit # B17001922

Ms. Debbie Whalen
Division of Plan Review
Department of Inspections, Licenses and Permits
Howard County Government
3430 Court House Dr
Ellicott City, MD 21043

Dear Ms. Whalen:

I am requesting to amend Permit # B17001922 at
12982 HIGHLAND RD, HIGHLAND MD 20777 to
ADD A 24'-6" x 14'-6" DECK WITH STEPS-TO-GRADE (WRAPPED AROUND)

Enclosed:

\$25.00 * CK 036350 ✓ pd
 Plot Plans INV# 530470
 Sets of Construction Drawings
 Other:

If there is anything we can do to assist you, please let me know.

Sincerely,

CC: P+Z
Heathly

Name: PETE DELLAPETRA
Title: PROJ. MANAGER
Phone: 301-590-7340
Email: PETE@NATELLI.COM

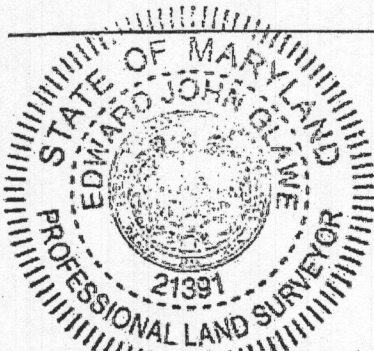
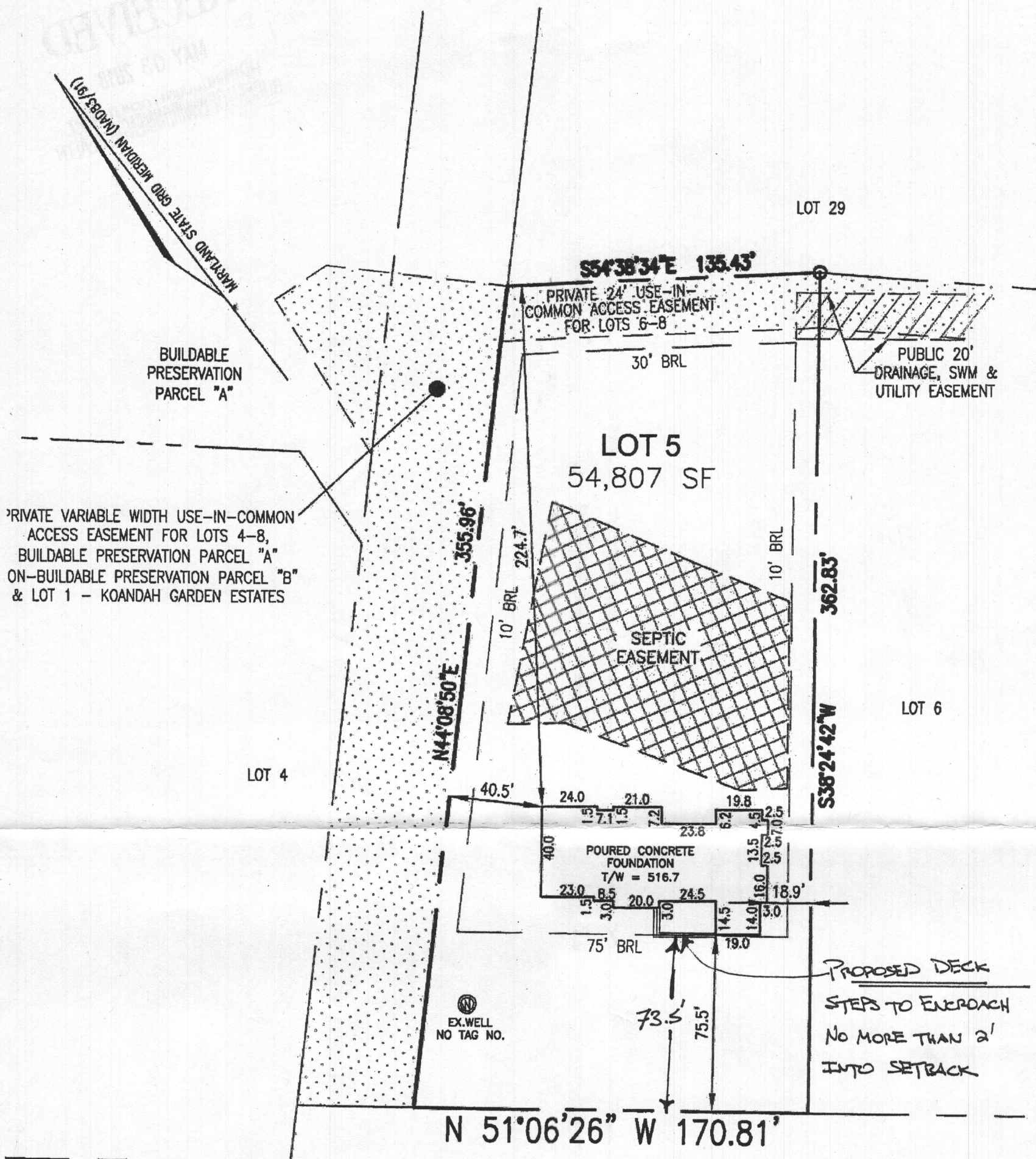
RECEIVED

APR 25 2018
LICENSES & PERMITS
DIVISION

Amendment Letter

* PICK *

THIS WALL CHECK DRAWING CONTAINS A HORIZONTAL TOLERANCE IN ACCURACY OF 0.1' AND A VERTICAL TOLERANCE IN ACCURACY OF 0.2'



I HEREBY CERTIFY TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF THAT THE IMPROVEMENTS ARE LOCATED AS SHOWN AND THERE ARE NO ENCROACHMENTS EXCEPT AS SHOWN.

Edward J. Glawe JANUARY 24, 2018
 EDWARD J. GLAWE, PROFESSIONAL LAND SURVEYOR #21391 DATE

HIGHLAND ROAD
 MAJOR COLLECTOR
 R/W WIDTH VARIES

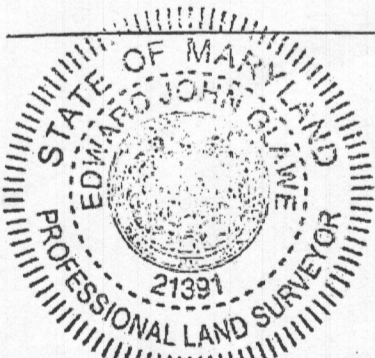
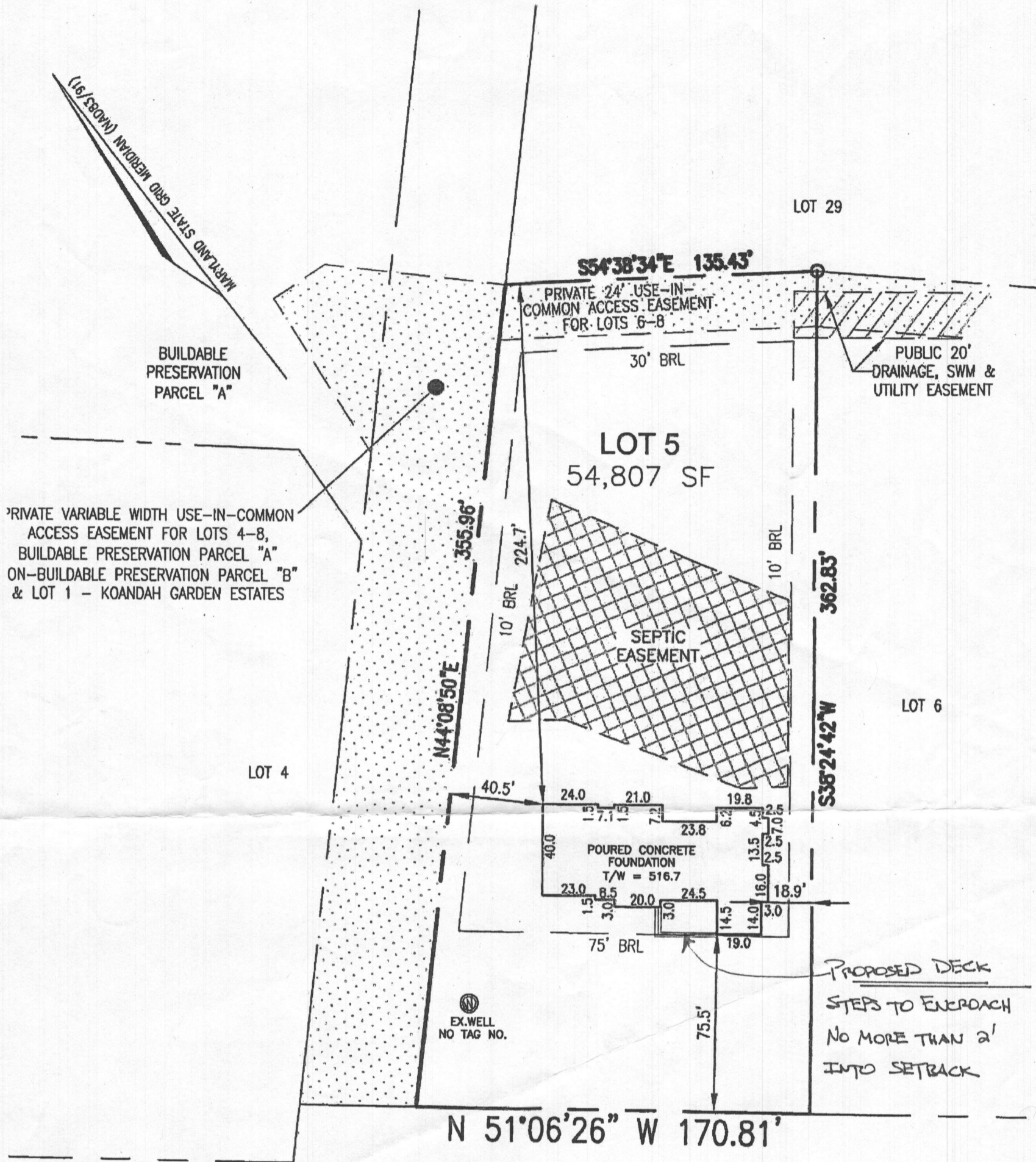
APPROVED
 WALKTHRU BUILDING PERMIT
 BP# B17001922 A#

DATE: 4-23-18
D. Bernard
Deck w/ steps
Approved by
Shan

PROFESSIONAL CERTIFICATION: I HEREBY CERTIFY THAT THESE DOCUMENTS WERE PREPARED BY ME OR UNDER MY RESPONSIBLE CHARGE, AND THAT I AM A DULY LICENSED PROFESSIONAL LAND SURVEYOR UNDER THE LAWS OF THE STATE OF MARYLAND, LICENSE NO. 21391, EXPIRATION DATE JUNE 4, 2019.

SCALE 1" = 60'	DATE 01/10/2018	ROBERT H. VOGEL ENGINEERING, INC. ENGINEERS - SURVEYORS - PLANNERS 8407 MAIN STREET ELLICOTT CITY, MARYLAND 21043 TEL: 410-461-7666 FAX: 410-461-8961	WALL CHECK DRAWING 12992 HIGHLAND ROAD LOT 5 MCDANIEL PROPERTY PLAT NO. 23442 SECOND ELECTION DISTRICT HOWARD COUNTY, MARYLAND
DRAWN BY B.W.J.	CHECKED BY E.J.G.		
PLAT NUMBER 23440-23442	JOB NUMBER 08-43		

THIS WALL CHECK DRAWING CONTAINS A HORIZONTAL TOLERANCE IN ACCURACY OF 0.1' AND A VERTICAL TOLERANCE IN ACCURACY OF 0.2'



I HEREBY CERTIFY TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF THAT THE IMPROVEMENTS ARE LOCATED AS SHOWN AND THERE ARE NO ENCROACHMENTS EXCEPT AS SHOWN.

Edward J. Glawe January 24, 2018
 EDWARD J. GLAWE, PROFESSIONAL LAND SURVEYOR #21391 DATE

HIGHLAND ROAD
 MAJOR COLLECTOR
 R/W WIDTH VARIES

APPROVED

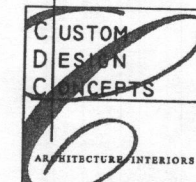
WALKTHRU BUILDING PERMIT
 BP# _____ A# _____

D. Bernard DATE: 4-23-18
Deck w/ steps
Approved
Shan

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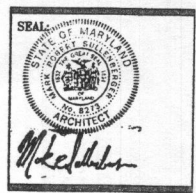
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DRAWN BY B.W.J.	CHECKED BY E.J.G.		
PLAT NUMBER 23440-23442	JOB NUMBER 08-43		

3 bedrooms
'OK' RB
6/7/2017



PROJECT # 2015021
HICKORY RIDGE FARM

MAIN STREET HOMES
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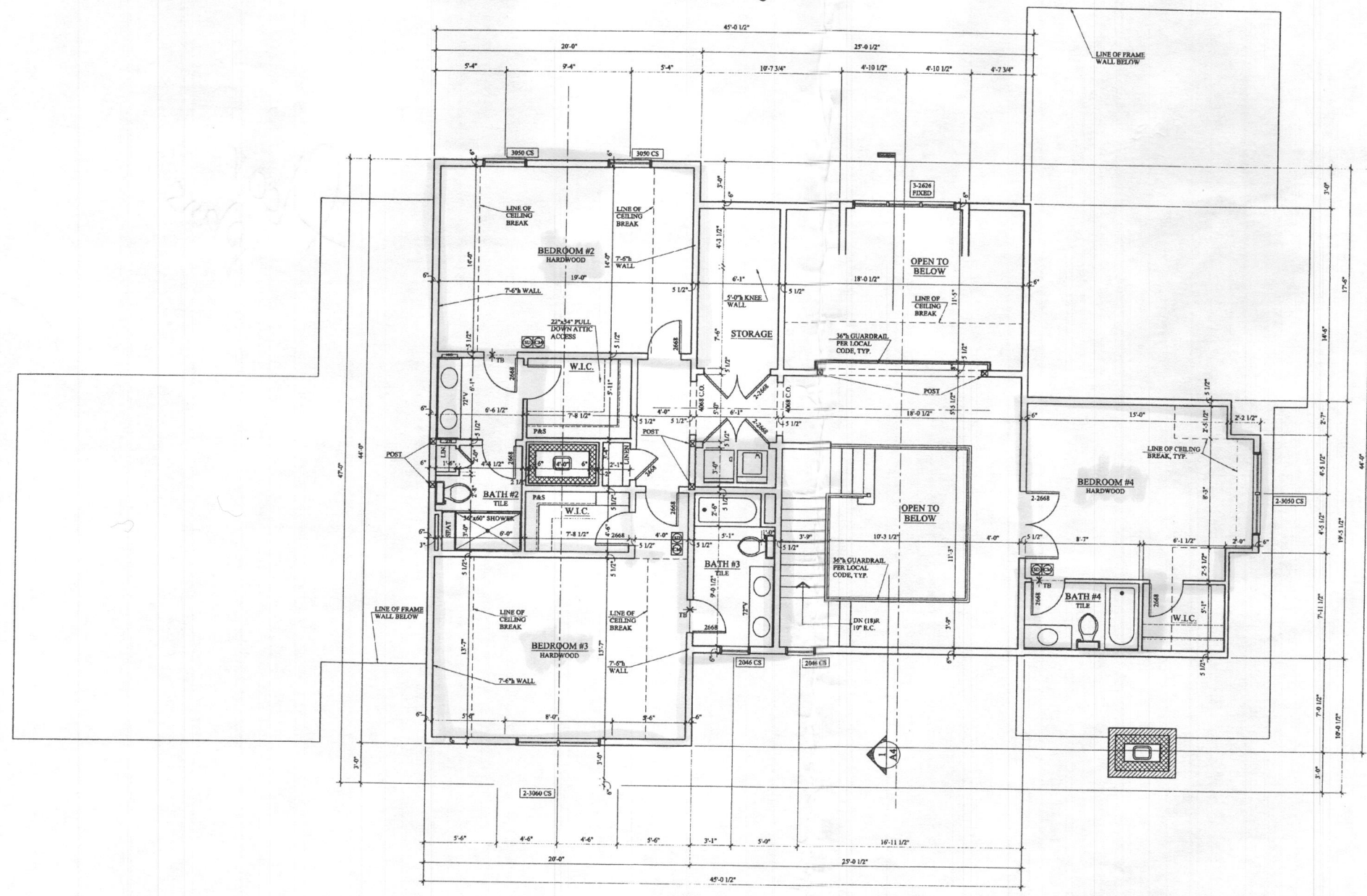


DATE:
1/27/17 PERMIT SET

REVISIONS:

NO.	DESCRIPTION

A3a



1 UPPER FLOOR PLAN
A3a w/ OPTIONAL BEDROOM #4 1/4" = 1'-0"

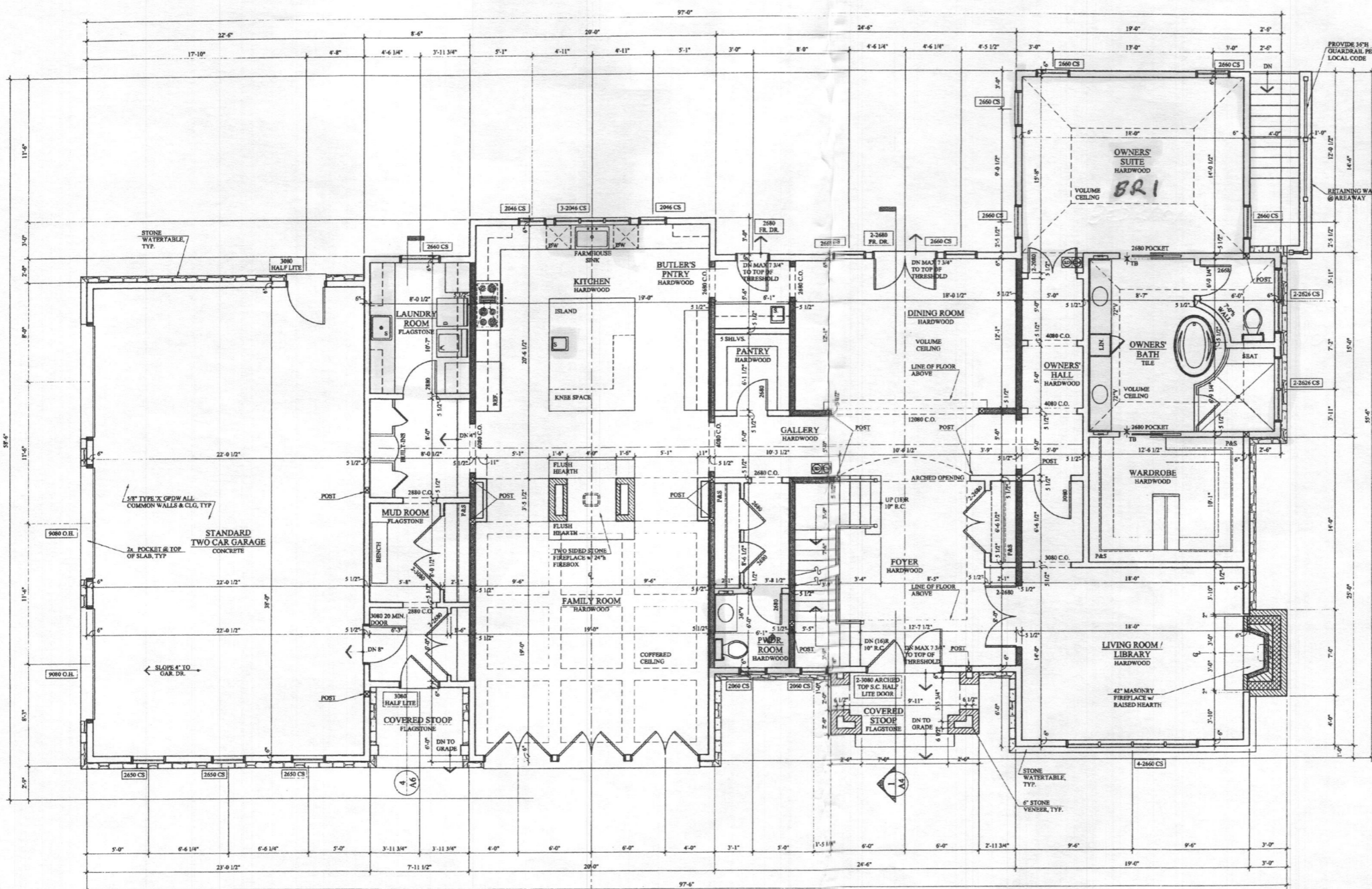
HATCH STANDARDS

[Hatch Pattern]	CONC. BLOCK VENEER
[Hatch Pattern]	STONE VENEER
[Hatch Pattern]	STONE WATERTABLE
[Hatch Pattern]	MASONRY LEDGE
[Hatch Pattern]	SLAB LEDGE
[Hatch Pattern]	PRECAST VENEER
[Hatch Pattern]	INSULATION

HAZARDOUS GLAZING LOCATIONS:
ALL GLAZING AT BATH TUBS & OTHER HAZARDOUS LOCATIONS MUST BE IN COMPLIANCE W/ THE IRC 2009, SECTION R308.4

- NOTE:
- ALL DIMENSIONS ARE TO FACE OF STUD EXCEPT EXTERIOR WALLS.
 - ALL EXTERIOR WALL DIMENSIONS INCLUDE EXTERIOR SHEATHING.
 - ALL INTERIOR PARTITIONS NOT DIMENSIONED SHALL BE 3/2".
 - ALL INTERIOR BEARING PARTITIONS ARE SHADED.
 - SLOPE SLAB TO FLOOR DRAINS & SUMP CROCKS WHERE PROVIDED.
 - REFER TO ELEVATIONS FOR WINDOW HEAD HEIGHTS.

1 bedroom
'OK' reb 6/7/2017



1 MAIN LEVEL FLOOR PLAN
A2 w/ FRONT ELEVATION OPTION 2 & 3 CAR GARAGE
 1/4" = 1'-0"

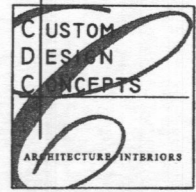
HATCH STANDARDS

	CONC. BLOCK VENEER
	STONE VENEER
	STONE WATERTABLE
	MASONRY LEDGE
	SLAB LEDGE
	PRECAST VENEER
	INSULATION

HAZARDOUS GLAZING LOCATIONS:
 ALL GLAZING AT BATH TUBS & OTHER HAZARDOUS LOCATIONS MUST BE IN COMPLIANCE W/ THE IBC 2009, SECTION 4308.4

NOTE:

- ALL DIMENSIONS ARE TO FACE OF STUD EXCEPT EXTERIOR WALLS.
- ALL EXTERIOR WALL DIMENSIONS INCLUDE EXTERIOR SHEATHING.
- ALL INTERIOR PARTITIONS NOT DIMENSIONED SHALL BE 1/2".
- ALL INTERIOR BEARING PARTITIONS ARE SHADED.
- SLOPE SLAB TO FLOOR DRAINS & SUMP CROCKS WHERE PROVIDED.
- REFER TO ELEVATIONS FOR WINDOW HEAD HEIGHTS.



PROJECT # 2015021
HICKORY RIDGE FARM

MAIN STREET HOMES
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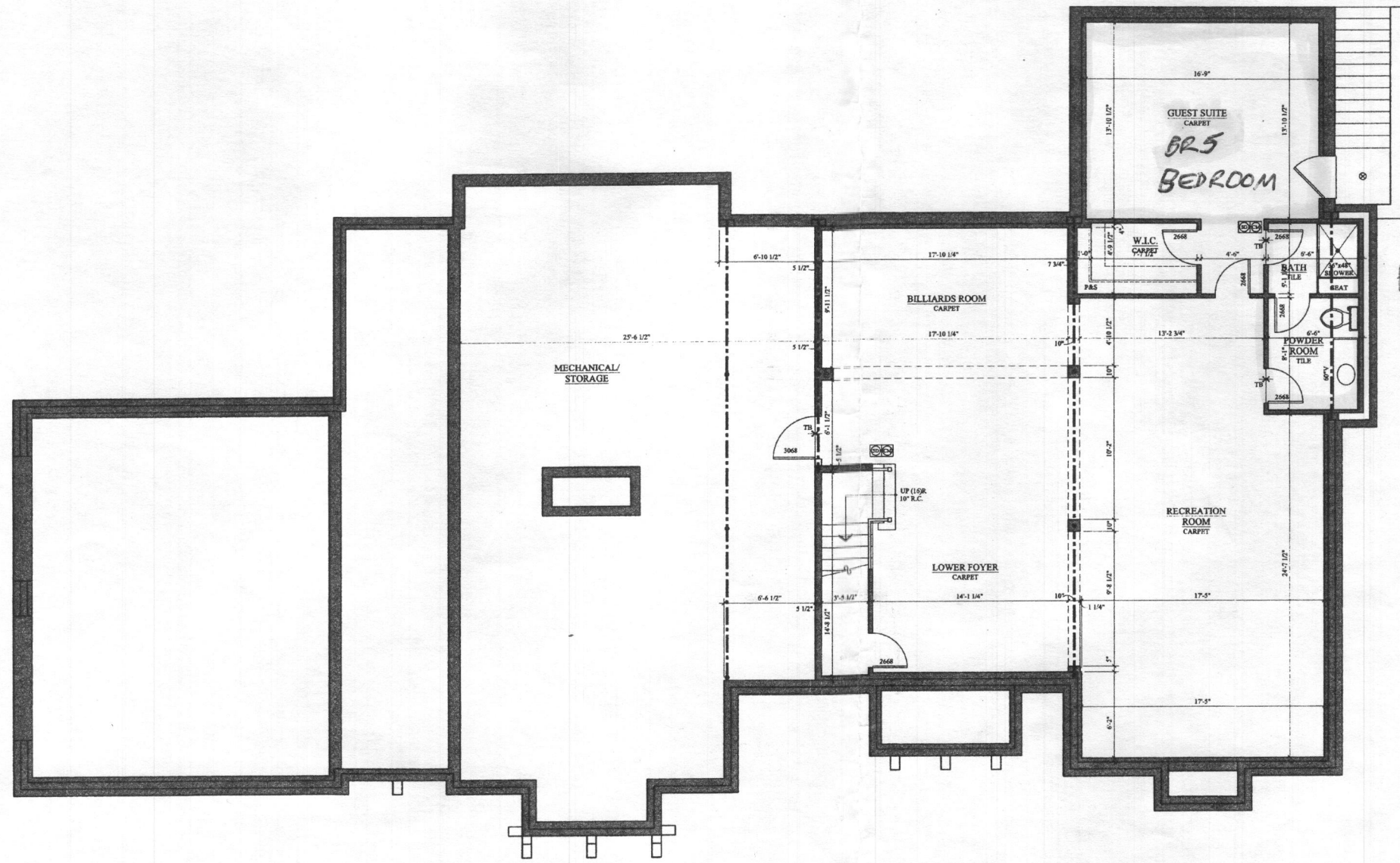


DATE:
 1/27/17 PERMIT SET

REVISIONS:

A2a

1 bedroom
'OK' rev
6/27/2017

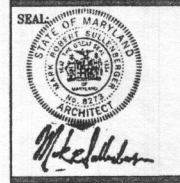


Full Bath



PROJECT # 2015021
HICKORY RIDGE FARM

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Melbourne, VA 22101
(703) 749-9049
www.cdarch.com



DATE:
1/27/17 PERMIT SET

REVISIONS:

NO.	DESCRIPTION

1
Ala BASEMENT PLAN
1/4" = 1'-0"

Ala